

PPLPMDL0020000001	Cleveland	OH	44106	1/5/2011	talked to Patty,Pharmacist,about Butrans FPI,black box warning,dosage strengths available,medication guide,instructions for patients on how to apply Butrans transdermal system,stocking,formulary coverage and patient savings cards.Patty said this was a great option for patients on Vicodin that she feels are taking too many pills a month and are in more of that moderate pain side and could really benefit from Butrans.Patty loved that Butrans was a once weekly transdermal system,she said i should be sure i talk to Family Medicine, referred me to a Clinical Pharm D in Oncology to share all of this information with and a Clinical Pharm D in HIV/Aids clinic.i asked what she see's the most of in the out-patient pharmacy and Patty said Vicodin is the biggest and Percocet, so they would like to decrease their stock of those medicines and Butrans could help do that.
PPLPMDL0020000001	Lyndhurst	OH	44124	1/5/2011	Reminded Karen of the Ryzolt patient type/indication, the 3 available strengths and how the value card works. Asked her to convert appropriate patient to once a day ryzolt. She said she would if the pain is chronic. Oxycontin indication reminder.
PPLPMDL0020000001	Cleveland	OH	44114	1/5/2011	talked to Laura,Pharmacy Manager and Liz,Pharmacy Technician,about Butrans FPI,black box warning,appropriate patient selection,dosage strengths available,stocking/ndc codes and formulary coverage.i asked Laura who she thought could benefit from Butrans? Laura said they have so many patients taking hydrocodone combo's that this would be a good place before the short-acting,so i agreed and said that was where we were placing Butrans as well as opioid naive patients.i asked if Laura or Liz saw any Lidoderm or Flector patches written here? they said no not recently and i asked who are doctors that write a lot of hydrocodone combo's-Robson,Pate,Nickels,Katz and Marshall were some doctors Laura noted and said to work with them on Butrans.i asked if Laura would order 2 boxes each strength,she said no,tried for 1 box of 2strengths and Laura said when she gets a script,she'll order Butrans and it will be in pharmacy the next morning.i told her i would follow-up end of month
PPLPMDL0020000001	Westlake	OH	44145	1/5/2011	Met Dr in the hospital, He is ER Dr at St John Westshore and also works with the resident program. He was sorry to miss the LELE and finds treating pain patients extremely frustrating as an ER DR. He said he sees constant drug seekers. We discussed some of the tools to help pick appropriate patients. We discussed the providing relief preventing abuse brochure, partners against pain resources and Oarrs program. He liked the OxyContin conversion guide for his reference.
PPLPMDL0020000001	Cleveland	OH	44106	1/5/2011	Talked to Margie Barron,Pharmacy Manager for Bolwell Health,University Hospitals out-patient pharmacy,about Butrans FPI,black box warning,dosage strengths available,stocking,formulary coverage and patient savings cards.i asked Margie who was the patient in her mind that could benefit from Butrans? Margie said all of these patients on hydrocodone combo's as she would like to decrease her Vicodin supply and this could be a great option before the doctor ever considers Vicodin.We also talked about the opioid-naive patients and Butrans being an option for them and Margie thought that was a great place.Margie said i should try and talk to Family Medicine,Internal Medicine and then Pain management and Oncology physicians about this medication.i asked if Margie would order a few boxes of each dosage strength of Butrans and she agreed but said i should come back Friday afternoon and we can look at computer together to see if Butrans ndc codes are in system.
PPLPMDL0020000001	Cleveland	OH	44106	1/5/2011	talked to Patty,Pharmacist,Sheila,Pharmacist and Margie,Pharmacy Manager and 5 Pharmacy Technicians about Butrans FPI,black box warning,dosage strengths,stocking and formulary coverage and savings cards for Butrans.I asked who was the patient in their minds that could benefit from Butrans? ALL of them said the patients on hydrocodone combo's that have moderate pain.i talked to them about the indication and asked which doctors/departments i should target? they all said family medicine,internal medicine, hiv/aids clinic,pain management and oncology. I asked if Margie,Pharmacy manager,would order Butrans and she said yes she would order a couple boxes of each strength. i asked if i could follow-up with her Friday,Jan7th,to look at her computer system about the ndc codes, to be sure she has everything in computer correctly and she agreed saying she would have more time Friday to do that.
PPLPMDL0020000001	Westlake	OH	44145	1/5/2011	Met Dr at the LELE lecture. He said he is a 2nd year resident. We reviewed the conversion guide for OxyContin. We discussed the tools in the pain management kit and the sample agreement. We discussed the Oarrs
PPLPMDL0020000001	Mayfield Heights	OH	44124	1/5/2011	Quick call....reminded doc of the oxycontin and ryzolt patient types. Explained the ryzolt value card and gave oxycontin conversion guide. She said she did not need oxycontin cards.
PPLPMDL0020000001	Westlake	OH	44145	1/5/2011	Met Dr at the LELE lecture. We reviewed the conversion guide for OxyContin. We discussed the tools in the pain management kit and the sample agreement. We discussed the Oarrs program.
PPLPMDL0020000001	Lyndhurst	OH	44124	1/5/2011	Spoke to Meagan about the Butrans indication, strengths, app sites, voucher program. They do not participate in Relay Health program as they do not have internet access. She could not commit to ordering but said she would leave info for pharmacist in charge. Steve.
PPLPMDL0020000001	Lakewood	OH	44107	1/5/2011	Spoke with Joe and Cindy, Joe had already heard about Butrans, we reviewed the Butrans FPI, indication, dosing and medication guide. He said they will wait for a script to come in. Reminder about OxyContin as an option as well, and asked to recommend Senokot S with opioids.
PPLPMDL0020000001	Lyndhurst	OH	44124	1/5/2011	Spoke to Adrienne about the Butrans indication, strengths, contents of the box. Reviewed the savings program. They do not participate in the Relay Health program. She committed to ordered 10mcg.
PPLPMDL0020000001	Cleveland	OH	44114	1/5/2011	talked to Dave Pulp,Pharmacy Manager,about Butrans FPI,discussed Black Box warning, dosage strengths,medication guide and instructions for use,stocking info and formulary coverage.i asked Dave if he felt Butrans had a place in his patient practice? Dave said yes and asked can patients cut Butrans? i told Dave no, they can not cut Butrans transdermal system and referred to the Butrans FPI.Dave then asked if Medicaid and Medicare covered Butrans? i explained Medicaid and Medicare would be a Prior Authorization and what that meant to doctors and then we discussed commercial plan patients using patient savings cards and explained out-of-pocket expenses for patient.Dave said CVS is a part of relay health,as they do have an electronic voucher program,so the savings will come up immediately.i asked if Dave would order a few boxes of each strength of Butrans? Dave said he will order Butrans as soon as he see's a script so i said i would follow-up the last week of January
PPLPMDL0020000001	Westlake	OH	44145	1/5/2011	Met Dr LELE lecture. We reviewed the conversion guide for OxyContin and discussed Ryzolt as a once a day option. i reviewed the laxative lines. We discussed the tools in the pain management kit and the sample agreement. We discussed the Oarrs program.
PPLPMDL0020000001	Mayfield Heights	OH	44124	1/5/2011	Quick call.....Discussed the appropriate patients for the oxycontin and ryzolt indication. Explained that both offer more convenient dosing than IR opioids dosed ATC for chronic pain. Gave her a formulary grid. She asked about medicaid coverage. Explained that oxycontin is covered.
PPLPMDL0020000001	Westlake	OH	44145	1/5/2011	Met Dr at the LELE lecture. We reviewed the conversion guide for OxyContin. We discussed the tools in the pain management kit and the sample agreement. We discussed the Oarrs program.
PPLPMDL0020000001	Cleveland	OH	44106	1/5/2011	talked to Sheila,Pharmacist,about Butrans FPI,black box warning,dosage strengths available,medication guide,instructions for patients on how to apply Butrans transdermal system,stocking,formulary coverage and patient savings cards.Sheila said this was a great option for patients on Vicodin that she feels are taking too many pills a month and are in more of that moderate pain side and could really benefit from Butrans.Sheila liked the once weekly transdermal delivery of Butrans and said i should talk to Family Medicine,as the doctors there write the most hydrocodone combo's and these patients arent being properly managed for their pain so Sheila said i should also work with them on pain management education tools,our Partners against Pain website would be beneficial to that group and also conversion guides for OxyContin.i asked if Sheila felt Butrans had a place in their patient population and she said yes and hopes doctors prescribe Butrans
PPLPMDL0020000001	Cleveland	OH	44111	1/5/2011	Spoke with Lynn, we reviewed the Butrans, FPI, indication, dosing and medication guide. She said she thinks she has some morphine patients on lower doses that this might be a good fit for. She said that she can order in one day, but they don't typically prescribe unless they get a script. I explained the importance of having it in stock for patients in pain who don't want to wait a day.
PPLPMDL0020000001	LAKEWOOD	OH	44107	1/5/2011	Spoke with Ronnie and Pam was listening in. I reviewed Butrans FPI, boxed warning, dosing. She said they have to wait for a script in order to stock.
PPLPMDL0020000001	Westlake	OH	44145	1/5/2011	Met Dr at the LELE lecture. We reviewed the conversion guide for OxyContin. We discussed the tools in the pain management kit and the sample agreement. We discussed the Oarrs program. We discussed Purdue's product lines, Ryzolt as a once a day option and the laxatives
PPLPMDL0020000001	Westlake	OH	44145	1/5/2011	Met Dr at the LELE lecture. We reviewed the conversion guide for OxyContin. We discussed the tools in the pain management kit and the sample agreement. We discussed the Oarrs program.
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PPLPMDL0020000001	Brooklyn	OH	44144	1/5/2011	Introduced myself & Butrans to Michelle, who said she does the ordering for that location. I reviewed indication, dosing/strengths, patient types, managed care/savings. Asked what her thoughts were and she said she wasn't sure what type of demand it would have. Reminded her that there is not another medication like this with this delivery system and that we anticipate it being very successful. Asked if she would stock it and she said she is going to wait for a prescription. Reminded her that upon launch, physicians will want to know where their patients can obtain Butrans and I would be letting them know who was stocking it in the area. She said to return after launch and let her know what type of response physicians are having.
PPLPMDL0020000001	440-827-5566	OH	44145	1/5/2011	Met Dr LELE lecture. He is a 2nd year resident. We reviewed the conversion guide for OxyContin. We discussed the tools in the pain management kit and the sample agreement. We discussed the Oarrs program.
PPLPMDL0020000001	Westlake	OH	44145	1/5/2011	Met Dr LELE lecture. We reviewed the conversion guide for OxyContin. We discussed the tools in the pain management kit and the sample agreement. We discussed the Oarrs program.
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PPLPMDL0020000001	Parma	OH	44129	1/5/2011	Met with Jackie who said that she was able to take some time to review the Butrans information that i had left for her yesterday. I reviewed indication, pt types, dosing/strengths and asked her if she would order one box of each strength. She said that she would because they have a lot of customers on "refill after refill of Vicoden". She said that she thinks that Butrans sounds like a great option instead of Vicoden and tramadol. I asked her who in the area may be interested in hearing about Butrans at launch and she mentioned Stith, Sustersic, and Chagin. I asked her to verify that all three strengths were in her computer and she said that they are. I asked if she could put the order in and she said that she is submitting a McKesson order tonight and that one box of each Butrans strength will be on her order. Thanked her and let her know that i would be back to follow-up on the
PPLPMDL0020000001	Westlake	OH	44145	1/5/2011	Spoke with Dr at LELE Program, he was the attending for the residents. He thought the information provided by the LELE was excellent for his students and residents and would like to have another LELE in the fall for new students coming in.
PPLPMDL0020000001	Cleveland	OH	44106	1/5/2011	worked Pharmacy-Bolwell Health-had lunch with 3 pharmacists and 5 pharmacy technicians to discuss Butrans and then worked Pharmacy-In-Patient/Main University Hospital:met with Wes,Clinical Specialist and Cheryl,Narcotics Buyer,to discuss Butrans fpi,black box warning,dosage strengths available,stocking and formulary coverage for Butrans.i asked Wes how can we get Butrans on the hospitals formulary? Wes said all i need is ONE doctor,to fill out a drug form,state who is the patient they will use this medication in,how much usage,dosage strength,etc,submit to pharmacy,Wes reviews all drugs submitted for P&T committee review,P&T committee meets last week of every month,Wes said have a Pain Management dr,like Dr.Hayek try Butrans in a few patients,fill out form,submit to him before end of feb,so P&T can review Butrans and get approved by 2nd week of March 2011. All i need is ONE dr though and Wes said this is a different product that they don't have in hospital and could be a great option
PPLPMDL0020000001	Shaker Heights	OH	44122	1/5/2011	Introduced myself and Purdue's products to Dr. Zivic. I asked him where he finds a place for OxyContin in his practice-He said that he writes it for "all different" pt types & conditions. I asked him what strengths he uses mostly & he said usually 10 or 20mg. I showed him conversion/titration guide with 7 tablet strengths & reminded him of the intermediate strengths. He agreed that they allow for individualization of dosing. I asked him if he would consider titrating a patient to 15mg instead of 20mg & he said he would. I asked him what patients are generally on before he switches to OxyContin and he said Ultram or NSAIDs. I asked if he ever starts opioid-naive pts and he said yes. I showed FPI 2,2. He asked how it compares with MS Contin & I told him we have no head-to-head data & therefore i couldn't compare. Dr. Zivic said he does not write Ryzolt. I asked him to explain why and he said that it is poorly covered by insurance companies-Reminded him of Ryzolt Value Cards.
PPLPMDL0020000001	Cleveland	OH	44106	1/5/2011	talked to dr about his patients on short-acting opioids that he feels are ready to convert to a long-acting opioid and asked if the convenience of q12h dosing of OxyContin was a factor that he considered when choosing a long-acting opioid? dr said yes,he did look at that as many patients arent compliant with q4/6h dosing and he has seen an increase in dosing compliance with q12h dosing.i asked dr to think of OxyContin 10mg or 15mg q12h for those patients he decides are ready to convert from short-acting opioids,dr agreed and said he does do this now but doesnt start a lot of patients on OxyContin.we discussed Oxycontin's formulary coverage and left OxyContin conversion guide.recommended Senokot-S
PPLPMDL0020000001	Parma Heights	OH	44129	1/5/2011	Spoke with Al about Butrans, reviewing indication, dosing/strengths, patient types, usage, and conversion/titration (Table 1 in FPI). I asked him what his thoughts were and he said that it sounded interesting. I asked him if he would place an order for all three strengths so that when we launch, patients will be able to get it immediately when they bring in a prescription. He asked me for the Cardinal item numbers and said that he would order all three strengths today. He then got called for a phone call & patient consultation so i thanked him and let him know that i would be back to follow-up to ensure that everything with the ordering went smoothly.
PPLPMDL0020000001	Mayfield Heights	OH	44124	1/5/2011	Spoke to Dana about the Butrans indication, boxed warning, application sites, how to dispose, contents of box, and avail strengths. The store was busy and she was filling in for Hillary. Gave her info to give to pharmacy mgr.

PPLPMDL0020000001	Brooklyn	OH	44144	1/5/2011	Stopped Dr. Detwiler who saw the Ryzolt Value Cards in my hand and asked me what it was. I delivered 2-3-1 message and he asked that I schedule a lunch so that we could sit down. He said he was interested to hear why he would want to write that instead of generic but that he didn't have time now. He signed for value cards and I asked him if he had had the opportunity to utilize the OxyContin savings cards that we discussed and that I had left behind last time. He said that he was actually glad that I reminded him because he had not remembered they were there. I reminded him how they are used and that they are for both cash-pay and commercial insurance patients. He asked me again to schedule time to sit down with him to discuss further. Lunch is scheduled for next week.
PPLPMDL0020000001	Brooklyn	OH	44144	1/5/2011	Spoke with Gary and introduced Butrans. He said he had heard of it. I reviewed the indication, pt types, managed care, dosing/strengths. I asked him if he would stock it and he said that over 70% of his business is Medicaid and that until or unless Butrans is covered under Medicaid, he will not stock it. I let him know that Medicaid patients will be able to obtain Butrans with a prior authorization after they fail one week of two covered therapies. He said that this was not enough for him to stock it at this time. He let him know that physicians will want to know a list of pharmacies that are stocking it upon launch. He still said he would not stock it.
PPLPMDL0020000001	Westlake	OH	44145	1/5/2011	Dr is a 1st year resident. She is interested in going into geriatric care and palliative medicine. We discussed pain management as a whole and some of the challenges. We discussed the pain management kit, and Oarrs program and other resources to help keep her practice safe. We reviewed the conversion guide for OxyContin and let her know about Ryzolt and Senokot medications.
PPLPMDL0020000001	BEACHWOOD	OH	44122	1/5/2011	Spoke with Sandra, who said she does the ordering in the pharmacy. Introduced Butrans (indication, dosing/strengths, patient types) and asked her what her thoughts were. She said that it sounded fine and that when she sees prescriptions for it she would order it. I asked her who in the area she would recommend I speak with but she said she couldn't think of anyone in particular. I asked if she would consider stocking it now so that when physicians start writing that their patients could obtain Butrans immediately, but she said she would be lying to me if she said she would stock it prior to seeing a prescription. She also said that she has seen a lot of switches for patients from OxyContin since the reformulation. She said that the reformulation was "less easy to crush or chew or snort". I reminded her of two field card bullet points and she said that she understands that & she did not have any questions on it.
PPLPMDL0020000001	Brooklyn	OH	44144	1/5/2011	Introduced myself and Butrans to David (Pharmacy Manager). Reviewed indication, usage, dosing/strengths, patient types, managed care/e-voucher. He asked if it has any abuse potential. I reminded him that because it is an opioid, it carries all the attendant risks of other opioids and is abusable and does not have an indication for drug addiction. Asked if he would stock it & he said he waits until he gets a prescription. I let him know that when we launch, physicians will ask me where they can get it and that many pain patients will not wait the 1-2 days for them to get it in, but will go to a pharmacy that has it. Asked if he would stock it if a physician requested it or committed to write it and he said he would do that, even before the prescription comes in.
PPLPMDL0020000001	MAYfield Heights	OH	44124	1/5/2011	Spoke to Jesse about the coming of Butrans, the indication, box warning, strengths, application sites. He said they are a part of the Relay Health program. Asked him to order at least a box of the 10mcg. He said he receives shipments daily so "its not a problem". He said, "I will take care of it".
PPLPMDL0020000001	Cleveland	OH	44106	1/5/2011	I talked to dr about his patients on short-acting opioids that he is ready to re-fill their scripts and asked if he could stop and consider OxyContin 10mg or 15mg q12h as an option? dr said he does prescribe OxyContin, usually all 7 tablet strengths but does sometimes forget about the 15mg strength, so I asked if he could consider a few of his Vicodin or Percocet patients dosing q4/6h now to convert them to OxyContin, with convenience of q12h dosing? dr said he would consider and also wanted an OxyContin conversion guide, recommended Senokot-S
PPLPMDL0020000001	Brooklyn	OH	44144	1/5/2011	Stopped Dr. Miguel in hallway and told him I had a couple of questions for him. He stopped me and said that he just had a 51 year old male patient come in who was on 80mg OxyContin 4 times a day & that this patient also had a Duladid pump in place. Dr. Miguel said the pt came to him from a physician in Akron and he couldn't believe how much pain medication this pt was on. He said he was not comfortable writing that much OxyContin. I reviewed w him that OxyContin is a q12h medication. Reminded him that during our last conversation, we discussed switching appropriate pts who were on ATC Vicodin over to an appropriate dose of OxyContin and asked if he has done that. He said that he has started switching patients. I asked if he had had any feedback and he said he had not yet. Thanked him and asked him to continue doing this & he said he would. I asked him if he had written Ryzolt yet & he said he had forgotten. 2-3-1 reminder and showed value cards. He said he would try to remember.
PPLPMDL0020000001	Cleveland	OH	44106	1/5/2011	talked to dr about his patients on short-acting combo's that he felt could benefit by converting to OxyContin, with convenience of q12h dosing, showed OxyContin conversion guide and formulary coverage for commercial plan patients and Medicaid patients paying \$2.00 at pharmacy, I asked if dr could start a few patients on 10mg q12h of OxyContin or 15mg when appropriate instead of refilling short-acting combo scripts and dr agreed saying he would remember the lower dosage strength options for OxyContin, recommended Senokot-S
PPLPMDL0020000001	Lyndhurst	OH	44124	1/5/2011	Doc said that express scripts is no longer covering oxycontin for patients and that a couple of patients have received letters stating that they need to be switched to morphine, effective Jan 1st 2011. She also said that some patients have commented on the difference in the oxycontin tablets. I reminded her about the ltr to patients explaining the change and showed her where they were in the cabinet. Told her that I would look into the express coverage issue but explained the savings cards for those patients that may not have previously needed the card. She said ryzolt patients are doing fine and there are no concerns. I reviewed the 3 strengths and the covered
PPLPMDL0020000001	Mayfield Hts	OH	44124	1/5/2011	Spoke to Nate (fill in pharmacist for Sandy). Discussed the coming on Butrans, the indication, application sites, and the voucher savings. They do not participate in Relay Health and auto shipments are not to all stores. He suggested that I come back to speak with Sandy.
PPLPMDL0020000001	Cleveland	OH	44106	1/5/2011	I talked to dr about his patients on short-acting combo's and considering OxyContin 10mg or 15mg q12h as an option instead of re-filling the short-acting script, dr said he does prescribe some OxyContin, typically for severe pain, but would consider that as I asked what's the clinical benefit of continuing the short-acting combo? dr said a lot of times its convenience for patient, if a CII he can call in scripts or if a CII like Percocet, patients can still take it q4/6h or as needed, so those are only benefits he can think of now, gave OxyContin conversion guide and recommended Senokot-S
PPLPMDL0020000001	Westlake	OH	44145	1/5/2011	Presented LEELE program for the students and residents with Ed Cartwright speaker. Spoke with attending Dr Tollentino and Dr Bloddorf regarding further pain management education for the residents. They are no longer allowed to have reps come in to discuss product, but they do journal clubs. They thought the LEELE talk was excellent and would like to have it again in the fall for the new students and residents coming into the program.
PPLPMDL0020000001	Westlake	OH	44145	1/5/2011	We went over the new partners against pain resource. She liked the USB instead of the CD. She said she may update her current pain agreement. Reminder about convenience of Q12hr dosing with OxyContin and once a day with Ryzolt.
PPLPMDL0020000001	Cleveland Heights	OH	44118	1/6/2011	Reviewed the range of appropriate patients for oxycontin and the flexible dosing options. Asked him if he is still providing savings cards for patients with high out of pocket expenses. He said he still has them. Reminded him of the expiration of 03/31/11. Also reminded him of the ryzolt patient.
PPLPMDL0020000001	University Hts	OH	44118	1/6/2011	Quick call....oxycontin and ryzolt patient type reminders. Discussed the BWC coverage for both and offered savings cards. They were not needed. Nothing learning.
PPLPMDL0020000001	Cleveland	OH	44120	1/6/2011	I talked to Bill, Pharmacist and discussed Butrans fpl, black box warning, dosage strengths available, medication guide, instructions for use, savings cards and formulary coverage and stocking. Bill said he really liked that Butrans was a transdermal system and patients only had to switch the system every 7 days. I asked if there was a place for this product in their patient population and he said yes, they have some commercial plan patients as they come from Main campus or Brooklyn campus, it could be any Metro doctor that patients see and come to them to fill scripts. Bill said I had to talk to Chuck, Pharmacy Supervisor, about ordering/stocking Butrans.
PPLPMDL0020000001	East Cleveland	OH	44112	1/6/2011	DOC said patients are still unhappy with the reformulation of oxycontin and said he is still switching those that complain. I asked him to try and new patient (oxycontin naive) to a low dose of oxycontin. He said he is trying. Reminded him of the ryzolt patient type and the coverage with BWC. Asked him to from IR tramadol dosed ATC.
PPLPMDL0020000001	Westlake	OH	44145	1/6/2011	Spoke with Amin, we reviewed the Butrans FPI, medication guide, indication. He said he would stock it and they see a lot of pain patients. He said that patients like their vicodin and might not want to try a long acting patch.
PPLPMDL0020000001	Cleveland Hts	OH	44118	1/6/2011	We discussed that opioid naive patients could start with a 5mcg dose. Spoke with Sourabh about the indication and strengths of Butrans. Discussed the application and disposal. Explained the uniqueness of the product and asked him to stock at least one box of the 10mcg. He said he can't stock without a script. Explained the savings card program.
PPLPMDL0020000001	South Euclid	OH	44121	1/6/2011	Spoke to Gary and Kerry about the coming of Butrans, the indication, strengths, application and disposal of the system. I asked if they would order at least one box of the 10mcg as docs will want to know where its stocked. Gary said that they as pharmacists can not order until they get a script. Kerry stated that customers are still complaining about the oxycontin reformulation. I explained the intention of the reformulation and she said she tells customers that its the same medication. She did say she has not noticed any switches necessarily.
PPLPMDL0020000001	Cleveland	OH	44120	1/6/2011	talked to Erol, Pharmacist, about Butrans FPI, black box warning, dosage strengths, medication guide, instructions for use and asked Erol where he felt Butrans would have a place in their patient population? Erol said they see a ton of Percocet written, and most of those scripts come from the internal medicine group right above them in same building, so he would like to see some of that Percocet volume go down and Butrans take the place. I asked who was the patient in his mind for Butrans? Erol said probably more of that moderate pain patient, so we discussed opioid naive and opioid experienced patients for Butrans. We talked about stocking and Erol said all CII opioids are locked in cabinet with CII opioids and Chuck, Pharmacy supervisor handles all ordering/stocking of those medications so talk to him about Butrans orders/stocking, talked about savings cards and Erol said talk to Chuck about Rebate offer as Amerisource is their wholesaler so this would help them.
PPLPMDL0020000001	Cleveland Hts	OH	44118	1/6/2011	Doc asked changes to oxycontin coverage. He said a couple of patients have complained they can not afford it now. I asked him if he recalled which plans and he could not recall. I explained there may have been some recent changes with the beginning of the year but I would need to now specifically which ones. Reminded him of the Medicaid coverage and the coverage with AARP med D plans.
PPLPMDL0020000001	Westlake	OH	44145	1/6/2011	Quick call, reminder about OxyContin managed care and AARP Med D coverage. We discussed the new partners against pain resources and he will take a look. Reminder about Senokot S with opioid scripts.
PPLPMDL0020000001	South Euclid	OH	44121	1/6/2011	Spoke with Jagreet, as Mitchell still was not in. Discussed the Butrans indication and potential patient type. Also discussed the convenience of 7 day wear and how to apply and remove. Asked her to order but she said she was not the pharmacy mgr and they usually don't stock product until they get a scrip.
PPLPMDL0020000001	Cleveland	OH	44120	1/6/2011	talked to Chuck Howard, Pharmacy Supervisor, Wanda Price, Pharmacist, Erol, Pharmacist, William Brown, Pharmacist, Charlene Laster, Pharmacist and pharmacy technicians, about Butrans FPI- we discussed Black box warning, dosage strengths available, medication guide, instructions for use, rebate/stocking info and formulary coverage. Erol and Chuck said they have a ton of Percocet, as they just got an order of 3400 Percocet and that will last 2-3wks so if they could decrease their Percocet volume, they would be happy, to replace that with Butrans stocking. I asked each pharmacist who I should talk to here at the Buckeye site and main campus MetroHealth Medical center? If Erol and Chuck said the internal medicine doctors here need to know about Butrans as they write a lot of Percocet and a little Vicodin and they prescribe high amounts of the medications, pain management and internal medicine and family medicine doctors at main campus. Chuck said to come back 1st week of feb and discuss stocking/ordering
PPLPMDL0020000001	University Heights	OH	44118	1/6/2011	Spoke to Ted about the coming of Butrans. He said he heard a little something about it. Discussed the indication, strengths, application and disposal, commercial coverage. Asked him to stock at a box of the 5 and 10mcg. He said that he could order it when he gets a script. The tech confirmed that they do participate in the relay Health program
PPLPMDL0020000001	Cleveland	OH	44129	1/6/2011	Spoke with Rochele who is a floater pharmacist- a new pharmacist will be starting at this store on 1/10/11. I introduced Butrans and reviewed indication, usage, dosing. She said she liked the idea and convenience of a seven day transdermal system. Rochele said she would leave my card and the Butrans information for the new pharmacist and that I should check back after he/she starts.
PPLPMDL0020000001	Westlake	OH	44145	1/6/2011	Spoke with Chuck, he is floater from N. Royalton. We reviewed the Butrans FPI, indication, medication guide. He said that Deanna would be the one to make the decision to stock.
PPLPMDL0020000001	Parma	OH	44129	1/6/2011	Asked Dr Chagin where OxyContin fits into his practice- he said he uses it some but not very much because he uses it for severe, chronic pain, like cancer pain, low back pain. Presented conversion guide & pointed out seven total tablet strengths. Asked if he was utilizing the interned strengths & he agreed that they allow for individualization of dosing. Asked how long he keeps pts on short-acting before switching them to long acting like OxyContin & he said usually months. I asked him if he would ever consider switching them sooner & he said maybe. I asked him what measures he has in place to help him w approp pt selection & he asked if I have any resources. Discussed importance of pt selection- introduced Partners Against Pain USB & leaver & discussed forms avail. He said he would like to put a pain contract in place. I encouraged him to visit the HCP area of the site.
PPLPMDL0020000001					Asked his experience w Ryzolt. Went over 2-3-1 & value card. Asked if he would try it for an approp pt & he said yes

PPLPMDL0020000001	Cleveland	OH	44103	1/6/2011	talked to dr about her Percocet patients that she believes are ready to be converted to a long-acting opioid and choosing OxyContin 10mg or 15mg,with convenience of q12h dosing.dr said she has started a few patients recently on the 15mg strength and 30mg sometimes,so we talked about all 7 tablet strengths being there for flexible titration and then discussed Medicaid patients paying \$2.00 at pharmacy and Medicare Part D/UHC AARP patients paying lowest branded co-pay so asked her to think of these patients instead of refilling Percocet.dr agreed.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44104	1/6/2011	i talked to dr about his patients taking Percocet q4/6h and perhaps benefiting from convenience of q12h dosing of OxyContin,15mg or 30mg q12h instead of refilling the Percocet.dr said he does convert patients to long-acting,as he prefers long-acting oxycodone but depends on trust level with patients,patients pain worsening if on Percocet and they are ready for a long-acting opioid,then he will go to OxyContin but usually forgets about 15mg and 30mg strengths.so i showed dr OxyContin conversion guide and discussed 7 tablet strengths available to allow for flexibility in titration,dr said he'll consider those intermediate strengths next time.recommended Spoke to Paul about the Butrans indication, strengths, boxed warning, application and disposal. He asked if it would in any way replace or can be substituted for percocet or oxycontin. I discussed the positioning and asked if there were any docs he thought we could focus on. He suggested Drs. Price and Thomas Craig who he feels prescribes too many high doses of both. They do not participate in the relay health program.
PPLPMDL0020000001	Cleveland Hts	OH	44118	1/6/2011	talked to dr about his patients on short-acting combo's,Vicodin and Percocet,dosing q4-6h and potentially benefiting from convenience of q12h dosing of OxyContin 10mg or 15mg,dr said he does start severe pain patients on low doses of OxyContin,but most patients stay on short-acting combo's for awhile unless they are complaining of around the clock dosing regimen and he feels twice daily dosing is easier or if patients pain has worsened even though they are taking short-acting opioids,then he'll consider long-acting opioids.talked to dr about his patients taking tramadol,q4-6h,and perhaps converting them to once daily dosing of Ryzoil and using Ryzoil value card,talked to dr about his commercial plan patients using Ryzoil value card,dr said he has started some patients on Ryzoil,once daily dosing is easier than q4-6h for some patients and value card is easy.recommended Senokot-
PPLPMDL0020000001	Westlake	OH	44145	1/6/2011	I asked Dr if he would convert patients from hydrocodone to OxyContin instead of going to percocet. He said that he would, it just depends on the amount that the patients are taking all day. We reviewed the conversion guide. I asked if a pain agreement might make him feel more comfortable prescribing OxyContin sooner. He said that he has used one but he gives the patients the rules upfront verbally and does not have an issue. He would feel more comfortable sending patients to pain management if he did not trust the patients. Reminder about Senokot 5 and he has samples.
PPLPMDL0020000001	Parma	OH	44129	1/6/2011	Spoke with technician who said that Rick was too busy to speak with me. Reviewed indication, usage, patient types for Butrans and left my card and information for Rick. She said that she would give the information to him and that i could stop back another time to speak with him.
PPLPMDL0020000001	Cleveland	OH	44120	1/6/2011	talked to Chuck,Pharmacy Supervisor,about Butrans FPI,black box warning,dosage strengths available,medication guide,instructions for use,formulary coverage,savings cards and stocking/ordering of Butrans using the rebate form as Amerisource Bergen is their wholesaler.Chuck was happy to hear that this option is finally available to patients,we discussed the indication and chuck said probably the moderate pain patients will benefit most from Butrans with the 5mgc/hour and 10mgc/hour transdermal systems.I asked Chuck if he would order a couple boxes of each strength as shipping starts Jan.10th,to wholesalers and distributors,Chuck said i needed to follow-up with him end of January/February,once i speak with doctors about Butrans and have an idea of who's committed to prescribing and he'll order Butrans at that time.
PPLPMDL0020000001	Cleveland	OH	44120	1/6/2011	i talked to dr about her patients taking Percocet q4/6h that could benefit from convenience of q12h dosing of OxyContin,10mg or 15mg.dr said she usually waits for patients to complain that pain has worsened or if their is a new disease present and vitals are worse,then she'll consider a long-acting opioid and would consider OxyContin at that time.I asked dr to consider OxyContin 10mg or 15mg q12h instead of refilling Percocet.dr agreed to consider this option.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44120	1/6/2011	talked to Charlene about Butrans FPI,black box warning,dosage strengths,medication guide,instructions for use,stocking/ordering of Butrans and patient savings cards. Charlene said Butrans sounds like a great option for those moderate pain patients as the severe pain patients may be on higher doses than the 80mg oral morphine equivalent and could see that the 20mcg/hour Butrans transdermal system may not provide enough pain relief,so i asked her to think of patients opioid naive and opioid experienced and showed Butrans fpi section about initiation of therapy. Charlene said Chuck does all ordering of controlled substances so i should talk to him about
PPLPMDL0020000001	Parma	OH	44129	1/6/2011	Introduced Butrans to Fred, who said that Steve does the ordering. Reviewed indication, dosing/strengths, pt types, abuse potential. Fred asked about use in renally impaired pts & i showed FPI section 8.7. He said he thought it sounded like a good idea. I asked him if he would recommend to Steve that they place an order ASAP so that they can be stocked when we launch. He said he would give Steve the information & will recommend that they place an order.
PPLPMDL0020000001	Cleveland	OH	44113	1/6/2011	talked to dr about his patients on short-acting hydrocodone combo's and when he knows the patient is ready to convert to a long-acting opioid,considering OxyContin 10mg or 15mg q12h.dr said he does write 10mg-40mg OxyContin for severe pain patients but feels tramadol,then Vicodin and other hydrocodone combo's manage patients pain well enough that they dont need to convert to long-acting opioids,but he will prescribe them when necessary.i asked if he could consider Medicaid patients,as they only pay \$2.00 at pharmacy,to be started on OxyContin 10mg or 15mg,with convenience of q12h dosing,instead of re-filling short-acting combo's,dr said he'll consider that option.recommended senokot-5
PPLPMDL0020000001	Cleveland	OH	44120	1/6/2011	i talked to Wanda,Pharmacist,about Butrans FPI,black box warning,dosage strengths available,medication guide,instructions for use,savings cards,formulary coverage and stocking of Butrans.Wanda said a transdermal system is great and thinks there is a place for Butrans here at MetroHealth Medical Center (buckeye site) but i have to speak with internal medicine doctors above pharmacy and once i do that and they see scripts she thinks Chuck,pharmacy supervisor, will order Butrans and stock it,but they'll need to see scripts first.i asked her if they ever have patients come to them and leave their pharmacy if they dont have a medication in stock? Wanda said yes occasionally that does happen but not often,so i emphasized the importance of ordering Butrans and having it in stock,so patients arent turned away in pain and taking their prescriptions somewhere else. Wanda agreed and said talk to Chuck.Wanda said probably moderate pain patients would do best on Butrans so we talked about indication
PPLPMDL0020000001	Westlake	OH	44145	1/6/2011	Spoke with Lisa, we reviewed the Butrans FPI, boxed warning, indication and medication guide. She said she has been turned too many times by reps who've made promises about the medication moving off the shelves and then she gets in trouble for having too much inventory on the shelf. It is her strict policy to not stock until she sees a script.
PPLPMDL0020000001	Cleveland	OH	44103	1/6/2011	talked to dr about his patients taking Percocet,q4/6h,that perhaps could benefit from convenience of q12h dosing of OxyContin and considering converting patients from Percocet to an OxyContin 10mg or 15mg q12h.dr said he does have a lot of patients on short-acting oxycodone and does start them on OxyContin at some point,but usually depends on patients pain severity,new disease presents itself or patients complain of q4/6h dosing and think twice daily dosing of OxyContin would be easier.then he will consider OxyContin q12h.talked about Medicaid patients paying \$2.00 at pharmacy for OxyContin and UHC/AARP Medicare part d patients paying lowest branded co-pay for OxyContin and asked dr to consider these patients to start on OxyContin instead of refilling Percocet.dr said he'll consider that option.recommended Senokot-5
PPLPMDL0020000001	Parma	OH	44129	1/6/2011	Introduced Butrans to Bethany, reviewing indication, usage, patient types, managed care/e-voucher (they do participate), disposal. She said she thinks it is a great idea and thinks it is better than taking multiple pills. She said Dr. Moss may be interested to hear about it at launch. Asked her to place an order so that she will have it in stock at launch and she agreed to place an order for all three strengths. Bethany said that she has a customer who has been on OxyContin for awhile and that since the reformulation, the customer is reporting to her that she is not getting the same amount of pain relief that she was getting with the "OC" version. The customer told Bethany that she thinks that she needs a higher dose now and Bethany told her that she needs to speak with her doctor about that. I gave her the field card and went over bullet points. I encouraged her to call Medical Services to answer any questions that she needed more clarification on.
PPLPMDL0020000001	Parma	OH	44129	1/7/2011	Quick call with Laura in the hallway as she signed for new Ryzoil Value Cards. Reminded her of savings opportunity & Ryzoil managed care. Spoke with Dawn & asked her if she had the chance to look at the Partners Against Pain USB that I had given her at my lunch. She said that they did look at it and thought the resources on it were fantastic. She said it was very helpful & also said that they have used some of the Ryzoil Value Cards lately. She also told me that Jen Hula is a new NP that will be joining them full time, and that Laura will be leaving and going to Grace.
PPLPMDL0020000001	Mayfield Heights	OH	44124	1/7/2011	Discussed the ryzoil indication and patient type. Asked doc if he has had any appropriate patients recently. He said no. I reminded him of the coverage with medical mutual.
PPLPMDL0020000001	Cleveland	OH	44111	1/7/2011	We reviewed OxyContin as a Q12hr dose. She was on her way to the hospital and I asked if she would recommend if they could benefit from convenience of dosing. Barbara has a current patient on Ryzoil and they are doing well and needed a new value card. We reviewed appropriate patients for Ryzoil. I asked if she would think of a patient to convert from short acting tramadol to Ryzoil next week.
PPLPMDL0020000001	Cleveland	OH	44106	1/7/2011	talked to Margie,Pharmacy Manager,about ordering/stocking Butrans and she said that after our lunch discussion on Wednesday,Jan.5th,she ordered 1 box of each dosage strength of Butrans.I talked to Margie about the Rebate program for Butrans and she said that Amerisource was her wholesaler but that was great if she could get a rebate,she would order 2 boxes of each strength to get the maximum rebate,so she ordered that today.i told Margie that after i meet with pain management,internal medicine doctors the last week of January,i will be sure to tell every doctor that Bolwell,out-patient pharmacy here at University Hospitals has Butrans stocked.<font color=blue><b>CHUDAKOB's query on 01/14/2011</b></font>Amy, You cannot refer your physicians prescriptions to one pharmacy. You have to tell them about many that have it stocked. You cannot tell Bolwell has it stocked without telling them others in the area as well.<font color=green><b>BROOKAM's response on 01/21/2011</b></font><font color=blue><b>CHUDAKOB added notes on 01/24/2011</b></font>Thank you!
PPLPMDL0020000001	Cleveland	OH	44106	1/7/2011	i talked to Margie,Pharmacy Manager,she ordered all 3 dosage strengths of Butrans,after our lunch on Wednesday,Jan.5th,we discussed the Rebate offer and Margie said that Amerisource was her wholesaler and this rebate would be great so she ordered 2 boxes of each strength and said she would fill out form today.i told Margie shipping of Butrans will begin next Monday,Jan.10th, to wholesalers and the week of January 24th,i am talking to physicians about Butrans and will tell physicians that Bolwell,out-patient pharmacy at University Hospital has Butrans stocked.
PPLPMDL0020000001	Cleveland	OH	44113	1/7/2011	worked pain management and physical medicine&rehab-see call note on Dr. Shen
PPLPMDL0020000001	Parma	OH	44134	1/7/2011	Introduced myself & Butrans to Mercedes. Reviewed indication, conversion, pt types, dosing & strengths. She then got a phone call that she said she had to take. I asked her if she would place an order so that patients would be able to get it immediately when physicians start writing it upon launch and she said she would.
PPLPMDL0020000001	Mayfield Village	OH	44040	1/7/2011	Spoke to Bridgette (floater) about the Butrans indication, strengths, application and disposal, commercial coverage and savings program. She was not very familiar with the trends of the store. Referred me to talk to Michael, who is the managing pharmacist.
PPLPMDL0020000001	Richmond Heights	OH	44143	1/7/2011	Spoke to ANeesha about the coming of Butrans. Discussed the indication, patient type, strenghts, application and disposal. Explained the importance of stocking the product before promotion to prescribers. She said she was filling in and that i need to talk to Mel, however, they don't usually stock before they get a script.
PPLPMDL0020000001	Fairview	OH	44111	1/7/2011	Spoke with Tom, we reviewed Butrans FPI, indication, dosing and medication guide. He thinks that Dr Lalli would be good to talk to as he has a lot of pain patients. He agreed to order at least the 5 and 10mcg.
PPLPMDL0020000001	Cleveland	OH	44111	1/7/2011	Spoke with Earl, we reviewed Butrans, FPI, indication, dosing, medication guide. He agreed to order. He said Dr Nicols writes the most vicodin and would be best to call on.
PPLPMDL0020000001	Cleveland	OH	44111	1/7/2011	Spoke with Steve tech, pharmacist was floater. We reviewed Butrans FPI, indication, medication guide. He said they don't stock until they get a script because they don't have the room.
PPLPMDL0020000001	Cleveland	OH	44113	1/7/2011	worked Grace Hospital Pharmacy-in patient, 3 Pharmacists were in attendance, pharmacy technicians and medical students-at lunch to discuss Butrans fpi,medication guide,instructions for use,formulary coverage,savings cards and stocking of Butrans
PPLPMDL0020000001	Cleveland	OH	44113	1/7/2011	talked to Mike Shumate,Pharmacy Director,Mike,Pharmacist,Mae,Pharmacist and Clinical Manager who will be handling future in-services for nurses at Lakewood,Fairview and Southpointe hospitals,only 1 floor at each hospital and Grace pharmacy in Tremont is the Main hub for all drugs to be dispensed and delivered-i talked to each Pharmacist and Pharmacy technicians about Butrans fpi,black box warning,medication guide,instructions for use,formulary coverage and savings cards.Amerisource is their wholesaler.All 3 pharmacists said great product,there will be a place for Butrans at Grace,but small because they have majority of Medicare patients,also they said nurses wont remember to write down day/time of Butrans transdermal system and remember to rotate the application sites,so i asked if they could work on documentation with nurses if they start seeing patients on Butrans and dr wants patients on Butrans,they said yes.also discussed REMS for Butrans and Mike,Pharmacist asked what happens if
PPLPMDL0020000001	Mayfield Heights	OH	44124	1/7/2011	Spoke with Warren about the coming of Butrans. He said he heard the name and expected someone to come talking about it. Discussed the indication, application and disposal, contents, strengths. He asked about breakthrough options. Explained that IR analgesics/NSAIDS can be used. He asked if Hillcrest Pain mgmt was aware of the product yet. Explained how we only talking to pharmacist right now to ensure stocking. Asked him to stock at least 1 box of each. He said he could probably do that. He asked if scripts will be written for 1 patch or if they will be packaged individually. Discussed the contents and packaging. Discussed the rebate program which he said he could benefit from. He does participate in the relay health evoucher program. He also wanted to know if the hospital is stocking it. Told him not yet.
PPLPMDL0020000001					

PPLPMDL0020000001	Mayfield Heights	OH	44124	1/7/2011	Spoke to Marsha about the coming of Butrans - the indication, strengths, schedule, application and disposal, contents, and REMS. Explained the importance of stocking now and asked her to stock a box of each. She said she honestly wont likely stock until they get a script. They do participate in the Relay Health program. She didnt want to stock products before a scripts because of the cost.
PPLPMDL0020000001	Cleveland	OH	44109	1/7/2011	WORKED physical medicine and rehabilitation dept-see call notes on Dr.Huang,Dr.Harris,Dr.Malkamaki
PPLPMDL0020000001	Cleveland	OH	44109	1/7/2011	worked geriatric department with Dr.Campbell,Dr.Corrigan and Dr.Baker-left OxyContin fpi,conversion guide,commercial plan grid and Medicaid coverage sheet,left Partners against pain brochures and wepkey for each dr-cant see doctors unless you have lunch so booked a lunch in February with Karen,receptionist for dept,to discuss Butrans
PPLPMDL0020000001	Richmond Heights	OH	44143	1/7/2011	Quick call.....asked doc to try a conversion to ryzolt from IR tramadol taken ATC. He said he knows. Reminded him of the oxycontin patient type and the preferred coverage for those patients with AARP Med D plans. Nothing learned.
PPLPMDL0020000001	Cleveland	OH	44113	1/7/2011	i talked to Mai,Pharmacist,about Butrans FPI,black box warning,dosage strengths available,medication guide,instructions for use,REMS program,formulary coverage and savings cards for Butrans and stocking.Mai said Butrans was a great option for those moderate pain patients that are opioid naive or on low doses of Vicodin or Percocet; discussed the indication again with Mai and said yes,moderate pain patients can start on Butrans and Mai said doctors will love this product because its a CIII and they can call in re-fills for the medication.Mai said i should talk to Dr.Nickels,Dr.Raheja and Dr.Nouraldin as they are all of the out-patient physicians based at Grace Hospital and follow-up with her to keep her posted on doctors feedback.Mai said she is the Clinical Manager and would be interested in Nurse In-Services at Fairview,Lakewood and Southpoint on OxyContin conversions,documentation,etc.in future so follow-up in a few months with her on that topic
PPLPMDL0020000001	Mayfield Heights	OH	44124	1/7/2011	Spoke to Christy about the coming of Butrans - indication, schedule, 7 day, application and disposal. She asked what the recommendation is for a loosened patch.....can tape be applied. Explained that first aid tape can be applied to the edges. Discussed the Relay Health program and she was pleased about that. She agreed to order a box of each.
PPLPMDL0020000001	Cleveland	OH	44113	1/7/2011	i talked to Mike Shumate,Pharmacy Manager,about Butrans FPI,black box warning,dosage strengths available for Butrans,medication guide,instructions for use,formulary coverage,stocking and rebate offer for Butrans and patient savings cards.Mike said he does see a place for Butrans at Grace Hospital,as this is all out-patient and they are the main hub for ordering/distribution of all medications to Lakewood,Fairview and Southpointe Hospitals where they have 1 floor of in-patient patients.challenge is most patients are Medicare and if Butrans isnt covered that will be tough here.However Mike said for commercial plan patients,paying tier 3 co-pay and using Butrans savings card,that will help,asked if Mike would order today,he said wait until i have lunch with Dr.Nickels and Dr.Raheja,get feedback and see him then about ordering as he does see doctors prescribing Butrans and if they end up in Grace Hospital,he'll have to have Butrans in stock at that time,so i'll follow-up Jan.27th
PPLPMDL0020000001	Cleveland	OH	44106	1/7/2011	worked Bolwell Health Center,Out-patient pharmacy,at University Hospitals-see call note on Bolwell and Margie Baron,Pharmacy Manager. Worked Pain management dept-see call notes on Dr.Hayek,Dr.Saghal and Dr.Khalil
PPLPMDL0020000001	Mayfield Heights	OH	44124	1/7/2011	Quick call.....reminded doc of the oxycontin and ryzolt patient types. Both offer more convenient dosing than IR tablets dosed ATC. Discussed oxycontin medicare/medicare coverage.
PPLPMDL0020000001	Cleveland	OH	44130	1/7/2011	Followed up with Dave- he said he had read through the information that I had left on Tuesday. Reviewed Butrans indication, pt types, dosing, conversion/titration. Asked him to place an order for one box of each strength & he asked what we anticipated the most common dose to be. I showed him Table 1 in FPI & explained conversion/titration. I asked if he would stock one box each of the 5mg & 10mg systems and he agreed to place the
PPLPMDL0020000001	Cleveland	OH	44130	1/7/2011	Introduced myself & Butrans to John, pharmacist. Reviewed indication, usage, appropriate pt type, conversion/titration. Asked him his thoughts & he said he thought there was a place for it. He said that he thought it may be particularly useful in elderly patients. Asked him if he would order one box of each strength & he agreed to do so. He said he would also share this information with the other pharmacists who cover that store.
PPLPMDL0020000001	Cleveland	OH	44113	1/7/2011	i talked to Mike,Pharmacist,about Butrans fpi,black box warning,dosage strengths available for Butrans,medication guide,instructions for use,REMS program,formulary coverage as Mike is the Managed Care liaison for Grace Center and we discussed the Butrans savings cards and stocking of Butrans.Mike said he thought this was a great option for patients on low doses of Vicodin or Percocet and saw a benefit to the Butrans transdermal system,dosed once every 7 days,as Mike said thats more convenient than dosing short-acting opioids q4-6h,the only challenge is the Medicare population they see at Grace Center,which is out-patient here,but he thinks if doctors prescribe Butrans and patients end up at Grace Hospital,they will want to have Butrans in stock.Mike asked if patients are on a 10mg Butrans and taking 2 supplemental doses of analgesia initially during titration,what happens if patients need more supplemental? Mike wanted to know if there was any data to support more than 2 doses of
PPLPMDL0020000001	Cleveland	OH	44113	1/7/2011	talked to dr about his Vicodin patients that he feels are ready to convert to a long-acting opioid and would benefit from convenience of q12h dosing of OxyContin.we talked about patients starting on OxyContin 10mg or 15mg q12h,showed convenience of q12h dosing flashcard and conversion guide and talked about Medicaid patients paying \$2.00 at pharmacy and Commercial plan patients paying lowest branded co-pay for
PPLPMDL0020000001	Cleveland	OH	44113	1/7/2011	OxyContin.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44111	1/7/2011	talked to dr about his Vicodin patients dosing q4-6h,that are ready to convert to a long-acting opioid and perhaps considering low doses of OxyContin,10mg or 15mg with convenience of q12h dosing,showed OxyContin q12h flashcard and conversion guide,dr said he would remember that,but usually doesnt start many patients on OxyContin,if so they are usually at a 20mg of OxyContin at that point.talked to dr about opioid naive patients starting on Ryzolt once daily dosing option or patients on short-acting tramadol dosing q4-6h that dr feels would benefit from convenience of q24h dosing of Ryzolt,discuss commercial plan coverage for Ryzolt using Ryzolt value card.recommended Senokot-S
PPLPMDL0020000001	Westlake	OH	44145	1/7/2011	Spoke with Zaid. We reviewed the Butrans FPI, indication, dosing, medication guide. He thinks it will be a good medication. He thinks Dr Nicols, Celeste, and Orra might be good to call on since they prescribe a lot of vicodin. John is in charge of ordering so i would need to ask him and he is on vacation for the next week. He will leave all of the info for John. Reminder about OxyContin as a Q12hr option. Asked to recommend Senokot S.
PPLPMDL0020000001	Westlake	OH	44145	1/7/2011	Dr said he had a patient try to get OxyContin and it was over \$600. I discussed the managed care for OxyContin and using the savings cards and that most patients can get OxyContin for about a \$25 copay. Dr said he has had some patients asking why OxyContin is different. He said that he is telling the patients that the tablet is equivalent, but that they will not feel a "rush" when they take it. I told Dr we have no data to support this or compare the original and reformulated tablets. We reviewed the updates to the OxyContin FPI. I reminded him about Ryzolt as a once a day option and asked him to recommend Senokot S for his patients on opioids. Reported as ROC-Dr informed me that a patient told him that abusers are not getting a "high" off of the reformulated tablet when they melt it down and inject it compared to the original formulation.
PPLPMDL0020000001	Cleveland	OH	44130	1/7/2011	Dr. Fedorko said that the problem with Ryzolt is that "no one wants to pay for it". I reviewed managed care coverage for his top plans (Aetna, Medco, Medicaid) with him & also re-reviewed the Ryzolt Value Cards, explaining how they are used & that they cannot be used for any Medicaid or Medicare plan. He said that the pharmacies call him and want him to do a prior authorization but he doesn't have time to do it. He said he thinks they do this even if it is covered so that they have an excuse to give the patient a generic tramadol instead. Asked him to keep trying with Ryzolt & encouraged him to utilize the value cards. Discussed managed care also with Mindy who said that she doesn't seem to have too many problems with it. Reminded her of savings cards as well.
PPLPMDL0020000001	Westlake	OH	44145	1/7/2011	Spoke with Jen, we reviewed the Butrans FPI, indication, dosing, and medication guide. She thinks it will be a good option for patients who were on darvocet instead of them starting on vicodin. She will talk to Jamie to see if they can stock it. Reminder about OxyContin and Ryzolt as an option. She said that even tramadol medications seem to be abused now and I reviewed the abuse warning for Ryzolt.
PPLPMDL0020000001	Parma	OH	44134	1/7/2011	Spoke with pharmacist Lily who said that all the pharmacists there can place orders for medications. I introduced Butrans, reviewing indication, pt types, dosing/strengths, abuse. I asked Lily to check her system to ensure it was loaded & all three strengths were. I asked her to place an order for one box of each strength. Lily said that with CII & CIII products, all pharmacists and the pharmacy manager have to review the product to decide if they will stock it. I let her know that physicians will want to know where their patients will be able to attain Butrans immediately and that pain patients will not be willing to wait if it is not stocked. She said that she would make sure that they reviewed Butrans quickly so that they could order.
PPLPMDL0020000001	Parma	OH	44134	1/7/2011	Introduced myself & Butrans to Nancy, pharmacist. Discussed indication, pt types, transdermal system application, abuse/addiction potential. She asked what to do if the patch comes off or loose and I showed her FPI 2.1 & she also asked if it was OK to shower with it on. I showed her 5.11 regarding avoiding application of heat. Discussed proper disposal as well. Asked Nancy's thoughts & she said it sounded like a great system. I asked her to place an order for all three strengths. She said that although she does place orders, because it is a CIII, they have to consult with the pharmacy manager Allene first. Nancy said if it was up to her, she would definitely place the order now & I asked her to please relay that to Allene. Nancy said she would & that I should stop back Monday to speak with Allene to make sure she ordered.
PPLPMDL0020000001	Parma	OH	44129	1/7/2011	Presented to Dr. Gigliotti the updated Partners Against Pain for HCP's leaver and described various resources that would be available for him in effort to help him & his office feel more comfortable with treating pain. He said he really appreciated the information and promised to go online to look at the various tools. Dr. Gigliotti said he is "always scared" to treat pain and that this may help him. Discussed importance of proper patient selection.
PPLPMDL0020000001	Cleveland	OH	44109	1/7/2011	talked to dr about his patients taking short-acting opioids,like Vicodin or Percocet,where he feels they are ready to convert to a long-acting opioid and asked dr to consider starting them on OxyContin 10mg or 15mg,with convenience of q12h dosing and showed flashcard with this information.dr said he does prescribe a lot of OxyContin but forgets about 15mg and 30mg so i showed dr OxyContin conversion guide and asked if he would remember next time to start patients on OxyContin,dr said he would,discussed commercial plan coverage and Medicaid patients getting OxyContin.
PPLPMDL0020000001	Cleveland	OH	44106	1/7/2011	i talked to dr about his patients taking Vicodin or Percocet,q4-6h,that he feels are ready to convert to a long-acting opioid,and asked him to consider OxyContin 10mg or 15mg,with convenience of q12h dosing,showed flashcard with this information and dr said he does prescribe all 7dosage strengths of OxyContin for severe pain,but does forget about the 15mg dosage strength but will remember that next time.we talked about Medicaid patients getting OxyContin for lowest branded co-pay and commercial plan patients getting OxyContin for lowest branded co-pay.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	1/7/2011	i talked to dr about her patients taking Vicodin or Percocet,q4-6h,that she feels are ready to convert to a long-acting opioid and asked her to consider low dosage strengths,10mg or 15mg q12h OxyContin.dr said she has some patients,usually her elderly patients as she really trusts them with OxyContin,taking OxyContin now.i asked her to consider patients younger than 65yrs old,that meet OxyContin indication,to start on OxyContin 10mg or 15mg q12h instead of refilling short-acting opioids and dr said she'll consider that option.discussed Medicaid and commercial plan coverage for OxyContin.
PPLPMDL0020000001	Cleveland	OH	44106	1/7/2011	i talked to dr about his patients on Vicodin,dosing q4-6h,that he feels are ready to convert to a single-entity opioid and asked dr to consider OxyContin 20mg,30mg or 40mg,with convenience of q12h dosing of OxyContin and showed flashcard with this information,dr said he doesnt prescribe much OxyContin and if so,the 10mg and 15mg dosage strengths are what he prescribes,so i told dr that is great he is starting patients on lower dosage strengths,but asked if he has any patients who have been on Vicodin for years,still arent controlled and perhaps the dosing around the clock isnt convenient for them? dr said yes and i said well those are some patients who may benefit from OxyContin 20mg,30mg or 40mg q12h and Medicaid patients only pay \$2.00 at pharmacy for OxyContin.recommended Senokot-S<font color=blue>-cb>CHUDAKOB's query on 01/14/2011</b></font>-Amy,can you clarify what strengths of Vicodin you were talking about to convert to the 20,30,40mg strengths of OxyContin?<font color=green>-cb>BROOKAM's response on 01/21/2011</b></font>-we didnt state specific strengths why? he writes short-acting and does convert to OxyContin,but we didnt say Vicodin 5mg, etc...thanks!<font color=blue>-cb>CHUDAKOB's query on 01/24/2011</b></font>-Because if he is converting from a 5mg q6h to OxyContin, none of the strengths you suggested he converts to would be appropriate. Getting specific is very important when discussing conversions.<font color=green>-cb>BROOKAM's response on 01/26/2011</b></font>-ok thanks Barry<font color=blue>-cb>CHUDAKOB added notes on 01/26/2011</b></font>-Thank you!
PPLPMDL0020000001	Cleveland	OH	44109	1/7/2011	talked to dr about his patients taking Percocet,q4-6h,that are ready to convert to a long-acting opioid and considering OxyContin,10mg or 15mg,with convenience of q12h dosing and showed flashcard with this information,showed OxyContin conversion guide and discussed commercial plan coverage and Medicaid coverage for OxyContin,dr said he really doesnt write a lot of OxyContin,more for severe pain patients,so i asked if dr could consider 10mg or 15mg,for those moderate pain patients too,showing OxyContin indication in fpi,and dr said he'll consider that option.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	1/7/2011	i had an impromptu lunch with dr and staff,discussed OxyContin as an option for those patients on Vicodin,q4-6h,that have been on short-acting hydrocodone combo for years and still not controlled and asked dr to consider low dose of OxyContin,10mg or 15mg with convenience of q12h dosing,showed flashcard with this information and asked dr to consider this option earlier in therapy instead of waiting for a long time before ever considering a long-acting opioid,dr said he would consider 10mg or 15mg OxyContin but doesnt prescribe more than 40mg OxyContin.i talked to dr about his Medicaid patients paying \$2.00 at pharmacy for OxyContin and commercial plan patients paying lowest branded co-pay for OxyContin.recommended Senokot-S



PPLPMDL0020000001	Cleveland	OH	44113	1/7/2011	i talked to dr about his patients on short-acting opioids,dosing q4-6h,and when dr decides patients need to convert to a long-acting opioid,dr said he does NOT write long-acting opioids as he wont prescribe CII opioids,doesnt want the hassle of patients having to pick scripts up every month and doesnt like CII medications period.dr said he will prescribe a lot of tramadol,short-acting as patients like to have a medication they can take around the clock for pain.dr said he likes RyzoIt as a once daily dose of tramadol and RyzoIt value card is easy to use,but he has so many patients on ultram and have been on the medication for years that he is only converting a few patients to RyzoIt,if patients complain about dosing regimen of ultram and dr feels RyzoIt potentially could be easier for patients to dose once daily instead of q4-6h.i asked dr to talk to patients,during initial visit,about starting on ultram,but in follow-up converting them to long-acting,such as RyzoIt,dr said he will
PPLPMDL0020000001	Westlake	OH	44145	1/7/2011	Quick call, I reminded Dr of his commitment to go to OxyContin first if methadone does not work for a patient. He said he has done this has a couple of patients on OxyContin. Reminder to recommend Senokot S.
PPLPMDL0020000001	Westlake	OH	44145	1/7/2011	Dr expressed frustration with treating pain patients. I asked how does she determine who is appropriate, she said they use all of the tools that they can such as Oarrs and they just started doing urine drug screen where they can test for therapeutic levels. We discussed the tools in the partners against pain resource. We discussed the convenience of Q12hr dosing for OxyContin instead of short acting around the clock. Remind around RyzoIt as an once a day option and asked to recommend Senokot S with opioids.
PPLPMDL0020000001	Cleveland	OH	44111	1/7/2011	Spoke with Dave, floater. He had questions about the reformulation of OxyContin and we reviewed the field card and the changes in the FPI. We reviewed the Butrans FPI, indication, dosing, mode of action, medication guide. He said to talk to Wael to get it stocked. He said he is part of the West Coast pharmacy association and wanted to have a LELE program at one of their meetings, he will have someone contact me.
PPLPMDL0020000001	Parma	OH	44129	1/7/2011	Dr. Roheny said that he just saw a 19 year old male pt who told him he was addicted to OxyContin & he was buying it "on the streets" for \$60 per 80mg tablet. I stressed that OxyContin is not for everyone & that like all opioids, it carries abuse & addiction potential. Asked Dr Roheny what he typically has his pts on before he would consider switching them to OxyContin & he said he usually doesn't do that. He said most of his pain pts are on ATC Vicoden. He said he may consider converting a Percocet pt to OxyContin but hasn't considered switching a Vicoden pt. Presented conversion guide & showed him pg 7 & asked if the conv ratio for hydrocodone:oxycodone surprised him. He said that it did& then said "This is great information. It really makes me think. I've never thought about this before. I'm impressed. You have impressed me." I then showed pg 8. He said he would read more of the guide later & that he was very interested.Recommended Senokot-S for opioid-induced constipation.
PPLPMDL0020000001	Cleveland	OH	44106	1/7/2011	talked to dr about his Percocet patients dosing around the clock and perhaps dr thinks its time to convert them to a long-acting opioid,so i asked dr to consider OxyContin 10mg or 15mg,with convenience of q12h dosing and showed flashcard with this information and OxyContin conversion guide.dr said he will remember these dosage strengths.I asked about doctors patients on short-acting tramadol and perhaps considering to convert them to RyzoIt once daily dosing option and using RyzoIt value card for them,dr said he started one patient on RyzoIt but that's it as he forgot about it so he needs reminders. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	1/7/2011	talked to dr about her patients on Vicodin or Percocet,that she feels are ready to convert to a long-acting opioid and could benefit from convenience of q12h dosing of OxyContin,showed flashcard with this information and OxyContin conversion guide to consider the 10mg and 15mg OxyContin dosage strengths and not waiting so long to convert them,dr agreed and said she has some patients on OxyContin but usually her elderly patients because she trusts them.i asked if dr can think of patients on short-acting tramadol,dosing q4-6h,that perhaps could benefit from once daily dosing of RyzoIt and discussed RyzoIt Value card program for commercial plan patients. dr said she has recently started a patient on RyzoIt so we'll see how patient tolerates RyzoIt.recommended Senokot-S
PPLPMDL0020000001	Westlake	OH	44145	1/7/2011	Quick call, Dr said again that his residents and students enjoyed the LELE program and would like to bring it back. I reminded him about OxyContin as a convenient Q12hr option. He said that he does have a few patients on OxyContin and he has written more often than he used to.
PPLPMDL0020000001	Parma	OH	44134	1/10/2011	Spoke with Nate & introduced Butrans. Reviewed indication, appropriate patients, dosing/conversion/titration, application, managed care/savings. Asked if he would place an order for one box of each strength. He asked me who in the area I was targeting upon launch. I went over appropriate patient type, let him know that I will be calling on & speaking with multiple specialties, and asked him if there was anyone in particular that I should be targeting. He did not have any specific recommendations. He said he would place the order for one box of each strength through Cardinal.
PPLPMDL0020000001	Parma	OH	44134	1/10/2011	Spoke with Allene & reviewed Butrans indication, dosing/strengths, conversion/titration, appropriate patients. Asked if she would stock one box of each strength. She said she would order one box each of 5mcg & 10mcg and would wait to see more prescriptions before ordering the 20mcg.
PPLPMDL0020000001	Parma	OH	44129	1/10/2011	Introduced myself & Butrans to Linda, pharmacy manager, who had already read about Butrans. Reviewed indication, appropriate patient types, dosing/conversion/titration, abuse/addiction liability. Asked if she would place an order & she said that the 5mcg & 10mcg are being shipped to her in an auto shipment. Reviewed managed care/savings program as well. Asked who in the area I should call on upon launch & she said that she is new to the area. Let Linda know that I would be following up with her to check back on Butrans stocking and to see if she had any questions.
PPLPMDL0020000001	Parma	OH	44129	1/10/2011	Discussed Partners Against Pain & FACETS resource with Dr. Ortega & Cindy as a follow-up to my lunch conversation with them. Dr. Ortega was very happy with the resources & said that it was exactly the kind of information that he wanted for me to bring. Also discussed with Cindy the various resources on Partners Against Pain USB and let her know that I would be following up with her again to see what forms they decided to implement in their practice. Made sure they were stocked on OxyContin savings cards.
PPLPMDL0020000001	Parma	OH	44134	1/10/2011	Discussed RyzoIt 2-3-1 message with Dr. George who said that he had not heard of RyzoIt. Asked him if he uses a lot of tramadol in his practice & he said that he does, especially now that Darvocet is not available. He said that he liked that it is not scheduled & it seems to work. Discussed dosing and the option of giving his patients RyzoIt, with q24h dosing. Also discussed managed care coverage & RyzoIt Value Cards. He said that it sounded like there is a place for RyzoIt in his practice, so i let him know I would be back to follow up with him to get his feedback. Dr. George said that he does not like to use OxyContin in his practice- I asked why & he said that it is due to abuse concerns. Asked if this is a concern only with OxyContin or with all opioids & he said all. Discussed importance of patient selection. He said he does have a few pts on it, who have severe chronic pain.
PPLPMDL0020000001	Beachwood	OH	44122	1/11/2011	Spoke with Shelly (pharmacy manager) & introduced Butrans. Reviewed indication, dosing/strengths, conversion/titration, appropriate patient types & importance of stocking now. She said that she would wait for a prescription before ordering. I let her know that physicians will want to know where their patients can get it right away. Also reviewed managed care and RelayHealth e-voucher (Rite Aid does participate). Asked her if she would consider stocking one box each of the 5mcg & 10mcg boxes since they will be the two starting doses. She agreed to order one of the 5mcg & one of the 10mcg.
PPLPMDL0020000001	Shaker Heights	OH	44122	1/11/2011	Introduced myself & Butrans to Nahla, pharmacy manager. Reviewed indication, dosing/strengths, appropriate patient types, and importance of stocking now. She said that she would not stock it until she sees a prescription. I let her know that physicians would want to know where their patients can get Butrans same-day and that pain patients likely will not wait for her to order it, but will go to a pharmacy that is stocking it. Also reviewed RelayHealth e-voucher. She said she has ordered too many products early & they just sit on her shelf. I asked if she would order just one box of the 5mcg strengths but she said she would not.
PPLPMDL0020000001	Beachwood	OH	44122	1/11/2011	Spoke with Ashley and introduced Butrans. Reviewed indication, appropriate patient type, conversion/titration, dosing/strengths, boxed warning. I asked her thoughts & she said that she hasn't seen any prescriptions for any buprenorphine product, so she probably wouldn't stock Butrans. I re-reviewed the Butrans indication as well as appropriate patient types. She said that she does think there may be a place for it. I asked if she would place an order for one box of each strength, but she said that she cannot do this until she sees a prescription. I asked her if she would be willing to order just the 5mcg or 10mcg since they are the starting doses, but she said that she will order only when physicians start writing it.
PPLPMDL0020000001	Independence	OH	44131	1/11/2011	Spoke with Jim & introduced Butrans. Reviewed indication, appropriate patients, dosing/strengths, transdermal system, CIII. Jim said that they don't fill a lot of pain management prescriptions in general in this area but recommended that I speak with Drs. Rutkowski. I let him know that I have an appointment with them early in the launch. I asked him if he would place an order for one box of each strength so that when I speak with Drs. Rutkowski, I can let them know that this will be one of the pharmacies carrying Butrans immediately. He said that he would place the order. I asked if there was anyone else in the area who I should target. He said that the Rutkowski office is the one they see pain medication prescriptions from most often. Discussed savings and managed care & reminded him to place the order for one box of each strength as committed before I left.
PPLPMDL0020000001	Cleveland	OH	44195	1/11/2011	I asked Kathy to recommend OxyContin to Dr.Mekhal when a long-acting opioid is appropriate,with convenience of q12h dosing and she said she would recommend OxyContin for the appropriate patients.talked to Kathy briefly about patients she is treating that are on tramadol,dosing around the clock and perhaps considering RyzoIt as an option once daily.Kathy said a lot of patients are not compliant with q4-6h dosing and she thinks once daily dosing of RyzoIt is easier for them,so i asked Kathy to consider RyzoIt for commercial plan patients. recommended Senokot-S<font color=blue><b>CHUDAKOB's query on 01/22/2011</b></font>Amy, This is only a reminder that we can no longer discuss convenience as a benefit when discussing our products. This was brought up at the National Sales Meeting. At the time of this call note, it was OK, but this is a reminder to not discuss convenience in the future.<font color=green><b>BROOKAM's response on 01/24/2011</b></font>yea thank you, are we getting a "formal" letter sent to us via a bulletin and destroy all of the q12h convenience dosing flashcards too?<font color=blue><b>CHUDAKOB added notes on 01/25/2011</b></font>Thanks!
PPLPMDL0020000001	Euclid	OH	44123	1/11/2011	Spoke to Sarah about the launch of Butrans - indication, dosing, patient type, application and disposal. Explained the importance of stocking and also explained the voucher program. She said they usually dont stock until they get a script. Melinda is the PIC responsible for ordering.
PPLPMDL0020000001	Cleveland	OH	44135	1/11/2011	Spoke with Ken, we reviewed the Butrans FPI, indication, medication guide. He thinks that it will be a good option instead of hydrocodone around the clock and he agreed to stock. Reminder about OxyContin as an option instead of short acting around the clock and that we will still be discussing RyzoIt and Senokot S with prescribers.
PPLPMDL0020000001	Euclid	OH	44119	1/11/2011	Spoke to Lauren about the launch of Butrans - indication, dosing, patient type, application and disposal. She asked which HCP will we be targeting. I explained both IM and pain mgmt. She thought pain mgmt would be more likely to prescribe and she mentioned Dr. morley and Dr. Saeed. Discussed the voucher program. They do not participate in the relay health program. Asked for commitment to stock at least one strength. No commitment.
PPLPMDL0020000001	Euclid	OH	44132	1/11/2011	Spoke to Tim and Holly about the launch of Butrans. They said they received a packette of info. Discussed the indication, dosing, patient type, application and disposal. Discussed commercial coverage and voucher program. No relay health. Mostly govt funded patients. She asked about most common strenght. Explain the 5 and 10mcg. She suggested that dr levin and Bernie might be good target. No commitment to stock because no room and they have a lot of govt patients.
PPLPMDL0020000001	Richmond Heights	OH	44143	1/11/2011	Window call....reminded doc of the oxycontin indication/patient type. Explained the coverage with AARP Med D plans and that those patients can get the product for the lowest branded co pay.
PPLPMDL0020000001	Euclid	OH	44119	1/11/2011	Discussed the ryzoIt indication and the coverage with medical mutual. Asked doc if he was still giving value cards to patients. He said he was. Reminded him that cards are for new patients and that existing patients should retain cards for monthly use.
PPLPMDL0020000001	Cleveland	OH	44135	1/11/2011	Spoke with Jagreet, floater. We reviewed Butrans FPI. He looked to see if it was in their computer yet to order and she said it is not. She said that it would be Lisa's decision to order and a corporate decision as well based on what moves well in the particular pharmacies.
PPLPMDL0020000001	Euclid	OH	44123	1/11/2011	Spoke to Jeffery about the launch of Butrans. The indication, dosing, patient type, application and disposal. Explained the voucher program and the relay health. Asked him for a commitment to stock. He said he would wait for a script before he stocks 3 boxes of something. I asked him for just one box. He said he would see.
PPLPMDL0020000001	Lakewood	OH	44107	1/11/2011	Quick call, I asked Dr when does he feel OxyContin is appropriate. He said he generally just maintains patients who already come to him on it. No further info gained.
PPLPMDL0020000001	Euclid	OH	44119	1/11/2011	Spoke to David about the launch of Butrans - indication, dosing, patient type, application and disposal, voucher program. He liked the idea of the disposal pouches. He committed to ordering 1 box of all three.
PPLPMDL0020000001	Cleveland	OH	44130	1/11/2011	Dr. Warren said he typically prescribes 20, 30, or 40mg q12h of OxyContin. He said he sometimes will dose it q8h. I showed FPI section 2.6 and asked him if he has considered increasing the total daily dose rather than increasing the dosing interval. Presented conversion/titration guide showing the seven total tablet strengths and asked if he was aware of the 15mg & 60mg intermediate strengths. He said he was not aware of the 15mg dose. He said that maybe he would consider increasing a patient's total daily dose and titrate to the next higher dose instead of trying a q8h schedule. He said he does not use much tramadol in his practice, other than very occasionally for breakthrough pain. Recommended Senokot-S for opioid-induced constipation.
PPLPMDL0020000001	Middleburg Heights	OH	44130	1/11/2011	Dr. Saboori asked for more conversion/titration guides for himself & Jill. He described radiation oncology to me and I asked what strengths OxyContin he finds himself prescribing most often. He said that he usually uses 20mg. Discussed seven tablet strengths and conversion & titration. He said that he and Jill find the guides very useful in helping them treat patients and that they also appreciate Senokot-S samples. Dr. Saboori said that he really likes OxyContin as a long-acting option.

PPLPMDL0020000001	Cleveland	OH	44130	1/11/2011	Asked Dr. Vollweiler what strengths OxyContin she utilizes most frequently & she said that she typically would use a 20mg, 30mg, or 40mg. Discussed the seven available strengths. Presented conversion/titration guide which she said she would be able to use. She said that patients are typically taking Vicoden ATC or Percocet ATC before she initiates treatment on the appropriate dose of OxyContin. She said that they do utilize the savings cards. Recommended Senokot-S for opioid-induced constipation.
PPLPMDL0020000001	Cleveland	OH	44111	1/11/2011	Spoke with Mike Hoying, pharmacy director. Found out he is also the director for Lutheran. We reviewed Butrans FPI, indication, dosing and medication guide. He said he feels that Dr's might go to a patch like this sooner than duragesic, and he thinks that Drs might feel more comfortable with the dosing and molecule vs duragesic. He said there is an issue of patients coming into the hospital with a patch on and the nurses do not know and they will place a second patch or give more pain medication. He said it is more of a national problem than at Fairview but it is something to warn against in hospitals. He said that if the pain management Dr's are behind it, it should not be difficult to get on the Cleveland Clinic formulary and if that is the case they would try to stock. He said space is an issue in the pixis machines, but we can worry about it as Butrans becomes more widely used.
PPLPMDL0020000001	Cleveland	OH	44195	1/11/2011	i talked to dr about his patients taking Vicodin or Percocet,around the clock,and perhaps the q4-6h dosing regimen wasnt convenient for patients and dr thought OxyContin's q12h dosing was more convenient.dr said for some patients who dont like to get up in middle of night to take medication,especially as they are in chronic pain,OxyContin q12h dosing is more convenient in that aspect.i asked dr to consider OxyContin 10mg or 15mg q12h and showed OxyContin conversion guide.
PPLPMDL0020000001	Cleveland	OH	44195	1/11/2011	worked pain management dept-attended lecture-saw 4 attending physicians,4 fellows-left OxyContin fpi,conversion guides and slim jims with all fellows and brief discussions with each asking them to consider OxyContin 10mg and 15mg q12h; dr covington-chairman of chronic back&spine health and director of rehab program wants to set-up meeting with chronic pain and anesth/pain doctors to discuss new product end of January
PPLPMDL0020000001	Cleveland	OH	44195	1/11/2011	i talked to dr about his patients that are on morphine or Percocet,where he feels OxyContin is appropriate,dr said he has a handful of patients on OxyContin for chronic pain and they are doing well.dr said he doesnt like to start a lot of new patients on OxyContin unless pain is really severe and he has to go to OxyContin.dr gave a lecture on "Chronic opioids in Chronic Non-Malignant Pain"today in Pain Management.i asked dr to consider OxyContin 10mg or 15mg,with convenience of q12h dosing and showed flashcard with this information and OxyContin conversion guide and dr said he will remember this option
PPLPMDL0020000001	Cleveland	OH	44195	1/11/2011	i asked Anne to recommend OxyContin as a long-acting opioid option,for Dr.Stanton-Hicks patients she is treating,when a long-acting opioid is appropriate,with convenience of q12 dosing and gave OxyContin conversion guide and Anne said she would recommend OxyContin for severe pain patients. talked to Anne,NP,about patients on short-acting tramadol that could benefit from Ryzolet and Anne said patients seem to like once daily dosing of Ryzolet instead of dosing around the clock with Ultram.Anne said they have started patients on Ryzolet recently because of Darvocet being pulled from the market,so i asked Anne to consider Ryzolet for commercial plan patients and recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44195	1/11/2011	first time meeting doctor, he is in physical medicine&rehab and attended pain management lecture by Dr.Covington this am,so i introduced myself and asked where OxyContin plays a role in his practice? Dr said he writes OxyContin for severe pain patients,but does think there is a place for the medication.i gave dr OxyContin fpi,showed indication and asked about moderate pain patients and what he would treat them with? dr said usually tramadol or Vicodin,but definitely short-acting opioids.i asked dr to consider patients on short-acting opioids, where he deems appropriate to convert to a long-acting opioid,to consider OxyContin 10mg or 15mg with convenience of q12h dosing,showed flashcard with this information and OxyContin conversion guide.dr said he would consider that option
PPLPMDL0020000001	Cleveland	OH	44195	1/11/2011	talked to dr about his patients taking Vicodin or Percocet q4-6h and perhaps considering a long-acting opioid, OxyContin being an option with q12h dosing and showed convenience of q12h dosing flashcard and OxyContin conversion guide,instead of refilling short-acting opioid scripts.dr said he would consider that and i asked him to consider OxyContin 10mg or 15mg q12h and use the 7 tablet strengths to allow for flexibility in dosing.
PPLPMDL0020000001	Broadview Heights	OH	44147	1/12/2011	Spoke with Gail & introduced Butrans. Asked if they had received their auto shipment, but she said that they had not that she is aware of. Reviewed Butrans information with her including indication, usage, dosing/conversion, boxed warning, CIII, and appropriate patients. She asked about managed care so i discussed tier 3 with her and let her know about the savings program.
PPLPMDL0020000001	Broadview Heights	OH	44147	1/12/2011	Spoke with Gail & introduced Butrans. Asked if they had received their auto shipment, but she said that they had not that she is aware of. Reviewed Butrans information with her including indication, usage, dosing/conversion, boxed warning, CIII, and appropriate patients. She asked about managed care so i discussed tier 3 with her and let her know about the savings program.
PPLPMDL0020000001	Bedford	OH	44146	1/12/2011	Introduced myself & Butrans to Ebony. Reviewed indication, appropriate patients, dosing, conversion. She asked who i would be calling on in the area & i asked her who she would recommend. She said Dr. Shin & his group at Southpoint. I let her know that a variety of specialties would be targeted due to the indication including moderate pain. Asked her if she would place an order to get it stocked now but she said she would wait for a prescription. She asked about managed care, so we discussed tier 3 status and the RelayHealth e-voucher, which she said they participate in. Asked if she would order a box of 5mcg & 10mcg strength since they are the two starting doses but she still said no.
PPLPMDL0020000001	Independence	OH	44131	1/12/2011	Introduced myself & Butrans to Allison (?). Reviewed indication, dosage, conversion/titration, transdermal patch system, addiction potential, CIII, and appropriate patients. I asked her if she would place an order so that I can let my physicians know that they are a location that has it in stock. She said that she would have to check with the head pharmacist. She asked about managed care coverage, so I reviewed that with her as well as the RelayHealth e-voucher. She & her tech said that sometimes they have a problem with those, so I let them know that if they would prefer, I can bring the savings cards to them or direct them to where they can print them off. The head pharmacist then came over, looked at the FPI that i had given Allison & adamantly told me that she will absolutely not order a controlled substance without a prescription.
PPLPMDL0020000001	Hudson	OH	44236	1/12/2011	Spoke with Bob & introduced Butrans. Reviewed indication, dosing, titration/conversion, appropriate patients. He asked if an opiate naive patient could use Butrans and i showed him FPI 2.2. I asked if he would place an order now for one box of each strength so that it is in stock already when physicians start writing prescriptions. He said he would be willing to order one box each of 5mcg & 10mcg since they will be the initial doses. Asked who in the area would be interested in hearing more about Butrans when we launch & he suggested the UH group across the street. Let him know i would be back to follow up.
PPLPMDL0020000001	BEDFORD	OH	44146	1/12/2011	Spoke with Marcus and introduced Butrans. Reviewed indication, dosing, conversion/titration, appropriate patients, transdermal system, CIII, abuse potential. He asked about heat application & I reviewed FPI 5.11. He also asked what to do in the event of an adhesion issue & i reviewed FPI 2.1. I asked him if he would place an order for one box of each and he agreed to do so.
PPLPMDL0020000001	Hudson	OH	44236	1/12/2011	Spoke with Beth & introduced Butrans. Reviewed indication, appropriate patients, starting dosing (Table 1), transdermal system, application, disposal, addiction potential/CIII. She said that Dr. McCallum (UH office) maintains a lot of patients on Vicoden & may be interested in hearing more about Butrans. She looked up pricing- reviewed managed care & savings opportunities. I asked if she would order one box of each strength. She said she would wait for a prescription. I let her know that physicians would want to know where their patients could get it immediately, but she said that she will not order until she sees a prescription. Asked if she would consider ordering just one box of 5mcg or 10mcg since they are the starting doses, but she said no.
PPLPMDL0020000001	Stow	OH	44224	1/12/2011	Spoke with Holly and reviewed FPI, indication, boxed warning and appropriate patients. She said she will wait until they see a script to order.
PPLPMDL0020000001	Westlake	OH	44145	1/12/2011	Spoke with Kyle, we reviewed Butrans FPI, indication dosing and medication guide. She said he had seen some information about it. She will not order until a script comes in or if a Dr's office called to ask them to order it for a patient.
PPLPMDL0020000001	Stow	OH	44224	1/12/2011	Quick call, said she didnt have time. Reminded her of managed care coverage with Oxycontin and lowest brand copy on mostly plans. asked if she has written Ryzolet yet and she said no, she doesnt write long acting Tramadol, doesnt see a place
PPLPMDL0020000001	Bedford	OH	44146	1/12/2011	Quick call with Dr. Moufawad. He asked me for OxyContin savings cards which i supplied him with. He said he has a few patients who he wanted to give them to. He signed for new Ryzolet cards & i reviewed them with Amber his MA.
PPLPMDL0020000001	Westlake	OH	44145	1/12/2011	Spoke with Mollie, she will pass the Butrans info along to the Ziad and the other pharmacists. They will be having another health fair in the fall and she will email me with info on having a display.
PPLPMDL0020000001	Cleveland	OH	44115	1/12/2011	I spoke with Jodie,Clinical Manager,Pharm D,about Butrans FPI,black box warning,dosage strengths available,medication guide and instructions for use.Jodie said she see's more acute pain,not chronic pain,in hospital so not sure where Butrans will play a role here. Jodie said maybe if patients come to hospital already on Butrans,she could see a reason for stocking Butrans as patients would need it,if doctor wanted patients to continue her therapy but thinks it would be tough to maintain as patients are on Butrans for 1wk at a time.Jodie asked if patients who are thin, can they be started on Butrans? i told Jodie there wasnt any information in the Butrans FPI,but i had Jodie fill out Medical Education Request form.i did show Jodie the FPI section 11,noting that skin is the only barrier to diffusion from the system.i talked to Ratchana,Pharmacist,about Butrans FPI and a Pharmacy student.
PPLPMDL0020000001	Cleveland	OH	44115	1/12/2011	i talked to Vince,Pharmacy Technician,about Butrans FPI,dosage strengths and stocking and Vince said George Kollias,Pharmacy Manager would order Butrans if he felt there was a place for Butrans.Vince said they have 70%medicare part D and 30% commercial and they dont have evouchers so they would need savings cards for Butrans.Vince they see a lot of Percocet and mostly from the Orthopedic doctors.
PPLPMDL0020000001	Cleveland	OH	44106	1/12/2011	Jack Losher,Assist Director of Pharmacy,referred me to Cynthia Brehun,Pain Medicine&Spine Care Coordinator,to discuss Butrans FPI,black box warning,dosage strengths,medication guide and instructions for use.Pain Management has 75% of patients on non-opioid analgesics.unless patients have been through extensive conservative treatment,then they'll consider opioids.OxyContin and methadone are prescribed for a few patients,usually patients are on tramadol.Cynthia see's a place for Butrans in their patient population and will give the FPI to Dr.Ali Mchaourab,Director of Pain Management.
PPLPMDL0020000001	Stow	OH	44224	1/12/2011	Spoke To Dr while he was shoveling. Reminded Dr of patients where he would write Vicodin ATCa nd are chronic using 10 or 15mg of Oxycontin and patient getting the convenience of q12hr dosing. Reminded of Ryzolets coverage with commercial plans, he said he is not a big Tramadol fan..
PPLPMDL0020000001	Bedford	OH	44146	1/12/2011	Reminded Dr. Haddad of our last conversation about patients liking the "security" of short-acting pain medication because they feel they can control how often they take their medication. Reviewed FPI section 2.6. He said that he does occasionally have patients stay on immediate release oxycodone or a non-opioid analgesic for breakthrough. Reviewed Ryzolet and savings cards & he said he keeps forgetting about it. Recommended Senokot-S for opioid-induced constipation. Spoke with Hailey & followed up on her questions with Senokot-S. I gave her new samples of Senokot-S & Colace & she said that a lot of patients would be very happy.
PPLPMDL0020000001	Cleveland	OH	44106	1/12/2011	talked to dr in hallway at the V.A.Medical center and dr said he was at the barber getting a haircut and the barber and his friends said the new OxyContin doesnt work as well as the other.i told the doctor that there is no "new" OxyContin, just reformulated,but still oxycodone with all the attendant risks involved as before.
PPLPMDL0020000001	Westlake	OH	44145	1/12/2011	Reviewed Butrans information with Katy and gave her information to deliver to the pharmacists and Stephanie. She will pass along the info and contact me if they have further questions.
PPLPMDL0020000001	Stow	OH	44224	1/12/2011	Introduced self, he works along with Dr LABabidi and is always with him. I asked what his experience is with Oxycontin and he said he does not write and I asked why and he said it dose dumps and causes Euphoria. I asked if that is his experience or did he hear that and he said he had to go. I stated that in our FPI it shows the matrix delivery system delivering the medication throughout the 12hrs. He said he has not written Ryzolet but did not have any more time.
PPLPMDL0020000001	Independence	OH	44131	1/12/2011	Spoke with Stella (MA) and presented OxyContin savings cards. Walked her through how they are used and let her know they are for commercial insurance only- non Medicare or Medicaid. Also gave her Senokot-S & Colace samples which she said she had just run out of. Tried to speak with Kathy (OM) to schedule lunch or appointment but she was not in today. Stella said to try back next week
PPLPMDL0020000001	Maple Heights	OH	44137	1/13/2011	Spoke with Jim and introduced Butrans. Reviewed indication, appropriate patients, boxed warning, dosing/conversion, application sites, disposal. I asked him to order a box of each strength & he said that he can get it next day when he sees a prescription. I let him know that many pharmacies are already being auto-shipped and will have it on their shelves immediately when patients come in with a prescription and that physicians always want to know where their patients can get a new drug right away. He asked about managed care coverage. Covered tier 3 status and discussed savings program. Asked if he would order just the 5 or 10mcg strength since they are the two starting doses, but he still said he would wait.
PPLPMDL0020000001	Maple Heights	OH	44137	1/13/2011	Asked Dr. Dale where OxyContin currently fits into his practice. He said that he does prescribe it occasionally, but not very often. Discussed the importance of appropriate patient selection. He said that he usually refers patients to pain management if he feels they will need to be on medication for an extended period of time. Presented conversion/titration guide which he said he found interesting & he also said that he had forgotten about the seven tablet strengths. He agreed that the intermediate strengths allowed for flexibility of dosing and also that some patients who are on an around-the-clock regimen of short-acting opioid analgesics may find the q12h dosing of OxyContin to be convenient. Delivered Ryzolet 2-3-1 message. He asked about insurance coverage. Discussed value cards as a savings opportunity for patients who pay cash or who have commercial insurance coverage. Also recommended Senokot-S for opioid induced constipation.
PPLPMDL0020000001					

	Maple Heights	OH	44137	1/13/2011	Asked Dr. Shenigo where OxyContin currently fits into her practice & she said that she uses it very rarely. She said that she usually reserves it for very extreme pain cases such as pain due to cancer. She said that if she feels that someone needs something as "strong" as OxyContin, she would generally send them to pain management to be evaluated and treated. Discussed the importance of appropriate patient selection. Asked what patients are typically taking before she would consider switching them to an appropriate dose of OxyContin q12h & she said that Percocet is her "go-to". Presented conversion/titration guide & discussed the seven tablet strengths. Dr. Shenigo asked about Ryzoft. Delivered 2-3-1 message & discussed value cards. She said she does use some tramadol in her practice and is willing to try Ryzoft on the appropriate patient. Recommended Senokot-S for opioid- Discussed the oxycontin patient type and reminded doc of the preferred coverage with AARP Med D Plans. Those patients can get oxycontin at the lowest branded co pay. Gave more savings cards and explained the 03/31/11 expiration date.
PPLPMDL0020000001	Cleveland	OH	44124	1/13/2011	
PPLPMDL0020000001	Cleveland	OH	44195	1/13/2011	talked to Mort Goldman, Director of Pharmacotherapy Services and In-patient pharmacy and Mandy Leonard, Pharm D, about Butrans FPI, black box warning, dosage strengths available, medication guide, instructions for use and also if Butrans would play a role in the in-patient setting at the Cleveland Clinic. Mort and Mandy said "they don't think there's a place for Butrans, at least now, for Butrans as its cheaper to give a pill every day, if doctors prescribe in the out-patient setting that's fine, but unless a doctor (or more, no number in particular) fills out drug review form and Mandy and her team review the drug and prepare a monograph for Butrans and present to the Clinic's P&T committee, the drug would not be available in in-patient" I asked if they see a lot of Vicodin, Percocet patients that they feel could benefit from Butrans, in-patient, both of them said "no, there's a lot of acute pain in hospital and this isn't indicated for acute, only chronic" so not right now.
PPLPMDL0020000001	Cleveland	OH	44103	1/13/2011	I talked to Hakeem, Pharmacist and Abdul, Pharmacist, about Butrans FPI, black box warning, dosage strengths, medication guide and instructions for use and stocking of Butrans. Hakeem and Abdul said they will order the max amount of cartons and use the rebate order form I gave them but they asked if Medicaid is covering Butrans as that's 80% of their patient population. I told Hakeem and Abdul that Butrans will be a PA with some criteria that doctors have to look at before putting PA through for approval, so its not locked out, they were both happy to hear that and I asked how much commercial plan business do they have? both of them said about 20-30% commercial plans the rest is Medicare part d. they told me to talk to Dr. Nickels, Dr. Boyd, Dr. Robson, Dr. Katz and Dr. Marshall, Dr. Harris (different territory) and Dr. Vrooman and said they would think of others next time I come in
PPLPMDL0020000001	Richmond Heights	OH	44143	1/13/2011	Window call.... Discussed oxycontin patient type. Reminded him of the preferred coverage with medicare and AARP plans. Nothing learned. Waiting to hear back from Nurse, Nancy to schedule a lunch.
PPLPMDL0020000001	Cleveland	OH	44109	1/13/2011	talked to Samantha, Pharmacist, about Butrans FPI, black box warning, dosage strengths, medication guide, instructions for use and stocking. Samantha said she read about Butrans in the Pharmacy magazine so she knew it was coming and would order 1 carton of Butrans 5mgc/hour and 10mgc/hour. I told Samantha I would follow-up end of month/feb to tell her doctors names that have committed to prescribing.
PPLPMDL0020000001	Euclid	OH	44117	1/13/2011	Asked doc how much of his patient population has commercial insurance. He said not much. I reminded him of the savings cards and potential weekly use and the expiration date. He said patients don't complain about the cost. Let him know that we have them if he thinks of anyone. Also reminded him of the ryzoft patient and BWC coverage.
PPLPMDL0020000001	FAIRVIEW PARK	OH	44126	1/13/2011	Spoke with Tom, we reviewed the Butrans FPI, indication, dosing, medication guide. Tom agreed to order at the starting doses to start. He only keeps two bottles of OxyContin on shelf because it is too expensive to sit, but he can get meds for patients the same day. If they come in the morning he can have it by 3pm. He has not seen scripts for Ryzoft, reminder about Senokot S with opioids.
PPLPMDL0020000001	Cleveland	OH	44109	1/13/2011	I talked to Debbie, Pharmacist, about Butrans FPI, Ron, Pharmacy Manager was out for the day but Debbie said she orders narcotics as well so I talked to her about Butrans black box warning, dosage strengths, medication guide, REMS program, instructions for use and stocking. Debbie said she'll order the 5 and 10mgc/hour Butrans but 80% is Medicaid and about 15-20% is Commercial, just a little Med part d here. Debbie asked if I could follow-up with Ron to discuss Butrans with him too
PPLPMDL0020000001	Cleveland	OH	44102	1/13/2011	I talked to Ed Carter, Director of Pharmacy, about Butrans FPI, black box warning, dosage strengths available, medication guide, REMS program, instructions for use, formulary coverage and stocking. I asked Ed if he really saw a place for Butrans in nursing home, as he told me on the phone he did and Ed said yes, he sees Butrans as an option for those patients on low dose Vicodin or Percocet or patients that can't swallow pills. Ed asked about insurance and said they do have commercial plan patients so we talked about Butrans savings cards that will be available for patients, but Medicare Part D isn't covering Butrans, discussed Medicaid coverage as a PA for Butrans. Gave Ed Butrans Rebate order form and he said he'll order 2boxes of each strength. I asked Ed who are some doctors that you see a lot of their patients? Ed said Dr. Talbot, Dr. Celeste, Dr. Carson, almost all of the doctors at Metro/Brooklyn Geriatric dept send patients to him so I told Ed I have lunch with them 1/11/11
PPLPMDL0020000001	Rocky River	OH	44116	1/13/2011	Spoke with Sheri, we reviewed Butrans FPI, indication, dosing and medication guide. I asked her ideas and he does not know if Drs will prescribe it or not. She will not order unless they get a script.
PPLPMDL0020000001	Garfield Hts	OH	44125	1/13/2011	Spoke with Allene, PharmD and introduced Butrans. Reviewed indication, usage, dosing/conversion/titration, adhesion, disposal, addiction/abuse potential, CII. Asked Allene to order a box of each but she said that it would take approval from their Pharmacy Manager who would not be in until next week. I let her know that other local pharmacies were auto-shipped and have it in stock & recommended they order at least one box of 5mgc & 10mgc so they have it as well.
PPLPMDL0020000001	Garfield Heights	OH	44125	1/13/2011	Spoke at length with Denise regarding the practice of Drs. Solomon, Samuel, & Ningengowda. She said that in general, they try to stay away from prescribing pain medications and reserve OxyContin for severe, chronic pain such as cancer. She said they do procedures whenever possible. Discussed conversion/titration guide and the process of switching a patient from around-the-clock short-acting opioids to an appropriate q12h dose of OxyContin. We also discussed 2-3-1 Ryzoft message and savings cards for OxyContin & Ryzoft. I also recommended Senokot-S for opioid-induced constipation. They do not take any samples, including OTC. <font color=blue>-<b>CHUDAKOB's query on 01/22/2011</b>-</font>Ashleigh. What you have written for your next call objective is something that should have been put in your calendar. Your next call objective is more to help you advance the sales call. <font color=green>-<b>APSEGAS's response on 01/24/2011</b>-</font>That makes sense. I apologize- my next call objective will be: Dr. Samuel, what is your trigger in switching a patient from a short-acting around-the-clock opioid medication to a long-acting medication like OxyContin q12h? When would you prescribe a long-acting opioid? (Also introduce Butrans and find out where Dr. Samuel thinks this will fit into his practice- Would you be more likely to prescribe Butrans for an opioid-naive or opioid-experienced patient?) <font color=blue>-<b>CHUDAKOB added notes on 01/24/2011</b>-</font>Nice job! Much better
PPLPMDL0020000001	Independence	OH	44131	1/13/2011	Followed up with JT to find out if he was able to get Butrans ordered as committed. He said that he had not tried yet today and was planning on submitting the order tonight. He said he would call me if he has any problems at all. Also discussed Butrans savings program in more detail. JT said Discount Drug Mart does not participate in RelayHealth e-voucher so I let him know that we would have savings cards & he that he will be able to go online and print savings cards for customers from his computer.
PPLPMDL0020000001	Cleveland	OH	44113	1/13/2011	I talked to dr about her percocet patients dosing around the clock that he feels are ready to convert to a long-acting opioid and asked dr to consider OxyContin 10mg or 15mg with convenience of q12h dosing and showed flashcard with this information. dr said he has recently started a patient on OxyContin 10mg because patients pain kept worsening and OxyContin was best option for patient. gave OxyContin conversion guide and
PPLPMDL0020000001	Cleveland	OH	44125	1/13/2011	Spoke with Christine & introduced Butrans. Reviewed indication, usage, dosing, transdermal system, application sites, disposal, managed care, savings program, addiction/abuse potential. I asked her to place an order for one box each of the strengths so they can be one of the pharmacies who have it in stock immediately when a patient comes in with a prescription. She said they wait for a prescription to come in before they order. I let her know that it is important to physicians to know who has it in stock upon launch & they send their patients to pharmacies who already have it. Asked her if she would order one box of 5 & 10mgc and she said she would order a box
PPLPMDL0020000001	Maple Heights	OH	44137	1/13/2011	Spoke with Ray & reviewed Butrans indication, dosing, conversion, application, abuse/addiction potential, managed care. Asked her thoughts & she said that she thought there would be a place for it. I asked if she would order a box of each strength and she said she has to discuss it with her partner, Kim before doing so. I explained that many local pharmacies were being auto-shipped & would have it already stocked upon launch & that physicians always want to know who has it on their shelf the same day they write the prescription. I asked if she would recommend to her partner that they order a box of at least the 5mgc & 10mgc strengths and she said
PPLPMDL0020000001	Garfield Heights	OH	44125	1/13/2011	Spoke with Dave & introduced myself and Butrans. Reviewed indication, usage, dosing, abuse/addiction potential, CII, transdermal system & adhesion. Dave said that he finds that patients find that transdermal systems are convenient. Discussed managed care tier 3 status & savings program. I asked him to order one box each strength and he said he will wait for a prescription. I let him know that many pharmacies have been auto shipped and physicians will want to know where their patients can get Butrans same-day when they bring in their prescription. He said that he would wait until launch. Discussed 5mgc & 10mgc as starting doses.
PPLPMDL0020000001	Cleveland	OH	44195	1/13/2011	I talked to dr about her patients taking short-acting opioids, like Percocet, that she feels are ready to convert to a long-acting opioid and considering OxyContin 10mg or 15mg q12h, showed flashcard with this information. dr said she prescribes all 7 dosage strengths of OxyContin, does like q12h dosing for patients as it can be more convenient than dosing Percocet q4-6h for some patients. I gave OxyContin conversion guide and recommended
PPLPMDL0020000001	Independence	OH	44131	1/13/2011	Quick call with Dr. Rob in the hallway. Presented conversion guide and reminded him of seven available tablet strengths as well as the convenience of q12h dosing. Also recommended Senokot-S for opioid-induced
PPLPMDL0020000001	Cleveland	OH	44195	1/13/2011	only got a few minutes with dr in hallway but asked dr to consider OxyContin 10mg or 15mg with convenience of q12h dosing for those patients that are on short-acting opioids, like Percocet, where he feels a long-acting opioid is more appropriate. showed OxyContin flashcard with q12h dosing convenience. recommended Senokot-S
PPLPMDL0020000001	Highland Heights	OH	44143	1/14/2011	Spoke to Debbie about the launch of Butrans - Discussed the indication, Dosing, patient type, CII, estimated conversion from morphine equivalent, application sites and disposal. She asked what happens at day 6 when the analgesia wears off. I explained the acceptable use of supplemental IR opioids. She said she is interested in seeing how well Butrans does as many patients taking IR opioids ATC will find it difficult to adjust to not taking pills. Told her that opioid naive patients may also be an appropriate patient. Committed to stocking the 5mgc.
PPLPMDL0020000001	Sagamore Hills	OH	44067	1/14/2011	Spoke with pharmacist & introduced Butrans. Reviewed indication, usage, dosing, conversion, appropriate patients, application, and abuse/addiction potential. I asked if she would place an order for a box of each strength so that when I start speaking with area physicians I can include them in the list of pharmacies that have Butrans in stock. She said that she would do this. Reviewed managed care tier 3 status & let her know that Butrans will have a Relay Health e-Voucher.
PPLPMDL0020000001	NORTHFIELD	OH	44067	1/14/2011	Spoke with Janelle and introduced Butrans. Reviewed indication, usage, dosing, conversion, appropriate patients, addiction/abuse potential, application, and disposal. Asked her if she would order a box of each strength. She said that she would wait for a prescription. I explained that some local chains had been auto-shipped and that physicians always want to know where their patients can get Butrans same-day. I asked if she would order just a box of the 5mgc or 10mgc strength but she said that they will wait for the script. She said that they usually only stock a product that they see several prescriptions per week for as they like to keep their inventory low.
PPLPMDL0020000001	Twinsburg	OH	44087	1/14/2011	Introduced myself to Nancy (tech) & Lou (pharmacy manager). Reviewed Butrans indication, appropriate patients, dosing, conversion, abuse/addiction potential, managed care. Lou said he really thinks that Butrans could "take off". He said he would recommend me call on the UH group in Hudson. I told him that the group is complete "no access" and he said that he was very close with several of the physicians there and would be happy to contact those physicians to tell them about Butrans. He said that he thinks that Dr. Whittmer will be especially interested. He also mentioned Dr. Moufawad as someone who may be interested. I asked him to order a box of each strength and he happily agreed to do so. He said he really thinks there is a place for Butrans and is excited to see what happens with it. Also told him about e-voucher and savings program. Let him know I would be following up and asked him to keep me informed if he hears anything from any physicians.
PPLPMDL0020000001	Parma	OH	44129	1/14/2011	Spoke with Mary Jo, pharmacist, and introduced Butrans. Reviewed indication, abuse/addiction potential, dosing, conversion, application sites, appropriate patients. She looked in her system and said that it was loaded. I asked her to punch in an order for a box of each strength, but she said they wait for a prescription before ordering. I explained that many local pharmacies have been auto-shipped and that it is important to physicians to know where patients can obtain Butrans immediately. Also let her know that it would have a Relay Health e-Voucher program. Asked if she would order one box of 5mgc or 10mgc since they are the two starting doses, but she said they would hold off until a prescription came through. She did recommend that I call on Laura Stith as she is the largest Vicodin writer in the area.
PPLPMDL0020000001	Cleveland	OH	44129	1/14/2011	Followed up and met the new pharmacist, Marko. Introduced Butrans & reviewed indication, dosing, conversion, appropriate patient type, application, abuse/addiction potential. Asked if he would place an order now for one box of each strength. He said he will wait for a prescription. I explained that physicians will want to know who already has it stocked & will send patients there and also that several local chains have been auto-shipped.
PPLPMDL0020000001	Cleveland	OH	44105	1/14/2011	Marko asked what the most popular doses we anticipate being most common- reviewed Table 1 with him. Asked if he would order a box of 5mgc & 10mgc now and he agreed to do this.
PPLPMDL0020000001	Cleveland	OH	44105	1/14/2011	I talked to Abdul, Pharmacist, about Butrans FPI, dosage strengths, medication guide, instructions for use, formulary coverage as Medicaid is 50% of business here but commercial is 50%- explained Butrans savings cards for those patients and Prior Authorization for Medicaid patients. Abdul said this is a great product for patients who have difficulty swallowing pills, elderly patients, patients on low doses of Vicodin or Percocet. Abdul said to talk to Dr. Tabbaa, Dr. Ryan, Dr. Astley- Pain doctors at Metro, Dr. Harrington- Internal Med/ Geriatric, Dr. El-Gazzar writes a lot of Vicodin (Jawewood dr), Dr. Celeste, Dr. Talbot and Dr. Carson are the biggest one's to be sure I talk to as he fills majority of their scripts. Dr. Nickels, Dr. Raheja, Dr. Nouraldin and Dr. Patel. Gave Butrans rebate form and asked Abdul to order max quantity to get most of the rebate and he agreed to do so immediately.

PPLPMDL0020000001	Cleveland	OH	44102	1/14/2011	i talked to Brian,Pharmacy Technician,about Butrans fpi,black box warning,dosage strengths,medication guide,REMS program,instructions for use,formulary coverage and savings cards for commercial plan patients.Brian said Vince,Pharmacist,wasnt available to talk so he would share all of the information with vince and asked me stop back and talk to Vince about ordering Butrans.
	Cleveland	OH	44114	1/14/2011	Reviewed the indication of ryzolt and the positioning. Asked him to convert those patients taking IR tramadol several times/day. Asked if they needed value cards. None needed.
PPLPMDL0020000001	Berea	OH	44017	1/14/2011	talked to Amy(Amalia),Pharmacy Manager,about Butrans fpi,black box warning,medication guide,instructions for use,formulary coverage as they see 95% Medicaid here and stocking of Butrans.Amy said that Anda,is the Wholesaler for NEW products,so they will ship Butrans and McKesson's wholesaler for all other products.I asked if Amy would order Butrans if she doesnt receive a shipment from Anda and she said yes,she'll order all 3 dosage strengths of Butrans. I asked who are the doctors that write a lot of hydrocodone combo's and Amy said they see a lot of scripts from Dr.Boyd (but more oxycodone-short and long-acting),Dr.Robson,Dr. Talbot,Dr. Celeste so she said talk to all of them and be sure to follow-up with her and provide feedback.Amy said patients who are on vicodin or percocet,could benefit by converting to Butrans and those patients who cant swallow. I explained Medicaid coverage was a Prior Authorization and commercial plan patients can use savings cards for Butrans
PPLPMDL0020000001	CLEVELAND	OH	44109	1/14/2011	Talked to Rod,Pharmacist,about Butrans FPI,black box warning,dosage strengths,medication guide,instructions for use,formulary coverage and savings cards for Butrans.Rod said they were autoshipped Butrans,all strengths,thinks its a good option for patients but they do have a lot of medicaid so if doctors fill out prior authorization and get approval he can see Butrans moving off shelves if not,small percentage is commercial plans so I told him about savings cards for those patients.rod said to follow-up end of month/feb and give feedback from what doctors think of butrans
PPLPMDL0020000001	Parma	OH	44129	1/14/2011	Quick call with Dr. Roheny in hallway. I handed him conversion/titration guide, opened to Pg 7. I asked him if he remembered our last conversation about the conversion ratio table & he said "Yes, it was just last week!". I told him that I was so excited to come back and felt that it was important that I follow up promptly on our conversation. I told him I had one question for him as I turned to the next page with the visual of the Vicodin ATC regimen. I asked him if he would think of just one patient who was taking Vicodin ATC and switch them to an appropriate dose of OxyContin q12h. He said "Absolutely!". I told him I would be returning to hear about it.
PPLPMDL0020000001	Cleveland	OH	44195	1/14/2011	attended lecture-Dr.Stanton-Hicks gave lecture on Sleep and Pain. talking to him,dr.cheng and dr.minzter
PPLPMDL0020000001	Twinsburg	OH	44087	1/14/2011	Spoke with Josh and introduced Butrans. Reviewed indication, dosing, conversion, application, disposal, addiction/abuse potential. He asked about cost. Discussed tier 3 coverage and started to tell him about savings program but he abruptly said he had to go help a customer, so I did not get a chance to ask them to place an order.
PPLPMDL0020000001	Brooklyn	OH	44144	1/14/2011	Dr. Detwiler said that he typically uses OxyContin for patients who are elderly and have a severe chronic pain. He said he's comfortable using OxyContin but only for select patients. I told him that he's doing exactly what he should be doing in being selective & that OxyContin, like all opioids carries abuse/addiction potential so he should be critical when choosing appropriate pts. Uncovered that he does not utilize OARS, so we discussed it & he said he was very interested in enrolling. He said that even though he feels confident that he can "weed out" drug-seekers, OARS will help him feel more secure, especially with new pts. I asked him to think about his patients who were taking ATC Vicodin/Percocet & asked if he thought any of them would find a q12h medication convenient-he said there may be a few. I asked him to consider OxyContin for those pts & he said he would. Discussed mgd care/savings. Ryzolt 2-3-1 msg-He said he finds that tramadol lasts for 12h & doesn't see need for q24h.
PPLPMDL0020000001	North Olmsted	OH	44070	1/14/2011	Spoke with Keith, floater. We reviewed Butrans FPI, indication, dosing and medication guide. He will give the info to the other pharmacists and it will be up to them to order. Reminder about OxyContin as a Q12hr option and asked him to recommend Senokot S.
PPLPMDL0020000001	Cleveland	OH	44113	1/14/2011	I talked to Aaron about Butrans FPI,dosage strengths,medication guide,instructions for use,formulary coverage as he has 80% Medicaid and 20% commercial but he and business partner are going to merge their 2 stores into one,so Exact Care pharmacy will have 50/50 medicaid/commercial plans,so we talked about Medicaid's coverage for Butrans and commercial plan patients using Butrans Savings cards.Aaron said his only concern is for those patients who are obese,sweat a lot,have a lot of folds in skin,he's not sure how well Butrans will be adhesive to their skin,so he said we'll just have to wait and see.Aaron said he would order the 5 and 10mcg/hour Butrans as these are the starting doses,but when I have lunches with offices that commit to starting patients on Butrans,Aaron said to have the nurses/med assistants call him and request the 20mcg/hour or more of the 5 and 10mcg/hour and he'll order them no problem.
PPLPMDL0020000001	Brooklyn	OH	44144	1/14/2011	Dr. Miguel said told me that he had just read an article that brought awareness to the amount of acetaminophen in Vicodin & Percocet. He said that the black box warning on those products now has to be updated and they are limiting the amount of acetaminophen in those products to no more than 325mg per pill. He said that ht article really made him think about his patients who take ATC Vicodin. I asked him what he is going to do with those patients and he said that he is going to switch them to OxyContin since it does not have any acetaminophen in it and is only dosed q12h. I showed him the single entity opioid marketing piece to reinforce his statement & also showed him the conversion guide as reference when switching those pts. Also discussed OARS which he was highly interested in. He said that since he will be switching more patients to OxyContin, being part of OARS will help him feel secure. Also Ryzolt 2-3-1 reminder. TOC with Tiffany & Patricia regarding OARS as well.
PPLPMDL0020000001	Cleveland	OH	44102	1/14/2011	i talked to Deb,Pharmacy Technician,about Butrans FPI,black box warning,dosage strengths,medication guide,instructions for use,formulary coverage for commercial plans and Medicaid patients having a prior authorization,talked about commercial plan patients using Butrans Savings cards. Deb said to stop back in a few weeks and talk to Vicki,Pharmacy Manager as she orders all medications and she is sure she'll order Butrans as this once weekly dosing regimen is more convenient for a lot of their patients that are taking Vicodin and Percocet q4-6h.
PPLPMDL0020000001	Cleveland	OH	44103	1/14/2011	i talked to Tom,Store Manager,and Tim,Pharmacist,about Butrans fpi,medication guide,instructions for use,formulary coverage and savings cards for commercial plan or cash paying patients for Butrans.Both of them said Butrans was autoshipped by Amerisource Bergen,they do have all 3 strengths of Butrans,but both of them said i need to follow-up with Joe,Pharmacy Manager and President of Sheliga Drug,as he may have more questions about the insurance coverage and the full prescribing information.
PPLPMDL0020000001	Cleveland	OH	44130	1/21/2011	Spoke with Dawn & introduced Butrans to her since I had not spoken with her about it yet. She said she had not heard about it. Reviewed indication, black box warning, appropriate patients, single-entity opioid, CIII, 7 days of buprenorphine delivery. She said that she really thinks there is a place for it, especially since Darvocet is no longer available. She also said that with recent news covering warnings about too much acetaminophen, more prescribers may be interested in Butrans. Discussed savings cards with her and told her the website where she can print savings cards, which she said she would do. Let her know that I have started speaking with physicians in the area & that Dr. Kansal said he would prescribe it.
PPLPMDL0020000001	Brooklyn	OH	44144	1/21/2011	Spoke with Rhonda & presented savings program and cards. Let her know that she could print more online. I also told her that I spoke with Dr. Miguel who was interested in prescribing it & recommended she place an order. She said she will wait for the Rx. Reviewed savings card restrictions & reminded her that they could not be used for anyone with any type of government insurance, including Medicare Part D & Medicaid. She agreed that a \$15 co-pay for commercially insured patients was a very reasonable cost for Butrans.
PPLPMDL0020000001	Independence	OH	44131	1/21/2011	Spoke with technician Mary & asked her if they had received Butrans. She had remembered that I had been working with JT to get it stocked ASAP. She said that she did not see it and that JT had just left for the day. She said that he would be in over the weekend & I let her know that I would come back to see him if possible. Reviewed Butrans with her & she said that she would leave information for JT.
PPLPMDL0020000001	Parma	OH	44129	1/21/2011	Introduced Butrans to Dr. Gigliotti & delivered 5 core messages. Also reminded him that bc it is an opioid it can still be abused & discussed importance of appropriate pt selection. I asked him what type of pt he was thinking of- opioid-naive or opioid-experienced & he said he probably would not Rx Butrans for an opioid-naive pt, at least until he got some experience using it. Showed him initiation guide & I asked if Butrans was something he could see himself integrating into his practice & he said he thinks so but needs more time to discuss it with me. He said he was late to an appointment & asked if I could come back next week so that we could discuss more details about Butrans. TOC with Anna to let her know that I would be following up early next week with Dr. Gigliotti regarding Butrans. Left FPI
PPLPMDL0020000001	Cleveland	OH	44130	1/21/2011	Introduced myself & Butrans to Dr. Kansal. Reviewed 5 core messages & box warning & asked his thoughts. He said many pts don't like long-acting pain medications because they like to get "that immediate release of drug" & that the patients think they need "that feeling" to have pain control. Discussed importance of approp pt selection. Asked if he would be more likely to use in opioid-naive or opioid-exper pts & he said he would try it in both. Discussed mgd care cvg & savings but he said he forgets to give cards out-told him about e-voucher. Asked him to think of more "moderate" pain pts & showed him FPI 2.2 & medication guide. Asked if he had one or two pts in mind who have commercial ins & he said he does due to Darvocet being gone & the latest news regarding combination opioids. He said he is concerned now ab using combo products. Reminded him that Butrans is a SEO & asked him when I could follow-up. He said 1 mo. OxyContin indication reminder & Ryzolt savings. Rec Senokot-S.
PPLPMDL0020000001	Brooklyn	OH	44144	1/21/2011	Introduced Butrans to Dr Miguel, delivering 5 core messages & reviewing boxed warning. Asked him his thoughts & he said he liked that it is a single-entity opioid in a transdermal system dosed once per week. I asked him if he is thinking of more an opioid-naive or opioid experienced patient & he said he would prescribe it for either. Went over initiation of treatment with Butrans and asked him to keep his more "moderate" chronic pain pts in mind. He asked if it was like Duragesic. I told him we have no comparative data & that I could only speak to Butrans, & reminded him to keep the more "moderate" chronic pain pts in mind. He asked if it was expensive. I asked him what insurance plans he sees & he said commercial plans & Med D. I reviewed savings program with him & told him that many pharmacies will have automatic savings in place as well. I asked when I could follow up & he said 2 wks. He also said he had Rx'ed OxyContin since our lunch & likes that it is a single-entity opioid. TOC
PPLPMDL0020000001	Independence	OH	44131	1/21/2011	Introduced Butrans to Dr Pal-Delivered 5 core msgs and reviewed black box warning. He said that he had read about buprenorphine. I asked him his thoughts & if he would be more willing to prescribe Butrans for opioid-naive or opioid-experienced pts. He said he would write it for either & likes that it is CIII & q7d. Reviewed FPI 2.2. I asked if he had one or two pts in mind & he said he does, but is concerned about coverage. Reviewed managed care & asked him to primarily think of commercially insured pts & told him about savings. I asked if he could still think of one or two pts & he said that he had actually just seen one this morning. He said he would check to see what insurance the pt had. Asked him if I could follow up with him next week & he asked that I come back in two weeks instead so that he would have time to prescribe it and get feedback. TOC with Jill- let her know about Butrans & the savings cards & let her know that Dr Pal asked me to come back in two weeks to follow up-font color=blue->CHUDAKOB's query on 01/27/2011</b></font>Ashleigh, please refrain from using abbreviations [TOC] in your call notes as other people that read these notes may not know what the abbreviations mean. Thanks!<font color=green->APSEGAS's response on 01/28/2011</b></font>That makes sense. I'm sorry!<font color=blue->CHUDAKOB added notes on 01/28/2011</b></font>Thank you!
PPLPMDL0020000001	Independence	OH	44131	1/21/2011	Introduced Butrans to Dr. Jack & covered 5 core messages. Asked him his thoughts & he said he is surprised & intrigued to know that it is CIII & dosed q7d. Reminded him that Butrans can still be abused & covered box warning. He said he is interested & wants to read the FPI before prescribing it. Discussed initiation of Butrans therapy, application, rotation. He asked what to do if it comes loose & I showed him FPI 2.1. I asked if he had any specific pts in mind & he said not yet. I reviewed indication & asked him to think of moderate chronic pain pts who need an ATC opioid analgesic. He asked me to follow up with him Mon or Tues morning because he wants to read FPI this weekend & will give me his honest feedback. I asked if Butrans was something he could see himself prescribing & he said yes. He said he has mostly commercially insured pts- reviewed savings prgm & he asked for cards-discussed cards w Maria & Penny. Reminder for OxyContin for appropriate pts in seven tablet strengths.
PPLPMDL0020000001	Independence	OH	44131	1/21/2011	Quick call with Dr. Rob but was able to deliver 5 core Butrans messages. He apologized that he did not have time to discuss Butrans with me due to extremely high patient load, but said that he would be happy to review the FPI to see if it was something he could use in his practice. TOC with Maria & Penny. Discussed Butrans 5 core messages & savings program with them. They said they see mostly commercially insured patients. I asked them if they thought Butrans sounded like something that the doctors would prescribe & they said yes.<font color=blue->CHUDAKOB's query on 01/27/2011</b></font>Ashleigh, instead of putting TOC with Maria & Penny, it might be better to write "I spoke with Maria, the nurse and Penny, the receptionist (if that is their titles) Then explain what you spoke about. This way you and others who read this will know exactly who you spoke with.<font color=green->APSEGAS's response on 01/28/2011</b></font>Sounds good. I will start doing this immediately. Thank you.<font color=blue->CHUDAKOB added notes on 01/28/2011</b></font>Thank you!
PPLPMDL0020000001					



PPLPMDL0020000001	Parma	OH	44129	1/24/2011	Followed up with Bethany regarding the questions she had about the OxyContin reformulation. She said that she didn't end up calling Purdue because she explained the reformulation to the patient and they have had no further "issues" with it, so she said unless the question arises again, she doesn't need additional information. Also followed up on Butrans stocking & she said that they do have it in stock now & it is ready to go. I confirmed that they do participate in RelayHealth's e-voucher program & let her know that most commercial insurance patients will only pay \$15 out-of-pocket which she agreed was very reasonable. She said she would keep me posted on what she sees/hears about Butrans
	Parma	OH	44134	1/24/2011	Introduced myself & Butrans to Dr. Loyke. Reviewed 5 core messages & black box warning. He said as a general rule, he really does not prescribe many narcotics. Discussed importance of appropriate pt selection. He said that he did like having "another option" with Butrans. Presented initiation/titration guide and discussed appropriate patients. He asked what the cash cost was. I reviewed managed care coverage & savings cards & he said he was surprised. I asked him if the appropriate patient presented if he would be willing to prescribe Butrans. He said he might & again said he liked having the option. He asked what other products I had. Delivered OxyContin for the appropriate patient reminder & Ryzolt 2-3-1 message.
PPLPMDL0020000001	Berea Cleveland	OH	44017	1/24/2011	Spoke with Tina, they do not do appts with reps. I reviewed Butrans medication guide, she said the Dr will look over the info and will call to make an appointment if they would like further information. I left info for Dr.
		OH	44113	1/24/2011	I asked dr if we could discuss another product that he has available now for pain management and dr said if it was "new" then I had to wait and discuss at lunch as he didnt have a lot of time today,so we talked about patients on short-acting oxycodone where dr feels a long-acting opioid,like OxyContin is an appropriate option and the 7 tablet strengths available to allow for flexibility in dosing OxyContin,discussed Medicaid and commercial plan insurance coverage for OxyContin at the lowest branded co-pay and recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44114	1/24/2011	I talked to Joel,Pharmacy Manager,about Butrans fpi,black box warning,dosage strengths available,medication guide,Butrans REMS program,stocking and formulary coverage for Butrans.Joel said he heard something about Butrans but didnt know much and asked who i called on in this area,as he gets patients from University Hospital,cleveland clinic,metro doctors,which are all of my focus so he said he'll order Butrans when he see's a script.I asked Joel to re-consider and order Butrans 5mcg/hour and 10mcg/hour transdermal systems as patients will be in pain and need medication immediately not the next day,Joel said that was a good point and he would consider ordering this week.Joel also said he thought Butrans was a good option instead of all the Vicodin and Percocet he is seeing being prescribed for patients,he prefers a transdermal system over the pills.recommended
PPLPMDL0020000001	Parma Heights	OH	44129	1/24/2011	Checked in with Al to ensure that he was able to get Butrans on the shelf. He verified that they do have it in stock. Discussed how he can go online to print more Butrans savings cards & went over how they are used & that they cannot be used for patients with any type of government coverage, including Medicare & Medicaid. Asked his thoughts on Butrans & he said he thinks there is a place for it, especially with the number of physicians who maintain pts on low dose hydrocodone around-the-clock. He recommended that I call on Stith, Roheny, & Gigliotti & I let him know that I will be talking to each of them.
PPLPMDL0020000001	Westlake Westlake	OH	44145	1/24/2011	Spoke with Rita MA, she said to leave the info and we will see what the Drs think of Butrans as an option.
PPLPMDL0020000001		OH	44145	1/24/2011	We reviewed the FPI for Butrans, warnings, indication, dosing and conversion guide. Dr said that he had read about it. He agreed to prescribe and thinks that it will be best for opioid experienced patients. We reviewed OxyContin as an option where Butrans may not provide adequate analgesia. Spoke with Joanne MA and reviewed Butrans medication guide and savings cards.
PPLPMDL0020000001	Berea	OH	44017	1/24/2011	Spoke with Nikki, we reviewed Butrans FPI, warnings, dosing and medication guide. She checked and did have 5 and 10mcg Butrans on the shelf. Reminder about OxyContin where Butrans is not enough, and asked to recommend Senokot-5.
PPLPMDL0020000001	Cleveland	OH	44104	1/24/2011	I talked to dr about Butrans FPI,black box warning,dosage strengths available,medication guide,instructions for use,formulary coverage for Medicaid patients being a Prior Authorization and dr said He has to do all Prior Authorizations and he doesnt do them so he just switches patients to other medications.Dr said Butrans sounds like a great option for his patients on low dose Vicodin or Percocet that he could start on Butrans 10mcg/hour transdermal system dr said he only has a small percentage of commercial plan patients where he would try Butrans in these patients first as he doesnt want to do Prior Authorizations for Medicaid patients to get Butrans.I talked to dr about commercial plan patients using Butrans savings cards and asked dr to consider 1-2 patients that had commercial insurance and were taking 15mg-40mg hydrocodone per day and dr said he had a few of those and would talk to them about Butrans and see how the medication works.we discussed Butrans REMS too.I talked to dr
PPLPMDL0020000001	Westlake Westlake Cleveland	OH	44145	1/24/2011	Spoke with Kelly and Suzy nurse, we reviewed the medication guide, managed care and savings program for Butrans.
PPLPMDL0020000001		OH	44145	1/24/2011	Quick call, I introduced her to Butrans. Dr did not have enough time today to get through entire Butrans FPI today.
PPLPMDL0020000001		OH	44103	1/24/2011	talked to Amol,Pharmacist,about Butrans fpi,black box warning,dosage strengths,medication guide,instructions for use,formulary coverage,Butrans patient savings cards and electronic voucher program that Rite Aid has for Butrans so Amol said they have Butrans 5mcg/hour and 10mcg/hour transdermal systems in stock and he thinks there is a place for Butrans in patients taking hydrocodone combo's or oxycodone combo's and said to follow-up in a few weeks to see if anyone gets started on Butrans.We also discussed Butrans REMS.I asked Amol to recommend OxyContin,for those patients that Butrans 20mcg/hour transdermal system doesnt work for,with the flexibility of 7 dosage strengths and gave OxyContin conversion guide and recommended Senokot-5
PPLPMDL0020000001	Independence	OH	44131	1/24/2011	Followed up with Dr. Jack as promised. He apologized & said that while he is very interested in Butrans, he did not have a chance to review the information that I gave him & asked me if I could come back Wednesday or Thursday this week so that we could discuss it. I let him & Maria know that I would be back to follow up & he said he appreciated it & would read the literature so that we could have a good discussion about Butrans.
PPLPMDL0020000001	Parma	OH	44129	1/24/2011	Introduced myself to Judy, one of Dr Salewski's nurses. Asked how I could see Dr Salewski & let Judy know that we just launched a product on Friday that no one has spoken with him about yet. Asked for an appointment. Judy asked "how expensive" Butrans is. Discussed managed care coverage and savings. Judy said that "80%" of his practice is Medicare Part D and that if Medicare doesn't cover it, he will not prescribe it. I asked Judy if I could set up a quick appointment with him to go over the product information since he is a pain management specialist & he may want to at least be aware of the product. She said that she would give me information to his scheduler to get an appointment or lunch.
PPLPMDL0020000001	Berea Westlake Independence	OH	44017	1/24/2011	Spoke with Dawn MA, I reviewed Butrans medication guide, she said the Dr's will need to look over the info and will call to make an appointment if they would like further information. I left info for both Dr's.
PPLPMDL0020000001		OH	44145	1/24/2011	Spoke with Rita MA, she said I can leave info for the Drs and see what they think about Butrans.
PPLPMDL0020000001		OH	44131	1/24/2011	Introduced myself & Butrans to Debbie. Reviewed 5 core messages & boxed warning. Debbie asked what the adverse events were & I showed her FPI 6.1. She said that the rates for application site skin reactions are about what she would expect from a transdermal product. She asked what the half-life was & I showed FPI 12.3. I asked her if she would be more likely to prescribe Butrans for an opioid-naïve or an opioid-experienced pt & she said due to the long half-life, she would probably write it for opioid-experienced pts. Presented initiation guide. She asked if Butrans could be cut & I told her that it could not- Also discussed maximum dose of 20mcg/hr system & let her know that only one Butrans could be used at a time. Went over application & disposal as well as managed care & savings. Debbie & Dr Trickett said they had just seen a patient this morning who "would be perfect" for Butrans- he is currently taking 2 Vicoden/day & both said they would like to have fewer pts on Vicoden ATC
PPLPMDL0020000001	Berea Cleveland	OH	44017	1/24/2011	Spoke with Dawn MA, I reviewed Butrans medication guide, she said the Dr's will need to look over the info and will call to make an appointment if they would like further information. I left info for both Dr's.
PPLPMDL0020000001		OH	44120	1/24/2011	I talked to Stewart,Narcotics Buyer,about Butrans FPI,he hadnt heard anything about Butrans and they didnt have any in stock.We talked about black box warning,dosage strengths available,medication guide,instructions for use,formulary coverage,Butrans savings cards.I asked who was the patient Stewart thought could benefit from Butrans and he said the low dose,Vicodin or Percocet,moderate pain patients,so I told him that was exactly who i was talking to doctors about for Butrans.Stewart said they see a lot of Dr.Hall,Dr.Rosenfield and Dr.Pandit's patients so he wanted to be sure i talk to them about Butrans.I asked if they participated in Relay Health,electronic vouchers and he thought they did but neither him or Shay,Pharmacy tech,could figure out how to pull up voucher so he asked for Butrans Savings cards.I left 2 packs of Butrans Savings cards-#863902,#865594 and told Stewart i would follow-up in a few weeks to see if anyone has prescribed Butrans yet.left initiation/titration guide
PPLPMDL0020000001	Cleveland	OH	44102	1/24/2011	i talked to Vicki,Pharmacist,about Butrans fpi,initiation/titration guide,patient information booklet,formulary coverage and Butrans savings cards.Vicki said Rite aid sent 1 box of Butrans 5mcg/hour and 10mcg/hour to their store,she thinks there is a place for Butrans for these patients in pain that doctors wont treat with hydrocodone combo's.Vicki said some of the Metro physical medicine&rehab doctors send patients to their store,dr talbot,celeste and dr carson also send patients to them too.Vicki said they have Relay health,so the electronic voucher is in system for Butrans and will take co-pay savings off automatically
PPLPMDL0020000001	Cleveland	OH	44106	1/24/2011	i talked to Emily,Pharmacist,about Butrans FPI,black box warning,dosage strengths available,medication guide,instructions for use,formulary coverage for commercial plan patients and the use of the Butrans savings cards.Emily said she did have the Butrans 5 and 10mcg/hour transdermal systems,but she was glad i explained the 7day dosing schedule as she thought it was a once daily dosing transdermal system.Emily said this is a great option for patients on low doses of Vicodin or Percocet or patients that have difficulty swallowing.We talked about Medicaid patients having a Prior Authorization for Butrans,Emily said she see's patients from Cleveland Clinic,University hospitals,Metro hospital and some of the surrounding doctors offices so she asked me to follow-up in a few weeks to see if any scripts have come through for Butrans.I gave Emily the patient information booklet and initiation/titration guide as she wanted one for her reference.discussed Butrans REMS and recommended Senokot-5
PPLPMDL0020000001	Parma	OH	44129	1/24/2011	Introduced Dr Roheny to Butrans & reviewed 5 core messages & box warning. Asked him his initial thoughts & he said that he thought that having a "once a week" option was "interesting". I asked if he would be more likely to prescribe Butrans for an opioid-naïve or an opioid-experienced pt & he said opioid-experienced. Presented initiation guide & reviewed dosing/titration. He asked what side effects are & I reviewed FPI 6.1 with him- he said he felt that the rates were "low". I asked him if he could think of one or two patients for whom he would consider Butrans & he said "maybe". Reviewed managed care coverage & savings cards & asked him to think of commercial pts who would be appropriate for Butrans & let him know I would be back to follow up for further discussion which he said he appreciated. Also asked him about the Vicoden pt he had told me he was going to convert to OxyContin. He told me he hasn't forgotten but he has not seen that particular pt yet but will still do so.
PPLPMDL0020000001	Cleveland Independence	OH	44111	1/24/2011	Spoke with his nurse Margaret, we reviewed the Butrans initiation and titration guide. We will pass the info along to the Dr and they will call if they would like further information. At this point Dr is not doing any
PPLPMDL0020000001		OH	44131	1/24/2011	Introduced Butrans to Dr Trickett, delivering 5 core messages & reviewing boxed warning. Asked if he saw a place for Butrans in her practice & she said she does. I asked her if she was thinking of an opioid-naïve or an opioid-experienced patient & she said she would be more likely to prescribe Butrans for an opioid-experienced pt. Discussed coverage & savings cards & she said she was surprised to hear that pts with commercial coverage could obtain a newer product for such a low co-pay when using the savings cards. Discussed application, initiation of treatment, titration, and adverse events. I asked her if she has one or two pts in mind and she said that she saw one this morning who is a male pt taking 2 Vicoden per day- he has BWC coverage, so she said she would be able to let me know if the Rx goes through. She said she would love to get fewer pts on Vicoden by switching them to Butrans. Let her & Steve know that I would be back within a week to follow-up & get feedback.
PPLPMDL0020000001	Cleveland	OH	44104	1/24/2011	I asked dr if i could discuss a product with him for pain management,as we hadnt talked about this before,and dr said he didnt have sufficient amount of time to talk with me about Butrans and that i would have to wait until my lunch feb 7th,to talk about Butrans.So i asked dr to think about his percocet patients that dr was ready to convert to a long-acting opioid and consider OxyContin 10mg or 15mg q12h,gave OxyContin conversion guide and q12h convenience flashcard dr said he'll remember that option as he does prescribe a lot of OxyContin. recommended Senokot-5
PPLPMDL0020000001	Berea	OH	44017	1/24/2011	Spoke with Adam, we reviewed Butrans FPI, dosing, medication guide. He agreed to order since Dr Kavlich said he would try it. Reminder about OxyContin for patients already taking more than 80mg of oral morphine.
PPLPMDL0020000001	Berea	OH	44017	1/24/2011	We reviewed the FPI for Butrans. He said he is more likely to start an opioid experienced patient and we reviewed how to initiate with 10mcg dose. Dr said that he feels that transdermal systems are less abused than tablets. I discussed that Butrans is a schedule III opioid with the same abuse potential and warnings as other opioids. Dr said that he will give Butrans a try but did not know if he had someone coming in in the next couple of days.
PPLPMDL0020000001					Reminder about OxyContin and Ryzolt as options. I told him I would follow up at the end of the week. I spoke with Diane and reviewed the patient information and savings program. She will also share the info with Shirley who instructs the patients on how to apply. Diane said that most patients go to CVS and Giant Eagle in Berea and we discussed stocking.



PPLPMDL0020000001	Parma	OH	44129	1/24/2011	Dr Ortega said that he had a male pt doing well on OxyContin who just complained to him the "new OxyContin" was making him "sick". Dr Ortega said the pt said he was nauseated & vomiting from it. Presented Dr Ortega with field card & read bullet points. He said no other pts had complained so far. Asked if he wanted additional information but he said no. Introduced Butrans to Dr Ortega & delivered 5 core messages. He said that he is not entirely comfortable with prescribing opioids but does if he feels it is warranted. Went over box warning with him & stressed importance of appropriate pt selection. He said he doesn't have a lot of experience writing "patches" but only has one pt on transdermal fentanyl. Showed dosing & initiation guide & asked Dr Ortega to think more of the "moderate" chronic pain pt considering the strengths avail. Discussed mgd care/savings. He said he appreciated the info but does not think he will use it yet & that he would like to read the FPI-TOC with Cindy.
PPLPMDL0020000001	Parma	OH	44134	1/24/2011	Introduced Dr. George to Butrans & delivered 5 core messages. Also reviewed black box warning & importance of choosing appropriate pts. Asked his thoughts & if he could see himself writing it for opioid-naive or opioid-experienced patients & he said either. Reviewed initiation guide & asked if he had any patients in mind for Butrans & he said he had "a couple". Discussed managed care coverage & savings cards for commercially insured pts. Asked him if he would prescribe it for those appropriate pts and he said he wanted to review the initiation guide. Let him know I would be back to follow up to answer any further questions & to get feedback.
PPLPMDL0020000001	Parma	OH	44134	1/24/2011	Introduced Butrans to Dr. Scanlon & delivered 5 core messages. Also covered black box warning & contraindications. Asked him his initial thoughts & he said it sounded good so far. I asked him if he would be more likely to prescribe Butrans for opioid-naive or opioid-experienced pts & he said opioid-experienced. Presented initiation guide & he asked if pts can continue taking short-acting medications when on Butrans & I reviewed FPI 2.4. Discussed managed care & he said he did not care about coverage at all. He said if his pts want something, they will get it. Delivered brief overview of savings cards & asked if I could follow-up with him in a week to obtain his feedback & answer any questions he may have since it is something he has not written before & he said "absolutely- I really think I can use this." I reminded him of Butrans for appropriate pts & that I would be back in a week to follow up & he agreed again.
PPLPMDL0020000001	Cleveland	OH	44130	1/25/2011	Introduced Dr Fedorko to Butrans & reviewed indication, dosing, & seven days of buprenorphine delivery. He asked about insurance coverage, so I reviewed with him commercial coverage and savings cards. He said he wanted to have more time to talk about a new product & asked me to schedule a lunch (I have one scheduled for March 8). Ryzolt savings card reminder as well. TOC with Mindy.
PPLPMDL0020000001	Lyndhurst	OH	44124	1/25/2011	Introduced Butrans to Sarah. Discussed the indication, dosing, and appropriate patient type. She wanted confirmation on the frequency of the dosing. I confirmed that it is once weekly. Her eyes widened. She asked me to leave more info as she was rushing into a patient room.
PPLPMDL0020000001	Cleveland	OH	44124	1/25/2011	Doc needed oxycontin savings cards. Reminded him that the cards are good until 03/31/11. Asked if he had time to hear about a different treatment option for chronic pain patients. He said not right now. Gave him an butrans FPI.
PPLPMDL0020000001	Westlake	OH	44145	1/25/2011	We reviewed Butrans FPI, dosing, warnings, and medication guide. He thinks it is a great idea and said he would prescribe it for his BWC patients. He said that he would probably start a patient who is opioid experience since it is rare to see a chronic pain patient who is not already on some type of opioid. We reviewed the managed care and savings cards. We discussed OxyContin for patients who are already taking more than 40mg of oral morphine equivalent per day. I reviewed the patient information and managed care with Danielle, MA.
PPLPMDL0020000001	Cleveland	OH	44130	1/25/2011	Introduced Dr Diab to Butrans, reviewing 5 core messages & boxed warning. Asked his initial thoughts & he said he thought it sounded exciting. I asked if he would be more likely to prescribe Butrans for an opioid-naive or opioid-experienced pt & he said opioid-experienced. Presented initiation guide & told him how to initiate treatment depending on oral morphine equivalent the pt is currently on & reviewed appropriate pt types. Let him know that commercial pts can obtain Butrans at \$15-20 co-pay with use of savings card. He said to give cards to Barb & Karen. (TOC with Barb & Karen- Karen said she thinks that Dr Diab has a lot of pts who could use something like Butrans). Asked Dr Diab if he could think of one or two pts who he would prescribe Butrans for & he said yes. Let him know I would be following up to get feedback. OxyContin indication reminder as well.
PPLPMDL0020000001	Westlake	OH	44145	1/25/2011	We reviewed the main points in the Butrans FPI. He asked that I leave him the FPI to read on his own and he will let me know what he thinks.
PPLPMDL0020000001	Lakewood	OH	44107	1/25/2011	Spoke with Jamie MA, we reviewed the Butrans medication guide. Dr. was behind and did not have time to discuss Butrans today.
PPLPMDL0020000001	Lakewood	OH	44107	1/25/2011	Spoke with Sam MA, Dr is not in this week. We discussed the Butrans patient guide.
PPLPMDL0020000001	Richmond Heights	OH	44143	1/25/2011	Quick call.....Introduced Butrans, the indication, patient type, and the once weekly application. He asked what was the medication in it. I told him buprenorphine. He said he was leaving for the day and asked me to come back from Friday morning as he did not want to rush through the info. Told him I would return on Friday.
PPLPMDL0020000001	Lakewood	OH	44107	1/25/2011	Spoke with nurse Jennifer, we reviewed the medication guide for Butrans. She said to stop by Monday morning for best chance of gaining time with Dr.
PPLPMDL0020000001	Lakewood	OH	44107	1/25/2011	I reviewed the 5 key messages for Butrans and she said she would like to look over the information. She did not have the time today to go over the details but asked that I leave the information and we can discuss further at our next appointment.
PPLPMDL0020000001	Lakewood	OH	44107	1/25/2011	Spoke with Dr and Pat, we reviewed the Butrans FPI and titration guide. Dr asked if Butrans can be used for pain associated with fibromyalgia. I reviewed the indication and that Butrans is not indicated for any certain type of pain. He said he has a patient who he just started on three 5mg perccet per day who might be a good candidate for Butrans. I asked if he will prescribe for her and he will think about if she would be a good patient for Butrans. He said he has commercial insurance and we reviewed the insurance coverage and managed care for Butrans. Reminder about OxyContin as an option instead of perccet around the clock.
PPLPMDL0020000001	Cleveland	OH	44106	1/25/2011	I talked to Steve Meeks, Pharmacy Manager, Nate, Pharmacist and Amy, Pharmacist about Butrans FPI, black box warning, dosage strengths available, medication guide, instructions for use, gave initiation/titration guide and patient information booklet, rebate information as Amerisource Bergen is their wholesaler and Steve said he'll order all 3 dosage strengths of Butrans and told me I should work with Pain Management and Chronic pain doctors, especially Dr. Covington as he sees a lot of their scripts. We talked about Butrans formulary coverage and commercial plan patients using Butrans patient savings cards and Steve said they do have electronic vouchers and I should call Sabrina Spikes, Euclid Ave pharmacy, as she is the coordinator and get Butrans entered in the Clinic's system for the electronic voucher access to make it easier for pharmacists. We also discussed Butrans REMS (Puckett) and Dr. Mazanec (secretary-Debbie Limmer) and Anesthesia/Pain management-left card for Dr. Vrooman, Katyal, Shin, Mekhal and Dr. Stanton-Hicks to call me so we can set-up appointment and also spoke with each medical secretary to try and set-up appointments with attendings in APM
PPLPMDL0020000001	Cleveland	OH	44195	1/25/2011	I talked to Dave, Pharmacy Manager, about Butrans FPI, black box warning, dosage strengths available, medication guide, instructions for use, formulary coverage and Butrans savings cards. Dave said he heard about Butrans but didn't read anything about it, so he was happy to hear that this is another option for patients as he has too many patients taking Vicodin and Percocet and asked about Medicaid coverage for Butrans so I explained Prior Authorization process for Medicaid patients in order to get Butrans. We discussed Butrans REM, gave initiation/titration guide and Patient information booklet and Dave said he'll order one box of each strength and said I can follow-up in a few weeks.
PPLPMDL0020000001	Cleveland	OH	44195	1/25/2011	I talked to Joan about Butrans fpi, black box warning, dosage strengths available, medication guide, instructions for use, formulary coverage and Patient Savings cards for commercial plan patients. Joan said she saw a place for Butrans for those low dose opioid patients and more moderate pain patients, as she wasn't thinking the severe pain, high doses of opioid patients would benefit from Butrans 20mcg/hour, so we talked about opioid-naive (they don't have those patients here in chronic pain and rehabilitation) and opioid experienced patients (majority are all opioid experienced) I gave an initiation/titration guide and patient information booklet and Joan said she'll start a few patients on Butrans to get some clinical experience and I can follow-up with her in a week or 2 to see what feedback she gets from patients
PPLPMDL0020000001	Mayfield Hts	OH	44124	1/25/2011	Introduced doc to a different treatment option for chronic pain.....Discussed the Butrans indication, dosing and application, and the savings cards program. I explained the one Butrans, once weekly. Also explained the broad commercial coverage. He did not have more time. Gave FPI and titration guide.
PPLPMDL0020000001	Cleveland	OH	44195	1/25/2011	I talked to dr about Butrans fpi, initiation/titration guide, dosage strengths available, medication guide and instructions for use, also discussed Butrans REMS and Butrans patient savings cards. I asked dr who was the patient he had in mind to initiate Butrans therapy? dr said patients taking a couple tabs of Vicodin or Percocet or maybe low dose OxyContin, 10mg q12h or 15mg q12h, that's where he'll consider Butrans. dr said a once weekly dosing regimen was much easier for some patients than dosing around the clock Vicodin or Percocet or for his patients who have a hard time swallowing pills, he'll try Butrans in them too. I gave dr Butrans Savings cards, patient instructions for use booklet and asked if I could follow-up in next week or so to see if he started any patients and dr agreed.
PPLPMDL0020000001	Cleveland	OH	44195	1/25/2011	I talked to dr about Butrans fpi, black box warning, dosage strengths available, medication guide, instructions for use, formulary coverage, discussed Commercial plan patients using Butrans savings cards. I asked dr who was the patient who could benefit from Butrans in his mind? dr said patients with moderate pain and taking a couple of Vicodin or Percocet daily, that's who he's thinking to start on Butrans. I asked if dr has a few patients in mind to start on Butrans today or tomorrow and he said yes he will and said he likes transdermal systems better than pills so he was happy with Butrans and I could leave Butrans Patient savings cards and patient information booklets with Benita Lee, his medical secretary. All three of his Nurse practitioners were in this meeting, Joan Jersan, NP, Mary, NP and JoAnne Schneider, NP, and excited about Butrans and the fact that they could prescribe as its a CIII. dr said I can follow-up through Benita Lee, or he'll contact me with questions.
PPLPMDL0020000001	Parma	OH	44134	1/25/2011	Introduced Butrans to Dr Hernandez & delivered 5 core messages. Also advised him of standard risks of opioids & being careful in appropriate pt selection. Asked his thoughts & he said he thought it was a great idea. He asked about cost/coverage, so we reviewed commercial coverage & savings cards. He said that sometimes his pts like the taking pills because they feel they have better "control" over managing their pain. Let him know that pts can take short-acting opioid & non-opioid medications. Asked if he was thinking more of his opioid-naive or opioid-experienced pts & he said opioid-experienced but then also said he can see prescribing it for someone who has never had an opioid before. Presented initiation guide. Also recommended OxyContin for appropriate pts who are beyond the dosing of 20mcg/hr Butrans. Dr Hernandez said he will definitely be trying Butrans out. Let him know I would be back to follow up & he asked that I come back in 2 wks to give him a chance to Rx it.
PPLPMDL0020000001	Cleveland	OH	44195	1/25/2011	I talked to JoAnne Schneider, NP, works with Dr. Covington and Dr. Mathews about Butrans fpi, black box warning, dosage strengths available, medication guide, instructions for use, Butrans REMS, Butrans patient savings cards for commercial plan patients and JoAnne said she will start a few patients on Butrans and see what happens, as she likes that it's a once weekly dosing of buprenorphine and likes the molecule buprenorphine so she wants to see how patients do on this medication. I asked JoAnne who was the patient in her mind that could benefit from Butrans? JoAnne said more moderate pain patients, but majority of their patients are all opioid experienced so they would be starting on the 10mcg/hour Butrans transdermal system. I asked if I could follow-up in next week or so to be sure patients are getting started easily and answer any questions she may have and she said that would be interesting. Asked if he would be more likely to prescribe Butrans in an opioid-naive or an opioid-experienced pt & she said opioid-experienced, but then also said she would try it in opioid-naive pts because it seemed "easier" because she would not have to taper the Pt's current opioid. Discussed appropriate pt types further & showed initiation guide. I reviewed managed care coverage & savings cards with Laura & staff. Laura said she is thinking of her Worker's Comp. pts who are opioid-naive when coming to her. Asked if she would Rx Butrans instead of going immediately to Vicoden & she said she would do this. Let her know I would be following up & conducted TOC with Dawn. Also Ryzolt value
PPLPMDL0020000001	Mayfield Heights	OH	44124	1/26/2011	Spoke to Christy to confirm order/auto shipment of Butrans. She had not received it. Provided the NDC is again. Discussed the indication and patient type. Explained the savings cards. She thought of a patient on fentanyl. I discussed the difference between Butans and Butrans. She suggested I call on Hillcrest pain mgmt and Dr. Chaitoff who refers most of his patients to this store.
PPLPMDL0020000001	Solon	OH	44139	1/26/2011	Quick call with Dr Zaid but was able to introduce Butrans & deliver 5 core messages. He asked what receptors buprenorphine effects & I showed FPI 12.1. He said he would be more likely to use in opioid-experienced pts since he usually doesn't get very many who are opioid-naive. Presented initiation guide & went over how to start opioid-experienced pts including taper. He said some pts may not like the tapering. I told him that was our recommendation due to possibility of buprenorphine to precipitate withdrawal in opioid-experienced pts & reviewed appropriate pt types. He said he would look at the initiation guide but wanted more time to discuss it but was too busy with patients. Also expressed interest in attending a speaker program or webinar. Scheduled breakfast for next week to follow up and have further discussion. Also reminder for OxyContin for pts who are beyond the dosing strengths of Butrans.

PPLPMDL0020000001	Woodmere	OH	44122	1/26/2011	Spoke with Angie & introduced Butrans. Reviewed indication, dosing, initiation/titration, application, appropriate patients, and box warning. She said this is a very busy CVS location & she feels that Butrans will have a place, especially with Darvocet being unavailable & more physicians exercising caution in using combination opioids. I let her know that I would be targeting various physicians in the area in multiple specialties & asked if she would proactively place an order now, before a prescription comes in, so that I can add them to the list of pharmacies that have Butrans stocked & ready to go. She agreed to do this today. Let her know I would be back to follow up & for feedback.<font color=blue><b>CHUDAKOB added notes on 02/05/2011</b></font>Very nice job!!!
PPLPMDL0020000001	Cleveland	OH	44125	1/26/2011	Introduced myself & Butrans to Stacy Preston, Clinical Coordinator at the in-patient pharmacy. Reviewed indication, dosing, initiation, appropriate patient types. She said that Dr. Samuel & the other pain management physicians in the hospital would be good physicians to target for Butrans & she said they would be interested. Also reviewed initiation/titration guide & managed care coverage as well as savings cards.
PPLPMDL0020000001	Cleveland	OH	44106	1/26/2011	I talked to dr about Butrans fpi,black box warning,dosage strengths,medication guide,patient information booklet,Butrans REMS,formulary coverage and commercial plan patients using Butrans Savings cards.Dr said he thought this would be a great option for those patients taking a couple tabs of Vicodin or Percocet daily as he liked the once weekly dosing option better and liked that Butrans was a transdermal option.dr said he will try Butrans in a few patients and let me know what happens.told dr i will follow-up next week to see if he started anyone on Butrans.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44106	1/26/2011	I talked to dr about Butrans fpi,black box warning,dosage strengths,medication guide,Butrans REMS,patient information booklet,Butrans savings cards and asked dr what patients could benefit from Butrans? dr said patients that have moderate pain he would consider for this medication and he liked the once weekly dosing of Butrans and that it is a transdermal application.dr said this would be a great option for those patients taking a couple vicodin or percocet or tramadol as they start a lot of patients on tramadol in the out-patient clinic,so i asked dr to focus on the tramadol patient,who has commercial insurance that can try Butrans and i would follow-up next week,dr agreed to this.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44106	1/26/2011	dr treats adults in the internal med dept and pediatrics so he was interested in hearing about Butrans for his adult patients,so we talked about Butrans fpi,black box warning,dosage strengths available,medication guide,Butrans REMS,patient instruction booklet,formulary coverage and Butrans patient savings cards.dr said the once weekly dosing of Butrans was a benefit for those patients taking short-acting opioids around the clock and he liked that it was a transdermal system and not a pill,so i asked if dr could think of a few patients to try Butrans in and i would follow-up in a week and dr agreed.recommended Senokot-S
PPLPMDL0020000001	Garfield Hts	OH	44125	1/26/2011	Introduced myself & Butrans to Stacy Preston, Clinical Coordinator at the in-patient pharmacy. Reviewed 5 core messages. Stacy asked if there were any special considerations for patients with renal impairment & I showed her FPI 8.7. Also reviewed 12.2, discussing QTc interval prolongation of 9.2 msec in studies of Butrans 20mcg/hr x 2. Also presented initiation guide and patient information booklet as well as savings cards. She recommended that we get the savings cards put on the Cleveland Clinic's computer voucher system. Let her know that Amy is working on that. Also asked who else I should give the information about Butrans to & she said no one & that she is my contact there. Also asked her thoughts on getting the information to South Pointe Hospital, but she said that Jason, the new director at Marymount & South Pointe typically does not meet with or take any information
PPLPMDL0020000001	Mayfield Heights	OH	44124	1/26/2011	Spoke to Warren about the stocking of Butrans. He thought he had stocked it but it was not in. I advised him that Dr. Reed said that she sends some of her patients to his pharmacy. He ordered the 5mcg and 10mcg. He liked that the savings card is in the relay health program.
PPLPMDL0020000001	Cleveland	OH	44195	1/26/2011	I talked to Kathy,PA,about Butrans fpi,black box warning,dosage strengths available,medication guide,instructions for use,formulary coverage,Butrans savings cards for commercial plan patients and Prior Authorization for Medicaid patients.Kathy is the PA for Dr.Mekhal's patients who are 80%Geriatric,with Medicare and Dr.Mintzer's patients who are more commercial and workers comp.Kathy said the once weekly dosing schedule of Butrans and the fact that its a CII and she can easily prescribe Butrans are both benefits.Kathy said majority of their patients are all "opioid experienced" so they would be looking at the Butrans 10mcg/hour and then go to the 20mcg/hour if needed.Kathy loved the Savings card program for commercial plan patients,liked the disposal units that patients got when getting prescriptions filled for Butrans and said that she would also give this information to Gail Smith and Mai,2 of the Nurse Practitioners in department
PPLPMDL0020000001	Cleveland	OH	44106	1/26/2011	worked internal med dept-met with dr armitage,vice chairman of Internal Medicine dept,had lunch and learn with Internal Medicine residents,worked Bolwell pharmacy and saw Margie Baron,Pharmacy Supervisor,dropped information off for Darrell,Pharm D in Family Medicine,about Butrans discussion and also Dr.Marsh,Family Medicine doctor.
PPLPMDL0020000001	Cleveland	OH	44106	1/26/2011	I talked to dr about Butrans fpi,black box warning,dosage strengths available,medication guide,instructions for use,formulary coverage and Butrans patient savings cards for commercial plan patients.dr said he liked the once weekly dosing of Butrans and that its a transdermal system and not a pill,as he would like to get some patients off Vicodin and put on Butrans.So i showed dr the opioid experienced chart in the initiation/titration guide and asked him to consider patients taking 15-40mg hydrocodone, to convert to 10mcg/hour Butrans,dr said he would consider and will start a few patients on Butrans.we talked about commercial plan patients using Butrans savings cards and Medicaid patients having to get a Prior Authorization filled out first before approval.
PPLPMDL0020000001	Stow	OH	44224	1/26/2011	Introduced Butrans, reviewed FPI, indication, boxed warning, dosing and titration.HE said he thought he could find a spot in his practice, a may be minimal but he thought it would be a good option for low dose chronic Vicodin. Reviewed managed care coverage and savigns card program
PPLPMDL0020000001	Stow	OH	44224	1/26/2011	Introduced Butrans, reviewed indication, boxed warning, dosing and titration. She said it is a nice option for low dose chronic Vicodin, she didnt know if she would have a big place for it. Reviewed managed care and savings
PPLPMDL0020000001	Cleveland	OH	44106	1/26/2011	I talked to Margie,Pharmacy Supervisor,about Butrans stocking and she did get all 3 dosage strengths in and has it stocked,I gave Margie Butrans initiation/titration guide and patient information booklet and she wanted 1 pack of the Butrans savings cards(#863568),as she doesnt have any electronic vouchers in her system.I told Margie that I had lunch with the Internal medicine residents adn met with Dr.Armitage and everyone was interested in Butrans and felt there was a place for it in their patient population thats more moderate pain patients and low doses of Vicodin,Percocet or tramadol which they write a lot of,so i told Margie I would follow-up early next week to provide more feedback from Pain Management and Oncology department physicians on Butrans and asked if there was anyone else i should talk to? Margie said Family Medicine,so i left my business card and Butrans fpi for Darrell,Pharm D for Family Medicine
PPLPMDL0020000001	Cleveland	OH	44195	1/26/2011	worked anesth/pain management dept-saw Kathy Kraus,PA,Anne Crawford,NP and Renattie Martin,NP,to discuss Butrans fpi,initiation/titration guide and patient information booklet and Butrans patient savings cards.see call note on Anne and i set-up meeting today at 3pm with Kathy and Renattie,to discuss Butrans in more depth.worked Physical Medicine and Rehabilitation dept-had to leave my card,Butrans FPI and initiation/titration guide for Dr.Frost,Dr.Schaefer,Dr.Hou,Dr.Jedlicka and Dr.Reddy-per medical secretaries that said doctors will review the information and let secretary know if they want to meet me and get savings cards.
PPLPMDL0020000001	Cleveland	OH	44195	1/26/2011	I talked to Anne,NP,about Butrans fpi,black box warning,dosage strengths available,medication guide,instructions for use,initiation/titration guide,formulary coverage and Butrans savings cards.I asked Anne who was a patient in her mind that could benefit from trying Butrans? Anne said patients who are taking low doses of Vicodin or Percocet and more moderate pain patients,sh'e'll try Butrans in them and see what clinical results she gets.Anne said the once weekly dosing is much easier for a lot of her patients and she see's Dr.Stanton-Hicks patients too so feels like there are a lot of them that could benefit from Butrans.I asked if i could follow-up in 1 week and she said that was fair.recommended Senokot-S
PPLPMDL0020000001	Bedford	OH	44146	1/26/2011	Introduced myself & Butrans to Oleg, pharmacy manager. Reviewed indication, dosing, appropriate pts, initiation, titration, application, QTc interval info, drug interactions, application, managed care. Oleg said he thinks that potentially Dr Moufawad will really take to this product. He said that Dr Moufawad typically likes new products and that Butrans seems like something he will prescribe a lot of. He told me to let him know what Dr Moufawad says about Butrans once I talk to him. Discussed savings/e-voucher & asked Oleg to place an order. He said that he has an inventory audit coming up very soon and therefore isn't ordering anything new right now, but after that is done, he will stock Butrans. He also recommended that I talk to J. Dehlman & Dr Shin as well as Dr Zaidi.
PPLPMDL0020000001	Stow	OH	44224	1/26/2011	Introduced Butrans, reviewed FPI, indication, boxed warning, appropriate patients. I asked if she would use it in opioid naive or opioid experienced patients and she said she would use it in either. Discussed dosing and titration. Reviewed savings cards and managed care coverage. She said she would try it. WE discussed where she uses Oxycontin and she said she has been using Oxycontin for years and likes it in all strneghts. She is aware that it is reformulated. Discussed flexibility and managed care coverage
PPLPMDL0020000001	Beachwood	OH	44122	1/26/2011	Introduced myself & Butrans to Dr Mackel, delivering 5 core messages & reviewing box warning. I asked him, as an orthopedic surgeon, where he saw a place for Butrans in his practice & asked if he manages any chronic pain. He said he does manage some pts with chronic conditions, but as a general rule, prefers not to & also typically avoids using opioids, especially long-acting, when at all possible. But he said he does prescribe them occasionally in pts who he finds to be appropriate. I told him that being cautious was exactly what he should be doing & asked that he be just as cautious with Butrans as he would any other opioid. He asked if they could take other pain meds while on Butrans & I showed him FPI 2.4. Also reviewed application, initiation, titration, & dosing as well appropriate pts/types to consider. Also discussed OxyContin 7 tablet strengths & reminded him of 15, 30, & 60mg availability which he said he was not aware of but agreed that it may be useful in titration.
PPLPMDL0020000001	Cleveland	OH	44127	1/26/2011	I asked if dr had some time to discuss a product for pain management that could be an option for his patients and dr said if it was "new",i had to wait until my lunch fe.2nd,then we could discuss Butrans in more depth.I asked dr to consider his patients taking Vicodin or Percocet,around the clock,that are still in pain and he's considering a long-acting opioid,to think of OxyContin as there are 7 tablet strengths available to allow for flexibility in titration.gave OxyContin conversion guide and formulary coverage updates-Medicaid preferred status for OxyContin and what that means to his patients and him. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44106	1/26/2011	I talked to dr about Butrans fpi,black box warning,dosage strengths,medication guide,Butrans REMS,patient information booklet,Butrans savings cards and asked dr what patients could benefit from Butrans? dr said she has patients that have moderate pain and are dosing around the clock and she doesnt like this and prefers a long-acting opioid,especially one like Butrans where dosing is every 7 days. I asked dr to think of opioid naive or low dose Vicodin,Percocet or tramadol as dr said she starts a lot of patients on short-acting tramadol dosing q4-6h so Butrans is much easier for her patients. we discussed commercial plan insurance coverage and using Butrans savings cards for them and Prior Authorization for Medicaid patients.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44106	1/26/2011	I talked to dr about Butrans fpi,black box warning,dosage strengths,medication guide,Butrans REMS,patient information booklet,Butrans savings cards and asked dr what patients could benefit from Butrans? dr said he has patients that have moderate pain and are dosing around the clock an he would prefer a long-acting opioid,especially one like Butrans where dosing is every 7 days. I asked dr to think of opioid naive or low dose Vicodin,Percocet or tramadol as dr said he starts a lot of patients on short-acting tramadol dosing q4-6h so Butrans is much easier for his patients. we discussed commercial plan insurance coverage and using Butrans savings cards for them and Prior Authorization for Medicaid patients. told dr i would follow-up in next week.recommended Senokot-S
PPLPMDL0020000001	Highland Heights	OH	44143	1/26/2011	Spoke to Kristen about the launch of Butrans - indication, dosing, application and disposal, patient type and savings card. She had the boxes of 5 and 10mcg sitting on counter. She asked about the AE(constipation). Discussed AE's,the use of supplemental agents for breakthrough, steady state.
PPLPMDL0020000001	Cleveland	OH	44106	1/26/2011	I talked to dr about Butrans fpi,black box warning,dosage strengths,medication guide,Butrans REMS,patient information booklet,Butrans savings cards and asked dr what patients could benefit from Butrans? dr said he has patients that have moderate pain and are dosing around the clock an he would prefer a long-acting opioid,especially one like Butrans where dosing is every 7 days. I asked dr to think of opioid naive or low dose Vicodin,Percocet or tramadol as dr said she starts a lot of patients on short-acting tramadol dosing q4-6h so Butrans is much easier for his patients. we discussed commercial plan insurance coverage and using Butrans savings cards for them and Prior Authorization for Medicaid patients. told dr i would follow-up in next week.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44106	1/26/2011	I talked to dr about Butrans fpi,black box warning,dosage strengths,medication guide,Butrans REMS,patient information booklet,Butrans savings cards and asked dr what patients could benefit from Butrans? dr said he has patients that have moderate pain and are dosing around the clock an he would prefer a long-acting opioid,especially one like Butrans where dosing is every 7 days. I asked dr to think of opioid naive or low dose Vicodin,Percocet or tramadol as dr said he starts a lot of patients on short-acting tramadol dosing q4-6h so Butrans is much easier for his patients. we discussed commercial plan insurance coverage and using Butrans savings cards for them and Prior Authorization for Medicaid patients. told dr i would follow-up in next week.recommended Senokot-S
PPLPMDL0020000001	Mayfield Heights	OH	44124	1/26/2011	Discussed the Butrans indication, dosing, application and disposal. Discussed the stuides in opioid naive and opioid experienced patients. He said he would likely use in opioid naive patients. Asked him what questions he had but he said he could not think at the moment because he was busy. I scheduled a breakfast for f/u and further discussion.

PPLPMDL0020000001	Stow	OH	44224	1/26/2011	Introduced Butrans and reviewed FPI, indication, boxed warning, dosing and administration. HE was very confused on the initiation of 10mcg on opioid experienced patients. He said he did not feel comfortable tapering patient down from 40mg of Vicodin and patient being in pain nad he did not understand why you have to taper down the patient but then can use an opioid for breakthrough, why wouldnt it kick that opioid off. HE said he feels that it is an agonist antagonist and I told him it is a partial agonist. HE said he would definitely start an opioid naive patient. I gave him the number to medical seives because he wanted to speak to a clinical pharmacist before he started someone on 10mcg. Reviewed managed care and savings cards. RMEinded of managed care coverage with Oxycontin and flexibility of 7 strengths
PPLPMDL0020000001	Cleveland	OH	44106	1/26/2011	I talked to dr about Butrans fpi,black box warning,dosage strengths,medication guide,Butrans REMS,patient information booklet,Butrans savings cards and asked dr what patients could benefit from Butrans? dr said he has patients that have moderate pain and are dosing around the clock an he would prefer a long-acting opioid,especially one like Butrans where dosing is every 7 days. I asked dr to think of opioid naive or low dose Vicodin,Percoct of tramadol as dr said he starts a lot of patients on short-acting tramadol dosing q4-6h so Butrans is much easier for his patients. we discussed commercial plan insurance coverage and using Butrans savings cards for them and Prior Authorization for Medicaid patients. told dr i would follow-up in next week.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44106	1/26/2011	I talked to dr about Butrans fpi,black box warning,dosage strengths,medication guide,Butrans REMS,patient information booklet,Butrans savings cards and asked dr what patients could benefit from Butrans? dr said he has patients that have moderate pain and are dosing around the clock an he would prefer a long-acting opioid,especially one like Butrans where dosing is every 7 days. I asked dr to think of opioid naive or low dose Vicodin,Percoct of tramadol as dr said he starts a lot of patients on short-acting tramadol dosing q4-6h so Butrans is much easier for his patients. we discussed commercial plan insurance coverage and using Butrans savings cards for them and Prior Authorization for Medicaid patients. told dr i would follow-up in next week.recommended Senokot-5
PPLPMDL0020000001	Lyndhurst	OH	44124	1/26/2011	Spoke to doc and nurse, Nancy, about the launch of Butrans. Discussed indication, dosing, application/disposal, savings cards, coverage. Doc said she would more likely prescribe for opioid experienced patients and she has a patient in mind. Discussed the conversion and initiation dosing. Nancy was concerned about the "Patch" adhering and the coverage. Reviewed the 3 tier status and the savings cards program with Diana as well. They wanted me to come back on Friday to talk to Karen and Patricia.
PPLPMDL0020000001	Cleveland	OH	44106	1/26/2011	I talked to dr about Butrans fpi,black box warning,dosage strengths,medication guide,Butrans REMS,patient information booklet,Butrans savings cards and asked dr what patients could benefit from Butrans? dr said he has patients that have moderate pain and are dosing around the clock an he would prefer a long-acting opioid,especially one like Butrans where dosing is every 7 days. I asked dr to think of opioid naive or low dose Vicodin,Percoct of tramadol as dr said he starts a lot of patients on short-acting tramadol dosing q4-6h so Butrans is much easier for his patients. we discussed commercial plan insurance coverage and using Butrans savings cards for them and Prior Authorization for Medicaid patients. told dr i would follow-up in next week.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44106	1/26/2011	I talked to dr about Butrans fpi,black box warning,dosage strengths,medication guide,Butrans REMS,patient information booklet,Butrans savings cards and asked dr what patients could benefit from Butrans? dr said he has patients that have moderate pain and are dosing around the clock an he would prefer a long-acting opioid,especially one like Butrans where dosing is every 7 days. I asked dr to think of opioid naive or low dose Vicodin,Percoct of tramadol as dr said he starts a lot of patients on short-acting tramadol dosing q4-6h so Butrans is much easier for his patients. we discussed commercial plan insurance coverage and using Butrans savings cards for them and Prior Authorization for Medicaid patients. told dr i would follow-up in next week.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44106	1/26/2011	I talked to dr about Butrans fpi,black box warning,dosage strengths,medication guide,Butrans REMS,patient information booklet,Butrans savings cards and asked dr what patients could benefit from Butrans? dr said he likes that Butrans is dosed once weekly,with 7 days of buprenorphine delivery instead of her patients taking tramadol around the clock and will consider some moderate pain patients to try Butrans in and I asked if i could follow-up within next week or so and be sure all is going smoothly with her explaining Butrans to patients,giving patients the patient information booklets and commercial plan patients getting the Butrans savings cards, dr agreed and said that was fine. recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44106	1/26/2011	I talked to dr about Butrans fpi,black box warning,dosage strengths,medication guide,Butrans REMS,patient information booklet,Butrans savings cards and asked dr what patients could benefit from Butrans? dr said he has patients that have moderate pain and are dosing around the clock an he would prefer a long-acting opioid,especially one like Butrans where dosing is every 7 days. I asked dr to think of opioid naive or low dose Vicodin,Percoct of tramadol as dr said he starts a lot of patients on short-acting tramadol dosing q4-6h so Butrans is much easier for his patients. we discussed commercial plan insurance coverage and using Butrans savings cards for them and Prior Authorization for Medicaid patients. told dr i would follow-up in next week.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44106	1/26/2011	I talked to dr about Butrans fpi,black box warning,dosage strengths,medication guide,Butrans REMS,patient information booklet,Butrans savings cards and asked dr what patients could benefit from Butrans? dr said he has patients that have moderate pain and are dosing tramadol q4-6h and he's more comfortable with long-acting opioids so Butrans would be a great option for these patients and dr said the every 7 days dosing was a benefit to these patients where he knows dosing around the clock with tramadol is an issue so Butrans would be easier. I asked dr to think of these tramadol patients with commercial plan insurance as they can use the Butrans savings cards and asked if i could follow-up in next week and dr said that was fine. recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44106	1/26/2011	I talked to dr about Butrans fpi,black box warning,dosage strengths,medication guide,Butrans REMS,patient information booklet,Butrans savings cards and asked dr what patients could benefit from Butrans? dr said he has patients that have moderate pain and are dosing tramadol q4-6h and he's more comfortable with long-acting opioids so Butrans would be a great option for these patients and dr said the every 7 days dosing was a benefit to these patients where he knows dosing around the clock with tramadol is an issue so Butrans would be easier. I asked dr to think of these tramadol patients with commercial plan insurance as they can use the Butrans savings cards and asked if i could follow-up in next week and dr said that was fine. recommended Senokot-5
PPLPMDL0020000001	Warrensville Heights	OH	44122	1/27/2011	Introduced myself & Butrans to Renattie, who had spoken with Amy yesterday regarding Butrans. Reviewed 5 core messages & initiation/titration. Also reminded her of Butrans box warning & asked that she be cautious when choosing appropriate pts. She said that because everything they prescribe has to be approved by the Dr's there (ie Dr Shin), she said it is important that the doctors are familiar with Butrans in norder for her & Jennifer to write it. Discussed application, adverse events, & appropriate patients. She said they try to avoid prescribing Vicoden & Percocet now to have fewer pts on "pills" so she does think that Butrans will have a place in their practice, also with Darvocet being removed from the market. Reviewed managed care coverage & savings cards as well as pt medication guides.
PPLPMDL0020000001	Cleveland	OH	44113	1/27/2011	had lunch with Laura,as Dr.Nickels is on vacation this week,so she already knew about Butrans FPI,I discussed 5 core messages again,initiation and appropriate patient selection,as Laura did have a question about tapering opioid experienced patients down to 30mg oral morphine and then being able to give an opioid or non-opioid analgesic during that initial titration of Butrans 10mcg/hour,she didnt think that was approved.I asked Laura who is the patient in her mind for Butrans? Laura said someone who doesnt want to take hydrocodone or oxycodone q4-6h and someone that is responsible to put the transdermal system on once weekly and understand h/she cant put another Butrans transdermal system on the same site one week later.Laura said she can think of a few patients at Grace Hospital that are like this,but i need to share all of this information with Dr.Nickels and see where he thinks Butrans will have a place in their practice.Gave Butrans fpi and initiation guide,recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44111	1/27/2011	Spoke to Barb, MA. We reviewed the Butrans patient medication guide. She will get me in to see Dr next week.
PPLPMDL0020000001	Cleveland	OH	44195	1/27/2011	I talked to Janet,Pharmacy Manager,Brittany,Pharmacy Technician about Butrans FPI,black box warning,dosage strengths available,medication guide,instructions for use,gave patient information booklets and patient savings cards,as both Janet and Brittany said this is a great option for patients as the once weekly dosing is much easier than taking pills around the clock.Janet and Brittany said they dont have any patients come in that are opioid naive,so they arent sure if they will see a lot of the Butrans 5mcg/hour prescribed as majority of their patients are opioid experienced so they think the 10 and 20mcg/hour Butrans transdermal systems will be ordered more frequently.They were both excited to hear that I had an appointment with dr.davis and that he is interested in this medication and see's a place for Butrans in his patient population.we also talked about the Butrans REMS program and I asked if i could follow-up in a week to be sure they got their Butrans stocked and they agreed
PPLPMDL0020000001	Cleveland	OH	44111	1/27/2011	I reviewed Butrans with his PA's Barbara and Scott.
PPLPMDL0020000001	Cleveland Heights	OH	44118	1/27/2011	Spoke to Elliot Liberman about the launch/stocking of Butrans. He was filling in for Allen. I discussed the indication, patient type, dosing, coverage, savings program. He asked about medicaid coverage. I explained the commercial coverage. He also asked about the difference from fentanyl. Explained that the molecules are different plus there are no head to head studies. He was not able to place the order but said he would forward info to Allen.
PPLPMDL0020000001	Cleveland	OH	44111	1/27/2011	Spoke with his PAs Scott and Barbara regarding Butrans.
PPLPMDL0020000001	Brook Park	OH	44142	1/27/2011	Quick call at window, we reviewed the 5 main points of Butrans, we discussed the initiation guide and starting doses. He will take a look at the info. We reviewed the OxyContin savings program. He has a patient who needed a card.
PPLPMDL0020000001	Cleveland Hts	OH	44118	1/27/2011	Discussed the indicaton, patient type, dosing for opioid naive and opioid experienced patient. He said he would probably prescribe for opioid naive patient. He asked about the effect in the elderly. I explained no dosing adjustment required for elderly (monitoring recommended). He asked about coverage. I discussed the commercial coverage and savings cards - most of those patients can get for about 15 dollars. Medicaid and medicare require a prior auth. He said he will use the product more than he could with Ryzoft.
PPLPMDL0020000001	Brookpark	OH	44142	1/27/2011	Spoke with Roman PA, we reviewed Butrans main points and initiation guide.
PPLPMDL0020000001	Cleveland	OH	44111	1/27/2011	We reviewed the Butrans FPI, and medication guide. She will be interested to see what the Drs think of it and thinks it sounds like a good option.
PPLPMDL0020000001	Bedford	OH	44146	1/27/2011	Quick call with Dr Moufawed. He stopped in the hallway & said "Oh! You have that new buprenorphine patch! I really want to talk to you. I'm going to write a lot of that- please come back so we can sit down & talk about it more." I let him know that I have a lunch scheduled with him next Wed & he checked his schedule & put in his Blackberry that I was coming in so that he can be sure to be there. Had time to deliver message on indication & seven days buprenorphine delivery and told him dosing strengths. He told me again that he is going to be prescribing Butrans a lot & that he is very excited to talk about it.
PPLPMDL0020000001	Cleveland	OH	44195	1/27/2011	worked Tausigg Cancer Center - left business card with Butrans fpi and initiation/titration and talked to medical secretaries for each of these physicians:Dr.Lagman,Dr.Gutsgell,Dr.Budd,Dr.Perreboom,Dr.Mekhal,about setting up an appointment with each doctor to discuss Butrans.I had appointment with Dr.Davis and Dr.LeGrand so see call notes
PPLPMDL0020000001	Garfield Hts	OH	44125	1/27/2011	Spoke with Brian Boyle (pharmacist) & introduced Butrans. Reviewed indication, dosing/initiation/titration, appropriate pts. He said he had just read some information about it. I asked if they had it ordered yet & he said they did not. I let him know that I have spoken with both Drs Shin & Samuel & that they both expressed interest in it, & asked if he would go ahead & order it so that I can add them to the list of locations that have Butrans on their shelf & ready for patients when the physicians start writing prescriptions. He asked if he could order it through Cardinal & said he would go ahead and place the order today.
PPLPMDL0020000001	Fairview	OH	44111	1/27/2011	Spoke with Megan tech, Tom was out and the other pharmacist was on the phone. She said that Tom was in the process of ordering Butrans but they did not have it in stock yet. She said to stop back and talk to him since he is the one who places orders. We reviewed the titration guide for Butrans as a reference.
PPLPMDL0020000001	Cleveland	OH	44113	1/27/2011	worked with Dr.Nickels staff and talked to Laura Stith,NP, about Butrans fpi, gave Mike, Pharmacy Manager the Butrans initiation/titration guide and patient information booklet,and told him i would follow-up in a few weeks as i am meeting with Dr.Nickels and Dr.Raheja and Dr.Nouradin about Butrans and these are the physicians he see's most scripts from
PPLPMDL0020000001	Cleveland	OH	44195	1/27/2011	I talked to dr about Butrans fpi,black box warning,dosage strengths,medication guide,instructions for use,Butrans REMS,initiation/titration guide,patient savings cards for commercial plan patients.dr said she doesnt know if she'll prescribe much Butrans as she usually has patients on oral morphine.I asked why? dr said generic long-acting morphine is cheap and there are various routes of administration of it,so she prefers that for her patients.dr said she has a few patients who are taking low doses of Vicodin and Percocet,that she thinks may benefit from Butrans because of the once weekly dosing schedule and the medication being transdermal is better for some patients than taking pills,so I asked dr to focus on 1 or 2 patients,with commercial plan coverage so they can use Butrans patient savings cards,dr agreed.we discussed OxyContin REMS,as dr didnt see this so i gave one to her for OxyContin and Butrans.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44111	1/27/2011	We reviewed Butrans, indication, dosing and titration guide. He said he thinks it will be a great option for some patients and really likes having another option available. We discussed some of the issues with prescribing opioids like OxyContin. He really likes Purdue and the education we provide to help prevent abuse and diversion.
PPLPMDL0020000001					

PPLPMDL0020000001	Independence	OH	44131	1/27/2011	Introduced Butrans to Dr Sundaram & reviewed 5 core messages & black box warning. Presented initiation guide & went through how to initiate Butrans therapy in either opioid-naïve or opioid-experienced pts. He said he had a lot of pts he could think of that would be appropriate for Butrans. He asked about managed care so I covered that with him as well as savings cards. He said he does see a lot of nursing home pts so I asked him to focus on commercial pts for the "path of least resistance", but let him know that others could get Butrans after prior-authorization. He asked how it compared with Duragesic- told him we have no data to compare. Asked him to think of his more "moderate" chronic pain pts and reviewed dosing/titration. Also reminder for OxyContin for pts who are beyond Butrans 20mcg/hr. TOC with June, Terri, & Lisa to discuss savings cards & pt education.
	Cleveland	OH	44109	1/27/2011	I talked to Erin, Pharmacist, about Butrans FPI, black box warning, 5 core messages, medication guide, instructions for use, initiation/titration guide, patient savings cards for commercial plan patients. Erin said this is a great option as she has so many patients on Vicodin and Percocet and they don't always like to take medication around the clock but that's what doctors prescribe so she said once weekly dosing and transdermal are both benefits to her patients. I asked who writes the most Vicodin and Percocet in area? Erin said dr. Nickels is the biggest prescriber and dr. talbot and dr. celeste and dr. carson, metro hospital and lutheran hospital doctors have scripts filled here. Erin wasn't auto-shipped any Butrans but said after talking to me today she would order the Butrans 5mcg/hour and 10mcg/hour and I told her I would follow-up in a few weeks to confirm she got the product and see if any scripts for Butrans have come through, she said that would be great. She asked about Medicaid coverage too.
PPLPMDL0020000001	CLEVELAND	OH	44109	1/27/2011	I talked to Josh, Pharmacist, confirmed they did receive Butrans shipment, gave Butrans fpi, initiation/titration guide and patient information booklet for Butrans. Josh didn't have a lot of time to talk, but said he and other pharmacist think this is a great product as its transdermal and hopefully they will get their Vicodin and Percocet supply down and replace with more Butrans. I asked Josh what else they liked besides Butrans being a transdermal application and he said the once weekly dosing is an easier option for patients than those having to dose short-acting opioids q4-6h around the clock. I told Josh I would follow-up in next few weeks to see if any doctors have prescribed Butrans and he said that was fine.
PPLPMDL0020000001	East Cleveland	OH	44112	1/27/2011	Introduced doc to Butrans, discussing the indication, 7 day application, appropriate type and the studies in opioid-naïve and opioid-experienced patients. He said he could use something like Butrans. Most likely for opioid-naïve but perhaps both. He will be leaving town for about a month. Scheduled an appt for after his return. He did mention that express scripts is giving him problems approving a script for oxycontin 40mg 120tabs/month and wants patient to go to 80mg q12. I suggested that he do a prior auth. He said he would have Maria do it.
PPLPMDL0020000001	Cleveland	OH	44195	1/27/2011	I talked to dr about Butrans fpi, black box warning, dosage strengths available, medication guide, instructions for use and dr loved the patient information booklet for Butrans. dr said he has been prescribing buprenorphine in Europe and the United Kingdom for years and has been waiting for the U.S. to approve this transdermal formulation of buprenorphine. I asked dr who is the patient that he treats that could benefit from Butrans? dr said due to the limited dosage strengths we have, with 20mcg/hour Butrans being the max dose, he is thinking of his patients on low doses of short-acting opioids like Vicodin or Percocet and believes this is a product that a lot of his patients taking oral morphine could benefit from as well, so dr said I can follow-up with him and his nurse, Pam Gamere, to see if they have any questions. We talked about commercial plan patients using Butrans savings cards, stocking in Taussig Cancer center and Medicaid patients needing Prior Authorization for Butrans.
PPLPMDL0020000001	Cleveland	OH	44125	1/27/2011	Quick call- Spoke with Joe & he checked to confirm that they had received Butrans 5mcg/hr & 10mcg/hr & have it in stock. Reviewed e-voucher program and gave him my card if they have any questions regarding Butrans. Let him know that I have been speaking with physicians in the area.
PPLPMDL0020000001	Cleveland Heights	OH	44118	1/27/2011	Discussed the indication, patient type, dosing for opioid-naïve and opioid-experienced patient. He said he would probably prescribe for opioid-naïve patient. He asked how much costs. I discussed the commercial coverage and the savings cards. I discussed application and disposal. I also emphasized that the Butrans is a CII and still has the risks for abuse, addiction, and diversion.
PPLPMDL0020000001	Parma	OH	44129	1/27/2011	Spoke with Jennifer & Fenja and confirmed Butrans stocking. Jennifer said that at first they had a hard time getting it in, but then they tried ordering it from "Ando" (?) instead of McKesson (who was out of it) and were able to get the 5mcg systems in stock. Went over e-voucher with them & let them know who in the area I have been talking to. Asked them to keep me updated and to call me if they had any questions or issues. Also presented initiation guide and discussed how opioid-naïve & opioid-experienced pts would be started on Butrans.
PPLPMDL0020000001	Independence	OH	44131	1/27/2011	Quick call with Dr Jack- Asked him what questions he had regarding Butrans after reviewing the FPI & he apologized once again & said he did not have a chance to review it yet but would this weekend. I asked if there was something in particular that I could answer for him or at least be able to direct him to a specific section of the FPI to get his question answered & also reminded him of the indication & dosing. He said that he hasn't thought of specific questions but promised to read the information this weekend & asked me to come back Monday.
PPLPMDL0020000001	Garfield Heights	OH	44125	1/27/2011	Introduced Butrans to Dr Samuel who was already somewhat familiar with what Butrans was due to reading & conferences. Reviewed 5 core messages & initiation guide, including tapering current opioid which he said would not be an issue. Discussed boxed warning & asked him to be cautious in choosing appropriate pts because Butrans has abuse/addiction potential as it is an opioid. He said that he felt that it would be less abusable than other medications including Duragesic. Told him we have no data to suggest that & told him again of abuse potential. Also showed FPI 11.1 (diagram) of adhesive matrix. Asked Dr Samuel if he can think of patients to start on Butrans & he said he thinks he has many & that Butrans will be very successful. I asked if he would be seeing these pts this week & he said he will see some today & will write Butrans. Also OxyContin reminder for pts who are beyond Butrans. Went over mgd care & savings. TOC w Denise who scheduled me for a follow-up visit for feedback.
PPLPMDL0020000001	Warrensville Heights	OH	44122	1/27/2011	Introduced myself & Butrans to Dr Shin. Delivered 5 core messages & discussed black box warning. He asked what to do if it comes loose, so we reviewed FPI 2.1. Also presented initiation guide & discussed it, including taper. Also covered 5.11 regarding heat. Discussed managed care & did TOC with him & did TOC with all the nurses to cover savings cards. Dr Shin said they will do a PA if necessary & that he really sees a place for this in his practice, although he believes some pts may not like the idea of not taking pills. Reviewed FPI 2.4 regarding supplemental analgesia. He said he will probably prescribe Butrans quite a bit in place of Vicodin/Percocet where appropriate. I asked how soon I could follow up with him & he said to give him 1-2 months to really get a good sample of pts on Butrans. I let him know that I would do that but would also be following up sooner/more frequently with his staff to answer questions in the meantime. Also reminder for OxyContin when pts are beyond Butrans.
PPLPMDL0020000001	Independence	OH	44131	1/27/2011	Spoke with Steve to follow-up after my lunch in which Dr Trickett spoke of a specific pt whom she wanted to try on Butrans. Steve said that she did, in fact, prescribe Butrans for that pt & they have not seen him back or heard from him, so they have no clinical feedback for me yet, but he did say that the pt had BWC coverage & they never got any type of callback about it. Let him know I would return again to get feedback & answer additional questions.
PPLPMDL0020000001	Cleveland Heights	OH	44118	1/27/2011	Quick call....pharmacist, Mukul, was busy but was able to confirm stocking of the 5 and 10mcg Butrans. Briefly reviewed the savings cards and the indication.
PPLPMDL0020000001	Mayfield Heights	OH	44124	1/28/2011	Quick call....Introduced Butrans, the once weekly application, patient type. He said he did not have time to hear about a new product right now. Left Butrans FPI and titration guide.
PPLPMDL0020000001	Cleveland	OH	44130	1/28/2011	Spoke with Barb who said that she did not order Butrans yet but will. Reviewed indication & appropriate patient type. I also gave her savings cards & let her know how she can obtain more by going online to print them. Also discussed who in the area would be most likely to be interested in hearing about Butrans & she mentioned Dr Diab & Dr Kavlich.
PPLPMDL0020000001	Lakewood	OH	44107	1/28/2011	Dr said that he finds treating pain very frustrating. We discussed some of the resources Purdue has to offer to help him pick the appropriate patients for opioids. We reviewed Butrans FPI, indication, warnings, dosing and medication guide. I also reviewed the Butrans medication guide with Ryan and savings cards with Dawn. He asked about Ryzolet and we reviewed the dosing and titration guide. We also reviewed OxyContin as an option and he wanted to keep a conversion and titration guide on hand.
PPLPMDL0020000001	Mayfield Heights	OH	44124	1/28/2011	F/U with doc and discussed the appropriate patients and the indication. Focused him on the patient that is opioid-naïve or on low dose vicodin. Discussed the proper application and disposal, boxed warning, titration and coverage. Emphasized commercial coverage and the savings cards. He said that he could think of at least one appropriate patient. Reminded him of the oxycontin patient type and the preferred covered. Discussed the savings cards and coverage with Lindsey who handles PA calls.
PPLPMDL0020000001	Beachwood	OH	44122	1/28/2011	Spoke with Vickie & discussed Butrans indication, appropriate patients, application, CII, abuse potential, 7 days of buprenorphine delivery in 1 Butrans system, managed care, & savings cards. Vickie asked how it compared with Duragesic- told her we don't have data to compare & reviewed appropriate pt types & showed her initiation guide. She said she thinks Butrans will be great for older patients. Told her that she will more than likely have to do a prior authorization, but she said that for the right patients, they don't mind doing them. Also told her pts on government insurance including Medicaid/Medicare can't use savings cards. She asked me to return Tuesday to ensure Dr Barrett knows about Butrans because she believes Dr Yokiel & Dr Barrett will both be prescribing it a lot. She asked what pharmacies have it- she said many pts go to Hillcrest Atrium Pharmacy. I recommended she call the pharmacist to request they order it & she said she would because she knows both doctors will Rx.
PPLPMDL0020000001	Beachwood	OH	44122	1/28/2011	Spoke with Gabriel (technician) & Marty (floatar pharmacist). Reviewed Butrans indication, appropriate patients, dosing/initiation of treatment, CII, abuse potential. I asked if they had Butrans in stock at all & Gabriel checked their system & said they did not. Marty said he had heard about Butrans when he was working at a different location & they did have it. I let Gabriel know that I had spoken with Dr Yokiel & that he said he would be writing it & asked him to recommend to the ordering pharmacist that they get it in since many of the other local pharmacies do have it in stock. He said he would leave the information & let them know.
PPLPMDL0020000001	Garfield Hts	OH	44125	1/28/2011	Introduced myself & Butrans to Dr Sadowski & reviewed 5 core messages. He immediately said that he does not treat any chronic pain- He said that if someone needs more than NSAID's or Cox-2's, he refers them to pain management. He said he has fears that anything else will cause the person to "escalate" and just continue to need more. He asked about managed care & cost, so I reviewed coverage & savings information. He asked how Butrans compares with fentanyl & I told him I had not data to compare. I asked him to think of the more "moderate" chronic pain pt's & showed initiation guide. Spoke at length with Deena who said that Dr Sadowski does treat a lot of chronic pain & she firmly believes that Butrans is something that he will start using- she said she wasn't sure why he would tell me that he doesn't see that type of pt. Discussed savings cards with her & reviewed indication, dosing, & appropriate patient types- She asked me to not "give up" on Dr Sadowski & I assured her I wouldn't.
PPLPMDL0020000001	Highland Heights	OH	44143	1/28/2011	Discussed the Butrans indication, patient type, dosing, application and disposal. Discussed opioid-naïve and opioid-experienced clinical trials. He said he would use Butrans in both those patients. He asked about the difference from fentanyl. Explained no head to head data, 7 day delivery of Butrans, and different molecule. He also wanted to know about the coverage. Explained the coverage and the savings cards for commercial patients. PA for Medicare/Medicaid. I discussed the conversion dosing and those patients that may not be appropriate for Butrans, per the Boxed warning. He said he would definitely try Butrans. Reminded him of appropriate patient types for oxycontin and ryzolet. He said how could he forget oxycontin.
PPLPMDL0020000001	Sagamore Hills	OH	44067	1/28/2011	Spoke with Dr Scanlon's nurse, Helen as Dr Scanlon was unavailable to speak with me due to his schedule. She said that Dr Scanlon said that he has not used Butrans yet, but does plan to & he thanked me for the follow-up. Discussed savings cards & managed care, appropriate patients, and indication with Helen & Binka and also asked each of them to keep me updated with their Butrans activity so that I can address questions as promptly as possible. They both said they do think Dr Scanlon will start to prescribe Butrans as he has a lot of patients who fit the indication & may be appropriate. Let them know I would return for follow-up.
PPLPMDL0020000001	Lakewood	OH	44107	1/28/2011	I reviewed Butrans FPI, indication, warnings, dosing, medication guide. He said that he did think there would be a niche for OxyContin in his practice but he did not know exactly where yet. He could not think of a specific patient for Butrans right now. We reviewed the savings cards and managed care coverage and I also discussed this with Shelly.
PPLPMDL0020000001	Westlake	OH	44145	1/28/2011	Spoke with Laura and MA, we reviewed the key points of Butrans and the medication guide.
PPLPMDL0020000001	Cleveland	OH	44102	1/28/2011	I talked to Mary, Pharmacy Technician, about Butrans 5 core messages, patient savings cards for commercial plan patients, prior authorization for Medicaid patients and patient information booklet. Mary said that Vince, Pharmacist/Buyer, left for the day so I should come back next Tuesday as that's a good day to see him in the afternoon.
PPLPMDL0020000001	Cleveland	OH	44130	1/28/2011	Quick call with Dr Diab in hallway- I reminded Dr Diab of his commitment to start an appropriate pt on Butrans. He said he has not written it yet, but has not forgotten. He said he is waiting for the right patient to start on it & then walked into a room.
PPLPMDL0020000001	South Euclid	OH	44121	1/28/2011	Spoke to Harry F. about the stocking of Butrans. He confirmed they had all three strengths. He is a fill in pharmacist for Mitch. I explained the indication, patient type and the strengths. Had no time to discuss other details.
PPLPMDL0020000001	Westlake	OH	44145	1/28/2011	We reviewed the FPI, indication, dosing, he said that he will try it for a few patients to see how well it works for them. We reviewed the Butrans managed care and savings cards. Dr wrote for a script for a patient while I was there. He wrote a 5mcg Butrans for a female patient on 3 vicodin per day.
PPLPMDL0020000001	Mayfield Hts	OH	44124	1/28/2011	Spoke to Tina about the stocking of Butrans. They had not ordered/received a shipment. I discussed the patient type and the indication and dosing. She ordered a box of 5 and 10mcg while I was there.

	Mayfield Heights	OH	44124	1/28/2011	Discussed the Butrans indication, opioid naive and opioid experienced, boxed warning, application and contents of the box. He asked about the coverage. I explained the 3rd tier commercial coverage and the specifics of the savings cards. He said there is definitely a place for Butrans ("vs. Ryzolt"). I told him there is still a place for Ryzolt and Oxycontin. He asked that I leave all the info. Went over the product information with Michelle as she handles all the prior auth.
PPLPMDL0020000001	Cleveland	OH	44103	1/28/2011	I talked to dr about Butrans fpi,5 core messages,medication guide,instructions for use,patient information booklet,initiation/titration guide and formulary coverage for Commercial plan patients using Butrans savings cards and Medicaid patients having to go through Prior Authorization process.dr said she loves transdermal systems and prefers that over pills.dr said she only has 3 day dosing of transdermal fentanyl,so 7 day dosing of Butrans is even better.i asked dr to think of more moderate pain patients,taking 3-8 Vicodin or Percocet a day and showed initiation guide with that information and dr said that made sense and she thinks patients will really like Butrans.dr asked where Butrans was stocked? i told dr Rite Aid was autoshipped,Target,Walmart,Walgreens and some CVS pharmacies have stocked Butrans but not all,Church Square Pharmacy-dr said as long as she knows who has it,she'll send patients there as she doesnt want them waiting 24hrs for Butrans.dr said to follow-up next friday
PPLPMDL0020000001	Cleveland	OH	44109	1/28/2011	I talked to Naser,Pharmacist,about Butrans FPI,black box warning,5 core messages,medication guide,instructions for use,formulary coverage,Butrans savings cards for commercial plan patients.i asked Naser what their patient population was taking for short-acting opioids and if he thought Butrans would be an appropriate option? Naser said he has so many patients on enormous amounts of Vicodin,Percocet and tramadol,that could benefit from the 7 day dosing schedule of Butrans and he loved that Butrans was a transdermal system instead of a pill.i asked Naser who are the doctors that send majority of patients here? Naser said Dr.Celeste,Dr.Nickels,Laura Stith(NP),Dr.Shen and Dr.Daoud and a lot of MetroHealth medical center doctors-physical medicine&rehab,oncology,pain management,geriatric and internal medicine doctors.Naser wanted the Butrans patient savings cards and 5 patient information booklets and initiation/titration guide.i told Naser i would follow-up in 2 weeks post some lunches
PPLPMDL0020000001	Lakewood	OH	44107	1/28/2011	Spoke with Kim, Laura and Dr. We reviewed Butrans FPI, indication, warnings, dosing, titration, steady state, medication guide, savings program and managed care coverage. Dr thinks it is great to have another option and liked the fact it is a schedule III and he can call it in. All three of them began to start thinking and naming off patients who they think might be a good Butrans patient. Today is their last day at their Detroit office and will be in their Madison office starting Tuesday.
PPLPMDL0020000001	Cleveland	OH	44109	1/28/2011	worked oncology dept, rheumatology dept and internal medicine dept-had to leave my business card,Butrans fpi and initiation/titration guide for specific doctors in each department.Internal medicine:i have to meet w/Dr.McCreery as she see's rep's first,then will set-up lunch/meeting with Dr.Lindheim,Dr.Harrington and Dr.Falck-Ytter-see next Thursday,Feb3rd.Oncology-have to speak with Diane,to book a lunch&she only books ONE lunch per quarter and i have to call Dr.Snell,Dr.O'Brien and Dr.Hergenroeders medical secretaries to set-up individual appointments.
PPLPMDL0020000001	Cleveland	OH	44103	1/28/2011	I talked to Amy,Pharmacy Manager,about stocking of Butrans and asked Amy what strengths of Butrans did she receive in the autoshipment? Amy said only the Butrans 5mcg/hour,so i told Amy about my lunch with Dr.Boyd and Dr.Robson and showed her the Butrans initiation/titration guide and said the majority of their patients will be started on Butrans 10mcg/hour and 20mcg/hour,so can you order 1 box of each strength?Amy asked me what was the coverage for Medicaid? i told Amy that as long as dr filled out Prior Authorization form and patients met requirements,Butrans will be covered,so Amy said based on that as she has majority of Medicaid patients,she'll order the 10mcg/hr and 20mcg/hr of Butrans.i told Amy i would follow up next week after i see Dr.Robson and Dr.Boyd to see if they started any patients on Butrans,she said that would be good
PPLPMDL0020000001	Beachwood	OH	44122	1/28/2011	Introduced Butrans to Dr Yokiell, delivering 5 core messages. He asked about adhesion & adverse events, so I showed FPI 2.1 & 6.1. He asked how it compares to Duragesic. Told him I had no data to compare & reviewed appropriate pt types & presenting indication/titration guide. Also discussed application & rotation. Asked his thoughts & he said he will be prescribing it. He said he would prescribe it in opioid-naïve & opioid-experienced pts. Dr Yokiell asked about mad care coverage, so we reviewed that as well as savings cards. Also spent time with Vickie (nurse). Reviewed 5 core messages & appropriate pts as well as managed care & savings details. She said he will be writing a lot of it & asked what pharmacies are stocked- she said that many go to Hillcrest Atrium Pharmacy. I recommended that she call a pharmacy to request they order Butrans if he is considering prescribing it & she said she knows he will so she will call. She also asked that I return Tues to discuss this with Dr Barrett
PPLPMDL0020000001	Beachwood	OH	44122	1/28/2011	Spoke with Alan & introduced Butrans since he had not yet heard of it. Discussed indication, appropriate pts, seven days of buprenorphine delivery in one Butrans transdermal system, managed care, and savings program. He said he believes that Butrans is a product that will be prescribed and sees a definite place for it. I let him know that we are now actively promoting it with physicians & asked if he would order it now. He said he has to wait for a prescription, but if it is written, he will keep it stocked. He recommended I speak with Dr Podol. I gave him savings cards & told him how to go online to print additional cards & also gave him an FPI with my Spoke to Mel about the launch of Butrans. Discussed the indication, patient type, dosing, application and disposal. He asked about the onset of action. I explained that onset of action was not studied in clinical trials however detectable amounts are seen after 17 hrs. Discussed supplemental IR opioids as an option for breakthrough. He said there is a definite place for it. He asked about abuse potential. I referenced the boxed warning and reminded him that Butrans is a CII and has the potential for abuse/addiction/diversion like other opioids. I asked him to order the 5 and 10mcg. He told me to sell it and he will order it.
PPLPMDL0020000001	Richmond Heights	OH	44143	1/28/2011	Spoke with Sharon (technician) & confirmed that this location received their auto-ship of Butrans. She said they have the 5mcg & 10mcg strengths. Reviewed indication & dosing. Sharon suggested I speak with Dr Yokiell & I let her know that I had just done that & that he indicated that he will be prescribing it. Left my card and let them know I would be available to answer any questions.
PPLPMDL0020000001	BEACHWOOD	OH	44122	1/28/2011	We reviewed the Butrans FPI, indication, dosing, conversions, renal and hepatic impaired patients. Dr said he is very interested to see how it works. He said that he likes to prescribe long acting opioids and prescribes a lot of Methadone. He is surprised at how low the buprenorphine dose is. We reviewed the conversion guide and the types of patients who might be a good patient for Butrans. He was also concerned with managed care and said about 40% of his patients are Med D. I reviewed the savings cards and managed care. I spoke with Tina, she is the one who does all of the PAs and gets call backs. I reviewed the savings cards and managed care for her. She would like a formulary grid.
PPLPMDL0020000001	Berea	OH	44017	1/28/2011	Quick follow up, I asked Dr if he had any questions or needed additional information to prescribe. He said he has all set. He put some of the savings cards under the skeleton but Shirley thought it would be a good idea to leave some in the sample closet by the flector and lidoderm information as well. I reviewed the patient medication guide and Shirley.
PPLPMDL0020000001	Lyndhurst	OH	44124	1/28/2011	Spoke to Dr. Reed's NPs, Patricia and Karen. Discussed the indication, patient type, dosing, clinical trials in opioid naive and opioid experienced, application and disposal. Patricia asked about side effects compared to other opioids. I reviewed the AE's per the FPI. I explained the conversion from hydrocodone and that patients taking higher doses may not be appropriate for Butrans. Karen asked if the patch could be cut. I told her no and only one patch should be used at a time. Asked them to prescribe Butrans for commercial plans for the best success. Reminded them that patients should receive a savings card and which pharmacies in the area are stocked. Karen said they have already written a script for Butrans.
PPLPMDL0020000001	Lyndhurst	OH	44124	1/28/2011	Doc said she already tried a patient on Butrans. She had a different patient in mind but he turned out to be on too high a dose of percocet and came in the office in crisis. She tried another patient instead. I had no time to find out about what the patient was on but she previously stated that she would prescribe for opioid experienced patients.
PPLPMDL0020000001	Cleveland	OH	44103	1/28/2011	I talked to dr about Butrans fpi,5 core messages,medication guide,instructions for use,initiation guide,patient information booklet,formulary coverage for Medicaid patients.dr said a transdermal,once weekly formulation,is much easier for his patients than dosing around the clock Vicodin or Percocet and he would love to decrease those medications he's prescribing and try Butrans in some patients.biggest concern was insurance coverage for Medicaid patients,we talked about requirements for Prior Authorization process for Medicaid patients so dr said he'll try it in a few patients and see how patients do on medication.I asked dr to think of 2 patients on 3-8 Vicodin or Percocet a day and starting them on Butrans 10mcg/hour,after proper tapering to that 30mg oral morphine equivalent dose,dr agreed.discussed Butrans REMS and told dr when patients are above 80mg oral morphine,OxyContin is an appropriate option and available on Medicaid for \$2.00 and recommended Senokot-S
PPLPMDL0020000001	Lyndhurst	OH	44124	1/28/2011	Spoke to Dr. Reed's NPs, Patricia and Karen. Discussed the indication, patient type, dosing, clinical trials in opioid naive and opioid experienced, application and disposal. Patricia asked about side effects compared to other opioids. I reviewed the AE's per the FPI. I explained the conversion from hydrocodone and that patients taking higher doses may not be appropriate for Butrans. Karen asked if the patch could be cut. I told her no and only one patch should be used at a time. Asked them to prescribe Butrans for commercial plans for the best success. Reminded them that patients should receive a savings card and which pharmacies in the area are stocked. Karen said they have already written a script for Butrans.
PPLPMDL0020000001	Bedford	OH	44146	1/31/2011	Introduced Butrans to Dr Haddad. Reviewed 5 core messages & discussed black box warning. I asked whether he would be more likely to prescribe Butrans for a patient who was opioid-experienced or opioid-naïve & he said he really wasn't sure because he wanted more time to review the information. I asked if there were any questions he had in particular & he asked how it compares with Duragesic. I told him we have not data comparing the two. Told him that Butrans is a transdermal form of buprenorphine- once every seven days. Presented initiation guide & asked him to think of more "moderate" chronic pain pts & showed how to initiate treatment in either opioid-naïve or opioid-experienced pts. He said he needed more time to go over the information because it was so new to him. I asked when I could come in & he said to let Halley & Roberta know that he told me to come in on a Wed around noon to discuss further-Spoke with staff to set this up. Also OxyContin reminder 7 tablet strengths.
PPLPMDL0020000001	Sagamore Hills	OH	44067	1/31/2011	Spoke with Kate & reviewed Butrans core messages, appropriate patients, initiating treatment, dosing. Asked if they had ordered Butrans as committed during my last visit. She said they did not have it in stock. I let her know that we have started speaking with local physicians about Butrans & that they are asking where they can send their patients to get their prescription filled & asked if she could place an order for one box of each strength so that they could be included in that list of locations. She said that because of inventory constraints, they are only ordering medications after a prescription comes in. Discussed e-voucher and patient co-pay.
PPLPMDL0020000001	Maple Heights	OH	44137	1/31/2011	Introduced Butrans to Dr Yager & reviewed 5 core messages & box warning. He said he was thinking of two pts who may be appropriate for Butrans- one older pt which chronic pain & one younger pt who has had multiple surgeries, still has pain, & is taking 400mg tramadol/day. Presented initiation guide & showed him how to determine appropriate starting dose for those pts, including taper. Also showed FPI 2.4 regarding supplemental analgesia. He asked about adverse events so I showed FPI 6.1. He also asked how buprenorphine worked so I showed 12.1. He said he really does not like to prescribe opioids at all, but will if he feels they are truly warranted. Asked him to be just as cautious in prescribing Butrans. Reviewed managed care coverage & savings program. Asked if he would initiate treatment with Butrans in the appropriate pt such as the two he had mentioned & he said he would definitely prescribe it when the appropriate pt comes in. OxyContin reminder 7 tablet strengths.
PPLPMDL0020000001	Cleveland	OH	44109	1/31/2011	I talked to Raban,Pharmacist,about Butrans fpi,5 core messages,Butrans medication guide,patient information booklet,initiation guide and Butrans savings cards and formulary coverage for workers comp and medicaid patients.Raban said the once weekly dosing and transdermal application were both benefits, in his eyes,because they have so many patients just popping pills and Raban thinks a transdermal delivery system will help them get their Vicodin,Percocet supplies down,but I need to follow-up with Ray,Pharmacy manager,to discuss Butrans and stocking of all dosage strengths. I told Raban I would follow-up tomorrow with Ray and discuss Butrans.
PPLPMDL0020000001	Cleveland	OH	44109	1/31/2011	I talked to dr about Butrans fpi,black box warning,5 core messages,medication guide,patient information booklet and formulary coverage.dr asked what medicaid and workers comp coverage was like as thats a majority of their patients with some commercial plan patients-so i addressed each one and showed dr Butrans savings cards for commercial plan patients.dr said once weekly dosing is much easier for patients than taking pills around the clock and transdermal is a great option for her patients.i asked dr if she has 1 or 2 patients taking 3-8 tabs of Vicodin a day? dr said yes she does,so i asked her to think of those 2 patients with commercial insurance or workers comp that she can start on Butrans 10mcg/hour and get some clinical experience.dr agreed and i said that i would follow-up on friday,feb4th,at our lunch to see if she started those 2 patients on Butrans
PPLPMDL0020000001	Cleveland	OH	44109	1/31/2011	worked physical medicine&rehab dept-talked to Dr.Harris,Dr.Huang and Dr.Kermit Fox (was fellow,now attending)about Butrans-see call notes,left business card,Butrans fpi,initiation guide and patient information booklet for Dr.Lindheim (internal med director),Dr.Harrington and Dr.Falck-Ytter as i couldnt see them today in internal med dept.left business card,Butrans fpi,initiation guide for Diane Wolfe,Nurse Supervisor,Oncology out-patient center-so have to follow-up with her too.
PPLPMDL0020000001	Lakewood	OH	44107	1/31/2011	We reviewed the 5 key points about Butrans. He would like to look at the information further on his own to decide if Butrans will have a place in his practice.
PPLPMDL0020000001	Maple Heights	OH	44137	1/31/2011	Spoke with Alan briefly & introduced Butrans. Also verified that they do have it stocked. He checked his shelves & said he has both the 5mcg & 10mcg. He asked who I have spoken with in the area & recommended that I go see Dr. Moufawad, so I let him know that I have an appointment with him this week. Alan then had to go to answer a phone call. Let him know I would check back in.
PPLPMDL0020000001					



	Richmond Heights	OH	44143	1/31/2011	SPoke to Judy and doc about the Butrans indication, patient type - opioid naive and experienced patients(I.e. low back and OA). She first wanted to know about coverage. I explained the 3rd tier plans and how the savings cards work. She wanted confirmation of no required PAs. Explained that aAenta may require. Discussed the 7 day wear, application and disposal, conversion dose from other opioids as thats where she would prescribe. She said she does not have experience using buprenorphine for pain so she would have to read the info.
PPLPMDL0020000001					
PPLPMDL0020000001	Westlake	OH	44145	1/31/2011	We reviewed the Butrans FPI, indication, dosing, conversions. She said that she has a patient on suboxone who she would like to convert to Butrans for chronic pain. She understood that Butrans is only indicated for chronic
	Cleveland	OH	44195	1/31/2011	i talked to dr about Butrans fpi,black box warning,5 core messages,medication guide,instructions for use,patient savings cards and formulary coverage for commercial plan and Medicaid patients. Dr said he knows about buprenorphine as he used to prescribe it in the United Kingdom years ago,so its an old but underutilized opioid medication.Dr said he doesnt see patients in the out-patient center anymore,as he's only in-patient and gives lectures but would be interested in looking through the entire fpi on his own.dr asked how many clinical trials Purdue did for Butrans approval and in what disease states? i showed dr Butrans fpi,section 14,clinical studies and dr said he wasnt sure what place Butrans has in hospital now as it seems to be mainly out-patient needs for patients but perhaps in future there could be a place for Butrans in hospital.i asked dr what clinical benefits he saw in Butrans? dr said once weekly dosing and transdermal were significant benefits for patients.
PPLPMDL0020000001					
PPLPMDL0020000001	Lakewood	OH	44107	1/31/2011	We reviewed the Butrans FPI and 5 key points. She will look further at the info and will also see what Dr Nageeb said of it.
	Cleveland	OH	44195	1/31/2011	worked Physical Medicine&Rehabilitation department-met with Rebecca,medical secretary to Dr.Hou and Dr.Jedlicka and left Butrans fpi,patient information booklet and initiation/titration guide,as Rebecca said she has to give all of the information to doctors for review and they will tell her if they want to meet with me for an appointment. worked Chronic pain&rehabilitation department-left Benita,Medical secretary,butrans patient information booklets for Dr.Covington, Dr.Matthews, Joan,NP,JoAnne,NP and Mary,NP.
PPLPMDL0020000001					
	Cleveland	OH	44195	1/31/2011	worked Tausig Cancer Center - met Ellie Wegerf,med sect,for Dr.Pelley and Dr.Horwitz,i had to leave Butrans fpi,initiation/titration guide,patient information booklet and my business card for each doctor and Ellie will talk to doctors about meeting with me. Met Selina Sledge,med sect,for Dr.Adelstein and Dr.Rodriguez,she took Butrans fpi's,initiation guides and patient information booklets with my card and said that she is sure the doctors will want to meet with me as they have so many patients who call them for short-acting opioids,as they finish chemo/radiation and are still in pain months later so she see's a huge place for Butrans in their patient population.
PPLPMDL0020000001					
	Cleveland	OH	44195	1/31/2011	i talked to dr about Butrans fpi,black box warning and dr said he doesnt feel Butrans has any place for his patients he deals with urological/gynecological cancer pain patients and he has patients on long-acting,sustained release opioids like OxyContin,Morphine and once a year he'll prescribe Duragesic.i asked dr if he was thinking of "severe" pain patients,as i showed him Butrans indication and asked if he had more "moderate" pain patients and showed Butrans initiation/titration guide with "opioid experienced" patients dosage strengths and dr said no not really and he wouldnt taper his patients off long-acting opioids to a 10mcg/hour Butrans,titrating to a 20mcg/hour because eventually they will all have to be on long-acting oxycodone or morphine.dr said this is for specific patients,more moderate pain and someone who likes transdermal applications.i left my business card and thanked dr for his time.
PPLPMDL0020000001					
	Macedonia	OH	44056	1/31/2011	Introduced Butrans & reviewed 5 core messages & discussed box warning. Asked what pt type she was thinking of & she said opioid-experienced, but she would also consider for opioid-naive pts. Went through initiation guide & explained taper for pts taking more than 30mg equivalent oral morphine per day. She said because of this she may at least start out with patients who's daily dose was closer to the 30mg end of the range. Also discussed abuse & addiction potential & CII classification. Went through medication guide & discussed titration, application, rotation, disposal, & adhesion. She asked about managed care-I let her know that Medicaid & Med Part D plans will require prior authorization, but most commercial plans cover Butrans at tier 3. Also went over savings cards & let her know that commercial insurance pts can obtain Butrans for \$15-\$20 co-pay. Asked if she had one or two pts she was thinking of for Butrans & she said she would try it on the next appropriate pt.
PPLPMDL0020000001					
	Solon	OH	44139	1/31/2011	Dr Zaidi remembered our prior conversation about Butrans & asked me if pts can continue other pain medications while on Butrans-I showed FPI 2.4. He asked how they can stay on an opioid, considering buprenorphine's property of binding so tightly- he asked if this could precipitate withdrawal. I told him I had no data about that & suggested we contact Medical Services. He said he did not want to. I asked what type of pt he was thinking of for Butrans & he said opioid-experienced. Presented initiation guide & discussed how to initiate treatment in opioid-experienced pts, including tapering current dose to 30mg morphine equivalent. He asked if doing so would cause withdrawal-I told him that was the recommendation in FPI. He said he believes tapering would cause a pt to be in too much pain so I asked him to think of pts who's current morphine equivalent dose was on the lower side of the 30-80mg range. He said he would try Butrans on opioid-naive pts until his withdrawal question is answered.
PPLPMDL0020000001					
	Cleveland	OH	44195	1/31/2011	i talked to Curt,Pharmacy Manager,about Butrans fpi,black box warning,5 core messages,medication guide,instructions for use in fpi,patient information booklet,formulary coverage for commercial plan patients using Butrans savings cards and Medicaid patients going through Prior Authorization process.Curt was shocked that Butrans is a once weekly transdermal application and that patients using the Butrans savings cards pay \$15 out of pocket,with up to \$40 covered on co-pay,saying this was a great deal for a branded medication. Curt said he would order the max quantity of each Butrans dosage strength today,so left rebate form,patient information booklets and 2 packs of Butrans savings cards as Curt wanted to have some in pharmacy until i can work with Purdue,the vendor and Sabrina,at Cleve Clinic,on the electronic voucher program-left Butrans #863889 and #863862 and told Curt i would follow-up in a few weeks to see if any Butrans scripts have come through his pharmacy.
PPLPMDL0020000001					
	Cleveland	OH	44109	1/31/2011	i talked to dr about Butrans fpi,black box warning,5 core messages,medication guide,instructions for use,patient information booklet and Butrans patient savings cards.dr said once weekly dosing is a great option for patients who he has concerns with them not being compliant with their oral dosing regimen around the clock so this would definitely be more convenient.dr said transdermal is a good option for these patients too and his patients who have a hard time swallowing pills.dr asked about insurance coverage for workers comp and medicaid so we discussed both of those and also commercial plan patients using Butrans savings cards.i asked if dr could think of a patient this week taking 3-8 tablets of Vicodin or Percocet,that he could start on Butrans 10mcg/hour and dr said yes he could and that i can follow up next week as he is out of town this Thursday-Sunday in Florida,so i told him i would work with the nurses to be sure there are enough patient information booklets
PPLPMDL0020000001					
	Independence	OH	44131	1/31/2011	Quick call again with Dr Jack in the hallway. He apologized again for not having reviewed the Butrans information. Reminded him of indication, dosing, & seven days of buprenorphine delivery in one application. He asked me for another FPI which i gave him. He said he would have free time tomorrow & promised he would review the information. Attempted to schedule a lunch or breakfast appointment but Maria said she was too busy to do that
PPLPMDL0020000001					
	Beachwood	OH	44122	2/1/2011	Spoke with Vickie to follow up on the Butrans discussion i had with her & Dr Yokiel. I asked if he had prescribed it yet & she said no. She said that she really wants him to start prescribing it because it seems like something that could really benefit some of their patients. Reminded her of appropriate patient types. She said that she is certain he will start prescribing it, it will just take a little time to "train" him to think of it. Let her know i would return again for follow-up.
PPLPMDL0020000001					
	Maple Heights	OH	44137	2/1/2011	Spoke with Kim to follow up on Butrans conversation. Asked her to confirm that they did receive Butrans & have it stocked. She checked their shelf & said they have one box of 5mcg/hr & one box of 10mcg/hr. I reminded her of the e-voucher & asked what additional questions she had. She said she had none. I reminded her of indication & appropriate patients.
PPLPMDL0020000001					
	Euclid	OH	44132	2/1/2011	Window Call.....introduced doc to Butrans, the indication, positioning, 3 strengths and 7 day application. He thought it sounded like a great product and would like to hear more. Scheduled lunch for 2/15/11. He asked about stocking - I explained that many area pharmacies will have it in stock. Reminded him of the oxycotin and ryzolt patient type and BWC coverage .
PPLPMDL0020000001					
	Cleveland	OH	44113	2/1/2011	worked pain management and physical medicine&rehabilitation dept-see call notes on Dr Shen and Dale Novak,PA
PPLPMDL0020000001					
	Cleveland	OH	44109	2/1/2011	i talked to Ray,Pharmacist,and found out Raban IS the Pharmacy Manager,so it was good i shared all of Butrans fpi with him yesterday.i talked to Ray about Butrans fpi,black box warning, 5 core messages,medication guide,patient instruction booklet and Butrans savings cards and asked if Ray and Raban,Pharmacy Manager,would order Butrans-all 3 dosage strengths and he said yes they would.Ray said once weekly dosing and transdermal application is much better for patients than getting 100 plus tabs a month of Vicodin or Percocet,so he's interested to see who starts prescribing Butrans.we talked about formulary coverage for Butrans and commercial plan patients using Butrans savings cards and i asked if i could follow-up in 2 weeks to see if any scripts have come through yet for Butrans and Ray said that would be fine.
PPLPMDL0020000001					
	Independence	OH	44131	2/1/2011	Spoke with Dr Faيمان's MA & substitute nurse regarding setting up an appointment with Dr Faيمان to discuss Butrans. They said that he sometimes will see some reps, but it has to be cleared & approved through him. I let them know the Butrans indication & they said that he does have patients who fit that indication so he may want to meet with me, especially if he has not heard of Butrans yet. I left my card & they said they would put a note on it to see if he would allow me to schedule a time to come in.
PPLPMDL0020000001					
	LAKEWOOD	OH	44107	2/1/2011	Spoke with Pam, we reviewed the Butrans FPI, indication, dosing, medication guide. She did have the 5 and 10mcg doses in stock. They do see scripts from Dr DSilva, Nageeb, Orra. Reminder about OxyContin as a option when Butrans may not provide adequate analgesia.
PPLPMDL0020000001					
	Westlake	OH	44145	2/1/2011	Dr Kabarra said that he would like to start prescribing Butrans in house and then maintain the patients after. He said that managed care is important at first and he wants it to be very simple for the patients. We reviewed the managed care and pharmacies where it is stocked. He said that he would like to get Butrans on formulary at the hospital.
PPLPMDL0020000001					
	Lakewood	OH	44107	2/1/2011	We reviewed the Butrans 5 key points. We reviewed the FPI and initiation guide. Dr said that he sees a lot of patients on vicodin and we discussed some of the patients who might be appropriate for Butrans. He said he would try Butrans but could not think of a specific patient. We reviewed managed care and the savings program. We discussed OxyContin as an option where Butrans may not provide adequate analgesia. I discussed the Butrans medication guide and savings program with the staff.
PPLPMDL0020000001					
	Westlake	OH	44145	2/1/2011	Spoke with Megan MA and Jenny RN. We reviewed Butrans 5 key points. I followed up with the patient that Dr Raslan wrote a script for on Friday. She said that the patient called yesterday (Monday) and had not yet filled the script but was going to fill it that day. Megan said they would call the patient in a few days to make sure they were able to initiate Butrans properly.
PPLPMDL0020000001					
	Warrensville Heights	OH	44122	2/1/2011	Stopped in and spoke with Jackie & Debbie regarding Butrans follow-up. They said Dr Shin has written Butrans. They said they have not heard any feedback yet, but that they have had no issues so far with coverage or finding it at pharmacies. Asked them to please keep me informed and updated with Butrans & let them know i would return to follow up again.
PPLPMDL0020000001					
	Cleveland	OH	44106	2/1/2011	worked oncology dept-left information for Dr.Silveran,Dr.Dowlati,Dr.Okolie and some other oncologists in dept,was told to try calling frank,Nurse supervisor,to set-up meeting with him and discuss products,patient education tools,etc..
PPLPMDL0020000001					
	Cleveland	OH	44113	2/1/2011	i talked to dr about Butrans fpi,black box warning,5 core messages,medication guide,instructions for use,patient information booklet,patient savings cards for commercial plan patients and Butrans REMS. I asked dr who he thought could benefit from Butrans,in his practice, and dr said he has a lot of patients on Vicodin and Percocet,that are dosing around the clock and more of that moderate pain so he would think of Butrans for them and see what clinical results they get from Butrans.i showed dr Butrans initiation guide,for opioid experienced patients and said 3-8 tabs of Vicodin a day is considered opioid experienced and that would be the patient you could start on Butrans,its that feasible for you to try Butrans in one patient? dr agreed saying that was fair and he would probably start a few patients to see the results.dr asked about medicaid and workers comp patients getting Butrans so we discussed formulary coverage on these plans,told dr i would follow-up next week
PPLPMDL0020000001					
	Bedford	OH	44146	2/1/2011	Spoke with Ebony briefly. She checked her system & shelf & verified that they do have Butrans in stock. She said they have one box each of 5mcg/hr & 10mcg/hr. Reminded her that Butrans is part of the e-voucher program. Let her know i would return for follow-up when she has more time.
PPLPMDL0020000001					
	Cleveland	OH	44113	2/1/2011	i talked to dr about Butrans fpi,5 core messages,medication guide,instructions for use,patient information booklet and patient savings cards.dr said the once weekly dosing and transdermal application were both benefits to patients but she has so many patients taking 3-8 tabs of Vicodin and Percocet that they won't be happy with her if she introduced something new let alone a patch.dr said majority of her patients rely on pills q4-6h and its a mental thing so they would be nervous if this medication would control their pain over course of week.dr asked if patients could take short-acting opioids while on Butrans.i said yes patients can take opioid or non-opioid medications during Butrans therapy and showed Butrans fpi with this information.i asked if dr could think of 1 patient who has workers comp,Anthem or Medco insurance where she felt their 3-8 tabs of Vicodin or Percocet werent working and perhaps Butrans could be an appropriate option? dr said she might
PPLPMDL0020000001					

PPLPMDL0020000001	Cleveland	OH	44114	2/1/2011	i talked to Laura,Pharmacist,about stocking of Butrans and she hadnt ordered any yet,as she was waiting to see a script first.i told Laura i had lunch with Dr.Boyd,Dr.Robson and Dr.Shen and all of them asked me who has this in stock and dont want patients waiting 24hrs to get Butrans,based on this conversation,Laura said she'll order all 3 dosage strengths of Butrans and i told her after my lunch with Dr.Katz,Dr.Marshall and John Stare,Physician Assistant on 2/14/11,i will stop and see her to be sure she has Butrans stocked,she agreed to this.i also gave Laura Butrans initiation/titration guide and patient information booklets.
	Cleveland	OH	44102	2/1/2011	i talked to Vince,Pharmacist,about Butrans fpi,5 core messages,medication guide,instructions for use,patient information booklet,butrans savings cards for commercial plan patients and formulary coverage for workers comp patients and Medicaid patients.Vince said once weekly dosing in a transdermal application is ideal instead of all the Vicodin and Percocet pills he's dispensing monthly to patients so he thinks there's a place for Butrans and we talked about more of the moderate pain patients starting on Butrans.i asked if he had any doctors in the area writing a lot of Vicodin and Percocet that i should talk to and Vince said Dr.Celeste,Dr.Talbot and Dr.Caron are the biggest prescribers but there are a lot of doctors from Metro hospital and Dr.Van Aukun writes a lot of short-acting opioids,so i told Vince i was working with all of them and would be sure they know of Butrans.i gave Vince the Butrans initiation guide and patient information booklet and Vince said i should leave a couple
PPLPMDL0020000001	Cleveland	OH	44113	2/1/2011	i talked to dr about Butrans fpi,black box warning,5 core messages,medication guide,instructions for use,patient information booklet,initiation guide and patient savings cards for commercial plan patients.dr said once weekly dosing and transdermal is a great option for his patients that he has dosing 4q-6h Vicodin or Percocet,as he doesnt like them popping pills all day/night so a transdermal is ideal in his mind. i asked dr if he could think of 2 patients that meet the indication for Butrans and are taking 3-8 tabs of Vicodin or Percocet that he could initiate treatment of Butrans 10mcg/hour? dr agreed saying he has a lot of those patients but will try Butrans in a couple people and let me know what happens.dr asked about Medicaid and workers comp patients so i explained coverage for these plans. i asked dr if i could follow-up in a week and see how things are going with patients getting started on Butrans,dr said that was fine
	BEDFORD	OH	44146	2/1/2011	Quick call- floater pharmacist was in & i was told she was too busy to speak with me. Confirmed with the technician that they do have Butrans in stock. She said they received one box each of 5mcg/hr & 10mcg/hr systems. Discussed e-voucher.
PPLPMDL0020000001	Cleveland	OH	44103	2/1/2011	i talked to dr about Butrans fpi,black box warning,5 core messages,medication guide,instructions for use,patient information booklet,initiation guide and patient savings cards for commercial plan patients.dr asked about workers comp and Medicaid coverage for Butrans so we discussed details for those patients.dr said he likes that Butrans is a once weekly dosing option and is transdermal as he has too many patients taking too many pills,so transdermal is ideal in his eyes. i asked if dr could think of 2 patients who are taking 3-8 tablets of Vicodin or Percocet this week,and taper them to 30mg oral morphine and start them on Butrans 10mcg/hour? dr agreed and i asked if i could follow-up end of week? dr said stop back next week
	Warrensville Heights	OH	44122	2/1/2011	Introduced Butrans to Dr Khalafi, delivering 5 core messages & reviewing box warning. I asked what patient type he would be more likely to prescribe Butrans for. He said he would use Butrans in opioid-naïve or opioid-experienced patients. Presented initiation guide & showed him how to initiate Butrans therapy with either patient type. He said he would prefer his patients be on a Butrans transdermal system than "pills all day". Reminded him that Butrans is not for everyone & reminded him of OxyContin for appropriate pts. He asked what managed care coverage was for Butrans. Discussed prior authorization for Medicare/Medicaid & commercial tier 3 status. Also explained savings cards for commercial insurance & cash pts. He said he would try Butrans on some patients & then walked away to see patients. Spoke with Iuliana & told her Butrans indication, dosing, & savings information. Also gave her initiation guide & let her & Debbie know i would be returning to follow up regarding Butrans.
PPLPMDL0020000001	Cleveland	OH	44113	2/1/2011	i talked to Dale about Butrans fpi,5 core messages,medication guide,instructions for use,patient information booklet,initiation guide and Butrans patient savings cards.Dale said once weekly dosing is much easier than short-acting opioids dosed around the clock and a transdermal application is ideal but the patients he treats for Dr.Shen are a tough patient population as majority of them like and expect to get their pills monthly,90-130 tabs a month of Vicodin or Percocet,so these patients may not want to get off their pills and try a patch.i asked Dale if he had 1 patient in mind who was taking 3-8 tabs of Vicodin or Percocet,that meets the indication,but is interested in a transdermal,once weekly dosing option? Dale said yes maybe 1 or 2 patients he'll have to think about it and we discussed formulary coverage for commercial plan patients,workers comp and Medicaid patients.
	Westlake Independence	OH	44145	2/1/2011	Spoke with Lisa, we reviewed Butrans as an option and she did not have any questions about it. She said that she would not order until a script comes in.
PPLPMDL0020000001	Westlake Independence	OH	44131	2/2/2011	Spoke with JT and followed up on Butrans stocking. He said that he still has them on his shelf. I let him know that i have started promoting Butrans in the area & that their location is one of the pharmacies i have told the offices are stocking Butrans. He asked if i was calling on Drs Jack & Robert Rutkowski- i told him that i am, but have not had enough time with either of them yet to really have a good discussion about Butrans. He said that he thinks if they "get on board", that Butrans will do very well. I let him know that i will continue trying. Initiation reminder for appropriate patients.
		OH	44144	2/2/2011	Dr Miguel was not in as scheduled due to snow/ice storm, so i spoke with MA Stephanie about Butrans indication, appropriate patients, and savings information. She said that she can think of several patients of Dr Miguel's that sound like they may be appropriate patients for Butrans. Also reviewed OxyContin savings cards which she said she had just given to a patient within the last week.
PPLPMDL0020000001	Brooklyn	OH	44144	2/2/2011	Introduced myself & Butrans to Debbie (pharmacist). She verified that they had, in fact, received two boxes of each strength of Butrans. I reviewed with her indication, appropriate patients, dosing, initiation of treatment. I asked what additional questions she had, but she said she had none. I asked who in the area she would recommend me call on or who would be interested in Butrans & she recommended Dr Zaidi. She said he was the only one she could think of. Let her know i would be following up to ensure everything was running smoothly with Butrans transactions.
	Solon	OH	44139	2/2/2011	Introduced myself & Butrans to Eve. She said that she had noticed that they received it, but she wasn't sure what it was. I reviewed with her the indication, appropriate patient types, medication guide & dosing. Also discussed CIII, abuse potential. She said that she thinks it is great to have something to replace Vicodin for the appropriate patients & that she would like to have to carry less of a supply of Vicodin & Percocet. Let her know i would be following up with her to make sure everything was going through smoothly & to see if they had any questions.
PPLPMDL0020000001	Macedonia	OH	44056	2/2/2011	Window call.....asked doc what success he has had with Butrans this week. He said he has not had a chance yet. I reminded him that he prescribe for opioid naïve or those on low dose vicodin. He just said ok. Asked him to give patients a savings card.
		OH	44124	2/2/2011	Introduced Butrans to Ellen- reviewed indication, once every seven day application, CIII, dosing, appropriate patients. I asked if she would place an order so that she has it ready when patients come in with prescriptions but she said she will not order new product without a prescription. Asked if she would order just one box of 5mcg & 10mcg doses since they are the starting doses, but she still said no.
PPLPMDL0020000001	Solon	OH	44139	2/2/2011	Brief call to introduce Butrans. Discussed the indication, positioning, 7 day application, CIII status. She had to leave for the hospital but said she would review the info later. Left FPI and initiation guide.
	Mayfield Heights	OH	44124	2/2/2011	Quick call.....introduced doc to Butrans by discussing the indication, positioning, 7 day application and CIII status. She asked about coverage. I explained commercial status and the savings cards. She asked how it differs from fentanyl. I explained the different molecules and the 7 application of Butrans. She asked me to leave information. Left FPI.
PPLPMDL0020000001	Brooklyn	OH	44144	2/2/2011	Quick call with Dr Detwiler. Butrans indication & seven days of buprenorphine in one application messages. He said he would like to discuss it further at a lunch. He said he was trying to get finished with his patients so that he could get out of the office early today. I reminded him of OxyContin savings cards as well. Also spoke with Tiffany about Butrans indication & OxyContin savings cards.
	Mayfield Heights	OH	44124	2/2/2011	Discussed the Butrans indication, positioning, dosing, trials in opioid naïve and experienced patients, application/disposal. She wanted to know about the cost/coverage. I went over the commercial coverage, 3rd tier and, savings cards program. She was excited and was glad that there are more options. She also liked the idea of 7 day application. She said she definitely has patients that would be appropriate. Reminded her of the ryzolt and oxycontin patient types.
PPLPMDL0020000001	Lakewood	OH	44107	2/2/2011	We reviewed the Butrans FPI, indication, warnings, dosing. He said that will not prescribes more than 4 short acting opioids per day for patients. If patients are still needing more pain relief, he will convert them to a long acting. He thinks that Butrans will be a great option for these patients and he said he would like to try in in the next week. He would be more likely to prescribes Butrans for a patient already on opioids. He said he likes that it is a once a week dose. I reviewed managed care and the Butrans savings program. I also reviewed this with his MA Dawn. We discussed OxyContin for patients when Butrans may not provide adequate analgesia, he said he does have many patients who are past the point of Butrans and would be more appropriate for OxyContin instead.
	Mayfield Heights	OH	44124	2/2/2011	Spoke to Shirsha about the launch and stocking of Butrans. i discussed the patient positioning. Asked her if she received a shipment of butrans. She looked and confirmed the 5 and 10mcg boxes. i explained the savings card program and the participation in Relay health.
PPLPMDL0020000001	Cleveland	OH	44109	2/2/2011	worked oncology dept-left business card,Butrans FPI and initiation/titration guide for Butrans for Dr.Snell,Dr.Wagamon and Dr.Hergenroeder as you have to have an individual appointment with each doctor so i had to leave this information in the out-patient center and Debbie,front desk receptionist,said she'll pass the info to the medical secretaries.Diane Wolfe,Nurse Supervisor in Oncology,wasnt available to see me today but did get Butrans fpi and is going to call me for an appointment.Worked Neurology dept-out-patient center-had to leave business card and Butrans fpi and initiation guide for Dr.Hanna(Chairman of dept) and Dr.Winkelman as Ruth Hassig,medical secretary for Neurology dept said policies havent changed with doctors,no appointments unless they call me,no lunches,etc..Worked Rheumatology dept-left Butrans fpi and initiation guides for Dr.Khan,Dr.Ballou and receptionist said to stop back friday about booking a lunch with attendings and residents
	Bedford	OH	44146	2/2/2011	Reviewed 5 core Butrans messages. He asked how it is dosed & where pts should apply Butrans. Reviewed pt information book & initiation/titration guide. He asked if he could have a pt wear one 5mcg & one 10mcg system at the same time to achieve a 15mcg/hr dose. I told him we have no data studying use like that & that we recommend that only one Butrans be worn at a time. He said he understood. He asked what plasma concentration was over the week, so i reviewed FPI 12.3. He asked if it was a reservoir system-I told him it was not & that it is an adhesive matrix & showed FPI 11. Also reviewed 5.4 regarding QTc interval prolongation incr risk with doses 2 x 20mcg/hr. He said he felt that Butrans is less addictive than other opioids. I insisted Butrans carries all same risks as other opioids with respect to abuse/addiction potential. He asked about managed care coverage- reviewed savings information & prior-auth which Amber said she does. Dr M said he would Rx Butrans instead of Vicoden ATC
PPLPMDL0020000001	Cleveland	OH	44114	2/2/2011	i asked dr if we could talk about a product that is an addition to our pain management portfollo and dr said if its new,i had to wait until lunch as she didnt have sufficient amount of time to talk to me about it today,dr asked what was the name of the product so i told her Butrans and 5 core messages. dr was very interested and said when i have lunch 2/14/11 we can talk about it in depth as she has patients in mind already because so many patients are taking Vicodin and Percocet around the clock and not compliant with dosing regimen and still complain of being in pain.i asked dr to consider OxyContin for those patients on 80mg or more of oral morphine equivalent,with 7 tablet strengths available for dosing flexibility and its available to her commercial plan patients,medicaid and workers comp patients.recommended Senokot-S
	Cleveland	OH	44120	2/2/2011	i talked to dr about Butrans fpi,Score messages,medication guide,instructions for use,patient information booklet and formulary coverage as dr asked about Medicaid coverage for Butrans,biggest patient population here,so i explained Prior Authorization process for those patients to get Butrans.i asked dr what clinical benefits she saw in Butrans? dr said the once weekly dosing and transdermal application is significant as she doesnt like giving so many pills a month of Vicodin and Percocet so this is a good option as long as patients can get it.i asked dr to consider 1 patient,taking 3-8 tabs of Vicodin or Percocet a day to try Butrans in and i will follow-up next week to see how things are going,dr agreed and i recommended OxyContin as an option for patients taking greater than 80mg oral morphine equivalent and gave conversion guide.recommended Senokot-S
PPLPMDL0020000001	Mayfield Hts	OH	44124	2/2/2011	Introduced doc to Butrans - indication, positioning, dosing, boxed warning, application/disposal. He said he heard something about it and he heard from Warren at the Atrium pharmacy. I told him that he ordered Butrans. He asked about AE's, referred to that section of the FPI. He was concerned about coverage. I reviewed the coverage and the savings cards program. He said he would likely use for opioid naïve patients. He asked about the delivery system. I explained it was matrix. He wanted to know about the clinical trials and steady state. I went over the 4 trials and explained the steady state after 72 hrs. He liked the idea of Butrans as there is nothing like it. He wrote a script while i was there....for a medicare patient with supplemental insurance. Reminded him that a PA may be required. He said he would just see if it goes through. Oxycontin and ryzolt patient reminders.

PPLPMDL0020000001	Cleveland	OH	44114	2/2/2011	i talked to dr about Butrans fpi,5 core messages,medication guide,instructions for use,patient information booklet,initiation guide and formulary coverage for workers comp,Medicaid patients and commercial plan patients being able to use the Butrans patient savings cards.dr said transdermal application and once weekly delivery are huge benefits in his eyes as he struggles with giving so much short-acting medication to patients.dr said he has a few patients in mind who cant swallow pills and this would be a great option for them too.i asked dr to focus on more moderate pain patients,taking 3-8 Vicodin or Percocet a day,and starting them on Butrans 10mcg/hour.dr agreed and said to check in with him next week.i asked dr to consider OxyContin,once patients are taking 80mg oral morphine equivalent and with 7 tablet strengths he had flexibility in dosing for patients and we discussed formulary coverage for OxyContin.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44104	2/2/2011	dr didnt have time to discuss a product,like Butrans,as he asked if it was "new"? i told dr we hadnt discussed Butrans in the past as its an addition to Purdue's pain management portfolio,so dr asked if we could talk about it more in depth next week at lunch.i said that was fine.i asked dr to consider OxyContin when patients are at 80mg oral morphine equivalent,as he has 7 tablet strengths of OxyContin to allow for flexibility in dosing and its available at UHC/AAR-Med PartD,at lowest branded co-pay and commercial plan patients can use OxyContin savings cards,dr said he does prescribe a small amount of OxyContin for his elderly patients so he'll remember what i said about insurance coverage.i recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44120	2/2/2011	i talked to dr about Butrans fpi,5 core messages,medication guide,instructions for use,patient information booklet,formulary coverage-Medicaid,workers comp and commercial plan patients that can use Butrans savings cards.i asked dr what he thought the clinical benefits were for his patients when choosing Butrans? dr said he writes a lot of tramadol,so this would be a great option for patients who arent controlled on short-acting tramadol or arent compliant with around the clock dosing of tramadol,he would consider Butrans for them.dr said once weekly dosing and transdermal delivery are ideal in his eye so he would try Butrans in 1 or 2 patients and let me know what happens.we discussed Butrans REMS program too and i recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44114	2/2/2011	i talked to John,PA,about Butrans fpi,5 core messages,medication guide,instructions for use,patient information booklet,Butrans patient savings cards and John said transdermal is ideal in his mind as so many of their patients (he works with Dr.Katz and Dr.Marshall) are taking Vicodin or Percocet every day around the clock and he doesnt think that regimen is managing these patients pain.John said once weekly dosing is also more convenient than patients having to dose q4-6h of short-acting opioids,so he see's a place for Butrans.John asked about workers comp coverage as thats a large population here so we discussed that for Butrans,medicaid requiring a Prior Authorization and commercial plan patients using Butrans savings cards.John said he'll think of a few patients to talk to about Butrans and asked me to follow-up next week and he'll give me feedback.i recommended Senokot-Reminded doc of our lunch last week and asked him where he has used it. He asked me to tell him again where he should prescribe it. I read the indication and discussed the patient positioning. He said ok and that he would find a patient. Reminded him of the oxycontin patient type as well.
PPLPMDL0020000001	Cleveland Heights	OH	44118	2/3/2011	Quick call with Dr Sundaram. He said he had not yet prescribed Butrans but that he had not forgotten it. He pointed out that he still even had the savings cards I gave him on his counter by where he does his notes. He said he is just waiting for the right patient & then he will prescribe it. Spoke with Terri & June who both said that they think that Dr Sundaram has a lot of patients that could benefit from Butrans.
PPLPMDL0020000001	Independence	OH	44131	2/3/2011	Spoke with Mario (PharmD), who manages several of the Marc's Pharmacies in the area. He confirmed that this location is stocked with Butrans & that he actually saw a prescription for Butrans come through at the Marc's located across from Fairview Hospital. Discussed indication, one application delivers seven days of buprenorphine, & appropriate patients. He asked if Butrans can be prescribed by physicians who are not pain specialists. I told him that anyone who treats patients who fit the indication of moderate to severe chronic pain could prescribe Butrans. He thanked me for the information & let him know I would return to follow up with their regular
PPLPMDL0020000001	Parma	OH	44134	2/3/2011	Dr Trickett stated that the patient who she started on Butrans complained of nausea after starting Butrans. She said that she told him to stay on it for a few days to see how he does with it after time. She said that the patient asked her for Opana, but she wanted him to stay on Butrans to see if the nausea subsided. She has not heard back from the patient so far. I asked if that would prevent her from trying Butrans on any other patients & she said it would not, and that this patient has been somewhat difficult for her to treat so far with anything, so she was not alarmed at his complaint. Indication reminder & asked her to try it for another appropriate patient which she said she would.
PPLPMDL0020000001	Parma	OH	44134	2/3/2011	Spoke with Erika who confirmed that they did receive a shipment of Butrans. She said that they may have even filled a prescription but she was not entirely sure. Reviewed with her the indication, appropriate patients, dosing, initiation of treatment, & the medication guide for advising patients. She asked if Butrans could be prescribed for patients in pain due to fibromyalgia. I told her that the full prescribing information only states that Butrans is indicated for moderate to severe chronic pain but does not specify any etiologies. She said she really feels there is a place for Butrans in the marketplace & she also said that she thinks that patients will find a once per week dose of a pain medication "convenient". Let her know I would return to check in.
PPLPMDL0020000001	Beachwood	OH	44122	2/3/2011	Spoke with Shelly (MA) about Dr Tabbaa's interest in Butrans since I left him information. Discussed patient information booklets & walked her through how savings cards work. Also let her know that they are for commercial insurance patients only & that patients with government insurance, including Medicaid & Medicare Part D cannot use the cards. Also gave brief Butrans overview (indication, appropriate patients) & scheduled first available lunch as Dr Tabbaa requested. I also gave her my card & told her to call me if they have any questions or if they run out of savings cards or patient info booklets.
PPLPMDL0020000001	Stow	OH	44224	2/3/2011	Spoke to Cory and he said he has not recieved Butrans in. I reviewed FPI, and dosing and administration card, indication, boxed warning, managed care coverage. I told him that Dr Bressi wanted it stocked because he will be writing. HE said he will get it in.
PPLPMDL0020000001	cleveland	OH	44135	2/3/2011	Spoke with nurse, Jim, Randy and both Drs were in a meeting and could not talk. We reviewed Butrans 5 key points and the medication guide. Cheryl will talk to Drs to see if I can schedule an appointment.
PPLPMDL0020000001	University Hts	OH	44118	2/3/2011	Introduction to Butrans. Its indication, scheduling, patient positioning, and 7 day delivery in one application. He said not right now. Nothing learned. Left Butrans FPI.
PPLPMDL0020000001	Cleveland	OH	44113	2/3/2011	worked pain management dept-see call notes on Dr.Daoud and Dale,Physician assistant,as i had lunch with office today,worked out-patient pharmacy
PPLPMDL0020000001	Brook Park	OH	44142	2/3/2011	Spoke with Ashley, she had no time today and not interested in hearing about Butrans. I left her the information. I spoke with Mike the tech and we reviewed the 5 key points.
PPLPMDL0020000001	Mayfield Heights	OH	44124	2/3/2011	Spoke to Hillary about the recent launch of Butrans and the stocking. I discussed the indication, strengths, 7 day application, CII, and the savings program. She asked if Hillcrest Pain Mgmt knows about it yet. I told her yes and that Dr. Laham has already prescribed it. I asked her to order a box of each. She said she would let Bill know to order it.
PPLPMDL0020000001	Chagrin Falls	OH	44022	2/3/2011	Only got a brief introduction with Dr Hudson who came in to the lunch room to grab food & then left. Had time to introduce myself & Purdue's products. She said that Dr Rood is the only physician who will talk to reps. Dr Rood then told the other physicians in the practice about the products that the reps detail him on. Left information with Sue (nurse) & discussed Butrans savings cards with her.
PPLPMDL0020000001	Cleveland Hts	OH	44118	2/3/2011	Quick call....doc said he has not had an opportunity to prescribe Butrans yet and wanted a reminder of the coverage. Told him about the commercial coverage and the savings along with the savings cards and that BWC is also paying. Gave an initiation guide and discussed the patient type. Offered oxycontin savings cards. None needed.
PPLPMDL0020000001	Berea	OH	44017	2/3/2011	Quick call, Dr said he has a patient in mind and will give Butrans a try. No new info gained.
PPLPMDL0020000001	Brookpark	OH	44142	2/3/2011	We reviewed the Butrans FPI, indication, dosing, and medication guide. We discussed the managed care for Butrans and the savings cards. Dr asked where Butrans fits in vs OxyContin and we reviewed the indications and initiation guide for Butrans. Dr said that he just saw a patient who might have been good to try Butran on but he is not sure when he will see that patient again. He said he will think about it and see if it will fit into his practice. Reminder to recommend Senokot 5 for his patients on opioids.
PPLPMDL0020000001	Mayfield Heights	OH	44124	2/3/2011	Spoke to Marsha about the stocking of Butrans. Reminded her that we talked about Butrans recently. She confirmed that they were auto shipped and that she has 2 boxes of all three strengths. I discussed the indication and positioning, the savings cards program. Also told her that Hillcrest Pain mgmt is on board and they will be prescribing. Offered the FPI and initiation guide but she said she didnt need it.
PPLPMDL0020000001	Cleveland	OH	44113	2/3/2011	i talked to dale,PA,on tuesday,with Dr.Shen,so he heard about Butrans fpi,5 core messages,so i told Dale 5 core messages again and asked Dale if he had thought of Butrans for any patients since tuesday? dale said no he hadnt thought of Butrans,he said dr.shen see's 60patients on average/week,he see's 10-15 of her patients and he only had 1 person in mind that had a hard time swallowing pills,that would be someone he would start on Butrans.i asked dale on average,how many patients ask for a new medication,or change in medication,daily,he said dr.daoud's patients are 15-20 week and maybe only 1/week or every other week ask for medication change,but dr shen has 10-15 patients DAILY that ask for medication change and these are people taking vicodin,percocet,tramadol,codeine,so i asked him to think of 1-2 of those patients to try Butrans and let me know what clinical results they see.dale said that was fair and would do that.recommended Senokot-5
PPLPMDL0020000001	University Heights	OH	44118	2/3/2011	Spoke to Ted about the Butrans stocking. They were not currently stocking it. I explained the indication, positioning, dosing, and the saving cards program. He said he heard a little bit about it and he asked who is writing it. I explained that we just launched about 2 weeks ago but we are targeting primary care and pain mgmt. I explained the 7 day wear and the application and disposal of Butrans. I asked him to order a box of the 5 and 10mcg. He said he would wait to see if he gets a script.
PPLPMDL0020000001	Cleveland	OH	44135	2/3/2011	Spoke with nurse, Jim, Randy and both Drs were in a meeting and could not talk. We reviewed Butrans 5 key points and the medication guide. Cheryl will talk to Drs to see if I can schedule an appointment.
PPLPMDL0020000001	Parma	OH	44134	2/3/2011	Got a quick call with Dr Scanlon at the window. I asked what his experience has been so far with Butrans. He said that he has not prescribed it yet. He said that he still thinks that it is "a great idea" and that he will write it, he just has not had the opportunity to prescribe it yet. He also remembered the savings cards & said that he will be giving them to his patients with commercial insurance. He assured me again that he will be prescribing Butrans.
PPLPMDL0020000001	Brookpark	OH	44142	2/3/2011	Dr was sitting in on my conversation with Dr Keppler regarding Butrans. We reviewed the Butrans FPI, indication, dosing, warnings and medication guide.
PPLPMDL0020000001	Brookpark	OH	44142	2/3/2011	We reviewed the Butrans FPI, indication, dosing, warnings, medications guide, managed care and savings cards. We reviewed OxyContin as an option where Butrans many not provide adequate analgesia. We discussed Senokot 5 for medication induced constipation.
PPLPMDL0020000001	Cleveland	OH	44106	2/3/2011	worked pain management dept-met dr.hayek's new medical assist,Kim and Lisa,Patient care coordinator who takes ALL medication refill requests daily and has been in pain management for 2yrs,i discussed Butrans fpi,medication guide,patient information booklet,Butrans savings cards for commercial plan patients,medicaid patients needing Prior authorization and workers comp patients.i talked to dr.hayek,so see call notes.BOTH Kim and Lisa said Butrans is a great option for patients who are taking Vicodin,Percocet and they have a lot of people on tramadol that they feel could benefit from Butrans,being on that moderate pain level.I booked a lunch in March with dept and they said to follow-up next wednesday as Dr.Khalil and Dr.Saghal are both there with Dr.Hayek, worked pharmacy and met with Wes Busch,PharmD and Cheryl Woods,Narcotics Buyer.
PPLPMDL0020000001	Stow	OH	44224	2/3/2011	Spoke to Micheal and reviewed Butrans, FPI, indication, boxed warning, dosing and administration. HE said he got the 5 and the 10mcg. Said they dont see alot of Oxycontin and never see Ryzolt scripts. Discussed Sen5 for recommendation in opioid induced constipation
PPLPMDL0020000001	Parma	OH	44129	2/3/2011	Re-introduced Butrans to Dr Gigliotti, delivering 5 core messages & discussing box warning. He asked how it compared with Duragesic. I told him we do not have comparative data & presented initiation guide, pointing out pg 6. He asked if it could be used for someone for a short time of time, such as one week. I told him that our indication is for moderate to severe chronic pain & that Butrans should not be used for a pt who was in pain for a short period of time. Discussed appropriate pt types. I asked his thoughts & where he thought he could use Butrans. He said he sees pts who have chronic low back pain who take 3 Vicodin per day that he thinks may be good candidates for Butrans & asked if he could keep initiation guide. Discussed mgd care/savings. He said he just adopted a new policy of no prior-authorizations. I asked if I could follow up for feedback-he said to come back next wk. Also reminder for OxyContin for appropriate pts. Discussed managed care & savings cards with Jazz.
PPLPMDL0020000001	Stow	OH	44224	2/3/2011	Introduced Butrans, reviewed FPI, indication, boxed warning, dosing and titration. Answered questions in FPI regarding use in renal, hepatic, metabolism, excretion, receptor sites. Reviewed managed care coverage and savings cards with him and the staff. HE said he really likes it and thinks it will be a huge part of his practice. HE mentioned the reformulation of Oxycontin and he would like to know more the next time we talk.
PPLPMDL0020000001	Stow	OH	44224	2/3/2011	Introduced Butrans, reviewed FPI, indication, dosing and titration, 5 core messages. HE said he spoke to someone at a convention from Purdue and liked what he saw about Butrans. HE said this is definately something he can write, it needs to be on the NP formulary first. I asked if he can write it under the Drs name and he said yes. Reviewed managed care coverage and savings card program

	Stow	OH	44224	2/3/2011	Introduced Butrans, reviewed FPI, indication, boxed warning, dosing and titration. HE said he really likes it, he asked about coverage and I told him the plans it is covered in and he said it is different as a pharmaceutical company to say thigs are covered than the actual office experience when things are not covered because of individual plans. I told him we get information at a national basis but understand that companies will taylor them. HE said he will try it.
PPLPMDL0020000001	Cleveland	OH	44113	2/3/2011	talked to dr about Butrans fpi,5 core messages,medication guide,patient information booklet,savings cards for commercial plan patients.dr said once weekly delivery of medication is much easier than taking pills every day and transdermal delivery is ideal in his mind.dr said he doesnt prescribe Vicodin or percocet,but does start a lot of patients on tramadol,so i showed dr Butrans initiation/titration guide looking at opioid experienced patients taking 300-400mg tramadol,thats where he can try Butrans in these patients,dr said taht seemed easy and would try it in a few patients and let me know what clinical results he see's from Butrans.we discussed Butrans coverage for commercial plan patients,medicaid needing prior authorization and workers comp patients.told dr patients above 80mg oral morphine equivalent can convert to OxyContin,7 tabs available for flexibility in titration,and Ryzolt is an option if patients are stabilized on tramadol but he wants long-acting tramadol
PPLPMDL0020000001	Cleveland	OH	44113	2/3/2011	i talked to dr about Butrans fpi, 5 core messages,medication guide,patient information booklet and Butrans savings cards.dr asked if Butrans was an agonist/antagonist? i explained that Butrans is a partial agonist at the mu opioid receptors and referred dr to section 12.1 Mechanism of Action.dr was wondering if he had a patient on Butrans and OxyContin or another long-acting if the affinity was stronger or weaker and would Butrans bind so tightly to the receptors that it would knock the OxyContin off the receptor,hence precipitating withdrawal in patients,i showed dr section 2.2.initiation of therapy,Butrans fpi,noting there is potential for buprenorphine to precipitate withdrawal in patients already taking opioids,so dr said ok if i start patients on Butrans then i can give them a short-acting opioid,correct? i told dr yes he can and showed dr section 2.4-maintenance of therapy.dr said he has patients taking Vicodin,tramadol,where he would consider Butrans as an option and some
PPLPMDL0020000001	Brook Park	OH	44142	2/3/2011	Spoke with Doug, we reviewed the FPI and medication guide for Butrans. He is concerned that Butrans may not stick for 7 days since other patches have had problems with adhesion. We reviewed what to do if the edges come up or if the patch falls off per the FPI. they have the 5 and 10mcg doses in stock. they did get a script of Butrans last week, he did not know how wrote it. We discussed OxyContin as a Q12hr dose when Butrans may not provide adequate analgesia. Reminder about Ryzolt as a once a day dose and asked him to recommend Senokot S with opioids.
PPLPMDL0020000001	Brook Park	OH	44142	2/3/2011	We reviewed the Butrans FPI, indication, warnings, dosing, medication guide managed care, savings cards. Roman said he would like to talk to other pain management Drs about Butrans and would be very interested in attending a speaker program if we have any in the future. He is not quite sure where Butrans will fit into his practice yet. Reminder about OxyContin as another long acting option where Butrans may not provide adequate analgesia. We discussed Senokot S for medication induced constipation and he would like samples.
PPLPMDL0020000001	Cleveland	OH	44106	2/3/2011	i talked to dr about Butrans fpi,5 core messages,medication guide,instructions for use,patient information booklet,butrans savings cards for commercial plan patients,workers comp coverage and medicaid patients needing prior authorization-talked to Lisa,who does all prior authorizations and takes all medication refill requests.dr said once weekly dosing and transdermal delivery are ideal for patients and he has so many patients on tramadol and vicodin,that he would like an option like this so he'll try it in a few patients and let me know.i asked dr if i could follow-up next wed,to speak with him and kim,his med assistant,to be sure everything is working smoothly.dr said that was fine.told dr when patients are above 80mg oral morphine equivalent,OxyContin is an option,with 7 tablet strengths and lowest branded co-pay for his commercial plan patients and medicaid patients pay \$2.00 at pharmacy.recommended Senokot-s
PPLPMDL0020000001	Euclid	OH	44119	2/3/2011	Introduced doc to Butrans indication and patient positioning. I explained the 7 application and one Butrans delivers 7 days of Burprenorphine - available in three strenghts. He asked what class it is in. I told him CIII - can be refilled and called in but still has warnings for addiction/abuse/diversion. Scheduled a lunch for further discussion.
PPLPMDL0020000001	Euclid	OH	44117	2/3/2011	Window Call.....introduced doc to Butrans discussing the indication, studies in opioid naive and opioid experienced patients. Talked about the 3 strengths and each butrans delivers 7 days of Buprenorphine. He said, "oh wow" aand asked if it really works for 7 days. I told him that pain scores were improved in clinical trials. He asked if its covered on BWC. I explained that Butrans is being paid for by BWC as is oxycontin and ryzolt. Gave him an FPI and initiation guide. He said he would look at it.
PPLPMDL0020000001	Brook Park	OH	44142	2/3/2011	Spoke with Hassan, we reviewed the Butrans FPI and medication guide. He has already read about Butrans. He had questions about the reformulation of OxyContin and we reviewed the field card and updates in the OxyContin FPI. Reminder about Ryzolt as a once a day option and asked him to recommend Senokot S with opioids.
PPLPMDL0020000001	Parma	OH	44134	2/3/2011	Spoke with Dan (floater pharmacist) & Judy (technician) about Butrans. Asked if they had received their shipment. They checked the shelf & did not have it so I asked them to check their computer to see if they never received it or if it was missing because it had been dispensed. Judy looked in their system & she said they had never received it. I let them know that they should have been auto-shipped & that I would investigate to find out how this can be remedied.
PPLPMDL0020000001	Chagrin Falls	OH	44022	2/3/2011	Dr Rood told me he had two related pts with a rare genetic disease who took OxyContin reformulation, & because of poor metabolism due to their condition, were unable to tolerate the reformulated OxyContin & were in "severe pain" while on it. One of the pts, a 27 year old male, was switched to Duragesic, & died three days later. I told Dr Rood that I needed to report this & he said he already had & that he has already filled out a lot of paperwork about this & would prefer not to be contacted regarding this same issue again. Reviewed reformulation field card & he said he had no further questions. Introduced Butrans & delivered 5 core messages. Reviewed FPI sections 2.1, 2.2, 2.4, 6.1, 8.5, 11, 12.3, medication guide, & box warning in response to him asking about adverse events, layers of the patch, plasma levels over 7 days, use in geriatrics, initiation of treatment, & use of supplemental analgesia. Also covered mgd care/savings. He said he does see a place for Butrans & is interested
PPLPMDL0020000001	Warrensville Heights	OH	44122	2/4/2011	Spoke with MA's Lucy & Kim at length about Butrans. Reviewed with them Butrans indication, appropriate patients, application, rotation, heat warning, adhesion, dosing, & managed care/savings. Kim asked about a patient who has chronic pain due to arthritis and is currently taking 3 Ultram per day. Showed her initiation guide. Told her that because Butrans is an opioid, it does carry the same risks of abuse & addiction that other opioids have. She said that many of the patients that Dr Mader & Dr Gupta see fit the Butrans indication & she feels that they will be interested in hearing more about it.
PPLPMDL0020000001	Rocky River	OH	44116	2/4/2011	Spoke with Leigh Ann, she has not seen any scripts for Butrans and they will not stock until scripts come in. She said that they don't get a ton of pain patients but they will order within a day for any patients. Reminder of the appropriate patients for Butrans and then OxyContin when Butrans may not provide adequate analgesia. Asked to recommend Senokot S with opioids.
PPLPMDL0020000001	Westlake	OH	44145	2/4/2011	Dr had not yet prescribed Butrans, but said he might have a few patients in mind to give it a try. We reviewed the appropriate patients for Butrans and i asked him to just think of 2 patients. Reminder about OxyContin when Butrans may not provide adequate analgesia.
PPLPMDL0020000001	Lakewood	OH	44107	2/4/2011	We reviewed Butrans FPI, indication, warnings, dosing, and appropriate patients range. He does think that he can find a few patients to try but did not know of any specific patients. Dr asked about the OxyContin reformulation and we reviewed the field card and the updates in the OxyContin FPI. Reminder about Ryzolt as an option and asked to recommend Senokot S with opioids.
PPLPMDL0020000001	Lyndhurst	OH	44124	2/4/2011	Asked Patricia if she had found an appropriate patient for Butrans in the past week. She said that Karen had prescribed it but she had not. I showed her the initiation guide and the appropriate dosing for opioid naive and opioid experienced patients both. She asked for a REMS packet like the one Dr. Reed received. Provided one to her and Karen Steffey.
PPLPMDL0020000001	Independence	OH	44131	2/4/2011	Quick follow up call with Dr Pal. He said he has only been in the office one and a half days since we last spoke about Butrans. He said he does have several patients in mind to start on it, but he has not seen them yet. Reviewed indication & appropriate patient type. He said he is sure he will write it, it is just a matter of when those patients come to his office.
PPLPMDL0020000001	Beachwood	OH	44122	2/4/2011	Introduced myself & Butrans to Dr Rastogi, delivering 5 core messages & box warning. Dr Rastogi said he has been aware of Butrans for a long time because he has used it in India. He said in addition, his wife works at Cleveland Clinic's main campus and she told him about it being available in the US now. He said he is very familiar with it. He got called to the hospital so we were unable to finish our conversation. Spent time with his MA's (Kim, Tiffany, Lucy, Tammy, & Jacque), discussing indication, appropriate patients, dosing, initiation of treatment, savings program, & managed care. Also spoke with office manager about Butrans. Ruth & Kim said they really think that Dr Rastogi will use Butrans because he has many patients who fit the indication & also he typically likes to use newer medications. Let them know I would return to follow up on feedback regarding Butrans.
PPLPMDL0020000001	Hudson	OH	44236	2/4/2011	Spoke with Beth and confirmed that Butrans was received & is stocked at that location. Discussed savings cards, indication, appropriate patients. She said she does see a place for it, but that we will have to see how the doctors receive it. I let her know that I have appointments with some of the area physicians & am getting info to as many as I can. She did not have any specific recommendations about who may be interested in hearing more about Butrans. Let her know that I would be back to follow up & make sure that everything is going smoothly with prescriptions for Butrans as they come in.
PPLPMDL0020000001	Shaker Heights	OH	44122	2/4/2011	Spoke with Fien (pharmacist) who confirmed that Butrans 5mcg was on their shelf. I reviewed with her Butrans indication, appropriate patients, dosing, one Butrans= seven days of buprenorphine delivery, e-voucher. She said she thought that the once every seven day dosing was "unique" and she said she thinks that patients will like that as an option to treat their pain. I asked who in the area she thinks would be interested in hearing more about Butrans, but she did not have any recommendations. Gave her my card & asked her to call me if they have any questions.
PPLPMDL0020000001	Hudson	OH	44236	2/4/2011	Introduced myself & Butrans to Dr Seiple. Delivered 5 core messages. He asked if it could be used for the treatment of drug addiction. I told him Butrans has no indication for the treatment of drug addiction. Discussed appropriate patients. He asked if it was like Duragesic. I told him we have no comparative data & showed initiation guide pg 6. Walked him through the table for starting both types of patients (opioid-naive & opioid-experienced). He said he liked that it is once every seven days & also that it is a CIII. He said he can see using it in patients who were previously on Darvocet. He asked about managed care coverage/cost. I asked how much commercial insurance he sees & he said "a ton". I presented savings cards & explained how patients with commercial insurance (not government insurances like Medicare & Medicaid) would use the card & obtain Butrans for a \$15-\$20 co-pay. He said he would try Butrans on some patients. Thanked him & let him know I would follow up soon.
PPLPMDL0020000001	Cleveland	OH	44109	2/4/2011	i talked to dr about Butrans fpi,5 core messages,medication guide,patient information booklet and Butrans patient savings cards.dr said he doesnt write a lot of narcotics,maybe some Vicodin and a little Percocet for patients,so he's not sure he has a lot of patients he can start on Butrans that are opioid experienced,so i asked dr if he see's opioid naive patients or patients taking 1-2 tabs Vicodin or Percocet daily? dr said yes.i asked dr to think of Butrans for those patients and just try Butrans in 1-2 patients and let me know how this works for them.dr agreed and asked about insurance coverage for medicaid patients as thats the majority at metro.explained to dr medicaid patients needing prior authorization,workers comp coverage and commercial plan patients using Butrans savings cards,dr said that was fine and he would think of 1-2 patients.recommended Senokot-S
PPLPMDL0020000001	Bedford	OH	44146	2/4/2011	Followed up with Oleg regarding Butrans. I let him know that I had spoken with Dr Moufawad & that he indicated that he will be prescribing Butrans. Oleg asked what I felt the most popular doses would be. I told him that the 5mcg & 10mcg were the two starting doses depending on what type of patient it was. He said he would order 1 or 2 boxes of both the 5 & 10mcg. He actually punched in the order while I was standing there.
PPLPMDL0020000001	MAYfield Heights	OH	44124	2/4/2011	Spoke to Jesse to confirm stocking of Butrans. He checked and confirmed that he received the 5 and 10mcg boxes. I talked about the indication and the appropriate patient types. Told him that the pain mgmt clinic in the area has started to write prescriptions. I also let him know about the savings patients will get through the relay health evoucher program. He asked if the patch stays on for 7 days. I told him it should with a little care and I explained how to secure it if necessary.
PPLPMDL0020000001	Lakewood	OH	44107	2/4/2011	Dr said he had not tried Butrans yet as he just moved to his new office space, but said he will give it a try in some of those patients they were thinking about the last time we spoke. I reviewed the medication guide with Laura and Kim as a reminder. They will help remind the Dr to try Butrans.
PPLPMDL0020000001	Mayfield Hts	OH	44124	2/4/2011	Window call.....asked doc about the patient he just prescribed Butrans for the other day - has he heard anything back? Was the patient able to get Butrans with her medicare/supplemental insurance? He said he had not heard anything back about it yet. He said next week I should check with Denise. Who is not in today. Thanked him and asked him to look for other opioid naive /low dose chronic pain patients for Butrans.
PPLPMDL0020000001	Cleveland	OH	44109	2/4/2011	worked physical medicine&rehab dept-see call notes,worked oncology dept-had to leave information with medical secretaries so i left business card and Butrans fpi and Butrans initiation guide;worked neurology dept-left dr.hannah,dr.winkelman and virginia edwards,NP,Butrans fpi and initiation guide and my business card;worked rheumatology dept-left business card,Butrans fpi,initiation guide-for Dr.Kahn,Dr.Ballou,Dr.Magrey and Dr.Yue and booked a lunch in March with rheumatology dept;worked out-patient pharmacy-talked to Brian,pharmacist,about Butrans fpi,initiation guide and Butrans patient information booklet and savings card and asked if Brian could give all of that information to Rob,Pharmacy Manager,as he was in a meeting

PPLPMDL0020000001	Cleveland	OH	44109	2/4/2011	i talked to dr about Butrans fpi,black box warning,5 core messages,medication guide,patient instruction booklet,initiation guide and Butrans patient savings cards.dr said he doesnt have a lot of experience prescribing narcotics,but he likes that Butrans is once weekly and transdermal.dr said he would think of Butrans for patients who he doesnt want to give Vicodin or Percocet to.i showed dr initiation guide,opioid naive patients trying Butrans 5mcg/hour and if he did have a few patients taking 1-2 tabs of Vicodin or Percocet,he could start them on Butrans 5mcg/hour too.dr said he will consider Butrans for his out-patient center patients as these are the people who have workers comp,medicaid-i explained prior authorization necessary for Medicaid and commercial plan patients using Butrans patient savings cards.recommended Senokot-S
PPLPMDL0020000001	Lakewood	OH	44107	2/4/2011	We reviewed the Butrans FPI, indication, dosing, warnings. She said she would try it, but did not know exactly where it will fit in her practice and she could not think of any specific patients. Dr Khuri asked about the OxyContin reformation and we reviewed the updates in the OxyContin FPI and field card. Reminder about Ryzolt as a once a day option and asked to recommend Senokot S with opioids.
PPLPMDL0020000001	Mayfield Heights	OH	44124	2/4/2011	Spoke to PT pharmacist, Jessica and Tech, Sarah about the stocking of Butrans. I explained that Target was due to be auto-shipped. She said they did receive a shipment but it was returned because they had noheard of it, had no requests for it, and really did not have shelf space for it. I Discussed the indication, positioning, dosing, and the 7 day application delivering Buprenorphine. She stated that she was not the regular pharmacist at this store and had not heard of it at other stores.
PPLPMDL0020000001	Lyndhurst	OH	44124	2/4/2011	She said she tried a patient on 5mcg/hr. The patient wore it for 7 days but called and said it was not working so HCP doubled the dose. I explained that the FPI does not recommend more than one Butrans at a time. She is going to write a script for 10mcg/hr when the patient returns. I asked if patient is tolerating well and was able to get the product. She had not heard any complaints from her about that. I discussed the REMS folder and went over the boxed warning and the limitations of use. Asked her to continue to identify patients.
PPLPMDL0020000001	Cleveland	OH	44109	2/4/2011	i talked to dr about Butrans fpi,black box warning,5 core messages,medication guide,patient instruction booklet,initiation guide and Butrans patient savings cards.dr said he doesnt start many patients on narcotics and works mainly in-patient hospital and these patients are cash paying,so Butrans isnt a realistic option for them.i asked dr if he has ANY patients taking 3 tablets of Vicodin or Percocet?dr said yes he has a few patients on 3-4 tabs of Percocet a day but he would taper them up to OxyContin.i clarified with dr that THAT IS the patient i am talking about,he could start THAT patient on Butrans 10mcg/hour then titrate to Butrans 20mcg/hr,after 72 hrs when steady state is achieved and THEN if pain worsens over time,dr can go from Butrans 20mcg/hr to OxyContin,dr said that was a great point,he didnt think of it like that and would consider 1-2 patients like that for Butrans.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	2/4/2011	i talked to dr about Butrans fpi,black box warning,5 core messages,medication guide,patient instruction booklet,initiation guide and Butrans patient savings cards.dr said he doesnt start many patients on narcotics and works mainly in-patient hospital and these patients are cash paying,so Butrans isnt a realistic option for them.i asked dr if he has ANY patients taking 3 tablets of Vicodin or Percocet?dr said yes he has a few patients on 3-4 tabs of Percocet a day but he would taper them up to OxyContin.i clarified with dr that THAT IS the patient i am talking about,he could start THAT patient on Butrans 10mcg/hour then titrate to Butrans 20mcg/hr,after 72 hrs when steady state is achieved and THEN if pain worsens over time,dr can go from Butrans 20mcg/hr to OxyContin,dr said that was a great point,he didnt think of it like that and would consider 1-2 patients like that for Butrans.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	2/4/2011	i talked to dr about Butrans fpi,black box warning, 5 core messages,medication guide,instructions for use,patient information guide,initiation/titration guide and Butrans savings cards.dr said he likes transdermal over pills,doesnt prescribe a lot of narcotics as he expects his patients to go to physical therapy,exercise,lose weight as he has a lot of obese patients,dr said if patients follow all of his instructions,he will give narcotics as he believes in treating pain but doesnt want them to do nothing and expect to get their pills.i asked dr who he is most likely to start 1-2 patients on Butrans,opioid naive or opioid experienced? dr said opioid experienced as he has patients on low doses of Vicodin,Percocet and some tramadol,so he would start them on the Butrans 10mcg/hour.i asked dr to think of those patients taking 3-8 tabs of Vicodin or percocet or 300-400mg tramadol and start Butrans 10mcg/hour,being sure he tapers patients to 30mg oral morphine equivalent,dr agreed
PPLPMDL0020000001	Cleveland	OH	44113	2/4/2011	talked to dr about Butrans fpi,5 core messages,medication guide,instructions for use,patient information booklet,patient savings cards for commercial plan patients,workers comp patients and medicaid patients needing prior authorization.dr said once weekly dosing and transdermal are two benefits for his patients.i asked dr would he most likely start 1-2 opioid naive or opioid experienced patients? dr said probably opioid experienced,as he has a lot of patients on tramadol around the clock and vicodin q4-6h,so he would like to decrease some of the monthly pills these patients are taking and convert them to Butrans.i asked dr to think of patients taking 300-400mg tramadol or 15-40mg hydrocodone,to start on Butrans 10mcg/hour,dr agreed and i asked if i could follow-up next week to be sure everything was going smoothly,dr agreed.told dr he has OxyContin,7 tabs for flexibility in titration available and medicaid patients pay \$2.00 at pharmacy,recommended senokot-S
PPLPMDL0020000001	Twinsburg	OH	44087	2/4/2011	Presented Sally Butrans FPI and reviewed where it can be prescribed. She asked specifically about how drug is metabolized so we reviewed that section under Pharmacokinetics. She was satisfied with response and didn't complete yellow card. I provided her S's initiation and titration guides and reviewed positioning of Butrans for patients. I also reviewed the formulary coverage for Butrans in Part-D and OxyContin. She is familiar with CCRx and happy for coverage but it's more suited for Consultant Pharmacists. I provided her USB card for PAP websites where she will review it herself as she'll be off work for a few weeks.
PPLPMDL0020000001	Cleveland	OH	44109	2/4/2011	i talked to dr about Butrans fpi,black box warning,5 core messages,medication guide,patient information booklet,butrans savings cards and initiation guide.dr said he thinks once weekly dosing and transdermal delivery are ideal for patients instead of around the clock opioids,but he doesnt give a lot of Vicodin or Percocet to his patients,unless in hospital then he will,in the out-patient setting he'll prescribe a lot of tramadol,so i asked dr to consider 2 patients on 300-400mg tramadol,considered opioid experienced,to start on Butrans 10mcg/hour and give Butrans savings card to them as long as they have commercial plan insurance.dr said he would do that in a few patients,in out-patient setting,biggest challenge in-patient setting is that majority of their patients are cash paying and cant afford Butrans out-of-pocket.i told dr to think of workers comp patients,commercial plan patients or prior authorization for medicaid patients.recommended Senokot-S
PPLPMDL0020000001	Lyndhurst	OH	44124	2/4/2011	Asked for Sid or Steve to discuss stocking of Butrans. Steve is now at a different store. Sid was not available. Spoke to Meagan and went over the Butrans indication, the available strenghts, 7 day application. Asked her to stock just one box of the 5mcg/hr. She said I should speak to Erin and that she would leave the information.
PPLPMDL0020000001	Hudson	OH	44236	2/4/2011	Spoke with Bonnie (pharmacist) & Jennifer (technician) & confirmed that they did order Butrans and currently have it on the shelf. Bonnie said that she thinks that doctors are going to try to use it as an "add on" to other opioids & she said she thinks that will cause withdrawal. I reviewed FPI 2.4 regarding supplemental analgesia. She said they also may put it in the same category of Duragesic. I showed and handed her initiation guide page 6, pointing out the table & the statement that patients on the fentanyl patch were excluded from the study. Let her know that I would return to follow up.
PPLPMDL0020000001	Cleveland	OH	44109	2/4/2011	i talked to dr about Butrans fpi,black box warning,5 core messages,medication guide,patient information booklet,initiation guide,butrans patient savings cards and formulary coverage for medicaid and workers comp patients.dr said he doesnt write any narcotics,like Vicodin or Percocet and maybe has a couple of patients on tramadol,as he is trying NOT to prescribe opioids.dr huang,the attending dr,said he must treat patients pain as he is obliged to do so as a dr and pain is the 5th vital sign,dr daftarri listened to dr huang as she explained that Butrans was a great option for patients being transdermal,once weekly and since its a CIII he could call in re-fills,so dr asked me what was the amount of Butrans for cash paying patients? i explained prices and dr said majority of his patients are in-patient and cash paying so Butrans couldnt work BUT out-patient commercial plan patients he would consider.recommended Senokot-S
PPLPMDL0020000001	Independence	OH	44131	2/4/2011	Introduced myself to Roman and delivered to him the Senokot-S samples that he requested. He said that Andrea had told him about Butrans but he doesn't have all the information he wants yet, so he has not prescribed it. I asked what information he was missing & he said that he either wants me to bring in a pain management specialist to lunch or to have a dinner program so that he can ask a thought leader his questions. He said that he's sure that I'm very knowledgeable, but he's interested in having his "off label" questions answered & he knows that I will not be able to provide him with off label information. I agreed & said that I can only speak to our FPI. I told him that if I have a dinner program I will be sure to invite him, but that I didn't think a speaker would be able to answer either. I told him he could call medical services-he declined. He said that he writes a majority of the Rx's in the office, not Dr Keppeler-He asked me to schedule a lunch in their Independence office
PPLPMDL0020000001	Cleveland	OH	44109	2/4/2011	talked to dr about Butrans 5 core messages and dr said this is a great option for patients who cant swallow pills,patients where she has concerns about giving too many pills.dr said she loves transdermal delivery and pain needs to be treated,so this is a fantastic option.i asked dr if she would consider opioid naive or opioid experienced patients? dr said probably opioid experienced patients,so i asked dr to think of patients taking 3-8 tabs of Vicodin or Percocet or 300-400mg tramadol daily,those are her opioid experienced patients to consider for Butrans therapy.dr said that makes sense and she will start some patients but wanted to know who had Butrans in stock and if Metro out-patient pharmacy had it?i told dr majority of pharmacies locally had Butrans in stock but i was still trying to meet with Rob,Pharmacy Manager,to discuss Butrans and order so i asked if one of the nurses could call pharmacy and ask for Butrans to be ordered and dr said that was a good idea.we discussed
PPLPMDL0020000001	Lyndhurst	OH	44124	2/4/2011	Introduced doc to Butrans. Discussed the indication, dosing, and the patient positioning. He looked at the conversion from hydrocodone to 5mcg. Discussed the CIII status and the studies in opioid naive and opioid experienced patients. I asked him if he would use something Butrans in naive or experienced patients. He went on to talk about about news in the USA Today stating that 35% of military soldiers end up addicted to medication after serving. He said that he wishes all narcotics were banned. He said I would not get anything out of him today. I did not.
PPLPMDL0020000001	Cleveland	OH	44109	2/4/2011	i talked to dr about Butrans fpi,black box warning, 5 core messages,medication guide,patient information booklet,initiation guide,butrans patient savings cards.dr said he loves transdermal delivery,instead of giving patients all of these pills monthly,like vicodin and percocet.dr said once weekly dosing is much easier for patients but he will most likely give patients some short-acting opioid to help for breakthrough pain.i told dr that was his clinical judgment and showed Butrans fpi-initiation of therapy and maintenance of therapy sections with that information noted.i asked dr who he would most likely prescribe Butrans in and dr said opioid experienced.i asked dr to think of patients taking 3-8 tabs of Vicodin or Percocet,to start on Butrans 10mcg/hour after appropriate tapering to 30mg oral morphine,dr said that sounded easy and would try Butrans in a few patients and let me know what he see's and hears from patients.we talked about prior authorization for medicaid patients.
PPLPMDL0020000001	Cleveland	OH	44113	2/4/2011	i talked to dr about Butrans fpi,5 core messages,medication guide,instructions for use,patient information booklet and patient savings cards for commercial plan patients and Prior Authorization for Medicaid patients.i asked dr what clinical benefits he saw in Butrans,dr said once weekly dosing and transdermal are ideal,as he has so many patients dosing short-acting hydrocodone or oxycodone around the clock and this would be a good way for him to decrease some of that amount.dr said the biggest issue is cost,so we talked about commercial plan patients using Butrans savings cards and Medicaid patients needing a Prior Authorization,dr said he would try Butrans in 1 or 2 patients and let me know how they do,i asked dr if he was thinking of opioid naive or opioid experienced and he said probably more experienced patients,so i asked dr to think of patients taking 3-8 tabs of Vicodin a day,those patients could try Butrans 10mcg/hour,once tapered to 30mg oral morphine equivalent,dr agreed
PPLPMDL0020000001	Lyndhurst	OH	44124	2/4/2011	Asked doc what kind of feedback she got from last weeks patient trial on Butrans. She said she had not heard anything back and she thinks that is a good sign. She said the patient was previously taking Vicodin ES. I discussed the initiation dose for opioid naive and opioid experienced and the importance of tapering down. She said she did not need to this patient. Told her that anything over 40mg vicodin/day would be an oxycotin
PPLPMDL0020000001	Cleveland	OH	44109	2/4/2011	i talked to dr about Butrans fpi,black box warning,5 core messages,medication guide,patient information booklet,Butrans patient savings cards and initiation guide.dr said majority of her patients are in-hospital setting and cash paying,so Butrans wouldnt be an option now, but when she is in the out-patient center with attending doctors and treating patients,she would think of patients either opioid naive or patients taking 1-2 tabs Vicodin or Percocet.i asked if dr treats many patients who are opioid experienced,3-8tabs of Vicodin or Percocet,dr said not really as she tries to not prescribe a lot of narcotics.i asked dr to consider that opioid naive patient or patients taking 1-2tabs Vicodin or Percocet,to start on Butrans 5mcg/hour and get some clinical experience with Butrans,she agreed and asked if there was potential for abuse,i said yes and showed black box and section 9 and 10 in Butrans fpi.recommended Senokot-S
PPLPMDL0020000001	Mayfield Hts	OH	44124	2/4/2011	Quick call....reminded doc that we started talking about Butrans - a 7 transdermal system delivering buprenorphine. Asked him if he had a few minutes. He said not really but asked if it is less addictive. I explained that it is still a CIII and has the risks/warnings similar to other opioids. nothing learned.



PPLPMDL0020000001	Brooklyn	OH	44144	2/7/2011	Introduced Butrans to Dr Hilton, delivering 5 core messages & reviewing box warning. Dr Hilton asked how it was better than morphine. I told her we have no comparative data. I showed FPI 12.1 & repeated message of seven days buprenorphine delivery in one application of Butrans transdermal system. She asked if it was less addictive than oxycodone. I told her again that we have no comparative data. I presented initiation guide & showed table on pg 6. She said she doesn't like to prescribe opioids "because then they're on it forever". I told her that Butrans, like all opioids has a risk of abuse/addiction & that it is not for everyone. Also repeated that the indication is for moderate to severe chronic pain & that it is not to be used for acute or mild pain. She asked cost & I covered managed care/savings-asked how much commercial insurance she sees-she said "none". Let her know that Medicare/Medicaid will cover Butrans but that a prior auth would be involved. She asked for an FPI
PPLPMDL0020000001	Cleveland	OH	44144	2/7/2011	Introduced Butrans to Dr Paul, delivering 5 core messages & reviewing box warning. She asked if it was like morphine or if it was less addictive than other opioids. I told her we do not have comparative data & that Butrans contains buprenorphine and is a transdermal system that delivers buprenorphine over seven days. Also that Butrans, like all opioids does carry risk of abuse/addiction so she should be just as cautious when prescribing. She pointed out the risk of seizure-I showed FPI 5.14. I presented initiation guide & she said that it seemed "interesting" & that she does not like prescribing opioids. Told her that Butrans is not for everyone. She said she does have a pt who takes tramadol & ibuprofen who may be a candidate for Butrans but Dr Hilton said she's "afraid of" Butrans & Dr Paul agreed that she would want it to be out for longer before she would prescribe it-she said she would want to see if other physicians were prescribing it. I gave her an FPI-she said she would read
PPLPMDL0020000001	Parma	OH	44129	2/7/2011	Spoke with Cindy- Reminded her about Butrans, including indication & appropriate patient types. She said that she knows that when I introduced it to him he was just getting ready to leave for a trip to the Philippines, so he may not have been as responsive as he normally would be. She said she is certain that Butrans is something that Dr Ortega will see a place for in his practice. I let her know that so far, there has been an overwhelmingly positive response by area physicians & she said to be sure to let Dr Ortega know that because that is important to him. She said that he knows many of the physicians in the area & that if they are positive about Butrans, then Dr Ortega is more likely to be positive as well. Also OxyContin savings reminder. She said he will be back the 21st & recommended that I return the afternoon of the 22nd to discuss Butrans with him again.
PPLPMDL0020000001	Parma	OH	44129	2/7/2011	Introduced myself & Butrans to Dr Paat. Delivered 5 core messages & showed black box warning. He said it sounded interesting. I presented initiation guide, showing pg 6, & walking him through how to initiate treatment in opioid-naïve & opioid-experienced patients. He said he thought he it would be something he would try on some patients but that he wanted to read more about it. We discussed managed care & savings cards. I spoke with Shari & discussed Butrans indication and appropriate patients. Also walked her through savings cards & how patients would use them, letting her know that they are not for patients with government insurance like Medicaid & Medicare. She suggested I schedule a lunch to get more quality time with Dr Paat, so I scheduled first available.
PPLPMDL0020000001	Westlake	OH	44145	2/7/2011	Dr has not yet tried a patient on Butrans. He said he would try it, he just needs to find the right patient. He told me about a patient on OxyContin who he could convert, but they were taking more than 40mg of OxyContin per day and we discussed that Butrans might not provide adequate analgesia. We reviewed the appropriate patients and tapering before initiation of Butrans. He agreed to try it and he would like to gain experience. We reviewed managed care and the savings cards. We discussed OxyContin as an option for patients when Butrans may not provide adequate analgesia.
PPLPMDL0020000001	Rocky River	OH	44116	2/7/2011	We reviewed the Butrans FPI, indication, dosing, warnings, and medication guide. Dr asked me if we had any data comparing the efficacy of Butrans with other opioids. I told him we have no head to head data, and he wanted to ask medical services for any further information. Reminder about OxyContin as an option when Butrans may not provide adequate analgesia. Reminder about Ryzolt and asked to recommend Senokot S. He said that constipation is an issue especially for patients on vicodin around the clock.
PPLPMDL0020000001	Cleveland	OH	44103	2/7/2011	I discussed Butrans fpi with dr,black box warning,5 core messages,medication guide,Butrans REMS,initiation guide and Butrans patient savings cards.i asked dr what clinical benefits he saw in Butrans? dr said once weekly dosing and transdermal were two significant benefits in his eyes,versus all of the pills he prescribes for his chronic pain patients.dr asked about medicaid coverage,so we discussed prior authorization for medicaid,workers comp coverage and commercial plan patients using Butrans patient savings cards.i showed dr initiation guide,opioid experienced patients page,and asked if dr would most likely prescribe Butrans for this patient group or opioid naive? dr said maybe a few patients are naive but most are experienced so he would think of patients taking Codeine with Tylenol,Tramadol or Vicodin,where he could try Butrans and see what clinical results he gets with Butrans.i told dr i would follow-up in a week to see if he started anyone.recommended Senokot-S
PPLPMDL0020000001	Olmsted Falls	OH	44138	2/7/2011	Spoke with Kelly and tech Kathy. We reviewed the Butrans FPI and medication guide. They do have the 5 and 10mcg doses in stock. We discussed the managed care coverage for Butrans, the savings cards and e-voucher program. We discussed OxyContin as an option when Butrans may not provide adequate analgesia.
PPLPMDL0020000001	Rocky River	OH	44116	2/7/2011	Spoke with Stan, we reviewed Butrans FPI and initiation guide. He did get the 5 and 10mcg Butrans in stock. He said he did not know which Drs would prescribe it and is wondering if it is going to take off or not.
PPLPMDL0020000001	Bedford	OH	44146	2/7/2011	Quick call with Dr Moufawwad. I asked him to tell me about his experience with Butrans so far & he said that he has not been in the office since our lunch so he has not had the chance to try it yet. He remembered the name & strengths & he said that he really does want to start getting experience with it as he walked into a patient room. Spoke with Amber & reminded her of Butrans savings cards for patients who have commercial insurance. Also let her know I would return in a week for follow-up & feedback.
PPLPMDL0020000001	Cleveland	OH	44113	2/7/2011	I talked to dr about Butrans fpi,black box warning,5 core messages,medication guide,Butrans patient savings cards,Butrans initiation guide and dr said Butrans once weekly dosing and transdermal delivery are both advantages in his eyes versus pills.showed dr initiation guide,opioid experienced patients and asked if he had patients taking 3-8tabs of Vicodin or Percocet daily?dr said Stabs of Vicodin,sometimes 6,is the most he'll prescribe.dr said he starts with plain Vicodin,5mg#4,then#5,then Vicodin ES and Vicodin HP,if that doesnt work he'll give Ultram ER as baseline pain coverage and Vicodin for breakthrough,anything more than that,he refers to pain management.dr said most of practice are opioid experienced and he would prescribe Butrans for the patients where he's pushed the dose to Stabs a day and maybe give Vicodin for breakthrough initially starting Butrans or for some patients as maintenance therapy.discussed managed care,medicaid and workers comp coverage.i told dr when patient
PPLPMDL0020000001	Cleveland	OH	44103	2/7/2011	i talked to Amy,Pharmacy Manager,about ordering Butrans 10mcg and 20mcg,and Amy said she did order these strengths and had it in stock and i asked if anyone had prescribed Butrans yet? Amy said she hasnt seen any scripts yet but she told me to keep working with Dr.Robson and Dr.Boyd and Dr.Celeste as these are the biggest Vicodin writers and Amy said she sometimes see's scripts from Dr.Nickels,so i told Amy i met with Dr.Nickels this am and he is going to be prescribing Butrans,based on our discussion.i told Amy i would follow-up in a week to see if anyone has prescribed Butrans.recommended senokot-S
PPLPMDL0020000001	Rocky River	OH	44116	2/7/2011	Quick call, Dr was on her way to the hospital, we reviewed the Butrans 5 key points. She agreed to look over the information and will let me know if she feels it will fit into her practice.
PPLPMDL0020000001	Parma	OH	44129	2/7/2011	Followed up with Jackie regarding Butrans stocking. She said that she did order & receive one box each of 5mcg & 10mcg strengths. She said she will order the 20mcg once she starts to see any Butrans movement. I let her know that Butrans is a kind of RelayHealth's e-voucher system which she was happy to hear. She said she would keep me updated on any Butrans prescriptions she sees.
PPLPMDL0020000001	Cleveland	OH	44109	2/7/2011	i talked to Erin,Pharmacist,about Butrans stocking and any scripts that have come through yet and Erin said no,none has prescribed Butrans yet but she did order the 5 and 10mcg/hour Butrans strengths.i asked Erin which departments at Metro write a lot of Vicodin and Percocet and she said Pain management and Physical medicine and rehabilitation doctors and also oncology doctors.i asked if Erin could recommend Butrans for those patients that are opioid experienced,taking 3-8 tabs of Vicodin or Percocet daily or 300-400mg tramadol daily,to doctors? Erin agreed and i said i would follow-up end of february to see if any prescriptions have come through pharmacy.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44102	2/7/2011	i talked to Dennis,Pharmacist,about Butrans fpi,black box warning,5 core messages,initiation guide and Butrans patient savings cards.Dennis said once weekly dosing and transdermal delivery were 2 benefits in his eyes for patients he see's all the time coming to get their Vicodin,Percocet,Tramadol and Tylenol with Codeine,so he is happy Butrans is an option.i asked if Dennis ever recommends products to patients and doctors? Dennis said occasionally he will do that,so i asked him to think about patients who are opioid naive or experienced and to recommend Butrans,Dennis agreed and asked about medicaid coverage as thats the biggest patient population here.i told Dennis Medicaid's prior authorization requirements and coverage for workers comp and commercial plan patients using Butrans savings cards.i told dennis i would follow up end of month to see if any prescriptions for Butrans have come through pharmacy,he agreed.recommended Senokot-S<font color=blue><b>CHUDAKOB's query on 02/17/2011</b></font>Amy, when you are asking him to think of patients opioid naive or opioid experienced, that pretty much covers every patient on an opioid. If you are going to discuss this, then you will want to consider being more specific. You cannot ask him for a printed list of physicians.<font color=green><b>BROOKAM's response on 02/20/2011</b></font>Barry,as we discuss the initiation/titration guide for Butrans, thats what we do,so from now on in my call notes i will be stating discussed initiation guide with pharmacist, doctor, etc...hope that makes sense to you,we can discuss this tuesday if you have questions. also if we cant ask for a printed list of physicians writing, how come that was done when you were with me in the field at Lutheran Family Pharmacy. i am confused. thanks<font color=blue><b>CHUDAKOB added notes on 02/23/2011</b></font>He printed the list for you without any patient names. This was not something you asked the pharmacist for. It is best to not get any printed information from your customers.
PPLPMDL0020000001	Rocky River	OH	44116	2/7/2011	We reviewed Butrans FPI, indication, warnings, dosing, adverse events, managed care, savings cards. He said he does have a lot of patients who come in every month for their refill of vicodin or percocet. He said they are usually taking 4 per day and either the 5mg or 7.5mg. He said he would try Butrans on a patient who needs to change medications. He said most patients are happy taking their 4 pill per day and they will not want to change. I asked he to just consider those patients who complain of their medication not working well or who want a different option and he agreed. We reviewed OxyContin and Ryzolt as other long acting options and asked him to recommend Senokot S with opioids.
PPLPMDL0020000001	Cleveland	OH	44104	2/7/2011	i talked to dr about Butrans fpi,black box warning,5 core messages,initiation guide and Butrans patient savings cards for commercial plan patients,dr asked about medicaid and workers comp coverage so we discussed both of those and dr said once weekly dosing is much easier for patients than taking short-acting opioids around the clock.dr said there are patients who arent compliant with q4-6h dosing of Vicodin or Percocet that he's thinking could benefit from Butrans.i asked if dr would start an opioid naive patient on Butrans? dr said yes or if they are only taking 1-2 tabs of Vicodin or Percocet,he would start on lowest dose,Butrans 5mcg/hour.dr said their chronic pain patients are tough to deal with and he gets very frustrated but he knows he has to treat their pain,so this is another option for some of his patients.i asked dr to think of a patient on 1-2 tabs of Vicodin or taking 3-8tabs of Percocet, to try on Butrans and dr agreed.recommended Senokot-S for opioid induced constipation
PPLPMDL0020000001	Berea	OH	44017	2/7/2011	Spoke with Adam and tech Diane who is in charge of inventory. They have not ordered Butrans yet and have not seen scripts. I reviewed the Butrans FPI, and medication guide with Diane. She asked about the Butrans sticking for 7 days as this has been a problem with other transdermals. I let her know that patients can use first aid tape or occlusive bandage. She said she would call me when she gets any feedback from Butrans patients. She said that Dr Kavlich, Choi, and Misja in Parma do a lot of pain management and would be good to call on. Reminder about OxyContin as an option and we reviewed the conversion guide. I reviewed Ryzolt as a once a day option and asked to recommend Senokot S.
PPLPMDL0020000001	Brooklyn	OH	44144	2/7/2011	Spoke with Cheryl & confirmed that they have Butrans 5mcg & 10mcg strengths on the shelf. Let her know that Butrans is part of the RelayHealth e-voucher system, so their customers with commercial insurance who were filling a Butrans prescription would have a \$15-\$20 co-pay. She said she could not have a lengthy discussion today because they were so busy and asked that I try back another day. I let her know that I would return for follow-up & gave her my card if she had any questions.
PPLPMDL0020000001	Berea	OH	44017	2/7/2011	Quick call, Dr said he did not need any other info regarding Butrans and had no concerns. It looked as if 2 of the savings cards have been used. Shirley did not know if he had prescribed.
PPLPMDL0020000001	Rocky River	OH	44116	2/7/2011	Spoke with Kim, she was auto shipped all three strengths of Butrans and was not very happy about it. She said they do not treat a ton of pain patients and she is afraid the product will sit on her shelf. I let her know that I will get it moving. We reviewed the Butrans FPI and medication guide. We discussed OxyContin as an option when Butrans may not provide adequate analgesia. Reminder about Ryzolt as a once a day option instead of tramadol around the clock.
PPLPMDL0020000001	Solon	OH	44139	2/7/2011	Reviewed Oxycontin Announcement Card & discussed points of concern expressed by Kristen in Houston. Kristen said the other Kristen is concerned about the source of the information. Shes not familiar with FTF and wants data points to show where its coming from, in reference to 92% of lives covered for OxyContin. She will speak with her and get back to me. I also provided e-marketing sample sheets for review. Kristen wants to get the Announcement Card approved before she starts the others.
PPLPMDL0020000001					

	Cleveland	OH	44103	2/7/2011	talked to dr about Butrans fpi,black box warning,5 core messages,medication guide,Butrans REMS program,Butrans initiation guide and patient savings cards.i asked dr what clinical benefits he saw in Butrans? dr said once weekly dosing and transdermal delivery were both benefits to his patients.i asked dr if he would consider Butrans as an option for opioid naive or opioid experienced patients? dr said both,as he doesn't start many patients on narcotics.dr said he has more patients on tramadol,so i talked to dr about patients taking 300-400mg tramadol daily,as they could start on Butrans 10mcg/hour.dr said he'll try Butrans in a few patients and let me know what clinical results he gets.discussed Medicaid,workers comp and commercial plans for Butrans.i told dr when patients are taking 80mg oral morphine or equivalent,dr can convert patients to OxyContin,7 tablet strengths available and lowest branded co-pay for commercial plan,medicaid and medicare part d plans.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44130	2/8/2011	Spoke with Ron- let him know that i had spoken with Dave & that he had agreed to order Butrans. Asked if he could check to see if they received it. Ron checked their shelves & said that they do not have it. i reviewed with him the indication & appropriate patient type & left information with my card which Ron said he would leave for Dave. Also let Ron know that we had started promotion with physicians in the area & recommended that they order at least one box of 5mcg & 10mcg. He said he would ask Dave to do this.
PPLPMDL0020000001	Twinsburg	OH	44087	2/8/2011	Spoke with Nancy (technician), confirmed that they did receive Butrans in stock. She said that Lou would be upset that i came on his day off because he has been wanting to talk to me. Nancy told me his schedule for this & next week and asked that if i am in the area i stop in to try to catch him. i also let her know that i we have started promoting Butrans to area physicians.
PPLPMDL0020000001	Mayfield Hts	OH	44094	2/8/2011	Introduced doc to Butrans - indication, patient positioning, and once weekly application. i asked him if a product like Butrans could benefit any of his patients. He said he does not a lot of long acting analgesics. i asked him if he has patients that may be taking 2 or 3 tabs of vicodin daily. No answer. Explained that that might be a good patient. Gave an FPI and initiation guide and asked him to review it.
PPLPMDL0020000001	Cleveland	OH	44130	2/8/2011	Dr Sawhny said he had just received his first complaint about the OxyContin reformulation. He said that the patient complained of headache & GI symptoms & had not had problems with the original formulation. He asked what is different & i presented field card & went over the bullet points with him. i told him that if he wanted more specific information or still had questions, he could call medical services or we could send an information request form. He said he would call medical services as he was curious as to what exactly has changed that would cause side effects not previously experienced on the original formulation. Introduced Butrans, delivering 5 core messages/box warning. He said he would use in either opioid-naive or experienced pts. He asked if they could still take other pain meds while on Butrans. Showed FPI 2.4. Discussed adhesion, application, managed care, savings cards & adverse event rates. He said he would definitely be using Butrans & was excited about it.
PPLPMDL0020000001	Bedford	OH	44146	2/8/2011	Ran into Dr Moufawad at Twinsburg UH Family Practice area, where he practices on Tuesdays. He said that he did not prescribe Butrans yet but he will. i asked him why not, considering he was so excited about it when we discussed all the details of Butrans. He started walking away down the hall into a patient room and said again that he would write it. Also spoke with Amber & reminded her of savings cards for cash paying patients or those with commercial insurance.
PPLPMDL0020000001	Cleveland	OH	44195	2/8/2011	i talked to Kathy,PA for Dr.Minzter and Dr.Mekhails patients,about Butrans being an option for opioid naive and opioid experienced patients.Kathy said once weekly dosing,as a transdermal delivery,is the biggest advantage instead of her patients having to take pills around the clock.i asked Kathy what Dr.Minzter said about Butrans and she said that Dr.Minzter likes once weekly dosing and also transdermal application is better in her eyes for patients as she is trying to prescribe less pills for her patients.i asked if there was any reason Kathy wouldnt prescribe Butrans for patients who were taking 3-8 tabs of Vicodin or Percocet or 300-400mg of tramadol and start them on Butrans 10mcg/hour? Kathy said no,she feels comfortable with who the appropriate patient is for Butrans and how to prescribe,so she will let me know if she needs anything.recommended Senokot-5
PPLPMDL0020000001	Twinsburg	OH	44087	2/8/2011	Introduced myself & Butrans to Dr Leonard, delivering 5 core messages & reviewing box warning. Dr Leonard said she finds Butrans to be an interesting concept. She asked about application sites, so i showed her in medication guide & went over application sites, rotation, area preparation with her. She asked how well it was covered by managed care. i discussed managed care (commercial tier 3 coverage & Medicare/Medicaid prior-authorization requirement) and savings cards. She said she does not have a lot of patients that fit the indication/description of appropriate patient types, but did say that she thought of one patient, but that patient is on Medicare, so she said she wasn't sure she wanted to battle insurance to get it covered. i suggested that each Medicare Part D plan is different & that it may be worth a try to see what type of requirements that pts plan about it with tell me & how he said that he had many patients who he felt would be appropriate for Butrans. He laughed & said he has not yet prescribed it. i reminded him how excited he had been when i discussed all the details about it with him & he put it right next to his computer so that he would see it often as a reminder when i am not there. Also reminded Karen of Butrans & savings cards.
PPLPMDL0020000001	Cleveland	OH	44130	2/8/2011	Asked Dr Diab to tell me all the great feedback he has gathered after starting his patients on Butrans. He laughed & said he has not yet prescribed it. i reminded him how excited he had been when i discussed all the details about it with him & how he said that he had many patients who he felt would be appropriate for Butrans. He laughed & said he has not yet prescribed it. i reminded him how excited he had been when i discussed all the details about it with him & he put it right next to his computer so that he would see it often as a reminder when i am not there. Also reminded Karen of Butrans & savings cards.
PPLPMDL0020000001	Cleveland	OH	44130	2/8/2011	Spoke with Allison, who confirmed that they had received their Butrans shipment & currently have 5mcg & 10mcg strengths on the shelf. She said she had not yet heard of Butrans so i reviewed with her the indication, appropriate patient type, seven days of buprenorphine delivery in one Butrans transdermal system, dosing/strengths, CII & abuse/addiction potential. She said she thought it sounded interesting and like a lot of patients may
PPLPMDL0020000001	Parma	OH	44129	2/8/2011	Spoke with Donna about Dr Laluk & his practice. Introduced myself & Purdue's products & asked if i could see Dr Laluk to introduce Butrans. Shared with her the indication, dosing, appropriate patient types, & CII/abuse/addiction potential. She said that he would not see reps at all unless they have a lunch, even if it is a product that he has not discussed before. i asked what the best way to get information to him was & she said that unless it is only one page, he will not read it. i told her that since it is something that he has not written or discussed before, and because we do not have a one-page information bullet sheet, it would be best for him to read the full prescribing information. She wrote "Butrans" down along with some notes & said she would share it with the doctor.
PPLPMDL0020000001	Cleveland	OH	44105	2/8/2011	i talked to Abdul,Pharmacist,about Butrans stocking and he has all 3 dosage strengths in stock but hasn't seen any prescriptions yet.i gave Abdul the Butrans initiation guide and patient information booklet,so that if 1 patient gets started on Butrans he can hand the patient information booklet to that patient.Abdul said i should be sure to talk to Dr.Tabbaa,Dr.Astley and Dr.Martin,as he see's a lot of their scripts from pain management at MetroHealth Medical Center.Abdul asked if i have talked to Dr.Celeste,Dr.Talbot and Dr.Carson as these are also physicians that send a lot of patients to him,so i told Abdul i met with Dr.Carson yesterday at lunch,Dr.Celeste is Friday,feb.11th and Dr.Talbot on Thursday,feb.17th but that both Dr.Celeste and Dr.Talbot have been given all of the Butrans fpi from Andrea,my westside colleague.i told Abdul i would follow-up next week,post more of my
PPLPMDL0020000001	Cleveland	OH	44195	2/8/2011	worked pain management dept-see call notes on physicians,nurse practitioners and physician assistant,worked chronic pain and rehabilitation department and physical medicine and rehabilitation dept
PPLPMDL0020000001	Cleveland	OH	44195	2/8/2011	i asked dr if he has started any patients on Butrans,since our discussion of the Butrans fpi,initiation guide and Butrans patient savings cards? dr said he has started a few patients and will let me know what clinical results he see's.i asked dr if these were all opioid experienced patients and dr said yes,thats majority of his patients.asked if dr needed anything else from me at this point,to continue starting more patients on Butrans? dr said no and if he needs me,he'll contact me. recommended Senokot-5
PPLPMDL0020000001	Parma	OH	44134	2/8/2011	Quick call with Dr Hernandez. i asked him to tell me about his experience thus-far with Butrans. He said he has prescribed it but he really wanted a list of pharmacies that have it in stock. i told him of the various chains & pharmacies that i have confirmed stocking at. He asked me to come back next week & that he did not need more savings cards now, but will by next week. Also spoke with Valentino regarding pharmacy stocking. He said that this information is very helpful for them.
PPLPMDL0020000001	Cleveland	OH	44195	2/8/2011	i talked to Joan about her opioid experienced patients,patients taking 3-8 tabs of Vicodin daily,that could start on Butrans 10mcg/hour and Joan said she is considering Butrans for those patients as she likes the once weekly dosing and transdermal delivery of Butrans.i asked Joan if there was any reason why she wouldnt prescribe Butrans and she said no,she thinks its a great option and has already started a few patients on Butrans so she's going to wait and see what clinical responses she gets from these patients.i asked Joan if there was anything else she needed and she said no and that i could follow-up in a week or two and she would let me know.recommended
PPLPMDL0020000001	Westlake	OH	44145	2/8/2011	Spoke with Megan. We reviewed the 5 key messages for Butrans. She said she thinks that the Dr will be interested and i can schedule an appointment at this Westlake location.<font color=blue>cb>CHUDAKOB's query on 02/17/2011</b></font>Who is Megan?<font color=green>cb>HOLUBA's response on 02/22/2011</b></font>Megan is an MA.<font color=blue>cb>CHUDAKOB added notes on 02/27/2011</b></font>Ok. Thanks. When you have a non-HCP call, you have to put in the title of the person who you spoke with and you can only have a non-HCP call on as medical person, not a secretary.
PPLPMDL0020000001	Cleveland	OH	44113	2/8/2011	i talked to Justin,new Pharmacist,about Butrans fpi,black box warning,Score messages,medication guide,stocking of Butrans as i asked if Aaron,Pharmacy Manager,ordered Butrans and Justin said no,but after our conversation about the medication and me sharing with him feedback from some physicians such as Dr.Shen,Dr.Daoud,Dr.Nickels,who all send patients to this pharmacy,Justin said he'll order Butrans today.Justin asked about formulary coverage for Medicaid,workers comp and commercial plan patients,so i showed him Butrans savings cards for commercial plan patients and explained prior authorization requirements for Butrans to get approval for Medicaid and workers comp coverage for Butrans.i told Justin i would follow-up on Thursday,as i have a lunch with Dr.Bohl and Dr.Berkowitz and they send a lot of their patients to this pharmacy,so i will check back to be sure he ordered Butrans,Justin agreed saying that sounded good and appreciated information.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44195	2/8/2011	i talked to dr about Butrans and if he started any patients yet? dr said he has started a couple patients, and hasn't heard anything from them yet,so he is thinking the medications working.i asked dr what these patients looked like and dr said patients on Vicodin and Percocet,where he is trying to decrease the amount of pills these patients are taking,thats where he has tried Butrans and will let me know what happens.i asked if dr needed any patient information booklets or savings cards and dr said no,but that i could follow-up in week or so.recommended Senokot-5
PPLPMDL0020000001	Richmond Heights	OH	44143	2/8/2011	Discussed the Butrans indication, studies in opioid naive and opioid experienced, CII, and once weekly application. Asked him if he would use in opioid naive or opioid experienced. He said, "I don't know, I can't think right now". i asked him if he thought Butrans would fit into his practice and benefit any of his patients. He said sure.
PPLPMDL0020000001	Cleveland	OH	44113	2/8/2011	i talked to dr about Butrans fpi,black box warning,5 core messages and Butrans savings cards and asked dr who would he most likely see in his practice,whether it be opioid naive or opioid experienced,where he would feel comfortable prescribing Butrans? dr said he see's both types of patients but more opioid experienced so probably would try Butrans there.dr asked about formulary coverage so we talked about commercial plan patients using Butrans savings cards,medicaid patients needing prior authorization and workers comp coverage.dr said he has to think about specific patients and wanted to talk to me more at lunch about Butrans so he told me to see Marcy,his Office Manager/Nurse,i saw Marcy and booked a lunch for Feb.22nd as Marcy said dr.patel will want me to give an in-service for all of his staff on Butrans
PPLPMDL0020000001	Highland Heights	OH	44143	2/8/2011	Window call.....asked doc what type of patient he prescribed Butrans for. He said he wrote a script for a BWC patient and that it was not covered - required a PA. i explained that commercial patients fitting the indication and positioning will be the best candidates. i reminded him to be sure to give each patient a savings card.
PPLPMDL0020000001	CLEVELAND	OH	44109	2/8/2011	i talked to Rod Shipley,Pharmacy Manager,about Butrans fpi,black box warning, 5 core messages,medication guide,initiation guide,Butrans patient savings cards and formulary coverage for worker comp,medicaid and commercial plan patients.Rod said Josh gave me incorrect information about Butrans stocking as he does NOT have Butrans in stock,never got the autoshipment and he didnt even know what Butrans was,so he will order 1 carton of each strength today as i gave Rod the Butrans retail pharmacy fact sheet.i asked if Rod and Tamara,Pharmacy technician,saw a place for Butrans in the patients that go to Walmart and they both said so many patients get a lot of Vicodin and Percocet monthly and a lot of tramadol,that Butrans being a transdermal application dosed once weekly would be a lot easier for patients and they would be happier to stock Butrans than all of the pills.i told Rod and Tamara i would follow-up end of month to see if any scripts for Butrans have come through.
PPLPMDL0020000001	Cleveland	OH	44195	2/8/2011	i talked to Cynthia,Pharmacist,about Butrans fpi,black box warning,5 core messages,medication guide,Butrans initiation guide and Butrans patient savings cards for commercial plan patients.i asked Cynthia what clinical benefits she saw in Butrans and Cynthia said once weekly dosing and transdermal delivery in one application were the biggest benefits to their patients instead of dosing pills around the clock.i asked Cynthia who orders the narcotics,as this is a CII medication and she said i needed to speak with David,Pharmacy manager,about Butrans and she said to show him the initiation/titration guide and Butrans savings cards and talk to him about rebate offer when ordering Butrans.Cynthia asked about workers comp and medicaid coverage for Butrans so we discussed coverage for these patients and i asked her if i could set-up an in-service with the surgical pharmacy staff? Cynthia said to follow-up thursday with David and ask him.
PPLPMDL0020000001					

PPLPMDL0020000001	Cleveland	OH	44113	2/8/2011	i talked to dr about Butrans fpi,black box warning,5 core messages,medication guide,Butrans REMS,initiation/titration guide and Butrans patient savings cards.dr said he hasnt heard of Butrans but liked that this was a once weekly dosing application and was transdermal.dr said he has so many patients on Vicodin and Percocet,that he feels Butrans would be a great option for so he asked about formulary coverage for Medicare-50%of practice,25% Medicaid and the rest is commercial plans-i told dr Butrans isnt covered on Medicare,Medicaid requires a prior authorization and commercial plan patients can use Butrans savings cards.i asked dr if he was thinking of opioid naive or opioid experienced patients to start on Butrans? dr said both patients,as he has patients on 1-2 tabs of Vicodin and Percocet that he would like to try Butrans 5mcg/hour and those taking 3-5 tabs of Vicodin or Percocet,he will try Butrans there too.i told dr OxyContin is available,in 7 tablet strengths,with wide coverage
PPLPMDL0020000001	Parma	OH	44129	2/8/2011	As soon as he saw me, Dr Roheny said that he just prescribed OxyContin for a patient. I asked him what patient type he chose it for & he said it was an 80 year-old female patient who had been taking Vicoden around-the-clock. I thanked him & asked him to tell me his thoughts about Butrans after reading the information I gave him on my last visit. He pointed to a large stack of patient charts & told me as soon as he gets through all of them, he would read the information. I delivered 5 core messages & box warning to refresh his memory & handed him an initiation/titration guide. Asked him to look at the chart on pg 6 that shows how to initiate treatment in patients depending on their current opioid therapy. He said that he still wants to read more about it since it just came out. I told him that I understand & would provide him with any information he wanted in order to feel comfortable enough with Butrans to start thinking of patients for whom he may consider it.
PPLPMDL0020000001	Cleveland	OH	44195	2/8/2011	i talked to dr about Butrans fpi,black box warning,5 core messages,medication guide,patient information booklet,initiation guide,Butrans REMS and Butrans patient savings cards.dr said once weekly dosing is much easier than pills around the clock as so many of his chronic pain patients arent compliant with q4-6h dosing and transdermal delivery is ideal in his eyes.i asked if dr has opioid naive and opioid experienced patients? dr said rarely does he see an opioid naive patient,but he does have patients taking Vicodin or Percocet 1-2 tabs a day and would consider Butrans there.i told dr that was a perfect place for Butrans as well as those patients who are taking 3-8tabs of Vicodin a day,he could start them on Butrans 10mcg/hour.dr said he'll try Butrans in a few patients and let me know what happens.we discussed managed care coverage for medicaid,workers comp and commercial plan patients.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44195	2/8/2011	i talked to JoAnne,NP,about Butrans being an option for her patients who are opioid experienced,as thats the majority of her patients.JoAnne said she has a lot of patients on tramadol and a few on Vicodin,dosing around the clock and not always compliant with the dosing regimen and complaining of not liking this q4-6h dosing so she's thinking of Butrans for these patients as its a transdermal delivery and once weekly dosing is more convenient for her patients.i asked what else JoAnne needs from me to feel comfortable when prescribing Butrans and JoAnne said nothing at the moment,she'll call if she has questions.she didnt need any savings cards or patient information booklets at this time.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44195	2/8/2011	i talked to Gail,NP,about Butrans fpi,black box warning,5 core messages,medication guide,Butrans initiation guide and savings cards.Gail said once weekly dosing of Butrans is much better for patients than dosing pills q4-6h as so many of her patients arent compliant with this dosing regimen so she feels a transdermal application delivered once weekly will be much easier for her patients. I asked if Gail ever saw opioid naive patients or had patients taking 1-2 tabs of Vicodin or Percocet daily? Gail said she rarely saw an opioid naive patient but did have patients taking 1-2 tabs of Vicodin or Percocet daily so that would be a good place to try Butrans in a couple of patients and see what clinical results she gets. we discussed medicaid,workers comp and commercial plan patients trying Butrans and Butrans patient savings cards being used only by commercial plan patients.recommended Senokot-S
PPLPMDL0020000001	Twinsburg	OH	44087	2/8/2011	Quick call with Dr Witmer. I introduced myself & Purdue's products & he told me that he does not talk to reps during his days. I told him I had exciting information about a product that just became available for moderate to severe chronic pain & he said he would read information if I left it behind for him but he would not speak to me. I spoke with Shalene, his MA and left a FPI, initiation guide, and my card for Dr Witmer.
PPLPMDL0020000001	Cleveland	OH	44130	2/9/2011	Asked Dr Kamsal what his experience has been with starting patients on Butrans as we discussed during our previous conversation. He said he has not yet started anyone on it. He said that it is very difficult to get a patient to agree to stay on a long-acting opioid once they have experienced the "euphoria" of a short-acting because the patient equates that feeling of euphoria to pain relief. He said that because of this & long-acting opioids not giving the "euphoric" feeling, patients "always" tell him that long-acting opioids don't work as well & he said he has tried every long-acting available. I asked him if the patient is getting adequate pain relief from the long-acting, but not the "euphoria", if he felt a patient would object to it. He said they probably still would want "that feeling". I asked him if since he has not yet tried Butrans, if he would consider it, since it is a molecule that he has not used before. He agreed that if the appropriate pt presents, he will try it.
PPLPMDL0020000001	Brooklyn	OH	44144	2/9/2011	Introduced Butrans to Dr Detwiler, delivering 5 core messages & box warning. He asked if Butrans is like fentanyl or morphine. I told him we do not have comparative data. Discussed various appropriate patient types & presented initiation guide pg 6, showing table & statement that fentanyl patients were excluded from studies. He studied the table for a few minutes as he said that he wanted to get a good grasp of it & process the information. I asked him where he would position Butrans in his practice. He said he is generally pretty conservative with new products. He said that he thinks if a patient was on two or three Vicoden a day & not getting adequate pain relief but were not yet candidates for the fentanyl patch, he would consider Butrans there. Told him that sounded like a great place to start. He asked about cost/mgd care, so we discussed coverage & savings card program. OxyContin reminder for appropriate pts beyond Butrans. Also, he told me that he did sign up for OARS.
PPLPMDL0020000001	Cleveland	OH	44106	2/9/2011	i asked dr if he had started any patients on Butrans,post our lunch discussion? dr said no,he has to remember the name Butrans and also needed me to review the initiation guide as he couldnt remember who the appropriate patient was for Butrans.reviewed opioid naive and opioid experienced and dr said he has a lot of patients on tramadol,so he would consider Butrans there and try it in a few patients and let me know what happens.we discussed managed care coverage.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44130	2/9/2011	Quick call with Dr Panigutti. Introduced Butrans & delivered 5 core messages. Dr Panigutti stopped me & said that they do not treat any chronic pain at their practice. He said that Butrans sounded interesting but that since he only treats acute pain, he would not be able to use it. Reminder for OxyContin for the appropriate patients & seven available tablet strengths. Also spoke with Markie & Melissa regarding Butrans & indication and gave them an FPI for their reference.
PPLPMDL0020000001	Brooklyn	OH	44144	2/9/2011	Asked Dr Miguel if he had had any experience with Butrans since our last discussion when I introduced it to him. He said that he had forgotten but that he remembered that he did want to try it on a few patients who were taking around-the-clock Vicoden. I re-delivered the 5 core messages, presented initiation guide, & went over how to initiate treatment in different types of patients. Also went over titration, managed care, and appropriate patient types. He asked about adverse events, so I showed FPI 6.1. He also asked about managed care coverage. I went over commercial tier 3 coverage, savings cards for patients with commercial insurance or cash pay (told him they could not be used for any government insurance like Medicare or Medicaid). Asked him if he could think of some patients who were taking 2-4 Vicoden per day & who had commercial insurance- he said yes. I asked him if he would prescribe Butrans for those patients & he said he would.
PPLPMDL0020000001	Parma	OH	44129	2/9/2011	Spoke with Janet, pharmacist, & introduced Butrans. She checked her shelf & said that they do have the 5mcg. I reviewed with her the indication, dosing, strengths, appropriate patients,, adverse events, application, avoiding direct heat, CIII, & abuse/addiction potential. She said she can definitely see a place for Butrans in the pain management market, especially with Darvocet being removed. She also suggested that I call on Dr Bruce Long (RHU) & his PA Patty Paczos (Lutheran Hospital) who she is a patient of for arthritis. She said they had just had a discussion about needing to have a medication take the place of Darvocet for some patients. Let her know that I would tell Amy. She did not have any other suggestions for who to call on at this time. Gave her my card & asked her to call me with any questions.
PPLPMDL0020000001	Euclid	OH	44119	2/9/2011	Lunch with Doc and Barb Pritchard, PA. Introduced Butrans, indication, dosing, clinical trial, intiationa and conversion dosing, application and disposal. Asked doc where he would prescribe Butrans. He said he would use it in opioid naive patients. He asked about the MOA and wanted to know if Butrans is indicated for addiction also. I explained no and referenced the FPI. He asked if it is an agonist/antagonist. Barb thought Butrans might be good for patients admitted to hospital - they could get Butrans instead of their vicodin. I explained the potential to cause withdrawal and doc agreed. I explained the savings card program and commercial coverage, medicare/medicaid requires PA. Doc said he could think of appropriate patients and he would try it. Patients needing more than 20mcg/hr might be appropriate for Oxycontin patients.
PPLPMDL0020000001	Euclid	OH	44119	2/9/2011	Lunch with Doc and Barb Pritchard, PA. Introduced Butrans, indication, dosing, clinical trial, intiationa and conversion dosing, application and disposal. Asked doc where he would prescribe Butrans. He said he would use it in opioid naive patients. He asked about the MOA and wanted to know if Butrans is indicated for addiction also. I explained no and referenced the FPI. He asked if it is an agonist/antagonist. Barb thought Butrans might be good for patients admitted to hospital - they could get Butrans instead of their vicodin. I explained the potential to cause withdrawal and doc agreed. I explained the savings card program and commercial coverage, medicare/medicaid requires PA. Doc said he could think of appropriate patients and he would try it. Discussed the max dose of 20mcg /hr. Patients above that might be appropriate for low dose oxycontin.
PPLPMDL0020000001	Brooklyn	OH	44130	2/9/2011	Introduced myself & Butrans to Danielle. She said they had just received their shipment & they do have it on the shelf. She said that they have some customers on "the tablet form". I asked if she was referring to tablets that contain buprenorphine & she said yes. I reviewed with her Butrans indication, single-entity opioid, CIII, appropriate patients, doses/strengths. She thanked me for the information & I let her know I would return regularly to make sure that Butrans prescriptions were going through smoothly & to answer any questions.
PPLPMDL0020000001	Cleveland	OH	44104	2/9/2011	i talked to dr about Butrans fpi,black box warning,5 core messages,medication guide,initiation guide,Butrans savings cards and discussed formulary coverage for commercial plans,medicaid and dr asked about medicare coverage for Butrans and i told dr Butrans wasnt covered on Medicare partD plans.dr said once weely dosing is better in his eyes than patients dosing short-acting opioids around the clock as a lot of times they arent compliant with dosing regimen he gives them.dr said transdermal delivery is also a benefit in his opinion to patients.dr asked if Butrans was lipophilic? i told dr yes and asked why he was questioning this? dr said if patients are malnourised or thin and he decides to start them on Butrans,will the drug absorption be variable,based on those patients having thinner skin? i told dr skin is the barrier to diffusion but if he wanted more information i could fill out an electronic medical information request form and ask his question.dr wanted more information about
PPLPMDL0020000001	Akron	OH	44304	2/9/2011	This my first time in the hospital. Briefly met with Dr Smucker and let him know that we had a new product. Dr Smucker was interested in learning about it and had me set up an appointment with his receptionist Maggie. Also, scheduled lunch with Rachelle.
PPLPMDL0020000001	Westlake	OH	44145	2/9/2011	Holly is new NP at the practice. We reviewed Butrans 5 key messages. She thinks that she will be able to prescribe Butrans since it is a CIII. She had to run so no new info gained.
PPLPMDL0020000001	Cleveland	OH	44143	2/9/2011	Quick call....Discussed the Butrans indication and patient positioning. Also told him about the once weekly application. Gave him and FPI and initiation guide and asked if he would look over the information. He said he spoke with Brad, we reviewed the Butrans FPI and medication guide. He said he has not seen it and did not think they were auto shipped. He has not seen any scripts yet, but said that he would order the starting dose.
PPLPMDL0020000001	Cleveland	OH	44135	2/9/2011	Reminder about OxyContin as an option when Butrans may not provide adequate analgesia. I asked him to recommend Senokot S with opioids.
PPLPMDL0020000001	South Euclid	OH	44121	2/9/2011	Window call....introduced doc to Butrans - the indication and patient positioning. Explained the once weekly application and 7 days of burprenorphine delivery. Asked if he sees a place for Butrans for his patients. He said maybe. Nothing learned. Gave Butrans FPI.
PPLPMDL0020000001	Westlake	OH	44145	2/9/2011	Dr said that he has made some calls (talked to Ron?) and is going to get Butrans on formulary at St John Westshore. He said that he would like to gain experience with Butrans in house first where you can keep a good watch on the patients to see how they do and to figure out conversions and dosing. I asked what I can do to help him, he said he will contact me if they need more info but at this point he has done everything that needs to be done to get it on formulary.
PPLPMDL0020000001	Westlake	OH	44145	2/9/2011	Quick call, Dr said he does not like to use pain meds, but wanted to know what Butrans was. We reviewed the 5 key messages and the dosing.
PPLPMDL0020000001	Stow	OH	44224	2/9/2011	Dr said he has not started patient on Butrans yet. I asked him if he ever called the medical services about his question on how does Butrans affect the efficacy of other opioids. I asked if we could fill out a medical request form and they can email him his answer. He liked that, so we filled out MERF. HE said he doesnt think that this will have a huge part in the pain clinic because of the doses his patients come in on. I asked what the typical dose of Vicodin or Percocet patients are on when they get there and he said 8 pills a day. He said he does not see alot of patients who are opioid naive or on low dose. I asked where he was writing Ryzolt and he said he wrote that in conjunction with other opioids.I told him Ryzolt was not studied with other opioids. HE said this would be great in little old ladies. I said he needs keep in mind if they are re on medicare, he will more than likely have to have a prior auth. DISCused his patients and flexibility of Oxyctnoin and 7 strengths.
PPLPMDL0020000001					

	Westlake	OH	44145	2/9/2011	We reviewed the Butrans FPI, indication, dosing, warnings, medication guide. He said he could not think of a specific patient, but he said thinks it would be good for his little old ladies with compression fractures. We discussed managed care for Butrans and the savings program and the fact that patients on Med D may be a prior auth or not covered. He said he will probably not prescribe it for a few months to wait and see which Drs are using it. He also said he thinks that because duragesic is generic, managed care may want them to use it before Butrans. We did go over the initiation guide and the patients who might be appropriate for Butrans. He asked medical services department- if a patient has skin irritation from other transdermal systems, would they be likely to have skin irritation from Butrans. We discussed where OxyContin may be appropriate when Butrans may no longer provide adequate analgesia. I went over Butrans 5 key messages and the medication guide with Claudia.
PPLPMDL0020000001	Euclid	OH	44119	2/9/2011	Butrans discussion with pain mgmt clinic in the hospital. spoke with nurses, PA, and doc. See notes for Dr. Saeed.
PPLPMDL0020000001	University Heights	OH	44121	2/9/2011	Quick call...introduced doc to Butrans, the indication, CII status, and the once weekly application. Ask him if he thought he could use a product like Butrans in his practice. He said maybe and asked how much it costs. Briefly explained the savings card program. He asked about the availability of Oxycontin in pharmacy as some patients stated they were unable to get the product. I explained that we have to knowledge of any outages. Asled him for store specifics but he did not have any.
PPLPMDL0020000001	Euclid	OH	44119	2/9/2011	Spoke to Clarence, fill-in pharmacist, about the stocking of Butrans. He confirmed both the 5 and 10mcg are there but he had not seen or heard about. I discussed the recent launch, indication, positioning, dosing, and application and disposal. He did not know about the relay health program. I explained the savings card program for Butrans.
PPLPMDL0020000001	Fairlawn	OH	44333	2/9/2011	I introduced Butrans to the pharmacist, Jessica, and she informed me that she already had the 5mcg stocked. I asked if she would order the 10 and 20 mcg and she agreed she would.
PPLPMDL0020000001	Westlake	OH	44145	2/9/2011	Quick call, Dr wanted to know what Butrans was, I reviewed the Butrans FPI, indication, dosing, initiation, medication guide. I asked her thoughts and she thought it could be a good long acting option.
PPLPMDL0020000001	Cleveland	OH	44135	2/9/2011	Spoke with Erica, we reviewed Butrans 5 key messages and medication guide. She did not have any thoughts about it and said that she will just have to see what the Drs thinks about it. She said they do have a lot of pain patients who take short acting around the clock.
PPLPMDL0020000001	Akron	OH	44304	2/9/2011	Let Dr. Smucker know that we had a pain product called Butrans that I would like to discuss. he was interested and had me set up an appointment with his receptionist Maggie.
PPLPMDL0020000001	Cleveland	OH	44106	2/9/2011	I talked to dr about Butrans and asked if she has started any patients yet? dr said no she hasnt so I showed dr Butrans initiation guide and asked if she was thinking of an opioid naive,or a patient taking 1-2 tabs of Vicodin,that she could start on Butrans 5mcg/hr or a patient taking 3-8 tabs of Vicodin? dr said they prescribe some Vicodin in out-patient,but rarely,the residents mainly prescribe tramadol as its unscheduled.i asked dr if she had patients on 300-400mg tramadol? dr said yes.i told dr thats the patient to try Butrans 10mcg in or an opioid naive at the 5mcg/hr dose.dr said that made more sense and she would look for 1 patient to try Butrans in dr asked if Butrans was on formulary? i told dr no but that im working on this with pharmacy and pain management doctors to support Butrans and help get this on formulary.dr said that would make it a lot easier to prescribe in hospital.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44106	2/9/2011	worked pharmacy and pain management
PPLPMDL0020000001	Fairlawn	OH	44333	2/9/2011	I presented Butrans including the FPI and discussed both opioid naive and opioid experienced patients. After I questioned Dr. Domdera I discovered that he felt more comfortable prescribing Butrans for patients who are opioid naive, or currently failing on NSAID's or Cox2's. I asked for commitment for 2 patient starts by next Wednesday and he agreed.
PPLPMDL0020000001	Cleveland	OH	44103	2/9/2011	I talked to dr about Butrans fpi,black box warning,5 core messages, medication guide,Butrans REMS program,initiation/titration guide,Butrans patient savings cards and formulary coverage for workers comp,medicaid and commercial plan patients,dr is the Director of Pain Management at St.Vincent Charity Hospitals and told me if he starts prescribing Butrans,his colleagues(attending physicians)will start to write the drug.i told dr i met with Pharmacy,In-Patient, and dr said Jodie,Clinical Business Manager is the person he works closely with so that was good i shared the information with her.dr asked if Purdue was going to have speakers for Butrans as he would be interested in being a speaker for Butrans. I told dr that Purdue was going to have speaker programs and I would share his interest with my Manager.i told dr he clearly has to start a few patients on Butrans,opioid naive or experienced to get some clinical experience,dr agreed and said he would try Butrans in some patients and let me
PPLPMDL0020000001	Akron	OH	44303	2/9/2011	I introduced Butrans and the FPI to the pharmacist, Rod. I discussed strengths and titration. He told me they currently did not have any stocked but ordered both the 5 and 10 mcgs while I was there.
PPLPMDL0020000001	Cleveland	OH	44106	2/9/2011	I talked to dr about Butrans indication,black box warning and Butrans initiation/titration guide and asked if dr is he going to start 1 patient on Butrans,would that be an opioid naive or experienced patient?dr said he would consider either patient,but majority of his patients have tried at least 1 short-acting opioid.i asked dr to think of patients taking 300-400mg tramadol,opioid experienced,to start on Butrans 10mcg/hour and get some clinical experience with Butrans.dr agreed and asked what was insurance coverage for commercial plans,medicaid and medicare.i discussed each plan with dr and commercial plan patients using Butrans savings cards.i asked Lisa,patient care coordinator,who handles re-fill line and takes/responds to every medication change request daily-Lisa said there are 25-30 patients calling daily requesting a new medication,she pulls charts,talks to Med Assistants and then to doctors about an alternative medication,so i talked to Lisa about Butrans fpi and initiation
PPLPMDL0020000001	Richmond Heights	OH	44143	2/9/2011	Window call...told doc about Butrans - a once weekly application for treating chronic pain. Gave him a titration guide and discussed the appropriate pateint positioning. Nothing learned.
PPLPMDL0020000001	Cleveland	OH	44127	2/9/2011	dr said he knew about Butrans,buprenorphine,once weekly and transdermal application as my partner told him about.it.i asked dr had he started any patients on Butrans yet based on his discussions with Ashleigh?dr said no.i asked why and dr said he didnt think of opioid naive patients,as he would go to short-acting opioids first,then long-acting.i asked if dr had patients taking 1-2 tabs of Vicodin or Percocet daily? dr said yes.i told dr that these are patients that you could initiate Butrans 5mcg/hr and showed initiation/titration guide,dr said that made sense.i asked dr if he would consider opioid experienced patients,taking 3-8 tabs Vicodin or Percocet,to start on Butrans? dr said he has a lot of those patients in this office and yes would consider them,but depends on insurance as he has a lot of medicaid here and some commercial,so we discussed both plans.i asked dr to think of 1-2 patients to try Butrans in and i will follow-up in next week.dr agreed to this.
PPLPMDL0020000001	Cleveland	OH	44104	2/9/2011	i talked to dr about Butrans FPI,black box warning,5 core messages,medication guide,Butrans REMS program,initiation/titration guide,Butrans patient savings cards and formulary coverage for medicaid and commercial plans.dr said he has a lot of patients on Vicodin and Percocet and would think of Butrans for these opioid experienced patients.dr said he wouldnt think of Butrans for opioid naive,as he likes to go from NSAID's to short-acting opioids,1-2 tabs a day,then makes out at #4/day and will only give 60 pills monthly,nothing more than that.if patients are taking 4 pills of short-acting opioids and not getting pain relief,then he'll consider a long-acting opioid.dr said once weekly dosing is much more convenient and easier for patients than dosing q4-6h short-acting opioids and dr said he likes transdermal delivery better than pills.i asked dr to think of 1-2 opioid experienced patients to try Butrans in and get some clinical experience.dr agreed. i recommended Senokot-S
PPLPMDL0020000001	Stow	OH	44224	2/9/2011	Introduced Butrans, reviewed FPI, indication, boxed warning, dosing and titration guide. When I reviewed section on QT prolongation and family history and said that is a very importantnct thing to be discussing with all physicians. I asked where he would be using this in his practice and he said alot of the patients they see areon opioids so probably patients who are on Opioids. I reviewed the initiation of opioid experienced patients. HE said he liked the fact that it was once a week. HE asked if it will stay on that long. Also, asked about coverage. Reviewed coverage. HE said he would try it, Started to discuss Oxycontin and he changed the subject to Ryzoit and asked about it and wanted to discuss it more. I discussed what it is and patient types, managed care coverage. I asked if he has written it and he said no, he doesnt write alot of long acting tramdol
PPLPMDL0020000001	Independence	OH	44131	2/9/2011	Asked Dr Rob his thoughts on Butrans & if he has read any of the information I had given him. He asked me to refresh his memory. I delivered indication, seven days of buprenorphine delivery in one Butrans transdermal system, CII message/box warning. Showed him pg 6 in the initiation guide & told him how Butrans can be used in both opioid-naive & opioid-experienced patients. He asked the dosing, so we went over that & I explained titration to him. I asked if he could see a place for it & he said yes, but then walked away. Spoke with Maria & reminded her of Butrans & indication as well as savings cards.
PPLPMDL0020000001	Cleveland	OH	44106	2/9/2011	i talked to dr about Butrans indication,initiation/titration guide and where dr feels comfortable thinking of patients to start on Butrans.dr said either opioid naive or experienced,he would consider both as he likes transdermal delivery and once weekly dosing.dr said he has so many patients on Percocet and Vicodin,that he feels a lot of times patients dont really take their medication as they are supposed to do,around the clock whether it be q4-6h, and then they come to see him and are smiling,happy,but then say their pain is above 10.dr said its frustrating.i asked if dr could think of an opioid naive patient and someone taking 3-8 tabs Percocet or Vicodin daily and try Butrans in these 2 patients? dr agreed and said he'll prescribe but wanted to know insurance coverage for Medicaid,workers comp and commercial plans-discussed Butrans savings cards for commercial plan
PPLPMDL0020000001	Stow	OH	44224	2/9/2011	Spoke with Holly and she said she has not seen script for Butrans and will when she gets a script. I mentioned that alot of the pharmacies are stocking and have been auto shipped. She said it is their policy. She said it is their policy. She mentioned the reformulation of Oxycontin and patients were looking for OCs but it seemed to have died down. I asked if Drs have switched patients off of Oxycontin and she said no, most are staying on.Reminded of SenS in patients who are opioid induced constipation
PPLPMDL0020000001	Cleveland	OH	44106	2/9/2011	i talked to dr about Butrans fpi,black box warning,5 core messages,medication guide,Butrans initiation guide and Butrans patient savings cards.dr said once weekly dosing is much easier for his patients than around the clock dosing of Vicodin and transdermal delivery is much better in his eyes than pills.i asked dr if he was thinking of opioid naive or opioid experienced patients to try Butrans.dr said both patient types,so we looked at initiation guide and i asked dr to think of patients either opioid naive or taking 1-2 tabs of Vicodin,to start on Butrans 5mcg/hour or patients taking 3-8tabs of Vicodin daily,they could start on Butrans 10mcg/hr after proper tapering of their current opioids.dr said the dosing seemed easy but asked how much it cost? we discussed commercial plan patients using Butrans patient savings cards,medicaid patients needing prior authorization and discussed workers comp coverage.recommended Senokot-S
PPLPMDL0020000001	Westlake	OH	44145	2/9/2011	We reviewed the Butrans FPI, indication, warnings, dosing, initiation guide and medication guide. Dr thinks that his biggest problem with long acting is that patients will not want to come off of their short acting around the clock to try something long acting. We discussed those patients who might be able to try Butrans before going to vicodin around the clock. He said that he would try it and see if it has a place in his practice. We discussed patients when Butrans may not provide adequate analgesia and OxyContin as a Q12hr option.
PPLPMDL0020000001	Westlake	OH	44145	2/9/2011	We reviewed the Butrans FPI, indication, warnings, dosing, initiation, medication guide. The Dr had questions about QTc interval and we reviewed section 12.2 in the FPI. He said that he would try it and did not have any specific patients in mind and did not know where it would fit into his practice at this point. He will try it in a few patients and let me know then. We discussed OxyContin as an option to short acting opioids around the clock.
PPLPMDL0020000001	Independence	OH	44131	2/9/2011	Dr Jack said that he finally did get a chance to start reviewing the Butrans information I gave him. He said that he was reading about the morphine equivalents & showed me in the FPI section 2. He said that that was all the further he has gotten so far but that it has caused him to start thinking of places that he could use Butrans. I asked him what information specifically he needs in order to feel comfortable with prescribing Butrans & he said that by the time he reads all the information, he will have all the facts he needs to find the proper place for it. He asked that I continue to follow up with him & check in to see how he is doing in his information reading. I asked him to think of any specific questions that he might have so that I can address them when I return. Also spent time speaking with Maria about the practice & reminded her of Butrans as well.
PPLPMDL0020000001	Beachwood	OH	44122	2/10/2011	Spoke with Shelly and followed up on Butrans stocking. Asked her if she had received a shipment, but she said they did not. She checked their computer system & the shelves & said that it shows that no Butrans has ever been received. Butrans indication, dosing, appropriate patient reminder. Also let her know we have started promotion with physicians and asked if she would proactively order Butrans. She said she has been "burned" by too many "new" products & that she would wait for a prescription before ordering. I let her know that physicians are asking who has it stocked & that many other chains were auto-shipped.
PPLPMDL0020000001	Parma	OH	44129	2/10/2011	Introduced myself & Butrans to Lucy, a newly practicing nurse practitioner. Delivered 5 core messages & alerted her to black box warning. She said that she avoids prescribing narcotics when at all possible. I told her that she was right in being very cautious in prescribing any type of opioid & told her she should be just as cautious in prescribing Butrans. Presented initiation guide & showed pg 6 for initiating treatment in opioid-naive & opioid-experienced patients. We discussed appropriate patient types, managed care, and savings program. Dr Kushnar asked about the "new" OxyContin. I went over field card bullet points. Lucy asked how OxyContin was different from Percocet. I told her we do not have comparative data & showed Lucy an OxyContin conversion guide & showed her conversion ratio estimates & an example of converting a pt on Percocet around-the-clock to OxyContin. Also discussed OxyContin q12h dosing.
PPLPMDL0020000001					

	Parma	OH	44129	2/10/2011	Asked Dr Gigliotti to share his experience of using Butrans so far. He said that he has not yet prescribed it, but added that he is still excited about it. I asked him what patient type he was thinking of for Butrans & he got out the initiation guide I had given him & flipped through it. I reminded him that he had told me that he thought opioid-experienced pts may be the place to start & he said that he thought that was where he would use it. I told him this was a great starting point. I asked him what else he needed to know to feel comfortable enough to start prescribing Butrans. He did not respond. I let him know that I would return to follow up & that I wanted him to be completely comfortable in prescribing Butrans & that he was right in being cautious in prescribing as he would be with other opioids. He told me that he wishes he did not have a DEA number. I told him I empathized but reminded him that there are still pts who are appropriate & those are the pts we're focusing on
PPLPMDL0020000001	Cleveland	OH	44130	2/10/2011	Quick call with Dr Fedorko. He saw the Ryzolt Value Card in my hand & shook his head- I asked why & he said that insurance is always "giving him trouble". Focused him in on Medco, Medical Mutual & Blue Cross/Blue Shield where Ryzolt has 3T coverage. Reminded him to give the Ryzolt value card with each prescription for those patients with those plans. He then said that he just saw someone who was "hooked" on tramadol. I agreed that tramadol does have abuse/addiction potential & that he should use caution in prescribing any opioid, including Ryzolt, OxyContin, & Butrans. He asked if Butrans was a patch of OxyContin. I told him Butrans is a transdermal system that releases buprenorphine for seven days & reviewed indication with him. He said that was "good" because he would be more likely to prescribe it. He asked me again to set up an appointment so we could go over the details & I let him know that I have one in a few weeks.
PPLPMDL0020000001	Beachwood	OH	44122	2/10/2011	Followed up with Dr Yokiell regarding use of Butrans. I asked him what his experience has been thus far & he said that he has not yet prescribed Butrans & that he had a couple of questions for me. He asked what the recommendation was if a patient was already taking an opioid. I showed him in initiation guide the 2nd bullet point under the tables regarding tapering their current opioid to 30mg morphine equivalent. I asked his thoughts on that & he said it was "no big deal". I asked how long that would take. He said it would depend on what dose they were currently on but said if, for example a pt was on 60mg equivalent of morphine, it would take a few days to taper them. He also asked if a pt was taking Percocet if they could stay on it for breakthrough while on Butrans. I showed FPI 2.4 about supplemental analgesia. I asked if there was any additional information he needed to start prescribing Butrans & he said no & that he is ready to start prescribing now.
PPLPMDL0020000001	Westlake	OH	44145	2/10/2011	Dr has not tried Butrans yet, but said that he would. We reviewed the Butrans initiation guide again and discussed appropriate patients vs those who are taking more than 80mg of oral morphine equivalent. He thinks that he will start trying it for BWC patients who are taking tramadol or 3-4 5mg hydrocodone per day. Reminder that OxyContin is still an option for patients when Butrans may not provide adequate analgesia.
PPLPMDL0020000001	Parma	OH	44129	2/10/2011	Spoke with Rick regarding Butrans stocking. He confirmed that they did receive a shipment of 5mg & 10mcg strengths. Reminded him of indication & appropriate patient types. Also addressed application & adhesion (including taping edges with first aid tape if Butrans loosens). Also went over medication guide. I asked what other questions he had & he said he did not have any. Gave him my card & told him I would be available to answer any questions or address any problems should they occur. Also let him know I would return to follow up for feedback.
PPLPMDL0020000001	Parma	OH	44129	2/10/2011	Introduced Butrans to Dr Kushnar & delivered 5 core messages & alerted them to black box warning. Dr Kushnar immediately said, "We don't like narcotics here." I told her that I empathized with them & said that she is right in being cautious when selecting appropriate patients for any opioid. I told her she should be just as cautious with Butrans. I asked her if she treats pts for moderate to severe chronic pain. She said she does- that she starts with NSAID's & Cox-2's & moves to opioids only when absolutely necessary. She asked if Butrans is like Duragesic. I told her we have no comparative data & showed initiation guide pg 6. Asked how often pts she treats for chronic pain complain of inadequate analgesia on their current treatment & request higher dose or switch of medication. She said it happens often. She asked about managed care- I went over commercial tier 3 coverage & savings cards. Also read OxyContin field card in response to her asking about "new" OxyContin.
PPLPMDL0020000001	Mayfield Heights	OH	44124	2/10/2011	Quick call.... Asked doc what feedback she has gotten from recent starts on Butrans. She said she needed more savings cards because she has been writing it. She had not heard back yet but thinks one patient might have had a coverage issue. Gave her more cards and reminded her to do the commercial plan plans. Oxycontin reminder.
PPLPMDL0020000001	Mayfield Heights	OH	44124	2/10/2011	Spoke to WWarren and confirmed stocking of the 5 and 10mcg of Butrans. I told him that Dr. Laham asked if he was carrying Butrans and I was able to tell him that it was ordered. Warren stated they have not dispensed it yet.
PPLPMDL0020000001	Mayfield Heights	OH	44124	2/10/2011	Window call....asked doc what success he has had with Butrans since my last visit. He said he has not had an opportunity to prescribe it yet. I talked about the appropriate positioning - opioid naive and opioid experienced and commercial plans. He said ok/
PPLPMDL0020000001	Mayfield Heights	OH	44124	2/10/2011	Discussed the Butrans indication, positioning, dosing - for naive and opioid experienced, application and disposal of Butrans. She asked about coverage. I explained 3rd tier status for commercial plans and savings cards program. She liked the idea of a 7 day application but was concerned about coverage. She said she would likely use in opioid experienced patients and thought it would be good for former darvocet patients. She asked aboutuse in the elderly. I explained no dosing adjustment required and to use caution in elderly. Oxycontin reminder.
PPLPMDL0020000001	Parma	OH	44129	2/10/2011	Spoke with Karen about patient education & pain diaries. Also tried to get information about Jen Hula, the NP that joined the practice recently. Karen said that she is still waiting to get her DEA number assigned & does not actually even have her NPI# yet. Karen said that Jen filed for each of them awhile ago & she should be hearing back any day now. I reminded Karen of our conversation about Butrans at lunch & asked if she knew if Laura had used it at all yet or if they needed more savings cards. Karen said that she doesn't think any Butrans has been prescribed there so far, but that I would need to check with Laura to be sure. Laura came out of a patient room, said hello & that she needed to get to the other patient in the next room & then walked away. I had to leave to go to lunch, so I confirmed my lunch with them for next Friday with Karen & let her know I would be back to follow up but to call me in the mean time if she ran across any questions.
PPLPMDL0020000001	Parma	OH	44134	2/11/2011	Introduced myself & Butrans to Margarita. Reviewed indication, appropriate patients, dosing, initiation of therapy & application. I told her that I have started promoting in the area & that many pharmacy chains were auto-shipped, but since CVS was not, I asked her if she would order a box of each strength so that I could include their store in the list of pharmacies that have Butrans on the shelf. She agreed to do this. Discussed managed care & e-voucher.
PPLPMDL0020000001	Richmond Heights	OH	44143	2/11/2011	Quick call....introduced doc to Butrans. Explained the indication and patient positioning. He said he would use for opioid naive patients maybe. He asked how it differs from fentanyl. I explained there is no head to head data, butrans is a 7 day system and that a different molecule. He said he would look at the literature. Nothing learned.
PPLPMDL0020000001	Brooklyn	OH	44144	2/11/2011	Spoke with Kristen who said that she didn't think they had any Butrans in stock. I asked her to check because they may have received an auto-shipment. She checked & they did have the 5 & 10mcg strengths in stock. I reviewed with her the indication, dosing, application, & appropriate patients. Also went over savings cards for commercial insurance patients or those who are cash-pay. Gave her my card & let her know I would return to follow up with them.
PPLPMDL0020000001	Cleveland	OH	44113	2/11/2011	I talked to dr about Butrans fpi,black box warning,5 core messages,medication guide,initiation guide and Butrans patient savings cards.dr said he liked once weekly dosing option and transdermal delivery instead of pills around the clock.dr asked about insurance coverage for workers comp and commercial plans,so i showed Butrans savings cards for commercial plan patients.i asked if dr would consider opioid naive or experienced patients to start on Butrans? dr said he would consider both patients,so either Butrans 5mcg/hr or 10mcg/hr.i asked dr to think of a few patients to start on Butrans and i will follow-up with him,dr said he's out of town after today,until March 6th,so he'll think of patients today and then when he returns from vacation.i recommended senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	2/11/2011	worked orthopedic dept-see call notes on Dr.Bohl and Dr.Berkowitz
PPLPMDL0020000001	Cleveland	OH	44109	2/11/2011	i met dr at lunch with dr geho,dr campbell and mary jo slattery,cnp,in the senior health and wellness center,as dr is a 1st year resident and his specialty is gynecology/obstetrics,we discussed Butrans fpi briefly and black box warning. dr asked if he could use Butrans in post-op patients? i told dr no,he can't do that and that is a contraindication,so we discussed each one of those again in Butrans fpi.dr said he probably wouldnt have a place for Butrans in his practice as majority of his patients are pregnant.
PPLPMDL0020000001	Westlake	OH	44145	2/11/2011	Spoke with Amin and tech, they do not have Butrans stocked and have not seen any scripts yet. They will stock when a script comes in. We discussed Butrans medication guide. I asked if they could think of any patients on 3-4 5mg vicodin per day who might benefit. They could not off hand but they will think about it. Reminder about OxyContin as an option when Butrans may not provide adequate analgesia. I asked them to recommend Senokot S with opioid scripts and they do.
PPLPMDL0020000001	Cleveland	OH	44109	2/11/2011	i talked to dr about Butrans fpi,black box warning,5 core messages,initiation guide,Butrans patient savings cards and asked dr where he would feel comfortable trying Butrans? dr said in either opioid naive or experienced patients.i showed dr Butrans initiation guide and asked him to think of 1 patient with commercial insurance to try Butrans,dr agreed.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	2/11/2011	i asked dr if he started 1 patient on Butrans yet? dr said no but he has someone in mind thats coming in to see him next week,with commercial insurance, and patients taking 1-2 tabs Vicodin daily and not happy with taking Vicodin for pain.i told dr that was great,give patient Butrans savings card and patient information booklet and i will follow-up next week.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44106	2/11/2011	i talked to dr about Butrans's place in the out-patient and in-patient setting at University hospitals,dr said Butrans is a great option for patients who are either opioid naive,as he said he does see some of those patients,and majority of practice is opioid experienced so he'll be prescribing Butrans for them.dr said once weekly dosing,transdermal application are both benefits to his patients and he will support this drug to get on formulary in the hospital. we discussed the drug review form necessary for him to complete and give to pharmacy,for P&T committee review.
PPLPMDL0020000001	Westlake	OH	44145	2/11/2011	Quick call to follow up on getting Butrans on formulary at UH. He said it is all taking care of on his end and he will let me know if they need anything from Purdue.
PPLPMDL0020000001	Akron	OH	44319	2/11/2011	Briefly discussed Butrans with the physician through the window. Went over the indication and the delivery system and the Dr said he wanted to do his own research and asked if I could come back next Friday. Dr.said he is currently writing a lot of hydrocodone.
PPLPMDL0020000001	Akron	OH	44312	2/11/2011	Spoke with the receptionist Diane about scheduling a lunch since I have a product that Dr. Kile is unfamiliar with. As I was presenting what Butrans was, Dr. Kile came to the window and gave me a quick minute to just introduce the indication and the once a week delivery system. Diane is checking with the other physicians about a lunch opportunity.
PPLPMDL0020000001	Parma	OH	44129	2/11/2011	Spoke with Fred & followed up on Butrans stocking. Fred said that they did receive the auto-shipment but that Steve sent it back & was angry that he had been auto-shipped a CIII. Fred said that he even asked Steve to please keep the shipment because he feels there is a definite place for Butrans, but Steve refused. Fred said that Steve prefers to keep as few narcotics in stock as possible. Fred said they would have to have a regular flow of scripts to stock Butrans regularly. I let him know that I would follow up & asked if there were any physicians the area that he has thought of other than Dr Nickles who may be interested & he said that he had not. Asked him to think about this & told him I would be back to see if he thought of anyone. Also discussed OxyContin stocking- Fred said that obviously Steve likes to stock CII's even less than CIII's, so they have very few OxyContin on their shelf & Steve would rather lose business than keep more on hand.
PPLPMDL0020000001	Cleveland	OH	44109	2/11/2011	worked geriatric floor - see call notes on dr campbell, dr geho and mary jo slattery, cnp - discussing Butrans. saw Katie Austen,geriatric fellowship coordinator and talked about dates in April to have lunch with the fellows and discuss Butrans
PPLPMDL0020000001	Cleveland	OH	44109	2/11/2011	I talked to Mary Jo.CNP.about Butrans fpi,black box warning,5 core messages,Butrans initiation guide,Butrans patient savings cards for commercial insured patients and Mary Jo asked about medicare partd coverage for Butrans.i told Mary Jo there was no coverage on medicare part d for Butrans.i asked if she treated any patients less than 65,to be considered opioid naive or experienced where Butrans could be an option? Mary Jo said yes she had a lot of patients less than 65 and some patients she knows dont want to take Vicodin or Percocet so she thinks a transdermal application,once weekly,could be an option for them.i asked Mary Jo to think of 2 patients like that with commercial insurance to try Butrans,she agreed.recommended Senokot-S
PPLPMDL0020000001	Westlake	OH	44145	2/11/2011	I let Vanessa know that there is no patient assistance program for Butrans at this time. She will pass the info along to the Dr.
PPLPMDL0020000001	Cleveland	OH	44106	2/11/2011	worked pain management dept and pharmacy-in patient



PPLPMDL0020000001	Parma	OH	44129	2/11/2011	Introduced Butrans to Dr Rossi, delivered 5 core messages & alerted her to box warning. She said that she is tired of prescribing anything that is addictive. She said that for chronic issues such as low back pain she refers to pain management. She said she was looking forward to getting EMR so that she can look at the pharmacies where patients go to make sure they are not drug seekers. I asked her if she is enrolled in OARS-she said no & was not interested. I asked if there were any chronic pain conditions or patients that she does treat & she said a few. She asked if they could take other pain medications while on Butrans & I showed FPI 2.4. Discussed appropriate pt selection. She said many people will manipulate the patch or put it in their mouth to abuse it. I told her that those would not be patients for whom she should prescribe Butrans or any other opioids & asked her to think only of the patients she trusts & are appropriate when thinking of patients to try on Butrans.
PPLPMDL0020000001	Richmond Heights	OH	44143	2/11/2011	Discussed the core Butrans messages - indication, CII, 7 day Buprenorphine deliver, clinical trials. He asked how long it takes for patients to get analgesic effect. I referenced the FPI and the quantifiable amounts after 17 hrs. I confirmed that supplemental agents could be used for buthe said he prefers not to do that because it complicates patients medications(too many). He looked at the conversion dosing from other IR opioids and thinks the indication should be mild to moderate. I explained the positioning is for opioid naive or low dose IR opioids. He also asked if BWC is the only coverage. I explained the 3rd tier coverage with commercial plans and the saving cards for those patients. He committed to prescribing Butrans, probably for opioid experienced. Oxycontin reminder....appropriate for patients needing more than 20mcg/hr of Butrans.
PPLPMDL0020000001	Cleveland	OH	44109	2/11/2011	I asked dr what his thoughts were on Butrans,post our last discussion last Friday,and where it fit into his practice? dr said he liked once weekly dosing and transdermal delivery,compared to pills q4-6h,but he desnot prescribe a lot of narcotics so he's not sure who the right patient is at this time.I asked if dr would consider Butrans for an opioid naive patient? dr said he might,so I showed dr Butrans initiation/titration guide and looked at opioid naive patient and also told dr patients taking 1-2 tabs Vicodin or Percocet,could also start on Butrans 5mcg/hr.dr said that was easy and he'll try and think of 1 patient to try Butrans in and see what clinical results he gets from Butrans.I asked dr to focus on commercially insured patients to try Butrans and use Butrans savings cards. recommend Senokot-5
PPLPMDL0020000001	Cleveland	OH	44113	2/11/2011	I talked to dr about Butrans fpi,black box warning,5 core messages,medication guide,Butrans initiation guide and Butrans patient savings cards.dr said he likes transdermal delivery and in 1 application,thats much easier for his patients than dosing around the clock Vicodin.I asked dr if he would consider Butrans for opioid naive or opioid experienced patients? dr said probably his opioid experienced patients so I showed dr initiation/titration guide with this information and asked dr to think of patients taking 3-8tabs of Vicodin daily and starting them on Butrans after proper tapering of their current opioids,dr said that sounded easy and would try Butrans and see what clinical results he see's in patients.dr asked about insurance coverage for workers comp,medicaid,medicare and commercial plans,so we discussed each plan's coverage for Butrans.I recommended Senokot-5
PPLPMDL0020000001	Parma	OH	44129	2/11/2011	Introduced myself & Butrans to Dr Gallagher delivering 5 core messages & reviewing box warning. He asked how it compared to Duragesic. I told him we have no comparative data & presented initiation guide pg 6-I asked if that helped him with where to position Butrans & he said it did & that he was glad that it was for the more "moderate" side. He asked about side effects & I showed FPI 6.1. Also discussed titration & steady state in 72 hrs. He said he is the director of palliative care & is intrigued by Butrans & sees a definite place for it. I asked what types of patients he may use it for & he said he would use in both opioid-naive or opioid-experienced pts. Discussed initiation of treatment for both types including taper for those on higher doses of opioids. He asked about cost/mgd care so I reviewed coverage & gave savings cards for cash/commercial insurance. Also went over Butrans & savings cards with Lynn. Dr Gallagher asked me to follow up in a month so he has a chance to use it
PPLPMDL0020000001	Cleveland	OH	44109	2/11/2011	I asked if dr had seen any patients this week,where he considered Butrans as an option? dr said no as he worked mainly in the hospital and saw cash paying patients.I asked if dr could focus on an opioid naive patient or patient taking 1-2 tabs of Vicodin or Percocet,to start on Butrans 5mcg/hr and commercially insured? dr said yes and when he is in clinic,out-patient,next week,he'll remember Butrans as an option.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44109	2/11/2011	I asked if dr considered Butrans as an option for any patient,post our last lunch discussion last Friday? dr said no,he hasn't. I asked dr why? he said he just hasn't thought of Butrans,so I asked if dr needed any more data/information from me to feel comfortable finding that 1 patient to start on Butrans? dr said not clinically but he was concerned about insurance coverage and asked about workers comp coverage as he couldn't remember that,so we talked about workers comp coverage for Butrans and I asked if dr knows a patient is taking 1-2 tabs of Vicodin or Percocet and has workers comp insurance,will dr try Butrans in that patient? dr said he will consider it.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44109	2/11/2011	I talked to dr about Butrans fpi,black box warnings,5 core messages,butrans patient savings cards and formulary coverage.dr said he has some patients that he thinks could benefit from once weekly dosing and transdermal delivery as there are some patients that are afraid to try a stronger opioid like Vicodin or Percocet.so I asked dr to think of opioid naive or experienced patient,showed initiation guide and told him to focus on Commercially insured patient.dr agreed.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44109	2/11/2011	I asked dr if he started any patients on Butrans yet? dr said no,it comes down to insurance coverage and he has so many cash paying patients in the hospital that he cant think of Butrans for them.I asked dr to think of 1 commercially insured patient,in out-patient center,to start on Butrans,whether it be an opioid naive or opioid experienced patient.dr said he does see patients in out-patient center taking 1-2 tabs of Vicodin,so he would consider Butrans there.I told dr that was perfect but focus on commercially insured patient. recommended Senokot-s
PPLPMDL0020000001	Cleveland	OH	44109	2/11/2011	I asked dr if he read through Butrans fpi and had any questions or if he needed more information? dr said he only skimmed through fpi but thought once weekly dosing and transdermal application were 2 advantages for his patients.I showed dr Butrans initiation guide and asked if he would start an opioid naive or experienced patient on Butrans? dr said most of his patients are opioid experienced so he would start there,I asked if dr had patients on tramadol 300-400mg or Vicodin 3-8 tabs daily? dr said yes,I told dr that's where he could initiate Butrans 10mcg/hr after proper tapering of patients current opioids,dr said that was easy and he would start a few patients and let me know what clinical results he see's in patients.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44109	2/11/2011	I asked dr if she started any patients on Butrans per our lunch discussion last Friday? dr said no,but she has patients in mind that are taking tramadol and vicodin around the clock and she would rather have them on a transdermal medication.I asked dr to think of patients taking 3-8 tabs of Vicodin or 300-400mg tramadol to taper appropriately and start on Butrans 10mcg/hr and to focus on commercially insured patients so they can use Butrans savings cards.dr said she will and she also has some Medicaid patients in mind and desnot care if she has to complete a prior authorization form for them. recommended Senokot-5
PPLPMDL0020000001	Westlake	OH	44145	2/11/2011	Dr said that he has not heard back from the Butrans pt he started.He agreed to try more pts and will convert from vicodin or methadone.He said would like to add Butrans into his opioid rotation of hydrocodone and methadone.I asked Dr why OxyContin does not have a place in his practice, he said he does not like to write for any CII because he feels they are more addictive than CIII.I asked if he feels percocet is more addictive than vicodin and he said yes.He told me about a shingles patient he just saw who was supposed to be taking 3 percent per day who told him he was taking 2 mg percocet in the morning and 2 at night.He said he was willing to write for 4 a day for this patient because he was legit and he trusts him.I asked him, why not a 10mg OxyContin instead. He said it all has to do with the name.He said that he does not want the patient to tell anyone else that he is on OxyContin and then the word gets out that he Rx OxyContin. He said it is due to stigma. Reviewed Senokot5
PPLPMDL0020000001	Beachwood	OH	44122	2/11/2011	Spoke with Shelly who attempted to get me back to see Dr Tabbaa. She said that usually Friday at this time (end of day) is a good time to catch him, but he had an unusually difficult day & still had patients so he was not able to talk to me. Discussed Butrans patient information guide, application, rotation, & savings cards for commercial insurance & cash-pay patients. She said that she knows that Dr Tabbaa does want to talk to me about Butrans because he does have questions, but today was just not a good day. Gave her another card & asked her to please keep me in the loop and let me know if any questions about Butrans arise before our scheduled lunch.
PPLPMDL0020000001	Hudson	OH	44236	2/14/2011	Introduced myself & Butrans to Dr Chase-delivered 5 core messages & box warning. He said he is always apprehensive when prescribing opioids. I told him he was wise to be cautious & that he should be just as cautious when prescribing Butrans. Discussed appropriate patient types- pts taking high doses of NSAID's or Cox-2's who are not getting adequate analgesia & pts who are on a low dose of opioid around-the-clock for moderate to severe chronic pain. Presented initiation guide & discussed titration. He asked if they can be on other pain medications at the same time- I showed FPI 2.4. Also discussed application & adhesion as well as avoiding heat. He said he wanted to see if other physicians were prescribing it before he started & he would want Butrans to be out for longer before trying it. Also went over managed care & savings cards for both Butrans & OxyContin & let him know
PPLPMDL0020000001	Hudson	OH	44236	2/14/2011	Introduced myself & Butrans to Dr Russ. He said he had just read about it in a journal. He recalled some of the information & knew that it was a once-a-week transdermal system for pain. Reviewed 5 core messages & alerted him to box warning to ensure he understood that Butrans is still potentially addictive & abusable. Presented initiation guide and discussed titration & dosing. Also reviewed application, adhesion, & avoiding direct heat. He said he thought Butrans sounded like a great idea & that he would like to have fewer patients taking around-the-clock opioids for chronic pain. Discussed appropriate patients & appropriate pt selection. He said they use OARRS & also do urine drug screens at the office & find both to be very helpful. He said he would prescribe Butrans. Discussed managed care coverage & went over savings cards for both Butrans & OxyContin (for commercially insured/cash pay pts & not to be used for any government insurance including Medicare & Medicaid.)
PPLPMDL0020000001	Chagrin Falls South Euclid	OH OH	44022 44121	2/14/2011 2/14/2011	Quick call with Dr Rood. He said he had not prescribed Butrans yet but that he is thinking of it & will write it when the appropriate patient comes along. He said he had not questions at this time but thanked me for the follow-Introduced doc to Butrans - indication, CIII, positioning, dosing, application and disposal, coverage and savings card program. She asked why should she use Butrans over other opioids. I explained there is no head to head data and discussed the 7 days delivery of buprenorphine which is a alternative for patients not wanting to take pills ATC. She asked the difference from Fentanyl. Again, told her no head to head data, they are different molecules and Butrans is not a substitution for Fentanyl. Asked her if she could think of an appropriate patient. She said she would read the literature first. Provided savings cards, REMS, and initiation guide. Gave oxycontin patient type reminder.
PPLPMDL0020000001	Hudson	OH	44236	2/14/2011	Dr Seiple said he had not yet prescribed Butrans but was interested in it still. Reviewed 5 core messages & reminded him of black box warning & abuse/addiction potential. He recalled a majority of the information & actually told Dr Russ some of the key points when he sat down to lunch. He said that he feels that the once a week application was great for patients & that he likes that it is CIII. I reminded him to still be cautious when prescribing because it is an opioid. Also reviewed in detail application, adhesion, avoiding direct heat, titration, and appropriate patients who he could start on Butrans. He said that he would love to have fewer patients on around-the-clock Vicodin or Percocet & that he was looking forward to seeing how well Butrans works. Discussed managed care and savings cards for commercially insured patients & cash-pay as well as OxyContin Savings cards for
PPLPMDL0020000001	Chagrin Falls	OH	44023	2/14/2011	Spoke with Jeff & introduced Butrans. He asked if Cardinal was going to auto-ship them & I told him that at this point, I have not heard of CVS being auto-shipped, but that many other pharmacy chains have been. Reviewed with him indication, dosing, appropriate patients, CIII, abuse/addiction potential. He asked what specialties we would be targeting. I told him that because so many specialties treat patients who fit the indication, I would be targeting a variety of specialties & asked if he had any specific recommendations. He said he did not at this time. He said that Chris is now the pharmacy manager & that he would leave the ordering information, FPI, & my card and would ask Chris to order at least the 5 & 10mcg strengths. I asked him to call me with any questions & let him know I would be back to follow up.
PPLPMDL0020000001	Maple Heights	OH	44137	2/14/2011	Spoke with Dawn who said the pharmacist was unavailable. She verified that they did receive a Butrans auto-shipment & they do have it in stock. Discussed appropriate patients. Also gave OxyContin savings cards, drawing her attention to the expiration date. She said they go through a lot of savings cards there & appreciate them. She said to try back on a Wednesday to speak with the pharmacist.
PPLPMDL0020000001	Chagrin Falls	OH	44023	2/14/2011	Spoke with Anita & confirmed that they had both the 5mcg & 10mcg strengths of Butrans on the shelf. She said she had never heard of it, so she was glad I stopped in. I reviewed with her the indication, appropriate patients, CIII, abuse/addiction potential, application, adhesion (taping edges with first aid tape if necessary), & avoiding direct heat. She said she thought Butrans sounded "interesting" and that there may be a place for it in today's pain management market. Reviewed managed care & discussed savings cards & how she can go online to print. Gave her my card & FPI & asked her to call me if she has any questions & let her know I would follow up.
PPLPMDL0020000001	Akron	OH	44333	2/14/2011	I had the opportunity to discuss Butrans in depth with Dr. Ahmad. He liked the idea of switching patients from hydrocodone to Butrans. I went over the suggested conversions to give him an idea as to where to initiate therapy. He also seemed interested in starting opioid naive patients. He started to mention actual patients that were coming to mind.
PPLPMDL0020000001	akron	OH	44333	2/14/2011	Had the opportunity to ask Dr. Bashor a quick question through the window. I asked how he would feel about treating his moderate to severe chronic pain patients with a once a week transdermal delivery system. He was very interested and scheduled me in for 30 mins next Monday.
PPLPMDL0020000001	Cleveland	OH	44113	2/14/2011	worked pain management dept-dr daoud and pharmacy-out-patient
PPLPMDL0020000001	Cleveland Lakewood	OH OH	44107 44107	2/14/2011 2/14/2011	Spoke with Chuck, we reviewed Butrans FPI, dosing and medication guide. He told me about several Drs who he thought would be good to call on including Dr D'Silva, Rojas, Mansenerus, Neri. We reviewed OxyContin as an option to start acting around the clock. I left him an OxyContin conversion guide and OxyContin savings cards.
PPLPMDL0020000001	Cleveland	OH	44121	2/14/2011	Spoke to NRP about the Butrans indication, dosing, CIII status, patient type, and 7 day delivery. She asked how its different from duragesic. I told her no head to head data, different molecule, and that Butrans is 7 days. She is a diabetes specialist and does not treat chronic pain - acute pain occasionally.

PPLPMDL0020000001	Lakewood	OH	44107	2/14/2011	Dr said he would be more likely to prescribe Butrans for an opioid experienced patients. He said that he would write after a CIV, and thought that vicodin was a CIV. We discussed the fact that this could be used in place of vicodin and we reviewed the initiation guide. We reviewed the managed care for Butrans, and the savings cards. He did say he would give it a try.
	Cleveland	OH	44121	2/14/2011	Introduced doc to Butrans - indication, patient type, CII, 7 day delivery of buprenorphine. He compared it to a long acting vicodin. I said its a different molecule but would probably suit the same patient type. Discussed the clinical trials and asked where he would prescribe. He said for opioid experienced. He asked about the MOA and if Butrans is an agonist/antagonist. I referred to the FPI and read the MOA. He thinks Butrans would be useful for some of his patients. I discussed the commercial coverage and the savings cards. He said he would read the literature. Oxycontin patient type reminder( >20mcg Butrans might be an oxycontin patient)
PPLPMDL0020000001	Westlake	OH	44145	2/14/2011	Dr has not prescribes Butrans yet, he said he is waiting for a chronic pain patient to try it in. He said he thinks it might be good for those construction worker patients who he does not want to be taking vicodin throughout the day. We reviewed the adverse events for Butrans.
	Cleveland	OH	44113	2/14/2011	I talked to Aaron, Pharmacy Manager, and asked if Justin, Pharmacist, ordered Butrans, per our last conversation? Aaron said yes, they had Butrans in stock so I asked him to thank Justin and told Aaron that I spoke with Dr. Bohl and Dr. Berkowitz about Butrans as well as Dr. Shen and Dr. Daoud, so he should be seeing prescriptions for Butrans soon. I asked if Aaron could recommend Butrans, to physicians, for patients who are either opioid naive or experienced and he said he would do that. recommended Senokot-5
PPLPMDL0020000001	Lakewood	OH	44107	2/14/2011	Quick call while talking to Dr El-Gazzar. We reviewed the initiation guide for Butrans. He said that he would try it.
PPLPMDL0020000001	Cleveland	OH	44113	2/14/2011	asked Dale, PA, if he started any patients on Butrans? Dale said he talked to a few patients who were taking tramadol and a few on Vicodin, but none of these patients wanted to get off their oral medications and try Butrans. told Dale it was great he was offering Butrans as an option and to keep considering patients for Butrans therapy who meet indication. discussed initiation guide- opioid experienced patients and told Dale I would follow-up next week to see if he started 1 patient on Butrans. recommended Senokot-5
PPLPMDL0020000001	Fairlawn	OH	44333	2/14/2011	Introduced Butrans BRIEFLY with Dr. Oyakawa. I discussed the indication and the strengths. I asked him where he sees this fitting in and he didn't give me much more time. Amanda was able to fit me in at the beginning of March for a lunch appt.
PPLPMDL0020000001	Richmond Heights	OH	44143	2/14/2011	Spoke to doc and Judy....reminder them of our conversation about Butrans and where she might prescribe it. Asked her if she has reviewed the info I left. She said she had not and did not have to talk today. Advised her I would come back in a few days.
PPLPMDL0020000001	Akron	OH	44333	2/14/2011	Introduced Butrans and the FPI to Dr. Shah. He really liked the concept, the delivery and the fact that it is just once a week. Dr. Shah agreed this is a product he would likely use because many of his patients are on lose dose morphine and hydrocodone. I asked him to focus on just one or two patients who are currently taking low dose hydrocodone and he agreed.
PPLPMDL0020000001	South Euclid	OH	44121	2/14/2011	Discussed the Butrans indication, CII, 7 day delivery of analgesia, opioid naive and experience trials, dosing. He asked if it really stays for 7 days. I told him how to properly apply and care for the Butrans and also dispose of it. He asked about AE's and if it was similar to other opioids. I referred to the FPI and showed the table on AE's. He asked how it compares to fentanyl. I explained the different molecule, no head to head, and Butrans not a substitute for fentanyl. He asked how to write it. Reviewed same. I discussed the commercial coverage and savings cards. He said some patients dont want to take tablets and he is going to try it. Reminded him of the oxycontin patient type.
PPLPMDL0020000001	Fairlawn	OH	44333	2/14/2011	Spoke with Jeanette, who is the pharmacist there. Introduced her to Butrans, which she had not yet heard of. She was rushed and there were patients waiting so I only had a few minutes. She told me that they did not have any Butrans stocked but would stock it if she saw a script.
PPLPMDL0020000001	Cleveland	OH	44102	2/14/2011	dr is in practice with Dr. Kauffman now, so we discussed Butrans fpi, black box warning, medication guide, patient information booklet, Butrans initiation guide and Butrans patient savings cards. I asked dr if she was going to start 1 patient would she consider an opioid naive or experienced patient? dr said probably opioid experienced so we discussed Butrans initiation guide and I asked her to think of 1 patient to try Butrans in and get some clinical experience, dr agreed dr asked if Medicaid covered Butrans? we discussed Medicaid requirements with Prior Authorization for Butrans. recommended Senokot-5
PPLPMDL0020000001	Fairlawn	OH	44333	2/14/2011	I introduced Butrans and the FPI. I asked her if she is currently writing hydrocodone and she said she is. I asked if she would consider starting patients on Butrans over hydrocodone. Because I only had around a minute she was a little hesitant. I told her I had an upcoming lunch and she seemed excited to learn more about it.
PPLPMDL0020000001	Cleveland	OH	44104	2/14/2011	I followup up with dr, post lunch discussion last Monday, on Butrans and asked dr if he started 1 patient on Butrans? dr said not yet, but he does have a few patients in mind to try Butrans. I discussed initiation/titration guide with dr and asked if there was anything preventing him from starting 1 patient on Butrans? dr said no, he has 1 patient in mind and is going to start that person on Butrans next time patient see's him. I told dr I would follow up on 2/28/11 as im out of the field on 2/21/11 for Presidents day, dr said that would be fine. recommended Senokot-5
PPLPMDL0020000001	Westlake	OH	44145	2/14/2011	We reviewed the Butrans FPI, dosing, titration, initiation guide, adverse events. Dr said that he does have some patients who he thinks might be appropriate instead of vicodin around the clock. We discussed managed care and savings cards. We also reviewed the medication guide and initiation with Melany and Maureen.
PPLPMDL0020000001	Cleveland	OH	44114	2/14/2011	I asked Laura, Pharmacy Manager, who her biggest Vicodin and Percocet writers were in the area? Laura said Dr. Katz and Dr. Marshall send a lot of their patients to her, Dr. Patel and Dr. Nickels, Dr. Celeste, Dr. Talbot and Dr. Carson's patients come here too. I asked Laura to recommend Butrans, whether patients are opioid naive or experienced and showed her Butrans initiation/titration guide for reference, she agreed to do this. recommended
PPLPMDL0020000001	Cleveland	OH	44113	2/14/2011	I asked dr if he started any patient on Butrans yet? dr said he talked to 1 patient who was taking Vicodin, a couple tabs a day, and patient refused to get off pills and didnt want Butrans. told dr it was good he thought of Butrans as an option and although it wont work for every patient, I asked if he could think of another patient taking Vicodin, Percocet or tramadol- opioid experienced, that would consider Butrans as an option? dr said he would and showed him Butrans initiation/titration guide. recommended Senokot-5
PPLPMDL0020000001	Fairlawn	OH	44333	2/14/2011	I introduced Butrans to the pharmacist, Amy. There is another pharmacist there named Michael who I did not meet. I discussed Butrans Delivery, titration and application. She said Lababidi would be a good target (I saw him earlier).
PPLPMDL0020000001	Hudson	OH	44236	2/14/2011	Introduced myself & Butrans to Dr Tosino, delivering 5 core messages & box warning. I asked his thoughts & he said it sounded interesting. I asked which type of patient he would be more likely to prescribe it in & he said he was not sure. I asked him what questions he had & he asked how long it took to "work". Showed FPI 12.3. Also showed 2.4 & discussed use of supplemental analgesia. Presented initiation guide & walked through titration with max dose of one 20mcg system. He said it will all come down to coverage. I asked him how much commercial insurance he sees & he said "a majority". Told him that fortunately, with the Butrans savings cards, pts with commercial insurance will pay only \$15-\$20 out-of-pocket. Also discussed Medicare/Medicaid- prior authorization & not able to use savings card. He said that he wants to see how much pain management specialists use Butrans before he really starts to use it. Also discussed OxyContin for appropriate pts & OxyContin savings cards.
PPLPMDL0020000001	Akron	OH	44310	2/14/2011	Spoke with Dr. Blanda, Cara and Roxanne. Dr. Blanda treats little chronic pain. However he thinks he may have a few patients that could benefit from Butrans therapy. Dr. Blanda is difficult to access so my time was limited. I went over the FPI in depth with Cara, who promised to fill in the blanks for Dr. Blanda. I asked if I could come back next Monday to follow up and they agreed.
PPLPMDL0020000001	Cleveland	OH	44111	2/14/2011	Spoke with Jim, he is a floater but may be at this store permanently. We reviewed the 5 key messages for Butrans and the initiation. He said one of the issues with Duragesic is the adhesion. We reviewed the medication guide and applying the transdermal system and what to do about problems with adhesion per the medication guide. He did not see Butrans on the shelf.
PPLPMDL0020000001	BEACHWOOD	OH	44122	2/14/2011	Quick call with Jessica who said Sandy was too busy to speak with me as they were short-staffed. I inquired about Butrans & asked if there had been any activity. Jessica confirmed that they still have the 5mcg & 10mcg strengths in stock. I asked if they needed any more OxyContin savings cards, but she said I would have to ask Sandy. She said that I should stop back on a Wednesday after 2 for a better chance of getting some time with
PPLPMDL0020000001	Cleveland	OH	44114	2/14/2011	I talked to dr about Butrans fpi, black box warning, 5 core messages, medication guide, Butrans initiation guide and Butrans patient savings cards for commercial plan patients. dr asked if workers comp or Medicaid covered Butrans so we discussed both. I asked if dr would consider 1 patient that was opioid naive or experienced to try Butrans in? dr said she wouldnt start an opioid naive patient on a long-acting medication or patients taking 1-2 tabs hydrocodone or oxycodone if these patients were fine taking 1-2 pills a day, dr said she doesnt see a reason to switch therapies. dr said she would start an opioid experienced patient, someone taking 3-5 tabs of Vicodin or Percocet daily, showed dr Butrans initiation guide and discussed proper tapering and initiation of Butrans. dr said she would think of 1 patient to try Butrans in and I told her I would follow-up next week. recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44113	2/14/2011	talked to dr about Butrans fpi, black box warning, 5 core messages, medication guide, Butrans initiation guide, formulary coverage for Medicaid and commercial patients and told dr Butrans patient savings cards can be used by commercial plan patients. discussed initiation guide and dr said he would probably try Butrans in a patient who is opioid experienced so we discussed proper tapering and initiation of Butrans. I asked dr to think of 1 opioid experienced patient with commercial insurance to use Butrans savings card, dr said he would as he thinks once weekly dosing and transdermal delivery are 2 benefits to his patients. recommended Senokot-5
PPLPMDL0020000001	Akron	OH	44333	2/14/2011	Spoke with Dr. Lababidi about where and who would be ideal patients to initiate therapy with Butrans. He had already had a lunch with Kristen and was familiar with Butrans. He was concerned about using it in conjunction with other SAO. When I clarified it sounded like his main concern was because buprenorphine binds so tightly he thought other medications would be ineffective. I told him I understood his concern but we didn't have any studies specifically looking at what he was referring to.
PPLPMDL0020000001	South Euclid	OH	44121	2/14/2011	Doc came to breakfast. He does cardiac testing. Introduced him to Butrans and its indication, CII status, patient type, dosing, 7 day delivery of analgesia. He does not treat much chronic pain but asked about the cost. I explained the commercial coverage and savings cards program. He also wanted to know the MOA- I referenced the FPI and the clinical pharmacology. He wanted to know about the abuse potential. I explained that it is still a CII narcotic and has the same risk potential as other opioids. Reviewed the box warning. He likes hearing about new products and thinks that Butrans will be a good product.
PPLPMDL0020000001	Cleveland	OH	44114	2/14/2011	I talked to John, PA, about Butrans fpi, black box warning, 5 core messages, medication guide, Butrans initiation guide and patient savings cards for commercial plan patients. John said transdermal delivery is ideal in his mind instead of pills every day for his patients and once weekly dosing is more convenient than dosing pills around the clock. I asked if John would try Butrans in an opioid naive or experienced patient? John said he would probably think of someone opioid experienced, so I showed Butrans initiation guide and we discussed that section. John asked about workers comp, Medicaid and commercial plan patients getting coverage for Butrans so we discussed everything. John said he'll try Butrans in a patient and let me know what clinical results he see's. recommended Senokot-5
PPLPMDL0020000001	Beachwood	OH	44122	2/14/2011	Spoke with Donny Wallace, Dr Warren's nurse & introduced Butrans. Delivered 5 core messages & asked Donny his thoughts & if he thought Dr Warren would be interested to hear more about Butrans. He said he felt there was a place for Butrans in Dr Warren's practice based on the patients they see. Donny said they see many patients who take around-the-clock pain medications such as Vicodin & Percocet & he feels that the once every seven days dosing is an option patients would like to have. Donny said that he would speak to Dr Warren & recommend that he speak with me to learn more about Butrans. Donny took my card & Butrans initiation guide & will call me to schedule an appointment with Dr. Warren.
PPLPMDL0020000001	Beachwood	OH	44122	2/15/2011	Introduced Butrans to Dr Bassett & delivered 5 core messages. Also alerted her to black box warning & advised her to use caution in prescribing Butrans, as she would with any other opioid. She said she thought that having a once-a-week option was great for certain patients. Discussed importance of appropriate patient selection. Presented initiation guide & discussed starting doses for different types of patients & for patients taking over 80mg oral morphine equivalent having OxyContin as an option for some patients. Dr Bassett said she doesn't treat a lot of pain, but would consider choosing Butrans for some of her chronic pain patients.
PPLPMDL0020000001	Garfield Heights	OH	44125	2/15/2011	Spoke with Dave who said he had not yet ordered Butrans, nor has he seen any prescriptions. Reviewed indication as well as appropriate patient type with him. He had no specific recommendations of what physicians in the area I should try to speak with. Encouraged Dave to order Butrans before getting a prescription, as other pharmacy chains were auto-shipped, but he still said he would not do so.
PPLPMDL0020000001	Garfield Heights	OH	44125	2/15/2011	Spoke briefly with David who said he had not time to talk to me today, but he did confirm that they received their Butrans auto-shipment & they do have it on their shelf. Butrans indication reminder. Asked a better time to stop in but he did not answer.

	Warrensville Heights	OH	44122	2/15/2011	Introduced Butrans to Dr Bennett & delivered 5 core messages & alerted her to box warning. She said that overall she is "done" prescribing opioids. She said pts take too many & lie about their pain. I agreed that prescribers must be cautious in prescribing all opioids & told her she should be just as cautious with Butrans. I asked if she has any patients at all who she trusted and who were legitimately in need of pain medications around-the-clock for a chronic condition & she agreed that she does have some (ie older cancer patients who she trusts). I asked her to think of those types of patients as we discussed Butrans. She said that was fair. Presented initiation guide pg 6 as well as titration. Also discussed application, adhesion, avoiding direct heat. She asked about managed care, so I reviewed tier 3 coverage & savings cards for pts with commercial insurance or cash pay (no government insurance including Medicare & Medicaid).
PPLPMDL0020000001	Westlake	OH	44145	2/15/2011	Spoke with Jenna, and Terri the tech, Jenna usually works at the Avon Lake Giant Eagle. Terri checked the stocking and they do have the 5 and 10mcg in stock. We reviewed Butrans FPI, and medication guide. We discussed the appropriate patients for Butrans and the initiation guide. We discussed the application of the transdermal system and the demo patch. We discussed OxyContin as an option when Butrans may not provide adequate analgesia and left an OxyContin conversion guide as a reference. She said that Dr Carbone might be good to call on in the Avon area.
PPLPMDL0020000001	Warrensville Heights	OH	44122	2/15/2011	Introduced Butrans to Dr Jackson & delivered 5 core messages, also alerting him to box warning. He said that as a surgeon, he does not treat chronic pain. However, he said that he was very familiar with buprenorphine as he has been using buprenex for years. He said he thinks it is a wonderful medication for pain. Gave him an FPI for his review. Also discussed OxyContin for the appropriate patients and reminded him of seven available tablet
PPLPMDL0020000001	Cleveland	OH	44106	2/15/2011	talked to dr about Butrans being an option for his patients and dr said he has a few patients in mind to discuss Butrans with today,dr said he likes once weekly dosing of Butrans and transdermal delivery instead of pills around the clock,dr said he thought of one patient last week to start on Butrans but the patient was too far down the pain severity scale that she really needed to be on higher doses of long-acting opioid,but he was thinking of Butrans initially..told dr that great he's remembering Butrans is an option for the appropriate patient and we discussed Butrans initiation guide and Butrans savings cards.
PPLPMDL0020000001	Shaker Heights	OH	44122	2/15/2011	Spoke with Michelle who said Dr Agrawal was not in so i could not follow up with him about Butrans. She said he has not written any prescriptions for it. I reminded her that he probably has not been given all the information necessary for him to feel comfortable in prescribing Butrans as neither Charmaine nor I have spent a lot of time reviewing the information with him. She said I should stop back another day, as today was not a good day, and she recommended that I come back in a week or two. Reviewed patient type & indication with her.<font color=blue><b>CHUDAKOB's query on 02/24/2011</b></font>Who is Michelle?<font color=green><b>ASPEGAS's response on 02/27/2011</b></font><b>Michelle is Dr Agrawal's medical assistant.</b><font color=blue><b>CHUDAKOB added notes on 02/28/2011</b></font><b>OK. Thanks. When you make a call on a non HCP, you have to put the title of the person you spoke with in the call note.
PPLPMDL0020000001	Mayfield Heights	OH	44124	2/15/2011	Asked Debbie if she reviewed the Butrans literature I gave last time. She apologized and said no. Gave her another guide and read the indication and discussed the positioning. She promised she would read.
PPLPMDL0020000001	Cleveland	OH	44195	2/15/2011	worked pain management and physical medicine&rehabilitation departments
PPLPMDL0020000001	Cleveland	OH	44106	2/15/2011	talked to dr,who is a fellow and when he finishes in May 2011,he's moving back home to Louisville,KY,about Butrans FPI,initiation guide and Butrans patient savings cards,dr said Dr.Hayek,Chief in Pain management,has discussed Butrans with him and he thinks this is a great option for patients as its a transdermal system and once weekly dosing option.I asked if dr could try Butrans in 2 patients and showed initiation guide,to get some clinical experience,we discussed medication,workers comp and commercial plan coverage for Butrans
PPLPMDL0020000001	Cleveland	OH	44103	2/15/2011	I talked to Dave,Pharmacy manager,briefly about Butrans stocking and Dave said he did order Butrans but didnt have any scripts come through yet,so I assured Dave I was working the downtown territory,hospitals and offices and asked him to recommend Butrans for opioid naive or experienced patients who meet Butrans indication,showed Butrans initiation guide,recommended Senokot-S
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/15/2011	Spoke with the pharmacist Christina who was rushed and gave me little time. I introduced Butrans and the FPI. I asked if they had it stocked and she said no but didn't actually check.
PPLPMDL0020000001	Cleveland	OH	44130	2/15/2011	Dr Diab said he has still not prescribed Butrans. He said he did appreciate the reminder. I asked him what he was waiting for & he said he forgot. He asked me what the doses were & I showed back of initiation guide & showed him the 5, 10, & 20mcg/hr systems as well as the prescription example written out. I asked him if he wanted to put an initiation guide in his pocket for a constant reminder. He laughed, declined, & thanked me for the reminder. Butrans reminder with Barb as well.
PPLPMDL0020000001	Westlake	OH	44145	2/15/2011	Quick call with Gail as today was a bad day, I left Butrans information and she said she had read about it.
PPLPMDL0020000001	Euclid	OH	44132	2/15/2011	Spoke to Tim about stock Butrans. Explained that I just talked to Dr. Bernie, in the building, who committed to trying Butrans and wanted to know if Tim's pharmacy was stocking it. Tim ordered the product while I was there and wanted to know what he needs to tell patients. I explained how to appropriately apply Butrans and care for it. He also asked about coverage. Explained the commercial coverage and the savings cards. He does not like savings cards as he does not have the software to process them and requires him to do double work.
PPLPMDL0020000001	Cleveland	OH	44106	2/15/2011	talked to dr about Butrans initiation guide and dr said he is starting to talk to patients about Butrans as he thinks the once weekly dosing option and transdermal delivery are optimal for his patients,instead of his patients taking pills around the clock,i asked dr if i could follow-up on Thursday to see if he started anyone and he said that would be fine,we also discussed the formulary process at University Hospitals main campus to get Butrans reviewed by the P&T Committee next week.
PPLPMDL0020000001	Cleveland	OH	44106	2/15/2011	talked to dr about Butrans FPI,initiation guide and Butrans patient savings cards,dr said some of the physicians in the department told him about Butrans and he likes that this is dosed every 7 days and is transdermal.I asked if dr would consider an opioid naive or experienced patient to start on Butrans? dr said probably opioid experienced,at least initially,so we discussed Butrans initiation guide and discussed Butrans patient savings cards for commercially insured patients and medical requirements for prior authorization for Butrans and workers comp patients,recommended Senokot-S
PPLPMDL0020000001	Euclid	OH	44119	2/15/2011	Quick call....discussed the Butrans indication and positioning. Asked him if he would prescribe it for naive or opioid experienced patients. He said maybe both. Told him about the commercial plans and the use of the savings cards. Ryzolt patient type reminder.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/15/2011	Spoke with Pat and introduced Butrans and FPI. Other pharmacist's there include Barry, Mike and Brad. He though Butrans was a great product and that there was a definite need in the market for a product like this. He encouraged me to call on Dr. Pitt.
PPLPMDL0020000001	Cleveland	OH	44195	2/15/2011	talked to dr about Butrans FPI,black box warning,5 core messages,medication guide,initiation guide and Butrans patient savings cards,dr said she liked once weekly dosing and transdermal delivery for her patients,we discussed Butrans initiation guide and savings cards for commercial plan patients,i asked dr if she could think of 2 patients to try Butrans and i will follow-up next week,dr agreed,recommended Senokot-S
PPLPMDL0020000001	Euclid	OH	44117	2/15/2011	Quick call....discussed the Butrans indication and patient type. Explained the 7 day delivery of Burprenorphine. He asked about BWC coverage. I told him that BWC is paying for Butrans. Gave him another initiation guide and REMs packet, nothing learned.
PPLPMDL0020000001	Lakewood	OH	44107	2/15/2011	Dr asked me to leave Butrans savings cards and reminders at this Lakewood office. He sees new patients on Mon and Tues. He committed to prescribing Butrans for a new patient instead of vicodin around the clock
PPLPMDL0020000001	Cleveland	OH	44106	2/15/2011	talked to Amy,Pharmacy Manager,about Butrans initiation guide and i asked if Amy could recommend Butrans when she felt patients were appropriate whether they be opioid naive or opioid experienced,Amy said she does sometimes talk to patients who complain to her about taking pills and dont like that so she would think of Butrans as an option then. we discussed Butrans savings cards and i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44103	2/15/2011	talked to dr about his opioid experienced patients and asked if he started anyone yet? dr said he did talk to a few patients who were taking Vicodin,about Butrans but they didnt want to stop taking their pills,so dr said he has to think of a few other patients who are willing to try Butrans and he would still give them some short-acting opioids for breakthrough pain,we discussed medicaid coverage for Butrans and commercial plan patients using Butrans patient savings cards,recommended Senokot-S
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/15/2011	Dr. Saunders chimed in while I was conversing with his partner, Dr. Johnston. He was doing charts as I was talking and came over very interested. He and Dr. Johnston were both interested in converting some of their hydrocodone patients to Butrans. This gave me an opportunity to discuss the conversion guide with them.
PPLPMDL0020000001	Cleveland	OH	44106	2/15/2011	worked pain management dept-see call notes on Dr.Hayek and Dr.Saghal, worked in-patient pharmacy-see call notes on Wes and Ron
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	2/15/2011	Introduced Butrans and FPI to Dr. DiLauro. I asked her where she would see herself using Butrans and she said for both opioid naive patients and low dose hydrocodone. I told her those were the ideal patients.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	2/15/2011	Introduced Butrans and the FPI. Dr. Azem came up to the window and took a titration guide and I was able to go over the indication and the once a week delivery. I scheduled a lunch for next month.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	2/15/2011	Spoke to Dr.Cyndi briefly in the hallway. Introduced Butrans and FPI, but had very limited time. After going over the indication and explaining the once a week delivery system Dr seemed interested and took a FPI and titration guide. I told her to take a look at them when she had time and asked if i could follow up next week and she agreed.
PPLPMDL0020000001	Euclid	OH	44132	2/15/2011	Discussed the Butrans indication and the 5 selling messages. Doc said he does not have many opioid naive patients but would likely prescribe Butrans there. He asked about AE's..i referred to the FPI and showed the table on AEs. He asked if the Butrans stays on for 7 days. I explained how to apply, secure, and dispose of butrans as appropriate. His main concern was coverage as he has a lot of BWC. I told him the BWC is paying for Butrans. Also discussed the commercial coverage and the savings with the card. He wanted to know if the downstairs pharmacy has it. Told him if will have them be sure to order it. Oxycontin and ryzolt patient type reminders. Gave REMS and initiation guides.
PPLPMDL0020000001	Cleveland	OH	44103	2/15/2011	asked dr if she started any patients on Butrans? dr said she has asked several patients if they would try butrans and patients are worried that Butrans wont give them pain relief over 7 days and that the transdermal system will fall off. I showed dr the Butrans FPI,noting that Butrans is 7 days of buprenorphine delivery and if dr wants to give short-acting opioids or non-opioids during initiation of therapy or maintenance of therapy she can,dr said she will continue talking to patients about Butrans as she like transdermal delivery and once weekly dosing,we discussed managed care coverage,recommended Senokot-S
PPLPMDL0020000001	Warrensville Heights	OH	44122	2/15/2011	Introduced Butrans to Dr Brookes & delivered 5 core messages. Dr Brookes immediately said that he had heard about Butrans and read about it in a journal & was excited to hear more about it. He said he is very familiar with buprenorphine & thinks it is a fantastic medication. Presented initiation guide & walked through initiating treatment with Butrans in both opioid-naive & opioid-experienced patients. He said he had no problem putting an opioid-naive patient on Butrans. He said he wanted to start prescribing Butrans when he first read about it, but always waits to be detailed before writing & was excited to start prescribing "right away". Discussed managed care coverage & went over savings cards (only for commercial insurance/cash pay & no government insurance). Also discussed likelihood of prior authorization being required for Medicaid/Medicare Part D & he said he has no problem with that as his staff is well-trained in doing the paperwork.
PPLPMDL0020000001	Cleveland	OH	44124	2/15/2011	Discussed the Butrans indication and other 4 selling messages. Gave him an initiation guide and asked if he would prescribe for opioid naive or opioid experienced. he said he does not have many opioid naive. Explained the initiation dosing.
PPLPMDL0020000001	Cleveland	OH	44195	2/15/2011	talked to Anne,NP,about Butrans being an option for her opioid experienced patients as Anne said that usually what she see's every day. Anne said she hasnt talked to any patients yet about Butrans as patients haven't complained of medications not working or requested a change in medication,showed Butrans initiation guide and asked Anne to consider a couple patients to try Butrans in, that meet Butrans indication and are appropriate for therapy,Anne agreed to do so,recommended Senokot-S
PPLPMDL0020000001	Akron	OH	44310	2/15/2011	Introduced Butrans and the FPI to Char. Discussed converting low dose hydrocodone patients to Butrans. Although I was speaking directly to Char, Dr Cremer was right there doing charts. He chimed in to ask about coverage. It sounded like there was definitely a place for Dr. Cremer to use Butrans in his practice.Char took my name and number in case of questions and said she would ask Dr. Cremer about an appt.
PPLPMDL0020000001	Cleveland	OH	44195	2/15/2011	talked to Joan,NP,about how many patients she treats daily that complain of medication not working or request a medication change? Joan said a lot of patients want to switch medications,10-15 daily on average,so she will consider other options if appropriate for patients.i asked Joan to consider Butrans for a couple of these patients if they meet Butrans indication and she feels Butrans is an appropriate option.showed intiation guide and discussed Butrans patient savings cards,recommended Senokot-S
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/15/2011	Introduced Butrans and the FPI. Dr. Johnston seemed very interested and immediately started identifying hydrocodone patients as good candidates. In addition, he like that Butrans has been studied in opioid tolerant patients. He mentioned that this gives him a great option when treating pain patients.

	Cleveland	OH	44195	2/15/2011	asked dr how many patients request a medication change,daily,or complain current medication isnt working? dr said a couple a day, as he doesnt have many patients on narcotics.dr said he does a lot of surgeries,injections,blocks,stimulators and is trying to get his patients off narcotics,so he doesnt have a lot of people asking for medication changes.i asked dr to think of 2 patients,opioid experienced that meet Butrans indication and showed dr Butrans initiation guide,to consider initiating Butrans,dr agreed.recommended Senokot-5
PPLPMDL0020000001	Mayfield Hts	OH	44124	2/15/2011	Window call. Discussed the Butrans indication and the selling messages. Asked how his Butrans trial. Nothing learend.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/15/2011	Introduced Butrans and the FPI. As Dr. Pitt and I started conversing he told me that there was a small place for this in his practice because most of his patients are on more than the equivalent of 80 mg of morphine. He told me that one a patient fails on Tramadol he will go to codeine (Tylenol 3). He committed for the few patients that are at this point he would consider Butrans.
PPLPMDL0020000001	Parma	OH	44134	2/15/2011	Dr Scanlon apologized for not prescribing Butrans yet. I asked what questions he had & he said he really had none, it was just a matter of him not remembering. I asked him how many of his pts who see him for moderate to severe chronic pain ask for a change in medication or increase in dose. He said "many" of them. I asked him to consider those pts & think of Butrans if they are appropriate. He said that was a good idea. I showed him pg 6 of initiation guide & FPI 2.2, 2.3 & 2.4 and walked him through how to start opioid-naïve as well as opioid-experienced pts on Butrans depending on their current dose of opioid. Discussed tapering to 30mg oral morphine equivalent & supplemental analgesia. I asked if he felt comfortable and confident now in starting one or two of those patients that we talked about on Butrans & he said yes-i told him i would follow up. Gave pt information booklets which he liked Reminded him about Butrans savings cards & OxyContin savings card for appropriate pts
PPLPMDL0020000001	Cleveland	OH	44195	2/15/2011	i talked to JoAnne,NP,and asked how many patients complain of medication not working or request a medication change? JoAnne said almost all of her patients,but probably 10-15 a day request a change in medication.i asked JoAnne to consider Butrans as an option for a couple of these patients,as long as they meet Butrans indication and showed Butrans initiation guide.we discussed Butrans patient savings cards for commercial plan patients.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44195	2/15/2011	talked to Gail,NP,and asked how many patients ask her daily for a medication change and complain of current medication not working? Gail said probably 10 or more patients daily,so i asked her to consider Butrans as an option for a couple of these patients,as long as they meet Butrans indication.showed initiation guide and discussed Butrans patient savings cards for commercial plan patients.recommended Senokot-5
PPLPMDL0020000001	Bedford	OH	44146	2/16/2011	Dr Haddad said he has not had the chance to read the Butrans information I gave him. Reminded him of indication, CIII single-entity opioid, once-a-week application. Asked him to think of Butrans when an appropriate patient presents who he is ready to put on something like hydrocodone or oxycodone. He said he could do that. I discussed dosing & initiating treatment. He asked about managed care coverage so I went over commercial tier 3 coverage & savings cards for appropriate patients. Asked him who in the office would be most likely to hand them out with prescriptions & he said Roberta. Went over savings cards with Roberta before I left.
PPLPMDL0020000001	Cleveland	OH	44125	2/16/2011	Spoke with Betsy who confirmed that they saw their first prescription for Butrans 10mcg. She said that Dr Samuel wrote it for a patient who was taking a low-dose around-the-clock oxycodone. She said she is anxious to hear patient feedback. I told her that I am as well and asked her to please call me with any feedback she receives. She said she does still have some savings cards for Butrans & I reminded her that she can go online to print more.
PPLPMDL0020000001	Cleveland Heights	OH	44118	2/16/2011	Let her know I would return to follow up.
PPLPMDL0020000001	Cleveland Heights	OH	44118	2/16/2011	Met Drs. Grant and Harris in their lab. Asked them what questions and or concerns they had about prescribing Butrans as they both previously expressed interest. Dr. Harris said none, yet. He has not come across the right patient. Dr. Grant said the insurance coverage is going to be a problem and that patients wont be able to afford it. I explained that Butrans is well covered commercially and reminded them both that I previously left savings cards that each patient should get. Also reminded of the oxycotin savings cards and patient type.
PPLPMDL0020000001	Cleveland	OH	44195	2/16/2011	I talked to Kathy about appropriate patients to start on Butrans,showed initiation guide and discussed managed care coverage for commercial plans,medicaid and workers comp.Kathy said Dr.Mekhill usually wont start patients on a medication that he's not seen on the market for at least a few years,so she's not sure he will start many patients,but Dr.Minzter who Kathy works with as well,does like Butrans being a transdermal application and once weekly dosing so she will continue to recommend Butrans for appropriate patient.recommended Senokot-5
PPLPMDL0020000001	University Hts	OH	44118	2/16/2011	Spoke to doc about the Butrans indication, patient type, and other four selling messages. Asked him if he would likely prescribe for opioid naive or opioid experienced. He said opioid naive. I reviewed the 5mcg/hr dose as well as how to titrate. He wanted to know if BWC is covering Butrans. Told him that BWC is currently paying for it. Also discussed the other plans and the savings with the card. Asked him if he could think of appropriate patients. He said maybe. Gave him REMS literature and FPI. Reminded him of the oxycontin patient type
PPLPMDL0020000001	Cleveland	OH	44195	2/16/2011	i talked to Anne about appropriate patients to start on Butrans,showed Butrans initiation/titration guide and asked Anne to think of a few patients to try Butrans in and she agreed. we discussed managed care coverage for Butrans.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44109	2/16/2011	I talked to Naser,Pharmacist,about Butrans stocking and Naser said he got all 3 dosage strengths of Butrans in stock but hasnt seen any scripts yet.i told Naser i have had lunches with Metro doctors and some local physicians we have discussed in the past and that i would continue working with them to identify appropriate patients to start on Butrans.i asked Naser to recommend Butrans,when appropriate to doctors,if patients are complaining of current medication and requesting a change to something else,Naser said he would do that depending on his relationship with doctor.<font color=blue><b>CHUDAKOB added notes on 02/24/2011</b></font>Amy, remember that you should ask for anything in print from your pharmacists due to potential HIPAA violations.
PPLPMDL0020000001	Bedford	OH	44146	2/16/2011	Met with Eric Schmidt, Director of Pharmacy. He said that he had read about Butrans & also just spoke with a nurse yesterday about a prescription for the 10mcg/hr. Eric said Dr A Rosenfield wrote the prescription for a patient taking 60mg morphine equivalent. Discussed taper for patients taking 30-80mg morphine equivalent & reminded him that anyone taking over 80mg morphine equivalent would not be an appropriate Butrans patient. He said that because their patients tend to have more severe pain than what Butrans may control, he does not anticipate Butrans being a commonly used medication in their population. Discussed appropriate patient type.
PPLPMDL0020000001	Macedonia	OH	44056	2/16/2011	Gave him an initiation guide for reference.
PPLPMDL0020000001	Macedonia	OH	44056	2/16/2011	Reviewed with Dr Shenigo initiation of Butrans treatment in both opioid-naïve & opioid-experienced patients, including taper. Asked her to think of Butrans when she has an appropriate patient for whom is getting ready to prescribe Vicoden. She said that this made sense & that she would consider doing this. Reviewed application & box warning, advising her to be just as cautious in prescribing Butrans as she would be in prescribing any opioid. She said she had a specific patient who she thought may be appropriate for Butrans. Discussed managed care coverage & savings cards for appropriate patients.
PPLPMDL0020000001	Macedonia	OH	44056	2/16/2011	Dr Yager asked me to review the Butrans information with him to refresh his memory. Reviewed 5 core messages & alerted him to abuse/addiction potential. Also reviewed FPI 6.1, 12.1, & 8.6-8.7. Discussed dosing & initiation of treatment in different patient types. Asked Dr Yager to use Butrans when he sees an appropriate patient for whom he is ready to prescribe Vicoden. Dr Yager said this made sense & that he could use it there. He thought of a few different patients, one specifically who is on 400mg tramadol/day who is well-controlled but would like an alternative to taking several pills per day. Discussed taper & how to initiate treatment at 10mcg for that patient. Discussed managed care & savings cards for appropriate patients. Dr Yager said he had a male patient several years ago on OxyContin who got "hooked" and started looking for Percocet on the streets. Dr Yager said the patient has come off opioids now & is doing well.
PPLPMDL0020000001	Westlake	OH	44145	2/16/2011	Drs said that he had started his first Butrans patient and he has not heard back yet. He said this patient has had abdominal pain for two years after a surgery. Dr informed me that St John Westshore does not have to follow the formulary for UH and that he is only working to get Butrans on formulary at St John Westshore.
PPLPMDL0020000001	Akron	OH	44320	2/16/2011	spoke with Jerry and left info for him regarding Butrans. After going over the indication there were so many patients that I said I would come back. Left FPI.
PPLPMDL0020000001	Akron	OH	44320	2/16/2011	Introduced Butrans and FPI to Misty, NP. She loved this idea and was already identifying patients as we spoke. She said she would have to wait until it was on her formulary but wanted additional info.<font color=blue><b>CHUDAKOB added notes on 02/25/2011</b></font>Misty can still write Butrans. She just needs the doctors approval to do so until it is on their formulary.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/16/2011	Introduced Butrans and the FPI to Dr. Blicak. Focused on opioid naive patients. She was rushed for time since she is a hospitalist. She said she would meet with me next Wednesday at 9 am to discuss Butrans more in depth.
PPLPMDL0020000001	Akron	OH	44320	2/16/2011	Introduced Butrans and FPI to physician. Asked him to focus primarily on patients with commercialized plans since he has a lot of Medicaid. He agreed he would take a second look at patients currently on low dose hydrocodone who have private insurance.
PPLPMDL0020000001	Cleveland	OH	44195	2/16/2011	worked tausseg cancer center - talked to medical secretaries for Dr Dean, Dr.Garcia, Dr.LeGrand,Dr.Pennell and Dr.Davis-the palliative medicine doctors are out of town for a meeting in Vancouver this week,but i gave Butrans fpi,initiation guide and patient information booklet to each secretary for the doctors to set-up appointments to discuss Butrans. I spoke with Crystal,Dr.Davis's secretary,as Dr.Cheng-APM doctor,requestd me to see Dr.Davis and ask him to lead a lecture on Butrans for his APM fellows and if Dr.Davis can not do this, then i will lead the journal club discussion on the Butrans fpi.found out from Crystal that Dr.Davis was on "hospital service" for 2 wks-Jan.29th-Feb.11th,so he only saw 2-3 patients/day and Crystal said thats why he probably hasnt prescribed Butrans yet,but she will talk to dr on Monday,to be sure he starts prescribing Butrans. worked tausseg cancer center
PPLPMDL0020000001	Cleveland	OH	44195	2/16/2011	worked pain management department and tausseg cancer center and tausseg cancer center pharmacy
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/16/2011	Introduced Butrans and FPI to Dr. Crawford, I was originally trying to call on Dr. Bedrick who was out sick and Dr. Crawford said he would see me instead. After discussing Butrans indication and FPI he told me that he does not treat any long term pain and is mostly managing sports medicine.
PPLPMDL0020000001	South Euclid	OH	44121	2/16/2011	Spoke to Amanda about the Butrans indication, 3 dosages, 7 day application and patient positioning. Asked her if she has it stocked. She said no and that she wouldnt likely stock it until they get a script. She asked if the Butrans actually stays on for 7 days. I discussed the proper application and disposal. I explained the savings card program and that docs want to know who is stocking it. no commitment.
PPLPMDL0020000001	Akron	OH	44333	2/16/2011	Introduced Butrans and FPI to Dr. Fouad. He has a great patient base to initiate therapy however most of his patients are on state plans. I asked if he would consider it for his patients with private insurance for the time being and he agreed.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/16/2011	Introduced Butrans and the FPI. Dr. Peter is currently prescribing a lot of Vicodin and thought this was a great option for his patients who are on low dose vicodin/percocet. He asked about coverage and I explained the copy cards.<font color=blue><b>CHUDAKOB's query on 02/25/2011</b></font>This call is on Dr. Higley. Who is Dr. Peter?<font color=green><b>LAPMACA's response on 03/01/2011</b></font>This was just a simple mistake. I was attempting to see Dr. Peter Laszlo as well as Dr. Higley. This call was made to Dr. Higley, I just had Dr. Peter on my brain! Thanks for catching it.<font color=blue><b>CHUDAKOB added notes on 03/02/2011</b></font>OK. Thanks for the clarification.
PPLPMDL0020000001	Cleveland	OH	44195	2/16/2011	talked to dr about Butrans fpi,black box warning,medication guide,initiation guide and Butrans patient savings cards.dr said transdermal delivery is optimal in his eyes,instead of pills,but since this is new to him he wants to wait a bit before he feels comfortable prescribing Butrans.dr said dosing every 7 days is good for some of his patients but not all,as he does have some patients who like taking their short-acting medications around the clock told dr that is good for those who are fine with their current medication,but to think of patients who arent happy with current medication or request a medication change-showed Butrans initiation guide and asked if dr could think of 1 patient,when he feels comfortable to try Butrans in and get some clinical experience with the medication.dr said he will think about it and appreciated information.discussed managed care coverage for commercial plans,medicaid and workers comp.recommended Senokot-5
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/16/2011	Initially started a conversation with Glenn, who is the pharmacist there. While i was in his office Dr. Narouza stopped in and I had the opportunity to discuss Butrans and the FPI with both of them. They both agreed there was a DEFINITE need. I scheduled a lunch so i can follow up and discuss with the other physicians.
PPLPMDL0020000001	C. Falls	OH	44223	2/16/2011	Spoke with pharmacist and introduced Butrans and the FPI. She told me that Narouzes group would be a good group to call on with this product.
PPLPMDL0020000001	Cleveland	OH	44195	2/16/2011	talked to Mei,NP,who treats dr.cheng's patients,about Butrans fpi,black box warning,medication guide,Butrans initiation guide and Butrans patient savings cards for commercial plan patients. Mei said the other Nurse Practitioners in the office shared with her a little bit of information on Butrans and she thinks once weekly dosing of Butrans and transdermal application are 2 benefits to her patients.i asked Mei if she would consider an opioid naive or opioid experienced patient to start on Butrans? Mei said majority of patients here are opioid experienced so that is where she would try Butrans.showed initiation guide and we discussed medicaid and workers comp coverage. recommended Senokot-5
PPLPMDL0020000001					

PPLPMDL0020000001	Cleveland	OH	44195	2/16/2011	only got a minute with dr but told dr there was a product,Butrans,we havent discussed and gave dr Butrans fpi,discussed black box warning and Butrans patient savings cards and dr said he would look through the information and that i should go see his medical secretary,Jessica,to set-up an appointment.dr said he did like that Butrans was a transdermal application and dosed every 7 days as he thinks that may be easier for some of his patients.
	Cleveland	OH	44195	2/16/2011	talked to Janet,Pharmacy manager and Brittany,Pharmacy Technician,about Butrans stocking and they ordered and have Butrans 10mcg and 20mcg but no scripts yet,so i explained that most of the palliative med doctors were out this week in a conference in Vancouver but i would continue talking to the doctors about Butrans and asked Janet and Brittany to recommend Butrans to doctors,for patients they feel who could be appropriate and showed initiation/titration guide.
	Cleveland	OH	44195	2/16/2011	talked to dr about Butrans fpi,black box warning,initiation/titration guide and Butrans patient savings cards.asked dr where he would feel most comfortable trying Butrans in his patients and getting some clinical experience? dr said majority of his patients are opioid experienced so that would be his first place to try Butrans in a few patients.showed initiation guide,dr asked how much it cost for 4 Butrans transdermal systems,so 1 month supply? we discussed managed care-commercial plan patients using Butrans patient savings cards,medicaid requirements of a Prior Authorization and workers comp.dr said i should talk to Mei,his NP,who see's his patients.dr wants to set-up a journal club discussion with his 9 fellows about Butrans.recommended Senokot-s
PPLPMDL0020000001	Cleveland	OH	44195	2/16/2011	only talked to dr for a few minutes,showed Butrans initiation guide and asked dr if he started 1 patient yet? dr said no he hasnt thought about Butrans.i asked if dr would give Butrans to an opioid naive patient and dr said probably not and majority of patients are opioid experienced so he would try Butrans there.we discussed initiation/titration looking at the guide and discussed managed care coverage.recommended Senokot-S
PPLPMDL0020000001	Cleveland Hts	OH	44118	2/16/2011	Spoke to Sourabh again about the recent launch of Butrans. I discussed the 5 selling messages and asked him to order it. He said he has to wait until he gets a prescription. I also discussed the savings cards program for monthly savings. He wanted to know if the cards would come from the doctors office. Confirmed that they would.
	Cleveland Hts	OH	44118	2/16/2011	Met Drs. Grant and Harris in their lab. Asked them what questions and or concerns they had about prescribing Butrans as they both previously expressed interest. Dr. Harris said none, yet. He has not come across the right patient. Dr. Grant said the insurance coverage is going to be a problem and that patients wont be able to afford it. I explained that Butrans is well covered commercially and reminded them both that i previously left savings cards that each patient should get. Also reminded of the oxycontin savings cards and patient type.
PPLPMDL0020000001	Bedford	OH	44146	2/16/2011	Dr Moufawad said he just started a patient on Butrans on Monday. I asked him what type of patient he chose. He said that it was a patient taking 5-6 Vicoden per day & he started him on 10mcg. He said he has not heard back from the patient. I asked if he would start more patients on Butrans & he said that he will & that he does not have to wait for feedback before doing so. [Did not have time to discuss taper- see next call objective]. Spoke with Amber (MA)& gave her more savings cards for Butrans & OxyContin. I asked if there had been any managed care push back for Butrans so far & she said no. I asked her to keep me "in the loop" with Butrans & to give me feedback as much as possible. She said she has my card & will call me.
PPLPMDL0020000001	Westlake	OH	44145	2/16/2011	Spoke with Deanna, she had already read about Butrans. We reviewed the FPI, initiation guide and medication guide. She said she thinks it will be a good option instead of short acting around the clock. Reminder about OxyContin as a Q12hr option and the OxyContin savings cards. Reminder to recommend Senokot S with opioids.
PPLPMDL0020000001	Westlake	OH	44145	2/16/2011	Dr said that she could not find information on a patient assistance program for Butrans and I let her know that we did not have one in place at this time. She said she does have further questions about Butrans but was too behind today to sit and talk. She would like to discuss further with Amy at their next appointment.
PPLPMDL0020000001	Cleveland	OH	44121	2/16/2011	Spoke to Allison about the launch of Butrans. Explained the dosing and the savings cards program and commercial plans. SHe confirmed that they had received a shipment and dispensed a script for 5mcg/hr. SHe confirmed that the script went through without a problem.
PPLPMDL0020000001	Lakewood	OH	44107	2/17/2011	We reviewed Butrans FPI, and medication guide. She thinks that this could be a great option for some patients and she has two patients in mind who might be a good patient to convert to Butrans. One of them is on tramadol and one is on T3. She will try to recommend to their Dr, one was Dr Alan Shen's patient. She asked about generic OxyContin and said that Walgreens still seems to dispense it. She asked about the reformulation of OxyContin and we reviewed the field card. She took an OxyContin conversion guide to keep on hand and we discussed OxyContin as an option instead of short acting around the clock. We reviewed Ryzolt as a once a day option and asked to recommend Senokot S with opioids.-font color=blue>-cb>CHUDAKOB's query on 02/25/2011</b>-</font>When you say short-acting around the clock, this can now mean many things. If they are taking short-acting around the clock 5mg hydrocodone 4 times/day, and not well controlled this may now be a Butrans patients. This now requires getting much more specific when discussing low-dose OxyContin. Your thoughts?<font color=green>-cb>HOLLUBA's response on 02/28/2011</b>-</font>I do understand what you are saying. In this case, I had already discussed Butrans at length and the types of appropriate patients. Some patients are not good candidates for Butrans so we reviewed OxyContin as an option for short acting around the clock of various doses after she already understood where Butrans fits in. I think that the patient you described could be either patient.-font color=blue>-cb>CHUDAKOB added notes on 02/28/2011</b>-</font>O.K. Thanks!
PPLPMDL0020000001	Cleveland	OH	44195	2/17/2011	worked physical medicine&rehab dept-left information for Dr.Schaefer,Dr.Zachary,Dr.Hou,Dr.Jedlicka,on Butrans fpi and initiation guide,left information for Dr.Capulong,Dr.Mazanec and Dr.DeMicco,on Butrans fpi,initiation guide and my business card for each doctor to get an appointment.
PPLPMDL0020000001	Cleveland	OH	44113	2/17/2011	showed dr Butrans initiation guide and talked about Butrans for opioid experienced patients who are complaining to dr about current medication regimen and looking for something different.asked dr to consider Butrans,if appropriate,for these patients.dr said he would remember that and i told dr that he has option of OxyContin, with 7 tablet strengths and majority of commercial plans covering OxyContin at lowest branded co-pay.recommended Senokot-S
PPLPMDL0020000001					Quick call with David- He said that they do have Butrans but that he had not dispensed it yet. Spoke with Angela about savings cards for Butrans & OxyContin which she said they would use.
PPLPMDL0020000001	Independence	OH	44131	2/17/2011	Spoke with John, We reviewed Butrans FPI, initiation guide and medication guide. He said he thinks this will be a good option instead of patients taking vicodin around the clock which they see a ton of. He said that he does know that a few scripts have come through that they have had to order more. He did not know which Drs wrote. They only have the 5 and 10mcg in stock for now. We reviewed the OxyContin savings program. We reviewed Ryzolt as a once a day option and asked him to recommend Senokot S.
PPLPMDL0020000001	Cleveland	OH	44106	2/17/2011	talked to dr about Butrans initiation guide and Butrans patient savings cards and discussed dr filling out drug review form,for pharmacy to review Butrans and present to the P&T Committee. dr said he see's a place for Butrans in hospital,likes transdermal delivery and once weekly dosing of Butrans
PPLPMDL0020000001	Berea	OH	44017	2/17/2011	Quick call,I asked Dr if he had tried Butrans yet and he said he did but has not heard anything from the patient. Shirley did not know if he had written Butrans or not since she has not seen any scripts or discussed it with any patients.
PPLPMDL0020000001	Cleveland	OH	44113	2/17/2011	talked to Dale,PA,about Butrans being an option for patients he feels are opioid experienced,that complain of current medication and want a change.showed initiation guide and discussed managed care coverage.Dale said he hasnt started any patients yet,but will keep Butrans in mind for a few patients.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44102	2/17/2011	talked to dr about Butrans fpi,black box warning, 5 core messages,initiation guide and Butrans patient savings cards.dr said she has a lot of patients on Percocet and would consider Butrans as an option for them as she doesnt like giving so many pills out and likes transdermal application better.dr said once weekly dosing is much easier for a lot of her patients.showed initiation guide and discussed managed care coverage.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44106	2/17/2011	worked pain management dept-see call note on dr hayek
PPLPMDL0020000001	Independence	OH	44131	2/17/2011	Introduced Butrans to Dr Boose, delivering 5 core messages. Asked him to think of Butrans when he has a patient on higher doses of NSAID's or Cox-2's that he is ready to start on a short-acting around-the-clock opioid. He said that made sense. Showed initiation guide pg 6 for starting both opioid-naive & opioid-experienced patients & reviewed FPI 6.1 & 11. Also alerted him to black box warning. Dr Boose asked about managed care coverage. He said 60-70% of his practice is commercially insured, so I reviewed coverage & savings cards for those patients. Also reviewed titration ability every 3 days. He said he thought Butrans sounded interesting that said he had patients who fit the indication & for whom he could consider it. Reviewed patient information booklet, application, & avoiding direct heat. Spoke with Natalie & gave savings cards & patient information booklets. She said to come in March 1st to schedule another lunch. Asked her to call me for Butrans feedback or questions.
PPLPMDL0020000001	Barberton	OH	44203	2/17/2011	Introduced Butrans and the FPI. Dr. Patel seemed very interested and gave me ample time to discuss where this would best fit. He seemed to be most interested in prescribing for opioid naive patients which he said he sees a lot of. I went over the dosing and reminded him that opioid naive patients must start on 5 mcgs per hour and that he could titrate if needed in 3 days.
PPLPMDL0020000001	Solon	OH	44139	2/17/2011	Dr Zaidi said he has not prescribed Butrans & will not until his question regarding precipitating withdrawal is answered. I asked him if his concern was still that tapering patients would put them into withdrawal. He said yes & that if he has a patient on 200mg equivalent or more of morphine, he cannot taper that patient down to the level we suggest. Told him that a patient on that high a dose would not be a Butrans patient. He said he thought it was for patients on high doses of opioids. Clarified & showed him pg 6 of initiation guide & told him anyone over 80mg morphine equivalent was not a Butrans patient, but rather more of an OxyContin patient. Suggested that he use Butrans in patients taking 3, 4, or 5 hydrocodone or oxycodone per day for chronic pain. He asked about application site skin reactions-showed FPI 6.1. He said he would see if he could find one patient to try Butrans on. I told him that was the perfect place to start.
PPLPMDL0020000001	Barberton	OH	44203	2/17/2011	Spoke with Pharmacist, I believe her name was Cathy. Introduced Butrans and the FPI. She told me that some physicians I should focus on in the area were Dr. Shah and Dr. Patel. I asked her what her thoughts on Butrans were and she agreed that there was a definite need for Butrans in the current market place.
PPLPMDL0020000001	Independence	OH	44131	2/17/2011	Asked Dr Pai if he has had experience using Butrans but he said he has not yet because he has not seen the right patient. I asked him what type of patient he was looking for & he said someone on Vicoden or tramadol. He said NOT someone on Percocet because he feels that people on Percocet are more likely to take more than they need. I asked what dose Vicoden or tramadol the ideal patient in his mind would be on & he said maybe 2-3 Vicoden. I told him that was the perfect place to try Butrans. I also asked him to consider Butrans instead of starting someone on Vicoden & he agreed that this was a good place as well. He mentioned a tramadol patient he had just seen but he was not sure what insurance he had. Discussed commercial tier 3 coverage, savings cards, & prior authorization for patients on Medicare Part D or Medicaid. He said he would continue looking for Butrans
PPLPMDL0020000001	Cleveland	OH	44102	2/17/2011	talked to dr about Butrans fpi,black box warning,initiation guide and Butrans patient savings cards.asked dr if she would consider opioid naive or experienced patients to try Butrans? dr said patients taking opioids is where she would try Butrans,showed initiation guide,dr said 4 tabs daily is max dose of short-acting and it would only take her 1 day to taper patients to 15mg hydrocodone or oxycodone.dr asked what does a normal QTC interval look like? as we were discussing Section 5.4-QTC interval Prolongation in Butrans fpi.i told dr i didnt have that answer but we could fill out electronic medical information request form.i asked dr if she needed any other information in order to feel comfortable in prescribing Butrans? dr said no and said she would try it in a few patients.i told dr i would follow-up with her next Tuesday,told dr when patients are above 80mg oral morphine equivalent,OxyContin is an option and available at lowest branded co-pay for medicaid and commercial planpatient
PPLPMDL0020000001	Cleveland	OH	44109	2/18/2011	showed dr Butrans initiation guide,discussed appropriate patients to start on Butrans and talked about managed care coverage for Butrans.dr said he likes transdermal application and once weekly dosing and thinks Butrans is a great option for his patients taking a couple tablets a day of hydrocodone,percocet or tramadol and will look for a few patients to try Butrans. recommended Senokot-S
PPLPMDL0020000001	Copley	OH	44321	2/18/2011	Introduced Butrans and the FPI. When talking about the appropriate patient type i told him if a patient was taking the equivalent or more than 80 mg of morphine they were past the point of Butrans and an appropriate patient for OxyContin. Dr said he would continue writing OxyContin but was still unsure about Butrans and had to leave.
PPLPMDL0020000001	Beachwood	OH	44122	2/18/2011	Followed up with Dr Yokiel who said he has tried to write Butrans a couple of times but he said he thinks the patients couldn't get it for managed care or cost reasons. I discussed with him managed care coverage for Medicare Part D, Medicaid, BWC, & commercial plans. I also reviewed savings cards with him for cash pay & commercial insurance patients. Encouraged him to try Butrans for appropriate patients with commercial insurance or BWC & to give savings cards to patients with the commercial coverage. He said he would do this & is anxious to hear what his patients think. He told me he likes the idea of Butrans & the seven days of buprenorphine delivery. He said he will keep writing prescriptions for Butrans. Also gave OxyContin savings cards which he said they needed.
PPLPMDL0020000001					talked to dr for only a minute,showed Butrans initiation guide,discussed managed care coverage and asked dr to think of 1 patient to try Butrans and then i will follow-up next week.dr agreed.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	2/18/2011	



	Cleveland	OH	44103	2/18/2011	asked dr if she has seen 2 patients this week,who were complaining of their short-acting opioids,where she considered Butrans as an option? dr said she talked to a few patients about Butrans but hasnt had anyone that wants to take once weekly dosing as a transdermal system.dr said Butrans is a great option,with 7 days of buprenorphine delivery and likes transdermal delivery.dr said she'll continue talking to patients about Butrans.told dr
PPLPMDL0020000001	Cleveland	OH	44125	2/18/2011	OxyContin is available at lowest branded co-pay for medicaid and commercial plan patients,with 7 tablet strengths available. recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44109	2/18/2011	Spoke briefly with floater pharmacist who said that this location does have 5 & 10mcg Butrans in stock but said they had not dispensed any yet. Indication & once-a-week application reminders.
PPLPMDL0020000001	Richmond Heights	OH	44143	2/18/2011	showed dr Butrans initiation guide and we talked about dr considering Butrans for his opioid experienced patients.dr has talked to a few patients about trying Butrans but not had anyone say they want to try,these patients still want to take their short-acting opioids and thats it.I told dr to not think of patients who are happy with their short-acting opioids,but those patients complaining of their current medication and wanting something different,these patients may potentially be interested in Butrans. dr agreed saying that made sense and he would consider that.we discussed Medicaid and commercial insurance coverage.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44114	2/18/2011	Discussed the Butrans indication and positioning. Doc said he did not have time today. I gave him and FPI and advised that I would tryhim again next week. Nothing learned.
PPLPMDL0020000001	Cleveland	OH	44109	2/18/2011	talked to dr about Butrans initiation guide and managed care coverage.i asked dr if he feels most comfortable trying Butrans in opioid experienced or naive patients? dr said he wouldnt give Butrans to opioid naive patients,if they are taking NSAID's,he would go to Vicodin or another short-acting opioid.dr said he would give Butrans to his patients currently taking Vicodin or Percocet.dr likes that this is a transdermal application and once weekly dosing and said he will start some patients on Butrans.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44109	2/18/2011	worked physical medicine and rehabilitation dept-see call notes
PPLPMDL0020000001	Richmond Heights	OH	44143	2/18/2011	Discussed the Butrans indication and the positioning. Doc said he tried a patient on Monday (?) and has not heard anything. I asked him to describe what type of patient he wrote for. He I asked him to try at least one patient next week and reviewed the commercial coverage.
PPLPMDL0020000001	Fairlawn	OH	44333	2/18/2011	Introduced Butrans and the FPI. Dr. Parisi is typically see but because I had a new product he came to the window briefly. After I introduced the indication and the 7 day transdermal delivery system he was so interested in hearing more he canceled a lunch on Tuesday so he could hear about it.
PPLPMDL0020000001	Lyndhurst	OH	44124	2/18/2011	Asked doc for feedback she got from the female patient she tried on 5mcg/hr of Butrans and then went to 10mcg/hr. She said the patient didnt really like itor it didnt work for her but doc said that nothing seems to work for this patient. I discussed the indication and the positioning. She said she would continue to look for patients.
PPLPMDL0020000001	Parma	OH	44134	2/18/2011	Spoke with Marko who said that they finally received their auto-shipment & that he filled a prescription for it last week. I asked him who wrote the prescription & he said that it was Dr Trickett & it was for the 5mcg strength.
PPLPMDL0020000001	Cleveland	OH	44102	2/18/2011	talked to Vicki,Pharmacy Manager,about Butrans initiation guide and asked if she has seen any scripts for Butrans? Vicki said no,but she will recommend Butrans to some physicians where she knows patients are on short-acting opioids and not happy with current medication.we discussed managed care coverage.recommended Senokot-5
PPLPMDL0020000001	Fairlawn	OH	44333	2/18/2011	Spoke with Jessica. She has not yet seen any movement. She agreed she would stock the 10 and 20 mcgs if any scripts come through.
PPLPMDL0020000001	Independence	OH	44131	2/18/2011	Caught Dr Jack in the hallway for a quick Butrans follow-up. He said he read more information & does think it is something he will be able to use. He said he just has to figure out who the right patient is. I asked him to think of Butrans when he sees a patient who he is ready to put on Vicoden 2-4 times per day-to prescribe Butrans instead. Dr Jack said that made sense because he thinks Butrans is "easier" for the patient. He said he would try that. OxyContin savings card reminder as well.
PPLPMDL0020000001	Parma	OH	44129	2/18/2011	Quick call with Heath (Pharmacist). He said they still have the 5 & 10mcg/hr Butrans strengths. He said he has not dispensed any yet. Reviewed indication with Heath.
PPLPMDL0020000001	Mayfield Heights	OH	44124	2/18/2011	Introduced doc to Butrans and the 5 selling messages. He asked how the AE's compared to other opioids. I referred to the AE section of the FPI and the discussed the Nausea, dizziness, Headache. He asked about the molecule and the MOA. I explained the binding to the 3 opioid receptors. I reviewed the dosing and the 20mcg/hr max due to QTC prolongation. He liked the idea of a 7 day patch and said it fits a need. Gave him Butrans
PPLPMDL0020000001	Cleveland	OH	44109	2/18/2011	talked to dr about patients she feels are appropriate for butrans.dr said patients already taking opioids,whether it be tramadol,hydrocodone or oxycodone,she's considering those patients.showed dr Butrans initiation/titration guide and discussed managed care coverage.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44103	2/18/2011	talked to dr about his patients on tramadol,that dr thinks Butrans could be an option for them,showed Butrans initiation/titration guide. asked dr to think of 2 patients on tramadol,that are opioid experienced,and consider starting them on Butrans.dr agreed and asked about Medicaid coverage for Butrans,so we discussed that information.told dr when patients are above 80mg oral morphine equivalent,dr has option of OxyContin,with 7 tablet strengths and available on Medicaid at lowest branded co-pay. recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44109	2/18/2011	talked to Erinne,Pharmacist,about Butrans FPI,black box warning,medication guide,instructions for use,patient information booklet,Butrans initiation/titration guide,Butrans patient savings cards and formulary coverage.Erinne said she didnt see Butrans in stock and never saw this information from the other pharmacist so she appreciated it as she thinks once daily dosing is much easier for patients than taking short-acting opioids daily.Erinne said the transdermal application was interesting to her and she hopes physicians prescribe Butrans as she will order all 3 dosage strengths today of Butrans.we discussed physicians in area that write a lot of Vicodin and Percocet and who I should talk to about Butrans.recommended Senokot-5
PPLPMDL0020000001	Beachwood	OH	44122	2/18/2011	Spoke with Alan who said they had not had any prescriptions for or questions regarding Butrans. I reviewed indication & seven days buprenorphine delivery in one application & asked him what physicians he would recommend me speak with in the area. He said that really the only pain management medications they see prescriptions from are from oncology & family medicine. He said that unfortunately the offices don't see reps. Told him that I have been leaving information for each of the departments & asked him to call me if he gets any inquiries or prescriptions or has any questions.
PPLPMDL0020000001	Cleveland	OH	44103	2/18/2011	asked dr if he started any patients on Butrans? dr said no and that he's talked to a few of his patients taking Vicodin and Percocet that he thought would be interested in trying Butrans but the patients didnt want to stop taking pills.told dr to only think about 2 patients who are complaining of current medication and want something different,thats where he can try Butrans,showed initiation guide and discussed formulary coverage.told dr he has OxyContin,7 tablet strengths available for his patients needing more than 80mg oral morphine equivalent,and available at the lowest branded co-pay for Medicaid and commercial plan patients.recommended Senokot-5
PPLPMDL0020000001	Fairlawn	OH	44333	2/18/2011	Reintroduced Butrans and spoke with him about more specific types of patients. He said he could think of some low dose hydrocodone patients. I asked him to tell me more about that patient? I asked how long they had been on Vicodin. He said he was thinking of a specific patient who was on Vicodin QID. I told him that was the exact type of patient that would be ideal for therapy with Butrans. He committed to trying it.
PPLPMDL0020000001	Cleveland	OH	44109	2/18/2011	showed dr Butrans initiation guide and asked if dr started any patients yet? dr said no,he has looked through full prescribing information but hasnt talked to anyone yet.I asked dr if there was any reason why he wouldnt prescribe Butrans,as long as patients meet Butrans indication? dr said no,he likes once weekly dosing and transdermal application,just has to talk to a few patients on orals that would be interested in trying Butrans. asked dr to think of 2 patients to start on Butrans,dr agreed. told dr to consider OxyContin,as an option when patients are above 80mg oral morphine equivalent,and he has 7 tablet strengths,gave dr OxyContin conversion guide.recommended Senokot-5
PPLPMDL0020000001	Parma	OH	44129	2/18/2011	Jen said that she has not yet prescribed Butrans. She said, like Laura, she has not seen the right patient. Asked her to clarify by telling me what type of patient she was looking for & she said, like Laura, that it would be someone who wanted an alternative to taking oral pain medication for chronic pain. She said that because Butrans is a long-acting opioid, she would only think to use it in patients who have already been on short-acting opioids. She also wants to wait to see if Dr Nickels starts to use it. Discussed managed care- commercial tier 3, BWC, & prior authorization for Medicare & Medicaid. Also reviewed savings cards for cash-pay & commercially insured patients and Ryzolt reminder.
PPLPMDL0020000001	Mayfield Hts	OH	44124	2/18/2011	Doc asked for more Butrans savings cards. He said he and Dr. Dews have been prescribing and Dr. Dews has taken some to her other office. I asked him what feedback he has received and he said he has prescribed a couple of times and so far he hasnt heard of any problems. Reminded him of the positioning and the coverage.
PPLPMDL0020000001	Fairlawn	OH	44333	2/18/2011	I had the opportunity to quickly introduce Butrans and the indication to Dr. Lefkowitz. I was able to get out that it was a 7 day transdermal delivery system. He quickly asked if it was going through on BWC before walking wJaway. I left a FPI and finished going over all the FPI and patient types with the entire office. They took down my name and number in case Dr. Lefkowitz had questions.
PPLPMDL0020000001	Cleveland	OH	44103	2/18/2011	talked to dr about considering patients,to start on Butrans,that are complaining about current medication or asking dr for a medication change.showed initiation guide and discussed medicaid coverage.talked to dr about OxyContin being an option for patients taking more than 80mg oral morphine equivalent,with 7 tablet strengths,and covered at lowest branded co-pay for medicaid patients.recommended Senokot-5
PPLPMDL0020000001	Parma	OH	44129	2/18/2011	Asked Laura if she had gotten to gain any experience with Butrans since my last conversation with her. She said she had not prescribed it yet. She said she is looking for the right patient. I asked her who, in her mind, was the "right" Butrans patient. She said someone who does not want to take pain medication in pill form around-the-clock. I asked if the would ever consider using Butrans in patients who had never been on an opioid before & she said "never". I asked her why & she said that she would never put someone on a long-acting opioid as a first opioid. She said that she feels that it is "safer" to put someone on a short-acting first in case they have some sort of reaction to it. She also said that if someone was doing well on Vicoden around-the-clock, she would not switch them to Butrans. She said she wanted to know how Dr Nickles feels about Butrans before she starts prescribing it. Reminder of commercial insurance & savings cards for those patients.
PPLPMDL0020000001	Parma	OH	44129	2/22/2011	Introduced Butrans to Dr Chagin, delivering 5 core messages & alerting him to box warning. He said Butrans sounded like something his patients could really use & benefit from. He said he likes that it is dosed only once-a-week & that it is not an oral medication. He asked what conditions it could be used to treat-I told him the indication was for moderate to severe chronic pain & does not specify what the etiology of the pain must be. Reviewed initiation guide with him- he said he could see using it in patients who are opioid-naive as well as those who have been taking 2-4 Vicoden or Percocet per day for chronic conditions. Discussed savings cards for commercial insurance/cash pay (no government insurance). Also reminder for OxyContin for appropriate patients beyond available Butrans dosing & Ryzolt 2-3-1 & value card reminder. Also recommended Senokot-5 for opioid-induced constipation. Spoke with Lynn (nurse) & Debbie (MA) about Butrans, savings cards, & patient information booklets.
PPLPMDL0020000001	Independence	OH	44131	2/22/2011	Spoke with Dr Reddy & Kathi- Delivered Butrans 5 core messages and reviewed appropriate patient types. Dr Reddy said Butrans sounds like something he will be able to use with his patient population. He said he does see several patients for chronic pain. He asked what the "cost" was- I reviewed with him & Kathi commercial insurance coverage & savings cards for patients who pay cash or have commercial insurance (no government insurance including Medicare & Medicaid.) Quickly reviewed initiation guide & dosing strengths before Dr Reddy had to go see another patient. Let Kathi know I would return to follow up.<font color=blue>-b>CHUDAKOB's query on 03/04/2011</b></font>-No and none<font color=green>-b>APSEGAS's response on 03/06/2011</b></font>-Dr Reddy, after discussing Butrans during my last visit, you said that you think it is something you will be able to use in your practice for patients with moderate to severe chronic pain. Share with me how you think your patients could benefit from Butrans.<font color=blue>-b>CHUDAKOB added notes on 03/06/2011</b></font>-Oh so much better!!!!
PPLPMDL0020000001	Parma Heights	OH	44129	2/22/2011	Spoke with Al, who said he has still not seen any Butrans activity. Discussed indication, dosing, initiation, & appropriate patients. He had no additional recommendations of who in the area may be interested in hearing more about Butrans. Reminded him that he could print savings cards for Butrans online, so he wrote down the website so that he could print some in advance. Also went over OxyContin savings cards. Al said they have not been seeing any prescriptions for the intermediate strengths, but they still are seeing "plenty" of the other strengths.
PPLPMDL0020000001	Cleveland	OH	44113	2/22/2011	talked to dr about appropriate patients to start on Butrans and dr said he would start patients on Butrans that are opioid naive but the majority of patients he treats have been on opioids so he said he's still trying to figure out who that patient is for Butrans and has to give it a try and talk to some patients.i told dr if he has patients on 3-5 tablets of short-acting opioids and they are complaining of current medication or want a change in their medication,that potentially could be where he thinks about Butrans.dr agreed,said that made sense and he feels because its newer to him he needs to think about who the patients are for this drug and then start some patients and see what clinical results he gets from Butrans.talked to dr about workers comp and medicaid patients being the majority in practice,with a little commercial plan coverage,so we discussed Butrans coverage on Quick call with Fenja, who said they had not filled any Butrans prescriptions so far. She checked their system to see if the other pharmacist had dispensed any, but she had not. Reviewed indication & positioning of Butrans for appropriate patients. Reminded her of e-voucher and checked to see if they needed any more OxyContin savings cards, but she said they still had some.
PPLPMDL0020000001	Parma	OH	44129	2/22/2011	



	Lakewood	OH	44107	2/23/2011	Met the nurses who work with Dr Nageeb in the hospital- Molly Lisa, Janice, Diane. We discussed Butrans FPI, initiation guide and medication guide. We discussed the challenges with pain patients and tools to help pick appropriate patients. I stopped by to see Ann and Dr Riebel in the Med staff office. Ann no longer works there and Mary Ann Tilow-Kmetz is taking over her position for now. Her title is Director of Medical Staff Services. I let her know the resources that Purdue has to offer regarding pain management and that I can do education on the floors with the nurses. She told me if I can't get a hold of Josie to set something up, she will help me. She will keep me posted on anything they are doing in the hospital related to pain management to see if I can partner with them. I left information for Dr Riebel regarding Butrans.
PPLPMDL0020000001	Cleveland	OH	44104	2/23/2011	dr said he started a patient on Butrans.i asked why? dr said patient was a hospice patient, not controlled on oral medications,so he started patient on Butrans.dr said he doesnt prescribe Vicodin, but will prescribe Percocet.talked to dr about patients taking 1-3 tabs a day of Percocet,as being appropriate patients for Butrans.talked to dr about OxyContin being an option once the maximum dose of Butrans no longer controls the pain and discussed OxyContin savings cards.
PPLPMDL0020000001	Cleveland	OH	44130	2/23/2011	Spoke with Diane who confirmed their stocking of all three strengths of Butrans. She said they have not dispensed any yet. Reviewed indication, doing, & appropriate patients with her. Also gave her OxyContin savings cards which she said they would use. Asked her to call me with any Butrans feedback or questions.
PPLPMDL0020000001	Brooklyn	OH	44144	2/23/2011	Quick call with Dr Miguel- Butrans indication & savings card reminder along with OxyContin savings card reminder. He was on his way to see a patient upstairs so he could not stay to talk. I spent time with Stephanie, his MA, going over Butrans. Reviewed indication, dosing, application, rotation, and appropriate patient type/positioning. Also discussed managed care coverage for Butrans and Butrans & OxyContin savings cards for commercial insurance or cash-pay patients.
PPLPMDL0020000001	Westlake	OH	44145	2/23/2011	Quick call to follow up on getting Butrans on formulary. He said he has not heard back yet, but will let me know when it is ordered and in the hospital.
PPLPMDL0020000001	Stow	OH	44224	2/23/2011	Spoke to Church and he said he has not stocked Butrans and only stocks what Dr Bressi and Geigar and Yang write. I discussed if the patient comes down with a script more than likely will go somewhere else for script. he said when he gets a script he will order
PPLPMDL0020000001	Lakewood	OH	44107	2/23/2011	Quick call with Joe, we reviewed the medication guide for Butrans and how to instruct patients on proper application and use. He has not seen scripts yet and does not have Butrans in stock.
PPLPMDL0020000001	Cleveland	OH	44114	2/23/2011	i asked Laura,Pharmacist,if she has seen any Butrans scripts yet, as i just found out that Dr.Katz started two patients last week on Butrans? Laura said no she hasnt seen any scripts and wasnt going to order Butrans until the 1st script came through. i explained to Laura the importance of stocking Butrans so that patients dont have to wait 24 hours and complain to their doctor that the pharmacy didnt have it in stock.Laura said she understood that information but she wasnt going to order Butrans until the first script came through.
PPLPMDL0020000001	Uniontown	OH	44685	2/23/2011	Introduced Butrans and FPI. Focused on patients who were opioid naive since she said that was the patient she would be most likely to initiate therapy.
PPLPMDL0020000001	Uniontown	OH	44685	2/23/2011	Introduced Butrans and the FPI. She typically only talks to reps in a lunch or appointment but gave me a few minutes since this was the first time she had heard about Butrans. i asked where she could see this product fitting in to her practice and she said she would have to learn more about it.
PPLPMDL0020000001	Richmond Heights	OH	44143	2/23/2011	Window call.....Discussed the indication and patient type for butrans. Told doc that its the first once weekly analgesic delivered in one application. He said he does not have time today and he is really behind. Nothing
PPLPMDL0020000001	Uniontown	OH	44685	2/23/2011	Introduced Butrans and the FPI and found out that Dr. Lenz will be leaving his practice in April. He has said because of this he would be unlikely to prescribe it but did agree that there was a definite need for a product like I reviewed the 5 key messages for Butrans. Dr asked why he should use Butrans instead of Duragesic. i told him we have no head to head data to compare the two. We reviewed the initiation guide. Dr asked about managed care coverage and we reviewed the savings cards and managed care for Butrans. Dr had to run to main campus, but was interested in talking more about Butrans. Dr said he had been prescribing more OxyContin lately both in patient and out patient. We reviewed the managed care for OxyContin. Reminder to recommend Senokot S with opioids-<font color=blue>cb>CHUDAKOB's query on 03/04/2011</b></font>Did you ask him the type of patient he prescribes Duragesic for and the strengths he is talking about? This may lead to a discussion that the Butrans patient is probably not the Duragesic patient.<font color=green>cb>HOLUBA's response on 03/07/2011</b></font>Thanks, I am going to see him today so i will ask.<font color=blue>cb>CHUDAKOB added notes on 03/07/2011</b></font>Ok. I hope it goes well.
PPLPMDL0020000001	Lakewood	OH	44107	2/23/2011	Dr said he had all the info he needed regarding Butrans and that he would give it a try. i reviewed the 5 key messages and asked what type of patient he was thinking of. He said he was not sure yet but he would try to find someone to give it a try.
PPLPMDL0020000001	Cleveland	OH	44127	2/23/2011	talked to dr about patients he would consider appropriate to start on Butrans.dr said he's still looking for that right patient,he see's a lot of chronic pain patients daily but so many patients dont like taking a patch and not having their pills.dr said he would start patient on Butrans,after an NSAID or low dose hydrocodone.discussed medicaid and commercially insured patients and coverage for Butrans.Tony,Medical Assitant,said she does all prior authorizations.
PPLPMDL0020000001	Cleveland	OH	44104	2/23/2011	asked dr how Butrans played a role in his practice? dr said his patients are on OxyContin,percocet and ultram.showed dr Butrans initiation guide,asked if he had patients on low dose oxycodone? dr said yes,he gives 1-2 tablets a day up to 4 tabs,60/month,told dr he could start patients like that on Butrans,discussed Butrans coverage for commercial plan patients and Medicaid.
PPLPMDL0020000001	Uniontown	OH	44685	2/23/2011	Spoke with the pharmacist and introduced Butrans and the FPI. He said he thought this was a great product and that there was a definite need for something like this in the current market place.
PPLPMDL0020000001	Lakewood	OH	44107	2/23/2011	We reviewed Butrans FPI, initiation guide and medication guide. Katie said that she is able to prescribe CII medications and she would feel comfortable starting a patient on Butrans. She thinks it will be a good option instead of patients taking vicodin or percocet around the clock and she said that there has been a need for a long acting CII opioid. She said she does try to wait until a last resort to recommend OxyContin or Duragesic for patients and would use Butrans before these options. We discussed managed care and the savings cards. She does see BWC patients. I reviewed OxyContin as an option when Butrans may not provide adequate analgesia. Reminder about Ryzolt as a once a day option and to recommend Senokot S with opioid scripts.
PPLPMDL0020000001	Lakewood	OH	44107	2/23/2011	Dr said that he did have a patient in mind to start on Butrans. He said she was previously on darvocet and is now on 2 vicodin per day but is in chronic pain. I let him know that darvocet does not have the same indication as Butrans, and we reviewed the indication. He said that this patient does have moderate chronic pain and meets the indication. We discussed how to initiate her on 5mcg Butrans and he can titrate after 3 days. i asked what managed care the patient has and he said Medicare. i let him know that Medicare may not approve Butrans but he could try and see. We discussed the managed care plans where Butrans is approved and the savings cards.
PPLPMDL0020000001	Cleveland	OH	44114	2/23/2011	Reminder that OxyContin is an option after patients are asked dr if he started any patients on Butrans? dr said no,he is still looking for the right patient and has to continue reading through the Butrans fpi.asked dr about patients complaining of medication and requesting a change,how often does that happen? dr said daily he hears that complaint from patients.told dr patients taking 1-3 tabs short-acting opioids is where he can start them on Butrans.dr said okay but that he also takes his time with a new medication.discussed initiation/titration guide and asked dr to think of 1 patient like we discussed.
PPLPMDL0020000001	Bedford	OH	44146	2/23/2011	Introduced myself & Purdue's products to Yolanda (technician) who gave me the new pharmacist's card (John Solomon). She said he is the pharmacy director now & is the person I would need to speak with regarding Butrans. Yolanda gave him my card & she said he would contact me to set up an appointment.
PPLPMDL0020000001	Stow	OH	44224	2/23/2011	Spoke with Tom who is the clinical supervisor for Dr Bresl and Dr Geiger. HE said he has not seen any scripts for Butrans and that Dr Bressi is waiting to speak to someone about Butrans like a speaker or medical liaison. HE thought we would be able to sponsor his provider dinner. I told him we are unable to do that but we can have a conference call at breakfast or lunch with medical services and he said he would run it by him. I told him I have also left messages with Lisa several times.Reviewed Butrans with him and patient type where Butrans would work. Rmeinded him of savings cards
PPLPMDL0020000001	Mayfield Village	OH	44143	2/23/2011	Discussed Butrans 5 selling messages. Doc said he would more likely prescribe for opioid experienced patients. He is familiar with buprenorphine as he treats addiction with suboxone. I explained the Butrans only indication for chronic pain and not addiction. Discussed the boxed warning- he was curious about warnings, risks, max dose. Reviewed the warnings and the 20mcg/max due to QTC prolongation. He asked if it stays on for 7 days. I explained the application and disposal process for best results. He asked about the risk for addiction - referred to the boxed warning and the risks similar to other opioids. No age adjustment for elderly. He said it is a good product and he will try to use it after he reads more about it. Gave FPI and REMS. coverage and savings cards discussed.
PPLPMDL0020000001	Stow	OH	44224	2/23/2011	Steve said he has not written Butrans yet, he said he cannot write this because it is not on the NP formulary. I asked if he can write it under the Drs discretion and he said yes. HE said this would be good in patients just coming in. Rmeinded of managed care coverage<font color=blue>cb>CHUDAKOB's query on 03/04/2011</b></font>What kind of a discussion are you going to have with him to "get him to focus on a specific patient where he would right Butrans?<font color=green>cb>THORNTOK's response on 03/06/2011</b></font>by asking him questions of what types of chronic pain patients he sees where he would write 3-4 Vicodin and then get him to focus on Butrans for those patients<font color=blue>cb>CHUDAKOB's query on 03/07/2011</b></font>It sounds like he said this would be good for "patients just coming in" Why would you focus on patients where he would write 3-4 Vicodin/day.<font color=green>cb>THORNTOK's response on 03/10/2011</b></font>I could, but he did not specify if they were opioid naive or experienced, and when I had lunch at their office previously, they had stated that alot of their patients who come in are on Vicodin already. Patients coming in can be experienced or naive and I did not ask because they let me back to see the clinical nurse manager not him, but I ended up talking to him when he popped in the office, i did not want to push my limits in that office.<font color=blue>cb>CHUDAKOB added notes on 03/15/2011</b></font>OK. Perhaps on your next call.
PPLPMDL0020000001	Cleveland	OH	44103	2/23/2011	talked to dr about Butrans initiation guide,dr said he's familiar with buprenorphine and asked about tapering the patients hydrocodone or oxycodone first,before starting Butrans,showed dr Butrans initiation guide,opioid experienced section.dr asked if you can give short-acting opioid with Butrans? i told dr yes and showed Butrans fpi and initiation guide noting this information.
PPLPMDL0020000001	Berea	OH	44017	2/23/2011	Spoke with April, we reviewed the Butrans FPI, indication, dosing, initiation guide and medication guide. She did have the 5 and 10mcg on the shelf. She thinks it will be a good option for some patients instead of vicodin around the clock and she said that she liked the fact that Butrans is a single entity opioid. We discussed OxyContin as a Q12hr option when Butrans may not provide adequate analgesia. Reminder about Ryzolt as a once a day option and asked to recommend Senokot S with opioids.
PPLPMDL0020000001	Uniontown	OH	44685	2/23/2011	Spoke with the pharmacist. Introduced Butrans and the FPI. She told me that Dr. Midian and Lababidi would have the most potential for this product.
PPLPMDL0020000001	Cleveland	OH	44115	2/23/2011	i talked to dr about Butrans 5 core messages and initiation guide.dr said he was very familiar with buprenorphine and prescribes it in the hospital for pain and treatment of addiction.i told dr Butrans is not approved for treatment of addiction,showed dr Butrans fpi section 5.17 and i re-stated the Butrans indication.
PPLPMDL0020000001	Berea	OH	44017	2/23/2011	i asked if he has had any feedback from patients, he said the patient did not fill their Butrans script as he decided the vicodin was enough. He said he has not seen any chronic pain patients since we spoke last. We discussed Butrans initiation and dosing. We discussed managed care and the he was happy to know it is going thru on BWC. I asked Dr what type of patient would he most likely start, he said he wasn't sure yet, but probably a patient who has been on tramadol or vicodin. We discussed tapering the patients down if need be and he said he feels comfortable doing this. We discussed that OxyContin is still an option when Butrans may not provide adequate analgesia. We reviewed Reminder about Ryzolt as a once a day option and asked him to recommend Senokot S with opioids. I also spoke with Diane about Butrans managed care as she is the one who does most of the prior auths, she said she will reminder Dr about Butrans as an option BWC patients.<font color=blue>cb>CHUDAKOB's query on 03/04/2011</b></font>Andrea, here are the potential answers to your next call objective questions.1) No2) NoPretty quick coverage. How might you rephrase these to get the doctor talking more. I realize Khalic's access issues, but a good question not answered well is better than a closed question answered well.<font color=green>cb>HOLUBA's response on 03/07/2011</b></font>Dr, Tell me what type of patient you are thinking would benefit from Butrans?<font color=blue>cb>CHUDAKOB added notes on Window call, he was going in to injections. He said he has not tried Butrans but will try it when he sees the right patient. Gave him new Oxycontin savngs cards and reminded him of managed care coverage
PPLPMDL0020000001	Stow	OH	44224	2/23/2011	Introduced Butrans and the FPI. Dr. Midian seemed very interested and wanted to hear someone speak about it before he was willing to write it.
PPLPMDL0020000001	Uniontown	OH	44685	2/23/2011	Quick call with Dr Diab who unfortunately was running 2 hours behind. He said he is waiting for the right patient for Butrans. I asked him what he was looking for but he did not respond. I suggested that he think of Butrans for an appropriate patient for whom he is ready to prescribe Vicodin or Percocet. I asked him to identify one of those patients & asked him if he agreed that that was a reasonable request. He agreed that it was. Spent time with Barb (nurse) & Karen (MA) reviewing Butrans indication, application, managed care, & savings. They both said Dr Diab sees many patients who fit the Butrans indication and who may be appropriate patients for Butrans.
PPLPMDL0020000001	Cleveland	OH	44130	2/24/2011	Barb took an initiation guide & said she wanted to read more about it because she knows it is something that Dr Diab will start to use. Discussed appropriate patients/positioning for Butrans.

PLPMDL0020000001	Parma	OH	44134	2/24/2011	Spoke with Joe (pharmacist) who had not yet heard about Butrans. Reviewed with him indication, dosing, appropriate patients/positioning, and e-voucher. He checked to make sure they were stocked & confirmed that they still have the 5mcg & 10mcg strengths in stock. Joe said that he is not typically at this location and that he has not yet dispensed any Butrans. Also reviewed OxyContin savings cards with him. Erika said they did not need any additional savings cards at this time.
PLPMDL0020000001	Parma	OH	44134	2/24/2011	Spoke with James (new pharmacist at this location) & introduced Butrans. Reviewed indication, dosing, appropriate patients/positioning, and once-a-week application. James said he had not yet dispensed any Butrans but that he just transferred from a different store. He did not yet have any specific recommendations on what are physicians may have Butrans potential. Discussed OxyContin savings cards which he said they could really use as he only had one left. He said that he likes to be able to give out savings cards whenever possible.
PLPMDL0020000001	Lyndhurst	OH	44124	2/24/2011	Quick call...Spoke to doc about the Butrans patient and asked if she has seen any appropriate patients. She said no and that it may be a small window of opportunity of appropriate patients. Reminded her to choose patients with commercial coverage.
PLPMDL0020000001	Rocky River	OH	44116	2/24/2011	Spoke with Leigh Ann, we reviewed the Butrans medication guide and how to instruct the patient on proper use of Butrans. She has not seen a script yet and said they see mostly short acting pain medication in their pharmacy. They do have a few patients who get refills every month of vicodin and we discussed the indication and appropriate patients for Butrans. Reminder about OxyContin as a Q12hr option and asked her to recommend Dr Gigliotti said that he has still not prescribed Butrans- he said he has not seen the right patient yet as he is not as busy as he used to be & hasn't prescribed a long-acting opioid in awhile. I reminded him that he has shared with me in the past that he does not like his patients to take around-the-clock short-acting opioids as he does not like people to get used to taking pills every few hours. He said that he still thinks that way. I asked him if he would consider using Butrans before putting patients on around-the-clock short-acting opioids if the patient is appropriate and has a chronic condition. He said that he liked that idea. He got out his initiation guide & placed it in front of his computer to remind him. Reviewed managed care & savings cards. Also OxyContin & Ryzolet reminders for appropriate patients & reviewed savings for each. Reminded Dr Gigliotti how to write Butrans 5mcg prescription when the patient we spoke about presents. He said he would do this.
PLPMDL0020000001	Independence	OH	44131	2/24/2011	Dr Trickett said that the patient she told me about in my last visit did end up discontinuing Butrans due to nausea. (Reported nausea last call). She said she will still try Butrans for other patients. I asked if she would consider starting appropriate patients on Butrans instead of or before starting them on around-the-clock short-acting opioids if they have a chronic condition. She agreed this was a good place to position Butrans. She also asked if she could use Butrans for patients who were already on Vicoden in place of it. Showed pg 6 of initiation guide & let her know that was also a great place to start. Also discussed managed care & savings cards for commercial insurance & cash-pay patients.
PLPMDL0020000001	Mayfield Heights	OH	44124	2/24/2011	Discussed the indication and the patient positioning for Butrans. She said she would probably use for patients taking vicodin, tramadol, or those that were on darvocet. I reviewed the initiation dosing. Explained the coverage and the savings card program. She sees it being a benefit for her patients.
PLPMDL0020000001	Richmond Heights	OH	44143	2/24/2011	Window call. Briefly introduced Butrans, the indication, CII, and 7 day delivery of Buprenorphine. He simply said he does not use patches. Nothing more learned.
PLPMDL0020000001	Akron	OH	44313	2/24/2011	Spoke with Sarah who is a new pharmacist. Introduced Butrans and the FPI. She said she would not order Butrans unless a prescription came through. However, she seemed to be receptive to the product.
PLPMDL0020000001	Mayfield Heights	OH	44124	2/24/2011	Spoke to Bill about the stocking of Butrans. They received a couple of scripts and one today from Dr. Dewes office. Patient did not have the savings card and paid \$50 with caremark. I explained the savings card and commercial coverage. He had to re-order Butrans already. Was not sure of relay health evoucher program.
PLPMDL0020000001	Barberton	OH	44203	2/24/2011	Spoke with Cathy, the pharmacist. She said that she would order the 10 mcgs of Butrans and was at her computer as I was leaving. She says she has not seen any movement yet but that Dr. Shah and Patel would be the best
PLPMDL0020000001	Lyndhurst	OH	44124	2/24/2011	Quick call.....reviewed the appropriate Butrans patient type with she and Dr. Reed. They have not had any other patients yet. Explained the coverage with commercial plans and savings cards.
PLPMDL0020000001	Mayfield Heights	OH	44124	2/24/2011	Discussed the Butrans indication and the 4 other selling messages. She asked about MOA - agonists/antagonist. Showed her the MOA in the FPI. She asked about supplemental analgesics. Showed her that they can be used. I discussed the application and disposal process and how to titration. She asked about studies with Butrans and short acting opioids. Told her there were not studies. She said they are writing a lot of it and that Dr. Dewes is switching patients from IR opioids. Explained the savings cards and commercial coverage.
PLPMDL0020000001	Barberton	OH	44203	2/24/2011	I asked him if he had initiated therapy and he said he had not. When I asked him if he would think of Butrans when a low dose hydrocodone patient came in he said he would. I then showed him the titration guide so he would get an idea as to where he should initiate therapy. Closed by showing him an example of what a script would look like on the last page of the titration guide.
PLPMDL0020000001	Cleveland	OH	44130	2/24/2011	Quick call with Dr Fedorko- He said he is trying to remember Ryzolet & the value cards. He said again that insurance gives him push back sometimes when he tries to write it. I reminded him where there is tier 3 coverage & encouraged him to give out value cards to appropriately insured or cash-pay patients. Also Butrans indication & seven days buprenorphine delivery in one application messages. He said that he wishes he didn't ever have to write opioids & that he has started "firing" patients from his practice who ask for opioids. I told him that he is doing as he should in being careful & selective when selecting patients for any opioid & empathized with his struggle. Reminded him that there are patients who are appropriate & for whom opioids may be beneficial for pain relief.
PLPMDL0020000001	Westlake	OH	44145	2/24/2011	I reviewed our last conversation about patients he had in mind for Butrans who work a physical job. He has not tried Butrans in a patient but said that he would give it a try. For the patient he has in mind, I asked what they are currently taking. He said they are on vicodin either 5 or 7.5mg and several per day. I reviewed how to taper a hydrocodone patient and how to initiate Butrans per the initiation guide. He agreed to give it a try.
PLPMDL0020000001	Mayfield Heights	OH	44124	2/24/2011	Spoke with Jenise and other tech about the stocking and movement of Butrans. They confirmed that a couple of Butrans scripts have been filled. They did not recall the prescriber. They have reordered already. Warren was busy. Explained the savings cards program.
PLPMDL0020000001	Mayfield Heights	OH	44124	2/24/2011	Discussed the Butrans indication and the 5 selling messages. Asked him if he see a benefit of Butrans for his patients. He said yes for those that require a long acting for chronic pain. I reminded him of the 5mcg/hr starting dose for most patients. Also reviewed the commercial coverage. He said he will try to use it.
PLPMDL0020000001	Highland Heights	OH	44143	2/24/2011	Discussed the Butrans patient and the 5 selling messages. Doc said he has written several scripts so far and none of them have gone through - they all require PA. I reviewed the commercial plans with him and the nurses explained that Medicaid and Medicare will require a PA. Asked him to prescribe Butrans for commercial patients and give them a savings card. He said he will keep trying because he wants to write it and he likes the product.
PLPMDL0020000001	Mayfield Village	OH	44143	2/24/2011	Introduced Butrans and the 5 selling messages. She asked about how to keep the patch on. I explained the use of first aid tape or tegaderm. Discussed dosing, application and disposal process. Explained that commercial coverage is the best patient type. She said she would prescribe.
PLPMDL0020000001	Twinsburg	OH	44087	2/25/2011	Spoke with Lou who said he has not seen Butrans activity yet. He said he does not understand as he thinks Butrans seems like a fantastic option for many patients. I explained that I had not yet spoken with many of the area physicians due to their no access policies but have been leaving information. He asked me for some initiation guides & said that he can think of many of his customers that he thinks Butrans would be appropriate for and therefore said he would make some phone calls to physicians in effort to educate them on Butrans & to see if the physicians would be willing to switch appropriate patients to Butrans. Reviewed managed care coverage & e-voucher with Lou & Nancy.
PLPMDL0020000001	Woodmere	OH	44122	2/25/2011	Spoke with Angie & followed up on previous Butrans call. She said she left the information for the pharmacy manager, but that he had not yet ordered Butrans. Reviewed indication, application, appropriate patients with Angie & she said that she would once again remind the pharmacy manager & recommend that he order Butrans in. Also discussed OxyContin savings cards.
PLPMDL0020000001	Garfield Heights	OH	44125	2/25/2011	Spoke with Jackie (MA) who said that Dr Gupta left early due to the weather. I reviewed Butrans with her & discussed indication, dosing, appropriate patients/positioning. She said she felt that Butrans sounded like something that Dr Gupta would be very interested in & she worked with me to schedule their first available lunch.
PLPMDL0020000001	Cleveland	OH	44109	2/25/2011	I asked dr if he started 1 patient on Butrans? dr said no he hasn't talked to a patient yet where he feels Butrans is appropriate so we discussed Butrans indication and I showed dr Butrans initiation guide and asked dr to think of 1 patient who's pain isnt controlled and that patient is requesting something else,perhaps Butrans could be an option for this patient. dr agreed to think of Butrans for that type of patient and i said i would follow-up at our lunch on March 7th, 2011. recommended Senokot-5<font color=blue><b>CHUDAKOB's query on 03/04/2011</b></font>By asking him what patient he thinks would be an appropriate patient for Butrans, he might open up. Even if you already asked this, he is not convinced.<font color=green><b>BROOKAM's response on 03/05/2011</b></font>yep agree! I have lunch with him this monday BUT the issue is that he see's majority of patients in hospital where they are cash paying and residents like him said this will absolutely have to be used in the OUT-patient setting,not in-patient at the moment<font color=blue><b>CHUDAKOB's query on 03/07/2011</b></font>So is he the right person to be talking to. How will he help you move prescriptions if he cannot prescribe it due to his seeing patients in the hospital? Just wondering??<font color=green><b>BROOKAM's response on 03/10/2011</b></font>he see's patients in the out-patient center and I am not calling on him, as a Butrans Core(he's not listed as one) but clearly ANY resident in the out-patient facility i talk to and that treats chronic pain, im discussing Butrans as an option with them so that they can consider starting patients in out-patient facility. hope that answers your question:) Thanks!<font
PLPMDL0020000001	NORTHFIELD	OH	44067	2/25/2011	Spoke with Sherry (tech) who said that Janelle was too busy to talk to me today. I reviewed Butrans indication, appropriate patients/positioning, & e-voucher with her. She said she did remember seeing Butrans on the shelf but does not think they have dispensed any. Left FPI and my card for questions & let Sherry know I would return for follow-up.
PLPMDL0020000001	Beachwood	OH	44122	2/25/2011	Introduced Butrans to Dr Hill who said that Dr Tabbaa had already shared his information with him. Reviewed 5 core messages, box warning. He said that he plans to start using it along with Dr Tabbaa as he respects his medical opinions on products. Reviewed application, adhesion, heat warning, CII, patient information booklets. Dr Hill asked about managed care coverage, so I went over commercial tier 3 coverage, savings cards for commercially insured/cash patients, Medicare/Medicaid prior authorization (& unable to use savings cards). He agreed that a \$15 co-pay for Butrans for commercial insurance patients was very reasonable. Also discussed OxyContin for appropriate patients with moderate to severe pain who were beyond Butrans. Seven tablet strength reminder as well.
PLPMDL0020000001	Beachwood	OH	44122	2/25/2011	Dr Tabbaa said he was very excited about Butrans & that he actually just wrote his first prescription for a patient. He asked how long it takes to start working. I showed FPI 12.3 & also 2.4 regarding supplemental analgesia. He said he was very familiar with buprenorphine & has used it in other forms. He asked if there was any indication for Butrans for addiction treatment. I told him there was not & that Butrans is only indicated to treat pain & showed FPI 5.17. He asked if there was a heat warning. I told him yes & discussed box warning. Reviewed 5 core messages, dosing, & appropriate patients/positioning. He said he will be using Butrans a lot & asked about insurance/cost. Discussed starting by using it for appropriate commercial insurance patients due to tier 3 coverage & savings cards. Reminder for OxyContin q12h for appropriate & reviewed savings cards. I would be back for
PLPMDL0020000001	Cuyahoga Falls	OH	44223	2/25/2011	Spoke with pharmacist and introduced Butrans and the FPI. Pharmacist best bet would be to talk to Bressi and Pitt (Bressi not in my geography). Asked if he would consider ordering the 5 mcgs since I had been discussing it with several docs in the area.
PLPMDL0020000001	Cuyahoga Falls	OH	44223	2/25/2011	Spoke again with the pharmacist Christina, although they had still not ordered Butrans she did give me Little more time than my last visit to explain what it was. She had mentioned visiting Dr. Goswami. I have not seen him yet but managed care there will be a definite issue.
PLPMDL0020000001	Westlake	OH	44145	2/25/2011	I asked Dr if he had given any thought to where Butrans might fit in his practice. We reviewed the initiation guide and he thinks he agree to try Butrans in a few patients. He could not think of any specific patient.
PLPMDL0020000001	Lakewood	OH	44107	2/25/2011	Quick follow up, I asked Dr if he thought further about the type of patient he might prescribe Butrans for, he said he would try it for a patient who is needed vicodin around the clock. I reminded him of how to initiate a patient and how to write the Butrans script.
PLPMDL0020000001	Cleveland	OH	44109	2/25/2011	I asked dr if she started any patients on Butrans yet? dr said no but she has a few patients in mind and has talked to some patients about Butrans but they didnt want to stop taking their pills and put a patch on i showed dr Butrans initiation guide and asked if these were opioid experienced patients similar to chart in the initiation guide? dr said yes, they were taking a couple tabs a day of short-acting,so i asked dr to think of patients that are complaining their pain isnt controlled on short-acting opioids and they are requesting a change in medication,these could potentially be patients she can consider to start on Butrans. dr said she'll think about it and try thinking of some other patients like that. recommended Senokot-5
PLPMDL0020000001	Cuyahoga Falls	OH	44223	2/25/2011	Spoke with Pat to see if there has been any movement. He said he had not seen anything yet but had done some additional research on Butrans and really thought it was a good concept with a big need in the market.

PPLPMDL0020000001	Cleveland	OH	44109	2/25/2011	i showed dr Butrans initiation guide and asked if he started any patients on Butrans? dr said no but he thinks its a great option for his patients that dont like taking pills around the clock. dr said transdermal delivery and once weekly dosing are 2 of the biggest benefits in his eyes. i asked dr if he could consider a couple patients,opioid experienced, that are complaining of pain not being controlled with their current short-acting opioids and they are requesting a change in medication,perhaps Butrans could be an option for them? dr said yes that made sense and he would consider Butrans for a few patients and let me know what results he see's in patients.dr asked about Medicaid coverage so we discussed Butrans formulary coverage.recommended Senokot-S<font color=blue><b>CHUDAKOB's query on 03/04/2011</b></font>Good next call objective question!!<font color=green><b>BROOKAM's response on 03/06/2011</b></font>thanks<font color=blue><b>CHUDAKOB added notes on 03/07/2011</b></font>You're welcome!
PPLPMDL0020000001	Cleveland	OH	44109	2/25/2011	worked physical medicine&rehab dept-see call notes
PPLPMDL0020000001	Cleveland	OH	44109	2/25/2011	i asked dr if he has started any patients on Butrans? dr said no, hasnt thought about it and he still wants to review Butrans fpi,more in depth than our discussions. i asked dr how Butrans was a benefit to his patients? dr said transdermal delivery and once weekly dosing were both benefits but this isnt going to work for every patient as some patients are fine taking their short-acting medications. i told dr to consider patients where their pain isnt controlled and they want another option,thats where Butrans could be considered.i showed dr Butrans initiation/titration guide and discussed managed care coverage. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44103	2/25/2011	asked dr if she started any patients on Butrans yet? dr said she is still looking for right patient,so i asked dr who that patient was in her mind for Butrans? dr said patients willing to take a patch and put it on a different site every week as some patients arent responsible enough to do that and want their pills. i asked dr to consider patients that are willing to wear an adhesive that she believes are appropriate for Butrans and showed her the Butrans initiation guide and discussed managed care coverage.
PPLPMDL0020000001	Cleveland	OH	44103	2/25/2011	only got a minute with dr but asked dr if he started any patients on Butrans yet? dr said no he hasnt thought of Butrans for his patients as he's not going to do the Prior authorizations for his medicaid patients and thats majority of his patient population.i told dr i appreciated his honesty and asked if he could consider Butrans as an option for those patients with commercial insurance that he feels are appropriate for Butrans? dr agreed and i gave him Butrans initiation guide and discussed Butrans patient savings cards with dr.i showed dr OxyContin conversion guide and told dr when patients are above 80mg oral morphine or equivalent,he has option of OxyContin with 7 tablet strengths and its available at lowest branded co-pay on Medicaid.recommended Senokot-S<font color=blue><b>CHUDAKOB's query on 03/04/2011</b></font>Amy, he might have a hard time telling how the benefit he sees in Butrans if he has never tried it. If he truly sees a benefit, don't you think he will try it? Just wondering your thoughts?<font color=green><b>BROOKAM's response on 03/05/2011</b></font>i would disagree as many doctors havent tried Butrans,so they have to say in their words how they see Butrans being a benefit...could be various reasons, right? the bottom line is dr robson does NOT want to do the prior authorizations where dr boyd IS willing to do them...<font color=blue><b>CHUDAKOB added notes on 03/07/2011</b></font>OK.
PPLPMDL0020000001	Parma	OH	44134	2/28/2011	Reviewed Butrans indication, dosing, appropriate patient type/positioning, box warning with Alicia (pharmacist). She said she remembers seeing an email about Butrans but has not yet dispensed any. Discussed positioning & opioid-naïve/opioid-experienced patients. Alicia said that she would be very happy if Butrans could take the place of around-the-clock Vicoden or Percocet for some patients. Went over heat warning & adhesion (taping edges with first aid tape or bioadhesive/tegaderm). Also discussed e-voucher & OxyContin savings cards.
PPLPMDL0020000001	Independence	OH	44131	2/28/2011	Quick call with Dr Jack in effort to find out where in his mind he has positioned Butrans. He said he had forgotten Butrans again & asked that i continue to remind him. Asked him to prescribe Butrans for an appropriate patient for whom he would normally prescribe 1-3 Vicoden per day for a chronic condition.
PPLPMDL0020000001	Parma	OH	44129	2/28/2011	Spoke with Sherrie (nurse) who said that Dr Roheny will not be in all week. Reviewed Butrans indication, appropriate patient type, dosing, & application with her & asked what her thoughts were. She said she thought Butrans sounded "interesting" and that she thought several of Dr Roheny's patients may be appropriate for Butrans. She asked that I return next week to catch Dr Roheny.
PPLPMDL0020000001	Parma	OH	44129	2/28/2011	Spoke with Edie - reviewed Butrans indication, dosing, appropriate patient types/positioning, managed care, & savings cards. She said Dr Rossi had not yet prescribed Butrans but thought that it sounded like something some of her patients may benefit from. Also reviewed OxyContin for appropriate patients & seven available tablet strengths.
PPLPMDL0020000001	Parma	OH	44129	2/28/2011	Spoke with Lynn to follow-up on Butrans. She said Dr Gallagher has not yet prescribed it. Reviewed with her indication, appropriate patient types/positioning, patient information booklets, & managed care. Also reminded her of savings cards for patients with commercial insurance or who are cash-pay & reminded her they are not for patients with any type of government insurance, including Medicare/Medicaid.
PPLPMDL0020000001	Independence	OH	44131	2/28/2011	Caught Dr Rob in the hallway for a quick call- Butrans indication & appropriate patient/positioning messages. I asked him to consider Butrans for one appropriate patient for whom he would normally prescribe 1-3 Vicoden per day. He said Butrans seemed "interesting" & then walked away. Butrans indication, dosing, & managed care/savings reminder with Maria & Cameo (MA).
PPLPMDL0020000001	Parma	OH	44129	2/28/2011	Introduced Butrans to Dr Taylor, delivering 5 core messages & box warning. She said she had several patients for whom Butrans may be appropriate. I asked what type of patient she was thinking of & she said she would use it in a patient who wasn't getting enough relief from over-the-counter options, for patients who had previously been on Darvocet, & for some patients who were taking Vicoden around-the-clock for chronic conditions. She asked if patients could take supplemental analgesia-I showed FPI 2.4. She said she thinks Butrans "seems less abuseable". I referred to box warning & told her that like all opioids, Butrans does have abuse/addiction potential & advised that she should be just as cautious in prescribing it as she would any other opioid. She asked about managed care- i reviewed commercial coverage & savings cards for those patients & discussed Medicare/Medicaid prior-authorization. Also OxyContin for appropriate patients beyond Butrans reminder & went over managed care.
PPLPMDL0020000001	Akron	OH	44304	2/28/2011	Introduced Butrans and the FPI at a lunch. It seemed that most of the residents and physicians i spoke with did not feel comfortable treating pain.
PPLPMDL0020000001	Cleveland	OH	44106	2/28/2011	i asked dr if he has started any patients on Butrans yet? dr said no he hasnt seen the right patient yet for Butrans.i asked who was the right patient? dr said someone willing to put a patch on and not have the pills around the clock.i showed dr Butrans fpi,initiating therapy section,noting that he can give Butrans and short-acting opioid or non-opioid during initiation of therapy of Butrans or throughout maintenance of therapy.dr said okay he forgot about that.i asked dr what benefits does he think Butrans offers his patients? dr said Butrans's transdermal delivery and once weekly dosing are both benefits in his eyes, he just needs to talk to some patients about it. we discussed managed care coverage for Butrans. recommended Senokot-S
PPLPMDL0020000001	akron	OH	44333	2/28/2011	Introduced Butrans and FPI with Dr. Bashor and the entire staff. Dr. Bashor really seemed to like the concept of this product and immediately said he was thinking of several patients. when I asked for clarifications and more specifics he mentioned the patients he had in mind were elderly patients.
PPLPMDL0020000001	Mayfield Heights	OH	44124	2/28/2011	Debbie said she is still confused about the MOA and if Butrans is an agonist/antagonist. I read the MOA in the clinical pharmacology section of the FPI. Discussed the other opioid receptors involved. She said that Butrans is not yet on the Cleveland clinic formulary that allows NPs to prescribe. She sees lots of patients that might be good candidates. Reminded her of the maax dose and that above 20mcg might be an oxycotin patient.
PPLPMDL0020000001	Akron	OH	44304	2/28/2011	Introduced Butrans and the FPI. Physician said that he does not prescribe many narcotics and when a patient gets to the point where they need something "stronger" he refers them to Pain Management. I explained that Butrans had been studied in patients who had never been on opioids but when I mentioned it was scheduled it seemed that he became hesitant.
PPLPMDL0020000001	Mayfield Heights	OH	44124	2/28/2011	Doc said she has been prescribing Butrans with mostly positive results. Patients have not complained. Some scripts have required a PA. She could not recall the plans. I explained that medicaid/medicare plans will require a PA and that commercial patients would be the best candidates for success. She asked about the use of supplemental analgesics. I confirmed that they could be used(per FPI). I reviewed the application and disposal process. She thinks there is a lot of potential for Butrans. Oxycontin reminder - patient indication and flexible dosing.
PPLPMDL0020000001	Cleveland	OH	44106	2/28/2011	i talked to dr about how many patients ask him daily for a medication change or complain that their pain isnt controlled? dr said there's a lot of people who are like that but doesnt know how many on a daily basis.i asked if dr could consider Butrans for a couple patients on tramadol,that are complaining of pain not being controlled? dr said he would and asked about medicaid coverage? we discussed all managed care coverage for Butrans. recommended Senokot-S
PPLPMDL0020000001	Akron	OH	44304	2/28/2011	Introduced Butrans and FPI. Doctor did not seem interested and said he rarely treats pain patients.
PPLPMDL0020000001	Cleveland	OH	44114	2/28/2011	dr said she started a few patients on Butrans,but 1 patient had some confusion at pharmacy and couldnt get Butrans so dr put patient on another medication. i asked dr why she chose Butrans and dr said patients were taking a couple tabs of Vicodin and she thought Butrans would be easier with once weekly dosing.i asked dr to continue talking to patients, about Butrans, when they are taking a couple tabs of Vicodin or Percocet and she feels are appropriate. dr said she would do that. we discussed workers comp coverage and commercial plan patients using Butrans patient savings cards. recommended Senokot-S
PPLPMDL0020000001	Fairlawn	OH	44333	2/28/2011	Introduced Butrans and FPI to pharm tech, Tanya and the pharmacist. They were rushed for time and there were patients waiting so I gave a brief overview of the indication and talked about the 7 day delivery system.
PPLPMDL0020000001	Cleveland	OH	44106	2/28/2011	i talked to dr about Butrans fpi,medication guide,patient information booklet,Butrans initiation guide and Butrans patient savings cards.i asked dr where he thinks Butrans plays a role in his practice? dr said he has a lot of patients on tramadol,as thats the only narcotic they will prescribe in the out-patient clinic and he has patients who complain of around the clock dosing and dont like taking pills,so a transdermal delivery and patch would be a good option for these patients.i showed dr Butrans initiation guide and asked him to consider a few of those patients taking tramadol that he feels are appropriate for Butrans and get some clinical experience with the medication dr agreed to do this and we discussed formulary coverage for Butrans. recommended Senokot-S
PPLPMDL0020000001	Akron	OH	44304	2/28/2011	Introduced Butrans and the FPI. Physician seemed hesitant about using Butrans because it was scheduled. She said that she would likely not use this product.
PPLPMDL0020000001	Cleveland	OH	44114	2/28/2011	i talked to John,PA,about patients he feels are appropriate for Butrans and John said either patients who are taking NSAIDs,he would recommend Butrans for them or if they are taking 1-3 tabs of short-acting opioids,he would start these patients on Butrans to John said he likes transdermal delivery and once weekly dosing of Butrans and he just needs to keep recommending to doctors that they start more patients on Butrans.John said he writes the scripts but doctors sign all of them. we discussed Managed care coverage for Butrans. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	2/28/2011	i talked to Erinne,Pharmacist,briefly to confirm stocking of Butrans and Erinne said she ordered Butrans,has it in stock but hasnt seen any scripts yet.i asked Erinne if she would recommend Butrans to doctors,when patients are complaining to her that their short-acting opioids arent working or they are requesting something different? Erinne agreed to do this and said she liked Butrans once every 7days dosing and 4 patches a month were a lot easier for some of her patients.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44106	2/28/2011	i asked dr who she felt was appropriate for Butrans.dr said she only writes tramadol for chronic pain so she would think of these patients to try Butrans.i showed dr Butrans initiation guide,opioid experienced section looking at tramadol dosing and asked dr to consider a few patients that were taking tramadol but the pain wasnt controlled,to consider Butrans in these few patients. dr said she would do that and asked about medicaid coverage so we discussed managed care coverage for Butrans.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44106	2/28/2011	worked internal medicine dept-lunch with residents and appointment with Dr.Armitage
PPLPMDL0020000001	Akron	OH	44304	2/28/2011	Introduced Butrans and the FPI. Doctor liked the concept and seemed interested. She stuck around to ask questions and seemed to really start thinking of patients when I mentioned that Butrans had been studied in patients who had never been on opioids.
PPLPMDL0020000001	Cleveland	OH	44104	2/28/2011	showed dr Butrans initiation/titration guide and asked if dr identified 1 patient to start on Butrans and dr said no not yet. i asked dr how Butrans fits into his practice? dr said he likes transdermal delivery and once weekly dosing but he thinks this is for a specific patient who will want to stop taking short-acting opioids and try this.i asked dr to consider patients taking 1-2 tabs of Vicodin or Percocet and instead of increasing short-acting dose,try Butrans there.dr said he will do that but it also comes down to insurance coverage and he has a lot of Medicaid,so we discussed Prior authorization process for Medicaid patients, workers comp coverage and commercially insured patients using Butrans patient savings cards.i told dr when patients are above 80mg oral morphine equivalent,he has option of OxyContin with 7 tablet strengths and OxyContin is available at lowest branded co-pay on Medicaid and commercial plans,recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44106	2/28/2011	i talked to dr about Butrans fpi,black box warning,5 core messages,medication guide,initiation/titration guide,patient information booklet,Butrans patient savings cards and asked if dr saw a place for Butrans in his practice? dr said all they prescribe in the out-patient clinic is tramadol and there are a lot of patients on tramadol that dont like taking pills around the clock and a lot of these patients arent getting adequate pain control.dr said he see's Butrans being a place for these patients.i showed dr Butrans initiation/titration guide,opioid experienced section noting tramadol dosing and asked dr if he would start a few patients currently taking tramadol and convert them to Butrans? dr said he will think about which patients would be interested in a patch and once weekly dosing and give it a try. we discussed managed care coverage for Butrans and i recommended Senokot-S



PPLPMDL0020000001	Cleveland	OH	44114	2/28/2011	i asked dr whats the difference between the hydrocodone patient and Butrans patient? dr said he starts all of his patients,with chronic pain,on short-acting opioids, giving 1-2 tabs a day and then if pain worsens goes to 3-4 tabs daily,dr said if patients still complain of pain,while taking 4 tabs a day, he will go to long-acting and that is where he will think of Butrans.dr said probably more moderate pain is the hydrocodone patient and severe pain Butrans,so i showed dr Butrans indication again and initiation/titration guide and asked if dr could think of 1 patient with moderate pain that met Butrans indication where he could try Butrans? dr said he'll consider that and we discussed workers comp coverage and commercially insured patients using Butrans patient savings cards.recommended Senokot-S
	Cleveland	OH	44102	2/28/2011	talked to dr about Butrans fpi,5 core messages,initiation/titration guide,Butrans patient savings cards and patient information booklet.dr said once weekly dosing and a patch are two benefits in her eyes,for her patients.i asked dr if she would start a patient on Butrans after an NSAID and dr said no,she would try short-acting opioids like tramadol first and if that doesnt work she'll go to Vicodin for some patients but only a few tablets a day.i asked dr if she had patients taking tramadol where their pain isnt controlled and Butrans could potentially be an option? dr said she has majority of her patients on tramadol and could think of a few that would like a patch instead of pills.dr asked if Medicaid covers Butrans? i explained to dr that Butrans is a Prior Authorization for Medicaid patients but her commercially insured patients can use Butrans patient savings cards,dr said majority of her practice is Medicaid so the Prior authorization could be tough.recommended Senokot-S
PPLPMDL0020000001	Akron	OH	44304	2/28/2011	Introduced Butrans and the FPI. Although the physician seemed interested in Butrans therapy it seemed as though she preferred not to treat chronic pain. She took a titration guide and left.
PPLPMDL0020000001	Cleveland	OH	44106	2/28/2011	i talked to dr about Butrans fpi,5 core messages,Butrans initiation/titration guide,Butrans patient information booklet and Butrans patient savings cards.i asked dr where he felt Butrans had a place in his practice? dr said this is his first year of residency so he hasnt prescribed a lot of narcotics but is seeing more chronic pain patients and they only prescribe tramadol in out-patient clinic.dr said once weekly dosing and a patch are two benefits he see's in Butrans for his patients.i asked dr to think of a patient taking tramadol who's complaining of pain not being controlled and as long as patient meets Butrans indication,consider initiating Butrans,dr agreed and asked about Medicaid coverage for Butrans,so we discussed Prior Authorization requirements and Butrans patient savings cards for commercially insured patients. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44101	2/28/2011	i talked to dr about Butrans fpi,patient information booklet,initiation/titration guide and Butrans patient savings cards.dr said he doesnt prescribe a lot of narcotics but if he does he will only prescribe tramadol.dr said Butrans is interesting as its dosed every 7days and is a patch.dr said these are two benefits in his eyes,for his patients.i showed dr Butrans initiation guide,opioid experienced section looking at tramadol dosing and asked if dr could think of a few patients to try Butrans in that he felt were appropriate and get some clinical experience with the medication? dr agreed saying he will keep it in mind. we discussed managed care coverage for Butrans too. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44106	2/28/2011	i asked dr how many patients he see's daily,that ask for a medication change or request something different as their pain isnt controlled? dr said a lot of patients, maybe 10-15 daily,complain of current medication.i showed dr Butrans initiation/titration guide and asked if he would consider a few patients taking 1-3 tabs of short-acting opioids,where the pain wasnt being controlled,and try Butrans in them? dr agreed and asked about insurance coverage,so we discussed managed care coverage for Butrans. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44102	2/28/2011	i talked to dr about Butrans fpi,5 core messages,initiation/titration guide,Butrans patient savings cards for commercial plan patients,medicaid coverage requiring a prior authorization for Butrans and Butrans patient information booklet.dr said she has so many patients on Vicodin and Percocet where she is just refilling every month because its easier to do than deal with some of her pain patients.dr said she is very frustrated with treating her pain patients.dr said she likes Butrans once every 7days dosing schedule and likes that Butrans has transdermal delivery.dr said a lot of her patients complain of their short-acting medications not working so she'll think of a few of these patients and give Butrans a try.dr asked about medicaid coverage for Butrans as its almost 50% of her patient population,so i explained prior authorization requirements for Butrans and Medicaid and we talked about commercial plans.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44106	2/28/2011	i talked to dr about Butrans fpi,black box warning,5 core messages,initiation/titration guide,medication guide,Butrans patient savings cards.dr said he liked once weekly dosing as thats a lot easier for some of his patients that he knows dont like taking pills around the clock,so this could be an option for them.i asked if dr would start a patient on Butrans, right after a NSAID? dr said probably not as he doesnt have any clinical experience with Butrans,so we talked about dr considering patients taking 1-3 tabs daily of short-acting opioids,to consider Butrans.dr said he would do that and asked if Medicaid covered Butrans? i explained Prior Authorization required for Medicaid patients and told dr his commercial plan patients could use Butrans patient savings cards,so dr said to leave some and he would try Butrans in some patients and let me know. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44106	2/28/2011	i talked to dr about Butrans fpi,5 core messages,medication guide,patient information booklet,patient savings cards and initiation/titration guide.dr said there are some patients on tramadol that dont like taking the medication around the clock to control their pain so Butrans could be an option for them.i asked dr what benefits he saw in Butrans? dr said once every 7days dosing and transdermal delivery are two significant benefits to patients.i showed dr Butrans initiation/titration guide,opioid experienced section looking at tramadol dosing and asked dr to think of a few patients that dr feels are appropriate to start on Butrans.dr said he will think of some patients and let me know what happens we discussed Butrans formulary coverage. recommended Senokot-S
PPLPMDL0020000001	Akron	OH	44304	2/28/2011	Introduced Butrans and the FPI. When i asked how often she was prescribing hydrocodone she said not often but did take a titration guide and said she think of initiating therapy for a small number of patients.
PPLPMDL0020000001	CLEVELAND	OH	44109	2/28/2011	i talked to Eric,Pharmacist,about Butrans fpi,medication guide,5 core messages,initiation/titration guide,patient information booklet and Butrans patient savings cards. Eric said they wont order Butrans until they see a script come in,so i explained to Eric the importance of having Butrans in stock so that patients can get medication filled and not be turned away and told to return in 24hrs.Eric said he understood my position but he wasnt going to order until he saw at least 1 script come in for Butrans. i told Eric i would follow-up in a few weeks to see if any Butrans scripts have come through pharmacy. recommended Senokot-S
PPLPMDL0020000001	Akron	OH	44304	2/28/2011	Introduced Butrans and FPI. Physician gave me little time as she was late for a meeting and took a titration guide after i discussed the indication.
PPLPMDL0020000001	Akron	OH	44333	2/28/2011	Reintroduced Butrans and asked if he had initiated therapy. He had not started anyone at this point but mentioned he had patients coming in and was highly considering Butrans therapy. He wanted to know if he need a special license to prescribe and i told him he did not.
PPLPMDL0020000001	Akron	OH	44304	2/28/2011	Introduced Butrans and FPI. Doctor said that he and the rest of the group write few opioid and once a patient fails on NSAID's that will almost always refer them to Pain Management.
PPLPMDL0020000001	Akron	OH	44304	2/28/2011	Introduced Butrans and the FPI. Physician mentioned she would prefer not to treat pain patients and usually refers them out. i asked what she meant by pain patients and she said that once a patient is failing on a non opioid she refers them out.
PPLPMDL0020000001	Akron	OH	44304	2/28/2011	Introduced Butrans and the FPI. This entire staff seems to be worried about prescribing opioid and Dr. Lee was no different. She listened to what i had to say, thought it was a good concept but seemed like this would not change how she is currently treating pain patients.
PPLPMDL0020000001	Brooklyn	OH	44144	2/28/2011	Quick call with Michelle- She said they have not yet dispensed any Butrans but do have it stocked. Reviewed indication & patient type with her. Also gave her OxyContin savings cards & discussed how they are to be used (commercial insurance or cash-pay only- not for government insurance including Medicare & Medicaid).
PPLPMDL0020000001	Mayfield Heights	OH	44124	2/28/2011	Discussed the Butrans positioning and the 5 selling messages. i reviewed the initiation dosing. He asked about formulary coverage and what is required for those with requiring a PA. Discussed the commercial coverage as the ideal patient and that medicaid will likely require long acting morphine taken for 2 days prior to Butrans approval. Discussed the oxycontin indication and the recent reformulation as he was not aware.
PPLPMDL0020000001	Bedford	OH	44146	3/2/2011	Dr Haddad said that he has written 2 Butrans prescriptions but that neither patient's insurance would cover it-I asked what plans & he said Medicare D & Medicaid. Reviewed coverage & emphasized importance of prescribing for appropriate patients with commercial insurance or BWC. Also reviewed savings cards for commercial insurance patients to bring them down to a \$15 co-pay which he agreed was very reasonable. Dr Haddad said he has a patient on BWC who is on 200mg tramadol per day who he will prescribe Butrans 5mcg/hr for. i told him this sounded like a great place to start. Dr Haddad said he sees a place for Butrans & he intends to keep prescribing it. i also suggested that he remember OxyContin for appropriate patients who were beyond Butrans. He agreed OxyContin is a good option for some patients. Dr Haddad said he had just read a newspaper article about "a few" 18-19 year olds who overdosed on OxyContin & died as a result. Discussed importance of appropriate patient selection.
PPLPMDL0020000001	Bedford	OH	44146	3/2/2011	Only a quick call with Dr Moufawad in the hallway. He said that although he has not started a patient this week on Butrans, he does plan to. i asked him what type of patient & he only said that he would find someone. Spoke with Amber & reminded her of managed care coverage & savings cards.
PPLPMDL0020000001	Cleveland	OH	44111	3/2/2011	Met with Barbara while talking to Dr Daoud, we reviewed the appropriate patient type for Butrans. We discussed the application sites and proper application per the medication guide. We discussed appropriate managed care for Butrans and Ryzolt and also reviewed the savings programs for OxyContin, Butrans and Ryzolt.
PPLPMDL0020000001	Cleveland	OH	44114	3/2/2011	i asked John who was an appropriate patient to start on Butrans and why? John said their patients who are taking short-acting opioids around the clock and still coming to them complaining of pain not being controlled,thats where he would consider Butrans. i asked if John would feel comfortable starting a patient who's taking 1-2 tabs short-acting hydrocodone or oxycodone,complaining of pain not being controlled,and start patient on Butrans 5mcg/hr? John said yes he might do that,but he's thinking more about patients taking 3-4 tabs daily of short-acting opioids to start on Butrans 10mcg/hr.i told John that was a great place to start and get some clinical experience,we discussed workers comp and medicaid coverage for Butrans.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44114	3/2/2011	i asked dr how Butrans benefitted his patients? dr said he is concerned with Butrans falling off because so many patches fall off patients and this is a new medication to him and it takes him awhile to feel comfortable prescribing a newer medication.i asked dr how long is a fair timeframe,to wait,before he prescribes Butrans? dr said i dont know.i asked again how Butrans benefitted his patients? dr said if he has a patient on a couple tabs of vicodin or percocet and they are pushing him for more pills,he might consider Butrans for these patients.i showed dr Butrans initiation guide,we discussed appropriate patients for Butrans,and asked if dr has patients complaining daily of their short-acting opioid not controlling their pain? dr said yes every day.i told dr that is where he can start a patient on Butrans,instead of re-filling patients short-acting opioids.dr asked about side effects and was there itching with Butrans.i showed dr Butrans fpi,section 6.1,and discussed this information
PPLPMDL0020000001	Cleveland	OH	44195	3/2/2011	i asked dr if he started any patients on Butrans? dr said not yet,hasnt remembered Butrans,and asked again about appropriate patients.i showed dr Butrans initiation/titration guide and asked if dr had patients currently taking opioids that complained about their pain not being controlled and request something else? dr said yes all the time. i told dr thats the Butrans patient,looking at initiation guide could he think of someone taking 1-3 hydrocodone a day that he could start on Butrans? dr said yes he would try it in a few patients and let me know what he hears from patients.dr asked about managed care coverage so we discussed commercial insurance and medicaid as these are 2 biggest plans for him.recommended Senokot-S
PPLPMDL0020000001	Maple Heights	OH	44137	3/2/2011	Spoke with Karen (MA) who said Dr Balkovec was too busy with patients to speak with me. Attempted to schedule a lunch or appointment but Karen said that because so many reps have canceled on them recently, they have closed their lunch books temporarily & she said i would need to check back next week to see if they have changed their policy. Discussed Butrans indication & positioning & asked her thoughts. She said both Drs Balkovec see plenty of patients who fit the Butrans indication & she thinks it would be something they may be interested in. Also gave her a managed care overview & discussed savings cards for appropriate patients.
PPLPMDL0020000001	Garfield Heights	OH	44125	3/2/2011	Spoke with Dan who said they had just seen their first Butrans prescription. i asked who wrote the prescription & he said it was Dr Dew. Discussed appropriate patient type/positioning, managed care & dosing. Gave him 3 patient information guides & discussed application. Also reviewed OxyContin savings cards, which Dan said they were out of & would be able to use. Reviewed with him that they can only be used for commercially insured or cash-pay patients & could not be used for any type of government insurance, including Medicare & Medicaid.
PPLPMDL0020000001	Akron	OH	44304	3/2/2011	Introduced Butrans and FPI to Dr. Smucker. See individual call notes.
PPLPMDL0020000001	Akron	OH	44320	3/2/2011	Reintroduced Butrans and focused specifically on patient type. Managed care continues to be an issue. i asked if he would focus on patients with commercial insurance and he agreed he would.
PPLPMDL0020000001	Cleveland	OH	44106	3/2/2011	i talked to Steve,Pharmacy Manager,about Butrans stocking and Steve said he did order Butrans and had it in stock.i told Steve that physicians were starting to prescribe Butrans so it was critical that Butrans was in stock so patients could get medication and not have to wait 24hrs. Steve agreed saying he understood my position and will let me know when he see's a script come through pharmacy. i told Steve i would follow-up next week to see if anyone prescribed Butrans yet?

	Cleveland	OH	44195	3/2/2011	i talked to Curt, Pharmacy Manager, about Butrans stocking and he said that they did order all 3 dosage strengths of Butrans as he was going to use the rebate offer. I told Curt it was important to stock Butrans as doctors are prescribing and I don't want patients being turned away and told to return in 24hrs when they are in pain. Curt said he understood and would confirm that the order was placed. I told Curt I would follow up Friday to be sure they have it in stock as he didn't have time to look and show me the cartons today.
PPLPMDL0020000001	Cleveland	OH	44113	3/2/2011	worked pain management and physical medicine & rehab dept-see notes on dr shen and dale novak, pa
PPLPMDL0020000001	Cleveland	OH	44195	3/2/2011	worked pain management dept-see call notes, worked rheumatology dept-spoke with each secretary for Dr. Calabrese, Dr. Long and Dr. Chatterjee and was told to leave Butrans fpi, initiation guide and my business card with medical secretaries and THEY will give to doctors and IF doctors want to see me, the secretaries will call back and set me up for appointments. worked cleveland clinic pharmacies too-all 3 have Butrans stocked, just waiting for scripts to come through
PPLPMDL0020000001	Cleveland	OH	44111	3/2/2011	Spoke with John, we reviewed the Butrans FPI, and medication guide. We discussed how to instruct patients on proper application of Butrans per the medication guide. They did not have it in stock but said they would once they see scripts. Reminder about Ryzolt and asked to recommend Senokot-S with opioids.
PPLPMDL0020000001	Cleveland	OH	44103	3/2/2011	i asked dr if he started any patients on Butrans? dr said not yet, but he has some patients in mind who are taking a couple Vicodin and tramadol around the clock and knows their pain isn't controlled and he would like to try Butrans in them dr said in a week or two he should have some feedback for me about starting some patients on Butrans. I told dr since he is the Pain Director at St. Vincent's Charity, his colleagues, residents, pharmacy-all look to him, to start patients on Butrans and get some clinical experience with the medication. dr said he knows that physicians will follow his lead if he starts prescribing so he'll keep me posted. recommended Senokot-S
PPLPMDL0020000001	Akron	OH	44312	3/2/2011	Dr. Fouad committed to writing Butrans for a commercially insured patient before next Thursday.
PPLPMDL0020000001	Cleveland	OH	44111	3/2/2011	Spoke with Jim, floater, we reviewed Butrans FPI and medication guide. He saw Butrans information at another store and has read about it. He was not familiar with the Drs in the area, but thought it would be a good option for patients instead of vicodin around the clock. We reviewed how to instruct patients on proper use of Butrans.
PPLPMDL0020000001	Cleveland	OH	44113	3/2/2011	i talked to Aaron, Pharmacy Manager, for a few minutes, after my lunch with Dr. Shen as I told Aaron that Dr. Shen DID prescribe Butrans last week and started 3 patients, so it was critical he had Butrans in stock so that patients could get medication. Aaron said he thought they ordered it but didn't have time today to look and confirm. I asked if I could stop back end of week and follow-up, Aaron said to stop back next week and he will look for me.
PPLPMDL0020000001	Cleveland	OH	44135	3/2/2011	I reviewed the key messages for Butrans, he said he did see the Butrans info, but has not had a chance to read it over. He agreed to take a look at the FPI and that I can come back on Friday to get his thoughts.
PPLPMDL0020000001	Cleveland	OH	44135	3/2/2011	Quick intro, I reviewed the key messages for Butrans. He will take a look at the info and is interested in talking further at an appointment.
PPLPMDL0020000001	Cleveland	OH	44113	3/2/2011	dr said she started 3 patients on Butrans, 1 patient was on 3 tabs of 5mg Percocet and complaining of pain not being controlled and another patient was on 200mg tramadol and pain not controlled so she started patient on Butrans. I asked dr how Butrans benefits her patients? dr said Butrans being a CIII and its the only long-acting opioid in the CIII market are 2 benefits. Dale Novak, PA, said he likes that its a patch and only once a week for patients. Dr said transdermal is better for her gastric bypass surgery patients who can't swallow pills and request patches for pain, so she thinks Butrans is great option for them. dr said her max is 3 tabs a day of Vicodin or Percocet and 60 monthly, if patients need more than 3 tabs a day, she will go to a long-acting opioid. dr asked about Medicaid and workers comp coverage for Butrans so we discussed both. I asked dr when she considers OxyContin as an option, dr said if patients tried short-acting, after 3 tabs, but now she will go to Butrans and then OxyContin
PPLPMDL0020000001	Macedonia	OH	44056	3/2/2011	Quick call with Dr. Shenigo- got in a Butrans positioning reminder & she said that she had not yet seen any patients on Butrans. Indication reminder & recommended Senokot-S for opioid-induced constipation. She said she will keep Butrans in mind for when she does see her next pain patient if they are appropriate.
PPLPMDL0020000001	Akron	OH	44304	3/2/2011	Introduced Butrans and the FPI. Although Dr. Smucker does not see many I asked if he would be opposed to his residents prescribing Butrans. He said that while he doesn't typically write a new product for at least 2 years he would not have an issue if his residents wanted to prescribe it. At the end of the call he admitted that there was a place for Butrans.
PPLPMDL0020000001	Hudson	OH	44236	3/2/2011	Spoke with Angie (MA) who said that no Butrans prescriptions have been written in the office. Reviewed indication with her as well as positioning. She said she would remind the physicians. Also discussed Senokot-S & Colace & gave samples of each. Worked with Angie to schedule breakfasts & lunches in effort to see the physicians more regularly.
PPLPMDL0020000001	Westlake	OH	44145	3/2/2011	Followed up to see if he got his answer from medical services regarding site reactions, he did not think so. I reviewed our last conversation about who he might prescribe Butrans for asked if he had any appropriate older patients who have commercial insurance who he would convert to Butrans. He said he would think about it. I asked him to remember OxyContin as an option when Butrans may not provide adequate analgesia. <font color=
PPLPMDL0020000001	Cleveland	OH	44113	3/2/2011	>blue><b>CHUDAKOB's query on 03/10/2011</b></font>He is clearly hesitant. Why?<font color=green><b>HOLUBA's response on 03/14/2011</b></font>Great question. I am going to ask him this. He told me he thought this would be good for "little old lady with compression fracture or back pain" I'm not sure why he is just niching it in this place. <font color=blue><b>CHUDAKOB added notes on 03/15/2011</b></font><font>Challenge his
PPLPMDL0020000001	Cleveland	OH	44113	3/2/2011	<font>I talked to Jen, NP with Dr. Nickels/Cleveland Back&Pain Management, about Butrans fpi, 5 core messages, initiation/titration guide, patient information booklet and Butrans patient savings cards. Jen said majority of their patients are taking opioids and a lot of them are taking short-acting opioids around the clock. Jen said once weekly dosing and transdermal application of Butrans are both benefits to patients and the fact that Butrans is a CIII so she can prescribe the medication. Jen said she is newer to the practice so will have to talk to Dr. Nickels more and get his thoughts about Butrans and who he thinks are the right patients for Butrans. I told Jen I had a breakfast tomorrow with Dr. Nickels so we can all discuss how Butrans is a benefit to patients in their practice, she said that was fine. recommended Senokot-S
PPLPMDL0020000001	Akron	OH	44320	3/2/2011	Introduced Butrans and FPI. Was able to spend an ample amount of time reviewing the initiation and titration guide so the physician had a clear understanding how to start therapy. When asked about a specific patient she was very broad.
PPLPMDL0020000001	Cleveland	OH	44195	3/2/2011	i asked dr if he started any patients yet on Butrans? dr said he hasn't talked to a patient that's willing to take a patch and stop pills. I told dr he can still administer Butrans and give short-acting opioids and referred him to the Butrans fpi, initiation of therapy and maintenance of therapy sections. dr said okay, he forgot about that, and since this is a new product to him, I need to remind him that information every time. I asked if dr could think of 2 patients with commercial insurance, taking 1-3 tabs short-acting opioids daily, that are complaining of current medication not working and give Butrans a try in these patients? dr said he will consider this when seeing patients. recommended Senokot-S
PPLPMDL0020000001	Garfield Hts	OH	44125	3/2/2011	Spoke with Allene (pharmacist) who said that they do not yet have Butrans on their shelf. I asked her if she knew why & she said that the pharmacy manager has to order it. She said that she left him the information that I had given to her before & recommended that they order, but that he had not done so. Reviewed patient type/positioning. She said she would remind the pharmacy manager to place the order & I asked when he would be in so that I could follow up. She said his hours vary and I would just have to try another day & time. Reviewed OxyContin savings cards with her & she said they had been hoping for more. Reminded her that they are for commercially insured & cash-pay patients, not for those with government insurances.
PPLPMDL0020000001	Cleveland	OH	44111	3/2/2011	Dr said he did try to convert a patient who said his pain was not well controlled on vicodin, but once he suggested a medication change, the patient changed his mind and said he will stay on the dose of vicodin he has. He said that he thinks that Butrans would be a good option for a patient who is taking 4-5 vicodin per day who are not well controlled. I asked what dose of vicodin he writes and he said 5mg and 7.5mg. I reminded him that patient who are taking more than 30mg of oral morphine equivalent may not get adequate analgesia with Butrans and may be better suited for OxyContin as a long acting option. He said he may still use Butrans as an option if the patient needed a different opioid because he does do opioid rotation. Dr asked about adhesion of the patch and we reviewed proper application to skin and what to do with adherence issues per the medication guide. He took a close look at the demo patch. We reviewed the savings program for OxyContin, Butrans and Ryzolt. Spoke w Pam<font color=blue><b>CHUDAKOB's query on 03/10/2011</b></font>Andrea, re-read your call note. You wrote "I reminded him that a patient taking more than 30mg morphine equivalents may not get adequate analgesia with Butrans..." Is this what you meant?<font color=green><b>HOLUBA's response on 03/14/2011</b></font>Thank you for catching this type, I meant that Butrans 20mcg/hour may not provide adequate analgesia for patients requiring greater than 80mg/ day of oral morphine equivalents per the initiation guide. <font color=blue><b>CHUDAKOB added notes on 03/15/2011</b></font>Thanks for the clarification. Please re-read your call notes before submitting them.
PPLPMDL0020000001	Cleveland	OH	44113	3/2/2011	i asked dr if he started any patient on Butrans? dr said no, he hasn't thought about Butrans. I asked how does Butrans benefit his patients? dr said he likes that Butrans is a CIII and he can call in re-fills and the once weekly dosing is more convenient for some of his patients. I asked dr when he starts patients on short-acting opioids, at what point will he consider a long-acting opioid? dr said if patients are taking 4-5 tabs of short-acting opioids but complaining of pain worsening, then he will consider a long-acting opioid. I showed dr Butrans initiation guide and said that for those patients he's talking about, 4-5 tabs of short-acting opioids, that's the Butrans patient so we discussed proper tapering of short-acting opioids and initiation of Butrans. I asked if dr could think of 1 patient, like we discussed, to try Butrans in and get some clinical experience? dr said he would consider that. i
PPLPMDL0020000001	Cleveland	OH	44114	3/2/2011	i asked dr about the patients she started on Butrans, per my conversation with her PA, John, last week and dr said she started 1 patient on Butrans, patient was taking Lortab and pain wasn't being controlled so instead of increasing the short-acting opioid, she started patient on Butrans 10mcg/hour after proper tapering of Lortab and patient got script filled at Walgreens. dr said that was all she had time for today, as we have lunch next week and can talk more then. I thanked dr and asked her to continue thinking of those patients like the 1 she saw who was complaining that the pain wasn't controlled and consider Butrans. dr agreed to do that. recommended
PPLPMDL0020000001	Cleveland	OH	44195	3/2/2011	i asked dr if he has started anyone on Butrans? dr said no and that he usually waits 6 months or so before prescribing a product that's new to him as its not been on the market long. I told dr I appreciated his honesty but asked if he ever has patients complain of short-acting opioids not working or that their pain isn't controlled? dr said yes patients ask him for something different every day. I asked dr to think of 1 patient, like this, who has commercial insurance, and try Butrans and give Butrans patient savings card to patient. dr said he'll consider. recommended Senokot-S<font color=blue><b>CHUDAKOB's query on 03/10/2011</b></font>You might tell him that buprenorphine has been on the market a very long time. This is just a different delivery system for the product than has been currently available. <font color=green><b>BROOKAM's response on 03/13/2011</b></font><b>good idea, I did talk to Kathy Kraus, PA, for his patients and she "warned" me [jokingly though] that he "takes a LONG time to adopt "new" medications, even if buprenorphine has been on market for a long time" but I will say that to him and see what he says. thanks for your thoughts!<font color=blue><b>CHUDAKOB added notes on 03/15/2011</b></font>Let me know what he says. It seems unusual for someone of his stature to wait this long to try something new. After all... he is a thought leader.
PPLPMDL0020000001	Uniontown	OH	44685	3/2/2011	Reintroduced Butrans and asked if he had initiated therapy. He said that he would NOT write this product without listening to someone speak.
PPLPMDL0020000001	Cleveland	OH	44113	3/2/2011	i talked to Dale, PA, for Dr. Shen and Dr. Daoud, who said Dr. Shen started 3 patients last week on Butrans. I asked why? and what were the patients taking? Dale said dr shen likes that Butrans is a CIII, long-acting opioid as there's no other option in CIII market, as a long-acting opioid. Dale said these 3 patients were complaining of their pain worsening and not controlled by short-acting opioids on tramadol, percocet and vicodin. I asked Dale, How does Butrans benefit your patients? Dale said he likes that Butrans is a patch and dosed once a week. Dale said he's concerned with patients taking their short-acting opioids as needed because dr shen writes 1-2 tabs q4 or q6h and if they take too many pills 1 day and nothing the next he thinks they should be on a long-acting opioid like Butrans. I showed Dale Butrans initiation guide, discussing patients either starting on Butrans 5mcg/hr or 10mcg/hr, Dale said he had a patient coming today that he thinks is perfect to start on Butrans. I told Dale that
PPLPMDL0020000001	Cleveland	OH	44104	3/2/2011	i asked dr if he started 1 patient on Butrans? dr said no, he keeps forgetting about Butrans. I asked dr if he has re-filled any patients Vicodin this week? dr said yes, a lot of patients. I showed dr Butrans initiation guide and said if you have patients taking 2-3 tabs of Vicodin, complaining that pain isn't controlled and asking you for a change in their medication, would you consider initiating Butrans instead of re-filling their Vicodin? he said yes, that makes sense. I asked dr to stop and think of Butrans for this type of patient he sees Friday or next week, and try it in a workers comp patient or commercially insured patient. recommended Senokot-S
PPLPMDL0020000001	Fairlawn	OH	44333	3/2/2011	Spoke to Dr. Parisi briefly through the window. I asked him if he had prescribed Butrans and he replied he hadn't. I told him to focus on patients who were either failing on NSAID's or on low dose hydrocodone and he walked away.
PPLPMDL0020000001	Maple Heights	OH	44137	3/2/2011	Spoke with Linda (MA) who said that Dr Yager was done for the day & could not see me. Reminded her of my recent Butrans lunch & asked if she knows if Dr Yager has gotten any experience with it yet. She said she was not sure & suggested I schedule another lunch to speak with him. I did this & discussed positioning for Butrans with her as well as managed care & savings. Left initiation guide for Dr Yager as a reminder for Butrans.
PPLPMDL0020000001	Beachwood	OH	44122	3/2/2011	Spoke with Vickie (nurse) who said that Dr Yokiel prescribed Butrans for a patient last week. She said they have had no feedback so far. Discussed managed care coverage & savings cards for commercial insurance or cash-pay patients. Vickie said she believes Dr Yokiel will prescribe Butrans for many patients.

PPLPMDL0020000001	Cleveland	OH	44130	3/3/2011	Spoke with Shelly (MA & Office Manager) to follow up on Butrans. She said Dr Sawhny had not prescribed it yet. I reviewed indication, dosing, appropriate patients/positioning with her & she asked for my card & any literature I had about Butrans so that she could give it to Dr Sawhny as a reminder. Reminded her of savings cards & reviewed managed care.
	Solon	OH	44139	3/3/2011	Dr Zaidi said he has still not prescribed Butrans as he has not found the right patient for it. I told him that I was anxious to get his feedback as he is a thought leader in the area. He said he was surprised to hear that. I told him that with the number of patients he sees, certainly he must see many for whom Butrans may be appropriate & that this would allow him to gain clinical experience with Butrans. He agreed. He asked about managed care & cost. I went over commercial insurance & BWC & also reviewed savings cards with him & reminded him they are commercially insured or cash-pay patients only & could not be used for any government plans like Medicaid or Medicare. He asked if he could have another initiation guide for dosing instructions & flipped through it. I reminded him of dosing & titration ability after 3 days. He asked me about local pharmacy stocking so I reviewed several stocked locations with him. Also reviewed OxyContin savings cards which he said he needed.
PPLPMDL0020000001	Cleveland	OH	44130	3/3/2011	Quick call--Told Dr Diab that I had only one reasonable request from him: to think of Butrans for the next appropriate patient that he is going to start on Vicoden. He said he would do this. Spoke with Barb & Karen & reminded them of savings cards.
	Cleveland	OH	44106	3/3/2011	I talked to dr about Butrans initiation guide,discussed appropriate patients and asked dr how Butrans benefits his patients? dr said he likes that Butrans is transdermal and once weekly dosing is easier for some patients than dosing short-acting opioids around the clock.dr said they only prescribe tramadol in out-patient clinic and rarely will prescribe hydrocodone combo's for patients as they weren't trained that way. dr said if pain management,dr hayek(the chief) supports Butrans and Butrans gets on formulary in hospital,it will be a lot easier for him to prescribe and then he will have more support from the rest of the residents (he is 1 of 5 Chief Internal Medicine Residents).I told dr Butrans is being reviewed for formulary approval and we'll have an answer next Wednesday,after medication management reviews Butrans,told dr I would follow-up next week
PPLPMDL0020000001	Cleveland	OH	44130	3/3/2011	Introduced Butrans to Dr Lash. He said he had read something about it but has not yet prescribed it. I delivered 5 core messages & alerted him to box warning. I asked his thoughts & he said he felt there was a place for it. I asked him where he was thinking of using Butrans. He said older patients tend to like transdermal systems & that some end up on fentanyl simply because it is transdermal, not because they need "that much" pain control. He said he sees Butrans as being a good option for those patients so that they don't have to be on an opioid that is "so strong" like fentanyl. He said many of the younger chronic pain patients he sees are already on short-acting medications & that it is difficult to change those patients' mindsets once they have taken short-acting pain medications. Discussed dosing & appropriate patients/positioning for the more "moderate" pain side. Reviewed managed care coverage & savings cards with him. Also OxyContin reminder for patients beyond Butrans.
	Cleveland	OH	44102	3/3/2011	I asked dr if she has started any patients on Butrans? dr said no,she hasn't thought about Butrans,so I showed her Butrans initiation guide and we discussed appropriate patients.I asked dr to consider Butrans as an option for her patients taking short-acting oxycodone that are complaining of pain worsening and instead of increasing Percocet dose,dr said she would consider but she has mostly Medicaid.I told dr Butrans is available through a prior authorization and we discussed commercial plan patients too. recommended Senokot-S
PPLPMDL0020000001	Garfield Heights	OH	44125	3/3/2011	Dr Samuel said that the one patient he has prescribed Butrans for had to discontinue treatment due to itching. I asked him to clarify- he said it was not application site itching, but overall body itching. He said this would not detour him from prescribing Butrans for more patients. I asked him what type of patients he is looking for & he said it is difficult to switch patients from a short-acting to a long-acting medication because once patients get used to taking pills around-the-clock, they feel they need that to feel pain relief. He said he wished primary care physicians would think of Butrans before putting patients on Vicoden or Percocet. I asked him if he ever gets patients who aren't already on a short-acting & he said sometimes, but rarely. Asked him to think of Butrans with those patients & he agreed. He said he is still excited about it. Asked him to think of OxyContin for appropriate patients beyond Butrans 20mg/hr & discussed savings cards for Butrans & OxyContin.
PPLPMDL0020000001	Cleveland	OH	44106	3/3/2011	I asked dr if she started any patients on Butrans? dr said not yet because she has so many Medicaid patients and doing a prior authorization for Butrans is not realistic for her at this time. I asked dr if she has any commercially insured patients that could try Butrans using Butrans patient savings card? dr said a small percentage but she has a few patients like that.I showed Butrans initiation guide,we discussed appropriate patients and dr said she'll keep Butrans in mind as an option for some of her patients taking ultram who aren't controlled.
PPLPMDL0020000001	Shaker Heights	OH	44122	3/3/2011	Caught Dr Agrawal for a Butrans introduction. Delivered 5 core messages. He said he has read about it but has not prescribed it. He said that he liked that it is once-a-week & that it is a CII so that he can call in refills. He asked how Butrans compares in efficacy to fentanyl & Duragesic. I told him that we have no comparative data & showed initiation guide pg 6, pointing out that patients on fentanyl were excluded from the study & I asked Dr Agrawal to think of Butrans for the more "moderate" side. He asked how to write the prescription & I showed him the back of the initiation guide. He said he was excited to have something "new" as an option. Discussed savings cards with Michelle (MA).
PPLPMDL0020000001	Cleveland	OH	44106	3/3/2011	I asked dr if he started any patients on Butrans? dr said not yet as he hasn't been in clinic that much but teaching the residents dr said he thinks Butrans is a great option,as its transdermal and once a week dosing.I asked dr how Butrans benefits his patients? dr said Butrans being a CII is much easier for him and the residents as they can call in re-fills for CII's and its the only long-acting opioid in the CII market.I asked dr to think of patients that could be appropriate for Butrans,showing Butrans initiation guide,and thinking of commercial plan patients who can use Butrans savings card or Medicaid patients if he's willing to process Prior Authorization for Butrans.dr said if Butrans gets on formulary at the hospital,it'll be much easier to prescribe.
PPLPMDL0020000001	University Hts	OH	44118	3/3/2011	Quick call.....I discussed the Butrans indication and the first long acting CIII. Asked if he sees a place for Butrans for his patients. He asked again if covered on BWC. I confirmed that its being covered. Asked him to try for one BWC patient.
PPLPMDL0020000001	Westlake	OH	44145	3/3/2011	Dr said he is still waiting to see the right Butrans patient and he hasn't seen any new chronic pain patients recently. He does have a patient who does construction who is on vicodin who he thinks would be appropriate for Butrans but he does not know when he is supposed to see him. He said he will try that patient when he sees him. He said that many of his patients are on OxyContin and are already past the point of Butrans based on their daily opioid dose. Spoke with Joanne, reminder to recommend Senokot S.
PPLPMDL0020000001	Cleveland Heights	OH	44118	3/3/2011	Quick call...Reviewed the Butrans indication, 7 day application, and the positioning. He said he has not used it yet. I asked that he try for a patient taking low dose vicodin. No commitment. Oxycontin reminder.
PPLPMDL0020000001	Cleveland	OH	44104	3/3/2011	I talked to dr about Butrans being an option for his patients taking short-acting oxycodone that come to him complaining of pain worsening or wanting something different,trying Butrans there instead of increasing the tabs of short-acting oxycodone.dr said he'll keep it in mind but comes down to insurance and he has majority of medicaid and he's not willing to do Prior Authorizations for Butrans.I told dr he does have option of OxyContin,with preferred coverage on Medicaid,when he does convert patients to long-acting opioids,dr said he knew that and will continue to start patients on OxyContin and to let him know if Medicaid coverage changes.recommended
PPLPMDL0020000001	Cleveland Hts	OH	44118	3/3/2011	Quick call.....Reminded doc about his previous interest in Butrans. Asked if he has prescribed yet. He said not yet. Reminded him of the opioid naive patient or those on low dose of vicodin.
PPLPMDL0020000001	Cleveland	OH	44113	3/3/2011	I asked Jen if she saw any patients yesterday where she felt Butrans would be an appropriate option? Jen said no and wanted to talk to Dr Nickels,director of this office,about Butrans and got his thoughts.Jen said Butrans's dosing of once every 7 days and transdermal are 2 benefits she see's so she'll talk to Dr Nickels.I showed Jen Butrans initiation guide and asked if she could consider 1 patient,before I see her next week,thats on a couple tabs of short-acting opioid and complaining of pain worsening,to start on Butrans? Jen said that was fair and would keep Butrans in mind.
PPLPMDL0020000001	Cleveland	OH	44130	3/3/2011	Quick call with Barb to follow up on Butrans stocking. She said they still have not ordered any in & have not seen any prescriptions for it. Discussed where Butrans is being positioned as well as dosing strengths. Also discussed savings opportunities for patients & Butrans.com.
PPLPMDL0020000001	Solon	OH	44139	3/3/2011	Spoke with Lydia who said she's not going to AMCP. She said Dan B., Mike S., Lora Wilson, Mike Bukash & Tom Burris are all going Tues night. Deb is the person responsibly for scheduling the meetings and said she has available Wed for lunch, Wed before dinner and Thurs for Breakfast. All the dinner appointments are taken as well as lunch for Thurs. She said to pick a time and she'll book it for me.
PPLPMDL0020000001	Euclid	OH	44117	3/3/2011	Discussed the Butrans indication, CIII, 7 day application. Asked him to give it a try for his BWC patients. He said he would have to hear more and he does not have time right. He asked how much it cost. Told him that it varies from pharmacy to pharmacy.
	Cleveland	OH	44113	3/3/2011	I asked dr how Butrans benefits his patients? dr said its a good baseline for his chronic pain patients.I asked dr if that's the case,who are the patients he thinks could benefit from Butrans? dr said his patients taking 4 tabs of hydrocodone a day,instead of him pushing the dose and adding Ultram ER,he thinks Butrans could be an option right there.dr said he'll get there and will start patients on Butrans,its just taking him some time to start.I asked dr if he could think of just 1 patient,workers comp,medicaid or commercial as he has all 3 plans,just to get some clinical experience with Butrans? dr said yes,he will start some patients and they'll get there.
PPLPMDL0020000001	Barberton	OH	44203	3/3/2011	Met with Dr. Patel and asked if I could sit with him and help him identify the right type of patient for Butrans. We were able to talk about BWC patients but as the call ended he was still uncertain if he would try this on an opioid experienced or opioid naive patient. Scheduled lunch.
	Cleveland	OH	44106	3/3/2011	I talked to dr about Butrans fpi,patient information booklet,initiation guide and Butrans patient savings cards.dr said he doesn't have much experience with chronic pain yet, as he is a 1st year resident.dr said he only treats acute pain now and doesn't prescribe any CIII medications for acute pain.I showed dr the Butrans fpi,with indication,noting this medication is ONLY for chronic pain patients that are considered moderate to severe chronic pain so we talked about the indication and dr said maybe in the future when he treats chronic pain he'll have a place for Butrans.I asked dr what benefits he saw in Butrans,for patients overall? dr said once weekly dosing is nice,much easier than taking pills around the clock and he likes transdermal delivery.
PPLPMDL0020000001	Cleveland	OH	44106	3/3/2011	I asked dr if he started any patients on Butrans? dr said not yet,he forgot about it and just has to remember its available.I showed dr Butrans initiation guide and asked him where he would feel most comfortable starting a patient on Butrans? dr said someone already taking tramadol but not controlled.I showed dosing guidelines for opioid experienced,tramadol dosing,in Butrans initiation guide and asked dr to think of 1 patient who he could start on Butrans.dr agreed,we discussed managed care coverage for medicaid and commercial plans.
PPLPMDL0020000001	Mogadore	OH	44260	3/3/2011	Introduced Butrans and reviewed FPI, indication, dosing and initiation, boxed warning. He said he writes some pain meds but the practice is trying to get away from doing alot of chronic pain management. HE asked if this is like Talwin and I said no. We reviewed managed care and savings card program. Asked if he saw benefit to his practice and he said yes, he likes the trans dermal. Said he would think of a patient
	Cleveland	OH	44106	3/3/2011	I talked to dr about Butrans fpi,initiation guide and Butrans patient savings cards.dr said he likes the molecule buprenorphine,likes that Butrans is a CIII as he can call in re-fills so thats much easier for him and staff and dr said once weekly dosing is easier for some of his patients who dont like taking ultram around the clock.dr said they only prescribe tramadol in the out-patient clinic and he never starts anyone on hydrocodone combo's. I showed dr Butrans initiation guide,tramadol dosing guidelines and asked if he could think of 1 patient to try Butrans in and get some clinical experience? dr said he could but majority of their patients in out-patient clinic are Medicaid with a small percentage of Medicare patients so what was coverage for Butrans? we discussed prior authorization requirements for Medicaid patients to get Butrans and I told dr Butrans isnt covered on Medicare plans.dr said he'll try and think of 1 patient and see how patient responds to Butrans
PPLPMDL0020000001	Cleveland	OH	44106	3/3/2011	he'll try and think of 1 patient and see how patient responds to Butrans worked internal medicine residents-lunch with 17 doctors,worked internal medicine clinic-referred by Resident Coordinator(Barb) to see Terry,Nurse Manager,to talk with her about Butrans and give all info to her and nurses as they work with all Residents who are running out-patient clinic and there are a few attending physicians who are in the out-patient clinic supervising residents-goal is to set-up in-service with nurses,nurse practitioners and physician assistants in this out-patient clinic, worked family medicine-had to leave Butrans fpi,initiation guide and business card with secretaries for Dr.Leonard and Dr.Lane and Dr.Truax. worked rheumatology dept-saw Carmi,Dept manager,left 5 Butrans fpi's,initiation guides and business card for all 5 fellows.
PPLPMDL0020000001	Mogadore	OH	44260	3/3/2011	Introduced Butrans, reviewed FPI, indication, boxed warning, dosing and titration, and 5 core messages. HE said they are starting to shy away from too much pain management and refers but will treat alot of their older patients with OA or chronic back pain. HE said that this would be a good option for Darvocet, I clarified that Darvocet is indicated for mild pain and we are for moderate to severe pain. HE said he knows but the only other option is Vicodin. HE said this would definitely fit into his practice, he can think of some patients, but not sure about the insurance coverage. HE said he wanted more than one pack of savings cards because he said he will write it. We talked about Oxycontin and he said they are not writing it any more for no reason other than they want to get away from the more chronic pain patients.
PPLPMDL0020000001					

	Westlake	OH	44145	3/3/2011	Dr has not heard back from the Butrans patient he started so he hopes no news is good news, he should be seeing him back in the next week or so. He did get a response regarding putting Butrans on formulary. Dr told me that they have 2 concerns that need to be addressed at the next meeting which are 1. the fact that naloxone may not reverse overdose and what to do in that case. 2. the fact that there is a REMS program for Butrans and all nurses and Drs would need to be trained on it. Dr said he is going to come up with a response and still try to get it approved on formulary. He said he thinks maybe they could put a restriction for only pain mgmt Drs to be able to use it in the hospital. I let him know that I am available to do an in services with HCPs on the floors to reviewed the FPI and warnings for Butrans.
PPLPMDL0020000001	Cleveland Heights	OH	44118	3/3/2011	Spoke to Allan about the Butrans indication. I explained the positioning for those taking 3 or 4 tabs of vicodin. He said good luck. He said he will get it in when he gets a script. I reviewed the initiation and titration dosing. Gave FPI and titration guide.
PPLPMDL0020000001	Euclid	OH	44119	3/3/2011	Spoke to Lauren about the launch of Butrans. Confirmed that they were stocking both the 5 and 10mcg bnf Butrans. I explained the application and disposal process abd gave a titration guide and patient info guide. I explained that Dr. Karimpil has just expressed interest in prescribing.
PPLPMDL0020000001	Mogadore	OH	44260	3/3/2011	Introduced Butrans, reviewed FPI, indication, boxed warning, dosing and titration, 5 core messages. HE talked about how the practice is getting away from doing pain management that they have been burned too many times but did not get specific. HE then took the FPI and started fingering through it and was gaining more interest in it. HE asked about managed care and we reviewed that. He asked why this is a schedule 3 and not a schedule 2. I said I did not know that information because the scheduling is done by the FDA according to it potential for abuse. HE said he would think about it sometime. I asked for a specific patient and he couldnt think of anyone yet
PPLPMDL0020000001	Cleveland	OH	44106	3/3/2011	i talked to dr about Butrans fpi,initiation guide,patient information booklet and Butrans patient savings cards.dr said they only prescribe tramadol in out-patient clinic,for chronic pain,so he would think of Butrans for those patients if they are complaining of their current medication not working.i told dr that's perfect,start with 1 patient on tramadol,showed Butrans initiation/titration guide and asked him to think of commercially insured patients to use Butrans patient savings cards.dr said 70-80% of patients in out-patient clinic are Medicaid and the rest are Medicare patients.we discussed Medicaid coverage for Butrans. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44106	3/3/2011	i talked to dr about Butrans fpi,initiation guide,patient information booklet and Butrans patient savings cards.dr said they only prescribe tramadol in out-patient clinic,for chronic pain,so he would think of Butrans for those patients if they are complaining of their current medication not working.i told dr that's perfect,start with 1 patient on tramadol,showed Butrans initiation/titration guide and asked him to think of commercially insured patients to use Butrans patient savings cards.dr said 70-80% of patients in out-patient clinic are Medicaid and the rest are Medicare patients.we discussed Medicaid coverage for Butrans. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44106	3/3/2011	i talked to dr about Butrans fpi,initiation guide,patient information booklet and Butrans patient savings cards.dr said they only prescribe tramadol in out-patient clinic,for chronic pain,so he would think of Butrans for those patients if they are complaining of their current medication not working.i told dr that's perfect,start with 1 patient on tramadol,showed Butrans initiation/titration guide and asked him to think of commercially insured patients to use Butrans patient savings cards.dr said 70-80% of patients in out-patient clinic are Medicaid and the rest are Medicare patients.we discussed Medicaid coverage for Butrans. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44106	3/3/2011	i talked to dr about Butrans fpi,initiation guide,patient information booklet and Butrans patient savings cards.dr said they only prescribe tramadol in out-patient clinic,for chronic pain,so he would think of Butrans for those patients if they are complaining of their current medication not working.i told dr that's perfect,start with 1 patient on tramadol,showed Butrans initiation/titration guide and asked him to think of commercially insured patients to use Butrans patient savings cards.dr said 70-80% of patients in out-patient clinic are Medicaid and the rest are Medicare patients.we discussed Medicaid coverage for Butrans. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44106	3/3/2011	i talked to dr about Butrans fpi,initiation guide,patient information booklet and Butrans patient savings cards.dr said they only prescribe tramadol in out-patient clinic,for chronic pain,so he would think of Butrans for those patients if they are complaining of their current medication not working.i told dr that's perfect,start with 1 patient on tramadol,showed Butrans initiation/titration guide and asked him to think of commercially insured patients to use Butrans patient savings cards.dr said 70-80% of patients in out-patient clinic are Medicaid and the rest are Medicare patients.we discussed Medicaid coverage for Butrans. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	3/3/2011	i talked to dr about Butrans fpi,initiation guide,patient information booklet and Butrans patient savings cards.dr said she prescribes tramadol,q4,6h,for patients in the out-patient clinic,for chronic pain.dr said if patients complain of their current dose not workin and she's maxed them out,then she thinks Butrans might be a good option there.i showed dr Butrans initiation guide,looking at tramadol dosing section and asked dr to consider 1 patient that she believes could benefit from Butrans.dr said she likes once weekly dosing and that Butrans is an adhesive and not a pill.dr asked about Medicaid coverage for Butrans so we discussed that information.dr said majority of patients are Medicaid and Medicare in out-patient clinic. recommended Senokot-S
PPLPMDL0020000001	Mogadore	OH	44260	3/3/2011	Spoke with Jerry and reviewed Butrans FPI, indication, boxed warning, dosing and initiation and savings card program. HE said he didnt get Butrans in and will order when he gets a script. Discussed Oxycontin and he said alot of patients intially were looking for the OCs but have tapered down and things are normal again. Asked for SenS recommendation in opioid induced constipation
PPLPMDL0020000001	Cleveland	OH	44106	3/3/2011	i talked to dr about Butrans fpi,initiation guide,patient information booklet and Butrans patient savings cards.dr said she prescribes tramadol,q4,6h,for patients in the out-patient clinic,for chronic pain.dr said if patients complain of their current dose not workin and she's maxed them out,then she thinks Butrans might be a good option there.i showed dr Butrans initiation guide,looking at tramadol dosing section and asked dr to consider 1 patient that she believes could benefit from Butrans.dr said she likes once weekly dosing and that Butrans is an adhesive and not a pill.dr asked about Medicaid coverage for Butrans so we discussed that information.dr said majority of patients are Medicaid and Medicare in out-patient clinic. recommended Senokot-S
PPLPMDL0020000001	Euclid	OH	44119	3/3/2011	Discussed the Butrans 5 selling messages. Explained the patient positioning. He asked how many days the patch is good for. Explained the 7 day indication and how to apply and dispose of. He thinks Butrans is a good idea and that he would probably prescribe for opioid naive. He asked about the cost. I explained the coverage and savings cards. He asked about the abuse potential. I read the boxed warning and how Butrans is still a CIII opioid. He said he would try it. Reminded him of the patients for Oxycontin and ryzolt.
PPLPMDL0020000001	Cleveland	OH	44106	3/3/2011	i talked to dr about Butrans fpi,initiation guide,patient information booklet and Butrans patient savings cards.dr said she prescribes tramadol,q4,6h,for patients in the out-patient clinic,for chronic pain.dr said if patients complain of their current dose not workin and she's maxed them out,then she thinks Butrans might be a good option there.i showed dr Butrans initiation guide,looking at tramadol dosing section and asked dr to consider 1 patient that she believes could benefit from Butrans.dr said she likes once weekly dosing and that Butrans is an adhesive and not a pill.dr asked about Medicaid coverage for Butrans so we discussed that information.dr said majority of patients are Medicaid and Medicare in out-patient clinic. recommended Senokot-S
PPLPMDL0020000001	Solon	OH	44139	3/3/2011	We reviewed the MKT piece and discussed the unapproved info points regarding the % of duals and the co-pay amounts. He has sent that info to the actuary people but their computer model that provides that information is down which is why he hasn't recieved it back yet. He will go up to that Department after our appointment. We also discussed the recent article about the Caremark/UA merger which he said was the first step of three that has to be approved before the merger takes place. This step means the SEC has approved the merger allowing it to continue. Mike will check with Lora in pharmacy to see the results of the P&T review for Butrans. He believes it hasn't been reviewed just yet as we didn't launch until January. If it wasn't, it will be in either March or April. Check back with him to see. Finally, he said to check with Tony regarding the estimated payment information needed. He said Tony is currently the only person in Rebate Analytics as someone was just let go so he's busy.
PPLPMDL0020000001	Cleveland	OH	44106	3/3/2011	i talked to dr about Butrans fpi,initiation guide,patient information booklet and Butrans patient savings cards.dr said she prescribes tramadol,q4,6h,for patients in the out-patient clinic,for chronic pain.dr said if patients complain of their current dose not workin and she's maxed them out,then she thinks Butrans might be a good option there.i showed dr Butrans initiation guide,looking at tramadol dosing section and asked dr to consider 1 patient that she believes could benefit from Butrans.dr said she likes once weekly dosing and that Butrans is an adhesive and not a pill.dr asked about Medicaid coverage for Butrans so we discussed that information.dr said majority of patients are Medicaid and Medicare in out-patient clinic. recommended Senokot-S
PPLPMDL0020000001	Garfield Hts	OH	44125	3/3/2011	Reminded Dr Sadowski of our prior Butrans discussion. Also re-delivered 5 core messages. He asked if physicians needed a special license or had to be pain management specialists to prescribe Butrans & I told him no. He said to prescribe "the other forms" one must have a permit. I clarified that Butrans's only indication is for the management of moderate to severe chronic pain & does not have an indication for addiction treatment. Also went over dosing & he said it made more sense to him. Dr Sadowski said he doesn't write a lot of pain medication. I asked him if he has patients who take one to three Vicoden, tramadol, or Percocet per day and he said yes. I asked him to think of these patients & then asked if he felt that any of those patients may benefit from Butrans. He said he thinks that some may like having an option to treat their pain that is not an oral form. He asked about cost. Reviewed managed care coverage & savings cards. Spoke with Deena about Butrans & savings.
PPLPMDL0020000001	Warrensville Heights	OH	44122	3/3/2011	Spoke with Carol (nurse) & discussed Butrans 5 core messages. She said that she remembers Dr Shin being excited about it & writing his first prescription after my breakfast but she has not seen him prescribe it since. She said she did not know why but promised to remind him about it. We discussed importance of proper application & savings cards. She said she felt like Butrans was something they would use a lot in the pain management practice there. I gave her an initiation guide as a reminder for Dr Shin & asked her to call me with any questions. Also went over OxyContin savings cards.
PPLPMDL0020000001	Cleveland	OH	44106	3/3/2011	i talked to dr about Butrans fpi,initiation guide,patient information booklet and Butrans patient savings cards.dr said she prescribes tramadol,q4,6h,for patients in the out-patient clinic,for chronic pain.dr said if patients complain of their current dose not workin and she's maxed them out,then she thinks Butrans might be a good option there.i showed dr Butrans initiation guide,looking at tramadol dosing section and asked dr to consider 1 patient that she believes could benefit from Butrans.dr said she likes once weekly dosing and that Butrans is an adhesive and not a pill.dr asked about Medicaid coverage for Butrans so we discussed that information.dr said majority of patients are Medicaid and Medicare in out-patient clinic. recommended Senokot-S
PPLPMDL0020000001	Beachwood	OH	44122	3/3/2011	Dr Yokiel said that he has written 2-3 Butrans prescriptions but has not yet gotten feedback. He asked what Butrans looks like so I showed him a demo & asked his thoughts. He said he liked how thin & sticky the patch was & asked about adhesion problems. Discussed importance of proper application & told him about taping edges of Butrans with first aid tape, Bioclusive, or Tegaderm. He asked how Butrans is being abused "on the streets". I told him I know of no specifics, but that because Butrans is an opioid, it carries abuse & addiction potential just as other opioids do. He said he believes Butrans is a great idea & that he likes that it is once-a-week & a "different" medication & that he plans to continue to prescribe it. Discussed managed care/savings for Butrans & OxyContin. Spoke with Vickie about patient counseling & gave her patient information booklets which she appreciated.
PPLPMDL0020000001	Parma	OH	44129	3/4/2011	Spoke with Linda (pharmacist) & reminded her about our previous Butrans conversation. Reviewed indication, dosing, titration, & appropriate patient type/positioning. She said she does have the 5mcg stocked but has not seen any prescriptions yet. I asked who in the area, based on the positioning of Butrans, she feels may want to hear more about Butrans. She said that no one stood out in her mind. She said that she sees so many different doctors' names but no one consistently. I asked if they stock OxyContin & she said they do not have any & she said they had no use for the savings cards that I offered because of that. She said the Garfield Heights store is the one that stocks & dispenses OxyContin in the area.
PPLPMDL0020000001	Euclid	OH	44119	3/4/2011	Window call.... Asked doc if he has had any success with Butrans yet. He said not yet and that he has a lot of patients on medicaid. I asked him to try for patient with commercial insurance or BWC. Asked him to be sure to give a savings card.
PPLPMDL0020000001	Lakewood	OH	44107	3/4/2011	Quick follow up. I asked Dr where he sees himself prescribing Butrans and he said he didn't know yet. I reviewed low dose vicodin patients who meet the Butrans indication as a possible appropriate patient and he said he will try to find one patient to start.
PPLPMDL0020000001	Cleveland	OH	44135	3/4/2011	Dr is ortho and specializes in hand surgery. He asked about Butrans and we reviewed the indication and appropriate patients. He does not typically treat chronic pain but thought it was good to know.
PPLPMDL0020000001	Sagamore Hills	OH	44067	3/4/2011	Spoke with Dr Scanlon's nurse, Helen. She said Dr Scanlon has still not prescribed Butrans, but he has been on vacation this week. Reviewed indication, appropriate patients/positioning, managed care & savings cards. Helen said she would remind Dr Scanlon about Butrans as she feels he has many patients who may benefit from Butrans.
PPLPMDL0020000001	Beachwood	OH	44122	3/4/2011	Spoke with Jim (nurse) who said Dr Tabbaa had just left but that he did prescribe Butrans for a patient today. He said that it was for a patient with Medicare Part D, so he did the prior authorization & will let me know if the prescription went through. Reviewed appropriate patient type/positioning and managed care coverage. Jim said he expects Dr Tabbaa to prescribe a lot of Butrans due to his patient population. Also reviewed OxyContin managed care coverage & reviewed formulary grid with him as he does all prior authorizations for the office.

PPLPMDL0020000001	Cleveland	OH	44135	3/4/2011	Dr is a resident. We reviewed the Butrans FPI, initiation guide and medication guide. We reviewed appropriate patients for OxyContin and went over the conversion guide. We reviewed Ryzolt as a once a day option. Reminder to recommend Senokot S with opioid scripts.
PPLPMDL0020000001	Parma	OH	44134	3/4/2011	Spoke with Cheryl (technician) as Nate (pharmacist) was busy counseling some patients. Discussed OxyContin savings cards which Cheryl said they could definitely use. Also reviewed Butrans with her. She said she was not sure if they had it stocked. Reviewed indication, appropriate patients/positioning, & managed care. Cheryl said that she thought Butrans sounded like a great idea to have fewer people taking Vicodin or Percocet around-the-clock. She had no specific recommendations of physicians to call on or target. She said I should stop back another time to catch Nate.
PPLPMDL0020000001	Cleveland	OH	44195	3/4/2011	I asked dr if he started any patients on Butrans? dr said not yet because he has been working in the hospital for past 2weeks where he see's patients and rounds with Fellows and he gives iv buprenorphine to patients and majority of his patients are on 90-130mg oral morphine so they are not appropriate patients for Butrans.I asked dr if he ever see's patients within the 30-80mg oral morphine range where he could consider Butrans as an option? dr said yes he does and he will definitely consider Butrans for those patients.dr said the problem is that by the time patients get to him,they are so far down pain severity scale that they need high doses of morphine, above 80mg,so he thinks the anesthesia/pain management group should be starting patients on Butrans as they are treating non-malignant cancer pain patients and their patients would be more moderate pain than what he is seeing in Taussig Cancer Center. recommended Senokot-S
PPLPMDL0020000001	Parma	OH	44129	3/4/2011	Quick call with Jen- Reminded her of Butrans, indication, appropriate patients. She said that she just recently was assigned her prescribing & DEA numbers, so she can now prescribe medications. She said she would keep Butrans in mind.
PPLPMDL0020000001	Westlake	OH	44145	3/4/2011	We reviewed Butrans FPI, and initiation guide. He asked if this is being used in hospice yet, and thought it would be great for his elderly patients. Most of his patients are Med D patients but he does have some commercial insurance. We reviewed Butrans managed care and savings cards. He didn't know if there would be a big place in his practice for Butrans but would try it instead of increasing vicodin for an appropriate patient. Reminder about OxyContin as a Q12hr option and he said he does not trust any patients to have it, even with Oarrs and urine drug screening and all of the tools he has available. He said he would send them to pain management to make sure they look at all of the options of treatment. Reminder to recommend Senokot S with opioid scripts.
PPLPMDL0020000001	Westlake	OH	44145	3/4/2011	Dr said that he did try a patient on Butrans but insurance did not cover it. He wanted to convert her to Butrans from vicodin. He said that the cost was over \$100. Laura looked up her insurance and she said has Anthem. I reviewed Butrans managed care coverage and the savings cards.
PPLPMDL0020000001	Westlake	OH	44145	3/4/2011	Quick call as Dr had 8 patients waiting. I asked him where he sees himself prescribing Butrans and he said for new chronic pain patients. He said he hasn't seen a lot of chronic pain lately but he will see if he can find a place for Butrans. I asked him to try it on just one patient.
PPLPMDL0020000001	Cleveland	OH	44109	3/4/2011	I asked dr if he considered Butrans as an option for any patients? dr said no,not yet. I asked dr how Butrans benefited his patients? dr said the fact Butrans is a CII and he can call in re-fills thats easier for him but he hates the fact that he has to do a prior authorization for medical patients.i told dr i understand his frustrations with having to process a prior authorization but asked if he had 2 patients with commercial insurance or workers comp that are taking short-acting oxycodone,complaining of pain worsening and instead of dr re-filling short-acting oxycodone,would he be willing to try Butrans? dr said he'll try it in a few people and let me know what he hears from patients.I told dr i had lunch with him monday,march 7th and would follow-up with him then.dr said that was fine.
PPLPMDL0020000001	Cleveland	OH	44109	3/4/2011	I talked to dr about Butrans being an option for her patients when they are taking 1-2 tabs of hydrocodone or oxycodone and complaining of pain worsening,instead of her increasing the tablets per day.dr said it makes sense,she likes Butrans because its a long-acting opioid and a CII which is easy for her to call in re-fills,the only challenge with Butrans is that Medicaid doesnt cover Butrans and she has to get a prior authorization done.dr said she is willing to give Butrans a try in some patients and do the prior authorizations but its more work for her and her nurse so she hasnt really thought of Butrans lately. I showed dr Butrans initiation guide and asked her to think of 1 patient like we discussed with workers comp or commercial insurance as that'll be the easiest for her dr agreed and said she would think of this next time she see's patients on short-acting opioids. I
PPLPMDL0020000001	Lakewood	OH	44107	3/4/2011	We reviewed Butrans FPI and initiation guide. She thought this would be a great option in the nursing homes. We discussed managed care for Butrans, and that most Med D plans would be a Prior Auth, but she could give it a try. We discussed managed care for Butrans and that commercial insurance would be a S15 copay on average with no prior auths.
PPLPMDL0020000001	Fairlawn	OH	44333	3/4/2011	Asked Dr what type of patient he feels he would most likely use Butrans with. Dr said he isn't sure because he hasn't initiated therapy. I asked him to keep in mind patients who are taking low dose hydrocodone ATC.
PPLPMDL0020000001	Westlake	OH	44145	3/4/2011	Dr said he started 3 Butrans patients last week. I asked what benefit does he see for his patients and he said the benefit is that he is getting his patients off of taking pills all day. He said that he it makes him look good when he doesn't write so much short acting around the clock. He did have some insurance issues one they did a prior auth and another patient said the copay was \$60. They were not sure if the patient got the Butrans savings card but they were going to make sure she had one. The patient still paid for it and is having success with Butrans.
PPLPMDL0020000001	C	OH	44195	3/4/2011	I met dr at Pain Champions:Pain management education for nursing-He lectured on patient-controlled analgesia,epidural analgesia and peripheral nerve blocks-I told dr i was the purdue rep,we discussed Butrans initiation guide and OxyContin conversion guide,that was all the time i had with dr.dr said he works in pain management but travels and gives lectures so if i wanted to call his secretary and book an appointment i could.
PPLPMDL0020000001	Fairlawn	OH	44333	3/4/2011	Followed up with Dr. Weidman and asked if she has initiated Butrans therapy for the Medicaid patient we had discussed. She said she tried and has not heard back. I told her to focus on commercial/private insurances so she would have better success.
PPLPMDL0020000001	Akron	OH	44333	3/4/2011	Introduced Butrans and the FPI. Dr. Z said that he does not treat chronic pain and does not have many patients who would be Butrans candidates.
PPLPMDL0020000001	Akron	OH	44333	3/4/2011	Introduced Butrans and the FPI. Dr. Richter said that this would be a product he would most likely not use because he does not like to treat chronic pain. He says he was happy to learn about it but would not use it.<font color=blue><b>CHUDAKOB's query on 03/10/2011</b></font>I think this needs more developing. He sees a lot of fibromyalgia patients. Is he referring his whole patient base to pain management? Perhaps more specific questioning will bring out what he is really thinking.<font color=green><b>LAPMACA's response on 03/14/2011</b></font>Thanks! Will do on my next call<font color=blue><b>CHUDAKOB added notes on 03/15/2011</b></font>I will be interested to hear what he says.
PPLPMDL0020000001	Akron	OH	44308	3/4/2011	Presented Butrans to Julie, BH Case Manager. She was unfamiliar with it so reviewed full FPI. Provided her conversion/titration if her staff has questions regarding it. Also, discussed the upcoming webinar programs by Purdue in May and June. She'd like her group to participate on Tues June 6 and I will bring lunch & pain resource.
PPLPMDL0020000001	Cleveland	OH	44109	3/4/2011	worked oncology dept-left Butrans fpi,initiation guide and business card for Dr.Snell,Dr.O'Brien,Dr.Hergenroeder,Dr.Trey and Dr.Wagamon-with dept secretaries who said they have to give information to doctors and if doctors want to meet me for an appointment,they will call me to set it up. worked physical medicine and rehabilitation dept-see call notes on Dr.Harris and Dr.Huang; worked internal medicine dept-left information for Dr.Harrington,Dr.Falk-Ytter and Dr.Lindheim-Butrans fpi,initiation guide,business card and OxyContin fpi and conversion/titration guide for each doctor in this department
PPLPMDL0020000001	Cleveland	OH	44103	3/4/2011	I asked dr if she started anyone on Butrans yet and dr said no she has the information in front of her and Butrans patient savings cards but hasnt found the right patient.I asked dr who is the right patient,in her mind,to start on Butrans? dr said someone willing to take a patch and stop short-acting opioids.I showed dr Butrans initiation guide and Butrans FPI,noting initiating therapy section that she can start a patient on Butrans and still give short-acting opioid,dr said she keeps forgetting that and because this is a new molecule to her and new medication she will need me to continue reminding her.I asked dr to think of 1 patient,taking short-acting oxycodone thats complaining of pain worsening and instead of refilling medication,start patient on Butrans after appropriate tapering. dr agreed and said she will continue thinking of patients and talk to some next week. we discussed
PPLPMDL0020000001	Cleveland	OH	44195	3/4/2011	medicaid and commercial plan coverage for Butrans.recommended Senokot-S I asked Janet,Pharmacy Manager,if any Butrans scripts have come through? Janet said no,she is waiting for their 1st Butrans script.I told Janet about the physicians i am working with at the clinic and discussions im having about who the appropriate Butrans patient is and Janet said the Oncologists may not be able to start a lot of patients as so many of their patients are above 80mg oral morphine so she said if she comes across any doctors writing hydrocodone or oxycodone that are between 15-40mg she will recommend Butrans to those doctors.I gave Janet the medical education resource catalog for her and Brittany,Pharmacy technician and she appreciated this as she said they are trying to get updated on their CME's.I recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44195	3/4/2011	attended Pain Champion-Pain Management Education for Nursing-was invited as only pharma rep allowed to attend this lecture series-listened to Dr.Davis,Oncologist,speak on "Opioid Short Strategy" and met Dr.Ritchey and Dr.Gretter who gave lectures on chronic pain and patient-controlled analgesia.had appointment with dr.davis as well in taussig cancer center
PPLPMDL0020000001	Westlake	OH	44145	3/4/2011	Dr said he thinks that Butrans would be a good option to help cut down on the vicodin, especially in his younger patients. He said his typical dose of vicodin is 7.5 and he will not give more than 5 pills per day. We discussed the initiation guide and how to start a Butrans patient based on what they are already taking. He said he will try to think of someone to try Butrans on. I reminded him about OxyContin as an option when Butrans may not provide adequate analgesia. I asked him to recommend Senokot S with opioid scripts.
PPLPMDL0020000001	Rocky River	OH	44116	3/4/2011	Spoke with Stan, I asked what benefits he sees in Butrans for his patients. He said it would be great to cut down of the amount of vicodin and the number of tablets that are being dispensed. We discussed Butrans medication guide and potential for abuse. Reminder about OxyContin as an option when patients may not get adequate analgesia from Butrans and asked to recommend Senokot S with opioids.
PPLPMDL0020000001	Independence	OH	44131	3/4/2011	Quick call with Roman at the window- He said he has not prescribed Butrans yet & has not thought a lot about it. He said that he probably will not until he is able to attend a program and speak to specialists about it. Delivered OxyContin savings card reminder as well as recommendation of Senokot-S for opioid-induced constipation.
PPLPMDL0020000001	Munroe Falls	OH	44262	3/4/2011	Introduced Butrans and the FPI. Dr. did not provide much feedback other than that she had a lot of patients on low dose hydrocodone.<font color=blue><b>CHUDAKOB's query on 03/10/2011</b></font>What type of questions did you ask her to gain feedback?<font color=green><b>LAPMACA's response on 03/14/2011</b></font>I asked if she had patients on low dose hydrocodone and she said she had a lot. This was a quick call, Dr gave me little time.<font color=blue><b>CHUDAKOB added notes on 03/15/2011</b></font>That's unusual. Next time will hopefully be better.
PPLPMDL0020000001	Cleveland	OH	44135	3/4/2011	Krista is new NP with Dr Ryan's group. We reviewed Butrans FPI, initiation guide and medication guide. She had seen the information and thought it looked interesting. She asked about adhesion of the patch and we reviewed the info per the FPI. She asked about abuse potential and I discussed that this is a CII opioid with potential for abuse. She said he had a patient on OxyContin who's copay went way up and she's had to switch some patients because they can't afford it any longer. I reviewed the managed care for OxyContin and the savings cards to see if we can help the patients copay. I reviewed what Ryzolt is. Reminder to recommend Senokot S with Dr Pai said he had written two Butrans prescriptions. He asked me to remind him of the managed care details. Discussed commercial coverage & savings cards for commercially insured & cash-pay patients. Reminded him that patients with any type of government insurance could not use the savings cards & let him know about prior authorization on Medicare & Medicaid plans. He said one of the patients he had prescribed Butrans for had a Medicare Part D plan. The patient had been taking about 6 tramadol per day & had requested "something different" to control her pain. I asked if Dr Pai had tapered her & he said that he did not. He said he considered it, but that because she did not always take as many as 6, he did not & that he started her on the 5mg dose. He said that he realizes why the taper is recommended, but did not feel in her case it was necessary. He said he would let me know what the results were & what the patient says about it. OxyContin managed care review & formulary grid.
PPLPMDL0020000001	Westlake	OH	44145	3/4/2011	I asked what type of patient she sees herself prescribing Butrans for. She said she has a patient who is on the lowest dose of duragesic and also on percocet who is not tolerating the duragesic very well. She would like to try her on Butrans but the patient is Medicaid. We discussed managed care and the step edit for Medicaid. She may still try to convert the patient. I asked if she could think of any other patients who could benefit from Butrans every 7 days, she said she will think about it. We reviewed OxyContin as a Q12hr option when Butrans may not provide adequate analgesia. Reminder to recommend Senokot S with opioids.
PPLPMDL0020000001	Parma	OH	44129	3/4/2011	Spoke with Dawn who said that Laura found a patient to start on Butrans, but unfortunately the patient had CareSource for insurance & was unable to get Butrans due to lack of coverage on that plan. Dawn said that even though it didn't end up being a "win" for Laura to write Butrans, it shows that she does see a place for it in her practice. Dawn said she will help me remind Laura of other places she can consider it. Reviewed managed care coverage on commercial plans & discussed BWC plan. Dawn said that many worker's comp patients come to them already on Vicodin for a couple of weeks & once they are on that, it is difficult to make the patient change. I suggested to Dawn that they not allow the patients to control them that much & discussed patient counseling & "selling" the idea of a long-acting medication, if appropriate, to patients. Dawn said that was a good point.



PPLPMDL0020000001	Mayfield Heights	OH	44124	3/4/2011	Reminded doc of his previous interest in Butrans. I reviewed the selling messages and asked where he would use Butrans. He said maybe for a vicodin patient. Asked him to try a patient on 5mcg if they are taking 15mg of less. Gave him an initiation guide.
PPLPMDL0020000001	Parma	OH	44129	3/7/2011	Quick call with Kevin (pharmacist). Presented patient information booklets & discussed Butrans patient counseling and adhesion/application. Als gave new OxyContin savings cards & reminded Kevin they can be used only for cash pay or commercially insured patients, not patients with any type of government insurance, including Medicaid & Medicare.
PPLPMDL0020000001	Lakewood	OH	44107	3/7/2011	I asked Dr if he was able to start the patient on Butrans that we discussed last time. He said he has not seen the patient yet. He said Butrans is in the back of his mind, I asked what can I do to bring it the front. He said that he just needs to see the appropriate patient. I asked what the right patient is, he said a patient who has chronic pain and is on lower dose opioids. I asked him to try just one patient this week.
PPLPMDL0020000001	Parma	OH	44129	3/7/2011	Spoke with Debbie (MA)- Butrans indication, appropriate patient/positioning, & managed care/savings reminder with delivered. Debbie said Dr Chagin has prescribed Butrans yet. She agreed that he has many patients who fit the indication & she said she thought Butrans sounded like something patients would like. She said Dr Chagin would not be able to see me today, so I scheduled the next available appointment.
PPLPMDL0020000001	Cleveland	OH	44109	3/7/2011	I asked dr if he started any patients on Butrans? dr said not yet,but he asked me to discuss the appropriate patients with him again as he couldnt remember.i showed dr Butrans initiation guide and asked him if he would try Butrans in an opioid naive or experienced patient? dr said he's thinking of patients currently taking opioids,Vicodin or Percocet.dr wont give more than 4tabs a day,60-90tabs a month.dr said he is getting very strict and stubborn with his patients recently because patients are supposed to take 1 short-acting opioid a day and they are taking 4 a day and calling in for re-fills by day 21.dr said he's refusing to refill patients medication,starts questioning if patients are really in pain and taking medication appropriately.dr said Butrans is a great option as a baseline maintenance for patients with maybe small amounts of short-acting opioid available for break-through pain.dr said the Butrans patch,with once weekly dosing and being a CIII so he can call in re-fills
PPLPMDL0020000001	Lakewood	OH	44107	3/7/2011	Quick call, I asked where do you see yourself prescribing Butrans? He said probably for a patient who is taking vicodin around the clock. I showed the initiation guide and asked him to start just one appropriate patient on Butrans this week. He will try.
PPLPMDL0020000001	Lakewood	OH	44107	3/7/2011	Spoke with Audwa, she has not seen any scripts yet in Lakewood, but did dispense it at another store in Medina. We reviewed the medication guide for Butrans and how to instruct the patient on proper use and application. She agreed to help counsel the patients to make sure they know how to use Butrans. They did not have it in stock at this store, but she said she would order the starting doses. We discussed appropriate patients for OxyContin and as an option when Butrans may not provide adequate analgesia. Reminder about Ryzolt as a once a day option and asked her to recommend Senokot S.
PPLPMDL0020000001	Parma	OH	44129	3/7/2011	Quick call with Dr Taylor to follow-up on Butrans. She said she has not had enough time in the office seeing patients since our initial discussion, but that she is keeping Butrans in mind. Indication & appropriate patients/positioning reminder.
PPLPMDL0020000001	Parma	OH	44134	3/7/2011	Spoke with Stephanie (?), pharmacist & reviewed Butrans indication, dosing, appropriate patients/positioning. She said she has not ordered Butrans yet & has not seen any prescriptions so she does not plan to order it before she gets one. Encouraged her to order now so it will be available right away for that patient, but she said they did not deviate on that policy. Discussed OxyContin savings cards & reminded her they can be used only for commercially insured or cash-pay patients, not for those with any type of government insurance, including Medicare & Medicaid.
PPLPMDL0020000001	Parma	OH	44129	3/7/2011	Dr Ortega said he was "not sure yet" about Butrans. He said again that he has only one patient on the Duragesic patch & a "handful" on the Lidoderm patch or other patches. I asked Dr Ortega to think of Butrans not as a replacement for other patches, but rather as an alternate option for patients who are on NSAID's or Cox-2's & not getting relief, or who are already taking 1-3 Vicoden per day. Also showed initiation guide pg 6 to reinforce positioning, which he said he understood better now. He asked if Butrans is less addictive than Vicoden. I told him we do not have studies or data regarding that & reminded him that Butrans is CIII & can be abused like other opioids. Discussed managed care coverage/savings cards for appropriate patients. I asked if he could think of any patients who he felt could benefit from Butrans. First he said he did not know-then he paused & said that he could see how some patients may prefer a once-a-week option, OxyContin reminder for patients beyond Butrans
PPLPMDL0020000001	Lakewood	OH	44107	3/7/2011	Dr did not seem to understand why he should choose Butrans instead of Duragesic. I asked Dr what type of patient would he usually prescribe Duragesic for, he said for a patient with chronic pain like someone with cancer. We discussed the dosing and initiation guide for Butrans and that patients who need more than 80mg of oral morphine equivalent many not get adequate analgesia from Butrans. I asked what type of patients does he see himself prescribing Butrans for, and he said probably the same type of patient he would think of Duragesic or OxyContin because Butrans is a long acting. He said he does not maintain many chronic pain patients, but he would give this a try in a few patients and try to see where it fits in. We discussed OxyContin as Q12hr option and that an appropriate patient for Butrans may also be appropriate for OxyContin depending on the total daily dose of opioid. We discussed managed care and the Butrans savings program.
PPLPMDL0020000001	Parma	OH	44129	3/7/2011	Introduced Butrans to Dr Tolentino, delivering 5 core messages & alerting her to box warning. Explained appropriate patient type/positioning for Butrans & asked Dr Tolentino if she had commercially insured patients who fit the indication. She said she did- I asked what a once-a-week option to control their pain would mean for them & she said "convenience". Dr Tolentino said she is trying to stay away from prescribing any controlled substances. I agreed that she should be cautious in prescribing any opioids, including Butrans, as they do carry abuse/addiction potential. She asked about managed care, so I explained commercial coverage & savings cards for commercially insured & cash-pay patients. Also reminded her that savings cards cannot be used for patients with Medicaid, Medicare, or any other government insurance. Dr Tolentino said she would try Butrans on some of her chronic pain patients who she trusts. Recommended Senokot-S for opioid-induced constipation.
PPLPMDL0020000001	Akron	OH	44333	3/7/2011	Asked Dr. Ahmad what type of patient he was looking for in an effort to get him to think of Butrans therapy when he sees a specific patient. He told me both opioid naive and low dose hydrocodone.
PPLPMDL0020000001	akron	OH	44333	3/7/2011	Followed up on our last conversation. I asked if had initiated Butrans therapy and he said he was still looking for a patient. I spoke with Gretchen, who is the office manager and asked if she could identify 3 patients who are currently on low dose hydrocodone with commercial insurance. I then asked if she would put a patient education guide in their charts and she agreed.
PPLPMDL0020000001	Cleveland	OH	44109	3/7/2011	i talked to Ray,Pharmacist,about Butrans stocking and he said they havent ordered Butrans yet and wont until they see 1 script come through for Butrans.i told Ray that the goal of stocking Butrans was to make it easier for patients,so that no patients are told to come back in 24 hours.Ray said he understood but he still felt that patients can wait 24hrs and come back to get Butrans.i left Butrans initiation guide and asked Ray to re-consider his decision on ordering if he felt this was an appropriate medication for patients. Ray said he likes that Butrans is once weekly dosing and a patch,but he still wants to see 1st script come through pharmacy,then he'll order Butrans.i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	3/7/2011	i talked to Naser,Pharmacist,about Butrans stocking and Naser said they had Butrans in stock but no scripts yet.i told Naser the hospitals i work with and some physicians at MetroHealth Medical center that i work with and do lunches with to discuss Butrans.Naser said most of the short-acting opioids,Vicodin,Percocet and tramadol come from Physical Medicine and Rehabilitation,Pain management,some scripts from internal medicine and family medicine.i asked Naser if he would be willing to recommend Butrans,when talking to doctors about patients on short-acting opioids but maybe still complaining of pain worsening on short-acting? Naser said he could do that with a few doctors as he has a good relationship with some and could recommend Butrans.i recommended Senokot-S
PPLPMDL0020000001	Lakewood	OH	44107	3/7/2011	Introduction to Dr. I reviewed the key messages for Butrans. He will take a look at the information. He said he does see some chronic pain and it looks like an interesting option. I reviewed Butrans patient info with Robin his MA/office mgr.
PPLPMDL0020000001	Fairlawn	OH	44333	3/7/2011	Spoke with the pharmacist to see if there has been any movement with Butrans. She said it has been slow. I explained that I had only been out talking about this product for a short period of time and encouraged her to retain what they had stocked and she agreed.
PPLPMDL0020000001	Lakewood	OH	44107	3/7/2011	Spoke with Meagan, They were auto shipped 2 cartons of each strength of Butrans. She told me it was taking up an entire shelf and she was not happy about it. I let her know that Drs in the area have started prescribing Butrans and it will be moving. We reviewed the medication guide and I gave her extras. I asked for her help in instructing the patient on how to use Butrans. Reminder that we are still discussing OxyContin with prescribes for patients where Butrans may not provide adequate analgesia. Reminder about Ryzolt as a once a day option and asked her to recommend Senokot S with opioids.
PPLPMDL0020000001	C. Falls	OH	44223	3/7/2011	Spoke with pharmacist, Larry. He told me that Dr. Narouze et. al. are slow writers and they see minimal scripts on a day to day basis. He told me that they do a lot of procedures instead of meds. Larry said he would not order any Butrans unless a prescription was written. Discussed Butrans and FPI.
PPLPMDL0020000001	Lakewood	OH	44107	3/7/2011	Quick call at window, Dr asked about managed care for Butrans. We discussed commercial insurance and BWC coverage. He said this might be a good option for some of his BWC patients.
PPLPMDL0020000001	Fairlawn	OH	44333	3/7/2011	I finally had the opportunity to sit down and discuss Butrans with Dr. Oyakawa. He told me that he had a high percentage of patients on low dose hydrocodone and would absolutely try Butrans on a handful of those patients who are commercially insured.
PPLPMDL0020000001	Akron	OH	44333	3/7/2011	Introduced myself and company. Told him what products I carried and he asked me to leave the information behind and left.
PPLPMDL0020000001	Lakewood	OH	44107	3/7/2011	Quick call at window, I asked her how do you see Butrans benefiting your patient? She said it is once a week application and it would probably be good in the nursing homes. I asked her to try it just one patient this week.
PPLPMDL0020000001	Lakewood	OH	44107	3/7/2011	I asked what type of patient she is thinking for Butrans. She said she has a couple of BWC patients in mind. She did not know what they were currently taking, but they have chronic pain and are new to pain management, her guess is they will come in on some type of short acting. She was suppose to see one of these patients, but they canceled. She will try Butrans for them when they come in.
PPLPMDL0020000001	Lakewood	OH	44107	3/7/2011	I asked Dr if he will be seeing any chronic pain patients who might be appropriate for Butrans. He said was seeing one right now and he would try Butrans. The patient has hip pain and is not being controlled on 3 5mg vicodin. Dr wrote 5mcg Butrans for the patient and decided to give percocet as supplemental analgesia. I gave the patient information book and savings card to Pat to give to the patient. She told me he has medical mutual and medco. We discussed titrating the patient after 3 days until analgesic efficacy. I asked Pat about the fibromyalgia patient they told me about last call. They have not seen this patient back yet, but Pat made a note to try Butrans for that patient.
PPLPMDL0020000001	Cleveland	OH	44109	3/7/2011	worked physical medicine&rehabilitation dept-11:30am-2:30pm-see call notes on physicians;2:30-5pm worked orthopedics,surgery,internal medicine,family medicine and oncology-had to leave Butrans fpi's,initiation/titration guides and my business cards for each doctor in every department and medical secretaries said they'll talk to doctors and see if i can get an appointment
PPLPMDL0020000001	Cleveland	OH	44109	3/7/2011	dr asked me how many patients complained in our clinical trials of Butrans falling off? i told dr i wasnt aware of any patients experiencing Butrans transdermal system falling off,in clinical trials and showed dr Butrans fpi,section 14,clinical studies section.i told dr patients can put first aid tape around edges of Butrans or a dressing like Tegaderm or Bioclusive and showed dr Butrans patient information section at end of Butrans fpi.i asked dr if that was his biggest concern with Butrans? dr said yes,he hasnt started any patients on Butrans yet but wondered about that.I asked dr if he see's patients that meet Butrans indication and are taking 1-2 tabs of Vicodin or Percocet? dr said yes,he has a lot of those patients,so i asked dr to think of 1 patient like that who is complaining of pain worsening and wanting something else,to try Butrans there.dr agreed-we discussed insurance coverage for Butrans and i recommended Senokot-S
PPLPMDL0020000001	Parma	OH	44129	3/7/2011	Dr Gigliotti said he has not prescribed Butrans yet but "Is poised to do so". I asked him what type of patient he was thinking of using it for that he has not seen yet. He said he was looking for someone who has been on Vicoden for "awhile". I reminded him that Butrans can be used for patients who are currently on opioids as well as those who have never been on an opioid before. I also reminded him that he has shared with me that he does not like to have patients on around-the-clock oral pain medication. He said this is true. I asked him, if he would then think of Butrans before he initiated treatment with Vicoden so that he is giving the patient Butrans instead of starting them on that short-acting around-the-clock oral pain medication regimen that he has told me so many times that he does not like. He agreed to do this. Also reviewed managed care of OxyContin with formulary grid & discussed savings cards which I gave to Jazz. Recommended Senokot-S for opioid-induced constipation.<font color=blue><b>CHUDAKOB's query on 03/17/2011</b></font>Why does he not like to have patients on around the clock oral pain medications?<font color=green><b>APSEGAS's response on 03/18/2011</b></font>I believe in the past he has said that by doing that, patients get "addicted" to taking their medication. However, I will make sure to ask him to clarify by asking him that question on my next visit with him.<font color=blue><b>CHUDAKOB added notes on 03/18/2011</b></font>Ok. Thanks. That answer seems to lead to a lot of other answered questions such as what does he mean by addicted and if that is the case, why does he prescribe opioids at all. Just some thoughts

PPLPMDL0020000001	Lakewood	OH	44107	3/7/2011	I asked Dr what type of patients does he see himself prescribing Butrans for and he said pretty much any type of moderate chronic pain. He said he is thinking of switching a patient who is on duragesic to Butrans to see if she does better. She is on a 50mcg Duragesic and we discussed how to initiate a patient currently on opioids per the FPI and initiation guide. We discussed that patients on 80mg of oral morphine equivalent may not get adequate analgesia from Butrans. He said he would start some patients on Butrans and thinks it will be a good option for some patients. We reviewed OxyContin as an option when Butrans may not provide adequate analgesia. Reminder about Ryzolt as a once a day option and asked him and Laura to recommend Senokot 5.
PPLPMDL0020000001	Cleveland	OH	44109	3/7/2011	I asked dr how Butrans benefits her patients? dr said she hasnt started anyone on Butrans yet to be able to answer that question and see real world results.i asked dr,clinically speaking,what benefits did she think Butrans provided her patients,without prescribing yet? dr said Butrans being a CIII and her being able to call in re-fills makes it much easier for her and thats really the biggest benefit in her eyes.i asked dr how often she hear's from patients complaining that their current short-acting opioid isnt working and they request something else? dr said she only hears that once every other week as most of her patients are stable on their short-acting opioids and not requesting a medication change.i told dr if patients are doing well,thats great,but if she has 1 patient complain of their current short-acting,would she consider Butrans? dr said yes she would consider Butrans,its just taking her longer to start patients on the medication.we discussed insurance coverage for Butrans
PPLPMDL0020000001	Cleveland	OH	44109	3/7/2011	i talked to dr about Butrans fpi,initiation guide,patient information booklet and Butrans patient savings cards. dr said she doesnt write a lot of narcotics and only treats a few patients for chronic pain.dr said she likes that Butrans is a once weekly dose in a patch.dr asked about insurance coverage so we discussed workers comp,medicaid and commercial plan patients getting coverage for butrans.i asked dr if she had 1 patient who met Butrans indication,who has complained of current short-acting opioids regimen not working and requesting something different? dr said yes she has patients like that.i asked dr to consider 1 patient like that,with commercial insurance to use Butrans patient savings card.dr agreed and i recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44109	3/7/2011	i talked to dr about Butrans fpi,initiation guide,Butrans patient information booklet/dvd and Butrans patient savings cards.i asked dr what benefits she saw in Butrans for her patients? dr said once weekly dosing and in a patch form were the 2 benefits she saw and Butrans being a CIII was easier for her so that she can call in re-fills.i asked if dr would consider an opioid naive or experienced patient to try butrans in? dr said someone currently taking opioids,maybe 1-2 tabs of 5mg oxycodone or hydrocodone.i showed dr Butrans initiation guide,opioid experienced section,asked if she could consider that 1 patient like that who is complaining of current short-acting opioid not working and requesting something else? dr agreed. we discussed insurance coverage for Butrans and i recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44109	3/7/2011	i talked to dr about Butrans fpi,initiation guide,Butrans patient savings cards and Patient information booklet/dvd.dr said he has chronic pain patients that are taking short-acting opioids but doesnt hear a lot of complaints,if anything patients are always asking for re-fills or specific medication brand names and he's trying to wean people off opioids.i asked dr what benefits he see's in Butrans for his patients? dr said he likes that this is transdermal,a patch worn once a week and he likes that Butrans is a CIII so he can call in re-fills.dr said there are studies out now showing that patients on opioids long-term dont have better pain control being on the opioids versus the patients that were taken off the opioids and asking them how their pain is.dr said basically both groups still claimed to have a pain level of 5-10,so he doesnt always believe the opioids work for patients.i asked if dr had 1 patient on Vicodin or Percocet,showing Butrans initiation guide opioid experienced
PPLPMDL0020000001	Akron	OH	44333	3/7/2011	Followed up with Dr. Shah about the initiation of Butrans therapy for his first patient. While a script did show up in the dashboard, Dr. Shah said he had not yet initiated therapy and said that he wanted to hear someone speak on the product so he could learn more about it.
PPLPMDL0020000001	Cleveland	OH	44109	3/7/2011	i talked to dr about Butrans fpi,5 core messages.Patient information booklet,Butrans patient savings cards and Butrans REMS program.dr said he treats mainly acute pain patients but does have some chronic pain patients and doesnt like to prescribe narcotics.dr said he has a few patients on a couple Vicodin or Percocet daily but thats it,otherwise he's trying to wean patients off narcotics and try alternative options like acupuncture,physical therapy,blocks,injections,instead of around the clock opioids.i asked dr how Butrans benefits his patients? dr said the fact Butrans is a CIII,that makes it easier on him so he can call in re-fills and he likes that its a patch worn once a week as thats easier for some patients than taking pills around the clock.i showed dr Butrans initiation guide and asked if he had 1 patient he could try Butran on,thats taking 1-2 tabs of Vicodin or Percocet and still complaining of pain worsening? dr said yes he does have a few of those patients and he would try
PPLPMDL0020000001	Fairlawn	OH	44333	3/7/2011	Dr. Weidman has already initiated Butrans therapy to an elderly Medicare patient. She told me the patient paid \$40 and she has not yet heard back. She says she is likely to continue to use this therapy on some of her elderly patients because it is long acting. I also discussed the abuse potential that is associated with Butrans.<font color=blue>b</b>CHUDAKOB's query on 03/18/2011<b></b><font>Katie. This is a better next call objective. It follows up on what you discussed and attempts to move the whole process forward. Your getting there.<font color=green>b</b>LAPMACA's response on 03/21/2011<b></b><font>Thanks!<font color=blue>b</b>CHUDAKOB added notes on 03/21/2011<b></b><font>You're Welcome!
PPLPMDL0020000001	Parma	OH	44129	3/8/2011	Spoke with Bethany to follow-up on Butrans discussion. She said she has not yet dispensed any but does have 5mcg & 10mcg in stock (2 boxes of each). Discussed appropriate patients/positioning. Also presented patient information booklets which she said would be useful in patient counseling. She said she had recently had a question regarding converting someone from "one narcotic" (she could not remember which one) to Butrans but she said she did not know the conversion. Showed initiation guide page 6 & discussed recommended starting doses including taper. Also made sure she knew that it is not an equianalgesic table or a "conversion" guide, but just a recommended starting guide. Discussed titration ability every 3 days. Also reviewed OxyContin savings cards for appropriate patients.
PPLPMDL0020000001	Twinsburg	OH	44087	3/8/2011	Spoke with Carolyn (MA) as Dr Leonard called in sick this morning & was unable to attend our scheduled breakfast. Reviewed Butrans indication, appropriate patient types/positioning, and dosing. She said she would remind Dr Leonard of Butrans upon her return and said she thought it would be something that Dr Leonard would use in her practice. Also reviewed OxyContin savings cards for appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44130	3/8/2011	Spoke with Marki, Melissa (MA's) & Anne Marie (office manager) who said Dr Panigutti was too busy to speak with me today. Discussed Butrans indication, seven days buprenorphine delivery in one application, CIII, and appropriate patients/positioning. They said that they no longer do lunches & that because of how busy the practice is it is "hit & miss" on getting any time with Dr Panigutti. Asked if they would like new OxyContin savings cards but they said that they do not have any patients at all who take it (although data suggests otherwise.)
PPLPMDL0020000001	Twinsburg	OH	44087	3/8/2011	Introduced Butrans to Dr Friedman, delivering 5 core messages & alerting her to boxed warning. I asked if she treats chronic pain & she said that she is starting to see more and more, including patients with osteoarthritis. She asked if it was similar to Duragesic. I explained that we have no comparative data & showed initiation guide page 6, pointing out that patients on fentanyl were excluded from our studies. I also showed the table and discussed appropriate starting doses for different patient types based on current therapy. She said she liked that Butrans is once-a-week & CIII & said that when she does see a patient who fits the indication, she will think of Butrans. Also discussed OxyContin as an option for appropriate patients who are beyond Butrans 20mcg/hr & presented savings cards.
PPLPMDL0020000001	Cleveland	OH	44130	3/8/2011	Introduced Butrans to Dr Fedorko, delivering 5 core messages & alerting him to black box warning. Discussed proper application, site rotation, heat warning, and appropriate patients. Also presented initiation guide & went over positioning of Butrans. Dr Fedorko agreed that prescribing Butrans for appropriate patients before prescribing Vicoden made sense. He said this would help prevent patients from psychologically "needing" to take a pill every few hours to relieve pain & he said he liked that it is a once-per-week application. He asked about managed care coverage, so I reviewed with him, Mindy, Mary Ellen, & Maryann commercial coverage. Also discussed prior authorization for Medicare & Medicaid. Presented savings cards & reminded them they could only be used for patients with commercial insurance or cash-pay, not any type of government coverage.Dr Fedorko said he has a patient with BWC with spinal stenosis for whom he may try Butrans. Also reminded them of Ryzolt & value cards.
PPLPMDL0020000001	Bedford Heights	OH	44146	3/8/2011	Spoke with Susan (office manager/appointment scheduler) to follow up on information I had left for her & Dr Hochman. Discussed with her Butrans indication, dosing, seven days buprenorphine delivery in one application, CIII, adverse events, & boxed warning. Susan said that she thought that Dr Hochman had had a question about Butrans but could not remember what it was. Also spent some time going over appropriate patients/positioning. She said she would speak to Dr Hochman & try to get an appointment for me to speak with him directly about Butrans as she felt it is something their patients could really benefit from. She asked me to call her on Thursday to set up a firm day & time for the meeting.
PPLPMDL0020000001	Cleveland	OH	44114	3/8/2011	i talked to dr about appropriate patients for Butrans and dr said he just feels since this is a new medication it'll take him a little longer to start as he's always nervous prescribing a new product.i told dr about our 1st talk about Butrans,where dr was excited that this was a transdermal delivery system and once weekly dosing and that he had patients in mind who were taking vicodin and percocet and not controlled so he thought Butrans could be an option.i asked dr what happened to those patients and why hasnt he really prescribed this medication? dr asked what are the side effects of Butrans again? i showed dr Butrans fpi,AE section and we discussed them.i asked dr knowing the side effect profile of Butrans,do you have 1 patient currently taking a short-acting opioid that complains to you or staff that pain is worsening and requesting a medication change? dr said yes,i told dr thats the Butrans patient.we discussed OxyContin after patients are above Butrans 20mcg/hr or above 80mg
PPLPMDL0020000001	Parma	OH	44129	3/8/2011	Dr Roheny told me has not yet seen "the right" patient for Butrans. I asked him if he has written any new Vicoden prescriptions lately & he said that he writes several of them every week. I told him that those were potential Butrans patients. He then told me Butrans was too expensive, so I discussed managed care coverage, focusing on commercially insured patients & also reviewed savings cards for commercial insurance/cash pay patients. He agreed that a \$15 co-pay was very reasonable. Reminded him of seven days of buprenorphine delivery in one application & CIII/boxed warning. He said he didn't realize it was a once-a-week patch. He asked what the doses were so I showed back cover of initiation guide. I asked him if he would choose one commercially insured patient for whom he was ready to start on Vicoden to prescribe Butrans 5mcg for instead & he agreed to do this. Also reminder for OxyContin for appropriate patients beyond Butrans 20mcg/hr.
PPLPMDL0020000001	Cleveland	OH	44130	3/8/2011	Quick call with Sue. She said they do not have Butrans in stock & will start stocking it once they start to see prescriptions. She said they are just too small of a pharmacy to keep products in stock that they have yet to see prescriptions for. Indication & seven days buprenorphine delivery in one application reminders. Also gave new OxyContin savings cards for appropriate patients & reminded her they can be used only for commercially insured or cash-pay patients, not any type of government insurance.
PPLPMDL0020000001	Cleveland	OH	44114	3/8/2011	i talked to John,PA,about appropriate patients for Butrans and who John thought could benefit from Butrans.John said any of their patients taking short-acting opioids like Vicodin or Percocet,around the clock and still complaining of pain worsening or if they are calling into office sooner than they should for refills,thats a sign to him that patients may need a long-acting opioid.i asked if John could continue thinking of those patients that could start on Butrans 5mcg or 10mcg and showed Butrans initiation guide for appropriate patient selection and tapering information.John agreed to do so as he see's patients,chooses medications,writes scripts and Dr.Marshall or Dr.Katz signs scripts. i recommended Senokot-5
PPLPMDL0020000001	Bedford	OH	44146	3/8/2011	Only got a quick call in from Ebony. She said she has still not seen any Butrans activity- reviewed appropriate patient type/positioning. Offered OxyContin savings cards but she said they do not stock it at this location for safety reasons. She said she only has one customer on OxyContin.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/8/2011	Introduced Butrans and FPI. Dr. Ali was committed to starting Butrans therapy and identified several patients by name through out the course of our lunch meeting. He had patients who were both opioid naive and experienced. He admitted the biggest challenge would be managed care since they see many state plans.
PPLPMDL0020000001	Cleveland	OH	44124	3/8/2011	Quick call.... discussed the Butrans indication and the positioning. Also explained the 7 delivery delivery of buprenorphine. He asked me to leave literature. Left same. Discussed the enw oxycontin savings cards and new expiration date.
PPLPMDL0020000001	Cleveland	OH	44195	3/8/2011	i talked to Steve,Assistant Pharmacy Manager,about Butrans stocking and he said that he knows they have Butrans in stock as Curt,Pharmacy Manager ordered Butrans.Steve said he hasnt seen any scripts yet but thinks Butrans once weekly dosing and transdermal delivery are two benefits to patients.i asked if Steve would recommend Butrans if a patient was on a short-acting opioid and complaining of pain worsening and requesting a medication change? Steve said they will recommend medications occasionally to physicians,depending on the relationships with physicians and they do provide medication therapy management so he will keep Butrans in mind as an option for some patients.i recommended Senokot-5
PPLPMDL0020000001	Westlake	OH	44145	3/8/2011	Spoke with Angela and Danielle, MAs. Dr is out for the week for CE classes. They said they are reminding the Dr about Butrans and will continue to make a note for patients they think might be appropriate for Butrans. Angela did make a note for one patient, but they have not seen him. He is BWC and they are wondering if he went to another Dr. They said that the Dr will take their recommendations if they remind him about a new medication.

PPLPMDL0020000001	Cleveland	OH	44195	3/8/2011	worked Neurology dept-had to leave business card,Butrans fpi,initiation guide and patient information booklet for Dr.Kriegler,Dr.Mays,Dr.Stillman and Dr.Spears; Worked Center for Spine dept-left same information as above for Dr.Capulong and Dr.Zachary;worked tausig cancer center-left same information for Dr.Gutgsell,Dr.Pennell,Dr.Budd
	Cleveland	OH	44195	3/8/2011	worked pain management and physical medicine and rehabilitation dept-left information:Butrans fpi,initiation guide,patient information booklet,OxyContin fpi,OxyContin conversion guide,business card for each doctor in Pain management-dr.mekhal,dr.katyal,dr.vrooman,dr.cheng,dr.shin-all of them are at Pain Management symposium/conference in Florida until tomorrow;had to leave the same information for PM&R doctors:dr.hou,dr.reddy,dr.jedlicka and dr.schaeffer.
PPLPMDL0020000001	Lyndhurst	OH	44124	3/8/2011	Spoke with Erin Chlanda, pharmacist, about the indication/patient type for Butrans. She confirmed that she had received a script a few weeks ago. She could not recall the prescriber but the doc had written the script wrong (once a day vs. once weekly). She was able to call the office and have it corrected. No other scripts since then. I gave her an FPI and initiation guide and discussed the application and disposal process.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/8/2011	Talked to the pharmacist and told her about my lunch with the Pain Clinic. I mentioned that it went well and the doctors had several patients in mind and wanted to begin Butrans therapy. She said she would see if she could order a few of each strength.
	Cleveland	OH	44114	3/8/2011	I talked to Laura,Pharmacist,about what exactly she would tell patients about Butrans when they come to fill their scripts.Laura said she would give patients the Butrans patient information booklet,focusing on application of Butrans,sites where patients can apply Butrans and rotating Butrans every week and of course that this is a once weekly dosing.I asked Laura to remind patients of Butrans log book in back of Butrans patient information booklet,so that patients remember what time,location of Butrans application and then when they remove next week the patients know to apply Butrans to another site.Laura said that makes sense as thats important and she'll do that once she see's some Butrans scripts come through. I recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44114	3/8/2011	I talked to Dave,Pharmacist,about Butrans stocking and he said once he see's a Butrans script he will order.we discussed importance of having Butrans in stock so patients dont have to wait 24hrs but dave said thats his policy with new medications,so I told Dave I would follow-up beginning of April as there are physicians in area,Dr.Katz,Dr.Shen that are prescribing Butrans.we discussed Butrans initiation guide and who's appropriate for Butrans,gave Dave Butrans initiation guide and we discussed Butrans patient savings cards.
PPLPMDL0020000001	Cleveland	OH	44114	3/8/2011	I talked to dr about patients she feels could benefit from Butrans,like the 1 patient she started on Butrans.dr said she likes that Butrans is transdermal delivery,a continuous baseline of buprenorphine and not all the up and down she see's with short-acting opioids.dr said she doesnt like percocet and doesnt really prescribe much,so when she has patients on Vicodin and they complain that their pain isnt controlled and are requesting something else,she's not happy to start them on percocet.dr said she likes that Butrans is an option now for her patients that are taking 3-4 Vicodin and she can give Butrans with some Vicodin for break through pain.dr said she will go to OxyContin as a long-acting opioid as she thinks it works and is a good option for some patients.we discussed 7 tablet strengths of OxyContin,insurance coverage and OxyContin patient savings cards.I asked dr to consider 2 new Butrans patients and 2 new OxyContin patients,based on our discussion.dr agreed.recommended
PPLPMDL0020000001	Westlake	OH	44145	3/8/2011	Quick call while talking with Juan his MA, Dr has not prescribed Butrans yet, but they do think it is good option for chronic pain patients before going to other long acting like OxyContin or Duragesic. Dr is leaving for Egypt and will be gone March 10th-29th. We discussed the Butrans savings cards and managed care.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/8/2011	Introduced Butrans and the FPI. Got through just the indication before Dr. Narouze left the lunch room.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/8/2011	Introduced Butrans and FPI. Dr. Nemeth committed to starting at least 1 patient by the end of the week on Butrans therapy. He identified an elderly patient who is currently not compliant and not taking their current meds
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/8/2011	Went back in to follow up with Larry after my lunch at the Pain Clinic. I mentioned that the doctors had identified several patients and were enthusiastic to get started.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/8/2011	Introduced Butrans and the FPI. Dr. Sable told me that most of his patients are already on opioids so he would be converting most patients. He was pleased to hear patients could still take break through medication while on Butrans. He committed to trying it on a commercially insured patient.
PPLPMDL0020000001	Highland Heights	OH	44143	3/8/2011	Window call....Reviewed the patient positioning of Butrans with doc. Asked what feedback he has gotten. He said he has been trying it and have not had complaints since the last time. I reminded him that BWC and commercial patients will have the best chance for success.
PPLPMDL0020000001	Cleveland	OH	44103	3/8/2011	I talked to Joe,owner of Shelia drug,about Butrans stocking and he said that yes he had Butrans in stock but hasnt seen any scripts come through.I gave Joe a Butrans fpi,initiation guide and Butrans patient information booklet.we discussed insurance coverage for Butrans when patients have Medicaid,workers comp and commercial plan coverage.
PPLPMDL0020000001	Independence	OH	44131	3/8/2011	Quick call with Dr Sundaram. He said he is still looking for the right patient for Butrans. He said he has not seen anyone for pain. I asked him what he typically prescribes for a patient who needs more than NSAID's or COX-2's to control their pain & he said Percocet or Tylenol with Codeine. I told him those are potential Butrans patients & asked him if he would prescribe Butrans if the patient was appropriate. He said that he will do so. He said he does want to prescribe it & has no reservations, but that he has only seen patients with acute pain (ie tooth ache) recently so he has not been able to use Butrans. I agreed that that would not be a Butrans patient. He assured me that he is thinking of Butrans & will write it as soon as he sees that patient. Gave him Senokot-S samples & recommended for medication-induced constipation. He asked how it is different from Senokot, so I discussed dual MOA & ingredients. He said he never realized that before & thanked me.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	3/8/2011	Quick window call. Mentioned Butrans once a week and the indication. Left behind the initiation and titration guide and did a total office calls on the girls so they could answer questions if Dr. Azem had them.
PPLPMDL0020000001	Akron	OH	44310	3/8/2011	Spoke with Char about initiating Butrans therapy for low dose hydrocodone patients. As I was discussing the initiation and titration guide with her Dr. Cremer mentioned that most of the patients they treat are past the point of Butrans. Mentioned that for those patients OxyContin would be an option for patients requiring ATC analgesia.
PPLPMDL0020000001	Lyndhurst	OH	44124	3/8/2011	Spoke with doc about the Butrans 5 selling messages. He immediately started talking about the statics on drug abuse in Ohio and in this country. I discussed the positioning for opioid naive patients or those on low dose hydrocodone. He said he does not prescribe for more than 60 tabs/mo. I explained that Butrans can be written instead of starting patients on vicodin. He insisted hee does not treat chronic pain. I asked if he has any/one patient that could benefit from a once weely application of Butrans instead of starting or titrating on vicodin. He did say he could think of a particular patient. I asked him to try for just one patient. I discussed the 5mcg starting dose and that based on his limits that is where he would likely start any of his patients. I gave him an initiation guide to remind him. Also reminded him of the oxycontin positioning after Butrans.
PPLPMDL0020000001	South Euclid	OH	44121	3/8/2011	Spoke to Janet and other tech about the selling messages of Butrans. She asked what it compares to. I explained there is no other exact comparison. Told her it can be considered in place of vicodin. She confirmed that they just got a script yesterday and believes it was a BWC patient and thinks Yokiel was the prescriber. I reviewed the application and disposal process and the savings cards.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	3/8/2011	Dr. Cyndi continues to "forget" to write Butrans. She has identified many low dose hydrocodone patients and committed to writing this time for those patients.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	3/8/2011	Spoke with Dr. Roseanne about initiating Butrans therapy in place of hydrocodone. She mentioned she liked the concept but had gotten to write. She also said that she had patients that would be ideal for this product but it was just a matter of remembering to write.
PPLPMDL0020000001	Westlake	OH	44145	3/8/2011	I asked Dr if he could think of any other patients for Butrans other than the one construction worker. He said the problem is that most patients he sees with chronic pain are already on higher doses opioids and many are on OxyContin. I asked if he has patients taking 3 5mg vicodin per day. He does but said some of them are not chronic. I asked him to think of Butrans for the couple patients who are chronic pain and taking low dose vicodin.
PPLPMDL0020000001	Lyndhurst	OH	44124	3/8/2011	Quick call.....I discussed the butrans selling messages and where to position - for opioid naive (NSAIDS, APAP) or low dose hydrocodone. I discussed the 5mcg/hr starting dose. She asked about cost and coverage. I explained the commercial coverage and PA required for medicare/medicaid. Nothing learned.
PPLPMDL0020000001	Mayfield Hts	OH	44124	3/8/2011	Spoke to doc about the Butrans 5 selling messages. he asked if its covered on BWC. Confirmed that it was being covered. He thought it was a daily patch. I confirmed that its a once weekly patch. He asked how it compares to duragesic. I explained there is no head to head data, Butrans can be prescribed for opioid naive patients and is a 7 day system. He said he would prescribe for opioid naive patients. I reviewed the savings card program and the commercial coverage. Reminded him of the oxycontin patient type and formulary grid.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/8/2011	Spoke with pharmacist. I let him know that I had spoken with the Pain Clinic across the street and they sounded enthusiast about Butrans. I told him to consider ordering additional strengths since it sounded like most patients from the Pain Clinic would need to be started on the 10 mcg.
PPLPMDL0020000001	Munroe Falls	OH	44262	3/8/2011	Spoke with Dr. Kolacewski about the most ideal patients to initiate Butrans therapy when I asked of the types of patients she was thinking about she mentioned both opioid naive and low dose hydrocodone/percocet patients. I asked if I could come back at the same time next week and she said yes and that this would give her a chance to try it.
PPLPMDL0020000001	Cleveland	OH	44124	3/8/2011	Introduced doc to the Purdue portfolio - Oxycontin, ryzolt, and Butrans indications/patient types. She said she does not treat chronic pain. I asked her if she prescribes hydrocodone. She said rarely. I asked if she has patients taking NSAIDs daily. No answer. I explained the indication and positioning of Butrans. Asked he if she sees a place for a long acting CII. She said she leaves the pain drugs to pain management because abuse and addiction is such a problem. No commitment.
PPLPMDL0020000001	Independence	OH	44131	3/9/2011	Spoke briefly with Regina (pharmacist) who said she still was not going to stock Butrans until she sees a prescription. Reviewed indication & appropriate patients/positioning. Offered OxyContin savings cards, which she accepted. Reminded her they are for patients without insurance or those with commercial insurance plans & cannot be used for patients with any type of government insurance.
PPLPMDL0020000001	Brooklyn	OH	44144	3/9/2011	Dr Detwiler stopped for a quick call before going to a patient room. He said he has not yet prescribed Butrans. I asked him if, for one appropriate patient, he would write Butrans for a patient for whom he would normally prescribe Vicoden around-the-clock for a chronic condition. I reminded him that commercially insured patients who use a savings card (pointed to his stock of them in the sample closet), will pay around \$15 for a month. He said he would keep it in mind & ducked into the patient room.
PPLPMDL0020000001	Maple Heights	OH	44137	3/9/2011	Quick call with Kim to follow up on Butrans discussion. She said she recently did receive a prescription for Butrans but it was for a patient with Medicaid, so they are waiting to find out if the prior authorization will go through. I asked who wrote the prescription & Kim said it was Dr Lin from the Cleveland Clinic. Discussed positioning and appropriate patient type.
PPLPMDL0020000001	Cleveland	OH	44106	3/9/2011	I talked to dr about appropriate patients to start on Butrans,showed Butrans initiation guide,dr said he did have 1 patient in mind but Medicaid wouldnt approve Prior Authorization because patient hadnt tried 2 long-acting opioids.so I asked dr if he had a workers comp or commercial plan patient,to consider starting on Butrans?dr said yes,so we talked about insurance coverage for these plans. I talked to Juan,medical assistant,about Butrans initiation guide,patient information booklet/dvd and Butrans patient savings cards. dr is leaving for Egypt tomorrow and gone 4 two weeks so I asked dr to consider patients this afternoon to start on Butrans and get some clinical experience with the medication.dr agreed. I recommended Senokot-S for opioid induced constipation.
PPLPMDL0020000001	Brooklyn	OH	44144	3/9/2011	Dr Miguel asked if Butrans was "OxyContin in a patch". I told him it was not & then reviewed 5 core messages. He asked what type of patients he could prescribe it for. Discussed appropriate patients & positioning. Asked Dr Miguel if he would prescribe Butrans for a patient for whom he would normally prescribe Vicoden around-the-clock for a chronic condition. He said he liked this idea and now remembers that he really wanted to try Butrans on a patient. He said he liked the idea of possibly avoiding putting patients on Vicoden or Percocet.
PPLPMDL0020000001	Cleveland	OH	44104	3/9/2011	I talked to dr about appropriate patients for Butrans as dr started 1 patient on Butrans,showed initiation guide and asked dr to continue finding patients to start on Butrans,dr agreed and we discussed insurance coverage. I recommended Senokot-S
PPLPMDL0020000001	Independence	OH	44131	3/9/2011	Dr Jack apologized for still not writing Butrans. I asked him if it was reasonable enough for me to ask him to simply choose one of his appropriate patients to start on Butrans for whom he would normally start....(he finished my sentence by saying, "I know, instead of what I usually write.") I clarified by adding, "for a patient who you would normally start on Vicoden or Percocet around-the-clock for a chronic condition." He said he needs to do this & just has a habit of automatically going straight to Vicoden or Percocet. I told him I understand & that I am asking for only one of those patients. He said he does like the idea of getting someone on Butrans before Vicoden or Percocet so that they don't get into the mindset that they "need" a pill every few hours to help their pain. Also spoke with Maria & reminder her of savings cards for commercial insurance or cash-pay patients.

	Cleveland	OH	44106	3/9/2011	i talked to dr about Butrans fpi,initiation guide,patient information booklet and Butrans patient savings cards.dr said he is a fellow and when he finishes this year he'll probably be moving back to the Washington D.C.area but he thinks Butrans once weekly dosing and transdermal delivery are 2 benefits to patients.i showed dr Butrans initiation guide and we talked about patients he feels could benefit from Butrans and i asked dr to consider 1 or 2 patients to get started on Butrans and get some clinical experience.dr agreed and said he would try Butrans and see what patients say about the medication.i recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44106	3/9/2011	i talked to Steve,Pharmacy Manager,about Butrans stocking and he said they did have Butrans in stock.we discussed a few physicians prescribing Butrans and importance of stocking Butrans,Steve agreed and said he did order Butrans and they had it in stock.we talked about doctors at the clinic prescribing a lot of hydrocodone and oxycodone combos's and who i should talk to about Butrans.
PPLPMDL0020000001	Cleveland	OH	44103	3/9/2011	i talked to Dave,Pharmacy Manager,about Butrans stocking and importance of stocking Butrans so patients can get medication and not have to wait 24hrs.Dave didnt have a lot of time to talk but said he hasnt seen any scripts yet for butrans.i explained to Dave what i am telling my physicians about Butrans,showing Butrans initiation guide and discussed Butrans patient savings cards.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/9/2011	Introduced Butrans and FPI. Dr has many patients on low dose hydrocodone who have been taking it for 6 plus months. I asked if he would consider converting those patients to Butrans and explained that it was a long acting opioid and he agreed.
PPLPMDL0020000001	Fairlawn	OH	44333	3/9/2011	I have continued to work with Dr. Domdera to identify a specific patient. Although he seems to like the idea of Butrans and seems to understand where to initiate therapy he has still been hesitant to write his first
PPLPMDL0020000001	Cleveland	OH	44103	3/9/2011	i talked to dr about patients who are appropriate for Butrans,showed initiation guide and patient information booklet.dr said he has a few patients in mind that are taking short-acting opioids around the clock and pain isnt controlled,i told dr that was perfect and could he think of 2 patients to start on Butrans? dr said yes,so i told him to let me know how patients respond to Butrans and i would see him next week.i recommended Senokot-5
PPLPMDL0020000001	Fairlawn	OH	44333	3/9/2011	Spoke with pharmacist who gave me a brief moment to review Butrans. Since she was clearly rushed I just went over the indication and once a week dosing. I left some info and said I would stop back in 2 weeks.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/9/2011	Reintroduced Butrans and tried to focus on a more specific type of patient. I asked about his hydrocodone patients and he told me most patients are on lower doses. When I said those were the exact types of patients that can benefit from Butrans it seemed to resignate.
PPLPMDL0020000001	Copley	OH	44321	3/9/2011	Dr. Machado said he does not feel comfortable prescribing Butrans because he does not like buprenorphine. He said he will continue to prescribe OxyContin.
PPLPMDL0020000001	Maple Heights	OH	44137	3/9/2011	Spoke with Andy to follow up on Butrans. He said that he has not seen any prescriptions at this location but has recently seen one at the location at Clark & Fulton. He said they are awaiting approval from managed care (he said he thought it was a Medicare Part D plan). Discussed patient counsel & went over patient information booklets. He said he will keep an eye out for more prescription activity and will keep me posted. He mentioned Dr Moufawad again & I let him know I am working with him.
PPLPMDL0020000001	Independence	OH	44131	3/9/2011	Quick call with Dr Rob- he said he has not prescribed Butrans. I asked how many new prescriptions for Vicoden or Percocet he writes for chronic conditions. He said many. I asked him if he would instead prescribe Butrans for one of those patients this week. Reminded him of seven days buprenorphine delivery in one application. He said he would keep it in mind & walked into a patient room.
	Cleveland	OH	44106	3/9/2011	i talked to dr about patients he's started on Butrans recently.dr said he started 1 patient on Butrans that was taking a couple Percocet a day but not as he prescribed and patients pain wasnt controlled so dr thought Butrans would be a good option.another patient he wanted to start on Butrans couldnt get approval through medicaid because patient hadnt tried 2 long-acting opioids first,so that was denied.i asked dr how Butrans was a benefit to his patients? dr said he likes that Butrans is a patch and that is better in his eyes than pills around the clock,for chronic pain patients.i asked dr if Butrans being a CII medication was important? dr said no,he didnt care about patients like the one's he has started recently.dr agreed.i recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44106	3/9/2011	worked pain management dept-see call notes on Dr Ali(fellow).Dr. Sahgal,Dr. Khalil and found out 3 other fellows who i need to add to phoenix and be sure to give all of the Butrans information to them.i found out Dr.Baig,Physical medicine&rehabilitation, is in Hanna House and his medical secretary is Jennifer(same woman who takes care of Dr.Sahgal's schedule)worked pharmacy-in-patient-see call note there.
PPLPMDL0020000001	Cleveland	OH	44106	3/9/2011	i talked to Cheryl Woods,Narcotics Buyer,about Butrans and the medication management committee decision if Butrans will be approved for formulary in the hospital at university hospitals.Cheryl said she missed the meeting this morning but Wes,Clinical Pharmacist,did attend and would know if it was approved or not.i told Cheryl i had lunch with Pain Management today and that Dr.Sahgal has already started a couple patients on Butrans.Cheryl was surprised but said she thinks its a great option for patients with chronic pain and said instead of these patients taking short-acting opioids around the clock and complaining of pain worsening,she thinks Butrans could be used there. Cheryl told me to call Wes and ask about P&T/Medication Management committee decision on Butrans.i gave Cheryl certified medical education catalog and showed pharmacy section that she might find valuable.Cheryl liked that there were a lot of courses to choose from in the catalog.
PPLPMDL0020000001	Westlake	OH	44145	3/9/2011	I gave the Dr the Butrans REMS folder and some extra REMS for him to take to the upcoming formulary meeting. He said he will probably just put a restriction for pain management only to be able to prescribe Butrans in the hospital. He said he has gotten good feedback from both patients on Butrans and he will continue to prescribe. The patient is on 10mcg and was on 75mcg of duragesic before. He will probably titrate this patient to 15mcg of Butrans and then 20mcg if need be. I let him know that it is off label for a patient to wear 2 patches, he said he would prefer to titrate more slowly.
PPLPMDL0020000001	Euclid	OH	44119	3/9/2011	Discussed the 5 selling messages of Butrans. Explained how to initiate and titrate. She was concerned about the coverage - medicare/medicaid. I explained the PA requirement. Also discussed the commercial coverage and savings card program. She stated that govt funded patients would be the more ideal candidates for Butrans.
PPLPMDL0020000001	Bedford	OH	44146	3/9/2011	Met with John Solomon (interim pharmacy manager) & Andy Bragalone (permanent pharmacy manager) to discuss Butrans. Reviewed 5 core messages & black box warning. Andy said he was familiar with buprenorphine in injectable form. John & Andy explained that their formulary is dependent on UH Main Campus's formulary. They said it is "virtually impossible" to get a product on formulary at Bedford if it is not on formulary at Main Campus. They also said that UH's main formulary is largely based on the opinions of Case Western Reserve University physicians & if those physicians recommend a medication, it is likely to get on formulary. I asked how frequently they review medications & he Andy said they review them regularly, approximately once a month. Also reviewed OxyContin hospital unit dosing availability for all seven tablet strengths, including intermediate doses. Andy said they have some doses at the hospital & will likely not add other strengths due to limited space.
PPLPMDL0020000001	Cleveland	OH	44121	3/9/2011	Window call.....reminded doc of the Butrans patient type and 5 selling messages. Asked him to give a savings card with each script. Nothing learned. Oxycontin reminder.
PPLPMDL0020000001	Parma	OH	44134	3/9/2011	Dr Hernandez said he hasn't found the right patient for Butrans yet but that because he's so familiar & fond of the molecule, he really is looking forward to starting someone on it. I asked him specifically the kind of patient he's looking for & he said someone who doesn't like to take oral medication for pain or someone who is not happy with their medication. I asked him if he ever starts a new patient on Vicoden (ie patients who are taking high doses of NSAID's or COX-2's) for a chronic condition & he said yes. I told him those are potential Butrans patients. I asked him his thoughts on starting those patients on Butrans instead of Vicoden. He said he felt this was a good idea so patients didn't get into the mindset that they "need" to take a pill every few hours to control their pain. Discussed managed care, including BWC as well as savings cards for commercially insured patients or cash-pay. Reviewed OxyContin FPI 2.2 & let him know Butrans & OxyContin shouldn't be used together
PPLPMDL0020000001	Bedford	OH	44146	3/9/2011	Dr Moufawad said that he has started 5-6 patients on Butrans during the last two weeks. He said they have been BWC patients & that he is pleased to see that he has not gotten any call-backs with regard to coverage or cost. He said he has not heard feedback from the patients yet about how effective it has been at pain control, but he said he would continue prescribing Butrans in the mean time. He asked how to treat breakthrough pain if they have it so i reviewed FPI 2.4 & told him that in our studies patients were given ibuprofen or acetaminophen for breakthrough. I asked what patient types he has given Butrans to so far & he said patients taking 3-4 Vicoden per day. Reminded him of taper for patients on 30-80mg equivalent morphine per day. I asked him if he would also consider Butrans for patients not yet on an opioid who have chronic conditions causing pain (ie patients taking high doses of NSAID/COX-2 & not getting enough analgesia). He said he would consider this at the 5mcg dose
PPLPMDL0020000001	Euclid	OH	44119	3/9/2011	Discussed the 5 Butrans selling messages. Doc said he would more likely use Butrans for opioid naive or low dose short acting because he would not want to taper patients down. He asked about the abuse potential. I explained that it still has the risks and warnings similar to other opioids. He thinks it would be good for the elderly population. I reviewed the coverage and the savings cards. He asked about the reformulation of oxycodone and if it is now tamper proof. I explained the purpose of the reformulation but there is no evidence of such. Reminded him of the ryzolt indication and patient type.
PPLPMDL0020000001	Shaker Heights	OH	44122	3/9/2011	Spoke with Stephanie (MA) as Dr Zivic was unable to see me today. Introduced Butrans, indication, dosing, seven days buprenorphine delivery in one application, CII. She asked how it compares to fentanyl- I told her we have no comparative data & let her know that patients on fentanyl were excluded from our studies & asked her to think of the more "moderate" side of the scale considering the dosage strengths of Butrans available. She asked me to schedule a lunch to discuss details with Dr Zivic, so i scheduled next available appointment. She said she felt Butrans sounded like something that Dr Zivic would be able to use in his practice for a variety of types of patients as well as in nursing homes because he sees so many patients with chronic pain issues. Discussed managed care & reviewed savings cards for patients with commercial insurance or cash-pay & reminded her they could not be used for Medicaid or Medicare patients.
PPLPMDL0020000001	Solon	OH	44139	3/10/2011	Spoke with Dr Zaidi's nurse, Julie who said that Dr Zaidi has not prescribed Butrans yet as far as she knows. She said that he would not be able to see me today because they are having a busier-than-usual day & are short-staffed. Reminded Julie of managed care & savings cards for Butrans and reviewed appropriate patient type/positioning, indication, & dosing. She asked me to stop back next Tuesday to try to catch Dr Zaidi.
PPLPMDL0020000001	Akron	OH	44333	3/10/2011	Quick window call. Asked Dr Fouad who initiated Butrans therapy to and he said he had not tried it before walking away.
PPLPMDL0020000001	Cleveland	OH	44113	3/10/2011	i talked to dr about appropriate patients for Butrans and after discussing where Butrans fits into doctors practice,dr said he really doesnt have many patients who have NEVER tried an opioid and are only taking a NSAID or COX-II inhibitor so he wants to start majority of his patients that are taking opioids on Butrans.dr said he would much rather prescribe Butrans than re-fill patients Vicodin or Percocet.dr said he likes that this is a transdermal delivery medication and dosed once a week is a benefit to his patients instead of pills around the clock.dr asked about BWC,workers compensation,coverage as he couldnt remember if Butrans was easily getting covered.i told dr Butrans is going through on workers comp.dr asked about commercial plan patients coverage for Butrans so we discussed Butrans patient savings cards again and dr said he liked the patient savings card, thought it was easy for patients and would start a few patients on Butrans.i told dr he has option of OxyContin when
PPLPMDL0020000001	Cleveland	OH	44113	3/10/2011	i talked to dr about appropriate patients he would consider to start on Butrans as dr said he hadnt tried Butrans yet.i asked how Butrans could benefit doctors patients? dr said once weekly dosing and transdermal delivery are two benefits he sees instead of pills around the clock.i asked dr if he had a commercial plan patient thats come to him complaining of pain worsening,while taking short-acting opioid,and requesting a medication change? dr said yes.i told dr thats the Butrans patient and asked him to just try Butrans in 1 patient,dr agreed.we discussed Butrans patient savings cards and i recommended Senokot-5
PPLPMDL0020000001	Parma	OH	44129	3/10/2011	Spoke with Sheila (MA) & reminded her of Butrans. Reviewed indication, dosing, appropriate patient/positioning. She said she doesn't think Dr Kushnar has prescribed Butrans yet. She said she does think that Dr Kushnar has patients who meet the indication. I scheduled a lunch & left my card & an initiation guide for Dr Kushnar.
PPLPMDL0020000001	Cleveland	OH	44113	3/10/2011	worked orthopedic dept-dr bohl and dr berkowitz-see call notes on both of them. worked pain management/physical medicine&rehabilitation dept-saw Dr.Shen and Dale Novak-PA - see call notes
PPLPMDL0020000001	Beachwood	OH	44122	3/10/2011	Spoke with Alan who told me they are now stocking 2 boxes of both the 5mcg & 10mcg strengths of Butrans. He said he has dispensed approximately 5 prescriptions so far. I asked if he has heard anything from any of the patients but he said he has not yet. I asked if he could tell me who wrote the prescriptions, but he said that their system does not allow them to see the doctor who wrote the prescription & that is all done through main campus. He said that it was "local" physicians. I asked if he meant just in that building or in the outside area as well but he did not really clarify. He said he would let me know if he hears feedback or finds anything out about Butrans activity.OxyContin savings card reminder.
PPLPMDL0020000001	Solon	OH	44139	3/10/2011	Spoke briefly with Nate who said they do not have Butrans stocked & will not order it until a prescription comes through. Reviewed indication, positioning, & dosing & encouraged him to order now so that they have it available when a customer comes in with a prescription. Presented new OxyContin savings cards & reminded him they could not be used for any type of government insurance.
PPLPMDL0020000001	Cleveland	OH	44102	3/10/2011	i talked to Brian,Pharmacy Technician and Vince,Pharmacist,about Butrans stocking and Vince said he was waiting for 1st Butrans script to come through pharmacy.we discussed importance of having medication in stock so patients werent in pain and waiting for 24 hours,Vince agreed and said he'll consider that point.we talked about hydrocodone and oxycodone writers in area and discussed Butrans initiation guide and who's appropriate and not appropriate for Butrans.i recommended Senokot-5
PPLPMDL0020000001					

PPLPMDL0020000001	Berea	OH	44017	3/10/2011	Spoke with Adam, he has not seen any Butrans scripts, we discussed the medication guide and how to instruct the patients on proper use and application. We reviewed OxyContin as an option when Butrans may not provide adequate analgesia. Reminder about Ryzolt as a once a day option and asked him to recommend Senokot S with opioids.
PPLPMDL0020000001	Copley	OH	44321	3/10/2011	Quick call through window. Asked Dr. Heim if he has had the opportunity to read over the Butrans info that I had left. He said he looked it over and I was able to quickly go over the indication nd once a week dosing.
PPLPMDL0020000001	Berea	OH	44017	3/10/2011	I asked Dr what type of patient does he see himself prescribing Butrans for and he said he didn't know but he will keep it in mind and then went into a patient room.
	Cleveland	OH	44113	3/10/2011	I talked to dr about patients he has in mind to start on Butrans and dr said he's thinking of patients taking short-acting hydrocodone, 4tabs a day and instead of increasing their pills per day,he wants to try Butrans there as a baseline but he hasn't seen anyone like that this week.I asked dr if 1 patient called today,or he see's today,and asks for a different medication,would he consider Butrans? dr said yes so I told dr i would follow-up next week and see how that discussion went with 1 patient. I recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	3/10/2011	I talked to dale,PA,about patients he feels are appropriate to start on Butrans.patients who are currently taking opioids,a couple vicodin or percocet a day and complaining of pain worsening,we looked at Butrans initiation guide and I asked Dale to continue thinking of patients to start on Butrans. we discussed insurance coverage too.I recommended Senokot-S
PPLPMDL0020000001	Westlake	OH	44145	3/10/2011	Quick call, I asked where he sees Butrans fitting into his practice. He said he did not know yet, but agreed again to try Butrans. I asked what type of patient he thinks he will try it in, he said before going to other long acting like duragesic.
PPLPMDL0020000001	Barberton	OH	44203	3/10/2011	Spoke with Dr. Patel over lunch and really had the opportunity to discuss specific patient types. Dr. Patel said he sees at least 20 patients a month who are on low dose hydrocodone. He said he would start converting some of those patients.
PPLPMDL0020000001	Beachwood	OH	44122	3/10/2011	Spoke with Shelly who had called to ask me if a carton of Butrans could be split as Dr Segal wrote a "2 patch" prescription for a patient to try Butrans. She had said that in her system she got a message stating that they are "unbreakable packages" & she wanted to know if that was something set forth by Purdue or Rite Aid. I let her know that it was not a policy of Purdue, so it must be a Rite Aid system add-on. She said she will try to override it or may call the doctor back to see if he would mind changing the Rx to a full carton. She said she would let me know if she was able to override it so that I can pass the information along to other Rite Aid pharmacists if it comes up again.
PPLPMDL0020000001	Akron	OH	44320	3/10/2011	Spoke with pharmacist to see if there have been any Butrans requests. He said he has not heard anything and was going to try and get the 5's ordered.
PPLPMDL0020000001	Cleveland	OH	44113	3/10/2011	I talked to dr about the couple patients she started on Butrans and asked dr to continue thinking of Butrans for her patients currently taking opioids that are complaining of pain worsening and requesting a different medication, dr said thats where she thinks its the easiest to try Butrans and said she's continuing to think of patients for Butrans.I showed Butrans initiation guide, patient information booklet with DVD and we discussed formulary coverage for workers comp and commercial plan patients using Butrans patient savings cards.I recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	3/10/2011	I asked dr if he started any patients on Butrans yet? dr said he has a few patients in mind for Butrans but he couldnt remember the insurance coverage for Butrans,so we discussed BWC,workers comp insurance,dr took Butrans initiation guide,we looked at opioid experienced section and I asked dr who were the patients he had in mind for Butrans? dr said these are patients taking Vicodin,3-4 tabs a day,that he feels Butrans would be an appropriate option for dr said 5 tabs a day of Vicodin is his max,after that he sends patients to pain management as he doesnt want to deal with patients at that point.I asked dr to think of a few patients like that with workers comp or commercial insurance and we discussed Butrans patient savings cards for those commercial plan patients. we also discussed Butrans REMS program.I recommended Senokot-S
PPLPMDL0020000001	Brooklyn	OH	44144	3/11/2011	Spoke with David who said he has not seen any Butrans movement yet. Discussed where we are positioning Butrans & he said he thinks that once physicians start writing it & getting out of writing Vicoden and other short-acting medications around-the-clock that Butrans could do very well. Reviewed appropriate patients, dosing, and manged care coverage as well as e-voucher. David was happy to hear that it was part of the e-voucher system & said \$15 is very reasonable. Discussed importance of patients applying system correctly & reviewed the process with him. He asked about disposal, so I reviewed that with him as well & gave him patient information booklets. Also gave him new OxyContin savings cards & reviewed appropriate patients & reminded him they cannot be used for patients with any type of government insurance.
PPLPMDL0020000001	Cleveland	OH	44111	3/11/2011	Quick call with Barbara, Dr Giris is on vacation this week. She did not think that the Drs have prescribes Butrans yet, but she thinks it will be a good option for some patients. I asked what she sees the benefit being, she said patients would be able to get a baseline control of their pain and a CIII is convenient. She agreed to help remind the Drs when they see an appropriate patient.<font color=blue>b<b>CHUDAKOB's query on 03/17/2011</b></font>Who is Barbara?<font color=green>b<b>HOLUBA's response on 03/21/2011</b></font>Barbara Maline, PA<font color=blue>b<b>CHUDAKOB added notes on 03/21/2011</b></font>OK. Thanks!
PPLPMDL0020000001	Cleveland	OH	44103	3/11/2011	dr said she hasnt started anyone on Butrans yet as patients haven't wanted to get off their pills.I told dr those are NOT the patients she wants to talk to about Butrans.dr asked me to explain appropriate patients for Butrans,so we looked at Butrans initiation guide and discussed who she feels could benefit from Butrans.I asked dr to think of a commercial plan patient,as thats the easiest,with no Prior Authorization required,who's asking dr for a medication change and the short-acting opioid is NOT controlling the pain and a long-acting opioid is appropriate,thats the Butrans patient.dr said ok made sense and she would think of patients next week.I recommended
PPLPMDL0020000001	akron	OH	44304	3/11/2011	Introduced Butrans and FPI. Discussed appropriate patient types. Dr. Bullock thought this was a great option for patients who have been on Vicodin and percocet for a long period time. He very much understood what the appropriate patient type for Butrans was.
PPLPMDL0020000001	Parma	OH	44129	3/11/2011	Spoke with Anita (MA) who said that Dr Gallagher canceled office hours today due to being snowed in. She also told me Lynn (nurse & appointment scheduler) would be out until mid-April. I asked how to get a follow-up appointment to continue our Butrans discussion & Anita said she would give my information to Dr Gallagher & they will call me to schedule something. Remind her of Butrans indication, appropriate patients, dosing, & savings cards.
PPLPMDL0020000001	Cleveland	OH	44109	3/11/2011	I talked to dr about appropriate patients to start on Butrans,looking at Butrans initiation guide,dr said he has a lot of patients on Vicodin and when they call in sooner than the 31st day of the month,asking for re-fills,that makes him question if Vicodin is even controlling the pain so he would consider a long-acting opioid for them at that point.I asked if dr could think of 1 patient like that,with commercial insurance to use Butrans patient savings card? dr said he would try and to keep reminding him about Butrans.I recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	3/11/2011	I asked dr if he has started any patients on Butrans? dr said no he hasnt thought about it and couldnt remember insurance coverage and asked about workers comp and commercial plan insurance coverage for Butrans. we discussed both plans and I asked dr who is the patient dr is considering to start on Butrans? dr said he's not sure and asked who was the appropriate patient again for Butrans? I showed dr Butrans initiation guide and we discussed patients currently taking opioids,but perhaps telling the dr they arent happy with current medication and want something else.dr said he does hear that from patients who take tramadol and vicodin.I told dr if they are appropriate,looking at Butrans initiation guide,and thats what he's hearing,he has the option of starting them on Butrans. I asked dr if he could think of 1 workers comp or commercial plan patient like this today? dr said he'll keep this in mind as he see's patients and will try Butrans in 1 patient.I told dr I would follow-up monday
PPLPMDL0020000001	Cleveland	OH	44109	3/11/2011	I talked to dr about Butrans initiation guide and appropriate patients he would consider for Butrans.dr said he wont do prior authorizations so its hard as the majority of his patients are Medicaid.I asked dr what patient comes to mind that dr would even consider Butrans? dr said someone taking a couple Vicodin or Percocet a day but complaining of pain worsening and wanting more pills,he would think of Butrans for that patient.I told dr thats the appropriate patient,looking at the opioid experienced dosing section in Butrans initiation guide and asked if he could think of that patient but with workers comp or commercial plan insurance.dr said he does have those patients and he would consider Butrans for them.we discussed Butrans patient savings cards and I recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	3/11/2011	I talked to dr about appropriate patients dr would consider to start on Butrans,looking at Butrans initiation guide.dr said patients taking a couple Percocet a day and telling him they take it as needed and not following his directions,thats where he's thinking Butrans could work for some of his patients.I asked dr if he'll see any patients today,with workers comp or commercial plan insurance,that he can start on Butrans? dr said he'll keep Butrans in mind today as he see's a couple patients a day who are like this.i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44144	3/11/2011	Reminded Dr Paul of our previous Butrans discussion. She said that she has noticed that she has had to learn more about pain management lately as pain management specialists seem to bounce patients back to their primary care physician for maintenance. Dr Paul asked if Butrans could be used in nursing homes. Reviewed use in geriatrics & discussed managed care. She said she was unlikely to do a prior authorization, especially since tramadol & Percocet require no additional paperwork to get approved. Reviewed appropriate patient type. Dr Paul said she does think Butrans sounds like a good option for some patients. She said she would like to have fewer patients on around-the-clock oral pain medications & that she would consider Butrans for appropriate commercially insured patients. Reviewed savings cards with her.
PPLPMDL0020000001	Macedonia	OH	44056	3/11/2011	Spoke briefly with floater pharmacist. Discussed Butrans indication, dosing, appropriate patients/positioning. She said she had heard of Butrans at a different store but has not dispensed any. She confirmed that this location is still stocked with Butrans.
PPLPMDL0020000001	Brooklyn	OH	44144	3/11/2011	Dr Hilton asked how Butrans compares with Percocet & fentanyl. Both times I reminded her that we had no comparative data. I showed initiation guide pg 6 & let her know that patients on fentanyl were excluded from our studies. Also reviewed recommended initiating doses for Butrans based on current opioid therapy. She asked about cost & coverage. I reviewed managed care, including prior authorization for Medicare Part D & Medicaid plans. Also reviewed savings cards. Also discussed OxyContin as an option for patients taking more than 80mg equivalent of morphine per day. She said several times that she does not like to prescribe narcotics. I told her I understood & that she is right in being cautious. I asked if they use OARRS but she said they do not. I recommended it as a tool to protect her & her practice & to help her access appropriate patients. She was uninterested in Doc said she still has not had an appropriate patient for Butrans before I could ask. I asked her what kind of patient that might be. She said someone with commercial insurance and maybe just taking a couple of tabs of short acting meds. Told her that was the ideal patient type. I reviewed the initiation dose and reminded of savings cards.
PPLPMDL0020000001	Lyndhurst	OH	44124	3/11/2011	Followed up with Dr Tabbaa on our Butrans discussion. He said that he prescribed Butrans for 3-4 more patients just today but was not sure what insurance they had so he said he did not know if they would go through. He also asked what pharmacies are stocked. I reviewed several local pharmacies with confirmed stocking with him. Also reminded him of savings cards for appropriate patients. I asked what types of patients he has been using Butrans for. He said that one was a male patient who is a lawyer who did not want to be on oral pain medication around-the-clock. He said this patient was "afraid" to be on something like Vicoden. Reminded Dr Tabbaa that Butrans is still an opioid & alerted him to box warning. He said he knows that but he felt that Butrans was the best thing for this patient. He said that he carefully assesses each patient & then prescribes for them what he believes they will be most successful on. Discussed taper where appropriate.OxyContin savings cards reminder.
PPLPMDL0020000001	Mayfield Heights	OH	44124	3/11/2011	I reviewed the butrans indication with doc. Asked him if he had any questions on who the appropriate patient would be. He asked if Butrans is CII or CIII. I told him CIII and that scripts can be called in and refilled. He did not have any other questions. I asked him 2 scrips of Butrans. I reminded him of the oxycontin patient type.
PPLPMDL0020000001	Akron	OH	44304	3/11/2011	Had lunch with Dr. Snucker et al. at Akron City Hospital.
PPLPMDL0020000001	Cleveland	OH	44130	3/11/2011	I asked Dr Diab what the difference, in his mind, was between a "Butrans patient" & a "Vicoden patient". Dr Diab said "giving a patient a long acting way to treat their pain." As he started to walk away he paused & added, "with a narcotic." and then walked into a patient room.
PPLPMDL0020000001	Akron	OH	44304	3/11/2011	Introduced Butrans and the FPI. Focused on patient type and 7 day dosing. She said that 95% of her patients are Medicaid but she does see a small percent of patients who have Summa. She promised to keep it in mind for that population of her practice.
PPLPMDL0020000001	Cleveland	OH	44109	3/11/2011	I talked to dr about 1 patient to start on Butrans,looking at Butrans initiation guide,opioid experienced section,as dr said he now has a clearer picture of who the Butrans patient is after our discussion on Monday at lunch.dr said the 1 patient he had in mind thats taking 30mg oral morphine hasnt come to see him yet so he hasnt started anyone this week.I asked dr if he had patients asking,daily,for a medication change? dr said yes they ask him or nurses.I told dr if patients are appropriate,based on Butrans initiation guide,and they have workers comp or commercial plan insurance,thats who he can consider for Butrans.dr said okay and would think of that today.I recommended Senokot-S
PPLPMDL0020000001	akron	OH	44304	3/11/2011	Introduced and discussed Butrans and FPI. Dr. said that he has many patients who could benefit from a LA therapy and liked that it was applied just once a week. He had a large percent of Summa patients which means patients can get it at an affordable cost. He thought the saving cards that I left for the group would be helpful.



PPLPMDL0020000001	Mayfield Hts	OH	44124	3/11/2011	Window call.....I asked doc what success he has had with Butrans. He said he tried it a couple of times and has had no complaints. I asked him for 2 more scripts. He agreed.
PPLPMDL0020000001	Fairlawn	OH	44333	3/11/2011	Dr. came to the window as I was chatting with the girls up front about Butrans therapy. I asked him if had tried it yet and he said no. I thanked him for OxyContin support as he walked away.
PPLPMDL0020000001	Cleveland	OH	44135	3/11/2011	Spoke with Megan, we reviewed Butrans medication guide. We discussed that she may need to help instruct the patients on proper use. Reminder about OxyContin as an option when Butrans may not provide adequate analgesia. She said they have cut way down on the amount of OxyContin they dispense since the reformulation. Reminder about Ryolt as a once a day option and asked her to recommend Senokot S with opioids.
PPLPMDL0020000001	Cleveland	OH	44109	3/11/2011	worked physical medicine&rehabilitation dept-see call notes
PPLPMDL0020000001	Cleveland	OH	44109	3/11/2011	worked geriatric dept-see call notes on two physicians and NP
PPLPMDL0020000001	Lyndhurst	OH	44124	3/11/2011	Quick call.....reviewed the Butrans indication, CIII, dosing, and 7 day delivery. Asked her to prescribe for a commercially insured patient. She said she would try.
PPLPMDL0020000001	Lakewood	OH	44107	3/11/2011	Quick reminder as Dr was on his way out to the hospital. He said he will give Butrans a try.
PPLPMDL0020000001	Westlake	OH	44145	3/11/2011	Quick call at window, I asked if she had had tried Butrans in her pancreatitis patient. She had not yet, but will keep it in mind. I asked her to try just two patients this upcoming week on Butrans.
PPLPMDL0020000001	Valley View	OH	44125	3/11/2011	Introduced myself & Purdue's products to Deb (MA). She said that Ann White (Office Manager) would be the best person for me to talk to about information about scheduling an appointment to see Dr Singer. She also said they have a physician's assistant, Zena Becker. Deb also went through office hours with me (Tues & Thurs are best days) & gave me Ann's phone number so that I could schedule.
PPLPMDL0020000001	Cleveland	OH	44109	3/11/2011	I talked to Mary Jo, NP, about patients who are appropriate for Butrans looking at Butrans initiation guide. Mary Jo said she liked that Butrans was transdermal and dosed once weekly but she forgot about it and has started any patients yet. I asked Mary Jo to consider 2 patients on short-acting opioids that are asking for a medication change and she feels Butrans would be a great option. Mary Jo said she'll do that. we discussed Butrans patient savings cards and commercial plan insurance.
PPLPMDL0020000001	Akron	OH	44304	3/11/2011	Followed up from our last conversation and asked if he had considered writing Butrans before his "2 year" mark. He said that while Butrans seems like it is a good med he will never write a drug unless it has been available for at least 2 years. He also said that he would not discourage the other physicians or residents from writing it.
PPLPMDL0020000001	Lyndhurst	OH	44124	3/11/2011	Quick call.....reminded her of the Butrans indication and the 7 day delivery of Buprenorphine. Gave her an initiation guide and explained most patients will start on the 5mcg. Also reminded of the saving cards
PPLPMDL0020000001	Mayfield Heights	OH	44124	3/11/2011	Spoke to Jessica about the recent launch of Butrans. I discussed the indication and the 7 day delivery in a CIII. She confirmed that they have 5 and 10mcg but she has not seen any scripts for it. She just came from a store in Georgia so she might have missed it. I explained the savings cards, evoucher program and the application/disposal process. Gave FPI and patient information guide.
PPLPMDL0020000001	Akron	OH	44304	3/11/2011	Introduces Butrans and FPI. Discussed titration and patient type. Dr. said he had many patients that would benefit from a LA therapy like Butrans and took a full box of savings cards. Because of his large Medicaid population I reminded him to focus on his SummaCare patients. He agreed.
PPLPMDL0020000001	Mayfield Heights	OH	44124	3/11/2011	Spoke to Giovanni about the stocking of Butrans. He confirmed that they have the 5 and 10mcg but no scripts so far. He asked who was writing for Butrans. I explained that Hillcrest Pain mgmt has prescribed a few scripts. He asked about the most common dose. I told him 5mcg likely and explained the positioning, initiation and titration. He asked about how oxycontin is doing as he has not seen as many scripts lately. Noticeably, Dr. Price has not written as many. Told him that things are steady with oxycontin after some initial transition since the reformulation.
PPLPMDL0020000001	Cleveland	OH	44109	3/11/2011	I asked dr if he started any patients on Butrans yet? dr said no he hasn't thought about Butrans. I showed dr Butrans initiation guide and we discussed patients currently taking opioids that dr thinks Butrans could benefit dr said once weekly dosing and transdermal delivery are 2 benefits in his eyes, but he has a lot of medicare and medicare's not covering Butrans, we discussed commercial plan patients and workers comp patients to try Ryolt. I asked if dr could think of 1 patient with workers comp or commercial insurance that is currently taking a short-acting opioid but asking dr for something different as the current short-acting opioid isnt controlling pain? dr agreed. recommended Senokot-5. font color=blue<b>CHUDAKOB's query on 03/16/2011</b><b>font>Amy, if your physicians has tried Butrans they will usually tell you. By you asking this question, you may be "stealing their thunder". If they have prescribed, they want to tell you. Perhaps thinking of another way to open the call may get you into better conversations. Your thoughts?<font color=green>b>BROOKAM's response on 03/21/2011</b><b>font>maybe, i dont know depends on doctor, he is NOT the friendliest/conversationalist with reps and likes you to be brief&quick so it worked with him. I could say dr what do you re-call about Butrans or our discussion on patients that could benefit from Butrans?<font color=blue>b>CHUDAKOB added notes on 03/21/2011</b><b>font>That sounds much better.
PPLPMDL0020000001	Lakewood	OH	44107	3/11/2011	We discussed the dosing, indication and initiation guide for Butrans. Dr said most of his patients are taking more than 80mg of oral morphine equivalent and are on OxyContin. We discussed his new patients who are taking 4 5mg vicodin per day. He said he does see a benefit of the 7 day dosing. He said he would try Butrans before treating the vicodin. He agreed to try Butrans for that patient on 4 vicodin per day and are not well controlled. We reviewed OxyContin as a Q12hr option when patients are on 80mg of oral morphine equivalent per day. Reminder to recommend Senokot S with opioids.<font color=blue>b>CHUDAKOB's query on 03/17/2011</b><b>font>I am guessing the answer to your next call objective questions is "yes". You have to get much more patient specific before he sees a place for Butrans in his practice.<font color=green>b>HOLUBA's response on 03/21/2011</b><b>font>Thanks I will ask more specific questions. I need to ask for a patient taking 4 5mg vicodin per day and are not well controlled. Ask him to add Butrans instead of increasing the dose of vicodin.<font color=blue>b>CHUDAKOB added notes on 03/21/2011</b><b>font>The more specific the patient type, the better the physician will see where to fit Butrans in his practice.
PPLPMDL0020000001	Akron	OH	44304	3/11/2011	Introduced Butrans and FPI. Focused on patient types. She liked the concept of the 7 day dosing but was concerned about her large Medicaid population. I discussed our coverage on Summa and explained the benefit of the copay cards.
PPLPMDL0020000001	Cleveland	OH	44109	3/11/2011	I asked dr to explain to me what it sounds like when a patient asks for a medication refill. dr explained that conversation to me and said she usually will just tell nurses to refill the script, unless patients pain has increased and she thinks short-acting opioids not working, then she'll consider a long-acting opioid. I asked dr to consider 1 patient like this that she can start on Butrans, workers comp or commercial plan insurance. dr agreed and I said I would follow-up Monday to see if she started anyone today. recommended Senokot-5
PPLPMDL0020000001	FAIRVIEW PARK	OH	44126	3/11/2011	Spoke with Tom, he had not ordered Butrans yet. He agreed to order the 5 and 10mcg doses. We reviewed the rebate program and expiration date, he said he would order right away to get the rebate in on time. I gave him extra medication guides, we discussed applying the Butrans patch. He said he does have a lot of patients on vicodin around the clock. We reviewed the invitation guide for Butrans and that OxyContin would be a long acting option for patients on more than 80mg of oral morphine equivalent. Reminder to recommend Senokot S.
PPLPMDL0020000001	BEDFORD	OH	44146	3/14/2011	Spoke with Mark (floater pharmacist) & introduced Butrans since he had not yet heard of it. Reviewed indication, appropriate patients, CIII. He said he thought a once-a-week option was "interesting" & felt there is a place for it. Also went over OxyContin savings cards which he said he would leave for Marcus. Reminded him they cannot be used for anyone with any type of government insurance, including Medicare & Medicaid.
PPLPMDL0020000001	Cleveland	OH	44104	3/14/2011	I asked dr if he started anyone on Butrans? dr said no not yet and he couldn't remember who was the appropriate patient and asked me to review that information. I showed dr Butrans initiation guide and we discussed appropriate patients that are currently taking opioids who could potentially benefit from starting on Butrans. dr said he has a lot of patients that take Vicodin and Percocet and if they are taking 1-2 pills a day and come into office asking him for more pills, dr looks at MRI results and if they are negative he won't give them more pills. dr said he'll explain to patients that they have chronic pain, will never be pain free and ask patients how they think a pills is going to control their pain? I asked dr if he could think of a few patients like that where he knows he's not going to increase pills per day, so could he consider Butrans as an option at that point? dr said yes he would do that and he likes Butrans is dosed once every 7 days. we discussed insurance coverage for Butrans
PPLPMDL0020000001	Cleveland	OH	44109	3/14/2011	I talked to dr about appropriate patients for Butrans, looking at Butrans initiation guide. dr said he knows patients taking opioids, like Vicodin or Percocet, could benefit from Butrans but majority of his patients are Medicaid and he's not willing to do the prior authorization so that's the toughest thing here. I asked if dr had to process prior authorizations for other medications, for Medicaid patients? dr said yes he has done them but doesn't like to do them so I asked dr if he had any workers comp or commercial plan patients he could consider to start on Butrans? dr said he has some and would think of Butrans for these patients
PPLPMDL0020000001	Cleveland	OH	44105	3/14/2011	I talked to Abdul, Pharmacist, about stocking of Butrans and he confirmed they DO have all 3 dosage strengths but he's concerned as there haven't been any scripts yet. I explained to Abdul what I was saying to doctors and showed Butrans initiation guide again to discuss the appropriate patients and also re-assured Abdul that this is a slow start but I am confident doctors will be prescribing Butrans and he'll see scripts come through his pharmacy. we discussed OxyContin being an appropriate option after Butrans 20mcg/hour isnt working. gave OxyContin conversion/titration guide and OxyContin savings cards. I recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44109	3/14/2011	I showed dr Butrans initiation guide and asked dr to explain to me who he thinks could benefit from Butrans. we discussed patients in doctors practice that are currently taking opioids and where dr thinks Butrans is a better option. dr said he just keeps forgetting who the appropriate patient is so our discussions are helping him remember who is appropriate to start on Butrans. I asked dr to think of 2 patients, with commercial insurance or workers comp, as that's going to be the easiest for him to start with Butrans and get some clinical experience with the medication.
PPLPMDL0020000001	Cleveland	OH	44122	3/14/2011	Spoke with Debbie (nurse) since my scheduled breakfast was canceled due to enforcement of the Cleveland Clinic's policy of no breakfast or lunch appointments. She said they are trying to find away to work around the policy so that reps can still see physicians on occasion. Discussed Butrans indication, appropriate patients/positioning, savings cards. She said she thinks that the physicians there (Shin, Ningegowda) would use Butrans for a lot of patients. Debbie took my card & said she would call me when they reach a resolution on how I can speak with the physicians. OxyContin savings card reminder as well.
PPLPMDL0020000001	Akron	OH	44310	3/14/2011	Followed up to see if Dr. Blanda treats chronic pain and he said he did not. He said he seldom writes anything long term. I told him Butrans may not be appropriate for those patients.
PPLPMDL0020000001	Rocky River	OH	44116	3/14/2011	I asked Dr how often he has a patient complain that their 4 5mg vicodin are not controlling their pain? He said not too often, but sometimes. I told him these are the patients that may be appropriate for Butrans, and I asked if he would start just 2 of these patients. He said he would try.
PPLPMDL0020000001	Bedford	OH	44146	3/14/2011	Spoke with Quareta (technician) & reviewed Butrans (indication, dosing, positioning) as well as new OxyContin savings cards. She said she would leave my information for Oleg (pharmacy manager) as they had a floater in today & she was unavailable. She was not sure if they had dispensed any Butrans yet.
PPLPMDL0020000001	Maple Heights	OH	44137	3/14/2011	Spoke with Dawn (technician) who said she is not aware of any Butrans prescriptions yet. Reviewed positioning and savings information with her & let her know that she could print savings cards at Butrans.com. Also gave more OxyContin savings cards which she said they needed. She said she would let Jim know I was there & would remind him about Butrans.
PPLPMDL0020000001	Cleveland	OH	44109	3/14/2011	I talked to dr about Butrans initiation guide and who he feels is appropriate to start on Butrans. dr said he does have some patients in mind that are currently taking tramadol but not controlled so he is willing to try Butrans in them. I told dr that was great he had some patients in his mind to start on Butrans and we discussed insurance coverage for workers comp and commercial plan patients as that's the easiest right now so dr doesn't have to do prior authorization for Medicaid patients. I recommended Senokot-5
PPLPMDL0020000001	Parma	OH	44134	3/14/2011	Quick call with Dr Hernandez. He said he just wrote his first Butrans prescription but that the patient took the prescription to CVS & they did not have it in stock. Dr Hernandez asked me again to tell him the pharmacies that are stocked, so I reviewed a list of several area chains and locations that have confirmed stocking. Also asked him to request that CVS order Butrans now that they know he is prescribing and he said that he will do this because his patients want their medications same day.
PPLPMDL0020000001	Cleveland	OH	44109	3/14/2011	dr didnt have a lot of time to talk so I asked dr if she started any patients on Butrans, after our discussion on Friday? dr said she did have a few Medicaid patients who she wanted to start on Butrans, but they couldn't get Prior Authorization approved as patients hadn't met Medicaid requirements. I asked dr to think of patients currently taking short-acting opioids, like Vicodin or Percocet, but think of workers comp or commercial plan patients. dr said she would do that
PPLPMDL0020000001	Garfield Hts	OH	44125	3/14/2011	Introduced myself & Purdue's products to Amy (medical assistant). She reviewed office policies & schedule with me & shared with me that they are in the process of joining the Cleveland Clinic & are not scheduling any appointments for reps at this time. She asked that I come back Wednesday to see if Dr Kline has time to see me to review the product information. She said she thinks Butrans sounds like something he may be interested in.
PPLPMDL0020000001	Akron	OH	44333	3/14/2011	Introduced Butrans and FPI, she had already written a Rx based on a conversation I had with Dr. Weidman. It was an opioid naive patient who had previously been on hydrocodone. She initiated therapy at the 5 mcgs.
PPLPMDL0020000001	Fairlawn	OH	44333	3/14/2011	Quick call. Dr. gave me little time but I was able to mention Butrans and let him know it had recently been introduced to the market. He took an initiation guide and left.
PPLPMDL0020000001	Cleveland	OH	44109	3/14/2011	worked physical medicine&rehab dept-see call notes

PPLPMDL0020000001	Fairlawn	OH	44333	3/14/2011	Asked Dr. Oyakawa what type of patient he initiated Butrans therapy on and he admitted he had "forgotten" about it. I asked if he would commit 2 of the 30 patients he mentioned at lunch last week to Butrans therapy and he said he would try to keep it in mind.
PPLPMDL0020000001	Fairlawn	OH	44333	3/14/2011	Spoke with pharmacist, they have seen little movement and are still only stocking the 5 mcg's. I told them that Dr. Shah has been writing and was inquiring about where all strengths were stocked.
PPLPMDL0020000001	Akron	OH	44333	3/14/2011	Dr. Shah has written 3 Butrans Rx's. He said that patients are responding well. While the patients that are already on therapy are opioid experienced, we talked today about putting some patients on Butrans who were opioid naive. He committed to starting some of these patients.
PPLPMDL0020000001	Cleveland	OH	44106	3/14/2011	worked in-patient pharmacy and pain management
PPLPMDL0020000001	Cleveland	OH	44106	3/14/2011	i talked to Wes,Clinical Pharmacist,about Butrans being presented to P&T committee in February and Wes said he did NOT present Butrans in February because he had 5 drugs to present to P&T committee and will present Butrans March 29th and then medication management review team will consider Butrans for formulary in hospital April 13th.Wes said he thinks they could stock all 3 dosage strengths of Butrans and remove some of the Duragesic dosage strengths that are on the Omnicel,which is the cart holding all medications in hospital and the medication management team and P&T Committee members will look to see how much space they have
PPLPMDL0020000001	Cleveland	OH	44106	3/14/2011	i talked to Wes,Clinical Pharmacist,about Butrans being presented to the P&T committee in February and Wes informed me that he wasnt able to prepare the Monograph for Butrans as Dr.Hayek,Chief of Pain/Anesthesia didnt get the drug review form to him until 2 days before the meeting,so it wasnt possible to get prepared.Wes said he's presenting Butrans at the next meeting,March29th and then medication management team will review Butrans April 13th and make final decision on Butrans being approved for formulary
PPLPMDL0020000001	Fairlawn	OH	44333	3/14/2011	Dr. Weidman has still only initiated therapy to the one patient we talked about on the last visit. She didn't"t" give me much time but promised to keep it in mind for future patients.
PPLPMDL0020000001	Cleveland	OH	44106	3/14/2011	i talked to dr about patients he feels are appropriate for Butrans and showed dr Butrans initiation guide.dr said he has a lot of patients on tramadol,that are dosing the medication q4-6h and not controlled,so he thinks Butrans would be a great option for them. i asked dr if he could think of 2 patients,like this,that are workers comp or commercial plan patients to try Butrans.dr agreed.i recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44125	3/14/2011	Spoke briefly with Angie who said that she has not yet had any patient feedback regarding Butrans but that she has dispensed it to patients. She said it was fairly recently that it was dispensed, so it is too soon to have heard anything back from the patient. She said she would let me know if she hears anything. Gave her OxyContin savings cards & reminded her they are for commercially insured or cash-pay patients only & cannot be used for government insurance.
PPLPMDL0020000001	Cleveland	OH	44109	3/14/2011	i talked to Tania,Pharmacist,about Butrans initiation guide and patients currently taking short-acting opioids that could benefit from Butrans.Tania said they havent ordered any Butrans yet and havent seen any scripts for Butrans.Tania said i have to speak with pharmacy manager later in the week about ordering Butrans.i asked Tania what benefits she thought Butrans had for their patients? Tania said once weekly dosing is the best thing for patients instead of dosing short-acting opioids around the clock as some patients take a lot more pills than prescribed by doctor so thats a concern.i told Tania i would follow-up on thursday with pharmacy manager and i recommended Senokot-5
PPLPMDL0020000001	Independence	OH	44131	3/14/2011	Spoke with Kathi (MA) who said Dr Reddy had already left for the day. Reviewed Butrans indication, patient type, once-a-week transdermal system, and managed care with her. She advised that I return on Wednesday morning to try to speak with Dr Reddy so that I can follow up about Butrans as she thinks it is something he would use in his practice based on the kinds of patients he sees. Reminded her of savings cards as well.
PPLPMDL0020000001	Chagrin Falls	OH	44022	3/15/2011	Diane (nurse) said that she did not see Butrans savings cards in their supply so she asked that I leave more. She was not sure whether the ones I had left previously were thrown away or given to patients & was also not sure whether Dr Rood had prescribed it yet. She said she would remind him as he was busy seeing patients & could not see me. Reviewed dosing, appropriate patients/positioning, & reminded her that savings cards could not be used for patients with any type of government insurance.
PPLPMDL0020000001	Cleveland	OH	44195	3/15/2011	dr said he hasnt started any patients on Butrans as he couldnt remember who is the right patient,so we discussed appropriate patients for Butrans and i showed dr Butrans initiation guide.dr said ok he will try it in a few patients and let me know what he hears from patients.we discussed managed care coverage and i recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44195	3/15/2011	i talked to Kathy,PA,about appropriate patients to consider for Butrans looking at Butrans initiation guide and asked if she has thought of any patients yet to start on Butrans? Kathy said there have been a few but they were Medicaid patients and didnt meet Prior Authorization requirements for Medicaid,so we talked about what short-acting opioids those patients were taking that she felt comfortable considering Butrans.we discussed managed care coverage and Butrans patient savings cards.i recommended Senokot-5
PPLPMDL0020000001	Parma	OH	44134	3/15/2011	Spoke with Dan (floater pharmacist) & tried to find out more about the Rite Aid system "unbreakable carton" labeling on Butrans. He said he was not familiar with Butrans so I reminded him by reviewing indication, dosing, and delivery system. He said he has not filled any prescriptions. I asked if he could check the system to see if this was something that pharmacists could override, but he said his system wouldn't show that. Discussed OxyContin savings cards for appropriate patients. He said he would leave them & my card for the regular pharmacist.
PPLPMDL0020000001	Independence	OH	44131	3/15/2011	Quick call with Dr Jack who said he had "forgotten again" about Butrans. I asked him how often he sees patients for a condition causing moderate to severe pain chronically & he said he sees "all kinds of them" very frequently. I told him I was asking him to choose only two of those appropriate patients to prescribe Butrans for to get him started. He agreed to do this & said to keep reminding him.
PPLPMDL0020000001	Solon	OH	44139	3/15/2011	Spoke with Kathy (MA) and introduced Butrans. Reviewed indication, delivery system, dosing, appropriate patients/positioning, and CII. Kathy said Dr Stein does not do lunches or see reps by appointment but said I could leave information & my card for him & he would review it. She said that as a rheumatology practice, they see many patients for whom Butrans may be appropriate.
PPLPMDL0020000001	Independence	OH	44131	3/15/2011	Quick call with Dr Rob in hallway. Got in reminders for both products (Butrans seven days buprenorphine delivery in one application & OxyContin seven tablet strengths). Also spoke with Cameo (MA) about savings cards for both products for appropriate patients.
PPLPMDL0020000001	Solon	OH	44139	3/15/2011	Dr Zaldi said he has not prescribed Butrans yet. I asked him what type of patient he is looking for. He said, "pain patients". I asked him if he could be more specific & he said, "moderate pain patients". Reviewed with him dosing, managed care, savings cards & stocking. OxyContin savings card reminder.
PPLPMDL0020000001	Cleveland	OH	44109	3/15/2011	i talked to dr about Butrans fpi,initiation guide,Butrans REMS program,patient information booklet/dvd and Butrans patient savings cards for commercially insured patients.dr said in his 2yrs of fellowship he has only started ONE patient on an opioid and that was for a patient with severe pain where he prescribed 30 Percocet.dr said he told this patient he would not prescribe more Percocet and if this patient wanted more,she would have to go to another doctor because he wasnt comfortable prescribing narcotics.i thanked dr for being honest and sharing his thoughts,experiences while in residency and fellowship and asked dr what benefits he even saw in Butrans.dr said he did like that Butrans was a patch,not a pill,his patients could dose it once a week,that was easier in his mind than taking pills.i asked dr to consider 1 patient who meets Butrans indication,dr has tried all options and nothing has worked,perhaps Butrans could be an option? dr said he would consider that and i recommended
PPLPMDL0020000001	Euclid	OH	44132	3/15/2011	DOC said he has tried Butrans a couple of times. One patient was unable to get it and the other he has not heard back from. Both patients had workers comp. He did not remember specifics other wise. I explained that state BWC is covering it but employer groups may not. I asked him to write 2 scripts per week. He said he would try.
PPLPMDL0020000001	Cleveland	OH	44103	3/15/2011	i talked to Abdul,Pharmacist,who said he didnt order Butrans yet as he was waiting for the 1st script.Abdul asked me who is prescribing Butrans? we talked about some doctors in the area who are prescribing and i asked Abdul if he would be willing to at least order the 5mcg and 10mcg of Butrans as these are the initiation dosage strengths for Butrans? Abdul said he will order all 3 dosage strengths today and asked me to follow-up in a week.
PPLPMDL0020000001	Cleveland	OH	44195	3/15/2011	worked pain management/anesthesia dept-see call notes,attended 7am lecture and worked physical medicine&rehabilitation dept-had to leave Butrans fpi,patient information booklet and initiation guide for Dr.Jedlicka,Dr.Hou and Dr.Reddy,as Rebecca,the medical secretary said THE DOCTORS have to review the product information and make a decision if they want to meet with me individually
PPLPMDL0020000001	Cleveland	OH	44195	3/15/2011	i talked to Anne,NP,about patients taking short-acting opioids like Vicodin that are asking for more pills or complaining of pain worsening and asked if she would consider Butrans for them? Anne said she would and that she likes once weekly dosing of Butrans,she just hasnt thought of Butrans lately.we looked at Butrans initiation guide and i asked her to start a couple patients like we discussed to get some clinical experience with Butrans.Anne said she would and asked about managed care coverage for Butrans so we discussed workers comp,medicaid and commercial plan patients. recommended Senokot-s
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	3/15/2011	Called on Dr. Richman in Edwin Shaw Hospital.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/15/2011	Followed up to see if there has been any movement. They said that they thought they had filled an RX but did not remember from who. They said movement has been slow. I encouraged them to keep it stocked since I had only been talking about Butrans for a short time in the field.
PPLPMDL0020000001	Lyndhurst	OH	44124	3/15/2011	Reminded doc of our lunch and how he admitted he did have a patient in mind for Butrans. I asked him if he has prescribed it yet. He said no. I reminded him that 5mcg/hr would be the starting dose for most patients.
PPLPMDL0020000001	Westlake	OH	44145	3/15/2011	Quick follow up on upcoming formulary meeting. He said he has everything he needs regarding Butrans information and will be prepared. He said he will continue to prescribe Butrans.
PPLPMDL0020000001	Mayfield Hts	OH	44124	3/15/2011	Reminded doc of our lunch last week and asked him if he has identified an appropriate BWC patient to try on Butrans. He said not yet. I asked him to prescribe for those patients that may just be taking tramadol or NSAIDs ATC or on low dose vicodin. Nothing else learned.
PPLPMDL0020000001	Munroe Falls	OH	44262	3/15/2011	Dr. Kolacewski did not have much time and just came up to the counter. I asked if she had initiated therapy and she mentioned that she wanted to review the information that I had left with her. I asked if I could come back next Tuesday and she said she would review it by then.
PPLPMDL0020000001	Cleveland	OH	44143	3/15/2011	Quick call....Discussed the indication and positioning of Butrans. He asked if covered on medicare/medicaid. I told him a prior auth would be needed but commercially Butrans is well covered. He told me to schedule a lunch. Already have one in May. He did not need Ryolt savings cards.
PPLPMDL0020000001	Cleveland	OH	44195	3/15/2011	i asked dr if he started any patients on Butrans? dr said no,Butrans is a new product so it will take him awhile to feel comfortable prescribing Butrans.i asked dr if he had patients taking tramadol or Percocet that werent controlled with the dosing regimen he prescribed? dr said yes a lot of them say they want more pills or they want a different medication.i asked dr to just think of 1 patient who he thinks Butrans could be appropriate,showing Butrans initiation guide,and think of a workers comp patient or commercial plan patient who can use Butrans savings card.dr said he'll think about it. i recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44109	3/15/2011	worked rheumatology dept-see call notes as i had lunch with dept, worked orthopedics dept - collected updated information on the Chief of Orthopedics at Main Campus and Dr.Hoyen who is a Butrans core but will have to be removed 4/1/11 because he is only at Main campus ONE day a week
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/15/2011	i continued to help Dr. Pitt identifying a Butrans patient. He argued that he did not have any patients that were appropriate, however right before he left, he mentioned that he can't even get patients to keep their Flector and Lidoderm patches on.
PPLPMDL0020000001	Lakewood	OH	44107	3/15/2011	Quick follow up with Dr and Vicie at Lakewood office. Dr said he wrote another Butrans script and feedback has been good so far. Vicie said she did not know if any managed care issues. She will hand out the Butrans savings cards when he prescribes at this location.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	3/15/2011	Introduced Butrans and FPI. I explained patient type, how applied and asked if he was currently treating low dose hydrocodone patients, he said he had some patients on low dose percocet/Vicodin. I asked if he would try Butrans on 2 patients and he said he would keep it in mind.
PPLPMDL0020000001	Highland Heights	OH	44143	3/15/2011	Quick call....Discussed the Butrans indication and patient positioning. I asked him if he is having better success with patients being able to get the product. He said he has not had any issues as medicare/medicaid cuts out a lot of patients. I asked him to continue to prescribe.
PPLPMDL0020000001	Cleveland	OH	44195	3/15/2011	i only talked to dr for a few minutes,looking at Butrans initiation guide,discussing who he thinks is appropriate to start on Butrans.dr said he does have patients on Vicodin and Percocet that he thinks could benefit from Butrans so he will keep this in mind.we discussed managed care coverage.

	Euclid	OH	44117	3/15/2011	Discussed the Butrans 5 selling messages. He asked about the side effects. I referred to the FPI and the nausea,dizziness, headache. He said he would not likely start an opioid naive patient on Butrans but rather a patient maybe taking 2-3 tabs. He wanted to know if I had talked to Moufawad as Dr. Moufawad sees about 60% of his chronic pain patients and mostly writes the long acting opioids. I told him that Moufawad is aware of Butrans and I believe he has written. Dr. Morley did say that he would give Butrans a try. Let him know that it is being covered by BWC. He might prescribe Butrans after tramadol.
PPLPMDL0020000001	Independence	OH	44131	3/15/2011	Dr Sundaram said he has still not prescribed Butrans. I asked what types of conditions he treats that are chronic & cause pain. He paused & mentioned osteoarthritis. He said he sees many patients like this in the nursing homes he visits frequently. He said he would like to start using it there & asked if he could use it in those patients. We discussed managed care. I told him that each Medicare Part D formulary has different requirements for their prior authorizations & that the best way to find out about specific coverage is to choose a few patients for whom he finds Butrans appropriate & prescribe it to see what that plan requires. He said that he will try it for a few nursing home patients & that he can think of a couple of office patients as well. OxyContin savings card & Senokot-5 sample reminders.
PPLPMDL0020000001	Cleveland	OH	44109	3/15/2011	I talked to dr about Butrans fpi,initiation guide,Butrans REMS program and patient information booklet/dvd.i asked dr what benefits she thought Butrans could provide her patients? dr said she has a few patients on tramadol that she might consider Butrans for,but she prefers not to start using it there & asked a lot of opioids dr said she treats a lot of rheumatoid arthritis and osteoarthritis patients and prefers to prescribe prednisone and the arthritis medications that are available and not opioids.dr said if her patients are taking 2 tabs of 50mg tramadol,so 100mg a day and they want more pills because thats not working,she will increase to 3 pills sometimes 4 a day,so 200mg a day i her max,after that she sends patients to pain management.i asked dr if she has 2 patients taking tramadol that say the current dosing regimen isnt working or isnt controlling their pain? dr said sometimes she hears that,so i asked her to consider Butrans there,showed dr Butrans initiation guide to re-focus her on those 2
PPLPMDL0020000001	Sagamore Hills	OH	44067	3/15/2011	Dr Scanlon asked me why he hasn't prescribed Butrans yet. I told him that that was a good question & reminded him that in previous conversations he had mentioned that he liked that Butrans was a once-a-week transdermal system. He said he does like those aspects. I asked him what type of patient he is looking for for Butrans & he asked me to remind him where to prescribe it. I mentioned patients who he is ready to put on 1-3 Vicoden or Percocet per day. He said he sees patients like that fairly frequently. I asked him how many of his patients who are on pain medication ask him for an increase in dose or a change in medication & he said "a great many". I told him those were potential Butrans patients as well. Discussed dosing, titration, & savings cards where appropriate. Also showed back of initiation guide to show exactly how to write the prescription. Reminder for OxyContin savings cards as well. Before he left, Dr Scanlon repeated back to me, from memory how to write Butrans.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	3/15/2011	Discussed Butrans and asked her what therapy she goes to when tramadol fails. She said there wasn't specific med. I asked if she would initiate Butrans therapy for those patients and she said she would keep it in mind. She also asked for Ryzoit co-pay cards.
PPLPMDL0020000001	Cleveland	OH	44109	3/15/2011	I talked to dr about Butrans fpi,initiation guide,Butrans REMS program,patient information booklet/dvd and asked dr what benefits he saw in Butrans for his patients? dr said he hasnt heard of Butrans before but really liked that this was a transdermal delivery medication,dosed once a week instead of his patients taking tramadol q4-6h.dr said he has a few patients he knows dont like taking pills and thinks Butrans would be a great option.dr asked about insurance coverage so we discussed commercial plan patients using Butrans savings card,medicaid requirements for Prior Authorization and workers comp patients.dr said he will try Butrans in a few patients and let me know what he hears from patients once they get started.i recommended Senokot-5
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	3/15/2011	Reintroduced Butrans to Dr. Dilaurio. Time here is always limited so I have had to continue to reinforce the core messages. While I was there she wrote a RX in front of me for a opioid naive patient.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	3/15/2011	Reintroduced Butrans and focused on our 5 core messages since time with her is very limited. She continues to act enthusiastic about the product but has not yet written.
PPLPMDL0020000001	Cleveland	OH	44195	3/15/2011	I talked to dr briefly about who he feels is appropriate for Butrans.dr said he doesnt have a lot of patients on opioids as he's trying to take patients OFF opioids.i asked dr if these are chronic pain patients that he was taking OFF opioids? dr said yes,they are all chronic pain patients but he believes more in the surgical procedures,injections,stimulators,etc.are better options for patients than opioids.i asked dr if he had 2 patients that were taking Percocet that perhaps are asking him for more pills or saying that they are still in pain,even though they are taking their Percocet? dr said he does get those patients occasionally but not often.i showed dr Butrans initiation guide and asked him to consider Butrans for 2 patients like that,with workers comp or commercial plan insurance as those patients can use the Butrans savings cards.dr said he'll think about it.
PPLPMDL0020000001	Cleveland	OH	44109	3/15/2011	I discussed with dr,Butrans fpi,initiation guide,patient information booklet/dvd,Butrans REMS program and Butrans patient savings cards for commercial plan patients.dr said he has never heard of Butrans and does have some patients on tramadol and percocet that he thinks Butrans could be a better option for I asked dr why he thought that? dr said because Butrans is transdermal and dosed once a week,thats easier for some of his patients than taking short-acting opioids q4-6h.dr said he will try Butrans in a few patients and let me know what happens.we discussed all managed care coverage for Butrans.i recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44109	3/15/2011	I talked to Mike,Pharmacist,about Butrans initiation guide,patient information booklet,stocking and Mike said Rob was in a meeting and i needed to have an appointment with Rob,Out-patient Pharmacy manager there,to discuss Butrans.i explained to Mike that I have left several messages on the phone and also notes asking Rob to call me but i havent heard back from Rob.Mike said to keep trying and said that he would take the Butrans initiation guide and FPI to Rob and told me to try again next week.
PPLPMDL0020000001	Cleveland	OH	44109	3/15/2011	I talked to dr about Butrans fpi,initiation guide,Butrans REMS program,patient information booklet/dvd and Butrans patient savings cards for commercial plan patients.dr said he's an Internal medicine resident,under preceptorship of Dr.Lindheim (IM Director),rotating through rheumatology dept.dr said he has a lot of patients on tramadol that he gives 50mg BID,then patients call and say its not working or pain's increased so he'll increase dosing frequency to TID or four times a day,so usually patients end up taking 200mg tramadol.i showed dr Butrans initiation guide and said that is the patient,before you increase dosage strength of tramadol or dosing frequency,to start on Butrans.dr said that made sense,more moderate pain patients.we discussed medicaid,workers comp and commercial plan coverage for Butrans. I recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44103	3/15/2011	I talked to Bahareh,Pharmacist and Sheria,Pharmacy Technician,about Butrans fpi,initiation guide,Butrans patient savings cards for commercial plan patients,we discussed workers comp and medicaid patients coverage for Butrans and Butrans patient information booklet/dvd.Bahareh and Sheria said Amol,Pharmacist who is usually working here did NOT share any of the Butrans information with them so they were very appreciative of me giving them all of this information.i asked both of them if they were allowed to open the Butrans carton,if a dr prescribed less than 4 Butrans transdermal systems? Bahareh and Sheria said yes,they could open the Butrans carton and this wasnt an issue. I asked if both of them could recommend Butrans,when speaking with patients who arent controlled on short-acting opioids,both of them said yes they would recommend Butrans to patients and
PPLPMDL0020000001	Cleveland	OH	44111	3/16/2011	We reviewed the Butrans FPI and initiation guide. He thinks it seem like an interesting option. He asked about managed care as he has had managed care issues in the past with new drugs. He said as for commercial insurance he sees a lot of super med and Anthem. I reviewed managed care for Butrans and the savings cards. Reminder about OxyContin as an option when Butrans may not provide adequate analgesia. I reviewed the Butrans medication guide and savings cards with Barb. She said would help remind the Dr about Butrans and try to think of some appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44111	3/16/2011	Quick call with Barbara and Dr Daoud. Dr said he wore the demo patch I showed him for about 24 hours on his hand to see what the adhesion was like. He said he thought it stuck pretty well. I asked Barbara to remind the Drs to try Butrans and she agreed.
PPLPMDL0020000001	Garfield Hts	OH	44125	3/16/2011	Introduced myself & Butrans to Dr Kline, delivering 5 core messages & alerting him to black box warning. Went over appropriate patients/positioning. I asked his thoughts & he asked if Butrans is like Duragesic. Showed initiation guide page 6 & pointed out that patients on fentanyl patch were excluded from studies- asked him to think of the more "moderate" pain side. He asked if Butrans was "as effective" as 3 Vicoden per day. I told him we have no comparative data & showed starting dosage chart. He asked how long it takes to start working. Showed FPI 12.3 & 2.4 to support supplemental analgesia if necessary. Discussed cost, coverage, & savings cards. Dr Kline asked if "kids on the streets" could manipulate Butrans for diversion- I told him I know of no specifics, but that because Butrans is an opioid, it does carry abuse/addiction potential as all other opioids do. Reviewed application & rotation. Dr Kline said Butrans sounded much better than "taking pills all day" for pain
PPLPMDL0020000001	Bedford	OH	44146	3/16/2011	Spoke with Lynette (MA) & introduced Butrans. Reviewed indication, dosing, appropriate patient type/positioning. She said she would pass the information along to Dr Mahna and that she thinks he may be interested. She said that because they are in the middle of a busy time at the office, I should return at the middle of next month to set up an appointment to speak with Dr Mahna about Butrans.
PPLPMDL0020000001	Cleveland	OH	44104	3/16/2011	dr said he hasnt started any patients on Butrans yet as he keeps forgetting about it.i asked dr what does he need from me to remember Butrans? dr said just keep stopping in office weekly and leave Butrans initiation guide with him as he thinks thats easy for him to remember who the appropriate patient is for Butrans.i asked dr if he gets calls daily, or see's patients that are on Percocet and they tell him the Percocet's not working? dr said yes,daily,so i told dr to think of those patients to start on Butrans if they are taking 15mg-40mg oxycodone and meet Butrans indication.dr said ok he would do that.i asked dr to start 2 patients on Butrans and i would follow-up next week.dr agreed to do so.i recommended Senokot-5
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/16/2011	Dr. Ali said that he prescribed Butrans for a commercially insured opioid naive patient. He said that he has not heard back. I asked him if he had any patients coming in this afternoon that could also benefit from Butrans therapy and he said that insurance was a challenge since he has a large population on Medicaid patients.
PPLPMDL0020000001	Akron	OH	44320	3/16/2011	Reminded Misty that she would be able to write Butrans as long as one of the docs in the practice signed the Rx. She mentioned that they were going to start focusing primarily on pain over the next 6 weeks and this would be a great product. She had 2 patients in mind that she wanted to start on it.
PPLPMDL0020000001	akron	OH	44333	3/16/2011	Reintroduced Butrans to Dr. Bashor. Asked if he had the opportunity to initiate therapy. He said that he had not yet had the opportunity to initiate therapy but committed to starting a patient this week. Followed up with the OM, Gretchen- and had her mark the charts of potential Butrans patients.
PPLPMDL0020000001	Mayfield Village	OH	44143	3/16/2011	Reminded doc of our previous discussion about Butrans and his expressed interest. He said he has not prescribed it. I asked him if he sees a place for a long acting CII for his patients. He did not answer and walked away. Nothing learned.
PPLPMDL0020000001	Cleveland	OH	44111	3/16/2011	Quick call, Dr said he wore the demo patch I showed him for about 24 hours on his hand to see what the adhesion was like. He said he thought it stuck pretty well. I asked if he could find just 2 patients to start on Butrans, he said he would try it.
PPLPMDL0020000001	Mayfield Heights	OH	44124	3/16/2011	Window call....doc said she is trying to prescribe Butrans but even commercial patients are saying its too expensive. I asked if she knew which plans but she didnt remember. I reminded her of the 3rd tier status nationally. I asked her to continue to prescribe and give a savings card.
PPLPMDL0020000001	Independence	OH	44131	3/16/2011	JT said he recently dispensed Butrans 5mcg/hr. I asked who wrote the prescription & he checked his system & confirmed that it was Dr Pai. The patient had Medicare Part D, so they were unable to use the savings card. JT said that I need to get Drs Rutkowski to start writing Butrans. He said that both of them write the majority of Vicoden prescriptions in the area & that they write a lot of prescriptions. I let him know I am working on them both, but they have yet to give me a clinical objection, so it is difficult to figure out what is holding each of them back. JT said he thinks that their patients are simply asking for Vicoden & that they doctors find it easier to just give the patients what they are asking for rather than writing Butrans. He also mentioned Dr Kuschnir in Brunswick as he remembers that he was fond of Buprenex. I told JT that Dr Kuschnir has been very supportive. Offered more OxyContin savings cards but they did not need more yet.
PPLPMDL0020000001	Akron	OH	44320	3/16/2011	Asked Dr. Duggstadt if she had initiated therapy with Butrans. She said she had not because of managed care issues. I asked if she would focus on a patient who was on low dose hydrocodone and had commercial insurance and she said she would.
PPLPMDL0020000001	Cleveland	OH	44113	3/16/2011	dr said he hasnt started any patients on Butrans but he remembered Butrans was for more moderate pain patients,was a transdermal delivery medication but he couldnt remember the dosing schedule and asked about insurance coverage for Medicaid and commercial plan patients and asked me if Butrans was a CII? I told dr Butrans was dosed once every 7 days,showed Butrans initiation guide,that it was a CII so he could call in 5 refills up to 6 months and we discussed Butrans patient savings cards for commercial plan patients and medicaid prior authorization requirements.dr said he likes the fact that Butrans is a patch,instead of pills as he has a lot of patients on Vicodin and Percocet and he feels this would be a better option.i asked dr to start 2 patients on Butrans,based on our discussion looking at Butrans initiation guide and who is appropriate for Butrans,dr said that was fair and he would do that.i told dr i would follow-up next week.i recommended Senokot-5
PPLPMDL0020000001					

PPLPMDL0020000001	Cleveland	OH	44103	3/16/2011	i talked to dr about Butrans initiation guide and who he thinks is appropriate to start on Butrans.dr said he couldnt remember insurance coverage for Butrans so asked me to explain that information to him again.we talked about patients currently taking tramadol,but not controlled,and instead of dr increasing dosage strength of tramadol or dosing frequency,i asked dr to start 2 patients on Butrans.dr said he would consider this option for patients.dr said he had a few patients in mind for Butrans but they had Medicaid insurance and didnt meet prior authorization requirements.
PPLPMDL0020000001	Cleveland	OH	44106	3/16/2011	i talked to dr about starting patients on Butrans,looking at Butrans initiation guide and asked dr if he had patients on tramadol that werent controlled and asking for something different? dr said yes,he does.i told dr thats who he can consider instead of increasing dosing frequency or dosage strength of tramadol.dr said that makes sense and he will consider that when he see's these patients.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/16/2011	Dr. Higley came to the window and gave me a little time. I reintroduced Butrans to him and focused on the indication and once a week dosing. He wanted to hear more but was already behind and encouraged me to schedule lunch.
PPLPMDL0020000001	Cleveland	OH	44114	3/16/2011	i asked dr if she has any patients taking tramadol or Vicodin that arent controlled and asking her for something different? dr said she hears that a lot from patients,so i showed dr Butrans initiation guide and asked her to consider those patients with workers comp or commercial insurance to start on Butrans.dr said she started 1 patient,hasnt heard anything negative from patient,so thats a good sign.i told dr that was great she started 1 patient,but could she think of 2 more patients today to start on Butrans? dr said yes she will keep Butrans in mind as an option for patients.i recommended Senokot-S
PPLPMDL0020000001	Mayfield Hts Solon	OH	44124	3/16/2011	Quick call....Reviewed the Butrsn indication and patient type with doc. He said he tried it and had no complaints. I asked him to keep prescribing for appropriate pateints. Ask him for 2 patients per week. No commitment,
PPLPMDL0020000001		OH	44139	3/16/2011	Spoke with Helene (pharmacist) who said that while she did receive the Butrans auto-shipment, she sent it back after not seeing a prescription for 30 days. She said it was too much money to keep on the shelf while not seeing any activity for it. I asked if she would consider getting just one box of the 5 & 10mcg strengths in again, she said she would consider keeping some on hand if she starts to see prescriptions, but otherwise she will wait. Offered OxyContin savings cards but Helene said they do not keep savings cards there. She said "It is easier" if the doctors give them out with the prescription. She said they just end up sitting on her shelf & don't end up getting used. Helene also said that they do not stock OxyContin at that location.
PPLPMDL0020000001	Cleveland	OH	44114	3/16/2011	i asked dr if he started 1 patient on Butrans? dr said not yet,he's going to be slow to start as he's not comfortable prescribing new medications.dr said he is watching what dr.katz(his colleague in office) does with Butrans and he will think of a patient to start on Butrans.we discussed Butrans initiation guide and who's appropriate for Butrans and i asked dr to just think of ONE patient to start on Butrans.dr said he will consider Butrans and said to be patient with him.i recommended Senokot-S
PPLPMDL0020000001	C. Falls	OH	44223	3/16/2011	Spoke with Larry and asked if he has seen any movement from the Pain Clinic he said he had not. I told him I had just come from there and spoke with Glenn and found out Dr. Ali was writing but he was still hesitant to order until a RX comes in.
PPLPMDL0020000001	Cleveland	OH	44111	3/16/2011	Spoke with Wael, we discussed the Butrans FPI, initiation guide and medication guide. He thinks that Drs are really going to love Butrans and he expects it will do well. He said that he liked the fact that it is a CIII long acting.
PPLPMDL0020000001	Cleveland	OH	44104	3/16/2011	We discussed how to instruct the patient on proper application, use and disposal. We reviewed OxyContin as an option when Butrans may not provide adequate analgesia. Reminder to recommend Senokot S with opioids i talked to dr about patients he feels that are appropriate to start on Butrans,showing Butrans initiation guide and we discussed insurance coverage.dr said he doesnt have a lot of patients on opioids but does have some patients on tramadol,vicodin and percocet,and he likes that Butrans is transdermal and dosed once weekly so he will consider this when seeing patients.we discussed Butrans insurance coverage for commercial plan patients and medical patients.i recommended senokot-S
PPLPMDL0020000001	Cleveland	OH	44106	3/16/2011	dr told me he started 2 more patients on Butrans.we discussed why he chose Butrans for these patients and what they were taking for him to consider Butrans as an option.i showed dr Butrans initiation guide and asked him to continue starting more patients on Butrans, who are currently taking short-acting opioids,but not controlled.dr said he would do that and we discussed managed care coverage for Butrans.
PPLPMDL0020000001	Cleveland	OH	44114	3/16/2011	i talked to john,PA,about patients he feels are appropriate for Butrans and john said he's recommending Butrans,to dr katz and dr marshall(all in same practice,for patients on Vicodin or Percocet that are already at 2-3 pills a day and not controlled and asking john for more pills.john said he thinks once weekly dosing is easier for some patients and the fact that Butrans is a patch,he likes that technology being a transdermal delivery.i showed john Butrans initiation guide in the discussion and Butrans patient savings cards.i recommended Senokot-S
PPLPMDL0020000001	Independence	OH	44131	3/16/2011	Dr Trickett said she just recently had a patient for whom she thought of Butrans, but the patient had no insurance, so she said she ended up not prescribing it for him. I reminded her of savings cards. She said she remembers but even with that it was too expensive for that patient. I asked what she liked about Butrans & she said she likes that it is transdermal & that patients only have to apply it once a week. She said she also likes that buprenorphine is a "different" molecule. Reviewed commercial insurance coverage. She said she would continue to look for patients for Butrans because she really does like the idea. Reminded her of OxyContin for patients beyond Butrans 20mcg/hr & gave her new savings cards. Also delivered Ryzolt 2-3-1 reminder and gave savings cards.
PPLPMDL0020000001	Cleveland	OH	44106	3/16/2011	worked pain management dept,left information for family medicine and internal medicine attending physicians.
PPLPMDL0020000001	Beachwood	OH	44122	3/16/2011	Spoke briefly with Vickie (nurse) who said that Dr Yokiel has been prescribing Butrans & she has been giving out the patient information booklets. She asked for more of them, so I provided another stack. She did not know specifics about patient types he has been trying it on & suggested I come back Friday morning to catch Dr Yokiel
PPLPMDL0020000001	Bedford	OH	44146	3/16/2011	Dr Haddad asked me if I was certain that worker's comp was paying for Butrans. I told him that although it is not officially "covered" at this point, that they have been paying for it. He said he prescribed Butrans for a patient who has Medicaid but he prescribed Butrans for a worker's comp issue for the patient for her back pain so the patient tried to fill the prescription using worker's comp. Dr Haddad said they would not cover the Butrans. I asked if I stated why or if it said that the patient had to have failed anything in particular but Roberta said it did not say anything like that, just that Butrans was not covered. I let them know I would look into this. Discussed commercial coverage & reminded him of savings cards. He said he is trying to prescribe Butrans & said he would not give up on it.
PPLPMDL0020000001	Bedford	OH	44146	3/16/2011	Dr Moufawad said he had a patient who was taking 3 Vicoden per day who he started on 10mcg Butrans. He said the patient reported back that he was feeling "woozy" from it, so Dr Moufawad switched him to 5mcg & has not heard any further complaint from the patient. He said he will continue to prescribe Butrans. He also added that he would really like to take part in any type of round-table discussion locally that might occur regarding Butrans. He said that he is interested to find out what other physicians are using as supplemental analgesia for patients as he said that ibuprofen & acetaminophen will likely not work for all patients. I reminded him of the ability to titrate dose upward every 3 days as well. Also spoke with Amber who said she just got a prior authorization for Butrans for a worker's comp patient. She said it was the first one she has gotten but that Dr Moufawad has written for other BWC patients with no problems. She said she would let me know how it turned out
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/16/2011	Reintroduced Butrans to Dr. Bicak. She gave me limited time and encouraged me to schedule a lunch. I asked her how many time a week she prescribes low dose Vicodin/Percocet and she said quite a bit.
PPLPMDL0020000001	Fairview	OH	44111	3/16/2011	Spoke with Tom, he did get the 5 and 10mcg doses of Butrans in stock. He has not see any scripts yet. He explained to me that they have recently changed their pharmacy in that they now only serve CCF employees and CCF patients. So he said they are a bit limited in the amount of patients they see. He thinks that once the CCF Main campus Dr get on board he will start seeing it more at Fairview. We reviewed the Butrans patient medication guides and how to instruct patients about proper use and application of Butrans. I reminded him that OxyContin is a long acting option when Butrans may not provide adequate analgesia.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/16/2011	Talked to Dr. Sable briefly through the window as I was speaking with Dr. Ali. I had the opportunity to ask him if he prescribed Butrans yet and he said he had not.
PPLPMDL0020000001	Westlake	OH	44145	3/16/2011	Quick call at window as Dr was way behind. Angela asked the Dr if she had any questions about Butrans. Dr asked if we had a patient assistance program yet for Butrans. I told her we did not. and asked if she had any other patients in mind for Butrans that might have commercial insurance. She said no.
PPLPMDL0020000001	Sagamore Hills	OH	44067	3/17/2011	Introduced Butrans, delivering 5 core messages & alerting him to box warning. He asked about adverse events- I showed FPI section 6. Presented initiation guide which he said was helpful. He said Butrans sounded like something he could use. Discussed importance of appropriate patient selection. He said he does use OARRS & is careful when prescribing opioids so he is comfortable doing so. He asked about supplemental analgesia, so I showed FPI 2.4. Discussed ability to titrate every 3 days. He asked if he could use in fibromyalgia patients. I told him there is no specific etiology that must be present & reviewed indication of moderate to severe chronic pain. Reviewed managed care & savings cards. Recommended OxyContin for patients beyond Butrans 20mcg. He said he does think OxyContin is a good option for some patients.
PPLPMDL0020000001	Independence	OH	44131	3/17/2011	Introduced Butrans to Dr Faiman, delivering 5 core messages & alerting him to box warning. He said he likes to use long-acting pain medications for chronic conditions because "it just makes sense". He said he is always open to trying new medications. He asked if Butrans was similar to Duragesic. I told him we have no comparative data & that patients on fentanyl were excluded from our studies. Presented initiation guide & showed page 6. He said that helped him position Butrans better. He asked about adverse events so I showed FPI section 6. He also asked about managed care, so I reviewed coverage & savings cards for appropriate patients. Dr Faiman said he would try Butrans on some of his patients in chronic pain. I asked if I could follow up in one month & he said yes. Also discussed OxyContin as an option for patients beyond Butrans 20mcg. He said he is comfortable with OxyContin & likes that it is long-acting.
PPLPMDL0020000001	Cleveland	OH	44109	3/17/2011	dr and i discussed appropriate patients to start on Butrans while looking at Butrans initiation guide.dr said she will continue to think of Butrans as an option for patients,she just has to find a commercial plan patient or workers comp patient as thats the easiest.i asked dr what patients say to her when the pills they are taking arent controlling pain? dr said patients just tell nurse or her in exam room that the medication they have isnt working and they want something else.i asked dr to remember Butrans for those patients like that,taking short-acting opioids and showing Butrans initiation guide,that dr can start on Butrans and not increase dosage strength of medication or increase dosing frequency.dr said she will do try that in a couple patients.
PPLPMDL0020000001	Sagamore Hills	OH	44067	3/17/2011	Introduced Butrans to Dr Lenox, delivering 5 core messages & alerting him to box warning. He said that the fact that Butrans is CIII is the most important aspect of it to him. Reminded him that Butrans is still an opioid & therefore does still carry abuse & addiction potential like all other opioids. Discussed appropriate patients & positioning, managed care/cost, savings cards, & disposal. He asked about drug-drug interactions & adverse events so I showed FPI sect 6 & 7. Told him maximum dose is 20mcg/hr & we recommend only one transdermal system at a time. He said it made sense to use two of the 5mcg dose if titration to 10mcg was necessary. I told him this was not recommended as we have no studies to support usage of two systems simultaneously. Dr Lenox said he is interested in attending a dinner program for Butrans when we have them. Recommended OxyContin for patients beyond Butrans 20mcg & Senokot-S for opioid-induced constipation. He said he will be prescribing Butrans.
PPLPMDL0020000001	Cleveland	OH	44103	3/17/2011	dr said she keeps thinking of Butrans as an option for patients but noone has wanted to get off pills and try Butrans.i told dr to NOT think of patients who are doing well on short-acting opioids,but to consider Butrans for patients calling into her office saying the pills are NOT working and they are still in pain,those could be appropriate patients to start on Butrans.i showed dr Butrans initiation guide and we discussed this information again.we discussed medicaid and commercial plan coverage too for Butrans
PPLPMDL0020000001	Cleveland	OH	44107	3/17/2011	Spoke with Nick, we reviewed the Butrans FPI, and medication guide. He had heard about Butrans at another location. He did not think they had it in stock at this store and has not seen any scripts for it yet. We discussed the indication and who the appropriate patients for Butrans are per the FPI. Reminder about OxyContin as a Q12hr option and we reviewed the conversion guide. Reminder to recommend Senokot S.
PPLPMDL0020000001	Sagamore Hills	OH	44067	3/17/2011	Quick call with Dr Gemma. Introduced Butrans. She said he had already spoken with Dr Lenox who had filled her in from our conversation about it. She said she was excited to try it on patients & that she would be using it. She said she liked that it is CIII & is transdermal. Dr Gemma asked about side effects, so I showed FPI section 6. She asked how it can be abused. I told her because it is an opioid it is abusable & potentially addictive, like all opioids. Told her maximum dose is 20mcg & that we only recommend wearing one system at a time. OxyContin savings card reminder for appropriate patients & recommended Senokot-S for opioid-induced constipation.
PPLPMDL0020000001	Brooklyn	OH	44130	3/17/2011	Spoke with Renee' who said they still have Butrans 5 & 10mcg but have not seen any prescriptions yet. Reviewed appropriate patient types/positioning & indication. I asked if Renee' could suggest any particular practitioners who treat patients who fit the indication for Butrans. She mentioned Drs Rutkowski, Dr Nickels, Dr Kavlich, & Dr Thomas Craig. Presented OxyContin savings cards. Renee' said they do stock some there, but not all strengths. Discussed the importance of appropriate patient selection. Renee' said she wishes more physicians would utilize OARRS to help them identify inappropriate patients.
PPLPMDL0020000001	Cleveland	OH	44113	3/17/2011	i talked to dr about Butrans initiation guide again and asked if he started any patient yet on Butrans.dr said not yet but he has a few patients in mind for Butrans and will be seeing them next week so he's going to discuss Butrans with them.i asked what these patients were taking that dr would consider Butrans? dr said vicodin and percocet patients.i told dr that was great and we discussed insurance coverage again for workers comp and commercial plan patients using Butrans savings cards.

PPLPMDL0020000001	University Hts	OH	44118	3/17/2011	Reviewed the Butrans positioning and indication. I asked doc if he had an opportunity to review the initiation guide or prescribe Butrans. He said not yet. I asked him to review the guide and FPI and try Butrans for a BWC
PPLPMDL0020000001	Westlake	OH	44145	3/17/2011	Quick call as Dr was passing by window. He mentioned that he prescribed Butrans for a patient. I did not get the chance to ask him more about this. I asked Laura about the patient, she did not remember what the patient was already on. I asked if the patient got a Butrans savings card and she said yes.
PPLPMDL0020000001	South Euclid	OH	44121	3/17/2011	Spoke to Amanda about the stocking of Butrans. Confirmed the stocking of 5 and 10mcg and that they have seen a script. She looked it up and confirmed that Dr. Laham wrote the script but wrote it incorrectly ("1 Butrans patch"). Patient was able to get Butrans filled through caremark for \$15. I reviewed the application and disposal process. She still had initiation guide as a reference.
PPLPMDL0020000001	Cleveland	OH	44121	3/17/2011	Quick call with Drs. Flagg and Stein. I reminded them of the Butrans indication and for use in opioid naive or for patients on low dose short acting. Stein asked about the dosing and I went over the initiation dosing. Flagg asked about the coverage. I explained the commercial coverage and the savings cards for those patients.
PPLPMDL0020000001	Westlake	OH	44145	3/17/2011	Dr has not yet seen back the one patient he had in mind for Butrans. I asked if he had any other chronic pain patients on low dose vicodin who would be appropriate for Butrans. He said that most of his patients taking vicodin or percocet are taking it with OxyContin or LA morphine as breakthrough medication. I asked if he could think of just 2 patients who would be appropriate for Butrans. I reviewed the formulary grid for OxyContin and reminded him to recommend Senokot 5 with opioids.
PPLPMDL0020000001	Cleveland Hts	OH	44118	3/17/2011	Discussed the indication and positioning of Butrans. I asked doc if he has any patients that could benefit from a once a week CII for their pain. He said sure but patients don't want to give up their pills. I asked him to try Butrans for patients that may be taking non-opioid analgesics instead. Asked him to give a savings card to commercial patients.
PPLPMDL0020000001	Cleveland	OH	44109	3/17/2011	I showed Dr Butrans initiation guide, asked who is the Butrans patient in doctors mind? Dr said he thinks someone taking short-acting opioids around the clock but pain isn't controlled. I told Dr that was a good place, showing initiation guide I asked Dr to think of 2 patients to start on Butrans who are saying pain isn't controlled with short-acting opioids and perhaps requesting a different medication. Dr said he will try that and I asked Dr to consider a workers comp patient and commercial plan patient as that's easiest for doctor.
PPLPMDL0020000001	Cleveland	OH	44113	3/17/2011	I talked to Aaron, Pharmacy Manager, about Butrans stocking and he said he really was waiting until he saw 1 script of Butrans before he ordered the medication. However Aurora, Dr. Bohls med assistant called him after my lunch last Thursday and asked him to order all 3 dosage strengths of Butrans as both doctors were going to prescribe Butrans. I told Aaron I appreciated him doing that as this will make it much easier on the patients, the doctors office staff and him as a pharmacist. We talked about Butrans application dvd/booklet and insurance coverage for Butrans
PPLPMDL0020000001	Northfield	OH	44067	3/17/2011	Quick call- introduced Butrans with 5 core messages. Also alerted her to box warning. She asked about managed care, so I reviewed coverage & savings cards. She said she would use it & is open to trying "new" products. OxyContin savings cards reminder & recommended Senokot-5 for opioid-induced constipation.
PPLPMDL0020000001	Cleveland	OH	44109	3/17/2011	I talked to Dr about patients currently taking opioids and where Butrans was an option. Dr said he had some patients in mind but they couldn't get approval because of Medicaid Prior Authorization requirements. I asked Dr to think about 2 patients we discussed but with commercial insurance or workers comp. Dr agreed to do so. I recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44109	3/17/2011	worked pm&R dept-see call notes, worked neurology and oncology dept-had to leave Butrans fpi, initiation guide, patient information booklet and my business card for each physician within these 2 departments. I also left OxyContin fpi's and conversion guides for doctors.
PPLPMDL0020000001	Cleveland	OH	44113	3/17/2011	I talked to Dr about patients he feels are appropriate to start on Butrans. Dr said he hasn't started anyone yet as he's thinking of patients that are on 4 pills of Vicodin, not controlled and need a baseline opioid. He thinks that's where Butrans is for his patients. I asked Dr does he see those patients often? Dr said not a lot.
PPLPMDL0020000001	Lyndhurst	OH	44124	3/17/2011	Doc said that she shares a patient with Dr. Dewes that has been prescribed Butrans. The patient "loves" Butrans, when she usually does not like most products. I asked doc to prescribe Butrans after patients have been on tramadol. She thought that was a good place. She likes to initiate patients on a short acting before a long acting. Reminded her of the patient types for oxycontin and ryzolt as well.
PPLPMDL0020000001	Mayfield Hts	OH	44124	3/17/2011	Spoke to Sandy about to stocking of Butrans. He said he did get a script for 10mcg about one month ago. He does not recall who the prescriber was but did not recall any issues either. I reviewed the application and disposal process and reminded him that eligible patients can save up to \$40.
PPLPMDL0020000001	South Euclid	OH	44121	3/17/2011	Quick call with Drs. Flagg and Stein. I reminded them of the Butrans indication and for use in opioid naive or for patients on low dose short acting. Stein asked about the dosing and I went over the initiation dosing. Flagg asked about the coverage. I explained the commercial coverage and the savings cards for those patients.
PPLPMDL0020000001	Barberton	OH	44203	3/17/2011	Dr. Patel told me he has initiated Butrans therapy to at least three patients and has been pleased with their feedback so far. He asked about a patient who he was seeing later that day who was on 40 mg of OxyContin daily. I referred to the titration guide and showed him the chart and he noted to start that patient at 10 mcgs.
PPLPMDL0020000001	Westlake	OH	44145	3/17/2011	Dr said he has 2 patients currently on Butrans and they are both doing well. He started them on the 5 mcg dose. I asked about how he will titrate and he said he may titrate one of the patients to 10mcg Butrans. He agreed to start at least one new patient this afternoon on Butrans. I spoke with all of his nurses and MAs and we reviewed the Butrans FPI, initiation guide and medication guide. We discussed opioid induced constipation and Colace and Senokot 5 as options.
PPLPMDL0020000001	Cleveland	OH	44113	3/17/2011	Dr said he started a patient on Butrans. I asked why Butrans? Dr said patient was on tramadol, not controlled and still in pain and asking for something different so Dr tried Butrans 10mcg/hour. I asked Dr what was the opioid patient was taking? Dr said tramadol. I asked Dr what insurance did patient have and Dr said this was a workers comp patient. Dr said he's going to think of Butrans for patients who have never been on an opioid instead of going to short-acting tramadol and those patients he has on tramadol but tell him its not working. I told Dr that was great and I would see him next week
PPLPMDL0020000001	Barberton	OH	44203	3/17/2011	Spoke with Cathy, she said a RX came in from Dr. Patel. I reiterated the importance of the copy cards and explained the savings behind them. <font color=blue><b>CHUDAKOB's query on 03/27/2011</b></font>What type of information would you like your pharmacists to tell their patients regarding Butrans. This might be a good next call objective. What do you think? <font color=green><b>LAPMACA's response on 03/28/2011</b></font>I think that's great! Thanks! <font color=blue><b>CHUDAKOB's query on 03/28/2011</b></font>So what information would you like your pharmacists to tell their patients about Butrans? <font color=green><b>LAPMACA's response on 03/30/2011</b></font>I want them to be able to answer general questions and fluently be able to cover how it is applied and disposed. <font color=blue><b>CHUDAKOB added notes on 04/01/2011</b></font>Great stuff? This is the kind of information we have to make sure nurses/pharmacists are telling their patients.
PPLPMDL0020000001	Parma	OH	44134	3/17/2011	Dr Hernandez asked if he could call in prescriptions & refills for Butrans. I told him he could as it is a CII medication. He said that he has been prescribing it a lot for patients who were taking Vicoden at low doses. I told him this sounded like an ideal patient type to start with. Reviewed application, rotation, heat warning, and adhesion (including taping edges with first aid tape or covering with Bioclusive or Tegaderm). He told me he has been giving out the savings cards where appropriate as well as patient information booklets which his patients like. Gave him more and also discussed DVD option. He asked for a few copies & said he would have some of his patients watch it for instructions. He also asked if we had demo patches, so I showed him one for him to feel and assess. Reminder for OxyContin where appropriate & recommended Senokot-5 for opioid-induced
PPLPMDL0020000001	Cleveland	OH	44111	3/17/2011	Spoke with Weal, he requested samples of Colace and Senokot 5. He said I should talk to the family practice across the street regarding Butrans. He said they prescribe Duragesic and thinks Butrans may be a good option for their vicodin patients. He ordered the 5mcg Butrans and got it in stock today. Reminder about OxyContin as a Q12hr option and he said he will be sure to recommend Senokot and Colace to his patients.
PPLPMDL0020000001	Lyndhurst	OH	44124	3/17/2011	Discussed the indication and positioning of Butrans. I asked her what would be the protocol for therapy after a patient fails on tramadol (LA or SA). She said she might still want to start them on a short acting vicodin. She would not want to give them anymore analgesia than absolutely necessary. I asked her to prescribe for patients after 2-3 tabs of vicodin. She agreed. Reviewed the oxycontin and ryzolt patient types.
PPLPMDL0020000001	Bedford Heights	OH	44146	3/18/2011	Introduced Butrans to Dr Hochman, delivering 5 core messages & discussing box warning. He asked about contraindications, adverse events, QTc prolongation, drug interactions. I showed FPI sections 4, 6, 7, & 12.2. Also discussed use in patients with hepatic impairment. He said that he likes that Butrans is a CII so that he can call it in. He asked if Drs Moufawad, Yokiell, & Tabbaa have used it yet as he follows guidelines of pain management specialists & communicates with them daily. Dr Hochman said he is not a pain management specialist himself & therefore doesn't like to "be the first one" to start writing a medication. Let him know that I work with each of those physicians & each of them has started patients on Butrans. He said Butrans definitely sounds like something he will be prescribing in appropriate patients. Discussed managed care & savings. Also discussed OxyContin as an option for appropriate patients beyond Butrans 20mcg. He agreed it is a good option for some patients
PPLPMDL0020000001	Parma	OH	44129	3/18/2011	Quick call with pharmacy tech who said the pharmacist was busy assisting customers on the phone & could not see me. Reviewed Butrans indication, appropriate patients/positioning, and once-a-week application. She said Steve had sent back their autoshipment & that they have not seen any prescriptions so far. She did not have any recommendations of physicians to discuss Butrans with but said to stop back as Fred or Steve might have
PPLPMDL0020000001	Parma	OH	44129	3/18/2011	Quick call with Jen between patients. She said they have still not had the "right" patient for Butrans due to either insurance or patients wanting to stay on Vicoden. Reviewed appropriate patient type/positioning with Dawn. She said that by the time patients get to them, they are already on 3 5mg Vicoden per day. I told Dawn these may be appropriate Butrans patients. Dawn said the patients don't want to "give up" their Vicoden. I asked her why they allow patients to choose that instead of telling the patient what they need to do. She said that was a good point. Discussed appropriate patients, patient information booklets, & reminded her of savings cards. Also offered Dawn a DVD on application instructions which she said she would keep on hand to watch herself & also to show patients when necessary.
PPLPMDL0020000001	Garfield Hts	OH	44125	3/18/2011	Quick call with Dr Sadowski. He said he remembers me telling him about Butrans but has not thought to prescribe it yet. Discussed appropriate patient type/positioning. I asked how frequently he sees this type of patient, but he did not answer & went into a patient room. Spoke with Deena, reminding her about Butrans. She said she had two different prescriptions for Percocet right in front of her that Dr Sadowski had written for two patients, so she knows he has a lot of patients that could benefit from Butrans. She said it may take him some time, but he will write it at some point.
PPLPMDL0020000001	Parma	OH	44129	3/18/2011	Quick call with Laura between patients. She said she will only be coming to this location on a fill-in basis after April 1st. This is now their official schedule. She said she has not found the right patient for Butrans. She & Dawn said patients with worker's comp come to them already on 3 Vicoden 5mg per day. I asked why not consider Butrans for them if they ask for an increase in dose or change in medication due to inadequate analgesia. They said patients don't want to stop taking Vicoden. Discussed patient counseling & appropriate patient selection. Also reviewed patient information booklets & DVD option with Dawn.
PPLPMDL0020000001	Warrensville Heights	OH	44122	3/18/2011	Re-introduced Dr Khalafi to Butrans. Delivered 5 core messages & discussed box warning. Dr Khalafi asked how Butrans compares to Duragesic. Told him we have no comparative data & presented initiation guide to help with positioning, asking him to think of the more "moderate" side of pain. Went through FPI section 6 on adverse events & 2.4 on supplemental analgesia. I asked what types of patients he thought of & he said he has some on 4 Percocet per day that he would like to convert to Butrans. Discussed initiation. Dr Khalafi said he doesn't like to prescribe pain medications but does treat a number of patients who have chronic conditions causing pain, so he does write for CII & CIII medications where warranted. Discussed importance of appropriate patient selection & let him know he should be just as cautious in prescribing Butrans as he would with other opioids. Discussed using OxyContin where appropriate for patients beyond Butrans. Discussed managed care/savings cards.
PPLPMDL0020000001	Akron	OH	44333	3/18/2011	Introduced Butrans and the FPI. She said that she is writing a lot of OxyContin and certainly has patients that would benefit from Butrans therapy. The biggest challenge for her at this point is building a patient base since she is new to the area.
PPLPMDL0020000001	Lakewood	OH	44107	3/18/2011	Spoke with Floater, Chuck was not in today. I reviewed the key messages for Butrans, and the medication guide. We discussed how to instruct patients on proper use and application of Butrans. Reminder about OxyContin as a long acting option when Butrans may not provide adequate analgesia. Reminder to recommend Senokot 5 with opioids.
PPLPMDL0020000001	Akron	OH	44333	3/18/2011	I asked Dr. Fouad if he has prescribed Butrans and he said he tried it for a patient but he thinks that it was a state plan. He gave me little time but said he would keep it in mind.
PPLPMDL0020000001	Olmsted Falls	OH	44138	3/18/2011	I reviewed the Butrans 5 key messages and asked Drs thoughts. He said he does think this is something that could fit into his practice and said now that darvocet is gone, he has many chronic pain patients who need another option and don't want to take vicodin around the clock. He asked about cost and we reviewed the managed care and savings program.
PPLPMDL0020000001	Berea	OH	44017	3/18/2011	I asked Dr if he has any chronic pain patients who could benefit from the 7 day dosing of Butrans. He said he might but hasn't seen any new chronic pain patients recently. I asked if he would start just one of these patient on Butrans and he said he would.



PPLPMDL0020000001	Rocky River	OH	44116	3/18/2011	Quick call with Kim, we reviewed the medication guide for Butrans and managed care. I asked if she had any patients in mind who could benefit from Butrans. She said there are probably many patients, but the Doctors don't want to hear what the pharmacist think. We reviewed the OxyContin conversion guide and OxyContin as an option when Butrans may not provide adequate analgesia. Reminder to recommend Senokot S.
PPLPMDL0020000001	Lakewood	OH	44107	3/18/2011	I asked Dr where he feels Butrans might fit in, he said he is not sure yet and has not written Butrans yet. He asked about the Butrans dosing and we reviewed the initiation guide. I asked if he would try just two patients and he said he will.
PPLPMDL0020000001	Lakewood	OH	44107	3/18/2011	We reviewed the key messages of Butrans, I asked where he sees it fitting into his practice, he wasn't sure. We reviewed the various places where Butrans may be appropriate. We discussed opioid naive, patients on tramadol and patients who are taking low dose vicodin or percocet. He does see himself prescribing Butrans for a patient who is either opioid naive or when moving up from tramadol instead of going to vicodin around the clock. He said he has a ton of tramadol patients and he used to try darvocet if their pain was not controlled. He said he will try Butrans. I asked if he would start just 2 patients, he said he would find someone to try Butrans. We discussed OxyContin as a long acting option when Butrans may not provide adequate analgesia. Reminder about Ryzolt as a once a day option for patients on tramadol around the clock. I asked them to recommend Senokot S with opioid scripts and left samples.
PPLPMDL0020000001	Shaker Heights	OH	44122	3/18/2011	Spoke with Nhalia (pharmacist) who confirmed that they did have Butrans 5mcg still in stock. She said she has not seen any activity for Butrans yet & was unaware of any "unbreakable carton" message. Reviewed patient type/positioning for Butrans. She did not have any specific recommendations as to what area practitioners may be interested in hearing more about it. Gave her new OxyContin savings cards which she said they could use.
PPLPMDL0020000001	Beachwood	OH	44122	3/18/2011	Spoke with Elsa (floater pharmacist) who said she was aware of the situation I had been working with Shelly on regarding Rite Aid's system calling Butrans an "unbreakable carton". I asked what the resolution was & she said that the doctor in this case authorized them to dispense all 4 instead of the 2 he had originally written for. Elsa said she was not sure if they could have done an override since the physician in this case authorized dispensing the full carton. She said they would have to see what happens the next time this occurs. Gave her new OxyContin savings cards which she said she would leave for Shelly.
PPLPMDL0020000001	Lakewood	OH	44107	3/18/2011	Quick call, I asked her if she's been able to start a few BWC patients on Butrans. She has not, but said that she will prescribe Butrans and does have a few patients in mind. I asked her to try at least 2 patients and she agreed.
PPLPMDL0020000001	Akron	OH	44333	3/18/2011	Asked Dr. Griffin is she has prescribed Butrans yet and she said she had not. I asked what her hesitations were and she said she was busy but just hadn't seen the right patient and walked away.
PPLPMDL0020000001	Copley	OH	44321	3/18/2011	Had seconds with Dr. Heim as he came up to the counter to talk with a patient. I reminded him that I was carrying Butrans, told him it was once a week and explained what the ideal patient would look like. I focused on low dose hydrocodone since the nurse Jen had told me he is still writing quite a bit.
PPLPMDL0020000001	Copley	OH	44321	3/18/2011	Dr. Machado continues to show hesitation with the molecule Buprenorphine. He has limited clinical experience and lacks confidence despite my numerous presentations. He has told me that he will continue to support me with OxyContin.
PPLPMDL0020000001	Solon	OH	44139	3/18/2011	Met with MH and had conference call with Travis (Contracting Purdue) and Kim (Rebate MH) to discuss the client list and the breakout of plans for MH. Mike and Tony explained the breakout of lives in a new report that Travis thought would work for Purdue. Travis then asked them to provide a bill or invoice for what we own them per plan breaking out the lives with the 60% qualifier. Mike said to speak with Deb Sands about the location of our appointment for AMCP in Minneapolis. We reviewed the MKT pieces for which MH said they can't provide co-pay amounts as most of the lives pay co-insurance and this changes per region. He also said the % of duals vary per region per state as well as change monthly.
PPLPMDL0020000001	Akron	OH	44333	3/18/2011	Quickly reiterated what the ideal patient looked like. I asked him if he felt comfortable identifying a Butrans patient and he said he did before walking away.
PPLPMDL0020000001	Beachwood	OH	44122	3/18/2011	Quick call with Dr. Yokiel. He said he has not heard any patient feedback regarding Butrans yet. He said he has written 3 prescriptions for it. I asked him if he was holding off on prescribing Butrans for more patients until he hears feedback but he said that he will continue to prescribe in the meantime. He said that with his patients, if they had anything negative to report, he would have already heard it, as they are quick to tell him if something is not working or if insurance isn't covering it.
PPLPMDL0020000001	Solon	OH	44139	3/21/2011	Dr. Zaidi said he had not yet prescribed Butrans, so I asked him why. He said that he hasn't seen the right patient. I reminded him that he has said that he likes the once-a-week option for patients. He agreed. I asked him what patient type he was looking for. I asked if there was a specific condition or current medication regimen that he was looking for. He said not really. I asked him if the taper was still a cause of concern for him. He said no & that he would simply just not put his patients on high doses of opioids on Butrans, but would use it for patients on lower doses. He added that he does get some new patients who have never been on opioids before & that is where he will use Butrans. I asked when he expects to see one of those patients. He said he is confident that by my next visit he will have seen 1 or 2 to give me feedback on. Reviewed managed care/savings. Discussed OxyContin for appropriate patients & went over savings cards with him & Julie.
PPLPMDL0020000001	Cleveland	OH	44113	3/21/2011	I said to dr, based on our conversation last week about Butrans, dr what benefits do you even see in Butrans for your patients? dr said he likes that Butrans is transdermal, once weekly dosing and a CIII opioid. dr said I have 1 patient in mind, on 4-5 tabs of Vicodin and he's not happy taking pills so I think Butrans would be a great option. Pam, Doctors nurse, said this patient needs education on Butrans so he's coming soon to see them and Pam is going to go through Butrans patient information booklet. I showed Pam and dr Butrans patient application dtd/patient information booklet and asked if this would be valuable as an educational tool for this patient? Pam and dr said that would be great and I asked dr to consider another patient, so trying Butrans in 2 patients, that are taking short-acting opioids and not happy with current medication or saying their pain is worsening, give Butrans a try there, dr said he will start 1 patient and see what happens, then consider another patient.
PPLPMDL0020000001	Chagrin Falls	OH	44023	3/21/2011	Spoke with Ben (pharmacist) who said they had not yet seen any Butrans prescriptions, but they do have the 5 & 10mcg in stock. Reviewed appropriate patient type/positioning. Also gave him new OxyContin savings cards & reviewed usage, reminding him they cannot be used for any type of government insurance, including Medicare & Medicaid. He was extremely appreciative for the savings cards & said he always welcomes savings opportunities for his customers.
PPLPMDL0020000001	BEACHWOOD	OH	44122	3/21/2011	Spoke with Marc (floater pharmacist) who verified that Butrans 5mcg & 10mcg are both stocked at this location. Reviewed indication, dosing, appropriate patient type/position with him. Also gave new OxyContin savings cards & explained how they are used. Also reminded him they cannot be used for patients with any type of government insurance, including Medicare & Medicaid. Marc said he would leave my information for Sandy.
PPLPMDL0020000001	Parma	OH	44129	3/21/2011	Quick call with Dr Taylor through the window. She said she doesn't think she has worked since my last visit to her. Butrans appropriate patient/positioning reminder. Also spoke with Mary about savings cards & managed care & scheduled next available lunch.
PPLPMDL0020000001	Parma	OH	44129	3/21/2011	Dr Roeheny saw me and said "Butrans", right? I asked him if that meant he had prescribed it. He said no, but that I should be happy that he remembered the name because that is the first step. He then said "Dosing: 5mcg" & asked how often. Reminded him it is a once-a-week transdermal system. Also reviewed other strengths & titration ability every 3 days to a max of 20mcg. Reminded him that in our previous discussion, he had said that he starts many new patients on Vicoden per week & that those are potential Butrans patients, if appropriate. He said that he remembers that & that I have "done everything right" & that now he "just has to write it". Saw the Butrans savings cards on a table in his office & pointed them out to him, reminding him of \$15 copay for commercial insurance patients. Also reminder for OxyContin for appropriate patients.
PPLPMDL0020000001	N Royalton	OH	44133	3/21/2011	Quick call with Rosie (technician) who said the pharmacist was too busy to see me today. Reviewed Butrans indication, seven days buprenorphine delivery in one application, delivery system, appropriate patients, & CIII. Also reviewed new OxyContin savings cards & reminded her they cannot be used for patients with any type of government insurance.
PPLPMDL0020000001	Akron	OH	44333	3/21/2011	Introduced Butrans and FPI. Like the other physicians here, Dr. Bacha prefers to refer his patients that require an ATC LAO out to pain management. He was happy to hear about Butrans but there is not a significant place for it at his practice.
PPLPMDL0020000001	Cleveland	OH	44106	3/21/2011	I talked to Margie, Pharmacy Supervisor, about Butrans stocking and margie said she does have all 3 dosage strengths of Butrans yet no scripts and asked me who was writing Butrans? I discussed with her some physicians who are prescribing and told her to please be patient as I appreciate her ordering and stocking Butrans immediately as Margie thinks Butrans can benefit patients. I gave Margie the Medical Education catalogs and we discussed pharmacy section. I asked if Margie is recommending a laxative to patients, when they are taking an opioid? Margie said yes and she recommends Senokot-S, so I gave Margie Senokot-S protocol pad and 2 laminated protocol pads for pharmacy to hang for reference. I asked Margie who are big vicodin writers here at UH? Margie said usually oncology, pain management and family medicine doctors so we discussed specific doctors in each department that she thinks I should talk to about Butrans. I asked Margie to continue recommending Senokot-S.
PPLPMDL0020000001	Cleveland	OH	44113	3/21/2011	worked pain management dept-see call note on dr daoud
PPLPMDL0020000001	Chagrin Falls	OH	44023	3/21/2011	Spoke with Jeff & asked if they had ordered Butrans since our last discussion. He checked his shelves but he said he did not see it. He said he thought he had ordered it after he talked to me, so he was confused why it wasn't there. He said it is possible that someone who didn't know what it was unpacked the order & sent it back. He asked for NDC numbers & wrote them on his order sheet & said he would have them tomorrow. Gave Jeff new OxyContin savings cards & reviewed usage, including that they cannot be used for anyone with any type of government insurance, including Medicare & Medicaid.
PPLPMDL0020000001	Lakewood	OH	44107	3/21/2011	Quick call, Dr has not started anyone on Butrans yet, I asked about those patients he named the last time we talked and he said he has not seen them yet, but he said he will prescribe it. I asked if he would try just 2 new patients this week and he said he would try. I also spoke with Laura and Kim, they agreed to help remind the Dr about Butrans for those patients they had thought of. <font color=blue><b>CHUDAKOB's query on 03/30/2011</b></font>Andrea, is there a better question to ask on a quick call other than asking if the Dr. has prescribed Butrans?<font color=green><b>HOLUBA's response on 04/01/2011</b></font>Dr told me that he had not started anyone on Butrans without me even asking. I try not to open calls in that way.<font color=blue><b>CHUDAKOB added notes on 04/01/2011</b></font>You might want to indicate that in the note. Thanks for the clarification.
PPLPMDL0020000001	Cleveland	OH	44106	3/21/2011	dr gave me a little time to tell her what Butrans was, we discussed Butrans 5 core messages, Butrans initiation guide, patient information booklet and dr asked if Medicaid covered this medication. we discussed Medicaid and commercial plan coverage for Butrans. dr said she has a lot of patients on tramadol that she thinks this would be a better option for, as some patients don't like taking pills around the clock and would prefer a patch. dr said she liked that Butrans was a CIII as that's easier for her to call in refills. dr said she'll talk to me more at my lunch. I recommended Senokot-S.
PPLPMDL0020000001	Akron	OH	44333	3/21/2011	Dr. Richter requested OxyContin saving cards. This was a great segway to talk about when he is prescribing LAO's. I asked him what he is currently prescribing for his patients suffering from fibromialgia and he said he prescribes SAO's when it get to the point where they need something LA he refers them to Pain Management. He said even with OxyContin, he has very few patients.
PPLPMDL0020000001	Akron	OH	44333	3/21/2011	Dr. Shah has initiated several patients on Butrans therapy now. This is a med that really fits into the way he treats chronic pain because he has a very conservative approach, making most his patients Butrans patients. I asked how he felt about continuing to covert patients from low dose hydrocodone to Butrans and he seemed hesitant. Continuing to build his confidence with this product will help gain future commitments.
PPLPMDL0020000001	Cleveland	OH	44106	3/21/2011	worked pain management-see call note on Dr.Hayek, worked Bolwell pharmacy-see call note on Margie, Pharmacy Supervisor and left information for Family Medicine doctors-Butrans fpi, initiation guide, OxyContin fpi, conversion guide and custom formulary grid
PPLPMDL0020000001	Akron	OH	44333	3/21/2011	Followed up briefly on our last Butrans conversation, just as the other docs stated, he refers out over prescribing a LAO. I asked him if he has ANY patients on LA meds and he said he has a handful of patients that he maintains but rather than starting a patient on a LAO he will refer to Pain Management.
PPLPMDL0020000001	Cleveland	OH	44104	3/21/2011	I asked dr, based on our conversation at lunch last Monday, what benefits did he see in a medication like Butrans, for his patients? dr said he likes that Butrans is transdermal, dosed once a week and is a CIII so he can have his medical assistant call in the re-fills which is much easier in his eyes than a CII. I asked dr who's the patient that he believes could benefit from Butrans? dr said he knows that some of his patients on a couple pills a day, that have a negative MRI, still asking him for pills, aren't going to get a re-fill from him so he feels those patients could possibly be started on Butrans. I asked dr to consider 2 patients, showing dr Butrans initiation guide, to get some clinical experience with Butrans. dr said he would think of some patients this week. I recommended Senokot-S.

	Cleveland	OH	44120	3/21/2011	i talked to Stewart,Narcotics Buyer and Pharmacist,about stocking of Butrans and he showed me the 10 and 20mcg Butrans cartons and Shay,Pharmacy Technician and Stewart told me they got their 1st Butrans script and it was from Dr. Rosenfield last week and was for the 10mcg/hour.We talked about doctors in area prescribing a lot of Vicodin and Percocet who might be interested in hearing about Butrans and i left 4 patient information booklets/dvds as Stewart said that was a great idea for the pharmacy staff to partner with patients and hand those out when dispensing Butrans,if patients didnt get it from doctor.I asked Stewart if he had any cash paying patients for OxyContin or commercial plan patients with high co-pays? Stewart said yes.i asked if he would give OxyContin savings cards to those types of patients? Stewart said yes and wanted 1 pack of OxyContin savings cards.i left Senokot-S protocol pad,laminated protocol pad for pharmacy and recommended Senokot-S
PPLPMDL0020000001	Fairlawn	OH	44333	3/21/2011	Dr. Domdera has still not prescribed his first Butrans patient. He said he is hesitant because it is such a new drug. I left him a large FPI and explained that all the safety information and risks associated with Butrans therapy were disclosed in it and encouraged him to read through it before next Monday. He agreed.
PPLPMDL0020000001	Parma	OH	44129	3/21/2011	Quick call with Dr Gigliotti who said he was overwhelmingly busy this afternoon & "not handling it well". He said he has not written Butrans yet & apologized, saying that I have "sold" him on it but that he just hasn't seen any patients fitting the indication since my visits. I reminded him that any patient for whom he is thinking of starting on Vicoden may be an appropriate Butrans patient. He said he remembers. I let him know i would return another day for a more detailed discussion- he agreed.
PPLPMDL0020000001	Cleveland	OH	44106	3/21/2011	dr said he hasn't started anyone on Butrans but remembered it's a CIII,transdermal,patients who are virgins and never tried opioids can try the lowest dose of 5mcg/hour or his patients taking short-acting opioids can start on the 10mcg/hour.dr said can patients still take their short-acting opioids while on Butrans or do they have to be stopped completely? i showed dr Butrans fpi,noting initiation of therapy and maintenance of therapy sections and told dr that up to him and we discussed proper tapering of short-acting opioids before starting on Butrans.dr told me he remembers the 3 dosage strengths are 5,10 and 20mcg/hour and said he has a lot of patients on tramadol and will definitely try Butrans.dr said he has been traveling and in/out of office so much this month he hasnt started any patients but will start some and let me know.dr is going out of town this wednesday for a week,so i told him i would follow-up next week and see how many patients he started.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	3/21/2011	dale said dr.shen has started 3-4 more patients on Butrans,per his recommendation and Yasmin,Dr Shen's medical assistant,has recommended that patients get started on Butrans as their short-acting opioids arent working to control their pain and some of the patients just dont like or want to take pills around the clock for their chronic pain.Dale said he talks to Dr.Shen and Dr.Daoud about every patients medication,any changes,etc,he will make recommendations,write the scripts and doctors sign the scripts.I asked what patients Dale and Yasmin are recommending to be started on Butrans? Dale explained that they are all on short-acting opioids:tramadol,vicodin and percocet.i showed Dale Butrans initiation guide and we discussed proper tapering and initiation of Butrans.we discussed Butrans coverage for medicaid and workers comp patients.
PPLPMDL0020000001	Parma	OH	44129	3/21/2011	The Butrans FPI was sitting on top Dr Ortega's desk when i walked in. He told me my timing was perfect & that he had a question for me. He said he has a patient who has had multiple surgeries for various conditions. She is currently taking 20mg q12h OxyContin. Dr Ortega said his main goal in this patient is to gradually get her down to lower doses of pain medication. He asked me if he could prescribe Butrans for this patient. Showed initiation guide pg 6, walked him through table, & explained taper. I asked if he felt the taper would be an issue & he said no. Let him know max dose of Butrans is one 20mcg/hr system & that patients taking over 80mg equivalent morphine may not get adequate analgesia from Butrans. He said he does not like patients to be on over 20mg q12h OxyContin. He also said he likes OxyContin because it is q12h instead of q4h or q6h. He said he feels with q4-q6h, patients "think about their pain" too frequently so he likes long-acting medications as they avoid this.
PPLPMDL0020000001	Fairlawn	OH	44333	3/21/2011	Spoke with Jessica, she said she doesn't believe that she has seen any prescriptions come in yet. I told her the message I was focusing on with my physicians and what an ideal Butrans patient looks like. She was confident it would start moving soon.
PPLPMDL0020000001	Euclid	OH	44119	3/21/2011	I reviewed the Butrans indication, CIII status, 7 day application. He said he has not written it yet but he will. He reminded me that he said he would write for opioid naive. The problem, he said, is that he has a lot of medicare and medicaid. I asked him to try Butrans in a commercial or BWC patient this week. Also reviewed the oxycontin patient type.
PPLPMDL0020000001	Cleveland	OH	44130	3/22/2011	Dr Fedorko said he forgot about Butrans. I asked how he could forget after he had been so excited about it- He said he is old & forgets things. I reminded him of the patient he had mentioned to me during my lunch. He said that she is now in the hospital & on fentanyl. I reminded him that patients on fentanyl may not be appropriate for Butrans. He said he would like to get her on "less" opioid. Showed initiation guide pg 6 & asked about how many patients he starts on Vicoden. He said he does this more than he would like to because he does not like to prescribe pain medications. I told him those were potential Butrans patients & that he could initiate Butrans treatment at 5mcg/hr dose. He said that either today or tomorrow, whenever he sees patients in pain who are appropriate, he will prescribe Butrans because he is anxious to see how it works. Dosing, savings cards, & application site reminders as well. He said to keep coming back to keep reminding him so he doesn't forget again.
PPLPMDL0020000001	Cleveland	OH	44130	3/22/2011	Introduced myself & Purdue's products to Kim (MA). Reviewed Butrans indication, dosing, appropriate patient type/positioning, & delivery system. She said she would leave my information for Dr Berglund along with a request for a lunch or appointment to meet with her. Kim said Dr Berglund will accept information & vouchers but that she rarely meets with reps. Let her know that Butrans was a product that Dr Berglund had not been detailed on yet as it just became available in January. Kim said she would let Dr Berglund know.
PPLPMDL0020000001	Cleveland	OH	44195	3/22/2011	i talked to Curt,Pharmacy Manager,about Butrans stocking,if he has seen any scripts for Butrans and we discussed Butrans application dvd/booklet.Curt asked if i could leave a few booklets/dvd's for pharmacy to give to patients when they get their Butrans prescriptions. I told Curt i could leave 2 Butrans application dvd/booklets today and follow-up in a week,if gone i will leave 2 more if not he can keep those.i asked Curt to recommend Butrans,when talking to doctors,if patients are telling Curt about their pain worsening or not being controlled on short-acting opioids and showed Curt Butrans initiation guide and discussed appropriate patients to start on Butrans.Curt said he will see what he can do and took initiation guide.i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44130	3/22/2011	Spoke with Fran & Terry (MA's) and introduced Butrans. Reviewed indication, appropriate patient type/positioning, dosing, CIII/box warning, & savings cards. They said they would pass along the information to Dr Plecha.
PPLPMDL0020000001	Cleveland	OH	44130	3/22/2011	Discussed how savings cards for each product worked & worked with them to schedule a lunch to speak with Dr Plecha.
PPLPMDL0020000001	Cleveland	OH	44130	3/22/2011	Introduced Butrans to Dr Rogers, delivering 5 core messages & reviewing box warning. I asked him, with him being a vascular surgeon, where he typically uses long-acting pain medications. He said he uses them in patients with painful leg ulcers & amputees. He said any time he feels the patient will need to be on a pain medication for an extended period of time, he will prescribe long-acting instead of short-acting. He said he finds that when patients take short-acting medications multiple times per day, they often wait until they feel pain before taking the medication. He said he liked that Butrans keeps the plasma concentration level relatively constant for days. He also said he liked that it is CIII so he can call in refills. He said he had a working patient who he thinks he may try Butrans for & asked if patients could work while taking it. Reviewed FPI 5.3 & 6. Reminder of OxyContin for appropriate patients beyond Butrans & gave savings cards.
PPLPMDL0020000001	Solon	OH	44139	3/22/2011	met with Denny Yanosick to plan call on Ron Wheeler at DDM. Discussed trying to get Sen-S 60's added to planogram and putting Sen-S 10's on RX end display.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	3/22/2011	Focused on the total office call since the access here is difficult. Dr. Azem came to the window while I was talking with the staff and I asked her if she has had the opportunity to initiate Butrans therapy and she said she had not. However, Lori told me that they have many patients on low dose hydrocodone the Dr. Azem only maintains so she may be interested in converting.
PPLPMDL0020000001	Cleveland	OH	44195	3/22/2011	i talked to dr about Butrans initiation guide and who he feels is appropriate to start on Butrans.dr said he hasn't thought about Butrans and forgot about it and the insurance coverage.dr asked if workers comp covered Butrans? i discussed workers comp,commercial and medicaid coverage for Butrans.i asked dr if he has patients on short-acting opioids,looking at initiation guide,that arent controlled would he consider Butrans? dr said yes he will.i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44195	3/22/2011	worked walker bldg:pain,chronic pain and pm&r dept-see call notes and left information for all doctors that i didnt see-Butrans fpi,initiation guide and my business card
PPLPMDL0020000001	Cleveland	OH	44195	3/22/2011	i talked to dr briefly about the couple patients he started on Butrans and showed Butrans initiation guide.dr said the 2 patients he started on Butrans were patients taking Percocet around the clock and their pain wasn't controlled with the short-acting opioids so he wanted to try Butrans and see if it would work.i asked dr to consider starting 2 more patients that are like that and not re-fill their short-acting opioids,dr said he will.i left Butrans application dvd/booklet as dr wanted 2 of them.i recommended Senokot-S
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/22/2011	Spoke with Erika the pharm tech. Herman the pharmacist was on the phone. I followed up from my last presentation and asked if she had seen any movement and she said she had not. I asked if she would consider ordering at least the 5 mcg and she said they would not until a Rx came in.
PPLPMDL0020000001	Cleveland	OH	44130	3/22/2011	Spoke with Karen & Barb (MA & nurse) who said that Dr Diab is on vacation this week. Reminder of Butrans indication, dosing, delivery system, & savings cards. They both said they do not know why Dr Diab has not prescribed Butrans yet as they agreed that he has many patients who would be appropriate for Butrans. Karen said it may just take some time with him & recommended i come back next Tuesday.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	3/22/2011	Dr. Dilauro said she has written her first Rx of Butrans for an opioid naive patient and has not heard back and assumes they are doing well. I asked if she would continue to think of Butrans for other patients where she would typically write hydrocodone and she said agreed.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	3/22/2011	Told Dr. Dilauro that i wanted to help her identify a specific patient type to start on Butrans. i discussed starting a patient in a case where she would typically write Vicodin 5 mg 2-3 times a day. She said she would consider it for a patient that was coming in later today who had a similar profile.
PPLPMDL0020000001	Cleveland	OH	44130	3/22/2011	Quick call with Colleen (pharmacist). She said they have not dispensed any Butrans yet. Reviewed indication & dosing and reminded her about automatic savings through e-voucher. Also gave her new OxyContin savings cards & discussed usage. Reminded her that patients with government insurance are not eligible for savings cards.
PPLPMDL0020000001	Cleveland	OH	44113	3/22/2011	i talked to dr about Butrans 5 core messages,fpi,initiation guide,application dvd/booklet,Butrans patient savings cards for commercially insured patients.dr asked if Butrans is covered by Medicaid or medicare? we discussed both plans as it relates to Butrans coverage.i asked dr if he had 2 patients,taking tramadol or vicodin that arent controlled and have asked him or his staff for something different? dr said yes that happens a lot.i asked dr to consider Butrans for these patients and give Butrans a fair clinical trial.dr said he will consider it,it comes down to insurance.i recommended senokot-S
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/22/2011	Spoke with Pat and the tech Mike. They said they have not yet seen any movement from Butrans but were hopeful it would pick up soon. They promised to keep the Butrans they had stocked.
PPLPMDL0020000001	Cleveland	OH	44195	3/22/2011	i talked to dr about Butrans fpi,5 core messages,initiation guide, application dvd/booklet and Butrans patient savings cards for commercially insured patients.i asked dr if he had patients taking short-acting opioids that werent controlled and ever asking him for something different or a change in medication? dr said yes that does happen,so i asked dr to think of 2 patients to start on Butrans,based on our discussion and looking at Butrans initiation guide-opioid experienced patients? dr said yes he will give Butrans a try and let me know what happens.i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44130	3/22/2011	Spoke with John who confirmed that they received their autoshipment of 2 boxes of each strength of Butrans. He said he has not filled any prescriptions for it yet but has it ready. Reminded him of e-voucher savings. Also gave him new OxyContin savings cards & reviewed usage, reminding him that they cannot be used for patients with any type of government insurance, including Medicare & Medicaid.
PPLPMDL0020000001	Brooklyn	OH	44144	3/22/2011	Spoke with Michelle who said she has dispensed Butrans 5mcg "a couple" times. I asked who wrote the prescriptions but she said she did not have that information. I asked if she knew if it was anyone local, but she again said she did not remember. Asked who in the area she thought, based on the appropriate Butrans patient type & positioning, may be interested in hearing more about Butrans & she said Dr Deeb. She said he is the only one who comes to mind when thinking of "a lot" of patients on Vicoden chronically. Also gave her new OxyContin savings cards & reminded her that patients with any type of government coverage are ineligible for usage of the card.
PPLPMDL0020000001	Cleveland	OH	44195	3/22/2011	i only got a few minutes with dr after lecture and i asked dr what his thoughts were on Butrans and who were the patients in his mind that could benefit from Butrans? dr said he hasn't started anyone on Butrans but does like that it's a transdermal medication and likes that its dosed once a week.i asked dr if he had any patients on tramadol or percocet that werent controlled and request another medication? dr said yes every day he hears that.i told dr that could be where he considers Butrans,showed dr Butrans initiation guide and asked him to think of 2 patients to start on Butrans.dr said he'll think about it.i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	3/22/2011	worked senior health and wellness center-see call notes on MaryJo Slattery,NP and Dr.Campbell,Director of wellness center;met with Karen Gallagher,administrator who books lunches and she told me ALL lunches have been cancelled with pharmaceutical reps,Karen said to talk to MaryJo and see if i can get a lunch 1x/month or quarterly as Butrans is newer to doctors and staff and that would be valuable to hear about at a lunch

PPLPMDL0020000001	Cleveland	OH	44195	3/22/2011	i talked to dr about Butrans fpi,initiation guide,application dvd/booklet,Butrans patient savings cards for commercially insured patients,workers comp and medicaid coverage for Butrans.dr said she has some patients on tramadol and percocet that arent happy taking pills around the clock for their chronic pain so Butrans could be an option for them.i asked dr if she could just think of 2 patients,looking at Butrans initiation guide who are appropriate for butrans, and give Butrans a fair trial? dr said she will try Butrans and let me know.i recommended Senokot-S
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/22/2011	Introduced Butrans and the FPI. This was a quick window call so i was only able to go over the indication and the once a week dosing.
	Cleveland	OH	44109	3/22/2011	i talked to Ron,Pharmacy Manager,about Butrans fpi,5 core messages,initiation guide,application dvd/booklet,Butrans patient savings cards.Ron said he saw some information from Debbie,the other Full-time pharmacist,but she didnt give him all of the Butrans information so he wasnt completely sure about how often this medication is dosed and he hasnt opened the Butrans 5mcg carton.i asked Ron if anyone has prescribed Butrans yet? Ron said not yet,no scripts,but asked me to come back in a few weeks and check back as he see's so many short-acting opioid scripts from the Metro Senior Wellness Center:dr campbell,dr baker,dr geho,mary jo slattery(np) and Metro Main Campus doctors:physical medicine and rehabilitation,oncology,internal medicine and family medicine physicians so we discussed them and who i was working with to discuss Butrans.we discussed insurance coverage for Butrans and Ron said he does have commercial plans here,but majority medicaid and some workers comp.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44195	3/22/2011	i talked to JoAnne,NP,about patients she feels that are appropriate to start on Butrans and showed Butrans initiation guide.JoAnne said Dr.Covington started a few patients but she hasnt yet so she will keep Butrans in mind for her patients.i asked JoAnne to think of 2 patients,taking short-acting opioids,that arent controlled and are asking her for a different medication.JoAnne said she'll consider that when she see's patients and we discussed insurance coverage for medicaid,workers comp and commercially insured patients. i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	3/22/2011	i talked to MaryJo,NP,about patients she feels can benefit from Butrans.MaryJo said she has patients on tramadol and vicodin that she knows dont like taking a pill around the clock for their pain,so Butrans is a great option being transdermal and dosed once weekly is much easier for some of her patients.i asked MaryJo if she can just think of 2 patients to give Butrans a fair trial in? MaryJo said she will but she has mainly medicare part d patients and Butrans isnt covered on med part d plans,per our last discussion.i asked MaryJo to consider 2 patients with commercial plan insurance where they can use Butrans patient savings cards. MaryJo said she'll think of a few patients like that and see what happens and let me know.we also discussed the fact that Metro has cancelled all lunches within the department,so MaryJo is going to see if they can book a lunch for me as Butrans is a newer product to them and they value the education i provide the office staff.
PPLPMDL0020000001	Cleveland	OH	44195	3/22/2011	i talked to Gail,NP,about Butrans fpi,5 core messages,initiation guide,Butrans patient savings cards for commercially insured patients,application dvd/booklet and workers comp and medicaid coverage for Butrans.Gail said she likes the once weekly dosing,likes that Butrans is transdermal and thinks a patch is much easier for her patients than pills around the clock.i asked if Gail has seen anyone prescribe Butrans yet? Gail said only Dr.Shin has written Butrans,that she knows of,so i asked if Gail could think of 2 patients SHE treats as this is a CII,she can prescribe this medication,if patients are taking short-acting opioids around the clock and not controlled,could she try Butrans in 2 patients? Gail said she will remember Butrans,just hasnt thought about it.i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44195	3/22/2011	i only got a few minutes with dr to discuss Butrans and where dr thinks there's a place for Butrans in his practice.dr said he does have patients on Percocet that arent controlled and when they are taking 4-5 pills a day and not controlled,he thinks Butrans could be an appropriate option.i showed dr Butrans initiation guide and asked him to consider Butrans for 2 percocet patients and try Butrans to get some clinical experience,dr said he will do that.we briefly discussed managed care coverage for Butrans.
PPLPMDL0020000001	Mayfield Heights	OH	44124	3/22/2011	NP said she has been wanting to prescribe a lot of Butrans particularly for elderly patients but insurances are not covering it. i asked her to focus on those with commercial plans. She makes a point to ask patients what kind of insurance they have. She also asked if Butrans is covered on Cleveland Clinic Formulary, Anters(?) i told her i would find out and let her know. She asked about the out of pocket cost for Butrans. i explained that it will vary and is dose dependent. Savings cards can be used for cash paying patients.
PPLPMDL0020000001	Cleveland	OH	44109	3/22/2011	i talked to dr about Butrans initiation guide and asked him who is the patient that he feels could benefit from Butrans? dr said patients on short-acting opioids not controlled and asking him for something different.i told dr that was great and asked if he could think of 2 patients to start on Butrans,like that whether it be tramadol,vicodin or percocet that patients are taking but not controlled? dr said he will consider it,but asked about medicare coverage as he has a lot of medicare part d patients.we discussed commercial plan patients using Butrans patient savings cards,medicaid patients have to meet prior authorization requirements and medicare part d plans arent covering Butrans.i told dr to focus on 2 patients with commercial plan insurance.dr said he will do that and let me know how it goes with patients.i told dr OxyContin is an appropriate option,when patients are above 80mg oral morphine equivalent,wide coverage and OxyContin savings cards for cash paying or commercial
PPLPMDL0020000001	Cleveland	OH	44114	3/22/2011	i talked to Joel,Pharmacy Manager,about Butrans stocking and Joel said he hasnt seen any Butrans scripts so he's waiting to order Butrans.Joel said he doesnt like any of the narcotics and even though this is a patch,it's still a narcotic,so he's not happy with any of them.i told Joel he was right as Butrans is a CII,single entity opioid so the potential for abuse,misuse,overdose are still there as other opioids.i asked if Joel ever counsels patients on their medication management and recommends another medication if short-acting opioids arent controlling patients pain? Joel said he doesnt do a lot of medication management therapy but will talk to patients who are taking Vicodin,Percocet or tramadol and if they arent controlled on their pills,he'll occasionally talk to doctors and recommend a long-acting opioid option.i asked Joel to recommend Butrans for 2 patients,that he trusts and knows arent happy with current short-acting opioid regimen,he said he'll think about it.
PPLPMDL0020000001	Cleveland	OH	44195	3/22/2011	i talked to Joan,NP,about patients she treats that Butrans could be an appropriate option for.Joan said she has some patients on Vicodin,that arent controlled and she thinks a long-acting opioid like Butrans would be a good option.i asked what benefits Butrans offers her patients? Joan said once weekly dosing is easy for a lot of patients,but she has to think of a few patients who are trustworthy to rotate the patches every week and not re-apply to the same skin site.Joan said the fact that Butrans is a CII and she can call in re-fills is easier than a CII.i asked Joan to consider 2 patients to start on Butrans and give it a fair try,she said she'll think of a few patients.i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44195	3/22/2011	i asked dr what he says to patients who tell him in their appointment that their short-acting opioids arent controlling their pain? dr said he will either increase the dosage strength of the short-acting opioid or increase the dosing frequency.i asked dr once he does that,whats next? dr said he will consider a long-acting opioid only if patients pain is severe and not being controlled by short-acting opioids and patient isnt a candidate for surgery,injections,etc.i asked if dr could consider 2 patients who arent controlled on short-acting opioids and instead of re-filling short-acting opioids,start them on Butrans? dr said he will think about it. i asked dr to just give Butrans a fair trial and start with 2 patients.i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44195	3/22/2011	i talked to Kathy,PA,about patients she feels that can benefit from Butrans,showed Butrans initiation guide and application dvd/patient information booklet.Kathy said patients on short-acting opioids that are telling her the pain's not controlled with the q4-6h dosing regimen,she's recommending Butrans to the doctors.Kathy said the challenge is that Dr.Mekhill hasnt started anyone on Butrans,as he doesnt like to prescribe new medications and he doesnt think Butrans has been on market long enough.Dr.Minzter,who kathy see's her patients too,said she thinks Butrans is a great option as a transdermal medication and once weekly dosing is great but hasnt started anyone yet.Kathy said she thinks they just forget about it and are so busy that Butrans hasnt been in their minds.i asked kathy if she would recommend butrans to both physicians or when she's seeing their patients,Kathy said she would and we discussed insurance coverage for Butrans.
PPLPMDL0020000001	Mayfield Hts	OH	44124	3/22/2011	Doc said he has been trying to prescribe Butrans but he is having trouble getting it covered (for commercial coverage). He likes the product and the molecule and wants to precribe it but he can't get it covered even with a PA. I told him patients with commercial insurance will have the best chance for success. Reminded him to give patients a savings card.
PPLPMDL0020000001	Cleveland	OH	44109	3/22/2011	i talked to Paul,Pharmacy Manager,about Butrans scripts that they are seeing from Dr.Shen as 1 patient who had BWC couldnt get Butrans approved.I asked Paul if this was a state BWC patient or employer paid BWC? Paul said it was a self-insured BWC patient so we discussed Butrans and BWC,medicaid patients getting Butrans through Prior Authorization requirements and commercially insured patients being able to use Butrans patient savings cards.Paul said they only have Butrans 5mcg in stock,as these are the only scripts he's seeing from doctors.we discussed importance of ordering Butrans 10mcg,as thats an initiation dose too,Paul said he would order Butrans 10mcg.we discussed Butrans fpi,5 core messages,initiation guide,application dvd/booklet.i told Paul patients can also go to OxyContin,when above 80mg oral morphine equivalent,with 7tablet strengths,gave Paul OxyContin conversion guide and discussed managed care coverage for OxyContin.recommended Senokot-S
PPLPMDL0020000001	Waterford	OH	45786	3/23/2011	W - Likes transdermal systems to avoid patients relying on taking oral meds all the time. Great option for patients when something stronger is needed than a short acting but before a CII would be needed. I - Butrans introduction 7 days of therapy in 1 application with a scheduling of CIII. Use of the FPI to introduce the indication, contraindications and warnings. Butrans introduction of the initiation guide to discuss appropriate patient selection - opioid naive/experienced and proper starting doses. Formulary coverage - BWC, commercial plans with 3T status and medicaid which requires a prior authorization. Savings Card program eligibility.
PPLPMDL0020000001	Waterford	OH	45786	3/23/2011	W - She said that it's always nice to have another option and likes that she will be able to prescribe it. Would like to further review the FPI. I - Butrans introduction 7 days of therapy in 1 application with a scheduling of CIII. Use of the FPI to introduce the indication, contraindications and warnings. Butrans introduction of the initiation guide to discuss appropriate patient selection - opioid naive/experienced and proper starting doses. Formulary coverage - BWC, commercial plans with 3T status and medicaid which requires a prior authorization. Savings Card program eligibility.
PPLPMDL0020000001	Mayfield Hts	OH	44124	3/23/2011	Quick call....asked doc if he foub an appropriate patient to try on Butrans. He said not yet. i asked him to prescribe for a patient taking low doses of vicodin - like 15mg or less. Reminded him to give commercial patients a savings card.
PPLPMDL0020000001	Hudson	OH	44236	3/23/2011	Dr Tosino said he has not prescribed Butrans yet because he forgot about it. i reminded him of appropriate patient types/positioning & that he had been excited about Butrans because he said he would love to have fewer patients on around-the-clock Vicoden. He said that was still true & that he likes the idea of a transdermal system. i asked why not start an appropriate patient on Butrans instead of starting them on Vicoden. Dr Tosino said this makes sense. He asked for literature as he lost the copies that i had originally given him. Gave him FPI & initiation guide & showed page 6, walking him through how to start the patient we talked about on 5mcg/hr. Also showed back of guide to show exactly how to write the prescription. Reminded him of savings cards for commercial insurance to bring them down to a \$15 copay. He said he wants to prescribe Butrans & will do so.
PPLPMDL0020000001	Waterford	OH	45786	3/23/2011	W - Waters said that Butrans is a product that he can definitely see himself prescribing especially when he is hesitant to go to a CII. I - Butrans introduction 7 days of therapy in 1 application with a scheduling of CIII. Use of the FPI to introduce the indication, contraindications and warnings. Butrans introduction of the initiation guide to discuss appropriate patient selection - opioid naive/experienced and proper starting doses. Formulary coverage - BWC, commercial plans with 3T status and medicaid which requires a prior authorization. Savings Card program eligibility.
PPLPMDL0020000001	akron	OH	44333	3/23/2011	Dr. Bashor has not initiated Butrans therapy truly because he has not seen the appropriate patients. i asked him if he has prescribed any low dose hydrocodone ATC and he said he had not. i discussed converting elderly patients who have been taking low dose hydrocodone ATC and he agreed he would. Potential here is limited.
PPLPMDL0020000001	Hudson	OH	44236	3/23/2011	Spoke with Angie (pharmacist) who confirmed that they have 5 & 10mcg strengths of Butrans in stock. She said she has not yet filled a prescription for it. i reviewed indication, appropriate patients/positioning, & dosing with her. She said they do not have a lot of patients on Suboxone. i clarified by telling her Butrans does not have an indication for the treatment of drug addiction & that moderate to severe chronic pain is the only indication. Also gave her new OxyContin savings cards & reviewed how they are used. She said they would definitely be able to utilize them for customers on OxyContin.
PPLPMDL0020000001	Hudson	OH	44236	3/23/2011	Spoke with Beth who confirmed receipt of their autoshipment of Butrans, although she said they have not dispensed any yet. Reviewed appropriate patient type/positioning with her. She said she thinks Butrans is a great idea & that she has some customers who come to mind that she does not think should be on Vicoden around-the-clock. She recommended i speak with Dr Brese & the other physicians at pain management at the Akron General Wellness Center in Stow. Let her know that was out of my territory but that a colleague does call on them. She also suggested Dr McCallum but then remembered that they are a "no access" group. Gave Beth new OxyContin savings cards. She was very appreciative & said she did not know savings cards for OxyContin existed. She said she has a couple of customers with cancer who take OxyContin & have higher co-pays. Reminded her that savings cards cannot be used for patients with any type of government insurance. She asked for my card in case she had questions.
PPLPMDL0020000001					

	Parma	OH	44134	3/23/2011	Dr Hernandez said that he continues to prescribe Butrans & has written 5-6 prescriptions since our last discussion. I asked if he has had feedback from patients yet & he said he has not. He said that if they had anything negative to say he probably would have heard it by now, so he is going on the assumption that they are doing well. He said he is prescribing Butrans mostly for patients who are referred to him by a chiropractor because they tend to be the types of patients who do not want to take oral pain medications. He said he has been giving out patient instruction booklets & savings cards to eligible patients & showed me that he has one empty package of Butrans savings cards. Spoke with Val regarding managed care. She said she has had not push-back from managed care for Butrans.
PPLPMDL0020000001					
	Akron	OH	44320	3/23/2011	Misty said that when Dr. Bonyo returns from Kenya the practice is going to become more focused on treating chronic pain. Misty said that Butrans will have a significant role and likes that is both a LAO and scheduled 3.
PPLPMDL0020000001	Cleveland	OH	44113	3/23/2011	dr said he hasn't started anyone on Butrans yet, but he has patients in mind that are taking Vicodin and Percocet that complain about their pain not being controlled, so he thinks Butrans could help these patients. I asked dr to consider 2 patients like this, with workers comp or commercial insurance, to start on Butrans and showed Butrans initiation guide. dr said he will start some patients and get some experience with the medication. I recommended Senokot-5 <font color=blue><b>CHUDAKOB's query on 03/30/2011</b></font>What other question could you have asked rather than who he has started on Butrans that would help you move the call forward?<font color=green><b>BROOKAM's response on 04/01/2011</b></font>dr started the conversation with that, I simply was in conversation with him, but I have lunch with him next week and am going to say dr you told me xyz benefits you saw in Butrans in our first conversation at lunch regarding Butrans, now it's been a few weeks, how do you think Butrans is a benefit to your patients or help me understand where Butrans fits into your practice?<font color=blue><b>CHUDAKOB added notes on 04/01/2011</b></font>OK. Thanks for the clarification.
PPLPMDL0020000001					
	Cleveland	OH	44102	3/23/2011	I talked to Amonte, Pharmacist, about Butrans stocking and scripts and he hasn't seen any Butrans yet. I asked Amonte what benefits he sees in Butrans for the patients that fill scripts here? Amonte said once weekly dosing is much easier for some patients than having to take a pill around the clock. Amonte said he thinks a lot of doctors who prescribe tramadol, vicodin and percocet will want to prescribe Butrans and decrease the amount of short-acting opioids they are prescribing monthly, which he thinks is a good move in the right direction. We discussed managed care coverage and I recommended Senokot-5 <font color=blue><b>CHUDAKOB's query on 03/30/2011</b></font>What type of information can you provide him that will help him educate his patients on Butrans and how can you sell him to do this? Once you do this, you will begin to have an advocate. <font color=green><b>BROOKAM's response on 04/01/2011</b></font>the patient information booklet, he does like Butrans, thinks it's a good option but majority of patients are Medicaid so come's down to PA being done by doctors. <font color=blue><b>CHUDAKOB added notes on 04/01/2011</b></font>Not just the patient information book, but the contents in the book and how he will verbalize this to the patients.
PPLPMDL0020000001					
	Akron	OH	44320	3/23/2011	Quick call. Asked Dr. Dupstadt what was holding her back. Why hasn't she written her first Butrans Rx. She said that the main issue was insurance and I reminded her of the benefits of the savings cards.
PPLPMDL0020000001	South Euclid	OH	44121	3/23/2011	Window call...Reviewed the patient types for oxycontin and Butrans. Explained that both are covered on BWC and savings cards available for commercial patients. Gave him an FPI and initiation guide. He said he would look
PPLPMDL0020000001	Cleveland	OH	44113	3/23/2011	worked anesth dept- dr. nickels and Laura Stith, NP- see call notes
PPLPMDL0020000001	Lyndhurst	OH	44124	3/23/2011	Quick call...reviewed the Butrans indication and patient type. I reminded him that most patient will start on the 5mcg/hr dose. Asked him to give commercial patients savings cards. Nothing learned.
	Cleveland	OH	44114	3/23/2011	I talked to dr about the 1 patient she started on Butrans, dr said patients doing well so she's happy. I asked dr if she could think of 2 more patients that are on short-acting opioids like that patient was, and pain isn't controlled so Butrans could be an appropriate option and showed dr Butrans initiation guide. dr said she will think about it and when she sees the patients today she'll keep Butrans in mind. We discussed Medicaid and workers comp coverage for Butrans. I recommended Senokot-5
PPLPMDL0020000001					
	Cleveland	OH	44114	3/23/2011	dr said he hasn't started anyone on Butrans yet, but he has a few patients in mind to start on Butrans. I asked dr who he was thinking of and why is he waiting so long to try Butrans in 1 patient? dr said he thinks a few patients taking Vicodin or percocet, that ask him for more pills, he might consider Butrans for them. I showed dr Butrans initiation guide, and said if patients aren't controlled on short-acting opioids and they are asking for something different, a different medication, then yes consider Butrans for those patients. I asked dr to consider 2 patients to start on Butrans. dr said he will do his best to think of 2 patients and try Butrans in them and let me know what happens. I recommended Senokot-5
PPLPMDL0020000001					
	Bedford	OH	44146	3/23/2011	Dr Moufawad said he has been starting a few patients on Butrans every week. I asked him how the patient we spoke about last week is doing & he said now that he is on the 5mcg strength he is doing well. Dr Moufawad said he is still gauging what each strength of Butrans is "equivalent" to. He also said he has not put anyone on Butrans plus another opioid medication because he wants to become more familiar with Butrans alone before adding other opioids on top if appropriate. Asked Amber what the result of the worker's comp prior authorization was & she said she has not heard back from them. She said that it could be that they are not going to put up much of a fight & that sometimes managed care companies do that just to delay things. She said she would let me know if she hears anything back.
PPLPMDL0020000001					
	Fairlawn	OH	44333	3/23/2011	Dr. Parisi has initiated therapy for 2 patients. I asked him who he started therapy on and he said he didn't know of the top of his head. I asked if the patients had any issues finding Butrans or insurance issues and he happily said they did not. Did a total office call and explained to Justina the value of the savings cards.
PPLPMDL0020000001					
	University Heights	OH	44121	3/23/2011	Asked doc if he has patients that could benefit from a long acting CII delivery 7 days of analgesia in one dose. He said his patients like taking their meds every 4 hours. I asked him to try Butrans for appropriate patients before they starting taking tablets q4h.
PPLPMDL0020000001					
	Akron	OH	44313	3/23/2011	Spoke with pharmacist. Introduced Butrans and the FPI. Asked him if he would consider stocking Butrans and he would need to see a Rx first. Left some patient medication guides.
PPLPMDL0020000001	Hudson	OH	44236	3/23/2011	Dr Seiple said he has not yet prescribed Butrans. I reminded him that he was excited about it when we spoke about it at lunch & asked why he hadn't written yet. He said it was a matter of not seeing the right patient. He said it is difficult to convince some patients to be on something long-acting and/or transdermal. He said patients who have been on other transdermal systems & didn't like them can't be persuaded to try another. I asked if he sees a lot of patients like that & he said no. I asked what types of chronic conditions he sees that cause pain. He mentioned lumbar/spinal stenosis & osteoarthritis. He said he likes that Butrans is buprenorphine because he does not consider it as addictive as other opioids/full agonists. I reminded him that Butrans is CII & does carry abuse & addiction potential. He said he also likes that it is once-a-week as it avoids getting patients on the "vicious cycle" of taking around-the-clock oral meds. Reminder of savings cards & Senokot-5.
PPLPMDL0020000001					
	Shaker Heights	OH	44122	3/23/2011	Quick call- Introduced Butrans to Dr Zivic, delivering 5 core messages. He said that he did treat patients who fit that indication & mentioned patients with osteoarthritis. Presented initiation guide & showed pg 6 to help Dr Zivic in positioning Butrans. He said it seemed "interesting". Discussed savings cards for commercial insurance patients & let him know I have a lunch coming up so we can discuss Butrans further.
PPLPMDL0020000001					
	Beachwood	OH	44122	3/23/2011	Quick call with Dr Tabbaa between patients- reminder for savings cards for Butrans & OxyContin. Spoke with Jim (nurse) who said they were actually just trying to call a patient who Dr Tabbaa had started on Butrans to see how they were responding to it. He said Dr Tabbaa has been prescribing it. Discussed savings cards for Butrans- we checked stock & they still have some left. Also gave him new OxyContin savings cards to replace old cards. He said I could follow up next week to see if I could get more time with Dr Tabbaa since today was too busy of a day.
PPLPMDL0020000001					
	Warrensville Heights	OH	44122	3/23/2011	Dr Brooks said he has started 3 patients on Butrans & has had great results. I asked him to tell me about the patients he chose for Butrans & he described each of them. He said one patient who had walked with a limp because of their pain no longer has an altered gait & is very happy with her results with Butrans. He said all 3 patients he started on Butrans had been opioid-naïve & that he started them at the 5mcg dose. He said he has titrated one of the patients to the 10mcg but has not needed to do so for the others. He also said he offered Butrans as a treatment option to a patient who he suspected of "doctor shopping" & that the patient did not want to be prescribed Butrans after Dr Brooks told him about it. Dr Brooks said he likes that Butrans is transdermal & he considers it a "less strong" opioid. Reminded him that Butrans is CII & like all opioids, does carry abuse & addiction potential. He said he plans to continue to prescribe Butrans where appropriate. Senokot-5 reminder.
PPLPMDL0020000001					
	Cleveland	OH	44113	3/23/2011	dr said he started 6 patients on Butrans and needed more Butrans patient savings cards. dr has been starting patients that are taking tramadol and not controlled and instead of increasing pills, he's converting them to Butrans. dr said patients like the Butrans application dvd/booklet so he wanted more of those. I told dr it was great that he's been considering Butrans as an option for patients and gave dr Butrans initiation guide and asked him to continue thinking of patients to start on Butrans. dr said he will do that and asked that I follow-up next week to see if they need more dvd/booklets or savings cards. I recommended Senokot-5 <font color=blue><b>CHUDAKOB added notes on 03/30/2011</b></font>Amy, great job of selling Dr. Bohl and very good next call objective on how is he explaining Butrans. Keep up the good work!
PPLPMDL0020000001					
	Bedford	OH	44146	3/23/2011	Spoke with Roberta (MA) to follow up on the Butrans prior authorization she & Dr Haddad had told me about last week. She said they ended up switching the patients medication because for that patient worker's comp was saying Butrans was not covered. I asked if she knew any other details regarding what medications they required but she did not & she did not have the paperwork to reference. I asked if any other managed care issues with Butrans have occurred & she said she had not had any, however, Halley also handles them & she was not in for me to speak with. Roberta said it is possible that worker's comp didn't cover it because the patient also had Medicaid. She said I could come in next Wednesday evening to see if I could catch Dr Haddad.
PPLPMDL0020000001					
	Cleveland	OH	44120	3/23/2011	I talked to dr about Butrans 5 core messages, initiation guide and Butrans patient savings cards. dr said she forgot about Butrans and wanted to know what the insurance coverage was for Medicaid. We discussed Medicaid, workers comp and commercially insured patients being able to use Butrans patient savings cards. dr said she has some patients on Vicodin and Percocet that do ask her for something else as their pain isn't controlled with the short-acting opioids. I told dr that's where she can consider Butrans and showed Butrans initiation guide, opioid experienced section and we discussed proper tapering of opioids and initiation of Butrans. I asked dr to think of 2 patients, like we discussed, to start on Butrans and get some clinical experience. I recommended Senokot-5
PPLPMDL0020000001					
	Cleveland	OH	44113	3/23/2011	dr said he hasn't started anyone on Butrans yet but has talked to some of his colleagues and his only concern was that Butrans was an agonist/antagonist. I explained the Mechanism of Action of Butrans and showed Butrans FPI, section 12.1. dr asked if he could get information from Purdue about using short-acting opioids, like Vicodin, with Butrans, as he wanted to be sure his patients wouldn't be going through withdrawal. I showed dr Sections 2.2 and 2.4, Butrans fpi, with information on his question but dr still wanted me to fill out medical information request form, so I did that electronically. dr said he's thinking of patients on 10mg Vicodin, 4x/day so at 40mg/day, I told dr he could think of Butrans there but would have to taper that patient properly and showed dr Butrans initiation guide with this information. I asked if dr had patients taking 5mg Vicodin, 3x/day, dr said yes a lot of patients are on that dosing schedule. I told dr he could think of that 15mg Vicodin patient too. dr said he will try
PPLPMDL0020000001					
	Cleveland	OH	44104	3/23/2011	I talked to dr about patients he feels are appropriate for Butrans, showed Butrans initiation guide and dr said he has patients on Vicodin that aren't controlled and call office asking for something different so instead of going to Percocet dr said he will consider Butrans for a few of these patients. We discussed proper tapering and initiation of Butrans for those patients currently taking short-acting opioids. I asked dr to start 2 patients on Butrans and get some clinical experience with the medication. dr said he will try it. We discussed Medicaid and commercial plan coverage for Butrans. I recommended Senokot-5
PPLPMDL0020000001					
	Cleveland	OH	44104	3/23/2011	dr said he started another patient on Butrans but patient was a dual eligible-Medicaid/Medicare Part D and they wanted a Prior authorization for this patient and he's not sure if the patient has to pay cash for Butrans 10mcg or will fall under Medicaid's co-pay amount. dr said this patient was taking percocet, not controlled and didn't want to take more pills and wanted a different solution so he thought Butrans would be a great option. I told dr that was great he's started 2 patients on Butrans and asked if he could think of 2 more patients with Medicaid or commercial plan coverage as patients with commercial insurance can use the Butrans patient savings cards. I recommended Senokot-5 <font color=blue><b>CHUDAKOB's query on 03/30/2011</b></font>Amy, this is what you wrote in your call note "...and asked if he could think of 2 more patients with Medicaid or commercial plan coverage" Why Medicaid? <font color=green><b>BROOKAM's response on 04/01/2011</b></font>because that's the MAJORITY in their practice, not a lot of commercial and a LOT of Medicare Part D. <font color=blue><b>CHUDAKOB's query on 04/01/2011</b></font>Asking him to look for Medicaid patients is asking him to fail. While I know you have a few scripts from him, this is not going to gain you much business. <font color=green><b>BROOKAM's response on 04/05/2011</b></font>thanks for your opinion Barry <font color=blue><b>CHUDAKOB added notes on 04/06/2011</b></font>We'll see where he goes from here.
PPLPMDL0020000001					
	Cleveland	OH	44114	3/23/2011	I talked to John, PA, about patients he feels are appropriate to start on Butrans and showed Butrans initiation guide. John said these patients on Vicodin or percocet that are taking 3-4 pills a day and wanting more pills is where he feels Butrans would be a better option. I talked to John about recommending Butrans for those patients that call in and tell the staff that their short-acting opioids not working and asking for something else to control their pain. John said he will recommend Butrans for more patients as Dr. Katz only has 1 patient on Butrans and Dr. Marshall hasn't started anyone. I recommended Senokot-5
PPLPMDL0020000001					

PPLPMDL0020000001	Cleveland	OH	44113	3/23/2011	i talked to Laura,NP,with Dr.Nickels and asked Laura what she remembered about Butrans? Laura said honestly nothing.i told Laura Butrans 5 core messages,discussed Butrans initiation guide and Butrans patient savings cards.Laura said Butrans being a transdermal medication,as a patch dosed once a week is for a specific patient.I asked her what that meant? Laura said a patient who she trusts will rotate the patch every week and know how to apply properly.i showed Laura Butrans application dvd/booklet and said this is an educational tool to assist you in that discussion with that particular patient.Laura loved that and said that would help as they dont have time to spend 15minutes or more explaining this patch to the patient.I asked Laura if she treated patients daily that were taking Vicodin,Lortab or Norco and not controlled,so telling her that their short-acting opioids arent working? Laura said yes,i referred Laura to the Butrans initiation guide and said thats where you can think of-font color=blue><b>CHUDAKOB's query on 03/30/2011</b></font>And your next call objective is...?<font color=green><b>BROOKAM's response on 04/01/2011</b></font>i thought i did sorry!! haha yea my next call objective is that she will START patients!! haha when i see her next Thursday, we'll see what she says to me. (if she started a patient on Butrans, seeing she remembered NOTHING about Butrans!!) SO im only going to say, Laura,BUTRANS, what are the benefits you see in Butrans for your patients?<font color=blue><b>CHUDAKOB added notes on 04/01/2011</b></font>Even if she sees benefits, will she write without Nichols approval? Looks like you will have to sell her on making up her own mind on this.
PPLPMDL0020000001	Independence	OH	44131	3/24/2011	Asked Dr Jack what is holding him back fro prescribing Butrans. He said he really doesn't know & that he just needs to think of it. I reminded him that I have been visiting him almost weekly since January in effort to remind him & asked how often he sees patients who he starts on Vicoden for a chronic issue. He said he sees them daily. I reminded him that those are potential Butrans patients. He looked at the initiation guide & read through some of the pages. He said he likes that it is a transdermal & is once-a-week & that it could potentially avoid getting patients on an around-the-clock short-acting medication. I told him those were all reasons to think of it when he sees the appropriate patient. I asked him how many patients he felt would be a fair trial of Butrans so he could get clinical experience. He committed would prescribe Butrans for one patient a day for the next month & added that when he says he will write, he does. OxyContin savings card reminder.
PPLPMDL0020000001	Brooklyn	OH	44144	3/24/2011	Spoke with Audrey (MA) who said Dr Deeb was not seeing any reps today. Discussed Butrans (indication, delivery system, once-a-week application, & appropriate patient type/positioning). She said it sounded like something Dr Deeb would be interested in hearing about & suggested I try back next week (Mon, Tues, or Thurs) in the morning to see if he could see me.
PPLPMDL0020000001	Euclid	OH	44119	3/24/2011	Spoke with doc about the Butrans indication and positioning. Reminded him that he previously said he would prescribe Butrans. I asked him what benefits he sees in Butrans. He asked again about the dosing frequency. I confirmed that it is once a week application. I asked him to start appropriate patients at 5mcg/hr for commercial patients and give a savings card. He said ok. Reminded doc of the Ryzolt savings cards as well.
PPLPMDL0020000001	Independence	OH	44131	3/24/2011	Quick call with Dr Rob. Got reminder for Butrans once-a-week application with seven days buprenorphine delivery & also reminded him of appropriate patient type, asking him to prescribe Butrans instead of starting someone with a chronically painful issue on Vicoden around-the-clock at low doses. Also spent time with Maria going over Butrans, managed care, & savings cards for both Butrans & OxyContin.
PPLPMDL0020000001	Warrensville Heights	OH	44122	3/24/2011	Spoke with Debbie (nurse). She said they are still working out how to address the rep policy so that we can access physicians. Debbie said they do not need any more Butrans patient education information or savings cards for now. She did not know if Dr Shin has been prescribing it. Reviewed appropriate patient type/positioning. She said she would remind him.
PPLPMDL0020000001	Fairlawn	OH	44333	3/24/2011	Spoke with Dr. Lefkovitz briefly through the window. I asked him if a titration guide would help him to better understand what the appropriate patient type for Butrans looked like. He told me to leave it and walked away.
PPLPMDL0020000001	Cleveland	OH	44102	3/24/2011	I talked to Gurjeet Bar,Pharmacist,about Butrans fpi,5 core messages,initiation guide and Butrans patient savings cards.Gurjeet hasnt seen any scripts for Butrans,but we discussed appropriate patients and Gurjeet said he's a newer staff pharmacist so asked me to follow-up with Vicki,the other Pharmacist tomorrow.discussed OxyContin as an option for those patients needing more than 80mg oral morphine equivalent,with 7 tablet strengths and we discussed managed care coverage for OxyContin and OxyContin savings cards.i recommended Senokot-S
PPLPMDL0020000001	Stow	OH	44224	3/24/2011	Introduced Butrans, reviewed FPI, indication, dosing and initiation, appropriate patients, 5 core messages, bowed warning. HE asked how often is it dosed again and does it stay on and I reviewed dosing and showed clinical studies saying that they did not experience falling off and how to tape it if it is starting to lift on the edges with first aid tape. SHOWED application. Reviewed managed care and savings cards and BWC coverage. I asked if this is something he can see himself writing and he said yes.
PPLPMDL0020000001	Stow	OH	44224	3/24/2011	Spoke to Jeff and he said they are not stocking Butrans they are waiting for Dr Bressi to write a script. I told him that he was asking if they were stocking and that he is going to write. I told him 5 and 10mcg are the starting doses and that we have a savings card program and participate in relay health voucher.
PPLPMDL0020000001	Akron	OH	44333	3/24/2011	At this point Dr. Brown is still trying to gain support from PCP in an effort to build her practice. She has already committed to writing Butrans for both opioid naive and experienced patients.
PPLPMDL0020000001	Westlake	OH	44145	3/24/2011	Dr said that he is trying to wean all of his vicodin and percocet patients down. I told him that some of these patients could be appropriate for Butrans. We discussed his patients who he is weaning down to about 3 5mg vicodin per day and that these are the patients where he can initiate Butrans.
PPLPMDL0020000001	Cleveland	OH	44195	3/24/2011	worked neurology dept-met medical secretaries and had to leave Butrans fpi,initiation guide and my business card for Dr mays,dr kriegler,dr spears and dr stillman;worked physical medicine&rehabilitation dept-had to leave Butrans fpi,initiation guide and my business card for Dr.Hou,Dr.Reddy,Dr.Jedlicka and Dr.Schaefer with medical secretaries
PPLPMDL0020000001	Highland Heights	OH	44143	3/24/2011	Spoke to Kristen about the stocking and movement of Butrans. She confirmed that they have the 5 and 10mcg/hr but she has not seen any scripts. She asked how Butrans is doing and if it is being prescribed. I explained that the Hillcrest Pain Mgmtt is prescribing Butrans. They do see some scripts from Dr. Laham. I explained the contents of box and application and disposal of the Butrans. We asked her if she would dispense a script for 2 Butrans (breaking a box of 4). She said not typically because it would be too difficult to sell the opened box. She likes transdermal medications. Kristen and Rachel both said that customers are still calling asking for the "old" oxycontin. They are stocking all but the 15, 30, 60mg tablets.
PPLPMDL0020000001	Euclid	OH	44119	3/24/2011	Spoke to Erin, the fill in pharmacist, about the stocking of Butrans. SHe confirmed that they had both the 5 and 10mcg/hr Butrans. She was not aware of any prescriptions as she was just filling in. I discussed the contents of the box and explained the application and disposal of Butrans and the voucher program. Left FPI for staff pharmacists.
PPLPMDL0020000001	Cleveland	OH	44125	3/24/2011	Spoke with Christine who said she had not yet dispensed Butrans. She said it depends on the customer on whether or not she counsels them when filling a transdermal product prescription. Also gave her new OxyContin savings cards. Reviewed with her how they are used & reminded her that patients with any type of government insurance are not eligible to use the cards. She said she has one customer in particular who can really benefit from the copay reduction.
PPLPMDL0020000001	Cleveland	OH	44113	3/24/2011	had lunch with Dr.Raheja
PPLPMDL0020000001	Cleveland	OH	44113	3/24/2011	i talked to Mike,Pharmacy manager,about doctors prescribing Butrans and gave Butrans initiation guide and showed Mike Butrans Patient information booklet/dvd and told Mike i would follow-up with him once Dr.Nickels and Dr.Raheja start writing Butrans.
PPLPMDL0020000001	Westlake	OH	44145	3/24/2011	Dr said that Butrans is not on formulary yet, but he is still meeting with P&T and is hopefully. He said that he has received very good feedback regarding Butrans. He said that the patient said that Butrans lasted the full 7 days whereas he used to have to prescribe Duragesic every two days. I reminded him we have no head to head data with Duragesic. The Dr said he would continue to prescribe Butrans.
PPLPMDL0020000001	Cleveland	OH	44102	3/24/2011	i talked to dr about Butrans 5 core messages,initiation guide and Butrans patient savings cards.dr said she hasnt had any patients come to mind yet to start on Butrans.i asked dr if she see's patients daily that ask her for something different,if their short-acting opioids like Percocet or Vicodin,arent working? dr said yes patients will complain to her that they need more pills or what they have isnt controlling their pain.i told dr thats where Butrans could be an appropriate option,showed Butrans initiation guide and asked dr if she could think of 2 patients to start on Butrans? dr said she will think about it.i told her Butrans patient savings cards are for commercially insured patients and medicaid patients have to have a prior authorization done,we discussed those requirements.i recommended Senokot-S
PPLPMDL0020000001	Fairlawn	OH	44333	3/24/2011	I have continued to try and identify a specific patient type for Dr. Oyakawa to initiate Butrans therapy. He committed to writing a Rx today, however left before giving me detailed information about for who.
PPLPMDL0020000001	Stow	OH	44224	3/24/2011	Dr came back and asked what he needs to do to start writing Butrans and I said just write a prescription, it is stocked at most pharmacies. HE asked about dosing and initiation again, he said he has alot of patients who would fit the profile. HE asked how it is staying on and I said in our studies it does not show it falling off. We reviewed managed care and savings cards. I asked if he recieved a letter on speaker training and he said it sounds familiar. I informed him of the date and he said that he likes to write the product first before speaking on it and I said this is just a training. HE said he will start writing it today.
PPLPMDL0020000001	Parma	OH	44134	3/24/2011	Quick check-in call with Dr Hernandez- He said he was having some trouble with a patient being able to get a prescription for Butrans filled because he wrote it for one patch so the patient could try it out. He said it was a Rite Aid & gave me the phone number for the pharmacist there, Paul. Paul told the patient that Butrans comes up as an "unbreakable carton" in his system & also said it was a parameter put in place by "the manufacturer". I told Dr Hernandez that I would look into this but also that this is not something that our company sets & that it is an issue with Rite Aid's system. I let him know I would find out how we can remedy this from happening further & would report back to him. Dr Hernandez was appreciative & said this is so far the only issue he has had with Butrans.
PPLPMDL0020000001	Fairlawn	OH	44333	3/24/2011	Quick call. Asked Dr. Meil if a titration guide would help him identify a Butrans patient. He took it and walked away.
PPLPMDL0020000001	Stow	OH	44224	3/24/2011	Steve said he has not written yet. I asked if he sees this as a benefit and what type of patient would he write it in. HE said he definately sees it as a benfit and would write it in a patient who is opioid experienced just coming in. HE asked how to initiate patient who is coming in on opioids. WE reviewed 10mcg and tapering process. We reviewed dosing and savings cards
PPLPMDL0020000001	Richmond Heights	OH	44143	3/24/2011	SPoke to Mel about the stocking and movement of Butrans. Confirmed that he has both 5 and 10mcg/hr. He could not recall the prescriber. We discussed the positioning and he asked if it it used to get patients off of oxycontin. Explained the indication is only for the treatment of pain. Discussed the application of the patch and how to keep it on. He asked if Purdue is reimbursing for those that fall off. Told him no and that proper application if key. He said he has not had any problems with them falling off.
PPLPMDL0020000001	Cleveland	OH	44113	3/24/2011	i talked to Justin,Pharmacist,about doctors who are writing Butrans.Justin said Dr Bohl and Dr Shen have started a few patients so they have Butrans in stock and will be sure to have all 3 dosage strengths in stock for patients.i showed Justin the Butrans patient application dvd/booklet and he thought it would help to have a couple of these in pharmacy,in case the dr forgets to give it to the patients.i gave Justin 2 Butrans application dvd/booklets and told him i would follow-up next week to see if they need more.
PPLPMDL0020000001	Akron	OH	44333	3/24/2011	Asked Becky if she has had another opportunity to prescribe Butrans. She said she had not since she rarely treats chronic pain but said she believed it was the best option for patients who had moderate pain that require ATC analgesia.
PPLPMDL0020000001	Solon	OH	44139	3/24/2011	Coordinated conference call with Dan and Mike because Dan wanted to express his disappointment with Purdue about one section of the contract. Dan said he interpreted the contract to mean that Purdue will pay MH the highest rebate based on the total % of duals/US in their total population versus on a per plan basis. He feels we are nickel and diming him with this and felt it was misrepresented. He agreed the total amount to be paid will not be impacted too much, however, it's still a big deal to him. Dan Doucette expressed our view that we are surprised this was not addressed in the negotiations as many other sections of the contract were. Dan Best said he understands what the contract reads but still feels it was misrepresented. They will work to get it their data so we can make the payment to MH as soon as possible.
PPLPMDL0020000001	Cleveland	OH	44113	3/24/2011	i talked to dr about Butrans 5 core messages,initiation guide,Butrans REMs and Butrans patient savings cards.dr said he has patients on tramadol that do complain about their short-acting tramadol not working and Butrans could be a great option dr likes that Butrans is dosed once weekly and is transdermal and he said he'll try Butrans in a few patients.dr was leaving today for florida so he said it will be next week before he can start anyone on Spoke with Jessica, one of the pharmacists. Left patient education guides so when patients get Butrans prescription filled she would have the opportunity to explain where and how to apply-<font color=blue><b>CHUDAKOB's query on 03/30/2011</b></font>What did you speak with Jessica about and how did she respond? This is what should be in your call notes.<font color=green><b>LAPMACA's response on 04/01/2011</b></font>She was busy but responsive. I went over the patient education guide with her and left some behind she could educate patients on application and disposal.<font color=blue><b>CHUDAKOB added notes on 04/01/2011</b></font><b>Ok.
PPLPMDL0020000001	Fairlawn	OH	44333	3/24/2011	



	Cleveland	OH	44102	3/24/2011	dr said she hasnt tried Butrans in anyone as she was waiting for a patient assistance program for the 1 patient she has in mind to start on Butrans.i told dr i empathized with her and that patient but Purdue doesnt have this type of program for Butrans at this time.i asked dr if she had patients in her practice,taking Vicodin or Percocet,that ask her for more pills or say that their current medication isnt controlling their pain? dr said yes a lot of patients will ask for something else,but most are stabilized on their short-acting opioids.i asked dr if she had 2 patients on Vicodin or Percocet,workers comp or commercial insurance,that she felt Butrans would be an appropriate option? dr said yes and asked about initiating Butrans as she thought Vicodin could only be used for 24hrs once Butrans was started.i showed dr Butrans FPI,initiating therapy and maintenance of therapy sections,discussed tapering short-acting opioids and initiating Butrans.dr said she'll give Butrans a fair trial
PPLPMDL0020000001	Brooklyn	OH	44144	3/25/2011	Spoke with Kristen who said that she has not personally dispensed Butrans but she knows they did need to order a box, so the other pharmacist has dispensed it. She did not know who wrote the prescription. Reviewed appropriate patient type/positioning. She did not have any recommendations for practitioners who may be good to call on for Butrans as she said they get so many from so many different places. Gave her new OxyContin & Ryzolt savings cards & reviewed how they are used. Reminded her they cannot be used for government insurance including Medicare & Medicaid.
PPLPMDL0020000001	Mayfield Village	OH	44143	3/25/2011	Window call...Gave doc a titration guide and reminded him of the appropriate patient type for Butrans. Asked him to try for a commercial patient and give a savings card.
PPLPMDL0020000001	Cleveland	OH	44102	3/25/2011	i talked to dr at window as the office was very busy.dr said he just saw Andrea and did discuss some patients he could start on Butrans.we discussed appropriate patients to start on Butrans,gave Butrans initiation guide and discussed workers comp and commercial plan patients trying Butrans.dr said he will start a few patients.i recommended Senokot-S
PPLPMDL0020000001	Garfield Heights	OH	44125	3/25/2011	Introduced Butrans to Dr Gupta. Delivered 5 core messages & reviewed black box warning. Dr Gupta asked if Butrans is like Duragesic. Reviewed appropriate patient type, presenting initiation guide & explaining that patients on fentanyl were excluded from our studies. He asked about coverage & cost. Discussed managed care & presented savings cards. Offered OxyContin savings cards but Dr Gupta said he has not patients on it at all. Reminded him that savings cards are for cash-pay & commercial insurance patients & cannot be used for patients with any type of government insurance. He then walked out & went into a patient room.
PPLPMDL0020000001	Beachwood	OH	44122	3/25/2011	Introduced Butrans to Dr Warren, delivering 5 core messages & reviewing boxed warning. He said that as a rheumatologist, he sees many patients who have chronic pain. Presented initiation guide & used page 6 to show appropriate patient types/positioning. Dr Warren asked if Butrans was "easier to get". I asked him to clarify-he asked about managed care coverage. Reviewed coverage, emphasizing commercial insurance & gave him savings cards, explaining \$15 co-pay. He asked if patients could suck on the patches "like the other one". Showed FPI section 11 & explained adhesive matrix. He said he liked the idea of potentially avoiding around-the-clock regimens of short-acting opioids for his patients & also said he likes to have a "new option". Recommended OxyContin for appropriate patients beyond Butrans & presented savings cards.Reviewed savings cards & Butrans application & patient booklets with Donny (nurse) & asked him to call me if any questions about Butrans arise- he agreed.<font color=blue><b>CHUDAKOB's query on 03/30/2011</b></font>Did you give him the fair balance of Butrans regarding its abuse potential after he discussed sucking on the opioids?<font color=green><b>APSEGAS's response on 03/31/2011</b></font>Yes. I reminded him that because Butrans is an opioid, it does carry abuse & addiction potential & is a CII. I'm sorry for not adding that to the note.<font color=blue><b>CHUDAKOB added notes on 04/01/2011</b></font>Ok. When you have the opportunity to correct the physician, be sure to include that in your call notes. Thanks!
PPLPMDL0020000001	cleveland	OH	44135	3/25/2011	Quick call, I reviewed the 5 key messages of Butrans and asked his thoughts. He said that it looks like it would be a good option for some patients and he'll take a look at the info. I let him know I would follow up next week to get his thoughts.
PPLPMDL0020000001	Cleveland	OH	44109	3/25/2011	i talked to Raban,Pharmacy manager,about Butrans stocking as they havent ordered Butrans yet.Raban said once he starts seeing scripts for Butrans,he'll order the dosage strengths.we discussed importance of stocking before the 1st script so patients dont have to be turned away and wait 24hrs.we discussed Butrans initiation guide and Butrans patient savings cards.i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	3/25/2011	i talked to Masoud,Pharmacist,about Butrans stocking and Masoud said they have seen a couple Butrans scripts here and we discussed who's prescribing Butrans in area.we discussed Butrans initiation guide and i asked Masoud if he would recommend Butrans to any patients that tell him their short-acting opioids arent controlling their pain? Masoud said he would do that as he thinks Butrans is a great option being transdermal and the dosing of once a week is much easier for some patients.i recommended Senokot-S
PPLPMDL0020000001	Brooklyn	OH	44144	3/25/2011	Asked Dr Detwiler if we could continue discussion about Butrans. He told me that it is "very unlikely that I will ever prescribe that medication." He went on to tell me that his patients will not pay for a branded medication when there are generic alternatives. He said that they end up changing doctors to find one who will prescribe them generics. I reminded him of the savings cards & that commercial insurance patients pay only \$15. He said that even when there is a savings card, he gets letters from the insurance companies saying that they are not covering the medication. He said just because there is a savings card doesn't mean he will ever prescribe something. Dr Detwiler said he realizes I am just doing my job but said again that it is "highly unlikely" that he will ever prescribe. He did not give me the opportunity to respond & walked into a room.<font color=blue><b>CHUDAKOB added notes on 03/30/2011</b></font>Looks like you had a tough call. Nice job hanging in there. Keep trying to bring him value. I know you can sell him on the appropriate patient type.
PPLPMDL0020000001	MAYfield Heights	OH	44124	3/25/2011	Spoke to Jesse about the stocking of Butrans. He confirmed that they are stocking 5 and 10mcg and have dispensed it a couple of times. He does not recall who prescribed it. I explained how the script should be written as it is a 7 day application. Discussed the contents of the box, application and disposal. There have been no issues with coverage.
PPLPMDL0020000001	Cleveland	OH	44109	3/25/2011	dr said he hasnt tried Butran in any patient yet and really hasnt thought much about Butrans.i asked dr what benefits he saw in Butrans? dr said once weekly dosing was easier for some patients and he liked that Butrans was a transdermal formulation.i asked if dr had 2 patients,taking Vicodin or Percocet,but pain still not controlled and patients are asking for something different? dr said yes he hears that complaint from patients.i showed dr Butrans initiation guide and told him thats where he can initiate Butrans and we discussed workers comp and commercial plan insurance coverage for Butrans.dr said he'll think about Butrans for a few patients.i
PPLPMDL0020000001	Cleveland	OH	44109	3/25/2011	i talked to dr about patients she feels are appropriate for Butrans,showed dr Butrans initiation guide and discussed Butrans patient savings cards for commercial plan patients.dr said she just hasnt thought of Butrans but did have a couple patients in mind that are taking vicodin and percocet and pain's not controlled so Butrans could be an option but she needs to talk to these patients. i asked dr to think of 2 patients that she can start on Butrans to give it a fair trial.dr agreed.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44130	3/25/2011	Quick call through the window- Butrans once-a-week application & indication messages & reminder of savings cards for Butrans & OxyContin. Also recommended Senokot-S for opioid-induced constipation.
PPLPMDL0020000001	Richmond Heights	OH	44143	3/25/2011	Quick call.....discussed the Butrans indication and positioning. He said he really wants to hear more about Butrans but he had to leave for the hospital. He asked me to come back next week or to see him in Mentor. I told him I would come to Mentor.
PPLPMDL0020000001	Cleveland	OH	44143	3/25/2011	Quick call.....asked doc if he see a benefit in a long acting CII for his patients. He said maybe and asked about the cost. Told him commercial patients can get Butrans for about \$15 with a savings card. He said great. Nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44109	3/25/2011	worked internal medicine dept:had to leave Butrans fpi,initiation guide and patient information booklet and my business card for Dr.Lindheim,Dr.Harrington,Dr.Falck-Ytter and Dr.McCreery. Left each one of them Oxycontin fpi,managed care/formulary sheet and OxyContin conversion guides.worked physical medicine&rehabilitation departments - see call notes on PM&R doctors
PPLPMDL0020000001	Richmond Heights	OH	44143	3/25/2011	Doc said he has written Butrans several times already. His issue is figuring out the exact conversion from vicodin/percocet to Butrans as our "conversion guide" does not seem exact.
PPLPMDL0020000001	Independence	OH	44131	3/25/2011	Quick call with Dr Pai. He said he has not heard any feedback yet from the patient that he prescribed it for, but will continue to look for other patients to start on Butrans in the meantime. Discussed managed care & prior authorization with Jill.<font color=blue><b>CHUDAKOB's query on 03/30/2011</b></font>Ashleigh, look at your next call objective. If he has feedback he will tell you. Maybe get him to discuss why he chose Butrans for the patients he did and sell him on prescribing for others based on the same decision. What do you think?<font color=green><b>APSEGAS's response on 03/31/2011</b></font>I agree- that is a better objective.<font color=blue><b>CHUDAKOB added notes on 04/01/2011</b></font>Ok. I will be interested to hear how it works!
PPLPMDL0020000001	Westlake	OH	44145	3/25/2011	Dr told me that he had started another new patient on Butrans. The patient was on vicodin and he thought he started with the 5mg dose. I asked what made him think to use Butrans in this patient, he said that the patient wanted to take more tablets and he thought they might do better on a long acting. I discussed managed care with the staff and there have not been any major issues. Reminded them to recommend Senokot S for their patients on opioids.
PPLPMDL0020000001	Cleveland	OH	44103	3/25/2011	i talked to Amy,Pharmacy Manager,about Butrans stocking and Amy said they have 1 carton of Butrans 5mcg,she got 1 script from Dr.Shagal at University hospitals but she couldnt fill the script because she can not open the Butrans carton and dispense anything less than 4 Butrans.Amy said Rite Aid has it locked in their computers to only dispense 4 Butrans,so the doctor was upset and so was the patient but she couldnt change anything in computer.i explained to Amy that i have heard this from another Rite Aid pharmacy and i have spoken with my District Manager already on this issue and he's contacted Purdue corporate for more direction on this issue.Amy wanted OxyContin savings cards as she said Dr.Boyd,Dr Robson,Dr.Celeste and Dr.Talbot all send patients to them and she dispenses OxyContin and a lot of these patients need the savings cards.we discussed Butrans initiation guide,patient application dvd,OxyContin managed care coverage and i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44135	3/25/2011	Quick call, I asked Dr if he had any thoughts about where Butrans would fit into his practice. He said he thinks there is a place, but had not tried Butrans yet. I asked what other info he needs to prescribe a medication for the first time. He took the FPI again to review. I let him know I would try to follow up next week.
PPLPMDL0020000001	Cleveland	OH	44109	3/25/2011	i talked to Erin,Pharmacist,who only had a few minutes but said she hasnt gotten any scripts for Butrans yet,we talked about physicians in area who are prescribing and who i am talking to about Butrans.Erin said once she see's their 1st script she will order Butrans.i explained importance of ordering Butrans now so patients arent turned away and told to wait 24hrs for their medication but Erin said thats her policy.Erin said she does get a lot of Dr.Nickels and Dr.Raheja's patients so if they start prescribing Butrans,she'll definitely order.i recommended Senokot-S
PPLPMDL0020000001	CLEVELAND	OH	44109	3/25/2011	i talked to Rod,Pharmacist,about Butrans stocking and Rod said until he see's scripts for Butrans he's not ordering the medication.we discussed importance of having Butrans stocked so that patients arent turned away and have to wait 24hrs for the medication to be back in pharmacy.Rod said he understood my point but he still wont order Butrans until he see's his 1st script come.we discussed Butrans initiation guide and Butrans patient savings cards.i recommended Senokot-S
PPLPMDL0020000001	Parma	OH	44134	3/25/2011	Allene said she has dispensed at least two Butrans prescriptions. I asked who wrote the prescriptions & she said one was from a physician with the Visiting Nurse Association & she could not remember who wrote the other. She said she does remember that it was for only one system. I asked if there was any problem opening the package & she said they have no issue with that. She said she will dispense whatever number of systems a physician writes for. Gave her new OxyContin savings cards & reviewed usage. She said they do not dispense a lot of OxyContin there, but they do have a few patients who will be able to benefit from the cards.
PPLPMDL0020000001	Copley	OH	44321	3/25/2011	Dr. Machado said that he did not like Buprenorphine because he thought it was too addicting. I went over the abuse potential. He said he would continue to support me with OxyContin but felt unsure about Butrans. I scheduled a lunch.
PPLPMDL0020000001	Parma	OH	44134	3/25/2011	Spoke with James who said he has not filled any Butrans prescriptions at this location that he remembers. He said he did receive the autoshipment of 2 boxes of each strength & has not needed to order more, so he hypothesizes that he has not filled any. Reviewed patient type/positioning. Gave him new OxyContin savings cards & reminded him they are for patients with commercial insurance or cash-pay only.
PPLPMDL0020000001	Cleveland	OH	44103	3/25/2011	dr said he hasnt started any patients on Butrans yet due to the fact he doesnt want to do the prior authorization for his medicaid patients.i asked dr what benefits he see's in Butrans for his patients? dr said he likes that Butrans is transdermal and dosed once a week.i asked dr if there were other medications he prescribes that he believes are beneficial to his Medicaid patients but require a prior authorization? dr said yes he will have Valerie,Medical Assistant,do prior authorizations.i asked dr if that was the case,why not Butrans? dr said i dont know this is a new medication to him and he needs to get more comfortable with it before he starts having Valerie do the prior authorizations.i asked dr to think of 2 patients with commercial insurance or workers comp,that are taking short-acting opioids and not controlled,to start on Butrans.i showed dr Butrans initiation guide and dr said he will think about it.we discussed OxyContin as an appropriate option and managed care coverage
PPLPMDL0020000001	Lakewood	OH	44107	3/28/2011	Dr said that the one patient is doing well and said he was getting good pain relief. He is on the 5mcg dose of Butrans. We reviewed the dosing and how to titrate if necessary. He also tried another patient, but he had Medicare and Pam was not able to get it approved. They still want to try Butrans for the fibromyalgia patient we discussed last time but she has not been back yet. I asked Pam and Dr to continue to gain experience with Butrans and they agreed to start appropriate patients. Reminder that OxyContin is still a long acting option when Butrans may not be appropriate.
PPLPMDL0020000001					

PPLPMDL0020000001	Independence	OH	44131	3/28/2011	Debbie asked about the most common adverse events with Butrans. I showed FPI section 6. She asked if the side effects were greater in the elderly population. Showed FPI 8.5. Reviewed appropriate patient type, dosing, titration, & black box warning. Also discussed application & adhesion (including taping edges with first aid tape if necessary or covering with Bioclusive or Tegaderm). Debbie said she rarely prescribes pain medications but that Butrans seemed interesting. She said she liked that Butrans is a transdermal system & only has to be applied every week.
PPLPMDL0020000001	Parma Heights	OH	44129	3/28/2011	Spoke with Larissa (pharmacist) who said she saw a prescription for Butrans "a couple weeks ago" but that it required prior authorization & ended up being denied. I asked what plan but she did not know. She said they do have it stocked, but she has not dispensed it. Reviewed indication, appropriate patient type, dosing & managed care coverage. Offered more OxyContin savings cards but she said they still have enough.
PPLPMDL0020000001	Brook Park	OH	44142	3/28/2011	Spoke with Doug, he said he thinks they have one patient on Butrans but couldn't remember who's prescribing. We reviewed the medication guide for Butrans and how to instruct patients on proper use and application. He agreed to help educate the patients. We reviewed the initiation guide and appropriate patients. We reviewed OxyContin when Butrans may not provide adequate analgesia. Reminder to recommend Senokot S with opioid
PPLPMDL0020000001	Lakewood	OH	44107	3/28/2011	Dr said that he has not seen an appropriate patient for Butrans, I told him I was getting the sense that it was something else. Dr said to be honest he forgot how to write Butrans and asked me to go over the information again. He said that Drs just get stuck in their routine and it is hard to remember something new. We reviewed the 5 key messages, and the initiation guide. I asked what benefits he sees and he said it would reduce the amount of short acting meds the patients are taking. He said that he will try it and he really does think it will fit into his practice. We reviewed OxyContin as an option when Butrans might not provide adequate analgesia. We also reviewed Ryzolt as a once a day option instead of tramadol around the clock. Asked him to recommend Senokot S with opioids.
PPLPMDL0020000001	Independence	OH	44131	3/28/2011	Quick call at the window- Reminded Dr Reddy of our previous conversation about Butrans & that he had said that he had some patients who he thought may be appropriate for it. Also reminded him of seven days buprenorphine delivery in one application & reviewed appropriate patient type/positioning. Gave him an initiation/titration guide. He said he would use it. Spoke with Kathi (MA)& reviewed Butrans - (indication, appropriate patients, dosing, once-a-week application).
PPLPMDL0020000001	Akron	OH	44333	3/28/2011	I asked Dr. Ahmad why he has not had the opportunity to prescribe Butrans when he clearly has had many patients in mind. He said he has not seen the appropriate patient yet. I reminded him of the ideal patients and asked if he would see any of those patients this week. He said he may and would keep Butrans in mind if so.
PPLPMDL0020000001	Lakewood	OH	44107	3/28/2011	Dr said she hasn't tried Butrans yet, she just keeps forgetting to think of it. We reviewed the Butrans initiation guide and discussed appropriate patient. I asked how many patients she will see this week who are taking 3-4 5mg vicodin per day who complain that it is not controlling their chronic pain. She said she will probably see several of these types of patients. I asked if she would start just a few of these patients on Butrans and she agreed. Reminder about OxyContin as an option when Butrans may not provide adequate analgesia. Reminder about Ryzolt as a once a day option and asked her to recommend Senokot S with opioids.
PPLPMDL0020000001	Parma Heights	OH	44130	3/28/2011	Spoke with Melody (MA) who shared with me that because they are under new management, Dr Saghafi rarely, if ever sees reps. I presented Butrans (indication, dosing, appropriate patient type/positioning) to her & gave her FPI & initiation guide for her to share with Dr Saghafi. She said she feels it is an unfortunate policy, especially for new reps or for those with a product that he has never heard of before. Also left my card if questions arise when Dr Saghafi reviews the FPI & initiation guide. She said she would call me if they ever change the policy.
PPLPMDL0020000001	Independence	OH	44131	3/28/2011	Dr Sundaram said he is sorry to say that he has still not prescribed Butrans. He said that he "feels bad" that I have spoken to him so many times & that he still hasn't written it. I told him not to prescribe out of feeling bad for me & reminded him of the features of Butrans that he has said he liked (once-a-week application, transdermal system). I asked if he felt these aspects of Butrans would benefit any of his patients. He said yes & he promised to look specifically for a Butrans patient this week. Reviewed savings cards for eligible patients.
PPLPMDL0020000001	Lakewood	OH	44107	3/28/2011	Dr said he has not prescribed Butrans and he has not seen the med D patient back in his office yet. He said that he will give it a try. He told me that cymbalta now has an indication for pain and the reps have been pushing him to use it. We reviewed the indication for Butrans and I asked him what benefits he sees in Butrans. He said the 7 day dose and the fact it is a low dose opioid. Dr committed to finding a patient to start on Butrans. We discussed the managed care and savings program. Reminder that OxyContin is still an option when Butrans may not provide adequate analgesia.
PPLPMDL0020000001	Cleveland	OH	44104	3/28/2011	talked to dr at window and asked what did he recall about our last conversation on Butrans and the benefits of Butrans to his patients? dr said he knows Butrans is dosed once a week and is transdermal but couldn't remember insurance coverage. we discussed workers comp and commercial plan patients being able to use Butrans patient savings cards. dr said he'll remember that but had to go.
PPLPMDL0020000001	Cleveland	OH	44195	3/28/2011	worked neurology/pain management and rheumatology departments-had to leave Butrans FPI,initiation guide,OxyContin fpi,conversion guide and formulary grid for every doctor in each department as the medical secretaries said doctors will review information and if they are interested they will call for an appointment
PPLPMDL0020000001	Cleveland	OH	44103	3/28/2011	talked to dr briefly about Butrans and what benefits he saw in Butrans for his patients? dr said once weekly dosing was easier for some of his patients instead of taking pills around the clock but he does feel like Butrans is for a specific patient who will remember to take patch off and rotate patch every week. we discussed patient information booklet/application dvd and dr liked that this was an educational piece he could give to his patients. I asked if dr could think of 2 patients taking Vicodin or Percocet that aren't controlled, for their chronic pain and consider Butrans? dr said he would do that and asked about medicaid coverage? we discussed medicaid and commercial plan patients. I recommended Senokot-S
PPLPMDL0020000001	Lakewood	OH	44107	3/28/2011	Spoke with Bob, we reviewed the Butrans 5 key messages and medication guide. We discussed how to instruct the patient on proper use and application for Butrans. He asked about managed care and we reviewed the formulary coverage and savings program. Reminder about OxyContin as a long acting option and asked to recommend Senokot S with opioid scripts.
PPLPMDL0020000001	Lakewood	OH	44107	3/28/2011	Dr said that he is trying to find the right patient for Butrans, I asked what type of patient he has in mind. He said he is having a hard time finding a patient on 2-3 vicodin per day who are willing to give up their short acting. We reviewed the initiation guide and the fact that patients can continue to take their short acting until efficacy is achieved with Butrans. We discussed the FPI regarding the use of short acting supplemental analgesia. He said that this information has helped him re-think the patient he was looking for and he would like to try Butrans in some patients.
PPLPMDL0020000001	Cleveland	OH	44104	3/28/2011	i talked to dr about benefits he saw in Butrans for his patients. dr said Butrans once weekly dosing is easy, he likes that Butrans is a patch but because Medicaid isn't covering Butrans and he isn't willing to do the prior authorization for medicaid patients to try and get approval for Butrans, he said right now he only has 1 patient in mind that has commercial insurance that he feels could benefit from Butrans. we discussed patients taking Percocet, looking at Butrans initiation guide, and focused on commercial plan patients that dr could try 1-2 patients on Butrans and get some clinical experience. dr said he'll think of 1 patient and see what happens
PPLPMDL0020000001	Cleveland	OH	44109	3/28/2011	worked internal medicine, family medicine and rheumatology departments-had to leave Butrans fpi,initiation guide,business card and OxyContin fpi,conversion guide and formulary coverage sheet for each doctor in each department-follow-up with Linda, rheumatology dept., to book lunch with them and see Dr. Ballou
PPLPMDL0020000001	Akron	OH	44333	3/28/2011	Asked Dr. Shah what types of patients he was prescribing Butrans for and he said all patients who were opioid experienced. I covered information on opioid naive patients and he asked many buying signals including how to initiate therapy for those patients. He asked again if Butrans was scheduled 3.
PPLPMDL0020000001	Cleveland	OH	44103	3/28/2011	i talked to dr about Butrans fpi, 5 core messages, initiation guide, Butrans patient savings cards and Butrans REMS. dr said he does have patients on short-acting opioids that complain about their medication not controlling their pain and always asking for more pills. dr said he thinks the once a week application is easy for some patients and will be tough for others, so a very specific patient for Butrans. I asked if dr had 2 commercial plan patients that are taking tramadol around the clock for their chronic pain but not controlled? dr said yes. I asked him to think of Butrans for those 2 patients and showed Butrans initiation guide. dr said he'll look over all of the information and will consider it for a few patients. I recommended Senokot-S
PPLPMDL0020000001	Independence	OH	44131	3/28/2011	Dr Trickett asked if Butrans can be used in the elderly. Showed FPI 8.5. She also asked how to take patients off of Butrans if she feels they no longer need an opioid due to an improvement in their condition. Showed initiation guide pg 8. I asked her if she sees more chronic or acute pain. She said it really is a "50/50" mixture. I asked what types of chronically painful conditions she sees most often & she said osteoarthritis. She said she really doesn't have a specific reason to not have written Butrans for more patients & has no clinical objection to it. We discussed dose titration for patients if necessary up to a maximum of 20mcg/hr. Also discussed adverse events & showed FPI section 6. Reminded her that Butrans is a CIII & can be abused like other opioids. She asked if they could "suck the liquid" out of Butrans. Showed FPI section 11 & explained adhesive matrix. I gave her a demo patch-she stuck it on her hand & said it would help her remember Butrans. OxyContin savings reminder
PPLPMDL0020000001	Parma	OH	44129	3/28/2011	I asked Dr Ortega if he had started the patient we had talked about on Butrans. He said he has not yet seen that patient but is planning to start him when he sees him. Reminded him about tapering his current opioid dose to 30mg morphine equivalent before initiating Butrans & showed him initiation guide pg 6. He said he has another patient who he is also thinking of starting on Butrans who currently takes 2 Vicodin ES per day. Discussed initiation of Butrans and dose titration if necessary. Also reviewed managed care & urged him to focus on patients with commercial insurance. Dr Ortega asked why the patient's current opioid therapy should be tapered. I told him that is how we conducted our studies because of buprenorphine's potential to precipitate withdrawal in patients already on opioids. I asked him if this concerned him. He said not really, but said it was good to know as he was unaware of that property of buprenorphine. <font color=blue><b>CHUDAKOB added notes on 04/07/2011</b></font>Great question on asking the physician if the tapering issue concerned him? This is the type of questions we want to ask the physician who gives us an objection.
PPLPMDL0020000001	Lakewood	OH	44107	3/28/2011	Katie said that Dr Nageeb started a patient on Butrans. Dr Nageeb is on vacation this week. She said the patient was previously on embeda. She said they started her on the 5mcg dose. We reviewed the dosing and how to titrate Butrans. Katie said they may need to titrate, but they have not yet heard back from the patient so they think she must be doing well. I asked Katie if she would prescribe just 2 patients on Butrans to gain some experience herself and she said she will. Sally said there has not heard of any managed care issues. Reminder about OxyContin as an option when Butrans may not provide adequate analgesia.
PPLPMDL0020000001	Akron	OH	44333	3/28/2011	Spoke with the pharmacist and asked if there had been any movement he said that he did not believe so. I explained that Dr. Shah has recently started writing and encouraged him to keep what they had stocked. He agreed.
PPLPMDL0020000001	Parma	OH	44129	3/28/2011	Spoke with Jackie who said she had not yet seen a prescription for Butrans but they still have it in stock. Let her know that I have been working with area physicians & asked if there was anyone in particular she thought I should speak with. She said not that she could think of. I asked her if there would be any problem in opening a package of Butrans if a physician prescribes fewer than 4 patches. She said this would not be an issue. Reviewed new OxyContin savings cards. She said she has one customer in particular that could benefit from this & said she was excited to give him the card.
PPLPMDL0020000001	Cleveland	OH	44102	3/29/2011	I talked to Vince, Pharmacist, about Butrans stocking and he hasn't ordered Butrans yet as he wants to wait for his 1st script. we discussed importance of stocking Butrans ahead of time so that patients aren't turned away and told to return in 24 hours but Vince said he feels that waiting until 1st script comes in pharmacy is the best thing right now. I showed Vince Butrans initiation guide and we discussed appropriate patients for Butrans and discussed managed care coverage for Butrans. I recommended Senokot-S
PPLPMDL0020000001	Warrensville Heights	OH	44122	3/29/2011	Spoke with Michelle (MA) who said Dr Gupta will be keeping both his office locations & is no longer planning on closing the Garfield Heights office (for now). I reviewed Butrans indication, dosing, and appropriate patient type with her. Also gave her new OxyContin savings cards & reviewed usage for eligible patients.
PPLPMDL0020000001	Cleveland	OH	44113	3/29/2011	i talked to dr about Butrans initiation guide, appropriate patients he would consider starting on Butrans. dr said he does prescribe tramadol and vicodin for his chronic pain patients but it really comes down to cost. we discussed medicaid prior authorization requirements as that's a big plan here and commercial insurance coverage. dr said he will try and think of 1 or 2 patients with commercial insurance to start on Butrans. I asked dr to think of 2 patients on short-acting opioids that are complaining to him that pain isn't controlled and if appropriate, start them on Butrans after proper tapering of short-acting opioids. dr agreed. I recommended Senokot-S
PPLPMDL0020000001	Akron	OH	44333	3/29/2011	Asked Dr. Brown how many patients she was starting to see each day. She mentioned things were still slow but were beginning to pick up. I reminded her of the patient profiles that would best benefit from Butrans. I asked her since things were slow if she would consider trying it on just one patient and she agreed.
PPLPMDL0020000001	Cleveland	OH	44113	3/29/2011	worked pain management dept-see call note on Dr. Shen and Dale Novak
PPLPMDL0020000001	Cleveland	OH	44195	3/29/2011	worked tsauss cancer institute-left Butrans fpi,initiation guide,patient information booklet and my business card for Dr.Dreicer,Dr.Pennell,Dr.Rini,Dr.Budd,Dr.Davis,Dr.LeGrand,Dr.Gutsgell,Dr.Dean-all oncologists in center and also left an OxyContin fpi,conversion guide and OxyContin formulary coverage sheet for each doctor with medical secretaries
PPLPMDL0020000001	Akron	OH	44310	3/29/2011	Had the opportunity to discuss Butrans with Dr. Cremer at length at an appointment today. I went through the FPI and focused on patient profiling. He identified several patients that he thought could benefit from a LAO. He told me that he has a lot of BWC and was pleased to hear that it was going through. I closed using the co pay cards.

PPLPMDL0020000001	Cleveland	OH	44109	3/29/2011	I talked to Nate Pharmacist,about Butrans fpi initiation guide,Butrans patient savings cards and Butrans REMS.Nate said he heard about Butrans from other pharmacists but hasn't seen any scripts for it yet we discussed importance of Butrans stocking and Nick said he'll talk with other pharmacists about ordering Butrans 5mgc and 10mcg.we discussed managed care coverage too for Butrans.i recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44130	3/29/2011	Quick call with Dr Fedorko - I noticed that one of the Butrans savings cards was gone so I asked him if this meant he started a patient. He said he did start a patient on Butrans last week. He added that he is already thinking of another specific patient & said he will keep his eye out for additional patients who may be appropriate.
PPLPMDL0020000001	Akron	OH	44310	3/29/2011	Introduced Butrans and the FPI. Focused on identifying patients that would be in this week currently on low dose hydrocodone. He told me he had around 20 patients who would benefit from Butrans simply because it is a LAO. I asked if he would be willing to start several of those patients and evaluate their therapy. He agreed.
PPLPMDL0020000001	Mayfield Heights	OH	44124	3/29/2011	Quick call.....introduced Butrans, indication, postioning,coverage and savings cards. She was glad to hear about it because she can prescribe it as a NP. I explained that commercial patients can save up to \$40/mo until the end of 2011 with the savings card.
PPLPMDL0020000001	Mayfield Hts	OH	44124	3/29/2011	Window call.....reminded doc of the coverage and savings cards of Butrans. Explained that commercial patients will have the best chance for success. Nothing learned.
PPLPMDL0020000001	Mayfield Hts	OH	44094	3/29/2011	Saw doc at window. Asked doc if he saw a benefit in a long acting CII for patients in continuous pain. He said maybe, what is it. I explained the indication and positioning of Butrans and that it is a once weekly transdermal system. He said he does not have time to hear about a new product. Left my card for Monica to call me back to schedule a lunch.
PPLPMDL0020000001	Cleveland	OH	44113	3/29/2011	I talked to Dale,PA,for Dr.Shen today about patients taking tramadol,vicodin or percocet around the clock that are telling him their pain isnt controlled with the short-acting opioids.Dale said he hears that all day long and more so from Dr.Shen's patients than Dr.Daoud as Dr.Shen see's and starts more patients on short-acting opioids than Dr.Daoud does.i asked if Dale could continue recommending Butrans for these types of patients we discussed and showed Butrans initiation guide.Dale said he would as he feels better with Butrans being issued once weekly in 1 application versus his patients telling him they take 1-2 pills of their short-acting one day and then more the next day and they all have chronic pain,so its a liability for them as health care professionals if their patients arent taking their short-acting opioids as prescribed. we discussed managed care coverage for workers comp,medicaid and commercial plan patients. i recommended Senokot-5
PPLPMDL0020000001	Parma	OH	44129	3/29/2011	Spoke with Marian (pharmacist) & Sarah (tech) who said they have not seen any Butrans prescriptions yet. They had no specific recommendations of who in the area treats the target patient type. Reviewed indication & dosing & let them know I was working with area physicians. Presented new OxyContin savings cards. Marian said she had just noticed that the other cards were getting ready to expire so she was happy to have replacements.
PPLPMDL0020000001	Fairlawn	OH	44333	3/29/2011	Asked if they have seen any movement with Butrans. She said that she didn't recall filling any Rx's but another pharmacist may have. I let her know that Dr. Shah has been prescribing and may see some Rx's in the future.
PPLPMDL0020000001	Akron	OH	44129	3/29/2011	Quick call with Dr Roheeny- He said he did prescribe Butrans for a patient since our last discussion last week. He walked into a patient room before I could ask him to elaborate.
PPLPMDL0020000001	Akron	OH	44310	3/29/2011	Introduced Butrans and FPI. Focused on patient profiling and probed to find out if Butrans would benefit patients at Dr. Schukay's practice. He said he had several patients in mind, both opioid naive and experienced. I went over the conversion/initiation guide and asked if I could follow up with his new starts next week. He agreed.
PPLPMDL0020000001	Cleveland	OH	44113	3/29/2011	I talked to dr about Butrans she has on Butrans and how they are doing and dr said no complaints,patients are doing well and she only had 1 issue with a workers comp patient not being able to get Butrans,so we discussed that issue.i showed dr Butrans initiation guide and asked if she can continue to think of Butrans as an option for those patients taking short-acting opioids around the clock for their chronic pain but not controlled,dr said she will do that.we discussed Butrans patient savings cards for her commercial plan patients.i recommended Senokot-5
PPLPMDL0020000001	Parma	OH	44129	3/29/2011	Re-introduced Butrans to Dr Paat, delivering 5 core messages & box warning. He asked if he could use Butrans instead of fentanyl. I told him we have no comparative data & showed initiation guide pg 6, explaining that patients on fentanyl were excluded from studies. He asked if Butrans causes constipation, so I showed FPI section 6. He asked if he could use Butrans in renally or hepatically impaired patients- showed FPI 8.6-8.7. Also discussed application, rotation, & supplemental analgesia (2.4). I asked Dr Paat if he would use Butrans in opioid naive patients & he said yes. He said he liked the idea of a once-a-week option. I asked what types of chronic conditions that cause pain he sees most often- he said arthritis & low back pain. Reviewed managed care & savings cards & asked him to focus on commercially insured patients to get the least amount of managed care push-back. He said he would start prescribing Butrans & that it seemed like a "good drug".
PPLPMDL0020000001	Parma	OH	44129	3/29/2011	Re-introduced Butrans to Dr Tolentino, reminding her of 5 core messages. She asked if Butrans is like Duragesic. I explained that we have no comparative data & let her know patients on fentanyl were excluded from our studies. Gave her initiation guide & showed page 6. She asked about adverse events- I showed FPI section 6. I asked if she could see a place for Butrans in her practice. She said yes so I asked if she would use it in someone who has never been on an opioid before. She said she would. She said she thought applying a patch once every week was "better" than taking pills around-the-clock. I asked what types of chronic conditions she treats most often that cause pain. She said she'd use Butrans in low back pain, shoulder pain, arthritis & for pain from cancer because she would know they needed something for pain for a long duration. She asked about cost- Discussed managed care & savings cards & asked that the thing of commercially insured patients.
PPLPMDL0020000001	Shaker Heights	OH	44122	3/29/2011	Spoke with Stephanie & Michelle (MA) who said because Dr Agrawal is covering for three physicians this week, he was too busy & could not speak with me. They recommended I come back next week. Reminded them of Butrans as well as savings cards for both Butrans & Ryzolet.
PPLPMDL0020000001	Cleveland	OH	44130	3/29/2011	Spoke with Ron who checked his shelves & said he did not see any Butrans, so Dave must not have ordered it. He said he was not sure why it was not ordered, but will ask Dave about it. Asked about OxyContin stocking- he checked the safe & confirmed that they have 10, 20, 30, & 40mg strengths stocked. Reviewed & presented new savings cards.
PPLPMDL0020000001	Maple Heights	OH	44137	3/29/2011	Spoke with Kim (pharmacist) who said she has not seen Butrans activity other than the prescription she saw from a Dr Lin (or Len) at Cleveland Clinic (main campus- she was not sure of specialty). She said it was for a Medicaid patient & they never heard back from the doctor on the prior authorization. Reviewed managed care coverage with her. Also offered OxyContin savings cards but Kim said they no longer stock OxyContin for safety reasons due to the area they are located in.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/29/2011	I asked Dr.Pitt if he would consider writing Butrans when his patients are failing on NSAID's. He said that he probably would not write Butrans but would continue to support me with OxyContin. I thanked him for his OxyContin support.<font color=blue><b>CHUDAKOB's query on 04/07/2011</b></font>it doesn't look like you had much of a discussion with Dr. Pitt? Is this the only question you asked him?<font color=green><b>LAPMACA's response on 04/10/2011</b></font><b>Yes. We did not have much of a discussion. He has told me multiple times he will not write Butrans</b> so I am really focusing on maintaining my OxyContin business with him and hopefully at some point he will write Butrans.<font color=blue><b>CHUDAKOB added notes on 04/13/2011</b></font><b>We can discuss this more on our ride session.
PPLPMDL0020000001	Cleveland	OH	44113	3/29/2011	dr told me in hall she went eat lunch from pharmaceutical sales reps but i could leave her information.i gave dr Butran fpi,initiation guide and patient information booklet and told dr since i was newer to her,my goal was to understand how i can partner with her and provide answers to any product questions, provide patient education tools and pain management education tools.dr said that was fine and to leave information for her to review
PPLPMDL0020000001	Cleveland	OH	44111	3/30/2011	I asked where Dr where he see Butrans fitting into his practice. He said that he would probably try it for patients before going to other long acting medications. We reviewed the initiation guide and I asked if he would start just one new patients on Butrans who is taking 3-4 5mg vicodin per day. Also, spoke with Barb and she will remind the Dr about Butrans as an option and look for appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44111	3/30/2011	I reviewed the conversations we had with Dr last time and asked if he would start just one new patient this week to gain experience with Butrans. He said he would and that he has a patient in mind on vicodin.
PPLPMDL0020000001	Cleveland	OH	44106	3/30/2011	I talked to dr briefly about patients that he's starting on Butrans and dr said majority of these patients are taking percocet,some taking Vicodin,around the clock for their chronic pain, and are telling him these medications aren't controlling their pain and they want more pills.dr isnt giving them more pills,he's starting them on Butrans.i showed dr Butrans initiation guide and we discussed proper tapering and initiation of Butrans.We discussed managed care coverage and commercial plan patients using Butrans patient savings cards and discussed Medicaid prior authorization requirements for Butrans.i recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44122	3/30/2011	Introduced Butrans to Dr Barret, delivering 5 core messages & reviewing box warning. Reviewed appropriate patient type & positioning as well as managed care & savings cards for eligible patients.OxyContin reminder for appropriate patients who are beyond Butrans.
PPLPMDL0020000001	Cleveland	OH	44106	3/30/2011	I talked to dr about Butrans and appropriate patients to consider for Butrans by showing Butrans initiation guide.dr didnt remember much about Butrans so discussed 5 core messages, initiation guide, Butrans REMS and Butrans patient savings cards with dr.dr said he has patients on tramadol that do complain about their pain being persistent and not controlled so he could think of Butrans there.i told dr that was perfect to taper patients appropriately and then consider Butrans.dr said he would remember Butrans.
PPLPMDL0020000001	Cleveland	OH	44106	3/30/2011	I talked to dr about Butrans and appropriate patients to consider for Butrans by showing Butrans initiation guide.dr didnt remember much about Butrans so discussed 5 core messages, initiation guide, Butrans REMS and Butrans patient savings cards with dr.dr said she has patients on tramadol,q4-6h, and she doesnt like her patients having to take a short-acting opioid like that around the clock for chronic pain as many of her patients complain that its inconvenient to have that dosing regimen.dr said she likes once weekly dosing of Butrans and that its transdermal.I talked to dr about Butrans patient application dvd/booklet and asked if that would assist her in educating patients on Butrans? dr said yes.i asked dr to think of 2 patients taking tramadol,with commercial insurance or workers comp,and start them on Butrans.dr asked about Medicaid coverage for Butrans? we discussed Prior Authorization requirements for medicaid patients to try and get approval of Butrans.dr said he will try it
PPLPMDL0020000001	Cleveland	OH	44106	3/30/2011	I talked to dr about Butrans and appropriate patients to consider for Butrans by showing Butrans initiation guide.dr didnt remember much about Butrans so discussed 5 core messages, initiation guide, Butrans REMS and Butrans patient savings cards with dr.dr said he has patients on tramadol that do complain about their pain being persistent and not controlled so he could think of Butrans there.i told dr that was perfect to taper patients appropriately and then consider Butrans.dr said he would remember Butrans.
PPLPMDL0020000001	Cleveland	OH	44106	3/30/2011	I talked to dr about Butrans and appropriate patients to consider for Butrans by showing Butrans initiation guide.dr didnt remember much about Butrans so discussed 5 core messages, initiation guide, Butrans REMS and Butrans patient savings cards with dr.dr said he has patients on tramadol that do complain about their pain being persistent and not controlled so he could think of Butrans there.i told dr that was perfect to taper patients appropriately and then consider Butrans.dr said he would remember Butrans.
PPLPMDL0020000001	Parma	OH	44134	3/30/2011	Asked Alicia what practitioners in the area may be interested in Butrans based on the appropriate patient type & indication. She paused & said no one in particular comes to mind. She said they see prescriptions from a wide variety of physicians & specialties. Presented & patient information booklet. She said she does anticipate customers asking questions about Butrans since it is transdermal & not a lot of patients are used to using such products. She said she would utilize the guide in patient counsel.
PPLPMDL0020000001	Warrensville Heights	OH	44122	3/30/2011	Dr Kessler came prepared to my lunch already having researched Butrans. He said he had been looking forward to talking about it. He said his one concern is that he has heard that patients are starting on it but then are not able to afford to stay on it due to lack of insurance coverage & then go into withdrawal after discontinuing treatment. Discussed managed care, asking him to focus on commercial insurance patients & reviewed savings cards. Also told him that like any opioid, patients should be tapered gradually when discontinuing Butrans therapy to avoid withdrawal. He said he understands it being an opioid class effect. He asked about adverse events/allergies, half-life, & supplemental analgesia. Showed FPI sections 6, 12, & 2.4 to answer his questions. Presented initiation guide & reviewed starting doses for patients depending on their opioid experience level & discussed max dose of 20mcg/hr. Reminder for OxyContin for appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44106	3/30/2011	I talked to dr about Butrans and appropriate patients to consider for Butrans by showing Butrans initiation guide.dr didnt remember much about Butrans so discussed 5 core messages, initiation guide, Butrans REMS and Butrans patient savings cards with dr.dr said he has patients on tramadol that do complain about their pain being persistent and not controlled so he could think of Butrans there.i told dr that was perfect to taper patients appropriately and then consider Butrans.dr said he would remember Butrans.
PPLPMDL0020000001					

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PPLPMDL0020000001	Cleveland	OH	44106	3/30/2011	i talked to dr about Butrans and appropriate patients to consider for Butrans by showing Butrans initiation guide.dr didnt remember much about Butrans so discussed 5 core messages, initiation guide, Butrans REMS and Butrans patient savings cards with dr.dr said he has patients on tramadol that do complain about their pain being persistent and not controlled so he could think of Butrans there.i told dr that was perfect to taper patients appropriately and then consider Butrans.dr said he would remember Butrans.
PPLPMDL0020000001	Cleveland	OH	44106	3/30/2011	i talked to dr about Butrans and appropriate patients to consider for Butrans by showing Butrans initiation guide.dr didnt remember much about Butrans so discussed 5 core messages, initiation guide, Butrans REMS and Butrans patient savings cards with dr.dr said he has patients on tramadol that do complain about their pain being persistent and not controlled so he could think of Butrans there.i told dr that was perfect to taper patients appropriately and then consider Butrans.dr said he would remember Butrans.
PPLPMDL0020000001	Cleveland	OH	44106	3/30/2011	i talked to dr about Butrans and appropriate patients to consider for Butrans by showing Butrans initiation guide.dr didnt remember much about Butrans so discussed 5 core messages, initiation guide, Butrans REMS and Butrans patient savings cards with dr.dr said he has patients on tramadol that do complain about their pain being persistent and not controlled so he could think of Butrans there.i told dr that was perfect to taper patients appropriately and then consider Butrans.dr said he would remember Butrans.
PPLPMDL0020000001	Cleveland	OH	44114	3/30/2011	i talked to John,PA,about appropriate patients to start on Butrans and showed Butrans initiation guide. John said he has been recommending Butrans to Dr.Katz and Dr.Marshall but only Dr.Katz has started a couple patients.John said he likes that Butrans is dosed once a week and is transdermal instead of patients having to take a short-acting opioid around the clock for their chronic pain when that regimen,q4-6h usually doesnt control their pain over time. i asked John to continue recommending and start 2 patients himself on Butrans,John agreed and said he would do that and let me know next week at lunch if he started anyone on Butrans.i recommended
PPLPMDL0020000001	Cleveland	OH	44106	3/30/2011	i talked to dr about Butrans and appropriate patients to consider for Butrans by showing Butrans initiation guide.dr didnt remember much about Butrans so discussed 5 core messages, initiation guide, Butrans REMS and Butrans patient savings cards with dr.dr said he has patients on tramadol that do complain about their pain being persistent and not controlled so he could think of Butrans there.i told dr that was perfect to taper patients appropriately and then consider Butrans.dr said he would remember Butrans.
PPLPMDL0020000001	Cleveland	OH	44113	3/30/2011	i talked to dr about patients he's starting on Butrans.dr said he has patients who are only taking NSAIDs and instead of starting them on tramadol he's starting them on Butrans.dr said he likes the once weekly dosing and transdermal delivery of Butrans so he's happy and no complaints from patients.we discussed dr continuing to start new patients,opioid naive,and also those patients currently taking tramadol but their pain isnt controlled,considering Butrans for them too.dr said he's started some patients like that too and Butrans patient savings cards are easy to use for his commercially insured patients.we discussed workers comp coverage and the Butrans patient application dvd/booklet.i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	3/30/2011	worked orthopedic dept-see call notes on Dr.Bohl and Dr.Berkowitz
PPLPMDL0020000001	Cleveland	OH	44106	3/30/2011	i talked to dr about Butrans fpi, 5 core messages, initiation guide, Butrans REMS, patient application dvd/booklet and Butrans patient savings cards for commercial plan patients.dr said he didnt have a lot of time to talk but would read through the material and talk to me at next lunch.i showed dr Butrans initiation guide and asked him to just consider 2 patients on tramadol that arent controlled where Butrans could be an appropriate option,dr said he will look it over and let me know.
PPLPMDL0020000001	Mayfield Village	OH	44040	3/30/2011	Spoke with Tom and Danielle. Tech about the stocking of Butrans. They confirmed that they just got it in and had a script for it a few days ago. Just the one patient so far and they could not recall the prescriber. I explained the indication and dosing options, the contents of the box and how to dispose of the Butrans. He said patient only paid about \$20. I explained the savings card program. I asked if they have seen any difference in oxycontin scripts. Tom said he does not have many patients on it so nothing unusual lately.
PPLPMDL0020000001	Cleveland	OH	44106	3/30/2011	dr said he hasnt started any patients on Butrans and couldnt remember insurance coverage for Medicaid patients.we discussed insurance coverage for medicaid,commercial and workers comp patients. i asked dr if he had patients on tramadol that complained of their pain not being controlled on the short-acting opioid? dr said yes every day he hears that from patients.i asked dr to consider Butrans for those patients and showed Butrans initiation guide and asked dr to think of 2 patients he can start on Butrans. dr said he would do that.
PPLPMDL0020000001	Cleveland	OH	44114	3/30/2011	dr said he hasnt started any patients on Butrans yet and i need to be patient with him as he is slow to start any new medication.i asked dr what benefits he even saw in Butrans for his patients? dr said he likes once weekly dosing instead of around the clock vicodin or percocet but he doesnt think every one of his patients will put a patch on and remember to rotate patches every week.i told dr Butrans is not for every patient,but for someone currently taking opioids around the clock who meets the Butrans indication and that person is asking dr for something different as the short-acting opioids like Vicodin or Percocet arent controlling the pain. dr said okay that made sense.i asked dr if he could think of 2 patients like that with workers comp insurance that he could start on Butrans and get some clinical experience? dr said yes he does.i told dr i would follow-up next wednesday,april6th,at lunch to see how it went with these 2 patients he's going to start on Butrans.
PPLPMDL0020000001	Warrensville	OH	44122	3/30/2011	Quick call with Dr Rakowski- Introduced Butrans, delivering 5 core messages & alerting her to box warning. She said she is focusing on prescribing fewer opioids & walked away.
PPLPMDL0020000001	Westlake	OH	44145	3/30/2011	i asked Dr to think of just one med mutual patient or BWC who is taking 3-4 5mg vicodin per day who is not well controlled. We reviewed the initiation guide and Dr said she would try to think of Butrans for these patients.
PPLPMDL0020000001	Cleveland	OH	44106	3/30/2011	Angela MA said she would flag patients and help remind the Dr about Butrans.
PPLPMDL0020000001	Cleveland	OH	44106	3/30/2011	worked internal medicine dept-lunch with residents, see call notes; worked pain management dept-see call notes on dr.hayek and dr.sahgal
PPLPMDL0020000001	Cleveland	OH	44106	3/30/2011	i talked to dr about Butrans fpi,Score messages,initiation guide,patient application dvd/booklet, Butrans REMS and Butrans patient savings cards for commercial plan patients.dr said he hasnt heard of Butrans,would need to think about who is appropriate and if he would consider prescribing Butrans.dr asked if it was on formulary in hospital,i told dr it was being reviewed by the P&T committee now and we will know in April if its a yes/no for the hospital formulary.i asked dr to consider 2 patients on short-acting opioids,looking at Butrans initiation guide,that arent controlled and asking for something else and start them on Butrans.dr said he will consider that option.
PPLPMDL0020000001	Cleveland	OH	44106	3/30/2011	i asked dr what she remembered about Butrans? dr said not much other than it was a transdermal medication.i discussed 5 core messages with dr,we discussed Butrans initiation guide and i asked dr to think of 2 patients taking tramadol that meet Butrans indication and instead of refilling the tramadol,start that patient on Butrans after proper tapering of tramadol.dr said it comes down to insurance coverage and asked if Medicaid covered Butrans? we discussed Butrans coverage for Medicaid patients with a prior authorization and the requirements that Medicaid has to see before they review any patients for approval of Butrans.dr said she'll think of a couple patients and try it and let me know what happens.i asked dr what she liked about Butrans,that she would even consider it for a few patients? dr said she likes that Butrans is transdermal and dosed once a week and being in a patch she thinks this will be better for some of her patients that dont like taking pills around the clock.
PPLPMDL0020000001	Bedford	OH	44146	3/30/2011	Dr Haddad said he has prescribed Butrans for 2 or 3 more patients since our last discussion, despite the fact that he had managed care pushback on the first prescription he wrote for a worker's comp patient. He said that he has not heard anything back from any of those patients nor from their insurance, so he is considering that a good sign. I asked what types of patients he is choosing- patients who are opioid-naive or opioid-experienced. He said he is using it right now on patients who have failed non-steroidals. Told him this was a great place to start. I also reminded him of ability to titrate every 3 days up to a max dose of 20mcg/hr. He said that was good to know & that he would continue to look for patients for Butrans & that he would let me know when he gets feedback from patients.
PPLPMDL0020000001	Bedford	OH	44146	3/30/2011	Dr Moufawad said he is starting to "figure out" what to give his patients who are on Butrans for breakthrough. He said he has been giving tramadol or Nucynta. I asked him if he has tried titrating the dose for patients who have breakthrough. He said he has done this for one patient who he has not heard back from yet. I asked if he is still starting new patients. He said he is not starting opioid-naive patients on Butrans. I asked him why not- He said he sees few patients like that but then paused & asked if Butrans can be used in opioid-naive patients. I told him they can be started on the 5mcg/hr dose. He said that made him think. He said he is in the process of evaluating his practice & he is trying to really analyze patients to assess their "need" for opioids as well as evaluating "ceiling doses" of opioids. He added that he sees a big place for Butrans for the future of his practice & that he is gaining clinical experience slowly & cautiously.
PPLPMDL0020000001	Cleveland	OH	44106	3/30/2011	i talked to dr about Butrans fpi, 5 core messages, initiation guide,Butrans REMS,patient savings cards for commercially insured patients,dr asked about Medicaid coverage as thats the majority seen at UH/out-patient center,so we discussed Prior Authorization requirements for medicaid patients to try and get approval for Butrans.i showed dr Butrans initiation guide and asked him to consider 2 patients taking tramadol for their chronic pain but not controlled and asking him for something else,to start them on Butrans.dr said he will consider Butrans but has to read everything over and let me know if he has any further questions.
PPLPMDL0020000001	Warrensville Heights	OH	44122	3/30/2011	Introduced Butrans to Dr Barlatt, reviewing 5 core messages & alerting him to box warning. He said he liked learning about different options & medications to treat pain & that they see it commonly in the practice, although they are all trying to prescribe fewer & fewer opioids. Told him i understood & that like all other opioids, Butrans does have abuse/addiction potential & therefore he should be just as cautious in prescribing Butrans as he would any other opioid.
PPLPMDL0020000001	Cleveland	OH	44113	3/30/2011	i talked to dr about patients he feels are appropriate to start on Butrans.dr said he has a lot of patients on Vicodin and a few on Percocet that are always asking for more pills as their pain isnt controlled so he thinks this is the ideal place for Butrans.we discussed proper tapering and initiation of Butrans therapy for those patients currently taking opioids and i showed dr Butrans initiation guide.i asked dr to think of 2 patients like we discussed that he feels would be appropriate for Butrans,dr said he will and i told dr i would follow-up next Thursday at lunch and look forward to hearing about the 2 patients he started on Butrans.we discussed workers comp and commercial plan coverage for Butrans and i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44106	3/30/2011	i talked to dr about Butrans fpi, 5 core messages, initiation guide,Butrans REMS,patient application dvd/booklet and Butrans patient savings cards.dr said he hasnt heard of Butrans and wanted to know if Medicaid covered Butrans? we discussed medicaid,workers comp and commercial plan coverage for Butrans.i showed dr Butrans initiation guide and asked him to think of 2 patients taking tramadol for their chronic pain but not controlled and perhaps asking dr for something different,think of Butrans there for those patients if appropriate.dr said he would and needed to look through all of the Butrans information and will let me know if he has any further dr said he hadnt started anyone yet on Butrans as he's been gone for the past week but he has patients on tramadol that he knows can benefit from Butrans,so we discussed proper tapering of tramadol and then initiation of Butrans 10mcg for those patients currently taking tramadol.i showed dr Butrans initiation guide and asked him to think of his Medco and Anthem patients that he could start on Butrans first,as thats the easiest with the Butrans patient savings cards.dr asked about Medicaid coverage for Butrans,so we discussed prior authorization requirements and dr said Lisa,patient care coordinator,processes all of them anyways so she would be looking at charts for those requirements.i asked dr to start a few patients on Butrans so he can get some clinical experience,dr said he will do that.i recommended Senokot-S
PPLPMDL0020000001	Parma	OH	44134	3/30/2011	Dr Hernandez said that he has been prescribing Butrans a lot over the last few weeks & requested more patient information guides. I asked what types of patients he has been choosing. He said patients who are taking 3-4 Vicoden or Percocet per day. He said he has been using Butrans to "get patients off the cycle" of taking oral pain medications around-the-clock. He has been asking patients to call him after 2 days if they have any issues with Butrans & has received no phone calls. He said he would like to call Purdue & speak with the researchers of Butrans to ask some questions that I may not be able to answer due to them being off-label. I gave him the number to medical services & he said he would call them. Dr Hernandez said he would like to ask about using Butrans for breakthrough pain & in conjunction with various other pain medications. I also let him know i would follow up with him as soon as i received clarification on Rite Aid's unbreakable carton rule. OxyContin reminder
PPLPMDL0020000001	Cleveland	OH	44114	3/30/2011	dr said she started another patient on Butrans 10mcg as the patient was taking vicodin around the clock and still in pain so dr wanted to try Butrans and see if this helps patient,we discussed appropriate tapering of short-acting opioids first,i showed dr Butrans initiation guide and we discussed workers comp patients starting on Butrans.we also discussed Butrans patient savings cards for commercial plan patients.i asked dr to think of 2 patients today and next week before i see her on Wednesday,april 6th,for lunch, that she feels can benefit from Butrans,dr said she will continue to think of patients to start on Butrans as she's not heard any complaints from patients so it must be working,i recommended Senokot-S

PPLPMDL0020000001	Cleveland	OH	44120	3/30/2011	i talked to dr briefly about patients she feels are appropriate for Butrans,showed dr Butrans initiation guide and dr asked about insurance coverage for Butrans so we discussed 3rd party insurance and the use of the Butrans patient savings cards and medicaid prior authorization requirements for Butrans.dr said she does have patients on short-acting opioids,especially her percoct patients,who complain to her or the nurse that their pain isnt controlled and they want more pills.i asked dr to stop and consider Butrans at that point for those patients instead of increasing pills or increasing percoct dosing interval.dr said she will think about it and see what patients will consider taking a patch once a week.i asked dr to only think of 2 patients who are telling her that the percoct isnt working,not controlling their pain and try Butrans there after appropriate tapering of Percocet.dr said she will do that.i recommended Senokot-S
PPLPMDL0020000001	Richmond Heights	OH	44143	3/30/2011	Spoke to Doc and Brandy about the Butrans 5 selling messages. Doc asked why it is a CII and not a CII. I could not answer that. I just explained the MOA and the risks/warnings similiar to other opioids. I discussed the positioning which he liked because he gets a lot of patients that are opioid naive or on low doses. Brandy asked about the use in the elderly. I explained that there is no dose adjustment required but respiratory depression is a concern. Doc likes the idea of Butrans better than oxycontin and Ryzolt because he does like prescribing lots of tablets. He said he will definitely prescribe Butrans. He asked if Butrans stays on for 7 days. I discussed the proper application to ensure success.
PPLPMDL0020000001	Cleveland	OH	44106	3/30/2011	i talked to dr about Butrans fpi,5 core messages, initiation guide,Butrans REMS,Butrans patient savings cards for commercially insured patients.dr asked if Butrans was on hospital formulary and i told dr that Butrans was being reviewed by the P&T committee for formulary approval and i would know in April what that answer is,dr said okay but i asked dr if he could think of his out-patient patients that have commercial or medicaid insurance that Butrans could be an option for. i showed dr Butrans initiation guide and we discussed appropriate tapering of short-acting opioids before starting therapy with Butrans.dr said he'll try it in a patient and let me know what i talked to dr about Butrans fpi,5 core messages,initiation guide,Butrans REMS and Butrans patient savings cards.i asked dr to consider 2 patients on tramadol that are asking him for something different,to consider Butrans if appropriate and showed dr Butrans initiation guide with instructions on tapering and initiating the appropriate dose of Butrans.dr said he'll look over all the information and will try to think of 1 or 2 patients to try on Butrans.dr asked if Medicaid covered Butrans? we discussed Medicaid's prior authorization requirements for Butrans and commercial plan patients using Butrans patient savings cards.
PPLPMDL0020000001	Cleveland	OH	44106	3/30/2011	Introduced Butrans to Dr Mueller. He asked about contraindications, adverse events, & drug interactions. I showed FPI section 6, 4, & 7. He said they are all trying to prescribe fewer controlled substances. I told him Butrans, like all opioids, does carry abuse & addiction potential & advised him to be just as cautious in prescribing Butrans as he would any other opioid medication. He asked if the "chronic pain" had to be from any particular source. I told him there is no specific etiology mentioned. He asked about cost- reviewed managed care coverage & savings cards for eligible patients. He asked about cash price. I asked if that comprises a large part of his practice. He said it did not but he was curious. I told him it would vary depending on pharmacy & told him cash patients can use savings cards as well.
PPLPMDL0020000001	Independence	OH	44131	3/31/2011	Dr Jack saw me & said he had just been thinking of me. I asked him if it was because he had been starting appropriate patients on Butrans. He said he has not prescribed it yet. I reminded him that he had committed to prescribing Butrans for one appropriate patient per day for the next month, which would have been 5 patients by today. He said, "Oh yeah, I did say that, didn't I?" I reminded him that he said that he liked that Butrans is transdermal & once-a-week & that he had told me he sees benefits in it for his patients. He apologized & said he really doesn't have a problem with the drug, it is just "remembering" it.
PPLPMDL0020000001	Solon	OH	44139	3/31/2011	Spoke with Julie (nurse) who said Dr Zaidi is out this week. I asked if he has prescribed Butrans yet. She said he went out of town shortly after our discussion, but that he was planning to start prescribing next week when he returns. Julie recommended I return in two weeks to check in with him. Reviewed savings cards for eligible patients.
PPLPMDL0020000001	Mayfield Heights	OH	44124	3/31/2011	Window call.... Reminded doc of the Butrans indication and patient type. He said he has not tried it yet. I gave him an initiation guide and asked him for one patient start and give them a savings card.
PPLPMDL0020000001	Barberton	OH	44203	3/31/2011	I asked Dr. Patel what he thought so far of his patients who had been started on Butran's therapy, he told me he was very pleased. He was still uncertain and asked about titration. I explained that he could titrate patients upward after 3 days. He was relieved since he thought it was 7 days. I asked him if he had additional patients in mind and closed utilizing the co-pay cards.
PPLPMDL0020000001	Cleveland	OH	44135	3/31/2011	Spoke with Ken, we reviewed the medication guide for Butrans and he agreed to help educate the patients on the proper use and application of Butrans. We reviewed the appropriate patients and Ken thinks that many patients can benefit. I let him know I was unable to talk to Dr Lali and he was not interested in even looking at the info for Butrans. Reminder about OxyContin as a long acting option as well and asked him to recommend Dr said that he does not have a lot of patient on chronic opioid therapy. We discussed appropriate patients for Butrans and that Butrans can be used for patients who are opioid naive and fit the indication. He said he will keep it in mind, but he tends to refer to pain management if patients need something around the clock. We discussed Ryzolt as an option as a once a day tramadol. Dr said he thinks Ryzolt would be a great option but has found that managed care coverage has been difficult for tramadol products due to generics. We reviewed the managed care for Ryzolt and the savings program.
PPLPMDL0020000001	Westlake	OH	44145	3/31/2011	Spoke with Wayne & introduced Butrans. Reviewed indication, dosing, CII, abuse/addiction potential, & appropriate patient type. Also went over managed care & let him know he could go online to print savings cards. I asked him what managed care makeup this location sees. He said mostly Medicare & Medicaid but he does see some commercial plans. He said he sees an increasing amount of government plans & also that there are a lot of auto worker retirees in the area. I asked who in the area he would recommend I speak with about Butrans. He said Dr Salewski is the only pain management doctor he really trusts prescriptions from. Wayne said he is cautious in filling prescriptions for all pain medications & that they no longer stock OxyContin. He did agree that it is a good option for appropriate patients & also said he sees a significant place for Butrans in the market.
PPLPMDL0020000001	Parma	OH	44134	3/31/2011	Reviewed patient information booklet & discussed application.
PPLPMDL0020000001	Cleveland Heights	OH	44118	3/31/2011	I reviewed the Butrans indication and positioning with doc. I reminded him that he previously expressed interest in prescribing Butrans. I asked if he see a benefit in a 7 day CII analgesic. He said yeah, yeah, yeah. He wants to write it. He asked me to keep reminding him because he forgets. I asked him to try for a commercially insured patient and give a savings card. REMinded him of the oxycontin savings cards for appropriate patients.
PPLPMDL0020000001	Independence	OH	44131	3/31/2011	Dr Keppler said he did not recall much about Butrans. He asked if it was transdermal & I said yes. He said he "wasn't sure" about transdermal products but that he wanted to know more about Butrans. Discussed indication, appropriate patients, abuse/addiction potential, CII, & dosing. Also reviewed chart on pg 6 of initiation guide. Reviewed adhesive matrix structure. He said he does like long-acting medications & that he tries to avoid maintaining patients on pain medications but he does find himself doing so occasionally. He asked how it compared to fentanyl & added that he "will never" use fentanyl. I explained that we have no comparative data. I told him fentanyl patients were excluded from our studies & asked him to think of the more "moderate" pain side. He asked about cost- reviewed managed care & asked him to focus on commercially insured patients & went over savings cards where applicable. He said he will look for a patient to try on it. Also gave new OxyContin savings cards.
PPLPMDL0020000001	Independence	OH	44131	3/31/2011	Quick call- Asked Dr Rob if he had started any of his patients like the ones we have talked about on Butrans. He did not answer. Reviewed indication, dosing, initiation guide pg 6, & appropriate patient type. He said he thinks it sounds like a great option & that he would "definitely put it to use".
PPLPMDL0020000001	Cleveland	OH	44106	3/31/2011	i talked to dr about Butrans fpi,5 core messages,initiation guide,Butrans REMS,Butrans application dvd/booklet and Butrans patient savings cards.dr said he has patients on tramadol that arent always happy taking pills around the clock and might be interested in a patch dosed once a week.i asked dr to think of 2 patients like that and showed dr Butrans initiation guide and asked him to start 2 patients who arent controlled on tramadol and give Butrans a try.dr said he would.we discussed managed care coverage for Butrans.
PPLPMDL0020000001	cleveland	OH	44135	3/31/2011	Dr said that he thinks Butrans will be a good option for patients instead of increasing their short acting dose. He asked about insurance coverage and we reviewed the managed care and savings cards for Butrans. He said he would try it on a patient today if they came in with the right insurance.
PPLPMDL0020000001	Cleveland	OH	44124	3/31/2011	Reviewed the Butrans indication and positioning with doc. I asked her if she has patients that could benefit from Butrans. She said of course but She has a lot of medicare, elderly patients. I explained that medicaid does require a PA but commercial patients can expect to pay about \$20/mo with savings card. She said she would think about it.<font color=blue><b>CHUDAKOB's query on 04/07/2011</b></font>Why does every pronoun in this call note refer to a woman? Initially you said you reviewed the indication and positioning with the doc. I am sure Ronald is a male. I am thoroughly confused? Please clarify this for me?<font color=green><b>SIMERTOC's response on 04/18/2011</b></font>I think I entered the wrong call. My guess is that i though I was entering a call on maybe dr. chteingardt but forgot whose name I selected.<font color=blue><b>CHUDAKOB added notes on 04/19/2011</b></font>Please take the time to review your call notes before submitting them. This can be lookd at many different ways and none of them are good. Thanks for the clarification.
PPLPMDL0020000001	Cleveland	OH	44195	3/31/2011	i talked to Anne.NP,about patients she feels could benefit from initiation of Butrans therapy.Anne said she has a lot of patients that come to see her on tramadol,vicodin or percoct and if their pain isnt controlled on short-acting opioids,she'll consider Butrans.Anne said she really just hasn't given much thought to Butrans but knows who the patient is,we looked at Butrans initiation guide and discussed managed care coverage and commercially insured patients using Butrans patient savings cards.i recommended Senokot-S
PPLPMDL0020000001	Lyndhurst	OH	44124	3/31/2011	Spoke to Tom about the stocking of Butrans. He confirmed that they have it stocked and the Dr. Laham wrote a script but patient did not pick up the script. It has been there a week. I asked if he knew what coverage/cost the person had. He said the name was scratched out so he could not tell. Tom did not know why the patient did not pick it up.
PPLPMDL0020000001	Cleveland Heights	OH	44118	3/31/2011	Spoke to Allan about the stocking of Butrans. He said he still does not have it and has not received any scripts for it. I explained the indication and the positioning we are discussing with doc. Gave him an initiation guide and explained the proper application and disposal.
PPLPMDL0020000001	Mayfield Heights	OH	44124	3/31/2011	Reminded doc of the Butrans coverage with commercial plans and BWC....medicaid/medicare require PA. She said they have still been trying to write Butrans and get it to go through. She also said the patients feedback has been good. Nothing more learned.
PPLPMDL0020000001	Cleveland	OH	44111	3/31/2011	Spoke with Jim, he has been filling in at this store a lot and may be here for good. We reviewed the medication guide for Butrans and gave him some extra copies. He was not sure who wrote for Butrans but thought there might have been a script. We reviewed the initiation guide for Butrans and OxyContin as an option when Butrans may not provide adequate analgesia. Asked to recommend Senokot S with opioids.
PPLPMDL0020000001	Cleveland Hts	OH	44118	3/31/2011	Quick call.....I discussed the Butrans indication and positioning. I asked him if he sees any advantages of Butrans. He said he likes that it is a patch. I asked him to try 2 commercially insured patients. He asked about medicare. I explained that it requires a PA.
PPLPMDL0020000001	Cleveland	OH	44109	3/31/2011	worked oncology dept-met with nurse manager,Diane,discussing Butrans fpi,5 core messages and initiation guide and trying to set-up lecture with Fellows and attending physicians in dept, worked internal medicine and family medicine-left information for each doctor in these 2 departments on Butrans and OxyContin and Senokot-S
PPLPMDL0020000001	Cleveland	OH	44135	3/31/2011	Krista said she is not able to prescribe Butrans yet until their department gives her the ok to do so. She does think Butrans will be a good option for patients and she sees herself prescribing for a patient who is wanting to increase their dose of vicodin. She said she will talk to the Drs further about it and wait for them to gain some experience first with Butrans. We discussed when OxyContin may be an appropriate option where Butrans may not provide adequate analgesia and she said he will recommend it.
PPLPMDL0020000001	Akron	OH	44320	3/31/2011	Talked to the pharmacist and told him that I had a lunch with Dr. Machado and he committed to writing Butran's. He told me that he sees a lot of patients from his practice.
PPLPMDL0020000001	Westlake	OH	44145	3/31/2011	Dr said she does not typically treat chronic pain but would like the info regarding Butrans to know if they come in on it. We reviewed the key messages for Butrans. She performs stress tests and also does interventions,
PPLPMDL0020000001	Cleveland	OH	44135	3/31/2011	Quick call in between procedures, he has not yet prescribe Butrans and said he will try it and let me know his thoughts.
PPLPMDL0020000001	Independence	OH	44131	3/31/2011	Introduced Butrans to Lisa, a new physician assistant. She said she remembers Andrea telling them about it when she was student at the office. Reviewed 5 core messages. She said she still has the initiation guide that Andrea had given her. OxyContin savings card reminder for eligible patients & recommended Senokot-S for opioid-induced constipation.
PPLPMDL0020000001	Cleveland	OH	44106	3/31/2011	worked rheumatology dept
PPLPMDL0020000001	Cleveland Heights	OH	44118	3/31/2011	Spoke to Mukul about the stocking of Butrans. I said they have it but there have been no scripts that he has seen. He asked if it covered on medicaid as they get a lot of medicaid. I explained that medicaid requires a PA and but Butrans is well covered commercially. I gave him a patient info guide and explained the proper application and disposal of Butrans.



	Cleveland	OH	44105	3/31/2011	i talked to Abdul,Pharmacist,about Butrans initiation guide and who he feels could benefit from Butrans.Abdul said there are so many patients he see's that have been on Vicodin or Percocet for 10-15years that it will be tough to get them off the pills and start on a patch.we discussed that these are probably not the best patients for my doctors to discuss Butrans with,as they are probably happy with their pills.i told Abdul i am talking to doctors about patients that are taking short-acting opioids like Vicodin or Percocet but complaining that their pain isnt controlled and possibly Butrans being an option for them.Abdul said that made sense and we discussed OxyContin as an option for those patients taking 80mg oral morphine equivalent a day or more that OxyContin is available and has 7 tablet strengths to allow for flexibility in titration.Abdul said he needed more OxyContin savings cards as they expired today,so i left 3 packs
PPLPMDL0020000001	Highland Heights	OH	44143	3/31/2011	Ask doc what issues he may be having with Butrans. He said he wants to write it and he has been trying it but nobody is covering - He asked about medicare. I told him that medicare/medicaid require a PA but commercial plans and BWC are covering Butrans. He said he just wrote a script last week for a patient that was taking about 6 percocet/day so he initiated the patient on 20mcg/he. I explained that 20mcg is only a titration dose. I reviewed the Proper initiation and the potential for withdrawal symptoms if patients are not tapered down. He said he has not had any feedback from any Butrans trials. I asked him to continue to try Butrans for commercial or BWC patients. I reminded him of the oxycontin patient indication and the 7 flexible dosing options.
PPLPMDL0020000001	Cleveland	OH	44102	3/31/2011	i talked to Nagla,PA,about Butrans fpi, 5 core messages,initiation guide,Butrans REMS and Butrans patient savings cards.Nagla works with Dr.Talbot,Dr.Celeste and Dr.Carson in this office and she said they treat so many chronic pain patients who have been taking vicodin and percocet for years that she doesn't think they will want a patch as these patients tend to not believe that a patch will control their pain.Nagla said most of these patients like their short-acting opioids as they believe it controls their pain better and they are in control of taking their pills.Nagla said its mainly in the patients minds.Nagla said from a clinical perspective,Butrans makes sense being transdermal,a patch and dosed once weekly.i asked Nagla if she ever had patients calling in for a higher dosage strength or telling her the BID regimen isnt working and she's considering to go to a TID regimen? Nagla said every day,so i told her thats where Butrans could be an option and we looked at Butrans initiation
PPLPMDL0020000001	Independence	OH	44131	3/31/2011	Roman said he will not use Butrans until he "knows more about it". He said that he wants to know things that i won't be able to tell him because they are off label. I asked if he had a specific question & told him we could submit it to medical services & that they would answer it. He declined. He said he wants to go to a dinner & speak with a specialist about it. I asked what specialists in the area he refers to for pain management & he said Dr Nickels & Dawoud. He said he has worked with Buprenex for addiction & asked if Butrans was "the same as that". Reminded him that Butrans only has an indication for moderate to severe chronic pain & does not have an indication for addiction treatment. Reviewed transdermal system. I asked him if he would at least try it on label before considering any other use but he said he wouldn't prescribe until a dinner program with a specialist. Gave new OxyContin savings cards & recommended Senokot-S for medication-induced constipation.
PPLPMDL0020000001	Cleveland	OH	44195	3/31/2011	i talked to Kathy,PA for Dr.Mintzer and Dr.Mekhaill's patients in pain management department,about patients she feels are appropriate for Butrans.Kathy said she see's a lot of patients on tramadol,vicodin and some on percocet and she's recommending Butrans as an option when patients come in to office complaining of short-acting opioids not controlling their pain.we discussed proper tapering and initiation of Butrans and discussed commercial plan,medicaid and workers comp coverage of Butrans.i recommended Senokot-S
PPLPMDL0020000001	Copley	OH	44321	3/31/2011	Introduced Butrans again and asked him what he thought of the molecule Buprenorphine. He again told me that he felt like it had a high abuse potential. I explained that it was an opioid and did have an abuse potential similar to other opioids. I went over the dosing and when he was able to understand that this was for a more moderate patient he became much more comfortable. He said he would try it on 2 patients this week.
PPLPMDL0020000001	Beachwood	OH	44122	3/31/2011	Spoke with Shelly & asked if she had heard anything on her end regarding the Butrans "unbreakable carton" issue. She checked her system & said that on 3/15 she was able to run a prescription for 2 patches through without problem. I told her i have still been hearing reports of prescriptions for 1 or 2 patches not getting filled because of the system lockout, including one in a Burton, OH Rite Aid location. While i was there, she ran one "test script" for one patch & one for two patches, both of which went through. She said she would call the Burton store to talk to them about it & would also call her district manager to alert them to this issue as she said she is afraid they are going to lose business as patients will take their prescriptions to other pharmacies willing to fill it for fewer than 4 patches. She said she would let me know what the resolution is once she finds out.
PPLPMDL0020000001	Cleveland	OH	44102	3/31/2011	i talked to dr about patients she feels could benefit from Butrans,dr said she thinks patients taking 40mg[10mg vicodin] a day could be beneficial to her patients, to try Butrans there. we discussed when patients call in,that she just started on 5mg or 7.5mg Vicodin,to not increase dosage strength or dosing interval of short-acting opioids but to consider Butrans at that point.dr said okay that made sense as she wasn't really thinking of that patient,she was thinking more of the 40mg a day patient whether it be vicodin or percocet.dr said a lot of patients think the short-acting opioids control control their pain better than a long-acting opioid because its in their mind that the pills q4-6h will control that pain.dr said she likes that Butrans is transdermal and dosed once weekly and will think of a few patients to try Butrans in and see what results she gets from Butrans.i asked dr to consider 2 patients with commercial plan insurance so that they can use Butrans patient savings cards
PPLPMDL0020000001	Highland Heights	OH	44143	3/31/2011	Debbie was at Dr. Salama's office for lunch. I discussed the Butrans positioning and the 5 selling messages. She just wanted clarification on the scheduling. I confirmed that its a CIII.
PPLPMDL0020000001	Cleveland	OH	44195	3/31/2011	i talked to dr about patients he feels could benefit from starting on Butrans and i showed dr Butrans initiation guide.i asked dr what benefits he saw in Butrans for his patients? dr said he likes once weekly dosing and transdermal delivery of Butrans.i asked dr if he had patients on vicodin or percocet that ask him for something different as their pain isnt controlled with short-acting opioids? dr said yes every day patients say this to him or nurses.i asked if dr could consider Butrans for 2 patients,that are like this and appropriate for Butrans,and properly taper their short-acting opioids and then start Butrans? dr said he will consider that when he's with patients that he feels are appropriate.i recommended Senokot-S
PPLPMDL0020000001	Strongsville	OH	44136	4/1/2011	Introduced myself & Butrans to Megan (pharmacist). She said they do not have it (although they appear to have ordered 2 boxes of 5mcg per stocking data). Reviewed indication, dosing, appropriate patients/positioning. Also gave her new OxyContin savings cards & reviewed usage for eligible patients.
PPLPMDL0020000001	Twinsburg	OH	44087	4/1/2011	Spoke with Christina (floater) & reviewed Butrans indication, dosing, appropriate patient type. Also gave new OxyContin savings cards & reviewed eligibility requirements. She said she would leave everything for Lou.
PPLPMDL0020000001	Parma	OH	44129	4/1/2011	Quick call- Jen is now the only practitioner in the Parma office as Laura is now officially in their other location full time. Jen said she is overwhelmed & hasn't thought of Butrans. Reviewed indication, dosing, & appropriate patient with her before she went into a room. Also spoke with Dawn & Butrans appropriate patient type, managed care coverage & savings cards for Butrans & Ryzolt.
PPLPMDL0020000001	Warrensville Heights	OH	44122	4/1/2011	Spoke with Iuliana (nurse) & Kelli (MA) who said Dr Khalafi is out all week & will return next Tuesday. Showed her initiation guide & reviewed indication, dosing, appropriate patient type, CIII, & savings cards for eligible patients. Iuliana said she remembers me talking about Butrans & that she would leave the initiation guide on Dr Khalafi's desk for when he returns. She said he has a lot of patients who fit the indication that may like a
PPLPMDL0020000001	Garfield Hts	OH	44125	4/1/2011	Spoke with Amy (MA) who said Dr Kline was in a training today & therefore was unable to see me. Reviewed Butrans indication, dosing & appropriate patient/positioning with her. She said she would remind Dr Kline. She was not sure if he had prescribed Butrans yet. Also reminded her of savings cards for eligible patients.
PPLPMDL0020000001	Brooklyn	OH	44144	4/1/2011	Quick call- Dr Miguel said he did not have time to talk today. Butrans dosing & appropriate patient reminder. Also spoke with Tiffanie (MA) & reviewed new OxyContin savings cards for eligible patients.
PPLPMDL0020000001	Lyndhurst	OH	44124	4/1/2011	Quick call....reminded doc of Butrans - a 7 transdermal system delivering buprenorphine. I asked if he has identified appropriate patients. He said not really. I explained the positioning and the indication. I also explained that it is still a CIII and has the risks/warnings similar to other opioids.
PPLPMDL0020000001	Beachwood	OH	44122	4/1/2011	Spoke with Tara & Yvonne (MA) who said Dr Tabbaa & Jim had just left for the day. Reviewed Butrans indication, dosing & savings cards with them & asked if they knew if he had been prescribing at all. They said that it sounded familiar & that they think he has been, but they were not sure. The tried to check savings card inventory but could not locate the key to the sample/coupon cabinet. They said to come back next Friday at the end of the day to try to catch Dr Tabbaa.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/1/2011	Followed up with Dr. Ali based on information he had shared with me last call when he told me he had initiated Butrans therapy. I asked him how the patient was doing and if they were having success and he said that the patient was unable to get the Rx filled because they had Medicaid. I reiterated how important it was to initially start therapy on patients who had either BWC or commercial insurance since those patients would be able to take full advantage of the patients saving cards i had left. He agreed he would focus on a commercially insured patient.
PPLPMDL0020000001	Cleveland	OH	44195	4/1/2011	worked pain management dept,chronic pain and pm&r - had to leave information for all doctors with medical secretaries,so left information on Butrans,OxyContin and Ryzolt and my business card
PPLPMDL0020000001	Westlake	OH	44145	4/1/2011	I asked Dr about the patient he started on Butrans. He said that it was a patient who was on vicodin 7.5 4 times per day. He said he gave the patient the instructions on how to ween down to 2 tablets per day and then to start Butrans. The patient said that Butrans was too expensive and would be about \$150. I asked which insurance and Laura said it was Anthem. I reviewed the managed care for Butrans and the savings program and that most commercial patients can get Butrans for around \$15. I asked the Dr if he would think of another similar patient on vicodin around the clock to try Butrans and he agreed.
PPLPMDL0020000001	Lakewood	OH	44107	4/1/2011	I reviewed our last conversation about patients who are taking 3-4 5mg vicodin per day whose pain is not well controlled. I asked if he would be seeing a patient like this today and would be start them on Butrans instead of increasing their short acting. Dr said he will keep it in mind.
PPLPMDL0020000001	Lakewood	OH	44107	4/1/2011	I asked Dr if he could think of just one patient who he could start on Butrans today. He said that he thinks he has a previously darvocet patient coming in next week where Butrans may be appropriate. We discussed the indication for Butrans and he said the patient does have chronic pain. We reviewed how to initiate Butrans in an opioid naive patient and he said he will give it a try. I spoke with Kim said she would pull the patient's chart and make a note to remind the Dr. She could not remember the patients managed care off the top of her head.
PPLPMDL0020000001	Akron	OH	44312	4/1/2011	Window call. Dr. Hill came to the window and gave me a quick minute since he had not yet heard of Butrans. I was able to go over the indication and once daily dosing. I also explained that it was a single entity opioid, LA and a schedule 3. He seemed surprised it was schedule 3. I asked him if he had many patients who were on low dose hydrocodone and he said he had several but prefers not to treat chronic pain. I asked him if he would consider using Butrans for patients currently on low dose hydrocodone and he said he would be more interested to learn more about it and asked if i had a lunch.
PPLPMDL0020000001	Cleveland	OH	44109	4/1/2011	i talked to dr about patients he see's taking tramadol around the clock for their chronic pain,yet telling dr their pain isnt controlled with the short-acting opioid and thats the place where Butrans could be an option,showed dr Butrans initiation guide for the discussion and dr said he'll think of a few patients to try Butrans in and see what happens.i recommended Senokot-S
PPLPMDL0020000001	Mayfield Hts	OH	44124	4/1/2011	I reviewed the Butrans indication and positioning and asked him if he could commit to trying one patient on Butrans next week. He said he would try. I asked him to try for a patient with private insurance and be sure to give them a savings card.
PPLPMDL0020000001	Cleveland	OH	44109	4/1/2011	worked rheumatology dept-see call notes, need to follow-up with Linda,RN,on Monday, April4th,about booking a lunch with rheumatology dept
PPLPMDL0020000001	Lakewood	OH	44107	4/1/2011	I asked if we could continue our discussion about Butrans and Dr said he didn't have a lot of time today. He said that he does want to try it and committed to prescribing.
PPLPMDL0020000001	C. Falls	OH	44223	4/1/2011	Spoke to the pharmacist Larry, I let him know that i had to spoke to Dr. Ali and he had committed to starting 2 patients on Butrans who had commercial insurance. I went over the patient education guide so he would be able to educate patients on how to properly apply and dispose the patch.
PPLPMDL0020000001	Lakewood	OH	44107	4/1/2011	I reviewed our conversation about prescribing Butrans before going to vicodin. He said he does have patients where tramadol is not enough. I asked him to try Butrans after tramadol in just one person today he said he would. Reminded the staff to recommend Senokot S with opioid scripts.
PPLPMDL0020000001	Garfield Hts	OH	44125	4/1/2011	Spoke with Dina (MA) who said i just missed Dr Sadowski. Spoke with her about his patient population. She said he does see a lot of patients who fit the Butrans indication. She said she thinks many of them would appreciate a once-a-week transdermal option to treat their pain. Dina said she has placed Butrans savings cards in two exam rooms in effort to keep branding in front of him. She said to stop back next week to catch Dr Sadowski.
PPLPMDL0020000001	Akron	OH	44312	4/1/2011	Dr. Smith gave me a minute through the window. I left a booklet FPI and explained that this product had recently been introduced to the market. I went over the indication and explained that it was a LA, single entity opioid. He asked me to schedule an appointment.

	Richmond Heights	OH	44143	4/1/2011	Discussed the Butrans 5 selling messages, the positioning and the CIII status. Doc said he definitely has patients that fit into that category. He asked if special licensing required to prescribe Butrans. I told him no and that Butrans is buprenorphine at a much lower dose than suboxone which he compared it to. He asked about the conversion rates from Morphine. I explained the approx equivalents. He wanted to know where 20mcg would be used. I explained that it is just a titration dose and the potential for withdrawal symptoms. He said he is definitely interested in prescribing Butrans but he would like to read more about it. He asked for journals articles on clinical trials/medical letter. He said he and a lot of other docs think highly of medical letters. Told him I would provide more info as soon as I get it. Reminded him of the oxycontin indication, dosing, and preferred
PPLPMDL0020000001	Cleveland	OH	44109	4/1/2011	i talked to dr about patients he feels are appropriate for Butrans, showed dr Butrans initiation guide and dr said he has some patients on tramadol that he knows could benefit from Butrans but he needs to talk to them about Butrans being a patch, we discussed proper tapering and initiation of Butrans, we discussed Butrans patient savings cards and formulary coverage and i asked dr to start 2 patients on Butrans that are taking tramadol around the clock for their chronic pain but are asking him for something different dr said he would start a few patients on Butrans and let me know what results he gets. i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44104	4/1/2011	i talked to dr about Butrans fpi, 5 core messages, initiation guide, Butrans REMS program and Butrans patient savings cards and patient information booklet/application dvd. dr said she heard of Butrans being a buprenorphine transdermal delivery but that is, so we discussed who was and wasn't appropriate for Butrans and i asked dr where Butrans fit in her practice? dr said she has patients with chronic pain that are always asking for more pills and their short-acting opioids never seem to control their pain. i asked dr if she could think of 2 patients like this, showed Butrans initiation guide and after proper tapering, start 2 patients on Butrans? dr agreed. i recommended
PPLPMDL0020000001	Cleveland	OH	44104	4/1/2011	i discussed Butrans fpi, 5 core messages, initiation guide, application dvd/booklet, Butrans REMS and Butrans patient savings cards. dr said she has so many patients with chronic pain that are taking short-acting opioids like tramadol, vicodin and percocet and she feels Butrans once weekly dosing and transdermal delivery are both benefits to her patients. i asked if dr could think of 2 patients that are taking their short-acting opioids around the clock and telling her that their pain isn't controlled, and start these 2 patients on Butrans after proper tapering? Dr said yes, she will start a few patients and get some clinical experience with Butrans. i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44130	4/1/2011	i told Dr Diab that it had seemed as though he was excited about Butrans when i first told him about it but that it seems his excitement has dissipated & asked him why. He said he did not know. I reminded him that he had said in the past that he liked the idea of a once-a-week transdermal system to treat pain. He said he still thinks it is a good option. He said he thinks cost will be an issue & added that he has written 3 prescriptions for Butrans & had one rejected. Reminded him of commercial coverage & savings cards & let him know that Medicare D & Medicaid plans would require prior authorization & a potentially higher co-pay. He said he would continue to
PPLPMDL0020000001	Copley	OH	44321	4/1/2011	Followed up with Dr. Machado. He said he did not like Buprenorphine because it was once an addictive nasal spray. I let him know that that was not Buprenorphine and it has never been available in a nasal spray. He looked it up and validated that it was NOT ever a nasal spray. He was appreciative that I had come in to clarify and he was confident to write Butran's.
PPLPMDL0020000001	Akron	OH	44312	4/1/2011	Introduced Butrans and FPI to Dr. Manning briefly as I was explaining therapy to the RN Diane. Dr. McRoberts asked me again about the once a week dosing after hearing me say it one. This was a big selling point to him since he has [patients who have been taking hydrocodone several times a day for a long period of time. He said that he tries not to treat a ton of pain but has several patients this may benefit.
PPLPMDL0020000001	Akron	OH	44312	4/1/2011	Introduced Butrans and FPI. Started the conversation speaking with one of the RN's Diane and Dr. McRoberts became engaged when he came out of a patient room and overheard our conversation. I was able to go over the indication and 7 day dosing. He asked me to schedule a lunch so he could learn more.
PPLPMDL0020000001	Cleveland	OH	44104	4/1/2011	dr and i talked about who he feels could benefit from Butrans and dr said out of all the patients he starts on Butrans, only 20 patients are in the office, all the rest are in the hospitals where he gives short-acting opioids like tramadol, codeine and percocet. i asked dr if those 20 patients he has in the office are ever saying to him that the 5mg percocet isn't controlling pain, so he increases dosing interval to BID, so now patients taking 10mg percocet? dr said yes, he'll start with 1-5mg percocet, then 2-5mg percocet, so i told dr he could start Butrans there, instead of increasing dosage strength and dosing interval. we discussed Butrans coverage for medicaid and commercial plan patients. i asked dr if he could think of 2 patients to start like this and i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44104	4/1/2011	dr said he just came back from Geriatrics conference in Tampa, FL and Purdue had a speaker there on Butrans so he was able to attend this lecture and did learn a lot from speaker. i asked dr what benefits he saw in Butrans, as he has started a few patients, dr said he has started 2 hospice patients and 1 was discharged and is home doing fine on Butrans, another patient was in his office but he thinks commercial insurance was expensive, \$200 for Butrans, so we discussed Butrans patient savings cards for commercially insured patients and i asked dr where he thought Butrans would best fit into his patient population in office? dr said patients taking 40mg hydrocodone or oxycodone a day. i asked dr if he could consider Butrans earlier, 15-40mg opioid experienced patients, dr said he would and his only question was about starting patients who were older, 65 and older, thin patients, on
PPLPMDL0020000001	Macedonia	OH	44056	4/1/2011	Butrans? i showed dr Butrans fpi, geriatric use section, but dr wanted medical information request form filled out. Quick call- Spoke with Eve (pharmacist). She said she has not seen any Butrans activity yet & did not have any suggestions on what area practitioners may be interested. Asked if she stocked OxyContin. She said she does stock some strengths. Gave her savings cards for eligible patients. She said to come back another time when they are not so busy.
PPLPMDL0020000001	Cleveland	OH	44104	4/4/2011	dr and i discussed appropriate patients for Butrans, looking at Butrans initiation guide as he said he could remember who the right patient was. dr asked about insurance coverage for Butrans so we talked about doctors workers comp and commercial plan patients trying Butrans and dr said he will think of 1 or 2 patients he can start on Butrans.
PPLPMDL0020000001	Cleveland	OH	44103	4/4/2011	i talked to Sonia, Pharmacy Technician and Baharah, Pharmacist, about Butrans stocking and any scripts that they have seen. They both said they haven't gotten any scripts since dr sahgal sent 1 patient there. we discussed Butrans initiation guide, patient savings cards and i asked each of them to recommend Butrans for appropriate patients, they both agreed
PPLPMDL0020000001	akron	OH	44333	4/4/2011	i asked Dr. Bashor if he could think of one patient to initiate Butrans therapy to and he said that he was thinking of some of his elderly population. I reminded him that Butrans requires PA for state plans and told him that it would be easier to initiate therapy to a commercially insured patient. He said he would keep it in mind.
PPLPMDL0020000001	Akron	OH	44333	4/4/2011	Dr. Browns practice is starting to get busier and she has already committed to starting both opioid naive patients and opioid experienced patients on Butrans. I asked her why she thought Butrans would benefit her practice and she said she liked that it was a LAO and that it is a schedule 3.
PPLPMDL0020000001	Garfield Heights	OH	44125	4/4/2011	Introduced Butrans to Dr Geeta, delivering 5 core messages & alerting her to box warning. She said she does not treat chronic pain & refers to pain management if a patient needs an opioid. Asked her how long she waits to refer & she said she usually writes a prescription for 1 month, 2 at the most before she would refer to South Pointe pain management group. She said as a general rule, their practice does not prescribe opioids because these patients are complicated & pain management specialists are better equipped to handle those issues. She said she likes to have information about new products but likely does not have a place for Butrans in her practice. Recommended Senokot-S for medication-induced constipation.
PPLPMDL0020000001	Copley	OH	44321	4/4/2011	i asked Dr. Heim if he would feel comfortable converting 2 patients from low dose hydrocodone to Butrans and he said he would. I went over the initiation guide so he would understand what dose would be most appropriate depending on how much Vicodin they were currently taking.
PPLPMDL0020000001	Akron	OH	44333	4/4/2011	i asked Becky if she had thought any more about initiating Butrans therapy to patients who have been on low dose hydrocodone. She said that she wants to try it and would keep it in mind.
PPLPMDL0020000001	Cleveland	OH	44109	4/4/2011	worked internal medicine department-had to leave Butrans fpi, initiation guide, patient information booklet and business card for Dr. Lindheim, Dr. Falck-Ytter and Dr. Harrington and worked out-patient pharmacy
PPLPMDL0020000001	Akron	OH	44333	4/4/2011	Dr. Shah has initiated therapy to several patients, all who are opioid experienced. I asked him about starting Butrans therapy instead of prescribing hydrocodone to an opioid naive patient and I went over the AE's listed in the
PPLPMDL0020000001	Fairlawn	OH	44333	4/4/2011	i asked if there has been any movement and d she said she thought there had been a script or two but couldn't remember from who. I went over the patient education guide and explained application and disposal.
PPLPMDL0020000001	Cleveland	OH	44106	4/4/2011	worked pain management dept-dr hayek was still in lecture so couldnt see him today, worked total office call for Butrans, internal medicine-talked to internal medicine resident coordinator, Barb, who said to stop back tuesday and leave Butrans fpi, initiation guide and my business card for each Chief Resident(5) and she will set-up appointments with each one for me; worked pm&r department-Dr. Baig was out so jennifer, medical secretary, said to stop back tomorrow and discuss Butrans with doctor
PPLPMDL0020000001	Cleveland	OH	44106	4/4/2011	i talked to Cheryl, Narcotics Buyer, as Wes, Clinical Pharmacist who is team leader for new drugs being presented to P&T committee was in hospital making rounds. Cheryl said all she knows is Butrans was presented, got good feedback from P&T committee members but she's not sure what decision was, yes/no for hospital formulary. Cheryl said to follow-up with Wes tomorrow when i stop back at UH
PPLPMDL0020000001	Mogadore	OH	44260	4/4/2011	Introduced Butrans, reviewed FPI, indication, dosing and titration, boxed warning and 5 core messages. She said she does not treat pain much. I asked if she writes Tramadol and Vicodin and she said yes, I asked if any are on around the clock and chronic and she said yes. I said this is where Butrans would fit. She said she can see it filling there in her practice, maybe not alot because she is not treating as much pain. Discussed managed care and savings cards.
PPLPMDL0020000001	Warrensville Heights	OH	44122	4/4/2011	Re-introduced Butrans to Dr Gupta, reminding him of dosing, delivery system, & indication. He asked if Butrans is only for chronic pain. I told him there is no specification of etiology that must cause the pain as long as it is considered moderate to severe chronic pain. He said he usually refers to pain management for more chronic issues but may be able to use Butrans in nursing home patients. I mentioned prior authorization likelihood with those patients & asked him to think of commercially insured patients. He asked if it gives constant delivery over 7 days & adverse events. Showed FPI section 12.3 & 6. He asked how it compares to fentanyl & Percocet. Told him we have no comparative data & showed FPI 2.2. Discussed starting dosing & ability to titrate every 3 days. He asked about contraindications- showed FPI section 4. Also discussed CIII & box warning. He said it is an option
PPLPMDL0020000001	Mogadore	OH	44260	4/4/2011	Dr came in and said he has not written Butrans yet and he asked why again would he write this and I said for him to tell me and he said honestly he has forgotten. We reviewed Butrans appropriate patients and dosing and then i asked him how he sees this as a benefit to his practice and he said he sees this as a huge benefit the fact that it is once a week, there are no pills and it is transdermal, he thinks there is more control and compliance. He asked about cost and we reviewed that. HE said it would be ideal if this is covered on Medicare. HE said he just needs to write a script and he would remember. I told him the best way to do that it to think of specific patient and he said he is and they are on medicaid. HE said this would be good in his Darvocet patients, rmeinded we are indicated for moderate pain I said if the patient is on medicaid or medicaid he can go to low dose Oxycontin
PPLPMDL0020000001	Mogadore	OH	44260	4/4/2011	HE said he has a couple of patients on Oxycontin and asked about savings cards so i left him a pack
PPLPMDL0020000001	Mogadore	OH	44260	4/4/2011	Joe said he has not written Butrans. I asked how he thought Butrans could be a benefit to his practice and he said he thinks it is great because it is giving him a long acting options and he likes the fact that it is transdermal and not pills so it would be less potential for abuse. I told him that it is schedule 3 and there is the same potential for abuse as any other schedule 3 and he said he knows he meant to say there is more compliance with transdermal. I asked if he has a patient who is on Tramadol what is his next step if they are in pain around the clock and he said he would keep a patient on tramadol as long as possible because it is not scheduled. I said what if it is not working and he said this would be good there. I asked when he considers a patient chronic and he said a combination of disease state and how long they have been taking medicine. HE said usually around 3-4 months. HE asked about cost and we discussed savings cards.
PPLPMDL0020000001	Warrensville Heights	OH	44122	4/4/2011	Introduced Butrans to Dr Gulati. He said he had just seen an advertisement about Butrans. Reviewed indication, delivery system, dosing, CIII & abuse/addiction potential. He said their practice does not prescribe opioids & that they refer to South Pointe pain management for that.
PPLPMDL0020000001	Cleveland	OH	44109	4/4/2011	i talked to Chris, pharmacist, about stocking of Butrans and Chris said Rob, Pharmacy manager was gone for day but i can follow-up on Friday to talk with him about Butrans as they dont have it stocked and havent ordered Butrans. i asked Chris what benefits he saw in Butrans for his patients? Chris said the fact that Butrans is a patch, dosed once a week, is much easier for some patients that dont like taking pills around the clock for their chronic pain or their pain isnt controlled with the short-acting opioids. Chris said the problem is insurance coverage as they have many patients paying cash for their medications and medicaid so Butrans would have to be available to these groups of patients we discussed managed care coverage for Butrans, specifically commercial plan coverage and the Butrans patient savings cards, medicaid prior authorization requirements and workers comp
PPLPMDL0020000001	Parma	OH	44129	4/4/2011	Told Dr Ortega that I had thought about our last conversation & that it had seemed that he was uneasy about the tapering discussion we had before. I told him I wanted to be sure that he felt comfortable in initiating Butrans therapy in his patients who he selected & asked him if he had any further questions or issues with this. He said that he does not & that he feels comfortable with tapering patients if necessary.
PPLPMDL0020000001	Fairlawn	OH	44333	4/4/2011	i asked Dr. Oyakawa what was the most important thing he needed to know before prescribing a new product. He said safety concerns.
PPLPMDL0020000001	Fairlawn	OH	44333	4/4/2011	i asked Dr. Weidman if she had additional patients like the ones she had tried Butrans therapy on. She said that she liked the idea of the LA therapy but could not think of any other patients to try it on at the moment. I reminded her what the ideal patient looked like and asked if she had any coming in this week. She said she would keep it in mind.

PPLPMDL0020000001	Westlake	OH	44145	4/5/2011	Spoke with Amin, we reviewed the Butrans medication guide and how to instruct patients on the proper use and application. He asked about the adhesive and we reviewed what to do if the patch comes off or the edges come up per the medication guide. I reviewed OxyContin as an option when Butrans may not provide adequate analgesia. Reminder to recommend Senokot S.
	Cleveland	OH	44106	4/5/2011	I talked to Matthew, Pharmacist, as Steve, Pharmacy Manager was out today, about Butrans stocking and scripts they have seen. Matthew said he thinks 1 or 2 scripts have come from pain management but wasn't sure. I showed Matthew Butrans initiation guide and we discussed appropriate patients for Butrans. Matthew said he likes that Butrans is once weekly dosing, transdermal and is a patch. I asked if Matthew would recommend Butrans to patients on short-acting opioids that are complaining to them in pharmacy about their pain not being controlled on short-acting opioids, so perhaps Butrans could be an option. Matthew said he would do that and told me to follow-up with Steve, Pharmacy manager in next week or so.
PPLPMDL0020000001	Parma	OH	44134	4/5/2011	Dr Hernandez said he has been telling patients not to fill their Butrans prescriptions at Rite Aid until the "unbreakable carton" issue is resolved. He said he likes to write for one patch, see how the patient tolerates the dose before writing for a full month's supply. Asked what types of patients he has been choosing for Butrans & he said he usually uses it in patients who are already taking a few Vicoden per day. He said that he likes that he can use Butrans in place of Vicoden for appropriate patients. He also added that when he does get an opioid-naïve patient, he tries them on Butrans as well. He said he has never been happier with a drug than he is with Butrans & will continue to prescribe.
PPLPMDL0020000001	Cleveland	OH	44130	4/5/2011	Re-introduced Butrans to Dr Sawmhy. Reviewed indication & asked if he treats chronic pain in his practice- he said yes, a lot. He said he does procedures (implants, pumps) & also manages patients' oral pain medications. He said he likes a once-a-week dosing option & likes long-acting medications. Reviewed initiation guide & showed pg 6 for positioning. He asked if the levels of drug stay constant. Showed FPI section 12.3. He asked how Butrans compares to fentanyl. Told him we have no comparative data & asked him to think of more "moderate" side of pain. Reviewed managed care coverage & asked him to focus on commercial insurance so that patients could utilize savings cards. He asked about worker's comp coverage- told him as of now it is being paid for. He committed to prescribing Butrans for appropriate patients with worker's comp coverage. OxyContin reminder for appropriate patients & gave savings cards. Reviewed savings cards & initiation guide with Shelley (office manager).
PPLPMDL0020000001	Akron	OH	44310	4/5/2011	I asked Dr. Janolo if he saw the value that Butrans therapy could bring to his practice he said he liked it and that there was a definite need for a product like this. I asked him what type of patient specifically he may try it on and he said a patient who was currently on hydrocodone. I proceeded to go over the titration brochure so he had a clear understanding of the appropriate patient. <font color=blue><b>CHUDAKOB added notes on 04/15/2011</b></font>This csll note is one of your better ones. It talks mostly about what the doctor said based on your questions.
PPLPMDL0020000001	Parma	OH	44129	4/5/2011	Dr Gigliotti said he has not prescribed Butrans yet. He said he has not seen a patient who fits the indication who he trusts. I asked him if trusting patients was an issue in his practice & he said it was more that he hasn't seen someone who "isn't already on something". I asked him if those patients who he sees who are on something already for their pain ever ask for an increase in their dose from 2-3 Vicoden. He said this does happen frequently. Told him those are the patients, if they have commercial insurance, that he should think of for Butrans. Dr Gigliotti said he would continue to look for the appropriate patients for Butrans. Gave him an initiation guide as a
PPLPMDL0020000001	Mayfield Heights	OH	44124	4/5/2011	Debbie thanked me for the f/u on Butrans coverage on Cleveland clinic formulary. She said that they have not had any issues with coverage since focusing on commercial patients. Patients have had good results/feedback with Butrans and no complaints about the patch falling off. She asked if Purdue offer any solutions for those instances. I explained the acceptable use of first aid tape or tegaderm. Reminded her of the preferred coverage of
PPLPMDL0020000001	Westlake	OH	44145	4/5/2011	Met Dr while on the way to Dr Khalil's office. He asked about Butrans and I reviewed the key messages about Butrans. He said that he is a neurologist, treats a lot of pain and that he would like me to leave all of the information on Butrans at his office. He said that he likes transdermal systems and prescribes Duragesic often. I left the Butrans info with Elizabeth and she will call to set up an appointment if the Dr would like to talk further. Elizabeth is the Prior auths for the office. I reviewed the managed care for Butrans and the savings cards. Don usually works the front desk.
PPLPMDL0020000001	Cleveland	OH	44124	4/5/2011	Quick call.... doc did not need savings cards. I reviewed the Butrans indication and positioning. Also reminded him of the preferred coverage for oxycontin. Nothing learned.
PPLPMDL0020000001	Cleveland	OH	44195	4/5/2011	I talked to Steve, Assistant Pharmacy Manager, as Curt, pharmacy manager wasn't available to talk, we discussed Butrans stocking and scripts they are seeing. Steve said he thinks a couple from the Anesthesia/Pain management and Chronic pain department have come through pharmacy. I asked Steve if he will recommend Butrans to those patients who are taking short-acting opioids around the clock, for their chronic pain, and not controlled? Steve said he will but it depends on relationship with doctor, so he'll keep it in mind and took Butrans initiation guide. I recommended Senokot-S and left Senokot-S protocol pad
PPLPMDL0020000001	Cleveland	OH	44195	4/5/2011	worked anesthesia/pain management dept-attended lecture, talked to some HCP's and left information for Dr. All as he wasn't available to talk to me and the receptionists said he will look at my information (Butrans fpi, initiation guide and Butrans patient information booklet and my business card) and if he's interested in meeting me, he will contact me for an appointment. I left information for a few PM&R doctors: Dr. Hou, Dr. Reddy and Dr. Jedlicka on Butrans- I left Butrans fpi, initiation guide and Butrans patient information booklet and my business card and asked secretaries to talk with doctors about setting up an appointment with me.
PPLPMDL0020000001	Akron	OH	44310	4/5/2011	I asked Dr. Cremer if he had initiated therapy to the patients we had discussed on my last visit. He said he had tried it on the two patients, both which were on low dose hydrocodone. He said he would see how those patients responded and go from there.
PPLPMDL0020000001	Mayfield Heights	OH	44124	4/5/2011	Spoke to Dana about the stocking and movement of Butrans. She said they have been getting a few scripts from Dr. Dew's office. I asked if there have been any issues with cost/coverage. She said no. She had not noticed customers coming in with savings cards. She could not recall how much patients are paying. Gave her patient info and my card if she needs savings cards.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	4/5/2011	Dr. DiLauro has started 5 patients on Butrans, which h as been a combination of both opioid naïve and opioid experienced patients. She said she would continue to use Butrans therapy since she has gotten positive feedback.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	4/5/2011	Had a discussion with Dr. Roseanne and Dr. Cyndi together that allowed Dr. Cyndi to explain to Dr. Roseanne what type of patients she is initiating Butrans therapy to. Dr. Roseanne felt more confident when she heard Dr. Cyndi had already been prescribing it and agreed to try 2 patients.
PPLPMDL0020000001	Westlake	OH	44145	4/5/2011	Spoke with Darrel, we reviewed the key messages for Butrans and the medication guide for patients. I asked his thoughts about Butrans as an option and he said that he thinks that many of their patients could benefit from Butrans instead of taking tablets around the clock. Reminder to recommend Senokot S with opioid scripts.
PPLPMDL0020000001	Cleveland	OH	44106	4/5/2011	dr said he hasn't started anyone on Butrans yet and apologized because he thinks this is a good medication being transdermal and dosed once a week. dr asked me about patients he could start on Butrans and the initiating dosage strengths? I showed dr Butrans initiation guide and asked him to start a few patients, that are currently taking tramadol around the clock for their chronic pain, on Butrans so that he can get some clinical experience. I told dr to think of patients that are telling him or Kim, Medical Assistant, that their pain isn't controlled and they want something else. dr said he will consider Butrans for a few patients as he's in clinic today and tomorrow and then in procedures all Thursday and going out of town for a week, so he won't see me again until April 19th at our lunch. I told dr I am looking to him, for his clinical expertise and feedback as he's the chief of anesthesia/pain at
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/5/2011	I asked Dr. Higley how many times a week he was currently prescribing low dose hydrocodone for chronic pain. He said a couple times. I asked if he would consider trying Butrans on just one of those patients so we could discuss their success at my upcoming lunch and he said he would keep it in mind.
PPLPMDL0020000001	Mayfield Heights	OH	44124	4/5/2011	Spoke to Warren about the stocking and movement of Butrans. He said he still has it and has been seeing a couple of scripts per week - mostly coming from . I asked if he has had any issues. He said no and that customers come in with their savings card. I gave him an initiation guide and reviewed the application and disposal for patient information.
PPLPMDL0020000001	Westlake	OH	44145	4/5/2011	Quick call as Dr walked by, he said there is no new news to report with Butrans and he is still continuing to prescribe with good feedback so far. I spoke with Kelly and Tina, there has not been any call backs or managed care issues that they know of with Butrans.
PPLPMDL0020000001	Westlake	OH	44145	4/5/2011	I asked Dr where he sees Butrans fitting into his practice. He asked that I review the main points to refresh his memory as he just got back from Egypt for 4 weeks. We reviewed the key messages about Butrans. I asked what benefit it sees in Butrans and he said that he likes the mechanism of action of buprenorphine and that it is a partial agonist. We discussed appropriate patients for Butrans and the initiation guide. Dr said he had a methadone patient in mind to convert to Butrans but he said he will have think about how to initiate this patient since he feels that the conversion from methadone can be tricky based on how long the patient has been on it due to the long half life. I told him to use discretion and that our initiation guide is not a conversion guide. Dr asked if I had any education regarding neuopathic pain. I asked if he sees a lot of these types of patients, he said no but he is giving a talk on the subject. I referred him to our med ed catalog. Spoke with Juan re Butrans
PPLPMDL0020000001	Lakewood	OH	44107	4/5/2011	Quick call when Dr walked by, he said to just keep reminding him about Butrans and he will start writing. I asked him to start one patient today while it's fresh in his mind.
PPLPMDL0020000001	Lakewood	OH	44107	4/5/2011	I asked Dr how many patients are coming in today who will complain their short acting vicodin or percocet is not enough. She said she wasn't sure but she has those patients. I asked if she would start a few of them on Butrans and she agreed.
PPLPMDL0020000001	Cleveland	OH	44106	4/5/2011	dr said he has been starting patients on Butrans and most patients are doing well, no complaints, but 1 patient is sweating a lot during day as she's a construction worker and is always hot/sweaty so Butrans is starting to not adhere as well. dr asked if this patient could apply Butrans to another application site, not the 4 application sites that Butrans is approved for? I told dr I only have information on the 4 application sites we have discussed and showed dr the Butrans initiation guide, Butrans fpi and the Butrans patient information booklet showing and discussing all 4 application sites. dr asked me what would happen if his patient applied Butrans to her thigh, hip, buttocks? I told dr I didn't know and didn't have any information on that but we could fill out medical information request form and have answer sent to him, dr said that would be great as this patient likes Butrans and is doing really well on the medication, pain is controlled with only Butrans, no short-acting opioids
PPLPMDL0020000001	Akron	OH	44310	4/5/2011	I asked Dr. Schukay what additional information he needed that would make him feel confident enough to prescribe his first Butrans Rx. He said that since he was just learning about the product he wanted additional info but did not have time today. He asked me to schedule a lunch.
PPLPMDL0020000001	Cleveland	OH	44195	4/5/2011	I talked to Gail, NP, about Butrans 5 core messages as she told me she didn't remember much about Butrans other than the name itself. we looked at Butrans initiation guide and I asked Gail what benefits she saw in Butrans for her patients? Gail said the once weekly dosing was much easier for some patients that complain to her about taking pills around the clock for their chronic pain. Gail said she also likes that Butrans is a patch and not a pill. I asked if Gail could think of 2 patients with Commercial insurance, that are telling her their pain isn't controlled with short-acting opioids and requesting something different? Gail said she will consider this option and thanked me for the information.
PPLPMDL0020000001	Cleveland	OH	44106	4/5/2011	worked pain management dept-see call note on Dr. Hayek, worked internal medicine and family medicine departments-had to leave information for each doctor within the departments on Butrans fpi, initiation guide and Butrans patient information booklet.
PPLPMDL0020000001	Westlake	OH	44145	4/5/2011	First thing Dr said was that he started a couple of Butrans patients. He said they are workers comp. One was on 5mg percocet only taking 2 per day, I let him know this is the perfect time to initiate Butrans for chronic pain. The other patient was on 40mg OxyContin and he is trying to taper the OxyContin and convert to Butrans instead. I reviewed the initiation guide and when Butrans may not be appropriate for patient taking more than 40mg of oxycodone per day. He said he forgot but he would be seeing the patient back in 2 weeks and he'll see what happens. He said he prescribed the 5mg. We discussed how to taper patients down to initiate Butrans and that buprenorphine may cause withdrawal in patients on higher doses of opioids. He said he understands now. He asked about titrating Butrans to 15mcg by using 2 patches. I let him know that this is not recommended and would be off label and that only one patch should be used at a time. We discussed how to taper the dose of OxyContin gradually per FPI
PPLPMDL0020000001	Westlake	OH	44145	4/5/2011	Dr is a anesthesiology resident with Dr Khalil. We reviewed Butrans key messages and the initiating guide. We discussed OxyContin as a Q12hr option and we reviewed the OxyContin conversion guide. We reviewed some of the educational resources that Purdue offers to help with pain management.
PPLPMDL0020000001	Cleveland	OH	44195	4/5/2011	I talked to Anne, NP, about her moderate to severe chronic pain patients that she treats with short-acting opioids and how does Butrans fit into that algorithm? Anne said she sees all of Dr. Stanton-Hicks patients and hasn't really thought of Butrans lately. Anne said she likes that Butrans is dosed once a week and is transdermal but so many patients she sees don't want to get off pills. I discussed proper tapering of short-acting opioids and initiation of Butrans by showing Butrans initiation guide and discussed Anne using short-acting opioids in the maintenance of therapy as well as the initiation and showed Anne Butrans fpi. Anne said ok she forgot about that and we discussed patients who are telling her that their short-acting opioids are NOT controlling their pain therefore they are requesting something different. I told Anne that could potentially be the place for Butrans, if patients meet Butrans indication.
PPLPMDL0020000001					

PPLPMDL0020000001	Mayfield Heights	OH	44124	4/5/2011	I reviewed the 5 Butrans selling messages. Doc said she is still happy with Butrans. Patients are liking it and she has been refilling it. He only issue is that her "ideal" patients (elderly with medicare) can't get it. She said that even some commercial patients have issues with cost (she confirmed a high amount of aetna patients). I asked She and Dr. Laham if they see a place for Butrans in a hospital setting. She did not think so because of the chronic indication. Medical assistant, Marianne, said Dr. Dews wrote about 9 scripts yesterday. I reminded doc of the coverage of Butrans with commercial plans and BWC. I also reviewed the preferred oxycontin coverage.
	Cleveland	OH	44195	4/5/2011	I talked to Kathy briefly about Butrans and the patients she feels can benefit from Butrans. Kathy said the problem she's having is Dr. Mekhail doesn't want to prescribe a medication that's "new" to him as he likes to wait awhile before he will start prescribing and she see's a lot of his patients. Kathy said she has suggested Butrans for a few patients on tramadol and vicodin that are complaining of their pain not being controlled with their short-acting opioids but Dr. Mekhail won't convert them to Butrans. I asked Kathy if she could ask Dr. Mekhail what benefits he even see's in Butrans, if any, for his patients? and how long will it take dr before he considers prescribing Butrans? I asked if Dr. Minzter has considered Butrans for any of her patients as Kathy treats these patients too? Kathy said no she hasn't started anyone on Butrans as Dr. Minzter is trying to get her patients off opioids. Kathy said she does believe in treating chronic pain but doesn't like opioids. I asked Kathy to share
PPLPMDL0020000001	Mayfield Heights	OH	44124	4/5/2011	I discussed the Butrans selling messages and dosing. Described the positioning. She asked if it could be used in opioid naive patient....I confirmed that it could. She asked about AE's, specifically, skin sensitivity to the adhesion. I reviewed the AE section of the FPI. I asked her if she sees a place for Butrans in the hospital. She suggested I talk to Dr. Laham as he sits on the P&T committee. I reviewed the oxycontin indication and preferred formulary coverage.
	Mayfield Hts	OH	44124	4/5/2011	Discussed the Butrans selling messages and asked doc what feedback he has had from his Butrans trials. He said he has not heard anything. I asked him if he wrote for refills. He did not recall but Dr. Dews said that she refilled a script for his patient. He said he really wants to write Butrans for elderly patients but its not covered on medicare. I asked doc if he sees a place for Butrans in the hospital. He said he was not sure but the P & T committee must now follow the main campus formulary so there is little autonomy. Doc said he will keep trying to prescribe Butrans. Oxycontin indication and coverage reminder.
PPLPMDL0020000001	Cleveland	OH	44113	4/5/2011	I had lunch with dr and we discussed doctors concern that because this is a newer medication to him he wanted to know if other physicians were prescribing Butrans so he could talk to them and see what they think and what his colleagues are doing because its real world. we discussed Butrans initiation guide, proper tapering of short-acting opioids and initiation of Butrans 10mcg as dr said that he would only consider patients taking opioids to start on Butrans, not opioid naive. dr asked me how he would write the prescription of Butrans? I showed dr back page of Butrans initiation guide and dr said that seemed easy and he asked about any educational information for patients as he likes to give them something to read on a new medication. I showed dr Butrans application dvd/patient information booklet and dr said that would be very helpful to have a couple so that when he starts a patient he can give this to that person. I asked dr to try Butrans in 2 patients on short-acting opioids
PPLPMDL0020000001	Cleveland	OH	44195	4/5/2011	I introduced myself to dr at 7am lecture for the anesthesia/pain management department as he was the speaker. we discussed Purdue's products for pain management and patient education tools, dr said he has seen information for Butrans that I have left him but not really looked at it. I talked to dr about 5 core messages for Butrans, showed dr Butrans initiation guide and asked if I could set-up an appointment with him to discuss managed care coverage and Butrans patient savings cards as he didn't have more time? dr said yes and thanked me for the information.
PPLPMDL0020000001	Parma	OH	44129	4/6/2011	Spoke with Ellie, Dr Salewski's Charge Nurse & introduced Butrans. She asked about managed care (she said cost is VERY important to Dr Salewski), adverse events, & structure of the patches. I reviewed insurance coverage with her & showed FPI sections 6 & 11. She asked if Butrans could be detected in urine drug screens. I told her to talk to her lab about details of this. Also discussed Butrans as a CII & let her know it does carry abuse/addiction potential. She said Dr Salewski is extremely cautious in his prescribing & they are an all RN staff with each of the nurses being very involved in the medications their patients take. She said Dr Salewski is "very demanding" & that if he does like Butrans, he will want me to be in contact with him and his staff to work with them. I told her I want to partner with them & have various tools that Purdue can offer that may assist them in their efforts to care for appropriate patients. She asked me to call her in 2 weeks to follow up.
PPLPMDL0020000001	Cleveland	OH	44106	4/6/2011	dr told me he has 6 or 7 patients on Butrans, all were taking vicodin or percocet around the clock for their chronic pain and dr thought Butrans would be a better option, seeing that Butrans is dosed once a week and is in a patch which these patients liked. dr said 1 patient is having skin irritation/rash under the Butrans transdermal system. I reported the adverse event details below, but dr said this woman works in a job where she tends to sweat a lot, so he's not sure if the irritation is due to excessive sweating or if the patient cleaned skin with alcohol or another irritant, so he's going to follow-up with her and check on that. dr asked me if I had any recommendations for patients taking Butrans that also sweat a lot in their jobs? I showed dr Butrans fpi section on application of Butrans and needing a clean, dry site, no alcohol, creams or lotions before applying Butrans, just water and dry skin. dr said ok and I asked if he will continue finding patients that can benefit from Butrans and
PPLPMDL0020000001	Independence	OH	44131	4/6/2011	Spoke with Stephanie (tech) who said the pharmacist was too busy today. Reviewed Butrans (dosing, delivery system, appropriate patient) & let her know that Butrans is part of Relay Health's e-voucher program. She said she would pass the information along to the pharmacist.
PPLPMDL0020000001	Cleveland	OH	44106	4/6/2011	dr said he saw Andrea yesterday and they discussed appropriate patients for Butrans and he understands who is the right patient for Butrans. dr said he'll try it in a few patients and see what happens but he was too busy today to talk more as he's been out for the past 4 weeks. I told dr I understood and would follow up in 2 weeks, to hear about the couple patients he starts on Butrans and why he chose Butrans.
PPLPMDL0020000001	Cleveland	OH	44114	4/6/2011	dr said he talked to a few patients about Butrans but they didn't want to stop their short-acting opioids. I asked dr why he thought of Butrans for these couple patients and what were they taking? dr said these patients were taking Vicodin and percocet and asking for more pills, saying their pain wasn't controlled, so he thought Butrans could be a good option. I asked dr why it would have been a good option for these patients? dr said he likes that Butrans is transdermal and once weekly dosing, but majority of his patients don't want to get off the pills. we discussed appropriate patients to start on Butrans, showed dr Butrans initiation guide, that dr believes would be willing to try Butrans and I told dr if he wants to prescribe short-acting opioids initially or throughout maintenance of Butrans therapy he can, dr said ok, he thought patients had to stop short-acting opioids completely when Butrans was started. I asked him to think of 1 patient to try Butrans and get clinical experience.
PPLPMDL0020000001	Akron	OH	44333	4/6/2011	Introduced Butrans and the FPI. He was not familiar with the molecule Buprenorphine which I went over with him using the FPI. He asked many buying questions including coverage. However when I asked if he would use Butrans for the appropriate patient he seemed hesitant and told me he wanted to discuss it more at our lunch in 2 weeks.
PPLPMDL0020000001	Cleveland	OH	44195	4/6/2011	worked neurology dept-left Butrans fpi, initiation guide, patient information booklet and business card for Dr. Spears, Dr. Stillman, Dr. Krieger and Dr. Mays, with medical secretaries who said the doctors will look over the information and if interested, they will call me.
PPLPMDL0020000001	Berea	OH	44017	4/6/2011	Spoke with Joe, he works the overnight shift and was very interested in reading more about Butrans as he has not heard of it yet. We reviewed the key messages and initiation guide for Butrans. We reviewed the medication guide and I left him extra copies to hand out to patients. I reviewed OxyContin as an option when Butrans may not provide adequate analgesia and he is going to take a look at the OxyContin conversion guide. He said he has lots of time to read at 3-4am. I let him know about Ryzolt as a once a day option.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/6/2011	Quick call. Asked Dr. Dinsmore if he has had the opportunity to prescribe Butrans to the patients we had discussed in the past. He said he had not. I asked if he has written any low dose hydrocodone since our visit he said he thinks he had. I reminded him that those patients are potential Butrans patients.
PPLPMDL0020000001	Akron	OH	44320	4/6/2011	Dr. Duppsandt compared Butrans to Duragesic and I explained the patient type Butrans was most appropriate for. I explained that often times when a patient is using Duragesic they are probably not a good candidate for Butrans therapy.
PPLPMDL0020000001	Bedford	OH	44146	4/6/2011	Dr Haddad said he tried to prescribe Butrans for another patient but the insurance would not pay for it. He did not remember the plan. I asked if it could have been a Medicare Part D plan & he said it might have been. Asked him to think more of his commercially insured patients & those with state worker's comp coverage for Butrans so that prescriptions will get processed instead of rejected. I told him this would help him gain clinical experience. He said he would try to remember that when looking for Butrans patients.
PPLPMDL0020000001	Berea	OH	44017	4/6/2011	Dr said that his practice has been slow the last few weeks and he has not seen any new chronic pain patients. I asked if he has patients coming in on low dose vicodin or percocet who's pain is not well controlled. He said he does and he agreed to think of Butrans for those patients. He said that he definitely will try Butrans. He said that he is starting to get patients from other Drs who are no longer practicing for various reasons such as Dr Allan, Dr Zanon, and Dr Lundune. He said that if any of these patients need a medication change for their chronic pain meds he will prescribe Butrans. We reviewed when OxyContin may be an appropriate option if Butrans may not provide adequate analgesia.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/6/2011	Checked in with Pat and asked if there has been any movement. Went over the patient education guides so he would be able to explain to patients how to apply and dispose the patch.
PPLPMDL0020000001	Solon	OH	44139	4/6/2011	MH provided letter they received from OIG regarding products that are negotiated and added to their formulary after the June submission date. The OIG sent a response because this impacts the premiums members pay when additional costs could be saved if contracts are negotiated by the June date. CMS does not have an issue with it but the OIG does because they say CMS benefits from it financially as do the plans. MH asked us to provide this to our internal folks and consider committing to them to sign for next year before the end date of October (per the contract). We also discussed the missing pieces from the plan list that we need in order to process the rebate. Lastly, P&T is meeting on Thurs, however, Butrans is not on that list which means it will be reviewed in June. We re-discussed Butrans with the FPI in order for them to reconsider the current PA criteria. Dan said I should email Jackie Raskind to request a clinical presentation.
PPLPMDL0020000001	C. Falls	OH	44223	4/6/2011	Spoke with Larry the pharmacist. I let him know that I had a lunch with Dr. Bick and asked if he would consider ordering just the 5 mcgs. He continues to say he can not until an Rx is written. I went over the patient education guides so he could explain application and disposal.
PPLPMDL0020000001	Cleveland	OH	44127	4/6/2011	dr was swamped and couldn't talk long, he gave me 1 minute and said he started 1 patient on Butrans, hasn't heard from patient so doesn't have any feedback. I told dr I was actually wondering why he started that patient on Butrans? dr said he didn't have time to talk today and come back another time. Tony, Doctors nurse, said she only knows of the 1 patient he started but hasn't seen anything else, but still a lot of scripts for short-acting opioids. I talked to Tony, Nurse, about appropriate Butrans patients and asked her to recommend Butrans to doctor, when she gets calls from patients telling her that their short-acting opioids aren't controlling their pain and they meet Butrans indication. Tony said she will do that as patients call every day for medication re-fills and sometimes are asking for something different. we discussed managed care coverage for Butrans.
PPLPMDL0020000001	Independence	OH	44131	4/6/2011	Dr Jack apologized yet again for not having prescribed Butrans. I asked him if there was something that I had not told him that he needed to know in order to put pen to paper. He said no & that he just hasn't done it yet. He said he has the initiation guide on his desk & looked through it. I asked what he was waiting for & he said he didn't know & that he would prescribe it & that he just needs to get it in his head. I asked what I could do to get Butrans into his "brain formulary" & he said he wasn't sure. He then went into a patient room but turned around, peeked his head out & said "Don't get discouraged, I will write." Spoke with Maria who said it takes Dr Jack "forever" to remember things. Reviewed Butrans & savings cards for eligible patients with her.
PPLPMDL0020000001	Cleveland	OH	44114	4/6/2011	I talked to John, PA, about patients taking Vicodin or Percocet less than 15mg, to consider Butrans 5mcg. If these patients are telling John that their pain isn't controlled with their short-acting opioids, John said he is recommending Butrans to both doctors. Dr. Katz has started a few patients but Dr. Marshall is still hesitant as it's a newer medication to him. I asked John if he could continue recommending Butrans to both doctors and if he see's benefits in Butrans, can he explain them to both doctors? John said he will do that as he likes that Butrans is transdermal, is in a patch and is dosed once a week which is more convenient in his opinion for some patients.
PPLPMDL0020000001	Cleveland	OH	44106	4/6/2011	worked in-patient pharmacy and pain management dept
PPLPMDL0020000001	Cleveland	OH	44106	4/6/2011	I talked to Wes, Pharm D and manager of pharmacy team for all new drugs that have to be presented to p&t committee. Wes presented Butrans to his pharmacy team on 3/29/11 and the feedback was positive, that Butrans is a good medication for moderate chronic pain, but not really a place for severe pain, but the 3 dosage strengths available. Wes said through his research he found out that Butrans's onset is 17 hours and this could be an issue for patients in the hospital who are in pain and need relief immediately so they would still be giving patients short-acting opioids and the majority of patients in hospital are acute pain or post-op surgical patients and Butrans doesn't have an indication for these 2 areas, so seeing that this is for chronic pain Wes said this may have to be out-patient for awhile until they see more Butrans prescribed and more patients come in to hospital on Butrans, P&T members may re-consider at that time

	Parma	OH	44129	4/6/2011	Re-introduced Butrans to Dr Chagin & reminded him of indication. Asked what types of chronic pain he treats- he said a variety from osteoarthritis to low-back pain. Reminded him of once-a-week application with 7 days buprenorphine delivery in transdermal system. I used initiation guide to show positioning & asked if he would use Butrans in opioid-naïve patients. He said "absolutely" & said that he frequently prescribes Vicoden to opioid-naïve patients. Reminded him that Butrans is still CIII & does carry abuse/addiction potential. Discussed application sites & reviewed patient information booklet. He asked how to write the prescription-I showed back of initiation guide. Discussed managed care & asked him to think of commercially insured patients who could utilize savings cards. He said he was looking forward to getting experience with Butrans & that he could think of many patients who could benefit from this. OxyContin & Ryzolt savings card reminder & recommended Senokot-S
PPLPMDL0020000001	Akron	OH	44320	4/6/2011	Misty asked about a patient who was currently on 15 mg of Vicodin a day and wanted to know where they should start on Butrans. I went over the titration chart and Misty expressed that Butrans would become significant to their practice when Dr. Bonyo returned from Kenya.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/6/2011	Introduced Butrans and FPI. Discussed what type of patients would be most appropriate by using the titration guide. She committed to initiating therapy on 2 patients and promised to follow up with me in 2 weeks.
PPLPMDL0020000001	Cleveland	OH	44106	4/6/2011	I talked to Dr briefly about patients she feels are appropriate for Butrans and dr said she has a lot of patients on tramadol that she thinks may benefit from Butrans once weekly dosing and she likes that Butrans is a transdermal delivery.dr said her biggest concern is insurance as she has predominantly medicaid here.we discussed medicaid prior authorization requirements for Butrans and dr said she'll see what happens when she talks to a few patients on tramadol,if they would be willing to try Butrans.i showed dr Butrans initiation guide and we discussed proper tapering and initiation of Butrans.
PPLPMDL0020000001	Cleveland	OH	44120	4/6/2011	I talked to dr about patients she feels that can benefit the most from Butrans.dr said she has patients on percocet that will tell her the 1 or 2 pills arent controlling their pain,so she's thinking maybe try Butrans there.i showed dr Butrans initiation guide and said thats great if dr considers Butrans for those patients telling her the short-acting opioids arent controlling their pain,we discussed proper tapering and initiation of Butrans for patients currently taking opioids.dr asked about medicaid coverage for Butrans? we discussed medicaid coverage and commercial plans as dr as a little bit of that in her practice.
PPLPMDL0020000001	Bedford	OH	44146	4/6/2011	Dr Moufawad said everything with Butrans is going well. He said he is prescribing Ultram or Nucynta for breakthrough. He said he has had a couple of patients take Vicoden for breakthrough if they have left-over from a prescription, but he is not prescribing Vicoden for breakthrough. He said he has received no negative feedback. He also asked if there would be any dinner programs on Butrans & said he would like to be a speaker. I told him I would submit his name.
PPLPMDL0020000001	Maple Heights	OH	44137	4/6/2011	Spoke with Nicolene (pharmacist) & introduced Butrans. She said she has not filled any prescriptions for it yet. Reviewed indication, dosing, positioning, & delivery system. Reviewed patient information booklet with her & discussed application, rotation & taping edges with first aid tape or covering with Bioclusive/Tegaderm if patient has adhesion issues. She said it would be helpful for them when they get questions about Butrans.
PPLPMDL0020000001	Independence	OH	44131	4/6/2011	Quick call- Dr Rob said he did not have time today for a talk. Butrans indication & dosing reminder & asked him to consider Butrans for patients taking 2-3 Vicoden per day who come to him asking for an increase in dose or change in medication.
PPLPMDL0020000001	Cleveland	OH	44115	4/6/2011	I talked to dr about Butrans 5 core messages,initiation guide and dr said she has majority of acute pain so she's not sure if she'll have any place for Butrans as the indication is for chronic pain.i discussed Butrans indication with dr and told her that was correct,if she only treats acute pain,this is not the medication for her patients.I asked if dr she has ANY chronic pain patients,taking tramadol around the clock,that ask her for more pills as their pain isnt always controlled with their short-acting opioid? dr said yes she does have a few patients like that.I told dr that is where Butrans could be an option as long as patients meet Butrans indication.dr said she will read the Butrans fpi and let me know if she has more questions at our lunch next monday,as she didnt have time today to go through the entire fpi and this was our first discussion.
PPLPMDL0020000001	Shaker Heights	OH	44122	4/6/2011	Re-introduced Butrans to Dr Zivic, reminding him of indication. I asked if he treats patients who fit the indication & he said yes. I asked what types of chronic conditions causing pain he treated most frequently & he said "many different kinds". Reviewed once-a-week application & showed FPI 12.3 when he questioned if it "really works" for a week. He asked how Butrans compares to fentanyl. I told him we have no comparative data & showed initiation guide pg 6 to help with positioning. Discussed how Butrans is CIII & still carries abuse/addiction potential. He asked about adverse event rates-showed FPI section 6. He said patients usually "like" taking short acting medications. I asked what he meant. He said they like to have the option to take another pill if they have more pain. Reviewed FPI 2.4 & discussed supplemental analgesia for breakthrough if necessary. He said he would look for Butrans patients. Reviewed managed care & savings. OxyContin & Ryzolt reminders & recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	4/7/2011	I talked to Justin,pharmacist and Aaron,Pharmacist,about Butrans and they said they are seeing more scripts for Butrans so they are happy.we discussed doctors prescribing Butrans and the Butrans patient savings cards and both pharmacists said some patients are workers comp and Butrans is being covered and medicaid patients are getting Butrans if the doctor has filled out the Prior Authorization for Butrans approval. I asked both pharmacists to recommend Senokot-S for opioid induced constipation
PPLPMDL0020000001	East Cleveland	OH	44112	4/7/2011	Discussed the Butrans 5 selling messages and the positioning (in place of vicodin) for appropriate patients. He asked about the difference from suboxone. I explained the much lower dose of butrans and that Butrans is not indication for addiction. He said the thing about drugs like butrans is that he doesn't know the appropriate patient until he sees him/her. I just asked him to think of patients taking less than 15mg of IR opioids/day. He asked about BWC coverage. I confirmed BWC coverage and with commercial plans. Explained the savings cards for commercial patients. Oxycontin and ryzolt coverage reminders.
PPLPMDL0020000001	Cleveland	OH	44113	4/7/2011	dr said he hasnt started any patients on Butrans but he does know who the appropriate patients are and asked me to be patient as he will get started and start some patients as he knows that;'s what it will take, is for him to get some real world clinical experience with Butrans. we looked at Butrans initiation guide and I asked dr to think of 2 patients to start on Butrans,once patients short-acting opioids are properly tapered.dr said he would do
PPLPMDL0020000001	Brooklyn	OH	44130	4/7/2011	Spoke with Danielle (pharmacist) & reviewed Butrans patient information booklet. She said it would be helpful for when patients ask questions. Discussed application, adhesion, & appropriate patient type. She said she does think she has one or two customers on Butrans now but couldn't tell me specifics as she had closed down her computer because she was heading out for lunch. She said to check back another time & thanked me for the worked chronic pain&rehabilitation department-had to leave Butrans fpi,initiation guide and patient information booklet for Joan,NP and JoAnne,NP, as they werent available to talk with me today.i talked to Benita Lee,Dr.Covington's medical secretary,as Dr.Covington was seeing patients and couldnt meet with me.Benita said Dr.Covington has started a couple patients on Butrans and they are doing well,she said they have enough Butrans patient information booklets and savings cards.
PPLPMDL0020000001	Brooklyn	OH	44144	4/7/2011	Quick call- Caught Dr Deeb up at the window. Introduced myself & Purdue's products. I told him I had exciting information to share with him about Butrans, the latest addition to our product portfolio. He asked what Butrans is. I started to tell him that Butrans is a transdermal system of buprenorphine that the patient only has to apply every 7 days. He interrupted & said he is not interested. He said that any time he tries to add a medication that is branded, his patients tell him they cannot afford it, no matter what insurance they have. He said his patients have multiple issues they are being treated for & take so many medications daily that he is not going to add another. Then he walked away.
PPLPMDL0020000001	Cleveland	OH	44130	4/7/2011	Quick call- Told him I wanted him to have the most success possible with Butrans, so as he continues to look for patients who may benefit from it, to think only of commercially insured patients who can use the savings card, bringing them down to around a \$15 co-pay. He said he would try to remember. Also showed him new OxyContin savings cards. Spoke with Barb & reviewed both savings cards with her, although she said Dr Diab is the one who is supposed to give them out.
PPLPMDL0020000001	Cleveland	OH	44130	4/7/2011	Dr Fedorko said he has started "a few" patients on Butrans so far & has another in mind that he wants to try on it. I asked what types of patients he has chosen for Butrans but he did not answer. He said he has not received any feedback clinically so far but will keep trying patients on it. Ryzolt value card reminder & gave Senokot-S & Colace samples. Spoke with Mindy & Maryellen & asked if they had received any managed care pushback for Butrans. They said no & in fact, Maryellen said Dr Fedorko just wrote a prescription for her husband who has Anthem insurance. She said he filled the prescription & paid only \$19 for the month's supply, which she said she was very happy about. She also said he wrote a prescription for a patient who is picking up the prescription today but that she has Medicare Part D. I let them know that they will have to do a prior authorization & that even if it goes through the first month, they may get hassle afterward.
PPLPMDL0020000001	Barberton	OH	44203	4/7/2011	Spoke with the pharmacist and explained that Dr. Shah had been writing Butrans which I discussed via the FPI. He said he was not sure if any Rx's had come through but seemed receptive and said there was a lot of value to a product like Butrans.
PPLPMDL0020000001	Cleveland Hts	OH	44118	4/7/2011	I reviewed the Butrans indication and positioning. Do said he was out of the office a couple of days since my last visit and has not had an opportunity to prescribe. He asked me again the starting dose. I explained the 5mcg for those taking low dose of IR opioids or opioid naïve. I asked him try a patient this week. no commitment. Oxycontin preferred coverage reminder.
PPLPMDL0020000001	Olmsted Falls	OH	44138	4/7/2011	Dr said he is still waiting for the right pain patient to come in to try on Butrans. He said most of his pain patients are Medicaid and we reviewed managed care for Butrans. I asked if he would try a patient this week on Butrans with commercial insurance and he said he will if he sees them.
PPLPMDL0020000001	Euclid	OH	44119	4/7/2011	Quick call.....reminded doc of the coverage and savings cards of Butrans. Explained that commercial patients will have the best chance for success. I also asked about his patients on ryzolt. He said they doing ok but no new patients recently. Reminded him of the savings cards for ryzolt and Butrans.
PPLPMDL0020000001	Barberton	OH	44203	4/7/2011	I asked Dr. Patel about the patients he started on Butrans therapy. He told me they were responding well and said he liked having Butrans as an option and would continue to prescribe.
PPLPMDL0020000001	Akron	OH	44302	4/7/2011	Dr. Rehmsu not typically see sales reps. She came back in the lunch room to ask Dr. Okeke a question and I explained I had a product that had recently been introduced to the market. I was able to go over the indication and she asked me to leave some material behind and talk to her nurse, which I did.
PPLPMDL0020000001	University Heights	OH	44118	4/7/2011	Spoke to Eburn about the stocking of Butrans. She said they do not have it and she has not seen any scripts for it. She said that they are a pretty low volume store therefore did not receive a shipment. I explained the indication and positioning as well as the savings card program.
PPLPMDL0020000001	Highland Heights	OH	44143	4/7/2011	Window call.....reminded doc of the Butrans positioning and the coverage with commercial plans and the importance of the savings card. REminided him the medicare/medicaid will require a PA.
PPLPMDL0020000001	Independence	OH	44131	4/7/2011	Dr Sundaram said he has not seen any patients that fit Butrans's indication yet. I asked him if he had seen any patients with moderate to severe chronic pain. He said that the only chronic pain patients he has seen have been patients taking around-the-clock Percocet. I told Dr Sundaram that those are potential Butrans patients. I asked him if those patients ever ask for an increase in dosage of Percocet & he said yes. I asked him if he would, instead of prescribing more Percocet, switch those patients, if appropriate, to Butrans. Dr Sundaram said he had not thought of this & agreed.
PPLPMDL0020000001	Olmsted Falls	OH	44138	4/7/2011	Met Carmen, she is a NP and Dr Velez's wife. She said she used to treat a lot of chronic pain and now works in the hospital. She was very interested in Butrans and we reviewed the FPI, initiation guide, and dosing.
PPLPMDL0020000001	Olmsted Falls	OH	44138	4/7/2011	We discussed the key messages for Butrans. Dr said that he really does not treat chronic pain with opioids. He prefers to refer to pain management.
PPLPMDL0020000001	Cleveland	OH	44113	4/7/2011	We discussed the key messages for Butrans. Dr said that he really does not treat chronic pain with opioids. He prefers to refer to pain management.
PPLPMDL0020000001					dr said he hasnt started any patients on Butrans because the majority of his chronic pain patients taking Vicodin or Percocet are happy with their pills and not complaining to him about wanting something else. dr said he has a lot of acute pain patients,so Butrans wouldnt work for them.dr asked how much vicodin would a patient have to be taking before he could start them on Butrans? and who gets the Butrans 5mcg or 10mcg? I showed dr Butrans initiation guide,opioid naive section and dr said he wouldnt have any of those patients but we talked about patients currently taking opioids,Vicodin and Percocet,less than 15mg,they could start on Butrans 5mcg and if patients are taking 15-40mg hydrocodone or oxycodone,patients would have to be tapered to 15mg,then started on Butrans 10mcg,dr wrote notes on Butrans initiation guide and said he's going to think of a few patients to try Butrans in and let me know what happens.
PPLPMDL0020000001	Cleveland	OH	44113	4/7/2011	dr said he has 4 or 5 patients on Butrans that are doing well,except 1 patient he had to stop Butrans because she had a severe allergic reaction,rash,all over her body once she started Butrans and she was taking Vicodin previously so I reported all Adverse event details below.dr wanted to see the Adverse event rates again,in Butrans fpi,so I showed him and talked about the opioid experienced patients clinical trial results as dr said thats who he's starting on Butrans.dr said he rarely see's patients that are opioid naive,occasionally it happens and he'll consider Butrans for them,but majority of his chronic pain patients have been on tramadol or vicodin and now that Butrans is available,when he hears patients saying their vicodin isnt strong enough,he's trying Butrans we discussed proper tapering of short-acting opioids and initiation of Butrans therapy. we discussed workers comp,as thats the biggest payer here and commercial plans and patients using Butrans patient savings cards.
PPLPMDL0020000001					



	Cleveland	OH	44103	4/7/2011	i talked to dr about patients she is considering to start on Butrans,as she likes that Butrans is a long-acting opioid and dosed once a week. Dr said a lot of her patients taking percocet are happy with their pills and dont want to try a patch but she is talking to a few patients who are on percocet that are calling in to her office sooner than they should saying they need a refill and some patients who are saying their percocet is lasting long enough,she's considering Butrans.i showed dr Butrans initiation guide and we discussed proper tapering of percocet before initiation of Butrans and we discussed Medicaid coverage as thats the majority of doctors patients. we talked about Oxycontin being an appropriate option for those patients after 80mg or more of oral morphine equivalent isnt working for patients,she can go to OxyContin,discussed 7 tablet strengths,conversion guide and formulary coverage.i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44122	4/7/2011	Met with Pam who had Jonas Birch and Jackie Straub on the phone to discuss Purdue resources for Pain Management. We reviewed all of the resources in the slide non-branded deck and also discussed programs we've conducted with the Case Managers. During the call, there were a couple of requests: Send the flyer for the upcoming webinars to Pam & send ASAP modules to Pam for review to consider program for CMs this year. Jackie is very interested in the Safeguardsmymeds brochure and How to Protect Your Meds at Home. Pam agreed to send the flyers to those in the Dayton office via internal mail.
PPLPMDL0020000001	Cleveland Hts	OH	44118	4/7/2011	Spoke to Christine and Tech, Sophia about the stocking of Butrans. They are not stocking and no scripts received. Sophia asked about the difference between suboxone as they do see scrips for that. I explained the indication and positioning and the dosing options. Advised them that Butrans is not indicated for the treatment of addiction.
PPLPMDL0020000001	Barberton	OH	44203	4/7/2011	Spoke with the pharmacist Cathy and explained that Dr. Patel had recently started initiating Butrans therapy. I covered the patient education guides with her and she said she felt comfortable explaining application and disposal if patients had any questions.
	Cleveland	OH	44113	4/7/2011	i talked to dr about Butrans fpi,5 core messages,initiation guide,Butrans REMS program and Butrans patient savings cards.dr said she hadnt heard of Butrans and does have patients on tramadol and vicodin that will complain to her that the short-acting medications arent strong enough or not controlling their pain.i asked dr what she does when patients state that information to her? dr said she will usually increase dosage strength of short-acting opioids or keep same dosage strength but increase dosing interval.i showed dr Butrans initiation guide,opioid experienced section,and we discussed proper tapering of short-acting opioids and intiation of Butrans when patients call her and state these things to her.dr said it makes sense to have a long-acting opioid at some point but she doesnt write a lot of long-acting opioids.we discussed managed care coverage for her commercial plan patients and medicaid patients as these are her two biggest plans.
PPLPMDL0020000001	Cleveland	OH	44113	4/7/2011	i talked to dr about Butrans fpi,5 core messages,initiation guide,Butrans REMS program and Butrans patient savings cards for commercially insured patients.dr said once weekly dosing is good as she has patients on tramadol that will sometimes tell her that their pain isnt controlled with the short-acting so Butrans could be an option for them.i showed dr the opioid experienced page in Butrans initiation guide and discussed proper tapering of the short-acting opioids and initiation of Butrans. I asked dr if she could think of 2 patients, with commercial insurance, to try Butrans in and get some clinical experience? dr agreed to do that
PPLPMDL0020000001	Brooklyn	OH	44144	4/7/2011	Spoke with Mark (floater pharmacist) who I have seen at Giant Eagle in Beachwood as well. He said he has not personally filled any Butrans prescriptions & was not sure if this location's pharmacists had dispensed any. Reviewed patient information booklet, application & addressing adhesion issues. I asked if they would be able to utilize the booklet & he said they could use it in patient counsel. He said patients seem to call their pharmacist when they have questions about their medications. He said he would leave the information for the regular pharmacist.
	Cleveland	OH	44104	4/7/2011	i talked to dr about patients taking percocet around the clock for their chronic pain and telling him the medication isnt lasting long enough and perhaps they are asking for something different.i asked if dr would consider Butrans for these patients? dr said majority of his patients love taking pills and are controlled on percocet otherwise he converts them to OxyContin.i asked dr if Butrans would be an option for any of these patients,looking at Butrans initiation guide opioid experienced patients taking oxycontin? dr said probably not at this point because he has to do all of the Prior Authorizations and seeing that Medicaid is his biggest patient population,he doesnt want to have to do a Prior Authorization for Butrans. dr said he might have 1 patient mayb 2 in his entire practice that have commercial insurance where Butrans might be an option.we discussed OxyContin formulary coverage and 7 tablet strengths available and gave dr OxyContin conversion guide.i recommended Senokot-S
PPLPMDL0020000001	Euclid	OH	44117	4/7/2011	I discussed the Butrans indication and other selling messages. I asked doc if he ever consulted with Dr. Moufawad like he said he would. He said he was supposed to meet with him and have a discussion. He tried to call Moufawad right then but he was unavailable. Doc said he is definitely going to prescribe butrans but he wants to find out how Moufawad is using it. He asked me to check back next week. Gave him an oxycontin formulary
PPLPMDL0020000001	Akron	OH	44307	4/7/2011	Introduced Butrans and FPI. Dr. Okeke is an oncologist but has a very conservative approach to treating chronic pain. She said that all her patients were opioid experienced and had many patients on low dose hydrocodone. She also mentioned starting patients who were failing on tramadol. I closed using the co-pay cards.
PPLPMDL0020000001	Cleveland	OH	44103	4/7/2011	i talked to Amy,Pharmacy Manager,about Butrans stocking and if any scripts for Butrans have come through pharmacy? Amy said no, but she has Butrans in stock and is just waiting we discussed doctors prescribing Butrans and the Butrans initiation guide discussing proper tapering of short-acting opioids before starting Butrans and we discussed medicaid coverage as thats a lot of the patients Amy see's here in this pharmacy and commercial plan coverage and those patients being able to use Butrans patient savings cards.i recommended Senokot-S
PPLPMDL0020000001	Olmsted Falls	OH	44138	4/7/2011	Dr said he had heard about Butrans and has a lot of questions. We reviewed the key messages, the invitation guide and FPI. Dr said he had a patient on low dose duragic who he thinks may be appropriate for Butrans. We discussed how to initiate patients who are already on opioids.
PPLPMDL0020000001	akron	OH	44333	4/8/2011	I talked with Dr. Bashor about starting a patient on Butrans who had commercial or private insurance. He told me that he is thinking about his elderly population as Butrans patients, I explained that those patients may not be able to get Butrans covered and asked if he would focus on patients with private insurance and he agreed.
PPLPMDL0020000001	Chagrin Falls	OH	44022	4/8/2011	Dr Rood said he started a patient on Butrans. I asked him to tell me a little about the patient. He said she had been on fentanyl, but because of a rare disorder, was getting a "dose dump" of drug, causing her to feel ill. It also wasn't adhering to the 3 day dosing interval. He said he chose Butrans for her because he didn't have any other options. He said he actually didn't consider her an ideal candidate because of her pain severity, but tried her on Butrans 10mcg/hr. He said after the first week he increased her to 20mcg/hr & she has done well so far. He said she likes that it is just once/week & that it is actually adhering & controlling her pain. I asked if he had tapered her fentanyl before starting Butrans & he said he did not. He said it did result in "mild" withdrawal symptoms for the patient but that she "rode it out" & is doing well. I asked if he would consider Butrans for more patients, like those on around-the-clock Vicoden & he said absolutely. Savings card reminders.
PPLPMDL0020000001	South Russell	OH	44022	4/8/2011	Quick call- Introduced myself & Purdue's products to Dr Kale. Discussed Butrans indication & appropriate patient type. She said reps only detail Dr Rood, even at lunches, & he shares the information with her & Dr Hudson. Dr Kale did say she likes Colace & Senokot-S.
	Cleveland	OH	44109	4/8/2011	i asked dr what he remembered about Butrans? dr said honestly nothing.i told dr that was great he was honest so i talked to dr about Butrans 5 core messages,we discussed initiation guide,dr said he has an idea of who the appropriate patient is now and thats low dose short-acting opioids and more moderate chronic pain,i told dr that was right.dr asked about BWC and commercial plan insurance so we discussed both plans and dr said he will try Butrans in a few patients and get some clinical experience with Butrans and let me know.i recommended Senokot-S
PPLPMDL0020000001	Hudson	OH	44236	4/8/2011	Spoke with Melissa (MA) who said they did not need savings cards for Butrans, OxyContin, or Ryzolt. Reviewed Butrans indication & appropriate patient type as well as delivery system & dosing. Melissa said she does not think Drs Tosino, Seiple, or Russ have prescribed Butrans for any patients yet. Scheduled first available breakfast to discuss products with the physicians.
PPLPMDL0020000001	Parma	OH	44129	4/8/2011	Spoke briefly with Bianca (technician) who said Rick (pharmacist) was on the phone & was addressing a computer issue they were having so he could not speak with me today. Reviewed Butrans patient information booklet with her & discussed appropriate patient types. She said she would pass the information on to Rick & that I could come back another day to speak with him.
PPLPMDL0020000001	Cleveland	OH	44113	4/8/2011	worked pain management/physical medicine and rehabilitation dept - see call note on dr shen
PPLPMDL0020000001	Cleveland	OH	44105	4/8/2011	i talked to Abdul,Pharmacist,about Butrans stocking and we discussed doctors prescribing Butrans now and also doctors that Abdul said i should be talking to about Butrans.we talked about OxyContin formulary coverage and OxyContin savings cards.
	Cleveland	OH	44109	4/8/2011	i asked dr what he remembered about Butrans? dr said he remembered Butrans was a patch and dosed once or twice a week and that was all he could remember.i told dr that Butrans was a transdermal system,patch technology,but dosed ONCE weekly,a CIII and gave the Butrans indication to dr again.dr said he remembered Butrans was for low dose short-acting opioid patients,moderate pain,not severe pain OxyContin or Duragasic patients.i told dr that was great he remembered that information,showed dr Butrans initiation guide and we discussed opioid experienced patients as dr said he has chronic pain patients on tramadol and some patients are taking vicodin,but he said that he wouldnt start an opioid naive patient on a long-acting opioid like Butrans.dr said these patients can take 1-2 pills of the short-acting opioids because some days are good and other days are more severe pain for the patient,or they have incident pain so they need some short-acting medication.i asked dr if patients are taking
PPLPMDL0020000001	Cleveland	OH	44109	4/8/2011	dr said he hasnt started any patients on Butrans but wanted to know how this compares to Duragasic and is this the same patient for Butrans? i told dr there are no head to head studies with Duragasic,so i can't make any comparative claims.we discussed the molecule buprenorphine,the delivery system,the 7 day dosing interval for his chronic pain patients.dr asked if Butrans was covered on metro hospitals apple program,which is a program for indigent patients? i told dr,Butrans was not covered on that program,however does he have any workers comp or commercial plans in his practice? dr said yes he has a lot of both.we discussed Butrans coverage for workers comp and commercial plan patients using Butrans savings cards.dr said he will start a few patients and get some real world clinical experience and let me know.we discussed OxyContin being available on the commercial plans at lowest branded co-pay and using OxyContin savings cards.i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	4/8/2011	worked physical medicine&rehabilitation dept and out-patient pharmacy-see call notes
PPLPMDL0020000001	Cleveland	OH	44104	4/8/2011	i talked to dr about his patients,in the office,that are chronic pain and meet Butrans indication and dr said really only has 20 chronic pain patients that are taking short-acting opioids so he's not sure if he'll have a lot of patients to discuss Butrans with.i asked dr if he ever has patients on a NSAID or COX-II inhibitor where patients tell him their pain has worsened and they need something stronger? dr said yes he has some of those patients but would typically go to a short-acting opioid, not a long-acting opioid.i asked dr if he would ever consider Butrans for those types of patients,knowing Butrans is a long-acting opioid.dr said probably not,he would try short-acting opioids first and if that didnt work,then he would convert patients to a long-acting opioid.i asked dr to think of 2 patients who are only taking 1-2 tabs of hydrocodone or oxycodone,less than 15mg,as he could start them on Butrans 5mcg.dr said he will consider Butrans,just hasnt had any patients to try it in.
PPLPMDL0020000001	Fairlawn	OH	44333	4/8/2011	Dr. Parisi talked me that he started two patients on Butrans and is having success with both. I asked Dr. Parisi if he would start additional patients with similar profiles and he said he would. I closed using the co-pay cards.
PPLPMDL0020000001	Cleveland	OH	44104	4/8/2011	i talked to dr about patients he's considering to start on Butrans and showed Butrans initiation guide and we discussed managed care coverage for Butrans.i recommended Senokot-S
PPLPMDL0020000001	Garfield Hts	OH	44125	4/8/2011	Dr Sadowski said he did not think he had any patients that would be appropriate for Butrans. I asked him what he meant. He said he does not like opioids & does not like to have patients on them. I told him i understood & that he is doing the right thing by being cautious when prescribing opioids & should be just as cautious with Butrans. He said he has only 3 patients on fentanyl. I asked him to think of the more "moderate" pain side & let him know that patients on fentanyl were excluded from our studies. I asked him if he treats any patients for chronically painful conditions who are taking around-the-clock Percocet or Vicoden as i showed initiation guide pg 6. He paused & looked at the table. He said maybe he does have "a handful" of patients that might be appropriate. He said he would keep it in mind & then walked into a patient room. Spoke with Deena who said she will help Dr Sadowski find patients for Butrans as she is often the one that reminds him of newer medications.
PPLPMDL0020000001	Fairlawn	OH	44333	4/8/2011	Introduced Butrans and FPI. Dr. Lefton said that he has a fair amount of patients on pain meds and treats chronic pain occasionally. I explained that Butrans was a LAO and a schedule 3. He really liked this option for patients and committed to trying it on one patient. I went over the titration guide with him so he had an idea on when to start patients in relation to their current therapy.
PPLPMDL0020000001	Beachwood	OH	44122	4/8/2011	I asked Dr Tabbaa & Jim what type of feedback they have been getting about Butrans. Dr Tabbaa said that he has not received a lot of feedback yet, although what he has noticed is that he is having to titrate the dose upward for patients to 10 or 20mcg/hr. Discussed supplemental analgesia as an option & showed FPI 2.4. Jim added that sometimes they give the patient a prescription for Butrans & one for Vicoden or Percocet at the same time for breakthrough if necessary. Reviewed managed care for OxyContin & Butrans as well as savings cards for eligible patients. Jim said he has not had any Butrans push-back from managed care companies so far. I reminded them to focus on commercially insured patients for Butrans or those with state worker's comp.
PPLPMDL0020000001					

PPLPMDL0020000001	Cleveland	OH	44104	4/8/2011	i talked to dr about her patients taking percocet around the clock for their chronic pain that arent controlled with that short-acting opioid and considering Butrans.dr said she hasnt seen any patients since our lunch last Friday that she felt would be appropriate for Butrans but is going to try Butrans in a few patients.dr said she has patients who call in sooner than they should for refills and also those patients that say the percocet isnt strong enough or they want more pills,so she thinks Butrans could be an option for them.we discussed proper tapering and initiation of Butrans while looking at the Butrans initiation guide.i asked dr to think of 2 commercially insured patients that can try Butrans and use the Butrans patient savings cards.dr agreed.i recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44104	4/8/2011	dr said she hasnt started anyone on Butrans since our lunch last week but she has a few patients in mind to start on Butrans.i asked dr what patients come to mind? dr said her patients on percocet that arent controlled and complaining of pain worsening and pills not lasting long enough.i showed dr Butrans initiation guide and asked her to consider starting 2 patients on Butrans with commercial insurance so that they can use Butrans patient savings cards.dr agreed. i recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44109	4/8/2011	i met dr for the 1st time as he is an attending physician,at MetroHealth Medical Center,Physical Medicine&Rehabilitation department.dr said he completed his residency here at Metro,moved to PA,and recently moved back to Cleveland,OH and is now here in this department.dr didnt know anything about Butrans so we discussed Butrans 5 core messages,FPI,initiation guide and Butrans patient savings cards for commercial plan patients.dr said he only has 2 chronic pain patients now as he's building his practice but he likes that Butrans is a long-acting opioid as he doesnt think patients should wait so long to be on a long-acting opioid.dr said he was trained to start patients on short-acting,max out the short-acting opioids and as a last resort,go to a long-acting opioid.dr said the thinking is that doctors somehow failed to control their patients pain levels if they have to go to a long-acting opioid like OxyContin.dr said he prefers to start someone on long-acting opioids,like Butrans and he
PPLPMDL0020000001	Cleveland	OH	44109	4/8/2011	i talked to dr about her patients taking tramadol around the clock for their chronic pain and asked dr where Butrans fit into her algorithm? dr said she hasnt really thought of Butrans but does think its a good baseline of continuous medication,her concern is that patients wont want to get off short-acting opioids.dr said majority of her patients are stable and doing well on the pills.i told dr i appreciated her sharing that with me,thats great if patients are stable and doing well but those arent the patients for Butrans anyways.i showed dr Butrans initiation guide,opioid experienced page,discussed these patients who are telling dr or nurse that their pain isnt controlled or medication isnt lasting long enough,with the short-acting opioids,perhaps thats where Butrans could be an option.dr said okay that made sense and asked about Medicaid coverage as she said she has a lot of Medicaid.i talked to dr about this coverage and commercial plan coverage.
PPLPMDL0020000001	Cleveland	OH	44114	4/8/2011	dr said he started 2 patients on Butrans today.i asked dr why did he choose Butrans? dr said both patients were taking Embeda and since that was pulled from the market,these patients cant get their medication anymore,so he started them on Butrans today.i told dr that was great and asked what dosage strength he started them on? dr said he thinks both of them were started on the Butrans 10mcg.i showed dr Butrans initiation guide,discussed proper tapering of any short-acting opioids prior to starting Butrans and showed dr the Butrans prescription example to be sure he knew how to write Butrans.dr said that was good to see because he thought he prescribed Butrans6,not5,so i explained that 4 Butrans transdermal systems are in a carton at pharmacy,dr said okay that made sense and he appreciated the information.
PPLPMDL0020000001	Cleveland	OH	44109	4/8/2011	i talked to Mike,Pharmacist and Chris,Pharmacist,about Butrans stocking and they said Rob,Pharmacy manager orders all medications and he's out for the day.i asked Mike and Chris,what clinical benefits did they see in Butrans for their patients? both of the pharmacists stated that Butrans being in a patch,dosed once a week and a CII,were all benefits in their eyes.we talked about doctors i am working with at Metro and doctors they recommended i speak with about Butrans.Chris and Mike said to try back again next week,thursday or Friday and try to catch Rob and see Rob in person to confirm if he's ordered Butrans because they didnt see Butrans ordered in their system or in stock.
PPLPMDL0020000001	Lyndhurst	OH	44124	4/8/2011	Spoke with Patricia and Karen about the indication and positioning of Butrans. Patricia forgot that Butrans is a CII. i thought it was a CII. i advised that Butrans still has similar risks/warnings to other opioids. i reviewed commercial coverage of Butrans and how to initiate dosing. Gave senokot s samples and reminded them of the oxycontin and ryzolt patient types/savings cards.
PPLPMDL0020000001	Lyndhurst	OH	44124	4/8/2011	Doc said wrote 2 scripts of Butrans this week. She said patients were taking darvocet and were switched to tramadol but the tramadol did not work for them. So far, she has not heard of any issues or had any call backs. i reviewed the covered plans and gave more savings cards. Reminded her of the savings cards for oxycontin and ryzolt.
PPLPMDL0020000001	Parma	OH	44129	4/8/2011	Quick call-I asked Dr Roeheny what type of patients he chose for Butrans. He said he has only put one person on it. I asked if that patient was already on an opioid or if they were opioid-naive. He said she had been on fentanyl about 3 years ago but was no longer on it when he prescribed Butrans. I asked if he had received clinical feedback & he said no. He said that the patient must be happy with it because he had asked her to call him if she had any problems with it.
PPLPMDL0020000001	Cleveland	OH	44113	4/8/2011	i talked to dr about patients she has started on Butrans and dr said the patients seem to be doing well as they havent called back to complain so thats a good thing.i asked why dr has been choosing Butrans for patients? dr said these are patients taking vicodin and percocet and asking for more pills because they are complaining that their short-acting medications not lasting long enough so she thinks a long-acting opioid is more appropriate.i showed dr Butrans initiation guide and asked dr continue starting patients on Butrans,dr said she will and we talked about BWC,commercial plan coverage and those patients using Butrans patient savings cards and then Medicaid coverage for Butrans with a Prior Authorization as thats a big population of doctors.i recommended Senokot-5
PPLPMDL0020000001	Lyndhurst	OH	44124	4/8/2011	Spoke with Patricia and Karen about the indication and positioning of Butrans. Patricia forgot that Butrans is a CII. i thought it was a CII. i advised that Butrans still has similar risks/warnings to other opioids. i reviewed commercial coverage of Butrans and how to initiate dosing. Gave senokot s samples and reminded them of the oxycontin and ryzolt patient types/savings cards.
PPLPMDL0020000001	Parma	OH	44134	4/11/2011	Spoke with Cheryl (technician) as Nate was unavailable. Reviewed Butrans patient type. Cheryl said she does not think they have seen any prescriptions for it but was not certain. Reviewed delivery system & dosing as well as e-voucher. OxyContin savings card reminder. She said there is a customer or two who will appreciate them.
PPLPMDL0020000001	Parma	OH	44129	4/11/2011	Introduced Butrans to pharmacist (floater). She said she had not yet dispensed any but did see 5mcg on the shelf at this location. Reviewed appropriate patient type/positioning & dosing. She said she thought it was a "good idea" & said it would be interesting to see where physicians prescribe it.
PPLPMDL0020000001	Cleveland	OH	44115	4/11/2011	i asked dr,based on our last conversation about Butrans last week you shared with me that you have only acute pain patients,is that correct? dr said well i do have chronic pain patients but when they get too severe,i send them to pain management specialists.i asked dr if she has chronic pain patients that take tramadol around the clock for their pain? dr said yes she has a lot of them.dr asked where does Butrans fit in and who is the appropriate patient? we looked at Butrans initiation guide,discussing patients currently taking opioids like doctors tramadol patients that could potentially benefit from once weekly dosing of Butrans.dr said she likes the fact that Butrans is transdermal and forgot that Butrans is a 7 day application.dr asked about insurance coverage for commercial plan patients and Medicaid so we discussed both of these plans and i asked dr to think of 2 patients to try Butrans in and i will follow-up to hear the results.dr agreed to find 2 patients.
PPLPMDL0020000001	Fairlawn	OH	44333	4/11/2011	i asked Dr. Weidman if she has had similar patients like the one she initiated Butrans on for the first time. She said that she has few patients on opioids but would continue to keep it mind for the appropriate patient.
PPLPMDL0020000001	Cleveland	OH	44106	4/11/2011	i talked to dr briefly about Butrans fpi-black box warning,5 core messages,Butrans initiation guide and Butrans patient savings cards for commercial plan patients. dr said she rarely prescribes narcotics,but if she has to treat chronic pain they will only give tramadol.i asked dr what her thoughts were of Butrans and any clinical benefits she saw in Butrans? dr said transdermal technology,a patch and dosing once a week are all benefits in her eyes for her patients but she's not sure patients will want to stop taking their pills.we discussed appropriate patients,looking at Butrans initiation guide and i asked dr to consider patients taking tramadol but telling her their pain isnt controlled with their short-acting medication and if patients have commercial insurance they can use Butrans patient savings cards.dr said majority of patients at UH are cash paying or Medicaid and she wanted to know what was Butrans's coverage on Medicaid? we discussed the details of Medicaid coverage.
PPLPMDL0020000001	Cleveland	OH	44115	4/11/2011	Roman,PA for dr.Kepler,said that someone just told him about Butrans a week ago but he was confused on who the appropriate patient was for Butrans.i showed Roman the Butrans initiation guide,patients currently taking opioids and we discussed who would start on the Butrans 5mcg and Butrans 10mcg.Roman said that made sense to think of patients with more moderate pain,low dose short-acting opioids but Roman said someone taking 40mg a day of hydrocodone or oxycodone is pretty severe pain in his opinion.Roman said he's not sure if Butrans could help that kind of patient.i showed the Butrans initiation guide again and discussed proper tapering of the short-acting opioid if patients are taking 40mg of hydrocodone or oxycodone a day,before initiating Butrans.Roman asked if Butrans would work for a patient taking 40mg OxyContin a day Dr.Kepler was sitting there and responded NO,that patient is too severe pain and Butrans wouldnt be appropriate,think moderate pain,low doses of short-acting
PPLPMDL0020000001	Olmsted Falls	OH	44138	4/11/2011	i asked Dr his thoughts about where Butrans might fit into his practice. He said he does have some patients in mind that would be appropriate, but they are Med D or Medicaid patients. He said it seems that Medicaid patients are the ones who always come to him with some type of chronic pain requiring opioids around the clock. He really does not like seeing these types of patients, but he is trying to grow his practice so they will add another Dr to his office. We discussed the managed care for Butrans and the savings program. He said he may have a BWC patient who might be appropriate. For his younger patients, he is trying to get them off of opioids. He does still have a few patients on OxyContin, they are older (70's) and he feels comfortable maintaining older patients, but does not want younger patients to be on opioids for the rest of their lives. We discussed some of the tools to help him pick appropriate patients and he does use Orrs. Reminder a out Ryzolt and Senokot.
PPLPMDL0020000001	Cleveland	OH	44106	4/11/2011	i talked to dr about patients he feels that can benefit from Butrans,showed dr Butrans initiation guide and dr said patients that are taking tramadol around the clock,as thats all they prescribe in out-patient clinic,that are complaining of tramadol not lasting long enough,perhaps Butrans could be used right there.i asked dr if he could think of 2 patients with commercial insurance and use Butrans patient savings cards,based on our discussion of appropriate patients? dr said majority of patients are caresource/Medicaid or cash paying,so we discussed prior authorization requirements for Medicaid patients and dr said he'll think about it as he's not sure he wants to do Prior Authorizations for all of his Medicaid patients.i asked if dr could focus on 2 patients who are telling him tramadol isnt working and consider Butrans,dr agreed.
PPLPMDL0020000001	Parma	OH	44129	4/11/2011	i asked Dr Rossi what her thoughts were on prescribing a long-acting transdermal system like Butrans for appropriate moderate to severe chronic pain patients instead of prescribing short-acting around-the-clock opioids. She asked if prescribing Butrans would eliminate the need for short-acting opioids in those patients. Reviewed FPI 2.4 & told her patients could take supplemental analgesia in opioid or non-opioid form. Also let her know that patients in studies were given ibuprofen or acetaminophen for breakthrough. She said she liked the idea of a once-a-week transdermal system instead of short-acting around-the-clock oral pain medication. Discussed importance of appropriate patient selection & reviewed CIII & abuse/addiction potential. Reviewed FPI section 6, discussing adverse events. She asked about cost- discussed managed care & asked her to focus on commercially insured patients who could use savings card, bringing them down to around \$15 for co-pay.
PPLPMDL0020000001	Parma	OH	44129	4/11/2011	Dr Tolentino said she has not prescribed Butrans yet. Reviewed appropriate patient type, showing initiation guide page 6 & reviewing indication. She said she is also concerned that Butrans will cost too much for patients. Reviewed managed care coverage, asking her to focus only on commercially insured patients who can take advantage of the savings program, bringing them down to around a \$15 co-pay. She said "If it would only be \$, I will prescribe it." Asked her to prescribe for a patient on low dose of Vicoden or Percocet or a patient for whom she is ready to prescribe an opiate who has commercial insurance. Reminded her Butrans is CIII & does have i asked his thoughts on where he feels Butrans can benefit his practice. He said he sees it as an option instead of increasing the number of vicodin tablets. Dr told me that he will no longer be seeing reps until June as he is taking a pharmacy rep break. I asked if he would start a few new Butrans patients during this time so that he will have experience with it when we talk next. He said he will try.
PPLPMDL0020000001	Lakewood	OH	44107	4/11/2011	Pharmacist told me that they she thinks they have filled a couple of Butrans Rx's. I asked who they came from and he said that he was not sure. I went over the patient education guide so she could talk to patients about application and disposal.
PPLPMDL0020000001	Akron	OH	44333	4/11/2011	Pharmacist told me that they she thinks they have filled a couple of Butrans Rx's. I asked who they came from and he said that he was not sure. I went over the patient education guide so she could talk to patients about application and disposal.
PPLPMDL0020000001	Cleveland	OH	44106	4/11/2011	i talked to dr about Butrans fpi,5 core messages,initiation guide,Butrans patient application dvd/patient information booklet and Butrans REMS program.dr said he has patients on Vicodin that are taking 1 tab a day,5mg,that still say they are in pain and the short-acting medication isnt controlling their pain.dr said he thinks Butrans could be a good option for them as a baseline for their pain.dr asked if he could still give patients short-acting opioids for break through pain while on Butrans? i showed dr Butrans fpi,section 2.2 Initiation of therapy and section 2.4 Maintenance of therapy.dr asked about insurance coverage and i asked dr what plans he see's in his office?dr said there is a good mix of commercial,Medicare and Medicaid.we discussed commercial plan patients using Butrans patient savings cards and Medicaid patients having to get a prior authorization done first for Butrans approval.dr said he'll try Butrans in 1 or 2 patients and let me know what results he gets

PPLPMDL0020000001	Fairlawn	OH	44333	4/11/2011	I asked Dr. Domdera why he was hesitant to start a patient on Butrans therapy since we have established several times that he has many patients who would benefit from therapy. He said that he liked the concept and that it made sense to convert some of his hydrocodone patients to Butrans but said he was a slow adopter and was hesitant simply because it is new to the market.
PPLPMDL0020000001	Westlake	OH	44145	4/11/2011	Quick call as Dr just returned from India. We reviewed the dosing for Butrans who is on NSAIDs or celebrex. I asked if he would convert them to Butrans 5mcg. He said he will if he knows they have chronic pain.
PPLPMDL0020000001	Cleveland	OH	44106	4/11/2011	discussed with dr Butrans fpi,5 core messages,initiation guide and Butrans patient savings cards.dr said he only prescribes tramadol for his chronic pain patients and if patients need more narcotics,he refers them to pain management.dr said he'll look over Butrans information as it sounds good with once weekly dosing but doesn't have time now to talk with me about everything.dr asked if Butrans was covered on Medicaid? I explained the prior authorization requirements necessary for Butrans approval and dr said thank you and he appreciated information
PPLPMDL0020000001	LAKEWOOD	OH	44107	4/11/2011	Spoke with Ronnie, tech, I asked him to check stocking of Butrans, they still have it stocked but he did not know if anyone has written scripts. We reviewed the managed are and savings cards for Butrans. He said he does think they participate in relay health because he has seen other drugs discounted at the register. Reminder about the OxyContin savings cards and that Senokot S is an option for opioid induced constipation.
PPLPMDL0020000001	Cleveland	OH	44114	4/11/2011	I talked to dr about patients she's considering to start on Butrans.dr said she has 2 patients on Butrans,they were both taking short-acting opioids and pain wasn't controlled so she thinks Butrans is a great long-acting opioid option.we discussed Butrans initiation guide and I asked dr to continue choosing Butrans for her patients,but perhaps thinking of Butrans earlier in therapy,when patients are only on 1 or 2 5mg hydrocodone or oxycodone combo's,dr said she will keep that in mind.
PPLPMDL0020000001	Fairlawn	OH	44333	4/11/2011	Talked to Dr. Lefkowitz for a brief moment through the window. I asked him if he has had the opportunity to review any information on Butrans he replied he had and walked away. I thanked him for his OxyContin support.
PPLPMDL0020000001	Lakewood	OH	44107	4/11/2011	I reviewed the patients we talked about last time on low dose vicodin whose pain is not well controlled. I asked if he would try a few of those patients this week to gain some experience with Butrans and he agreed.
PPLPMDL0020000001	Fairlawn	OH	44333	4/11/2011	I asked Dr. Oyakawa why he has been hesitant to initiate Butrans. He said he was not sure and said he would try it. I reminded him of the benefit the co-pay cards provide for commercially insured patients and showed them where they were located in the sample closet.
PPLPMDL0020000001	Cleveland	OH	44106	4/11/2011	dr said he hasn't started any patients on Butrans yet as its not on hospital formulary and that's what he really needs to see as he's primarily in hospital.I asked dr if he see's patients in out-patient clinic where there could be commercially insured patients? dr said majority, 90% are all caresource/medicaid with some medicare,its rare that he see's a commercial plan patient. we discussed Butrans coverage for Medicaid and if dr would be willing to do Prior Authorization for patients dr said he might do them.I asked dr to consider Butrans for 2 patients,that are medicaid or if he has any workers comp,and showed dr Butrans initiation guide. dr said he will do his best.
PPLPMDL0020000001	Akron	OH	44333	4/11/2011	Dr. Shah continues to start patient on Butrans therapy who are opioid experienced. This was a quick call where I was able to thank him for his support and remind him of the benefit the co-pay cards offer to patient's with commercial insurance.
PPLPMDL0020000001	Cleveland	OH	44115	4/11/2011	I talked to Lisa,PA,briefly about Butrans fpi,5 core messages,initiation guide and Butrans patient savings cards.we talked about her patients currently taking opioids that could benefit from a once weekly dosing schedule with Butrans and Lisa said she likes Butrans is transdermal delivery and in a patch.Lisa asked about insurance coverage so we discussed commercial plans and medicaid as that's what she see's at st.vincent charity hospital.I asked Lisa to think of 2 patients to try Butrans in and let me know what results she see's and she agreed
PPLPMDL0020000001	Cleveland	OH	44106	4/11/2011	I talked to dr about patients he thinks are appropriate for Butrans and dr said unless its on the hospital formulary it will be unlikely that he'll prescribe Butrans as the out-patient clinic is mainly Caresource/medicaid patients and he isn't going to do a prior authorization for patients to get Butrans.I told dr I would keep him posted on Butrans's formulary status and asked if he could think of 2 patients,in the out-patient clinic,that have workers comp or commercial insurance and we discussed those two plans,dr said he would consider that if he see's those patients but its not often
PPLPMDL0020000001	Independence	OH	44131	4/11/2011	Dr Trickett said the Butrans demo patch was comfortable enough to wear that she had forgotten she stuck it to her hand during my last lunch. She said the adhesive was strong & that once it was removed it would not stick back on. Discussed application, removal/disposal, & reviewed patient information booklet. I asked if she had identified any Butrans patients since our last discussion & she said she had not but she does want to try it on more patients because she likes the idea of it. Reviewed managed care coverage & asked that she think of her patients who are either already on a low dose of Vicoden or who she is ready to start on an opioid who have commercial insurance coverage or state worker's comp. She thanked me for reminding her & said again that she does want to try more patients on Butrans.
PPLPMDL0020000001	Cleveland	OH	44106	4/11/2011	worked internal medicine resident department - lunch with 25 residents (including vice chairman of dept-dr armitage)
PPLPMDL0020000001	Cleveland	OH	44106	4/11/2011	worked physical medicine&rehabilitation dept-see call notes on Dr.Baig and Dr.Krupnik; worked neurology dept-dr buczek
PPLPMDL0020000001	Lakewood	OH	44107	4/11/2011	I asked Katie where she sees herself prescribing Butrans, she said most likely for patients who need more than a couple of vicodin per day for chronic pain. She said she does have a patient who called asking for more vicodin who she feels would be appropriate to convert to Butrans. She said they are BWC but they have not come back to the office in a while. I asked if she would try Butrans in other patients like this and she said she will.
PPLPMDL0020000001	Cleveland	OH	44106	4/11/2011	I talked to dr about Butrans initiation guide and patient information booklet/dvd as dr couldn't remember anything about Butrans other than it was a transdermal medication. dr said once weekly dosing was an advantage for some patients who don't like taking tramadol q4-6h and Butrans being a patch is an advantage as some patients don't like taking pills around the clock for their pain to be controlled.I asked dr to consider 2 patients with commercial insurance,workers comp or medicaid if the Prior Authorization is completed.dr agreed to try Butrans in a couple patients and let me know what happens
PPLPMDL0020000001	Cleveland	OH	44106	4/11/2011	I talked to dr about Butrans initiation guide and patient information booklet/dvd as dr couldn't remember anything about Butrans other than it was a transdermal medication. dr said once weekly dosing was an advantage for some patients who don't like taking tramadol q4-6h and Butrans being a patch is an advantage as some patients don't like taking pills around the clock for their pain to be controlled.I asked dr to consider 2 patients with commercial insurance,workers comp or medicaid if the Prior Authorization is completed.dr agreed to try Butrans in a couple patients and let me know what happens
PPLPMDL0020000001	Cleveland	OH	44106	4/11/2011	I talked to dr about Butrans initiation guide and patient information booklet/dvd as dr couldn't remember anything about Butrans other than it was a transdermal medication. dr said once weekly dosing was an advantage for some patients who don't like taking tramadol q4-6h and Butrans being a patch is an advantage as some patients don't like taking pills around the clock for their pain to be controlled.I asked dr to consider 2 patients with commercial insurance,workers comp or medicaid if the Prior Authorization is completed.dr agreed to try Butrans in a couple patients and let me know what happens
PPLPMDL0020000001	Cleveland	OH	44106	4/11/2011	I talked to dr about patients he see's taking tramadol around the clock for their chronic pain and perhaps them telling him they want something different because the tramadol isn't lasting long enough or once weekly dosing would be easier.dr said Butrans once weekly dosing is easier for some patients but he has to trust that patients will rotate patches weekly and not apply to same skin site.I showed dr Butrans application dvd/booklet and asked if this educational item would assist in educating his patients? dr said yes and wanted a few.I asked dr to consider starting 2 patients like we discussed with commercial insurance so they can use Butrans patient savings
PPLPMDL0020000001	Cleveland	OH	44106	4/11/2011	I talked to dr about Butrans initiation guide and patient information booklet/dvd as dr couldn't remember anything about Butrans other than it was a transdermal medication. dr said once weekly dosing was an advantage for some patients who don't like taking tramadol q4-6h and Butrans being a patch is an advantage as some patients don't like taking pills around the clock for their pain to be controlled.I asked dr to consider 2 patients with commercial insurance,workers comp or medicaid if the Prior Authorization is completed.dr agreed to try Butrans in a couple patients and let me know what happens
PPLPMDL0020000001	Cleveland	OH	44106	4/11/2011	dr couldn't remember much about Butrans other than it was buprenorphine,so we discussed Butrans 5 core messages,initiation guide and Butrans patient savings cards for commercial plan patients.dr said her biggest challenge is that Butrans isn't on formulary in the hospital so we discussed that and in the out-patient clinic.dr said majority of patients are cash paying or caresource/medicaid so she wanted to know Butrans coverage for medicaid so we discussed that too.I asked dr if she would be willing to do a prior authorization for 2 medicaid patients who were taking tramadol around the clock for their chronic pain but telling her their pain isn't controlled with the short-acting opioid? dr said she might be willing to do that and would think about that option.
PPLPMDL0020000001	Cleveland	OH	44195	4/11/2011	worked anesthesia/pain management dept-couldnt see dr.shin or renette,NP,for Dr.Shin's patients as they were both too busy,so I left Butrans fpi,initiation guide and patient information booklet for each of them and my business card.I left information for Dr.Vrooman and Dr.Katyal and Dr.Mintzer and Dr.Mekhal. worked chronic pain&rehabilitation dept-left my business card,Butrans initiation guide and patient information booklet for Dr.Covington,JoAnne,NP and Joan,NP,as they were all busy seeing patients.Worked PM&R-had to leave Butrans fpi,initiation guide,patient information booklet and my business card for Dr.Schaeffer,Dr.Hou,Dr.Reddy and Dr.Jedlicka as none of them see rep's unless the doctors call me for an appointment.
PPLPMDL0020000001	Cleveland	OH	44106	4/11/2011	I talked to dr about Butrans initiation guide and patient information booklet/dvd as dr couldn't remember anything about Butrans other than it was a transdermal medication. dr said once weekly dosing was an advantage for some patients who don't like taking tramadol q4-6h and Butrans being a patch is an advantage as some patients don't like taking pills around the clock for their pain to be controlled.I asked dr to consider 2 patients with commercial insurance,workers comp or medicaid if the Prior Authorization is completed.dr agreed to try Butrans in a couple patients and let me know what happens
PPLPMDL0020000001	Cleveland	OH	44106	4/11/2011	I talked to dr about Butrans initiation guide and patient information booklet/dvd as dr couldn't remember anything about Butrans other than it was a transdermal medication. dr said once weekly dosing was an advantage for some patients who don't like taking tramadol q4-6h and Butrans being a patch is an advantage as some patients don't like taking pills around the clock for their pain to be controlled.I asked dr to consider 2 patients with commercial insurance,workers comp or medicaid if the Prior Authorization is completed.dr agreed to try Butrans in a couple patients and let me know what happens
PPLPMDL0020000001	Lakewood	OH	44107	4/11/2011	Quick call with Rick, we reviewed the medication guide for Butrans and I asked him if he would help us make sure the patients know about the proper use and application of Butrans. He said he will. We discussed that Butrans reaches steady state in 3 days. We discussed OxyContin as an option when Butrans may not provide adequate analgesia. Reminder to recommend Senokot S.
PPLPMDL0020000001	Cleveland	OH	44106	4/11/2011	I talked to dr about Butrans initiation guide and patient information booklet/dvd as dr couldn't remember anything about Butrans other than it was a transdermal medication. dr said once weekly dosing was an advantage for some patients who don't like taking tramadol q4-6h and Butrans being a patch is an advantage as some patients don't like taking pills around the clock for their pain to be controlled.I asked dr to consider 2 patients with commercial insurance,workers comp or medicaid if the Prior Authorization is completed.dr agreed to try Butrans in a couple patients and let me know what happens
PPLPMDL0020000001	Cleveland	OH	44106	4/11/2011	I discussed Butrans fpi,initiation guide,patient information booklet/dvd, Butrans patient savings cards and Butrans REMS program with dr.dr hasn't heard of Butrans but said she only prescribes tramadol for her patients with chronic pain.I asked dr what clinical benefits she saw in Butrans for her patients? dr said once weekly dosing is easy for many patients but she has to trust them that they will rotate application sites and she's not sure if her patients would do that and so many patients like taking their short-acting medication because they think they have more control over pain.we discussed doctors tramadol patients looking at Butrans initiation guide and I asked if dr could think of 2 patients to try Butrans in and get some clinical experience? dr said she will think about it but asked what was the medicaid coverage for Butrans? we discussed this plan and I asked dr to focus on 2 patients to try Butrans in and I will follow-up.dr agreed.
PPLPMDL0020000001	Cleveland	OH	44106	4/11/2011	I talked to dr about Butrans initiation guide and patient information booklet/dvd as dr couldn't remember anything about Butrans other than it was a transdermal medication. dr said once weekly dosing was an advantage for some patients who don't like taking tramadol q4-6h and Butrans being a patch is an advantage as some patients don't like taking pills around the clock for their pain to be controlled.I asked dr to consider 2 patients with commercial insurance,workers comp or medicaid if the Prior Authorization is completed.dr agreed to try Butrans in a couple patients and let me know what happens
PPLPMDL0020000001	Cleveland	OH	44106	4/11/2011	I talked to dr about Butrans fpi,5 core messages, initiation guide,patient information booklet/dvd and Butrans patient savings cards.dr said she only has a few chronic pain patients and not a lot of experience with treating pain.I asked dr what does she give patients now for their chronic pain.dr said she only prescribes tramadol but some patients don't like taking tramadol q4-6h so a once weekly dosing option could be appealing to some patients.dr said it comes down to insurance and asked about Medicaid and medicare coverage for Butrans.I told dr Medicare doesn't cover Butrans and Medicaid requires a prior authorization for Butrans.I asked if dr could think of 2 patients to try Butrans in and dr said she'll have to think about it and not sure if she wants to do prior authorization for medicaid patients.
PPLPMDL0020000001	Cleveland	OH	44106	4/11/2011	I talked to dr about Butrans 5 core messages,fpi,initiation guide, patient information booklet/dvd and asked dr what clinical benefits he saw in Butrans? dr said once weekly dosing is easier for some patients than taking pills around the clock and dr said Butrans being a patch is a nice option.we discussed doctors patients taking tramadol,q4-6h,and how to taper appropriately and initiate Butrans therapy.dr asked about Medicaid coverage so we discussed that and I asked dr to think of 2 patients to start on Butrans.dr said he'll see if he has a few patients that would be willing to go on a once weekly patch.
PPLPMDL0020000001					

	Parma	OH	44129	4/11/2011	Quick call- Asked Jen if she had identified a Butrans patient yet, but she said no. She said she is still getting her bearings with being new but will try to find someone who may be appropriate. Spoke with Dawn who said that she believes that once Dr Nickels & Laura start prescribing, Jen will too. She said Jen is more comfortable keeping patients on their current medications. Dawn said the "key" might be to get them all to a dinner program. Also discussed their patient population, who Dawn said is already on 3 or more Vicoden per day by the time they see them. I told Dawn those are potential Butrans patients. Reviewed managed care & also discussed Rylozt coverage as she said Jen has been writing it more & Dawn received 2 rejections from worker's comp last week. I asked if it was state worker's comp & Dawn said she does not know, but it is possible. She said she would let me know if she notices this happening more.
PPLPMDL0020000001	Cleveland	OH	44115	4/11/2011	dr said he just had someone in his other office talk to him about Butrans.i asked dr where he saw Butrans playing a role in his practice,based on the information he was given last week? dr said he remembers that this is a patch,once weekly dosing and low dose short-acting opioids,moderate pain patients.i showed dr Butrans initiation guide and we discussed patients currently taking opioids,low doses,to consider starting on Butrans.dr said he is more likely to prescribe a patch like Butrans as he likes long-acting opioids and will not prescribe Duragesic.we discussed the fact that the Duragesic patient is probably more severe pain anyways,and this is more moderate pain that we are talking about for doctors patients to be considered appropriate for Butrans therapy. doctors physician assistant,Roman Hancy,zwas at the lunch and said that he would like to hear a speaker and hear real world clinical experience not just paper from us,the representatives.i told dr and Roman,PA,that there was a
PPLPMDL0020000001	Cleveland	OH	44106	4/11/2011	i talked to dr about Butrans fpi,5 core messages,initiation guide and Butrans patient savings cards.dr asked how this compared to Suboxone as Butrans is buprenorphine and works on different receptors like Suboxone.i told dr i didnt have any head to head data to make any comparative claims but showed dr Butrans fpi section 5.17 noting Butrans is not indicated for treatment of addiction.dr said he doesnt prescribe narcotics for his chronic pain patients and will put a cocktail of other medications together for patients but avoids narcotics.dr asked how Butrans compared to Duragesic.i told dr i didnt have any comparative studies so i couldnt make any comparisons,we discussed duragesic being fentanyl and butrans being buprenorphine so 2 different molecules and discussed indication for Butrans again.dr asked how much Butrans costs for cash paying patients? i told dr he should focus on commercial plan patients and dr still wanted to know how much Butrans cost out-of pocket so we briefly
PPLPMDL0020000001	Cleveland	OH	44106	4/11/2011	i talked to dr about Butrans initiation guide and patient information booklet/dvd as dr couldnt remember anything about Butrans other than it was a transdermal medication. dr said once weekly dosing was an advantage for some patients who dont like taking tramadol q4-6h and Butrans being a patch is an advantage as some patients dont like taking pills around the clock for their pain to be controlled.i asked dr to consider 2 patients with commercial insurance,workers comp or medicaid if the Prior Authorization is completed.dr agreed to try Butrans in a couple patients and let me know what happens
PPLPMDL0020000001	Cleveland	OH	44106	4/11/2011	i talked to dr about Butrans initiation guide and patient information booklet/dvd as dr couldnt remember anything about Butrans other than it was a transdermal medication. dr said once weekly dosing was an advantage for some patients who dont like taking tramadol q4-6h and Butrans being a patch is an advantage as some patients dont like taking pills around the clock for their pain to be controlled.i asked dr to consider 2 patients with commercial insurance,workers comp or medicaid if the Prior Authorization is completed.dr agreed to try Butrans in a couple patients and let me know what happens
PPLPMDL0020000001	Cleveland	OH	44106	4/11/2011	i talked to dr about Butrans 5 core messages, fpi,initiation guide,application dvd/booklet and Butrans patient savings cards.dr said she see's chronic pain patients and only gives tramadol q4-6h.dr starts with 50mg,qd,then if that doesnt work increases dosing interval to bid or tid and if patients still are in pain she will increase dosage strength to 100mg.i asked dr if she could consider Butrans for her patients,right after that 50mg qd dosing interval,snt working and start patients on Butrans,showed dr Butrans initiation guide and dr asked about medicaid coverage as thats majority of their patient population.we discussed medicaid coverage and prior authorization needed for medicaid and i asked dr to consider 2 patients like we discussed to start on Butrans and dr said she'll consider that option.
PPLPMDL0020000001	Lakewood	OH	44107	4/11/2011	Dr said that he had switched a patient from embeda to Butrans. He does not remember which dose of Embeda, but he thinks he started her on the 10mcg Butrans. She is a BWC patient and he has not heard back from her so he is hoping that there has not been any issues and it is working well. He said he will see what the feedback is and let me know. I asked if he has any other patients in mind to start Butrans and he said he probably does and will continue to keep Butrans in mind. Sally his nurse has questions about the different schedules of drugs and we reviewed the providing relief preventing abuse brochure.
PPLPMDL0020000001	Cleveland	OH	44106	4/11/2011	i talked to dr about Butrans initiation guide and patient information booklet/dvd as dr couldnt remember anything about Butrans other than it was a transdermal medication. dr said once weekly dosing was an advantage for some patients who dont like taking tramadol q4-6h and Butrans being a patch is an advantage as some patients dont like taking pills around the clock for their pain to be controlled.i asked dr to consider 2 patients with commercial insurance,workers comp or medicaid if the Prior Authorization is completed.dr agreed to try Butrans in a couple patients and let me know what happens
PPLPMDL0020000001	Cleveland	OH	44106	4/11/2011	i talked to dr about Butrans initiation guide and patient information booklet/dvd as dr couldnt remember anything about Butrans other than it was a transdermal medication. dr said once weekly dosing was an advantage for some patients who dont like taking tramadol q4-6h and Butrans being a patch is an advantage as some patients dont like taking pills around the clock for their pain to be controlled.i asked dr to consider 2 patients with commercial insurance,workers comp or medicaid if the Prior Authorization is completed.dr agreed to try Butrans in a couple patients and let me know what happens
PPLPMDL0020000001	Cleveland	OH	44106	4/11/2011	i talked to dr about Butrans initiation guide and patient information booklet/dvd as dr couldnt remember anything about Butrans other than it was a transdermal medication. dr said once weekly dosing was an advantage for some patients who dont like taking tramadol q4-6h and Butrans being a patch is an advantage as some patients dont like taking pills around the clock for their pain to be controlled.i asked dr to consider 2 patients with commercial insurance,workers comp or medicaid if the Prior Authorization is completed.dr agreed to try Butrans in a couple patients and let me know what happens
PPLPMDL0020000001	Parma	OH	44129	4/11/2011	Spoke with Dawn (nurse & office manager) who said that she had spoken with Laura & that Laura said that she is not willing to taper a patient for Butrans. Laura told Dawn that she is concerned that this would cause a patient to go into withdrawl & she is not willing to do that. She also said that there is a concern that patients will not "be happy" with being switched from their current medication. I asked Dawn if they have patients on 3 Vicoden per day & she said yes, that is about the lowest dose they ever see. I asked if they ask for increases in doses & she said it happens frequently. I also discussed usage of supplemental analgesia but Dawn said that in their pain contract, it states that patients cannot be on two pain medications concurrently, so they would not be able to write Butrans + a short-acting for breakthrough. Dawn said the "key" might be to get Laura & Dr Nickels to a program & said Laura would be likely to prescribe it even if Dr Nickels does not.
PPLPMDL0020000001	Cleveland	OH	44106	4/11/2011	i talked to dr about Butrans initiation guide and patient information booklet/dvd as dr couldnt remember anything about Butrans other than it was a transdermal medication. dr said once weekly dosing was an advantage for some patients who dont like taking tramadol q4-6h and Butrans being a patch is an advantage as some patients dont like taking pills around the clock for their pain to be controlled.i asked dr to consider 2 patients with commercial insurance,workers comp or medicaid if the Prior Authorization is completed.dr agreed to try Butrans in a couple patients and let me know what happens
PPLPMDL0020000001	Cleveland	OH	44124	4/14/2011	Quick call....gave doc an updated oxycontin formulary grid and explained same. I told him there were some small recent changes. He said that he has not had any recent coverage issues with oxycontin. Gave him a butrans formulary grid also and explained the appropriate patient type. No savings cards needed.
PPLPMDL0020000001	Sagamore Hills	OH	44067	4/14/2011	Quick call- Dr Gemma said she remembers Butrans & that it is transdermal. Discussed dosing & appropriate patient type & reviewed managed care grid for Butrans. Also recommended Senokot-S for opioid-induced
PPLPMDL0020000001	Cleveland	OH	44195	4/14/2011	dr said he hasnt started any patients on Butrans yet as he forgot who the appropriate patient was.dr remembered Butrans once weekly dosing and that it was transdermal delivery.i asked dr if those were even benefits he saw in Butrans? dr said once weekly dosing is beneficial for some patients who dont like taking pills around the clock for their chronic pain.i showed dr Butrans initiation guide and asked if he could focus on 2 patients,currenty taking opioids,properly taper them and initiate Butrans if their short-acting opioids arent controlling their pain and if dr believes a long-acting opioid may be more appropriate? dr said he will consider that option. we discussed OxyContin,7 tablet strengths,as an option when patients are on 80mg or more of oral morphine equivalent,dr said he prescribes OxyContin and thanked me for information.Gave dr formulary grids for Butrans and OxyContin and recommended Senokot-S
PPLPMDL0020000001	CLEVELAND	OH	44109	4/14/2011	i talked to Rod,Pharmacist,about Butrans stocking and Rod said he's not seen any scripts for Butrans yet so he's not ordering.we discussed importance of stocking all 3 dosage strengths of Butrans so patients arent turned away and told to return in 24hrs but Rod said he wont order any strength of Butrans until he see's the first script.i showed Rod Butrans initiation guide and asked who he thought could benefit from Butrans? Rod said majority of patients are taking 2-3 tabs of Vicodin or Percocet a day so he would think that would be the place for Butrans and only those patients complaining about their short-acting medications not lasting long enough as so many patients like taking their pills. i asked Rod to consider recommending Butrans to any doctors when he hears patients complaining to him that their short-acting opioids arent lasting long enough and perhaps patients could be considered for Butrans if appropriate.we discussed OxyContin stocking and appropriate patients&insurance
PPLPMDL0020000001	Cleveland	OH	44103	4/14/2011	i talked to dr about Butrans and who he felt could be appropriate in his practice,dr said there a lot of patients who could probably do well on Butrans but he's not doing the PA for Medicaid patients and thats majority of his patients so he didnt want to discuss it anymore until Butrans gets on formulary for Medicaid. we talked about OxyContin being an appropriate option for patients above 40mg oxycodone or hydrocodone and perhaps benefitting from a long-acting opioid,dr agreed saying he likes OxyContin and knows its available on medicaid.i showed dr formulary grids for both products but he took OxyContin formulary grid.
PPLPMDL0020000001	Cleveland	OH	44102	4/14/2011	i restated my last conversation with dr,see previous call note,and asked if she started 2 patients as she agreed to do on Butrans? dr said no,she likes Butrans,its a good medication but hasnt started anyone yet.i asked dr what information does she need to feel comfortable prescribing Butrans and find 2 patients to try Butrans in? dr said she doesnt need any information,she feels comfortable and understands who the patient type is,but insurance is her issue.i asked dr what insurance type is she referencing? dr said Medicaid as she doesnt remember what the coverage is for Butrans? we discussed dr trying Butrans in 2 commercial plan patients first,as thats the easiest and give 2 patients Butrans patient savings cards.dr said thats fine but she has a lot of medicaid,so we talked about prior authorization requirements for Medicaid patients to try and get approval of Butrans.i showed dr again Butrans initiation guide,1-3 tabs 5mg short-acting opioid patient,dr said ok made sense
PPLPMDL0020000001	Cleveland	OH	44103	4/14/2011	i talked to dr about the couple of patients she's started on Butrans and dr said both patients were taking short-acting opioids and complaining that their medication was wearing off sooner than it should so dr thought she would try Butrans and both patients seem to be doing well. we discussed more patients,like that, who are currently taking opioids but either the once weekly dosing is an appealing option of Butrans or patients are telling dr that their pain isnt controlled with short-acting opioids. dr and i discussed commercial plan insurance and use of Butrans patient savings cards and medicaid patients needing a prior authorization for Butrans.i asked dr to focus on patients we discussed and starting 2 more patients,dr agreed. we discussed OxyContin as an appropriate option after Butrans and insurance coverage for Medicaid and Medicare and i recommended Senokot-S worked pain management and chronic pain dept-see call notes; worked rheumatology dept-left Butrans fpi,initiation guide and patient information booklet with my business card-receptionist said i have to leave the information,the medical secretaries will take the information and share with doctors and if they are interested in meeting with me,they will contact me:left all of this information for Patty,PA,Dr.Long,Dr.Calabrese,Dr.Chatterjee and Dr.Mazanec and Betsy,NP; worked neurology dept-left Butrans fpi,initiation guide and patient information booklet for Dr.Spears,Dr.Stillman,Dr.Kriegler and Dr.Mays,with medical secretaries who said they will give information to doctors and doctors will tell them if they want an appointment with me.
PPLPMDL0020000001	Lyndhurst	OH	44124	4/14/2011	Spoke to Megan about the stocking and movement of Butrans. She said that they have had a few scripts but she does not know the prescriber. No scripts recently. I asked if she recalled the customer using a savings card. She said no. I reviewed the savings card program. Gave her a flyer for the REMS webinar for pharmacist.
PPLPMDL0020000001	Olmsted Falls	OH	44138	4/14/2011	Spoke with Kelly, we reviewed the Butrans medication guide. I let her know that we will need her help with teaching the patients about proper use and application of Butrans and she agreed. We discussed OxyContin as an option when Butrans may not be appropriate. Reminder about Senokot S as an option.
PPLPMDL0020000001	Cleveland	OH	44102	4/14/2011	Nagla,PA,said she hasnt started any patients on Butrans as the follows Dr.Talbot's lead and Dr hasnt started any patients on Butrans yet. I asked Nagl,PA,what benefits she saw in Butrans for her patients? Nagla said once weekly dosing is a benefit for those patients who are complaining to her that their short-acting opioids are wearing off sooner than they should and she's thinking a long-acting opioid would be more appropriate.i asked Nagla if she would consider 1 patient,with commercial insurance,taking 1-3 tabs of the 5mg hydrocodone or oxycodone that could be started on Butrans and showed Nagla Butrans initiation guide for this discussion.Nagla said she would do that but will feel better once she see's dr talbot starting patients on Butrans.
PPLPMDL0020000001	Cleveland	OH	44130	4/14/2011	Reviewed Butrans managed care grid & savings cards with Dr Fedorko. He said he has a patient in the hospital who he is planning on sending home with Butrans. I started to ask him when he moves a patient to a long-acting medication but he wandered back into a room before i could finish. Spoke with Maryellen & reviewed managed care/savings for Butrans.Dr Fedorko came back out of the room & told me he was looking for samples for a patient with constipation. I showed him the Senokot-S & Colace samples I had left for him on my last visit & also gave Rylozt value card reminder.
PPLPMDL0020000001					

PPLPMDL0020000001	Akron	OH	44333	4/14/2011	I asked Dr. Fouad why he has not prescribed Butrans yet> He told me he had not had the opportunity and when I explained the patient type...again he simply said he would try it on two patients that afternoon.<font color=blue><b>CHUDAKOB's query on 04/24/2011</b></font>Rather than explaining the patient type, ask him what opportunity he is waiting for or what patient type he is looking for. You will gain a lot more information by asking instead of telling.<font color=green><b>LAPMACA's response on 04/25/2011</b></font>Thanks. I'll try it!<font color=blue><b>CHUDAKOB added notes on 04/27/2011</b></font>Great. I can't wait to see how it works when we are together in the field. Thanks!
PPLPMDL0020000001	Berea	OH	44017	4/14/2011	Quick call with April, we reviewed the Butrans patient medication guide. I let her know that it will be important for her to help us instruct the patients on the proper use and application of Butrans. I reviewed OxyContin as an option when patients are taking more than 40mg of hydrocodone per day. I reminder her to recommend Senokot S.
PPLPMDL0020000001	Copley	OH	44321	4/14/2011	Quick call. Asked Dr. Heim if he was going to see any patients on low dose hydrocodone and he said he wasn't sure. I helped him identify the appropriate Butran's patient and reminded him of coverage.
PPLPMDL0020000001	Olmsted Falls	OH	44138	4/14/2011	I asked Dr what Benefits he sees in Butrans. He said the 7 day doses and patients not having to take pills around the clock. I asked if he would start the next appropriate chronic pain patient on Butrans. He said that he would and he will just have to wait for one who is not Medicaid. I reviewed the managed care and savings cards. I asked him to think of OxyContin for those appropriate Medicaid patients.
PPLPMDL0020000001	Westlake	OH	44145	4/14/2011	I asked Dr about the progress of getting Butrans on SJWS formulary. He said he has not heard any news yet. He said he is still a big fan of Butrans and is working to be able to use it in-patient. I asked if he would come to our upcoming peer group. He will let me know. I asked Kelly about Dr Nair joining UH and she said she will be with the neurology group. She said they are building their new department and pain management and neurology will be next to each other.
PPLPMDL0020000001	Berea	OH	44017	4/14/2011	I asked Dr if he would start the next chronic pain patient he sees who is appropriate for Butrans today. He agreed.
PPLPMDL0020000001	Sagamore Hills	OH	44067	4/14/2011	Quick call- Dr Lenox said he has not prescribed Butrans yet but did remember it is CII, once-a-week, & transdermal. He said he would prescribe it when he sees "the right patient", but then he left.Spoke with nurses and positioned Butrans for patients who are taking NSAID's or COX-2s & not getting relief or for those taking a low dose of Vicoden around-the-clock who ask for an increase in dose. Also reviewed managed care coverage.
PPLPMDL0020000001	Sagamore Hills	OH	44067	4/14/2011	Introduced myself & Purdue's products to Dr Maguire. Delivered 5 Butrans core messages. He said he really does not treat a lot of "chronic pain". I told him that there is no specific etiology of pain that a patient must have to fit the indication, just that the patient has a chronic condition that causes them to be in pain. He said he does not prescribe many opioids at all. Reviewed CII & agreed that he should be just as cautious in prescribing Butrans as with any other opioid. He asked about adverse events-showed FPI section 6. He said he would keep Butrans in mind if he ever decided to treat a patient for a condition causing pain chronically.
PPLPMDL0020000001	Cleveland	OH	44109	4/14/2011	worked internal medicine clinic(out-patient)-had to leave Butrans fpi/initiation guide and patient information booklet with my business card for Dr.Lindheim,Dr.Harrington,Dr.Falck-Ytter and Dr.Ricanati; worked family medicine dept(in-patient)-left same information on Butrans for Dr.Forde,Dr.Papadakis and Dr.Liu
PPLPMDL0020000001	Akron	OH	44333	4/14/2011	Introduced Butrans and FPI. I asked Dr. Pinkowski if he treated chronic pain and he said he did not. I explained that Butrans may not be appropriate for his patients. He was happy that I took the time to go over Butrans and the FPI in case any of his patients came in on it he would know what it was.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/14/2011	I asked Dr. Pitt if he thought he would ever trial Butrans on just one patient. He said probably not. I asked him why he didn't see a benefit and he said that he doesn't really like patch technology and that most of patients are beyond the point of Butrans.
PPLPMDL0020000001	Highland Heights	OH	44143	4/14/2011	Window call....I asked doc what was one of his larger commercial prescription plans. He said medical mutual. I gave him a formulary grid showing that Butrans is covered. I asked him to prescribe for appropriate medical mutual patients and give a savings card.
PPLPMDL0020000001	Highland Heights	OH	44143	4/14/2011	QUICK call....I reviewed the Butrans indication and positioning. Gave her an initiation guide and reminded her that commercial patients should get a savings card. Nothing learned.
PPLPMDL0020000001	Sagamore Hills	OH	44067	4/14/2011	Dr Sevier said because he does not see a lot of chronic pain patients, he has not prescribed Butrans yet. He added that he only has one patient on Duragesic. Reminded him that fentanyl patients were excluded from studies & asked him to think of more "moderate" pain. Showed initiation guide pg 6 & positioned Butrans for patients for whom he is ready to prescribe an opioid. I asked if he would consider Butrans for patients with a chronically painful condition who is not getting relief from NSAID's or COX-2's. He said he would & that he likes the idea of putting a patient on Butrans once-a-week instead of around-the-clock oral medications. I asked what specific patient type he was thinking of & he said an older patient with osteoarthritis who would be on Vicoden around-the-clock. Told him that clinically, that is an ideal patient, however, with current Medicare Part D coverage, he should think of commercially insured patients-He agreed. OxyContin & Senokot-S reminders.
PPLPMDL0020000001	Cleveland	OH	44195	4/14/2011	I talked to dr in hallways,as dr said he didnt have time to go in office and speak with me but we discussed doctors patients he has started on Butrans and dr said these are all patients who have been taking Vicodin and Percocet for years and their pain wasnt controlled so he thought Butrans would be a better option being long-acting and the patients seem to be doing well,dr said no complaints or calls from patients is a good sign. we discussed titration of Butrans,if patients need to be titrated after 3days when steady state plasma levels are achieved,dr said he knew that and would let me know if he has any other questions and he didnt need any Butrans patient savings cards.<font color=blue><b>CHUDAKOB added notes on 04/24/2011</b></font>Nice job getting to see this very difficult physician!
PPLPMDL0020000001	Copley	OH	44321	4/14/2011	I clarified that Dr. Machado understood the molecule Buprenorphine since he was unclear on my last visit. He said he understood but then said if he writes Butrans he will not be able to write as much OxyContin. I showed him the titration guide and explained where he should be using Butrans and told him for patients that may not be appropriate for Butrans he could prescribe OxyContin.<font color=blue><b>CHUDAKOB's query on 04/24/2011</b></font>This could have been an opportunity to put it back on the physicians by asking him what he sees as the difference in the two patient types.<font color=green><b>LAPMACA's response on 04/25/2011</b></font>I'll do that next call! Thanks!<font color=blue><b>CHUDAKOB added notes on 04/27/2011</b></font>Keep that type of concept in mind when you are asked a question. You may end up learning about why the question was asked in the first place.
PPLPMDL0020000001	Garfield Heights	OH	44125	4/14/2011	Dr Samuel asked if it was "common" to have a patient complain of itching from Butrans. He told me the patient he had started on Butrans had been off her Percocet for one week before starting Butrans. When she started taking Butrans, she experienced itching (reported last call). Reviewed FPI section 6 & also reviewed initiation/titration guide. Went over page 6, discussing recommended taper procedure on pg 6. We discussed how to properly initiate treatment in different patient types, depending on their current opioid therapy. He said that because short-acting medications are sometimes so inexpensive, patients prefer them & they also like the "control" of short-acting opioids. Reviewed managed care & savings & asked him to focus on commercially insured patients as he said cost is important. Dr Samuel said he feels more comfortable with Butrans now & wants to start prescribing more of it because he "loves" long-acting medications. He said he will be using it more.<font color=blue><b>CHUDAKOB's query on 04/24/2011</b></font>Ashleigh, you have to report an AE everytime you hear it, even if it the same one and it was already reported. Please call this in.<font color=green><b>APSEGAS's response on 04/25/2011</b></font>OK. I apologize- I have taken care of it now by calling it in.<font color=blue><b>CHUDAKOB added notes on 04/27/2011</b></font>Thank you!
PPLPMDL0020000001	Akron	OH	44333	4/14/2011	Dr. Steurer told me that he has many patients who are on low dose SAO's and have been on them for a long time. He also told me that most all of his patients have commercial insurance or BWC. I explained that Butrans was affordable for his patients and went over the co-pay cards and showed him the titration guide so he would understand what dose to initiate therapy at. He liked the concept but seemed hesitant and said that he would like to see an actual clinical study outside of the FPI.
PPLPMDL0020000001	Cleveland	OH	44195	4/14/2011	I asked Anne,NP,if she has considered Butrans for any of her patients yet and Anne said no she hasnt. Anne said she see's all of Dr.Stanton-Hicks's patients and he hasnt started anyone on Butrans yet. I asked Anne if she even saw any benefits in Butrans for their patients? Anne said once weekly dosing is easy for some patients but rotating the patches can be difficult for some patients to remember and she doesnt trust all of them to rotate the application sites and put a new patch on every week.I asked Anne to think of 2 patients,that she trusts,that she is taking short-acting tramadol or vicodin around the clock but telling her its not working long enough or perhaps she's thinking a long-acting opioid could be more appropriate and to give these 2 patients a Butrans patient savings card. Anne said she would do that and i told her i would follow-up next week.
PPLPMDL0020000001	Garfield Hts	OH	44125	4/14/2011	Spoke with technician who said the pharmacist was too busy today for a visit. I asked if they had gotten Butrans in stock, but she said they have not that she is aware of. Reviewed indication & dosing with her & left Butrans FPI with my card & asked her to give it to the pharmacy manager & she agreed to do this.
PPLPMDL0020000001	Cleveland	OH	44130	4/14/2011	I asked Dr Diab what caused him to prescribe Butrans for the patient he had told me about. He told me the patient could not get Butrans because of too high a cost. I showed him the formulary grid & asked that he think of commercially insured patients who can utilize the savings cards. He asked me to put the formulary grid on his desk & then went into a room. I checked his savings card supply & did notice that one was missing.<font color=blue><b>CHUDAKOB added notes on 04/24/2011</b></font>Nice job going back to the same objective since it was not resolved.
PPLPMDL0020000001	Parma	OH	44134	4/14/2011	Dr Hernandez said that he had a patient who experienced nausea & vomiting while on the 5mcg dose of Butrans. He said the patient said they were getting good pain relief but that they discontinued treatment with Butrans due to the nausea & vomiting. Dr Hernandez said he is getting good clinical feedback fro his Butrans patients & was happy to hear that the Rite Aid "unbreakable carton" issue had been resolved; however he said he just had a patient who tried to fill a prescription at a Discount Drug Mart & had the same problem of the pharmacist not filling the prescription for one patch. He did not know which location this occurred at. I let Dr Hernandez know that I would work with the area pharmacists to get this resolved. He said he likes to write for one patch for a first prescription so that he can make sure the patient is on the correct dose before prescribing a full carton. He requested more savings cards- also reminded him of OxyContin savings cards for eligible patients.
PPLPMDL0020000001	Cleveland	OH	44195	4/14/2011	dr said he's not prescribed Butrans yet,as he's trying to get majority of his patients OFF opioids. I asked dr if he saw any benefits in Butrans for his patients? dr said once weekly dosing and putting medication in a patch was beneficial for some patients but he doesnt have a lot of patients on short-acting opioids that he can think of that would be interested in taking a patch,his patients are stable on their pills. I asked dr to consider just 1 patient,who tells him that their short-acting opioids are NOT controlling their pain and perhaps Butrans could be an option and showed dr Butrans initiation guide to discuss proper tapering and initiating of Butrans.
PPLPMDL0020000001	Cleveland	OH	44195	4/14/2011	I talked to Kathy about doctors prescribing Butrans in department.Kathy said she knows Dr.Shin and Dr.Syed have prescribed but noone else.Kathy said because she see's all of Dr.Minzter and Dr.Mekhal's patients,they need to believe in Butrans as an option for their patients.Kathy and I talked about me setting up more individual appointments with both of these physicians to find out if doctors need more information from me regarding Butrans,especially Dr.Mekhal as Kathy said he never prescribes new medications and Butrans is new to him,for a while and that could be a year or so.I asked if Kathy could share the Butrans initiation guide and patient savings card program with both doctors and see if they tell her anything that concerns them so i can address any issues/questions.Kathy agreed to do that.
PPLPMDL0020000001	Cleveland	OH	44195	4/14/2011	I talked to dr about her tramadol patients and asked if she ever has patients tell her they are still in pain even though they are taking short-acting tramadol? dr said yes so we looked at Butrans initiation guide and discussed proper tapering and initiation of Butrans. dr asked about insurance coverage so we talked about her commercial plan patients and I asked dr to try Butrans in 2 patients to get some clinical experience,dr agreed
PPLPMDL0020000001	Akron	OH	44302	4/14/2011	Introduced Butrans and FPI. Went over the ideal patient type and asked him if he treated chronic pain. He told me that he only treats pain PRN so I told him that Butrans may not be the appropriate therapy for his patients. He asked if I would leave some literature behind in case any of his patients come in on Butrans.
PPLPMDL0020000001	Cleveland	OH	44109	4/15/2011	I talked to dr about appropriate patients for Butrans and dr said he knows that the patients for Butrans are low dose,short-acting opioids and not controlled on that dosing regimen and a long-acting opioid like Butrans could be an option.I told dr that was right and asked if he had seen any patients like that in the past week since we had lunch? dr said no,he has patients exercise,do physical therapy,acupuncture,more alternative options first and then if that doesnt work he'll prescribe tramadol and then vicodin but he doesnt have a lot of patients on these opioids,dr said he will try Butrans in 1 or 2 patients once he see's them.dr asked about BWC and commercial plan insurance coverage for Butrans so we discussed both of them.I recommended Senokot-S
PPLPMDL0020000001	Beachwood	OH	44122	4/15/2011	I asked Dr Yokiel what types of patients he had tried Butrans on so far. He said patients who were having chronic pain & who were taking Vicoden or Percocet around-the-clock. He said it makes sense to have a patient on a long-acting medication if they have a chronic issue. He said he also allows them to keep a lower supply of their short-acting medication in case they need supplemental analgesia. He said he does not see patients on lower doses of opioids or opioid-naive patients very often. He also said he has not had any negative feedback on Butrans & he plans to continue prescribing it. Reviewed managed care grids & savings cards for Butrans & OxyContin. He said he is a supporter of OxyContin for appropriate patients & will continue to use it in these patients.
PPLPMDL0020000001					



	Beachwood	OH	44122	4/15/2011	Introduced Butrans to Jennifer, the new NP at Dr Yokiel's office. She said she had wanted to hear about Butrans because when she was working at South Pointe, she missed the day I was there for the initial presentation. Delivered 5 core messages & alerted her to black box warning. She asked what types of patients she could use it in. Reviewed appropriate patient types & discussed patients taking short-acting medications like Vicoden or Percocet around-the-clock for chronic conditions. She said that Butrans sounded like something she will be able to use & liked that it is CIII. Reminded her that because it is an opioid, Butrans does carry abuse & addiction potential. She asked if they could take supplemental analgesia. I showed FPI 2.4 & told her patients can take immediate release opioid & non-opioid medications while taking Butrans. She asked about insurance coverage, so I showed formulary grid & reviewed savings cards, asking her to focus on commercially insured patients or BWC.
PPLPMDL0020000001	Independence	OH	44131	4/15/2011	I asked Dr Pai what had caused him to choose Butrans for the patient who he prescribed it for. He said it was an 84 year old woman who had been taking Vicoden around-the-clock & then asked for an increase in dose. He said he didn't want to up her dose or adding on, so he put her on Butrans. He said the patient had a condition that caused her to be hospitalized two weeks after she started on Butrans & the patient was taken off Butrans at St Vincent's since they do not have it for inpatients there. He said that he has not seen her since but may put her back on the Butrans. Told Dr Pai that she sounds like an ideal patient clinically but managed care may be an issue. Reviewed coverage & asked him to focus on commercial patients. I asked him if he would prescribe Butrans for an opioid naive patient- he said he is reluctant to write opioids for those patients, especially if they are younger. I asked if he would use it in place of tramadol for appropriate patients-he said "definitely".
PPLPMDL0020000001	South Euclid	OH	44121	4/15/2011	I asked doc if he has considered Butrans for any appropriate patients - opioid naive or on low dose opioids. He said he forgets and asked about coverage. Told him no medicaid/medicare; gave him a formulary grid showing the commercial plans. He said he wants to try butrans.
PPLPMDL0020000001	Akron	OH	44304	4/15/2011	Introduced Butrans and FPI. Asked him how often he was prescribing low dose hydrocodone. He said many times each week. I told him that for patients who were chronic Butrans could be used in place of SAO's. This was a quick window call.
PPLPMDL0020000001	Akron	OH	44313	4/15/2011	Spoke to the pharmacist and introduced Butrans and the FPI. She was rushed for time so I quickly went over the patient education guides.
PPLPMDL0020000001	Akron	OH	44333	4/15/2011	I asked Dr. Bashor if he has been able to identify one patient who has commercial insurance that would be appropriate to start on Butrans therapy. he said that he has not and will continue to keep it in mind for that patient.
PPLPMDL0020000001	Cleveland	OH	44113	4/15/2011	worked pain management&pm&r dept-dr shen call note
PPLPMDL0020000001	Euclid	OH	44119	4/15/2011	Spoke to lauren about the stocking and movement of Butrans. She confirmed stocking but said that she might have seen only one script for Butrans and does not recall the prescriber. I explained the savings and the voucher program. Gave her a flyer for pharmacist about the REMS. She asked if it was for CE credits. I told her I was not sure.
PPLPMDL0020000001	Cleveland	OH	44121	4/15/2011	Window call....I discussed the Butrans indication and positioning, CII status and coverage. Gave him a formulary grid and explained the savings card program. Nothing learned.
PPLPMDL0020000001	Cleveland	OH	44109	4/15/2011	I talked to dr about patients he has seen this week,with chronic pain,that dr felt would be appropriate for Butrans.dr said he knows that Butrans is for patients taking low dose short-acting opioids where pain isnt controlled and perhaps Butrans being a long-acting opioid could be an appropriate option,but he hasnt seen anyone that he feels is telling him their pain isnt controlled.dr said he only has a few patients on opioids as he is a new attending here,so give him time as he will continue to consider Butrans as an option.we talked about Butrans managed care coverage for commercial,medicaid and BWC plans. I recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	4/15/2011	dr said he hasnt started anyone on Butrans,but does like that Butrans is a patch and is dosed once a week.dr asked about BWC and commercial insurance,we discussed both and Butrans patient savings cards and dr said he didnt have more time to talk but would eventually start a couple of patients on Butrans see what happens.
PPLPMDL0020000001	Cleveland	OH	44109	4/15/2011	I talked to dr about patients he thinks can benefit from Butrans and showed Butrans initiation guide.dr said he only has 1 or 2 patients in mind that would be interested in a patch once a week,as most patients like taking their short-acting opioids because they think they have more control over their pain levels with the short-acting medications.dr said he likes once weekly dosing instead of relying on patients to take their medications around the clock because sometimes they do this and sometime they dont.we discussed managed care coverage and use of Butrans savings cards and I asked dr to consider 2 patients to try Butrans in,based on our discussion.dr agreed.i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44130	4/15/2011	Quick call- Caught Dr Kansal at the window. I asked when he would use a long-acting opioid vs a short-acting around-the-clock regimen. Dorothy said he did not have time to talk today & he walked away. Reminders for savings cards for Butrans, OxyContin, & Ryzolet. Dorothy said she thought she needed some Ryzolet savings cards & also requested more Senokot-S & Colace samples. She said Dr Kansal has not had as much time to talk to reps lately because he has cut his hours temporarily. She said to stop back in a couple weeks around 2pm & she would try to get me some time with him. Also scheduled lunch.
PPLPMDL0020000001	Akron	OH	44333	4/15/2011	I have continued to probe to try and uncover if Dr. Richter is treating any chronic pain. Although he treats fibromialgia, he told me that he uses SAO and when anything becomes chronic he refers them out.
PPLPMDL0020000001	Cleveland	OH	44102	4/15/2011	I talked to Vicky,Pharmacist,about Butrans stocking and she confirmed that the Butrans 5mcg is in stock but she hasnt seen any scripts for Butrans we talked about doctors im working with,the 5 core messages,initiation guide and Butrans patient savings cards.i asked if Vicky saw benefits in Butrans and if she would recommend Butrans for those patients appropriate? Vicky said once weekly dosing option and medication in a patch is beneficial to patients,especially the chronic pain patients who dont like taking pills and would prefer a patch and recommending Butrans depends on her relationship with doctor but she would do that for some patients she knows arent controlled on short-acting opioids.
PPLPMDL0020000001	Parma	OH	44129	4/15/2011	Quick call- Gave Dr Roheny Butrans REMS information packet. Spent time with Kathy & Lorraine & reviewed Butrans savings cards & managed care coverage.
PPLPMDL0020000001	Akron	OH	44333	4/15/2011	I asked Dr. Z: if he would be willing to try Butrans therapy on at least 2 patients that he would typically refer to Pain Management. He said that he does not really feel comfortable prescribing LAO's and treating chronic pain but would consider it.
PPLPMDL0020000001	Cleveland	OH	44114	4/15/2011	dr said he's started a couple more patients on Butrans,thinks he has 4 or 5 patients now on Butrans that he took off Kadian,as he wants to take patients on 30-80mg oral morphine that are complaining to him their pain isnt controlled,and tapering them appropriately and starting them on Butrans.we talked about appropriate initiating dosage strengths,Butrans 5mcg or 10mcg and titration for these patients and I asked dr if he knew how to write Butrans prescription,showed him the back of initiation guide and we talked about that.dr said BWC is their biggest plan and that seems to be working for patients getting Butrans.
PPLPMDL0020000001	Cleveland	OH	44109	4/15/2011	dr said he hasnt started anyone on Butrans yet but has a few patients in mind that HE thinks will benefit from Butrans.dr said these are patients taking tramadol and he thinks a once weekly dosing option in a patch would be more beneficial than short-acting tramadol dosed q4-6h.i showed dr Butrans initiation guide and we discussed proper tapering of tramadol and initiation of Butrans.dr asked about commercial plan insurance coverage and medicaid coverage for Butrans as thats the majority of his patients,we discussed both plans for Butrans and use of Butrans patient savings cards only for commercial plan patients. I asked dr to think of 2 patients where Butrans could be an appropriate option,dr agreed.i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44102	4/15/2011	I talked to Brian,Pharmacy Technician,as Vince,Pharmacist,was too busy to talk today.we talked about Vince ordering Butrans and importance of stocking all 3 dosage strengths as they havent ordered Butrans yet.Brian said he hasnt seen any scripts for Butrans and asked what Butrans was again as he forgot.i talked to Brian about the 5 core messages of Butrans,showed initiation guide and patient information booklet and asked Brian to share all of this information with Vince and see if Vince will order at least Butrans 5mcg and 10mcg,the 2 initiating dosage strengths of Butrans,Vince said he would do that and I asked Vince to recommend Senokot-S for their patients taking opioids to treat opioid induced constipation
PPLPMDL0020000001	Independence	OH	44131	4/15/2011	I asked JT if he would fill a Butrans prescription written for one patch. He said he would not break a carton to do this. He said it is too risky for him to do from a business standpoint & that the remainder of the open box would not be returnable if it didn't "move". He added that because he has seen only one Butrans prescription, he does not see that this would benefit him. I let him know that some practitioners are prescribing it that way to ensure proper dosage. I asked if, when he does start to see more Butrans activity, he would reconsider this. He said he might, but it is more likely that he will never do this.
PPLPMDL0020000001	Parma Heights	OH	44129	4/15/2011	Spoke with Larissa & asked her if they have a problem dispensing a single patch for Butrans if they get a prescription written that way. She said she is not sure how that would be handled. She suggested I come back to speak with Al about it as he is the manager. She said that she has not dispensed any Butrans yet, so her concern would be that they would not be able to "get rid of" the remaining patches from that box. Let her know that some physicians are writing prescriptions that way to ensure the correct starting dose. Also offered more OxyContin savings cards but she said they have plenty.
PPLPMDL0020000001	Cleveland	OH	44109	4/15/2011	I asked dr if there was any reason why she hasnt prescribed Butrans yet? dr said no,she thinks Butrans is a good medication,likes once weekly dosing but hasnt had any patients complain to her that their short-acting opioids arent working.i asked dr if she has patients calling in to office sooner,requesting medication refills? dr said yes,every day that happens.i told dr she could consider Butrans for those patients,if patients short-acting opioids arent lasting long enough to control pain,that could be a sign patients need a long-acting opioid.dr said thats a good point and would remember that next time.i asked dr to think of 2 patients to start on Butrans like this and use the Butrans patient savings cards.dr asked about medicaid coverage and BWC so we discussed those 2 plans.i recommended Senokot-S
PPLPMDL0020000001	Euclid	OH	44119	4/15/2011	I asked doc what he does for patients when they fail on tramadol for chronic pain. He said, "Butrans". I asked him to seriously consider trying Butrans after tramadol (or Ryzolet). I discussed the Butrans 7 day delivery and the CII status. Showed him the initiation guide and how to dose. I also showed the formulary grid. He bawked at the 3rd tier status but I explained the \$40 off with the savings cards.
PPLPMDL0020000001	Cleveland	OH	44109	4/15/2011	I talked to dr about benefits he see's in Butrans for his patients,dr said the once weekly dosing of Butrans is easier for some patients that dont like taking pills around the clock or the patients complaining to him that their short-acting opioids are wearing off sooner than they should.dr said he only has a few patients on chronic opioid therapy so he hasnt seen anyone yet that he thinks Butrans could be an option for, but he'll keep it in mind.i asked dr to think of 2 patients,like we discussed,showing the Butrans initiation guide noting tapering and initiation of Butrans,to start on Butrans.dr said he will keep it in mind and asked me what the insurance coverage was like for commercial plans and medicaid? we discussed both plans i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	4/15/2011	dr said he has talked to a few patients about Butrans but these patients didnt want to get off their short-acting opioids,so we talked about dr discussing Butrans with patients who aren't controlled on their short-acting opioids and asking for something different.i showed dr Butrans initiation guide and asked him to find 2 patients to start on Butrans,looking at opioid experienced page with tapering and initiation discussion,and give Butrans patient savings card.dr agreed. I recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44102	4/15/2011	dr said she didnt remember anything about Butrans,so we discussed Butrans fpi,5 core messages,initiation guide and patient information booklet/dvd.dr said she likes that Butrans is a patch and dosed once a week because she has patients taking vicodin and percocet that call the office earlier than they should requesting a refill so she knows that their short-acting opioids arent lasting long enough.dr said her pain patients come back to see her every 4 weeks for a visit,if they have chronic pain,as she wont refill over phone for vicodin or percocet.we talked about dr considering 2 patients,with commercial plan insurance,that are taking 1-3 tabs of the 5mg vicodin or percocet dosage strength,that dr could consider starting on Butrans,if they are complaining to her that their short-acting opioids arent lasting long enough,dr said that was fair and would think of some patients to try Butrans
PPLPMDL0020000001	Euclid	OH	44117	4/15/2011	in and let me know what happens.i recommended Senokot-S
PPLPMDL0020000001	Euclid	OH	44117	4/15/2011	Window call....asked doc if he spoke to Dr. Moutafawad and got the endorsement for Butrans that he was looking for. He said he had not spoken to him yet. I asked him to think of Butrans for patients failing on tramadol instead of going directly to vicodin. He said ok. Gave him an initiation guide.
PPLPMDL0020000001	Cleveland	OH	44102	4/15/2011	I talked to dr at lunch today and dr said she didnt remember anything about Butrans.dr said she has a handful of pain patients that are taking vicodin and a lot of patients taking percocet.dr said Butrans once weekly dosing and transdermal delivery are the 2 benefits she see's for her patients, but she doesnt think a lot of her patients would be willing to stop their short-acting opioids and start Butrans.i showed dr Butrans fpi,initiation of therapy and maintenance of therapy sections and we discussed dr starting patients on Butrans,after proper tapering of vicodin or percocet,then initiating Butrans and if patients need to take their short-acting opioids they can,dr said she felt better knowing that as she thought patients had to stop their short-acting opioids completely if they were being started on Butrans.we discussed Butrans patient information booklet and dvd and dr said she will take 2 of them and think of 1 or 2 patients that would be willing to try Butrans.i told dr to think
PPLPMDL0020000001	Cleveland	OH	44113	4/15/2011	I talked to dr about patients she's started on Butrans recently and dr said these are all vicodin and percocet patients that were telling her their pain wasnt controlled with their short-acting medications so they wanted more pills and some have said they wanted to try something different,so dr started them on Butrans.i showed dr Butrans initiation guide,discussed proper tapering and initiation of Butrans 5mcg or 10mcg and asked dr to continue choosing Butrans as an option for patients she feels are appropriate,as discussed today.
PPLPMDL0020000001					

PPLPMDL0020000001	Cleveland	OH	44114	4/15/2011	i talked to John,PA,about recommending Butrans to dr katz and dr marshall,as John has told me he likes Butrans being a transdermal medication and dosed once a week.we talked about patients he feels are appropriate,low dose vicodin or percocet and John said dr marshall is starting patients that were on oral morphine,kadian,and tapering them down and starting on appropriate Butrans dose.i showed John Butrans initiation guide and how script should be written and John said yes thats how they are prescribing Butrans.i asked him to continue recommending Butrans and consider patients who are only taking 1 or 2 5mg vicodin or percocet and not waiting so long to consider Butrans as an option,John said okay
PPLPMDL0020000001	Parma	OH	44129	4/15/2011	Spoke with Heath & asked if they would be willing to fill a prescription for Butrans for fewer than 4 patches if they received a prescription written that way. He said that they do that frequently with Duragesic, so he sees no problem with being able to do that with anything else. He said he has not yet dispensed any Butrans, but thinks it seems like something physicians would prescribe. I told him that some physicians are writing for fewer than 4 to gauge that patient's proper starting dose so he may see prescriptions written that way. Also reminded him of e-voucher & OxyContin savings cards.
PPLPMDL0020000001	Parma	OH	44134	4/18/2011	Dr Scanlon said he has not prescribed Butrans yet & that he "has no excuse" as to why other than he "just has to remember it". I asked him how I could help him remember & showed him a demo patch so he could see & feel what Butrans is like. He said he liked the way it felt & that he was surprised how flexible the material is. I asked him how often he sees patients like the ones we have been talking about (ie taking around-the-clock Vicoden, Percocet, or tramadol for chronic pain) & he said he sees them "all the time". I asked what benefits he saw with Butrans. He said he likes that he could prescribe Butrans & could possibly avoid the patient getting "used" to taking a pill every few hours for pain. He said he will prescribe Butrans for a patient today. Reviewed managed care & savings cards & gave him OxyContin savings cards, reminding him of OxyContin for appropriate patients beyond Butrans 20mcg/hr. He repeated that he will prescribe Butrans today.
PPLPMDL0020000001	Fairlawn	OH	44333	4/18/2011	I asked Dr. Weidman why she had not written since the first patient she had tried on Butrans therapy. She had mentioned that she generally does not like to prescribe anything chronically but if the appropriate patient came in she would keep Butrans in mind.
PPLPMDL0020000001	Parma	OH	44134	4/18/2011	Re-introduced Dr George to Butrans. He said the patient he just saw came in wearing a Butrans from pain management! I asked what clinical feedback he got from her. He said she said she is having "zero pain" now & that she is very happy with her results. He said that patient had had multiple surgeries & as a result had a lot f pain. Reviewed appropriate patient type, dosing, CIII, & abuse/addiction potential. He asked about adverse events & if the patch could be manipulated for abuse. Reviewed FPI sections 6 & 11 & explained adhesive matrix, showing him a demo. Also reminded him that because Butrans is an opioid, there is abuse & addiction potential & he should be just as cautious in prescribing it as he is with other opioids. He asked how to write the prescription & I showed him the picture on the back of the sales aid. Reviewed managed care/savings cards. Dr George stopped Dr Scanlon in the hall to tell him about his patient who was having success with Butrans.
PPLPMDL0020000001	Mayfield Heights	OH	44124	4/18/2011	Window call....doc said patients are still liking Butrans and she has been focusing on those with private insurance. Thanked her for her support and gave her a Butrans formulary grid. She asked me to leave one with Denise as well. Provided same.
PPLPMDL0020000001	Fairlawn	OH	44333	4/18/2011	Reintroduced Butrans and asked what additional information I could provide to him that would make him feel confident enough to write his first Rx. He said it was just a matter of becoming confident enough to make the leap and prescribe his first Rx. He said that he likes the concept of Butrans and will continue to evaluate patients and their potential throughout the week.
PPLPMDL0020000001	Akron	OH	44333	4/18/2011	Asked Dr. Shah if he had tried Butrans for any opioid naive patients and he said he had. He asked about what he should do if a patient complains of Butrans not sticking and I explained that the patient could tape the edges with first aid tape. He told me he really likes Butrans therapy and patients are satisfied. I reminded him to focus on BWC patients and patients who have private insurance. He agreed.
PPLPMDL0020000001	Akron	OH	44313	4/18/2011	Introduced Butrans and FPI.
PPLPMDL0020000001	Parma Heights	OH	44129	4/18/2011	Spoke with Al & asked him if he would be willing to dispense fewer than 4 Butrans patches if he received a prescription written that day. He said he was not sure. I told him some area physicians are prescribing one single patch initially to ensure proper dosing for that patient before prescribing an entire month's supply. He agreed to do this. He asked if opening the box would compromise the integrity of the product at all. I told him that Purdue has no restrictions on opening a box to dispense fewer than 4 patches. I asked Al if he has dispense Butrans- He said he has once. I asked who wrote the prescription. He said he was not sure but that he would start keeping a list so that he could tell me at future visits. Also gave him online education for pharmacists flier. He said he has printed Butrans savings cards & still has some OxyContin cards.
PPLPMDL0020000001	Parma	OH	44129	4/18/2011	Quick call- Dr Gigliotti apologized & said he was running "way" behind & could not stop to talk today. I told him I would return another time to talk to him more about Butrans & went over the Butrans formulary grid with Jazz. She said she does reference formulary grids when Dr Gigliotti prescribes medications.
PPLPMDL0020000001	Akron	OH	44303	4/18/2011	Went over the FPI. Asked about movement and told Rod about the benefit of the co-pay cards.
PPLPMDL0020000001	Fairlawn	OH	44333	4/18/2011	Mentioned Butrans quickly through the window to Dr. Lefkowitz. Nothing new learned.
PPLPMDL0020000001	Mayfield Heights	OH	44124	4/18/2011	Spoke to Christy about the stocking and movement of Butrans. She did confirm stocking but she has not seen many scripts. She did fill a couple at the willoughby store. She asked about preferred application sites so I reveiued the proper application and sites. I also reveiued the indication and the positioning of Butrans.
PPLPMDL0020000001	Fairlawn	OH	44333	4/18/2011	I asked Dr. Oyakawa how often patients call in and ask to be titrated up or moved to higher doses on their Vicodin/ Percocet. He said it happens a couple times a week. I explained that patients who are calling in with those issues and are on lower doses of hydrocodone/percocet can be converted over to Butrans rather than moving them to a higher dose. He agreed to keep it in mind.
PPLPMDL0020000001	Parma	OH	44134	4/18/2011	Spoke with Allene & reviewed patient information booklet. I asked her how much patient counseling they do when a customer is filling a transdermal prescription for the first time. She said it depends on the person. She said usually the person will wait until they get home & then they call her on the phone to ask questions. I asked her if the booklet seemed like something she would be able to use for reference or to give out to patients & she said it did seem like a good tool to have on hand. Reviewed proper application, & discussed taping edges with first aid tape if it starts to loosen. Also gave her online education for pharmacists information.
PPLPMDL0020000001	Fairlawn	OH	44333	4/18/2011	Followed up with Dr. Lefton from a lunch I completed last week. I asked him if he had seen any potential Butrans patients or if he would see any patients this week that have been on SAO's for a long period of time. He said it was only Monday, suggesting he would see many patients throughout the week. I explained that patients on Low dose hydrocodone/percocet were ideal patients and reminded him of the benefit the co-pay cards have for patients with commercial insurance.
PPLPMDL0020000001	Akron	OH	44333	4/18/2011	I asked Becky if she had patients coming in this week that had a similar profile to the first patient she had initiated Butrans therapy to. She said that she would most likely see patients who were on low dose hydrocodone like the first Butrans patient was. I reminded her that this is the ideal type of patient to initiate therapy to and reminded her of the savings cards.
PPLPMDL0020000001	Bedford	OH	44146	4/18/2011	Dr Moufawad said he was running too far behind & was too busy to talk today. He said that "everything with Butrans is fine." I invited him to the upcoming dinner program in Cleveland. He said he was disappointed to see that an internist was the speaker because he wants to speak with "experts" in pain management. He checked his phone calendar & said he already has something that night so he will be unable to attend & then walked into a patient room.
PPLPMDL0020000001	Mayfield Hts	OH	44094	4/18/2011	Spoke with doc about the Butrans positioning and the 5 selling messages. He asked about the MOA. I read the MOA from the FPI. He said he read about Butrans and its seems to have a lot of warnings and risks. I showed him the AE's reported in the FPI. I explained that Butrans is still a CIII and has warnings similar to other opioids. He said he would not write this product because his patients mostly take meds PRN and he does not treat chronic pain. He would not use a patch. I asked him about Oxycontin and asked if he uses oxycontin as it is a LA. He said he prescribes oxycontin only in the hospitals. Gave him Butrans savings cards as the other doc in the office (podiatrist) expressed interest in it.
PPLPMDL0020000001	Parma	OH	44129	4/18/2011	Dr Ortega said that the two patients for whom he was thinking of switching to Butrans did not end up working out. He said the good thing about it was that thinking of Butrans & looking for patients to start on it has caused him to ask his patients more questions about how they are taking their current pain medication. He said he found out that one patient who he was going to put on Butrans was only taking his pain medications every few days. I agreed that this may not have been a Butrans patient. He said he continues to look for patients for whom it would be appropriate. I invited him to the Cleveland dinner program in May as he has been inquiring about Butrans programs. He confirmed with his calendar that he will be able to attend. He said he is excited to go to the program & to speak to other physicians about Butrans. Spoke with Cindy who said she is reminding Dr Ortega of Butrans & told him she thinks patients would be more compliant with their pain medication if it is transdermal.
PPLPMDL0020000001	Euclid	OH	44119	4/18/2011	I asked doc what concerns he has about prescribing Butrans for appropriate patients. He said he does not have any problems with it. He just has a lot of medicaid/medicare patients that cant get it. I asked him to try for patients with private insurance and give them a savings card.
PPLPMDL0020000001	Parma	OH	44129	4/18/2011	Spoke with Mary (MA) who said Dr Taylor was too busy to see me today. She said she does not think Dr Taylor has put anyone on "that patch". I asked her if she was the person to take phone calls from patients who are asking for an increase in their dose of medications like Vicoden, Percocet, or tramadol or calling too soon for a refill. Mary said she does take those calls. Reviewed managed care information, positioning, & savings cards. She said she would try to remind Dr Taylor.
PPLPMDL0020000001	Garfield Heights	OH	44125	4/19/2011	Dr Solomon said he remembers Andrea telling him about Butrans but he has not found the right patient so he has not written it yet. I asked him who, in his mind, was the ideal Butrans patient. He said an older patient with osteoarthritis. Reviewed the indication & told him that the patient he is thinking of sounds ideal clinically, but that managed care may be prohibitive for prescribing in patients with Medicare Part D. I asked him to think of commercially insured patients who are eligible for the savings cards. He agreed. Discussed positioning & appropriate patients. He said he was excited about Butrans when he first heard about it but then just forgot, so he is excited to be reminded & plans to use it, especially while in the Marymount office as he said he has more commercially insured patients there. Reviewed OxyContin for appropriate patients beyond Butrans 20mcg.
PPLPMDL0020000001	Solon	OH	44139	4/19/2011	Spoke with Julie, Dr Zaidi's nurse. She said that they have been scheduling more & more new patients & Oxy procedures, so they have changed their rep policy to only being able to see Dr Zaidi at scheduled lunches. She said she does not think that Dr Zaidi has prescribed Butrans yet. Reviewed indication & appropriate patient type/positioning. She agreed that he does have a lot of patients who fit the indication & profile. I mentioned the May dinner program in Cleveland & asked if I could speak to Dr Zaidi to invite him. She said he never goes to dinner programs but said I could leave information about it. I told her that because attendance is limited to only 20 physicians in all of Cleveland, I would not leave the information if he would not attend. Julie said she would write down the details & ask Dr Zaidi if he would go. She said she would call me if he is interested. She said they do not need any more OxyContin savings cards.
PPLPMDL0020000001	Independence	OH	44131	4/19/2011	I asked Dr Rob if he had seen any patients with a chronically painful condition so far this week & he said yes. I asked if he had considered Butrans & he said he had not thought of it. Reviewed appropriate patient type & asked if he would be interested in attending a dinner program. He said it is very difficult for him to make it to those. I told him I understood but that this program is limited to only 20 physicians in the entire Cleveland area & that it would be a good opportunity to learn more about Butrans from a physician & to speak with colleagues about it. He asked if he could have the invitation, so I gave him one. He handed it to Maria & asked her to see if he had anything scheduled that night. Maria said she would look later & I let her know I would follow up to see if he is available to attend.
PPLPMDL0020000001	Cleveland	OH	44103	4/19/2011	I talked to Hakeem,Pharmacist,about Butrans stocking and any scripts that have come in and Hakeem said he had 1 script of Butrans,doesn't remember doctor,but it was for a Medicaid patient and didnt get approved.we discussed Medicaid prior authorization requirements and commercial plan patients using Butrans patient savings cards.Hakeem said Dr Nickels patient called and was asking for the prices of all 3 dosage strengths for Butrans because Dr Nickels sat down with a group of patients and talked about Butrans with them and starting them on it,so Hakeem told this patient the prices of each one we discussed the fact that Butrans is probably not the best option for cash paying patients due to the cost of the dosage strengths,Hakeem agreed.we talked about OxyContin savings cards,as Hakeem wanted 2 packs,and i asked have the scripts increased/decreased? Hakeem said patients are taking more Opana Er,thats grown,since OxyContin reformulation,but he's still getting a lot of scripts.
PPLPMDL0020000001					

	Brooklyn	OH	44144	4/19/2011	Introduced Butrans to Dr Deeb delivering 5 core messages & discussing black box warning. Also reviewed appropriate patients/positioning & asked him to think of Butrans after an appropriate patient is no longer being well-controlled on NSAID's or COX-2's. I asked what his thoughts were on using a long-acting opioid for these patients in place of a short-acting around-the-clock oral opioid. He said he likes the idea of long-acting medications & that he would use it in these patients. Reviewed managed care & savings cards with him. Also discussed adverse events, supplemental analgesia & application. Presented initiation/titration guide & reviewed initiation of treatment in patients for whom Butrans is the first opioid & also those already taking opioids. Invited Dr Deeb to the program but he was unable to give me an answer. Positioned OxyContin as single-entity opioid for appropriate patients beyond Butrans 20mcg. Dr Deeb repeated Butrans dosing to me as I left, saying again he will Rx
PPLPMDL0020000001	Garfield Heights	OH	44125	4/19/2011	Introduced Butrans to Dalbir, the new physicians assistant in the pain management group at Marymount. He said he had read about Butrans but he did not remember a lot of the details & has not seen any patients on it so far. Reviewed 5 core messages & discussed CII & abuse/addiction potential. Discussed dosing, appropriate patients, & titration. Also reviewed managed care & savings cards. Spoke with Denise (Nurse, office manager) who said Dalbir just joined their practice & is now there 5 days per week. She said Dr Solomon will be leaving in July to move to Phoenix.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/19/2011	Quick call through the window. I asked Dr. Bick where she was specifically thinking about prescribing Butrans and she said she was considering it in place of hydrocodone. I reminded her that an opioid naive patient would need to start at 5 mcg.
PPLPMDL0020000001	Akron	OH	44310	4/19/2011	I spoke with Char and asked her what type of patients Dr. Cremer was initiating Butrans therapy to. She replied that they most patients were opioid experienced. Dr. Cremer came out and asked about coverage at which point I discussed the saving cards and coverage on BWC.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/19/2011	I asked the pharmacist if they had considering stocking Butrans yet? I explained that it is starting to move now that I had been out talking about it. They said they do not generally stock products until a Rx comes through. I went over the patient education guide.
PPLPMDL0020000001	Woodmere	OH	44122	4/19/2011	Spoke with pharmacist, Marc who said they have not ordered Butrans yet & have not seen a prescription yet. He said they probably won't order it until they start seeing prescriptions. Discussed e-voucher & OxyContin savings cards & reviewed patient information booklet for Butrans patient counsel.
PPLPMDL0020000001	Akron	OH	44310	4/19/2011	I asked Dr. Janolo if he thought there was a benefit to offering his patients Butrans therapy and he said he thought there was but still has not seen "the right patient" I asked what type of patient he thought he would prescribe Butrans for and he said a patient on low dose hydrocodone. I asked if he had any patients coming in this week and he said he would keep it in mind if so.
PPLPMDL0020000001	Garfield Heights	OH	44125	4/19/2011	Spoke with Heather (pharmacist) who said they do have one customer on Butrans. Reviewed savings program & let her know that she could go online to Butrans.com to print savings cards for patients. She made a note & said she would post it for the other pharmacists to see as well. Also gave her online pharmacist education flier.
PPLPMDL0020000001	Mayfield Hts	OH	44124	4/19/2011	Window call....Reviewed the Butrans patient positioning. Gave doc a formulary grid and a sell sheet on the savings cards. He agreed that he has anthem, medical mutual, etc. I asked him to prescribe for commercial patients and give them a savings card. He said ok and that he is trying to write Butrans.
PPLPMDL0020000001	C. Falls	OH	44223	4/19/2011	Larry ordered all 3 strengths of Butrans. Spoke with both Cindy and Larry who told me that Dr. Sable has written. I went over the patient application guides with them and explained application and disposal.
PPLPMDL0020000001	Cleveland	OH	44106	4/19/2011	I talked to Mana, Floater Pharmacist, he is at W. 25th/Clark normally, about Butrans stocking, Butrans 5mcg and 10mcg are here, Mana has only been here today and couldn't look up who is writing Butrans. Mana said the issue at Rite Aid is that they are getting scripts for Butrans but cant open the cartons to dispense anything less than 4 Butrans, because of a corporate Rite Aid Policy. Mana said he and the 2 other pharmacists at W. 25th/Clark shared this information with their district manager Tim and they haven't heard any updates. I told Mana that I gave this information to my manager and he shared it with our corporate office and we are still waiting for any updates too. I gave Mana Butrans patient information booklets, medication guides and initiation guide.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/19/2011	Had just seconds as he walked by. I thanked him for writing Butrans and asked what his thoughts were on the therapy so far. Nothing new learned.
PPLPMDL0020000001	Cleveland	OH	44106	4/19/2011	I talked to Ron Cowan, Pharmacy Manager Drug Services for In-Patient at hospital about Butrans being considered for hospital formulary. Ron said the patient population is mainly acute pain, except for ambulatory, so Butrans being indicated for chronic pain would work in the hospital. Ron said this is an office based medication. I asked Ron if he would value any certified medical education and he said yes just to bring in a catalog and he will look
PPLPMDL0020000001	Lyndhurst	OH	44124	4/19/2011	Doc said that she tried Butrans for 2 male patients at 5mcg and the 5mcg was worthless and did not work. She has titrated them to 10mcg and they seem to like that. I asked what they were on prior to Butrans. She said they were on vicodin ES - about six tabs/day. I explained that the recommendation is to taper those patients down then initiate at the 10mcg. I explained that 5mcg is more for opioid naive or low dose short acting patients. I reviewed the formulary grid for Butrans and oxycontin. Provided more savings cards.
PPLPMDL0020000001	Cleveland	OH	44106	4/19/2011	I talked to dr about patients he's started on Butrans and why he's chosen Butrans. dr talked about 1 patient who's had chronic pain for years, has tried every opioid and nothing has worked, dr tried Butrans and patients having success with Butrans. dr said he thinks Butrans is a good option for patients taking too much Percocet, exceeding tylenol limit. we discussed initiation and titration of Butrans, showed Butrans initiation guide, discussed managed care coverage and invited dr to Butrans speaker program in May 2011.
PPLPMDL0020000001	Cleveland	OH	44106	4/19/2011	I talked to dr about what he told me he liked about Butrans: once weekly dosing and transdermal delivery and Butrans being a CII and I asked dr what the disconnect was or what information did he need from me as he stated that he hasn't started anyone on Butrans? dr asked what was the insurance coverage because he has a lot of Medicaid? we discussed insurance coverage for medicaid and commercial plan patients that can use Butrans patient savings cards. dr asked if he could start patients on Butrans but also give tramadol? I told dr yes he can and showed Butrans initiation guide, discussed proper tapering of short-acting opioids and initiation of Butrans. dr said ok he would try Butrans in some patients and told me to talk to Lisa, Patient care coordinator, about prior authorization requirements for medicaid patients.
PPLPMDL0020000001	Cleveland	OH	44113	4/19/2011	I talked to Justin, Pharmacist, about Butrans stocking and they have all 3 dosage strengths of Butrans but have only seen 2 scripts from Dr. Bohl and Dr. Shen. we talked about Butrans patient savings cards for commercial plan patients and gave Butrans formulary grid. I asked Justin if patients had any questions about Butrans application when they got scripts filled? Justin said no. I asked Justin if Butrans patient information booklets would be an educational tool that he would value? Justin said yes and I left 3 booklets. Justin asked for more OxyContin savings cards, left 1 pack.
PPLPMDL0020000001	Independence	OH	44131	4/19/2011	Dr Jack stopped in the hallway & apologized again, saying that he had not thought of Butrans still. I asked him if he would be interested in seeing what Butrans looked like & he said he was. I showed him a demo patch & discussed adhesive matrix, dosing, & application once-a-week. He spent a few moments feeling the demo & said he liked how it felt & that seeing it may be what he needed to help him remember Butrans for patients. I told him he may even have a potential appropriate Butrans patient in an exam room or waiting room right now.
PPLPMDL0020000001	Akron	OH	44310	4/19/2011	When I walked in Dr. Schukay informed me that he had not yet initiated Butrans therapy. I asked him what and he said that he is still interested in learning more about it. I asked him what additional questions he had that I could answer to make him feel more confident and he said he wanted to read through the material on his own. I asked if he would read it and if I could follow up next Tuesday and he agreed.
PPLPMDL0020000001	Lyndhurst	OH	44124	4/19/2011	Karen asked about which dose to initiate Butrans at. I explained that the recommendation is to taper those patients down from higher doses of short acting opioids then initiate at the 10mcg. I explained that 5mcg is more for opioid naive or low dose short acting patients. I reviewed the formulary grid for Butrans and oxycontin. <font color=blue><b>CHUDAKOB's query on 04/28/2011</b></font>Did you ask her which group of patients she is most likely to prescribe Butrans for? When she responds, that should be the patient type you focus on. The goal is to keep it simple. <font color=green><b>SIMERTOC's response on 05/06/2011</b></font><b>I knew from previous conversations she would use for opioid experienced</b><font color=blue><b>CHUDAKOB added notes on 05/08/2011</b></font><b>Jst because she said it previous, does not mean it should not be reinforced.</b>
PPLPMDL0020000001	Independence	OH	44131	4/19/2011	Dr Sundaram was standing with a resident who was working with him when I came in. Dr Sundaram asked me to tell the resident about Butrans, so I reviewed with him indication, dosing, positioning, CII, & abuse/addiction potential. Dr Sundaram said that one "problem" is that patients don't want to "give up" their Percocet. I told him that is why we would ideally like him to think of Butrans before prescribing Percocet & added that Butrans is still an opioid & therefore is still potentially addictive/abusable. The resident asked Dr Sundaram if Butrans is like fentanyl. Dr Sundaram said that fentanyl is "stronger" than Butrans. I told the resident that we do not have comparative data, that fentanyl patients were excluded from our studies & that we would like physicians to keep the more "moderate" side of pain in mind for Butrans patients. Dr Sundaram said that he has thought of specific patients but has not seen them yet but added that he is now thinking of additional patients to start
PPLPMDL0020000001	Akron	OH	44319	4/19/2011	Introduced Butrans and FPI. Dr gave me ample time and asked a lot of buying questions including where to dose Butrans. I asked him about his chronic pain patients and most of them are already on SAO's. I went over the initiation guide and explained coverage.
PPLPMDL0020000001	Garfield Hts	OH	44125	4/20/2011	Spoke with MA Amy who said that due to their transition to electronic medical records this month, they are not seeing any pharmaceutical reps in the month of April. She said I could try back again some time in May.
PPLPMDL0020000001	Brooklyn	OH	44144	4/20/2011	Reminded her of Butrans dosing & appropriate patient type & asked her to give Dr Kline an initiation guide as a reminder- she agreed to do this.
PPLPMDL0020000001	Brooklyn	OH	44144	4/20/2011	Spoke with Matthew (pharmacist) & reviewed Butrans REMS packet with him. He said he has dispensed one Butrans prescription. I asked who wrote it & he said he had no idea. Reviewed indication & appropriate patient type as well as e-voucher/savings program. Also gave him pharmacist online education flier which he said he really appreciated.
PPLPMDL0020000001	Bedford	OH	44146	4/20/2011	Quick call- Showed Dr Miguel the Butrans formulary grid & hung it in his sample closet for reference. Also Butrans appropriate patient & OxyContin savings cards reminders.
PPLPMDL0020000001				4/20/2011	Dr Haddad said he still has not had any patient feedback regarding Butrans. I asked him if he is still considering it for appropriate patients & he said he is. I asked if he would use it after NSAID's or COX-2's are no longer controlling pain & he said he will as long as the patient has the right insurance. Reminder of commercial coverage. He said he is using it now in BWC patients. Invited him to May dinner program & let him know attendance was limited to 20 physicians. He said he thinks he can go. Told him I need a firm answer so he said to stop back to check with him as he must consult his calendar & his kids' schedules. He said he would be interested in discussing using Butrans with experts & other physicians. Also reminder for OxyContin as an option for appropriate patients beyond Butrans 20mcg.
PPLPMDL0020000001	Akron	OH	44320	4/20/2011	Dr. Bonyo just returned from Kenya and gave me a quick minute to re-introduce Butrans. Went over Butrans via the FPI and asked him if he saw a benefit in a LAO that provides 7 day analgesia. He said he would keep it in
PPLPMDL0020000001	Cleveland	OH	44113	4/20/2011	worked pain management dept-dale novak, pa and dr shen, see call notes
PPLPMDL0020000001	Parma	OH	44129	4/20/2011	Spoke with Debbie (MA) who said Dr Chagin could not talk today as he was already very behind. Discussed Butrans & managed care with her & reviewed savings cards/eligibility. She said she has not seen him prescribe it yet, but may have just forgotten. I asked her to give him an initiation guide as a reminder which she said she would do. Also worked with her to schedule first available lunch appointment.
PPLPMDL0020000001	Parma	OH	44134	4/20/2011	Spoke with Stephanie & asked if they had Butrans in stock. She said that they have not ordered it yet, but she has fielded several phone calls from patients & offices asking if they carry it. I asked her what it will take for them to order it, considering they are getting phone calls requesting it, which indicates that physicians are prescribing it & they may be losing out on business to pharmacies who have it on their shelves. She said they have to see an actual prescription before ordering it. Reviewed savings program & also gave her online education information for pharmacists.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	4/20/2011	I asked Dr. DiLauro is she feels confident initiating therapy for patients who are opioid naive, so instead of prescribing Vicodin would she prescribe Butrans? She said she would in chronic circumstances. She said that the patients she has on Butrans are responding well.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	4/20/2011	I helped Dr. DiLauro identify a patient to initiate Butrans therapy to. She said that she would try it on 2 patients and would focus on both opioid naive and opioid experienced patients. I reminded her of the saving cards benefit and told her I would come back for follow up next week.
PPLPMDL0020000001	Cleveland	OH	44113	4/20/2011	I asked dr what he re-called about Butrans? dr said not much and asked me to explain what Butrans was again, so we discussed 5 core Butrans messages, showed Butrans initiation guide and dr said he writes a lot of tramadol and would consider Butrans but I need to continue talking to him about it so he remembers. dr asked me to share more information with him at lunch next week, on Butrans and we can talk longer about it. dr asked about Ryzolt and wanted more savings cards and said he likes the once daily dosing option of Ryzolt and will continue to prescribe Ryzolt for patients.
PPLPMDL0020000001	Cleveland	OH	44113	4/20/2011	I talked to dr about considering Butrans as an option for those patients taking tramadol, instead of increasing tramadol dose or dosing interval, and showed dr Butrans initiation guide. dr said that was a good point and she hadn't thought about her tramadol patients, to convert them to Butrans, but will consider that option. dr said patients are doing well on Butrans that she's started and no insurance issues with BWC or commercial plans.

PPLPMDL0020000001	Cleveland	OH	44113	4/20/2011	i talked to Laura,NP,about any patients she has considered to start on Butrans and Laura said she doesnt have the time to talk to patients about a new medication,she expressed her frustration about having too many patients booked and said she is sticking with the tried and true and said she was just being honest with me.Laura said i should talk to Dr.Nickels as she doesnt know if he has any patients in mind but she thinks he is doing something with Butrans.
PPLPMDL0020000001	Cleveland	OH	44102	4/20/2011	i talked to dr about Butrans being an option for his patients that he feels are ready to be converted from Vicodin or Percocet, to Butrans,instead of increasing Vicodin.we discussed proper tapering of short-acting opioids and initiation of Butrans and i showed dr Butrans initiation guide.dr said he's trying to taper all of his patients down on their current dose of opiates.invited dr to dinner program in May 2011 and dr said he'll think about it as he normally doesnt attend these dinners.
PPLPMDL0020000001	Brooklyn	OH	44144	4/20/2011	Quick call- Dr Detwiler said he was way behind & had no time at all to talk to me & asked what i "had" for him today. I told him that I knew he was concerned with managed care & keeping out-of-pocket expenses for patients at a minimum so I wanted to share with him our Butrans formulary grid, showing access for commercial patients & that I had also brought a demo patch of Butrans to show him because I thought he might be interested to see it. He stopped & reviewed the formulary grid & I reminded him that commercially insured patients who use the savings cards in his closet will pay only \$15 for a co-pay. He said that sounded reasonable. I also pointed out the OxyContin savings cards. I showed him the Butrans demo patch & he felt it & said that it seemed "nice" & "thin" & that the adhesive seemed "effective" then he walked into his patient room.
PPLPMDL0020000001	Parma	OH	44134	4/20/2011	Dr Hernandez said he continues to gain experience with Butrans & is very happy with the results his patients are getting. He also said he is very interested to speak with other physicians who are prescribing Butrans to talk to them about how he is using it & how they are using it. I invited him to the May dinner program. He said he may not attend since his wife & son (who both work in his office) cannot attend. I explained the limited space/attendance & policy but also told him that this would be a great opportunity for him to speak with other physicians who are prescribing Butrans-He said he might consider. He said he would like to speak to someone using Butrans + Suboxone in patients. I told him this has not been studied & is not recommended. He requested to be a Butrans speaker again & I told him his name has been submitted. Discussed OxyContin for patients beyond Butrans 20mcg.Recommended Senokot-S for opioid-induced constipation.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/20/2011	Spoke with Brad, Barry and Pat. Reviewed the patient education guide and went over application and disposal. Reminded them that steady state was not reached for 72 hours. Brad checked and said that Dr. DiLauro was writing. He also said the pharmacy participates in relay health so patients can get the benefit of the savings cards without having a coupon.
PPLPMDL0020000001	Cleveland	OH	44113	4/20/2011	I asked Dale,PA,if he would ever consider Butrans as an option for those patients taking tramadol,but arent controlled and are requesting something else? Dale said he hadnt thought about that,but that made sense to try Butrans in those patients.we talked about Butrans being an option earlier in therapy, so right after tramadol isnt working for patients,instead of prescribing Vicodin.Dale said he would consider that and i showed Dale Butrans initiation guide and we discussed proper tapering and initiation of Butrans.we discussed BWC and commercial plan coverage for Butrans and Dale said they havent had any issues and all is working out with the insurance and patients getting Butrans.
PPLPMDL0020000001	Parma	OH	44134	4/20/2011	Spoke with another floater pharmacist at this location. She said she did not think that they could "break" a carton of any product to dispense fewer than the whole container. I let her know that it is not a Purdue policy & that some physicians are prescribing one patch initially for a patient to determine correct starting dose & then will prescribe for a month once the proper dose is determined. She said they cannot dispense it this way to her knowledge. Reminder of e-voucher & OxyContin savings cards & also gave her online pharmacist education information & asked her to post for the other pharmacists as well.
PPLPMDL0020000001	Shaker Heights	OH	44122	4/21/2011	Quick call- Reviewed Butrans REMS packet with Dr Agarwal & also showed him a demo patch. He said he had forgotten about Butrans. Positioned Butrans for appropriate patients fitting the indication for whom he may typically prescribe tramadol around-the-clock.
PPLPMDL0020000001	Cleveland	OH	44130	4/21/2011	Spoke with Kim & Jen (MA's) & discussed Butrans indication, dosing, & appropriate patient type. They said Dr Lash only meets with reps on Thursday 1PM appointments & is booked until December. I asked if I could do a breakfast or lunch sooner since I have only spoken with him about Butrans one time, so they took my information back to Dr Lash to request this. Worked with them to schedule breakfast so I could access Dr Lash as soon as possible. They said Butrans sounded like something he would be interested given his patient population & types of pain medications he prescribes now.
PPLPMDL0020000001	Akron	OH	44333	4/21/2011	Completely re-introduced Butrans. She was sold on the concept and committed to writing for all appropriate patients who were asking to be titrated on their current SAO's. Reminded her that when patients were past the point of Butrans that OxyContin is an option for her patients.
PPLPMDL0020000001	Cleveland	OH	44195	4/21/2011	I talked to Janet,Pharmacy Manager,briefly about Butrans stocking and she said that they have Butrans 10mcg and 20mcg but arent seeing any scripts. I talked to Janet about the physicians i am working with on Butrans and showed her the Butrans initiation guide to discuss where Butrans is appropriate and my focus being more moderate pain so that could be why she's not seeing any scripts yet,being that many of the cancer pain patients are in severe pain and already taking other long-acting opioids.Janet said she appreciated me sharing the information and asked me to follow-up next month
PPLPMDL0020000001	Cleveland	OH	44195	4/21/2011	worked pain management, chronic pain dept's and pharmacies
PPLPMDL0020000001	Cleveland	OH	44130	4/21/2011	Stopped Dr Diab from walking past me in the hallway by asking him how he felt about attending a Butrans dinner discussion next month. He asked me to put the invitation on his desk & that he would "think about it".
PPLPMDL0020000001	Cleveland	OH	44130	4/21/2011	Reminded him of \$15 co-pay for commercially insured patients using the savings cards i had given him.Also spoke with Dina (MA) to discuss commercial insurance coverage & posted formulary grid near savings cards.
PPLPMDL0020000001	Cleveland	OH	44130	4/21/2011	Dr Fedorko said he has "a few" patients that he has prescribed Butrans for. I asked him what types of patients he has prescribed it for. He said one of them is in the hospital for leukemia now & is not getting his Butrans. He said he thought he had a few more but could not think of them. I asked Dr Fedorko his thoughts on prescribing Butrans once weekly for patients who fit the indication taking Vicodin around-the-clock. He said he likes that idea & asked about insurance coverage/cost. Reviewed formulary grid & stressed commercially insured patients & the savings cards for eligible patients so they would have a \$15 co-pay. He said that was a good price & he would look for more patients for Butrans. Also recommended Senokot-S for opioid-induced constipation.
PPLPMDL0020000001	Cleveland	OH	44113	4/21/2011	i asked dr if she would consider Butrans right after her tramadol patients complained to her,after that first dose,that it wasnt working? dr said probably not,she would increase dosage strength,then go to vicodin and start with 5mg,i asked why? dr said thats how she was trained and has been doing this for years.i asked dr if she saw benefits in Butrans for her patients? dr said yes,some patients dont like taking pills so a patch would be a good option and there are some patients who tell her they want to try something different,after tramadol isnt working anymore,so i asked dr if she could consider Butrans for a couple of those patients? dr said yes,she will do that,i showed Butrans initiation guide for the discussion and we talked about Tricare,BWC and commercial plan coverage for Butrans.
PPLPMDL0020000001	Cleveland	OH	44113	4/21/2011	i talked to dr about her patients taking tramadol that are telling her their pain isnt controlled and asked if he would consider a long-acting opioid right after that first dose of tramadol doesnt work? dr said usually not but she likes once weekly dosing option of Butrans and the fact that Butrans is transdermal and a CII,dr said the fact Butrans is a CII makes it easier on her staff so they can call in refills.i asked dr to consider patients taking less than 300mg of tramadol to start on Butrans 5mcg,showed dr Butrans initiation guide for the discussion,discussed Butrans application dvd/patient information booklet.we discussed formulary coverage for commercial plans and
PPLPMDL0020000001	Barberton	OH	44203	4/21/2011	I asked Dr. Patel if his patients on Butrans were satisfied with their current therapy and he said they were. I asked him if he had additional patients coming in this week that had similar profiles and he said maybe. I reminded him were to start patients according to the initiation guide since he started all his patients on 5 mcgs.
PPLPMDL0020000001	Akron	OH	44333	4/21/2011	Re-introduced Butrans and the FPI. I went over patient types and he told me that almost all his patients are already on opioids so I explained the initiation guide so he would understand where it is best appropriate to start
PPLPMDL0020000001	Cleveland	OH	44195	4/21/2011	i talked to Cynthia,Pharmacist,about Butrans stocking and if she's seen any scripts.Cynthia said she didnt have any Butrans in stock here and i needed to talk to David,Pharmacy Manager,about Butrans and show him Butrans initiation guide but he wasnt in today.Cynthia hasnt seen any scripts for Butrans but said she thinks Butrans being transdermal and once weekly dosing is a great option for those patients who arent controlled on their short-acting opioids.we talked about insurance coverage for Butrans,commercially insured patients using Butrans patient savings cards and BWC coverage for Butrans.we talked about OxyContin formulary coverage on Medicaid,Medicare and commercial plans and OxyContin 7 tablets available for flexibility in titration.
PPLPMDL0020000001	Cleveland	OH	44195	4/21/2011	i talked to dr about the patients he's starting on Butrans and asked dr why he's choosing Butrans? dr said the couple of patients he's started are taking Vicodin or Percocet but not controlled as they are calling in to office earlier every month and telling him their short-acting opioids arent lasting long enough so dr said he thought Butrans would be a good option to see if Butrans could work for them.dr said he's not heard any complaints and patients seem to be doing well so he's happy.we talked about Butrans patient information booklet and application dvd and dr said to leave a few more with him and we discussed commercially insured patients using the Butrans patient savings cards.we talked about OxyContin being an option,after Butrans 20mcg,as there are 7 tablet strengths to allow for flexibility in titration and we talked about the formulary coverage of OxyContin for Medicaid,medicare and commercial plans.i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44195	4/21/2011	i talked to dr about why he hasnt started any patients on Butrans yet and dr said he just hasnt thought about Butrans for his patients.i asked dr what benefits he saw in Butrans for his patients? dr said he likes that Butrans is transdermal and once weekly dosing,but isnt sure patients will want to stop taking their short-acting opioids.we talked about dr considering Butrans for those patients taking percocet that are calling in sooner for refills so proper a long-acting opioid would be appropriate or they are telling him in their appointments that their percocet isnt lasting long enough and asking for something different.we looked at Butrans initiation guide,discussed proper tapering and initiation of Butrans and dr said he'll think of a few patients to try Butrans in and let me know.we talked about OxyContin being an option for those patients,that are taking 80mg or more of oral morphine equivalent,7 tablet strengths for flexibility in titration and formulary coverage discussion
PPLPMDL0020000001	Cleveland	OH	44195	4/21/2011	i talked to Anne,NP,about considering Butrans right after patients initial dose of tramadol isnt working.Anne said she hadnt thought of Butrans there as she was thinking of patients taking 4 tabs of Vicodin or percocet,so more on the higher end of dosing.we talked about her tramadol patients taking less than 300mg a day and considering Butrans there for those patients,looking at Butrans initiation guide. Anne said she'll think about some patients and see if patients would be willing to try Butrans. I recommended Senokot-S
PPLPMDL0020000001	Independence	OH	44131	4/21/2011	Roman said he did actually try Butrans 5mcg on a patient & the patient said he "didn't like it because it didn't work". Roman said this is why he wants to talk to other practitioners & experts about how to use Butrans properly. He said that the information that I, as a representative, can give him is limited due to needing to stay on label. I agreed that the information I have is on-label & that I still may be able to answer questions he may have if he specifies what he needs to know. I gave him the dinner invitation for the May program & explained the format, including that this would be an on-label discussion amongst practitioners. He asked if the others in attendance will be people who have experience prescribing Butrans & I told him that many of them will be. He asked me to register him for the program & said he would definitely be there & that once he is comfortable with Butrans, he may be prescribing it for a lot of patients, just as he does with OxyContin.
PPLPMDL0020000001	Westlake	OH	44145	4/21/2011	The Dr asked me about who the speaker was for the upcoming peer last time we spoke and I gave him the speaker bio info. He still is not sure if he will be able to come to the dinner but will let me know. He still has not heard anything back from P&T for Butrans and he will keep me posted. I presented the managed care info for Butrans and he said that Tina would find it helpful. He asked for more Butrans savigns cards and said that patients have really been liking it.
PPLPMDL0020000001	Cleveland	OH	44195	4/21/2011	dr and i talked about Butrans as an option for those patients where dr has decided he's not going to give them more pills,if patients are telling him their short-acting opioids arent lasting long enough.dr said he really is trying to get his patients off opioids but could see Butrans as an option for a couple patients.dr said he'll take Butrans initiation guide and will think about it and said he appreciated the information.i told dr to think of commercial plan patients for Butrans so they can use Butrans patient savings cards.
PPLPMDL0020000001	Independence	OH	44131	4/21/2011	Spoke with Diana (MA) who said Dr Keppler was unavailable to speak with me as he was busy seeing patients. Discussed Butrans indication, dosing, & positioning. She said she was not sure if he had started anyone on it yet or not but she remembers me talking to him at lunch. She said she would give him my information & remind him about Butrans as an option & said she would put me on a lunch cancellation list to try to get me in to see Dr Keppler before my next lunch.
PPLPMDL0020000001					

PPLPMDL0020000001	Cleveland	OH	44195	4/21/2011	i talked to Kathy,PA,about Butrans being an option for those patients taking tramadol around the clock,that perhaps are telling her that their short-acting tramadol isnt lasting long enough or they are calling in sooner every month for refills.Kathy said that was a good idea and she hasnt thought about those patients,she's only been thinking of patients taking Vicodin or Percocet and patients taking 4 tabs a day of short-acting medication.we talked about patients taking less than 300mg of tramadol and the starting dose of Butrans being 5mcg.i told Kathy if she has patients taking 300-400mg of tramadol and wants to start them on Butrans,she can but she has to be sure to taper the dose to 300mg tramadol and then she can initiate Butrans 10mcg.Kathy said she'll think of a few patients to talk to about Butrans. i recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44195	4/21/2011	i talked to dr about her patients taking tramadol that arent controlled and calling in sooner each month for refills or telling her that their short-acting tramadol isnt lasting long enough and considering Butrans as an option,showed dr Butrans initiation guide and dr said that makes sense and she would consider that option. we talked about Butrans patient savings cards for commercial insurance and BWC patients. we talked about OxyContin being an option for patients when they are at 80mg or more of oral morphine equivalent,with 7 tablet strengths and we discussed managed care coverage for OxyContin.dr said she rarely prescribes OxyContin but appreciated information.i recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44130	4/21/2011	Spoke with Dawn (pharmacist) & asked if she had Butrans in stock. She said that she has not ordered it yet, but that she has received phone calls inquiring if they have it. I asked her if she would order based on the interest in Butrans given the phone calls requesting it. She said she would wait until she receives an actual prescription & that she can get it next day. I told her that next day is standard in pharmacies & that usually patients will not wait, but rather will just go to a pharmacy who has it in stock. She said she will wait but does think Butrans will "catch on" as she believes it is a good concept & would be ideal for some patients. Reviewed patient information booklet & offered OxyContin savings cards but she said she did not need any. Also gave her online pharmacist education flier which she said she appreciated.
PPLPMDL0020000001	Chagrin Falls	OH	44023	4/22/2011	Spoke briefly with Ben & reviewed Butrans dosing & appropriate patient type. Discussed titration every 3 days up to a maximum of 20mcg/hr system if necessary. Also discussed the ability to visit Butrans.com to print savings cards & offered OxyContin savings cards but he said they have enough.
PPLPMDL0020000001	Beachwood	OH	44122	4/22/2011	Dr Warren said he has not prescribed Butrans yet. Reviewed indication, dosing, & appropriate patient type with him. He said he has never been a prescriber of Duragesic. Presented initiation/titration guide to help show positioning & reminded him that patients on fentanyl were excluded from our studies. Showed him pg 6 of guide & discussed appropriate patient type. I asked him if this helped make better sense of where he would position it & he said yes. I pointed to the table on pg 6 & asked him which range more of his patients fell in (<30mg morphine, 30-80mg, or >80mg) & he said he likes to keep them on the lowest end possible. He said he thought Butrans sounded like a good option to help get patients off around-the-clock oral opioids-reminded him that Butrans is an opioid & carries abuse/addiction potential. He said he would try some patients on it who ask for refills of Vicodin too soon. Reviewed managed care & savings cards with him & Donnie (nurse) & reviewed OxyContin savings
PPLPMDL0020000001	Parma	OH	44129	4/22/2011	Quick call- Showed Jen Butrans demo in hopes to get her to stop before going into a room. She said she was trying to hurry as she is getting ready to leave for vacation & didn't have time to talk. Quick reminder for Ryzolt Value Cards. Spent time with Dawn & Karen, reviewing Butrans appropriate patient type & also reviewed Ryzolt Value Cards. Dawn said Jen has been prescribing Ryzolt more frequently but because they see mostly Worker's Comp patients, they do not need more cards yet. I asked Dawn if she had had any additional Ryzolt managed care pushback since our last discussion. She said she has not had any more troubles with it & that the ones that had been denied were probably from BWC Self-pay.
PPLPMDL0020000001	Akron	OH	44333	4/22/2011	I reintroduced Butrans to Dr. Ahmad and had a chance to cover most of the FPI with him. I asked him which type of patients he would Butrans in and he said most likely an opioid naive patient, so I went over the 5 mcg dosing. I also mentioned that if had patients who were coming from PCP and had been on SAO's for a long period of time Butrans may be an appropriate option for those patients. He said he had many of these patients which prompted me to cover dosing in these patients as well. He committed to starting 2 patients in the following week.
PPLPMDL0020000001	cleveland	OH	44135	4/22/2011	Quick call. Dr was on his way downstairs for procedures. He said that he would like to write Butrans more often, but so many of his patients are Medicaid and med D. I reviewed the formulary grid and asked him to concentrate on commercial insurance for Butrans and give a savings card. I reminded him that OxyContin has coverage for Medicare and Medicaid patients.
PPLPMDL0020000001	Beachwood	OH	44122	4/22/2011	Spoke with Alan who said he has seen a few more Butrans prescriptions since my last visit. He said he has still not heard any patient feedback, positive nor negative, which he says is a good sign because people typically call to complain if they do not like something. Discussed patient counsel & gave him patient information booklet. Also reviewed OxyContin savings cards & gave him online pharmacist education flier.
PPLPMDL0020000001	Cleveland	OH	44135	4/22/2011	Quick call, I asked Dr where Butrans was fitting into his practice. He said he doesn't know yet, but will give it a try. I reviewed the managed care info for Butrans with Randy, his nurse.
PPLPMDL0020000001	Parma	OH	44129	4/22/2011	Spoke with Laurie (pharmacist) who said they have not yet dispensed any Butrans. Discussed opening a carton if they get a prescription for fewer than 4 patches. I let her know that some physicians are doing this & that Jackie (pharmacy manager) agreed to open boxes if they see a script like this. Also reviewed patient counsel information & booklet & discussed application/rotation. Reminder for OxyContin savings cards for eligible customers & gave Laurie online pharmacist education flier.
PPLPMDL0020000001	Beachwood	OH	44122	4/22/2011	Quick call- Dr Tabbaa said he continues to try patients on Butrans. He mentioned that he has had to titrate a patient from 5mcg to 10mcg. Reviewed titration every 3 days to a maximum of 20mcg/hr. Also reminded him to keep commercially insured patients in mind for the least managed care resistance & so that eligible patients could take advantage of savings cards & pay \$15 co-pay. Reminder for OxyContin for patients beyond Butrans 20mcg/hr. Also invited him to May program- Jim said to check back to see if Dr Tabbaa will be able to go. Spent time with Jim reviewing managed care, savings cards, & dosing. Jim said they just prescribed Butrans for a
PPLPMDL0020000001	Cleveland	OH	44125	4/22/2011	Spoke with Christopher (pharmacist) & asked his thoughts on opening a box of Butrans to dispense fewer than 4 patches in the event they get a prescription written that way. He said he was not certain how this would be handled, but did not think it would be a problem. He said they always try to accommodate whatever the physician thinks is best for the patient. I explained that some physicians are prescribing one or two patches initially for a patient to ensure correct dosing. Christopher said this makes sense. Offered more OxyContin savings cards but he said they have enough for now. Also gave him online pharmacist education flier.
PPLPMDL0020000001	Garfield Hts	OH	44125	4/22/2011	Quick call- Butrans positioning message with Dr Sadowski in the hallway. Dina said he has been rushing around to get done with his office obligations as quickly as possible today. She said she will do her best to continue to remind Dr Sadowski about Butrans when she sees an opportunity for it. She said that the lunch I have with Dr Sadowski next week will give me more time to speak with him about how Butrans will fit into his practice.
PPLPMDL0020000001	Akron	OH	44333	4/25/2011	Dr. Griffiths said that she prescribed Butrans for 2 patients but said she was not sure if she was prescribing to the right patients. She told me both patients were moderate and on low dose hydrocodone and doing well. I explained that was the appropriate patients to start on Butrans therapy.
PPLPMDL0020000001	Lakewood	OH	44107	4/25/2011	I asked if he would prescribe Butrans for the next appropriate patient who 3-4 5mg vicodin is not controlling their pain. He said he would, but just forgot. We reviewed the dosing and initiation guide. I reminded him about OxyContin as an option when Butrans may not provide adequate analgesia. He said many of his patients fall into this category.
PPLPMDL0020000001	Parma	OH	44129	4/25/2011	Dr Roheny said he has not received any feedback from the patient who he prescribed Butrans for. I handed him a program invitation & asked if he would like to attend, but he said probably not. Also showed him a demo patch. He spent some time feeling the system & checking the adhesive. He said he liked the way it felt & that it seemed like it would stick for the full 7 days. Reviewed appropriate patient type & managed care/savings cards. Dr Roheny agreed that \$15 co-pay for many patients was reasonable. He asked Kathy to call the patient who he had put on Butrans to solicit her feedback. I let him know I would return promptly to follow-up on the patient's response. Also reminded Dr Roheny of seven available OxyContin tablet strengths.
PPLPMDL0020000001	Parma	OH	44129	4/25/2011	Showed Dr Gigliotti a Butrans demo patch & asked him what his thoughts were. He examined the system said that the adhesive was effective. He asked if it would really stick for a week & asked if it could get wet. I told him patients could practice normal bathing/showering & swimming but also reminded him of heat warning. I asked him if this made sense & he said yes. Discussed Butrans appropriate patient type & I positioned Butrans for patients taking 3 Vicoden per day around-the-clock for a chronic condition who were asking for refills too soon or asking for an increased dose. He said he does want to try Butrans on patients & asked about insurance coverage. Reviewed formulary grid, asking him to keep commercially insured patients who could utilize the savings cards in mind. Also discussed OxyContin as an option for patients who are beyond Butrans 20mcg. Dr Gigliotti told me again that he does want to try Butrans & is excited about it.
PPLPMDL0020000001	Bedford	OH	44146	4/25/2011	Spoke with Sandy (MA) who said that Dr Moufawad is on vacation this whole week. Discussed Butrans appropriate patient type, dosing, & titration. She said she knows Dr Moufawad has some patients on Butrans but was unsure of specifics. Reviewed savings cards for eligible patients.
PPLPMDL0020000001	Cleveland	OH	44102	4/25/2011	i talked to Vince,Pharmacist and Brian,Pharmacy Technician,about Butrans stocking and Vince said until he see's 1 script for Butrans,he's not ordering the medication.we discussed importance of Butrans stocking but Vince said thats his policy.i showed Vince and Brian the Butrans initiation guide and patient information booklet and asked if they thought some of their patients would be appropriate to start on Butrans? Brian and Vince both said yes,they have patients who dont like taking pills around the clock for their chronic pain,so the fact that Butrans is a patch is a benefit for those patients and the patients who complain to them about their short-acting opioids not lasting long enough,Butrans could be an option for them too.i asked Vince if he would ever recommend Butrans,for appropriate patients,to doctors? Vince said depends on his relationship with the doctors,but he might do it as he see's Butrans having a few benefits over the short-acting opioids.discussed OxyContin,insurance
PPLPMDL0020000001	BEDFORD	OH	44146	4/25/2011	Spoke with Marcus (pharmacist) & asked him if he would be willing to open a carton of Butrans to dispense fewer than 4 patches if he were to receive a prescription written that way. He said it would not be a problem because it is CIII. He said they can't do this for CII's but there would not be an issue doing it for Butrans. Reviewed dosing, appropriate patient type, & e-voucher. Also reviewed OxyContin savings cards/eligibility & gave him online pharmacist education flier.
PPLPMDL0020000001	Cleveland	OH	44195	4/25/2011	i talked to dr briefly about considering his patients who take tramadol around the clock for their chronic pain,that are telling him the short-acting opioid is not controlling their pain,not lasting long enough,so perhaps Butrans being a long-acting opioid could be an option for these patients,if appropriate patients? dr said that is a good point and i know how he feels about having patients on opioids overall, but he will consider Butrans as an option for those patients if he doesnt want to start them on Vicodin. i showed dr Butrans initiation guide and patient information booklet and dr took 1 booklet saying if he started 1 patient,he would give the booklet as its a good educational piece. i recommended Senokot-5
PPLPMDL0020000001	Independence	OH	44131	4/25/2011	Spoke with Kelly (MA) who said that she would give my card to Kathy to request a lunch & would give Dr Sustersic the Butrans FPI I left for him. Reviewed Butrans indication, dosing, appropriate patient type/positioning, CIII & savings cards with her & asked if she thought that Butrans sounded like something Dr Sustersic might be interested in. She said she was not sure but that they do see a lot of patients who fit the indication. She said Kathy would contact me to set up an appointment to speak with the doctors.
PPLPMDL0020000001	Parma	OH	44129	4/25/2011	Spoke with Kelly (MA) who said that she would give my card to Kathy to request a lunch & would give Dr Sustersic the Butrans FPI I left for him. Reviewed Butrans indication, dosing, appropriate patient type/positioning, CIII & savings cards with her & asked if she thought that Butrans sounded like something Dr Sustersic might be interested in. She said she was not sure but that they do see a lot of patients who fit the indication. She said Kathy would contact me to set up an appointment to speak with the doctors.
PPLPMDL0020000001	Cleveland	OH	44104	4/25/2011	i talked to dr about considering Butrans as an option for his patients who are taking tramadol around the clock for their chronic pain,but telling him their dosing regimen,dosage strength, isnt controlling their pain and they are asking him for something else.dr said he hears that every day from all these pain patients regardless of which opioid they are taking.i asked if he would consider Butrans, right after that first dosage strength,50mg,of tramadol,wasnt controlling pain,instead of going to vicodin? dr said he might do that but it comes down to insurance and asked about BWC and medicaid patients getting Butrans? we discussed both plans and i asked dr to focus on commercial plan patients too because they can use Butrans patient savings cards,dr said he will consider that as an option for some patients.i recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44113	4/25/2011	worked pain management dept-see call note on dr daoud
PPLPMDL0020000001	Cleveland	OH	44195	4/25/2011	worked anesthesia/pain management department-see call notes; worked chronic pain and rehabilitation-left dinner program invitations for 5/24th peer group program for Dr.Covington and Dr.Mathews as i couldn't see either physician and i also left Butrans initiation guides and 1 demo patch/disposal unit for Dr.Covington as his medical secretary called asking for one saying Dr.Covington has started a couple of patients on Butrans and wanted the demo patch to show patients.worked rheumatology dept-left Butrans fpi,initiation guide and patient information booklet for Dr.Zachary,Patty Paczos,PA,Dr.Calabrese,Dr.Long,Dr.Chatterjee and Betsy Kirschner-NP as i couldnt see any of these physicians.worked neurology dept-left Butrans initiation guide,FPI and patient information booklet for Dr.Kriegler,Dr.Mays,Dr.Spears and Dr.Stillman-medical secretaries stated that dr has to contact me if he/she wants to set-up appointment to discuss our products,so had to leave information with them
PPLPMDL0020000001					



PPLPMDL0020000001	Bedford	OH	44146	4/25/2011	Quentaline (pharmacist) said that they do not have Butrans. She said that Oleg is in charge of ordering & he can be reached on Tuesdays. Reviewed dosing, indication, & e-voucher with her. She said she would leave information for Oleg & give him a reminder. Also discussed OxyContin savings cards for eligible patients.
PPLPMDL0020000001	Barberton	OH	44203	4/25/2011	Introduced Butrans and FPI. Dr. Minich agreed she had potential for Butrans but wanted to learn more about it. She told me that she has many patients on low doses of Vicodin.
PPLPMDL0020000001	Westlake	OH	44145	4/25/2011	Dr has been out of the office for several weeks. I spoke with Vice about the managed care for Butrans, she said she has been doing PA's and having success with most of them. We discussed commercial patients and using the savings cards. She said the Dr has about 7 patients on Butrans so far and he is liking it. She said that he does not use many patches but when he does he has been prescribing Butrans.
PPLPMDL0020000001	Akron	OH	44333	4/25/2011	I thanked Dr. Shah for his business and asked what he feels the most significant benefit of Butrans is so I can relay information to PCP's in the area. He said that he really liked that it was a LAO, a schedule 3 and 7 day delivery.
PPLPMDL0020000001	Barberton	OH	44203	4/25/2011	I asked Dr. Patel about his success with Butrans. He told me that the patients he had started were already on opioids and he started them on 5 mcgs. I explained that if depending on where the patient was previously 10 may be appropriate. I explained that titration can be done in as soon as 3 days if patients are not getting adequate pain relief.
PPLPMDL0020000001	Westlake	OH	44145	4/25/2011	Dr told me that Butrans is not loaded into the premier e-prescribing database. He said that it is more difficult to prescribe when it is not in there. I spoke with Laura and she said that she had made several calls to get it updated and she will check again to see if it has happened. She did check and it is now showing up so all Premier Drs should not be able to prescribe Butrans easily. I asked Dr what types of patients he is thinking of for Butrans and he said patients who are on higher doses of vicodin or percocet. He said he does not have a problem tapering these patients down and wants to try to get them off of so many short acting. We discussed that some patients may be better suited for OxyContin as a long acting option since 20mcg Butrans may not provide adequate analgesia for patients taking more than 80mg of oral morphine equivalent per the FPI. He agreed to continue to try Butrans when managed care allows. Reminder about Colace and Senokot laxative lines.
PPLPMDL0020000001	Cleveland	OH	44195	4/25/2011	I talked to Anne, NP, for Dr. Stanton-Hicks patients, about considering Butrans as an option for those patients taking short-acting tramadol around the clock for their chronic pain, but telling her that their medication isnt lasting long enough or just asking for something different. Anne said she follows what Dr. Stanton-Hicks prescribes and treats his patients so they are always discussing their patients and she hasnt seen him prescribe Butrans, so I asked Anne if she could share the Butrans fpi, initiation guide and patient information booklet with Dr. Stanton-Hicks again, as I havent seen him in awhile, Anne said she would do that and I asked her to talk to him about considering patients taking tramadol, that arent controlled, if appropriate, to consider starting them on Butrans, Anne said she will keep that in mind. Anne said she needed more OxyContin savings cards for their patients, so we talked about formulary coverage for OxyContin and 7 tablet strengths of OxyContin.
PPLPMDL0020000001	Cleveland	OH	44109	4/25/2011	I talked to Naser, Pharmacist, about Butrans stocking and who is writing Butrans in the area, I showed Naser Butrans initiation guide and we discussed proper tapering of short-acting opioids, initiation of appropriate Butrans dosage strength, 5mcg or 10mcg and the Butrans application dvd/booklet. I asked Naser if he would recommend Butrans to doctors that have patients on short-acting opioids but are complaining to the pharmacy about their medication not lasting long enough so perhaps a long-acting opioid could be an option, Naser said he could do that with a few physicians and would remember that. I talked to Naser about OxyContin being an option after Butrans 20mcg, showed Butrans conversion guide and formulary grid and discussed managed care coverage for OxyContin. I recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	4/25/2011	I talked to Dr about considering Butrans for his tramadol patients that are asking for something else, instead of converting them to vicodin, showed Butrans initiation guide, discussed proper tapering of short-acting tramadol if above 300mg tramadol a day and initiation of Butrans 5mcg or 10mcg, we discussed managed care coverage and Butrans patient information booklet
PPLPMDL0020000001	Lakewood	OH	44107	4/25/2011	I asked Dr how many patients does he think could benefit from once a week Butrans. He said he probably has a lot but he just forgets, he has so much going on and is in such a rush that he will do his best to remember, he said he does want to start some patients and gain some experience. I asked him to try just one patient this week instead of increasing the amount of vicodin. He agreed. I reviewed that OxyContin is still a Q12hr option.
PPLPMDL0020000001	Cleveland	OH	44195	4/25/2011	I talked to Kathy about Butrans being an appropriate option for patients taking tramadol that are telling her the medication's not lasting long enough, so perhaps Butrans being a long-acting opioid could be an option, Kathy agreed saying she hadnt really been thinking of her tramadol patients, so that made sense and she would think about who is asking for something different that she could talk to about Butrans, we discussed tapering and initiation of Butrans, showed Kathy Butrans initiation guide for this discussion, discussed managed care coverage and then we discussed OxyContin being an appropriate option after Butrans 20mcg or when patients are taking more than 80mg oral morphine equivalent a day, we discussed managed care coverage, savings cards and conversion guide for OxyContin. I asked Kathy to recommend Butrans and then OxyContin when appropriate to dr. minzter and dr. mekhail as she see's both of their patients, she agreed to do that and I recommended Senokot-S
PPLPMDL0020000001	Lakewood	OH	44107	4/25/2011	I asked Dr what types of patients does he feel could benefit from Butrans, he said that every single patient is different and it will just depend on what patients are already on and what they have tried in the past for him to decide if Butrans will be appropriate. I asked him to prescribe Butrans when 3-4 5mg vicodin are no longer controlling his patients pain and he agreed. Reminder about OxyContin as a Q12hr option.
PPLPMDL0020000001	Parma	OH	44129	4/25/2011	Spoke with Cindy (MA) who said that Dr Ortega was out of the office today & will return tomorrow. Discussed Butrans patient type & dosing with her as well as reviewing managed care coverage & savings cards/eligibility. She said she has been trying to remind Dr Ortega of Butrans & that she was just telling him that she thinks the transdermal dosing is ideal because it can help with compliance with medication. Reviewed CIII & abuse/addiction potential.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/25/2011	Asked Dr. Pitt if saw a benefit to the 7 day delivery system that Butrans offers patients. He did not give me a straight answer and went on to say his patients are past the point of Butrans. I asked him about NSAID failures and he said those patients are already on some type of opioid past the point on Butrans as well. I thanked him for his OxyContin business.
PPLPMDL0020000001	Parma	OH	44129	4/25/2011	Dr Taylor asked for a "refresher" on the details of Butrans because she has forgotten. Reviewed indication, dosing, & positioning. I asked what her thoughts were on using something long acting in place of an around-the-clock short-acting regimen. She said she does not have any problem with doing that, but she is concerned that the adhesive will not last the full week or that the analgesia will not continue the entire 7 days. I told her that while I had not yet heard of the adhesive not working, if it started to loosen, the edges can be taped with first aid tape. Also reviewed FPI 12.3. Discussed managed care/savings & asked that she think of patients with commercial insurance who can utilize savings cards or BWC. Dr Taylor took notes on her initiation guide & said she wants to try Butrans- she mentioned to Mary that a patient they saw earlier today would have been a good candidate.
PPLPMDL0020000001	Lakewood	OH	44107	4/25/2011	Also discussed OxyContin as a long-acting option for patient beyond Butrans 20mcg/hr
PPLPMDL0020000001	Cleveland	OH	44113	4/26/2011	Quick call with Katie, she said she does think that Butrans is a good option for those patients on low dose vicodin and before going to other long acting meds. I reviewed the managed care and asked if she would try Butrans for BWC or commercial patients. We reviewed OxyContin as a Q12hr option and she said that she does recommend it in the hospital.
PPLPMDL0020000001	University Heights	OH	44121	4/26/2011	I asked Dr what he remembered about Butrans? Dr said not much, other than this was a transdermal formulation of buprenorphine. dr asked me what receptors Butrans binded to as he couldnt remember? we talked about Butrans receptor action, showing Butrans visual aid and dr said okay as long as he knows that if patients are on Butrans and they still take Vicodin, the Butrans isnt knocked off receptor. dr said he has a few patients in mind but has to look at Butrans fpi and initiation guide in more detail as he hasnt really listened to much of what I said until today, as we had lunch together and more time to talk. I asked dr what he likes about Butrans that he feels his patients could benefit from Butrans? dr said he likes the once weekly dosing, patch technology instead of 180-240 short-acting opioids a month and Butrans being a CIII is much easier in his eyes so that he can have his staff call in refills. dr asked about Medicaid coverage as thats big plan, we talked about Prior authorization and
PPLPMDL0020000001	Warrensville Heights	OH	44122	4/26/2011	Discussed the Butrans positioning and the 5 selling messages. I asked doc if he would prescribe for opioid naive or opioid experience. He said Naive. I discussed the initiation dosing. He asked if the patch stays on for 7 days. I explained the proper application and how to dispose of the patch. He also asked how Butrans differs from fentanyl. I explained that there is no head to head data and that Butrans may not be a substitution for fentanyl. He asked about coverage and PA required. Explained that medicare/medicaid will require a PA. He does have medical mutual and BWC. I explained the savings card program. He said he will maybe give Butrans a try. I reminded him of the indication and savings cards for oxycontin and that after Butrans 20mcg a low dose of oxycontin might be appropriate.
PPLPMDL0020000001	Fairlawn	OH	44333	4/26/2011	Spoke with Debbie (head nurse) who said that both nurse practitioners (Jennifer Dehlman & Rennattie Martin) have permanently left the practice. She said that many changes are being made & many employees are unhappy. She said that between people quitting & people being let go, she is down to only 8 people on staff & she used to have 20. Discussed Butrans with her & reviewed indication, dosing, appropriate patient type & managed care grid. She said she does not know why Dr Shin has not prescribed it since his initial prescription for a patient in January. Debbie said that she is trying to come up with a way for me to see Dr Shin & that they are only allowed to let reps see Dr Shin if they have a new product. Explained that Butrans just launched in January & that I have only spoken to him one time & asked if she would request that I get to see him to discuss Butrans & his experience with it. She promised to do this. I also gave her information on webcast & reviewed OxyContin savings cards
PPLPMDL0020000001	Cleveland	OH	44103	4/26/2011	I asked Dr. Weidman about her success with Butrans. She said she had tried another patient on it and had not heard back from them and would continue to initiate therapy for the appropriate patient types.
PPLPMDL0020000001	Cleveland	OH	44103	4/26/2011	I talked to Dr about any patients he has taking tramadol, that call office saying their medication isnt lasting long enough or they want something different, dr has option of Butrans and dr said he has predominantly medical aid patients and wont do prior authorization for them to get Butrans. I asked dr if he has a few commercial patients that he feels could benefit from Butrans, dr said maybe, so we talked about Butrans patient savings cards for these patients. We discussed OxyContin formulary coverage for medical aid and medicare patients and OxyContin savings cards and who is the appropriate patient for OxyContin. dr said he likes oxycodone and prefers long-acting opioids and has written OxyContin for years so he's comfortable with the medication and its available on medical so its easy for him and his staff. I recommended Senokot-S
PPLPMDL0020000001	Westlake	OH	44145	4/26/2011	I talked to Dave, Pharmacy Manager, about Butrans initiation guide, proper tapering of short-acting opioids and initiation of Butrans 5mcg or 10mcg and titration of Butrans, Dave said he hasnt seen any scripts for Butrans yet but thinks Butrans once weekly dosing is a great benefit to those patients who are always complaining that their short-acting opioids arent lasting long enough. I asked if Dave would recommend Butrans, to doctors he has good relationships with, if patients are complaining to him about their short-acting opioids not controlling pain? Dave said he might do that with a few doctors, but not many. we discussed Butrans formulary coverage and savings cards. we talked about OxyContin, appropriate patient flashcard, formulary coverage and OxyContin savings cards. I recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44106	4/26/2011	Spoke with Deanna, we reviewed the Butrans medication guide and the importance of instructing the patients. We discussed steady state and patients need to wait 72 hours before titration. We discussed OxyContin as an option for appropriate patients when Butrans may not be adequate analgesia. Reminder about Ryzolt and asked to recommend Senokot S.
PPLPMDL0020000001	Parma	OH	44129	4/26/2011	I talked to Dr about her patients taking tramadol around the clock, that may be telling her their short-acting tramadol isnt lasting long enough, so perhaps a long-acting opioid like Butrans could be an option. I showed Butrans initiation guide and patient information booklet/dvd for our discussion, discussed proper tapering of short-acting tramadol if patients are above 300mg and initiation of Butrans 5mcg or 10mcg, dr asked me about medical coverage as thats her biggest plan and I explained the Prior Authorization requirements for Butrans approval for medical aid patients. dr said she'll think of a few patients to try Butrans and let me know what feedback she gets. I talked to Dr about OxyContin appropriate patients, showed flashcard with appropriate patient information and discussed formulary coverage as OxyContin is preferred on Medicaid. I recommended Senokot-S
PPLPMDL0020000001	Garfield Hts	OH	44125	4/26/2011	Dr Ortega said he just wrote his first Butrans prescription. I asked him what patient type he had chosen. He said it was a patient who he had been thinking about for awhile, going back and forth on whether or not he would be a good Butrans candidate. He said that he ended up writing the prescription incorrectly & the pharmacy called him to clarify. He said he wrote "5mg" instead of 5mcg. Reviewed how to write the prescription & also reviewed this with his MA, Cindy. Also discussed appropriate patient type (including patients beyond Butrans 20mcg as potential appropriate OxyContin patients), CIII, & abuse/addiction potential. Dr Ortega asked what to do if the patch starts to loosen or come off as the patient said he gets sweaty. Reviewed taping the edges with first aid tape or covering the patch with Tegaderm/Bloclosure. Also reviewed this with Cindy. I asked Dr Sadowski what he does for patients with a chronically painful condition who complain that NSAID/COX-2's aren't controlling their pain- He said he refers them to pain management if he knows they will need to be on "a lot" of pain medication. He added that he will maintain them if they are on "one Vicodin per day". I pointed to pg 6 in initiation guide at table & asked him what range of medication he would say the majority of his moderate to severe chronic pain patients would fall into & he said the <15mg hydrocodone category. I told him that those were potential Butrans patients. I asked his thoughts on putting someone on a long-acting CIII instead of a short-acting around-the-clock medication & he said he liked the idea of transdermal. Told him that Butrans does carry abuse/addiction potential. Discussed buprenorphine & reminded him Butrans has no indication for treatment of addiction. Reviewed managed care/savings & discussed OxyContin for appropriate patients. OTC reminder

PPLPMDL0020000001	Sagamore Hills	OH	44067	4/26/2011	Only saw Dr Scanlon briefly through the window. Butrans dosing & delivery system reminder. Spent time with his nurse, Helen, discussing appropriate patient type, CII, abuse/addiction potential, dosing, delivery system, & savings cards/eligibility. I let her know that I had spoken with Dr Scanlon last week in the Parma office & that he expressed a lot of interest in Butrans. Helen agreed that Butrans sounded like something that he will be prescribing a lot of, based on his patient population. She asked for more savings cards to ensure they have enough.
PPLPMDL0020000001	Hudson	OH	44236	4/26/2011	Spoke with Stephanie (MA) who said that none of the doctors there have prescribed Butrans yet. Reviewed Butrans indication, dosing & appropriate patient type. She said it is possible that they have forgotten about Butrans since they get so busy. Reviewed savings cards for both Butrans & OxyContin- she said they have plenty of both.
PPLPMDL0020000001	Solon	OH	44139	4/26/2011	met with Chuck Calalesina to plan for call on Marc's and then made call to Carrie Jenne. with him. See call notes on Marc's. We planned on trying to get Colace 10's and Peri-Colace 10's in, but they price based on Walmart per tablet basis, so we weren't able to meet that price.
PPLPMDL0020000001	Cleveland	OH	44109	4/26/2011	i asked dr what he remembered about Butrans and how Butrans was a benefit to his patients? dr said he remembered Butrans was transdermal and once weekly dosing but couldnt remember if it was a CII or III and insurance coverage for Medicaid.i told dr Butrans was a CII and asked if that was important to him? dr said yes,he liked that Butrans was a CII because his staff can call in refills and its much easier than a CII which he doesnt write much of.i told dr Medicaid requires a Prior Authorization for Butrans and explained the requirements and dr said ok he would think of 1-2 patients to try Butrans in and let me know what he hears from patients.i showed dr Butrans initiation guide for the discussion and patient information booklet/application dvd.i recommended Senokot-S
PPLPMDL0020000001	Westlake	OH	44145	4/26/2011	Quick call to follow up with Dr regarding peer group program. He was not sure yet, but will let me know if he can make it. He said that patients are still doing well on Butrans and he did not need anything at this time.
PPLPMDL0020000001	Parma	OH	44134	4/26/2011	Quick call with James. He said he has not dispensed Butrans yet. Reviewed savings program & eligibility and also reviewed OxyContin savings cards for eligible customers. James said he has enough cards for now but that he does try to give them out whenever possible. He then got called away for a customer question.
PPLPMDL0020000001	Cleveland	OH	44109	4/26/2011	worked rheumatology dept-see call notes on Dr.Ballou and Dr.Magrey
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/26/2011	Dr. pitt called for OxyContin co-pay cards. i reminded him about the benefits Butrans could offer his patient since it was a LAO, which he likes an dis used to using and a schedule 3. He said he would continue to prescribe OxyContin.
PPLPMDL0020000001	Independence	OH	44131	4/26/2011	Quick call- Dr Reddy said he had forgotten what Butrans is. Reviewed indication, dosing, & CII. Also handed him invitation for web conference. Spoke with Kathi, reminding her of Butrans managed care coverage & savings
PPLPMDL0020000001	Fairlawn	OH	44333	4/26/2011	Went over the patient education guides and application and disposal. She said that they had seen movement from Dr. Shah and they had it stocked. I left patient education guides for them to hand out to patients.
PPLPMDL0020000001	Independence	OH	44131	4/26/2011	Quick call- Dr Jack saw me & said, "Butrans is here". He then said he has still not prescribed it but that he will. Then he walked into a patient room. Spoke with Cameo (MA) & went over managed care & savings cards for eligible patients.
PPLPMDL0020000001	Akron	OH	44310	4/26/2011	I asked Dr. Schukay if he had studied up on Butrans like he had promised. He said that he had the opportunity to review some information but had not yet tried it. He asked about patient type and I covered both opioid naive and experienced patients. I went over the initiation guide with him and he seemed to understand where it was most appropriate.
PPLPMDL0020000001	Cleveland	OH	44109	4/26/2011	i asked dr what she remembered about Butrans? dr said not much and asked me to review Butrans with her again,we discussed Butrans 5 core messages,showed dr Butrans initiation guide and asked dr if she would consider Butrans,a long-acting opioid after patients try short-acting tramadol for the first time and it doesnt work or doesnt last long enough and her patients come to her asking for something else? dr said she would have to think about it because if patients are taking 50mg tramadol,2-3 times a day,she would increase dose to 2pills,2-3 times a day and increase dosage strength and dosing interval slowly,dr said she doesnt prescribe many long-acting opioids.i asked dr if she even saw any clinical benefits in Butrans,being a long-acting opioid? dr said Butrans being once weekly dosing and in a patch are two benefits she see's for patients.i recommended Senokot-S
PPLPMDL0020000001	Akron	OH	44333	4/26/2011	Becky said she has started some new patients who were all hydrocodone patients and she initiated therapy with butrans instead. I explained that these patients were most likely ideal candidates for Butrans. She said she started therapy at 5 mcs; i explained that steady state took 3 days and that she could also titrate in a little as 3 days if she needs to.
PPLPMDL0020000001	Euclid	OH	44132	4/26/2011	Discussed the Butrans selling messages and the positioning. He said he tried it a couple of times and he has not heard back from them. He asked about BWC coverage and medicaid and medicare. Confirmed coverage with BWC. Showed him the formulary grid and how commercial patients can expect to pay about \$15. I asked him to prescribe Butrans after tramadol failures. He said he would try as he likes to reduce the number of tablets taken anyway. Explained the proper initiation dosing and application.
PPLPMDL0020000001	Akron	OH	44310	4/26/2011	I asked Dr. Cremer how his patients were doing on Butrans. He mentioned that most of the patients are doing well and are very satisfied with the therapy. He said he is using it on many BWC patients and I reminded him of our great coverage on the commercial plans as well.<font color=blue><b>CHUDAKOB's query on 05/05/2011</b></font>Even though I see you reported the AE through the system, you should also include it in your call notes and how you responded to it.<font color=green><b>LAPMACA's response on 05/08/2011</b></font>Patient complained to the physician of nausea and dizziness. I let the dr know I would report this AE.<font color=blue><b>CHUDAKOB added notes on 05/12/2011</b></font>OK. Thanks!
PPLPMDL0020000001	Euclid	OH	44132	4/26/2011	Spoke to Tim about the stocking and movement of Butrans. He said he had a couple of script. One BWC script that went through with no problem. Dr. Marshall (amy's doc) wrote the script. One physician came in with a script but his insurance (Merck Medco) was too high of a co-pay. I reviewed the covered formulary plans. He asked why the drugs are priced high and then have a savings card. Barry explained the insurance company regulations. Tim stated that he had to turn away a few 80mg oxycontin scripts in the past several weeks because he is not getting reimbursed as much as he is paying for it.
PPLPMDL0020000001	Westlake	OH	44145	4/26/2011	I asked the Dr what his hesitation is in prescribing Butrans, he said he is still looking for the right patient who is taking low dose vicodin. We discussed patients that maybe taking celebrex or tramadol and that Butrans could be the next step for chronic pain instead of vicodin. He said he does want to give it a try. I reviewed the managed care info and savings cards with his MAs. Reminder about OxyContin as a Q12 hr option and he said that he is continuing to prescribes a lot of OxyContin and in fact many patients are already on higher doses of opioids and need to convert to OxyContin instead of Butrans.
PPLPMDL0020000001	Westlake	OH	44145	4/26/2011	Spoke with Jamie, We reviewed the Butrans medication guide and the importance of teaching patients about the proper application and use of Butrans. We discussed OxyContin as a Q12hr option for those patients when Butrans may not provide adequate analgesia. Reminder about Ryzolt and asked him to recommend Senokot S.
PPLPMDL0020000001	Cleveland	OH	44130	4/26/2011	met with Carrie Jenne along with Chuck Calalesina (Acosta). We presented Colace 10's and Peri-Colace 10's. Marc's matches tablet for tablet price with Walmart. She would not be able to do that as she would have to sell it for less than she paid for it basing her price off the Colace 100mg 60's. She was also concerned how much we would sell with the generic also available. We talked of the advantages of stocking both. We will need to focus on Senokot-To-Go 4's. They have trial section. Also possible to put on shelf or on self talkers throughout the store. Walmart is primary competition. They will also look at Giant Eagle, DDM, Target, and other mass stores.
PPLPMDL0020000001	Fairlawn	OH	44333	4/26/2011	Dr. Oyakawa still has not written his first Rx he says because of a confidence issue. He told me there are several things he likes about Butrans therapy including the 7 day delivery system. I asked him if he knew the patient type to initiate therapy on and he said either an opioid naive or low dose hydrocodone patient. I agreed that these are the most ideal patients.
PPLPMDL0020000001	Independence	OH	44131	4/26/2011	Quick call- Since Maria told me Dr Rob would probably not be able to attend the dinner program next month, I invited Dr Rob to do a Butrans webcast. He said he would try to get online for it as webcasts are easier for him to attend with his schedule. Handed him OxyContin savings cards for appropriate eligible patients. Spoke with Cameo & reviewed managed care coverage for both products as well as savings cards/eligibility.
PPLPMDL0020000001	Cleveland	OH	44102	4/26/2011	i talked to dr about Butrans being an option for her patients taking short-acting tramadol that arent controlled and asking her for something different,dr said she was thinking of patients taking vicodin and percocet and more towards the 40mg range,but it made sense to think of patients taking tramadol too we talked about tapering of short-acting opioids and initiation of Butrans 5mcg or 10mcg,by looking at Butrans initiation guide,we discussed OxyContin being available and showed OxyContin formulary grid.i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44111	4/27/2011	I asked Dr what benefits he sees in Butrans for his patients. He said that he has not prescribes yet and will let me know it fits into his practice. He said he just forgot. I reviewed the managed care with Barb and she is going to help remind him when appropriate patients come in. I reviewed the managed care and savings cards for OxyContin for patients when Butrans may not provide adequate analgesia.
PPLPMDL0020000001	Cleveland	OH	44114	4/27/2011	dr said he started 4-5 patients on Butrans but couldnt get approval through Caresource and 1 patient was BWC.we talked about dr considering patients with commercial plan insurance of state BWC to try Butrans in and make it easier than trying to start medicaid patients on Butrans.i asked dr what were the patients taking,that dr thought of Butrans as an option? dr said patients on OxyContin,Morphine.i talked to dr about patients with moderate pain,more on the low dose vicodin or percocet range,and not OxyContin or anything above 80mg oral morphine,to consider starting on Butrans.dr said he has started a few patients who were taking short-acting opioids,like Vicodin and percocet.
PPLPMDL0020000001	Cleveland	OH	44114	4/27/2011	i asked Dave,Pharmacy Manager,if he has seen any Butrans scripts yet and Dave said 1 script from Dr.Marshall but patient was on OxyContin 60mg and Dr.Marshall started this patient on Butrans 10mcg,so Dave's not sure if Butrans will work for this patient.we discussed appropriate patients for Butrans,showed Butrans initiation guide and i told Dave my message to doctors is more moderate chronic pain,low dose hydrocodone,oxycodeone or tramadol or opioid naive patient.Dave said he thinks Butrans is a good option,instead of 90 plus short-acting opiates a month,but thinks Butrans will be transient for patients.Dave said Dr.nickels and Dr.Patel's patients fill scripts here and he see's a lot of Vicodin from these doctors but mainly medicaid and workers comp patients. we discussed Butrans patient savings card,discussed OxyContin savings cards and Dave said he has all medicaid patients for OxyContin so he didnt need OxyContin savings cards.left Butrans patient information booklets for him too
PPLPMDL0020000001	Northfield Center	OH	44067	4/27/2011	Spoke with Sunni (pharmacist) who said that they have not yet ordered Butrans but she will order when she gets a prescription. Reviewed appropriate patient type/positioning, dosing, indication, & e-voucher. Encouraged her to order now so that she has it available when she gets a prescription. Also inquired about OxyContin stocking & asked if she wanted savings cards, but she said they really do not keep OxyContin on hand. Gave her online pharmacist education information which she said she really needed.
PPLPMDL0020000001	Bedford	OH	44146	4/27/2011	Spoke with Ieasha, MA, who said that Dr Mahna was working on a court case & could not see me today. I asked her the best way to have a discussion with him & introduced Purdue's products. She said she would give my card to the office manager, Mrs Mahna, who would be the one to contact me for an appointment. I reviewed Butrans indication, dosing, & appropriate patient type with Ieasha & asked her if she thought that Butrans sounded like something he may be interested in hearing about & she said yes. She said she would give the information to Mrs Mahna & would request an appointment for me.
PPLPMDL0020000001	Macedonia	OH	44056	4/27/2011	Spoke with Linda (nurse) who said that Dr Yager had already left for the day. She said she did not think that he has prescribed Butrans for anyone yet. Discussed indication, dosing, appropriate patient type & delivery system with Linda & worked with her to schedule first available lunch with Dr Yager. She said Butrans does sound like something that he would be able to use with his patients. Reviewed savings cards & eligibility. She said she would give my information to Dr Yager & remind him about Butrans.
PPLPMDL0020000001	Parma	OH	44134	4/27/2011	Dr Hernandez said that he had a patient who was on Butrans 10mcg & the patient said they were not getting quite enough analgesia, so he titrated her to 20mcg. She was "doing great" for the first two days of 20mcg, but then called complaining of severe nausea, headache, & fatigue. She removed the Butrans due to these adverse events. He said that Purdue should make a 15mcg/hr dose so that this does not happen to more patients. He said that other than that, he is very happy with the results that his patients get from Butrans. He said that he is switching patients from Vicodin to Butrans. Reminded him that Butrans does still have abuse/addiction potential as it is an opioid. He said he knows. Discussed OxyContin as a possible option for appropriate patients beyond Butrans 20mcg. He said that when patients need a "stronger" medication than Butrans he will continue to consider OxyContin. Also gave him new OxyContin savings cards.
PPLPMDL0020000001	Bedford	OH	44146	4/27/2011	Spoke with Kevin (pharmacist) who said this was his first day working at that location. He checked the shelf & confirmed that they do have Butrans. Discussed indication, dosing, CII, abuse/addiction potential, & appropriate patient type. Also gave him REMS packet. I asked him if he knows if there would be any problem with opening a carton to dispense one patch if they received a prescription written that way & he said he does not think that would be an issue. Also discussed OxyContin savings cards & gave him information on pharmacist education.

	Warrensville Heights	OH	44122	4/27/2011	Spoke with MA Adrienne who said that Dr Zivic was at Hillcrest & would not be in the office as planned this afternoon. Reviewed with her Butrans indication, dosing, delivery system, managed care, & savings cards. She said she does not think he has prescribed it yet. Also discussed appropriate patient type/positioning. I asked her if she is the person who takes the phone calls from patients requesting refills or switches in medication & she said that she, Stephanie, & Michelle all take them. I asked if patients on pain medications frequently call requesting early refills, increases in doses, or switches in medications. She said she does take many phone calls like this. She said she would remind Dr Zivic & would leave my information for him. Also offered OxyContin savings cards but she said she has enough for now.
PPLPMDL0020000001	Akron	OH	44320	4/27/2011	I asked Dr. Bonyo if he saw a benefit to Butrans therapy. He said he liked that it was a 7 day delivery and would keep it mind.
PPLPMDL0020000001	Akron	OH	44333	4/27/2011	Dr. Brown told me that had initiated Butrans therapy to her first patient. She said it was a patient who had called and wanted more hydrocodone and she instead converted to Butrans just like we discussed. She said she had 2 more patients this afternoon that she would initiate therapy to.
PPLPMDL0020000001	Cleveland	OH	44122	4/27/2011	As requested, and as follow-up to a meeting between Pam Tropano and Kendra Prince on 4/14/11, emailed a copy of the ASAP program (as slide handout/PDF) for Pam's review.
PPLPMDL0020000001	Cleveland	OH	44111	4/27/2011	I asked Dr to prescribe Butrans instead of increasing the dose of vicodin or percocet. He agreed. I reviewed the managed care and checked Butrans and OxyContin savings cards with Pam.
PPLPMDL0020000001	Akron	OH	44312	4/27/2011	Quick call through the window where I reminded Dr. Fouad of ALL his previous commitments to initiate Butrans therapy. He said he would keep it in mind.
PPLPMDL0020000001	Cleveland	OH	44111	4/27/2011	Spoke with John, we reviewed the Butrans medication guide and how to instruct patients on how to use Butrans. We discussed OxyContin as an option when Butrans may not provide adequate analgesia. Reminder to recommend Senokot S with opioids.
PPLPMDL0020000001	Cleveland	OH	44111	4/27/2011	Quick intro at window. I reviewed the Butrans 5 key messages. He will take a look and let me know if there might be a place in his practice for Butrans.
PPLPMDL0020000001	Cleveland	OH	44106	4/27/2011	dr said he hasn't started any patients on Butrans yet and knows he has to put Butrans in his mind. I asked dr if he would consider starting patients on Butrans after tramadol? dr said he has other options and isn't sure about Butrans and thinks a journal club discussion would be helpful so he can have more information on Butrans.
PPLPMDL0020000001	Cleveland	OH	44143	4/27/2011	Quick call.....I asked doc about his patients that are taking tramadol ATC for persistent pain. He said he would send them to pain mgmt. I asked him if he would consider Butrans - a CIII, 7 day delivery system in place of vicodin. He asked if its covered on medicare. I explained no coverage on medicare/medicaid but is well covered commercially. Gave him a formulary grid. Nothing learned.
PPLPMDL0020000001	Cleveland	OH	44111	4/27/2011	Quick call with nurse Margaret. She does not think Dr has tried Butrans yet and he has not said anything. We reviewed the managed care and savings cards for Butrans and OxyContin. She will pass along the info to the Dr.
PPLPMDL0020000001	Cleveland	OH	44114	4/27/2011	I asked John,PA,who are the patients you are starting on Butrans? John said patients who are in chronic pain,taking morphine,OxyContin and they are going to be in pain for the rest of their lives and their insurance pays for their medications.I asked John if he is considering Butrans for any patients taking vicodin or percocet,that are asking for something different or saying their short-acting opioids aren't controlling their pain? John said no,only the long-acting opiate patients.
PPLPMDL0020000001	Akron	OH	44320	4/27/2011	I asked Misty if she has had a chance to prescribe Butrans for at least one patient and she said that although she had not she was starting to feel comfortable about exactly who she should prescribe Butrans to. I went over the initiation guide and explained steady state titration.
PPLPMDL0020000001	Cleveland	OH	44114	4/27/2011	dr said she has some patients on Butrans and they are doing well,especially one patient who she had to titrate from Butrans 5mg to 10mgc and dr didnt want to increase Butrans dose to the Butrans 20mgc so she told patient to wear a Butrans 5mgc and 10mgc. I told dr that was not approved for Butrans, we discussed only 1 Butrans transdermal system is to be applied at a time,as I didnt have data to support anything more than that.dr said her clinical judgement was that this was the smartest thing to do for this patient so she is happy with her decision.
PPLPMDL0020000001	Parma	OH	44129	4/27/2011	Spoke with Fien (pharmacist) & reviewed Butrans dosing, titration, & e-voucher. Also reviewed OxyContin savings cards. Asked if she would fill a Butrans prescription for fewer than 4 patches if she gets a prescription written that way. She said that she personally has no problem opening a box, but that each location's pharmacy manager will have to make that decision for their location individually. Gave her online pharmacist education information. She said she was interested in the courses because the topic is pain management & she, as a pharmacist, encounters difficult situations with pain patients frequently. She said that she always has to "be on the lookout" for patients & is careful not to fill prescriptions for patients who she suspects are abusing the medication. She said she goes to various locations of Rite Aid & that it is a problem everywhere she goes.
PPLPMDL0020000001	Chagrin Falls	OH	44022	4/27/2011	Quick call- caught Dr Rood up at the window. He said he has not heard feedback from his Butrans patient since he titrated her dose & will keep Butrans in mind for other patients. Spoke with Sherry (MA) & reviewed managed care coverage & savings cards as well as eligibility for savings cards. Also scheduled another appointment with Dr Rood to discuss Butrans in more depth.
PPLPMDL0020000001	Cleveland	OH	44111	4/27/2011	Spoke with John, he said he thought they might have seen a script but he did not know which Dr. He did not have it in stock but thought he saw it ordered. We reviewed how to instruct patients about the proper use of Butrans. Reminder about OxyContin as a Q12hr option and asked him to recommend Senokot S.
PPLPMDL0020000001	Cleveland	OH	44106	4/27/2011	dr said he started a patient on Butrans because patient was taking methadone and he thought Butrans would be a good option for this patients chronic pain.dr said he couldnt find any tapering or equivalency information regarding methadone and Butrans in the Butrans fpi or initiation guide. I told dr there wasn't any recommendation for that conversion and discussed with dr patients that are more on the moderate side of chronic pain and taking a couple pills of tramadol or vicodin,to consider Butrans there.dr said ok and that he has Butrans in his mind. We discussed commercial plan coverage and Butrans patient savings cards and I gave all of this information to Juan,doctors MA,gave formulary grid and showed Juan Butrans patient information booklet/application dvd and Juan said that was helpful because patients usually dont listen to him and end up calling him once they get home and have questions.
PPLPMDL0020000001	Parma	OH	44129	4/27/2011	Reviewed Butrans dosing, indication, CIII & abuse/addiction potential with Dr Kushnar. I told her that I realize that she does not like to prescribe opioids in general, but asked her, if she did have a patient who she was comfortable putting on opioids or who was already on opioids asking for an increase in dose, if she would consider Butrans for those patients. She said she would. She added that she has thought of two patients for whom she would like to start on Butrans. She then asked me if Caresource was covering it. Discussed managed care & asked that she think of commercially insured patients for whom Butrans will be more accessible. She said that the other patient who she thought of has commercial insurance so she plans to prescribe Butrans for him when she sees him next. She asked if it has a street value-told her I do not know but that it is abusable. Also discussed OxyContin as an option for patients beyond Butrans 20mgc & recommended Senokot-S for opioid-induced constipation.
PPLPMDL0020000001	Solon	OH	44139	4/27/2011	Lynn, Todd, Alan, Mary and I with MH at AMCP. We discussed transition to CVS Caremark and time line. Their business closes on 4/29/11 but UA will operate independently until 12/31/12. Dan discussed the letter they received from the OIG which resulted in their request to amend the contract. MH is requesting a response to renew by June 1 versus Oct.1, 2011.
PPLPMDL0020000001	Cleveland	OH	44113	4/27/2011	I asked Laura if patients taking vicodin ever ask her for something different or call the medication refill request line,saying their vicodin isnt lasting long enough or not working? Laura said no,she doesnt hear about patients calling into office asking that and when she see's them,if patients are saying they want something more,if its too much,they refer out to specialists.otherwise they are maintaining patients.Laura said she only has 5 minutes,per patient,doesnt have time to explain new drug and isnt going to do it.I told Laura I appreciated her honesty.Laura said she thinks dr nickels,her colleague,has started a few patients on Butrans so she'll see how those patients do on Butrans and if they have success with Butrans,maybe she'll look at Butrans then.
PPLPMDL0020000001	Independence	OH	44131	4/28/2011	Dr Sundaram said that he prescribed Butrans for a patient last week. I asked him to describe the patient he chose. He said it was a male patient with chronic back pain who had been on "a lot" of narcotics years ago but had weaned himself off them since then. Dr Sundaram said that the patient had been experiencing pain despite using NSAID's to help control it. He said he had not yet received feedback but would let me know when he does. I invited him to the May dinner but he declined. I asked if he would consider a webcast instead & he said he would like more information on them as that may be more reasonable for him to do. Also discussed OxyContin as an option for patients beyond Butrans 20mgc dose.<font color=blue><b>CHUDAKOB added notes on 05/05/2011</b></font>Great question asking to describe the patient he chose? You got some good information!
PPLPMDL0020000001	Bedford Heights	OH	44146	4/28/2011	Followed up with Susan (Office Manager/appointment scheduler) as Dr Hochman had asked in effort to schedule a follow-up appointment with him to discuss Butrans. Reviewed Butrans indication, dosing, CIII, abuse/addiction potential, & managed care with her. She said she remembers my last meeting with him & said she would give Dr Hochman my information, remind him about Butrans, & request a follow-up appointment.
PPLPMDL0020000001	Cleveland	OH	44130	4/28/2011	Dr Diab said that he will not be able to attend the May Butrans program because he works until 8PM on Tuesdays. I showed him a demo patch & asked how he thought his chronic pain patients would feel about applying one of them every week as an option vs taking around-the-clock oral pain medication. He said the patch was "very nice". Positioned Butrans as a CIII, long-acting option for appropriate patients after NSAID's/COX-2's. He said he would keep Butrans in mind for those patients. Also reminded him commercially insured patients who use the savings cards would pay only \$15 out-of-pocket & showed him OxyContin savings cards as well.
PPLPMDL0020000001	Independence	OH	44131	4/28/2011	Dr Faiman said he was having a hard time "fitting in" where to use Butrans. Discussed positioning & appropriate patient type. I presented initiation/titration guide pg 6 & asked what his thoughts were on trying Butrans on patients who have a chronic condition causing moderate pain who are no longer getting relief from NSAID's or COX-2's (ie patients for whom he would typically prescribe Vicodin, Percocet, or tramadol around-the-clock). He said he had not considered these patients before but would definitely think of those patients now that he knows where to position Butrans. Reviewed managed care/savings cards. He asked about OxyContin Medicare Part D coverage. Reviewed formulary grid. He also said an "alert" went out throughout The Clinic making docs aware that Opana ER can be more easily manipulated for abuse than OxyContin so to be cautious giving Opana ER to patients requesting it. Told him we have no data to suggest that. He said he knows that but it is something The Clinic says-font color=blue><b>CHUDAKOB added notes on 05/05/2011</b></font>Very good call note! You captured the essence of the call. Keep focusing on his opioid naive patients. Sounds like that is where he might prescribe it.
PPLPMDL0020000001	Parma	OH	44129	4/28/2011	Spoke with Dawn (Nurse & office manager) as Jen was out of the office today. Discussed Butrans- appropriate patient type, dosing, titration, application, CIII, & abuse/addiction potential. Dawn said that she thinks that Jen will start using Butrans if/when Dr Nickels starts prescribing it more. She said she does not think Jen would prescribe it if Dr Nickels didn't since she is more quiet, reserved, & more of a "follower". Dawn said that she can think of a few different patient types that Jen sees that Butrans could be a good option for. Showed Dawn the demo patch & discussed the webcasts with her. Dawn said she thought those might be something that Jen would do & said she would give her the information when she returns to the office. Also discussed Ryzolt, which Dawn claims Jen is writing a lot of.
PPLPMDL0020000001	Cleveland	OH	44113	4/28/2011	dr said he's stopped prescribing Butrans as 3-4 patients he started got systemic rashes on body.I asked dr if patients applied alcohol to application site so perhaps that could have caused rash? dr said no,these were not application site rashes,they were all systemic rashes on body and he's confused because there's no report of this being systemic in Butrans fpi.I talked to dr about Butrans fpi,noting severe application site rashes,but dr said he's at a standstill now with this occurring.
PPLPMDL0020000001	Stow	OH	44224	4/28/2011	Dr popped in breakfast and said he had to get started, but has not startede Butrans patient. Reminded of 10mgc start in his opioid experienced patients and saigns card program.Gave him invite to Butrans program in worked orthopedic dept - dr bohl and dr berkowitz.
PPLPMDL0020000001	Cleveland	OH	44113	4/28/2011	Spoke with Katrina, we reviewed the Butrans medication guide and I asked for her assistance in instructing the patients on proper use and application. We reviewed OxyContin as an option when Butrans may not provide adequate analgesia. Reminder to recommend Senokot S.
PPLPMDL0020000001	Rocky River	OH	44116	4/28/2011	
PPLPMDL0020000001	South Euclid	OH	44121	4/28/2011	Spoke to Melinda about the stocking of Butrans. She is new to this store she was unsure. Tech, Janet confirmed that they have it but they have not seen anymore scripts since the last time I was in. I reviewed the indication, dosing, and the proper application. I explained the savings card and the relay health program which was also unaware of. Gave them a REMS webinar for pharmacist.
PPLPMDL0020000001	Mayfield Heights	OH	44124	4/28/2011	Window call....I discussed the Butrans patient type and explained the upcoming program. I asked if she would be available to come. She said she can't commit right now but she is interested. Told her I would check back.
PPLPMDL0020000001	Cleveland	OH	44130	4/28/2011	Spoke briefly with Allison (pharmacist) who said that she has not dispensed Butrans yet. Reviewed patient information guide. She said she would keep one on the shelf for patient counsel & would let me know if she wanted to keep more on hand to give to customers. Reviewed application & disposal as well as e-voucher for Butrans & savings cards for OxyContin for eligible patients.
PPLPMDL0020000001	Cleveland	OH	44130	4/28/2011	Spoke with Diane who said they had still not dispensed Butrans yet. I asked if she had any recommendations of prescribers who I may want to contact based on the patient type, but she did not have any suggestions.
PPLPMDL0020000001					Reviewed patient information booklet & discussed savings opportunities for eligible Butrans & OxyContin patients.

PPLPMDL0020000001	Parma	OH	44129	4/28/2011	Spoke with MA, Shari, who said that Dr Paat had to go to the hospital to see a patient unexpectedly, so he was not in as scheduled. Discussed Butrans dosing, patient type, & savings cards/eligibility with her. She said she does not think Dr Paat has prescribed Butrans yet & that he may have forgotten. She said she would remind him & would give him the information I left. Also gave her formulary grids for Butrans & OxyContin. She said sometimes Dr Paat does ask her about coverage, so she would be able to use them.
PPLPMDL0020000001	Cleveland	OH	44109	4/28/2011	i talked to Alan,Pharmacist,about Butrans stocking,scripts from doctors-Alan said Dr.Tabbaa,Dr.Ryan,Dr.Shen and Dr.Hernandez have written Butrans,i asked Alan if he did any patient counseling on Butrans application? Alan said a little,its like any other patch so he tells patients to rotate Butrans patch.i showed Alan Butrans patient information booklet and he said they had some in pharmacy.i asked about insurance plans here and Alan said Medicaid and BWC are two biggest plans.we talked about OxyContin savings cards but Alan said he doesnt need them same as medicaid patients cant use them and they are the one's mainly getting OxyContin.i asked Alan if he recommends senokot-S,to patients taking opioids? Alan said he does recommend a laxative but usually generic brands as Senokot-S is expensive.i gave Senokot-S protocol pad to Alan.
PPLPMDL0020000001	Mayfield Heights	OH	44124	4/28/2011	Quick call.....i reviewed the Butrans patient type and asked him to think of prescribing butrans before going to hydrocodone ATC. I gave him an invitation to the Butrans peer group program. He said he would try. Gave formulary grid.
PPLPMDL0020000001	Cleveland	OH	44113	4/28/2011	dr said he started 3-4 patients on Butrans.i asked what triggered dr to think of Butrans for these patients? dr said 1 patient was taking Vicodin and it wasnt working anymore so he wanted to try Butrans and then another patient was newer to his practice,not been on opioids,so he wanted to try Butrans in that patient.i asked dr about the patients who have been taking opioids,that he started on Butrans,if they need to be titrated will dr bring them back in office or call in refill? dr said if he just saw the patient,he'll call in the refill but if it was awhile ago,then he will bring the patient back in to office for an exam and increase dose at that time.i asked dr if he needed Butrans patient information booklets and he said no they had plenty in exam rooms.we discussed BWC and commercial plan patients starting on Butrans and dr said he's not worried about insurance and will do Prior Authorization for medicaid patients if they need it done.
PPLPMDL0020000001	Stow	OH	44224	4/28/2011	Steve said he almost prescribed Butrans the other day. HE said he had a pateint who was coming in who had never been on anything but NSAIDS and he said to him, that is the perfect candidate, and he never came in. I said if that is the patient he is looking for in their practice than he may have a harder time finding someone for Butrans since he told me everyone who comes in is usually on an opioid. We discussed 10mcg starting dose for those patients and titration. Reviewed managed care coverage grid and savings cards program. I gave him inviet for the Butrans program and he said he may come.
PPLPMDL0020000001	Stow	OH	44224	4/28/2011	Introduced Butrans, relieved FPI, indication, boxed warning, dosing and administration, titration, 5 core messages. She said this is really nice because she is new to the practice and she doesnt know her patients really well, She likes the fact it is once a week. I reminded her it is a schedule 3 and that it still has the same potential for abuse as other schedule 3 opioids. She said she would try it, she had to go. I rieweud managed care and saigns cards program with her as well quickly
PPLPMDL0020000001	Cleveland	OH	44105	4/28/2011	Abdul,Pharmacist,said he hasnt seen any scripts for Butrans yet and he has the medication in stock.Abdul asked who i was working with in the area so we discussed specific physicians and Abdul said he gets Dr.Celeste,Talbot,Carson,Harrington,Tabbaa and Ryan's patients.i asked Abdul if he would ever recommend Butrans to doctors,if patients are telling him their short-acting opioids arent lasting long enough? Abdul said no,he wouldnt recommend any medications to doctors but he would recommend Butrans to patients,to talk to their doctors.Abdul asked if i had anything i could leave that was educational for patients? i showed Abdul the Butrans patient information booklet and said i could leave 1 booklet and if he could talk to 1 patient about Butrans and that patient gets started on Butrans,then i will leave more Butrans patient information booklets for him.i asked if Abdul needed any more OxyContin savings cards or conversion guide,he didnt and he has all 7 tablet strengths in stock.
PPLPMDL0020000001	South Euclid	OH	44121	4/28/2011	Quick call with pharmacist, Amanda, as she was very busy. I asked about the movement of Butrans. She said she had not filled any scripts since the one that was previously written and written incorrectly. ti gave her the savings card sell sheet and the REMS webinar for pharmacist.
PPLPMDL0020000001	Cleveland	OH	44130	4/28/2011	Dr Fedorko said he has not yet had any clinical feedback on Butrans. I asked him if he would prescribe Butrans instead of Vicodin for patients who have a chronically painful condition instead of around-the-clock Vicodin. He said he would do this. He added that he thinks Butrans is "better" because it does not have "street value" & "kids on the street won't sell it". I reminded Dr Fedorko that Butrans is a CII medication & an opioid, which means it does have abuse & addiction potential just as any other opioid does. He said that he knows that but that he feels that it is less likely to be abused. I told him there is no data to suggest that & that Butrans is abusable. Reminded him of commercial insurance coverage & savings cards for eligible patients.
PPLPMDL0020000001	Berea	OH	44017	4/28/2011	I reviewed the managed care grid for Butrans and patients can get Butrans for as low as \$15 per month with the savings cards. Reminder about OxyContin as a Q12hr option as well. I also spoke with Shirley about the managed care.
PPLPMDL0020000001	Cleveland	OH	44113	4/28/2011	dr said he's not sure about Butrans yet as he needs some experience with the medication and has to get comfortable with it.i asked dr what his max dose of tramadol is that he'll prescribe? dr said 300mg tramadol.I told dr when patients are at that point,300mg tramadol,but telling him that dose isnt controlling their pain anymore or they are asking for something different,thats where Butrans could be placed dr asked if patients could take Butrans and tramadol at same time,wondering if there would be any interference with the mu-opioid receptors? i showed dr Butrans fpi,section-initiation of therapy and maintenance of therapy,told dr he can choose opioid or non-opioid medications with Butrans.i asked dr what he does right now,when patients are at 300mg tramadol and its not working? dr said nerve blocks,injections,refers to pain mangagement.i asked if dr could think of 1 patient to start on Butrans,dr said yes,discussed formulary coverage.discussed Ryzoit and Ryzoit value cards
PPLPMDL0020000001	Parma	OH	44129	4/28/2011	Laura was filling in for Jen at the Parma location today. She said that Dr Nickels has started a few patients on Butrans but has not had feedback so far. She said that if he starts to use it more, she probably will too. I asked what types of patients Dr Nickels has started. She said that one that sticks out in her mind has kidney problems due to diabetes, so Dr Nickels did not want that patient taking any acetaminophen or ibuprofen anymore so he switched that patient to Butrans. She also said that this patient had Caresource & she knows for sure that the prescription just got approved yesterday. She said this was a patient type she would also consider for Butrans if she encounters more like him (ie renal issues). She asked what types of patients other physicians are prescribing it for. Reviewed various patient types (opioid-naive, patients asking for more Vicodin or a switch in medication). Gave her information about upcoming webcasts- she said she would like to take part in one.
PPLPMDL0020000001	Stow	OH	44224	4/28/2011	I asked Dr what do his new patients typically come in on when they are new and he said usually some dosage of Vicodin. I asked how many of those patients are chronic when they come in and he said probably the majority of them. I asked what is his goal with them and he said to put them on a long acting. I asked how long does that take to get them on a long acting and he said they have a consult and then he puts them on a long acting. I asked where he would write Butrans and he said probably in a patient taking Vicodin or Percocet ATC. We talked about 10mcg starting dose and reviewed tapering. HE then said once a day, right? i said no once every 7 days and it is schedule 3 so he can call it in. HE said oh, he can think of some patients this would be good on. Reviewed managed care formulary grid and savings card program. Gave him invite to program in Cleveland. Discussed the patients on Vicodin ATC if they are on more than 40mg a day going to Oxycontin q12h.
PPLPMDL0020000001	Cleveland	OH	44109	4/29/2011	i talked to Shelby,Pharmacist,about Butrans initiation guide and who the appropriate patient is to start on Butrans and what i am saying to doctors in the field so she understood my messaging.Shelby said she thinks a few doctors have prescribed Butrans but couldnt look that information up for me,to confirm right now.we talked about Butrans application dvd/booklet and i asked Shelby if this patient education tool was valuable to her and the pharmacy staff,when educating patients? Shelby said yes and asked that i leave a few booklets.we talked about Butrans formulary coverage and patient savings cards for commercial plan patients.i asked Shelby if she would recommend Butrans to doctors,for those patients that are complaining to pharmacy that their pain isnt controlled with their short-acting opioid? Shelby said she usually doesnt do that and probably wouldnt but she will keep patient education booklets and perhaps give 1 or 2 to patients like this and see if they talk to their doctors
PPLPMDL0020000001	Parma	OH	44129	4/29/2011	Spoke with MA Jill & tried again to schedule an appointment with Dr Gallagher to follow-up on our Butrans discussion. She said that he is not doing any appointments right now due to his schedule. Discussed Butrans indication, dosing, & appropriate patients as well as Butrans & OxyContin savings cards for eligible patients. She said she would give my information to Dr Gallagher & to check back later next month when Lynn (nurse) is back in the office to try to schedule something with Dr Gallagher. Also left invitation for May dinner.
PPLPMDL0020000001	Westlake	OH	44145	4/29/2011	Quick follow up thru window, I asked if he was able to see Butran in the e-prescribing and he said it is working now. I asked if he would prescribe for just one patient today so he can start gaining some experience with Butrans. He agreed and said that he knows Dr Kaslan as been prescribing quite a bit. Reminder that OxyContin is still a Q12hr option for appropriate patients.
PPLPMDL0020000001	Independence	OH	44131	4/29/2011	I asked Dr Pai what his usual trigger is to move a patient from a short-acting around-the-clock pain medication to a long-acting option. He said it really depends on the patient & their condition. He said that some patients "become fixated" on taking pills every few hours for their pain, so it can be difficult to change them to a long-acting option. Discussed Butrans positioning. He said that he would prescribe Butrans for appropriate patients before going to a short-acting opioid if he knows the patient's condition is chronic. He also said he would prescribe it for patients already on an opioid if they requested an increase in dose or change in medication. He added that he is very comfortable with buprenorphine & has "no problems" with Butrans, it can just be difficult to find patients who have commercial insurance who fit the indication also. He said he is looking for more Butrans patients. Discussed OxyContin as a long-acting option for appropriate patients beyond Butrans 20mcg.
PPLPMDL0020000001	Cleveland	OH	44113	4/29/2011	i talked to dr about patients she's started on Butrans and why she chose Butrans.dr said these patients were all taking vicodin or percocet and not controlled and asking her for something different or more medication,so she talked to patients about Butrans.dr said she likes that Butrans is a patch and once weekly dosing is simple for patients.we talked about Butrans initiation guide and patient information booklet/application dvd and how this is helping her patients as an educational tool.i asked dr if she will see a few patients today and next week,that she can start on Butrans? dr said yes,we discussed BWC and commercial plan coverage for Butrans.i recommended Spoke with Denise who said that Dr Boose has not yet prescribed Butrans so she still has plenty of savings cards. Discussed indication, dosing, & delivery system as well as positioning. She said i would have to wait until my lunch to have a discussion with Dr Boose about it. She also said she has enough OxyContin savings cards for now. I asked her to give some Butrans information to Dr Boose & she agreed to do this.
PPLPMDL0020000001	Cleveland	OH	44113	4/29/2011	worked pain management dept-dr shen and dale novak,pa
PPLPMDL0020000001	Westlake	OH	44145	4/29/2011	Quick call at window, I reminded Dr of what he said about using Butrans instead of vicodin when appropriate. He said that he will try Butrans and he just forgot. He asked about managed care and we reviewed managed care for Butrans and that OxyContin is an option if Butrans is not covered.
PPLPMDL0020000001	Cleveland	OH	44109	4/29/2011	i talked to dr about Butrans being an option for patients taking short-acting opioids that tell him their pain isnt controlled,showed dr Butrans initiation guide for discussion.dr said he only has a few patients taking short-acting opioids and noone has complained to him yet,but he does think Butrans is a great option being transdermal and once weekly dosing,we talked about commercial plan coverage and BWC coverage for Butrans.i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	4/29/2011	dr said he hasnt started anyone on Butrans yet only because he hasnt had many patients ask him for something different they are all doing well on short-acting opioids.dr said he remembered Butrans being transdermal and once weekly dosing option and that its a CII,but couldnt remember insurance coverage,we talked about dr considering patients with BWC or commercial plan insurance that are taking short-acting opioids but telling him,or nurse,that pain isnt controlled, and they are asking for something different.dr said ok he'll keep it in mind.i asked dr if he could think of 2 patients today and next week to consider initiating Butrans? dr said he will do his best to keep Butrans in mind and if appropriate,he will talk to patients. I recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	4/29/2011	dr said he hasnt started any patients on Butrans but he does have some patients in mind because he likes that Butrans is a patch and dosed once a week and some of his patients taking short-acting opioids will ask him for something different. I asked dr if he would see 2 patients today or next week,that he feels Butrans would be appropriate? dr said he's not sure,but will keep in mind.we talked about Butrans patient savings cards and i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44130	4/29/2011	Spoke with technician who said the pharmacist could not see me today. Discussed savings for Butrans & talked about going online to Butrans.com to print savings cards if necessary. Also discussed OxyContin savings cards & eligibility requirements. Gave her online pharmacist education information to pass along to the pharmacists.
PPLPMDL0020000001	Cleveland	OH	44109	4/29/2011	i talked to dr about patients taking short-acting opioids,that are saying their pain isnt controlled and considering Butrans as an option,instead of refilling the short-acting opioids.dr said to remind him of insurance,commercial plans and BWC for Butrans and he will start a few patients on Butrans.i recommended Senokot-S

	Westlake	OH	44145	4/29/2011	Quick call at window, I asked if he has thought more about where Butrans might fit in. He said he didn't know, he will probably want to see where the specialist use Butrans. I reviewed managed care for Butrans and OxyContin with Claudia. -font color=blue>-cb>CHUDAKOB's query on 05/05/2011</b>-</font>How will he know where the specialist is using Butrans? Did he do the same when prescribing OxyContin? Sound like he doesn't understand the molecule or the positioning?<font color=green>-cb>HOLUBA's response on 05/09/2011</b>-</font>I agree. The first time we discussed Butrans in depth, he said he didn't know if he would use it. He does not seem to understand positioning or see any benefits at this point. I will work on it. -font color=blue>-cb>CHUDAKOB added notes on 05/11/2011</b>-</font>-OK. Glad we are on the same page!
PPLPMDL0020000001	Cleveland	OH	44109	4/29/2011	worked pm&r dept-see call notes; worked internal medicine-left Butrans initiation guide and patient information booklet and business card-for Dr. Lindheim,Dr.Ricanati,Dr.Harrington and Dr.Falck-Ytter
PPLPMDL0020000001	Westlake	OH	44145	4/29/2011	I asked her thought about Butrans 7 day dosing for her patients. She said it sounds like a good option. I asked if she would give it a try for just one patient today and she said she will try. She just forgot about it.Reminder about Butrans and OxyContin managed care coverage.
PPLPMDL0020000001	Beachwood	OH	44122	4/29/2011	Spoke with pharmacist, Elsa, who said that she has not dispensed any Butrans but said she has seen it on the shelf. Discussed Relay Health e-voucher for eligible patients. Also discussed OxyContin savings cards & reviewed eligibility for savings programs, reminding her that patients with any type of government insurance are not eligible to use the savings cards. Also gave her online pharmacist education flyer.
PPLPMDL0020000001	Beachwood	OH	44122	4/29/2011	Quick call- Saw Dr Yokiel at the window briefly. Invited him to Butrans dinner program in May. He said he was not sure if he would be able to attend as Tuesdays he is in New Philadelphia, but he may be able to come. Spoke with Vickie who said she still has enough patient education & savings cards for now. She has not heard any Butrans feedback. Also spoke with Laura who asked if she could give a copy of the Butrans dinner invitation to Dr Barrett as well.
PPLPMDL0020000001	Rocky River	OH	44116	4/29/2011	Spoke with Stan, I reviewed the Butrans medication guide and I asked for his assistance in instructing the patients on the proper use and application. We discussed steady state and that patients should wait till day 3 before titration. Reminder about OxyContin as an option and I asked if he would recommend Senokat S.
PPLPMDL0020000001	Westlake	OH	44145	4/29/2011	Spoke with Lisa, I reviewed the medication guide for Butrans and the managed care and savings program. We discussed that patients can titrate after 3 days. Reminder about OxyContin as a Q12hr option when patients might not get adequate analgesia with Butrans. I asked her to recommend Senokat S.
PPLPMDL0020000001	BEACHWOOD	OH	44122	4/29/2011	Spoke with Bill Bidwell (pharmacist) & asked him if they would be willing to open a carton of Butrans to dispense fewer than 4 patches if they received a prescription written that way. He said that he would have to check with Sandy, the pharmacy manager, to see what her thoughts were on this. He made a note to call her & told me to give him about a week & then to check back. Discussed Butrans e-voucher & OxyContin savings cards & reviewed eligibility for savings programs (ie patients with government insurance are not eligible). Also gave him online pharmacist education information.
PPLPMDL0020000001	Cleveland	OH	44109	4/29/2011	I talked to dr about why he hasnt started any patients on Butrans yet,dr said he just hasnt thought much about Butrans.i asked dr if he hears from patients,that their short-acting opioids arent controlling their pain anymore and they ask him for something different? dr said yes,he hears that from patients.i showed Dr Butrans initiation guide and said thats where he can think of Butrans.we discussed proper tapering and initiation of Butrans 5mgc or 10mcg and discussed formulary coverage.i asked dr if he could start a few patients on Butrans like we discussed to give it a fair trial? dr said yes he will do that.i talked to dr about OxyContin being an option,after Butrans 20mcg,with 7 tablet strengths and preferred coverage on medicaid and we discussed OxyContin coverage on medicare plans and commercial plans.i recommended Senokat-S
PPLPMDL0020000001	Cleveland	OH	44130	4/29/2011	Quick call- Saw Dr Kansal at the window briefly. Asked him if he thought any of his patients taking around-the-clock short-acting opioids for a chronically painful condition might like the option of a once-a-week transdermal system. He said he didn't know & then walked into a patient room. Dorothy said he has been especially busy lately. Reviewed Butrans, OxyContin, & Ryzoft savings cards with her.
PPLPMDL0020000001	Mayfield Hts	OH	44124	4/29/2011	Quick call.....invited doc to the Butrans Peer group program on May 24th. I told him that it would be a live speaker. He said he is familiar with the speaker and would try to attend. He asked me to remind him.
PPLPMDL0020000001	Cleveland	OH	44113	4/29/2011	I talked to dale,pa,about considering his patients who are taking tramadol for chronic pain but telling him the medication isnt controlling their pain,to start them on Butrans.Dale said that made sense,would consider doing so and asked which dosage strength of Butrans would patient get started on,i taking tramadol? i showed dale Butrans initiation guide,discussed tapering and initiation of Butrans 5mgc or 10mcg,focusing on tramadol patients.i asked if dale will see a few patients today or next week,where he could consider initiating Butrans? dale said yes and we discussed formulary coverage for BWC and commercial plan patients. i recommended Senokat-S
PPLPMDL0020000001	Cleveland	OH	44130	4/29/2011	Spoke with MA (Heather?) who said that neither Dr Sawnyh & Shelley were available to speak with me. Reviewed Butrans information with her & asked her if Dr Sawnyh ever attends dinner programs. She said that he does occasionally. I gave her an invitation & she said she would give it & the information I gave her to him. Also asked her to give Shelley an OxyContin formulary grid & she said she would.
PPLPMDL0020000001	Cleveland	OH	44109	4/29/2011	I talked to Erin,Pharmacist,about Butrans initiation guide and who the patients were that I am talking to physicians about,that are appropriate for Butrans.Erin said she thinks Dr.Nickels has started a few patients so they ordered Butrans and will have it in stock.we talked about importance of stocking all 3 dosage strengths of Butrans so patients arent turned away and told to return in 24hrs,Erin understands that and said they were waiting for 1st script of Butrans to come through.we discussed managed care coverage for Butrans and Erin asked about medicaid and medicare coverage so we talked about these 2 plans as it relates to Butrans and i told Erin Medicare will not cover Butrans and medicaid requires a prior authorization.i asked Erin if she would recommend Butrans,when speaking to doctors about patients taking short-acting opioids that might be telling her their pain isnt controlled with the short-acting opioids? Erin said it depends on the physician,but she would consider it
PPLPMDL0020000001	Euclid	OH	44117	5/1/2011	Spoke with doc about the Butrans indication, patient type and dosing. Reviewed how to initiate for both opioid naive as well as opioid experienced. He said he would try for opioid naive - after tramadol failures. Doc committed to prescribing for those patients with BWC.
PPLPMDL0020000001	Lakewood	OH	44107	5/2/2011	Quick call at window, I asked Dr if he could start just one new patient today on Butrans. He said that he will try to remember. I reviewed the managed care and appropriate patient types with Jamie and she agreed to help reminded him if an appropriate comes in.
PPLPMDL0020000001	Westlake	OH	44145	5/2/2011	Dr said he has just not remembered Butrans, we reviewed the initiation guide again and I asked his thoughts as to where it will fit into his practice. He said he is not sure yet. We reviewed the managed care for Butrans and the savings cards. I asked if he would try it on just one patient to start gaining g experience and he said he will consider it.
PPLPMDL0020000001	Lakewood	OH	44107	5/2/2011	I asked Megan about the Butrans movement, she did not think there have been any scripts. We reviewed the Butrans medication guide and asked for her help in teaching the patients about hoe to use Butrans. Reminder about OxyContin and Ryzoft as other options and that we are still discussing them with Drs in the area. I asked if she would recommend Senokat S and she agreed.
PPLPMDL0020000001	Lakewood	OH	44107	5/2/2011	Quick call as she returned from the hospital. I asked if she sees a place for Butrans in her practice, not just nursing homes. She said she does if managed care is covered. We reviewed the managed care and savings cards for Butrans. Reminder that OxyContin is covered on Medicaid and some Med D as another option.
PPLPMDL0020000001	Lakewood	OH	44107	5/2/2011	Quick call thru window, I was reviewing the manged care and savings cards for Butrans with Angela and Dr said he has not had a chance. I asked if he would try just one patient this week with commercial insurance and he agreed. I also reviewed the managed care and OxyContin savings cards with Angela.
PPLPMDL0020000001	Westlake	OH	44145	5/2/2011	Caught Dr while he was finishing up with a patient and he decided to give her a Butrans script right then. He reviewed the initiation guide and decided to initiate 10mcg since she was already taking 5mg vicodin. He gave her a savings card and a patient medication guide. I invited Dr to peer group and he said he would like to go and will have vice call and register him.
PPLPMDL0020000001	Lakewood	OH	44107	5/2/2011	I asked Dr how his Butrans patient is doing and he said he has not heard back yet. I asked if he would continue to start new patients so that he can gain more experience with Butrans and he said he will. Reminder about OxyContin as a Q12hr option and he said he does prescribe in the hospital. He let me know that Katie resigned and will be working at CVS minute clinic.
PPLPMDL0020000001	Lakewood	OH	44107	5/2/2011	I asked Dr if she would be seeing just one patient this week on 3-4 5mg vicodin whose pain is not well controlled? She was not sure. I asked if she would try just a few of these types of patients on Butrans and she agreed. Reminder about OxyContin as a Q12hr option and is covered on Medicaid.
PPLPMDL0020000001	Westlake	OH	44145	5/3/2011	Dr said that he still has no feedback from the one Butrans patient he was tapering down from OxyContin. We reviewed the initiation guide and he said that he would like to covert more of his BWC patients out to Butrans and he committed to doing so. He said that he is still seeing some patients who are more appropriate for OxyContin because they have severe pain and he is also performing injections for them as well. I spoke with Angela and Danielle and they are both reminding the Dr to start appropriate patients on Butrans.
PPLPMDL0020000001	Westlake	OH	44145	5/3/2011	I reminded Dr of our last conversation about prescribing Butrans after tramadol or celebrex and instead of vicodin for appropriate patients who meet the Butrans indication. I asked if he would start a patient like this this week and he agreed. We reviewed commercial patients for Butrans. Reminder that OxyContin is still a Q12hr option and he said he continues to start patients on OxyContin since they are usually on higher doses of vicodin or I asked Dr. Yee if he had initiated therapy to any of the patients we had discussed on



PPLPMDL0020000001	Akron Akron	OH OH	44320 44320	5/4/2011 5/4/2011	Misty said she initiated her first patient on Butrans and was really pleased. She said she would continue to initiate therapy to patients who are on low doses of Vicodin and Percocet ATC. I asked Dr. Bonyo if he saw a benefit to prescribing a product that provided 7 day analgesia and he said he thinks so. I reminded him that Butrans was an option for patients requiring an ATC opioid analgesic.<font color=
PPLPMDL0020000001	Rocky River	OH	44116	5/4/2011	Spoke with Sharon, we discussed the Butrans medication guide and how to instruct patients about the proper use of Butrans. We discussed the savings cards and commercial insured patients. We discussed OxyContin as an option when Butrans does not provided adequate analgesia. Reminder to recommend Senokot 5 with opioid scripts.
PPLPMDL0020000001	Fairlawn	OH	44333	5/4/2011	Spoke to Gary. Al is the other pharmacist typically there. Gary told me that because they did not see movement with Butrans they shipped it back. I explained that I had been out in the field for a short time and there was movement in the area. I told him I was surprised he had not seen movement and that was not the case for other pharmacies in the area. He said if a script came in he could get it in 24 hours.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/4/2011	Introduced Butrans and FPI. He said that this may be an option for his patients who have never been on opioids and said he would review the information.
PPLPMDL0020000001	Rocky River	OH	44116	5/4/2011	Met Dr in Dr Raslan's office. We discussed pain management topics and how to protect your practice with the tools available. Dr Raslan told him where Butrans and OxyContin fit into his practice.
PPLPMDL0020000001	Westlake	OH	44145	5/4/2011	Dr said that he likes to use Butrans as another option for vicodin. He will use Butrans in his rotation with vicodin and tramadol. After Butrans he would most likely try Duragesic or Methadone. He said prefers not to prescribes OxyContin but said he will use it when a patient has cancer. I asked if he would continue to use Butrans as an option, he said he will and it helps when I come by and remind him often.
PPLPMDL0020000001	Fairlawn	OH	44333	5/4/2011	Spoke to Gilbert who was a fill in pharmacist for the day. Jessica and Bobby were both unavailable. I discussed Butrans and explained how I was positioning it physicians. Gilbert suggested hammering home the Schedule 3 message and that it was LAO. He told me Butrans is a great product and there is a definite need in the market for it.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/4/2011	Introduced Butrans and FPI. Dr. Sassano said that the patients he had in mind would be conversions from Percocet and Vicodin to Butrans. He like that this was a single entity, LAO, schedule 3 drug. He said he already had patients in mind and committed to trying it.
PPLPMDL0020000001	Parma	OH	44129	5/4/2011	Spoke with Jackie who said that she had called her manager to make sure she can open Butrans cartons to dispense fewer than 4 patches of Butrans. She said he has still not called her back, so if she gets prescriptions in the meantime, she will open the box as she sees no issue with that. Discussed appropriate Butrans patients & patient counsel.
PPLPMDL0020000001	Akron	OH	44320	5/4/2011	I asked Dr. Duppdastni said he had not yet tried Butrans therapy. She said that it was a managed care issue. I explained our coverage on commercial insurances and BWC and she seemed surprised I asked if this made her feel more confident and she said it did. I asked if she had a clear understanding of what type of patient was ideal for therapy and she said yes but seemed uncertain. I explained the patient type using the titration guide.
PPLPMDL0020000001	Copley	OH	44321	5/4/2011	Explained what type of patient to initiate Butrans therapy to using the initiation and titration guide. I explained that for more severe patients OxyContin may be an appropriate option.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/4/2011	Re-introduced Butrans and FPI. Dr. Higley said he liked this concept and would absolutely give it a try. He was most interested in converting patients from Percocet, which I explained using the initiation and titration guide. He said he had several patients in mind and committed to trying it.
PPLPMDL0020000001	Parma	OH	44129	5/4/2011	Spoke with Sam (pharmacist) & asked what their policy was on dispensing one Butrans patch if they get a prescription written that way. Sam said he will have to check with the pharmacy manager at that location. He said that he has seen some instances where they will open a box of a product & others where they will not. Told him that it is Purdue does not mandate that the carton cannot be opened & explained that some physicians write for one patch initially to ensure correct dosage for that patient before prescribing more. He asked what the maximum dose was. I told him it is 20mcg & that we only recommend that a patient wear one patch at a time, applied every 7 days, as this is how we studied it. Discussed CII & abuse/addiction potential. Reviewed e-voucher & offered additional OxyContin savings cards but he said they have some.
PPLPMDL0020000001	Bedford	OH	44146	5/4/2011	I asked Dr Haddad what feedback he has received from his patients for whom he has prescribed Butrans. He said that one of the patients is very happy with the analgesia she is getting from Butrans. He said that the patient's insurance would not cover Butrans, so the patient had to pay out-of-pocket for it- He added that this patient is so pleased with Butrans that she told Dr Haddad that she is willing to continue to pay out-of-pocket for it. Reminded him of savings cards & discussed eligibility. He said he had forgotten but would give one to the patient when he sees her & will remember them for future patients. I asked if he had considered using Butrans for patients who call too soon for refills of their short-acting pain medications- he said he has not, but will consider using it there as he does not like to give those patients what they ask for usually. Also discussed OxyContin as a q12h option for patients beyond Butrans 20mcg. He also said he will attend the program the 24th.
PPLPMDL0020000001	Independence	OH	44131	5/4/2011	Quick call- invited Dr Trickett to Cleveland dinner program & let her know about limited attendance. She said that she would really like to go to discuss with other physicians how/where they are using Butrans, but that it is very difficult for her to make it to them depending on when they occur. I added that we also have webcasts available that may be more suitable to her schedule & gave her information on May 11th date. Discussed Butrans positioning & Dr Trickett said that she really doesn't know why she hasn't prescribed Butrans since that first prescription. She said again that she would like to discuss Butrans with other physicians to find out more about how it is being prescribed & how to transition a patient from a short-acting around-the-clock oral pain medication to a long-acting transdermal system.
PPLPMDL0020000001	Hudson	OH	44236	5/5/2011	I asked Dr Seiple why he has not yet prescribed Butrans. He said it is really going to take a very specific type of patient & will only fit in a small niche. He added that he recently spoke with a pain management specialist who indicated that in general, he does not like prescribing long-acting medications due to increased likelihood of dose escalation, although they did not discuss Butrans specifically. He also said that he does like buprenorphine as a molecule, but that "those things don't ever stick". I asked him to clarify & he said that he has found no transdermal product actual sticks like it is intended to. I showed him a Butrans demo. He said that it completely changes his opinion & that after seeing the demo & feeling it, he will prescribe Butrans. He added that he thinks I should show the demo to everyone I talk to. We reviewed managed care coverage & savings cards for those eligible. Also discussed OxyContin as an option for appropriate patients beyond Butrans 20mcg.
PPLPMDL0020000001	Hudson	OH	44236	5/5/2011	Introduced myself & Purdue's products to Dr Juliano. She said she had not heard of Butrans. Delivered 5 core messages & presented initiation guide. She said that she just had a patient who she thinks might have been a potential candidate, but since she did not know about Butrans, she ended up putting the patient on the lowest dose of fentanyl, although she wanted an alternative. She said the patient has ovarian cancer with chronic pain. The patient has difficulty swallowing & does not want any type of injection, so Dr Juliano decided a transdermal option would be best. She said had she known of Butrans, she would have rather started the patient on that, although the patient has Medicaid. Reviewed managed care & savings for eligible patients. She said she would keep Butrans in mind because she likes that it is transdermal & long-acting. Also discussed OxyContin as a long-acting option for appropriate patients beyond Butrans 20mcg.
PPLPMDL0020000001	Hudson	OH	44236	5/5/2011	I asked Dr Tosino what was holding him back from prescribing Butrans. He said he will probably never prescribe it. I told him this surprised me based on our previous conversations when he had said that he liked that Butrans is transdermal & only once every 7 days. He said he is trying to get away from "pain management". I asked him if he has patients for whom he is still willing to consider opioids as those would be the patients I would ask for him to consider. I added that Butrans is a CII opioid & like all opioids does carry abuse & addiction potential. He said he has some. I reminded him of Butrans positioning & asked what his thoughts were on using Butrans instead of short-acting around-the-clock opioids in appropriate patients. He said he prefers using long-acting medications whenever possible. Reviewed managed care coverage & savings cards & reminded him of OxyContin as a long-acting option for patients beyond Butrans 20mcg.
PPLPMDL0020000001	Cleveland	OH	44130	5/5/2011	I told Dr Diab I had an exclusive invitation for him for a Butrans webcast since he is unable to attend the dinner program this month. He said he thinks the date will work & asked me to put the information on his desk so that he could review it. Also reminded him that his commercial insurance patients can get Butrans for approximately \$15 out-of-pocket with the savings cards he has. He pointed out that he has savings cards for Butrans in the hallway with other products' savings cards as well as in his office on his filing cabinet.
PPLPMDL0020000001	Stow	OH	44224	5/5/2011	Spoke to Kim Armstrong who is pharmacy tech who works for Dr Yang, Bressi and Geiger and she said no one has written Butrans yet. She said Yang and the PAs writes most of the scripts and Bressi and Geigar do most of the procedures. Bressi does consultations. She said she and 3 other girls process 19000 prescriptions every month. She basically does the prior auths and processes the scripts. I gave her a formulary grid and told her where the Drs would use Butrans and he suggestions is to get in front of the Drs as much as I can. Gve her information and invite for the Drs. They do not write Oxycontin any more.
PPLPMDL0020000001	Akron	OH	44333	5/5/2011	Spoke with Dr. Ross and he was unsure about what A LAO, I explained steady state plasma concentrations and he seemed to better understand. I explained the patient type and he was interested in converting patients already on Vicodin or Percocet and I explained how to get patients started utilizing the initiation and titration guide.
PPLPMDL0020000001	Cleveland	OH	44130	5/5/2011	Spoke with Mindy (MA) who said that Dr Fedorko was already on his vacation, so he is not in this week & is out until Wednesday of next week. Discussed Butrans patient type with her & asked if she has any managed care issues with Butrans. She said she has not had any troubles so far. She said that she knows he has a couple patients on Butrans already & so far, coverage/cost has not been an issue, especially with the savings cards. Mindy said Dr Fedorko has a lot of patients who may benefit from Butrans & she thinks once he gets more familiar with writing it, he will prescribe it more frequently. Also discussed Ryzolt managed care & value cards.
PPLPMDL0020000001	Parma	OH	44129	5/5/2011	Dr Gigliotti said he "almost" had a Butrans patient, but that the patient elected not to take it. I asked him to clarify & elaborate by telling me more about the patient & more about why she did not want to be put on Butrans. He said that this was the first time he has seen this patient & she has lumbar stenosis & chronic pain from surgeries she had in the past. The patient's former physician had the patient taking 3-4 Vicodin per day & wanted to switch her to OxyContin, but the patient refused because she was "afraid" of it. He said that he told the patient about Butrans but she did not want to be on a patch. He said he explained to her that Butrans is not the same as Duragesic. He explained once-a-week application, but the patient said that she "wanted pills". Reminded him that patients can take supplemental analgesia if necessary, per FPI 2.4. He said the patient just refused but that he "is trying". Invited him to join May webcast, which he said he will do & marked his calendar
PPLPMDL0020000001	Akron	OH	44304	5/6/2011	Re-introduced Butrans and quickly showed him the initiation and titration guide through the window so he would have a better understanding on who to initiate therapy for. I asked him if he prescribed a lot of SAO's and he said he did.
PPLPMDL0020000001	Brooklyn	OH	44144	5/6/2011	Quick call- I asked Dr Detwiler what his thoughts were in participating in an interactive Butrans program & handed him an invitation. He said that dinners are too difficult to get to. I clarified by telling him this was a live webcast that he can do from home via computer. He said he may be able to join & said he would check into it. I pointed out the Butrans & OxyContin savings cards & reminded him to give those to appropriate patients with commercial insurance.
PPLPMDL0020000001	Parma	OH	44129	5/6/2011	Spoke with floater pharmacist & reviewed Butrans indication, dosing, & appropriate patient type/positioning. He said he has seen it on the shelves at some of the locations but has not yet dispensed it. Discussed savings via e-voucher for Butrans as well as savings cards for OxyContin. He said he would give my information to the pharmacist & pharmacy manager.
PPLPMDL0020000001	Parma	OH	44129	5/6/2011	Dr Roheny said he actually never found out what that patient's feedback was who he had put on Butrans. He asked Kathy to call her while I was there because he was curious how she was doing on it. After calling the patient, Kathy said the patient told her she could not get Butrans because her insurance wouldn't cover it. I asked questions to uncover what plan the patient had. Her primary insurance (with whom she has her prescription coverage) is through a pension but she did not say which company. Dr Roheny said this was not good feedback for me. I asked him why not try Butrans on other patients who meet the indication who have commercial insurance so that he can get true clinical experience. He said that "adds another layer" to the product & makes it one more thing he has to think about. I asked him if he thought his patients would benefit from Butrans- he did not answer. I invited him to take part in webcast & reminded him of OxyContin for appropriate patients & he walked away.
PPLPMDL0020000001	Garfield Hts	OH	44125	5/6/2011	I asked Dr Sadowski if he had identified any patients with chronically painful conditions for Butrans. He said he has not. I asked him if he thought listening to a discussion on Butrans amongst his peers & specialists might help him identify appropriate patients & he said maybe. I handed him a webcast invitation. He said that he would see if he could take part in it & would try. Spoke with Deena who asked me if Humana covered Butrans. Reviewed Butrans formulary grid & discussed coverage & savings cards for eligible patients. She also asked me if someone who was on 3 Vicodin per day plus 3 Lidoderm patches for arthritis would be a candidate for Butrans. Reviewed indication with her. She said that if the patient's insurance will not continue to cover her medications, she was going to ask Dr Sadowski to switch the patient to Butrans. Deena said that she is looking for Butrans patients because she believes it can benefit some of his patients.
PPLPMDL0020000001					

	Beachwood	OH	44122	5/6/2011	Spoke with Donnie (nurse) who said that Dr Warren will not be in during the afternoons this month as he will be over at the hospital instead. He also said that because of this, his mornings will be so busy that I should avoid coming to see him until next month. Discussed Butrans appropriate patient & savings cards for those eligible. He said Dr Warren has not yet used Butrans to his knowledge but was not sure why. Asked him to give Butrans information & webcast invitation to Dr Warren & he said he would.
PPLPMDL0020000001	Lakewood	OH	44107	5/6/2011	Spoke with Pam, she said she is surprised that more doctors are not prescribing Butrans instead of vicodin around the clock. She feels it is a great option. We discussed the initiating guide and where OxyContin may be an option when 20mcg Butrans may not provide adequate analgesia. We discussed the laxative lines for opioid induced constipation.
PPLPMDL0020000001	Lakewood	OH	44107	5/6/2011	Caught Dr at Lakewood office. I let him know he has Butrans savings cards here and gave him the initiation guide.
PPLPMDL0020000001	Lakewood	OH	44107	5/6/2011	Quick call, I asked dr if he has patients coming in today who are on vicodin around the clock. I told him those may be appropriate Butrans patients and asked him to try a few patients. He agreed. I reviewed managed care for Butrans with Kim, and we discussed OxyContin managed care as well.
PPLPMDL0020000001	Akron	OH	44319	5/6/2011	Re-introduced Butrans and the FPI. I asked him he felt like there was a place for Butrans in his practice and he said he wasn't sure. I asked if he felt comfortable prescribing LAO's and he said he did but wanted to review the information I was leaving before committing to starting a patient. I asked if I could come back next week and he agreed.
PPLPMDL0020000001	Akron	OH	44312	5/6/2011	Asked Dr. Manning through the window if he has had a chance to review any of the Butrans material that I had left. He said he briefly reviewed it and would look at it again. No new information learned.
PPLPMDL0020000001	Brooklyn	OH	44144	5/6/2011	Quick call- I asked Dr Miguel his thoughts on participating in an interactive Butrans webcast next week. He said he would look at his calendar & asked me to leave the information with Tiffanie.
PPLPMDL0020000001	Lakewood	OH	44107	5/6/2011	I asked Dr if he has patients on vicodin around the clock that could benefit from once a week Butrans. He said he will give it a try.
PPLPMDL0020000001	Westlake	OH	44145	5/6/2011	Quick call at window, Dr said she had thought of Butrans for a patient but they have Med D and she thinks it was too expensive. She thinks that Butrans would be great for older patients. I discussed the managed care where patients will have the best access to Butrans. I spoke with Linda about the savings program.
PPLPMDL0020000001	Akron	OH	44333	5/6/2011	I asked Dr. Shah if he was writing for refills and he said he was. He said that he was getting it approved on Medicaid and had yet to have to take a patient off Butrans. He said that he was very happy with Butrans therapy.
PPLPMDL0020000001	Uniontown	OH	44685	5/6/2011	Introduced Butrans to Dr. Stetler. He said he was prescribing low dose hydrocodone and thought Butrans was a good step therapy prior to using OxyContin. He said he thought there was a definite need for Butrans in his practice-Ce and committed to using.
PPLPMDL0020000001	Lakewood	OH	44107	5/6/2011	Dr said that he started a patient on Butrans, he said it was a patient who was taking a few vicodin a day, but has chronic arthritis pain. He said she does not like to take the vicodin and she waits until she has trouble walking before she will take a vicodin. He started her on 5mcg of Butrans. We discussed initiation and titration of Butrans and managed care. We discussed OxyContin as an option when Butrans may not provide adequate analgesia.
	Beachwood	OH	44122	5/6/2011	Dr Tabbaa said he has a patient on Butrans 5mcg who has complained of her Butrans not sticking for 7 days. He also said he has titrated her up to 10mcg. He added that the patient is happy with the analgesic results from Butrans & only has had issues with the patch not sticking for a week. Discussed ability to tape edges with first aid tape or cover with Bioclusior or Tegaderm. Jim said he gave the patient such covering today when they saw her. He added that they prescribed Butrans for 2 additional patients today. Dr Tabbaa said that he is getting good results with analgesia for his patients with Butrans. I asked how frequently he has to titrate. He said occasionally he titrates a patient to 10mcg but has not needed to put someone on 20mcg. He added that some patients do use supplemental analgesia with Butrans. Discussed managed care for Butrans & OxyContin & reviewed savings cards for eligible patients. Jim said he submitted a prior authorization for a Med D patient for Butrans today.
PPLPMDL0020000001	Akron	OH	44312	5/6/2011	Talked to the pharmacist and introduced Butrans. I explained the message I was delivering to physicians and explained steady state.
PPLPMDL0020000001	Shaker Heights	OH	44122	5/6/2011	Spoke with Dominique (technician) as all pharmacists were assisting customers & were "backed up". Reviewed Butrans positioning & went through patient information booklet. I asked if they have any problems opening a package to dispense fewer than 4 patches- she said this should not be an issue as they do this for various other products. Also discussed e-voucher for Butrans & OxyContin savings cards.
PPLPMDL0020000001	Akron	OH	44333	5/9/2011	I asked Dr. Griffiths if she felt more comfortable prescribing Butrans since we chatted last and identified specific patients and she said she did. She said she really liked the idea behind Butrans and wasn't writing because of pure habit.
PPLPMDL0020000001	Parma	OH	44129	5/9/2011	Quick call- caught Dr Taylor at the window. She said that she forgot about Butrans as she has had a lot on her mind. Reminded her of appropriate patient type that we had talked about & that she had agreed to try it on.
PPLPMDL0020000001	Cleveland	OH	44114	5/9/2011	Spoke with Mary & reviewed savings cards for Butrans & OxyContin.
PPLPMDL0020000001	Cleveland	OH	44109	5/9/2011	I talked to Dave, Pharmacist, about doctors in area writing Butrans and appropriate patients to initiate therapy with Butrans by showing Butrans initiation guide. we discussed proper tapering of short-acting opioids and initiation of Butrans 5mcg or 10mcg. Dave and I discussed managed care coverage and Butrans patient savings cards. I recommended Senokot-S.
	Cleveland	OH	44109	5/9/2011	I talked to dr about considering Butrans as an option for patients taking short-acting tramadol, vicodin or percocet, that are asking him for something different because their short-acting opioids aren't controlling their pain. dr said he hasn't really thought about Butrans. I asked dr what benefits he even saw in Butrans for his patients? dr said he likes Butrans is a patch and dosed once a week but he has so much Medicaid and won't do the prior authorization for Butrans so he's not sure about it. I asked dr how much commercial and BWC plans he has here? dr said probably 50%, so we discussed Butrans being an option for these patients and I showed dr Butrans initiation guide, discussing proper tapering and initiation of Butrans. I asked dr if he had 2 patients, to be seen this week, that he could discuss Butrans with and start them? dr said he wasn't sure but would keep Butrans in mind. we discussed OxyContin formulary coverage, appropriate patients and conversion guide and I recommended Senokot-S.
PPLPMDL0020000001	Cleveland	OH	44109	5/9/2011	I talked to dr about Butrans being an option for her patients that are telling her their short-acting opioids aren't controlling their pain and they are asking for something different. dr said she likes that Butrans is a patch and dosed once a week, but she really hasn't had any patients ask for anything different lately. dr said she's also concerned with Butrans' formulary coverage and asked about Medicaid coverage. we discussed Medicaid, BWC and commercial plans coverage for Butrans. I asked dr to think of 2 patients who have been calling every month sooner than they should for refills, perhaps thinking a long-acting opioid could be an option for them. dr agreed and said she would see if a few patients would be interested in starting Butrans. I talked to dr about appropriate patients for OxyContin, formulary coverage, savings cards and asked dr to think of OxyContin for 2 patients that she feels are appropriate. dr agreed. I recommended Senokot-S.
PPLPMDL0020000001	Cleveland	OH	44109	5/9/2011	I talked to dr about Butrans 5 core messages, FPI, initiation guide and formulary coverage. dr said she likes that Butrans is a patch and is dosed once a week as she does have patients with moderate to severe chronic pain that don't always like taking short-acting opioids around the clock so this could be an option. dr said her only concern is insurance coverage as she has a lot of Medicaid and cash paying patients. I asked dr if she had any commercial plan patients? dr said a small percentage and wanted to know what the coverage for Butrans was on Medicaid? we discussed Medicaid and commercial plan insurance coverage for Butrans. I asked dr if she could think of 2 patients who meet Butrans indication that are telling her their pain isn't controlled with short-acting opioids and start them on Butrans? dr said she'll think about it, as this is a new medication and she needs to read more of the Butrans FPI. we discussed OxyContin formulary coverage and appropriate patients. recommended Senokot-S.
PPLPMDL0020000001	Akron	OH	44333	5/9/2011	I asked Dr. Brown what types of patients she had initiated therapy to. She said that she had initiated therapy to 3 patients all who were previously on Vicodin. She said that she liked converting those patients to a LAO and would continue to do so as she got busier.
PPLPMDL0020000001	Mogadore	OH	44260	5/9/2011	Joe said he has not started anyone on Butrans, he said he likes the medication he just has to find the right patient. I asked who is the right patient and he said probably someone who is taking Vicodin or who he would normally put on Vicodin. HE said he just needs to remember it. Then Dr Cain told him he started a patient and the patient is doing well. Dr Cain said it is great for those people who call in refill after refill after refill. HE mentioned something about the nurse practitioner formulary and I asked why can't he write it under the Dr and he said that is true.
PPLPMDL0020000001	Cleveland	OH	44125	5/9/2011	Spoke with pharmacist, Christine (pharmacist) & reviewed Butrans e-voucher & OxyContin savings cards & eligibility requirements. Also asked her what insurance plans she sees most of in this area. She said a lot of Medical Mutual, Aetna, & Caremark. I asked about Medicare/Medicaid volume. She said there is quite a bit of Medicaid & also a good amount of Medicare. She said that it is probably close to 50/50 with commercial plans/government.
PPLPMDL0020000001	Cleveland	OH	44109	5/9/2011	I talked to dr about Butrans being an option for his patients taking short-acting tramadol, but telling him their pain isn't controlled with the short-acting and asking for something different. dr said he hasn't had any patients ask for something different but likes Butrans being a patch, dosed once a week and thinks some of his patients may be interested in it but he hasn't seen them recently. dr asked about managed care coverage so we discussed that and I asked dr to think of 2 patients, like we discussed, to start on Butrans? dr agreed and I recommended Senokot-S.
PPLPMDL0020000001	Cleveland	OH	44109	5/9/2011	dr said he hasn't started any patients on Butrans yet as he hasn't seen any patients that he feels are appropriate, so I showed dr Butrans initiation guide and asked dr if he ever hears from patients that their short-acting opioids aren't controlling their pain? dr said sometimes but usually his patients like taking their pills for their chronic pain. I asked dr to think of 2 patients, who are telling him their short-acting opioids aren't controlling their pain, discuss Butrans with them and start them on Butrans. dr asked about insurance coverage for Medicaid as he couldn't remember, so we talked about Medicaid, BWC and commercial plan coverage for Butrans and dr said he would do his best to remember Butrans and start a few patients. I recommended Senokot-S.
PPLPMDL0020000001	Cleveland	OH	44109	5/9/2011	worked pm&R dept-see call notes, worked rheumatology dept-see call notes and worked internal medicine -see call notes
PPLPMDL0020000001	Bedford	OH	44146	5/9/2011	Dr Moufawad said he could not stop because he was running so far behind. He did pause before walking into the patient room to say that "Butrans is doing fine". He also added that he is going to do the web conference in June that I told him about. Reviewed Butrans formulary with Amber (MA). Also spoke with Sandy (MA & office manager) who said that several staff members have quit lately, so they are busier than ever, trying to pick up that slack. Right now, they are supplementing staff with temporary employees.
PPLPMDL0020000001	Cleveland	OH	44103	5/9/2011	I talked to Amol, Pharmacist, about Butrans stocking, scripts for Butrans and who's prescribing. we discussed Butrans 5 core messages and I showed Amol Butrans initiation guide. we discussed electronic voucher program at Rite Aid for Butrans scripts and we discussed OxyContin stocking and who's prescribing OxyContin and I gave Amol OxyContin conversion guide. we discussed managed care coverage for OxyContin and I recommended Senokot-S.
PPLPMDL0020000001	Akron	OH	44333	5/9/2011	Spoke to Dr. Shah about his success with Butrans, he said that he liked that patients were more compliant with Butrans and that it was a LAO. He said that some of his Medicare patients were complaining about cost. I explained our coverage on both BWC and private insurance plans.
PPLPMDL0020000001	Mogadore	OH	44260	5/9/2011	Dr said he wrote Butrans in 3 patients one got denied, Aetna. He said he understands the employee carve outs. HE said he likes this in his patients who are taking Vicodin and he can get them off of the Vicodin. He asked how it works in fibromyalgia and I told him we are indicated for moderate to severe chronic pain and that we were studied in patients who are opioid naive and opioid experienced with chronic pain around the clock. HE said he wanted to start more patients on Butrans, especially those who just call for refills all of the time. HE asked about Summa care and I showed him formulary grid. Discussed Oxycontin in patients taking higher doses of Oxycontin and managed care coverage as well.
PPLPMDL0020000001	Mogadore	OH	44260	5/9/2011	Introduced Butrans to Dr. reviewed FPI, indication, dosing and initiation and titration, boxed warning and 5 core messages. He asked how it was covered and I reviewed managed care and savings cards. I asked him if he sees many patients like that he and said yes, he is very behind, he will review the information, gave him titration guide and patient education.
PPLPMDL0020000001	Solon	OH	44139	5/9/2011	Dr Zaidi said he has not yet prescribed Butrans. I asked him why not. He said he wants to hear from other physicians who are using Butrans so that he can get their feedback. I invited him to the May 24 program & mentioned a webcast as an alternate. He said he would try to attend but was not sure. He asked who is prescribing Butrans. I told him that practitioners of various different specialties are prescribing Butrans. He asked me what type of feedback I am getting. I asked him if he has talked to anyone yet about Butrans. He said he has not. He asked how long Butrans has been available & I told him we launched in January. I encouraged him to attend the program so that he may have the opportunity to discuss Butrans with other key physicians & mentioned limited attendance. Reviewed managed care & savings cards. He said he might be able to find one or two patients to prescribe Butrans for before he sees me. I reminded him that he has said this before. Reviewed OxyContin savings cards.
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	Cleveland	OH	44109	5/9/2011	i talked to dr about Butrans being an option for his patients that are taking tramadol around the clock for their moderate to severe chronic pain and asking for something different because their short-acting tramadol isnt controlling their pain.dr said he has a few patients in mind,that he believes can benefit from Butrans's once weekly dosing and he likes that Butrans is transdermal,but he hasnt seen these patients yet.i asked dr if patients call in to office for refills earlier than they should,for their short-acting tramadol,would dr consider Butrans,if patients meet indication and are appropriate? dr said yes he would so i showed dr Butrans initiation guide and we discussed proper tapering and initiation of Butrans.i asked dr to think of 2 patients this week,to start on Butrans and let me know how that goes next time i see him,dr said he'll keep Butrans in mind.we discussed managed care coverage and i recommended Senokot-5
PPLPMDL0020000001	Mogadore	OH	44260	5/9/2011	Dr said she has not written Butrans, she has forgotten. I asked where she would write Butrans and she said she was not sure. We reviewed information and I asked her when patients are failing on NSAIDS where does she go. She said usually Tramadol. I then asked her when she gets calls from patients saying their Vicodin is not working what does she do and she said that is when she refers to pain management. I said then when she has a patient failing on NSAID or Tramadol, instead of going to Vicodin would she write Butrans if they are chronic and she said she would try. Reviewed managed care.
PPLPMDL0020000001	Cleveland	OH	44104	5/9/2011	i talked to dr about Butrans being an option for his patients that are taking vicodin or percocet,but asking dr for something different or saying their short-acting opioids arent controlling their pain.dr said he hasnt thought of Butrans as he's so frustrated with his pain patients and its easier to just fill their short-acting opioids instead of talking to them about a new medication.i asked dr to think of 2 patients that are calling in earlier for refills,if patients are appropriate for Butrans,to consider starting them on Butrans.i showed dr Butrans initiation guide,discussed tapering and initiation of Butrans.i asked dr to think of these 2 patients with BWC coverage.i
PPLPMDL0020000001	Akron	OH	44333	5/9/2011	I asked Linda about her success with Butrans and she reported that she had put a patient on the 20 mcg patch and that the patient reported it was only working a little. I explained that patients could remain on their SA therapy for break through pain and that steady state is not reached for 3 days. She concieted my point and asked if we could talk more next Monday.
PPLPMDL0020000001	Maple Heights	OH	44137	5/9/2011	Spoke with Dawn (technician) who said Jim was too busy to speak to me today. I asked her if she could recommend a day/time when their pharmacist may be available for a minute. She said he is always busy. Gave her information on Butrans savings & discussed savings cards for Butrans & OxyContin. She said she would let Jim know.
	Cleveland	OH	44109	5/9/2011	i talked to dr about Butrans 5 core messages, fpi,initiation guide and formulary coverage.dr said she likes that Butrans is a once weekly dosing and transdermal delivery,instead of her patients having to take short-acting opioids around the clock as some patients dont like this regimen.i asked dr if she could think of 2 patients taking percocet that arent controlled and have asked her for something different? dr said yes,patients ask for more pills,increases in dosage strengths and often call in earlier requesting refills earlier than they should.i showed dr Butrans initiation guide,discussed proper tapering and initiation of Butrans.dr said that seemed easy but what was the coverage on Medicaid?we discussed formulary coverage for Butrans. we talked about OxyContin being an appropriate option for patients,showed OxyContin conversion guide and discussed formulary coverage.i
PPLPMDL0020000001	Cleveland	OH	44122	5/9/2011	Spoke with Dr Goldner's MA who said that Dr Goldner was too busy to meet with me. She said that as a rule, he does not see reps. Introduced Purdue's products & let her know that he has likely not had a full discussion about Butrans as it was just launched in January. I asked if I could speak with his nurse (Stacey), but the MA told me that she was too busy to see me as well. She said she would give Dr Goldner the information I left.
PPLPMDL0020000001	Fairlawn Cleveland	OH OH	44333 44109	5/9/2011 5/9/2011	I asked Dr Lefkowitz if he has reviewed the Butrans information I had left. He said he had. I asked if he had any questions and he said no. No new info learned. i talked to dr about considering Butrans for her patients taking tramadol around the clock for their moderate to severe chronic pain that arent controlled and asking her for something different.dr said she hasnt had any patients ask for anything different so she hasnt thought of Butrans.i asked dr if patients ever call in to her office asking for refills earlier,each month,than they should,so perhaps the short-acting tramadol isnt lasting long enough? dr said yes,that does happen,so i asked dr to consider Butrans for those patients,instead of refilling their short-acting tramadol.dr said that made sense and would consider Butrans.i showed dr Butrans initiation guide to discuss proper tapering of short-acting tramadol and initiation of Butrans. we discussed managed care coverage for Butrans.i recommended Senokot-5
PPLPMDL0020000001	Parma	OH	44129	5/9/2011	Spoke briefly with Dr Ortega who said that he has not yet gotten any feedback from patients on Butrans. He said this is probably a good sign as patients usually call if they have a problem with a medication. I asked him how soon he typically has patients follow up. He said usually a month. I asked him if he needs to get their feedback before prescribing Butrans for more patients. He said no & that he will continue to look for more Butrans.
PPLPMDL0020000001	Fairlawn	OH	44333	5/9/2011	Spoke with Jessica who told me that Dr. Lefkowitz was still prescribing a lot of OxyContin and Dr. Shah has been initiating therapy with Butrans. I explained the patient education guide and steady state. She told me that a Medicare patient was able to get a Rx filled for 25 dollars.
PPLPMDL0020000001	Parma	OH	44129	5/9/2011	I spoke with Ellie (nurse) to follow-up on our previous Butrans discussion. She said that Dr Salewski was not interested in hearing about Butrans right now. I asked her if she knew the reason. She said they have been so busy lately & have so many patients scheduled, that Dr Salewski had to cancel his vacation so that they can get caught up. She said it is not anything against Butrans. It is just bad timing. She said they are not scheduling anything until after July & asked me to follow-up with her as that time grew closer so that we can schedule something. Reminded her of Butrans key points & patient type & asked her to call me if anything opens up in the mean time.
PPLPMDL0020000001	Mogadore	OH	44260	5/9/2011	Dr said he has forgotten about Butrans, he said he does remember it is for moderate to severe chronic pain and that it is long acting patch. I asked what type of patient would he use it in showing him the 2 patient types and he said probably both, he sees both patient types and that it would be nice on one hand to get patients off of Vicodin and on the other hand to not start them on it. He asked about coverage and we reviewed that. I asked him when he has a patient who calls in and they are on a NSAID and are chronic, and it is time for an opioid where does he go and he said usually Tramdol. I said that is a good spot for Butrans and he agreed. HE said he will try it.
PPLPMDL0020000001	Cleveland	OH	44106	5/10/2011	Rmeinded him if patient is on higher doses of Vicodin they may be more appropriate for Oxycontin. dr said she hasnt started anyone on Butrans because she really doesnt have that many patients on narcotics.i showed dr Butrans initiation guide and asked if she had patients taking tylenol with codeine or tramadol,for their chronic pain? dr said yes,she does but those patients are controlled on their short-acting opioids and she hasnt had anyone ask her for something different.dr said she likes that Butrans is a patch and dosed once a week.dr said if patients are asking her for more pills or saying their short-acting opioids arent controlling their pain,she refers to pain management specialists as she doesnt want to manage these patients. dr said she's been in practice 12years and has had too many patients try to get pills and not really have chronic pain and she knows that ruins it for the patients who truly are in chronic pain,but she doesnt want to manage patients pain levels.i asked dr if she could think of 1 patient where Butrans could be an option and dr said she may have 1.
PPLPMDL0020000001	Parma	OH	44129	5/10/2011	Quick call- Saw Dr Rossi briefly at the window. Handed back Butrans formulary grid & reviewed managed care coverage & savings cards for eligible patients. She said she had patients to see. Spoke with Britney & reviewed Butrans seven days buprenorphine delivery in one application & appropriate patient type. Also scheduled next available lunch.
PPLPMDL0020000001	Cleveland	OH	44113	5/10/2011	i talked to dr about Butrans 5 core messages,Butrans fpi,initiation guide to discuss appropriate patients,tapering of short-acting opioids and initiation of Butrans. we discussed managed care coverage for Butrans and Butrans patient savings cards.i asked dr when he felt a long-acting opioid was appropriate? dr said when patients start asking for more pills or a higher dosage strength,he'll consider a long-acting opioid.dr said he liked that Butrans was a once weekly dosing option and was a patch,as he has some patients who dont like taking pills around the clock for their chronic pain so a pach would be a nice option for them.i asked dr if he could think of 2 patients that have commercial insurance,that are like we discussed and start them on Butrans? dr said yes,he'll have to think about a couple of patients and when they are coming in to office.i recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44195	5/10/2011	i talked to dr about Butrans being an option for his patients taking Percocet that are coming to him saying their pain isnt controlled with Percocet and are asking for something else and i showed dr Butrans initiation guide with tapering and initiation information.dr said he does have patients ask for more pills and sometimes for something completely different,so he'll think of Butrans for those patients.dr asked about insurance coverage so i showed dr Butrans formulary grid and we discussed Butrans patient savings cards for commercial plan patients. we talked about OxyContin formulary coverage and appropriate patients and i gave dr OxyContin conversion guide.i recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44113	5/10/2011	i talked to dr about his patients taking vicodin that are asking him for something different or calling in sooner each month for refills,dr said that does happen and he could think of Butrans there.dr said he couldnt remember insurance coverage for medicaid as thats the majority of his patients.i asked if dr had any commercial plan patients taking Vicodin for their chronic pain? dr said yes he had a few patients with commercial insurance,so we talked about Butrans formulary coverage on commercial plans and Butrans patient savings cards.dr couldnt remember tapering and initiating dosage strengths so i showed dr Butrans initiation guide noting tapering of vicodin and initiating at Butrans 5mcg or 10mcg.i asked dr if he had 2 patients this week that he thinks would be appropriate for Butrans? dr said he might and he'll think about Butrans. we discussed OxyContin for appropriate patients,showed OxyContin visual aid,conversion guide and formulary grid and asked dr to consider OxyContin
PPLPMDL0020000001	Cleveland Cleveland	OH OH	44113 44195	5/10/2011 5/10/2011	worked several physician offices here and out-patient pharmacy worked pm&r-left Butrans fpi,initiation guide,formulary grid and patient information booklet for Dr.Schaefer and Dr.Capulong.i left OxyContin fpi,formulary grid and conversion guide for both doctors and senokot-5 protocol pad for each doctor; worked rheumatology-left Butrans fpi,initiation guide,patient information booklet and formulary grid for Dr.Calabrese,Dr.Chatterjee and Patty Paczos,PA;left doctors OxyContin fpi,conversion guide and formulary grid. worked anesthesia/pain management dept-see call notes on Dr.Cheng,Dr.Syed and Dr.Mekhaill. left Butrans fpi,initiation guide and formulary grid for Dr.Frost as i couldnt see him today.
PPLPMDL0020000001	Brooklyn Westlake	OH OH	44144 44145	5/10/2011 5/10/2011	Quick call- Saw Dr Deeb up at the window. Reviewed Butrans indication & delivery system. He waved & said to come back another time. Audrey (MA) said to check with her in a few weeks for scheduling. i asked Dr if he has written for vicodin this week. He said he has and we discussed that some of those patients may have been Butrans patients if they meet the indication and have chronic pain. Reminder that OxyContin is still an option when patients are taking more than 40mg per day of vicodin.
PPLPMDL0020000001	Brooklyn	OH	44144	5/10/2011	Spoke with Carol (MA) & Wendy (nurse) & reviewed Butrans indication, delivery system, managed care information, & savings cards. They said Dr Hilton was not scheduling as many lunches as she did prior, but they allowed me to schedule one. I asked who takes calls from patients who are requesting refills on pain medications too soon & they said they both do.
PPLPMDL0020000001	Parma	OH	44129	5/10/2011	Quick call- Jen said that she had just heard that Dr Nickels had prescribed Butrans for a few patients. She said that she is waiting to see what he says about it. Spoke with Dawn who said that all the practitioners are meeting tomorrow (as they do every 3 months) & that one of the topics on the meeting schedule is Butrans. She said that Dr Nickels will share his Butrans feedback at that point. She said to come back next week or the following week & she would tell me what was said at the meeting. I asked Dawn if Jen is still prescribing Ryzoft & Dawn said that she just wrote two prescriptions for Ryzoft today.
PPLPMDL0020000001	Westlake	OH	44145	5/10/2011	Spoke with Juan, he said he thinks Dr has tried a few patients on Butrans but has not heard a lot of feedback yet. He said he feels the Dr is just stuck in his ways and is hesitant to try something new. Juan said he is reminding the Dr about Butrans as an option.
PPLPMDL0020000001	Barberton	OH	44203	5/10/2011	I asked Dr. Patel if he was having success with the patients he was initiating Butrans therapy to and he said he was. He said that the majority of patients were opioid experienced and were now on 10 mcgs. I reminded him that Butrans had been studied in patients who were opioid experienced and asked if he felt confident starting those patients who were appropriate on Butrans and he said yes and knew to start all of those patients on 5 mcgs.
PPLPMDL0020000001	Westlake	OH	44145	5/10/2011	I asked Dr if he would start another new patient on Butrans today. He said he would and he's been getting good feedback from patients so far regarding Butrans. Reminder about OxyContin as an option and he agreed to prescribe when patients have pain associated with cancer.
PPLPMDL0020000001	Parma	OH	44134	5/10/2011	Spoke with Binka (MA) & reviewed Butrans dosing/delivery system & also went over patient information booklets. She said she does not know if Dr Scanlon has been prescribing Butrans & said that they have savings cards still for both Butrans & OxyContin. Reviewed eligibility for savings card usage.<font color=blue><b>CHUDAKOB's query on 05/19/2011</b></font>One question you might begin finding out is what her specific role is in the office. How does she interact with the patients or the physician relating to prescriptions?<font color=green><b>APSEGAS's response on 05/23/2011</b></font>That is a good idea. I am trying to nudge my way into that office at both locations by increasing my presence. so I will try to talk more to her during my next visit. Thank you for the suggestion.<font color=blue><b>CHUDAKOB added notes on 05/24/2011</b></font>Great! I will be interested to hear how this works out.
PPLPMDL0020000001	Brooklyn	OH	44130	5/10/2011	Spoke with Renee (pharmacy manager) & reviewed e-voucher for Butrans & OxyContin savings cards. Discussed eligibility requirements for savings programs. I asked Renee what managed care plans she sees most. She said that they see a lot of Medicaid & Medicare at this location. She said that with commercial insurance, they see mostly Medical Mutual, Express Scrpts, & PCS. I also asked if she has seen any patients on the 20mcg dose of Butrans. She said she knows of only one of their customers on Butrans & she said she is on the 10mcg dose.
PPLPMDL0020000001					

	Independence	OH	44131	5/10/2011	I asked Dr Sundaram what feedback the patient who he had put on Butrans had given him. He said that the patient "wasn't too happy with it". I asked him to clarify. He said the patient said it was not working very well at controlling his pain. I asked Dr Sundaram what he did for that patient & he said he titrated the patient to the 10mcg dose. Dr Sundaram said he just put a patient on Butrans earlier today as well. I asked him to describe that patient- he said she has chronic back pain & had been put on Duragesic before but that it was "too strong" for her. Discussed titration ability every 3 days to a maximum of 20mcg. Also discussed OxyContin as an option for patients beyond that 20mcg/hr dose of Butrans. Also reviewed managed care coverage.<font color=blue><b>CHUDAKOB's query on 05/19/2011</b></font>-It sounds like this may have been a titration issue. What do you think about this situation?<font color=green><b>APSEGAS's response on 05/23/2011</b></font>-I agree. When I asked him what he did for the patient, I was happy to hear that he titrated him up rather than discontinuing his Butrans. I submitted it as an AE because he said the patient said it was not working, even though it was probably just a dosage issue, just to be on the safe side. This is something (titration) I will address with him again at our lunch this week to make sure he understands this well.<font color=blue><b>CHUDAKOB added notes on 05/24/2011</b></font>-Thank you Ashleigh!
PPLPMDL0020000001	Cleveland	OH	44106	5/10/2011	I talked to Matthew,Pharmacist,about Butrans 5 core messages,initiation guide and doctors prescribing Butrans at the Cleveland clinic.Matthew asked for some Butrans patient information booklets and I left a few with the application dvd/booklet.I asked Matthew,based on the scripts he's seeing get filled for Butrans,what clinical benefits did he see in Butrans,for their patients? Matthew said the once weekly dosing and Butrans being a patch were the 2 main benefits he saw and doctors are seeing success with patients who have started on Butrans.Matthew said to stop back next week and see Steve,Pharmacy Manager,to be sure he doesn't have any questions about Butrans because he wasn't here today.I recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44195	5/10/2011	I talked to curt,pharmacy manager,about Butrans stocking,initiation guide to discuss proper tapering and initiation of Butrans,formulary coverage and Butrans patient savings cards and we talked about doctors prescribing Butrans at the clinic.I left Curt Butrans patient information booklets and application dvd/booklets and senokot-S protocol pads.I recommended Senokot-S
PPLPMDL0020000001	North Olmsted	OH	44070	5/10/2011	Spoke with Ken, We discussed Butrans 5 key messages and I asked his thoughts. He said the thinks it could be a good option and they have tons of patients on short acting opioids around the clock who should be on long acting. we reviewed the initiation guide for Butrans and how to initiate patients based on their current amount of opioid. Reminder about OxyContin as a Q12hr option and asked if him to recommend Senokot S.
PPLPMDL0020000001	Brooklyn	OH	44144	5/10/2011	Spoke with technician as the pharmacist was too busy to see me. Reviewed Butrans savings, including going to Butrans.com to print savings cards for patients as needed, & also reviewed OxyContin savings cards. Discussed eligibility for these savings programs (ie no government insurance).
PPLPMDL0020000001	Cleveland	OH	44195	5/10/2011	I talked to dr about Butrans being an option for his patients taking short-acting tramadol who are telling him their pain isnt controlled and showed dr Butrans initiation guide to discuss proper tapering and initiation of Butrans.dr said he usually waits awhile before he prescribes a new medication and Butrans is still new to him.dr said if he at least had 2 patients in mind that have asked him for something else because their short-acting tramadol wasn't controlling their pain? dr said yes,sometimes patients will ask for a different medication,so i asked dr to think of 2 patients to start on Butrans.dr said he'll think about it and asked about managed care coverage,so i showed dr Butrans formulary grid and talked about Butrans patient savings cards for commercial plan patients.
PPLPMDL0020000001	Cleveland	OH	44195	5/11/2011	I talked to Kathy,PA,about appropriate patients to start on Butrans by showing Butrans initiation guide and we talked about patients taking tramadol for their chronic pain that meet Butrans indication but are asking for something different.Kathy said dr.mintzer and dr.mekhal haven't started anyone on Butrans and she's not sure why dr.mintzer hasn't as she has stated that Butrans once weekly dosing and Butrans being a patch are 2 benefits she see's for her patients. i asked Kathy if she would recommend Butrans,for appropriate patients based on our discussion today,to both doctors and Kathy said yes.we talked about insurance coverage for Butrans use of Butrans patient savings cards for commercial plan patients.I recommended Senokot-S
PPLPMDL0020000001	Broadview Heights	OH	44147	5/11/2011	Dr Samuel said that he had a patient for whom he prescribed Butrans who experienced hyperhydrosis & application site skin rash & redness. He said that he gave the patient hydrocortizone ointment for the skin reaction & is not sure if the hyperhydrosis is from Butrans or not. He said the patient is continuing on Butrans for now. He said all the patient he has started on Butrans have been opioid-naive because he feels these patients offer the best opportunity for success with the product. He said he is still trying to figure out what to use for breakthrough-He said he likes using long-acting medications whenever possible. Discussed OxyContin as an option for patients beyond Butrans 20mcg. He said that he thinks OxyContin is a great medication for appropriate patients & that it has an unfortunate negative stigma. Spoke with Margaret & reviewed Butrans, managed care, savings cards, & patient information booklets. She does prior authorizations, calls from
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PPLPMDL0020000001	Cleveland	OH	44114	5/11/2011	I talked to John,PA,about Butrans being an appropriate option for patients taking short-acting opioids that are telling him their pain isnt controlled with the short-acting opioids or they are simply asking for something different.John said both dr.katz and dr.marshall are starting patients on Butrans and they are seeing good clinical results and no complaints from patients.i asked John to continue recommending Butrans as an option for appropriate patients and showed Butrans initiation guide for our discussion.we talked about Butrans formulary coverage.i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44114	5/11/2011	I talked to dr about patients she has started on Butrans and why she has chosen Butrans,dr said patients that she's seeing for follow-up appointments,that she started on Butrans,are doing great and no complaints and she's seeing improvements in patients pain levels so she's pleased with her choice of starting patients on Butrans.i showed dr Butrans initiation guide,discussed more appropriate patients,for dr to continue starting on Butrans and we discussed proper tapering of short-acting opioids and initiating Butrans at the appropriate dosage strength.we discussed Butrans formulary coverage and use of Butrans patient savings cards.we discussed OxyContin being an appropriate option for patients,formulary coverage and savings cards.i recommended Senokot-S
PPLPMDL0020000001	Akron	OH	44320	5/11/2011	I asked Misty about the success she has had with Butrans she said that she had not heard back from the first patient and had initiated therapy to another patient. I asked her if she felt confident prescribing Butrans instead of low dose hydrocodone and she agreed she absolutely did.
PPLPMDL0020000001	Warrensville Heights	OH	44122	5/11/2011	I asked Dr Brooks to tell me about the patients he has put on Butrans so far. He said he has 5 patients on Butrans & has had follow-up with one of them so far. He said that patient is doing well on Butrans so far with no complaints. He did not recall what dose he had put the patient on. He said that all the patients he has tried on it have already been on narcotics of some sort. I asked if he has considered using Butrans for patients who are not currently on opioids but for whom he would typically start on a short-acting around-the-clock medication. He said he will start using Butrans in that type of patient. He also added that he does not refer to pain management, but rather treats those patients himself. Reminded him of commercial insurance coverage & savings cards. He said to give these to Beth or Jaz, his medical assistants. Discussed OxyContin as an option for patients beyond
PPLPMDL0020000001	Cleveland	OH	44113	5/11/2011	worked orthopedic dept-see call notes on dr bohli and dr berkowitz
PPLPMDL0020000001	Cleveland	OH	44195	5/11/2011	worked Anesthesia/Pain management dept-see call note on Kathy Kraus,PA and had to leave Butrans initiation guide,patient information booklet and Butrans formulary grid for Dr.Shin as i couldnt see him today
PPLPMDL0020000001	Independence	OH	44131	5/11/2011	Spoke with JT about area physicians who prescribe a lot of Vicodin or short-acting opioids for chronic conditions. He mentioned Rutkowski, Hernandez, Kuschnir, & also said that a lot come from physicians in Euclid & Lorain. JT said he hasn't really seen patients on Butrans than other pain medications. Reviewed Relay Health e-voucher & discussed Butrans savings cards that can be printed online at Butrans.com if Drug Mart does not participate in Relay Health. JT said he has filled "a couple" Butrans prescriptions so far.
PPLPMDL0020000001	Fairlawn	OH	44333	5/11/2011	I asked Dr. Domdera if he was any closer to prescribing his first Butrans Rx. He said that although he really liked the concept he was still waiting to hear some feedback from other practitioners, he said that this is a product he could see himself prescribing in the future.
PPLPMDL0020000001	Akron	OH	44320	5/11/2011	I asked Dr. Dupstadt if she saw a benefit o the 7 day delivery system that Butrans could provide to her patients and she did and would keep it in mind. Quick call. Nothing new learned.
PPLPMDL0020000001	Copley	OH	44321	5/11/2011	Quick call. Reminded Dr. about Butrans. No new info gained.
PPLPMDL0020000001	Copley	OH	44321	5/11/2011	I asked Dr. Machado if he had had the opportunity to initiate Butrans therapy and he said he did not. He told me he would continue to use OxyContin but was not sure about Butrans.
PPLPMDL0020000001	Cleveland	OH	44104	5/11/2011	i talked to dr about her patients taking vicodin that are asking for something different or requesting more pills and to consider Butrans as an option,if appropriate.dr said she hasn't thought of Butrans and couldn't remember the insurance coverage and asked if medicaid covered Butrans.we talked about Butrans formulary coverage for medicaid,commercial and BWC patients.i showed dr Butrans initiation guide and discussed proper tapering of short-acting opioids and initiation of Butrans dosage strengths 5mcg or 10mcg,i asked if dr could think of 2 patients this week,that are taking vicodin but not controlled,where Butrans may be an appropriate option,dr said she will have to see who come's in this week but does like that Butrans is a once weekly dosing option and is a patch.i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44104	5/11/2011	I talked to dr about her patients taking Percocet,that are asking for more pills or telling her their pain isnt controlled with percocet and asking for something different,to consider Butrans for these patients if appropriate.dr said she hasn't thought about Butrans and asked about the dosing and initiating dosage strengths,i showed dr Butrans initiation guide,discussed tapering and initiation of Butrans and we discussed formulary coverage for Butrans.i asked dr if she can think of 2 patients coming in this week,taking Percocet and not controlled,to start on Butrans? dr said if patients are complaining to her that they want something different,she'll think of Butrans.i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	5/11/2011	dr said he hasn't started any patients on Butrans yet as he has a lot of acute pain patients and not as many chronic pain patients.i asked dr if his chronic pain patients taking Vicodin,ever asked him for something different or told him the Vicodin wasn't controlling their pain? dr said yes he does hear that from patients occasionally but most of the patients want more pills.i showed dr Butrans initiation guide,discussed proper tapering of Vicodin and initiation of Butrans. we talked about Butrans formulary grid and use of Butrans patient savings cards.i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	5/11/2011	dr didn't speak to me that long other than stating he was disappointed that he has had 4 patients with systemic rashes,after starting Butrans,which i reported in last call note.i showed dr Butrans fpi again and we discussed adverse event rates for rashes and severe allergic reactions seen in Butrans clinical trials and dr said he didn't know what to tell me but that he wasn't comfortable writing Butrans anymore because of these 4 reactions patients got from Butrans.i asked dr if we could call Purdue Medical services,so that he could speak with a pharmacist and share his concerns,ask questions,dr said he didn't have time today but to stop back friday morning and he might be able to call then.
PPLPMDL0020000001	Akron	OH	44320	5/11/2011	I asked Dr. Bonyo if he feels like a LAO could benefit patients who are currently calling in and asking for more Vicodin. He said yes. I reminded him that Butrans was a once a week LAO and a schedule 3, ideal for exactly those type of patients.
PPLPMDL0020000001	Cleveland	OH	44120	5/11/2011	i talked to dr about Butrans being an option for patients taking percocet that are telling her their pain isnt controlled with the short-acting opioid and they are asking her for something different.dr said she hasn't thought about Butrans due to insurance coverage as she has medicaid and cash paying patients.we talked about Butrans formulary coverage for medicaid and commercial plan patients as dr said she has a couple of commercially insured patients.we talked about Butrans patient savings cards for commercial plan patients.i asked dr to think of 2 patients with commercial insurance,taking percocet,but asking for something different and showed Butrans initiation guide discussing proper tapering of percocet and initiation of Butrans.dr said she'll have to see who comes in and if she has 2 patients with commercial insurance that would be interested in starting on Butrans.i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44114	5/11/2011	I talked to dr about Butrans being an appropriate option for patients taking short-acting opioids,like Vicodin or Percocet,that are telling him their pain isnt controlled with their short-acting opioids.dr said he is also considering Butrans for those patients that ask him for more pills,as he thinks Butrans could be an appropriate option right there.i showed dr Butrans initiation guide,discussed proper tapering of vicodin or percocet and initiation of Butrans 5mcg or 10mcg,i asked dr to think of 2 patients that he can start,based on our conversation,on Butrans,this week? dr said yes he will do that and we talked about Butrans formulary coverage and use of Butrans patient savings cards for commercial plan patients.we talked about OxyContin being an appropriate option for some patients,showed dr OxyContin formulary coverage grid and i recommended Senokot-S
PPLPMDL0020000001	Akron	OH	44320	5/11/2011	Reviewed patient education guide with pharmacist. Explained application and disposal. Reminded him about steady state.

PPLPMDL0020000001	Independence	OH	44131	5/11/2011	Dr Jack said he would like to hear other physicians talk about their experience with Butrans. He asked if I could bring in an expert or specialist in to speak with him about it. I told him about the May 24 program & asked if he would attend. He said he might. Asked who he refers to & he said Dr Nickels & Dr Yokiel mostly. I asked if he needed to hear other physicians talk about Butrans before he would consider prescribing it himself & he said yes. He said that if Dr Nickels attends, he might as well.
PPLPMDL0020000001	Cleveland	OH	44195	5/12/2011	I talked to Janet, Pharmacist and Brittany, Pharmacy tech, about Butrans stocking and both of them said they haven't seen any Butrans scripts yet. we talked about appropriate patients for Butrans and I showed Butrans visual aid with this information and then Butrans initiation guide. Janet said I should talk to a few doctors in Taussig Cancer Center that she thinks may be interested in hearing about Butrans. I gave Janet name's of physicians I am working with as some of her recommended physicians were the same as the one's I have been leaving information for and trying to get appointments with to discuss Butrans. we discussed OxyContin being an appropriate option, formulary coverage and OxyContin conversion guide. I recommended Senokot-S
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	5/12/2011	I asked Dr. DiLauro about her success with Butrans. She said that she has had no complaints and is really pleased with how patients are responding. She said that because of her positive feedback Butrans will continue to be a therapy she will continue to use for the appropriate patients.
PPLPMDL0020000001	Independence	OH	44131	5/12/2011	Reviewed Butrans indication, dosing, delivery system, & appropriate patient type. I asked if he would consider Butrans for patients who had never been on an opioid- He said he would. He said that some of his chronic pain patients get referred to pain management if they are going to need to be on something every month, but he said he does maintain some himself if he knows & trusts them. He asked what feedback about the adhesive & skin has been. Showed FPI section 6 & discussed application/adhesion. I asked when he uses a long-acting instead of a short-acting around-the-clock. He said sometimes cost is the determining factor. He asked about managed care. Reviewed formulary grid/savings cards for commercially insured patients. He said he would use Butrans in patients for whom he is ready to put on an opioid if they have a chronic condition. Discussed OxyContin & he mentioned reformulation. Reviewed field card bullet points-told him to be as cautious as always when prescribing it.
PPLPMDL0020000001	Cleveland	OH	44195	5/12/2011	I talked to Anne, NP, about considering Butrans as an option for her patients taking tramadol that tell her their pain isn't controlled with their short-acting tramadol or if she is considering a long-acting opioid with once weekly dosing. Anne said she sees Dr. Stanton-Hicks's patients and he hasn't started anyone on Butrans so she's waiting to see what he does with the medication before she approaches him about starting anyone on Butrans. Anne told me to leave information on Butrans, for Dr. Stanton-Hicks, again and she'll talk to him about appropriate patients. I showed Anne Butrans initiation guide for our discussion on proper tapering and initiation of Butrans. we discussed Butrans formulary coverage and I recommended Senokot-S
PPLPMDL0020000001	Independence	OH	44131	5/12/2011	Introduced myself & Purdue's products to Dr Grusenmeyer. Reviewed Butrans indication, delivery system, dosing, & appropriate patients. He said he generally refers chronic pain patients to pain management. He added that pain patients are difficult to treat & are very time-consuming & frustrating to deal with. He said that he would "look into" using Butrans & might consider it if he does decide to maintain a chronic pain patient. Told him it does carry abuse/addiction potential because it is an opioid. Discussed Butrans as a CIII, long-acting option. He said a once-a-week option would be "more convenient" for patients. Discussed OxyContin reformulation & reviewed field card bullet points. Told him to be just as cautious in prescribing it as he always has been.
PPLPMDL0020000001	Cleveland	OH	44195	5/12/2011	I talked to dr briefly about appropriate patients to start on Butrans by showing Butrans visual aid and initiation guide. we discussed tapering of short-acting opioids and initiation of Butrans. I asked dr if she ever has patients taking tramadol that aren't controlled and ask her for something different? dr said yes. I told dr that is where Butrans could be an option, if patients meet Butrans indication. dr said okay she liked once weekly dosing of Butrans and that it was a CIII we discussed Butrans formulary coverage and I recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44103	5/12/2011	I talked to dr about her patients taking percocet that are asking her for something different because their short-acting opioid isn't controlling their pain and perhaps a once weekly dosing option and a single entity opioid like Butrans could be an option. dr said she started 1 patient on Butrans, as that patient was asking for more pills and dr wasn't comfortable giving any more pills so dr asked patient if there was an interest to try Butrans. I asked dr to think of 2 patients, like we discussed, that she can tell patients Butrans is going to be the next option and not refill their percocet and give Butrans patient savings card. dr said she has a lot of Medicaid and Medicare patients but does have a few commercial plan patients so she'll think of a couple of patients that she could try Butrans in and let me know what happens. we discussed OxyContin being an option, formulary coverage and OxyContin savings cards.
PPLPMDL0020000001	Cleveland	OH	44113	5/12/2011	worked pain management dept - dr daoud and dale novak
PPLPMDL0020000001	Cleveland	OH	44195	5/12/2011	worked taussig cancer center pharmacy - see call note, work center for spine and pm&r - dr zachary and dr capuloung-left Butrans fpi, initiation guide, patient information booklet/dvd and Butrans formulary grid, also left OxyContin fpi, formulary grid and OxyContin conversion guide for each doctor; worked chronic pain-couldn't see dr covington so left Butrans fpi and initiation guide for him. worked anesthesia/pain management dept-see call notes on Anne Crawford, NP and Dr. Minzter
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	5/12/2011	I asked Dr. DiLauro why she had not considered trying Butrans on at least one of the patients we had talked about in the past. She said she does not treat a ton of pain. I asked her if she thought there was any place for Butrans in her practice and she said she thought there was.
PPLPMDL0020000001	Cleveland	OH	44130	5/12/2011	I asked Dr Fedorko if he would be more likely to prescribe Butrans for a patient with chronic pain who was not currently on an opioid or a patient who was already on a short-acting. He said someone who is already on short-acting because at that time, you don't necessarily know if the person's pain is chronic or acute. Asked what kind of feedback he has gotten so far from his Butrans patients. He said that he has been looking for more patients for Butrans but is not sure that he sees enough patients in his practice who fit the indication. He said he would keep looking for patients for Butrans & would think of it for patients who were taking short-acting around-the-clock opioids for chronic conditions. Discussed managed care & savings cards for Butrans. Also reminded him of Ryolt Value Cards.
PPLPMDL0020000001	Cleveland	OH	44113	5/12/2011	I talked to dr about the patients he's starting on Butrans, dr said he hasn't gotten any feedback yet from patients as he just started patients over the last 2 weeks. we talked about Butrans application dvd/booklet and formulary coverage. I asked dr to continue starting patients on Butrans that he feels are appropriate for a long-acting opioid, dr said he will and will let me know what patients say about Butrans. I recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	5/12/2011	I talked to dale, pa, about patients he's recommending to dr shen to start on Butrans. dale said dr daoud, pain management doctor here, hasn't started anyone and he's not sure why as he knows that patients do ask for something different or for more pills after the first dosage strength of their short-acting opioids aren't controlling their pain anymore. dale said dr shen is seeing success in patients who she's started on Butrans so she is comfortable starting patients on Butrans. dale said once weekly dosing of Butrans and the fact that Butrans is a patch are two benefits in his eyes. we talked about Butrans patient information booklets and dvd's and discussed formulary coverage. I recommended Senokot-S
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	5/12/2011	Dr. Azemd that she has already initiated therapy and would continue to do so for patients currently on SAO's that she felt needed to be converting to a LA agent. I reminded her how to initiate therapy and how to titrate using the initiation and titration guide.
PPLPMDL0020000001	Cleveland	OH	44113	5/12/2011	I talked to dr briefly about his patients taking tramadol or vicodin that are asking for something different because their short-acting opioids aren't controlling their pain. dr said he hasn't had anyone lately say that but does think Butrans is a good option being a patch and dosed once a week. I showed dr Butrans initiation guide, discussed tapering and initiation of Butrans and discussed formulary coverage with dr and asked him to think of 2 patients taking tramadol or vicodin that he feels could benefit from once weekly dosing of Butrans and a single entity opioid. dr agreed. I recommended Senokot-S
PPLPMDL0020000001	Parma	OH	44129	5/12/2011	Reminded Dr Gigliotti about the patient who he had told me about who was "almost" a Butrans candidate who wanted to be on pills instead of a transdermal. I asked him if that happens frequently & he said yes. Asked how he felt about that & he said he wishes he did not have a DEA number. He said patients like pills because they are "safer". I asked how they are "safer". He said it is easy to take pills & added that if was a patient he would rather take pills but then also added that he would forget to take pills. Asked isn't that a reason to be on a transdermal product instead of pills & he said "good point". I asked him if instead of keeping them on pills only, he would put someone on Butrans with a reduced supply of short-acting medication in case of breakthrough. He said maybe. I asked what he ended up doing with that particular patient & he said he doesn't know but probably re-
PPLPMDL0020000001	Parma	OH	44134	5/12/2011	Dr Hernandez said he continues to get great results with Butrans. He said that he had a patient who had gotten nausea from Butrans & he gave her fenergan to treat the nausea because the patient did not want to come off Butrans because her pain relief was so good. He also said he had a patient who complained of constipation from Butrans, but that she also wanted to stay on Butrans because of the analgesia. I asked how many refills he gives patients & he said he writes for one month at a time. He said he believes in Butrans because it is safe & effective. Reminded him that Butrans is abusable & does have addiction potential. Let him know I would bring Senokot-S samples when I receive more & also made sure he has enough savings cards for Butrans & OxyContin.
PPLPMDL0020000001	Cleveland	OH	44103	5/12/2011	I talked to dr about patients that are appropriate for Butrans, looking at Butrans initiation guide and dr said he has a few commercial plan patients that might benefit from Butrans, so we talked about proper tapering of short-acting opioids and initiation of Butrans and Butrans patient savings cards for commercial plan patients. I talked to dr about OxyContin being an appropriate option for patients and dr said he starts a lot of patients on OxyContin when their short-acting opioids aren't controlling their pain, he will start them on a long-acting opioid like OxyContin. we discussed formulary coverage for OxyContin and OxyContin savings cards. I recommended
PPLPMDL0020000001	Cleveland	OH	44102	5/12/2011	I talked to dr about her patients taking tramadol that are asking her for something different and instead of increasing the dosage strength of tramadol or converting them to vicodin, I asked dr to consider Butrans as an option. we looked at Butrans initiation guide, discussed tapering and initiation of Butrans. we talked about Butrans formulary coverage for commercial plan patients and use of Butrans patient savings cards. dr said she will think of a couple of patients to talk to about Butrans. I recommended Senokot-S
PPLPMDL0020000001	Westlake	OH	44145	5/13/2011	Quick call with Amid, he does not remember seeing any Butrans scripts. We reviewed the appropriate patient types for Butrans and I asked his thoughts. He does think it would be a good option for patients who are taking vicodin every day. We discussed the application and what to do if the patch starts to come off per the FPI and medication guide. Reminder about OxyContin as a Q12hr option and asked to recommend Senokot S.
PPLPMDL0020000001	Independence	OH	44131	5/13/2011	Roman said that he is looking forward to the Butrans dinner program on May 24. He said that he has questions about titration & dosing. I reviewed initiation & titration guide with him. He asked if a patient could wear two Smcgs systems at a time instead of one 10mcg if he starts them on 5 & finds that they need to be titrated. I told him this is not recommended & that we have not studied it this way. Let him know that patients could use savings card again in the same month for the next higher strength if it was for titration. Reviewed CIII & abuse/addiction potential. Also discussed OxyContin for patients beyond Butrans 20mcg & recommended Senokot-S for opioid-induced constipation.
PPLPMDL0020000001	Westlake	OH	44145	5/13/2011	She is an IM and ER resident in her 5th year as a resident. She will be moving to Austin TX. We reviewed Butrans 5 key messages and the indication. We discussed the OxyContin conversion guide and how to choose appropriate patients. We reviewed Ryolt as a once a day tramadol option and reminder about Senokot S with opioids.
PPLPMDL0020000001	Westlake	OH	44145	5/13/2011	I reviewed our last conversation and that he saw many benefits to Butrans if managed care weren't an issue. I asked if he would try just a few appropriate patients who have commercial insurance and he said he would try. Reminder about OxyContin for those patients with AARP Med D plans and for nursing home patients where Butrans may not be covered.
PPLPMDL0020000001	Sagamore Hills	OH	44067	5/13/2011	I asked Dr Sevier what a "Butrans patient" looks like to him. He said he is looking for a patient with a chronic issue causing pain who may be a candidate for Duragesic, but added that he has no patients on Duragesic right now. I reviewed appropriate patient type & reminded him that patients on fentanyl were excluded from our studies. He said then that he would maybe think of Butrans for chronic pain patients who can't tolerate Vicodin or get constipation from other opioids. Showed FPI section 6, reviewing adverse events. I reviewed positioning of Butrans & asked him if instead he would consider Butrans for patients before he puts them on around-the-clock Vicodin chronically. He said he didn't realize it could be used in those patients. Reviewed dosing & titration, managed care, & savings cards. Also discussed OxyContin for patients beyond Butrans 20mcg & recommended Senokot-S for opioid-induced constipation.
PPLPMDL0020000001	Cleveland	OH	44106	5/13/2011	I talked to Patty, Pharmacist, about Butrans stocking, any scripts they have seen here filled for Butrans and what doctors are prescribing Butrans. I showed Patty Butrans initiation guide, discussed appropriate patients, tapering of short-acting opioids and initiation of Butrans. I showed Patty Butrans patient information booklet and asked her and the pharmacy staff to show patients the pages on application of Butrans, rotation of Butrans and the log book section in back of Butrans patient information booklet. Patty said okay that made sense to show patients that information. I recommended Senokot-S
PPLPMDL0020000001					



PPLPMDL0020000001	Sagamore Hills	OH	44067	5/13/2011	Introduced myself & Purdue's products to Dr Hugus. He said that he had retired at the end of 2010, but has decided to come back to work to see patients two days per week. Introduced Butrans & core messages. I asked him when he might use a long-acting opioid instead of a short-acting. He said it really depends on each patient & their individual condition. He asked about side effects, so I showed FPI section 6. Also discussed CIII & abuse/addiction potential. He said it seems that have to be more cautious than ever in prescribing opioids. I agreed that he should be cautious & also told him again that Butrans does carry abuse/addiction potential.
PPLPMDL0020000001	Cleveland	OH	44109	5/13/2011	Reviewed application, dosing, managed care, & savings cards for eligible patients. Also discussed OxyContin for an option for appropriate patients beyond Butrans 20mcg & recommended Senokot-S for opioid-induced i talked to dr about appropriate patients to start on Butrans and showed Butrans visual aid,we discussed Butrans initiation guide,tapering of short-acting opioids and initiation of Butrans 5mcg or 10mcg. I asked dr if he would consider starting patients that are taking tramadol that arent controlled,on Butrans? dr said he hasnt really thought about Butrans as he hasnt had any patients ask for a different medication lately. I asked dr if patients call in early for refills,would he consider a long-acting opioid at that point? dr said it depends and if patients are willing to stop taking their short-acting opioids and start Butrans he might consider a long-acting opioid. I showed dr Butrans fpi discussing patients taking short-acting opioids and non-opioids with Butrans initially and throughout maintenance of Butrans,dr said he forgot about that and appreciated information. I asked dr to think of 2 patients to start on Butrans,dr agreed. I recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44106	5/13/2011	dr said he started a patient on Butrans last week. we looked at Butrans initiation guide,discussed appropriate patients,tapering and initiation of Butrans, we talked about Butrans formulary coverage and I talked to Juan,doctors medical assistant to be sure Juan gave this patient the Butrans patient information booklet. Juan said Lisa, Patient care coordinator, handed booklet to patient and processed prior authorization for this patient and he hasnt heard anything from patient so thats a good thing otherwise if there was a problem the patient would have called Juan by now.
PPLPMDL0020000001	Sagamore Hills	OH	44067	5/13/2011	Quick call- Dr Lenox came back to lunch only briefly. I asked when he might prescribe a long-acting opioid instead of a short-acting around-the-clock regimen. He did not respond. He then started telling Dr Sevier about how Methadone can be prescribed by physicians for pain & that "there is no respiratory depression risk" with Methadone. Recommended OxyContin for appropriate patients beyond Butrans 20mcg. Also recommended Senokot-S for opioid-induced constipation. I invited Dr Lenox to take part in a June web conference but he declined, saying that a web conference is "a dinner program without the food". He said he did not see the point. He walked out of the room before I could respond.
PPLPMDL0020000001	Twinsburg	OH	44087	5/13/2011	Dr Leonard said she has not prescribed Butrans yet. Reviewed indication, delivery system, CIII, & abuse/addiction potential. I asked her what she typically does after a patient fails an NSAID or COX-2 with a chronically painful condition. She said that she generally will try Lyrica for the patient & if that does not work, she usually refers to Dr Moufawad at pain management. I asked if she maintains any of those patients or sends always to pain management. She said she has some that she maintains & sometimes pain management sends them back to her to deal with medications. Reviewed appropriate patient types, managed care, & savings cards for those eligible. She said she is very cautious in prescribing any narcotics. I told her she should be, & she should be just as cautious with Butrans. She said that the patients she is thinking of for Butrans are some of her Medicare patients but she will try to think of others. Discussed OxyContin as option for patients beyond Butrans 20mcg.
PPLPMDL0020000001	Westlake	OH	44145	5/13/2011	I asked Dr if he started any Butrans patients this week and he said that he did. He said that he is using Butrans as an alternative to vicodin around the clock and has also tapered patients down from methodone. I reviewed the managed care with Pam. I reviewed the appropriate patient type with Jenny She likes the fact that Butrans is a transdermal system and she will continue to encourage the Dr to prescribe.
PPLPMDL0020000001	Westlake	OH	44145	5/13/2011	Quick call at window. Dr said that he has tried Butrans for a few patients who were on low dose vicodin instead of increasing their dose. He said he has not heard back from these patients yet so he has no feedback. Laura could not remember which managed care but did not remember getting a call back for a PA. Reminder about OxyContin as an option when managed care may not allow Butrans.
PPLPMDL0020000001	Independence	OH	44131	5/13/2011	Spoke with Marcus (pharmacist) who was filling in at this location (as he is usually at the Chagrin/Woodmere location. Reviewed Butrans dosing, once-a-week application, & savings program. He said he has not dispensed any & checked this location's shelves & said they do not have it here. I asked him what the policy is at CVS with regards to reviewing a box of a product to dispense one patch if they receive a prescription written that way. He said they generally don't like to do that, but if they move enough of it, they will do it.
PPLPMDL0020000001	Westlake	OH	44145	5/13/2011	We reviewed our last conversation about Butrans and I asked if he had thought more about the types of patients who might benefit. Dr said that he has not tried Butrans yet, but thinks that it sounds like it could be a good option. We reviewed the initiation guide and he said that he has more chronic pain patients who are already on various doses of short acting. We reviewed OxyContin as an option when Butrans may not provide adequate
PPLPMDL0020000001	Cleveland	OH	44109	5/13/2011	I talked to dr about considering Butrans for his patients taking short-acting opioids that are asking him for something different or if dr thinks a once weekly dosing option would be beneficial to patients. dr said he hasnt had any patients complain of their medications lately or ask for a change but he'll keep Butrans in mind. I asked dr to think of 2 patients who call in early for refills as that might be a sign that a long-acting opioid could be appropriate and dr said he will consider that. I recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	5/13/2011	I talked to dr about why he's not started any patients on Butrans yet and dr said he likes that Butrans is in a patch but he's thinking of Butrans for more severe pain patients, so I showed dr Butrans initiation guide and discussed more moderate pain patients trying Butrans. I asked dr to consider patients on vicodin or percocet that ask him for a medication change because their pain isnt controlled with their short-acting opioids or perhaps Butrans's once weekly dosing option is something dr wants for the patients. dr said he will consider Butrans for a few patients and we discussed formulary coverage. I recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44106	5/13/2011	dr said he started 2 patients on Butrans last week. I asked dr why he chose Butrans or thought it was an appropriate option for patients? dr said it wasnt the patients that asked for anything, they were both taking tramadol and he just thought it would be a good idea to try Butrans in these patients and see what happens and both of the patients were happy to try Butrans. I asked dr what patients said about Butrans? dr said both patients liked that Butrans was a patch and dosed once a week. dr asked if Butrans was a CII or CIII as he couldnt remember? I told dr Butrans was a CIII and dr said that was good as CIII's are much easier to prescribe and he can have his staff call in refills. I asked dr to continue finding patients to start on Butrans, that are perhaps taking tramadol but are calling in sooner for refills because the short-acting tramadol isnt controlling their pain or a once weekly dosing option could be appropriate for them. dr agreed and said he will start more patients on Butrans
PPLPMDL0020000001	Cleveland	OH	44109	5/13/2011	dr said she hasnt started anyone on Butrans as she hasnt had any patients ask for a medication change or complain to her that their current medication isnt controlling their pain. I asked dr if patients ever call in earlier in the month than they should, for refills, thinking perhaps a long-acting opioid could be an option at that point? dr said sometimes patients call in sooner than they should so I asked dr to think of Butrans at that point, if patients are taking tramadol, vicodin or percocet, instead of refilling their medication, start them on Butrans. dr said she will consider this option and asked about insurance coverage for Butrans on medicaid. we talked about Butrans formulary coverage on medicaid, bwc and commercial plans. I recommended Senokot-S
PPLPMDL0020000001	Akron	OH	44319	5/13/2011	I talked to Dr. Katirji about initiating therapy to an opioid naive patient. He said that he would keep it in mind but still wants to continue to educate himself on Butrans therapy first. I asked him what information was the most important to him and he said there wasn't one thing in particular. I asked if I could follow up with him next week and he said yes.
PPLPMDL0020000001	Akron	OH	44312	5/13/2011	Quick call through window. Asked Dr. Manning if he had the opportunity to review the Butrans material I had left. he said he read through it briefly but would be more interested to hear about it over a lunch, which I
PPLPMDL0020000001	Cleveland	OH	44102	5/13/2011	I talked to dr about considering Butrans for her patients taking tramadol that are calling in sooner for refills or telling dr their short-acting tramadol isnt controlling their pain. dr said most of her patients like taking pills but she'll keep Butrans in mind. dr wanted to know what the insurance coverage was for Butrans so we discussed commercial coverage and use of Butrans patient savings cards. I asked dr to think of 2 patients with commercial insurance, like we discussed and showed Butrans initiation guide. I recommended Senokot-S <font color=blue>-<b>CHUDAKOB's query on 05/19/2011</b>-</font>Her patients may like taking pills according to her, but how does she feel as the physician about her patients taking pills? This might be a good follow up question to ask when the physician gives you this objection. <font color=green>-<b>BROOKAM's response on 05/25/2011</b>-</font>good question-<font color=blue>-<b>CHUDAKOB added notes on 05/26/2011</b>-</font>Let me know how it works out!
PPLPMDL0020000001	Akron	OH	44312	5/13/2011	Quick call through the window. I asked Dr. McRoberts if he had read the Butrans material I had left behind and he agreed with Dr. Manning that they would prefer I schedule a lunch to discuss the product more in depth.
PPLPMDL0020000001	Cleveland	OH	44109	5/13/2011	worked pm&dr dept - see call notes
PPLPMDL0020000001	Cleveland	OH	44102	5/13/2011	i talked to dr about Butrans being an option for her patients taking Percocet that are asking her for more pills or saying their percocet isnt controlling their pain, dr said it makes sense to try a medication like Butrans as she likes the once weekly dosing and the fact that Butrans is a patch. dr said the challenge is that most of her patients dont want to stop taking their pills. I asked dr if she ever has patients that call in earlier for refills? dr said yes. I told dr that could be a sign that the percocet isnt controlling her patients pain and perhaps Butrans could be an option. I asked dr to think of 2 patients with commercial insurance that she can try Butrans and get some clinical experience? dr agreed. I recommended Senokot-S
PPLPMDL0020000001	Westlake	OH	44145	5/13/2011	I reviewed our last conversation about Butrans and I asked where she sees Butrans fitting in. She said she does think that it could be a good option after tramadol or when patients are already on vicodin and need something else. We reviewed the initiation guide and the starting dose of Butrans depending on what patients are already taking. I asked if she would try it on a few patients who are taking low dose vicodin and she agreed but she wanted to know what the cost is. We reviewed managed care for Butrans and the savings cards. Reminder about OxyContin as an option when Butrans may not provide adequate analgesia.
PPLPMDL0020000001	Akron	OH	44312	5/13/2011	I asked Dr. Smith if he had seen any of the patients we discussed on my last visit. He said he had not yet seen those patients or initiated therapy. I scheduled another appointment with Katie.
PPLPMDL0020000001	Uniontown	OH	44685	5/13/2011	I asked Dr. Stetler if he had initiated therapy to the patients we had discussed on my last visit and he said that he had. He told me he started to patients, both who were opioid tolerant. He said the patients were doing well and he would titrate them to the 5 mcg patch if he needed to titrate. He asked me about our clinical studies which I reviewed using the FPI.
PPLPMDL0020000001	Akron	OH	44312	5/13/2011	Spoke to the pharmacist who said they had recently seen movement from Dr. Stetler. I asked if the patient had any questions and they said no. I explained steady state so they could prepare for a possible call back from the
PPLPMDL0020000001	Woodmere	OH	44122	5/13/2011	Spoke briefly with Angie (pharmacist). She said they do now have Butrans in stock. She said she does not know off hand what strengths & was too busy to check the system. Discussed e-voucher for Butrans as she was unfamiliar with it & reviewed OxyContin savings cards which she said they have some of. I asked her what insurance plans she sees most of at that location. She said she sees a mix of "everything". I asked her the ratio of commercial insurance to government plans. She said she sees more private insurance than government plans.
PPLPMDL0020000001	Twinsburg	OH	44087	5/13/2011	Spoke with pharmacist, Michelle & reviewed Butrans indication, dosing, & delivery system. Went over patient information booklet & discussed application instructions & adherence. Michelle said the booklet would be useful for them if/when patients call for questions. She recommended a speak with Dr Moufawad. I let her know I am working with him. Also reviewed OxyContin savings cards & 7 available tablet strengths.
PPLPMDL0020000001	Independence	OH	44131	5/13/2011	Saw Dr Pai briefly at the window. Attempted to stop him by inviting him to a Butrans webcast. He waved & thanked me & then walked into a patient room. Spoke with Jill about managed care, prior authorizations, & savings cards. She said she will do a prior authorization if Dr Pai wants a patient to have a particular medication. Also asked her to tell Dr Pai about the Butrans webcast invitation. She said she will recommend to him that he attend, but that he rarely does things like that. She said they are in the process of switching over to EMR, so both she & Dr Pai have been especially busy. She said I may be able to get more time with him in a couple weeks.
PPLPMDL0020000001	Cleveland	OH	44103	5/13/2011	I talked to Amy, Pharmacist, about Butrans stocking, scripts she has seen here and asked who is writing a lot of hydrocodone or oxycodone combo's in area, we discussed Butrans initiation guide and talked about tapering of short-acting opioids and initiation of Butrans. Amy asked about the patient information booklet and what she should be telling patients. I told Amy to focus on application sites, rotation of Butrans and log book in back of Butrans patient information booklet. I showed Amy Butrans application dvd/booklet and said this may be an additional tool to help her when explaining to some patients about Butrans, if she doesnt have a lot of time to do patient counseling. we discussed Butrans formulary coverage. <font color=blue>-<b>CHUDAKOB's query on 05/19/2011</b>-</font>You asked her who is writing hydrocodone or oxycodone in the area, but I do not see her answer in your call notes?<font color=green>-<b>BROOKAM's response on 05/25/2011</b>-</font>I didnt note doctors names. I am limiting information in my call notes as I write too much-<font color=blue>-<b>CHUDAKOB added notes on 05/26/2011</b>-</font>I would think that this was important information as you asked the question?
PPLPMDL0020000001	Cleveland	OH	44113	5/13/2011	I talked to dr about the patients she's starting on Butrans and why she's continually choosing Butrans as an option. dr said she's seeing improvements in patients pain so clinically there are improvements being seen after patients start on Butrans so she's happy and patients think putting on the patch and only having to change it once a week is easy so that makes it easier for her and her staff. we looked at Butrans initiation guide, discussed tapering and initiation of Butrans 5mcg or 10mcg. we discussed Butrans formulary coverage. I recommended Senokot-S
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	Beachwood	OH	44122	5/13/2011	Spoke with Dr Yokie's medical assistant & reviewed Butrans formulary grid & went over savings cards for commercially insured patients. Also discussed OxyContin savings cards. She said they have about 4 cards for each product & also have sufficient Butrans patient education. She said that Dr Yokie is currently overly busy, doing more procedures. They are also trying to work out a schedule for Jennifer (NP) who will be seeing all Dr Yokie's & Dr Barrett's follow-up appointments by August. Scheduled early June lunch.
PPLPMDL0020000001	Parma	OH	44129	5/16/2011	Dr Ortega said he has not had any feedback on Butrans yet, but continues to look for more patients to start on it. He told me about a patient who used to be on 80mg OxyContin q12h that he has since weaned down to 20mg q12h. He asked me if this would be a potential candidate for Butrans. Reviewed initiation/titration guide with him & discussed taper of current opioid before starting Butrans 10mcg. He said the patient is committed to getting rid of his pain while reducing the amount of medication that he has to take. Reminded Dr Ortega that Butrans is CII & does have abuse/addiction potential. He said that he couldn't remember how to start Butrans for patients, so he did not start this patient when he saw him most recently, but is considering calling in a Butrans prescription for him before his next appointment. Discussed OxyContin as an option for appropriate patients. He asked if Dr Hernandez is using Butrans- recommended that he call Dr Hernandez for his feedback.
PPLPMDL0020000001	Brooklyn	OH	44144	5/16/2011	Spoke with pharmacist Cheryl who said that while they do have Butrans in stock, she has not yet dispensed any. Discussed area physicians- she had no specific recommendations of what practitioners may be interested in Butrans based on their patient population. Reviewed appropriate patient type & e-voucher. Also discussed OxyContin savings cards, which Cheryl said they have plenty of.
PPLPMDL0020000001	Parma	OH	44129	5/16/2011	Quick call as I caught Jen on her way from one patient room to another. She said they had just talked about Butrans & that Dr Nickels said it was one of the products he finds acceptable for them to prescribe. I spoke with Dawn & asked what that meant. She said that last week, all the practitioners had a meeting where several "new" products were discussed. She said they do this occasionally to make sure that everyone "is on the same page" with prescribing. She added that Dr Nickels said he has tried a few patients on Butrans & that it was added to the list of products that the nurse practitioners could all prescribe (as a sort of pre-approval by Dr Nickels). Dawn said that Jen will probably be the last of the NP's to prescribe it only because she is more reserved since she is so new, but that she would do her best to point out appropriate patients to Jen.
PPLPMDL0020000001	Cleveland	OH	44106	5/16/2011	I talked to dr about Butrans fpi,5 core messages,initiation guide,patient information booklet and Butrans formulary coverage.dr asked what patients could benefit best from Butrans? we talked about patients taking tramadol,hydrocodone or oxycodone combinations where their pain isnt controlled and perhaps a once weekly dosing option like Butrans would be appropriate.i showed dr Butrans initiation guide.dr asked what's the next step after Butrans doesnt work anymore? i told dr he has option of OxyContin,we discussed appropriate patients for OxyContin,7 tablet strengths for flexibility in titration and formulary coverage.i asked dr if he had patients taking short-acting opioids that werent controlled and dr said yes.dr said he thinks Butrans will be more appropriate out-patient initially,as most of his chronic pain patients are discharged within 3-4 days,dr asked if he could give patients short-acting opioids,i told dr yes and showed Butrans fpi with this information
PPLPMDL0020000001	Cleveland	OH	44102	5/16/2011	i talked to Amol,Pharmacist,about Butrans initiation guide-appropriate patients,tapering of short-acting opioids and initiation of Butrans.we reviewed Butrans patient information booklet and i asked Amol to share with patients the application and rotation of Butrans and showing patients the log book.Amol agreed but said he hasnt seen any Butrans scripts.we talked about importance of stocking Butrans and i asked Amol if he would recommend Butrans to physicians,if patients are telling Amol that their pain isnt controlled with their short-acting opioids,Amol said it depends on the physician and his relationship with that doctor but he will do his.I
PPLPMDL0020000001	Akron	OH	44333	5/16/2011	I asked Dr. Griffiths why she had not initiated Butrans therapy. She mentioned she had 2 patients coming in this afternoon and said she would initiate therapy to both of them. I asked about their insurance and she looked and told me they both had a private plan. I explained those were the perfect patients. I asked if I could come in next week to follow up and she agreed.
PPLPMDL0020000001	Akron	OH	44333	5/16/2011	I asked Dr. Brown how the patients she started on Butrans were doing. She said she liked the concept of this therapy and would continue to initiate as she gets busier. She said she is still focused on building her practice but feels Butrans will become really significant as her practice grows.
PPLPMDL0020000001	Cleveland	OH	44113	5/16/2011	worked pain management dept-see call note on dr daoud
PPLPMDL0020000001	Cleveland	OH	44195	5/16/2011	worked Neurology dept-left Butrans fpi,initiation guide,patient information booklet,formulary grid and Butrans dinner invitation for Dr.Kriegler,Dr.Mays,Dr.Spears and Dr.Stillman-NEUROLOGY dept. worked anesthesia/pain management dept-left Butrans fpi,initiation guide,patient information booklet,formular grid and Butrans dinner invitation for Dr.Minzter,Dr.Mekhail,Dr.Cheng,Dr.Vrooman,Dr.Shin,Dr.Katyal-couldnt see any of the physicians as dept was packed and doctors were either in surgery or seeing patients.
PPLPMDL0020000001	Lakewood	OH	44107	5/16/2011	Quick call, I told Dr that last time we spoke he said he had several patients who he thought might benefit from Butrans. He said he will try to write it for them. I asked Dr if there was anything holding him back from prescribing Butrans and he said no.
PPLPMDL0020000001	Lakewood	OH	44107	5/16/2011	Quick call, I asked Dr his thoughts on where Butrans fits in and he said he has not thought about it. I reviewed the 5 key messages and he said that it sounds good and to leave the information. I pointed out the initiation guide and showed him where Butrans can fit in. I reviewed the savings program. I spoke with Robin and asked her to remind the Dr about Butrans and she agreed.
PPLPMDL0020000001	Cleveland	OH	44106	5/16/2011	I talked to dr about Butrans fpi, 5 core messages,initiation guide,patient information booklet/dvd,Butrans formulary grid and Butrans patient savings cards.dr said a transdermal option is better than giving patients enormous amounts of pills every month and he thinks Butrans could be a good option in the hospital for their chronic pain patients too.I asked dr to think of a couple of patients to try Butrans in and get some clinical experience,Dr
PPLPMDL0020000001	Parma	OH	44129	5/16/2011	Quick call at the window- Butrans positioning message & asked her to consider an upcoming webcast for Butrans. She waved & said she would look into it. Spoke with Natalie who said they have plenty of savings cards for both Butrans & OxyContin.
PPLPMDL0020000001	Lakewood	OH	44107	5/16/2011	I asked the Dr to tell me about the success he's been having with Butrans. He said that he has had good results. Pat came over as said that she has been getting good feedback but she has had to do some prior auths.
PPLPMDL0020000001	Akron	OH	44333	5/16/2011	I asked Dr Richter if his thoughts about prescribing a LAO have changed. He said that he had a handful of patients that he would consider Butrans for but wanted to read about it on his own. I asked him why he didn't like LAO and he said he just prefers to send those patients to Pain Management.
PPLPMDL0020000001	Fairlawn	OH	44333	5/16/2011	Talked to Jessica. Followed up about a Medicare patient we discussed on my last visit. She said that they had not heard back from the patient yet. She said Dr. Shah is not typically writing refills and that they are continuing to get new starts from Dr. Shah.
PPLPMDL0020000001	Akron	OH	44333	5/16/2011	I asked Dr. Shah if he was writing refills and he mentioned that for the most part he was. He said that he really liked the patient education guides and asked me to leave more. I encouraged him to continue initiating therapy to his low dose hydrocodone patients just as he has been doing.
PPLPMDL0020000001	Cleveland	OH	44130	5/16/2011	Spoke with pharmacist, Deb, & reviewed savings programs for Butrans & OxyContin. Let her know that she could print savings cards by going to Butrans.com. She said she has not dispensed any yet. I asked her if she had any strengths in stock & she said no. I let her know that many physicians have reported to me that they are calling pharmacies to find out who is stocked so they know where they can send their patients to get it same-day. She said she may order some because of that. Reminded her of dosing/titration.
PPLPMDL0020000001	Cleveland	OH	44104	5/16/2011	dr said he was happy i was having lunch with him as he had a patient today tell him the percocet wasnt controlling her pain anymore and dr wasnt comfortable giving her a refill of the percocet or increasing the dosage strength so dr thought Butrans could be an option.we talked about proper tapering of percocet and initiation of Butrans,i showed dr Butrans initiation guide for this discussion.i showed dr Butrans patient information booklet and importance of application sites for Butrans and rotation of Butrans and the log book in the booklet,dr said he's going to call in the medication for this patient and have her go to pharmacy to get Butrans.i asked dr to think of a few more patients like this who arent controlled on their short-acting opioids and perhaps a once weekly dosing option like Butrans is appropriate,dr agreed.we talked about OxyContin being an option after Butrans
PPLPMDL0020000001	Cleveland	OH	44113	5/16/2011	20mcg isnt controlling pain,discussed formulary coverage and gave dr OxyContin conversion guide.recommended
PPLPMDL0020000001	Cleveland	OH	44113	5/16/2011	i talked to dr about his patients taking tramadol that meet Butrans indication and are asking him for something else as their tramadol isnt controlling their pain and perhaps a once weekly dosing option like Butrans is appropriate.i showed dr Butrans initiation guide for this discussion.dr said he does a lot of procedures and hasnt seen any patients recently that he feels meets the Butrans indication.dr said he did have 1 patient last week that he was going to start on Butrans but the patient failed the drug screen and had street drugs in his system so dr had to remove this patient from his practice,so clearly he couldnt start this patient on Butrans.dr said he is leaving wednesday for Italy and will be gone until June1st,so he'll think of some patients in June,to start on Butrans.We discussed Butrans formulary coverage and patient savings cards for commercially insured patients.I
PPLPMDL0020000001	Cleveland	OH	44130	5/16/2011	I asked Dr Diab to tell me about the feedback he has gotten about Butrans. He said that he has not gotten any yet. He then went on to say that Butrans is a "good product" & that he sees a place for it in his practice & that I just "need to be patient". I asked him what he likes about Butrans. He said that one thing he likes is that he feels it helps improve compliance since it is once-a-week. I asked if he would continue to prescribe Butrans for appropriate commercial insurance patients to increase his clinical experience & he said he intends to. Also reminded him of OxyContin as an option for patients beyond Butrans 20mcg.
PPLPMDL0020000001	Cleveland	OH	44106	5/16/2011	i talked to dr about Butrans fpi,5 core messages,initiation guide,patient information booklet/dvd,Butrans formulary coverage and Butrans patient savings cards.dr said he thinks there is a place for Butrans in the out patient setting as they have a lot of patients on tramadol,that do ask for something different or when they are asking for more pills,he's not always comfortable giving more pills,so this would be a great option for that sub group of patients.we talked about once weekly dosing being an option for patients that he feels would prefer that dosing instead of around the clock dosing of their immediate release opioids.I showed dr Butrans initiation guide with proper tapering and initiation of Butrans,dr said it seemed easy and would think of some patients to try Butrans in and get some clinical experience.I told dr i would follow-up with him on wednesday at ground rounds to hear of his success starting a few patients,dr said that was fine.
PPLPMDL0020000001	Cleveland	OH	44106	5/16/2011	i talked to dr about Butrans fpi,5 core messages,initiation guide,patient information booklet/dvd,Butrans formulary coverage and Butrans patient savings cards.dr said he thinks Butrans would be a great option for those patients that dont like to take pills and would be willing to put a patch on once a week but he would have to be sure the patient was responsible enough to rotate the patch every week.dr said he see's a lot of patients in the hospital that have chronic pain and are taking tramadol,vicodin and percocet around the clock and thinks Butrans could be used in the hospital setting as well as the out-patient setting.I asked dr to think of a couple of patients,like we discussed,and start them on Butrans,dr agreed and we talked about proper tapering of short-acting opioids and initiation of Butrans.
PPLPMDL0020000001	Berea	OH	44017	5/16/2011	I reviewed the 5 key messages for Butrans, boxed warning and initiation guide. Dr had questions about adverse events, hepatic effect, and clinical trials and we reviewed the FPI. Dr had concerns about the patch sticking for 7 days and we reviewed what to do if the patch starts to come off per the medication guide. I asked if he has had problems with the patch falling off with other meds and he said no. I asked the Dr how he decides that a patient has chronic pain. He said it is based on their condition or disease state. I asked the Dr where he would most likely prescribe Butrans and he would most likely convert a patient from low dose vicodin. I reminded the Dr that OxyContin is still a long acting option.
PPLPMDL0020000001	Lakewood	OH	44107	5/16/2011	I asked Dr if he had tried Butrans yet, he said no. I asked what he thinks of it and he asked a few questions. He asked about steady state and the doses available. We reviewed the initiation guide and how to start a patient on Butrans. He said he will give it a try.
PPLPMDL0020000001	Independence	OH	44131	5/16/2011	Dr Trickett saw me at the window, waved & said, "Butrans, I know..." & then walked back into the patient treatment area. Steve said she has been really busy, so I should try back another time to talk to her more. He said to try next week or the week after. Discussed Butrans webcast for June 1 & asked Steve to give Dr Trickett an invitation. Also reviewed managed care coverage.
PPLPMDL0020000001	Cleveland	OH	44106	5/16/2011	conducted a lecture for the anesthesia/pain management fellows(2), residents(3) and 1 attending physician (Dr.Ko) on Butrans-we discussed Butrans fpi,initiation guide,patient information booklet/dvd and formulary coverage-all of the physicians said there are a lot of chronic pain patients in hospital when they think Butrans would be a great option for and even those patients that are only in hospital for 3-4 days,they could start patients on Butrans and give short-acting opioids for the first 2-3days until patients reach steady state and when patients are discharged they can get Butrans at Bolwell pharmacy as they know its stocked in Bolwell.all of the physicians agreed that there should be a limitations of use,perhaps only apm doctors,for Butrans initially,so i asked them to fill out the drug review form and send to pharmacy to show more support for Butrans

	Cleveland	OH	44106	5/16/2011	I talked to dr about Butrans fpi,5 core messages,initiation guide,patient information booklet,Butrans formulary coverage on commercial,bwc and medicaid,and Butrans patient savings cards for commercial patients.dr said he loves transdermal products,prefers them over pills for chronic pain patients.dr said he likes the once weekly dosing option and thinks Butrans would be a great option in the hospital for chronic pain patients.we discussed Butrans being presented,in March,to the p&t committee but not getting approved,so i asked dr if he believes in this medication to start some patients and perhaps at the next review,he could support Butrans by filling out the drug review form.dr agreed and said he see's patients who have chronic pain and are in the hospital longer than 3-4 days,which is the perception that they are all acute pain patients here,so he thinks a once weekly transdermal medication like Butrans would be ideal.we discussed proper tapering of immediate release opioids and
PPLPMDL0020000001	Westlake	OH	44145	5/17/2011	Spoke with Jennifer, we reviewed Butrans 5 key messages. We discussed the medication guide and i asked if she would help us instruct the patient on proper use and application. I asked if she would also inform the patient to give Butrans 3 days to work before calling the Dr to give feedback. She agreed.
PPLPMDL0020000001	Shaker Heights	OH	44122	5/17/2011	Quick call at the window. Positioned Butrans for patients taking low doses of around-the-clock tramadol or Vicodin for chronic conditions who call for refills too soon or who ask for an increase or change in dose. He thanked me, waved, & walked away. Spoke with Michele (MA) & reviewed savings cards & appropriate patients.
PPLPMDL0020000001	Parma	OH	44129	5/17/2011	Quick call- Dr Paat said he did not remember Butrans. Reviewed Butrans key points & reminded him that Butrans is the only 7 day analgesic & only CIII long-acting opioid. He said he liked the once-a-week dosing. Discussed appropriate patient type & positioned Butrans for patients who are on low-dose Vicodin or tramadol who ask for an increase in dose or change in medication. Also reminded him to focus on commercially insured patients who can utilize savings cards, bringing them down to approximately \$15 out-of-pocket. He said he will try Butrans.
PPLPMDL0020000001	Parma	OH	44129	5/17/2011	Spoke with Terry (nurse) who said that Dr Roeheny was not in the office today & they are not allowing reps for the rest of the week. Reviewed with her formulary grids for Butrans & OxyContin & also went over appropriate patient type for Butrans.
PPLPMDL0020000001	Sagamore Hills	OH	44067	5/17/2011	Dr Scanlon said he really does not know why he has not prescribed Butrans yet. I asked if he saw merit in Butrans. He said yes & that he has no clinical objections. He said he truly thinks it is a matter of not remembering it. I told him my goal was to help him remember & asked him how frequently he sees patients for whom Butrans may be appropriate. He said daily. He then said that he actually had a patient yesterday & said he really should have prescribed it for him. I reminded Dr Scanlon that Butrans can be called in as it is CIII. I asked him if he sees enough of a benefit in Butrans to call a Butrans prescription in for that patient. He said he would retrieve the patient's file immediately & would make the call this morning. Also discussed savings cards & OxyContin as an option for appropriate patients beyond Butrans 20mcg.<font color=blue><b>CHUDAKOB's query on 05/27/2011</b></font>-Nice job of getting the physicians to take action! Did you follow-up to make sure he called the patient to change the script?<font color=green><b>APSEGAS's response on 05/27/2011</b></font>I just had lunch with him this week. (he called me his "favorite stalker" because I manage to see him at both locations with breakfasts & lunches so frequently. I did ask him about this & he said he did call in the script for that patient. He also said he should have more than just that patient, so we talked about ways to get him to think of Butrans for his other appropriate patients. He did agree that he has many, many patients who could benefit from Butrans. Looking forward to seeing results!<font color=blue><b>CHUDAKOB added notes on 06/02/2011</b></font>-OK! Good job! Stay persistent!
PPLPMDL0020000001	Westlake	OH	44145	5/17/2011	Dr is pain fellow starting July 1st at OH for one year program. After that he hopes to join a practice in chardon. He said that does like transdermal systems and thinks that Butrans would fit in well as an alternative to prescribing vicodin around the clock. We reviewed the initiation guide and FPI. We reviewed Purdue's pain products and reminded him that Ryzoit and OxyContin are also options. We discussed some of Purdue's resources to help him pick appropriate pain patients. (His wife is a school teacher for autistic kids in Brecksville, has one year old and a baby on the way)
PPLPMDL0020000001	Maple Heights	OH	44137	5/17/2011	Introduced Butrans to Dr Gene. Reviewed Butrans key points (indication, delivery system, appropriate patients, CIII, abuse/addiction potential). Discussed how Butrans may not be appropriate for patients on >80mg morphine & how OxyContin may be an option for some of those patients. He asked about adverse events- showed FPI section 6. He asked if it was more/less abusable than other opioids. Told him we have no comparative data & advised him to be just as cautious with Butrans as he would with other opioids. Also discussed structure of the patch itself & showed a demo. He asked about "street value". I told him I have no specific information on that & reminded him that it is an opioid with abuse/addiction potential. He said he could think of a few patients who may be good candidates & mentioned low back pain, spinal stenosis, & arthritis. Reviewed managed care & savings. He said he refers to pain mgmt if a patient starts needing "more & more" medication & handles it on case-by-case basis
PPLPMDL0020000001	Cleveland	OH	44103	5/17/2011	i talked to dr about her patients taking percocet, that are telling her their percocet isnt lasting long enough or asking for something different instead of increasing the dosage strength or interval.i asked dr to consider Butrans for those patients.dr said she will do that and has thought of a few patients but they haven't wanted to stop taking their percocet.we talked about dr speaking to patients,about Butrans,that arent happy with their current short-acting opioid and could perhaps benefit from once weekly dosing of Butrans.dr agreed and said that makes sense and will think of Butrans.i talked to dr about OxyContin formulary coverage and appropriate patients.i recommended Senokot-S
PPLPMDL0020000001	Maple Heights	OH	44137	5/17/2011	Spoke with Antuina, pharmacist, & reviewed Butrans indication, dosing, & appropriate patient type. Also went through managed care coverage & savings cards/e-voucher & discussed OxyContin savings cards. I asked what type of managed care mix they see at that location & she said it is a combination of Medicare, Medicaid, & commercial insurance. She said it is probably equal parts of each. Also asked her if they stock OxyContin & she said they do, but on a very limited basis.
PPLPMDL0020000001	Cleveland	OH	44106	5/17/2011	dr said he started a couple patients on Butrans last week,as they were taking tramadol and not controlled so he thought he would try Butrans as another option.we discussed appropriate patients,tapering of short-acting opioids and initiation of Butrans and i asked dr to continue starting more patients on Butrans,that are taking tramadol but not controlled or calling in earlier every month for refills,dr said he will do that.i recommended
PPLPMDL0020000001	Cleveland	OH	44113	5/17/2011	dr said he hasn't started anyone on Butrans yet,but he likes that it's transdermal, a patch and dosed once a week.dr asked who was the appropriate patient as he couldn't remember?i showed dr Butrans initiation guide,discussed appropriate patients,tapering of short-acting opioids and initiation of Butrans.dr asked who covers Butrans?we discussed formulary coverage for Butrans,dr said he has a lot of medicaid,medicare and commercial,we discussed Butrans patient savings cards for commercial plan patients.Sheila,dr nurse,takes all medication refill requests and she said this made sense to try Butrans in those patients calling early every month for refills of their short-acting opioids as they complain to her that their medication isnt lasting long enough.Sheila processes all insurance claims and prior authorizations so we discussed medicaid requirements for butrans approval.i asked dr if he could think of a few patients to try Butrans in and i'll follow-up next week,dr said yes.
PPLPMDL0020000001	Cleveland	OH	44103	5/17/2011	i talked to dr about Butrans being an option,for his patients that tell him their short-acting opioids arent controlling their pain.dr said he does get calls that vicodin or percocet isnt working and dr will consider a long-acting opioid at some point for these patients.dr said his only problem with Butrans is that he's not willing to do the prior authorization for medicaid patients and thats majority of patients here.i talked to dr about commercial plan patients and them using Butrans patient savings cards.i asked dr if he could think of 2 patients,commercially insured,to try Butrans in and get some clinical experience? dr said he didnt know off hand but will keep it in mind.we talked about OxyContin formulary coverage,appropriate patients and OxyContin savings cards.i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44106	5/17/2011	i talked to dr about appropriate patients to start on Butrans,proper tapering of short-acting opioids and initiation of Butrans,showed dr Butrans initiation guide.dr said his patients on Butrans say their pain is controlled and rarely do they need their short-acting opioids so dr is happy.i asked dr to think of more patients,like the one's he started on Butrans,that arent controlled on their short-acting opioids and perhaps once weekly dosing of Butrans could be an option.dr agreed.i recommended Senokot-S
PPLPMDL0020000001	Fairlawn	OH	44333	5/17/2011	I asked Dr. Weidman if she would continue to initiate Butrans therapy to patients who have a similar profile as her previous starts. She said she doesn't treat a ton of chronic pain but would keep it in mind.
PPLPMDL0020000001	Akron	OH	44319	5/17/2011	I asked Dr. Yee where he thought he would like use Butrans therapy. He explained that he liked it for patients currently on low doses of SAO's. He said that he liked it was a single entity and that it was a schedule 3.
PPLPMDL0020000001	Akron	OH	44310	5/17/2011	I asked Dr. Cremer where he was having success and he mentioned most patients were BWC patients and most all new starts were conversions from hydrocodone.
PPLPMDL0020000001	Akron	OH	44333	5/17/2011	Quick call. I reminded Becky that when she initiated Butrans therapy to a patient to utilize the savings cards in the sample room. She has started patients without a card and patients have complained of price.
PPLPMDL0020000001	Fairlawn	OH	44333	5/17/2011	I asked Dr. Oyakawa if he thought Butrans would fit somewhere in his practice and he said it would. I asked him why he hasn't trailed it on at least one patient and he said he would this week.
PPLPMDL0020000001	Akron	OH	44333	5/17/2011	Quick call. I asked Lisa if she felt comfortable identifying a Butrans patient and she said she did. She said she would keep it in mind for the remainder of the day!
PPLPMDL0020000001	Akron	OH	44333	5/17/2011	I stopped back in to drop off the patient education DVDs. Dr. Shah said that he really liked handing out patient education with a Rx of Butrans. I explained the DVDs and reminded him again to write for refills.
PPLPMDL0020000001	Independence	OH	44131	5/17/2011	Quick call- Dr Sundaram said he has two patients on Butrans so far. He said he has one male patient (who he has told me about) & one female patient who he started most recently. Presented patient information guide & asked Dr Sundaram if this kind of information would be useful for him to give to patients when prescribing Butrans or for him during patient counsel. He said he would like to use one when talking to patients & also wanted a few to keep on hand for patients to take with them. He said he tries to explain medications to patients when he prescribes a medication that is new for them. He said he would let me know clinical feedback when he gets it.
PPLPMDL0020000001	Cleveland	OH	44106	5/17/2011	worked pain management dept-seen call notes
PPLPMDL0020000001	Westlake	OH	44145	5/17/2011	I asked Dr Khalil if he would try Butrans after tramadol and before going to vicodin around the clock. He said he thought it made a lot of sense to prescribe Butrans in this place. He had questions about steady state, titration dosing, geriatric patients and we reviewed the FPI to address his questions and concerns. We reviewed Ryzoit as a once a day tramadol option and then OxyContin when Butrans may not provide adequate analgesia.
PPLPMDL0020000001	Maple Heights	OH	44137	5/17/2011	Spoke with Nurse, Helene, who said that Dr Dale was running two hours behind & therefore would not be coming back to speak with me for lunch. Attempted to leverage Butrans, a product that he has not been detailed on yet, but Helene said he was not even speaking to his staff at the moment, so i would have to talk to him another time. Reviewed Butrans key points with her. She said Butrans sounded like something he may be interested in. Scheduled a lunch for next month to see him. Reviewed managed care/savings cards for Butrans & OxyContin.<font color=blue><b>CHUDAKOB's query on 05/27/2011</b></font>-Can you see this physician often enough to make an impact?<font color=green><b>APSEGAS's response on 05/27/2011</b></font>-It doesn't seem so at this point. He is not on my top 4 tiers of physicians due to his access, although I was hoping between his two locations i would get to see him more than I have through scheduling lunches.<font color=blue><b>CHUDAKOB added notes on 06/02/2011</b></font>-OK. Thanks! Be sure to make good business decisions on who you are
PPLPMDL0020000001	Cleveland	OH	44109	5/17/2011	i talked to Nate,Pharmacist,about Butrans stocking,scripts they have seen here for Butrans and who's prescribing in area,we discussed Butrans initiation guide,proper tapering and initiation of Butrans.i asked Nate if the pharmacy staff would show patients the Butrans patient information booklet noting application and rotation of Butrans and the log book in back of booklet,as that patient education would help patients getting started on Butrans,Nate agreed and said that made sense,we discussed Butrans formulary coverage.i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44114	5/17/2011	i talked to dr about continually starting patients on Butrans,showed Butrans initiation guide and discussed proper tapering and initiation of Butrans.we talked about patients dr has started recently on Butrans and feedback from them,we talked about Butrans formulary coverage.i recommended Senokot-S
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/17/2011	I asked about movement which they said has started to pick up. I asked what questions patients had or about call backs and they had none. I explained steady state and prepared them for patients to call back on those first 3
PPLPMDL0020000001	Cleveland	OH	44114	5/17/2011	I talked to dr about patients he's starting on Butrans and why he's choosing Butrans.i showed dr Butrans initiation guide,discussed proper tapering and initiation of Butrans 5mcg or 10mcg,we discussed Butrans formulary coverage.i asked dr to think of a couple more patients that are taking short-acting opioids and their pain isnt controlled and if appropriate start on Butrans.dr agreed and i recommended Senokot-S
PPLPMDL0020000001	Akron	OH	44333	5/17/2011	Quick call. Dr. thanked me for bring ing breakfast and I gave him the Butrans FPI and explained it had recently been introduced to the market. I acknowledged that he does not see reps but left my card with him in case he had any questions.
PPLPMDL0020000001	Cleveland	OH	44114	5/17/2011	i talked to John,PA,about patients he's recommending to doctors to start on Butrans,we discussed Butrans initiation guide,tapering of short-acting opioids and initiation of Butrans and we talked about Butrans formulary coverage. John said he'll continue to recommend Butrans for patients he feels are appropriate,to the doctors and is looking forward to the dinner program next week.

	Cleveland	OH	44113	5/18/2011	dr said she hasnt thought about Butrans and asked me to review Butrans with her as we had lunch today and she had more time to think about who's really appropriate for Butrans in her practice.dr said she has a small group of patients taking tramadol and doesnt write a lot of narcotics.dr said she is overwhelmed and frustrated with being a dr as she's expected to do more but get paid less from insurance companies and pain is something she doesnt really like to manage.i asked dr to explain the benefits she saw in Butrans for her patients? dr said once weekly dosing is easy for a lot of patients instead of pills around the clock for their chronic pain and transdermal delivery with Butrans being in a patch.i asked dr if patients ever call in to office asking for refills,earlier than they should,so perhaps their short-acting tramadol isnt controlling their pain long enough? dr said yes they get those calls,i asked dr to think of Butrans for a couple of those patients if appropriate...
PPLPMDL0020000001	Parma	OH	44129	5/18/2011	Dr Gigliotti said he knows it is just a matter of time before he gets a Butrans patient. I agreed that based on what we have talked about in the past, that he likely has man patients who would be appropriate candidates. Discussed Butrans positioning & Dr Gigliotti said he "is ready to just do it". Reviewed managed care & savings cards for Butrans & OxyContin & spoke with Jazz (MA) to cover these details as well.
	Warrensville Heights	OH	44122	5/18/2011	Introduced Butrans to Dr Garwood, highlighting indication, dosing, CIII, abuse/addiction potential, & application. Also presented initiation guide & positioned Butrans for patients after NSAID's/COX-2's or instead of short-acting around-the-clock. He mentioned a few different specific patients who he thought may be good candidates for Butrans who had chronic conditions & were already on short-acting medications. He said he thinks Butrans sounds like a good option. He asked about adverse events- showed FPI section 6. Discussed titration ability every 3 days to a max dose of 20mcg. Also reviewed managed care & savings cards & he agreed that \$15 was a reasonable co-pay for commercially insured patients. Also showed him a demo & went over application, adhesion, & rotation. Positioned OxyContin q12h for appropriate patients beyond Butrans 20mcg & recommended Senokot-S for opioid-induced constipation.
PPLPMDL0020000001	Cleveland	OH	44114	5/18/2011	I talked to Laura,Pharmacist,about Butrans initiation guide,discussed appropriate patients,tapering of short-acting opioids,initiation of Butrans,importance of stocking Butrans and Laura said when she see's a script for Butrans she will stock it. I asked Laura to discuss with patients the Butrans application,rotation of the transdermal system and the log book section in the Butrans patient information booklet.Laura said she will when she gets scripts and see's patients.we talked about OxyContin being an appropriate option for patients,formulary coverage and OxyContin conversion guide and we discussed doctors writing OxyContin in the area and what strengths.I recommended Senokot-S
PPLPMDL0020000001	Warrensville Heights	OH	44122	5/18/2011	Reviewed Butrans indication, dosing, delivery system, CIII & abuse/addiction potential with Dr Mueller. He said he generally does not prescribe opioids & refers to pain management whenever possible. He said he did think that Butrans sounded like an interesting option for some patients. He looked at the demo patch with Dr Kessler. Positioned OxyContin q12h as an option for appropriate patients beyond Butrans 20mcg.
PPLPMDL0020000001	Cleveland	OH	44113	5/18/2011	I talked to dale,pa,about appropriate patients to start on Butrans,showed Butrans initiation guide and asked dale if he would consider patients who are taking tramadol that arent controlled,to start on Butrans? dale said he's been thinking of vicodin and percocet patients but that makes sense to consider those patients.we talked about proper tapering of short-acting opioids and initiation of Butrans.we talked about Butrans formulary coverage.i recommended Senokot-S
	Cleveland	OH	44113	5/18/2011	I talked to dr about appropriate patients she's starting on Butrans,showed dr Butrans initiation guide,discussed proper tapering and initiation of Butrans and we discussed dr starting more patients on Butrans,bt earlier in therapy so right after the 1st dose of short-acting opioids arent controlling patients pain,to consider Butrans right there instead of refilling short-acting opioids.dr said she is pleased with clinical results she's seeing once patients get started on Butrans and hasnt heard any complaints from patients that she's started on Butrans.we discussed Butrans formulary coverage and I recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	5/18/2011	I talked to Laura about appropriate patients to start on Butrans,showed Butrans initiation guide and talked about her patients taking Vicodin that are asking for something else as their Vicodin isnt lasting long enough and instead of increasing the vicodin dosage strength or increasing dosing interval,i asked Laura if she would consider Butrans,if patients are appropriate? Laura said she might as dr nickels has started some patients on Butrans so she wants to see how they do and she might consider prescribing but she feels pressured to see so many patients every day that she doesnt have time to explain a new medication to patients,we talked about Butrans application dvd/patient information booklet and how that would be an educational tool to help her as it relates to the time needed when explaining a new medication or medication change to patients,laura said she'll think about it and appreciated the information.
PPLPMDL0020000001	Akron	OH	44304	5/18/2011	I asked Dr. Amanambui if he felt comfortable prescribing Butrans to patients currently on low dose hydrocodone and he said he thought so. I asked if he had many patients that were currently on SAO's that he thought could benefit from a LAO and he said yes. I showed him how to initiate therapy to an opioid experienced patient. He asked about coverage which I explained and closed utilizing the co-pay cards.
PPLPMDL0020000001	Akron	OH	44320	5/18/2011	I asked Misty if she has continued to initiate Butrans therapy to patients with similar profiles. She said that she liked the idea of Butrans mainly because it was a schedule 3.
PPLPMDL0020000001	Cleveland	OH	44143	5/18/2011	I asked doc what he does for patients' pain after tramadol is no longer adequate. He said he would go to narcotics. I discussed Butrans as an option - the indication, positioning, CIII status. He asked about the molecule. I explained its Buprenorphine. He was familiar with it. He said it sounds like a great alternative as he writes a lot of pain drugs. He asked about coverage. I explained the commercial coverage and the use of the savings cards. I explained that medicaid/medicare will be difficult to get through. He said he understands as it(butrans) is still relatively new. I explained the initiation guide and how to start opioid naive and opioid experienced patients. He said he would try it.
PPLPMDL0020000001	Cleveland	OH	44113	5/18/2011	I talked to dr about considering Butrans for his patients taking short-acting opioids for chronic pain that meet Butrans indication and are asking dr for something different as their short-acting opioids arent controlling their pain.dr said he only has a few patients that are chronic pain taking short-acting opioids,the majority of patients are acute pain.so I told dr to consider Butrans for the chronic pain patients that he feels are appropriate and could benefit from a long-acting opioid and once weekly dosing of Butrans: dr said okay he would keep in mind and asked about insurance coverage so we discussed formulary coverage for Butrans.I recommended Senokot-S
PPLPMDL0020000001	Mayfield Heights	OH	44124	5/18/2011	Window call.....HCP said he did not need more Butrans savings cards. Reminded her of the commercial covered plans and also how to initiate dosing - 5mcg for opioid naive, 10mcg for opioid experienced. Nothing learned.
PPLPMDL0020000001	Akron	OH	44320	5/18/2011	I asked Dr. Bonyo what he felt the difference between a Vicodin and Percocet patient was. He didn't really respond but he took the initiation guide I was holding and said he would keep it in mind. Nothing new learned.
PPLPMDL0020000001	Akron	OH	44333	5/18/2011	I asked Dr. Brown about the types of patients she had initiated Butrans therapy to. She said that all 3 were already on opioids and those will be the patients she continues to treat with Butrans therapy. She mentioned many of her patients are past the point of Butrans and I then reminded her about OxyContin.
PPLPMDL0020000001	Cleveland	OH	44113	5/18/2011	worked pain management dept,orthopedics office and internal medicine office (premier physicians)-see call notes on dr gadmack,flores and nouralain
PPLPMDL0020000001	Fairlawn	OH	44333	5/18/2011	I asked Dr. Domdera if he was any closer to prescribing Butrans therapy and he said he was. He mentioned that he typically liked to wait a while to hear feedback from other practitioners. I mentioned that I had an upcoming dinner program and he expressed interest in coming.
PPLPMDL0020000001	Mayfield Hts	OH	44124	5/18/2011	Window call. Doc said that he has been writing a few scripts of Butrans but they all seem to require a PA. I asked him if he recalls which plans he did not know. I explained that he should focus on commercial patients as medicaid/medicare will likely not cover Butrans. Gave him a formulary grid and asked him to keep trying to prescribe. He said ok.
PPLPMDL0020000001	Westlake	OH	44145	5/18/2011	I told Dr that Butrans has been available since January and has he thought about giving it a try. He said he he will take another look and to leave the info, he said I could stop back next Monday to follow up.
PPLPMDL0020000001	Fairlawn	OH	44333	5/18/2011	Quick call. I asked Dr. Parisi about his success with Butrans. He said that he had success and would continue to keep it in mind. No new information learned.
PPLPMDL0020000001	University Heights	OH	44121	5/18/2011	I asked doc what he remembers about Butrans. He remembered that it is a 7 day pain patch for patients that have not been on opioids. I confirmed that he was correct and that Butrans is also indicated for patients that are opioid experienced as well. He said he has not had an opportunity to prescribe yet. I reviewed the formulary coverage and the importance of the savings card. Nothing else learned.
PPLPMDL0020000001	Akron	OH	44320	5/18/2011	Talked to the pharmacist about Butrans movement. I asked if there was anyone else in the area that is worth calling on and he mentioned some of my current Pain docs. I went over the patient education guides and explained removal and application.
PPLPMDL0020000001	Parma	OH	44134	5/18/2011	Dr Hernandez said that he just had a patient in who was on 5mcg Butrans for chronic low back pain & the patient complained of nausea. Dr Hernandez said that he is having the patient stay on Butrans & take fenergan for the nausea. I asked Dr Hernandez, as a supporter of both OxyContin & Butrans, how he determines whether someone is an OxyContin patient or a Butrans patient. He said that for him, he will most often prescribe Butrans now that it is available because he finds more & more patients who do not want to take oral pain medication. Reminded him that Butrans is an opioid, & therefore does carry abuse/addiction potential. Also discussed pharmacy stocking- Dr Hernandez said that he is prescribing the entire box of 4 patches for patients more often now because he is tired of getting hassled & his patients getting frustrated with pharmacies.
PPLPMDL0020000001	Cleveland	OH	44124	5/18/2011	Doc said he just printed Oxycontin savings cards from the website as he had run out. Provided 2 boxes. He said it seems like less insurers are covering it without a PA. Mostly medicaid/medicare. I gave him a formulary grid and explained the quantity limits with medicaid. He does not do PAs in his office so patients are switched to products that dont require a PA. I asked him what he remembers about Butrans. He said he remembers that it is a patch. I explained the 7 day delivery and CIII status. I asked him if he sees a place for such a product in his practice. He said many of his patients require more analgesia than a CIII.
PPLPMDL0020000001	Cleveland	OH	44113	5/18/2011	dr said she couldnt remember much about butrans and wanted to know the indication and dosage strengths again.we talked about Butrans 5 core messages,initiation guide and proper tapering of short-acting opioids specifically we talked about doctors patients taking tramadol for their chronic pain that are telling her or calling into office saying their tramadol isnt lasting long enough or controlling their pain.i told dr that she could start patients on Butrans at that point,if appropriate,instead of increasing tramadol dose.dr said ok that made sense and she'll consider a couple patients and see what happens.dr asked who's covering Butrans? we discussed Butrans formulary coverage and Butrans patient savings cards.
PPLPMDL0020000001	Parma	OH	44134	5/18/2011	Spoke briefly with tech, Cheryl, who said Allene was not in today & the other pharmacists were unable to speak with me today. Reviewed savings cards/e-voucher for Butrans & OxyContin savings cards. She said she has not seen any Butrans get dispensed, but she was unsure. She said she would leave my information for Allene.
PPLPMDL0020000001	Cleveland	OH	44106	5/18/2011	dr said she hasnt started anyone on Butrans and isnt sure if she will as she doesnt have a lot of patients on narcotics.i asked dr if she had any patients on tramadol,that had chronic pain? dr said yes she did.i showed dr Butrans initiation guide and said that patients who are taking tramadol for chronic pain but perhaps telling her that their pain isnt controlled with their short-acting medication could benefit from once weekly dosing of Butrans,dr said that made sense and she would consider it if patients ask for something else.we discussed tapering of short-acting opioids,initiation of Butrans and formulary coverage.i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44122	5/18/2011	Reviewed Butrans indication, dosing, delivery system, CIII & abuse/addiction potential. Presented initiation guide & she looked over pg 6 with Dr Kessler. She said she had paperwork to get to & could not stay to talk longer. Dr Kessler said that many of the residents lack the experience & comfort level to prescribe opioids, which he thinks is somewhat unfortunate. He said he would share the Butrans information with the residents in effort to get them more comfortable with the idea of it, if nothing else just in case a patient comes to them already on Butrans.
PPLPMDL0020000001	Warrensville Heights	OH	44122	5/18/2011	Dr Kessler said that he has not prescribed Butrans. He said that because he works mostly with the residents & in administration, he does not prescribe as many opioids as in the past. He said that often, the resident's comfort level is not high enough with pain management to prescribe opioids for patients, whereas he himself is very comfortable. Reviewed Butrans key points & discussed that it is long-acting & CIII. Also reminded him of abuse/addiction potential. He asked the "street value" I told him I know of no specifics but again said that it is abuseable & addictive, as all opioids are & he should be just as cautious in prescribing. He asked about managed care-reviewed formulary grid & savings cards. He said he has no problem prescribing Butrans if he has the opportunity to do so when seeing patients. Also discussed OxyContin q12h as an option for patients beyond Butrans 20mcg. Showed him a demo patch & discussed adhesion.
PPLPMDL0020000001	Cleveland	OH	44113	5/18/2011	I talked to dr about Butrans 5 core messages,initiation guide discussing proper tapering of short-acting opioids and initiation of Butrans,Butrans patient information booklet/dvd and Butrans formulary coverage.dr asked why he would start patients on Butrans if his patients are controlled on their short-acting opioids? I told dr that's NOT who I'm asking him to consider for initiation of Butrans,i told dr if patients are asking him for something different because their short-acting opioids,like tramadol,arent lasting long enough or not controlling their pain,thats who he could potentially consider to start on Butrans.we talked about moderate pain patients taking tramadol,hydrocodone or oxycodone combo's around the clock for their chronic pain,that arent controlled,to be considered for Butrans therapy.dr asked who's covering Butrans? dr said he has a lot of workers comp,medicaid and commercial pain patients,we discussed all of those.dr said if his patients are taking short-acting opioids
PPLPMDL0020000001	Warrensville	OH	44122	5/18/2011	Quick call with Dr Rakowsky who asked what Butrans was while I was talking to Dr Kessler & Dr Kersey-Barrett. Went over Butrans indication, delivery system, & dosing. She immediately said she does not "deal" with "any of those drugs" & then left the room.

PPLPMDL0020000001	Independence	OH	44131	5/18/2011	Reminded Dr Jack that he had told me on my last visit that he would not prescribe Butrans without first speaking to fellow physicians or experts about their experience with it. He said that he doesn't think that is necessarily true, but he does want to talk to other physicians to hear about their experiences with Butrans. I asked him if he has spoken with Dr Nickels, who he mentioned as someone he would want to talk to about it. He said he has not yet, but would. I explained limited availability of seating at the program, told him Dr Nickels is registered to attend. Dr Jack said that if Dr Nickels goes, he will go. I asked how soon he will speak to him. He committed to calling Dr Nickels today. I asked him to also commit to registering online if he does plan to attend due to limited attendees permitted. He committed to do this today.
PPLPMDL0020000001	Independence	OH	44131	5/18/2011	Caught Dr Rob for a quick hallway call. I asked him what his thoughts were on attending the Butrans dinner program next week. He looked at the invitation & said that this is something he would like to attend. Reviewed format of the program & encouraged him to attend, telling him that because Butrans is not a product he has heard a program for before & because of the attendees we have coming, it would be a great opportunity for him to discuss Butrans with peers. He said he was truly going to try to make it next Tuesday.
PPLPMDL0020000001	Cleveland	OH	44195	5/19/2011	I talked to dr about appropriate patients to start on Butrans,showed Butrans initiation guide and discussed patients taking percocet around the clock for their chronic pain that dr feels could benefit from a single entity opioid and once weekly dosing.dr said patients will sometimes ask for something else if their percocet isnt controlling their pain so he will keep Butrans in mind as an option for some patients.dr asked if i talked to his NP,Mae,about Butrans? I told dr i spoke with Mae briefly about Butrans but haven't been able to get a lot of time with her.dr said to follow-up with her again as she is treating all of his patients and needs this information again.i asked dr to start 2 patients on Butrans,per our discussion,and i'll follow-up in next week to hear some feedback.i recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44103	5/19/2011	I talked to Dave,Pharmacy Manager,about Butrans stocking,any scripts they have seen for Butrans and who's prescribing Butrans,dave said they have seen a couple of scripts here for Butrans.I asked Dave to discuss Butrans application and rotation of the transdermal system with patients and showed this information in the Butrans patient information booklet. I asked Dave to show patients the log book section in this booklet so that patients can remember where they applied Butrans,the date and how they disposed of Butrans.Dave said he would do this,as they have been focusing their discussion with patients on these areas. we discussed Butrans formulary coverage and Butrans patient savings cards,they dont need them here as they have electronic vouchers for Butrans.we talked about OxyContin stocking,appropriate patients and OxyContin formulary coverage and OxyContin savings cards.i recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44104	5/19/2011	I talked to dr about his patients taking percocet for chronic pain that perhaps ask him for something different,where a long-acting opioid could be appropriate,dr said he has patients say that all the time that their short-acting opioid isnt controlling their pain so he'll usually prescribe OxyContin as its available on Medicaid.we talked about dr considering any commercial plan patients,that tell him this about percocet,where he feels once weekly dosing of Butrans could be an option,dr said he only has a couple of those patients but will keep it in mind for them and we talked about Butrans patient savings cards. we talked about appropriate patients for OxyContin,showed OxyContin visual aid for discussion,OxyContin conversion guide to discuss conversion and 7 tablet strengths and OxyContin formulary coverage.i recommended Senokot-5
PPLPMDL0020000001	CLEVELAND	OH	44109	5/19/2011	I talked to Rod,Pharmacy Manager,about Butrans stocking and rod said they did order Butrans 10mcg as they had a script come through pharmacy.we talked about doctors writing Butrans and importance of having Butrans 5mcg and 10mcg stocked.i asked Rod to show patients Butrans patient information booklet-sections on application and rotation of Butrans transdermal system and log book in back of booklet.we discussed Butrans formulary coverage.Rod said ok he hasn't done that but that would be helpful to patients.we talked about OxyContin stocking,appropriate patients for OxyContin,formulary coverage and OxyContin savings cards. I recommended Senokot-5
PPLPMDL0020000001	Alkron	OH	44333	5/19/2011	I asked Lisa if she would continue to initiate therapy to the appropriate patients and she said she would based on the success she has had. She said she likes that Butrans provides steady state plasma levels and that it is Revealed the Butrans indication and patient type with her. She said she has not seen any appropriate patients yet. I explained the positioning - after tramadol or opioid naive. I invited her to the Peer Group speaker program on 5/24 and that we will have other programs throughout the summer. She said that the summer is a difficult time because of the kids and vacations.
PPLPMDL0020000001	Lyndhurst	OH	44124	5/19/2011	I talked to Erin,Pharmacist,about Butrans stocking and she said they do have Butrans 5mcg and 10mcg in stock as they finally got some scripts from dr nickels patients for Butrans.we talked about the importance of Butrans patient information booklet and discussing application and rotation of Butrans and the log book section in back of booklet and I asked Erin if she and the other pharmacist could be sure to discuss this information with patients? Erin said yes that made sense and would help patients get started on Butrans.we discussed Butrans initiation guide discussing proper tapering of short-acting opioids,initiation of Butrans and Butrans formulary coverage.we talked about OxyContin stocking,appropriate patients and OxyContin formulary coverage and OxyContin savings cards. I recommended senokot-5
PPLPMDL0020000001	Stow	OH	44224	5/19/2011	Spoke to Jeff, he said he still has not seen scripts from Pain management for Butrans. He said he will order when they are writing. I told him Dr Yuang is writing and he will see scripts soon. They do not stock Oxycontin as do the Drs do not write that as well
PPLPMDL0020000001	Stow	OH	44224	5/19/2011	Dr said he didnt prescribe yet and asked if I had some sort of conversion chart and I said I do not have a conversion chart but I do have an initiation guide that shows what the patient is currently taking is where a patient would start on Butrans. HE said he thinks we have a good thing here so I asked why hasn't he written then and he said he just needs to write it once and remember. I asked how often he is seeing new patients come in, he said they get new patients every week. I asked what are they coming in on and he said everything, Vicodin PErcoctet, Tramdol. I asked are they chronic and he said yes. I said those are Butrans patients. HE said he promises he will. He is putting in a pharmacy and wondering if they will get special pricing. his wholesaler is Amerisource Bergan. Spoke with Kim and Marcy in billing, Lisa in BWC, Rachel and Angie are the triage nurses but only spoke with Rachel. Audre and Angela work on medical side as well with prescriptions.
PPLPMDL0020000001	Cleveland	OH	44195	5/19/2011	worked anesthesia/pain management-couldnt see Dr.Vrooman,Dr.Katyal,Dr.Mekhail and Dr.Syed so I left Butrans fpi,initiation guide,Butrans patient information booklet,Butrans formulary grid, my business card and Peer Group dinner invitation, for all of the physicians. worked chronic pain dept-had to leave Butrans initiation guide,patient information booklet and Butrans formulary grid for Dr.Covington as he was with patients and I couldnt
PPLPMDL0020000001	Westlake	OH	44145	5/19/2011	I asked the Dr what his hesitation is in trying Butrans. He said he will when he sees the right patients. I asked if he would prescribe Butrans before going to vicodin around the clock. He agreed to prescribe. He said he is still prescribing OxyContin and finds that more of his patients may be appropriate for OxyContin.
PPLPMDL0020000001	Stow	OH	44224	5/19/2011	Sharon said she has not written yet but she has not written much of anything, she is still shadowing the Drs and Steve and observing what they do. I asked what type of patient if she were to come across patient and she asked if we could review information. We reviewed dosing and initiation and when she sees patients who are not controlled on short acting and instead of increasing or changing, writing Butrans.
PPLPMDL0020000001	Lyndhurst	OH	44124	5/19/2011	Discussed the Butrans patient type with doc. Asked her if she has started any new patients lately and if she has written the scripts with refills. She said that she has a couple of patients on Butrans but she is not sure if she wrote for refills. She forgot it can be called in. I reminded her of the formulary coverage. Invited her to the Peer group program but she cant make it. She suggested I talk to Paricia about it.
PPLPMDL0020000001	South Euclid	OH	44121	5/19/2011	Window call.....Reviewed the Butrans patient type and indication. Gave him an invitation to the 5/24 peer group. No commitment. Scheduled appointment for further discussion.
PPLPMDL0020000001	Barberton	OH	44203	5/19/2011	I asked Dr. Patel if he was continuing to initiate therapy to new patients and he said he absolutely was. I asked him if he was titrating as needed and he said that most of his patients were now on the 10 mcgs.
PPLPMDL0020000001	Stow	OH	44224	5/19/2011	Dr said he wrote 2 scripts of Butrans but doesnt know if they went through, he has not heard anything back yet. I spoke with Marcy and she showed me the script that was for 5mcg and the patient was med D Caremark and it needed prir authed. She said she is going to try again but they are giving the run around. I asked Dr what is the protocol with patients, is he getting them on short acting or are they getting switched at consult with Bressi. HE said he does consults too. He said patient comes in on short acting, they get the good and the bad and need to sort them. They like to do some sort of procedure and see if the pain is real, they see if they trust the patient and then they will start patient on long acting. I asked if he does most of the switching to long acting and he said they all do. We discussed initiation and titration and managed care coverage. I asked if he thinks this will fit into his pain regimen and he said yes. Lisa in BWC said she had a patient who may be good on Butr
PPLPMDL0020000001	Cleveland	OH	44102	5/19/2011	I talked to dr about Butrans 5 core messages,fpi,initiation guide,Butrans patient information booklet,Butrans formulary coverage and Butrans patient savings cards.this was my 1st time meeting dr and having lunch,dr is new to practice and is surprised with the number of patients taking opioids,we talked about patients taking vicodin or percocet as dr said they have a lot of patients on these short-acting opioids for chronic pain and he does think a long-acting opioid is appropriate for some patients.i showed dr Butrans initiation guide and discussed proper tapering of short-acting opioids,initiation of Butrans and coverage on BWC and commercial plans.i asked dr to start a couple patients on Butrans,to get some clinical experience,dr agreed.we talked about OxyContin being an option for patients and who was appropriate for OxyContin,showed dr Butrans conversion guide noting 7 tab strengths and OxyContin formulary coverage and OxyContin savings cards.i recommended Senokot-5
PPLPMDL0020000001	Stow	OH	44224	5/19/2011	Steve said he still has not seen the right type of patient. I asked him who is the right patient and what types of patient does he think Butrans will work best in. HE said patients who have never taken any types of opioids. I said isnt that somewhat of a small window considering he works in one of the biggest pain clinics where he said most patients come in on some sort of opioid. HE said yes. I said when he sees the patients after consultt who are on 3,4,5 Vicodin, PErcoctet, Tramadol a day is where he would taper them down and start them on Butrans. I asked how many new patients he sees a week and he said he didnt know, alot he guesses. I said how many of the m are chronic, he said all. I asked when they come in on 4-6 short acting and are chronic, will he write Butrans and he said yes.
PPLPMDL0020000001	East Cleveland	OH	44112	5/19/2011	I reminded doc of the Butrans patient type and indication. He said he still has not seen any patients on it yet. I asked him if he needs to see a patient already on it before he tries it. He said yes. He is concerned because the product is still new. I explained to him that it is a CII and the molecule has been around for years. He reluctantly said he would try it. I asked for just one patient trial. He also said that patients are no longer liking oxycotin. Patients have complained that even the generic oxycotin is not available. Told him that in fact, the generic will become harder to find in the pharmacists due to limited availability.
PPLPMDL0020000001	Cleveland	OH	44195	5/19/2011	I talked to Anne,NP,about considering patients who are taking tramadol but not controlled,to start on Butrans.Anne said she hasn't thought of Butrans as an option for patients and she is waiting to see what Dr.Stanton-Hicks does with his patients and he's not prescribed Butrans yet.I talked to Anne about the fact that she's an NP,she can prescribe Butrans as its a CII,but Anne said it doesnt matter as she discusses ALL medication changes or starts for her patients with Dr.Stanton-Hicks,so he has to approve.i showed Anne Butrans initiation guide,discussed proper tapering of short-acting opioids and initiation of Butrans.we discussed Butrans formulary coverage and Butrans patient savings cards for commercially insured patients.i asked Anne to consider 2 patients,taking tramadol but not controlled and perhaps asking her for something different and a once weekly dosing option could be an option for them.Anne said she will consider Butrans for some patients.i recommended Senokot-5<font color=blue><b>-CHUDAKOB's query on 05/27/2011/<b>-</font>Did you ask Anne how you can get to Stanton-Hicks to tell him about Butrans? She won't write it if he doesn't give her the go ahead. Sound familiar?<font color=green><b>-BROOKAM's response on 05/27/2011/<b>-</font>she said to leave information with Pat,he doesnt meet with Reps.she has said this to me several times. I am not sure who you are referring to (sound familiar comment?) but truthfully at the end of June,if she's not done anything with Butrans i will not be focusing on her. i do need to just come out and say Anne,if Dr.Stanton-Hicks hasn't started anyone on Butrans,are you telling me that you will NEVER consider Butrans as an option? if the answer is no,she wont be a core for me<font color=blue><b>-CHUDAKOB added notes on 06/02/2011/<b>-</font>Sound like a pian! I was referring to Dr. Nickels and his NP's
PPLPMDL0020000001	Cleveland	OH	44121	5/19/2011	Window call.....reviewed the Butrans indication/patient type and covered insurance plans. Gave formulary grids and invitation to 5/24 peer group speaker program.
PPLPMDL0020000001	Stow	OH	44224	5/19/2011	Dr said he has not written Butrans. HE said lets figure out the patient type. I asked what his patients who are new to the practice come in on and he said short acting of some sort. I said if they are chronic and they are no long er controlled, he would use Butrans there. He said the only problem with patients on Vicodin is they like their Vicodin. I asked do they like their Vicodin or do they likethe pain relief. HE said these people all come on Vicodin from PCPs when patients feel the high at the beginning they feel that it is working. When they have steady blood states where Drs would like them to be, they feel it is not working. HE said also, the problem he runs into with patches is allergic skin reactions and can we rub benidryl under our patches I said they can use water only. HE said their is a nasal benedryl as well. HE said he would try it. We reviewed dosing and managed care plans with savings cards. HE was confused on card and how many times can use.
PPLPMDL0020000001	Lyndhurst	OH	44121	5/19/2011	Spoke to Bill about the stocking of Butrans. He confirmed that they do have Butrans but he has not seen any scripts for it. I explained the positioning and the savings cards. He asked why the doctors are still prescribing oxycotin TID. I explained that we, as reps, try to explain to docs that oxycotin is only indicated q12. Bill said that he chooses not to fill scripts that are written for Oxycontin TID.
PPLPMDL0020000001	Cleveland Hts	OH	44118	5/19/2011	Discussed the Butrans 5 selling messages. Doc asked how Butrans differs from Fentanyl and what is Butrans most like. I explained that there is no head to head data with fentanyl. I also explained that there is no other 7 day delivery of an opioid analgesic. He did not remember that it is 7 days. I discussed the positioning - after NSAIDS/tramadol. He asked if those patients allergic to hydrocodone would also be allergic to Butrans. I told him we had no studies on that. I did review the AE profile of Butrans. He said vicodin is a lot cheaper than Butrans. I explained the commercial coverage and the savings cards. He said that works since they no longer take samples and he likes the \$40 savings. He said he would like to give Butrans a try and asked me to keep on him about it. He also asked me to schedule another lunch. [already scheduled]. Gave oxycotin coverage reminder.
PPLPMDL0020000001					



PPLPMDL0020000001	Highland Heights	OH	44143	5/19/2011	Window call....Reminded doc of the commerical insurance coverage and the savings cards program. I asked him if he would be interested in attending a speaker program about Butrans. I gave him an invitation. He said he might be able to go another time.
	Cleveland	OH	44109	5/20/2011	dr said he hasnt thought of Butrans lately and asked me to remind him of the indication and appropriate patient type.i showed dr Butrans visual aid for the indication,discussed Butrans 5 core messages and showed dr Butrans initiation guide for appropriate patients to start on Butrans.dr said ok,made sense and he would think of a few people to try Butrans on as he does like the once weekly dosing option of Butrans and he likes that the medication is transdermal.we discussed insurance coverage for Butrans and Butrans patient savings cards.i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44104	5/20/2011	dr said he started another patient on Butrans,we talked about why he chose Butrans and discussed appropriate patients to start on Butrans.i showed dr Butrans visual aid discussing opioid naive and asked dr to consider Butrans as an option before patients are started on short-acting opioids,dr said he'll consider that if patients have chronic pain because he normally starts patients on short-acting opioids and over time will decide if a long-acting opioid is appropriate.we discussed Butrans formulary coverage and i asked dr to continue starting patients on Butrans,per our discussion today,dr agreed.i recommended Senokot-S
PPLPMDL0020000001	Barberton	OH	44203	5/20/2011	I asked Dr. Minich if Butrans was a therapy that she could see herself prescribing for the appropriate patients. She said she still wasn't sure. I reminded her that this was a schedule 3 LAO and a single entity therapy. I asked if she understood where to write it and she seemed unsure so I explained patient type utilizing the initiation and titration guide.
	Cleveland	OH	44104	5/20/2011	dr said she hasnt thought about Butrans as an option,keeps forgetting and asked what the indication was again and who covers Butrans? I showed dr Butrans visual aid,discussed indication and appropriate patients for Butrans,showed Butrans initiation guide and discussed formulary coverage.i asked dr to think of 2 patients that can benefit from Butrans,taking short-acting opioids but not controlled and have commercial insurance,dr agreed.i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44104	5/20/2011	dr said she likes the idea of Butrans being in a patch and once weekly dosing option yet forgot about the insurance coverage and hasnt started anyone yet.i showed dr Butrans initiation guide and visual aid to discuss appropriate patients,tapering of short-acting opioids and initiation of Butrans.we discussed Butrans formulary coverage and use of Butrans patient savings cards.i recommended Senokot-S
PPLPMDL0020000001	Akron	OH	44319	5/20/2011	I let Jon know that I had spoke with Dr. Yee about Butrans and left him some patient education guides and Introduced Butrans using the FPI.
	Cleveland	OH	44109	5/20/2011	dr said he did start a patient on Butrans,that was in the hospital and going home and instead of giving the patient tramadol,dr decided to try Butrans because the patient didnt want to take pills around the clock.we talked about Butrans application and rotation weekly,the Butrans patient information booklet and Butrans formulary coverage.i asked dr to start 2 more patients,perhaps taking tramadol but not controlled,on Butrans,dr agreed.i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	5/20/2011	dr said he hasnt started anyone on Butrans and wasnt sure if he would because of insurance coverage,dr asked about coverage for medicaid patients,we talked about doctors BWC and commercial plan patients because dr said he does have a lot of those patients,i asked dr to think of 2 patients with BWC or commercial insurance that are taking vicodin or percocet and their pain isnt controlled,and start them on Butrans to just get some clinical experience.dr said he'll think about it and appreciated the information.i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	5/20/2011	i talked to dr about considering Butrans for her patients that tell her their tramadol isnt controlling their pain anymore and they are asking for something different,dr said she hasnt had anyone say that recently but does know of patients who arent happy taking tramadol around the clock so she will consider Butrans.dr asked about insurance coverage so we discussed Butrans formulary coverage.i asked dr if she can start 2 patients on Butrans,to get some clinical experinece,per our discussion today? dr said she would.i recommended Senokot-S
PPLPMDL0020000001	Euclid	OH	44119	5/20/2011	Quick call...reminded doc of the appropriate Butrans patient - after NSAIDS/tramadol. He said he would usually go to hydrocodone but butrans would be a option. I explained the once weekly application and the CII status.
PPLPMDL0020000001	Berea	OH	44017	5/20/2011	Gave formulary grid and initiation guide.
PPLPMDL0020000001	Berea	OH	44017	5/20/2011	Dr said he started a few new patients on Butrans, but walked away before I could find out more. It looked like 2-3 savings cards were gone. Staff said they have not heard any feedback yet and did not know if any managed care issues.
PPLPMDL0020000001	Akron	OH	44312	5/20/2011	Quick call through the window. I let Dr. Kile know that I was with a new company and carrying OxyContin and Butrans. I asked if I could schedule a lunch to talk with him more about the use of Butrans. He asked for my card and said they would let me know.
PPLPMDL0020000001	Berea	OH	44017	5/20/2011	Quick follow up. I told Dr last time you said you would convert a patient from low dose vicodin to Butrans. I reviewed the initiation guide and asked if he would prescribe for that type of patient, he agreed.
PPLPMDL0020000001	Cleveland	OH	44109	5/20/2011	worked pm&r dept and internal medicine-left Butrans fpi and initiation guide with my business card for Dr.Lindheim and Dr.Harrington
PPLPMDL0020000001	Lakewood	OH	44107	5/20/2011	I asked Dr if he has patients who are taking tramadol or vicodin every day and meet the indication for Butrans. He said he did and he would give Butrans a try. I asked how many patient it will take him to get a fair trial and he didn't know but said he will try a few and go from there. I reviewed the managed care for Butrans and for OxyContin for Medicaid patients.
PPLPMDL0020000001	Cleveland	OH	44106	5/20/2011	i talked to George,Pharmacist,about Butrans stocking,scripts they have seen here for Butrans,who's prescribing Butrans and his role in patient education for Butrans.i asked George to focus on Butrans patient information booklet-section on application and rotation of Butrans and log book with patients,George agreed.we discussed Butrans formulary coverage and savings cards.i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	5/20/2011	i talked to Ron,Pharmacist,about Butrans stocking,scripts he has seen for Butrans here and who's prescribing Butrans.i asked Ron if he could focus his patient discussions on the Butrans application and rotation of the transdermal system and also the log book section in Butrans patient information booklet.we discussed Butrans formulary coverage.Ron agreed.we talked about OxyContin stocking and who's prescribing and i recommended
PPLPMDL0020000001	Akron	OH	44319	5/20/2011	I asked Dr. Wu if he thought that based on our last discussion if Butrans could benefit his practice and how he is treating chronic pain. He said that he like it because it was still a schedule 3 and a LAO. He said he had many patients that could benefit from a therapy like this.
PPLPMDL0020000001	Westlake	OH	44145	5/20/2011	I asked the Dr to tell me about his success with Butrans. He said he is continuing to prescribes and for most patients they are doing well. I asked about titrating and he said he has had to titrate at least 2 patients. He said he thinks the girls may have had to do a few prior auths but overall it has been going thru.
PPLPMDL0020000001	Olmsted Falls	OH	44138	5/20/2011	Spoke with Matt, He said that he has seen at least 2 scripts but could not remember which Drs wrote. we reviewed Butrans medication guide and how to instruct patients on proper use. I asked for his assistance in telling the patients how to use Butrans and he agreed. We discussed steady state for Butrans for him to let the patients know what to expect. Reminder about OxyContin as an option when Butrans may not provide adequate analgesia.
PPLPMDL0020000001	Westlake	OH	44145	5/20/2011	Quick follow up. Dr said that he has not tired Butrans yet when he saw me. I reviewed the initiation guide when he asked if he would try just a few patients who are on low dose vicodin and are asking for more tablets. He said that he is afraid managed care will be a hassle, i reviewed the managed care for Butrans and asked him to focus on commercial patients. I reviewed OxyContin as an option when Butrans may not provide adequate
PPLPMDL0020000001	Lakewood	OH	44107	5/20/2011	I told Dr last time we spoke you said that you would covert patients on low dose vicodin to Butrans, how many patients do you see each day who are taking short acting opioids around the clock? He said at least a couple a day. I asked if he would convert those patients to Butrans and he agreed. Reminder about OxyContin as a Q12hr option when patients may not get adequate analgesia with Butrans.
PPLPMDL0020000001	Barberton	OH	44203	5/20/2011	Left patient education guides and explained steady state so i could prepare them for any possible call backs over the first few days of therapy.
PPLPMDL0020000001	Cleveland	OH	44104	5/20/2011	i talked to dr about patients that would be appropriate for Butrans stocking,showed Butrans initiation guide for Butrans,talked about tapering short-acting opioids and starting a couple patients on Butrans to get some clinical experience.dr said he has a lot of acute pain patients in office so he hasnt thought of Butrans,we talked about Butrans formulary coverage and use of Butrans patient savings cards.i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44106	5/23/2011	i talked to Nate,Pharmacist,about Butrans 5 core messages,initiation guide and Butrans patient information booklet.Nate said they have seen scripts for Butrans here and have Butrans in stock,we discussed who was prescribing Butrans and i asked Nate if he and the other pharmacists would be willing to recommend Butrans for appropriate patients? Nate said depending on the relationship with the dr they might do that,we discussed opioid naive and opioid experienced patients trying Butrans.i asked Nate to focus patient discussions on application and rotation of Butrans in Butrans patient information booklet and log book section in booklet,Nate agreed.we discussed OxyContin stocking,appropriate patients and OxyContin formulary coverage.i recommended Senokot-S
PPLPMDL0020000001	Lakewood	OH	44107	5/23/2011	Quick call, we reviewed the initiation guide for Butrans and I asked where he sees Butrans fitting in. He said said probably for patients starting to take vicodin around the clock. I asked him to try a few of his low dose vicodin patients when their pain is not well controlled. I spoke with Robin and she does think that Butrans is something that could benefit their patients. She agreed to help me remind the Dr when she sees an appropriate patient.
PPLPMDL0020000001	Independence	OH	44131	5/23/2011	Spoke with Diane (MA) & reviewed Butrans dosing, indication, & appropriate patient type. Also discussed savings cards for Butrans & OxyContin. She said they had enough of both cards. Gave her a Butrans program invitation for Dr Keppler & one for Roman as a reminder. Diane said she knows Roman plans to attend but does not know if Dr Keppler will be able to go.
PPLPMDL0020000001	Maple Heights	OH	44137	5/23/2011	Quick call-spoke with Andy briefly as he was on the phone with 4 other lines holding & 3 customers waiting. Reviewed Butrans savings/e-voucher & OxyContin savings cards. He asked that I come back another day/time so that we have more time to discuss. Also spoke with technician & reviewed Butrans appropriate patient type/indication.
PPLPMDL0020000001	Cleveland	OH	44104	5/23/2011	i talked to dr about Butrans 5 core messages,fpi,initiation guide and patient information booklet.dr said he thinks Butrans is a great option for patients being a patch and dosed once a week,however majority of his patients are medicaid and medicare and he's not willing to do the prior authorization for medicaid patients as its too much work for him since he does all prior authorizations in his office and medicare doesnt cover Butrans.i asked dr if he had 2 commercial plan patients taking vicodin or percocet,that arent controlled,and perhaps could benefit from Butrans? dr said he might have 1 or 2 patients and will consider Butrans for them.we talked about appropriate patients for OxyContin,i showed dr Butrans visual aid for discussion and OxyContin conversion guide discussing 7 tablet strengths for flexibility in titration and we discussed OxyContin formulary coverage.i
PPLPMDL0020000001	Brooklyn	OH	44144	5/23/2011	Reviewed Butrans indication, delivery system, dosing & appropriate patient type with Dr Miguel. He said he has heard that the state will be placing more restrictions on physicians prescribing narcotics. Discussed importance of appropriate patient selection. Dr Miguel asked about formulary coverage, so i reviewed with him & Tiffanie the formulary grids for both Butrans & OxyContin & also went over savings cards. Dr Miguel said he is going to try to cancel his dealings with Medicare because he said they do not reimburse much of anything & they never seem to cover his patients' medication.
PPLPMDL0020000001	Parma	OH	44129	5/23/2011	Dr Taylor asked me to come back to her office as she had some information she wanted to tell me about. She then showed me a copy of Ohio House Bill 93 which she said was put into effect as of 5/20. She told me that within the 80 page document, it states that physicians who do not have a pain management specialty will have various strong restrictions on the way they prescribe pain medications. She asked if I had seen it & I told her I had not. She said she is wondering what pharmaceutical companies will do about it & I told her I did not know. I asked her how this would effect the way she practices, specifically in prescribing opioids-she said she will continue to work with her existing patients & but will not be taking any new patients who need help with pain. Discussed importance of appropriate patient selection. She said she will now be required to do drug testing as well as join OARRS, which i agreed is a great way to protect her practice. Butrans indication/dosing messaging
PPLPMDL0020000001	Akron	OH	44333	5/23/2011	When I came in Dr. Ahmad saw me at the window and come up and mentioned that he still has not written a Rx of Butrans. I asked why and he said he had not been working as much since he just had a new baby and had just forgotten. He said he would try to keep it in mind moving forward.
PPLPMDL0020000001	Cleveland	OH	44195	5/23/2011	worked crile bldg pharmacy - see call note and left Butrans fpi,initiation guide and Butrans patient information booklet for each doctor,pa and np in rheumatology
PPLPMDL0020000001	Akron	OH	44333	5/23/2011	Linda said that she has continued therapy with a couple patients but had not started any one new. I asked why and she said that she didn't have the opportunity because many patients are already on a LAO. I explained that she was right in identifying patients and showed her the appropriate Butrans patient using the initiation guide.
PPLPMDL0020000001	Mayfield Heights	OH	44124	5/23/2011	Quick call....doc was still supplied with Butrans savings cards. Reminded her of the covered insurance plans and BWC coverage. Oxycontin coverage and savings cards reminder. Nothing learned.
PPLPMDL0020000001	Akron	OH	44333	5/23/2011	Followed up from our lunch on Friday. I told her I just wanted to stop in and remind her to initiate therapy to at least 2 patients like we talked about at our lunch. She committed to initiated therapy by the end of the day.
PPLPMDL0020000001	Bedford	OH	44146	5/23/2011	Spoke with Halley (MA) who said Dr Haddad could not see me this morning. I gave her a copy of the program invite to give to Dr Haddad as a reminder, as he committed to attend. She said she would give him the information as soon as he was done seeing patients. Reviewed Butrans & OxyContin savings cards/eligibility & she said that they have enough of both kinds. She said I may be able to see Dr Haddad Wednesday late afternoon, so I let her know I would be back.
PPLPMDL0020000001					

PPLPMDL0020000001	Copley	OH	44321	5/23/2011	I asked Dr. Machado if he would try just one patient on Butrans or a trial so we could talk about the that patient responds to therapy. He agreed that he thought he could find one. I asked if I could follow up with him next week and he agreed.
PPLPMDL0020000001	Lakewood	OH	44107	5/23/2011	I told Dr that in the past we talked about Butrans as an option instead of increasing the dose of vicodin around the clock. I asked if he would start a few new patients like this. He said that he will. He said he tries not to prescribes any long acting opioids but if procedures don't work, we will try Butrans. Reminder about OxyContin as a long acting option as well.
PPLPMDL0020000001	Akron	OH	44333	5/23/2011	Lisa said that she had already refilled 2 patients on Butrans that morning. She continues to say positive things and says she likes the therapy and will continue to use it for the right patients.
PPLPMDL0020000001	Euclid	OH	44119	5/23/2011	Quick call.....I reviewed the Butrans patient type and indication. I asked him what feedback he has had with using Butrans. He said not much. He tried a patient but has not heard anything back. Gave him formulary grid and initiation guide. Nothing learned.
PPLPMDL0020000001	Cleveland	OH	44115	5/23/2011	I talked to dr briefly about Butrans,clinical benefits she see's in medication for her patients which were once weekly dosing of Butrans and that its a patch.I asked dr to think of 2 patients taking tramadol that arent controlled,and if appropriate start on Butrans.dr agreed and said she hasn't thought about Butrans but does think it could be appropriate for some patients.dr asked again about insurance coverage so we discussed Butrans formulary coverage.I recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44114	5/23/2011	I talked to Joel,Pharmacy Manager and Patty,Pharmacy Tech,about Butrans 5 core messages,initiation guide and Butran patient information booklet and stocking Butrans.they havent seen any scripts for Butrans,Joel said until he does he wont order Butrans,we discussed importance of stocking and when patients do go there to get Butrans scripts filled,we talked about Butrans patient information booklet and focusing on application/rotation of Butrans and log book section in patient information booklet. we discussed OxyContin stocking,7 tablet strengths available for titration and formulary coverage.I recommended Senokot-S
PPLPMDL0020000001	Mayfield Heights	OH	44124	5/23/2011	Quick call.....Reviewed the Butrans indication and patient type. Explained that Butrans can be used in opioid naive patients and before patients are titrated on short acting opioids like hydrocodone. Gave formulary grid.
PPLPMDL0020000001	Solon	OH	44139	5/23/2011	Spoke with MA, Chrissy, who said Dr Zaidi was too busy this morning to see any reps. I reviewed tomorrow's Butrans program information with her & asked if Dr Zaidi was going to attend, as the program is almost full. She checked with him & said that he will not be attending. Reviewed savings cards for Butrans & OxyContin. Chrissy said they have enough of both. Worked with her to schedule soonest available lunch next month.
PPLPMDL0020000001	Brooklyn	OH	44144	5/23/2011	Dr Detwiler asked me to tell him why Butrans was "better" & "different" than anything else used for pain. I told him we do not have comparative data, but that I could share an Butrans information that he wanted to know. Reviewed buprenorphine as a partial agonist. Also reviewed Butrans as a long-acting, once-a-week CIII option in a transdermal system. He asked about adverse events- I showed FPI section 6. He said he always uses generics first to save his patients money, so he would try generic medications before going to Butrans. I asked him what generics he meant & he said hydrocodone or tramadol. He added that he does see a place for Butrans, & he would use it for patients with chronic conditions who were not tolerating tramadol or hydrocodone who he trusted who have commercial insurance. I agreed that this was an ideal patient type to try. He added that he has very few patients like that. I asked him to think of just one. Reviewed OxyContin savings cards.
PPLPMDL0020000001	Cleveland	OH	44103	5/23/2011	I talked to Rick,Pharmacist,about Butrans 5 core messages,fpi,initiation guide and Butrans patient information booklet.Rick said he liked that Butrans was in a patch and dosed once a week but I needed to speak with Mike,Pharmacy Manager,about stocking Butrans.Rick said Mike is a hard person to reach but I could leave my business card with Butrans fpi and initiation guide and Mike will look information over and contact me if he's interested.I left this requested information for Mike and told Rick I would follow-up with Mike in June if I dont hear back from him.
PPLPMDL0020000001	Parma	OH	44129	5/23/2011	Spoke with Jackie who said she has not seen any prescriptions for Butrans written for fewer than 4 patches. I asked if there were any area physicians who she thought may have patients who may benefit from Butrans & she mentioned Dr Susters & Dr Chagin as physicians who they see pain medication prescriptions from. We also discussed OxyContin dosing. She said that she has a few regular customers on OxyContin. She said she knows of only one who is on it on any dosing interval other than q12h. She said she has not been given any direction on filling/not filling alternate dosing intervals. Let her know that we promote q12h dosing only as that is the only way Butrans has been studied. She said she would let me know if she hears anything else.
PPLPMDL0020000001	Cleveland	OH	44121	5/24/2011	Reveiled the Butrans indication, dosing, and appropriate patient. She is a NP that does not treat much pain but likes to be aware of newer options. She asked if the Butrans patch can be applied anywhere. I discussed how to properly apply the patch to the 4 sites. Gave her a formulary grid and let her know that Dr. Deloseph has savings cards.
PPLPMDL0020000001	Akron	OH	44310	5/24/2011	I asked Dr r Cramer how his patients were doing on Butrans therapy. He said they were doing well and that he has heard a lot of great feedback. He said he would continue to initiate therapy to the appropriate patients.<font color=blue><b>CHUDAKOB's query on 06/02/2011</b></font>You are getting new patients from him. What about refills? Is he writing refills for his patients?<font color=green><b>LAPMACA's response on 06/05/2011</b></font>I will try and ask him on my next visit<font color=blue><b>CHUDAKOB added notes on 06/07/2011</b></font>This is an important message to relay to all your physicians who are prescribing Butrans
PPLPMDL0020000001	South Euclid	OH	44121	5/24/2011	Quick call.....Reminded doc of the Butrans appropriate patient, formulary coverage, and savings cards for commercially insured patients. I asked doc what questions he still has about the product. He said he does not have any questions he just needs to find the right patient with coverage and condition.
PPLPMDL0020000001	Copley	OH	44321	5/24/2011	I explained Butrans in depth over a lunch appt utilizing the FPI. Dr. Heim felt very comfortable with the molecule Buprenorphine and said there were many patients in his practice that would benefit from therapy. He said he would definitely start to incorporate Butrans therapy into his practice. He said he felt confident initiating therapy to both opioid naive and opioid experienced patients.
PPLPMDL0020000001	Euclid	OH	44132	5/24/2011	Window call.....doc said he tried Butrans again a couple of times but its not being covered. I remind him that medicare /medicaid will not cover. Gave him a formulary grid and reminded him of BWC coverage as well.
PPLPMDL0020000001	Akron	OH	44308	5/24/2011	Introduced to Artina, Dir of Community Relations. She is responsibility for provider information/programs to the community. She's not interested in product info so we discussed non-branded resources like disposal/storage of meds, which she liked. She's also interested in participating in pain management webinar programs that we coordinate through the Case Managers. Email her the flyer for the programs scheduled for June.
PPLPMDL0020000001	Akron	OH	44319	5/24/2011	Spoke with the pharmacist Gretchen, I told her that I had been talking to Dr. Wu about Butrans therapy and explained he liked it because it was a LAO schedule 3. She said she would talk to Jon about getting it stocked and I told her I would check back next week.
PPLPMDL0020000001	Cleveland	OH	44130	5/24/2011	I told Dr Diab that I had waited patiently for 8 days instead of returning again last week to find out what his Butrans feedback was. He told me that I was welcome any time. I asked if he had since had any clinical feedback. He said he has not but that he has prescribed it. I asked how long he usually waits until having a patient follow up & he said 2-3 months. Re-stocked OxyContin savings cards.
PPLPMDL0020000001	Westlake	OH	44145	5/24/2011	Quick call, I asked Dr if he has started any new patients on Butrans that he could tell me about. He said he hasn't started any new lately but it's working well for the ones who are on it. I asked if he would continue to start new patients since he's had success and he said he will.
PPLPMDL0020000001	Akron	OH	44333	5/24/2011	I stopped by to follow up with him from my Friday lunch. I left him an initiation guide and explained that he could use it to help him to decide what strength of Butrans should be initiated. He said he would start a few new patients on therapy this week.
PPLPMDL0020000001	Parma	OH	44129	5/24/2011	Reminded Dr Roheny that I have been in to discuss Butrans with him & that he had seemed before that he saw a place for it, but that I got the feeling now that he was not as enthusiastic about it. He said that he "wants to use it" but that he wants to use it on older patients, where it is not covered. Asked him if he had commercially insured patients with chronically painful conditions. He said that it would be "too expensive" for even them. Reminded him that Butrans has coverage on many commercial insurance plans & that those patients can utilize the savings cards, bringing them to a \$15 copay. Positioned Butrans for patients calling in too soon for Vicodin refills if their condition is chronic & they have commercial insurance. Dr Roheny started walking into his next patient room, picked up the patient's file, & said that patient may be a Butrans candidate.
PPLPMDL0020000001	Independence	OH	44131	5/24/2011	Quick call- Reminded Dr Jack that he was going to call Dr Nickels to discuss Butrans. for feedback & asked what the result was. He said he did just talk to him but that they did not discuss Butrans. I asked him if he was going to attend the Butrans program this evening. He asked if Dr Nickels was going. I told him he is still registered. He said he might. I told him I was only asking for a couple hours of his time & reminded him this would be a great opportunity to discuss Butrans with experienced physicians.
PPLPMDL0020000001	Akron	OH	44309	5/24/2011	Introduced to Chief Medical Director at OAHF Conference. She was unfamiliar with Butrans so reviewed FPI & conversion guide. She inquired about rebating/pricing. I referenced PBM, Catalyst but she hinted they may either be changing PBMs or becoming their own PBM but wouldn't tell me anything more. She asked about promotion to providers in area. She said Dr. Bressi & Geiger are no longer with Summacare. Local reps should work with pain clinics for formulary influence. She never meets with manufacturer reps & her Team is good about doing that. She recommended contacting Tracy Dankoff for more info and Barb Berger, who is trainer for education for
PPLPMDL0020000001	Independence	OH	44131	5/24/2011	Dr Sundaram said he has a couple of patients on Butrans now. He said that one patient in particular really likes it & is having success. I asked him if he had been prescribing for patients who were already on opioids & he said yes. He said that he would "work on" finding more patients for Butrans.
PPLPMDL0020000001	Akron	OH	44319	5/24/2011	I asked Dr yee if he had the opportunity to prescribe Butrans yet. He said he had not but had some patients in mind and would certainly try it, I asked if he felt confident what type of patient he was looking for and he said he did and described a patient currently on a low dose SAO.<font color=blue><b>CHUDAKOB's query on 06/02/2011</b></font>My guess is he wouldn't tell you if he didn't feel confident in his patient selection. You might try asking him to tell you the type of patient he has in mind. This will allow you to see if he really knows.<font color=green><b>LAPMACA's response on 06/05/2011</b></font>Will do<font color=blue><b>CHUDAKOB added notes on 06/07/2011</b></font>I look forward to seeing how this works
PPLPMDL0020000001	Cleveland	OH	44130	5/24/2011	Positioned Butrans for patients taking Vicodin, Percocet, or tramadol around-the-clock for chronic issues who are calling in too soon for refills or asking for increases in dose/changes in medication. I asked him how frequently this happens & he said it happens daily. I asked if those would be patients for whom he would consider Butrans & he said yes. Presented initiation/titration guide & walked him through initiating Butrans treatment in those patients, including taper & starting on 10mcg if their current opioid dose is in the 30-80mg morphine range. He said he would do this & asked about managed care. Reviewed Butrans formulary grid & asked him to think of commercially insured patients or those with BWC who call in too soon for refills of their around-the-clock short-acting medication & he agreed to do this. Spoke with Shelly (Office Manager) & reviewed Butrans formulary grid, BWC, & savings cards. Also discussed positioning & asked her to help me remind Dr Sawhny-she agreed.
PPLPMDL0020000001	Akron	OH	44319	5/24/2011	I brought in the initiation and titration guide and reviewed what type of patient would be most ideal for Butrans therapy. He said he would trial it on 3 patients and let me know.
PPLPMDL0020000001	South Euclid	OH	44121	5/24/2011	I discussed the Butrans indication and other selling messages. She remembered that it was a patch but wanted to know where exactly Butrans should be used. I explained after NSAIDS/APAP/Tramadol or before short acting opioids. I explained how to initiate the dosing. She asked about the coverage. I reviewed the formulary grid and the savings cards. She said she could think of a couple of patients that could benefit.
PPLPMDL0020000001	Westlake	OH	44145	5/24/2011	Spoke with Darrel, we reviewed the Butrans medication guide and I asked for his help in assisting patients on proper use. We discussed steady state at 3 days. He said he thinks Butrans is a great option and hopes that it helps patients not have to take short acting all day. Reminder about managed care for Butrans and OxyContin.
PPLPMDL0020000001	Cleveland	OH	44130	5/24/2011	Dr Fedorko said that he just prescribed Butrans for a patient & then asked Mindy if it had gotten approved. Mindy said that it was just approved. Dr Fedorko said that it took 3 days for approval. I asked what insurance the patient had but he said he does not know & does not have time to look at that. Asked him to think of patients with commercial insurance when prescribing Butrans. He said he does not have time to think of that & that most of his patients are older. He said that he likes Butrans because it is "convenient for the patient" but that he gets frustrated with insurance because it never covers the medications. Spoke with Mindy who said that she had been busy so it took her 3 days to get to the prior authorization for that patient but that it was approved within minutes. She said the patient had Aetna Medicare but Butrans was approved for her. Reviewed positioning for Butrans & insurance coverage. She said she will always fight for a medication for a
PPLPMDL0020000001	Cleveland	OH	44121	5/24/2011	I asked doc what he remembers about Butrans. He said he thinks it is a long acting patch along the lines of tramadol. I reviewed the indication and other selling messages and the positioning after tramadol or NSAIDS. He asked how much it costs. I explained the commercial coverage and the savings cards. He said that he has a lot of medicare patients but he does have a few patients that might be appropriate as they are asking for higher doses of their meds. He asked about the MOA and I read the MOA section of the FPI. I explained the proper application and initiation. He still had savings cards. Reminded him of the oxycontin indication.
PPLPMDL0020000001					

PPLPMDL0020000001	Akron	OH	44312	5/24/2011	I have continued to stop in and each week and just ask Dr. Fouad what additional questions he has a bout Butrans, he keeps saying he will write but has still not initiated therapy.<font color=blue><b>CHUDAKOB's query on 06/02/2011</b></font>There is something he is not comfortable with. Your challenge is to find that out. By asking him what additional questions he has and him telling you none, you are probably not moving the process forward.<font color=green><b>LAPMACA's response on 06/05/2011</b></font>I will continue to try and challenge him.<font color=blue><b>CHUDAKOB added notes on 06/07/2011</b></font>Your challenge is to find out the reason he won't prescribe. Once you find this out, you will have something to see to.
PPLPMDL0020000001	Independence	OH	44131	5/24/2011	Quick call- Dr Rob grabbed a Butrans program invitation when he walked by. I reminded him that it is this evening & that he has said before that he would like to go. Let him know the time & location & asked for a commitment. He said it all depends on what time he can get out of the office tonight. He said he was giving me his promise that he would try to attend, but that he could not commit 100%.
PPLPMDL0020000001	Cleveland	OH	44111	5/25/2011	Quick call, I told Dr I want him to think of Butrans for his patients who are on tramadol around the clock instead of moving to vicodin. He said he will try it. I spoke with Barb and she is going to try to help remind Dr about Butrans as an option.
PPLPMDL0020000001	Akron	OH	44320	5/25/2011	I asked Misty if she had considered initiating therapy to other patients similar to that of the first patient she had tried. She mentioned that her goal is to get many her patients on Butrans she just says she needs to be
PPLPMDL0020000001	Cleveland	OH	44111	5/25/2011	I asked Barbara what she thought the Drs hesitation is in prescribing Butrans. She said she thinks that the Drs are just hesitant to start something new and it's tough to break old habit. I asked if she sees merit in Butrans and she does think it is a great option instead of vicodin or percocet around the clock. I asked her assistance in recommending Butrans. Reminder about OxyContin as an option when Butrans may not provide adequate analgesia.<font color=blue><b>CHUDAKOB's query on 06/02/2011</b></font>Who is Barbara?<font color=green><b>HOLUBA's response on 06/09/2011</b></font>Barbara is the PA at CCF Fairview pain mgmt.<font color=blue><b>CHUDAKOB added notes on 06/09/2011</b></font>Got it
PPLPMDL0020000001	Akron	OH	44320	5/25/2011	I asked Dr. Dupstadt if she thought there was a place for Butrans in her practice and she said she thought there was but was waiting for the right patient. I asked her what she meant by that and she said many of her patients are past the point of Butrans therapy but she would keep it in mind for appropriate patients.
PPLPMDL0020000001	Parma	OH	44134	5/25/2011	Dr Hernandez said that he ended his day yesterday with a follow-up appointment with a patient who he had started on Butrans. He said that the patient was remarkably better & was thrilled with her results. Dr Hernandez said that the patient told him that Butrans has changed her life & that her family & friends were commenting at how much improved her attitude & demeanor are. He said that her positive results are consistent with other patients he is seeing. I asked him if his patients, when switching from Vicodin to Butrans, take supplemental analgesia or if they make a complete switch from Vicodin to Butrans. He said they make a "clean break" & come completely off Vicodin. He said that the first step in treating pain is to ease patient fears & really take the time to listen to & educate them.Also discussed OxyContin q12h as an option for appropriate patients beyond Butrans 20mcg. He also told me he called medical services & was very pleased with the response of the company. Senokot-S
PPLPMDL0020000001	Cleveland	OH	44130	5/25/2011	Dr Kansal told me that it is "almost impossible" to change a patient from a short-acting opioid to a long-acting. I asked him if patients are ever not already on an opioid when they see him & he said no. Reviewed Butrans FPI 2.4 & discussed the ability for patients to use supplemental analgesia for breakthrough. I asked him how he thought patients would react to switching to Butrans once weekly if they could still have some short-acting on hand in case of breakthrough. He said he thinks patients may be receptive to that idea. He told me the majority of his pain patients are Medicaid or BWC. Told him BWC is paying for Butrans. I told him I was not asking him to switch all his patients & asked if it was fair of me to ask him to try Butrans for one or two of the patient type we talked about (BWC, chronic moderate to severe pain, on low-dose Vicodin around-the-clock). He agreed to this request. Also discussed OxyContin q12h for appropriate patients beyond Butrans 20mcg.
PPLPMDL0020000001	Lakewood	OH	44107	5/25/2011	Dr said that he just still hasn't remembered Butrans very well. We reviewed the initiation guide and appropriate patients. I asked him to think of Butrans as an alternative to tramadol or vicodin around the clock and he said it makes sense. He asked about managed care and said he has a lot of Medicaid patients. We discussed commercial and BWC will be no Prior Auths. We discussed the savings cards for commercial and the copays. I reviewed the managed care with Stacy and Sally. Reminder about OxyContin as an option when patients are taking more than 40mg hydrocodone per day.<font color=blue><b>CHUDAKOB's query on 06/02/2011</b></font>You positioned Butrans for the Dr., but did you every find out why he is not prescribing Butrans? It can't be he just forgets, because if he was sold, he wouldn't forget? You job is to find out why he is not writing it. Once that occurs, you will have something to work with.<font color=green><b>HOLUBA's response on 06/09/2011</b></font>Ok Thanks.<font color=blue><b>CHUDAKOB added notes on 06/09/2011</b></font>Implement this philosophy and you will increase prescriptions
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	5/25/2011	Dr. Azem came to the window and said that she has now started a couple patients on Butrans and is pleased with the therapy so far. She asked for additional patient education guides which I left.
PPLPMDL0020000001	Westlake	OH	44145	5/25/2011	Quick call, Dr said he's been trying to prescribe Butrans. He did think that it was too expensive for a few patients. I asked what insurance and he didn't know. I followed up with Laura and we reviewed managed care for Butrans. She said the one patient was a Med D patient and we discussed that Butrans will not be covered and they can not use the savings cards. We discussed focusing on Commercial patients and she will try to remind the Dr of that. Reminder that OxyContin is covered on most insurance when Butrans may not be.
PPLPMDL0020000001	Cleveland	OH	44130	5/25/2011	Quick call- Spoke with Ron & reviewed Butrans & OxyContin savings programs. I asked what type of managed care mix he sees & he said it was an equal amount of commercial & government plans. He then got called away to work with a patient.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	5/25/2011	Dr. Cyndi said that she is starting to become very comfortable prescribing Butrans to the right type of patients and continues to talk about the positive feedback she is getting from patients. I asked is she felt comfortable enough to use it first line over low dose hydrocodone and she said she thinks so.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	5/25/2011	I asked Dr. Roseanne what type of patient she was waiting for to trial Butrans. She said she liked the concept of Butrans but did now necessarily like treating chronic pain. She said she would talk to Dr. Cyndi to gain her feedback on Butrans and how her patients like it.
PPLPMDL0020000001	Fairview	OH	44111	5/25/2011	Spoke with Tom, he did think that he saw a script for Butrans but could not remember who wrote it. He thought pain management possibly. I asked who else he thought I should talk to, and he thinks CCF Pain management would be the best to get on board. He said that Dr Lalli and Shamir also prescribe a lot of opioids for pain. We reviewed OxyContin is still an option when Butrans may not provide adequate analgesia.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	5/25/2011	Dr. Hegde just returned from maternity leave and gave me a quick second at the window to review Butrans and the FPI. She asked me to leave the info behind and said she would discuss it in more depth over lunch.
PPLPMDL0020000001	Lakewood	OH	44107	5/25/2011	I asked Dr how his Butrans patients are doing. He said that one patient said it was expensive. He did not know which insurance they had. We reviewed the managed care for Butrans, using the savings cards and copays. Dr asked me about geriatric use and I reviewed the geriatric section per the FPI. He said that his mother in law is taking percocet just 2 per day and is still in a lot of pain. He may try this for her if her supplemental insurance covers Butrans. Reminder about OxyContin as an option when Butrans may not be covered.
PPLPMDL0020000001	Fairlawn	OH	44333	5/25/2011	Quick call. I asked Dr. Parisi if he had kept the patients he had started on Butrans therapy and he said he wasn't sure and walked away. no new info learned.
PPLPMDL0020000001	Akron	OH	44333	5/25/2011	I asked Dr. Steurer if had reconsidered trialling just one patient on Butrans therapy so he could gain some clinical experience with the molecule and give me some feedback. He said that he still unsure about initiating therapy and said most of his patients are doing well on their current therapies.
PPLPMDL0020000001	Lakewood	OH	44107	5/25/2011	Spoke with Aduwa, we reviewed the medication guide for Butrans I asked for her help in instructing patients on the proper use of Butrans. She said she does think that Butrans is a great option and that she is surprised she is not seeing more scripts yet. We discussed the fact that Butrans take 3 days to reach steady state so patients should wait 3 days before asking to titrate. We discussed managed care for Butrans and OxyContin.
PPLPMDL0020000001	Bedford	OH	44146	5/25/2011	Spoke with Quaretta (technician) who said the pharmacist was too busy to see me. Reviewed Butrans & OxyContin savings programs with her. She said they do not have Butrans but that it sounded like something that they would carry based on the customers they have. She said she would give my information to Oleg & recommend that they get Butrans in stock.
PPLPMDL0020000001	Lakewood	OH	44107	5/25/2011	Spoke with floater filling in for Chuck, we discussed the 5 key messages for Butrans and the initiation guide. I asked for his assistance in instruction patients on the proper use and application of Butrans and he agreed. Reminder about OxyContin as a Q12hr option and asked him to recommend Senokot S with opioid scripts. He said that he does recommend Senokot.
PPLPMDL0020000001	Highland Heights	OH	44143	5/25/2011	Spoke to Kristen about the stocking of Butrans. She confirmed the stocking but no scripts yet. I explained the positioning, savings card program and relay health. She is still seeing a steady volume of oxycontin with a few regular patients. She has been noticed increased scripts written for TID.
PPLPMDL0020000001	Bedford	OH	44146	5/25/2011	Spoke with MA Roberta who said that Dr Haddad was too busy this afternoon to see me. She suggested that I switch & start trying to see him on Mondays around 1:30 for a better chance of catching him. Discussed Butrans & OxyContin managed care & savings cards with her as she takes call-backs & does prior authorizations.
PPLPMDL0020000001	Cleveland	OH	44143	5/25/2011	Doc said he does not like to treat chronic pain because he has a lot going on and he chooses not to juggle pain meds. He said he would got to a vicodin after tramadol failures. After discussing the Butrans selling messages I asked if he would consider a product like Butrans - a CIIl transdermal. he said that has no bearing on his prescribing. He asked for journal articles about studies.
PPLPMDL0020000001	Bedford	OH	44146	5/25/2011	Dr Moufawad said Butrans is causing some of his patients to go into withdrawal. I asked him how they were being initiated & he said he finds that patients have to do a "two day washout" of their current opioid before starting Butrans. He said that switching patients to Butrans requires a lot of time & educating the patient. I asked if patient information guides would help. He said patients still would have to take the time to read. I offered DTD option- he said he may try that. I also asked if the patients were committed to getting rid of their pain if it was worth a few minutes of education- he said yes. He also said he is having trouble with what to give for supplemental analgesia but that he did not have further time to discuss it at this time.
PPLPMDL0020000001	Broadview Heights	OH	44147	5/25/2011	Spoke with Nancy (MA) who said Margaret (nurse) was requesting more Butrans savings cards, which I provided. Reviewed managed care coverage for Butrans & OxyContin. Nancy said she was not sure on any specifics with Dr Samuel prescribing Butrans & said that Nancy was tied up seeing patients & that today was not a good day to see her. Worked with her to schedule next available lunch & let her know I would be back in a couple weeks to try to speak with Margaret & Dr Samuel again.
PPLPMDL0020000001	Broadview Heights	OH	44147	5/25/2011	Spoke with Nancy (MA) who said Margaret (nurse) was requesting more Butrans savings cards, which I provided. Reviewed managed care coverage for Butrans & OxyContin. Nancy said she was not sure on any specifics with Dr Samuel prescribing Butrans & said that Nancy was tied up seeing patients & that today was not a good day to see her. Worked with her to schedule next available lunch & let her know I would be back in a couple weeks to try to speak with Margaret & Dr Samuel again.
PPLPMDL0020000001	Beachwood	OH	44122	5/25/2011	Quick call- Dr Tabbaa said he is continuing to try different patients on Butrans with good results. I asked if patients typically take supplemental analgesia with it or if they are only taking Butrans once they reach steady state. He said they all have short-acting (usually Vicodin or Percocet) on-hand in case of breakthrough. Spoke with Jim & reviewed managed care for Butrans & OxyContin & also reviewed savings cards. Jim said he will fight for a patient to get a medication if it is what Dr Tabbaa thinks is best.
PPLPMDL0020000001	Euclid	OH	44119	5/26/2011	Quick call.... Asked doc how he feels about prescribing vicodin after tramadol. He said "maybe, sometimes." He said now there is the patch. I discussed the appropriate positioning. Reminded him of the commercial and BWC coverage and the Savings cards.
PPLPMDL0020000001	Shaker Heights	OH	44122	5/26/2011	Quick call- Dr Agarwal said he has not prescribed Butrans. Reviewed dosing information, delivery system, appropriate patient type & managed care/savings cards. He said he would keep it in mind then walked away. Reviewed Butrans with Stephanie, including dosing, savings cards, & appropriate patient type.
PPLPMDL0020000001	Berea	OH	44017	5/26/2011	Spoke with April, I asked how Butrans has been received by patients, she said she has not heard much feedback. We reviewed the appropriate patients for Butrans and key messages. I asked her thoughts and she does think it would be a good option for some patients and she likes that it is a CII. We discussed OxyContin as an option and reviewed the medication guide. Reminder to recommend Senokot S.
PPLPMDL0020000001	Cleveland	OH	44109	5/26/2011	dr said he hasn't seen any patients that he felt Butrans was appropriate for, I showed dr Butrans initiation guide and we talked about appropriate patients, I asked dr if he's started anyone on vicodin or percocet this week, dr said yes, I told dr those could have potentially been Butrans patients, dr said he'll think about some patients and maybe 1 or 2 patients would be willing to take a patch once a week, I talked to dr about Butrans formulary coverage and asked him to focus on 2 patients to start on Butrans, dr agreed, I recommended Senokot-S

PPLPMDL0020000001	Cleveland	OH	44109	5/26/2011	i talked to tania,pharmacist,about butrans 5 core messages,initiation guide,patient information booklet and stocking of Butrans.Tania said she hasnt seen any scripts for Butrans here and because Butrans isnt covered on Medicare that will be a tough sell to their pharmacy manager,as the majority of patients seen at the Senior Wellness Center are geriatric,over 65 years of age and have medicare as their primary insurance.we talked about Butrans formulary coverage for any commercial plan patients and Tania said to follow-up with pharmacy manager next week,talk to him about stocking Butrans.Tania said Butrans in a patch and dosed once a week are 2 benefits she see's but i need to follow-up next week.we talked about OxyContin stocking,appropriate patients and OxyContin formulary coverage.i recommended Senokot-S
PPLPMDL0020000001	Parma	OH	44129	5/26/2011	Dr Gigliotti said again that he has not had a Butrans patient come in yet, but that he is ready to prescribe. I reminded him that he has been telling me this for months. I told him that perhaps these potential Butrans patients were not coming in but rather are calling in, asking for increases or changes in pain medication. He said that was a good point. He asked about insurance coverage- went over formulary grid & asked him to think of his commercial insurance patients, calling in too soon for refills or asking for increases or changes in pain medication, if their condition is chronic. He dug out his initiation guide & i walked him through page 6 & discussed titration ability every 3 days. He said that he would find a Butrans patient for me & added that he will prescribe Butrans today. I asked him if this was a firm commitment, & he said maybe not today, but before he sees me next, he will have found someone. Also reviewed OxyContin q12h for appropriate patients beyond Butrans 20mcg.
PPLPMDL0020000001	Independence	OH	44131	5/26/2011	Spoke with Denise (MA) & attempted to schedule a lunch, but she said they are booked for this month & the books will open again in June for July. Reviewed Butrans & OxyContin savings cards & eligibility requirements. She said she keeps them in a drawer with the formulary information i have given her. Also gave them Senokot-S samples & recommend they give them out to patients taking medications that cause constipation.
PPLPMDL0020000001	Cleveland	OH	44195	5/26/2011	worked anesthesia/pain management dept-only got to see a few hcp's but left Butrans fpi,initiation guide and patient information booklet for Dr.Ali,Dr.Vrooman and Dr.Katyal with my business card.worked neurology dept- left Butrans fpi,initiation guide,patient information booklet and business card with medical secretaries for Dr.Spears,Dr.Stillman,Dr.Kriegler and Dr.Mays.
PPLPMDL0020000001	Berea	OH	44017	5/26/2011	Spoke with Diane tech. She did not think they have Butrans in stock, she did not see it. We reviewed the manged care and savings program for Butrans as well as OxyContin.
PPLPMDL0020000001	Euclid	OH	44119	5/26/2011	Spoke to Kevin about the stocking and movement of Butrans. He confirmed stocking and that he has seen at least one script. He thinks it was a pain mgmt doc but he did not recall who. I explained the indication and positioning, savings cards. He has still stocked on all oxycontin strengths and having no issues. Provided CE catalog.
PPLPMDL0020000001	Cleveland	OH	44109	5/26/2011	i talked to dr about his patients taking tramadol that are asking for something different or saying their tramadol isnt controlling their pain,to consider Butrans for these patients if they are appropriate.dr said he hasnt had anyone complain lately but does remember Butrans is a once weekly dosing option and he should think of moderate chronic pain patients to start on the Butrans 5mcg or 10mcg.i showed dr Butrans initiation guide and asked him to start 2 patients on Butrans,if patients call in office earlier in the month for their tramadol,instead of refilling medication,dr said if appropriate he will do that.i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	5/26/2011	i talked to dr about considering patients that are taking percocet but not controlled and asking for something different,to start on Butrans.dr said he just hasnt thought of Butrans,we discussed Butrans initiation guide,patient information booklet and i asked dr to think of 2 patients that he feels are appropriate to start on Butrans,dr agreed.i recommended Senokot-S
PPLPMDL0020000001	Olmsted Falls	OH	44138	5/26/2011	I told Dr last time we spoke he said he had some patients in mind who could benefit from Butrans. I asked if he can think of any of those with commercial insurance. He said the ones he can think of are Med D but he will think about it. We reviewed managed care for Butrans. I reminded him about OxyContin as an option that is covered on some Med D and Medicaid plans.
PPLPMDL0020000001	Berea	OH	44017	5/26/2011	i asked Dr about the patients he started on Butrans. He said he started 2 patients but has not heard back and he's not sure if they filled the scripts of not. We reviewed the key messages for Butrans and i asked if he sees a benefit. He said he does. I asked if he still has a lot of patients on hydrocodone. He said he does and i asked him to consider Butrans for those patients who meet the indication. He said he will prescribe it. Dr said he only has one patient still on OxyContin, he is trying to get away from treating chronic pain.
PPLPMDL0020000001	Cleveland	OH	44195	5/26/2011	i talked to Kathy,PA,about her patients taking tramadol but telling her their pain isnt controlled and perhaps a long-acting opioid like Butrans could be appropriate,Kathy said she likes that Butrans is a patch and dosed once a week but she see's all of Dr.Mekhal and Dr.Mintzer's patients and unless they approve of Butrans,shell have a hard time starting patients on Butrans.i asked Kathy to think of 2 patients,that she knows call early every month for refills,where she could talk to doctors about these 2 patients and discuss Butrans as an option if appropriate.Kathy said that would be fine.i recommended Senokot-S
PPLPMDL0020000001	Berea	OH	44017	5/26/2011	Quick call at window, I reminded Dr of our last conversation on Butrans and asked if he would try Butrans for a patients instead of going to around the clock vicodin
PPLPMDL0020000001	Parma	OH	44134	5/26/2011	Quick call with technician who said their regular pharmacist was not in. Reviewed Butrans & OxyContin savings programs & eligibility. She said they try to give out coupons to customers whenever they can. She said to stop in another day to try to catch James.
PPLPMDL0020000001	Solon	OH	44139	5/26/2011	Spoke with Jackie about a clinical presentation for Butrans to be scheduled through Mike Schneider. She said the P&T meeting is June 15 where it will be reviewed. She was unaware of this meeting but agreed to the discussion & gave me options for dates. Email her and copy Dan & Mike as she will include Lora Wilson, VP of Pharmacy in the email chain.
PPLPMDL0020000001	Cleveland	OH	44109	5/26/2011	worked pm&r dept-see call notes. worked internal medicine dept-had to leave Butrans fpi,initiation guide,formulary grid,patient information booklet and my business card for Dr.Lindheim,Dr.Harrington,Dr.Falk-Ytter,Dr.McCreery and Dr.Ricanati,as they were all with patients and reps couldnt see doctors this am.worked rheumatology dept-left Dr.Ballou and Dr.Magrey Butrans fpi,initiation guide,formulary grid and patient information booklet with my business card for them as i couldnt see them today
PPLPMDL0020000001	Highland Heights	OH	44143	5/26/2011	Doc and nurse, Marianne said that he tried a patient on Butrans and the patient complained that the patch would not stay on. They wanted to know what the solution is. I explained that proper application to a clean dry, hairless site. I also advised that patients can apply tegaderm or first aid tape. This particular patient works a very physical job where he sweats a lot. Doc asked about coverage again - is it covered on medicare. I explained no coverage on medicare/medicaid but reviewed the commercial plans and the coverage with BWC. He said he has medical mutual, anthem, united. He did say he has had good feedback from a couple of patients. He said he has been converting patients from SA opioids, not necessarily opioid naive.
PPLPMDL0020000001	Parma	OH	44134	5/26/2011	Dr Scanlon showed me that he keeps the Butrans information that i leave for him in effort to help remind him to prescribe it when the right patient comes in. I asked if he had called in the prescription for the patient we discussed & he said he did, but that that is the only patient he has tried on it & he knows he needs to have more patients. I asked if there was a nurse or MA that could help & he said no. He said he just needs to think of Butrans when those right patients come in. I asked him if it is possible that many potential Butrans patients are not actually coming in, but rather calling in for an increase in dose or change in medication & he said that was a very good point. He said that does happen & that those would be great patients to start on Butrans. He thanked me for my frequent visits/reminders to him. I told him that it sounds like he has many patients that may be able to benefit from Butrans-he said that is true without a doubt. OxyContin savings cards reminder.
PPLPMDL0020000001	Highland Heights	OH	44143	5/26/2011	Reviewed the butrans indication, patient type, dosing, and formulary coverage. She had not had any experience with it yet but thought she had a patient in mind.
PPLPMDL0020000001	Westlake	OH	44145	5/26/2011	Quick call at window, i asked if he could start just one new patient on Butrans instead of giving vicodin or tramadol around the clock. He said that he just keeps forgetting about it. I reviewed the initiation guide and dosing.
PPLPMDL0020000001	Cleveland	OH	44109	5/26/2011	i talked to dr about her patients taking percocet that are complaining to her that their medication isnt lasting long enough,so perhaps a long-acting opioid like Butrans dosed once a week could be appropriate,dr said she hasnt had any patients complain lately but does like that Butrans is in a patch and dosed once a week.dr asked about medical coverage as she has a lot of those patients.we discussed medical prior authorization for Butrans and i asked dr if she had BWC patients? dr said yes,we discussed BWC coverage for Butrans.i asked dr to just think of 2 patients,per our discussion,to start on Butrans.dr said if she see's any patients that are appropriate,shell consider Butrans.i recommended Senokot-S
PPLPMDL0020000001	Solon	OH	44139	5/26/2011	Tony said they're having trouble with their system breaking out the data per plan with the appropriate rebate %. He's only able to provide the necessary reports for the higher percent rebates. We both agreed since greater than 95 of the utilization comes from the Duals/LIS that we should move forward in processing the higher rebate now. We can address the lower % rebate later.
PPLPMDL0020000001	Westlake	OH	44145	5/26/2011	I reviewed our last conversation about Butrans instead of vicodin. I asked if she would give Butrans a try for this type of patient and she said she will but she is worried about cost. We reviewed the manged care for Butrans and i let her know to stick with commercial insurance and give out the savings cards. Reminder about OxyContin as an option that is covered on Medicaid.
PPLPMDL0020000001	Euclid	OH	44119	5/26/2011	Spoke to David about the stocking of Butrans. He has both 5 and 10mcg of Butrans. He has not seen any scripts. He said he doe not see many transdermals coming through there but he did name Dr. Keum as a prescriber of transdermals. I explained the CII and 7 day status. Discussed the relay health program and savings cards. He talked about Dr. Thomas Craig's scripts that he has been rejecting - he spoke of a elderly patient taking 2 tabs of 80mg q12. I explained that technically within the prescribing guidelines.
PPLPMDL0020000001	Sagamore Hills	OH	44067	5/26/2011	Introduced Butrans to Dr Mike, delivering 5 core messages & alerted him to box warning. He said that he hates treating pain. I told him that i understand the frustrations & difficulties this type of patient can offer, & asked him to focus on patients who he trusts. He said he generally tries to get patients off opioids, not put them on them or increase their medications. He said that he finds that almost zero patients actually need opioids to control pain & said that people over-exaggerate their pain. He also added that he thinks narcotics lower one's pain tolerance, making one more susceptible to pain sensations. I asked him if he believes some people are in true pain & do need opioids & would take them responsibly. He said maybe. He said Butrans may fit a niche of patients who do need something for moderate pain that is long-acting & CII. Asked him to think of 1 or 2 patients who may benefit & he said he would keep it in mind. Recommended Senokot-S for opioid-induced constipation
PPLPMDL0020000001	Cleveland	OH	44104	5/27/2011	i showed dr Butrans initiation guide,discussed appropriate patients to start on Butrans,dr said she likes that Butrans is in a patch and once weekly dosing is easy but she hasnt had any patients tell her lately that their short-acting opioids arent controlling their pain.i asked dr to think of 2 patients,with commercial insurance,that call into office earlier than they should,monthly,asking for more pills or for something different and perhaps Butrans could be appropriate for them.dr agreed.we talked about Butrans formulary coverage on medical,commercial and BWC.i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44104	5/27/2011	i talked to dr about her patients taking percocet that arent controlled and need another option.i asked dr to consider Butrans for 2 patients,as we discussed,that she feels are appropriate and meet Butrans indication,showed Butrans visual aid on appropriate patients,dr said she will consider Butrans she just hasnt thought about it and forgot what the insurance coverage was like for medicaid patients as she has a lot of medicaid.we talked about Butrans formulary coverage.we talked about appropriate patients for OxyContin,showed OxyContin flashcard being an appropriate option,formulary grid and we discussed OxyContin savings cards.i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44114	5/27/2011	i talked to Laura,Pharmacist,about Butrans stocking and Laura said until she see's a script for Butrans,she wont order it,we talked about importance of stocking,discussed Butrans initiation guide and appropriate patients for Butrans,i asked Laura if she would recommend Butrans,to doctors,if patients are telling her that their short-acting opioids arent controlling their pain? Laura said she might do that it depends on relationship with doctor.we discussed Butrans formulary coverage and we talked about appropriate patients for OxyContin,stocking of OxyContin and formulary coverage for OxyContin.i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44120	5/27/2011	i talked to Stewart,Narcotics Buyer/pharmacist,who said he's gotten a few scripts here for Butrans.dr rosenfield has been 1 physician,dr sahgal and he's not sure of the others,but we talked about Butrans initiation guide and doctors starting patients on Butrans 5mcg or 10mcg.Stewart said he's seeing more of the Butrans 10mcg scripts come through so we talked about appropriate patients for Butrans 5mcg and i asked Stewart to focus his discussion with patients on the application and rotation of Butrans and showing them the log book section in Butrans patient information booklet.Stewart said he'll talk to patients about this information and we discussed Butrans formulary coverage we discussed appropriate patients for OxyContin,7 tablet strengths and i showed Stewart OxyContin conversion guide and we discussed OxyContin formulary coverage.i recommended Senokot-S
PPLPMDL0020000001	Chagrin Falls	OH	44023	5/27/2011	Spoke with Anita & introduced Butrans (indication, appropriate patient type, dosing, CII). Also reviewed managed care coverage & savings cards & let her know she could print them at Butrans.com. She said they do stock the 5 & 10mcg but only have one customer on it right now. She could not think of any specific recommendations of who to call on in the area. Also reviewed OxyContin savings cards & discussed eligibility requirements for savings programs.
PPLPMDL0020000001	Parma	OH	44129	5/27/2011	Asked Jen what her comfort level with using Butrans is. She said that she really would like to get a good sense from Dr Nickels where & how to prescribe it. I asked her if she sees having Butrans as a CII that is long-acting as a benefit & she said she does think it offers a potential benefit. She said that Dr Nickels has a few patients on Butrans & that as he gets feedback & uses it more, she will get more comfortable in selecting her own patients.
PPLPMDL0020000001					Discussed Ryzolt as a q24h option for appropriate patients.

PPLPMDL0020000001	Independence	OH	44131	5/27/2011	Roman apologized for missing the program & said that he had been in surgery that night until after 10:30pm. He said he has one patient on Butrans who really likes it & who is getting refills. He asked how to initiate treatment in patients. I asked him to be more specific- those not on an opioid or patients on opioids already? He said everyone is already on one when he sees them. Reviewed initiation guide page 6 & discussed initiating treatment, including taper of current opioid. Also reviewed titration ability every 3 days. He said he would probably start everyone on 10mcg & would not "bother" with the 5mcg. I told him if the patient was opioid-naïve or on <30mg morphine equivalent, we would recommend a 5mcg starting dose. Also discussed OxyContin for appropriate patients beyond Butrans 20mcg & Senokot-S for opioid-induced constipation.
	Cleveland	OH	44104	5/27/2011	I talked to dr about his patients taking percocet but asking for something different as their pain isnt controlled and to consider Butrans if patients meet Butrans indication.I showed dr Butrans visual aid and initiation guide for this discussion,dr said his patients like taking their pills and hasnt had anyone complain lately but he likes that Butrans is a patch dosed once a week.I asked dr if patients ever call into office earlier than they should,monthly,for their percocet? dr said yes that can happen.I asked dr to think of 2 patients like that and start them on Butrans,instead of refilling patients percocet.dr said if appropriate and if patients are willing to take a patch,he will consider Butrans at that time.we discussed OxyContin being an option,appropriate patients for OxyContin,7 tablet strengths for titration flexibility,showed OxyContin conversion guide and discussed OxyContin formulary coverage and patient savings cards.I recommended Senokot-S
PPLPMDL0020000001	Chagrin Falls	OH	44022	5/27/2011	Dr Hudson asked me to remind her about details of Butrans as she only remembers that it is a long-acting patch for pain. Reviewed indication, appropriate patient type, positioning (range of patients- also discussed OxyContin for appropriate patients beyond Butrans 20mcg), CIII & abuse/addiction potential. She said she was surprised to hear that it is once-weekly. Also discussed buprenorphine molecule as a partial agonist at mu opioid receptor & reminded her that like all opioids, Butrans does carry abuse/addiction potential. Also reviewed managed care, asking her to focus on commercially insured patients. She said Butrans sounds like something she may be able to utilize in her practice on chronic pain patients.
	Chagrin Falls	OH	44022	5/27/2011	Dr Rood said that his Butrans patient is doing very well. He said that he asked her how well the patch was adhering, since adherence had been such an issue for her with the fentanyl patch & the patient reported that the patch sticks for the entire 7 days with no problem & no skin irritation. Dr Rood said that more importantly, she is getting great pain relief, something this patient has not had in a very long time. I asked him what other patients he has identified who may be potential Butrans candidates. He said that he really does not have many patients on opioids. I asked if he would use Butrans on patients who were not currently on an opioid & he said he would if their condition was chronic. I asked if he would also use it on patients who were taking around-the-clock short-acting opioids for chronic conditions if they called in asking for increases/changes in medication & he said yes.
PPLPMDL0020000001	Cleveland	OH	44104	5/27/2011	Also discussed OxyContin q12h for appropriate patients beyond Butrans 20mcg. I talked to dr about patients he treats that are taking short-acting opioids like tramadol,vicodin or percocet,that he feels are appropriate for Butrans and why he's started a few patients on Butrans.dr said he likes that Butrans is in a patch and dosed once a week as that seems to be easier for some patients.I showed dr Butrans visual aid,discussed appropriate patients,tapering of short-acting opioids and initiation of Butrans and I asked dr to continue starting patients on Butrans,dr agreed we talked about OxyContin being an appropriate option for patients,formulary coverage and OxyContin savings cards. I recommended Senokot-S
	Mayfield Heights	OH	44124	5/27/2011	Debbie said she is having success with butrans. She said she just wrote a script this week. She also had a male patient on it who loves it and it works great. She asked if/when there will be changes with medicaid. I told her not yet but I would keep her updated with any changes. I reviewed the proper initiation dosing for Butrans and the commercial plans.
PPLPMDL0020000001	Cleveland	OH	44143	5/27/2011	Quick call.....provided doc the branded Butrans FPI and briefly explained the clinical trials section. Scheduled lunch for further discussion on Butrans. Nothing learned.
	Independence	OH	44131	5/27/2011	Spoke with Jill (MA) & reviewed Butrans indication, positioning, & managed care/savings cards. She said she sees very few commercially insured patients but that he does have some. She said that she is the one who handles calls from patients requesting more pain medication & that this does happen sometimes. Also reviewed OxyContin savings cards & discussed eligibility.<font color=blue><b>CHUDAKOB's query on 06/02/2011</b></font>How can you get Jill involved in the process with Dr. Pai? What action did you ask her to take?<font color=green><b>APSEGAS's response on 06/03/2011</b></font>She has said that she does not get involved in recommending medication changes to Dr Pai & that that is his decision, but I was thinking that I could see if she would be willing to flag patient charts if they meet the indication & are calling in for increases or changes in their chronic pain medications.<font color=blue><b>CHUDAKOB added notes on 06/07/2011</b></font>Very good ideal
PPLPMDL0020000001	Westlake	OH	44145	5/27/2011	Dr told me that he has had a few denials for Butrans. Some where Medicaid and one was UHC, he said that he gave methadone with Butrans and I told him this is way it may have been denied. I discussed that Butrans should not be used with other long acting meds and that he could still use short acting meds for supplemental analgesia. He said he understands and will prescribe it as indicated in the FPI. We reviewed OxyContin as an option when Butrans may not provide adequate analgesia. He apologized for not making the peer group program, he had a long day and was too tired to go. I let him know there will be another one coming up soon.
	Mayfield Hts	OH	44124	5/27/2011	Spoke to tech, Tina, about the stocking of Butrans. She said they do have it and she has seen a couple of scripts. She could not recall the prescriber. I asked if she recalls the use of a savings card. She could not recall a card but that the costs was not to expensive. I explained the savings cards and the relay health program.
PPLPMDL0020000001	Cleveland	OH	44135	5/27/2011	Spoke with Dr and Randy nurse, we reviewed the dosing for Butrans and appropriate aptients. Dr said he will try to remember. I asked Randy for his assistance in recommending Butrans for appropriate patients and he agreed. We reviewed the savigns cards for Butrans and OxyContin.
	Cleveland	OH	44106	5/27/2011	worked pm&r dept dr krupkin and dr balg,set-up appt with him and talked to secretary (jennifer) about Butrans S core messages,initiation guide,patient information booklet/dvd and Butrans formulary grid. worked internal medicine-had to leave Butrans fpi,initiation guide,patient information booklet and Butrans formulary grid for attending physicians and OxyContin fpi,conversion guide and formulary grid. worked family medicine-left Butrans fpi,initiation guide,patient information booklet and Butrans formulary grid for attending physicians and I left OxyContin fpi,conversion guide and OxyContin formulary grids for all attending physicians.
PPLPMDL0020000001	Mayfield Heights	OH	44124	5/27/2011	Doc said she is continuing to prescribe Butrans - for those who have not gone on to stronger opioids yet. These are mainly newer patients to her practice. I asked if she has had titrate Butrans at all. She said she has titrated some patients but overall it is working fine. She would like to prescribe for older patients but she is sticking with commercial patients.
	Beachwood	OH	44122	5/27/2011	Spoke with technician who said both Ashley & Alan were dealing with customer issues. Reviewed Butrans & OxyContin savings programs & eligibility. Also let her know they could print Butrans savings cards at Butrans.com.
PPLPMDL0020000001	Mayfield Hts	OH	44124	5/27/2011	Went over patient information guides & application. She said she would leave my information for the pharmacists.
					Doc said he has been prescribing Butrans and he likes it for the elderly patients. He said he had one this week - an elderly patient that said she is not good with remembering her pills. He said he thinks that Butrans is perfect for elderly patients. I reminded him that Butrans is not covered on medicare/medicaid so elderly patients may have trouble getting it. He said he has a lot of medicare. I reviewed the commercial coverage. He said he doe have medical mutual, anthem and untied. He said he will continue to prescribe it.
PPLPMDL0020000001	Independence	OH	44131	5/27/2011	Reviewed Butrans indication, dosing, & initiating therapy. She expressed interest in attending a Butrans program & asked that I let her & Roman know when the next event occurs. She said she has not personally prescribed Butrans for any patients yet, but does not have a problem with it. She said she thinks Roman & Dr Keppler both have patients on it right now. Also recommended Senokot-S for opioid-induced constipation.
	Cleveland	OH	44114	5/31/2011	dr said she didnt have a lot of time to talk today,was a bad day,but she's still trying to work on 1 patient to start on Butrans,dr apologized for missing Butrans dinner program and she would talk to me more next time i come to see her
PPLPMDL0020000001	Cleveland	OH	44113	5/31/2011	i talked to dr about what he remembered about Butrans,dr said not much,i talked to dr about Butrans being a once weekly dosing option and CIII as dr said he liked these features about Butrans.dr said he wants to wait and see what other doctors are doing in real world as he's conservative.dr said his wife is an internist in practice with him and she's more conservative than him,dr said a webinar or dinner program would be helpful for him to listen to someone talk about Butrans.I gave dr Butrans fpi,initiation guide and told dr i would stop back tomorrow with Butrans webinar flyer.
	Cleveland	OH	44114	5/31/2011	I asked John how dinner program was last week on Butrans and his feedback and John said it was a good program,misssed me and had to go see 2 patients so he'll talk to me later.
PPLPMDL0020000001	Cleveland	OH	44114	5/31/2011	I asked dr how dinner program was last week on Butrans and what his thoughts were post the program? dr said he thought it was a good presentation but there were a few questions on some of the case studies that didnt show an mri diagnosis as he thinks you cant change patients medication without an mri diagnosis.nothing learned after that as dr had to see patient
	Cleveland	OH	44113	5/31/2011	I talked to dr about patients she's started on Butrans and how they are doing and dr said some patients are doing extremely well and she's seeing improvement in patients pain control but others arent as controlled but are still staying on Butrans.dr said there are variability patterns with the patients she's starting on Butrans.dr asked what the insurance coverage was for medicare and medicaid? we discussed those 2 plans,commercially insured patients using Butrans patient savings cards and BWC coverage.dr said to leave Butrans formulary grid with Pam as she has all of the Butrans materials together.
PPLPMDL0020000001	Cleveland	OH	44130	5/31/2011	I asked Dr Diab if, since he had not yet received patient feedback on Butrans, he considers that good news, since generally patients call only when they are dissatisfied. He said yes. I asked him then if he would continue to prescribe Butrans for appropriate patients & he said yes.
	Independence	OH	44131	5/31/2011	Dr Jack said that he still needs to talk to Dr Nickels regarding Butrans. I told him that I was not asking him to switch all of his patients to Butrans, but rather that I am asking him to switch one or two appropriate patients so that he can get some sort of clinical experience & form his own opinion on whether or not there is a place for Butrans in his practice. He said I made a good point. He looked at his next patient's chart & said it actually may be a patient he could try on Butrans.
PPLPMDL0020000001	Cleveland	OH	44130	5/31/2011	I asked Dr Fedorko how many calls he gets each day/week from patients on around-the-clock Vicodin who are requesting increases or changes in medication & he said "not very many". He said this is because patients "know him" & know that he is very cautious of drug seekers & will "fire" them from his practice. He then said if or when that does happen, he has no problem switching them to Butrans. He asked me to review dosing/titration with him. Presented initiation guide & showed pg 6, also discussing titration ability every 3 days up to 20mcg maximum. Also reviewed managed care, asking him to consider patients with commercial insurance only to save on time & frustrations. Went over savings cards as well. Also showed him Ryzolt savings cards for appropriate patients.
	Parma	OH	44129	5/31/2011	Dr Ortega said he just had a patient who he had switched to Butrans from Percocet complaining that Butrans did not work. The patient put on a 5mcg patch, then waited one day & took it off because he said it didn't work, but then put a new one on the next day to try it again. The patient waited a day & then removed it, once again saying it did not work. Dr Ortega told the patient that he should try Butrans again, this time leaving it on for the full week & taking Percocet for supplemental analgesia. He has not heard back from the patient about the results of this. I told Dr Ortega that it sounded like he did the right thing. Dr Ortega said that the other patients he has put on Butrans have done well. He asked about titration ability & writing refills. Discussed ability to titrate every 3 days to a max 20mcg dose. Also discussed OxyContin for appropriate patients beyond Butrans 20mcg. He said he will continue to look for patients. Cindy said he just started another patient on it today.
PPLPMDL0020000001	Independence	OH	44131	5/31/2011	Stopped Dr Rob in the hallway- he asked what Butrans is for. Reviewed indication & also went over appropriate patient type/positioning. I asked if he has chronic pain patients who call in asking for refills too soon & he said yes. I told him some of them are potentially Butrans patients. He said he would keep it in mind & walked into a room.
	Akron	OH	44333	5/31/2011	I asked Dr Brown about her patient load and she mentioned she had partnered with several docs in the area and is starting to get busier. She mentioned that Butrans is certainly a drug that she feel is beneficial to her practice and said she currently has 3 patients on it.
PPLPMDL0020000001	Cleveland	OH	44124	5/31/2011	Window call....Doc needed more oxycontin savings cards. I discussed the current formulary plans where oxycontin is second tier. I discussed the Butrans indication and the positioning. I explained the 7 day delivery and the CII status which means that it can be refilled or called in. I asked if he sees a place for it in his practice. He says he has a few patients that use transmdermals. Nothing more learned.
	Cleveland	OH	44105	5/31/2011	I talked to Abdul,Pharmacist,about Butrans stocking and he's not ordered Butrans yet as he wants to wait for a script to come through,not seen any scripts for Butrans here.I asked Abdul if he would recommend Butrans to doctors he has a good relationship with,if patients tell him their pain isnt controlled with their short-acting opioids and Abdul said he would consider doing that as he likes that Butrans is a once weekly dosing and he likes that Butrans is a patch.Abuld asked if I had any patient information to leave behind and I said I had Butrans patient information booklet that he could give patients if patients arent controlled on their short-acting opioids and abdul recommends Butrans to patients.Abuld said he has a couple booklets so he'll do that.
PPLPMDL0020000001	Akron	OH	44310	5/31/2011	I asked Dr. Cremer how many new patients he was starting on Butrans each week and he told me he started a handful of new patients last week. He is continuing to have success primarily with his BWC patients.



PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/31/2011	I asked Dr. Dinsmore if Butrans was a therapy that he though would benefit his practice and how he currently treats pain. He mentioned that he liked the idea that it was a 7 day therapy and a schedule 3. He asked if I would schedule a lunch so we could discuss it more in depth.
PPLPMDL0020000001	MAYfield Heights	OH	44124	5/31/2011	Spoke to pharmacist, Jesse about the script volume for Butrans. He said he has only seen maybe one. He could not recall the prescribe but he also does not recall any issues with it. I explained the savings card program and the relay health voucher. I asked him about oxycontin volume. He said they dont get many new scripts just a few regule customers. Only carrying the 10, 20, 40mg
PPLPMDL0020000001	Copley Cleveland	OH	44321	5/31/2011	Quick call through window. I asked Dr. Heim if he had initiated Butrans therapy and he said that the patients he had in mind had not come in but he still would trial it on those patients.
PPLPMDL0020000001		OH	44113	5/31/2011	I asked dr what he remembered about Butrans from our last lunch together? dr said he remembered that Butrans was for moderate chronic pain but that was it. I told dr he told me he liked that Butrans was a CIII as he could call in refills and that made it easier for him.dr asked who's covering Butrans and what was medicaid coverage as he has a lot of medicaid.i talked to dr and nurse,shelia,about Butrans formulary coverage and asked dr to start 1-2 chronic pain patients on Butrans,instead of refilling vicodin or increasing vicodin dose when its not controlling patients pain,dr agreed.
PPLPMDL0020000001	Mayfield Hts Brooklyn	OH	44124	5/31/2011	Window call...Reminded doc of the appropriate Butrans patient type - instead of going to vicodin ATC. Reminded him that commercial patients are best candidates. Gave formulary grid. Nothing learned.
PPLPMDL0020000001		OH	44144	5/31/2011	Spoke with pharmacist, Michele, & inquired as to what type of managed care mix they see at that location. I asked if they see mostly Medicare, Medicaid, or commercial insurance & she said there really is an equal mixture of all of them. Discussed savings programs & eligibility requirements for Butrans & OxyContin.
PPLPMDL0020000001	Mayfield Hts	OH	44094	5/31/2011	Quick call.....I asked doc if he sees a place for a long acting, CIII in his patient population. He said he is not in the pain mgmt business. I asked if he has patients taking tramadol or vicodin several times a day. No response. I reminded him of the indication of Butrans. Gave him an initiation guide.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/31/2011	Dr. Pitt thought he had a potential candidate for Butrans therapy but after further discussion the patient was already taking to LAO and passed the point of Butrans therapy. I used the initiation guide to help him and Liz identify a better suited patient and asked if he had any of those patients coming in today and he said he would keep it in mind.
PPLPMDL0020000001	Westlake	OH	44145	5/31/2011	I asked Dr to tell me about the feedback he as been getting from Butrans. He said that he hasn't heard a let of feedback so patients seem to be doing well. I asked if he would continue to convert patients and he said he will.
PPLPMDL0020000001	Cleveland	OH	44109	5/31/2011	He has put Butrans in with his opioid rotation. Reminder about OxyContin as an option when 20mcg Butrans may not provide adequate analgesia. He said he will keep it in mind but he prefers not to prescribe CII when he can. I talked to Mana and Andy,Pharmacists,about Butrans stocking and doctors prescribing,they both said they havent seen any scripts lately.I talked to them about recommending Butrans to physicians and patients,as they may not know of another option.Mana said he would recommend Butrans to doctors but it comes down to doctors choosing the medication and writing it.I aked mana and andy to focus their patient discussions on Butrans patient information booklet and Andy asked about insurance coverage for commercial and medicaid so i showed Butrans formulary grid and talked about Butrans patient savings cards.
PPLPMDL0020000001	South Euclid Cleveland	OH	44121	5/31/2011	Quick follow up from last weeks breakfast. I reminded him of the Butrans patient type and the coverage with commercial plans. Gave him an initiation guide as a dosing reminder and how to start. Nothing learned.
PPLPMDL0020000001		OH	44113	5/31/2011	I talked to dr about his thoughts on Butrans dinner program 5/24,dr said the case studies presented were helpful to give him another perspective on butrans he could consider starting on Butrans,dr said he feels more comfortable knowing Butrans is not an agonist/antagonist which was a concern of his and he did receive the medical information request form answer i sent to medical services and they discussed it at the dinner.dr said he's started a few patients,most of them have been on vicodin 10-15yrs,he's adding Butrans on to vicodin and will see what happens.dr said he has patient information booklets,savings cards,etc.
PPLPMDL0020000001	Lyndhurst	OH	44124	5/31/2011	Spoke to Erin, pharmacist about the stocking and movement of Butrans. She said she has seen a few scripts "here and there". She did have a patient that complained of really bad side effects - skin irritation and increased pain at the application site even after removal of the patch. This patient apparently submitted a complaint to Purdue. Patient was one of Dr. Dews and was ultimately switched to another product. She did not believe the customer had a savings card. I explained the program and the focus on commercially insured patients.
PPLPMDL0020000001	Lyndhurst	OH	44124	5/31/2011	Quick call.....Spoke to Steve about the stocking of Butrans. He said he very busy and only stated that he has Butrans stocked but he has not seen any scripts. He asked the techs and they did not recall any scripts either.
PPLPMDL0020000001	Independence	OH	44131	5/31/2011	Nothing learned.
PPLPMDL0020000001		OH	44131	5/31/2011	Spoke with Angela (technician) as the pharmacist was too busy to see me today. We reviewed savings cards for Butrans & OxyContin as well as eligibility. She said she would give the pharmacists my information & said to stop in another day to speak with them.
PPLPMDL0020000001	Cleveland	OH	44121	5/31/2011	Window call....I asked doc if he has any questions about prescribing butrans. He said no. He just needs to find the right patient. I explained that patients fitting the indication of moderate to severe pain with commercial insurance would be appropriate. Gave him a formulary grid.
PPLPMDL0020000001	Akron	OH	44310	5/31/2011	I asked Dr. Schukay if he though there was a place for Butrans in his practice and he said there was. He said he had forgotten about it because he has been so busy in transition to the new practice. He said he would read some info on his own and get back to me.
PPLPMDL0020000001	Independence	OH	44131	5/31/2011	Dr Sundaram said that he is "keeping his eyes out" for more Butrans patients. I asked him who he considers to be the ideal Butrans patient. He said someone who is on chronic opioids. He then told me about a female patient of his who has chronic pain & takes 2-3 Vicodin per day. He said that the patient needs the Vicodin due to her pain, but that she does not like taking it & experiences adverse events from it. He said that the next time she comes in he is going to switch her to Butrans. I told him that this sounded like a great candidate & asked what her insurance was. He said he thinks she is Medicare. Reviewed managed care & likelihood for prior authorization & also reviewed savings cards for patients with commercial insurance. I asked Dr Sundaram how frequently he gets calls from patients requesting an increase or change in chronic pain medication & he said it happens every day. I asked him why not think of Butrans for those patients & he said as long as it is covered he will.
PPLPMDL0020000001	Cleveland	OH	44103	6/1/2011	i reviewed Butrans 5 core messages,dr said she has started 1 patient who was taking percocet around the clock for his chronic pain but wasnt controlled and he wanted more pills and she wasnt going to give him more pills so she started patient on Butrans and gave him 20 percocet for monthly break through pain and its been controlling this patients pain.dr said its tough to talk to patients about Butrans when they have been taking pills for years and just want more pills,dr wanted more Butrans patient booklets with application dvd as she thinks that'll help her educate patients on Butrans and she will get more acceptance from patients,to try Butrans.i asked dr who the appropriate patient was for butrans? dr said patients calling in to her office earlier every month asking for refills sooner than they should or if patients are taking 15-40mg percocet and still not getting enough pain relief.i showed dr Butrans initiation guide,we discussed Butrans formulary coverage,discussed OxyContin
PPLPMDL0020000001	Mayfield Heights	OH	44124	6/1/2011	I reviewed the patient type and positioning. He said he likes to refer patients to pain mgmt and he will then manage them. He said he would prescribe a product like Butrans for elderly patients. I explained the commercial coverage and the savings cards. He liked the idea of the 5mgc starting dose. He said he would try Butrans for appropriate patients. Discussed the oxycontin patient type and dosing.
PPLPMDL0020000001	Lakewood	OH	44107	6/1/2011	Quick call with Rick and Cindy, we discussed Butrans as an option to vicodin around the clock. We reviewed the medication guide and how to instruct patients on how to use Butrans. They said they did not think they have seen scripts. Reminder that OxyContin may be an option when 20mcg Butrans does not provide adequate analgesia.
PPLPMDL0020000001	Parma	OH	44129	6/1/2011	Dr Gigliotti pulled out his initiation guide for Butrans & said that he is "so close" to finding a patient for Butrans. Again I reminded him that he has said this many times. He said he knows but that he really thinks it will be very soon & told me not to give up. I assured him that I would not & reviewed the patient type that we discussed last week, reminding him that the appropriate patient may call in, not come in to be seen, asking for an increase in chronic pain medication. Also reviewed savings cards for both Butrans & OxyContin.
PPLPMDL0020000001	Cleveland	OH	44103	6/1/2011	i talked to dr about Butrans 5 core messages,reviewed information,discussed appropriate patients dr can consider starting on Butrans and dr said it comes down to insurance and if Medicaid covers butrans,we talked about prior authorization for Butrans and dr said he's just not willing to do the PA for Butrans at this time,but dr said he will continue starting patients on OxyContin so i showed dr OxyContin visual aid and we disussed appropriate patients to start on OxyContin,we talked about OxyContin formulary coverage and i asked dr to continue starting patients on OxyContin,that he feels are appropriate.i recommended Senokot-S
PPLPMDL0020000001	Maple Heights	OH	44137	6/1/2011	Dr Yager said there has been a paradigm shift in the medical community's view of treating pain. He said that when he completed residency 8-9 years ago, it was popular to treat pain aggressively with narcotics, but that now it seems to have shifted in the opposite direction. He went on to say that now it is more common to avoid narcotics whenever possible, including in pain management specialties. I agreed that caution should be exercised in selecting patients for any opioid therapy. I told him that he should be just as cautious with Butrans. Discussed appropriate patient type/positioning, dosing, titration, CIII, & abuse/addiction potential. Dr Yager agreed that some patients do need opioids to control pain & agreed to consider Butrans for patients who are not well-controlled on NSAID's or COX-2's or who request increases in their tramadol or Vicodin dose. Discussed OxyContin as an option for appropriate patients beyond Butrans 20mcg.
PPLPMDL0020000001	Parma	OH	44134	6/1/2011	Dr Hernandez said he continues to get great feedback on Butrans every day & said that he just wrote another script for the patient he had just seen because she was doing so well on it. He said that he is writing for the whole box of patches now, just to save time & calls from the pharmacies who won't break a carton to dispense a single patch. He said that many of his patients have called Butrans "life saving" & he said he plans to continue to prescribe it for appropriate patients. He said he especially likes it for patients who were taking Vicodin around-the-clock chronically. Reminded him of abuse/addiction potential because it is an opioid.Also discussed OxyContin for appropriate patients beyond Butrans 20mcg & the importance of appropriate patient selection.
PPLPMDL0020000001	Cleveland	OH	44106	6/1/2011	i reviewed Butrans 5 core messages,i asked dr who is the appropriate patient in his mind to start on Butrans? dr said he talked to my counterpart for awhile 2 weeks ago about patients taking tramadol that arent controlled and considering Butrans there instead of converting them to vicodin.i asked dr if that made sense to him and how often did he see those patients? dr said he see's those patients every day and knows that Lisa,patient care coordinator,gets refill requests from these tramadol patients daily so she could also tell him if patients arent getting pain relief from their tramadol or vicodin doses.dr said he knows Butrans isnt for patients taking high doses of methadone or morphine,he should think of Butrans earlier for patients. dr said he will consider starting a few patients on Butrans that are either taking tramadol or vicodin and arent getting pain relief,we discussed Butrans formulary coverage.i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44106	6/1/2011	i asked dr how he defined appropriate patient for Butrans,dr said patients taking percocet,5mg or 10mg,1 or 2 tabs a day,that arent controlled,and if they are asking him for more pills he will not refill their percocet.dr said if percocet isnt lasting long enough,he thinks a long-acting opioid is appropriate and will consider Butrans for those patients.i showed dr Butrans initiation guide and i asked dr how often he see's these types of patients,per our discussion? dr said the 2 days he works,every week,he see's these patients all day,dr said patients call medication refill line too and will say their vicodin or percocet isnt giving them pain relief so his patient care coordinator,Lisa,will come to him and talk about Butrans.i asked dr to continue starting those patients on Butrans.dr agreed,we talked about appropriate patients to start on OxyContin,formulary coverage and OxyContin savings cards.i recommended Senokot-S
PPLPMDL0020000001	Macedonia	OH	44056	6/1/2011	Quick call- Dr Shenigo asked for a Butrans "refresher". Reviewed dosing, appropriate patient type/positioning, managed care/savings, CIII, & abuse/addiction potential. Dr Shenigo said that she really does not prescribe many opioids but said she would keep it in mind if she does have a patient for whom she is willing to prescribe opioids.
PPLPMDL0020000001	Cleveland	OH	44113	6/1/2011	i reviewed Butrans 5 core messages with dr i asked him what were the most important things to him when deciding if a long-acting opioid was appropriate for his patients? dr said he liked that Butrans was a patch and dosed once a week and that it was a CIII so that made it much easier because he could call in refills,dr said he has a lot of acute pain patients and only a few chronic pain patients so he cant think of anyone that can benefit from Butrans now but he will keep it in mind for chronic pain patients.dr asked about insurance coverage,we discussed BWC and commercial insurance.i asked dr to think of 2 patients with chronic pain,that are taking vicodin but not controlled,if appropriate to start on Butrans,dr agreed.i recommended Senokot-S
PPLPMDL0020000001	Akron	OH	44320	6/1/2011	I asked Dr. Bonyo why he had not initiated therapy and he said that he had not seen the right patient. Misty explained to him that she had started 2 patients and was having success. He took an initiation guide but did not say much else.
PPLPMDL0020000001	Bedford	OH	44146	6/1/2011	Spoke with Oleig (pharmacy manager) who said he did order Butrans in & actually has received a prescription for it, but the insurance (he said probably Medicaid) required a prior authorization & the office never completed it. Discussed Relay Health program & also reviewed OxyContin savings cards. He said he has noticed a lot of switches from OxyContin to Opana ER since the reformulation of OxyContin. He said he did not need any more OxyContin savings cards.
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PPLPMDL0020000001	Cuyahoga Falls	OH	44221	6/1/2011	I asked Dr. DiLauro how her Butrans patients were responding to therapy and she said that all of the feedback has been positive. I asked if she could start a new patient on therapy by the end of the week and she said she
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	6/1/2011	Dr. Dilauro asked me how Butrans was going I told her I had her some positive feedback and asked her after all our discussions surrounding Butrans if there was any reason she would not trial just one patient. She said she would keep it mind.
PPLPMDL0020000001	Akron	OH	44320	6/1/2011	Dr. Duppsandt was involved in the conversation I was having with Misty. Misty had mentioned that she was having success with Butrans and liked that it was a LAO and a schedule 3. Dr. Duppsandt said she liked the concept but managed care was a big obstacle since most of her patients have state plans.
PPLPMDL0020000001	LAKEWOOD	OH	44107	6/1/2011	Spoke with Ronnie tech, we reviewed Butrans medication guide and how to teach patients how to use Butrans properly. He said that he does not know if they have had scripts and the pharmacist is a floater today so she will not know. I reviewed the savings cards for Butrans and OxyContin. Reminder to recommend Senokot S.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	6/1/2011	Quick call through the window. I asked Dr Hegde if she had reviewed the Butrans materials I had left and she said she looked through it. No new info learned.
PPLPMDL0020000001	Westlake	OH	44145	6/1/2011	Quick call, I asked if he has anymore Butrans success stories, he said he does and that he thinks it's a great job. I asked if he would start more patients and he said he will.
PPLPMDL0020000001	Cleveland	OH	44113	6/1/2011	I talked to Justin,Pharmacist,about recommending Butrans to doctors,i patients are telling him their vicodin or percocet isnt controlling their pain,Justin said he would do that but it depends on relationship with dr,Justin said he thinks a patch dosed once a week is much better for patients,i asked Justin to focus his discussions with patients on application/rotation/log book section in Butrans patient information booklet,Justin agreed saying that was important for patients to remember so he would do that,Justin said he's not seen any scripts lately from Dr.Bohl as he was starting a lot of patients in march and april but he has seen some from Dr.Shen,so we talked about importance of stocking Butrans and we discussed Butrans formulary coverage,i recommended Senokot-S
PPLPMDL0020000001	Parma	OH	44134	6/1/2011	Spoke with Linda (MA) & introduced myself & Purdue's products. She gave me the office protocol & let me know that Dr Mandat is in the office Mondays & Thursdays & does nursing home work on many of the other days.
PPLPMDL0020000001	Euclid	OH	44117	6/1/2011	She said that if I come back next week, I can probably catch him briefly as his lunch schedule is completely booked for the rest of the year. Linda agreed to call me if they get any cancellations.
PPLPMDL0020000001					Asked doc what benefits he sees with Butrans. He said he likes the simple dosing. He would probably use in opioid naive and opioid experienced. He said he is going to start using because it fits a need - a long acting CIII. He wanted to know who else is writing it. I told him many of the pain docs. Instead of going to 120 tabs/month start patients on Butrans. Explained the initiation dosing. Also let him know about the acceptable use of supplements.
PPLPMDL0020000001	Bedford	OH	44146	6/1/2011	Quick call- Dr Moufawad said he did not have time to talk today because he was so far behind. He did say that he plans to participate in the webinar this evening, so I let him know I would follow-up with him. Reviewed patient education booklet & DVD with Melina (MA).
PPLPMDL0020000001	Akron	OH	44302	6/1/2011	Introduced Butrans and FPI. I asked him if he felt like he had the right type of patients that we had identified when talking about Butrans. He said that he had many different patients and he liked that this gave him an additional option when treating chronic pain.
PPLPMDL0020000001	Parma	OH	44134	6/1/2011	Spoke with Marko (pharmacy manager) & reviewed savings programs & eligibility for Butrans & OxyContin. Also asked if he would be willing to break a carton of Butrans to dispense one patch if he received a script written that way. He said he would do this if he starts to see more prescriptions for it, but as of right now, he only has seen one, so as it stands, he would not be likely to authorize it.
PPLPMDL0020000001	Cleveland	OH	44106	6/1/2011	worked internal medicine-talked to residents briefly about Butrans,giving Butrans fpi,initiation guide and Butrans patient information booklets (1-2pm)work pain management dept (2-4pm)- see call notes on dr sahalg and dr
PPLPMDL0020000001	Warrensville Heights	OH	44122	6/1/2011	Spoke with Adrienne (MA) who said Dr Zivic was not in today. Reviewed savings cards for Butrans & OxyContin & also discussed eligibility requirements, including letting her know that they cannot be used for patients with any type of government insurance, including Medicare & Medicaid. She said Dr Zivic does see a lot of Medicare patients but also does have some patients with commercial insurance as well. Adrienne said she does not get very involved in prescriptions. She said she usually passes those phone calls & messages on to Michele.
PPLPMDL0020000001	Lyndhurst	OH	44124	6/1/2011	Asked doc what triggers her to prescribe a Butrans for a particular patient. She said she would consider a patient that had daily migraine but not progressed to vicodin or percocet. She does not have many of them but they are most females 18-55. She has not had many AEs but did have a patient titrated back down to 5mcg because of somnolence. Showed her the incidence in the FPI. She will continue to prescribe for the right patient. She was still good on oxycontin savings cards.
PPLPMDL0020000001	Akron	OH	44320	6/1/2011	I asked Misty about her success with Butrans therapy. She was busy and did not remember much about the patients but said she had not heard back from them. She did mention to Dr. Bonyo and Duppsadt that she was having success and wanted to continue to go to it more.
PPLPMDL0020000001	Westlake	OH	44145	6/1/2011	Met Dr at Avon Lake CCF location. He is FM. He asked about Butrans and I reviewed the key messages. I asked if he treats a lot of chronic pain in his practice. He said that he does not prescribe chronic opioid therapy unless a patient has cancer. He said he is more into preventative medicine. I asked what he does when his patients complain of chronic pain and he said he will give them supplements or try to get to the root of the problem.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	6/1/2011	Talked to the pharmacist Steve who told me that he had gotten some Rx's from Dr. Lababidi. I explained the message that I was focused on when talking to the physicians about Butrans and explained steady state.
PPLPMDL0020000001	Munroe Falls	OH	44262	6/1/2011	Quick call. Dr Kolaczewski said she was too busy and asked if I could come by her next week. I left some material for her to review and asked if we could discuss it on my next visit and she said yes.
PPLPMDL0020000001	Cleveland	OH	44113	6/1/2011	I talked to aurora,MA,to dr bohl who was on vacation this week,about patients he started on Butrans,Aurora said he told me about on 4/28th that had systemic reactions were not the only one's,she thinks there were a couple more patients with hives after starting Butrans,i reported all of the AE information below and called Purdue medical services,Aurora said dr had her pull all of the patient charts,take all Butrans patient savings cards,booklets out of exam rooms as he doesnt want his patients knowing anything about Butrans until this is resolved,Aurora said she thinks Purdue contacted dr as he was filling out information and faxing it to someone,but she wasnt sure if it was Purdue,Aurora said with dr being gone all week,next week is bad to see him to discuss this but she booked lunch on june 13th so i can talk to him then
PPLPMDL0020000001	Lakewood	OH	44107	6/1/2011	Quick follow up, I said Dr. last week you said you just keep forgetting about Butrans so here is your weekly reminder. I asked if he would prescribe Butrans this week and he agreed. Reminder about OxyContin as an option when patients come to him taking more than 40mg of vicodin.
PPLPMDL0020000001	Cleveland	OH	44195	6/2/2011	I asked dr who the appropriate patient was for Butrans? dr said he couldnt remember,but did remember that Butrans was a CIII and a patch,i reviewed Butrans 5 core messages with dr,i showed dr Butrans initiation guide,discussed appropriate patients and asked dr if he had patients he could think of that would benefit from Butrans? dr said yes,he thinks some patients would like wearing a patch and dosing once a week is sometimes easier for patients who dont like taking their pills around the clock,i asked dr to think of 2 patients like that,to start on Butrans,dr agreed,we discussed Butrans formulary coverage,i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44195	6/2/2011	I asked Anne who she thought the appropriate patient was for Butrans? Anne said patients taking vicodin or percocet that arent controlled or asking for more pills,i showed Anne Butrans visual aid,appropriate patient section and we talked about patients taking tramadol that arent controlled and asking for something different,to consider Butrans for those patients,Anne said she would consider Butrans for some patients but as she's mentioned to me in past,she always talks to dr stanton-hicks about each patients medication changes,Anne said the once weekly dosing option of Butrans and the fact its a patch are 2 benefits in her eyes,i asked Anne to think of 2 patients,as we discussed,that arent getting pain relief from their tramadol,to start on Butrans,Anne agreed,i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44195	6/2/2011	I asked dr who the appropriate patient was for Butrans? dr said he didnt know off hand and didnt know if he would be starting anyone on Butrans as he's trying to get his patients off opioids,dr said he prefers to give injections,stimulators,other surgical procedures instead of giving patients narcotics,i asked dr if he had any patients taking around the clock vicodin or percocet,for their chronic pain? dr said yes,he does,i asked dr if those patients ever say their vicodin or percocet isnt lasting long enough or not giving them enough pain relief? dr said yes he hears that occasionally but he usually will explore surgical procedures for these patients,i asked dr to consider Butrans for those patients,if they are appropriate and showed dr Butrans initiation guide to discuss tapering of vicodin and percocet and initiation of Butrans,dr said he'll think about it and i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	6/2/2011	i discussed Butrans 5 core messages,fpi,initiation guide,patient information booklet and formulary coverage with dr dr said he hadnt heard anything about Butrans but liked that it was a patch and dosed once a week,dr said he has a lot of chronic pain patients in family medicine that are taking tramadol around the clock for their chronic pain but not getting pain relief so Butrans could be an appropriate option,dr wanted to see the demo of Butrans,so i showed dr and he asked to keep one demo as he had some patients in mind to try Butrans in and let me know how it goes,we talked about appropriate patients as i showed dr Butrans initiation guide,we discussed proper tapering of short-acting opioids and intiation of Butrans,dr said it sounded easy and would try it,i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	6/2/2011	i talked to dr about Butrans 5 core messages,initiation guide,patient information booklet and formulary coverage,dr said he hasnt heard of Butrans but likes that Butrans is a patch and dosed once a week,i asked dr if he has patients taking tramadol,vicodin or percocet,around the clock for their chronic pain that arent getting pain relief? dr said thats all they see,hundreds of patients like that and patients are always wanting more and more pills,i asked dr to consider starting a couple patients,as we discussed,on Butrans instead of refilling their short-acting opioids,dr agreed,dr asked who's covering Butrans? we discussed Butrans formulary coverage,i recommended
PPLPMDL0020000001	Cleveland	OH	44195	6/2/2011	i reviewed Butrans 5 core messages and asked Kathy what were the top 3 things that stuck out the most to her that were critical when deciding if Butrans was appropriate for her patients? Kathy said once weekly dosing,transdermal delivery system of Butrans and the fact Butrans was a patch,i asked Kathy if she has patients taking tramadol around the clock for their chronic pain but not controlled or not getting pain relief? Kathy said yes she see's patients like that every day,but she has to get approval from dr minzter and dr mekhail as she's treating their patients and they havent thought Butrans was an appropriate option for patients yet,i asked Kathy to talk to both doctors about Butrans as an option for patients we discussed,gave Kathy Butrans initiation guide and Kathy said she'll talk to doctors if patients ask for something different,i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	6/2/2011	i talked to dr about Butrans 5 core messages,initiation guide,patient information booklet and formulary coverage,dr said he hasnt heard of Butrans but likes that Butrans is a patch and dosed once a week,i asked dr if he has patients taking tramadol,vicodin or percocet,around the clock for their chronic pain that arent getting pain relief? dr said thats all they see,hundreds of patients like that and patients are always wanting more and more pills,i asked dr to consider starting a couple patients,as we discussed,on Butrans instead of refilling their short-acting opioids,dr agreed,dr asked who's covering Butrans? we discussed Butrans formulary coverage,i recommended
PPLPMDL0020000001	Cleveland	OH	44195	6/2/2011	reviewed 5 core Butrans messages with dr and asked dr what were the most important factors she's considering when looking at Butrans as an option for her patients? dr said she likes that Butrans has a transdermal system,its a patch and dosed once a week,dr said she hasnt thought about Butrans as most of her patients like taking their tramadol and dont really ask for anything else,except for more pills,i asked dr to consider Butrans for patients taking tramadol around the clock,for their chronic pain,but arent getting pain relief,dr asked who's covering Butrans? we discussed formulary coverage for Butrans and i showed dr Butrans patient savings cards,i asked dr to think of 2 patients,as we discussed,that could benefit from trying Butrans,dr said if patients ask for something different,she'll consider Butrans,i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	6/2/2011	i discussed Butrans 5 core messages with dr,showed Butrans fpi,initiation guide and Butrans patient information booklet,dr said she liked that Butrans was transdermal,dosing once a week is easier for a lot of patients and CII's are much easier if she can call Butrans in for refills,i asked dr if she had patients taking around the clock tramadol,vicodin or percocet,for their chronic pain,but not getting pain relief? dr said yes,i told dr those are the patients,if appropriate,she can consider starting on Butrans,we discussed tapering of short-acting opioids and initiation of Butrans and dr asked who covers Butrans? i asked dr who are the biggest payers here and dr said medicaid and patients on sliding fee scale at metrohealth,apple program,i talked to dr about Butrans formulary coverage and asked her to think of 2 patients that could benefit from Butrans,dr said she will and appreciated information,i recommended Senokot-S
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PPLPMDL0020000001	Cleveland	OH	44109	6/2/2011	i discussed Butrans 5 core messages with dr,showed Butrans fpi,initiation guide and Butrans patient information booklet.dr said she liked that Butrans was transdermal,dosing once a week is easier for a lot of patients and CIII's are much easier if she can call Butrans in for refills.i asked dr if she had patients taking around the clock tramadol,vicodin or percocet,for their chronic pain,but not getting pain relief? dr said yes,i told dr those are the patients,if appropriate,she can consider starting on Butrans,we discussed tapering of short-acting opioids and initiation of Butrans and dr asked who covers Butrans? i asked dr who are the biggest payers here and dr said medicaid and patients on sliding fee scale at metrohealth,apple program,i talked to dr about Butrans formulary coverage and asked her to think of 2 patients that could benefit from Butrans,dr said she will and appreciated information.i recommended Senokot-S
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PPLPMDL0020000001	Cleveland	OH	44109	6/2/2011	i talked to dr about Butrans 5 core messages,fpi,initiation guide,patient information booklet and formulary coverage.dr said she hasnt heard of Butrans but liked that it was a transdermal delivery system and dosed once a week.i asked dr if she had patients taking around the clock tramadol,vicodin or percocet for their chronic pain? dr said yes and usually they are asking for more pills and it never stops.dr said they are careful as to who gets narcotics in family medicine but she thinks Butrans could be an option for those patients taking short-acting opioids but not getting pain relief from them.i asked dr to think of 2 patients,as we discussed,to start on Butrans,i showed dr Butrans initiation guide,discussed tapering and initiation of Butrans.dr said she will review all of the information again and will think of a few patients to try Butrans.i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	6/2/2011	i talked to dr about Butrans 5 core messages,initiation guide,patient information booklet and formulary coverage.dr said he hasnt heard of Butrans but likes that there is an option for his chronic pain patients that arent controlled with their short-acting opioids,we talked about patients taking tramadol around the clock for their chronic pain that arent getting pain relief,to consider starting on Butrans,we talked about tapering of short-acting opioids and initiation of Butrans.dr said he can think of a few patients who can benefit from trying Butrans but asked what the insurance coverage was? we discussed Butrans formulary coverage.i asked dr to think of 2 patients,as we discussed,to start on Butrans,dr agreed and i recommended senokot-S
PPLPMDL0020000001	Barberton	OH	44203	6/2/2011	Dr. Patel said that he started a few new patients just last week and that he really likes the therapy. He said he would continue to initiate therapy for the appropriate patients. I asked if he had any coming in this afternoon and he said he would check.
PPLPMDL0020000001	Cleveland Heights	OH	44118	6/2/2011	I discussed the appropriate patients for Butrans, Oxycontin, and ryzolt. I positioning Butrans after tramadol. I explained the 7 day delivery and the CIII status. He asked me to leave some info so he could read it later. Nothing more learned.
PPLPMDL0020000001	Cleveland Hts	OH	44118	6/2/2011	I reminded doc that of his expressed interest in Butrans and that he wanted me to keep reminding him of the appropriate patient. He said he has not started a patient yet but he wanted to be sure he had savings cards. I pointed them out in his newly rearranged sample/voucher cabinet. He just said "good, sounds like a plan"
PPLPMDL0020000001	Barberton	OH	44203	6/2/2011	Dr. Minich said that she is still not tried Butrans therapy and wants to continue to learn more about it before prescribing it. I asked if she felt comfortable with the molecule buprenorphine and she said she did. She mentioned that she is still prescribing OxyContin for the appropriate patients.<font color=blue><b>CHUDAKOB's need to know about it before she is willing to prescribe it</font color=green><b>LAPMACA's response on 06/14/2011</font>I will ask her next time I<font color=blue><b>CHUDAKOB added notes on 06/15/2011</font>She apparently does not feel comfortable with buprenorphine or Butrans itself if she said she needs to learn more about it. Your challenge is to find out why?
PPLPMDL0020000001	Independence	OH	44131	6/2/2011	Dr Faيمان said that he has indeed put a few patients on Butrans. I asked what type of patients he was selecting. He said that the have been patients with chronic pain (2 have arthritis, 1 with pain from multiple failed surgeries), who were taking low dose Vicodin or Percocet around-the-clock daily. He also added that he is selecting patient with commercial insurance. I told him it sounds like he is choosing wisely. He said that he will continue to identify patients like this to gain more clinical experience. He said that as he gets more patients on Butrans, as he starts getting positive feedback, he will start using it more & more. He said that some people are "patch people" & others do not like using them. Also discussed OxyContin q12h for appropriate patients beyond Butrans. He said that he was finally able to get a patient back on OxyContin who's insurance had suddenly stopped covering it. He said the patient is happy to have his pain relief back.
PPLPMDL0020000001	Cleveland	OH	44109	6/2/2011	i talked to Mike,Pharmacist and Chris,Pharmacist,about Butrans stocking and they said Rob,Pharmacy manager,did order Butrans so they have it in stock as some physicians have prescribed,neither one could look up in their system who has prescribed but said if they see more scripts they will let me know.Chris,pharmacist,said he thinks they are from pain management doctors,but wasnt positive.we discussed Butrans 5 core messages and i asked both pharmacists,what they felt were the most important factors in a long-acting opioid and both of them said as it relates to Butrans,CIII calling in refills is a benefit,once weekly dosing and transdermal delivery of Butrans.we talked about appropriate patients to start on Butrans and i showed Butrans initiation guide to both pharmacists,discussed tapering of short-acting opioids and initiation of Butrans.we discussed Butrans formulary coverage.
PPLPMDL0020000001	Parma	OH	44129	6/2/2011	Dr Paat said he had not put any patients on Butrans yet. He said he did not remember. Reviewed with him dosing, appropriate patient type/positioning, CIII, & abuse/addiction potential. He asked about adverse events. I showed FPI section 6. He asked where patients apply Butrans & how they should apply it. Went over patient information booklets which he said he wanted a few of so that he could give them to patients when prescribing Butrans. He said that some patients truly need pain medications & that he will prescribe Butrans for appropriate patients. He asked about managed care coverage & cost- i reviewed formulary grid & went over savings cards/eligibility. HE asked how Butrans compares with Vicodin with efficacy. Told him we have no comparative data. He said again that he would prescribe Butrans. I asked if he was thinking of specific patients & he said yes. Discussed OxyContin q12h as an option for patients beyond Butrans 20mcg.
PPLPMDL0020000001	Parma	OH	44129	6/2/2011	Dr Tolentino said she has not put anyone on Butrans yet but did not know why. Reviewed dosing, appropriate patient type/positioning, CIII & abuse/addiction potential. She said she is trying to prescribe fewer opioids but that she knows that some patients really do need something more than their current therapy. She asked how it compares to Duragesic. I told her we have no comparative data. Asked her to think of more "moderate" pain patients & showed initiation guide page 6 to help her position Butrans better. She asked about managed care coverage- reviewed formulary grid & discussed savings cards/eligibility. Also discussed application, heat warning, & patient information booklets. She said she would prescribe Butrans for appropriate patients. I asked if she could think of one or two specific patients who she thought could benefit from Butrans & she said yes. Discussed OxyContin as an option for appropriate patients beyond Butrans 20mcg.
PPLPMDL0020000001	University Hts	OH	44118	6/2/2011	Window call....reviewed the Butrans patient indication, positioning, and CIII status and 7 day delivery. I asked him if he sees a place for such a product in his practice. He said maybe, for the right patient. I asked him if I could schedule an appt with him to discuss further. He said sure. I scheduled with JoAnn for 6/15.
PPLPMDL0020000001	Cleveland	OH	44195	6/2/2011	worked pain management dept-see call notes and left Butrans fpi,initiation guide and Butrans patient information booklet with my business card for Dr.Vrooman,Dr.Mekhal,Dr.Stanton-Hicks,Mae,NP for Dr.Cheng's patients and Dr.Covington as i couldnt see these physicians. worked rheumatology dept-left Butrans fpi,initiation guide and patient information booklet for Dr.Calabrese,Dr.Long,Patty Paccos,PA and Dr.Chatterjee,as i couldnt see doctors and had to leave information with my business card for them to review information and if interested,they will contact me.
PPLPMDL0020000001	Akron	OH	44333	6/2/2011	Linda said she was having success with the few patients she had started on Butrans. I asked if she had started any new patients on therapy and she said she had not but because she has had success will keep it in mind.
PPLPMDL0020000001	Parma Heights	OH	44129	6/2/2011	Reviewed savings programs for Butrans & OxyContin with pharmacist Larissa. Also discussed how she can print Butrans savings cards on Butrans.com. I asked her what types of managed care are most popular in the area & she said that she gets a lot of Medicare & commercial insurance. She said that she does get some Medicaid, but not a lot. Reviewed eligibility requirements for savings programs, reminding her that patients with government insurances are not eligible.
PPLPMDL0020000001	Berea	OH	44017	6/2/2011	I asked Dr to start a patient on Butrans instead of going to vicodin around the clock. He said he would and that he is starting to prescribe Butrans.
PPLPMDL0020000001	Cleveland	OH	44109	6/2/2011	worked dept of family medicine-lunch with residents and attending physicians-see call notes
PPLPMDL0020000001	Highland Heights	OH	44143	6/2/2011	Quick call.....i reviewed the Butrans formulary coverage and that Butrans will be difficult to get for medicare patients. Gave him a formulary grid for both Butrans and oxycontin explaining that oxycontin might be appropriate after 20mcg of Butrans.
PPLPMDL0020000001	Cleveland	OH	44109	6/2/2011	i talked to dr about Butrans 5 core messages,initiation guide,patient information booklet and formulary coverage.dr said she hasnt heard of Butrans but likes that Butrans is a patch and dosed once a week.i asked dr if he has patients taking tramadol,vicodin or percocet,around the clock for their chronic pain that arent getting pain relief? dr said thats all they see,hundreds of patients like that and patients are always wanting more and more pills.i asked dr to consider starting a couple patients,as we discussed,on Butrans instead of refilling their short-acting opioids,dr agreed.dr asked who's covering Butrans? we discussed Butrans formulary coverage.i recommended
PPLPMDL0020000001	Highland Heights	OH	44143	6/2/2011	Window call.... brief review of the Butrans patient type and the savings cards. Nothing learned.
PPLPMDL0020000001	Parma	OH	44129	6/2/2011	Spoke with pharmacist Heath & reviewed Butrans savings program/e-voucher. Also went over OxyContin savings cards & reminded him of eligibility requirements for savings programs. I asked him what managed care plans he sees the most of in this location & he said he sees a little Medicaid, some commercial insurance, & mostly Medicare plans.
PPLPMDL0020000001	Parma	OH	44129	6/2/2011	Dr Roheny said that he actually did put a patient on Butrans & the patient is doing well on it. I asked what made him choose the patient & he said that the patient was on 4 Vicodin per day chronically & had commercial insurance. I told him it sounded like he chose an ideal candidate & asked if he has more like that patient that he can think of so that he can expand his clinical experience with Butrans. He said he does. Discussed initiation of Butrans on 5mcg or 10mcg dose depending on what their current opioid therapy/dose is. Also discussed titration ability every 3 days to a max 20mcg. Gave him Senokot-S & Colace samples & recommended Senokot-S for opioid-induced constipation, discussing dual mode of action.
PPLPMDL0020000001	Westlake	OH	44145	6/2/2011	I asked Dr if he has thought about initiation Butrans for a patient who is taking 2-3 5mg hydrocodone per day instead of increasing the dose. He said this sounds like a good idea instead of giving the patients more pills. We discussed that he can still give short acting analgesics as supplemental with Butrans. He said he will start doing this for BWC and commercial. He said that he was able to get a prior auths through for Butrans for Medicaid and he will let me know how the patient is doing. We discussed OxyContin is still a long acting option. He asked about the generics for OxyContin and I let him know there was a limited amount available.
PPLPMDL0020000001					

	Westlake	OH	44145	6/2/2011	We reviewed our last conversation in that he is having a hard time finding the right patient. He said that many of his patients are already on higher doses of medication. I asked if he has any patients who are taking tramadol around the clock and are asking for more. He said he could see prescribing Butrans in that case. He said he would not switch them if they are only taking a few short acting a day and doing well, I supported this and said he can initiate Butrans when those short acting are not controlling the pain and he agreed. We discussed OxyContin for those other patients taking over 40mg of hydrocodone per day.<font color=
PPLPMDL0020000001	Cleveland	OH	44109	6/2/2011	asked him to covert patients when short acting are not controlling their pain. Thanks.<font color=blue><b>CHUDAKOB's query on 06/09/2011</b></font>looks like your next call objective could have been your close on this call.<font color=green><b>HOLUBA's response on 06/14/2011</b></font>Yes I should have closed for a patient this week after I asked him to covert patients when short acting are not controlling their pain. Thanks.<font color=blue><b>CHUDAKOB added notes on 06/15/2011</b></font>Thanks for your response.
PPLPMDL0020000001	Cleveland	OH	44109	6/3/2011	i reviewed Butrans 5 core messages with dr,asked dr what were the top 3 things he considered most important about Butrans,looking at 5 core messages in visual aid? dr said once weekly dosing, Butrans being a patch and the fact its a CII so he can call in refills makes it easier than a CII.we talked about appropriate patients to start on Butrans,dr said he hasnt thought about Butrans and hasnt had anyone ask for something different lately as his patients like taking their pills.i asked dr if patients ever call office earlier every month,as that might be an indication a long-acting opioid is more appropriate,dr said that does happen and i made a good point i asked dr to consider 2 patients,that arent controlled on their vicodin or percocet,and start them on Butrans.dr asked about insurance coverage so we discussed formulary coverage.we talked about OxyContin being an appropriate option for patients,conversion guide looking at 7 tablet strengths and formulary coverage for OxyContin.
PPLPMDL0020000001	Cleveland	OH	44115	6/3/2011	i talked to dr about Butrans 5 core messages,appropriate patients to start on Butrans showed Butrans initiation guide and we discussed formulary coverage.dr said she does have a lot of patients with chronic pain taking tramadol so Butrans would be a great option.dr said she likes that Butrans is once a week and is a patch so its easy for patients.dr asked about starting dosage strengths of Butrans,i showed initiation guide again and Butrans patient information booklet with application dvd to help dr educate patients on Butrans,dr said she'll think of a few patients that would be interested in starting on a patch and try Butrans in them.i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44104	6/3/2011	i talked to dr about 5 Butrans core messages and asked dr what were the top 3 things looking at these messages that were important to her when deciding if a long-acting opioid was appropriate for patients. dr said she liked that Butrans was a once weekly dosing option and transdermal delivery.i asked dr if Butrans being a CII,single entity opioid,was important? dr said CII was easier for her as she can have staff call in refills.i asked dr if she had chronic pain patients taking vicodin around the clock but still not getting pain relief? dr said yes,hundreds of those patients.i showed dr Butrans initiation guide and asked her to consider 2 patients,on vicodin but not controlled to start on Butrans and think of commercial plan patients so they can use Butrans patient savings cards,dr said she would do that and we discussed Butrans patient booklet with application dvd to assist dr in educating patient on Butrans.i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	6/3/2011	i reviewed 5 Butrans core messages with dr,she said that Butrans is a great option as a patch and likes the once weekly dosing but she hasnt had any patients be willing to take a patch and stop their pills.i told dr she can still give immediate release opioids with Butrans,i showed dr Butrans fpi,noting this information, and i asked dr to think of 2 patients who are taking tramadol around the clock for their chronic pain and not getting pain relief, and start them on Butrans knowing she can still give some tramadol if she chooses to or non-opioids with Butrans.dr said ok she'll think about it.dr asked about insurance coverage for Butrans on medicaid and medicare,we discussed all formulary coverage for Butrans.i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	6/3/2011	i reviewed 5 Butrans core messages with dr,he said he hasnt seen any patients that he thought were appropriate to start on Butrans and his biggest concern is insurance coverage.i told dr if insurance wasnt an issue,what is it about Butrans that he likes for his patients? dr said he likes that Butrans is once weekly dosing and is a patch,instead of his patients taking short-acting opioids around the clock and still complaining that they dont get pain relief we talked about patients that are taking vicodin around the clock,but not getting pain relief,to try Butrans and focus on commercially insured patients and BWC patients.dr said ok he'll think about it and consider 1 or 2 patients to try Butrans in and let me know.i recommended Senokot-s
PPLPMDL0020000001	Beachwood	OH	44122	6/3/2011	Quick call- Reviewed Butrans dosing, appropriate patient type, & managed care with Jennifer. She asked for another initiation guide so that she could reference it. She said she did not have time today to have a discussion but that she appreciated the information.
PPLPMDL0020000001	BEACHWOOD	OH	44122	6/3/2011	Sandy (pharmacist) was not available, so I spoke with the technician & reviewed Butrans appropriate patient type & delivery system. She said she has seen it on their shelf but does not think they have had any prescriptions come in for it. Reviewed with her savings programs for Butrans & OxyContin. She said she would give me information to Sandy.
PPLPMDL0020000001	Cleveland	OH	44109	6/3/2011	i reviewed Butrans 5 core messages with dr,discussed appropriate patients to start on Butrans,dr said he hasnt thought about Butrans as he doesnt see a lot of patients on narcotics.i asked dr if he has patients taking vicodin around the clock for their chronic pain that arent getting pain relief? dr said he's sure there are some,i told dr thats where he can consider Butrans,i showed dr Butrans initiation guide and asked him to start 2 patients on Butrans instead of refilling the vicodin for a few patients,dr said if patients ask for something different he'll consider Butrans.dr asked about insurance coverage so we discussed Butrans formulary coverage. i recommended
PPLPMDL0020000001	Independence	OH	44131	6/3/2011	Spoke with Toni who was filling in for Jill today. She said Dr Pai was only coming in for a couple of hours today & that his schedule was full, so I should come back next week when it is less hectic. She checked his schedule & said next Friday morning would probably be my best opportunity to see him. Reviewed Butrans indication, delivery system, & appropriate patient type with Toni. She said that she remembers hearing something about it at the other location where she normally works with Dr Pai.
PPLPMDL0020000001	Cleveland	OH	44104	6/3/2011	i reviewed 5 Butrans core messages and talked to dr about what he felt were the most important factor when considering a long-acting opioid for his patients.dr said side effects and contraindications.we talked about Butrans AE's,contraindications and who's appropriate for Butrans,i showed dr Butrans initiation guide.i asked dr if he would consider his patients taking tramadol that arent getting pain relief,to start on Butrans? dr said he hasnt thought about them but that was a good point,instead of going to vicodin or percocet.i asked dr to consider 2 patients as we discussed to start on Butrans and not refill their tramadol,dr agreed.we discussed formulary coverage for Butrans.i showed dr OxyContin visual aid,discussed appropriate patients for OxyContin,7tablet strengths available and OxyContin formulary coverage.
PPLPMDL0020000001	Garfield Hts	OH	44125	6/3/2011	Quick call- Reviewed appropriate patient type for Butrans. Dr Sadowski asked me if Butrans is covered on Medicaid. I told him it would require prior authorization. He told me that the only patients who he has that fit the description are Medicaid patients & then walked into a room. Also spoke with Deena (MA) & asked how frequently she gets calls from patients requesting increases or changes in their chronic pain medications. She said she probably gets 5-10 calls & faxes per week. I asked if they are all Medicaid patients & she said no. I asked her if she would help remind Dr Sadowski of Butrans for appropriate patients when she gets these calls, especially those patients with commercial insurance & she agreed to do this. She said that usually that is what it takes to get him to start prescribing newer medications. She said she knows that he has a lot of patients who could benefit from Butrans.<font color=blue><b>CHUDAKOB added notes on 06/09/2011</b></font>Nice job going to the MA to verify what the physician said as well as asking her to take action.
PPLPMDL0020000001	Fairlawn	OH	44333	6/3/2011	Quick call. Met Dr. Parisi at the window and asked if he had any failures with Butrans since it does not look like he is calling in refills. He said that as far as he knew patients were responding well and he would continue to keep it in mind for the appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44104	6/3/2011	i reviewed Butrans 5 core messages with dr,discused appropriate patients to start on Butrans,dr said she has some patients taking Vicodin and percocet that she knows are always asking for more pills because their medication isnt lasting long enough.we talked about proper tapering of short-acting opioids and initiation of Butrans.i asked dr to think of 2 patients on vicodin or percocet,not getting pain relief that she can start on Butrans.dr said she will remember Butrans and asked about insurance coverage.we discussed Butrans formulary coverage and i recommended Senokot-S
PPLPMDL0020000001	Beachwood	OH	44122	6/3/2011	Dr Warren said that he does have a patient he put on Butrans. I asked him to tell me about the patient & he said the patient was on short-acting around-the-clock opioids. I asked what type of feedback he has received & he said none yet, so he considers that good. I asked if he would continue to choose more patients to switch to Butrans & he said yes. I asked what he liked about Butrans. He said he likes that it is a long-acting CIII. He said one of the things he likes is that it gives a steady/constant drug delivery & is not "as strong" as fentanyl. I reminded him that it still carries abuse/addiction potential as it is an opioid. He said he understands. I asked him to be just as cautious in prescribing Butrans as he would be with any other opioid. He said he would. Reviewed managed care coverage & savings program. Also reminded him of OxyContin q12h for appropriate patients beyond Butrans. Spoke with nurse Donny who takes the phone calls from patients about medications.
PPLPMDL0020000001	Cleveland	OH	44114	6/3/2011	i asked Joel,Pharmacy Manager,if he has seen any Butrans scripts here? Joel said no they havent seen anything.we discussed 5 Butrans core messages and i asked Joel what did he think the top 3 most important things were about Butrans,for patients? Joel said once weekly dosing,transdermal delivery and doctors will like that Butrans is a CII and can call in refills.i asked Joel if he would recommend Butrans to patients,if they arent getting pain relief with their short-acting opioids? Joel said he didnt have anything to give them so i gave Joel Butrans patient information booklets that patients could read and show their doctor,Joel liked that idea and took some and agreed to keep Butrans in mind for some patients.i recommended Senokot-S
PPLPMDL0020000001	Fairlawn	OH	44333	6/3/2011	i asked Dr. Domdera if he was any closer to prescribing Butrans now that it has been out for a while. He said that he really liked the concept and had some patients that made him consider Butrans therapy but he had not done it yet.
PPLPMDL0020000001	Cleveland	OH	44109	6/3/2011	i reviewed Butrans 5 core messages with dr,asked dr what were the most important things when he saw these 5 core messages(used visual aid for discussion)dr said once weekly dosing and Butrans being a patch.i asked dr if he has had any patients on around the clock tramadol tell him they arent getting enough pain relief? dr said no,not lately,most of his patients do physical therapy,acupuncture,other alternative methods for pain relief as dr doesnt like to write a lot of narcotics.dr said if he has any patients tell him they arent getting pain relief with their tramadol,he'll consider Butrans.i showed dr Butrans initiation guide and discussed Butrans formulary coverage.i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	6/3/2011	worked pm&dr dept-see call notes, worked rheumatology dept-left Butrans fpi,initiation guide,formulary grid and patient information booklet and my business cards for Dr.Ballou and dr.Magrey as i couldnt see them this am;follow-up next week with Linda,RN,to book lunches for the rest of the year in rheumatology dept.
PPLPMDL0020000001	Cleveland	OH	44103	6/3/2011	i talked to Amol,Pharmacist,about Butrans stocking and who they are seeing scripts from.Amol said he couldnt look anything up in computer but does know they have gotten a few scripts from UH and Cleveland Clinic doctors.i asked Amol if he could focus his discussions with patients on the application and rotation of Butrans and showed Amol the Butrans patient information booklet with this information,Amol said he would do that.i asked Amol if he would recommend Butrans to doctors,if patients tell him that their short-acting opioids arent giving them pain relief? Amol said it depends on the physician,some doctors he can do that and others he cant,but he will keep that in mind.i recommended Senokot-S
PPLPMDL0020000001	Beachwood	OH	44122	6/3/2011	Spoke with Shelly & asked about area managed care plans. She said they see mostly Medco & Caremark and also Medicare Part D plans. She said she thinks she maybe has 10 customers with Medicaid. She said she has not had any Butrans activity since the initial prescription they filled. I asked what her thoughts were on Butrans. She said that she thinks it is a great idea & that it has a lot of potential, but that it can be difficult to switch patients from short-acting around-the-clock opioids to long-acting medications because people like to have the "control" over being able to take medication when they feel pain. She said she thinks it is largely psychosomatic.
PPLPMDL0020000001					Reviewed FPI 2.4 & discussed ability of patients to take short-acting medications for supplemental analgesia. She said she thinks it will come down to how well physicians are educating patients.
PPLPMDL0020000001	Akron	OH	44312	6/3/2011	Quick call. I asked Dr. Smith if he had an opportunity to prescribe Butrans and he said he had not. No new info learned.

	Beachwood	OH	44122	6/3/2011	I asked Dr Yokiell about his experience & thoughts on Butrans since it seems his initial excitement about Butrans has faded. He said that he had a few get pushed back from insurance. I asked him if managed care didn't exist, if there was anything clinically holding him back. He said it honestly is a matter of comfort level with buprenorphine. He said he has not used buprenorphine like many anesthesiologists have, so he is not very comfortable with the molecule. I asked if prescribing it for more patients to give him more feedback would bolster his confidence & he said yes, but also that prescribing Butrans takes more thought for him since he is not used to it yet. Presented initiation guide & asked what an example of a typical dose of opioids is for his patients. He said 4-5 Percocet per day. Showed pg 6 & walked through initiating Butrans & discussed supplemental analgesia (opioid or non-opioid), titration, & managed care. Discussed OxyContin for patients beyond Butrans.
PPLPMDL0020000001	Warrensville Heights	OH	44122	6/3/2011	Quick call- caught Dr Brooks at the window while speaking with his medical assistant. He said he didn't have time to talk today but thanked me for the visit. I let him know I would schedule an appointment for us to sit down to discuss Butrans in more depth & he said that was a good idea.<font color=blue><b>CHUDAKOB's query on 06/09/2011</b></font>Was this really a call? Did you discuss anything relating to Butrans with the Dr.<font color=green><b>APSEGAS's response on 06/13/2011</b></font>Nothing in depth or clinical. Only that I was there to continue our Butrans discussion. He told me he didn't have time today & said to schedule something so we could talk about it. I set up a breakfast later this month to do that.<font color=blue><b>CHUDAKOB added notes on 06/14/2011</b></font>This probably should not be considered a call. If you mentioned any type of information relating to Butrans, then that is OK. If not, then it probably should not be considered a call. Thanks for the clarification!
PPLPMDL0020000001	Akron	OH	44312	6/3/2011	I let the pharmacist know the message I was giving to the physicians in the area and explained the ideal type of patient for Butrans. I explained steady state and prepared him for patient call backs within the first 72 hours.
PPLPMDL0020000001	Akron	OH	44319	6/3/2011	I discussed the most ideal type of patient with Dr. Katrji including opioid naive patients and asked if he treats many of those patient types. He said he did and that he liked the concept of Butrans. I asked him what he liked and he said the fact that it was a schedule 3 and a LAO. He said he would further review the info that I had left.
	Cleveland	OH	44109	6/6/2011	I reviewed Butrans 5 core messages with dr,j asked dr what were the top 3 things he felt were critical to consider when looking at a long-acting opioid? dr said he looks at side effects,efficacy and cost of a drug.we talked about side effects of Butrans,i showed dr Butrans visual aid for discussion,we talked about clinical trials of Butrans addressing efficacy of Butrans and i showed dr Butran formulary grid and discussed Butrans patient savings card for commercially insured patients.i asked dr if he had 2 patients with commercial insurance,taking tramadol around the clock for their chronic pain but not getting pain relief,that could benefit from Butrans? dr said yes he has a lot of patients taking tramadol and some of them might be willing to take a patch once a week,so he would have to talk to a few patients and see what happens.we discussed appropriate patients to start on OxyContin,7 tablet strengths available and OxyContin formulary coverage.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	6/6/2011	i talked to dr about 5 Butrans core messages,appropriate patients to start on Butrans,showed Butrans initiation guide and discussed insurance coverage for Butrans.dr said he's been out of town for a few weeks,hasnt started anyone on Butrans,but will keep Butrans in mind. i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	6/6/2011	i talked to Dale,PA,about 5 Butrans core messages,appropriate patients to start on Butrans and asked Dale if he would consider patients taking tramadol around the clock that arent getting pain relief,to start on Butrans.Dale said he would and we discussed Butrans formulary coverage.i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44115	6/6/2011	i reviewed 5 Butrans core messages with Lisa,PA,asked her what was important when she looked at this information in Butrans visual aid? Lisa said Butrans being a patch and dosed once a week were 2 benefits she saw as she knows of the 1 patient dr keppler started on Butrans,was a woman taking vicodin around the clock and not getting pain relief so this patient was excited to try Butrans and is doing great without having to take any vicodin. we discussed appropriate patients for Butrans,i showed Lisa Butrans initiation guide and asked her to consider patients taking less than 15mg vicodin,if they arent controlled,and try Butrans,she agreed.we talked about OxyContin being an appropriate option for patients,i showed OxyContin visual aid for discussion and we discussed 7 tablet strengths,conversion guide and OxyContin formulary coverage.i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44104	6/6/2011	i reviewed 5 Butrans core messages with dr and asked dr what were a couple factors he considered when looking at a long-acting opioid like Butrans? dr said once weekly dosing is much easier for some patients and Butrans being a patch was good in his eyes for patients dr asked what were the starting dosage strengths as he couldnt remember them,i showed dr Butrans initiation guide and we talked about proper tapering of short-acting opioids and initiation of Butrans.dr asked about BWC coverage for Butrans,we discussed that and dr considering commercial plan patients to start on Butrans.i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44130	6/6/2011	Spoke with Danielle (technician) who said the pharmacist was not available. Reviewed with her Butrans & OxyContin savings cards & reminded her of eligiblity guidelines. She said they do give out savings cards when they are able to. Also discussed Butrans dosing, indication, and appropriate patient type. She said she would give my information to the pharmacists.
PPLPMDL0020000001	Cleveland	OH	44115	6/6/2011	i reviewed 5 Butrans core messages with dr,dr said she liked that Butrans was a once weekly dosing option in a patch but she only has a handful of chronic pain patients that take narcotics around the clock and didnt know if Butrans was really going to play a role in her practice.i asked dr if she had patients taking tramadol,that had chronic pain,around the clock? dr said yes she had some like that but majority of patients she treats take tramadol prn and have acute pain.we talked about Butrans indication,i showed dr Butrans visual aid with indication,appropriate patients and dr said she thought Butrans was for patients taking max doses of tramadol.i showed dr Butrans initiation guide looking at patients taking less than 300mg tramadol,to consider Butrans for those patients if their tramadol isnt giving them pain relief.dr said that made sense and she would consider that for a handful of patients.dr asked about Butrans formulary coverage,discussed commercial plans and butrans patient
PPLPMDL0020000001	Parma	OH	44134	6/6/2011	Introduced myself to Dr Mandat who immediately said, "Butrans" when I said I was with Purdue. He said he has 6 patients on Butrans so far & that he feels it is a great product. I asked what type of patients he is using it on & he said that he is the medical director of 5 hospices & has been using it on those patients with success. He said that who of them had been on fentanyl & are now doing well on Butrans after being titrated. He said that he first learned about Butrans in a journal article & has continued to try it on patients because of the results he has gotten so far. Discussed appropriate patient types, managed care, & savings cards for those eligible. He said he really doesn't prescribe many opioids for patients in his practice & does so only for his hospice patients. He was also happy to have Senokot-S & Colace samples- recommended Senokot-S for medication-induced constipation.
PPLPMDL0020000001	Solon	OH	44139	6/6/2011	Spoke with MA's Chrissy & Deborah who said they do not think Dr Zaidi has prescribed Butrans but do not know why. They also said he was too busy to see me today. Reviewed details of June 16th webcast & asked them to give an invitation to Dr Zaidi. Reviewed with them Butrans delivery system & appropriate patient type. They said again that they do not know why he has not written. Also asked them to check their stock on OxyContin savings cards- they did not need more cards.
PPLPMDL0020000001	Cleveland	OH	44115	6/6/2011	i talked to Roman,PA,about 5 Butrans core messages and asked Roman who was the appropriate patient to start on Butrans? Roman said they have 200 patients,monthly,that have chronic pain and take narcotics so he thinks someone taking vicodin or percocet all the time for their pain,but not getting relief,could benefit from Butrans.Roman said he missed the Butrans dinner program and was disappointed as he wanted to speak with other physicians prescribing Butrans and hear real world experience with Butrans.Roman said to tell Ashleigh that he will go to a program in july,if she has 1 then.we discussed Butrans patient information booklet,with application dvd,acting as an educational tool,based on the limited time they have with patients.Roman said he only has a few minutes with patients,as dr keppler can see 60 patients a day like he had scheduled today.we discussed Butrans insurance coverage and Butrans patient savings cards.we talked about OxyContin being an option for patients and who was
PPLPMDL0020000001	Cleveland	OH	44115	6/6/2011	dr asked me what is Butrans? i showed dr Butrans visual aid,discussed 5 Butrans core messages.i asked dr who were the appropriate patients he would consider for Butrans? dr said patients taking 6-8 Vicodin a day.i asked dr what strength of vicodin he was referencing? dr said 5mg Vicodin.i asked dr if he would consider Butrans for patients taking 1-2 vicodin a day,so less than 15mg hydrocodone? dr said he might but he's thinking more about patients taking 6-8 vicodin a day as he gets concerned with patients taking too much acetaminophen. dr said he's started a few patients on Butrans and 1 of them was a woman taking vicodin,not getting pain relief and tired of taking pills around the clock for her chronic pain,so Butrans was an option she was interested in hearing about.we talked about Butrans patient information booklet with dvd being an educational tool,dr said that would help as they dont have time to explain everything.dr asked about insurance,we discussed commercial plans.i asked
PPLPMDL0020000001	Fairlawn	OH	44333	6/6/2011	Dr. weidman said she had tried the rapt and liked the idea of Butrans because it was a LAO. She said that her biggest obstacle is remembering to write it when the appropriate patient comes in. I asked how many patients she thought she would see this week that she could try it on. She said that she was sure she would see a few and would try harder o remember it.<font color=blue><b>CHUDAKOB's query on 06/16/2011</b></font>Re-read your call note. I beleive it is a mistype, but I cannot figure out what a "rapt" is. In addition did you ask her to clarify what she felt was the appropriate patient? Does she know what the appropriate patient is?<font color=green><b>LAPMACA's response on 06/17/2011</b></font>She does know the right type of patient. I meant that she had tried Butrans therapy...spell check must have changed it. Sorry for the typo.<font color=blue><b>CHUDAKOB added notes on 06/21/2011</b></font>No problem, I just couldn't figure it out.
PPLPMDL0020000001	Fairlawn	OH	44333	6/6/2011	Spoke with Julie who is a floating pharmacist. I explained the core Butrans message and the most appropriate type of physicians that I had been talking to physicians about. She checked and told me that Butrans was not currently stocked and that they could not get it stocked until a Rx came through.
PPLPMDL0020000001	Cleveland	OH	44113	6/6/2011	worked pain management dept
PPLPMDL0020000001	Akron	OH	44333	6/6/2011	Linda said she still had one patient on Butrans therapy and liked it. I asked her why she had not prescribed to any new patients and she said she would and said she was running behind and promised to talk to me at a later
PPLPMDL0020000001	Cleveland	OH	44130	6/6/2011	Dr Fedorok asked me to go over the Butrans dosing with him again. Reviewed initiation guide & dosing for both opioid naive & opioid-experienced patients. He said that it will take repetition with him to remember Butrans details. He said he has no clinical objections to Butrans but that managed care can be an issue. Reviewed with him managed care coverage & savings cards. Also reviewed Ryzolt savings cards & recommended Senokot-S for opioid-induced constipation. Worked with Mary Ann & Maryellen, covering managed care details & savings cards.
PPLPMDL0020000001	Akron	OH	44333	6/6/2011	Dr. Griffiths told me that she had initiated Butrans therapy to 2 patients and had not yet heard back from them. She said that she would continue to use it but said most of her patients are Buckeye patients. I told her to just keep it in mind for her patients who were commercially insured or had BWC.<font color=blue><b>CHUDAKOB's query on 06/16/2011</b></font>Did you ask her about why she chose Butrans for those patients? By asking this you may gain insight into her thought process.<font color=green><b>LAPMACA's response on 06/17/2011</b></font>I will do that!<font color=blue><b>CHUDAKOB added notes on 06/21/2011</b></font>I hope it goes well! I am guessing you will have some good discussion.
PPLPMDL0020000001	Cleveland	OH	44109	6/6/2011	worked rheumatology dept -see call note on dr ballou
PPLPMDL0020000001	Bedford	OH	44146	6/6/2011	Quick call- Dr Moufawad said that he did not do the Butrans webcast as promised & then added that he does not think that he is going to be writing Butrans. I asked him why & he said that none of his patients who he tried it on liked it & he is confused "not sure about it". He said with Butrans being an agonist/antagonist, he just does not want to "mess with it". I told him that Butrans is a partial agonist, not an agonist/antagonist but he just waved & walked into a patient room.
PPLPMDL0020000001	Akron	OH	44333	6/6/2011	I asked Dr. Shah how many patients did not continue on their Butrans therapy. He said there were very few patients that had discontinued and he was still prescribing for new patients. He said that he did not feel comfortable prescribing more than a 10 mcg patch and would convert patients requiring more than that.
PPLPMDL0020000001	Uniontown	OH	44685	6/6/2011	I asked Dr. Stetler about his success with Butrans therapy. He said he very much liked the therapy and had initiated it to several patients and would continue to do so and then walked away from the window.
PPLPMDL0020000001	CLEVELAND	OH	44109	6/6/2011	I talked to Rod,Pharmacist,about 5 Butrans core messages and asked Rod what were a few things he saw in Butrans that were important? Rod said once weekly dosing of Butrans and Butrans being a patch.i asked Rod if he would recommend Butrans to patients by giving them a patient information booklet,if they arent getting pain relief from their short-acting opioids and perhaps Butrans could be an option. Rod said he would do that with some patients. I left a few Butrans patient information booklets and we discussed Butrans formulary coverage.i recommended Senokot-S
PPLPMDL0020000001	Bedford	OH	44146	6/6/2011	Quick call- Caught Dr Haddad in the hallway. He apologized for missing the program last month & requested to be invited to the next available program. He said that he has had good results with Butrans. He said that he finds that most patients do need to be titrated to the 10mcg or 20mcg dose. I told him it sounded like he is doing what he should be, titrating when necessary. Reviewed savings cards for Butrans & OxyContin. Dr Haddad said he would continue to identify Butrans patients.
PPLPMDL0020000001	Parma	OH	44129	6/6/2011	Spoke with nurse, Lynne, in effort to obtain an appointment with Dr Gallagher. She said that he is so extremely busy that he has no time for patients, let alone reps. Reminded her of my initial appointment with Dr Gallagher & let her know that he & I had discussed a follow-up of some sort to discuss Butrans again. She took my information & said she would do her best to get me some time with Dr Gallagher. Reviewed with her Butrans dosing, indication, & delivery system.
PPLPMDL0020000001					



PPLPMDL0020000001	Akron	OH	44333	6/6/2011	I asked Becky if she had initiated Butrans therapy to any new patients and she said she had not. She said that she liked the therapy though but had just not really seen any pain patients. I reminded her what the ideal patient looked like and she committed to using it when she saw the appropriate type of patient.<font color=blue><b>CHUDAKOB's query on 06/16/2011</b></font>Instead of you reminding her, ask her what type of pain patient she is looking for? The more they talk, the more you learn<font color=green><b>LAPMACA's response on 06/17/2011</b></font>thanks<font color=blue><b>CHUDAKOB added notes on 06/21/2011</b></font>You are Dr Ortega retrieved his initiation guide where he had taken some notes on patients for whom he was prescribing & getting feedback for Butrans. He said that he has two very happy patients on it & one who he is not sure about yet (who he told me about last week). He said he has two patients who he would like to get on Butrans who are now on OxyContin. He said both the patients are willing to taper their current dose to a lower level in order to initiate Butrans. Dr Ortega asked me if he would start these patients on 5mcg. I told him that per our FPI & initiation guide, it is recommended that those patients start at the 10mcg dose. Dr Ortega asked what we recommend for supplemental analgesia- I told him we make no specific recommendations, but that in our studies patients were given acetaminophen or ibuprofen. He said he is glad that I come in frequently because he thinks of questions. Reminded him of OxyContin savings cards.
PPLPMDL0020000001	Parma	OH	44129	6/6/2011	Dr. Oyakawa told me that he does not like to write a lot of branded products because he gets too much push back. Once I explained coverage he said he felt more comfortable and would definitely keep it in mind, I went over the most ideal types of patients and he mentioned that he has many of those patients at his practice. I asked if he would try Butrans on 2 of them and he said he would.
PPLPMDL0020000001	Fairlawn	OH	44333	6/6/2011	I reviewed 5 Butrans core messages with dr,asked dr what were important factors to him about Butrans for his patients? dr said he liked once weekly dosing,transdermal delivery and that Butrans is a CII so thats easier for him to call in refills.dr said he hasnt thought about Butrans and couldnt remember insurance and wanted to know if Butrans was covered on Medicaid? we discussed formulary coverage for Butrans.i asked dr to focus on 2 patients,commercial plans,that are taking vicodin around the clock but not getting pain relief and asking for something different,to start them on Butrans.dr agreed.we discussed initiation of Butrans with Butrans 5mcg or 10mcg and patient information booklet.i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	6/7/2011	I reviewed 5 Butrans core messages,dr said he remembered that Butrans was transdermal and dosed once a week.i asked dr if he had patients taking vicodin that werent getting pain relief and coming to him asking for something different? dr said yes,all the time,he hears that and Sheila,RN,gets calls from patients on medication refill line.i showed dr Butrans initiation guide,discussed proper tapering of short-acting opioids,initiation of Butrans and then we discussed Butrans patient information booklet as dr said the application dvd in booklet will help educate patients.dr asked about insurance coverage for medicaid patients.we discussed insurance coverage for medicaid and commercial plans and use of Butrans patient savings cards. I recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	6/7/2011	Window call.....discussed the appropriate patient for Butrans. He said he does use some transdermals but they tend to be too expensive for some patients. I explained how Butrans has a savings card program similar to oxycotin and that commercially insured patients can save \$40 off their co pay. I gave him a branded FPI for his review. He said he would look at it.
PPLPMDL0020000001	Cleveland	OH	44106	6/7/2011	I reviewed Butrans 5 core messages with Steve,Pharmacy Manager and asked him what were the most important factors he saw in Butrans? Steve said once weekly dosing and Butrans being transdermal were the 2 that stood out.we talked about appropriate patients for Butrans,i showed Steve Butrans initiation guide and i asked Steve if he would recommend Butrans to patients by giving them a patient information booklet? Steve said if patients tell him their pain isnt controlled with their short-acting opioids,he will do that but depends on patient.i asked Steve if he would feel comfortable recommending Butrans,to doctors,if patients tell him they arent getting pain relief from their short-acting opioids? Steve said it depend on doctor and his relationship with doctor but he might be able to do that with some physicians. we discussed Butrans formulary coverage and patient savings cards.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/7/2011	Dr. Pitt sat down with me and went through some of his charts in an effort to find an appropriate patient to trial Butrans on and came up with a patient who is currently taking Percocet a couple times a day. He committed to trying Butrans on this patient so he could get some patient feedback.
PPLPMDL0020000001	Parma	OH	44129	6/7/2011	Reviewed with Dr Chagin Butrans indication, dosing, application, positioning, CII, abuse/addiction potential. He said he has forgotten but has no clinical issues with it. I asked where he could see himself using it. He said he has many patients on Vicodin chronically that he could switch. Discussed managed care & savings cards. Discussed OxyContin as an option for appropriate patients beyond Butrans & reviewed Ryzolt q24h & managed care. Also recommended Senokot-S for opioid-induced constipation.Spent time with MA Lynn- went over Butrans appropriate patient type/positioning, dosing, titration, initiation guide, how to write the prescription, CII, abuse/addiction potential. Asked what the best way for me to follow up & remind Dr Chagin more frequently & asked for her help. She committed to recommending Butrans to Dr Chagin for appropriate patients when she identifies them when they call or come in. She also said she would help me gain access to Dr Chagin more frequently.
PPLPMDL0020000001	Euclid	OH	44132	6/7/2011	Opened the call by reminded doctor that he said hee liked the idea of Butrans because it reduces the number of tablets patients take. I reminded him of the appropriate patient type. He said he tried it for a patient that had rotator cuff surgery and is getting good relief. He said the problem is that the cost is too high and its not covered everywhere. He has a lot of workers comp (private and state) and has some medical mutual and medco. I reviewed the grid and expressed the importance of giving savings cards. He needed more. He said he will try to prescribe more as he does not like it when patients ask for percocet or vicodin (for example).
PPLPMDL0020000001	Parma	OH	44129	6/7/2011	Spoke with pharmacist Keith & asked him if he knew their policy on opening boxes of products to dispense, for example, one of four patches. He said they do not do this. Reviewed Butrans & e-voucher system & also discussed OxyContin savings cards. I asked him what insurance plans he sees a lot at this store & he said Humana comes to mind. I asked if he saw mostly Medicare/Medicaid, or commercial plans & he said "a lot" of Medicare
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/7/2011	Quick call through window. I asked Dr. Stetler about his success with Butrans and he said he had not heard back from the patient he had tried it on. I asked if they were still on Butrans therapy and he said he was not sure.
PPLPMDL0020000001	Mayfield Heights	OH	44124	6/7/2011	Spoke to Debbie about Butrans patient type - explained the application of the patch and how to properly dispose of it. She said she has not had any issues with the adhesion of the patch. She asked if the patch can be applied anywhere. I explained the 4 sites and how to rotate. I reviewed the managed care and how I spoke with Dr. Laham about the commercially insured patients as appropriate for Butrans.
PPLPMDL0020000001	Cleveland	OH	44195	6/7/2011	I talked to Steve,Assist Pharmacy Manager,about 5 Butrans core messages,asked Steve what were top 3 factors most important about Butrans? Steve said once weekly dosing,transdermal delivery and CII as doctors can call in refills.i asked if Steve would recommend Butrans to doctors,if patients tell them their pain isnt controlled with short-acting opioids? Steve said he might,depends on dr.i asked Steve to focus his discussions with patients,when getting Butrans scrips,on application/rotation section in Butrans patient information booklet.Steve said he would do that.i recommended Senokot-S and left protocol pad
PPLPMDL0020000001	Cleveland	OH	44113	6/7/2011	worked internal medicine physician-dr elbadaway see call note; worked a few more physicians offices in building (dr bhimani, dr gadmack and dr flores but couldnt see these doctors so had to leave Butrans initiation guide,patient information booklet,formulary grid and my business cards for these physicians)
PPLPMDL0020000001	Cleveland	OH	44195	6/7/2011	worked neurology dept - left Butrans fpi,initiation guide,patient information booklet, formulary grid and my business card for Dr.Spears,Dr.Stillman,Dr.Kriegler and Dr.Mays. I also left OxyContin formulary grid and conversion guide for each doctor in neurology. worked rheumatology dept-left Butrans fpi,initiation guide,patient information booklet,formulary grid and my business card for Dr.Calabrese,Betsy Kirschner(NP),Patty
PPLPMDL0020000001	Akron	OH	44310	6/7/2011	I asked Dr. Cremer what he liked best so far about Butrans therapy. He said he liked that his patients seemed to like it and weren't calling back complaining and walked away. Char told me he has been continuing to initiate therapy to new patients, especially BWC patients.
PPLPMDL0020000001	Parma	OH	44134	6/7/2011	Spoke with Nathan (pharmacist) & inquired as to whether they had Butrans stocked. He said that they do have it & that they have a few patients on it. Reviewed savings program/e-voucher which he was very familiar with & also reviewed OxyContin savings cards for those eligible. I asked what his policy was on opening a box of Butrans should they receive a prescription written for one. He said that he has opened a box for a patient, so he will do it if the doctor does not want to switch the prescription, but he did say that they always call the doctor to clarify. I asked if it was Dr Hernandez & he said yes.
PPLPMDL0020000001	C. Falls	OH	44223	6/7/2011	Spoke with Larry. I asked if he had seen any additional movement from Dr. Sables group and he said he had not. They did have Butrans stocked but said they they did expect much from the pain group since they focus mainly on procedures.
PPLPMDL0020000001	Independence	OH	44131	6/7/2011	Quick call- Dr Jack said he still has not "jumped on the bandwagon" for Butrans. I told him he should join the many Butrans prescribers & asked what happened to trying it on the patient he was walking in to see last week when I was in. He said it "didn't work out" & then walked away. I stopped him again by asking him how his stock on OxyContin savings cards was. He did say he could use some more & then walked into a room.
PPLPMDL0020000001	Warrensville Heights	OH	44122	6/7/2011	Spoke with Carol (nurse) who said that Dr Shin was still not seeing reps. She said that Debbie handles that & she is out for vacation until next week. She said that I should call Debbie on Monday to try to get something figured out as to how I may be able to see Dr Shin. Discussed Butrans dosing, delivery system, & savings cards. She said they have enough savings cards for Butrans & OxyContin.
PPLPMDL0020000001	Akron	OH	44304	6/7/2011	Introduced Butrans and FPI. He said that Butrans was an ideal medication for many of his patients currently on a low dose SAO. He committed to trying it on 2 patients.
PPLPMDL0020000001	Mayfield Heights	OH	44124	6/7/2011	Window call...Reveiwed the Butrans patient type and formulary coverage with doc and Debbie. She was between injections so nothing learned and no savings cards needed.
PPLPMDL0020000001	Cleveland	OH	44130	6/7/2011	Quick call- Dr Diab said he did not have time for questions today. Reminded him of Butrans savings cards & showed formulary grid. Let him know that eligible patients who have commercial insurance & utilize savings cards will pay around \$15 for a month's supply. He said he felt this was a "good deal". Spoke with MA Karen & reviewed managed care & savings cards & scheduled a breakfast.
PPLPMDL0020000001	Parma	OH	44129	6/7/2011	Quick call- Jen said she has not started any patients on Butrans yet & then walked into a room. Spoke with Dawn (nurse/office manager) who asked how the Butrans program was. Told her it was a good program & that Dr Nickels was there & had good questions. She said she thinks that he is probably OK with starting new patients on Butrans & that is where he told the nurse practitioners they could prescribe it. She said they all still have reservations about starting patients on opioids on Butrans. I asked her to clarify at what quantity of opioid does the concern begin. She said she wasn't sure but that the concern is about putting patients into withdrawal or having to taper them. I reminded her that patients taking <15mg Vicodin per day could start on the 5mcg dose without an initial taper. She said that there is always the issue with insurance too. I reminded her that state BWC is currently paying for Butrans so cost should not be an issue. Also discussed Ryzolt value cards.
PPLPMDL0020000001	Parma	OH	44134	6/7/2011	Spoke with pharmacy manager, James, who said he needed more OxyContin savings cards. He said that he really appreciates them & that there are a few patients who do not have insurance who use them. I reminded him that cash-paying patients can use the OxyContin savings cards once every 14 days. Inquired about Butrans activity- He said that he thinks it is a great idea but he has not seen a single prescription for it so far. Reviewed Butrans savings through e-voucher or savings Cards.
PPLPMDL0020000001	Independence	OH	44131	6/7/2011	Quick call- Butrans positioning message to Dr Rob in the hallway. He said he could not stop to talk today. I let him know I gave Dr Jack more OxyContin savings cards. He waved & walked away.
PPLPMDL0020000001	Cleveland	OH	44113	6/8/2011	I reviewed 5 Butrans core messages with dr and asked him what were the most important factors to him about Butrans,for his patients? dr said he likes that Butrans is a transdermal medication,once weekly dosing and its a CII so that makes it easy for refills,but dr said he has a lot of acute pain patients and the chronic pain patients he has are happy taking their pills.i asked dr if he has patients taking vicodin that ask for something different as their pain isnt controlled with the vicodin,dr said sometimes patients will ask for something different but usually they are asking for more pills.i showed dr Butrans initiation guide,discussed appropriate patients like the patients taking vicodin but not getting pain relief,to consider Butrans as an option.we talked about Butrans formulary coverage and i asked dr to think of 2 patients that he can start on Butrans,dr said he will do that if patients are appropriate. I recommended Senokot-S<font color=blue><b>CHUDAKOB's query on 06/16/2011</b></font>When the doctor said that his patients usually ask for more pills, this may have been a great time to ask him how he feels about giving them more pills<font color=green><b>BROOKAM's response on 06/20/2011</b></font>he has already told me in past calls that he doesnt like giving more pills, but thanks for mentioning<font color=blue><b>CHUDAKOB added notes on 06/25/2011</b></font>You seem to think that because he told you in the past, it is the end of the discussion. Have him tell you until he says he told you in the past. Because he said this in the past does not mean he feels that way today.
PPLPMDL0020000001	Cleveland	OH	44114	6/8/2011	I talked to John,PA,about 5 Butrans core messages,John said he likes that Butrans is a patch and dosed once a week and he is recommending Butrans to both doctors in office.I asked John who are appropriate patients to start on Butrans? John said patients taking short-acting opioids that arent controlled and asking him for more pills,that who he's recommending to dr katz and dr marshall to start on Butrans.we discussed Butrans formulary coverage and i asked John to continue recommending Butrans for those patients,John agreed.i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44103	6/8/2011	dr said he started 1 patient on Butrans,hospice patient that he shares with dr rosenfield.i reviewed 5 Butrans core messages with dr and asked him who was the appropriate patient to start on Butrans? dr said patients taking low doses of morphine 30-80mg,not controlled,i told dr he could also start patients on Butrans if they are taking less than 30mg oral morphine and not getting pain relief with that regimen,dr said he knew that and would keep it in mind.dr asked about insurance coverage for Butrans as he has majority Medicaid patients,we discussed Butrans formulary coverage.i asked dr to think of a few patients,with commercial insurance,like we discussed and start them on Butrans.dr said he's moving to Texas July 1st,so he'll only see me this month and will be gone.i recommended Senokot-S

PPLPMDL0020000001	Cleveland	OH	44114	6/8/2011	i reviewed Butrans 5 core messages with dr,dr said he likes the once weekly dosing of Butrans and that its a patch and has started a few patients on Butrans and they are doing fine.i asked dr who are the appropriate patients to start on Butrans? dr said patients on vicodin or percocet that arent getting pain relief and asking him for more pills,he isnt going to give them more pills so Butrans is a great option.we discussed Butrans initiation guide,tapering of short-acting opioids and initiation of Butrans,dr said he gets it and will continue starting patients on Butrans. we discussed Butrans formulary coverage and i recommended Senokot-5
	Cleveland	OH	44104	6/8/2011	i talked to dr about Butrans 5 core messages,dr said he likes that Butrans is a patch and dosed once a week but he said majority of his patients are taking vicodin and percocet as needed,for acute pain and if they have chronic pain they dont take their short-acting opioids around the clock.dr said he only has a handful of chronic pain patients taking vicodin and percocet around the clock so he could think of Butrans for them if he feels they need a medication change.i showed dr Butrans initiation guide and discussed appropriate patients,tapering and initiation of Butrans. we discussed Butrans formulary coverage and i asked dr to think of 2 patients taking percocet around the clock for their chronic pain but not getting pain relief,to consider Butrans for them,dr agreed. i recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44114	6/8/2011	i reviewed 5 Butrans core messages with dr and asked her what were the most important factors to her about Butrans,for her patients? dr said she likes that Butrans is a long-acting opioid, a CIIi so its easier to call in refills and likes the once weekly dosing for her patients.i asked dr if she is considering Butrans for patients taking 1-2 Vicodin,5mg,around the clock,but not getting pain relief from that regimen? i showed dr Butrans initiation guide for discussion. dr said no she would increase dosing interval for patients or strength of vicodin before considering a long-acting opioid.i asked dr if she could discuss Butrans with 2 patients like this,and start them on Butrans instead of increasing dosage strength or interval? dr said she'll think about it.dr said she has some patients on Butrans and they are doing great so she'll continue thinking of Butrans as an option. we discussed Butrans formulary coverage and i recommended Senokot-5
	Akron	OH	44333	6/8/2011	Dr. Brown said she was having success with Butrans now that she was starting to get busier. She said she is converting patients from SAO's who are not stable. She said she would continue to initiate therapy to the appropriate patients. She mentioned one of her patients experienced a drop in their blood pressure which i addressed via the FPI.
PPLPMDL0020000001	Cleveland	OH	44104	6/8/2011	i talked to dr about Butrans 5 core messages,asked dr who was appropriate to start on Butrans? dr said she could only remember that Butrans was a patch and once weekly dosing.dr asked who was appropriate patient and what was insurance coverage? i showed dr Butrans initiation guide and asked dr if she had patients taking percocet around the clock for their chronic pain that weren't getting pain relief and asking her for something different or more pills? dr said yes all the time.i told dr she could consider Butrans,if patients meet Butrans indication,for these patients and if they have commercial insurance they can use Butrans patient savings cards.dr said ok she'll talk to a few patients and see what they say about Butrans.i recommended Senokot-5<font color=blue><b>CHUDAKOB's query on 06/16/2011</b></font>The core visual aid has a page (p9) that discusses the appropriate patients for Butrans. Take a look at it and see how you can incorporate it into your presentations.<font color=green><b>BROOKAM's response on 06/20/2011</b></font>Barry i know there is a page in core visual aid but thats not the visual aid i chose to use in this call, but thanks for the reminder that we have the Butrans visual aid<font color=blue><b>CHUDAKOB added notes on 06/22/2011</b></font>Amy, this is something we will be using more in the future so there is not time like the present to start using it.
	Uniontown	OH	44685	6/8/2011	I asked Dr Stetler about his success with Butrans and he mentioned that it was good so far and he had not heard back from any of his patients. He said that ONE of his patients was opioid experienced. He said he would continue use for the appropriate patients.
PPLPMDL0020000001	Hudson	OH	44236	6/8/2011	I reminded Dr Tosino of our last conversation, where he told me that he does not like to prescribe opioids in general & asked him what types of patients he does prescribe opioids for. He does not like to do it, but does if the patient is established with him as trustworthy or has legitimate pain. I agreed that he should be cautious & added that he should use the same caution with Butrans. He said that he has tried sending patients to pain management, but that they end up coming back to him on multiple pain medications, which they sometimes don't comply with & that it just complicates treatment, so he does prescribe opioids where appropriate. Positioned Butrans for patients taking 2-3 Vicodin per day who call in too soon for refills. I asked him if he gets calls like this & he said he gets them daily. I asked him if it is fair for me to ask him to identify a few patients like this to switch to Butrans & he said yes. OxyContin reminder for appropriate patients beyond Butrans 20mcg.
	Hudson	OH	44236	6/8/2011	Spoke with pharmacist, Bob, & inquired about Butrans activity. He said he has a few customers on it, so he always makes sure to keep some of the 5mcg & 10mcg doses in stock. He said that one customer is on 5 & 10mcg. I told Bob we do not recommend wearing more than one patch at a time. He said he knows this, but that is how the doctor wants it. I asked who wrote the prescription but he said he did not know & that he doesn't remember the patient's name so he couldn't look it up. Discussed savings for Butrans through e-voucher & also reviewed OxyContin savings cards. He said he did not need any savings cards at this time.
PPLPMDL0020000001	Cleveland	OH	44120	6/8/2011	i talked to Stewart,Narcotics Buyer/Pharmacist,briefly about Butrans stocking,scripts they are getting for Butrans,we talked about my message to doctors on who's appropriate and not appropriate for Butrans.i asked Stewart to focus patient discussions,when getting their Butrans,on application and rotation of Butrans and show this information in Butrans patient information booklet.Stewart said he'll do that.we talked about Butrans insurance coverage and i recommended Senokot-5
	Hudson	OH	44236	6/8/2011	Quick call- Beth said she still has Butrans but has not seen a single script for it. Reviewed savings cards for Butrans & discussed how she can print them from Butrans.com. Asked if she needed additional savings cards for OxyContin & she said she would take some.
PPLPMDL0020000001	Cleveland	OH	44106	6/8/2011	i reviewed 5 Butrans core messages and asked dr who was appropriate to start on Butrans? dr said he knows Butrans is a good option for patients taking low doses of short-acting opioids like vicodin or percocet.dr said he's started a few patients on Butrans that were taking tramadol but not getting pain relief so i should see that in my data soon.i told dr i wasn't aware of him starting anyone on Butrans but was happy to hear that if he did start a couple patients on Butrans.i showed dr Butrans initiation guide and asked dr to think of a few patients taking tramadol,around the clock,for their chronic pain,that arent controlled,to start on Butrans.dr said he would do that and asked about insurance coverage.we discussed Butrans formulary coverage.i recommended Senokot-5<font color=blue><b>CHUDAKOB's query on 06/16/2011</b></font>What specifics did you find out about the patients he started on Butrans? A simple question like tell me about the patients, or one of the patients you started on Butrans may have opened him up to discussion.<font color=green><b>BROOKAM's response on 06/20/2011</b></font>i already wrote in past call notes, tramadol patients, not controlled that was it, gave to Usa to start them - i have used that opener before thanks<font color=blue><b>CHUDAKOB added notes on 06/25/2011</b></font>That doesn't mean he remembers it. If they remember every opening you used, they would be prescribing lots of Butrans.
	Cleveland	OH	44115	6/8/2011	dr is a resident at ST.Vincent's hospital but was in dr rosenfield,dr pandit,dr eleuze and dr bennett's office today for lunch so i reviewed 5 Butrans core messages with dr,Butrans fpi,initiation guide,patient information booklet and formulary grid.dr said he hasnt heard about Butrans but thinks its a great option for patients instead of refilling their vicodin or percocet.we talked about patients taking short-acting opioids with Butrans or giving non-opioids and i showed this information in Butrans fpi.dr said ok he'll keep Butrans in mind and asked if Butrans was on hospital formulary? i told dr Butrans wasnt on formulary so if he prescribed Butrans he would have to fill out a non-formulary drug form.dr asked if Butrans was covered on medicaid as thats majority of patients at hospital,so we discussed Prior Authorization for medicaid patients.
PPLPMDL0020000001	Cleveland	OH	44130	6/8/2011	Quick call- Saw Dr Kansal at the window as i was discussing Butrans managed care & savings cards with Dorothy & Sharon. Reminded Dr Kansal of our lunch conversation in which he agreed to try some patients on Butrans. He said he didn't have time to talk today about it & then walked away. Worked with Dorothy to schedule an appointment with him to discuss Butrans further. She requested more Senokot-5 & Colace samples & said the patients really have been appreciating them.
	Garfield Hts	OH	44125	6/8/2011	Spoke with MA Amy who said they are still not allowing any pharmaceutical reps due to EMR & computer system. I attempted to schedule an appointment, but she said they are not even scheduling anything at this time. She had no recommendations on how i may be able to gain access to Dr Kline & did not know when they will start seeing reps again. She said i will just have to keep checking back to see.<font color=blue><b>CHUDAKOB's query on 06/16/2011</b></font>While I can see why you might want this in your call notes, there is no appearance of a product discussion and therefore cannot be a call, even if it is a non-HCP call.<font color=green><b>APSEGA's response on 06/17/2011</b></font>i will make sure that I do not put in any non-HCP calls for anything that does not include a clinical discussion.<font color=blue><b>CHUDAKOB added notes on 06/19/2011</b></font>Thank you! Remember a non-HCP call still has to be with a nurse, MA or someone that is clinically involved in the process.
PPLPMDL0020000001	Parma	OH	44129	6/8/2011	Linda (pharmacist) said she had ordered Butrans early but still has not seen any prescriptions for it. Reviewed positioning for Butrans & also discussed savings cards & let her know she could print savings cards online from Butrans.com. Also discussed OxyContin savings cards but she said they do not stock it at that location.
	Cleveland	OH	44104	6/8/2011	i reviewed 5 Butrans core messages with dr,dr said he's started a few patients on Butrans but none of them were in the office these are hospice or assisted living patients.i asked dr why he felt Butrans was appropriate for these patients? dr said Butrans is a great option for patients taking percocet or vicodin around the clock for their chronic pain but the short-acting opioids are wearing off too soon,thats where he feels a long-acting opioid is appropriate.dr said Butrans is easy to apply,no issues for patients and he's still giving them some short-acting opioids for breakthrough pain.dr said to leave a couple Butrans patient information booklets as he will give them to patients,we discussed Butrans formulary coverage and we discussed where OxyContin is appropriate,i showed OxyContin visual aid for discussion,showed OxyContin conversion guide and dr wanted some OxyContin savings cards and we discussed insurance coverage.i recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44106	6/8/2011	i talked to dr about Butrans 5 core messages and asked what were the most important factors about Butrans,for patients? dr said the fact Butrans is a patch and once weekly dosing is much easier for many of doctors patients.i asked dr who's appropriate for Butrans? dr said patients taking percocet that arent controlled and asking for more pills,he's stopping and not refilling their percocet,he's considering Butrans for them. we discussed Butrans formulary coverage and i recommended Senokot-5<font color=blue><b>CHUDAKOB's query on 06/16/2011</b></font>If he is really doing the things he says he is, why do you think we are not seeing more Butrans out of him? Just curious on your thoughts.<font color=green><b>BROOKAM's response on 06/20/2011</b></font>because he doesnt have a huge volume - tuesday and wednesday seeing patients<font color=blue><b>CHUDAKOB added notes on 06/25/2011</b></font>Ok. We discussed this in person. Thank you!
	Beachwood	OH	44122	6/8/2011	Spoke with Yvonne (MA) who said i just missed Jim & Dr Tabbaa. Discussed Butrans positioning, indication, delivery system & patient education booklet. She said i may be able to catch Dr Tabbaa on Friday afternoon & suggested i try back.<font color=blue><b>CHUDAKOB's query on 06/16/2011</b></font>Looks like you discussed some important information with Yvonne. What action, if any, did you ask her to take after your call? Even if you said would you make sure this information gets on Dr. Tabbaa's desk, that would have been better than inaction, don't you think?<font color=green><b>APSEGA's response on 06/17/2011</b></font>Yes, i agree that an action is always better than inaction. I think what i need to do is not only have a plan for my next call objective with each physician, but also have one with staff, especially if, like in this case, i am unable to catch the doctor as expected. I will start putting this into my pre-call planning so that i am better prepared when i go into each office.<font color=blue><b>CHUDAKOB added notes on 06/19/2011</b></font>That is certainly a good idea in offices where you know that you will see one person if the doctor is unavailable. This might serve as an arduous task. Most importantly is when making a non-HCP call, ask them to do something for you as well.
PPLPMDL0020000001	Cleveland	OH	44106	6/8/2011	worked pain management dept
	Cleveland	OH	44113	6/8/2011	i worked orthopedic office-couldnt see Dr.Bohl,1st day back from week of vacation and too busy to talk but did see Dr.Berkowitz,orthopedic physician in same office
PPLPMDL0020000001	Parma	OH	44129	6/8/2011	Quick call- Dr Giogliotti said he was very busy & running way behind. He said he has not prescribed Butrans. Invited him to take part in June 16th webcast. He checked his calendar & said he did not have any schedule conflicts for that evening.
	Hudson	OH	44236	6/8/2011	Dr Seiple said he tried a patient on Butrans & that the patient felt "horrible" on it. I asked what he meant- he said the patient just said that he generally felt bad all over while on Butrans. I asked him what dose of opioid the patient had previously been on. Dr Seiple said Opana ER 30mg q12h & that he started the patient on Butrans 5mcg. I asked if he knew exactly how the patient initiated Butrans (ie how long after he took the Opana did he start Butrans) but he said id not know. I showed initiation guide page 6 & asked if he thought that patient may have been out of the range current opioids & might have been on too high a dose of Opana to be considered appropriate for Butrans. He said that was very possible & that he hadn't thought of that. I asked if this helped clarify where to position Butrans & he said yes. Positioned Butrans for patients on 2-3 Vicodin per day. I asked if this experience would prevent him from finding different patients for Butrans & he said no.<font color=blue><b>CHUDAKOB added notes on 06/16/2011</b></font>Very nice job of clarifying and diagnosing through good

	Independence	OH	44131	6/8/2011	Dr Trickett asked how Butrans is being received. I told her that it has been well received by various specialties as so many types of physicians have patients who need chronic opioid therapy. Positioned Butrans for patients who are taking 2-3 Vicodin per day chronically who call for refills too soon or ask for changes in medication. I asked her if she had patients like this- she said many. I asked if she would, instead of increasing their current opioid, switch them to Butrans. She said yes. Discussed Butrans as a CII long-acting option & also reminded her of abuse/addiction potential. Discussed importance of setting patient expectations & educating them prior to starting them on Butrans. She said she will have to "sell" the medication to them to get them to switch from short-acting. I asked if she was committed to doing this- she said yes & added that she will target patients with commercial insurance on chronic Vicodin or Percocet Discussed OxyContin savings cards & managed care.
PPLPMDL0020000001	Cleveland	OH	44103	6/9/2011	I reviewed 5 Butrans core messages with dr,talked about appropriate patients that could try Butrans and dr said she loves that Butrans is a long-acting opioid as she believes this is better for patients who have chronic pain.dr said her challenge with Butrans is that she is getting resistance from patients not wanting to stop their percocet or other short-acting opioids and start on Butrans.I showed dr Butrans fpi,noting maintenance of therapy section where dr can continue giving short-acting opioids with Butrans or non-opioid medications,its up to her,dr said ok she forgot about that.I showed dr Butrans initiation guide,discussed Butrans 5mcg and 10mcg as 2 starting dosage strengths,we talked about Butrans patient information booklet and the application dvd as an educational tool because dr said she doesnt have additional time to explain everything about Butrans.I asked dr to think of a few more patients to start on Butrans,to continue getting clinical experience,dr agreed.
PPLPMDL0020000001	Cleveland	OH	44106	6/9/2011	I discussed 5 Butrans core messages,fpi,initiation guide,patient information booklet and insurance coverage for Butrans.I asked dr what were the most important factors in Butrans that he saw? dr said he likes that Butrans is transdermal delivery,dosed once a week and a CII so he can call in refills.I asked dr to think of a few patients taking tramadol around the clock,that meet Butrans indication,but arent getting pain relief,and start them on Butrans.dr said he will and we discussed commercial plan coverage for Butrans.I recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44195	6/9/2011	I reviewed 5 Butrans core messages with Anne,NP,and asked what were the most important factors about Butrans that Anne would consider when thinking to start a patient,Anne said once weekly dosing is easier for some patients and some patients would like a patch instead of taking pills so she could see Butrans for those patients.I showed Anne Butrans initiation guide,discussed tramadol patients who arent getting pain relief and asking for something different,to try Butrans,Anne said she'll keep it in mind. we discussed insurance coverage for Butrans and I recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	6/9/2011	dr said he's still finding those right patients to start on Butrans,even though he had to stop a few patients this week because Butrans wasnt working.I asked dr what strength these patients were taking? dr said he started them on Butrans 10mcg and titrated to Butrans 20mcg but that wasnt enough pain relief.dr said he doesnt know if its just because some of these patients wanted more pills again or if Butrans truly didnt work for them.I asked dr who were the "right" patients he was starting on Butrans? dr said patients taking 4 tabs,10mg,vicodin a day,so these are patients he doesnt know what else to give them if 40mg hydrocodone isnt working thats why he's thought Butrans would be a great add-on to this dosing regimen.I asked dr if he would consider starting patients on Butrans,earlier in therapy,so once patients taking 5mg vicodin and that doesnt work,instead of increasing dosing interval,then to 7.5mg,then to 10mg,go to Butrans immediately? dr said yes he's considering that,as early
PPLPMDL0020000001	Cleveland	OH	44102	6/9/2011	I reviewed 5 Butrans core messages,dr said he couldnt remember much about Butrans other than it was a long-acting opioid and transdermal.I showed dr Butrans visual aid and asked what were the most important factors to him when choosing a long-acting opioid for his chronic pain patients? dr said safety,efficacy and cost of drug.I showed dr Butrans visual aid looking at clinical trials,adverse event profiles and we discussed Butrans insurance coverage.I asked dr if he is seeing patients on vicodin or percocet,that arent controlled,and would consider Butrans for them? dr said he might if patients ask for something different,we talked about proper tapering and initiation of Butrans and I showed Butrans initiation guide for discussion.I told dr I have lunch with him in 2wks,could he think of 2 patients,with BWC or commercial insurance,to start on Butrans,before then? dr said he'll do his best,he's new to this practice and still learning about patients.I recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44195	6/9/2011	I reviewed 5 Butrans core messages with Kathy,PA, and asked her what were the top 3 things she saw in Butrans that were important for her patients? Kathy said efficacy,safety and cost of Butrans.Kathy said once weekly dosing is also good for those patients who dont want to take pills and are asking for another option,so she is keeping Butrans in mind.I showed Kathy Butrans visual aid looking at clinical trials,efficacy of Butrans in these trials and adverse event/safety profile and we discussed insurance coverage for Butrans.I asked Kathy to consider 2 patients of dr mekhails or dr minters,that are taking tramadol and not controlled,and start them on Butrans,Kathy said she will talk to both doctors as she thinks Butrans is a great option for patients.I recommended Senokot-S
PPLPMDL0020000001	Garfield Hts	OH	44125	6/9/2011	Spoke with pharmacist, Sarah, who said they do not have Butrans in stock. Reviewed indication, dosing, appropriate patient type/positioning, delivery system, & savings program. She said they would only order it if they see a prescription. I encouraged her to order now, as area physicians are prescribing but she said they adhere to their policy. Also discussed OxyContin savings cards & eligibility. She said they do stock OxyContin at that location & dispense it quite frequently.
PPLPMDL0020000001	Parma	OH	44134	6/9/2011	Dr Hernandez said he & his patients are still happy with the results they are getting from Butrans. He said that he still occasionally has issues with pharmacies, but that clinically he is very satisfied with Butrans. I asked if he was still generally prescribing the full box of 4 patches now & he said yes & that it has saved some pharmacy hassle. I asked him if he is still prescribing Butrans mostly for patients who were on Vicodin around-the-clock chronically. He said that he is still doing that, but now he is also putting new patients on Butrans instead of starting them on Vicodin around-the-clock if he knows their condition is chronic. I told him I was glad to hear that he is branching out to new types of appropriate patients. He requested more samples of Senokot-S.
PPLPMDL0020000001	Westlake	OH	44145	6/9/2011	Quick call, I told Dr, last time you told me you think Butrans is a great drug. Will you write for more of you appropriate patients? He said he would.
PPLPMDL0020000001	Cleveland	OH	44103	6/9/2011	I talked to dr about 5 Butrans core messages,we discussed Butrans being an option for patients taking percocet around the clock for their chronic pain but not getting pain relief and asking for something different,I asked dr to think of 2 patients like this with commercial insurance as he does have a small percentage of commercially insured patients,dr said he'll keep it in mind but its all about insurance and once Butrans is covered on Medicaid,he'll consider prescribing Butrans for those patients,we talked about Prior Authorization for medicaid patients,if they meet Butrans indication and PA requirements,dr said he wont do PA for Butrans,we talked about appropriate patients for OxyContin,formulary coverage and savings cards.dr said he prescribes OxyContin,its available on medicaid and patients do well on OxyContin.I recommended Senokot-S
PPLPMDL0020000001	Independence	OH	44131	6/9/2011	Quick call- Reminded Dr Sundaram of our lunch conversation when he told me that he would switch appropriate patients who were calling in too soon for refills for their chronic pain medications or asking for increases or changes to those medications to Butrans. He said he has not started anyone since then. He said he would still keep it in mind for those patients. Reviewed savings cards for Butrans & OxyContin with him & Lisa.
PPLPMDL0020000001	Cleveland	OH	44104	6/9/2011	I reviewed 5 Butrans core messages with dr,dr said he likes that Butrans is a CII as thats easy for refills and its a long-acting opioid which he prefers to prescribe for patients but insurance is an issue with Medicaid,for Butrans as he's not doing the Prior authorization for Butrans.I asked dr to think of 2 patients with commercial insurance,that arent controlled on their percocet and asking for something different,if dr feels patients would be appropriate,consider Butrans right there instead of refilling percocet.dr said he will do that,but he only has a few patients with commercial insurance,we talked about appropriate patients for OxyContin,showed OxyContin visual aid,conversion guide we talked about 7 tablet strengths available for flexibility in titration and insurance coverage for OxyContin.dr said he writes a lot of OxyContin,no problem with insurance as majority of patients are Medicaid and OxyContin is covered on Medicaid.I recommended Senokot-S
PPLPMDL0020000001	Independence	OH	44131	6/9/2011	Roman said that he is anxiously awaiting a dinner program so that he can talk about Butrans with an expert with experience. I asked if there is anything at all that I can answer for him. He said that he just wants to talk to an expert because they can tell him about their clinical experience with Butrans. I offered medical services phone number again & let him know that if he has something specifically that he might want to know, they could answer. He declined. He looked at the demo patch & we discussed application, rotation, & disposal. Also discussed initiating treatment in patients taking (6) 5mg Vicodin per day, including taper before beginning on 10mcg dose. He said there is no way patients would do this. Discussed that buprenorphine can precipitate withdrawal in patients on high doses of opioids. He asked if Butrans has the same ingredient as Buprenex. I told him they both contain buprenorphine. Discussed OxyContin q12h for appropriate patients beyond Butrans.
PPLPMDL0020000001	Cleveland	OH	44195	6/9/2011	worked anesthesia/pain management dept-had to leave Butrans fpi,initiation guide,patient information booklet,formulary grid and my business card for Dr Mekhail,Dr Minzter,Dr.Cheng,Dr.Vrooman and Dr.Katyal as i couldnt see any of them
PPLPMDL0020000001	North Royalton	OH	44133	6/9/2011	Introduced myself to Cheryl (Pharmacist) & asked if she was stocking Butrans. She said she does have the 5 & 10mcg doses in stock & has at least two customers on it. Reviewed with her savings program/e-voucher. Also inquired about OxyContin stocking at that location. She said they do not stock it at that store so they did not need savings cards.
PPLPMDL0020000001	Cleveland	OH	44106	6/9/2011	i had an impromptu lunch with dr,so i asked dr if he saw any patients yesterday that he felt would be appropriate to start on Butrans? dr said noone said they wanted to try anything different,so no he didnt start anyone and he was doing procedures all of today.i asked dr who was appropriate for Butrans? dr said patients taking vicodin or percocet that arent controlled and asking for more pills.i told dr that was right but he could also consider patients taking tramadol but not getting pain relief or if they are calling into office requesting tramadol refills sooner than they should every month.dr said okay he'll keep it in mind as he's seeing patients next week and then leaving for 2 weeks so he wont see patients again until JULY.I asked dr to just think of 2 patients like we discussed,with commercial insurance,that he could start on Butrans,dr said he will do that and knows he needs to write Butrans as its a great option for patients.
PPLPMDL0020000001	Independence	OH	44131	6/9/2011	I asked Dr Pai if he gets calls from moderate to severe chronic pain patients who are requesting increases or changes in their medication. He said he does get them often. I asked him why not consider Butrans for those patients, if appropriate. He said he will consider it. He said that the patient he initially put on Butrans, is now in hospice & had a hard time getting the Butrans approved, but finally did accomplish this. He added that she is doing well. I asked him if hospice patients would typically be a type where he would use Butrans. He said it depends on the patient's family as cost can be an issue. Reviewed Butrans & OxyContin managed care.
PPLPMDL0020000001	Barberton	OH	44203	6/9/2011	I asked Dr. Patel how long he expected a patient to be on Butrans once he prescribed it. He said that he expects most patients to be on it for the long haul and his patients were having success. He said that he is writing for refills right on the Rx.
PPLPMDL0020000001	Cleveland	OH	44106	6/9/2011	worked pain management dept-lunch with dr hayek and aaron compton,md/fellow in pain dept-this was impromptu lunch as i was supposed to have lunch with residents.
PPLPMDL0020000001	Westlake	OH	44145	6/9/2011	I asked the Dr if he has seen any patients recently whose pain is not well controlled on hydrocodone. He said he does sometimes. I asked if he would switch this type of patient to Butrans instead of increasing the short acting dose and he agreed. He said he is still trying to find that right patients and he will try to write for Butrans. We discussed OxyContin as a long acting option for patients on high doses of short acting opioids.<font color=
PPLPMDL0020000001	Independence	OH	44131	6/9/2011	I asked the Dr if he has seen any patients recently whose pain is not well controlled on hydrocodone. He said he does sometimes. I asked if he would switch this type of patient to Butrans instead of increasing the short acting dose and he agreed. He said he is still trying to find that right patients and he will try to write for Butrans. We discussed OxyContin as a long acting option for patients on high doses of short acting opioids.<font color=
PPLPMDL0020000001	Independence	OH	44131	6/9/2011	Quick call- Caught Dr Reddy at the window. He said he keeps forgetting Butrans. Reviewed indication, dosing, & delivery system. Offered June 16th webcast & recommended he participate to hear Butrans information from an expert. He said he would try to log on.
PPLPMDL0020000001	Barberton	OH	44203	6/9/2011	Spoke with Bill the pharmacist. Introduced Butrans and the FPI, discussed once a week dosing and went over my core message that I am discussing with physicians in the area. Reviewed steady state. Also met and introduced Butrans to Pattie who is the tech.

PPLPMDL0020000001	Independence	OH	44131	6/9/2011	Lisa told me that the patient who they have on Butrans is getting great results. She said the patient likes it so much that she called asking for refills after her initial prescription. Lisa asked me if there are specific parts of the body that have to be used. Reviewed 4 recommended application sites, rotation, & disposal. She said that she will think of Butrans for patients who are taking 6 Vicodin per day who are willing to do the taper before starting on Butrans. She said that she thinks some patients will not want to do the taper, but others will. She asked about future dinner programs & I let her know I was working on getting one together for July.
	Cleveland	OH	44113	6/10/2011	I reviewed 5 Butrans core messages with dr,asked dr who he felt were appropriate patients to start on Butrans? dr said patients taking opioids every day for their chronic pain and still not controlled.I showed dr Butrans initiation guide,discussed vicodin patients that arent controlled and asking dr for something different,to consider Butrans for them,dr asked about insurance coverage for medicaid patients as thats majority of his patients.we talked about Prior Authorization requirements for Butrans and i asked dr if he has commercial plan patients that could try Butrans and use Butrans patient savings cards? dr said he has some patients with commercial and will think of them.I asked dr to just think of 2 patients,commercial insurance,that are taking vicodin daily but not getting pain relief and asking for something different,to start them on Butrans.dr said he'll do his best to remember Butrans.I recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	6/10/2011	I reviewed 5 Butrans core messages with dr,talked about appropriate patients to start on Butrans,dr said he has patients taking vicodin and percocet that arent controlled and ask for more pills,so he could think of Butrans for them instead of giving them more pills.I showed dr Butrans initiation guide,discussed proper tapering and initiation of Butrans.we talked about BWC and commercially insured patients.I asked dr to focus on 2 patients to start on Butrans per our discussion and I'll follow-up in 2 weeks,dr agreed.I recommended Senokot-S
	Cleveland	OH	44113	6/10/2011	I reviewed 5 Butrans core messages with dr,dr said he hasnt thought much about Butrans but does remember its a transdermal delivery medication and that was it.I asked dr from 5 core messages,what were top 3 factors he considers important when considering a long-acting opioid for his patients.dr said safety,efficacy and cost of Butrans were all important.dr said once weekly dosing is easier for some patients but not everyone and Butrans being a CIII is also easier for him as he can call in refills.I asked dr if he ever has patients taking tramadol,daily,that arent getting pain relief and asking for something else? dr said yes every day he see's those patients and his staff gets those calls from patients.I showed dr Butrans initiation guide,looking at tramadol dosing and asked dr to consider 2 patients,with commercial insurance,that arent controlled on tramadol,to start on Butrans.dr said he has to think about his patients as not everyone wants to take a patch.
PPLPMDL0020000001	Cleveland	OH	44109	6/10/2011	I reviewed 5 Butrans core messages,talked to dr about his patients taking tramadol every day but not controlled,to consider Butrans for them.dr said he will but hasnt had any patients ask for something different.I told dr if patients call in early for refills that could be a sign that their short-acting tramadol isnt lasting long enough and perhaps a long-acting opioid would be appropriate.dr said he'll keep it in mind.we talked about commercial plan patients trying Butrans using Butrans patient savings cards.I recommended Senokot-S
	Cleveland	OH	44102	6/10/2011	I reviewed 5 Butrans core messages with dr,dr said she likes that Butrans is a patch and a CIII.I asked dr why the CIII made a difference to her? dr said its easier to call in refills than having to see her percocet patients all the time because they have to pick their scripts up at the office.dr said her chronic pain patients are extremely frustrating but she knows she has to treat their pain and doesnt like when she sends them to specialists at the Cleveland Clinic and all they want to do is take them off opioids and do procedures.even tho she is part of the Cleveland clinic,until JULY 1st,she doesnt refer to pain doctors here anymore.dr said she thinks Butrans would be great for her percocet patients that come to her asking for more pills or saying their percocet isnt lasting long enough,she would feel comfortable starting them on Butrans.dr said its all about insurance coverage as she has a lot of medicaid,we discussed prior authorization requirements for butrans on medicaid. I
PPLPMDL0020000001	Warrensville Heights	OH	44122	6/10/2011	Spoke with Joyce (MA) who said that Dr Kessler's nurse, Eileen was not in today to see me. She said they are in the process of transitioning to EMR, so things have been hectic there lately & they are not scheduling any rep appointments for the month of June. Reviewed Butrans appropriate patient type & savings cards. She said she would give the information for Dr Kessler to Eileen upon her return. She said they did not need any OxyContin savings cards.
	Cleveland	OH	44109	6/10/2011	I talked to dr about 5 Butrans core messages,reviewed appropriate patients dr can consider starting on Butrans as dr couldnt remember who was the appropriate patient-showed Butrans initiation guide for discussion,dr asked about insurance coverage on medicaid,we discussed dr considering BWC or commercially insured patients,dr said he has a lot of medicaid patients too so I explained the Prior authorization requirements for Butrans for Medicaid.dr said ok he does have patients taking vicodin and percocet that ask for something different when their first dose isnt controlling their pain any longer,so I asked dr to consider 2 patients,taking vicodin or percocet daily for their chronic pain,that he could start on Butrans to get some clinical experience.dr agreed and said he will consider that for some patients.I recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	6/10/2011	I talked to Dale,PA,about appropriate patients for Butrans and showed Dale Butrans initiation guide for discussion.I asked Dale to think about patients taking tramadol around the clock that arent controlled,to start them on Butrans.dale said he will consider that and that makes sense to think of patients taking tramadol,he's only been thinking of vicodin and percocet patients.we talked about Butrans insurance coverage and patient savings cards.I recommended Senokot-S
	Cleveland	OH	44102	6/10/2011	I talked to Vicky,Pharmacy Manager,about Butrans stocking,5 Butrans core messages,initiation guide,Butrans patient information booklet and Butrans formulary coverage.Vicky said she hasnt seen any scripts for Butrans but does have Butrans stocked,we talked about importance of having all 3 Butrans dosage strengths in stock so that patients can get medication and not being turned away and told to return in 24 hours,Vicky agreed with me saying that made sense but until she see's scripts for Butrans,she wont order Butrans 20mcg,we discussed appropriate patients for Butrans and I showed Butrans initiation guide for discussion and then discussed formulary coverage.I asked Vicky if she would recommend Butrans to patients,giving them a Butrans patient information booklet,if they tell her their pain isnt controlled with their short-acting opioids,and then patients can discuss Butrans with their doctors? Vicky said she would do that.I recommended Senokot-S
PPLPMDL0020000001	Parma	OH	44129	6/10/2011	Reminded Dr Rossi of our Butrans conversations & let her know I wanted to continue to discuss patients who suffer from moderate to severe chronic pain & who are taking short-acting around-the-clock pain medications. I asked if Butrans, with a once-weekly application would be something she thought those patients may be interested in. She said some might like that. She asked about usage in the elderly. Discussed use in older patients & showed FPI 8.5. Also discussed managed care & asked if she had patients with commercial insurance who might meet the indication & she said yes. I asked if, instead of re-filling a patient's tramadol or Vicodin prescriptions, she would consider switching appropriate patients to Butrans if they have commercial insurance. She said she would consider this, although she said she does not like to prescribe opioids. I asked if she would consider Butrans only for those patients who she already is prescribing opioids. Senokot-S for opioid-induced constip
	Cleveland	OH	44113	6/10/2011	I talked to dr about 5 Butrans core messages,asked her what were the most important factors she see's in Butrans? dr said she likes that Butrans is a once weekly dosing option,a CIII is easy to call in refills and its a patch.we talked about appropriate patients to start on Butrans,dr said if patients are asking for more pills and she's not comfortable refilling that medication,she's considering Butrans.I asked dr to continue starting patients on Butrans,reviewed Butrans formulary coverage and I recommended Senokot-S
PPLPMDL0020000001	Chagrin Falls	OH	44022	6/10/2011	Quick call- Caught Dr Hudson up at the window. Butrans appropriate patient message. She waved, thanked me, & walked away. Spoke with Sherry & reviewed Butrans savings cards, eligibility, & also gave Colace samples. Scheduled a lunch for next month to speak with Dr Rood & Dr Hudson.
	Mayfield Heights	OH	44124	6/10/2011	Spoke to Warren about the Butrans stocking and scripts. He said he sees a few scripts mostly from pain mgmt(Hillcrest). I asked if he is seeing any refilled scripts. He said a couple of patients are on it nd he has not heard anything bad about it. I explained the proper application to the 4 sites and the disposal units to discard the patch. Reminded him of the savings cards and the potential for monthly use.
PPLPMDL0020000001	Cleveland	OH	44113	6/10/2011	worked pain management dept
	Akron	OH	44319	6/10/2011	Spoke to Gretchen and went over the message that I had spoke with Dr. Wu about and my core message with physicians in the area. I asked if she could think i=of anyone else that was writing a lot of SAO but she couldn't really think of any but said Dr. Wu was.
PPLPMDL0020000001	Mayfield Heights	OH	44124	6/10/2011	Spoke to Anthony (filling in for Hillary)about the stocking of Butrans. He had only heard about it in a journal and did not know it was available. He confirmed that they do have it stocked. I explained the indication, positioning, application/disposal, and 7 day CIII status. Let him know about savings cards for commercillay insured customers. Provided FPI and patient info guides.
	Fairlawn	OH	44333	6/10/2011	I asked Dr. Domdera if would really consider writing Butrans for just one patient so he could get some feedback. He said he was still unsure since it was still very new to the market. He said he would keep it in mind but still does not feel incredibly comfortable with it?
PPLPMDL0020000001	Lyndhurst	OH	44124	6/10/2011	Quick call..... Asked doc if he had a moment....to talk about an alternative to starting patients on vicodin ATC. I informed him that it is a CIII like vicodin however Butrans is dosed just once weekly. I asked him if that sounds like a benefit. He said sure and walked away. Nothing learned.
	Akron	OH	44319	6/10/2011	I asked Dr Katrjij if he thought there was a place for Butrans based on our previous conversations and he said he thought so. I identified patients who would be Butrans candidates and asked how many times a week he saw similar type of patients and he said often. I asked him if he would feel confident enough to try it on 2 patients and he said he was not sure.
PPLPMDL0020000001	Mayfield Hts	OH	44124	6/10/2011	I reminded doc of the Butrans indication and positioning. I asked him if he has patients taking tramadol or even vicodin daily for persistent pain. He said he tries not to. I reviewed the starting dosing and the coverage for commercial patients. He asked about medicaid. Told him its not covered on medicaid but is covered on BWC. Gave him an initiation guide and formulary grid.
	Akron	OH	44312	6/10/2011	Introduced Butrans and FPI. I talked about patient profiling and asked if she had many patients on SAO's. She said she did but said insurance was going to be an issue because the patients she thought of for Butrans had Medicaid or Medicare. I told her Butrans was not necessarily for those patients and asked if she would remember it more for her patients with a private insurance. She said she would keep it in mind.
PPLPMDL0020000001	Mayfield Hts	OH	44124	6/10/2011	Window call..... reminded doc of the appropriate Butrans patient - low dose IR narcotics of opioid naive patients. I also explained that commercially insured and BWC patients have the best chance for success. Provided formulary grid and oxycontin savings cards. Nothing learned.
	Parma	OH	44129	6/10/2011	Spoke with pharmacist Marcella who said that they still have 5mcg Butrans in stock. She said she has not dispensed any & was not sure if anyone else had. Reviewed savings through e-voucher & also discussed OxyContin savings cards. Reviewed eligibility for savings cards, including that they cannot be used for patients with any type of government insurance. I asked what insurance plans she sees mostly & she said it is mostly Medicaid (maybe 30% she said) with a mixture of commercial insurance & Medicare.
PPLPMDL0020000001	Mayfield Heights	OH	44124	6/10/2011	I asked doc what he remember about Butrans. He said he remembers that it is a 7 day patch. I confirmed that it is the first analgesic delivery over 7 days and is a CIII indicated for moderate to severe chronic pain. I asked him to think of Butrans instead of initiating patients on hydrocodone ATC. Explained the savings cards and the coverage with private insurance and BWC.
	Akron	OH	44319	6/10/2011	I asked Dr. Yee if he had the opportunity to trial Butrans yet and he said that he had been keeping it in mind and thinking of it for patients who are currently on a low dose SAO. I reminded him that Butrans had also been studied in opioid naive patients so he should feel comfortable prescribing it to those patients as well.
PPLPMDL0020000001	Akron	OH	44319	6/10/2011	I asked Dr. Wu if he had considered Butrans in place of hydrocodone like we had previously discussed and he said he had thought about it but not as often as he would like. He asked again about the does and initiation which I explained via the initiation and titration guide.
	Parma	OH	44134	6/10/2011	Spoke with Mercedes & inquired about Butrans stocking. She said they do not have it in stock & asked what it is. Reviewed Butrans indication, dosing, positioning, & e-voucher. She asked if there was any indication for drug addiction & I told her Butrans is only indicated for pain & is not to be used for the treatment of drug addiction. Reviewed positioning with her. Also discussed OxyContin savings cards. I asked what insurance plans they see most often. Mercedes said that she mostly sees commercial insurance plans at this store.
PPLPMDL0020000001	Cleveland	OH	44109	6/10/2011	I reviewed 5 Butrans core messages with dr,dr said she likes that Butrans is transdermal and is once a week dosing but she hasnt had any patients ask for something different.I asked dr if patients tell her their tramadol or vicodin isnt lasting long enough? dr said yes she does hear that from patients.I told dr she could consider Butrans for those patients,if appropriate,I showed dr Butrans initiation guide and we discussed proper tapering and initiation of Butrans.dr said ok and asked about insurance coverage for medicaid patients as thats majority of their patients.we talked about prior authorization for medicaid and i asked dr to think of BWC and commercially insured patients to try Butrans in and dr said ok she'll keep it in mind she thinks Butrans is a good medication.I recommended Senokot-S
PPLPMDL0020000001					

PPLPMDL0020000001	Cleveland	OH	44143	6/10/2011	I asked doc if he had an opportunity to reueiw the Butrans FPI and the clinical trials. He said "no, i don't think so." I reminded him of the 7 day analgesic delivery for patients that fail on NSAIDs/tramadol. He said ok. Nothing more learned.
	Solon	OH	44139	6/10/2011	Had Butrans webinar by Rupa and Mary Cook with Jackie dialing in and Mike and I in the conference room. Mike asked if patches are what pain Docs like to prescribe first and Jackie asked how Butrans compared to Duragesic. Mike said he will know the policy MH is recommending to the P&T Committee on Wed and he will let me know ahead of time. If their P&T decides a May Add then Dan and Mike will have to go to Caremark to gain agreement too. MH's P&T Committee will dissolve after next weeks meeting where they are required to go to Caremark's P&T Committee. Mike checked Butrans utilization and found there to be over 250 Rxs for it. He said this is average for new drugs but the cost is slighly higher than \$200 per Rx. Caremark may run their Part-D business out of Solon so Mike believes so far their jobs are safe. I shared the new resources "Storage/Disposal" which he liked esp because it was done in cooperation with APCA. We reviewed wording on OC marketing pcs where co-pay amts aren't good.
PPLPMDL0020000001	Parma	OH	44129	6/10/2011	Quick call- Dr Roheny said that I picked a very busy day to come in, so he did not have time to talk today. I told him I would return next week so that we could discuss Butrans in more detail. He said he would look forward to it. I also offered the June 16th webcast.
PPLPMDL0020000001	Beachwood	OH	44122	6/10/2011	Quick call- Dr Tabbaa said that he did not have time to talk to me today but that he does not have any questions about Butrans & that things are going "fine" with it. Spoke with Randy (nurse) (Jim was off today) & discussed savings cards for both OxyContin & Butrans, reviewing eligibility. He said that he did not see any Butrans savings cards in their cabinet & that they are running low on OxyContin cards, so he requested both. He said he has not had a lot of patient contact with patients on Butrans yet. He said he usually works with Dr Bryan at the other office.
PPLPMDL0020000001	Cleveland	OH	44104	6/13/2011	I reviewed 5 Butrans core messages with dr,dr said he had a patient in mind to start on Butrans that was taking vicodin but she didnt want to take a patch.I told dr patients can still take vicodin and Butrans,i showed dr Butrans fpi,maintenance of therapy section and dr said ok he forgot about that.I showed dr Butrans initiation guide and asked dr to think of 2 patients taking percocet,daily,that arent controlled,and seeking another option,to start them on Butrans.dr asked where is Butrans covered? I talked to dr about BWC and commercially insured patients.dr said ok he'll think of a few patients and let me know what happens.I recommended Senokot-5
PPLPMDL0020000001	Waterford	OH	45786	6/13/2011	W - Miral said that she believes there is a place for Butrans. She said that she normally treats with codeine and tramadol. She said that if she must use hydrocodone she will but she would rather not. She asked about the adhesive or the ability of Butrans to stick for 7 days?I - Butrans follow up and review of indication and 7 days of therapy in 1 application with a CIII scheduling. Review of FPI and medication guide to discuss appropriate application sites, disposal as well as if the Butrans starts to come off the use of first aid tape around the edges. Formulary coverage review - BWC and commercial plans with a 3T status. Savings card program eligibility.
PPLPMDL0020000001	Waterford	OH	45786	6/13/2011	W - She said that Butrans may be a good option for patients that are hesitant to be put on other long acting meds for fear of one reason or another. She said she normally will treat patients with hydrocodone and then if the pain becomes chronic she will let Dr. Waters prescribe their pain meds. I - Butrans review of indication and 7 days of therapy in 1 application with a CIII scheduling. Discussion of appropriate patient selection after vicodin when the indication is met. Review of formulary coverage and patient eligibility for the savings card program.
PPLPMDL0020000001	Lakewood	OH	44107	6/13/2011	I asked the dr what benefits he sees in Butrans, he asked me if he could start his month-in law on Butrans. I told him that it does sound like an appropriate patient type however managed care will be difficult for older patients. I encouraged him to find other appropriate patients on low dose hydrocodone or OxyContin who have commercial insurance. I spoke with Pat and we reviewed the savings cards and managed care for Butrans.
PPLPMDL0020000001	Lakewood	OH	44107	6/13/2011	I reviewed our last conversation about the appropriate patients about Butrans, I asked if he would have a patient coming in today who will ask for an increase in their tramadol or low dose vicodin. He said he probably will see that type of patient and he agreed to think of Butrans as an option if they have commercial insurance coverage. I reviewed the managed care with the staff and asked them to help identify appropriate Butrans patients. We discussed OxyContin as an option that is covered on Medicaid.
PPLPMDL0020000001	Waterford	OH	45786	6/13/2011	W - Waters discussed that patients uncontrolled on short acting meds that are uncontrolled would be patients he would consider for Butrans. Patients who are hesitant to take morphine or even oxycodone would be patients to consider as well. I - Butrans review of indication and 7 days of therapy in 1 application with a CIII scheduling. Discussion of appropriate patient selection after tramadol/vicodin when the indication is met. Review of formulary coverage - BWC and commercial plans with a 3T status. Patient eligibility for the savings card program. Discussion of OxyContin formulary coverage as well as savings card program eligibility.
PPLPMDL0020000001	Cleveland	OH	44113	6/13/2011	worked dr bohl's office-orthopedic at lutheran hospital - lunch with them; worked lutheran hospital out-patient pharmacy-see call notes
PPLPMDL0020000001	Cleveland	OH	44195	6/13/2011	worked anesthesia/pain management dept-left Butrans fpi,initiation guide,patient information booklet and formulary grid,my business card for Dr.Stanton-Hicks and Dr.Vrooman as i couldnt see either physician. worked neurology dept-left Butrans fpi,initiation guide,patient information booklet and formulary grid,OxyContin fpi,conversion guide,formulary grid for OxyContin with my business card for Dr.Kriegler,Dr.Mays,Dr.Spears and Dr.Stillman as representatives can't see doctors unless they call you for an appointment,per secretaries. worked spine center-left Butrans fpi,initiation guide,patient information booklet,formulary grid and my business card for Dr.Schaefer,Dr.Mazane and Dr.Zachary-same rule as above,doctors call representatives if they want to set-up an appointment
PPLPMDL0020000001	Akron	OH	44333	6/13/2011	I asked Linda how many patients she currently had on a low dose SAO and were not stable. She said she had those patients and would keep Butrans in mind. I asked if she had any coming in later today and she said she was not sure. I reminded her to focus on patients with commercial insurance.
PPLPMDL0020000001	Akron	OH	44333	6/13/2011	I asked Dr. Griffiths about her success on Butrans and she said everything so far was good. She said she now had a handful of patients on therapy. She said she was focused on patients with private insurance but many patients she thought of as Butrans patients had a state plan.
PPLPMDL0020000001	Cleveland	OH	44113	6/13/2011	i talked to Maria,Pharmacy Technician and Justin,Pharmacist,about Butrans stocking,scripts they are seeing and doctors prescribing,the majority are from dr shen and a few from dr bohl in past few months.we talked about importance of pharmacy staff showing patients Butrans patient information booklet section on application and rotation of Butrans,cleaing site with water only and log book section of booklet,they all agreed to do this with patients.i asked Justin if he would give Butrans patient information booklets to patients who ask for something different if their short-acting opioids arent controlling their pain? Justin said he would do that.we discussed Butrans formulary coverage and patient savings cards and i recommended Senokot-5
PPLPMDL0020000001	Akron	OH	44333	6/13/2011	I asked Becky about starting some opioid naive patients. She said that she writes a couple new hydrocodone Rx's each week. I explained that those patients could potentially be Butrans patients.
PPLPMDL0020000001	Lakewood	OH	44107	6/13/2011	I asked Dr what types of patients he feels would be best for Butrans. He said for those patients with chronic pain and he does not want to increase the number of pills. We reviewed the invitation guide and how to initiate Butrans. I asked if he would start few new patients this week and he said he will try. Reminder about OxyContin as an option, he said he does continue to use it in the hospital.
PPLPMDL0020000001	Fairlawn	OH	44333	6/13/2011	I asked Dr. Oyakawa if he truly thought he would initiate Butrans therapy to a patient and he said he would. He said he would keep it in mind.
PPLPMDL0020000001	Fairlawn	OH	44333	6/13/2011	I asked Dr. Weidman if she would consider writing Butrans in instances where patients were calling asking to be titrated on their current SAO's. She said she would try it.
PPLPMDL0020000001	Cleveland	OH	44113	6/13/2011	dr said he's been contacted by Purdue medical services about his 3 patients who had severe,systemic rashes from Butrans,all 3 cases occurred within a few days after applying Butrans.all of the AE information was reported in April and i called June 1st as i wasnt sure if there were more patients who had more Allergic reactions per a discussion with dr.bohl's medical assist,Aurora.dr bohl said there are only 3 patients,but thats 75%,if it was 1 out of 4 patients,he would consider prescribing Butrans again but because this was 3 out of 4 patients,he's not going to prescribe Butrans again.dr said he's disappointed as he liked that Butrans was a patch and his patients were intrigued by this option.dr said purdue wanted all of his patients information,he sent that 2-3wks ago,we called purdue med svcs who transferred us to product complaint and spoke with "trish",who said there were no notes in system of patients feedback yet.dr asked if someone could call him once they had more patient info
PPLPMDL0020000001	Cleveland	OH	44102	6/13/2011	i talked to Vince,Pharmacist,about Butrans 5 core messages.Vince said he likes that Butrans is transdermal and once weekly dosing is easier for some patients but they have a lot of patients who like their vicodin and percocet every day so Butrans isnt for everyone.i agreed with Vince and showed Vince Butrans initiation guide and asked him if patients ever tell him their short-acting opioids arent lasting long enough? Vince said yes they do hear that.i asked Vince if some of these patients could possibly benefit from a long-acting opioid like Butrans? vince said some patients might benefit but thats up to the doctor to change patients medications.i asked vince if he would recommend Butrans to doctors,if patients tell him they arent getting pain relief from their short-acting opioids? Vince said he might do that depends on dr.i left Butrans patient information booklets and said if patients ask for something different,can he give booklets to them? Vince said he would.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44103	6/13/2011	i talked to Amy,Pharmacy Manager,about Butrans stocking and scripts she's seeing.Amy said she did get a Butrans script from one of Dr.Boyd's patients.i asked amy to focus on Butrans application and rotation section in Butrans patient information booklet and the log book section so patients are aware of this critical information.Amy said she would do that.i asked Amy if she would recommend Butrans to those patients that tell her their short-acting opioids arent lasting long enough and they want something different? Amy said she might do that with a couple of patients and have them talk to their doctor.we discussed Butrans 5 Core messages,initiation guide and Butrans formulary coverage.i recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44104	6/14/2011	i reviewed 5 Butrans core messages with dr,we talked about appropriate patients to start on Butrans,dr said if patients are taking short-acting opioids for their chronic pain,every day and not getting pain relief or telling him the medications wearing off sooner than it should,he's considering Butrans for them.we talked about dr considering a couple of his tramadol patients that arent getting pain relief,to consider Butrans before he starts them on vicodin,dr said he will do that.we discussed insurance coverage briefly and i recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44113	6/14/2011	i reviewed 5 Butrans core messages with dr,i asked dr who are the appropriate patients to start on Butrans? dr said patients taking a couple pills a day and not controlled and asking her for more pills.dr said she's starting patients on Butrans and then giving them 30 pills a month of short-acting opioids for break through pain.we talked about dr considering her percocet patients that are taking 1-2,5mg tabs,a day and not controlled and asking for something else,dr said she will consider Butrans earlier in therapy.we discussed formulary coverage for Butrans.
PPLPMDL0020000001	Cleveland	OH	44106	6/14/2011	i reviewed 5 Butrans core messages with dr,showing dr Butrans visual aid for the discussion.dr said he likes that Butrans is transdermal and dosed once a week and the fact its a CIII is much easier for the office staff to call in refills.i asked dr who was the appropriate patient to start on Butrans? dr said he thinks patients taking short-acting opioids like tramadol or vicodin,daily for chronic pain,that arent getting pain relief,should try Butrans.I showed dr Butrans initiation guide,discussed tapering of short-acting opioids and initiation of Butrans.we talked about insurance coverage and i asked dr if he would consider 2 patients to start on Butrans,per our discussion? dr said he will do that but he's finishing his fellowship here at UH the end of June,then moving back home to KY. i recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44113	6/14/2011	i reviewed 5 Butrans core messages as dr said he only remembered that Butrans was a patch,i asked dr who he felt was the appropriate patient for Butrans? dr said he has so many patients taking vicodin and percocet,he writes those medications daily and hates it,dr said he thinks these chronic pain patients who are not controlled on their vicodin or percocet should be the one's starting on Butrans.I showed dr Butrans initiation guide,discussed tapering of short-acting opioids and initiation of Butrans and dr asked if Butrans was covered on Medicaid.i asked dr if that was a large patient population for him? dr said yes,he has a lot of medicalaid patients and a few commercially insured patients.i talked to dr about Prior Authorization requirements,for medicalaid,dr said he rarely writes long-acting opioids,CII's,so he probably wont be able to start medicalaid patients on Butrans.I told dr its easier to focus on 2 commercial plan patients,use savings cards and give patient information bookletsfont color=blue>=b>CHUDAKOB added notes on 06/23/2011</b></font>Amy, please try to limit your notes on the call to the topic section and not have if flow into the next call objective. Continue to work on shortening your call notes. I know you can do this!
PPLPMDL0020000001	Cleveland	OH	44106	6/14/2011	i reviewed 5 Butrans core messages with dr,we talked about appropriate patients to start on Butrans,dr said he's continually starting patients on Butrans that are taking 1-2 5mg tabs of percocet a day and not controlled and asking him for more pills,dr said when patients start asking for more pills that his sign that a long-acting opioid could be more appropriate if percocet isnt lasting long enough.I showed dr Butrans initiation guide,we talked about his percocet and vicodin patients,after 1-2 tabs,isent controlling patients pain,to not refill scripts or increase dosage strength/interval but to consider Butrans.dr agreed and we discussed briefly managed care coverage for Butrans.i recommended Senokot-5
PPLPMDL0020000001	Parma	OH	44134	6/14/2011	Dr Scanlon said that to be honest, he has not thought of Butrans. He said that he even left the initiation guide I had given him in his mailbox at the Parma office to help him remember. I reminded him that he has said that he has no clinical objection to Butrans & asked if that is still the case- he said yes. I said it sounded like he does see merit in Butrans & asked if that is the case & he said yes. I reminded him that we have been talking about patients who take Vicodin or tramadol every day & asked if this causes him to think of any specific patients- he said yes. I suggested he flag the charts. He said that because he has 2 offices this can be tough, so he said he would place an initiation guide at his station where he does notes. Discussed ability to call in prescriptions & asked that he do this when he thinks of specific patients. He said he would do this. Reviewed savings cards for



PPLPMDL0020000001	Cleveland	OH	44103	6/14/2011	dr said she's started a few more patients on Butrans,we talked about 5 Butrans core messages and why she's choosing Butrans as an option for patients.dr said she likes that Butrans is long-acting and is a patch and she's still giving patients some short-acting opioids for break through pain as needed.i showed dr Butrans initiation guide,discussed percofet patients not getting control and dr considering Butrans for them instead of increasing dosage strength or interval.dr agreed,we talked about Butrans formulary coverage and i asked dr to continue starting patients on OxyContin,when appropriate,discussed 7 tablet strengths available and OxyContin formulary coverage.dr said she will continue starting patients on OxyContin,its a good long-acting opioid and it works so she's happy with OxyContin and no problems with insurance coverage.i recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44113	6/14/2011	i reviewed Butrans 5 core messages with dr,talked about appropriate patients for Butrans and i asked dr to think of patients who are taking vicodin earlier in therapy,not waiting till they are at 40mg vicodin a day.dr agreed saying he is thinking of patients who arent controlled,after 10-15mg vicodin doesnt control pain anymore.we discussed Butrans formulary coverage and i recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44130	6/14/2011	i asked Dr Diab if, since Butrans is CIII, he would consider calling in prescriptions for Butrans for appropriate patients who call in for refills of their pain medications too soon rather than waiting for them to come into the office to see him. He said that he does not ever call in prescriptions for any pain medications.
PPLPMDL0020000001	Cleveland	OH	44113	6/14/2011	i had an in-service with dr and med assistants to discuss Butrans-appropriate patients i showed Butrans initiation guide for discussion,dr said she understood that Butrans is for patients taking tramadol,vicodin or percofet but not controlled,so earlier in therapy than later.i showed Butrans patient information booklet,discussed application/rotation of Butrans and we discussed formulary coverage for BWC and commercial patients.dr asked about medicaid coverage so we discuss Prior Authorization requirements for Butrans.i asked dr to think of a couple patients taking tramadol but not controlled and perhaps Butrans could be an option.dr agreed and said she'll think of patients to try Butrans on and let me know what happens.
PPLPMDL0020000001	Munroe Falls	OH	44262	6/14/2011	i reintroduced Butrans to Dr. Kolacewski via the FPI and after identifying appropriate patients asked if she had patients she felt could benefit from this therapy. She said she did and that she especially was thinking of patients who were on a SAO.
PPLPMDL0020000001	Parma	OH	44129	6/14/2011	Dr Ortega said that he is still trying patients on Butrans but has not received any additional feedback yet. i asked if he considers this a good sign & he said he does. He said that he has a patient who has intermittent pain & takes Vicodin or Percocet for it when it occurs. He asked me if this would be a potential Butrans patient. i told him that Butrans is contraindicated for intermittent or PRN pain. He said he would continue to look for additional patients for Butrans. Also recommended OxyContin for appropriate patients beyond Butrans 20mcg. He said that he still uses OxyContin for patients.
PPLPMDL0020000001	Westlake	OH	44145	6/14/2011	Spoke with Deanna, we reviewed the key messages for Butrans and appropriate patient types. i asked if she could think of any appropriate patients who refill their short acting month after month and she said lots of people do but she would be surprised if they wanted to give up their pills. i asked her to recommend Butrans as another option and she will keep it in mind. We reviewed OxyContin as an option when Butrans may not provide adequate analgesia.
PPLPMDL0020000001	Parma	OH	44129	6/14/2011	Spoke with nurse, Kathy, who said that Dr Tolentino was way too far behind today to see me. Reminded her of our recent lunch & Butrans discussion. She said she doesn't think that Dr Tolentino has prescribed Butrans for anyone yet but said she would remind her for appropriate patients. Kathy requested more Senokot-5 & Colace samples as they were running low.
PPLPMDL0020000001	Cleveland	OH	44106	6/14/2011	i reviewed 5 Butrans core messages with dr,we talked about appropriate patients dr can consider starting on Butrans,dr said he knows that he has a lot of patients taking tramadol and some of them arent controlled and could benefit from a long-acting opioid like Butrans.dr said he's been traveling so much and not seeing that many patients,when he's here he's doing a lot of procedures.i asked dr to think of a few patients today,as he's seeing patients,taking tramadol that arent controlled and are asking him for something else,to start them on Butrans.dr said he will do that and asked me to talk to Lisa,Patent Care coordinator who takes all medication refill requests.i talked to Lisa about appropriate patients for Butrans,showed Butrans initiation guide and asked her to recommend Butrans to dr when patients are taking tramadol but calling her saying they arent getting control or tramadol isnt lasting long enough,she agreed to do so and said she'll work with dr.i recommended Senokot-5
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/14/2011	i asked Dr. Bicak if she had the opportunity to prescribe Butrans and she said she had not. i asked if he has seen ANY patients who were currently not stable on their current low dose SAO. She said not that she recalled.
PPLPMDL0020000001	Mayfield Heights	OH	44124	6/14/2011	Reminded Debbie that Butrans is a CIII which means it can be called in and refilled. She said she remembers but most patients come back every month. Thanked her for her support and fave her patient info guides.
PPLPMDL0020000001	Mogadore	OH	44260	6/14/2011	Dr peeked head out and said he has written Butrans and he thinks the others may have also and that they need more savings cards. Rmeinded to use in commercial patients and commercial plans.
PPLPMDL0020000001	Cleveland	OH	44113	6/14/2011	in-service for Dr.Gadmack and her medical assistants on Butrans, worked pain management dept-saw dr shen
PPLPMDL0020000001	Westlake	OH	44145	6/14/2011	Quick call, i reviewed our last conversation about Butrans being covered on BWC. i asked if he has any red charts that are coming in today for an increase in their short acting medication that he could convert to Butrans. He said he will look. i spoke with Angela and she flagged a chart to remind the Dr to discuss Butrans.<font color=blue><b>CHUDAKOB's query on 06/24/2011</b></font>Good!!! Did you follow-up the next day to insure the patient got Butrans?<font color=green><b>HOLLUBA's response on 06/27/2011</b></font>I followed up the next Tuesday which was the first day i could as he is only in my territory 2 days a week and i was on vacation on Thursday. i spoke with Angela and they did not switch the patient because the patient wanted to stay on short acting. Dr did try to write another script but it was for Medicaid and did not go thru. i'm trying to get him to focus on commercial and BWC.<font color=blue><b>CHUDAKOB added notes on 06/30/2011</b></font>OK. Sounds like you are at least getting him to think of it.
PPLPMDL0020000001	Stow	OH	44224	6/14/2011	Steve said he started a patient on Butrans last week. i asked what made him write it and he said he has been coming to his mind a little more and he thought of it with this patient because he did not want to prescribe them pills. HE asked if it is covered on BWC and i said yes. HE said he can think of some other patients who it may work with. RMeinded him that it is still the only schedule 3 once a week analgesic.
PPLPMDL0020000001	Akron	OH	44310	6/14/2011	i asked Dr. Cremer about his success with Butrans and he said that patient seem to like it so much that they even went through a prior auth process to get it approved for a Medicaid patient.
PPLPMDL0020000001	Rocky River	OH	44116	6/14/2011	Quick call with Leigh Ann, we reviewed the key messages for Butrans and how to instruct patients on proper use. She has not seen any scripts yet. Reminder about OxyContin as long acting option.
PPLPMDL0020000001	Richmond Heights	OH	44143	6/14/2011	Quick call...Spoke to Mel about the stocking of Butrans. He confirmed that the has it and he said he has seen maybe one script and it was for medicaid. He said it went through but he did not remember anything more. i explained the commercial coverage and the savings cards before he walked away.
PPLPMDL0020000001	Mayfield Heights	OH	44124	6/14/2011	Window call...Reminded doc of the Butrans coverage with commercial plans and BWC. Provided formulary grid reminder and patient information booklets. Nothing learned.
PPLPMDL0020000001	Westlake	OH	44145	6/14/2011	i reviewed the 5 key messages for Butrans and asked if he has any patients coming in today on low dose hydrocodone where he could try Butrans. He said he will give Butrans a try.
PPLPMDL0020000001	Cleveland	OH	44130	6/14/2011	Dr Fedorko congratulated me. i asked what for. He told me that he has a patient who will be picking up a Butrans prescription tomorrow. i asked him to tell me about the patient. He said that she has had back surgery prior & still has pain. i asked what she has been taking for it. He said that she was taking Percocet but was getting nauseated & constipated from it. He picked up his initiation guide & showed me page 6, telling me he would be starting her on the 10mcg dose. i told him it sounded like he was prepared. He said that she was a Mediare patient & asked if it would be covered. i told him he would have to do a prior authorization & it would depend what the plans requirements were. He said he hopes they approve it.Recommended Senokot-5 for opioid-induced constipation.
PPLPMDL0020000001	Twinsburg	OH	44087	6/14/2011	Spoke with pharmacist, Michelle, & asked her about the managed care make-up of this store. She said that if she had to put a percentage on it, she would estimate that 10% is Medicaid, 30% is Medicare, & the rest is commercial insurance. Discussed savings programs & eligibility for savings programs. She said she did not need any more OxyContin savings cards at this time.
PPLPMDL0020000001	Stow	OH	44224	6/14/2011	Sharon said she has not written Butrans yet but she has been following the other PAs and she said she has just started writing. RMeinde her that it is schedule 3 and she said that is important to her and that it is once a week. She said she would write it. Rmeinded of managed care.
PPLPMDL0020000001	Cleveland	OH	44104	6/14/2011	i reviewed 5 Butrans core messages with dr,i asked dr who was appropriate for Butrans? dr said if patients are taking vicodin or percofet and maxed out on dosage strengths and dr doesnt feel comfortable giving more pills,he's thinking Butrans could work there.dr said he likes that Butrans is a patch and dosed once a week but he has a small percentage of chronic pain patients.dr asked about insurance coverage for Medicaid as thats biggest group of patients,we talked about Prior Authorization requirements for medicaid patients to try and get Butrans approved.i told dr to think of 2 patients,commercial plans,that can use Butrans patient savings cards,dr said ok he'll see what he can do.i recommended Senokot-5
PPLPMDL0020000001	Westlake	OH	44145	6/14/2011	Quick call,i asked how many of her patients complain that their short acting medication is not controlling their pain. She said she has a few. i asked her to prescribe Butrans instead of increasing their short acting and she said she will keep it in mind.
PPLPMDL0020000001	Akron	OH	44333	6/14/2011	i asked Dr. Shah about refills and how he writes them. He said he has his patients come back each month for a refill. He also said that although he likes Butrans therapy the majority of patients he started on therapy were on State plans and have been unable to continue to get it approved.
PPLPMDL0020000001	Brooklyn	OH	44130	6/14/2011	Spoke with Renee (pharmacist) & reviewed Butrans patient information booklet. She showed me the Butrans boxes on the shelf & said that she thought the guides would help customers, especially when they are picking up their first Butrans prescription. She said that while they do not have a lot of customers on Butrans, they do have a few & it may be helpful for them. She then got a phone call from a customer she had to answer.
PPLPMDL0020000001	Stow	OH	44224	6/14/2011	Dr said he has written some more scripts. i said Marcy said that 2 of them needed PA and one did not go through because it was medicare. i reminded him it is PA in medicare and that he will have more success in BWC and commercial. HE asked to see grid and then said it is covered on BWC and i said yes.HE said he sees alot of BWC that it would work with.i asked how many new patients he sees a wweek and he said about 20. i asked for 10 of those new patients if they are appropriate and he said he would try. i asked if there is anything that is preventing him from writing more Butrans and he said no, he just forgot about it this week but has w ritten some a couple of weeks ago.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/14/2011	Quick call through window. i asked Dr. Sable if he had any patients that he was seeing this week that were asking to be titrated on their current SAO therapy. He said he didn't know off the top of his head. i explained that if he did maybe those patients would benefit from Butrans therapy.
PPLPMDL0020000001	Stow	OH	44224	6/14/2011	Dr said he wrote his first script of Butrans and the patient got nauseated. i asked what dose and he said 5mcg, he took him off. HE said he will try more patients. i asked what made him write this script, he said it just came to his mind when the patient was talking and he thought it would be a good fit. HE said he has now written one he will write more. i said what makes it different from the others and he said less diversion. i said it is C3 and still has the potential for abuse as any other C3. HE then started talking about scheduled medication and Oxycontin and the problems with abuse and diversion. HE asked again about the new formulation and asked what is in the coating and i told him we can fill out a medical request and he said that is ok. HE said his pharmacy is closed provider, he will only be stocking what they write, i asked if he will be stocking Butrans and he said yes.
PPLPMDL0020000001	Mayfield Heights	OH	44124	6/14/2011	i reviewed the Butrans indication and asked doc where she would use a product like Butrans. She asked if it is along the lines of darvocet. i told her no and that Butrans is a 7 day CIII. i confirmed that it could be called in and refilled. She asked about side effects. i referred to the AE section of the FPI as she was particularly curious about skin rash. i pointed out the incidence of skin reactions per FPI. She asked if it really stays on for 7 days. i told her that the feedback about adherence has been very positive. She asked about the starting dose. i reviewed the proper initiation. She also asked if Butrans can also be used for withdrawal. i told her not at all - only indicated for pain, not withdrawal. Reviewed the formulary coverage and savings cards. Reminded her that oxycontin would be appropriate after 20mcg/hr of Butrans.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/14/2011	Went over the patient education guide with pharmacist. Discussed the ideal type of Butrans patient and the core message i was delivering to local physicians.
PPLPMDL0020000001	Mogadore	OH	44260	6/14/2011	Spoke to Jerry and he said they are stocking butrans, He said they have seen some scripts. i asked from Cain and he said he could not remember. Rmeinded of safety information with direct heat and application. He said they do not do alot with Oxycontin. Discussed SenS with him for opioid induced constipation.
PPLPMDL0020000001	Westlake	OH	44145	6/14/2011	i told Dr I've been in week after week, what is his hesitation about it, and he doesn't have that many patients who request a medication change but he is keeping it in mind. i asked if he would just find one patient to try Butrans and he agreed. He said he does have a handful of patients on OxyContin still and many of his might need OxyContin as a next step after short acting vs going to Butrans.
PPLPMDL0020000001	Stow	OH	44224	6/14/2011	Dr said he has not tried Butrans. He said he does more of the procedures. HE said he feels the window may be limited in their practice because most people come in on alot of Vicodin. i said what is a lot of Vicodin and he said 6 pills a day. i said he can still go to Butrans, and he said if they are no longer controlled he will go to something stronger and procedure. HE said they are coming out with alot of good pain medications the last couple of years and i said what do you think stands out with Butrans and he said long acting, C3 and he feels it would have less diversion. i reminded him that it is schedule 3 and that it still has the potential for abuse as any other schedule 3. HE said he will keep it in mind.
PPLPMDL0020000001					

PPLPMDL0020000001	Twinsburg	OH	44087	6/14/2011	Introduced myself & Purdue's product portfolio to Dr Hillard. Delivered Butrans 5 core messages & alerted him to box warning. I asked him where/how he typically uses opioids in his practice. He said that he does have some patients who he is comfortable prescribing for, but as a general rule he does not like to prescribe them. He asked if Butrans could be used for a patient for 2-3 months. I asked him what period of time he considers "chronic". He said over one month. He asked if there was any information about patients building a tolerance to Butrans vs other that tendency in other opioids. I told him we do not have any comparative data but offered to submit an e-MIRF & he accepted. He asked how he would take someone off Butrans. Told him we recommend a gradual taper, like he would do with other opioids. I asked him if he thought Butrans sounded like something he would ever utilize & he said he is thinking of a few specific patients he may consider it for.
PPLPMDL0020000001	Westlake	OH	44145	6/14/2011	I asked Dr when he decides to prescribe Butrans. He said he does not like to prescribe opioids in general, but thinks Butrans is great for patients who are taking a few vicodin per day. I asked if he would write for this type of patient this week and he said he will try. Dr said that he is happy that Purdue reformulated OxyContin. I discussed the field card for his review.<font color=blue><b>CHUDAKOB's query on 06/24/2011</b></font>Why is he happy we reformulated it if he doesn't prescribe opiates? He doesn't write it anyway. You could also clear up misconceptions about the reformulation by clarifying what he meant.<font color=green><b>HOLUBA's response on 06/27/2011</b></font>We had discussed this in the past and he is happy about it because he has increased business in his addiction clinic. I have reviewed the field card with him several times and that we have no data to support OxyContin being harder to abuse.<font color=blue><b>CHUDAKOB added notes on 06/30/2011</b></font>I see.
PPLPMDL0020000001	Mayfield Heights	OH	44124	6/14/2011	I reminded doc of our previous lunch and his expressed interest in Butrans. I asked what risks/disadvantages he sees with trying Butrans. He said he has no reservations about it. I asked him to try 1 patient this week that meets the indication. He asked me to leave the initiation guide. He has savings cards.
PPLPMDL0020000001	Euclid	OH	44117	6/14/2011	Opened the call by asking doc about patients that fail on tramadol or max out on tramadol...what does he do next. I reminded him that he said he might use Butrans for those patients. He stated that he does see a place for a long acting CII. He said he is definitely going to find a place for it. He brought up the Senate Bill 93. He said that things will likely be changing and he is not sure how. I reviewed the initiation dosing and the coverage on Spoke with Eve (pharmacist) & reviewed Butrans patient information booklets. She said she would like to keep on one hand so that she can reference it if she gets any questions about Butrans from customers. She said that she has not yet dispensed Butrans, but she has gotten 2 prescriptions for it. I asked her to clarify. She said in both cases, the patient had Medicare. She said in one case, it got denied & in one case it was approved but the co-pay was too high for the patient to pay for it. Reviewed managed care & savings cards/eligibility. Also discussed appropriate Butrans patient/positioning. Asked if she needed additional OxyContin savings cards but she said they are OK for now.
PPLPMDL0020000001	Cleveland	OH	44114	6/15/2011	I talked to dr about 5 Butrans core messages, appropriate patients for Butrans and we talked about patients dr is continually starting on Butrans. dr said she started a few more patients recently as these were patients taking vicodin and percocet but not controlled and wanting something different, so dr thought Butrans would be a good option. I showed dr Butrans initiation guide for discussion and asked her to continue thinking of patients to start on Butrans. dr agreed and said she is seeing positive results in patients. we talked about Butrans formulary coverage and patient savings cards and I asked dr to also give patients Butrans patient information booklets when leaving office with a script, dr agreed. I recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44106	6/15/2011	I talked to dr about her patients taking tramadol, daily, that arent controlled and asking her for something else, to consider Butrans if patients are appropriate. dr said she likes that Butrans is a patch and once weekly dosing could be easier for some patients but she has a lot of medical aid patients and she's not willing to do the prior authorization for Butrans because she doesn't write much long-acting opioid medications so it won't work. I asked dr to focus on 2 patients commercially insured, that are taking tramadol but not controlled, and start them on Butrans. dr said she'll think about it but doesn't have a lot of commercial insurance. I recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44195	6/15/2011	I talked to Kathy, PA, about Butrans 5 core messages, showed visual aid for discussion and I showed Kathy Butrans initiation guide and asked her to consider her tramadol patients taking tramadol daily that arent controlled and asking her for something different, to start them on Butrans. Kathy said she does like Butrans being transdermal and loves the once weekly dosing but she's not heard from patients that they want to stop their pills. we talked about Kathy starting a couple of patients on butrans but still giving them some tramadol for breakthrough pain, I showed Kathy Butrans fpi, maintenance of therapy section, for this discussion. Kathy said ok she'll think about it. I recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44195	6/15/2011	I talked to dr about 5 Butrans core messages, dr said she likes that Butrans is transdermal and dosed once weekly but she doesn't have a lot of patients on narcotics and tries not to put her patients on narcotics. I talked to dr about her tramadol patients taking tramadol daily that arent controlled and asking for something different to consider Butrans. dr said she might if patients ask for something else, we also talked about patients that call in for refills earlier every month as that might be a sign that a long-acting opioid is appropriate. dr said ok she'll keep in mind. we talked about Butrans insurance coverage. I recommended Senokot-S
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	6/15/2011	I asked Dr. DiLauro what type of specific patient she had in mind to initiate Butrans therapy to. She said that while she maintained some patients on their current therapy she does not like to treat chronic pain and therefore treats little of it. She said she like the idea of Butrans and would initiate to the appropriate patients.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	6/15/2011	I asked Dr. Axem about her success with the patient she had trailed Butrans on. She said her success was good as far as she knew. I asked if she would then consider it on other appropriate patients. She said she would keep it in mind.
PPLPMDL0020000001	Cleveland	OH	44113	6/15/2011	I reviewed 5 Butrans core messages with dr, discussed appropriate patients to start on Butrans, dr said he's not sure if he has any patients for Butrans as most of his patients have acute pain. dr said he likes that Butrans is a patch and dosed once a week as that might be a good option for some of his chronic pain patients but he doesn't have a lot of chronic pain patients. I asked dr to consider Butrans for 2 patients taking vicodin or percocet and not controlled, that meet Butrans indication (showed Butrans visual aid for discussion) dr said he would do that. dr asked about insurance coverage so we discussed that too. I recommended Senokot-S
PPLPMDL0020000001	Maple Heights	OH	44137	6/15/2011	Spoke with Jim (pharmacist) who said he does not have anyone on Butrans. I asked if he has seen prescriptions (ie getting prescriptions, but the patient's plan not covering it). He said he has not seen a single script. Reviewed appropriate patient type/positioning with him & also discussed patient information booklets. He said he would keep it on hand for patient counsel in the event that he sees a prescription. Jim said his OxyContin savings cards have expired & asked for more, so I provided them & reviewed eligibility.
PPLPMDL0020000001	Bedford	OH	44146	6/15/2011	Spoke once again with Dr Mahna's medical assistant who said he was doing a deposition today & so he could not see me. I asked if Wednesday is still generally the best day to see him & she said it is. She asked for my card & said she would give it to the office manager, the doctor's wife, to schedule an appointment. I let her know I have left my card a couple of times & am requesting a short appointment with Dr Mahna to discuss a product that he has not yet been detailed on. She said she would let the office manager know that when she requests my appointment. Reviewed Butrans indication, delivery system, & appropriate patient type with her. She said she would try to get me an appointment.
PPLPMDL0020000001	Lyndhurst	OH	44124	6/15/2011	I reminded HCP of the Butrans indication and that it is a CIII which means it can be refilled and called in. I asked her if being a CIII makes it likely that she would prescribe for appropriate patients. She said she would try it. I reviewed the commercial insurance plans.<font color=blue><b>CHUDAKOB's query on 06/24/2011</b></font>Look how you started this call! I reminded. You asked her a close ended question. Perhaps a question like, tell me your thoughts on a transdermal delivery system in pain medications. This might get her opening up a little more.<font color=green><b>SIMERTOC's response on 06/30/2011</b></font>Yeah. She seems less interested and hands off than the doc in terms of prescribing in general. I have to practice the "tell me your thoughts" spiel.<font color=blue><b>CHUDAKOB added notes on 07/02/2011</b></font>Keep working on it!
PPLPMDL0020000001	Cleveland	OH	44103	6/15/2011	I talked to Dave, Pharmacy Manager, about Butrans 5 core messages and we discussed appropriate patients for Butrans. Dave said he hasn't seen any scripts for Butrans. I asked Dave if he could recommend Butrans, if patients taking short-acting opioids aren't controlled and telling him their medications not lasting long enough? Dave said he might do that. I gave Dave Butrans patient information booklets to give patients for their information. we talked about appropriate patients for OxyContin, I showed OxyContin visual aid and we talked about OxyContin formulary coverage. I recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44114	6/15/2011	I reviewed 5 Butrans core messages with dr, we talked about appropriate patients to start on Butrans and I showed dr Butrans initiation guide for discussion. dr said if patients are taking vicodin, percocet or oral morphine and arent controlled and asking him for more pills, he's talking to them about Butrans and starting them. we talked about proper tapering of short-acting opioids, initiation of Butrans and I asked dr to consider 2 more patients to start on Butrans. dr agreed. we talked about Butrans formulary coverage and I recommended Senokot-S
PPLPMDL0020000001	Independence	OH	44131	6/15/2011	I asked Dr Jack what has to happen for him to start writing Butrans. He said he just has "old habits" & he needs to get out of them. I told him he is a young doctor & that many older physicians have managed to remember & asked what he thinks the hang-up really is. I asked if he truly sees merit in Butrans. He said he does. He went on to say that he feels that transdermal products are generally good, effective medications. He also said he likes that Butrans is once weekly. He asked if Butrans is CII- I told him it is CIII but still carries abuse/addiction potential. He said he can't believe he didn't realize it was CIII. I asked if Butrans being a long-acting CIII meant anything for him & he said that it was an important feature that he never thought of before. Reviewed appropriate patient type. He said what he needs to do is choose one patient to try on Butrans, get their feedback, & go from there. I agreed this is a good place to start.
PPLPMDL0020000001	Independence	OH	44131	6/15/2011	Quick call- Dr Rob said he didn't have time to come back to lunch. I asked him if Butrans being a CIII that is long-acting meant anything to him. He said "perhaps" but then walked away. Spent time with Maria discussing Butrans appropriate patient type, delivery system, dosing & managed care/savings cards for eligible patients. I asked how she thought it could be used in the Rutkowski's practice. She said they both have a lot of patients who fit the patient profile. I asked her how we can get them to try some patients on it. She said that it just takes repetition with them & that eventually they will write it. She encouraged me to not give up & to just continue to come in to talk to them- I agreed.
PPLPMDL0020000001	Cleveland	OH	44114	6/15/2011	I talked to John, PA, about Butrans 5 core messages, we discussed appropriate patients to start on Butrans and John said he is recommending to both dr katz and dr marshall to start more patients on Butrans. John said patients with chronic pain will take 1-2 tabs of short-acting opioids one day and then if they have a bad day with their pain, they could take a lot more which concerns him because of the acetaminaphen levels being exceeded. John said he likes once weekly dosing and that Butrans is a patch. I asked John to continue recommending Butrans and he said he will. we briefly discussed managed care coverage for Butrans.
PPLPMDL0020000001	Akron	OH	44304	6/15/2011	Quick call. Dr. Amanambu came to the window and I asked about his Butrans potential. He said he was running behind and asked me to stop back next Thursday. No new info learned.
PPLPMDL0020000001	Cleveland	OH	44143	6/15/2011	Window call....I reviewed the Butrans indication and positioning for patients - opioid naive or those on low doses of short acting. I reminded him to focus on commercially insured patients and give them savings cards.
PPLPMDL0020000001	Akron	OH	44320	6/15/2011	Nothing learned.
PPLPMDL0020000001	Northfield	OH	44067	6/15/2011	I asked Dr. Bonyo why he had not yet felt comfortable enough to initiate Butrans therapy. He said he would give it a shot.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	6/15/2011	Spoke with Sun-Li (pharmacist) who said that they do not have Butrans there & she had not heard of it. I reviewed with her the indication, dosing, positioning, savings program/e-voucher, & delivery system. I want the store policy is on ordering products. She said they will have to have a prescription before ordering. Also discussed OxyContin & asked if they stock it at that location. She said they do have it. She said I could bring more savings cards Dr. DiLauro said that she was having success with Butrans and liked it most for compliant issues. She said that many of her patients on low dose SAO's do not remember or like to take it multiple times a day and Butrans gives them another option.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/15/2011	I reintroduced Butrans to Dr. Dinsmore. I identified several patients that would be appropriate for therapy and I asked if he had any of those types of patients. He said he did. He said he would give Butrans a try and liked that it was a LAO and a schedule 3.
PPLPMDL0020000001	Rocky River	OH	44116	6/15/2011	Quick call with Stan, we reviewed the key messages for Butrans. He said that he still has not seen scripts at this location and they do not have a ton of chronic pain. We reviewed OxyContin as an option when Butrans may not provide adequate analgesia.
PPLPMDL0020000001	University Heights	OH	44121	6/15/2011	Started to discuss the patient that is currently taking NSAIDs/tramadol daily....doc said he remembers...."the patch". He asked the name of it again. I told him Butrans and the indication. I reminded him that it is a CIII with 7 day delivery. I asked him if he sees any advantages to Butrans. He said as long as patients don't have to pay more. I reminded him of the commercial coverage and the potential cost of \$15 with the savings cards. I asked him to try it. NOTHING else learned before he started dictating.
PPLPMDL0020000001	South Euclid	OH	44121	6/15/2011	Window call....ASked doc what the recalls about Butrans. He said that it is a patch like fentanyl. I confirmed that it is a patch but not like fentanyl. It is a 7 day delivery and a CIII. I reminded him of the commercial coverage and the savings cards. He said he has some.

PPLPMDL0020000001	Warrensville Heights	OH	44122	6/15/2011	Spoke with MA Adrienne who said I missed Dr Zivic again. I asked if he has changed his hours as it seems that I can never catch him. She said that he has changed them slightly & is now at that location earlier on Wednesdays & leaves earlier to go to Hillcrest. She said the best time to catch him now is between 10-12 on Wednesdays. I asked if he is still doing lunches there & she took my card & said she would call me to schedule. Reminded her of Butrans & OxyContin savings cards for eligible patients. She said they have a lot of Medicare Part D but some commercial insurance.
PPLPMDL0020000001	University Hts	OH	44118	6/15/2011	I opened the call by explaining Butrans as a long acting CII option in lieu of prescribing hydrocodone ATC. I discussed the positioning - after NSAIDs/tramadol and before oxycotin. I asked him if he sees any merit to Butrans for his patient population. He said sure and asked about medical/medicare/BWC coverage. I reviewed the commercial coverage and the savings cards. He asked about side effects so I reviewed the AE section of the. He asked if patients are able to drive after starting on Butrans. I explained the risks similar to other opioids. I explained the appropriate initiation dosing. He said that because it is covered on BWC there is a better chance of him writing it. I reminded him of the oxycotin patient type and the preferred formulary coverage.
PPLPMDL0020000001	Warrensville Heights	OH	44122	6/15/2011	Dr Brooks said that he has been trying more patients on Butrans & has been getting good results. He said that he believes there will be more of a place for Butrans now with the passage of Ohio House Bill 93 which limits the amount of narcotics non-pain management physicians can prescribe. I reminded Dr Brooks that Butrans is CII & still carries abuse/addiction potential. He said that he feels that Butrans is "better" than short-acting opioids like Vicodin & Percocet because it has no street value. I told him it still carries abuse/addiction potential as it is an opioid. He said he realizes that but that is his medical opinion. He asked about managed care. Reviewed coverage & savings cards where applicable. Also reviewed savings cards for Butrans & OxyContin with Beth & Jazz (MA's) who confirmed that Dr Brooks has been prescribing Butrans more.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	6/15/2011	Spoke with the pharmacist and reviewed the patient education guide. Explained application and disposal and explained steady state.
PPLPMDL0020000001	South Euclid	OH	44121	6/15/2011	Spoke to Laureen and tech about the stocking and movement of Butrans. Laureen had not seen any scripts but tech specifically remember a script from Debbie Bizjak. The script went through without any problems. I explained the positioning and how to properly apply and dispose of patch. Gave her a patient info guide and savings card sales piece.
PPLPMDL0020000001	Parma	OH	44134	6/15/2011	Dr Hernandez said that he is switching all his Vicodin patients to Butrans. He said that the only time a patient like this would not end up on Butrans is if he had anyone who had some sort of reaction that could not be controlled with other medications. He added that this has not happened yet. He said he wishes more primary care physicians understood Butrans & buprenorphine & would be more open-minded to switching patients to it. He said that he thinks Ohio House Bill 93 is going to effect the way many physicians prescribe due to limitations on the number of patients on chronic pain medications each doctor is allowed to have. I asked if it would impact the way he practices at all & he said no. He also said that he still feels that OxyContin is a good medication but added that he usually only prescribes it at low doses & sometimes chooses Butrans for the patients he would
PPLPMDL0020000001	South Euclid	OH	44121	6/15/2011	Spoke to Mitch about the stocking of Butrans. He said that they are stocking Butrans but he has not seen any scripts (He said that's my fault). He discussed with him the positioning of Butrans and the selling messages of Butrans. He asked about the insurance coverage. I explained the commercial coverage and the savings cards - medicare/medicaid not covered.
PPLPMDL0020000001	Bedford	OH	44146	6/15/2011	Dr Moufawad stopped & apologized for being so short during my last visit with him. He said things have been so busy & hectic for him that he did not have time to delve into detail about his Butrans experience but then felt bad after I left. Told him I understand & that I want to try to understand where his feelings about Butrans have come from & asked if he could tell me more about it. He said that one problem he has encountered is that when he has a patient on Butrans who also takes Percocet for breakthrough, the pharmacists give him trouble or report him for having patients on agonists & agonist/antagonists at the same time or too many opioids at the same time. He said the problem is that pharmacists don't understand Butrans & he feels that could get him into "trouble". He said he is still prescribing it for patients "here & there" & asked that I try to come in tomorrow to sit down with him for 5 minutes to discuss. I agreed.
PPLPMDL0020000001	Lyndhurst	OH	44124	6/15/2011	Quick call...Reviewed the Butrans indication, positioning, starting dose and how to apply. She asked again about medicare as she can think of some medicare patients. I explained the PA required for medicare/medicaid. Gave an initiation guide to review. <font color=blue><b>CHUDAKOB's query on 06/24/2011</b></font>Did you explain where it was covered on this call? Is she sold on the clinical benefits of Butrans? How do you know this?<font color=green><b>SIMERTOC's response on 07/07/2011</b></font>I reviewed the commercial coverage on this call as I do on every call whenever the question of medical/medicare comes up. Is she sold? When the patient is appropriate (i.e. coverage, has been on a short acting already)<font color=blue><b>CHUDAKOB added notes on 07/10/2011</b></font>If she is sold on the clinical benefits of the product, she would look for patients to put on Butrans.
PPLPMDL0020000001	Parma	OH	44129	6/16/2011	Dr Chagin said that he does intend to prescribe Butrans, but that he just hasn't thought of it. I showed him a demo patch & he said he felt that the adhesive seemed like it would be effective for the full 7 days. Reviewed with him the appropriate patient type/positioning & asked how frequently he sees or hears from patients like this - he said daily. I asked that he choose 1 or 2 patients who are calling too soon for refills or asking for increases or changes in their chronic pain medication to switch to Butrans. He asked if he could call Butrans in - I told him yes & reviewed dosing & initiation with him. Also reminded him of commercial insurance coverage & savings cards. He said he will prescribe Butrans for those patients. Also reviewed Ryzolet q24h dosing & managed care for Ryzolet.
PPLPMDL0020000001	East Cleveland	OH	44112	6/16/2011	Reminded doc that he said he would try Butrans for an appropriate patient that may be on a low dose of a short acting narcotic. He said he can't think about that now that the new senate bill has passed. He may stop taking new patients and treating pain. If he just keeps that patients that he already has most of them are on stronger doses of narcotics. I reminded him of the indication and max dose. He said he still has lots of patients on oxycotin and needed more savings cards. Provided same.
PPLPMDL0020000001	Brooklyn	OH	44144	6/16/2011	Spoke with MA Audrey who said Dr Deeb could not see me today. I asked her what the best way for me to catch him to follow-up on our previous Butrans discussion is. She said she would take my card & would call me to schedule a lunch. She also asked what Butrans is. Reviewed with her indication, delivery systems, dosing, & appropriate patient type/positioning. I attempted to leave an initiation guide, but Audrey said she cannot take any information at all. She said she would let me know about the lunch appointment.
PPLPMDL0020000001	Cleveland Hts	OH	44118	6/16/2011	I discussed the Butrans appropriate patient positioning and dosing - 5mcg/hr for opioid naive and low dose opioid, 10mcg/hr if converted from other short acting opioids. I asked doc where he is likely to prescribe. He said maybe switch after patient has been on another med. I reviewed the initiation dosing for those patients. Let him know of the savings cards for Butrans and Oxycontin.
PPLPMDL0020000001	Barberton	OH	44203	6/16/2011	I asked Dr Patel what he would need to know about Butrans for him to prescribe it consistently? He said he thought he was using it in all the appropriate patients and would continue to do so.
PPLPMDL0020000001	Akron	OH	44319	6/16/2011	I have continued to work with Dr. Yee in an effort to identify the most appropriate patients to start on Butrans therapy. He says he has many of the patients I have described and says he likes the concept of Butrans, since it is LA and a schedule 3. He said he would try harder to identify the right patients.
PPLPMDL0020000001	Parma	OH	44129	6/16/2011	Dr Gigliotti showed me his Butrans webcast invitation & told me he still plans to log on. I asked him what the real odds were that he would participate. He said 70%. I asked why he thinks he has not found a Butrans patient yet. He said he hasn't written any opioids lately because no patients with pain have been in. I asked what all he likes about Butrans & he said he likes that it is a transdermal medication, not an oral around-the-clock. He said the next patient who meets the indication & who he would prescribe an opioid for will be his Butrans patient. I also asked him to consider OxyContin q12h for appropriate patients beyond Butrans 20mcg.
PPLPMDL0020000001	Shaker Heights	OH	44122	6/16/2011	Dr Agarwal said that he has not yet prescribed Butrans but that he is interested in it. Showed him a demo patch & reviewed with him dosing, initiation, indication, & delivery system. He said that in the office he really does not maintain many patients on chronic pain medications. He said that the patients he has on chronic pain medications are those that he attends to in the nursing homes he goes to. Reviewed managed care coverage, including likelihood of having to complete a prior authorization for Medicare. He also said he has wanted to try Butrans on patients but wanted to wait because he didn't "want to be the first one" to prescribe it. I assured him that this would not be the case. He said he would start looking for patients to try Butrans on.
PPLPMDL0020000001	South Euclid	OH	44121	6/16/2011	Spoke to Stephanie about the indication and positioning of Butrans. I discussed the proper application and disposal per the patient information guide. She has not seen any scripts for Butrans so far. I reviewed the savings card program and the potential out of pocket cost.
PPLPMDL0020000001	South Euclid	OH	44121	6/16/2011	Spoke to Gary about the Butrans indication and positioning. They still do not have it stocked as no scripts received yet. He asked about coverage. I reviewed the commercial coverage and BWC. He asked about where to apply...I discussed the possible sites. He asked what to do if patients are particularly hairy. I told him they should keep the hair clipped if they may not be appropriate for Butrans. He said he would order when they get a
PPLPMDL0020000001	Akron	OH	44333	6/16/2011	I asked Dr Fouad if he had initiated Butrans therapy or if he thought he would. He told me that he was still looking for the right patient.
PPLPMDL0020000001	Barberton	OH	44203	6/16/2011	I asked Dr Minich about Butrans therapy and how often she was treating chronic pain. She said she felt comfortable treating chronic pain but was still unsure about initiating Butrans therapy. I asked what was most important to her before prescribing a drug for the first time and she said efficacy.
PPLPMDL0020000001	Highland Heights	OH	44143	6/16/2011	Window call...I reviewed with doc and Marianne the proper application of Butrans - to a clean dry site, clipped free of hair and to the possible sites. Marianne asked if it could be place on the lower back. Told her we have not studies on any other site but they can switch sides of the body. Provided formulary grid reminder.
PPLPMDL0020000001	Cleveland	OH	44130	6/16/2011	Spoke with Dr Sawhny's medical assistant who informed me that starting July 1st, Dr Sawhny will be leaving & opening a private practice in Building B. I asked if the staff will be going with him, but she said they could not because they all need the medical benefits that the hospital offers. She said he will be keeping the same phone number & advised me to call the new office after July 1st to schedule a lunch or appointment with him. She said he was not taking any product information at this time due to the upcoming move.
PPLPMDL0020000001	Cleveland	OH	44130	6/16/2011	Spoke with Dawn (pharmacist) who said that she has yet to see an actual prescription for Butrans. I asked her to clarify. She said she has taken a few phone calls from patients asking if they have it in stock, but the patients did not want to wait until Dawn could get it in the next day. I told her this is why I tried to get pharmacies stocked before launch & encouraged her to order now since she is hearing some evidence that it is being written. She said she did not need additional OxyContin savings cards at this time.
PPLPMDL0020000001	Akron	OH	44319	6/16/2011	I asked Dr. Wu what type of patient of his he thought would best benefit from Butrans. He said that he has some patients who are in need of being converted to a LAO and liked that Butrans was still a schedule 3. He asked again about initiation which I went over via the initiation and titration guide.
PPLPMDL0020000001	Akron	OH	44319	6/16/2011	Spoke with Gretchen, who is now familiar and had no questions regarding Butrans. I explained what I had been talking to Dr. Wu about and she seemed confident he would try it.
PPLPMDL0020000001	Bedford	OH	44146	6/16/2011	Dr Moufawad said the problem he has had with Butrans is that one or more pharmacists have reported him to the Medical Board for prescribing Butrans in addition to other opioids. He said that he had a patient, for example, who was on Percocet who he had taper down & then start Butrans. The patient said Butrans did not work for him, so Dr Moufawad said he had him taper off Butrans & then put the patient back on short-acting medication. He said the Medical Board questioned his prescribing of "agonists with an agonist/antagonist". He added that he knows that Butrans is not an agonist/antagonist, but that the pharmacists & Medical Board are uneducated about Butrans & may be getting it confused with Suboxone. Dr Moufawad would like a Medical Liaison from Purdue to somehow help with this issue & he said he is surprised that others are not having this issue. He added that he does not appreciate being interrogated as though he is "running a pill mill" & that he is cautious in how he Rx's
PPLPMDL0020000001	Highland Heights	OH	44143	6/16/2011	I asked Debbie if a product like Butrans is something she would initiate independent of the doc. She said maybe but she is only in the office part time and does not see the same patients regularly so follow up would be difficult. I reminded her of where Butrans is positioned and gave initiation guide.
PPLPMDL0020000001	Shaker Heights	OH	44122	6/17/2011	Spoke with Nahlia (pharmacist) who said she has not dispensed Butrans. I asked if she has seen prescriptions or had any phone calls about it & she said she has not. Reviewed appropriate patient type, delivery system, & savings program. I asked what type of insurance plans she sees most frequently. She said they see mostly Medicare Part D. She said they also see a fair amount of commercial insurance plans like Medical Mutual, Aetna, & Caremark. She said they did not need additional OxyContin savings cards at this time.
PPLPMDL0020000001	Beachwood	OH	44122	6/17/2011	Spoke with Shawnte' (MA) & attempted to see Dr Warren, but she said that she asked that I come back Monday morning as he was too far behind to stop to talk to me this afternoon. She asked me what Butrans is, so I reviewed with her indication, dosing, delivery system, & appropriate patient type with her. She said it sounded "interesting". I asked if I would be able to schedule a lunch with the doctors & staff to discuss it. She said she & Jennifer (another MA) work together on scheduling them & she took my card to meet with Jennifer & said she would find out before Monday when I come in. She said Dr Askari (another rheumatologist) does not allow

PPLPMDL0020000001	Parma	OH	44129	6/17/2011	Spoke with Fred, pharmacist, & asked if he was able to change the pharmacy manager's mind about stocking Butrans. He said that unfortunately, he does not think this will happen as the pharmacy manager is afraid to stock opioids in general due to getting robbed when he worked at a Drug Mart years ago. Reviewed the appropriate patient type for Butrans as well as dosing & titration. He said he still thinks it is a good idea. He said Dr Nickels is the only practitioner who really comes to mind as being someone in the area to discuss Butrans with. I asked if they needed OxyContin savings cards but he said they do not.
PPLPMDL0020000001	Parma	OH	44129	6/17/2011	I reminded Dr Roheny that he had shared with me that he had prescribed Butrans for a patient & asked him what kind of feedback he has gotten. He said he has not heard anything else from the patient. I asked if he considered that a good sign n& he said yes. I asked if he had identified any other patients like that one who he could switch to Butrans. He said he has not but that he has been too busy to think about it & said he would do his best. He had to go to the hospital to see patients. Spent time speaking with Lorraine, Kathy, & Terri (nurse) & reviewed Butrans delivery system, appropriate patient type, & managed care/savings cards for eligible patients. They said they all take patient phone calls regarding medications, but usually it is Terri or Kathy who does. They said they do not get very involved with prescriptions as Dr Roheny handles it.
PPLPMDL0020000001	Brooklyn	OH	44144	6/17/2011	Quick call- Dr Detwiler said he is still "keeping Butrans in mind". I asked if he is considering Butrans for appropriate chronic pain patients who either do not get relief or do not tolerate Vicodin or tramadol with commercial insurance & he said yes.
PPLPMDL0020000001	Fairlawn	OH	44333	6/17/2011	I asked Dr. Domdera how long it typically takes for him to prescribe a drug for the first time and he said it depends on the product. He said it was taking him longer than usual with Butrans because it was a pain med. He said he could see himself using this product done the road because he had a group of patients he feels could benefit from it.
PPLPMDL0020000001	Copley	OH	44321	6/17/2011	I asked Dr. Heim if he had seen the patients we had discussed on my last visit and if he had initiated Butrans therapy yet. He said he had not, but had just forgotten about it. I asked if I could talk to Jen about flagging a patients charts so he would have a reminder when the appropriate patient comes in and he said yes.
PPLPMDL0020000001	Mayfield Hts	OH	44124	6/17/2011	Reminded doc that Butrans is a schedule III opioid which can be called in or refilled. I asked if he is writing it with refills. He said most patients come in once a month for their pain meds. I asked him to continue Butrans for patients that fit the indication and have commercial insurance combined with savings cards.
PPLPMDL0020000001	Fairlawn	OH	44333	6/17/2011	Quick call. Thanked Dr. Lefkowitz for his OxyContin business and asked if he though there was any potential for Butrans. He said he didn't know. No new info learned.
PPLPMDL0020000001	Copley	OH	44321	6/17/2011	I asked Dr.r Machado if he was any closer to prescribing Butrans since we had discussed the molecule in more depth. He said that he feels like many of his patients are passed the point of Butrans. I asked if he finds himself ever prescribing low dose hydrocodone for an opioid naive patient and he said he did. I reminded him that those patients are potential Butrans patients.
PPLPMDL0020000001	Brooklyn	OH	44144	6/17/2011	Quick call- Caught Dr Miguel on his way into a room & asked if he has patients with chronic conditions on around-the-clock short-acting opioids. He said he has some, but not as many as Dr Detwiler.
PPLPMDL0020000001	Euclid	OH	44119	6/17/2011	Asked doc what experience he has had with Butrans. He said he did try it but patient complained that it was too expensive. I asked him what the coverage was. He thought it might have been medicare. I reminded him that it won't be covered on medicare/medicaid. I gave him a formulary grid and asked him to give a savings cards with scripts. Spoke with nurse who confirmed that they still have savings cards.
PPLPMDL0020000001	Akron	OH	44319	6/17/2011	I asked Dr. Katrjij how many patients he sees each week that are failing or asking to be titrated on their current SA therapy. He said he had some. I asked how many of those patients were on low doses of their SAO. He said a few but that many of those patients were Medicaid patients. I asked if would try Butrans on just 2 patients who were failing on their current therapy AND had a private insurance. He said he would keep it in mind.
PPLPMDL0020000001	Independence	OH	44131	6/17/2011	Spoke with Janelle & Denise (MA's)- reviewed savings cards for Butrans & OxyContin. Janelle said they did not need additional savings cards at this time. She also said they are already completely booked for lunches & will re-open books on September 1, so I asked to be put on the cancellation list. She asked if I could ever bring snacks in to them. I told them that any food I bring must be accompanied by a clinical discussion with the physician. Janelle said she may be able to have the doctor come out to speak with me if I bring something by. Let her know I would call before bringing something by to ensure that a physician was there. She said she would give Dr Boose the information I left.<font color=blue>->->-CHUDAK08 added notes on 06/24/2011</font>->->-/font>-Nice job on the compliance issue of having to have a clinical conversation in order to bring food.
PPLPMDL0020000001	Akron	OH	44333	6/17/2011	I asked Dr. Brown if she knew if patients had gotten their Rx's filled. She said she was sure a handful had but they live all around and she was unsure what pharmacy they were going to. She said many of her patients had followed her from Cleveland. I asked about specific patient types and she said the majority of patients she had started were failing on their current low dose SAO.
PPLPMDL0020000001	Northfield Center	OH	44067	6/17/2011	Spoke with pharmacist Kate & inquired about Butrans stocking. She said that they do not have it. She said that they only have 3 patients on the "oral version". Reviewed indication & let her know that Butrans is only indicated for pain & is not to be used for the treatment of drug addiction. I also asked if there were any area physicians who came to mind as having chronic Vicodin or tramadol patients. She said that there used to be a pain management facility nearby that they got a lot of prescriptions from, but that they had been closed for awhile now because of "something illegal going on". She said no one really comes to mind.
PPLPMDL0020000001	Fairlawn	OH	44333	6/17/2011	Spoke to Jessica and asked if she had seen any movement from Dr. Brown she said she did not believe she had but was unsure. She said Dr. Shah had slowed down and verified many of his initial patients had a state plan.
PPLPMDL0020000001	Beachwood	OH	44122	6/17/2011	Dr Yokiel was out for vacation, so I spoke with Vickie, his nurse. She said they just got a call from a Butrans patient who was complaining of chest pain on Butrans, but that she does not think it is from Butrans. Laura added that the patient complained of pain in his left arm, the arm that he was wearing Butrans on. I asked how long the patient has been on Butrans & Vickie said he has been on it for a few months. She said he has complained of it before as well. She said the patient has continued on Butrans despite this because they do not believe these adverse effects are actually from Butrans. Vickie requested additional OxyContin savings cards but said she has enough Butrans cards & patient education for now.
PPLPMDL0020000001	Cleveland	OH	44107	6/20/2011	Spoke with Laurie. We reviewed Butrans medication guide and how to instruct patients on the proper use and application of Butrans. We reviewed the steady state of 3 days and not to titrate until after this. We discussed managed care for Butrans and the savings cards for Butrans and OxyContin.
PPLPMDL0020000001	Cleveland	OH	44104	6/20/2011	dr said he started a patient on Butrans.i asked dr why? dr told me patient was taking vicodin,not controlled and wanting more pills and he wasnt comfortable giving this patient more pills,so Butrans made sense.i showed dr Butrans initiation guide,discussed proper tapering of short-acting opioids and initiation of Butrans.we discussed once weekly dosing and Butrans being transdermal as these were 2 things dr pointed out that he liked about Butrans.dr said he also liked that Butrans was a CII so he could call in refills which is much easier to him than a CII where patients have to pick scripts up in office.we talked about Butrans patient information booklet and i asked dr to show patients the application/rotation section as this was critical information for them to know about Butrans,dr agreed and said he would do this moving forward.i asked dr if he had a couple more patients like this one,not controlled on short-acting opioids,that he could start on Butrans? dr said yes he did
PPLPMDL0020000001	Beachwood	OH	44122	6/20/2011	Spoke with Michael (technician) & Paul (fill-in pharmacist) as Alan was on vacation & Ashley was on the phone. Paul said he has heard of Butrans but did not know a lot about it. Reviewed indication, appropriate patient type, dosing, managed care, & savings cards. I let him know more savings cards could be ordered online if necessary. Also asked if they needed additional OxyContin savings cards but they said they have enough. Paul said he would give my information to Alan & Ashley.
PPLPMDL0020000001	Westlake	OH	44145	6/20/2011	I asked Dr why he has not tried Butrans yet, he said he has not thought about it. We reviewed the 5 key messages and I asked if he sees any benefit for his patients. He said the 7 day dose is interesting. We discussed appropriate patients for Butrans and I asked if he would try just a few patients on tramadol or low dose vicodin. He agreed. I also spoke with Sam about appropriate patients. She said she would try to think of a few to remind with MA, Melissa, & reviewed savings cards for Butrans & OxyContin, discussing eligibility requirements for usage. Also discussed Butrans appropriate patient type & delivery system. Scheduled appointment to meet with Drs Seiple & Tosino. Melissa said she would give the Butrans information I left to each of the doctors.
PPLPMDL0020000001	Solon	OH	44139	6/20/2011	Reminded Dr Zaidi of previous Butrans conversations when he told me that he wants to hear feedback from other physicians & specialists before prescribing Butrans. I shared with him that Butrans has had a very successful launch & that it has been very well-received. He asked if patients could take other opioids with Butrans. I showed FPI 2.4 & told him they can. He asked if that would cause them to go into withdrawal. Discussed Butrans as partial agonist & also reviewed initiation guide pg 6, walking through how to initiate treatment in patients on opioids, including taper. Discussed appropriate range of patients & appropriate patient selection for all opioids. Also reviewed titration ability every 3 days, application, managed care, & savings cards for those eligible. I asked him if he would at least try Butrans on a few patients so he has his own clinical experience & he agreed to do this. Also discussed OxyContin for patients beyond Butrans & Senokot-5 for opioid-induced constipation.
PPLPMDL0020000001	Lakewood	OH	44107	6/20/2011	I asked Dr to think of Butrans for any patients who say their low dose vicodin is not working and he said he will. The only reason he has not tried it is he forgets about it. I spoke with Dawn and we reviewed the appropriate patients for Butrans. I asked if she would look through a few charts today and put a Butrans medication guide in an appropriate patient's chart to remind the Dr that it is an option. She said she will. We also discussed patients appropriate for OxyContin.
PPLPMDL0020000001	Parma	OH	44129	6/20/2011	Quick call- Jen stopped before going into a room & said that she has not switched or started anyone on Butrans but she has been using Ryzolt. Spoke with Dawn & reviewed appropriate patient type & range of current opioid dose that would be appropriate to consider for switching. Also discussed Ryzolt managed care coverage. Dawn said they changed their hours & also said that they have had multiple violent patient encounters lately. She said that ever since Dr Lundgreen (?) got in trouble for his "pill mill", many of his patients are coming there, wanting pain medications. She said the police had to be called. She added that Jen did not handle it well & that it has been a big adjustment for her coming from oncology. Dawn said to give Jen some time & that she would eventually come around for Butrans.
PPLPMDL0020000001	Lakewood	OH	44107	6/20/2011	I asked Dr why he hasn't tried Butrans yet, he said that he just forgets. We reviewed the key messages and I asked if he would try Butrans for patients who say their vicodin is no longer controlling their pain. We reviewed the use of short acting meds as supplemental analgesia. I reviewed Butrans key messages, managed care and savings cards. They said they do see a benefit in Butrans and will help remind the Dr when they see appropriate patients. Reminder about OxyContin as an option that is covered on Medicaid.
PPLPMDL0020000001	Cleveland	OH	44109	6/20/2011	I talked to Ron, Pharmacy manager, about Butrans 5 core messages and asked ron what were the top 3 factors that he considered to be most important about Butrans? Ron said he likes that Butrans is transdermal and once a week dosing is easier for some patients. we talked about appropriate patients and I showed Ron Butrans initiation guide for discussion, we discussed proper tapering of short-acting opioids and initiation of Butrans. ron said he hasn't seen any scripts yet but has told a few doctors about Butrans, when patients have told him their short-acting opioids arent lasting long enough.I asked if Ron could give patients the Butrans patient information booklet, if they tell him their short-acting opioids arent controlling their pain,ron said he would do that.I asked ron to focus on application/rotation of Butrans,if anyone comes in with a script for Butrans,ron said he would do that. we talked about appropriate patients for OxyContin,discussed formulary coverage and I recommended Senokot-5
PPLPMDL0020000001	Solon	OH	44139	6/20/2011	Spoke with pharmacist, Nate & inquired about Butrans stocking. He said they do not have it & added that he hasn't seen a single prescription for it. I asked if he had taken any phone inquiries about stocking from offices or patients & he said actually a Walgreen's called him last week to see if they had it. I let him know that Butrans has been very well received by physicians & patients & asked him to stock it. He said he would still wait for the prescription. Reviewed e-voucher & discussed OxyContin savings cards & eligibility.
PPLPMDL0020000001	Bedford	OH	44146	6/20/2011	Dr Haddad told me again about the patient who he has who is on Butrans & likes it so much that she pays for it out-of-pocket. I asked him if positive feedback like that encourages him to look for more patients to try on it. He said somewhat. I asked why not consider Butrans when patients with chronic conditions who take short-acting opioid around-the-clock. He said he would try to use it more & he has no reason not to. Shared with him that Butrans has been very well received from physicians & patients around the country. Reviewed managed care & savings cards for Butrans & OxyContin. We also discussed the importance of proper patient selection & told him he is right in being cautious when prescribing all opioids.
PPLPMDL0020000001	Lakewood	OH	44107	6/20/2011	I asked Dr what his hesitation with prescribing Butrans is. He said to be honest he just hasn't had time to think of it, things have been crazy as his wife had twins two weeks ago and he's been working a lot. He agreed to try to find a patient this week.
PPLPMDL0020000001	Cleveland	OH	44109	6/20/2011	worked internal medicine dept-left Butrans fpi,initiation guide,patient information booklet,formulary grid and business card for each physician:dr lindheim,dr ricanati,dr harrington,dr falkc-ytter and dr mccreeny also left each doctor OxyContin fpi,conversion guide and formulary grid.worked Oncology dept-had to leave Butrans fpi,initiation guide,patient information booklet,formulary grid and business card for each physician:dr o'brien,dr hergenroeder and dr snell and also left each physician an OxyContin fpi,conversion guide and formulary grid.
PPLPMDL0020000001	Lakewood	OH	44107	6/20/2011	Dr said that he has been trying to write for Butrans but is finding that it needs a prior auths. We reviewed managed care coverage and the savings cards. I asked him to focus on commercial insurance. I spoke with Pat regarding managed care and savings cards for Butrans and OxyContin. She said that she does not mind doing the prior auths as long as it takes all day. I focused her on commercial insurance for Butrans.

PPLPMDL0020000001	Fairlawn	OH	44333	6/20/2011	I asked Dr. Oyakawa about Butrans therapy and how many patients he thinks he sees a month that would benefit from Butrans therapy. He said that he had many, I asked if he would try therapy on just one so he would have some patient feedback and he said he would.
	Cleveland	OH	44103	6/20/2011	I talked to Amol, Pharmacist, about Butrans stocking and asked if Amol could focus his discussions with patients on Butrans application/rotation and showed Butrans initiation guide? Amol said he would do that and they have seen a few scripts from UH and Cleveland Clinic doctors but didn't remember who wrote the scripts. I asked Amol if he could recommend Butrans to patients, if they tell him their pain isn't controlled with their short-acting opioids, and give them a Butrans patient information booklet? Amol said he'll do that but most patients like taking their vicodin and percocet and he doesn't hear many complaints from patients. I showed Amol Butrans fpi, maintenance of therapy section, and told him patients could still take vicodin or percocet and apply Butrans. Amol said ok he didn't think patients could take both short-acting opioids and Butrans. I recommended Senokot-S. Quick call with Dave floater, we reviewed the key messages for Butrans and I reviewed the medication guide. He said he has been seeing a few scripts at various stores. He could not remember who prescribed. Reminder about OxyContin as a long acting option.
PPLPMDL0020000001	Cleveland	OH	44111	6/20/2011	Quick call, I asked if she would try just one patient on Butrans this week instead of going to vicodin around the clock. She agreed. I reviewed the savings cards and asked her to focus on commercial insurance.
PPLPMDL0020000001	Lakewood	OH	44107	6/20/2011	Spoke with doc about the Butrans indication and positioning after NSAIDs or tramadol. I asked her if she would consider a product like Butrans after before progressing to hydrocodone. She said she doesn't know and asked how much it cost as she has a lot of medicare/medicaid patients. I explained the coverage with commercial plans like medical mutual, Anthem, etc. and the savings cards. She said patients don't want to pay anything anymore. I asked her to consider Butrans next time she considers going to vicodin. She said ok. Gave formulary grid and initiation guide.
PPLPMDL0020000001	Akron	OH	44333	6/20/2011	Dr. Shah said he has continued to initiate Butrans to new patients but has slowed down because of coverage. He said that he would continue writing for patients who are unstable on their current SAO's.
PPLPMDL0020000001	Parma	OH	44129	6/20/2011	Spoke with Jackie, pharmacist, who said she still has not seen any Butrans prescriptions. Discussed the customer types she sees at her store. I asked if she thinks that she gets more prescriptions for patients who have doctors in the area or who live in the area. She said it is half & half. I asked about managed care plans she sees. She said she mostly sees commercial plans & Medicare. She said she does see a little Medicaid, but not very much. Also discussed OxyContin savings cards.
PPLPMDL0020000001	Parma	OH	44129	6/20/2011	Dr Taylor asked if I had heard anything else about Ohio House Bill 93. I told her I had not & that I did not have any information about it at this time. I asked her if she thinks it will have a big impact on her practice. She said she has already stopped taking on any new patients. She said she is keeping her short list of patients & will maintain them. I asked if for those patients, she would still consider switching them to different opioids than they are currently on if appropriate. She said she would. I asked if Butrans being the only long-acting CII available meant anything to her. She said she hadn't thought of that & that it was "nice" to have a long-acting option as a CII. Discussed managed care coverage & savings cards with her & Mary. Dr Taylor said she "still may prescribe Butrans".
PPLPMDL0020000001	Fairlawn	OH	44333	6/20/2011	I asked Dr. Weidman why she had not initiated therapy on some of the patients we had discussed on my last visit and she said she had not seen them yet, she said she would try it when they came in.
PPLPMDL0020000001	Akron	OH	44333	6/20/2011	I asked Dr. Griffiths if she would consider writing Butrans for patients who are currently asking to be titrated on their current SAO's. She thought that was a great idea and said she would focus on those specific patients moving forward.
PPLPMDL0020000001	Akron	OH	44313	6/20/2011	I spoke with the pharmacist who was a floater and typically works at the wellness center. He said he was familiar with Butrans through Dr. Bressi and did not have any questions.
PPLPMDL0020000001	Cleveland	OH	44114	6/20/2011	I discussed 5 Butrans core messages with Joel, Pharmacy Manager, asked Joel what were the top 3 factors about Butrans that Joel thought were important? Joel said he liked that Butrans was a patch and once weekly dosing was good for some patients, Joel said the problem is that majority of the patients he sees here, like taking their vicodin or percocet and won't want to stop their pills. I showed Joel Butrans fpi, initiation of therapy and maintenance of therapy sections and discussed with Joel the fact that patients can take their short-acting opioids while taking Butrans. Joel said he hasn't seen any scripts for Butrans but does get a lot of vicodin and percocet scripts. I asked if Joel would recommend Butrans to doctors if patients tell him their short-acting opioids aren't controlling their pain? Joel said it depends on dr but he'll consider it if patients say anything to him. I identified the most appropriate types of Butrans patients and asked Linda how many of those patients she sees each day. She said she had many ideal patients and simply needed to remember Butrans more. I told her I would come in every Monday to remind her and she agreed.
PPLPMDL0020000001	Akron	OH	44333	6/20/2011	Quick call, I reviewed our last conversation and showed steady state. Dr had question about managed care and we reviewed the managed care and savings cards for Butrans. I spoke with his staff regarding Butrans, we reviewed managed care and savings cards. Reminder that OxyContin is a long option acting covered on Medicaid.
PPLPMDL0020000001	Lakewood	OH	44107	6/20/2011	Quick call - Dr Warren said he has not put any more patients on Butrans & still only has the one he has told me about. I asked about feedback & he said he has not heard anything. I asked if he is still looking for potential Butrans patients & he said yes. I asked what he is looking for. He said he would prescribe it for a patient who was taking short-acting around-the-clock pain medications for chronic conditions. I told him this would be an ideal patient type & asked if he encounters them frequently. He said he does & then went into a room. Discussed managed care & patients who call in too soon for pain medication refills or who ask for changes or increases in pain medication with Donny & Elisa. Also followed up with Shawnte' who said she had not yet spoken with Jennifer to figure out a lunch date. She said she would let me know later this week.
PPLPMDL0020000001	Westlake	OH	44145	6/21/2011	I asked Dr how his Butrans patients are doing. He said he still has one patient on Butrans and they are doing well. He recently tried to prescribe Butrans for a Medicaid patient but they could not get the prior auths to go thru. I let him know that BWC and commercial will be the best chance of going through. He said that he will continue to prescribe Butrans. Reminder about OxyContin as an option and Dr said he still maintains many patients on OxyContin. I spoke with Danielle and Angela and they are trying to remind the Dr to use Butrans when appropriate patients come in. Dr has to have open heart surgery before the end of the year.
PPLPMDL0020000001	Cleveland	OH	44106	6/21/2011	I talked to dr about appropriate patients to start on Butrans, dr said he understands that Butrans is for patients who are taking vicodin or percocet, daily but not getting pain relief and asking him for more pills or something different. I showed dr Butrans visual aid, appropriate patients section, and told him if patients are taking tramadol, vicodin or percocet and not controlled, he had Butrans as an option. We talked about patients still taking some short-acting opioids for breakthrough pain while taking Butrans and I referenced maintenance of therapy section in Butrans fpi. I asked if dr had 2 commercial plan patients like we discussed that he could consider Butrans for, dr said he will keep it in mind as Butrans sounds like a good option for some patients. I recommended Senokot-S.
PPLPMDL0020000001	Cleveland	OH	44113	6/21/2011	I reviewed 5 Butrans core messages with dr and asked what were the top 3 factors she considered important when deciding if Butrans was an option for patients? dr said if patients are taking 1-2 vicodin or percocet daily and that's not controlling their pain, she's considering Butrans for those patients instead of giving them more pills. I asked dr if she would consider starting patients on Butrans, right after the initial dosage strength of vicodin or percocet isn't working? dr said she might do that, but usually she would max the dosage strength out and then consider Butrans. I showed dr Butrans visual aid for appropriate patients discussion and I asked dr to consider starting a few more patients on Butrans as we discussed, dr agreed. Briefly discussed Butrans formulary coverage and patient savings cards. I recommended Senokot-S.
PPLPMDL0020000001	Cleveland	OH	44130	6/21/2011	Dr Fedorko said the patient he told me about last visit was able to get her Butrans prescription filled & is currently taking it. He said he has not had feedback from her. I asked if he was identifying additional patients to try on Butrans & he said he that he has no issue or problem with Butrans, so he will continue to prescribe & then he added "for patients coming out of the hospital". I asked him why he has only been using it for patients coming out of the hospital. He said that this is because if someone was in the hospital, there is evidence of "real" legitimate pain, so he feels more comfortable prescribing Butrans for those patients. I agreed that he should be cautious. I asked him if he has patients in the office who he feels have legitimate pain. He said he does, but he is most comfortable with patients with real evidence of pain. Discussed managed care & reminded him of commercial.
PPLPMDL0020000001	Cleveland	OH	44113	6/21/2011	I reviewed 5 Butrans core messages with dr, asked dr what were some important features about Butrans that he would consider if starting a patient on Butrans? dr said he knows that Butrans is transdermal in a patch and the once weekly dosing of Butrans is easier for some patients than having to take vicodin or percocet every day. dr said his biggest challenge is insurance coverage as he doesn't prescribe a lot of long-acting opioids so he wouldn't have anyone that qualified for pre-requirements that Medicaid has for approving Butrans. I asked dr to focus on 2 commercial plan patients that are taking vicodin, daily and not controlled, and start them on Butrans and give them Butrans patient savings cards. dr has small percent of commercial. I showed dr OxyContin visual aid, discussed appropriate patients, 7 tablet strengths and gave dr OxyContin conversion guide and formulary grid. dr said he has 1 patient on OxyContin and doesn't like prescribing OxyContin. I recommended Senokot-S.
PPLPMDL0020000001	Parma	OH	44134	6/21/2011	Spoke with Pam (pharmacist) who confirmed that this location does have Butrans, but she was unable to tell me who, if anyone, they have seen prescriptions from. She was not very familiar with Butrans, so I reviewed with her dosing, usage, indication, & appropriate patient type. Also discussed savings opportunities for both Butrans (through e-voucher) & OxyContin (through savings cards) & also reviewed with her eligibility requirements. She said they do not need any more savings cards at this time.
PPLPMDL0020000001	Cleveland	OH	44130	6/21/2011	Introduced Butrans to Dr Lindes, delivering 5 core messages & reviewing box warning. He asked what comparative data has been done. I told him we do not have comparative data & presented initiation guide, reviewing pg 6. He asked how I was going to tell him Butrans is "better" than pills. I told him I would not make that claim. Discussed various appropriate patient types & asked that he be just as cautious in prescribing Butrans as he would any other opioid. He agreed. He asked if patients could take other pain medications on top of Butrans. Reviewed FPI 2.4 & discussed ability to take supplemental analgesia. He said he thought Butrans sounded "interesting". I asked if he sees patients who fit the indication who may be appropriate. He said he might have some he could switch. Discussed managed care & savings for eligible patients.
PPLPMDL0020000001	Cleveland	OH	44125	6/21/2011	Spoke with Angie (pharmacist) who said she has not dispensed any Butrans since the initial prescription for it months ago. She said she still has the other box she had ordered on her shelf. I asked if she has seen prescriptions at all, for example that just haven't been covered (ie by Medicare or Medicaid). She said she has not seen any at all. Discussed appropriate patient type & also reviewed savings programs for both Butrans & OxyContin. She said she would let me know if she sees any activity.
PPLPMDL0020000001	Cleveland	OH	44130	6/21/2011	Reminded Dr Lash of our previous conversation about Butrans. He asked for a re-cap of Butrans details. Reviewed indication, dosing, delivery system, CII, abuse/addiction potential, appropriate patient type, & managed care/savings information. He said that he heard that there were going to be requirements by the state that any physician who writes long-acting opioids would have to take courses about them first. I told him I did not know of this. I asked where he usually uses long-actings. He said if he sees that a patient is taking 6 Percocet or so per day, he goes to a long-acting option. Presented initiation guide & reviewed pg 6, showing range of patients. He asked about using supplemental analgesia. Showed FPI 2.4 to support that patients can take immediate release opioid or non-opioid medication with Butrans & discussed titration. Also discussed OxyContin q12h as an option for appropriate patients beyond Butrans 20mcg. He said he would look for a Butrans patient.
PPLPMDL0020000001	Cleveland	OH	44106	6/21/2011	I showed dr Butrans visual aid, discussed 5 core messages and appropriate patients for Butrans. dr said he has some patients on Butrans that are doing well and he is seeing improvements in patients pain levels. I asked dr how often he is seeing the appropriate patients for Butrans? dr said some weeks he sees 1 or 2 patients, then none, then he may see 4 patients who he feels are appropriate, it varies every week. I asked dr to stop and consider Butrans next time he sees patients taking percocet 5/325mg but not controlled and asking for something else, don't refill the script or increase dosage strength but instead consider Butrans for those patients. dr agreed. We talked about Butrans formulary coverage and use of Butrans patient savings cards. I recommended Senokot-S.
PPLPMDL0020000001	Cleveland	OH	44130	6/21/2011	I spoke with Marie, Dr Tomsik's MA, who said that Dr Tomsik doesn't come back to speak with reps. Let her know that he has not been detailed on Butrans yet & she asked me to tell her about it so that she could tell him. Reviewed 5 core messages with her & went through initiation guide, discussing range of appropriate patients. I asked if Dr Tomsik treats patients who fit the indication & she said he does - a lot. Discussed managed care & savings cards with her. I asked her to give Butrans information to Dr Tomsik. She agreed to do this & said that she thinks he will be interested in it enough to read the information, something she said he does not always do. Gave her my card in case she or the doctor have any questions.
PPLPMDL0020000001	Westlake	OH	44145	6/21/2011	I reviewed the 5 key messages for Butrans and asked his thoughts. Dr said that he really does not like to treat chronic pain with opioids long term, he sends them to pain management especially if they are younger patients. He has a fear of abuse and wants to the patients to explore other options to help their pain other than medication alone. We discussed appropriate patients for I asked if there is a place for Butrans in his practice and he said he thinks there is a niche. I asked him where that niche is, he said most likely after tramadol or for a patient who takes vicodin every day. I asked if he would try a few of these types of patients and he agreed. We reviewed the managed care and savings cards for Butrans. We reviewed the conversion guide for OxyContin and appropriate patients.
PPLPMDL0020000001					



	Cleveland	OH	44106	6/21/2011	i talked to Matthew,Pharmacist,about 5 Butrans core messages and i asked Matthew what were the 3 features about Butrans he felt were most important? Matthew said he liked that Butrans was a patch and dosed once a week.Matthew said some doctors care that its a CII so that they can call in refills while others dont care about that,i asked Matthew if he would recommend Butrans to patients that are taking short-acting opioids but not controlled,that meet Butrans indication? Matthew said he would and they do patient counseling so he will keep this in mind,i asked Matthew to hand patients the Butrans patient information booklet if he feels patients are appropriate for Butrans,so they can talk to their doctors about Butrans.Matthew said ok and to leave a couple booklets with him. we talked about Butrans formulary coverage and patient savings cards and i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	6/21/2011	worked pain management dept-saw dr shen, worked premier physicians office-dr elbadaway he is based at lutheran hospital
PPLPMDL0020000001	Akron	OH	44310	6/21/2011	I asked Dr. Cremer how long he typically expects his patients to stay on Butrans once it is prescribed to them. He said that he expects them to stay on it for some times unless there is an issue with coverage and the patient can no longer afford it.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	6/21/2011	I asked Dr. Cyndi how long she expected her [patients to stay on Butrans once she prescribed it to them and she said is all depends but until they feel better. I reinforced that this was a LAO so it is meant for a more chronic type of patients which she said she understood. I asked her if she had any of those patients coming in this week so she could continue to trial Butrans and she said she would keep it in mind.
PPLPMDL0020000001	Akron	OH	44312	6/21/2011	I asked Dr. Fouad why he does not feel confident prescribing Butrans at this point. He said that he feels that since most of his patients do not have insurance he likes to prescribe mostly generics.
PPLPMDL0020000001	Mayfield Heights	OH	44124	6/21/2011	Window call..... reviewed the Butrans indication and positioning with Barb and asked her to consider Butrans instead of starting patients on vicodin. She asked how many days the patch is good for. I explained the 7 day delivery and with proper application the patch stays on for the entire 7 days. Gave her a patient info guide which she said she would like at and talk to dr. dews.
PPLPMDL0020000001	Mayfield Hts	OH	44124	6/21/2011	Doc said he is still trying to prescribe Butrans but everyone requires a PA. I asked if he recalls which plans. He said he did not remember and that I should ask Denise. I explained the coverage with most commercial plans and BWC. SPOke to Denise who said that doc's scripts are requiring a PA. Gave her a formulary grid.
PPLPMDL0020000001	Cleveland	OH	44143	6/21/2011	I asked doc if he had a chance to reveilw the Butrans FPI I previous ly left. I reminded him of the once weekly application of analgesia in a CIII. He said he did not and that he does not have time. Nothing learned
PPLPMDL0020000001	Cleveland	OH	44130	6/21/2011	Spoke with Dr McBurney's MA, Sharon, who said he would not come back for breakfast. Introduced Butrans to her, delivering 5 core messages & alerting her to box warning. I asked if she thought Dr McBurney might be interested & she said he does treat a lot of patients who fit the indication & who may like a transdermal option that they only have to apply once a week. Reviewed managed care & savings cards with her & asked her to give Butrans information to Dr McBurney- she agreed to do this.
PPLPMDL0020000001	Mayfield Hts	OH	44094	6/21/2011	Reminded doc that Butrans is the first 7 day delivery of an analgesic, is a CIII. I asked him to thin of Butrans instead of starting patients on hydrocodone tablets ATC. Provided formulary grid and initiation guide
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/21/2011	I asked Dr. Pitt about his success with Butrans. He said that he had not yet heard back from his patient. I asked if he had similar patients coming in this week and asked him if it would be okay if I spoke with Liz and flagged their chart, he agreed.
PPLPMDL0020000001	Cleveland	OH	44130	6/21/2011	Spoke with Fran, MA, who worked with me to reschedule the lunch that they canceled. Reminded her of Butrans indication, delivery system, and patient type. She said she remembers thinking that Butrans sounded interesting when she first heard about it. I asked her to give Butrans information to Dr Rogers & she agreed to do this.
PPLPMDL0020000001	Cleveland	OH	44106	6/21/2011	worked pain management dept-see call note on dr.sahgal,dr.hayek is out of town for 2 weeks so i wont see him again until July.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	6/21/2011	I asked Dr. DiLauro if he felt comfortable identifying potential Butrans patients. She said she did but described a more severe type of patient that is most likely passed the point of Butrans. I showed her the initiation and titration guide and explained that Butrans had also been studied in opioid naive patients.
PPLPMDL0020000001	Munroe Falls	OH	44262	6/21/2011	I asked Dr Kolaszewski if she had reviewed the info I had left as promised and she said she had looked it over but had not yet prescribed Butrans. She said she had some patients and I reviewed titration with her again. She said she would keep it in mind.
PPLPMDL0020000001	Cleveland	OH	44195	6/21/2011	worked pain/anesthesia dept-had to leave Butrans fpi,initiation guide,patient information booklet and formulary grid for Dr.Vrooman,Dr.Katyal,Dr.Mekhail and Dr.Cheng as i couldnt see any of them. i also left each physician OxyContin fpi,conversion guide and formulary grid. all of the NP's and PA's were busy seeing patients and couldnt see me today, worked Rheumatology dept-left Butrans fpi,initiation guide,patient information booklet and business card for Dr.Calabrese,Dr.Long and Dr.Chatterjee - have to leave information at front desk and receptionist gives information to medical secretaries,if doctors are interested they will call me.
PPLPMDL0020000001	Mayfield Heights	OH	44124	6/21/2011	Quick call.....reminded doc of the 4 application sites for Butrans and how to apply to a clean dry site. She asked if there was anything new with Butrans. Told her not at the moment but I would keep her informed. I asked if she had any questions/concerns. She said no and everything is fine. Provided oxycontin savings cards.
PPLPMDL0020000001	Westlake	OH	44145	6/21/2011	We reviewed the key messages for Butrans. Dr said that he does not like to prescribe opioids when he can help it, but he does treat chronic pain and has patients that could benefit from Butrans. I asked if he could think of any specific patients and he said he has one patient who he may try. The patient is on 30mg of oxycodone per day and we discussed the initiation guide and how to taper the patient down and initiate Butrans. We discussed starting patients on Butrans who are on tramadol or low dose hydrocodone. Dr said that he will try it, as long as he can get it covered on managed care. We reviewed the managed care and savings cards for Butrans. We reviewed the conversion guide for OxyContin and as a option when Butrans may not provide adequate analgesia. He said he does have a handful of patients on OxyContin and will prescribe it.(Dr lives in Avon Lake, 4 kids,
PPLPMDL0020000001	Parma	OH	44129	6/21/2011	Dr Ortega said that he had a male patient who discontinued Butrans because he "didn't like it". I asked him to clarify & he said that the patient just said he "didn't like it" & wanted to just take Percocet. He also said he has other patients who are doing great on Butrans. He said that one patient had surgery to correct the problem that originally contributed to his pain & he asked me how he should take that patient off Butrans when the time comes. I told him he should taper the patient gradually from Butrans & then give them short-acting opioids if he deems that appropriate for the patient & referenced FPI 2.5. I told him we have no specific information on exact doses for tapering. He asked how other physicians are doing it. I told him I have no information on that. He said that he does like to gradually take all his patients off opioids as part of his treatment plan. He said he will be considering more patients for Butrans.
PPLPMDL0020000001	Independence	OH	44131	6/21/2011	Dr Sundaram said that he has not had any more Butrans patients & has not had a patient with chronic pain. I asked him what usually triggers him to switch a patient from short-acting around-the-clock opioids to a long-acting option like Butrans or OxyContin. He said that unfortunately, narcotic prescriptions are very patient-driven. I asked him what he meant exactly. He said that usually he will only switch a patient from one drug to another if they ask him to. He said that typically, patients are "conveniently allergic" to the pain medications that they don't want & "can only tolerate" whichever one they want. Discussed OARRS with him. He said that he just signed up & has started using it & is glad he did. I agreed that this is a great way to protect his practice & screen patients. He said that many years ago, his prescription pad has been stolen by a patient so he always likes to be cautious.
PPLPMDL0020000001	Cleveland	OH	44109	6/22/2011	I talked to dr about 5 Butrans core messages,discussed appropriate patients to start on Butrans,dr never heard of Butrans but liked that it was transdermal and dosed once a week.i asked dr how she treated her patients chronic pain? dr said she gives patients tramadol or vicodin but doesnt like to treat chronic pain with acute pain medications so Butrans being a CII would be a good option as its long-acting and indicated for chronic pain.i asked dr to consider a few patients taking tramadol or vicodin,not controlled on their dosing regimen and consider Butrans,dr said she would and asked about insurance coverage.we discussed Butrans formulary coverage and patient savings cards.
PPLPMDL0020000001	Independence	OH	44131	6/22/2011	Spoke with Eckta, a floater pharmacist. She said this location does not have Butrans stocked & asked me about it. Reviewed with her indication, dosing, CII, abuse/addiction potential, & e-voucher program. Also discussed appropriate patient type/positioning. She said she thinks there is a place for Butrans as a long-acting CII & that a lot of patients might prefer a transdermal option over taking pills several times every day. She said she would leave the information for the regular pharmacist.
PPLPMDL0020000001	Westlake	OH	44145	6/22/2011	Quick call with Lisa and tech, we reviewed the medication guide for Butrans and she will make sure patients don't have any questions about how to apply. Reminder of the appropriate patients for Butrans and appropriate patients for OxyContin when Butrans may not provide adequate analgesia.
PPLPMDL0020000001	Cleveland	OH	44114	6/22/2011	dr said she has a few patients on Butrans that are doing well and are controlled and she is going to continue starting patients on Butrans.dr said she had a long day and still had more patients to see so she couldnt really discuss anything more with me today
PPLPMDL0020000001	Cleveland	OH	44109	6/22/2011	i talked to dr about Butrans 5 core messages,fpi,initiation guide and asked dr what were some features about Butrans that he liked? dr said he liked that Butrans was transdermal and a long-acting opioid.dr said its challenging to treat chronic pain with short-acting analgesics so he could see a place for Butrans in his practice.i asked dr if he has patients taking percocet daily that arent controlled and could benefit from Butrans? dr said yes and asked about insurance coverage,we discussed Butrans formulary coverage. i talked to dr about patients for OxyContin that he feels are appropriate,showed OxyContin conversion guide and discussed formulary coverage.
PPLPMDL0020000001	Cleveland	OH	44109	6/22/2011	i talked to dr about 5 Butrans core messages,fpi,initiation guide,patient information booklet and formulary coverage.dr said he has some chronic pain patients that could benefit from Butrans as he likes the once weekly dosing and transdermal delivery of Butrans.we talked about patients still taking immediate release opioid or non-opioid analgesics with Butrans and i showed Butrans fpi-maintenance of therapy section for discussion.i showed dr Butrans demo,carton for discussion of what Butrans looks like and i asked dr to consider a couple patients taking tramadol,vicodin or percocet that arent controlled and start them on Butrans.dr said he would do that and asked about insurance coverage.we talked about workers comp and commercial plan patients trying Butrans and discussed Butrans patient savings cards.i recommended Senokot-S
PPLPMDL0020000001	Akron	OH	44320	6/22/2011	I asked Dr. Duppstadt if she had any hesitations about prescribing Butrans for the appropriate patient. She said that she understands the patient but the patients she have in mind have state plans and can not get it covered. She said she will continue to keep it in mind for a patients that has coverage.
PPLPMDL0020000001	Parma	OH	44134	6/22/2011	I asked Dr Hernandez if he was still as positive & enthusiastic about Butrans as he was when he first started prescribing it. He said he is & that he actually just gave a patient a prescription yesterday for it. He went on to say that his patients really like it & he is confident in prescribing it. I reminded him that he has shared with me in the past that he typically prescribes Butrans for patients who are taking around-the-clock short-acting opioids & he agreed. I asked him what type or types of patients he would not consider for Butrans. He said that if someone is on Percocet or OxyContin or Opana, he would not switch them to Butrans because he would not expect Butrans to be effective for those patients. I showed initiation guide pg 6 & agreed that many patients fall out of the appropriate range of patients for Butrans but those on <40mg oxycodone per day may still be an option. He said he would think of doing this to see how it goes. Discussed OxyContin for appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44109	6/22/2011	I reviewed 5 Butrans core messages with dr,dr said he remembered Butrans and liked that it was a patch with once weekly dosing as he does have some chronic pain patients who arent controlled and could benefit from another option like Butrans.dr said he consults with pain or pm&r specialists,as it relates to chronic pain patients,so he would discuss patients narcotic use with them as their patients have to sign an opioid contract stating they will only see 1 dr for their opioid scripts.dr mentioned that he had a patient who dr greenwood,pm&r,was treating,and taking 2 percocet a day and not controlled,dr said Butrans would have been perfect for this patient.I told dr i work with dr greenwood too but if he could recommend Butrans to dr greenwood and other specialists,if appropriate,that would allow him to get some clinical experience with Butrans.dr said that was good,i gave Butrans initiation guide and formulary grid,discussed OxyContin appropriate patients and insurance coverage.
PPLPMDL0020000001	Independence	OH	44131	6/22/2011	Quick call- Dr Jack stopped briefly before going into a patient room & said that he has not yet prescribed Butrans but that I should not "give up" on him. Spoke with Maria & reviewed Butrans appropriate patient type. She said again that he has a lot of patients who fit the profile & said I just have to keep reminding him. I asked her how long it usually takes him to start prescribing something new to him & she said sometimes a year.
PPLPMDL0020000001	Garfield Heights	OH	44125	6/22/2011	Spoke with Heather (pharmacist) who said she has not seen any Butrans activity. Reviewed appropriate patient type, dosing, & managed care/savings cards. She said thinks it is a great idea. I asked who in the area comes to mind as having a lot of patients like that & she suggested the Rutkowski's. She also said that many of the oncologists prescribe chronic pain medications. She said she would try to think of more doctors to tell me next time. Discussed OxyContin q12h for patients beyond Butrans & asked her if she wanted savings cards. She said she just had a patient yesterday who pays cash for his OxyContin every month who would be thrilled with a savings card. Gave her a package & she was very grateful.
PPLPMDL0020000001					

	Independence	OH	44131	6/22/2011	Caught Dr Rob in the hallway & told him I just had one quick question for him. I asked him if he sees a place at all for Butrans in his practice. He paused & looked through the initiation guide I handed him. I reminded him of Butrans' once-weekly dosing in a transdermal system of buprenorphine & reminded him of the appropriate patient type. He said he does think it is something he can use. I asked him if he would use Butrans, as a long-acting CII, in place of Vicodin for appropriate patients who he is getting ready to start on it for a chronic condition, or after Vicodin, but before Percocet. He agreed that he could use it after Vicodin but before Percocet since it is the only long-acting CII option. Reminded him it does still carry abuse & addiction potential & he said he understands that. Also reminded him of OxyContin for appropriate patients beyond Butrans 20mcg.
PPLPMDL0020000001	Cleveland	OH	44109	6/22/2011	I talked to dr about 5 Butrans core messages,discussed appropriate patients for Butrans,dr said he has a lot of chronic pain patients and he will consult with pm&r and pain management to see what their recommendations are,but he likes that Butrans is transdermal and dosed once a week.dr asked if patients can still take their short-acting analgesics like vicodin or percocet,i showed dr Butrans fpi,maintenance of therapy section and confirmed that he can do that or give non-opioid medications with Butrans.dr asked if i had any clinical trials to show him? I showed dr clinical trials section in Butrans fpi and also referenced this information in Butrans visual aid.I asked dr if he had patients taking tramadol,vicodin or percocet,daily,but not controlled? dr said he did.i showed dr Butrans initiation guide,discussed proper tapering of short-acting opioids and initiation of Butrans.dr said he will try it in a few patients and see what happens.we discussed formulary coverage and where
PPLPMDL0020000001	Akron	OH	44320	6/22/2011	I talked with Dr. Bonyo about helping him identify a specific patient for Butrans. He was in a rush so I left the initiation guide for him. No new info learned.
PPLPMDL0020000001	Stow	OH	44224	6/22/2011	Spoke to Kim in prescriptions and she said she has personally not had to do any PAs with Butrans but one of the other girls may have. I said when she sees appropriate patient who she may see refills month after month if she would remind them and she said she would.
PPLPMDL0020000001	Westlake	OH	44145	6/22/2011	Quick call, I asked Dr about his success with Butrans. He said he thinks it is working well and he hasn't had many call backs. I asked if he would continue to prescribe and he agreed.
PPLPMDL0020000001	Cleveland	OH	44109	6/22/2011	dr came in to lunch quickly,i asked dr if she recalled anything about Butrans? dr said no,not really the information is sitting on my desk. dr said she started to look through the Butrans information as she thought it was something else,but it turned out not to be so she stopped reading about Butrans.dr said she didnt need another Butrans fpi or initiation guide as she has it and she will read it. dr left to go to a meeting after those comments.
PPLPMDL0020000001	Copley	OH	44321	6/22/2011	Dr. Machado said that he had started 2 patients on Butrans and both, to his knowledge, were doing well. He said both patients were previously on SAO's. I asked if he had similar patients coming in this week that could also benefit from therapy and he said he would keep it in mind.
PPLPMDL0020000001	Cleveland	OH	44114	6/22/2011	dr said he's having success with patients getting started on Butrans but 1 patient did say that Butrans fell off and didnt want to take it anymore.i asked dr to show patients the Butrans patient information booklet,with the section on first aid tape or dressings over Butrans,if there are issues with patients not adhering to the skin.dr said he knows thats there and they do give the booklets to patients but he thinks this patient just didnt want to stay on Butrans and only wanted his pills.i asked dr who was appropriate in his mind,to start on Butrans? dr said patients with intermediate pain,taking vicodin or percocet and not controlled,thats who he thinks should be started on Butrans.I told dr that was great he was considering those patients,thinking earlier and dr said they only had 1 instance of insurance not covering Butrans but for the most part its been going through on plans.<font color=blue>-<b>CHUDAKOB added notes on 06/30/2011</b>-</font>Please make sure you call this in as it looks like you didn't report it.
PPLPMDL0020000001	Lakewood	OH	44107	6/22/2011	Quick follow up, I reviewed our last conversation when the Dr said that he thinks Butrans would be a good option instead of increasing their dose of short acting. I asked him if he would start a pateint like that today and he agreed. I reminded him and the staff to focus on commercial insurance with the savings card.
PPLPMDL0020000001	Cleveland	OH	44109	6/22/2011	I talked to dr about Butrans 5 core messages,dr said he likes that Butrans is transdermal and is a patch dosed once a week.dr said he is finishing residency and going to start his fellowship in geriatrics next week.dr said he knows the attendings write a lot of short-acting analgesics like tramadol,vicodin and percocet for their chronic pain patients.dr said Butrans could be an option,even with it being a long-acting opioid,but did Medicare cover Butrans? I told dr no,most medicare plans wont cover Butrans so he could focus on commercial or BWC patients,dr said ok.I asked dr to think of a few patients with commercial or BWC insurance that are taking the short-acting opioids daily,but not controlled,and start them on Butrans.dr said he'll consider it for sure as he thinks this is a good medication for some patients.I recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44105	6/22/2011	I talked to dr about Butrans 5 core messages,dr said Butrans being a CII was important and significant to him so that he can call in refills.dr said he liked that Butrans was transdermal and once weekly dosing was easier for some patients.I asked dr if he had chronic pain patients that were taking short-acting opioids,daily,but not controlled? dr said he has a few,but doesnt prescribe a lot of narcotics.dr said he'll take the information and read it and if he has any patients in mind he'll consider Butrans.dr asked about insurance coverage so I showed dr Butrans formulary grid.
PPLPMDL0020000001	Warrensville Heights	OH	44122	6/22/2011	Spoke with Debbie (nurse) who said that they did not need any Butrans or OxyContin savings cards. She said that their department remains in turmoil & changes keep coming. She told me again that they have fewer members of staff than ever which causes those left to do extra work to make up for that. She said as a result, they are still not seeing reps & that the policy remains. She said to keep checking back as things can change rapidly there.
PPLPMDL0020000001	Cleveland	OH	44109	6/22/2011	dr said she didnt remember much about Butrans other than it was transdermal.I reviewed 5 Butrans core messages with dr,dr said she likes the once weekly dosing and does treat a lot of chronic pain patients with short-acting analgesics like vicodin and percocet and some patients arent controlled on these medications.I asked dr if she would consider Butrans for those patients taking vicodin or percocet,not controlled? dr said she might and that she would take the information and read it over and think about it as she had to go.I gave dr Butrans fpi and initiation guide.I recommended Senokot-5
PPLPMDL0020000001	Independence	OH	44131	6/22/2011	I reminded Dr Trickett of our lunch conversation when she was telling me how time-consuming it can be to explain new medications to patients when prescribing a medication for the first time. I handed her a Butrans patient information guide & showed her how it explains general information, application, & disposal. I asked her if she thought this would be a useful tool for her to help her initiate treatment with Butrans. She said she did think it would help & that she thinks that her patients would take the time to read through it. She thanked me & walked away.
PPLPMDL0020000001	Bedford	OH	44146	6/22/2011	Spoke with Jessica, a new pharmacist at this location. Inquired about Butrans activity & stocking. She said that they do have it stocked & she has noticed at least one open carton, so they must have dispensed some, although she said she herself has not dispensed any. Reviewed Butrans indication, dosing, delivery system & also went over e-voucher. Discussed OxyContin savings cards although they do not stock it there.
PPLPMDL0020000001	Warrensville Heights	OH	44122	6/22/2011	Spoke with Michelle, Dr Zivic's MA, who said he "did not show up" for work today. Let her know I have been trying to reach him for a few months & asked how I can catch him best. She looked at his schedule & she said that he will not be back in the office until after the 27th of July. She suggested I come back then. I discussed Butrans & OxyContin savings cards with her & reviewed eligibility. She said she has enough of both type of savings cards.
PPLPMDL0020000001	Akron	OH	44333	6/22/2011	Dr. Brown said she has now started many patients on Butrans and is having much success with Butrans. She said she had to recently take a patient off because of severe nausea and headache. I asked how long the patient wore the patch and she said they could only tolerate for 3 hours. However that is the only patient that did not have a positive experience.
PPLPMDL0020000001	Cleveland	OH	44135	6/22/2011	Spoke with Megan, we reviewed the medication guide for Butrans and asked her to hand them out to the patients. We discussed steady state for Butrans and that patients should not titrate until 3 days. We reviewed appropriate apptelns for OxyContin when Butrans may not provide adequate analgesia.
PPLPMDL0020000001	Cleveland	OH	44109	6/22/2011	dr said she remembered that Butrans was a transdermal medication and dosed once a week which she likes but she has majority of cash paying patients in hospital and Butrans wouldnt be an option for them.dr asked about insurance coverage,I talked to dr about commercial plan patients and BWC patients trying Butrans and dr said she only has a few but dr said she does like OxyContin as a long-acting opioid,its covered on hospital formulary and wanted to know about OxyContin savings cards.I explained OxyContin savings cards program to dr and gave dr OxyContin conversion guide.I recommended SEnokot-5
PPLPMDL0020000001	Bedford	OH	44146	6/22/2011	I showed Dr Moufawad Butrans FPI 2.4 & told him that this was his proof & evidence that immediate release opioid or non-opioid analgesics can be used with Butrans. He told me he already knows this, it is the Medical Board who is confused & "uneducated". I told him I know that he knows it, but wanted to provide him with the FPI in the event that he is questioned again or if he wants to show the Medical Board that he is prescribing correctly. I told him that I could either give him the number to call Medical Services to make them aware of this or that I could call them with him. He said he would like me to be there when he calls. He asked me to come back Monday between 12-12:30 to call Medical Services to discuss this issue with them.
PPLPMDL0020000001	Cleveland	OH	44195	6/23/2011	I saw dr in hall,brief conversation,but I talked to dr about Butrans 5 core messages and asked what were the features of Butrans that were important to him? dr said he started 1 patient on Butrans because he heard of it through his colleagues and he liked that it was transdermal delivery and once weekly dosing.I asked dr how patient is doing and he said patients doing fine on butrans.I asked dr to consider patients taking percocet,daily,that arent controlled and asking for something else,and start them on Butrans.I showed Butrans visual aid and initiation guide-appropriate patients sections for discussion.dr said he will keep Butrans in mind and had to go
PPLPMDL0020000001	Cleveland	OH	44195	6/23/2011	I reviewed 5 Butrans core messages with Anne,NP, and asked her what were the top 3 features of Butrans she felt were important? Anne said she likes the transdermal delivery of Butrans and once weekly dosing but she hasn't had any patients complain to her that their medications not working.I asked Anne if any patients say their tramadol isnt lasting long enough or controlling their pain? Anne said once in awhile she hears that and does consider medication changes at that time.I asked Anne to consider Butrans,for those patients taking tramadol daily and not controlled.Anne said she'll consider it.I showed Anne Butrans visual aid,appropriate patients section and initiation guide for this discussion.We discussed Butrans formulary coverage and I recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44102	6/23/2011	I talked to Nagla,PA,about 5 Butrans core messages.Nagla said she started a patient on Butrans,that was with Dr.Celeste in this office,patient was resistant at first as she was taking percocet and not controlled and wanted more pills.Nagla said she and dr celeste told this patient they werent giving more pills and the only option she had was to try Butrans.patient agreed to try Butrans and has been doing very well on the medication.I asked Nagla to consider patients taking tramadol or vicodin,daily,that arent controlled and asking for something different,to start them on Butrans.Nagla agreed and said she will seriously consider Butrans for more patients as she likes the once weekly dosing and transdermal delivery of Butrans.we discussed Butrans formulary coverage and I recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44195	6/23/2011	I reviewed 5 Butrans core messages with Kathy,NP,asked her what were the top 3 features of Butrans that she felt were important? Kathy said once weekly dosing of Butrans and the fact Butrans is a CII,so she can prescribe Butrans and call in refills.Kathy said her biggest challenge has been that both doctors-dr minzter and dr mekhail havent felt Butrans was appropriate for anyone and she treats all of their patients.I asked Kathy if she had patients taking tramadol,on a daily basis,that werent controlled? Kathy said yes she see's them all the time and both physicians prefer if she increases dosing interval of tramadol or dosage strength.I asked Kathy and showed her Butrans visual aid,if she could take 2 patients not controlled on tramadol and start them on Butrans or at least discuss with both physicians? Kathy said she will do that but cant promise anything. we discussed Butrans formulary coverage.I recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44109	6/23/2011	I talked to Erin,Pharmacist,about 5 Butrans core messages and asked her what were the top 3 features of Butrans she thought were most important? Erin said transdermal delivery and once weekly dosing were the 2 features she liked most about Butrans.Erin said they have seen a few of dr nickels patients get Butrans scripts here so she knows he's prescribing.I asked Erin to give patients Butrans patient information booklet and focus discussion on application/rotation of Butrans,Erin said she would do that as they have been doing that recently.we discussed formulary coverage for Butrans and patient savings cards and I recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44102	6/23/2011	dr said he remembered Butrans was transdermal and a patch but that was it,I reviewed 5 Butrans core messages with dr,dr said once weekly dosing was a benefit and he liked that Butrans was a CII so he can call in refills.I asked dr if he see's patients on tramadol,vicodin or percocet,dosing daily but not controlled? dr said almost all of their patients are like that,so he thinks there's a place for Butrans in their practice.dr said he is new to practice and that if patients are taking 40mg of hydrocodone or oxycodone combis,he will refer them to Cleveland Clinic pain management as he doesnt want to deal with them and there's nothing more he can do for these patients.dr said he will consider a few patients, that are taking less than 15mg or 15-30mg of short-acting opioids,to start on Butrans.dr asked about insurance coverage,we discussed Butrans formulary grid and I asked dr to focus on commercial or BWC patients.I recommended Senokot-5
PPLPMDL0020000001	Parma	OH	44129	6/23/2011	Quick call- Dr Gigliotti said he was running way behind this morning so he did not have time to talk. He said that he has not found a Butrans patient yet & asked that I come back later to discuss it further. Spoke with Jazz & reviewed Butrans appropriate patient type & savings cards for Butrans & OxyContin.
PPLPMDL0020000001	Cleveland	OH	44104	6/23/2011	I reviewed 5 Butrans core messages with dr,dr said he likes Butrans being transdermal and once weekly dosing but he only has a few commercial plan patients that he could consider starting on Butrans and Butrans hasn't been on his mind as majority of patients are medicaid.dr said he writes a lot of OxyContin because medicaid covers it so its easy for him.dr said he likes long-acting opioids and would prescribe Butrans if it was available on Medicaid without a prior authorization.we talked about appropriate patients for OxyContin,showed flashcard with this information,discussed 7 tablet strengths and OxyContin formulary coverage.dr said he didnt need savings cards as majority are medicaid patients for OxyContin.I recommended SEnokot-5

PPLPMDL0020000001	Parma	OH	44134	6/23/2011	Spoke with Linda (MA) who said Dr Mandat would be out of the office all day & would return Monday afternoon. I reminded her of my previous visit when I left savings cards for Butrans & Senokot-S & Colace samples. She said she did not know if he has gone through any of the cards or samples. I reviewed Butrans appropriate patient type & delivery system with her & asked her to give Dr Mandat Butrans information. She agreed & asked me to come back next week to try to catch him for a discussion.
	Parma	OH	44129	6/23/2011	Dr Paat said that he has not been remembering Butrans but that he does want to use it. He looked at the initiation guide pg 6 & asked me how to titrate & start a patient. I asked him to show me which range of current opioids his average patient who he might switch to Butrans would be on. He said the column of <15mg hydrocodone. Discussed starting that patient on 5mcg dose & the ability to titrate every 3 days if necessary. Reminded him that he has said that he liked the once-a-week dosing & he said he does like that feature. He said he is going to try to use it. Spoke with Shari & asked her to try to help Dr Paat remember Butrans when she sees or takes a call from an appropriate patient.<font color=
PPLPMDL0020000001	Maple Heights	OH	44137	6/23/2011	Introduced Butrans to Dr Dale, delivering 5 core messages & alerting him on box warning & abuse/addiction potential. I asked Dr Dale if he saw a place for Butrans. He said he does. I showed initiation guide pg 6 & discussed initiating treatment in appropriate patients who were not well controlled on NSAID's/COX-2's & patients already on opioids. He said in general, he likes transdermal products & feels they are effective because they are constantly released instead of having plasma levels increase & decrease with each short-acting dose. I asked what usually causes him to switch a patient's pain medication & he said usually if there is a side effect or tolerance issue he will switch. Discussed Butrans as only CIII long-acting. He said he likes this feature & will consider using in patients already on opioids. Also discussed OxyContin q12h for appropriate patients beyond Butrans 20mcg & recommended Senokot-S for opioid-induced constipation.
PPLPMDL0020000001	Parma	OH	44134	6/23/2011	Spoke with Allene who said she has not seen any Butrans activity since the initial script. She said she knows that patient "didn't like it" & discontinued. I asked her if she knew what the patient didn't like (ie if it made her not feel well, didn't relieve the pain, had trouble with transdermal) but she did not know because another pharmacist was the one who spoke with the patient. Also discussed OxyContin savings cards. Heath, a Pharm D student was shadowing her for the day & she asked me to tell him about Butrans. Reviewed with him indication, dosing, appropriate patient type, box warning, CIII.<font color=
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	6/23/2011	Dr. Azem said she now had 2 patients on Butrans and has not heard back from either and assumes therapy is going good. She said she had many other patients that she thinks will benefit from the LA therapy the Butrans offers and said she would prefer it over SAO's.
PPLPMDL0020000001	Akron	OH	44319	6/23/2011	Spoke with Gretchen and explained what I had been talking to Dr. Wu about. She agreed that he had patients who are on SAO's that would absolutely benefit from Butrans therapy.
PPLPMDL0020000001	Cleveland	OH	44102	6/23/2011	I talked to Brian, Pharmacy technician, as Vince, Pharmacist, wasn't available to talk. I discussed 5 Butrans core messages with Brian and asked him what features of Butrans he felt were important? Brian said once weekly dosing of Butrans was easier for some patients and the fact its a patch is another benefit in his eyes. Brian said they have recommended Butrans to some patients by giving them Butrans patient information booklets but he's not sure about any scripts that have come through here, he doesn't think anyone has prescribed yet but told me to check back with Vince, Pharmacist, next time I am in the area. I gave Brian Butrans initiation guide and formulary grid and we discussed Butrans insurance coverage. I recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44121	6/23/2011	Window call....reviewed the Butrans indication and once weekly application in a 7 day delivery. Reviewed commercial coverage and provided formulary grid.
PPLPMDL0020000001	Cleveland	OH	44113	6/23/2011	I talked to Mike, Pharmacy Manager about Butrans 5 core messages as he was asking if anyone was writing Butrans yet we talked about some physicians prescribing like Dr Nickels as he is at Grace Hospital with Mike. Mike said Butrans is a great medication being transdermal and the once weekly dosing is appealing to many patients, we talked about Butrans insurance coverage and I showed Mike Butrans formulary grid. I gave Mike the brochure/flyer for medical education resources and told him to log onto site and register if he would like some educational materials and also to see what certified medical education classes are there.
PPLPMDL0020000001	Cleveland Heights	OH	44118	6/23/2011	Opened the call discussing the Butrans indication and the CIII status available in a 7 day delivery system. I asked doc if a once a week dose was a benefit to his patients. He said it could be and he asked for clarity on the frequency of dosing. I explained that it is a once weekly patch which may be appropriate instead of starting patients on hydrocodone ATC. He asked me to leave literature on his desk. Reminded him of the oxycontin indication and provided savings cards.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	6/23/2011	Re-introduced Butrans and FPI to Dr. Hegde. She said she thought she had some patients that could benefit from Butrans but felt more comfortable referring patients to Pain Specialists once they became more chronic.
PPLPMDL0020000001	Cleveland	OH	44130	6/23/2011	met with Melenie Petropoulos and Tom Roth. Melenie is originally from Pittsburgh. She is a Steelers fan. Tom is a Browns fan. Gave updated OxyContin PI and discussed minimal OxyContin generics left on market. Reviewed Butrans FPI and updated on how the product is doing. Gave savings card info. They are with Relay Health. Went over Med Ed Resources guide and other new educational materials. Tom will put the Med Ed Resources web site on their intranet for access by their pharmacists. Melenie also said they would inform pharmacists about the upcoming webinar in August. Discussed our laxative card to pharmacists about the computer. They will not be attending NACDS P&T Meeting in Boston in August as they are putting in a new pharmacy system then.
PPLPMDL0020000001	Maple Heights	OH	44137	6/23/2011	Quick call- Dr Mary said she was buried in paperwork & would not be able to stay for lunch. Butrans indication & once-weekly dosing option messaging. Spoke with Dana, her MA & went over Butrans dosing, delivery system, & savings cards for eligible patients. She said she would give Dr Shenigo the information & remind her.
PPLPMDL0020000001	Cleveland	OH	44130	6/23/2011	I reminded Dr Kansal of our previous discussion of Butrans & how he told me that he would be willing to try it on a patient who was taking short-acting around-the-clock opioids for a chronic condition who had commercial insurance. I asked him what his experience has been with doing that. He told me he has tried it on one person so far. I asked him to tell me about the patient. He said the patient is a young male who "is a mess" & has tried "every" pain medication available & is still not getting relief. He said he started him on 10mcg & that he just titrated the patient up to 20mcg. I told him it sounded like he was on the right track & asked if he would try additional patients, ie some who are not some of his worst-case scenario type patients. He said he plans to do this. He said he likes that patients can transition "smoother" from short-acting to Butrans by taking supplemental analgesia if needed as Butrans gets to working levels. Reminder of OxyContin for patients beyond Butrans
PPLPMDL0020000001	Barberton	OH	44203	6/23/2011	Dr. Patel said that he was having a lot of success with Butrans and has focused on prescribing it to patients who are already on opioid therapy. He said he feels most comfortable starting patients on the 5 mcg patch in which I explained initiation showing him that in some case the 10 mcg would be more appropriate. He said he would rather titrate them up to the 10 mcg patch after making sure they tolerate it well.
PPLPMDL0020000001	Akron	OH	44319	6/23/2011	Dr. Wu asked again about initiation which I quickly showed him using the titration guide. I explained the strengths and that the 20 mcg was only a titration dose.
PPLPMDL0020000001	Mayfield Heights	OH	44124	6/23/2011	I opened the call discussing the 5 Butrans selling messages. I asked doc where she might prescribe Butrans. She said maybe for patients that can't tolerate hydrocodone or after Ultram. I told her that it is a perfect place for Butrans as long as the patient meets the indication. Reviewed the initiation dosing and the commercial coverage. Provided formulary grid.
PPLPMDL0020000001	Cleveland	OH	44120	6/23/2011	I talked to Stewart, Narcotics Buyer/Pharmacist, about Butrans stocking and asked if he has seen anymore scripts for Butrans? Stewart said yes, he saw 1 of dr rosenfield's patients and dr sahal's patients. We talked about 5 Butrans core selling messages and I asked Stewart what he felt was most important about Butrans. Stewart said the transdermal delivery of Butrans and once weekly dosing are 2 features he thinks are important. I asked Stewart if he would focus on application/rotation of Butrans, with patients he see's, showing them the Butrans patient information booklet? Stewart said he will do that and has been giving the booklets to patients. I asked if Stewart has recommended Butrans to any patients? Stewart said he has told a few patients to speak with their doctors about Butrans because their short-acting opioids weren't controlling their pain and they wanted
PPLPMDL0020000001	Mayfield Heights	OH	44124	6/23/2011	Opened the call discussing the 5 selling messages of Butrans. He said he is going to try it - its just hard to remember something new. I reminded him to think of Butrans after tramadol or before going to hydrocodone. I asked him to prescribe for commercially insured patients.
PPLPMDL0020000001	Highland Heights	OH	44143	6/23/2011	Quick call.....Reminded doc of the appropriate Butrans patients - after tramadol failures or those on low dose short acting. I asked if he needed any savings cards. He did not know but Marianne confirmed that they still have some. Gave formulary grid reminders for oxycontin and Butrans
PPLPMDL0020000001	South Euclid	OH	44121	6/23/2011	Window call....reviewed he Butrans indication and other selling messages. Provided formulary grid and initiation guide. Nothing learned.
PPLPMDL0020000001	Uniontown	OH	44685	6/23/2011	I asked Dr. Stetler about his success with Butrans. He said it seems patients were having success and liked the therapy. I showed him the disposal unit since that was a concern on my last visit.
PPLPMDL0020000001	Cleveland	OH	44109	6/24/2011	I reviewed 5 Butrans core messages with dr and asked dr what were some features of Butrans that dr liked? dr said he likes that Butrans is a patch and once weekly dosing is easy for some patients. dr said he hasn't had any patients complain of their current dosing regimen so he hasn't considered Butrans. I showed dr Butrans visual aid, appropriate patients and asked dr to think of 2 patients taking tramadol daily, that aren't controlled, instead of refilling their tramadol, start them on Butrans? dr said he will if patients are open to wearing a patch. I showed dr Butrans fpi, maintenance of therapy section noting immediate release opioids or non-opioid analgesics can be used concurrently with Butrans, dr said ok that might help when he's talking to some patients who still want their pills every month. We discussed Butrans formulary coverage and I recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	6/24/2011	I reviewed 5 Butrans core messages with dr, dr said he forgot about Butrans and hasn't started anyone. dr wanted to know who covered Butrans and did Medicaid cover Butrans? We discussed Butrans formulary coverage and I asked dr to put that aside for the moment so we could discuss appropriate patients for Butrans. I asked dr what features of Butrans did he like? dr said he likes that Butrans is a patch, once weekly dosing and its a CIII so he can call in refills. I asked dr if he had patients taking tramadol daily, that weren't controlled and ask him for something else? dr said yes that happens a lot. I showed dr Butrans visual aid, appropriate patients section, and said for those patients asking for something else, why not try Butrans? dr said he will try it in a few patients. I showed dr Butrans patient information booklet and asked him to focus patient discussion on application and rotation of Butrans, dr agreed. I recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	6/24/2011	I reviewed 5 Butrans core messages with dr and asked her what she liked about Butrans? dr said she keeps forgetting about Butrans but she likes that its a patch, once weekly dosing is easier for some patients and Butrans is a CIII so they can call in refills which is easier for her and her staff. I asked dr if she's had any patients taking percocet daily, that aren't controlled? dr said she hasn't heard any patients complain to her recently but it does happen occasionally where patients want more pills or something different than what they are taking. I showed dr Butrans visual aid, appropriate patients section and asked dr to think of 2 patients taking percocet every day, but not controlled, to start them on Butrans. dr said she will if patients are willing to wear a patch. We talked about patients still taking immediate-release opioids with Butrans, if dr deems appropriate. I showed Butrans fpi with this information. We discussed Butrans formulary coverage. I recommended Senokot-S
PPLPMDL0020000001	Woodmere	OH	44122	6/24/2011	I spoke with a technician who said that the pharmacists were not available to see me today. Reviewed Butrans dosing availability & delivery system & savings cards for Butrans & OxyContin. Also reminded her of eligibility requirements for savings programs (ie patients cannot use them if they have any type of government insurance like Medicaid or Medicare.) She said she would give my card & information to Angie.
PPLPMDL0020000001	Cleveland	OH	44111	6/24/2011	Spoke with John. We reviewed the Butrans patient medication guide and how to instruct patients. We reviewed state in 3 days and that patients should wait 3 days to titrate. We discussed managed care for Butrans and OxyContin.
PPLPMDL0020000001	Maple Heights	OH	44137	6/24/2011	Quick call as I was told this was not a good time. Reviewed with the technician Butrans & OxyContin savings cards & eligibility requirements. I asked her to give my card & Butrans information to Kim- she agreed to do this & said to come back another time when they are not so busy.
PPLPMDL0020000001	Cleveland	OH	44113	6/24/2011	I reviewed 5 Butrans core messages with dr, dr said he hasn't thought about Butrans and only remembered it was a long-acting opioid. I asked dr what features of Butrans were important to him. dr said he liked that Butrans was transdermal, with once weekly dosing and he was surprised to hear that it was a CIII medication. I asked dr if that was a good thing, being a CIII? dr said yes because its easier to call in refills. I showed dr Butrans visual aid, appropriate patients section and discussed patients taking tramadol or vicodin every day that aren't controlled and asking for something different, that's where he can consider Butrans. dr said he has a lot of chronic pain patients taking opioids every day and its challenging to treat their pain so he likes the idea of a long-acting opioid for some patients. dr said he's not sure if patients will want to stop taking their pills and wear a patch. I showed dr maintenance of therapy section, butrans fpi, noting use of immediate release opioids or non-opioid
PPLPMDL0020000001					

PPLPMDL0020000001	Cleveland	OH	44103	6/24/2011	i talked to Dave, Pharmacy manager, briefly about 5 Butrans core messages. Dave said they have seen a few scripts for Butrans but he didn't have time to look and see who they were from but he knows they were out of the Cleveland clinic. I asked Dave what were some features of Butrans that he liked? Dave said Butrans being transdermal and dosed once a week are 2 features he likes. I asked Dave to give patients the Butrans patient information booklet, focus his discussions with them on application and rotation of Butrans, when picking up their scripts, Dave said he would do that. We briefly talked about appropriate patients for OxyContin, showed flashcard with this information, gave Dave OxyContin conversion guide and showed him OxyContin formulary grid. I recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44114	6/24/2011	I talked to Laura, Pharmacist, about Butrans stocking and if she's seen any scripts? Laura said she's not had any Butrans scripts yet and won't order Butrans until she does. I reviewed 5 Butrans core messages with Laura and asked her what she felt were the most important features of Butrans? Laura said she likes that Butrans is a patch and dosed once a week. I asked Laura if she could give patients the Butrans patient information booklet, if they are taking short-acting opioids every day and not controlled, so that patients can talk to their doctors? Laura said she will do that if patients say anything to her. I discussed OxyContin stocking, appropriate patients (showed flashcard with this information) and gave Laura OxyContin conversion guide and formulary grid. I recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	6/24/2011	I reviewed 5 Butrans core messages with Dr. J. asked Dr. what were the important features of Butrans? Dr. said he liked that Butrans was transdermal and once weekly dosing is much easier for some patients. Dr. said majority of his patients are controlled on their tramadol which is what he prescribes the most and he has patients doing physical therapy, so there's no need to add Butrans right now. I showed Dr. Butrans visual aid, appropriate patients section, discussed tramadol patients who are taking tramadol every day and not controlled and asking for something different, to consider Butrans for them. Dr. said he will keep it in mind and we discussed Butrans formulary coverage. I recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44102	6/24/2011	I reviewed 5 Butrans core messages with Dr. Dr. said she knows Butrans is an option but her biggest challenge is that she doesn't prescribe long-acting opioids so she can't get prior authorization for Medicaid patients to try Butrans. I asked Dr. if she had any commercial plan patients, where she could try Butrans in them? Dr. said a couple but not many, majority of practice is Medicaid and Medicare. Dr. said she likes that Butrans is a patch and dosed once a week and would prefer to give her patients Butrans instead of all the pills she prescribes monthly for patients however with Medicaid prior authorization requirements for Butrans as they are, it'll be tough for her to start anyone. I showed Dr. Butrans visual aid for our discussion on appropriate patients, if she has any commercial plan patients she feels are appropriate for Butrans and I showed Dr. Butrans formulary grid. I recommended
PPLPMDL0020000001	Cleveland	OH	44130	6/24/2011	Dr. Diab said that Butrans 5mcg "doesn't work". I asked him to clarify. He said that he titrated one patient to the 10mcg & 2 patients did not want to try a higher dose, they wanted to discontinue. He also said that insurance did not cover Butrans for two other patients. Reviewed managed care & reminded him of commercial coverage, which he said he remembers now. I asked how his experience thus far would influence his future prescribing of Butrans. He said he still is doing to prescribe it for patients because he likes that it can be refilled & likes having "a different option" for patients. Also reminded him of OxyContin q12h for appropriate patients beyond Butrans 20mcg. He promised he would not give up on Butrans just like I have not given up on coming in frequently to see him.
PPLPMDL0020000001	Fairlawn	OH	44333	6/24/2011	Dr. Parisi said that he had success with Butrans and will continue to use it in appropriate patients. I asked him which of his patients would benefit most from therapy and he said patients who were failing on a low dose SAO. I explained that was certainly an ideal patient.
PPLPMDL0020000001	Parma	OH	44129	6/24/2011	I reminded Dr. Roheny of our previous Butrans conversations & that he told me that he has not heard anything negative back so far. He said that he still has not heard anything from that patient, so either she is happy or she is not taking it. I asked him where he saw a place for Butrans & he said he does think it seems like a good option to have. I asked him if, then he plans to put more patients on it & he said he would. He then said that he heard a story on the news about someone who went into a pharmacy in New York & held them up at gunpoint & asked them for OxyContin. I told him I had not heard of this & that it is unfortunate & tragic when events like this happen. I asked him if he would agree that when in the hands of appropriate, legitimate patients, OxyContin can be a good option. He said he guesses & then added that he forgot that I also sold OxyContin. He said that with him, I should probably focus on Butrans & then went into a room.
PPLPMDL0020000001	akron	OH	44333	6/24/2011	I asked Dr. Bashor if he had seen any patients that could benefit from Butrans therapy over the last few weeks. He said that in his practice he probably only has a handful of patients that had the right insurance since the patients he thinks would benefit from it are elderly. I asked if he would flag the few patients charts that could benefit AND have the right insurance. He told me to talk with Gretchen on my next visit.
PPLPMDL0020000001	Mogadore	OH	44260	6/24/2011	I asked Dr. if we can talk about her patients who are no longer controlled on NSAIDs or Tramadol who would benefit from Butrans and she said she has not written Butrans, she has forgotten about it. She said she has a good amount of patients on Vicodin but not many new patients. She asked how it is initiated and we reviewed that and she said he would be more likely to write it in patients on Tramadol, she said she would give it a try.
PPLPMDL0020000001	Cleveland	OH	44130	6/24/2011	Spoke with Dave & asked him if he had ordered Butrans per our last discussion. He said that he ordered & has one box of 10mcg in stock & added that he has not seen a prescription yet. Discussed with him the Butrans patient type I am discussing with physicians (ie patients taking Vicodin or tramadol every day for chronic conditions). Also reviewed e-voucher & asked him if they needed any OxyContin savings cards. He said he has enough & will keep his eye out for Butrans prescriptions.
PPLPMDL0020000001	Fairlawn	OH	44333	6/24/2011	I asked Dr. D'Onofrio if he was any closer to prescribing Butrans and he said he was. We talked about specific patients that may be potential candidates for therapy and I asked if he would consider flagging their charts so when he is comfortable prescribing he would remember those patients and he agreed.
PPLPMDL0020000001	Mogadore	OH	44260	6/24/2011	Joe said he has not prescribed Butrans simply because he has forgotten and he has tried to cut down on writing chronic pain medicine. HE said he likes this because it is schedule 3 and it is once a week. HE asked what the coverage is and we reviewed managed care coverage. HE said he thinks he has some patients who may benefit.
PPLPMDL0020000001	Cleveland	OH	44111	6/24/2011	Spoke with Katie tech, we reviewed Butrans patient medication guide and I asked if she would put them with the medication. We reviewed the savings cards for Butrans and OxyContin and they do have the e-voucher system.
PPLPMDL0020000001	Copley	OH	44321	6/24/2011	I asked Dr. Hein about his success with Butrans on the patients he had committed to trialing. He said he had not tried it because the patients preferred to stay on their oral medications. I asked if he thought that was the best therapy? He said "we'll see" and walked away.
PPLPMDL0020000001	Lyndhurst	OH	44124	6/24/2011	Quick call....opened the call discussing patients that he is considering placing on hydrocodone. He said he tried Butrans. I asked him for patient feedback. He said it worked fine. Nothing else learned as he walked away. Let him know I was leaving a formulary coverage reminder and an dosing guide.
PPLPMDL0020000001	Lyndhurst	OH	44124	6/24/2011	I discussed the Butrans indication, 7 day delivery of analgesia, once weekly dosing and positioning - before going to hydrocodone. I asked her if she sees any merit to such a product for her patients. She said she does not really get into treating too much pain. She does not have those chronic patients. I let her know that Butrans is a CII which means it can be called in or refilled.
PPLPMDL0020000001	Fairlawn	OH	44333	6/24/2011	I asked Dr. Lefkowitz if he thought he had any patients that could benefit from Butrans therapy and he said no. I thanked him for his OxyContin business. No new info learned.
PPLPMDL0020000001	Fairlawn	OH	44333	6/24/2011	Dr. Lefton said that he very rarely treats chronic pain but in the event that a patients required more than a SAO would prescribe Butrans. He said he liked that it was a schedule 3 product and a LAO.
PPLPMDL0020000001	Cleveland	OH	44109	6/24/2011	worked pm&r dept-see call notes on physicians, worked internal medicine dept-left Butrans fpi, initiation guide, patient information booklet and formulary grid for Dr. Lindehm, Dr. Ricanati, Dr. Harrington and Dr. Falck-Ytter, as I couldn't see any of these physicians.
PPLPMDL0020000001	Westlake	OH	44145	6/24/2011	I asked Dr. to tell me about the success he is having so far, he said he is having a lot of success. He said he did have one patient report that they had some type of skin reaction to the patch and they discontinued use. But other patients have been doing well. He said the only complaint is that it is too expensive. He said one patient said it was \$160 and I let the Dr. know that that patients must have not had managed care coverage. We reviewed the managed care for Butrans and the savings cards. I let him know that patients can get Butrans for as little as \$15 per month. I asked Dr. if he will continue to prescribe Butrans for patients taking short acting every day and he agreed.
PPLPMDL0020000001	Akron	OH	44319	6/24/2011	I asked Dr. Yee if had the opportunity to prescribe Butrans and gather some patient feedback like we had discussed and he said he will keep it in mind moving forward. No new info learned.
PPLPMDL0020000001	Lyndhurst	OH	44124	6/24/2011	I reviewed the Butrans indication and the 7 day delivery. I provided confirmation that it is a CII and not a CII which means it can be called in and refilled. She asked about the max dose and constipation as a side effect. I referred to the AE's section of sales piece and explained the 20mcg is the max dose. Low dose oxycodone might be an appropriate next step. She asked about the savings cards and how long they can be used. I explained the 12/11 expiration date. She said she has a couple of patients in mind for Butrans. I explained the proper initiation dosing and positioned Butrans after tramadol/ryzolt failures and before oxycodone. She said she would try it.
PPLPMDL0020000001	Independence	OH	44131	6/24/2011	Reminded Dr. Pal of our previous Butrans discussions where we have talked about the various kinds of patients he might try on Butrans (ie in place of chronic tramadol, as a switch for patients requesting changes or increases in their chronic pain medications). I asked him what chronic pain patients he would NOT consider for Butrans. He said if someone is on something as "strong" as fentanyl or 6 Percocet, for example, per day, he would not consider Butrans because he does not think it would work. He also said it can be difficult to switch patients from one opioid to another because they get mentally "caught up" on the name of the drug they are taking or the name of the drug they think will work. Discussed setting patient expectations for pain control. He said it is very time consuming counseling these patients & also said he is concerned with addiction in these patients. I agreed that he should be cautious in prescribing all opioids.
PPLPMDL0020000001	Garfield Hts	OH	44125	6/24/2011	Spoke with MA Dina who said that Dr. Sadowski took another day off to care for his sick daughter. I asked her if she has had the opportunity to remind Dr. Sadowski about Butrans when she gets a call from a patient who may be appropriate. She said she has not done this yet as he has not been in the office very often lately. She did add that he has "so many" patients who would be good candidates for Butrans. Discussed patients calling in too soon for refills or asking for changes or increases in chronic pain medications. She said he has many patients on chronic Vicodin & then he will step them up to Percocet. I told her that my goal was to try to get him to consider Butrans, a long-acting CII, before going to Percocet, another short-acting & a CII. I did remind her that Butrans still could carry abuse & addiction potential. She said she thinks he may be willing to do this if we can keep reminding him. She said to try in another day to catch him.
PPLPMDL0020000001	Cleveland	OH	44113	6/24/2011	I reviewed 5 Butrans core messages with Dr. and asked her what were the most important features about Butrans that she liked? Dr. said she likes that Butrans is a patch, a long-acting opioid and dosed once a week. Dr. said Butrans being a CII is much easier for her so she can call in refills. We talked about patients Dr. started on Butrans and the success they are having. Dr. said she's seeing improvements in patients pain levels so she's happy and patients are controlled on Butrans. Dr. said some patients still need some short-acting analgesics and some don't. I showed Dr. Butrans visual aid and asked Dr. if she would consider patients on NSAIDs, to start on Butrans before going to tramadol or vicodin. Dr. said probably not she will go to short-acting opioids first, then long-acting if patients aren't controlled with the short-acting. I recommended Senokot-S
PPLPMDL0020000001	Mogadore	OH	44260	6/24/2011	I asked Dr. to continue our conversation about Butrans and his patients who are no longer controlled on NSAID or Tramadol and he said he has not written any but forgot about it but was mad because he said he should really write this instead of Vicodin. We reviewed managed care and dosing and if their patients are on higher doses of Vicodin they can go to low dose Oxycodone
PPLPMDL0020000001	Beachwood	OH	44122	6/24/2011	Spoke with Tara & Shelly (MA) who said that Jim & Dr. Tabbaa had just left for the evening. I asked if Fridays after 4PM are still best for catching Dr. Tabbaa. They said that they have been getting out earlier recently. They went on to say that the policy with respect to reps will likely be changing because they have "been getting in trouble" for allowing reps to come back. They said they will probably be completely inaccessible to reps in the near future. I gave them Butrans information & asked them to give it to Jim & Dr. Tabbaa when they return to the office- they agreed. Reviewed savings cards for both products. I also asked them to take my card & let me know of any policy changes regarding reps & told them I would come back to try to see Dr. Tabbaa & Jim.
PPLPMDL0020000001	Beachwood	OH	44122	6/24/2011	Vickie (nurse) said that Dr. Yokiel would not be able to see me today because he had a waiting room full of patients & had to leave ASAP. Reminded her of our previous Butrans discussion & she said she has not heard anything further. I asked her to give Butrans information to Dr. Yokiel & to Jennifer, since she is starting to see patients more in the office. She agreed to do this & said to try another day to catch Dr. Yokiel.
PPLPMDL0020000001	Cleveland	OH	44113	6/27/2011	I reviewed 5 Butrans core messages with Dr. Dr. said he likes that Butrans is transdermal and remembered it was a CII dosed once a week. I asked Dr. if he had 2 commercial plan patients taking vicodin, every day, but their pain not controlled? Dr. said he does have a few commercial patients but not many as most of his patients are Medicaid and he can't meet Butrans prior authorization requirements for Medicaid so he's not sure if he can give me much Butrans business. I told Dr. to just think of those few commercial plan patients and if Dr. feels patients meet Butrans indication and are appropriate (I showed Butrans visual aid for discussion) then start them on Butrans. Dr. said he will do that and we discussed patient savings cards for those commercial plan patients that he would start on Butrans. I recommended Senokot-S

	Cleveland	OH	44114	6/27/2011	i talked to Dave,pharmacy manager,about Butrans scripts he's seeing from doctors and we discussed who appropriate patients are for Butrans,i showed butrans visual aid for discussion.dave said he thinks some doctors are waiting too long,to consider patients for butrans,so patients who are already taking oxycontin or duragesic instead of patients taking vicodin or percocet and thinking of butrans earlier in therapy.i asked Dave if he would recommend Butrans to any physicians he has a good relationship with,if patients tell him their pain isnt controlled with their short-acting opioids? dave said he would do that and i asked dave to focus patient discussions on application and rotation of butrans when they get scripts filled,dave said he would do that,i left butrans patient information booklets and we discussed Butrans insurance coverage.we talked briefly about OxyContin stocking,showed appropriate patients flashcard,conversion guide and showed dave OxyContin formulary grid
PPLPMDL0020000001	Parma	OH	44129	6/27/2011	Caught Dr Chagin at the window & asked him how the initiation of Butrans was going for him. He said he has not prescribed it yet but wants to- he is just not remembering it.Spoke with Debbie (MA) & reviewed Butrans appropriate patient type, managed care, & savings cards. She requested additional OxyContin savings cards & OTC samples. Also scheduled first available breakfast to discuss Butrans further with Dr Chagin. She said to keep reminding him about Butrans.
PPLPMDL0020000001	BEDFORD	OH	44146	6/27/2011	Spoke with technician as there was no pharmacist available. She said i could come back another time to try to catch him. I reviewed with her Butrans appropriate patient type & also discussed managed care & savings cards for Butrans & OxyContin. She said she did not think they needed any more cards for OxyContin.
PPLPMDL0020000001	Lakewood	OH	44107	6/27/2011	Quick call at window, i told Dr he seemed excited about Butrans and what is his hesitation. He said that he is working on it and will give it a try. I asked Kim what he means by "working on it" and she didn't know. She said she will still try to recommend patients and we reviewed the appropriate patients on tramadol or vicodin around the clock.
PPLPMDL0020000001	Garfield Hts	OH	44125	6/27/2011	Quick call- I asked Dr Sadowski why not think of Butrans for appropriate patients before he starts them on Percocet/after Vicodin. He paused & said he had not thought of doing that. I asked him to prescribe Butrans for the next patient who is on around-the-clock Vicodin who he would typically step up to Percocet. He agreed. Spoke with Dina & let her know that Dr Sadowski committed to prescribing Butrans instead of Percocet for a patient on around-the-clock Vicodin & asked for her help in reminding Dr Sadowski of that commitment. She agreed.
PPLPMDL0020000001	Cleveland	OH	44103	6/27/2011	i talked to Joe,Owner of Shella Drug,about 5 Butrans core messages and asked Joe what were the top 3 features of butrans that he liked? Joe said he liked that Butrans had transdermal delivery and was a once weekly dosing option for patients.Joe said he had Butrans in stock,as it was auto-shipped by wholesaler but hasnt seen any scripts for Butrans yet.i showed Joe Butrans visual aid,appropriate patients section and asked if Joe could recommend Butrans to any patients who told him their short-acting opioids werent controlling their pain? Joe said he rarely hears that from patients,but would keep it in mind.i gave Joe a couple of Butrans patient information booklets and said he could give these to patients he deems appropriate for Butrans,so they can discuss with their doctors.Joe said that was fine.we discussed Butrans formulary coverage and Butrans patient savings cards. we discussed OxyContin,appropriate patients and i showed flashcard,joe said he doesnt stock oxycontin here
PPLPMDL0020000001	Akron	OH	44333	6/27/2011	Dr. Griffiths said she is happy with the patients she has on Butrans and will continue to keep it in mind for appropriate patients with the right insurance. She said she is really considering putting patients on Butrans who are asking to be titrated on their SAO's. I explained those were ideal types of patients.
PPLPMDL0020000001	Cleveland	OH	44104	6/27/2011	i talked to dr about 5 Butrans core messages and appropriate patients to start on Butrans,dr said he started 1 patient on Butrans,as we discussed last time i talked to him.dr said he is looking at patients who have a negative MRI and are taking vicodin or percocet and not controlled and asking him for more pills.dr said he's not going to refill their short-acting and will consider Butrans for these patients.i showed dr Butrans visual aid,appropriate patients,opioid experienced and discussed tapering of short-acting opioids and initiation of Butrans.we talked about Butrans insurance coverage.i asked dr to start a few more patients on Butrans,like the 1 he started,that he feels are appropriate for Butrans.dr agreed.i recommended Senokot-5
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	6/27/2011	Dr. DiLauro said that she liked Butrans therapy and had some additional patients in mind that she could trial it on. She said that patients really liked that it lasted for 7 days and they also had reported that it stuck well.
PPLPMDL0020000001	Barberton	OH	44203	6/27/2011	Introduced Butrans via the FPI. I asked how pf ten he was treating pain and he admitted that he did treat it and thought this would be a great option for patients that need a LAO. He said he would trial it on 2 patients and let me know what he thought.
PPLPMDL0020000001	Akron	OH	44333	6/27/2011	I asked Linda if she would try Butrans on some additional patients so she can get a fair trial. She said she liked to prepare her patients for Butrans therapy. When I asked for clarification she said that on the next visit she would explain Butrans therapy to potential patients so she could start therapy soon after.
PPLPMDL0020000001	Lakewood	OH	44107	6/27/2011	Quick call, i only had time to remind Dr about Butrans and ask if he has just one patient taking low dose vicodin he could convert to Butrans. He agreed.
PPLPMDL0020000001	Cleveland	OH	44125	6/27/2011	Spoke with Christine & asked how she thought patients with chronic pain may benefit from Butrans. She said some people do not like to take pills around-the-clock, so the transdermal option may be more convenient for them. She also said that because compliance can be an issue only having to think about the medication once a week may be helpful for them. Reviewed savings cards for Butrans & OxyContin & made sure she had enough Dr. Higley said that he had thought of some Butrans patients but honestly had just forgotten to prescribe it. He said that he had many patients that could benefit from therapy and would try harder to keep it in mind. He also said that he felt very confident prescribing it. I asked if i could stop in each week and send back a brochure as a reminder and he agreed.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/27/2011	I reviewed the key messages for Butrans and asked the Dr if he had just one patient this week who might benefit. He said he will keep it in mind and we reviewed the invitation guide. Reminder about OxyContin as an option when Butrans may not provide adequate analgesia.
PPLPMDL0020000001	Lakewood	OH	44107	6/27/2011	i reviewed 5 Butrans core messages with dr,dr said she could only remember that Butrans was transdermal.dr asked what the dosing was for Butrans and what schedule it was? i showed dr Butrans visual aid,looked at 7 day dosing interval for Butrans and that Butrans is a CII so she could call in refills for Butrans.dr said she had patients taking vicodin and percocet that are sometimes asking for something different so she could consider Butrans for them,but she has a lot of medicaid patients.dr asked if Butrans was covered on Medicaid? i discussed Medicaid prior authorization requirements for Butrans,dr said she doesnt prescribe a lot of the long-acting opioids that medicaid requires first,for approval of butrans,so that could be her challenge.i asked dr if she had any commercial plan patients that she could consider,to start on Butrans? dr said she has a handful but not many.i asked dr to think of 2 patients,commercial plan,that are taking percocet every day but their pain isnt
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/27/2011	Introduced Butrans and FPI. Dr. Lazlo said he rarely treats pain but in the event he prescribed an opioid for the first time liked Butrans for compliance reasons since it was once a week and that it was a schedule 3.
PPLPMDL0020000001	Lakewood	OH	44107	6/27/2011	I asked Dr about the success of his Butrans patients. He said they are doing fine when it is approved on managed care. I asked if he has started any new patients recently and he said he might have last week but he can't remember. We reviewed the managed care for Butrans and the savings cards. He said he is handing out the savings cards with each script. We discussed OxyContin as a long acting option that is covered on Med D AARP and Medicaid. He said he does still prescribe OxyContin when patients are taking 4 or more vicodin or percocet around the clock.
PPLPMDL0020000001	Parma	OH	44129	6/27/2011	Quick call- Dr Ortega said that he has had nothing new come up with Butrans since we talked last week. He said that he is still looking for additional patients to switch & will keep me posted on his progress. Spoke with Cindy who checked her stock of savings cards for Butrans & OxyContin & said she was OK on them. I asked if she has had any calls from patients or pharmacies regarding Butrans & she said she has not.
PPLPMDL0020000001	Parma	OH	44134	6/27/2011	I reminded Dr Mandat of our previous conversation when he told me that he prescribed Butrans for a few patients after reading about it in a journal. I asked him what the initiation process was like for him in these patients & what type of titration he has had to do for them. He said he starts everyone at the 5mcg, as he is most comfortable doing that. He said he finds he always has to go to at least 10mcg & in some cases to 20mcg. I asked him what determines if he will give a patient Butrans or if he will choose something different & he said that typically he uses Butrans when the patient has failed everything else. I asked him if this is because he has less experience with Butrans because it has not been out as long as others & he said yes. Also gave him more Colace samples per his request.<font color=blue><b>CHUDAKOB's query on 07/09/2011</b></font>Have the patients he has on Butrans had success? If so, this may be something to build upon to increase his comfort level. What do you think?<font color=green><b>APSEGAS's response on 07/10/2011</b></font>He has said that he has had success with Butrans so far. He said that he has only used it on patients who he sees in hospice as he does not prescribe many opioids for patients in the office setting. I do agree that reminding him of the success he has had would be a good angle. I need to try to uncover how many opioids he really does prescribe in the office setting. Sometimes they will say they don't prescribe them there when they really do.<font color=blue><b>CHUDAKOB added notes on 07/10/2011</b></font>Good thinking! Sounds like you have a plan!
PPLPMDL0020000001	Lakewood	OH	44107	6/27/2011	Spoke with Megan, she said they might have one or two patients on Butrans but the 20mcg has not moved yet. We reviewed the invitation guide and how to titrate to the 20mcg. I let her know I am discussing this with the Drs and patients should not titrate until 3 days when they reach steady state. We reviewed OxyContin as an option when the Butrans 20mcg may not be adequate analgesia.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/27/2011	Introduced Butrans via FPI. I asked Dr. Wilson how often he was prescribing pain meds and treating chronic pain. He said more often then he likes and said that Sr. Sassano was the one prescribing the most. He said there was a definite place for Butrans at his practice, both for opioid naive and opioid experienced patients. I explained how to initiate therapy for both utilizing the titration guide.
PPLPMDL0020000001	Solon	OH	44139	6/27/2011	Spoke with Julie (nurse) & let her know i had lunch with Dr Zaidi last week & that he had expressed interest in prescribing Butrans & that i was there to follow up/see if he had any questions. She then spoke with Dr Zaidi & said that he said he did not have any questions at this time. Julie said that he kept my card & will call me if they start to have any questions when prescribing Butrans. I also let her know that i left OxyContin savings cards & Senokot-5 samples during my last visit & asked her to call me if they need more at any time.
PPLPMDL0020000001	Warrensville Heights	OH	44122	6/27/2011	Spoke with Jazz (MA) & inquired about recent Butrans activity. She said that she doesn't know specifically if Dr Brooks has prescribed it lately, but she does know that he has been trying to use it more. I asked if she does the prior-authorizations for medications & she said she does sometimes & Beth also does them. She said they did not need more OxyContin or Butrans savings cards at this time. Made appointment to speak with Dr Brooks.
PPLPMDL0020000001	Westlake	OH	44145	6/27/2011	I reviewed the 5 key messages for Butrans as asked what benefits he sees. The Dr said that it sounds fine, but is concerned about managed care being a hassle. I reviewed the managed care and savings cards and asked if he had just a few commercial insurance patients to try Butrans for. He said he will give it a try. I reminded him that OxyContin is still a long acting option that is covered on Medicaid and Med D AARP.
PPLPMDL0020000001	Bedford	OH	44146	6/27/2011	I let Dr Moufawad know that we are working with the medical board to clarify the use of Butrans with them to help prevent any more issues with prescribing. He said he very much appreciated this. He added that he knows he is doing nothing wrong when prescribing Butrans with supplemental analgesia, but he said it seemed that the medical board was getting it confused with Suboxone & they did not understand that Butrans is used for pain & not addiction. He thanked me again for trying to help him & asked me to keep him posted.
PPLPMDL0020000001	Cleveland	OH	44135	6/30/2011	Spoke with Jenny, MA. We discussed Butrans and examples of appropriate patients. We reviewed the savings cards for Butrans, OxyContin and Ryzolt. She said that the Dr has been referring many of his chronic opioid patients including OxyContin patients, to pain management due to the house bill. He does not want to register as a pain management clinic so he will not have more than 50% of his patients on chronic pain meds.
PPLPMDL0020000001	Cleveland	OH	44111	6/30/2011	I asked Barbara her thoughts on how Butrans might benefit her patients. She thinks the 7 day dosing sounds like a good thing. She said that she has not had the chance to prescribe it lately since she is on the floors of hospital now. She is taking Scott's place for now since he moved to N Carolina. I reviewed OxyContin as an option for those patients in the hospital instead of short acting around the clock and she said she does recommend it.
PPLPMDL0020000001	Cleveland	OH	44103	6/30/2011	had opportunity to see dr and gave him OxyContin savings cards.nothing learned
PPLPMDL0020000001	Cleveland	OH	44111	6/30/2011	Quick call, Dr told me that he had tried Butrans before i could even say anything. I asked if the patient was able to get it ok and that i wanted to make sure everything goes smoothly for his office. He asked me to talk to Barb. Barb said that she did not remember what managed care but she thinks the patient was able to get it after a prior auths. I let her know i will follow up next week to make sure the patient has success with Butrans and to see if i can do anything to help. She said they still do have a handful of patients on OxyContin and they seem to all be doing really well.
PPLPMDL0020000001	Lyndhurst	OH	44124	6/30/2011	Quick call with tech, Lia. I discussed the indication and appropriate patient for Butrans. She said she has seen 1 or 2 scripts for it. I reviewed the patient information guide and what to tell patients about the application should they have questions. She asked if the patch should be rotated. Told her 7 day and not to repeat within 21 days. Provided Medical education catalog and CEs for pharmacist.
PPLPMDL0020000001	Cleveland	OH	44135	6/30/2011	I spoke with Brad, he said there has not been any movement with Butrans. He said that he has seen a few scripts but they were not able to get the prior auth for Medicaid. He said they have many appropriate patients but very high Medicaid population. We reviewed the managed care information for Butrans. Brad told me that he sees a lot of opioid scripts and refills from Dr Kevin Masterson and he feels that if he starts prescribing Butrans it will start moving at his location. I wrote down Dr Masterson's address and will investigate. We reviewed that OxyContin is a long acting option that is covered on Medicaid and commercial patients can use the OxyContin savings cards. He said that he has not seen Ryzolt scripts for the same reason as Butrans. He said he remembers some Ryzolt scripts, but they eventually went to generic due to managed care.
PPLPMDL0020000001					



PPLPMDL0020000001	Akron	OH	44333	6/30/2011	I asked Dr. Brown how her patients were responding on Butrans and if they were continuing to get pain relief as a result of therapy. She said that they were and she was using it quite a bit and would continue to do so because the majority of her patients were responding so well to therapy.
PPLPMDL0020000001	Akron	OH	44319	6/30/2011	Stopped in as promised and spoke with Gretchen about the message and information I was covering with Dr. Yee. She said that she feels many patients could benefit from Butrans and many of his patients are on SAO's.
	Copley	OH	44321	6/30/2011	I spoke with Dr. Heim and asked how his patients are doing on Butrans, he told me he had not started anyone yet, I asked him what he expected after initiating therapy to a patient or 2 and he said efficacy. I asked him if he would trial it so we could talk about the efficacy and how his patients liked it. He said he would. <font color=blue><b><CHUDAKOB's query on 07/09/2011</b></font><b>I misreading this or was your next call objective answered on this call with efficacy?<font color=green><b>LAPMACA's response on 07/11/2011</b></font><b>plan on asking about efficacy and how his patients are responding to therapy.<font color=blue><b>CHUDAKOB added notes on 07/12/2011</b></font><b>OK. Thanks for the clarification.
PPLPMDL0020000001	Cleveland	OH	44113	6/30/2011	spoke with Sheila,RN,about her handling refills,says many patients on tramadol most not taking more than 2 Vicodin/day,5/500.reviewed savings card program,focus on commercial insurance.spoke with dr about his patients on tramadol and how Butrans can fit in after tramadol.showed dr starting dose for patients taking less than 300mg/tramadol/day,dr felt patch and committed to trying a few patients on Butrans.focused dr on commercial insurance patients.
PPLPMDL0020000001	Mayfield Hts	OH	44124	6/30/2011	Quick call....doc still had Butrans savings cards. Reminded him of the covered insurance plans and BWC coverage. Oxycontin formulary grid reminder.
PPLPMDL0020000001	Cleveland	OH	44111	6/30/2011	Quick call, I asked Dr if he would be seeing any patients today who could benefit from Butrans 7 day dose. He said that he is keeping it in mind.
PPLPMDL0020000001	Cleveland	OH	44113	6/30/2011	I asked dr if he gave more thought on Butrans being appropriate for his patients taking vicodin daily but not controlled? dr started 1 patient on Butrans who had spinal cord stimulator and no other opioids worked.no feedback yet,however no call-backs yet from patient.patient coming in today.i asked dr to try Butrans on similar patients to the 1 he tried.dr wants to wait for feedback
PPLPMDL0020000001	Akron	OH	44319	6/30/2011	I asked Dr Yee about his patients success on Butrans. He said that he had not yet tried it. I asked what benefit he saw in initiating Butrans therapy to his patients and he said that it was LA.
PPLPMDL0020000001	Barberton	OH	44203	6/30/2011	I asked Dr. Minich if she felt comfortable identifying potential Butrans patients? She said she was looking for chronic pain patients who were on low dose SAO's. I explained those were potentially ideal Butrans for patients and asked if she would consider trialling it and gaining some patient feedback
PPLPMDL0020000001	Mayfield Heights	OH	44124	6/30/2011	Window call....Reviewed the Butrans dosing options - 5 mcg for opioid naive patients and 10mcg for those that may be converted from a short acting opioid. Asked if she has had to titrate to 20mcg. She did not think she has anyone on 20mcg. I explained that that is the maximum dose and that a low dose of oxycontin may be appropriate after that.
PPLPMDL0020000001	Cleveland	OH	44111	6/30/2011	We reviewed the medication guide for Butrans and how to instruct patients on proper use and application of Butrans. He said that he has seen a few scripts of Butrans but he could not remember who wrote them. I asked if he would had out the medication booklets with Butrans and he agreed. We discussed that patients should wait 3 days before titrating or determining efficacy. We discussed that OxyContin is a long acting option when Butrans may not provide adequate analgesia.
PPLPMDL0020000001	Mayfield Heights	OH	44124	6/30/2011	I opened the call discussing the indication, CII status and 7 day delivery of Butrans. I asked her what her thoughts were on Butrna. She said she actually prescribed 2 scripts last week. In both cases, the patients were being treated with a couple of tabs of short acting opioids (vicodin and percocet) which were not adequately controlling their pain. She thinks they were started on 5mcg/hr. I reviewed the dosing for naive and experienced patients and also the 3 days before steady state is reached at which time they could be titrated. She asked about the use of supplemental analgesics. I referred to the FPI and confirmed that they can be used.
PPLPMDL0020000001	Akron	OH	44319	6/30/2011	I asked Dr. Wu how many patients he currently had on SAO's that he thought could benefit from Butrans therapy. He said that he had many who were stable. I asked if any of them were failing on their SA therapy or asking to be titrated, he said some. I asked if he thought those patients could benefit from Butrans and he said he would keep it in mind.
PPLPMDL0020000001	Cleveland	OH	44103	6/30/2011	I asked dr about her patients overall success with Butrans? dr said it was great.dr prefers longacting opioids for chronic pain and doesnt believe short-acting opioids should be used for these patients.I asked dr when patients take tramadol,daily and arent controlled,whats the next step? dr said she doesnt use short-acting opioids for chronic pain.dr said that would be a Butrans patient and she may give 28 pills of a short-acting medication for breakthrough pain but didnt state which 1. talked to dr about prescribing OxyContin after 20mcg Butrans,at a starting dose of 20mg OxyContin Q12H.
PPLPMDL0020000001	Cleveland Heights	OH	44118	6/30/2011	Tried to open the call by asking doc how often he has patients complain that their tramadol or NsAids are no longer working....doc was busy and asked that I just tell him about my product. I explained the indication and positioning of butrans, CII status and the 7 day delivery. He said he would try it for the right patient. NOTHING more learned.
PPLPMDL0020000001	Cleveland	OH	44135	6/30/2011	Spoke with Krista NP, Jim RN and Randy RN, I asked how I can help with any managed care or questions regarding Butrans, OxyContin or Ryzolt. They said that OxyContin seems to be going thru managed care much easier in the past with fewer prior auths. We reviewed the managed care for OxyContin and the savings program. Jim said that he knows Dr Tabbaa is prescribing Butrans but he has not seen Dr Ryan try it yet. Randy said that he also did not think that Dr Astley has prescribed yet either. Dr Astley may be at the 150th location full time soon. I asked them how often they get call backs from someone who is asking for an increase for their low dose vicodin or percocet. They said that it happens all of time and we reviewed the invitation guide and that these patients may be appropriate for Butrans. We reviewed the managed care for Butrans and they said that they see a lot of BWC patients who might benefit from Butrans.
PPLPMDL0020000001	Cleveland	OH	44113	6/30/2011	I asked dr about the overall experience of his patients taking Butrans? dr said its too early to tell,some have done well,some have not.I asked dr if he's thought about starting hydrocodone patients earlier,ie,5/500 Q6h.dr agreed he has some of those patients but hasnt started them.dr said he's still thinking of higher dose vicodin but did admit has lower dose patients as well.I asked dr if he would ever re-consider prescribing OxyContin,dr said
PPLPMDL0020000001	Barberton	OH	44203	6/30/2011	I asked Dr. Patel to tell me about his success and failures with Butrans. He said that he has had success and efficacy but recently had to take a patient off of therapy because of an application site reaction. I showed him the FPI pointing out the side effect profile and explained that we did see that in our trials. However he said his other patients were doing really good and he felt comfortable continuing to initiate therapy.
PPLPMDL0020000001	Mayfield Hts	OH	44124	6/30/2011	Spoke to floater, Andy, who did not know about this stores volume of Butrans. At his store he recalls one initial concern with butrans where he got a script for (1) patch. It was denied by BWC but there have not been any issues since. I reviewed the proper application and sites for Butrans. Provided info on savings cards to be left for Sandy.
PPLPMDL0020000001	Highland Heights	OH	44143	6/30/2011	I asked doc if patients were satisfied with their analgesic relief with Butrans and are able to access their prescriptions without any issues. He said he has had a few PA but medicare is the problem. I reminded him that commercial and BWC patients will be the best candidates. Gave him a formulary grid for butrans as well as oxycontin.
PPLPMDL0020000001	Cleveland	OH	44104	7/1/2011	talked to dr about 5 Butrans core messages as she said she couldnt remember much about Butrans other than it was transdermal.I asked dr if she would ever consider a long-acting opioid,after tramadol wasnt controlling patients pain? dr said she's never had a CII option so she normally would go to Vicodin.I showed dr Butrans visual aid,discussed appropriate patients section and talked about her patients taking tramadol every day but not controlled,go to Butrans instead of Vicodin,dr said she'll consider it and she just needs to remember Butrans.We discussed commercial plan patients trying Butrans.I recommended Senokot-S
PPLPMDL0020000001	Berea	OH	44017	7/1/2011	Spoke with Jo, she still do have the 5 and 10mcg in stock. She was not sure if they have had scripts. I reviewed the patient medication guide and she will hand them out with any scripts. We reviewed appropriate patient types and she has a family member who is taking percocet around the clock that she is going to have talk to their Dr about Butrans. We discussed OxyContin for patients where Butrans may not provide adequate analgesia.
PPLPMDL0020000001	Akron	OH	44320	7/1/2011	I asked Misty what her patients seemed to like best about Butrans. She said that they liked the fact it was once a week and didn't have to worry about taking meds multiple times day. I asked if she had other patients in mind that she thought could benefit and she said she planned on initiating it first line to appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44106	7/1/2011	talked to Amy,Pharmacy manager,about Butrans scripts and who's prescribing in area.Amy said she couldnt look it up now as she was too busy but knew a couple of them have come from the Cleveland Clinic.I showed Amy Butrans patient information booklet and asked if she could focus on application/rotation section with patients filling scripts for Butrans,amy agreed.showed Butrans visual aid and discussed appropriate patients for Butrans,so amy knows what i am telling physicians.amy said she appreciated information and would give booklets to patients if they dont have them.confirmed stocking and recommended Senokot-S
PPLPMDL0020000001	Akron	OH	44320	7/1/2011	I asked Dr. Bonyo if he had patients who were currently not stable on their current SAO's. He said some and I asked how he though those patients could benefit from Butrans therapy and he said he didn't know. I explained Butrans was a schedule 3, LAO.
PPLPMDL0020000001	Berea	OH	44017	7/1/2011	Quick call with Adam, he said he has yet to see any Butrans an none from Dr Kavlich, I reviewed the medication guide and how to instruct patients on the proper use and application of Butrans. We discussed the savings program for both Butrans and OxyContin.
PPLPMDL0020000001	Cleveland	OH	44109	7/1/2011	dr said she hasnt started anyone on Butrans but does think the transdermal delivery is different and likes the once weekly dosing option for patients.I showed dr Butrans visual aid,we discussed 5 Butrans core messages and i asked dr if there was anything else that stood out to her about Butrans? dr said she thought Butrans was a CII because its a long-acting opioid.i told dr Butrans is a CII,she can call in 5 refills up to 6 months and showed Butrans visual aid for this discussion.I asked dr who was appropriate for Butrans? dr said she thought patients taking pills that arent controlled and complaining to her about their medications.I told dr she was right,patients taking percocet every day but not controlled,asking for more pills or wanting something different,thats the Butrans patient.I asked dr if she had 2 patients like we discussed that she could start on Butrans? dr asked about insurance coverage,discussed BWC and commercial plans.
PPLPMDL0020000001	Berea	OH	44017	7/1/2011	I asked Dr to tell me about the patients that he decided to prescribe Butrans for. He said they are doing well and would not talk to me further. I spoke with Shirley and she did not know if any managed care issues or patients not being able to get Butrans. I reviewed managed care and medication guides for the patients.
PPLPMDL0020000001	Cleveland	OH	44109	7/1/2011	I asked dr what he recalled about Butrans? dr said he doesnt remember much about Butrans other than its transdermal.I showed dr Butrans visual aid and talked about 5 Butrans core messages and asked what top 3 factors about Butrans stood out to him.dr said once weekly dosing,Butrans being a patch and a CII.I told dr since Butrans is a CII he can call in 5 refills up to 6 months.dr said that was easier than a CII.dr asked about insurance coverage,focused on BWC and commercial patients and i asked if dr had patients taking tramadol,every day,that arent controlled? dr said yes.I asked dr to consider 2 patients like this that he could start on Butrans,dr said he will do that.I recommended Senokot-S
PPLPMDL0020000001	Lyndhurst	OH	44124	7/1/2011	I asked doc how her patients are doing on Butrans. She said that the ones on itare doing well. She has had no issues with access and cost as she focuses on commercially insured patients. I asked her if she has prescribed butrans with refills. She said that her policy is that patients call in monthly with updates on how they are doing and the office will then adjust their medication or call in a refill. She said that she did not currently need savings cards. Provided formulary coverage reminder.
PPLPMDL0020000001	Cleveland	OH	44113	7/1/2011	I asked dr who was appropriate for Butrans? dr said patients taking percocet,1-2 pills a day,not controlled and asking her for more pills,she thinks Butrans is appropriate.I told dr that was great she was thinking of Butrans there,I showed Butrans visual aid and asked if she would tk of Butrans earlier,after tramadol isnt controlling patients pain? dr said she might do that.I showed dr Butrans initiation guide,discussed Butrans 5mcg,if patients are taking less than 300mg tramadol/daily,dr said ok she'll consider it for patients we talked about Butrans insurance coverage.
PPLPMDL0020000001	Lyndhurst	OH	44124	7/1/2011	I asked Karen what her thoughts are on Butrans - a CII, 7 day transdermal. She said she thinks its a great idea and a nice way to reduce the number of pills patients are taking. She said she has not seen any of Dr. Reeds patients for follow so she has not heard of the feedback nor the opportunity to prescribe it. I reviewed the initiation dosing and the savings card program.
PPLPMDL0020000001	South Euclid	OH	44121	7/1/2011	Window call....asked doc what his thoughts are on a CII transdermal system delivered in a once weekly patch. He said he thinks it would be too expensive. I explained that commercially insured patients will pay as little as \$15/mo and the medicare/medicaid will be more difficult and require a PA. Provided savings cards, formulary grid and initiation guide.
PPLPMDL0020000001	Uniontown	OH	44685	7/1/2011	I asked Dr. Stetler if he had heard back from his Butrans patients and he said that they liked therapy and he was pleased with the efficacy. I asked him how long he generally expected a patients to stay on Butrans and he said until their pain is gone. I explained the indication and that Butrans is a LAO.

PPLPMDL0020000001	Cleveland	OH	44104	7/1/2011	dr said she didnt remember much about Butrans other than it was a transdermal option,i showed dr Butrans visual aid with 5 core messages and asked dr what were a few factors that were important to her when considering a long-acting opioid for her patients? dr said safety and efficacy,i showed dr Butrans visual aid and fpi with Butrans clinical trial info and then Adverse events page in visual aid.i asked dr if she had a few patients taking vicodin,daily,that arent controlled and asking for something different? dr said yes and she'll try Butrans in a few patients as she does have a handful of chronic pain patients.i talked to dr about Butrans patient information booklet and insurance coverage for commercial plans.i recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44121	7/1/2011	Window call.....reminded doc that he previously expressed interest in Butrans. I asked him if he has any patients that could benefit in a once weekly dose. He said he keeps forgetting and just can not the right patient with the right insurance. I reminded him of the commercial insurance plans and the savings cards. He confirmed that the still has them and said he will try.
PPLPMDL0020000001	Akron	OH	44319	7/1/2011	I asked Dr. katriji if he had any patients that he thought could benefit from the 7 day analgesia that Butrans could offer patients. He said he did have some but felt that he did not know enough about it. I asked if we could sit down and talk more about it but he said he would read some material and let me know if he had any questions.
PPLPMDL0020000001	Independence	OH	44131	7/6/2011	Dr Jack said that he hasn't prescribed Butrans yet but that he has thought of it. I told him that I wasn't even going to ask him about Butrans today. He told me that Butrans is CIII & that "that is the best part". I asked him why. He said he can call it in. He asked to see a demo again, so I showed him & he asked for something with the name on it that he can put on his desk so that he can think about Butrans, so I gave him an initiation guide. Reviewed OxyContin savings cards. He said he has a few left so he did not need them at this time.
PPLPMDL0020000001	Cleveland	OH	44106	7/6/2011	i talked to dr about his patients taking vicodin,every day,that arent controlled and calling into office earlier every month asking for refills.dr said he gets a lot of those patients.i asked dr if he would stop and think of Butrans for those patients taking 1-2 vicodin,daily,that arent controlled? dr said he probably would do that.i showed dr butrans visual aid,discussed appropriate patients like we discussed and initiation of butrans.dr said his patients are doing great on butrans,no complaints,so he's happy.i asked dr to think of 2 patients,per our discussion,and start them on butrans.dr agreed. we discussed butrans for commercial plan patients and use of butrans patient savings cards.i recommended Senokot-5
PPLPMDL0020000001	Northfield	OH	44067	7/6/2011	Re-introduced Dr Lango to Butrans as she did not recall what it is. Reviewed 5 core messages & discussed box warning/CIII. Discussed positioning & appropriate patient type. I asked her thoughts on transdermal products. She said she has no issue with them & likes that Butrans is once weekly. She said she probably has more patients on opioids than any of the other doctors in her practice. I asked what type(s) of patients she could see herself prescribing Butrans for. She said she has many patients on chronic Vicodin that may be appropriate & that she would use it after Vicodin but before going up to Percocet or OxyContin. She said she has patients who are taking 5mg Percocet 3 times per day who she would be willing to switch to Butrans. She said she feels that the chances of them getting nausea from Butrans would be less than oral opioids. I told her we have no comparative data & that nausea is a side effect that is possible with Butrans as well & showed rates.
PPLPMDL0020000001	Cleveland	OH	44104	7/6/2011	talked to dr about 5 Butrans core messages,dr said he hasnt started anyone on butrans,i asked dr what features he likes about butrans? dr said he likes that butrans is once weekly dosing and is a patch.i asked dr if butrans being a CIII was important to him? dr said if he can call in refills that makes it easier.i asked dr if he has any patients taking tramadol,daily,that arent controlled and calling in earlier every month for refills? dr said yes.i showed dr butrans visual aid,appropriate patients,discussed that information and asked dr to start 2 patients,per our discussion,on butrans. dr said he has a lot of medicaid so unless its covered on medicaid it might be tough.we talked about dr considering his commercial plan patients to start on butrans. dr said ok he'll keep it in mind.i recommended senokot-5
PPLPMDL0020000001	Cleveland	OH	44104	7/6/2011	talked to dr about his patients taking tramadol daily,not controlled,and calling office earlier every month for refills.dr said he has those patients.i showed dr butrans visual aid,appropriate patients,talked to dr about starting 2 patients like that on butrans and focus on commercial plan patients.dr said he can do that we talked about butrans patient savings card and patient information booklet.i recommended senokot-5
PPLPMDL0020000001	Sagamore Hills	OH	44067	7/6/2011	Dr Sevier said he actually prescribed Butrans for a patient shortly after our last conversation. I asked him to tell me about that patient. He said it was an 85 year old woman with arthritis who has been taking Vicodin every day, but does not like taking it. He said that unfortunately, Medicare would not cover it & it was too expensive for her. I told him that clinically, this patient sounded ideal & reviewed managed care, asking him to keep working patients with these types of issues in mind. He said he would do this. He asked about adverse events. Showed FPI section 6. He said he felt the rates were low. Discussed initiation in patients on different doses of opioids, titration ability every 3 days to a max 20mcg dose & OxyContin q12h for appropriate patients beyond this max Butrans dose. He said he will try to write Butrans for a patient who has a chronically painful condition such as low back pain & who has commercial insurance.
PPLPMDL0020000001	Sagamore Hills	OH	44067	7/6/2011	Dr Maguire asked me for a refresher on Butrans. I reviewed 5 core messages & discussed box warning, asking him to be just as cautious in prescribing Butrans as he is with other opioids. Also went over dosing, titration, CIII. I asked his thoughts on having a long-acting CIII available for appropriate patients. He said he likes having a CIII option & asked how many refills a patient could have at a time. I let him know they could have up to 5 refills in a 6 month period & asked why he liked the CIII feature. He said it is convenient to call in medications. He said he has patients who sound like they would be good candidates. I reviewed with him managed care & savings cards for those eligible. Also discussed titration ability every 5 days. Discussed OxyContin q12h for appropriate patients beyond Butrans 20mcg.
PPLPMDL0020000001	Independence	OH	44131	7/6/2011	I reminded Dr Rob that we had discussed starting an appropriate patient from Vicodin to Butrans instead of switching them to Percocet. He said he hasn't done this yet. I reminded him that he said he liked that Butrans offers once-weekly dosing & CIII. I reminded him of the appropriate patient type & asked him if he would still consider using Butrans in the type of patient we had discussed during our last conversation. He said he still thinks he would use it between Vicodin & Percocet. Reminded him of OxyContin q12h for appropriate patients beyond Butrans 20mcg & he asked for savings cards.
PPLPMDL0020000001	Akron	OH	44333	7/6/2011	I asked Dr. Brown how many patients she had on Butrans therapy and what her success rate was. She said she only had to take one patients off of therapy which we talked about last time. I asked her with her high success rate if she was likely to continue and she said yes.
PPLPMDL0020000001	Akron	OH	44304	7/6/2011	I asked Dr. Amambunji if he saw a benefit to initiating Butrans therapy to his patients currently on low dose SAO's and he said he liked that it was once a day. I reminded him it was actually once a week and he was pleased to hear that. He said he would keep it in mind for the right patient.
PPLPMDL0020000001	Akron	OH	44320	7/6/2011	I asked Misty how long she expected her patients to stay on Butrans and she said until their pain subsides. I explained that Butrans was a LAO and most appropriate for chronic pain which she understood.
PPLPMDL0020000001	Mayfield Heights	OH	44124	7/6/2011	Window call.....Debbie asked for more savings cards for Butrans. They were completely out or they could not find them. I asked if she was prescribing butrans with refills. She said that their patients come back every month. I reminded her that it can be called in as well. Provided Butrans sealed article and engage invite.
PPLPMDL0020000001	Highland Heights	OH	44143	7/6/2011	Spoke to Diana G about the stocking of Butrans. She is a floater filling in for Kristen so she is not too familiar with the volume at this store. She has however seen a few. I explained the savings cards program and the availability online and thru relay health. She asked about where to apply the Butrans. I discussed the application sites and the proper way to apply. She was unaware of oxycontin savings cards. She sometimes sees high copays for oxycontin but not often enough to get savings cards.
PPLPMDL0020000001	Cleveland	OH	44106	7/6/2011	i talked to dr briefly about 5 Butrans core messages,dr said he's started a few patients on Butrans but hasnt seen them back for follow-up so he doesnt have any feedback yet.dr said he knows where Butrans is appropriate,low dose vicodin or percocet patients,not controlled,i asked dr to consider patients taking tramadol,daily,that arent controlled,to start on Butrans instead of increasing tramadol dose or converting to vicodin,dr said ok he'll consider that.i recommended Senokot-5
PPLPMDL0020000001	Mayfield Hts	OH	44124	7/6/2011	Window call....I asked to think of those patients that may prefer to take fewer dosages of their pain meds and then think of Butrans. Reminded him that Butrans is a CIII delivered in a once weekly dose. Offered him a sealed Butrans article. He asked if there is comparative data. I told him I was not sure.
PPLPMDL0020000001	Cleveland	OH	44143	7/6/2011	Spoke to Angela about my previous discussion with doc about Butrans. I explained the 7 day delivery of a CIII analgesic. I discussed the appropriate dosing for opioid naive and experienced. Doc stated the he would go to vicodin after tramadol. Provided savings cards and formulary grid. She would give the sealed article to the doctor.
PPLPMDL0020000001	Lakewood	OH	44107	7/6/2011	I asked Dr to tell me how the patients are doing who have started Butrans. He said he only has a couple, but they are doing well. I asked if he has any other patients taking short acting opioids everyday who he feels might benefit from Butrans and he said he will see. I reviewed that OxyContin is still an option when Butrans may not provided adequate analgesia. He said he does still use it in the hospital when patients are not adequately controlled on short acting.
PPLPMDL0020000001	Lakewood	OH	44107	7/6/2011	Quick call, I reviewed the key messages for Butrans. I asked if he thinks a long acting CIII can benefit his practice in any way. He said he does like that it is a CIII instead of a CII. He said he will give it a try. I reviewed the Butrans and OxyContin saving cards.
PPLPMDL0020000001	University Heights	OH	44121	7/6/2011	Reminded doc of his previous interest in Butrans and that Butrans can be affordable for commercial patients. He said he has a lot of poor patients. I showed the formulary grid and the covered plans. He stated that 3rd tier is an expensive co pay. I explained the savings with the card. He asked about availability in the hospital. I asked him if that is where he would prescribe Butrans. He said maybe. He asked if the patch stays on during showers. I told him with proper application it should stay on. Discuss application and sites. I asked him to consider going to Butrans once weekly when he has a patient on low dose vicodin. He said patients like their vicodin. I asked him to prescribe before going to vicodin. Reminded him of the oxycontin savings cards as well. Gave him a butrans article.
PPLPMDL0020000001	Cleveland	OH	44106	7/6/2011	i worked pain management dept-see call notes,worked internal medicine dept and found out that dr batts,dr nock, dr kamoga are all attending staff physicians at UH BUT they dont see patients here at main campus,they have private practice offices,so i could leave any information with the Internal Medicine/out-patient health clinic,worked family medicine-found out that dr kale is a staff physician at UH BUT this physician is in private practice OUT of my territory.
PPLPMDL0020000001	Lakewood	OH	44107	7/6/2011	Spoke with Bob, we reviewed the medication guide for Butrans. I asked what he thought of it and if he would hand it out or consult the patients. He said he does ask the patients if they have any questions when they receive their medications. We discussed how to instruct patients and that patients should allow 3 days to reach steady state. We discussed OxyContin as an option when Butrans may not provide adequate analgesia.
PPLPMDL0020000001	Akron	OH	44320	7/6/2011	I asked Dr. Duppstandt is she thought there was a place for Butrans in her practice and she said she wasn't sure. I explained the ideal types of patients and asked if she saw many of those patient types she said some but most of them are Medicaid patients. I explained our coverage.
PPLPMDL0020000001	Lakewood	OH	44107	7/6/2011	I reviewed our past conversation about Butrans as a option for patients instead of increasing patients dose of vicodin. I asked if he has just one patient this week who might benefit from 7 day dosing. He said that he will prescribe it. I reviewed OxyContin as another long acting option and he said he is continuing to prescribe OxyContin. I asked when would he use Butrans vs OxyContin and he said that most of his patients are taking higher doses of short acting and he feels comfortable converting them to OxyContin.
PPLPMDL0020000001	Brooklyn	OH	44144	7/6/2011	Spoke with David & reviewed OxyContin savings cards & Butrans savings program. Also discussed eligibility requirements. He asked for more OxyContin savings cards. He also said that he just received & filled his first Butrans prescription yesterday. I asked him who wrote the prescription & he said he could not tell me. He said he thought it was for a Medicaid patient but then said maybe it was not. Discussed managed care & asked what managed care mix he sees. He said probably 60% commercial & a mix of the remaining 40% of government plans. He said he knows for sure whatever plan it was, the prescription was approved. He also added that he thinks that when the higher doses of acetaminophen-containing medications are pulled later this month that more patients will switch to single-entity opioid options such as Butrans. He said that he has no idea if this is really going to happen, but that is his opinion.
PPLPMDL0020000001	Parma	OH	44129	7/6/2011	Dr Gigliotti said he has not found anyone to start on Butrans yet. I asked Dr Gigliotti what has to happen for him to prescribe it. He said he hasn't written anything lately- "not even OxyContin". I reminded him that Butrans is CIII, but still carries abuse/addiction potential. I asked him if he has seen anyone for whom he has refilled Vicodin, Percocet, or tramadol. He said he probably has. I asked him why none of them were Butrans candidates. He said one of them might be, but she has Caresource insurance. I asked him if he has any working patients like that. He said he has "been scared" to write any opioids due to Ohio House Bill 93. I asked how he thought it would effect his practice & he said he wasn't sure yet. He told me that he kicked his first OxyContin rep out of his office & that it took him awhile to "get on board" with it, so I should just be patient.
PPLPMDL0020000001					

	Cleveland	OH	44114	7/6/2011	I asked dr how soon does she follow-up with patients,once started on butrans? dr said 2wks later she see's patients,unless patients cant get to her office for some reason then it'll be 3wks.dr said her patients on butrans are doing great,they are having improvement in pain levels and feel pain is well controlled.talked to dr about patients taking 1-2 5mg vicodin,daily,that arent controlled and asking for something else,would she consider Butrans instead of increasing dosage strength or interval? dr said she might do that for some patients,if she wasnt comfortable giving them more pills.dr asked about caresource/medicaid coverage for butrans as she keeps getting denial letters and thought medicaid was approving butrans.we talked about medicaid's prior authorization requirements for butrans and that caresource has their own formulary separate than state medicaid for butrans,dr said to let her know if that changes.told dr to think of bwc patients for butrans.i recommended senokot-s
PPLPMDL0020000001	Bedford	OH	44146	7/6/2011	Quick call- Dr Moufawad asked if I had any new information regarding the Ohio Medical Board. I told him I did not at this time but would update him as soon as I had information. I asked him if in the meantime he is writing off Butrans completely or if he is still prescribing. He said he has been prescribing for "a few patients" & then walked into a room.
PPLPMDL0020000001	Lakewood	OH	44107	7/6/2011	I reviewed out last conversation about steady state and asked what benefit this offers his patients. He said the benefit is they don't have to take tablets every day. I asked if he could think of just one patient this week who might benefit from Butrans and he said he would.
PPLPMDL0020000001	Lakewood	OH	44107	7/6/2011	Spoke with Aduwa, I asked what questions she feels that she might get from Butrans patients. She said probably about application site and if they can swim with it on. We reviewed the medication guide and how/where to apply Butrans. We reviewed steady state. I asked if she would consult with patients to make sure they have all the info they need and she agreed. Reminder about OxyContin as an option when Butrans may not provide adequate analgesia.
PPLPMDL0020000001	Lakewood	OH	44107	7/7/2011	Quick call with Joe, we reviewed Butrans medication guide and how to instruct patients on proper application. He said he has not seen scripts yet. We reviewed the appropriate patients for Butrans and then patients that would be appropriate for OxyContin when Butrans may not provide adequate analgesia.
PPLPMDL0020000001	Cleveland	OH	44111	7/7/2011	Quick call, I asked if he has any other patients who could benefit from Butrans like the one he started. He said that he will think about it. I spoke with Barb and she said that she is still reminding him and keeps the Butrans savings cards in front of him as a reminder.
PPLPMDL0020000001	Westlake	OH	44145	7/7/2011	Quick call, Dr was way behind. I asked him to think of Butrans for those patients not well controlled on low dose vicodin or percocet who have BWC or commercial insurance. He said he is still trying to think of it and will start to prescribe for more BWC patients. Reminder that OxyContin is still an option that is covered on Medicaid.
PPLPMDL0020000001	Independence	OH	44131	7/7/2011	Quick call- Spoke with Angela (technician) who said that their regular pharmacists were not in today. Reviewed savings cards/eligibility for Butrans & OxyContin with floater pharmacist. He said he has not dispensed Butrans. Reviewed appropriate patient type. He said he would leave my information for the regular staff pharmacists.
PPLPMDL0020000001	Cleveland Heights	OH	44118	7/7/2011	Reminded doc of the appropriate patient for Butrans and asked him if he has any such patients that might benefit. He said he is sure he does. I offered him the engage invite and the pain medicine news article. I explained that I would like to further discuss butrans at next weeks lunch. He said that would be better.
PPLPMDL0020000001	Cleveland	OH	44103	7/7/2011	I talked to dr about her use of short-acting opioids for acute pain and what the clinical reasoning was for using those same med's to treat chronic pain.dr said every patient starts out acute,so she will prescribe tramadol,then vicodin and percocet but after a few months,if patients pain still persists,she considers pain to be chronic and prefers long-acting opioids.dr said a lot of patients like taking their pills every couple hours as they feel it controls their pain but she does try to talk to them about long-acting opioids like OxyContin as its dosed q12h but now there's option of Butrans before OxyContin so she's talking to patients about Butrans.i showed dr Butrans visual aid,discussed appropriate patients section and asked dr to think of 2 patients taking tramadol,daily,that arent controlled,that she could start on Butrans.dr said she has some patients on tramadol and would do that.we discussed butrans formulary coverage and i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44195	7/7/2011	worked pain management dept-left Butrans fpi,initiation guide,formulary grid,patient information booklet,OxyContin fpi,conversion guide,appropriate patients and challenging flashcards for OxyContin and my business card-left all of this information for Dr.Mekhail,Dr.Minzter,Dr.Cheng,Dr.Syed and Dr.Vrooman as i couldnt see any of the doctors and was told to just leave information; worked chronic pain/rehabilitation dept-left Dr.Mathews and Dr.Covington-Butrans fpi,initiation guide,patient information booklet and formulary grid with my business card for each doctor as i couldnt see them. worked rheumatology dept-left Butrans fpi,initiation guide,patient information booklet,formulary grid and business card-for Dr.Calabrese, Dr.Capulon,Dr.Chatterjee, Dr.Deal and Dr.Mazanec-per the medical secretaries I had to leave information and if doctors are interested they will contact
PPLPMDL0020000001	Cleveland	OH	44124	7/7/2011	Doc was not in today. Spoke to Vickie about the butrans patient type and the 7 day delivery. Gave her an invite to provide to doc as well as a pain medicine news article. Nothing learned.
PPLPMDL0020000001	Mayfield Heights	OH	44124	7/7/2011	Spoke with Candice about the butrans patient type dosing and savings cards. Also explained the invite for a presentation. She was not aware if doc has prescribed butrans yet. Doc is on vacation until 7/18.
PPLPMDL0020000001	Lakewood	OH	44107	7/7/2011	Spoke with floater Ricky, he said that he has seen scripts for Butrans at the Amherst store but not much from Oberlin, Wellington or Lakewood. He said that I need to work on Dr Shah, Malak and Ray in order to get it moving out east. We discussed the medication guide and how to instruct patients on the proper use and application of Butrans. He will keep some of the medication guides to hand out. We reviewed the invitation guide for Butrans and that OxyContin is still an option when Butrans may not provide adequate analgesia.
PPLPMDL0020000001	Westlake	OH	44145	7/7/2011	We reviewed the initiations presentation. Dr. said that only 1% of his patients are chronic pain. His staff thought it was more like 60% but he said he has about 4000 patients total and not many are chronic pain. He said that it may seem like more since they tend to see the chronic pain patients more often. I asked if he had any low dose patients who could benefit from Butrans and He wanted to review the conversion guide further. We reviewed that OxyContin is an option when Butrans may not provide adequate analgesia.
PPLPMDL0020000001	Cleveland	OH	44130	7/7/2011	Dr Fedorko said that one of the patients he had put on Butrans after she had been in the hospital was unable to get her prescription refilled because of her Medicare plan. I told him that is why his greatest successes for getting Butrans through would be commercial insurance plans & reminded him that those patients can use the savings cards monthly to receive a savings up to \$240 for the remainder of the year. He said the majority of his patients are Medicare, so he is having a hard time coming up with patients to put on Butrans. Reviewed patient type & positioning with him & spoke with Mindy & Mary Ann about insurance coverage & savings cards. They both said that the case Dr Fedorko told me about was the only one that has been denied so far & that they have had no other issues.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/7/2011	I re-introduced Butrans to Dr. Johnston via the FPI. He said he felt comfortable trying new products and this was certainly a product that he sees a need for. He said he had several patients currently not stable on their SAO that he would try Butrans on. I explained managed care.
PPLPMDL0020000001	Lakewood	OH	44107	7/7/2011	Quick call as Dr told me it is not a good day. I reminded him about Butrans as an option and left the initiation guide. He said that he will finally give it a try.
PPLPMDL0020000001	Lakewood	OH	44107	7/7/2011	I asked Dr how his patients are doing on Butrans. He said that one of his patients is doing well and is taking vicodin as supplemental analgesia. He asked me about prescribing OxyContin for supplemental and I reviewed the FPI and that patients should only take long acting opioid or non-opioid for supplemental analgesia. He asked about managed care and I reviewed the managed care coverage along with the savings cards. I asked if he has any other patients like the one who is doing well who might also benefit from Butrans. He said he will think about it. Dr was on his way to the hospital and I reminded him that OxyContin is an option instead of short acting around the clock for his hospital patients.<font color=blue><b>CHUDAKOB's query on 07/14/2011</b></font><b>CHUDAKOB's response on 07/18/2011</b></font>Thank you, this was a typo. We discussed that SHORT acting opioid or non opioids can be taken as supplemental analgesia per the FPI. Thanks.<font color=blue><b>CHUDAKOB added notes on 07/19/2011</b></font><b>CHUDAKOB added notes on 07/19/2011</b></font>Thanks for the clarification!
PPLPMDL0020000001	Independence	OH	44131	7/7/2011	Spoke with Jill (MA) who said that today would not be a good day to see Dr Pai due to his schedule. She said I could try back tomorrow but that it may not be much better. I showed Jill the patient information guide for Butrans & asked her if she thought it would be helpful for patients for whom Dr. Pai prescribes Butrans for the first time. She said she thinks so but that I should ask him. She said that he usually handles giving information & samples to patients.
PPLPMDL0020000001	Barberton	OH	44203	7/7/2011	I asked Dr. Patel what his overall thoughts were about initiating Butrans therapy. He said he liked that therapy lasted 7 days and that it was a LAO. He said patients liked therapy and the success rate so far was high.
PPLPMDL0020000001	Highland Heights	OH	44143	7/7/2011	Window call.....asked doc if his patients are still using the savings cards for oxycontin and Butrans. He said he still has some. Nothing more learned. Gave him the engage invite and the pain medicine news article.
PPLPMDL0020000001	Akron	OH	44310	7/7/2011	Dr. Schukay said that he had several patients in mind to start on Butrans therapy. He mentioned his biggest challenge was managed care and but committed to keeping it in mind for patients currently not stable on their SAO's and who have a private or commercial insurance.
PPLPMDL0020000001	Independence	OH	44131	7/7/2011	Dr Sundaram said he has not had a chance to find a Butrans since our last discussion as he has been out of the office a lot. He also added that today was not a good day due to the holiday this week. I let him know I would return at another time for a more detailed discussion. I gave him the initiations invite & asked him to consider participating in it during one of my visits. He said he would consider.
PPLPMDL0020000001	Highland Heights	OH	44143	7/7/2011	Quick call.....reminded Debbie of the Butrans patient type and how to initiate for opioid naive patients and those that are coming from another short acting opioid. Gave initiation guide and pain medicine news article and engage invite.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	7/7/2011	I asked Dr. Azem how her patients felt about Butrans therapy. She said they were pleased as was she but asked about initiation which I reviewed utilizing the initiation and titration guide. She said that potential candidates of hers would most likely start at the 10 mcg.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	7/7/2011	Dr. DiLauro said that she had another 2 patients in mind for Butrans therapy. She said both were currently not stable on their SAO's. I explained that both patients were ideal candidates and based on their previous therapy the 10 mcg patch may be most ideal.
PPLPMDL0020000001	Independence	OH	44131	7/7/2011	Dr Trickett asked me how well Butrans works in the elderly population. I told her there is no dosage adjustment in older patients & that she should use the same caution she usually does when prescribing opioids when using Butrans for those patients. I told her that Medicare plans are generally not paying for Butrans yet, although she could try to prior-authorize the prescription if she felt it was worth it. I added that for appropriate Medicare patients, OxyContin q12h may be an option. She said that she wishes she could use Butrans in her older patients because she feels this is an ideal type. She asked what the out-of-pocket cost was for a patient with no insurance. I showed her the WAC info sheet. She said the price was reasonable & that she has a patient who she will switch to Butrans as his current medication is too expensive. Discussed initiating treatment. She said she does not like continuing to refill Vicodin for patients & that she just thought of another pt to start on it.
PPLPMDL0020000001	Cleveland	OH	44130	7/7/2011	I reminded Dr Kansal of our previous conversation when he told me about the patient he had started on Butrans & then titrated up. I asked how the patient was doing. He said that the patient ended up "not liking" Butrans. I asked him to be more specific & he said that it just did not work for that patient. I asked him if he thought based on the appropriate range of patients for Butrans in morphine equivalent if the patient might have been beyond what Butrans is designed for & more of an OxyContin patient. He said yes & that he is now on OxyContin. He added nothing had worked for him, so he wanted to give Butrans a shot. I told him it sounds like he's doing the right thing & asked if he will still consider it for other patients & asked how often he sees patients on 3-4 5mg Vicodin per day. He said very frequently. I told him some of those patients may be more appropriate & he said the key will be getting them on Butrans before they are on Vicodin for too long.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/7/2011	I asked Dr. Saunders about treating chronic pain which he said he rarely does. He did mention that he had some patients that were currently asking to be titrated on their current SAO and those were the patients he would focus on. He admitted he did not have a ton of them but would definitely given Butrans a shot on those types of patients.
PPLPMDL0020000001	Akron	OH	44310	7/7/2011	Introduced Butrans via the FPI. Identified the most ideal types of patients for therapy and asked if she felt there was a need for Butrans at her practice. She was immediately able to identify potential patients and said she would try it on some of her opioid experienced patients. I explained managed care.
PPLPMDL0020000001	Strongsville	OH	44136	7/7/2011	Spoke with James, pharmacist, & reviewed Butrans.com & savings information. He said he has a patient taking Butrans. I asked him if the prescriptions they fill there are usually from physicians within that building, from only Cleveland Clinic physicians, or from physicians all over. He said they come from all over but that this one came from Dr Dews. He recommended I try to speak with or get information to Dr Grimm & Dr Zachary in their building as they do pain management, although he added he understands our access issues. I let him know I would try to get information to them. Reviewed indication & that Butrans is for pain only, not the treatment of drug addiction. Also reviewed OxyContin savings cards & gave him a pack per his request. Gave him a few Butrans patient information guides & walked him through usage.
PPLPMDL0020000001					

PPLPMDL0020000001	Cleveland Hts	OH	44118	7/7/2011	Quick call....doc was just back from vacation and very busy. I reminded him of the Butrans 7 day delivery of a CIII opioid for pain. He said he has not written it yet. I gave him an engage invite and the pain medicine news article. Let him know I would return next week for lunch to discuss the information.
	Parma	OH	44134	7/7/2011	Dr Hernandez said that he has been prescribing Butrans a lot lately. I asked him to tell me about the patients. He said that he finds it works best for patients who "don't like to take medicine". I asked him what he meant & he said patients who don't like to take oral medications. He said that he likes Butrans & his patients like it. He said he is suspicious of drug-seekers if a patient does not want to take Butrans. I asked him where OxyContin has a place for his practice now that he is prescribing Butrans. He said he would use that in patients who either do not respond with Butrans or who need something stronger. Reviewed savings programs for both products. He said that he will keep prescribing & hopes that more primary care physicians start using it as well so that patients can get that relief sooner.<font color=blue><b>CHUDAKOB's query on 07/14/2011</b></font>Ashleigh, when the doctor said he is suspicious of drug seeker if they do not like to take Butrans, how did you respond to that?<font color=green><b>APSEGA's response on 07/15/2011</b></font>I reminded him again that Butrans does have abuse/addiction potential & that he should be just as cautious in prescribing it as he would be any other opioid.<font color=blue><b>CHUDAKOB added notes on 07/17/2011</b></font>OK. Thanks for the clarification!
PPLPMDL0020000001	Cleveland	OH	44113	7/7/2011	dr said the patient he saw last week that he started on Butrans ended up NOT starting Butrans as he was afraid to start the medication after reading that death can occur.dr explained that Butrans was an opioid with risks and discussed side effects with patient.dr said that patient wanted to think about it and might try it but will continue taking vicodin in the meantime.dr asked if his patients could take Butrans with breakthrough medications? I told dr yes,showed dr Butrans fpi,maintenance of therapy section,noting patients can take opioid or non-opioid therapy with Butrans.dr said he is looking through his patient lists every day and thinking who would be appropriate for Butrans.dr said I should show his staff Butrans patient information booklet as he doesn't have time to explain everything about Butrans to patients.i showed staff the booklet and Butrans carton/demo for visuals as dr and staff asked how Butrans was packaged.i asked dr to think of 2 patients,taking vicodin but not
PPLPMDL0020000001	Cleveland	OH	44103	7/7/2011	reviewed 5 Butrans core messages with dr,asked dr to consider Butrans for 2 commercial plan patients that are taking vicodin every day,but not controlled,and asking him for something else.dr said he would do that but he doesn't have a lot of commercial patients,majority are medicaid patients.we talked about butrans patient savings cards for commercial patients and dr said he writes a lot of OxyContin as its covered on medicaid so he'll think of those patients.i showed dr OxyContin appropriate patients flashcard,formulary grid and gave dr OxyContin conversion guide and asked dr to start a few patients on OxyContin 10mg or 15mg q12h,dr said he would do that.i recommended Senokot-S
PPLPMDL0020000001	Lakewood	OH	44107	7/7/2011	I asked if she has patients who's pain is not well controlled on their short acting who might be able to try Butrans. She said she does not have too many, but will keep it in mind. Reminder about OxyContin as a Q12hr option.
PPLPMDL0020000001	Cleveland	OH	44113	7/7/2011	She said she has been prescribing OxyContin in the nursing homes.
					reviewed 5 Butrans core messages with Laura,NP,and asked her what features of Butrans she felt were important? Laura said transdermal delivery,once weekly dosing and that Butrans is a CIII but she doesn't have the time to explain something "new" to patients.I showed Laura Butrans patient information booklet and asked if this booklet would assist her in the time she has with patients? Laura said probably not,it's easier to refill their short-acting.Laura said she knows dr nickels has a group of patients on Butrans and I should just focus on him and talk to him about Butrans because at this point she's not prescribing Butrans.i told Laura I appreciated her honesty and that I would continue working with dr nickels and if she changed her mind to know that Butrans patient information booklet has an application dvd that could educate patients as well as the booklet information,laura said ok i recommended Senokot-S
PPLPMDL0020000001	Cleveland Hts	OH	44118	7/7/2011	Introduced the Butrans indication and other selling messages - CIII, 7 day delivery, opioid naive and opioid experienced patients, once weekly dosing. He said he heard something about this and asked if it is like fentanyl. I explained that there is no head to head data and that Butrans is the first 7 day delivery of an opioid analgesic. He asked about medicaid coverage. I explained that it is not covered on medicare or medicaid yet but is well covered on commercial insurance plans. I reviewed the formulary grid and provided savings cards and initiation guide. He said he would look at the info.
PPLPMDL0020000001	Independence	OH	44131	7/8/2011	Roman said I had to "make it quick" because he was running behind with Dr Keppler being out of town. He asked me if I had arranged a program yet for Butrans. I told him I am working on it & hope to have information for him soon. He said he wants to talk to someone who is using Butrans before he starts using it. I offered medical services' number & information again, but he declined. I gave him the sealed "special report" article & told him I could not discuss it, but wanted to give it to him since it was recently given to us. He said he would have a look at it & hoped it would offer some "real life" information that would help him. He also told me he has been writing OxyContin. I let him know I would return on a different day to speak with him in more depth & would bring program information as soon as I have it.
PPLPMDL0020000001	Beachwood	OH	44122	7/8/2011	Spoke with Denise (MA) who gave me the updated office policies on scheduling time with Dr Carman. She said she would give my card to her scheduler. I gave her a Butrans overview, discussing indication, dosing, appropriate patient type, & managed care coverage. She said Dr Carman may be interested in hearing more about Butrans but that she did not have any time to do that today. I asked her to give Dr Carman my information & also discussed initiations invite, asking her to be sure to ask Dr Carman about an opportunity to go through the presentation with her. Denise promised to forward this information.
PPLPMDL0020000001	Akron	OH	44310	7/8/2011	Introduced Butrans and FPI. Dr. Goswami was interested to learn about Butrans but mentioned that most patients that he deems appropriate have state plans and would not be able to get it paid for. I asked if he thought he had ANY appropriate patients who had a commercial plan and he said he would have to see.
PPLPMDL0020000001	Lakewood	OH	44107	7/8/2011	We reviewed the initiations presentation. When discussing chronic pain patients, he said it's probably about 50-60% of his patients. He counted up the pain patients he saw that morning alone and it was about 4-5 patients. I asked if any of these patients would be appropriate for Butrans and he said that some of them might be. I asked what benefits he sees in Butrans for his patients and he said that he does think that 4 patches per month would be better than patients having to take pills everyday. We reviewed the invitation guide and demo. I asked Laura and Kim if they would help remind the Dr about Butrans when an appropriate patient comes in and they agreed. We reviewed the medication guide and I asked them to give a savings card and medication guide with each commercial script. We reviewed OxyContin as an option when Butrans may not provide adequate
PPLPMDL0020000001	Mayfield Heights	OH	44124	7/8/2011	I went over the Butrans RM presentation with doc to identify appropriate patients. Focused on the cases of Evelyn and John and he thought they helped with where to prescribe Butrans. He was behind already and unable to do the survey but said he would try Butrans. He asked for clarity that 5mg is the starting dose for opioid naive patients. I confirmed and reviewed all the doses. I explained that a low dose of oxycontin may be appropriate for patients requiring greater than 20mcg/hr.
PPLPMDL0020000001	Richmond Heights	OH	44143	7/8/2011	Spoke to MA, Laura about the indication and appropriate patient for Butrans. I asked her if she knew if doc prescribed transdermals like fentanyl. She did not know as she does not see what he is writing when patients leave.
PPLPMDL0020000001	Cleveland	OH	44113	7/8/2011	She said doc is on vacation until 07.18.11.
PPLPMDL0020000001	Mayfield Heights	OH	44124	7/8/2011	talked to dr about his patients taking tramadol every day that arent controlled and asking for something else.dr said he will usually increase tramadol dose to 300mg max then go to vicodin 5mg,showed dr Butrans visual aid,appropriate patients,discussed starting these patients on Butrans,after the 1st tramadol dose wasn't controlling pain instead of increasing tramadol or converting patients to vicodin,dr said he'll consider it but depends on insurance coverage.dr asked if Butrans was covered on Medicaid,we discussed PA requirements for medicaid patients.i recommended Senokot-S
PPLPMDL0020000001	Mayfield Heights	OH	44124	7/8/2011	I asked doc if he is getting mostly newly referred or opioid naive patients. He said some are newer to pain mgmt and some are residual Dr. Yonan patients. I explained that those might be appropriate patients for Butrans. He asked for a reminder of the dosing options and conversion rate. I reviewed the dosing. Explained the guide for dosing conversion are approximations to morphine equivalents. He asked about the use in renal impairment. I referred to the FPI- that no doing adjustment necessary. He asked about the use of supplemental analgesics and if Butrans can be called in. Confirmed both points. Reviewed coverage and savings cards.
PPLPMDL0020000001	Cleveland	OH	44113	7/8/2011	He said he does not like fentanyl but would like to try Butrans. Explained the difference in those patient types. Gave engage invite.
PPLPMDL0020000001	Cleveland	OH	44113	7/8/2011	i talked to dr about her patients taking tramadol,daily,for their chronic pain but not controlled and asking for something else.i showed dr butrans visual aid,appropriate patients and asked dr if she would consider starting patients right after tramadol instead of increasing dose or converting patients to vicodin? dr said she might do that but she has really been thinking of her vicodin and percocet patients to start on Butrans.i asked dr to start 2 patients like we discussed on Butrans,focus on commercial and BWC,dr said she would and we discussed Butrans formulary coverage.i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44104	7/8/2011	talked to dr about her patients taking 1-2.5mg Vicodin,daily,for their chronic pain but not controlled and asking dr for something else.i showed dr Butrans visual aid,appropriate patients and asked dr if she had 2 patients like this? dr said she has a lot of patients taking 1-2 vicodin every day and at some point their pain isnt controlled so they want more pills,higher dosage strength,different medication.i asked dr if it made sense to try Butrans in 2 patients? dr said yes and asked about insurance coverage.we talked about medicaid prior authorization requirements as dr said she has a lot of medicaid patients and commercial plan patients only small% i recommended
PPLPMDL0020000001	Uniontown	OH	44685	7/8/2011	Dr. Stetler said he had several patients on Butrans and most of them were doing well. He said one patient had to be removed from therapy because of application site irritation, which I reported as an AE. I asked if he felt confident continuing to prescribe Butrans for the appropriate patients and he committed to continuing to start new patients on therapy.
PPLPMDL0020000001	Beachwood	OH	44122	7/8/2011	Spoke with Jim & Dr Tabbaa who told me that one of the patients they saw last week had to discontinue treatment with Butrans due to skin discharge & vesicles. I showed FPI 5.9 explaining this adverse reaction & let them know I would report this to Purdue. Dr Tabbaa said that that happens with all patches. I let them know I would still let Purdue know. Dr Tabbaa said this would not prevent him from prescribing Butrans for other patients. He said his patients are getting good results. I asked if they are getting refills of Butrans & Jim said they are. He added that almost all of their patients are on multiple pain medications concomitantly. Also discussed OxyContin q12h for appropriate patients. Jim said he recently got a denial for it from a Medicare plan, but that he is generally not having issues. Reviewed coverage & savings programs.
PPLPMDL0020000001	Cleveland	OH	44104	7/8/2011	talked to dr about her patients taking tramadol,daily,for chronic pain but not getting pain controlled with tramadol,asked dr how often she see's these types of patients? dr said she only has a small group of patients on opioids but does hear occasionally from patients that their short-acting opioids arent controlling their pain.dr said usually patients want more pills.i asked dr if she would consider starting 2 patients,after the 1st tramadol dose doesn't work, on butrans? dr said she would do that if patients are willing to wear a patch once a week.dr asked about insurance coverage and we discussed commercial plan patients and patient savings cards.i
PPLPMDL0020000001	Cleveland	OH	44113	7/8/2011	worked pain management dept-saw dr shen and dale novak,pa; left information for cleveland clinic rheumatologists who have offices here at lutheran hospital-on butrans:butrans fpi,initiation guide,patient information booklet,formulary grid and my business card.
PPLPMDL0020000001	Beachwood	OH	44122	7/8/2011	Spoke with nurse Vickie & discussed initiations presentation, asking her to tell Jennifer about it & ask her if we could go through it at my upcoming lunch. Vickie said she thought it was a good idea & she would let Jennifer know. Vickie said she has been giving out Butrans patient information & savings for Butrans & OxyContin but is OK on her stock of them for now.
PPLPMDL0020000001	Brooklyn	OH	44144	7/8/2011	Dr Detwiler said he had no time to talk today. I reminded him that he has told me in the past that it takes him some time to become comfortable with a product he has never prescribed before & that because of that I would try to bring him new information as it is given to me. I handed him the sealed "special report" & told him that it was information that I just received & thought he may be interested. He told me that the wrapping was intriguing. I let him know this was not an article that I would be able to discuss with him specifically & was for his information only. He said he would not make any promises to read it. Spoke with Trish & reviewed managed care coverage & savings cards for Butrans & OxyContin.
PPLPMDL0020000001	Westlake	OH	44145	7/8/2011	Quick call, I reviewed our last conversation and that the Dr said he would write Butrans as long as it goes through on managed care. I asked if he's had any issues with the managed care and he said he hadn't tried yet. I asked why not and he said he promises to try a few patients.
PPLPMDL0020000001	LAKEWOOD	OH	44107	7/8/2011	Quick call with Pam, we discussed Butrans medication guide and I asked what she thinks will be most important to talk to the patients about. She said probably where to apply it and that it should go on clean dry skin. We reviewed OxyContin as a long acting option when Butrans may not provide adequate analgesia.
PPLPMDL0020000001	Copley	OH	44321	7/8/2011	I asked Dr. heim if he had seen the patients who we had discussed trialing Butrans on. He said that he did not think he had but liked the concept of Butrans and would keep it in mind when he saw those patients.
PPLPMDL0020000001	Lakewood	OH	44107	7/8/2011	I reviewed our last conversation and that the Dr was going to take a closer look at the Butrans info. I asked if he had a chance to do so and what his thoughts were. He said it looks good but has not tried it yet. I asked that type of patients he feels might benefit and he said he could cut back on the number of vicodin each day. We reviewed the initiation guide and I asked if he would try just a few patients on Butrans and he agreed.
PPLPMDL0020000001	Brooklyn	OH	44144	7/8/2011	Spoke with Michelle (pharmacist) who said that she does have a few patients on Butrans now. I asked her if she has been seeing all new prescriptions or if some have been refills. She said that she has at least one person refilling it. Reviewed with her details of savings program & let her know that savings cards could be printed on line at Butrans.com if necessary. Also discussed OxyContin & Ryzolt savings cards. She said she does not move Ryzolt at all & still has some OxyContin cards & did not need more at this time.
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PPLPMDL0020000001	Cleveland	OH	44113	7/8/2011	i talked to dale,pa,in hallway as he was in hospital making rounds and asked him how Butrans dinner program was in May? Dale said it was good,he learned some things about Butrans that he didnt know and would tell me more next week at lunch.i asked dale what feedback he's getting from patients on Butrans? dale said patients seem to have better control of their pain and no complaints of side effects or product falling off,so he's happy with clinical results.
PPLPMDL0020000001	University Heights	OH	44121	7/8/2011	Quick call....introduced butrans to doc - discussed the indication, positioning, CII status and the 7 daye delivery. He asked if it is really for 7 days. confirmed that it is. He asked if its like fentanyl. I explained there is no head to head data and that Butrans can be use as a first line opioid. He asked about medicalid coverage. Told him no coverage on medicalid/medicare but well covered commercially. gave him an initiation guide, engage invite and formulary grid. NO commitment.
PPLPMDL0020000001	Cleveland	OH	44103	7/8/2011	i talked to Mike,Floater Pharmacist,as Amy,Pharmacy Manager is out till monday.Mike said he just had a refill request this morning for Butrans 10mcg but they dont have Butrans 10mcg in stock,only Butrans 5mcg.i talked to Mike about why its so important to order and stock Butrans 5mcg and 10mcg.Mike agreed and said he's calling other pharmacies for patient so they will most likely lose the script.i showed Mike the Butrans patient information booklet and asked him to focus patient discussions on application/rotation of Butrans.mike said he will and he liked the booklet.we talked about commercial plan patients using Butrans patient savings cards and discussed Rite Aid's electronic vouchers so its easy for patients.Mike said if patient has to get a PA for Butrans then she might have to get script on Monday and would go to this pharmacy otherwise if she's commercial insurance she'll go somewhere else today.
PPLPMDL0020000001	Akron	OH	44319	7/8/2011	Dr. Wu said he had patients in mind and has forgotten to prescribe Butrans. I explained that Butrans therapy is the only LAO that is also a schedule 3 that is available and asked if saw that as a benefit which he said he did. I asked if there was anyone he could think of coming in today that he could initiate therapy on and he said he would see and try harder to keep it in mind.
PPLPMDL0020000001	Beachwood	OH	44122	7/8/2011	Quick call- Saw Dr Yokiel at the window & he said he did not have time today & asked what information I had for him. I handed back an initiations invitation & asked him to consider going through the presentation with me at our upcoming lunch so that he may become more comfortable with Butrans. He said he would have to see how much time he had that day. Spoke with Laura who said that Dr Yokiel does have some patients on Butrans & she thought he had been using it more lately. She said that pretty much anyone he is only seeing reps at lunches. I scheduled a follow-up to the upcoming lunch with her.
PPLPMDL0020000001	Akron	OH	44319	7/8/2011	Dr. Yee said that he was still not 100% sure how to initiate therapy. I explained there are 3 doses and the 20 mcg is reserved as a titration dose only. I reviewed initiation using the titration guide and asked what medications the patients were on that he had in mind for Butrans therapy. He said they were all on more than 20 mgs of hydrocodone and I showed him the suggested starting dose was 10 mcgs.
PPLPMDL0020000001	Akron	OH	44319	7/8/2011	Spoke with Gretchen and asked her if she thought Dr. Wu had the right type of patients for Butrans and she agreed that he did. I explained that I was focusing on his patients who were currently failing on their current low dose SA therapy and she agreed that was best.
PPLPMDL0020000001	Brooklyn	OH	44144	7/8/2011	Spoke with pharmacist Gary & reviewed savings information for Butrans, showing him that he can print savings cards for eligible patients on line at Butrans.com. He said this could be helpful. He said that he has seen a couple prescriptions for Butrans but that both were Medicaid & were denied. I asked him what percentage of his business was comprised of Medicaid. He said 60-70%. Discussed managed care coverage & appropriate Butrans patient. He said he definitely thinks there is a place for it, but that unfortunately, patients may not "want it" because they may not be able to abuse it as easily. I told him there is abuse/addiction potential with Butrans as it is an opioid. He said that he does not think it is as abuseable & that many patients will know that & therefore not want it. I told him that those would not be the type of patients who would be considered appropriate. I asked if he needed savings cards for OxyContin or Ryzoil. He said he has enough.
PPLPMDL0020000001	BEACHWOOD	OH	44122	7/8/2011	Sandra (pharmacist) said that she was much too busy to talk to me. Spoke with Monique (technician) & reviewed savings information for Butrans & OxyContin & reminded her of eligibility requirements for these programs (ie no government insurance plans). She said she would give the information to Sandra to review later. Also left my card & let her know I would come back another time.
PPLPMDL0020000001	Lyndhurst	OH	44124	7/8/2011	I asked doc how the patient (that he said he started on Butrans) was doing on their therapy. He said he did not know as he has not heard back from them. I asked what dose he started them on. He said he does not remember and did not have time to day because he is busy as Dr. Kim is out today. Gave him an engage invite and initiation guide.
PPLPMDL0020000001	Lyndhurst	OH	44124	7/8/2011	I reviewed the Butrans indication and CII status and asked Sarah if this is a product that she would/could initiate independent of the doc. She said she is usually seeing follow up patients and might recommend the product to the doc but they usually have to be on board with it first. I asked her if she sees any benefits to Butrans. She said sure - it lasts 7 days. I gave her an initiation guide and asked her to think of Butrans after NSAID or Dr Miguel told me that Dr Detwiler has "a ton" of patients with chronic pain & that he really does not write many pain medications. He asked me if Butrans was dosed every 3 days. I reviewed once-weekly dosing with him & asked him if he also remembered that Butrans is CII & added that it still carries abuse & addiction potential because it is an opioid. He said he did not know that & that it surprised him. I added that CII medications can be called in. He also said he did not know that. I asked him if he realized that that means that Butrans is a CII medication dosed once weekly for moderate to severe chronic pain. He said he "has to" be able to use that for someone & that he would think about patients he could use it in. I also reminded him of OxyContin q12h for patients beyond Butrans & let him know of favorable Medicare coverage.
PPLPMDL0020000001	Cleveland	OH	44104	7/11/2011	talked to dr about his patients taking vicodin 5mg,1-2 tabs daily, that arent controlled and asking him for something different,instead of increasing vicodin dosage strength,i asked dr to convert patients to Butrans.i showed dr Butrans visual aid,appropriate patients page,dr said he might do that if MRI is negative and he doesnt want to give more pills to patients,he'll consider Butrans.i showed dr Butrans initiation guide,dr wanted that on his desk for reference,i told dr to focus on BWC and commercial patients,we talked about OxyContin being an option after Butrans 20mcg isnt controlling patients pain anymore,showed dr OxyContin appropriate patients flashcard and conversion guide,dr took conversion guide and said he will start patients on OxyContin after they are maxed out on all orals.i recommended Senokot-S
PPLPMDL0020000001	Parma	OH	44134	7/11/2011	Caught Dr Mandat in the hallway & asked him if we could continue our discussion about Butrans. He said today was not a good day. I handed him a Butrans "Initiations" invitation & asked him to log on to participate in the program, explaining that it can be a useful tool in learning about the appropriate patient type. He said he would look at it. He said that he does not have patients in his office on opioids because he "doesn't have time to mess around on OARRS". I agreed that OARRS is a great tool to protect his practice & that he should be cautious in prescribing all opioids, including Butrans. He thanked me for the information & walked into a patient room.
PPLPMDL0020000001	Cleveland	OH	44109	7/11/2011	worked internal medicine dept-left Dr.Lindheim,Dr.Harrington,Dr.McCreery,Dr.Falck-Ytter,Dr.Jones,Dr.Eisen and Dr.Ricanati-OxyContin fpl,appropriate patients and challenging flashcards for OxyContin,conversion guides and OxyContin formulary grids,with my business card for each dr as i couldnt see them. worked family medicine-left exact same OxyContin information with my business card for Dr.Forde,Dr.Liu and was able to leave Family Medicine residents information in their mailboxes.
PPLPMDL0020000001	Akron	OH	44333	7/11/2011	I asked Dr. Ross about his success with Butrans and he said that he liked the therapy and that patients were really pleased. He said that based on his initial success he felt comfortable continuing to prescribe Butrans for the appropriate patients.
PPLPMDL0020000001	Akron	OH	44333	7/11/2011	Dr. Shah said he really liked Butrans therapy and is prescribing it first line to appropriate patients. He said he most patients have remained on therapy and he plans on it staying that way.
PPLPMDL0020000001	Parma	OH	44129	7/11/2011	Dr Taylor said she is waiting to find out what the final law will be from House Bill 93 to see what the future of her practice will hold. She said that she did not submit the necessary materials to be grandfathered in as a pain management clinic by June 20th as required, so she does not know what will happen. I asked if she dispenses any medications there & she said she does not. I reminded her of our previous conversations about Butrans & also our discussions about considering Butrans for patients taking chronic Vicodin around-the-clock who request increases in medication. I asked what she typically does for a patient who she had recently started on low dose Vicodin around-the-clock for chronic pain who on follow-up says their medication is wearing off too quickly. She said she increases the dose or dosage interval. I asked if she would instead, choose an appropriate patient to switch to Butrans & she agreed. Also discussed Initiations program & asked her to consider doing it.
PPLPMDL0020000001	Parma	OH	44129	7/11/2011	Introduced myself & Purdue's products to Dr Moss. Delivered Butrans 5 core messages & reviewed box warning. I asked him if he saw any place for Butrans in his practice based on the overview of information. He said perhaps. Discussed appropriate patient type, presenting initiation guide pg 6. He asked me if a patient taking 20mg total per day of Percocet would be a Butrans candidate. I told him that this could be a potential patient. He told me he doubts that would work. I asked why. He said the patient "wouldn't want Butrans because it wouldn't give them a high." I told him that Butrans is an opioid & does carry abuse/addiction potential & added that if a patient was seeking "a high", he may not consider that patient appropriate for any opioid, including Butrans. I asked what his thoughts were on having patients go from short-acting around-the-clock to transdermal & he said they will probably not want to do that. Discussed ability to use supplemental analgesia, managed care, & savings
PPLPMDL0020000001	Cleveland	OH	44115	7/11/2011	i talked to dr about her patients taking tramadol every day,but not controlled,and,instead of increasing tramadol dose or converting to vicodin,i asked dr to start 2 patients on Butrans.dr said she might do that if patients are willing to wear patch and she can trust that they will rotate patch once a week.i showed dr Butrans visual aid,appropriate patients page and Butrans patient information booklet,noting application/rotation section,to help dr educate patients,dr said that will help i asked dr to focus on commercial patients and give them Butrans patient savings cards dr agreed.i recommended Senokot-S
PPLPMDL0020000001	Akron	OH	44333	7/11/2011	Dr. Ahmad said he tried Butrans on an opioid naive patient and initiated therapy at the 5 mcgs. He said he has not heard back from the patient but assumes they are still on therapy. I asked if he thought he would continue to initiate therapy to opioid naive patients moving forward and he said he would continue to keep Butrans in mind.
PPLPMDL0020000001	akron	OH	44333	7/11/2011	I spoke with Dr. Bashor about flagging charts of potential Butrans patients which he agreed. I spoke with Gretchen and we were able to identify 2 patients coming in at the end of the month.
PPLPMDL0020000001	Lakewood	OH	44107	7/11/2011	I asked Dr what seven day dosing might mean to some of his patinetes. He said he thinks they would be more compliant. I reviewed the initiation guide and asked if he would try just a few patients. He said he will try, I reviewed OxyContin as an option when Butrans may not provide adequate analgesia and he does still prescribe OxyContin as an option.
PPLPMDL0020000001	Cleveland	OH	44103	7/11/2011	i talked to Maria Geier,RN,as i couldnt see dr,gave Butrans fpl,initiation guide,patient information booklet,formulary grid and explained managed care coverage for Butrans.Maria said the doctors werent seeing reps as Metro made it a "no-rep" policy,so they stopped booking lunches.Maria said the doctors may be interested in meeting with me individually as this product is transdermal and she thinks there is a place for it, with some of their chronic pain patients.Maria said to stop back later this week or next week and she'll give me some feedback.
PPLPMDL0020000001	Lakewood	OH	44107	7/11/2011	Quick follow up. I asked the Dr if he has a few patients he can start on Butrans instead of incresing their short acting tramadol or vicodin. He said he will. I left the interact card.
PPLPMDL0020000001	Bedford	OH	44146	7/11/2011	Spoke with Echo (MA) who said Dr Haddad said he could not see me today. He asked that I come back another time & I agreed. I reviewed Butrans with Echo & asked her to give Dr Haddad the Butrans special report article. She agreed to do this.
PPLPMDL0020000001	Lakewood	OH	44107	7/11/2011	I asked Dr if he has any other patients in mind who might benefit from 7 day Butrans. He said he will think about it. I asked him what type of patients come to mind and he said he likes it as another option. We reviewed the initiation guide and I asked him to think of patients whose short acting may not be providing efficacy. We reviewed OxyContin as an option when Butrans may not provide adequate analgesia.
PPLPMDL0020000001	Lakewood	OH	44107	7/11/2011	Quick call, I reviewed the key messages for Butrans and asked if he has just one patient today where tramadol or vicodin is not controlling their pain who could benefit from Butrans. He said he would prescribe it.
PPLPMDL0020000001	Lakewood	OH	44107	7/11/2011	Walked with Dr on his way to the hospital. I reviewed our last conversation about Butrans for patients instead of going to vicodin. I asked if he has any other patients who might benefit from Butrans and he said he will continue to give it a try. Reminder about the managed care for Butrans and that OxyContin is an option covered by Medicaid.
PPLPMDL0020000001	Lakewood	OH	44107	7/11/2011	I asked the Dr what benefits he sees in Butrans for his patients. He said that patients might be able to take less tablets. We reviewed the key messages and asked him if he can think of a few patients who could benefit and he could start on Butrans, he said that he will try. I reviewed the Butrans managed care. Reminder about OxyContin as an option that is covered on Med D AARP and Medicaid.
PPLPMDL0020000001	Fairlawn	OH	44333	7/11/2011	I asked Dr. Oyakawa if he thought Butrans had a place in his practice and if he thought he would trial it on just one patient so he could get some patietn feedback. He said he would prescribe Butrans if and when the right patient presented.
PPLPMDL0020000001	Beachwood	OH	44122	7/11/2011	Quick window call- Dr Warren said he would not have any time for a discussion today. I let him know I would return at a more convenient time & handed him a Butrans Initiations invitation, asking him to consider logging on to go through the interactive experience or consider going over it with me at our upcoming lunch. He said he would have a look. I told him it would be a good tool to practice initiating Butrans in different patients.



PPLPMDL0020000001	Westlake	OH	44145	7/11/2011	Quick follow up, I reviewed our last conversation and reviewed the conversion guide again. I asked if he would try just a few of the patients that we discussed and he said he will. He was concerned about managed care, and we reviewed the managed care. I reminded him about OxyContin as an option that is covered on Medicaid.<font color=blue><b>CHUDAKOB's query on 07/28/2011</b></font>Andrea, we do not have a conversion guide for Butrans, only an initiation and titration guide. Just wanted to clarify that they are not synonymous.<font color=green><b>HOLUBA's response on 07/29/2011</b></font>Thank you, I do know it is only an initiation guide.<font color=blue><b>CHUDAKOB added notes on 07/30/2011</b></font>Ok. Thanks!
PPLPMDL0020000001	Parma Heights	OH	44129	7/11/2011	Spoke with Al (pharmacist) who looked through some prescriptions & recommended Dr Levin, Dr Demagone, & Dr Salewski as physicians who I may want to contact regarding Butrans. He gave me their addresses & phone numbers. He said he has not dispensed any Butrans yet, but sees a place for it & believes area physicians will catch on at some point. Reviewed savings program & offered OxyContin & Ryzoil savings cards but he said he has enough for now. He said he would continue to think of physicians for me to discuss Butrans with.
PPLPMDL0020000001	Rocky River	OH	44116	7/11/2011	Spoke with Kim, we reviewed the Butrans medication guide and steady state. I asked what info she thought was important to let the patients know about for Butrans and she said probably where to apply it. We discussed The initiation guide and the types of patients that may be appropriate for Butrans. I reviewed when OxyContin may be an option where Butrans may not provide adequate analgesia.
PPLPMDL0020000001	Parma	OH	44129	7/11/2011	Quick call- Saw Dr Ortega at the window & gave him a Butrans "Initiations" invitation. I asked him to either log on & participate in the interactive program or to consider going over it with me during an upcoming visit. He said he would have a look. Also gave him "Special Report" sealed information. He said he would look it over. He added that he has no new questions on Butrans & then walked into his office. Spoke with Cindy & reviewed savings cards for Butrans & OxyContin. She said she has enough savings cards & patient education for now. She said she has not heard from any pharmacists or patients regarding Butrans lately.
PPLPMDL0020000001	Fairlawn	OH	44333	7/11/2011	Dr. Weidman said she had a patient come in that she had written Butrans for but the patient is scared to get the Rx filled. She said she had prescribed a 5 mcg and she was going to talk to the patient about the benefits of
PPLPMDL0020000001	Westlake	OH	44145	7/12/2011	Quick call, with Jamie, we reviewed the Butrans medication guide for patients. He has not received any feedback yet regarding Butrans. Reminder that OxyContin is still another long action option for appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44109	7/12/2011	showed dr butrans visual aid,5 core messages and I asked dr what features of Butrans were important to him? dr said he likes that butrans is transdermal,dosing once a week is appealing for some patients and its a CII so he can call in refills.I showed dr Butrans visual aid,appropriate patients section,discussed doctors patients taking tramadol every day but not controlled and considering Butrans as an option for them instead of increasing tramadol dose or converting them to Vicodin.dr said that made sense and he will consider that but he hasn't had any patients complain of their short-acting opioids lately,so he'll keep it in mind.dr asked who covers butrans? I showed dr butrans formulary grid and asked dr to focus on commercial patients so they can use butrans patient savings cards.dr said ok and I told dr I would be back on Friday to see if he started anyone by then,dr said he will keep butrans in mind.I recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	7/12/2011	dr said he's got a handful of patients on Butrans and they are doing well.dr said he's realizing most of his patients need to be started on Butrans 10mcg and probably will end up being titrated on Butrans 20mcg.I showed dr Butrans visual aid,discussed appropriate patients and I asked dr if he's thinking of his chronic pain patients that are only taking 1-2 vicodin,5mg,but not controlled? dr said if patients complain to him,on that dose,then he'll think of Butrans.we talked about Butrans formulary coverage.
PPLPMDL0020000001	Parma	OH	44129	7/12/2011	Quick call- caught Dr Tolentino at the window briefly & invited her to do the Butrans "Initiations" program. She said she did not have time & that she does not do "those online things". She asked me to give her nurse, Kathy, more Butrans information. Kathy said that Dr Tolentino was just asking her about Butrans & had requested additional information, so my timing was ideal. I asked if she knew specifically what she was looking for but Kathy did not know. I gave her sealed "Special Report" article & let her know I would not be able to discuss it's contents. Also reviewed appropriate patient type & savings cards. She said she would give the information to Dr Tolentino & I let her know I would return to follow-up to ensure her questions have been answered.
PPLPMDL0020000001	Westlake	OH	44145	7/12/2011	Spoke with Amid, we reviewed the medication guides for Butrans and I asked what he thought would be most important for him to tell his patients. He said that they should know that it might take 3 days to fully start working. We reviewed the demo and how to apply Butrans. Reminder that OxyContin is still a long acting option when Butrans may not provide adequate analgesia.
PPLPMDL0020000001	Cleveland	OH	44109	7/12/2011	only got a few minutes with dr dr said he didnt remember anything about Butrans other than it was transdermal.I showed dr Butrans visual aid,we discussed 5 core messages and I asked dr what were some features about Butrans he did like? dr said the fact that butrans is a patch and dosed once a week. dr said he was surprised to see butrans be a CII but that was good.I talked to dr about Butrans being a CII so he could call in 5 refills up to 6 months.dr asked if butrans was covered on medicaid? I asked dr if he was ready to prescribe since he was asking me about insurance coverage? dr said no he needs to read Butrans fpi again and look over information but was wondering about medicaid coverage as he has a lot of those patients.I shared with dr Butrans prior authorization requirements for Medicaid but asked dr to focus on commercial plan patients so they can use Butrans patient savings cards and BWC patients.dr said ok and he would talk to me Friday at lunch.
PPLPMDL0020000001	Shaker Heights	OH	44122	7/12/2011	Dr Agarwal said he has "thought of" Butrans but is not sure where he would use it. I asked him how often he sees patients who are on chronic Vicodin or tramadol. He asked if I meant in nursing homes or in the office. I said either. He said daily, most frequently in nursing homes. I asked what he does if those patients ask for more or complain it is not working. He said many of them. He said he goes to tramadol right after NSAID's & then Vicodin. I asked why not Butrans there. He said he typically refers to pain management if a patient needs chronic pain medications, especially in the office. He said more than 1 month is chronic. He asked if he could prescribe one month at a time. Reviewed managed care & savings, CII, abuse/addiction potential & box warning. Dr Agarwal said he would try Butrans on a few patients for one month to see how it goes. Also discussed 7 available OxyContin strengths, Ryzoil q24h dosing, & OTC products.
PPLPMDL0020000001	Westlake	OH	44145	7/12/2011	I asked Dr if he was going to see any BWC patients today who's pain is not well controlled on short acting. He said he probably will. I asked if he would start them on Butrans instead of increasing the dose, and he said he will because he is trying to taper patients down on their current doses of opioids. I gave the interact invite and encouraged him to check it out on line.
PPLPMDL0020000001	South Euclid	OH	44121	7/12/2011	I reviewed the Butrans indication, positioning, and dosing. she said she was just thinking about butrans as she saw the savings cards. She does have some appropriate patients and she is ready to try it. She has patients that complain about their current analgesic therapy. I showed her how to initiate for opioid naive and experienced patient. I showed the formulary grid and she confirmed that she has some of the plans.
PPLPMDL0020000001	Cleveland	OH	44130	7/12/2011	Quick call- I handed Dr Diab a Butrans "Initiations" invitation, explaining that it is an exciting new interactive tool to aid him in becoming more familiar with Butrans & various appropriate patients. He said he would have a look at it & walked into a room. Spoke with MA Karen & scheduled breakfast & also reviewed savings cards for Butrans & OxyContin with her.
PPLPMDL0020000001	Parma	OH	44129	7/12/2011	I invited Dr Roeheny to log on to the Butrans "Initiations" program, telling him that it would be a good interactive tool for him to utilize to identify patients who may benefit from Butrans. I asked if he had gotten feedback from the patient who he said he prescribed Butrans for & he said no. He said that he has, however, been thinking of it. I asked him what is preventing him from converting his thinking into action. He said he wasn't sure. I told him that was one reason I thought of him for the "Initiations" program. He said he might have a look. Reviewed with him buprenorphine molecule & appropriate patient type & he said he would try to find more patients.
PPLPMDL0020000001	Garfield Hts	OH	44125	7/12/2011	I stopped Dr Sadowski in the hallway by handing him a Butrans "Initiations" invitation, explaining that it would be good practice for him in identifying patients who may benefit from Butrans. He said it sounded interesting but he could not do it right now. I let him know we could sit down & do it at an upcoming lunch. Started to discuss appropriate patient type, but he had to take a call from the hospital. Spent time with Dina reviewing appropriate patient type. She said she has been keeping an eye out for an opportunity as she thinks some of the patients could really benefit from a once weekly transdermal option for pain.
PPLPMDL0020000001	Cleveland	OH	44106	7/12/2011	showed dr Butrans visual aid,discussed appropriate patients to start on Butrans,I asked dr if he would consider Butrans for patients taking 1-2,percocet 5mg,if that dose isnt controlling patients pain? dr said he might if patient's willing to try something different.dr said he's been thinking of Butrans for those patients who have been calling into office for refills earlier and asking for more pills.I told dr that was a great place too,but could he think of 2 patients that are taking 1-2 5mg Percocet,that arent controlled and start them on Butrans? dr said he will consider that.we talked about OxyContin being available after Butrans 20mcg,7 tablet strengths and OxyContin formulary coverage.I recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44106	7/12/2011	I talked to dr about his patients taking tramadol,daily,but calling in early every month requesting more pills and perhaps considering Butrans for those patients if they are appropriate.dr said he has a lot of those patients and its just easier to refill their pills when they call into office than bring them into office and discuss a new product.I showed dr Butrans visual aid,appropriate patients section and asked dr if he could start 2 patients,per our discussion,on Butrans and NOT refill their tramadol? dr said he will do that its been tough because he's been traveling so much and out of office.dr asked if Butrans was a CII,I showed Butrans visual aid noting Butrans was a CII which meant he could call in 5 refills up to 6months,dr said that was good to know and he'll put initiation/titration guide in front of him to remember Butrans.
PPLPMDL0020000001	Cleveland	OH	44113	7/12/2011	dr said he remembers that Butrans is a patch dosed once a week and is for more moderate chronic pain patients that are taking tramadol,vicodin or percocet and not controlled.I told dr that was correct,showed Butrans visual aid and discussed appropriate patients section.I asked dr if he had patients taking tramadol,daily,that arent controlled and calling office for refills earlier every month? dr said yes but the problem is that 60% of his practice is medicaid,then uninsured,medicare and small percentage of commercial plan patients.dr said his chronic pain patients that would be right for Butrans are medicaid and most of them havent tried 2 long-acting opioids so he couldnt meet medicaid's prior authorization requirements to get approval for Butrans.dr said his small percentage of commercial patients tend to be working and overall healthy.dr said if the healthy patients get injured,have chronic pain and lose jobs,they end up on medicaid or cash paying so it will be tough for him to prescribe Butrans.we discussed OxyContin being an option after Butrans 20mcg,7 tablet strengths,showed Challenging flashcard for OxyContin and discussed conversion and titration with dr.dr said he has some patients on OxyContin and those patients are controlled and happy with their regimen so no need to change them.we talked about OxyContin formulary coverage.I recommended Senokot-S
PPLPMDL0020000001	Solon	OH	44139	7/12/2011	Spoke with nurse, Deborah, who said that Dr Zaidi is out of the office all week. She asked that I come back next week to see him. Reviewed Butrans & OxyContin savings cards, neither of which she needed more of. Also checked her stock of OTC samples, but she did not need any more of them either.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/12/2011	Quick call through the window. Dr. Bicak said that she still had not initiated Butrans therapy but would keep it in mind. She took the initiation guide and left. No new info learned.
PPLPMDL0020000001	Westlake	OH	44145	7/12/2011	Quick call, I asked Dr if he had all the info he needed regarding Butrans, he said he did, but he has not prescribed it yet. He said he does have some patients in mind and he will give it a try. I gave him interact invite and encouraged him to register on line.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/12/2011	I asked Dr. Crawford if he had changed his prescribing habits and felt anymore comfortable prescribing chronic pain and he said he did not. He said that he is primarily just maintaining patients and RARELY starts anyone on a pain med long term.
PPLPMDL0020000001	Akron	OH	44310	7/12/2011	Dr. Cremer said patients were doing well on Butrans and he was pleased he was having success. No new info learned.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	7/12/2011	I asked Dr. Dilauro if she was able to identify any patients coming in this week as Butrans patients. She mentioned that she had several patients in mind but was unsure of when they were coming in.
PPLPMDL0020000001	Westlake	OH	44145	7/12/2011	I reminded Dr about key Butrans messages and I asked Dr if Butrans would offer a benefit for his patients. He said it would but some of his patients might not want to give up their short acting. I reviewed that he can use short acting as supplemental analgesia so they don't have to give their short acting completely. He said he will give it a try. Reminder about OxyContin as an option when Butrans may not provide adequate analgesia.
PPLPMDL0020000001	Parma	OH	44129	7/12/2011	Spoke with MA Karen who said that Jen is gone all this week & will return Monday. I discussed Butrans "Initiations" invitation & explained the program. I asked if she thought Jen may be interested in doing it & she said she might be & that she would give the invitation to her when she returns. Also asked about their supply of Ryzoil savings cards but they have an ample amount. Karen promised to give Jen the information I left & confirmed lunch for the following week.
PPLPMDL0020000001	Westlake	OH	44145	7/12/2011	I asked Dr about his success so far with Butrans, he said it seems t o be working fine and he hasn't had much feedback. I reviewed the managed care and savings cards and Juan left the cards on his desk as a reminder for him to prescribe Butrans today. Reminder that OxyContin is still an option that is covered on Med D AARP and Medicaid.
PPLPMDL0020000001	Cleveland	OH	44109	7/12/2011	worked pm&r dept-see call notes and booked lunch for Friday July 15th with attendings and residents
PPLPMDL0020000001	Parma	OH	44129	7/12/2011	Spoke with MA Shari & discussed Butrans "Initiations" invitation. She said that Dr Paat will not do online programs because he is not very technologically savvy. I let her know that we may be able to do it together & she recommended my next lunch as a possible time to do this. I asked her to give Dr Paat Butrans invitation & "Special Report" sealed article & she agreed, saying she would remind him about Butrans & the savings cards.

PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/12/2011	Dr. Pitt said the one patient he had tried on Butrans was still doing good. He said the he did not mind me continuing to work with Liz in an effort to identify additional patients however managed care is definitely an issue. Reminded him of OxyContin for patients passed the point of Butrans and of managed care.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/12/2011	I saw Dr. Raniol quickly through the window and asked how often she was treating patients with a low dose SAO and she said more often then she would like. I explained Butrans utilizing the initiation guide and explained it may be an option for those types of patients.
PPLPMDL0020000001	Parma	OH	44129	7/12/2011	Spoke with Georgia (technician) who said Jackie was not in & a floater pharmacist was there today. I reviewed details of Butrans savings program/e-voucher with her & also discussed OxyContin & Ryzoft savings cards. She checked stock & said they are OK on their supply. She said to stop back another day to catch Jackie.
PPLPMDL0020000001	Cleveland	OH	44106	7/12/2011	worked pain management dept-see call notes, worked family medicine dept-left Butrans fpi's, initiation guides, patient information booklets, formulary grids and my business cards for each doctor in family medicine-had to leave with front desk receptionists as dept doesnt do lunches and doctors dont see reps unless they call you for appointments
PPLPMDL0020000001	Cleveland	OH	44121	7/12/2011	I asked doc where he would likely prescribe Butrans. He said for opioid naive -or patients that he does not want to put on a stronger opioid. I explained that 5mcg would be the appropriate starting dose for those patients. I asked him to focus on commercial patients and give a savings card. He admitted that he had not given any out. I asked what hesitations he had about trying Butrans. He said nothing (his initial concern was cost). He said he is still having good success with oxycontin and in fact, he has to sell it to some of his patient. I reviewed the preferred formulary coverage.
PPLPMDL0020000001	Cleveland	OH	44113	7/12/2011	I talked to Maria Geier,Nurse Manager,about Butrans fpi,initiation guide and showed her Butrans visual aid.Maria said Metrohealth Medical Center(they are a part of this hospital)cancelled all lunches.Maria said dr is gone for next 2 months on vacation and returning to work in september but she thinks the other physicians:Dr.Van Auker,Dr.Gillespie,Dr.Cicec would all be interested in speaking with me about Butrans. Maria asked me to give her a Butrans fpi,initiation guide,patient information booklet and my business card for each physician and said to follow-up in a week with her.
PPLPMDL0020000001	Cleveland	OH	44105	7/12/2011	I talked to Debra,Receptionist,who said they arent doing lunches anymore and all i could do was leave information for the dr.Debra said if dr is interested in speaking with me,he will contact me.I was able to leave Butrans fpi,initiation guide,patient information booklet,formulary grid,OxyContin fpi,OxyContin formulary grid and OxyContin conversion guide with my business card
PPLPMDL0020000001	Cleveland	OH	44130	7/12/2011	Spoke with Allison (pharmacist) & reviewed appropriate Butrans patient type & savings program/eligibility. She said she has not seen any prescriptions for it yet. She said it is possible that when the changes with the higher doses of acetaminophen with combo medications takes place, Butrans will have a better opportunity. Reviewed OxyContin & Ryzoft savings programs & gave her a package of OxyContin cards per her request.
PPLPMDL0020000001	C. Falls	OH	44223	7/12/2011	Spoke with the pharmacist Larry to see if they had any further questions about Butrans. I explained the core messages I had been discussing with local physicians. Larry said there had no movement for some time.
PPLPMDL0020000001	Westlake	OH	44145	7/12/2011	I reviewed the key messages and reviewed a previous conversation where she had concerns about managed care. I reviewed the managed care and asked if she has just a few patients on tramadol or short acting around the clock that she can try Butrans. She said she will give it a try.
PPLPMDL0020000001	Cleveland	OH	44114	7/13/2011	dr said he started another patient on Butrans.I asked dr why he started that patient on Butrans? dr said Butrans was taking a couple percocet a day and not controlled and wanted more pills so dr told patient Butrans was only option and he would give percocet for breakthrough pain,patient agreed to try Butrans.I showed dr butrans visual aid,appropriate patients and application/rotation of Butrans in patient information booklet. We discussed Butrans formulary coverage
PPLPMDL0020000001	Middleburg Heights	OH	44130	7/13/2011	Introduced myself to MA Nicole & let her know that Amy had instructed me to come in to see Dr Tenpenny to tell her about Butrans per her request. Reviewed appropriate patient type with Nicole & also managed care/savings cards. Worked with Nicole to set up an appointment to meet with Dr Tenpenny & her staff to go over Butrans details in more depth as she indicated that she has at least one patient in mind who she would like to try to switch to Butrans. Also asked Nicole to give Dr Tenpenny Butrans information, which she agreed to do.
PPLPMDL0020000001	Cleveland	OH	44128	7/13/2011	Spoke with pharmacist Mark & inquired about Butrans stocking. He said that he does not stock it & that this location is a very high Medicaid store. Reviewed e-voucher & discussed eligibility. Also discussed OxyContin stocking, which he said he does carry there but had no time to check the exact strengths. He said he does not stock Ryzoft. Offered a package of OxyContin savings cards & reviewed details & eligibility requirements.
PPLPMDL0020000001	Brooklyn	OH	44130	7/13/2011	Spoke with pharmacist Danielle who said she has at least 2 customers on Butrans. I asked her if they were getting refills or if these were just "one timers". She said the two she is thinking of are filling refills. She said she stocks the 5 & 10mcg as these are the doses the patients are on & she has heard no feedback from either of them. Discussed titration ability every 3 days if necessary & reviewed savings program. I asked her to check her stock on OxyContin savings cards- she said she has enough for now. I offered Ryzoft value cards & she accepted them.
PPLPMDL0020000001	University Heights	OH	44121	7/13/2011	Reminded doc of the Butrans indication, 7 day delivery and CII status. I asked him to prescribe Butrans after tramadol failures or before going to vicodin ATC. Again, he said patients like taking tablets all day. I asked him to think of butrans for those that prefer not to take tablets. I reviewed the commercial formulary coverage and the initiation dosing.
PPLPMDL0020000001	Maple Heights	OH	44137	7/13/2011	Spoke with Kathy (MA) & discussed Butrans "Initiations" program, handing her an invitation for Dr Dale. She said I should schedule a lunch to go over it with him. I reviewed Butrans appropriate patient type, dosing, delivery system, & savings cards with her. She said she has not heard anyone in the office talk about it so she does not think they are using it. I asked if they see patients who fit the appropriate patient type we talked about & she said they see them frequently. I asked her to give Dr Dale the invitation along with the "Special Report" sealed article & she agreed to do this.
PPLPMDL0020000001	Maple Heights	OH	44137	7/13/2011	I spoke with MA Kathy & reviewed Butrans "Initiations" invitation & asked if she thought Dr Gene may want to go through it during a lunch. She said he might & that she would give him the invitation. I also asked her to give him a sealed "Special Report" article & she agreed to do this. I reminded her of Butrans appropriate patient type, dosing, delivery system, & savings cards. She said she does not think either doctor has used it yet. I asked her to please remind him by giving him the information I left with her & she agreed & said she does think they see patients there frequently who fit the appropriate patient type we talked about.
PPLPMDL0020000001	Akron	OH	44320	7/13/2011	I asked Dr. Dupstadt if she thought there was any benefit to initiating Butrans therapy to the appropriate patients at her practice. She agreed there was a benefit but said that managed care was a huge obstacle but committed to keeping it in mind for appropriate patients who have a private insurance.
PPLPMDL0020000001	Independence	OH	44131	7/13/2011	Dr Jack said he was glad to see I hadn't given up on them on writing Butrans yet. I told him I had no intention of doing so & that I would continue to bring him weekly insight as to how Butrans may fit into his practice & to find out how it may benefit some of his patients. He asked me to tell him "how well it works". I told him the best way to find that out was to find one or two appropriate patients like the ones we have been talking about to try on it so that he could get his own clinical feedback. He said, "That's right, one or two is all you need, right?" I told him it was not a matter of my needs, but rather a matter of if he saw a benefit in Butrans for his patients. He said he is going to prescribe then walked away. Worked with Maria to schedule a lunch & reminded her of delivery system & appropriate patient type.
PPLPMDL0020000001	Maple Heights	OH	44137	7/13/2011	Spoke with Marge (MA) & discussed Butrans "Initiations" invitation. I asked if she thought Dr Yager would be more likely to want to go through it with me during an appointment or if he would want to do it online on his own. She said she was not sure but she would ask him about it. I also asked her to give him the sealed "Special Report" article. Reminded her of Butrans once weekly application & appropriate patient type. She said she would give Dr Yager the information & scheduled a lunch.
PPLPMDL0020000001	Cleveland	OH	44114	7/13/2011	I talked to dr about her patients taking 1-2 tabs,vicodin 5mg,every day,and not controlled asking for something different,considering Butrans. I showed Butrans visual aid,discussed appropriate patients and dr said she will consider Butrans for those patients if patients want to try something different.dr said her patients taking Butrans are doing well,so no complaints.we talked about BWC and commercial plan patients being focus for dr when starting patients on Butrans<font color=blue><b>CHUDAKOB's query on 07/28/2011</b></font>Amy, there is no reason for you to write in your call notes "showed visual aid", or "discussed appropriate patients. These general statement just make more writing for you and do not satisfy any compliance requirements. You would be better served by writing the specific point in the visual aid you used to emphasize your point in the conversation, or the specific appropriate patient you discussed.<font color=green><b>BROOKAM's response on 07/31/2011</b></font>ok thank you for pointing this out.)<font color=blue><b>CHUDAKOB added notes on 08/02/2011</b></font>No problem! I hope it helps!
PPLPMDL0020000001	Cleveland	OH	44113	7/13/2011	Dale,PA,was at lunch with Dr.Shen,RMP target,so he discussed 4 case studies with us and if Butrans was appropriate.Dale said if patients have chronic pain they shouldnt be taking short-acting analgesics around the clock,they should be taking a long-acting opioid.Dale said he's started a few patients on Butrans and these were all patients taking short-acting analgesics that werent controlling their pain so patients asked him for something different.I showed Dale Butrans visual aid,appropriate patients section,asked if he would ever consider Butrans for an opioid naive patient,so not going to short-acting analgesics if patient has chronic pain? dale said yes he would as he believes chronic pain should be treated with a long-acting opioid.I showed Dale Butrans initiation guide,discussed Butrans 5mcg for opioid naive patients and showing patients Butrans patient information booklet noting application/rotation of Butrans,Dale said he does give booklets to patients but will be sure to discuss that section with patients.I asked dale what his thoughts/feedback were from May 24th Butrans peer group dinner? Dale said he liked the speaker,the presentation with case studies was helpful BUT he did NOT like the Peer Group Moderator and was confused as to why this person was even at the dinner as the Moderator is not a Clinician and really had no place in discussing the information with them.I told Dale I appreciated his honest feedback.
PPLPMDL0020000001	Cleveland	OH	44113	7/13/2011	presented initiations to dr,discussed 4 patient case studies,dr said she wouldnt consider Butrans for opioid naive patients,I asked dr to tell me more about that,dr said she would start with short-acting analgesics first as many patients like to "feel" the medication immediately and since long-acting opioids take longer to reach steady state there are a lot of patients who dont like long-acting opioids for that reason, of not "feeling" the medication right away.I asked dr who was the appropriate patient in her mind then? dr said patients taking low dose vicodin,when thats not controlling patients pain,go to Butrans right there instead of going to percocet.I told dr that that was great she has that patient in mind and could she continue starting those patients on Butrans? dr said yes,we discussed importance of Butrans patient information booklet to discuss application/rotation of Butrans,dr said she and Yasmin,MA,do give the booklets and they help patients understand Butrans more.we discussed butrans formulary coverage and patient savings cards for commercial plan patients.I recommended Senokot-S
PPLPMDL0020000001	Akron	OH	44320	7/13/2011	Misty said she had taken some patients off Butrans because they felt it was not efficacious. She did say that she would continue to trial Butrans and remains an advocate.
PPLPMDL0020000001	Copley	OH	44321	7/13/2011	I stopped back in to find out where Dr. Heim initiated Butrans therapy since he showed up on early view. I asked how he was able to identify that patient as a Butrans patient and he said they weren't stable on their SAO's and thought it would be a good opportunity to trial Butrans. I asked if he had other patients he could continue to trial it at and he said he thought so.
PPLPMDL0020000001	University Hts	OH	44118	7/13/2011	Window call...Reminded doc of the Butrans indication, 7 day delivery and CII status. I asked him to prescribe Butrans after tramadol. Gave him formulary grids for oxycontin and butrans and informed him that both are covered by BWC.
PPLPMDL0020000001	Parma	OH	44129	7/13/2011	Quick call- Dr Gigliotti said he was running too far behind today & that he had to get out of the office as early as possible tonight. He said he "is still looking" for a Butrans patient. I handed him a Butrans "Initiations" invitation & let him know that the interactive program would help him with this. I let him know I would return at another time to go through it with him.
PPLPMDL0020000001	Cleveland Heights	OH	44118	7/13/2011	Doc could not stay for the entire lunch. I did go over the case study of Evelyn with him. He said he thought butrans was like a fentanyl. I explained that there is no head to head with duragasic and that butrans is a 7 day, CII. I asked him if he has patients that could benefit from Butrans. He said sure and that he is going to try it. I reviewed the formulary coverage and the dosing.
PPLPMDL0020000001	Cleveland	OH	44106	7/13/2011	talked to dr about the few patients he started on Butrans,dr said he's not gotten feedback and just saw Andrea yesterday and told her the same thing, he hasn't heard back from patients so that's probably a good sign that it's working well for them. I talked to dr about considering patients who take tramadol,daily,but not controlled and starting them on Butrans and showed butrans visual aid for discussion.we discussed insurance coverage and patients using Butrans patient savings cards.
PPLPMDL0020000001	Norton	OH	44203	7/13/2011	Talked to Dr. Rucker quickly through the window as I left the OxyContin cards he requested. I mentioned that Butrans was now on the market and introduced the indication and once a week dosing via the FPI. He said he would read the info if I left it behind which I did.
PPLPMDL0020000001	Cleveland	OH	44106	7/13/2011	worked pain management dept - see call note

PPLPMDL0020000001	Cleveland Hts	OH	44118	7/13/2011	Opened the call by discussed the butrans indication and explained how the presentation would show patients that are appropriate and those that are not appropriate. I started with Evelyn's case study and he thought that her scenario was unrealistic. He said that he had a patient in mind...she was on tramadol and it was not working. She started her on duragesic but she could not tolerate it. He believes she may be a medicare patient though. I reviewed the formulary grid and explained the possible cost with the savings cards. he said the problem has been identifying the right patient. He said he would try it. I clarified that 20mcg is only a titration dose. A patient needing more than that is likely a patient for low dose oxycotin.
PPLPMDL0020000001	Bedford	OH	44146	7/13/2011	I asked Dr Moufawad what types of patients he is considering "Butrans patients" at this point. He said mostly new patients. I asked him if he could tell me more about those patients. He said that most recently, he had a male patient who had been abusing Percocet & alcohol but was in pain. Dr Moufawad said that he put the patient on 5mg & then titrated him to the 10mcg. He said he told the patient that Butrans was the only medication he was willing to give him & so far the patient is happy with his pain relief. Dr Moufawad added that the patient's insurance would not cover it but he did not remember the plan. Reminded him of savings cards & he said he did give that patient one. I also reminded Dr Moufawad that Butrans is indicated only for pain & also that it is an opioid & therefore is abusable. He said he is aware & is monitoring this patient closely. Gave him Butrans "Initiations" invitation & asked him to take part in the interactive program. He said he does not have time.
PPLPMDL0020000001	Parma	OH	44134	7/13/2011	Spoke with Dave (pharmacist) who confirmed that they do stock Butrans & have a few patients on it regularly. I asked if they now have all 3 strengths & he said yes. Reviewed savings program & e-voucher with him. Also discussed OxyContin stocking. He said the demand they have seen at that location for OxyContin has "diminished substantially because now Opana is the abused drug of choice". I asked what he meant & he said that since the OxyContin reformulation, he has seen a decrease in OxyContin prescriptions & increase in Opana demand because "Opana is more abusable". I told him we have no data to suggest that the reformulated OxyContin is less abusable & that we ask physicians to be just as cautious. He said he understands. Reviewed savings cards for OxyContin for eligible patients.
PPLPMDL0020000001	Cleveland	OH	44102	7/13/2011	I talked to Vince, Pharmacist, he said they haven't seen any scripts for Butrans and isn't going to order any strengths of Butrans until he sees that 1st script. We discussed importance of stocking but Vince said this is business and he doesn't want Butrans to sit on shelf. I gave Butrans initiation guide, showed Butrans visual aid and asked Vince what he felt were some important features of Butrans? Vince said once weekly dosing is a benefit for some patients. Lisa, pharmacy tech, asked about Butrans adhesion to skin and if it fell off a lot? I showed Lisa Butrans medication guide and patient information booklet discussing use of first aid tape or dressings over Butrans if there is an adhesion issue. Lisa said ok because that's usually patients concern when they hear transdermal/patch. Vince said to check back next month on Butrans scripts/stocking.
PPLPMDL0020000001	Norton	OH	44203	7/13/2011	Presented Butrans briefly through the window to both Dr. Grady and Rucker. My time was limited so I introduced Butrans via the FPI and focused on the once a week dosing. Both docs requested I leave info for their review, which I did.
PPLPMDL0020000001	Cleveland	OH	44113	7/13/2011	I talked to Justin, Pharmacist and Maria, Pharmacy Tech, about Butrans stocking and Justin said they have all 3 dosage strengths but he hasn't seen a script for Butrans since May and that was from Dr. Shen. We discussed Butrans 5 core messages and I asked Justin what he felt were some important features about Butrans? Justin said transdermal, once weekly dosing and the fact that Butrans is a CIII so hcp's can call in refills makes it easier on hcp offices. I asked Justin if he would recommend Butrans, to physicians, if patients are telling him their short-acting opioids aren't controlling their pain anymore? Justin said he'll do that but he doesn't hear that statement too often, usually patients like their pills and want more from dr. I showed Justin Butrans patient information booklet, discussed application/rotation of Butrans and asked Justin to focus his discussions with patients on that area, he said ok he would do that. We discussed OxyContin stocking, Q12H dosing and formulary coverage. Justin said they have seen less scripts for OxyContin and more Opana ER but that's due to the reformulation and he felt good.
PPLPMDL0020000001	Independence	OH	44131	7/13/2011	Quick call: Dr Rob said he was in a hurry & "not in the mood" for talking. I let him know I would return at a better time & handed him a Butrans "initiations" invitation & explained the interactive nature of the program to him. I let him know we could sit down together to go through it in the office or he could log on at his leisure to go through it. He thanked me & walked into a room.
PPLPMDL0020000001	Cleveland	OH	44104	7/14/2011	I asked dr what she recalled about Butrans? dr said she didn't remember anything. I showed dr Butrans visual aid, 5 core messages and asked dr if she has any patients taking tramadol every day for their chronic pain but aren't controlled? dr said her patients taking short-acting opioids have acute pain and are controlled, when patients get to the point of having to take short-acting opioids daily and have chronic pain dr will convert patients from tramadol to vicodin and if they still need more she'll refer to pain management. dr said a lot of her patients go to Cleveland clinic pain management for blocks, stimulants and injections and don't continue on chronic opioid therapy. I asked dr if Butrans would be an option, after tramadol didn't control patients pain, instead of converting patients to vicodin? dr said maybe, she'll keep Butrans in mind but transdermal systems work for some patients and others it doesn't. I agreed with dr that Butrans won't work for everyone but she at least had an option to go to after tramadol, dr said that made sense. dr said she doesn't have a lot of patients that she would consider chronic pain. I showed dr Butrans visual aid, appropriate patient section discussed Butrans 5mcg for patients taking less than 300mg tramadol a day and we discussed titration of Butrans and patient savings cards for commercial plan patients and BWC coverage for Butrans as dr said she has some BWC patients.
PPLPMDL0020000001	Cleveland	OH	44104	7/14/2011	dr said he has 2 patients that are taking percocet every day and not controlled and he wants to start them on Butrans. I asked dr how much percocet patients are taking, dr said 1 patient is taking 20mg and other patient takes 40mg daily of percocet. dr said both patients need a long-acting opioid and he thinks Butrans could be an appropriate option. I showed dr Butrans visual aid, appropriate patients section and initiation of Butrans, we discussed proper tapering of percocet and initiation of Butrans. We discussed formulary coverage for Butrans and patient savings cards for commercial patients. I recommended Senokot-S.
PPLPMDL0020000001	Cleveland	OH	44130	7/14/2011	Dr Fedorko told me that he doesn't have any more patients who he could put on Butrans. I asked him what he meant. He said that he only has patients who need pain control for two or three weeks at a time. I agreed that because these are not chronic pain patients, they may not be appropriate. I asked him if he had any patients who take Vicodin or tramadol every day. He said his Vicodin patients only need Vicodin because they "are hooked on it." He said he thinks Butrans is a good product because it is "more convenient" for the patient to apply a patch once a week than to take pills around-the-clock. He said he wishes he had more patients to put on Butrans but he just does not. He asked me what other products I have & I reminded him of Ryzolet q24h & value program. He said he has managed care issues with Ryzolet. Reviewed Butrans managed care grid with Maryann & asked her to give Dr Fedorko the Butrans "Initiations" program invitation.
PPLPMDL0020000001	Cleveland	OH	44113	7/14/2011	I discussed Butrans fpi, initiation guide, showed dr Butrans visual aid discussing appropriate patients, dr wanted to know if we had conversions from other long-acting opioids to Butrans? I told dr we didn't and that would be her clinical judgment but showed conversion table in Butrans initiation guide looking at short-acting opioids and what the initiating Butrans dosage strength would be, dr said ok she understood that and asked about insurance coverage. dr said majority of patients here at this clinic are Medicaid but she does have commercial plan patients and she goes to Metrohealth medical center's main campus and Asian plaza so there are commercial patients there too. We talked about Butrans patient savings cards and dr said she's excited to see buprenorphine as a transdermal medication and has been waiting for this and will start prescribing. I recommended Senokot-S for opioid induced constipation.
PPLPMDL0020000001	Independence	OH	44131	7/14/2011	Spoke with Dr Faiman's MA who said that he was not in today but would be in the office tomorrow. She asked what products I carried. I shared Butrans information with her including indication, dosing, delivery system, & appropriate patient type. I let her know that Dr Faiman had expressed interest in it before when we have spoken & may have a few patients on it. She asked that I come back tomorrow to see if he has time to see me.
PPLPMDL0020000001	Parma	OH	44129	7/14/2011	Dr Kushnar said that she has not yet prescribed Butrans. I reminded her of our previous conversation when she told me that she had thought of a few patients who may be appropriate. She said she did not remember. Reviewed appropriate patient type & invited her to participate in the "Initiations" interactive program. She said she might log on & do it later. I let her know the program would assist her in identifying potential Butrans patients & would give her practice on virtual patients. She said she likes doing those types of online activities, so she would log on. She said she just does not have many patients on chronic pain medications & that she avoids opioids when possible or refers out. She asked about Medicare coverage, so I reviewed managed care. She said many of the patients she has thought of have been Medicare patients. Discussed OxyContin as an option for appropriate patients beyond Butrans 20mcg.
PPLPMDL0020000001	Barberton	OH	44203	7/14/2011	I asked Dr Patel about the success of Butrans in his practice and he said overall it has been a great therapy. I asked what his patients liked best about therapy and he said that it was once a week. He said he will continue to keep Butrans in mind for appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44103	7/14/2011	I talked to dr about her patients taking 1-2, 5mg percocet, every day that aren't controlled and asking for something else, dr said she hears that and is considering Butrans for those patients but sometimes they don't want to stop their percocet and try a patch. I talked to dr and showed Butrans fpi, noting that dr can give percocet to patients while they are taking Butrans. dr said the couple patients taking Butrans seem to be doing well so she's happy. I asked dr if there are any patients taking 1-2, 5mg Vicodin, daily, but pain isn't controlled? dr said she hears that all day and usually will max the vicodin out and then go to percocet. I showed dr Butrans visual aid, appropriate patients and told dr she could start patients on Butrans right after vicodin isn't controlling pain anymore instead of converting patients to percocet. dr said ok and she will keep it in mind. We discussed OxyContin being appropriate for patients after Butrans 20mcg isn't controlling patients pain anymore and 7 tablet strengths available to allow for flexibility in titration, dr said she writes a lot of OxyContin and thinks it's a good long-acting opioid option for the right patients. We discussed OxyContin and Butrans formulary coverage. I recommended Senokot-S.
PPLPMDL0020000001	Parma	OH	44129	7/14/2011	Lucy asked me to remind her what Butrans is. Reviewed indication, dosing, delivery system, CIII, & abuse/addiction potential. She said that she has not prescribed it & does not have very many patients who she maintains on chronic pain medications. She asked about managed care coverage, so I reviewed with her coverage & savings program. She said a \$15 co-pay was very reasonable. Discussed the appropriate patient type & asked if she would consider Butrans for patients on chronic Vicodin requesting an increase in dose or dosing interval & she said she would do this. Also discussed Ryzolet, q24h dosing, & titration.
PPLPMDL0020000001	Cleveland	OH	44103	7/14/2011	talked to dr briefly about Butrans being an option for his commercial patients who have chronic pain and are taking tramadol every day but not controlled. I showed dr Butrans visual aid, discussed appropriate patients and initiation of Butrans in case dr sees any patients that he feels are appropriate for Butrans. dr said he likes that Butrans is transdermal and dosed once a week but its not covered on Medicaid so that's what's preventing him from prescribing. We talked about OxyContin being appropriate for patients with 7 tablet strengths to give him flexibility in titration of OxyContin and we discussed formulary coverage for OxyContin. I recommended Senokot-S.
PPLPMDL0020000001	Cleveland	OH	44102	7/14/2011	dr said he hasn't started anyone on Butrans, remembers Butrans is a transdermal medication but couldn't remember if it was a CII or CIII? I showed dr Butrans visual aid, discussed 5 core messages and asked what was most important to him about Butrans? dr said transdermal technology, once weekly dosing is good for some patients not all and CIII so he can call in refills. I showed dr Butrans visual aid, appropriate patients section, and asked if dr has patients taking 1-2, 5mg vicodin, every day for their chronic pain and that dose isn't controlling their pain? dr said yes he hears that a lot and usually patients want more pills. I showed dr initiation guide, discussed proper tapering of short-acting opioids if patients are above 15mg hydrocodone, and then initiation of Butrans. dr said because he's newer to practice he doesn't know patients that well yet but he'll keep Butrans in mind if appropriate. dr asked about insurance coverage so we discussed dr focusing on BWC and commercial patients.
PPLPMDL0020000001	Parma	OH	44129	7/14/2011	Spoke with pharmacy manager, Rick, who said his time was limited. I reviewed with him Butrans appropriate patient type & savings program/e-voucher. Also discussed OxyContin & Ryzolet savings cards & reviewed eligibility requirements, including that they cannot be used for any type of government insurance. He requested a package of Ryzolet cards & said he has a couple of customers on it. He said he has an ample supply of OxyContin cards.
PPLPMDL0020000001	Highland Heights	OH	44143	7/14/2011	Conducted the Butrans patient selection presentation with doc and Debbie (NP). They thought it was helpful to identify appropriate patients. Doc asked if supplemental analgesics. I referenced the FPI that they can be used. I explained how to taper down if patients are on higher doses of opioids or consider low dose oxycotin. He also considered a patient currently on duragesic. He would like to convert him to butrans. The patient likes transdermals but does not need as strong an opioid. I explained that there is no exact conversion but showed him the initiation guide approximations. Doc said patients are doing well on Butrans. Debbie asked what is recommended if they complain that the patch is coming off. I explained the use of first aid tape or tegaderm. I reviewed the formulary coverage for butrans and oxycotin.
PPLPMDL0020000001	Highland Heights	OH	44143	7/14/2011	Conducted the Butrans patient selection presentation with doc and Debbie (NP). They thought it was helpful to identify appropriate patients. Doc asked if supplemental analgesics. I referenced the FPI that they can be used. I explained how to taper down if patients are on higher doses of opioids or consider low dose oxycotin. He also considered a patient currently on duragesic. He would like to convert him to butrans. The patient likes transdermals but does not need as strong an opioid. I explained that there is no exact conversion but showed him the initiation guide approximations. Doc said patients are doing well on Butrans. Debbie asked what is recommended if they complain that the patch is coming off. I explained the use of first aid tape or tegaderm. I reviewed the formulary coverage for butrans and oxycotin.

	Brooklyn	OH	44144	7/14/2011	Spoke with MA Audrey who said Dr Deeb was not in the office today. I asked her if I could leave a Butrans "Initiations" invite for him but she said he will not take any information. I explained the interactive program to her, but she said he does not do online activities. She said the only thing he will accept are dinner invitations. I told her that I had requested a lunch a few times but had not heard back. She asked for another card & promised to request a lunch when he comes back to the office. She said he goes through phases of allowing lunches & then not allowing them, so there is really no set schedule of when they might do them. I asked if there was any other way to talk to him but she said lunches are all for now.
PPLPMDL0020000001	Mayfield Heights	OH	44124	7/14/2011	Window call....provided interact invite and formally grid reminder. no savings cards needed. Nothing learned.
PPLPMDL0020000001	Euclid	OH	44119	7/14/2011	Opened the call by reviewing the indication, CIII status, and 7 day delivery of Butrans. I explained the positioning - before going to vicodin ATC. He asked if Butrans can be called in. I confirmed that it could and is a CIII similar to vicodin only that it is once weekly. I reminded him of the formulary coverage and savings cards. Scheduled a lunch to discuss further.
PPLPMDL0020000001	Mayfield Heights	OH	44124	7/14/2011	Window call....brief review of the Butrans patient type, formulary grid and the savings cards. Nothing learned.
PPLPMDL0020000001	Mayfield Hts	OH	44124	7/14/2011	Quick call....doc was still supplied with Butrans savings cards. Reminded him of the covered insurance plans and BWC coverage. Oxycontin coverage and savings cards reminder. Gave interact invite
PPLPMDL0020000001	Fairlawn	OH	44333	7/14/2011	I asked Dr. Paris if he the patients he had originally put on Butrans had been taken off therapy and he said he was not sure. I asked how long he had expected patients to stay on Butrans therapy and he said long term.
PPLPMDL0020000001	Akron	OH	44333	7/14/2011	I asked if his prescribing have changed and he said he is still not prescribing meds for chronics pain. I told him Butrans may not be the right therapy for his patients at the time.
PPLPMDL0020000001	Stow	OH	44224	7/14/2011	Introduced Butrans and she said she is already familiar with it from the other NPs, We reviewed FPI, indication, dosing and titration, boxed warning and managed care coverage. She said she likes it for the reasons that it i once a week and it is schedule 3. I explained savings cards. She said she would write it in more opioid experienced and she also sees alot of Bwc who she can write it in
PPLPMDL0020000001	Stow	OH	44224	7/14/2011	Dr said he has tried a couple of people on Butrans and I asked how it is working and what dose did he start them on and he said they are doing well and he started them on 10mcg. HE requested to be a speaker but needed to get more Butrans under his belt. HE asked bout the PK profile and if it is a agonist antagonist and I showed him the FPI and said it is a partial agonist and he read the description and said it still has anagonist effects at the kappa receptors and he said that is good. HE thinks it is a good product and would like to start using it more. Gave him invite for program and webinar.
PPLPMDL0020000001	Akron	OH	44333	7/14/2011	I asked Linda if she was still considering Butrans as a therapy for patients failing on their current SA therapy and she said she was. I asked if she had seen any recently or would see any today that may be Butrans candidates and she said she would have to look through the charts but would prescribe it if a patiien presented.
PPLPMDL0020000001	Stow	OH	44224	7/14/2011	Dr said he has not started anyone on Butrans, he said he has lost 2 of his PAs and he is now doing only injections so he hasnt had the chance. HE said summers are like this and back into the fall he will start seeing some patients, but probably till more procedures. HE asked about the managed care coverage and said he thought that was good for a new drug. HE also asked about dosing and what is the most common dose written. Invited to speaker program as well as initiations program. RMEInded of OxyContin in his patients who may be on doses higher than 80mg morphine equivalent
PPLPMDL0020000001	Parma	OH	44134	7/14/2011	Dr Hernandez asked me how much buprenorphine is actually in each strength Butrans patch. I told him I did not know the answer to this question & told him we could either submit his question on my computer or he could call Medical Services. He said he would call as he needs an answer quickly. He said he sits on the BWC board or directors & that they are reviewing products, specifically pain medications, to determine what they will pay for & what they will not. Dr Hernandez said they want to stop paying for all pain medications including Butrans & all buprenorphine-containing medications. He said he believes in the molecule & disagrees with this plan, so he is gathering information about buprenorphine & products which contain it to present to the board in effort to get them to continue to pay for them. He said his patients do well on Butrans & that he believes they are less likely to become addicted to it than other medications. He said he believes each Butrans does not contain enough medication that it would cause addiction. I reminded him that this is not consistent with the Butrans FPI & that we have no data to suggest this. He said his statement is based on his clinical experience. I invited him to take part in the "Initiations" program. He said he might look at it later but couldn't do it right now. *Returned later in the day to show Dr Hernandez FPI Section 11/Table 5 to show him the total buprenorphine content per strength patch.
PPLPMDL0020000001	Stow	OH	44224	7/14/2011	Sharon came back briefly, said she is really busy since they lost 2 of their PAs. She said she has not written Butrans but patient load is increasing so sshe will have more opportunity with new patients. Reviewed dosing and managed care
PPLPMDL0020000001	Stow	OH	44224	7/14/2011	Dr said he has 3 patients on Butrans. I asked if they were new patients and were they previously on a short acting and he said they were existing patients who were on Duragesic who were not getting the pain control for 3 days and felt like the patients were getting a boost every time they took it. HE said his patients were doing well, he likes it. HE asked about managed ccare again and we reviewed that and he said he has to remember BWC, that is 25% or more of their business. He said he is mainly starting patients on 10mcg unless they are elderly than he may try 5mcg on them.I gave him invite for initiations program as well as speaker program and he said too
PPLPMDL0020000001	Independence	OH	44131	7/15/2011	Spoke with Denise (MA) & told her about Butrans "Initiations" interactive program. I let her know that it is a useful tool to help assist physicians in appropriate patient selection for Butrans. Also reviewed appropriate patient type with her. I asked her to give Dr Boose the invitation with my card & she agreed to do this. I asked if they needed any OxyContin savings cards but she & Janelle said they don't need any as that is not prescribed there. I told them that the cards can be used for patients who are already on OxyContin when they come to see him but they still declined.
PPLPMDL0020000001	Woodmere	OH	44122	7/15/2011	Spoke with pharmacist Raul & inquired about Butrans stocking. He said they do have it in stock. I asked him what strengths. He said they have 5 & 10mcg. Reviewed appropriate patient type & savings program through e-voucher. Also asked about OxyContin stocking. He said he does not know off the top of his head which strengths they have, but that they only have a few patients on it. He said he has enough savings cards. I offered Ryzolt savings cards & he said he could use some.
PPLPMDL0020000001	Chagrin Falls	OH	44023	7/15/2011	Spoke with Wendy, floater pharmacist, & Grace, technician. Confirmed that this location does have Butrans stocked (all 3 strengths). Reviewed appropriate patient type & savings through e-voucher. Also reviewed OxyContin & Ryzolt savings cards. Wendy said they could probably use the OxyContin cards but she did not think they carry Ryzolt. She said she would leave all my information for the regular pharmacist.
PPLPMDL0020000001	Cleveland	OH	44113	7/15/2011	talked to dr about his patients taking tramadol every day but not controlled and calling into office earlier every month asking for refills,dr said he has a lot of those patients.i showed dr Butrans visual aid,appropriate patients and said thats where he can start patients on Butrans,instead of refilling same amount of tramadol or giving them more,dr said ok he could only remember that Butrans was transdermal and that was it,so we talked about 5 Butrans core messages and dr said he will start a few patients.dr asked if it was covered on medicaid as he has a lot of medicaid patients.we discussed dr focusing on commercial plan patients and prior authorization requirements for medicaid patiien,dr said he'll try it in a few patients and see what happens.i recommended Senokot-S
PPLPMDL0020000001	Westlake	OH	44145	7/15/2011	Quick call with Deanna, she said that the Butrans is not moving in this store. I asked which primary care Dr might have appropriate patients. She said tri city north ridgeville has some. We reviewed the Butrans initiation guide and that OxyContin is an option when Butrans may not provide adequate analgesia.
PPLPMDL0020000001	Cleveland	OH	44115	7/15/2011	talked to dr about her patients taking tramadol every day that arent controlled and are calling into office earlier every month asking for refills,dr said she does have some patients that do that,i asked dr to consider Butrans right there instead of refilling tramadol or going to vicodin,dr said she could consider that for some patients but not every patient wants to put a patch on.i showed dr Butrans visual aid,discussed appropriate patients section,discussed initiation dosage strengths either 5mcg or 10mcg and dr said most of her patients are taking less than 300mg tramadol,so i asked dr to consider Butrans 5mcg,for patients taking less than 300mg,dr said she'll keep Butrans in mind.dr said she only has a handful of patients that really are "chronic" pain,most are taking tramadol and other short-acting analgesics for acute pain,so i told dr that was fine just focus on chronic pain patients for Butrans.dr asked about insurance coverage,we discussed commercial plan patients trying Butrans and using Butrans patient savings card.i recommended Senokot-S
PPLPMDL0020000001	Lakewood	OH	44107	7/15/2011	Dr said that he did try a patient on Butrans, but she said that she prefers taking the short acting PRN. He said that this was a difficult patient and that he will try other patients. I reviewed the appropriate patient types and asked him to prescribe for a few more patients to gain some experience and he agreed. I invited him to the speaker program and he said he will try to make it. I reminded him that Butrans is still an option when patients are on higher doses of opioids around the clock.
PPLPMDL0020000001	Parma	OH	44134	7/15/2011	Spoke with Marko (pharmacy manager) who said he does not understand why he has not seen more Butrans activity. Reviewed appropriate patient type & discussed patients who may not be appropriate (ie if they are on high doses of opioids). Marko said he has seen an increase in prescriptions for Subutex for pain lately. He asked if I called on physicians who write it. I asked him who he would recommend. He said Dr Popa on W 130th Street, Dr Saridakis & Dr Charles Webb. He said that was all he could think of now but that he would try to think of more before my next visit. He said he still has OxyContin savings cards so he did not need more.
PPLPMDL0020000001	Chagrin Falls	OH	44022	7/15/2011	Quick call- Caught Dr Hudson in the kitchen & handed her Butrans "Initiations" invitation, explaining the interactive program. She said she does online programs occasionally. Offered to go through it with her but she declined. I let her know that the program would assist her in identifying who was & who was not appropriate for Butrans. She said she would have a look then walked away.
PPLPMDL0020000001	South Russell	OH	44022	7/15/2011	Only saw Dr Kale briefly- I gave her a Butrans "Initiations" invitation & explained the interactive nature of the program & let her know she could log on at her leisure to go through it or I could go through it with her. She said she didn't have time & would look at it later then walked away.
PPLPMDL0020000001	Independence	OH	44131	7/15/2011	Spoke with Jill (MA) who said that Dr Reddy was not in today. She said that he has been changing his hours around lately but has not set anything permanent yet. I gave her a Butrans "Initiations" invitation & described the interactive nature of the program. I told her it would assist him in identifying who may be appropriate for Butrans & who may not. She said he usually does not do them but that she would leave it for him.
PPLPMDL0020000001	Uniontown	OH	44685	7/15/2011	I introduced Butrans and FPI. I asked if she thought there was a place for Butrans in her practice and she said she thought there was. I asked how she would identify a patients and she mentioned that she would feel most comfortable with an opioid naive patient to avoid conversions.
PPLPMDL0020000001	Uniontown	OH	44685	7/15/2011	Spoke to the pharmacist about the core messages I was discussing with local physicians. I asked if they had seen any movement and they said no.
PPLPMDL0020000001	Euclid	OH	44119	7/15/2011	Quick call....told doc about the butrans indication - a different option for patients that could use a long acting CIII. He said he des not have patients like that. I told him I scheduled a lunch to discuss further and gave him an initiation guide and formulary grid.
PPLPMDL0020000001	Westlake	OH	44145	7/15/2011	I asked if the patients that he started on Butrans had success. He said he had a hard time with managed care and one patient tried it but then said it was too expensive. He said that she did have a copy card. We reviewed the commercial insurance for Butrans and I asked Dr if he would continue to try it on other patients to give it a fair trial. He agreed. Reminder that OxyContin is an option that is covered on most insurance at a low copay and I reviewed the savings cards.
PPLPMDL0020000001	Euclid	OH	44119	7/15/2011	Spoke to Kevin about the stocking and movement of Butrans. He said that he still has it but has not seen any scrips in a while. I explained the him how we are positioning Butrans with the doctors - before going to vicodin ATC. Also reviewed the proper application and potential sites. Gave him a savings card brochure and talked about the relay health option.
PPLPMDL0020000001	Uniontown	OH	44685	7/15/2011	Spoke to the pharmacist and explained the core messages that I was discussing with physicians.
PPLPMDL0020000001	Akron	OH	44319	7/15/2011	I asked why he was not comfortable prescribing Butrans and he said because it was still new. I asked if he was familiar with Buprenorphine and explained it had been around for some time. He said he would read up on it before prescribing it.
PPLPMDL0020000001	Euclid	OH	44119	7/15/2011	Quick call....briefly introduced butrans to doc. Discussed the indication and positioning, dosing options, and commercial formulary coverage. He wanted to know how much it cost. I showed him the FPI with pricing info and explained the wholesale cost. Scheduled a lunch to discuss further.
PPLPMDL0020000001	Akron	OH	44312	7/15/2011	Quick call through the window. I asked Dr. Manning how often he was treating patients with moderate to severe chronic pain and he said he was every so often. I quickly reminded him that Butrans was an option for those patients and that it is schedule 3 and once a week dosing.
PPLPMDL0020000001	Akron	OH	44312	7/15/2011	I asked Dr. McRoberts if he had a chance to review the Butrans lit that I left and he said briefly. I reminded him it was a once weekly patch indicated for chronic pain. I asked he had any patients he thought would benefit from a schedule 3 LAO like Butrans. He said he would read a little more about it and would keep it in mind.
PPLPMDL0020000001					

	Cleveland	OH	44109	7/15/2011	worked internal medicine - left Butrans fpj,initiation guide,patient information booklet,formulary grid,interact card and business card for Dr.Lindheim, Dr.Harrington,Dr. McCreery,Dr.Falk-Ytter,Dr.Jones,Dr.Ricanati and Dr.Eisen- as you cant see the doctors unless the doctors call you for an appointment. worked rheumatology dept-left Dr.Ballou Butrans fpj,initiation guide,patient information booklet,formulary grid and Butrans dinner program invitation,as dr was seeing patients and i couldnt see him today,left each dept senokot-S protocol pads for each physician to give patients.
PPLPMDL0020000001	Euclid	OH	44119	7/15/2011	Spoke to Kathryn, fill in pharmacist from the Madison store, about Butrans and oxycontin. She was not familiar with Butrans or whether the store sees scripts. I explained the indication, dosing, positioning, and the savings cards. Also explained how to properly apply butrans. She would forward the literature to Dave who is off today.
	Cleveland	OH	44109	7/15/2011	i talked to Ron,Pharmacy Manager,about any scripts for Butrans and Ron said nothing at this point but he has the 5mcg in stock.we talked about Butrans patient information booklet,application/rotation of Butrans and i asked Ron to discuss with patients when they do come for Butrans, Ron agreed.we talked about insurance coverage,electronic savings cards at Rite Aid for Butrans and i showed Ron Butrans visual aid,discussed 5 Butrans core messages and Ron said once weekly dosing and transdermal delivery are 2 benefits he see's in Butrans.i asked Ron if he would recommend Butrans to any doctors,if patients tell him their pain isnt controlled by short-acting opioids? Ron said he would do that but it depends on physician relationship but he's willing to do that.i recommended Senokot-S
PPLPMDL0020000001	Euclid	OH	44119	7/15/2011	Quick call as doc was leaving early. I reviewed the Butrans indication and patient type. He said he really wants to talk about it but does not have time. I gave him an initiations invite, guide, and formulary grid for butrans and oxycontin. Said he will be on vacation next week but the week after would be better.
	Independence	OH	44131	7/15/2011	Quick call- Caught Dr Pai through the window. He said he did not have time today. I handed back a Butrans "Initiations" invitation & described the interactive nature of the program to him. He said he would have a look at it later. Spoke with MA Jill who said they have been unusually busy lately & that the new computer training they are doing is backing things up. I told Jill about the "Initiations" program & asked her to remind Dr Pai to have a look at it. She said she would do her best.
PPLPMDL0020000001	Uniontown	OH	44685	7/15/2011	I asked Dr. Keith how often she was treating chronic pain and she mentioned more often than she liked but mostly prescribed SA therapy. I asked if she often had patients who were asking to be titrated on their SA therapy and she said she did and the call was cut short.
PPLPMDL0020000001	Cleveland	OH	44113	7/15/2011	i talked to dr about his patients taking tramadol every day for chronic pain but not controlled and asking him for something different,dr said if patients are taking tramadol and thats not working he'll typically convert them to vicodin.i showed dr Butrans visual aid,opioid experienced patients and asked dr if he would consider Butrans right after tramadol instead of starting patients on vicodin? dr said he might if patients are willing to apply a patch and he could trust patients to rotate patch once a week.dr asked about insurance coverage i showed dr Butrans formulary grid,focused dr on commercial plan patients and discussed Butrans patient savings cards.i recommended Senokot-S
	Cleveland	OH	44114	7/15/2011	i asked Dave,Pharmacy Manager,if he's recommended Butrans to any doctors or patients? Dave said he's not recommended it to doctors,but has talked to a couple of patients who were complaining about their vicodin and percocet not lasting long enough so he thought a long-acting opioid could be appropriate,dave said he gave patients Butrans patient information booklet and told them to talk to their doctors.i asked dave to focus discussions with patients on application/rotation of Butrans,if they are getting scripts filled,he said yes he's been doing that and thinks its helping some patients.we talked about OxyContin stocking,7 tablet strengths and i showed dave OxyContin conversion guide and asked Dave to recommend OxyContin to physicians when he feels it could be appropriate for patients.dave said he could do that with a few physicians,but not many as it relates to OxyContin.i recommended Senokot-S
PPLPMDL0020000001	Westlake	OH	44145	7/15/2011	Spoke with Darrel, i asked what is most important for him to know, and he said what to tell the patients. I reviewed the medication guide and went over application site, steady state in three days. I reviewed the savings program for both Butrans and OxyContin.
PPLPMDL0020000001	Lakewood	OH	44107	7/15/2011	I reviewed the key messages and Dr asked about the doses. We reviewed the doses, initiation and PK profile, Dr asked about managed care for Butrans and I reviewed the coverage and savings program. I invited Dr to come learn more at a speaker program but he said he does not go to them.
PPLPMDL0020000001	Westlake	OH	44145	7/15/2011	Quick call, I asked about his success with Butrans recently and he said that everything has been going well for the majority of patients. I invited Dr to the Butrans speaker program and he will do his best to attend.
PPLPMDL0020000001	Chagrin Falls	OH	44022	7/15/2011	I reminded Dr Rood of our previous conversations about his patient who he has put on Butrans & asked him how that patient is doing. He said that due to the nature of her condition, she has ups & downs as far as pain severity. He said she is still doing well on Butrans & he has recently started supplementing with immediate-release narcotics for her breakthrough pain. He said he just does not have a lot of patients in the office on chronic long-acting opioids. I asked him what the difference was between patients who he refers out & patients who he maintains himself for chronic pain. He said he is careful who he refers because sometimes pain management bounces the patient back to him on high doses of multiple narcotics which is what he tries to avoid. He said the ones he maintains are those which he does not think pain management will do anything for. I asked when he uses long-acting opioids vs short-acting. He said he tries to treat chronic conditions with long-acting medications, but sometimes will keep a patient on short-acting if they are older. I asked him if he thought any of them would benefit from Butrans. He said he had not thought of that before but that he does think so. Reviewed managed care & let him know that he would have to prior-authorize Butrans for Medicare Part D patients. He said he is used to it & will have his nurse do them if he feels it is the best medication for a patient. Also discussed OxyContin as an option for more severe pain patients.
PPLPMDL0020000001	Parma	OH	44129	7/18/2011	Dr Ortega said that about 50% of the patients he has put on Butrans have "not liked it" & have not gotten good results. I asked him to elaborate & tell me more about the patients. He said they have not been patients on high doses of opioids, so he does not know why it hasn't worked. He also said that one of the patients who he had started on 5mcg & titrated to 10mcg complained that the 10mcg "made him feel loopy", so he put him back on the 5mcg. Asked where patients were applying the patch & he said he didn't know about all of them, but one put it on his back. Discussed application & sites as well as medication guide & let him know i would leave more booklets at local pharmacies since he said it is too hard to remember to give them out. Asked how long the patients tried Butrans before discontinuing & he said each tried it for about a month. He added that he thought the right patient is one who is taking 2-3 Vicodin steadily. Let him know that someone who is steady on their current medication may not be ideal to switch. Asked him to consider those who are asking for an increase in dose or frequency of current medication. He agreed to try this. He said he would not give up on Butrans.
PPLPMDL0020000001	Lakewood	OH	44107	7/18/2011	I told Dr it had been awhile since i was able to talk to him about Butrans. I asked what he remembered. He knew that it was a patch for pain. We reviewed the key messages and appropriate patient types. I reviewed the dosing and how to initiate Butrans. I asked if he would give it a try, and he asked about the insurance. I reviewed the managed care for Butrans and that OxyContin is still an option that is covered on Medicaid. I invited him to our dinner discussion to talk to his peers about how they are using Butrans. He does not usually attend anything after hours.
PPLPMDL0020000001	Cleveland	OH	44113	7/18/2011	i talked to dr about his chronic pain patients taking tramadol every day but arent controlled and wanting something different,dr said he does a lot more procedures so he doesnt have a lot of patients that are taking narcotics.i asked dr if he had at least 2 patients like we discussed that Butrans could be an option for? dr said he might,i showed dr Butrans visual aid,appropriate patients,discussed initiation of Butrans and showed dr Butrans initiation guide.we talked about insurance coverage for Butrans.i talked to dr about OxyContin being an option,showed appropriate patients flashcard and dr said he has a few patients on OxyContin but not many,we talked about 7 tablet strengths available and formulary coverage.i asked dr to consider 2 patients to start on OxyContin 10mg and 15mg,if appropriate,dr said okay.i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	7/18/2011	worked family medicine dept-left Dr.Krofina,Dr.Liu and Dr.Forde-Butrans fpj's, initiation guides,patient information booklets,formulary grids and my business cards for each dr.i also left each dr OxyContin fpj,conversion guide,challenging flashcard and formulary grid for OxyContin. worked internal medicine dept- left OxyContin fpj,conversion guide,appropriate patients flashcard,formulary grid and my business card for Dr.Lindheim, Dr.Jones,Dr.Ricanati,Dr.Eisen,Dr.Falk-Ytter and Dr.Harrington as i couldnt see any doctors had to leave information.I also left a Butrans fpj,initiation guide and patient information booklet for each doctor in the internal medicine dept listed here too.
PPLPMDL0020000001	CLEVELAND	OH	44109	7/18/2011	i talked to Rod,Pharmacy Manager,about appropriate patients for Butrans and showed Butrans visual aid for discussion,Rod said he's not seen scripts for Butrans but does like that its transdermal and once weekly dosing is easy for some patients.i asked Rod if he recommended Butrans to any doctors yet? Rod said no and that depends on relationship with dr.i asked Rod if he would tell patients about Butrans that might not be getting their pain controlled by their short-acting opioids. Rod said he does do patient counseling and would do that if appropriate. i showed Rod Butrans patient information booklet and asked him to focus on application/rotation of Butrans,Rod said ok he would do that.i recommended Senokot-S
PPLPMDL0020000001	Parma	OH	44129	7/18/2011	Dr Taylor asked why OxyContin has a higher street value than other drugs & asked how the reformulation changed the tablets to "make them harder to abuse". Let her know that OxyContin was reformulated with the intent to make it less easy to manipulate, however there is no data to suggest that that is the case. Asked that she be just as cautious in prescribing as she always was. She asked what the street value of Butrans is. I told her that while i know of no specifics, Butrans is an opioid & still carries abuse/addiction potential & is a CII opioid. Began "Initiations" program & discussed appropriate patient type, box warning, dosing, titration, & supplemental analgesia. She said that she thinks i finally got through to her & she is thinking of patients she can use it for. She said she has a lot of older patients with low back pain who she would use it in. Discussed managed care & dr said he started a couple patients on Butrans but 1 patient had problems with pharmacy not stocking Butrans.dr said he's concerned that patients will go to pharmacy and not be able to get Butrans.i reassured dr that im working with pharmacies to discuss stocking of Butrans,appropriate patients,Butrans patient savings card program and patient information booklet so pharmacy can discuss application/rotation of Butrans with patient.dr said ok he'll consider writing Butrans again.dr said the 2 patients on Butrans seem to be doing well,no call backs or complaints so thats a good sign.i showed dr Butrans visual aid,page 11 and asked dr how he treats patients with some of the pain conditions listed,we discussed arthritis patients.dr said he starts with a NSAID,then arthritis medicine and if patients are still experiencing pain he'll give them a narcotic.dr said for patients with chronic low back pain he starts with NSAID,muscle relaxer,exercise,diet and if that doesnt work starts with tramadol,then vicodin and percocet.i asked dr how Butrans could play a role for his arthritis patients? dr said after short-acting analgesics dont work,he would consider a long-acting opioid. I showed dr Butrans initiation guide,discussed Butrans initiation dosage strengths for those patients taking less than 300mg tramadol and for dr to start 2 patients on Butrans instead of refilling tramadol or converting them to vicodin,dr said he'll do that.we discussed insurance coverage for Butrans
PPLPMDL0020000001	Lakewood	OH	44107	7/18/2011	I asked Dr if he would try Butrans instead of vicodin around the clock for just a few appropriate patients this week. He said he would try. We reviewed the managed care for Butrans and that OxyContin has coverage for Medicaid and Med D AARP patients. Asked him to come talk to his peers about how they are prescribing Butrans at the speaker program.
PPLPMDL0020000001	Parma	OH	44129	7/18/2011	Spoke with pharmacist Heath who said he has Butrans 5 & 10mcg in stock & has not yet dispensed any. I reviewed with him the appropriate patient type & savings program. I asked him what prescribers in the area he would recommend me speak to more about Butrans & he recommended Jen Hula's office. He said he gets a lot of prescriptions for their patients on Vicodin & tramadol chronically. Reviewed OxyContin savings cards which he said he could use more of. Offered Ryzolt savings cards but he said he did not need any because he never dispenses it.
PPLPMDL0020000001	Cleveland	OH	44113	7/18/2011	worked pain management- see call notes on dr davoud and dale novak,pa
PPLPMDL0020000001	Cleveland	OH	44195	7/18/2011	worked pm&r dept-left Dr.Reddy and Dr.Jedlicka Butrans fpj's, initiation guides,formulary grids,patient information booklets and my business card.also left them OxyContin "challenging" flashcards,conversion guides and formulary grids for OxyContin and 1 Senokot-S protocol pad for each physician. worked pain management dept-left Dr.Mekhal,Dr.Minzter,Dr.Cheng,Dr.Vrooman,Dr.Katyal,Dr.Stanton-Hicks and Dr.Wang Butrans fpj,initiation guide,patient information booklet,formulary grid,patient savings card flashcard for Butrans and my business card for each doctor
PPLPMDL0020000001	Lakewood	OH	44107	7/18/2011	Quick follow up, I reviewed our last conversation about the patient he tried on Butrans. I asked if he had a few other patients in mind who might benefit from Butrans and he said he will give it another try. Reminder about the upcoming dinner discussion and he will think about it.
PPLPMDL0020000001	Arlington	OH	45814	7/18/2011	presented butrans info and asked where he would use. he stated he would do some research and get back to me.
PPLPMDL0020000001	Lakewood	OH	44107	7/18/2011	Quick call, I asked Dr if he would attend our upcoming dinner discussion on Butrans so that he can see how his peers are using Butrans. He said he will try to make it. I asked Dr if there is any other info I can provide for him to try Butrans on just a few patients, and he said no, he will give it a try.
PPLPMDL0020000001	Lakewood	OH	44107	7/18/2011	Quick call with Megan, I reviewed the patient information and the important info for her to tell the patients, steady state, how to apply and what to do if the patch falls off per the medication guide. Reminder that OxyContin is still an option when Butrans may not provide adequate analgesia.



PPLPMDL0020000001	Cleveland	OH	44113	7/18/2011	i talked to Dale,PA,about patients he see's that are taking tramadol,daily,for chronic pain and NOT refilling their tramadol when patients tell him their pain isnt controlled with their tramadol dose.i asked Dale to think of patients this week,like this,that he can start on Butrans and showed Dale Butrans visual aid to discuss initiation of Butrans.Dale said it makes sense to start patients on a long-acting opioid earlier in therapy instead of having them on short-acting opioids chronically for years. We discussed insurance coverage and i recommended Senokot-S
PPLPMDL0020000001	Parma	OH	44129	7/18/2011	Spoke with Debbie in purchasing who gave me Kevin Zupancic's contact information (director of pharmacy). Also spoke with Stella Lewis (nurse), who said that the nurses of all departments within the hospital are typically educated about new products through pharmacy. Also discussed Butrans indication, usage, dosing, & delivery system. Stella also said that there has been a new conglomerate of hospitals that is joining together (EMH, Parma, & Southwest). What this means in terms of the future of these hospitals is unknown at this time.
PPLPMDL0020000001	Cleveland	OH	44102	7/18/2011	i talked to Gurjeet,Floater Pharmacist,about Butrans stocking and Gurjeet said they only had 1 script for Butrans and they gave that patient the only Butrans 5mcg carton they had in stock.Gurjeet said Butrans is too expensive to order and sit on shelf so when they see scripts for Butrans they will order it for patients.We discussed importance of stocking all dosage strengths so patients arent waiting 24hrs or going to another pharmacy but Gurjeet said that's their policy.i asked when Vicky,Pharmacy manager would be returning to this store so i could talk to her about Butrans and Gurjeet said next monday.Gurjeet said they have Butrans initiation guide and formulary information but he took Butrans pharmacy flashcard.
PPLPMDL0020000001	Lakewood	OH	44107	7/18/2011	Quick call at window, I asked if there was any other info she needed to try Butrans for her patients. She said she will look over the initiation guide again. I reviewed the key messages and asked if she would try just a few patients instead of giving vicodin around the clock. She will try. Reminder that OxyContin is an option when Butrans may not provide adequate analgesia. I asked her to come and see how her peers are using Butrans at our upcoming dinner program.
PPLPMDL0020000001	Lakewood	OH	44107	7/18/2011	Spoke with Joe, we reviewed the medication guide and the important info to tell the patients. We discussed steady state and that patients should wait 3 days to titrate. Reminder that OxyContin is still an option when Butrans may not provide adequate analgesia.
PPLPMDL0020000001	Lakewood	OH	44107	7/18/2011	Spoke with Kim, she said they do have Butrans in stock but she did not know who many scripts they have been getting. We reviewed the medication guide and how to instruct patients on proper use and application. We reviewed the dosing, initiation guide and steady state. We reviewed the conversion guide and savings cards for OxyContin.
PPLPMDL0020000001	Westlake	OH	44145	7/18/2011	I reviewed our last conversation and asked if all of his questions have been addressed regarding Butrans. He asked again about the dosing and we reviewed the invitation guide and dosing. I asked invited Dr to speaker program to learn from his peers about how they are prescribing Butrans. Reminder about managed care for Butrans and OxyContin.
PPLPMDL0020000001	Lakewood	OH	44107	7/18/2011	I asked how his Butrans patients are doing and if they are seeing success. He said yet they are doing fine. He said that the only problem has been managed care and we once again reviewed managed care for Butrans and the savings program. I reminded him that OxyContin is also an option that is covered on Medicaid and Med D AARP.
PPLPMDL0020000001	Brooklyn	OH	44144	7/19/2011	Spoke with Clarissa (MA) who said Dr Hilton was on vacation all week. I reviewed Butrans "Initiations" invitation with her & gave her an overview of Butrans, including indication, dosing, & appropriate patient type. I asked if she thought Dr Hilton would be interested & she said she had no idea but would leave it for her when she gets back. I also discussed savings cards with Clarissa & reviewed eligibility requirements.
PPLPMDL0020000001	Westlake	OH	44145	7/19/2011	Spoke with Amid, he wanted to hear about both what to tell patients and what we are talking to Drs about. We reviewed the invitation guide and appropriate patients for Butrans. We discussed how to properly apply Butrans and that patients should wait 3 days for steady state before titrating. Reminder that OxyContin is still a long acting option when Butrans may not provide adequate analgesia.
PPLPMDL0020000001	Parma	OH	44134	7/19/2011	Spoke with floater pharmacist & discussed Butrans overview as she had not yet dispensed any. Discussed appropriate patient type & savings program. Also asked if they needed savings cards for OxyContin or Rylozt. She said she has not seen any of either here, so she asked for one package of each. She said to come back another time to see the regular pharmacist as she was so busy she could not spend any more time talking to me.
PPLPMDL0020000001	Westlake	OH	44145	7/19/2011	Dr said that he does have a patient in mind for Butrans. I asked him to tell me more and he said it is a female who is currently taking 30mg of oxycodone per day. We discussed how to taper and initiate this patient on Butrans. I asked what the insurance is and he said Medicaid. I let him know this will be a prior auth and he said he wanted to still try to get it through because she has been on other long acting in the past. I reviewed managed care for Butrans and that it will be best to start BWC or patients who have commercial insurance. We discussed that OxyContin is still an option when Butrans may not provide adequate analgesia. He said he has dismissed some OxyContin patients but still has many patients that he maintains. We reviewed that OxyContin is covered on Medicaid and Med D AARP.
PPLPMDL0020000001	Waterford	OH	45786	7/19/2011	W - Miral said she would like to utilize Butrans because she likes the idea of a 7 day therapy. Getting patients that wouldn't have coverage issues may be the only concern. She said Dr. Waters sees most of the BWC patients. I - Butrans review of indication and 7 days of buprenorphine therapy in 1 application with a CII scheduling. Use of placebo Butrans as a visual for the her to see what it looks like and that the adhesive covers the entire surface of the transdermal itself. Review of formulary coverage - BWC and commercial plans with a 3T status. Savings Card program eligibility.
PPLPMDL0020000001	Westlake	OH	44145	7/19/2011	Spoke with Lisa, She would prefer to hear about what to tell patients about Butrans, we reviewed the medication guide and how to apply Butrans. We reviewed steady state in 3 days. I asked how often she would consult with a new patients, she said only if they asked for her or have questions the techs can't answer. Reminder that OxyContin is still a long acting option.
PPLPMDL0020000001	Solon	OH	44139	7/19/2011	Spoke with nurses Julie & Deborah who said that Dr Zaidi was doing a procedure & had just come back from 2 weeks of vacation so he was not in a good mood & it was not a good time to see him. I asked when a better time would be & they suggested I schedule a lunch. Delivered Butrans overview (dosing, usage, delivery system) & asked if they knew if Dr Zaidi has tried any patients at all since he indicated at our last lunch that he was ready to try it. They both said they do not think he has started anyone. Reviewed appropriate patient type & asked them to give Dr Zaidi an "Initiations" invitation. They agreed.
PPLPMDL0020000001	Cleveland	OH	44103	7/19/2011	i talked to dr about her patients taking tramadol every day for their chronic pain but not controlled and perhaps a long-acting opioid like Butrans would be appropriate instead of refilling tramadol or converting to vicodin.dr said she's talked to a few patients and given Butrans patient information booklets if patients arent sure about wearing a patch for a week and it seems to be working.dr said she likes long-acting opioids and will keep this option in mind.we talked about OxyContin being appropriate after Butrans 20mcg isnt controlling patients pain or if she has patients on vicodin or percocet that she wants to convert to OxyContin,we discussed insurance coverage and 7 tablet strengths and i showed appropriate patients flashcard for OxyContin.i gave dr August dinner invitations.i recommended Senokot-S
PPLPMDL0020000001	Parma	OH	44129	7/19/2011	Spoke with Marion & reviewed appropriate patient type for Butrans. She said she thinks it is a good option but she has not dispensed any yet. She had no specific recommendations of who may be interested in hearing more about it in the area. Also discussed OxyContin & Rylozt savings cards, which she said she could use.
PPLPMDL0020000001	Cleveland	OH	44103	7/19/2011	i talked to dr about Butrans being an option for commercial plan patients that have chronic pain and take short-acting opioids every day but arent controlled.dr said he only has a few commercial plan patients and most of them dont have chronic pain.dr said its the uninsured and medicaid patients that have chronic pain and he's not willing to do the PA for Butrans.we talked about OxyContin being appropriate when patients are taking percocet and thats no longer controlling patients pain.dr said he knows its available on medicaid so its easy for him to write OxyContin and he likes that.i showed dr appropriate patients flashcard for OxyContin and i recommended
PPLPMDL0020000001	Independence	OH	44131	7/19/2011	I asked Dr Jack at what point he considers a condition "chronic". He said that after a couple of months, he would consider something chronic. I asked him what the difference are between patients who he would refer to pain management vs patients he would maintain himself in his office. He said he usually maintains patients unless he notices that the person is repeatedly not getting adequate pain control from whatever medication he gives them. He said if someone asks repeatedly for an increase in dose or frequency, he would refer to pain management. He said he tries to match a patient's personality with an a pain management specialist who would compliment it. I asked if he notices that patients get bounced back to him & he said they usually stay in pain management. Discussed appropriate Butrans patient type, including those who are taking 2-3 Vicodin per day for a chronic issue, who call or come in asking for an increase in their medication. He said he is "still thinking about it". Also discussed OxyContin as an option for appropriate patients suffering with more severe pain.
PPLPMDL0020000001	Cleveland	OH	44144	7/19/2011	Dr Paul said she does not remember much about Butrans so she asked me to give her the details again. Reviewed Butrans indication, dosing, delivery system, & appropriate patient type. She said that they do see a lot of patients who have conditions such as low back pain or spinal issues causing pain who take around-the-clock pain medication chronically. She asked if it is less abusable than Vicodin. I told her we have no comparative data but that Butrans is an opioid & therefore does have abuse/addiction potential, so she should be just as cautious in prescribing Butrans as she would any other opioid. Discussed various appropriate patient types, including those already on opioids, asking for an increase in dose or those who she is ready to start on an opioid for a chronic condition. She said many of these patients are older. Reviewed managed care coverage & savings program. She said they will not do a prior authorization, which is why they prescribe mostly tramadol or Vicodin. Asked her to think of her working patients who fit the indication. She said she does have a few. Also discussed OxyContin q12h as an option for patients on the more "severe" pain side. She said they usually don't start patients on OxyContin but will continue them if needed. She asked if Butrans can be used for cancer pain or acute pain. Reviewed indication & let her know that Butrans is contraindicated for acute pain.
PPLPMDL0020000001	Westlake	OH	44145	7/19/2011	Dr told me that he started a new patient on Butrans this week. I asked how they are doing, he said very well, He said that overall he has received good feedback and he is happy with Butrans. I asked if he will continue to prescribe and he agreed. (He will be on vacation next week in the DR. He will not be attending dinner due to religious fasting)
PPLPMDL0020000001	Euclid	OH	44132	7/19/2011	I asked doc what benefits he sees in Butrans. He said he likes that its a patch and that he does not have to write a bunch of pills. He said its not covered on medicaid though. I showed him the formulary grid and reminded him fo the BWC coverage. I asked him to try butrans for those patients.
PPLPMDL0020000001	Cleveland	OH	44124	7/19/2011	Quick call.....I asked doc if he sees a place for a long acting CII like Butrans in his practice. He said maybe. I gave him an initiation guide a formulary grid. He said he would try it.
PPLPMDL0020000001	Akron	OH	44319	7/19/2011	Introduced Butrans and FPI utilizing the FPI. I explained the message I was delivering to Dr. Wu and other physicians.
PPLPMDL0020000001	Westlake	OH	44145	7/19/2011	Saw Dr through window while leaving her invitation for the dinner discussion. She will try to make it or will call to set something up so we can talk further about Butrans.
PPLPMDL0020000001	Mayfield Hts	OH	44094	7/19/2011	Window call.....I reminded doc that there is an alternative to hydrocodone several times a day. I showed him an example of the demo of Butrans and explained that one patch last for and entire week. Also told him that it could be refilled and called in to pharmacies. Scheduled lunch.
PPLPMDL0020000001	Cleveland	OH	44113	7/19/2011	i talked to dr about his patients taking tramadol every day,for their chronic pain,yet not controlled and asking him for something else.dr said he has hundreds of patients on tramadol,some do well with short-acting tramadol and some dont.dr said he likes long-acting opioids and thinks Butrans would be an option for some patients but he has to remember Butrans is there.dr asked about medicaid coverage as thats the majority of patients here.we talked about PA for medicaid patients and Butrans and dr said he'll think of a couple patients and talk to them and will let me know,dr asked me to follow-up at end of week.i recommended Senokot-S
PPLPMDL0020000001	South Euclid	OH	44121	7/19/2011	Window call.....I reviewed the butrans indication, positioning and the CII status. Gave him an engage invite and a butrans formulary grid. Nothing learned.
PPLPMDL0020000001	Independence	OH	44131	7/19/2011	Started to discuss various conditions causing chronic pain that Dr Sundaram treats in his office, but then he got 2 phone calls & 4 pages, so I told him I would come back another time to continue the discussion. He said he really appreciated it. Spoke with Lisa & June & reviewed savings cards for Butrans & OxyContin.
PPLPMDL0020000001	Waterford	OH	45786	7/19/2011	W - Waters said that he hasn't written for Butrans, but is keeping it in mind as an option for patients. He shared that a lot of patients will put up a fight to be switched from what they are currently taking or those that will be hesitant to use a patch. I - Butrans review of indication and 7 days of buprenorphine therapy in 1 application with a CII scheduling. Use of placebo Butrans as a visual for the physician to see what it looks like and that the adhesive covers the entire surface of the transdermal itself. Review of formulary coverage - BWC and commercial plans with a 3T status. Savings Card program eligibility.
PPLPMDL0020000001	Akron	OH	44319	7/19/2011	I asked Dr. Wu if he had many patients who had been on SAO for more than 3 months and he said yes. I asked him if he felt those patients needed to be on a LAO and he said yes. I explained that Butrans may be an option for those patients and that it was a LAO and a schedule 3. He agreed and said he just needed more reminding.
PPLPMDL0020000001	Cleveland	OH	44130	7/19/2011	Quick call- Discussed titration ability every 3 days to a maximum dose of 20mcg. Dr Diab asked me to put the initiation guide on his desk to help remind him. Spoke with Barb & discussed savings cards for Butrans & OxyContin. She said they have enough of both of them for now.

PPLPMDL0020000001	Parma	OH	44134	7/19/2011	I asked Dr Hernandez if he finds that he uses Butrans now in patients for whom he would have prescribed OxyContin. He said that if the patient would need only a low dose OxyContin, he might choose Butrans instead, but he uses them both in different types of patients. He said that patients have been very pleased with their results with Butrans & that keeps him pleased as well. I asked if he finds the need to titrate often & he said sometimes, but not always. He said he feels there is a big different between the 5mcg & 10mcg, so patients may need more than 5 but less than 10mcg. He also said some patients have requested Opana more now. He said Opana used to "not have a street value", but "now it does because of the OxyContin reformulation." I asked what he does with those patients. He said it depends, but he usually doesn't give patients what they ask for, although he added that sometimes patients are "allergic" to medications they do not want. He said he sent the information about how much buprenorphine Butrans contains to BWC & has not heard back from them yet. He said he is ready to defend medications as patients need an advocate. I agreed. Also discussed Senokot-S for opioid-induced constipation.
PPLPMDL0020000001	Cleveland	OH	44103	7/19/2011	I talked to Michael, Pharmacists, as Amy, Pharmacy mgr was out today, about Butrans scripts and he said that Dr Patel did have a patient go to their store and get a refill for Butrans, patient started on Butrans 5mcg and was titrated to 10mcg, no problems. I confirmed stocking, discussed 5 Butrans core messages and asked Michael to focus patient discussions on application/rotation of Butrans, Michael said he is doing that and giving patients the Booklets if they are complaining that their pain isn't controlled with short-acting opioids and telling them to speak with their physicians about Butrans. I recommended Senokot-S
PPLPMDL0020000001	Akron	OH	44319	7/19/2011	Dr. yee said that there was a definite place for Butrans in his practice for both opioid naive and experienced patients. I explained how to initiate therapy in both those patient types by using the initiation and titration guide.
PPLPMDL0020000001	Cleveland	OH	44195	7/19/2011	worked apm dept-left Butrans fpi, initiation guide, patient information booklet and Butrans dinner invitations for Dr. Mekhal, Dr. Minzter, Dr. Katyal, Dr. Frost, Dr. Schaefer and Dr. Vrooman. talked to Kathy kraus, PA and Anne Crawford, NP, in APM dept-see notes. worked neurology dept-had to leave Butrans fpi, initiation guide, patient information booklet and dinner invitations for Dr. Krieger, Dr. Mays, Dr. Stillman and Dr. Spears. Worked Rheumatology dept-left Butrans fpi, initiation guide, patient information booklet and dinner invitations for Dr. Calabrese, Dr. Chatterjee, Dr. Deal, Dr. Mazanec and Dr. Long. left Butrans fpi, initiation guide, patient information booklet and my business card for Betsy Kirchner, NP, works with Dr. Calabrese and Patty Paczos, PA, works with Dr. Long
PPLPMDL0020000001	Mayfield Village	OH	44040	7/19/2011	Spoke to Danielle about the stocking of Butrans. She said they do have one patient on it and they are stocking. She did not recall if patient uses a savings card but believe the cost was reasonable. I explained the savings cards program and how it can be used for commercially insured customers. She has a few oxycontin patients and and patients can generally afford it as well. Provided medical education catalog for CEs.
PPLPMDL0020000001	Waterford	OH	45786	7/19/2011	W - She said that normally Doc Waters handles the chronic pain medication therapy, but likes that it has a CII scheduling. Most patients in her practice are either medicaid or medicare covered so the options are limited for her. I - Butrans review of indication and 7 days of buprenorphine therapy in 1 application with a CII scheduling. Use of placebo Butrans as a visual for the her to see what it looks like and that the adhesive covers the entire surface of the transdermal itself. Review of formulary coverage - BWC and commercial plans with a 3T status. Savings Card program eligibility.
PPLPMDL0020000001	Cleveland	OH	44121	7/19/2011	Window call.....reminded doc of the butrans positioning and asked him to try one patient that has failed on tramadol. Gave him formulary grid reminder and "a week ahead" reminder.
PPLPMDL0020000001	Westlake	OH	44145	7/19/2011	Dr said that he is still trying to find the right candidate for Butrans. He said many of his patients are patients on higher doses opioids who would be better for OxyContin. I asked if he has started any patients on tramadol or vicodin recently and he said he has but they are more acute pain. I asked if he has patients who are taking 2-3 5mg vicodin per day whose pain is not well controlled. He said he does, and I asked him to start them on Butrans instead of increasing their dose of short acting. He said he will try. I asked if he would come to our dinner discussion to talk to his peers about how Butrans is benefiting their patients. He will check to see if he can come to the Westlake program since he lives close.
PPLPMDL0020000001	Independence	OH	44131	7/19/2011	Quick call- Discussed Butrans as a long-acting CII opioid & reminded Dr Rob that he had said that he thought he might prescribe Butrans for a patient who is not well controlled on Vicodin instead of putting them on Percocet.
PPLPMDL0020000001	Sagamore Hills	OH	44067	7/19/2011	Dr Scanlon came into breakfast & said that he was excited to tell me that he has been writing Butrans for a few patients. I asked him to tell me a little bit about the patients he was selecting. He said he has been using it on patients who are already on some dose of opioids. He said that he has heard back from one patient that he likes it & is doing well but has not had a follow-up visit with the others. He added that he even called in some of the prescriptions because he has that ability since Butrans is CII. He said that he likes being able to call in something that is long-acting. Dr Scanlon said that he plans to continue to prescribe Butrans so that he can get more experience. I asked him his thoughts on using it in patients for whom he is ready to start on Vicodin if he knows their condition is chronic & he said this is an area he will start to consider as well. Started to go through Initiations presentation but he said he did not have time to finish it. He requested more savings cards. Also reminded Dr Scanlon of OxyContin q12h with 7 available tablet strengths. He also asked for savings cards for
PPLPMDL0020000001	Hudson	OH	44236	7/20/2011	Reviewed with Dr Seiple appropriate Butrans patient type. He said that he feels like he knows where to position Butrans now whereas before he thought it was for patients on higher doses of opioids. He said that when he thinks of patients who he would like to switch from their current medication, it is usually patients who are on high doses of opioids. Discussed OxyContin q12h as a potential option for some of those appropriate patients. I asked how often he sees patients who are taking 2-3 Vicodin or tramadol per day month after month requesting an increase in dose or saying their medication is wearing off too quickly. He said often. I told him those would be potential patients to think of Butrans for. I asked him to switch them to Butrans 5mcg/hr, if appropriate, instead of refilling their Vicodin or tramadol. Also asked him to remember commercial insurance patients & reminded him of savings cards. He said he is willing to try Butrans for appropriate patients.
PPLPMDL0020000001	Hudson	OH	44236	7/20/2011	I reminded Dr Tosino of our previous conversation when he told me that while he does not generally like to prescribe opioids, he does have some patients who he trusts who he would feel comfortable doing this for. He said that is true. I told him that patients who are steady on their current medication & who are doing well may not be the patients to consider for Butrans, but rather to think about those who are on 2-3 Vicodin or tramadol per day month after month who call or come in & say their medication is wearing off too quickly or requesting an increase in dose. I asked him what having a long-acting CII medication meant for him. He said he knows that it makes more sense to have patients with chronic issues on long-acting medications, but that usually the prescriber "gets trapped" into a cycle of just continuing them on their short-acting. He said to be honest that it is easier to just refill a medication for a patient than to think about starting them on something different & then take the time to explain it to the patient. He said he knows that is not always right for the patient though. I showed patient information booklet & asked if having that as a tool to help give the patient information would be of value to him & would help take that burden away. He said yes. Reviewed appropriate patient type & he said he will try it for that patient type. Also reviewed 7 available tablet strengths of OxyContin.
PPLPMDL0020000001	Cleveland	OH	44104	7/20/2011	I talked to dr about her patients this week that have chronic pain and are taking tramadol or vicodin every day but not controlled and considering Butrans as an option, dr said since our lunch last week she's considering Butrans for patients but hasn't had anyone complain to her that their tramadol or vicodin isn't working, dr said she will keep Butrans in mind and asked about initiating dosage strengths and insurance coverage. I showed dr Butrans visual aid, initiating dosage strengths, 5mcg and 10mcg, and appropriate patients section and asked dr to focus on commercial plan patients, dr said ok. I recommended Senokot-S
PPLPMDL0020000001	Mayfield Heights	OH	44124	7/20/2011	Quick call.....reminded her of the appropriate patient for Butrans and the initiation dosing. Gave her an interact invitation and formulary grid.
PPLPMDL0020000001	Cleveland	OH	44106	7/20/2011	talked to dr about his chronic pain patients taking Ultram every day and still not controlled and asking him for more pills or wanting something else, dr said he does hear that from patients. I asked dr to consider Butrans for those patients at that point, instead of refilling ultram or increasing pills, dr said he might do that if patients were appropriate. I showed dr Butrans visual aid, discussed appropriate patients and told dr patients taking less than 300mg tramadol a day can start on Butrans 5mcg, dr said ok. we talked briefly about insurance coverage and I asked dr to discuss application/rotation section in Butrans patient information booklet when he does start more patients, dr said ok. I recommended Senokot-S for opioid induced constipation.
PPLPMDL0020000001	Cleveland	OH	44104	7/20/2011	I talked to dr about his patients with chronic pain taking tramadol every day and not controlled and considering Butrans for these patients instead of refilling their tramadol or converting them to vicodin, dr said he has a few patients on Butrans and they are well controlled, he does like the long-acting opioid action of Butrans and likes that its a patch dosed once a week. dr said his challenge is that he has a lot of medicare in his office and medicare's not covering Butrans. I asked dr to focus on a couple commercial plan patients like we discussed and start on Butrans, dr said ok if he has any coming in this week, he'll remember Butrans for them. I showed dr OxyContin appropriate patients flashcard and we discussed OxyContin being an option for patients with 7 tablet strengths and I showed dr OxyContin formulary grid with UHC/AARP preferred coverage for Butrans, dr said ok he has a handful of patients on OxyContin. I recommended Senokot-S
PPLPMDL0020000001	BEDFORD	OH	44146	7/20/2011	Spoke with Marcus, pharmacy manager, who said he has not seen any prescriptions for Butrans yet. Reviewed appropriate patient type, dosing, & titration ability every 3 days to a max 20mcg dose. He also said that he has seen a major drop-off of OxyContin prescriptions & that he has not filled an OxyContin script in weeks. I asked why he thinks that is. He said he has no idea but it might have to do with the reformulation. I asked if he has seen an increase in anything to counter the decrease of OxyContin. He said he basically only Percocet at this point. He said he would keep an eye out for any changes.
PPLPMDL0020000001	Warrensville Heights	OH	44122	7/20/2011	Introduced myself & Purdue's products to Dr Desiato. She said she had not yet heard of Butrans. Reviewed indication, dosing, appropriate patient type, CII, & abuse/addiction potential. I asked her what she would do with a patient with a chronic issue causing pain who was failing on NSAID's or COX-2's. She said in the past she has tried the patient on tramadol or Vicodin & has also prescribed fentanyl. She said that she likes the "patch technology". Discussed appropriate patient type further. Dr Desiato said that she doesn't have a high confidence & comfort level with opioids yet, but she likes hearing about new options. Also discussed OxyContin q12h
PPLPMDL0020000001	Warrensville Heights	OH	44122	7/20/2011	I reminded Dr Kessler of our previous conversation when he told me that because he trains residents most of the time, he does not prescribe a lot of opioids. I asked him what the residents are taught to go to when a patient fails or cannot tolerate NSAID's or COX-2's. He said it depends on the resident's comfort level. He said each is different, but typically they would go to tramadol or Vicodin. He said he himself is more comfortable, but not nearly as comfortable as he used to be. He added that he has seen some patients coming in on Butrans, so he is glad that it is being used by various physicians & specialists. He said as he sees it being used more, he will probably start prescribing also, when he sees the right patient. I asked him what he would consider "the right patient". He said someone with a chronic issue who is not being well-controlled on short-acting medication. He said he likes once weekly dosing & that it is transdermal & CII. Discussed abuse/addiction potential because Butrans is an opioid & went over managed care. Also discussed OxyContin q12h for appropriate patients on the more "severe" side. He said he "got burned" a few years back by a patient who overdosed on opioids, so he is more cautious. I agreed that he should be cautious & discussed importance of appropriate patient selection. Started "Initiations" presentation but did not get to finish it.
PPLPMDL0020000001	Mayfield Hts	OH	44124	7/20/2011	I asked doc how his patients are doing on Butrans. He said the ones that he has are doing fine. He admitted that he could prescribing more because there is definitely a niche for it.....the problem is he has a lot of medicare/medicaid. I reviewed the commercial plans. I explained the initiations invite and how he could learn more about appropriate patients. He asked about being a speaker for butrans. I told him I forward his name on and that it is out of my hands now.
PPLPMDL0020000001	Westlake	OH	44145	7/20/2011	Met Henny the NP, she was filling in for Dr Bashnab today and said that she fills in several times per month. I reviewed the Butrans key messages and she liked the fact that it is a CII and she can prescribe it. We discussed the initiation guide and the appropriate patients for Butrans. We discussed OxyContin could be an option for her to recommend once patients are on higher doses of opioids and Butrans may not provide adequate analgesia. I reviewed managed care for Butrans. I spoke with Angela and she said she recently had a hard time getting a prior auth for Medicaid. We discussed BWC and commercial would have coverage.
PPLPMDL0020000001	Warrensville Heights	OH	44122	7/20/2011	Reminded Dr Mueller of our previous conversation when he told me that he avoids prescribing opioids. He said this is true, now more than ever with the legislation going through the House. I asked him if he has any patients at all who he does trust who he does have on opioid therapy. He said a few. Discussed the importance of appropriate patient selection & asked him to use the same caution in prescribing Butrans. He asked the exact indication, so I went through it with him. He asked how it shows up in urinalysis. I told him to check with their lab for testing for buprenorphine. Discussed delivery system & Butrans as a long-acting CII. He said he prefers long-acting opioids for patients if they do need them chronically because it gives a more steady release of the drug which he said "is better" for the patient. Showed PK profile. He said that he is finding that now pain management doesn't even want to prescribe pain medications because they only want to do procedures, so patients end up back at his office, which is frustrating to him. He asked where patients should apply Butrans. Discussed application & rotation. He asked how young a patient he could use it on & I told him Butrans is only for adults 18 & older. <font color=blue><b>CHUDAKOB's query on 07/28/2011</b></font>-<font color=blue><b>Ashleigh, when a physicians refers to a long-acting giving a more steady release of the "drug" and it being "better" for the patient, it is up to you to correct that statement by telling him that we have no data to suggest that the release of our medication is better in any way or provides any better pain relief than any other opioid including short-acting. By showing him our PK profile, in that situation, you are in essence agreeing with his statement.</font color=green><b>APSEGA's response on 07/29/2011</b></font>-OK. I will be certain to make sure to communicate this with him at my earliest opportunity.<font color=blue><b>CHUDAKOB added notes on

	Warrensville	OH	44122	7/20/2011	Dr Rakowsky reminded me that she does not prescribe opioids when I was talking to Dr Mueller about Butrans. She added that this is because she "got burned" by a patient. Discussed the importance of appropriate patient selection & empathized with her position as a physician trying to do the right thing. Reviewed Butrans indication, dosing, delivery system, & appropriate patient type & told her I wanted her to at least have the information so that if someone comes to her already on it, she is prepared to answer questions if necessary. Also reminded her that Butrans is a CIII opioid & therefore does have abuse/addiction potential. I asked if she uses OARRS & she said she does. I agreed that this is a great way to protect her practice.
PPLPMDL0020000001	Cleveland	OH	44122	7/20/2011	Introduced myself & Purdue's products to Dr Wolkoff. I asked him what he typically does, or would do, if a patient with a chronically painful condition was not being well-controlled on NSAID's or COX-2's. He said he would probably go to tramadol from there, after which he would probably try them in Vicodin. Discussed Butrans indication, dosing, appropriate patient type, CIII, & abuse/addiction potential.
PPLPMDL0020000001	Akron	OH	44320	7/20/2011	I asked Misty if she was still having the success with Butrans that she has mentioned form previous calls. She said she she was having success in terms of efficacy but did not have a huge opportunity to write it because of the Medicaid population.
PPLPMDL0020000001	Cleveland	OH	44143	7/20/2011	Quick call....asked doc if he has patients that might be taking hydrocodone several times/day to manage their pain. He confirmed that he does. I asked him if he would consider Butrans for those types of patients - Butrans is a CIII like vicodin and can be called in or refilled. Plus Butrans is just a once weekly dose. Gave him a formulary grid and initiation invite.
	Cleveland	OH	44104	7/20/2011	I talked to dr about her patients taking percocet every day for chronic pain but not getting pain controlled with percocet and asking her for something else.dr said she has hundreds of those patients.I discussed 5 Butrans core messages,showed Butrans visual aid to dr and asked dr how Butrans could be an option for those patients when asking for something else? dr said once weekly dosing is a good thing for some patients and transdermal delivery.dr asked if Butrans was a CII,I showed dr Butrans core messages in visual aid,noting that Butrans is a CIII and what that meant was that dr could call in 5 refills of Butrans up to 6months.dr said that was a good thing as its easier to call a medication in for patients.I asked dr if she had 2 patients,commercial insurance,this week that she could start on Butrans? dr said she will think about it and asked me to follow-up with her and keep reminding her of the initiating dosage strengths of Butrans and how to write the script.I showed dr Butrans initiation guide with dosage strengths on back cover and example of a Butrans script.dr took that and said that what I talked to Laura,Pharmacy manager,briefly as she hasn't seen any Butrans scripts and isnt going to stock Butrans until she gets a script.I showed Laura Butrans visual aid,5 core messages and asked her what were a couple features she felt were important to patients? Laura said Butrans being transdermal and patients wearing a patch for once a week were features she thought a lot of patients would really like.Laura asked who i worked with in area and i told her all of the major institutions and surrounding physician offices.I asked Laura to give patients the Butrans patient information booklet,if they tell her their short-acting opioids arent controlling their pain,Laura said she would do that.I recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44120	7/20/2011	talked to Stewart,Narcotics buyer/pharmacist,about Butrans stocking and confirmed that,we talked about doctors writing Butrans in area and he's only seen a few Butrans scripts get filled and he could only recall seeing some from Dr.Sahgal and Dr.Rosenfield but knows they have had more doctors write Butrans.Stewart said he'll check for me next time i stop in but didnt have time today.I asked Stewart to focus his patient discussions on Butrans application/rotation in Butrans patient information booklet,Stewart said he will do that as they have been giving booklets to patients.I recommended Senokot-S
PPLPMDL0020000001	Euclid	OH	44117	7/20/2011	I showed doc the demo Butrans patch and asked him if he knew it's what I've been trying to get him to prescribe. He said yes what I have been trying to get him to prescribe. I confirmed that it is also an alternative to 2 tabs of vicodin/wk or 3 tabs per day. Explained that Butrans is a CIII and can be called in/refilled similar to vicodin. He said he is having dinner with Moufawad this evening and he is going to talk about butrans. He asked me to check back with him. Told him I would come back on friday.<font color=blue>-<b>CHUDAKOB's query on 07/28/2011</b>-</font>Charmaine, you do not want to discuss Butrans being an option to a number of pills as this could imply superiority of our product and as you know we have to data comparing Butrans to any other products.<font color=green>-<b>SMERTOK's response on 08/03/2011</b>-</font><font color=blue>-<b>CHUDAKOB added notes on 08/03/2011</b>-</font>I asked Dr. Sahgal and Dr. Rosenfield but knows they have had more doctors write Butrans. Stewart said he'll check for me next time i stop in but didnt have time today. I asked Stewart to focus his patient discussions on Butrans application/rotation in Butrans patient information booklet,Stewart said he will do that as they have been giving booklets to patients.I recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44104	7/20/2011	dr said he has 2 patients he wants to start on Butrans and wants to talk to me about that to ensure he has all of the information he needs but doesnt have time to talk to me today.dr asked if i could come back on Friday,around 11:30am as he'll have some time to talk? i told dr that was fine and i could return to his office on friday morning.
PPLPMDL0020000001	Cleveland	OH	44106	7/20/2011	talked to dr about his patients taking vicodin,5mg,1-2 tabs a day, and not controlled and asking him for something else or more pills.I asked if dr Butrans would be an appropriate option for patients at that point,dr said he might consider starting them on Butrans but in the past he would just increase vicodin to the 7.5mg dosage strength and see if that controls pain.I showed dr Butrans visual aid,discussed Butrans once weekly dosing and asked if patients would be interested in knowing there's an option like Butrans available? dr said some patients like the patch and some just want their pills.I asked dr to focus on commercial pain patients,per our discussion that arent controlled and starting them on Butrans instead of refilling vicodin or increasing dosage strength,dr said ok he'll consider that.we talked about Butrans patient savings cards for commercial pain patients and Butrans patient information booklet.I recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44106	7/20/2011	worked pain management dept-see call notes on dr khali and dr sahgal
PPLPMDL0020000001	Parma	OH	44129	7/20/2011	Dr Gioglietti said he has had a horrible headache for two weeks straight & was preparing for a 2 week trip overseas, so he was very short on time. I told him that all that travel time would give him a lot of opportunity to go online to check out the "Initiations" interactive program to assist him in identifying who is & who is not appropriate for Butrans. I let him know that I could tell it was not a good time for him so I would return after he gets back to have a good Butrans discussion. He said he would be returning August 1st & would talk to me then.
PPLPMDL0020000001	Copley	OH	44321	7/20/2011	Dr. Machado said that he had prescribed Butrans for at least 2 patients one of which was Medicaid. He said that patients were getting adequate pain relief and he felt confident prescribing it moving forward. I reminded him of titration and of our coverage, explaining that getting it covered on a commercial insurance should be easier.
	Cleveland	OH	44109	7/20/2011	I talked to Adam,Pharmacy Tech and Naser,Pharmacist,about Butrans 5 core messages.Both Adam and Naser said they like that Butrans is transdermal and is a patch for patients to wear once a week but they have seen any scripts for Butrans.Naser said he's not ordering Butrans until he see's his 1st script,then he has no problem order the Butrans 5mgc and 10mgc,we discussed importance of stocking so patients dont have to wait 24hrs but Naser said that's where he stands on this topic,he needs to see the 1st script.Naser asked who i was working with in the area,told him major institutions and surrounding physician offices,Naser said he would tell doctors about Butrans if he hears any patients complaining of their short-acting opioids.I left 2 Butrans patient information booklets and asked Naser and Adam to tell patients about application/rotation of Butrans once they see scripts,both agreed. I gave Naser the Medical Education Catalog flyer for Pharmacists Role in REMS training and Naser said that was great and he appreciates any educational materials we have available.
PPLPMDL0020000001	Akron	OH	44333	7/20/2011	I asked Dr. Griffiths if she was still focused on prescribing Butrans for patients who were failing on their Percocet and Vicodin. She said she was and was focused on prescribing it for the 20 percent of her patient population that has coverage and she committed to continuing that habit.
PPLPMDL0020000001	Bedford	OH	44146	7/20/2011	I asked Dr Haddad how his patients who he selected for Butrans are doing. He said that overall, he is getting a good response. He also told me again about the patient who pays out-of-pocket because she is so happy with the pain relief she gets. I asked if he gave her a savings card & he said he did. I asked him what it was about these patients that made him think of Butrans. He said he really didn't know, but he looks for patients who are not well-controlled on their current therapy. He told me that he just tried to write it again, but the insurance wanted a fentanyl failure first. I reminded him of commercial coverage & also BWC. He said he had forgotten about BWC. I said that might be an area he he could focus on so that he does not get managed care push-back & so that he can gain more clinical experience with Butrans. He agreed that this would be a good patient population to focus on. Discussed "Initiations" program with him & invited him to participate. He said he could not do it in the office but he might check it out at home. Also reminded him of 7 tablet strengths of OxyContin & savings available to discussed Initiations presentation with dr.4 patient case studies and dr shared thoughts on each case study.dr said for opioid naive patients, she wouldnt rule out but might start patients on Ultram first.dr said based on the fact that tramadol has some serotonergic actions that block pain,she has been prescribing tramadol first,then would consider a long-acting opioid like Butrans if the tramadol wasn't controlling patients pain.dr said for patients who are older than 65,like 1 patient case study in presentation,she would consider Butrans 5mgc for that patient but the problem would be insurance coverage since medicare doesnt cover Butrans.dr said if patients are taking 1-2 tabs of vicodin 5mg,daily for chronic pain she would look at any other comorbid conditions and probably prescribe a Cymbalta or other medication for patient first,then if thats not working on pain,she'll prescribe a narcotic like Butrans.we talked about Butrans patient information booklets being an education tool and dr said she is showing patients application/rotation section in Butrans booklet and patients appreciate that.I asked dr to continue starting patients on Butrans,perhaps those taking tramadol every day where thats not controlling their pain,instead of refilling tramadol or converting them to vicodin.dr said that makes sense and if appropriate she will do that.I recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44143	7/20/2011	Quick call....showed doc the Butrans article and asked him if had a chance to learn more about Butrans. he said he didnt think so. I explained that it may answer some of his questions about the product. I gave him an initiations invite and told him I would discuss with him over lunch.
PPLPMDL0020000001	Cleveland	OH	44114	7/20/2011	discussed 4 patient case studies with dr,from initiations presentation,dr said he wouldnt start an opioid naive patient on Butrans or any other long-acting opioid.I asked dr to tell me more about that and why his decision was that? dr said he would feel more comfortable giving that patient a short-acting analgesic like tramadol initially to see if that controls the pain or look at injections from specialists so he would get a few consults first.dr said after tramadol or vicodin doesnt control pain,he would then consider a long-acting opioid like Butrans.we talked about patients older than 65yrs old,as this was the 1 case study,dr said he doesnt have any patients older than 65 taking Butrans and isnt sure if he would due to safety concerns with long-acting opioids,I showed dr Butrans fj,geriatric use section and dr was surprised with clinical results in geriatric patients taking Butrans.dr said medicare probably doesnt cover Butrans so that would be an obstacle as well,I confirmed that at this time Medicare isnt covering Butrans but he can focus on BWC and commercial pain patients to start on Butrans.dr said he will,he's not had any complaints from patients taking Butrans and their pain seems to be better controlled now that they are taking Butrans.I asked dr to continue starting patients on Butrans and focus discussion on once weekly dosing and application/rotation information in Butrans patient information booklet,dr said he is giving that to patients.
PPLPMDL0020000001	Solon	OH	44139	7/20/2011	Mike said Dan Best has been the Director of Part-D for Caremark CVS for Manufacturer/Trade and Mike has maintained his position. The person over Part-D now will maintain Commercial contracts. They'll still use Caremarks P&T Committee but they'll have alot less impact over their decisions. Once all decisions are final, they'll send a confirmation email. He'll meet with Tony to discuss OxyContin rebate but they now have problems with duplicate claims. He's waiting for P&T decision for Butrans and said there's still a chance for 2011 coverage as well as 2012. He asked that I send an email regarding the length of time we're waited for MKT pieces approval. It'll go to compliance for approval then to Caremark.
PPLPMDL0020000001	Bedford	OH	44146	7/20/2011	I asked Dr Moufawad what kind of opioid dose a typical patient is already on when they come to see him for the first time. He said that it varies from patients on Tylenol 3 to patients on high doses of Methadone or 80mg q8h. I reminded him that OxyContin is only indicated for q12h dosing & he said he is aware. He added that being a pain management specialist is difficult because he feels under constant pressure & scrutiny from the Medical Board & law enforcement when his only intention is to do what is best for each patient. He said that he is sometimes able to taper patients who come to him on very high doses of opioids down & the patients tell him usually that while they are in some pain, they feel much better overall on their lower dose because they do not feel so "drugged up" all the time. I agreed that balancing analgesia with tolerable side effects was a good goal to have. I asked him if his ultimate goal is to taper all his patients. He said it is only possible for some. He went on to say that he thought Butrans would be the future of his practice but then he "got burned" & that is why he stopped for awhile. However, he said that he is now trying it on patients "here & there" when appropriate. He said he hopes the issues with the OH Medical Board get resolved soon so that he would make him more comfortable prescribing. He also requested a type of training company can offer on usage of Butrans. Also reviewed Butrans & OxyContin formulary grids with Amber.<font color=blue>-<b>CHUDAKOB's query on 07/28/2011</b>-</font>The relationship marketing program can provide a lot of training for him. Are you selling him on this?<font color=green>-<b>KPSEGA's response on 07/29/2011</b>-</font>I have told him about it. He has said that he does not have time, but I have a lunch with him in a few weeks, so I plan to run through it with him at that point.<font color=blue>-<b>CHUDAKOB added notes on 07/30/2011</b>-</font>Great. You will need Quick call....reminded doc that he only expressed concern about cost of butrans. I explained the potential \$15-20 co pay for commercially insured patients. Showed him where the savings cards. I talked to dr about Butrans 5 core messages,appropriate patients for Butrans and dr asked if he could give Butrans to a patient that has never started an opioid? i told dr yes,showed dr Butrans visual aid with opioid-naive information and showed dr Butrans initiation guide discussing Butrans 5mgc for the opioid naive patient.dr said he understands Butrans is for patients with moderate to severe chronic pain but low dose short-acting opioids every day,told dr yes,showed Butrans initiation guide and asked dr if he has a couple patients that are taking tramadol every day for chronic pain,but not controlled? dr said yes he does and he'll try Butrans in those patients.we talked about Butrans insurance coverage.I recommended Senokot-S
PPLPMDL0020000001	University Heights	OH	44121	7/20/2011	
PPLPMDL0020000001	Cleveland	OH	44102	7/21/2011	
PPLPMDL0020000001					

PPLPMDL0020000001	Cleveland	OH	44102	7/21/2011	i talked to Nagla,PA,about appropriate patients for Butrans and Nagla said she knows dr celeste started 2 patients on Butrans and both seem to be doing well.nagla said both patients have seen them for a follow-up visit and their pain seems to be controlled with Butrans.i showed Nagla Butrans visual aid,5 core messages and asked her what were the top 3 features of Butrans that stood out? Nagla said she likes transdermal delivery and the fact Butrans is a patch dosed once a week that's easy for some patients.i asked Nagla if she could think of a few patients today and tomorrow,that are taking tramadol every day for their chronic pain but not controlled,and start them on Butrans.Nagla said she will consider that but she consults with each dr before making final medication decision.we discussed Butrans formulary coverage.i recommended Senokot-s
PPLPMDL0020000001	Independence	OH	44131	7/21/2011	Spoke with Sue (nurse) who said that Dr Faيمان would not be able to see me today. She asked that I return in two weeks. Reviewed with Sue Butrans indication, dosing, appropriate patient type, delivery system & showed savings cards. I asked if they needed any but she said she did not think so. I asked her to give Dr Faيمان Butrans information with my card & she agreed to do this.
PPLPMDL0020000001	Cleveland	OH	44113	7/21/2011	I talked to dr about his patients taking tramadol every day for chronic pain but not controlled and asking for something else.dr said he hasnt thought of those patients but it made sense to think earlier in therapy.i showed dr butrans visual aid,appropriate patients,and we talked about patients taking less than 300mg tramadol/daily,could be started on Butrans 5mcg,dr said ok he'll see if he has any patients like this and could try Butrans in them.we discussed insurance coverage,i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44106	7/21/2011	talked to dr about patients that are taking tramadol every day for chronic pain yet not controlled and asking him for something else,dr said they see a lot of those patients,i asked dr to start a few patients like that on Butrans instead of refilling their tramadol or increasing their tramadol dose,dr said he will start some patients on Butrans as he likes transdermal medications and prefers them over short-acting opioids.i showed dr Butrans visual aid,discussed 5 Butrans core messages,appropriate patients and initiation sections of visual aid and we discussed insurance coverage.i told dr i would follow-up next wednesday as we have lunch together and see how many patients he's started on Butrans,dr said ok.
PPLPMDL0020000001	Bedford	OH	44146	7/21/2011	Spoke with pharmacist Shay & reviewed Butrans indication, dosing, & appropriate patient type. She said she has not yet dispensed any. Reviewed savings program & asked her if she has customers with commercial insurance & she said she does. Offered OxyContin & Ryoltz savings cards. She said she does not stock OxyContin or Ryoltz. She said their generic tramadol is \$4, so branded tramadol products just do not get filled there.
PPLPMDL0020000001	Cleveland	OH	44113	7/21/2011	i talked to dr about Butrans 5 core messages and dr said he keeps forgetting about Butrans and asked who was the appropriate patient and what were starting dosage strengths? i showed dr Butrans visual aid,appropriate patients section and showed Butrans initiation guide too for titration information.I asked dr to think of a few patients that are taking tramadol every day for their chronic pain but not controlled and considering Butrans right there for those patients instead of refilling tramadol or increasing dosage strength of tramadol,dr said ok he will have to think about it as many patients like taking their pills.i showed dr Butrans fpi,discussed maintenance of therapy section,told dr he can start patients on Butrans and still give short-acting opioids or non-opioid therapy,dr said ok.dr asked if medical covered Butrans? we discussed butrans formulary coverage.i recommended
PPLPMDL0020000001	Warrensville Heights	OH	44122	7/21/2011	Dr Brooks said he was running too far behind for a conversation. Delivered Butrans dosing reminder & asked him to think about patients who are on Vicodin 2-3 times per day month after month who call in too soon for refills or ask for an increase in dose. He said he had not thought of using it here before, but will now. Spent time with Jaz talking about the appropriate patient type for Butrans. I asked her about getting calls from patients on Vicodin who are asking for refills too soon or an increase in dose. She said she gets those calls every day. Discussed dosing, delivery system CIII, & abuse/addiction potential. She said she is going to ask Dr Brooks to switch some of them to Butrans when she gets these calls. She said she knows he has been trying to use it more often & said she would help remind him. She added that she just got one of these calls yesterday & she is going to write her name down & ask Dr Brooks about switching her. Discussed managed care & savings.
PPLPMDL0020000001	Maple Heights	OH	44137	7/21/2011	Spoke with technician as the pharmacist was too busy to see me. Reviewed with her Butrans dosing, usage, & appropriate patient type. Also discussed patient counsel & questions that patients may ask when filling a Butrans prescription, especially for the first time. Discussed application, rotation, & disposal. Offered OxyContin & Ryoltz savings cards, but they declined.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	7/21/2011	I asked the physician how often patients are calling in complaining about their current SA therapy? How often are they asking for more of it? She said patients are calling in often complaining of both. I asked if she would feel comfortable initiating therapy to those patients and she agreed she would.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	7/21/2011	I asked Dr. DiLauro about the success patients were having with Butrans and she said she felt patients were having success for the most part. She said that based on the success rate with Butrans she would feel confident continuing to prescribe for opioid experienced patients. I reminded her that Butrans had also been studies in opioid na /nve patients.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	7/21/2011	I asked the physician if she felt there was truly a place for Butrans in her practice and if she could see herself prescribing Butrans moving forward. She said yes. No new info learned.
PPLPMDL0020000001	Cleveland	OH	44130	7/21/2011	Dr Kansal said he switched the patient he had put on Butrans over to OxyContin. I told him this sounded like the right thing to do since he had said that the patient was beyond Butrans 20mcg. He said he did not have time to talk today & walked into a room. Spoke with Dorothy who asked about OxyContin formulary coverage as the patient Dr Kansal had told me about has Medical Mutual insurance. Showed her formulary grids for Butrans & OxyContin & reviewed savings cards for eligible patients. Also asked Dorothy the "Initiations" invitation, which she agreed to do but added that she doubts he will actually do it. Told her about interactive nature of the program & that it might help him identify who is & who is not an appropriate Butrans patient.
PPLPMDL0020000001	Barberton	OH	44203	7/21/2011	I asked Dr. Patel about the success patients were having with Butrans and he said he felt patients were having success for the most part. He said the based on the success rate with Butrans he would feel confident continuing to prescribe for opioid experienced patients. I reminded him that Butrans had also been studies in opioid na /nve patients.
PPLPMDL0020000001	Cleveland	OH	44113	7/21/2011	talked to Laura,NP,about considering Butrans for any patients she see's that are taking tramadol,every day,for their chronic pain but not controlled and asking her for something else.Laura said she knows dr nickels has some patients on Butrans so she's waiting to see how those patients respond to Butrans.i asked Laura if the Butrans Patient information booklet would be helpful to educate patients? Laura said yes she's seen them in exam rooms but she still would have to take 5 minutes to explain to patients about Butrans and she doesnt have that time.gave Laura initiations presentation invite and told her i would see her monday at lunch to discuss some patient case studies and would love to get her thoughts to see if Butrans would be appropriate or not.
PPLPMDL0020000001	Independence	OH	44131	7/21/2011	Quick call- Dr Trickett said she hasn't seen the patient we talked about yet for Butrans & I reminded her that because it is CIII, she can call it in. She then said she had to run as she was behind & had patients waiting. Spoke with Steve & offered savings cards for Butrans, OxyContin, & Ryoltz. He said they had enough of all but Ryoltz, so gave him one package. Also asked him to give Dr Trickett the "Initiations" invitation & explained the interactive
PPLPMDL0020000001	Cleveland	OH	44106	7/21/2011	worked apm dept-see call notes on dr hayek and henry,fellow in apm
PPLPMDL0020000001	Cleveland	OH	44106	7/21/2011	dr said he hasnt started anyone on Butrans lately but does have some patients in mind.i asked dr to tell me more about those patients he's thinking of that are appropriate for Butrans.dr said patients taking tramadol every day but not controlled and asking him for more pills,he's thinking of Butrans there.dr asked about initiation dosage strengths again for Butrans,i showed dr Butrans visual aid and initiation/titration guide as he wanted something for his reference.i told dr if patients are taking less than 300mg tramadol/daily, and still not controlled,these were the patients he could start on Butrans instead of increasing tramadol dose,dr said okay and we discussed insurance coverage. i recommended Senokot-S
PPLPMDL0020000001	North Royalton	OH	44133	7/21/2011	Spoke with Cheryl & reviewed with her patient information booklets for Butrans. Discussed patient counsel. Also reviewed application, rotation, & disposal of Butrans. Also discussed taping the edges with first aid tape if necessary. She said she thinks she only has one person on it right now but would either use the booklet for reference or give it to the next person. She then got called away to speak with a customer.
PPLPMDL0020000001	Munroe Falls	OH	44262	7/21/2011	I explained the ideal type of Butrans patient to Dr. Kolacowski. She agreed that she had many of those patients and because it is a LA agent would be a better choice for many patients currently taking several SAO&#8217;s each day.
PPLPMDL0020000001	Barberton	OH	44203	7/21/2011	I explained the ideal type of Butrans patient to Dr Minich. She agreed that she had many of those patients and because it is a LA agent would be a better choice for many patients currently taking several SAO&#8217;s each day.
PPLPMDL0020000001	Beachwood	OH	44122	7/22/2011	Spoke with MA Melissa who said that Jim will be out of the office for 8 weeks. She also said Dr Tabbaa could not see me today. I told her about the Butrans "Initiations" program & asked her to give Dr Tabbaa the invitation. She agreed. I also told her about Butrans indication, dosing, delivery system & abuse/addiction potential as she did not know what Butrans was.
PPLPMDL0020000001	Parma	OH	44134	7/22/2011	Spoke with Mercedes (pharmacist) & reviewed Butrans appropriate patient type, indication, dosing, & savings program through e-voucher or savings cards. She said she would keep an eye out for any prescriptions & would order it if/when she gets one. Also discussed OxyContin & Ryoltz savings cards. She requested a box of Ryoltz cards.
PPLPMDL0020000001	Lyndhurst	OH	44124	7/22/2011	Spoke with doc and patricia about the butrans patients type and asked how patients are doing on butrans. What has been the feedback from patients that have tried it. DOc said that its has been positive for those that have tried it but she is having a harder time than expected identifying appropriate patients. I gave them an interact invite and explained the case studies identifying those patients that are/are not appropriate. She said she would keep trying. Provided more savings cards and formulary reminder for Butrans and oxycontin.
PPLPMDL0020000001	Independence	OH	44131	7/22/2011	Jill said Dr Pai is out until 8/18 with the exception of being in the office for a few hours on 8/4. I asked her if she gave him the "Initiations" invite that I had left last time & she said she did but that doesn't mean he will log on. Reviewed Butrans appropriate patient type. She agreed he has a lot of patients who fit that profile but does not know why he is not switching any of them. She said to come back when he gets back from vacation to talk to
PPLPMDL0020000001	Lyndhurst	OH	44124	7/22/2011	Spoke with doc and patricia about the butrans patients type and asked how patients are doing on butrans. What has been the feedback from patients that have tried it. DOc said that its has been positive for those that have tried it but she is having a harder time than expected identifying appropriate patients. I gave them an interact invite and explained the case studies identifying those patients that are/are not appropriate. She said she would keep trying. Provided more savings cards and formulary reminder for Butrans and oxycontin.
PPLPMDL0020000001	Twinsburg	OH	44087	7/22/2011	Introduced myself & Purdue's products to Dr Pia. Reviewed with her indication, dosing, delivery system, CIII opioid, abuse/addiction potential, managed care, & savings cards. Dr Pia said she really doesn't do a lot of maintenance for patients on chronic opioids. I asked her if she has any patients who she does maintain & she said yes. I asked her what the differences are in patients who she refers out vs the ones she maintains herself. She said she refers out if/when she notices that they are not being well-controlled on their current medication or if they ask for a higher dose. Reviewed Butrans appropriate patient type & presented initiation/titration guide. She asked how Butrans compares with fentanyl & with Vicodin's abuse potential. I told her we have no comparative data & showed initiation guide pg 6 to help position Butrans for the more moderate pain side & discussed OxyContin q12h for appropriate patients beyond Butrans. Also told her Butrans is a CIII opioid like Vicodin & that she should be just as cautious when prescribing Butrans as she is with other opioids. She said Butrans sounded interesting & that she was glad to know about it even if she does not do a lot of pain management. She said she refers to Dr Moufawad. Dr Pia requested savings cards for Butrans, so I gave her one package.
PPLPMDL0020000001	Twinsburg	OH	44087	7/22/2011	Introduced myself & Purdue's products to Dr Brese. Discussed Butrans indication, dosing, delivery system, CIII, abuse/addiction potential, appropriate patient type, managed care, & savings cards. Also discussed importance of appropriate patient selection. She said as a family practice physician, she does not prescribe a lot of chronic opioids & added that her husband is a pain management specialist in Stow. She said she was familiar with buprenorphine as a molecule & recognizes it from drugs used to treat addiction. Told her Butrans has no indication for the treatment of addiction. I asked her when she would refer a patient to pain management vs maintaining them herself & she said it depends on the patient. She said that with the new House Bill, it is mandatory to run OARRS every 4 months for patients on opioids for longer than one month. She said this can become time-consuming & therefore she may be doing even less maintenance. She said Butrans did sound like something that she may utilize if she had a patient she was choosing to maintain herself. Also discussed OxyContin q12h as an option for appropriate patients beyond Butrans.
PPLPMDL0020000001	Twinsburg	OH	44087	7/22/2011	Dr Hillard asked for a Butrans reminder as he forgot most of the details. Reviewed indication, dosing, delivery system, appropriate patient type, & CIII/abuse & addiction potential. He said that House Bill 93 has made him even more cautious in prescribing pain medications that are CII or CIII. I asked him what about patients who are in legitimate pain. He said it is difficult & that he sympathizes with those patients, but he is not willing to treat them himself. He said he refers out to Dr Moufawad. Dr Hillard added that because he does not have "proper" pain management training, he feels it is best for every patient who needs chronic opioid therapy to see a specialist. He also added that the new law would require him to run an OARRS report more frequently. I asked him if he thought OARRS was a good tool to utilize to protect him & he agreed that it is, however he said it is just one more step that takes time that he can not afford to spend doing that. He also added that by law, it has to be the physician who runs the OARRS, not a medical assistant or nurse due to HIPAA. He said it could cost a medical license. Discussed appropriate patient type for Butrans further & went over initiation guide. He said he likes to know this information & that he would be willing to recommend it to a patient when he refers them to Dr Moufawad.
PPLPMDL0020000001					Discussed OxyContin for appropriate patients on the more severe side of pain.

	Parma	OH	44129	7/22/2011	Spoke with Janet (pharmacist) & reviewed Butrans indication, dosing, delivery system, & appropriate patient type. She said she thinks Butrans would be a good option for some of the many patients she sees daily who are getting too much acetaminophen with their current medications. She said she is always concerned with patients damaging their livers by taking too much acetaminophen. She said most people aren't even aware that they are taking more than they should. I asked what she does when she notices that happening & she said in some cases she will call the doctor to alert them to this. She said some physicians do not seem to care. Discussed Butrans as a CIII opioid & therefore carries abuse/addiction liability. Also discussed ability to print savings cards online. Offered OxyContin & Ryolt savings cards but she did not need any. Also discussed appropriate patient selection & using OARRS to help protect the pharmacy & physician.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/22/2011	I asked Dr. Dinsmore how often patients are calling in complaining about their current SA therapy? How often are they asking for more of it? He said patients are calling in often complaining of both. I asked if he would feel comfortable initiating therapy to those patients and he agreed he would.
PPLPMDL0020000001	Akron	OH	44333	7/22/2011	Checked for movement and explained application using the patient education guides.
PPLPMDL0020000001	Akron	OH	44310	7/22/2011	I asked Dr. Blaser if she felt there was truly a place for Butrans in her practice and if she could see herself prescribing Butrans moving forward. She said yes. No new info learned.
PPLPMDL0020000001	Cleveland	OH	44113	7/22/2011	worked pain management dept
PPLPMDL0020000001	Westlake	OH	44145	7/22/2011	Dr said that he tried to write Butrans for 5 or 6 patients, but it has not gone through for some. For those patients who did get it, he has not heard back from so he thinks they are doing ok. We reviewed the managed care for Butrans and that OxyContin is an option that is approved on Medicaid.
	Cleveland	OH	44114	7/22/2011	talked to Horace, Pharmacist, about 5 Butrans core messages. Horace has sent new scripts for Butrans here. I asked Horace what he felt were some important features about Butrans? Horace said transdermal delivery and once weekly dosing. I asked Horace to give Butrans patient information booklets, to any patients that are taking short-acting opioids yet telling him their pain isn't controlled. Horace said ok he could do that. We talked about insurance coverage for Butrans and I recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44112	7/22/2011	Spoke to Melanie about doc's prescribing of butrans. She was not aware of any recent prescriptions. Doc is on vacation. Gave her an interact invite for doc.
PPLPMDL0020000001	Mayfield Heights	OH	44124	7/22/2011	Window call....Reminded doc of the Butrans indication, 7 day delivery and CIII status. Provided initiation guide, formulary grids for butrans and oxycontin, and initiations invite.
PPLPMDL0020000001	Westlake	OH	44145	7/22/2011	Quick follow up, I asked Dr if he has been happy with the patient feedback for Butrans. He said he has not seen the patients back yet, but he thinks they were able to get Butrans approved so far. We reviewed the managed care for Butrans and OxyContin. I asked if he would continue to try patients on Butrans and he agreed.
PPLPMDL0020000001	Berea	OH	44017	7/22/2011	I asked Dr if he is happy with the results for Butrans and he said he is. I asked what the patient feedback has been and he said that they are doing fine. Reminder that OxyContin is still a long acting option as well.
PPLPMDL0020000001	Cleveland	OH	44109	7/22/2011	worked family medicine dept-left Dr. Forde, Dr. Krofina and Dr. Liu-Butrans fpi, initiation guide, patient information booklet, formulary grid and my business card with initiations invite. worked pm&r dept-talked to Vanessa O'Malley, dept secretary to dr harris and other physicians and she said to call Jodi Smneda, Clinic Coord, next week as Dr. Clark hasnt allowed any Rep appt's in past week, but she said I can leave info for doctors and she'll be sure they get it in their boxes and said to call Jodi and set-up appt with Dr. Clark to discuss Butrans and importance of me meeting individually with each attending. Vanessa also recommended I call Randa Karim, book in-hospital lunches/in-services for residents on Butrans and OxyContin. Left Dr. Harris, Dr. Huang, Dr. Jaffer, Dr. Greenwood and Dr. Malkamaki Butrans fpi's, initiation guides, patient information booklets and formulary grids for Butrans with my business card. worked internal medicine dept-left Dr. Spinelli, Dr. Lindheim, Dr. Ricanati, Dr. Eisen and Dr. Harrington Butrans fpi's, initiation guides, patient information booklets and formulary grids for Butrans. Dr said he has 2 patients taking vicodin every day for their chronic pain but they aren't controlled and are asking him for something different so dr thought butrans would be a good idea. dr couldn't remember initiation dosage strengths, so i showed dr Butrans visual aid, discussed 5mg and 10mcg starting dosage strengths for Butrans. dr asked how to write Butrans, showed him Butrans visual aid back page we discussed insurance coverage and i asked dr to think of patients taking 10-15mg vicodin daily for their chronic pain that aren't controlled and starting them on Butrans instead of refilling vicodin or increasing dosage strength, dr said he will but he wants to see what happens with these 2 patients. i told dr to give these 2 patients the Butrans patient information booklet, discuss application/rotation of Butrans before patients leave office, dr said ok. i recommended Senokot-S
PPLPMDL0020000001	Akron	OH	44333	7/22/2011	I asked Dr. Richter if his prescribing habits had changed and if he felt like there was a place for Butrans in his practice yet. He explained that he still was not treating chronic pain.
PPLPMDL0020000001	Fairlawn	OH	44333	7/22/2011	I checked to see if the pharmacist had seen any movement with Butrans and she mentioned Dr. Shah. I asked about coverage and she said patients were not having issues getting it through.
PPLPMDL0020000001	Highland Heights	OH	44143	7/22/2011	Window call....Showed doc the demao of the Butrans patch and reviewed the proper sites and how to apply to a clean dry site. He said he's got it. No savings cards needed. Provided formulary reminders for butrans and oxycontin.
	Garfield Heights	OH	44125	7/22/2011	Spoke with Denise (nurse) & asked her about the changes she had told me were going to effect the Marymount Pain Management clinic. She said everything should be figured out by September & asked me to check back with her as there have been multiple changes & more things will change. She said they added a physician, Ben Abraham, MD. I showed her Butrans Westlake dinner program invitation & asked her if she would give it to Dr. Samuel. She said she would do so & would also make a copy for the other pain management specialists. Discussed savings cards for Butrans & OxyContin. She verified that they have plenty. She said she does not know why Butrans has not been utilized by their physicians more & said she would schedule something with the doctors for me when things become more stable.
PPLPMDL0020000001	Cleveland	OH	44113	7/22/2011	i talked to dr about her patients taking vicodin 5mg, 1-2 tabs, daily and not controlled and asking dr for something else. i asked dr to start those patients on Butrans, showed dr Butrans visual aid and dr said she will do that. we discussed Butrans formulary coverage and savings cards. i recommended Senokot-S
PPLPMDL0020000001	Akron	OH	44333	7/22/2011	I asked Dr. Z if his prescribing habits had changed and if he felt like there was a place for Butrans in his practice yet. He explained that he still was not treating chronic pain.
PPLPMDL0020000001	Akron	OH	44333	7/22/2011	Dr. Ahmad said that head prescribed Butrans for a few patients and was pleased that he had not heard back from them. I explained steady state takes 72 hours to achieve and told him if he had call backs prior to that to encourage patients to remain on therapy. He asked about titration which i explained using the initiation guide.
PPLPMDL0020000001	Cleveland	OH	44104	7/22/2011	i talked to dr about her patients taking vicodin every day for their chronic pain, and asking her for something else and that she has Butrans as an option instead of refilling vicodin or increasing dose of vicodin. dr said she knows she is just forgergetting about Butrans. dr said to leave her the initiation guide so she can remember who's appropriate and the initiating dosage strengths. we discussed formulary coverage and i asked dr if she can think off 2 patients today or monday that she'll see who are like we discussed that she can try Butrans? dr said yes. i recommended Senokot-S
PPLPMDL0020000001	Akron	OH	44310	7/22/2011	I asked Dr. Schukay if he had been initiating Butrans therapy to patients failing or asking to be titrated on their current therapy like we had previously talked about. He said that he was keeping it in mind for those patients and would continue to do so. I reminded him that Butrans was 7 days.
PPLPMDL0020000001	Independence	OH	44131	7/22/2011	Quick call- Invited Roman to Westlake Butrans program & told him how to register. He said that he would attend & that Lisa, the other PA would attend with him. He said he is glad that he will be able to hear other physicians with experience with Butrans speak about how they utilize it in their practice to see if it is something that he will use as well.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/22/2011	I explained the ideal type of Butrans patient to the Physician. He agreed that he had many of those patients and because it is a LA agent would be a better choice for many patients currently taking several S/AO&#8217;s each
PPLPMDL0020000001	Parma	OH	44129	7/22/2011	Spoke with Terri who said Dr Roheny is not seeing reps today due to being behind. Asked her if she has received any feedback or information from the patient Dr Roheny had prescribed Butrans for but she said she has not.
PPLPMDL0020000001	Garfield Hts	OH	44125	7/22/2011	Reviewed Butrans indication, delivery system with her as she did not remember what Butrans was. She asked me to come back next week as they were all too busy today.
PPLPMDL0020000001					I asked Dr Sadowski how he determines who he will maintain on chronic opioid therapy & who he refers to pain management. He said if anyone needs opioids for longer than one month he refers out because "he is afraid of drug seekers". I asked him if he would treat a patient himself if he knew the patient was appropriate & was legitimately in pain & was an established patient. He said he would still refer out & then walked away. Spoke with Dina who said that Dr Sadowski did not tell me the truth because she knows of many of his patients who he maintains on chronic opioids. She said he is just "in a mood" & said to keep working on him. She promised to continue to try to help me by mentioning Butrans to him when she gets a phone call from a patient who she thinks might be appropriate.
PPLPMDL0020000001	Fairlawn	OH	44333	7/25/2011	I asked the physician their thoughts on Butrans therapy and how he felt about the molecule Buprenorphine. He said he liked the idea of this medication and felt comfortable with the molecule. I asked if there was anything more he felt like he needed to know before prescribing for the first time and he said no and that he would keep it in mind.
PPLPMDL0020000001	Lakewood	OH	44107	7/25/2011	I asked Dr if he has other patients like the one we discussed last time who he tried on Butrans. I asked if he will let appropriate patients know that a 7 day patch is an option instead of hydrocodone around the clock. He agreed. I reviewed the managed care for Butrans and OxyContin.
PPLPMDL0020000001	Sagamore Hills	OH	44067	7/25/2011	Spoke with MA Diana & reviewed Butrans indication, delivery system, & appropriate patient type. I also discussed the Butrans "Initiations" interactive program & asked Diana if she would give Dr Maguire the invitation. She said that Dr Maguire does not accept any form of literature from reps. I asked her if lunces were the only way to access him & she said yes. I asked her if they needed any Butrans or OxyContin savings cards but they had
PPLPMDL0020000001	Beachwood	OH	44122	7/25/2011	I asked Dr Warren what he does with a patient on chronic Vicodin who asks for an increase in dose or says it is wearing off too quickly. He said usually he will increase the dose. He added that usually he prescribes Vicodin for his patients twice per day, so he will step them up to three times per day if they say they need more. He said that after that, he would refer them to pain management. I asked him if this is his usual trigger to send to pain management (Vicodin three times per day). He said yes, unless he switches them to something else. I asked if he thought Butrans may be a potential option for those patients on Vicodin twice per day who are asking for an increase, instead of giving them more hydrocodone. I added that Butrans is a once weekly CIII opioid. He said that could be an option & that he had not thought of that. He said that he does not like to have patients on opioids if necessary. I agreed he should be cautious & discussed importance of appropriate patient selection.
PPLPMDL0020000001	Cleveland	OH	44109	7/25/2011	i talked to dr about Butrans 5 core messages and dr said he likes transdermal delivery, but couldn't remember anything about Butrans and asked me to review the medication information with him. i showed dr Butrans visual aid, discussed appropriate patients and asked if dr had patients taking percoet every day for their chronic pain but not controlled and asking him for something else? dr said yes but usually patients want more pills. dr said he likes once weekly dosing and the fact its a CIII makes it easier for him. we discussed refills of Butrans and BWC and commercial plan patients trying Butrans. dr said he will keep Butrans in mind as he is starting to see more chronic pain patients. <font color=blue><b><b>CHUDAKOB's query on 08/04/2011</b></b></font>Two areas to think about:1) Using the visual aid to discuss disease states rather than number of pills a patient is taking2) Challenge him on patients want more pills. Why does he think they want this? Would he want to take pills around the clock?<font color=green><b>BROOKAM's response on 08/10/2011</b></font>thank you for your thoughts, just a couple comments: I do agree that the visual aid, pain conditions/disease states is an area we are focusing on so thats good the next time i see him. "patients want more pills" isnt a new comment by physicians, that's a common answer amongst doctors.<font color=blue><b><b>CHUDAKOB added notes on 08/12/2011</b></b></font>i know that is a very common answer. The point i was making is, are you challenging that answer or accepting it? Spoke with Anita (MA) & Lynn (nurse) to plea my case for an appointment with Dr Gallagher to follow up on Butrans. I reviewed with them indication, delivery system, appropriate patient type, CIII, & abuse/addiction potential. I let them know that when i initially introduced Butrans to Dr Gallagher, he expressed interest & wanted me to follow up. I told them i did not need a lot of time & that even 5 minutes with him would be of benefit. Lynn asked me to return at 4:30 tomorrow for a 5 minute appointment with Dr Gallagher. Also reviewed with them OxyContin & Ryolt savings cards.
PPLPMDL0020000001	Maple Heights	OH	44137	7/25/2011	Spoke with pharmacist Antunina & discussed appropriate Butrans patient type. Also reviewed indication, delivery system, CIII, & abuse/addiction potential. She said she definitely sees a place for Butrans & believes that switching appropriate patients to Butrans may benefit them more so than increasing their current opioid. Also presented patient information booklet & discussed patient counsel. She said she would keep the booklet as reference. Discussed 7 available OxyContin tablet strengths & she said they really do not dispense a lot of OxyContin. She said most customers they have on it have Medicaid or Medicare, so they did not need savings cards.
PPLPMDL0020000001	Mayfield Heights	OH	44124	7/25/2011	Window call....reminded doc of the Butrans presentation/case studies. I asked him if he recalls and if he found it beneficial. He said 'oh yes' but he said he forgets because he is not used to it. Gave him an initiation guide and formulary grid. I asked him to try try an appropriate patient with commercial coverage.



	Parma	OH	44129	7/25/2011	Spoke with pharmacist, Fred & reviewed Butrans appropriate patient type. He asked if it is being prescribed & I told him Butrans has been well-received by a variety of specialties. He said that makes sense because there are so many patients on chronic pain medications. Discussed CIII & abuse/addiction potential. Also discussed OxyContin 7 tablet strengths. He said they really don't dispense it due to the pharmacy manager not wanting to carry opioid products in stock.
PPLPMDL0020000001	Mayfield Heights	OH	44124	7/25/2011	Window call....gave doc an interact invite and asked her to participate. She said she does not have much time for these things. She did say her patients are liking butrans though.
PPLPMDL0020000001	Cleveland	OH	44109	7/25/2011	talked to dr about his patients taking tramadol,daily,but not controlled and considering Butrans as an option for them instead of refilling tramadol.dr said he doesnt have a lot of chronic pain patients but would consider Butrans if patients had insurance coverage.i showed dr Butrans visual aid,discussed 5 Butrans core messages and told dr to start a couple patients on Butrans,telling patients this is once weekly and showing them Butrans patient information booklet with application/rotation information,dr said ok if he has any patients that are appropriate he will consider Butrans.discussed BWC and commercial insurance patients.
PPLPMDL0020000001	Mayfield Heights	OH	44124	7/25/2011	Spoke to Jesse about the stocking of Butrans. He said that he has the 5 and 10mcg stocked but he has only seen one or two scripts and nothing recently. I explained to him the proper application and the sites for Butrans. I also discussed the savings card available for eligible patients. Provided patient info guides. <font color=blue><b>CHUDAKOB's query on 08/04/2011</b></font>What happened to the discussion on our work session about discussing what is important to the pharmacist? I don't see that in this call note<font color=green><b>SIMERTOC's response on 08/17/2011</b></font>i did that a couple of times. I don't do it always.<font color=blue><b>CHUDAKOB added notes on 08/18/2011</b></font>OK.
PPLPMDL0020000001	Cleveland	OH	44109	7/25/2011	dr said he remembered Butrans was a patch and that was it.i showed dr Butrans visual aid,discussed 5 Butrans core messages and asked dr if he had patients taking vicodin,every day for their chronic pain but not controlled? dr said yes a lot of them.dr asked if Butrans was covered on Medicaid as he has a lot of medicaid patients? I told dr that if he's asking about medicaid coverage then does that mean he has patients in mind to start on Butrans and is ready to prescribe? dr said no he was just wondering because if the coverage isnt there for Butrans he wouldnt prescribe the medication.i told dr he can prescribe Butrans for his BWC and commercial plan patients and asked dr if he saw a benefit in once weekly dosing? dr said he didnt know because there's already a patch,fentanyl and patients dose once every 3 days.dr said to leave information and he'll look it over.
PPLPMDL0020000001	Lyndhurst	OH	44124	7/25/2011	I asked doc if he has treated patients for pain that might not have tolerated hydrocodone. No response. I showed him the butrans demo and explained how Butrans may be an alternative for those patients. He said that I want them to get hooked on butrans instead of vicodin. I told him I did not want that at all. I discussed the CIII status of Butrans similar to vicodin but is just a once weekly dosing. He said he tried it a couple of times but has not heard from those patients. He said he would give it try. I asked him to focus on commercial patients and give them a savings card.
PPLPMDL0020000001	Cleveland	OH	44109	7/25/2011	worked internal med dept-left dr eisen,dr falck-vtter,dr mccreery,dr gelehrter,dr jones,dr lindheim,dr ricanati and dr harrington-Butrans fpi,initiation guide,formulary grid and patient information booklet. worked family medicine-left same Butrans info for dr krofina,dr forde and dr liu
PPLPMDL0020000001	Cleveland	OH	44109	7/25/2011	was able to see a couple attending physicians in Physical Medicine&Rehabilitation through Jodi Smneda,Amputee Clinic coordinator-see call notes on dr fox,dr harris and dr distler
PPLPMDL0020000001	Parma	OH	44129	7/25/2011	Caught Dr Moss at the window & reminded him of our previous discussion on Butrans, the once weekly transdermal system of buprenorphine. He said, "No thanks" & then walked away. Spoke with Pauline & discussed Butrans managed care & savings cards, along with savings eligibility requirements. Pauline said to try back another day to see if Dr Moss would have time for more of a discussion.
PPLPMDL0020000001	Lakewood	OH	44107	7/25/2011	I reviewed the 7 day dosing for Butrans and asked if he had just a few patients in mind to give Butrans a try. He said he will try it and we reviewed the invitation guide. Reminder about the managed care for Butrans and OxyContin as an option that is covered on Medicaid.
PPLPMDL0020000001	Cleveland	OH	44113	7/25/2011	did initiations presentation,discussed patient cases,dr said he tells patients that Burans is their baseline of medication and if they have any incident pain they can still take their vicodin.dr said most patients are responsive to that verbage and he also discusses potential side effects of Butrans so patients are aware of this information ahead of time.dr said majority of his patients need to be started on Butrans 10mcg,will stay on medication for 6 weeks,thats their trial period,if that dose works they'll stay on 10mcg if not they will go to the 20mcg Butrans.dr discusses application/rotation section in Butrans patient information booklet and gives Butrans patient savings cards to commercial plan patients. I recommended Senokot-S
PPLPMDL0020000001	Lakewood	OH	44107	7/25/2011	I reviewed the key Butrans messages and asked Dr if she would try just a few patients on Butrans before going to vicodin around the clock. She said she will try.
PPLPMDL0020000001	Akron	OH	44333	7/25/2011	I asked Dr. Shah about the success patients were having with Butrans and he said he felt patients were having success for the most part. He said the based on the success rate with Butrans he would feel confident continuing to prescribe for opioid experienced patients. I reminded him that Butrans had also been studies in opioid na /nve patients.
PPLPMDL0020000001	Uniontown	OH	44685	7/25/2011	I asked Dr. Stetler about the success patients were having with Butrans and he said he felt patients were having success for the most part. He said the based on the success rate with Butrans he would feel confident continuing to prescribe for opioid experienced patients. I reminded him that Butrans had also been studies in opioid na /nve patients.
PPLPMDL0020000001	Cleveland	OH	44115	7/25/2011	I talked to dr about her chronic pain patients,commercially insured, that are taking tramadol daily but not controlled? I asked dr to consider Butrans for those patients that are asking for something else instead of refilling their tramadol or increasing the dose of tramadol.dr said she'll consider but majority of her patients have acute pain so she cant consider Butrans but will keep it in mind for chronic pain patients.dr said she likes transdermal delivery and once weekly dosing option of Butrans,i gave dr Butrans initiation guide,discussed initiation dosage strengths of Butrans and discussed formulary coverage for Butrans.i recommended Senokot-S
PPLPMDL0020000001	Fairlawn	OH	44333	7/25/2011	I asked Dr. Weidman how often patients are calling in complaining about their current SA therapy? How often are they asking for more of it? She said patients are calling in often complaining of both. I asked if she would feel comfortable initiating therapy to those patients and she agreed she would.
PPLPMDL0020000001	Cleveland	OH	44130	7/25/2011	Dr Fedorko said he had a patient in a room right now that might have been a Butrans candidate, but "she has fibromyalgia, so that won't work". I asked him why Butrans would not be an option for a patient with fibromyalgia. He said that fibromyalgia "isn't real" & that for those patients, they are always in pain & really the pain is "in their head". He said they always "want drugs" for this pain that does not exist & then they say none of the drugs work. He showed me the Lidoderm & said that is what he was going to give her, then walked into the room.
PPLPMDL0020000001	Akron	OH	44333	7/25/2011	I asked Dr. Brown if she had been initiating Butrans therapy to patients failing on SAO's or asking to be titrated on their current therapy like we had previously talked about. She said that she was keeping it in mind for those patients and would continue to do so. I reminded her that Butrans was 7 days.
PPLPMDL0020000001	Akron	OH	44333	7/25/2011	Dr. Ross said that head prescribed Butrans for a few patients and was pleased that he had not heard back from them. I explained steady state takes 72 hours to achieve and told him if he had call backs prior to that to encourage patients to remain on therapy. He asked about titration which I explained using the initiation guide.
PPLPMDL0020000001	Mayfield Heights	OH	44124	7/25/2011	I asked doc how often she sees patients in pain that can not tolerate hydrocodone. She said sometimes, its not uncommon. I asked her to consider Butrans as an alternative to vicodin ATC. Explained that one butrans 5mcg can be an alternative to 21 tabs of vicodin every week. She said she has not had an opportunity to try it. I explained the two initiation doses, formulary coverage for butrans and oxycontin.<font color=blue><b>CHUDAKOB's query on 08/04/2011</b></font>I believe this was commented on in previous call note. We should not be discussing number of tablets and how Butrans can compare to those. There are potential implications of superiority. If you have questions on this, let me know<font color=green><b>SIMERTOC's response on 08/17/2011</b></font>I know. I did this several times before you sent the first query. I have since stopped.<font color=blue><b>CHUDAKOB added notes on 08/18/2011</b></font>OK. Thanks!
PPLPMDL0020000001	Parma	OH	44129	7/25/2011	Jen said that she just learned that Butrans comes up in urine drug screens. I told her this was correct & to check with her lab for specifics. I also asked how she discovered this. She said that within the last few days, "a handful" of patients have tested positive for buprenorphine. I asked them if these patients were on Butrans from another doctor. She said that none of the patient had any history on their OARRS report for Butrans. She said she is waiting to find out from her lab if there is a way to determine if the buprenorphine is from Butrans or from Suboxone. Jen said if a drug does not show up on OARRS but the patient tests positive for it, it means they are getting it "off the street". I asked if they had questioned any of the patients. She said one admitted to taking a friend's Suboxone & the other admitted to applying a Butrans, but the others have not confessed to anything. I asked if any of the patients complained of withdrawal symptoms. She said no, but that they wouldn't probably tell her that anyway because they would not want her to know they were taking drugs that we not prescribed to them. Dawn said she is surprised that Butrans "hit the streets" so early. I reminded her that Butrans is an opioid & is abusable, so if someone had inappropriate intentions with it, they could abuse it. Jen said that Dr Nickles does have a few patients on Butrans but he has not given the "green light" to NP's to prescribe yet.
PPLPMDL0020000001	Lakewood	OH	44107	7/25/2011	Dr said he just forgets about Butrans since it has to be the right patient who is willing to use a patch and someone who's insurance covers it. I asked if he sees any merit to Butrans and he said the 7 day dose, but he will have to gain experience to see how well it works. I asked if there is anything I can do to remind him and he said he will leave the initiation guide on the counter. I reviewed managed care for Butrans and OxyContin. He said he does still have patients on OxyContin.
PPLPMDL0020000001	Mayfield Hts	OH	44124	7/25/2011	Reviewed the butrans positioning and the other selling messages. Doc asked about the use of supplemental agent and BWC coverage. Confirmed that supplementals can be used. I showed the FPI and showed the graph of steady state reached after 72 hours. He also asked about BWC coverage. I confirmed BWC as well as commercial coverage. He said he would try to remember.
PPLPMDL0020000001	Parma	OH	44134	7/25/2011	I asked Dr Mandat if he would describe for me the difference between a patient who he would refer to pain management vs a patient who he would treat himself in the office. He said he does no pain management there at all. I asked him if that means that anyone who has any type of pain whatsoever gets referred. He said he only treats patients in hospice for pain. He said he has 120 hospice patients who he deals with & that is where he prescribes pain medications. He then added that he "might have one or two" who he does have in the office & then walked away.
PPLPMDL0020000001	Cleveland	OH	44102	7/25/2011	I talked to Vicky,Pharmacy manager,about Butrans stocking and she confirmed that they dont have any strengths in stock and until they see more Butrans scripts they arent ordering Butrans.we discussed importance of stocking and I showed Vicky Butrans 5 core selling messages and asked her what were some important features of Butrans that she liked? Vicky said transdermal delivery and once weekly dosing option for patients are 2 benefits she likes but doctors have to find a place for Butrans and prescribe,then she'll stock Butrans.i gave Vicky Butrans initiation guide and asked her to speak with physicians,if she hears from patients that their short-acting opioids arent controlling their pain,about Butrans.Vicky said she will do that.i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	7/25/2011	discussed initiations presentation,4 patient case studies with Laura,NP.Laura said she answered the questions based on the clinical information presented but she's still not started anyone on Butrans,she does talk to dr nickels about his patients that he started on Butrans and wants to wait and see what results they get from Butrans.Laura said she just doesnt have the time to explain Butrans to patients.I showed Laura Butrans patient information booklet and showed application/rotation section of Butrans noting this was the most important information to tell patients,knowing she has limited time,then give patient Butrans patient savings card for commercial patients.Laura said she'll think about it.I recommended Senokot-S
PPLPMDL0020000001	Mayfield Heights	OH	44124	7/25/2011	Quick call....asked doc if he has identified any patients that might be appropriate for butrans. He said he forgets about it. I gave him an interact invite and asked him to participate as I think it would help him identify the right patient. He said he would as he is interested in learning more.
PPLPMDL0020000001	Waterford	OH	45786	7/26/2011	W - Miral hasn't written, but says that she is favorable to writing Butrans for patients when a short acting medication is no longer controlling pain for patients. She said that Butrans is also favorable for patients who do not want to take an oral medication every 4-6 hours. Use of Butrans may provide patients with the ability to have pain control for an entire week without worrying or forgetting about taking a pill. She said that formulary coverage and her lack of knowledge about the ability for an NP to prescribe Butrans is her only issues holding her back. I - Butrans follow up and review of indication and 7 days of buprenorphine in 1 application with a CIII scheduling. Use of initiation guide to discuss appropriate patient selection based on patients current therapy. Formulary coverage review and savings card program eligibility.<font color=blue><b>BROWNMA1 added notes on 08/08/2011</b></font>Mark - it sounds like the NRP's in this practice had favorable things to say about Butrans. Is there a way that they can write Butrans, by recommending to the physician in the practice and he agrees it is an appropriate therapy based on the FPI? See if you can help bridge this gap on your next call. Thanks, Mark
PPLPMDL0020000001	Shaker Heights	OH	44122	7/26/2011	Spoke with Michelle (MA) & Stephanie & delivered Butrans overview. They said Dr Agarwal was too far behind to see reps today & suggested I come back Thursday. I told them about Butrans "Initiations" program & asked them to give Dr Agarwal an invitation. They agreed to do this.

PLPMDL0020000001	Cleveland	OH	44104	7/26/2011	talked to dr about her patients taking percocet,5-10mg every day but telling her that dose isnt controlling their pain and asking for something else,i asked dr to start a couple of these patients on Butrans instead of refilling their percocet.dr said she will do that just hasnt had any luck with patients wanting to try a patch.i talked to dr about patients starting on Butrans but still taking short-acting opioids like percocet if need be,i showed dr butrans fpi,maintenance of therapy section,and showed dr butrans visual aid with appropriate patients info.dr said ok she'll try talking to some more patients and see what happens.i recommended Senokot-S
PLPMDL0020000001	Cleveland	OH	44103	7/26/2011	discussed 4 patient case studies with dr,dr said the couple patients she started on Butrans were taking percocet every day and not controlled so she thought of Butrans.i asked dr if she had some patients taking vicodin,daily,that werent controlled and asking her for something different? dr said yes she does have a lot of patients taking vicodin,not everyone is willing to take a patch but she is talking to patients about Butrans and giving them a Butrans patient information booklet to look at and follow-up with her on Butrans if they want to try it.we discussed formulary coverage for Butrans.i talked to dr about OxyContin being an option,showed appropriate patients flashcard,showed dr OxyContin conversion guide for patients taking vicodin or percocet that she feels are appropriate to convert to OxyContin.we discussed medicaid,medicare and commercial insurance coverage for OxyContin.i recommended Senokot-S
PLPMDL0020000001	Cleveland	OH	44106	7/26/2011	Steve,Pharmacy manager,is on vacation and Matthew,Pharmacist,was at lunch,so i talked to Deana,Pharmacy tech,who confirmed they dont have any Butrans in stock and she hasnt seen any Butrans scripts.Deana said Steve will be back monday from vacation and i should talk to him about ordering Butrans again as she doesnt think any patients have filled scripts here.i told Deana i was under the impression Steve had ordered in the past and they had scripts filled here but i will follow-up next week with him.i showed Deana Butrans initiation guide,discussed appropriate patients for Butrans and gave her the initiation guide,fpi and patient information booklet to leave
PLPMDL0020000001	Cleveland	OH	44109	7/26/2011	talked to Jaime,Pharmacy Tech and Nathan,Pharmacist,both stated that they have seen scripts for Butrans but didnt have time to pull up names of physicians prescribing.i showed both Jaime and Nathan the Butrans initiation guide,discussed appropriate patients and initiating dosage strengths for Butrans, we talked about Butrans formulary coverage and i asked Jaime and Nathan to focus patients on application/rotation section of Butrans,in Butrans patient information booklet,both agreed to do that.
PLPMDL0020000001	Waterford	OH	45786	7/26/2011	W - Vickie hasn't written but likes the idea of Butrans and 7 days of coverage. She said that she would prescribe for patients if she has the ability based on her NP license and if patients have favorable coverage. I - Butrans follow up and review of indication and 7 days of buprenorphine in 1 application with a CII scheduling. Use of initiation guide to discuss appropriate patient selection based on patients current therapy. Formulary coverage review and savings card program eligibility.
PLPMDL0020000001	Cleveland	OH	44130	7/26/2011	Spoke with John (pharmacist) who said that they still have the Butrans auto shipment in stock as none has been dispensed to his knowledge. Discussed Butrans savings program through e-voucher & savings cards. Also let him know he could go online to Butrans.com to print savings cards as needed. Reviewed appropriate patient type. John also said they are out of OxyContin savings cards, so I gave him a new package & reviewed eligibility.
PLPMDL0020000001	Cleveland	OH	44195	7/26/2011	talked to dr about his patients with chronic pain taking tramadol,daily,but not controlled and asking him for something else and to consider Butrans right there instead of refilling tramadol.dr said a lot of patients like their pills so he's not sure about a patch but he'll consider talking to a few patients and see what they say.dr asked about insurance coverage,told dr to focus on commercial plan patients that can use Butrans patient savings cards or bwc patients.i talked to dr about patients that he feels are appropriate for OxyContin,showed appropriate patients flashcard and discussed formulary coverage for OxyContin.i recommended Senokot-S
PLPMDL0020000001	Cleveland	OH	44103	7/26/2011	discussed 4 patient case studies in initiations presentation,dr said he's not started anyone on Butrans due to medicaid requiring a prior authorization.dr said he only has a few patients with commercial insurance so its hard to remember that Butrans is covered on commercial plans.i asked dr if he could keep Butrans initiation guide,patient information booklet and patient savings card information by him in case he has anyone he feels is appropriate? dr said he would do that.we discussed OxyContin being an option,i showed appropriate patients flashcard and discussed OxyContin insurance coverage.i recommended Senokot-S
PLPMDL0020000001	Cleveland	OH	44195	7/26/2011	i talked to jessica,Dr vrooman's medical secretary,about Butrans 5 core messages,appropriate patients was focus of discussion and i asked Jessica if patients call her for refills? jessica said yes she gets 15-30 calls a day from patients wanting refills or something new i asked if Jessica could recommend Butrans to dr vrooman,if patients are taking tramadol,vicodin or percocet and not controlled based on the information in Butrans initiation guide? jessica said she will do that and took Butrans fpi,initiation guide and butrans patient information booklets we discussed butrans formulary coverage and patient savings cards.
PLPMDL0020000001	Waterford	OH	45786	7/26/2011	W - Waters discussed patients that he would consider appropriate for Butrans. He shared that patients suffering from pain due to OA may be a great patient type for Butrans when an NSAID or even tramadol isn't taking care of the pain. I - Butrans follow up and review of indication and 7 days of buprenorphine in 1 application with a CII scheduling. Use of initiation guide to discuss appropriate patient selection based on patients current therapy. Formulary coverage review and savings card program eligibility. Review of patient information booklet with Waters and staff to discuss appropriate application sites as well as disposable methods. OxyContin as an option for pain control when patients meet the indication. Review of OxyContin formulary coverage - medicaid and medicare plans with coverage -<font color=blue><b>BROWNMA1 added notes on 08/08/2011</b></font>-Mark - it sounds like you had a good discussion here, helping the doc identify a specific patient type that can benefit from Butrans. If you used the inclusion data within the core sales aid, you may also want to include this in your call notes. This will help you plan your next call. Thank you, Mark
PLPMDL0020000001	Cleveland	OH	44109	7/26/2011	I talked to dr about the couple of patients he started on Butrans and dr said they are both doing well and haven't called him back with any issues so thats good.dr said he wanted to be sure pharmacies had Butrans in stock as 1 patient had an issue getting Butrans at the pharmacy.i told dr i am working with pharmacies on stocking but some CVS and Rite Aid pharmacies dont want to order Butrans until they see their 1st script so i told dr if he wanted to speak with some pharmacies,when starting patients on Butrans,to confirm stocking thats up to him,he said ok.i showed dr Butrans visual aid,discussed appropriate patients and i asked dr if he had a couple patients on tramadol,with chronic pain and dosing every day but not controlled and asking him for something else? dr said yes he has a lot of those patients.i asked dr to start those patients on Butrans instead of refilling tramadol or converting them to another short-acting opioid,dr agreed,focused on BWC and commercial plan patients.we discussed OxyContin being an appropriate option,showed flashcard with this information,discussed 7 tablet strengths for titration and discussed medicaid,medicare and commercial insurance coverage for OxyContin.i recommended Senokot-S
PLPMDL0020000001	Parma	OH	44129	7/26/2011	Dr Gallagher apologized & said that he does not remember much about Butrans. Reviewed indication, dosing, delivery system, CII & abuse/addiction potential. Also discussed appropriate patient type, including patients on chronic Vicodin or tramadol, especially those calling in too soon for refills or saying their medication is wearing off too soon. I asked if he felt it made sense for those patients to switch them to a different molecule or different delivery system instead of increasing the amount of current medication they are taking. He said this does make sense & he is glad now to have a different option for those patients. He said he does have a lot of patients who fit the profile. He asked me about adverse event rates, specifically for constipation. I showed him rates. He said he thought they seemed low. Discussed starting dose for different patient types & titration ability every 3 days. Also discussed supplemental analgesia & let him know patients could take opioid or non-opioid medication for breakthrough & as Butrans reaches steady state. Reviewed patient information guide & discussed application, rotation, & disposal. Also reviewed managed care, asking him to think of commercially insured patients who fit the description of what we have talked about. He agreed to try Butrans & said he is looking forward to trying it & is happy to have a different option. Began "Initiations" presentation but did not complete it.
PLPMDL0020000001	Independence	OH	44131	7/26/2011	Dr Sundaram said he just doesn't think he has patients to try on Butrans. I asked him what the differences are in patients who he treats vs those he refers to pain management. He said he does not refer. Reviewed with him the appropriate patient type & discussed patients taking Vicodin or tramadol chronically. I asked what he goes to after NSAID's or COX-2's fail for a chronic pain patient. He said tramadol or Vicodin. I asked what he does if that doesn't work. He said Percocet. He said he guesses that is where he could try Butrans. He asked if it "gives the same high". Told him that Butrans is a CII opioid that has abuse/addiction potential. Showed him pK profile page on main visual aid. He said he likes that plasma levels seem to remain more constant than with a short-acting around-the-clock opioid. He asked about cost. I asked if he meant for insured patients. He said yes & also cash price. Discussed managed care coverage & reviewed savings cards for eligible patients. He said he thought a \$15-\$20 co-pay was reasonable. Discussed titration ability every 3 days & possible use of supplemental analgesia for breakthrough & initial 3 days. He said he thinks he knows better now the types of patients he should be looking for. He said he thinks the ideal place would be for naive patients, but many times those are acute pain patients. Also discussed OxyContin q12h for appropriate patients beyond Butrans.<font color=blue><b>CHUDAKOB's query on 08/04/2011</b></font>-Ashleigh, when the physicians starts talking about constant blood levels with Butrans and comparing it to short-acting opioids, it is our responsibility to correct that by telling them that this graph is only plasma levels in the blood and we do not have data to show that Butrans is any more efficacious or safe than any other opioid. If you do not correct this, then the implication is you agree with it. Does this make sense?<font color=green><b>APSEGAS's response on 08/09/2011</b></font>-Yes, this makes sense. I plan to see him today so I will rectify this right away.<font color=blue><b>CHUDAKOB added notes on 08/12/2011</b></font>-Thank you! Let me know how you corrected this!
PLPMDL0020000001	Cleveland	OH	44109	7/26/2011	i talked to Tenia(pronounced TINA),Pharmacy tech,confirmed no Butrans scripts here but pharmacy staff is aware of Butrans and what it is,i showed Butrans initiation guide,discussed appropriate patients and initiating dosage strengths,Tenia said they get a lot of scripts from dr carson and dr celeste and dr nickels patients,but no Butrans yet.we discussed importance of stocking Butrans but tenia said Ray,Pharmacy manager wont order butrans until they see 1st script.we talked about insurance coverage,savings cards and i showed Tenia the Butrans pharmacy fact sheet.we discussed OxyContin stocking and Tenia said only a few strengths are stocked here of reformulated OxyContin.Tenia said majority of patients are BWC or commercial and they dont use OxyContin savings cards and they dont have any cash paying patients for OxyContin.i recommended Senokot-S
PLPMDL0020000001	Cuyahoga Falls	OH	44223	7/26/2011	I asked the Dr. Pitt how often patients are calling in complaining about their current SA therapy? How often are they asking for more of it? He said patients are calling in often complaining of both. I asked if he would feel comfortable initiating therapy to those patients and he agreed he would/
PLPMDL0020000001	Cuyahoga Falls	OH	44223	7/26/2011	Discussed the patient education guide. Went over how and where to apply the patch.
PLPMDL0020000001	Westlake	OH	44145	7/26/2011	I asked Dr what types of patients does he think would benefit from Butrans. He said it is a different option for patients when other medications don't work well. We reviewed that opioid naive patients can start with 5mgc Butrans. I asked Dr to come and learn moer about Butrans at our upcoming dinner discussion.
PLPMDL0020000001	Cleveland	OH	44130	7/26/2011	Quick call- I asked Dr Diab if he knew he could write refills for Butrans. He responded, "OK, thank you" & then walked into a patient room. Left sealed "Special Report" article on his desk for his review.
PLPMDL0020000001	Cuyahoga Falls	OH	44221	7/26/2011	I asked Dr. DiLauro about the success patients were having with Butrans and she said she felt patients were having success for the most part. She said that based on the success rate with Butrans she would feel confident continuing to prescribe for opioid experienced patients. I reminded her that Butrans had also been studies in opioid na rve patients.
PLPMDL0020000001	Cuyahoga Falls	OH	44221	7/26/2011	I asked Dr. DiLauro her thoughts on Butrans therapy and how she felt about the molecule Buprenorphine. She said she liked the idea of this medication and felt comfortable with the molecule. I asked if there was anything more she felt like she needed to know before prescribing for the first time and she said no and that she would keep it in mind.
PLPMDL0020000001	Cleveland	OH	44121	7/26/2011	Window call....provided doc an interacte invitation and asked him to participate as it may help identify the right patients for butrans. Gave him a formulary grid reminder for butrans and oxycontin.
PLPMDL0020000001	Cleveland Heights	OH	44118	7/26/2011	I explained the positioning of butrans to doc and asked him to consider butrans as an alternative to prescribing vicodin 3 or mroe times per day. I explained how butrans is a CII similar to hydrocodone and that it can be called in/refilled. He asked about medicaid coverage. I explained that it is not covered and focused him on the commercial plans. He asked about the starting dose if patients are on 5 or 10mg of hydrocodone. I explained that 5mgc/hr would be the starting dose and showed him the demo of a 5mgc patch.He said he would try it.
PLPMDL0020000001	Cleveland Hts	OH	44118	7/26/2011	Quick call....reminded doc that he previously said that butrans might be good for patients that can not tolerate hydrocodone. I asked him how often he see patients that can not tolerate vicodin. He said all the time. I asked him to try those patients on Butrans instead as long as they meet the indication.
PLPMDL0020000001	Berea	OH	44017	7/26/2011	I reviewed the Butrans savings cards and asked him to try Butrans instead of increasing hydrocodone or percocet. He said OK, left invite for our upcoming dinner discussion.
PLPMDL0020000001	Westlake	OH	44145	7/26/2011	I asked Dr if he is having success so far with his Butrans patients. He said he has not heard much feedback but it's just another option for him to try. We reviewed the managed care for Butrans and that OxyContin is covered on Medicaid. I invited Dr to upcoming dinner discussion.
PLPMDL0020000001	Berea	OH	44017	7/26/2011	Dr said that he forgot about Butrans, but he will keep it in mind as an option. I asked if he had any patients taking vicodin around the clock who he feels may benefit from 7 day dosing. He said he will keep Butrans in mind for those types of patients. I reviewed the savings cards for Butrans and OxyContin. Dr will not be able to attend our dinner program.
PLPMDL0020000001	Westlake	OH	44145	7/26/2011	I reviewed the key messages for Butrans- 7 day dose and CII. I asked Dr to come talk to other Drs at our upcoming dinner discussion about Butrans and he will try. He said he lives a few minutes away from Crocker Park and will try to attend this location. Reminder about OxyContin is still an option when Butrans may not provide adequate analgesia.

PPLPMDL0020000001	Mayfield Hts	OH	44094	7/26/2011	Window call....I explained to doc that if he has any patients taking a short acting opioid like vicodin 3 times per day once weekly butrans provides an alternative to tablets. He said he does not use patches. I explained that Butrans is the first long acting CII and like vicodin can be called in or refilled. No comment from doc. Left him and engage invite.
PPLPMDL0020000001	Westlake	OH	44145	7/26/2011	Spoke with Amy, Katy was not in today. I reviewed Butrans key messages and asked if she would invite Stephanie and the other NPs to our upcoming dinner discussion. She will let her know about it.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/26/2011	Quick call through window. I asked Dr. Raniol if her prescribing habits had changed and if she felt like there was a place for Butrans in her practice yet. She explained that she still was not treating chronic pain.
PPLPMDL0020000001	Highland Heights	OH	44143	7/26/2011	Quick call. Gave doc patient info guides and explained the importance of proper application. Doc said patients probably would not read it but to leave them with marianne. Reminded doc of the formulary coverage for Butrans and oxycotin.
PPLPMDL0020000001	South Euclid	OH	44121	7/26/2011	Window call.....provided doc with the butrans initiation guide and a formulary reminder. nothing earned.
PPLPMDL0020000001	Cleveland Heights	OH	44118	7/26/2011	Quick call.....spoke with Mukul who confirmed that they have butrans. He has not seen any scripts. He asked if it is being covered by medicaid. Told him not on medicaid but well covered on commercial plans. Explained the savings cards program.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	7/26/2011	I asked the Dr. Azem if she had been initiating Butrans therapy to patients failing or asking to be titrated on their current therapy like we had previously talked about. She said that she was keeping it in mind for those patients and would continue to do so. I reminded her that Butrans was 7 days.
PPLPMDL0020000001	Cleveland	OH	44195	7/26/2011	worked rheumatology dept-left dr calabrese,betsy kirschner,np,dr chatterjee,dr deal,dr long and patty paczos,pa-butrans fpi's,initiation guides,patient information booklets,dinner invitations for 8/10/11 and formulary grid for Butrans; worked aneseth/pain management-left dr stanton-hicks,dr cheng,dr vrooman,dr kataly,dr samuel and dr ningegowda-Butrans fpi,initiation guide,formulary grid,patient information booklet for all doctors.
PPLPMDL0020000001	Akron	OH	44310	7/26/2011	I explained the ideal type of Butrans patient to the Physician. He agreed that he had many of those patients and because it is a LA agent would be a better choice for many patients currently taking several SAO&#8217;s each
PPLPMDL0020000001	Parma	OH	44134	7/26/2011	Dr Hernandez asked me if I knew of any type of street value of Butrans. I told him I did not know any specifics but that because Butrans is an opioid & is abusable, someone with inappropriate intentions could abuse it or use in inappropriately. He said he has not heard of anything either & that he really doesn't know how someone could abuse it because the doses are "so low". I again told him that it is abusable & carries addiction liability. I asked him if he has noticed Butrans showing up on OARRS reports. He said he has not noticed one way or the other but would try to pay attention to that when he runs a report next. I asked him if there were any conditions causing moderate to severe chronic pain that he would not treat with Butrans. He said none that he can think of. Discussed OxyContin 7 available tablet strengths.
PPLPMDL0020000001	Parma	OH	44129	7/26/2011	Quick call- Dr Ortega said he is still trying patients on Butrans but has no new information for me. I asked him if my last visit helped clarify the type(s) of patients he may want to look for & he said it did help. He said he would let me know when he has more feedback. Let him know that I brought patient information guides for his office & that I went through them with Cindy, so she will hand them out so that he does not have to worry about it. Spoke with Cindy & showed her patient guides & discussed how she can use them for patient questions. She said that one of the patients who was taking Butrans was diabetic & had pre-admission testing done before a surgery. The patient had to postpone the surgery because his blood sugar was too high. Cindy said that prior to this, his diabetes had been well-controlled & she asked if Butrans could cause the elevated blood sugar. Showed her FPI section 6 & did not see this listed in the adverse events. I asked her if the patient was definitely taking Butrans during the testing & she said she does not know for sure but thinks so. She also said he is on multiple other medications, so it could have been something else. I let her know I would report it just in case.
PPLPMDL0020000001	Parma	OH	44129	7/26/2011	Dr Roberny said he still has not gotten feedback from his patient for whom he prescribed Butrans & he is not sure that she even filled the script. Reviewed with him the appropriate Butrans patient type (around-the-clock chronic Vicodin or tramadol) & asked him if that sounds like any of his patients. He said a lot of them. I also added that patients calling too soon for Vicodin or tramadol refills or who say their medication is wearing off too soon may be good candidates & asked him if that describes anything familiar to him. He said he gets them frequently. Reminded him of focusing on commercial insurance. He said that eliminates 3/4 of his patients. I asked if he thought he might have 1 or 2 working patients who fit the profile we spoke about & he said "maybe". I told him that there was something holding him back from prescribing Butrans & that I want to uncover what that is & asked if he has any questions. He asked if patients can take oral pain medications with Butrans. Told him patients can take supplemental analgesia in the form of opioid or non-opioid medication. Also added that Butrans is the only once-weekly CII medication. He asked what that meant. Told him prescriptions can be called in & refills can be written. Also added that Butrans is an opioid & he should be just as cautious in prescribing it as he is with other opioids. Also reviewed OxyContin q12h as a CII. He said he will see if he has any patients for Butrans.
PPLPMDL0020000001	Euclid	OH	44119	7/27/2011	Showed doc the butrans demo and how one butrans can be an alternative to 21 tabs of vicodin. Explained the CII status similar to vicodin and can be called in/refilled. He asked about medicaid. Showed him formulary grid and and the commercial plans. He complained about the 3rd tier status. I explained the savings card program to help with out of pocket costs. He suggested that the patch come in fashion colors or more skin tone colors. I told him I would pass that along. I asked him to try butrans for appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44114	7/27/2011	talked to dr about the couple of patients she started recently on Butrans,all of them were taking vicodin or percocet every day for their chronic pain but not controlled and asking dr for something else,dr said she talked to patients about Butrans and they were willing to try the medication we discussed Butrans patient information booklet,application/rotation section and log book in booklet and dr said she does discuss this info with patients.i
PPLPMDL0020000001	Cleveland	OH	44106	7/27/2011	showed dr Butrans visual aid,appropriate patients section,asked her to continue starting patients on Butrans,dr agreed and we discussed bwc and commercial plan patients trying Butrans. dr said he started a couple patients on Butrans,i told dr that was great seeing that i thought he only started 1 patient on butrans and i asked dr to tell me more about why he chose butrans for those patients?dr asked if i really wanted to know that information,did i really care? i told dr yes i did,as sometimes physicians are the one's who tell patients this is their only choice(starting on Butrans) and others tell me that patients are the one's asking their physicians for something else. dr said ok,it was the patients who were asking for something else,i patient was taking vicodin and methadone and the patient stopped taking methadone and really didnt want to continue taking vicodin,so he suggested this patient try Butrans and take vicodin for break through pain as needed.i showed dr Butrans visual aid,discussed appropriate patients for butrans and asked dr to consider Butrans for those patients taking tramadol or vicodin,daily,but not controlled,dr said ok.
PPLPMDL0020000001	Cleveland	OH	44114	7/27/2011	talked to dr about his patients taking vicodin,10mg daily,for their chronic pain and not controlled,asking him for something else,i asked dr to start them on Butrans instead of refilling vicodin,dr said he will consider that if patients are appropriate,dr said for most of the patients he's started on Butrans,it was because they were maxed on orals and wanting more pills and dr wasn't comfortable refilling their short-acting opioids,so Butrans was their only option.i showed dr butrans visual aid,appropriate patients section and initiation of Butrans information and asked dr to focus on more BWC patients,per our discussion,to start on Butrans,dr said he will do that.i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	7/27/2011	worked internal medicine:left dr.lindheim,dr eisen,dr ricanati,dr harrington,dr falck-ytter and dr mccreary-OxyContin,fpi,formulary grid,conversion guide,appropriate patients and challenging flashcards for OxyContin and my business card. worked family medicine:left same info as above for dr ll,dr forde and dr krofina and for the residents.
PPLPMDL0020000001	Broadview Heights	OH	44147	7/27/2011	Spoke with Angela (MA), who said that Dr Samuel would not be able to see me today. Reminded her of previous Butrans lunch & refreshed her memory on indication, delivery system, & appropriate patient type. I gave her sealed "Special Report" article & "Initiations" invitation & asked her to give them to Dr Samuel. She agreed. She said he will still be at this location on Wednesdays despite changes with the group at the Marymount & SouthPointe locations.
PPLPMDL0020000001	Broadview Heights	OH	44147	7/27/2011	Spoke with Angela (MA), who said that Dr Samuel would not be able to see me today. Reminded her of previous Butrans lunch & refreshed her memory on indication, delivery system, & appropriate patient type. I gave her sealed "Special Report" article & "Initiations" invitation & asked her to give them to Dr Samuel. She agreed. She said he will still be at this location on Wednesdays despite changes with the group at the Marymount & SouthPointe locations.
PPLPMDL0020000001	Warrensville Heights	OH	44122	7/27/2011	Dr Zivic said that OxyContin is straightforward for him but Butrans is "more difficult". I asked him what he meant. He said he is just not familiar enough with it or used to it. I told him we would work on that together today to make him more comfortable. Discussed appropriate patient type (patients taking around-the-clock Vicodin or tramadol who say it is wearing off too quickly or who call too soon for refills.) He said that already has made him think of many specific patients. I asked him of those patients, how many he thought could benefit from a once weekly transdermal system of buprenorphine, a different molecule. He said he thinks all of them could potentially. I asked him how many of them have commercial insurance. He said some of them. I told him those were his potential first Butrans patients. Reviewed savings program, application, rotation, & adverse event rates in main visual aid. Discussed titration ability every 3 days to a maximum 20mcg dose & also CIII, abuse/addiction potential, & the ability to call in prescriptions & refills. He said by the next time I come in he will have tried it on some of these patients. I let him know I would be following up within two weeks to hold him to that. He agreed. Discussed Ryzolt q24h & OTC products. Reviewed Senokot-S dual MOA & recommended it for opioid-induced constipation. Reviewed savings cards for all products with Michelle.
PPLPMDL0020000001	Parma	OH	44129	7/27/2011	Dr Chagin said that he did put one patient on Butrans but has not had any feedback yet. I asked him to tell me about the patient. He said it was a patient who was newer to him who had been on Vicodin around-the-clock for awhile but was no longer being well-controlled on his dose. I asked Dr Chagin if he has other patients who fit this profile as well & he said he does. He said he likes to use new drugs & likes having different options, especially for this type of patient. Discussed Butrans as the only once weekly CII. Reminded him of abuse/addiction potential due to Butrans being an opioid. He asked how Butrans compares to Vicodin as far as abuse potential is concerned. I told him we have no comparative data. He said he plans on trying Butrans on more patients. I asked him to focus on commercially insured patients & reviewed savings program. Also invited him to participate in "Initiations" program, but he said he didn't want to go through it now. Gave him info to log on. Also discussed OxyContin q12h for appropriate patients & 7 available tablet strengths. Discussed Ryzolt q24h, managed care, & 3-2-1 messaging. He requested some literature to keep on hand as a reminder so that he would remember to use it.
PPLPMDL0020000001	Cleveland	OH	44105	7/27/2011	talked to Abdul about Butrans 5 core selling messages,showed abdul butrans visual aid and asked what he thought were a couple features of Butrans that really stood out to him? Abdul said he likes that Butrans is a patch and dosed once a week,but he's not seen any scripts for Butrans yet,abdul said once he gets that 1st script,he'll order Butrans.Abdul said he gets a lot of dr nickels and dr raheja's patients that fill vicodin and tramadol scripts and metro doc's send a lot of patients to him.abdul wanted to be sure im working with all of these mentioned,i told him yes,showed Butrans initiation guide,discussed appropriate patients and told Abdul that as long as he has the 2 initiating dosage strengths of Butrans stocked,it will be easier for patients when they DO come see him with a script instead of turning them away and waiting 24hrs.Abdul agreed that this was better for the patients and said he would think about it,we discussed bwc and commercial insurance coverage for Butrans and we discussed OxyContin stocking and savings cards.i recommended Senokot-S
PPLPMDL0020000001	Bedford	OH	44146	7/27/2011	Reviewed savings cards with technician as pharmacist was not available. Also discussed Butrans appropriate patient type & asked her to leave Butrans information for the pharmacist- she agreed & asked me to return next week to speak with the pharmacist.
PPLPMDL0020000001	Cleveland	OH	44104	7/27/2011	I talked to dr about his patients on Butrans and how they are doing in follow-up,dr said he's seeing improvement in patients pain,more controlled now that they are taking butrans.dr said the couple patients he started are in hospice but he's got some patients in mind that see him in his office.i showed dr Butrans visual aid,discussed appropriate patients section,focus on commercial insurance but dr has majority of medicaid patients so he said he wants to see what happens in 2012 with medicaid and if they cover Butrans.dr said he likes Butrans seeing that its transdermal and dosed once a week but doesnt have a lot of commercial plan patients he see's in his office,but he is sold on Butrans so no questions there.i recommended Senokot-S
PPLPMDL0020000001	Fairlawn	OH	44333	7/27/2011	I asked Dr. Parisi how often patients are calling in complaining about their current SA therapy? How often are they asking for more of it? He said patients are calling in often complaining of both. I asked if he would feel comfortable initiating therapy to those patients and he agreed he would.
PPLPMDL0020000001	Akron	OH	44304	7/27/2011	I asked Dr. Amamunif if he felt there was truly a place for Butrans in his practice and if he could see himself prescribing Butrans moving forward. He said yes. No new info learned.
PPLPMDL0020000001	Akron	OH	44320	7/27/2011	I asked Misty about the success patients were having with Butrans and she said she felt patients were having success for the most part. She said the based on the success rate with Butrans she would feel confident continuing to prescribe for opioid experienced patients. I reminded her that Butrans had also been studies in opioid na /ive patients.
PPLPMDL0020000001	Maple Heights	OH	44137	7/27/2011	Spoke with Kathy (MA) who said that Dr Dale was out of town all this week. Reviewed Butrans formulary grid & savings cards with her. Also discussed eligibility requirements. Worked with her to schedule next available lunch. I asked her to give Dr Dale Butrans information & "Initiations" invitation upon his return & she agreed to do this.

PPLPMDL0020000001	Maple Heights	OH	44137	7/27/2011	Quick call- Caught Dr Gene at the window. He said he had forgotten about Butrans & asked what it is. Reminded him of indication, dosing, & delivery system. He said he did not have time to discuss it today but asked for information & suggested I schedule another lunch. Spoke with Kathy (MA) & reviewed Butrans managed care grid & savings.
	Cleveland	OH	44104	7/27/2011	dr said she's keeping Butrans in mind but hasn't had any patients with chronic pain that are taking short-acting opioids every day and not controlled. showed dr Butrans visual aid and asked her what features stand out the most to her? dr said transdermal technology, a patch and once weekly dosing. dr said she likes that Butrans is a CII and can be called in, but again she has a lot of acute pain patients and not a lot of chronic pain patients so she may not be the person to talk to a lot about Butrans. I told dr I understood that and as long as she considers Butrans for a couple patients, commercially insured, who are taking tramadol or vicodin daily but not controlled, she at least has all of the information. dr said ok she will keep butrans in mind.
PPLPMDL0020000001	Euclid	OH	44119	7/27/2011	Spoke to Lisa, fill-in pharmacist from the eastlake store. She was not familiar with the butrans script volume but she confirmed the had it. I explained the savings cards program and discussed the positioning, what we are telling doctors.
PPLPMDL0020000001	Akron	OH	44320	7/27/2011	I asked Dr. Duppstandt her thoughts on Butrans therapy and how she felt about the molecule Buprenorphine. She said she liked the idea of this medication and felt comfortable with the molecule. I asked if there was anything more he felt like she needed to know before prescribing for the first time and she said no and that she would keep it in mind.
PPLPMDL0020000001	South Euclid	OH	44121	7/27/2011	Spoke to tech, Barbara, about the stocking of Butrans. She confirmed that they have the 5 and 10mcg but she has not seen any scripts for it. I explained the positioning - in lieu - of starting vicodin ATC. I also explained the savings cards program and the WAC costs, per the FPI.
PPLPMDL0020000001	Twinsburg	OH	44087	7/27/2011	Spoke with Nicole (technician) who said that they only had a floater pharmacist in today. Discussed savings cards & eligibility for Butrans & OxyContin programs & asked her to give the Butrans savings leaver & my card for Lou- she agreed. She also said they have not yet dispensed Butrans at that location to her knowledge.
	Cleveland	OH	44106	7/27/2011	talked to dr as he's PGY-1 Resident in pain dept, dr said he's only worked 1/2 day in another pain clinic so he has no experience writing for transdermal medications, as we were discussing Butrans 5 core messages, I showed dr Butrans visual aid and asked him what were some features of Butrans he liked? dr said he liked that Butrans was a patch and dosed once a week. I asked dr as he starts to treat chronic pain patients here, to consider Butrans for those patients taking short-acting opioids but not controlled, showed Butrans initiation guide and discussed formulary coverage for Butrans, dr agreed to keep Butrans in mind and said he would talk to fellows and attending physicians about Butrans.
PPLPMDL0020000001	Cleveland	OH	44106	7/27/2011	discussed 4 patient case studies with dr, initiations presentation, dr said he wouldn't start an opioid naive patient on Butrans, most likely would start on tramadol and see if that controls pain 1st. dr said he started 1 patient on Butrans who was taking a couple vicodin daily and not controlled. I asked dr if this patient was in or out-patient? dr said patient was out-patient. dr asked if you could call in refills of Butrans? I told dr 5 refills up to 6 months, showed butrans initiation guide to show example of script, dr said ok he'll start more patients. dr asked about patients taking 2-3 vicodin a day, could he start them on Butrans? showed dr butrans initiation guide with dosage ranges and showed hydrocodone section and discussed initiating dosage strengths of Butrans. I asked dr to focus on a couple patients taking less than 300mg tramadol every day, for their chronic pain and not controlled, those are the patients dr can consider starting on Butrans, dr said ok he wasn't thinking of tramadol patients but made sense. we talked about insurance coverage and dr said he'll start some more patients and see
PPLPMDL0020000001	Euclid	OH	44119	7/27/2011	Quick call....introduced butrans to doc. Explained the indication, CII status, dosing, and positioning. He mentioned to his MA that butrans might be an option for her. he said he usually refers to pain mgmt for things like this. Nothing else learned. Gave him an invite, formulary grid, and initiation guide.
PPLPMDL0020000001	Euclid	OH	44119	7/27/2011	Quick call as doc just back from vacation. I reminded him of the butrans patient type - after NSAIDs or tramadol or before going to ATC vicodin. He apologized for not having more time. Gave him an interact invite to learn more about the right butrans patient.
PPLPMDL0020000001	Cleveland	OH	44106	7/27/2011	discussed 4 patient case studies with dr, from initiations presentation, dr said he probably wouldn't start opioid naive patients on Butrans as he prefers short-acting opioids for those patients, even if they have chronic pain and over time if patients aren't controlled then he'll consider a long-acting opioid. I talked to dr about considering Butrans, earlier in therapy, instead of waiting until they are taking percoct daily and not controlled. dr said he has some patients on Butrans and they seem to be doing well. I asked dr how he is explaining Butrans? dr said he tells patients this is easy for them with once weekly dosing, only 4 patches a month, dr tells them they can take an aspirin or ibuprofen if they have breakthrough pain, and for many patients dr feels he isn't comfortable increasing the short-acting opioid dose, he tells these patients this is your only option and it seems to work with these patients so far that he's started on Butrans we talked about butrans formulary coverage and savings cards. I recommended Senokot-S.
PPLPMDL0020000001	Warrensville Heights	OH	44122	7/27/2011	Spoke with Debbie (Lead Nurse) who said that changes continue to come to South Pointe Pain Management & Dr Shin will be leaving to go to Wooster & Medina offices starting in September. She said that more changes will come along with that & she would keep me updated as they happen. I reminded her of Butrans indication, dosing, delivery system, & savings program. She said she does not know why it has not been utilized with their doctors. They are still not allowing reps back still but hopes that will change at some point. I asked her to give Dr Shin Butrans "Initiations" invitation & August Butrans Cleveland area program invitations. She promised to do this & asked me to return on a Thursday when she would have more time to discuss things with me.
PPLPMDL0020000001	Cleveland	OH	44106	7/27/2011	worked pain management dept-see call notes as I had lunch with dept, worked family medicine-got updated list of attending physicians in dept that practice at main campus and left Butrans fpi, initiation guide, patient information booklet and dinner invitation for 8/10/11 for Dr. Marsh and Dr. Truax
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/27/2011	I asked Dr. Saunders if he had been initiating Butrans therapy to patients failing or asking to be titrated on their current therapy like we had previously talked about. He said that he was keeping it in mind for those patients and would continue to do so. I reminded him that Butrans was 7 days.
PPLPMDL0020000001	Akron	OH	44310	7/27/2011	Dr. Schukay said that head prescribed Butrans for a few patients and was pleased that he had not heard back from them. I explained steady state takes 72 hours to achieve and told him if he had call backs prior to that to encourage patients to remain on therapy. He asked about titration which I explained using the initiation guide.
PPLPMDL0020000001	Euclid	OH	44119	7/27/2011	Introduced Butrans to Judy discussing the key selling messages, positioning, CII status similar to vicodin. I explained the insurance coverage and the savings cards. She said that she really does not have the right patients but dr. Lin would want to hear about it.
PPLPMDL0020000001	Euclid	OH	44119	7/27/2011	Lunch. Introduced the butrans indication/positioning and other selling messages. she was shocked to learned that the butrans patch last for 7 days, She said she does not prescribe a lot of narcotics but she wanted information to learn more about it. Provide initiation guide, formulary grid.
	Euclid	OH	44119	7/27/2011	Lunch. Spoke with doc and his MA about the butrans indication, positioning, CII status, etc. He asked if it is used for addiction. I explained that butrans is only indicated for pain, per the fpi, as it is a much lower dose. He said he likes to use caution when prescribing narcotics so he wants to read more about it. He asked how it compares to vicodin. I explained that there are no head to head studies however butrans is a CII similar to vicodin but one dose last one week. He asked what clinical studies we have. I reviewed the studies measuring pain score improvement. gave him an invite, formulary grid, and initiation guide for him to review. No commitment.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/27/2011	I explained the ideal type of Butrans patient to the Physician. He agreed that he had many of those patients and because it is a LA agent would be a better choice for many patients currently taking several SAO&#8217;s each
	Euclid	OH	44119	7/27/2011	Introduced butrans to doc and explained the positioning and the CII status as well as other selling messages. She said she does not have many chronic pain patients and probably would not use the savings cards. Provided her with an initiation guide,
PPLPMDL0020000001	Euclid	OH	44119	7/27/2011	I discussed the butrans positioning and 5 selling messages with doc and his MA. I asked if he sees a place for it in his patient population. He said no as he does not like to hear presentations about narcotics. He said they cost too much and insurance companies will not pay for them. I explain the commercial plans and the savings cards. I gave him the invite and he said he would take a look at it. Nothing else learned.
PPLPMDL0020000001	Bedford	OH	44146	7/27/2011	Quick call- Dr Moufawad said he did not have time today & was very busy but he stopped to shake my hand. I handed him a Butrans webcast invitation. He stopped & put the time & date (Aug 4) into his calendar on his phone & thanked me for the information. He said he is looking forward to hearing the Butrans talk & would let me know how the webcast goes.
PPLPMDL0020000001	University Heights	OH	44121	7/27/2011	Doc asked if I was still pedaling the Butrans patch. I commended him for remembering Butrans and asked if he has tried it. He said he has not found the right patient. I explained the positioning and how one 5mcg could replace approx 21 tabs of hydrocodone. His assistant, audra, asked about the abuse potential. I explained that Butrans is still a narcotic and has the risk potential for abuse/diversion. She also asked if its covered on BWC. Confirmed that it was. Asked doc to focus on commercially insured patients and to give a savings card. Reminded him of the oxycontin patient type as well and the difference from butrans.
PPLPMDL0020000001	Cleveland	OH	44109	7/27/2011	talked to Andy, Pharmacist, about Butrans stocking, scripts for Butrans and who's prescribing in area, and I asked andy if he or other pharmacists have recommended Butrans to any patients? andy said there were a couple patients that were telling them their tramadol wasn't lasting long enough and a couple people who were taking vicodin and same response, so they gave Butrans patient information booklets and asked them to speak with their doctor about Butrans. I asked if Andy and other pharmacists could continue doing that and also recommend Butrans to doctors, if their patients tell them their short-acting opioids aren't lasting long enough or controlling their pain, Andy said he would do that with doctors if the relationship is good. I said ok. I left more Butrans patient information booklets and I asked Andy to recommend Senokot-S for opioid induced constipation and I left
PPLPMDL0020000001	Cleveland	OH	44106	7/27/2011	I talked to dr about Butrans 5 core selling messages, asked dr what he felt really stood out about Butrans. dr said he loves transdermal technology and once weekly dosing is easier for some patients. dr said he's not started any patients yet on Butrans but will do so as he thinks this is a great option for patients regardless if they take short-acting opioids for breakthrough or take non-opioids with Butrans. we discussed patient information booklet, importance of discussing application/rotation of Butrans weekly and we discussed butrans formulary coverage.
PPLPMDL0020000001	Cleveland	OH	44130	7/28/2011	Dr Rogers said that he remembers that he was excited about Butrans when I first told him about it, but thinks he must have forgotten about it. He asked for a "refresher". Reviewed with him indication, dosing, & delivery system. Also spent time going over appropriate patient type & CII/abuse/addiction potential. Discussed patients who are not being well-controlled on short-acting opioids, calling in too soon for refills, or asking for increases in dose. Dr Rogers said he definitely wants to find some patients to try on Butrans & asked his nurse, Terry, to actively look for patients who fit the description & alert him when they call or come in. She agreed. Dr Rogers said that he is familiar with buprenorphine as a molecule from years ago having experience with Buprenex. He said he believes that buprenorphine is an effective pain reliever. He said that he thinks it can be difficult to transition a patient from a short-acting to a long-acting medication & therefore thinks setting their expectations & mindset up front were of extreme importance. I told him I could not agree more. Discussed ability to supplement with opioid or non-opioid medications, especially during the first 3 days of Butrans therapy. Reviewed titration ability every 3 days to a maximum 20mcg. Also discussed OxyContin q12h for patients beyond Butrans 20mcg.
PPLPMDL0020000001	Westlake	OH	44145	7/28/2011	Quick follow up, I asked Dr if he had tried the patient we talked about last time. He said that he will when he sees her next and will let me know how it goes. I asked if he can think of any other patients that may be appropriate for Butrans and he said he is starting to think of Butrans more often and will see who else he can start today. Remind about OxyContin as an option when Butrans may not provide adequate analgesia.
PPLPMDL0020000001	Barberton	OH	44203	7/28/2011	I explained the ideal type of Butrans patient to the Dr. minich. She agreed that she had many of those patients and because it is a LA agent would be a better choice for many patients currently taking several SAO&#8217;s each day.
PPLPMDL0020000001	Shaker Heights	OH	44122	7/28/2011	Quick call- I stopped Dr Agarwal by handing him a Butrans "Initiations" invitation & asking him to participate in the interactive program. He said he has no time today & walked away. Spoke with MA Michelle who said that he was over an hour late & was just not "in the mood" today. I told her about the program & asked her to remind him about it when the timing is better. She agreed. Also reviewed with her Butrans & OxyContin formulary grids. She said the Butrans grid would be especially helpful because she does not know the coverage yet. Discussed commercial insurance & savings cards. She asked me how Butrans compares with fentanyl. I told her we have no comparative data & discussed the appropriate patient type. She said she would give me information to Dr Agarwal.
PPLPMDL0020000001	Cleveland	OH	44102	7/28/2011	dr said he's not started anyone on Butrans yet and the hardest part for him is finding 1 patient and just getting in the habit of writing Butrans and feeling comfortable with Butrans. told dr I understood and asked what he needed from me to feel comfortable starting 1 patient? dr said nothing at this point, just keep telling him who the appropriate patient is and how to write Butrans. I showed dr butrans visual aid, appropriate patients section and initiation guide discussing dosage ranges of short-acting opioids and starting patients on Butrans. dr said ok, we discussed BWC and commercial plan patients trying Butrans. I recommended Senokot-S for opioid induced
PPLPMDL0020000001					

PPLPMDL0020000001	Cleveland	OH	44102	7/28/2011	talked to Nagla,PA,about appropriate patients for Butrans and showed her Butrans visual aid for discussion.Nagla said she does recommend Butrans to doctors and likes that its a patch and once weekly dosing,we talked about Nagla recommending Butrans right after tramadol isnt controlling patients pain instead of converting them to vicodin,Nagla agreed and said that makes sense,we talked about application/rotation section in Butrans patient information booklet and i asked Nagla to be sure this information is discussed with patients when starting on Butrans,Nagla said ok.we discussed BWC and commercial insurance patients trying Butrans.
PPLPMDL0020000001	Parma	OH	44129	7/28/2011	Spoke with Shari (MA) & asked her if they needed any Butrans savings cards. She said Dr Paat has not started using it yet. I asked if she knows why not. She said she is not sure other than it takes him awhile to start using newer products as he has old habits with writing the same drugs over & over. Discussed appropriate patient type with her & mentioned patients who call in too soon for refills of their short-acting opioids. She said she would try to alert Dr Paat to when she gets those calls & will "do her best" to get him to consider Butrans for the appropriate patients.
PPLPMDL0020000001	Parma	OH	44129	7/28/2011	Spoke with Edie (nurse) & Brittney (MA) & reviewed Butrans appropriate patient type. They showed me the empty Butrans savings cards but said they do not know where all the cards went because Dr Rossi is not yet using Butrans, at least to their knowledge. They agreed that she does have patients who fit the Butrans description. Told them about the Butrans "Initiations" program & asked them to give Dr Rossi the invitation. They agreed. Also worked with them to schedule next available lunch appointment.
PPLPMDL0020000001	Cleveland	OH	44130	7/28/2011	Introduced myself & Butrans to Dr Plecha. Delivered 5 core messages & reviewed box warning. Discussed importance of appropriate patient selection & talked about patients taking low-dose Vicodin or tramadol chronically. I asked him as a Vascular Surgeon, what role, if any, he thought a medication like Butrans would play in his practice. He said he does see a place for it & has patients who come to mind as potential candidates. He said that he has one who is taking 3 tramadol every day for back pain. He asked me if this could be a Butrans patient. I told him he sounds like the right type of patient clinically. He asked about side effects. Showed adverse events in main visual aid & asked if any of them surprised him. He said no. He asked about use in the elderly. Pointed out on that page that older patients had slightly higher incidences of adverse events & told him he should be cautious in this population as he always is. Also reviewed managed care & savings program. He said he has a patient taking 8 Percocet per day & said that he had just switched her to OxyContin. I told him she sounded more like an OxyContin candidate than a Butrans one & discussed 7 available strengths. He said he believes in using long-acting medications for patients, especially if their need for pain control will last for a longer period of time. He said he will keep an open mind & will try to utilize Butrans when he sees the kind of patient we spoke about.
PPLPMDL0020000001	Beachwood	OH	44122	7/28/2011	Jennifer said that she really hasn't had the opportunity to start a patient on Butrans. She said that she does not typically switch a patient's medication as this would be more Dr Yokiel's area. She added, however, that she can make recommendations or suggestions to Dr Yokiel for patients she sees & that she would like to get some experience with Butrans. Reviewed with her the importance of appropriate patient selection & discussed patients on the more moderate side. I asked her how frequently she gets calls from patients saying their short-acting medications are wearing off too quickly or who call too soon for refills. She said she gets them so frequently that she has a running list of patients to call just like that on her desk. I asked her what an example of a patient's dose of short-acting might be. She said probably 4 Percocet per day. I showed her initiation guide & walked her through initiation, including taper. Also reviewed titration ability every 3 days to a max 20mcg. Also talked about use of supplemental analgesia in either opioid or non-opioid medications. She said she thinks there is a place for Butrans & she will try to find some patients to suggest to Dr Yokiel as well.
PPLPMDL0020000001	Cleveland	OH	44113	7/28/2011	showed dr Butrans initiations presentation,discussed 4 patient case studies as dr said he didnt remember much about Butrans.i asked dr if he had patients taking tramadol,daily for chronic pain,that arent controlled? dr said yes he has a lot of those patients.i showed dr Butrans visual aid,discussing appropriate patients and talked to dr about patients taking less than 300mg tramadol,daily,for their chronic pain that arent controlled,starting them on Butrans 5mcg,discussed side effects and showed butrans fpi and visual aid for this information,discussed titration,showed Butrans fpi with steady state graph and discussed Butrans application/rotation section in Butrans patient information booklet.dr asked who covered Butrans? i told dr to focus on BWC,commercial and Tri-care as these are the 3 biggest payors here.dr said ok he'll start a couple patients and see what happens.i
PPLPMDL0020000001	Cleveland	OH	44130	7/28/2011	Dr Kansal said he has not tried any more patients on Butrans. He said the problem still remains of transitioning a short-acting around-the-clock medication to a long-acting agent. Reminded him that patients can take supplemental analgesia & asked him what made him try Butrans on the one patient that he did try it on (even though it did not end up being a patient in the right opioid range). I said that he must have seen some value in it if he prescribed it for one person. He said that nothing else had worked for that person, so he figured he would try it. Reviewed the appropriate patient type. He also said he is discharging patients from his practice who show up on OARRS as getting medications from multiple physicians. I told him it sounds like he is doing the right thing. Reminded him that some patients truly do need pain relief & said those are the patients he should think of with Butrans as well. He said we really should be talking to ER physicians because they are the ones who start patients on these short-acting around-the-clock medications. I told him we do not call on EM specialties because they prescribe for short-term & our medications are intended to be used for an extended period of time. He said he would try to identify some patients who may benefit from Butrans.
PPLPMDL0020000001	Beachwood	OH	44122	7/28/2011	Spoke with Shelly (pharmacist) & reviewed Butrans patient information booklet. Discussed patient counsel & answering questions first-time users may have. Shelly said she wishes it would "move" & she has seen no activity at all. I let her know I had just had breakfast with Dr Yokiel & Jennifer Dehlman. She said that they do get a fair amount of prescriptions from them. Reviewed appropriate patient type & discussed importance of appropriate patient selection.
PPLPMDL0020000001	Barberton	OH	44203	7/28/2011	I asked Dr. Patel how often patients are calling in complaining about their current SA therapy? How often are they asking for more of it? He said patients are calling in often complaining of both. I asked if he would feel comfortable initiating therapy to those patients and he agreed he would.
PPLPMDL0020000001	Cleveland	OH	44113	7/28/2011	talked to dr about his patients taking vicodin or percocet,daily,but not controlled and asking him for something else,dr said he hasnt seen a lot of patients as he does more procedures but he'll keep Butrans in mind.i showed dr Butrans visual aid,discussed 5 core messages and asked dr to start 2 patients,commercially insured,on butrans,if they are taking vicodin or percocet every day but not controlled,instead of refilling their vicodin or percocet,dr said he'll consider it but doesnt have anyone in mind at the moment for Butrans.
PPLPMDL0020000001	Copley	OH	44321	7/28/2011	I asked Dr. Heim about the success patients were having with Butrans and he said he felt patients were having success for the most part. He said the based on the success rate with Butrans he would feel confident continuing to prescribe for opioid experienced patients. I reminded him that Butrans had also been studies in opioid n rve patients.
PPLPMDL0020000001	Westlake	OH	44145	7/28/2011	Dr just got back from Lebanon, I asked about the success his Butrans patients are having and he said everything is going great. He said he is still trying to get Butrans on formulary and that he is not going to give up. He said that he will continue to go to P&T committee meetings until he is able to write it in the hospital. Dr cannot attend the Westlake dinner program due to the date, but may be able to come to the Cleveland program.
PPLPMDL0020000001	Beachwood	OH	44122	7/28/2011	I reminded Dr Yokiel of our last discussion regarding Butrans & asked him if his concerns about the molecule have been settled or if there is information I could provide him with that would help alleviate any concerns he still has. He asked me if people are using Butrans with success. I told him that it has been well-received & that patient selection is of paramount importance with Butrans. Discussed the scale of moderate to severe pain & different doses of current opioid therapy that patients may already be on. Let him know that someone on a higher dose of opioids may not get adequate relief from Butrans. He said that he sees mostly patients on multiple medications & higher doses but said he does see a good amount of patients on the lower end. I told him those were his potential Butrans patients. Discussed starting dosages & titration every 3 days. He said he will try it on some of those patients. Reviewed savings opportunities where eligible. Discussed OxyContin 7 available tablet strengths. He said that he sometimes forgets about the intermediate strengths but that he likes to be able to titrate more gradually now instead of taking a patient from 40mg q12h to 80mg q12h.
PPLPMDL0020000001	Cleveland	OH	44145	7/28/2011	Irene said they're having 2 conference - 12/6 & 12/7 in Philly and also 1/18-1/20. She's looking for a speaker to talk about diversion. Check with Ed Cartwright for openings. She liked Safeguard my meds brochure so determine if it's available in PDF. Determine which online webinars are available to post to their website and also check to see if has to be the link or actual video. When time allows, schedule Pain PACT initiative. Confirm appointment on Tues, Aug. 9 to discuss contracting with Toni and Irene.
PPLPMDL0020000001	Cleveland	OH	44106	7/28/2011	i talked to Amy,Pharmacist,about Butrans scrips and Amy said there have been some scrips for Butrans filled here.i asked Amy if she could pull the list and share with me the doctors prescribing Butrans? Amy said she couldnt do that today as she had too much to do.we talked about Butrans patient information booklets being given to patients when they get their scrips and i asked Amy to focus patient discussion on Application/rotation of Butrans,Amy said she usually just gives booklet but will talk about this information with them.i asked Amy if she could recommend Butrans to any patients that are taking short-acting opioids,daily yet their pain isnt controlled and wanting something else? Amy said she'll give the Butrans patient information booklet to a few patients and tell them to speak with their physicians.i recommended Senokot-S
PPLPMDL0020000001	Parma	OH	44129	7/28/2011	Caught Dr Tolentino at the window & asked her if the Butrans information I had left for her answered her questions. She said she has no questions & is waiting to see the right patient & then walked away. I spoke with Kathy, her MA, & asked what Dr Tolentino is looking for in "the right patient". She said it is difficult because target patients like those on low dose Vicodin or Percocet are difficult to transition to a long-acting medication like Butrans. She said she will help Dr Tolentino identify the right patient & will make suggestions to her as she sees them come in or takes phone calls from them. I mentioned patients who call her too soon for refills. Kathy said this may be a possible area of opportunity & said she would keep me posted.
PPLPMDL0020000001	Independence	OH	44131	7/29/2011	Spoke with MA Diana & asked her to give Roman a Butrans program reminder to register. Also discussed savings cards for Butrans & OxyContin & asked her to check their stock. She said they have enough of both types of cards for now. Discussed eligibility requirements (ie no government insurance). Also went through formulary grids with her. She said she would give the info to Roman & Dr Keppler.
PPLPMDL0020000001	Uniontown	OH	44685	7/29/2011	I explained the ideal type of Butrans patient to Dr. Keith. She agreed that she had many of those patients and because it is a LA agent would be a better choice for many patients currently taking several SAO's#8217;s each
PPLPMDL0020000001	Solon	OH	44139	7/29/2011	Spoke with floater pharmacist & reviewed Butrans appropriate patient type, including patients on chronic Vicodin or tramadol. Also reviewed savings program & gave her savings leaver, letting her know savings cards could be printed from Butrans.com. Also discussed OxyContin 7 available tablet strengths & reviewed savings cards for eligible patients. She said she would leave the information for the regular pharmacist.
PPLPMDL0020000001	Chagrin Falls	OH	44023	7/29/2011	Spoke with Ben (pharmacist) & reviewed Butrans appropriate patient type. He said he does stock it but has not yet dispensed it. Discussed savings program & let him know about savings cards that can be printed from Butrans.com. He said he will keep the literature on hand to reference for when he gets prescriptions. Also gave him OxyContin savings cards & reviewed eligibility for use. He said that the customers he has on it will be very Dr said that he finally has prescribed Butrans for a patient. He said he thought she had commercial insurance, he gave her a savings card and she was previously taking tramadol. I asked about her success, but he has not heard back. I reviewed Butrans initiation presentation and we discussed appropriate patients for Butrans. I asked if he has any others who might benefit from Butrans. He said he has a hospital patient and he asked me if he can write it at Lakewood hospital. I asked him how I would get it on formulary, he said I should talk to John on the P&T Committee, Dr Khuri is on the executive board that makes the final decision. He said that they do not have to follow the CCF main campus formulary. We reviewed OxyContin as an option when Butrans may not provide adequate analgesia. I asked Dr to join us for the upcoming dinner in Westlake. He said it will be a last minute decision but he will try to go. (8 week old twins, Lila, George, Anna is other daughter)
PPLPMDL0020000001	Cleveland	OH	44113	7/29/2011	i talked to dr about pg 11,butrans visual aid,discussing specific pain conditions with dr and how often she see's these pain conditions,dr said it varies as she see's all of them and she would consider Butrans for these pain conditions.dr said she doesnt look at butrans for specific pain conditions,its about patients asking for more pills or telling their current short-acting opioids not working and then she'll consider Butrans. i asked dr to think of a couple patients today that have these conditions,that she can start on Butrans,showed appropriate patients section in visual aid and talked about 5mcg and 10mcg being the initiating dosage strengths of Butrans.dr said ok and we discussed formulary coverage.i recommended Senokot-S
PPLPMDL0020000001	Northfield Center	OH	44067	7/29/2011	Spoke with pharmacist Kate & reviewed Butrans appropriate patient type. Gave her a patient information booklet & discussed patient counsel & answering patient questions, especially if Butrans is their first transdermal medication. She said they are not stocking Butrans at this time as they have not seen any prescriptions for it but she said she would keep the booklet just in case. I inquired about OxyContin stocking. She said they do carry some of the strengths & have a few customers on it. Reviewed savings cards with her & gave her one package of cards.
PPLPMDL0020000001	Brooklyn	OH	44144	7/29/2011	Dr Miguel asked me if OxyContin still had a generic. I told him that most of my pharmacies have told me they are out of it by now. Showed him OxyContin conversion guide & pointed out conversions from Percocet & Vicodin to OxyContin q12h. He said that he did not realize this could be done. Discussed Butrans as an option for the more moderate side of pain. Reviewed delivery system, CII, abuse/addiction potential, & appropriate patient type. He said he has a lot of patients on chronic Vicodin or tramadol because "there is nothing else to give them". I asked him if he felt there was any benefit to now having a once-weekly transdermal CII as an option for some of those patients. He said he never really thought of that. Discussed application sites, rotation, & disposal & showed him a demo with a patch disposal unit & demonstrated how the patch could be disposed of. He said that he would like to try Butrans on some patients to get some clinical experience. Reviewed appropriate patient type again & he said he plans to try a few patients on it to see how they do.
PPLPMDL0020000001					



PPLPMDL0020000001	Independence	OH	44131	7/29/2011	Spoke with MA Denise & reviewed Butrans patient information booklets. She said that either they usually give out patient information with savings cards if they have them, but Dr Boose actually discusses the medications with them. Told her about application & rotation of Butrans. She said Dr Boose has not started using Butrans as far as she knows. I asked her if there were any other times to get an appointment with him other than lunches but she said they do not do that. I asked her to give Dr Boose the sealed "Special Report" article & she agreed.
PPLPMDL0020000001	Uniontown	OH	44685	7/29/2011	I asked Dr. Lohmeyer how often patients are calling in complaining about their current SA therapy? How often are they asking for more of it? She said patients are calling in often complaining of both. I asked if she would feel comfortable initiating therapy to those patients and she agreed she would.
PPLPMDL0020000001	Chagrin Falls	OH	44022	7/29/2011	Spoke with Dr Hudson's nurse, Karen, & reviewed formulary grids for Butrans & OxyContin. Also showed her savings cards for both products & reminded her of eligibility requirements for usage. She said she does not think Dr Hudson prescribes OxyContin, so she would not accept the savings cards. I told her they could even be used for patients who are being continued on it but she still said no. I asked her to give Dr Hudson Butrans information & she agreed.
PPLPMDL0020000001	Lakewood	OH	44107	7/29/2011	Found out that Josie no longer has an office in the hospital all of their education has been moved to the Madison Ave education building. I spoke with Mary Ann Tilow, she is in charge of coordinating grand rounds and is interested in brining in a LELE program the end of this year. I will coordinate this with her.
PPLPMDL0020000001	Lakewood	OH	44107	7/29/2011	I asked Dr to tell me about the patients that he started on Butrans. He said he did not know how they are doing. Dr asked me how Duragesic compares to Butrans. I let him know that we do not have head to head studies to compare the two. I reviewed the initiation guide for Butrans and that he can start Butrans for patients who are opioid naive. I invited Dr to join our upcoming dinner discussion and he will try to make it. Reminder that OxyContin is still an option when Butrans may not provide adequate analgesia.
PPLPMDL0020000001	Lakewood	OH	44107	7/29/2011	Dr came in while Dr Khuri and I were looking at initiations presentation and joined us. She said she just has not remembered to prescribe Butrans, but she will keep it in mind. I asked if she sees a benefit to Butrans and she said yes, the 7 day dosing instead of vicodin around the clock. We reviewed the initiation guide and medication guide for patients. She agreed to give Butrans a try.
PPLPMDL0020000001	Chagrin Falls	OH	44022	7/29/2011	Caught Dr Rood at the window & asked how his Butrans patient was doing. He said she is doing well but added that he has not put anyone else on it yet before walking away. Spoke with Sherry (MA) & Karen (nurse) & reviewed savings cards/eligibility for Butrans & OxyContin. They said they did not need any more savings cards. Discussed managed care coverage, focusing on commercial insurance for Butrans & Medicare coverage for OxyContin. I asked them to give Dr Rood the information & they agreed. Also scheduled another appointment for follow-up.
PPLPMDL0020000001	Cleveland	OH	44109	7/29/2011	I talked to Erin, Pharmacist, about Butrans stocking and if she's seen any scripts of Butrans. Erin said noone has filled scripts here yet, but she has been giving Butrans patient information booklets to patients. I asked Erin to continue recommending Butrans to patients, if they arent controlled on their short-acting opioids and also to recommend Butrans to physicians, for these types of patients. Erin said she would do that. I showed butrans visual aid, 5 core messages and discussed them with her and discussed formulary coverage for butrans.
PPLPMDL0020000001	Akron	OH	44319	7/29/2011	I asked Dr. Wu his thoughts on Butrans therapy and how he felt about the molecule Buprenorphine. He said he liked the idea of this medication and felt comfortable with the molecule. I asked if there was anything more he felt like he needed to know before prescribing for the first time and he said no and that he would keep it in mind.
PPLPMDL0020000001	Cleveland	OH	44113	7/29/2011	I talked to dr about butrans visual aid, 5 core selling messages and talked to dr about what was most important to him about Butrans? dr said he likes that Butrans is transdermal and dosed once weekly. we talked about Butrans being a CII and calling in refills which could be easier for dr and staff. I asked dr if he had a couple patients taking tramadol every day for their chronic pain and not controlled? dr said yes he probably has some like that. I asked dr to start them on Butrans 5mcg as long as they are taking less than 300mg tramadol a day. dr said ok. we discussed patient information booklets and insurance coverage. I recommended Senokot S.
PPLPMDL0020000001	Cleveland	OH	44113	7/29/2011	I talked to dale about specific pain conditions, pg 11 butrans visual aid and if he see's these conditions? dale said yes they see everything and these conditions included, but they choose Butrans based on patients telling them their current medications not working. dale said dr shen wont change patients medication if its working, so she's only going to start patients on butrans if they complain to her or him. I asked dale if he would consider starting patients on butrans, if they call in early every month for refills so perhaps thinking a long-acting opioid like butrans could be appropriate? dale said he will think about that as that does make sense. I asked dale to think of a couple patients taking tramadol, that arent controlled and those perhaps are the one's calling in early for refills, to convert them to butrans. dale said he will consider this option. we talked about insurance coverage.
PPLPMDL0020000001	Copley	OH	44321	7/29/2011	I asked Dr. Machado if he had been initiating Butrans therapy to patients failing or asking to be titrated on their current therapy like we had previously talked about. He said that he was keeping it in mind for those patients and would continue to do so. I reminded him that Butrans was 7 days.
PPLPMDL0020000001	Akron	OH	44319	7/29/2011	I asked Dr. Yee if he had been initiating Butrans therapy to patients failing or asking to be titrated on their current therapy like we had previously talked about. He said that he was keeping it in mind for those patients and would continue to do so. I reminded him that Butrans was 7 days.
PPLPMDL0020000001	Akron	OH	44319	7/29/2011	I explained Butrans using the FPI. I explained what type of message I was discussing and focusing on with physicians in the area and ideal patient types.
PPLPMDL0020000001	Akron	OH	44319	7/29/2011	Spoke with John, I have continued to work with him on identifying ideal Butrans patients and have explained the types of patients I have been focused on with Dr. Wu.
PPLPMDL0020000001	Brooklyn	OH	44144	7/29/2011	Dr Detwiler asked me how Butrans compares with other pain medications. I reminded him that we do not have comparative data. Reviewed buprenorphine as a partial agonist at mu opioid receptor & showed him FPI section 12.1. Also discussed transdermal delivery system & CII, along with abuse/addiction potential. He asked me if it would be for someone on OxyContin. I showed initiation guide pg 6 & pointed out that someone on over 40mg per day of oxycodone would not be considered a Butrans patient & told him that OxyContin q12h may be an option for some of those patients. I described patients taking 2-3 Vicodin or tramadol per day who call in too soon for refills, tell him their medication is wearing off too quickly, or asking him for an increase in dose. He said that he "unfortunately" has many patients who fit that description. I told him that it is a common patient type & that for some of them, Butrans may provide an answer. I asked him if he thought any of the patients he was thinking of may benefit from a once-weekly transdermal system of buprenorphine. He said possibly & asked the cost. Discussed commercial insurance & told him this would be the path of least resistance with managed care & that those patients could also use savings cards, bringing them down to a \$15 co-pay, which he agreed was reasonable. He said he usually prescribes generics. I reminded him of patients who are not well-controlled on them & he said that is where he would think of Butrans.
PPLPMDL0020000001	Lakewood	OH	44107	7/29/2011	Dr just returned from vacation. I asked if he is happy with the success his patients are getting with Butran and he said that seem to be doing fine and he likes Butrans as another option to try. He has not had issues with managed care so far and I spoke to the staff and they said everything seems to be going smoothly and no managed care issues. I reviewed OxyContin as an option that is covered on Medicaid and Med D AARP.
PPLPMDL0020000001	Cleveland	OH	44111	7/29/2011	Spoke with Dan, we reviewed Butrans medication guide and what to tell the patients about Butrans. We discussed application sites, steady state in 3 days and heat warning. We discussed the savings cards and managed care for both Butrans and OxyContin.
PPLPMDL0020000001	Cleveland	OH	44130	7/29/2011	Introduced myself to Melissa in Materials Management & Tammy, the Pharmacy Secretary. They said that Stacey, the pharmacist, was busy with inventory & other logistical tasks & could not meet with me today. Introduced Purdue's product portfolio & requested a meeting with Stacey to discuss Butrans in more detail. Tammy gave me her card & asked me to give them a few weeks before I call to set up the appointment because of a busy schedule over the next few weeks. She said after that, she would be happy to connect me with Stacey.
PPLPMDL0020000001	Cleveland	OH	44106	8/1/2011	showed dr butrans initiations presentation, discussed 4 patient case studies and dr said he wouldnt start an opioid naive patient on a long-acting opioid. dr said he would probably start them on tramadol, after an NSAID doesnt work, then after tramadol he would convert patients to vicodin. I asked dr to stop and consider Butrans right after controlling patients pain before starting them on vicodin. dr said he could consider that if patients are comfortable starting on a patch. I showed dr butrans visual aid, appropriate patients section, discussed initiating dosage strengths of butrans and asked dr to focus on commercial and BWC patients. dr said ok he will talk to a few patients this week and see what happens. I showed dr butrans patient information booklet, asked him to focus on application/rotation of butrans. dr said ok. we talked about OxyContin being an option, showed "appropriate patients" flashcard for OxyContin, discussed 7 tablet strengths available and insurance coverage for OxyContin. dr said he has a couple patients on OxyContin but doesnt start many people on OxyContin. I reviewed the 7 day dosing and asked Dr if he would try just a few patients. He asked about managed care and we reviewed where Butrans is covered. Spoke with Sam and she will look for appropriate patients for Butrans and help reminder the Dr. Reminder that OxyContin is an option that is covered on Medicaid.
PPLPMDL0020000001	Westlake	OH	44145	8/1/2011	I talked to dr about Butrans being an option right after tramadol isnt controlling patients chronic pain. I showed dr Butrans visual aid for discussion of appropriate patients and dr said if patients are taking tramadol and arent getting pain control he typically goes to vicodin, but he will consider Butrans for some patients right there if they have a negative MRI. I showed dr Butrans initiation guide, discussed initiation and titration of Butrans and asked dr to focus patient discussion on once weekly application and rotation of Butrans and give patients Butrans patient info booklet. dr agreed and I asked dr to focus on BWC and commercial patients to start on Butrans. dr said ok he'll think of a couple more patients as he only has 2 patients on Butrans and they seem to be doing fine no complaints. I recommended Senokot-S <font color=blue><b>CHUDAKOB's query on 08/12/2011</b></font> Just curious. Did he say why they have to have a negative MRI for him to consider Butrans instead of Vicodin? <font color=green><b>BROOKAM's response on 08/15/2011</b></font> yes he has in past because he feels there's legitimate pain- <font color=blue><b>CHUDAKOB added notes on 08/17/2011</b></font> I would think a negative MRI would not be an indication of pain. That would be a positive MRI.
PPLPMDL0020000001	Cleveland	OH	44103	8/1/2011	I talked to Nick Seitz, Pharmacist, about Butrans fpi. nick said he's new and didnt know anything about Butrans, we discussed 5 Butrans core messages and showed butrans visual aid with this info. nick said he's not seen any scripts lately for butrans but he thinks transdermal technology and once weekly dosing are 2 features of butrans that are important. we discussed appropriate patients for butrans, showed initiation guide and discussed tapering of short-acting opioids and initiation of butrans 5mcg or 10mcg, we talked about butrans formulary coverage and patient savings cards. gave nick butrans patient savings card flashcard as they have electronic savings cards here. I gave nick 2 butrans patient info booklets and asked him to discuss application/rotation of butrans with patients, nick agreed.
PPLPMDL0020000001	Cleveland	OH	44113	8/1/2011	talked to Laura, NP, briefly about her patients taking tramadol, less than 300mg daily, and not controlled, and her considering Butrans as an option before she starts them on Vicodin. I showed Laura butrans visual aid, appropriate patients section, discussed these patients with her and Laura said she might start some patients down the road after she see's how dr nickels patients are doing on butrans, at this point she's not giving any thought or time to discussing butrans with patients. I told Laura I understood time was limited and to recall that the Butrans patient info booklet can be an educational tool to assist her in educating patients on butrans, Laura said ok. I asked her to think of bwc or commercial plan patients and she said ok she had to go. I recommended Senokot-S.
PPLPMDL0020000001	Cleveland	OH	44115	8/1/2011	I talked to dr about her chronic pain patients taking less than 300mg tramadol, daily, and still not controlled and asking dr for something else. dr said she has a handful of patients like that and will consider Butrans if appropriate. dr asked about initiating dosage strengths. I showed butrans visual aid, appropriate patients and initiation sections and asked dr to focus on commercial plan patients to start on Butrans, per our discussion. dr said she will keep Butrans in mind but noone has asked for anything different recently. I talked to Lisa, MA, and told her about Butrans 5 core selling messages and asked Lisa to recommend Butrans to dr when patients call in early for refills of tramadol, instead of refilling tramadol. Lisa said ok. I talked to dr and Lisa, MA, about insurance coverage for commercially insured patients and use of Butrans patient savings cards. I recommended Senokot-S.
PPLPMDL0020000001	Lakewood	OH	44107	8/1/2011	I asked Dr his thoughts about Butrans. He said it seems like it might be a good option for some patients, but that new drugs are a pain to prescribe due to managed care. We reviewed the key messages and I asked if he sees commercial insurance patients who he thinks might benefit. He said he will keep it in mind. We reviewed the managed care and savings cards for Butrans. Reminder that OxyContin is still an option that has coverage on Medicaid and Med D AARP.
PPLPMDL0020000001	Lakewood	OH	44107	8/1/2011	I reminded Dr of our last conversations where he thought Butrans would benefit his patients. I asked Dr what other info he needs to feel comfortable prescribing Butrans. He said he will prescribe. Reminder that OxyContin is also a long acting option when Butrans may not provide adequate analgesia.
PPLPMDL0020000001	Lakewood	OH	44107	8/1/2011	Quick call, I reviewed the key messages for Butrans and asked if he had any patients today who he thought might benefit from Butrans. He said he will keep it in mind. I reviewed managed care for Butrans and OxyContin is an option that is covered on Medicaid.
PPLPMDL0020000001	Lakewood	OH	44107	8/1/2011	Quick follow up at window. I reviewed the Butrans 7 day dosing and asked if he would try Butrans for patients on low dose hydrocodone who's pain is not well controlled. He agreed to keep it in mind. I reviewed the savings cards for Butrans as well as OxyContin.

PPLPMDL0020000001	Fairlawn	OH	44333	8/1/2011	I asked Dr. Oyakawa his thoughts on Butrans therapy and how he felt about the molecule Buprenorphine. He said he liked the idea of this medication and felt comfortable with the molecule. I asked if there was anything more he felt like he needed to know before prescribing for the first time and he said no and that he would keep it in mind.
	Cleveland	OH	44113	8/1/2011	I showed dr Butrans initiations presentation, discussed 4 patient case studies and dr said he really isn't comfortable prescribing Butrans because it's a CIII and he doesn't write any CIII narcotics. dr said he liked that Butrans was transdermal and dosed once a week but he just didn't see himself ever writing Butrans based on it being a CIII. I asked dr what happens when patients are maxed on their daily tramadol dose, how does he manage their chronic pain at that point? dr said he refers to dr Nickels, anesthesiologist, down the hall from him. dr said he has maybe prescribed OxyContin 1 or 2 times in past few years and he's not comfortable with that either based on OxyContin being a CII. dr said he will write Ryloft because he prescribes a lot of tramadol and likes Rylofts dosing of 1 x a day, dr asked for Ryloft savings cards so I left 1 box and we discussed Ryloft savings card program for commercial insurance plans and BWC patients trying Ryloft. I recommended Senokot-S.
PPLPMDL0020000001	Parma	OH	44134	8/1/2011	Dr Scanlon said that he started some more patients on Butrans. I asked him to tell me more about the patients. He said that both have chronic pain & that one was not being well-controlled on Vicodin & the other was a new start. He said that he is trying to get more & more experience with it & definitely sees a place for Butrans. I showed him main visual aid page 11 & pointed out the chronic conditions that Butrans has been studied in. I asked him how frequently he treats these conditions. He said that he sees patients with these conditions every day. He said, in fact, that some of the patients he has put on Butrans have had spinal stenosis. I told him it sounds like he is choosing the right type of patients for Butrans since that was the type of patients it was studied in with success. He showed me that he keeps his initiation guide in his mailbox & pointed out that it is the only piece of literature from any pharmaceutical reps that he keeps. He said he will continue to look for Butrans patients & he tries to choose those who will be more receptive to the idea. Dr Scanlon returned to ask me for more Butrans savings cards, which I provided to him. He then told me that he just prescribed Butrans for a patient who has rheumatoid arthritis & who was taking Vicodin chronically. He said that the patient asked him for a medication that would "be more steady", so he prescribed Butrans 5mcg for her & gave her a savings card. He did not know what type of insurance she had.
PPLPMDL0020000001	Akron	OH	44333	8/1/2011	I asked Dr. Shah about the success patients were having with Butrans and he said he felt patients were having success for the most part. He said the based on the success rate with Butrans he would feel confident continuing to prescribe for opioid experienced patients. I reminded him that Butrans had also been studied in opioid na/rve patients.
PPLPMDL0020000001	Parma	OH	44129	8/1/2011	Dr Taylor said that while she has not yet prescribed Butrans, she is thinking of it more. She said that she now has a plan & is evaluating her practice to see just how many chronic pain patients she has to see if it is near 50%. She said that she is "paranoid" about prescribing pain medications. Asked her what she is paranoid about. She said she does not want to prescribe too many pain medications. She added, however, that because Butrans is CIII, that is a benefit because she can call in prescriptions & write refills. Reminded her that patients who are not being well-controlled on Vicodin around-the-clock may be candidates for Butrans, & those who are beyond Butrans may be candidates for OxyContin. She said she will keep Butrans in mind going forward.
PPLPMDL0020000001	Cleveland	OH	44106	8/1/2011	worked pm&kr dept-see call note on dr baig, worked family medicine-left Butrans dinner invitations and butrans "engage" and "experience" cards for doctors.
PPLPMDL0020000001	Akron	OH	44333	8/1/2011	I asked Dr. Lababidi how often patients are calling in complaining about their current SA therapy? How often are they asking for more of it? He said patients are calling in often complaining of both. I asked if he would feel comfortable initiating therapy to those patients and he agreed he would.
PPLPMDL0020000001	Akron	OH	44333	8/1/2011	Dr. Brown said that she had prescribed Butrans for a few patients and was pleased that she had not heard back from them. I explained steady state takes 72 hours to achieve and told her if she had call backs prior to that to encourage patients to remain on therapy. She asked about titration which I explained using the initiation guide.
PPLPMDL0020000001	Cleveland	OH	44113	8/1/2011	I talked to dr about his patients taking 1-2.5mg vicodin tabs, daily for their chronic pain but not controlled and considering Butrans right there instead of increasing dose of vicodin to 7.5, 10mg and then maxing patients out on 40mg daily of vicodin, dr said he agreed that earlier was better to start patients on butrans but he's not had anyone like that recently where he feels butrans is appropriate, but he'll keep it in mind. dr said he likes that butrans is dosed once a week and patients only get 4 patches a month, we talked about dr focusing on bwc and commercially insured patients. I recommended Senokot-S.
PPLPMDL0020000001	Cleveland	OH	44113	8/1/2011	talked to dr about his patients taking vicodin, 1-2 tabs, 5mg vicodin, daily and not controlled, and patients are asking dr for something else, I asked dr how a long-acting opioid could be appropriate? dr said usually after vicodin strengths are maxed out he'll prescribe percocet and if that doesn't control patients pain levels he'll go to OxyContin or Duragesic. I showed dr butrans visual aid 5 core messages, asked what features really stood out to him? dr said transdermal technology, once weekly dosing application and CIII status of butrans. I talked to dr about why these features stood out and dr said CIII was easier for him as his staff can call in refills, dr said he's not used to having a long-acting opioid option as a CIII so this will take him a bit to get in habit of writing for Butrans. I showed dr Butrans initiation guide, discussed tapering of vicodin, if above 15mg daily, and starting patients on Butrans 5mcg or 10mcg, discussed titration of Butrans and giving patients Butrans patient info booklet focusing on application/rotation of Butrans, dr said ok he'll see if he has any patients to start on Butrans. dr asked about insurance coverage, I talked to dr about Tri-Care, BWC and commercially insured patients. dr said he has a lot of BWC and a decent amount of Tri-Care so I told dr to focus on those patients and get some clinical experience with Butrans instead of refilling patients vicodin doses. dr agreed we talked about OxyContin being appropriate after Butrans 20mcg and I font color=blue><b>CHUDAKOB added notes on 08/12/2011</b></font>Amy, This looked like a really good call. You asked some good questions and gained some good information. Nice job!
PPLPMDL0020000001	Akron	OH	44333	8/1/2011	I explained the ideal type of Butrans patient to the Dr. Ahmad. He agreed that he had many of those patients and because it is a LA agent would be a better choice for many patients currently taking several SAOs&#8217;s each
PPLPMDL0020000001	Parma	OH	44129	8/1/2011	I reminded Jen of our lunch conversation where we talked about trying patients who were not adequately controlled on 3 5mg Vicodin per day on Butrans. She said she remembers that. I asked her what exactly she is waiting for- does she need to hear feedback from other clinicians or Dr Nickels before she will prescribe? She said that she would feel better hearing that it is working for other practitioners. I asked her if the fact that Butrans is long-acting is a benefit or a hurdle for her. She said that she thinks that ultimately, a long-acting medication would be better for this type of patient, but that a lot of it is getting the patient to buy-in to the idea of a patch. She said that patients tend to believe that they must take a pill every few hours in order to get pain relief once they have been started on short-acting medications around-the-clock. Spoke with Dawn to follow-up on our conversation at lunch about patients testing positive for buprenorphine when they do not show Butrans or Suboxone on their OARRS report. She said they will be monitoring these patients very closely to try to uncover what the patient is taking & how they are obtaining it. She said most patients are already on too high a dose of opioids. Asked her what percentage of patients fall into the 3-5 mg Vicodin per day range. She said maybe 10%, but many have Medicare or Medicaid. Asked what percentage of them have commercial insurance. She said maybe 5%.
PPLPMDL0020000001	Parma	OH	44134	8/1/2011	Dr Loyke said chronic narcotic therapy does not work for anyone. He said that he does not prescribe chronic opioids & he is very glad that the state has come up with more strict mandates on prescribing narcotics. I agreed that physicians should be cautious in prescribing opioids & added that he should be just as cautious in prescribing Butrans. He requested a copy of the full prescribing information, which I provided.
PPLPMDL0020000001	Parma	OH	44134	8/1/2011	I reminded Dr George of our previous lunch conversation when I introduced Butrans to him. He said that he remembers being excited about it & then the state came up with House Bill 93 & he "got scared" of prescribing narcotics. He said that now, if he is treating a patient with chronic opioids, he is only allowed to prescribe for 3 months for a patient before he is required to refer patients to pain management. I asked him what he goes to after NSAID's or COX-2's. He said he usually goes to Vicodin. Positioned Butrans for patients who he is either ready to start on Vicodin or for those who are not well-controlled on a low dose of Vicodin around-the-clock. He agreed that this would be a good place for it, but said again that he is reluctant to prescribe "any of them" due to the new bill. He added that he does think that Butrans has a place, but he is waiting to see how the laws roll
PPLPMDL0020000001	Fairlawn	OH	44333	8/1/2011	I explained the ideal type of Butrans patient to Dr Weidman. She agreed that she had many of those patients and because it is a LA agent would be a better choice for many patients currently taking several SAOs&#8217;s each
PPLPMDL0020000001	Mayfield Heights	OH	44124	8/2/2011	Window call....Doc said she is still getting success with butrans....she just wishes that it was covered on medical/medicare. I sympathized with her but stressed the broad commercial coverage. Gave her an invite and explained how participating can define appropriate patients.
PPLPMDL0020000001	Solon	OH	44139	8/2/2011	I reminded Dr Zaidi of our multiple previous Butrans conversations & how we have discussed how to use it, who it may be appropriate for, & who it might not be appropriate for. I asked him if he feels comfortable with the information & knows how to use it. He said yes. I asked him what is missing. He said he was missing in the month of July & was out of the country for two weeks, so he was not in the office. I reminded him of appropriate patient type (ie not on a high dose of opioids) & he agreed, saying that it was more for patients on lower doses of opioids. I asked him how frequently he sees patients like that. He said sometimes. I handed him sealed "Special Report" article. He opened the article & thanked me for the information. Mentioned OxyContin as a potential option for some of his patients who are beyond Butrans appropriate range & asked him if he uses all 7 strengths of OxyContin tablets. He said most patients are on between 20 & 60mg. He said he does have a few on 10mg & a few on 80mg, but most of them fall within the 20-60mg range.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	8/2/2011	I asked Dr. Azem how often patients are calling in complaining about their current SA therapy? How often are they asking for more of it? She said patients are calling in often complaining of both. I asked if she would feel comfortable initiating therapy to those patients and he agreed she would.
PPLPMDL0020000001	Mayfield Heights	OH	44124	8/2/2011	Quick call....asked Debbie how patients are doing on Butrans. She said that patients really like it. Now that she knows what insurances cover butrans, patients can get it an afford it. I reminded her of the weekly rotation of the patch not to be repeated in less than 21 days.
PPLPMDL0020000001	Mogadore	OH	44260	8/2/2011	Window call, Dr said he is writing and needed more savings cards but explained patient education books and giving those with other scripts and reminded of writing in commercial patients and BWC.
PPLPMDL0020000001	Lyndhurst	OH	44124	8/2/2011	Spoke to Erin about the stocking of Butrans. She confirmed that they still have it but she one has 1 or 2 patients taking it. I asked if she recalls who has written. She could not remember. I asked if she knows about the saavings cards and if customers are presenting it. She was not sure. I explained the monthly savings of up to \$40/month for commercially insured patients.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	8/2/2011	I asked Dr. DiLauro about the success patients were having with Butrans and she said she felt patients were having success for the most part. She said the based on the success rate with Butrans she would feel confident continuing to prescribe for opioid experienced patients. I reminded her that Butrans had also been studied in opioid na/rve patients.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	8/2/2011	I asked Dr. DiLauro her thoughts on Butrans therapy and how she felt about the molecule Buprenorphine. She said she liked the idea of this medication and felt comfortable with the molecule. I asked if there was anything more she felt like she needed to know before prescribing for the first time and she said no and that she would keep it in mind.
PPLPMDL0020000001	Lakewood	OH	44107	8/2/2011	Spoke with chuck, we reviewed the medication guide for Butrans and he will hand them out to patients. He said that he has seen some movement but did not know who wrote. We discussed that OxyContin is still an option when Butrans may not provide adequate analgesia and he said they still carry all strengths of OxyContin.
PPLPMDL0020000001	Westlake	OH	44145	8/2/2011	I reviewed the key messages for Butrans and asked if he has any patients coming in this week who might benefit from the 7 day dose. He said that he will keep it in mind, and in encouraged him to gain experience and see how Butrans fits into his practice. We discussed OxyContin as an option when Butrans may not provide adequate analgesia.
PPLPMDL0020000001	Westlake	OH	44145	8/2/2011	Quick call, I encouraged Dr to come to our upcoming dinner program. I asked if there was anything I can help with regarding getting Butrans on formulary and he said he will not give up and it will happen.
PPLPMDL0020000001	Westlake	OH	44145	8/2/2011	Quick call with Dr and Juan, I asked Dr if he would continue to use Butrans when patients on not well controlled on their current therapy. He said he will. Reminder about managed care for Butrans and that OxyContin is an option approved on Medicaid. Dr will not be attending our upcoming dinner programs.
PPLPMDL0020000001	Mayfield Hts	OH	44124	8/2/2011	Window call....I asked doc to try 2 new patients on butrans when he sees patients needing more than a couple of short acting tablets per day. He said he knows he has to do better. Gave him an initiation guide. Denise said they still have savings cards.
PPLPMDL0020000001	Twinsburg	OH	44087	8/2/2011	Spoke with Gay Grafiger, RPh, the Pharmacy Director for PharMerica. She said that Suzanne Sopko, the Regional Consulting Director for this area would be one of my main contacts going forward & said she would forward her contact information to me. Discussed Butrans & OxyContin & let her know about educational opportunities/in-services that Purdue can offer for their staff & facilities they serve. She said that she will be going to a Consultant's Meeting & will pass along our contact information so that we can partner in this area. Gay also said that usually Medicare Part A pays for patients' medications if they are skilled, & Part D pays if the patient is not a skilled patient. She said Medicare offers patients 100 skilled days per year.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/2/2011	I explained the message I had been focusing on in the field with my physicians and the ideal Butrans patient type utilizing the initiation and titration guide. I asked about movement and they said there had been a little but none recently.

PPLPMDL0020000001	Cuyahoga Falls	OH	44221	8/2/2011	I explained the message I had been focusing on in the field with my physicians and the ideal Butrans patient type utilizing the initiation and titration guide. I asked about movement and they said there had been a little but none recently.
PPLPMDL0020000001	Akron	OH	44310	8/2/2011	Dr. Cremer said that head prescribed Butrans for a few patients and was pleased that he had not heard back from them. I explained steady state takes 72 hours to achieve and told him if he had call backs prior to that to encourage patients to remain on therapy. He asked about titration which I explained using the initiation guide.
PPLPMDL0020000001	Cleveland	OH	44143	8/2/2011	Introduced the butrans indication and positioning. Before conducting the presentation doc expressed concern about the senate bill 93. He has a lot going on in his practice and would just as well refer to pain management. I explained that butrans is the first long acting CIII. He asked about the maximum dose....explained the 20mcg and only as a titration dose. He also asked if 2 patches could be used at a time. I told him its not recommended. I explained the savings cards and formulary coverage. He asked me to leave literature for both offices and "we'll see".
PPLPMDL0020000001	Parma	OH	44134	8/2/2011	Dr Hernandez said that his patients are getting good pain relief with Butrans, so he continues to put more patients on it. He said that he is trying to phase out insurance & become a more cash-pay practice because insurance plans are paying less & less as his costs go up & up. I reminded him of a previous conversation when he told me that he writes Butrans for one month at a time instead of writing refills. I asked him why he does this. He said that he likes to have contact with each patient once per month to see how the patient is doing & to stay "on top" of their issues. He said that helps eliminate any surprises that may come up if he went months without seeing a patient. I asked if this is his policy with all medications or just Butrans. He said it is his office policy & that he has this rule for anything he prescribes.
PPLPMDL0020000001	Munroe Falls	OH	44262	8/2/2011	I explained the ideal type of Butrans patient to the Physician. She agreed that she had many of those patients and because it is a LA agent would be a better choice for many patients currently taking several SAO's & #8217;s each day.
PPLPMDL0020000001	Lakewood	OH	44107	8/2/2011	Quick call with Shaw, we reviewed Butrans medication guide and the important things to tell the patient- steady state in 3 days, how and where to apply Butrans. Reminder that OxyContin is still an option when Butrans does not provide adequate analgesia.
PPLPMDL0020000001	Parma	OH	44129	8/2/2011	Reminded Dr Roheny of our previous Butrans conversation when he told me that he has many patients taking 2-3 Vicodin or tramadol per day who call too soon for refills or say their medication is wearing off too quickly. I also reminded him that he said that 3/4 of them have Medicare or Medicaid. I asked him what we can do to make him remember Butrans for the other 1/4. He asked me if those patients could use the coupons to help them save \$25 per month. I told him the savings cards take \$40 off the co-pay, bringing most commercial insurance patients to a \$15 co-pay. I asked him if he felt that \$15 was reasonable & he said yes. He asked if Butrans was for acute pain like Nucynta. I told him Butrans is indicated for moderate to severe chronic pain. He said the Nucynta rep told him that Nucynta is not abusable & "has no street value". I told him I could only speak to Butrans & that Butrans is an opioid & therefore does have abuse/addiction potential & is CIII. He said that by my next visit, which he imagines will be by Friday, he might be able to find a patient or two to try on Butrans.
PPLPMDL0020000001	Akron	OH	44319	8/2/2011	Dr. Wu said that he had initiated therapy to a Butrans patient but still felt unsure about how to identify a patient. I explained that the most ideal patients were those currently failing on their low dose SAO's and he agreed this would be an easy population to hone in on. I also covered managed care.
PPLPMDL0020000001	Stow	OH	44224	8/2/2011	Spoke with Marcy in prescriptions and she said Dr Yang and Dr Bressi are writing Butrans and they are not going through. I asked if they are medicare and they said yes. I reiterated managed care coverage in commercial and BWC coverage. she said she will remind them. I let her know about speaker program as well as online details that the Drs and the NPs can take advantage of. She said she will work on reminding them.
PPLPMDL0020000001	Parma	OH	44129	8/3/2011	Dr Gigliotti told me that he really needs to try "my stuff". I asked him what he meant. He said that he needs to put some patients on Butrans. I agreed that he probably sees a lot of patients who may be appropriate candidates for Butrans. Spent time going over various types of appropriate patient types, focusing on moderate pain & discussing OxyContin for those on the more severe side. I mentioned patients who take 2-3 Vicodin per day chronically, who are calling too soon for refills. He pulled out an initiation guide from the middle of a stack of magazines & papers on his desk. I told him I was impressed that he knew exactly where it was in the pile. He said he really has been thinking of it. I asked him to turn to page 6 & referred back to the patient on low-dose Vicodin calling too soon for refills & showed him that he could start that patient on 5mcg, the lowest starting dose & could titrate, if necessary, after the 3rd day. Also reminded him that the patient could keep supplemental analgesia on board. He asked me to remind him about insurance coverage. Reviewed Butrans formulary grid & discussed savings cards, letting him know that Jaz is aware of the cards & how to instruct patients how to use them. I asked Dr Gigliotti if he thought it was fair of me to ask him to identify one or two patients like we talked about with commercial insurance to switch to Butrans. He said he thinks "this is the week" for him to do just that. Let him know I'd be following up for feedback.
PPLPMDL0020000001	Westlake	OH	44145	8/3/2011	Met Dr and introduction. I reviewed the key messages for Butrans and asked Dr his thoughts. He said that he does like the 7 day dosing, but many of his patients come into him already "loaded" up on opioids. We reviewed the appropriate patients for Butrans and asked Dr if he would prescribe Butrans after tramadol or instead of increasing their hydrocodone. We reviewed managed care and the savings cards for Butrans. Dr said that he independently reviews patient cases for BWC.
PPLPMDL0020000001	Independence	OH	44131	8/3/2011	Spoke with Shelly, a floater pharmacist, who said that she had heard of Butrans & knew it was a transdermal narcotic, but has never seen a prescription for it. I reviewed with her the appropriate patient type, including patients who take Vicodin chronically around-the-clock. Also discussed automatic savings via e-voucher. Reviewed with her that Butrans is CIII & still carries abuse/addiction potential. She said she thought it was CII.
PPLPMDL0020000001	Akron	OH	44304	8/3/2011	I asked Dr. Amambun his thoughts on Butrans therapy and how he felt about the molecule Buprenorphine. He said he liked the idea of this medication and felt comfortable with the molecule. I asked if there was anything more he felt like he needed to know before prescribing for the first time and he said no and that he would keep it in mind.
PPLPMDL0020000001	Akron	OH	44320	8/3/2011	I asked Misty about the success patients were having with Butrans and she said she felt patients were having success for the most part. She said the based on the success rate with Butrans she would feel confident continuing to prescribe for opioid experienced patients. I reminded her that Butrans had also been studied in opioid naïve patients.
PPLPMDL0020000001	University Hts	OH	44118	8/3/2011	Window call....reviewed the Butrans patient indication, positioning, and CIII status and 7 day delivery. Gave him an initiation guide and an invite to the edetail. Nothing learned.
PPLPMDL0020000001	Warrensville Heights	OH	44122	8/3/2011	Spoke with Jaz (MA) & reminded her of our discussion at breakfast about patients taking low-dose Vicodin chronically who call her too soon for refills & how we discussed them as possible Butrans candidates. She said she had forgotten but thanked me for reminding her. She said she will try to make a note for herself to serve as a reminder by her phone so that she can help Dr Brooks in identifying Butrans patients. Also reviewed Butrans & OxyContin savings cards. She said she did not need any more of either.
PPLPMDL0020000001	South Euclid	OH	44121	8/3/2011	Window call....Briefly reviewed the butrans indication. CIII status, 7 day delivery. Gave her a formulary grid reminder and e-detail invite. Nothing learned.
PPLPMDL0020000001	Akron	OH	44312	8/3/2011	I asked Dr. Kile if he felt there was truly a place for Butrans in his practice and if he could see himself prescribing Butrans moving forward. He said yes. No new info learned.
PPLPMDL0020000001	Bedford	OH	44146	8/3/2011	Quick call- Dr Moufawad said that he is just too far behind today to stop. He said that everything with Butrans is "fine" & he is still prescribing. He said he is looking forward to the Webcast tomorrow evening & said he will tell me about it next week. Spoke with Melina & reviewed Butrans patient type & savings information as well as OxyContin savings cards.
PPLPMDL0020000001	Independence	OH	44131	8/3/2011	Dr Jack started to walk by me & said "I know, you're here to remind me about Butrans." I told him I actually wanted to ask him his thoughts on something & showed him pg 11 of the main visual aid. I asked him to look at the inclusion criteria & asked him how frequently he sees patients with pain caused from these conditions. He pointed to each one, telling me that he sees each of them "all the time" & said he even had a patient just leave who had spinal stenosis. He started to walk away & said "You will get me to do it sooner or later, I just get stuck in my old habits" & then walked into a room. OxyContin savings cards reminder.
PPLPMDL0020000001	Westlake	OH	44145	8/3/2011	Spoke with Marlene (3rd fl). We reviewed the key messages, the initiation guide, demo for Butrans. She does see a benefit in having Butrans available in the hospital and she would like to have me do some in-services with the nursing staff for her floor in September when the new construction is done. She found the in-services regarding OxyContin and the conversion guide helpful.
PPLPMDL0020000001	South Euclid	OH	44121	8/3/2011	Window call....Reviewed doc of the butrans indication/positioning and the formulary coverage. Gave him a butrans e-detail invite. Nothing learned. Asked Lisa, the MA, if she was aware of doc's interest or use of Butrans. She said she did not but that he does like to try different things.
PPLPMDL0020000001	Akron	OH	44320	8/3/2011	I explained the message I had been focusing on in the field with my physicians and the ideal Butrans patient type utilizing the initiation and titration guide. I asked about movement and they said there had been a little but none recently.
PPLPMDL0020000001	Fairlawn	OH	44333	8/3/2011	Dr. Parisi said that head prescribed Butrans for a few patients and was pleased that he had not heard back from them. I explained steady state takes 72 hours to achieve and told him if he had call backs prior to that to encourage patients to remain on therapy. He asked about titration which I explained using the initiation guide.
PPLPMDL0020000001	Akron	OH	44320	8/3/2011	I explained the ideal type of Butrans patient to Dr Duppsandt. She agreed that she had many of those patients and because it is a LA agent would be a better choice for many patients currently taking several SAO's & #8217;s each day.
PPLPMDL0020000001	Parma	OH	44134	8/3/2011	Spoke with Allene (pharmacist) who said they were especially busy over the last couple of days due to it being the beginning of a new month. I asked her if this is due to Medicaid & she said yes. I asked her how much of her population there was Medicare or Medicaid. She said a vast majority, perhaps 70% of her customers are Medicare or Medicaid. She said probably roughly 30% do have commercial insurance. She also let me know that she noticed Butrans on an order recently. She said she was not sure who had prescribed it, but she knows they did have one. Reviewed automatic savings for their customers, if eligible, due to e-voucher & offered OxyContin savings cards. She said that the one customer they had on OxyContin recently was switched to Opana ER per his own request. I asked her why. She said the customer claimed that OxyContin was no longer working for him & he asked his doctor to switch him to Opana ER instead. Allene added that she cannot tell if the customer is lying or not.
PPLPMDL0020000001	University Heights	OH	44121	8/3/2011	Quick call....reminded doc to think of Butrans for tramadol failures or former darvocet patients. I asked him to try for a BWC patients as Butrans is being covered. I gave him a formulary grid showing the covered plans.
PPLPMDL0020000001	Independence	OH	44131	8/3/2011	Oxycontin coverage reminder and provided e-detail invite.
PPLPMDL0020000001	Independence	OH	44131	8/3/2011	Quick call- Dr Rob said he didn't have time to stop today. I handed him an E-Detail invitation & told him it would be a good opportunity for him to gain additional Butrans information. He said he didn't have time to hear about it & went into a room. Spoke with MA Amanda & reviewed Butrans dosing & delivery system. Also discussed savings cards.
PPLPMDL0020000001	Akron	OH	44310	8/3/2011	Dr. Schukay said that he had initiated therapy to a Butrans patient but still felt unsure about how to identify a patient. I explained that the most ideal patients were those currently failing on their low dose SAO's and he agreed this would be an easy population to hone in on. I also covered managed care.
PPLPMDL0020000001	Independence	OH	44131	8/3/2011	Caught Dr Trickett at the window. She said that she has actually put 2 patients on Butrans since she saw me last. I asked her to tell me more about the patients but she said she didn't have time today. She said that she has not gotten any feedback yet, but Butrans is in her mind & she will probably start prescribing more once she starts getting some patient feedback. Spoke with Steve & asked him to check her stock on savings cards for Butrans & OxyContin. Discussed eligibility requirements & asked him to try to keep an eye out & give out savings cards if Dr Trickett forgets. He agreed. He also ran through Dr Trickett's upcoming schedule with me to try to help me find days when she might have more time to discuss Butrans.
PPLPMDL0020000001	Cleveland Heights	OH	44118	8/4/2011	I reminded doc that of his expressed interest in Butrans. I reminded him of the appropriate patient. He said he has not started anybody yet but he is going to. I reminded him to give patients a savings card.
PPLPMDL0020000001	Shaker Heights	OH	44122	8/4/2011	Spoke with Doug, a new pharmacist at this location. Introduced Butrans to him as he had never heard of it. Delivered 5 core messages & let him know about favorable commercial insurance coverage. Discussed appropriate patient type, including those on low-dose Vicodin around-the-clock chronically who call too soon for refills. I asked what his thoughts were about Butrans after hearing the overview. He said he feels that if a patient is truly committed to getting pain relief, they would be willing to try a switch to Butrans. He said that some "like the flavor" of Vicodin. I alerted Doug to the fact that Butrans is a CIII opioid with abuse & addiction potential so I caution prescribers to be just as careful when prescribing Butrans as they would be with any other opioid. Reviewed OxyContin savings cards.
PPLPMDL0020000001	Barberton	OH	44203	8/4/2011	I asked Dr. Kim his thoughts on Butrans therapy and how he felt about the molecule Buprenorphine. He said he liked the idea of this medication and felt comfortable with the molecule. I asked if there was anything more he felt like he needed to know before prescribing for the first time and he said no and that he would keep it in mind.
PPLPMDL0020000001	Euclid	OH	44117	8/4/2011	Quick call....I asked doc if he ever consulted with Dr. Moufawad as he said he would. He said that he did talk to him about butrans. He said that Moufawad is not using butrans much but he has a better idea where to prescribe butrans. I gave him an e-detail invite and explained that it might provide further direction on where to prescribe butrans. He said he would look at it.

PPLPMDL0020000001	Sagamore Hills	OH	44067	8/4/2011	Dr Gemma came back to lunch & said she could not stay to talk today. Reviewed Butrans indication, dosing, delivery system & appropriate patient type. She asked me to leave information for her so that she could look at it later & said she will try to start using Butrans.
	Northfield	OH	44067	8/4/2011	Spoke with Donna, MA. Reviewed Butrans indication, delivery system, & appropriate patient type. She asked about managed care coverage, so I went over formulary grids for Butrans as well as OxyContin. Dr Sevier asked me to leave information about Butrans for Dr Lango because he said she sees a lot of patients who may be appropriate for Butrans. He said that recently, she was out on vacation & he covered for her. He said during this time, he got many calls from patients on Vicodin requesting refills too soon. Dr Sevier said that he thinks Dr Lango would be very interested in Butrans for those patients.
PPLPMDL0020000001	Barberton	OH	44203	8/4/2011	Dr. Patel said that he has continued to initiate Butrans therapy to appropriate patients. He said that when he talks with certain patients they prefer oral medications. I asked if he always lets the patients choose their medications and he said he just didn't want of complaints and call backs.
PPLPMDL0020000001	Garfield Hts	OH	44125	8/4/2011	Deena (MA) said that Dr Sadowski is on vacation this week. I asked her what her thoughts were on how I could get him to try Butrans on a few appropriate patients. She said she can think of several patients who could benefit from a once weekly transdermal system instead of their current around-the-clock regimen of oral pain medications. Reviewed with her the appropriate patient type & dosing as well as managed care. I stressed commercial insurance coverage. I asked Deena if she would ask Dr Sadowski directly to switch appropriate patients who she gets calls from asking for refills too soon or asking for increases in dose to Butrans instead of increasing their dose or dosing interval. She agreed to do this & said she will start thinking of patients to ask him about when he returns from vacation.
PPLPMDL0020000001	Independence	OH	44131	8/4/2011	Spoke with MA Jill who said Dr Pais was way too busy today to talk to me. Reviewed with her Butrans online interactive program & asked her to share the information & give the invite to Dr Pai. She agreed. Discussed Butrans appropriate patient type & stressed commercial insurance. She said she would pass it along to Dr Pai. Also discussed OxyContin savings cards & reminded her about commercial insurance or cash paying patients eligibility.
PPLPMDL0020000001	Sagamore Hills	OH	44067	8/4/2011	Introduced myself to Penny, the new NP at Nordonia Hills Clinic. Introduced Butrans, delivering 5 core messages & alerting her to box warning, CIII, & abuse/addiction potential. She said it was nice to have the option of something long-acting to treat patients who she would normally have to have on something short-acting like Vicodin or tramadol. Discussed appropriate patient type, including those with moderate to severe chronic pain who take short-acting opioids around-the-clock, calling too soon for refills or asking for an increase in dose. She said she would keep this in mind as she sees patients who fit the indication.
PPLPMDL0020000001	Independence	OH	44131	8/4/2011	Spoke with MA Kathi who asked me to remind her what Butrans is & who it is for. Reviewed with her dosing, delivery system, indication. Also spent time going over appropriate patient type, including those who are calling her too soon asking for Vicodin or tramadol refills or who say it is not lasting long enough. Discussed them as possible candidates for Butrans. She asked me about insurance coverage. I stressed commercial insurance plans. She said she would give Dr Reddy the invite & information I left & that she would remind him for me. Also discussed OxyContin formulary grid.
PPLPMDL0020000001	Mayfield Heights	OH	44124	8/4/2011	Spoke to Aaron, tech, about the stocking and movement of butrans. He confirmed stocking and that he has only seen a couple of scripts over the past couple of months. I explained the savings cards program and he did recall that patients came in with savings cards. He asked for extra cards in case customers did not have them. Told him that they can go online to print them out. I reviewed the proper application and disposal of butrans for best
PPLPMDL0020000001	Cleveland Hts	OH	44118	8/4/2011	Quick call....I reminded doc that he said he might use Butrans for patients that can not tolerate hydrocodone. I asked if he has had an opportunity to do so yet. He said no and asked about the dosing again. I explained 5mcg for opioid naive patients, 10mcg for those patients already on a low dose of a short acting. Nothing else learned.
PPLPMDL0020000001	Mayfield Heights	OH	44124	8/4/2011	Spoke to Warren about the movement of Butrans. He said he has not seen too many scripts - he does have a couple of patients that have been taking it. I explained to him about the proper application for the best results. I also explained the eligibility and discounts with the savings cards. I asked him about the oxycontin volume. He said he still has regular patients on oxycontin has not had any issues.
PPLPMDL0020000001	Mayfield Heights	OH	44124	8/4/2011	Spoke to Denise about Butrans and asked if she was familiar with doc's prescribing on a daily basis. She said she does not really see what he writes until there is an issue. I reviewed the butrans patients type and she was not aware if he had prescribed it yet. Doc is on vacation until the week of 8/15.
PPLPMDL0020000001	Mayfield Heights	OH	44124	8/4/2011	Spoke to Marsha about the butrans indication and positioning. She said they did receive an initial shipment but sent it back when they did not get a script. I explained the savings card program, dosing, and proper
PPLPMDL0020000001	Barberton	OH	44203	8/4/2011	I asked Dr. Minich if she felt there was truly a place for Butrans in her practice. She said she thought there was a place for it but still did not feel entirely comfortable prescribing it. I asked what more she felt like she needed to know before prescribing it and she said she would review the FPI.
PPLPMDL0020000001	Euclid	OH	44119	8/4/2011	Conducted the Butrans RM presentation. Asked doc which patient type he mostly sees. he said he sees them all. He said it was helpful at describing the patient type. He asked about the side effects and the difference from fentanyl. I referred to the AE section of the sales aid and showed the incidence of nausea, dizziness, headache, application site pruritis. I explained that there is no head to head data with fentanyl but butrans can be used as a first line opioid, is 7 days delivery, and is a CIII. He asked about coverage - medicaid & BWC. Told him no medicaid coverage but BWC is covering. Savings cards discussed. Oxycontin patient type after Butrans max dose, formulary coverage reminder.
PPLPMDL0020000001	Mayfield Heights	OH	44124	8/4/2011	I reviewed the butrans indication and positioning and asked doc if she has any patients that might be appropriate candidates for butrans. She said probably, she just has not used it yet. She asked about the various available doses. I explained the 5mcg for opioid naive or low dose short acting and 10mcg for those taking higher than 15mg of a morphine equivalent. I told her that 20mcg is only a titration dose. I asked her to participate in the e-detail. Reminded her of the formulary coverage for butrans as well as oxycontin.
PPLPMDL0020000001	Sagamore Hills	OH	44067	8/4/2011	Opened call by explaining Initiations program & letting him know it may assist him identifying who is & who is not a Butrans candidate with specific case studies. I asked him to participate. He agreed. Spent time going through different patient types & case studies. During the patient profile that the patient was on too high a dose of opioids to be a candidate for Butrans, I asked him if he would consider OxyContin q12h for that type of patient & he said that was the type of patient he typically does think of for OxyContin (on multiple opioids, several times per day). When I asked him what dose of Butrans he would start each patient on, it was apparent that he was clear on what dose to start patients on. Discussed titration ability after 3 days. Dr Sevier asked if, for the patient taking 400mg tramadol per day, he could initiate treatment with Butrans but still allow the to take tramadol as needed for breakthrough. I told him patients can take opioid or non-opioid medications as supplemental analgesia. Asked him about the various conditions that were presented in the profiles & he agreed that these are the types of conditions he treats daily. He said he has one patient in particular who he wanted to start on Butrans but the patient had just filled a 90 day Rx for her short-acting, so she asked him if she could start it after those ran out. He said he is ready to start putting patients on Butrans & wants to gain clinical experience.
PPLPMDL0020000001	Cleveland	OH	44125	8/4/2011	Spoke with technician who said that the pharmacist was busy working with the regional director of pharmacy & would not be able to see me today. She said she is not aware of any Butrans activity. Discussed automatic savings through e-voucher as well as savings cards available for Butrans & OxyContin. Reminded her that they cannot be used for any type of government insurance. I asked her to leave the pharmacist my information & card & she agreed to give it to her.
PPLPMDL0020000001	Cleveland	OH	44111	8/5/2011	We reviewed the key messages, invitation guide and managed care for Butrans. She has not had a chance to prescribe yet, as she has been working a lot in the hospitals, but she does see a benefit in the 7 day dosing. I asked if she would give it a try or recommend it to the Drs and she agreed. We reviewed OxyContin as an option when Butrans may not provide adequate analgesia. Invited her to our upcoming dinner discussion.
PPLPMDL0020000001	Middleburg Heights	OH	44130	8/5/2011	Spoke with Tracey (MA) who said that Dr Saboori was on vacation this week. I told her about Butrans (indication, usage, delivery system, positioning) & asked her if it would be possible to get an appointment to see him. She said that sometimes he will see reps without a lunch & asked what information I could leave that she could present to him to request an appointment. Gave her my card & FPI. She said Butrans sounded like something he would be interested in & that she would let me know what she can find out. She also said sometimes Wendy from Siedman Cancer Institute located in the hospital building books lunches for Dr Saboori's office as well.
PPLPMDL0020000001	Lyndhurst	OH	44124	8/5/2011	Conducted the initiations presentation with Dr. Reed, Karen Steffey, and Patricia Moran. They agreed that they can identify with some of the case study patients but they do not treat back pain (its a migraine center). Doc correctly identified those that were appropriate and those not appropriate for Butrans. She correctly answered the dosing for those patients. Patricia thought that a patient on tramadol would be considered opioid naive. I explained the positioning - after tramadol or ryzolt or before starting on vicodin or a low dose of oxycontin. Doc said that the problem is the insurance because she has a lot of elderly patients that have medicare that would be perfect but butrans is not covered for them. I reviewed the proper application sites for butrans and the savings cards program. Karen and Patricia agreed that the presentation helped clarify the right patient.
	Cleveland	OH	44130	8/5/2011	Patricia asked if Butrans could be called in. I confirmed that it could and could also be refilled. Doc said she just needs patients with the right coverage. She said she has prescribed with refills and has not heard back from those patients so she assumes everything is fine.
PPLPMDL0020000001	Cleveland	OH	44130	8/5/2011	Opened call by asking Dr Diab if I could ask him a question about his patient population & the conditions he treats as a rheumatologist. He said yes. I showed him the inclusion criteria for Butrans studied & asked him if he treats these conditions regularly. He said yes. I asked if the patients with these disease states usually have pain. I asked him to describe for me how the treatment process for that pain goes. He said they start on NSAID's or COX-2's & then he would prescribe tramadol or Vicodin if the NSAID's/COX-2's were not controlling their pain. I pointed out to him that this is the type of patient who we studied Butrans for efficacy in. I asked him how his patients on Butrans are doing & he said he really hasn't had much clinical feedback lately & the only "feedback" he hears is managed care not covering it. I told him I was surprised to hear that with the commercial insurance coverage as favorable as it is & asked if it has been Medicare/Medicaid that he has gotten pushback from. He said he doesn't know & that it will "take time" & then he walked away. Spoke with Barb (nurse) & Dina (MA) & reviewed Butrans delivery system, appropriate patient type, & savings cards. They both said that they have not heard any feedback at all from patients about Butrans & knew of no managed care problems.
PPLPMDL0020000001	Cleveland	OH	44130	8/5/2011	Spoke with technician who said no pharmacist was available. Discussed Butrans savings via e-voucher or savings card & also OxyContin savings cards. Also reviewed with her eligibility requirements & reminded her that they cannot be used for any type of government insurance plans. She said she would pass this information along to Ron & Dave.
PPLPMDL0020000001	Cleveland	OH	44130	8/5/2011	Quick call- Dr Fedorok said he was having a horrible day & did not have time today. I handed him E-Detail invite & told him that it might cheer him up to go online to participate in the Butrans program. I also let him know that we could explore one together at an upcoming lunch. Discussed Butrans managed care with Mindy, focusing on commercial insurance. She said she has not had any issues thus far.
PPLPMDL0020000001	Cleveland	OH	44121	8/5/2011	Window call...I reminded doc of the butrans patient type/positioning. I asked him if he has any patients that could benefit from a long acting CIII delivered on 7 days. He said maybe. I gave him an e-detail invite and asked him to participate. No commitment.
PPLPMDL0020000001	Independence	OH	44131	8/5/2011	Confirmed with Roman that he & Lisa will be attending the program in Westlake next Wednesday. He said that this will help him because even though they have had one successful Butrans patient, he feels like the others that he tried were not successful because he thinks he "under-medicated" them. He said that he wants to go to the program so that he can learn about what patients can take for breakthrough & what dose to give. I reminded Roman that I can provide that information to him myself but he said it is more assuring coming from a specialist or someone with personal prescribing experience. I told him I understand & that I hope the program clears that up for him but I also let him know that patients can take supplemental analgesia in the form of immediate release opioids or non-opioids. I also discussed OxyContin 7 tablet strengths & asked if he needed more savings cards.
PPLPMDL0020000001	Lyndhurst	OH	44124	8/5/2011	He said he did need more cards so I gave him a pack. Quick call....I reviewed the butrans indication and the positioning after non-opioids or low dose short acting and before ATC therapies. I asked him if he has any patients like that. He said they are already on too many meds. I asked him for consider butrans for its once weekly dosing in a CIII.<font color=blue><b></b></font>CHUDAKOB's query on 08/12/2011<b></b></font>-Perhaps you might think about discussing disease states rather than switches. What do you mean "before ATC therapy." Butrans is ATC therapy. Please clarify.<font color=green><b></b></font>SIMERTOC's response on 08/17/2011<b></b></font>-Before ATC therapy with short acting opioids dosed frequently.<font color=blue><b></b></font>CHUDAKOB added notes on 08/18/2011<b></b></font>-Thanks for the clarification.
PPLPMDL0020000001	Mayfield Hts	OH	44124	8/5/2011	I asked doc if he has any patients that could benefit from a CIII opioid for ATC moderate to severe pain delivery in a once weekly dose. He said "butrans, right?" Told him yes and that patients can take supplemental analgesics if necessary. I asked him to try for his BWC patients. He said ok.
PPLPMDL0020000001	Lakewood	OH	44107	8/5/2011	I asked Dr if he could think of an other patients who might benefit from 7 day Butrans. He said that he will continue to think of Butrans as an option. I reviewed managed care for Butrans and reminder that OxyContin is an option that is covered by Medicaid.
PPLPMDL0020000001	Cleveland	OH	44130	8/5/2011	Spoke with pharmacist Dawn & reviewed Butrans savings information & gave her the lever giving information about Butrans.com & printing savings cards. She said she still has not ordered it. Discussed managed care coverage & also reviewed OxyContin savings cards. She said she has plenty.

PPLPMDL0020000001	Beachwood	OH	44122	8/5/2011	Spoke with Yvonne (MA) & Tom (RN) who said Dr Tabbaa was in a meeting & couldn't see me today. They said that I should come back next Wednesday to try to see Dr Tabbaa or his new resident who has been helping out in Jim's absence. I reminded Yvonne of Butrans & OxyContin savings cards & asked if Dr Tabbaa needed any additional cards. She said the cabinet was locked so she cannot check their supply. I asked if either of them had heard any patient feedback about Butrans but neither of them had. Discussed transdermal delivery system.
	Lyndhurst	OH	44124	8/5/2011	Conducted the initiations presentation with Dr. Reed, Karen Steffey, and Patricia Moran. They agreed that they can identify with some of the case study patients but they do not treat back pain (its a migraine center). Doc correctly identified those that were appropriate and those not appropriate for butrans. She correctly answered the dosing for those patients. Patricia thought that a patient on tramadol would be considered opioid naive. I explained the positioning - after tramadol or ryolt and before starting on vicodin or a low dose of oxycodone. Doc said that the problem is the insurance because she has a lot of elderly patients that have medicare that would be perfect but butrans is not covered for them. I reviewed the proper application sites for butrans and the savings cards program. Karen and Patricia agreed that the presentation helped clarify the right patient. Patricia asked if Butrans could be called in. I confirmed that it could and could also be refilled. Doc said she just needs patients with the right coverage. She said she has prescribed with refills.
PPLPMDL0020000001	Lyndhurst	OH	44124	8/5/2011	Conducted the initiations presentation with Dr. Reed, Karen Steffey, and Patricia Moran. They agreed that they can identify with some of the case study patients but they do not treat back pain (its a migraine center). Doc correctly identified those that were appropriate and those not appropriate for butrans. She correctly answered the dosing for those patients. Patricia thought that a patient on tramadol would be considered opioid naive. I explained the positioning - after tramadol or ryolt and before starting on vicodin or a low dose of oxycodone. Doc said that the problem is the insurance because she has a lot of elderly patients that have medicare that would be perfect but butrans is not covered for them. I reviewed the proper application sites for butrans and the savings cards program. Karen and Patricia agreed that the presentation helped clarify the right patient. Patricia asked if Butrans could be called in. I confirmed that it could and could also be refilled. Doc said she just needs patients with the right coverage. She said she has prescribed with refills.
PPLPMDL0020000001	Maple Heights	OH	44137	8/5/2011	Reminded Dr Yager of our previous conversations about Butrans & told him I wanted to further discuss his patients who are suffering from conditions that are chronic & cause pain & his treatment algorithm for that pain. He agreed. I told him I realize he does not like to prescribe a lot of opioids, so during this discussion I asked him to focus only on those who were in legitimate pain & who were committed to getting rid of pain. He said he usually refers to pain management for chronic narcotics. I asked what the difference is between a patient he refers vs one who he maintains in his office. He said if they are not well-controlled on tramadol or keep asking for increases in medication, he refers. I asked him to take a look at the inclusion criteria on pg 11 of core visual aid & asked him if he treats patients who have conditions such as osteoarthritis, spondylolysis & spinal stenosis. He said yes. I asked him what his treatment typically is for the pain associated with those conditions. He said NSAID's/COX-2's & then tramadol. He said if someone needs something "more" than that, he would probably send them to pain management. I asked him to elaborate. He said if they need something scheduled more than Vicodin, he would refer. He asked if patients could take tramadol with Butrans. Showed FPI 2.4. Also reviewed side effects. He said none of them surprised him. Also discussed titration & dosing. He said he will keep it in mind. OxyContin 7 tablet strength reminder.
PPLPMDL0020000001	Macedonia	OH	44056	8/5/2011	Reminded Dr Sherigo of our previous Butrans conversations. I asked her to look at the inclusion criteria for Butrans studies & asked if those were conditions she treats. She said yes. I asked how she usually manages the pain associated with those conditions. She said that after NSAID's or COX-2's she usually prescribes tramadol. I asked her what she does if the patient says it is not working. She said either Vicodin or she refers to pain management. I asked how she determines who goes to pain management & who she keeps in her office. She said it depends on the patient. Reviewed Butrans indication, dosing, CIII, abuse/addiction potential. She asked about adverse events. Showed main visual aid AE section & asked if anything surprised her. She said she was a little surprised to see the peripheral edema rates & they seemed a little high. I asked if that was of concern to her & she said no. She asked about application, rotation, steady state, & supplemental analgesia. Used initiation/titration guide to show sites & discussed steady state in 3 days. I told her that while she may not have a huge place for Butrans in her practice, it is important to know about medications in case patients come to her already on them. She agreed & said that she actually just had a patient come to her who is on Butrans from another provider. I asked what the patient said about the analgesia she gets. She said the patient said she feels great & that she will keep Butrans in mind.
PPLPMDL0020000001	Cleveland	OH	44111	8/5/2011	We reviewed the key messages and the invitation guide for Butrans. He said he has not tried it yet but does think it will have a place in his practice. He is now working with the oncology dept across the street as their pain management Dr and he thinks that it may have a place over there too. We discussed OxyContin as an option and he said he does prescribe OxyContin mostly for cancer patients and older patients. We reviewed the managed care for Butrans and OxyContin. I asked Dr to come to our upcoming dinner discussions and he may be able to make the Cleveland dinner.
PPLPMDL0020000001	University Heights	OH	44121	8/5/2011	I opened the call discussing the Butrans indication, CIII status and 7 day delivery. He asked how it compares to fentanyl. I explained no head to head data, Butrans can be a first line opioid, and butrans is 7 days. He studied the initiation guide and the dosing equivalent. He said that 80mg of oxycodone/oxycodone would not be appropriate for butrans. He asked if Butrans is more for mild to moderate. I told him technically, mod to severe. I explained the positioning and asked him if he has patients appropriate for butrans. He said maybe if there are patients that dont want to take pills. I asked him to participate in the e-detail to learn more about the product.
PPLPMDL0020000001	Northfield	OH	44067	8/8/2011	Spoke with pharmacist Sun Ji who said that she thinks they are stocking Butrans. I asked her if she could check to confirm but she said she was already behind this morning & couldn't take the time. Reviewed savings program & e-voucher. Also discussed OxyContin savings cards, use, & eligibility requirements, including that they cannot be used for any type of government insurance.
PPLPMDL0020000001	Parma	OH	44129	8/8/2011	Spoke with nurse, Lynn, & reminded her of the Butrans meeting/conversation I had with Dr Gallagher two weeks ago. She said that he has not "found a use for it yet". I reviewed appropriate patient type/positioning with her. She said she would remind Dr Gallagher. I also asked her to give him the REMS packet for Butrans & she agreed. Discussed savings cards for Butrans & OxyContin & let her know I would return to follow-up on his Butrans showed dr Butrans visual aid, 5 core messages and asked dr what really stood out to him about Butrans? dr said transdermal delivery and once weekly dosing. dr said he doesn't prescribe new drugs right away. I asked dr how long is a fair amount of time for him to wait before prescribing Butrans? dr said he didn't have an answer for me on that. showed dr appropriate patients page, butrans visual aid, asked if he had any patients with chronic pain, taking tramadol daily but not controlled? dr said he does see those patients. I asked dr if he could start a couple patients on Butrans instead of refilling their tramadol? dr said he might consider it for a couple patients that he's not comfortable giving them anymore tramadol or converting to another narcotic. I talked to dr about initiation of Butrans, showed initiation guide and asked dr to focus on anthem BCBS and BWC patients, discussed patient savings cards for commercial plan patients, dr said ok. I recommended senokot-S.
PPLPMDL0020000001	Beachwood	OH	44122	8/8/2011	Quick call with Dr Warren as he only came up to the window for a moment. Positioned Butrans for patients calling too soon for refills of chronic low-dose opioids or who are saying their medication is wearing off too quickly. He waved & thanked me. Spoke with Peggy (MA) & Donnie (nurse) & reviewed Butrans appropriate patient type. Donnie said he does not know why Dr Warren has not tried anyone on Butrans as he does have patients who seem to fit the indication. I asked him to mention Butrans to Dr Warren if he gets a call from someone who he thinks could benefit from Butrans & he agreed.
PPLPMDL0020000001	Parma	OH	44129	8/8/2011	Spoke with Linda (nurse) & Donna & introduced myself & Butrans. Discussed indication, usage, dosing, delivery system, & appropriate patient type. I asked Linda to give Dr Laluk a Butrans FPI & initiation/titration guide. She said she would but that he would probably throw it away. I asked her to please ask him to take a look at it as he may not have heard of it yet & he may have patients who come to see him already on it. She said she would try. Scheduled next available lunch in December. Asked about a short 5 minute appointment, just to introduce Butrans to him, but Linda said he would not do this.
PPLPMDL0020000001	Cleveland	OH	44195	8/8/2011	talked to dr about his patients taking vicodin, daily, for their chronic pain, yet asking him for something else as their pain isn't controlled. dr said he has a lot of those patients, I showed dr butrans visual aid, discussed appropriate patients and asked dr to focus on a couple of these patients to start on Butrans instead of refilling their vicodin or converting to percocet, dr said he could consider that he just hasn't thought of Butrans lately. I asked dr what really stood out to him about Butrans, looking at 5 Butrans core selling messages? dr said transdermal delivery and once weekly dosing. dr asked if Butrans was a CII? told dr Butrans was a CIII, showed that information in Butrans fpi black box warning and 5 core selling messages. told dr to focus on Medco and BWC patients to start on Butrans, dr said ok he will and told me to make an appointment with his NP, Mai, because she sees the majority of doctors patients. I told dr I have requested an appointment with her a few times, but no response but will try again. dr said ok. I recommended senokot-S.
PPLPMDL0020000001	Bedford	OH	44146	8/8/2011	Oleg (pharmacist/pharmacy manager) said he really did not have time today but said he would give me a couple minutes. He said that Butrans has still been "quiet" with only seeing the one script that did not get filled due to the office not doing the prior authorization. I asked if he knew who wrote the prescription n8 he said it was Dr Moufawad. He said that OxyContin is moving, but that he has seen some switches to Opana ER, although he added that those may have been inappropriate patients in the first place. Discussed importance of appropriate patient selection & agreed that caution should be exercised with all opioids.
PPLPMDL0020000001	Lakewood	OH	44107	8/8/2011	I reviewed the appropriate patient types for Butrans and asked Dr if he had a few patients this week to start Butrans on. He said he will but he was concerned about managed care and we reviewed commercial insurance. We discussed OxyContin is still an option that is covered on Medicaid and Medicare. I asked Dr to come to our upcoming dinner discussions.
PPLPMDL0020000001	Cleveland	OH	44102	8/8/2011	I talked to Pat, Pharmacy Tech and Gurjeet, Floater Pharmacist, as Vicki, Pharmacy Manager was off work today, about Butrans stocking. 5 core selling messages and both Pat and Gurjeet said they like that Butrans is a patch and dosed once a week but they haven't seen any scripts for Butrans recently. Pat said they had 1 box of Butrans 5mg in stock and a patient filled their script for that box and that was it, nothing ever since. both Pat and Gurjeet said I have to speak with Vicki, about ordering Butrans because until they see another script for Butrans they don't want to order it and have it sit on shelf. we discussed importance of stocking and I asked if they ever see patients that are taking short-acting opioids but not controlled and tell them that? Pat and Gurjeet said they do hear that occasionally from patients. I showed appropriate patients section in Butrans visual aid and asked each of them to give a Butrans patient information booklet to patients that say this to them and have these patients speak with their dr about Butrans. Pat said she will do that and Gurjeet said he will if he thinks they are appropriate for Butrans. discussed formulary coverage-focused on commercial plans, BWC and TriCare. I recommended Senokot-S for opioid induced constipation.
PPLPMDL0020000001	Parma	OH	44129	8/8/2011	Spoke with Ellie (head nurse) & asked her about getting an appointment with Dr Salewski. She said that he is "not interested" at this time. I asked her if she knew why. She said no, but that he has a very busy schedule, so that probably has something to do with it. I told her that I could present the information to him in a short, 5-10 minute appointment, but she said he would only do a lunch. I reviewed indication, dosing, delivery system, & appropriate patient type with her again & asked her to give Dr Salewski information. She agreed & said to check back in a few months for an appointment.
PPLPMDL0020000001	Cleveland	OH	44135	8/8/2011	Spoke with Ken, they still have not seen Butrans moving and they feel it is due to their patient population and managed care. We reviewed what to let the patients know when they come in for their Butrans script. They have the medication booklets and will hand them out to the patients. We discussed OxyContin as an option when Butrans may not provide adequate analgesia.
PPLPMDL0020000001	Westlake	OH	44145	8/8/2011	I reviewed the 7 day dosing and asked if he's given any further thought to where Butrans may fit in. He said he will give it a try and we reviewed managed care. I reminded him about the upcoming Butrans dinners. We discussed that OxyContin is also a long acting option with managed care coverage.
PPLPMDL0020000001	Lakewood	OH	44107	8/8/2011	Quick call, I asked Dr about the success of his Butrans patient and he said it's going well. I asked if he could try a few more patients to gain some more experience and he agreed. Reminder that OxyContin is still an option. I asked Dr if he would come to our upcoming dinner program and he will try.
PPLPMDL0020000001	Lakewood	OH	44107	8/8/2011	Quick call at window, I asked Dr to come to our upcoming dinner discussion to learn more about how his peers are using Butrans. He said the westlake location would be closer to home and he would think about it.
PPLPMDL0020000001	Bedford	OH	44146	8/8/2011	Quick call as Dr Haddad came to the window. Positioned Butrans for patients who are not well-controlled on their current chronic opioid therapy who have BWC as agreed upon during my last call. He said he has been on vacation, so he has not prescribed lately, but will keep an eye out for this patient type now that he is back. Spoke with MA Echo & reviewed savings cards for Butrans & OxyContin & discussed eligibility, including that they cannot be used for patients with any type of government insurance.
PPLPMDL0020000001	Lakewood	OH	44107	8/8/2011	I asked Dr if he had success with the patient he put on Butrans. He said that he has not heard anything yet. I asked if he would try a few more patients to gain experience and he agreed. I asked Dr to come to the Westlake program and he will try. Reminder about OxyContin as an option that is covered on Medicaid.



	Cleveland	OH	44109	8/8/2011	worked pm&r dept-left Butrans fpi,initiation guide,formulary grid,"experience" cards,Butrans program dinner invitations,patient information booklets and my business cards for Dr.Harris,Dr.Huang,Dr.Jaffer,Dr.Malkamaki,Dr.Fox,Dr.Greenwood and Dr.Clark(Director of Amputee clinic who shut down all lunches with rep's last month)-talked to Jodi,Assist to Dr.Clark and she said he's still "thinking about letting Representatives conduct lunches again",Jodi said to try back end of the week and see if she has any updates. WORKED:internal medicine dept-left Butrans fpi,initiation guide,patient information booklet,formulary grid,"experience" cards,Butrans program dinner invitations and my business card for Dr. Lindheim,Dr.Falk-Ytter,Dr.Harrington,Dr.Gelehrter,Dr.Ricanati,Dr.Jones and Dr.Eisen as I couldn't see any doctors,I was told to follow-up next week with Dr.McCreery as she reviews all information from pharma reps and shares with doctors and they make a decision if rep can come into dept and give presentation on products.
PPLPMDL0020000001	Lakewood	OH	44107	8/8/2011	I asked Dr if the patients are having success with Butrans and he said they are. He said he has not heard a lot of feedback but no news is good news. We Dr said he was not sure now if he was going to be able to make the dinner program, but he did register. He said he might be able to come to one next month. Reminder that OxyContin is an option that is covered on Medicaid when Butrans may not be covered.
PPLPMDL0020000001	Lakewood	OH	44107	8/8/2011	We reviewed Butrans 7 day dosing and I asked if he had any patients coming in this week who might benefit. He said he will give Butrans a try. I reminded him to look for commercial insurance. We reviewed OxyContin as an option that is covered on Medicaid.
PPLPMDL0020000001	Lakewood	OH	44107	8/8/2011	I asked Dr if there was anything I could provide to help him feel comfortable prescribing Butrans. We reviewed the 5 key messages and he agreed to give Butrans a try. He said he would most likely prescribe for a patient who is already on hydrocodone. I reviewed Butrans and OxyContin managed care.
PPLPMDL0020000001	Parma	OH	44129	8/8/2011	Spoke with Cindy (MA) who said that Dr Ortega was not in the office today. She said that she received a letter from Purdue about the patient who I submitted an adverse event on who she had inquired about Butrans lowering blood glucose. Cindy said she was pleasantly surprised at how quickly she received a response & information. I asked her how Dr Ortega's Butrans patients are doing. She said she has not heard from any of them recently. I made sure they had enough savings cards & reminded her to give out savings for Butrans & OxyContin patients. Also asked her to give Dr Ortega the E-Detail invitation & she agreed.
PPLPMDL0020000001	Parma	OH	44129	8/8/2011	Spoke with pharmacist who said she has not seen any Butrans activity. I let her know that I wanted to share some information with her that may assist her in patient instruction when they do dispense it, especially if it is the patient's first prescription. Gave her patient information guide & showed her application, rotation, & disposal. Let her know she could use it in patient counsel or give them out to patients. She said it would be helpful if they get phone calls also. Also discussed OxyContin savings cards & reminded her that patients with no insurance can utilize them every 14 days if they have a prescription written that way.
PPLPMDL0020000001	Lakewood	OH	44107	8/8/2011	Quick call, I asked Dr if he had any patients coming in this week who might benefit from the 7 day dosing of Butrans. She said he will give it a try. Reminder to look for commercial insurance and give the savings cards. I reminded her about our upcoming dinner discussions for Butrans.
PPLPMDL0020000001	Cleveland	OH	44115	8/8/2011	I showed dr pg 11, butrans visual aid, discussed specific pain conditions that dr treats, dr said she does see these pain conditions in her patients and hasnt thought about Butrans for any specific pain conditions. I asked dr if she had patients with chronic pain, taking tramadol daily and not controlled with I of these pain conditions? dr said yes she's sure she does, I asked dr to start a couple of those patients on Butrans instead of refilling their tramadol, dr said she will consider that option. we talked about Butrans patient savings cards for commercial plan patients and BWC coverage. I recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44195	8/8/2011	WORKED:Neurology dept-had to leave information with medical secretaries for dr krieger, dr mays, dr stillman and dr spears:left Butrans fpi,initiation guide,patient information booklet,"experience" cards,formulary grids and my business card.Also left OxyContin fpi,formulary grid and conversion guides for each of these neurologists, WORKED:Anesth/Pain management dept-left Dr.Vrooman,Dr.Syed,Dr.Samuel and Dr.Katyal and Dr.Stanton-Hicks-Butrans fpi's,initiation/titration guides,formulary grids,"experience" cards,patient information booklets,8/10 and 8/16 Butrans Dinner Program invitations and my business cards for each of the doctors listed as I couldn't see them today.Did see a few physicians,briefly so see call notes. WORKED:PM&R-Left Dr.Capulong,Dr.Schaefer and Dr.Zachary-Butrans fpi's,initiation/titration guides,patient information booklets,formulary grids,"experience" cards,Butrans Dinner program invitations for 8/10 and 8/16th programs in Westlake and Cleveland,OH.
PPLPMDL0020000001	Cleveland	OH	44195	8/8/2011	talked to dr in hallway about his patients on Butrans, dr said he only started a couple patients, they seem to be controlled and dr said he doesn't have a lot of patients on short-acting opioids that he can consider appropriate for Butrans. showed dr Butrans visual aid, 5 core selling messages and asked him what really stood out to him about Butrans? dr said he likes that Butrans is a patch, dosed once a week and is a CII, but he doesn't have a high volume of patients taking short-acting opioids that complain to him about their pills and asking for something else. told dr if he does have patients on tramadol, hydrocodone or oxycodone combo's, taking these medications daily and not controlled, to consider starting them on Butrans, dr said he will do that and took initiation guide and patient information booklets. I gave dr formulary grid and discussed Butrans patient savings cards for commercial plan patients. I recommended Senokot-S
PPLPMDL0020000001	LAKEWOOD	OH	44107	8/8/2011	Spoke with Pam, She has seen a little bit of movement of Butrans she did not know who wrote. We discussed making sure the patients are aware of steady state in 3 days so they do not give up on Butrans before 3 days. I discussed OxyContin as a long acting option when Butrans may not provide adequate analgesia.
PPLPMDL0020000001	Beachwood	OH	44122	8/8/2011	Spoke with Yvonne (MA) who said that Dr Malkamaki would not be able to see me today as promised. She said that he was running very far behind & that I will need to come back another day. She said she would call me with another date & time since this appointment did not work out. I reviewed Butrans information with her & asked if it sounded like something he may want to discuss & she said yes, just not today. Reminded her of savings cards & she said someone with a key to the cabinet will have to check those & they were out to lunch. I asked her to give Dr Malkamaki Butrans information & she agreed.
PPLPMDL0020000001	Parma	OH	44134	8/8/2011	Quick call- Dr Mandat said he had no time to talk today. I handed him Butrans REMS packet & asked him to please review the information within the packet as it has important information about the safe use of Butrans. He said he would look when he had time. Discussed savings cards with Rebecca (nurse) & reviewed eligibility requirements.
PPLPMDL0020000001	Cleveland	OH	44135	8/8/2011	Spoke with Lisa, we reviewed Butrans medication guide and what is important to let the patients know about when they first get a script. We reviewed the application sites, rotation and steady state in 3 days. We discussed OxyContin as an option when Butrans may not provide adequate analgesia.
PPLPMDL0020000001	Westlake	OH	44145	8/9/2011	I asked Dr what benefits he sees in Butrans. He said for some patients it would be a good option, but some patients it may not be adequate analgesia. I asked if he would let appropriate patients know it is an option and he agreed. We reviewed OxyContin as an option
PPLPMDL0020000001	Cleveland	OH	44113	8/9/2011	talked to dr about the patients he has on Butrans and how they are doing, dr said Butrans is working for most of the patients he started. I asked dr if he was considering Butrans for those patients taking less than 15mg hydrocodone daily for their chronic pain? dr said he hasn't seen anyone like that yet, he's still thinking of patients between 15-40mg hydrocodone, but said it makes sense to start them on Butrans earlier so he'll keep that in mind. I asked dr to focus on BWC and commercial plan patients, per our discussion, showed visual aid with appropriate patients info and asked him to start a couple patients like this, dr said he will do his best as he does like Butrans and he's waiting to see how patients do long-term on Butrans as its too early to tell. we talked about application/rotation section in Butrans patient information booklet, asked dr to focus discussions with patients on this info, dr said okay he gives them booklet to read. I recommended Senokot-S <font color=blue>b</font>CHUDAKOB's query on 08/17/2011</b></font>What is "long-term" in Dr. Nickels mind? He tells you this every time. Asking him to tell you what he means by "long-term" may give you a better indication of what he is looking for. <font color=green>b</font>BROOKAM's response on 08/17/2011</b></font>ok will ask maybe I missed this and didn't ask previously but it could be he needs to see a specific number of patients on Butrans and get pain controlled before he will think earlier in therapy? I don't know something to look at <font color=blue>b</font>CHUDAKOB added notes on 08/19/2011</b></font>Even if you asked earlier, ask again!
PPLPMDL0020000001	Parma	OH	44129	8/9/2011	Spoke with Georgia & reviewed Butrans appropriate patient type. Also gave her a patient information booklet & discussed patient counsel. Reviewed application, rotation, & disposal. I offered to give a few booklets for them to keep on hand, but she said one should be enough considering they have not dispensed any yet. Reminded her of savings cards for Butrans & OxyContin as well as eligibility requirements.
PPLPMDL0020000001	Parma	OH	44129	8/9/2011	Dr Tolentino said that she has "sometimes" thought of using Butrans but that insurance won't let her. I asked if she knew what plans. She did not, nor did Kathy, her MA. Reviewed managed care coverage & savings cards for those eligible. I asked if she had any patients with commercial insurance (ie working patients) who also met the indication for Butrans. She said she does. I asked how common conditions such as spondylolysis, spinal stenosis, & osteoarthritis were in her patient population. She said very common. I asked if she treats those patients with opioids for their pain. She said sometimes. Discussed patients who she is either ready to start on an opioid around-the-clock or who are already taking 2-3 Vicodin or tramadol per day but are not well-controlled, calling too soon for refills. Kathy said she does get calls like that. I let them know that those patients could start on 5mg system. Discussed titration ability & supplemental analgesia. Also showed Butrans sample carton, 4 patches, medication guide & disposal units to show what a patient would get at the pharmacy. I asked if she could think of a few patients who would be good Butrans candidates who have commercial insurance. She said yes. I asked her to switch those patients. She agreed. Spent time with Kathy going over appropriate patient type & walking her through initiation guide. She said she will actively look for candidates & will alert Dr Tolentino when she sees or hears from them. OxyContin 7 tablet strengths
PPLPMDL0020000001	Cleveland	OH	44109	8/9/2011	I talked to dr about his patients taking vicodin, daily for chronic pain but not controlled and asking him for something else, to consider starting these patients on Butrans. showed appropriate patients section in visual aid and Butrans initiation guide-discussed Butrans 5mg or 10mg for these patients instead of refilling vicodin or converting to percocet, dr said he'll consider that but he only has 2 patients on Butrans and wants to see how they do before starting anyone else. focused dr on BWC and commercial plan patients. I recommended Senokot-S <font color=blue>b</font>CHUDAKOB's query on 08/17/2011</b></font>What does he expect to see and how long does he have to see it before trying someone else on Butrans? <font color=green>b</font>BROOKAM's response on 08/17/2011</b></font>what are you saying? I hear that answer from doctors ALL the time, if they start 1-2 patients they tend to wait and see how patients tolerate butrans and how their pain is controlled (ie: improvement) so this wasn't a shocking statement to me? Not sure I understand what you are asking. Now asking him what timeframe, how long these 2 patients have to be on Butrans before he starts anyone else, that's a valid question. However Barry, he has started another patient recently, thanks <font color=blue>b</font>CHUDAKOB added notes on 08/19/2011</b></font>You validated my point. You hear this from physicians all the time. How often do you ask them "How long they have to be on it before he is comfortable trying more?" This is a smoke screen answer that we have to challenge a physician on. So perhaps the question is "What do you expect to see from Butrans before you will start another patient?"
PPLPMDL0020000001	Parma	OH	44129	8/9/2011	Quick call- Caught Dr Chagin at the window. Positioned Butrans for patients who take chronic Vicodin or tramadol who call too soon for refills or say their medication is not lasting long enough. He thanked me & walked away. Spent time with Debbie reviewing appropriate patient type for Butrans. She agreed that he does have patients who fit this profile, & said it is just a matter of getting him to think of it. I asked her to give him the E-Detail invite & she agreed. Also reviewed savings cards for Butrans & OxyContin.
PPLPMDL0020000001	Brooklyn	OH	44144	8/9/2011	Spoke with MA Carol & reminded her of previous lunches when we discussed Butrans. Also reviewed appropriate patient type, including those who call too soon for refills of their chronic opioid medication. Discussed CIII & abuse/addiction potential as well as managed care & savings cards. Discussed savings cards for OxyContin but she said they would not take them. I asked her to give Dr Hilton an E-Detail invitation & Butrans sealed article & she agreed.
PPLPMDL0020000001	Cleveland	OH	44144	8/9/2011	Spoke with Wendy, nurse, who said she does not think Dr Paul has prescribed Butrans as it does not sound familiar. I reviewed Butrans appropriate patient type with her & asked if it sounded like any of Dr Paul's patients. She said yes. Reminded her of CIII & abuse/addiction potential. I asked her to give Dr Paul an E-Detail invite & encourage her to participate. Also asked her to give her the Butrans sealed article. She agreed. She said they did not need any savings cards for Butrans & that Dr Paul doesn't have anyone on OxyContin so they did not need cards for that either.
PPLPMDL0020000001	Cleveland	OH	44113	8/9/2011	I talked to dr about her patients taking less than 15mg hydrocodone, daily for their chronic pain but not controlled, showed Butrans visual aid discussing appropriate patients and asked dr to not refill vicodin or increase dosage strength but to start them on Butrans. dr said she will consider that if he feels patients are appropriate. dr said some patients ask her for something else, other than pills, so she's thinking of Butrans for them. I showed dr Butrans initiation guide, discussed tapering if patients are taking more than 15mg hydrocodone daily up to 40mg and then initiating Butrans, dr said ok. focused dr on BWC and commercial plan patients. I recommended Senokot-S
PPLPMDL0020000001	Westlake	OH	44145	8/9/2011	Dr just returned from vacation. I asked if he would have patients to see this week who might be appropriate for Butrans. He said he would start more patients. I made sure he had savings cards at his middleburg location. Dr may be interested in coming in a future dinner program next month.
PPLPMDL0020000001	Mayfield Heights	OH	44124	8/9/2011	Window call....Asked Debbie how patients are doing on Butrans. She said patients are loving it and certain patients like not taking pills. Gave her an e-detail invite and explained that it talks more about butrans. Provided more savings cards and formulary reminder.
PPLPMDL0020000001	Mayfield Heights	OH	44124	8/9/2011	Window call....Reminded doc of the butrans and oxycontin formulary coverage. Provided savings cards and gave e-detail invite. Nothing learned.

PPLPMDL0020000001	Westlake	OH	44145	8/9/2011	I asked Dr if he has started any new patients on Butrans, he said yes and they are doing fine. I encouraged Dr to come to our upcoming dinner discussion.<font color=blue><b>CHUDAKOB added notes on 08/17/2011</b></font>Remember, it is about the patient. Asking the Dr. if he started new patients on Butrans sounds like you want him to do that for you!
PPLPMDL0020000001	Cleveland	OH	44143	8/9/2011	Quick call.....reminded doc of the Butrans presentation from last week's lunch. Also reviewed the indication and positioning and asked him if he has given any further thought to prescribing butrans or reviewed the literature. He said he has not had an opportunity. Gave him an e-detail invite and an initiation guide.
PPLPMDL0020000001	Westlake	OH	44145	8/9/2011	Quick call, I asked Dr if he would join for our upcoming Butrans dinner to learn more about how his peers are using Butrans. He said he will try. I asked if I could provide any other info for him to give Butrans a try, no, he is still not one to try new medications when they first come out. I reviewed the key messages.<font color=blue><b>CHUDAKOB's query on 08/17/2011</b></font>So, how long does he have to wait?<font color=green><b>HOLLUBA's response on 08/18/2011</b></font>I will ask him. Thanks.<font color=blue><b>CHUDAKOB added notes on 08/19/2011</b></font>We have to start challenging our physicians on their answers if we are going to move them forward.
PPLPMDL0020000001	Mayfield Heights	OH	44124	8/9/2011	Spoke to Giovanni and tech, Michael, about the movement of Butrans. They both said they are not seeing any scripts. I explained the positioning and the application sites. I also discussed the savings cards program. Giovanni said he is not seeing much oxycontin anyone - only a few regular customers. They dont get the calls about the OCs anymore. Provide a medical education resource catalog for CEs.
PPLPMDL0020000001	Parma	OH	44129	8/9/2011	Dr Tolentino said he is not sure why he hasn't prescribed Butrans. I asked if he commonly sees patients who have spinal stenosis, osteoarthritis, or spondylolysis. He said yes. I asked if he treats their pain with opioids. He said he does. I told him some of them may be Butrans candidates. Reviewed initiation guide & focused on low-dose Vicodin or tramadol around-the-clock who are not well controlled or those he is ready to start on an opioid around-the-clock. Discussed titration ability every 3 days & supplemental analgesia. He asked where it should be applied. Reviewed 4 sites & rotation & max dose 20mcg. Also discussed managed care coverage, asking him to focus on his working patients or those with commercial insurance. I asked if he has patients like the ones we have talked about who have commercial coverage. He said he does. I asked him to switch patients if appropriate when they call too soon for refills or say their current medication is wearing off too quickly. He agreed. He asked if Butrans was less abusable or more efficacious than Vicodin. I told him we have no comparative data & that because Butrans is an opioid it can be abused like any other opioid. Shari (MA) asked if it could be used post-op. I told her Butrans is for chronic pain & is not for post-op use, for acute pain, or for prn. Dr Paat said he will try Butrans on some patients. Reviewed OxyContin 7 tablet strengths.
PPLPMDL0020000001	Akron	OH	44310	8/9/2011	I asked Dr. Cremer how often patients are calling in complaining about their current SA therapy? How often are they asking for more of it? He said patients are calling in often complaining of both. I asked if he would feel comfortable initiating therapy to those patients and he agreed he would.<font color=blue><b>CHUDAKOB added notes on 08/17/2011</b></font>What type of patients is he currently initiating on Butrans, as he is prescribing? Is he titrating? Is he happy with the therapy? Are his patients happy? What made him think of Butrans for the patients he has tried it on. There are many questions still to ask to get more specific about his
PPLPMDL0020000001	Akron	OH	44312	8/9/2011	I asked Dr. Lababidi if he had been initiating Butrans therapy to patients failing or asking to be titrated on their current therapy like we had previously talked about. He said that he was keeping it in mind for those patients and would continue to do so. I reminded him that Butrans was 7 days.
PPLPMDL0020000001	Solon	OH	44139	8/9/2011	met with Denny and Chuck to discuss DDM and Marcs accounts. Reviewed Senokot-To-Go, vertical packaging, and 2012 promotional plan. Chuck asked to check how elderly who can't use computers can get access to coupons. Determine demographics of e-coupon users. DDM will have 73 stores after adding 3 new ones. Cost is \$1000 slotting fee for placing Senokot-To-Go on laxative shelf. They have a small trial/travel section. Possibly could be put on pharmacy end cap too.
PPLPMDL0020000001	Shaker Heights	OH	44122	8/9/2011	Dr Agarwal put his head in his hands when he saw me & said "I know, I know, I need to use this". I reminded him of our lunch & how he told me that he would use it in patients who were not getting relief from tramadol around-the-clock for a chronic condition. He said he still wants to use it in those patients but keeps forgetting. Reminded him of once-weekly dosing. Spoke with Michelle (MA) & reviewed patient information booklets & appropriate Butrans patient type.
PPLPMDL0020000001	Cleveland Heights	OH	44118	8/9/2011	Conducted the initiations presentations with Doc. He just wanted me to tell him where to write it. I explained the position butrans after NSAIDs/tramadol or before going to vicodin ATC. He asked if patients can be switched from vicodin. I told him yes, as long as they are not on too high a dose of vicodin. If they are they may be more appropriate for low dose oxycontin. Showed the approximate doses for patients taking 3 tabs of hydrocodone.
PPLPMDL0020000001	Parma	OH	44134	8/9/2011	Explained the insurance coverage and the savings cards. He said he would start writing it. I asked Dr Hernandez what his typical trigger is to talk to a patient about Butrans. He said that usually he offers it to patients who come to him as referrals from a chiropractor's office. I asked him to elaborate. He said those patients "don't like to take medicine". I reminded him that although Butrans is not an oral medication, it is a CII opioid which carries abuse/addiction potential. He said he knows but patients feel like they are not taking medication if it is transdermal. I asked what else he looks for. He said that when he asks patients what their pain level is & they respond with "3-4", he considers them a Butrans candidate. He said patients with levels higher than that he usually does not consider as he does not think they will get enough relief. He said
PPLPMDL0020000001	Mayfield Hts	OH	44124	8/9/2011	Window call.....I reviewed the Butrans indication and positioning - before going to hydrocodone ATC. I asked him to participate in the E-detail about butrans. He asked about being a speaker again,. I explained to him that I previously submitted his name. He said he needs to remember Butrans
PPLPMDL0020000001	Cleveland	OH	44109	8/9/2011	worked rheumatology dept-talked to Linda,RN,about Butrans 5 core selling messages,showed visual aid and gave initiation guide to Linda.Linda said she knows Dr.Ballou and Dr.Magrey have a lot of chronic pain patients who are taking tramadol every day and arent controlled and could benefit from trying Butrans.Linda booked me a lunch with both doctors and rest of rheumatology dept on Aug 29th. worked internal medicine-left dr lindheim,dr harrington,dr ricanati,dr falck-ytter,dr ryan,dr rosenberg,dr geleherter-OxyContin fpi's,conversion guides,formulary grids and Butrans dinner invitations,with my business card. worked family medicine dept-see Theresa Slagle on Friday,Aug.12th,to book appt with her and nursing staff to discuss Butrans and OxyContin.i had to leave Butrans fpi,initiation guide,experience card,formulary grid,patient information booklet,august dinner program invitations and my business card for dr forde,dr krofina and dr ili; worked pm&R-Jodi,clinic coordinator was out today but left August dinner invitations for her to give all residents and fellows; left Butrans fpi,initiation guide,experience card,Butrans August dinner invitations for Dr.Malkamaki,Dr.Harris,Dr.Huang,Dr.Greenwood,Dr.Jaffer and Dr.Fox
PPLPMDL0020000001	Parma	OH	44129	8/9/2011	Met with Kevin Zupancic (Pharmacy Director) & Stan Fabianich (Clinical Coordinator) to introduce Butrans. Reviewed indication, dosing, usage, delivery system, CII, abuse/addiction potential. Kevin asked about adverse events. Showed section 6 of FPI to review rates. He said he noticed that it was on the Premier contract & was not inexpensive, although he acknowledged that one dose lasts one week. Reviewed patient type who would be considered appropriate. I asked what would happen if a patient came to them on Butrans. He said he would educate ER staff & hospital nurses to ensure they are aware of what it is. He said if a patient came in on it & did not have their supply with them, they would order it in for that patient. Kevin said the P&T Committee just met last week, so another review would not occur for a few months, at which point he will review Butrans with the committee. He said that if it passes there, it would go on to 2 other committees before it could be on the hospital formulary. Showed him sample box with 4 demo systems, patch disposal units, & medication guide. Kevin said he feels that one of the ideal places they could start with Butrans would be in the hospices. He asked what Dr Gallagher's thoughts on Butrans were. I told him he was interested in using it & had mentioned hospice patients & I encouraged him to call him. Also mentioned Dr Taylor's interest. Discussed OxyContin 7 tablet strengths in hospital unit dosing.
PPLPMDL0020000001	Cleveland	OH	44145	8/9/2011	Discussed Purdue contracting with GPOs for hospital and LTC. They're interested in contracting laxative/Rx meds in LTC as well as Specialty Pharmacy. Reviewed current Purdue strategy for LTC as well as maybe in the future because of Butrans usage in that market. He provided standard rebate %s requested and services they can provide down to the patient level. Ash told Irene to work for a speaker program for a ML presentation at the Specialty Conference because pain management is important for cancer care. Check with MLs for this type of speaking engagement.
PPLPMDL0020000001	Westlake	OH	44145	8/9/2011	Provided Deanne webinar flyer for Aug presentation Disparities in Pain Care which she will make copies and put in the Consultant RPHs mailboxes. Gave her Med Ed catalog which she requested 10 copies for the RPHs. Also, reviewed the Safeguard my meds brochure which she'd like to provide to the customer service person to distribute to customers as a resource.
PPLPMDL0020000001	Akron	OH	44333	8/9/2011	I explained the ideal type of Butrans patient to Lisa. She agreed that she had many of those patients and because it is a LA agent would be a better choice for many patients currently taking several SAO&#8217;s each day.
PPLPMDL0020000001	Cleveland	OH	44106	8/9/2011	I talked to Amy,Pharmacist,about Butrans stocking and scripts she's seeing for Butrans.Amy said she knows they are filling some Butrans,not a lot,but doesnt have time to look up names of specific doctors who have prescribed.showed Amy Butrans visual aid,5 core selling messages and asked her what really stood out to her about Butrans? Amy said transdermal delivery and once weekly dosing.I asked if Amy could recommend Butrans,to patients that are taking short-acting opioids and not controlled? Amy said she will do that if she feels they are appropriate,gave Amy Butrans patient information booklets to give patients.we discussed formulary coverage and patient savings cards for commercial plan patients.i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	8/9/2011	spoke to Laura,NP,briefly,asked her what features of Butrans stood out to her,showed Butrans visual aid with 5 core selling messages? Laura said transdermal delivery,once weekly dosing and she likes that Butrans is a CIII.Laura said she's waiting to see how dr nickel's patients do on Butrans and she really doesnt have time to explain Butrans to patients at this time,its easier to refill and get them out the door.i asked Laura to consider a couple patients taking tramadol,daily for chronic pain,that arent controlled and she's thinking about converting to hydrocodone combo's,stop and think of Butrans for them and focus on BWC and commercial plan patients,Laura said ok she'll think about it.<font color=blue><b>CHUDAKOB's query on 08/17/2011</b></font>Why don't you get Dr. Nickels and Laura together and have him tell her about his success. He surely has had some by now.<font color=green><b>BROOKAM's response on 08/17/2011</b></font>he has had success,she's acknowledged them but barry she doesnt care. you have met her and heard her speak openly so not a surprise here.<font color=blue><b>CHUDAKOB added notes on 08/19/2011</b></font>Your call note says she is waiting to see how Dr. Nickel's patients do. If she said this, did you challenge her on this? She might not care, but we don't have to accept her answers. If she knows you won't accept this same answer every time, she will stop giving it to you!
PPLPMDL0020000001	Parma	OH	44129	8/9/2011	Spoke with pharmacist Heath & presented patient information booklet. Discussed application, rotation, disposal. Also let him know patients could tape edges with first aid tape if the edges start to loosen. He said the booklet would be useful in patient counsel. I let him know he could also give them out to patients to help save calls back to him asking him questions that the booklet can answer. Started to discuss OxyContin 7 tablet strengths, but he got a phone call that he had to take. He said to stop back.
PPLPMDL0020000001	Akron	OH	44304	8/10/2011	Dr. Amanambu said he thought there was a place for Butrans in his practice but had too many challenges with managed care. He said he would try to keep it in mind for appropriate patients with the right insurance but it would not be easy.
PPLPMDL0020000001	Independence	OH	44131	8/10/2011	I showed Dr Jack the sample carton of Butrans & told him I brought "show & tell" today. I opened the carton & showed him the 4 demo patches & disposal unit, explaining how patients would use it. He asked to see a demo patch. He felt the adhesive & said that it was interesting to see what they look & feel like & that this would help him remember Butrans. I positioned Butrans for patients not being well-controlled on their current chronic opioid around-the-clock therapy.
PPLPMDL0020000001	Westlake	OH	44145	8/10/2011	Spoke with Jamie and tech, we reviewed the patient medication guide and important things to tell the patients. I asked if they usually consult with patients, he said that no unless they have specific questions, but a lot of patients do have questions when they first get a medication. We discussed managed care for both Butrans and OxyContin.
PPLPMDL0020000001	Parma	OH	44134	8/10/2011	Spoke with Alicia, pharmacist, briefly. She said she was short-staffed today so she could not stop to talk. Butrans e-voucher & savings reminder & also OxyContin savings card reminder. She said to come back another day & she would give me more time. I gave her my card & asked her to call if she has questions on either product.
PPLPMDL0020000001	Independence	OH	44131	8/10/2011	Spoke with Dave (pharmacist). Reviewed Butrans appropriate patient type & discussed patient counsel on application, rotation, & disposal. Also discussed savings available for eligible patients for Butrans & OxyContin. He said he had to go answer a patient phone call.

PPLPMDL0020000001	Parma	OH	44129	8/10/2011	Quick call- Caught Jen between patients. She said she had to run because she was too far behind to stop. Positioned Butrans for patients taking 3 Vicodin per day who say it is wearing off too quickly. She said she'd keep it in mind, then walked into a room. Spent time with Dawn. Reminded her of the appropriate Butrans patient type we have been talking about. She said she still does not think Dr Nickels has given approval for NP's to prescribe. She asked if I call on Caryn & I told her I do not. She said that she would call her to see what her thoughts on prescribing Butrans were. She said that Jen will be the last NP to "get on board". She said Jen isn't comfortable enough with the practice to start trying the patients on new medications. I asked Dawn what there was to lose if the patient is complaining that their current medication isn't controlling them either. She said she does think it is a good option for some patients but they have to be careful of managed care since they have so much Medicaid & self-pay. I reminded her that they do not need to switch all of their patients to Butrans but rather identify a handful of appropriate patients to try on it. She said she would see what she could find out. Also asked her to check her supply of Ryzolt savings cards & she said they are OK on them for now.
PPLPMDL0020000001	Broadview Heights	OH	44147	8/10/2011	Dr Samuel said that to be honest, he has not prescribed Butrans recently. I asked him if there was any specific reason for this. He said "not really" but that he did not have very positive results the first time he prescribed. He went on to say that he does not think he tried it on the right patient. Spent time discussing the appropriate patient type. He said that he thinks that the real ideal patient would be an "opioid virgin". I agreed that opioid naive patients are an ideal patient type to consider. He said that the earlier he starts Butrans, his chances for success are probably increased. I discussed patients who are taking short-acting medications around-the-clock who are not well-controlled. He said that Margaret has already come to him with ideas of patients to try on Butrans since I had already talked to her. He said he is ready to give it a try in a few more patients that may be more fitting. Also discussed OxyContin q12h for appropriate patients beyond Butrans & gave one package of savings cards.Spent time with Margaret (nurse), going over appropriate patient type for Butrans, including patients on chronic opioids around-the-clock who are not well-controlled. She said she is thinking of one patient in particular. I asked her to tell me about them. She said it is a woman with chronic hip pain who was on 3 Percocet per day but is not well-controlled. She added that the patient is very committed to getting relief. Discussed initiation/titration.
PPLPMDL0020000001	Broadview Heights	OH	44147	8/10/2011	Dr Samuel said that to be honest, he has not prescribed Butrans recently. I asked him if there was any specific reason for this. He said "not really" but that he did not have very positive results the first time he prescribed. He went on to say that he does not think he tried it on the right patient. Spent time discussing the appropriate patient type. He said that he thinks that the real ideal patient would be an "opioid virgin". I agreed that opioid naive patients are an ideal patient type to consider. He said that the earlier he starts Butrans, his chances for success are probably increased. I discussed patients who are taking short-acting medications around-the-clock who are not well-controlled. He said that Margaret has already come to him with ideas of patients to try on Butrans since I had already talked to her. He said he is ready to give it a try in a few more patients that may be more fitting. Also discussed OxyContin q12h for appropriate patients beyond Butrans & gave one package of savings cards.Spent time with Margaret (nurse), going over appropriate patient type for Butrans, including patients on chronic opioids around-the-clock who are not well-controlled. She said she is thinking of one patient in particular. I asked her to tell me about them. She said it is a woman with chronic hip pain who was on 3 Percocet per day but is not well-controlled. She added that the patient is very committed to getting relief. Discussed initiation/titration.
PPLPMDL0020000001	Independence	OH	44131	8/10/2011	Quick call- Dr Rob said "no time". Positioned Butrans for appropriate patients with chronic conditions whose pain is not being well-controlled on their current around-the-clock opioid medication. He said he would try to remember. Spoke with Cameo (MA) & discussed savings cards for Butrans & OxyContin. She said they have enough for now but may need OxyContin cards soon.
PPLPMDL0020000001	Akron	OH	44320	8/10/2011	Misty said she was maintaining the patients she had on Butrans and would continue to imitate therapy. She said she liked Butrans therapy mostly because it was once a week and a schedule 3.
PPLPMDL0020000001	Westlake	OH	44145	8/10/2011	Quick call, I confirmed that Dr was attending our Butrans dinner program tonight and he is looking forward to it. I reviewed Butrans as an option and he is still trying to learn where it will fit into his practice. He will learn more tonight.
PPLPMDL0020000001	Cleveland	OH	44122	8/10/2011	Spoke with Lina who said Pam Troppiano is out on Medical Leave and won't be back for a few months. Donna Childress, Director of Case Management CFC, is no longer with the company. Sheila Putnam moved to Dayton and is now Director of the CFC division. Marcia Lange is still over Case Management ABD.
PPLPMDL0020000001	Fairlawn	OH	44333	8/10/2011	I asked Dr. Domdera his thoughts on Butrans therapy and how he felt about the molecule Buprenorphine. He said he liked the idea of this medication and felt comfortable with the molecule. I asked if there was anything more he felt like he needed to know before prescribing for the first time and he said no and that he would keep it in mind.
PPLPMDL0020000001	Cleveland	OH	44106	8/10/2011	I showed dr Butrans visual aid,pg.11,asked how often dr see's pain conditions listed,dr said often,asked how he treats these conditions and at what point an opioid is appropriate,dr said he will treat each of the pain conditions listed first without narcotics,then if patient has to be started on a narcotic,he would consider Butrans to be appropriate,dr said he started another patient on Butrans that was taking 2-3,5mg vicodin,daily and not controlled so he thought Butrans would be an appropriate option,dr said he couldnt get Butrans approved and thought it was Medicaid patient had,dr asked about Medicaid coverage as majority of practice at Main Campus is Medicaid/Medicare,we discussed formulary coverage and asked dr to focus on commercial patients that can use Butrans patient savings cards,discussed savings card program with dr,dr said ok.
PPLPMDL0020000001	Copley	OH	44321	8/10/2011	I asked Dr.Machado about the success patients were having with Butrans and he said he felt patients were having success for the most part. He said the based on the success rate with Butrans he would feel confident continuing to prescribe for opioid experienced patients. I reminded him that Butrans had also been studies in opioid na /rve patients.
PPLPMDL0020000001	Cleveland	OH	44114	8/10/2011	dr said he's writing Butrans and patients seem to be doing well on it.I asked dr since he writes hydrocodone and oxycodone combo's every day for his chronic pain patients,why not start more patients on Butrans every day? dr said thats a good point,he hasnt thought of that on a daily basis.I asked dr how many patients he see's every day,dr said 30-35,and asked how many of them complain their medications not controlling their pain? dr said a lot of them,told dr those are the Butrans patients potentially,confirmed dr is going to dinner program august 16th.
PPLPMDL0020000001	Bedford	OH	44146	8/10/2011	Spoke with MA Cassie who said that Dr Moufawad is out of the office all week. I went through Butrans overview with her as she did not know what it was. Also discussed managed care & savings cards for Butrans & OxyContin. I asked her to leave him an E-Detail invitation & she agreed.
PPLPMDL0020000001	Cleveland	OH	44106	8/10/2011	i talked to dr about how he explains Butrans to his patients,dr said he tells them its easy,once weekly dosing and convenient for them.dr said most patients are fine with that information.dr said he gives aspirin/ibuprofen as supplemental analgesia.
PPLPMDL0020000001	Cleveland	OH	44130	8/10/2011	Dr Kansal said he has not had any further experience with Butrans. I asked if he felt that the one patient, who he had admitted was probably not a good candidate, was a fair trial. He said probably not. I asked why not try other patients to at least see if he thinks it is a good product. He told me that he is not taking any new pain patients. I asked what about patients who have a chronic condition & are not well-controlled on their current therapy. He said none of them want to switch. I asked if any of them ever ask for an increase in dose. He said if they do, he "kicks them out". I asked him isn't it possible that a patient has legitimate pain & has built up a tolerance, which causes them to ask for an increase in dose, & the patient is not asking for it due to misuse or diversion. He agreed there is a difference clinically between tolerance & addiction. He added that to lawyers, they are both the same & if he increases the dose of opioid he gives a patient, they will prosecute him for bad prescribing practices. I showed him inclusion criteria for Butrans studies & asked him if he sees patients with those conditions. He said intervertebral disc disease does not cause pain, but acknowledged that spondylolysis & spinal stenosis could cause chronic pain. I asked if he has patients with these conditions. He did not answer. He started talking about patients who get surgeries & then cannot afford to take the time off work to properly recover, leading to chronic pain.
PPLPMDL0020000001	Akron	OH	44320	8/10/2011	I asked Dr. Dupstadt if she had been initiating Butrans therapy to patients failing or asking to be titrated on their current therapy like we had previously talked about. She said that she was keeping it in mind for those patients and would continue to do so. I reminded him that Butrans was 7 days.
PPLPMDL0020000001	Akron	OH	44320	8/10/2011	I explained the message I had been focusing on in the field with my physicians and the ideal Butrans patient type utilizing the initiation and titration guide. I asked about movement and they said there had been a little but none recently.
PPLPMDL0020000001	Akron	OH	44320	8/10/2011	I explained the message I had been focusing on in the field with my physicians and the ideal Butrans patient type utilizing the initiation and titration guide. I asked about movement and they said there had been a little but none recently.
PPLPMDL0020000001	Cleveland	OH	44106	8/10/2011	Introduced myself to dr,asked if he was aware of Butrans? dr said no,he's not heard of it and he's a PGY-3 Resident in Anesthesia.I gave dr Butrans fpi,discussed 5 butrans core selling messages and gave dr Butrans initiation guide,dr said ok he only has experience with Duragesic,as it relates to patch technology,i told dr this was the first and only transdermal analgesic delivered over 7 days in the CIII class,dr said sounds good he will read the information,i told dr i would follow-up with him to see if he had any questions from Butrans fpi and any patients that may be appropriate to start on Butrans,dr said ok.
PPLPMDL0020000001	Parma	OH	44129	8/10/2011	Dr Gigliotti jumped up when he saw me saying, "I wrote one! I wrote one!". I asked him to tell me about the patient. He said she is an "older" woman with lumbar stenosis. I asked what she was taking before he switched her. He said 3-4 Percocet every day. I told him it sounded like he chose an ideal patient clinically & that my only concern was if the patient had Medicare, it would likely not get covered. He said that he wrote the prescription last Thursday & that this patient would have definitely called them by now if the prescription did not go through. I asked him if he would also know if her insurance required prior authorization for it & he said yes. I asked him if he planned to wait for her feedback before prescribing for more patients & he said no. He said her feedback will have no bearing on him continuing to prescribe. I asked him if that meant that he has more patients who he is thinking of to switch & he said he does have more. I told him it was interesting that he had chosen a patient with lumbar stenosis as that was one of the conditions in the inclusion criteria for Butrans studies. I showed him the criteria on pg 11 of core visual aid. I asked if these were conditions he was used to seeing in his office & he said, "definitely". I told him those were exactly the types of patients that Butrans was evaluated in during trials. He said he will keep prescribing Butrans & reminded me that it took him awhile to get on board with OxyContin as well.
PPLPMDL0020000001	Brooklyn	OH	44144	8/11/2011	Spoke with Nancy, nurse, who said Dr Deeb was not in today. I asked if I could schedule an appointment to discuss Butrans with him. Delivered Butrans overview to her, including indication, dosing, usage & let her know that he had been interested when I first introduced him to it, although I have not been successful in seeing him since my initial conversation with him. Nancy said she will try to see if he will allow me to schedule a lunch. She said I was not allowed to leave any information.
PPLPMDL0020000001	BEACHWOOD	OH	44122	8/11/2011	Spoke with Bill (pharmacist) & presented patient information guide. Discussed application, rotation, & disposal. Let him know he could use it in patient counsel or he could give them to patients who are picking up prescriptions. He said they would be very helpful. Discussed savings through e-voucher & also went over OxyContin savings cards & usage/eligibility for those. Gave him one package of cards.
PPLPMDL0020000001	Cleveland	OH	44130	8/11/2011	Spoke with Fran (MA) to follow-up on lunch where we discussed Butrans. She said Dr Rogers was not available. Reviewed indication, dosing, & usage with her. Also discussed savings cards. She said they did not need any for Butrans or OxyContin yet. I asked her to give Dr Rogers Butrans information & she agreed to do this. Also scheduled lunch for further follow-up.
PPLPMDL0020000001	Cleveland	OH	44102	8/11/2011	dr said Butrans dinner program was helpful to understand appropriate patients for Butrans,dr still was thinking of Duragesic patients being the same for Butrans,i talked to dr about his patients taking low dose hydrocodone or oxycodone daily,for chronic pain,yet asking for something different and to consider Butrans there. showed dr Butrans initiation guide with dosage ranges,dr said its taking him some time as he needed to understand the right patient and insurance coverage,told dr to focus on commercial and BWC patients and asked dr if he can think of 1-2 patients today or tomorrow,per our discussion,that he can start on Butrans? dr said ok he will do that.talked to dr about OxyContin,Q12H dosing,being an appropriate option for patients after Butrans 20mcg,dr said he hasnt started anyone on OxyContin yet as he's inherited all these patients being new to the practice,but he will remember Q12H dosing.
PPLPMDL0020000001	Beachwood	OH	44122	8/11/2011	Introduced Butrans to Dr Bonomo, delivering 5 core messages & alerting her to box warning. Discussed CII & abuse/addiction potential. Spent time going over the appropriate patient to try Butrans on, including those with chronic conditions causing pain such as spondylolysis, intervertebral disc disease, & osteoarthritis. Discussed application, rotation, & disposal & showed demo patch. She said it has a nice feel & she feels it would be comfortable. I asked if she saw a place for a once weekly transdermal system for their chronically painful condition. She said maybe. Discussed OxyContin q12h for appropriate patients beyond Butrans. She said she really does not like to prescribe opioids in general. I agreed she should be cautious but asked if she would agree that some patients have pain that warrants use of opioids & who would not divert or abuse the medication. She agreed. I asked her to consider Butrans for appropriate patients who are not well-controlled on short-acting medication. She said she would keep it in mind.
PPLPMDL0020000001					

	Parma	OH	44129	8/11/2011	Dr Roheny said he "wanted to prescribe Butrans for a patient..." I told him I sensed a "but" coming. He said "but, she had Medicare." I asked him what it was about that particular patient that made him think of Butrans. He said she is a 70 year-old woman with pain due to osteoarthritis. He said he had given her a prescription for Vicodin months ago, but she did not fill it because she did not want to take oral narcotic medication. I reminded him that Butrans is a CIII opioid & does still have abuse/addiction potential. He said he knows & that her main concern was taking pills. I told him that he chose an ideal patient clinically & asked if he has any patients with commercial insurance who may also fit the profile. He said "maybe". Reviewed commercial insurance & showed formulary grid. I also showed him a demo & asked his thoughts. He said he liked the way it was structured.
PPLPMDL0020000001	Beachwood	OH	44122	8/11/2011	Reviewed appropriate patient type again. He said he would see. Introduced myself & Purdue's products to Dr Eckstein. He asked me to tell him about Butrans. Delivered 5 core messages & discussed CIII/abuse/addiction potential. Spent time going over appropriate patient selection. Emphasized importance of selecting the right patients & thinking of the more "moderate" pain side of the scale. He said he was thinking it was for more severe patients, such as those on fentanyl. Showed initiation guide to provide further clarity. Discussed titration every 3 days to a max 20mcg dose. Advised to not go higher than 20mcg due to increased risk of QTc interval prolongation. He asked why he would use Butrans over OxyContin or Duragesic. Re-visited appropriate patient type & let him know that Butrans is only long-acting CIII. He said he understands now where to use it. I asked if he would use in opioid-naïve patients. He said he probably would not as he would want to ensure tolerability to an opioid via short-acting before introducing long-acting. Discussed ability to take supplemental analgesia, managed care, & savings cards. I asked if he thought it was something he could put to use in treating his patients with conditions like intervertebral disc disease & spondylolysis. He said cost is an issue. I reiterated commercial insurance & \$15 co-pay when using cards. Discussed OxyContin q12h for appropriate patients beyond Butrans.Ryzolt 3-2-1 messaging & recommended Senokot-S for opioid-induced constipation.
PPLPMDL0020000001	Cleveland	OH	44130	8/11/2011	I stopped Dr Diab in the hallway by showing him the sample Butrans carton & telling him that I thought he might be interested in seeing what his patients get when they pick up their Butrans prescription. He said it was interesting. I asked him if he thought any patients who take around-the-clock short-acting opioids may benefit from the once weekly dosing. He said maybe & walked into a patient room.
PPLPMDL0020000001	Barberton	OH	44203	8/11/2011	I asked Dr. Patel how often patients are calling in complaining about their current SA therapy? How often are they asking for more of it? He said patients are calling in often complaining of both. I asked if he would feel comfortable initiating therapy to those patients and he agreed he would/
PPLPMDL0020000001	University Hts	OH	44118	8/11/2011	Window call....reminded doc of the appropriate butrans patient type and indication. Discussed the formulary and BWC for butrans and oxycontin.
PPLPMDL0020000001	Cleveland	OH	44103	8/11/2011	talked to Abdul,Pharmacist and Hakeem,Pharmacist,about Butrans stocking,Abdul said they only saw 1 script from a Cleveland Clinic doctor and nothing since.Abdul said majority of patients are taking percocet,2-4/day,60-120/month.Abdul said I should work to dr agras,as she might be interested in talking to me about Butrans.told Abdul my focus is commercial insurance and BWC when talking to doctors about starting patients on Butrans.asked Abdul if he would recommend Butrans to patients,if patients are taking 2-4 tablets daily and not controlled and give them Butrans patient information booklets? Abdul said he does patient counseling and will recommend a long-acting opioid to patients when appropriate,so he agreed to recommend Butrans.gave Abdul Butrans initiation guide.we discussed OxyContin stocking,Abdul said he still see's a lot of scripts for OxyContin and wanted 1 more pack of savings cards.
PPLPMDL0020000001	Beachwood	OH	44122	8/11/2011	Spoke with Ashley (pharmacist) & reviewed patient information booklet with her. Discussed application, rotation, & disposal. She asked if patches could be cut. I told her this is not recommended & has not been studied. She asked what to advise patients to do if the patch "falls off". I told her the patient should notice edges loosening before it would just fall off, in which case they can cover it with Bioclusive or Tegaderm or tape the edges with first aid tape. I told her if the patch falls off completely before the 7 day dosing interval is up, a new patch would need to be applied. She said she can think of at least 2 patients who get Butrans regularly. I asked where most of the prescriptions they see come from- just the building, or the community? She said they can fill all prescriptions written by Cleveland Clinic physicians & all prescriptions for Cleveland Clinic employees. She said they would not fill prescriptions from physicians outside the Clinic/from the community. I asked what managed care plans she sees most frequently. She said mostly Caremark because that is what Clinic employees have, but she also sees Medical Mutual, Anthem, etc. along with Medicare. She said they do not fill prescriptions for Medicaid patients there. Discussed OxyContin savings cards which she said she has enough of.
PPLPMDL0020000001	Cleveland	OH	44102	8/11/2011	talked to Nagla,PA,about the couple patients she started on Butrans,with dr celeste, and Nagla said these were patients taking vicodin and percocet and telling them their medication wasnt controlling their pain.nagla said they tell patients this is your only choice,with some short-acting medication for breakthrough pain, and its easy with once weekly dosing Nagla said this verbiage works with patients and they are bringing patients back for follow-up 1month after starting on Butrans.i asked Nagla if she's discussing application sites/rotation of Butrans with patients? Nagla said no,they give script to patient and Marian,MA,gives patients Butrans patient information booklet.i talked to Marian,MA,about application sites/rotation information in booklet and asked her to focus her discussions on this section.i asked Nagla to focus on commercial and BWC patients to start on
PPLPMDL0020000001	Cleveland	OH	44121	8/11/2011	Doc said she tried a patient on Butrans. She said,"we'll see. She has not heard anything so far. I asked her to keep butrans in mind after NSAIDs or tramadol ATC. Provided an e-detail invite.<font color=blue>-b>CHUDAKOB's query on 08/17/2011</font>I am confused! The physician is a male and yet all references are to the physician being a female? Please explain!<font color=green>-b>SIMERTOC's response on 08/18/2011</font>I am confused too. I believe this was supposed to be Dr. DeJoseph. these two are in the same office and I enter their calls back to back. I guess I clicked on the wrong name-<font color=blue>-b>CHUDAKOB added notes on 08/19/2011</font>it might serve you well to re-read your call notes before submitting them. Thanks!
PPLPMDL0020000001	Barberton	OH	44203	8/11/2011	I asked Dr. Kim if he felt there was truly a place for Butrans in him practice. She said he thought there was a place for it but still did not feel entirely comfortable prescribing it. I asked what more he felt like he needed to know before prescribing it and he said he would review the FPI.
PPLPMDL0020000001	Barberton	OH	44203	8/11/2011	I asked Dr. Minlich her thoughts on Butrans therapy and how she felt about the molecule Buprenorphine. She said she liked the idea of this medication and felt comfortable with the molecule. I asked if there was anything more she felt like she needed to know before prescribing for the first time and she said no and that she would keep it in mind.
PPLPMDL0020000001	Euclid	OH	44117	8/11/2011	I asked doc if he had an opportunity to participate in the e-detail about butrans. He said not yet and asked for another reminder about it. I explained that it would help him identify the right butrans patient. Reminded him of the BWC coverage.
PPLPMDL0020000001	South Euclid	OH	44121	8/11/2011	Window call....Reminded doc of the Butrans coverage with commercial plans and BWC. Provided formulary grid reminder and patient information booklets. Nothing learned.
PPLPMDL0020000001	Akron	OH	44333	8/11/2011	Dr. Brown and I discussed Butrans patient and then covered the Butrans initiation program which she thought helped her identify patients and also gave her a good idea of where to start patients on therapy. She had a patient who experienced an AE and thought it may have been because she started them on the 10 mcg.
PPLPMDL0020000001	Highland Heights	OH	44143	8/11/2011	Window call....asked doc how patients are doing on Butrans. He said no problems. Some patients cant afford it but for the most part, fine. Reminded him of the formulary coverage with commercial plans and the savings cards. He said he is giving them out.
PPLPMDL0020000001	Norton	OH	44203	8/11/2011	I explained the message I had been focusing on in the field with my physicians and the ideal Butrans patient type utilizing the initiation and titration guide. I asked about movement and they said there had been a little but none recently.
PPLPMDL0020000001	Barberton	OH	44203	8/11/2011	I explained the message I had been focusing on in the field with my physicians and the ideal Butrans patient type utilizing the initiation and titration guide. I asked about movement and they said there had been a little but none recently.
PPLPMDL0020000001	Copley	OH	44321	8/11/2011	I asked Dr. Heim if he had been initiating Butrans therapy to patients failing or asking to be titrated on their current therapy like we had previously talked about. He said that he was keeping it in mind for those patients and would continue to do so. I reminded him that Butrans was 7 days.
PPLPMDL0020000001	East Cleveland	OH	44112	8/11/2011	Doc was just back from vacation and very busy. I reminded him of Butrans indication and other selling messages. Gave him an e-detail invite and asked him to log on. No commitment.
PPLPMDL0020000001	Cleveland	OH	44105	8/11/2011	talked to dr about Butrans 5 core selling messages,showed initiation guide and gave Butrans fpi,dr said she hasnt heard of Butrans,asked if there was abuse potential with Butrans? I told dr yes Butrans has abuse potential like other opioids. told dr if she has patients taking 2-3 percocet a day,that meet Butrans indication, and not controlled,she could start them on Butrans,discussed initiation dosage strengths.we discussed BWC and commercial insurance.
PPLPMDL0020000001	Cleveland	OH	44130	8/11/2011	Dr Fedorko asked me if he could put a patient with chronic pancreatitis who was taking Dilaudid prn & MS Contin on Butrans. I told him that this would probably not be a Butrans patient due to the range of opioids that patient is currently taking & showed initiation guide pg 6. A medical student who he was training asked me if Butrans is "that partial agonist". I told her she was astute to remember that & she said they test students on it in the boards now. She asked if Butrans can cause a patient to go into withdrawal. I showed her initiation guide & said that it is possible for that to happen. I showed Dr Fedorko the inclusion criteria & asked if he saw the conditions listed in his practice but he did not answer. He said he would try to find more patients & started to walk away into a room. He then stopped me & asked if he could switch a patient who was taking 80mg q12h OxyContin to Butrans. I told him this patient was also out of the range & to think of patients on the more moderate end of pain, such as those taking 3-4 Vicodin per day & are not well-controlled. Also reminded him of Ryzolt
PPLPMDL0020000001	Beachwood	OH	44122	8/11/2011	Spoke with Laura & Chris, nurse. Discussed Butrans delivery system & once-weekly dosing. Also reviewed savings cards for Butrans & OxyContin. Reminded them that OxyContin savings cards can be used every 14 days if they are cash-pay & have the prescription written that way. Chris said she had forgotten that & that that may be very helpful to some of their patients.
PPLPMDL0020000001	Cleveland	OH	44111	8/12/2011	I asked her if she would feel comfortable recommending Butrans for a patient. She said she would, she does understand the appropriate patients for Butrans and thinks it would be a good option instead of increasing a patients dose of vicodin. Reminder that OxyContin is still an option when Butrans may not provide adequate analgesia.
PPLPMDL0020000001	Macedonia	OH	44056	8/12/2011	Spoke with Nancy, pharmacy manager, who checked her shelf to see if they still had Butrans. She said she really had not heard of it & was surprised that she had it. Let her know it was auto shipped for most stores. Reviewed indication, dosing, & usage with her & spent time going over appropriate patient type. Discussed CIII & abuse/addiction potential. She said she thinks it is a great idea & that she would love to have fewer customers on chronic Vicodin & tramadol. She said she worries about abuse of oral medications. Reminded her that Butrans is still abuseable. She said her opinion is that a patch is not as easily abused as oral medications. Showed her a demo & she said she liked how small & thin it was & thought the adhesive seemed effective. Gave her a patient information booklet & discussed application, rotation, & disposal. Also let her know the edges can be taped with first aid tape if it loosens. She said she hopes that Butrans gets a lot of use because she sees a big place for it in the market. Discussed OxyContin savings cards- she said she really does not stock it.
PPLPMDL0020000001	Cleveland	OH	44111	8/12/2011	Spoke with John, we discussed Butrans medication guide and how to instruct patients on proper use. We reviewed the initiation guide and I asked if he sees patients who come in on low dose vicodin month after month. He said that they see them every day, but patients do not like to give up their pills. We discussed Butrans as an option for opioid naïve patient. Reminder that OxyContin is still an option.
PPLPMDL0020000001	Fairlawn	OH	44333	8/12/2011	I asked Dr. Parisi what he felt the biggest benefit of Butrans was for his patients. He said he liked the fact that it delivered the medication for 7 days and that it was a schedule 3. He said he would keep it in mind for appropriate patients
PPLPMDL0020000001	Akron	OH	44319	8/12/2011	Dr. Wu said that he has continued to initiate Butrans therapy to appropriate patients. He said that when he talks with certain patients they prefer oral medications. I asked if he always lets the patients choose their medications and he said he just didn't want of complaints and call backs.
PPLPMDL0020000001	Cleveland	OH	44103	8/12/2011	showed dr butrans visual aid,pg.11,pain conditions,discussed patients with chronic low back pain and how dr treats these patients.dr starts with muscle relaxers,manipulation,physical therapy,nsaid's and if all of that doesnt work,he'll start patients on tramadol,then vicodin and finally percocet before she considers a long-acting opioid.dr said now that Butrans is available,she's got a lot of patients who have taken percocet for years and are always asking her for something else,so she's thinking of them to start on Butrans.i showed dr Butrans initiation guide,discussed dosing ranges and initiation of butrans.asked dr to focus patient discussions on application/rotation of butrans.dr said she's giving booklets to patients but will be sure to show that info.we discussed formulary coverage and talked about OxyContin being an option,for appropriate patients,after Butrans 20mcg. dr said she still prescribes a lot of OxyContin,post the reformulation and doesnt have any insurance problems with medicaid and medicare.i recommended Senokot-S
PPLPMDL0020000001	South Russell	OH	44022	8/12/2011	Caught Dr Kale in the hallway. Reminded her of Butrans dosing & delivery system & handed her REMS packet, explaining that it contains information on the safe use of Butrans. She thanked me & walked away. Spoke with Sherry & Lucy & discussed Butrans indication, delivery system, & appropriate patient type. They said they have enough savings cards for now.

	Chagrin Falls	OH	44022	8/12/2011	Spoke with Karen (nurse) & reminded her of previous Butrans conversations. Reviewed indication, dosing, delivery system. I asked if they needed savings cards but she said they are okay for now. I discussed appropriate patient type with her. She said they have some patients who fit the indication. I asked her to give Dr Rood the Butrans REMS packet, explaining that it contains information on the safe use of Butrans. She agreed to give this to him & remind him.
PPLPMDL0020000001	Garfield Hts	OH	44125	8/12/2011	Dr Sadowski said he has "rare occasion" to use Butrans. I told him I was not asking him to change all of his patients, but rather identify one or two who may benefit. I asked if he thought that was fair. He said yes. Spent time going over the appropriate patient type. I showed him the inclusion criteria & asked him if he treats those conditions-he said yes. He asked how Butrans compares with fentanyl. Told him we have no comparative data & that fentanyl patients were excluded from studies. Re-visited appropriate patient type. Tried to get him to focus on the more "moderate" pain patients. He said if his patients say they need more than 2 Vicodin per day, he refers them to pain management. I asked him what if instead of doing that, or increasing the amount of hydrocodone he gives the patient, he switched them to Butrans, a long-acting & different molecule. I reminded him that Butrans is still an opioid & can still be abused & has addiction potential. He said he could think of a few patients who he could do that for. Discussed managed care & asked him to think of working patients/those with commercial insurance who could use the co-pay cards, saving them money each month. I asked if it was fair of me to ask him to identify one or two patients like this (with a chronically painful condition, on 2 Vicodin per day, not well-controlled & with commercial insurance) & start them on Butrans 5mg. He agreed. Discussed this with Deena. OxyContin 7 tablet strengths reminder.
PPLPMDL0020000001	Cleveland	OH	44113	8/12/2011	confirmed dale is attending dinner aug.16th on butrans,asked if dale has seen any patients taking tramadol,daily,that arent controlled and have any 1 of the pain conditions listed on pg.11,butrans visual aid? dale said yes he has and he's recommended Butrans for dr shen to start patients on instead of refilling tramadol.we talked about application/rotation info in butrans patient info booklet and insurance coverage.i asked dale to start a few patients,per discussion,on Butrans instead of increasing tramadol,refilling or converting to another short-acting opioid,dale said he'll do that.i recommended Senokot-S
PPLPMDL0020000001	Garfield Hts	OH	44125	8/12/2011	Spoke with Sarah (pharmacist) & inquired about Butrans stocking. She said she does have it in stock now. I asked her what strengths, she said she did not know off hand & did not have time to look. Discussed patient information guide & savings. Also asked if they needed additional OxyContin savings cards but she said they were stocked on them for now.
PPLPMDL0020000001	Brooklyn	OH	44144	8/12/2011	Stopped Dr Detwiler in the hallway by showing him the sample carton of Butrans, telling him I brought him "show & tell". I asked if it looked like what he expected. He said he hadn't thought about it but it was "interesting". I showed him one of them demo patches & disposal units. He said again that it was interesting & then walked into a room. Discussed managed care & savings with Tiffanie.
PPLPMDL0020000001	Cleveland	OH	44107	8/12/2011	Spoke with Nick, we discussed the medication guide and important things to let the patients know about. He asked about the managed care and we reviewed the coverage and savings cards. We discussed that OxyContin is an option covered on Medicaid and some Med D plans
PPLPMDL0020000001	Cleveland	OH	44111	8/12/2011	I asked Dr if he has thought about where Butrans may fit into his practice. He said he does think it might be good for some patients, but many of his patients may be past the point of Butrans. I asked if he sees pain patients seen in the inclusion criteria and he said he sees all of it. I asked him to try Butrans for his patients instead of vicodin around the clock and he agreed. Reminder that OxyContin is an option when Butrans may not provide adequate analgesia.
PPLPMDL0020000001	Lyndhurst	OH	44124	8/12/2011	Quick call.....asked doc if he has had more feedback from the patient started on butrans. He said not yet. I asked him to try another patient on butrans Gave him an initiation guide. Not commitment.
PPLPMDL0020000001	Akron	OH	44319	8/12/2011	I asked Dr. Katrij his thoughts on Butrans therapy and how he felt about the molecule Buprenorphine. He said he liked the idea of this medication and felt comfortable with the molecule. I asked if there was anything more he felt like he needed to know before prescribing for the first time and he said no and that he would keep it in mind.
PPLPMDL0020000001	Berea	OH	44017	8/12/2011	Quick call, I asked Dr if he would come to our upcoming dinner program to learn more about how his peers are prescribing Butrans. He said he would try to make it.
PPLPMDL0020000001	Mayfield Hts	OH	44124	8/12/2011	Quick call.....reminded doc of the appropriate butrans patient type and indication. Gave him an e-detail invite and formulary grid. Asked him to log on.
PPLPMDL0020000001	Cleveland	OH	44125	8/12/2011	Spoke with Angie (pharmacist). She said she has not seen any Butrans activity. She said she thought it would have been more utilized. I told her a variety of physicians/specialties have been prescribing it & I just had lunch with Dr Samuel, who had a positive response. She said she will keep an eye out. Discussed patient savings cards for Butrans & OxyContin.
PPLPMDL0020000001	Cleveland	OH	44109	8/12/2011	worked pm&r dept - see call notes on greenwood,huang and harris; worked internal medicine-left business card for dr Jones to call me as he attended dinner program on butrans,aug10th and said to stop and give card so we can set-up time to meet and discuss butrans fpi
PPLPMDL0020000001	Brooklyn	OH	44144	8/12/2011	Caught Dr Miguel on his way out. Positioned Butrans for patients with chronically painful conditions who are not well-controlled on short-acting medications. Also reminded him of savings cards for Butrans & OxyContin.
PPLPMDL0020000001	University Heights	OH	44121	8/12/2011	Window call.....reminded doc of the appropriate butrans patient type and indication. Gave him an initiation guide and formulary grid. Nothing learned.
PPLPMDL0020000001	Akron	OH	44333	8/12/2011	I asked Dr. Rictor what his definition of chronic pain was and he mentioned that he considers a patients chronic when he feels he needs to prescribe a LAO. He said at that point he typically refers them to Pain Management.
PPLPMDL0020000001	Cleveland	OH	44109	8/12/2011	I talked to Andy,Pharmacist,about Butrans stocking and scripts they are getting for Butrans.i asked Andy if they do any patient counseling for patients taking opioids? Andy said yes,they do that and I asked if he ever hears patients say that their short-acting opioids arent controlling their pain? Andy said yes that does happen occasionally.i asked Andy to recommend Butrans to these patients and give them Butrans patient information booklet,Andy said he will do that and share with other pharmacists.we talked about insurance coverage for BWC and commercial patients for Butrans.recommended Senokot-s
PPLPMDL0020000001	Sagamore Hills	OH	44067	8/12/2011	Quick call- Caught Dr Scanlon at the window. He said he is still thinking of Butrans patients & then walked away. Spoke with Karen, nurse, & reviewed savings cards for Butrans & discussed commercial insurance coverage.
PPLPMDL0020000001	Akron	OH	44333	8/12/2011	I asked Dr. Z if his prescribing habits had changed and if he felt like there was a place for Butrans in his practice yet. He explained that he still was not treating chronic pain.
PPLPMDL0020000001	Cleveland	OH	44113	8/12/2011	talked to dr about attending Butrans dinner on aug16th,dr said she might go and i could follow-up tuesday with her.i showed dr butrans visual aid,pg.11,discussed pain conditions and we talked about chronic low back pain patients and how dr treats this condition,asked dr when she knows an opioid is appropriate,how does she choose between a short-acting and long-acting opioid,dr said she probably wouldnt start patients on long-acting opioid she would give patients tramadol to start then if they arent controlled,convert to Butrans 5mgc,i showed dr Butrans initiation guide,discussed dosing ranges and initiation of butrans and showed dr butrans patient info booklet,asked dr to focus patient discussions on application/rotation,dr agreed.i recommended senokot-s
PPLPMDL0020000001	Cleveland	OH	44109	8/12/2011	dr said he's not prescribed Butrans,its another patch like Duragesic,showed dr butrans visual aid and discussed 5 key selling messages with dr and asked him what really stood out about these messages? dr said he liked it was once weekly dosing and a CII but didnt think there was medicaid coverage? we discussed medicaid coverage and i told dr to focus on BWC and commercial insurance. i asked dr if he had patients with chronic low back pain taking tramadol every day but not controlled and asking for something different? dr said he does.i asked dr to focus on these patients and start them on Butrans,not refill tramadol or convert to another short-acting opioid,dr said he'll think about it and leave him butrans initiation guide. i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	8/12/2011	dr said butrans dinner program was very informative and she liked the speaker dr.platto.i asked dr if there was anything she heard that was new to her,dr said not really as i have told her all of the same clinical information,she was more interested in speaking with physicians that have real world clinical experience with Butrans.i asked dr if she can think of a couple patients taking vicodin,daily,for their chronic pain but asking for something else? dr said yes and she's going to start a few patients on Butrans and see what happens.told dr to focus on BWC and commercial plans.i recommended Senokot-S
PPLPMDL0020000001	Lyndhurst	OH	44124	8/12/2011	Reminded doc that Butrans is a CII and can be called in and refilled. I asked if she is prescribing with refills. She said she has once she determines that patients are stable on it and at the right dose. I also reminded her that steady state is reached in 72 hrs and titration can be done at that point.
PPLPMDL0020000001	Akron	OH	44319	8/12/2011	I explained the message I had been focusing on in the field with my physicians and the ideal Butrans patient type utilizing the initiation and titration guide. I asked about movement and they said there had been a little but none recently.
PPLPMDL0020000001	Cleveland	OH	44111	8/12/2011	Spoke with Jim, we reviewed the Butrans medication guide and the important things to tell patients when they first get Butrans. We discussed the application and rotation and steady state in 3 days. He agreed to give medication guides to the patients. We reviewed OxyContin as an option when Butrans may not provide adequate analgesia.
PPLPMDL0020000001	Independence	OH	44131	8/12/2011	Caught Roman at the window. I handed him Butrans savings cards. He thanked me & said he had wanted those. He added that he did not have time today to talk & to stop back another time so we could discuss Butrans & the program. I agreed & gave him my card, asking him to call me if he had any questions.
PPLPMDL0020000001	Cleveland	OH	44135	8/12/2011	We reviewed the key messages for Butran. I showed the inclusion criteria and Dr said that he treats all of those conditions. He said that he sees a big place for Butrans in his practice and asked about use in geriatric patients. We reviewed the FPI regarding geriatric patients but I let him know that managed care for Medicaid and Med D patients will be a pain. He said that he does have many medical mutual patients that that he would still be able to prescribe Butrans for them. We reviewed the savings cards and medication guide for patients. I also discussed this with Erica the office manager and she will make sure that Butrans patients get a savings card and medication booklet. Dr said that he prefers not to prescribe OxyContin due to risk of abuse and diversion. He said he does have a few patients who he feels comfortable maintain OxyContin. We reviewed the OxyContin
PPLPMDL0020000001	Beachwood	OH	44122	8/12/2011	Spoke with Yvonne (MA) who said that Dr Tabbaa was running much too far behind today to see reps. I requested the nurse or resident but she said they are also in with patients & it was simply not a good day.I discussed with her the patient information guides, along with application, rotation, & disposal. She said she would take some guides & give them to Dr Tabbaa & his nurse. I asked if she has heard any patient feedback or questions regarding Butrans, but she said she has not. She promised to give Dr Tabbaa the Butrans information & remind him & said to try back another time. She also said they are still not doing lunches there. I asked if they needed OxyContin savings cards but she said they were well-stocked for now.
PPLPMDL0020000001	Cleveland	OH	44109	8/12/2011	talked to Erin,Pharmacist,about Butrans stocking,any scripts she's filled for Butrans and Erin said she's not seen any lately for Butrans.i asked if Erin would recommend Butrans,to patients and give Butrans patient information booklets,if they arent controlled on their short-acting opioids and asking for something different? Erin said she will do that as they provide patient counseling for patients taking opioids.i showed Erin Butrans 5 core selling messages,in Butrans visual aid,erin liked that Butrans has 7 days of buprenorphine delivery and is a patch so we discussed both,discussed formulary coverage for Butrans and i recommended Senokot-S
PPLPMDL0020000001	Bedford Heights	OH	44146	8/15/2011	Spoke with Susan, office manager. She said she would request an appointment for me with Dr Hochman. She asked me to remind her what Butrans was so that she could tell him when she was requesting the appointment. Reviewed Butrans indication, dosing, delivery system, & appropriate patient type. She said she knows that the nature of the practice will be changing somewhat with the new House Bill, although she could not be more specific. I asked her to give Dr Hochman Butrans literature when she was requesting the appointment & she agreed to give it to him. Also discussed OxyContin savings cards & eligibility requirements for all savings programs (ie no government insurance).
PPLPMDL0020000001	Rocky River	OH	44116	8/15/2011	Quick call with Katrina, we reviewed the Butrans medication guide and import things to let the patients know. She still has not seen movement of Butrans at this location. We discussed appropriate patients for Butrans and OxyContin and she said that they do have some patients who might benefit from long acting instead of vicodin month after month. She would not usually call a Dr to recommend unless they were taking more than the allowed pill amount.
PPLPMDL0020000001	Parma	OH	44129	8/15/2011	Spoke briefly with Linda & reminded her of previous Butrans conversations. She said she does not understand why she has never seen any activity for it. Reviewed appropriate patient type & asked her thoughts on what area practitioners may be interested in hearing more about it based on that patient type. She said she did not have any specific recommendations. Reviewed savings program & discussed OxyContin cards, although she reminded me that they do not stock it there.
PPLPMDL0020000001	Uniontown	OH	44685	8/15/2011	Dr. Stetler said that he has continued to initiate Butrans therapy to appropriate patients. He said that when he talks with certain patients they prefer oral medications. I asked if he always lets the patients choose their medications and he said he just didn't want of complaints and call backs.
PPLPMDL0020000001	Parma	OH	44129	8/15/2011	Quick call- Positioned Butrans for appropriate patients who are not well-controlled on their short-acting around-the-clock treatment for chronic pain. Dr Ortega said he is still finding patients & then walked away. Spent time with Cindy, reviewing appropriate patient type & savings eligibility for Butrans & OxyContin. She said she has not heard anything from any of the patients nor has had any managed care concerns.



PPLPMDL0020000001	Lakewood	OH	44107	8/15/2011	Dr told me he has not saw the right patient for Butrans. I showed the inclusion criteria and asked if he sees any of these conditions. He said he does. I asked why those might not be to try Butrans. He said that they would be but many times they are already on other opioid and it will be hard to switch them. I asked him to switch them when they are asking for a change- either in dose or medication and he said he will keep it in mind. We reviewed OxyContin is still an option when Butrans may not provide adequate analgesia.
PPLPMDL0020000001	Akron	OH	44333	8/15/2011	I asked Dr. Ahmad how often patients are calling in complaining about their current SA therapy? How often are they asking for more of it? He said patients are calling in often complaining of both. I asked if he would feel comfortable initiating therapy to those patients and he agreed he would/
PPLPMDL0020000001	akron	OH	44333	8/15/2011	I asked Dr. Bashor if he would feel confident initiating Butrans therapy instead of low dose hydrocodone for patients with the right type of managed care and he agreed he would.
PPLPMDL0020000001	Cleveland	OH	44106	8/15/2011	talked to dr about Butrans fpi,dr said he hasnt had time to go through all of the fpi but he does understand that Butrans is transdermal and dosed once a week,dr said his only exposure to patch technology is Duragesic.we talked about who the Butrans patient is,showing Butrans visual aid,and i asked dr if he has patients taking tramadol,daily for chronic pain and perhaps having 1 of the conditions listed on pg.11 butrans visual aid? dr said yes they see a variety of pain conditions and most patients are taking opioids.i asked dr if he would start a couple patients,per our discussion,on Butrans instead of refilling tramadol or converting patients to another short-acting opioid? dr said he'll consider it but needs to still read through Butrans FPI and feel more comfortable with this medication.dr asked about insurance coverage,told dr to focus on commercial patients and discussed Butrans patient savings cards.i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44106	8/15/2011	talked to Sue,Medical Receptionist,about seeing dr and Sue said dr only meets with reps if he wants to, i can leave info and she'll pass along to dr.i gave Butrans fpi,initiation guide,patient info booklet,formulary grid,webcast invites,8/16 dinner invitation,OxyContin fpi,conversion guide,formulary grid and my business card.
PPLPMDL0020000001	Lakewood	OH	44107	8/15/2011	Quick reminder about Butrans. I asked if there was anything i could do to help remember Butrans, he said he has the savings cards out on his counter and he will keep it in mind. Reminder to use the savings cards for OxyContin as well.
PPLPMDL0020000001	Lakewood	OH	44107	8/15/2011	Quick call, asked Dr if he saw any benefit to Butrans, He said he will think about it and took the invitation guide. I asked if there was any other info i could provide he said he will let me know. Reminder that OxyContin is also still a long acting option and gave an OxyContin conversion guide.
PPLPMDL0020000001	Garfield Heights	OH	44125	8/15/2011	Spoke with Dave & discussed Butrans patient type. He said after the initial prescription, he has not seen any more. He said there were no particular area physicians that came to mind as having a lot of patients fitting that indication. He said he does see chronic Vicodin & tramadol patients though. Also discussed OxyContin savings cards, which he said he has enough of for now.
PPLPMDL0020000001	Fairlawn	OH	44333	8/15/2011	I asked Dr. Oyakawa his thoughts on Butrans therapy and how he felt about the molecule Buprenorphine. He said he liked the idea of this medication and felt comfortable with the molecule. I asked if there was anything more he felt like he needed to know before prescribing for the first time and he said no and that he would keep it in mind.
PPLPMDL0020000001	Cleveland	OH	44109	8/15/2011	talked to Ron,Pharmacy Manager,about Butrans scripts and Ron's not seen any Butrans scripts.i asked Ron if he provides patient counseling to those patients taking opioids for their chronic pain? Ron said yes he does provide some patient counseling.i asked Ron if he would recommend Butrans to patients taking short-acting opioids, for chronic pain, and arent controlled and perhaps asking for some advice from Ron,for another medication? Ron said he will do that and asked what he could give to patients about Butrans.i showed Ron the Butrans patient information booklet,asked him to focus discussion on application/rotation of Butrans and have patients talk to doctors about Butrans.Ron agreed to do this.i asked him to recommend Senokot-S for patients with opioid induced constipation.
PPLPMDL0020000001	Cleveland	OH	44106	8/15/2011	I talked to Ann,Receptionist,who said dr doesnt meet with reps,i can leave information and she'll look at it and will call me if interested.I gave Ann Butrans fpi,initiation guide,formulary grid,webcast invites,dinner program invitation,patient information booklet and my business card also left OxyContin fpi,conversion guide,formulary grid for dr too.
PPLPMDL0020000001	Independence	OH	44131	8/15/2011	Dr Trickett saw me at the window & said she has had no feedback from her latest Butrans patients but is still looking for more. She then walked away. Spoke with Steve & asked him to give her the E-Detail invite, which he agreed to do. Also discussed appropriate Butrans patient type & savings cards/commercial insurance coverage. Confirmed lunch with him where he said he is sure i will get more time to discuss Butrans with her.
PPLPMDL0020000001	Cleveland	OH	44106	8/15/2011	worked pain management dept and oncology
PPLPMDL0020000001	Fairlawn	OH	44333	8/15/2011	I asked Dr. Weidman if she felt there was truly a place for Butrans in her practice. She said she thought there was a place for it but still did not feel entirely comfortable prescribing it. I asked what more she felt like she needed to know before prescribing it and she said she would review the FPI.
PPLPMDL0020000001	Cleveland	OH	44106	8/15/2011	i talked to Roger,Pain Fellow,about Butrans fpi and 5 core selling messages in Butrans visual aid.Roger said he's seen info here in clinic about Butrans but hasnt started anyone on Butrans yet and asked if the attending physicians were prescribing,we discussed all of that information and i asked Roger how he treats his patients with some of the conditions listed on pg.11? Roger said if patients have osteoarthritis he'll give muscle relaxers,arthritis medications first,non-opioid therapy at first,but if patients have chronic pain he's typically given them tramadol.dr said if pain is persistent and tramadol doesnt work then he'll go to vicodin,just how he's been trained.i asked dr based on Butrans 5 core selling messages,what stood out to him? dr said once weekly dosing option and transdermal delivery.i asked dr if he had a couple patients he would see today or tomorrow,taking tramadol daily but not controlled,where he could start them on Butrans instead of refilling tramadol? dr said he's sure he'll see patients like that and will consider Butrans.dr asked about insurance coverage so we discussed commercial insurance and BWC.i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44114	8/15/2011	gave dr Butrans dinner invitation for 8/16 and dr said she is going to attend and is looking forward to hearing the physician speak about Butrans.i asked dr when she see's certain pain conditions,showed pg.11,butrans visual aid,how is she deciding when an opioid is appropriate? dr said she tries all non-opioid options first for patients with osteoarthritis,thats the condition she talked about.dr said if patients have chronic pain,he'll give tramadol first and if that doesnt work she would consider Butrans.we talked about initiation of butrans,showed initiation guide and i asked dr to start a couple patients like we discussed on Butrans instead of starting them on tramadol,dr said she might consider it but usually starts with short-acting opioids and if that doesnt work now she's thinking about Butrans after that.we talked about BWC and commercial patients trying Butrans.i showed dr pg.11,butrans visual aid,discussed pain conditions listed dr focused on patients with chronic low back pain and his treatment algorithm.dr said when patients say NSAID's arent controlling pain,he starts them on tramadol 50mg,1-2 pills q6h.i asked dr what he does when that regimen isnt working for patients? dr said he'll either increase dosing interval to Q4h or increase tramadol dosage strength to 100mg.i told dr right there is the Butrans patient,so these same patients that meet Butrans indication that are taking their 1st initial dose of tramadol when that doesnt control pain,dont increase dosing interval to q4h or increase dosage strength but start them on Butrans.dr said ok,earlier in therapy makes sense as he normally will max patients out on tramadol and go to vicodin after that and then percocet and then if patients need a long-acting opioid,he'll start patients on OxyContin.we talked about OxyContin being appropriate for patients,but before OxyContin and right after the 1st dose of tramadol isnt controlling patients pain,i asked dr to start a few patients on Butrans.dr agreed saying he'll consider that option as he does like patch technology but keeps forgetting Butrans is a CIII.dr asked about insurance coverage on medicalid? i told dr to focus on BWC,commercial as these are 2 biggest plans for his practice and Tricare patients.dr said ok.i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	8/15/2011	showed Dale,PA,Butrans visual aid,pg.11,discussed pain conditions listed and focused on patients with chronic low back pain and dale shared with me his treatment plan for most patients that starts with no opioids then as patients disease progresses and chronic pain is present he normally starts patients on tramadol,but now that Butrans is an option he's considering Butrans for them.i asked Dale if he had a few patients in the hospital or out-patient that are taking tramadol,daily and not controlled? dale said yes he has a lot of these patients and is considering Butrans,we discussed initiation of Butrans showed initiation guide and discussed formulary coverage,focused on BWC and commercial patients. i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	8/15/2011	talked to dr about pg.11,butrans visual aid,asked how he treats the pain conditions listed,dr talked about osteoarthritis and giving non-opioid therapy first,dr said he'll give muscle relaxers,arthritis medications,physical therapy and if patients are having chronic pain he would probably start with tramadol.i asked dr how Butrans fits into this algorithm? dr said he tells patients if they sleep 6 hours a day,they are awake for 18hrs/day and have to work,function in life so that means they should only be taking their pills,like tramadol,as prescribed,which could be 1-2 pills BID,dr said when he hears patients say they are taking more pills on bad days and those days are more often during week,he's thinking of Butrans for them.i asked dr how he describes Butrans to patients? dr said he tells them its easy,once weekly dosing application,shows Butrans patient information booklet and tells them 4 patches a month.i asked dr if he had a couple patients coming in this afternoon or tomorrow,like we discussed,that he can start on Butrans and not refill their tramadol? dr said yes he does and will consider Butrans.focused dr on BWC and commercial patients.we talked about OxyContin being an option,with 7 tablet strengths for titration and formulary coverage. i recommended Senokot-S
PPLPMDL0020000001	Akron	OH	44333	8/15/2011	I asked Dr. Shah if he had been initiating Butrans therapy to patients failing or asking to be titrated on their current therapy like we had previously talked about. He said that he was keeping it in mind for those patients and would continue to do so. I reminded him that Butrans was 7 days.
PPLPMDL0020000001	cleveland	OH	44135	8/15/2011	I asked Dr if he has been seeing success with the few patients he started on Butrans. He said he has but the biggest problem is that he sees mostly Medicaid and Med D patients. I asked him to focus on commercial and BWC and he said he does have some BWC patients and he agreed to keep it in mind. I asked Dr if he would come to our dinner tomorrow and he will see.
PPLPMDL0020000001	Cleveland	OH	44103	8/15/2011	talked to April, receptionist, about Butrans 5 core selling messages and April said she thinks both doctors would be interested in speaking with me about Butrans but right now they arent allowed to book any appointments or lunches, all she can do is take my information and give to doctors and if they are interested in speaking with me, they will contact me. i asked April to tell me what really stood out to her after looking at 5 Butrans core selling messages? April said the fact Butrans is a patch and dosed once a week, she thinks some patients might prefer that over pills every day. i told April i appreciated her time and would follow-up in a few weeks to see what doctors said about Butrans fpi, initiation guide, left webcast invitations, Butrans 8/16 dinner program and patient information booklet with my business card.
PPLPMDL0020000001	Rocky River	OH	44116	8/15/2011	Spoke with Elani, we reviewed the Butrans medication guide and import things to tell the patients who start on Butrans. We reviewed steady state in three days and where and how to apply the patch. We discussed appropriate Butrans patients per the invitation guide and other patients who might be appropriate for OxyContin
PPLPMDL0020000001	Bedford	OH	44146	8/15/2011	I showed Dr Haddad inclusion criteria for Butrans studies & asked if these are conditions he treats regularly. He said they are very common in his practice. I asked him to tell me more about each of them. He went on to explain spondylolysis & spondylolysis. I asked if it is common that they are treated with opioids. He said usually NSAID's/COX-2's are used first, along with physical therapy. He said if someone is still in pain, opioids may come into play at that time. I let him know that these are the types of conditions Butrans was studied in for safety & efficacy. I asked him if he could see himself using Butrans in patients like this. He said if they have the right insurance. He also said that we "have a new competitor". I asked what he meant. He said Nucynta. I told him i can only speak to Butrans, which is used for chronic moderate to severe pain. I also reminded him of once weekly dosing & seven days buprenorphine delivery in one application. He said he does think Butrans is a good product.
PPLPMDL0020000001	Lakewood	OH	44107	8/15/2011	Quick call at window, i told Dr that i know managed care for Butrans is a concern for him based on previous discussions. I reminded Dr to give patients a savings card for Butrans and that commercial patients should have a low as a \$15 copay each month. Reminder that OxyContin is an option that is covered on Medicaid.
PPLPMDL0020000001	Parma	OH	44129	8/15/2011	I showed Dr Taylor the Butrans study inclusion criteria & named some of the conditions to her, asking if these were consistent with the types of patients she treats in her office. She said "absolutely- all of them". I asked if they commonly present with pain & she again said yes. I told her these were the inclusion criteria in Butrans studies for safety & efficacy & asked her thoughts. She said she could see herself using Butrans in that type of patient. She also added that she actually talked about Butrans with a patient recently & offered it as a treatment option, but the patient declined. I asked why. Dr Taylor said the patient did not want to come off Vicodin. I asked Dr Taylor if she thought this patient may be receptive to the idea of Butrans if she did not have to immediately stop taking Vicodin, but rather could keep a reduced supply on-hand for breakthrough pain. Dr Taylor said that was a possibility & that she would mention that to the patient next visit. She said that she "has been thinking of Butrans more", which she said was a good sign for me. I reminded her that it was not me, but her patients, who she had originally told me she thought could benefit from Butrans.

	Cleveland	OH	44106	8/15/2011	talked to dr about patients taking 50mg tramadol,1-2 pills daily,for chronic pain and when thats not working,how does he make decision as to next step in therapy? dr said if its the first time patients are saying their tramadol isnt working anymore,he'll usually refill tramadol but increase dosing frequency,if its several times patients have said their medication isnt lasting long enough,working,etc,he'll consider increasing dosage strength of tramadol until he's maxed patients out on tramadol.dr said he knows butrans is a great option for patients early on in therapy as he prefers long-acting medications and likes transdermal technology.i asked dr if he could think of a couple patients like we discussed that he could start on Butrans and not refill tramadol? dr said he will consider Butrans for some patients and has been recommending Butrans to the attending physicians here at UH/Pain Management focused dr on commercial patients to give Butrans patient savings cards to them.i recommended Senokot-S
PPLPMDL0020000001	Beachwood	OH	44122	8/15/2011	I showed Dr Warren the inclusion criteria for Butrans studies & asked if they were conditions that he saw in his practice. He said he sees them all frequently. He asked if that meant those were the types of conditions that Butrans would be effective in. I told him yes & that they were the inclusion criteria for Butrans safety & efficacy studies for moderate to severe chronic pain. He looked surprised & said that he will definitely keep that in mind for those patients, then walked into a room. Spoke with Donnie & Alisa (nurses) & reviewed this data with them. Also discussed Senokot-S for medication-induced constipation & gave samples.
PPLPMDL0020000001	Brooklyn	OH	44144	8/16/2011	Spoke with Audrey (MA) in effort to get a lunch, appointment, or any time at all with Dr Deeb. She said she would move my card to the front of the pile, but that was all she could do to try to get me to see him. I reviewed the Butrans appropriate patient type, dosing, & delivery system. I asked if I could leave some literature for him, but she said I could not leave any information for him as he would not accept any literature at all. I reminded her that I have only seen Dr Deeb one or two times since launch in January. She said she would do her best. Also discussed OxyContin savings cards, but she said they did not need any.
PPLPMDL0020000001	Westlake	OH	44145	8/16/2011	Dr not happy today. He told me that the owners of his practice want his schedule filled with patients even if some of the patients are not trustworthy or seeking pain meds. He said he can't take seeing these types of patients any longer and he is miserable. I asked if I could do anything to help choose the right patients for opioids and he already does everything that he can. He has dismissed patients, but then his schedule is not as full and he gets yelled at by the owner. Spoke with Angela and Daniele and they have done a few prior auths to get Butrans through on Medicaid.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	8/16/2011	I asked Dr. Axem what she felt the biggest benefit of Butrans was for her patients. She said he liked the fact that it delivered the medication for 7 days and that it was a schedule 3 and said he would keep it in mind for appropriate patients.s
PPLPMDL0020000001	Cleveland	OH	44130	8/16/2011	Spoke with MA Kim & reviewed Butrans appropriate patient type, including those who call too soon for refills or who say their short-acting medication is wearing off too quickly. She said she would remind Dr Lash & would give him the Butrans information I left behind. Also reminded her of insurance coverage & savings cards for Butrans & OxyContin & reviewed eligibility requirements.
PPLPMDL0020000001	Independence	OH	44131	8/16/2011	Spoke with MA Kathi & reviewed Butrans appropriate patient type. I asked if she gets calls from patients saying their medications such as Vicodin or tramadol are wearing off too quickly or who call too soon for refills. She said she gets these calls frequently. Discussed this as a potential Butrans patient type. She said I could leave information for Dr Reddy as a reminder, so I gave her an initiation guide to give to him. Discussed OxyContin savings cards & OTC products.
PPLPMDL0020000001	Lakewood	OH	44107	8/16/2011	I asked Dr to come to tonight's program, she does not usually go. We reviewed the appropriate patients for Butrans and I asked if she would give it a try. Reminder that OxyContin is an option when Butrans may not provide adequate analgesia.
PPLPMDL0020000001	Cleveland	OH	44106	8/16/2011	talked to dr about pg.11 butrans visual aid,pain conditions and dr talked about his chronic low back pain patients and how he treats them with NSAIDs,muscle relaxers,injections,etc,before he'll start patients on opioids.I asked dr how he treats chronic pain for these patients when they do need an opioid? dr said tramadol,50mg,1-2 tabs,q6h.i asked dr to start a couple patients on Butrans when that first tramadol dose isnt controlling patients pain and not refill tramadol or increase dosage strength.dr said ok and he has started a few patients on Butrans recently.I asked dr to focus on commercial insurance patients and discussed patient savings cards.i recommended Senokot-s<font color=blue><b>CHUDAKOB added notes on 08/26/2011</b></font><font>Some different types of questions to ask might be:"Dr. what do you expect to happen if you prescribe Butrans for a patient or two?" " Dr. what drawbacks do you see to prescribing Butrans"? Dr. what is the downside to prescribing Butrans for the appropriate patient?"
PPLPMDL0020000001	Cleveland	OH	44130	8/16/2011	Spoke with Brenda, Dr Peleg's RN. She said he would not come back to lunch as he does not like to talk to reps. Discussed Butrans with her, delivering 5 core messages & discussing CII & box warning. Also reviewed abuse/addiction potential. Spent time going over initiation guide & appropriate patient type. She said Dr Peleg has many patients who sounded like they might be good candidates. Discussed managed care & savings cards. She said she would tell Dr Peleg about Butrans & recommend it for a few patients because she thought it seemed like a good option. Showed her demo kit & sample carton. Also discussed OxyContin managed care & savings
PPLPMDL0020000001	Independence	OH	44131	8/16/2011	I showed Dr Sundaram the PK profile page of the main visual aid again & reminded him of our previous conversation where he had told me that he liked that Butrans offered a constant delivery of drug over the dosing interval. He said he remembered & that is a feature he likes. I told him that this does not suggest, (nor do we have data that suggests), that that means Butrans is more safe, efficacious, or "better" in any way. He said he didn't think that's what we were talking about. I explained that it was important that I make sure to tell him this as I did not want to mislead him in any way. He thanked me but said he didn't think anything of it. Discussed appropriate patient type, including those who are not well-controlled on their short-acting around-the-clock opioid medication. Reminded him of conditions such as spondylolysis & spinal stenosis as possible Butrans patients. He said that he has tried a couple of patients but not very many & asked if it is "catching on" with other area physicians. I told him a variety of physicians/specialties have had success with Butrans in treating patients' pain, although it, like any other medication, will not work for everyone. Reminded him of CII & abuse/addiction potential. Also discussed OxyContin q12h as a long-acting option for patients beyond Butrans 20mcg.
PPLPMDL0020000001	Cleveland	OH	44130	8/16/2011	Introduced Butrans to Dr Volweiler, delivering 5 core messages & alerting her to box warning. Discussed CII & abuse/addiction potential. She asked how it compares to fentanyl. I told her we have no comparative data & that fentanyl patients were excluded from studies. Showed initiation guide & spent time going over appropriate patient type. Discussed adverse events & showed FPI. She asked if absorption depends on the amount of adipose tissue a patient has. I told her no specific studies have been done to study this & asked to submit her question to medical services, but she declined, saying she would read the FPI, although I told her the information is not there. Showed her sample carton & demo kit. She said the adhesive seemed like it would be effective for the full 7 days. Discussed managed care & savings cards. I asked if she has patients who she can think of who may be good candidates for Butrans & she said she does have some. She said having a long-acting CII medication fills an area no other medication has. Discussed OxyContin 7 available tablet strengths, including intermediate strengths of 15, 30, & 60mg. She said she usually doesn't think of those doses. Also reviewed managed care & savings.
PPLPMDL0020000001	Cleveland	OH	44130	8/16/2011	Introduced Butrans to Dr Warren, delivering 5 core messages & alerting him to box warning. Discussed CII & abuse/addiction potential. I asked if he, in his specialty, sees patients on the more moderate pain side in addition to more severe pain & he said he does as not all cancer is severely painful. Discussed appropriate patient type at length & asked his thoughts on transdermal systems. He said he finds that they can be effective. He asked how Butrans compares with fentanyl. I told him we have no comparative data & that fentanyl patients were excluded from studies. Showed initiation guide pg 6 & spent more time on patient type, focusing on more "moderate" pain as well as commercial insurance. He said he likes the idea of the medication being delivered constantly over the 7 days. Told him this does not mean Butrans is any more efficacious or safe than short-acting & he said he understands that. Discussed savings cards for commercial insurance patients. I asked if he has patients who he can see himself prescribing Butrans for & he said he does. He asked about use in hospice. I told him cost can be an issue but I have had physicians tell me they use it in hospice patients. He said he plans to prescribe. Discussed OxyContin 7 tablet strengths, including intermediate doses. He said he forgets about those. Also discussed savings cards & went over them with nurses.
PPLPMDL0020000001	Akron	OH	44310	8/16/2011	I asked Dr Cremer how often patients are calling in complaining about their current SA therapy? How often are they asking for more of it? He said patients are calling in often complaining of both. I asked if he would feel comfortable initiating therapy to those patients and he agreed he would/
PPLPMDL0020000001	Cleveland	OH	44104	8/16/2011	talked to Wanda,Receptionist,who said Dr.Barry is NOT doing lunches with rep's this year,i can leave info on our products and if the dr wants to meet with me she'll call me.left Butrans fpi,web cast invitations,initiation guide and patient info booklet with my business card.<font color=blue><b>CHUDAKOB's query on 08/26/2011</b></font>Amy, a non-HCP call is only on a health care professional such as a nurse, or an MA. A receptionist is not considered a health care professional and therefore should not be entered as a call. Thank you for checking out Dr. Barry as we discussed.<font color=green><b>BROOKAM's response on 08/29/2011</b></font>oh okay thanks i thought they were included for whatever reason, thanks for pointing that out.<font color=blue><b>CHUDAKOB added notes on 08/30/2011</b></font>Thank you!
PPLPMDL0020000001	Cleveland	OH	44195	8/16/2011	left dinner program invitations for Butrans dinner tonight for Dr.Calabrese,Dr.Long,Dr.Chatterjee,Patty Paccos and Betsy Kirschner,NP-rheumatology dept,left invites for Dr.Davis,Dr.Budd,Dr.Pelley-Oncology dept, left invitations for Dr.Kriegler,Dr.Mays,Dr.Spears and Dr.Stillman-Neurology dept - all for Butrans dinner program tonight
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/16/2011	I asked Dr. Crawford his thoughts on Butrans therapy and how he felt about the molecule Buprenorphine. He said he liked the idea of this medication and felt comfortable with the molecule. I asked if there was anything more he felt like he needed to know before prescribing for the first time and he said no and that he would keep it in mind.
PPLPMDL0020000001	Richmond Heights	OH	44143	8/16/2011	SPoke to Mel about the stocking and movement of butrans. He confirmed "both" strengths. He has a patient (medicaid) that got it for about \$4(supplemental) insurance. I explained the savings card program and the patient info guide. He wanted savigns cards. I explained the positioning of butrans and the indication. Reviewed the formulary grid.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	8/16/2011	I asked Dr. DiLauro about the success patients were having with Butrans and she said she felt patients were having success for the most part. She said that based on the success rate with Butrans she would feel confident continuing to prescribe for opioid experienced patients. I reminded her that Butrans had also been studies in opioid na rive patients.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	8/16/2011	I asked Dr. DiLauro if she felt there was truly a place for Butrans in her practice. She said she thought there was a place for it but still did not feel entirely comfortable prescribing it. I asked what more she felt like she needed to know before prescribing it and she said she would review the FPI.
PPLPMDL0020000001	Parma	OH	44134	8/16/2011	I asked Dr Hernandez what a typical patient is already on when they come see him for the first time. He said it depends on the patient & can range anywhere between Tylenol or Advil to Vicodin, Percocet, & OxyContin. I reminded him how he had told me that he usually thinks of Butrans for patients who say their pain is a 3-4 on the pain scale. He said this is correct. I asked him if he asks each patient that question on every visit & he said yes. He said he finds Butrans to be effective in the patients who he has chosen for it so far, so that has been his criteria. He said he plans to continue doing so & also said he will continue to prescribe OxyContin for patients in low doses, like the 15mg, which he said he likes to use.
PPLPMDL0020000001	Westlake	OH	44145	8/16/2011	I asked Dr to come to tonight's dinner program, he said he will probably not make it since he is fasting. Kelly told him that he should try to go to more events in order to network with Drs. He said maybe next month would be better but not a Wed night. I asked if I can do anything to help support Butrans on formulary, he said they are all set and he will keep me posted. He said the couple of patients he has on Butrans are doing well and he will continue to prescribe.
PPLPMDL0020000001	Lakewood	OH	44107	8/16/2011	I tried to get commitment from Dr to come to tonight's Butrans program, he will not be able to make it this time. We discussed Butrans as an option instead of vicodin for patients that have pain conditions in the inclusion criteria. He agreed to give it a try. He had not heard anything from the patient he prescribed for. Reminder that OxyContin is an option when Butrans may not provide adequate analgesia.
PPLPMDL0020000001	Cleveland	OH	44143	8/16/2011	Showed doc the Butrans demo patch and reminded him of our lunch 2 weeks ago. He immediately said he wrote a couple of scripts. No time to ask him more. Spoke to Angela who was not aware of any scripts written. I reviewed the formulary coverage and the positioning. Gave her e-detail and formulary grid.
PPLPMDL0020000001	Lakewood	OH	44107	8/16/2011	I asked Dr how his current patients are doing on Butrans and if he is happy with it, he said he thinks he still has a few patients on it. He said to ask Pat, she had stepped out. I asked if he would continue to try Butrans instead of increasing the dose of short acting and he agreed. Asked Dr to come to tonight's program and he will think about it. Reminder that OxyContin is still a long acting option.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/16/2011	I asked Dr. Pitt if he would feel confident initiating Butrans therapy instead of low dose hydrocodone for patients with the right type of managed care and he agreed he would.
PPLPMDL0020000001	Cleveland	OH	44106	8/16/2011	worked pain management dept-see call notes on sahjal and hayek, worked family medicine dept-left Butrans dinner invitation for 8/16th and webcasts for dr marsh and dr truaxx
PPLPMDL0020000001	Brooklyn	OH	44130	8/16/2011	Spoke briefly with Renee* (pharmacist) & her technician Nicole. Renee* said they have not seen any increase in Butrans activity, but do have a few customers on it regularly. She said she has seen one or two prescriptions that have been for Medicaid or Medicare that have not gone through, however. Reminded her of insurance coverage & savings for Butrans & OxyContin. She said she would let me know if she sees any changes with Butrans between now & my next visit.
PPLPMDL0020000001					

	Cleveland	OH	44113	8/16/2011	talked to dr about patients he's considering appropriate for Butrans,dr said patients he's started on Butrans have been taking 40mg vicodin/daily and not controlled and wanting something else so he's only tried Butrans there.showed dr Butrans visual aid,pg.11,pain conditions and asked dr if he see's some of these pain conditions? dr said he see's them all and treats with appropriate medications for each pain condition,such as osteoarthritis he would prescribe an arthritis medication,low back pain he would prescribe muscle relaxers,request patients go to physical therapy,etc.dr said when patients come to him majority of time they have already tried tramadol or other narcotics.i asked dr if patients come to him with osteoarthritis and have tried tramadol and thats not controlled pain,will he consider starting these patients on Butrans? dr said he would if patients were willing to wear a patch once a week.dr said he thinks Butrans should be used earlier in therapy so he'll consider that option.asked dr to focus on BWC and commercial insurance patients and patient savings cards.
PPLPMDL0020000001	Cleveland	OH	44106	8/16/2011	showed dr butrans visual aid,pg.11 pain conditions and asked dr how he treats these specific types of pain conditions,dr focused discussion on osteoarthritis patients and said he would give arthritis medications,send patients to physical therapy,NSAID's,etc and when that doesn't work and patients have persistent chronic pain he will prescribe an opioid. dr said in past he would have given patients a short-acting opioid analgesic but now with Butrans he will consider it an option for patients earlier in therapy.i asked dr to think of patients like this that are taking tramadol every day and instead of refilling tramadol or converting to another short-acting opioid,to start them on Butrans? dr said he will consider that option,we talked about how he explains butrans to patients and dr said he thinks its easy to sell patients on Butrans with once weekly dosing option,we talked about insurance coverage and i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	8/16/2011	i talked to dr about 5 core selling messages,dr focused on Butrans being transdermal and once weekly dosing option,dr said she is finding it easy to explain to patients and patients are getting their pain controlled with Butrans.dr said she still gives short-acting opioids,but less monthly.showed dr butrans visual aid for discussion,then discussed pg.11,pain conditions and asked dr how she treats patients with spinal stenosis,dr said she will explore all non-opioid therapies(injections,acupuncture,physical therapy,NSAIDS) and when all other options fail and patients have pain,she'll consider an opioid like tramadol since its short-acting and she'll give patients 1-2 pills daily,thats it.i asked dr how she handles the situation when these patients arent controlled on 1-2 pills? dr said at that point she'll give tramadol more frequently to patients and if need be convert them to vicodin.5mg.i asked dr to not convert those patients to vicodin and start them on Butrans.dr said she might consider it after tramadol,but she's not comfortable starting patients out on a long-acting opioid.we discussed formulary coverage for BWC and commercial insurance and patient savings cards.i recommended Senokot-S<font color=blue><b>CHUDAKOB's query on 08/26/2011</b></font>isut a thought..if she is starting patients on tramadol, she is not starting patients on a long-acting opioid with Butrans. They have already been on an opioid in tramadol. Perhaps she doesn't realize this?<font color=green><b>BROOKAM's response on 08/29/2011</b></font>she does but thanks for comment-<font color=blue><b>CHUDAKOB added notes on 08/30/2011</b></font>-Ok.
PPLPMDL0020000001	Cleveland	OH	44114	8/16/2011	confirmed dr attending dinner program tonight for Butrans discussion,dr said he's continuing to think of patients that would be appropriate for Butrans,i asked dr to tell me who those patients were,dr said patients on percocet or vicodin telling him their pills arent controlling their pain,he's talking to them about Butrans.i showed dr butrans visual aid,5 core selling messages and asked dr what really stood out to him about Butrans? dr said once weekly dosing and the fact Butrans is a patch,he likes these features and being a CIIl it makes it easier for him and his staff to call in refills.i asked dr to start a few more patients this week,with BWC or commercial insurance,that perhaps have chronic low back pain and are taking short-acting opioids daily but not controlled,dr said he will do that as a lot of their patients have chronic low back pain.i recommended Senokot-S
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/16/2011	i explained the message i had been focusing on in the field with my physicians and the ideal Butrans patient type utilizing the initiation and titration guide. I asked about movement and they said there had been a little but none recently.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	8/16/2011	i explained the message i had been focusing on in the field with my physicians and the ideal Butrans patient type utilizing the initiation and titration guide. I asked about movement and they said there had been a little but none recently.
PPLPMDL0020000001	Parma	OH	44134	8/16/2011	Spoke with James (pharmacy manager) & discussed patient information booklets. Let him know he could use it in patient counsel or give it to customers if they have questions. He said he would have to dispense it before a customer would have any questions about it. He said he has only dispensed one script. I asked if he knew who wrote it but he said he did not remember & it had been awhile ago. Discussed OxyContin savings cards as well. He said he already has most of his customers who are on it set up with savings cards, so he has not given many out lately & did not need more. He said he had no more time to talk today.
PPLPMDL0020000001	Euclid	OH	44117	8/16/2011	I asked doc what he remembers about butrans. He said that he wrote one script and the script was not covered by workers comp. He said the patient was an RTA employee who was previously on about 3 tabs of vicodin. I explained the state BWC coverage for most scripts and asked him to continue to try to prescribe. I explained the initiation dosing and that 10mcg might be appropriate for those currently taking 3 tabs of vicodin. P0stion butrans after tramadol but before vicodin ATC. If they are taking higher doses of vicodin, they may be more appropriate for Oxycontin.
PPLPMDL0020000001	Parma	OH	44134	8/16/2011	Spoke with Judy (technician) who said Marko was not available as he was busy with customers. Discussed Butrans patient type & savings program via e-voucher. Also went over OxyContin savings cards & eligibility requirements for savings programs. I asked her to give Marko Butrans information & she agreed to do this. She said to stop back another time to see Marko as he may have more information for me than she does.
PPLPMDL0020000001	Woodmere	OH	44122	8/17/2011	Spoke with pharmacist, Angie, & discussed Butrans appropriate patient type. I asked her if any practitioners in the area come to mind as having a lot of patients who seemed to fit the indication. She said no one in particular. I asked about the managed care mix that she sees at this location. She said it is probably an equal mix of Medicare, Medicaid, & commercial plans. Discussed savings for Butrans & OxyContin.
PPLPMDL0020000001	Hudson	OH	44236	8/17/2011	Spoke with Cherie (technician). She said she does not think they have dispensed any Butrans at all. Discussed Butrans appropriate patient type (including those who try to refill their prescription too soon for Vicodin or tramadol). She said they have many customers who fit that description. She also said that Beth will, on occasion, call a doctor & make a recommendation for them to consider changing the patient's medication. She said she will ask Beth to do this for patients for Butrans when she identifies those customers. Also discussed OxyContin savings cards which Cherie said they have enough of.
PPLPMDL0020000001	Hudson	OH	44236	8/17/2011	Spoke with technician & discussed Butrans E-Detail program. Also gave her Butrans overview (indication, dosing, delivery system, & appropriate patient type). She said she would give the information to Dr MacCallum. She said they still only accept literature & have a no access policy for reps, even if they have a product that was recently launched.
PPLPMDL0020000001	Cleveland	OH	44113	8/17/2011	followed up with dr,post 8/16th Butrans dinner program to get dr thoughts and dr said he really enjoyed the discussion and liked the speaker.dr said he started 1 patient on Butrans recently because the patient was taking tramadol daily for chronic pain and uncontrolled and he thought he would give Butrans another try,told dr that was great,we discussed appropriate patients to start on Butrans,showed butrans visual aid,and initiation of butrans.told dr to focus on BWC and commercial patients,dr said ok.
PPLPMDL0020000001	Hudson	OH	44236	8/17/2011	Spoke with MA Melissa & reminded her of Butrans indication, dosing, & delivery system. Also spent time going over appropriate patient type. She said she does not understand why Dr Seiple hasn't used more of it as it sounded like something he would prescribe. Discussed CII & abuse/addiction potential. She asked if it has liquid in it like fentanyl patches. Discussed adhesive matrix. I asked her to give Dr Seiple Butrans information, including REMS packet & she agreed to remind him of Butrans & give him the information.
PPLPMDL0020000001	Independence	OH	44131	8/17/2011	Spoke with Kathy (office manager) & Marie (MA) & reviewed Butrans indication, dosing, & appropriate patient type in effort to get a lunch or appointment. Kathy said they "do not do a lot with pain". I let her know that it may be helpful for them to at least learn about the product in case one of their patients comes to them already on it from another prescriber. Kathy said she asked Dr Sustersic & he said he is not interested in hearing anything about it. I asked Kathy to keep my card & to call me if they should have any questions about Butrans down the road.
PPLPMDL0020000001	Hudson	OH	44236	8/17/2011	Spoke with Kathy (MA) & inquired about savings card inventory for Butrans & OxyContin. She said they have not used any of either yet, so they did not need any. She added that she does not know why they haven't started using Butrans & asked me if it was for pain. Discussed indication, appropriate patient type (including those who call too soon for refills or say their short-acting is wearing off too quickly), CII, & abuse/addiction potential. Also discussed once weekly dosing & transdermal system. She said it sounds like a good option for a lot of their patients & that she is going to start mentioning it to Dr Tosino when she identifies a good patient for it.
PPLPMDL0020000001	Akron	OH	44304	8/17/2011	I asked Dr. Amamanbu his thoughts on Butrans therapy and how he felt about the molecule Buprenorphine. He said he liked the idea of this medication and felt comfortable with the molecule. I asked if there was anything more he felt like he needed to know before prescribing for the first time and he said no and that he would keep it in mind.
PPLPMDL0020000001	University Hts	OH	44118	8/17/2011	Quick call.....I reviewed the Butrans indication, CII status and once weekly dosing. I asked him if he has any patients that could benefit from butrans. He said maybe and asked me to just leave some information. Provided the e-detail invite.
PPLPMDL0020000001	Hudson	OH	44236	8/17/2011	Spoke with Bob who said that the patient who was using one Butrans 5mcg + one 10mcg system is now on the 20mcg strength. He said it was just called in a few days ago. He would not tell me who prescribed. I reminded him that we do not recommend wearing more than one system at a time. He said he knows, but that doctors don't always follow those guidelines. He said that is the only customer they have on Butrans at this time. Discussed OxyContin savings cards which he said he has enough of. I asked if he stocks all 7 strengths, including intermediate & he said he does.
PPLPMDL0020000001	Cleveland	OH	44114	8/17/2011	talked to Laura about butrans stocking and she's not seen any scripts for butrans so still not ordering the product.we discussed importance of stocking but laura said i know how she feels about this topic as we've discussed many times.i asked Laura if she provides patient counseling,when they are taking opioids for chronic pain and Laura said sometimes she does,i asked Laura to give patients Butrans patient information booklet and have patients discuss with dr,she said ok she would do that.i told Laura i would follow-up next month.i recommended Senokot-S
PPLPMDL0020000001	Fairlawn	OH	44333	8/17/2011	I asked the physician if he felt there was truly a place for Butrans in his practice and if he could see himself prescribing Butrans moving forward. He said yes. No new info learned.
PPLPMDL0020000001	Parma	OH	44129	8/17/2011	Dr Giogliotti said the patient he had prescribed Butrans for has not been in or called to give feedback on how she is doing so far. I asked him if he considers that good or bad. He said it must be good because he knows this patient would have called if she was not happy with the way she was doing. He checked his computer & said the patient is actually scheduled to come in this afternoon for a follow-up, so he will have an update for me the next time I come by. I asked if this meant he would continue to look for more patients to gain more clinical experience. He said yes & showed me that his initiation guide is still out on top all his magazines & paperwork so that he has it ready to go. I told him about the Initiations program & encouraged him to go through it with me. He said there was not time now. I gave him an invite for E-Detail & encouraged him to log on at his leisure. He said he I asked Dr about the types of patients that he has started on Butrans, he said that most of them are already taking vicodin. We reviewed the initiations presentation and the initiation guide. I asked if he see these types of patients in his practice and he said he does. He said overall he is having success with Butrans. He did just start a new patient on Butrans who is BWC. Another patients he wanted to try was 85 years old and on Medicare so he decided not to give her Butrans after all. We reviewed that OxyContin is an option for patients when Butrans may not provide adequate analgesia.<font color=blue><b>CHUDAKOB's query on 08/26/2011</b></font>-What was the AE? You should include these in your call notes and how you responded to them.<font color=green><b>HOLUBA's response on 08/30/2011</b></font>He said he had a female patient who became unresponsive and went to the ER who was on butrans.<font color=blue><b>CHUDAKOB added notes on 09/01/2011</b></font>-OK. Thank you for the clarification.
PPLPMDL0020000001	Fairlawn	OH	44333	8/17/2011	I asked Dr. Parisi about the success patients were having with Butrans and he said he felt patients were having success for the most part. He said he based on the success rate with Butrans he would feel confident continuing to prescribe for opioid experienced patients. I reminded him that Butrans had also been studies in opioid na. rve patients.
PPLPMDL0020000001	CLEVELAND	OH	44195	8/17/2011	talked to Jodi,Medical secretary,to dr,who said i can leave my business card and product information and if dr is interested in meeting with me,he'll contact me.i left Butrans fpi,initiation guide,patient information booklet,formulary grid and webcasts for August 2011,left OxyContin fpi,conversion guide and formulary grid for dr.
PPLPMDL0020000001	University Heights	OH	44121	8/17/2011	Quick call...I showed doc the Butrans demo and asked him what he remembers about it. He said that Its butrans, the 7 day patch. I asked him try butrans before starting a patient on vicodin ATC. Oxycontin reminder. Nothing more learned.
PPLPMDL0020000001	Cleveland	OH	44113	8/17/2011	dr said she hasnt started any patients yet on Butrans as the couple she wanted to start are Medicaid and they couldnt get Butrans covered,so we talked about dr focusing on BWC and commercial plan patients.dr said she will do that.showed dr Butrans visual aid,discussed 5 core selling messages and asked dr what really stood out to her about Butrans? dr said transdermal technology and once weekly dosing option.dr said she will start some patients on Butrans,just depends on insurance coverage.i showed dr pg.11,pain conditions and asked how she treats these types of conditions? dr focused on chronic low back pain and we talked about what therapies,non-opioid,she follows and when she needs opioids she'll go to tramadol and then vicodin.i asked dr to think of a couple patients with chronic low back pain,taking tramadol daily but not controlled,that she can start on Butrans instead of refilling tramadol or converting to vicodin,dr said she'll consider that.i recommended Senokot-S

PPLPMDL0020000001	Cleveland	OH	44114	8/17/2011	talked to dr about his thoughts/feedback on Butrans dinner program 8/16th and dr said he liked dr cheven,speaker,but was very surprised when dr cheven told him he doesnt have any clinical experience with butrans as he closed his practice and isnt seeing any patients now.dr said he will continue starting patients on Butrans as he thinks its easy for patients with once weekly dosing and its a CII so its easy to call it in for refills.showed dr pg.11,pain conditions and discussed patients with chronic low back pain and how he treats this condition.i asked dr if he would consider Butrans 5mcg before starting patients on tramadol? dr said he might if patients were willing to wear a patch for once a week and he would probably give tramadol for break through pain.showed dr butrans initiation guide and asked him to start a couple patients,as we discussed,on butrans instead of starting them on tramadol.dr said ok focused on BWC and commercial plan patients and i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44104	8/17/2011	talked to dr about pg.11,butrans visual aid,pain conditions,dr talked about patients with chronic low back pain.dr said she treats them with muscle relaxers,sends to physical therapy and most patients tend to do well and are controlled on tramadol or vicodin as they dont need to take it daily,dr said she doesnt have a lot of chronic pain patients taking short-acting opioids daily.i asked dr if she had a couple patients taking tramadol every day,for chronic low back pain? dr said yes she's sure she does.i asked dr to stop refilling the tramadol or converting these patients to vicodin,and start Butrans.dr said she will consider it and asked about insurance coverage for medicaid as thats majority of patients here.told dr to focus on commercial patients dr said ok.i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44114	8/17/2011	talked to dr about dinner program,8/16th with dr cheven and dr said she liked dr cheven as a person but was really surprised to hear him say that he has no clinical experience with Butrans. dr said she wondered WHY Purdue would have a speaker like dr cheven giving talks on butrans when he hasnt even prescribed the medication to any patients.i told dr i wasnt sure about that and would share this feedback with my manager.i asked dr if she will do anything differently post the program,dr said she will continue to start patients on Butrans and is thinking earlier in therapy for patients instead of waiting so long.we talked about butrans patient information booklet and focusing discussion on application/rotation and dr said she does discuss this with patients,i asked dr if she could focus on a couple patients this week that she could start on butrans instead of refilling vicodin? dr said she will do that.i recommended Senokot-S
PPLPMDL0020000001	Akron	OH	44320	8/17/2011	I asked Misty if she had been initiating Butrans therapy to patients failing or asking to be titrated on their current therapy like we had previously talked about. She said that she was keeping it in mind for those patients and would continue to do so. I reminded her that Butrans was 7 days.
PPLPMDL0020000001	Copley	OH	44321	8/17/2011	Dr. Machado said that head prescribed Butrans for a few patients and was pleased that he had not heard back from them. I explained steady state takes 72 hours to achieve and told him if he had call backs prior to that to encourage patients to remain on therapy. He asked about titration which I explained using the initiation guide.
PPLPMDL0020000001	Cleveland	OH	44195	8/17/2011	was able to meet dr briefly,introduce myself as Purdue rep,gave Butrans fpi,initiation guide and Butrans patient information booklet to dr as he said he didnt have time to talk longer today but would review the materials and i could follow-up next week.i shared the 5 Butrans core selling messages with dr and formulary coverage information showing grid.dr said we could talk more another time.i told dr i would follow-up next week and appreciated his time.told dr that OxyContin was still an option for patients,gave OxyContin fpi,conversion guide and formulary grid. recommended Senokot-S for opioid induced constipation
PPLPMDL0020000001	Bedford	OH	44146	8/17/2011	Dr Moufawad said that he is still trying patients on Butrans & has not given up. I asked what was really holding him back. He said that his encounter with the Pharmacy Board really is what his issue has been. I asked him if it was the Medical Board or Pharmacy Board. He said they "run together", but the Pharmacy Board really. I asked him if, going forward, this would continue to hinder his prescribing of Butrans. I added that my goal was to ensure that he was confident in prescribing Butrans & to work with him to make this happen. I asked him if he attended the webcast. He said yes. I asked him his thoughts on it. He said it was "OK", but was not as helpful as he wanted it to be. I asked what he meant. He said when he or any other physician would ask a question, the speaker, who he said was just reading a script, would say it was off-label & that he could not answer the questions. I told Dr Moufawad that it is our policy to have conversations, whether they be in an office or at a program, always be on-label. I encouraged him to phone other physicians or specialists who he respects to speak with them to find out their experience with Butrans. He said he has no time. I let him know about upcoming dinner programs, but added that this discussion will also be on-label. He said he may go depending on when they are. Started Initiations, but he said he had to go to a staff meeting & could not continue.
PPLPMDL0020000001	Cleveland	OH	44114	8/17/2011	talked to john,pa,about his feedback post Butrans dinner program 8/16th,john said he liked the speaker dr cheven,smart man and has years of clinical experience in pain management/oncology but was very suprised to hear that he doesnt have any clinical experience with Butrans,john said he's recommending Butrans to both dr katz and dr marshall and thinks its easy to get patients started on butrans if you tell them its once weekly dosing and its a patch.we talked about BWC and commercial plan patients starting on Butrans.i recommended Senokot-S
PPLPMDL0020000001	Bedford	OH	44146	8/17/2011	Spoke with Mikah (technician) who said Shay had just come in & was too busy to see me today. Presented patient information guide & discussed using it in patient counsel or giving it to customers if they have a prescription for Butrans. Also reviewed Butrans indication, dosing & delivery system. Mikah said she would give this information with my card to Shay.
PPLPMDL0020000001	Warrensville Heights	OH	44122	8/17/2011	Quick call- Caught Dr Zivic up front briefly. Positioned Butrans for patients on chronic Vicodin or tramadol who are not well-controlled. He said he would try to remember. Spoke with Stephanie & Michelle (MA) & went over savings & managed care. They said they are in the process of computer training, so their time & Dr Zivic's time were limited.
PPLPMDL0020000001	Maple Heights	OH	44137	8/18/2011	Spoke with MA Arlene & reviewed Butrans appropriate patient type. Also discussed commercial insurance coverage & savings cards for those patients. I told her about the online E-Detail program & asked her to give Dr Yager the invitation. She agreed to do this. I also told her about OxyContin savings cards but she said he does not prescribe OxyContin for anyone.
PPLPMDL0020000001	Westlake	OH	44145	8/18/2011	Quick call today, I asked Dr if he has patients coming in today who would benefit from 7 day Butrans. He said he will see and agreed to start any new appropriate patients.
PPLPMDL0020000001	Brooklyn	OH	44144	8/18/2011	Spoke with Matthew (pharmacist) & discussed Butrans patient information booklets. He said he has really only had seen one or maybe two prescriptions for it so far. I asked if either had refills or if they were just one month prescriptions. He said he doesn't think he has seen anything for refills. Discussed CII & appropriate patient type. He said they are stocked on all 3 strengths & asked me to tell physicians they have it. I told him they were on the list of pharmacies that I tell physicians stock Butrans. Offered OxyContin savings cards but he said they have some still as most of their customers on it have Medicare, Medicaid, or Worker's Comp.
PPLPMDL0020000001	Barberton	OH	44203	8/18/2011	I asked Dr. Patel what he felt the biggest benefit of Butrans was for his patients. He said he liked the fact that it delivered the medication for 7 days and that it was a schedule 3. He said he would keep it in mind for appropriate patients.
PPLPMDL0020000001	Solon	OH	44139	8/18/2011	I asked Dr Zaidi what is really holding him back from prescribing Butrans. He said he just has not seen the right patient. I asked him what he meant by that. He said that when patients come to him, they are not only already on a high dose of opioids already, but they are on multiple opioids at high doses. He said for example, some patients have come to him on OxyContin 80mg 3x per day with 6 Percocet per day for breakthrough. I reminded him that OxyContin is only approved for q12h dosing & asked what he usually does with these patients. He said he tells them that he will not continue them on that high a dose & then decreases them to what he finds to be a more "reasonable" level. He went on to say that for Butrans, he wants a patient who is taking perhaps a few Vicodin per day or maybe a few Percocet, but he simply does not have patients come in like that very frequently. I told him it did sound like he has the right idea of who the appropriate patient for Butrans might be. He said he really does not have any clinical issues with it all, it is just a matter of someone in more "moderate" than severe pain coming to him. Discussed OxyContin savings cards. He said he would like to give one to a patient who he writes 14 days of treatment at a time, so that patient would be especially grateful.
PPLPMDL0020000001	Independence	OH	44131	8/18/2011	Spoke with Natalie (MA) who said Dr Faيمان had too busy an afternoon to see me today. I asked if it would be possible to schedule a lunch. She said she would give my card & information to Dr Faيمان to request it, although she said they rarely do them. She also suggested I go to the 7th floor to submit a request with administration as well. (They were closed for the day). Discussed Butrans E-Detail program & gave her an invite to pass along to Dr Faيمان. Also discussed appropriate patient type for Butrans as she did not know what it is. She said she would leave the information for Dr Faيمان.
PPLPMDL0020000001	Brooklyn	OH	44144	8/18/2011	Spoke with pharmacy manager, Dave, who said he has not seen any more Butrans activity since my last visit. I asked if the prescription he had filled had refills on it. He said he did not remember. Discussed CII & abuse/addiction potential & spent time reviewing appropriate patient type. He asked what to advise a patient if they say the patch is coming off or loosening. I told him they could tape the edges with first aid tape or cover with Bioclusive or Tegaderm. Also discussed heat warning & advising patients of that as well. Dave said he is surprised he has not seen more activity for it. Also checked stock of their OxyContin savings cards & Dave said he has plenty for now as he has not used any since my last visit.
PPLPMDL0020000001	Independence	OH	44131	8/18/2011	Quick call- Dr Jack said he is still "thinking of" Butrans. He added that he would prescribe it "soon". I gave him an E-Detail invite & asked him to check it out online just to see what he thought of it & if it taught him anything surprising. He said he would have a look.
PPLPMDL0020000001	Mayfield Heights	OH	44124	8/18/2011	Window call....Reminded Debbie of the appropriate butrans patient - after tramadol or before going to short acting ATC. Gave her an e-detail invite and formulary grid reminder.
PPLPMDL0020000001	Westlake	OH	44145	8/18/2011	I asked Dr if he has been having success getting Butrans through for commercial insurance patients. He said he hasn't started many new patients, since it seems so many of his chronic pain patients are Med D and Medicaid. I reviewed managed care for Butrans and asked if he would continue to prescribe for appropriate commercial patients, he said that the would. at that OxyContin is an option that is covered on Medicaid.
PPLPMDL0020000001	Mayfield Heights	OH	44124	8/18/2011	window call....i asked doc if she is still having success with butrans. She said its going well and has not really had any complaints. I asked her if she still has savings cards. She told me to check with Denise. Spoke with Denise and confirmed that they are stocked. Provided e-detail invite and formulary.
PPLPMDL0020000001	Westlake	OH	44145	8/18/2011	Quick call, Dr just returned from Canada, I reviewed the key messages for Butrans and asked if he can think of any patients who might benefit from 7 day dosing. He said he will try to find a few patients, I reminded him to focus on commercial insurance for Butrans and that OxyContin is an option covered on Medicaid.
PPLPMDL0020000001	Cleveland	OH	44130	8/18/2011	Quick call- Dr Fedorko said he really had no time today. Positioned Butrans for patients who are not well-controlled on their short-acting around-the-clock opioid regimen. He said he does not have a lot of patients but will try to find some.Spoke with Mindy (MA) & Maryanne (MA) & discussed managed care status for Butrans & Ryzolt.
PPLPMDL0020000001	Cleveland Heights	OH	44118	8/18/2011	Showed doc the Butrans demo patch and reminded him of the 7 day delivery and how to properly apply the patch. Dr. Grant came in and said he wrote 2 scripts for butrans but it was not covered. I asked if he remembered if it was medicare/medicaid because Butrans is covered on most commercial plans. He could not recall. I explained the positioning of butrans to both docs and asked them to try butrans for patients that have insurance through work - either through their employer or BWC and remember to give them a savings card. Provided formulary reminder for butrans and oxycontin.
PPLPMDL0020000001	Cleveland Hts	OH	44118	8/18/2011	Showed doc the Butrans demo patch and reminded him of the 7 day delivery and how to properly apply the patch. Dr. Grant came in and said he wrote 2 scripts for butrans but it was not covered. I asked if he remembered if it was medicare/medicaid because Butrans is covered on most commercial plans. He could not recall. I explained the positioning of butrans to both docs and asked them to try butrans for patients that have insurance through work - either through their employer or BWC and remember to give them a savings card. Provided formulary reminder for butrans and oxycontin.
PPLPMDL0020000001	Parma	OH	44134	8/18/2011	Quick call- Stopped Dr Mandat in the hallway with Butrans savings cards. I told him I did not see his stock of cards & asked if he thought I should leave more. He said that while most of what he does with Butrans is in his hospice pateints, he may be able to use "a few" in the office. He then walked into a patient room. Spoke with Rebecca (nurse) & discussed Butrans savings cards & managed care coverage.
PPLPMDL0020000001	Cleveland	OH	44109	8/18/2011	worked oncology dept - left my business card,Butrans fpi,initiation guide,formulary grid and patient information booklet for Dr.Snell,Dr Hergenroeder,Dr.Tray and Dr.O'Brien and also left OxyContin fpi,conversion guides and formulary grids for doctors-had to leave all materials with medical secretaries and they show doctors and doctors decide if they want to meet with me.
PPLPMDL0020000001	Barberton	OH	44203	8/18/2011	I asked Dr. Minich if she felt there was truly a place for Butrans in her practice. She said she thought there was a place for it but still did not feel entirely comfortable prescribing it. I asked what more she felt like she needed to know before prescribing it and she said she would review the FPI.
PPLPMDL0020000001	Lyndhurst	OH	44124	8/18/2011	Quick call.....just asked doc how her current patients are doing on Butrans. She said everything is ok and she is still looking for more patients that are right for it. She was still good on savings cards. Reminded her of the formulary coverage of butrans and oxycontin.
PPLPMDL0020000001	Highland Heights	OH	44143	8/18/2011	Window call.....I reminded him of the butrans patients and asked if he needed savings cards. He said he still had Butrans and oxycontin savngs cards. I gave him patient information guides and explained how it teaches proper application and care for Butrans.

PPLPMDL0020000001	Cleveland	OH	44113	8/18/2011	dr said he started a few patients on Butrans and they seem to be doing well as their pain is controlled and he's giving them short-acting opioids for breakthrough.dr said he had 2 patients this am that he spoke to about Butrans but they are taking their pills and didnt want to stop them.asked dr how is he explaining Butrans to patients? dr said he tells them its a patch and you put it on once a week.dr said its hard as many patients like their pills,even if he started them on Butrans and gave short-acting opioids for breakthrough,they still like the thought of more pills.dr said he needs a sensible patient for Butrans.i asked dr if his chronic pain patients,which are the majority of his practice are "sensible" that he could talk to about Butrans? dr laughed and said you make a good point,probably none of them are "sensible".i told dr to think of patients with chronic low back pain,showed pg.11 visual aid,that arent getting pain controlled with short-acting opioids,to start them on Butrans and still give short-acting for breakthrough pain.dr said he will do that and is looking every day at his patients coming into office to see who's a candidate for Butrans.told dr to focus on BWC patients.
PPLPMDL0020000001	Cleveland	OH	44105	8/18/2011	talked to dr about patients with chronic low back pain,pg.11 pain conditions we discussed in Butrans visual aid,we talked about how dr treats this pain condition and at what point she will go to an opioid.dr said all non-opioid therapy choices are 1st,example is muscle relaxers,physical therapy,etc.,then if that doesnt work for patients and they have pain,dr will start them on tramadol.we talked about Butrans being an option right before she goes to tramadol,so opioid naive patients and right after patients take 1st tramadol dose and thats not controlling pain anymore,i asked dr if she had a couple patients,per our discussion,that she could start on Butrans instead of giving tramadol or increasing dose of tramadol? dr said yes she'll think of a few patients as she likes that Butrans is a patch and dosed once a week.told dr to focus on BWC and commercial patients.recommended Senokot-S talked to Abdul,Pharmacist,about Butrans stocking and Abdul hasnt ordered Butrans yet as he's waiting for 1st script of Butrans.we discussed importance of Butrans stocking but Abdul said he cant order it until he see's 1st script otherwise it'll just sit on shelf like it has at Church Square Pharmacy(he is part owner of this pharmacy too).showed Abdul Butrans 5 core selling messages and asked what really stood out to him about Butrans? Abdul said he likes that Butrans is a patch,dosed once a week and is a CIII so doctors can call in refills he thinks doctors will really like that. i asked Abdul to recommend Butrans to patients that are taking short-acting opioids but not controlled and give them butrans patient info booklet,Abdul agreed to do this.we discussed BWC and commercial plan patients.we discussed OxyContin stocking and formulary coverage for OxyContin.
PPLPMDL0020000001	Cleveland	OH	44109	8/18/2011	talked to Nasr,pharmacist,about Butrans 5 core selling messages and asked if he has recommended Butrans to any patients? Nasr said he gave Butrans patient info booklet to a few patients after they were saying their short-acting opioids werent controlling their pain.No scripts for butrans yet.i asked Nasr to continue recommending Butrans to patients and focus on application/rotation of butrans if patients come in with scripts.Nasr said ok.asked Nasr if he has any relationships with doctors where he would recommend Butrans to patients,if he hears them say their short-acting opioids arent controlling pain,Nasr said a couple doctors he could talk to about Butrans but not many its up to the doctor to make medication changes. discussed BWC and commercial plan patients.
PPLPMDL0020000001	Cleveland	OH	44130	8/18/2011	I asked Dr Diab when he has a patient who's pain is not controlled on a short-acting around-the-clock opioid, how he determines whether he would increase the patient's dose of current opioid or change them to a long-acting option like Butrans or OxyContin. He said that in medicine there is no "black & white" & asked me what I was told in training. I told him that it seems to be completely physician-dependent & that each practitioner has his or her way of practicing. He said for him, it depends on the patient- for example, he said what other medications they are on, what comorbidities they may have, what dose they are on currently. I thanked him for teaching me more about how he practices. Also recommended Senokot-S for opioid-induced constipation.<font color=blue><b><b>CHUDAKOB added notes on 08/26/2011</b></b></font>Very good next call objective!!
PPLPMDL0020000001	Westlake	OH	44145	8/18/2011	I told Dr I know he's said in the past he just can't find the right patients for Butrans. I showed the inclusion criteria and asked if he sees these disease states. He said he does and that he will work on gaining experience with Butrans. He said he was concerned that the patch would not stick for 7 days and we discussed the proper application and what to do if it comes off or starts to come off. We reviewed the initiating guide and how to start a new patient. I asked for his commitment to start a patient this week and he agreed. Reminder that OxyContin is still an option when Butrans may not provide adequate analgesia.
PPLPMDL0020000001	Cleveland	OH	44111	8/18/2011	Spoke with John, He said that he has several patients on Butrans. Most of which come from Cleveland Drs. We discussed the importance of letting the patients know about steady state in three days. We discussed that patients may take short acting for supplemental analgesia. Reminder that OxyContin is an option when Butrans does not provide adequate analgesia.
PPLPMDL0020000001	Copley	OH	44321	8/18/2011	Dr. Heim said that he had initiated therapy to a Butrans patient but still felt unsure about how to identify a patient. I explained that the most ideal patients were those currently failing on their low dose SAO's and he agreed this would be an easy population to hone in on. I also covered managed care.
PPLPMDL0020000001	Independence	OH	44131	8/18/2011	Quick call- I asked Dr Rob if I could just ask him a question. He apologized & said he is really far behind & couldn't talk. I handed him an E-Detail invite & asked him to go online at his leisure to see if there was any information regarding Butrans that he didn't already know. I told him one never knows what they might learn from a few minutes on the computer. He said he would look at it if he had time.
PPLPMDL0020000001	Beachwood	OH	44122	8/19/2011	I asked Dr Yokiel what kind of challenges he faces when switching a patient from short-acting opioid to a long-acting option like OxyContin. He said converting their dose is not difficult & can be done with simple math, but discussing this change to some patients can be difficult. I asked him to clarify. He said some patients switch to long-acting & they like it because it is convenient for them to take fewer doses of medication, while others are convinced that something long-acting won't work as well since they don't have to take it as often. He said other patients feel like long-acting options don't work because they do not always get a "euphoria" from them like they would the short-acting. Discussed the importance of appropriate patient selection & abuse/addiction potential of opioids. He also said that it is largely the physician's job to educate the patient to get them to buy-in to the idea of a long-acting medication. I asked what happens if he starts switching a patient & they say the long-acting medication is not working- does he make them stick with it or does he change their medication. He said it depends, but he might try them on a different long-acting option. Discussed Butrans as a once-weekly transdermal option for patients in moderate to severe chronic pain, focusing on "moderate" & commercially insured
PPLPMDL0020000001	Beachwood	OH	44122	8/19/2011	Spoke with Chris (nurse) & discussed Butrans appropriate patient type, managed care coverage, & savings cards. Also reviewed OxyContin savings cards & discussed managed care. I asked Chris to give Jennifer Butrans information upon her return from vacation & she agreed to do this.
PPLPMDL0020000001	Cleveland	OH	44130	8/19/2011	Spoke with Lauren who said that she does not think they have seen any prescriptions at all for Butrans. Discussed appropriate patient type, including patients who are not well-controlled on their current short-acting around-the-clock therapy. Also went through patient information booklet & let her know she could either give it to a patient when they fill a prescription or she could use it in patient counsel. Discussed OxyContin savings cards but she said they are OK for now.
PPLPMDL0020000001	Cleveland	OH	44109	8/19/2011	followed up with dr on butrans dinner program 8/10/11,dr said he really enjoyed Butrans discussion and was happy to see dr platto as they worked together in PA years ago.dr said he started 2 patients on Butrans,no issues with insurance,i asked dr why he chose Butrans? dr said both patients tried all non-opioid therapies,which are his 1st choice for any pain condition and after trying tramadol and vicodin,patients pain wasnt controlled.dr told patients Butrans is a patch and apply once a week and rotate application sites.showed dr Butrans visual aid,discussed appropriate patients for dr to continue starting on Butrans and dr said he will be starting more patients.dr said he doesnt have a lot of patients on narcotics and isnt sure if he would start someone on Butrans who's "opioid naive".told dr to focus on BWC and commercial insurance and told dr to be sure to give patients Butrans patient info booklet and discuss application/rotation of Butrans,dr said he will do that.recommended Senokot-s
PPLPMDL0020000001	Independence	OH	44131	8/19/2011	Quick call- caught Dr Reddy at the window. Positioned Butrans once-weekly transdermal system for appropriate patients who are not well-controlled on short-acting around-the-clock opioids for chronically painful conditions. He waved & thanked me. Spoke with Kathi & reviewed Butrans patient type & managed care as well as managed care information for OxyContin.
PPLPMDL0020000001	Cleveland	OH	44109	8/19/2011	dr said he's not started anyone on Butrans yet and hasnt remembered much about Butrans other than its a transdermal medication.i showed dr 5 Butrans core selling messages and asked what were a couple features that stood out to him? dr said transdermal,once weekly dosing and Butrans being a CIII.dr said he likes that Butrans is a CIII as its easier to call in refills.dr asked about appropriate patients,showed butrans visual aid and asked if he had patients with osteoarthritis taking tramadol daily for their chronic pain? dr said yes,i showed pg.11,discussed that pain condition and dr considering Butrans as an option for these patients instead of refilling tramadol or converting them to vicodin.dr said he will think of a couple patients and talk to them about Butrans.dr asked about insurance coverage,focused dr on BWC and commercial insurance. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44103	8/19/2011	talked to dr about patients she's starting on Butrans and how dr is explaining butrans to patients,dr said its easy to explain once weekly dosing of Butrans, 4 patches a month but some patients are just resistant to a patch and want only their pills.dr said she knows dosage ranges and starts patients on either 5mcg or 10mcg Butrans.i asked dr when she's treating chronic low back pain,pg.11 butrans visual aid,how is she treating this pain condition? dr said she starts with non-opioid therapy options first such as muscle relaxers,NSAID's,physical therapy,etc and when that doesnt work and patients have pain,she will prescribe tramadol. i asked dr to start patients on Butrans.before going to tramadol,dr said she will do that but majority of her patients have been taking short-acting opioids for years so she's looking at patients like that who arent controlled and talking to them about Butrans.focused dr on commercial insurance plans and patient savings cards.discussed OxyContin being an option for patients,appropriate patient flashcard and formulary coverage for OxyContin.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44102	8/19/2011	talked to Amol,Pharmacist,about any butrans scripts,he's not seen any here.Amol said majority of patients are medicaid and asked what that coverage was like for Butrans? we talked about PA required for Butrans and discussed BWC and commercial plan patients being my focus with HCP's,Amol said ok he only has a few commercial patients but does see BWC.showed Amol 5 Butrans key selling messages,discussed once weekly dosing and showed initiation guide as Amol asked about dosage ranges for short-acting opioids and what patients would start out on for Butrans.i asked Amol if he's recommended Butrans to anyone,he said no but would after talking today.i gave Amol Butrans patient information booklets and asked him to discuss once weekly dosing,application and rotation of Butrans,Amol agreed to do this with a couple patients if they tell him their short-acting opioids arent controlling their pain.discussed OxyContin stocking,appropriate patients flashcard and formulary coverage for OxyContin.i recommended Senokot-S
PPLPMDL0020000001	Independence	OH	44131	8/19/2011	Spoke with Jill (MA) who said to try back next week to see if I could get a moment with Dr Pal. Discussed Butrans & patients she could help identify as potential appropriate patients. She said she does get calls from patients on Vicodin or Percocet who say it is not lasting long enough. She said she gives the messages to Dr Pal & lets him make the decision as to what to do. Discussed managed care & she reminded me how much Medicare they see. Also discussed OxyContin & managed care coverage for Part D. Jill said she would give the E-Detail invite to Dr Pal.
PPLPMDL0020000001	Parma	OH	44129	8/19/2011	Dr Roheny said he still has not found a Butrans patient because he does not "ever" see anyone with commercial insurance. I asked him if managed care did not exist what would be holding him back. He said nothing. He said he knows the dosing & delivery system & how to start a patient, it is just a matter of not seeing the right patient with the right insurance. He asked if he could write it for a Medicaid patient. I told him he could, but that there would be a prior authorization & it might not get approved. He asked if Purdue was still a privately held, small company. I told him Purdue is physician founded & owned. He said he was surprised to hear that. He asked if it was OxyContin that "put the company on the map". I told him that Purdue has had a variety of successful products, including Buprenorphine, Senokot & Colace, as well as OxyContin. Discussed OxyContin as an option for appropriate patients in legitimate pain. He agreed that some patients benefit from it. Dr Roheny looked at his list of patients & said not one of them had commercial insurance. I told him I come see him frequently to ensure that he is ready when that right patient presents. He said he would work on finding a patient.
PPLPMDL0020000001	Sagamore Hills	OH	44067	8/19/2011	Dr Scanlon said although he has not gotten feedback from the patient he put on Butrans during my last visit, he has gotten feedback from another who he put on Butrans & that patient has had positive results. I asked if that makes him want to prescribe for more appropriate patients & he said yes. I reminded him that during our last conversation, he had told me that he usually thinks to offer it to patients who he thinks will be more receptive to it & asked him what makes someone appear more receptive. He said they have to be willing to switch from short-acting to long-acting. I asked him if he feels that patients who are not being well-controlled on short-acting are more willing to switch to long-acting considering what they are on is not working for them or else they would not be telling him they need more. He said usually & that this is where he will find patients. I showed him the kit of patient information booklets & asked what he thought. He said it would be very helpful. I asked if they would be more useful for him in patient rooms or with savings cards. He said with the savings cards & said he will definitely put them to use. OxyContin 7 patch strengths, including intermediate doses, reminder & discussed OxyContin q12h for patients beyond Butrans who may benefit from a long-acting option.
PPLPMDL0020000001	Cleveland	OH	44130	8/19/2011	Caught Dr Kansal up front for a quick call. Positioned Butrans for patients with conditions like spondylolysis & spinal stenosis who need chronic opioid therapy. He said he will keep it in mind. Spent time with Dorothy & Sharon reviewing Butrans patient type in effort to get them to help Dr Kansal identify potential Butrans candidates. They said they both take patient phone calls from those saying their medication is wearing off too fast. They said they would try to help me when they can.
PPLPMDL0020000001	Brooklyn	OH	44144	8/19/2011	Spoke with Kristen & reviewed Butrans patient type. She said she might have filled one script for it but that is all. Discussed managed care & emphasized commercial insurance coverage. Also discussed Butrans.com where savings cards can be obtained. Reviewed patient information booklets, letting her know she could use it in patient counsel or if they got a question about Butrans or she could give it to the patient. She said they would use it once they start seeing more prescriptions. Reviewed OxyContin savings cards.



PPLPMDL0020000001	Independence	OH	44131	8/19/2011	Quick call- Caught Dr Keppler briefly at the window. Positioned Butrans for patients who are candidates for long-acting opioids over an extended period of time or those who are not being well-controlled on short-acting around-the-clock opioids. He thanked me & walked back to take a phone call. Spoke with Diane & reviewed patient savings cards for Butrans & OxyContin.
	Independence	OH	44131	8/19/2011	Spoke with Lisa to follow-up on Butrans dinner program. She said she felt like it was a great experience & she & Roman gained a lot of information from attending. I asked her what she liked most about it. She said to be able to talk to physicians who have experience prescribing something new to them was exactly what both she & Roman needed to help them better identify who is/who is not a good candidate for Butrans. She said that they are ready to prescribe now that that has been clarified for them. Discussed savings cards for Butrans & OxyContin. She said she has enough of both of them for now but thanked me for the post-program follow-up.
PPLPMDL0020000001	Cleveland	OH	44113	8/19/2011	showed dr pg.11,pain conditions,discussed patients with osteoarthritis and dr said he does treat that pain condition,dr said he'll start with anti-inflammatory,arthritis medicine,physical therapy,all non-opioid therapies first,then if patients have pain that needs to be treated he will usually start them on tramadol.I asked dr if he felt Butrans would be appropriate? dr said he didnt know as he would probably try vicodin first and if that didnt work maybe go to a long-acting opioid.dr said this is a new medication to him,no comfort level with it yet.I asked dr to start a couple patients,per our discussion,on Butrans instead of refilling tramadol or converting to vicodin.dr said he will consider it.focused dr on commercial insurance plans and patient savings cards.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44109	8/19/2011	talked to dr about Butrans 5 core selling messages,dr focused discussion on transdermal technology and once weekly dosing option for patients.showed dr pg.11,pain conditions and asked how often he see's these conditions? dr said he see's all of them listed especially osteoarthritis and low back pain.I asked dr how he treats these types of pain conditions? dr said all non-opioid therapy then opioids when necessary.dr said he'll take Butrans initiation guide and think of patients he could start on Butrans.told dr patients that have chronic low back pain,taking vicodin daily and thats not controlling their pain,dr can start them on Butrans instead of refilling vicodin or converting to percocet,dr said ok made sense and he would start a few patients.dr asked about insurance coverage,focused dr on BWC and commercial plan patients.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44113	8/19/2011	dr said she's starting more and more patients on Butrans,she's seeing results in patients improvement on pain scales when she follows-up with them after starting on Butrans.dr said patients feel better and she's pleased.I asked dr how she's explaining Butrans to patients,dr said she tells them this is once weekly dosing and is a patch.dr said she gives some short-acting for breakthrough pain but other patients just take ibuprofen or aspirin.dr said its been easy to start patients on Butrans and no problems with insurance so she's happy.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44109	8/19/2011	dr said he's not started anyone on Butrans but he likes the patch technology.I showed dr Butrans visual aid,5 core selling messages and asked dr what really stood out? dr said transdermal delivery and once weekly dosing.dr asked if Butrans was covered on medicaid? I asked dr if he had patients in mind that he wanted to start? dr said he's just wondering,told dr to focus on BWC and commercial insurance plans.showed dr pg.11 pain conditions and asked how he treats these conditions? dr said he couldnt talk more and would see me next week.gave dr OxyContin reminder and formulary coverage message.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44109	8/19/2011	I have talked to dr several times about Butrans since launch,but since lunches have been cancelled at main campus,dr hasn't thought about Butrans lately.dr asked what plans covered Butrans? showed dr Butrans 5 core selling messages in visual aid and initiation guide,dr took guide and wrote on it that BWC and commercial plans were focus for Butrans.talked to dr about once weekly dosing,transdermal technology and the fact that Butrans is a CII dr can call in refills,dr said ok he'll review the info again and he had to go.gave dr webcast for Butrans 8/24/11
PPLPMDL0020000001	Cleveland	OH	44103	8/19/2011	talked to Amy,Pharmacy manager,about 5 Butrans core selling messages,asked Amy what features of Butrans really stood out to her? Amy said she thinks patch technology is great,she likes once weekly dosing and she thinks doctors will like that Butrans is a CII so they can call in refills.Amy said biggest challenge here is they have almost all medicaid and medicare and Butrans isnt covered on those plans.Amy said she had a few patients get Butrans,for medicaid after a PA was completed so it has happened but not often.we discussed BWC and commercial plan patients and I asked Amy if she could recommend Butrans to patients that have chronic pain conditions and take short-acting opioids daily but arent controlled. Amy said she'll do that and took butrans patient info booklets.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44114	8/22/2011	talked to dr about treating chronic low back pain patients and starting them on Butrans earlier instead of refilling tramadol or vicodin,showed pg.11 butrans visual aid and discussed initiation of Butrans showed guide,dr said she'll consider a couple patients like we discussed,told dr to focus on BWC and commercial patients. discussed OxyContin appropriate patients,showed flashcard,conversion guide discussed conversions and discussed formulary coverage and recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44109	8/22/2011	talked to Ray,Pharmacist,about 5 core selling messages and asked Ray what stood out to him? Ray said he likes the transdermal technology and Butrans being dosed once a week as some patients may really like that option.I asked Ray if he provides patient counseling? Ray said yes they do that.I asked Ray to recommend Butrans to those patients taking short-acting opioids but not controlled and give butrans patient info booklet? Ray said he will do that,told ray patients can then discuss Butrans with their doctors.we talked about importance of Butrans stocking and BWC, commercial plan coverage for Butrans.discussed OxyContin being an option for patients,showed appropriate patients flashcard,conversion guide discussed a few of the conversion examples and gave OxyContin formulary grid.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44130	8/22/2011	Dr Fedorko said he just does not see a lot of patients who would be good candidates for Butrans. I showed Dr Fedorko the Butrans inclusion criteria & asked if he sees patients with those conditions regularly. He said yes. I told him these were the types of patients that Butrans was studied for safety & efficacy in. I asked him to tell me about patients with these disease states & to tell me more about the conditions in general. He went on to define each condition & tell me what the differences between them were. I asked what types of challenges these patients present. He said that often times it is difficult to even diagnose them & it is difficult to determine exactly what is causing the pain. I asked how the treatment plan for these patients' pain generally goes- what is after NSAID's or COX-2's? He said tramadol or Vicodin if he has to, but he tries to go non-narcotic whenever possible. Discussed importance of appropriate patient selection. Reminded him that Butrans is a CII opioid & does have abuse/addiction potential. Positioned Butrans for patients with these chronic conditions after NSAID's or COX-2's or tramadol instead of Vicodin. He said he does see a place for Butrans for these patients & would like to prescribe for a patient for 1-2 months at first to see how they do. I asked what he considers "chronic". He said 2 months. Also emphasized commercial coverage. Discussed OxyContin for patients beyond Butrans.
PPLPMDL0020000001	CLEVELAND	OH	44109	8/22/2011	talked to Rod,Pharmacist,about 5 Butrans core selling messages and Rod focused on once weekly dosing option saying he liked that about Butrans.I asked Rod if he provides patient counseling to patients taking opioids? Rod said he does.I asked Rod if he could talk to patients about Butrans and give patient info booklet so patients can see doctors? Rod said he will do that and we discussed Butrans formulary coverage. we talked about Butrans stocking and importance of stocking.we discussed OxyContin stocking,appropriate patients showed flashcard and discussed formulary coverage. recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44195	8/22/2011	Worked neurology dept-left Butrans fpi,initiation guide,formulary grid and patient info booklet for Dr.Kriegler,Dr.Mays,Dr.Spears,Dr.Stillman
PPLPMDL0020000001	Parma	OH	44129	8/22/2011	Spoke with Keith & John (pharmacists). Reviewed Butrans patient type, indication, dosing, & delivery system. Also discussed patient information booklet & let him know it could be used in patient counsel or can be given to patients should they come in with a script. I also asked Keith what types of information I could bring that could be useful for him & his staff regarding my products. He said that nothing in particular is more helpful- just any new information is useful for him. I agreed to keep him updated on Purdue's products.
PPLPMDL0020000001	Solon	OH	44139	8/22/2011	Spoke with Tony who said he sent the utilization report for OxyContin to IMS on Aug.8. IMS responded that they never received the data so Tony is mailing the data to them overnight.
PPLPMDL0020000001	Cleveland	OH	44130	8/22/2011	Spoke with Renee' & Dawn (MA's) & discussed office procedures & protocols. Also introduced Prude's product line. Discussed nature of the practice. I asked if they have established patients or walk-ins only. Renee' said they have mostly established patients but do take some walk-ins. Discussed Butrans indication, dosing & delivery system. They said Dr Popa will see some reps if she likes them & they are not aggressive. I let them know I would respect the office & doctor & was there to partner with them to help them with pain management for the office. Discussed savings cards available & OTC samples. Scheduled next available lunch.
PPLPMDL0020000001	Cleveland	OH	44109	8/22/2011	talked to dr about his patients with chronic low back pain,showing pg.11 butrans visual aid,and asked how he is considering Butrans an option for these patients? dr said right now he's only thought of Butrans for those patients taking short-acting opioids like vicodin or percocet where they complain to him that they want something different or more pills.asked dr to consider Butrans right after that 1st dose of tramadol or vicodin doesnt control patients pain.dr said he will do that and has been thinking of more patients to start on Butrans,showed initiation guide and discussed initiation of Butrans,asked dr to start a couple patients per our discussion that have BWC or commercial insurance this week,dr said he will.we talked about OxyContin being appropriate option for patients,showed flashcard,conversion guide discussed conversions and formulary grid.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44114	8/22/2011	talked to dr about patients he's considering appropriate to start on Butrans and dr said he's waiting to hear from patients that the vicodin or percocet isnt controlling their pain,then he's considering Butrans.I asked dr to think of patients with chronic low back pain,where he can start on Butrans,instead of refilling vicodin or percocet,dr said he will do that. focus on BWC and commercial plan patients.recommended Senokot-5
PPLPMDL0020000001	Parma	OH	44129	8/22/2011	I told Dr Gallagher that I had spoken with Kevin & Stan at the hospital's pharmacy & that they had inquired as to what his thoughts were on Butrans. I told him that I was there to follow up with him personally to get his feedback & thoughts as to where he was with Butrans. He said that he actually just ran into Stan at the hospital last week & that Stan asked him about Butrans. Dr Gallagher said he actually just put a patient on Butrans at the end of last week. I asked him to tell me about the patient. He said it was a woman with low back pain who had tried various other medications & was not well-controlled. He said that he offered her Butrans & she agreed to try it. He said he started her on 5, although he had considered starting her at 10 due to her condition. I reminded him of titration ability after 3 days up to a max 20mcg. I asked how patient expectations are set for pain relief. He said that for this patient, she was at a 8-9 on a pain scale of 0-10 & that together they agreed that a 4-5 would be a great place to be. I told him it sounds like he is doing exactly what he should be doing & asked if he is comfortable enough to identify other patients who may be candidates. He said yes & that he cannot think of specific patients, but as they come in, he has no issues with starting more patients on Butrans to increase his talked to dr and asked him if he started anyone on Butrans last week,post our lunch? dr said he had a few patients he talked to about Butrans and gave Butrans patient info booklets to them to read and follow-up with dr dr said he tells them Butrans is a patch and dosed once a week and some patients like this and others dont and all they want is their pills. asked dr to think of a few patients with chronic low back pain,that he can discuss Butrans with and start them instead of refilling short-acting opioids or give short-acting as the supplemental analgesia and Butrans once weekly,dr said he will continue talking to patients and do his best.recommended Senokot-5
PPLPMDL0020000001	Parma	OH	44129	8/22/2011	Reminded Jen of our previous conversations regarding Butrans & our discussions about patients who are taking 3 Vicodin per day but saying it is not lasting long enough. She said she recalls discussing this. Positioned Butrans as a once weekly transdermal option for these patients. I also reminded her of how she has shared with me that it can be challenging to get a patient to buy-in to switching from short-acting to long-acting. She agreed. I asked her if she felt like patients who were not well-controlled on their short-acting might be more receptive to this change considering what they are taking is not controlling their pain anyway. She said probably. I reminded her that patients could take supplemental analgesia with Butrans & asked her if she thought she would keep their short-acting on board at a reduced supply for breakthrough. She said she doesn't think she would feel comfortable having them on two opioids simultaneously. I reminded her that non-opioids can also be used, such as acetaminophen or ibuprofen. Reminded her that Butrans is the only CII that is long-acting. She said she would keep it in mind. She said they are having a meeting with Dr Nickles in a few weeks & they will probably discuss his Butrans results at that time. Spent time with Dawn who confirmed they are having a meeting in September. She said she will try to get Butrans information for me then.
PPLPMDL0020000001	Cleveland	OH	44125	8/22/2011	Spoke with pharmacist, Betsy Johnson, & reviewed Butrans patient type & patient information booklet. She said she has not dispensed any & still has the 10mcg strength on her shelf. Discussed patient counsel, the ability to tape edges with first aid tape if it loosens, & application sites. Also showed her that there is a tracker for patients to chart what location site they used & which side of the body. She said she thought the booklets seemed patient-friendly & like something patients would be more likely to read instead of a black & white medication guide. Also let her know she could give the book to a patient if they have a prescription. Discussed OxyContin savings cards & gave her a package of cards. She said they do not have a lot of patients on it who have a high co-pay. Let her know that anyone with cash-pay or commercial insurance & a co-pay over \$25 would be able to use the card to save money every month.
PPLPMDL0020000001	Parma	OH	44129	8/23/2011	Dr Ortega said that he has had to titrate 2 patients up from 5 to 10mcg. He said one of those patients discontinued treatment because they did not like the way the 10mcg made them feel. He said the other patient opted to step back down to the 5mcg instead of continuing on 10mcg, again because the patient said the 10mcg was too strong for them. I asked if he felt that he has a good grasp of the appropriate patient type for Butrans now. He said that he does, but that since most of his patients are steady on their medication, that rules out a lot of his patients for Butrans. He went on to explain that his ultimate goal is to get his patients off all medication & he feels that the first step of doing that is taking them off oral medications. I asked him to elaborate. He said when patients take pills, it forces them to think of pain. He feels there is a psychological connection. Reminded him Butrans still has abuse/addiction potential & is CIII. He said he knows. Discussed offering Butrans to patients as an option instead of pushing a switch on patients who are well-controlled. He agreed this was a good idea. He also shared a great success of a Butrans patient who has remarked that everyone in his life notices a big difference in how he acts now that he has pain relief. I asked what the patient's pain was from. He said spondylolysis.
PPLPMDL0020000001					Showed inclusion criteria, discussing these as potential Butrans patients. OxyContin q12h as option for patients beyond Butrans.

PPLPMDL0020000001	Maple Heights	OH	44137	8/23/2011	Spoke with Gutjeert (pharmacist) & reviewed Butrans with him. Discussed indication, dosing, & delivery system. Also discussed patient information booklets & patient counsel. He said he has seen some "move" at his regular location (W 65th St) & the technician verified that they usually have 3 boxes on hand & now have only 1, so two have been dispensed recently there. Gutjeert said he will be moving to this location permanently. Also discussed OxyContin q12h.
	Cleveland	OH	44113	8/23/2011	talked to dr about pain conditions he treats,pg.11 butrans visual aid,dr focused on chronic low back pain patients as he said thats a large majority of his patients and they tend to be BWC patients.dr told me how he treats chronic low back pain with muscle relaxers,NSAIDs,physical therapy,all non-opioid therapy choices 1st,then if pain persists,he'll give patients tramadol.I asked dr how a long-acting opioid like Butrans would be appropriate for these patients? dr said early on,he would only give short-acting opioids as patients have good and bad days,but if short-acting opioids didnt provide pain relief over time,he would consider a long-acting opioid.dr said he writes OxyContin for these patients when they need a long-acting opioid.i told dr Butrans is an option before he converts patients to OxyContin.talked to dr about initiation of butrans,right after the 1st dose of tramadol isnt controlling patients pain,showed initiation guide and visual aid for discussion.asked dr if he has a few patients like this that he can start on Butrans? dr said he didnt know would have to think about it and look at patients coming into office this week.dr said he does like once weekly dosing and patch technology of Butrans so he will consider it an option.told dr to focus on BWC,tricare,commercial plans.discussed OxyContin being an option,showed appropriate patients flashcard,discussed conversions and showed conversion guide and discussed formulary coverage.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44106	8/23/2011	talked to dr about Butrans fpi,showed visual aid to discuss appropriate patients,dr said he's seen all 3 attending physicians prescribe Butrans but didnt know much about the medication.asked dr what features of Butrans really stood out to him? dr said he likes the patch technology and once weekly dosing.showed dr Butrans initiation guide,discussed initiation of Butrans and titration and asked dr if he has a couple patients with chronic low back pain that are taking tramadol or vicodin daily for their pain yet not controlled? dr said yes they have a lot of patients taking tramadol who call in monthly for refills wanting more pills or requesting another opioid.i asked dr to stop and not refill the short-acting opioid and start patients on Butrans,dr said he will consider this option as he needs to get clinical experience with Butrans.dr asked what plans cover Butrans? told dr to focus on commercial plans and discussed patient savings cards.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44195	8/23/2011	talked to Cynthia,Pharmacist,as David,Pharmacy Mgr was off today,about Butrans 5 core selling messages and what really stood out to her.Cynthia said once weekly dosing and Butrans being a patch were 2 features that stood out.I asked Cynthia if they provide patient counseling to patients taking short-acting opioids? Cynthia said they will do that if patients have questions or are complaining their medication isnt lasting long enough.asked Cynthia if she could recommend Butrans to those patients and give Butrans patient info booklets to them so they can talk to their doctors? Cynthia said she will do that but i should follow-up with david,pharmacy mgr,to discuss this info with him too.we talked about Butrans stocking and importance of stocking Butrans,discussed OxyContin stocking,appropriate patients and formulary coverage for Butrans and OxyContin.recommended Senokot-S
PPLPMDL0020000001	Parma	OH	44134	8/23/2011	Dr Hernandez said that effective September 1st, Worker's Comp will no longer be paying for Suboxone due to cost. He said he fears that Butrans will be next, since it has one of the same molecules, buprenorphine. He said he has tried to plead his case to BWC, but to no avail. He said he plans to call our Medical Services department to ask them if they can make any recommendations on switching a patient from Suboxone for pain to Butrans for pain. Reiterated to him that Butrans is only indicated for pain. He said he knows. I agreed that Medical Services would be a good place to call. I reminded him of previous conversations where he told me that a Butrans patient for him is one who is at a pain number of 3-4 when they come see him, especially if they are taking NSAID's or COX-2's at that point. He agreed. I asked him what if that patient is at a pain number of 5-7- what medication would that patient get. Dr Hernandez said that that is also a Butrans patient for him. He said Butrans is the first line long-acting pain medication he goes to. He said he would continue to prescribe for this type of patient. Also discussed OxyContin q12h for appropriate patients beyond Butrans
PPLPMDL0020000001	Cleveland	OH	44124	8/23/2011	Quick call....I reviewed the butrans 7 day delivery and CII status. I asked him to log onto the interactive presentation to learn more. He simply said he does not prescribe many patches. I told him that butrans is the first of its kind and let him know its covered on BWC. Provided oxycontin coverage reminder also.
PPLPMDL0020000001	Cleveland	OH	44195	8/23/2011	worked apm dept-left Butrans fpi,initiation guide,webcast invites,patient info booklets,formulary grids and my business cards for Dr.Vrooman,Dr.Katyal,Dr.Cheng,Dr.Mekhaill,Dr.Mintzer,Dr.Syed-couldnt see any doctors so had to leave info at front desk and Tonda,Receptionist,said she'll give to doctors.
PPLPMDL0020000001	Mayfield Heights	OH	44124	8/23/2011	Window call....I reminded doc of the appropriate Butrans patient - low dose IR narcotics of opioid naive patients. Provided formulary grid and and e-detail invite.
PPLPMDL0020000001	Mayfield Hts	OH	44124	8/23/2011	Window call....Reminded doc of the Butrans coverage with commercial plans and BWC. Provided formulary reminder and patient information booklets. Nothing learned.
PPLPMDL0020000001	Mayfield Hts	OH	44094	8/23/2011	I showed doc a demo of the butrans patch and reminded him that it is the first 7 day delivery of an opioid and a CIII. I asked him to log onto the butrans e-detail to learn more about butrans. I reminded him that butrans and oxycontin are both covered on BWC. Nothing learned.
	Cleveland	OH	44106	8/23/2011	talked to dr about patients with specific pain conditions,pg.11 visual aid,dr focused on chronic low back pain patients.dr said when they need opioids he typically starts them on tramadol then goes to vicodin or percocet,dr said the problem is once these patients start taking pills they dont want to stop taking them they want more.i asked dr how he thinks a long-acting opioid like Butrans is appropriate for these patients? dr said he likes that Butrans is once weekly and is a patch,dr said he thinks its easy for patients and will give them ibuprofen or aspirin as choices for breakthrough pain.asked dr if he's considering Butrans as an option,earlier in therapy so right after tramadol isnt controlling patients pain? dr said most of the patients he started on Butrans have been taking percocet for years and he's not comfortable refilling percocet anymore so he's telling these patients about Butrans.i asked dr to think of a couple patients,with chronic low back pain,that are taking tramadol daily but pain isnt controlled,and start them on Butrans instead of refilling tramadol or converting to another short-acting opioid,dr said he will do that,focused dr on commercial plan patients and patient savings cards. recommended Senokot-S
PPLPMDL0020000001	Parma	OH	44129	8/23/2011	Followed up with Dr Chagin as to his thoughts on Butrans. He said he does have a few patients on it. I asked him to tell me about the patient(s). He said each of them has been someone with a chronic condition who is taking short-acting opioids. He mentioned one patient with low-back pain. I showed him Butrans inclusion criteria & asked if those were some of the conditions he treats frequently. He pointed out spinal stenosis & said that he actually has a patient in the hospital now who has it & is taking Percocet for it. I positioned Butrans for patients who are not well-controlled on their low-dose short-acting opioid & asked if he felt those patients would be more receptive to a medication switch to a long-acting than those who are steady on their short-acting. He said yes & added that he thinks Butrans is a good option for patients with chronic conditions. I asked him what at what point a condition becomes chronic. He said 2 months. I referenced inclusion criteria & asked him to think of those types of disease states more so than "chronic pain" & he said this makes sense & will keep thinking of Butrans for this type of condition. Also let him know I left Senokot-S & Colace samples.
PPLPMDL0020000001	Cleveland	OH	44195	8/23/2011	talked to Janet,Pharmacy Mgr,about Butrans stocking and Janet said noone has prescribed Butrans but they still write a lot of short-acting opioids.showed Janet 5 Butrans core selling messages and asked what really stood out to her? Janet said once weekly dosing and transdermal delivery of Butrans.i asked Janet if she provided patient counseling to those patients taking short-acting opioids? Janet said yes.asked Janet if she will give patients Butrans patient info booklet and discuss Butrans with them and have them speak with their doctors,Janet said she would do that.we discussed stocking of Butrans,OxyContin,discussed formulary coverage for Butrans and OxyContin and i recommended Senokot-S
PPLPMDL0020000001	Mayfield Heights	OH	44124	8/23/2011	I reviewed the butrans patient type and the other selling messages. SHe said she has written for it a couple of times with good results. SHe is leaving the clinic (today is her last day) as she is moving out of state. I wished her well and reminded her to remember Butrans.
PPLPMDL0020000001	Parma	OH	44129	8/23/2011	Spoke with technician who said pharmacist was very busy & unable to talk today. I reviewed patient information booklet with her & let her know I would return to go over details with the pharmacist as well. Discussed common questions patients might have & let her know that patients should allow 3 days to decide whether or not Butrans is working for them. Also discussed OxyContin savings cards.
PPLPMDL0020000001	Cleveland	OH	44113	8/23/2011	talked to dr about Butrans,if it would ever be an option for patients he treats with chronic pain conditions,showed pg.11 butrans visual aid,dr said probably not because he doesnt write for CIII OR CII medications.dr said he will prescribe tramadol and has no problem writing for Ryzolt as he's getting it covered on insurance plans and its easy once a day dosing for patients,dr said Butrans isnt going to be an option for his patients as he's not comfortable with CIII or CII opioids.we talked about OxyContin,showed challenging flashcard and dr said again he doesnt write for OxyContin but appreciated info.dr said he will prescribe Ryzolt and keep sharing info with him about Ryzolt and give him the value cards.
PPLPMDL0020000001	Cleveland	OH	44109	8/24/2011	showed dr butrans visual aid,discussed 5 core selling messages and gave dr Butrans fpi,dr said he's heard of Butrans from his colleagues but didnt know anything about the medication.asked dr what features of Butrans stood out to him,looking at visual aid? dr said once weekly dosing,transdermal and Butrans being a CIII.asked dr why CIII was important? dr said because its easier on him and nursing staff,to write for refills.dr said he only has a few patients on narcotics and he typically starts them on tramadol,long-acting opioids arent considered early in therapy,i showed dr Butrans appropriate patient section,discussed opioid naive and experienced and asked dr to think of a few patients with chronic low back pain,taking short-acting opioids daily but not controlled and starting them on Butrans instead of refilling tramadol or converting to another short-acting opioid,dr said that made sense and he'll consider that option.dr said majority of patients are Medicaid and uninsured,so whats insurance coverage for Butrans? we talked about formulary coverage,told dr to focus on BWC and commercial plans.dr said ok.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	8/24/2011	showed dr butrans visual aid,discussed 5 core selling messages and gave dr Butrans fpi,dr said he's heard of Butrans from his colleagues but didnt know anything about the medication.asked dr what features of Butrans stood out to him,looking at visual aid? dr said once weekly dosing,transdermal and Butrans being a CIII.asked dr why CIII was important? dr said because its easier on him and nursing staff,to write for refills.dr said he only has a few patients on narcotics and he typically starts them on tramadol,long-acting opioids arent considered early in therapy,i showed dr Butrans appropriate patient section,discussed opioid naive and experienced and asked dr to think of a few patients with chronic low back pain,taking short-acting opioids daily but not controlled and starting them on Butrans instead of refilling tramadol or converting to another short-acting opioid,dr said that made sense and he'll consider that option.dr said majority of patients are Medicaid and uninsured,so whats insurance coverage for Butrans? we talked about formulary coverage,told dr to focus on BWC and commercial plans.dr said ok.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	8/24/2011	showed dr butrans visual aid and asked if he recalled anything about Butrans? dr said not really other than Butrans was transdermal,we discussed Butrans 5 core selling messages and i asked dr what features stood out? dr said transdermal delivery,once weekly dosing and CIII,dr said he liked that Butrans was a CIII so he can call in refills he doesnt like CII medications.showed dr pg.11,pain conditions and asked if dr treats these types of conditions? dr said yes,asked dr how he treats chronic pain for these conditions? dr said he starts with all non-opioid options 1st then will turn to opioids,immediate release,if necessary.i asked dr if Butrans would be an option for a patient who's "opioid naive" in his opinion? dr said probably not,he would feel more comfortable starting patients on tramadol and see what happens with patients pain levels.showed dr appropriate patients section,visual aid,discussed opioid naive and experienced,dr said if he starts anyone on Butrans it would be opioid experienced patients.talked to dr about initiating Butrans,titration,showed patient info booklet and discussed formulary coverage for BWC and commercial plan patients,dr asked about Medicaid patients as thats majority of patients here,we discussed this plan too.asked dr to start a couple patients,per our discussion,to just get clinical experience,dr said he will consider Butrans and talk to patients about it.recommended Senokot-S
PPLPMDL0020000001	Independence	OH	44131	8/24/2011	Introduced myself & Butrans to Milos (pharmacist new to this location). Reviewed indication, dosing, & appropriate patient type. Also spent time going over patient information booklet & discussing patient counsel. Also discussed ability to titrate after 3 days & letting patient know to give Butrans 3 days before deciding whether or not it is working. Also discussed application, rotation, & supplemental analgesia. Reviewed savings cards & let him know they can be printed online at Butrans.com. Offered OxyContin savings cards but he said they are OK for now.
PPLPMDL0020000001					

PPLPMDL0020000001	Cleveland	OH	44109	8/24/2011	showed dr butrans visual aid and asked if he recalled anything about Butrans? dr said not really other than Butrans was transdermal.we discussed Butrans 5 core selling messages and i asked dr what features stood out? dr said transdermal delivery,once weekly dosing and CIII,dr said he liked that Butrans was a CIII so he can call in refills he doesnt like CII medications.showed dr pg.11,pain conditions and asked if dr treats these types of conditions? dr said yes,asked dr how he treats chronic pain for these conditions? dr said he starts with all non-opioid options 1st then will turn to opioids,immediate release,if necessary.i asked dr if Butrans would be an option for a patient who's "opioid naive" in his opinion? dr said probably not,he would feel more comfortable starting patients on tramadol and see what happens with patients pain levels.showed dr appropriate patients section,visual aid,discussed opioid naive and experienced,dr said if he starts anyone on Butrans it would be opioid experienced patients.talked to dr about initiating Butrans,titration,showed patient info booklet and discussed formulary coverage for BWC and commercial plan patients,dr asked about medicaid patients as thats majority of patients here,we discussed this plan too.asked dr to start a couple patients,per our discussion,to just get clinical experience,dr said he will consider Butrans and talk to patients about it.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	8/24/2011	dr said he heard about Butrans from his colleagues and had a few questions about receptor binding with Butrans.showed dr Butrans visual aid,discussed MOA of Butrans and dr said that answered his question.dr asked about supplemental analgesia with Butrans,wondering if he could give short-acting opioids with Butrans? showed dr Butrans fpi,supplemental analgesia section,told dr he could give opioid or non-opioid therapy with Butrans. dr asked about half-life of Butrans,showed pharmacokinetics and pharmacodynamics of Butrans.i asked dr if he had patients in mind to start on Butrans,dr said yes but he's not sure if he wants to start patients on Butrans and still give them immediate release opioids,so dr said he'll think about that. showed dr butrans visual aid,appropriate patients section and told him to think of patients with different pain conditions,pg.11 butrans visual aid and asked dr if he could think of a few patients to start on Butrans? dr said he will do that and asked about insurance coverage,discussed formulary coverage and patient savings cards.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	8/24/2011	dr said she remembers Butrans being transdermal but not much else.showed dr Butrans visual aid,discussed 5 Butrans core selling messages and asked her what really stood out to her? dr said transdermal delivery,once weekly dosing and CIII.dr said Butrans being a CIII is easier on her as she can call in refills.dr asked who the appropriate patients are,showed visual aid and discussed opioid naive and experienced patients.asked dr if she can think of a few patients to start on Butrans? dr said yes and asked about insurance coverage for medicaid patients,discussed formulary coverage and asked dr to focus on BWC and commercial plan patients,dr said ok she'll talk to some patients about Butrans and see if they are interested in a patch.i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	8/24/2011	dr said he didnt have a lot of time to talk but remembered our last conversation that this is a long-acting opioid,in a patch,for chronic pain.showed dr Butrans visual aid,5 core selling messages and asked dr what other features stood out to him? dr said once weekly dosing and the fact Butrans is a long-acting opioid with a CIII scheduling.dr said that makes it easier on him and nurses so they can call in refills for Butrans.showed dr butrans appropriate patients section and asked if he could think of a few patients opioid naive or experienced that he could start on Butrans? dr said he will give it some thought but he doesnt write a lot of narcotics for patients.recommended Senokot-S
PPLPMDL0020000001	Independence	OH	44131	8/24/2011	Dr Rob said he couldn't come back to lunch & had no time. Positioned Butrans for patients taking low-dose short-acting opioids around-the-clock for a chronic condition. He waved & thanked me.Spent time with Maria & Cameo going over appropriate patient type for Butrans. Discussed patient information booklets & dosing, application, & disposal.
PPLPMDL0020000001	Cleveland	OH	44109	8/24/2011	talked to dr briefly about Butrans 5 core selling messages,dr said he remembers that Butrans is transdermal but thats it.dr said he doesnt write a lot of narcotics but likes the transdermal delivery of Butrans.i asked dr if he treats patients with pain conditions,pg.11 visual aid? dr said yes he does,discussed appropriate patients-opioid naive and experienced that he could start on Butrans.dr said ok took fpi,initiation guide and a booklet.showed dr application/rotation info in butrans patient info booklet and asked if dr will start a few patients to just get some clinical experience? dr said he will consider it and asked about medicaid coverage? we discussed all insurance plans,told dr to focus on BWC and commercial plans.recommended Senokot-S
PPLPMDL0020000001	North Royalton	OH	44133	8/24/2011	Quick call with Cheryl. She said she did not have time for a discussion. Gave her patient information guide & described how it can be used in patient counsel or given to a patient with a prescription. Also told her to be sure to let patients know to give Butrans 3 days until they decide if it is working for them. E-voucher & OxyContin savings reminders.
PPLPMDL0020000001	Cleveland	OH	44109	8/24/2011	dr said she hasnt started anyone on Butrans,she has the information from my last 2 lunches but really hasnt given much thought to it,dr said her patients are medicaid and medicare so what is coverage for Butrans? we talked about medicaid prior authorization requirements for Butrans and told dr not to start any medicare patients on Butrans as its not covered,dr said ok.dr said she doesnt really prescribe CII medications so she most likely cant get medicaid PA approved for her patients to try Butrans.told dr to focus on BWC,Tricare and commercial plan patients,discussed Butrans patient savings cards for commercial plan patients and dr said she does like that Butrans is a patch dosed once a week but again it comes down to insurance.gave Butrans webcast invite to dr and experience invite card,dr said she will look at both.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	8/24/2011	worked family medicine dept-lunch with residents and attending physicians,worked internal medicine-left Dr. Lindheim,Dr.Falck-Ytter,Dr.Ricanati,Dr.Spinelli,Dr.Harrington and Dr.McCreery Butrans fpi,initiation guide,patient info booklet,formulary grid,OxyContin fpi,conversion guide,formulary grid,and my business card for each physician-couldnt see doctors only leave info
PPLPMDL0020000001	Cleveland	OH	44109	8/24/2011	showed dr Butrans visual aid,pg.11 pain conditions and asked dr how often he see's and treats these pain conditions? dr said he see's a lot of patients with chronic low back pain and osteoarthritis.asked dr how he treats these pain conditions when chronic pain is present? dr said he will prescribe short-acting opioids.i asked dr if he had a couple patients with chronic low back pain that have been taking tramadol daily but their pain isnt controlled? dr said he see's a lot of them and they always want more pills.told dr thats where he could start patients on Butrans,showed initiation of Butrans section and asked dr if he could start a few patients per our discussion on Butrans? dr said he will consider it but depends on insurance.dr said he has a lot of medicaid and uninsured told dr to focus on BWC,Tricare and commercial plan patients,discussed patient savings cards and discussed Medicaid Prior Authorization requirements for Butrans,discussed OxyContin being an option for patients,showed challenging flashcard,gave conversion guide and discussed formulary coverage,dr said he has a small group of patients on OxyContin.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	8/24/2011	discussed 5 Butrans core selling messages,showed visual aid,dr said he heard about Butrans from his colleagues but didnt know much about it.i asked dr what really stood out to him when looking at 5 core messages? dr said transdermal technology,once weekly dosing and CII so he can call in refills which is easier for him than a CII medication.showed dr pg.11,pain conditions,dr focused on chronic low back pain and said he will treat patients with NSAIDs,muscle relaxers,physical therapy,all non-opioid therapies,then if patients still have chronic pain he will start them on tramadol.i asked dr if he would stop and consider Butrans,right after the 1st tramadol dose isnt controlling these patients pain? dr said he might but most patients want their pills,dr asked if patients could take short-acting analgesics with Butrans? showed dr Butrans visual aid,maintenance of therapy section,told dr opioid or non-opioid therapy with Butrans is appropriate,dr said ok asked dr to focus on BWC,Tricare or Commercial plan patients,per our discussion,to get some clinical experience,dr said he will read through all of the materials and think of some patients.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	8/24/2011	dr said she didnt recall much on Butrans other than its a transdermal medication.showed dr Butrans visual aid,5 core selling messages and asked dr what stood out to her? dr said she likes that Butrans is once weekly dosing,is a CIII opioid and transdermal.dr said it makes it easier to write CIII's as she can call in refills.asked dr if she has any patients with osteoarthritis? dr said yes she treats various pain conditions.showed dr visual aid,pg.11,discussed this pain condition,dr said she would give all non-opioid options 1st then if pain persists she would probably start patients on tramadol.asked dr to stop next time and start a few patients on Butrans,instead of refilling tramadol,dr said ok something to consider and asked about insurance coverage for medicaid patients? discussed formulary coverage and told dr to focus on BWC and commercial plans.showed dr initiation of Butrans section in visual aid,showed butrans patient info booklet and discussed application/rotation of Butrans.dr said it seems easy enough for patients and she will talk to some patients and see if she can
PPLPMDL0020000001	Cleveland	OH	44104	8/24/2011	discussed initiations presentation with dr and talked about 4 patient case studies.dr said she thinks Butrans is a good medication,likes that its dosed once a week and is in a patch but the small group of patients she is treating with short-acting opioids they dont have chronic pain,they are acute pain patients.asked dr how she defines acute vs chronic pain? dr said if patients have persistent pain longer than 3 months,thats chronic pain.dr said her patients usually take tramadol PRN so thats acute and not chronic pain.showed dr Butrans visual aid,pg.11 pain conditions,discussed patients with osteoarthritis and asked dr how she is treating these patients chronic pain? dr said all non-opioid therapies first then tramadol.i told dr thats where Butrans could be placed,right after the 1st dose of tramadol isnt controlling patients pain,dr said ok that makes sense and she'll consider Butrans.dr asked about insurance coverage,told dr to focus on BWC,Tricare and Commercial plans for Butrans and we discussed Butrans patient savings cards. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44104	8/24/2011	discussed initiations presentation with dr,4 patient case studies.dr said he has 4 patients in mind that he would like to start on Butrans.we talked about those patients and dr asked about initiation of Butrans so i showed dr butrans initiation guide,discussed tapering of short-acting opioids if necessary and initiation of Butrans 5mcg or 10mcg.dr said ok that made more sense to him now.showed dr pg.11,visual aid,discussed pain conditions,dr focused on osteoarthritis and said he will prescribe all non-opioid therapies first,then he will start these patients typically on tramadol.i asked dr when tramadol doesnt control pain,whats the next step? dr said usually vicodin or he'll start patients on Percocet.i told dr he could start patients on Butrans,right after the 1st tramadol dose isnt controlling patients pain,dr said ok he will think about that.dr said the 4 patients he wants to start on Butrans are all taking percocet daily for chronic pain.dr asked about insurance coverage for Butrans? told dr to focus on BWC,Tricare and Commercial plan patients,discussed Butrans patient savings cards for commercial plan patients.dr asked about medicaid/caresource coverage,we discussed Prior Authorization requirements for Butrans.we talked about OxyContin being an option for patients,showed challenging flashcard and dr said he only has a small group of patients on OxyContin and really doesnt like prescribing this medication.discussed OxyContin formulary coverage.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	8/24/2011	discussed Butrans 5 core messages,fpi,initiation guide with dr,showed dr pg.11 butrans visual aid and asked dr what pain conditions she treats? dr said she treats all of the conditions listed but a lot of chronic low back pain patients and they tend to be her workers comp patients.asked dr how she treats this pain condition? dr said muscle relaxers,physical therapy,NSAIDs all non-opioid therapies until patients say their pain is too bad and they need an opioid.talked to dr about Butrans being an option for opioid naive patients,showed info in visual aid and also for patients currently taking opioids,we discussed tapering of short-acting opioids if appropriate,initiation of Butrans,titration of Butrans,showed dr Butrans patient info booklet discussed application/rotation of Butrans and dr said it sounded like a great option as she likes transdermal delivery and has been looking for another option besides pills for her patients with chronic low back pain.asked dr if she could start a few patients this week,per our discussion,on Butrans? dr said yes and asked if medicaid covered Butrans? told dr to focus on BWC and commercial plans and showed Butrans patient savings card and also told dr about Prior authorization requirements for medicaid patients to try and get approval of Butrans,dr said she will consider butrans for some patients.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44106	8/24/2011	talked to dr about patients with chronic low back pain as thats what he treats a lot of,showed pg.11 visual aid,dr said he believes in non-opioid therapies first but usually by the time patients arrive to him,they have tried all short-acting opioids and are asking for more pills.dr said he's starting patients on Butrans that have been taking percocet for years and requesting more pills.dr said he will give them Butrans and tell them to take an aspirin or Ibuprofen for break through.asked dr how often he's seeing patients with chronic low back pain,weekly? dr said he has a lot of those patients doesnt have a number in his head but he'll keep Butrans in mind for
PPLPMDL0020000001	Cleveland	OH	44109	8/24/2011	the new discussed commercial plan patients and medicaid for Butrans.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	8/24/2011	discussed Butrans fpi,5 core selling messages with dr,dr is 1st yr resident and said she's not had much experience prescribing narcotics.dr said she likes transdermal delivery and once weekly dosing,dr asked what the scheduling of butrans was? told dr butrans is a CIII,showed Butrans fpi and visual aid,asked dr if she can think of a few patients who have osteoarthritis or low back pain,thats chronic and needs to be treated with an opioid,thats where she can consider Butrans,showed initiation of Butrans info and dr said she'll keep it in mind and asked if medicaid covered butrans? explained Prior authorization requirements for medicaid,told dr to focus on BWC and commercial plan patients to start on Butrans,dr said ok will do.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44106	8/24/2011	dr said he started another patient on Butrans,seems to be easy to discuss with patients and no complaints at this point.showed dr butrans visual aid,pg.11,talked about chronic low back pain patients and how dr treats their chronic pain,dr said he will start patients on tramadol when they need a narcotic. asked dr if he would consider Butrans,right after the 1st tramadol dose isnt controlling patients pain? dr said he might but he will try all non-opioid therapies 1st for low back pain patients then start them on tramadol if they have persistent pain.told dr to focus on commercial patients and dr said he has a lot of medicaid patients at UH main campus so we discussed Prior Authorization requirements for Medicaid patients for Butrans.

PPLPMDL0020000001	Cleveland	OH	44104	8/24/2011	discussed initiations presentation,4 case studies,dr said she hasnt started anyone on Butrans yet as she's very frustrated with her chronic pain patients this month,dr said she's drug screening all of these patients and just doesn't trust them.dr said its not that she dislikes Butrans but she just hasn't thought about anything new like Butrans to discuss with her patients.dr said after talking today she may think of a few patients that she could start on Butrans.we talked about patients with osteoarthritis,that she trusts,where dr is treating their chronic pain with short-acting opioids but they aren't controlling patients pain,dr said she has a lot of them and they call in all the time for refills.i asked dr to start a couple patients like this on Butrans and showed visual aid,discussed initiation of Butrans and titration.dr asked about insurance coverage,told dr to focus on BWC,Tricare and commercial insurance patients.discussed patient savings cards with dr.we discussed OxyContin being an option for some patients and dr said she doesn't prescribe that medication.recommended Senokot-S for patients with opioid induced dr said he's not started anyone on Butrans recently since majority of his patients are medicare and Butrans isnt covered on Medicare.i asked dr if he had any commercial pain patients that he could start on Butrans? dr said a few,so we talked about Butrans patient savings cards.showed dr pg.11 Butrans visual aid,discussed pain conditions and asked dr how he treats patients with osteoarthritis? dr said all non-opioid therapies first,then he'll consider tramadol an option if pain is persistent and patients are asking for something.dr said he would start patients on tramadol and if that's not controlling pain,then he may consider Butrans an option if insurance covers it.asked dr to think of 2 patients with osteoarthritis that are taking tramadol daily but not controlled where he can consider Butrans as an option,dr said he will do that but again insurance is going to be barrier for him.discussed OxyContin as an option,showed conversion guide and discussed conversions from short-acting opioids to OxyContin,discussed formulary coverage.dr said he only has a few patients on OxyContin but does feel its a good medication for patients.recommended Senokot-S
PPLPMDL0020000001	Cleveland Hts	OH	44118	8/24/2011	Spoke to Suraab again about the stocking of butrans. He was quick to say that he has not seen any prescriptions for it so they have not stocked it. I provided the initiation guide and explained the positioning, proper application, and the starting doses. He said he has no problem ordering it when he gets a script for it.<font color=blue><b>CHUDAKOB added notes on 09/01/2011</b></font>Who are the physicians that you should be calling on that fill scripts at this pharmacy. Even if you know, asking him this may show him you are trying to help him with his business.
PPLPMDL0020000001	N Royalton	OH	44133	8/24/2011	Spoke with Jeffery (pharmacist) & introduced myself & Purdue's products. I inquired about Butrans stocking. He said he has it. I asked if he has dispensed any. He said he just recently did. I explained to him Butrans indication, dosing, & delivery system. Also let him know patients may take supplemental analgesia with Butrans in the form of opioid or non-opioid. He said his computer actually brought up a "drug interaction" screen when he put the Butrans script in because the physician had also prescribed Percocet with the Butrans. He added that the computer said that prescribing Butrans with Percocet can put patients into withdrawal. I asked what he did. He said he called the prescriber who told him to go ahead with the prescription. Presented initiation guide & discussed appropriate range of Butrans patients & ability for Butrans to precipitate withdrawal, especially in patients already on high doses of opioids. He said he better understands now. Also discussed patient savings & managed care.
PPLPMDL0020000001	Cleveland	OH	44109	8/24/2011	dr said he remembered our conversation about Butrans that this was transdermal but that's all he could remember.showed dr Butrans visual aid,discussed 5 core selling messages and asked dr what features stood out? dr said once weekly dosing,CII and transdermal delivery.dr said he has patients with various pain conditions that he gives tramadol to so can he give tramadol for breakthrough if he starts patients on Butrans? showed dr Butrans fpi,maintenance of therapy section,stating he can give immediate release opioid or non-opioid therapy with butrans,dr said ok he'll think about some patients and give it a try.dr asked who covers butrans? discussed formulary coverage for Butrans,focused dr on BWC and commercial plans.recommended Senokot-S
PPLPMDL0020000001	Parma	OH	44129	8/24/2011	Dr Gigliotti said the patient he put on Butrans "got sick on it". I asked him to elaborate. He said she became dizzy starting about 2 days after applying Butrans. He said she was on 5mcg & did not want to continue on it. I asked if she had said anything about any type of pain relief. He said she did say she felt less pain, but it was not worth it to put up with the dizziness. I told him that that is understandable. I asked if that would affect him prescribing Butrans for other appropriate patients. He said no & that he "is ready" to prescribe for someone else & that "it will happen". I reminded him of our discussion about patients with conditions such as spinal stenosis & spondylolysis. He said those were potential candidates. OxyContin q12h 7 tablet strength reminder.
PPLPMDL0020000001	Cleveland	OH	44109	8/24/2011	briefly spoke with dr about butrans 5 core selling messages,dr said she doesn't have much experience with opioids as this is her 1st year in residency but she knows there are a lot of patients taking opioids for chronic pain so she needs to know the info.dr said she'll look through fpi but does like that this is a patch and dosed once a week.showed dr pg.11 pain conditions and asked dr if she treated these pain conditions? dr said yes,but didnt have more time to talk.thanked me for the info and she took butrans fpi,initiation guide and patient info booklet with my business card.
PPLPMDL0020000001	Warrensville Heights	OH	44122	8/24/2011	Spoke with Eileen Sell (RN, Office Manager), who said Dr Kessler has moved to North Carolina, is teaching there & is no longer in practice. I asked who is in charge of the residency program in his absence. She said they are not sure yet. I showed medical resources catalog & let her know I thought it could be helpful for her, the other nurses, & the physicians. She looked through it & said she would post it as she felt it had a wealth of useful courses for them. She said they struggle with pain management & how far to treat patients for pain, especially more chronic issues. She added that they sent out guidelines saying they would not be treating chronic pain going forward, but some exceptions are made as this can become a grey area. I asked if they had set out a time limit as far as what they consider to be "chronic". She said no & that that can be part of the difficulty. She said they will continue to treat their established patients, but for newer patients, that is where decisions will need to be made. I let her know I was available as a resource & to partner with her & the staff to assist with pain management & talked to dr about Butrans fpi,5 core selling messages,initiation guide and dr said she loved the idea of transdermal delivery and has been searching for a transdermal option for chronic pain patients.dr said majority of her patients are medicaid,uninsured and BWC.dr said she has a few patients with commercial insurance-we discussed formulary coverage and i asked dr since she's asking about insurance coverage does that mean she's got a few patients in mind to start on Butrans? dr said yes she does there are a lot of patients taking tramadol every day for their chronic pain and when that doesn't control their pain they want percocet and dr isn't comfortable giving that medication so she's willing to try Butrans in these patients and see what happens. showed dr initiation of Butrans info in visual aid and told dr that's great she's got some patients in mind and i'll follow-up with her to see how patients are doing.showed dr Butrans patient info booklet,discussed application/rotation section so dr can discuss this info with patients.recommended Senokot-S
PPLPMDL0020000001	Bedford	OH	44146	8/24/2011	Dr Moufawad said he got an invitation to attend a training in Connecticut. I asked his thoughts. He said he is planning to go & is looking forward to the training. He said everything is "fine" with Butrans. I asked him what types of patients he is identifying now as Butrans patients. He said it is the same patient type as he always was, he is just looking for different options to use for breakthrough pain. He added that he is now giving ibuprofen or Nycynta but has heard of physicians prescribing Percocet for breakthrough pain but he would not do that. I asked why. He said it would not work. I asked him to elaborate. He said clinically it would not work. He then said he had to go & went into a patient room. Spoke with Amber who requested more savings cards. She also said she is having a lot of difficulties getting Butrans covered. I asked what plan(s) & asked if it was Medicare/Medicaid giving her trouble. She said Medicaid. Discussed prior authorization. She said she has tried "everything" to try to get them to cover it but to no avail. Discussed managed care & emphasized BWC & commercial insurance. talked to dr about Butrans fpi,5 core selling messages and dr said he's not heard of Butrans but likes that it's a transdermal medication.asked dr what other features he liked about Butrans? dr said CII so calling in refills is easy and once weekly dosing.showed dr butrans visual aid,pg.11,pain conditions and asked dr if he treats these conditions? dr said yes,asked dr how he approaches these conditions as it relates to treating chronic pain? dr said all non-opioid therapies 1st,then will start patients on short-acting opioids.showed dr initiation of butrans section,discussed opioid naive and experienced patients and asked dr to just think of a couple patients that he can start on Butrans,dr said he will do that and asked who covers Butrans? discussed formulary coverage,told dr to focus on commercial plans and BWC,dr said ok but they have a lot of medicaid patients so he wanted to know coverage for them,discussed Prior Authorization requirements for medicaid patients.recommended Senokot-S
PPLPMDL0020000001	University Heights	OH	44121	8/24/2011	Ask doc for a moment to discuss Butrans. He said the co pay is too high. I reviewed the formulary plans and the importance of giving patients a savings card. Reminded him of the BWC coverage with oxycontin as well as butrans.<font color=blue><b>CHUDAKOB's query on 09/01/2011</b></font>Why does he think the co-pay is too high? What is too high to him?<font color=green><b>SIMERTOC's response on 09/12/2011</b></font>He has poor patients that don't want to pay more than a couple of dollars<font color=blue><b>CHUDAKOB added notes on 09/14/2011</b></font>That sound like a smoke screen to me. Until you get past that, you may have a difficult time getting him to prescribe anything.
PPLPMDL0020000001	Cleveland	OH	44109	8/24/2011	talked to dr about butrans fpi,5 core selling messages,dr is PGY-1,so not much experience prescribing opioids.dr said she likes transdermal delivery and once weekly dosing.dr asked about the molecule buprenorphine and wanted more info,showed dr butrans visual aid,MOA section,dr said ok and asked about insurance coverage for medicaid as that's majority of patients.we talked about insurance for medicaid but told dr to focus on commercial and BWC patients.asked dr if she had a few patients in mind if she's asking about insurance? dr said no just wondering.showed dr pain conditions,pg.11 visual aid and asked if she treats any of these conditions? dr said yes they see all of them but again this is her 1st yr so not much exposure to opioids yet.i asked dr to think of Butrans for either opioid naive or opioid experienced,showed info in butrans visual aid,dr said ok she'll keep it in mind.recommended Senokot-S
PPLPMDL0020000001	Independence	OH	44131	8/24/2011	I asked Dr Jack what it really is that is holding him back from prescribing Butrans. He said he knows I have been working hard on them for awhile now. I reminded him I have been visiting him weekly since January & told him perhaps he just does not see merit in Butrans as I would have to believe he would prescribe if he saw any benefit for his patients. He said that was not it. He said he is used to patches being "the big guns" & thinks of them automatically as strong. I agreed Butrans does have abuse/addiction potential & he should be cautious in prescribing & reminded him it is CII. He said he keeps forgetting that it is CII & thinks of it as a CII. Again told him this does not mean it is less abusable- he said he knows. Reminded him of once weekly dosing which he said he likes. Spent time with initiation guide, especially pg 6. Let him know it is not an option for all his patient, but to consider those with the chronic conditions we have talked about (ie spinal stenosis, spondylolysis). He said he really is going to prescribe now. Discussed managed care & savings. Maria (office manager) told me that one of Dr Jack's patients has been on OxyContin 40mg for awhile, was getting his script filled at a pharmacy in Brecksville. (She said she could not remember which chain it was). A male pharmacist at that pharmacy had been changing the quantity on the prescriptions & pocketing the extra pills. She said he had been doing this for a long time & was just caught two months ago.
PPLPMDL0020000001	Broadview Heights	OH	44147	8/24/2011	Spoke with Margaret, nurse, who said Dr Samuel would not be able to see me this afternoon due to patient load. Discussed with her Butrans patient information booklet & savings information for Butrans & OxyContin. She said they did not need any additional savings cards at this time & that they had no questions about Butrans. I asked her to give Dr Samuel the E-Detail invite & ask him to log on, explaining the interactive nature of the program. She agreed.
PPLPMDL0020000001	Broadview Heights	OH	44147	8/24/2011	Spoke with Margaret, nurse, who said Dr Samuel would not be able to see me this afternoon due to patient load. Discussed with her Butrans patient information booklet & savings information for Butrans & OxyContin. She said they did not need any additional savings cards at this time & that they had no questions about Butrans. I asked her to give Dr Samuel the E-Detail invite & ask him to log on, explaining the interactive nature of the program. She agreed.
PPLPMDL0020000001	Warrensville Heights	OH	44122	8/24/2011	Spoke with Adrienne (MA) who said Dr Zivic was not in. Discussed patient information booklets with her & talked about answering patient questions if they call in since she takes some of the calls. Also reviewed savings information for both products & discussed eligibility requirements. She said it is unfortunate that Medicare & Medicaid patients cannot use the discount cards because they have a lot of those patients in their practice. Reminded her of favorable OxyContin Medicare Part D coverage. She said she would leave Butrans information for Dr Zivic. I asked Dr if he's had success with any Butrans patients who he has started recently. he said he hasn't heard back from the ones he started this month, but if they didn't call back then it's good news. I asked him to focus on commercial insurance and BWC and he said he thinks it has been going through on managed care. Reminder that OxyContin is covered for Medicaid patients.
PPLPMDL0020000001	Westlake	OH	44145	8/25/2011	Dr is still frustrated with managed care for Butrans and has not tried any new patients. I reviewed the managed care grid and asked if he could just focus on appropriate patients who have Medical Mutual and Medco patients to start on Butrans. He said he would. I reviewed the saving cards for Butrans and reminder that OxyContin is an option covered on Med D AARP and Medicaid.
PPLPMDL0020000001	Westlake	OH	44145	8/25/2011	Dr said he knows about Butrans being an option but hasn't had any patients that want to stop pills and start Butrans.showed dr Butrans visual aid,told dr he could still give immediate release opioids to patients with Butrans.i asked dr what he liked about Butrans? dr said he likes that it's a patch and dosed once a week and thinks it is a good option but he hasn't had anyone in mind.dr had to go so told dr to focus on BWC or commercial pain patients when he is ready to start patients on Butrans,dr said ok.recommended Senokot-S<font color=blue><b>CHUDAKOB's query on 09/01/2011</b></font>What do you think he meant when he said he "Hasn't had anyone in mind"?<font color=green><b>BROOKAM's response on 09/05/2011</b></font>Barry,after taking a closer look at this call note and your query, this totally went over my head, so great catch on your part,on the next call with dr i will ask him who HE feels are appropriate patients for Butrans and i will be sure to show the Butrans visual aid, specifically pg.11, and discuss pain conditions.<font color=blue><b>CHUDAKOB added notes on 09/07/2011</b></font>Amy, thanks for having an open mind. I hope it proves useful.
PPLPMDL0020000001	Cleveland	OH	44113	8/25/2011	dr said he knows about Butrans being an option but hasn't had any patients that want to stop pills and start Butrans.showed dr Butrans visual aid,told dr he could still give immediate release opioids to patients with Butrans.i asked dr what he liked about Butrans? dr said he likes that it's a patch and dosed once a week and thinks it is a good option but he hasn't had anyone in mind.dr had to go so told dr to focus on BWC or commercial pain patients when he is ready to start patients on Butrans,dr said ok.recommended Senokot-S<font color=blue><b>CHUDAKOB's query on 09/01/2011</b></font>What do you think he meant when he said he "Hasn't had anyone in mind"?<font color=green><b>BROOKAM's response on 09/05/2011</b></font>Barry,after taking a closer look at this call note and your query, this totally went over my head, so great catch on your part,on the next call with dr i will ask him who HE feels are appropriate patients for Butrans and i will be sure to show the Butrans visual aid, specifically pg.11, and discuss pain conditions.<font color=blue><b>CHUDAKOB added notes on 09/07/2011</b></font>Amy, thanks for having an open mind. I hope it proves useful.

PPLPMDL0020000001	Cleveland	OH	44102	8/25/2011	talked to Nagla,PA,about patients she's seeing with all 3 doctors,that she feels are appropriate for Butrans.Nagla said she understands that if patients have chronic pain and are taking short-acting opioids daily and not controlled,they could be appropriate for Butrans.showed Nagla Butrans visual aid,appropriate patients section and asked Nagla if she can identify a few patients,taking low doses of short-acting opioids and recommend to doctors that these patients get started on Butrans? Nagla said she will do that and knows dr celeste and dr carson have started a few patients on Butrans and patients seem to be doing well.we talked about follow-up with patients,post initiation of Butrans,discussion of application/rotation of Butrans and showing patients Butrans patient info booklet,discussed formulary coverage for Butrans,recommended Senokot-5
PPLPMDL0020000001	Independence	OH	44131	8/25/2011	Quick call as I caught Dr Sundaram between patients. He said he knows I am there to remind him about Butrans. I reminded him of the patient type we have been discussing, mainly those with chronic conditions who are either ready for an opioid for a chronic condition or those who are not being well-controlled on their short-acting around-the-clock regimen of medication. He said he will keep it in mind. Also reminded him of OxyContin 7 tablet strengths, including 15, 30, & 60mg. He said "OK" & walking into a room. Spoke with Lisa, discussing appropriate patient type & savings available.
PPLPMDL0020000001	Parma	OH	44129	8/25/2011	Spoke with Kathy (MA) & discussed Butrans as a follow-up to my last lunch. She said Dr Tolentino actually had gone on medical leave since that last visit & that she just returned today. Kathy said she would remind Dr Tolentino what we had talked about at lunch (ie appropriate patient type) & would try to help her identify patients who may be good candidates. Also discussed E-Detail invite. She said she would give it to her but that she would not do it because she never does them. Told her it was worth a try.
PPLPMDL0020000001	Independence	OH	44131	8/25/2011	Dr Pai said he is having difficulty with Butrans again. I asked him to elaborate. He said insurance is not covering it. I asked if he remembered what plan. He said it was a Medicare Part D plan. I reviewed formulary grid with him, asking him to focus on commercial insurance patients. I asked him to tell me about the patient he had tried to prescribe Butrans for. He said it was a patient taking chronic Vicodin 3-4 times per day. I asked what was causing his pain. He said it was some form of low back pain. I showed inclusion criteria & asked if it was low back pain from any of those conditions. He said probably osteoarthritis. Told him that would have been clinically an ideal patient & he chose a good one to try, it was just that insurance was the hurdle. I asked if he has working patients like that one where he thought he may be able to prescribe. He said he does have a lot of patients, but added that most probably have Medicare Part D or Medicaid drug coverage. Told him even if it is a small part of his practice, he could try to identify a few patients to get a good sense of his thoughts of Butrans clinically. He said he likes buprenorphine as a molecule a lot & really has no objection other than insurance coverage. Gave him a formulary grid, discussed savings cards, & asked if he would keep trying Butrans for appropriate patients who have commercial insurance. He agree. Also discussed OxyContin as an option for patients beyond Butrans.
PPLPMDL0020000001	Northfield	OH	44067	8/25/2011	Followed-up on this lead per Cindy from Dr Ortega's office. Spoke with Maggie (nurse & office manager) & Jackie (MA) & introduced myself & Purdue's products. I let them know I work with Dr Ortega & Cindy & that they had recommended that I come in to see Dr Marshall. Maggie said today would not be a good day to see him. Asked when I could set up an appointment. She gave me his card & asked me to stop back after noon on a Thursday or on a Monday or to call & she would find a less busy day to stop in. Told her about Butrans (indication, appropriate patient type) & asked if she thought it sounded like something he would be interested in hearing more about.
PPLPMDL0020000001	Parma	OH	44129	8/25/2011	She said he does have patients who fit the profile & that she felt it would be worth him hearing about. Let Dr Paat know I was there to follow-up on our Butrans lunch. I reminded him of the patient type we spoke about & asked if he remembered the conversation he said he did but that he has not prescribed yet because he forgot. Reminded him of appropriate patient type, focusing on those with disease states from our inclusion criteria. I showed him the inclusion criteria again & asked if they were conditions he treated frequently. He said yes. I told him someone with one of those conditions who he was ready to start on an opioid & who had commercial insurance would be an ideal Butrans candidate. Also reminded him that patient could use a savings card & pay around \$15 out-of-pocket for their month's prescription of Butrans. He said he will do this for his next patient who fits those criteria & he has no problem with the medication. He asked me if Butrans is once-weekly dosing & I told him yes. Also handed him e-Detail invite. He thanked me & walked away.
PPLPMDL0020000001	Cleveland	OH	44106	8/25/2011	talked to dr about patients he's considering appropriate to start on Butrans.showed visual aid for discussion and showed pg.11 pain conditions.dr said he see's all of these conditions and treats all of them with non-opioid therapies 1st,then if patients still have chronic pain,he'll give them tramadol,he'll give them tramadol we talked about considering Butrans for patients opioid naive or after the 1st tramadol dose didnt provide pain control,dr said he's thinking of Butrans more and has started a few patients.dr asked about medicaid coverage,we discussed Butrans formulary coverage for medicaid and commercial plans.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44113	8/25/2011	talked to dr about patients he's considering appropriate to start on Butrans.showed dr pg.11 pain conditions,discussed treatment plans for a couple of pain conditions,dr said all non-opioid therapy choices are tried 1st then usually by the time they come to him,patients have tried all narcotics,once in awhile he gets "ew" patients that havent tried narcotics.dr said most patients have been taking tramadol or vicodin for years and thats all they want,they want their pills.talked to dr about considering Butrans as an option for patients earlier in therapy,right after tramadol isnt controlling the pain,dr said he is keeping Butrans as an option and will consider Butrans earlier for patients focused dr on BWC and commercial plans for Butrans.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44109	8/25/2011	dr said he hasnt started anyone on Butrans yet but he's reviewing patients charts with Nagla,PA, and seeing what she thinks about Butrans for some patients.dr said he knows Nagla worked with Dr Celeste to get a few patients started on Butrans so he's waiting to get feedback from Nagla on these couple patients before he prescribes.i asked dr what's really holding you back,preventing you from starting a couple patients on Butrans? dr said he thinks majority of patients like taking their pills and will have a hard time understanding that they have to apply a patch once a week,dr referenced the patient population being Medicaid that this was a challenge to understand Butrans and dr said its a lot of time to explain a patch,how it works,what patient has to do,etc.told dr he can put Butrans patient info booklets in exam rooms,which will educate patients,and dr is the 1 who decides what medication is best for patient.dr agreed and said its frustrating as many patients demand what they want and dr just gives them pills.i asked dr to take control of the situation,talk to a couple patients who have 1 of the pain conditions shown on pg.11,butrans visual aid,BWC or commercial insurance,and start them on Butrans.dr said ok he will do that.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44113	8/25/2011	talked to dr about patients he's considering to start on Butrans again,since he stopped writing for a bit.dr said he's thinking of patients taking tramadol or vicodin that have any pain condition but arent controlled.showed dr butrans initiation section in visual aid and dr said he will continue thinking of Butrans and start more patients,we discussed importance of application/rotation sections in Butrans patient info booklet,to share with patients and follow-up with patients to be sure patients are tolerating Butrans and proactively address side effects.dr said he is doing that.told dr to focus on BWC and commercial plan patients.recommended Senokot-5
PPLPMDL0020000001	Strongsville	OH	44136	8/25/2011	Spoke with technician who confirmed Butrans stocking for 5 & 10mcg. She said she thinks they have one or two customers on it regularly. Discussed their ability to print savings cards online at Butrans.com. She said she does not know if the pharmacists remembered that, so she would let them know. Also discussed patient information booklets, patient counsel, & letting patients know to give Butrans 3 days to start working. Reviewed OxyContin savings cards but she said they have enough for now.
PPLPMDL0020000001	Cleveland	OH	44113	8/25/2011	talked to dr briefly as dr said she started 1 patient on Butrans,dr said it was easy to discuss with this patient as patient had been taking percocet daily for chronic pain and not controlled.dr said she has initiation guide which is easy to understand and insurance info with butrans patient savings cards and has a couple booklets so she is good at the moment.i asked dr if she has a couple more patients,like the 1 she started,that she can start on Butrans? dr said yes and she will be doing that.recommended Senokot-5
PPLPMDL0020000001	East Cleveland	OH	44112	8/25/2011	I asked doc if he participated in the Butrans e-detail. He said he does not have time for that and he just wanted me to tell him what he needs to know. He did ask me if there was any stocking issues with oxycontin as patients are complaining that pharmacies are saying that it is on back order. I told him I was unaware of any stocking issues. I asked what he does for those patients. he said he just tells them to wait until it get in or try another pharmacy. Reminded him of the BWC coverage with Butrans and oxycontin.
PPLPMDL0020000001	South Euclid	OH	44121	8/25/2011	Window call....I reviewed the butrans patient type, formulary coverage and the savings card program. Gave her an e-detail invite and initiation guide. . Nothing learned.
PPLPMDL0020000001	Cleveland	OH	44121	8/25/2011	Window call....Reviewed the butrans indication/patient type and dosing. Gave doc an e-detail invite and formulary grid. Nothing learned.
PPLPMDL0020000001	South Euclid	OH	44121	8/25/2011	Window call....Introduction to doc. Gave him an initiation guide and formulary grid. Nothin learned.
PPLPMDL0020000001	Cleveland	OH	44113	8/25/2011	gave dr webcast invitation for Butrans,e-detail invite and asked him to consider Butrans as an option for his BWC patients that have 1 of the pain conditions,pg.11 visual aid,that are taking tramadol daily but not controlled.dr said he will consider it but highly unlikely that he'll prescribe Butrans as its a CIII and he doesnt write CII or CIII medications.dr said he'll start more patients on Ryzoil,as its a once daily dosing option of tramadol and he likes that but thats it.talked about Ryzoil value cards and told dr focus again on BWC for Ryzoil.recommended Senokot-5
PPLPMDL0020000001	Mayfield Hts	OH	44124	8/25/2011	Spoke to Steve Ilko, who replaced Sandy(who has retired). He confirmed stocking of 5mcg but he has not seen any scripts. He was on duty w/o a tech so he didnt have much time. I discussed the 7 day delivery of a CIII narcotic and the contents of the box.
PPLPMDL0020000001	Parma	OH	44129	8/25/2011	Caught Dr Rossi at the window for a quick call. Positioned Butrans once-weekly transdermal system in place of short-acting around-the-clock medication for chronic moderate to severe pain. Also handed back REMS packet & asked her to read its contents. She thanked me & went into a room. Spoke with Britney & reviewed patient savings cards, managed care, & information booklets.
PPLPMDL0020000001	Highland Heights	OH	44143	8/25/2011	Doc said he is having good results with Butrans. He thinks it is great for elderly patients and he asked about medicare coverage again. I reminded him of lack of coverage on medicare/medicaid. He said he has an elderly female patient on it for a couple of weeks and she loves it. She was able to afford it. I explained that medicare may cover it for just one month or she may have supplemental insurance. Spoke to Vickie about a patient on butrans that called Purdue about the patch not sticking well. Purdue sent him something to help the patch stay on. She did not know what the product was. I reviewed the formulary coverage of oxycontin and butrans.
PPLPMDL0020000001	South Euclid	OH	44121	8/25/2011	Window call....Reviewed the butrans indication/patient type and dosing. Gave doc an e-detail invite and formulary grid. Nothing learned.
PPLPMDL0020000001	Westlake	OH	44145	8/25/2011	Dr said that he has been continuing to prescribe Butrans and he's having success with most patients. I reviewed the inclusion criteria and he said that is almost all of his patients. He said he has been trying Butrans before going to methadone and instead of vicodin. I asked if he would start a new patients this week and he agreed. I spoke with the entire staff regarding the patient medication guide and savings cards. I let them know how to instruct the patients about application and that they should wait 3 days before titrating.
PPLPMDL0020000001	Cleveland	OH	44130	8/25/2011	I reminded Dr Diab of our last conversation when we discussed titrating short-acting upward vs switching patients to a long-acting. He said to hold on & he would come back after he saw a patient. When he did return, I asked him what makes someone a good candidate for a long-acting. He said only, "they need it," & then walked into a room. Spent time with Dina going over patient information guides & savings cards. She said she triages patients along with the rest of the MA's. She also finds out if they need refills on their prescriptions.
PPLPMDL0020000001	Akron	OH	44308	8/25/2011	Rupa Shah presented Disparities in Pain Care vs webinar. There was a total of 21-23 Case Managers from BH and Case Management who attended. I distributed the Safeguard my meds brochure after the program as well as 2 Med Ed catalogs for the CEs. Carla and Julie are both interested in another program for the end of Sept or Oct before they get busy in Nov-Jan.
PPLPMDL0020000001	Akron	OH	44308	8/25/2011	National Webinar: The August webinars, Disparities in Pain Care were successfully completed. The questions and dialogue that followed the presentations certainly illustrated the need for this type of information.Attendance records for the programs indicate the following:&#8226;Healthcare professionals in 23 states and DC participated&#8226;64 institutional encounters (over 90% were either Managed Care Organizations or Long-term Care Facilities)&#8226;190 healthcare professionals attended
PPLPMDL0020000001	Cleveland	OH	44103	8/25/2011	talked to Dave,Pharmacy Manager about Butrans 5 core selling messages and Dave said they havent gotten any Butrans scripts lately,asked Dave what really stood out to him about Butrans? dave said once weekly dosing and transdermal delivery.i asked dave if he would give patients Butrans patient info booklets,when he provides patient counseling if patients are taking short-acting opioids and not controlled? dave said he'll do that and patients can talk to their doctors as he's not recommending opioid changes to doctors they have to make those decisions.left booklets and asked dave to recommend Senokot-5
PPLPMDL0020000001	Westlake	OH	44145	8/25/2011	I asked Dr if he's seen any patients this past week who have a condition listed in our inclusion criteria. He said he has not seen any who were not already taking higher doses of opioids. We discussed OxyContin as an option for these patients. I asked if he would find just a few patients for Butrans and he agreed.
PPLPMDL0020000001	Westlake	OH	44145	8/25/2011	Quick call, I asked Dr if he's continuing to have success with Butrans and if he can think of more patients who might benefit. He said everything is going good and it's a good option. I spoke with Kelly and Tina and reviewed the savings cards and managed care for Butrans. They said that there have not been many prior auths for Butrans and everything is going smoothly.
PPLPMDL0020000001					



	Solon	OH	44139	8/25/2011	Had conf call with Dan Best, Dan Doucette any myself to discuss why the rebate owed to Member Health is delayed. Dan Best was told by Tony (rebate analyst)the reason it was held up was that I was holding it because I didn't know how to send it to as a text file. Dan Best didn't believe I would do that so he wanted to speak with us to get the facts. Dan D and I reviewed all of the communications I had with Tony and Mike since May 26 to get the utilization report but hadn't received it until Aug.23 from IMS. Dan Best said there's been alot of changes with the buyout and he knows the rebate dept has been behind and has had problems. He thanked us for our diligence in working with them and also apologized for the delay in getting the MKT pieces approved. I need to follow up with Mike regarding this. Dan Best thanked us for working with them and moving forward. We promised to work more with Tony to provide a timeline of what's due to Purdue to set up the estimated payment and make Dan aware if things are not getting done on time.
PPLPMDL0020000001	Cleveland	OH	44113	8/25/2011	talked to Dale,PA,about patients he's considering appropriate to start on Butrans as Dale said he's started a few patients recently.Dale said these are patients taking tramadol or vicodin daily and asking for more pills and he's starting them on Butrans instead and only giving short-acting opioids for breakthrough pain.Dale said he tells patients this is a patch and its dosed once a week,Dale said he thinks its just how you say it to the patients to gain acceptance.showed pg.11 pain conditions,discussed them and Dale said they see all of these but doctors will always go to injections,blocks,physical therapy,acupuncture,etc.,non-opioid therapies 1st then the doctors will consider opioids and he's recommending Butrans for patients who are opioid naive as well as those taking short-acting opioids daily and have been for years.we talked about insurance coverage,told Dale to focus on BWC and commercial plans.recommended Senokot-5font color=blue>b>CHUDAKOB added notes on 09/01/2011</b></font>Good next call objective Amy! The answer will be interesting!
PPLPMDL0020000001	TWINSBURG	OH	44087	8/26/2011	Introduced myself & Purdue's products to Amy, pharmacist. She said this location just opened two weeks ago & that they do currently have OxyContin but not Butrans. Let her know that several of the other locations do dispense Butrans & reviewed indication, dosing, delivery system, & appropriate patient type. Also discussed CII & abuse/addiction potential. She said it is nice for physicians to have an option for a transdermal system in the CII class. I asked if this building will have a pain management department & she said Dr Ningengowda will be coming here to see patients although she was unsure of the schedule. Discussed savings cards for Butrans as well as the ability to print them online at Butrans.com. Also reviewed OxyContin savings cards & gave her a package. She said she rarely has seen Ryzolt prescriptions so she did not want a package of savings cards. Let her know I spoke with MA Deena who said Dr Sadowski is on vacation this week. I asked her how we are going to get Dr Sadowski to try a few appropriate patients on Butrans. She said she is just going to start asking him when she hears from a patient who may be a good candidate. I asked her how many patients have called her asking for increases in their pain medications or who are telling her their short-acting pain medication is wearing off too quickly. She said "a lot". I told her some of them are potential Butrans patients. She said it would be a good fit in his practice, especially if he could try someone on that before referring to pain management. Reviewed CIII & abuse/addiction potential. She said to come back next week to try to see him.
PPLPMDL0020000001	Garfield Hts	OH	44125	8/26/2011	Spoke with MA Jenny & reviewed Butrans with her. Discussed indication, dosing, & delivery system. I also told her about Butrans E-Detail program & explained interactive nature of it. I asked her to give Dr Hochman a webcast invitation, FPI, & E-Detail invite. She said she would give the information to him & also remind Susan about my appointment request. She said to check back in a few weeks.
PPLPMDL0020000001	Westlake	OH	44145	8/26/2011	Quick call with Lisa, we reviewed the managed care and savings program for Butrans and OxyContin. She said she has not seen a lot of Butrans movement, but she feels comfortable tell new patients about proper use and application. Reminder about steady state in 3 day and that Drs can write refills.
PPLPMDL0020000001	Brooklyn	OH	44144	8/26/2011	Spoke with Tiffanie (MA) who said Dr Detwiler is on vacation this week. Discussed Butrans appropriate patient type & asked if that sounds like any of Dr Detwiler's patients. She said yes. She said she does get phone calls from patients saying they need an increase in their pain medications. She added that she only tells Dr Detwiler about it & then does whatever he tells her for that patient. She said she does not make suggestions or recommendations of medications to him. Discussed managed care coverage for Butrans & OxyContin. She said she would leave the information for him & that I could return next week to try to catch him.
PPLPMDL0020000001	Cleveland	OH	44113	8/26/2011	dr said he hasn't started anyone on Butrans as he couldn't remember much about it other than its a transdermal medication and asked me to review appropriate patients, dosage strengths and insurance info with him today.showed dr Butrans visual aid,discussed 5 Butrans core messages,asked dr what really stood out to him besides transdermal delivery? dr said once weekly dosing and that Butrans is a CIII. asked dr why those features? dr said patch dosed once a week is easier for some people and he could cut down some of the pills he writes every month.showed dr Butrans fpi,maintenance of therapy section discussed option of non-opioids or immediate release opioids with Butrans.showed dr pg.11 visual aid,pain conditions,discussed chronic low back pain and dr said all non-opioid therapies are tried 1st then he'll start patients on narcotics.talked to dr about Butrans being an option for opioid naive or experienced patients,dr said he probably wouldn't start someone on a long-acting opioid he would start with tramadol but if that didnt provide enough pain control he might consider Butrans after that.showed dr Butrans initiation section,discussed titration and how to write script of Butrans and asked dr if he had a couple patients today that he could talk to about Butrans? dr said he's not sure but if he does see some patients that he feels are appropriate,he'll consider Butrans,discussed formulary coverage,BWC and commercial insurance focus.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44109	8/26/2011	talked to dr about the couple patients he started on Butrans and asked dr if he could find more patients like that? dr said yes he thinks after all non-opioid choices are tried and he has patients try tramadol first,he will go to Butrans after tramadol.dr said he's not comfortable starting patients on a long-acting opioid,even knowing they have chronic pain and will need an opioid for an extended period of time.showed dr Butrans visual aid,pg.11,discussed low back pain and then appropriate patients section and initiation of Butrans,dr said he will look for more patients to start on Butrans.focused dr on BWC and commercial insurance for Butrans.recommended Senokot-5
PPLPMDL0020000001	Northfield Center	OH	44067	8/26/2011	Spoke with technician as pharmacist was busy assisting customers. She said they do not have Butrans & she had not heard of it. Discussed indication, usage, appropriate patient type, & delivery system. Also discussed savings available through e-voucher or savings cards. Also discussed OxyContin savings cards & eligibility requirements for savings programs (ie no government plans). She said she would give the information to the pharmacists.
PPLPMDL0020000001	Macedonia	OH	44056	8/26/2011	Quick call- Saw Dr Yager at the window. Positioned Butrans for patients on short-acting around-the-clock opioids who may benefit from once-weekly transdermal option for pain. He waved & thanked me, then walked away.
PPLPMDL0020000001	Westlake	OH	44145	8/26/2011	Spoke with Marge who said they are undergoing the change to EMR, so they are especially behind. Reviewed patient savings information with her. She said she would be sure Dr Yager got the Butrans information I left for.
PPLPMDL0020000001	Warrensville Heights	OH	44122	8/26/2011	Quick follow up. Dr said he thought about Butrans after I left yesterday and started a new patient. I asked if he will start some more today as well. He said he will do his best.
PPLPMDL0020000001					Quick call- Caught Dr Brooks at the window & handed back Butrans webinar & E-Detail invitations. I told him both were interactive in nature & would be valuable sources of Butrans information. I asked him if he thought he would be able to log on. He said he was not sure but he would see, then walked away. Spoke with Beth, one of his MA's & reviewed Butrans formulary information & savings cards. Also discussed OxyContin savings cards. She said they have enough savings cards for both products for now.<font color=blue>b>CHUDAKOB's query on 09/01/2011</b></font>Did Dr. Detwiler move in with Dr. Brooks? Look at your next call objective.<font color=green>b>APSEGAS's response on 09/06/2011</b></font>No, no moving going on. I am not sure what I did there. I probably did not change the name of the physician if my next call objective was the same for both physicians & I copied it over. In looking at Dr Detwiler's next call objective, it appears that is what happens. While I rarely have multiple next call objectives be the same, I will pay better attention to that in the future. Apologies for any inconvenience.<font color=blue>b>CHUDAKOB added notes on 09/07/2011</b></font>No inconvenience. Copy and pasting is probably not advisable in call notes.
PPLPMDL0020000001	Cleveland	OH	44113	8/26/2011	lunch with dr bhiman's office
PPLPMDL0020000001	Cleveland	OH	44109	8/26/2011	talked to Ray,Pharmacy Mgr.about Butrans and Ray said no scripts for Butrans yet.asked Ray what features of Butrans stood out to him? Ray said once weekly dosing and transdermal delivery.asked Ray if he would share Butrans patient info booklets with patients,when he provides patient counseling on opioids if patients tell him they arent controlled on short-acting opioids? Ray said he'll give booklets to patients and they can talk to doctors as he doesnt recommend opioids to patients,discussed formulary coverage for Butrans and talked about OxyContin stocking and formulary coverage.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44125	8/26/2011	Spoke with Emily, pharmacist & reviewed Butrans with her. She said she knows about it but has not dispensed it. Discussed ability to take supplemental analgesia with Butrans in the form of opioid or non-opioid immediate release medications. She said she would imagine a drug interaction warning coming up when trying to dispense Butrans for a patient on other opioids due to the nature of buprenorphine. Also discussed appropriate range of patients & patients beyond Butrans being possible OxyContin candidates. Reviewed Butrans savings via e-voucher & OxyContin savings cards as well as eligibility requirements.
PPLPMDL0020000001	Twinsburg	OH	44087	8/26/2011	Spoke with Jackie (MA) & discussed savings cards for Butrans & OxyContin. Also reviewed eligibility, making sure she knows patients with any type of government insurance cannot use the cards. Also gave OTC samples & worked with Jackie to schedule lunches to meet with the internal medicine group & Dr Leonard. I asked Jackie to be sure Dr Leonard got the Butrans information & invitation & she agreed to get it to her ASAP.
PPLPMDL0020000001	Solon	OH	44139	8/26/2011	Spoke with Mike regarding OxyContin Marketing pieces. We reviewed the feedback he received from his VP of MKT and says there may be more levels of feedback from Caremark. He says their Compliance has not been easy to work with so he will provide feedback next Friday. I summarized his edits and forwarded this to Dan, Lynn, Tim and Todd.
PPLPMDL0020000001	Cleveland	OH	44109	8/26/2011	worked pm&dr dept-see call notes on doctors
PPLPMDL0020000001	Beachwood	OH	44122	8/26/2011	Quick call- Saw Dr Tabbaa at the window. Attempted to stop him by offering Butrans & OxyContin savings cards. He said he did not need any more at this time, thanked me, & walked away. I spoke with Amy, one of his residents, who said he was still seeing patients. Offered to wait to talk to him but she said he would not want to stay. Discussed Butrans with her, reviewing indication, dosing, & delivery system. Also offered to her online education information. She was grateful & also promised to remind Dr Tabbaa about Butrans & give him the information I provided. She said they are in a huge transitional period right now, & with Jim gone, nothing is consistent with them. She said my best bet is to keep returning to try to see him.
PPLPMDL0020000001	Cleveland	OH	44109	8/26/2011	dr said he has a few patients in mind that he wants to speak with about Butrans,dr said he's going to give them Butrans patient info booklet to read and follow-up with them.showed dr Butrans visual aid,discussed pg.11,pain conditions dr talked about chronic low back pain patients and this treatment plan for them and use of opioids,dr said he's conservative and would start patients on tramadol.asked dr to start a few patients like this that tried tramadol and when that wasnt controlling their pain,start them on Butrans.dr said he will consider that option.dr asked about medical aid coverage for Butrans,discussed formulary coverage for Butrans.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44103	8/26/2011	talked to dr about patients with chronic low back pain and how he treats this pain condition,showed inclusion criteria pg.11,visual aid,discussed dr treatment for condition.dr said he starts with muscle relaxers,nsaids,physical therapy,manipulation,injections,etc all non-opioid therapies first then he'll start patients on tramadol or vicodin.I asked dr if he had any commercial insurance patients that could use Butrans savings cards like this and start them on Butrans right before tramadol? dr said he would to short-acting opioids first then consider a long-acting opioid.I asked dr to think of a few patients today that he could start on Butrans right after the 1st tramadol dose if he wouldnt consider an opioid naive patient,dr said ok he had to go.gave OxyContin reminder and formulary coverage reminder.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44113	8/26/2011	dr said she's still starting patients on Butrans and is happy with clinical improvements in patients pain,dr said she's really been focused on patients taking vicodin and percocet daily for their chronic pain that keep asking her for more pills as they arent controlled told dr she could also consider starting patients that take tramadol daily for chronic pain,showed pg.11 pain conditions and discussed a couple of them and dr said she always tries NON-opioid therapies 1st then she'll start patients on tramadol,dr said she's not comfortable starting patients on a long-acting opioid when they are "opioid naive",dr said she understands thats an option but isnt going to do that.told dr that she could consider Butrans right after the 1st dose of tramadol isnt controlling patients pain,dr said she will consider that,discussed formulary coverage,focus BWC and commercial insurance,recommended dr said she has a few patients on Butrans and they are doing well,she's continuing to discuss Butrans with patients that are taking percocet every day for their chronic pain but not controlled and asking her for something else.showed dr pg.11,inclusion criteria and asked her if she treats these conditions? dr said yes,asked dr how she manages chronic pain for these conditions,dr said all non-opioid therapies first and each pain condition is different but when patients need a narcotic,sh'e'll start them on tramadol,asked dr to start a couple patients today,that have 1 of these pain conditions, on Butrans instead of starting them on a short-acting opioid like tramadol,dr said she will think about it,discussed formulary coverage,focus on commercial and dr said she's got a lot of medical aid so she's doing the PA for Butrans and its not a problem.OxyContin reminder,focus on medical aid and medicare for OxyContin and savings cards.recommended Senokot-5
PPLPMDL0020000001	Olmsted Falls	OH	44138	8/26/2011	Spoke with Kelly. We reviewed the medication guide for Butrans, and what to tell patients when they get a script. We discussed steady state and that Drs can call in and write refills since it's CIII.
PPLPMDL0020000001	Maple Heights	OH	44137	8/26/2011	Spoke with pharmacist Antuina & reviewed Butrans. She said she has not seen a single prescription for it. Discussed managed care, reminding her that Medicare & Medicaid would require prior authorization. She said about 1/2 their customers have Medicaid or Medicare coverage. Let her know that supplemental analgesia can be taken in the form of opioid or non-opioid medications which she said she was not aware of & was good to know.
PPLPMDL0020000001					Also discussed steady state in 3 days. Reviewed patient counsel & information booklet. Also discussed savings through e-voucher for Butrans & savings cards for OxyContin.

PPLPMDL0020000001	Mayfield Heights	OH	44124	8/26/2011	I reviewed the Butrans selling messages with doc and asked for his honest opinion - does he have patients in his practice that may be appropriate for butrans. He said probably not a lot. I asked him what keeps him from trying butrans. He said its just finding the right patient. He said he would probably think of it when he thinks of duragesic. I clarified that butrans is a patch similar to duragesic but the two are not interchangeable. Butrans is a CIII,can be prescribed as a first line narcotic, and may be more similar to hydrocodone vs duragesic in terms of analgesia and patient type. I reviewed formulary coverage and the savings cards. I explained that oxycontin may be appropriate for patients already taking 4-6 tabs/day of hydrocodone.
PPLPMDL0020000001	Brooklyn	OH	44144	8/26/2011	Quick call- Dr Miguel said he had very little time because Dr Detwiler was out of the office. Positioned Butrans for patients with chronic conditions who need around-the-clock opioid medication. He said he will try to remember.Also delivered reminder for OxyContin 7 tablet strengths & q12h dosing.
PPLPMDL0020000001	Lyndhurst	OH	44124	8/26/2011	I spoke with Patricia and Karen about the butrans indication and positioning. I asked them what they consider to be benefits of butrans. Patricia said that it is a once weekly patch. She also stated that the problem is the coverage. Most patients taht are ideal can get tramadol or vicodin for cheap. I reminded them of the formulary plans and savings cards. Patricia said they want to write it but they arent having enought opportunity with the patients that they have. Karen agreed and said they would continue to try.
PPLPMDL0020000001	Lyndhurst	OH	44124	8/26/2011	I asked doc how often she has patients that fail or max out on tramadol and she considers putting them on vicodin. She said that it is not uncommon, they may got to vicodin or something else. I asked her if she would consider pputting them on butrans instead, if they meet the indication. She said she has been trying to identify the right patients but the patient may be elderly or not have the right coverage. I reviewed the commercial insurance plans and asked her to try for those pateints. Reminded of the oxycontin patient type and coverage.
PPLPMDL0020000001	Lyndhurst	OH	44124	8/26/2011	I spoke with Patricia and Karen about the butrans indication and positioning. I asked them what they consider to be benefits of butrans. Patricia said that it is a once weekly patch. She also stated that the problem is the coverage. Most patients taht are ideal can get tramadol or vicodin for cheap. I reminded them of the formulary plans and savings cards. Patricia said they want to write it but they arent having enought opportunity with the patients that they have. Karen agreed and said they would continue to try.
PPLPMDL0020000001	Parma	OH	44129	8/29/2011	Dr Taylor asked if the state of Ohio is going to re-open the enrollment option to be registered as a pain clinic. I told her I do not know. She said if they do, she will apply, but if they do not, she will have to change her practice so that she is in alignment with the new laws. She said she is still "considering" using Butrans & that of all the pain medications, she is more likely to prescribe Butrans than any other. I reminded her that she had told me that there was a patient who she offered Butrans to but who declined. I asked her what it was about the patient or Butrans that made her choose it. She said because it is long-acting & CIII. I asked if she would look for other appropriate patients who might be candidates & reminded her that patients do not have to give up their short-acting medication when starting Butrans. She said she will remember that & will offer it to other patients. Invited her to my program but she said she will be in Florida & cannot attend.
PPLPMDL0020000001	Parma	OH	44129	8/29/2011	Jackie said she has not seen any Butrans activity. She added that she does still have the 5mcg strength but she sent back the 10mcg due to inactivity. I asked her if she had a customer who she noticed was requesting refills of their chronic Vicodin or tramadol too soon, if she would ever call their physician to recommend something long-acting like Butrans. She said that she does call those physicians who are "open" to suggestions. She said some physicians, like Drs Susteric & Dr Chagin, are willing to accept suggestions while others, including Cleveland Back & Pain physicians are not. She said Cleveland Back & Pain usually writes Vicodin for 1-2 weeks at a time for patients. I asked if she would ever recommend a product to a customer directly. Jackie said usually not because the patient will not say anything to the doctor. I gave her a tray of patient information booklets & let her know she could give them to patients if she felt Butrans might be something they would want to ask their doctor about. She agreed to put those on her shelf & do this.
PPLPMDL0020000001	Cleveland	OH	44106	8/29/2011	talked to dr about patients that have pain conditions, pg.11, and how he approaches them in pain management, dr said majority of their patients have already tried opioids so they are either changing medications or continuing them, dr said he likes Butrans being transdermal and prefers this delivery system, dr said he's rotating between all 3 locations and is recommending patients to get started on Butrans to the attendings.talked about 5 core messages, appropriate patients and focused dr on commercial plans and savings cards recommended Senokot-5
PPLPMDL0020000001	Independence	OH	44131	8/29/2011	Discussed Butrans appropriate patient type, focusing on those who may benefit from a long-acting option. Reiterated that Butrans is a once-weekly transdermal system of buprenorphine that is CIII. She said she heard they are trying to get a law passed that would allow mid-level practitioners to prescribe Butrans. I told her that as a CIII, she should be able to prescribe now & that others have done so without issue. She said she thought that for whatever reason, NP's & PA's could not prescribe buprenorphine products. Told her I did not know of this restriction. She said she would look into it & I let her know I would let her know if I heard anything further about that. Invited her to September 15 program. She said she is interested in attending. I offered to register her but she said she would do it. She said she likes to learn about products whenever possible & that she recently attended a pain conference that was very helpful for her. Debbie asked if BMI has an effect on Butrans absorption. Completed e-MIRF to get the question answered for her via medical services & told her I have no data that studies this
PPLPMDL0020000001	Cleveland	OH	44106	8/29/2011	talked to dr about 5 Core Butrans selling messages, dr talked about once weekly dosing and transdermal delivery, asked dr if he treats the pain conditions listed pg.11, visual aid? dr said yes they see all of those conditions, asked dr how he manages chronic pain for these conditions? dr said he will consider an opioid if patients pain is persistent and chronic, but usually they start patients on tramadol, asked dr how he would consider Butrans appropriate for patients? dr said if patients have tried short-acting and its not controlled pain, then would consider a long-acting opioid, showed dr appropriate patients section and asked if he had a couple patients with chronic low back pain that are taking short-acting opioids daily but not controlled? dr said he's sure there are some like that, asked dr if he could start these patients on Butrans instead of giving them short-acting opioids? dr asked about insurance coverage for Butrans, specifically Medicaid? talked about formulary coverage, focused dr on commercial plans, recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44113	8/29/2011	talked to dr about pg.11 pain conditions in visual aid, dr talked about chronic low back pain patients saying he will try all non-opioid therapies first, then consider an opioid and many patients he see's have already been on opioids so he's either maintaining that medication regimen or changing medication showed appropriate patients, opioid experienced, and asked dr if he could start a couple patients with chronic low back pain on Butrans? dr said he will consider it and knows Butrans is available, dr asked about insurance coverage, discussed BWC and commercial plans, talked to dr about OxyContin being an option for patients and discussed formulary coverage for OxyContin, recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44109	8/29/2011	discussed initiations presentation with dr, discussed patient case studies and showed dr butrans visual aid, 5 core messages, dr focused on transdermal delivery and once weekly dosing of Butrans, dr said he has patients taking tramadol and some have chronic pain so he thinks this could be an option for them, showed dr pg.11 visual aid, discussed pain conditions, dr focused on osteoarthritis as he treats a lot of patients with this pain condition, asked dr to start a few patients on Butrans per our discussion, dr said he will think about who's coming in this week and who would be appropriate, showed appropriate patients section, discussed initiation and titration of Butrans and butrans patient savings cards for commercial plan patients, recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44109	8/29/2011	showed dr Butrans initiations presentation, discussed 4 patient case studies and dr said majority of her patients with pain conditions dont take their tramadol daily, dr said even though patients have chronic pain, they have good days and bad days so they dont always have to take their tramadol, dr said thats why she's been hesitant to start anyone on Butrans, showed appropriate patients section and asked dr if she would ever consider Butrans for patients with osteoarthritis, who have chronic pain, instead of tramadol, dr said probably not, I asked dr to think of a few patients per our discussion that she knows they are taking tramadol daily for their chronic pain but not controlled and instead of refilling their tramadol, start them on Butrans, dr said ok she will consider it but doesnt have anyone in mind at the moment, dr asked about insurance coverage, discussed formulary plans and talked to dr for a minute, dr was busy with patients but said he hasnt started anyone on Butrans recently and he has mainly medicaid patients here in this office, gave dr Butrans webcast and dinner invitation(9/15/11) dr said he usually doesnt go to dinners because he's so busy but he'll look all the information over, gave dr butrans initiation guide and discussed appropriate patients if he has any commercial plan patients that he feels are appropriate to start on Butrans and left 1 pack Butrans booklets with him, dr said he is only working 1/2 day monday and 1/2 day wednesday's from now on and asked if I ever went to independence office, told dr that independence office was covered only by Ashleigh Aspega who dr knows, dr said ok try to catch him here but will be hard as he's always swamped with patients.
PPLPMDL0020000001	Lakewood	OH	44107	8/29/2011	Spoke with Rick, he has not seen movement of Butrans, we reviewed the medication guide and the important things to let patients know about Butrans when they first get their script. Reminder about savings cards for Butrans and OxyContin.
PPLPMDL0020000001	Lakewood	OH	44107	8/29/2011	Spoke with Pam, she has seen a few Butrans scripts and they have some of the patient medication guides to hand out. We reviewed the managed are and savings program for Butrans and OxyContin. We discussed that OxyContin is still an option and we are still discussing with physicians.
PPLPMDL0020000001	Westlake	OH	44145	8/29/2011	I showed the inclusion criteria and asked if he sees these types of patients, he said he does sometimes. I asked if Butrans might be able to benefit any of these types of patients he sees and he said he will give it a try. We reviewed how to prescribe and the invitation guide.
PPLPMDL0020000001	Lakewood	OH	44107	8/29/2011	I asked Dr if he still had the savings cards on his counter to remember Butrans, he does. I asked if he would start some of the patients we talked about in the past who he felt would benefit and he said he will if he sees them this week.
PPLPMDL0020000001	Lakewood	OH	44107	8/29/2011	Quick follow up, I asked if he found any more patients that could benefit from Butrans, he said he had only started the one and he has not heard back, he agreed to start more patients. We reviewed the savings cards and asked him to had out to commercial insurance patients. We reviewed the OxyContin is still an option covered on Medicaid. <font color=blue><b>CHUDAKOB's query on 09/08/2011</b></font><font color=blue><b>CHUDAKOB's response on 09/12/2011</b></font>-maybe something like- Dr I've been talking to you about Butrans for a while now and I'm surprised that you haven't decided to prescribe it for more of your patients. What types of patients are you thinking would be appropriate for Butrans?<font color=blue><b>CHUDAKOB added notes on 09/14/2011</b></font><font color=blue><b>CHUDAKOB added notes on 09/14/2011</b></font>-Much better! Thanks!
PPLPMDL0020000001	Cleveland	OH	44109	8/29/2011	worked rheumatology dept- call notes on rheumatologists
PPLPMDL0020000001	Lakewood	OH	44107	8/29/2011	Quick call, I asked Dr if he would try just a few patients on Butrans and I showed the invitation guide. He agreed. I spoke with the staff and asked if they had just a few patients with commercial insurance who could benefit from Butrans and they agreed to look for patients who's short acting was not controlling their pain. Reminder that OxyContin is still an option that is covered on Medicaid.
PPLPMDL0020000001	Euclid	OH	44119	8/29/2011	Quick call....Showed doc the butrans demo patch and reminded him of the indication and positioning. I asked him to log onto the butrans e-detail to learn more about the product. Butrans and oxycontin formulary reminder.
PPLPMDL0020000001	Cleveland	OH	44115	8/29/2011	talked to dr about her patients with osteoarthritis, showed pg.11 butrans visual aid, and how dr treats this condition, dr will try all non-opioid therapies first but if patients have persistent pain and its chronic pain, she will start them on tramadol, dr said even though these patients have chronic pain, some days are good and they dont need to take tramadol daily and other days are bad where they do need tramadol, dr said she only has a few patients that she knows take tramadol daily where she could consider Butrans as an option. dr asked about insurance coverage for Butrans, focused dr on commercial plans and patient savings cards, asked dr if she had a couple patients this week, per our discussion, that she could start on Butrans? dr said she might but will have to think about it, recommended Senokot-5
PPLPMDL0020000001	Lakewood	OH	44107	8/29/2011	Quick follow up, Dr told me that he tried to write Butrans for a Humana patients and it did not go through. I reviewed the managed care plans where Butrans is covered and I spoke with the staff. They were very frustrated with the managed care. We reviewed managed care for OxyContin as an option as well. <font color=blue><b>CHUDAKOB added notes on 09/08/2011</b></font><font color=blue><b>CHUDAKOB added notes on 09/08/2011</b></font>-Sounds like you need to do everything possible to alleviate any managed care concerns with the staff.
PPLPMDL0020000001	Independence	OH	44131	8/29/2011	Dr Trickett said she just saw one of her Butrans patients & that she reported that she felt great for the first 3 weeks/patches of Butrans therapy, but two days after she applied the 4th patch, she felt very nauseous & sick. She said the patient reported great pain relief for those first 3 weeks, but the 4th patch "made her sick". She said the patient was on 5mcg Butrans & had taken Vicodin as supplemental analgesia at first, but had since stopped taking it because she was doing well on Butrans alone. Dr Trickett said the patient had applied the first three patches as follows: upper outer arm left, upper outer arm right, upper back, upper chest. It was the patch on the upper chest that caused the problem. Asked if this would affect her prescribing in the future & she said no. Reminded her that the patient had reported good pain relief on Butrans but let her know I would report the adverse event. Discussed inclusion criteria with her. She said she treats patients frequently with these types of conditions. Asked if they are always painful. She said not necessarily- they are all chronic but are not all painful for all people. She said it is patient-dependent & that it can be difficult to treat pain patients because pain is so subjective. She said she will refer to pain management if she notices that a patient needs escalating pain medications.
PPLPMDL0020000001					Dr Trickett said she ended up prescribing OxyContin 10mg q12h for the patient who came off Butrans. The patient had been on Vicodin tid

PPLPMDL0020000001	Parma	OH	44134	8/30/2011	Spoke with Tom, a floater pharmacist & inquired about stocking of Butrans. He checked the shelves & confirmed that this location does stock all 3 strengths of Butrans. They actually had 2 cartons of each & had some open cartons. Discussed appropriate patient type (ie those on chronic Vicodin or tramadol who may benefit from a long-acting or transdermal option), which Tom said is very common. Gave him a patient information booklet & let him know that it can be given to patients. Let Tom know I would return another time to discuss Butrans with the regular pharmacist.
PPLPMDL0020000001	Cleveland	OH	44103	8/30/2011	talked to dr about her patients with some of the pain conditions on pg.11, butrans visual aid, dr said she has a lot of low back pain and arthritis patients, discussed with dr starting these patients on Butrans instead of tramadol. dr said she will consider Butrans earlier in therapy as she's only thought of a few patients that are currently taking percocet and weren't controlled, then she talked to them about Butrans. showed dr appropriate patients section and discussed initiation of Butrans. focused dr on commercial plans and patient savings cards. discussed OxyContin being an option for patients and formulary coverage. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44105	8/30/2011	dr had questions about the MOA of Butrans, showed visual aid and dr was comfortable with Butrans after discussing this info. dr asked who the appropriate patients were again as she couldn't remember? showed dr Butrans visual aid, appropriate patients and pg.11 pain conditions and talked about inclusion criteria. i asked dr if she treats these pain conditions? dr said yes a lot of low back pain and arthritis. we talked about dr's approach to pain management and dr said once patients get started on pills they just want more and more pills, we discussed initiation of Butrans for a couple patients with low back pain and arthritis so dr could get some clinical experience, dr said ok she will think about who's coming in this week and see if patients will put a patch on and remember to rotate weekly. showed dr Butrans patient info booklet, told dr to focus patient discussions on application/rotation of Butrans, dr said ok. focused dr on BWC and commercial plans. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	8/30/2011	dr said he has some patients coming in this week that he's going to discuss Butrans with, asked dr what types of pain conditions these patients had? dr said a variety, showed pg.11 visual aid and showed pain conditions and asked if they were any of these listed? dr said yes probably a few of them he will see this week, dr said he's thinking more about patients who are always calling their office asking for refills of tramadol or vicodin and he doesn't feel comfortable prescribing more pills, so he wants to discuss Butrans with these patients and see if they are interested. had dr explain how he will describe Butrans to patients, showed patient info booklet and asked dr to focus on application/rotation section and give booklet to patient before they leave his office, dr said ok. showed dr initiation guide, how to write Butrans script and initiation dosage strengths, focused dr on BWC and commercial plans. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44124	8/30/2011	Quick call....Reminded doc of the butrans patient type and the positioning - before going to short acting opioids ATC. I explained the commercial coverage and savings cards. I also told him that Butrans is covered by BWC similar to Oxycontin. Nothing learned
PPLPMDL0020000001	Parma	OH	44129	8/30/2011	I asked Dr Gigliotti if it was common for patients with chronic conditions who are on short-acting around-the-clock medications for pain to not be well-controlled. He said it is common & this happens all the time. He then said he has "maybe 5" patients who fit that description. I told him those are potential Butrans patients if they have commercial insurance. He said he writes more OxyContin than he wants to & would like to write less. I asked him to focus on Butrans for patients where appropriate & if patients were out of the range for Butrans, he could consider OxyContin. He did not acknowledge this. I invited him to the September program but he said he could not attend. Reminded him of online opportunity with E-Detail which he had posted in his office.
PPLPMDL0020000001	Cleveland Heights	OH	44118	8/30/2011	I reviewed the butrans positioning. Doc said he can do better. He asked about medicare/medicaid. I showed him the formulary grid for commercial coverage. He asked about the 3-tier cost and said that patients won't pay a 3rd tier co-pay. I reminded him that he has savings cards that will save them up to \$40/month. He said he will try and do better. Reminded him of the max dose and that oxycontin might be appropriate after that.
PPLPMDL0020000001	Cleveland Hts	OH	44118	8/30/2011	Quick call....reminded doc of the appropriate butrans patient type, starting dose and coverage with commercial insurance plans. Provided formulary grid reminder for oxycontin and butrans. Nothing learned
PPLPMDL0020000001	Euclid	OH	44117	8/30/2011	Window call...I reminded doc that he would try butrans again for a BWC patient. He said he has not yet. I reminded him of the coverage with state workers comp over employer groups. I explained the 5 and 10mcg initiation dose and showed him the demo patch as a reminder.
PPLPMDL0020000001	Cleveland	OH	44113	8/30/2011	showed dr Butrans initiation presentation, discussed 4 patient case studies and dr said she doesn't really start many people on opioids but does have patients taking tramadol and a few on vicodin and percocet. dr said she likes long-acting opioids and would consider Butrans for patients if they are taking tramadol every day and not controlled and start asking for more pills. showed dr Butrans visual aid, discussed pg.11 pain conditions, dr talked about low back pain and how she focuses on non-opioid therapies first, then she'll start them on tramadol if they still have pain. told dr that's where she could start patients on Butrans, dr said ok and we discussed initiation of Butrans and focused dr on application/rotation of Butrans in patient info booklet. dr asked about insurance coverage, focused dr on BWC and commercial plans. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	8/30/2011	talked to dr about his patients with low back pain, showed pg.11 visual aid for discussion, dr said he is thinking of Butrans for more patients with low back pain when their short-acting opioids aren't controlling their pain. asked dr if he had a few patients coming to see him today that he could start on Butrans? dr said he might and will look at charts to make notes about discussing Butrans. focused dr on BWC and commercial plans.
PPLPMDL0020000001	Euclid	OH	44132	8/30/2011	I reminded doc that he liked the idea that butrans meant less frequent dosing. He said the problem is the cost and that nobody is covering. He said he tried to write if for workers comp but it was a hassle. I asked him how much of his practice consists of state BWC vs. self-insured. He thought maybe 50/50. I explained that State BWC is where it's covered. I also reviewed the commercial plans and the savings cards. He asked about side effects - I referred to the AE chart in sales aid. I explained how to initiate at the proper dose. He said he would give it another try. Reminded him of the Ryzolt and oxycontin patient types and bwc coverage as well.
PPLPMDL0020000001	Cleveland	OH	44109	8/30/2011	talked to nate, pharmacist, about Butrans and if he's seen any scripts. Nate said not recently, showed Nate Butrans 5 core selling messages and asked Nate what really stood out to him about Butrans? Nate said once weekly dosing and transdermal delivery and Nate said he was surprised that Butrans is a CII as he forgot that and thinks doctors will like that so scripts can be called in for Butrans. asked Nate if he provides patient counseling to patients taking short-acting opioids daily for chronic pain? showed pg.11 visual aid, pain conditions discussed with Nate. Nate said they do provide patient counseling for these types of patients but really no recommendations on medications that's up to dr. gave Nate patient info booklets and asked Nate to hand those to patients and have patients discuss Butrans with their doctors. Nate said ok. discussed formulary coverage for
PPLPMDL0020000001	Euclid	OH	44132	8/30/2011	Spoke to Tim about the recent volume of butrans and oxycontin scripts. He said he has just a couple of patients on butrans (Dr. Marshall is the prescriber). Oxycontin scripts have really tapered off and he is not seeing much these days. I offered savings cards for both but he said he did not really need them.
PPLPMDL0020000001	Parma	OH	44134	8/30/2011	I showed Dr Hernandez the inclusion criteria for Butrans & reminded him of previous discussion regarding patients who are referred to him from chiropractors. I asked him if those patients suffered from conditions such as those listed, like spinal stenosis & spondylolisthesis. He said yes & that those are very common. He said Butrans works & it is his "go-to" medication, especially for those patients. Invited him to September dinner program, but he said he will not attend if he cannot bring his wife. Explained that these are PhRMA guidelines. He said other companies allow it. Told him we abide by these rules with no exceptions.
PPLPMDL0020000001	Mayfield Hts	OH	44124	8/30/2011	Doc said he has been contacted by Purdue about speaker program training. Had said he has been trying to prescribe more Butrans. He said he has one guy on 10mcg and the patient is doing fine. He thought of an elderly female that would be a good candidate and he asked if she had supplemental insurance but she did not. I reminded him to think of the patient with Rx coverage through work. He said he will try to write more.
PPLPMDL0020000001	Parma	OH	44129	8/30/2011	Dr Ortega said he had a question for me regarding Butrans- He told me about a patient who was on 5mcg Butrans but was having breakthrough pain. He said the patient asked the pharmacist if he could take a Percocet for breakthrough pain & the pharmacist said he could do so but to be cautious. The patient took one Percocet for breakthrough pain & felt it really helped the pain. Dr Ortega asked me what he is supposed to do for patients with breakthrough pain on Butrans & asked if it was OK that the patient took a Percocet. Confirmed that this was acceptable & reminded him that per our package insert, patients can take opioid or non-opioid medications for breakthrough pain. He asked why the pharmacist would have advised caution. Reminded him that Butrans can precipitate withdrawal in patients already on high doses of opioids & this is why a taper to <30mg morphine equivalent is recommended before initiating treatment with Butrans. I asked him if patients like the ones we have discussed with conditions like spondylolisthesis are challenging to treat. He said "not really". He said most surgeons consider these surgery candidates, but he tries to manage their pain with medication instead. Supported the way he practices & how he takes time to talk to patients & spends time discussing their medications. He said he has found both Butrans & OxyContin to be effective, good medications. Invited him to program in September. He said he may be able to come, but was not 100% sure.
PPLPMDL0020000001	Cleveland	OH	44103	8/30/2011	dr said he hasn't seen anyone with commercial insurance so he isn't thinking of Butrans. dr said he has limited time and really can't discuss a new product with patients so it's easier for him to just refill patients short-acting opioids. showed dr Butrans visual aid, discussed pain conditions briefly and dr said when Medicaid covers Butrans, with no PA, he'll consider writing it. talked to dr about OxyContin being available on Medicaid and Medicare and an option for patients, dr said he knows and it's easy for him to write so no issues with OxyContin. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44130	8/30/2011	I told Dr Fedorko I had only one question for him. I asked him if he had a commercial insurance patient who had a chronically painful condition, who was not well-controlled on tramadol, if it made sense to start them on Butrans once weekly instead of prescribing Vicodin. He said it does make sense but he just tried to prescribe Butrans for someone last week & it did not go through due to insurance, who required Duragesic instead. Emphasized commercial insurance coverage. He also said he does not write new Vicodin prescriptions. He said the patients who he has on Vicodin are already on it when they come to him so he does not start them. He also said they are all addicted to it. He added that he would rather start a patient on Butrans than Vicodin because it does not give the "ups & downs" like Vicodin. I told him that Butrans is still an opioid & that it still carries abuse & addiction potential like other opioids. He said he knew that but it is the "ups & downs" of drugs like Vicodin & Adderall that makes them addictive. Told him we have no data that states that Butrans is less addictive or abusable. He said he knows & that this is from his clinical experience. He said Butrans does make sense & he does see a place for it but that insurance doesn't cover it. He agreed to attend the Butrans dinner program in Sept.
PPLPMDL0020000001	Parma Heights	OH	44129	8/31/2011	Worked with Mindy, who explained e-prescribing & emphasized commercial insurance coverage for Butrans.
PPLPMDL0020000001	Parma Heights	OH	44129	8/31/2011	Spoke with Al & gave him the invitation for upcoming pharmacist's webinars for Butrans. He asked me why it isn't "going anywhere". I told him it is at certain locations & I was not sure why his was not one of them. He asked me about some physicians who I do not call on. He also asked me if the Rutkowski's have prescribed. I told him that Dr Jack told me just today that he prescribed for a patient & that he may be willing to listen if Al ever calls to make a recommendation. He said that was good, but he can never get through to them if he calls. Al went on to say that he feels there is a tremendous market for Butrans as a long-acting CII. I agreed there is a place for Butrans. He said he would try to help me when he could. Also checked stock on OxyContin & Ryzolt savings cards.
PPLPMDL0020000001	Maple Heights	OH	44137	8/31/2011	Spoke with Kathy & Arlene (MA's) & reminded them of Butrans usage & appropriate patient. Told them about the upcoming program for Dr Dale & Dr Eugene & asked if they ever come to programs. They said usually not, but sometimes. I let them know they have not yet heard a presentation for Butrans & asked that they give them the invitations & ask them to consider going. They agreed to do this.
PPLPMDL0020000001	Cleveland	OH	44113	8/31/2011	dr said she started 1 patient on Butrans that was taking short-acting opioids for chronic pain, not controlled and had tried all short-acting opioid options so Butrans was a great option for this patient. showed dr Butrans visual aid, pg.11 discussed pain conditions and how dr manages chronic pain for these conditions, dr said all non-opioid therapies are tried 1st then she would start patients on tramadol. asked dr if she would consider Butrans as an option, before tramadol? dr said she might but usually tries short-acting like tramadol 1st to see if that controls the patient's pain and if that doesn't work then she would probably consider Butrans. discussed appropriate patients to start on Butrans, showed visual aid with this info and initiation guide, dr said she'll keep talking to patients about Butrans and start more patients on Butrans. asked dr to focus on BWC and commercial
PPLPMDL0020000001	Mayfield Heights	OH	44124	8/31/2011	Spoke to Warren about the appropriate patient for butrans. He said he gets a couple of scripts for it occasionally and has not had any issues with it. I showed him the patient info guide and explained the proper application of the patch (in case patients ask) and the disposal unit. He thought that that was a good way to discard the used patches. Gave him a savings card sales piece.
PPLPMDL0020000001	Cleveland	OH	44113	8/31/2011	dr said he's still looking for patients to start on Butrans, looks every day at his list to see who's coming in so he can discuss Butrans as an option. dr said some patients don't want to wear a patch for a week and would prefer their pills. showed dr pain conditions, pg.11 visual aid, discussed several conditions and dr said he thinks some patients just need more education on Butrans as it's new to them and new to him, dr said he's giving patients Butrans patient info booklet to read and having them come back for a follow-up discussion and see if Butrans could be an option for them. discussed appropriate patients with dr and asked him to think of a few patients this week that he could discuss Butrans with and start them on Butrans and still give patients immediate release opioids if he feels that's appropriate, dr said ok he'll do his best. focused dr on BWC. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44104	8/31/2011	showed dr Butrans visual aid, pg.11, discussed inclusion criteria and asked dr how often she sees these pain conditions? dr said she sees most of them, but a lot of low back pain and osteoarthritis patients. dr said she knows Butrans is an option for patients and likes the once weekly dosing but she's not trying to start anyone else on an opioid. dr said she's maintaining the patients that are taking short-acting opioids now but that's what she's asked dr when patients have chronic low back pain and they are taking tramadol and vicodin every day but that doesn't control their pain at some point, how does she manage patients' therapy? dr said most of her patients are controlled on short-acting opioids but if not she'll send them to pain management. showed dr butrans initiation guide, discussed appropriate patients and asked dr if she could discuss Butrans with a couple patients like we discussed and start them? dr said she'll consider Butrans but isn't sure she has anyone in mind. focused dr on commercial plans and patient savings cards. recommended Senokot-S
PPLPMDL0020000001					

	Cleveland	OH	44130	8/31/2011	Introduced Butrans to Dr Popa, delivering 5 core messages & alerting her to box warning. I spent time going over appropriate patient type with her & reviewed Butrans study inclusion criteria. I asked if this sounded like patients in her practice. She said yes, although she "hates" pain management. I told her I understand that it can be difficult & advised to be just as cautious in prescribing Butrans for appropriate patients who she trusts. Discussed CIII & abuse/addiction potential. She asked if it was more/less addictive than other opioids. I told her we have no comparative data & again asked that she is cautious. She said she usually only prescribes pain medications for one month at a time. I showed her the demo kit & showed her the 4 patches in a month's supply. Dr Popa asked the cost. Discussed insurance status & savings cards. She asked cash price. I showed her the WAC information. I asked that she think of commercially insured patients who clinically fit the description we have been talking about. She said she would keep it in mind & then left.
PPLPMDL0020000001	Cleveland	OH	44106	8/31/2011	talked to dr about his patients with osteoarthritis that he can consider starting on Butrans,dr said he see's a variety of pain conditions and is thinking of Butrans,showed pg.11 visual aid,pain conditions,discussed inclusion criteria and discussed appropriate patients section,dr said he will continue starting patients on Butrans,focused dr on commercial insurance patients,talked to dr about OxyContin being an option for patients and focused dr on Medicare and Medicaid coverage for OxyContin.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44104	8/31/2011	talked to dr about pain conditions,pg.11,visual aid,asked dr how he treats his patients with osteoarthritis,discussed all of his non-opioid therapies then dr said when those arent working to control patients pain,he'll consider an opioid,dr said he's very conservative as he has an elderly population,so he usually starts with tramadol but definitely a short-acting opioid initially as he's hoping patients pain will improve and be controlled with short-acting analgesics.showed appropriate patients section,discussed initiation of Butrans and asked dr if he would consider Butrans for the patients we just discussed? dr said he would after tramadol or another short-acting opioid failed,focused dr on commercial plans and asked him to start a few patients like we discussed right after that 1st dose of tramadol isnt controlling patients osteoarthritis,dr said he will consider it more for patients he just has had many in the office that he felt were ready to start on Butrans.recommended Senokot-S
PPLPMDL0020000001	Mayfield Heights	OH	44124	8/31/2011	I reminded doc of our lunch last week and the appropriate patient for butrans. He said he still has not tried it yet. I gave him an invite to the 9/15 speaker program and asked if he thought he would be interested in learning more. I said maybe. Told him I would check back in a week and if he is interested I could register him to attend.
PPLPMDL0020000001	Cleveland	OH	44113	8/31/2011	dr said he started 1 patient today on Butrans because patient was taking vicodin daily and not controlled,so he discussed Butrans with this patient and patient was willing to wear the patch and change it weekly,dr gave patient the Butrans patient info booklet and discussed application/rotation of Butrans,dr said he's got Butrans in his mind,its in his algorithm and is starting more patients,asked dr when he see's these pain conditions,pg.11 butrans visual aid,how he manages pain? dr said most patients with these conditions have already tried short-acting opioids and he's either maintaining or changing their opioids,asked dr to consider Butrans earlier in therapy instead of waiting for them to be taking 40mg daily of hydrocodone combo,dr said he knows earlier is probably better for his patients to start on Butrans so he will give it more thought,focused dr on BWC and commercial plan insurance.recommended Senokot-S
PPLPMDL0020000001	Tallmadge	OH	44278	8/31/2011	Mentioned to the Dr that I was in a pharmacy and they said that they had a script of Butrans from him and I would like to review some information from our FPI and he said that he did write one but is the only dr there and was behind but would like some savings cards. I said I have a lunch with him next week and we can sit down and discuss appropriate patients selection
PPLPMDL0020000001	Bedford	OH	44146	8/31/2011	Spoke with a technician & discussed Butrans overview (usage, dosing, indication). I let her know I had discussed it with John & Andy a few months back & showed her the webinar invitations. I confirmed with her that Andy is now the pharmacy manager & asked her to give him the Butrans webinar invitation for pharmacists. She agreed to do this & also gave him my card. Let her know I would return to follow-up.
PPLPMDL0020000001	Cleveland	OH	44104	8/31/2011	talked to dr about patients with pain conditions,pg.11 visual aid,that were in the inclusion criteria,dr said she see's these pain conditions and does have a lot of patients on opioids,dr said its been very frustrating lately though and her chronic pain patients are driving her nuts because they are so demanding with what pills they want,asked dr to consider Butrans for a few patients,with pain conditions we discussed on pg.11, and get some clinical experience? dr said she will do it at some point,just hasnt been able to think about a new medication like Butrans,showed dr Butrans patient info booklet and told her to give this booklet to patients to discuss application/rotation of Butrans,dr said she liked that as this would help educate them and take up less time,focused dr on commercial insurance plans and Butrans patient savings cards,discussed OxyContin being an option for patients,showed OxyContin conversion guide and discussed a few conversions with her and then focused dr on medicaid and medicare for OxyContin and recommended Senokot-S
PPLPMDL0020000001	University Hts	OH	44118	8/31/2011	Window call...Reminded doc of the butrans patient type, 7 day delivery and CIII status. Provided formulary grid for butrans and oxycontin and an invitation to the butrans 9/15 program. nothing learned.
PPLPMDL0020000001	Cleveland	OH	44113	8/31/2011	worked pain management dept - lunch with dr shen and dale novak,PA
PPLPMDL0020000001	Cleveland	OH	44130	8/31/2011	I asked Dr Kansal if conditions such as spondylolysis & spondylolisthesis were common in his practice. He said yes & that 28% of people over 50 who were studied in one particular study, were asymptomatic even though they had these types of conditions. I asked if he was saying that these conditions are not always painful. He said yes. I asked if they are ever painful. He said yes. I said why not use Butrans in those patients? He said if patients come to him with those types of conditions & request treatment from him first, he would refer out to pain management. He said usually people go to the ER for pain medications first, so they are already on medication when they come to him. He said that is why he can't use Butrans. I asked when he would typically use a long-acting medication. He said "never". I clarified, repeating back to him that he "never" uses any long-acting medications for pain. He said that is correct. I told him it was possible that I was wasting our time & that he may not have a place for Butrans, OxyContin, or Ryzolet if that is really true. I asked if he wanted me to stop calling on him. He said he does not want that & that I am welcome any time. Invited him to dinner program, letting him know what a great opportunity it would be to discuss Butrans with other physicians. He said he probably would not go. dr said she started a few more patients on Butrans,these were patients that were taking vicodin and 1 was taking percocet for chronic pain but the short-acting opioids werent controlling their pain,so dr thought Butrans would be a great option.dr said she explained to patients this was a once weekly dosing option in a patch and she would still give some short-acting medication for break through pain,asked dr if she had more patients like this,that she can start on Butrans? dr said yes she does and is going to continue starting patients on Butrans,focused dr on BWC and commercial plans,discussed OxyContin as an option for patients,focused dr on Medicaid and Medicare for OxyContin,dr asked for Ryzolet value card tray as she does have some patients that would prefer a once daily dosing of tramadol,dr thinks Ryzolet would be a great option,left 1 tray for dr and focused dr on BWC and commercial insurance for Ryzolet.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44143	8/31/2011	I showed doc the butrans demo patch and reviewed the indication, CIII status and 7 day delivery. He said he is writing it and then walked away. I spoke with Angela who confirmed that he is prescribing it and she was not aware of any issues. I asked him where he is using butrans. She could not recall if it was after tramadol or after vicodin. I explained that 'after tramadol' is more appropriate and likely. I gave her a butrans formulary reminder and more savings cards which they needed.
PPLPMDL0020000001	Cleveland	OH	44113	8/31/2011	talked to Dale,PA,about patients he feels are appropriate for Butrans,Dale said whether patients have never taken an opioid or currently taking vicodin or percocet,he's thinking of Butrans as an option.Dale said he thinks if you start patients on a long-acting opioid like Butrans earlier in therapy,its easier for patients to get used to the notion of a longer acting medication versus starting patients on a short-acting opioid where they will always want their pills and it may be tougher to discuss a once weekly dosing medication.showed pg.11 visual aid for discussion,we talked about pain conditions and Dale's approach to pain management with dr shen and dr daoud.asked Dale if he has more patients,like the one's he's started on Butrans,that he'll see today? Dale said probably so.asked Dale to start more patients on Butrans,discuss application/rotation of Butrans and give patients Butrans patient info booklets,focused dale on BWC and commercial insurance plans.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44135	8/31/2011	Followed up with Randy, he said that he knows that Dr Ryan, Tabbaa, & Astley have all written Butrans but he did not have any other feedback so far. Jim will be out for a few more weeks.
PPLPMDL0020000001	Cleveland	OH	44106	8/31/2011	talked to dr about his patients with pain conditions,shown on pg.11 visual aid,discussed inclusion criteria and asked dr if he had more patients coming in to see him today,like the one's he's been starting on Butrans? dr said yes he does and always has Butrans in mind as an option,focused dr on commercial insurance and asked him to find a few patients today that he could start on Butrans,dr said he will do that.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	8/31/2011	talked to Laura,NP,briefly about pain conditions,pg.11 visual aid,and asked how she approaches treating chronic pain? Laura said by the time they get to her,patients have already tried several short-acting analgesics and she's either maintaining their current medication or changing their medication.Laura said she knows about Butrans and really just hasnt given time to discuss with patients.Laura said she's leaving the practice in Sept,but appreciated the info on Butrans,told Laura I appreciated her time and if she came across any patients with the pain conditions we discussed,she could consider Butrans as an option,Laura said ok.
PPLPMDL0020000001	Warrensville Heights	OH	44122	8/31/2011	Saw Dr Zivic at the window. I handed back a Butrans dinner program invitation & asked him to attend. He said chances were slim, but he would consider. I asked him what percentage he would say he would give as a probability that he will be there- 10%? He said he wouldn't go that high. He said he will keep the medication in mind, but probably not the program. I asked him about patients who have chronic conditions such as spondylolysis & spondylolisthesis. He looked surprised. I asked if he has patients who have those conditions. He said yes, a lot. I asked if he would prescribe Butrans for patients with those types of conditions who are not well-controlled on tramadol, instead of going to Vicodin. He agreed.
PPLPMDL0020000001	Cleveland	OH	44114	8/31/2011	talked to John,PA,about patients he's recommending to dr katz and dr marshall,that are appropriate to start on Butrans.showed pain conditions,pg.11 butrans visual aid and asked if John treats these pain conditions? John said yes,they see all of them and a lot of low back pain as they have a lot of BWC patients.asked John if he can think of a few patients today and this week that he will start on Butrans and recommend Butrans to dr katz and dr marshall,John said yes he will do that and its been easy to get patients started and no issues with insurance,talked about showing patients Butrans patient info booklets and discussing application/rotation of Butrans and John said he does have that discussion and booklets are helpful to give patients,focused John on BWC and commercial plans.recommended Senokot-S
PPLPMDL0020000001	Bedford	OH	44146	8/31/2011	I reminded Dr Moufawad that he had told me he would not prescribe Percocet for breakthrough pain for a patient who was on Butrans & asked him if he would explain to me why that is, since the package insert states that opioid or non-opioid medications could be used for breakthrough pain. He said it is because of how buprenorphine binds & then said he had to go. I handed him a dinner invitation for September program & asked if he would attend. He looked at the date & said he thinks he will be able to go. I told him this would be an opportunity to speak with other experts about their experience with Butrans. He said he is going to try to be there. He also said he is going to attend the training in Connecticut for sure & that he is looking forward to learning.
PPLPMDL0020000001	Mayfield Heights	OH	44124	8/31/2011	Quick call....I asked doc what she remembers about butrans. She said "Its a patch like tramadol or vicodin". I explained that it is a CIII patch with 7 days delivery. I gave her a invitation to the 9/15 speaker program. I asked if she ever attends programs. She said not too much as she has kids at home. Provided formulary grid as well.
PPLPMDL0020000001	Warrensville Heights	OH	44122	8/31/2011	Spoke with Debbie & Ulianna (nurse) about Butrans, reviewing usage, indication, delivery system, & CIII/abuse & addiction potential. I told them about the upcoming dinner program & asked if they thought he would attend. They said he usually does not. I reminded them that he has not yet heard a formal presentation on Butrans, so that may give him a good reason to go. They both agreed & said they would mention that to him when they give him the invitation & Butrans literature.
PPLPMDL0020000001	Cleveland	OH	44114	8/31/2011	dr said he's got some patients on Butrans,they are doing well and he's happy with pain improvements,some patients are going from an 8-10 pain score down to a 2 so thats a good thing,dr said insurance seems to be covering it so no issues there,asked dr if he has more patients that he'll see today,this week,like the one's he's started on Butrans? dr said he probably will,asked dr to continue starting patients on Butrans to get more clinical experience,dr said he will do that,focused dr on BWC and commercial plans.recommended Senokot-S
PPLPMDL0020000001	University Heights	OH	44121	8/31/2011	I reviewed the butrans patient type - indication and positioning before going to short acting opioids ATC. I asked him if he has any patients in his practice that might benefit from butrans. No comment. I offered him an invite to the 9/15 speaker program. No said, "No. Never". I gave him a formulary grid reminding him of the commercial coverage.
PPLPMDL0020000001	Lyndhurst	OH	44124	8/31/2011	Quick call....I offered doc another opportunity to learn more about butran. I explained the upcoming speaker program on 9/15. She said she is rarely able to go to those things. I explained the e-detail available for 24 hrs access. No commitment.
PPLPMDL0020000001	Independence	OH	44131	8/31/2011	Dr Jack paused when he saw me. He said yesterday he put his first patient on Butrans. I told him I was not surprised he found a patient so soon after our last discussion. He said it was an older woman & he started her on Smcg. He asked if Medicare Part D covers it & I told him it does not. I told him the prescription would likely not get approved if she has Medicare Part D. He said not to be discouraged because he already told her that & that she is "very well off" & will be paying cash for her prescription of Butrans. I handed him a dinner invitation. He said at first he would not go. Then he noticed how close it is to his office location. I told him it would be the a fantastic opportunity to speak with specialists & experts who have experience with Butrans. He said he will consider "for me". He then walked into a room.

PPLPMDL0020000001	Independence	OH	44131	8/31/2011	Dr Rob only stopped quickly on his way into a room only to say that he is still keeping Butrans in mind & he would talk to me another time. Let him know I would leave him a dinner program invitation. He said he would have a look at it & would consider.
	Cleveland	OH	44113	8/31/2011	dr said she's continually starting patients on Butrans,dr said its easy to explain and get patients to start Butrans.dr tells them its a once weekly dosing and its in a patch,dr said she gives them short-acting opioids for breakthrough pain,but less than she was prescribing before so she's happy with that.dr said no problems with insurance and she doesn't see any drawbacks to starting patients on Butrans.asked dr if she has more patients today and this week that are like the one's she started on Butrans? dr said yes she probably does and will continue starting patients on Butrans.discussed patient savings cards for commercial plan patients and
	Waterford	OH	45786	9/1/2011	W - Waters said that he hasn't written for Butrans but likes the idea. He said that he has no reservations about the product and will try and remember in order to gain some clinical experience. I - Butrans follow up and review of indication and 7 days of buprenorphine therapy in 1 application with a CIII scheduling. Use of Core Sales Aid to discuss inclusion criteria and conditions that can cause chronic pain. Discussion of appropriate starting doses depending on patients current therapy. Review of formulary coverage - BWC and commercial plans with a 3T status. No coverage for Medicare Part D plans , but hopefully will have some coverage in 2012. Savings card program eligibility.
	Westlake	OH	44145	9/1/2011	Dr said that he is thinking of Butrans as an option to titrate some of his patients down. We discussed the initiation guide and how to taper patients down before starting Butrans. I asked him to focus on commercial insurance and BWC. We discussed OxyContin as an option when Butrans may not provide adequate analgesia.
	Cleveland	OH	44112	9/1/2011	Introduced doc to butrans and the 5 selling messages. He said he heard something about a new patch. I explained the CIII status and 7 day delivery and the positioning. I gave him an speaker program invite to learn more as well as an e-detail invite. He said he might be interested in attending a program.
	Cleveland	OH	44109	9/1/2011	dr said he's not started any patients on Butrans,still looking for right patient.showed dr butrans visual aid,pg.11,focused dr on patients with the pain conditions listed and if these patients have chronic pain,consider Butrans an option,showed dr Butrans initiation guide and discussed appropriate patients.dr said he'll think of some patients and said its just taking him longer to get started.focused dr on BWC and commercial plan patients for Butrans.recommended Senokot-S
	Independence	OH	44131	9/1/2011	Spoke with Janelle (MA) & reviewed Butrans indication, usage, & appropriate patient type. Also discussed savings cards for Butrans & OxyContin, which she said they have enough of. I told her about the upcoming dinner program in September & asked if Dr Boose ever goes. She said usually not but said she would give him the invitation. I asked her to remind him that this would be the first formal presentation he would be hearing on Butrans & to please consider going because of that. She agreed. She also let me schedule lunch & let me know that they had a new doctor join them, Dr Colleen Clayton.
	Beachwood	OH	44122	9/1/2011	Stopped in to Pain Management area on the 2nd floor. Spoke with MA Jackie & told her about the upcoming dinner program for Butrans in September. I asked her if she would post the invitation in an area where all the pain management physicians would see it & she agreed. She asked what Butrans was, so I reviewed with her the indication, usage, dosing, & appropriate patient type. She said it sounded like something they would be interested in. I asked about an appointment, but she said they still are not doing any. I let her know I would be back to follow-up to see if any of them were interested in attending the Butrans program.<font color=blue>-b>CHUDAKOB added notes on 09/08/2011</font>-b>-</font>Nice job of keeping in contact with them!
	Parma	OH	44134	9/1/2011	Spoke with Margarita (pharmacist) & gave her the online Butrans pharmacists program information. She said she may log on, but probably not. She said she usually only does them when credit is given. She added that she still has not seen any prescriptions for Butrans. I told her some locations stock all strengths as they have seen a lot of activity. I reviewed with her appropriate patient type, focusing on patients taking chronic Vicodin or tramadol & asked if that sounds like a common type. She said yes. Also discussed OxyContin savings cards.
	Waterford	OH	45786	9/1/2011	W - Vickie said that she wrote a script for Butrans for an elderly female patient in the nursing home. She said the patient loved it and it controlled her pain very well, but Medicare Part D would not pay for more than 1 month. She had to switch the patient to another product. I - Butrans review of indication and 7 days of buprenorphine therapy in 1 application with a CIII scheduling. Use of initiation guide to discuss appropriate patient selection and starting doses for patients depending on their current therapy. Review of formulary coverage and savings card program eligibility.
	BEDFORD	OH	44146	9/1/2011	Marcus said I came at a bad time. I gave him the Butrans pharmacist webinar invitation & asked if he thought he could log-on to hear a peer discuss Butrans. He said he usually doesn't if there are no CEU's given. I told him this would be a good opportunity to hear a PharmD talk about Butrans instead of just me. He said he'd keep the paper on it & see. Reviewed Butrans appropriate patient type & reminded him of OxyContin savings cards.
	Hudson	OH	44236	9/1/2011	Dr Seiple told me that he just "inherited" a patient who had been put on Butrans by another doctor. He said the patient reported to him that it "has changed her life". I asked him if he meant for the better & he said yes. He said she loves it & it has made a huge difference in her pain control. I asked what condition the patient had & what treatment she had been on before. He said she had abdominal pain but did not know what medications she was taking for it before. Discussed the indication & let him know it does not specify the etiology of the pain, just that it has to be moderate to severe & chronic in nature. He said he would really like to try Butrans in some of his low back pain patients. I told him some of them may be ideal Butrans patients & showed him the Butrans inclusion criteria & asked him if he treats patients for the pain associated with those conditions in his office. He said he does & that he is going to try Butrans on some of them now & also that he would like to try it in some fibromyalgia patients. I told him this was a great idea & showed inclusion criteria again, asking him to focus on the back pain patients since that is where it was studied. He agreed. Invited him to upcoming program but he said he could not attend due to a scheduling conflict. Discussed OxyContin q12h for appropriate patients beyond
	Waterford	OH	45786	9/1/2011	W - Miral said that she hasn't written for Butrans yet but likes the idea of a CIII long acting agent and will keep in mind for patients. Wishes there were Medicare Part D coverage. I - Butrans follow up and review of indication and 7 days of buprenorphine therapy in 1 application with a CIII scheduling. Review of appropriate patient selection when the indication is met, patients are uncontrolled on current therapy and patients are requesting a change in therapy. Review of formulary coverage - BWC and commercial plans with a 3T status. Savings card program eligibility to help offset copay costs.
	Hudson	OH	44236	9/1/2011	I showed Dr Tosino the inclusion criteria for Butrans & asked if he see patients who suffer from conditions such as spondylolysis & spondylolisthesis. He said he does, but he doesn't usually treat them for the pain associated with those conditions. He went on to say that usually the patients would see an orthopedic specialist or pain management specialist for that part. He said he does, however, sometimes end up maintaining those patients. Discussed Butrans as an option for those appropriate patients with conditions like that. I asked Dr Tosino if he could see himself ever prescribing Butrans & reminded him of the fact that it is the only CIII available that is long-acting, with once weekly dosing. Did remind him also that Butrans is an opioid & carries abuse/addiction potential. He said he never really thought of it as a long-acting CIII & now that I stated it that way, he can see a place for it. He said he needs an option between Vicodin & fentanyl & Butrans seems to fill that void. I told him those sounded like patients who would be candidates for Butrans & asked him to prescribe for those appropriate patients. He agreed. Also discussed OxyContin q12h 7 tablet strengths available for patients beyond Butrans. Invited him to upcoming program but he said he thinks his daughter has a game that night, but did say if she didn't
	Beachwood	OH	44122	9/1/2011	Quick window call with Jennifer- Handled her Butrans dinner program invitation & asked if she thought she could go. She said she wasn't sure but she would at least look at her calendar to find out. She also told me she will be leaving the practice by the end of the calendar year to move to China for her husband's job. She said she would stay until the end & was sorry to leave the practice. She said Dr Yokiell has been using more Butrans since my last visit & she & Chrissy have been working with him to remember it where appropriate.
	Euclid	OH	44119	9/1/2011	Spoke to Rebecca about the stocking of butrans. Stocked but no scripts seen. I reviewed the positioning of butrans and the savings cards program available to eligible customers.
	Westlake	OH	44145	9/1/2011	I showed Dr the 4 demo patches and let him know that his patients will get 4 patches for an entire month. He said he will keep it in mind and asked me about the dosing. We reviewed the invitation guide.
	Beachwood	OH	44122	9/1/2011	Spoke with MA Laura & asked her to post a Butrans dinner invitation in the physician lounge as well as give Dr Eckstein one. She said she would do this. I let her know that this would be the first time any of them would have heard a formal Butrans presentation & that it would be a good opportunity for them to discuss it with area experts. She said she would put a note by it & let them know. She said they are booked with lunches for the year but that I could return next month when she will have a new year's calendar to schedule for 2012.
	Westlake	OH	44145	9/1/2011	I showed the Butrans demo patches and let Dr know that his patients will get this at the pharmacy for a whole month. He said he is still working on finding some patients to try it on. I showed the inclusion criteria and reminded him that these disease states were studied. I asked if he would try just 2 patients and see how they do, he agreed.
	Bedford	OH	44146	9/1/2011	Caught Dr Haddad at the window & handed back a Butrans dinner program invitation. I asked if he thought he would be able to make it & reminded him that he has not yet seen a formal presentation about Butrans. He said he did not think he would be able to make it because he goes to the hospital after 5 on Wednesdays & Thursdays. I asked him to hold on to the invite & consider if possible. He said usually he can only go on Tuesdays but he would come if he can. Positioned Butrans for patients with commercial insurance & who are not well-controlled on their short-acting opioid.
	Parma	OH	44134	9/1/2011	I stopped Dr Mandat in the hallway by handing him a Butrans dinner invitation. He looked at it & I told him this would be a great opportunity to discuss Butrans with other area physicians & experts regarding their experience with it. He said that he sometimes goes to programs & was happy to see that this one is close to him. I asked if he would attend. He said he might & that he definitely could use more Butrans in the nursing homes & hospice patients he sees. He took the invitation, thanked me for the Senokot & Colace samples, & went into a room.
	University Heights	OH	44118	9/1/2011	Spoke to Asari about the stocking of Butrans. They do not have it stocked. I discussed the indication/positioning, CIII 7 day status. Explained that savings card program available to eligible patients. Let Him know about Purude other products in the portfolio as he was unfamiliar.
	Cleveland	OH	44102	9/1/2011	talked to nagla,PA,about patients seen this week and if anyone has been appropriate for Butrans.Nagla said she will work with doctors when they decide to start patients on Butrans,but usually isnt the one making ultimate decision on a new medication.asked Nagla if she see's pain conditions,pg.11 visual aid? Nagla said yes they see most of them and a lot of low back pain patients.Nagla said she likes that Butrans is transdermal and dosed once a week but sometimes patients dont want to try a patch and just want their pills.showed Nagla Butrans visual aid,supplemental analgesia section,discussed starting patients on Butrans but also giving immediate release opioid if dr thinks thats appropriate.Nagla said ok she forgot that and she will mention to other doctors.focused Nagla on BWC and commercial plan patients.recommended Senokot-S
	Berea	OH	44017	9/1/2011	I showed the inclusion criteria and asked if he see these types of patients and he said he sees a few, but is trying not to treat as much of these low back pain patients, I asked him to try Butrans for these patients and he said OK. Reminder that OxyContin is still an option when Butrans may not provide adequate analgesia.
	Cleveland	OH	44113	9/1/2011	talked to dr about the 1 patient he started on Butrans and dr said patient hasnt called back so thats a good thing.showed dr Butrans visual aid,pg.11,pain conditions and talked about patients that have osteoarthritis and considering these patients to start on Butrans,showed initiation section and asked dr if he'll see some patients today like we discussed where he can start them on Butrans? dr said he will see patients this afternoon and will consider Butrans for them,dr said he's only thinking of patients taking vicodin daily for chronic pain that arent controlled,asked dr if he's thinking of patients taking tramadol daily and not controlled? dr said no he's more concerned about patients taking vicodin and not his tramadol patients,dr said they are fine and controlled on tramadol,focused dr on BWC and commercial plans,dr is going out of town for 3wks so wont see patients till after 9/21st.recommended Senokot-S<font color=blue>-b>CHUDAKOB's query on 09/08/2011</font>-b>-</font>Hi Amy. Based on your call notes it sounds like he is happy with tramadol, and wants to get patients off of Vicodin. What do you think of a next call objective relating to prescribing Butrans after tramadol and before Vicodin?<font color=green>-b>BROOKAM's response on 09/12/2011</font>-b>-</font>yes sounds good will focus on that thanks<font color=blue>-b>CHUDAKOB added notes on 09/13/2011</font>-b>-</font>Thank you!
	Euclid	OH	44119	9/1/2011	I reviewed the Butrans key selling messages - CIII opioid, 7 day delivery. Before going to short acting opioids ATC. He said he keeps forgetting about it. I asked him if he would be interested in learning more about butrans at a speaker program on 9/15. He looked at his calendar and said, "we'll see". I reminded him of the commercial coverage and BWC again. I also distinguished the positioning vs. that of fentanyl which he inquired about earlier.
	Cleveland	OH	44113	9/1/2011	talked to dr about patients he see's with pain conditions,pg.11 visual aid, and how he manages chronic pain. dr said he starts patients on tramadol or another short-acting opioid.asked dr if he would consider Butrans for patients? dr said maybe after a short-acting opioid failed.asked dr what drawbacks he see's in starting patients? dr said its a new medication to him so he has to feel comfortable with the med and then the time it takes to explain a new medication.told dr we have Butrans patient info booklets to give patients,gave him a couple and asked him to focus discussion on application/rotation of Butrans,dr said ok he will think about patients today and tomorrow and see what patients say about Butrans.focused dr on BWC,tricare and commercial plans.recommended Senokot-S



PPLPMDL0020000001	Cleveland	OH	44113	9/1/2011	talked to dr about pain conditions he treats, showed pg.11 visual aid, dr said he treats many of the conditions listed but he doesn't write CII or CIII narcotics. dr said he starts patients on tramadol and maintains them, till that's not working and then he'll refer patients to dr nickels, down the hall who's an anesthesiologist. told dr if he has 1 patient, BWC or commercial insurance, who he felt Butrans would be appropriate before sending patients to dr nickels, he could still give tramadol for supplemental analgesia and showed dr butrans fpi with this info, dr said ok he will keep in mind but probably won't happen as he doesn't write CIII medications. we talked about OxyContin being an option for patients, focused dr on Medicaid and Medicare and dr talked about Ryzolet as a once daily tramadol that he will prescribe so i should keep talking to him about Ryzolet. recommended Senokot-S- color=blue><b>CHUDAKOB's query on 09/08/2011</b></font>-Dr, Raheja sound like a physician who is not going to prescribe our product line, except for Ryzolet. Your thoughts?<font color=green><b>BROOKAM's response on 09/11/2011</b></font>-that would be correct<font color=blue><b>CHUDAKOB's query on 09/13/2011</b></font>-Then why keep calling on him with Butrans?<font color=green><b>BROOKAM's response on 09/16/2011</b></font>-i thought I HAD to keep mentioning Butrans, in 1st position, and couldn't put Ryzolet in 1st if i can then that's what i'll do<font color=blue><b>CHUDAKOB added notes on 09/18/2011</b></font>-My suggestion is that you stop calling on him completely. He has told you he is not going to prescribe our promoted products.
PPLPMDL0020000001	Cleveland	OH	44106	9/1/2011	talked to George, Pharmacist, about Butrans stocking and scripts, George said he hasn't seen any scripts for Butrans recently but most of them came from Cleveland clinic doctors. showed George 5 Butrans core selling messages and asked him what features of Butrans really stood out? George said he liked that Butrans was dosed once a week and was transdermal. asked George if he provided patient counseling for patients taking opioids? George said yes, asked George to give patients Butrans patient info booklets and have patients discuss Butrans with their doctors. George said he will do that. discussed OxyContin stocking, Medicare and Medicaid coverage for OxyContin and recommended Senokot-S
PPLPMDL0020000001	Cleveland Hts	OH	44118	9/1/2011	I discussed the butrans selling messages and the commercial coverage. He asked about 3tier. I explained the higher copay but the savings cards offers up \$40 savings/mo. He thought that it was a deal to get patients started. He liked the idea of a 7 day patch. Discussed the initiation doing for opioid naive and opioid experienced patients. Provided e-detail invite as well as 9/15 program invite. He said he would look over the info.
PPLPMDL0020000001	Garfield Hts	OH	44125	9/2/2011	I stopped Dr Sadowski by handing him a Butrans dinner invitation for the 15th. I asked if he thought he would come. He said he doesn't do dinner programs. I told him this would be a great opportunity for him to discuss Butrans with other area physicians & experts. He said maybe. I also reminded him that he has not yet heard a formal presentation on Butrans, so it is not like he has seen this program dozens of times. He said that was a good point. I asked if he would at least consider going so that he could learn more about who Butrans is for & who it is not for. He said he would consider. Spent time with Deena, going over appropriate patient type. She said she knows of at least one specific patient who she thinks would be ideal for Butrans. She pulled her chart & said she has Med Part D AARP coverage. Discussed insurance coverage & asked about commercial insurance patients like her. She said he has some. Also discussed patient information booklet & asked her to put a tray of booklets in some exam rooms. She agreed to do this & put them in the main room in full view of Dr Sadowski to help remind Spoke with pharmacist, Anisa, & told her about Butrans pharmacists webinars, giving her an invitation. She said she would leave one for Shelly as well. Discussed Butrans appropriate patient type, focusing on patients who call too soon for refills of chronic short-acting opioids. She then had to take a customer phone call.
PPLPMDL0020000001	Beachwood	OH	44122	9/2/2011	Spoke with Bob & Donnie (nurse) who said that Dr Warren is running much too far behind to talk today. I told them about the Portal invitation & asked them to give Dr Warren a copy & ask him to log on. They said they would do this. Donnie said he did not think Dr Warren had been using any Butrans lately but wasn't completely sure. Reviewed appropriate patient type, focusing on patients on around-the-clock short-acting who are not well-controlled on current therapy. They promised to remind Dr Warren & said to come back next week.
PPLPMDL0020000001	Mogadore	OH	44260	9/2/2011	Did initiations presentation and she didn't say a whole lot during the presentation with she and Dr Cain. I asked if she sees patients like this and she said yes but she tries not to treat pain as much. I asked if she sees the conditions on page 11 and she said yes. I said when they are no longer controlled on Nsaid she can go to 5 mg of Butrans. We also discussed Oxycontin and potency compared to hydralcodone. She said she will consider
PPLPMDL0020000001	Mogadore	OH	44260	9/2/2011	Did initiations presentation and he said he would start all patients on 10mcg because of experience with his patients. He said he has been writing a lot of Butrans and he said either patients really like it or they don't. I asked what types of patients and he said patients who are on Vicodin. During presentation I showed him 2 other patients one who is opioid naive and one who is not controlled on Tramadol. HE said that makes sense to write instead of Vicodin. When we got to the patient who was not appropriate we discussed how that patient is a good patient for Oxycontin and we reviewed conversions and hydralcodone vs Oxycodone potencies and he said that is what it says on paper but he thinks it is a lot stronger. WE reviewed managed care for Butrans and Oxycontin
PPLPMDL0020000001	Independence	OH	44131	9/2/2011	Quick call as I caught Lisa at the window. She said they have been prescribing Butrans for more patients since the program & then said she had to get back to patients. I handed back a program invitation & asked her to consider going, as there would be different physicians in attendance & she may learn some additional information. She said she would see.
PPLPMDL0020000001	Parma	OH	44129	9/2/2011	I asked Dr Roherty if it is truly only insurance that is holding him back from Butrans. He said yes. I told him I have seen many patients in his waiting room over the last several months who were working patients & who must have commercial coverage. He laughed. I asked him what it really is holding him back. He said he doesn't know. He added that the patient who he had on prescribed Butrans for never ended up coming back. I asked him if he meant that she stopped coming because of Butrans. He said no, her living situation had changed, so she doesn't go there anymore. He said she had chronic back pain from work & was around 40 years old. I told him he had chosen what sounded like an ideal patient & that he must have a few more like her. I asked him to attend the upcoming program & gave him an invitation. He said he probably would not go. I reminded him he has not yet heard a Butrans program, so this would give him the opportunity he has been waiting for to discuss Butrans with other physicians & experts. He said he would consider. Also reminded him of OxyContin for patients beyond Butrans who may benefit from q12h dosing.
PPLPMDL0020000001	Independence	OH	44131	9/2/2011	I asked Roman what his thoughts were on the program he attended for Butrans. He said it was a good program & he got his questions answered. He said he is now prescribing more, but added that he still finds that patients have to take supplemental analgesia. I asked if he had considered titrating upward instead of adding more supplemental analgesia. He said he does that sometimes, but maybe should think of that more often. I agreed this may be a good option for some patients. Invited him to upcoming program, letting him know different physicians would be in attendance for him to speak with & he may learn something new. He said he might go but probably not. Roman said also Butrans is "expensive". I asked what he meant by that. He said patient's co-pays are very large. Discussed commercial insurance coverage, asking him to focus there or BWC. Let him know commercially insured patients could use savings cards, bringing their co-pay to approximately \$15. He said that was great. Also discussed OxyContin savings cards & managed care. Recommended Senokot-S for opioid-induced
PPLPMDL0020000001	Mogadore	OH	44260	9/2/2011	Spoke to Jerry and he said he has seen some Butrans scripts and I asked from who and he said he doesn't pay attention. I reviewed with him application and rotation and safety and gave him patient ed books. HE said they don't do a lot of Oxycontin, very little sched 2s. I reminded of SenS in opioid induced constipation
PPLPMDL0020000001	Woodmere	OH	44122	9/2/2011	Spoke briefly with pharmacist who said she was too busy this morning to talk to reps. I reminded her of e-voucher for Butrans & reviewed OxyContin savings cards. She thanked me & walked away. Gave Stephanie (tech) a patient information booklet & discussed application of Butrans with her. She said she would leave the booklet for the pharmacists.
PPLPMDL0020000001	Chagrin Falls	OH	44022	9/2/2011	Discussed chronic pain & treatment options with Dr Hudson. She said she probably does the most treating with opioids out of any of the doctors in the practice. She said it could be her comfort level or could be her patient population as she deals with musculoskeletal issues since she is an osteopath. Positioned Butrans for patients who call too soon for refills of short-acting opioids or those who are not well-controlled on this type of therapy. She said she thinks Butrans is a good option as it is long-acting.
PPLPMDL0020000001	Mogadore	OH	44260	9/2/2011	New NP at the practice. Discussed indication, patient types, initiation doses, warnings and managed care. Reviewed case studies with initiations. She said this is nice that it is once a week and schedule 3 so she can write. She asked about Oxycontin and if we reformulated it and I said yes and that it is still schedule 2 with all the same risks as any schedule 3 drug. We reviewed potency because she asked in comparison to Vicodin. She also asked how to take someone off of Oxycontin and I said that she needs to taper gradually and she said then down to a short acting and I said that would be fine.
PPLPMDL0020000001	Chagrin Falls	OH	44022	9/2/2011	Dr Rood said he now has another patient on Butrans in addition to the woman he has told me about. I asked him to tell me about the patient. He said he inherited this patient & he was already taking chronic opioid therapy, but was suffering from constant pain even though he was getting these medications. He said the "peaks & valleys" of his short-acting medication were not controlling the pain. I reminded Dr Rood that we have no data that states that Butrans is any better/safer/or more efficacious than any short-acting therapy. He said he knows, but this patient seems to be better controlled now that he is on Butrans. He said the patient is no longer calling too soon for refills or going to the ER for medications & is only taking Butrans. He did say that the patient complained that when he opened his box of Butrans, one of the patches was missing. He reported that when he cut open the pouch where the patch was supposed to be, it was empty. Dr Rood said that this is a newer patient to him, so he is not certain whether or not this patient was telling the truth. He said the patient was trying to explain why he ran out of patches too soon & that was one of his excuses. He said he doesn't remember what was causing the patient's pain. Showed inclusion criteria & asked if he sees patients with those conditions. He said yes but doesn't treat their pain. If he does, he uses any non-narcotic therapy before going to narcotics. He said Cymbalta just got a chronic pain indication. Initiat
PPLPMDL0020000001	Cleveland	OH	44130	9/6/2011	Spoke with Dina (MA) who said Dr Diab is out of the office until September 12th. Discussed Butrans appropriate patient type & savings cards & also reviewed savings cards for OxyContin. Told her about upcoming dinner program & asked her thoughts on whether or not she thought he would attend. She said he probably won't, but he does attend them on rare occasion. I let her know I would return when he gets back from vacation to tell him about the program. She said she would leave him the Butrans information I gave her as a reminder.
PPLPMDL0020000001	Cleveland	OH	44103	9/6/2011	window call - dr said he doesn't do lunches anymore with reps, but saw my info on Butrans and appreciated the info. asked dr what features of Butrans stood out to him? dr said he could only remember Butrans was a transdermal medication. showed dr Butrans visual aid, 5 core selling messages and asked same ? to dr. dr said once weekly dosing is good for some patients and he likes that Butrans is a CIII. dr asked who was appropriate for Butrans? we discussed Butrans indication and showed appropriate patients section in Butrans visual aid. asked dr if he had a couple patients with 1 of the pain conditions. pg.11 visual aid, that he could start on Butrans this week? dr said he probably does, but has to think about it. dr asked about insurance coverage for Medicaid and Medicare for Butrans, focused dr on commercial plan patients and discussed patient savings cards. recommended
PPLPMDL0020000001	Cleveland	OH	44124	9/6/2011	Window call...I remind dr of the butrans patient type, CIII status and 7 day delivery. I offered savings cards for butrans and oxycontin but none needed.
PPLPMDL0020000001	Westlake	OH	44145	9/6/2011	Spoke with Dan, we reviewed the key messages for Butrans and the important things to let patients know about when they first get their script. He has not seen much movement but feels that it could be a good option for many of their patients. We discussed the managed care and savings program for Butrans and OxyContin.
PPLPMDL0020000001	Mayfield Heights	OH	44124	9/6/2011	Window call....I reminded doc of the 5, 10, and 20mcg dosing of butrans and the ability to call in a refill. Provided a invite to the 9/15 program and portal invite.
PPLPMDL0020000001	Parma	OH	44129	9/6/2011	Spoke with MA's Natalie Sheila & told them about the upcoming Butrans dinner program. I asked if Dr Kushnar ever attends programs but they said she very, very rarely goes. Reminded them that this would be the first time she would be hearing a formal presentation about Butrans, so she may be interested. They said they would give her the invitation & would let her know about the opportunity. Checked in with them on savings cards for Butrans & OxyContin. They said they have plenty of both.
PPLPMDL0020000001	Cleveland	OH	44130	9/6/2011	Spoke with Diane who said I came at a bad time. Presented her with Butrans pharmacists' webinar invitation. She said she usually doesn't do things like that unless she gets some sort of credit. I let her know that while she would not get credit, it would be an opportunity to gain valuable Butrans information from a PharmD instead of a rep. She said she would leave the invite for the other pharmacist. She did not need OxyContin savings cards. I showed the inclusion criteria and asked Dr if he sees these conditions, he does. I asked if he would think of Butrans for these types of patients and he agreed. I reminded him to look for commercial insurance to try Butrans. Reminder that OxyContin is still an option that is covered on Medicaid.-<font color=blue><b>CHUDAKOB's query on 09/15/2011</b></font>-Knowing what we know about switches(conversions) how do you think you can revise this next call objective?<font color=green><b>HOLUBA's response on 09/21/2011</b></font>-Dr, would you consider Butrans as an option when patients are no longer controlled on tramadol or NSAIDs?<font color=blue><b>CHUDAKOB added notes on 09/23/2011</b></font>-Better!
PPLPMDL0020000001	Brooklyn	OH	44130	9/6/2011	Renee' said I chose a bad day to come in, given that it was the day after a holiday. I gave her information on upcoming pharmacists' Butrans webinars & explained that it may be a good opportunity to hear about Butrans from a peer. She said she may log on to listen. She said she still has a couple of customers who get Butrans regularly. She said they did not need any additional OxyContin savings cards for now.

	Cleveland	OH	44104	9/6/2011	talked to dr about pain conditions.pg.11 visual aid,asked dr which conditions she saw more than others? dr said she has a lot of chronic low back pain patients and patients with arthritis conditions.asked dr how she manages chronic pain for these conditions.dr said she will start with NSAIDS and when thats no longer working she'll start patients on tramadol.dr said if she can manage patients on tramadol she will but most patients end up on vicodin or percocet,dr said patients just keep wanting more pills.talked to dr about starting patients on Butrans with these pain conditions,dr said she knows Butrans is available but hasnt really thought of it as an option for patients as she's been very frustrated with her pain patients and doesnt feel like talking to them about a new product.showed dr butrans patient info booklet,discussed this booklet being an educational piece for patients so dr doesnt feel like its taking a lot of time talking to patients about Butrans,dr said ok she will think of a few patients,focused dr on commercial plan patients.recommended Senokot-5
PPLPMDL0020000001	Parma	OH	44134	9/6/2011	I asked Dr Hernandez what he thinks are some of the most important details about Butrans that I should be sharing with my primary care physicians to help them better understand the medication are. He said they should know that patients on Butrans are taking "less" medication than those on other narcotics, such as Vicodin. I asked him to elaborate. He said someone on Butrans 5mcg/hr is getting approximately 5mg buprenorphine per week & someone on Vicodin takes more than 5mg hydrocodone in a single day. I told him that we do not have conversion data or comparative data for Butrans & any other product. He said he knows this, but these are his findings. He also said he thinks physicians should know that patients are less likely to abuse buprenorphine. I told him we have no data to suggest that either. He said he knows, but again, these are his findings. I reminded him that I can only speak to what is in our full prescribing information. He said, then, that he would just try to get physicians to realize how effective a medication Butrans is & also to make them understand that the time they spend with their patients when they are first switching them from short-acting to Butrans is very well-spent & can save theming time & "headaches" in the future. I asked how frequently he finds that patients need supplemental analgesia while on Butrans. He said "never". He said Butrans is effective enough alone & that he occasionally titrates, but once the right dose is found, patients do great.
PPLPMDL0020000001	Cleveland	OH	44104	9/6/2011	showed dr pg.11 visual aid,pain conditions,discussed low back pain as thats what dr see's a lot of in practice.dr said she will try all non-opioid therapies then if pain is still there,she'll consider tramadol.dr said most of her patients have acute pain though so she's not thinking of Butrans,told dr that was good as Butrans indication is only for chronic pain,showed dr Butrans visual aid noting indication.asked dr if she has any patients with chronic low back pain,where they have to take tramadol every day for their pain? dr said she didnt know off the top of her head but she might,discussed Butrans as an option for these patients,discussed initiation of Butrans and asked dr to start a few patients as we discussed if she see's anyone this week,dr said ok.focused dr on commercial plans.recommended Senokot-5
PPLPMDL0020000001	Shaker Heights	OH	44122	9/6/2011	Attempted to invite Dr Agarwal to dinner program, letting him know that this would be a great opportunity to speak with area physicians & experts about their experience with Butrans & reminding him that he had told me he wanted to hear what other physicians were doing. He said he does not go to any programs- no exceptions & walked away.Spoke with Michelle, his MA, & reviewed managed care grids for Butrans & OxyContin.
PPLPMDL0020000001	Warrensville Heights	OH	44122	9/6/2011	I asked Dr Brooks how his Butrans patients are doing on it & asked if they are still getting good results as previously reported. He said they are not only doing well, but he just had an experience that reinforced his belief in the product. I asked him to elaborate. He said he had a patient admitted to the hospital who was on Butrans from another physician. He said he continued him on in the hospital because the patient had been doing well. Dr Brooks said the patient suffered from severe metastatic pain & he was shocked that Butrans was controlling the patient's pain. I asked what dose the patient was on-he said 20mcg. He said he only was taking Butrans- nothing supplemental. He said Butrans allowed the patient to be comfortable when they otherwise might not have been. He added that he is now even more of a believer in Butrans. He also said he has inherited many of Dr Webb's pain patients & he will switch some to Butrans.I asked him who I should work with to get Butrans on hospital formulary. He said he sits on the P&T Committee & that he would like to get Butrans on formulary. He also said the pharmacist at SouthPointe/Marymount was "doing harm" to patients by not having it in formulary there. Dr Brooks said he wants to get additional Butrans information, if possible, to present to the other committee members for formulary inclusion. I agreed to find out what information I would be able to provide & let him know I would follow up ASAP. Discussed savings cards.
PPLPMDL0020000001	Akron	OH	44308	9/6/2011	I followed up with Artina from her attendance at the OAHF conference. She is the Director of Community Relations. I presented the Safeguard my meds brochure as a resource for the sales team to distribute to members. She said they have to be cautious with brochures that are branded with product. She'll review this resource with her sales team and get back to me.
PPLPMDL0020000001	Cleveland	OH	44195	9/6/2011	worked anesthesia/pain management dept-left Butrans fpj,initiation guide.patien info booklet,patient invite,9/15 dinner program invitation,formulary grid and my business card for Dr.Vrooman,Dr.Cheng,Dr.Mekhaill,Dr.Mintzer,Dr.Frost,Dr.Syed and Dr.Samuel as i couldnt see any physicians this morning. WORKED:chronic pain-left same info as above for Dr.Covington and Dr.Matthews. WORKED:rheumatology dept-left same info as above for Dr.Calabrese,Betsy Kirchner(NP),Dr.Chatterjee,Dr.Long,Patty Paccos(PA) and Dr.Deal as i couldnt see anyone had to leave info at front desk and receptionist gives info to medical secretaries and puts in HCP's boxes,they will contact me if interested in meeting.
PPLPMDL0020000001	Cleveland	OH	44130	9/6/2011	Quick call- Dr Fedorko said he is definitely coming to the program on the 15th in Independence. I told him this was a great decision as he would be able to discuss Butrans with fellow physicians & area experts to find out their experience. He said he is looking forward to it. Also spoke with Mindy regarding managed care for Ryzolet & Butrans. She had no new information to report & said everything has been running smoothly for them lately.
PPLPMDL0020000001	Westlake	OH	44145	9/6/2011	Quick call w Dr when talking to Juan, I showed the inclusion criteria and asked his thoughts on using Butrans for these patient types. He said that he does see these conditions often and Butrans could be an option when they are not on high doses of opioids already. Reminder that OxyContin is an option when Butrans may not provide adequate analgesia.
PPLPMDL0020000001	Mayfield Hts	OH	44124	9/6/2011	Window call...reminded doc of the commercial insurance coverage, CII status and 7 day delivery. Gave invite to butrans portal and 9/15 speaker program. Nothing learned.
PPLPMDL0020000001	Cleveland	OH	44143	9/6/2011	I asked doc if he has had any feedback from patients on butrans. He said not that he is aware of. I gave him a portal invite and an invitation to the 9/15 speaker program - explaining the 2 opportunities to learn more about butrans. He said he does not have time for those things.
PPLPMDL0020000001	Solon	OH	44139	9/6/2011	Discussed details around Estimated Payment schedule that's to begin 4Q11 - using 2Q11 data versus 3Q11 as well as what the invoice must contain for estimated payments. Reviewed who must receive the data between Kris in Finance and IMS. Jill said they'll send us utilization data for the quarter within days of the end of the quarter so the clock for payment begins then. I agreed to send a confirmation email when all utilization data is received by Purdue or IMS for payments and to also make them aware when payments are about to be made by Purdue to MH. She brought this up to ensure the mistakes of the past 6 months don't happen again. Mike and I discussed the Marketing pieces which he said the edits we're making will help with the approval, however, they must still go through Caremark. Send him one of the updates and parts of the contract as a way to rush for approval. Mike asked that I send pricing for Butrans because he'll probably discuss this with Kevin Wessel. He's unsure what the P&T Committee has decided but should know after he speaks with Kevin. Mike said his team would've added it but their P&T Committee is gone.
PPLPMDL0020000001	Euclid	OH	44117	9/6/2011	Quick call...I reminded doc that he would try butrans for an appropriate BWC patient. He said he has not yet. I reminded him of the 5 and 10mcg starting doses. I gave him an invite to the speaker program on 9/15. He just looked at it. No commitment.
PPLPMDL0020000001	Parma	OH	44129	9/6/2011	Quick call- Dr Ortega said with this being a shortened week, he is really busy. He also said he is getting ready to go out of town for some testing that he has to study for, so that is taking his other time. Reminded him of Butrans program & checked his savings cards for Butrans & OxyContin. He said he is still not entirely sure if he can come to the program since he will be so busy in the upcoming weeks, but he will try to make it. Spoke with Cindy who said she would make sure they register him if he will be attending.
PPLPMDL0020000001	Parma	OH	44129	9/6/2011	Spoke with Shari, Dr Paat's medical assistant, & reviewed Butrans with her. Also gave her a Butrans dinner invitation & asked if he ever goes to them. She said he sometimes does go, especially if Dr Tolentino goes. I asked her to give Dr Paat the invitation & let him know what a great opportunity it would be for him to speak with other area physicians about Butrans & their experience in using it. She agreed. Also gave Portal invite for him to do online, but she said he does not do those. She said they did not need Butrans or OxyContin savings cards.
PPLPMDL0020000001	Cleveland	OH	44103	9/6/2011	talked to Nick,Pharmacist,about Butrans 5 core selling messages and asked Nick what really stood out to him about Butrans? Nick said once weekly dosing and transdermal delivery,asked Nick if he provides patient counseling on opioids? Nick said yes,asked Nick if he would recommend Butrans to patients by giving them a Butrans patient info booklet? Nick said he will do that and patients can discuss Butrans with their HCP's,left booklets and discussed formulary coverage for Butrans.recommended Senokot-5
PPLPMDL0020000001	Westlake	OH	44145	9/6/2011	Quick call with Deanna, I asked if she typically would counsel a patient when they get a new script for a medication like Butrans. She said only if they ask or have questions. She does know how to instruct patients about Butrans. I reviewed that Butrans will reach steady state in 3 days. We reviewed the managed care and savings cards for Butrans and OxyContin.
PPLPMDL0020000001	Parma	OH	44129	9/6/2011	Quick window call- I handed back a Butrans dinner invitation & let her know it would be an ideal opportunity to speak with other physicians & experts about Butrans. Dr Tolentino asked if she could bring her daughter, who is also a physician. I told her that physicians, NP's, & PA's were allowed to attend, but no one else. She said she will check the date & will come if she can. I asked her to register ASAP as spaces were filling up. She agreed to do this & Kathy said she would help her remember.
PPLPMDL0020000001	Sagamore Hills	OH	44067	9/7/2011	Dr Sevier said he just wrote a Butrans prescription for a patient a few weeks ago, but the patient called him from the pharmacy, saying that it was much too expensive. I asked if it was a Medicare/Medicaid patient. He said no, it was someone with insurance. Reviewed coverage & reminded him of savings cards, which he said he had forgotten. I asked him to tell me about the patient (ie condition, prior treatments). He said the patient was a male with chronic low back pain who was taking a few Vicodin daily. I told him he selected a perfect patient & showed him inclusion criteria again to support his decision. Discussed appropriate patient type further. He said he wants to know as soon as Medicare approves it on any of the Part D plans because he has many, many patients with osteoarthritis who he would like to try on it because they are always saying that they are in pain every few hours because the short-acting medication is wearing off too soon. He said some of them have even tried fentanyl because it is long-acting but it is "too much" for them & they feel "too drugged" on it. Discussed prior authorization process for Part D & also discussed OxyContin as a possible option for some of those patients. He said he might try the prior authorization for Butrans for a few of those patients.
PPLPMDL0020000001	Sagamore Hills	OH	44067	9/7/2011	Dr Gemma said she tried Butrans on a patient. I asked her to tell me about the patient. She said it was a male patient with chronic back pain. She said he wanted to stop taking his Percocet, so she put him on Butrans. I told her it sounded like she selected a good patient. I asked what dose she started him at. She said 10mcg & then titrated him up to 20mcg. I told her it sounded like she had done the right thing. She said she has not heard back from him yet, so she will see how he does. I asked if she has more patients like him, also with commercial insurance. She said yes. Closed for those patients. She said she would keep it in mind for those patients, especially if she gets good results from this one. Also discussed OxyContin as an option for appropriate patients beyond Butrans 20mcg.
PPLPMDL0020000001	Sagamore Hills	OH	44067	9/7/2011	Reviewed Butrans 5 core messages with Penny. She said she had forgotten as she is just getting her bearings at her new position. Discussed Butrans appropriate patient type (ie patients calling too soon for refills of short-acting/saying it is not lasting long enough). Reviewed insurance information & asked her to focus on commercially insured patients. She said it is a shame Butrans is not covered on Medicare because that is where she would be likely to use it. I asked if she sees working patients who suffer from back pain due to a condition such as spinal stenosis or spondylolsthesis. She said yes. I asked if they are treated with opioids. She said yes. I told her some of them may be potential Butrans candidates. She said she would keep it in mind for those patients. Reviewed savings cards where eligible.
PPLPMDL0020000001	Cleveland	OH	44114	9/7/2011	dr talked about the patients she has started on Butrans and how many of them are seeing significant improvements in pain levels,showed dr butrans inclusion criteria,asked if she has patients with these conditions? dr said yes,asked dr if she could start more patients on Butrans with these pain conditions and like the one's she's already started? dr said yes she will do that dr said she has some weeks where she doesnt feel anyone's appropriate and others where she see's a few patients that she wants to start on Butrans.dr said she knows who the appropriate patient is and no problems with insurance so she's happy,focused dr on BWC and commercial plans for Butrans.recommended Senokot-5
PPLPMDL0020000001	Northfield	OH	44067	9/7/2011	Dr Langs only came in to grab her lunch & go as she said she was still seeing patients. Reviewed Butrans appropriate patient type & told her about upcoming program, giving her an invitation. She said she would not attend. Reminded her that this would be the first formal presentation on Butrans she would be hearing & it would be a good opportunity to speak with other area physicians & experts about Butrans & their experience with it. She still declined. She said she would keep Butrans in mind for the types of patients we discussed (ie calling too soon for refills of short-acting opioids).
PPLPMDL0020000001	Sagamore Hills	OH	44067	9/7/2011	Dr Lenox said he remembers talking to me about Butrans before but did not recall many details about it. Reviewed 5 core messages with him. When I said that Butrans is a CIII opioid, he said he remembered all the other details but forgot & thought that it was CII. He said that makes a big difference. I asked him why that was such a big deal for him. He said he can call it in & he can write for 6 months at a time. I told him this was correct. Reminded him that Butrans still carries abuse & addiction potential. Spent time reviewing appropriate patient type (ie calling for refills too soon because their short-acting opioid is not working for long enough) & closed for this patient type. He said he would prescribe, especially now that he knows Butrans is CIII. He said that was the most important thing he learned at our lunch today. Discussed OxyContin as an option for appropriate patients
PPLPMDL0020000001					

PPLPMDL0020000001	Bedford	OH	44146	9/7/2011	Spoke with floater pharmacist & presented him with Butrans pharmacists' webinar information. He said he would leave it for Shay, the regular pharmacist. Reviewed Butrans appropriate patient type, focusing on those who call too soon for refills or who complain about their short-acting medication not working long enough. He said he has not dispensed much of it, but has seen it on shelves of different locations. Discussed savings via e-voucher & Butrans.com as well as OxyContin savings cards.
PPLPMDL0020000001	Brooklyn	OH	44144	9/7/2011	Spoke with MA Trish & told her about Butrans dinner program on the 15th. She said Dr Detwiler rarely/never goes to programs. I let her know that this would be the first formal presentation about Butrans he would hear & also that other area physicians & experts will be in attendance to discuss Butrans & their experience with it. She said she would give him the invite & ask him, but that chances are, he will not attend. I told her it was worth a
PPLPMDL0020000001	Cleveland	OH	44109	9/7/2011	showed dr butrans visual aid,pg.11,discussed inclusion criteria and asked dr if he had patients like this where Butrans could be an option? dr said he hasnt really thought of Butrans lately as he was waiting for patients to complain about their short-acting opioids and ask for something else.told dr patients with these pain conditions are appropriate for Butrans and showed initiation section in butrans visual aid.asked dr if he has a few patients this week with these pain conditions,where he can discuss Butrans with them and start them on Butrans? dr said he will have to think about it but he treats these pain conditions every day.focused dr on BWC and commercial plan patients.OxyContin reminder,7 tablet strengths and focused dr on medicaid and medicare coverage for OxyContin.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	9/7/2011	worked rheumatology dept-see call notes on dr ballou,dr magrey,dr singer. worked neurology dept-left Butrans fpi,initiation guide,9/15/11 dinner invitation,portal invite,patient info booklet,formulary grid and patient savings card flashcard for dr winkelman,dr hanna,virginia edwards,NP,worked internal medicine-left same butrans info as noted for neurology dept for all doctors:dr Lindheim,Dr.Eisen,Dr.Falck-Ytter,Dr.McCreery,Dr.Gelehrter,Dr.Harrington,Dr.Jones,Dr.Ricanati and Dr.Spinelli-cant see any of the doctors,no lunches,only appointments with doctors IF they call you,Dr.McCreery is NOT meeting with rep's anymore she used to do that and discuss products with rep's to explain to dept-thats gone not anymore. worked pmkr-see call notes on attending physicians and left Butrans 9/15/11 dinner program invitations with Jodi Simmeda,Amputee
PPLPMDL0020000001	Cleveland	OH	44104	9/7/2011	dr said he's been on vacation for last 10days,so hasnt seen patients.dr said he started 1 patient on Butrans the last time i was in his office before dr vacation.dr said it was easy to get patient started on Butrans,he gave Butrans patient info booklet and patient got Butrans at pharmacy.dr said his staff worked with patient on application/rotation of Butrans.dr said he has more patients in mind to start on Butrans but wanted to know about medical coverage.we discussed PA requirement for Butrans and i asked dr to focus on commercial plans and Tricare patients to start on Butrans.dr said ok.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44104	9/7/2011	showed dr pg.11 inclusion criteria,butrans visual aid,discussed pain conditions and how dr treats chronic pain for them.dr said he has small percentage of patients on opioid in his practice,more patients in nursing homes that are on opioids but in practice they are mostly medicare patients.dr said he likes Butrans and has started a few patients in nursing home and they got Butrans easily from the pharmacy.dr said its easy to explain to patients,dr said he likes once weekly dosing and Butrans being transdermal.i asked dr if he had patients with the pain conditions we discussed,coming this week,where he could start them on Butrans? dr said he didnt know but would consider Butrans for patients with these conditions.we discussed commercial plan coverage for Butrans.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	9/7/2011	talked to dr about pain conditions she treats,showed pg.11 visual aid and asked dr if she will see more patients this week that have these conditions where she can start them on Butrans? dr said she will see many of these conditions and is thinking of Butrans for more patients,discussed initiation of Butrans,showed initiation section in visual aid,focused dr on application/rotation of butrans info in booklet and focused dr on BWC and commercial insurance.dr had to go but said she will continue starting more patients on butrans.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	9/7/2011	talked to dr about pg.11 butrans visual aid,inclusion criteria,asked if he treats these conditions? dr said yes.asked dr how he manages chronic pain for these conditions? dr said he will try all non-opioid therapies first when those fail,he'll typically start patients on tramadol even though patients have chronic pain,he hope is that the tramadol will control their pain and eventually through physical therapy,exercise,etc.,patients wont need tramadol for the rest of their lives.dr said he knows that doesnt make sense and he should consider a long-acting opioid earlier in therapy,as these are chronic pain conditions but he doesnt do that,dr said most physicians wont do that asked dr to consider Butrans then for patients after their 1st tramadol dose isnt controlling their pain.dr said he's started a couple more patients on Butrans and will consider Butrans for patients with the pain conditions we discussed-we focused discussion on osteoarthritis and low back pain.focused dr on BWC and commercial plan patients,discussed OxyContin being an option for patients,showed conversion guide and discussed vicodin and percocet conversions to OxyContin,focused dr on medicaid,medicare and commercial plans for OxyContin.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44114	9/7/2011	dr said he just started another patient on Butrans,he's happy with clinical results he's seeing from Butrans and no issues with insurance.showed dr butrans inclusion criteria and asked how often he's treating these pain conditions? dr said he treats a lot of low back pain and osteoarthritis asked dr if he could think of a couple patients this week that have these conditions,to start on Butrans? dr said he will think about it but he's thinking he probably has a few focused dr on BWC and commercial plans.recommended Senokot-S
PPLPMDL0020000001	Sagamore Hills	OH	44067	9/7/2011	Dr Maguire said he put one patient on Butrans & that patient said it did not work. I asked him to tell me more about the patient. He said she was an older woman who had chronic back pain. I asked what medication she had been on before & what starting dose he gave her. He said she had been on 4 Percocet per day & he started her on 5mg. I asked if he had considered titrating upward before taking her off Butrans completely. He said he did & he offered that to the patient, but she declined & said she wanted to go back to her Percocet. He said that maybe she just didn't want to stop taking Percocet. Reminded him that patients can take supplemental analgesia with Butrans, especially during the first few days while Butrans is reaching steady state. He said she really did not want to stay on it. I asked what his thoughts are now on Butrans after that experience. He said no drug works for everyone & that he will continue to find more patients. I told him he had chosen what sounded to be an ideal patient & asked if he had more like her & he said, "sure". Closed for those patients & he said he would keep it
PPLPMDL0020000001	Cleveland	OH	44109	9/7/2011	showed dr inclusion criteria,pg.11 butrans visual aid,discussed pain conditions dr treats,dr talked about low back pain patients and how he will try all non-opioid therapies initially then when thats not controlling pain dr said he will start patients on short-acting opioids like tramadol or vicodin.dr said he was trained to start with tramadol,once patients are maxed on tramadol,start patients on lowest dose of vicodin,max out vicodin and then convert patients to percocet if need be.dr said to put patients on a long-acting opioid is thought to be a failure on doctors part,dr said he knows Butrans is a CII which is different,he likes that Butrans is transdermal and dosed once a week,but dr said he hasnt had any patients complain about their pills not controlling their pain and asking him for something else.i asked dr to consider the pain conditions we discussed and start a few patients with these conditions,on Butrans.dr said if patients complain to him and want something else,he will consider Butrans.focused dr on BWC and commercial plans.gave OxyContin reminder,discussed 7 tablet strengths,gave conversion guide and focused dr on Medicaid,Medicare and commercial plans for OxyContin.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	9/7/2011	showed dr butrans visual aid,pg.11 inclusion criteria discussed this with dr,dr said she was suprised to see some of the pain conditions listed and hasnt thought of Butrans for some patients as she's been waiting to hear from patients that their short-acting opioids arent controlling their pain.asked dr if she has a few patients with low back pain that could try Butrans,this week? dr said she probably does and will consider Butrans.dr said after the Butrans dinner program in August that she attended,she has been discussing Butrans with patients and giving them Butrans patient info booklets to read and she follows up with them to see if they are willing to try Butrans.told dr that was great she was starting there and asked if she could take it to the next step and actually start a few patients on Butrans this week? dr said she will do her best as she knows its taking her longer to start anyone but she feels comfortable with the medication so no concerns there.dr said biggest challenge is medicaid's not covering Butrans.focused dr on BWC and commercial plan patients and talked to dr about medical PA for Butrans if dr is willing to do the PA.discussed OxyContin being an appropriate option for patients,7 tablet strengths,gave conversion guide discussed a few conversions from vicodin to OxyContin and percocet to OxyContin,focused dr on Medicaid and Medicare coverage for OxyContin.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	9/7/2011	talked to dr about inclusion criteria,pg.11 butrans visual aid,asked dr how often he see's these pain conditions? dr said he see's a lot of patients with arthritis,specifically osteoarthritis and rheumatoid.asked dr how he manages their chronic pain? dr said typically after non-opioid therapies are tried,physical therapy,exercise,etc,he will start patients on tramadol.asked dr how he feels Butrans could be appropriate? dr said he usually wouldnt consider a long-acting opioid until all short-acting opioids failed.talked to dr about Butrans being an option for those patients where tramadol isnt controlling their pain,since he wasnt willing to consider Butrans for opioid naive patients.dr said he could talk to a few patients taking tramadol where he knows tramadol isnt controlling their pain and some patients are always asking for something else.we discussed initiation of Butrans,showed initiation section in visual aid,and asked dr if he will see a few of these patients this week? dr said probably so and he will talk to them about Butrans.gave dr Butrans patient info booklets to give patients,focused dr on application/rotation of Butrans.focused dr on BWC,commercial and tricare patients.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	9/7/2011	talked to Dale about patients with osteoarthritis and how Butrans could be an appropriate option,dale said they see patients with this pain condition but typically will try all non-opioid therapies 1st,then if that doesnt give patients pain relief,they will usually start patients on tramadol.dale said he thinks Butrans would be a great therapy initially and not tramadol,so he's considering that option for patients but majority of dr shen and dr daoud's patients,both pain management doctors,will be started on tramadol and other short-acting opioids after that before doctors will consider Butrans.discussed application/rotation info in butrans patient info booklet as point of discussion with patients and focused dale on bwc and commercial plan patients.asked dale if he will see more patients this week with osteoarthritis that he can start on Butrans and not tramadol? Dale said he probably will see some patients like this,this week,and will consider Butrans as an option.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	9/7/2011	talked to dr about 1 patient she started on Butrans.dr said patient tried all other opioids, nothing worked so she wanted to try Butrans.dr said she see's patient soon for follow-up but is assumeing since patient hasnt called office that medication is working.showed dr Butrans patient info booklet, to be sure she discusses application/rotation of Butrans and discuss titration,side effects,etc,dr said she will do that.showed dr butrans visual aid,pg.11,discussed inclusion criteria and dr said she does treat these pain conditions here but doesnt have a lot of patients on opioids.asked dr if she had more patients to start on Butrans,like the 1 she started in August? dr said she has a lot of patients she would love to start on Butrans but majority of their patients are medicaid and medicare and butrans isnt approved on either plan.we discussed Medicaid's prior authorization requirements for Butrans and told told dr to focus on commercial plans,BWC or Tricare patients.dr said ok she'll have to think about it and see if there is anyone with those plans.recommended Senokot-S
PPLPMDL0020000001	Bedford	OH	44146	9/7/2011	I asked Dr Moutfawad if he ever titrates the patient's Butrans dose if he finds they are taking a lot of supplemental analgesia. He said he does do that. He said he usually waits about a week before titrating & gives Nucynta for breakthrough. I also asked him if he thought he would make it to my program next week. He said he probably will but is not 100% sure yet. I reminded him this would be an ideal opportunity to discuss Butrans with peers & other experts one-on-one. He said he does think he will be there.
PPLPMDL0020000001	Stow	OH	44224	9/7/2011	Chuck said he has not seen scripts for Butrans. I told him Dr Yang has written. HE said he did have it in stock so maybe one of the other pharmacists has filled. I showed application and safety to discuss with the patient. HE does not see Oxycontin scripts. I meinded him of SenS in opioid induced constipation
PPLPMDL0020000001	Cleveland	OH	44103	9/7/2011	talked to Barb,RN,for dr and she said that dr had all of the Butrans info i left before but hasnt said anything to her about meeting.showed Barb Butrans visual aid,discussed 5 core selling messages and asked Barb what features of Butrans really stood out to her? Barb said once weekly dosing and transdermal delivery of Butrans,Barb said dr has a lot of patients on Vicodin and Percocet that are always calling in early every month for refills and arent controlled on these medications so Butrans could be an option but biggest challenge is insurance.medicaid,medicare and self-insured patients are majority here.discussed Medicaid PA requirements with Barb and focused her on BWC,commercial and Tricare patients,Barb said ok and she will give Butrans fpi,portal invite,9/15/11 dinner invitation,initiation guide,formulary grid,patient savings card flashcard and patient info booklet to dr again with my business card.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	9/7/2011	dr said he knows Butrans is available,hasnt started anyone on it and thinks its just another patch like Duragesic.showed dr butrans visual aid,pg.11 inclusion criteria and asked dr if he treats these pain conditions? dr said yes.asked dr how he manages chronic pain for these conditions? dr said he will always start with non-opioid therapies,when that fails he will start patients on short-acting opioids and eventually when they need a long-acting opioid he will consider OxyContin or Duragesic.asked dr if he would consider Butrans as an option for these conditions? dr said i dont know i have to think about it and look at the Butrans fpi in more detail again.dr had to go.gave OxyContin reminder when he mentioned OxyContin and told dr OxyContin was available on medicaid,medicare and commercial plans.dr said ok he had to go.recommended Senokot-S
PPLPMDL0020000001	Brooklyn	OH	44144	9/7/2011	Saw Dr Hilton at the window but did not get to talk to her. Spoke with Carol & told her about upcoming Butrans dinner program. I asked if she thought Dr Hilton would attend. She said she never participates in those. I told her that this would be the first formal presentation she would be seeing on Butrans & that it would give her a good opportunity to speak with experts about their experience with it. She said she still did not think Dr Hilton would go. I asked her to please at least let her know about the program by giving her an invitation & she agreed. She said they did not need any savings cards. I asked who takes phone calls from patients for refills or if their medication is not working for them. She said she takes them & usually Wendy ends up handling them.
PPLPMDL0020000001					

PPLPMDL0020000001	Parma	OH	44129	9/7/2011	Quick call- Jen said she was swamped due to it being a short week. She said she has seen 60 patients in 2 days & is non-stop. Handed back a Butrans dinner invitation for the upcoming program & asked her to consider attending. She said it was doubtful, but she would see. Reminded her it would be the first formal Butrans presentation she would be hearing & also that other practitioners would be in attendance & she could speak with them one-on-one about their experience with Butrans. She said I made a good point but that she still doesn't know. Let her know I would return to follow-up.
	Cleveland	OH	44109	9/7/2011	showed dr pg.11,inclusion criteria,discussed pain conditions and dr said she see's a lot of arthritic patients but always starts them on tramadol if they have chronic pain.dr said majority of her patients are controlled on tramadol but she has all of the Butrans info from our lunch last week so she'll keep Butrans in mind. asked dr what features really stood out to her,showed visual aid 5 core selling messages? dr said once weekly dosing and transdermal.dr said she had to go.told dr to focus on commercial and BWC patients if anyone she see's this week,with these pain conditions,isnt controlled on tramadol and she wants to start them on Butrans,dr said Quick call as I caught Dr Miguel in the lobby. Told him about Butrans program coming up & gave him an invitation. He said he usually doesn't go to them. Reminded him it would be the first formal Butrans presentation he would be hearing & let him know it would be an ideal opportunity to speak with fellow physicians about their experience with Butrans. He said he'd think about it. Also OxyContin Medicare Part D reminder.
PPLPMDL0020000001	Brooklyn	OH	44144	9/7/2011	Spoke with Sarah, technician, who said the pharmacist was too backed up to stop & talk today. She said they just got their flu shots in & it has been extremely busy for her. I showed her the information about pharmacists' Butrans webinars & asked if she thought the pharmacist would be interested. She said maybe. She then pointed to the word "Butrans" & said, "I know we just got a higher strength of this in, too. We have 5 & 10 now." I asked if she knew if it was ordered because they saw a prescription for it. She said that is possible, or McKesson sometimes auto-ships them things if it is a new strength available. I told her that strength has always been available.
	Parma	OH	44129	9/7/2011	She said it was probably a prescription then. She said she would leave my information for the pharmacist & also said they are stocked on OxyContin savings cards.
PPLPMDL0020000001	Cleveland	OH	44106	9/7/2011	talked to dr about pain conditions,inclusion criteria pg.11,asked how many of the conditions he treats? dr said most of them they see it all in this pain clinic. asked dr how he manages patients chronic pain for these conditions? dr said majority of his patients have been taking vicodin or percocet for years and all they want are their pills.dr said if he doesnt trust patients are taking their pills or they are calling in earlier every month for refills,he's telling them he wont refill their immediate release opioids and they have to start on Butrans thats all he will give them and they can take ibuprofen or aspirin for breakthrough pain. asked dr if he will start a few patients today on Butrans,if they have the pain conditions shown and discussed? dr said yes he will consider Butrans for them.dr said to speak with Lisa, Patient Care Coordinator, as she deals with all insurance plans and patient savings cards.spoke with Lisa about this info. discussed OxyContin as an option for patients and showed conversion guide dr took it and said he didnt have a lot of patients on OxyContin but its a good medication for some patients. recommended Senokot-S- PPLPMDL0020000001 Cleveland OH 44109 9/7/2011 met new director briefly in hall, discussed Butrans fpi, 5 core selling messages with dr, dr said she heard about Butrans but will have to look over the info in more detail. dr said to call her secretary and set-up an appointment to discuss everything.gave dr Butrans fpi, initiation guide, portal invite, 9/15/11 dinner program invitation, formulary grid and patient savings card flashcard. dr said she appreciated the info and will see me later.
	Cleveland	OH	44106	9/7/2011	worked pain management dept-see call note on dr sahgal; worked family medicine dept-left Butrans fpi, initiation guide, formulary grid, patient info booklet, portal invite and 9/15/11 dinner invitation for Dr. Marsh, Dr. Truax - you cant see physicians in dept, have to leave info and if they are interested in speaking with you they will call to set-up an appointment. worked internal med dept- barb bonfiglio, resident coordinator, out for day follow-up tomorrow to set-up appointment for resident lunches in oct-dec and set up monthly appointments with dr armitage, vice chairman of dept.
PPLPMDL0020000001	Cleveland	OH	44113	9/7/2011	talked to Maria RN, about Butrans fpi, 5 core selling messages, initiation guide, formulary grid and patient info booklet. Maria said she gave info to dr but he hasnt had time to meet me for an appt. Maria said they have hundreds of patients who could benefit from trying Butrans but the problem is that majority of their patients are medicaid, medicare or self-insured. asked Maria what features of Butrans she liked? Maria said she likes once weekly dosing option and that Butrans is a patch. I asked Maria to share all of the Butrans info, left same info as noted above, with dr again and ask if i can get a few minutes with him to discuss Butrans and OxyContin? Maria said she would talk to dr gve Maria butrans portal invite and 9/15/11 Butrans dinner program invitation. recommended Senokot-S
	Cleveland	OH	44121	9/8/2011	Window call...Gave doc a butrans portal invite and an invite to the 9/15 speaker program I asked her to prescribe butrans for patients that have failed on NSAIDs/tramadol.
PPLPMDL0020000001	Maple Heights	OH	44137	9/8/2011	Dr Gene said he had received a mailer about Butrans & remembers a lot about it. I asked what he recalled reading. He said that he knows it is for moderate to severe chronic pain, dosed 5, 10, & 20mcg/hr, dosed once weekly in a transdermal system. I told him this was impressive recall. He said he tries to take the time to read information from wherever it comes from as he learns something frequently. I asked where he might place Butrans in his practice. Discussed appropriate patient type & positioning. Also showed him inclusion criteria & discussed painful conditions such as spinal stenosis & spondylolsthesis. He said treating pain is not his favorite thing to do as a physician. Empathized & asked what some of the biggest challenges are. He said one can't always tell when a patient is really in pain & sometimes patients "fool" doctors into doing what they want them to do. He said he tries to do what is best for the patient. I told him he is doing the right thing. He said that having a long-acting CII was a benefit of Butrans & said it "must be" less abusable than a CII. I told him I could not & would not make that claim. I drew his attention to the black box warning & advised that Butrans, a CII opioid, does carry abuse & addiction potential. He said he still does not think it would be as abusable as a CII. Asked him to be cautious in prescribing. Also discussed OxyContin q12h for appropriate patients beyond Butrans. He said he could see himself prescribing Butrans.
	Cleveland	OH	44109	9/8/2011	showed pg.11 inclusion criteria,discussed pain conditions listed and focused on low back pain,asked dr if he had any patients coming in this week with this condition where Butrans could be an option? dr said he didnt know but is considering Butrans for patients,he just needs to find the 1st patient to start and it'll get easier. asked dr what he needs from me to find that 1 patient? dr said nothing he likes once weekly dosing of Butrans and transdermal delivery, dr asked about insurance coverage, focused dr on BWC and commercial plan patients to start a couple patients on Butrans and get some clinical experience, dr said he will do it just thinking of patients. OxyContin reminder, appropriate patients, discussed formulary coverage and recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44106	9/8/2011	dr said he's started a few more patients on Butrans, patients are getting scripts from him and Lisa, patient care coordinator or Steve, RN, give patients Butrans patient info booklets and he's not heard anything back from patients so thats a good sign. talked to dr about titration of Butrans, focused dr on commercial plan patients and appropriate patients to start on Butrans- showed dr Butrans visual aid, pg.11 inclusion criteria and asked dr to start a couple patients on Butrans with the pain conditions shown, dr said ok he will think about that, right now dr said he's only thought of Butrans if patients are taking tramadol every day and not controlled and asking for more pills, he's thinking of Butrans for them, told dr that was still great but he could also think of Butrans for patients with pain conditions that we had in butrans clinical trials, dr said ok. discussed OxyContin as an option for patients, gave conversion guide and talked about formulary coverage for OxyContin. recommended Senokot-S
	Cleveland	OH	44103	9/8/2011	talked to Abdul, Pharmacist, no Butrans scripts yet and they arent ordering anymore Butrans until they see a script as its been sitting on shelf and only ordered 1 time. Abdul said he has to run a business and cant order product to sit on shelf, told Abdul I completely understood, we discussed my focus with doctors on Butrans discussing 5 core selling messages, showed Abdul Butrans visual aid and asked Abdul if he will continue recommending Butrans to patients, when providing patient counseling, if patients are telling Abdul that their immediate release opioids arent controlling their pain, Abdul said he's been giving Butrans patient info booklets out to patients and will continue doing so. we discussed formulary coverage for Butrans and also discussed OxyContin stocking, appropriate patients and formulary coverage. recommended Senokot-S
PPLPMDL0020000001	Cleveland Hts	OH	44118	9/8/2011	I reviewed the butrans selling messages and reminded doc that he asked for reminders. He said the hurdle is getting it approved for patients at an affordable cost. I told him to think of butrans for appropriate patients with coverage through work (i.e. RX coverage or BWC). He said that workers comp is starting to reject things they used to cover. He thanked me for the reminder.
	Mayfield Heights	OH	44124	9/8/2011	Window call...I asked doc if he considered attending the butrans speaker program per the invitation I gave him. He said he really does not have time. I asked him to log onto the butrans portal to learn more about appropriate patient selection. I reminded him of the patient that that fail on tramadol or NSAIDS. He said ok.
PPLPMDL0020000001	Macedonia	OH	44056	9/8/2011	Reviewed 5 core messages with Dr Yager & discussed appropriate patient type, including review of inclusion criteria disease states. He asked me to review dosing with him again. Discussed doses available & presented initiation guide pg 6 to help him position Butrans. He said he usually does refer to pain management but agreed that he has not had a long-acting CIII, especially one dosed only once weekly. Reminded him of abuse/addiction potential & discussed importance of appropriate patient selection. He asked what to do with a 70-year old patient with a history of substance abuse, but who has since quit taking pain medications & who has chronic shoulder pain. He said the patient has been to orthopedics & had injections & is on NSAID's & COX-2's but is not well-controlled. He said the patient smokes & drinks approximately 12 beers per day. I asked him what he would do. He said this was one of his patients & he referred to pain management. I told him the patient sounded like a difficult case & that referring may have been the best option. Reviewed managed care coverage & savings where eligible. Dr Yager said he would keep Butrans in mind for appropriate patients. Also discussed OxyContin q12h as an option beyond Butrans.
	Cleveland	OH	44195	9/8/2011	worked anesthesia/pain management dept- see call notes on anne crawford, np, kathy kraus, pa and dr cheng. confirmed new director's info- dr rosenquist.
PPLPMDL0020000001	Cleveland	OH	44125	9/8/2011	Gave Angie an information sheet for our Butrans webinars available for pharmacists. She said she did not have time to talk but said she would make copies of it for the rest of the staff. Let her know the programs did not have CE's for completion, but that they are specifically for pharmacists & let her know of the interactive nature of the programs. She thanked me for the info & took a phone call.
	Cleveland	OH	44195	9/8/2011	talked to Anne, NP, about pain conditions, pg.11 inclusion criteria, and asked if she treats these conditions? anne said yes they see all of these conditions here but anne said they are really trying to get patients off opioids. anne said they have a lot of patients who have been taking tramadol, vicodin or percocet for the pain conditions we discussed, for years and still arent getting pain relief and need more pills, anne thinks butrans could be an option right there but her challenge is that many of the older physicians like dr stanton-hicks and dr mekhail like the tried and true (short-acting opioids) and the newer doctors like dr katyal and dr leizman do not want to prescribe ANY opioids, they prefer to give patients a TENS unit or other non-opioid therapies. asked Anne if she would start a few patients on Butrans with these pain conditions, knowing she see's dr stanton-hicks patients and talk to dr about Butrans as an option if these patients are taking immediate release opioids and not getting pain controlled. Anne said she will do her best and talk to him and see what she can do. anne asked about insurance coverage, focused Anne on BWC and commercial plan patients. recommended Senokot-S
PPLPMDL0020000001	Lyndhurst	OH	44124	9/8/2011	Spoke to Erin about the stocking of butrans. She confirmed having the product but has not seen any scripts. I discussed the savings card program and the ability to print off the cards from online. I gave patient info guide and explained the proper application.
	Cleveland	OH	44113	9/8/2011	worked dr nickels office which is in grace hospital center
PPLPMDL0020000001	Parma	OH	44129	9/8/2011	Spoke with Julianne, technician, & gave her information on Butrans webinars for pharmacists. I explained the interactive nature of the program & let her know that I had introduced Butrans to Stan & Kevin last month. I delivered Butrans overview (ie dosing, usage, delivery system) & asked her to give Stan & Kevin the invitations for the online program. She agreed to do so. I also left my card.
	Tallmadge	OH	44278	9/8/2011	Had lunch, Dr came down and apologized that he could not stay, he was backed up and his afternoon patients are here and what do I have. I told him I have a new product called Butrans which is the first 7 day analgesic that is schedule 3, for patients with moderate to sever chronic pain. HE said he didnt have time to go through FPI and to come back. Gave him formulary grid
PPLPMDL0020000001	Garfield Heights	OH	44125	9/8/2011	Spoke with nurse, Denise Anderson, & discussed Butrans dinner program next week. She said she would not only give Dr Samuel the invitation, but she would also post one in the physician lounge area where they look for information like that. She said they do, on occasion, attend programs. She requested that I email her for an appointment with Dr Samuel & Dr Abraham, who is newer to the group since Dr Solomon is now gone. Discussed savings cards, which she said she had enough of.

PPLPMDL0020000001	Cleveland	OH	44113	9/8/2011	talked to dr about inclusion criteria,pg.11 visual aid and asked dr how often he treats these pain conditions? dr said he treats a lot of low back pain and osteoarthritis,talked about how he will try all non-opioid therapies 1st when all else fails he will turn to opioids.dr said majority of his patients have already tried 1 opioid or more by the time he see's them so he's usually maintaining the medication regimen or changing the opioid.asked dr if he could start a couple patients with these conditions,specifically low back pain,on butrans? dr said he is keeping butrans in mind and thinks its a great option for patients.dr said he has many tools to choose from and Butrans is 1 of them.talked to dr about BWC and commercial patients for Butrans.gave OxyContin reminder and formulary coverage reminder for OxyContin.recommended Senokot-5
	Cleveland	OH	44113	9/8/2011	talked to Laura about some of the pain conditions on pg.11,spinal stenosis,low back pain and osteoarthritis.were topics of discussion.laura said they see it all here but she just gives tramadol or vicodin for chronic pain conditions.Laura said she hasn't started anyone on Butrans as its been too stressful to have a discussion on a new product with patients,laura said its easier to just refill tramadol and send patients out the door.i asked Laura if she will see any patients next week,with these pain conditions,that she can start on Butrans? Laura said she knows about Butrans and thinks its a great option but will have to see if she has the time to discuss Butrans with patients next week.laura said her last day is next friday,so she'll do her best.showed laura the Butrans initiation section and told laura to focus on BWC and commercial plan patients to start on Butrans.laura said ok and thanked me for the info.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44103	9/8/2011	dr said they are changing policies here and wont be able to meet with reps anymore,after this week,because doctors dont have enough time to see patients too many reps every day.dr said she will meet with me at end of day,5 or 5:30pm,moving forward but i have to set-up appointment with felicia,ma.dr said she started a couple patients recently on Butrans,gave Butrans patient info booklet which helps explain a lot to patients so all she needed was some more booklets and that was it.showed dr butrans inclusion criteria,pg.11,asked if she treats these pain conditions often? dr said many of them she does and a lot of arthritis and low back pain patients.dr said she will think of Butrans for them told dr to focus on commercial plan patients and give them Butrans patient savings cards,dr said ok.recommended Senokot-5
	Cleveland	OH	44109	9/8/2011	talked to dr about the couple patients he started on Butrans,dr said both patients are tolerating medication and no complaints so he's happy.asked dr if he treats pain conditions,pg.11 inclusion criteria butrans visual aid? dr said yes,focused on low back pain as he see's a lot of BWC patients.dr said most of these patients want their pills and dont want a patch,dr said he's always frustrated with the pain patients.talked to dr about starting a couple patients,like the one's he started already,on Butrans when he see's these pain conditions specifically low back pain patients.dr said he will consider that,if patients are asking for more pills and he's not comfortable giving more pills he's talking to them about Butrans.discussed initiation of Butrans and focused dr on Application/Rotation info in Butrans patient info booklet.discussed BWC and commercial plan patients coverage for Butrans.discussed OxyContin being an appropriate option for patients,showed conversion guide and discussed vicodin to OxyContin and percocet to OxyContin conversions,talked about formulary coverage for OxyContin and recommended
PPLPMDL0020000001	Cleveland	OH	44102	9/8/2011	talked to Nagla,PA,about patients with specific pain conditions,showed pg.11 inclusion criteria and talked about how they treat chronic pain,for these conditions.Nagla said they will try physical therapy,exercise,injections,stimulators,etc.,all non-opioid therapies then they will give opioids if necessary.Nagla said all 3 doctors here typically give tramadol initially then when that fails they will give patients vicodin or percocet.talked to Nagla about Butrans being an option for these patients with the pain conditions we discussed,nagla focused on low back pain,Nagla said she doesnt know if doctors will start patients on a long-acting opioid but she will recommend if appropriate.Nagla said most of the patients she's seeing get started on Butrans have been taking immediate release opioids for years and just want more pills so they are telling patients no they arent getting more pills,they have the option of Butrans.we talked about patients still taking immediate release opioids for breakthrough pain,if dr feels thats appropriate with Butrans.asked Nagla to start a few patients this week on Butrans,per our discussion and Nagla said she will recommend Butrans as an option, to the doctors and talk to them as they make the final decisions on opioids.recommended Senokot-5
	Cleveland	OH	44195	9/8/2011	talked to dr in hall,dr said he started 1 patient on Butrans,discussed why he chose Butrans for this patient,dr said patient was taking a couple percocet a day but pain wasn't controlled,so he thought patient should try Butrans and see if that helped with pain.talked to dr about titration and focus patient discussions on application/rotation of butrans,dr said ok leave some booklets at front desk,told dr to focus on BWC and commercial plan patients for Butrans,dr said ok he will do that and had to go told dr to remember he has OxyContin as an option for patients,dr said he did need savings cards so i left 1 pack.recommended Senokot-5
PPLPMDL0020000001	East Cleveland	OH	44112	9/8/2011	Doc said he considered butrans for one of his staff but she is sensitive to adhesives. I showed the AE section of the sales aid and the incidence of application site pruritis. He said he still has not seen any patients come in on butrans. I asked him not to wait and to try a patient. No commitment. Discussed the oxycontin patient and he said he has started doing urine screenings in the office. If patient does not test positive for the presence of the prescribed drug, he will titrate them down until they are compliant. I told him I thought the urine screening is a great idea. I gave him the pain awarness month kits and advised on the PAP website for rseources such as urine screenings.
	South Euclid Independence	OH	44121	9/8/2011	Window call...Gave doc a butrans portal invite and an invite to the 9/15 speaker program I asked her to prescribe butrans for patients that have failed on NSAIDS/tramadol.
PPLPMDL0020000001		OH	44131	9/8/2011	Spoke with MA Vanessa, who confirmed that Dr Faيمان is no-access now. She connected me with Joanne, Clinical Coordinator, on the 7th floor, who said that the policy for the entire building, including Dr Faيمان, is to drop off information to her, which she will distribute to the physicians. At that point, if the physician chooses to meet with the rep, he/she will call the rep to make an appointment. This is the only way to access anyone in the Cleveland Clinic Independence building. Spoke with Vanessa about upcoming dinner program for Butrans & asked her to give Dr Faيمان an invitation with my card. She agreed.
	Parma	OH	44129	9/8/2011	Spoke with MA Anita who said Dr Gallagher was on vacation. I told her about the upcoming Butrans dinner program & asked her if she thought he would attend. She said she does not think he usually attends them because of his schedule being so busy. I let her know this would be the first formal Butrans presentation he would be hearing & that there would be other physicians & experts in attendance to discuss Butrans with. She said she would let him know & would give him the invitation when he returns. Also discussed Butrans & OxyContin formulary coverage & asked her to share the grids with Lynn, Dr Gallagher's nurse. She agreed.
PPLPMDL0020000001	Westlake	OH	44145	9/8/2011	I asked Dr if he likes transdermal technology, he said that he does not have a problem with them. He said that many of his patients are on higher doses of opioids and they are past Butrans. I agreed that these are not the patients to start and OxyContin would be an option for these patients. Dr said that his patients do not like to give up their pills once they start and it is hard to talk them into trying a patch. I asked if he would think of Butrans before even going to vicodin in the first place and he said it might be a good place to try Butrans. He said that he doesn't spend enough time talking to the patients about how to take a new med. I asked if he would put patient information in the patient rooms so they may be able to ask him about trying it as an option. He agreed and agreed to give Butrans a try.
	Parma	OH	44129	9/8/2011	Dr Gigliotti said he wrote another Butrans prescription last Friday but it came back rejected by insurance. I asked if he knew the plan. He had Jaz look it up & it came back as a Medicare Part D plan. Dr Gigliotti said that it was "his fault" for not realizing that because he knew Medicare did not cover it. He said their was a prior authorization that required a trial of morphine sulfate or fentanyl first. I asked what his policy on prior authorizations was. He said he never does them. I asked what it was about the patient that had made him think Butrans was the best option for them. He said he doesn't remember, but she must have been on something for her pain before he chose Butrans. I asked if he has more patients who he can try Butrans on to give him some clinical experience with it. He said yes & that he has already thought of some people. He added that he is going "use a lot" of Butrans & it is just a matter of seeing those patients. Also discussed OxyContin for patients beyond Butrans who may benefit from q12h dosing.
PPLPMDL0020000001	Cleveland Heights	OH	44118	9/8/2011	Doc came in and said he did not have time to talk to me but I was able to review the butrans selling messages: 7 day delivery, CII, indication. He walked away reminding himself of the CII status.
	Cleveland	OH	44195	9/8/2011	Kathy called as she needed savings cards for Butrans and OxyContin so we talked about who is writing Butrans and Kathy said the only one's she's seen recently are from Dr.Cheng and Dr.Samuel.Kathy said a lot of new doctors dont want to prescribe an opioid and would rather have patients try all non-opioid therapy choices 1st.Kathy said dr minzter is trying to get her patients off opioids and doesnt want to start more patients on another opioid like Butrans,kathy said dr mekhail,is an older physician and doesnt feel comfortable prescribing something new like Butrans and will stick to the tried and true of immediate release opioids.asked Kathy to speak with both doctors about pain conditions most often treated here at the clinic,showed pg.11 inclusion criteria,and recommending Butrans as an option especially if patients have been taking immediate release opioids for years and their pain still isnt controlled.Kathy said she will do that.focused kathy on BWC and commercial plan patients for Butrans.recommended Senokot-5
PPLPMDL0020000001	Westlake	OH	44145	9/8/2011	Spoke with Pam and Megan. I asked if everything was going smoothly with Butrans and patients calling back. She said there has not been any issues. I asked if we could put patient education in the patient waiting areas, and she will check with Jenny.
	Cleveland	OH	44103	9/8/2011	gave dr Butrans portal invite,9/15/11 dinner invitation,talked to dr about 5 core selling messages and asked dr to consider a couple patients with pain conditions listed on pg.11,inclusion criteria,to start on Butrans,dr said he will keep Butrans in mind but most of his patients are medicaid,medicare and self-pay patients.talked about OxyContin being an option for patients,showed conversion guide discussed a few conversions and discussed formulary coverage.dr said after tomorrow,he wont be able to meet with rep's and i can leave info with Valerie,his LPN,due to a new policy in office.recommended Senokot-5
PPLPMDL0020000001	Highland Heights	OH	44143	9/8/2011	Window Call...I gave doc an invite to the 9/15 speaker program and asked him to consider attending to learn more about the butrans patient selection. I reminded him of the commercial insurance plans and that the patch should be applied to a clean, dry, and nearly hairless site.
	South Euclid	OH	44121	9/8/2011	Window call...Gave doc a butrans portal invite and an invite to the 9/15 speaker program. I asked him to prescribe butrans for patients that have failed on NSAIDS/tramadol.
PPLPMDL0020000001	Maple Heights	OH	44137	9/9/2011	Reviewed dosing & appropriate patient type for Butrans. He said that he does not like to write opioids. I empathized & asked him if he had any patients who he does prescribe opioids for. He said yes. I asked him to focus on those & discussed switching patients to Butrans instead of increasing their tramadol or Vicodin, especially when they call in too soon for refills or say their medication is wearing off too soon. He said he'd keep it in mind. Also spoke with Dina, his medical assistant & reviewed this information with her. I asked that she keep Butrans initiation guide & discussed patients who call too soon for refills of short-acting because it is not controlling their pain.
	Independence	OH	44131	9/9/2011	Spoke with Regina (pharmacist) & discussed Butrans pharmacists' webinars available. She said that might be helpful. I encouraged her to log on, bringing to her attention the interactive nature of the program as well as that the information is delivered by a PharmD. She said she would check it out & thanked me for the info. Started to discuss Butrans appropriate patient type (ie calling too soon for refills of short-acting) but she got a phone call that she had to take. Discussed savings cards for OxyContin with her technician.
PPLPMDL0020000001	Cleveland	OH	44113	9/9/2011	talked to dr about Butrans being an option for patients with pain conditions listed in visual aid,pg.11,dr said he's thought of a few patients to start on Butrans but patients havent wanted to wear a patch so he's getting resistance from patients.talked to dr about giving patients Butrans,with immediate release opioids,showed butrans fpi-maintenance of therapy section,dr said ok he will consider that next time.asked dr if he will see any patients this afternoon with pain conditions like we discussed where he could start patients on Butrans? dr said he probably will and he will talk to patients about Butrans.showed butrans patient info booklet,focused dr on application/rotation of Butrans and asked dr to give booklets to patients.focused dr on BWC, Medicare and commercial plan patients.OxyContin reminder for appropriate patients and discussed formulary coverage for
	Independence	OH	44131	9/9/2011	Spoke with MA Kathi & told her about upcoming Butrans dinner program. I asked if Dr Reddy ever attends. She said he actually does go to them sometimes. I let her know this is a local program & it will be the first one Dr Reddy would be hearing about Butrans since launch. She said that may cause him to go but he was not there for her to ask directly. I asked her to make sure he knows that when she gives him the invitation & she agreed. Discussed once weekly transdermal system of buprenorphine with her & reviewed appropriate patient type. I also asked her to check stock on savings cards but she said they had enough. Let her know I would return to follow up on the dinner program once Dr Reddy had a chance to consider.
PPLPMDL0020000001	Maple Heights	OH	44137	9/9/2011	Re-enforced Butrans appropriate patient type with Dr Gene. He said since he just saw me yesterday at the Macedonia office, he remembers our entire conversation. I asked if he had given any additional thought to Butrans & he said not really since he has been focusing so much on their EMR transition. Reviewed patient type & inclusion criteria, focusing on patients who are suffering from a chronic condition causing pain & are not well-controlled on their short-acting medication. He said he does think he will try it & it is just a matter of when that patient type will present. Discussed dosing & titration. Also reviewed OxyContin where appropriate for patients beyond discussed Butrans fpi,5 core selling messages with dr and dr focused on once weekly dosing and transdermal delivery,dr asked me to explain more about who the appropriate patients are for Butrans,showed visual aid,pg.11 discussed pain conditions dr talked about patients he see's with osteoarthritis that are taking tramadol and still not controlled,dr said he's got a few patients that he thinks would be willing to wear a patch.asked dr to start a couple patients on Butrans to get some clinical experience and also show patients Butrans patient info booklets focusing discussion on application/rotation of Butrans,dr said ok he will do that.dr asked about insurance
	Cleveland	OH	44113	9/9/2011	coverage,focused dr on BWC,commercial and Medicare patients.recommended Senokot-5
PPLPMDL0020000001					coverage,focused dr on BWC,commercial and Medicare patients.recommended Senokot-5



PPLPMDL0020000001	Cleveland	OH	44106	9/9/2011	met dr for 1st time,dr said he's an intern and did know about Butrans because a patient in the hospital had Butrans on and he didnt know anything about the medication.showed dr Butrans fpi,discussed 5 core selling messages,showed initiation guide and discussed appropriate patients to start on butrans.dr said he likes transdermal technology and once weekly dosing and he's sure there are patients in the clinic who he can try Butrans on.dr asked about insurance,discussed commercial plans and patient savings cards.asked dr if he had a couple patients today that have 1 of the pain conditions shown on pg.11 inclusion criteria visual aid where he could try Butrans? dr said probably will.recommended Senokot-S
PPLPMDL0020000001	Garfield Heights	OH	44125	9/9/2011	Spoke with Heather, pharmacist, & presented Butrans pharmacists' webinar information. She said she is disappointed there is not credit given for doing it. I told her of the interactive nature of the programs & pointed out that she could ask questions to a PharmD instead of getting all information from me, the rep. She said that was a good point & that she might log in. Also reviewed appropriate patient type & discussed OxyContin savings cards, which she said she has enough of.
PPLPMDL0020000001	Cleveland	OH	44113	9/9/2011	talked to dr about appropriate patients for Butrans,showed inclusion criteria in visual aid,dr said he's looking at patient list every day to see who's coming in to the office that he can talk to about Butrans.dr said biggest challenge is that a lot of patients dont want to stop their pills and wear a patch,dr said he knows that he can still give patients immediate release opioids but some patients just dont want to try anything new like Butrans.asked dr to look at the pain conditions we discussed and start a few patients with these conditions,on Butrans,dr said he will do his best and will continue thinking of patients to speak with about Butrans.focused dr on BWC and commercial plan patients.discussed OxyContin as an option for patients and formulary coverage for OxyContin.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	9/9/2011	talked to Vicky, no scripts for Butrans,talked about 5 core selling messages and what Vicky thought really stood out about Butrans,vicky focused on once weekly dosing and transdermal delivery.asked Vicky to continue giving Butrans patient info booklets,when they are getting patient counseling on opioids,she said she will do that and tell patients to talk to their doctors about Butrans.discussed OxyContin stocking,appropriate patients and formulary coverage.recommended Senokot-S
PPLPMDL0020000001	Beachwood	OH	44122	9/9/2011	Spoke with Bob & Shawnte' (MA) who said that Dr Warren was running two hours behind. I told them it seems I always pick the wrong time & asked for their advice on the best time/way to reach Dr Warren. They said it changes weekly so I have to keep checking back. They checked the computer system & Shawnte' said to try back on Monday as that would be a better day. Told them about Butrans dinner program & asked if Dr Warren ever attends them. They said they don't know but do not think he does. I discussed Butrans appropriate patient type/positioning with them & asked if they take phone calls from patients requesting refills of medications or who complain their medication isn't lasting long enough. They both said they occasionally get those calls but give them to Donnie or Alisa (the nurses).
PPLPMDL0020000001	Maple Heights	OH	44137	9/9/2011	Handed back information about Butrans pharmacists' webinars to Jim, pharmacist & his tech. Jim said it is not likely he would participate since no CE's are given for it. I asked that he consider logging on as the information was specifically for pharmacists & would be delivered by a PharmD, not a rep. He still said probably not. Reviewed Butrans savings ability by printing cards at Butrans.com & discussed OxyContin savings cards.
PPLPMDL0020000001	Lakewood	OH	44107	9/9/2011	I told Dr that I've been here many times and we've talked about Butrans. I reminded him he's told me about patients who he thought could benefit from Butrans, yet he hasn't started anyone. I asked if he just does not see a benefit to a 7 day transdermal, he said that he does think it would be a good option for some patients. I asked where he thinks he will use it and he told me about a patient on tramadol who does not tolerate other opioids as well, but needs something more than tramadol. We discussed how to initiate this patient. We discussed managed care for both Butrans and OxyContin and the savings cards. I made sure they have savings cards and medication guides. I asked if he would try just a few patients to see how they do on Butrans and he said he will.
PPLPMDL0020000001	Independence	OH	44131	9/9/2011	Quick call- Roman said that he is identifying Butrans patients & he will continue to keep it in mind. He also said he has enough savings cards for Butrans & OxyContin. Started to ask him about patient type(s) he is thinking about but he stopped me saying he did not have time today. Reminded him of program next week.
PPLPMDL0020000001	Cleveland	OH	44106	9/9/2011	talked to dr about patients he's started on Butrans and why he thought Butrans was a good option for them,dr said these were patients taking tramadol for chronic pain,calling in early for refills and he decided to try Butrans right there.showed inclusion criteria,talked about pain conditions as dr see's all of them,and asked dr if he'll see more patients that he can start on Butrans? dr said yes he will start more.gave dr butrans dinner invitation 9/15/11 and portal invite.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44106	9/9/2011	talked to Juan,MA,as dr was in procedures this am,we talked about patients dr is starting on Butrans and Juan said these are all patients currently taking short-acting opioids,Juan said the one's he's started for the most part are doing great on Butrans and are controlled,Juan said there were a couple patients dr wanted to start on Butrans but patients didnt want to stop taking their pills.showed Juan Butrans fpi noting maintenance of therapy section and discussed patients starting on Butrans still getting some short-acting opioids for breakthrough pain,Juan said dr wont give patients short-acting opioids with Butrans they have option of aspirin or ibuprofen. we talked about patients getting Butrans patient info booklets and focus discussion on application/rotation of Butrans and told Juan to focus on commercial plan patients.
PPLPMDL0020000001	Lakewood	OH	44107	9/9/2011	I asked Dr how his Butrans patients was doing. He said he did not know if the patient continued treatment as he has not heard from her. I asked how many patients does he start on hydrocodone around the clock each week. He said most start PRN but he sees some each week who are looking for an increase in their dose. We discussed starting these patients on Butrans instead and he agreed to try this.
PPLPMDL0020000001	Mayfield Hts	OH	44124	9/9/2011	I asked doc what he remembers about butrans. He said "workers comp?" I confirmed that it is covered on BWC. I also reminded him of the 7 day delivery, CII status, and the patient type. Gave him program invite and formulary grid for butrans.
PPLPMDL0020000001	Independence	OH	44131	9/9/2011	Quick call as I saw Dr Pal at the window. I handed back a Butrans dinner invitation & asked if he thought he would make it. He said probably not. I reminded him this would be the first Butrans program for him & let him know there would be various other physicians & experts attending to discuss experience with Butrans. He said he would see. I asked if he would continue to look for Butrans patients & he agreed.
PPLPMDL0020000001	Parma	OH	44134	9/9/2011	Spoke with MA Fran & Binka & discussed upcoming Butrans dinner program. I asked her if Dr Scanlon ever attends. They said rarely. I let them know this would be the first formal presentation he would hear about Butrans & that various local physicians & experts will be in attendance to discuss Butrans with. I asked that they be sure to mention that to Dr Scanlon when they give him the invite & they agreed. Also had them check the stock on Butrans & OxyContin savings cards & they said they have enough for now.
PPLPMDL0020000001	Beachwood	OH	44122	9/9/2011	Spoke with Tricia & Yvonne (MA) who said Dr Tabbaa had a family emergency & had to leave the country for approximately 3 weeks. I asked about Jim's return. They said they do not know when he is coming back either. Reviewed with them appropriate Butrans patient type & had them check Dr Tabbaa's stock of savings cards. Discussed how the cards are used & who is eligible to use them. Let them know they could be used for new prescriptions or refills as well. Yvonne said she will make a note to be sure to give them out if patients are coming in to pick up prescriptions for Butrans or OxyContin.
PPLPMDL0020000001	Cleveland	OH	44106	9/9/2011	worked pain management dept
PPLPMDL0020000001	Cleveland	OH	44113	9/9/2011	showed dr inclusion criteria,pg.11 visual aid,dr talked about patients with low back pain that he treats with opioids.dr said he will usually start with tramadol in hopes that tramadol will control the pain even though tramadol is short-acting and patients with low back pain have chronic pain he doesnt like to start a long-acting opioid until all other short-acting opioids fail.talked to dr about starting a couple patients with low back pain on Butrans so he can get some clinical experience,dr said he will consider it.dr asked about insurance coverage,focused dr on BWC,commercial and Tricare patients.i asked dr what drawbacks he saw in starting patients on Butrans? dr said nothing at the moment but he doesnt think all of his patients will want to wear a patch so he has to talk to a few patients about Butrans and see what responses he gets.dr had to go so told him i would follow-up next week.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	9/9/2011	discussed Butrans fpi,5 core selling messages with dr,dr focused on transdermal technology and once weekly dosing option of Butrans.we talked about pain conditions he treats,pg.11 inclusion criteria,dr talked about low back pain patients.asked dr to think of a few patients today with low back pain that meet Butrans indication where he could start them on Butrans,dr said he will do that.dr asked about insurance coverage for medicaid patients,discussed PA requirement for Butrans and focused dr on BWC,commercial or Tricare patients.recommended Senokot-S
PPLPMDL0020000001	Westlake	OH	44145	9/9/2011	I asked Dr what his hesitation is to trying Butrans. He said he forgets about it and he asked me again to go over the dosing and initiation. I reviewed this info and asked if he can think of patients who who could benefit from Butrans. He thinks that hardest part will be getting patients to try a patch instead of pills. We discussed that Butrans can be used for opioid naive patients before they start vicodin around the clock. I asked Dr to just try on a few patient, and he agreed. We reviewed managed care for Butrans and OxyContin.
PPLPMDL0020000001	Lyndhurst	OH	44124	9/9/2011	Quick call...Reminded doc of the Butrans indication, 7 day delivery and CII status. I asked him to prescribe Butrans after tramadol failures. Provided initiation guide, formulary grid, and initiations invite. Nothing learned
PPLPMDL0020000001	Lakewood	OH	44107	9/9/2011	I asked Dr if things have gone smoothly with Butrans since the hummana patient not getting approved. He said that most patients seem to be doing well. I asked if he would prescribe Butrans before going to vicodin or percocet and he said he will continue to prescribe it. Reminder that OxyContin is still a long acting option and I said he writes for OxyContin most often in the hospital.
PPLPMDL0020000001	Lyndhurst	OH	44124	9/9/2011	Doc said she thinks of butrans regularly but the problem is the lack of medicare coverage. She thinks it is perfect for elderly patients (i.e. the elderly lady that has taken 2 darvocets/day for the majority of her life). She said that triptans are the typical protocol for the elderly unless they have heart issues. She would like to go to butrans but those are the medicare patients. I asked her about the speaker program but she said she could not come. Reminded her of the commercial insurance. I asked her about younger patients. She said she likes to keep the younger patients off chronic narcotics whenever possible.
PPLPMDL0020000001	Lyndhurst	OH	44124	9/9/2011	I reviewed the butrans indication and positioning and asked her if she has any patients in mind. She said she has the same problem as Dr. reed....lack of medicare coverage. I focused her on the commercially insured patient.
PPLPMDL0020000001	Cleveland	OH	44106	9/9/2011	I asked her about coming to the 9/15 speaker program. She said she was unsure at this time but that Patricia may go as she has been attending more program lately.
PPLPMDL0020000001	Bedford	OH	44146	9/12/2011	met dr for the 1st time,dr is a fellow in pain management clinic,she has seen Butrans in office(materials i have left like initiation guide,patient info booklet,fpi) but hasnt taken time to go through everything.dr said she knew it was a patch but thats it.discussed Butrans fpi,5 core selling messages,showed initiation guide and focused dr on application/rotation section in Butrans patient info booklet.dr said she likes that butrans is a patch and dosed once a week,asked dr if she has any patients today that have 1 of the pain conditions shown on pg.11 visual aid? dr said probably so as they see it all here.asked dr to start a couple patients on Butrans so she can get some clinical experience.dr said she will read through all of Butrans fpi and let me know if she has any questions but will certainly keep Butrans in mind as an option for patients.dr asked about insurance coverage,focused dr on Commercial plan patients.recommended Senokot-S
PPLPMDL0020000001	Beachwood	OH	44122	9/12/2011	Quick call- Positioned Butrans for patients after tramadol who have chronically painful conditions such as spinal stenosis & spondylolisthesis. He said he is keeping it in mind. He also said he is not going to be able to attend my upcoming dinner program. He said he did not have time this afternoon for a long discussion & asked that I try back next Wednesday around lunch time. Spoke with Roberta, one of his MA's & reviewed Butrans appropriate patient type & savings cards.
PPLPMDL0020000001	Cleveland	OH	44106	9/12/2011	Spoke with Ted, nurse, & discussed upcoming Butrans dinner program. He said he would give Dr Malkamaki the invitation & encourage him to attend the program since it would be the first dinner program presentation he would hear on Butrans. Also reviewed with him Butrans indication, dosing, usage, & delivery system. Discussed appropriate patient type, focusing on patients who are on chronic Vicodin or tramadol who are not getting relief from it. Also discussed OxyContin & savings cards for both products.
PPLPMDL0020000001	Cleveland	OH	44106	9/12/2011	talked to dr about Butrans 5 core selling messages,dr focused on once weekly dosing and transdermal delivery.showed dr pg.11 inclusion criteria in visual aid and asked dr if he treats these conditions? dr said yes and talked about patients with low back pain.dr said he will start with non-opioid therapies,when thats not working to control pain he will start patients on tramadol.asked dr to start a couple patients like this on Butrans,showed appropriate patients section and dr said he will think about some patients and see if patients are interested in starting Butrans.focused dr on application/rotation of Butrans showed Butrans patient info booklet and focused dr on commercial plans.OxyContin reminder and formulary coverage for OxyContin showed grid.recommended Senokot-S

	Parma	OH	44129	9/12/2011	Reviewed Butrans 5 core messages with Dr Rossi & reviewed appropriate patient type. She reminded me that she does not like to prescribe opioids. Empathized & asked her if she does have patients who she does prescribe opioids for & she said yes. I asked if some of them have conditions such as spinal stenosis, osteoarthritis, or spondylolysis & showed inclusion criteria. She said yes. I told her these were the types of patients Butrans was studied for safety & efficacy in. I asked what she generally does when a patient is not well-controlled on chronic tramadol. She said Vicodin 3 times per day. I told her those were potential Butrans patients. I asked if she could see herself prescribing Butrans for those types of patients. She said she would. Reviewed dosing & let her know the patient type we were talking about could start at the lowest dose, 5mcg/hr. Discussed titration ability after 3 days to a maximum 20mcg. She asked about supplemental analgesia & I reviewed ability to supplement with opioid or non-opioid medications. She asked if Vicodin could be used for supplemental. I told her yes. Reviewed CII & abuse/addiction potential. Also discussed managed care & savings cards for eligible patients. I asked again if she would try Butrans on this type of patient & she again said she would. Discussed OxyContin q12h for appropriate patients beyond Butrans 20mcg. Invited her to upcoming program. She said she did not know if she could attend.
PPLPMDL0020000001	Northfield	OH	44067	9/12/2011	Gave on-duty pharmacist the information on upcoming Butrans pharmacists' webinars & encouraged her to log-on. She said she would. Let her know the information would be delivered by a PharmD & that she would have the opportunity to ask questions as the format is an interactive one. She said she would also make a copy & leave one for the other pharmacist. Discussed Butrans appropriate patient type & also discussed e-voucher automatic savings & OxyContin savings cards along with eligibility requirements.
PPLPMDL0020000001	Parma	OH	44134	9/12/2011	Spoke with Heather (pharmacist) & discussed pharmacists' webinar information sheet. Let her know this would be a good opportunity to get her questions answered by a PharmD. Described interactive nature of the program & asked if she thought she might log in. She said she thinks she will & also said she would leave the information for Allene. Discussed Butrans & appropriate patient type. She said she has filled a few prescriptions for it. Reviewed dosing & delivery system. Also discussed OxyContin savings cards for eligible customers.
PPLPMDL0020000001	Beachwood	OH	44122	9/12/2011	Quick call- Alisa said Dr Warren was slammed but that she allowed me back because she knows I will be respectful & not take a lot of time. I handed Dr Warren an invitation for the upcoming dinner program & asked if he thought he might attend. He looked at it, studying the details & said he might. I let him know there would be various other physicians & experts in attendance, giving him a great opportunity to learn more about Butrans & who the appropriate patient might be. Also let him know this would be a good opportunity to get questions answered from a fellow physician. He said he does like to learn & if his schedule allows, he will attend. I asked him to register ASAP as spots for the program are filling up & he agreed.
PPLPMDL0020000001	Westlake	OH	44145	9/12/2011	I asked Dr to tell me where he has been using Butrans. He said he started a patient who did not tolerate other opioids so he tried Butrans. He said he would consider any patient for Butrans, and every patient is different. I asked him to continue to think of Butrans when he sees commercial insurance and he agreed.
PPLPMDL0020000001	Lakewood	OH	44107	9/12/2011	Ran into Dr in hall coming from hospital. I reviewed that most commercial patients will have access to Butrans at around a \$15 copay. He said he will keep trying to prescribe. I asked if he knows which insurance they have when he goes into a patient room. He said it is in their chart and he usually knows if they are a working patient. Reminder that OxyContin is an option when Butrans may not be covered for Medicaid patients.
PPLPMDL0020000001	Independence	OH	44131	9/12/2011	Reminded Deb of our Butrans discussion at our last lunch & about the upcoming Butrans dinner program. I asked if she had given either more thought since my last visit. She said she has not yet prescribed Butrans due to lack of familiarity & comfort with it but does think she will attend the dinner program on the 15th. I asked if she wanted me to register her & she said she had the paperwork filled out & would register herself this evening. Discussed that this will be an excellent opportunity for her to discuss Butrans with other practitioners & also to learn more about who is & who is not appropriate for Butrans. She said she is looking forward to it as she does want to learn more about Butrans for her patients.
PPLPMDL0020000001	Cleveland	OH	44109	9/12/2011	talked to dr about the couple patients he has on Butrans, dr said both patients were taking several opioids not controlled and wanted something else, dr thought Butrans would be a great option as its once a week dosing and dr likes that Butrans has transdermal delivery. I asked dr if he see's pain conditions, pg.11 inclusion criteria? dr said he does; asked dr if he will see any patients this afternoon or this week that he can start on Butrans? dr said he has 2 patients in mind since our discussion today is helping him think more about his patients and who could try Butrans, asked dr if he could see any drawbacks with starting patients on Butrans? dr said none in his mind but he thinks it's more patients that don't want to wear a patch every week and not believing it'll work. focused dr on application/rotation info in patient info booklet. focused dr on BWC and commercial insurance
PPLPMDL0020000001	Cleveland	OH	44195	9/12/2011	worked neurology dept- left Butrans fpi, initiation guide, patient info booklet, 9/15/11 dinner program invitation, portal invite and formulary grid for Butrans and also left OxyContin fpi, conversion guide and formulary grid - for all neurologists - Dr. Krieger, Dr. Mays, Dr. Spears and Dr. Shilman. worked rheumatology dept- left Butrans fpi, initiation guide, patient info booklet, 9/15/11 dinner program invitation and portal invite for Dr. Calabrese, Betsy Kirschner, NP, Patty Paczos, PA, Dr. Chatterjee, Dr. Long and Dr. Deal - none of the doctors would see rep's I had to leave info at receptionist desk who gave to doctors medical secretaries to put in their boxes.
PPLPMDL0020000001	Cleveland	OH	44114	9/12/2011	talked to Joel, Pharmacy Manager, about patients he see's that are taking short-acting opioids and if he provides patient counseling? Joel said he does that and has given a few Butrans patient info booklets to patients. no scripts for Butrans yet, asked Joel to continue giving booklets to patients, showed Butrans visual aid and discussed 5 core selling messages and Joel said the once weekly dosing and Butrans being a patch were both benefits he saw and would share with patients, we talked about Butrans formulary coverage focused Joel on BWC and commercial plan coverage, recommended Senokot-S
PPLPMDL0020000001	Lakewood	OH	44107	9/12/2011	Spoke with Chuck, I asked about the movement with Butrans he's seen a few scripts from Cleveland clinic, I asked if it was nageeb and he said it rings a bell. I asked if patients have had a lot of questions about Butrans and he said he hasn't gotten any. We think the medication guides for patients help to tell them everything. We reviewed the managed care for Butrans and OxyContin.
PPLPMDL0020000001	Northfield	OH	44067	9/12/2011	Spoke with Maggie (nurse) & delivered Butrans 5 core messages. She said she recognizes the name from working with Dr Ortega on Tuesday mornings at this location. She said she knows that he uses a lot of Butrans for his patients. Discussed that Cindy had sent me over from that office to introduce Butrans to Dr Marshall as she thought he may be interested in hearing more about it. Told her about upcoming dinner program & asked if she thought he would attend. She said probably not but that she would give him the invitation & tell him that he should go because she thinks he would have a lot of patients who could benefit from Butrans. She worked with me to set up an appointment with him in October & also let me know about another office location he has in Garfield Heights which she said is "less busy" than this location so my opportunities to see him may be greater there.
PPLPMDL0020000001	Lakewood	OH	44107	9/12/2011	Quick call with Aduawa, I asked about the movement of Butrans. She did not know wh, but said she has seen it given. I reviewed the medication guide and what to tell patients. Steady state in 3 days and proper use and application. We reviewed Butrans and OxyContin savings cards.
PPLPMDL0020000001	Cleveland	OH	44115	9/12/2011	talked to George, Pharmacist, about Butrans 5 core selling messages and George talked about Butrans being a patch and once weekly dosing. I asked George if he provides patient counseling for those patients taking opioids? George said they do talk to patients, asked George to discuss Butrans with patients and give butrans patient info booklets so they can talk to doctors, George said ok. focused George on BWC and commercial insurance plans, recommended Senokot-S
PPLPMDL0020000001	Bedford	OH	44146	9/13/2011	Spoke with pharmacist Ed & reviewed Butrans with him. Gave him an information sheet on pharmacists' webinars for Butrans & encouraged him to log on to interact with other pharmacists & hear about Butrans from a PharmD. He said he would do this. Reviewed with him appropriate patient type, including those who take chronic Vicodin or tramadol who are not well-controlled. Also discussed savings through e-voucher & OxyContin
PPLPMDL0020000001	Cleveland	OH	44106	9/13/2011	talked to Matthew, Pharmacist, as Steve, Pharmacy manager was out for the day, about Butrans scripts and stocking. Matthew said he's not seen any scripts nor do they have Butrans in stock. Matthew said I should follow-up next Tuesday with Steve to understand why he's not ordered Butrans. showed Matthew Butrans 5 core selling messages, Matthew talked about transdermal delivery and once weekly dosing of Butrans and said he feels these are the 2 features that stand out to him. asked Matthew if he would recommend Butrans to patients by giving them the Butrans patient info booklets, when they are providing patient counseling on opioids and patients are telling them their short-acting opioids aren't controlling their pain, Matthew said he will do that. discussed formulary coverage. gave OxyContin reminder for appropriate patients and discussed formulary coverage for OxyContin. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	9/13/2011	talked to dr about inclusion criteria, pg.11 visual aid, asked dr how she managed chronic pain for these conditions. dr talked about several non-opioid therapies she would do 1st, then dr said she would always start patients out on tramadol in hopes that their pain would be controlled with that medication. dr said she knows these are all chronic pain conditions and tramadol is a short-acting opioid but she would still do it that way. dr said she thinks after tramadol fails she would start patients on Butrans, told dr that was great she thought of Butrans there and did she have patients like this where she could start them on Butrans today and the rest of the week? dr said she's sure she does. dr said she's comfortable with butrans and will start more patients. focused dr on BWC and commercial plan patients. OxyContin reminder for appropriate patients and discussed formulary
PPLPMDL0020000001	Independence	OH	44131	9/13/2011	I handed Dr Sundaram a Butrans dinner invitation & asked if he would attend. He said because it is close by, he might. I let him know that various physicians & experts would be there to discuss Butrans & ask/answer questions, so it would be a good opportunity to discuss Butrans experience with other physicians. He said this was a good point & said that he can't guarantee that he will be there, but that he does plan to attend. Reminder of appropriate patient type.
PPLPMDL0020000001	Cleveland	OH	44113	9/13/2011	talked to dr about starting more patients on Butrans, like the one's he's already started, dr said some weeks he has a couple patients in mind for Butrans and other weeks he doesn't, dr said he has been thinking of patients who are taking the max amount of vicodin, as we have discussed in past many times, and not controlled and instead of giving them ultram ER he's starting them on Butrans. talked to dr about starting patients earlier, on Butrans, asked dr if he saw any drawbacks in doing so? dr said no he didn't, dr said if patients are controlled on medications though he's not going to convert them to Butrans, we talked about patients calling in earlier every month for refills of short-acting opioids or asking him in office for something different, dr said that made sense and he will keep it in mind. focused dr on BWC and commercial insurance plans, recommended Senokot-S
PPLPMDL0020000001	Westlake	OH	44145	9/13/2011	Quick follow up in Lakewood, I asked how many patients he is seeing tonight who might benefit from Butrans. He said there might be a one or two, he will have to check. I asked if he would start those 2 patients today and he said he will try.
PPLPMDL0020000001	Cleveland	OH	44103	9/13/2011	talked to dr about patients she's started on Butrans and if she could think of more patients like this? dr said she is talking to a lot more of her patients but has really been focused on the patients maxed out on percocet and asking her for more pills but now after our discussion of the inclusion criteria, pg.11 visual aid, dr said she's thinking of patients taking tramadol for arthritis that aren't controlled. talked about initiation of Butrans, focused dr on commercial but dr has a lot of Medicaid and said she knows the PA requirement for Butrans so it's easy for her to complete. gave OxyContin reminder and recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44195	9/13/2011	talked to Stan, Pharmacist, about Butrans stocking and scripts they are seeing here. Stan said he knows they are filling scripts but doesn't know who's writing them. Stan said he doesn't have time to look that info up today and I should talk to Curt, Pharmacy manager about that info. Curt wasn't there today. Stan said they have been ordering Butrans so he knows doctors are writing Butrans as they have all 3 dosage strengths. showed Stan Butrans patient info booklet, asked if he and other pharmacists could give patients this booklet when filling scripts if they didn't get one from doctors. Stan said he would do that and we talked about formulary coverage for Butrans. we discussed OxyContin being an appropriate option for patients, confirmed stocking and talked about formulary coverage. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44130	9/13/2011	I asked Dr Fedorko if he is still planning to attend the Butrans dinner program on Thursday. He said he is. He then added that his wife does not want to come with him. I told him that that was good because it is only for physicians, NP's, & PA's. He said he is always allowed to bring her & he lists her as his office manager. I told him this was not my rule, but PhRMA guideline & that our company adheres to all guidelines. He said then I will never get anyone to any of my programs. I asked him if he would like me to cancel his registration but he said no but he might not come. Positioned Butrans for patients with chronic conditions causing pain who are not well-controlled on their short-acting medication.
PPLPMDL0020000001	Westlake	OH	44145	9/13/2011	I reviewed our last conversation about trying Butrans before going to vicodin around the clock. He agreed that it could be a good option. I reminded him again that the medication booklets make it easy to explain Butrans to patients and asked if he would try a few patients to see how they do. He agreed. Reminder about focusing on commercial insurance and that OxyContin is another option for Med D AARP patients.
PPLPMDL0020000001	Westlake	OH	44145	9/13/2011	Dr said he has not started any new patients lately, I asked why, he said he just hasn't thought of it. I showed the inclusion criteria and asked if he sees these types of patients, he does. I asked if would consider Butrans for these types of patients and he agreed.
PPLPMDL0020000001	Lakewood	OH	44107	9/13/2011	Spoke with Heather, I asked about the success with Butrans and she says they might have sent some of the Butrans back, the 20mcg. I reviewed the initiation guide and that 5 and 10mcg are the starting doses so those were important to have in stock. We reviewed the medication guide and what to tell new patients. We discussed the savings program for both Butrans and OxyContin.

	Parma	OH	44129	9/13/2011	Dr Roheny saw me at the window & told me excitedly that he wrote a Butrans prescription. I told him this was great news & asked him to tell me about the patient. He said he could not remember off the top of his head who it was but that he knows she had private insurance. He said he did give her a savings card with the prescription. He asked Loraine who the patient was because he couldn't think of the specifics as far as why he chose Butrans for her but Loraine didn't know. I asked if he plans to continue to try patients on it to gain clinical experience & he said yes.
PPLPMDL0020000001	Cleveland	OH	44113	9/13/2011	invited laura,np,to 9/15/11 butrans dinner program,laura said she appreciated all of the info but her last day of work here is this friday,sept.16th so all she's thinking of right now is finishing up this week seeing patients.asked laura to keep Butrans in mind as an option for patients that meet indication,gave initiation guide and formulary grid and briefly discussed pain conditions.pg.11,where Laura could consider patients for butrans.laura said ok and thanked me for info.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	9/13/2011	talked to dr about Ryzolt as a once daily dosing option for patients,dr said he is writing Ryzolt and will continue prescribing as its not scheduled.dr said he is keeping Butrans in mind if he does decide there's a patient he wants to start on it but at this time he's only considering Ryzolt for patients.we talked about patients with osteoarthritis that are taking tramadol daily yet not controlled,asked dr to convert them to Ryzolt,dr said he will do that.discussed Ryzolt value cards and recommended Senokot-S
PPLPMDL0020000001	Mayfield Heights	OH	44124	9/13/2011	Spoke to Anthony about the stocking of butrans and oxycontin. He said he has all the oxycontin stocked but had not seen any butrans scripts though he does have it in stock. I explained the positioning and the strengths. He asked about insurance. Explained the commercial insurance and the savings cards. He asked about the use of the 20mcg dose. I explained that its only a titration dose. Provided patient info guide.
PPLPMDL0020000001	Solon	OH	44139	9/13/2011	Handed Dr Zaidi invitation for upcoming dinner program for Butrans. Let him know this could be his perfect opportunity to discuss Butrans with other experts & physicians to get some of his questions answered about their experience with Butrans. Also told him it may help him identify where Butrans may play a role for him in his practice given his patient population. He said that he would like this opportunity & would be interested in attending the program if his schedule permits. Let him know about the limited availability of slots for the program & asked him to register himself ASAP to ensure he gets a place. Also discussed Butrans as a possible option for some of his newer patients like those who are not already on a high dose of opioids & who are not getting relief from their current medication. Offered Portal invite as an alternative to live program. Discussed OxyContin savings cards & asked if the patient he had told me about was able to use the card every two weeks without issue as we discussed. He said he thinks it must have worked out OK for him.
PPLPMDL0020000001	Cleveland	OH	44124	9/13/2011	I explained to doc the who the appropriate butrans patient is - after tramadol failures and/or before going to hydrcodone ATC. I asked him to attend the 9/15 speaker program to learn more about butrans. I reviewed the formulary coverage for butrans and oxycontin including BWC.
PPLPMDL0020000001	Brooklyn	OH	44144	9/13/2011	Caught Dr Deeb at the window. Handed him his Butrans dinner program invitation & let him know this would be a great opportunity to speak with other physicians & experts about Butrans. I asked if he thought he would be able to attend. He said there was a chance that he would be able to, but that his wife may have other plans for him. He said if she does not need him to take care of something for her, he would be able to go. Let him know this would also help him determine who might be & might not be ideal Butrans patients in his practice & reminded him of his interest in Butrans from when I first introduced it to him months back. He said he would do his best & then walked away.
PPLPMDL0020000001	Mayfield Heights	OH	44124	9/13/2011	Window call.....I asked doc how patients are doing on butrans therapy. She said everything is great. I informed her that the savings cards are also available online for download. Invited her to the 9/15 speaker program.
PPLPMDL0020000001	Cleveland	OH	44130	9/13/2011	I handed Dr Diab an invitation for the program for Butrans on Thursday evening. I told him this would be an excellent opportunity for him to speak with other area physicians & experts about his & their experience with Butrans. Also discussed how he could learn more about who is & who is not an appropriate Butrans patient. I asked if he thought he would be able to attend. He said he would like me to tentatively mark him as a "yes" for attending. I let him know of limited availability of seating for the event & asked him to register ASAP to ensure he gets a spot. Also reminded him of Butrans & OxyContin savings cards.
PPLPMDL0020000001	Westlake	OH	44145	9/13/2011	Spoke with Darrel, I asked about the feedback for Butrans and he said he hasn't heard much from patients. He said that it seems to be getting covered by managed care as well. We discussed letting the patients know that steady state is in 3 days. We reviewed the savings program for Butrans and OxyContin.
PPLPMDL0020000001	Parma	OH	44134	9/13/2011	I asked Dr Hernandez where OxyContin fits into his practice now that he has the option of Butrans & he has found such a big place for it. He asked if I wanted the honest answer & I told him I did. He said he is trying to get as many patients off OxyContin as he can. I asked him why. He said that when someone is on OxyContin, they are not supposed to operate heavy machinery or drive, but people need pain relief so they do that anyway when they take it. I asked him if he finds that for all opioids & not just OxyContin. He said yes that is true. He went on to say that is why he wants everyone on buprenorphine, like Butrans. I reminded him that Butrans still works on the mu opioid receptor. He said he knows. He went on to tell me about how BWC, starting in January, will no longer pay for Suboxone for pain, just addiction. He said that means patients who are getting good relief on Suboxone will have to be switched to something else, where he would choose OxyContin if he has to. But he added that sometimes patients need Suboxone because of their former addiction to OxyContin. He did say that he has been getting consistently good results with Butrans & that patients really like it. He added that his patients report that side effects subside after a few days. I told him we do not have data that suggests that as it has not been
PPLPMDL0020000001	Mayfield Hts	OH	44124	9/13/2011	Window call.....I talked about the 9/15 speaker program about butrans. I asked him to come to learn more about the proper selection of butrans patients. He said he thinks he has something that night but he will check.
PPLPMDL0020000001	Euclid	OH	44117	9/13/2011	I asked doc if he considered attending the speaker program this thurs. He said he can't - he works late on thurs and that wednesdays are best for him. He did say that he wrote one script of butrans and that he would let me know how things go. I reminded him that BWC is covering butrans. He said it was a workers comp patient.
PPLPMDL0020000001	Parma	OH	44129	9/13/2011	I told Dr Ortega I noticed that he registered for the Butrans program & asked if he was really coming. He asked me to remind him of the details of when/where it is, so I reviewed that with him. I let him know that a lot of physicians & experts would be there to share their experiences & questions about Butrans & encouraged him to attend. He said he will definitely be there as he learned a great deal from the last program. I let him know it would help him better place Butrans in his practice & he agreed. Also reminded him of savings cards for Butrans & OxyContin & recommended Senokot-S.
PPLPMDL0020000001	Cleveland	OH	44103	9/13/2011	talked to Valerie,LPN,as dr isnt seeing reps anymore due to new policy with NEON.talked to Valerie about 5 Butrans core selling messages,Valerie said there are hundreds of patients taking tramadol,vicodin and percocet daily and that she thinks Butrans would be a great option for many of their patients since so many people call daily for refills and they are calling earlier every month saying their short-acting opioids arent controlling their pain.showed Valerie Butrans inclusion criteria.pg.11,discussed initiation of Butrans with Valerie and asked Valerie if he would flag patient charts for commercial plan patients that are like we discussed that she can give dr and suggest Butrans.Valerie said majority of doctors patients are Medicaid and she's not sure if he'll listen to her,but she'll try it and see what happens.told Valerie to focus on commercial,BWC and Tricare and showed formulary grid.left 9/15/11 Butrans dinner invitation for dr and portal invite and recommended Senokot-S
PPLPMDL0020000001	Parma	OH	44129	9/13/2011	I asked Dr Tolentino if she was planning on coming to the Butrans dinner program on Thursday. She said she does plan to come & asked if her husband, a physician, can come with her. I asked if he had an interest in Butrans & she said yes. I told her that attendance was limited to physicians, NP's, & PA's, so his coming should not be an issue. I asked if she had registered yet. She said she has not yet & asked me if I could register, so I told her I could. I let her know this would give her a good opportunity to speak with other area physicians & experts about Butrans, learning more about what patient type may be appropriate for it. She said that is what she is hoping for. Also gave her Senokot-S & Colace samples & reminded her of savings cards for OxyContin.
PPLPMDL0020000001	Cleveland	OH	44106	9/14/2011	talked to Patty,Pharmacist,about Butrans stocking and Patty said Margie,Pharmacy supervisor ordered Butrans initially when we launched but they never saw any scripts and medication was sitting on shelf so she thinks Margie sent it back? Patty said she wasnt sure and I had to follow-up with Margie next week as she's out this week.we talked about Butrans 5 core selling messages,Patty talked about Butrans once weekly dosing and transdermal technology and I asked if Patty provided patient counseling for those patients taking opioids daily but arent controlled? Patty said yes they do provide patient counseling.I asked Patty to recommend Butrans,give booklet so patients can discuss Butrans with their doctors.Patty said she'll do that and I should also talk to Margie about that as she's the supervisor.discussed OxyContin stocking and formulary coverage and recommended Butrans
PPLPMDL0020000001	Cleveland	OH	44114	9/14/2011	talked to dr about the patients he's started on Butrans and asked if he had more like them that he could start on Butrans this week? dr said he probably does and will keep Butrans in mind.showed dr pain conditions.pg.11 visual aid and asked him to think of these conditions this week and when he see's appropriate patients for Butrans start them and focus on BWC,dr said he will do that and no issues so far with patients on Butrans.OxyContin reminder,recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44104	9/14/2011	gave dr butrans 9/15/11 dinner invitation and portal invite and asked dr if he's had any patients in office that he felt were appropriate to start on Butrans? dr said noone lately but he knows who the appropriate patient is,i showed dr Butrans visual aid and discussed appropriate patients.dr said biggest challenge is majority of patients here are medicare and Butrans isnt covered.talked about commercial plan patients with 1 of the pain conditions shown on pg.11 and starting patients on Butrans.dr said he will keep Butrans in mind. discussed formulary coverage and recommended Senokot-S
PPLPMDL0020000001	Warrensville Heights	OH	44122	9/14/2011	Introduced myself & Purdue's products to Dr Amaro. Presented Butrans 5 core messages & asked his initial thoughts. He said it sounded interesting. Discussed appropriate patient type & importance of appropriate patient selection. Also discussed Butrans as a CIII opioid & reviewed abuse/addiction potential. Dr Amaro said he would be interested to hear feedback from other physicians on how they use it as he relies on that as a newer physician. He said he would not be able to attend the dinner program tomorrow night, although he wishes he could. Let him know I would invite him as other opportunities to learn present. Discussed OxyContin q12h for appropriate patients beyond Butrans range & recommended Senokot-S for medication-induced constipation, discussing dual MOA.
PPLPMDL0020000001	Parma	OH	44129	9/14/2011	I asked Dr Chagin what his real hesitation is with prescribing Butrans. He said patients are already on short-acting around-the-clock opioids & those patients don't want to switch. I asked him what about patients who are saying they are not well-controlled on their short-acting- wouldn't it make sense to try something different instead of more of the same? He said this was a good point. I asked him if he could see himself using Butrans for patients who are not well-controlled on 2-3 tramadol per day. His face lit up & he said yes. He said that would be perfect. I agreed that this patient type would be ideal. Discussed CIII & abuse/addiction potential. He asked me if I had access to a pain contract that he could use. Discussed various resources & gave him a USB for PurdueHCPC.com & also told him about Partners Against Pain website. He was very grateful & invited me to come back this afternoon to help him navigate. I agreed. Discussed appropriate patient type further & went through patient information booklets. I asked if he will start a few of this type of patient on Butrans & he agreed. Discussed OxyContin 7 available tablet strengths & q12h dosing. Also invited him to the program tomorrow & he said he will attend. I asked him to register & he agreed.** Returned after practice hours to assist Dr Chagin in navigating through Partners Against Pain resources to find a pain contract for him to implement for his practice as he requested. **
PPLPMDL0020000001	Warrensville Heights	OH	44122	9/14/2011	Reviewed 5 Butrans core messages with Dr Garwood & asked his thoughts. He said he does think it sounds like a good option. He asked me if a patient who has a fracture who he had prescribed Vicodin or Percocet 4 times per day would be a good patient to put on Butrans. Discussed indication & asked what his definition of "chronic" is. He said probably at least a month. I told him he could use his clinical judgment on whether a patient would be in pain for a long period of time, but if the patient's condition could not be considered "chronic", they may not be the right patient. Discussed appropriate patient type & asked if he would consider using Butrans if a patient is not well-controlled on tramadol 2-3 times per day. He said he thinks so. He said he refers to pain management downstairs & uses Dr Dimitri a lot. I mentioned the policy of their area of no meetings with reps & he said that he will put in a good word for me & ask Dr Dimitri to at least be able to come speak with him about Butrans. Showed demo kit. He asked about side effects so we reviewed spread in core visual aid. He asked if Butrans could be cut or if the patient could cover it when taking a shower to protect it. I told him patches should not be cut & that covering with Bioclusive or Tegaderm-type covering is OK if adhesion is an issue. Also discussed application & heat warning. He asked about HB 93. I told him I do not have details on it. Discussed OxyContin q12h for appropriate patients beyond Butrans.
PPLPMDL0020000001	Cleveland	OH	44120	9/14/2011	talked to Chuck,Pharmacy Manager,about Butrans stocking and if they have seen any scripts for Butrans.Chuck said he hasnt ordered Butrans because he's not seen any scripts for Butrans.Chuck said doctors will write OxyContin so they have that in stock but no Butrans.Chuck asked about Medicaid coverage as thats majority of their patients,discussed Medicaid coverage for Butrans,told Chuck to consider commercial,BWC and Tricare patients for Butrans.Chuck said they have small percentage of those patients but he'll keep in mind.showed Chuck Butrans 5 core selling messages,chuck talked about Butrans being once weekly dosing option for patients and transdermal technology.I asked Chuck to give patients Butrans patient info booklets when they provide patient counseling on opioids if patients arent controlled on short-acting opioids.Chuck said he would do that.discussed OxyContin appropriate patients and formulary coverage.recommended Senokot-S

PPLPMDL0020000001	Warrensville Heights	OH	44122	9/14/2011	Reviewed 5 core messages for Butrans with Dr Mueller. I reminded him of our last lunch conversation when he told me that he liked the more steady release of medication with Butrans. I told him that this does not mean that Butrans is any less abusable, any more efficacious, or any more safe than any other opioid & that he should use just as much caution in prescribing as he would any of the others. He assured me he will. Reviewed appropriate patient type for Butrans & discussed patients who are not being well-controlled on short-acting opioids if their condition is chronic. He said that he doesn't generally prescribe pain medications & that he lets pain management "deal with that". Discussed importance of appropriate patient selection. Showed demo & reviewed application, rotation, & heat warning. He asked me about HB 93. I told him I have no details about it. He said it seems like narcotics are being limited for primary care physicians & asked if he should be concerned. I told him he would have to research this but that the primary goal of the bill is to reduce "pill mills". He said that was a good idea & I agreed. Reminded him, however, that there are legitimate patients who are in pain who would not have bad intentions with medication & those are the patients I am an advocate for. He said that was true. Reminded him of OxyContin q12h for appropriate patients beyond Butrans & recommended Senokot-S for medication-induced constipation.
PPLPMDL0020000001	Warrensville	OH	44122	9/14/2011	Reviewed 5 Butrans core messages with Dr Rakowsky. Spent time going over appropriate patient type & discussed more "moderate" pain side. I asked if she would try Butrans after tramadol, instead of going to Vicodin or Percocet. She said she generally doesn't prescribe any of those. She went on to say that she has a hard time wrapping her mind around a more "moderate" medication in transdermal form. I asked her to clarify. She said usually, "you have to be pretty tolerant or addicted to need a patch" & used fentanyl as an example. I asked if it surprised her that Butrans is CIII, but added that it still does carry abuse/addiction potential as it works on the mu opioid receptor. She said it is surprising. She said that is probably my biggest hindrance in getting doctors to prescribe. I told her that while many physicians & patients are having success with Butrans, some have expressed this to me as she is. She said she will have to get used to thinking of Butrans as "not as strong". I told her again that just because it is used in "moderate" pain, does not suggest that it is any less strong than any other opioid. She asked if Butrans could be cut. Told her this has not been studied & therefore is not recommended. Discussed application & heat warning. Also discussed OxyContin q12h for appropriate patients beyond Butrans & recommended Senokot-S for medication-induced constipation.
PPLPMDL0020000001	Cleveland	OH	44106	9/14/2011	dr was a fellow,just joined anesthesia dept and is now an attending dr,we discussed Butrans fpi,5 core selling messages,initiation guide,appropriate patients for Butrans and focused on pain conditions they see and treat in dept and how Butrans could be an option for these patients.dr said he will read through all of the info and asked about insurance coverage for medicaid? focused dr on commercial plan patients and discussed medicaid pa requirements with dr.talked about appropriate patients for OxyContin and formulary coverage and recommended senokot-s
PPLPMDL0020000001	Parma	OH	44129	9/14/2011	Spoke with pharmacist & presented information on Butrans pharmacists' webinars. She said she would look into them & would copy it for the other pharmacists to leave a copy for them. Discussed appropriate patient type, including patients who call too soon for refills or say their short-acting medication is not controlling their pain. She said it is common & many times those people are difficult to deal with. I let her know Butrans may be an option for some of them, if appropriate. Also discussed automatic savings through e-voucher & OxyContin savings cards.
PPLPMDL0020000001	Warrensville Heights	OH	44122	9/14/2011	Reviewed Butrans core messages with Dr Wolkoff. He said he is interested in hearing more about Butrans at the program as he is registered to attend tomorrow's event. Discussed appropriate patient type & showed demo. He said it sounds like a good idea. He said as a newer doctor, he would like to speak with other physicians who have had experience with Butrans. I asked if there were any specific questions that I could answer. He said he just wants to hear from people who have patients on it. I told him the program would be an excellent time to do that. Reviewed CIII & abuse/addiction potential & discussed importance of appropriate patient selection. Discussed patients who have a chronic issue causing pain who are not well-controlled on NSAID's or COX-2's or tramadol 2-3 times per day. He said he will keep that in mind going forward. Also discussed OxyContin for appropriate patients beyond Butrans as we talked about appropriate range of patients. Recommended Senokot-S for opioid-induced constipation & discussed dual MOA.
PPLPMDL0020000001	Cleveland	OH	44106	9/14/2011	asked dr if he will see patients this afternoon that he can start on Butrans,like the one's he's already started on Butrans? dr said he probably will dr said he likes that Butrans is a patch and dosed once a week dr said Butrans is easy in his eyes to get patients started on Butrans.we talked about pain conditions,pg.11 visual aid,that dr treats in pain management dept and how Butrans is an option for patients.dr said he will continue starting more patients on Butrans,focused dr on starting patients earlier in therapy,instead of refilling short-acting opioids,dr said he will consider starting patients earlier.we talked about commercial plan insurance and patient savings cards,recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44104	9/14/2011	gave dr Butrans 9/15/11 dinner invitation and portal invite as she said that majority of her patients taking short-acting opioids are controlled,no complaints so no need to change their medication.I told dr that was great that her patients were controlled and showed dr Butrans visual aid,pg.11,discussed inclusion criteria with dr and asked if she treats these conditions? dr said yes,asked dr how she manages chronic pain for these conditions? dr talked about all non-opioid therapies 1st then starting patients on tramadol.I asked dr if she could start a couple patients on Butrans after that 1st dose of tramadol isnt controlling patients pain? dr said she will consider it but hasnt had anyone lately,discussed formulary coverage and focused dr on commercial plans,recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44104	9/14/2011	talked to dr about pain conditions she treats,showed pg.11 inclusion criteria,asked dr to think of a few patients today that have these conditions and start them on Butrans.dr said she hasnt really thought of Butrans but knows its an option.dr said she's just frustrated with her pain patients and its easier to refill short-acting opioids.we talked about initiation of Butrans and thinking of a couple patients with 1 of the pain conditions listed on pg.11 and starting them on Butrans.dr said she will consider it.I told dr to focus on commercial plan insurance,recommended Senokot-S
PPLPMDL0020000001	University Hts	OH	44118	9/14/2011	Quick call...reminded doc of the Butrans patient type and asked if he has any BWC patients that might benefit from once weekly dosing. He took the initiation guide and studied it. He said maybe.
PPLPMDL0020000001	Parma	OH	44129	9/14/2011	Spoke with Dawn (nurse & OM) & asked about Jen's experience with Butrans & if she thought any of the group would come to the upcoming program. She said that Dr Nickels still has not "given them the green light" to prescribe. I asked her if she is certain of that & she said yes & until he does, there is no way Jen will prescribe. I asked if I could see Jen to talk to her about it but Dawn said she is too far behind. I asked what she thought Dr Nickels was waiting for & she said she does not know. She said that she also does not think that any of them are able to make it to the program & that Laura just quit the practice. She said Deb Torres (PA) will be coming to take her place at Grace 2-3 days per week. She also asked if I called on Dr Chagin, Dr Gigliotti, Dr Wolanin, Drs Rutkowski & Dr Ara Kallibjian. I told her that I do call on most of them. She said to look into Dr Kallibjian to see if he has interest in Butrans as she thinks that might be a practice that would use it. I thanked her for the recommendations. Also discussed Ryzoil value cards, which she said she has enough of still.
PPLPMDL0020000001	Bedford	OH	44146	9/14/2011	Dr Moufawad said he had no time today. I asked him if he was going to come to the dinner program tomorrow. He stopped & looked in his mobile calendar. He entered it into his phone & asked who would be there. I told him 14 practitioners were registered & also let him know this would be a great opportunity to discuss Butrans with others who have experience using it. He said he will be there. I told him it would also be a great way to learn more about the types of patients who he sees who may be appropriate for Butrans as well as some who may not be good candidates. He said he is looking forward to clearing some of that up.
PPLPMDL0020000001	Cleveland	OH	44104	9/14/2011	talked to Fonda,office mgr/ma to dr pandit,as dr wasnt able to see me this am.Fonda said dr started 1 patient on Butrans,we talked about patient info booklet application/rotation info and Fonda said she gave patient the booklet and it was helpful.asked Fonda if dr had other patients like this 1 that they could start on Butrans? Fonda said he has a lot more patients he could start but challenge is majority are medicaid and medicaid requires a PA so its more work.we talked about focusing on commercial and tricare patients and Fonda said to stop back next week to talk with dr more.gave 9/15/11 dinner invitation for butrans dinner program and portal invite,to fonda,for dr.recommended Senokot-S
PPLPMDL0020000001	University Heights	OH	44121	9/14/2011	I asked doc if he has identified any patients appropriate for butrans - moderate to severe chronic pain requiring ATC analgesia. He said, "I told you, they want pills. Plus its more expensive than pills. they don't want to pay".
PPLPMDL0020000001	Cleveland	OH	44106	9/14/2011	I explained to him that with commercial insurance and a savings card, patients can pay around \$15-\$20/month. Nothing else gained.
PPLPMDL0020000001	Cleveland	OH	44106	9/14/2011	worked apm dept and out-patient pharmacy
PPLPMDL0020000001	Cleveland	OH	44106	9/14/2011	dr said he's started a few patients on Butrans,but needs to start more.dr said its just spending a few minutes with patients and explaining what Butrans is instead of refilling tramadol.talked to dr about how he explains Butrans to patients,discussed titration with dr,told dr to give patients Butrans patient info booklet showed dr application/rotation of Butrans section and dr said steve,rn,or lisa,patient care coordinator,would be the one's to give booklets to patients,focused dr on commercial plan patients and dr asked about medicaid coverage discussed medicaid's PA requirements for Butrans.asked dr if he will see any patients today and rest of the week where he can start them on Butrans? dr said yes he's sure he will and he will consider Butrans for patients he knows its an option.gave OxyContin reminder and discussed formulary coverage for OxyContin,recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44106	9/14/2011	talked to dr about patients he's started on Butrans,talked to dr about titration and discussion of patient info booklet application/rotation section with patients before they leave office,talked about insurance coverage and focused dr on commercial plans for Butrans.asked dr if he could start more patients on Butrans like the one's he already started? dr said yes he will and he knows Butrans is there its a good option for patients.gave OxyContin reminder,discussed formular coverage for OxyContin and recommended Senokot-S<font color=blue><b>CHUDAKOB's query on 09/23/2011</b></font>Amy, I am glad to see you discussing titration of Butrans. In this call note it looks like you did most the talking. Imagine how the call would have gone if he told you how,if and when he titrates. This may have given you an opportunity to support him if he was doing any of those things. Try to catch him doing something right.<font color=green><b>BROOKAM's response on 09/27/2011</b></font>good point! will do thanks:<font color=blue><b>CHUDAKOB added notes on 09/29/2011</b></font>Hope it works out!
PPLPMDL0020000001	Cleveland	OH	44106	9/14/2011	dr said he started 1 patient on Butrans that was taking less than 300mg tramadol a day,dr said he pushed the attending dr to try this patient on Butrans,patient was started on Butrans 5mcg and was brought back 2 weeks later for a follow-up appointment.dr said patient told him Butrans didnt work and she wanted her tramadol again.I asked dr if he titrated Butrans? dr said no he forgot about that and that probably would have made sense to increase the dose of Butrans to 10mcg.dr said the problem and challenge with their patients is that he gets 1 chance with these medications meaning something new and different to patients like Butrans that dr starts them on,if it doesnt work they want want to try another dose higher of Butrans.dr said patients will want their pills again and thats it.told dr that was great he even thought of 1 patient and pushed the attending to try Butrans so they could get some clinical experience with Butrans,however next time if dr could tell patients up front before leaving the office that if medication's not providing the pain relief they need,perhaps they will need an increase in dosage strength? dr said that was a good idea and he would try that with a few more patients and see what happens.asked dr if he will see more patients this afternoon,like the patient taking less than 300mg tramadol a day,that he could start on Butrans? dr said probably so as they have hundreds of patients taking tramadol,discussed formulary coverage-focus on commercial plans<font color=blue><b>CHUDAKOB added notes on
PPLPMDL0020000001	Parma	OH	44129	9/14/2011	Spoke with technician as pharmacists were busy assisting customers. I showed her information sheet on Butrans pharmacists' webinars & asked that she give it to the pharmacists & encourage them to log on as the information would be delivered by a fellow pharmacist. She agreed. Discussed automatic savings for Butrans via e-voucher & also reviewed OxyContin savings cards. They did not need any additional savings cards.
PPLPMDL0020000001	Cleveland	OH	44114	9/14/2011	dr talked about patients she's started on Butrans and i asked dr if she had more like that to start on Butrans this week? dr said probably.showed butrans visual aid,talked about pain conditions pg.11,and asked dr to keep these discussions in mind and when she has patients fail that 1st dose of tramadol start them on Butrans instead of giving a refill of tramadol or another short-acting opioid.dr said that makes sense and she will consider Butrans there.focused dr on BWC.gave OxyContin reminder and recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44143	9/14/2011	I asked doc how patient responded to Butrans. He said that patient could not afford it. Butrans was approved with a PA but the co-pay was too expensive. I asked if it was a medicare patient. He said he believes so. I reminded him that commercial insured patients will have the best chance at access, not medicare/medicaid. Showed him the formulary grid.
PPLPMDL0020000001	Mayfield Village	OH	44143	9/14/2011	Dr. Mandel's NP : I discussed the butrans indication, CII status, 7 day delivery. I asked if she could initiate a patient on a product like butrans independent of the doctor. She said that she could. She might suggest to the doc a particular product and he would agree or not. I invited her to the speaker program on 9/15 but she said that this is a bad week. She would be open to other dates in the near future.
PPLPMDL0020000001	Independence	OH	44131	9/15/2011	I asked Dr Rob if he was planning on attending the Butrans dinner program tonight & he said he can't go. Handed him Portal invite as an alternative & asked him to log on to the interactive program. I told him the programs online are interactive & would help him learn who is & who is not appropriate for Butrans. Positioned Butrans for patients who are not well-controlled on short-acting around-the-clock opioids. He said he will try to remember & walked into a room.
PPLPMDL0020000001	Cleveland	OH	44113	9/15/2011	talked to Maria,RN,as dr wasnt available.Maria said she thought dr started 1 patient on Butrans but hasnt seen anyone else get started recently.showed Maria 5 butrans core messages,in visual aid,asked maria what features of Butrans stood out to her? maria said transdermal technology and once weekly dosing,asked Maria to recommend Butrans,for appropriate patients,showed pg.11 inclusion criteria discussed pain conditions that they treat in office and how Butrans could be an option for these patients,maria said ok she will share all of the info with doctors again,maria gave other 2 doctors Butrans fpi,initiation guide and patient info booklets but neither 1 said they wanted to meet with me.marla said dr cicc will meet with me and is interested in getting more patients started on Butrans.showed formulary grid and focused maria on commercial plans,BWC and tricare patients.recommended Senokot-S

PPLPMDL0020000001	Parma	OH	44134	9/15/2011	The technician said James was unable to come to the window to talk to me today. I gave her information on pharmacists' webinars for Butrans to give to him & she agreed. Discussed who Butrans is for & reviewed appropriate patient type. She said she hasn't seen any be dispensed but she knows they have it. Also discussed OxyContin savings cards, which she said she thinks James has enough of but I can check again next time to be sure.
	Cleveland	OH	44113	9/15/2011	talked to dr about patients that he see's with pain conditions,pg.11 visual aid,taking tramadol daily but not controlled,asked dr if he had patients like this? dr said yes.dr said he refills tramadol for most patients,asked dr if he has a few patients this week like we discussed,to start on Butrans instead of refilling tramadol? dr said he might,if patients are willing to wear a patch and remember to rotate the patch once a week,showed dr Butrans patient info booklet application/rotation section and told dr to show patients this info,dr dr said ok that helps with educating patients,talked to dr about giving patients non-opioid therapy and immediate release opioids with Butrans as dr wasn't sure if he could give Butrans with tramadol,showed Butrans fpi,maintenance of the therapy section for discussion,focused dr on BWC,tricare and commercial plans for Butrans.talked about OxyContin being an option for appropriate patients,showed conversion guide and talked about insurance coverage for OxyContin.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	9/15/2011	talked to dale,pa,about patients he's starting on Butrans and dale said patients seem to be well controlled on Butrans and no complaints so far.asked dale if he had more patients,like the one's he's already started,to start on Butrans? dale said he does and will continue prescribing Butrans.focused dale on opioid naive patients,showed appropriate patients section in visual aid,dale said that would be a consideration for some patients and he is thinking of more patients taking tramadol that aren't controlled to start on Butrans.focused Dale on BWC and commercial plan patients.recommended Senokot-S
PPLPMDL0020000001	Shaker Heights	OH	44122	9/15/2011	Spoke with floater pharmacist & gave her information on Butrans webinars for pharmacists. I encouraged her to log on to hear the presentation by a PharmD & interact with other pharmacists. She said she would have a look. Discussed Butrans dosing, delivery system, & appropriate patient type. She said she has seen Butrans but has not yet dispensed it. Discussed instant savings via e-voucher system as well as OxyContin savings cards. She said they did not need additional cards at this point.
PPLPMDL0020000001	Garfield Hts	OH	44125	9/15/2011	Dr Sadowski said he had no time today. I asked him if he was planning to go to the dinner program for Butrans tonight to learn more about Butrans & who is/is not the appropriate patient & to discuss it with other physicians & experts. He said he can learn himself online. I told him he is correct if he wants to do his own research & handed him a Portal invite, telling him this would be another way for him to learn about Butrans online. I let him know of the interactive nature of our online programs & let him know I would return for feedback on the program.
PPLPMDL0020000001	Cleveland	OH	44109	9/15/2011	dr said he's not started anyone on Butrans but does know it's available,I asked dr what drawbacks he see's with butrans? dr said he just thinks of it as another patch and he has duragesic as a patch for patients in pain.talked to dr about appropriate patients for Butrans,showed visual aid,pg.11,inclusion criteria we discussed various pain conditions and how Butrans could be an option for his patients with these pain conditions as well as appropriate patients section so dr knows how to start patients on butrans and titrate.dr said ok he will think about it,dr asked about medicaid coverage for Butrans? told dr to focus on BWC and commercial plan insurance.dr said ok.OxyContin reminder for appropriate patients and formulary coverage and recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	9/15/2011	talked to dr about patients he see's with pain conditions,pg.11 inclusion criteria,and how he can consider Butrans as an option for these patients.dr said he's got some patients on short-acting opioids but they are controlled,no complaints,showed dr appropriate patients section,discussed initiation of butrans and titration of butrans,asked dr if he could think of a few patients to start on Butrans this week? dr said he'll think about some patients and see if they will try Butrans.focused dr on BWC and commercial plan coverage.recommended senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	9/15/2011	talked to dr about patients with pain conditions,pg.11 visual aid,that are taking opioids daily but not controlled,asked dr to consider Butrans there.dr said he's not had anyone in mind for Butrans as most of his patients try stimulants,injections,acupuncture,etc.and are controlled on current opioid regimen.talked to dr about appropriate patients,showed visual aid,and asked dr to think of a few BWC patients with pain conditions discussed that are calling office early every month for refills,perhaps they could try Butrans? dr said that was a good point he hadn't thought of that and would consider Butrans for those patients.gave OxyContin reminder.recommended
PPLPMDL0020000001	Cleveland	OH	44102	9/15/2011	talked to Nagla,PA,about patients she's seen get started on Butrans and what challenges they face when talking to patients about Butrans.Nagla said they will write for vicodin TID or QID and patients just want refills every month so they will never stop taking their pills.Nagla said she prefers to get patients started on Butrans because of the transdermal technology and she would like to decrease the amount of short-acting opioids,specially tramadol and vicodin, that they write for every month.I asked Nagla if she would work with the 3 doctors in this practice,identifying appropriate patients and then starting them on Butrans? Nagla said she will do that.focused Nagla on BWC and commercial plan patients for Butrans.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44195	9/15/2011	talked to Lisa,MA,I couldn't see dr,told her about Butrans 5 core selling messages,discussed appropriate patients and initiation of Butrans,showed Lisa visual aid for discussion,showed Lisa patient education booklet and Lisa said she's sure dr and Patty,PA,will have an interest in hearing more about Butrans she asked that I leave Butrans fpi,initiation guide and patient info booklet with her and she will share all of the info with them.talked to Lisa about Butrans formulary coverage and told her to focus on commercial,BWC and tricare,she said ok and would give formulary grid to dr and Patty,gave 9/15/11 butrans dinner invitation and portal invite.
PPLPMDL0020000001	South Euclid	OH	44121	9/15/2011	Spoke to Gary about the stocking of butrans. He has not seen any scripts and its not stocked. He said we have to do a better job. He asked who is writing it. I told him that many of the pain docs but there aren't any pain guys in the area. I showed him the formulary grid. He bawked at the 3rd tier - he said thats like \$50. I confirmed that a 3rd tier co pay is about \$50 but we have a savings card that provides u to \$40 /monthly savings until the end of the year.
PPLPMDL0020000001	Parma	OH	44129	9/15/2011	Dr Gigliotti said not only is he getting more Butrans experience, but he also is starting to get some "good stories" about it. I asked him to clarify. He said he gave it to a female patient recently & she came back raving about how great she was doing on it. I told him that was great to hear & that I am glad he is continuing to identify appropriate Butrans patients as he promised. I asked if he remembered what was causing that patient's pain but he said he did not. He said he tried to write a prescription for Butrans earlier today but the insurance would not accept it. He said it was probably a Medicare situation. I showed him formulary grid & gave him savings cards. He put them on his desk & said he would keep them there instead of giving them to Jaz because he is "trying to do more with it". I asked if that meant he planned to continue to find patients & he said yes. Also reminder for OxyContin savings cards.
PPLPMDL0020000001	Cleveland	OH	44109	9/15/2011	talked to dr about patients he's started on Butrans and asked if he could find more like them? dr said yes.talked to dr about pain conditions they treat and asked dr to start some patients this week that have these pain conditions,dr said he will do that.dr said patients seem to be doing well on Butrans that he started,dr said he likes that Butrans is transdermal and dosed once a week.focused dr on BWC and commercial plans.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44130	9/15/2011	Dr Kansal said he has been trying some more patients on Butrans. I asked him to tell me more about the patients. He said he did not have time to talk today but to talk to Dorothy because he couldn't find his Butrans savings cards. Gave Dorothy a package of cards & reviewed formulary grid with her. She said she knows that one of the patients he gave it to has Anthem Senior Advantage. Told her the cards cannot be used for Medicare Part D plans like that one- just commercial insurance (ie working patients). She said that is a shame because this woman said that Marc's told her it would be \$160 for the prescription. I asked if any of the patients Dr Kansal has been writing for have commercial insurance & she said she thinks one of them does but was not sure. Discussed OxyContin savings cards & formulary grid as well.
PPLPMDL0020000001	Parma	OH	44134	9/15/2011	Spoke with Rebecca (nurse) & reviewed Butrans formulary grid & savings cards. Also reviewed what Butrans is/who it is for. Discussed patients who are not well-controlled on tramadol if they have a chronic condition. She said he doesn't have a lot of patients like that but she does get phone calls occasionally like that. She said she would pass along Butrans information to Dr Mandat. She also said they did not need any savings cards for neither Butrans nor OxyContin.
PPLPMDL0020000001	Independence	OH	44131	9/15/2011	I asked Dr Jack if he was going to come to the dinner program tonight & he said he can't due to his wife being ill. Let him know I would invite him to the next one & gave him Portal invite as an alternative. I handed him Butrans savings cards & showed him Butrans formulary grid, telling him I thought he may be interested in it. He said that he was going to put the savings cards in a spot where he would see them often until he remembers it more. He placed the cards on a table right outside two exam rooms. He said this will help him write Butrans for more patients then he walked away.
PPLPMDL0020000001	Cleveland Hts	OH	44118	9/15/2011	I asked doc if he had an opportunity to look over the information on butrans - the 7 day, CIII indicated for moderate to severe pain. He asked me to tell him about it. I explained the butrans is indicated for mod to severe pain and can be called in and refilled similar to hydrocodone. He asked if its like fentanyl. I told himthat there is no head to head data but butrans can be used as a first line opioid and it last for 7 days. I showed him the initiation guide and that 5mcg would be a starting dose for opioid naive patients. Gave formulary grid and asked him to try butrans for a patient with commercial insurance and to give them a savings card.
PPLPMDL0020000001	Cleveland	OH	44103	9/15/2011	talked to Amy,Pharmacy Manager,about Butrans stocking and who's writing Butrans? Amy said she's seen Dr.Celeste and Dr.Boyd's patients fill scripts for Butrans.talked about Butrans 5 core selling messages and what features of Butrans stand out? Amy said she likes that Butrans is transdermal and dosed once a week.asked Amy if she's been recommending Butrans to patients? Amy said yes to some patients and she's giving patient info booklets.told Amy to focus on application/rotation of Butrans,Amy said ok.we discussed OxyContin stocking and formulary coverage.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	9/15/2011	dr said he started 1 patient,at westlake office,on Butrans 5mcg,but patient saw him for follow-up appointment and said she took Butrans off because it wasn't working,patient wanted her vicodin again.dr talked to patient about increasing Butrans to 10mcg dosage strength,patient didnt want Butrans,she wanted vicodin.dr said he's not sure if Butrans worked or not as he thinks this patient just wanted her vicodin and thats it. dr said he will give Vicodin TID and even QID for patients in this practice.showed dr pg.11,pain conditions,discussed Butrans as an option for patients with these conditions,asked dr if he had patients this afternoon coming in with these pain conditions where Butrans could be an option? dr said probably so he will look at that.I asked dr if he could remove 1 feature of Butrans what would that be? dr said he didnt have anything in mind that he would change but his biggest challenge is that patients like popping their pills and demand their pills,so he has to convince patients that Butrans being a patch and dosed once a week is an option for them. dr said patients have to be willing to wear the Butrans transdermal system and change sites once a week. we talked about patients taking immediate release opioids and non-opioid therapy with Butrans.focused dr on BWC and commercial plans for
PPLPMDL0020000001	East Cleveland	OH	44112	9/15/2011	I asked doc if he would be interested in attending a program this evening to learn more about butrans. He said he can't today but to let him know about the next one. I asked him to think of butrans when patients come to him and have failed on tramadol. He said it is still expensive. I asked him to try butrans for BWC patients.
PPLPMDL0020000001	Cleveland	OH	44112	9/15/2011	I reviewed the butrans indication, CIII status and 7 day delivery. I reminded him of his expressed interest in butrans and that he might want to attend a speaker program. Gave him another invite for tonights program. He said he probably can't attend tonight but maybe next time. I asked him to think of butrans for commercially insured patients. Gave him a formulary grid.
PPLPMDL0020000001	Highland Heights	OH	44143	9/15/2011	Window call...I reminded doc that he RSVP'd to the speaker program tonight. I asked if he is still attending. He said he thinks so. I gave him another invite with the address and also a formulary grid reminder. No savings cards needed.
PPLPMDL0020000001	Beachwood	OH	44122	9/15/2011	Dr Yokiel said he & Jennifer have been putting more patients on Butrans & "trying" to find more. I asked him what he looks for in a potential Butrans patient. He said that because it can be difficult to switch patients from short-acting to long-acting, he really is trying to stick with newer patients who are on something like tramadol. He said those are the patients he has had success in switching. I told him this was the perfect patient type. Discussed patient type further & I asked him what he would say the biggest hindrance for him prescribing more would be. He said having that right patient type. He said so many of his come in on higher doses of opioids that it is not realistic for them to taper to 30mg morphine equivalent before starting Butrans. I asked if would continue looking for those newer patients on tramadol to switch to Butrans if appropriate & he said yes & that he also has been using it for patients between procedures with success. Also discussed OxyContin q12h as an option for patients beyond Butrans. He said he has had success with OxyContin & will continue using it. Spoke with nurse Vickie, who said they did not need savings cards or patient education materials yet.
PPLPMDL0020000001	Cleveland	OH	44111	9/16/2011	Quick call, we reviewed Butrans for apts who are taking low dose short acting, she thinks it would be a good option. I asked if she would recommend it and help remind the Drs and she said he will.
PPLPMDL0020000001	South Euclid	OH	44121	9/16/2011	Spoke to Mitch about the stocking of butrans. He confirmed that they have it but he has not seen any scripts for it. I explained the proper application of the patch and the savings card program. Provided patient info guide.
PPLPMDL0020000001	Cleveland	OH	44130	9/16/2011	Spoke with nurse, Dawn, who said Dr Popa was not in the office & would be back next week. Reminded her of my recent lunch & inquired about any Butrans activity. She said she hasn't heard Dr Popa say anything & that she herself did not remember anything about it. Reviewed 5 core messages with her & spent time discussing appropriate patient type. She said Dr Popa does have patients who fit that description. Worked with her to set up another lunch. Left Butrans information & asked Dawn to give it to Dr Popa- she agreed.
PPLPMDL0020000001	Brooklyn	OH	44144	9/16/2011	Spoke with new MA & showed her savings cards for Butrans & OxyContin. Discussed Butrans dosing, delivery system,& appropriate patient type. Reviewed with her eligibility requirements to use savings cards. Also showed her OTC samples & recommended Senokot-S for opioid-induced constipation.



PPLPMDL0020000001	Brooklyn	OH	44144	9/16/2011	Spoke with Gary who said he had no time today. Gave him information on upcoming Butrans webinars for pharmacists. He said he would have a look later. Reminder of appropriate patient type, mentioning patients who are not well-controlled on short-acting around-the-clock opioids. He said they see so much Medicaid there that the savings cards don't get used up very quickly so they are OK on their supply of OxyContin cards.
PPLPMDL0020000001	Cleveland	OH	44130	9/16/2011	Spoke with Allison & told her about Butrans pharmacists' webinars. She said she would have a look. Pointed out that the discussion would be lead by a PharmD, so information would be relevant to her. Reviewed Butrans appropriate patient type, including patients who are not well-controlled on their short-acting opioid. Also discussed automatic savings via e-voucher for her customers & reviewed OxyContin savings cards.
PPLPMDL0020000001	Cleveland	OH	44104	9/16/2011	talked to dr about appropriate patients for Butrans,showed visual aid with this info and talked about pain conditions he treats in office,asked dr if he will start more patients on Butrans with 1 of these pain conditions? dr said if they have insurance to pay for Butrans he will do that,focused dr on commercial plans for Butrans,talked about OxyContin being an appropriate option for patients and recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44104	9/16/2011	talked to dr about patients with pain conditions,pg.11 inclusion criteria,where dr can start patients on Butrans.dr said that was good to see as he treats many of the pain conditions listed.dr talked about low back pain,discussed appropriate patients for Butrans showed info in visual aid for discussion and discussed titration of Butrans,focused dr on commercial plan patients.asked dr if he has more patients like the 1 he started,to start on Butrans? dr said he probably does and he'll think about it.OxyContin reminder of appropriate patients and discussed formulary coverage for OxyContin.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	9/16/2011	dr was too busy to talk today,so i talked to Jodi,Clinic Coordinator,about Butrans 5 core selling messages and asked if anyone has prescribed Butrans here? Jodi said she knows dr greenwood has and she thinks dr huang has 1 patient on Butrans,talked about appropriate patients for Butrans,showed info in visual aid,asked if Jodi would recommend Butrans as an option for patients,to the attending physicians and residents.Jodi said she will do that,gave portal invites and formulary grids with Butrans fpi's,initiation guides and patient info booklets for all doctors.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	9/16/2011	talked to Erin,Pharmacist,about Butrans stocking and they haven't seen any scripts for Butrans yet so pharmacists aren't ordering Butrans,talked about importance of stocking but Erin said they won't order Butrans until that 1st script comes in.we talked about doctors at Metro,Lutheran and doctors in area, like dr nickels and dr rajeja that prescribe a lot of short-acting opioids and Erin asked if i was working with them? told Erin yes, i am working with them and showed Erin Butrans 5 core selling messages and asked her what really stood out to her? Erin said transdermal delivery and once weekly dosing,asked Erin if she would recommend Butrans to patients that are taking short-acting opioids but not controlled,Erin agreed and took Butrans patient info booklets.talked about BWC,Tricare and commercial plans for Butrans.talked about OxyContin stocking,appropriate patients and gave conversion guide to Erin,discussed formulary coverage for OxyContin.recommended Senokot-S
PPLPMDL0020000001	Warrensville Heights	OH	44122	9/16/2011	Followed up with Dr Brooks on his request for information that would help him pitch Butrans to the other formulary committee members. I let him know this request could be submitted via computer to our Medical Services department & they could send him information on Butrans that I may not be able to provide. He said he was very grateful for the follow-up & that he is looking forward to getting this information & again said that he wants to get Butrans on formulary at SouthPointe. I asked him to let me know if there was any other information he needed & to keep me posted on the progress. Also asked if he is continuing to identify Butrans patients & he said Spoke to Melinda about the stocking of butrans. She confirmed that she has a couple of patients on it and may have just recently filled a script but she did not remember anything about it. I discussed the formular coverage and the savings card program.
PPLPMDL0020000001	South Euclid	OH	44121	9/16/2011	I reminded doc of her interest in butrans - reviewed that indication. She said that she tried it once but the patient could not afford it. She could not recall the exact plan. I reminded her that the best chance for success will be with commercially insured patients(those that have insurance through their work). Provided formulary grid and savings card leave behind and asked her to try again. She said she would give it a try but she has a lot of
PPLPMDL0020000001	South Euclid	OH	44121	9/16/2011	I asked Dr to tell me more about the patients he started on Butrans. He said they were patients on vicodin and one was a Med D patient and the other said that she wanted to continue her vicodin because she likes being able to control when she takes something. We discussed the inclusion criteria and he said that he sees many patients who have these conditions. We discussed using Butrans before going to vicodin around the clock and he agreed that this would be a good place to use it. I asked if he would start a few more new patients and he said he will. We reviewed the managed care and I told him to focus on commercial insurance. We discussed that
PPLPMDL0020000001	Lakewood	OH	44107	9/16/2011	OxyContin is still an option and he said that he still has many patients on OxyContin and that he has had a lot of success with OxyContin over the years.
PPLPMDL0020000001	Cleveland	OH	44109	9/16/2011	talked to dr about patients with pain conditions,pg.11 inclusion criteria,that he treats and how Butrans could be an option.dr said he has a handful of patients on opioids and he cant think of patients that arent controlled and need something else.dr said he will keep Butrans in mind and asked about insurance,focused dr on BWC and commercial plans.recommended Senokot-S
PPLPMDL0020000001	Lakewood	OH	44107	9/16/2011	Quick call while talking to Dr Rojas, I asked if he would try Butrans a few patients next week and he said he would. I showed him the patient medication guide and savings cards and asked him to think of patients with commercial insurance.
PPLPMDL0020000001	Cleveland	OH	44109	9/16/2011	worked internal medicine, family medicine, neurology and rheumatology dept's - had to leave Butrans fpi's, initiation guide's, patient info booklets,formulary grids and my business card for each physician.left OxyContin fpi,conversion guide and formulary grids for each physician too
PPLPMDL0020000001	Cleveland	OH	44109	9/16/2011	worked pm&r dept
PPLPMDL0020000001	Lakewood	OH	44107	9/16/2011	Quick follow up. I showed the inclusion criteria and asked what would be the downside to giving Butrans a try in these types of patients. He said he will give Butrans a try.
PPLPMDL0020000001	Independence	OH	44131	9/16/2011	Spoke with MA Jill & asked her why she thinks Dr Pai isn't prescribing Butrans. She asked about insurance coverage. I reviewed this with her, including government plans & prior authorization. She said that is probably why he isn't using it. Asked her to keep an eye out for commercially insured patients who fit the profile & she said she would do her best. She also said she would give Dr Pai the Butrans information I left.
PPLPMDL0020000001	Lakewood	OH	44107	9/16/2011	Dr said that she would like to start a patient on Butrans but their insurance denied it. I asked her to tell me more and learned that the patient is united health care. The insurance wants her to try other long actings. The patient has been on duragesic in the past and she will have to see what else. She is going to try to get the PA to go through. I reviewed the managed care and that most united healthcare patients should have a low copay with the savings cards. Reminder that OxyContin is covered on most plans as well and can use the savings cards.
PPLPMDL0020000001	Chagrin Falls	OH	44022	9/16/2011	Spoke with MA Sherry & nurse Karen & presented Butrans patient information booklets. Discussed giving them to patients when they walk out with a Butrans prescription or offering them to patients who may be appropriate candidates for it. They agreed to do this & to deliver Butrans information to Dr Rood, Dr Kale, & Dr Hudson.
PPLPMDL0020000001	Hudson	OH	44236	9/16/2011	Quick call- Positioned Butrans for patients who have a chronic issue which causes pain who are not well-controlled on tramadol. He said it makes sense to start Butrans at that point & said he would keep it in mind. Handed back initiation guide & also gave OTC samples, recommending Senokot-S for medication-induced constipation.
PPLPMDL0020000001	South Euclid	OH	44121	9/16/2011	I asked doc about his experience with butrans for patients with moderate to severe pain. He said he has prescribed it a couple of times. He had to increase the dose from 5 to 10mcg but the patient likes it. Spoke to Lisa, his MA, who went on to say that the patient's other doc wanted to ween her off the butrans but Dr. Stein advocated for her to stay on butrans. I reviewed the formulary grid and the savings cards program. Reminded doc that butrans can be called in and refilled. He (and Lisa) really liked the idea of that. Provided oxycontin formulary reminder as well.
PPLPMDL0020000001	Chagrin Falls	OH	44023	9/16/2011	Jeff saw me & immediately said he has no time. Spoke with technician Ronnie who said they have been especially busy due to flu shots being in. Gave her a Butrans pharmacists' webinar information sheet & asked her to give it to Jeff. Ronnie pointed to the "Butrans" name on the sheet & then to the shelf to show me they had it stocked (1 box 5mcg, 1 box 10mcg, & 2 boxes 20mcg). She also said they have been seeing more prescriptions for
PPLPMDL0020000001	Cleveland	OH	44121	9/16/2011	Window call....I reminded doc of the butrans indication and the positioning after tramadol failure. I asked him if he has any of those patients. He said probably but they also have medicare. I gave him a formulary grid and savings card reminder and asked him to consider butrans for younger patients with coverage.
PPLPMDL0020000001	Cleveland	OH	44111	9/16/2011	Dr said he has yet to try Butrans, I asked why and he said he forgets and that he is concerned that Butrans may not be strong enough for many of the patients he sees. I asked him to focus on those patients who are taking low dose of short acting combos, he will keep it in mind. Reminder that OxyContin is still an option for patients on higher doses of opioids.
PPLPMDL0020000001	Brooklyn	OH	44144	9/16/2011	Stopped Dr Miguel in the hallway & positioned Butrans for patients who have a chronically painful condition & are not well-controlled on tramadol. He said he always forgets about Butrans. Also reminded him of OxyContin savings cards & showed them to him in the sample closet. He said he will try to remember.
PPLPMDL0020000001	Warrensville Heights	OH	44122	9/16/2011	Delivered to Dr Wolkoff the Butrans savings cards that he had requested at last night's dinner program. He said he was grateful for the follow-up. Reviewed commercial insurance coverage with him & discussed eligibility requirements for the cards (cash-pay or commercial coverage only). He said that most patients have Medicaid there but they do have some with insurance. Dr Wolkoff said he enjoyed the program last night & learned a lot. He also said he plans to prescribe Butrans within the next week.
PPLPMDL0020000001	Parma	OH	44134	9/19/2011	Spoke with floater pharmacist & discussed Butrans indication, dosing, & delivery system. Also presented information on Butrans webinars for pharmacists which she said sounded interesting. She said she would also leave a copy for the regular pharmacists. Discussed appropriate patient type (ie patients calling too soon for refills of short-acting around-the-clock opioids like tramadol). She said that is a common patient type. Also reviewed automatic savings for Butrans via e-voucher & OxyContin savings cards.
PPLPMDL0020000001	Lakewood	OH	44107	9/19/2011	Quick call at the window, I asked Dr to take a look at the inclusion criteria where Butrans was studied. I asked if he sees these types of patients and he does. I asked if he would try Butrans for just a few appropriate patients and he agreed. I reviewed the managed care with Robin and she said she will help remind the Dr.
PPLPMDL0020000001	Cleveland	OH	44130	9/19/2011	Spoke with Patty (pharmacist/director) & presented Butrans pharmacists' webinar information. Discussed the opportunity to log on to the interactive program to learn more about Butrans & who is/is not appropriate for it from a PharmD & expert. Also discussed Butrans appropriate patient type, focusing on patients who are not well-controlled on tramadol chronically. I asked if that patient type sounded familiar- she said yes. I asked if she frequently gets calls from customers on chronic short-acting opioids who call too soon for refills or say it is not controlling their pain. She said yes & added that she might log on to the webinar. Also discussed OxyContin savings cards for those eligible.
PPLPMDL0020000001	Parma	OH	44129	9/19/2011	Spoke with MA Tammy & presented Butrans information, including indication, dosing, delivery system & appropriate patient type. Inquired about how to see physicians in the orthopedic group (Karns, McCoy, Wolanin, etc). She said I needed to call each of their secretaries to make appointments with each one individually. Got each of their cards with contact information for secretaries. I asked Tammy if she thought Butrans sounded like something they would be interested in hearing more about & she said she thought so. I asked her to distribute Butrans information to each physician & she agreed.
PPLPMDL0020000001	Cleveland	OH	44130	9/19/2011	Spoke with Sandy (MA) & discussed Butrans indication & appropriate patient type. I gave her updated FPI's for each of the medical oncologists & asked her to deliver them to each physician. She agreed. Also discussed how to set up some sort of inservice with the staff about pain management. She said to speak with Wendy (who was unavailable) about this. Got contact information to follow-up.
PPLPMDL0020000001	Cleveland	OH	44109	9/19/2011	talked to dr about opioid naive patients,showed visual aid,discussed Butrans as an option for them,asked dr what drawbacks he saw in starting these patients on Butrans? dr said it depends on how well he knows patients,if patients are willing to wear a patch,showed opioid naive graph,dr read and was interested,asked dr if he will see a few patients today that he can start on Butrans that are opioid naive? dr said he might,he will have to see,showed Butrans patient savings cards,told dr to focus on commercial insurance plans and BWC.
PPLPMDL0020000001	Cleveland	OH	44113	9/19/2011	worked pain management dept - see call notes on dr daoud and dale novak,pa
PPLPMDL0020000001	Westlake	OH	44145	9/19/2011	Quick call. I reviewed the inclusion criteria and asked Dr if he sees these types of patients with chronic pain. He said sometimes. I asked if he would start just a few of these on Butrans and he agreed.
PPLPMDL0020000001	Cleveland	OH	44130	9/19/2011	Quick call only as Dr Fedorko said he did not have time today. Positioned Butrans for patients taking tramadol around-the-clock who are not well-controlled. He said he will look for patients. Spoke with Maryellen & reviewed managed care coverage for Butrans & Ryolt. Also reminded her about savings cards for both products.
PPLPMDL0020000001	Lakewood	OH	44107	9/19/2011	Quick follow up. I asked the Dr how his new Butrans patients were doing. He said that he will give it a try this week and let me know. Reminder to give a medication guide and savings card with scripts. Spoke with Kim and reminded her to focus him on commercial insurance.

	Parma	OH	44134	9/19/2011	I asked Dr Mandat what it is about a patient that makes them a good Butrans candidate. He said he likes transdermal products for these patients because many of them have dysphasia, so swallowing pills is not an option. He said for this reason, he likes a variety of transdermal options. He said he has given Butrans for patients like this who have pain. He added that he has written fentanyl for patients for the same reason (patients with dysphasia) hundreds of times. I reminded him to keep the more "moderate" pain side in mind when searching for Butrans patients as patients on fentanyl were excluded from studies. Reminded him of appropriate range of patients. I told him the reason for this question was that I do not have many physicians as experienced in the nursing home/hospice arena & that he is helping me learn this aspect of pain management & care. He said this area is "his forte" & an area in which he has much experience.
PPLPMDL0020000001	Lakewood	OH	44107	9/19/2011	Quick follow up, I asked about the success for his current Butrans patients and he said they are doing well. I reviewed the managed care for Butrans and he said this has been the most difficult part since many chronic pain patients are older. Reminder about OxyContin as a long acting option when Butrans may not be covered and he said he does continue to use OxyContin in the hospital often. I spoke with the staff about managed care where Butrans is covered.
	Cleveland	OH	44113	9/19/2011	talked to dale,pa,about patients he see's of dr daoud's and how Butrans could be an option,dale said he saw 6 new patients last week that could potentially be Butrans starts.asked dale what "new" meant? dale said patients taking opioids for chronic pain but new to practice.dale said they run OARS report on all patients and if dr feels he wants to take patient on and manage opioid therapy he will maintain patients medication until OARS is confirmed,then make changes if necessary,asked dale if he would recommend Butrans to dr daoud,for patients taking tramadol daily,not controlled,instead of converting them to vicodin? dale said he would do that.
PPLPMDL0020000001	Cleveland	OH	44113	9/19/2011	dr said he gives 90% of his chronic pain patientes that need medical management for opioids to dr shen,same practice,he manages 10% of patients.dr said he does more procedures,patients get started on opioids and want more,or a different narcotic,he doesnt like to prescribe much narcotics dr said both procedures and opioids are only temporary solutions for patients.dr said patients are never 100% pain free.told dr im working with dr shen so thats great they have a partnership in managing patients taking opioids.dr said majority of his patients have low back pain.
PPLPMDL0020000001	Cleveland	OH	44113	9/19/2011	dr said he had a patient with RSD start on Butrans,in follow-up appointment patient said Butrans wasnt working,dr said stephanie,ma,asked where patients was applying Butrans,patient said on her knee because thats where the pain was,stephanie told patient to apply Butrans 2 one of the 4 application sites thats shown in patient info booklet and rotate once a week,patient did this and pain is controlled,dr is happy with this patients experience on Butrans.asked dr when he looks at patient list,daily,to see who's appropriate for Butrans,what characteristics does he look for or have to hear from patients in order for him to decide Butrans is an option? dr said if patients complain their current medication isnt working,he'll consider Butrans.told dr to think of 1 or 2 BWC patients with low back pain,that are taking opioids daily but not controlled,to start them on Butrans,dr said he will do that.asked dr about placing butrans patient info booklets in exam rooms,dr said no the staff handles education so talk to stephanie and girls.<font color=blue><b>CHUDAKOB's query on 09/29/2011</b></font>Amy, this was an AE and should have been reported. Please call and report this and let me know when completed. A physician that says our product is not working is a clear AE.<font color=green><b>BROOKAM's response on 10/03/2011</b></font>-ok i did report this before but will do tomorrow am, i forgot you said every time an HCP states an AE even if reported in previous calls,we must do it again. thanks for catching that!<font color=blue><b>CHUDAKOB added notes on 10/05/2011</b></font>-Thank you for reporting it...again.
PPLPMDL0020000001	Cleveland	OH	44127	9/19/2011	talked to dr about Butrans 6 core selling messages,focused on once weekly dosing of Butrans,dr said she has patients with chronic pain that she could try Butrans on but majority medicaid,90% and 10%commercial.
PPLPMDL0020000001	Lakewood	OH	44107	9/19/2011	Quick call, I asked Joe if he has consulted with any new Butrans patients. He has not, I reviewed the patients medication guide and that it is important that patients know how to apply and that steady state is in 3 days. He will let them know.
	Lakewood	OH	44107	9/19/2011	Spoke with Kim, she thinks that they do have a few patients on Butrans but could not remember off hand who the doctors were who wrote. We reviewed the medication guide and she said she has not received any questions from new patients. She agreed to let patients know to give Butrans 3 days to reach steady state and how to apply properly. We discussed that OxyContin is still a long acting options and she said they are still seeing new patients for OxyContin.
PPLPMDL0020000001	LAKEWOOD	OH	44107	9/19/2011	Spoke with Ronnie, we discussed Butrans key messages and the savings card program. She does see the automatic discount come up with the e-voucher program. I asked what commercial insurance they see most and she said probably medco. We discussed the savings cards for OxyContin and that patients who have a copay higher than \$25 can save money off the copay.
PPLPMDL0020000001	Lakewood	OH	44107	9/19/2011	I asked Dr what his biggest concern is with starting new patients on Butrans. He said that brand name products are not covered by managed care and he just goes with what he knows is covered. I asked if he knows what insurance the patients have when he goes into a room and he said he usually has an idea if they have insurance through work or Med D or Medicaid. I asked him to try just a few of those patients with insurance through work and he said he would try. Reminder that OxyContin is covered on many insurance plans and he said he does not have many call backs with OxyContin.
PPLPMDL0020000001	Parma	OH	44134	9/19/2011	Marko said that he has not seen any Butrans activity since the one prescription he filled several months back. He said that unfortunately, most physicians just prescribe what is "easy" & write either oxycodone or hydrocodone combos. He added that many times, unfortunately, they do this because they allow the patient to simply tell them what they want & the physician does exactly that. I asked what his thoughts were on that. He said he does not think it is ethical medicine & unfortunately, that is a big problem in the Cleveland area. He said that products like Butrans are what he considers "ethical" medicine. I asked why. He said in many cases, a long-acting & transdermal option may be better for the patient. I told him we have no data to suggest that Butrans is "better" than anything else & also that it is an opioid & therefore still carries abuse/addiction potential. He said he knows, but he thinks it is at least a good option for some of those patients. Also reviewed OxyContin managed care status & savings cards for eligible patients.
PPLPMDL0020000001	Independence	OH	44131	9/20/2011	I asked Dr Sundaram if he could see himself prescribing Butrans for appropriate patients after tramadol if he knows their condition is chronic. He said "sure" & said he had to go as he was running behind. Spoke with Terry & June & reviewed managed care & savings cards. Also offered Senokot & Colace but they said they think they have some still.
PPLPMDL0020000001	Strongsville	OH	44136	9/20/2011	Spoke with technician who said Megan (pharmacist) said she was too swamped to talk today. I discussed Butrans webinars for pharmacists & told her of interactive nature & information delivered by a PharmD. Also discussed Butrans appropriate patient type, dosing, & delivery system as she was not sure what Butrans was. Also reviewed OxyContin savings cards which she said they have enough of.
PPLPMDL0020000001	Parma	OH	44129	9/20/2011	Spoke with pharmacist Janet & presented information sheet for Butrans webinars for pharmacists. Encouraged her to log on & walked her through registration process as she expressed interest in logging on to the conference. Discussed Butrans appropriate patient type, focusing on patients who call too soon for refills or complain that their short-acting opioid like tramadol is not controlling their pain. She said this is very common. I asked if he ever makes a recommendation to a physician when this happens & she said no as she has never been asked to do so by a physician. Discussed savings opportunities via Butrans.com & also reviewed OxyContin
PPLPMDL0020000001	Parma	OH	44129	9/20/2011	I asked Dr Roheny if he has given more thought to his Butrans patient or if he remembers who it might have been. He said unfortunately, he only remembers that the person had commercial insurance. He said he thinks the patient was probably "already on something" but he does not know any specifics. He said he will try to pay attention when they come to follow-up with him. I asked him, in the meantime, what would prevent him from finding more appropriate patients & he said nothing other than insurance. He said he remembers he gave the patient a savings card for Butrans.
PPLPMDL0020000001	Cleveland	OH	44114	9/20/2011	dr said he's started 2-3 patients a day,in last 10 days,on Butrans.dr said he had 2 patients get denied Butrans with medical mutual insurance,showed dr Butrans formulary grid and discussed patient savings card program with dr.dr said he's looking for all of his percoet patients to get started on Butrans.patients dont get any immediate release opioids with Butrans.told dr to continue starting those patients and focus on BWC and commercial
PPLPMDL0020000001	Shaker Heights	OH	44122	9/20/2011	Quick window call- Positioned Butrans for patients who have a chronic condition who are not well-controlled on tramadol. He said he will prescribe it. Spoke with Michelle (MA) & reviewed this patient type as a potential Butrans patient. She said she does not make recommendations to Dr Agarwal for patients' medications. Reviewed savings cards & managed care.
PPLPMDL0020000001	Stow	OH	44224	9/20/2011	Dr said he has written some Butrans and I asked how his patients are and he said they are doing good and he can probably write more he was waiting for feedback, I asked him what kind and he said if it works. I asked what made him think of writing Butrans and he said he likes that it is a patch and it is once a week instead of pills. We discussed not writing it in medicaid or medicaid and those would be more of an Oxycontin patient and he said he had to run
PPLPMDL0020000001	Westlake	OH	44145	9/20/2011	I discussed our last conversation and that he said that Butrans gives him another option when other medications don't work well. I asked if he could think of some patients where he is having frustration getting their pain under control and if he would start Butrans. He agreed and said that he has been wanting to gain more experience with it.
PPLPMDL0020000001	Stow	OH	44224	9/20/2011	Dr popped his head into lunch and said what do I have and I said I have Butrans the once a week Schedule 3 transdermal system, and he said he remembered and to make sure I talk to the others because he does the
PPLPMDL0020000001	Cleveland	OH	44106	9/20/2011	asked dr how Butrans is fitting in his practice? dr said he doesnt like to write narcotics,tries to avoid them.dr said his favorite is topamax and tramadol,told dr that tramadol is a narcotic due to mu opioid receptor activity,dr said in his mind tramadol isnt a narcotic because its not scheduled.dr said he knows he has to get more patients started on Butrans but someone needs to twist his arm.
PPLPMDL0020000001	Parma	OH	44134	9/20/2011	Dr Hernandez said that some of his patients have had contact dermatitis from Butrans. He said it is not a lot of his patients but there have been a few. He said there doesn't seem to be any rhyme or reason to who gets it, but when this happens, he discontinues the Butrans. He said he doesn't mind treating other side effects like nausea, but with contact dermatitis, he switches them to something else. He said Butrans has been a great option for his patients & he continues to offer it to patients when appropriate. I asked how he usually initiates treatment & counsels the patients with their first prescription. He said he just tells them to put on the patch & that is all. I asked if he talks to them about supplemental analgesia or waiting 3 days to judge whether it is working for them. He said he does not. He said he hasn't had any complaints, so that is how he continues to do it. Reminded him of savings cards for both products. He said he does not need any additional cards for now.
PPLPMDL0020000001	Stow	OH	44224	9/20/2011	Sandra said that she tried a patient on Butrans after last time she saw me and has had good results. Said she likes that it is once a week and makes it nice when they come in and are wearing it. She said she is sure that she probably has more patients who would do well on it. We reviewed managed care coverage.
PPLPMDL0020000001	Cleveland	OH	44106	9/20/2011	asked dr when he walks in exam room how does he decide if Butrans is an option for patients? dr said depends on many factors,if patients are calling in early for refills,if patients are taking percoet daily and not controlled,if he feels patients will wear a patch once week,dr said he has 1 patient thats on Butrans thats getting some redness and swelling under patch site but is still taking Butrans because its working for her.dr said all of his patients that are on Butrans were taking percoet and not controlled,dr said he will give some patients percoet for breakthrough if they bug him about it otherwise he tells them to take aspirin or ibuprofen.dr said lisa explains Butrans to patients,shows patients Butrans patient info booklet and handles all insurance.told dr to focus on BWC and commercial insurance plans.
PPLPMDL0020000001	Stow	OH	44224	9/20/2011	Spoke with Gregg, they have not officially opened yet and have not stocked yet. He will look at what the Drs are writing and he will go from there in ordering from Amerisource Bergan. I reviewed Butrans with him and he said he came from Giant Eagle so he is familiar with it. HE said he will probably stock if they are writing
PPLPMDL0020000001	Cleveland	OH	44106	9/20/2011	worked anesthesia/pain management dept and bolwell out patient pharmacy
PPLPMDL0020000001	Cleveland	OH	44106	9/20/2011	dr said he's going to start more patients on Butrans,he likes the product and thinks when tramadol isnt controlling patients pain,Butrans should be an option.dr said the 1 patient he started on Butrans,noted in previous call,was taking 400mg tramadol daily,not controlled so he pushed dr hayek to try Butrans on an elderly patient.dr said he started patient on Butrans,no tramadol for breakthrough pain,after 2 week trial,patient told dr Butrans wasnt working and she wanted tramadol told dr to avoid medicaid and medicaid,focus on BWC and commercial plan.asked dr how i can get Butrans in mind of Dr Hayek,instead of refilling so much tramadol for patients? dr said dr hayek loves topamax and tramadol,dr said he will suggest more patients get started on Butrans and i just have to keep reminding dr hayek of starting dosage strengths of Butrans.
PPLPMDL0020000001	Stow	OH	44224	9/20/2011	Dr said he is writing Butrans. I asked him how his patients are liking it and he said they like it, but one patient could not find it in a pharmacy and I said the majority are stocked and he said he told him to go to a different one. Dr said he has a hard time with patients wanting to stay on the pill because the get the immediate high so they think that it is working. I said why not gie them Butrans and give them one or 2 pills a day if needed for supplemental and maybe they will not even need it. He said that is good idea. I said how many patients do you get a week who are potential Butrans patients and exhibit similar qualities to his other Butrans patients and he didnt seem to understand the question. He said he will continue to write and I reinforced managed care coverage and not to write in medicaid and medicaid patients and those patients he can use low dose OXYcontin, he said
PPLPMDL0020000001					

	University Hts	OH	44118	9/20/2011	Conducted the butrans RM presentation with doc and asked him which of the case studies represent his patient population. He said probably all four of them. I explained to him how to initiate the 5 and the 10mcg for the opioid naive and opioid experienced. He asked about the side effects and if skin irritation was the #1 reported. I showed him the safety profile of butrans and that nausea, dizziness, headache along with application site pruritis were the most frequently reported. Discussed the positioning - after NSAIDs or after tramadol. He said he would likely not prescribe after NSAIDs. I asked him if he sees any benefit to a product like butrans. He said sure and he has the literature in his office, he just needs to look at it more often. I explained the coverage with BWC which might be helpful for his occupational health patients. Discussed the formulary grid and savings cards for oxycontin and butrans. He said he would try it - "e would try to find a guinea pig". He said its just new.
PPLPMDL0020000001	Westlake	OH	44145	9/20/2011	Quick call in Lakewood, Dr said he started another new patient yesterday, but he is concerned about managed care for this one. He did not remember which plan. I reviewed the commercial insurance and he said he will keep me posted. I let him know OxyContin is an option that is covered on most plans.
PPLPMDL0020000001	Stow	OH	44224	9/20/2011	Introduced Butrans, reviewed FPI, indication, dosing and titration, 5 core messages and managed care messages. She is new PA at the office and just started this week, She said this sounds like a good product and something she will try definitely with the opioid experienced
PPLPMDL0020000001	Cleveland	OH	44130	9/20/2011	I showed initiation/titration guide pg 8 & asked Dr Diab if he has found that he has had to titrate patients on Butrans lately. He said he doe sometimes. Reminded him of ability to titrate after 3 days to a maximum of 20mcg. He thanked me & walked into a room. Placed titration guide on his desk to serve as a visual reminder. Spoke with MA Dina & discussed titration ability on Butrans as well.
	Independence	OH	44131	9/20/2011	Deb said one of her former Butrans patients who was put on OxyContin returned for her follow-up visit with the bottle of OxyContin because she said it did not work for her at all. I asked if she could provide any other details. She said the patient was taking OxyContin 10mcmg 3x per day. I told her OxyContin's FPI states that the only recommended dosing interval is q12h. Deb said she just put her first patient on Butrans at 5mcg dose. I asked her what made her think of Butrans for this patient. She said he has multiple back problems including degenerative disc disease & his spine is "like mashed potatoes". She said nothing else seemed to be working for him but he was very committed to getting rid of his pain. I told her it sounded like she chose an ideal patient. She asked me if Butrans has any negative interaction with psychiatric medications such as Lexapro. I showed her FPI 5.3. She also asked what she should do if a patient were to report respiratory depression. Discussed this & showed FPI section 10, also pointing out 10.2. She said that she counseled the patient thoroughly, giving him the information booklet, which the patient understood & appreciated. Deb added that she told the patient to keep some of his Ultram on board in case of breakthrough pain. Discussed ability to titrate after 3 days to max of 20mcg. She said she would keep me updated on his progress with Butrans.
PPLPMDL0020000001	Cleveland	OH	44106	9/20/2011	talked to Margie, Pharmacy Supervisor, about Butrans stocking, Margie said Butrans cartons are still sitting on shelf, no scripts yet. talked to Margie about some departments im working with, like pain management that are prescribing Butrans and others like Internal medicine that wont write Butrans out-patient because all they write is tramadol and 90% of patients are medicaid and Butrans isnt covered on Medicaid, margie said she knows access is tough in family medicine too. told Margie its just taking longer for physicians to accept Butrans and start prescribing, asked Margie if she would recommend Butrans to physicians, if she provides patient counseling to those taking opioids, Margie said she doesnt really do that for patients and doesnt feel comfortable making opioid recommendations to physicians. asked Margie if she would be willing to give Butrans patient info booklets to patients, so they can speak with their physicians, Margie said that was a great idea and she would do that. discussed OxyContin stocking, Margie said OxyContin's in stock and many departments prescribe OxyContin still. asked Margie if she needed OxyContin savings cards, she said no because majority of patients are medicaid and medicare.
PPLPMDL0020000001	Cleveland	OH	44124	9/20/2011	Doc apologized that he could not attend the speaker program on 09/15. I thanked him for considering attending. I explained to him the indication, the CII status and the 7 day delivery. He said he wantsto attend, perhaps, a program in the future as he would like to learn more about butrans. I gave him the butrans portal invite. Reminded him of the BWC coverage for butrans and oxycontin.
PPLPMDL0020000001	Cleveland	OH	44114	9/20/2011	asked dr when she's in exam room, putting pen to paper, how does she decide if Butrans is an option? dr said she looks at what the patients currently taking, how much medication they are taking and insurance. I asked dr what she meant about how much? dr said if patients are maxed on a short-acting medication she'll decide if they need to try another short-acting or Butrans. asked dr if she would start patients on Butrans, after tramadol fails, dr said no she would go to vicodin. dr said she has 1 patient doing really well on Butrans but has had some insurance issues lately.
PPLPMDL0020000001	Westlake	OH	44145	9/20/2011	Quick call when talking to Juan, I asked the Dr where Butrans has been fitting into his practice. He said he thinks it's a good option when other opioids haven't worked. I reminded him that patients on higher doses of other opioids may not get adequate analgesia with Butrans and that OxyContin may be an option. I reviewed the savings cards and medication guides. They have a few but have no room at this location to keep any more.
PPLPMDL0020000001	Stow	OH	44224	9/20/2011	Sharon came in quickly to lunch and said she has not tried Butrans, hasnt found the right opportunity but did not have any questions or concerns and had to leave for a meeting. Gave her formulary grid
PPLPMDL0020000001	Brooklyn	OH	44144	9/20/2011	Spoke with technician Rhonda who said the pharmacist was busy assisting customers & could not see me. Discussed upcoming pharmacist webinars for Butrans that are available & gave her an information sheet. She said she will make sure each pharmacist sees it. Also reviewed savings programs for Butrans (via automatic e-voucher for those eligible) & OxyContin (via savings cards). Also let her know OxyContin cards could be used once every 14 days for a person paying cash who's prescription is written that way. She said that was good to know.
PPLPMDL0020000001	Cleveland	OH	44114	9/20/2011	dr marshall asked John, PA working with dr marshall and dr latz, how many patients they have started on Butrans in past 10 days? John said 2-3 patients a day. John said they had 2 patients with medical mutual insurance that couldnt get Butrans, so that was only problem with insurance. showed John Butrans formulary grid, discussed patient savings card program and asked John to focus on BWC and commercial insurance plans as thats the easiest for them.
PPLPMDL0020000001	Warrensville Heights	OH	44122	9/21/2011	I asked Dr Zivic how I am going to get him to think of Butrans for appropriate patients. He said it might take a few more discussions & then he will remember. I asked him why not prescribe Butrans for patients who are not well-controlled on chronic tramadol or Vicodin around-the-clock. Reminded him of once weekly dosing in a transdermal system & asked him what he thought of that. He said it sounds "easy". Also reminded him of CII & asked if he could think of any other long-acting CII. He said no. He asked if he can only prescribe for commercial insurance patients. I told him this is where he would get the least amount of push-back. He asked if it is still expensive for commercial insurance. Discussed formulary availability for commercial plans & savings cards for those patients, bringing them down to around a \$15 co-pay. I asked how that sounded & he said it sounded good. I closed him for one or two of this patient type & he said he would try but that he might need a few reminders again. Handed him Portal invite & told him he could go online at his convenience for an interactive "reminder".
PPLPMDL0020000001	Garfield Heights	OH	44125	9/21/2011	Also discussed OxyContin for appropriate patients beyond Butrans.
PPLPMDL0020000001	Cleveland	OH	44104	9/21/2011	Spoke with Margaret (nurse) & Angie who said Dr Samuel was still seeing patients & it was not a good day. I inquired about utilization of Butrans but Margaret said he has not been using it but she does not know why. Discussed savings cards & managed care for bot Butrans & OxyContin. Margaret said she has plenty of both still. Worked with them to schedule lunch when available.
	Cleveland	OH	44104	9/21/2011	talked to dr about pg.11 visual aid, discussed pain conditions and dr focused on back pain patients, talked about Butrans being an option for these patients, dr said he has 1 patient on Butrans and patient seems to be doing well so far. talked to dr about titration of this patients Butrans dose, if necessary, following up with patient to discuss side effects and be sure patient has Butrans patient info booklet, dr said he hasnt heard anything so thats a good sign and he's seeing the patient soon for a follow-up appt. asked dr if he had more patients to start on butrans with commercial insurance? dr said he does have some patients in mind for Butrans. talked about OxyContin for appropriate patients and insurance coverage for them. Recommended Senokot-S
PPLPMDL0020000001	Parma	OH	44129	9/21/2011	Introduced myself & Purdue's products to Dr Hines. Presented Butrans 5 core messages & asked his thoughts. He said it sounded interesting. Discussed & reviewed appropriate patient type, focusing on patients who he would typically start on a short-acting around-the-clock regimen. Discussed these being potential Butrans patients. Also presented initiation guide to walk him through how to start this patient type on Butrans. Also discussed titration ability after 3 days & ability to take supplemental analgesia in form of opioid or non-opioid medication. He asked if someone on fentanyl was already beyond what Butrans was for. Told him patients on fentanyl were excluded from studies. Discussed that Butrans is a CII opioid & carries abuse/addiction potential. He said there really is nothing else like Butrans & I asked if this meant he could see himself prescribing it. He said yes.
PPLPMDL0020000001	Parma	OH	44129	9/21/2011	Reviewed insurance coverage & savings cards. I also asked about his experience with OxyContin. He said it is an effective medication. Discussed 7 available tablet strengths, including intermediate doses. Also gave him savings
PPLPMDL0020000001	BEACHWOOD	OH	44122	9/21/2011	Spoke with Lesa & Diana (nurses) & introduced Butrans, reviewing 5 core messages. Discussed appropriate range of patients & OxyContin for appropriate patients who are beyond that range. Also showed them demo kit for them to see what Butrans looks/feels like. They said it was interesting. I gave them initiation guide & FPI & asked them to give a copy of each to Dr Eicher & encourage him to read it since it is a product that he probably has not heard of yet. They agreed. They said he was far too busy today to stop to speak with me.
PPLPMDL0020000001	Parma	OH	44129	9/21/2011	Spoke with Sam (pharmacist) who said he is just filling in at this location today. I asked if he was familiar with Butrans. He said he has dispensed it a few times. I presented Butrans pharmacists' webinar information & discussed interactive nature of the program. He said it sounded interesting & that he would register. I reviewed appropriate patient type with him, including patients who are taking short-acting around-the-clock opioids chronically but who are not well-controlled on them. I asked if this was a familiar patient type & he said yes. He asked if a patient could be converted from tramadol to Butrans. Presented initiation guide, focusing him on page 6 with initiation table. Discussed how a tramadol patient could be initiated on Butrans depending on their current dose. He asked how long before it reaches steady state. I told him 72 hours & told him that patients can take supplemental analgesia in form of opioids or non-opioids for breakthrough during Butrans therapy. Also gave him an updated FPI. He was very appreciative of the information & initiation guide.
PPLPMDL0020000001	Parma	OH	44129	9/21/2011	Introduced myself & Purdue's products to Dr Lee. Presented Butrans 5 core messages. He said Butrans sounded like an interesting option. Spent time going over appropriate patient type, including those he would be ready to start on an around-the-clock opioid or someone who was not well-controlled on a short-acting opioid. He said he likes that it is a long-acting CII. Reminded him that Butrans is still an opioid & does still carry abuse/addiction potential. Presented initiation guide & walked through pg 6, discussing how to start different ranges of patients. Discussed OxyContin, with 7 available tablet strengths, as an option for patients who are beyond appropriate range of Butrans patients. He said he will try to remember to prescribe Butrans for a patient who fits the description we talked about.
PPLPMDL0020000001	Bedford	OH	44146	9/21/2011	Dr Moufawad said that he has found that when he tries to switch patients from Vicodin to Butrans that it causes the patient to go into withdrawal. He said he has tried this with a few patients & it seems to happen every time. Discussed proper initiation of treatment with Butrans when switching from other opioids, including focus on recommended taper. He said he has not been doing it that way. He also said the most recent Butrans patient he started never returned for the follow-up visit, so he does not know how they did. I asked what his main hesitation would be on starting more patients on Butrans. He said he just wants to get better training first & that he does not want to be questioned by the Board on how he prescribes. He also said that he is not taking any new patients in his practice, so that rules out many potential Butrans candidates as most of his established patients are on too high a dose of other opioids to be candidates for Butrans. I agreed these may not be appropriate patients & may be better OxyContin patients. He said he really does not like OxyContin but does prescribe it sometimes. He added that he does not write new prescriptions for it generally. I asked if this was a long-standing policy of his. He said yes & then again stated that he is not taking new patients & it seems that he is always being questioned by people on how he practices.
PPLPMDL0020000001	Parma	OH	44129	9/21/2011	Spent time with Tracey, a pharmacy technician who works with Stan & Kevin in the hospital pharmacy. Went through 5 Butrans core messages & spent time going over appropriate patient type. I asked what her thoughts were on use in the hospital. She said she could definitely see physicians ordering it in the hospital setting, specifically to send patients home on. She also said that Stan will occasionally allow lunches with the pharmacy staff. I asked how to schedule this & if I would be able to even if the product was not on formulary. She said she was not sure but I could check with Stan via email or phone. Tracey also said that Parma Hospital's pharmacy dispenses medications to area hospices & that Parma Community General Hospital has its own hospice on Pleasant Valley that they dispense for & courier there. I mentioned Dr Gallagher & how he has started to get Butrans experience. She said he is extremely important & that he is the head physician over all of the hospices they service. We also discussed their utilization of OxyContin. I asked about the HUD strengths they carry & she said they carry most of them, but probably not all of them.
PPLPMDL0020000001	Cleveland	OH	44109	9/21/2011	talked to Debbie, pharmacist, who said she's not seen any Butrans scripts, but does have the Butrans 5mcg in stock. showed Debbie Butrans 5 core selling messages, she talked about transdermal delivery and once weekly application & 2 benefits she saw in Butrans that stood out. we discussed formulary coverage for Butrans. asked Debbie if she would give patients the Butrans patient info booklets, if patients are taking short-acting opioids and not controlled, to discuss Butrans with their doctors? Debbie said she would do that. discussed OxyContin stocking and appropriate patients for OxyContin, talked to Debbie about OxyContin insurance coverage. recommended
PPLPMDL0020000001	Westlake	OH	44145	9/21/2011	Quick call, I asked if he had started any new patients on Butrans recently and how the success has been. He said he has not, he had some hassles with managed care, but still would like to try Butrans more. I asked if he could focus on commercial insurance and that most patients will have as low as a \$15 copay.

	Parma	OH	44129	9/21/2011	Dr Gigliotti said he has one patient who is doing well on Butrans & who is still on it. I asked about others. He said he is still waiting to hear feedback from 2-3 others so far. I asked if he plans to continue choosing patients & he said he will. He showed me that he still has the savings cards package that I gave him displayed on his desk. I told him they don't do anyone any good if they just sit on his desk. He laughed & said he would find more patients. Also OxyContin reminder for patients beyond Butrans appropriate range of patients.
PPLPMDL0020000001	University Heights	OH	44121	9/21/2011	Doc said his issue with butrans is cost. I explained the commercial plans and left a formulary grid. Reminded him that patients should receive a savings cards.
PPLPMDL0020000001	Cleveland	OH	44113	9/21/2011	talked to dr about the 2nd patient she started on Butrans,showed Butrans visual aid,pg.11 inclusion criteria,dr focused on back pain,talked about Butrans being an option for patients with this pain condition.discussed initiation of Butrans,titration,showing patients Butrans patient info booklets and focus discussion on application/rotation of Butrans,focused dr on BWC and commercial insurance.asked dr if she has more patients to start on Butrans this week? dr said she probably will see many patients that are appropriate but so many patients have medicaid insurance,so she has to fill out a PA for them,just a longer process.told dr that was great she had patients in mind but focus on BWC and commercial,dr said ok.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44104	9/21/2011	talked to dr about pg.11 pain conditions,dr talked about patients with osteoarthritis,discussed 5 Butrans core selling messages and dr focused on transdermal delivery and once weekly dosing.asked dr if he had patients like we discussed that he could start on Butrans this week? dr said probably so,dr asked about medicare coverage again,told dr to avoid medicare now and focus on commercial insurance patients,dr said ok.talked about OxyContin being an option for patients,showed conversion guide discussed some conversions from vicodin to OxyContin and percocet to OxyContin,discussed insurance coverage for OxyContin and recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44102	9/21/2011	talked to marian,MA and Jasmin,MA,about Butrans being an option for patients,showed 5 Butrans core selling messages visual aid,asked them to speak with dr about Butrans when they see patients with pain conditions,pg.11 visual aid,that arent controlled on their short-acting opioids,both medical assistants said they would do that.told them to focus dr on BWC and commercial insurance.
PPLPMDL0020000001	Mayfield Heights	OH	44124	9/21/2011	HCP said that she has had a few reports of complaints about skin burning with the butrans patch and increases with increased dose. She said she has not had a problem until recently. I explained the that application site pruritis is a AEs in studies. She asked about the use of 2 patches at a time. I explained that it is not recommended. She still likes the product and will continue to prescribe.
PPLPMDL0020000001	Cleveland	OH	44113	9/21/2011	talked to Deb,PA,about Butrans 5 core selling messages,Deb said she just had lunch yesterday with Ashleigh and loves Butrans.Deb said she started a patient yesterday,at Dr.Tricketts office where she works 2xweek.I asked Deb where Butrans will fit into this practice,as this is a pain clinic versus dr tricketts office being physical medicine and rehabilitation? Deb said patients taking 4-5 tabs of Vicodin 5/500 daily would be her ideal patient instead of pushing the dose higher.told Deb that was a great place for Butrans.Gave Deb Butrans initiation guide,discussed initiation dosage strengths,discussing titration up front which she said she does so that would be easy and discussing side effects with patients up front, I went through Butrans patient info booklet with Deb and asked that she focus on application/rotation section for Butrans and show patient the log book in back of booklet.I showed Deb Butrans demo, disposal unit and carton.I showed Deb Butrans patient savings cards,explained savings card program and told Deb to focus on commercial insurance patients for the cards or BWC patients here to start on Butrans,Deb said ok and that she will be starting some patients on Butrans at this office which is with dr nickels, a pain management clinic.
PPLPMDL0020000001	Mayfield Hts	OH	44124	9/21/2011	Doc said that he has a few younger patients on butrans but the 10mcg does not work. He said he is frustrated that medicare is not covering it as the elderly are the ideal patients. I focused him on the proper starting dose for opioid naive and opioid experienced.
PPLPMDL0020000001	Euclid	OH	44117	9/21/2011	Doc said he tried a BWC patient on butrans and he said the patient didnt like it/it didnt work/. He did not remember what strenghts he wrote the script for. He switched the patient back to vicodin. Patient was on vicodin ES TID. I explained that that patient and other like him should be started on a 10mcg for best success. He has another patinet on Butrans that is doing well/he has not heard back from. He said he will continue to look for other dr said he's starting more patients on Butrans,dr said 1 patient read the Butrans patient info booklet in exam room and wanted to try Butrans,dr didnt want to try Butrans initially because this patient has been taking Suboxone,dr explained that Butrans has no indication for treatment of addiction.I showed dr Butrans fpi,noting section 5.17,no treatment for addiction indication and showed Butrans indication again in FPI dr said he knows and told patient all of that info,patient said this was only for his chronic pain that was it dr said he decided to start the patient on Butrans and see what happens.dr said he's now starting to think of patients that are taking Vicodin 5/500,4-5 tabs a day so 20-25mg daily,that arent controlled,on Butrans.I asked dr if he was giving patients any immediate release opioid for breakthrough pain,with Butrans? dr said he has and doesnt see a problem in giving patients Vicodin for breakthrough,just smaller amount.asked dr if he would start a patient on Butrans,that was taking 2 tabs daily of Vicodin,5/500,if not controlled? dr said probably not.asked why? dr said because insurance companies,like Caresource/Medicaid want you to continue trying generic med's like Vicodin until patients are at 4-5 tabs daily and not controlled.asked dr if there was no insurance issue,whats the clinical benefit of increasing patients vicodin,after the 2 tabs daily arent controlling pain? dr said there really isnt any clinical benefit,just insurance related.
PPLPMDL0020000001	Cleveland	OH	44113	9/21/2011	talked to dr about his patients with some of the pain conditions listed,pg.11 visual aid,and how Butrans could be an option for them dr said he hasnt thought about Butrans but remembered it was transdermal.showed dr 5 Butrans core selling messages,dr focused on once weekly dosing option and Butrans being a CII,dr said a CII is easier for his staff so they can call in refills.asked dr if he has a couple patients this week that he can start on Butrans? dr said he probably does and he will look for some patients.dr asked about medicaid insurance coverage for Butrans? told dr to focus on BWC,commercial and tricare.dr said medicaid is biggest patient population.talked to dr about PA requirements for Medicaid and dr said ok he might be willing to get PA done for those patients if he feels they are appropriate.talked about OxyContin as an option for patients,showed conversion guide and discussed some conversions from short-acting opioids to OxyContin,discussed OxyContin formulary coverage.recommended Senokot-5
PPLPMDL0020000001	Parma	OH	44134	9/22/2011	Dr Scanlon said he just prescribed Butrans 2 days ago. I asked him to tell me more about the patients. He said they have been patients who have already been on an opioid who were not well-controlled. I asked him what dose he has been starting patients on & he said he always starts patients on 5mcg. I asked if he ever has to titrate the dose. He said he has moved one or two patients up to a 10mcg. I asked if he has ever needed to use the 20mcg & he said no. I asked what kind of feedback he has been given from patients. He said the ones he has heard from have given positive feedback. He added that he has not been told of any adverse events so far, so that makes him confident in prescribing as well. I asked if that means he will continue to identify patients & he said yes. I asked what his thoughts were on trying Butrans for patients if they have a chronic condition & are not well-controlled on 2-3 tramadol per day. He said he thought it was a good idea to get patients started on Butrans at that point than waiting until later in opioid therapy. I asked if he would identify a few patients like that to start on Butrans & he said yes.Also discussed OxyContin as an option for appropriate patients beyond Butrans 20mcg.
PPLPMDL0020000001	Westlake	OH	44145	9/22/2011	I asked Dr to tell me about the patients he's started on Butrans, he said so many of his patients are Medicaid and he trying to get them on lower doses of Butrans. We reviewed the manged care and I asked if he would focus on commercial and BWC patients. He said he will and he does have patients that he could talk to about Butrans. We discussed OxyContin and that he is trying hard to taper patients down.
PPLPMDL0020000001	Cleveland	OH	44102	9/22/2011	talked to Nagla,PA,about appropriate patients for Butrans,showed visual aid,pg.11,talked to Nagla about pain conditions where Butrans could be an option for patients.Nagla said she is recommending Butrans to the doctors,3 in practice,so they can get more clinical experience with Butrans.Nagla said long-acting opioids are her choice instead of all short-acting opioids when treating chronic pain conditions.discussed patient info booklet,asked Nagla to focus patient discussions on application/rotation of Butrans.Nagla said she's been doing that and booklets are helpful as they educate patients.focused Nagla on BWC and commercial plan patients.recommended
PPLPMDL0020000001	Parma	OH	44134	9/22/2011	Dr Loyke reminded me of his feeling of prescribing opioids. I told him I remember. He said he just wants reps to be honest with him & I told him he would always get honesty from me. He asked if I would tell him ever where not to prescribe my products & I agreed to do this. He looked through the initiation guide & asked about Butrans dosage. Showed him pg 6 & pg 8 to show how to initiate treatment & discussed titration ability after 3 days to a maximum 20mcg. He said he does like the idea of a long-acting transdermal that is a CII. Reminded him Butrans is just as abuseable as any other opioid & advised that he use the same caution he would with any other opioid.
PPLPMDL0020000001	Parma	OH	44134	9/22/2011	He agreed. He said he actually thinks he might be able to prescribe Butrans for a few patients. Discussed OxyContin as an option for appropriate patients who are beyond the range of appropriate Butrans patients.
PPLPMDL0020000001	Parma	OH	44134	9/22/2011	Introduced myself & Purdue's products to Lynda, a new NP in Dr Scanlon's office. Reviewed Butrans 5 core messages & asked her thoughts on a long-acting CII. She said that as a new NP, she would have hesitation with any narcotic. I told her she should be cautious in prescribing. Discussed buprenorphine as a partial mu opioid receptor agonist & as a CII opioid. Drew her attention to black box warning & advised that Butrans is just as abuseable as any other opioid. Also discussed disease states that cause chronic pain such as spinal stenosis & intervertebral disc disease. She said she does like transdermal technology & has used some of the other transdermal products in her practice. Discussed importance of appropriate patient selection.
PPLPMDL0020000001	Cleveland	OH	44114	9/22/2011	talked to Laura,pharmacist,about Butrans 5 core selling messages showed flashcard and asked Laura what stood out to her about Butrans? Laura said transdermal delivery and once weekly dosing application.Laura said she thinks Butrans is a great option for patients but she's not seen any scripts yet and wont order Butrans until she gets 1st script.talked about importance of stocking,appropriate Butrans patients showed initiation guide and discussed commercial plans,BWC and patient savings cards for commercial plan patients.I asked Laura to recommend Butrans to patients,when patients are taking short-acting opioids for their chronic pain but not controlled and have patients talk to their doctors about Butrans.Laura said she will do that.discussed OxyContin appropriate patients,conversion guide left for Laura,discussed formulary coverage for OxyContin.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44120	9/22/2011	talked to Daniel,Pharmacy tech,and Keith,floator pharmacist,as Stewart the narcotics buyer is no longer here.Marc is the narcotics buyer and off work today.Keith,Pharmacist,said he knows Butrans scripts are getting filled here but doesnt know who's writing and no time to look now,showed Keith Butrans 5 core selling messages and asked what stood out to him? Keith said transdermal delivery and 1 application with 7 day dosing.Keith said Marc would be the person for me to meet with and discuss Butrans as he's only a floator.gave Keith Butrans fpi,initiation guide,showed patient info booklet in case patients come in today to fill scripts for Butrans he can give them a booklet and focus on application/rotation of Butrans,Keith said ok he would do that.we talked about appropriate patients for OxyContin,gave conversion guide and recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44195	9/22/2011	talked to Lisa,MA,as dr wasnt free to see me,about 5 Butrans core selling messages,talked about appropriate patients for Butrans,showed visual aid pg.11 pain conditions and asked Lisa if they treated these types of pain conditions? Lisa said they have a lot of arthritis patients so this could be an option for them.Lisa talked about once weekly application of Butrans and I showed Lisa Butrans patient info booklet,asked her to discuss all of this info with dr,Lisa said she would and dr will decide if he wants to set-up an appointment with me to discuss Butrans further but Lisa recommended I stop back again and keep trying to see dr.focused Lisa on commercial plans and BWC for Butrans and discussed Butrans patient savings cards.
PPLPMDL0020000001	Cleveland	OH	44113	9/22/2011	talked to Justin,Pharmacist,about Butrans scripts and stocking,Justin said 1 script came in this week from Dr.Shen but thats it.Justin said he has all 3 Butrans dosage strengths in stock.talked to Justin about physicians im working with in the area and showed 5 Butrans core selling messages flashcard and Justin said once weekly dosing and transdermal delivery are the 2 features that really stand out to him for Butrans.discussed OxyContin stocking and appropriate patients for OxyContin.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44109	9/22/2011	talked to dr about pain conditions,pg.11 visual aid,he treats and dr said he see's a lot of these listed.asked dr to focus on a couple commercial patients taking tramadol,daily but not controlled and start them on Butrans.we discussed immediate release opioids being given with Butrans or non-opioid therapy.dr said ok he's got a few patients in mind that he can start on Butrans,he will just need to talk to them about Butrans being a patch,showed dr Butrans patient info booklet and asked dr to focus on application/rotation of Butrans with these patients.dr said ok he will do that.talked about OxyContin being appropriate for patients,showed dr OxyContin conversion guide and discussed Oxycontin formulary coverage.asked dr to continue starting patients on OxyContin,dr said ok.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44104	9/22/2011	talked to dr about Butrans being an option for her patients with pain conditions,pg.11,dr said most of her patients with arthritis are controlled on tramadol so she's not making any changes,told dr that was fine and she shouldnt make changes if patients are controlled.asked dr if patients ever call in earlier for refills? dr said yes occasionally,asked dr to stop and not refill tramadol but start patients on Butrans? dr said she will if this happens.focused dr on commercial insurance and discussed patient savings cards.recommended Senokot-5
PPLPMDL0020000001	Cleveland Heights	OH	44118	9/22/2011	Quick call....reminded doc that he previously said that butrans might be good for patients that can not tolerate hydrocodone. I asked him how often he sees patients that can not tolerate vicodin. He said from time to time. I asked him to try those patients on Butrans instead as long as they meet the indication.
PPLPMDL0020000001	Cleveland Hts	OH	44118	9/22/2011	Quick call....Reviewed the Butrans indication, 7 day application, and the positioning. He said he has not used it yet. I asked that he try for a patient taking a low dose vicodin instead of increasing their dose. Oxycontin coverage reminder.
PPLPMDL0020000001	Westlake	OH	44145	9/22/2011	I asked Dr what I can do to help with the progress of getting Butrans on formulary, he said that it is still on the list of drugs to review and he will keep me posted. I asked if he is still starting new patients and he said that he is and would like to use it more in the hospital so that he can see how they do and then send them home on it.

PPLPMDL0020000001	Berea	OH	44017	9/22/2011	I showed the initiations presentation and asked if he sees patients like Evelyn who are taking tramadol around the clock. He said that he does. We discussed the option of using Butrans 10mcg for this type of patient and he said he would keep it in mind.
PPLPMDL0020000001	Highland Heights	OH	44143	9/22/2011	Window call...I asked doc how patients are doing on butrans and if he is still having success. He said things are going well aside from a few coverage issues. I reminded him to focus on patients with commercial coverage and be sure to give a savings card. He said he is doing that. Provided an oxycontin formulary grid as well.
PPLPMDL0020000001	Cleveland	OH	44104	9/22/2011	talked to dr about pain conditions,pg.11 visual aid,and considering Butrans for these conditions,dr talked about patients with back pain as so many people have back pain.dr said he tells patients to eat healthier,exercise,try physical therapy and if that doesnt work he will tell them to take NSAIDs and give muscle relaxers.dr said if that doesnt control pain,he'll start with ultram.talked to dr about starting patients on Butrans right after the ultram doesnt control pain for these conditions,dr said that makes sense to consider Butrans earlier in therapy and not wait so long. asked dr if he had some patients today and tomorrow that are like we discussed,where he can start them on Butrans? dr said he's sure he will have a few and will consider Butrans.focused dr on commercial plan patients and discussed patient savings cards with dr.talked to dr about OxyContin being an appropriate option for patients and showed conversion guide,talked about formulary coverage and asked that dr continue starting patients on OxyContin,dr said he will do that if patients are appropriate.recommended Senokot-S
PPLPMDL0020000001	Cleveland Hts	OH	44118	9/22/2011	I reviewed the butrans indication and appropriate positioning after tramadol. He said he does not have a lot of tramadol. I explained that it does not have to be tramadol and can be next after NSAIDs or before going to vicodin ATC. I explained the CII status which means that it can be called in or refilled. He asked about the frequency of the dosing. I reminded him that one dose lasts for 7 days - once weekly dosing. I asked him to try one patient that he may be considering for vicodin. He said ok. Gave him a titration guide and formulary grid.
PPLPMDL0020000001	Cleveland	OH	44104	9/22/2011	dr said she keeps forgetting about Butrans,she has so many medications in her mind and so many reps that she really hasnt thought of Butrans to start any patients.dr said 1/2 of her chronic pain patients are controlled on percocet and dont need a change,the other 1/2 are sent to pain management.dr said she's very frustrated with her pain patients because all they do is demand their pills and she has other things to look at with patients seeing she's family practice.told dr to not think of "chronic pain patients" but to look at pain conditions.pg.11,inclusion criteria,asked if dr treats these? dr said yes.asked dr how she manages chronic pain for these conditions? dr said ultram,50mg q6h,200mg is max she will prescribe.dr said when ultram doesnt control pain she will start some patients on vicodin or percocet.dr said she hates that patients have to come get scripts monthly,for percocet.asked dr if she has any patients taking ultram,with 1 of the pain conditions shown pg.11,that perhaps arent controlled,and dr could start them on Butrans? dr said she has a few patients in mind that could try Butrans.asked dr if she will start them on Butrans? dr said she will do that and thinks she just needs to get some clinical experience with Butrans.talked to dr about showing patients Butrans patient info booklet,focus discussion on application/rotation section,dr said ok.we discussed 4 patient case studies,initiations,dr said she doesnt like long-acting opioids,has 1 patient on OxyContin
PPLPMDL0020000001	Cleveland	OH	44112	9/22/2011	I discussed the Butrans CII status, 7 day delivery and appriate patient type...I asked doc if he logged into the butrans portal. He said no, what's that. I gave him another portal invite and told him he could learn about proper patient selection. He asked me to let him know about the next speaker program. Told him it would be coming up soon.
PPLPMDL0020000001	Cleveland	OH	44195	9/22/2011	met Patty briefly in hall,introduced myself talked about Butrans 5 core selling messages,patty said she's read most of the info i have been dropping off but hasnt really thought of any patients to start on Butrans.showed patty pg.11 pain conditions and asked if they treat these conditions? patty said they do and she'll take info with her today to review but didnt have more time to talk.gave Patty Butrans fpi,initiation guide,portal invite,patient savings card flashcard and formulary grid and patient info booklet.recommended Senokot-S
PPLPMDL0020000001	Westlake	OH	44145	9/23/2011	Quick call with Jamie, he thinks they have at least one patient on the 10mcg dose of Butrans. He did not remember who wrote. He said is is not moving as quickly as he would have thought. We discussed what to let new Butrans patients know when they get a script. Reminder about the savings programs for Butrans and OxyContin.
PPLPMDL0020000001	Euclid	OH	44119	9/23/2011	Doc said he was just thinking about butrans. I asked him what it keeping him from trying a patient on butrans. He said nothing. I gave him a "for the week ahead" sales piece. He reviewed each of the messages and a I asked him to prescribe for one patient that has failed on tramadol. Explained that medicare/medicaid is not covering. savings cards for commercial patients.
PPLPMDL0020000001	Independence	OH	44131	9/23/2011	Caught Dr Keppler on his way out of the office. He asked me to review Butrans with him as he forgot many of the details. Reviewed 5 core messages which refreshed his memory. Roman told Dr Keppler that they should write it for patients with commercial insurance. Discussed managed care & likelihood of prior authorization with Medicare & Medicaid plans. He said he will keep this in mind going forward. Reminder of appropriate patient type.
PPLPMDL0020000001	Twinsburg	OH	44087	9/23/2011	Spoke with MA Jackie. Reviewed Butrans appropriate patient type, including patients with a chronic issue causing pain who call too soon for refills of around-the-clock short-acting opioids like tramadol or Vicodin. Jackie said she does not think any of the prescribers have written Butrans at all & said that usually the doctors send anyone with chronic pain to Dr Moufawad since he is there one day a week. I asked her to leave Butrans information for Dr Leonard & she agreed. Suggested I schedule breakfasts/lunches to see her.
PPLPMDL0020000001	Cleveland	OH	44105	9/23/2011	talked to Abdul,Pharmacist,about butrans stocking and Abdul's not seen any scripts and hasnt ordered Butrans yet.showed Butrans 5 core selling messages,Abdul said he'll continue recommending Butrans to patients by giving them Butrans patient info booklets.discussed OxyContin stocking and appropriate patients.recommended Senokot-S
PPLPMDL0020000001	Garfield Hts	OH	44125	9/23/2011	Spoke with technician who said the pharmacist was too busy to speak with me. I gave her information on Butrans pharmacists' webinars & let her know of the interactive nature of the programs & that they could ask questions during the webcast. She said she would give this to Sarah & the other pharmacists. She said she was not sure if they would be interested or not. Reviewed Butrans appropriate patient type, including patients who are not well-controlled on tramadol or Vicodin around-the-clock for a chronic condition. She said they often get calls from patients like that who request refills before they are due. I let her know these are potential Butrans patients if appropriate. Also discussed automatic savings via e-voucher & OxyContin savings cards.
PPLPMDL0020000001	Brooklyn	OH	44144	9/23/2011	Spoke with pharmacist Cheryl & presented patient information booklets. Walked her through patient counsel for application, rotation, & disposal. She said they would be helpful, especially for people who have not used transdermal medications before. Also gave her an updated FPI & information on pharmacists' webinar. Let her know she would be able to ask questions. She said she thought that was a great idea. I reviewed with her appropriate Butrans patient type, focusing on patients who are not well controlled on tramadol around-the-clock for a chronic condition. She said it is nice to have an option between tramadol & Vicodin. Discussed OxyContin as an option for appropriate patients beyond Butrans range & asked if he needed additional savings cards- she did not.<font color=blue>-cb>CHUDAKOB added notes on 09/29/2011</b>-</font>-Nice job on selling the talked to Rod,Pharmacist,about Butrans stocking and Rod said he's not seen any scripts yet.showed 5 Butrans core selling messages,asked Rod what features stood out to him? once weekly dosing and Butrans being a patch.asked Rod if he'll recommend Butrans,to patients taking short-acting opioids but not controlled,and give them patient info booklets to discuss with dr? Rod said he will do that.discussed OxyContin appropriate patients and confirmed stocking.recommended Senokot-S
PPLPMDL0020000001	Westlake	OH	44145	9/23/2011	I reviewed our last conversation and I asked if his patient was able to get Butrans covered on insurance. He said he did not hear back and she should have filled the script on Wednesday so he thinks it went through. He has been giving out the savings cards. I asked if he would start a new patient today and he agreed.
PPLPMDL0020000001	Brooklyn	OH	44144	9/23/2011	Dr Detwiler saw the Butrans core sales aid in my hand & said, "I am not going to write this product. There are just too many generic alternatives to treat pain." I attempted to remind him of previous conversations when he indicated that Butrans was something he would potentially use & saw value in, but every time I started to write it, he cut me off saying the same thing about not prescribing & there being too many generic alternatives. He walked into a room before I had the opportunity to discuss anything further with him.
PPLPMDL0020000001	Twinsburg	OH	44087	9/23/2011	Spoke with technician Nicole & gave her information about upcoming pharmacists' Butrans webinars. I asked her to pass this information along to Lou & she agreed. Also discussed formulary coverage for Butrans & OxyContin & reviewed e-voucher savings for Butrans as well as OxyContin savings cards. She said they did not need any OxyContin cards as they still have several on-hand. She said she has seen Butrans on their shelf but is not sure if they have dispensed any or not. She said she does not know of any customers on it.
PPLPMDL0020000001	Independence	OH	44131	9/23/2011	Reminded Roman of our previous Butrans conversations & asked what his experience has been. He said it is too expensive. I told him this is not the case if he prescribes for commercial insurance patients, especially if he gives them the savings cards. He said he just doesn't pay attention to what insurance they have. I told him this would cause some managed care push-back & likelihood of rejection if he is prescribing for Medicare or Medicaid. I asked if he thought a \$15 co-pay was reasonable & he said yes. He said he will do his best because he does want to use it. He said he has identified some patients but he got managed care push-back & the co-pays were so large for these patients that it made him stop trying. Asked him to not give up & to try to focus his writing on commercial insurance patients. He said he would do this. OxyContin savings cards reminder. He said he is a big learner. I gave him formulary grid and asked to try one patient.
PPLPMDL0020000001	Cleveland	OH	44109	9/23/2011	showed pg.11 visual aid,asked dr if he treats these types of pain conditions? dr said yes.asked dr how he manages chronic pain treatment for these conditions? dr said typically NSAIDs,physical therapy,non-opioid medications but if pain persists dr will start patients on tramadol.asked dr if he had a few patients with 1 of the conditions we discussed that he could start on Butrans right after tramadol isnt controlling the pain? dr said he probably does but most patients are controlled on their short-acting opioids at the moment.told dr if patients were controlled there's no need to make a change,yet for the patients who arent controlled or calling in earlier every month for refills those patients could potentially be started on Butrans,dr said ok.focused dr on commercial and BWC.OxyContin reminder.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	9/23/2011	worked pm&r dept
PPLPMDL0020000001	Independence	OH	44131	9/23/2011	Jill (MA) said Dr Pai wasn't available as he was too far behind. Offered to wait but she said he would not want to stop to talk. I reviewed Butrans formulary information with her & also reviewed managed care status for OxyContin. Reminded her that there are savings cards for both products. She said she has enough of them. I offered OTC samples but she said they have enough of those as well. She said Dr Pai is the one who gives out Doc said she is still looking for opportunities for butrans. She wants to prescribe but is not seeing the patients with the right coverage. I asked her if butrans was covered on medicare if she would have any other objections. She said no, not at all. I reviewed the specific plans where butrans is covered and the savings card program. She still has savings cards.
PPLPMDL0020000001	Lyndhurst	OH	44124	9/23/2011	Spoke with Lisa, we reviewed the Butrans medication guide. I asked which Drs in the area write for a lot of short acting month after month, she said the TriCity groups see a lot of pain patients for primary care. She might let a patient know about another option but she would probably not recommend to the Dr. We reviewed the savings program for both Butrans and OxyContin.
PPLPMDL0020000001	Westlake	OH	44145	9/23/2011	Spoke with pharmacist Nancy who said she was disappointed that she has not seen more Butrans activity than she has. She looked in her computer & verified that she has dispensed it once since my last visit. She said it was a 5mcg box & it was dispensed about a month ago, so she said she would stay on the look-out as that person should be coming in soon for a refill. She said she would let me know of any feedback she was given. Gave her a new FPI & information on the pharmacists' webinar in October. She said she would have a look at it. Let her know how to register if she wanted to participate. Also reviewed automatic savings via e-voucher & OxyContin savings cards although she said they really don't dispense that there.
PPLPMDL0020000001	Cleveland	OH	44103	9/23/2011	talked to dr about patients she's starting on Butrans,asked her to look at pain conditions.pg.11,and did she have any patients with these conditions that Butrans could be an option for? dr said she probably does have some patients and focused on back pain patients asked dr if she will start a few patients today and next week,with back pain,on Butrans? dr said if patients are willing to wear a patch she will start them.focused dr on commercial plan patients.oxycontin reminder and recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	9/23/2011	showed dr pg.11 visual aid,talked about pain conditions he see's in practice dr talked about back pain patients.i asked dr if he had a few patients with back pain where Butrans would be appropriate? dr said he might and would have to think about it.told dr to focus on commercial plan patients.Oxycontin reminder and recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	9/23/2011	dr said he started a couple more patients on Butrans and he's seeing improvements in patients pain levels.asked dr if the patients he started happened to have any of the pain conditions shown on pg.11,visual aid? dr said yes back pain,we discussed Butrans as an option for those patients with these pain conditions.dr said he'll continue starting patients on Butrans.showed patient info booklet asked dr to focus discussion on application/rotation of Butrans,dr said he did that and has been giving those to patients.focused dr on BWC and commercial plans.gave OxyContin reminder.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	9/23/2011	dr said she started 1 patient on Butrans and patient is doing well.dr said patient was taking tramadol every day for low back pain and wasn't controlled so she thought Butrans would be an option.i asked dr if she had more patients like this to start on butrans? dr said yes.focused dr on BWC and commercial insurance.OxyContin reminder and recommended Senokot-S



PPLPMDL0020000001	Cleveland	OH	44102	9/23/2011	talked to Amol, Pharmacist, discussed Butrans stocking and he's not seen any scripts for butrans. showed visual aid, 5 butrans selling core messages and amol focused on once weekly dosing option and transdermal delivery. talked to amol about insurance coverage for Butrans. asked Amol if he will recommend Butrans to patients that are taking short-acting opioids but not controlled and give them Butrans patient info booklets? Amol said yes. discussed OxyContin stocking. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	9/23/2011	talked to dr about patients with pain conditions. pg. 11 visual aid, that he treats and considering Butrans for them. dr said he hasn't thought about Butrans, keeps forgetting but knows its transdermal and its an opioid. talked about 5 core selling messages, dr talked about transdermal delivery and once weekly application. asked dr if he had a few patients with conditions like we discussed that he could start on Butrans? dr said he might. focused dr on BWC and commercial insurance plans. talked about OxyContin as an option for patients, discussed some conversions in conversion guide and showed formulary grid. dr said he has a lot of patients on
PPLPMDL0020000001	Mayfield Hts	OH	44124	9/23/2011	I asked doc what he does for patients that might be taking tramadol ATC for persistent pain and max doses no longer work as well. He said it depends, maybe he send them to pain mgmt. I reminded him that Butrans might be a good option for those patients. Discussed the 7 day delivery, CII status, and dosing. He asked about coverage. Reminded him of the BWC coverage and asked him to try butrans for one of his BWC patients. <font color=
PPLPMDL0020000001	Euclid	OH	44119	9/23/2011	added notes on 10/10/2011</b></font>Thank you for the clarification. First he has to be sold on the product. If not, insurance coverage won't matter, because he won't try it.
PPLPMDL0020000001	Euclid	OH	44119	9/23/2011	Met with pharmacy Mgr, Nagy Ramzy. He said that it is the Cleveland clinic system policy not to meet with drug reps. I was able to introduce him to butrans - discussing the key selling messages: 7 day delivery of buprenorphine, CII status, indication, and dosing. He said that I can leave info. Left him an oxycontin dosing card and butrans initiation guide.
PPLPMDL0020000001	Garfield Hts	OH	44125	9/23/2011	SPoke to Dave about the stock and movement of butrans. He said he still has it but not seeing any scripts for it. He said that this area is kind of "funky" when it comes to products like butrans. Also, they get a lot of medicare and medicaid. I discussed the commercial insurance plans and savings cards/relay health. He said he still has a steady flow of oxycontin (regular customers). After the reformulation, many people were switched to Opana ER. He believes because of the street value of Opana ER. I explained that we (Purdue) don't want patients that are diverting these meds.
PPLPMDL0020000001	Euclid	OH	44119	9/23/2011	Opened call by asking Dr Sadowski why he wouldn't prescribe Butrans if a patient had a chronic issue causing pain was not being well-controlled on tramadol. He stopped & said, "I had a patient... Is it covered on Medicaid?" I told him about prior authorization requirements. He said he thought Butrans would be a good option for this patient who fit the description I mentioned but that patient has Medicaid. He said he might have Deena do the prior authorization for it. He asked me for something with the Butrans name on it so that he could remember to do this. I gave him a reminder leaver & Deena also said that she has Butrans items placed all around the office for him. Discussed dosing, CII & abuse/addiction potential. Reminder message for OxyContin for patients beyond range of appropriate Butrans patients. Deena said she knew it would be a matter of time before he thought of a specific patient. I let her know I would return to follow-up on this.
PPLPMDL0020000001	Lyndhurst	OH	44124	9/23/2011	Window call....reminded doc of the butrans patient type and key selling messages. Provided formulary grid and FPI. Nothing learned.
PPLPMDL0020000001	N Royalton	OH	44133	9/26/2011	Invited HCP to the 10/20 butrans speaker program. Explained that its an opportunity to learn about patient selection through case studies such as those patients on maximum doses of tramadol. She asked that I remind her as the program is still a few weeks away. Told her that most of her patients would likely start on the 10mcg. <font color=blue><b></b></font>CHUDAKOB's query on 09/29/2011</b></font>This is not a next call objective. How will following up on a speakers program advance the sales process? This is a next call activity. <font color=green><b></b></font>SIMERTOC's response on 10/07/2011</b></font>Its going for a "close". Closing her on attending a program gets her that much closer to prescribing the product. <font color=blue><b></b></font>CHUDAKOB added notes on 10/10/2011</b></font>Perhaps, but your ability to close her for action will get her to prescribe to the product even
PPLPMDL0020000001	Parma	OH	44129	9/26/2011	Spoke with pharmacist Matt & inquired about his dispensing of Butrans. He said that he has dispensed it & that they have "a couple" patients on it. He said they stock the 5mcg strength. Gave him information on upcoming pharmacist webinar & asked him to log on to the interactive program. Also reviewed Butrans appropriate patient type. Offered savings cards & he accepted. Discussed card usage & eligibility requirements.
PPLPMDL0020000001	Independence	OH	44131	9/26/2011	Dr Taylor said that she has been out of the office for two weeks & is just returning. She said she is frantically trying to learn her new computer system & it was not a good time for a discussion. Reminder of appropriate patient type for Butrans, focusing on patients who are established & who are not well-controlled on their short-acting opioid. She said she is keeping Butrans in mind but just has not seen any patients for a few weeks so she is just now getting back into things. Also reminder for OxyContin for patients beyond Butrans as a q12h option. Dr Taylor said to come back next week so that we could discuss everything further. I agreed.
PPLPMDL0020000001	Cleveland	OH	44106	9/26/2011	Dr Rutkowski said he is still keeping Butrans in mind & he pointed to the Butrans savings cards as he walked past me. I handed him a Portal invite with an initiation/titration guide & asked him to at least review the initiations guide to familiarize himself with the appropriate patient type. He said they would have a look.
PPLPMDL0020000001	Parma	OH	44129	9/26/2011	talked to dr about pg. 11, visual aid, discussed pain conditions and how Butrans could be appropriate for his patients with these conditions. asked dr if he treats these pain conditions? dr said yes but he treats these conditions with short-acting opioids. dr said he's not a big writer of long-acting opioids so he's not sure of Butrans. asked dr what concerns he has about long-acting opioids? dr said he's not sure off hand just doesn't have a lot of experience with long-acting opioids. showed dr Butrans visual aid, discussed MOA of Butrans, appropriate patients and initiation of Butrans. asked dr if he has a few patients, with pain conditions we discussed, that he could start on Butrans? dr said he might and will think about it. focused dr on commercial plan patients and use of Butrans patient savings cards. OxyContin reminder. recommended Senokot-S
PPLPMDL0020000001	Beachwood	OH	44122	9/26/2011	I asked Jennifer what information I could provide to her that would help make her more comfortable with Butrans. She said she was not sure. I asked if she would be comfortable enough to continue someone on it if they came to her already on it. She said yes & that she has noticed it on more patients' OARRS reports lately. She asked how she would change someone who "likes" taking pills every few hours. I asked what she meant by "liked". She said someone who is used to taking pain medication multiple times per day orally. I told her it depends on what kind of medication dose they are already on. She said she is just wondering how she would switch someone to Butrans if they are taking Vicodin plus tramadol for breakthrough plus other medications. I told her that patient may be out of range for Butrans & showed initiation guide. Discussed importance of appropriate patient selection. Jen said she thinks that if she starts someone on Butrans, it will have to be a new patient because her established patients are on too high a dose. I told her that may be the area for her to focus for Butrans. Discussed importance of discussing Butrans with a patient when prescribing it for the first time & taking the time to counsel them on correct usage. She said she thought it could be worth it. Went through patient education booklets. Discussed ability to take supplemental analgesia in form of opioid or non-opioids. Also gave her new FPI. Ryzolt value card reminder.
PPLPMDL0020000001	Cleveland	OH	44109	9/26/2011	Tricia (MA) said that Dr Malkamaki was busy seeing patients & would be unable to talk to me today. Also attempted to make an appointment but she said he does not do that. Discussed Butrans appropriate patient type & savings cards for Butrans & OxyContin. I asked if they needed any additional cards. She said they were OK on them as Dr Tabbaa has been out, so they have not been going through them very fast. I asked her to give Dr Malkamaki an updated FPI & she agreed.
PPLPMDL0020000001	Cleveland	OH	44195	9/26/2011	dr said he started another patient on Butrans, we talked about patients he started and dr said patients are doing good on Butrans and controlled. showed pg. 11, inclusion criteria, discussed pain conditions where Butrans could be appropriate, talked about initiation of Butrans and focused dr on BWC and commercial plan patients. asked dr if he will start a few patients this week like we discussed? dr said he will do that. OxyContin reminder. recommended Senokot-S
PPLPMDL0020000001	Westlake	OH	44145	9/26/2011	worked neurology dept-left Butrans fpi, initiation guide, patient info booklet, formulary grid and business card for dr kriegler, dr mays, dr spearman, dr stillman and dr mays. Also left OxyContin fpi, conversion guide and OxyContin formulary grid for all doctors. worked pm&r - left same info for Dr.Reddy, Dr.Hou, Dr.Capulong and Dr.Zachary and left OxyContin fpi, conversion guide and formulary grid for all doctors.
PPLPMDL0020000001	N Royalton	OH	44133	9/26/2011	I asked Dr why he has not started a patient on Butrans and he said he just hasn't thought of it and he asked what the managed care is. I asked what type of patient he would start and he said arthritis patient. I showed the inclusion criteria and he does see patients like these. I asked if he has patients on tramadol who are not well controlled and he said he does sometimes. We discussed Butrans as an option instead of going to vicodin around the clock. I reviewed managed care for Butrans and the savings cards. I asked him to just try a few patients like the ones we discussed and He said he will think about it. Reminder that OxyContin is still an option when Butrans may not provide adequate analgesia.
PPLPMDL0020000001	Lakewood	OH	44107	9/26/2011	(Visited this office on recommendation of Dawn & Karen at Cleveland Back & Pain). Spoke with MA Joanie & introduced myself & Purdue's products. She gave me office protocol/rules & put me on the lunch cancellation list. Discussed Butrans overview/5 core messages & asked if she thought they may be interested in hearing more about it. She said she thinks so. I asked her to give them Butrans information & she agreed. She said they would not accept samples or savings cards for products until they have been detailed on them.
PPLPMDL0020000001	Lakewood	OH	44107	9/26/2011	Quick follow up, I showed the inclusion criteria and reminded him of the patients we discussed last time we spoke. I asked if he still had the patients in mind that he told me about and I asked if he would still try them on Butrans. Reminder about commercial insurance.
PPLPMDL0020000001	Lakewood	OH	44107	9/26/2011	I showed the inclusion criteria and asked how many patients he will see like this today. He said he does see them. I asked if he would try Butrans for these patients when tramadol is not controlling their pain and he agreed. Reminder to focus on commercial insurance and the savings cards and that OxyContin is still an option for Med D AARP patients.
PPLPMDL0020000001	Lakewood	OH	44107	9/26/2011	Quick call, I showed the main vis aid cover and asked if he had patients taking tramadol around the clock that might benefit from 7 day dosing. He said he would keep it in mind.
PPLPMDL0020000001	Lakewood	OH	44107	9/26/2011	I asked Dr about the united health care patient she was trying to get Butrans for. She said that she was trying to get the prior auth and she thinks it went through. We discussed the savings cards and managed care for Butrans. Reminder that OxyContin is an option that is covered on most commercial plans as well.
PPLPMDL0020000001	Cleveland	OH	44106	9/26/2011	worked pm&r dept; worked family medicine dept - left Dr.Truax and Dr.Marsh Butrans fpi's, initiation guides, patient info booklets, formulary grids and my business card.
PPLPMDL0020000001	Beachwood	OH	44122	9/26/2011	Quick call- Positioned Butrans for patients taking 300mg tramadol per day for pain caused from a chronic condition such as spondylolysis, spinal stenosis, or arthritis. He thanked me & said he would keep it in mind.
PPLPMDL0020000001	Westlake	OH	44145	9/26/2011	We reviewed the case studies in the initiations presentation. I asked the Dr which of these patients he sees most often and he said probably the 1st patient taking a high dose of tramadol. He knew that this patient would need to start on the 10mcg Butrans. He said he would not even want his patients to get to 6 tramadol per day as he feels it is too much. I asked if he would start a patients like this on Butrans and he agreed. He said that the biggest problem with Butrans is cost. He said one patient said that it was over \$350, he did not remember which plan. We discussed Butrans savings cards and managed care coverage. Reminder that OxyContin is still an option that is covered on Med D AARP. (Amy getting married Oct 8th)
PPLPMDL0020000001	Cleveland	OH	44102	9/26/2011	talked to Vince, Pharmacist, about Butrans stocking, no scripts for Butrans yet and he's not ordering Butrans until he see's 1st script. asked Vince if he provides patient counseling? Vince said yes. asked Vince if he will recommend Butrans to any patients that he provides patient counseling to where patients have chronic pain and are taking short-acting opioids daily but aren't controlled, and give them Butrans patient info booklets to speak with their doctors about Butrans? Vince said he will do that, he won't recommend Butrans to doctors, that's their decision about opioid choices but he will give booklets to patients. we talked about insurance coverage for commercial plan patients and BWC. discussed OxyContin being an appropriate option for patients, showed conversion guide and discussed a few conversions from short-acting opioids to OxyContin and gave Vince the conversion guide. confirmed stocking and discussed OxyContin formulary coverage. recommended Senokot-S
PPLPMDL0020000001	Northfield Center	OH	44067	9/26/2011	Spoke with technician as Kate was unavailable. Presented to her Butrans patient information booklet & asked if she ever gets questions from customers about their medications. She said generally the pharmacist handles all of those. I asked if transdermal products generate questions usually. She said sometimes. Discussed how the booklet can be used or given to the customer for them to read & this possibly helping to save some calls back to them. She said she thought they were useful. Also discussed savings via e-voucher for Butrans & savings cards for OxyContin. She said she would give this information with the updated FPI to Kate.
PPLPMDL0020000001	Lakewood	OH	44107	9/26/2011	Dr said that the main plan that he has been having trouble with is humanna, I asked how much of this plan he has and he said he feels like he sees a lot. I asked him if he sees Medco, Med Mutual or Anthem and he said he does. I let him know that Butrans is covered for most commercial insurance and I hope he will continue to start new patients. He said he will continue to try new patients with the right managed care. Reminder that OxyContin is covered on Med D AARP plans.

PPLPMDL0020000001	Cleveland	OH	44130	9/27/2011	Spoke with Jessica (pharmacist). She confirmed stocking of Butrans 10mcg strength x1 box. She said she has not dispensed any herself & hasn't heard much about it. Reviewed with her Butrans indication, dosing, usage, & delivery system. I gave her Butrans pharmacists' webinar information & discussed interactive nature of the program. She said it sounded interesting. I encouraged her to register ASAP. Discussed appropriate patient type, focusing on those who are on low doses of Vicodin or tramadol chronically who are not well-controlled. She agreed that Butrans sounded like a good option. Discussed OxyContin savings cards. She said she did not need any.
	Cleveland	OH	44109	9/27/2011	talked to Ray, Pharmacist, about Butrans 5 core selling messages and asked if there have been any scripts filled here yet for Butrans? Ray hasn't seen any Butrans. I asked Ray what features of Butrans stood out to him? Ray said transdermal delivery and 1 application with once weekly dosing. I asked Ray if he provides patient counseling to those taking opioids? Ray said yes they do that sometimes. I asked Ray if he would give patients a Butrans patient info booklet if they have chronic pain and are taking opioids daily but not controlled and asking for another option? Ray said yes he will do that. I talked to Ray about Butrans insurance coverage for commercial plan patients and BWC. Discussed OxyContin stocking and appropriate patients for OxyContin, gave conversion guide and discussed formulary coverage for OxyContin, recommended Senokot-S
PPLPMDL0020000001	Parma	OH	44134	9/27/2011	I asked Dr Hernandez if his Butrans patients are requesting refills/repeat prescriptions for it. He said they are. He added that if it works for someone, which is does for most, they want to stay on it. I asked him if he typically uses the 5 & 10mcg patches. He said that he actually often tells patients to put one on & cut one in half & use that too. I told him this is not recommended & has not been studied. He said he knows but it is working for his patients. I asked him if he still finds OxyContin to be a good medication. He said he does. He said that it is not for everyone, but that it does help the right patients. I agreed that appropriate patient selection is important & that it is not for everyone. He said he likes it because it is dosed q12h & can be used long-term, unlike Percocet which he said is only supposed to be used for two weeks. I asked if he would continue to look for appropriate patients for Butrans & OxyContin & he said yes. He asked again about being a Butrans speaker. I told him I can submit his name.
PPLPMDL0020000001	Cleveland	OH	44130	9/27/2011	Dr Plecha said that he does think Butrans is an interesting option, he is concerned with cost, as he would consider one of his Vicodin patients for Butrans. I asked what type of cost he was asking about & if the patient has insurance. He said it is a cash-pay patient. Showed cost information sheet & agreed that Butrans may not be an option for some cash-paying patients. He said that the patient takes 3 Vicodin per day. I told him this sounded clinically like an ideal patient. I asked if he had any patients with insurance like that & he said not really. He asked where Butrans stands on formulary in the hospital. I asked if he saw a place for it in the hospital setting. He said that he does in hospice. He added that if it were to be utilized there. It would get more physicians behind it. I asked who at the hospital to speak with regarding getting Butrans on formulary. He said the pharmacist, David, may be useful, as well as Dr Sfeir & Dr Peleg. He said Dr Sfeir is pain management there & Dr Peleg serves on the P&T committee. I agreed to work on seeing these people for more information. Discussed OxyContin q12h as an option for appropriate patients beyond Butrans. He said he does have two patients on it & it seems to be effective for them, but he generally does not like to do chronic narcotic therapy. Discussed importance of appropriate patient selection for all opioids.
PPLPMDL0020000001	Independence	OH	44131	9/27/2011	I asked Dr Sundaram where ideally he saw Butrans being used in practice. He said ideally, it would be for a patient after tramadol. He added that it would not be for patients who are already on high doses of something like OxyContin or Duragesic. I agreed that if a patient is not well-controlled on tramadol, they may be a good candidate for Butrans & added that it sounds like he really understands where Butrans should be positioned. He said that unfortunately for me, most of his patients are either on nothing at all or are on high doses of opioids already. He also said he worries about cost as most patients can get tramadol or Percocet for \$4 per month. I agreed that Butrans would cost them more, but asked him if he thought patients with commercial insurance might be willing to pay around \$15 for pain relief. He said yes. Discussed importance of appropriate patient selection & reminded him of OxyContin 7 tablet strengths.
PPLPMDL0020000001	Cleveland	OH	44124	9/27/2011	Window call.... Asked doc if he sees any merit to a product like butrans - CII narcotic in a 7 day transdermal. He said many of his patients need something stronger. I explained the indication for mod to severe pain and asked him to think of butrans for patients that have filed on tramadol. He said we'll see.
PPLPMDL0020000001	Cleveland	OH	44195	9/27/2011	worked pm&r/spine-left Butrans pfj/initiation guide, patient info booklet, formulary grid and my business card for Dr. Schaefer and Dr. Frost, left same info for Dr. Long, Patty Paczos, PA, Dr. Calabrese, Betsy Kirschner, NP and Dr. Chatterjee - couldn't see any doctors have to leave info at receptionist desk left same info as above for Dr. Weiss, Internal medicine
PPLPMDL0020000001	Cleveland	OH	44130	9/27/2011	Positioned Butrans for patients who are not getting adequate pain control from their short-acting therapies. Asked him to, if appropriate, switch patients to a different molecule rather than increasing the amount of medication they are already not doing well on. He said he will remember that. OxyContin savings card reminder. Placed Portal invite on his desk.
PPLPMDL0020000001	Highland Heights	OH	44143	9/27/2011	Spoke to Debbie about the stocking/volume of butrans. She still has not seen any scripts for it. Told her that I spoke with the fill in pharmacist previously. I explained the positioning of butrans and the savings cards - available online and through relay health.
PPLPMDL0020000001	Lakewood	OH	44107	9/27/2011	I asked Dr if he has more patients he can start on Butrans like the ones we talked about in the inclusion criteria. He said that he will think about Butrans as an option and try to think of some more patients. I reminded him about the use of short acting for supplemental analgesia. Reminder that OxyContin is still an option when Butrans does not provide adequate analgesia.
PPLPMDL0020000001	Cleveland	OH	44130	9/27/2011	Followed up with Dr Fedorko on the Butrans program to get his feedback. He said he had no time today & only remarked that the program was "great". He added that he "just does not have anyone to put on it right now".
PPLPMDL0020000001	Cleveland	OH	44121	9/27/2011	Asked doc if he has patients that are not satisfied taking tramadol ATC. He said he does not know if "satisfied" would be the word. I explained that butrans might be an option for their ATC. Reminded him of the once weekly application and can be called in/refilled similar to tramadol. He said but its not covered on medicare. Gave him a formulary grid and asked him to try one commercially insured patients.
PPLPMDL0020000001	Westlake	OH	44145	9/27/2011	I showed the inclusion criteria and I asked his thought with using Butrans for these types of patients. He said that is most of his patients, and he feels good about trying Butrans for those types of patients, I asked if he had some new patients that he could start this week and he said he will let me know.
PPLPMDL0020000001	Cleveland	OH	44143	9/27/2011	Quick call.... I showed doc the formulary grid and ans asked him to prescribe butrans for patients with these plans and most patients can get butrans for about \$15/mo with a savings card. He told me to give them to Angela.
PPLPMDL0020000001	Cleveland	OH	44113	9/27/2011	Confirmed that she still has some.
PPLPMDL0020000001	Cleveland	OH	44113	9/27/2011	dr said he's looking every day for patients that he can start on Butrans but unless patients ask for something else, he's not going to suggest Butrans. showed pg.11, visual aid, talked about pain conditions, dr focused on back pain patients. dr said he see's a lot of back pain since he has so much BWC here. I asked dr to start a couple of BWC patients, with back pain, on Butrans, this week that arent controlled on short-acting opioids, dr said he will keep looking for patients and dr said the patient info booklet is helping him to discuss Butrans with patients so leave more booklets. focused dr on BWC. OxyContin reminder. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	9/27/2011	talked to dr about pain conditions, pg.11 visual aid, that he treats in practice. dr talked about patients with back pain, showed clinical trials with opioid naive and experienced patients and asked dr if he had a few patients in practice with low back pain that arent controlled on short-acting opioids? dr said he didnt know off hand but might, showed initiation and titration info, for Butrans, and dr asked about insurance coverage. focused dr on commercial plans and dr said he'll think about it this week and talk to a few patients. gave dr Butrans patient info booklet to discuss with patients, dr liked that and said he thinks this will help in educating patients. OxyContin reminder and recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44114	9/27/2011	talked to John, PA, about patients with pain conditions, pg.11 visual aid, they treat in office. John talked about patients with back pain as they see a lot of BWC patients who have back pain. John said he's continually working with dr marshall to identify patients for Butrans. I asked John who is appropriate for Butrans? John said patients taking immediate release opioids daily, for a chronic pain condition, yet not controlled and asking him for something else. showed initiation of Butrans info and asked John to focus discussions with patients on application/rotation of Butrans and give patient info booklets. John said he will do that and they have been giving booklets out. John said he thinks there was another BWC, maybe self-insured though, that tried to get Butrans at pharmacy and it was rejected. we talked about BWC and commercial plan coverage for Butrans. recommended Senokot-S
PPLPMDL0020000001	Westlake	OH	44145	9/27/2011	I asked if he would start a few new Butrans patients today and he said he would. I spoke with Megan and she said that Jenny said it would be find to put out the Butrans patient information at the Westlake office. She said managed care has been going smoothly.
PPLPMDL0020000001	Cleveland	OH	44105	9/27/2011	dr said she keeps forgetting about Butrans other than its a transdermal medication, dr asked me to review everything again with her. we discussed 5 Butrans core selling messages, dr said she likes the once weekly application if patients remember to rotate patch. showed dr Butrans visual aid, pg.11, discussed pain conditions where dr can start patients on Butrans, dr said ok she will talk to some patients and see if patients are interested in wearing a patch. showed initiation and titration info in visual aid, gave initiation/titration guide and showed dr Butrans patient info booklet and asked dr to focus on application/rotation of Butrans, dr said she will do that. focused dr on BWC and commercial plan patients to start on Butrans. OxyContin reminder and recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44114	9/27/2011	dr said she started a BWC patient on Butrans this am, we talked about patients taking tramadol daily for their chronic pain and not controlled and how Butrans could be an option right there after tramadol instead of converting patients to vicodin. dr said she knows she's not doing that but its because she isnt seeing a lot of "new" BWC cases. I asked dr about her patients she's been treating for years with some of the pain conditions shown on pg.11, visual aid, that are taking tramadol daily and arent controlled, dr said she doesnt have any patients like that, they are all controlled and she isnt getting patients calling in early monthly for refills because her patients know her policy on that, she wont refill early. told dr that if she has 1-2 patients this week, like we discussed, who happen to say they need something else, other than tramadol, will she start them on Butrans instead of converting them to vicodin? dr said she will do that if she hears that from patients. talked about patient info booklet and dr said she gives booklet and follows up with patients 2 weeks after starting on Butrans, dr talks to patients about titration and side effects when they leave office with script but she wont titrate Butrans dose until she see's patients at 2 week follow-up appointment. dr said she thinks a lot of patients dont want to try Butrans because its a patch and for some reason they just dont believe a patch will work well. asked dr to focus on BWC and commercial plan patients. OxyContin remindr
PPLPMDL0020000001	Cleveland	OH	44114	9/27/2011	dr said he's starting more patients on Butrans, the patients taking percocet every day and not controlled are the patients he's starting on Butrans. I asked dr at what point is dr following up with patients about side effects, titration of Butrans etc, after they leave office with that 1st script? dr said 4 weeks he see's patients again. dr said if patients have side effects they will call him but he's not heard anything from patients so far, so he's happy. I asked dr if he addresses titration before patients leave office? dr said no, he either starts patients on Butrans 5mcg or 10mcg and they have percocet for breakthrough so he wont increase Butrans dosage strength until follow-up appointment. I asked dr if he had BWC and commercial patients coming in this week that he can start on Butrans? dr said he's sure he will and he'll continue prescribing Butrans. OxyContin reminder and dr said he's not started anyone on Butrans and could only remember the name and that it was a transdermal medication. showed dr Butrans visual aid, 5 core selling messages and discussed with dr, dr talked about 1 application, 7 days buprenorphine delivery and thinks he might have a few patients that would like to try Butrans. showed dr Butrans initiation and titration info in visual aid, asked dr if he could start a few patients this week to gain clinical experience with Butrans? dr said yes he will talk to some patients and see if they are interested in trying Butrans. dr asked about insurance coverage for medicaid patients? focused dr on commercial plans and BWC. OxyContin reminder and recommended Senokot-S
PPLPMDL0020000001	Parma	OH	44129	9/27/2011	Spoke with nurse Lynne who said that she knows that Dr Gallagher did prescribe Butrans for a patient but she could not think of who. She said it was not a good time to catch him because he has been on vacation, so he is really busy. She said she believes that the patient did want a refill & that the physician who was covering for Dr Gallagher would have been the one to prescribe it for her. I asked if I could follow up within the next week or two to find out more information & she said that would be great as she believes Dr Gallagher is interested.
PPLPMDL0020000001	Cleveland	OH	44130	9/27/2011	Reminded Dr Rogers of our previous Butrans discussions where he had expressed interest in trying it for some of his patients. He said he had forgotten but still thinks it is a good option. He said that while he does prescribe opioids for patients, & believes in using long-acting opioids for chronic conditions, he does not have a lot of patients that would fit the indication. I agreed that Butrans is not for everyone. He said he always worries about abuse & addiction when putting anyone on any narcotic. I agreed that he should be cautious & advised that he should be just as cautious with Butrans as it is a CII opioid. I asked if he thought any patients may benefit from an opioid dosed once weekly & he said yes. Reviewed initiation guide & showed that each month's supply of Butrans is 4 patches. He said he likes this feature. Also reviewed managed care/cost & savings cards for Butrans & followed up with Deb about the patient who she had told me she put on Butrans last week. I asked about any feedback she has received. She said she has not yet seen the patient back & added that she will see that patient on Friday for follow-up. She said that she is really hoping that the Butrans is working for her & that usually he calls if anything is not going as planned. She asked for my card & said she would call me when she speaks with the

PPLPMDL0020000001	Cleveland	OH	44104	9/28/2011	dr said she's not started any patients on Butrans yet but she knows who the patient is and understands the medication. asked dr who is the appropriate patient for Butrans then? dr said patients taking a couple tramadol, vicodin or percocet, that arent controlled and are asking her for something else. told dr that was great she knew that and showed pain conditions, pg.11 visual aid, asked dr to focus on 1 or 2 pain conditions she treats often, dr focused on back pain patients. i asked dr if she could think of 1 or 2 patients this week, with back pain that arent controlled on short-acting opioids and start them on Butrans? dr said she will do her best and see if any patients complain to her about their short-acting opioids and ask for something else. showed dr Butrans fpi, noting that dr can give immediate release or non-opioid therapy with Butrans, dr said ok. focused dr on commercial plan patients. talked about OxyContin being an appropriate option for patients, dr said she has 1 patient on OxyContin and likes it that way, dr said she doesn't really write long-acting opioids for patients. showed formulary grid for OxyContin and recommended Senokot-S
	Cleveland	OH	44120	9/28/2011	talked to Marc, Narcotics Buyer/Pharmacist who is new here, about Butrans stocking and Marc said they are still seeing Butrans scripts and have been ordering/stocking Butrans. we discussed Butrans 5 core selling messages, Marc focused discussion on 1 application, 7 days of buprenorphine delivery. i asked Marc if he provides patient consultation, for those taking opioids daily for chronic pain? Marc said yes they do that here. i asked Marc if he would give patients Butrans patient info booklets, and have patients discuss Butrans with their physicians? Marc said yes he would do that. we discussed Butrans formulary coverage and discussed appropriate patients for OxyContin, stocking of OxyContin and formulary coverage for OxyContin. recommended Senokot-S
PPLPMDL0020000001	Parma	OH	44129	9/28/2011	Reviewed Butrans with Dr Kushnar (indication, usage, dosing) to refresh her memory. Discussed appropriate patient type, focusing on patients who she is either ready to start on opioid therapy/after NSAID's or COX-2's or who are already on 3-4 tramadol or Vicodin per day. i asked her how often she sees patients who fit the indication. She said she actually had a female patient yesterday who is taking two tramadol per day for pain & who she thinks may appreciate a once weekly dosing option in transdermal form. i told her that sounded like an ideal patient to consider for Butrans. She asked how to start that patient. i showed her initiation guide pg 6 & discussed initiation on 5mcg system once weekly. Discussed titration after 72 hours if necessary & the ability to take short-acting opioids or non-opioid medication with Butrans if necessary. Let her know this may be especially helpful for the first three days of treatment. Discussed savings cards for those eligible. She asked me if i could give her one care for the patient who she saw yesterday. i told her i had to leave them in packages of 5 & she agreed to take one pack. She said this particular patient should be back next week, so she is planning to put that patient on Butrans at that point. Also discussed OxyContin for patients beyond range of those appropriate for Butrans. dr was busy but said he's starting more patients on Butrans. dr said he knows who the appropriate patients are for Butrans, patients taking low doses of short-acting opioids. dr said he has patient info booklets and savings cards at main campus so he was good for now. asked dr to continue starting more patients on Butrans and to consider patients with pain conditions, pg.11 visual aid, that were included in Butrans clinical trials, dr said ok he will do that. recommended Senokot-S
PPLPMDL0020000001	Parma	OH	44129	9/28/2011	Spoke with Fred (pharmacist) & reminded him of Butrans appropriate patient type, focusing on those who get chronic tramadol or Vicodin who call too soon for refills or say it is not lasting long enough. Discussed Butrans as a potential option for those patients. Reviewed that it is CII opioid & still carries abuse/addiction potential. Gave Fred information on Butrans pharmacists' webinar & encouraged him to log-on. Also gave him an updated FPI & showed him pk profile of three patches administered consecutively every 7 days. He pointed to the diagram of the patch & said Butrans seems less abusable than fentanyl. i told him we do not have comparative data nor do we suggest that it is any less abusable than any other opioid. i told him i ask prescribers to be just as cautious with Butrans as they would be with any other opioid. He said that was good. Reviewed OxyContin savings cards which he said they still do not stock.
PPLPMDL0020000001	Maple Heights	OH	44137	9/28/2011	Spoke with Jessica (pharmacist) & introduced Butrans to her as she had not heard much about it. She said she thinks she has dispensed it a few times. Reviewed indication, dosing, CII, & abuse/addiction potential. Also spent time going over the appropriate patient type & importance of appropriate patient selection. Discussed ability to take supplemental analgesia with Butrans. She said that was good to know. Gave her information sheet on pharmacists' webinar in October & encouraged her to log on. Also gave her an updated full prescribing information. Asked if she needed any OxyContin savings cards. She said she thinks the only customers they have who get it are on Medicaid & pay only \$2, so they did not need any.
PPLPMDL0020000001	Bedford	OH	44146	9/28/2011	Spoke with pharmacist Matthew & reviewed Butrans with him. He said he knew very little about it. Discussed one application providing seven days buprenorphine delivery. He said that was surprising. Reviewed indication, dosing, CII, & abuse/addiction potential. Discussed the importance of appropriate patient selection & reviewed what the appropriate range of Butrans patients would be. Also gave him information on October pharmacists' webinar & encouraged him to log on. He asked if it gave CE's & i told him it did not but encouraged him to log on anyway. Also gave him updated FPI.
PPLPMDL0020000001	University Hts	OH	44118	9/28/2011	Quick call...reviewed the butrans indication and the 7 day delivery in a CII narcotics. i asked doc if he has these types of patients in his practice. He said sure. i asked him to try butrans for one patient this week. Reminded him that it is covered on BWC.
PPLPMDL0020000001	Parma	OH	44129	9/28/2011	Stopped in to follow up on Butrans. Debbie (MA) said that Dr Chagin has not been in all week. They said he should be returning tomorrow. i asked if she has heard any feedback from Butrans or knows if he has prescribed it since he had indicated at breakfast that he was going to. She said she has not heard any feedback herself & she was out of the office for awhile as well, so she is not sure. Reviewed savings cards with her & asked her to be on the look-out for feedback or information about Butrans. She agreed. She said to stop back tomorrow or next week to see Dr Chagin.
PPLPMDL0020000001	Cleveland Heights	OH	44118	9/28/2011	i introduced butrans as a CII offering 7 day delivery of analgesia in a transdermal system. He said he still has not seen any butrans but he just filled an oxycontin script. He still has a few steady customers on oxycontin and stocks the basic strengths. i explained the insurance coverage and the savings cards. He sees a lot of medicare/medicaid and does participate in the relay health program.
PPLPMDL0020000001	Parma	OH	44129	9/28/2011	Spoke with Anna & Jaz (MA's) who said that Dr Gigliotti was out of the office today. i asked if either of them had heard any feedback regarding Butrans. Jaz said that there has been at least one that has not been accepted by insurance, but other than that, she has not heard anything. i asked if any of the patients had been in for follow up but they were not sure. Reviewed savings cards with them & asked them to be sure that if a patient leaves with a Butrans prescription, they also get a savings card, but also reviewed eligibility requirements with them.
PPLPMDL0020000001	Lyndhurst	OH	44124	9/28/2011	Asked doc what advantages he sees in a product like butrans - 7 day delivery of a CII. He said he actually wrote one last week. i asked him what strength he wrote. He did not recall. i reviewed the formulary grid. He said he does not consider that when he is with a patient. He has too many reps coming in and can't remember. Told him no coverage on medicare/medicaid. He said he has not heard anything. Told him we like to hear feedback - good or bad. i showed him the demo patch, he touched it, and liked that the entire surface is adhesive.
PPLPMDL0020000001	Mayfield Hts	OH	44124	9/28/2011	i asked doc what advantages he see in butrans. He said he likes that it's a patch. He asked about coverage. i told him no medicaid/medicare but covered on BWC. i showed him the guide and how to initiate patients. Also showed him what the demo 5mcg looks like. He said he will keep it in mind.
PPLPMDL0020000001	Cleveland	OH	44109	9/28/2011	worked rheumatology dept-left Butrans fpi, initiation guide, patient info booklet, formulary grid, portal invite and business card for dr ballou as i couldnt see him today. worked internal medicine dept-same info as above for dr lindheim, dr ricinati, dr falck-tytler, dr harrington, dr eisen, dr gelehrter, dr mcCreery and dr jones. worked family medicine dept-left all of Butrans info noted above for Dr.Forde, Dr.Krofina, Dr.Liu and Dr.Magoulas and left OxyContin fpi, conversion guide and formulary grid.
PPLPMDL0020000001	University Heights	OH	44121	9/28/2011	i asked doc what he thinks about transdermal medications. He asked if it works the same as pills. i explained that there is no head to head data with any other scheduled narcotics but it is a CII similar to vicodin. It can be refilled and called in. i asked doc to try a patient instead of going to vicodin ATC. Nothing more learned.
PPLPMDL0020000001	Cleveland	OH	44106	9/28/2011	asked dr how often does dr hear from patients that are taking percocet that they arent controlled and ask him for something else? dr said probably 2 on average a day, he's at UH 2 days a week. i asked dr if he would take the 2 patients each day that ask him for something else and start them on Butrans? dr said he can do that. focused dr on commercial plan patients to start on Butrans. talked to dr about OxyContin being an option for patients, showed conversion guide and talked about dr still choosing OxyContin when appropriate, dr said he does prescribe OxyContin. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44106	9/28/2011	worked pain management dept
PPLPMDL0020000001	Cleveland	OH	44104	9/28/2011	dr said she knows about Butrans being an option, she repeated some of Butrans core messages back to me, dr said she couldnt remember if Butrans was a CII or CII, dr said it didnt matter though because she doesnt have any chronic pain patients who are uncontrolled and asking for something else. i asked dr if she would consider patients with back pain or osteoarthritis to be appropriate for Butrans? showed dr pg.11 butrans visual aid, dr said if patients have tried all non-opioid therapies and then tried tramadol, she might consider a long-acting opioid. i asked dr to start 1-2 patients this week, that meet Butrans indication that she could start on Butrans, dr said she will do that if she feels patients are appropriate. focused dr on commercial plan patients. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44106	9/28/2011	asked dr if he is considering Butrans for his patients that take tramadol daily for their chronic pain but arent controlled and asking him for something else or calling in early every month for refills? dr said if someone reminds him, yes he is doing that, otherwise he just tends to refill tramadol. dr said he likes Butrans, has started a few patients on Butrans and has no problem converting patients from tramadol to Butrans. focused dr on initiation of Butrans, titration info in visual aid and commercial plan patients. talked to dr about OxyContin being an option for patients, dr said he writes some OxyContin likes the medication and feels its appropriate for some patients. recommended Senokot-S
PPLPMDL0020000001	Mayfield Village	OH	44040	9/28/2011	Spoke to TOM about the positioning of butrans - before going to hydrocodone ATC. He said he thinks it would be great for butrans to get bit of that market. He said it has been slow moving though. He has one patient still on it with no problem. Explained the savings card and the commercial coverage.
PPLPMDL0020000001	Bedford	OH	44146	9/28/2011	Quick window call- Dr Haddad said he keeps forgetting about Butrans or when he remembers it, the patient doesn't have the right insurance. i asked him to focus on commercial insurance & positioned Butrans for patients if tramadol is not controlling their pain. He said he will do his best.
PPLPMDL0020000001	Cleveland Hts	OH	44118	9/28/2011	i reviewed the 7 day delivery of butrans and the CII status. i asked doc where he thought he might use it in his practice. He said the problem is the coverage and affording it. i told him that butrans is not covered on medicaid/medicare but well covered on commercial plans. i thoroughly explained the 3rd tier copy and how to use the savings card. He thought of a female patient currently taking vicodin 5mg 4 times/day that might be a candidate. i explained the 10mcg as a conversion dose and the threshold for conversion(>80mg morphine equiv may not be approp). i also informed him of the BWC coverage and he thought of another possible patient. He asked about the use of short acting opioids for breakthrough and he asked about the use of butrans in patients with hepatic impairment. i referred to the FPI and confirmed the use of supplementals and to use caution with hepatic impairment. He said he is going to give it a try.
PPLPMDL0020000001	Cleveland	OH	44130	9/28/2011	i asked Dr Kansal in what types of patients Butrans should ideally be prescribed. He said in the ER. i asked him why, considering Butrans is indicated for chronic pain. He said because the ER is where patients get their short-acting prescriptions for the first time. He said once that happens, they can't be convinced to switch to a long-acting option. i asked them how much time generally elapses between the patient going to the ER & them coming to his office if their pain is persisting. He said the patient comes as soon as their pain medication runs out. i asked him if he would say that is generally within two weeks & he said yes. i asked him if he really thinks that people become so accustomed to taking around-the-clock oral medications in two weeks or less that they would refuse a long-acting option. He said it depends. i asked him to clarify. He said if the patient is experiencing their first injury or experience with pain, he would be more likely to switch them to Butrans because they would not already have the mindset that the oral medications are needed. He said if the patient is one who has had multiple painful experiences, he would be less likely to switch them because to him, those are the patients who would not change to long-acting. i asked him if then, he would at least agree to offer Butrans as an option to each of these patients so that they can make an informed decision. He agreed. Discussed OxyContin q12h<font color=blue>b</font>CHUDAKOB added notes on 10/06/2011<b>b</font>-Nice line of questioning. i am guessing that the ER only provides a few days worth of immediate-release opioids as patient are then asked to follow-up with their physician. Stay persistent. You sold him on one patient.
PPLPMDL0020000001	Euclid	OH	44117	9/28/2011	Quick call...i reviewed the butrans indication, positioning and the CII status. Gave him an invite to the 10/20 speaker program and an initiation guide. Nothing learned.
PPLPMDL0020000001	Bedford	OH	44146	9/28/2011	Dr Moufawad told me again that he is not taking on any new patients for medication. i asked him if this is what he would consider an ideal Butrans patient (a new patient). He said not necessarily. He then said that he just does not want the Medical Board "on him". He went on to say that it seems that every time he does anything, the Board is there to question him about it. i asked him if all these issues have been relating to butrans. He said no, only one instance. He then said he does not understand pharmacologically how Butrans can be used with Percocet. He added that he hopes that the training at our home office will help him in this area. He said in the meantime he will try to identify more patients for Butrans & then walked away.
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PPLPMDL0020000001	Westlake	OH	44145	9/29/2011	Dr's practice is now going to be a pain practice because their patient volume was becoming too low. Dr said that he said that he has been telling patients about Butrans as an option and that patients do not want to give up their pills to try a patch. We discussed starting the patients on Butrans before they are taking vicodin or percocet around the clock and he said he will try to do this. We reviewed the medication guide and savings cards. We discussed that OxyContin is still an option.
PPLPMDL0020000001	Solon	OH	44139	9/29/2011	Spoke with Chris, a floater pharmacist filling in at this location. I asked if they had Butrans stocked. He said he was not sure about this store but he has seen it at most others. Reviewed with him indication, dosing, & delivery system. Also went over appropriate patient type, focusing on patients on tramadol or Vicodin (low dose) chronically, who are calling too soon for refills or who say their short-acting opioid is not controlling their pain. He said that is common. Gave him information on upcoming pharmacists' webinar, encouraging him to log on to the interactive program. Also gave him an updated FPI for his review. Discussed OxyContin savings cards.
PPLPMDL0020000001	Westlake	OH	44145	9/29/2011	I asked Dr who he feels are the appropriate patients for Butrans. He said that Butrans would be for patients before they have to go to other long acting options. I reviewed that patients who have never been on an opioid can start on Butrans and I asked if will start a patient like this. He said that he will. We reviewed OxyContin as an option when Butrans may not provide adequate analgesia.
PPLPMDL0020000001	Parma	OH	44129	9/29/2011	Dr Gigliotti said that he is always "ready" to prescribe Butrans. He showed me the savings cards for Butrans & that he has the initiations guide on the top of his desk. I told him the savings cards do more good in the hands of patients with prescriptions than on his desk. He laughed & said he offered Butrans to a patient yesterday but she did not want it because she did not want to "give up her pills". I asked him if she knew that she did not necessarily have to give them up & discussed supplemental analgesia with him. He said that he did tell her that. I told him that he was doing the right thing in offering it to this type of patient because patients should at least know there is another option out there. He agreed. I asked him to continue to offer Butrans to appropriate patients as an option to treat their pain & he agreed. OxyContin for patients beyond Butrans reminder.
PPLPMDL0020000001	Independence	OH	44131	9/29/2011	Caught Dr Reddy at the window. I handed back an updated Butrans FPI to stop him as he walked by & let him know some changes/additions had been made. He asked me to remind him of what Butrans is again. Reviewed indication, dosing, appropriate patient type. He said he would try to remember & then walked away. Spent time with his MA Kathi reviewing appropriate patient type & range of appropriate patients. I asked if she gets calls frequently from patients on tramadol or even Vicodin who are not being well-controlled on it & she said yes, all the time. I asked her to point them out to Dr Reddy when this happens & remind him of Butrans & she agreed. She asked about insurance coverage so I reviewed commercial insurance with her & discussed savings cards for those patients. Also gave her OTC samples.
PPLPMDL0020000001	Cleveland	OH	44113	9/29/2011	talked to dr about his patients with pain conditions,pg.11 visual aid,dr focused on osteoarthritis and back pain patients and said he has a lot of patients who he could start on Butrans.dr said he hasnt remembered Butrans as he's used to writing tramadol or other short-acting opioids but after talking longer today about appropriate patients,initiation and titration of Butrans,dr said he is going to start patients on Butrans.showed dr Butrans patient info booklet,told dr to focus patient discussion on application/rotation of Butrans,dr said ok and asked how he should write script,showed initiation guide and back page of visual aid with example of Butrans script.dr asked about commercial insurance coverage? dr said they have a lot of medical mutual,anthem and united healthcare,showed Butrans formulary grid,patient savings cards and asked dr if he could start a few patients today and tomorrow on Butrans? dr said yes he will talk to dr about OxyContin being an option for appropriate patients,showed conversion guide and formulary grid.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44103	9/29/2011	talked to dave,pharmacy manager,about Butrans 5 core selling messages and showed visual aid.i asked Dave what features of Butrans stood out to him? DAve said 1 application,7 day analgesic,Dave said he's not seen any scripts for Butrans though so he's not ordering Butrans until he see's that 1st script.talked about importance of stocking Butrans and asked Dave if he would give patients Butrans patient info booklets if they are taking short-acting opioids for chronic pain but not controlled? Dave said he would do that.discussed Butrans formulary coverage.discussed OxyContin stocking,appropriate patients and formulary coverage.recommended Senokot-S
PPLPMDL0020000001	Beachwood	OH	44122	9/29/2011	Introduced myself & Purdue's products to Dr Malkamaki & asked him what his understanding of Butrans is from previous conversations with his other Purdue rep. He said that she (Amy Brooks) has done a good job trying to get him to use it & he remembers that it is a long-acting transdermal system. He said the problem is that as a PM & R specialist, he really tries to stay away from narcotic therapy if at all possible. He added that he has two OxyContin patients who are on 30mg q12h & that is as high a dose as any of his patients are on as far as opioids go. Reviewed appropriate patient type with him, focusing more on the "moderate pain" side & asking him to continue to keep OxyContin in mind for patients beyond the appropriate Butrans range. Discussed patients go. On a 3-4 tramadol or Vicodin per day & showed initiation guide pg 6 & discussed that. Let him know Butrans is a CII opioid with same attendant risks of other opioid medications. He asked me to tell him what CII meant. Told him Rx's could be called in & patients could be given up to 5 refills in a 6 month period. He said that was good. He asked how to tell a patient to use it & said he does actually want to give Butrans a try now that he is really looking at the information & talking about it. I gave him a patient information booklet & reviewed its contents. He said that would be very helpful. I asked if I could follow-up in 2 weeks. He said to give him a month & said that would be fine.
PPLPMDL0020000001	Independence	OH	44131	9/29/2011	Spoke with Jill. Reviewed Butrans dosing, usage, indication, & appropriate patient type. She said she always forgets about it. She asked if it was covered on Medicare or Medicaid. Reviewed formulary coverage for Butrans, focusing on commercial insurance where savings cards can be used. She said they have a lot of patients who fit the profile of Butrans patients but that the insurance plans they see are mostly government. I asked her to give Dr Pal an updated FPI & OxyContin leaver. She agreed. She said Dr Pal would be back in the office next week.
PPLPMDL0020000001	Parma	OH	44129	9/29/2011	Followed up with Dr Chagin from our previous breakfast conversation when he expressed high interest in prescribing Butrans. He said that he has prescribed it for a few people but has not received any feedback. He said he really didn't have time today to talk about it but said to come back another time. Spoke with Debbie & discussed savings cards for Butrans & OxyContin. She said that they still have enough of the cards.
PPLPMDL0020000001	Cleveland	OH	44109	9/29/2011	dr said he's not started any patients on Butrans yet but he knows its available and likes that its a transdermal delivery medication.dr said the once weekly dosing option could be appropriate for some of his patients but right now all of his patients taking short-acting opioids for chronic pain are controlled so no need to change their medication.told dr that if patients are controlled,he shouldnt make any changes,but asked dr if patients ever call in earlier in the month for refills of their short-acting opioids? dr said sometimes,i told dr if thats the case then perhaps a long-acting opioid like Butrans could be an option,dr said that was a good point and he will consider that next time someone calls in earlier for refills.showed dr pg.11,visual aid,discussed a few pain conditions he see's in practice,dr focused on back pain.i asked dr if he had a few patients with back pain that he could start on Butrans? dr said he might but didnt know off hand and would have to think about it.showed dr initiation and titration info,focused dr on BWC and commercial plans.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	9/29/2011	talked to dr about pain conditions,pg.11 visual aid,dr talked about patients with back pain that she treats in her practice.dr said she will try all non-opioid therapies then try a short-acting opioid like tramadol.i asked dr if she would start a couple patients on Butrans,instead of refilling their tramadol? dr said she will do that and has been thinking of Butrans more for patients,showed dr butrans initiation and titration info in visual aid,asked dr to focus on BWC and commercial plan patients.talked about OxyContin as an option for patients,showed conversion guide discussed a few conversions from short-acting opioids to OxyContin,showed formulary
PPLPMDL0020000001	Cleveland	OH	44113	9/29/2011	talked to dr about patients with pain conditions,pg.11 visual aid,that he treats in office and how Butrans could be an option for them.dr said he keeps forgetting about Butrans but does think there's a place for Butrans in his practice.asked dr where Butrans fit in? dr said for people taking a lot of vicodin or percocet he could see himself using Butrans there.i asked dr if he treats patients with back pain,taking tramadol daily,but not controlled,dr said yes,showed initiation and titration sections in Butrans fpi,asked dr to start a couple patients like this on Butrans,dr said he will consider that if patients are willing to wear a patch,talked about patient info booklet,application/rotation section and dr asked about medical coverage for Butrans.told dr to focus on BWC,commercial and tricare patients for Butrans.talked to dr about OxyContin being an appropriate option for patients,showed conversion guide and asked dr to continue finding new patients to start on OxyContin,dr said he will do that.discussed OxyContin formulary coverage and recommended senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	9/29/2011	dr said he started a few more patients on Butrans,we talked about why he chose Butrans,dr said patients were taking tramadol and another patient was taking vicodin every day for their chronic pain but not controlled so he thought Butrans could be a good option.showed dr initiation dosage strengths and titration info for Butrans in visual aid,dr said he brings most patients back to see him after 2 weeks,for a follow-up appointment to discuss the dose of Butrans patients are taking and any side effects.dr said so far its been easy for him to start patients and patients can get Butrans from pharmacies.asked dr if he had more patients like this that he can start on Butrans? dr said yes,he will do that.focused dr on BWC and commercial plan patients.talked to dr about OxyContin being an option for patients,showed conversion guide and briefly discussed some short-acting opioid conversions to OxyContin,asked dr if he will continue starting patients on OxyContin when appropriate? dr said yes.showed formulary grid,recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	9/29/2011	dr said he started a couple patients on Butrans this week.asked dr to tell me about the patients he started and why he chose Butrans.dr said these were patients taking 20-25mg vicodin daily and not controlled and he thought he would give Butrans a try.dr said he's definitely thinking of Butrans more for his patients.focused dr on initiation and titration of Butrans,visual aid info,talked to dr about application/rotation info in Butrans patient info booklet to discuss with patients.dr said he gives patients booklets and does talk to them about this info.focused dr on BWC and commercial plan patients to start on Butrans.recommended Senokot-S
PPLPMDL0020000001	Solon	OH	44139	9/29/2011	Caught Dr Zaldi between patients. He said he was sorry that he did not go to the Butrans dinner program. I told him he missed a good discussion & that I thought he could have benefitted from speaking with other pain management specialists about their experience with Butrans. He said he is on the lookout for Butrans patients & then walked away. Spent time with nurse, Julie, going over patient savings cards for Butrans & OxyContin & recommended Senokot-S for opioid-induced constipation. I asked if more samples were needed but she said they did not need any.
PPLPMDL0020000001	Mayfield Heights	OH	44124	9/29/2011	Showed doc the butans demo patch and asked what she remembers about butrans. She said that its longer than fentanyl. I told her that butrans is a CII and delivers analgesia over 7 days. Gave formulary grid and an invitation to the speaker program.
PPLPMDL0020000001	Cleveland	OH	44113	9/29/2011	talked to dr about the 2 patients she started on Butrans,dr said patients have seen improvements in pain levels and are happy.dr said she knows the indication for Butrans,has patients in mind to start on Butrans but biggest challenge is that medical doesnt cover Butrans and she doesnt prescribe a lot of CII medications so she cant meet Prior Authorization requirements for Butrans.asked dr if she had a few patients with commercial insurance that she could start on Butrans? dr said she has small percentage of commercial but will keep that in mind.we talked about every commercial plan patient leaving with a Butrans patient savings card.recommended Senokot-S
PPLPMDL0020000001	South Euclid	OH	44121	9/29/2011	Quick call....reviewed the butrans CII status and 7 day delivery. Provided formulary grid and invitation to speaker program.
PPLPMDL0020000001	Mayfield Heights	OH	44124	9/29/2011	Window call....reminded doc of the proper application and disposal of butrans. I asked if she knew if patients are using the disposal unit. She said she did not know exactly. Gave her a invite to the 10/20 speaker program.
PPLPMDL0020000001	Independence	OH	44131	9/29/2011	Spoke with pharmacist Dave. He said he has not seen Butrans activity at all at his store. He did say they have it stocked. Gave him pharmacists' webinar information & encouraged him to log on to the interactive program. Also gave him a Butrans updated FPI & pointed out changes/additions. Discussed savings & also reminded him of OxyContin savings cards for commercially insured or cash-pay patients.
PPLPMDL0020000001	Mayfield Heights	OH	44124	9/29/2011	Quick call....showed doc the butrans formulary grid and asked him to prescribe butrans before going to hydrocodone ATC. Also gave him a invite to the speaker program on 10/20
PPLPMDL0020000001	Highland Heights	OH	44143	9/29/2011	Window call....I reviewed the butrans formulary coverage, showed grid. I asked him to remember to give a savings card along with each script. He said the girls handle that. I spoke with Meagan who said they did not need any now. Gave doc an invite to the 10/20 speaker program.
PPLPMDL0020000001	Mayfield Heights	OH	44124	9/29/2011	Doc said he did not have much time to talk. I reminded him of the butrans patient indication and patient type. Invited him to the speaker program on 10/20. No commitment
PPLPMDL0020000001	Beachwood	OH	44122	9/30/2011	Spoke with Debbie Macko (nurse manager) in pain management on 2nd floor. Got updated staff information & asked again for any type of appointment with any of the physicians, especially Dr Dmitri, their newest addition. Debbie took my information & said she will ask him Monday if I can come in for a short appointment. Discussed Butrans 5 core messages. I asked if she thought it sounded like something Dr Dmitri & the others would utilize. She said she doesn't see why not, but added that they try to stay away from narcotics whenever possible. I asked if they ever do find that they have to use them & she said yes. Discussed appropriate patient type with her & also discussed savings cards for both products. She said she would let me know about the appointment next week.
PPLPMDL0020000001	Cleveland	OH	44103	9/30/2011	talked to abdul,pharmacist,about butrans stocking they still have butrans in stock but no scripts yet.abdul said he's recommending butrans to patients when he provides patient counseling to those taking opioids.i asked Abdul to continue recommending Butrans to patients,he agreed.we discussed OxyContin formulary coverage,medicalaid and commercial was focus of discussion,talked about appropriate patients for OxyContin and confirmed OxyContin stocking and recommended Senokot-S
PPLPMDL0020000001	Beachwood	OH	44122	9/30/2011	Spoke with Alan who said he has seen some Butrans movement. I asked if he knew where the prescriptions came from but he did not. Gave him an updated copy of the full prescribing information & let him know of additions/changes. Also reviewed appropriate patient type. He asked if I had any savings cards, so I provided one package of Butrans & one package of OxyContin cards. He said they are good about giving those out. He said they are not part of Relay Health's e-voucher system. Discussed eligibility requirements for cards use.
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PPLPMDL0020000001	Warrensville Heights	OH	44122	9/30/2011	Spoke with MA Terri & asked her about Dr Garwood & the residents' prescribing of Butrans since the program. She said she did not know. I asked if any of the savings cards had been used. She said she was not sure of that either. She said it did not sound familiar. I reviewed 5 core messages with her & went over appropriate patient type. I asked her to post an invitation for the upcoming Cleveland dinner program for Butrans in the lounge for all the doctors & she agreed.
PPLPMDL0020000001	Cleveland	OH	44111	9/30/2011	Dr said that he does want to gain more experience with Butrans, I asked what his hesitation is. He asked me to review appropriate patient types and we discussed the initiation guide and inclusion criteria. I asked if he would these types of patients and he said he will.
PPLPMDL0020000001	Parma	OH	44129	9/30/2011	Quick call- Positioned Butrans for patients after tramadol, if the patient has a chronic issue & is saying their tramadol is no longer controlling their pain. Passed back an updated FPI. She thanked me & walked away. Spent time with her nurse, Edie & discussed Butrans 5 core messages & asked if she thought Dr Rossi would ever prescribe it. She said Dr Rossi does have some patients on the fentanyl patch, so she said it was a possibility. Re-visited appropriate patient type with her, asking her about Dr Rossi's patients on the more "moderate" side, perhaps taking a few tramadol per day. Edie said she definitely has those patients. Reviewed once weekly dosing in a transdermal system. Edie said she would try to mention it again to Dr Rossi, especially if she sees or hears from the right patient. Gave OTC samples & recommended Senokot-S for opioid-induced constipation.
PPLPMDL0020000001	Cleveland	OH	44104	9/30/2011	talked to dr about patients with pain conditions.pg.11 visual aid,that he can start on Butrans.dr said he hasn't seen anyone this week to start on Butrans but he is keeping Butrans in mind,dr asked about insurance coverage for Medicaid patients,focused dr on commercial plan patients and discussed PA requirements for Medicaid patients for Butrans.talked about initiation and titration of Butrans and asked dr if he will start a couple patients today and next week on Butrans? dr said if he has patients asking for more short-acting opioids and he's not comfortable refilling their medication then he's talking to patients about Butrans.talked to dr about OxyContin as an appropriate option,showed conversion guide discussed a few conversions and asked dr to continue prescribing OxyContin,dr said he will for appropriate patients.discussed OxyContin formulary coverage and recommended
PPLPMDL0020000001	Maple Heights	OH	44137	9/30/2011	Spoke with Kim who said she has seen no further movement of Butrans since months ago. Gave her information on upcoming pharmacists' webinar & encouraged her to log on & ask questions from a peer. Also gave her updated FPI. Discussed appropriate patient type, including patients who are not well-controlled on short-acting opioid medications chronically. She said she thinks it would be more widely used if Medicaid covered it. Reviewed commercial insurance coverage, e-voucher, & savings cards for Butrans as well as OxyContin.
PPLPMDL0020000001	Cleveland	OH	44103	9/30/2011	talked to Nick,pharmacist and Sonya,pharmacy tech,about Butrans 5 core selling messages and asked if they have recommended Butrans to any patients? Nick said he told a few patients about Butrans and gave the booklets to them.I asked Nick to continue doing that so patients can talk to their doctors,Nick said ok.discussed stocking of Butrans and Nick said they have seen a couple scripts for Butrans,but he doesn't have time to look up who wrote them now.discussed BWC and commercial plan patients for Butrans and asked Nick to focus patient discussions on application/rotation of Butrans,side effects,etc,Nick said he will do that.confirmed OxyContin stocking and discussed appropriate patients for OxyContin,recommended Senokot-S<font color=blue>-b>CHUDAKOB added notes on 10/05/2011</b>-</font>Looks like you are gaining an advocate in Nick. Nice work!
PPLPMDL0020000001	Cleveland	OH	44113	9/30/2011	dr said he's been back in office 1 week,post 3weeks vacation,and hasn't started anyone on Butrans.I asked dr if he had patients with pain conditions.pg.11 visual aid,that are taking short-acting opioids daily and not controlled? dr said yes a lot of patients are like that and appropriate for Butrans.dr said he will start more patients on Butrans.focused dr on BWC and commercial insurance patients.recommended Senokot-S
PPLPMDL0020000001	Warrensville Heights	OH	44122	9/30/2011	Quick call- I asked Dr Brooks if he had received any information in the mail from Purdue regarding his request for materials he could use to present Butrans to the hospital P&T Committee. He said he does not think he has seen anything. I let him know that he should be receiving that information very shortly & asked him to watch the mail for it. He agreed, said he is keeping Butrans in mind, & walked away. Spoke with one of his MA's who said that they did not need additional savings cards of either product at this time.
PPLPMDL0020000001	Northfield	OH	44067	9/30/2011	Spoke with Mercedes & asked about Butrans stocking. She said she has seen no activity on Butrans at all. Reviewed with her the appropriate range of patients & discussed patients who are taking chronic tramadol around-the-clock & who are either calling too soon for refills or who are complaining that the tramadol is no longer controlling their pain adequately. I let her know that I have been discussing it with area physicians & that some have indicated that they plan to prescribe. Gave her an updated FPI for her review. Asked if she needed any savings cards but she did not.
PPLPMDL0020000001	Cleveland	OH	44113	9/30/2011	dale said he's continually starting more patients on Butrans,working with dr shen as she see's 90% of dr daoud's chronic pain patients for medication management.I asked dale if he will start a few patients on Butrans,that have 1 of the pain conditions.pg.11 visual aid,that are taking tramadol daily but not controlled? dale said yes he thinks patients should get started on Butrans even before tramadol so he will recommend patients starting Butrans right after tramadol doest control patients pain.talked about BWC and commercial plan insurance for patients to start on Butrans.recommended Senokot-S
PPLPMDL0020000001	Garfield Hts	OH	44125	9/30/2011	Spoke with Deena (MA) who said Dr Sadowski did not come in today. I reminded her of my last visit & asked if she knew if Dr Sadowski had prescribed Butrans for that patient he had told me about. She said not that she knows of, but he must be close to prescribing, given our last encounter. I asked if Deena could think of any other patients who she thought may be worth recommending to Dr Sadowski. She said she can think of a couple, but most have Medicare. I asked her to please keep patients like those with commercial insurance in mind & to point them out to Dr Sadowski when appropriate. She agreed.
PPLPMDL0020000001	Beachwood	OH	44122	9/30/2011	Quick call- Passed back an updated full prescribing information & October dinner invitation & asked Dr Tabbaa if he thought he might be able to make it. He said he would have to check. He also said he would look at the FPI. He added that he has been prescribing "some" Butrans. I asked him if he could tell me a little more about that but he said he had 3 patients waiting so he did not have time now. He thanked me & walked away. Spoke with Tricia & asked about Dr Tabbaa's nurses' schedules. She said that Jim is not back & may not ever return. She said sometimes Randy will come over from his other location, but he does not do this often. She said to just keep coming Wednesday or Friday afternoons to see Dr Tabbaa when possible.
PPLPMDL0020000001	Beachwood	OH	44122	9/30/2011	Passed back a Butrans dinner program invitation & asked Vickie (nurse) if she thought Dr Yokiell could attend. She said she would check & added that he is still trying Butrans for newer patients. She said that he has been using it "here & there" & told me that Dr Barrett prescribes Butrans a lot with success. I asked if he & Dr Yokiell ever talk about things like that & she said she is not sure if they discuss medications or not. They did not need additional savings cards.
PPLPMDL0020000001	Cleveland	OH	44104	9/30/2011	dr said he hasn't seen any patients recently that are appropriate for Butrans.I showed dr butrans visual aid.pg.11 and discussed pain conditions dr treats in practice.dr talked about patients with osteoarthritis.asked dr to start a couple commercial patients, that have osteoarthritis and meet Butrans indication,on Butrans today and next week.dr said he will do that but majority of his practice is medicare so he's waiting until we have coverage for Medicare patients.focused dr on commercial plan patients and them using patient savings cards.talked about OxyContin being an appropriate option for patients,showed conversion guide discussed a couple conversions with dr and asked dr to continue prescribing OxyContin for patients,dr said he will do that.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44103	9/30/2011	talked to dr for a minute as she isn't allowed to see reps anymore in office,dr said she had plenty of Butrans patient savings cards and booklets and is continuing to start more patients on Butrans.asked dr to focus on titration and discuss side effects with patients before they leave office,dr said ok.focused dr on Commercial plan patients for Butrans.talked to dr about OxyContin being an option for patients,dr said she prescribes a lot of OxyContin still and thinks its a good long-acting opioid.discussed OxyContin insurance and recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	9/30/2011	dr said she started a couple patients this week on Butrans,she is seeing clinically significant improvements in patients pain levels that she's started on Butrans,so she's happy with Butrans.asked dr how she addresses titration and side effects with patients? dr said she follows up with patients after 4 weeks,if patients dont call to complain of side effects she doesn't say much about them,I asked dr to give patients Butrans patient info booklets and show side effects info and application/rotation section,dr said ok.I asked dr if she will continue starting more patients like the one's she has started,on Butrans? dr said yes she will.focused dr on BWC and commercial plan patients.talked about OxyContin being an appropriate option for patients,showed conversion guide and talked about a few conversions and asked dr to continue starting patients on OxyContin,dr said she doesn't have many on OxyContin but will do that.recommended Senokot-S
PPLPMDL0020000001	Lyndhurst	OH	44124	9/30/2011	Spoke with HCP about the butrans indication and that moderate patients like those on tramadol or low doses of vicodin. She asked for confirmation that it is not on medicare. Reminded her of no medicare/medicaid coverage. Invited her to the 10/20 speaker program.
PPLPMDL0020000001	Lyndhurst	OH	44124	9/30/2011	I asked doc what current therapy would she likely replace with butrans if she were to prescribe. She said she would like to cut down on vicodin. I confirmed that the is a great place to prescribe butrans. Showed her that 10 mcg would probably be an appropriate dosing for conversion. I asked her to prescribe for commercially insured patients. Provided an invite to 10/20 speaker program.<font color=blue>-b>CHUDAKOB's query on 10/05/2011</b>-</font>Charmaine, don't forget to discuss and record the proper tapering of the patients opioids before starting them on the 10ug Butrans.<font color=green>-b>SIMERTOC's response on 10/17/2011</b>-</font>ok<font color=blue>-b>CHUDAKOB added notes on 10/18/2011</b>-</font>Thank you!
PPLPMDL0020000001	Lyndhurst	OH	44124	9/30/2011	HCP apologized for not making the speaker program. I gave her another opportunity to attend the program on 10/20. She thought that the venue might be more convenient but was unable to commit right now. I discussed the butrans key messages: 7 day delivery and CII status similar to hydrocodone which can be called in or refilled.
PPLPMDL0020000001	Beachwood	OH	44122	10/3/2011	Positioned Butrans for patients with chronically painful conditions who are not being well-controlled on 3-4 tramadol per day. I asked him if he could see himself prescribing Butrans for that patient type. He said yes & asked me to review dosing with him again. Discussed initiation of Butrans 5mcg in that patient & showed initiation guide on how to start patients on 10mcg if they are currently on a higher dose of opioid. Dr Warren said he would think of it for patients like that. Also invited him to Oct 20 dinner program & asked if he thought he could make it. He said he might be able to & that if he can he will register. Encouraged him to attend so that he could interact with other physicians to discuss their Butrans experience.
PPLPMDL0020000001	LAKEWOOD	OH	44107	10/3/2011	Quick call with Pam, we discussed Butrans as an option and appropriate patient types. I asked if she has any patients in mind who might benefit from Butrans. She said she might,but did not think that patients would want to give up their tablets to try something new. We discussed that this could be an option for patients that were not getting adequate analgesia and also the use of supplemental analgesia. Reminder that OxyContin is still an option as well.
PPLPMDL0020000001	Cleveland	OH	44125	10/3/2011	Spoke with pharmacist & reviewed Butrans appropriate patient type, focusing on patients who are taking short-acting around-the-clock opioids chronically & who are not getting relief. I asked if they frequently receive calls from customers requesting refills too soon on these medications. She said that is fairly common. I asked what she usually does & she said she tells them to call their doctor. Gave her a new FPI & showed her pK profile update. Discussed automatic savings via e-voucher for Giant Eagle customers & went over OxyContin savings cards.<font color=blue>-b>CHUDAKOB's query on 10/13/2011</b>-</font>You might consider asking her to hand out a patient information book and have her tell the patient to ask their Dr. about this medication (Butrans).<font color=green>-b>APSEGAS's response on 10/14/2011</b>-</font>Great idea. I will ask her to do this when I return to that store.<font color=blue>-b>CHUDAKOB added notes on 10/15/2011</b>-</font>I hope it works out well.
PPLPMDL0020000001	Lakewood	OH	44107	10/3/2011	Dr said that his current patients on Butrans are doing well, as long as he can get it covered by managed care. I asked what types of patients is he thinking of Butrans for and he said he is thinking of Butrans for patients when they are starting to take 3-4 vicodin per day. I confirmed that this is an appropriate patient for Butrans when they are taking 3-4 5mg vicodin or percocet. I asked I asked Dr if he would start a new patient like the ones we talked about this week and he agreed. Reminder that OxyContin is still another long acting option.
PPLPMDL0020000001	Westlake	OH	44145	10/3/2011	I asked the Dr what the downside would be to trying Butrans in an appropriate patient. He said none. I reviewed the inclusion criteria and asked if he would start a new patient this week. He said he would try.<font color=blue>-b>CHUDAKOB's query on 10/13/2011</b>-</font>Good question! The follow up would be something like "then what is holding you back"?<font color=green>-b>HOLUBA's response on 10/18/2011</b>-</font>Thanks, I will ask him. I have a feeling he concerned about managed care since he usually asks about cost.<font color=blue>-b>CHUDAKOB added notes on 10/18/2011</b>-</font>The question is, do you really think he is sold on the product, because if not, managed care doesn't matter.
PPLPMDL0020000001	Garfield Hts	OH	44125	10/3/2011	Dr Sadowski picked up a Butrans patient information booklet that I had laid out. Discussed patient counsel, application, rotation, & disposal. I told him how useful they become depends on him & him identifying some appropriate Butrans patients. He said he is planning to prescribe it. I mentioned that he had told me about a patient who he thought he would prescribe it for. He said the patient had Medicaid so it would not work out. Discussed coverage & savings cards for Butrans. Reviewed appropriate patient type, focusing on those who he is comfortable putting on an opioid (ie those who are already on an opioid at a low dose around-the-clock) & who are not well-controlled on that therapy. He said that is a patient type for whom he would prescribe Butrans. I let him know that Deena will also help him identify appropriate patients. Showed him demo kit. He said he liked the way the patch felt & he thought it would be effective. Discussed CII & abuse/addiction potential. He said he plans to prescribe. Also positioned OxyContin for appropriate patients beyond Butrans.
PPLPMDL0020000001					



PPLPMDL0020000001	Lakewood	OH	44107	10/3/2011	Spoke with Cindy, she said they have not seen scripts for Butrans. I asked which Drs they see the most chronic pain meds from. She said Dr Neri sometimes as well as the orthopedics. We clarified that the ortho docs tend to prescribe for shorter periods of time and for acute pain. We reviewed the savings cards and managed care for both Butrans and OxyContin. She said they do participate in the e voucher program.
PPLPMDL0020000001	Lakewood	OH	44107	10/3/2011	Spoke with Cindy tech, we reviewed the Butrans medication guide and how to explain proper application. We reviewed the evoucher program and savings program for Butrans and OxyContin. She said that she has seen movement of Butrans and that the savings is automatic for the patients with commercial insurance.
PPLPMDL0020000001	Lakewood	OH	44107	10/3/2011	I asked Dr if he has more patients that he can start on Butrans to give it a fair trial. He said that he will start some more. I asked where he feels Butrans will fit in, he said for patients who are starting to take short acting more often, 3 or more per day. We reviewed starting opioid experienced patients on 10mcg Butrans.
PPLPMDL0020000001	Cleveland	OH	44109	10/3/2011	worked internal medicine - left Butrans fpi,initiation guide,portal invite,patient info booklet,Butrans dinner invite and my business card for Dr.Lindheim,Dr.Ricanati,Dr.McCreery,Dr.Falck-Ytter,Dr.Harrington,Dr.Jones and Dr.Gelehrter,as I couldnt see any doctors - leave info only for doctors and they decide if they want to see reps. worked rheumatology dept - left SAME info as above but left it for Dr.Ballou,Dr.Magrey and Dr.Singer
PPLPMDL0020000001	Lakewood	OH	44107	10/3/2011	I showed the inclusion criteria and I asked if he feels Butrans would be appropriate in these types of patients in his practice. He said that he would, and he will give it a try. I reminded him to focus on commercial insurance with the savings card.
PPLPMDL0020000001	Lakewood	OH	44107	10/3/2011	Dr is in transition of going into private practice. Dr said he has 2-3 patients on Butrans and they seem to be doing well. I asked where he thinks of Butrans and he said as a long acting option before going to other long actings. I reviewed the position of Butrans and asked if he has patients taking tramadol around the clock whose pain is not well controlled. He said he does and agreed to try Butrans. Reminder that OxyContin is an option when Butrans does not provide adequate analgesia. I spoke with Pat, we reviewed managed care for Butrans and she has not had too many issues. She also said that the current patients on Butrans seem to be doing well. She will help remind the Dr that it is an option.
PPLPMDL0020000001	Cleveland	OH	44113	10/3/2011	dr said he's starting more patients on Butrans,he is thinking of patients who are taking 20-25mg vicodin daily and has talked to a few patients about Butrans but patients were hesitant to wear a patch so he gave them Butrans patient info booklets and is following up with them.showed dr pg.11 visual aid,asked dr if he'll see patients this week with these conditions? dr said yes,asked dr if he will start a couple of them on Butrans? dr said he will do that.focused dr on BWC and commercial plan insurance.recommended Senokot-s
PPLPMDL0020000001	Parma	OH	44129	10/3/2011	Quick call- Dr Taylor said she is still sorting things out from being out of town for two weeks. She said she will be keeping Butrans in mind going forward. Positioned Butrans for patients who are not being well-controlled on their short-acting around-the-clock opioid medication or as an option when starting someone on chronic opioid therapy. She said she will look for patients. Also gave her Initiations invitation told her about the case studies on the program. She said she would check it out.
PPLPMDL0020000001	Cleveland	OH	44114	10/3/2011	asked dr if she will see any patients today that have 1 of the pain conditions,pg.11 visual aid,where she can consider Butrans? dr said she probably will see patients with these conditions.i asked dr if she will start patients on Butrans right after tramadol fails instead of starting them on vicodin? dr said she will do that.focused dr on BWC and commercial plans for Butrans patient starts.talked about OxyContin as an option for patients,dr said she only has a few patients on OxyContin and prefers not to prescribe if we talked about changes in medicaid coverage,PA requirements for OxyContin.i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44114	10/3/2011	dr said he's continually starting patients on Butrans,talked about dr discussing titration and side effects ahead of time with patients since dr doesnt see patients again for 4 weeks after he starts them on Butrans. asked dr to give patients Butrans patient info booklets and discuss side effects and titration sections with them,dr said he will do that.showed dr pain conditions,pg.11 visual aid,asked if dr can start a few more patients on Butrans this week,if patients arent controlled on immediate release opioids? dr said he will do that.focused dr on BWC and commercial plan insurance.we talked about OxyContin as an option for patients and dr said he's not starting any new patients on OxyContin,just maintaining those patients that are on OxyContin.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44127	10/3/2011	talked to dr about Butrans 5 core selling messages,dr said she remembered Butrans was transdermal and was a patch but couldnt remember how often patients changed Butrans.showed dr Butrans visual aid,discussed 1 application,7 day dosing of Butrans,dr said she has given a couple patients Butrans patient info booklets but has to follow-up with patients,dr asked about medicaid coverage as majority of patients are medicaid,told dr Butrans is a Prior Authorization for Medicaid patients,explained info to her and Josie,MA,dr said ok she'll keep talking to patients and see if she can get a couple patients to try Butrans.focused dr on commercial plan insurance for Butrans patient starts and using Butrans patient savings cards.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44114	10/3/2011	talked to Horace,Pharmacist,about 5 Butrans core selling messages.Horace hasnt seen any Butrans scripts filled yet,he likes the idea of once weekly dosing and transdermal delivery of Butrans but doesnt know if patients will want to stop their pills.i talked to Horace about patients still being able to take immediate release opioids and non opioid therapy with Butrans,Horace said ok that may be easier for doctors to tell patients about Butrans and get them started.i asked Horace if he will recommend Butrans to patients,when providing patient counseling to those taking immediate release opioids for chronic pain but not controlled? Horace said he will do that and i gave Horace Butrans patient info booklets for education.discussed OxyContin being an option for patients,showed conversion guide and discussed formulary coverage for OxyContin.recommended Senokot-S
PPLPMDL0020000001	Beachwood	OH	44122	10/3/2011	Caught Dr Eckstein up at the window when I stopped in to drop off information/invitation for him. I asked about his experience with Butrans. He said he has tried it in a few patients but does not have any feedback for me at this point. He added that he would keep it in mind & then walked away.<font color=blue><b>CHUDAKOB added notes on 10/13/2011</b></font>Ashleigh keep in mind that if you are positioning Butrans for the physician's "ideal" patient, that may not exist.
PPLPMDL0020000001	Cleveland	OH	44105	10/3/2011	talked to dr about Butrans 5 core selling messages,dr said she just hasnt thought of Butrans and doesnt know if her patients will want to stop taking their pills.showed dr pg.11 visual aid,asked dr if she treats these pain conditions? dr said yes,asked dr how would Butrans be a drawback for treating these conditions? dr said most patients want their pills and thats it and its habit that she usually starts with tramadol then will go to vicodin and percocet.asked dr if she will start 1 or 2 patients on Butrans,instead of converting patients from tramadol to vicodin? dr said she will consider it and if patients are willing to try Butrans she will do that.showed dr Butrans fpi,showed section on maintenance of therapy where dr can give immediate release and non-opioid therapy with Butrans,dr said ok that will help her when talking to patients about Butrans. asked dr to give patients Butrans patient info booklets and focus on BWC and commercial plan insurance,dr said ok.recommended Senokot-S
PPLPMDL0020000001	Parma	OH	44134	10/3/2011	Positioned Butrans for patients who are not well-controlled on short-acting around-the-clock opioids, whether they are a nursing home, hospice, or office patient. He said that he actually had a couple of new patient starts on Butrans since the last time we spoke. He said he would continue to look for more to start. Gave OTC samples.<font color=blue><b>CHUDAKOB's query on 10/13/2011</b></font>Did you ask him about the types of patients he started on Butrans? This may give you some insight into the answer to your next call objective.<font color=green><b>APSEGA's response on 10/14/2011</b></font>He has told me that they have been hospice patients & has also mentioned that they are usually his worst-case scenario patients for whom nothing else has worked. He acknowledges that this is not the ideal place to position Butrans. I plan to work with him on this.<font color=blue><b>CHUDAKOB added notes on 10/15/2011</b></font>Thanks! Let me know if I can help!
PPLPMDL0020000001	Lakewood	OH	44107	10/3/2011	Quick follow up, Dr told me that she was not able to get the Prior Auth through for her one Butrans patient. She said that it was because the patient had not been on any other long acting meds before. This patient was going to still try Butrans and pay out of pocket. I reminded her to still give the savings card so that the patients can save \$40 and she put it in her chart for her to pick up.<font color=blue><b>CHUDAKOB added notes on 10/13/2011</b></font>Wow! Did you confirm the Dr. started the patient on the correct dose? You don't want this to fail!
PPLPMDL0020000001	Northfield	OH	44067	10/6/2011	PROSPECT- Reminded Dr Lango of previous conversations about Butrans (indication, usage, appropriate patient type, 7 day transdermal system). She said she has a patient with bad osteoarthritis & spinal stenosis. This patient had been taking Vicodin, became less controlled on it, & was switched to Duragesic 12.5 & this was "too much opioid" for the patient & she became confused on it. Dr Lango asked if Butrans could be an option for this patient. I told her it sounded like an ideal patient. Discussed managed care & savings. Dr Lango asked to keep an initiation guide for reference as she wanted to remember Butrans for this patient. Also discussed OxyContin q12h as an option for appropriate patients beyond Butrans 20mcg.
PPLPMDL0020000001	Sagamore Hills	OH	44067	10/6/2011	I reminded Dr Sevier of our previous Butrans conversations & his interest in prescribing. He said he has actually prescribed for two patients since that discussion. I asked him to tell me more about the patients. He told me about a patient with osteoarthritis who had tolerability issues with other opioids. He said Butrans seems ideal for her. I asked if the patient has followed-up yet & he said not yet. I asked if he would know if the patient had any issues getting the prescription filled (ie managed care). He said she must have gotten it because he specifically asked her to call if she did not like the medicine or if she was unable to get it at the pharmacy. I asked if he would see a prior authorization if it was required. He said definitely. Discussed appropriate patient type further, focusing on those who are not well-controlled on tramadol around-the-clock. He agreed to write Butrans for more patients. Also discussed OxyContin as an option for appropriate patients who are beyond the appropriate range of Butrans patients.
PPLPMDL0020000001	Sagamore Hills	OH	44067	10/6/2011	Dr Lenox asked me to go over the doses of Butrans with him again as he was interested in starting to prescribe. I reviewed dosing with him. Handed initiation guide to him & reviewed appropriate range of patients. Spent time discussing appropriate patient type, focusing on those patients who are taking chronic Vicodin or tramadol around-the-clock & are not well-controlled. He agreed that the tramadol patient type was a good one to start in. I also reminded him that Butrans is a CII opioid, which he has said in the past he likes. He said that is a nice feature. Reminded him that Butrans is still an opioid & does carry abuse & addiction potential. He said he knows. He said he would be keeping an eye out for appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44103	10/6/2011	dr said she's still starting patients on Butrans,she is getting prior authorizations approved for these patients as majority of her patients have medicaid.showed dr butrans patient info booklet,asked dr to focus on application/rotation and side effects sections when starting patients on Butrans,dr said she does give booklets. asked dr if she has more patients she can start on Butrans? dr said yes and she will do it,she prefers long-acting opioids, but sometimes patients dont want to wear a patch so thats the barrier.i told dr that if patients arent controlled on percocet and they dont want to wear a patch and try Butrans,dr has option of OxyContin,dr said she's still starting a lot of patients on OxyContin but some patients did switch over to Opana ER if there were insurance issues,dr said for the most part no issues with OxyContin and insurance coverage.recommended Senokot-S
PPLPMDL0020000001	Stow	OH	44224	10/6/2011	Spoke with Corey and he said he has all strengths in of Butrans, he said he has seen some scripts of Butrans from Yang. I said he was asking if you had it because he had patient come back, he said they are stocking. RMeinded of discussing application and rotation. HE does not carry Oxycontin or Senokots there
PPLPMDL0020000001	Cleveland	OH	44109	10/6/2011	only got a few minutes with dr,dr said he hasnt started anyone on Butrans this week and some patients he talked to about Butrans werent interested in wearing a patch.showed dr pg.11 visual aid,pain conditions and asked dr if he will see any patients today or tomorrow with these conditions? dr said probably so,asked dr to start a couple patients on Butrans that meet indication,dr said he will do his best and think of Butrans.gave patient info booklet,told dr the booklet will assist in educating patients and focus on BWC and commercial plan patients,dr said ok.told dr for his medicare patients he had option of OxyContin and gave him OxyContin conversion guide.recommended Senokot-S
PPLPMDL0020000001	Stow	OH	44224	10/6/2011	Abby is a prospect, new to the practice and not writing anything yet. She was working with Bressi today. We discussed where Butrans would be used and dosing and initiation and she said she thinks it sounds like a good drug. I said when she sees patients like this when she is with Dr Bressi would she remind him and she said yes. I reminded of dosing with Oxycontin and managed care coverage.
PPLPMDL0020000001	Cleveland	OH	44113	10/6/2011	dr said she's started a few patients on Butrans,talked about why she chose Butrans and I asked dr to focus discussion on application/rotation of Butrans and discuss side effects with patients,dr said she's giving patient education booklet to patients and thats helping. asked dr if she'll see any patients today and tomorrow with pain conditions,pg.11 visual aid? dr said probably will,i asked dr if she will start a couple more patients like this that arent controlled on short-acting opioids and perhaps could try Butrans? dr said she will continue looking for patients to start on Butrans.focused dr on Commercial plan insurance patients and use of Butrans patient savings
PPLPMDL0020000001	Cleveland	OH	44195	10/6/2011	worked apm dept - couldnt see dr stanton-hicks,dr vrooman and dr cheng-so left messages with med secretaries for appointments with doctors,left Butrans fpi,initiation guide,patient info booklet,patient savings card flashcard and my business card
PPLPMDL0020000001	Mayfield Heights	OH	44124	10/6/2011	Window call....asked doc if he would use opioid naive or opioid experienced patients based on our previous discussion. He said probably both. I showed him the initiaton guide and that 5 is appropriate for opioid naive and 10mcg is appropriate for opioid experienced. I asked him to try one patient this week.
PPLPMDL0020000001	Mayfield Heights	OH	44124	10/6/2011	Spoke to tech, Courtney, about the stocking volume of butrans scripts. She stated she has not seen many incoming scripts but she can think of one patient that is regularly on the 5mcg, has gotten refills, and no issues with cost. The patient intially had a out of pocket cost of \$38 but has since been paying \$10. I explained the savings cards and the availability through relay health. I also explained the proper application.

PPLPMDL0020000001	Cleveland	OH	44103	10/6/2011	saw dr at window,dr wanted 1 pack of OxyContin savings cards.asked dr if he was still starting patients on OxyContin? dr said yes he likes OxyContin,been easy to get OxyContin covered on medicaid and no issues at the
PPLPMDL0020000001	Cleveland Hts	OH	44118	10/6/2011	Reminded doc of our previous discussion about butrans. I asked him where he thinks he would use it. He said he doesn't know and asked about the dosing. I told him about the 5 mcg for opioid naive and 10mcg for opioid experience. Showed him the initiation guide. Reminded him of the commercial insurance and savings cards similar to oxycotin.
PPLPMDL0020000001	Cleveland	OH	44106	10/6/2011	talked to dr about his patients taking tramadol,daily,but not controlled and asking for something else,dr said he's thinking of Butrans for these patients but sometimes patients dont want to wear a patch,talked to dr about how he explains Butrans to patients and asked him to give patients Butrans patient info booklets to assist with patient education,dr said he will do that and see if that helps some patients make decision of trying Butrans.asked dr if he can think of a couple patients today and tomorrow that he can start on Butrans? dr said he's sure he will see many patients that are appropriate and he will start more patients on Butrans.talked to dr about OxyContin,7 tablet strengths being an option for patients,discussed formulary coverage and recommended Senokot-5
PPLPMDL0020000001	Mayfield Heights	OH	44124	10/6/2011	Quick call....doc was late for a procedure. I asked doc to prescribe butrans 10mcg for patients that might be taking 2 tabs of a short acting opioid on a daily basis. Nothing learned.<font color=blue><b>CHUDAKOB's query on 10/13/2011</b></font>is 10ug the correct starting dose for a patient taking "2 tabs of short-acting opioid on a daily basis"?<font color=green><b>SIMERTOC's response on 10/17/2011</b></font><b>no</b><font color=blue><b>CHUDAKOB's query on 10/18/2011</b></font>But that is what your call note says?<font color=green><b>SIMERTOC's response on 10/19/2011</b></font>it was an error/typo.<font color=blue><b>CHUDAKOB added notes on 10/20/2011</b></font>Ok. Thanks for the clarification. It is important to be specific on these issues in your call notes.
PPLPMDL0020000001	Cleveland	OH	44104	10/6/2011	dr said she's not started anyone on Butrans,she's not trying to start more patients on opioids as she's already frustrated with her chronic pain patients now.showed dr butrans visual aid,pg.11 pain conditions and asked dr if she treats these conditions? dr said yes.we talked about Butrans being an option for those patients,with these conditions,that are taking percocet every day but not controlled and asking for something else,showed dr initiation of Butrans,titration and side effects info in visual aid,asked dr if she could think of a couple patients like this? dr said she has a lot of patients like that but doesnt know if they will wear a patch and remember to apply a new patch once a week and rotate the patch.showed dr Butrans patient info booklet,showed application/rotation section,told dr this would help her educate patients,dr said ok she'll talk to a few patients and see what happens.focused dr on commercial patients for Butrans.we talked about OxyContin being an option,7 tablet strengths and dr said she has some patients on OxyContin but tries not to start patients on OxyContin.discussed formulary coverage for OxyContin and recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44113	10/6/2011	dr said he's started a few patients on Butrans since he got back from vacation on 9/21st,he wanted another pack of savings cards,asked dr who were the patients he was starting on Butrans? dr said patients taking vicodin every day but not controlled,thats where he's telling them their only option is Butrans.showed initiation,titration and side effects info in Butrans visual aid and asked dr to discuss with patients before they leave his office,dr said ok.focused dr on BWC and commercial pain patients
PPLPMDL0020000001	Cleveland	OH	44106	10/6/2011	talked to dr about 5 Butrans core selling messages,dr said he's not started anyone on Butrans and has been rotating at all 3 OH sites so he's not really thought of Butrans.asked dr what features of Butrans stood out to him? dr said once weekly dosing and transdermal delivery,talked about some pain conditions he treats in practice,pg.11 visual aid, and asked how a long-acting opioid fits into his algorithm? dr said when all short-acting opioids and procedures fail,then he will consider a long-acting opioid.asked dr if he had a few patients taking short-acting opioids that werent controlled and asking him for something else? dr said sometimes he hears that,asked dr if he will start those patients on Butrans? dr said he will consider Butrans,we discussed initiation of Butrans,titration and side effects of Butrans.showed patient info booklet and asked dr to focus on application/rotation and side effects of Butrans with patients before leaving the office,dr said ok.focused dr on commercial pain patients for Butrans.we talked about OxyContin being an option for patients and dr having 7 tab strengths for
PPLPMDL0020000001	Cleveland	OH	44106	10/6/2011	dr said he's been thinking of Butrans more for his patients and has started a few patients, I asked dr what types of pain conditions did they have? dr said a variety but they were all taking tramadol,not controlled,so he tried Butrans.talked to dr about titration and side effects discussion with patients and showing patients Butrans patient info booklets before they leave office,dr said they are giving those to patients.asked dr if he will start a few more patients on Butrans,like the one's he started recently? dr said yes. talked to dr about OxyContin being an option for patients,after Butrans 20mcg,discussed 7 tab strengths and OxyContin formulary coverage.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44106	10/6/2011	talked to dr about 5 Butrans core selling messages,dr said he's new to this practice but is fully aware of all the pain medication options,dr said he likes transdermal delivery of Butrans and once weekly dosing application.i asked dr how Butrans could fit into his algorithm? dr said patients who cant swallow pills or perhaps dont want to take pills every day,he might consider Butrans for them.showed dr Butrans visual aid discussed initiation of Butrans,titration and side effects of Butrans.asked dr if he will see a few patients today or tomorrow that he can start on Butrans? dr said he might and will think about it.dr asked about medicaid coverage for Butrans,focused dr on commercial and discussed with dr medicaid's prior authorization requirements discussed OxyContin as an option for patients,7 tab strengths available for titration and formulary coverage.recommended Senokot-5
PPLPMDL0020000001	Stow	OH	44224	10/6/2011	Dr is a dabbler, HE said he is still writing Butrans and he asked if we have any data showing that it cannot be abused. I said I do not have any information about abuse, I reminded him that it is a schedule 3 and can be abused in a manner similar to other schedule 3s. HE asked how and I said I dont know that. He said he thinks Ohio is going to go the route of having medications have something in them to prevent abuse. I informed him that Butrans does not have anything in it and I went through the delivery system as well as the fact that it is a partial agonist at the mu receptors, not agonist antagonist. HE said that clears something up. We also reviewed the clinical study in opioid experienced patients and I showed side effect profile and decrease in pain. HE said he likes the fact that it is 7 day patch. I said is duration important to you and he said yes.HE asked what exactly they put in reformulation of Oxycontin coating and I said I do not know but can fill out a MIRF and he said that is not necessary.
PPLPMDL0020000001	Cleveland	OH	44118	10/6/2011	Introduced butrans to doc. Discussed the indication, positioning, CII status, and the once weekly dosing. He asked if butrans is like duragesic. I told him their is no head to head data and re-iterated the selling messages.
PPLPMDL0020000001	East Cleveland	OH	44112	10/6/2011	Doc said he still has not seen any patients come in on butrans and probably won't since he is not taking any new pain patients. I asked him to start his own patient on it - one patient that may be taking only tramadol or only vicodin but ATC. Advised him that those patients would start on 10mcg and can still take short acting for breakthrough. He said he will try one patient. He is considering coming to the speaker program. He said patients are still asking to be switched from oxycotin - some are, some aren't. He switched one patient from oxycotin to another product only to have to switch them back to oxycotin.<font color=blue><b>CHUDAKOB's query on 10/13/2011</b></font>Why did he switch this one patient. This sound like an AE.<font color=green><b>SIMERTOC's response on 10/17/2011</b></font>he did not mention an ae on this call but has in the past mentioned that patients dont like the reformulation.<font color=blue><b>CHUDAKOB added notes on 10/18/2011</b></font>The fact that he switched one patient ffrom oxyContin to another is an AE by itself. Your job at this point is to ask more question to determine exactly what he was saying.
PPLPMDL0020000001	Cleveland	OH	44102	10/6/2011	talked to Nagla,PA,about 5 Butrans core selling messages and focused Nagla on BWC and commercial pain patients for Butrans.Nagla said 2 of 3 HCP's have started a few patients on Butran,dr baishnab hasnt started anyone in this office. Nagla said she's recommending Butrans for patients taking a couple pills of short-acting opioids daily and not controlled,she feels thats the best place for Butrans.talked about Butrans patient info booklets assisting in educating patients and focusing discussion on Application/rotation of Butrans and side effects of Butrans.Nagla said they do give booklets out.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44112	10/6/2011	I discussed the key selling message of butrans. He said he had a couple of patients today that might have been good candidates. Referred to the initiation guide for starting doses. I invited him to the 10/20 speaker program. He expressed interest as the venue is close to his home. He said he will go if dr. tucker attends. I asked him to try butrans for a commercially insured patient and give a savings card. Provided Oxycontin MED D formulary reminder.<font color=blue><b>CHUDAKOB's query on 10/13/2011</b></font>Did you ask him why he thought the patients he saw may have been good candidates? This may have gained you some valuable information.<font color=green><b>SIMERTOC's response on 10/17/2011</b></font>he just said they were taking a few tablets per day.<font color=blue><b>CHUDAKOB added notes on 10/18/2011</b></font>This is a time when asking a few more questions may have gained you more information to support what he was going to do.
PPLPMDL0020000001	Stow	OH	44224	10/6/2011	Dr popped his head in and asked what I have and I said I have Butrans, he said he has not written that and asked the dosing again. I went through dosing and said if heh as patient failing on low dose PRN drug ATC and are commercial it is the only sched 3, 7 day transdermal. HE said leave him info, had to go back to procedure
PPLPMDL0020000001	Cleveland Hts	OH	44118	10/6/2011	Doc said he wrote 2 scripts of butrans since last week. One patient was on vicodin, he started them on 10mcg and assured patient they can take a couple of tablets for breakthrough pain. I told him that 10mcg would be the right starting dose. I reminded him that if patient is/was on greater than 80mg of a morphine equivalent, butrans might not be appropriate. Informed him that butrans savings cards can be used for mail order scripts. Reminded him of the oxycotin savings acrds and BWC coverage for the right patients.<font color=blue><b>CHUDAKOB's query on 10/13/2011</b></font>What dose of Vicodin was the patient on that you confirmed that 10ug was the correct starting dose?<font color=green><b>SIMERTOC's response on 10/17/2011</b></font>He said patient was on 5mg 3 or 4 times/day<font color=blue><b>CHUDAKOB added notes on 10/18/2011</b></font>Ok. Please make sure you are specific in your call notes so there is no confusion about what you said. Thanks for the clarification.
PPLPMDL0020000001	Stow	OH	44224	10/6/2011	Saundra is a prospect, she said she did try it in a patient but they said it was too expensive. I reminded her that she cannot write in medicaid or medicare. I asked her what is her understanding where Butrans should be used and she said she is using it to replace other long actings since it is a long acting. I reviewed intitiation guide with her and showed her the patient type whi is using Vicodin 3-4 a day or Tramdol. I said this is before those long acting and she said she understands now, she misunderstood where it is to be used. She said so it is like a starting point and I said yes. I asked if she sees patients like that and she said yes, I said will you write in those patients and she said yes. Reminded her of Oxycontin and she said the Drs write it in the last practice she was in and she said they do not at this practice even though it was reformulated
PPLPMDL0020000001	Cleveland	OH	44106	10/6/2011	dr said she's been rotating between all 3 OH sites so she hasnt thought much about Butrans. I asked dr if there are any therapies she would like to replace for pain management? dr said maybe some of the short-acting opioids.showed dr Butrans visual aid,discussed 5 core selling messages and asked dr what features stood out to her,dr talked about 1st and only 7 day analgesic delivered in 1 application.asked dr if she has a couple patients that meet Butrans indication,taking short-acting opioids that arent controlled? dr said she probably does have a lot of those patients.asked dr if she will start a few patients on Butrans,today or tomorrow? dr said yes she will consider Butrans.showed patient info booklet,focused discussion on application/rotation of Butrans,talked about OxyContin being an option after Butrans 20mcg and discussed formulary coverage for
PPLPMDL0020000001	Stow	OH	44224	10/6/2011	Dr said he has written butrans. I asked how his patients are doing and he said good. I said explain to me the patients that you use this in and he said he uses it in patients who are taking long acting and they are not working or he uses it in conjunction with other long actings. I said he may not be writing Butrans in the appropriate patient and he said he thought as long as they are under 30mg of Morphine equivalent he writes 5mcg and if they are over he writes 10mcg. I showed him the initiation guide and said if they are on over 80mg of morphine equivalent they are probably not appropriate and if they are in between 30 and 80 mcg, he needs to taper them down first to 30mg equivalent and they initiate. I asked how often he sees patients who are on 3-4 Vicodin or Percocet ATC and he said all of the time, I asked if they are new and he said they are new and existing patients. I said will you write it in those patients and he said yes. HE likes the product and thinks that he will have alot of success in this type of patient
PPLPMDL0020000001	Waterford	OH	45786	10/7/2011	W - She hasn't written but will continue to try and remember as an option. She said that she has a lot of patients who are on short acting meds that could benefit from longer control. I - Butrans follow up and review of appropriate patient selection when the indication is met. Use of initiation guide to discuss appropriate starting doses for patients depending on current therapy. Review of formulary coverage - BWC and commercial plans with a 3T status. Discussion of recent Medicaid changes with scripts moving back to different managed medicaid plans and Butrans successfully getting approved if the patients have taken hydrocodone, oxycodone, tramadol, or codeine in the past for pain. Savings card program eligibility.
PPLPMDL0020000001	Waterford	OH	45786	10/7/2011	W - Has only written for one patient that we discussed at our last lunch. Likes that the formulary coverage is getting better and would like to see Medicare Part D coverage as well. I - Butrans follow up and review of appropriate patient selection when the indication is met. Use of initiation guide to discuss appropriate starting doses for patients depending on current therapy. Review of formulary coverage - BWC and commercial plans with a 3T status. Discussion of recent Medicaid changes with scripts moving back to different managed medicaid plans and Butrans successfully getting approved if the patients have taken hydrocodone, oxycodone, tramadol, or codeine in the past for pain. Savings card program eligibility.
PPLPMDL0020000001					or codeine in the past for pain. Savings card program eligibility.

PPLPMDL0020000001	Waterford	OH	45786	10/7/2011	W - Waters said that he has started quite a few patients on Butrans and is anxious to see how well people respond. Likes having a CIII long acting option that has 7 days of therapy. Will continue to utilize Butrans for patients who continually need more and more short acting to control pain. I - Butrans follow up and review of appropriate patient selection when the indication is met. Use of initiation guide to discuss appropriate starting doses for patients depending on current therapy. Review of titration ability after 72hours and use of supplemental analgesia if needed. Review of formulary coverage - BWC and commercial plans with a 3T status. Discussion of recent Medicaid changes with scripts moving back to different managed medicaid plans and Butrans successfully getting approved if the patients have taken hydrocodone, oxycodone, tramadol, or codeine in the past for pain. Savings card program eligibility. OxyContin review of formulary coverage.
PPLPMDL0020000001	Twinsburg	OH	44087	10/7/2011	PROSPECT- Spent time with Dr Bressi going over the Butrans 5 core messages & box warning. Also reviewed appropriate patient range & type, focusing on patients who are taking 3 tramadol per day for a chronically painful condition but who are not achieving pain control. Discussed Butrans as an option for those patients, especially if they are complaining that their medication is wearing off too soon or if they call too soon for refills. I asked what Dr Bressi typically does with these patients. She said she usually refers out at that point. She said most of her patients on Vicodin take it PRN, not daily. She said if they get to the point where they need it daily, she refers to pain management because she does not want to deal with the record keeping involved with prescribing chronic narcotics. I asked if instead of prescribing Vicodin for patients who may take it daily after tramadol, if she might consider Butrans as a step before resorting to referring out. She said she would do this if she felt the patient was in legitimate pain & she trusted them. I agreed she should be cautious in prescribing all opioids. She said she would prescribe if that patient presents. Discussed OxyContin as an option for appropriate patients beyond the Butrans range.
PPLPMDL0020000001	Parma	OH	44134	10/7/2011	Spoke with floater pharmacist & discussed Butrans indication, dosing, appropriate patient type, & automatic savings via e-voucher. Also discussed ability for patients to take supplemental analgesia with Butrans. She said she did not know this. Also discussed OxyContin savings cards.
PPLPMDL0020000001	Lyndhurst	OH	44124	10/7/2011	SPoke to PA about the appropriate patient for butrans - after NSAIDs and before going to short acting tablets ATC. I explained that it is a 7 day dose and a CIII status which means it can be called in or refilled. She asked if patients need a day off before reapplying. I told her no and that a new patch she be applied to a new site. She like the idea of "something like this" compared to taking a bunch of tablets.
PPLPMDL0020000001	Cleveland	OH	44109	10/7/2011	dr said he talked to Ashleigh recently about Butrans and is thinking of patients who would be appropriate. showed dr visual aid,pg.11,asked if he could start a few patients on Butrans,today or next week? dr said he will do that. showed Butrans visual aid, we discussed initiation and titration of Butrans and showed patient info booklet asked dr to focus patient discussion on application/rotation of Butrans,focused dr on BWC and commercial plan patients. recommended Senokot-S- font color=blue><b>CHUDAKOB's query on 10/13/2011</b></font>What types of patients is he thinking of? Does he really know who the appropriate patient is, because I am sure he sees a lot of them daily.<font color=green><b>BROOKAM's response on 10/16/2011</b></font>agree with you, read ashleigh's call note and you will understand (that was the day before I saw him) so he does "get it now" but again if we cant see doctors people like him just wont remember Butrans. by me going every friday now,that will help just to give 1 piece of info and question every week- font color=blue><b>CHUDAKOB added notes on 10/18/2011</b></font>Ok. It seems like if he says he is "thinking" of appropriate patients would suggests he may not know who they are.
PPLPMDL0020000001	Parma	OH	44129	10/7/2011	DABBLER- I asked Dr Giogliotti if he is still offering Butrans to appropriate patients & if he has had any feedback yet. He said he is still waiting to hear back from some & he is still offering it, but most people don't take him up on the offer. I asked what types of patients he finds himself offering it to. He said anyone on short-acting. I asked if he would consider someone a Butrans patient who was taking 3-4 tramadol per day & not being well-controlled. He said no. I asked what he would give that person & he said Vicodin. I asked him why. He said probably just a habit & his aversion to all narcotics. I asked him if he would give them Vicodin, why not give them Butrans, also a CIII opioid & reminded him that it still does have abuse/addiction potential. I told him he could write just 4 patches of Butrans, which would be a month's supply. He said that was true & maybe he would do that. I asked him to choose a few patients who were taking tramadol daily & were not being well-controlled & switch them to Butrans. He said he was ready to do that. Discussed OxyContin q12h for patients beyond Butrans
PPLPMDL0020000001	Twinsburg	OH	44087	10/7/2011	PROSPECT- Reviewed 5 core messages with Dr Hillard & alerted him to box warning & risk of abuse/addiction. I asked if he had given Butrans any more thought. He said not really. Reviewed appropriate patient type, focusing on those who are taking tramadol daily, not being well-controlled or saying it is wearing off too soon. I asked what he does with these patients. He said he will refer out or give Vicodin, but he does not like to give Vicodin other than PRN. He said he does not want to have to do the paperwork associated with prescribing narcotics, but he does rely on OARRS. I agreed that OARRS is a great way to help protect his practice. Discussed Butrans dosing once weekly & asked if he thought it was reasonable to try a patient on Butrans after tramadol, instead of referring out right away. He agreed to do this if a patient he trusts like this presents. Discussed OxyContin q12h as a potential option for patients who are beyond the appropriate Butrans range.
PPLPMDL0020000001	Twinsburg	OH	44087	10/7/2011	PROSPECT- Reviewed 5 core messages & box warning with Dr Pla. Also reviewed appropriate patient range/type & asked what she usually does with patients who take tramadol daily who say it is not lasting long enough. She said usually she will prescribe Vicodin or refer them out. She said she will keep the patient & maintain them herself if she trusts them. I agreed that she should be cautious in prescribing all opioids, including Butrans. Discussed once weekly dosing as an option with Butrans with 3 dosage strengths. She said she would keep Butrans in mind as an option for those patients when she sees one who fits that description. She reminded me that in family medicine, they really do not see a lot of chronic pain. Reminded her of the appropriate patient type (patients not well-controlled on tramadol) & asked if she would agree that she does have some patients who fit that description & she said she does. Discussed OxyContin as an option for appropriate patients beyond Butrans 20mcg.
PPLPMDL0020000001	Westlake	OH	44145	10/7/2011	I reviewed our last conversation about using Butrans for patients taking tramadol around the clock. I asked if he would see someone like that coming in next week with commercial insurance where he could start Butrans and he agreed. We discussed the savings program for Butrans and to look for patients with commercial insurance. Reminder that OxyContin is preferred on most managed care plans.
PPLPMDL0020000001	South Euclid	OH	44121	10/7/2011	Window call....Reminded doc of the butrans patient type, 7 day delivery and CIII status. Provided initiation guide and info on the savings card program and an invitation to the butrans 10/20 program.
PPLPMDL0020000001	Westlake	OH	44145	10/7/2011	Quick call, Dr said that she has started a few patients on Butrans. I asked about the feedback and she said they are doing fine and she will continue to try it. I asked to gain some more time with her and she said she may start doing appointments. We reviewed the savigns cards and medication guides for Butrans and she will hand them out to patients. She said she is still starting new patients on OxyContin.
PPLPMDL0020000001	Cleveland	OH	44113	10/7/2011	talked to Dale,PA,about patients he's starting on Butrans,Dale said he's looking at patients taking tramadol and codeine, and starting them on Butrans instead of refilling their short-acting but they dont see a lot of those medications,they see a lot of vicodin and percocet. showed Dale Butrans visual aid,asked him to start more patients today and next week that are taking vicodin but not controlled and start them on Butrans,Dale said he will do that. asked Dale to focus patient discussion on application/rotation of Butrans in patient info booklet,Dale said he will do that. focused Dale on BWC and commercial plan patients to start on Butrans. recommended Senokot-S
PPLPMDL0020000001	Lakewood	OH	44107	10/7/2011	I showed the initiation presentation and asked if he saw patients on tramadol like this one. He said he does and I asked if he would use Butrans for a patient like this. He said he would, but vicodin is generic and patients want cheap. I reviewed the savings program and asked if he would look for a patient with commercial insurance and he agreed.
PPLPMDL0020000001	Cleveland	OH	44135	10/7/2011	I asked Dr to tell me about the success he is having so far with Butrans. He said he started another new patient last week and he has not heard a lot of feedback so he hopes they are doing well. I asked why he thought of it and he said that he would like to try Butrans as an option instead of other long acting medications. He said he would like to try it more in older patients if it was covered on Med D. We reviewed where Butrans is covered. I asked him to continue to start new patients and he agreed.
PPLPMDL0020000001	Westlake	OH	44145	10/7/2011	Spoke with Marlene regarding scheduling an inservice for Butrans. She will let me know some days that work with the staff. She wants to have the entire floor North and South involved in the in-service for Butrans.
PPLPMDL0020000001	South Euclid	OH	44121	10/7/2011	Window call....Reminded doc of the butrans patient type, 7 day delivery and CIII status. Provided an initiation guide and patien info guides, and oxycontin and an invitation to the butrans 10/20 program. nothing learned.
PPLPMDL0020000001	Independence	OH	44131	10/7/2011	DABBLER- Deb said she had not gotten specific feedback back from the patient she had told me about prior but that she has written for a few patients & has gotten good feedback from them. She said that sometimes she has found that a patient will say that it is wearing off after 4 or 5 days. I asked what she does. She said she usually tells them to apply the patch to their belly, where there is more adipose tissue. Discussed application & 4 approved sites, telling her the belly is not an approved site. She said she knows. She said that this seems to work & the patients report that it works better that way. Showed her BUP3015 & asked her thoughts. She said she felt this was very positive. I asked her her thoughts on approximately 48% of patients on Butrans 20mcg reporting at least a 30% reduction in pain. She said it was very impressive. I asked what her & her patients' expectations are for reduction in pain when starting opioid therapy. She said she counsels patients on this & thinks that a 30% reduction is a good place to aim. I asked who she considers a Butrans patient. She said she likes to get patients on Butrans before they get into the mentality that a pill will control their pain (ie 'I feel pain, I take a pill'). She said if they are just taking a few pills per day & are not getting relief, she would switch to Butrans then. I asked if she would continue to identify Butrans patients & prescribe & she agreed.
PPLPMDL0020000001	Westlake	OH	44145	10/7/2011	Dr reviewed the Butrans initiation guide and said he is going to enter the information into his phone so he has it at all times. I asked about the feedback from patients and he said that he has had good results. He said that he has started patients on Butrans who were previously on hydrocodone and he agreed to start more patients like these. Dr has put the Butrans medication guides in the patient waiting room. We discussed that OxyContin is an option when patients are taking more than 40mg per day of hydrocodone.
PPLPMDL0020000001	Cleveland	OH	44113	10/7/2011	dr said she's not started anyone on Butrans and hasnt really remembered Butrans. asked dr how Butrans fits into her pain management algorithm? dr said she has patients on tramadol,vicodin and percocet and if they arent controlled she will eventually convert them to a long-acting opioid. showed dr Butrans 5 core selling messages, asked what features stood out to her? dr said transdermal delivery and once weekly dosing application of Butrans. asked dr if she had a few patients, showed pain conditions pg.11 visual aid, with these pain conditions taking short-acting opioids daily but not controlled? dr said yes a lot of patients call in early every month for refills and some dont like taking pills so she thinks Butrans could be an option for them. showed initiation, titration and side effects info in Butrans visual aid and asked dr to think of a couple patients next week to start on Butrans, dr said she will consider it for some patients but doesnt know if patients will want to wear a patch but she'll talk to them. gave patient info booklet for assisting dr in educating patients on Butrans, focused dr on commercial plan patients. talked to dr about OxyContin being an option with 7 tablet strengths and discussed formulary coverage. asked dr to consider OxyContin for those patients who dont want to try Butrans because its a patch and she feels are ready for a long-acting opioid, dr said she will do that. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	10/7/2011	dr said he's started a few patients this week on Butrans, showed dr pg.11 visual aid pain conditions and asked him if he'll see patients this week with these conditions where he can start them on Butrans? dr said yes he'll do that. we talked about initiation, titration and side effects of Butrans, showed patient info booklet told dr to focus patient discussions on application/rotation of Butrans. discussed OxyContin as an appropriate option, 7 tab strengths and recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	10/7/2011	dr said he hasnt started any patients on Butrans as he hasnt thought about it. I showed dr Butrans visual aid, 5 core selling messages, asked dr what features stood out? dr said transdermal delivery and 1 application every 7 days. showed dr Butrans initiation guide, discussed initiation and titration of Butrans and asked dr if he will start a few patients today and next week on Butrans? dr said he will talk to some patients and see what they think about wearing a patch. talked to dr about OxyContin as an option and 7 tablet strengths, recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	10/7/2011	dr said she's started a few patients on Butrans, she sees them at 4 week follow-up and discusses titration and side effects. dr said most of her patients have been taking percocet but not controlled so she's started them on Butrans but she's considering patients taking vicodin every day and not controlled to start on Butrans because she's seeing good results with the patients she has on Butrans. dr said she forgets to discuss application/rotation of Butrans and will start showing that info in booklet. I asked dr if she would start a couple patients on Butrans, right after tramadol int controlling the pain? dr said yes she just started a patient this week that was taking tramadol daily and not controlled. focused dr on BWC and commercial plan patients for Butrans. talked about OxyContin being an option for patients, showed conversion guide and discussed formulary coverage. recommended Spoke with Leigh Ann, we discussed Butrans medication guide and that patients should wait 3 days to reach steady state. We discussed Butrans as an option for opioid naive patients and patients already on short acting medications. I asked if there were any employer groups in the area and she said mainly people who work for the health systems like CCF. Reminder that OxyContin is an option when Butrans may not provide adequate
PPLPMDL0020000001	Rocky River	OH	44116	10/7/2011	

PPLPMDL0020000001	Cleveland	OH	44109	10/7/2011	dr said he's not thought of Butrans,he likes transdermal delivery of medication he is familiar with Duragesic and asked if Butrans is for that type of patient? I showed dr Butrans visual aid,discussed appropriate opioid experienced patients and showed Butrans initiation guide and asked dr if he has patients in that dosing range for opioid experienced that perhaps aren't controlled on their short-acting opioid regimen? dr said he's sure he does,I asked dr to start a couple of these patients today and next week.dr said he'll be on vacation next week but will consider it when he comes back in town.focused dr on BWC and commercial plan patients for Butrans.talked about OxyContin being an appropriate option for patients with 7 tab strengths and formulary coverage for OxyContin.recommended Senokot-5<font color=blue><b>CHUDAKOB's query on 10/13/2011</b></font><b></b></font><font color=blue><b>CHUDAKOB added notes on 10/18/2011</b></font>I look forward to seeing how this works out.
PPLPMDL0020000001	Lyndhurst	OH	44124	10/7/2011	Doc swore that he just wrote a script of butrans today. I asked him to tell me a "drug addict and they are all drug addicts". I reminded doc of the indication for moderate to severe pain and in no way for addiction. Doc said he does not prescribe more than 30 tabs of vicodin/monthly told him butrans is best positioned for patients after failure on NSAIDs and before going to ATC short acting tablets. He went on the say that the OARRS program is the best thing as he believes most patients dont need pain meds and they are all drug addicts. Reminded him of the oxycontin indication as an option for patients with more sever pain. Dr is just in the process of moving to his new office. I asked if he is continuing to start patients on Butrans and he said that he is and he is happy with Butrans as another option. I asked if he would start new patients like the ones in the inclusion criteria and he said he would if procedures do not work.
PPLPMDL0020000001	Westlake	OH	44145	10/7/2011	Spoke with Sharron, we discussed the Butrans medication guide for patients and that patients should wait 3 days to reach steady state. We discussed that Butrans can be called in and refilled by Drs. We discussed that OxyContin can be an option when Butrans may not provide adequate analgesia.
PPLPMDL0020000001	Rocky River	OH	44116	10/7/2011	talked to dr about 5 Butrans core selling messages,asked dr what features stood out to him? dr said he likes transdermal delivery and once a week dosing with Butrans but he just hasn't thought about Butrans,asked dr what he needs to remember Butrans? dr said just keep reminding him. asked dr when he sees patients with pain conditions,pg.11 visual aid,how does he decide which short or long-acting opioid patients will get? dr said all of his patients start on short-acting tramadol and then when that doesn't control pain he will go to vicodin or percocet,long-acting opioids are his last choice.dr said he had to go and asked if Butrans was covered on Medicaid? told dr to focus on BWC and commercial plans for Butrans and asked if he would start 1 patient on Butrans today or next week? dr said he will consider it and talk to patients.gave OxyContin reminder and conversion guide and recommended Senokot-5<font color=blue><b>CHUDAKOB's query on 10/13/2011</b></font>Why do you think long-acting opioids his "last choice"? Is he grouping in Butrans with all other long-acting opioids?<font color=green><b>BROOKAM's response on 10/16/2011</b></font><b></b></font>long answer to your question, but its what I hear every day from HCP's that they have been trained to think of long-acting opioids as a last resort,last choice, they use all short-acting opioids first to treat chronic pain conditions and when all else fails, go to long-acting. does that make sense? hope so.<font color=blue><b>CHUDAKOB added notes on 10/18/2011</b></font><b></b></font>Perhaps they think that way because there was never another CII for them to think about. While what you say is true, we have to work to change that perception.
PPLPMDL0020000001	Parma	OH	44129	10/7/2011	PROSPECT - I asked Dr Roheny if it really was just managed care that is causing him not to prescribe Butrans. He said no. I asked him what it was then. He said he was extremely busy & was looking for something for a patient, so he could not elaborate. He told me he would think about my question & promised to answer it next time.
PPLPMDL0020000001	Cleveland	OH	44103	10/10/2011	talked to dr at window about Butrans 5 core selling messages,dr said he's not prescribed Butrans but has read my information that I left (Butrans fpi,initiation guide and patient info booklet) dr said he has a lot of medicaid patients so if its not covered on medicaid he probably won't prescribe Butrans.told dr to focus on commercial plan patients for Butrans and discussed prior authorization requirements for medicaid patients.I asked dr to think about 1 commercial plan patient who has 1 of the pain conditions,pg.11,thats not controlled on short-acting opioids,dr said he will think about it.showed dr OxyContin conversion guide and asked him to consider OxyContin for appropriate patients,dr took guide and walked away.
PPLPMDL0020000001	Lakewood	OH	44107	10/10/2011	I asked Dr if he see the patients shown in the inclusion criteria. He said that he does and will try to think of Butrans more often. He said he's tried it but not sure that the patient wanted to change. I asked if he would use the medication guide and sell Butrans to the patient as an option and he agreed. Reminder that OxyContin is still an option that is covered on most managed care.
PPLPMDL0020000001	Cleveland	OH	44109	10/10/2011	worked rheumatology dept-couldnt see doctors so left Butrans fpi,initiation guide and patient info booklet for Dr.Ballou,Dr.Magrey and Dr.Singer(Dept chairman), worked internal medicine - left same info for Dr.Lindheim,Dr.Harrington,Dr.McCreery,Dr.Jones, Dr.Spinelli,Dr.Ricanati and dr.Gelehrter.
PPLPMDL0020000001	Lakewood	OH	44107	10/10/2011	I reviewed our last conversation when he said that he is thinking of Butrans as an option when patients are taking 3-4 vicodin per day. I asked if he would start new patients like these this week and he agreed. We discussed OxyContin as an option and he will continue to write new scripts mostly in the hospital.
PPLPMDL0020000001	Cleveland	OH	44106	10/10/2011	talked to dr about 5 Butrans core selling messages,asked dr what features of Butrans stood out to him? dr said he likes that Butrans is transdermal and once a week dosing but he hasn't had any patients that he felt were appropriate for Butrans.we talked about Butrans indication,showed visual aid and showed dr pg.11 pain conditions,asked if he treated these conditions? dr said yes,asked dr to think of a few patients with back pain that are taking short-acting opioids daily but not controlled and start them on Butrans,dr said he will have to think about his patients coming in this week but will consider Butrans.focused dr on commercial plan insurance.discussed OxyContin as an option for patients,showed conversion guide and asked dr to start a couple patients on OxyContin,dr said he doesn't really prescribe OxyContin but knows its there.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44109	10/10/2011	talked to dr about patients with back pain,showed pg.11 visual aid,and dr considering Butrans as an option for them,dr said he's got a few patients on Butrans and they are doing well and will consider more patients to start on Butrans. asked dr to start a few patients today and this week on Butrans,dr said he will do that, focus dr on BWC and commercial plan patients.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44115	10/10/2011	dr said she's not had any patients complain to her lately about their tramadol so she's not really thought of Butrans for anyone.showed dr pg.11 visual aid,discussed various pain conditions and asked dr which one's she treats more so than others? dr said she treats a lot of arthritis and sees patients with osteoarthritis.I asked dr to start 1 patient,with commercial insurance,on Butrans,that has osteoarthritis and is taking short-acting tramadol daily but not controlled,instead of refilling tramadol,dr said she'll consider that option as long as patients are willing to wear a patch and remember to rotate the patch once a week.showed dr Butrans patient info booklet,discussed application/rotation section, and asked dr to give the booklet as this will assist in educating patient,dr said ok she liked that.talked about patient savings cards for commercial plan patients and recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44109	10/10/2011	talked to Ron about Butrans 5 core selling messages,asked Ron what features stand out to him? Ron said transdermal delivery and 1 application every 7 days.talked to Ron about recommending Butrans to patients who are taking immediate release opioids and not controlled and give patients Butrans patient info booklets,Ron said he will do that.Ron said there's been no scripts of Butrans yet but he has Butrans 5mcg in stock.talked about OxyContin being an option for patients,7 tablet strengths and discussed stocking.recommended Senokot-5
PPLPMDL0020000001	Lakewood	OH	44107	10/10/2011	I asked how her most recent Butrans patient is doing- the one who was going to pay cash for her script. She said that he has not heard back but the patient had picked up the script with the savings card. I asked where she is finding Butrans fitting into her practice and she said that she is thinking of it as an option to vicodin around the clock. I asked if she would continue to start new patients and she agreed. I reviewed OxyContin as an option that is covered my most managed care.
PPLPMDL0020000001	Westlake	OH	44145	10/11/2011	We discussed initiating Butrans for a patient who is already on low dose vicodin. He said he does have some patients only taking 2-3 low dose vicodin per day. We discussed Butrans and the use of supplemental analgesia as opioid or non opioid short acting. He said that he will try to prescribe more Butrans for these patient types. He said that many patients do not want to try a patch. We discussed that OxyContin is still an option and he said he has been prescribing more OxyContin recently. I spoke with Angela, she will keep me posted about Caresource changes. She said that she feels that Dr Baishnah has more appropriate patients for Butrans than Dr Celeste since most of his patients are on higher doses of opioids.
PPLPMDL0020000001	Northfield	OH	44067	10/11/2011	Introduced myself & Purdue's products to Michael, pharmacist. I inquired about Butrans stocking/activity. He said all Marc's stores keep a box of at least the 5mcg on-hand. He added that he has seen one Butrans prescription since launch. He said that patient got it for one month, then her insurance company (unknown) would not reimburse her, so she decided to not continue on it. Discussed favorable commercial coverage & also discussed OxyContin managed care status. He said he has not seen any OxyContin prescriptions since the reformulation. I asked what happened to those patients. He said he thinks they got switched to MS Contin or Percocet or "something else that was cheaper". He said he had no need for OxyContin savings cards.
PPLPMDL0020000001	Parma	OH	44134	10/11/2011	Reviewed with Lynda Butrans 5 core messages & appropriate patient range/type. Expounded on appropriate patient type, discussing those patients who are taking tramadol daily for a condition that is known to last an extended period of time if they are not being adequately controlled. She asked if she could prescribe Butrans for a patient who was only taking 50mg tramadol per day with Lyrica who was not well-controlled instead of increasing the tramadol. I told her she could initiate Butrans at the lowest starting dose, 5mcg/hr. She said she was thinking of a diabetic patient & asked if that would be a problem. I told her it would not. She said she might try Butrans for this patient.
PPLPMDL0020000001	Parma	OH	44129	10/11/2011	LOYAL CUSTOMER- I asked Dr Ortega what his key take-aways were from the Butrans dinner program. He said that he really did not learn anything from the program & felt that the speaker was not very experienced with Butrans. He also said that he did not really get to talk to anyone else about their experience with it, so he was disappointed. I asked him what his experience has been & if he is getting good results with his patients. He said this week, 2 patients have come in complaining of itching. I asked what the patients decided to do about that. He said one said the itching was only on the chest & arm site & is going to finish the box he has & then consult with Dr Ortega & the other patient discontinued. He said that he has found that since he was out for a few weeks, some patients actually ran out of Butrans but did not call in for refills. I asked why. He said because they are in some pain still, but not enough to really need medication for it. I asked his thoughts on this. He said obviously, if someone doesn't need medication, that is ideal. I agreed only patients who are in pain should be considered for Butrans. I asked if he would continue to prescribe Butrans for appropriate patients & he agreed to do this. Discussed savings cards, which Dr Ortega said he sometimes forgets to hand out. Discussed this with Cindy as well.
PPLPMDL0020000001	Cleveland	OH	44109	10/11/2011	talked to Kelsey,Floatar Pharmacist,she's covering for Paul,Pharmacist and Allan,Pharmacist,this week.discussed Butrans stocking with Kelsey,confirmed they are getting scripts for Butrans,asked Kelsey to give Butrans patient info booklets,show application/rotation section and side effects sections,Kelsey agreed.Asked Kelsey what her knowledge was of giving Butrans with immediate release opioids and Kelsey wasn't sure if doctors could do that or not,I showed Kelsey Section 2.4 Butrans fpi,maintenance of therapy and supplemental analgesia.Cheryl,Pharmacy tech,said she is here at this store every day and they do see doctors writing Butrans with immediate release opioids and some without and she will make sure patients get booklets.discussed OxyContin stocking and asked if they are seeing new Rx for OxyContin? Cheryl said no she is confident its only the same group of patients every month getting refills of OxyContin,noone new but they are seeing new Rx for Opana ER.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44104	10/11/2011	dr said she's not started anyone on Butrans but knows its available and will keep Butrans in mind if patients aren't controlled on their short-acting opioids.gave dr BUP3015,discussed clinical trial with dr and asked her to start 1 patient this week that isn't controlled on Butrans,dr said she will keep Butrans as an option for patients if patients ask for something else other than their pills.focused dr on commercial plan insurance for Butrans.recommended Senokot-5
PPLPMDL0020000001	Euclid	OH	44132	10/11/2011	Spoke to tech, Anna about the stocking and movement of butrans and oxycontin. She said they have just the one patient on butrans (one of Dr. Marshall's patients) and seems to like the product, has a less than \$10 co - pay. She suggested I talk to Drs. Casselberry, Levine, Bernise, Craig, and George Matthews who seem to have many patients fitting the indication/positioning of butrans. They still have a few regular customers on oxycontin but many have been switched to products like Opana ER and Oxycodone IR. Provided the butrans patient info guide as she said she would be willing to hand out to certain customers on many short acting tablets per month.
PPLPMDL0020000001	Parma	OH	44134	10/11/2011	LOYAL CUSTOMER- I asked Dr Hernandez if, when he is discussing pain with his patients, they discuss a goal of a certain amount or percentage of pain reduction. He said usually not, He said he just prescribes them the medication & then discusses how the patient is doing upon follow-up. I showed him BUP3015 efficacy data & asked his thoughts. He said he already knows Butrans works, so he didn't really need a study to show him that. I asked him how I should be explaining buprenorphine, as a molecule, to my physicians who do not have a high comfort level with it. He said to tell them that buprenorphine has 30-60% more analgesic potency in comparison to other opioids & it does not have the mind altering effects of other opioids. I told him that because that is not in our full prescribing information & we do not have data on that, I would not be able to tell physicians that. He said that is unfortunate because that is what he finds in his clinical practice.
PPLPMDL0020000001	Lakewood	OH	44107	10/11/2011	I showed the inclusion criteria and asked if he sees these patient types who are taking tramadol around the clock. He said that he does and he agreed to try Butrans for these patient types. Reminder that OxyContin is an option for patients taking more than 40mg of hydrocodone per day.

PPLPMDL0020000001	Cleveland	OH	44113	10/11/2011	talked to dr about the couple patients he's started recently,dr said he's starting patients on Butrans when they are taking 20-25mg vicodin daily and not controlled,dr said he gives them Butrans patient info booklet and follows-up 4 weeks later.asked dr how he discusses titration and side effects with patients? dr said he waits until 4 week appointment to titrate patients as most of his patients are being started on Butrans 10mcg and discusses side effects then.asked dr if he can show patients Butrans patient info booklets with application/rotation of Butrans section and side effects section? dr said he will do that.focused dr on BWC and commercial plan insurance for Butrans.told dr he has OxyContin, 7 tablet strengths,as an option for patients that dont want to try Butrans and want a pill but need a long-acting opioid.dr said he knows OxyContin is available but he never prescribes OxyContin.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44130	10/11/2011	DABBLER- I reminded Dr Fedorko of our last conversation & asked him what, to him, the ideal Butrans patient is. He said he knows exactly where to use it. I told him I am simply trying to figure out where, to him, the ideal place to use Butrans would be. He said that he might have a patient who he would consider ideal & went on to say that this patient is on only tramadol but it is not adequately controlling his pain. I told him this does sound like an ideal candidate & asked what his pain is from. Dr Fedorko said it is back pain due to failed surgeries. He said he thinks after tramadol is the ideal place to position Butrans & I told him it sounds like he is on the right track. He asked me to remind him of this patient when I see him next so he can tell me how he is doing. I agreed.
PPLPMDL0020000001	Cleveland	OH	44104	10/11/2011	dr said she's not started anyone on Butrans,she knows its there as an option.showed pg.11,visual aid,pain conditions and asked dr how she's managing chronic pain for these conditions? dr said she typically starts patients on traamadol then vicodin and eventually a lot of patients end up on percocet.I asked dr how would Butrans be a drawback by starting patients right after vicodin isnt controlling pain instead of going to percocet? dr said she might have some patents that are willing to wear a patch but majority of her patients want their pills and thats it.dr said she'll think about patients this week coming in where she can talk to them about Butrans,discussed initiation of Butrans,titration and side effects.showed dr Butrans patient info booklet and asked her to give this booklet to patients when starting them on Butrans,dr agreed.focused dr on commercial plan patients.discussed OxyContin as an option for patients who dont want to try Butrans because its a patch yet they are ready for a long-acting opioid,talked about 7 tablet strengths and showed conversion guide.dr said she doesnt have many patients on OxyContin and tries not to start more patients on OxyContin.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44114	10/11/2011	dr said he started more patients last week on Butrans,he's mainly focused on patients taking percocet whether or not they are controlled,he's telling them that Butrans is their only option and he'll give some patients percocet for breakthrough pain but he's trying to avoid refills of percocet so he thinks Butrans is a great option and patients seem to be doing well on Butrans.we talked about patients getting Butrans patient info booklets focusing discussion on application/rotation of Butrans and discussing titration and side effects with patients before leaving office,dr said he does a little bit of that but its mainly John,PA,who tells patients about that
PPLPMDL0020000001	Sagamore Hills	OH	44067	10/11/2011	DABBLER- Dr Scanlon said he is using Butrans more & more. He added that he even calls it in now because of his comfort level with it. I asked Dr Scanlon what type of patient feedback he is getting from these patients. He said most patients have done really well. I asked him if someone were to report that they were not getting enough relief if he would titrate the patient upward rather than switching their medication. He said he would. He said the only patients who would probably report that would be those who are on high doses of opioids & would not be considered Butrans patients. He asked me to leave him more savings cards as he has been going through them rather quickly. Also discussed OxyContin savings cards & favorable managed care status.
PPLPMDL0020000001	Cleveland	OH	44114	10/11/2011	talked to John,PA who works with dr katz and dr marshall,about Butrans patient info booklet and focusing discussion on application/rotation of Butrans,titration and side effects of Butrans,John said he does talk to patients about this info and gives booklets.John said he and dr marshall have been starting patients consistently every week and these are patients taking percocet daily,instead of refilling percocet they are starting patients on Butrans and those that arent controlled they will only give Butrans as an option.focused John on BWC and commercial insurance patients for Butrans.told John that if patients dont want to wear a patch and want a pill,they have option of OxyContin,showed OxyContin formulary grid and discussed 7 tablet strengths of OxyContin.John said ok they have a few patients on OxyContin so he'll keep this info in mind.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44105	10/11/2011	talked to Abdul,Pharmacist,about Butrans scripts,Abdul got 1 Butrans script from Dr. Celeste recently and Dr.Lozano and he's seen a few from other physicians but couldnt remember who wrote them.I asked Abdul if patients had commercial insurance or BWC,Abdul said some of them did and 1 was Medicaid requiring a Prior Authorization and another 1 was Medicare and the dr couldnt get approval for Butrans so she switched patient to Duragesic,that dr was dr lozano in middleburg hts.explained Butrans formulary coverage,showed grid,focused Abdul on BWC and commercial insurance plans for Butrans and showed Butrans patient savings cards for commercial insurance patients.asked Abdul to continue giving patients Butrans patient info booklets to patients when they arent controlled on their short-acting opioids or dont want to take pills,Abdul said he will do that and has been,Abdul said he thinks the booklets are helping patients go to dr and discuss Butrans asked Abdul if he is seeing any new Rx for OxyContin? Abdul said no,same patients monthly just getting refills,Abdul said he's seeing a lot of new Rx for Opana ER and switches from OxyContin to Opana ER and he's not sure why. I asked Abdul if he would start asking doctors why patients are being switched to Opana ER if patients are tolerating and controlled on OxyContin? Abdul said he will do that,showed OxyContin formulary grid and discussed patient savings cards for cash paying and commercial plan patients.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44130	10/11/2011	DABBLER- I asked Dr Diab if he would ever prescribe Butrans for a patient right after tramadol if it was not controlling their pain. He said it always depends on the patient. I asked him if there were any characteristics or conditions that make someone a better candidate for a long-acting opioid vs a short-acting around-the-clock. He asked me what pain management specialists have told me regarding that. I told him I hear that it can be difficult to switch a patient from a short-acting around-the-clock therapy to a long-acting option. I asked if he would agree with that. He said yes. He said it all depends on the patient. Discussed Butrans as a once weekly option for patients if short-acting medications like tramadol are not controlling their pain. Also reminded him of Butrans & OxyContin savings cards for patients with commercial insurance or cash-pay.
PPLPMDL0020000001	Lakewood	OH	44107	10/11/2011	Quick call as Dr left for the hospital. I told Dr he would probably be seeing a patient on tramadol or low dose vicodin today and asked if he would prescribe Butrans for these types of patients. He agreed and said that everything has been going smoothly.
PPLPMDL0020000001	Westlake	OH	44145	10/11/2011	Quick call with Dr, he said that everything is going smoothly with Butrans, I asked him to tell me about the patients he's started recently and he said they are doing well. also spoke with Tina and Jeanette regarding the managed care and savings cards for both Butrans and OxyContin.
PPLPMDL0020000001	Cleveland	OH	44114	10/11/2011	talked to dr about her patients taking tramadol daily for 1 of the pain conditions shown on pg.11 visual aid,but not controlled and dr starting them on Butrans instead of converting them to vicodin.dr said she knows it makes sense and has to try it in a few patients but hasnt done that.asked dr whats the drawback in doing that? dr said she didnt know its habit and she feels better trying short-acting opioids first then when all fail,she's thinking of Butrans.asked dr to start 1-2 patients this week that are taking tramadol and not controlled,start them on Butrans not vicodin,dr said ok.focused dr on BWC and commercial insurance patients.we talked about OxyContin being an option for patients that dont want to wear a patch like Butrans but need a long-acting opioid,showed OxyContin conversion guide and asked dr to continue starting patients on OxyContin when appropriate,dr said she will do that,discussed insurance coverage for OxyContin.recommended Senokot-S
PPLPMDL0020000001	Sagamore Hills	OH	44067	10/11/2011	Dr Loyke said he wishes he prescribed more pain medications so that he could "help me out". I reviewed with him the appropriate Butrans patient type, focusing on those who are not well-controlled on tramadol around-the-clock chronically. He said he must have at least one patient like that. I told him even if he has only one patient who could benefit from Butrans, that would be worth a try. He asked that I give him an FPI for this location since he already has one to reference in the Parma office from our last visit. Reiterated that Butrans is a CIII opioid & carries abuse & addiction potential like all opioids. I asked Dr Loyke if he refers out to pain management since he does not treat chronic pain himself. He said he hates to do that as he does not think patients benefit from chronic opioid therapy. He said when he refers out, either patients come back on "tons" of opioids, or the pain physician just does procedures on them & sends them back to him to maintain their pain. Discussed OxyContin q12h as an option for patients who are beyond the appropriate range of Butrans patients. Dr Loyke said again that he does want to find a place for Butrans & that he would try to find a patient.
PPLPMDL0020000001	Cleveland	OH	44130	10/11/2011	Spoke with John who said he was low on time & added that has not filled any Butrans prescriptions. Discussed Butrans pharmacists' webinar as a platform for him to ask a peer questions regarding Butrans & its usage. He said it sounded interesting. Discussed once weekly dosing & reviewed OxyContin savings cards/eligibility.
PPLPMDL0020000001	Cleveland	OH	44109	10/11/2011	talked to Debbie,Pharmacist,about Butrans stocking and she confirmed they still have 1 carton,Butrans 5mcg,noonne has prescribed Butrans.talked to Debbie about 5 Butrans core selling messages and asked her what features of Butrans stood out to her? Debbie said transdermal delivery and 1 application 7 days dosing,I asked Debbie if she would recommend Butrans to patients if they are taking immediate release opioids but not controlled? Debbie said she will do that,I left patient info booklets for her to give patients,discussed BWC and commercial insurance patients for Butrans.recommended Senokot-S
PPLPMDL0020000001	Independence	OH	44131	10/12/2011	I asked Dr Jack what he thought would happen if he simply selected an appropriate patient & started them on Butrans. He took an initiation guide out of my hand & looked through it but did not answer my question. I asked him what he has to lose by identifying one patient who was appropriate for Butrans & starting them on it. He said I made a good point & that he really does need to prescribe it. I agreed that he has many appropriate patients, as he has told me in the past, for Butrans & asked if he would just identify one & prescribe for them & he agreed.
PPLPMDL0020000001	Parma	OH	44129	10/12/2011	PROSPECT- Quick call- I asked Jen if she has noticed an increase in referrals since House Bill 93 came out. She said at first there was an increase but it has died down since. She added that she thinks it will pick up again when the Bill really starts to take affect. Spent time with Dawn reviewing Butrans appropriate patient type. She said she thinks it will take a new patient since they are generally on lower doses of opioids when they arrive. I agreed that this would be a good patient type to try. She said she knows Dr Nickels has some patients on it & the group is having their meeting next week, so she is sure they will discuss Butrans further at that point. Dawn also said that she is certain that Jen will wait to see what Caryn DeLisio, another NP with the practice, does before she ever prescribes.
PPLPMDL0020000001	Cleveland	OH	44129	10/12/2011	PROSPECT- Saw Caryn at Parma location as she practices here on Wednesdays. I asked her about her experience & thoughts on Butrans. She said she thinks it is a great idea & wants to see the long-term effects/results that Dr Nickels gets before taking action herself. I asked if Butrans being a long-acting opioid might have anything to do with her hesitation. She said that she & Andrea have discussed that & that that could be a factor in her not starting anyone yet. She added that she thinks Butrans would be a good option for patients who are new to the practice. I agreed that this is a good patient type & also added that she could consider patients who are on tramadol or low-dose Vicodin chronically with inadequate relief. She said that she actually knows of a few patients who were just in who were just started on tramadol. Dawn overheard & agreed that those patients would be ideal for Butrans. Dawn flagged those charts with notes saying that "per Caryn", these patients should be considered Butrans candidates so that when Jen sees them, she will switch them.
PPLPMDL0020000001	Independence	OH	44131	10/12/2011	Spoke with Amanda & Cameo (MA's) as Dr Rob was unavailable today. I gave them the Butrans "Initiations" invitation & told them about the interactive case studies. I asked them, since he did not have time to speak with me in person, if they would give the invitation to him & ask him to log on to the program. They agreed but said he probably will not do that. Discussed savings cards for Butrans & OxyContin.
PPLPMDL0020000001	N Royalton	OH	44133	10/12/2011	Spoke with pharmacist Jim & introduced Butrans. He said he is stocking it. Reviewed appropriate patient type, including patients who call too soon for refills of short-acting opioid medications because they are not controlling pain. Also gave him information on pharmacists' webinar & discussed interactive nature of the peer program. Discussed automatic savings for Butrans via e-voucher & OxyContin with savings cards for eligible patients. Jim said they did not need OxyContin savings cards.
PPLPMDL0020000001	Westlake	OH	44145	10/12/2011	Spoke with Deanna, she has not seen a lot of movement for Butrans. We discussed the inclusion criteria and the appropriate patient type. I asked if she sees these types of patients, she said does. She would not recommend something to the patients unless they asked her or complained about their current therapy. We reviewed OxyContin as a long acting option that is covered on most managed care.
PPLPMDL0020000001	Westlake	OH	44145	10/12/2011	I reviewed Butrans and asked the Dr if he has had the chance to gain experience with Butrans. He said he hasn't and he really doesn't see a lot of chronic pain. He said that he feels there is a niche for Butrans and he thinks that he may have a few cases where he could use Butrans as an option. I reviewed appropriate patients for Butrans and asked if he would try it in patients when tramadol does not provided adequate analgesia. He said he would. We reviewed the OxyContin is still a long acting option and he would most likely refer patients out by the time they would try to OxyContin.
PPLPMDL0020000001	Warrensville Heights	OH	44122	10/12/2011	PROSPECT- Dr Zivic saw me & said, "No one pays for this". I asked him to clarify. He said he wrote Butrans for a patient & she said her insurance wouldn't cover it. I asked if the patient had Medicare, Medicaid, or commercial insurance. He said at first that he thought it was commercial, but when I showed him the formulary grid, he said it might have been Medicare. He asked what the cost was for patients with commercial insurance. I told him if he is giving out savings cards with the prescriptions, those patients can pay as low as \$15. He said that was reasonable. I asked him if he had more patients like the one he had tried to prescribe for, who have commercial insurance. He said he is sure he does. I asked him to prescribe Butrans for those appropriate patients & he agreed. Also discussed OxyContin as an option for patients beyond Butrans range & Medicare D coverage.
PPLPMDL0020000001					



PPLPMDL0020000001	Cleveland	OH	44106	10/12/2011	showed dr pg.11 visual aid,discussed pain conditions treated most often in practice dr talked about back pain.i asked dr how Butrans could fit into her practice? dr said she's not sure as she doesnt have any clinical experience with Butrans.showed dr appropriate patients section in Butrans visual aid,discussed opioid experienced patients with back pain that could be appropriate for Butrans,asked dr to start 2 patients this week on Butrans.dr said she will consider it and asked me to leave info.i lefted clinical trial for dr.discussed initiation and titration of Butrans.focused dr on commercial plan patients for Butrans.talked to dr about OxyContin being an appropriate option for patients,showed conversion guide and dr said she doesnt have any patients on OxyContin but would take the OxyContin conversion guide.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44106	10/12/2011	dr said he's got a couple patients on Butrans,they are doing well no complaints to him so thats a good thing.i asked dr if he is discussing Butrans titration and side effects with patients before they leave office? dr said he talks about side effects briefly like any other opioid and gives Butrans patient info booklets to patients.dr said he will titrate Butrans dose at follow-up appointment or if patients call into office complaining to them that the dose isnt working for them.dr said he knows who the appropriate patients are for Butrans.showed dr Butrans visual aid and asked him to consider patients with 1 of pain conditions pg.11,that are taking tramadol daily but not controlled,to start them on Butrans.dr said he will consider that if appropriate.focused dr on commercial plan insurance.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44106	10/12/2011	talked to Steve,Pharmacy manager,about Butrans scripts and stocking.Steve hasnt seen any scripts for Butrans so he's waiting to order Butrans.showed Steve Butrans visual aid,discussed appropriate patients and initiation of Butrans,discussed importance of stocking and steve said well he doesnt like to order CII medications that often unless he see's scripts for them.i showed Butrans fpi,black box warning showing that Butrans is a CII and Steve said wow,that made a huge difference as he forgot about that,steve said he has no problem ordering Butrans because he orders CII opioid medications regularly.i asked Steve to recommend Butrans to patients taking short-acting opioids for chronic pain conditions,showed pg.11 visual aid,if they arent controlled and are asking for something else,steve said he would do that.i left Butrans patient info booklets,discussed commercial plan insurance for Butrans,showed formulary grid and gave 1 pack of Butrans patient savings cards for commercial plan patients.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44113	10/12/2011	dr said he hasnt started anyone on Butrans because the majority of his patients have acute pain so Butrans wouldnt be an option for them.i agreed with dr but showed dr pg.11 visual aid,discussed several pain conditions he treats and asked if any patients with these conditions take vicodin daily for their pain? dr said yes he has some that take vicodin daily,asked dr if that was considered chronic pain,dr said yes when he thinks about it if they are taking an opioid daily for their pain,then its chronic pain.i asked dr to start 1 patient on Butrans with 1 of these conditions where the immediate release opioid isnt controlling patients pain,dr said he will consider it and has a few patients in mind.focused dr on BWC and commercial insurance patients for Butrans.talked to dr about OxyContin,7 tablet strengths available as an option for patients,discussed formulary coverage,dr said he doesnt start a lot of patients on OxyContin but appreciated info.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44113	10/12/2011	dr said he's not started any patients on Butrans recently,he knows its available and will start prescribing more Butrans again.dr said he started 1 patient,August 2011,on Butrans and went on vacation for 3 weeks so he's not thought about Butrans since he's been back.i asked dr if he has prescribed vicodin this week for patients with chronic pain conditions? dr said yes.i showed dr pg.11 visual aid,discussed pain conditions and asked dr to start a couple patients on Butrans this week,that are taking immediate release opioids but not controlled,dr said he will do that.focused dr on BWC and commercial plan insurance patients for Butrans.talked to dr about OxyContin as an option for patients that dont want to try Butrans because its a patch and prefer pills,showed dr OxyContin conversion guide and discussed 7 tablet strengths,dr said he never starts patients on OxyContin as he doesnt prescribe CII medications.recommended Senokot-5
PPLPMDL0020000001	Rocky River	OH	44116	10/12/2011	Spoke with Stan, he said he has at least one patient on Butrans. We discussed the medication guide and how to help educate the patient on proper use, application and disposal. He will make sure the patients get them. We discussed that OxyContin is an option when Butrans may not provide adequate analgesia.
PPLPMDL0020000001	Cleveland	OH	44130	10/12/2011	Dr Kansal said that Butrans is not covered by insurance. I asked him to clarify. He said that he has tried to get it for patients who's insurance hasn't covered it. I asked if he knew the plans but he did not. I showed him Butrans formulary grid, emphasizing commercial insurance coverage. Also showed OxyContin formulary grid to show that OxyContin has outstanding managed care coverage.
PPLPMDL0020000001	Cleveland	OH	44106	10/12/2011	talked to Lisa,patient care coordinator,as dr was out till later afternoon,about Butrans new patient starts.Lisa said none of the doctors have started anyone new on Butrans,past 2 weeks and its due to their high population of medicaid and medicare.Lisa said medicaid,medicare are their 2 biggest plans and if dr hasnt met the medicaid PA requirements,patients cant get started on Butrans.i asked Lisa,since she takes ALL medication refill requests for ALL physicians in pain clinic,if patients are taking immediate release opioids daily and call in early for refills are the doctors considering Butrans as an option? Lisa said most of them are NOT,the doctors will refill the medications for patients if patients have been taking the immediate release opioids for years.Lisa said unless patients complain to doctors,phone or clinic visit,about their current medication,doctors wont discuss or start patients on Butrans.we discussed commercial plan coverage for Butrans and use of patient savings cards.i asked Lisa if she is seeing new Rx for OxyContin? Lisa said no,she's hearing a lot of patients ask for Opana ER and doctors are converting patients from OxyContin to Opana ER.Lisa said all of their patients on OxyContin have been taking it for years,are controlled and doctors just see them monthly for appointment and give refills if appropriate,discussed medicaid and medicare coverage for OxyContin.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44106	10/12/2011	worked anesthesia/pain management dept - see call notes on dr hayek,dr khalil,dr wyne and non-hcp call for dr sahal. worked family medicine dept-left dr marsh,dr trux and darrell hulish(pharmD for dept) Butrans fpi,BUP3015 and intiation guide for each of them with my business card
PPLPMDL0020000001	Cleveland	OH	44106	10/12/2011	dr said he's been thinking of Butrans more for his patients taking tramadol that arent controlled and ask him for something else.told dr that was great he's got Butrans in his mind but how often are patients asking for something else? dr said occasionally patients will ask for a different medication,i taking tramadol and thats not controlling the pain,some patients want vicodin or percocet.showed dr Butrans visual aid,initiation and titration info and asked dr to start a couple patients this week on Butrans.dr said he will try his best to remember Butrans and knows he has to get more patients started on Butrans.focused dr on commercial plan patients,dr said majority of his patients at main campus are medicaid and medicare so thats biggest challenge with starting patients on Butrans.showed dr OxyContin conversion guide,discussed OxyContin as an option for patients and dr said he writes a lot about OxyContin likes the medication,no problem with OxyContin,showed formulary grids for OxyContin to dr and asked him to continue starting new patients on OxyContin.dr said he will do that.recommended talked to dr about pain conditions,pg.11,dr talked about back pain patients and treatment algorithm for this group,by the time patients reach pain clinic they are either taking immediate release opioids and need medical management or they are being considered for surgical procedures,injections,etc.talked to dr about Butrans being an option for this group of patients when taking immediate release opioids daily but not controlled,dr said he will consider Butrans,discussed initiation of Butrans and titration and focused dr on commercial insurance patients.showed OxyContin conversion guide,discussed OxyContin as option for patients and showed formulary grid,dr said he doesnt really prescribe OxyContin but took info.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44104	10/12/2011	dr said he started 1 patient on Butrans but hasnt talked to any patients since that 1,showed pg.11 pain conditions,asked dr if he treats these conditions? dr said yes,we talked about patients with back pain.dr said he tries all non-opioid therapies first and if patients have persistent pain he'll start them on tramadol and see how their pain is over time with tramadol,asked dr what he does when tramadol isnt controlling patients pain? dr said he'll consider another immediate release opioid like vicodin or percocet.i asked dr to stop there and not convert patients to another short-acting opioid but to start them on Butrans,after tramadol isnt controlling patients pain.dr said he'll consider that but depends on patient being willing to wear a patch and rotate that patch once a week.showed dr Butrans patient info booklet and asked him to give 2 patients as this will assist with education of Butrans,dr said ok,focused dr on Commercial plan insurance patients for Butrans.recommended Senokot-5
PPLPMDL0020000001	Westlake	OH	44145	10/12/2011	I asked Dr to tell me about where he is prescribing Butrans. He said he has tried a few patients. He said he just started a patient today who is taking vicodin and he did not want to increase his dose so he decided to try Butrans. He said that the only issues he has had are managed care. He said he has tried to get it through on some Medicaid and Med D with not a lot of success. We discussed the managed care and savings cards. We reviewed that OxyContin is still a long acting option that has good managed care coverage. Dr is a speaker for Cymbalta. (Daughter (12) plays soccer)
PPLPMDL0020000001	North Royalton	OH	44133	10/12/2011	Introduced myself & Purdue's products to Carla, pharmacist. She said she may have one customer on Butrans & that is it. Reviewed with her appropriate Butrans patient type, focusing on patients who take around-the-clock low-dose Vicodin or tramadol chronically. Discussed that Butrans is a long-acting schedule III opioid with abuse & addiction potential like all opioids. Reviewed savings via e-voucher for her customers as well as OxyContin savings cards, which she said they did not need.
PPLPMDL0020000001	Bedford	OH	44146	10/12/2011	DABBLER- Dr Moufawad said he is looking forward to going to Connecticut to attend speaker training. I asked him, at this point, where he is finding a place for Butrans. He said to be honest he has only one patient on it. He said the patient is doing well on it, but that is the only one he has. I asked him what I can do, say, or answer that will help him feel more comfortable with Butrans. He said there is nothing I can do or say. He said that he does want to use it & he does think it is a great concept, he just needs to hear the training about it first & speak with other physicians. He asked me what the managed care coverage is, especially with BWC. I told him commercial coverage is outstanding & that is where he should focus, as he can give those patients savings cards as well. I told him that as of now, BWC is paying for Butrans. He asked if that was going to change in January & told me that BWC is not going to be paying for Suboxone for pain come January. I told him I do not know if any changes will arise with Butrans for BWC & I only know that it is being paid for at this time. Dr Moufawad said again that he does want to use Butrans & he does see a place for it. He said that he has 4 new patients coming in this afternoon, so he will evaluate each of them to see if they are Butrans candidates. I asked him to prescribe Butrans for these patients if appropriate & he agreed. Also discussed OxyContin as an option for patients beyond Butrans range.
PPLPMDL0020000001	Cleveland	OH	44121	10/13/2011	I asked doc if he sees any merit to a product like butrans for patients in his practice. He said maybe. He asked how much it costs. I told him it varies depending on the chain but will be over \$100/mo for the 5mg approximately. I explained the commercial coverage and the savings cards program. He insisted that tramadol is generic and cheap and so is vicodin if tramadol does not work. He asked if butrans works better than tramadol. I told him that there is no head to head data. I showed him the initiation guide. He said he would try it but his concern is that generic is always diserable. Told him that Butrans is just another option. He tends to think of a patch, such as fentanyl,for more severe pain. I reminded him of the indication of oxycontin and the preferred coverage.
PPLPMDL0020000001	Cleveland	OH	44195	10/13/2011	I talked to Steve,Pharmacist/Supervisor,about Butrans stocking and scripts,Steve said all he knows is they have Butrans in stock and are getting scripts for Butrans.i asked Steve who is writing the Butrans? Steve said he's not sure and doesnt have time to look right now.Steve said i could stop back next week and talk to Curt and maybe he will look that info up for me.showed Steve Butrans visual aid,discussed 5 core selling messages and focused on appropriate patients,Butrans being a CII opioid and once weekly dosing.i asked Steve if he could hand out Butrans patient info booklets when patients get scripts filled for Butrans and focus on application/rotation of Butrans? Steve said he will do that.focused Steve on commercial insurance plans for Butrans and BWC.
PPLPMDL0020000001	Beachwood	OH	44122	10/13/2011	I asked Jen if she is the one who usually sees the new patients in the practice or if Dr Yokiel always sees them. She said he is always the one who sees them first & she might do follow-up visits. I asked if she would be the one to switch someone to Butrans if appropriate. She said she can occasionally make a recommendation to switch a patient's medication, but it is ultimately his decision. Spent time reviewing appropriate patient type. Jen said the patient feedback she has gotten about Butrans has not been positive. I asked what the patients were on prior to Butrans. She said some of them were on short-acting. She said that some of them did not give it long enough to work & others they could have been moved up to a higher dose before giving up. I agreed & discussed ability to titrate to maximum 20mcg/hr dose & steady state after 72 hours. She said she would recommend Butrans for appropriate patients who are on the lower doses of short-acting opioids & not getting relief. Showed initiation guide & discussed formulary coverage.
PPLPMDL0020000001	Parma	OH	44129	10/13/2011	PROSPECT- I asked Dr Paat what kind of results he would expect to get if he just tried Butrans for an appropriate patient. He said it would probably be "pretty good". I reminded him of previous discussions surrounding Butrans study inclusion criteria, including conditions such as spondylolysis & spondylolsthesis. I asked if he would agree that he generally treats them with opioids. He said yes. I also showed side effect profile, telling him I wanted to be sure he is comfortable with the safety of Butrans. I asked if anything was surprising to him in the data. He said no. I showed him initiation guide & discussed titration ability after day 3 to a maximum of 20mcg. Reviewed ability to take supplemental analgesia with Butrans. Also showed him exactly how to write the prescription & also showed demo box kit. I asked him if he could simply select one or two appropriate patients like the ones we discussed & start them on Butrans. He said yes.

	Beachwood	OH	44122	10/13/2011	I asked Dr Yokiell if he has had an increase in referrals following House Bill 93. He said tons. I reminded him of previous conversations about newer patients being candidates for Butrans. Reviewed appropriate patient type. I asked what his clinical experience has been. He said it has been a managed care/cost issue for some. Reviewed Butrans formulary information, focusing on BWC & commercial insurance as well as savings cards. Discussed ability to titrate after 72 hours to a maximum 20mcg dose. He said he is comfortable titrating upward & would not give up after just one dose unless someone got nauseated or had an adverse event, which he added has not happened. I asked if he would continue to identify Butrans patients & he agreed. Discussed OxyContin 7 tablet strengths & managed care availability. He said he is very comfortable with OxyContin. I asked if he uses all 7 strengths. He said he finds himself using 30mg often because he can use them between 20 & 40. He said 40 is about as high as he likes to go with OxyContin as he believes if 40 doesn't work, opioid therapy in general may not work
PPLPMDL0020000001	Cleveland	OH	44195	10/13/2011	worked neurology dept-had to leave Butrans fpi,initiation guide,patient info booklet,dinner program invite 10/20/11 and web conferences in october for all doctors as i couldnt see them.Left this info for Dr.Spears,Dr.Stillman,Dr.Mays and Dr.Kriegler.worked rheumatology dept-left Butrans fpi,initiation guide,patient info booklet,dinner program invite 10/20/11 and web conferences for Dr.Calabrese,Dr.Long,Patty Paczos,PA,Betsy Kirchner,NP and Dr.Chatterjee-same rule cant see doctors leave info with front desk receptionist and she gives all info to medical secretaries who put in doctors boxes. worked anesthesia/pain management dept-left SAME Butrans info as noted above for Dr.Covington,Dr.Stanton-Hicks,Dr.Cheng,Dr.Vrooman,Dr.Katyal,Dr.Leizman,Dr.Mekhaii,Dr.Mintzer and Dr.Frost- couldnt see any doctors had to leave info at receptionist desk
PPLPMDL0020000001	Highland Heights	OH	44143	10/13/2011	Asked doc where he is getting the best success with butrans. He said he has a couple of older patients on it and they really like it. He said most patients need to start on the 10mcg dose. I explained that unless he is seeing opioid naive patients most of his patients will likely start on 10mcg. He said he likes it and will keep writing it. I explained that a low dose of oxycontin would likely be a progression after 20mcg of butrans.
PPLPMDL0020000001	Cleveland	OH	44121	10/13/2011	Introduced doc to butrans with the indication, 7 day delivery, CII status, and the positioning. He said he treats a lot of metabolic conditions and would normally refer patients to pain management but Butrans sounds intriguing. He wanted me to leave more info. Provided initiation guide, formulary grid, and savings cards.
PPLPMDL0020000001	South Euclid	OH	44121	10/13/2011	Introduced doc to butrans by discussing the indication, the once weekly dosing/7 day delivery. I asked if she has any patients taking analgesics like vicodin or tramadol daily. She said she tries not to prescribe them much and only as needed. I explained that butrans is for chronic pain but probably best for moderate chronic pain. I asked him to try butrans the next time she thinks of prescribing more than 60 tabs of vicodin/mo. No commitment.
PPLPMDL0020000001	Independence	OH	44131	10/13/2011	PROSPECT- I showed Dr Sundaram the inclusion criteria & asked how often he sees these conditions. He said daily. I told him that in those patients, right after NSAID's or COX-2's, he can use Butrans. Reviewed once weekly dosing & showed him demo kit. Also showed disposal unit & demonstrated how to dispose of patch. Also discussed CIII & abuse/addiction potential. Dr Sundaram said he tried Butrans on "a few" patients & it did not work. He added that once someone has had Percocet, they don't want to switch to a long-acting. Discussed OxyContin as an option for patients beyond Butrans.
PPLPMDL0020000001	Shaker Heights	OH	44122	10/13/2011	PROSPECT- Showed inclusion criteria & asked Dr Agarwal how frequently he sees patients in his office with these conditions. He said daily. I told him that after NSAID's or COX-2's stop working for someone, that would be a Butrans patient. I asked him if he can see himself using it there. He said he would use a non-narcotic like tramadol instead. I asked what dose he would start someone on. He said 50mg 3-4 times per day. I asked what happens if/when that is no longer controlling their pain. He said he refers out. He said he only does chronic pain management in nursing homes. I asked if this means he sees absolutely no place for Butrans in his practice at all. He did not respond. Showed him demo kit & initiation guide pg 6. Spent time going over appropriate range of patients & discussed OxyContin for patients beyond Butrans range, like the ones in nursing homes. He said he uses it a lot there. Discussed 7 tablet strengths. He said he uses the most amount of 40mg. He looked at Butrans initiations guide again & said he must be able to use Butrans someplace. He asked about starting doses & highest dose. Discussed titration ability after 3 days to a maximum 20mcg dose & using 5 & 10mcg as starting doses, depending on current opioid regimen. Told him he could use Butrans as an option before referring to pain management.
PPLPMDL0020000001	Cleveland	OH	44109	10/13/2011	He said maybe. Also discussed Ryzolt as option as once daily tramadol product. He said managed care is difficult. Recommended Senokot. showed dr BUP3015 clinical trial, discussed inclusion criteria and results, dr said the data was impressive but he feels his patients dont want a patch, dr said patients just want pills and more pills and it never ends, asked dr if patients ever say their pain isnt controlled by immediate release opioids and ask for something else? dr said yes, all the time. I asked dr to start 1-2 of those patients on Butrans instead of refilling their immediate release opioids, dr said he will do that but doesnt understand why patients would be wearing a Butrans patch and still take immediate release opioids, I showed dr Butrans fpi, maintenance of therapy section, told dr he can give non-opioid therapy with Butrans or immediate release, its up to him. dr said ok, dr asked how Butrans compared to other patches like Duragesic? I told dr there are no head to head studies with other patches and Butrans, therefore I cant comment on that. dr said ok, asked dr to get some clinical experience with Butrans and start a few patients, showed initiation guide and discussed titration, focused dr on application/rotation of Butrans in Butrans patient info booklet and asked dr to tell patients about this info, dr said he will do that, focused dr on BWC and commercial plan patients to start on Butrans, dr asked me to leave Butrans patient education booklets in exam rooms and waiting rooms as that will help him educate patients.
PPLPMDL0020000001	South Euclid	OH	44121	10/13/2011	Doc said she tried butrans but it didnt seem to work for her. The patient was an elderly female that had tried other analgesics. She was cautiously started on the 5mcg and not titrated up when it did not work. I explained that 5 mcg is the starting dose for patients that may be more appropriate for opioid naive patients. She started the patient on the low dose because of her age. I explained that there is no dosing adjustment necessary for the elderly yet to be cautious. She said she would give it another try. She still has the initiation guide.
PPLPMDL0020000001	Cleveland	OH	44102	10/13/2011	discussed BUP3015 opioid experienced clinical trial with Nagla, P.A. Nagla said she is telling patients that are taking 3-4 vicodin a day and not controlled that Butrans is their only option, Nagla said she'll give vicodin for breakthrough pain for 1 week while wearing Butrans but that's it, after that patients can take aspirin or ibuprofen. I asked Nagla if the reduction in pain percentage was clinically significant to her? Nagla said yes, a 30% reduction in pain is significant. I asked Nagla if she had a few patients coming in today that she can start on Butrans? Nagla said she probably will and if not she'll look at patients next week that are appropriate for Butrans. discussed initiation guide, dosage strengths, titration and I asked Nagla if she's giving Butrans patient info booklets to patients and showing application/rotation info? Nagla said sometimes she tells them but usually she just gives booklet to patients for them to read. I asked Nagla to focus discussion on application/rotation of Butrans before patients leave office and still give booklets, Nagla said she will do that and asked me to leave Butrans patient info booklets in exam rooms and waiting rooms, recommended Senokot-5
PPLPMDL0020000001	Cleveland Hts	OH	44118	10/13/2011	Quick call...I asked doc how his butrans patient is doing and likes the medication. He said he is not sure yet as its only been a week. I asked him to try another patient similar to the first and that 10mcg would be the likely starting dosing. Provided updated formulary grids for oxycontin and butrans. <font color=blue><b>CHUDAKOB's query on 10/20/2011</b></font>-Charmaine, the way your call note is written it is difficult to know what you mean when you that 10ug would likely be the starting dose. If you are going to suggest a starting dose then it is good practice to be more specific in your notes about the dose the patient was previously on. Does this make sense?<font color=green><b>SIMERTOC's response on 11/03/2011</b></font>-Yes. I could have specified that 10mcg would likely be a starting dose for patients that are being switched from taking several tabs of vicodin per day. <font color=blue><b>CHUDAKOB's query on 11/03/2011</b></font>-You should dbe more specific than that. Several can be two. If it is the 5mg Vicodin, than 10ug would not be the starting dose. If it was a 7.5mg, than it would be the proper starting dose after a proper titration to <30mg morphine equivalents. There are too many unknowns in your call notes to leave the statement as is. <font color=green><b>SIMERTOC's response on 11/08/2011</b></font>-Ok. I will be clearer about this. <font color=blue><b>CHUDAKOB added notes on 11/09/2011</b></font>-Thank you!
PPLPMDL0020000001	Cleveland	OH	44121	10/13/2011	I reviewed the butrans patient indication and that it might be appropriate for patients who have failed on tramadol or before vicodin. She said she does not treat pain - chronic or acute. Gave her an initiation guide and formulary grid.
PPLPMDL0020000001	Parma	OH	44129	10/13/2011	DABBLER/FIRST TIME CUSTOMER- Saw Dr Gallagher briefly at the window. I asked him if he had any questions regarding Butrans since our last discussion. He said there was "nothing new" & added that he just got something I had left for him from a week or two ago. He said he just looked over it, thanked me, & then started talking to his patient. Spoke with Sheila (MA) & discussed Butrans as a once weekly transdermal system for moderate to severe chronic pain. Also gave her formulary grid & savings cards.
PPLPMDL0020000001	Westlake	OH	44145	10/13/2011	I showed the clinical trial for patients who are opioid experienced. I asked if he sees patients like the ones in the inclusion criteria and he said he does. I asked if he finds that a 30% reduction in pain is significant and he said that it is. He said that he is determined to try it. He said that he put the patient information in the exam rooms to help him remember. Reminder that OxyContin is an option when Butrans may not provide adequate
PPLPMDL0020000001	Cleveland	OH	44111	10/13/2011	Spoke with Dan, he has not seen a lot of movement of Butrans at this store, but they have it in stock. He thinks they have received a few scripts. I reviewed the information to let patients know about Butrans such as application, rotation disposal, and steady state. He said that he will ask the patients if they have any questions. We discussed the savings programs for Butrans and OxyContin.
PPLPMDL0020000001	South Euclid	OH	44121	10/13/2011	I introduced doc to butrans with the indication and positioning. Explained the CII status and 7 day delivery in once weekly dosing. He thought it was a good idea but commented that people won't like that because they can't take a bunch of pills. I explained that Butrans is still a scheduled narcotic and has the potential for abuse and diversion similar to other opioids.
PPLPMDL0020000001	Cleveland	OH	44111	10/14/2011	We reviewed the savings programs and managed care for both OxyContin and Butrans. We discussed the Butrans medication guide and how to instruct the patients about proper use of Butrans. I asked if she would recommend Butrans when she is working with the Drs and she said that she will.
PPLPMDL0020000001	Parma	OH	44134	10/14/2011	Spoke with technician who said that Mercedes was unavailable to talk. I gave her an updated Butrans FPI & reviewed Butrans appropriate patient type with her. She said she has not seen any activity of Butrans at this store. Discussed automatic savings via e-voucher & OxyContin savings cards.
PPLPMDL0020000001	Cleveland	OH	44135	10/14/2011	Spoke with Brad, we discussed the appropriate patients for Butrans and I asked if he would ever recommend. He said that he would if the patient was not happy with their current therapy. We discussed the medication guide and eh agreed to give them out to any Butrans patients. We discussed when OxyContin may be an option when Butrans may not provide adequate analgesia.
PPLPMDL0020000001	Cleveland	OH	44111	10/14/2011	Dr asked me again where Butrans fits in. We reviewed the appropriate patient types and the invitation guide. I showed him the inclusion criteria in the main vis aid. I asked if he sees these types of patients and he said all the time. He said that he has been doing a lot of procedures but would like to see if Butrans might have a place when patients need medications.
PPLPMDL0020000001	Cleveland	OH	44109	10/14/2011	dr said he talked to a few patients this week about Butrans but they werent interested in wearing a patch and just wanted to stay on their pills. I told dr that that was good he spoke with a few patients about Butrans but asked if they were appropriate patients for Butrans, dr said he thought so as they were taking short-acting opioids daily but not controlled and wanting more pills, showed dr Butrans visual aid, discussed appropriate patients-focused on opioid experienced patients and initiation of Butrans, told dr to give Butrans patient info booklets to patients as a way to educate them, dr liked that idea and said he would do that. I asked dr to find 1 patient today and next week, thats appropriate, and start that patient on Butrans, dr said he will do his best, discussed BWC and commercial insurance plans, recommended senokot-s
PPLPMDL0020000001	Cleveland	OH	44113	10/14/2011	talked to dr about appropriate patients for Butrans as dr said he couldnt remember who the right patient was for Butrans, showed Butrans visual aid, pg.11 discussed pain conditions in the inclusion criteria, dr focused on back pain patients, asked dr if he had a few patients in mind, per our discussion, that he could start on Butrans? dr said yes he does and will talk to patients about trying Butrans, dr said a lot of patients get on the pills and dont want to try a patch, showed dr Butrans patient info booklet and asked dr to give this booklet to patients to assist in educating them, dr said he liked that and would do that, dr asked about insurance coverage for Butrans, showed Butrans formulary grid and focused dr on commercial insurance patients, recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44109	10/14/2011	dr said he's talking to more patients about Butrans, started a few more patients on Butrans and so far the patients seem to be tolerating the medication, we discussed appropriate patients, visual aid-opioid experienced patients, initiation and titration of Butrans and I asked dr to start a few more patients today and next week on Butrans, dr said he will do that, focused dr on BWC and commercial plans for Butrans starts, recommended Senokot-
PPLPMDL0020000001	Cleveland	OH	44113	10/14/2011	showed dr pg.11 visual aid, discussed pain conditions in inclusion criteria and asked dr if he treats these conditions? dr said yes all types and all the time, asked dr how Butrans could fit into his algorithm, dr said he wasnt sure as he hasnt prescribed Butrans yet but maybe for patients who dont want to take pills anymore. I asked dr how often he hears that from patients? dr said not often, showed dr appropriate patients for Butrans, opioid experienced was focus of discussion, asked dr if patients ever ask for something different than what they are taking? dr said yes. I asked dr to start a couple patients like that on Butrans, discussed initiation and titration of Butrans and focused dr on commercial pain patients, dr said he will think of some patients and talk to them about Butrans, recommended Senokot-5
PPLPMDL0020000001	Westlake	OH	44145	10/14/2011	I asked Dr what he would think if 50% of the patients he tried on Butrans saw a 30% or better reduction in pain. He said that that would be pretty good. I showed Dr that our clinical trials showed these types of results. I asked if he would try Butrans for these patient types and he agreed. He said that managed care is the only reason he does not prescribe more and we focused on commercial insurance. We reviewed OxyContin as an option when Butrans may not be covered my managed care.

PPLPMDL0020000001	Cleveland	OH	44111	10/14/2011	Spoke with John, he still has not seen movement with Butrans. He said he thinks it would be a good option for some patients who are on tramadol around the clock. We reviewed the invitation guide and doses. We reviewed when OxyContin may be an option when Butrans may not provide adequate analgesia.
PPLPMDL0020000001	Independence	OH	44131	10/14/2011	Quick call- Roman came to the window & said he did not have time today to talk. Positioned Butrans for patients who are not well-controlled on tramadol who have commercial insurance. Handed back BUP3015 & asked him to review this information as I thought it would be relevant for his practice. He said he would look over the study, then walked away.
PPLPMDL0020000001	Cleveland	OH	44109	10/14/2011	worked pm&r dept - see call notes on dr jaffer, dr greenwood and dr fox
PPLPMDL0020000001	Lakewood	OH	44107	10/14/2011	I told Dr that I want to show him what his patients get when he writes Butrans. We reviewed the demo and carton. I asked his thoughts. He asked about initiating patients who are already on opioids and we reviewed the initiation guide. I asked if he has patients on low dose vicodin like the ones we discussed that he could start a 10mcg Butrans. He agreed. We discussed OxyContin as an option when Butrans does not provide adequate
PPLPMDL0020000001	Cleveland	OH	44113	10/14/2011	dr said he hasn't started anyone on Butrans but knows its available. asked dr what's holding him back, dr said nothing he just hasn't thought of Butrans. dr asked about medicaid coverage for Butrans as that's a large percentage of his practice. talked to dr about insurance coverage, focused dr on BWC and commercial plan patients and asked dr since he's asking about insurance coverage does that mean he's got some patients in mind that he can start on Butrans? dr said he has a couple that may be willing to wear a patch but most patients want their pills. I showed dr Butrans fpi, maintenance of therapy section and told dr he can give immediate release or non-opioid therapy with Butrans. dr said ok. talked to dr about OxyContin being an option for patients, showed conversion guide and discussed formulary coverage. asked dr to continue starting new patients on OxyContin when appropriate, dr said he will do that. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	10/14/2011	dr said she's continually starting patients on Butrans and seeing good results so she's happy. showed dr BUP3015, discussed results and dr thoughts, dr said 30% reduction in pain was clinically significant. I asked dr if she had patients taking vicodin every day for 1 of the pain conditions shown in visual aid, pg.11, that aren't controlled and she could start them on Butrans? dr said she might have some but hasn't thought about it she's been focused on percoct patients to start on Butrans. dr said she will think about it and consider that next time she sees her patients taking vicodin. focused dr on BWC and commercial insurance plans for Butrans. recommended Senokot-S
PPLPMDL0020000001	Beachwood	OH	44122	10/14/2011	Spoke with nurse, Ted, & inquired about their need for Butrans or OxyContin savings cards. Ted said that Dr Tabbaa was already gone for the day & he did not know if any cards were needed. Asked him to give Dr Tabbaa an "Initiations" invite & request that he log on to experience some case studies. Ted said he would leave the information for Dr Tabbaa. I asked who normally gives out savings cards to patients & he said they do not have a system for that at this point since there have been so many changes within the suite. He said he services all the different doctors who are in this suite.
PPLPMDL0020000001	Cleveland	OH	44130	10/14/2011	Quick call- Saw Dr Popa at the window. Reminded her of our previous Butrans conversation & positioned Butrans for patients taking chronic tramadol who are not adequately controlled. Handed back Butrans savings cards & asked her to keep commercially insured patients in mind. Reviewed savings cards with Renee & told her they are for commercially insured or cash-pay patients only.
PPLPMDL0020000001	Cleveland	OH	44109	10/14/2011	I talked to Nate, Pharmacist, about Butrans 5 core selling messages and discussed formulary grid, no scripts here and they aren't ordering Butrans until that 1st script comes into pharmacy. we discussed importance of stocking and I asked if Nick could at least give patients the Butrans patient info booklets if they are taking immediate release opioids and not controlled and perhaps asking for something else. Nick said he'll do that. discussed OxyContin formulary coverage and stocking and Nick said they are seeing more new Rx for Opana ER and just the same patients coming in monthly for OxyContin, asked Nick if he knew why that was occurring. Nick said he had no idea. recommended senokot-S
PPLPMDL0020000001	Parma Heights	OH	44129	10/14/2011	Spoke with pharmacist Larissa & reviewed appropriate Butrans patient type, focusing on patients calling too soon for refills of short-acting opioids because it is not lasting long enough. She said this is common. I gave her patient information guides & asked if she would give them to patients who she feels would be appropriate for Butrans so that they can talk to their doctor about Butrans as an option. She agreed to do this. Also gave her updated FPI & discussed OxyContin savings cards.
PPLPMDL0020000001	Cleveland	OH	44109	10/14/2011	dr said he's not started anyone on Butrans yet as he doesn't have that many patients on opioids. dr said he really isn't comfortable starting patients on a long-acting opioid. he was trained to start patients on tramadol and when that fails go to vicodin and if that doesn't control patients pain go to percoct. dr said it's just a way of thinking for him to prescribe short-acting opioids 1st and then when all else fails he goes to long-acting opioids. showed dr BUP3015, discussed opioid experienced patients and results from clinical trial, dr said the data was clinically significant so he will keep Butrans in mind for any patients he feels are appropriate. focused dr on BWC and commercial plan patients. recommended Senokot-S
PPLPMDL0020000001	Parma	OH	44129	10/14/2011	DABBLER- Only got to see Dr Gigliotti briefly as he was dealing with a "serious" patient issue. Positioned Butrans for patients not well-controlled on their short-acting opioids & OxyContin for patients beyond Butrans range. Spoke with Jaz, reviewing savings cards for both products.
PPLPMDL0020000001	Westlake	OH	44145	10/14/2011	I asked Dr if he's been happy with Butrans enough to make it part of his regular protocol. He said yes, and he is prescribing Butrans regularly. We reviewed the initiation guide and he said that he is usually converting patients from other opioids. We discussed tapering down and starting Butrans 10mcg. Reminder that OxyContin is still an option and he mainly prescribes for cancer patients.
PPLPMDL0020000001	Beachwood	OH	44122	10/17/2011	PROSPECT- Showed Dr Warren Butrans BUP3015 efficacy data & asked him if he found this to be clinically meaningful. He said yes. I told him the reason I was showing him this was to help him feel more comfortable with Butrans & its efficacy. He said that made sense. Reminded him of appropriate patient type, especially those who are not well-controlled on tramadol. Also let him know that OxyContin is covered on 92% of plans nationally. I asked Dr Zaidi if he thought he would ever really write Butrans. He said he will if he sees the right patient. I asked him if he thinks he even sees the right patient type in his office or if he thinks his patients are on too high a dose of opioids for Butrans to be appropriate. He said he doesn't know. He added that he wants to hear what other pain management physicians are doing. I told him the best way to do this would be to attend a program, & gave him the invitation for the 10/20 Cleveland program. I asked if he thought he could go. He said he thinks so. Dr Zaidi said it is important to understand not only a patient's needs but also their mindset. I asked what he meant. He said if he tells a patient to put a patch on for a week, they will not want to do this. I asked why. He said they want something to take when they have pain. I reminded him that patients can take supplemental analgesia in the form of opioids or non-opioids, when on Butrans. He said he would not prescribe Butrans with an opioid because of buprenorphine. I reminded him that Butrans is a partial agonist & that Butrans' FPI states that use of supplemental opioids is acceptable. He said again that he wants to hear other physicians talk about it. I told him he would either have to come to the program or call the physicians he wants to speak to. Discussed OxyContin for appropriate patients. He said he has been starting new patients on it. Savings cards & managed care reminder.
PPLPMDL0020000001	Garfield Hts	OH	44125	10/17/2011	PROSPECT- I reminded Dr Sadowski of our lunch conversation where he told me he was going to prescribe Butrans & asked him if this was going to be the week when he identified an appropriate patient. He said he does want to use it & that he is old, so he forgets. I told him I came to see him early in the week so that my message would be fresh while he was seeing patients all week. Positioned Butrans for patients if around-the-clock tramadol is not controlling their pain. He said he will try to remember that. Spoke with Deena, asking her to assist Dr Sadowski in identifying appropriate patients for Butrans & she agreed.
PPLPMDL0020000001	Parma	OH	44129	10/17/2011	PROSPECT- Dr Taylor said she is not taking any new patients & wishes she didn't have to prescribe opioids at all. She said that she has been keeping Butrans in mind but she has not switched anyone's medication & has not seen any Butrans candidates. I asked if she felt comfortable with Butrans safety & efficacy. She said yes & that she has no problem with the medication at all, it is just that since she has cut back to one & a half office days per week, she just hasn't seen an appropriate patient. She said she will continue to keep it in mind going forward. Discussed OxyContin being covered on 92% lives nationally.
PPLPMDL0020000001	Parma	OH	44129	10/17/2011	Introduced myself & Purdue's products to Dr Moysenko. Delivered 5 Butrans core messages & alerted him to box warning. Reviewed appropriate patient type & asked if Butrans sounds like something he would use in his practice. He said it all depends on insurance. Discussed commercial insurance coverage. He asked if it would really stay on for a full week. I told him it is designed to stay on for seven days, although not every patient will have that success. Discussed importance of proper site preparation, application & rotation. I asked him how that all sounded & he said he thinks it sounds like something he might have a use for but that he would like to learn more about it over lunch. Handed him Initiations invite & let him know this would be a great way for him to get Butrans information online at his convenience. Also discussed OxyContin q12h as an option for patients beyond appropriate range for Butrans.
PPLPMDL0020000001	Beachwood	OH	44122	10/17/2011	Spoke with pharmacist, Shelley, & gave her updated Butrans FPI. She said she has not seen any movement of it at all & that she still has the partial box on her shelf from the initial prescription of a single patch. Reviewed appropriate patient type with her, focusing on patients who are taking chronic around-the-clock tramadol & are not well-controlled (ie calling too soon for refills). Shelley said the problem she sees is that people do not want to "give up their pills". Reminded her that supplemental analgesia can be taken with Butrans. She said also that most patients are on too high of a dose of opioids to be appropriate for Butrans. She said she just does not see patients switching to Butrans if they are used to taking oral medications for pain. Discussed appropriate patient selection. She said she did not need additional OxyContin savings cards.
PPLPMDL0020000001	Parma	OH	44129	10/17/2011	Spoke with Georgia & floater pharmacist & reviewed Butrans 5 core messages & appropriate patient type. The pharmacist said he had not filled any prescriptions for Butrans but has seen it stocked. Discussed pharmacists' webinars & interactive nature of the programs. Reviewed patient information booklet & let them know they can be given out to customers who they believe may benefit from Butrans, based on their patient type. Discussed savings cards for Butrans & OxyContin.
PPLPMDL0020000001	Lakewood	OH	44107	10/17/2011	I asked Dr what type of patient do you think would be a good Butrans patient. He said one that is rich. I reviewed the managed care and asked if he thought \$15 copay was reasonable. He said yes. I asked what type of patient would be good for Butrans if they have the right managed care. He said an opioid naive patient. I asked if he considers tramadol to be an opioid and he said no. He thinks that Butrans would be a good next step for a patient maxed out on tramadol. I asked what dose are they maxed out on and he said he does not like to go over 200mg per day. I asked if he would try Butrans for a patient who is taking 200mg of tramadol around the clock and he said he will. Reminder that OxyContin is still an option when Butrans may not provide adequate analgesia.
PPLPMDL0020000001	Lakewood	OH	44107	10/17/2011	Quick call, I asked Dr what's the downside to giving Butrans a try. He said he does want to try it, he just needs to think of Butrans when he sees the right patient. I reviewed the initiating guide and asked him again to try Butrans for a patient instead of increasing the dose of vicodin around the clock.
PPLPMDL0020000001	Lakewood	OH	44107	10/17/2011	Quick call at window, I showed the carton and demo and showed what the patients get if he were to prescribe Butrans. I asked his thoughts and he said he will think about it. He said he will review the invitation guide. I told him I'd follow up and get his thoughts.
PPLPMDL0020000001	Lakewood	OH	44107	10/17/2011	Quick call, I showed Dr what his patients will get when he prescribes Butrans. I reviewed the demo and carton. He said it looked good, and he has been getting good results. I reminded him to give the medication guide and savings cards. I reminded him that OxyContin is an option when Butrans may not provide adequate analgesia.
PPLPMDL0020000001	Lakewood	OH	44107	10/17/2011	I showed the demo and carton and showed what her patients get when she prescribes Butrans. I asked if she will continue to start new patients based on her experience. She said she would write it more if it was more affordable. I reviewed the savings cards and asked her to focus on commercial insurance. I reviewed OxyContin as an option with good managed care coverage.
PPLPMDL0020000001	Akron	OH	44333	10/17/2011	Opened the call by asking if his patients were happy with Butrans. He said some were and some were not. He said many don't want to take their pills. This led to a discussion on the use of short-acting opioids with Butrans as is described in our PI. The Dr. was unaware of this as he thought Butrans was an agonist-antagonist. We discussed this as well. The doctor wants to use this in the elderly. I reviewed the formulary coverage and asked him to focus on commercial insurance and Worker's Comp. He said he will continue to prescribe Butrans.
PPLPMDL0020000001	Lakewood	OH	44107	10/17/2011	Spoke with Meagan, I asked how often she consults with patients and she said he does sometimes. I asked if she would consult with Butrans patients to make sure they know about application and rotation, steady state and that other doses are available for titration. She said she would but has not seen many Butrans patients in general. We reviewed the savings program for Butrans and OxyContin.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	10/17/2011	I opened the call by asking her how her patients liked Butrans. She said some do and others don't, but mostly it is she forgets. I went over the correct opioids experienced patients discussing a patient on 3-4 hydrocodone/day and looking to increase their dose. She said she had a patient today that could have used it, but she forgot. She said she will use, but needs to be reminded.
PPLPMDL0020000001	Lakewood	OH	44107	10/17/2011	I asked Dr if he has started any patients on Butrans recently. He said no, he forgets. I asked since I just reminded him if he will start a new patient today. He said he will try. I told him I'd be back to follow up on Friday.
PPLPMDL0020000001	Lakewood	OH	44107	10/17/2011	I asked Dr where is he finding the most success with Butrans. He said he has been switching patients on vicodin or percoct. We reviewed tapering patients down and starting on the 10mcg. I asked if he has a patient coming in this week taking low dose vicodin or percoct who he feels might benefit from Butrans. He said that he would write it. I asked if he is still starting new patients on OxyContin and he said that he does have patients but mostly they are maintained. I asked if he would write OxyContin when Butrans may not provide adequate analgesia and he said he would.
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PPLPMDL0020000001	Lakewood	OH	44107	10/17/2011	Spoke with Aduwa, I asked how often she consults with patients. She said only if they have questions. I reviewed the medication guide and asked her to consult with new Butrans patients and she said she would. We reviewed the savings program for Butrans and OxyContin.
PPLPMDL0020000001	Richmond Heights	OH	44143	10/17/2011	Quick call....I reviewed the butrans indication and selling messages. I asked her if she has patients taking tramadol or some short acting ATC. she said maybe a few. She asked if butrans is covered on medicare. I told her not at the moment but is well covered commercially and affordable with a savings card. I explained the savings card and she said patients don't even want to pay \$20. Gave her a formulary grid and branded trial for opioid
PPLPMDL0020000001	Parma	OH	44129	10/18/2011	DABBLER- Quick window call. I handed back a Butrans dinner invitation & asked if Dr Chagin thought he could go. He said probably not to this one. Also asked him about Butrans feedback. He said he really hasn't heard much of anything but he had to run to see patients now. Spoke with Debbie (MA) & asked her if they need savings cards, but she said they do not.
PPLPMDL0020000001	Cleveland	OH	44114	10/18/2011	REPEAT-dr said she's not started anyone on Butrans in past week,asked dr if she's had any patients taking tramadol daily for 1 of the pain conditions shown,pg.11 visual aid,but not controlled and asking her for something else? dr said she didnt remember off the top of her head but probably yes,asked dr how Butrans could have been an option for them.dr said she's really only thinking of Butrans after patients are maxed on vicodin or percocet,thats when she's discussing Butrans.reminded dr of her comments that she would start patients on Butrans,after tramadol doesnt control patients pain,dr said she knows she just has to do it.we discussed initiation and titration of Butrans and focused dr on BWC and commercial plan patients,asked dr if she will start 1-2 patients this week,with 1 of the pain conditions on pg.11 visual aid,that are taking immediate release opioids but not controlled? dr said she will do her best.
PPLPMDL0020000001	Westlake	OH	44145	10/18/2011	I reviewed our last conversation about prescribing Butrans as an option instead of increasing the dose of low dose vicodin or percocet. He said he is trying to start more patients on Butrans and he will write it. Reminder that OxyContin is still an option for patients on higher doses of opioids and he will continue to write it.
PPLPMDL0020000001	Mayfield Heights	OH	44124	10/18/2011	Prospect. I asked doc how important clinical trials are to him when it comes to trying a product. He said he likes to see them. I set up the clinical study on opioid experienced patients. Discussed the objective, design, and results. He thought the 30% improvement was 'good'. He asked how the pain specialists are using butrans. I explained that they seem to be using it for newly referred patients from primary care and that butrans might best fit in primary care before going to pain mgmt. I asked him if he honestly would give butrans a try. He admitted that he has plenty of patients taking short acting opioids. He thinks butrans would be good for those that cant tolerate vicodin. He said he would try it. I asked him about attending the speaker program but he is committed to something else.
PPLPMDL0020000001	Parma	OH	44129	10/18/2011	Spoke with Fenja (pharmacist) & gave her updated Butrans FPI. Discussed appropriate patient type & range of patients, including those on short-acting who are calling too soon for refills or complaining that their pain is not being controlled around-the-clock. Also discussed ability to take supplemental analgesia if necessary, in the form of immediate release opioid or non-opioid medications. Reviewed OxyContin savings cards, but they did not
PPLPMDL0020000001	Brooklyn	OH	44130	10/18/2011	Spoke with Renee (pharmacist) who said that Butrans activity has not changed very much. I asked her if she could tell me if anyone locally was prescribing. She checked her system & said that Dr Tabbaa, Dr Hernandez, & Dr Chauhan (NinthHill) were the prescribers in her database for prescribing. She said it was mostly Dr Chauhan & gave me his address, suggesting I visit him. She said he is a PM&R physician. Reviewed appropriate patient type & patient information booklet. Also discussed savings cards.
PPLPMDL0020000001	Lyndhurst	OH	44124	10/18/2011	Dabbler. I asked doc if she has patients that are currently taking tramadol ATC that are looking for titration. She said sometimes but he problem is that those appropriate patients are often medicare and she is just not seeing enough patients that would fit the positioning and the insurance. I asked what she thinks of the product in general. She said she likes the idea of a patch but she tries to make chronic meds a last resort and then there are other products that are less expensive. I sympathized that cost is always a concern. I asked her to prescribe butrans for patients under 65 that have insurance through their work and that have failed on 300 or 400mg of tramadol. She said she is still trying. I asked her to prescribe low dose oxycontin for those medicare patients. She can't make the 10/20-speaker program.
PPLPMDL0020000001	Cleveland	OH	44109	10/18/2011	talked to dr about patients he's starting on Butrans,dr said he started a few patients that had Buckeye Insurance and Medicare and he was getting PA's for both,explained to dr and showed dr Butrans formulary grid that he should focus on BWC and commercial insurance,dr said 50% is medicalaid,25%BWC,15-20% are commercial plans,discussed Butrans patient savings cards,for commercial plan patients,showed dr Butrans visual aid,opioid experienced patients and asked dr to start a couple more patients this week on Butrans but focusing on BWC and commercial insurance,dr said he will do that,discussed Butrans patient info booklet and asked dr to show patients application/rotation of Butrans info,dr said he will do that.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44195	10/18/2011	worked anesthesia/pain management dept-left Butrans fpi,initiation guide,BUP301S clinical trial,patient info booklet,formulary grid and my business card for Dr.Cheng,Dr.Stanton-Hicks,Anne Crawford,Kathy Kraus,Dr.Mekhal,Dr.Mintzer and Dr.Vrooman as I couldnt see anyone today,just leave info at front desk
PPLPMDL0020000001	Brooklyn	OH	44144	10/18/2011	PROSPECT- Spoke with nurse, Nancy, & asked her to give Dr Deeb the Butrans program invitation for Thursday. Let her know he has not heard a formal presentation yet on Butrans & asked her to encourage him to attend because of this. She said she would give it to him & that he does go to dinners occasionally. Discussed appropriate range of patients for Butrans as well as savings cards for both Butrans & OxyContin. She said she did not think they needed any cards at this time.
PPLPMDL0020000001	Cleveland	OH	44130	10/18/2011	DABBLER- I showed Dr Diab Butrans efficacy data from BUP301S & asked what his thoughts were on 49% of patients on 20mcg reporting at least a 30% reduction in pain. He said he thought the results were "acceptable". OxyContin covered formal coverage message delivered before he walked into his next room.
PPLPMDL0020000001	Cleveland	OH	44112	10/18/2011	Quick call...I reminded doc that last week he expressed interest in attending the proram to learn more about butrans. I asked if he will make it. He said he is not sure but asked if I could remind him the day of. I reviewed the butrans 7 day delivery, CII status and the indication for mod to severe pain.
PPLPMDL0020000001	Westlake	OH	44145	10/18/2011	I asked the Dr where he is prescribing Butrans in his practice. He said that there is no specific patients type. He just will write it when he feels a 7 day patch is available. Dr said that he has had success with Butrans and one patient in particular had really great success. I asked if he would continue to prescribe based on his experience so far and he said he will. I reminded him that OxyContin is still an option. (Dr said that he has a patient who said the patch did not stick for the full 7 days. The Dr said that this patient seems to be sweaty every time he examines him. reported as AE)
PPLPMDL0020000001	Cleveland	OH	44113	10/18/2011	dr said he's still starting patients on Butrans,going good no complaints from patients and no issues with insurance,asked dr who are the patients he's starting on Butrans? dr said some patients are taking 20-25 mg Vicodin a day and others are taking 40mg vicodin a day,so he's starting them on Butrans,asked dr to continue starting those patients on Butrans,dr said he will,focused dr on BWC and commercial plans,asked dr if he could share with his 2 NP's,Caryn and Jen,at their next meeting,who is appropriate for Butrans and clarified with dr that both NP's have his approval to prescribe Butrans,dr said BOTH NP's have been given an email and verbal approval stating they can prescribe Butrans.dr said Butrans is a CII so both NP's can prescribe what they want,dr said they have a meeting tomorrow at lunch time so he'll address this with both NP's.
PPLPMDL0020000001	Independence	OH	44131	10/18/2011	DABBLER- Deb said she was running behind & did not have time to talk today. She added that she did not have any Butrans feedback for me at this time but hoped to have something soon. Handed her Initiations invitation & asked her to log on to the interactive case studies. She said she would take a look.
PPLPMDL0020000001	Cleveland Hts	OH	44118	10/18/2011	Prospect. I reviewed the butrans indication, dosing options, 7 day delivery and asked doc if he saw any benefits of a 7 day patch. He said he would like to read more about it. I gave him the BUP 301S trial for opioid experienced patients. I invited him to the 10/20 program and told him that Dr. Ganz expreeded interest in going if he goes. He said he will see. Gave formulary grid for butrans and oxycontin.
PPLPMDL0020000001	Parma	OH	44134	10/18/2011	LOYAL CUSTOMER- Dr Hernandez still reports good results with Butrans. I asked if he finds himself offering it to as many patients as he did upon launch. He said yes, other than the ones who he already has on it or those who tried it without success. He said he just gave it to a patient yesterday who had back pain from two failed lumbar surgeries. I asked what she had been on in the past. He said she was not taking any prescription medications for pain when she came to him. I told him she sounded like the ideal candidate. I asked if he noticed any correlation between success with Butrans & the medication the patient was taking prior to starting Butrans. He said not really. He said it is hard to predict & it doesn't seem to relate to any other factors. I asked him if OxyContin still had a place in his practice at all. He said sometimes, but not as much. He said that because he has always kept patients on lower doses of OxyContin, Butrans has taken over for many of those patients. He said he wants to avoid additive medications when at all possible. I asked if he would agree that all opioids carry abuse/addiction potential. He said maybe but he does not find that buprenorphine has that quality. I told him Butrans still does have abuse/addiction potential. He said that at the BWC meeting last week, they discussed not paying for OxyContin anymore. I asked why & he said because of cost. I asked if any other brands were mentioned but he said no.
PPLPMDL0020000001	Cleveland	OH	44106	10/18/2011	showed dr BUP301S,opioid experienced clinical trial,discussed study design and results,asked dr if the results were impressive? dr said yes, the 20mcg group.dr said he's really not thinking of Butrans for patients when they call into office for refills,he is only starting patients on Butrans if they complain of tramadol not controlling their pain.I asked dr how often does that happen? dr said a lot,asked dr to start those patients on Butrans,dr said he will do that if patients are willing to wear a patch,discussed initiation,titration of Butrans focused dr on Commercial plan insurance.dr said biggest challenge here at Main Campus is that he has majority of Medicaid patients,we discusse PA for Medicaid and Butrans.dr said ok,we discussed OxyContin being an option for patients that dont want to wear a patch and want pills and are ready to start a long-acting opioid,showed dr OxyContin conversion guide and discussed formulary coverage.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44114	10/18/2011	talked to dr about patients he's starting on Butrans,dr said he's talking to any patients currently taking percocet and when they ask for refills or say they want more pills he's telling them Butrans is their only option now,discussed initiation and titration of Butrans and focused dr on finding more patients like the one's he's started,dr agreed.I asked dr if he would consider any patients currently taking vicodin every day for their chronic pain but not controlled,to start on Butrans? dr said yes he would,focused dr on BWC and commercial plan patients,recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44107	10/18/2011	Spoke with Laurie, we reviewed the medication guide and important things to tell the patients when they first get Butrans. I asked if she would consult with a new patients and she does when they have questions or if she knows them as a long term patient. Reminder that OxyContin is still an option and we reviewed the OxyContin conversion guide.
PPLPMDL0020000001	Cleveland	OH	44111	10/18/2011	Spoke with John, we discussed the Butrans medication guide and important things to let the patients know. I asked how often he consults with patients for a new medication. He said he does when they have questions. I asked if he would consult with his new Butrans patients and he said he will. Reminder that OxyContin is an option when Butrans does not provide adequate analgesia.
PPLPMDL0020000001	Cleveland Hts	OH	44118	10/18/2011	Prospect.Quick call....doc said he has 2 or 3 patients he has prescribed butrans for and as far as he knows patients were able to get it. He said he wrote the 10mcg strength as the patients had already been on hydrocodone. I reminded him to taper down to 30mgbefore starting. Reminded him of the program. He said he would try but is usually finishing up in the office about 6:30. Oxycontin patient type reminder.
PPLPMDL0020000001	Mayfield Heights	OH	44124	10/18/2011	Spoke to Warren about the movement of butrans and oxyntin. He said he was initially see scripts for butrans and he thought it "was really gonna be something". Scripts have since died down. The only prescribers have been from Hillcrest Pain Mgmt (Dews, Laham, and Bizjak). I asked what feedback the customers have had. He said they were getting it refilled so assumed it was good. I explained the savings card program and discussed the application process. He said he is still has a steady flow of oxycontin and no longer gets questions about the old formulation.
PPLPMDL0020000001	Cleveland	OH	44143	10/18/2011	Dabbler. I asked doc what patients like about butrans. He didnt answer but said he started a patient last week. The patient was taking maximum doses of tramadol and he wrote a script for 5mcg. I told him that is exactly an ideal patient for butrans - after tramadol.He has not heard back yet. I explained that 5mcg may not be and adequate dose. I showed the initiation guide which shows that that patient should probably have been started on a 10mcg. Also explained that if he positions butrans after tramadol failures, then patients should start on 10mcg. I reminded him to focus on commercial patients and be sure to give a savings card.
PPLPMDL0020000001	Parma	OH	44129	10/18/2011	LOYAL CUSTOMER- I asked Dr Ortega if he has noticed in his patients on Butrans that there is any correlation between if they do well on Butrans & the opioid they were on prior to starting Butrans. Dr Ortega said he does not think he has a large enough sample size to really determine that. I asked him what makes him think of Butrans for a patient. He said he has liked giving it as an option because it is just that, another option. He said the patient's mindset must be right & the patient has to want to get better in order for them to do well on anything. Discussed patient counsel & appropriate range of patients. I asked him where OxyContin fits now that he is also using Butrans. He said Butrans has not changed the way he prescribes OxyContin & he views them as two completely different patient types.
PPLPMDL0020000001	Parma	OH	44129	10/18/2011	PROSPECT- I reminded Dr Roehny of our last conversation & asked him what his real hesitation is with Butrans if it is not really managed care. He said he doesn't think he has one & added that he did "write one or two" but couldn't remember for whom so he has not gotten any feedback. I told him he must have more than just one or two patients for whom Butrans would be appropriate. He said he doesn't like "all the restrictions". I asked him to clarify. He said he doesn't like that he has to remember that he can't write it for Medicaid or Medicare. I told him it didn't seem that he was having trouble remembering that & asked what other "restrictions" he meant. He said that was all. Let him know that OxyContin is covered on most plans.
PPLPMDL0020000001					

PPLPMDL0020000001	Mayfield Village	OH	44143	10/18/2011	Prospect. I reminded hcp of the previous interest she expressed in butrans and attending a speaker program. I reviewed the 7 day delivery and the CIII status. She took the invitation and said she will see.
PPLPMDL0020000001	Maple Heights	OH	44137	10/19/2011	PROSPECT- Dr Dale asked me to refresh his memory on Butrans. Delivered 5 core messages & spent time going over appropriate patient type/range & discussed OxyContin as an option for patients beyond the Butrans range. Presented initiation/titration guide & showed him pg 6. He said he would use it as a guide if he sees the right patient for Butrans.
PPLPMDL0020000001	Bedford	OH	44146	10/19/2011	Spoke with Ed & gave him updated Butrans FPI. Also reminded him of appropriate patient type, focusing on patients who call too soon for refills of their short-acting because it is not controlling their pain adequately. He said he has not filled any Butrans prescriptions himself but has seen it on their shelf. Discussed OxyContin 7 tablet strengths & savings cards.
PPLPMDL0020000001	Warrensville Heights	OH	44122	10/19/2011	Spoke with nurse, Eileen Sell, & discussed Butrans savings cards, including eligibility. Also discussed appropriate patient type for Butrans. Asked her to give Dr Garwood the BUP3024 study, but she said that she has plenty of Butrans information right now & has reviewed it all with the residents & Dr Garwood. She also said they are now only scheduling one lunch per quarter per rep & that I will have to wait to book one in January.
PPLPMDL0020000001	BEDFORD	OH	44146	10/19/2011	Spoke with technician as there was not a pharmacist available. Gave her an updated Butrans FPI & asked her to give it to the pharmacists. She agreed. Also reviewed Butrans 5 core messages with her & discussed appropriate patient type/range. Discussed OxyContin savings cards- they did not need any.
PPLPMDL0020000001	Bedford	OH	44146	10/19/2011	DABBLER- Spoke with MA Roberta & reviewed Butrans appropriate patient type & savings cards for both Butrans & OxyContin. She said she does not know if Dr Haddad has prescribed Butrans lately & doesn't always see the prescriptions when patients leave. Gave her patient information guide & discussed Butrans usage.
PPLPMDL0020000001	Cleveland	OH	44109	10/19/2011	talked to dr about 5 Butrans core selling messages,dr said he's not prescribed Butrans as he hasn't remembered it.we talked about Appropriate patients for Butrans,showed visual aid and BUP3015,dr said the results were impressive and he would think about patients he has that might be willing to wear a patch.we talked about initiation of Butrans and titration,gave dr Butrans patient info booklet and discussed application/rotation of Butrans,asked dr to start a couple patients this week,with commercial plan insurance,that are taking immediate release opioids daily but not controlled,dr said he will consider that.we discussed OxyContin as an option for patients if they dont want to wear a patch and try Butrans,dr has option of OxyContin,dr said he will keep that in mind.asked dr to continue prescribing OxyContin for appropriate patients,dr said he will do that.recommended talked to dr about appropriate patients for Butrans,showed visual aid,dr said he's really only been starting his percoet patients on Butrans when they arent controlled on percoet.I told dr that was great but did he have a couple patients taking vicodin daily for their chronic pain that arent controlled where he could start them on Butrans? dr said probably so he'll have to look and see who's coming in today.discussed initiation and titration of Butrans and focused dr on Commercial plan insurance.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44106	10/19/2011	PROSPECT-talked to dr about pain conditions,pg.11 visual aid,and how Butrans could be an option for patients,dr said he's got some patients in mind and will consider Butrans.showed opioid experienced,appropriate patients,section visual aid,discussed initiation and titration of Butrans and dr asked about insurance coverage for Medicaid patients.talked to dr about PA for Medicaid patients but asked dr to focus on commercial plan patients.dr said ok he will do that.discussed OxyContin as an option for patients,showed conversion guide and discussed some conversions to OxyContin and asked dr to think of a few patients this week that are appropriate for OxyContin,dr said ok.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44114	10/19/2011	talked to Laura,Pharmacist,about Butrans 5 core selling messages,Laura said she's not gotten any scripts for Butrans and she wont order until that 1st script comes in.asked Laura what features stood out to her,looking at 5 core selling messages? Laura said 7 day dosing and transdermal delivery.showed Laura appropriate patients sections in Butrans visual aid and asked Laura to continue giving Butrans patient info booklets to patients taking immediate release opioids but not controlled.Laura said she will do that.we talked about OxyContin stocking and asked Laura if she's seeing new Rx for OxyContin or refills,Laura said mainly refills.gave OxyContin conversion guide and talked about appropriate patients for OxyContin.recommended Senokot-S
PPLPMDL0020000001	Maple Heights	OH	44137	10/19/2011	Spoke with technician Dawn & gave her updated Butrans FPI. Reviewed changes & discussed appropriate patient type, including patients calling too soon for refills of short-acting opioids because they are not lasting long enough to control their pain. Dawn said that does happen. Discussed savings cards for Butrans as well as OxyContin & reminded her that they can only be used for cash-pay patients on those with commercial insurance. She said she would give Jim the information.
PPLPMDL0020000001	Cleveland	OH	44106	10/19/2011	REPEAT-talked to dr about his patients that he's started on Butrans,dr said he knows who the right patient is, low doses of immediate release opioids not high doses of opioids,dr said his patients seem to be doing well on Butrans no complaints from them.asked dr to focus his discussions with patients on application/rotation and give them Butrans patient info booklet to educate patients,dr said he does give them out and will continue doing that.focused dr on commercial plan insurance.<font color=blue><b>CHUDAKOB's query on 10/27/2011</b></font>If his patients are doing well, and he knows who the right patient is, then what is preventing him from starting more patients. Asking this question may uncover the reason he has not started more patients.<font color=green><b>BROOKAM's response on 10/31/2011</b></font>I agree but in his mind and from what he's told me, he believes he's starting as many "appropriate" patients in his practice that he can. I dont know, I will re-address this question again.<font color=blue><b>CHUDAKOB added notes on 10/31/2011</b></font>What does he think is the appropriate patient? he may have misunderstandings about this.
PPLPMDL0020000001	Cleveland	OH	44104	10/19/2011	talked to dr about appropriate patients to start on Butrans,showed visual aid,dr said he's really only been thinking of patients taking high doses of opioids and not controlled,to start on Butrans,dr said he'll think of patients on low doses of immediate release opioids who arent controlled and talk to them about Butrans,asked dr to think of 2 patients taking percoet daily but not controlled with 1 of the pain conditions,pg.11 visual aid,and start them on Butrans? told dr he can give patients Butrans patient info booklets to assist in educating patients on Butrans,dr said ok.focused dr on commercial plan patients and showed formulary grid.recommended Senokot-S
PPLPMDL0020000001	Bedford Heights	OH	44146	10/19/2011	Spoke with Peggy (MA) & introduced Purdue's products. Reviewed Butrans core messages & discussed CIII/abuse/addiction potential. She said that he does not generally prescribe a lot of opioids, but he does have patients on them. Reviewed appropriate patient type & importance of appropriate patient selection for opioids. I gave her a Butrans FPI & initiation guide & asked her to give it to Dr Patil & she agreed.
PPLPMDL0020000001	University Heights	OH	44121	10/19/2011	I asked doc if he see's any benefit to butrans that might be good for his patient population. He said patients dont want a patch, they want pills. I told him that they don't have to completely give up all tablets. I showed him the enlarged FPI and that supplemental analgesics can be used while on butrans. He said it is still too expensive. I told him that for commercially insured patients with a savings card, they can get butrans for as low as \$15/mo. Reminded him that butrans is also covered on BWC like oxycontin. Nothing more learned.
PPLPMDL0020000001	Cleveland	OH	44104	10/19/2011	talked to dr about Butrans being an option for patients he see's in practice,showed visual aid,dr said biggest challenge here is that he has majority of medicare patients that he treats and Butrans isnt covered on medicare plans.i asked dr if he had any commercial plans? dr said a small%,asked dr to start a couple patients with commercial plan insurance and taking immediate release opioids daily but not controlled,dr said he will do that.we talked about OxyContin being an option for patients who are appropriate for OxyContin,showed conversion guide and asked dr to continue starting patients on OxyContin,dr said he will do that.recommended Senokot-S
PPLPMDL0020000001	Maple Heights	OH	44137	10/19/2011	PROSPECT- Dr Gene said he is going to the AOA conference in Orlando & saw that there will be a presentation there on Butrans. He asked me to refresh his memory & said he remembers it is a once-weekly patch of buprenorphine. Spent time going over the appropriate range of patients & discussed OxyContin for patients beyond that range. Went through page 6 of initiation/titration guide & talked about patients who are taking either NSAID's/COX-2's or tramadol chronically who are looking for a different medication for their moderate to severe chronic pain. He said, "So this wouldn't be for someone who is already on fentanyl or who I am going to start on fentanyl?" I pointed out that fentanyl patients were excluded from studies for Butrans. Discussed Butrans as a CIII opioid with abuse & addiction potential. Showed him demo kit & demonstrated how the patches should be disposed of. Also discussed application & rotation. He said he is ready to prescribe Butrans & feels comfortable with it now.
PPLPMDL0020000001	Cleveland	OH	44109	10/19/2011	talked to dr about 5 Butrans core selling messages,dr talked about Butrans being a patch and dosed once a week.showed dr BUP3015,opioid experienced patients and asked if dr had patients with some of the listed pain conditions taking immediate release opioids daily but not controlled? dr said yes she does.told dr those are the patients to start on Butrans,discussed initiation and titration of Butrans.asked dr if she will start a couple patients today and this week on Butrans? dr said she will if patients are appropriate and willing to wear a patch.dr asked about insurance coverage for Medicaid patients as thats large population here.we discussed PA requirements for Butrans.recommended Senokot-S<font color=blue><b>CHUDAKOB's query on 10/27/2011</b></font>Just wondering if you asked her why the patients would not want to wear a patch? I am guessing this is her perceived drawback.<font color=green><b>BROOKAM's response on 10/31/2011</b></font>I will follow up with her next time I see her on that but unfortunately that wont be until nov.9th at my next lunch. thanks<font color=blue><b>CHUDAKOB added notes on 10/31/2011</b></font>Ok. Thanks!
PPLPMDL0020000001	Cleveland	OH	44106	10/19/2011	dr said she's not started anyone on Butrans but has read the Butrans fpi and initiation guide that i left.dr said she's been so busy rotating at all 3 UH sites that she's not really thought much about Butrans.showed dr 5 Butrans core selling messages and asked what stood out to her? Dr said transdermal delivery and 7 day dosing.asked dr if she had patients with 1 of the pain conditions,pg.11 visual aid,taking immediate release opioids daily but perhaps not controlled? dr said probably so,she does hear that from patients and patients want something else.asked dr if she could start a few patients like that on Butrans? dr said she'll consider it but doesnt have many patients on opioids.dr asked about Medicaid insurance as thats the biggest population here at Main Campus.talked to dr about PA requirements for Butrans and asked dr to focus on commercial plan patients for Butrans,dr said ok.showed dr Butrans initiation and titration sections,in visual aid and gave Butrans patient info booklet asked dr to focus patient discussions on application/rotation and side effects of Butrans,dr said ok she will do that.
PPLPMDL0020000001	University Hts	OH	44118	10/19/2011	Prosepect. I reviewed the butrans positionning - before going to hydrocodone ATC - and its 7 day delivery. I asked him if he has any patients that are taking 2 or 3 tablets of vicodin or tramadol and not getting adequate analgesia. He said maybe. I asked him to try just one of those patient on butrans. I showed and explained the starting dose base on their current therapy. No commitment. Provided formulary grid for oxycontin and butrans. Invite to the 10/20 speaker program.
PPLPMDL0020000001	Cleveland	OH	44109	10/19/2011	PROSPECT-dr said he's not started anyone on Butrans and hasn't really thought of Butrans.i showed dr Butrans visual aid,pg.11 and discussed pain conditions and dr said he see's all of them and more.asked dr if there were any therapies he would like to replace? dr said he doesn't like prescribing narcotics but has to treat pain so the short-acting opioids work for awhile with physical therapy,injections,etc and when all short-acting opioids fail then he'll consider a long-acting opioid. asked dr to consider Butrans as an option for opioid experienced patients,showed visual aid and discussed BUP 3015,dr said he'll think about it as he probably has a few patients that he could start on Butrans.dr asked about Medicaid coverage for Butrans,we discussed PA requirements and i focused dr on commercial plan patients to start on Butrans.we talked about OxyContin being an option for those patients who are ready for a long-acting opioid yet not willing to wear a patch,showed OxyContin conversion guide and discussed insurance coverage for OxyContin.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44106	10/19/2011	discussed 5 Core selling messages with dr,dr said he doesn't really prescribe much narcotics and hasn't started anyone on Butrans.showed dr Butrans visual aid,asked him what features of Butrans stood out to him? dr said he likes that Butrans is transdermal and 7 day dosing but again his patients arent on a lot of narcotics so he's not sure if he has anyone in mind to start on Butrans.dr said he'll take info and think about,gave dr Butrans initiation guide,fpi,patient info booklet and discussed insurance coverage with dr focusing dr on commercial plan insurance.
PPLPMDL0020000001	Euclid	OH	44119	10/19/2011	Prospect. I asked doc what he remembers about butrans. He remembered its once a week. Affirmed that response. I asked him where is he likely to use it. He just looked and me and responded, "for Pain". I reviewed the indication and the positioning. I asked him to try one patient on 10mg of butrans after they have failed on 300mg of tramadol. He recited the dosing and the positioning. I invited him to the speaker program to learn more about butrans. He said he will see.
PPLPMDL0020000001	Bedford	OH	44146	10/19/2011	REPEAT CUSTOMER- I asked Dr Moufawad to tell me about his speaker training. He said that he learned a lot. He said he learned that he can prescribe Percocet with Butrans without worry. He also explained Butrans as a partial agonist to me in the way he was taught. He said prior to training he just did not understand how Butrans was different from Suboxone but now he understands. I asked if he felt more comfortable with Butrans now & he said he feels much more comfortable. He added that he has not prescribed it since his return but that he is excited to start trying it on more patients.
PPLPMDL0020000001	Cleveland	OH	44103	10/20/2011	asked dr about patients she's started on Butrans,how they were doing? dr said great,patients having success with Butrans.dr said these are patients taking percoet that arent controlled.showed dr Butrans initiation guide,appropriate patients and discussed refills of Butrans.dr said that was important she could write refills of Butrans,told dr she can write refills because Butrans is a CIII.discussed insurance with dr and dr said she has 1 patient coming in tomorrow that's taking percoet so she'll talk to this patient about Butrans.
PPLPMDL0020000001					



	Hudson	OH	44236	10/20/2011	PROSPECT- I asked Dr Tosino what was really holding him back from trying Butrans. He asked who was using it. I told him physicians of various specialties, including primary care, are having success with their patients on Butrans, although it is not for everyone. Spent time going over appropriate patient type, focusing on patients who have a chronically painful condition & are not well-controlled on 3-4 tramadol per day. I asked if it was fair to ask him to try that type of patient & he said yes. He said he does want to start using it. I told him the first prescription is the hardest one to write & asked him to identify a few patients in his mind who may be good candidates & switch them to Butrans to get his own clinical practice to see if he finds Butrans to be a viable option for these patients. He agreed. I asked him about his experience with OxyContin. He said he does write some. Discussed 7 tablet strengths, including 15mg. He said that was good to know. He asked about insurance coverage. Let him know it is covered on 92% of lives nationally & discussed savings cards.
PPLPMDL0020000001	Cleveland	OH	44103	10/20/2011	talked to Abdul,Pharmacist,about Butrans scripts,no Rx yet,we talked about appropriate patients for Butrans and insurance coverage.asked Abdul if he's seeing OxyContin Rx still? Abdul said yes.Abdul said he thinks Butrans would be better for patients as its a patch and less abusable than taking pills.told Abdul Butrans has potential for abuse like any other opioid.Abdul said he knows that.
	Hudson	OH	44236	10/20/2011	Spoke with Beth, pharmacist, & gave her updated Butrans FPI. She said she has not filled any prescriptions for it. Reviewed appropriate patient type, focusing on patients who are not well-controlled on tramadol chronically around-the-clock. She said that made sense. She asked if I called on Dr MacCallum. I told her there is no access there. She said he has a patient that she was thinking would be a good candidate for Butrans. I asked if she would give the patient an information booklet to take to him so he could ask Dr MacCallum about it. She said she doesn't think doctors like when patients take in information asking about a product. However, she did say she would mention it directly to Dr MacCallum when she speaks with him next. Discussed OxyContin savings cards.
PPLPMDL0020000001	Cleveland	OH	44109	10/20/2011	dr said he signed PA for Caresource patient to get Butrans he's not sure if it was approved,asked dr what made him decide to start patient on Butrans? dr said patient was already on Butrans,patient of Dr.Carson he just signed the approval for patient to get PA,asked dr if he had 20 patients taking a pain medication and half of them came back saying their pain was at a 7 versus a 10,would that be clinically significant? dr said yes but its not that simple to take patients off 1 medication and start them on another due to patient resistance.told dr to focus on BWC and commercial plan patients.
PPLPMDL0020000001	Cleveland	OH	44113	10/20/2011	talked to dr about his comment that since he attended Butrans dinner program in Aug.2011,he said his comfort level increased with Butrans and he had started 1 patient,asked dr if he still felt that way? dr said yes.I asked dr what types of patients came 2 mind? dr said he has 1 patient in exam room that cant take vicodin because it upsets her stomach and she's been taking percocet but he's not willing to give her percocet again so he'll talk to her about Butrans.told dr to give Butrans patient savings card and booklet to patient.
	Hudson	OH	44236	10/20/2011	Spoke with pharmacist Angela & gave her updated Butrans FPI. I asked her what strengths they stock & she checked her stock & said they had the 10 & 20mcg. Went over appropriate range of patients & Butrans patient type, focusing on those who are taking chronic tramadol around-the-clock & are not well-controlled. She said it makes sense to use Butrans there. Discussed automatic savings via e-voucher & OxyContin savings cards, which she said they did not have any of. Gave her one pack of cards.
PPLPMDL0020000001	Mayfield Heights	OH	44124	10/20/2011	Window call....I asked doc how patients are doing on Butrans. She said most patients are responding well to it, she just has to be sure to prescribe to patients with the right coverage. Gave her a formulary grid. I gave her an invite to tonight's program. She said she didnt think she could make it.
PPLPMDL0020000001	Cleveland	OH	44102	10/20/2011	talked to Nagla,PA,about BUP3015,opioid experienced clinical trial,asked if 30%reduction in pain was clinically significant? Nagla said yes it was.I asked Nagla if I could place Butrans patient savings cards in exam rooms,to focus her and doctors on commercial plan patients,Nagla said yes in 4 exam rooms I could do that.
PPLPMDL0020000001	Cleveland Hts	OH	44118	10/20/2011	Quick follow up call.... I reminded doc of the Butrans program this evening and asked if he will still be attending. He said he is trying. Nothing more learned.
PPLPMDL0020000001	Westlake	OH	44145	10/20/2011	Quick call. I showed the demo and carton and showed what the patients get in the pharmacy when they are prescribed Butrans. He said that he has patients that are doing great on Butrans.
PPLPMDL0020000001	Berea	OH	44017	10/20/2011	Quick call, I asked Dr if he has a chance to start Butrans for a patient on tramadol around the clock. He said that he has tried it, I asked him to tell me how the patient is doing but he did not have time today.
PPLPMDL0020000001	Beachwood	OH	44122	10/20/2011	PROSPECT- Spoke with nurse Ted & reviewed initiation guide with him, discussing appropriate Butrans patient type. Ted said Dr Malkamaki certainly has some patients who fit the profile. Also told him about "Initiations" program & asked him to give Dr Malkamaki an invitation along with initiation guide to serve as a reminder & he agreed.
PPLPMDL0020000001	Independence	OH	44131	10/20/2011	PROSPECT- Dr Reddy said he could not stay for lunch. Positioned Butrans for patients who have a chronic condition that causes pain who are not well-controlled on tramadol around-the-clock. Also handed him a managed care grid & let him know that commercial insurance coverage is favorable.
PPLPMDL0020000001	Independence	OH	44131	10/20/2011	PROSPECT- Handed Dr Jack a Butrans patient information booklet. He said he could not stop today. I asked him to have a look at it & positioned Butrans for patients not well-controlled on tramadol or low-dose Vicodin around-the-clock. He said he just needs to think of it at the right time & then walked away.
PPLPMDL0020000001	Cleveland	OH	44113	10/20/2011	dr's MA,Deb, tried to get Butrans from her dr, dr nemr, and UH required a PA for Butrans.told dr that we talked about his patients with osteoarthritis and back pain in last call and dr said he starts patients on tramadol then goes to hydrocodone,told dr Butrans is an option right after tramadol instead of hydrocodone and he can expect similar results to the BUP3015,opioid experienced clinical trial,showed graph and asked dr if a 30%reduction in pain was clinically significant? dr said yes,asked dr if it was clinically significant enough for him to prescribe Butrans? dr said yes,focused dr on commercial plan patients.
PPLPMDL0020000001	Independence	OH	44131	10/20/2011	PROSPECT- Dr Pal said he hopes Butrans is covered by Medicaid because he prescribed it for a CareSource patient. I asked him to tell me about the patient. He said the patient was not well-controlled on Vicodin so he switched him to Butrans. I told him this sounded like a good patient to try, although managed care could become an issue. Dr Pal said he prescribed it a few days ago & has not heard anything from anyone about it not being covered so far, but he added that he has over 150 faxes to go through so it is possible there is a prior authorization in there. He said he also has a patient in his waiting room who has chronic back pain who is not being well-controlled on tramadol who he would consider a Butrans candidate. He said she wants to be put on Percocet but he does not want to go that route at this time, so he would like to put her on Butrans. He asked me if Cigna would cover it. Went through Butrans formulary grid & gave him patient information guide for the patient. He said he will try Butrans on that patient. I asked if he would also look for others & he agreed. Showed OxyContin doc asked about the skin reaction for patients on butrans. I showed him the AE page of the sales aid and the that the incidence is about 9% in clinical trial. He asked if a spray can be used before hand to minimize side effects. I told him there is no recommended remedy for that and we did not study the use of any. He said he wants to prescribe butrans but he does not know where to use it. I described the patient that may be on hydrocodone 5/325 4-6 tabs/day. Instead of titrating that patient, try that patient on butrans. Showed him the initiation guide. He said he will try it. I asked doc how oxycontin patients are doing on the product. He said the still want to be switched because they like to old formulation better. He said he still has some patients that have not complained about it though.
PPLPMDL0020000001	Cleveland	OH	44124	10/20/2011	Quick call...I asked doc if he would like to hear more about a 7 day, CII analgesic by attending a speaker program to learn about butrans. He looked at the invite and said he cant make it. He did ask about oxycontin and if we still have savings cards. Provided same.
PPLPMDL0020000001	Cleveland	OH	44112	10/20/2011	Quick call...I reminded doc that he expressed interest in attending a butrans speaker program. He remembered that the venue was Flemings. He said he has a meeting this evening and probably wont make it. I gave him a BUP 3015 reprint and asked him to try butrans instead of going to vicodin ATC.
PPLPMDL0020000001	Cleveland	OH	44113	10/20/2011	talked to Shannon,Pharmacy Tech,about Caresource and asked her to help me determine if Caresource is covering Butrans.Shannon ran a script through and it was approved.asked Shannon if she would be willing to give Butrans patient info booklets to patients,to speak with their doctors about Butrans,Shannon agreed to do this.talked to Maria,Pharmacy Tech,about OxyContin scripts and asked Maria if they are seeing new scripts or same patients every month? Maria said they are counting a lot of Opana ER and seeing more new Rx for OpanaER.
PPLPMDL0020000001	Highland Heights	OH	44143	10/20/2011	Repeat. I asked doc if patients were happy with Butrans. He said He is writing it, has no complaints, and suspects that he is the #1 prescriber of butrans. He said he jsut wishes for medicare coverage and he would prescribe it more. I thanked him for the support. I reminded him of the potential savings with the savings cards. Also reminded him of the low dose oxycontin for patients who may need more than Butrans. Invited him to tonights program but he won't make it.
PPLPMDL0020000001	Hudson	OH	44236	10/20/2011	PROSPECT- I asked Dr Seiple what he thought was really holding him back from trying Butrans again. He said it is a matter of getting a patient to agree to the switch. He went on to say that he offers it to patients who he wants to get off of short-acting oral opioids, for example someone on 4 Percocet per day, & they just do not want to "give up their pills". Discussed ability to use supplemental analgesia while on Butrans. He said he has tried telling them that but it has not worked. He said he actually did get a patient to agree to it but the patient did not fill the prescription. I asked him if he would instead try offering it to patients who are not well-controlled on tramadol 3-4 times per day. I asked if he would use it there instead of going to Vicodin or Percocet. He said he would do this. He said he does try to refer all his chronic pain patients to pain management because he does not like dealing with this type of patient. Discussed OxyContin as an option for patients beyond range of Butrans. I asked Dr Seiple if he would offer Butrans to the type of patient we spoke about today & he said yes.
PPLPMDL0020000001	Mayfield Heights	OH	44124	10/20/2011	Spoke to Albina about the butrans indication and selling messages. She was not familiar with the product as she has not seen any scripts. I explained where it is being positioned. She asked how much butrans cost for patients. I explained the commercial coverage but not with medicare/medicaid yet. I also informed her about the savings with the relay health program.
PPLPMDL0020000001	Cleveland	OH	44113	10/21/2011	showed dr BUP3015 opioid experienced clinical trial,discussed results and asked dr if this data was clinically significant? dr said yes,asked dr if this data was clinically significant enough for him to start a couple patients? dr said yes,dr asked about insurance coverage for medicaid patients,focused dr on commercial patients but discussed PA requirements for Medicaid,discussed with dr Butrans initiation dosage strengths,titration and side effects and asked dr to start a couple patients today and next week on Butrans,dr said he will talk to a few patients and see what patients say about Butrans.recommended Senokot-5
PPLPMDL0020000001	Lakewood	OH	44107	10/21/2011	I reviewed the key messages of Butrans. I asked about her prescribing. She said she writes scripts but Dr. Khuri signs off on them. We discussed appropriate patients for Butrans and when they may need to go to OxyContin.
PPLPMDL0020000001	Northfield	OH	44067	10/21/2011	We reviewed the managed care and savings cards and I asked if she will recommend it. She agreed and took the FPI to read more about Butrans.
PPLPMDL0020000001	Cleveland	OH	44109	10/21/2011	Spoke with technician as no pharmacists were available. Gave her updated Butrans FPI & reviewed 5 core messages with her. She said it sounded like an interesting medication. Reviewed appropriate patient type & discussed automatic savings via e-voucher. Also discussed OxyContin savings cards but she said they had enough of them for now.<font color=blue><b>CHUDAKOB's query on 10/27/2011</b></font>What does a tech do at CVS relating to medications? What about relating to pain medications?<font color=green><b>APSEGAS's response on 10/28/2011</b></font>I don't know the answer to that question. That is something I could be asking the techs when pharmacists are unavailable. Thanks for the suggestion.<font color=blue><b>CHUDAKOB added notes on 10/31/2011</b></font>Good thinking! Let me know how it works out!
PPLPMDL0020000001	Cleveland	OH	44130	10/21/2011	talked to dr about appropriate patients,showed dr BUP3015 opioid experienced patients,asked dr if he had patients taking immediate release opioids that werent controlled? dr said at this point no,his patients with chronic pain are controlled on immediate release opioids but he'll keep Butrans in mind as an option for patients if they complain.asked dr to think of 1 patient today or next week that isnt controlled on immediate release opioids that could be appropriate for Butrans,dr said he will do that,we discussed initiation and titration of Butrans and formulary coverage.
PPLPMDL0020000001	Cleveland	OH	44130	10/21/2011	Spoke with Tom Whitmer (pharmacist) who was not familiar with Butrans. Gave him updated FPI & reviewed 5 core messages. Discussed dosage & titration up to a maximum 20mcg. Also discussed steady state after 72 hours. Spent time going over appropriate patient type, focusing on those who call too soon for refills of short-acting around-the-clock opioids such as tramadol or Vicodin. Also discussed CII & abuse/addiction potential. Tom said he thought Butrans sounded like a good option to have for those patients. Also discussed OxyContin q12h dosing. He said he often gets prescriptions for TID dosing & struggles with whether or not to fill those prescriptions because he knows that is not how it is intended to be taken. I agreed that OxyContin is approved only for q12h dosing & discussed 7 available tablet strengths. Asked him to recommend increasing the tablet strength instead of the dosing interval. He agreed.
PPLPMDL0020000001	Cleveland	OH	44102	10/21/2011	talked to Amol,Pharmacist,about Butrans 5 Core selling messages and Amol said he's not seen any Rx for Butrans,asked Amol what features of Butrans stood out to him? Amol said 7 day dosing and transdermal delivery,showed Amol Butrans patient info booklet and asked him to give patients the booklet to discuss with their doctors,if patients are taking immediate release opioids but not controlled,Amol said he will do that but asked about Medicaid coverage as thats majority of their patients,discussed PA requirements for Butrans for Medicaid patients,focused Amol on commercial plans and BWC,discussed appropriate patients for OxyContin,gave OxyContin conversion guide and discussed formulary coverage with Amol,recommended Senokot-5

PPLPMDL0020000001	Cleveland	OH	44130	10/21/2011	DABBLER- Dr Kansal told me again about the patient for whom Butrans did not work. I reminded him that that patient might not have been ideal considering the opioids he had been on prior to being switched to Butrans. Dr Kansal agreed that he was probably not the ideal patient. Reinforced appropriate patient type messaging with initiation guide, showing page 6 with appropriate range of patients, including discussion of OxyContin for appropriate patients beyond Butrans 20mcg. Showed Dr Kansal Butrans formulary grid & asked him to keep commercially insured appropriate patients in mind. Also reminded Dr Kansal of favorable OxyContin managed care.
PPLPMDL0020000001	Woodmere	OH	44122	10/21/2011	Spoke with Stephanie, technician, & gave her an updated FPI for Butrans. She said they stock it but do not dispense it very often. Discussed changes/updates with her. Also reminded her of Butrans dosing/delivery system & reviewed e-voucher program with automatic savings. Reviewed OxyContin savings cards & 7 available tablet strengths. She said they did not need savings cards.
PPLPMDL0020000001	Cleveland	OH	44111	10/21/2011	Quick call with Steve, he said that he thinks they do have one patient on Butrans. He did not remember which Dr wrote. I asked if he would hand out the medication guide with Butrans scripts and he agreed. We discussed the savings program for both Butrans and OxyContin.
PPLPMDL0020000001	South Euclid	OH	44121	10/21/2011	Spoke with Janiel, tech about the stocking and movement of butrans. She confirmed that they have it but she has not seen any and didnt know what butrans was. I explained the 7 day patch for pain and the CIII status which can be called in or refilled similar to vicodin. Provided patient info guide and formulary grid for pharmacist.
PPLPMDL0020000001	Parma	OH	44129	10/21/2011	DABBLER- Dr Gigliotti said he has not had any additional Butrans patients since we last spoke. I asked him why he thinks that is. He said people don't want to take it because they want their pills. Reminded him that the patients can take supplemental analgesia during Butrans therapy. He said he knows. I asked if he plans to continue to offer Butrans to patients who are appropriate & he said he will. Discussed broad access for OxyContin with managed care. Also spoke with Jaz & reviewed formulary grids for Butrans & OxyContin with her. <font color=blue><b>CHUDAKOB added notes on 10/27/2011</b></font>Very good next call objective Ashleigh!
PPLPMDL0020000001	Cleveland	OH	44111	10/21/2011	Quick call at window, I asked Dr what his hesitation is in prescribing Butrans, he said he just has to remember to try it when he has a patient on lower doses of opioids. I reviewed the invitation guide and asked if he would try it on a patient who is taking low dose hydrocodone. He agreed.<font color=blue><b>CHUDAKOB's query on 10/27/2011</b></font>"I reviewed the invitation guide" What is an invitation guide?<font color=green><b>HOLUBA's response on 10/31/2011</b></font>spell check changed this- "initiation guide" thanks!<font color=blue><b>CHUDAKOB added notes on 10/31/2011</b></font>Thank you!
PPLPMDL0020000001	Lakewood	OH	44107	10/21/2011	I asked Dr how he would feel if 10 out of 10 patients on Butrans came back to tell him they got 30% reduction in pain or more. He said that he thought that it would be significant. I reviewed the opioid experienced clinical trial. He said he's only tried Butrans for 1 or 2 patients so far and he never heard back from them. I asked if he would give Butrans a fair trial and start patients like the ones in the clinical trial inclusion criteria. He agreed. Reminder that OxyContin is still a long acting option. We reviewed the savings cards for Butrans and OxyContin.<font color=blue><b>CHUDAKOB's query on 10/27/2011</b></font>"I asked Dr how he would feel if 10 out of 10 patients on Butrans came back to tell him they got 30% reduction in pain..." If 10/10 patients got a 30% reduction in pain that would be phenomenal. Is that what our clinical trials say?<font color=green><b>HOLUBA's response on 10/31/2011</b></font>What I actually said was 10 out of 20 patients! Sorry about the typo, I wish that was what the data said.<font color=blue><b>CHUDAKOB added notes on 10/31/2011</b></font>OK.
PPLPMDL0020000001	Mayfield Hts	OH	44124	10/21/2011	Thanks for the clarification. Please re-read your call notes before submitting them.
PPLPMDL0020000001	Westlake	OH	44145	10/21/2011	Quick call....I asked doc if butrans is a product that he would likely prescribe in his practice. He said he just can't remember and asked if its comparable to fentanyl. I told him no head to head data and I asked him to prescribe butrans instead of going to vicodin ATC.
PPLPMDL0020000001	Sagamore Hills	OH	44067	10/21/2011	Quick call, I asked if he had started any new patients on Butrans this past week. He said that he did start one. I asked more about the patient and he said she was on hydrocodone and he continued some of the hydrocodone for supplemental analgesia. I asked if he has more patients he thinks can benefit from Butrans and he said he will try to start more new patients.
PPLPMDL0020000001	Cleveland	OH	44113	10/21/2011	PROSPECT- Quick call as I caught Dr Mike at the window. Positioned Butrans for patients taking chronic around-the-clock tramadol who are not well-controlled. He said he would keep it in mind. Spoke with Binka & reviewed Butrans & OxyContin savings cards with her. She asked me to leave a package of each. Also left Butrans patient information booklets.
PPLPMDL0020000001	Lyndhurst	OH	44124	10/21/2011	Dr said she's not had any patients that were willing to wear a patch so she's not prescribed Butrans,showed dr BUP3015,discussed opioid experienced patients and asked dr to think of 1 patient today that's taking immediate release opioids but not controlling the pain and this patients asking for something else,dr said she will consider Butrans but patient has to be willing to wear a patch and rotate patch once a week. discussed initiation and titration of Butrans and focused dr on commercial plan patients and tricare.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44109	10/21/2011	Reviewed the butrans positioning and the other selling messages. Doc asked about the use of supplementals with butrans. Confirmed that supplementals can be used and that butrans can be titrated after 72 hours. I asked what his experience with butrans has been. He said things are good. Nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44113	10/21/2011	dr said he talked to a few patients about Butrans but patients didnt want to wear a patch,they only wanted their pills,showed dr BUP3015,discussed clinical trial for opioid experienced patients and asked dr if he had a few patients that werent controlled on immediate release opioids that he could discuss Butrans with? dr said he will keep trying we talked about initiation and titration of Butrans and discussed formulary coverage.recommended dr said he's not prescribed Butrans yet,keeps forgetting who's appropriate and how to write it,showed dr BUP3015,discussed opioid experienced clinical trial and results from trial and asked dr if these results were clinically significant? dr said yes they were,asked dr if they were compelling enough for him to prescribe Butrans? dr said yes we discussed initiation and titration of Butrans and discussed formulary coverage.told dr to focus on a couple patients who have BWC or commercial plan insurance.we discussed OxyContin being an option for patients,showed conversion guide and discussed formulary coverage.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44113	10/21/2011	showed dr BUP3015,discussed results from clinical trial and asked dr if this was clinically significant to her? dr said yes and she's seeing that in her patients,patients who were at 9-10 on pain scale are going down to a 2-3 in pain levels,discussed titration of Butrans with dr and discussed formulary coverage,focused dr on BWC and commercial plan coverage for Butrans.recommended Senokot-5
PPLPMDL0020000001	Fairview	OH	44111	10/21/2011	Spoke with Tom, we reviewed the appropriate appetites types for Butrans. I asked if he would let those patients know that there is a 7 day dosing option. He said that he might if the patient asked or had problems with their current therapy. We discussed the medication guide and he agreed to hand them out to new patients. Reminder that OxyContin is still an option and we reviewed the conversion guide.<font color=blue><b>CHUDAKOB's query on 10/27/2011</b></font>"Spoke with Tom, we reviewed the appropriate appetites types for Butrans" Were you hungry when you wrote this call note?<font color=green><b>HOLUBA's response on 10/31/2011</b></font>This was spell check again! "Patients" is what I said.<font color=blue><b>CHUDAKOB added notes on 10/31/2011</b></font>You might want to re-read the call note and not rely solely on spell check.
PPLPMDL0020000001	Lakewood	OH	44107	10/21/2011	Dr said that he thought about starting a patient on Butrans but ended up going to OxyContin because the patients was on higher doses of opioids. I confirmed that this was the appropriate thing to do. We reviewed the medication guide and I asked him to start new patients on Butrans who are taking low dose hydrocodone. Jennifer said she will help remind Dr about Butrans and will recommend to patients. I asked her to keep me posted about the status of Caresource and Butrans and she will.
PPLPMDL0020000001	Lakewood	OH	44107	10/21/2011	Quick call, too busy to talk today. I asked if he has been having success with Butrans and he said the feedback has been good. I reviewed the savings program and reminded him to focus on commercial insurance for Butrans. Checked Butrans and OxyContin savings cards with Pat.
PPLPMDL0020000001	Lakewood	OH	44107	10/21/2011	I asked Dr what she would think if 10 out of 20 patients she started on Butrans came back to tell her that they had a 30% or better pain reduction. I asked if she thought it would be significant and she thought that it would be. I reviewed the opioid experienced clinical trial including criteria and results. I asked if she has had enough success with Butrans that she would continue to start new patients and she said yes. I asked what happened with the patient that was going to pay cash, she said that she does not know if she got the script filled or not, she said the patient has the means to pay cash if she really wanted to. Reminder that OxyContin has great managed care coverage as well. (gardening, baking and football)
PPLPMDL0020000001	Independence	OH	44131	10/21/2011	Deb requested more Butrans patient information booklets. I asked if this means she is finding more Butrans patients & she said she just prescribed for someone today. She said she likes giving out the booklets with each prescription because she believes her patients gain good information from them. Also gave her more savings cards as Steve mentioned they were out.<font color=blue><b>CHUDAKOB added notes on 10/27/2011</b></font>Very good follow-up question to her asking for more booklets!
PPLPMDL0020000001	Cleveland	OH	44113	10/24/2011	TRIALIST-Deb,PA,said she's started a couple patients on Butrans and thinks the best place for Butrans is patients taking 4-5 tablets,5mg vicodin,daily but not controlled instead of increasing their vicodin dose.asked deb if Butrans had any drawbacks? Deb said hairy patients.we discussed application sites and rotation of Butrans,showed patient info booklet,Deb said she focuses on that with patients and writes instructions out for patients.talked to Deb about BWC,commercial and Caresource insurance plans for Butrans.
PPLPMDL0020000001	Parma	OH	44134	10/24/2011	DABBLER- I asked Dr Scanlon if he has had any additional feedback regarding Butrans. He said he has not. I asked him what it usually is about a patient that causes him to think of Butrans. He said if a patient is not well-controlled on short-acting opioids he will think of Butrans. I asked if he had started any patients who have never been on an opioid or if it has all been patients already on opioids. He said everyone has already been on something when he offers Butrans. I asked if he would ever use Butrans on a patient after tramadol is no longer controlling their pain. He said he would probably feel most comfortable trying them on short-acting first. He added that he has many patients who he could be using Butrans for that he is not already & that he will focus on switching more of those appropriate patients. I asked about his experience with OxyContin. He said he generally does not like to prescribe it & would be much more likely to use Butrans. Discussed patient type & range for Butrans & OxyContin. Also showed OxyContin conversion guide displaying 7 tablet strengths. Discussed 15, 30, & 60mg tablets as an option for flexibility in dosing. He said this was good to know.
PPLPMDL0020000001	Parma	OH	44134	10/24/2011	PROSPECT- Dr George said he has prescribed Butrans for one patient so far. I asked him to tell me about the patient. He said it was an older female patient who has chronic back pain. He added that she cannot take Vicodin or Percocet due to adverse events, so he thought of Butrans for this patient. I told him that she sounded like an ideal patient clinically. I showed inclusion criteria to support his choice of a chronic back pain patient. He said he has not gotten feedback yet. Discussed application & showed demo patch. Dr George said he liked the way the adhesive & patch felt & thought it would be effectively stuck for the full week. Reviewed that Butrans is a CIII opioid with abuse & addiction potential. Also let him know that as a CIII, Butrans can be called in & patients can have 5 refills in a 6 month period. He said that he did not know this & that he is going to start using more Butrans because he likes that it is CIII. Gave him initiation guide & went over pg 6, reviewing appropriate patient type & range, including OxyContin as an option for patients beyond Butrans 20mcg. He added that he generally tries not to prescribe opioids. I agreed he should use the same caution with Butrans that he does with other opioids.
PPLPMDL0020000001	Northfield	OH	44067	10/24/2011	Introduced Butrans to Dr Marshall, delivering 5 core messages. Alerted him to box warning & abuse/addiction potential. Dr Marshall said he usually does not do a lot of chronic pain management. He said his patients are usually awaiting surgery or are just getting done with surgery. I asked if there is ever a wait for a patient between when he sees them & when they are able to get scheduled for surgery. He said this always is the case. He said this is where he could see himself using something like Butrans. Discussed with him the appropriate patient type & reviewed initiation guide, focusing on pg 6. Reviewed appropriate range of patient including OxyContin as an option for patients beyond Butrans range. Dr Marshall said he does like the idea of a medication dosed once weekly & asked about use of supplemental analgesia. Discussed ability to take supplemental analgesia in form of opioid or non-opioid immediate-release medications. He said sometimes he prefers not to have his patients on oral opioids & for that reason might be able to use Butrans. Reminded him that Butrans is still a CIII opioid & does carry abuse/addiction risk. He said he would like to speak with Dr Ortega & read more about Butrans before committing to starting patients on it but said he does like the idea. I let him know I would follow-up & he Dr said that he tried to prescribe Butrans for a few Caresource patients, but he was not sure if it was covered. I discussed the step edit for Caresource and also discussed this possibility with Angela. She will pay attention to Caresource patients and try to get Butrans to go through. I let Dr know that the more he tries to get Butrans through on Caresource the better chance that it will be covered after they review it. We discussed the dosing the that opioid experienced patients should start on a 10mcg patch. He said that most of his patients would probably start here. I asked if he would start a new patients this week and he said he will and he wants to write try more Butrans. Reminder that OxyContin is an option when Butrans may not provide adequate analgesia.
PPLPMDL0020000001	Westlake	OH	44145	10/24/2011	I reminded Dr about the clinical trial we discussed last time and the results he may get with Butrans. I asked if he would try Butrans for a patient as the next step after tramadol. He agreed. Reminder that OxyContin is also still a long acting option when patients are taking over 40mg of hydrocodone.
PPLPMDL0020000001	Westlake	OH	44145	10/24/2011	Spoke with pharmacist Rick & gave him updated Butrans FPI, pointing out changes. Also directed him to section 2.4 & discussed use of supplemental analgesia while on Butrans. I asked if he was aware of any type of alert in their system that would appear if Butrans was prescribed with supplemental opioid analgesics. He said he was not aware of this for Butrans but added that he doesn't dispense enough of it for him to notice. Reminded him of e-voucher & discussed OxyContin savings cards.
PPLPMDL0020000001	Parma	OH	44129	10/24/2011	

PPLPMDL0020000001	Lakewood	OH	44107	10/24/2011	Quick call, Dr did not have time to take a look at the clinical trial. I asked if he would start one of the patients on Butrans that we spoke about in the past, so that he can see how Butrans can work in his practice and he said he would start someone.
PPLPMDL0020000001	Westlake Parma	OH OH	44145 44134	10/24/2011 10/24/2011	Quick call at window, I asked what type of patients did he start on Butrans this morning. He said he did not start anyone today, but he will write it when he has the chance to this week. Spoke with James, pharmacist/manager, & gave him updated Butrans FPI. Also discussed the ability to take supplemental analgesia while on Butrans. Showed FPI 2.4 as support. I asked if he knows of any alert on his system regarding Butrans when prescribed with supplemental analgesia. He said he does not know if this specifically for Butrans but he has seen this type of alert with other medications. I asked what he typically does. He said protocol for all pharmacies should be to call the physician to double-check what he/she wants to do & proceed however the physician wishes. He said he would not reject the prescription. Discussed Butrans savings via e-voucher or savings cards & also discussed OxyContin savings cards. He said he has enough OxyContin savings cards for now.
PPLPMDL0020000001	Cleveland	OH	44113	10/24/2011	talked to dr about where Butrans fits into practice, dr said patients taking 4-5mg Vicodin daily, not controlled. dr said he likes patch technology and would like to see more patients on Butrans. asked dr if there were any drawbacks to Butrans? dr said insurance is biggest plan here. talked to dr about starting a couple patients with Caresource, BWC and commercial insurance this week. dr said he will do that.
PPLPMDL0020000001	Cleveland Parma	OH OH	44114 44129	10/24/2011 10/24/2011	talked to Caresource insurance and asked John to start a couple patients with Caresource on Butrans. John said he will do that. DABBLER- Reminded Jen of previous conversations when we discussed that newer patients would likely be where she would start with Butrans & asked her if she has encountered this scenario. She said she has not had anyone yet who is new who is not well-controlled on tramadol. She added that she thought she would have a Butrans patient recently, but that patient ended up being well-controlled on tramadol TID so she did not need to prescribe Butrans for them. I asked where she sees herself prescribing Butrans. Jen said she is ready to prescribe for anyone who does not get relief from tramadol instead of starting that patient on Vicodin. I asked about any Butrans discussion at the practitioner meeting they had recently with Dr Nickels. She said they did not discuss Butrans at their meeting this time but added that she is now comfortable starting patients on her own & plans to do so as soon as she sees someone who she would have otherwise started on Vicodin. Spoke with Dawn who said that Caryn Delisio will soon be joining this location as they are closing the Sheffield location. However, Dawn said this information has not been discussed with anyone else & she asked me not to disclose it to anyone at their organization. She said this change will take place the first of the new year.
PPLPMDL0020000001	Parma	OH	44134	10/24/2011	DABBLER- I reminded Dr Mandat of my last visit when he told me that he had started more patients on Butrans & of previous conversations when he had told me that he has used Butrans so far in patients who were his worst-case scenario patients. I asked what type of patients his more recent trials were. He said they were not that same type. I asked him what therapies he replaced with Butrans in these more recent cases. He told me that Butrans is "weaker" than fentanyl, so he uses it much earlier than he would fentanyl. I agreed that many patients on fentanyl may not be within the appropriate range for Butrans & also reminded him that Butrans is still a CII opioid with abuse/addiction potential. He said that he thinks the most recent patients had been on tramadol prior to being switched to Butrans. I told him this is an ideal patient type & supported his selection. I asked if he would continue to identify this type of patient for Butrans & he agreed.
PPLPMDL0020000001	Cleveland	OH	44114	10/24/2011	REPEAT- asked dr if she was still comfortable starting patients on Butrans, right after tramadol instead of going to vicodin? dr said yes, no problem with doing that, its insurance coverage thats an issue as they have a lot of medicaid, medicare, dual eligibles and BWC. dr said most of her patients with private insurance arent her chronic pain patients, mainly medicaid and BWC. told dr to focus on BWC and commercial plans but updated dr on Caresource and asked dr to find a couple patients with Caresource insurance that she can start on Butrans, dr said she will do that.
PPLPMDL0020000001	Cleveland	OH	44113	10/24/2011	dale expressed interest in being a Butrans speaker, submitted name in Phoenix. Dale said he's been prescribing Butrans, likes that its a patch and dosed every 7 days and he's seeing results as patients are getting good pain relief. asked dale to continue prescribing Butrans. Dale said he would.
PPLPMDL0020000001	Cleveland	OH	44109	10/25/2011	I talked to dr about the patients he's starting on Butrans, focused dr on appropriate patients showing visual aid. dr focused on patients taking opioids but not controlled, showed dr BUP3015 and asked dr if the data was clinically significant? dr said yes, a 30% reduction in pain was clinically significant. asked dr if it was clinically significant enough for him to prescribe Butrans? dr said yes. I asked dr to start a few patients today/this week on Butrans and focus on BWC and commercial pain patients, dr said he will do that. discussed dr starting a couple Caresource patients on Butrans too. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44195	10/25/2011	showed Anne, NP, BUP3015 opioid experienced patients clinical trial, and asked if the data was clinically significant to her? Anne said yes a 30% reduction in pain was clinically significant. I asked Anne if it was clinically significant enough for her to prescribe Butrans? Anne said yes it was. Anne said Dr Stanton-Hicks did start 1 patient so she was waiting to see how that patient did on Butrans. we discussed appropriate patients showing initiation guide and BUP3015 and I asked Anne if she will start a couple patients today/this week like we discussed with commercial insurance? Anne said she'll talk to some patients about it and see if they will try Butrans and she also needs to discuss this with Dr Stanton-Hicks as she treats all of his patients. discussed Butrans patient savings cards with Anne and recommended Senokot-S
PPLPMDL0020000001	Independence	OH	44131	10/25/2011	NON-PRESCRIBER- Introduced Butrans to Dr Clayton, delivering 5 core messages & alerting her to box warning. Spent time going over appropriate patient type, focusing on those who have chronic conditions such as back pain or osteoarthritis who are not well-controlled on NSAID's/COX-2's or tramadol. Discussed Butrans as a CII long-acting opioid with abuse/addiction potential. Discussed appropriate patient selection & patient range for Butrans as well as OxyContin as an option for patients beyond Butrans 20mcg. She asked about adverse events. Showed core visual aid rates. Discussed inclusion criteria for studies & conditions causing chronic pain. I asked her what drawbacks she saw with Butrans. She said she did not see any, other than it is an opioid & she always worries about prescribing them. Told her she is right in being cautious & asked that she use discretion when selecting appropriate patients. Discussed managed care & savings cards.
PPLPMDL0020000001	Independence	OH	44131	10/25/2011	NON-PRESCRIBER- I asked Dr Boose about his experience thus far with Butrans. He said he did prescribe it for one patient. I asked him to tell me more about that. He said the patient had low back pain & neither Vicodin nor Percocet were controlling his pain. Dr Boose said that is when he selected Butrans. He added that the Butrans did not help the patient but that it turned out that the patient had some other issues leading to the back pain & is now going to have a surgery to correct it, so he admitted that the patient did not end up being an ideal one. I asked if he would use Butrans right after NSAID's or COX-2's, before starting on tramadol. He said he would. He asked about a conversion guide. Told him the initiation guide was the best I could offer & showed him pg 6, walking him through how to initiate on either 5 or 10mcg. Discussed Butrans as the only long-acting CII opioid & alerted him to abuse/addiction potential. Discussed importance of appropriate patient selection. I asked Dr Boose what drawbacks he saw in Butrans. He said he really could not think of any & asked about adverse events. Showed him rates & asked if he was at all surprised by any of them. He said no. He asked about insurance coverage. I showed formulary grid & discussed savings cards & eligibility requirements. I asked Dr Boose if he would prescribe Butrans for appropriate patients like the ones we discussed today & he said yes. Discussed OxyContin 7 tablet strengths.
PPLPMDL0020000001	Cleveland	OH	44195	10/25/2011	talked to dr in hallway, I showed dr BUP3015, opioid experienced patients clinical trial and asked if the results were clinically significant? dr raised eyebrows surprised at the 30% reduction in pain stating he didnt remember that but yes, that reduction in pain would be clinically significant enough for him to prescribe Butrans. dr said he started 1 patient on Butrans but hasnt seen patient so doesnt know how patient is doing. we talked about appropriate patients, showed dr and gave dr Butrans initiation guide and discussed titration of Butrans with dr. dr said ok and asked me to call his secretary, Sherine, to book an appointment with him. gave dr OxyContin conversion guide and formulary grids and told dr OxyContin was an option for patients, dr said ok. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	10/25/2011	discussed with dr 5 core selling messages of Butrans, dr said he likes that Butrans is a patch and dosed once every 7 days. dr said he has a lot of patients taking vicodin who arent controlled and he thinks Butrans could be an option. showed dr BUP3015, discussed opioid experienced clinical trial, inclusion criteria and dr said he does treat the pain conditions listed. I asked dr if the results were clinically significant? dr said yes 30% reduction in pain is clinically significant. I asked dr if it was clinically significant enough for him to prescribe Butrans for a couple patients? dr said yes. we discussed initiation and titration of Butrans. dr asked where Butrans was covered? showed formulary grid and patient savings cards, dr said he'll talk to a few patients and see what they say about Butrans. briefly discussed OxyContin being an option for appropriate patients, after Butrans 20mcg or if patients dont want to wear a patch they have option of OxyContin, discussed formulary coverage and I recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44125	10/25/2011	Spoke with Betsy & gave her updated Butrans FPI, pointing out the changes. Also spent time going over the appropriate patient type, focusing on patients on chronic Vicodin or tramadol who call too soon for refills or who say that their short-acting opioid is not lasting long enough. She said Cleveland Clinic pain physicians usually try to stay away from any narcotic prescriptions. I asked if there are still some patients who are on them & she agreed that there are. Also discussed savings cards for Butrans & OxyContin.
PPLPMDL0020000001	Cleveland	OH	44109	10/25/2011	talked to Raban, Pharmacy Mgr, about Butrans 5 core selling messages and Raban said he hasnt gotten any Butrans scripts here. I asked Raban what features of Butrans stood out to him? Raban said he likes that Butrans is a patch and dosed once week, as some patients might like wearing a patch. I asked Raban if he would give patients the Butrans patient info booklets, if they are taking immediate release opioids daily but not controlled? Raban said he does provide patient counseling so he could give booklets out and patients can talk to their doctors. we discussed OxyContin stocking and appropriate patients for OxyContin, Raban said they are seeing the same patients mostly for OxyContin, no new Rx for OxyContin. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	10/25/2011	dr said he couldnt remember Butrans and asked me to explain everything to him. we discussed 5 core selling messages and dr said he thought buprenorphine was a derivative of morphine because of the way buprenorphine is spelled, I told dr buprenorphine isnt a morphine derivative. dr asked if Butrans was like Duragesic changing the patch every 3 days, told dr no Butrans is dosed once every 7 days, dr said ok that was better for his patients. dr asked about Butrans falling off and if patients could shower/swim with Butrans on, told dr yes patients could swim/shower and showed FPI. dr asked who the appropriate patients were, showed Butrans initiation guide, asked dr if he had a couple patients with 1 of the pain conditions shown, pg.11 visual aid, that are taking 1 of the listed immediate release opioids (initiation guide) but not controlled? dr said he has a lot of patients taking short-acting opioids but not controlled, dr asked if medicaid or medicare were covering Butrans? talked to dr about commercial pain patients and discussed PA for Medicaid patients and focused discussion on Caresource patients trying Butrans. dr said ok and he will talk to patients and see what happens. showed dr Butrans initiation booklet, asked dr to focus discussion on application/rotation of Butrans and discussed this info with MA, Cyndie, dr said be sure Cyndie sees that and patient savings cards as she'll give them to patients. recommended Senokot-S
PPLPMDL0020000001	Independence	OH	44131	10/25/2011	NON-PRESCRIBER- Dr Grusenmeyer said he did not remember much about Butrans. Reviewed 5 core messages with him & spent time going over appropriate patient type. Discussed Butrans as the only long-acting CII opioid & advised that Butrans still carries abuse & addiction potential. Discussed appropriate range of patients for Butrans as well as OxyContin as an option for appropriate patients beyond Butrans. He asked what the conversion from other opioids to Butrans is. I told him we have no direct conversion but let him know initiation guide would assist him in selecting an appropriate starting dose. Showed initiation guide pg 6 to help illustrate this. I asked him what drawbacks he saw in Butrans. He said none really. Reviewed managed care information & discussed savings cards & eligibility. He said he would prescribe Butrans for the types of patients we discussed today.
PPLPMDL0020000001	Mayfield Hts	OH	44124	10/25/2011	I asked doc about his experience with speaker training. He said things went well and is excited about speaking for butrans. He is scheduled to speak with the DM to go over the slide presentation. He said he has been trying to think of more appropriate patients for butrans he just has to get out of his routine. In fact, he has 2 new patients in the waiting room he said he might try on butrans if he have the coverage. I reminded him of the no medicare/medicaid coverage. He said he is looking forward to the medicare coverage for butrans.
PPLPMDL0020000001	Euclid	OH	44117	10/25/2011	I asked doc what his clinical experience has been with the 2 patients he tried on butrans. As he stated previously, Butrans did not work for a male patient that was previously on vicodin TID. He said there other patient he never saw back again. I defined an appropriate patient as someone taking 5mg of vicodin 4-6 tabs per day. He said he does not like to switch people if they are not complaining. I asked him if he has patients taking tramadol 300-400mg as monotherapy. He said he has a lot of those. I asked him to prescribe butrans after tramadol instead and start them on the 10mcg. He said he could do that. Patients on higher doses of vicodin ATC can be started on low dose oxycontin.
PPLPMDL0020000001	Cleveland	OH	44109	10/25/2011	talked to Erin, Pharmacist, about Butrans 5 core selling messages and I asked if Erin has seen any Butrans scripts? Erin said no, but she gets a lot of scripts for immediate release opioids. asked Erin what features of Butrans stand out to her? Erin said the 7 day dosing and Butrans being a patch, patients might like to know that this option is available. asked Erin if she provides patient counseling for those patients taking immediate release opioids that arent controlled? Erin said yes they provide patient counseling. I asked Erin if she would give patients Butrans patient info booklets to speak with their doctors about Butrans, Erin said she would do that. we discussed OxyContin stocking and appropriate patients for OxyContin. recommended Senokot-S
PPLPMDL0020000001	Euclid	OH	44132	10/25/2011	DOC was out of the office today. Spoke to Jordan about the indication and positioning of butrans and asked if he was familiar with any patient feedback about butrans. He said he thinks that doc has prescribed but he does know about the patients response. I provided him a copy of the opioid experienced clinical trial and formulary grid.

PPLPMDL0020000001	South Euclid	OH	44121	10/25/2011	Spoke to Amanda about the stocking of butrans. She said they have seen a couple of scripts for it but not any lately. I asked if she recalled the prescriber(s). She did not. I explained the positioning of butrans, the savings card and relay health. Gave her patient info guides to give to butrans customers.
PPLPMDL0020000001	Cleveland	OH	44130	10/25/2011	TRIALIST- Quick call-Dr Diab said he did not have time today. Stopped him by showing him Butrans patient information booklet. I asked if he thinks this tool would be useful in introducing Butrans to patients when giving them their first prescription. He said it would be helpful & that he would give them to those patients.
PPLPMDL0020000001	Parma	OH	44134	10/25/2011	LOYALIST- I asked Dr Hernandez of all the patients he has tried Butrans on, how many of them are still on it. He said 90%. He added that other than a couple of patients who discontinued due to nausea, he cannot think of anyone who has not wanted to stay on it. He said the pain relief they get from Butrans is excellent & patients are generally very happy with results.
PPLPMDL0020000001	Lakewood	OH	44107	10/25/2011	Dr tried Butrans for a patient with United Health Care- Premier, who got back a PA. We discussed this issue with Karen and we will find out what we can about why this particular patient was denied and let her know.
PPLPMDL0020000001	Cleveland	OH	44130	10/25/2011	Spoke with technician who said the pharmacist was unavailable. Gave her updated Butrans FPI & reviewed updates. Also discussed appropriate Butrans patient type, focusing on those who call too soon for refills of chronic short-acting opioids such as tramadol or Vicodin. Discussed savings cards for Butrans & OxyContin. She said they did not need any savings cards & that she would pass the information along to the Dawn & Patty.
PPLPMDL0020000001	Westlake	OH	44145	10/25/2011	I asked when Dr thinks of Butrans, he said that he thinks of it with back pain, disk and non-nuropathic pain. He said he likes to rotate vicodin and have patients try something else for a while. I asked if he is happy with Butrans and if he would continue to write and he said he will.
PPLPMDL0020000001	Cleveland	OH	44130	10/25/2011	TRIALIST- I reminded Dr Fedorko of our previous conversation when he told me that he had a male patient who was on tramadol but was not well-controlled & for whom he was considering Butrans. He said he does not remember what patient it was. He said that he has one female patient who he can think of who is on tramadol but he thinks she "is hooked" on the tramadol so she would not be a good candidate for switching. He said this patient calls frequently for refills. I asked him if it was possible that the tramadol simply was not providing adequate pain relief, causing her to need more. He said he does not know. Positioned Butrans for patients who are not well-controlled on tramadol. He said he has another patient who may be a Butrans candidate who has pancreatic cancer & is in the hospital. I asked him if he would consider this more "severe" pain. He said not necessarily. Asked him to keep more "moderate" pain patients in mind & asked if he would think of Butrans for patients suffering from back pain due to conditions such as spinal stenosis or spondylosythesis. He said that was a good idea also. Let him know these were the type of patients Butrans was studied in.
PPLPMDL0020000001	Cleveland	OH	44195	10/25/2011	I showed Kathy,PA,BUP3015 opioid experienced patients and discussed results and asked Kathy if this was clinically significant? Kathy said yes,a 30% reduction in pain would be clinically significant.I asked Kathy if this was clinically significant enough for her to prescribe Butrans? Kathy said she would prescribe Butrans but she treats all of dr minzter and dr mekhail's patients and neither one have prescribed Butrans.I asked Kathy if she could share this info with both of them and see what their thoughts are about Butrans? Kathy said yes and asked for the BUP3015 trials and initiation guides for both of them.we talked about initiation and titration of Butrans and discussed formulary coverage.recommended Senokot-S
PPLPMDL0020000001	Independence	OH	44131	10/25/2011	NON-PRESCRIBER- Reminded Dr Sundaram of our previous conversation & asked if he remembers if he had attempted to titrate any of his Butrans patients or if they just discontinued. He said they just discontinued. He asked if he should have titrated them. Discussed steady state in 72 hours & ability to titrate to a maximum 20mcg/hr. He asked about insurance coverage. Reviewed formulary grid, discussed CareSource & also delivered OxyContin CCRx message.
PPLPMDL0020000001	Mayfield Heights	OH	44124	10/25/2011	Introduction to new Hillcrest Pain Mgmt prescriber. I introduced butrans' indication, CII status, and explained its positioning after tramadol failures or before going to hydrcodone ATC. Provided the butrans formulary grid and initiation guide. He said he heard of it and will read the information.
PPLPMDL0020000001	Broadview Heights	OH	44147	10/26/2011	NON-PRESCRIBER- Spoke with Nancy (MA) & asked her to give Dr Samuel the BUP3015 clinical reprint & Initiations invite. She agreed. Reviewed with her appropriate patient type & range for Butrans. Discussed savings cards for eligible patients & patient information booklets. She said Margaret has some & did not need any more. Also checked on OxyContin savings card stock but she said they have plenty of those as well.
PPLPMDL0020000001	Broadview Heights	OH	44147	10/26/2011	NON-PRESCRIBER- Spoke with Nancy (MA) & asked her to give Dr Samuel the BUP3015 clinical reprint & Initiations invite. She agreed. Reviewed with her appropriate patient type & range for Butrans. Discussed savings cards for eligible patients & patient information booklets. She said Margaret has some & did not need any more. Also checked on OxyContin savings card stock but she said they have plenty of those as well.
PPLPMDL0020000001	Cleveland	OH	44106	10/26/2011	showed dr BUP3015,opioid experienced patients,clinical trial and discussed results with dr.i asked dr if a 30%reduction in pain was clinically significant? dr said yes.i asked dr if it was clinically significant enough for him to prescribe Butrans? dr said yes it was and he's started a few patients on Butrans and feels comfortable with who the appropriate patients are for Butrans.told dr that was great and asked dr to focus on Commercial plan patients and we discussed Caresource patients trying Butrans.
PPLPMDL0020000001	Maple Heights	OH	44137	10/26/2011	Spoke with technician Kathy & gave her updated Butrans FPI. Also discussed Butrans appropriate patient type/range. She said she has seen it on their shelf & knows they have dispensed it before. Also discussed patient information booklets & savings via e-voucher or savings card. Reviewed OxyContin savings cards. She said they do not dispense a lot of OxyContin at that location to her knowledge & said they did not need any cards.
PPLPMDL0020000001	Beachwood	OH	44122	10/26/2011	TRIALIST- Spoke with Vickie (nurse) & reviewed Butrans appropriate patient type, managed care, & savings program. She said that Dr Barrett has been prescribing a lot of Butrans but Dr Yokiel not as much, although he has written a few. She said some of his have been rejected by managed care. Gave her BUP3015 & asked her to give it to Dr Yokiel for his review as I thought its content would interest him. She said he often does not read literature left by reps but agreed to give it to him. Discussed OxyContin savings cards- they did not need any.
PPLPMDL0020000001	BEACHWOOD	OH	44122	10/26/2011	Spoke with floater pharmacist & reviewed Butrans core messages. Also discussed appropriate patient type/range. She said she had not dispensed it but has seen it on the shelves of various stores. Discussed ability to titrate after 3 days up to a maximum of 20mcg. Reviewed savings via e-voucher or savings card & also discussed OxyContin savings cards. She said they did not need any cards.
PPLPMDL0020000001	Cleveland	OH	44106	10/26/2011	talked to Margie,Pharmacy Supervisor,about Butrans's core selling messages.Margie said she likes that Butrans is a patch and dosed once every 7 days, as some patients might prefer that type of delivery and dosing schedule.I asked Margie if she's given any Butrans patient info booklets out to patients so that they can talk to their HCP's about Butrans? Margie said yes a few patients were asking for something else as their immediate release opioids werent controlling their pain.i gave Margie more booklets and asked her to continue recommending Butrans to patients by giving the booklets for patients to discuss with HCP's.we talked about OxyContin stocking,no new Rx,same patients monthly getting Rx for OxyContin,we discussed appropriate patients and insurance coverage.recommended Senokot-S
PPLPMDL0020000001	Lyndhurst	OH	44124	10/26/2011	Quick call with Steve to discuss the butrans patients. He said he has seen a few scripts but none lately. I asked if they were customers who refilled the scripts. He did not know. I discussed the positioning of butrans and the coverage with commercially insured customers.
PPLPMDL0020000001	Beachwood	OH	44122	10/26/2011	NON-PRESCRIBER- Quick call at the window. Handed back BUP3015 & let Jen know it contained results from Butrans clinical trials with opioid-experienced patients. She said she would have a look at it, thanked me, & walked away.
PPLPMDL0020000001	MAYfield Heights	OH	44124	10/26/2011	Spoke to Jesses about the stocking and volume of butrans. He confirmed that they have it but he does not recall any scripts. He asked about the difference from fentanyl. I told him there is no head to head data with fentanyl, butrans is a CII and is a 7 day patch. I explained the proper application and disposal of butrans for future scripts.
PPLPMDL0020000001	Cleveland	OH	44106	10/26/2011	dr said he's not started anyone recently on Butrans but knows he has to start some patients and get some clinical experience.I asked dr who were the patients he felt could be appropriate for Butrans? dr said patients taking tramadol or vicodin not controlled dr said keep reminding him.i showed dr pain conditions visual aid,pg.11,asked dr to think of a couple patients that are opioid experienced but not controlled and start them on Butrans,dr said ok he will do that.i told dr i was confident he would see a few patients this week that are appropriate and he would get there eventually with Butrans,dr said thank you he thought so too.recommended worked internal medicine dept- left BUP3015,opioid experienced clinical trial,initiation guide,formulary grid and my business card,for Dr.Jones,Dr.Falck-Ytter,Dr.Harrington,Dr.Ricanati,Dr.Linheim and Dr.Gelehter as i couldnt see any doctors.
PPLPMDL0020000001	Bedford	OH	44146	10/26/2011	TRIALIST- Dr Moufawad said he still has not prescribed Butrans for any new patients. He added that he has the one patient on it who he started on it long ago.
PPLPMDL0020000001	Cleveland	OH	44106	10/26/2011	showed dr BUP3015,discussed clinical trial for opioid experienced patients and asked dr if a 30% reduction in pain was clinically significant? dr said yes.i asked dr if it was clinically significant enough for him to prescribe more Butrans? dr said yes he has patients on Butrans and they are doing well.dr said the biggest challenge is that he has a lot of medicald patients and medical isnt covering Butrans.we discussed PA requirements for State Medicaid patients and Butrans and then i talked to dr about Caresource patients trying Butrans,dr said that would change everything in his practice and he could start a significantly larger group of patients on Butrans.I asked dr to start a couple patients this week and i will follow-up next week,dr said ok he will do that.
PPLPMDL0020000001	Parma	OH	44129	10/26/2011	Spoke with pharmacist Bethany & gave her updated Butrans FPI. Pointed out the update with pk profile which she was interested in. Inquired about stocking & movement of Butrans. She said she still does have it but has not dispensed it at all. Showed FPI 2.4 & reminded her that supplemental analgesia in opioid or non-opioid medications is clinically acceptable & discussed possible alert in their system. Discussed OxyContin savings cards but she did not need any.
PPLPMDL0020000001	Parma	OH	44129	10/26/2011	REPEAT CUSTOMER- Dr Chagin said he has been using more Butrans lately. I asked me to tell me about some of the patients. He said he has gotten some feedback so far from a patient who was happy on it. He added that he wrote two scripts yesterday- one for a woman with degenerative disc disease & another woman who also has back pain who had tried other opioids without success in the past. I told him it sounds like he is selecting good patients. Discussed titration ability after 3 days up to a maximum of 20mcg. Also reviewed managed care coverage & savings cards. He asked if the patch will stay on for the full week. I told him every patient is different but Butrans is designed to be worn for 7 days. I asked Dr Chagin if he planned to continue to identify Butrans patients & he said yes & that he is actually interested in making Butrans his "go-to" drug of choice for this type of patient. Discussed OxyContin 7 tablet strengths & managed care coverage. Spoke with Debbie who requested literature on Butrans that would show dosing as well as savings cards. Discussed dosing & gave her initiation guide to keep for reference. She said that sometimes once Dr Chagin starts prescribing a medication, he generally starts prescribing it a lot.
PPLPMDL0020000001	Cleveland	OH	44109	10/26/2011	talked to Chris,Pharmacist,about Butrans stocking and chris said they are seeing Butrans scripts get filled her but he doesnt know who's prescribing and doesnt have time to look that info up for me today.Chris said come back friday and if they arent busy he'll get that info for me.we discussed 5 Butrans core selling messages,i left Butrans formulary grid and Chris said i need to talk to Rob about Butrans patient savings cards as he keeps all of them for pharmacy staff.gave Butrans patient info booklets to Chris and asked him to show patients Butrans application/rotation sections,side effects,etc in the booklet,chris said he'll do that.we discussed OxyContin stocking and Chris said not many new Rx for OxyContin,same patients monthly for OxyContin Rx.gave Chris OxyContin conversion guide and formulary grids.recommended senokot-s
PPLPMDL0020000001	Cleveland	OH	44109	10/26/2011	dr said she's not started anyone on Butrans yet but has talked to a few patients about it,gave Butrans patient info booklets to them and will be following up.i showed dr BUP3015,discussed opioid experienced patients,showed data and asked dr if a 30% reduction in pain was clinically significant? dr said yes,surprised as she didnt remember that about Butrans.i asked dr if 7 out of 10 patients could have at least a 50% reduction in pain would that be clinically significant enough for her to prescribe Butrans.dr said yes,discussed initiation titration and formulary coverage for Butrans.told dr to focus on BWC and commercial plans and discussed Caresource patients trying Butrans.told dr she has option of OxyContin for those patients who dont want to wear a patch,dr has option of OxyContin,showed conversion guide discussed a few conversions with dr and talked about formulary coverage for OxyContin,dr said she has a few select patients on OxyContin but prefers to not start a lot of patients on OxyContin.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	10/26/2011	talked to dr about BUP3015,asked dr if the data was clinically significant? dr said yes,a 30% reduction in pain was clinically significant.I asked dr if it was clinically significant enough for him to prescribe Butrans? dr said yes.dr said he's talked to a few patients but no interest.dr said he's having a tough time selling Butrans to the patients as they want their pills.showed dr FPI,maintenance of therapy section and told dr to start patients on Butrans but still give immediate release opioids,if he deems appropriate,so that patients still have their pills for breakthrough pain if need be,dr said that was a good idea and he forgot about that.asked dr to start 2 patients with BWC or commercial insurance that are like the opioid experienced patients we discussed,this week? dr said he will do his best and talk to some patients.we discussed initiation and titration of Butrans and i asked dr to give patients the Butrans patient info booklets to assist in educating them on application/rotation of Butrans,side effects,etc.,dr said he will do that.
PPLPMDL0020000001					

PPLPMDL0020000001	Cleveland	OH	44143	10/26/2011	Introduced doc to butrans an discussed the key selling messages. He asked about the molecule as he was not familiar with it. I referred to the MOA section of the sales aid and discussed the receptor activity. I explained that butrans is an alternative to prescribing vicodin ATC. I discussed the formulary grid and the savings cards. He asked about a 4ht tier co pay (per grid). I asked if he had any Aultcare patients. He said probably not. I explained that it may be a higher than average co pay but that the saving card would work.
PPLPMDL0020000001	Cleveland	OH	44143	10/26/2011	I asked doc about his experience with butrans and what patients are liking about the product. He said he really has not used it enough to say just yet. he said access seems to be a bit of a problem as he just wrote one yesterday but had to be switched because his co pay was too high. I asked the patient was given a savings card and was told yes. I reminded them to focus on patients with private insurance plans. I also reminded doc of the CIII status and that butrans can be called in and refilled. He did not believe it at first but was glad to hear it.
PPLPMDL0020000001	Cleveland	OH	44130	10/26/2011	NON-PRESCRIBER- Positioned Butrans for patients who are taking chronic short-acting around-the-clock opioids & are not well-controlled. Dr Popa reminded me that she does not like "dealing" with pain patients. I told her I understood & advised that she is cautious with Butrans, a CIII opioid as well. She looked through initiation guide & said that she does think Butrans is something she can use & that she "will do better" in identifying patients. Discussed managed care coverage & reminded her of savings cards for those eligible. Also showed her demo patch/adhesive & discussed disposal. She stated again that she will try to identify Butrans patients.
PPLPMDL0020000001	Mayfield Hts	OH	44124	10/26/2011	Spoke to tech, Sawana, about the stocking and movement of butrans. She was aware of only one patient that is on it and continues to get it refilled. I asked if she knew the prescriber. She did not know about the prescriber but she was sure that the customer has had an affordable co-pay. I explained the positioning of butrans and the savings card available for commercially insured patients. I asked about the volume of oxycontin scripts. She said they have plenty of those. NO issues or concerns with oxycontin.
PPLPMDL0020000001	Cleveland	OH	44143	10/26/2011	Quick Call...introduced doc to the butrans selling messages: indication, positioning, CIII status and 7 day delivery. I ask him if he has patients that might fit the positioning. He said there probably wouldnt be a whole lot of opportunity to prescribe it. He suggested I schedule a lunch to further discuss a new product. Next available appointment is in January.
PPLPMDL0020000001	Mayfield Village	OH	44143	10/26/2011	I asked HCP what she thought of the speaker program a few days ago. She said she thought it was informative and helpful and she now knows where to use it and how to write it. I reviewed the CIII status which can be called in or refilled. I asked her to suggest butrans to dr. Mandel after tramadol failures.
PPLPMDL0020000001	Cleveland	OH	44113	10/27/2011	dr said he has a patient coming into office next week that he wants to start on Butrans,he has 1 patient on Butrans doing well and he may be starting more patients on Butrans due to some recent updates with BWC coverage for short-acting opioids.dr said BWC is asking doctors not to prescribe percocet,vicodin,norco and nycynta for patients with chronic pain conditions.dr said this will be case to case but he is going to follow BWC guidelines so he will now be considering Butrans for more patients than he had before.showed dr BUP3015,opioid experienced clinical trial and asked dr if this data was clinically significant? dr said yes any reduction in pain is good.I asked dr to think of a couple patients like the one's in BUP3015,that he can start on Butrans this week,dr said he will do that.I told dr im confident he has appropriate patients to start on Butrans and i know he'll get there,dr said he knows its just taking him a little longer and asked me to be patient with him.
PPLPMDL0020000001	Cleveland	OH	44103	10/27/2011	i talked to Amy,Pharmacy Mgr,about Butrans scripts and Amy said she has seen a few but not recently,i talked to Amy about section 2.4,maintenance of therapy in FPI,as Amy said she wasnt sure if patients could take an immediate release opioid and Butrans at the same time,after discussing this info in FPI,Amy said she felt more comfortable dispensing Butrans with immediate release opioids if thats what doctors prescribe. we discussed BWC,commercial and Caresource coverage for Butrans. Amy said majority of patients here are Medicaid and Caresource.I asked Amy if she could give Butrans patient info booklets to patients and discuss application/rotation of Butrans and side effects with them? Amy said yes she will do that.I asked Amy if she's seeing any new Rx for OxyContin? Amy said not many new Rx for OxyContin,same patients every month.we talked about appropriate patients for OxyContin,gave conversion guide and formulary grids.
PPLPMDL0020000001	Cleveland	OH	44106	10/27/2011	talked to George,Pharmacist,about Butrans stocking.George said they have seen some Butrans scripts filled here but not recently,we discussed 5 Butrans core selling messages,asked George what features of Butrans stood out to him? George said he likes the 7 day dosing interval and the fact that Butrans is a patch.George said some patients may have an interest in wearing a patch.I asked George to recommend Butrans to patients that he knows are taking immediate release opioids daily but arent controlled,George said he'll do that,and I asked George to give patients the Butrans patient info booklets to have them discuss Butrans with their doctors.George said he will do that we discussed formulary coverage for Butrans,discussed appropriate patients for OxyContin and formulary coverage,confirmed stocking of OxyContin.
PPLPMDL0020000001	Parma	OH	44129	10/27/2011	NON-PRESCRIBER- Dr Roheny said he could write Butrans if he didn't only have to stick with commercial insurance. I told him that fortunately, coverage improves as time moves on & let him know that scripts are currently going through on Medicaid plans. He said that was excellent news. He asked me if the doses for Butrans were 5, 10, & 20mcg. I told him this was correct & handed him an initiation guide, pointing out page 6. Discussed titration after 3 days if necessary & reviewed appropriate patient type, CIII, & abuse/addiction potential. Dr Roheny went on to say, "Now I can write it". I let him know I would be following up with him to hear about his results. OxyContin broad managed care availability message.
PPLPMDL0020000001	Mayfield Heights	OH	44124	10/27/2011	Quick call...I reminded doc of the butrans appropriate patient and asked her if she has Care source Patients. She said sure and asked if butrans is covered. I told her that it is being covered after tramadol. I asked her to prescribe for a Caresource patient that has failed on tramadol. Gave her formulary grid and BUP3015.
PPLPMDL0020000001	Shaker Heights	OH	44122	10/27/2011	NON-PRESCRIBER- Quick call- I updated Dr Agarwal & let him know that Medicaid is currently paying for Butrans. He said that was great news & added, "Now I will be able to use it." Let him know I would be back to follow-up on his results. Spoke with his MA Michelle & reviewed savings cards for Butrans & OxyContin.
PPLPMDL0020000001	Cleveland	OH	44195	10/27/2011	worked apm dept-left Butrans fpi,initiation guide,formulary grid,patient info booklets for Dr.Mekhal,Dr.Mintzer,Dr.Cheng,Dr.Stanton-Hicks,Dr.Leizman,Dr.Vrooman; worked neurology dept-Dr.Kriegler,Dr.Mays,Dr.Stillman-left same info for physicians as i couldnt see them.
PPLPMDL0020000001	Parma	OH	44129	10/27/2011	NON-PRESCRIBER- Quick window call- Positioned Butrans for patients with chronic pain who are not well-controlled on tramadol around-the-clock. Handed back initiation guide & showed back display of how the prescription should be written. Dr Paat just thanked me & walked away saying he would keep it in mind. Spoke with Shari & talked more about patient type with her.
PPLPMDL0020000001	Cleveland	OH	44103	10/27/2011	gave dr BUP3015,discussed opioid experienced patients with dr,dr said he likes that Butrans is a patch as some patients dont like taking pills around the clock for their pain,dr said the dosing once every 7 days might be appealing to some patients also,dr said biggest challenge is medicalid hasnt covered Butrans,i talked to dr about Caresource patients trying Butrans,dr said ok he'll talk to some patients and see what happens.we talked about OxyContin still being an option for patients and formulary coverage,dr said he writes a lot of OxyContin because its covered on medicaid and medicare plans that he has in practice.recommended Senokot-S
PPLPMDL0020000001	Independence	OH	44131	10/27/2011	NON-PRESCRIBER- Handed Dr Jack sealed Butrans reprint & told him it might be of interest to him, although perhaps not since he has not gotten on board with Butrans yet. He asked me to not give up on him & said it just takes him "a long time" to prescribe "new" products. I told him Butrans has been out for over 9 months now. He said again not to give up, thanked me for the article, & walked away.
PPLPMDL0020000001	Brooklyn	OH	44144	10/27/2011	Spoke with Cheryl (pharmacist) & discussed Butrans & the ability for patients to take supplemental opioid or non-opioid analgesics. She said she does not know of any alert when scripts for both Butrans & supplemental analgesia come through for a patient. She said it does not surprise her that this is allowable because getting a long-acting opioid plus an immediate-release opioid for a patient is not unusual. Discussed dosing & titration. Reviewed savings cards for both products.
PPLPMDL0020000001	Parma	OH	44129	10/27/2011	TRIALIST- Dr Gigliotti said he is offering Butrans to patients but no one wants it. I told him this surprised me & he said it surprised him also. I asked him to tell me about the patients he is offering Butrans to. He said they are patients who are currently on Vicodin. He said also that patients express concern that it will be too expensive because it is a newer medication. Reviewed commercial insurance & savings cards & let him know Medicaid is paying for it currently. He said he would never prescribe it for a Medicaid patient because he believes all Medicaid patients should get generic medications. I gave him patient information booklets & he looked through it. Told him how he can utilize the booklets in his discussions with them about Butrans. He said it would be helpful & that he would do his best to get some scripts written for Butrans. Discussed titration ability after 72 hours to a maximum 20mcg dose. OxyContin broad formulary coverage messaging.
PPLPMDL0020000001	Cleveland	OH	44103	10/27/2011	dr said she's started a few patients on Butrans that had Caresource and didnt have a problem getting it approved so she's happy.i asked dr if she had more Caresource patients like this that she can start on Butrans,dr said yes,talked about dr continually starting patients on OxyContin that she feels are appropriate,dr said she is still starting a lot of patients on OxyContin.recommended Senokot-S
PPLPMDL0020000001	Cleveland Hts	OH	44118	10/27/2011	Quick call...I asked doc how butrans patients are doing. He said he has not heard any complaints. I let him know that butrans is being covered by caresource after failing on tramadol. He asked if I was sure. I told him that scripts are going through. He said he might be able to get more patients now. Nothing more learned.
PPLPMDL0020000001	Highland Heights	OH	44143	10/27/2011	Window call...I explained the BUP 3015 clinical trial and how 50% of patients on butrans showed a 30% or more improvement in pain scores. I asked him to review the trial. Offered more butrans and oxycontin savings cards.
PPLPMDL0020000001	Cleveland	OH	44111	10/28/2011	I asked her to reminded Dr about Butrans as an option when patients are not well controlled on low dose hydrocodone or oxycodone, and she agreed. We reviewed the Butrans and OxyContin savings cards and she is handing them out to the patients.
PPLPMDL0020000001	Garfield Hts	OH	44125	10/28/2011	Spoke with Brian (pharmacy manager) & inquired about Butrans stocking. He said they carry & move the 5 & 10mcg doses. Gave him an updated FPI & reviewed updates to pK profile. Also discussed appropriate patient type. I asked if he ever makes a recommendation to a physician on medication switches. He said occasionally & that it depends on the physician. Reviewed OxyContin savings cards which he said he has enough of.
PPLPMDL0020000001	Chagrin Falls	OH	44023	10/28/2011	Spoke with pharmacist, Anita, & gave her updated Butrans FPI. She confirmed stocking but said she has not dispensed any herself. Discussed appropriate patient type with her, focusing on patients who are not well-controlled on short-acting around-the-clock opioids who may be calling too soon for refills. Also showed section 2.4 & discussed supplemental analgesia in the form of opioid or non-opioid immediate-release medications. She said she would typically call the physician if she noticed any type of alert. Gave her savings cards for Butrans & OxyContin. She said they dispense a fair amount of OxyContin at this location.
PPLPMDL0020000001	Cleveland	OH	44109	10/28/2011	asked dr if he saw Butrans playing a role in his practice? dr said he keeps thinking Butrans is like Duragesic,just another patch,and its not covered on medicaid.showed dr Butrans visual aid,discussed appropriate patients and showed initiation guide so dr understood that i wasnt talking to dr about his Duragesic patients,dr said ok that made sense.we discussed Caresource patients trying Butrans,focused dr on BWC and commercial plan patients.I asked dr if he had 1-2 patients coming in today like we discussed that he could start on Butrans? dr said he would think about it and talk to a few patients about Butrans.told dr OxyContin is an option for patients and showed formulary grid.
PPLPMDL0020000001	Independence	OH	44131	10/28/2011	TRIALIST- I asked Deb about her experience with Butrans. She said she is really getting great results. I asked her what patient types she is using it in with success. She said she has been using it in patients who are taking multiple Vicodin per day. I asked her why not try it sooner, such as before going to Vicodin. She said this was a good point. She added that, since she is getting such good results with Butrans, she would almost prefer using it instead of getting patients started on Vicodin. I told her this was a great place to position Butrans & supported her statement. She said again that she would start using Butrans after tramadol, instead of starting patients on Vicodin. Deb added that she notices less sedation with Butrans than with Vicodin. I told her we do not have clinical data to support that. She said she knows that but that has been her clinical experience with it thus far. She also said she loves giving out patient information booklets & patients respond well to it. Offered her a DVD, which she accepted, saying, she would be interested in viewing it. She committed to continue to prescribe Butrans in talked to Rod,Pharmacist,about Butrans stocking and Rod said they havent seen any Rx for Butrans but he has 1 strength in stock that was autoshipped to Walmart in Jan.showed Rod 5 Butrans core selling messages,asked Rod what features of Butrans really stood out to him? Rod said dosing once every 7 days and the fact that Butrans is a patch some patients may prefer that.I asked Rod if he's recommended Butrans to any patients,Rod said he's given booklets out but thats it not much discussion with patients on Butrans.I asked Rod if he could continue giving patients Butrans patient info booklets,when they tell him their immediate release opioids arent controlling their pain? Rod said yes he will do that we discussed Butrans formulary coverage,focus on Caresourc,BWC and commrcial plan patients.we discussed appropriate patients for OxyContin and formulary coverage and Rod said no new Rx for OxyContin,same patients every month.recommended Senokot-S
PPLPMDL0020000001	CLEVELAND	OH	44109	10/28/2011	talked to dr about BUP3015,opioid experienced patients,asked dr if the data was clinically significant? dr said yes it is.i asked dr if it was clinically significant enough to prescribe Butrans? dr said yes,dr said he has some patients in mind to start on Butrans but keeps thinking Butrans isnt covered on medicaid and medicare. we talked about Caresource patients starting on Butrans,focused dr on BWC and commercial plan patients,dr said ok that makes a difference.we discussed initiation and titration of Butrans.i asked dr if he had a couple patients today that he could start on Butrans? dr said he might but will think about it today.we discussed appropriate patients for OxyContin and formulary coverage.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	10/28/2011	talked to dr about BUP3015,opioid experienced patients,asked dr if the data was clinically significant? dr said yes it is.i asked dr if it was clinically significant enough to prescribe Butrans? dr said yes,dr said he has some patients in mind to start on Butrans but keeps thinking Butrans isnt covered on medicaid and medicare. we talked about Caresource patients starting on Butrans,focused dr on BWC and commercial plan patients,dr said ok that makes a difference.we discussed initiation and titration of Butrans.i asked dr if he had a couple patients today that he could start on Butrans? dr said he might but will think about it today.we discussed appropriate patients for OxyContin and formulary coverage.recommended Senokot-S



PPLPMDL0020000001	Cleveland	OH	44102	10/28/2011	I talked to Vince, Pharmacist, who said that he's not seen any Rx for Butrans and won't order Butrans until that happens, we discussed importance of stocking and I showed Vince 5 Butrans core selling messages, asked Vince what features of Butrans stood out to him. Vince said he was surprised that Butrans is a long-acting opioid but is a CII, Vince said some doctors may like that they can call in refills of Butrans. Vince said once every 7 days dosing is another feature that stands out to him as some patients may prefer this dosing regimen. I asked Vince if he's given Butrans patient info booklets to any patients to speak with their doctors? Vince said he gave a couple out. I asked Vince to show patients the application/rotation section in Butrans patient info booklet and ask patients to discuss Butrans with their doctors if their immediate release opioids aren't controlling their pain. Vince said he will do that. I talked to Vince about BWC, commercial and Caresource patients for Butrans. We discussed appropriate patients for OxyContin and formulary coverage. recommended Senokot-S
PPLPMDL0020000001	South Russell	OH	44022	10/28/2011	NON-PRESCRIBER- Reviewed Butrans 5 core messages with Dr Kale & spent time going over appropriate patient type. Focused on patients who are not well-controlled on tramadol & asked if she would consider Butrans as an option for those patients. She said yes. She said it is easy to think of Butrans as a "big gun" because prior to Butrans, the only patch they could prescribe for pain was fentanyl, a CII. Discussed Butrans as a CII once weekly option, but advised that Butrans still carries abuse/addiction potential like other opioids. I asked where she could see herself prescribing Butrans & she said for her patients who had previously been on Darvocet. I agreed that those patients would be a good place to start if they were appropriate & met the Butrans indication of moderate to severe chronic pain. Also discussed OxyContin as an option for patients beyond Butrans 20mcg.
PPLPMDL0020000001	Chagrin Falls	OH	44022	10/28/2011	NON-PRESCRIBER- Quick call with Dr Hudson. Positioned Butrans for patients who are not well-controlled on tramadol or Vicodin (low-dose) around-the-clock for chronically painful conditions. She said she would keep it in mind & walked away.
PPLPMDL0020000001	Westlake	OH	44145	10/28/2011	I showed Dr the inclusion criteria, I asked if he treats these disease states in different ways. He said that it really just depends on the patient, their age and the severity of the disease, what they've tried before. We discussed Butrans as an option for these types of patients and I asked if he would prescribe Butrans for these patient types. He agreed.
PPLPMDL0020000001	Lyndhurst	OH	44124	10/28/2011	Spoketo Erin about the stocking and movement of butrans. She said they have both the 5 and 10mcg and maybe has filled it once or twice. I asked if she knew who the prescribers were. She could not remember. I asked if she has heard any feedback on butrans. She said no. She asked if it is like fentanyl. I told her we have no head to head data with fentanyl. I also explained that butrans can be prescribed first line as an opioid but we are talking to doc about prescribing butrans instead of going to hydrocodone ATC. She confirmed that they are getting a steady amount of oxycontin still and patients always seem to be able to afford it.
PPLPMDL0020000001	Independence	OH	44131	10/28/2011	NON-PRESCRIBER- Quick call as I caught Roman in the hallway. Positioned Butrans for patients not well-controlled on tramadol or low-dose Vicodin with commercial insurance. Also reminded him of savings cards. He said he will try to use it.
PPLPMDL0020000001	Cleveland	OH	44109	10/28/2011	dr said he's talked to a few patients about Butrans and given Butrans patient info booklets but has to wait to see them back. told dr that was great he talked to a few patients, asked dr if he's got a few patients coming in today that he can start on Butrans? dr said he might, will think about and if any patients say they want something else, he'll talk to patients about Butrans. focused dr on BWC, commercial and Caresource patients trying Butrans.
PPLPMDL0020000001	Cleveland	OH	44109	10/28/2011	worked pm&r dept - calls on dr harris, dr fox and dr jaffer
PPLPMDL0020000001	Lyndhurst	OH	44124	10/28/2011	Doc said she wrote 2 scripts last week...for new patients. She said they were started on 10mcg and were previously taking maybe a couple of tablets of vicodin. One patient she had double to 20mcg because the 10mcg was not enough. I explained that the FPI does not recommend the use of more than 1 patch at a time and certainly not to exceed 20mcg. She said she would likely prescribe butrans after tramadol. I told her that is exactly a good place to prescribe butrans. She said they are not enough patients to fit that category. I asked her if she has Caresource patients as butrans is seemingly being covered after tramadol. She said that was good to know.
PPLPMDL0020000001	Cleveland	OH	44135	10/28/2011	REminded her that a low dose of oxycontin might be appropriate after 20mcg of butrans.
PPLPMDL0020000001	Cleveland	OH	44113	10/28/2011	I asked Dr if his patients have been happy with Butrans. He said yes and he also heard a lot of feedback. I asked if he's been happy enough with Butrans that he will continue to start new patients. He said that he will. I reviewed the managed care for Butrans and the savings cards.
PPLPMDL0020000001	Cleveland	OH	44113	10/28/2011	dr said he started 3 patient on Butrans recently, told dr that was great and asked why he started that patient on Butrans? dr said patient wasn't controlled on vicodin and he wanted to try something different so he started patient on Butrans. discussed initiation and titration of Butrans, dr said he understands that. showed dr BUP3015, opioid experienced patients and asked dr if a 30% reduction in pain was clinically significant? dr said yes, but most patients want no pain. I asked dr if that happens with any of the immediate release opioids he prescribes? dr said no, patients might go from a 7 to a 5, on pain scale, but that's occasional not often. I asked dr if he found the Butrans clinical data results clinically significant enough for him to prescribe more Butrans? dr said yes he will start more patients. focused dr on BWC, commercial plan patients and discussed Caresource patients trying Butrans. dr started a Caresource patient right there as the patient had tried tramadol and was currently taking vicodin but not controlled. talked to dr and staff about Butrans patient info booklets, focused discussion on application/rotation and side effects of Butrans.
PPLPMDL0020000001	Cleveland	OH	44113	10/28/2011	I talked to dr about BUP3015, opioid experienced patients, clinical trial and asked dr if a 30% reduction in pain was clinically significant? dr said yes any % reduction in pain was significant. I asked dr if it was clinically significant enough to prescribe Butrans? dr said yes she will think of patients and talk to them about Butrans. we discussed initiation and titration of Butrans and focused dr on Caresource and commercial patients.
PPLPMDL0020000001	Cleveland	OH	44109	10/28/2011	showed dr BUP3015, opioid experienced patients, discussed 30% reduction in pain data and asked dr if this was clinically significant? dr said yes any reduction in pain is good. asked dr how often does he see a 30% reduction in pain, when patients are taking immediate release opioids? dr said rarely does he see that. I asked dr if it was clinically significant enough for dr to prescribe Butrans? dr said yes he will consider it but most of his patients are controlled on short-acting opioids. focused dr on initiation and titration of Butrans in visual aid, showed patient info booklet and focused dr on Caresource, BWC and commercial plan patients to start on Butrans.
PPLPMDL0020000001	Cleveland	OH	44113	10/28/2011	talked to dr about BUP3015, opioid experienced patients, clinical trial results and asked dr if the data was clinically significant? dr said yes a 30% reduction in pain is clinically significant. I asked dr if this reduction was clinically significant enough for dr to prescribe Butrans? dr said yes. dr said most of her patients are controlled on tramadol but she likes that Butrans is a patch and dosed once every 7 days. I asked dr if she has any patients coming in today that are taking tramadol but not controlled? dr said she might but would have to think about it. we talked about initiation and titration of Butrans and formulary coverage. I focused dr on Caresource and commercial
PPLPMDL0020000001	Mayfield Hts	OH	44124	10/28/2011	Quick call...Reminded doc of the Butrans indication and positioning, 7 day delivery and CII status. I asked him to prescribe Butrans after tramadol failures and let him know about Caresource covering butrans failing on tramadol as well as the commercial plans and BWC. He said he can't seem to remember. Gave him a titration guide and asked him to keep it in his pocket until he wrote 1 first script. No commitment.
PPLPMDL0020000001	Westlake	OH	44145	10/28/2011	Spoke with Jennifer, we reviewed the fact that Butrans can be used with opioid or non opioid supplemental analgesia. We reviewed the Butrans medication guide and how to teach patients about steady state, application and rotation. We reviewed the savings program for Butrans and OxyContin.
PPLPMDL0020000001	Lyndhurst	OH	44121	10/28/2011	Spoke to Bill about the stocking of butrans and oxycontin. He said he has the basic strengths (20,40, 80mg) of oxycontin stocked but had not seen any butrans scripts though he does have it in stock. I explained the positioning and the strengths. He asked about coverage as they get a lot of medicare. Explained the commercial insurance and the savings cards but no medicare. I asked him about his medicaid volume. He said they have more medicare and commercial. Gave him patient info guide and pointing out the proper application.
PPLPMDL0020000001	Cleveland	OH	44111	10/28/2011	I asked Dr what's the downside to trying Butrans, he said he just needs to find the right patient that is on lower doses of opioids so that it will be effective. I let him know that we'll find him the right patient and said he would probably be seeing a patient on low dose hydrocodone of oxycodone whose pain is not well controlled. I asked if he would start a patient like this and he agreed. Reminded that OxyContin is an option for those patients on higher doses of opioids. He said he is still starting new patients.
PPLPMDL0020000001	Lyndhurst	OH	44124	10/28/2011	I reminded doc of the Butrans indication and positioning. I asked him if he has patients taking tramadol daily for ATC pain. He said maybe. I reviewed the starting dose (10mcg) for tramadol failures and the coverage for commercial patients. He asked about medicaid. I explained that Caresource is reportedly covering butrans after tramadol/codeine/vicodin. He said he might try it then. Gave him a BUP3015 clinical trial and formulary grid.
PPLPMDL0020000001	Cleveland	OH	44135	10/28/2011	Spoke with Lisa, we discussed that Butrans can be used with opioid or non opioid supplemental analgesia, proper application and rotation, and steady state in three days. She will hand the medication guides out to the patients. I reviewed the conversation guide for OxyContin and she said they still have a handful of patients on OxyContin but not as many as they use to.
PPLPMDL0020000001	Independence	OH	44131	10/28/2011	NON-PRESCRIBER- Spoke with Jill (MA) who said Dr Pai was not in the office. Updated her on Butrans managed care, letting her know that Medicaid plans are paying for Butrans currently. She said she would try to remember to tell him but suggested I return next week to try to catch him myself. Also reminded her of savings cards, reminding her that they are for cash-pay or commercially insured patients only.
PPLPMDL0020000001	Chagrin Falls	OH	44022	10/28/2011	REPEAT CUSTOMER- Dr Rood said he still has two patients on Butrans. I asked how they report the pain relief they are receiving. He said they both say they are getting good relief. He also said that he received correspondence from Purdue regarding his patient who had a missing patch from their carton of Butrans (reported last call). He said he was pleased to learn that this had actually been a manufacturing problem, which means his patient was telling the truth. He said he appreciated the company's attention. I told him Purdue is committed to safety & that is why we report incidences such as that. I showed him BUP3015 efficacy data. I asked him if almost half of patients who were at a 10 on the pain scale came back on Butrans reporting a decrease to a 7 if he would find that to be clinically meaningful. He said those results would actually be somewhat disappointing. He then added that someone going from a 7 to a 4 would seem more "impressive". Discussed appropriate range of patients & OxyContin as an option for patients beyond Butrans. He said he has thought of Butrans as an option for some other patients but he always exhausts every other treatment avenue before resorting to anything narcotic. I asked him if he would use Butrans as the medication of choice if/when he does find that an opioid is warranted & I asked HCP what she remembers about butrans. She recalled that it is a once a week patch for moderate pain. She said she has not prescribed it yet because she is not really sure who is appropriate. When she thinks to use it, the patient may not have the right coverage. I explained to her the commercial plan and recent Caresource after tramadol failures. I reminded her to prescribe butrans after max doses of tramadol and they should likely start on the 10mcg/hr.
PPLPMDL0020000001	Mayfield Heights	OH	44124	10/28/2011	Prospect. Doc said he just did a grand rounds talk at St. Elizabeth where he discussed various opioid options which included butrans. He said he had gone online to learn more about butrans. So I asked him where he would use butrans in his practice. He said maybe for moderate pain - after vicodin or percocet. I told him after tramadol but before going to hydrocodone ATC. He said that makes sense. He asked how long butrans takes to work. I told him that measurable blood levels are seen after 17hrs and that steady state is reached in 72 hours but that does not necessarily suggest analgesic effect. I reviewed the coverage and the savings cards and that Caresource is reportedly covering butrans now. I explained that a low dose of oxycontin may be appropriate. He said he would try to start more patients on butrans.
PPLPMDL0020000001	Cleveland	OH	44130	10/31/2011	TRIALIST- Dr Diab said he had no time today. I asked him about his comfort level with Butrans at this point, now having some experience. He said he is "getting there" with it & started to walk away. I let him know that insurance coverage is improving & that Medicaid plans are currently paying for Butrans. He said that was good & walked into a room. Went through Initiations case study "Evelyn" with Barb, nurse.
PPLPMDL0020000001	Parma	OH	44129	10/31/2011	NON-PRESCRIBER- Quick call- Caught Dr Kushnar at the window. Positioned Butrans for patients not well-controlled on tramadol around-the-clock. She pointed out the savings cards on her table, thanked me, & walked away to take a phone call. Spoke with Natalie, MA, & discussed further the appropriate patient type & range for Butrans. Also discussed patient information booklets.
PPLPMDL0020000001	Beachwood	OH	44122	10/31/2011	NON-PRESCRIBER- Spoke with Donnie, Dr Warren's nurse, who said Dr Warren had to go to the hospital to see patients & was not in. I reviewed Butrans overview with him & asked him why he thinks Dr Warren has not started prescribing Butrans. He said he is not sure & that he does think he has patients who fit the description of the appropriate patient type. He said he would do his best to remind Dr Warren when he identifies a patient.
PPLPMDL0020000001	Parma	OH	44129	10/31/2011	Reviewed OxyContin formulary information.
PPLPMDL0020000001					Spoke with Stan & Kevin (clinical coordinator, manager). They said Butrans is in the process of being reviewed by the necessary committees for formulary inclusion & it still has one committee left to go through before becoming official. Kevin said Butrans will likely be added, but only for patients who come in already on it, not for new patients. I asked why the stipulation was in place. He & Stan said it was the decision of the physicians who discussed/reviewed it. I asked if they knew what their reasoning was for that but they said because it is a private meeting they did not know. Kevin added that he finds it confusing & that he is not sure how that would even be enforced. Stan said when the hospice discussion came up, they elected to stay with the fentanyl patch. Discussed appropriate patient type/range. Stan said that most hospice patients need pain relief acutely & are in more severe pain than the Butrans range. Spoke with pharmacy staff & reviewed core messages, application, steady state, titration after 3 days to a max 20mcg dose, CII/abuse/addiction potential, & disposal. Stan asked for savings cards so that they can be given to patients who are prescribed Butrans & then discharged. He asked how much buprenorphine is left in the patch after 7 days & if applying a cold pack to the patch has any effect on release.
PPLPMDL0020000001					Told him I had no data on either question & submitted MIRF. Discussed range of patients & OxyContin q12h for patients beyond Butrans range.

PPLPMDL0020000001	Cleveland	OH	44114	10/31/2011	John,pA,said they are continually starting patients on Butrans.John said he's got some Caresource patients coming in this week so he's going to start them on Butrans and see if it gets approved,we talked about appropriate patients I showed John BUP 3015,opioid experienced patients and discussed 30% reduction in pain,John said any reduction in pain is a good thing and they are seeing good results from Butrans with their patients so no complaints so far,John said Medicaid not approving butrans has been biggest challenge but he's going to see what happens with Caresource as that would help them start more patients on Butrans.we discussed initiation and titration of Butrans and I showed John Butrans patient info booklet and asked him to focus patient discussion on application/rotation of Butrans with patients,John said he does that and will give booklets to
PPLPMDL0020000001	Parma	OH	44129	10/31/2011	Spoke with pharmacist, Linda & inquired about stocking of Butrans. She said she had ordered the 5mcg when it first came out, but since they had not dispensed any, she had to send it back per corporate rules. Gave her an updated FPI & reviewed change to pK profile. Also showed 2.4 & discussed ability to take supplemental analgesia with Butrans. She said she did not know about that. I asked how often she sees chronic tramadol or Vicodin prescriptions. She said rarely. I told her this may explain why she has not seen Butrans activity & discussed appropriate patient type & range. She said she would happily order Butrans if a legitimate patient came in with a prescription. Discussed OxyContin q12h.
PPLPMDL0020000001	Cleveland	OH	44102	10/31/2011	talked to Vicki,Pharmacy Mgr,about Butrans 5 core selling messages,Vicki said she's not seen any Rx for Butrans but once she does she'll order Butrans.Vicki said there was 1 Rx for Butrans early in year,but nothing after that.we talked about 5 core selling messages and what features of Butrans stood out,Vicki said she likes that Butrans is a patch and dosed once a week and said that some patients may like that option.I showed Vicki Butrans patient info booklet and asked if she would give these to patients to speak with their HCP's if they aren't controlled on short-acting opioids.Vicki said she'll do that. We discussed formulary coverage for Butrans,discussed appropriate patients for OxyContin with Vicki,showed conversion guide and discussed formulary coverage.Vicki said most of the OxyContin Rx haven't been new Rx,same patients coming to them every month,more new Rx for Opana ER.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	10/31/2011	talked to dr about BUP3015,opioid experienced patients,asked dr if 30% reduction in pain was clinically significant? dr said 30% reduction is clinically significant and good results from a pain medication.i asked dr if that's what he sees now with immediate release opioids? dr said no patients leave him and have the same pain or worse even though they are taking their immediate release opioids daily.i asked dr if he had a couple patients this week,that he could start on Butrans,similar to patients we discussed in BUP3015 inclusion criteria? dr said yes he does and will talk to some patients this week.we discussed Caresource patients and commercial plan patients trying Butrans.recommended Senokot-S
PPLPMDL0020000001	Parma	OH	44134	10/31/2011	Spoke with Nate, pharmacist, & gave him a new Butrans FPI. Showed him updated pK profile & also drew his attention to section 2.4 & discussed ability to take supplemental analgesia in form of opioid or non-opioid medications. Nate said he was aware of that detail. He said he stocks all strengths. He did not need any OxyContin savings cards.
PPLPMDL0020000001	Lakewood	OH	44107	10/31/2011	Spoke with Cindy, we discussed the medication guide for Butrans and she agreed to hand them out with scripts. We discussed that Butrans is a CIII and can be refilled and that Butrans can be used with opioid or non opioid supplemental analgesia. Reminder that both Butrans and OxyContin have savings programs.
PPLPMDL0020000001	Cleveland	OH	44106	10/31/2011	talked to dr about BUP3015,opioid experienced patients,asked dr if 30% reduction in pain was clinically significant? dr said yes,dr said he's not really prescribing a lot of narcotics as he does more procedures but likes the idea of Butrans being a patch and dosing once a week could be appealing to some patients.I asked dr if the reduction was clinically significant enough for him to prescribe Butrans? dr said yes he'll think about some patients and try Butrans.dr asked about Medicaid coverage,we discussed Caresource patients trying Butrans and I focused dr on Commercial plan patients. recommended Senokot-S
PPLPMDL0020000001	Lakewood	OH	44107	10/31/2011	Quick follow up. I asked if he had seen any patients like the ones we talked about last time, taking tramadol or low dose vicodin around the clock who would be appropriate for Butrans. He said he had a patient in mind he was going to start. I asked if there is anything else holding him back from prescribing Butrans more often and he said no, he just needs to remember it. I reviewed the managed care for Butrans and OxyContin.
PPLPMDL0020000001	Cleveland	OH	44114	10/31/2011	talked to dr about his patients that he's starting on Butrans,majority are his percoct patients and dr said he's continually starting more patients on Butrans and they seem to be doing well on Butrans.showed dr BUP3015,discussed opioid experienced patients,clinical trial data and asked dr if 30% reduction in pain was clinically significant? dr said yes any reduction in pain is good.I asked dr if he had patients taking hydrocodone combo's that aren't controlled and he could start them on Butrans? dr said probably so,he'll think about it and talk to some patients about Butrans.focused dr on BWC,commercial and we discussed Caresource patients trying Butrans
PPLPMDL0020000001	Lakewood	OH	44107	10/31/2011	Dr said that he has a couple of patients on Butrans and they have been doing well. I asked if he has been happy enough with Butrans that he will continue to prescribe for new patients he said yes. I asked where he sees Butrans fitting in and he said for patients taking vicodin or percoct, before trying another long acting. I reviewed the invitation guide and asked if he would start a new patient like this on the 10mcg Butrans this week and he agreed. He said he does still have a handful of patients on OxyContin and they are also doing well.
PPLPMDL0020000001	Lakewood	OH	44107	10/31/2011	Quick call at window, I reviewed the managed care for Butrans and the possibility of managed Medicaid plans paying for Butrans. He said that he sees a lot of these patients and it gives him a much better chance to get Butrans covered. I asked if he would write a few scripts for Butrans and let me know what goes through on managed care and he agreed.
PPLPMDL0020000001	Cleveland	OH	44113	10/31/2011	asked dr what patients say in exam room that makes him think of Butrans? dr said if patients ask for something different then he'll talk about Butrans.i asked dr if he will start a few patients this week that are appropriate for Butrans,showed pg.11 visual aid inclusion criteria,dr said he will and he's considering more patients to start on Butrans as BWC wants doctors to consider other opioid options for chronic pain conditions,than immediate release opioids.dr said he gave a couple patients Butrans patient info booklets,after our lunch last thursday,to review and think about starting Butrans and he's following up with them in a few weeks. focused dr on BWC
PPLPMDL0020000001	Cleveland	OH	44144	10/31/2011	NON-PRESCRIBER- Quick window call- Positioned Butrans, a once weekly transdermal system for moderate to severe chronic pain, for patients who are not well-controlled on short-acting around-the-clock opioids. Dr Paul thanked me & walked away. Spoke with Carol & Wendy & reviewed Butrans formulary grid.
PPLPMDL0020000001	Lakewood	OH	44107	10/31/2011	I showed the Butrans demo and carton and reminded her this is what the patients get when she prescribes Butrans. I asked if she would continue to write Butrans for patients on tramadol or low dose vicodin whose pain is not well controlled and she said she would if they can afford it. I reviewed the managed care and saving program for Butrans and that OxyContin may also be an option with good managed care coverage.
PPLPMDL0020000001	Westlake	OH	44145	10/31/2011	Dr said that he is still trying to find the right patient for Butrans. I told him not to worry and we will find him the right patients. I told him he will probably have a patient come in this week with back pain where tramadol or low dose vicodin is no longer controlling their pain. I asked if he would write for Butrans for this patient and he agreed. I reviewed the initiation guide and when the 10mcg Butrans would be the starting dose.
PPLPMDL0020000001	Parma	OH	44129	10/31/2011	NON-PRESCRIBER- Dr Taylor said she wrote her first Butrans prescription today. I asked her to tell me about the patient. She said it was a female patient with back pain who was taking Vicodin ES 3 times per day. Dr Taylor said the patient had BWC coverage & that she started her on the 10mcg dose. I told her it sounded like she did exactly what she should have. She said she will let me know once she has feedback from the patient.
PPLPMDL0020000001	Cleveland	OH	44113	10/31/2011	dr said he started a couple patients last week,after our lunch,that were taking hydrocodone and not controlled,we discussed initiation of Butrans,titration and I asked dr if he has more patients like the one's he started last week,to start on Butrans? dr said yes he has more patients and will do his best to keep talking to patients about Butrans.focused dr on commercial plan patients and Caresource patients trying Butrans.recommended Senokot-
PPLPMDL0020000001	Cleveland	OH	44106	10/31/2011	I asked dr when treating patients with pain conditions,pg.11 visual aid,how does she consider a long-acting opioid appropriate? dr said that's the last resort.dr said she treats patients with immediate release opioids first,with physical therapy,exercise, then will look at procedures for patients and if all that fails,then she'll consider a long-acting opioid.we discussed Butrans 5 core selling messages and I asked dr if she saw clinical benefits in Butrans? dr said yes she likes that Butrans is a patch and dosed once every 7 days as some patients may like that,dr said she'll think about it and will talk to some patients.dr asked about Medicaid coverage,we discussed Caresource and commercial plan patients trying Butrans.we discussed initiation and titration of Butrans and giving patients Butrans patient info booklets to educate them on Butrans,dr said she will give them to patients. recommended
PPLPMDL0020000001	Lakewood	OH	44107	10/31/2011	Quick call with Joe, I asked if he consults with new patients and he said not very often unless the have questions and ask for him. I reviewed the Butrans can be called in since it is a CIII and refilled. I showed the FPI and that Butrans can be used with opioid or non opioid supplemental analgesia.
PPLPMDL0020000001	Cleveland	OH	44106	10/31/2011	dr said he's talked to a few patients about Butrans but some patients don't want to wear a patch.we talked about dr still giving patients immediate release opioids with Butrans,showed fpi maintenance of therapy section,dr said ok he'll remember that next time.i asked dr what clinical benefits he saw in Butrans? dr said its another opioid but he likes that its a patch he just keeps forgetting about Butrans.i asked dr if he walks in exam rooms and patients tell him their tramadol isn't controlling their pain,how does he respond? dr said he'll usually give a refill of tramadol unless patients asking for something else.i asked dr to start a couple patients on Butrans,instead of refilling tramadol? dr said he will do that and said i just have to keep reminding him.talked to dr about Caresource patients trying Butrans and commercial plan patients.we discussed OxyContin being an option for those patients who are ready for a long-acting opioid but not wanting to wear a patch like Butrans,dr has option of OxyContin,dr said he knows about OxyContin and writes a lot of OxyContin,updated dr on OxyContin formulary coverage,dr said ok and thanked me for info.recommended Senokot-S
PPLPMDL0020000001	Parma	OH	44129	10/31/2011	Spoke with MA Cindy who said Dr Ortega was not in today. Discussed patient information booklets & answering patient questions about application & disposal of Butrans. She said she would try to pay better attention to giving out the booklets. Also discussed patient savings programs for Butrans & OxyContin. She did not need any savings cards.
PPLPMDL0020000001	Richmond Heights	OH	44143	10/31/2011	I discussed the butrans indication and selling messages and asked doc if she sees any merit to a product like butrans. She said of course but the problem is the coverage (as she viewed the formulary grid). She asked if we had coupons. I confirmed that we do have savings cards which can bring cost down to near a tier II co-pay. I told her that Caresource is also covering butrans after failing tramadol/vicodin. She asked about Medicare. Told her no coverage there. She said that's a problem. I asked her to try one patient on butrans if 100% of her practice is not Medicare. She accepted savings cards. Reminded her of the oxycontin patient and the savings cards there.
PPLPMDL0020000001	Cleveland	OH	44106	10/31/2011	asked dr how he decides if patients will get a refill of short-acting opioid or convert to a long-acting opioid.dr said if he's maxed the patients out on the dosage strengths and monthly amount,then he'll consider a long-acting opioid.showed dr Butrans visual aid,discussed 5 core selling messages and asked dr what features of Butrans stood out to him? dr said he likes that Butrans is a patch and likes the once every 7 days dosing but doesn't think all patients will want to wear a patch.I told dr that was correct,not every patient would want to try Butrans but I asked dr if he could think of a few patients this week that are taking immediate release opioids but not controlled and start them on Butrans? dr said he'll think about it but he doesn't have a lot of patients on narcotics.dr asked about insurance coverage for Medicaid patients,we discussed Caresource patients trying Butrans and focused dr on commercial plan patients.recommended Senokot-S
PPLPMDL0020000001	Waterford	OH	45786	11/1/2011	W - Miral said that she has followed up with a couple of Dr. Water's patients who are on Butrans and the patients seem to have good pain control. She likes having the option of Butrans as a CIII and will try and remember for patients who have been on short acting for a long time who could benefit from the long acting Butrans. I - Discussion of Butrans opioid experienced clinical trial. Discussion of the inclusion criteria discussing the patient conditions as well as the previous history of medication of the patients. Discussion of the reduction in pain scores the patients reported and experienced with Butrans. Review of formulary coverage and savings card program W - Waters has a few patients on Butrans. He likes that it is 7 days of coverage and the CIII scheduling is appealing because his NPs can write for it as well as his nurse has the ability to call it in to the pharmacy. He will continue to prescribe when appropriate and likes that the medication population may have access to Butrans as an option. I - Discussion of Butrans opioid experienced clinical trial. Discussion of the inclusion criteria discussing the patient conditions as well as the previous history of medication of the patients. Discussion of the reduction in pain scores the patients reported and experienced with Butrans. Review of formulary coverage and savings card program eligibility.
PPLPMDL0020000001	Waterford	OH	45786	11/1/2011	W - Vickie said that she hasn't written for Butrans since she tried to do so for the patient that was in the nursing home. The patient was able to have one month of Butrans therapy and really liked it, but unfortunately had to switch to something else because she had Med Part D coverage. I - Discussion of Butrans opioid experienced clinical trial. Discussion of the inclusion criteria discussing the patient conditions as well as the previous history of medication of the patients. Discussion of the reduction in pain scores the patients reported and experienced with Butrans. Review of formulary coverage - limited access with Med Part D plans at this time and savings card program eligibility.
PPLPMDL0020000001	Westlake	OH	44145	11/1/2011	Spoke with Tom, we reviewed the key messages for Butrans and appropriate patient types. I reviewed that Butrans can be prescribed with opioid or non-opioid supplemental analgesia. We discussed the savings cards and managed care for both Butrans and OxyContin.

PPLPMDL0020000001	Garfield Heights	OH	44125	11/1/2011	NON-PRESCRIBER- Reviewed Butrans 5 core messages with Dalbir & discussed appropriate patient type & range, focusing on patients who are not well-controlled on tramadol or Vicodin around-the-clock. I asked if he sees patients fitting that description in his practice. He said daily. Showed initiation guide & discussed starting doses for those patients. Also discussed CIII, abuse/addiction potential, titration after 3 days & supplemental analgesia. Discussed managed care coverage & savings cards for those eligible. Gave him patient information booklets & discussed offering Butrans to patients who are taking short-acting opioids as an option for switching. Dalbir said he would offer Butrans to patients fitting the appropriate patient type as he thinks it is a good option to give them. He said patients may not be aware that it is available, so he would utilize the patient information guides to educate them & would prescribe Butrans if the patient was interested.
	Parma	OH	44129	11/1/2011	NON-PRESCRIBER- Introduced myself & Purdue's products to Dr Jugulion. Delivered Butrans 5 core messages & alerted him to box warning. I asked if he treated patients with chronic opioids in his practice. He said sometimes. Spent time going over Butrans appropriate patient type/range & discussed OxyContin as an option for patients beyond Butrans. I asked what he typically uses for chronic pain patients. He said it depends. He said usually he will prescribe anti-inflammatories, but if someone comes to him already on opioids, he feels that patient would not switch to anything else because they are "hooked". I asked what he does for patients who are no longer controlled on anti-inflammatories. He said that is when he would prescribe an opioid. Positioned Butrans for those appropriate patients. He said he could see himself using some Butrans, but not a lot as he does try to avoid opioid therapy when possible. Discussed using a pain contract as well as OARRS. He said he does use OARRS but does not use a pain contract. Reviewed formulary grid & discussed savings cards for eligible patients. He said he has many elderly patients. Asked him to focus on commercial insurance patients with Butrans for now. Also asked him if he still holds an active VT state license. He said he does. I asked if he ever practices there & he said never. He signed necessary letter to fax to home office.
PPLPMDL0020000001	Parma	OH	44129	11/1/2011	NON-PRESCRIBER- Re-introduced Butrans to Dr Moysaenko, delivering 5 core messages. I reminded him of previous conversation when he told me he has a lot of Medicare patients. I asked how much of his practice is Medicare. He said 99%. (This is not consistent with managed care data). I asked if he has any working patients on opioids. He said yes & that he does have some patients who he can think of who could use Butrans but they are "sweaty construction workers, so it won't work". I asked him to clarify. He said the patch would not stay on. I told him this is a possibility but the patch is designed to stay on for a full 7 days. Also let him know Butrans can be covered with Blocusive or Tegaderm if necessary. Discussed appropriate patient type/range & discussed OxyContin as an option for patients beyond Butrans. Also discussed 7 available tablet strengths. He said he usually just increases the dosing interval to q8h. I told him OxyContin is approved only for q12h dosing. He said he knows. I asked him to consider an intermediate dose of OxyContin instead of increasing the dosing interval. He agreed. He said he likes that Butrans gives him another option for patients who need around-the-clock pain control. Discussed Butrans as a CIII opioid & abuse/addiction potential.
PPLPMDL0020000001	Richmond Heights	OH	44143	11/1/2011	Prospect. I reviewed the selling messages of butrans and asked if doc would likely use in opioid naive or opioid experienced. He said he definitely not use for opioid naive patients. I discussed the initiation dosing of 10mcg if he were to go to butrans after tramadol failures. I shared the results of the BUP3015 and asked for his thoughts. He said the problem with such new products as affordability. I reviewed the coverage, savings cards and caresource. He asked about the diversion potential. I explained to him that Butrans is still a scheduled narcotic and has the risks similar to other narcotics. He also wanted to know how quickly butrans starts to work. I told him the measurable amounts are found in the bloodstream after 17 hrs but steady state is reached in 72hrs. I asked him if he would try butrans for an appropriate patient. He said he would still like to know more. I gave him an engage invite to log onto. I discussed the oxycontin indication and dosing. He said he is not writing oxycontin.<font color=blue><b>CHUDAKOB's query on 11/12/2011</b></font>Charmaine, his question was about onset of action, and measurable blood levels or steady state do not relate to onset of action and by stating this as the answer to the question, there is an implication that this is when Butrans will start working. While the information you told him is correct, you should answer this type of question by simply stating we have no onset of analgesia data.<font color=green><b>SIMERTOC's response on 11/14/2011</b></font>I understand now. I asked you about this just as you had sent us a voicemail regarding this.<font color=blue><b>CHUDAKOB added notes on 11/17/2011</b></font>OK. Thanks!
PPLPMDL0020000001	Parma	OH	44134	11/1/2011	Spoke with pharmacist Marko & gave him updated Butrans FPI, pointing out the change to the pk profile. Also discussed ability for patients to take supplemental analgesia in opioid or non-opioid form while on Butrans. I asked if he is aware of any type of alert that would come up if the two were prescribed together. He said he is not, but he could see how that would come up as what he called a "soft alert". He added that because buprenorphine is also used in the treatment of drug addiction, if it is prescribed with an opioid, it could activate an alert. Discussed appropriate patient type. Marko said he wishes physicians would start prescribing Butrans more. He did not need additional OxyContin savings cards.
PPLPMDL0020000001	Westlake	OH	44145	11/1/2011	Quick call as Dr came in an hour late. I asked if he's been happy with the results he's getting with Butrans. He is and said he will continue to start new patients. I asked if he would write for Butrans today and he said he will.
PPLPMDL0020000001	Cleveland	OH	44104	11/1/2011	talked to dr about BUP3015,opioid experienced patients,showed clinical reduction page and asked dr if a 30% reduction in pain was clinically significant? dr said yes but she really doesnt have many patients taking narcotics for chronic pain.dr said she likes that Butrans is a patch and dosed once a week as some patients may like that but at this time she doesnt see a place for Butrans in her practice.talked to dr about commercial plan patients and caresource patients trying Butrans and asked dr if she comes across 1-2 patients with 1 of these pain conditions.pg.11 visual aid, that arent controlled on short-acting opioids,will she start them on Butrans? dr said yes she'll consider Butrans an option when appropriate.
PPLPMDL0020000001	Cleveland	OH	44124	11/1/2011	Prospect...I ask doc if he sees a place for a product like butrans in his practice - a long acting CIII for moderate to severe chronic pain. He said there are already too many narcotics on the market. He suggested a talk to his nurses about it and they will be in on Wednesdays. Gave a oxycontin formulary grid.
PPLPMDL0020000001	Cleveland	OH	44195	11/1/2011	worked rheumatology dept-left Butrans fpi,initiation guide,formulary grid,ENGAGE invitation,patient info booklet and my business card for dr chatterjee,dr long,patty paczos,pa,dr calabrese,betsy kirschner,np,as i couldnt see any of these HCP's. worked aneseth/pain dept-left dr covington and dr mathews same info as above.
PPLPMDL0020000001	Lakewood	OH	44107	11/1/2011	I asked Dr if he has had success with the couple patients he had started on Butrans. He agreed. I reviewed managed care for Butrans as well as OxyContin.
PPLPMDL0020000001	Stow	OH	44224	11/1/2011	Dr popped in between surgeries and said what do I have. I said I have Butrans once a week for you patients with moderate chronic pain to Oxycontin for your patients who are in moderate to severe chronic pain. I let him know that medicaid is paying for Butrans.HE said good stuff, had to go
PPLPMDL0020000001	Cleveland	OH	44125	11/1/2011	Spoke with Christine (pharmacist) & discussed ability for patients to take supplemental analgesia while on Butrans. She said she has not seen any prescriptions for Butrans in a long time. I asked if she fills a lot of chronic Vicodin or tramadol prescriptions. She said yes. I told her those are potential Butrans patients & discussed patients calling too soon for refills of short-acting opioids because of inadequate analgesia. She said this is common as well. I asked if she ever makes a recommendation to physicians or patients regarding a switch in their medication. She said sometimes. I showed her patient information booklets & asked her to give them to patients who she thinks could benefit from a once weekly transdermal system for their pain. She agreed to do this. She did not need any OxyContin savings cards.
PPLPMDL0020000001	Westlake	OH	44145	11/1/2011	I asked Dr if he has been happy with the results he's been seeing with Butrans, he said yes. I asked if he would continue to start new patients and he said he is and he will continue. We reviewed the managed care for Butrans and managed Medicaid coverage. I reviewed that OxyContin also have very good coverage. I spoke with Tina and reviewed the medication guide and savings cards for Butrans and we discussed the managed care grids for Butrans and OxyContin. Tina found the formulary grids to be helpful.
PPLPMDL0020000001	Mayfield Heights	OH	44124	11/1/2011	Prospect. I asked doc if he had a moment to learn about butrans, a 7 day CIII analgesic. He said I could leave him some information to read as he is not interested right now. Provided a BUP3015, formulary grid and engage invite. Nothing learned.
PPLPMDL0020000001	Stow	OH	44224	11/1/2011	Sharon said she has not seen the right patient, I said that is ok, I can help her find that patient, she said she is really backed up and was going to just take her food, she knows where to write it in. I said I wanted to let her know that medicaid is paying for Butrans and she said ok
PPLPMDL0020000001	Solon	OH	44139	11/1/2011	Introduced Alan to Jill and Tony in Rebates. They made us aware they'll be rolling out new Plan ID numbers to make them more consistent which have to be approved by CMS first. They'll begin sending out this in the 4QTR12 thru Jan 2013. Jill also wants to understand more about the reasons claims are denied so I asked her if she reviewed our information yet but she hadn't. Tony just received the reconciliation report in hard copy but said they prefer it in CD form to make it easier to find what they're looking for in a spreadsheet.
PPLPMDL0020000001	Westlake	OH	44145	11/1/2011	I saw Dr at window, I asked if she has been happy with the results she has seen with Butrans that she will continue to start new patients. She said the feedback has been good. I reviewed the managed care for Butrans and managed Medicaid. I reviewed that OxyContin is covered on most managed care.
PPLPMDL0020000001	Lakewood	OH	44107	11/1/2011	I followed up with Dr about the prescription solution patient who could not get Butrans. I reviewed where Butrans is covered and he said OK. I asked if he was still willing to give Butrans a try and he said he will. I reminded him that OxyContin has good coverage as well and can be another long acting option.
PPLPMDL0020000001	Mayfield Hts	OH	44094	11/1/2011	Window call.....I gave doc a copy of BUP 3015 and asked him to review as I think he might have patients to benefit from a 7 day CIII analgesic. I told him I have scheduled lunch for 11/14. He said we can discuss then.
PPLPMDL0020000001	Stow	OH	44224	11/1/2011	Sandra said she has not written Butrans, I said to her she has seen the benefit and said it was something she would write and I said is there anything that is preventing her from writing and she said it is being covered. I said in commercial plans, it is 3 rd tier with the savings cards patients will pay as low as \$15 on average, it may be more and that Medicaid is paying for it and she said that is huge. She said she will look for patients, she had to go
PPLPMDL0020000001	Cleveland Hts	OH	44118	11/1/2011	Prospect. Quick call....I discussed the positioning of butrans and oxycontin, provided him a formulary grid for both. Nothing learned.
PPLPMDL0020000001	Cleveland	OH	44130	11/1/2011	TRIALIST- Dr Fedorko said he just saw a patient who needed treatment for low back pain. I asked if it was a patient who was appropriate for Butrans. He said not yet. He said the patient needed only anti-inflammatory medication, so that is what he prescribed. I asked what he will do if that patient says that did not control his back pain. He said then he will prescribe Butrans for that patient. I told him that sounded like a good plan.
PPLPMDL0020000001	Cleveland	OH	44104	11/1/2011	dr said she started 1 patient on Butrans,2 wks ago,patient said last week that Butrans wasnt working.dr said she started this patient before she left office for 2 weeks because this patient read the Butrans patient info booklet,was interested in trying Butrans so dr started patient on Butrans 5mcg.i asked dr what dose of short-acting opioids was patient taking? dr said patient was taking 300mg tramadol/daily.i showed dr Butrans initiation guide,discussed Butrans 10mcg as the initiating dosage strength for that patient and then titrating to 20mcg if necessary.dr said she forgot and must have been confused.dr said patient was titrated to 10mcg last week but still in pain.dr said she'll call in the Butrans 20mcg after our discussion,for this patient and see if that works for her.asked dr about her patients taking percocet daily for their chronic pain conditions,showed pg.11 visual aid,how does Butrans fit into her algorithm for them? dr said percocet patients love their pills and dont want to stop taking their pills.i told dr she could still start patients on Butrans and give percocet for breakthrough pain,showed FPI section 2.4 maintenance of therapy.dr said ok that's something she could do is just cut down how much short-acting opioid patients get with Butrans.i asked dr if she could think of a couple commercial and Caresource patients,per our discussion,to start on Butrans? dr said yes she will do that and said that made sense to her.
PPLPMDL0020000001	Cleveland	OH	44113	11/1/2011	dr said he's not started any patients on Butrans but he's got some patients in mind,i showed dr Butrans visual aid discussed pain conditions with dr and asked if dr treats these conditions? dr said yes he does.i talked to dr about starting a couple patients on Butrans that are taking immediate release opioids but not controlled,discussed initiation and titration of Butrans and focused dr on commercial plan patients and caresource patients trying Butrans.dr said ok he will think about patients coming in this week.recommended Senokot.5
PPLPMDL0020000001	Parma	OH	44134	11/1/2011	LOYALIST- I asked Dr Hernandez how long he typically expects a patient to be on Butrans when he initially prescribes it for someone. He said forever. He added that usually the patient has a condition that is not expected to improve on its own, so unless the patient says it is not working anymore, he keeps them on it forever. He also told me that he titrated the female patient he has been telling me about that he put on Butrans to a 20mcg system. He said she started at the 5mcg patch & then titrated to the 10 & is now doing well on the 20mcg system. He said she is happy with her results. Discussed OxyContin as an option for patients beyond Butrans.

PPLPMDL0020000001	Cleveland	OH	44114	11/1/2011	Introduced myself to Dr.Eschelman, who came from the field as a practicing physician. He has 27 yrs of experience in Peds, Occupational Therapy and ? in the CLE area. His new role includes traveling from Toledo to Youngstown/Akron and working with employer groups, providers at hospitals as well as case managers in the hospitals. There are 6 telephonic RNs and 2 onsite at UH and Parma/SW. He speaks with them frequently especially on webinars. I provided product updates to Butrans with the FPI and initiation/titration guide. He was unfamiliar with it. I also discussed the re-formulation of OxyContin and gave an FPI. He's interested in pain resources for internal and external customers. He even attends some health fairs with large employer groups. He liked the How to Protect Your Meds and Safeguard my meds brochure for the employers and Case Managers. He's also interested in the reviewing the MLs and LELes topics for a possible webinar. I provided the Med Ed catalog for online CEs. I then spoke with the secretary who said Gina Sheradon is person the Medical Directors for UHC Evercare report to. Tony Jenkins works as an admin for Dr. Lehner and Gina.
PPLPMDL0020000001	Garfield Heights	OH	44125	11/1/2011	NON-PRESCRIBER- Dr Abraham said he has used some Butrans with success in patients. He said his main problem with Butrans is that he wants to use it in his patients over 65, but Medicare D does not pay for it. Discussed commercial coverage & savings cards. Dr Abraham said he does not prescribe many short-acting opioids & that he would put all his older patients on Butrans if it was covered & will do so if Medicare D picks Butrans up in formulary at any time. I asked what he does for his younger patients. He said he would prescribe OxyContin for those patients. He added that he believes Butrans would be more abusable than OxyContin. I told him both medications are opioids & have abuse/addiction potential.
PPLPMDL0020000001	Stow	OH	44224	11/1/2011	Dr wanted to talk about what is going on with the industry and why are insurance companies only wanting to pay for generics and what is that going to do for the pharmaceutical industry. I said those things are not in my control and cannot say what will happen but if he sees the benefit of a name brand drug he needs to fight to get it for his patient. I said something like Oxycontin is still 2nd tier on the majority of commercial and Med D plans and Butrans is 3rd tier on commercial and being paid for by Medicaid which is great coverage. I said to him, he has said in the past how much of a benefit he has seen Butrans and that he has tried it in some patients and saw the good results, I am surprised that he is not saying that he has more patients on Butrans with how excited he was and he said he is full of surprises. HE said alot has to do with his pharmacy and how much it is going to cost to get in and he doesn't want it to sit on the shelf. I said he is the one ordering and he is the one writing it. I said if it is on the shelf and you are writing it, there shouldn't be any problems. I asked him what type of patient comes to mind when he thinks of Butrans and he said some one who is chronic and taking short acting. HE said there are alot, he just needs to find those patients. I told him about Medicaid and he said that is good news. I said is there anything else that I preenting him from writing Butrans and he said no, he has it on him mind when he goes in room. HAD to go
PPLPMDL0020000001	Mayfield Heights	OH	44124	11/1/2011	Loyalist. Window call.....reminded doc of the 30% improvement in pain scores in Butrans clinical trials. I asked her if she has looked and the clinical trial data. She said no and that she knows enough about butrans. She did want to know when there is something new with the product.
PPLPMDL0020000001	Cleveland	OH	44112	11/1/2011	Prospect. I reminded doc of his expressed interest in butrans and that butrans is a CII opioid delivering 7 days of buprenorphine in a once weekly dose. I asked him how often he sees patients taking a short acting opioid that complain that their current therapy no longer works. He said they complain all the time. I asked him to try one of those patient on butrans. I reviewed the starting doses - 5mcg for naive patients or those taking less than 15mg /day of a short acting. He asked about coverage again. I told him about the commercial plans covering butrans and explained that Caresource is covering it after failure on tramadol or vicodin.
PPLPMDL0020000001	Solon	OH	44139	11/1/2011	Alan and I questioned Dan whether OxyContin is confirmed to be listed on the Caremark formulary which he sent in a follow up email that it is 2T-QL. Alan had trouble confirming this on their website so Dan explained the original formulary listed is the formulary submitted to CMS from June, where OxyContin was not officially added yet. After that initial formulary, addendums are sent each month with changes which is where OxyContin appears. We reviewed the redlines for the 2nd amendment we sent for the increase in the OxyContin rebate. He was unaware of these changes because he's unfamiliar with Caremarks contracts yet. He did say they are not requesting Price Protection for OxyContin thru 2012 but will for 2013. Mike was not in the office to discuss Butrans. Dan said he's the person to go to for this. I shared my communications with Mike regarding Butrans which were positive but he was unfamiliar with it. He directed us to meet with Mike.
PPLPMDL0020000001	Stow	OH	44224	11/1/2011	Dr said everything is doing great with Butrans. I said what type of patient are you using it in and he said there are the ones who are on short acting and taking it atc and the ones who are on low dose long acting who can use it if the current one is not working. I said how often in the week are you seeing patients like the ones you have on Butrans and he said about 25% of his practice is like that. I said are you getting the results from Butrans that you want for it to be your go to drug and he said dont worry. I like it for starting patients after they are chronic and I said which is when. HE said if they are taking Vicodin 6 times a day, he switches. I said what about before that and he said alot come there on close to thathe said he likes it. I told him about medicid paying for it and he said that is good news. They see mainly Caresource, they got rid of Buckeye. I reminded him of low dose oxycontin and it is 2nd tier in his med D plans like CCRx and AAARP
PPLPMDL0020000001	Lakewood	OH	44107	11/2/2011	Quick call with Diane, she asked what info can she pass along to the pharmacist, I reviewed the use of supplemental analgesia with Butrans and she will let them know. I asked her to hand out the medication guides when patients get a script and she agreed. She said they could use a few more OxyContin savings cards and I left more.
PPLPMDL0020000001	Strongsville	OH	44136	11/2/2011	Spoke with Jim, pharmacy manager, who said that although they did see some Butrans prescriptions earlier on, they have not seen any lately. I asked if he knew why the patients were no longer filling their Butrans prescriptions. He said he does not know the reason. Discussed Butrans savings cards, which he accepted, but he did not need OxyContin savings cards. I inquired about Dr Nicholas Davis & his practice to follow up on a lead from an exhibit. Jim said he is licensed to treat patients with Suboxone for addiction. He added that he does not typically see reps, although said I should at least try to see him since he requested information about Butrans at the exhibit. I asked if he also treats pain & reminded him that Butrans is indicated only for pain & is not to be used for addiction treatment. He said Dr Davis does treat a lot of pain as well. He tried to call Dr Davis's office, but dr wasnt available to see me,talked to Valerie,MA for dr,about Butrans and asked if dr started any Caresource patients on Butrans this week and if so,were scripts approved? Valerie asked dr,dr said she started 1 Caresource patient on Butrans this week but it wasn't approved,told Valerie to tell dr that commercial plans are the best place for Butrans at this time,showed formulary grid and Butrans patient savings cards to Valerie,talked to Valerie about appropriate patients for Butrans and asked her to recommend butrans for patients that she feels are appropriate to dr,Valerie said she'll do that.
PPLPMDL0020000001	Cleveland	OH	44103	11/2/2011	Introduced Butrans to pharmacist Lisa. She said they do not stock it there as they have seen no prescription activity for it. Discussed appropriate patient type & asked her if she fills a lot of chronic Vicodin & tramadol prescriptions there. She said tons. Discussed how Butrans could be an option for some of those patients. She said it sounds like a good medication to offer patients. I asked if she ever makes recommendations for medication switches to physicians. She said yes. I gave her patient information booklets & asked if she would be willing to give them to customers who she thought would be good candidates for Butrans. She agreed.
PPLPMDL0020000001	Lakewood	OH	44107	11/2/2011	We discussed the key messages for Butrans. We discussed appropriate patients and the initiating guide. We reviewed the clinical trial for opioid experience patients. She did not know how these results might relate to what she will see in practice. We reviewed the OxyContin conversion guide and appropriate patients. We discussed Butrans managed care and savings cards.
PPLPMDL0020000001	Cleveland	OH	44106	11/2/2011	talked to dr about appropriate patients for Butrans,i asked dr who is appropriate for Butrans in his mind? dr said patients taking low doses of short-acting opioid analgesics who arent controlled and need something else.showed dr Butrans visual aid,appropriate patients and dosage ranges and asked dr if patients are taking tramadol daily for 1 of the chronic pain conditions listed on pg.11,visual aid,but not controlled,would he consider Butrans? dr said yes but insurance plays a role.dr said he has a lot of Medicaid at Main Campus so that influences his decision to start patients on Butrans.i asked dr to start a couple Caresource patients on Butrans and we discussed recent updates with Caresource and still focus on Commercial plan patients for Butrans.dr said ok that makes a difference and he will try starting a few Caresource patients and see what happens.
PPLPMDL0020000001	Warrensville Heights	OH	44122	11/2/2011	NON-PRESCRIBER- I told Dr Zivic that currently, Medicaid is paying for Butrans. I asked him if he thought this would help him prescribe more Butrans. He said perhaps. I asked if something other than managed care was holding him back from trying a few appropriate patients & he said probably not. I asked if he would, then, start a few patients now that the coverage for his practice is better & he agreed.
PPLPMDL0020000001	Cleveland	OH	44109	11/2/2011	talked to dr about BUP3015,opioid experienced clinical trial results and asked dr if he's started any patients on Butrans this week? dr said no he has 3 patients on Butrans and they are doing well but Butrans isnt his 1st line of therapy.i asked dr to expand on what he meant,dr said he see's different pain conditions,different patients,he has to individualize treatment,he looks at MRI to see if his positive/negative,he looks at OARRS report,etc and if patients are taking vicodin 5/325,2-3 times a day and thats not working he will consider increasing the dose to 10mg BID and if patients dont do well on that dose or ask for more pills at the next visit,then he'll consider Butrans.dr said he has to tell patients there's a different option available and some patients dont want to wear a patch they only want their pills.we talked about dr thinking of a couple patients who have legitimate chronic pain and that he feels Butrans could be an option for,showed visual aid,appropriate patients section,discussed titration of Butrans and giving patients Butrans patient info booklets to help in educating patients,dr said he will think of some patients this week and see what he can do.focused dr on BWC,commercial plan patients and told dr to start a couple Caresource patients on Butrans and see if they get approved,dr said he will do that.
PPLPMDL0020000001	Cleveland	OH	44103	11/2/2011	dr needed OxyContin savings cards,gave those to dr and discussed appropriate patients for OxyContin,showed formulary grids and dr said he's not having any issues with insurance coverage for OxyContin.talked to dr about 5 Core selling messages for Butrans and dr asked about Medicaid coverage as that's majority of his patients.talked to dr about Caresource patients trying Butrans and perhaps getting approved for Butrans,no guarantee but asked dr to try and he said he would do that if patients are willing to wear a patch.showed initiation guide and discussed initiation of Butrans and titration.recommended Senokot-5
PPLPMDL0020000001	Westlake	OH	44145	11/2/2011	Dr said he only likes to write for 3 vicodin per day but sometimes patients come to him on higher doses of opioids. We discussed the appropriate patient types for Butrans and I asked if he would write for patients on 3 vicodin per day. He said that patients do not want to give up their pills and it is hard to transition patients. I reviewed the patients can take supplemental analgesia but he did not know if he would be comfortable giving both. Spoke with Angela, she said she just did a PA for a Caresource patient for Dr Carson.
PPLPMDL0020000001	Bedford	OH	44146	11/2/2011	NON-PRESCRIBER/FORMER TRIALIST- I let Dr Haddad know that Medicaid plans are currently paying for Butrans & discussed possible prior authorization. He said this was good news. I reminded him of his previous trials of Butrans with good results & asked what happened. He said coverage was just not good & he kept getting prior authorizations for failures of morphine or fentanyl before Butrans. I asked if this new update would cause him to reconsider & try to start writing again. He said yes. Reminded him of appropriate patient type, focusing on patients who are not well-controlled on tramadol or Vicodin around-the-clock. I asked again if he would prescribe Butrans now that coverage seems to have improved & he said yes.
PPLPMDL0020000001	Cleveland	OH	44104	11/2/2011	talked to dr about appropriate patients for Butrans,showed visual aid,dr said he's not seen any patients in office that he can start on Butrans because majority are medicare patients and Butrans isnt covered on Medicare plans.told dr that was correct but asked dr to focus on commercial plan patients or any Caresource patients he might see that he felt Butrans was appropriate,dr said ok he will do that.talked to dr about OxyContin being an option for his medicare patients and discussed formulary coverage on medicare plans dr said he's not had trouble getting OxyContin but appreciated info.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44143	11/2/2011	Prospect. Quick call...reviewed the butrans indication and the 7 day delivery in a CII narcotic. I asked doc if he has these types of patients in his practice. He said sure. I asked him to try butrans for one patient this week. Discussed the coverage with commercial plans, BWC, and Caresource.
PPLPMDL0020000001	Cleveland	OH	44113	11/2/2011	window call - showed dr BUP3015,dr said she couldnt talk today but would look over clinical trial,told dr about Caresource update and asked dr if she could start a couple patients this week,like the one's she's started on Butrans? dr said she will do that insurance has been biggest challenge.
PPLPMDL0020000001	Euclid	OH	44119	11/2/2011	Spoke to Kevin about the butrans positioning - after tramadol/before going to vicodin ATC. He asked about the insurance. I told him that butrans is being covered on most insurance plan, BWC and on caresource after tramadol. He asked who is writing it as has not received any scripts. I explained that many of the pain specialists in the area are prescribing. Gave him patient info guide for application instruction.
PPLPMDL0020000001	Parma	OH	44129	11/2/2011	NON-PRESCRIBER- Quick call as I caught Jen between patients. I let her know that currently, Medicaid plans are paying for Butrans. She said that would allow them to flag more charts, causing them to prescribe more. She also said she prescribed Butrans for a patient last week. Spent time with Dawn who said both Jen & Caryn prescribed Butrans last week for a patient. Dawn said the patients were newer & were not well-controlled on tramadol, so they started them each on Butrans. I let her know about Medicaid update, which she said was excellent because she has thought of other patients for Butrans but they did not have commercial coverage or BWC. I asked Dawn to flag those charts for Butrans & she agreed.
PPLPMDL0020000001	Cleveland	OH	44130	11/2/2011	TRIALIST- Quick window call- Updated Dr Kansal, letting him know that Medicaid plans are currently paying for Butrans. Positioned Butrans for patients not well-controlled on tramadol. He thanked me & walked away. Spent time with Dorothy, reviewing managed care coverage for Butrans & OxyContin, including Medicare Part D plans. Dorothy said she just got a prior authorization for a Medicaid patient for OxyContin. She added that she will have to complete the PA every month in order for Medicaid to pay for OxyContin.
PPLPMDL0020000001					

PPLPMDL0020000001	Cleveland	OH	44130	11/2/2011	I met with Melenie Petropoulos today. Updated her on Butrans. I discussed the savings card availability for pharmacists to download at Butrans.com Gave her the Butrans HCP website piece. She would like the pdf on savings card letter as well as buprenorphine letter to send to her pharmacies. She said she would do so. Went over the two clinical studies, FPI. Gave her updated OxyContin FPI. I also gave Melanie latest Med Ed Resources Guide. They are putting in a whole new pharmacy computer system.
PPLPMDL0020000001	Euclid	OH	44117	11/2/2011	Dabbler. Quick call. I reminded doc that he said he could prescribe butrans after tramadol as opposed to switching people. I asked him if sees any of those patients this week to prescribe butrans. He said he will try. Gave him a BUP 3015 copy and summarized the results of 305 improvement after 12 on butrans. He said he will look at it.
PPLPMDL0020000001	Lakewood	OH	44107	11/2/2011	Met the new NP, Lori. Learned that Dr is going to be moving to the east side and Dr Grimm will be coming to his practice. We discussed his results with Butrans and he said that he has been happy with Butrans as an option. Dr had to step out to see a patient but then came back and said he was going to write a script for her. He said she is a Med D patient but has Anthem as a supplemental, and he was going to still try to get Butrans to go through. We discussed the managed care where Butrans is covered and that Med D may be difficult.
PPLPMDL0020000001	Lakewood	OH	44107	11/2/2011	I reviewed our last conversation about patients taking 200mg of tramadol. We discussed Butrans as an option and I asked if he thinks his patients might like a 7 day option. He said probably not but it doesn't mean he wouldn't use it. I reviewed the managed care and let him know that Med D is usually not covered, but commercial patients can get Butrans for as low as \$15 per month. I asked if he would try it for commercial patients and he worked anesthesia/pain management center - see call notes on sahalg,hayek and khaili.
PPLPMDL0020000001	Cleveland Cleveland	OH OH	44106 44106	11/2/2011 11/2/2011	dr said he has a few patients in mind to start on Butrans,asked dr what these patients were taking that prompted him to consider Butrans? dr said these are patients taking tramadol but always calling in early requesting refills,reviewed initiation and titration with dr,showed Butrans initiation guide and focused dr on commercial patients and told dr to try starting a few Caresource patients on Butrans,dr said ok sounds good.
PPLPMDL0020000001	University Heights	OH	44121	11/2/2011	Prospect. Quick call....asked doc if he has patients that might be taking hydrocodone several times/day to manage their pain. He said they are taking more than that. I asked him if he would consider Butrans for those patients that might be taking no more than 3 tbas/day but he is considering titrating the patient. - Butrans is a CIII like vicodin and can be called in or refilled. Plus Butrans is just a once weekly dose. Gave him a formulary grid and told him butrans is being covered on Caresource after failing on tramadol or other short acting tablets. I reminded him of the oxycontin preferred coverage and the savings cards. No commitment.
PPLPMDL0020000001	Cleveland	OH	44106	11/2/2011	asked dr if he's considering Butrans as an option for patients when he walks in exam room and patients are taking vicodin daily but not controlled,dr said he does look at Butrans for these patients.dr said it doesnt matter if they are taking vicodin or percocet,if patients arent controlled and want more pills,he talks to them about Butrans and his goal is to decrease the amount of pills patients take daily/monthly.we discussed initiation of Butrans,showed visual aid and talked to dr about titration of Butrans.talked to dr about Caresource updates with Butrans and asked dr to start a couple Caresource patients on Butrans this week,based on our discussion,dr
PPLPMDL0020000001	Cleveland	OH	44105	11/2/2011	talked to Abdul,Pharmacist,about Butrans 5 core selling messages and what features stand out to him.Abdul said he likes that Butrans is a patch and is surprised more doctors arent prescribing Butrans.Abdul said biggest challenge is probably the limited coverage with medicaid patients.we talked about OH State Medicaid PA requirements for Medicaid and Caresource patients trying Butrans.Abdul said he's given a couple Butrans patient info booklets out to patients and will continue doing that as patients have talked to their HCP's about Butrans.focused Abdul on application/rotation of Butrans,side effects,etc in booklet and asked him to talk to patients about this info,Abdul said he will as thats important for patients to have success with this medication.we talked about OxyContin stocking and discussed some HCP's in area prescribing OxyContin,discussed formulary coverage and left grids for Abdul.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44111	11/2/2011	Spoke with Earl. We reviewed the invitation guide, medication guide and that patients can use Butrans along with opioid or non opioid as supplemental analgesia. I asked his thoughts and he asked if Butrans can be abused. I reviewed the Butrans is a CIII opioid with potential for abuse
PPLPMDL0020000001	Euclid	OH	44119	11/2/2011	Prospect. I discussed the butrans use in opioid naive and opioid experienced patients. I asked him where would he likely use butrans. He said either or , probably opioid experience. Showed doc the BUP3015 graph and the 30% improvement in the pain score after 12 weeks on butrans. I asked him what he thinks of that. He said its pretty good. I asked him if its enough to finally try one patient on it. He said, "Sure. Today is the day." I reminded him of the commercial coverage, BWC, and now with Caresource after tramadol.
PPLPMDL0020000001	Bedford	OH	44146	11/2/2011	TRIALIST- Dr Moufawad said he is going to go ahead & get approved as a speaker for Butrans but may not want to speak until he gets more experience with Butrans. I asked him how we can get him more experience. He said he just has to write it more. I agreed. He added that he has some personal issues going on right now that are monopolizing his "time & brain", so he has been out of sorts lately. He said also that he is not taking on any new chronic pain patients at this time, but will add them back eventually. He added that he is also trying to get rid of all his Suboxone patients who are addicts & that he has gone from 100 patients on it to 30. He said he wants to focus only on pain patients, not addicts. He asked that I am patient with him as he goes through these changes as they can take time & energy. I asked him if he has any clinical objections to Butrans whatsoever, ie Butrans with supplemental analgesia. He said he has absolutely zero clinical hesitation with Butrans since his speaker training & is very comfortable with starting patients. Discussed OxyContin as an option for patients beyond range of Butrans. Spoke with Amber & updated her on Medicaid status.
PPLPMDL0020000001	Westlake	OH	44145	11/3/2011	Quick call, Dr said that management is making them bring on more and more pain patients. I asked if he would write for Butrans for these patients on tramadol or low dose vicodin instead of increasing their dose. He said he will. I reviewed managed care for Butrans.
PPLPMDL0020000001	Brooklyn	OH	44144	11/3/2011	Spoke with Becky, technician, & floater pharmacist. I gave them an updated Butrans FPI & spent time going over appropriate patient type, focusing on patients who call them too soon for refills of short-acting opioid medications. Becky said she has seen some movement of Butrans at this location but she said she thinks a lot of patients like the type we discussed get used to taking pills around-the-clock & do not want a change. Discussed patients who are not well-controlled on their current medication as possible Butrans candidates. Becky agreed to give the information to the regular pharmacists. Discussed automatic savings for Butrans via e-voucher &
PPLPMDL0020000001	North Olmsted	OH	44070	11/3/2011	Spoke with Mary, we reviewed the use of supplemental analgesia with Butrans. We discussed the patient information for Butrans and she agreed to hand the booklets out with scripts. She said that she would not feel comfortable giving patient booklets to appropriate patients and that it is up to the doctor. I reviewed OxyContin as an option and left a conversation guide.
PPLPMDL0020000001	Independence	OH	44131	11/3/2011	NON-PRESCRIBER/FORMER TRIALIST- I asked Dr Sundaram what he felt the downsides to Butrans were. He said he doesn't really have much experience with it so that is difficult to answer. He then added that it isn't "very common yet". Dr Sundaram had a medical student with him today, so he started telling her about Butrans, asking if she has learned anything about it. He told her that it is buprenorphine in a once-a-week patch for patients with pain. I elaborated on appropriate patient type & range, including OxyContin as a possible option for appropriate patients beyond Butrans 20mcg, focusing on patients who are not well-controlled on chronic tramadol or Vicodin around-the-clock. Dr Sundaram said another down side of Butrans could be the cost. He asked if it is correct that patients with insurance pay only \$10-\$15. I told him the average co-pay for patients with commercial insurance who use the savings cards is closer to \$15-\$20. Also reminded him of Medicaid scripts going through with a possible prior authorization.
PPLPMDL0020000001	Cleveland	OH	44127	11/3/2011	dr said she couldnt remember much about Butrans and asked me to refresh her memory,showed Butrans visual aid and discussed 5 core messages with dr.dr said she likes that Butrans is a patch and dosed once a week.dr said her biggest challenge is that she has a lot of medicaid,dr asked if Butrans was covered on medicaid? discussed with dr and Josie,MA,PA requirements for Medicaid patients and talked to them about Caresource patients trying Butrans,dr said ok she will think of some patients this week to talk to about Butrans.gave dr Butrans patient info booklets and focused on appropriate patients,initiation of Butrans and titration.dr committed to talking to a few patients this week and if Medicaid/Caresource covers Butrans she will start them.
PPLPMDL0020000001	Cleveland	OH	44105	11/3/2011	reviewed 5 core selling messages with dr,dr said she couldnt remember who the appropriate patients were for Butrans,how to write the Rx and who covered Butrans? showed dr Butrans visual aid,discussed appropriate patients,initiation of Butrans and titration and asked dr if she had patients taking short-acting opioids,for their chronic pain conditions(showed pg.11 giving examples of some pain conditions)? dr said yes,she has a lot of patients on percocet but they are always in pain,they really never have reductions in pain and every month just ask for a refill or higher dosage strength and she just gives it to them.dr said she's looking for another option for patients so she'll talk to a few patients and try starting them on Butrans.dr asked about insurance coverage for Butrans? talked to dr about BWC,commercial plan patients to start on Butrans and dr asked about medicaid/medicare coverage? talked to dr about PA requirements for Medicaid and Caresource patients trying Butrans.dr said ok she will start a few patients and asked me to follow up with her on 11/15 as she's out of the office next week till the 15th. told dr to be sure she gives patients Butrans patient info booklets and show patients application/rotation section in booklet,dr said ok she will do that.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44103	11/3/2011	talked to Nick,Pharmacist,about Butrans Rx and Nick said he's not seen any lately.I showed Nick BUP3015,we discussed clinical trial inclusion criteria and results and Nick said a 30% reduction in pain was good.I asked Nick how many patients taking short-acting opioids can say that they get a 30% reduction in pain? Nick said noone.Nick said all of the patients that he see's getting tramadol,vicodin and percocet every month complain that their pain is the same or worse so he doesnt understand why more physicians dont prescribe Butrans.we talked about appropriate patients for Butrans,showed dosage ranges for Butrans starts and talked about titration of Butrans.I asked Nick if he would recommend Butrans to any patients that he feels are appropriate and give them patient info booklets to speak with their doctors? Nick said he'll do that and asked about insurance coverage for medicaid,we discussed medicaid,commercial plans and BWC.we briefly discussed OxyContin stocking and appropriate patients for OxyContin.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44195	11/3/2011	talked to dr in hallway,showed dr Butrans 5 core selling messages,dr said he started 1 patient on Butrans but hasnt started anyone else.showed dr Butrans initiation guide,talked about appropriate patients and initiating Butrans and asked dr to start a couple patients on Butrans this week to get more clinical experience with Butrans,dr said he will do that and asked about insurance coverage,focused dr on BWC and commercial plan patients.showed formulary grid and savings cards for commercial plan patients and gave dr Butrans patient info booklets.
PPLPMDL0020000001	Brooklyn	OH	44144	11/3/2011	Spoke with pharmacist, Gary & gave him updated Butrans FPI. He said he has not seen much activity for Butrans. I updated him on insurance coverage & discussed updates with Medicaid coverage. He asked if I had spoken with Metro pain management. Discussed appropriate patient type/range, focusing on patients who take tramadol or Vicodin around-the-clock who are not well-controlled on those therapies. He said Butrans faces a tough battle because patients "can't share" Butrans as easily as they could pills, making patients less likely to want it. Discussed appropriate patients who are in true pain & reminded Gary that Butrans is an opioid & therefore does have abuse/addiction potential. Also discussed ability to take supplemental analgesia while on Butrans. Discussed savings for Butrans & OxyContin.
PPLPMDL0020000001	Parma	OH	44129	11/3/2011	TRIALIST- Dr Gigliotti said he was just looking at his Butrans initiation guide. I asked him if this was because he had been thinking of all the patients he had that he could try it on. He asked me how pain management physicians are taking to it. Discussed appropriate patient type/range including OxyContin as an option for patients beyond Butrans. I told him Butrans is being used by various specialties, including physicians just like him. He said he wishes he did not have a DEA number so he didn't have to write any pain medications. I asked him if he would agree that although that may be the case, he still does write them for appropriate patients. He said yes. I asked him why, then he is not prescribing Butrans since he seems to think it is a good medication. He said it took him awhile to get on board with OxyContin. He then said he does think Butrans is a good option for patients like we discussed & that he thinks that patients would like only having to dose their medication once weekly in a patch. Reminded him patients can take supplemental analgesia if necessary. Dr Gigliotti said today would be the day he would find someone for Butrans. I let him know I would be following up with him to find out the results.
PPLPMDL0020000001	Cleveland	OH	44113	11/3/2011	dr said he started a patient on Butrans last week but it wasnt a caresource patient,dr said the caresource patient didnt want to try Butrans because she already had allergic reactions to other adhesives.dr said he's thinking of Butrans for his patients taking vicodin daily but not controlled and asking for more pills,thats where he feels Butrans is a great option.showed BUP3015,discussed 30%reduction in pain seen in clinical trials and dr said that is clinically significant and he will continue thinking of patients.dr said he'll look and see who's coming in office today but he's going out of town 11/4-11/21 so he asked me to follow-up at the end of november.told dr to focus on BWC and commercial plan patients to start on Butrans.
PPLPMDL0020000001	Mogadore	OH	44260	11/3/2011	Dr said he likes Butrans. I asked if he is happy with the results she is getting and he said it is hit or miss like any other drug. But the patients that it does well in, he said it works really well. He said he is starting all patients on the 10mcg because they were on Vicodin. I said would you be opposed to using it before Vicodin after Tramadol and he said that is a great idea. HE said at first he wanted to get people who were on chronic Vicodin off and now this is a good way to prevent chronic Vicodin. We reviewed opioid naive study and managed care coverage. We discussed Oxycontin and he said he has select patients on Oxycontin, he doesnt think it is for everyone.
PPLPMDL0020000001	Cleveland	OH	44195	11/3/2011	worked anesthesia/pain management center - see call notes on dr cheng,anne crawford,NP and Kathy Kraus,PA.
PPLPMDL0020000001	North Olmsted	OH	44070	11/3/2011	Spoke with Paula, she was familiar with Butrans and have the 10 and 20mcg stocked. She did not remember which Drs but Dr Hernandez wrote since he only writes for one patch at first. She said the patients that come in were already on Butrans in Florida and transfered up here. I reviewed the use of supplemental analgesia with Butrans. I asked if she would hand out a medication guide to a patient who might benefit from Butrans and she



PPLPMDL0020000001	Mogadore	OH	44260	11/3/2011	Spoke to Jerry and he said they are seeing Butrans here and there, I said are they from Dr Cain and he said he thinks he has seen some from Him. I showed Butrans application to go over with the patient. HE said they do not see too many Oxycontin their. I reminded him of Sen5 in opioid induced constipation
PPLPMDL0020000001	Independence	OH	44131	11/3/2011	NON-PRESCRIBER- Handed Dr Jack a Butrans formulary grid in effort to stop him between patients, updating him on Medicaid coverage. I asked why he thinks he is not using it. He said he will "get there" & again said not to give up. I assured him this would not happen. Spoke with Cameo, reviewing savings cards for Butrans & OxyContin.
	Cleveland	OH	44113	11/3/2011	showed dr BUP3015,opioid experienced patients,clinical trial,discussed results and asked dr if a 30% reduction in pain was clinically significant? dr said yes any reduction in pain was good.dr said he likes that Butrans is a patch and dosed once a week as some patients might prefer this.dr said he has a lot of patients taking vicodin but its usually for acute pain,we talked about dr focusing on chronic pain patients taking vicodin daily for 1 of pain conditions listed on pg.11 visual aid,dr talked about back pain patients,i asked dr to start a couple patients on Butrans instead of refilling or titrating vicodin dose,dr said he will consider it if patients are willing to wear a patch.showed dr Butrans patient info booklet,focused dr on application/rotation section and asked dr to give this booklet to patients to help dr educate patients on Butrans,dr said he will do that and see what happens.dr asked about insurance coverage,focused dr on BWC and commercial plan patients.
PPLPMDL0020000001	Cleveland	OH	44109	11/3/2011	dr said he's thinking of patients to start on Butrans,showed dr BUP3015,opioid experience clinical trial and focused dr on initiation of Butrans and titration,dr said ok he will try but they have a lot of medicaid so we discussed Caresource patients starting on Butrans and focused dr on BWC and commercial plan patients.
	Cleveland	OH	44102	11/3/2011	Nagla,PA,said the doctors are starting more patients on Butrans and she's working with each of them to start patients after the short-acting opioids arent controlling patients pain anymore instead of refilling or giving more pills.Nagla said she likes the idea of long-acting medication for a chronic pain condition and give short-acting opioid for just 1 week to help patients get started on Butrans.focused Nagla on initiation of Butrans,titration and showing patients Butrans patient info booklets.Nagla said she does give them to patients as it helps to have them in patient exam rooms now. focused Nagla on BWC and commercial plan patients and asked Nagla to start a couple Caresource patients on Butrans,Nagla said ok she will do that.
PPLPMDL0020000001	Cleveland	OH	44195	11/3/2011	talked to Kathy,PA,about Butrans 5 core selling messages,kathy said only a few doctors have prescribed Butrans and she doesnt understand why,kathy said she likes that Butrans is a patch and dosed once a week as some patients may prefer this dosing schedule.I asked Kathy if she would share the initiation guide and butrans patient info booklet with the doctors,Kathy said she will do that.we talked about initiation,titration and formulary coverage,focused Kathy on BWC and commercial plan coverage.
PPLPMDL0020000001	Mogadore	OH	44260	11/3/2011	Dr said she has not written Butrans and I asked her if there is anything that is preventing her from trying it and she said no. I said where would she write this in her practice and she said in patients who need a long acting. I said do you see the benefit of Butrans for patients and she said yes, I asked how and she said why all of the questions. I said I am trying to find out if it is realistic for her to write this in her practice and if she is going to write it in the right patient. She said if she had questions she would ask. I reviewed managed care with her and said if the patient is beyond this she has the option of low dose Oxycontin. After discussion with the other Drs about Butrans and Dr Cain saying that he has had good success with it, she said she promises she would try
PPLPMDL0020000001	Mayfield Heights	OH	44124	11/3/2011	Prospect. Window call....I reminded doc of the butrans 7 day delivery and the CII status which means it can be called in and refilled. Gave a formulary grid and a savings card sell sheet. Let her know that Caresource is now covering butrans after failure on a short acting opioid such as tramadol.
PPLPMDL0020000001	East Cleveland	OH	44112	11/3/2011	Prospect. I described the appropriate butrans patientlex. one taking vicodin 5/325mg 4-6 tabs/day). He said he still has not seen anybody on it yet. I reminded him that he said he would start a patient. I let him know about coverage by caresource after failing on tramadol and BWC coverage. He said he has those patients. He asked how to write a prescription for butrans. I showed him the back of the initiation guide - 1 carton #4 Butrans. He took and said he would keep it in his pocket as a reminder. Provided an oxycontin formulary grid reminder as well.
PPLPMDL0020000001	Brooklyn	OH	44144	11/3/2011	NON-PRESCRIBER- Dr Deeb asked for a reminder about Butrans. Reviewed 5 core messages with him & spent time going over appropriate Butrans patient type/range, including OxyContin as an option for patients beyond Butrans. He said the problem is that almost 50% of his practice is Medicare, followed by 40% being Medicaid. Discussed insurance coverage & updated him on Medicaid coverage, including prior authorization. Positioned Butrans for patients who are not well-controlled on tramadol. I asked him what he does after NSAID's & COX-2's for someone with chronic pain. He said tramadol & that he hopes he does not have to escalate them to anything else. Discussed Butrans as an option at that point & asked if it made sense to him to use it there. He said yes. Discussed buprenorphine as a CII opioid with abuse/addiction potential & ability to take supplemental analgesia. Also talked about dosing for different patient types. I asked if he felt that Butrans was truly something he could see himself using & he said yes. He asked me to come back to follow-up with him to remind him as he gets rushed & gets in the habit of just refilling medications instead of thinking of switches. He said he is interested in learning more about pain medications as he has been focusing on lipidology & needs refreshed on opioids in general. He said he typically uses OxyContin in the hospital & has had good success with it.
PPLPMDL0020000001	Cleveland Hts	OH	44118	11/3/2011	Dabbler. Doc's office called for more butrans savings cards. He said he has been prescribing butrans. He said he has one patient, a cleveland clinic employee, that was having trouble getting the script filled. The pharmacist tried to run the script a couple of ways but patient could not afford without the card. I explained the availability online and that cleveland clinic employees should be able to get butrans reasonably. I also let him know that caresource is now covering butrans after failure on tramadol or vicodin. Gave formulary grid reminders for both products.
PPLPMDL0020000001	Mayfield Heights	OH	44124	11/3/2011	Prospect. Window call....I asked doc if he thought a 30% improvement in pain score would be clinically significant. He said he didnt know. I told him that's basically what one clinical trial showed. Discussed the 30% or greater improvement in pain scores after 12 weeks on butrans. He said he would look at it.
PPLPMDL0020000001	Independence	OH	44131	11/3/2011	NON-PRESCRIBER- Quick call- Handed Dr Rob a Butrans "Experience" invitation & asked him to log on for Butrans e-details since his time in the office is so limited. Reminder of Butrans once weekly transdermal delivery.
PPLPMDL0020000001	Highland Heights	OH	44143	11/3/2011	Repeat. I asked doc if he had a chance to look at the BUP3015 clinical trial I gave last week. He said he does not have time and asked me to tell him quickly about it. I explained the 12 week study in opioid experienced patients. The results showed that 50% of the patients got a 30% or greater improvement in pain score. He said that's not bad. Quickly let him know that butrans is now being covered on Caresource after tramadol failures.
PPLPMDL0020000001	Mogadore	OH	44260	11/3/2011	Dr said he tried a patient on Butrans and i asked How they were doing and he said they did well but is no longer on it. I said was it not working and what medication did they come off of and he said this patient was complicated anyways, he was on Vicodin. HE said he wanted something stronger and his wife didnt so he referred him because he didnt want to deal with it. HE said he likes the fact it it c3 and once a week. I showed him the opioid experienced study and asked him if he thinks going from a 10 to a 7 in pain was significant and he said yes. HE said his goal with patients is to get them functioning. HE said you never get them out of pain completely if they are chronic. We discussed also using in opioid naive patients. Reviewed amanged care. I rmeinded him of Oxycontin low dose as an option
PPLPMDL0020000001	Garfield Hts	OH	44125	11/4/2011	NON-PRESCRIBER- I updated Dr Sadowski on Butrans managed care & Medicaid including prior authorization. He said he just has not had a candidate yet. I told him I find this hard to believe & said he must have seen at least one appropriate patient. Positioned Butrans for patients taking tramadol around-the-clock who are not well-controlled. He said he promised to keep it in mind & started to walk into a room. He then stopped & asked if I had savings cards. I showed him in the sample closet where they were. He said he was actually getting ready to see a patient who is "not doing well" on Vicodin & added that he thought she would be a good candidate for Butrans.
PPLPMDL0020000001	Cleveland	OH	44109	11/4/2011	Gave him savings card & patient information booklet to assist in patient counsel & let him know I would be back to follow up. Spent time with Deena, who said she just told a patient about Butrans & told her to ask Dr dr said he knows Butrans is available but hasnt prescribed it yet,dr said he keeps thinking of Butrans in the same place as Duragesic because its a patch.showed dr Butrans visual aid discussed appropriate patients to start on Butrans and asked dr if he had patients taking vicodin or percocet for 1 of the pain conditions shown,pg.11,but not controlled? dr said yes he has a lot of patients taking those opioids and sometimes they ask for something else.i asked dr if he would start 1-2 patients,BWC or commercial,that are like we discussed on Butrans instead of refilling or increasing patients short-acting opioid dose?
PPLPMDL0020000001	Cleveland	OH	44109	11/4/2011	dr said he talked to a few patients this week about Butrans and gave Butrans patient info booklets for them to read about Butrans.dr said he's following up in 2 weeks with patients.I asked dr why he didnt just start them on Butrans? dr said patients didnt want to wear a patch so he's trying to educate them on Butrans and see if that will help persuade them to start.showed dr Butrans visual aid,discussed appropriate patients and initiation of Butrans. asked dr if he has a couple patients taking immediate release opioids that arent controlled and would be willing to wear a patch,dr said he might and would have to think about it.focused dr on commercial plan patients starting on Butrans and we discussed Caresource patients trying Butrans.recommended Senokot-5
PPLPMDL0020000001	Westlake	OH	44145	11/4/2011	I showed the inclusion criteria for the opioid experienced clinical trial, the doctor was interested and said that he sees these patients. The doctor agreed that these are appropriate patients. I asked him if he will prescribe for Butrans for these patients instead of vicodin and before going to methadone. He agreed.
PPLPMDL0020000001	Cleveland	OH	44109	11/4/2011	talked to Mike,Pharmacist,about 5 Butrans core selling messages.Mike said they are filling Rx for Butrans and all 3 dosage strengths but he doesnt know who's prescribing.Mike said he saw a few Rx from PM&R. we talked about appropriate patients,initiation and titration of Butrans and we discussed formulary coverage.Mike asked if Medicaid was covering Butrans? we talked about Caresource patients trying Butrans and medicaid PA requirements.majority of their patients are cash paying or medicaid.showed Mike Butrans formulary sheet for commercial plans and patient savings cards and we discussed the savings plan for these patients. I asked Mike if he would recommend Butrans to patients taking immediate release opioids that arent controlled and patients can talk to their HCP's about Butrans? Mike said he'll take the booklets and talk to Rob,Pharmacy Mgr,to see if he can do that. Mike said I should follow-up with Rob next week, as he keeps all savings cards and meets with Reps.left my card again for Rob.
PPLPMDL0020000001	Cleveland	OH	44109	11/4/2011	I talked to Tony,RN,as dr was busy with patients,showed Tony Butrans visual aid,discussed appropriate patients to start on Butrans,titration and discussed side effects,Tony said they have a lot of patients in PM&R taking immediate release opioids that would be appropriate for Butrans.Tony said insurance is the biggest challenge,they have a lot of medicaid patients,talked to Tony about Caresource patients trying Butrans and discussed medicaid PA requirements for Butrans.focused Tony on BWC and commercial insurance plans.asked Tony if he would recommend Butrans to the HCP's in dept,since she asks patients how their pain level is when they come in for a visit,Tony said she will do that because majority of patients pain levels stay the same or worsen every time they are seen even with physical therapy,exercise,injections,etc..
PPLPMDL0020000001	Macedonia	OH	44056	11/4/2011	Spoke with floater pharmacist & discussed Butrans appropriate patient type. Also reviewed dosing & titration after 3 days to a maximum of 20mcg. Also pointed out section 2.4 of FPI, letting her know that patients can take supplemental analgesia as opioid or non-opioid medication if necessary. Discussed savings via e-voucher & OxyContin savings cards.
PPLPMDL0020000001	Mayfield Heights	OH	44124	11/4/2011	Spoke to Jessica about the indication and positioning of butrans. She is fairly new to this store and she may have seen one script for butrans so far. I discussed the formulary coverage and the proper application and disposal of butrans. I asked about the volume of oxycontin scripts. She sees some but not a whole lot relative to other narcotics. She has just about all strengths.
PPLPMDL0020000001	Cleveland	OH	44113	11/4/2011	showed dr BUP3015,discussed inclusion criteria and 30% reduction in pain,asked dr if she felt this was clinically significant? dr said yes any reduction in pain is good.dr said she's not had any patients ask for something different lately so she's not thought of Butrans.asked dr if patients taking tramadol or vicodin ever say that the 1st dosage strength isnt controlling their pain? dr said yes she hears that.told dr thats where she can place Butrans,right after the 1st dose of short-acting opioids arent controlling pain.dr said ok thats something for her to think about.dr asked about insurance coverage for medicaid patients,we discussed medicaid and commercial plan patients.talked to dr about OxyContin being an appropriate option for patients,showed conversation guide and discussed formulary coverage for OxyContin.dr said she doesnt have many patients on OxyContin but appreciated info. recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44111	11/4/2011	I asked Dr why he has not gained experience with Butrans yet. He said to keep reminding him about it and he is going to give it a try. I reviewed the managed are and that Medicaid may be paying for Butrans. I asked what other info he needs and he said he will give it a try.
PPLPMDL0020000001	Lyndhurst	OH	44124	11/4/2011	Dabblers. I reviewed the butrans indication and positioning after tramadol or before going to vicodin or oxycontin. He said he wrote a couple fo scripts and said the medication was too expensive - \$300 in fact. I asked what coverage the patient had. He said it was medicare. I told him that medicare will not cover and to focus instead on the commercial plans(per the grid) and be sure to give patients a savings card. He said he will try. Reminded him of the oxycontin patient indication and preferred coverage.
PPLPMDL0020000001	Cleveland	OH	44109	11/4/2011	worked family medicine and internal medicine - just left Butrans fpl's,initiation guides,patient info booklets and formulary grids for each doctor as i couldnt see them.

PPLPMDL0020000001	Cleveland	OH	44113	11/4/2011	dale,pa,said he's starting more patients on Butrans and its been easy. dale said he tells patients they will start on Butrans,rotate patch once a week and some patients get immediate releae opioids and others dont.dale said no complaints so far from patients so he's happy.i asked dale if he'll continue identifying patients to start on Butrans? dale said yes.focused dale on BWC and commercial plan patients.we discussed caesource updates.recommended Senokot-S
PPLPMDL0020000001	Independence	OH	44131	11/4/2011	NON-PRESCRIBER- Quick window call- Let Dr Pai know about Medicaid updates including prior authorization with Medicaid plans like CareSource. He thanked me, waved, & walked away. I asked Jill (MA) to help remind him of this & she said she would do her best.
PPLPMDL0020000001	Sagamore Hills	OH	44067	11/4/2011	TRIALIST- Spoke with Binka & Fran (MA) & discussed savings cards for Butrans & OxyContin. Reminded them of eligibility requirements & that they cannot be used for patients with any type of government insurance. Also gave them OTC samples, recommending Senokot-S for medication-induced constipation. I asked them to give Dr Scanlon the "Experience" invite & asked them to encourage him to log on for Butrans information & interactive programs. They agreed to give the invitation to him.
PPLPMDL0020000001	Beachwood	OH	44122	11/4/2011	REPEAT CUSTOMER- Spoke with Tricia (MA) who said Dr Tabbaa had already left for the evening. Discussed savings cards for Butrans & OxyContin & gave her an "Experience" invitation. I explained the online activities to her & asked her to give the invitation to Dr Tabbaa & encourage him to log on. She agreed.
PPLPMDL0020000001	Sagamore Hills	OH	44067	11/4/2011	NON-PRESCRIBER- Quick call- Dr Lenox said he had no time to stop today. Positioned Butrans for patients with a chronically painful condition such as back pain or osteoarthritis who are not well-controlled on tramadol as a once weekly transdermal option. He said he also remembers that it is CIII & walked away.
PPLPMDL0020000001	Independence	OH	44131	11/4/2011	TRIALIST- Debbie said she has a female patient on Smcrg Butrans who reported that she had nausea, headache, sedation, & constipation after starting Butrans. She added that the patient reported that after staying on Butrans, these symptoms resolved, so she elected to stay on Butrans & did not discontinue. Debbie added that the patient reported a decrease in pain from a constant 8 to a 6, which the patient said she was happy with as it allowed her to "live". She said that she is considering titrating the patient to a 10mcg dose but wants to be conservative. Debbie said her patients love the pain relief they get with Butrans. She said this has made her very enthusiastic about buprenorphine & Butrans. She said when she identifies a potential Butrans patient, she gives them the patient information booklet & has them follow up with her after reading it, coming back to review the information with her. She said at that point, every patient she has offered it to has decided to start on Butrans. I told her she is doing the right thing & that patient counsel & setting expectations is important. She committed to continuing to select Butrans patient & prescribe accordingly.
PPLPMDL0020000001	Sagamore Hills	OH	44067	11/4/2011	TRIALIST- Dr Gemma said she still just has one patient on Butrans. She reminded me about the patient she had told me about, with chronic back pain who was awaiting surgery. I asked what type of feedback she has gotten from him. She said he is doing well on Butrans. She added that she really has not seen many patients with pain lately. I asked if that means she has no clinical reason not to prescribe Butrans & she said yes. She added that she would have no hesitation with prescribing Butrans if someone appropriate does present with pain. I asked if she would ever use Butrans after a patient is not controlled on tramadol. She said she would prefer putting someone on Butrans then, to avoid a patient taking short-acting medications like Vicodin or Percocet around-the-clock. I reminded her that Butrans is still a CIII opioid with abuse/addiction potential. Also discussed formulary coverage & savings cards. I asked her what her experience has been with OxyContin. She said she never writes it because she does not have a lot of pain patients, but that I should talk to Dr Lango, because she prescribes a lot
PPLPMDL0020000001	Sagamore Hills	OH	44067	11/4/2011	NON-PRESCRIBER- Dr Sevier said he still has two patients on Butrans. I asked what type of feedback he has received from them. He said the patients are both doing well on it. I asked what made him think of Butrans for them. He said such as osteoarthritis & cannot take NSAID's due to stomach upset & neither tolerated Vicodin either. I told him it sounds like he is choosing good patient types to try. I asked what he typically prescribes for a patient after NSAID's or COX-2's. He said usually tramadol. I asked him if he would use Butrans if/when that patient is no longer well-controlled on tramadol. He agreed this would be an ideal place to use Butrans, before putting the patient on Vicodin around-the-clock. Discussed dosing & managed care/savings cards. He said he still has some savings cards & is still interested in knowing when Medicare D plans start to pay for Butrans since that is really where he wants to use it. I let him know that Part D plans Summacare & Aultcare in the Akron/Canton area have added Butrans as tier 3 with no restrictions. He said he hopes other larger plans follow suit. Discussed OxyContin q12h as an option for patients beyond Butrans 20mcg.
PPLPMDL0020000001	Cleveland	OH	44113	11/4/2011	talked to dr about 5 Butrans core selling messages,asked dr what features of Butrans really stood out to her? dr said she likes that Butrans has transdermal delivery and likes the once weekly dosing.dr said some patients might like this option but majority of her patients prefer pills only and wont like a patch.showed dr BUP3015,discussed inclusion criteria and asked dr if a 30% reduction in pain was clinically significant? dr said yes it was and 30% reduction in pain was impressive.i asked dr if it was clinically significant enough for her to prescribe Butrans? dr said yes she will consider it and think of patients coming in today and next week.discussed initiation and titration of Butrans and focused dr on commercial plan patients.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	11/4/2011	showed dr Butrans visual aid,discussed 5 core selling messages.dr said he does have patients taking vicodin and percocet that arent always controlled and ask for something else,so he could consider Butrans for them.i asked dr how often he hears from patients that their short-acting opioids arent controlling their pain? dr said usually every day patients say their pain is the same or worse and they want more pills or higher dosage strength of vicodin or percocet.we talked about initiation of Butrans,titration and focused dr on commercial plan patients.asked dr if he has 1-2 patients like we discussed that he can start on Butrans today? dr said he might have 1 today but isnt sure.dr said he'll think about it and see who comes in next week.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	11/4/2011	dr said her patients on Butrans are doing well,they are functioning better and pain is decreasing.dr said she's continually starting patients on Butrans because she's seeing the clinical reductions in Butrans that she's not seen with other short-acting opioids.dr said biggest challenge is that patients still want their pills as they believe the pills control their pain.dr said when she talks to patients about Butrans she tells them its once a week and a patch and she usually gives some immediate release like vicodin or percocet for patients to have for breakthrough pain.we discussed titration of Butrans and side effects,dr said when patients ask her what are the side effects of Butrans? dr said she tells patients the side effects of Butrans are like other opioids.dr said she gives patients the Butrans patient info booklets but prefers not to get in detail about side effects because she believes patients will put it in their mind and create certain side effects.focused dr on BWC and commercial insurance plans and asked dr if she has more patients like the one's she's started already,to start on Butrans? dr said yes she does and will continue prescribing Butrans.recommended Senokot-S
PPLPMDL0020000001	Mayfield Hts	OH	44124	11/4/2011	Prospect. I described the appropriate butrans patient type as one taking vicodin 5/323 4-6 times/day for low back back and asked doc if he has patients like this. He said he is sure he does. I reminded him that he previously expressed interest in trying butrans. He said he just doesn't think about it for some reason. I reminded him of the BWC and commercial coverage. I also discussed the the positioning after tramadol failures, after 20mcg max of butrans, that would be appropriate to go to a low dose oxycontin. I gave him an initiation guide and he said he has to remember to write it.
PPLPMDL0020000001	Cleveland	OH	44113	11/4/2011	showed dr BUP3015,asked dr if a 30% reduction in pain was clinically significant? dr said yes.dr said he likes that Butrans is a patch as some patients may prefer this but overall most of his patients want their pills.we talked about dr starting patients on Butrans but still giving patients some short-acting opioids,showed FPI,maintenance of therapy section,dr said ok he'll think about it.dr asked if Butrans was covered on medicaid? we discussed medicaid,caresource and commercial plan patients trying Butrans.i asked dr if he had a few patients today that he could start on Butrans? dr said he didnt know would have to think about it and asked i speak with Patty,his MA,to share insurance info with her.we talked about OxyContin being an option for patients that are ready for a long-acting opioid and who perhaps want only their pills and wont try Butrans.dr said he writes a lot of OxyContin and will continue to do so as its covered on insurance plans.recommended Senokot-S
PPLPMDL0020000001	Parma	OH	44129	11/7/2011	PROSPECT- Reminded Dr Rossi about previous conversations about Butrans & delivered overview. Presented "Initiations" program. Discussed various case studies within the presentation. I asked if she would prescribe Butrans for a patient right after NSAID's/COX-2's or if she would be more likely to prescribe something like tramadol first. She said she would prescribe something short-acting first. Discussed inclusion criteria & presented initiation/titration guide, showing her how she would start this patient type depending on their current daily tramadol dose. I asked her if she sees patients like the ones in the "Initiations" program on a regular basis in her practice. Discussed Butrans as a CIII once weekly transdermal option for these patients. I asked if she would try Butrans on someone like the patients we discussed. She said she would. She added that she has some patients who are 80-85 who may be candidates. Discussed managed care coverage for Medicare Part D as well as reviewing commercial & Medicaid coverage. Focused her on patients who are working or who have Medicaid who are not well-controlled on tramadol. Let her know that OxyContin may be an option for appropriate patients who have Medicare Part D coverage.
PPLPMDL0020000001	Cleveland	OH	44195	11/7/2011	worked neurology dept-left Butrans fpi,initiation guide,patient info booklet,formulary grid,web conferences for Butrans and my business card-for dr kriegler,dr mays,dr stillman and dr spears. worked internal medicine - left same info for dr weiss.
PPLPMDL0020000001	Cleveland	OH	44113	11/7/2011	talked to dr about how he decides if patients get a refill of short-acting opioids or start on Butrans? dr said if patients are taking 4 vicodin 5/325 a day and arent controlled,he's talking to patients about Butrans.dr said some patients take 4-5 vicodin/day so he thinks Butrans is a perfect fit there.dr said patients seem to be doing well on Butrans,no complaints so far.i asked dr if he can find a few patients this week,per our discussion,and start them on Butrans? dr said yes he'll keep looking for patients to start on Butrans.focused dr on commercial,BWC and discussed Caesource patients trying Butrans.
PPLPMDL0020000001	Cleveland	OH	44113	11/7/2011	talked to dr about what he says to patients when describing Butrans.dr said he tells patients its a patch and its convenient as they only change patch once a week.dr said he's given Butrans patient info booklets to patients to read and will be following up with patients.i asked dr to focus on patients coming in this week,that are taking vicodin daily but not controlled and asking for more pills,instead of refilling their vicodin,asked dr to start them on Butrans.dr said he will do that but a lot of patients want their pills.we talked about dr giving vicodin for breakthrough pain and starting patients on Butrans,showed FPI section 2.4,dr said ok he'll keep that in mind.focused dr i talked to Nate,Pharmacist,about 5 Butrans core selling messages and Nate said he likes that Butrans is a patch and dosed 1x week as some patients may prefer this over pills.we talked about patients taking short-acting opioids while wearing Butrans,showed FPI,section 2.4 maintenance of therapy section,Nate said ok.i asked Nate if he would give patients the Butrans patient info booklets,if they arent controlled on short-acting opioids? Nate said yes he will do that as that may help patients talk to their doctors about Butrans. we discussed OxyContin stocking and recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44114	11/7/2011	talked to Joel,Pharmacist,about 5 Butrans core selling messages and Joel said they havent seen any Butrans Rx.Joel said he likes that Butrans is a patch and dosed once a week as some patients may like that.i asked Joel if he would give patients the Butrans patient info booklets,if they are taking immediate release opioids and not controlled? Joel said he will do that but asked if medicaid covered Butrans? we talked about Medicaid PA requirements for Butrans,commercial and BWC patients trying Butrans.we discussed OxyContin stocking and recommended Senokot-S
PPLPMDL0020000001	Parma	OH	44134	11/7/2011	TRIALIST- Reminded Dr Mandat of our last conversation when he told me that his latest trials of Butrans have been for patients who have failed tramadol & asked if he is continuing to try that type of patient. He said he just had a patient who he switched from codeine to Butrans. He added that the patient has Medicare/Medicaid coverage & that he has not heard back on whether or not the patient could get it. I told him this sounded like an ideal patient to try on Butrans & asked if he would continue to identify patients like that. He said he would keep it in mind. Spoke with his medical assistant who said Dr Mandat prescribed Butrans for her 88 year-old great aunt who she cares for. She said Butrans has stopped her aunt's crying from pain in her wrist. She also said Dr Mandat plans to titrate her to the 10mcg dose on Thursday.
PPLPMDL0020000001	Cleveland	OH	44114	11/7/2011	talked to dr about what patients say to him in exam room,that triggers dr to think Butrans is an option for patients.dr said if patients say their immediate release opioid's not working,not controlling their pain,not lasting long enough or they want more pills.dr said he's thinking of Butrans.dr said he's been focused on his percocet patients converting to Butrans and so far patients are doing good on Butrans.i asked dr if he would consider Butrans for patients taking vicodin daily but not controlled? dr said he will do that and has to remember to do that.dr said to remind John,PA,about patients taking vicodin but not controlled and to start them on Butrans.focused dr on BWC and commercial plan patients starting on Butrans.
PPLPMDL0020000001	Cleveland	OH	44106	11/8/2011	talked to dr about how Butrans fit into his practice.dr said he doesnt talk to patients about Butrans unless they are in the exam room saying they want something different.i asked dr if he will start patients on Butrans when their tramadol isnt controlling their pain and patients could be asking for more pills? dr said he will consider that instead of just refilling tramadol.we talked about dr starting patients on Butrans but still giving some tramadol for breakthrough pain.dr said he will keep that in mind.dr said he likes that Butrans is a patch,different technology and asked about medicaid coverage? we talked about caesource patients trying Butrans and focused dr on commercial plan patients to start on Butrans.i asked dr if he will start a couple patients this week.dr said he will do that.dr said biggest challenge is he needs reminders that Butrans is there.gave dr initiation guide and showed patient info booklet application/rotation of Butrans section and discussed this info with dr.we talked about OxyContin being an option for appropriate patients,showed conversion guide and discussed a few conversions,dr said he writes a lot of OxyContin and is very comfortable with OxyContin.recommended Senokot-S

PPLPMDL0020000001	Cleveland	OH	44109	11/8/2011	dr said he's started a couple patients on Butrans,but they were dr carson's so he was just approving them with Caresource.we talked about appropriate patients to start on Butrans,initiation and titration of Butrans and dr said he's talking to patients about Butrans,just taking him longer to get started with writing Butrans.i told dr that was fine,i'm confident he has the patients in his practice that he can start on Butrans and he'll get there,dr said he appreciated that and will get some patients started on Butrans.focused dr on BWC and commercial plan patients to start on Butrans.we talked about OxyContin being an option for patients if they are ready for a long-acting opioid and dont want to try Butrans first or if dr just feels OxyContin is the right choice for patients.discussed OxyContin formulary coverage with dr and recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44103	11/8/2011	i talked to Eric,new Pharmacist,about Butrans stocking and Eric confirmed they received 1 Rx for Butrans a few months ago but nothing since then,Eric checked the shelf and they have several cartons of Butrans 5mcg but no Rx.Eric said he wasnt sure what the indication was for but thought Butrans was for chronic pain.i showed Eric Butrans fpi,discussed black box warning,section 2.4 maintenance of therapy section,showed initiation guide and discussed appropriate patients to start on Butrans and titration.i asked Eric if he would give patient info booklets out to patients so that they can talk to their HCP's about Butrans,if they are taking immediate release opioids daily for chronic pain and not controlled, Eric said he would do that as Butrans seems like a good option for patients.we discussed insurance coverage for Butrans,Eric said mainly medicaid here,minimal commercial or talked to Nagla,PA,about appropriate patients to start on Butrans,showed visual aid,discussed initiation and titration of Butrans,Nagla said dr carson and dr celeste have started a couple patients recently and its been going good with patients understanding what Butrans is since she gives Butrans patient info booklets to educate patients.i asked Nagla if she would continue recommending Butrans to the HCP's,when patients are appropriate? Nagla said yes she would do that.focused Nagla on BWC and commercial plan patients.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44195	11/8/2011	talked to Kathy,PA,about appropriate patients for Butrans and Kathy said more HCP's are prescribing Butrans thats why she requested savings cards.i focused Kathy on BWC and commercial plan patients and we talked briefly about Caresource patients trying Butrans.Kathy said she'll try it and see what happens.i asked Kathy to continue recommending Butrans for appropriate patients,we discussed initiation,titration and importance of handing out Butrans patient info booklets to patients.Kathy took all of the info and had to go but said she appreciated the information and would call me with any questions.
PPLPMDL0020000001	Cleveland	OH	44130	11/8/2011	Spoke with Jessica (pharmacist) & showed FPI 2.4, discussing ability of patients on Butrans to take supplemental analgesia. Let her know that some retail systems have alerts that appear if Butrans is prescribed with an opioid. She asked if patients could take opioids as supplemental analgesia. I told her yes. Also discussed appropriate Butrans patient type, focusing on patients who fill prescriptions month after month for 60 tramadol or Vicodin or who start on 60 per month & escalate to 90 or 120 per month. I asked if she ever makes a recommendation to a patient or physician if she notices something like this. She said she does not proactively recommend product switches, but she might reactively mention something to a patient. Verified that she has 5 & 10mcg strengths on her shelf. Discussed OxyContin savings cards & gave her one package of cards. Reviewed eligibility
PPLPMDL0020000001	Cleveland	OH	44104	11/8/2011	dr said she emailed her 1 patient after our lunch last week and told the patient to go to the pharmacy as she was increasing the patients dose of Butrans to 20mcg.i asked dr if she had more patients,like this 1 patient,to start on Butrans? dr said this patient was smart and could grasp that Butrans was a patch and she had to rotate it once a week,not all of her patients can remember to do this.i asked dr how it was clinically relevant to continually give these patients pills then if she felt this way? dr said her percoet patients just want more and more pills it never ends.i talked to dr about patients taking percoet 1-2 5/325 daily and not controlled asking her for something else,she has option of starting these patients on Butrans,and still giving some immediate release opioid for breakthrough pain,dr said she may have some patients like this but will have to think about it.i focused dr on commercial plan patients trying Butrans and using Butrans patient savings cards and talked to dr about her caresource patients trying Butrans.dr said ok she'll start more patients but she was happy with the 1 patient she did start on Butrans now that she's on the right dose.
PPLPMDL0020000001	Cleveland	OH	44130	11/8/2011	TRIALIST- I told Dr Diab I just had a short message for him today: Butrans once weekly, schedule III, for patients who are no longer controlled on tramadol or Vicodin. He stopped to look at torso demo. Discussed application sites. He thanked me & walked into a room.
PPLPMDL0020000001	Mayfield Hts	OH	44124	11/8/2011	Window call....gave doc an initiation guide and asked him for 2 new patients starts on butrans this week. I asked him to prescribe for patients with commercial insurance and give a savings card.
PPLPMDL0020000001	Cleveland	OH	44143	11/8/2011	Spoke to Angela as doc was out today. She said that doc started one patient on butrans but had to be switched back to vicodin because he could not afford it. The patient had medicaid and also supplemental insurance. Even with his commercial insurance the cost was too expensive. I reviewed the formulary grid and asked her to stick with the listed plans.
PPLPMDL0020000001	Cleveland	OH	44106	11/8/2011	worked anesthesia/pain - dr hayek and dr sahgal call notes
PPLPMDL0020000001	Cleveland	OH	44113	11/8/2011	dr said he's not started anyone on Butrans yet he's concerned insurance companies arent covering Butrans because his MA,Deb,has United Healthcare and she couldnt get it approved by PA.i talked to dr and Deb,MA,about the fact that UH patients do have average co-pay of \$50,as its a Tier 3,but with Butrans patient savings card patients pay \$15 and the card pays up to \$40.i explained that Prescriptions Solutions which is what Deb has does have a PA for Butrans and explained the PA requirements.dr said ok he'll have to think about patients he has and see what patients say about Butrans.i asked dr if he had patients with osteoarthritis or back pain that take tramadol daily but arent controlled and ask for something else? dr said yes he has a lot of those patients. told dr thats a perfect place for Butrans,when patients are saying their tramadol isnt controlling their pain and they want something else,dr said ok that makes sense and he will start a few patients on Butrans and see what happens.talked to dr about importance of initiation on appropriate Butrans dosage strength and titration,showed Butrans patient info booklet and asked dr to focus patient discussion on application/rotation of Butrans.dr said his MA,Deb or Misty,MA would give those to patients.focused dr on commercial plan patients.told dr OxyContin is option for patients after Butrans 20mcg isnt controlling pain or if patients dont want to try Butrans but are ready for long-acting opioid,dr said ok he does Rx OxyContin
PPLPMDL0020000001	Cleveland	OH	44109	11/8/2011	dr said he started another patient on Butrans,was a Caresource patient and it was approved so he's going to think of a few more patients like this that he can start on Butrans.we talked about patients with 1 of the pain conditions,pg.11,visual aid,dr focused on low back pain patients.dr said its challenging to treat chronic pain and a lot of patients just want their pills.we talked about dr starting patients on Butrans and still giving immediate release opioids for breakthrough pain,dr said ok he has to remember that focused dr on BWC and commercial plan patients and asked dr if he will see a couple patients this week that he can start on Butrans? dr said probably so he has to think about it.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44130	11/8/2011	TRIALIST- Dr Fedorko said he really does not have a lot of patients who he can put on Butrans. I asked him if he has patients for whom he refills Vicodin or tramadol monthly. He said yes. I asked why not try some of those patients on Butrans. He said they are "hooked" on what they are taking & will not change. Discussed patients who are not well-controlled on current short-acting medication like Vicodin or tramadol. He said he does not think anyone has pain every day. I asked what about patients with osteoarthritis or spinal stenosis. He said usually they are not in pain every single day where they would need something forever. I asked if he would use Butrans for someone who needed pain medication for a few months. He said yes. Reminded him that Butrans is CIII opioid with abuse/addiction potential. Let him know that as a CIII, Butrans can be called in & refills can be written. He said he did not know this & he thought it was the same class as fentanyl. He said this changes his thoughts & now he thinks there is more of a place for Butrans. He asked about cost- discussed insurance coverage & savings cards. Discussed dosing & application sites.
PPLPMDL0020000001	Parma	OH	44134	11/8/2011	LOYALIST- Dr Hernandez said the patient he had told me about who started at the 5mcg & was titrated upward to a 20mcg dose was doing well. He added that the patient needed "just a little more" than 20mcg, so he told the patient to cut a 20mcg patch in quarters & use one 20mcg patch plus one quarter & she is doing well. Reminded him that this is not recommended & that Butrans has not been studied like this. He said he knows but it works, so he plans to continue to do this. I asked him what his trigger generally is to offer Butrans. He said usually new patients, such as those who come from the chiropractor. He said that is why most of his patients start on a 5mcg dose. Told him this is correct. He told stories of patients who are doing very well on Butrans & it has changed patients' lives for the better. He also said he has a patient who was taking OxyContin who he switched to Butrans & is doing well. Thanked him for his continued support & business & asked that he continue to do as he has been. He agreed.
PPLPMDL0020000001	Euclid	OH	44132	11/8/2011	Repeat. Doc said he has not written enough of butrans and asked me to go over the formulary coverage again as he keeps forgetting. I explained that state BWC is covering but private employer self payers may not. He said he does have some medicaid as well. Informed him that Caresource is covering butrans after failure on tramadol/vicodin/hydrocodone. Rereviewed the commercial plans and the savings cards. I asked him to prescribe butrans after tramadol failures and to discussed how to initiate butrans. Explained that low dose oxycontin would be an option for medicaid patients and after max doses of butrans. He said he will try to write more.
PPLPMDL0020000001	Cleveland	OH	44124	11/8/2011	Quick call....Reminded doc of the patient types for butrans as well as oxycontin. I explained the both are being covered by BWC. Confirmed that he does have some medicaid patients. Let him know that Caresource is covering butrans after failure on tramadol/codeine/vicodin.
PPLPMDL0020000001	Cleveland	OH	44195	11/8/2011	worked neurology dept-left BUP3015,initiation guide,patient info booklet,patient savings card flashcard,formulary grid and webinar flyers for Nov.2011 for Butrans,with my business card for Dr.Bamford, worked chronic pain-left same info for Dr.Covington and Dr.Mathews. worked anesthesia-left dr mekhail, dr cheng and dr vrooman all of the above info as you cant see any HCP's must leave info at front desk. worked rheumatology-left dr deal,dr long,betsy kirschner,np,dr calabrese,patty paczos,pa and dr chatterjee all of the same Butrans info at front desk
PPLPMDL0020000001	Mayfield Heights	OH	44124	11/8/2011	Window call....reminded doc of the butrans coverage - commercial, BWC and now on Caresource after tramadol failures. Provided Formulary reminder for butrans and oxycontin.
PPLPMDL0020000001	Lyndhurst	OH	44124	11/8/2011	Repeat. Doc said she has not had any problems/issues with the recent scripts she wrote for butrans. She said she wrote them for patients that were previously on tramadol. I reminded her that 10mcg would be an appropriate starting dose if patients were taking 300-400mg of tramadol. She said she tried writing the 5mcg but found that she had to increase the dose right away. I asked her to continue to prescribe butrans for that patient type. She confirmed that she has a few caresource/medicaid patients. I told her that Caresource is covering butrans after failure on tramadol/vicodin/codeine. Reminded her of the oxycontin patient type and the dr said he started a few patients last week on Butrans and is seeing good results with Butrans.dr said patients are having a decrease in their pain and seem to be improving in their general functioning so he's happy,we talked about challenges of treating chronic pain conditions,showed visual aid,pg.11,dr said if patients are taking vicodin or percoet every day and not controlled and come to him asking for more pills,he's talking to them about Butrans.dr said the only challenge is that he has a lot of medicaid patients so that prevents him from starting more patients on Butrans.we talked about caresource patients trying Butrans and i told dr to focus on commercial plan patients for Butrans initiation,dr said ok he will continue talking to patients about Butrans.we talked about OxyContin being an option for those patients after Butrans 20mcg isnt controlling patients pain or for those patients that dr feels are appropriate to start on OxyContin instead of Butrans,dr said he still starts some patients on OxyContin and had all of the info he needed on OxyContin,showed conversion guide and we talked about a few conversions,i asked dr to continue prescribing OxyContin,dr agreed,showed formulary grids for OxyContin.recommended Senokot-5
PPLPMDL0020000001	Parma	OH	44129	11/8/2011	NON-PRESCRIBER- I reminded Dr Taylor that she had told me that she had prescribed Butrans for a patient & inquired if she has had any feedback. She said not yet. She said this patient was on 3 7.5mg Vicodin per day, so she started her on the 10mcg Butrans. I showed initiation guide pg 6 & told her she did exactly what she should have. I asked if she allowed the patient to have any supplemental analgesia. She said no. I asked how many patients she has like this. She said maybe one other because she is getting rid of patients who are drug seeking. I agreed that she should be cautious in prescribing opioids, including Butrans, as it does have abuse/addiction potential. Asked if she has patients who she refills Vicodin month after month for. She said yes. Positioned Butrans for patients who are taking 3 Vicodin per day but who are coming back to her saying it is not quite controlling their pain, instead of referring them out. She agreed that using Butrans as a "last resort" before referring out would be a reasonable place to use it. I asked if she would prescribe Butrans for these patients & she agreed. Showed her torso demo & 3 patch sites, along with demo 5mcg patch. Also discussed heat warning. She said she uses OxyContin but is not prescribing any new, just continuing patients who are already on it.
PPLPMDL0020000001	Mayfield Village	OH	44143	11/8/2011	Quick call.... I reminded HCP of the butrans patient type - after tramadol- and the starting dose of 10mcg if they have failed on 300-400mg of tramadol. I asked her if she is seeing these types of patients. She said yes but the cost is the issue. Gave her a formulary grid and asked her to focus on patients with these plans.
PPLPMDL0020000001	Cleveland	OH	44109	11/9/2011	dr said he doesnt really have many patients on narcotics so he doesnt feel Butrans will be a fit in his practice.showed dr Butrans visual aid,we talked about appropriate patients and dr said he'll keep Butrans in mind in case anyone is ever appropriate in his practice.dr took fpi and patient info booklet.
PPLPMDL0020000001	Cleveland	OH	44109	11/9/2011	dr said he's not started anyone on Butrans but likes the idea of a patch for chronic pain patients as he would like to decrease their short-acting opioids.talked to dr about BUP3015,showed clinical reductions and asked dr if a 30% reduction in pain was clinically significant? dr said yes! any reduction in pain is good for patients and he doesnt always see a 30% reduction in pain with short-acting opioids.i asked dr if this was clinically significant enough for him to Rx Butrans? dr said yes it was but he doesnt have many patients taking narcotics for chronic pain.i talked to dr about initiation and titration of Butrans for appropriate patients and asked dr if he will see a couple patients this week that he could start on Butrans? dr said he might but would take the info and see if he has anyone in mind.we talked about commercial plans,BWC and Medicaid coverage for Butrans.
PPLPMDL0020000001					

PPLPMDL0020000001	Cleveland	OH	44109	11/9/2011	dr said she's PGY-1 and hasn't heard of Butrans, showed dr Butrans fpi and visual aid and we discussed black box warning, appropriate patients, initiation and titration of Butrans. dr said she sees a lot of patients taking short-acting opioids daily but they are never controlled and always want more pills. i talked to dr about her option of starting patients on Butrans and giving immediate release opioids or non-opioid therapies, dr said ok she'll try it with a couple patients and see what happens. we talked about insurance coverage, focused dr on commercial insurance plans and we discussed Medicaid's PA requirements.
PPLPMDL0020000001	Cleveland	OH	44103	11/9/2011	dr came to front desk, said she was too busy to talk but i asked dr how she's treating chronic pain conditions, showed pg.11 visual aid? dr said initially with short-acting opioids and then long-acting as she prefers long-acting opioids. dr said she started a couple more patients on Butrans and patients are doing good on Butrans so far. asked dr to focus on commercial plan patients or Medicaid that meet PA requirements, discussed the pre-requirements for Butrans. dr said ok and i asked dr if she'll continue starting more patients on Butrans? dr said absolutely she will do that. told dr she still has option of OxyContin for appropriate patients, showed conversion guide and dr said she's good with savings cards and is still starting patients on OxyContin.
PPLPMDL0020000001	Cleveland	OH	44109	11/9/2011	dr said he's not started anyone on Butrans but does remember that it's a patch and dosed once a week. dr said he still has my information on Butrans from my last lunch but Medicaid is biggest population here so it's a challenge to Rx Butrans. i talked to dr about PA requirements for Medicaid and we discussed Caresource patients trying Butrans, told dr commercial plan patients and BWC should be focus at this point, dr said ok. showed dr Butrans visual aid, talked about 5 core messages, dr said he likes that it's a patch and dosed once a week as some patients may prefer this delivery of medication. dr said being a CII is much better so that he can call in refills. dr said to leave Butrans fpi again and he'll look it over and contact me with any questions. i asked dr to focus on 1-2 patients, looking at dosage ranges in visual aid for appropriate patients, to start on Butrans, dr said he will consider it and keep it in mind as an option.
PPLPMDL0020000001	Cleveland	OH	44109	11/9/2011	dr said she didn't know anything about Butrans, gave fpi, showed visual aid and we discussed 5 core selling messages. dr said she was surprised to see that Butrans being a long-acting opioid was a CII and she liked that so she could call in refills. dr focused discussion on once weekly dosing of Butrans and appropriate patients. i asked dr if she has any patients she feels that Butrans could be an option for, this week? dr said she might and asked about insurance coverage? we discussed commercial and BWC and dr asked about Medicaid as that's biggest population here and cash paying. i told dr to focus on commercial but explained PA requirements for Medicaid patients. dr said ok she'll keep Butrans in mind as an option for patients.
PPLPMDL0020000001	Cleveland	OH	44109	11/9/2011	dr came in quickly for food and said she's not prescribed Butrans and doesn't really have many patients on opioids at this time. dr said she would take the Butrans fpi and look it over. i showed dr BUP3015, opioid experienced clinical trial, and asked if a 30% reduction in pain was clinically significant? dr said yes any reduction in pain is good for patients. i showed dr the results of this trial and told her that what her patients could potentially see with Butrans. dr said ok she will look over all of the info and consider Butrans if anyone is appropriate. dr took formulary grid as she asked about Medicaid patients getting Butrans, talked to dr about PA requirements for Medicaid and Butrans and we discussed Caresource patients trying Butrans, dr said ok and left.
PPLPMDL0020000001	Cleveland	OH	44113	11/9/2011	worked pain management dept
PPLPMDL0020000001	Cleveland	OH	44109	11/9/2011	dr said he doesn't have a lot of patients on narcotics but likes that Butrans is transdermal and dosed once a week. dr said he'll keep Butrans in mind if he has any patients that are taking the short-acting opioids and not controlled and asking him for more pills. gave dr Butrans fpi and he took patient info booklet.
PPLPMDL0020000001	Cleveland	OH	44109	11/9/2011	worked family medicine dept - had lunch with 26 attendees, 15 HCP's; worked internal medicine and pharmacy
PPLPMDL0020000001	Cleveland	OH	44109	11/9/2011	dr was at lunch and said he remembered me talking to the residents last month about Butrans but he doesn't really see many adults, it's mainly children. i told dr that Butrans isn't approved for anyone below the age of 18 yrs. dr said ok but he wanted to look at fpi again and just keep it in mind in case he sees any adults that meet Butrans indication and he can start them on Butrans. gave fpi
PPLPMDL0020000001	Cleveland	OH	44109	11/9/2011	dr said she remembered that Butrans was transdermal but that was it. i showed dr Butrans visual aid, discussed 5 core messages and asked dr what features of Butrans stood out to her? dr said she likes that Butrans is a patch and is dosed once every 7 days. dr asked if patients can still take short-acting opioids with Butrans? i showed dr FPI, section 2.4, maintenance of therapy, and told dr she can give patients immediate release opioids or non-opioid therapies, dr said ok. showed dr pg.11, visual aid, pain conditions and asked dr when looking at these conditions, which one's did she see most often? dr said there are a lot of back pain and arthritic patients. i told dr those are the 2 pain conditions we studied, showed dr BUP3015, opioid experienced patients, and discussed 30% reduction in pain and asked dr if that was clinically significant? dr said yes any reduction in pain is good for patients. i asked if this was clinically significant enough for her to prescribe Butrans? dr said yes she will consider Butrans for patients but she doesn't have a lot of patients on narcotics now. dr took fpi, BUP3015 and patient info booklet. dr asked about insurance coverage for Butrans? showed formulary grid and focused dr on commercial plan patients trying Butrans, we discussed PA requirements for Medicaid patients and we talked about Caresource patients trying Butrans. dr said ok she will talk to some patients and see what happens.
PPLPMDL0020000001	Cleveland	OH	44109	11/9/2011	dr said she just read something about Butrans yesterday. in family medicine dept that i left a month ago and she wanted to start patients on Butrans but she thought you needed a special license to Rx Butrans. we talked about 5 Butrans core selling messages and dr was surprised to hear that Butrans was a CII and she said that was great because she could call in refills for Butrans. dr said she knows this is only approved for chronic pain and that's great because she has a lot of patients taking immediate release opioids that she feels Butrans would be appropriate for. showed dr Butrans visual aid with dosage ranges and talked about initiation and titration of Butrans. we discussed commercial plan patients trying Butrans and using Butrans patient savings cards, also talked to dr about Medicaid PA requirements and Caresource patients trying Butrans, dr said she will start writing immediately and was so happy to see me today. dr took Butrans fpi, patient info booklets and BUP3015 to review in more detail when she has time. we talked about OxyContin being an option for patients, showed conversion guide and asked dr to continue Rx OxyContin when appropriate, dr said she will but doesn't have many patients on OxyContin. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	11/9/2011	talked to dr about 5 Butrans core selling messages, dr said he remembered Butrans was a patch and for chronic pain but that was about it. i asked dr what features of Butrans stood out? dr said once weekly dosing and transdermal delivery as some patients may prefer this, dr asked if patients could still take pills with Butrans, showed FPI, section 2.4, discussed patients taking immediate release opioids or non-opioid therapies with Butrans, dr said ok. dr asked about insurance coverage for Medicaid patients as that's majority of patients here, talked to dr about PA for Medicaid, told dr he could try starting a few Caresource patients on Butrans and we discussed that info, told dr to focus on commercial plan patients and BWC. dr said ok he will do that. i asked dr if he had any patients he could start this week on Butrans? dr said probably so and would think about it. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44143	11/9/2011	Window call... i discussed the Butrans 7 day delivery and CII status. i explained the positioning after tramadol failures and let him know that Medicaid is covering Butrans. Provided a formulary grid and invite to the Butrans
PPLPMDL0020000001	Cleveland	OH	44109	11/9/2011	dr came in quickly for food and couldn't talk long. showed dr BUP3015, clinical reductions in pain and asked dr if 30% reduction in pain was clinically significant? dr said yes that was any reduction in pain was good. i asked dr if she saw that now when prescribing immediate release opioids? dr said no, usually patients pain levels are the same or worse. i told dr that she could potentially expect to see these results with patients starting on Butrans. dr said ok that sounded great and she would review the study and data later. told dr i would follow up on 11/30/11 at next lunch to answer any questions. i asked dr to start 1-2 patients between now and then on Butrans, dr said ok she will do that. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	11/9/2011	talked to dr about 5 Butrans core selling messages, dr said he remembered Butrans was a patch and for chronic pain but that was about it. i asked dr what features of Butrans stood out? dr said once weekly dosing and transdermal delivery as some patients may prefer this, dr asked if patients could still take pills with Butrans, showed FPI, section 2.4, discussed patients taking immediate release opioids or non-opioid therapies with Butrans, dr said ok. dr asked about insurance coverage for Medicaid patients as that's majority of patients here, talked to dr about PA for Medicaid, told dr he could try starting a few Caresource patients on Butrans and we discussed that info, told dr to focus on commercial plan patients and BWC. dr said ok he will do that. i asked dr if he had any patients he could start this week on Butrans? dr said probably so and would think about it. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	11/9/2011	dr said she remembered a little bit about Butrans but not much, dr said she knew Butrans was a patch. showed dr BUP3015 and visual aid, discussed 5 core selling messages and asked dr if a 30% reduction in pain was clinically significant? dr said absolutely, dr said she has so many patients taking short-acting opioids every day for chronic pain but they aren't controlled and are always asking for something different. i told dr those are the perfect patients to start on Butrans. showed dosage ranges for Butrans initiation and asked dr if she will start a few patients this week on Butrans? dr said she will do that and asked about insurance coverage? i told dr to focus on Commercial plan patients, showed savings cards and asked dr what the biggest population of patients were here? dr said Medicaid and cash paying. we talked about PA for Medicaid and discussed Caresource patients trying Butrans. dr said she will try it in a few patients and see what real world results she gets with Butrans. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	11/9/2011	dr said she started a few patients on Butrans, post our last discussion and patients are doing well on Butrans. i asked dr why she chose Butrans for these patients? dr said they all had chronic pain conditions and were taking Vicodin and Percocet daily but not controlled. dr said she's seeing patients overall functioning improve and she's seeing pain levels decrease from 8-10 to a 3-5 so she and patients are happy. i asked dr if she has more patients like the one's she started, to start on Butrans this week? dr said she probably does, dr asked if anything changed with Medicaid coverage of Butrans? i talked to dr about PA requirements for Medicaid patients and discussed Caresource patients trying Butrans too, dr said ok as that's majority of her patient population. focused dr on commercial plan patients too. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	11/9/2011	dale, pa, said he's starting more patients on Butrans, when patients ask for more pills or say their short-acting opioid's not lasting long enough he's talking to them about Butrans. i asked dale if he has more patients coming in this week that he can start on Butrans? dale said he's sure he will see some patients that he can start on Butrans. focused dale on BWC and commercial plan patients starting on Butrans.
PPLPMDL0020000001	University Heights	OH	44121	11/9/2011	Let doc know about the coverage with Medicaid for Butrans. Explained that patients must fail on tramadol/vicodin/codeine. I asked him to try for a Medicaid patient. He said he would. He asked about commercial coverage and asked if we had a higher 3rd tier co pay. I confirmed the 3rd tier copay but the savings cards saves patients up to \$40. discussed the positioning of Butrans after tramadol and before low dose oxycontin. He said that PA are not going thru for Medicaid patients and that he would start charging patients for PA. I reminded him of the starting dose of 10mcg for patients coming off of tramadol.
PPLPMDL0020000001	Cleveland	OH	44113	11/9/2011	showed dr BUP3015, clinical reduction in pain page and asked dr if a 30% reduction in pain was clinically significant? dr said yes it is and she's seeing greater reductions in pain with patients taking Butrans. dr said she has patients going from pain levels of 8-10 down to 2-3 and overall improvement of functioning. i asked dr if she will continue starting more patients on Butrans? dr said yes she will as she's seeing good results with Butrans. focused dr on BWC and commercial plan patients to start on Butrans. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44102	11/10/2011	talked to Nagla, PA, about appropriate patients to start on Butrans. Nagla said dr Carson started another patient on Butrans this week but there's a PA required by Caresource so she doesn't know if patient will be able to start on Butrans. Nagla said this patient went to the pharmacy with a Butrans script and the Pharmacist refused to fill the Rx because the patient was prescribed Butrans and Vicoprofen. Nagla said the patient called the office and Nagla told the patient it was fine she COULD take both Butrans and Vicoprofen, but the patient was hesitant to try Butrans after the Pharmacist told her this info and she is still waiting for Caresource approval. Nagla said Caresource coverage is their biggest challenge, BWC is only 1% and commercial insurance is about 10-20% here. Nagla asked if Medicaid mutual covers Butrans? showed formulary grid and discussed patient savings card program with Nagla. i asked Nagla to continue identifying patients that are appropriate for Butrans and recommend this treatment option to the 3 HCP's in this office. Nagla said she will do that. focused Nagla on commercial plan patients. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	11/10/2011	i talked to Milos, Pharmacy Tech and Chris, Pharmacist, about Butrans stocking they both said doctors are writing Butrans and they have Butrans in stock. i asked who is writing Butrans? both Milos and Chris said they don't have time to look that info up in computer right now. Rob, Pharmacy Mgr, is gone for day but i can stop back next week and see if he can look that up for me. showed Butrans formulary grid and patient savings card flashcard. i left 2 packs of savings cards as they didn't have any. we talked about 5 core selling messages, focused on appropriate patients, initiation and titration of Butrans. confirmed stocking of OxyContin, appropriate patients for OxyContin and formulary coverage.
PPLPMDL0020000001	Cleveland	OH	44195	11/10/2011	saw dr in hall, dr said he started another patient on Butrans, showed dr Butrans patient info booklet and asked him to focus patient discussion on application/rotation of Butrans, dr said he will do that and has given a few booklets to patients to read about Butrans. i asked dr if he has more patients like the couple patients he started, to start on Butrans this week, dr said he may but will have to look at schedule. gave dr BUP3015, opioid experienced clinical trial showing 30% reduction in pain page and told dr these are the results he can potentially expect to see with Butrans, dr said that was impressive and would consider Butrans for patients. focused dr on commercial plan patients. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44195	11/10/2011	worked anesthesia/pain management - Kathy Kraus, PA and Dr Cheng - in apm dept- see call notes. worked neurology/chronic pain - left Dr Stillman, Dr. Mays and Dr. Krieger Butrans web conferences, FPI, patient info booklets, formulary grids with patient savings card flashcards and my business card for each HCP as i couldn't see them.

PPLPMDL0020000001	Cleveland	OH	44109	11/10/2011	dr said he gave a few patients the Butrans patient info booklets to read and is following up with them.dr said he's not sure if he's saying the right things to patients to "sell it" to them,dr asked how he should explain Butrans to his patients? i asked dr to tell me what HE liked about Butrans and the clinical benefits of Butrans? dr said he likes that Butrans is a patch and dosed once a week.i told dr to share that with patients then if that's how he feels and he can tell patients its a different option than what they have been taking for their chronic pain,dr said ok that sounded easy and he would try saying this to patients.we talked about commercial plan patients trying Butrans so they can use Butrans patient savings cards and BWC patients,dr asked about medicaid patients as he has a lot of them,we talked about PA requirements for medicaid and caresource patients,dr said ok if he has anyone thats appropriate he may try getting the Rx approved.i told dr that was great and was happy to hear that he's at least willing to try starting patients on Butrans.
PPLPMDL0020000001	Cleveland	OH	44109	11/10/2011	worked neurology and rheumatology dept's-they are combined now with arthritis clinic and dermatology-girls from rheumatology said ALL lunches are cut off with Rep's and i can only leave info for doctors moving forward.i left Butrans web conferences,BUP3015,patient info booklet and my business card for Dr.Singer,Dept Chairman of Rheumatology,Dr.Ballou and Dr.Magrey. left dr hanna,Dept Chairman of Neurology the same info; worked pharmacy-see call notes
PPLPMDL0020000001	Mayfield Heights	OH	44124	11/10/2011	Spoke to Giovanni about the movement of butrans. He said he has filled a few scripts, one patient that has been refilled. He said the patient was a medicare patient but only paid about \$9 and must have had a PA. I discussed the use of supplemental analgesics with butrans in case they are alerted that supplementals can't be used. He said the volume of oxycontin has picked up a bit nothing out of the ordinary/no new prescribers. I gave him patient info guides to give to patients that may be taking hydrocodone ATC and being refilled. He was willing to do that.
PPLPMDL0020000001	Cleveland Hts	OH	44118	11/10/2011	I asked doc for the status of the butrans patient that could not afford butrans through Walgreens. He said he had not heard back from him after he suggested the guy go to another pharmacy. I explained the commercial plans nationally and that cleveland clinic employees should be able to afford it. I asked him what the patient's previous therapy was and what strength of butrans he prescribed. He said the patient was taking a few vicodin a day and he believes he started him on 20mcg. i reminded him that 20mcg is not a starting dose of butrans but rather a titration dose. I asked him where he would likely prescribe butrans and he said after tramadol or vicodin. I asked if he would prescribe for opioid naive. He said probably not. I told him about the caresource covering butrans after tramadol failures. He said he does not have much medicaid. I discussed the application sites of butrans and to rotate wweekly. Reminded him of the oxycontin patient type and the formulary coverage.
PPLPMDL0020000001	Cleveland	OH	44109	11/10/2011	dr said she started 1 patient on Butrans,patient is doing well and she's given some patients Butrans patient info booklets to read about Butrans and follow-up with her in 1-2 weeks.i asked dr what prompted her to start that 1 patient and told dr that was great news she finally started 1 patient.dr said the patient was taking percocet every day for chronic pain,not controlled and asking for more pills,so she thought Butrans could be a different option for this patient.we discussed initiation and titration of Butrans and i asked dr if she had more patients like the 1 she started,to start on Butrans? dr said yes she has more patients like this but some patients dont want to wear a patch and only want their pills.i asked dr if she felt comfortable starting patients on Butrans and giving them some short-acting opioids for breakthrough pain? dr said yes she was comfortable with that so that wouldnt be an issue.focused dr on BWC and commercial insurance patients.dr asked about medicaid coverage,we discussed PA requirements for medicaid and caresource patients trying Butrans.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44109	11/10/2011	dr said he had a patient this am that he wanted to start on Butrans but he's waiting for PA to go through with Caresource.asked dr why he chose Butrans for this patient? dr said when patients are taking 4 pills a day and want more pills,he's telling them Butrans is only option and he will decrease their short-acting opioids.i asked dr if he was comfortable starting patients on Butrans and giving some short-acting opioids for breakthrough pain? dr said yes he is getting more and more comfortable with Butrans and explaining Butrans to patients.dr said biggest challenge is that he has a lot of caresource patients in this office,dr said only 1% or so are BWC and they have 10-20% commercial insurance plan patients.i talked to dr about focusing on commercial plan patients to start on Butrans as dr was feeling frustrated with all of the PA's for Caresource patients.i asked dr to think about how its clinically beneficial for patients,when they are taking 2-3 vicodin or percocet daily and not controlled,continually refill their short-acting opioids,dr said theres no clinical benefit these patients have the same or worse pain and just want more pills,told dr to stop and not refill or convert patients from 1 short-acting opioid to another and start them on Butrans.dr said he will do that as that makes sense and he can taper patients short-acting opioids over time,i told dr that sounded good and i will follow-up next week.dr said he's on vacation next week but week after is good
PPLPMDL0020000001	Mayfield Heights	OH	44124	11/10/2011	Spoke to doc about the key selling features and asked her what her go to drug was for chronic pain. She said she might start on a tramadol then go to vicodin, then maybe to percocet. I positioned butrans after tramadol and before percocet or oxycontin. Explained the commercial coverage and medicaid. She asked about medicare. She said she wants to use butrans her concern is just the cost. I stressed the importance of giving the savings cards. She asked about the use of supplemental analgesics. I referred to the FPI and confirmed that they can be used. I discussed the application process and how to rotate. She said she would try it.
PPLPMDL0020000001	Euclid	OH	44119	11/10/2011	I reminded doc that last week he said he would write a script of butrans and he thought the 30% improvement score was pretty good. I reminded him of the CII status and once weekly dosing. Reviewed the coverage with commercial plans and that of medicaid. He asked if 5mcg would be the starting dose. I explained that if patients are taking 300mg of tramadol they would start on the 10mcg. Demonstrated how to apply the patch and the various doses. He said the day is the day.
PPLPMDL0020000001	Cleveland	OH	44195	11/10/2011	talked to Kathy about patients getting started on Butrans,showed BUP3015,discussed clinical trial with Kathy and asked Kathy if a 30% reduction in pain was clinically significant? Kathy said any improvement in pain is good so yes 30% was impressive.i asked Kathy if it was impressive enough for her to prescribe Butrans? Kathy said yes she will but she see's dr mekhail and dr minzter's patients so she does need their approval as she works closely with them.i asked Kathy to share this data with them and get their thoughts and i would follow-up next week,Kathy said ok.told Kathy if any patients are appropriate for Butrans this week she should focus on commercial plan or BWC patients,Kathy said ok she will do that.
PPLPMDL0020000001	Lyndhurst	OH	44124	11/11/2011	Doc had a patient just leaving the office that he started on 20mcg of butrans, had paid \$350 for a month supply, and got "sick as a dog". Doc said she was on percocet and other meds as she is in severe pain. I explained that 20mcg is not a starting dose and patient must be tapered down down to 30mg equivalent of morphine before starting on the 10mcg. Let him know the potential for withdrawal if patient not tapered properly. I let doc know that oxycontin may be more appropriate for a patient like that.
PPLPMDL0020000001	East Cleveland	OH	44112	11/11/2011	Prospect. I asked doc where he thinks he would prescribe butrans and reminded him that he took an initiation guide because he wanted to remember to prescribe butrans. He said he has not gotten around to prescribing butrans yet. He asked him where he thinks he would use it. He said most of his patients need something stronger. I explained the indication to include moderate to severe pain and that if he has patients a short acting like tramadol/vicodin/percocet several times a day those are appropriate patients for butrans. I also let him know that per the FPI, supplemental analgesia is allowed while on butrans therapy. I informed him of the coverage with BWC and medicaid with a PA after tramadol failures. He said that oxycontin is now requiring enough PAs. Reminded him of the commercial and med D plans covering oxycontin.
PPLPMDL0020000001	Cleveland	OH	44195	11/11/2011	worked chronic pain/neurology dept-left Butrans fpi,initiation guide,patient info booklet,patient savings card flashcard,formulary grid,web conferences for nov 2011 and my business card for Dr.Kriegler,Dr.Stillman and Dr.Mays; worked anesthesia/pain center-left SAME info for Dr.Rosenquist,dept chairman,Dr.Mekhaill,Dr.Cheng,Dr.Stanton-Hicks,Dr.Vrooman,Dr.Samuel and Dr.Minzter as i couldnt see any HCP's
PPLPMDL0020000001	South Euclid	OH	44121	11/11/2011	Spoke to Gary about the butrans indication and the positioning - after tramadol and before vicodin/percocet ATC. I referred to the FPI and showed him the section of supplemental analgesic. I explained that some pharmacies may get an alert that warns against supplemental analgesia with butrans. Let him know that it is allowed. He said he will try remember it for when he gets a script.
PPLPMDL0020000001	Mayfield Hts	OH	44124	11/11/2011	I asked doc where he thinks he would use a product like butran - a 7 day CII patch. He said there is always a place he has not gotten around to it. I asked him if he a=has any objections to prescribing it. He said not as long as patients can get it. I asked him to think of butrans for BWC patients or non medicare patients and give a savings.
PPLPMDL0020000001	Cleveland	OH	44109	11/11/2011	work pm&r dept-see call notes
PPLPMDL0020000001	Cleveland	OH	44113	11/11/2011	talked to dr about BUP3015,asked if a 30% reduction in pain was clinically significant? dr said yes.i asked dr if it was clinically significant enough for him to Rx Butrans? dr said yes but he has been in and out of office so much as he also oversee's the wound center here at Lutheran Hospital and just hasnt thought of Butrans.i asked dr if he can start 1-2 patients today on Butrans,that meet the indication and are ready for a long-acting opioid? dr said if he has anyone appropriate to start on Butrans he will consider it.dr asked if patients could still take immediate release opioids with Butrans? i showed fpi,section 2.4,discussed dr starting patients on Butrans and giving immediate release opioids or non-opioid therapies,dr said ok.dr asked who covers Butrans? showed formulary grid,focused dr on commercial plans,dr asked about Medicaid patients getting Butrans? we talked about PA requirements for Medicaid patients and we discussed Caresource patients.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44113	11/11/2011	dr said she gave patient info booklets to patients to read about Butrans and is following up with them in 2 weeks.dr said biggest challenge is that many patients dont want to stop taking their pills and are resistant to a patch.dr said she will continue telling patients about Butrans and i showed dr fpi,section 2.4 maintenance of therapy section,noting that dr can give immediate release opioids or non-opioid therapies with Butrans,dr said ok she'll consider that next time.showed initiation and titration info in visual aid and asked dr to start 1 patient today.dr said if she has anyone thats appropriate she will do that.focused dr on commercial plan patients and tricare.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44113	11/11/2011	dr said she likes that Butrans is a patch and likes the once weekly dosing but noone has been interested in wearing a patch.dr said her patients want their pills and more pills on every visit.i showed dr fpi,section 2.4 maintenance of therapy section,noting dr can give immediate release opioids or non-opioid therapies with Butrans,dr said she forgot about that.dr said she'll talk to some patients and perhaps start them on Butrans but give less short-acting opioid medication,told dr that was great and asked if she would see any patients today that would be appropriate to start on Butrans? dr said there might be a few she would have to look but will remember Butrans as an option for patients.focused dr on initiation and titration of Butrans,showed visual aid and focused dr on commercial plan and tricare patients.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44109	11/11/2011	showed dr BUP3015,opioid experienced patients,and we discussed the clinical trial inclusion criteria and the results,i asked dr if a 30% reduction in pain was clinically significant? dr said yes any reduction in pain is good.i asked if it was clinically significant enough to prescribe Butrans? dr said yes it is.dr said he will talk to patients today and next week and see what happens.we talked about initiation and titration of Butrans and focused dr on BWC and commercial plan patients.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44113	11/11/2011	talked to dr about what features of Butrans he remembered and found clinically significant,dr said he likes that Butrans has transdermal delivery and the once weekly dosing may be appealing to some patients.dr said he hasnt thought about Butrans as he keeps thinking that medicaid doesnt cover it.i asked dr if he is thinking of a few patients to start on Butrans since he's asking about insurance? dr said he has a lot of medicaid patients taking tramadol and they arent always controlled so he could see Butrans being an option for this group.talked to dr about PA requirements for medicaid patients,discussed Caresource patients trying Butrans and asked dr if he can start a couple patients today on Butrans? dr said he will talk to patients and see if they are willing to wear a patch.showed dr initiation and titration info in BUP3015 and visual aid,and we discussed patient info booklet application/rotation of Butrans section being important to discuss with patients,dr said ok he'll talk to a few patients and see what happens.we discussed OxyContin as an option for patients,dr said he prescribes a lot of OxyContin and will continue doing so.recommended Senokot-5
PPLPMDL0020000001	South Euclid	OH	44121	11/11/2011	Spoke to Lauren to discuss the butrans indication and other selling messages. I told her i wanted to inform her of the allowable use fo supplemental analgesics such as tramadol of hydrocodone with the use of butrans. I explained that some pharmacies may get a pop saying that supplementals should not be used. She she only has filled a few scripts but she had not noticed any such alert. Provided patient info guide and FPI.
PPLPMDL0020000001	Cleveland	OH	44109	11/11/2011	followed up with dr as he said a patient had an AE,itching while wearing the Butrans patch.dr said patient been doing well on Butrans for past 2-3 months and is functioning well on Butrans.dr said patient started getting some itching under patch and he wasnt sure if patient should remove Butrans and apply a new 1 on at a different site or wait it out? i told dr that i shared all of the info with medical services yesterday,called in AE and Med services said they would contact dr to discuss this AE.dr said he's been starting patients on Butrans and patients are doing well,he gives them Butrans patient info booklets and patients understand Butrans easily.dr said he had a few issues with insurance but they were medicaid patients,dr said he has gotten scripts approved for Medicaid patients after a PA.i told dr to focus on commercial plan and BWC patients.i asked dr if he's seeing clinical reductions in patients pain levels,with patients he's started on Butrans? dr said yes he's seeing pain levels decreasing and patients cognitive functioning is approving.



PPLPMDL0020000001	Cleveland	OH	44109	11/11/2011	showed dr BUP3015,discussed clinical trial for opioid experienced patients and asked dr if he treats patients like this? dr said yes he does.i asked dr if a 30% reduction in pain was clinically significant? dr said yes any reduction in pain is good for patients.i asked dr if it was clinically significant enough for him to Rx Butrans? dr said yes he will consider it.dr said his concern has been that Butrans isnt covered on Medicaid.i asked dr if he see's patients with BWC or commercial insurance? dr said yes he has those patients.i told dr to focus on these patients and explained butrans patient savings card program for commercial patients to doctor.i asked dr if he could find 1 patient today and start that patient on Butrans? dr said he will consider it if patients are appropriate.we talked about OxyContin being an option for patients,dr said he prescribes a lot of OxyContin and knows who's appropriate and no issues with insurance coverage.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44102	11/11/2011	talked to Deb,Pharmacy Technician,as Vicky(Pharmacy Mgr)was busy with patients,i showed Deb Butrans 7 days a week flashcard and asked Deb what features of Butrans stood out to her? Deb said the fact that Butrans is a patch and once weekly dosing,Deb said there are a lot of patients taking short-acting opioids but not controlled and will sometimes ask pharmacy if they have any ideas on another medication.i asked Deb if she would recommend Butrans and give patients the Butrans patient info booklets so they can talk to their HCP's? Deb said yes she would do that and she would give them to Vicky and see if she's been doing that,Deb confirmed no butrans in stock at the moment,we talked about Butrans formulary coverage,focused Deb on commercial plan patients.i asked who's writing OxyContin in area and Vicky named some physicians i work with in the area so we talked about Q12H dosing of OxyContin and i gave Deb an OxyContin conversion guide and we discussed formulary coverage,Deb said there's not been a lot of NEW Rx for OxyContin,same patients every month getting their OxyContin scripts filled.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	11/14/2011	dr said he gave a patient the Butrans patient info booklet and said to talk to Stephanie,MA,who started the patient on Butrans.Stephanie wasnt in office yet.i asked dr what drawbacks he saw in Butrans? dr said no drawbacks,Butrans is a hard sell to patients and takes time to explain.i asked dr if patients have the same pain levels or worse,while taking vicodin daily,does dr believe this is reason for change of medication? dr said no,if patients ask for more pills or pain levels stay the same or worsen,he'll just refill the medication.i asked dr if patients are taking vicodin 5mg daily and thats not controlling their pain,would he consider that patient to start on Butrans or increase dosage strength to vicodin 7.5mg? dr said it depends on patients.i asked dr if there were 1-2 patients this week coming into the office,that he could start on Butrans if patients are taking vicodin daily for their chronic pain but not controlled and asking for something else? dr said he will do that.
PPLPMDL0020000001	Cleveland	OH	44109	11/14/2011	i talked to Adam,Pharmacy Tech,about Butrans scripts here and Adam said he's seen a couple Rx for Butrans,all 3 dosage strengths,but these were patients on high doses of short-acting opiates and some patients were already taking long-acting opioids like Duragesic or OxyContin.i showed Adam BUP3015,dosage ranges discussed opioid experienced patients that were in the clinical trial and appropriate patients for Butrans.Adam was surprised and said he thought because Butrans was a long-acting opioid that it would be in same class as OxyContin and Duragesic.i showed FPI to Adam and we discussed Butrans being a CIII and refills,i asked Adam if he would give patient info booklets to patients that are appropriate for Butrans but not controlled on their short-acting opioids,Adam said yes he will do that.we discussed insurance coverage for Butrans and patient savings cards and Adam said he knows they have electronic vouchers for Butrans.i asked if he's seeing new Rx for OxyContin or same patients monthly? Adam said he's seeing a mix of new Rx for OxyContin,all strengths and still same patients monthly for maintenance therapy,we discussed insurance coverage for OxyContin and i recommended senokot-s and gave protocol pad,Adam said protocol pad will be helpful to patients because they do ask pharmacy questions about i asked Dr about the success he has had with Butrans. He said he has not really given it a fair trial yet. I asked what's holding him back and he said many of his patients that he has seen lately have been on higher doses of opioids and he is switching them to something like OxyContin. I told him not to worry and i know that he will be seeing a few patients this week that are taking tramadol or low dose vicodin that may be appropriate for Butrans. He agreed to start a patient like this. I reviewed the managed care and the Caresource PA and he said that may help him find more appropriate patients.
PPLPMDL0020000001	Lakewood	OH	44107	11/14/2011	dr said his patients are having success on Butrans.1 patient is on Butrans 20mg and doesnt need any short-acting opioid for breakthrough pain.asked dr what real world clinical reductions in pain he's seeing with Butrans,dr said patients with pain levels of 8 are decreasing to 4-5.i asked dr if these reductions were clinically significant? dr said yes.i asked dr if they were clinically significant enough for him to prescribe Butrans? dr said yes dr said he starts patients on Butrans, no refills for any narcotics and follows-up in 4weeks,dr said he only writes tramadol 50mg 4 pills a day,200mg max,when patients have mowed out on that dose he'll consider other options.i asked dr if he would start patients on Butrans,right after tramadol isnt controlling patients pain,instead of starting them on Vicodin? dr said yes he would consider that.gave dr Butrans patient info booklets and asked him to continue starting patients on Butrans,dr said he will do that.
PPLPMDL0020000001	Cleveland	OH	44114	11/14/2011	dr said he's starting patients on Butrans,patients are doing well,he did have 1 patient on Butrans,after 2 weeks,that said she felt weird on Butrans and had weird dreams.dr said Caresource hasnt been covering Butrans,talked to dr about PA requirements for Caresource and asked dr to focus on BWC and commercial plan patients to start on Butrans.i asked dr if he would continue starting patients on Butrans,dr said he will do that.i asked dr to also give patient info booklets to patients when he starts them.dr said they do and he said they are focusing on their perccot patients to convert to Butrans and a few vicodin patients.
PPLPMDL0020000001	Lakewood	OH	44107	11/14/2011	i asked if he had tried any other Butrans patients since the one who got denied and he said he hasn't. I asked what other info id he need for him to try Butrans on a few patients and see how they do. He said he just has to find the right patients. I told him i know he'll see a few tramadol patients this week whose pain is not well controlled. He agreed to try Butrans for these patients. Reminder that OxyContin is still an option that is covered on most managed care plans.
PPLPMDL0020000001	Cleveland	OH	44113	11/14/2011	dr said he's starting patients on Butrans but always a challenge getting PA's approved for Caresource.dr said he'll continue finding patients to start on Butrans but insurance is always a challenge for patients to get their medications.
PPLPMDL0020000001	Cleveland	OH	44114	11/14/2011	john,pa,said he and dr marshall(in the same office together) have been starting patients on Butrans and patients are doing well. John said they are starting the majority of their perccot patients on Butrans and a few patients have been taking vicodin that they have converted to Butrans.John said Caresource is the biggest plan in their office and he's having challenges with coverage,we talked about PA for Caresource and John said he'll keep trying to see if they get Butrans covered.i asked John to continue starting patients on Butrans,John said he will do that.
PPLPMDL0020000001	Cleveland	OH	44113	11/14/2011	deb said she's starting a lot of patients on Butrans,she thinks its a good medication,getting good results from Butrans and its easy to talk to patients about Butrans,Deb said she gives Butrans patient info booklets but would like spanish booklets for patients.i told deb Butrans dvd could be an option for those spanish speaking patients as a visual until there is spanish booklets available,deb said caresource has been the challenge,they're not approving Butrans,explained the PA requirements for Caresource as we understand them.asked deb to continue starting patients on Butrans,she said she will do that.
PPLPMDL0020000001	Westlake	OH	44145	11/15/2011	Spoke with Amid, we reviewed the medication guide for Butrans and appropriate patients. I reminded him that Butrans is a CIII and that it can be called in and refilled. I asked his thoughts and he said it seems like a good option, it has not been moving very much in this store. I asked if would ever give a medication guide and tell the patients to ask their Dr about Butrans, he said he might if he knows the patient. I reviewed the managed care and savings cards for Butrans and OxyContin.
PPLPMDL0020000001	Westlake	OH	44145	11/15/2011	I showed the case studies and asked if he ever sees patients taking tramadol around the clock. He said a few, but many patients are on higher doses of opioids. He said that he sees many patients like the one who was not appropriate for Butrans. I asked if he would start these types of patients on OxyContin and he said he would. I asked Dr where he feels Butrans will fit into his practice, he said probably for patients taking vicodin 3-4 times per day. I asked if he would start these patients on Butrans and he agreed. He said he might also prescribe Butrans when he is trying to taper down the dose of short acting. We reviewed Butrans managed care and Caresource. Angela said that she just got Butrans approved on Caresource with a PA for 3 months.
PPLPMDL0020000001	Mayfield Heights	OH	44124	11/15/2011	Window call.....Discussed the indication and the appropriate patient type for butrans. Gave him formulary grids for oxycontin and butrans as well as the butrans portal leave behind. He said he has not had time to look into "this product".
PPLPMDL0020000001	Cleveland	OH	44113	11/15/2011	reviewed with dr Butrans is transdermal,discussed 7 day dosing,appropriate patients and initiation of Butrans.dr asked how he would taper a patient off 50mcg/hr Duragesic and start that patient on Butrans? i told dr there are no recommendations for titrating down.discussed the more moderate pain patients with dr that he can start on Butrans.i asked dr if he looks at patients insurance before he starts them on a medication? dr said he does look at insurance and asked about coverage for Butrans? gave dr Butrans patient savings cards,discussed savings card plan and asked dr to find a few patients today and this week that he can start on Butrans.dr said he will do
PPLPMDL0020000001	Cleveland	OH	44113	11/15/2011	had lunch with dr farooq,in Lutheran Hospital
PPLPMDL0020000001	Richmond Heights	OH	44143	11/15/2011	Spoke to Mel about the positioning of butrans and the indication. He said he has not seen any scripts recently only a few over all. I referred to the FPI and discussed the section on supplemental analgesia. I explained that supplemental analgesia can be used while on butrans therapy in the event he gets some alert indicating the contrary. He said it has not come up and asked why would there be an alert. Told him not sure but maybe there is confusion between butrans and suboxone.
PPLPMDL0020000001	Westlake	OH	44145	11/15/2011	Quick call with Khyle, we reviewed the medication guide and how to instruct patients about application of Butrans. I asked if she would hand out the booklets to Butrans patients and she said she would. I asked if she might also give the booklets to patients whose pain is not well controlled on their short acting medication. She said she would consider it. Reminder that Butrans has a savings program and OxyContin is covered on most managed
PPLPMDL0020000001	Highland Heights	OH	44143	11/15/2011	Spoke to Debbie about the butrans positioning - after tramadol or before going to vicodin ATC. I showed her the FPI and the allowable use of supplemental analgesics. Let her know that supplementals are ok in case she gets a system alert. She said their system is sensitive and that may happen but she is able to override it. I asked about the oxycontin script volume. She said that they are still seeing plenty. She is seeing more oxycontin in combination with a short acting oxy for breakthrough. Offered savings cards but they were not needed.
PPLPMDL0020000001	Westlake	OH	44145	11/15/2011	Dr on his way out to hospital, I reviewed the managed care for Butrans, he said that he just recently wrote Butrans for a Caresource patient and it went through. I confirmed with Kelly and she said that it did go through with a PA and that it was approved for 6 months.
PPLPMDL0020000001	Mayfield Hts	OH	44124	11/15/2011	Repeat. I asked doc where he thinks he is likely to prescribe butrans. He said probably for newer patients or those that may not have reached chronic meds yet. He said he would write a script today. I asked him to focus on younger than medicare age and give them a savings card. Reminded him of the oxycontin patient type and coverage.
PPLPMDL0020000001	Richmond Heights	OH	44143	11/15/2011	Quick call.....I reviewed the butrans patient type, 7 day delivery and CIII status. I asked him if he has any patients that fit this positioning. He said of course and that butrans is just new to him. I gave him a Butrans portal leave behind and explained that various resources available on the site. Also gave him a formulary grid for oxycontin and butrans.
PPLPMDL0020000001	Cleveland	OH	44113	11/15/2011	asked dr how her patients are doing on Butrans? dr said they are doing well,dr said she likes that Butrans is a CIII,i asked dr why that was important to her? dr said she can call in refills as a CIII so thats easier for her,dr said she wants to use more Butrans in her practice.
PPLPMDL0020000001	Cleveland	OH	44114	11/15/2011	dave,pharmacist,said he's filled Butrans 2x,1 patient is on Butrans 10mcg and doing well,other patient didnt do well on Butrans and dr took off and started on Exalgo.i showed Dave,FPI,noting section 2.4,maintenance of therapy,telling dave he can dispense Butrans with a script for short-acting opioid if patients come into pharmacy with that,Dave said thats fine he has no problem with that,showed Dave Butrans patient info booklet,asked if dave could give patients these if they come in to fill scripts OR if they are complaining to him that their short-acting opioids arent controlling their pain?dave said yes he will do that but patients get a medication guide with FPI,i told dave that was true yet not all patients will look at that,dave agreed.i asked dave if he had Butrans in stock?dave said Butrans 5mcg and 10mcg,we talked about OxyContin stocking and dave said he had all 7 dosage strengths in stock.i asked dave if he had cash paying patients that he could provide OxyContin savings cards to? Dave said no cash paying in his pharmacy.
PPLPMDL0020000001	Mayfield Heights	OH	44124	11/15/2011	Window call...Ask doc how things are going with butrans. She said things are good and asked if there is anything new with butrans. I told her that Caresource is now paying for butrans after failure on tramadol or vicodin. She said she does not have a lot of medicaid. gave her a butrans portal leave behind,butrans and oxycontin formulary grids. Nothing more learned.
PPLPMDL0020000001	Cleveland	OH	44105	11/15/2011	dr said she talked to a few patients a week ago about Butrans,not all patients want to stop taking their pills and try a patch.i talked to dr about starting patients on Butrans and explained she can continue to prescribe opioid or non-opioid therapy with Butrans,showed FPI.dr said she'll talk to patients about Butrans and she's willing to give Butrans patient info booklets.dr asked if Butrans had addiction potential,told dr yes Butrans had potential for abuse,showed fpi.
PPLPMDL0020000001					

PPLPMDL0020000001	Mayfield Hts	OH	44094	11/15/2011	Prospect. I discussed the butrans indication and other selling messages. He asked why should he use butrans over vicodin. I explained that we have no head to head data and asked him what benefits if any he sees in suing a product like butrans. He said he just does not see a place for it in his practice. He prefers to send those patients to pain mgmt. He asked about the cost of butrans. I explained the potential cost for commercially insured patients with a savings card. He said that I could tell him that butrans worked much better or was safer or cheaper he might consider it. I reminded him that oxycontin is still an option for patients that has been well established and well covered by insurance.
PPLPMDL0020000001	Cleveland	OH	44104	11/16/2011	dr said he started another patient on Butrans,dr said patient was taking percocet and not controlled so he wanted to try Butrans and see what happens so far the patient is doing well.we discussed appropriate patients for Butrans,initiation and titration,showed visual aid,focused dr on commercial plan patients and asked dr if he has a couple patients today/this week that he can start on Butrans,like the 2 patients he already started? dr said he probably will have a couple patients that he can talk to about Butrans.told dr he also has option of OxyContin for his patients,dr said he does prescribe OxyContin but not all the time,we discussed formulary coverage and I asked dr to continue starting patients on OxyContin,dr said he will when appropriate.recommended Senokot-5
PPLPMDL0020000001	Westlake	OH	44145	11/16/2011	I asked Dr what information can I give him for him to feel comfortable trying Butrans. He thought for a while and then looked at the initiation guide. I said let me tell you 2 types of appropriate patients for Butrans. The first type is a patient who is taking NSAIDS or celebrex and you can start them on a 5mcg. The other type of patient is one taking tramadol around the clock or 3 5mg vicodin per day whose pain is not well controlled and these patients can start on a 10mcg Butrans. Which of these patients would you try Butrans for, he said the patient who is taking tramadol or low dose vicodin. Dr said that he will give it a try. Dr is having knee replacement surgery
PPLPMDL0020000001	Cleveland	OH	44104	11/16/2011	dr said she's given Butrans patient info booklets to a few patients this week as these patients were asking her for more pills and saying their percocet wasn't lasting long enough so dr thought the booklet would educate them and she's following up with them in 2 weeks.i told dr that was great and asked if she could find 1-2 patients today and tomorrow,similar the one's she gave booklets to,and start them on Butrans? dr said yes if patients are willing to wear a patch she will do that.we talked about section 2.4,fpi,dr wanted to know if she could give immediate release opioid with Butrans? focused dr on commercial plan patients and we discussed OxyContin being an option for appropriate patients.dr said she has a few patients on OxyContin,but not many and prefers not to write a lot of OxyContin,gave formulary grids for OxyContin and discussed coverage with her.recommended dr said she's continually starting more patients on Butrans and she's getting the PA approved for Medicaid patients but not Caresource patients.we talked about appropriate patients,showed visual aid pg.11,that dr can continue starting patients on Butrans.dr said she will start more patients on Butrans as the patients are doing well and they are having improvements in pain.we talked about dr still starting patients on OxyContin,dr said no problems with OxyContin,we discussed OxyContin formulary coverage,recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44103	11/16/2011	talked to dr about Butrans 6 core selling messages,showed visual aid,dr said he's not started anyone on Butrans recently.dr said he's so busy he forgets about Butrans.i asked dr who is the appropriate patient for Butrans,in his mind? dr said patients taking a couple tramadol or vicodin every day and not controlled asking him for something else.i told dr that was great he knew the appropriate patient type,showed dosage strengths in visual aid and asked dr if he could find a couple patients this week to start on Butrans? dr said he will see what he can do and talk to some patients about Butrans.told dr he can give patient info booklets and showed him the booklet,to provide patient education,dr said he will do that as some patients dont want to wear a patch,focused dr on commercial plan patients and we discussed PA requirements for Caresource patients.we talked about OxyContin being an option for patients too and discussed formulary coverage for OxyContin,dr said he writes a lot of OxyContin and will continue doing so.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44104	11/16/2011	reviewed Butrans 6 core selling messages,dr talked about once weekly dosing and Butrans being a CII.i asked dr why these were of importance to him? dr said once weekly dosing could be a great option for those patients who dont want to take pills around the clock,dr said he has some patients like this.dr said the challenge for him is medicare is largest plan here.i asked dr why CII was important? dr said he can call in refills so makes it easier on him and his staff,showed dr BUP3015,discussed appropriate patients and asked dr if he has a couple patients,similar to inclusion criteria? dr said yes he has a lot of them,showed dr 30% clinical reductions in pain and asked if that was clinically significant? dr said yes any reduction in pain is good.i asked dr if this reduction in pain was clinically significant enough for him to prescribe Butrans? dr said he will start more patients if he has any commercial plan patients in the office,again majority are medicare.i told dr that he does have option of OxyContin for those medicare patients and showed formulary grid.dr said he does prescribe OxyContin but more so for his hospice patients.recommended Senokot-5
PPLPMDL0020000001	LAKEWOOD	OH	44107	11/16/2011	Spoke with Pam, we reviewed the Butrans medication guide and I asked if she has a few patients who are taking tramadol around the clock. She said she does, I asked if she would give those patients a Butrans medication guide and tell them to talk to their Dr about Butrans as a possible option. She said she might if she has a relationship with the patient. We reviewed the savings cards for Butrans and OxyContin.
PPLPMDL0020000001	Euclid	OH	44117	11/16/2011	Dabbler. Quick call...I reminded doc that he confirmed that he has many patients taking 300-400mg of tramadol i showed him the initiation guide and asked him to prescribe butrans 10mcg when its time to go to something else. I asked him to try one patient this week. He said he is going to try.
PPLPMDL0020000001	Cleveland	OH	44195	11/16/2011	talked to Stan,Pharmacist,about Butrans stocking and Butrans 6 core selling messages and Stan said he's seeing a lot of Rx's for Butrans.stan said he didnt know who was writing Butrans,asked Stan if he could look this info up? Stan said he couldnt do it today but i can check back next time with Curt,Pharmacy Mgr.we talked about Butrans patient info booklets and asked Stan to focus on application/rotation of Butrans with patients,stan agreed to do this.confirmed stocking of Butrans and we discussed formulary coverage and use of patient savings cards.we talked about OxyContin being an option for patients and we discussed formulary coverage.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44104	11/16/2011	dr said she titrated the 1 patient she started on Butrans and patients doing well.dr said this patient is now taking Butrans 20mcg.i asked dr if she has more patients like this 1 patient,that she can start on Butrans.dr talked about her frustrations with Chronic pain patients and giving them pills,dr focused on her percocet patients.i asked dr since she feels that way,how about trying Butrans on a few patients as its a different option for them.dr said she will think of some patients and start more people its just taking her longer. told dr i understand and asked if she could start a couple patients today and tomorrow on Butrans and focus on commercial plan patients? dr said yes she will do that.we discussed Butrans patient savings card program for commercial plan patients and patient info booklets.recommended Senokot-5
PPLPMDL0020000001	Lyndhurst	OH	44124	11/16/2011	Quick call....i apologized to doc about his previous experience with butrans. I explained to him that for medicare patients it will be expensive and we do not recommend it. Also explained that no patients should be starting on a 20mcg does as it is only a titration dose. He said no problem the patient had tried everything else. I told him butrans is not that type of product and is indicated for more moderate chronic pain, like after tramadol.
PPLPMDL0020000001	Euclid	OH	44119	11/16/2011	Prospect. Let doc know I just had one quick question, "how high do you go on doses of tramadol before switching to something else?" He said 3 times/day. I confirmed that he meant 150mg of tramadol per day. He said Butrans, right? 10mcg? I showed him the conversion guide. Explained that 5mcg is appropriate for that patient. 10mcg starting dose if he titrates to 300mg. Provided formulary grid.
PPLPMDL0020000001	Bedford	OH	44146	11/16/2011	TRIALIST- Dr Moufawwad said that he has not had much more experience with Butrans since our last conversation. He said that other physicians have asked him what his opinion is on Butrans & that he has told them that he thinks it is a good drug. I agreed that many physicians would be interested in hearing his opinion about Butrans. I reminded him that he had told me that he is not accepting many new patients & asked him if he saw Butrans as an option for only new patients. He said no & added that he has existing patients who would probably be good candidates as well. He said that he thinks the right way to initiate treatment is with the 5mcg dose & then give supplemental analgesia in the form of Vicodin or Percocet & then to follow-up with that patient & titrate the Butrans if necessary. I agreed that this would be an effective way to initiate treatment in some patients. He told me that he would be starting to take on potential Butrans patients within the next week or two & said he wants to get more experience with Butrans.
PPLPMDL0020000001	University Hts	OH	44118	11/16/2011	Prospect. I discussed the indication, CII status, 7 day delivery, and positioning of butrans. I asked doc where he sees it fitting it into his practice. He said he has offered it to maybe 2 patients and they did not want to give up their pills (percocet). I explained that he may have better luck starting butrans for someone that has not gotten to the point of taking tablets around the clock and to think of butrans more for patients failing on tramadol. He asked if butrans shows up in a standard drug screening. Told him that he may have to test specifically for it in a urine screen. He also wanted to know about which pain mgmt docs are using it as he often refers to Yokiel and demangone. I explained that many of the pain mgmt docs are prescribing. I reviewed the conversion guide and the appropriate starting dose of 10mcg if starting a patient that has failed tramadol. He said he has a better idea of where to use butrans now and he will try it. I reviewed the coverage and savings cards. Reminded him of the oxycontin patient type and the preferred coverage over 92% nationally.
PPLPMDL0020000001	Cleveland Hts	OH	44118	11/16/2011	Spoke to Saurab about the key selling messages of butrans including the positioning before going to vicodin ATC. I asked him how often does he see vicodin being refilled month after month. He said it is common. I gave him a patient info guide and asked him to consider giving it to a patient to let their doctor know about another option. He said maybe, if a customer asks.
PPLPMDL0020000001	University Heights	OH	44121	11/16/2011	I told doc that I understand his concern about the cost of butrans to his patients. I reminded him that butrans is being paid by caresource after failure on tramadol/vicodin. He asked about Prior auths. I told him it will likely require a PA but should go through fine. He said he is already doing too many prior auths especially for oxycontin. I tried to empathize with the volume of prior auths. He said we'll see.
PPLPMDL0020000001	Cleveland	OH	44103	11/16/2011	talked to Amy,Pharmacy Manager,about Butrans 6 core selling messages.Amy said she likes that Butrans is a patch as some patients may prefer this.Amy said once weekly dosing could also be appropriate for some patients.i asked Amy if she has given Butrans patient info booklets to patients,so they can talk to their doctors? Amy said yes she's given a few booklets out to patients and will continue to give them out.we discussed formulary coverage for Butrans.confirmed OxyContin stocking and formulary coverage.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44106	11/16/2011	discussed Butrans 6 core selling messages with dr,dr focused on Butrans transdermal delivery and once weekly dosing.i asked dr if he has any patients,similar to the BUP3015 inclusion criteria? dr said yes he has a lot of patients like this.i asked dr if he would start a couple patients today on Butrans,that are similar to this and appropriate for Butrans? dr said if patients are taking vicodin or percocet and not controlled,asking him for more pills,he's talking to them about Butrans.i asked dr if he will continue starting more patients on Butrans,dr said yes he will. focused dr on commercial plan patients and discussed PA requirements for Caresource patients.we talked about OxyContin being an option for patients and showed formulary grid.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44127	11/17/2011	showed visual aid,discussed 5 core selling messages with dr as dr could only remember that Butrans was a patch for chronic pain.focused discussion on indication,appropriate patients-opioid experienced patients and asked dr if he has patients like this? dr said yes she has a lot of patients taking tramadol,codeine,vicodin,and she could think of patients to start on Butrans.dr said her challenge is medicaid coverage of Butrans.we talked about Caresource patients trying Butrans and i talked to Josie,MA,about Caresource requiring a PA for Butrans,Josie said ok she'll see if she can get it approved for a few patients.i discussed initiation and titration of Butrans with dr and showed dr Butrans patient info booklet focusing on application/rotation of Butrans section.i asked dr if she could start 1-2 patients today or tomorrow on Butrans? dr said yes she'll see who comes into the office and talk to them about Butrans.recommended Senokot-5
PPLPMDL0020000001	Brooklyn	OH	44144	11/17/2011	Another floater pharmacist was in today. Discussed Butrans 5 core messages & reviewed appropriate patient type, positioning Butrans for patient after tramadol or Vicodin. Discussed once weekly transdermal system & titration after day 3. Also let her know patients can take supplemental analgesia in form of immediate-release opioid or non-opioid medications. She said she has seen it on the shelves. Discussed savings through e-voucher for Butrans & savings cards for OxyContin.
PPLPMDL0020000001	Parma	OH	44129	11/17/2011	NON-PRESCRIBER- Reminded Dr Paat & Dr Tolentino of 5 Butrans core messages, also reminding them that Butrans is a CII opioid with abuse/addiction potential just like other opioids. I asked them why they thought they hadn't found any patients for it yet. Dr Paat said she doesn't know. He repeated back that Butrans is once weekly. I told him this is correct. He asked if he could use it instead of Duragesic. I showed him initiation guide & pointed out appropriate range of patients, recommending OxyContin for appropriate patients beyond Butrans. Reviewed dosing & titration after 3 days as well as ability for patients to take supplemental analgesia if necessary in the form of immediate-release opioids or non-opioids. Dr Paat asked about side effects. Showed him AE's in main visual aid & asked if there was anything he wouldn't expect from an opioid. He said no. He asked about application sites. Showed him 4 recommended sites. Also began "Initiations" program to reinforce appropriate patient type. I asked if he had patients like this & he said yes. Discussed patient counsel & setting patient expectations appropriately. Discussed insurance coverage & savings cards where eligible. Shari told Dr Paat that they have the cards & she knows where they are. I asked again if he had patients he could try Butrans on & he
PPLPMDL0020000001	Parma	OH	44129	11/17/2011	NON-PRESCRIBER- Reminded Dr Paat & Dr Tolentino of 5 Butrans core messages, also reminding them that Butrans is a CII opioid with abuse/addiction potential just like other opioids. I asked them why they thought they hadn't found any patients for it yet. Dr Tolentino said she doesn't know & added that she always forgets. Reviewed appropriate patient I showed initiation guide & pointed out appropriate range of patients, recommending OxyContin for appropriate patients beyond Butrans. She said that she can see using Butrans for more moderate pain. I told her this is an ideal place to start. Reviewed dosing & titration after 3 days as well as ability for patients to take supplemental analgesia if necessary in the form of immediate-release opioids or non-opioids. Began "Initiations" program to reinforce appropriate patient type. I asked if she had patients like this & she said yes. Discussed patient counsel & setting patient expectations appropriately. She agreed that this is very important. Discussed insurance coverage & savings cards where eligible. Cathy said she knows where they are. I asked again if she had patients he could try Butrans on & she said yes.

PPLPMDL0020000001	Cleveland	OH	44130	11/17/2011	TRIALIST- Reminded Dr Fedorko of our previous conversation & asked him if he still remembers that Butrans is CIII. He said yes. He then told me he thought he had a patient for Butrans but that patient ended up having Medicare D, so he did not get it. I asked him to tell me about the patient. He said the patient had chronic pain & was taking Duragesic 50mcg. I told him this patient may not be a candidate for Butrans because of his current opioid dose, not because of managed care. Attempted to reinforce appropriate patient type, reminding Dr Fedorko that Butrans may be appropriate for patients who are not well controlled on tramadol or Vicodin. Reminded him that patients beyond 80mg equivalent morphine per day were possibly candidates for OxyContin instead. He kept mentioning the patient on fentanyl 50mcg. I kept trying to tell him that this patient was probably beyond the range of Butrans appropriate patients. Also reinforced CIII & Butrans managed care/savings cards. He also showed me that he has been giving out Ryzolt savings cards but said that insurance is not paying for it. I agreed that this can be challenging & asked him to focus instead on Butrans.
PPLPMDL0020000001	Parma	OH	44129	11/17/2011	TRIALIST- Dr Gigliotti said he just has not had any "Butrans people" for me. I asked him what happened & reminded him that he had told me last time that he was certain he would have some people coming in. He said he has not been writing many new long-acting pain medications recently. I asked him why it needed to be someone new. He asked if I meant to switch someone over. I suggested switching someone who was on tramadol or Vicodin & asked if that sounded realistic. He said maybe. I asked if he would switch someone from tramadol to Butrans. He said no & added that he would go to Vicodin first. I asked him why, if he doesn't like having patients on Vicodin, as he has told me in the past. I added that Butrans is just as abuseable as any other opioid & that he should use just as much caution in writing. He said because it is short-acting & you don't always know if a painful condition is going to be acute or chronic. I asked how long he would have to have someone on Vicodin before switching to a long-acting. He said it depends- probably 3-4 months. I suggested switching sooner, since he has told me how difficult it can be to switch someone once they are "used to" taking short-acting pain medication around-the-clock. He agreed that this would be reasonable. He asked if Butrans was covered on Medicaid. Discussed coverage & reminded him of OxyContin for appropriate patients beyond Butrans.
PPLPMDL0020000001	Cleveland	OH	44130	11/17/2011	TRIALIST- I reminded Dr Kansal of recent Medicaid update & reviewed prior authorization requirements. I asked if this meant anything to him. He said it is good when something is paid for by Medicaid. I asked him if he pays attention to what insurance patients have when he is prescribing. He said no. I asked him what downsides of Butrans he saw. He said every medication has downsides. I agreed & told him I was not suggesting that Butrans was an exception to that rule, adding that Butrans is a CIII opioid & carries abuse/addiction potential. Discussed once weekly dosing in transdermal form & reviewed appropriate patient type. Also reminded him of OxyContin
PPLPMDL0020000001	Cleveland	OH	44195	11/17/2011	worked apm dept-left Butrans fpi,formulary grid,patient savings card flashcard,BUP3015 and my business card for DR.Mekhal,Dr.Minzter,Dr.Vrooman. worked chronic pain and neurology-left same info for Dr.Covington,Dr.Mathews,DR.Bamford,Dr.Kriegler,Dr.Mays,DR.Stillman. worked rheumatology dept-left SAME info for Dr.Calabrese,Betsy Kirschner,NP,Patty Paczos,PA,Dr.Long,Dr.Chatterjee
PPLPMDL0020000001	Cleveland Hts	OH	44118	11/17/2011	Quick call...I asked doc if he previously discussed patient was able to get butrans after all. He said the patient ended up going to CVS but it was still \$50. He was not prepared to pay the \$50 so he left it there. He said the patient may still get it eventually. I reminded him that oxycontin is and option for more severe pain and widely well covered.
PPLPMDL0020000001	Lakewood	OH	44107	11/17/2011	I asked Dr if he had other patients in mind to start on Butrans, he said he would think about it. He asked about managed care coverage and I asked what plans he sees the most, he said anthem, and Medicaid and Medicare. I reviewed the managed care for Butrans and the savings program with Dr and Pat. I asked to scheduled an appointment to gain more time, Pat said that they may be able to next month.
PPLPMDL0020000001	Lakewood	OH	44107	11/17/2011	Quick call, I reviewed the Caresource and Medicaid managed care info with Dr and his staff. I asked Dr if he would start a few patients on Butrans and let me know is experience with getting it covered, he agreed.
PPLPMDL0020000001	Westlake	OH	44145	11/17/2011	Dr and I reviewed the inclusion criteria and I asked if he treats these conditions differently. He said that depending on the condition, some are able to be helped with procedures, while others do not respond as well. We reviewed Butrans as an option for treating pain associated with these types of conditions and I asked if he would start a few new patients. He agreed.
PPLPMDL0020000001	Cleveland Hts	OH	44118	11/17/2011	Window call...I asked doc if he sees any advantages to a once a week pain for the mgmt of moderate ATC pain. He asked, "once a week? how much does it cost." I gave him a formulary grid for butrans and oxycontin. I also gave him a invite to the butrans portalto learn more at his convenience. No commitment.
PPLPMDL0020000001	Brooklyn	OH	44130	11/17/2011	Spoke with Renee' who said she didn't have any Butrans updates since my last visit. Reminded her of ability of patients to take supplemental analgesia with Butrans & showed FPI 2.4 to support messaging. She said she is aware. Also reminded her of automatic savings through e-voucher for Butrans & OxyContin savings cards.
PPLPMDL0020000001	Cleveland	OH	44103	11/17/2011	talked to dr about 6 Butrans core selling messages,asked dr what features of Butrans stood out to him? dr said he likes that Butrans is a patch and once weekly dosing is a good option for some patients.dr said his biggest challenge has been medicaid not covering Butrans.dr said he knows dr boyd(in his office)has gotten a few Caresource patients started on Butrans,after a PA,so he may consider starting a few patients and see what happens.showd dr visual aid for discussion,focused on opioid experienced patients,initiation and titration of Butrans and I asked dr if he could start 2 patients today or tomorrow on Butrans? dr said he will see who comes in office and talk to some patients about Butrans.we talked about OxyContin being an option for patients,discussed formulary coverage and asked dr to continue starting patients on OxyContin,dr said he will do that as he doesnt have problems getting OxyContin covered.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44103	11/17/2011	talked to Abdul,Pharmacist,about Butrans Rx,he's not seen anything recently.I asked Abdul if patients are taking immediate release opioids and not controlled,has he been recommending Butrans for them? Abdul said yes he's giving patient info booklets to patients and telling them to speak with their HCP's.we discussed 6 Butrans core selling messages and I asked what features of Butrans stood out to him? Abdul said he likes that Butrans is transdermal and dosed once every 7 days.Abdul said some patients may prefer a patch and once weekly dosing.I asked Abdul to continue recommending Butrans for patients,Abdul agreed to do this.I asked Abdul if he's seeing new Rx for OxyContin or same patients monthly getting OxyContin? Abdul said not many new Rx for OxyContin,they are seeing a lot of Opana ER and same patients monthly for OxyContin.we talked about insurance coverage for OxyContin and gave Abdul formulary grids for OxyContin.
PPLPMDL0020000001	Cleveland	OH	44114	11/17/2011	i talked to Laura,Pharmacy Mgr,about Butrans 6 core selling messages,showed visual aid and asked Laura what features stood out to her? Laura said transdermal delivery and once weekly dosing of Butrans.Laura said she thinks Butrans is a good product,just hasn't seen any scripts for Butrans.Laura said she'll order Butrans once she gets her 1st Rx.we talked about formulary coverage for Butrans and discussed how OxyContin is an option for patients.Laura said she's still seeing OxyContin Rx but not many new Rx,just same patients getting their scripts filled monthly for OxyContin.I asked Laura who were some of the big tramadol and vicodin writers in the area? Laura said dr patel,dr katz,dr marshall,dr nickels and some cleve clinic hcp's.i asked Laura if she would give Butrans patient info booklets to patients if they are taking immediate release opioids daily but not controlled? Laura said she would be willing to do that.we discussed OxyContin coverage and recommended senokot-5
PPLPMDL0020000001	Cleveland	OH	44130	11/17/2011	TRIALIST- I asked Dr Diab what downsides or limitations he saw with Butrans. He said cost. I asked what he meant. He said insurances aren't paying for it. Showed Butrans formulary grid & discussed coverage, pointing out tier 3 co-pay. He said that is the problem- that insurance companies tell him they want tier 1 or tier 2 medications first. I told him this should not be the case with commercial insurance plans. He said then when patients go to pick up the medication it is too expensive because a tier 3 co-pay is high. I showed him his Butrans savings cards & let him know commercially insured patients & those who pay cash can use them to save \$40 per month off their co-pay, bringing them down to a \$15 or \$20 co-pay. I asked if this was reasonable. He said yes. Also pointed out his OxyContin savings cards & asked him to give them out as well.
PPLPMDL0020000001	Cleveland	OH	44112	11/17/2011	Doc said he wrote a script for butrans a couple of weeks ago. I asked him to tell me about the patient. He the patient was taking a few tabs of percocet but he has not heard back from him and not sure if he even got it filled. He did not remember what strength he wrote for. I reviewed the 5 and 10mcg starting dose. I encouraged him to focus on commercially insured patients. He said he did and gave a savings card. I explained that if they are taking more than 80mg of a morphine equivalent, they are probably more appropriate for oxycontin.
PPLPMDL0020000001	Cleveland	OH	44113	11/17/2011	dr said he gave 1 patient info booklet out today,so patient will return in 2 weeks for a follow-up appointment and let dr know if he's interested in starting on Butrans.I asked dr why he chose to discuss Butrans with this patient? dr said the patients been taking vicodin daily for his chronic pain and wanted more pills and BWC is asking doctors to write less pills and Vicodin is 1 of the medications on the BWC list.dr said he thought Butrans could be an option for him.dr said he's been giving booklets to patients all week.dr said he also had a patient that he wanted to start on Butrans,gave her a script for Butrans and patient info booklet but the patient saw her primary care dr and this primary care dr said he didnt know enough about Butrans to allow her to start on the medication and told the patient she was not allowed to start on Butrans.i asked dr if he'll continue giving Butrans patient info booklets out to patients today and tomorrow and start 1patient? dr said yes he will give booklets out and if 1 patient's interested in starting on Butrans,he'll start that patient.we talked about OxyContin being an option for patients and I asked dr if he had any cash paying or commercial plan patients? dr said he has a few cash paying patients that were BWC but now are self-pay.i asked dr if OxyContin savings cards would be valuable for these patients? dr said yes he will take them,explained savings card program and recommended Senokot-5
PPLPMDL0020000001	Independence	OH	44131	11/18/2011	NON-PRESCRIBER- Quick call as I caught Lisa in the window. She said she doesn't have anyone on Butrans. Positioned Butrans for patients for patients whose chronic tramadol around-the-clock is not controlling their pain. Also offered savings cards for Butrans & OxyContin. She said they did not need either. Spoke with Maria & gave her "Experience" invites & asked her to give one each to Dr Keppler, Lisa, & Roman. She agreed.
PPLPMDL0020000001	Cleveland	OH	44113	11/18/2011	talked to dr about who the appropriate patient is for Butrans, dr said she has patients taking tramadol that arent controlled and are always asking for more pills or asking for a different opioid like vicodin or percocet,she thinks Butrans could be an option.dr said its tough to get patients off the pills as they are attached to them.showed fpi,talked to dr about starting 1-2 patients on Butrans and still giving immediate release opioid,dr said ok and committed to starting a few patients.recommended Senokot-5
PPLPMDL0020000001	Garfield Hts	OH	44125	11/18/2011	NON-PRESCRIBER- I reminded Dr Sadowski of my last visit when he was going to put a patient on Butrans & asked him what happened with her. He said he did not end up giving it to her. I asked him why not. He said she was not interested in trying a patch. He then walked out of the office. Spent time with Deena, reviewing dosing, savings cards, & appropriate patient type.
PPLPMDL0020000001	Shaker Heights	OH	44122	11/18/2011	Spoke with Doug, pharmacist, & showed him Butrans FPI 2.4, discussing supplemental analgesia with Butrans. He said they probably do have an alert because they seem to have one for everything. He said he has not dispensed any Butrans yet. Discussed appropriate patient type & then he got called away to deal with a customer issue. Gave him OxyContin savings cards.
PPLPMDL0020000001	Parma	OH	44129	11/18/2011	Spoke with floater pharmacist. Discussed Butrans 5 core messages as she said she could use a "refresher" but has seen it at some of the stores. Reviewed appropriate patient type & ability of patients to take supplemental analgesia with Butrans in the form of immediate-release opioids or non-opioid medications. Also discussed OxyContin savings cards for patients who have commercial insurance or who are cash-pay.
PPLPMDL0020000001	Cleveland	OH	44113	11/18/2011	I reviewed BUP3015 with Dr.I asked if he felt a 30% reduction in pain was clinically significant? Dr agreed it was. I asked Dr if he saw this with short acting opioids,dr said no. Pain is usually same or worse. I explained a 30% reduction in at least 50% of patients is what he may expect to see with Butrans according to our data.I left dr BUP3015 brochure.I asked Dr. to start 1-2 patients before I see him again next Friday,dr committed.
PPLPMDL0020000001	Cleveland	OH	44113	11/18/2011	worked premier physician offices
PPLPMDL0020000001	Cleveland	OH	44113	11/18/2011	dr said she's been giving Butrans patient info booklets to read and follow-up in 2 weeks to see if they are interested in starting,dr said these were vicodin patients that wanted more pills and some asked for percocet,dr said she told them Butrans was an option for them as she wasnt going to give them more pills or convert them to percocet.showed visual aid,opioid experienced patients and asked dr to start 1-2 patients today on Butrans,dr committed to this,focused dr on commercial plan patients.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44109	11/18/2011	dr said he's starting more patients on Butrans,patients are doing well no complaints. dr wanted Butrans patient info booklets and I asked dr if he will continue starting patients on Butrans today and next week? dr committed to do so,focused dr on commercial plans.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44109	11/18/2011	talked to dr about BUP3015, 30% reduction in pain and asked dr if he's seeing this in patients taking immediate release opioids? dr said no,usually patients have the same level of pain or worse.i asked dr to start 1-2 patients before I see him again next week? dr committed to do this,dr said he's given a few booklets out this week for patients to learn more about Butrans and is following up with them in 2 weeks.focused dr on commercial plan patients.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44109	11/18/2011	worked pm&R - see call notes,worked internal medicine-left Butrans fpi,patient info booklet,BUP3015,formulary grid and my business card for dr.lindheim,dr.ricanati,dr.jones,dr.gelehrter,dr.mccreery and dr.harrington.
PPLPMDL0020000001	Parma	OH	44129	11/18/2011	NON-PRESCRIBER- Quick call. I reminded Dr Roheny how excited he seemed when I had told him last time that coverage for Butrans was improving & that Medicaid plans have been paying for Butrans. He said he had forgotten. He asked me if I was talking about Medicaid or Medicare. I told him Medicaid. He said that is great news & then walked away. Quickly reminded him of OxyContin favorable managed care coverage.

PPLPMDL0020000001	Cleveland	OH	44109	11/18/2011	showed dr BUP3015,discussed 30% reduction in pain and i asked dr if that was clinically significant? dr said yes it was.i asked dr if he see's a 30% reduction in pain with immediate release opioids? dr said no,usually doesnt happen.i asked dr if 30% reduction in pain was clinically significant enough for him to prescribe Butrans? dr said yes if patients are willing to wear a patch.dr said he keeps thinking Butrans is more on the severe end of pain and is thinking of it the same way as Duragesic.i asked dr to expand on this comment.dr said Duragesic is a patch and long-acting opioid.i told dr that Butrans is the 1st and only long-acting opioid in the CII class,what that means is that he can call in refills if he chooses to do so,dr said he doesnt call in refills patients have to come to office for their narcotics Rx.i showed dr dosage ranges for immediate release opioids where Butrans is appropriate and we discussed titration.i asked dr if he can start 1-2 patients before i see him again next week? dr said he will try his best and see what he can do.focused dr on BWC and Commercial plans.we talked about OxyContin being an option for patients,dr said he writes a lot of OxyContin,its a good long-acting opioid,it works and its covered by most insurance companies.i asked dr to continue prescribing OxyContin,dr said he will do dr said he gave a few Butrans initiation booklets to patients this week.i asked dr why he chose to discuss this with patients? dr said a couple patients were taking tramadol daily but asking for more pills and 1 patient wanted to start on vicodin,dr told the patients he wasnt comfortable doing this and wanted them to read about Butrans and he's following up in 2 weeks.i asked dr if he could think of a commercial plan patient,like the one's he gave booklets to this week,that he can start on Butrans? dr said he will see who comes in and if appropriate he'll start them.we discussed initiation and titration of Butrans and focused dr on commercial plan patients.we talked about OxyContin being an option for patients and dr said he writes a lot of OxyContin and will continue doing that.we discussed OxyContin insurance coverage.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44113	11/18/2011	REPEAT CUSTOMER- Spoke with Darlene(RN), who said Dr Tabbaa was unavailable today to see me. I reviewed Butrans core messages with her & asked if they needed Butrans or OxyContin savings cards. She said she did not know as he would be the one to speak with about this. I asked if she would give him an initiation/titration guide for Butrans & she agreed. She said to try back another week.
PPLPMDL0020000001	Beachwood	OH	44122	11/18/2011	talked to Ray,Pharmacist,about Butrans stocking and Ray said he's not seen any scripts for Butrans.we talked about 6 core selling messages,showed visual aid and asked Ray what features of Butrans stood out to him? Ray said transdermal delivery,the fact that Butrans is a patch could be an option for some patients and that Butrans is dosed once a week.i asked Ray if he would be willing to give patients a Butrans patient info booklet,if patients are taking immediate release opioids but not controlled,and they can talk to their HCP's about Butrans? Ray said yes he will do that.we discussed Commercial plan patients and BWC. we talked about OxyContin scripts and how most of them are same patients monthly,not a lot of new Rx for OxyContin.confirmed stocking and we discussed formulary coverage for OxyContin.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44109	11/18/2011	i talked to Chris,Pharmacist,about Butrans stocking and 5 core selling messages,Chris said they are getting scripts for Butrans and some are coming from PM&R, Internal medicine and rheumatology,Chris said he doesnt know specific HCP's writing but he knows they have Butrans in stock and are giving the Butrans patient info booklets out to patients.focused Chris on application/rotation of Butrans section,in booklet and asked chris to discuss with patients,Chris committed to do this.i asked if Rob,Pharmacy Manager was in office and Chris said he was gone for the day catch him next week.i asked Chris if he would give patient info booklets to patients,to talk to their HCP's about Butrans,if they arent controlled on their immediate release opioids? Chris said he'll give them out but i need to speak with Rob about this next week.
PPLPMDL0020000001	Independence	OH	44131	11/18/2011	NON-PRESCRIBER- Quick call- Positioned Butrans for patients if tramadol or Vicodin 3 times per day were not controlling a patient's moderate to severe chronic pain & reminded Dr Jack of once weekly dosing. Spoke with Maria who said that they would be limiting seeing the doctors due to their busy schedules. Unable to schedule lunches at this time as well.
PPLPMDL0020000001	Cleveland	OH	44111	11/21/2011	Spoke with Dave, we reviewed Butrans medication guide and how to teach patients about proper use and application. I reviewed that Butrans is a CII and that Butrans can be used with short acting supplemental analgesia. I asked if he would ever hand a patient a medication guide and recommend Butrans for an appropriate patient and he said he would. Reminder that OxyContin is an option.
PPLPMDL0020000001	Lakewood	OH	44107	11/21/2011	Spoke with Heather, I reviewed the Butrans medication guide and how to teach patients about the proper use and application of Butrans. I reviewed that Butrans is a CII and can be called in and written refills. We discussed the use of Butrans with supplemental analgesia. I asked if she has any patients who come in each month to refill their tramadol who might benefit from Butrans. She said she will keep it in mind.
PPLPMDL0020000001	Lakewood	OH	44107	11/21/2011	I asked Aduwa if she would ever recommend Butrans for a patient and give them a medication guide. She said she would probably leave it up to the Dr. I asked how often she consults with patients and she said only if they ask for her. I reviewed the medication guide and use of short acting supplemental analgesia with Butrans. Reminder that OxyContin has 7 tablet strengths and is still a long acting options.
PPLPMDL0020000001	Cleveland	OH	44106	11/21/2011	dr said he could only remember the name Butrans and that it was a transdermal medication,nothing else,dr said he needs to know who is the appropriate patient,what are the side effects and who covers Butrans? showed dr FPI and visual aid,discussed appropriate patients-focused on opioid experienced patients and showed dr side effect profile,i asked dr if there were any side effects of Butrans that surprised him? dr said no typical opioid side effects except for the application site pruritus but dr said he understood that side effect was there because Butrans is a patch.showed formulary grid to dr and focused dr on commercial plan patients and use of Butrans patient savings cards,dr said 70% of the patients he treats at Main Campus are Medicare and 30% are Medicaid.we talked about PA for Caresource patients.i asked dr if he could start 1-2 patients on Butrans this week,dr committed to doing this.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44106	11/21/2011	dr said he hasnt started anyone recently on Butrans and needs people to remind him about Butrans.dr said its just easy for him to write tramadol or vicodin because thats all he's had for his patients in the past.dr said he likes that Butrans is the 1st and only long-acting opioid in the CII class so that does make a difference. I showed dr BUP3015,asked if he see's 30% clinical reductions in his patients pain levels with short-acting opioids? dr said no he doesnt see that,told dr he can expect to see that with Butrans,we discussed study in more detail and appropriate patients and i asked dr if he had a few patients in mind that he could start on Butrans this week? dr said he will do his best as he's sure there are plenty of appropriate patients.focused dr on commercial plan patients and discussed PA for caresource patients.we also talked about OxyContin being an option for patients,7 tablet strengths and formulary coverage for OxyContin.recommended Senokot-5
PPLPMDL0020000001	Parma	OH	44129	11/21/2011	NON-PRESCRIBER- Reviewed 5 core messages with Lucy & discussed Butrans as a long-acting CII option for appropriate patients. Spent time going over appropriate range of patients for Butrans. She said she does not have a lot of patients on opioids. Reviewed "Initiations" presentation case study of "Evelyn" & asked if that sounds like a reasonable patient type that she might see & she said yes. Discussed Butrans as a once weekly transdermal option for those patients. Also reviewed managed care coverage & discussed OxyContin as a CII opioid.
PPLPMDL0020000001	Lakewood	OH	44107	11/21/2011	I asked Dr what the downside is to trying Butrans. He said he will look for the right patient. I asked who he is thinking, he said moderate pain patient taking vicodin. I reminded him that tramadol patients may also be appropriate patients for Butrans. I asked if he would try this type of patient this week and he agreed. Reminder that OxyContin is still a long acting option.
PPLPMDL0020000001	Cleveland	OH	44106	11/21/2011	dr said he hasnt started anyone on Butrans yet because he doesnt have a lot of patients taking narcotics.dr said he likes that Butrans is a patch and dosed once a week and is happy to have a long-acting opioid in the CIII class.dr said they dont normally call in refills for narcotics BUT the fact that he could for Butrans is a plus in his mind.dr asked who the appropriate patients were for Butrans and who covers Butrans? showed initiation guide and visual aid,appropriate patients section-focused on opioid experienced patients and we discussed initiation and titration of Butrans.i asked dr if he had a few patients this week that he could start on Butrans? dr said he may but wasnt sure,but he'll start a couple people and see how they respond to Butrans.focused dr on commercial plan patients and explained Butrans patient savings card program.recommended Senokot-5
PPLPMDL0020000001	Parma	OH	44129	11/21/2011	NON-PRESCRIBER- I reminded Dr Kushnar of our previous lunch when he told me about a patient who was taking tramadol around-the-clock but not getting pain relief, for whom she was going to prescribe Butrans. She said she had forgotten & that she forgets who the patient even was now. Reinforced appropriate patient type & reviewed appropriate range of Butrans patient, discussing OxyContin as an option for patients beyond Butrans. Also showed initiations program & asked if the patient "Evelyn" sounded like any of her patients. She said yes. She reminded me that she does not prescribe a lot of opioids. I asked her if she does have patients for whom she refills Vicodin or tramadol monthly. She said yes. I asked her if an appropriate patient presents, if she feels comfortable enough with Butrans that she would prescribe it for them. She said yes. She asked about managed care coverage. Discussed commercial & Medicaid coverage/prior authorization requirements where applicable. Also discussed savings cards. Discussed OxyContin 7 tablet strengths for appropriate patients.
PPLPMDL0020000001	Lakewood	OH	44107	11/21/2011	I showed the inclusion criteria and asked Dr his thought on using Butrans for these patients. He said he would if the patient is already not on high doses of other opioids when they come to him. I asked Dr if he would write Butrans for an appropriate patient today, he said that he will. Reminder that OxyContin is still a long acting option that is covered on most managed care.
PPLPMDL0020000001	Cleveland	OH	44109	11/21/2011	I talked to Ron,Pharmacist,about Butrans stocking and 6 core selling messages,showed Ron visual aid and asked what features of Butrans stood out? Ron said transdermal technology and once weekly dosing,Ron said there are a lot of patients taking short-acting opioids that arent always controlled and may have an interest in hearing about a patch like Butrans.i asked Ron if he would give these types of appropriate patients a Butrans patient info booklet so they can talk to their doctors about Butrans? Ron said he would do that.we discussed OxyContin stocking and i asked if there are new Rx for OxyContin? Ron said rarely a new Rx for OxyContin,usually the same patients getting OxyContin monthly.we talked about insurance coverage for OxyContin and i recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44104	11/21/2011	dr said the 1 patient on Butrans is doing great so she's happy.i asked dr if she has more patients like this 1 patient,to start on Butrans this week? dr said she has a lot of patients taking vicodin and percocet that meet the Butrans indication but not all patients want to stop taking their pills and wear a patch.i showed dr fpi,2.4 maintenance of therapy,and told dr she can give these patients immediate release opioid or non-opioid therapy,dr said ok she will think about it and talk to some patients.focused dr on commercial plan patients and discussed PA for Caresource with dr.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44113	11/21/2011	dr said she has a few patients on Butrans and they are doing well.dr said she hasnt seen anyone lately that she can start on Butrans because majority of her patients are medicaid and medicaid not been covering Butrans.i talked to dr about PA for stated medicaid patients and PA for Caresource patients.showed dr BUP3015,discussed 30% clinical reduction in pain,and asked dr if this was clinically significant? dr said yes any reduction in pain is good for her patients.i asked dr if 30% was clinically significant enough for her to prescribe Butrans? dr said yes and she will continue starting patients on Butrans when appropriate.focused dr on commercial plan patients so they can use Butrans patient savings cards.recommended Senokot-5
PPLPMDL0020000001	South Euclid	OH	44121	11/21/2011	Window call...Reminded doc of the butrans patient type, once weekly dosing, and CII status which means it can be called in and refilled. Provided Butrans portal invite and formulary grid. Nothing learned.
PPLPMDL0020000001	Cleveland	OH	44121	11/21/2011	Window call...Reminded doc of the butrans patient type, once weekly dosing, and CII status which means it can be called in and refilled. Provided Butrans portal invite and formulary grid. Nothing learned.
PPLPMDL0020000001	Cleveland	OH	44111	11/21/2011	I asked Dr where he feels Butrans will fit into his practice. He said that probably not as much when he is treating cancer patients because he likes to have a more flexible dose, but maybe for patients with more moderate pain after procedures are not relieving their pain. I asked if he would try Butrans for some of these patients and he agreed. I reminded him that OxyContin has 7 strengths for treating his patients pain who have cancer.
PPLPMDL0020000001	Lakewood	OH	44107	11/21/2011	I reviewed the managed care for Butrans and asked Dr if he would write Butrans for a few new patients this week. He said that he would. He has a patient he is going in to see now who is on percocet and he will discuss it with them. I reviewed how to initiate Butrans and gave him the savings cards and patient information.
PPLPMDL0020000001	Cleveland	OH	44113	11/21/2011	dr said he's talking to patients about Butrans and if patients are willing to start on Butrans,he will start them.focused dr on opioid experienced patients,visual aid,dr said patients taking 20-25mg vicodin daily are who he's thinking of instead of pushing the vicodin dose up.i told dr that was good and i am looking forward to hearing more about his patients experiences with Butrans.focused dr on commercial plan patients.
PPLPMDL0020000001	Lakewood	OH	44107	11/21/2011	I reviewed the managed care for Butrans, commercial insurance with as low as a \$15 copay, and Medicaid/Caresource. I asked if she has some Medicaid patients where Butrans may be appropriate and she said she will keep it in mind. I reminded her that OxyContin is an option that is covered on Med D AARP and most managed care plans.
PPLPMDL0020000001	South Euclid	OH	44121	11/21/2011	Window call...Reminded doc of the butrans patient type, once weekly dosing, and CII status which means it can be called in and refilled. Provided Butrans portal invite and formulary grid. Nothing learned.
PPLPMDL0020000001	Parma	OH	44129	11/21/2011	NON-PRESCRIBER- Quick call- Caught Dr Taylor briefly between patients. She said she has not gotten any Butrans feedback yet but will keep it in mind for other patients that she sees. She also added that she had just prescribed OxyContin for the last patient she saw.
PPLPMDL0020000001	Cleveland	OH	44113	11/21/2011	talked to Deb,PA,about all of the patients she's starting on Butrans.Deb said its easy, she gives Butrans patient info booklets to patients,shows the application sites to patients and discusses rotation of Butrans and side effects of Butrans.Deb said no issues at the moment and she'll continue starting patients on Butrans.told deb that was great and I was excited to hear more feedback from her patients that are being started on Butrans.Deb wanted 25 Butrans patient info booklets.
PPLPMDL0020000001	Cleveland	OH	44106	11/21/2011	dr said he's started a few patients on Butrans,he said its tough to get some attending physicians,like Dr.Hayek(Chief of APN)to start patients on something new like Butrans.dr said dr hayek,likes to refill tramadol or increase tramadol dose. we talked about dr suggesting Butrans to the attending physicians instead of refilling or increasing tramadol,showed visual aid and focused on opioid experienced patients.i asked dr if he could start a few patients this week,per our discussion,on Butrans? dr said he will suggest it to the attendings and if they agree, he'll do that. dr said 70% of patients are medicaid and 30% medicaid so thats the biggest challenge here to get patients started on Butrans.we talked about PA for Caresource patients and i focused dr on commercial plan patients.recommended Senokot-5

PPLPMDL0020000001	Cleveland	OH	44106	11/21/2011	dr said she knows the name "Butrans" but couldnt remember who was appropriate and who pays for Butrans? showed dr Butrans visual aid,discussed opioid experienced patients and showed formulary grid focusing dr on commercial plan patients.asked dr if she has 1-2 patients she can start on Butrans this week? dr said probably so but she has to get Attending physicians approval as she just cant write any drug she wants without their approval.i told dr i completely understood that and asked her to at least suggest Butrans to the attending physician,if she felt patients were appropriate? dr said ok she could do that. recommended Senokot-S
	Cleveland	OH	44104	11/21/2011	dr said he's not started anyone on Butrans recently,mainly due to medicare being majority of his patients.i showed pg.11,visual aid, pain conditions and asked dr if he's seen patients with these conditions recently? dr said yes he treats a lot of patients with osteoarthritis. i asked dr if these patients tend to take opioids for their chronic pain? dr said yes they do.i told dr that these are the patients he could start on Butrans,we discussed initiation and titration of Butrans and i focused dr on commercial plan patients.dr said if he has anyone appropriate for Butrans this week, he'll start them.told dr he also has option of OxyContin,if dr feels thats appropriate,we talked about Q12H dosing and 7 tablet strengths for OxyContin and discussed formulary coverage with emphasis on medicare plans.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	11/21/2011	dr said he started a couple patients on Butrans last week,we talked about those patients and i asked dr if he has more patients like them,to start on Butrans? dr said yes he probably will see more patients this week that are appropriate and if insurance covers Butrans,he'll start them.focused dr on commercial and BWC patients.showed visual aid,discussed initiation and titration of Butrans and patient info booklet asking dr to focus patient discussion on application/rotation of Butrans,dr said he will do that as he gives booklets to patients.recommended Senokot-S
	Cleveland	OH	44104	11/21/2011	talked to dr about opioid experienced patients in BUP3015 clinical trial,asked dr if 30% reduction in pain was clinically significant? dr said yes it was any reduction in pain is good.i asked dr if the 30% reduction was good enough for him to prescribe Butrans? dr said yes it is.dr said the toughest part is to get patients to consider a different option like a patch as they are attached to their pills.i showed dr FPI,2.4 maintenance of therapy section,noting that dr can give immediate release opioid or non-opioid therapy with Butrans.dr said ok he'll talk to more patients and see what happens.we discussed initiation and titration of Butrans and i focused dr on commercial plan patients.dr asked about medicaid coverage? we discussed PA for Caresource patients.i asked dr how OxyContin fits into his practice? dr said if patients are taking high doses of percoet and not controlled,he'll convert them to OxyContin.we discussed 7 tablet strengths available and talked about OxyContin insurance coverage. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44106	11/21/2011	dr said he just needed a reminder of who the appropriate Butrans patients were, what the dosage strengths were, how to initiate patients on Butrans and how he wrote the prescription for Butrans.i showed dr Butrans visual aid,opioid experienced patients was focus,discussed initiation dosage strengths,titration of Butrans,showed the back of visual aid so dr could see how to write a script for Butrans.dr said that seemed easy and he wanted to take the Butrans initiation guide for his reference.i asked dr if he had a few patients in mind that he could start on Butrans today? dr said yes he had 1 in the exam room as we were talking and wanted to start this patient on Butrans.i told dr that was great and i would follow-up next week with him.
	CLEVELAND	OH	44109	11/21/2011	i talked to Rod,pharmacist,about 6 Butrans core messages and Rod said Butrans seems like a great option for patients but he's not seen any Rx for Butrans.i asked Rod what features of Butrans stood out to him? Rod said he likes that Butrans is transdermal and dosed once a week and believes some patients may like this option.i asked Rod if he's given any patient info booklets out? Rod said a few but not recently.i showed Rod the application/rotation section in Butrans patient info booklet and asked Rod to discuss this info with patients including side effects,if patients are filling a Butrans Rx,Rod said ok he would do that.i asked Rod if he would hand out booklets to patients if they arent controlled on their short-acting opioids and patients could discuss Butrans with their HCP's? Rod said he would do that and i could leave a few booklets.discussed formulary coverage for Butrans and i recommended Senokot-S
PPLPMDL0020000001	N Royalton	OH	44133	11/22/2011	NON-PRESCRIBER- Introduced Butrans to Dr Martin, delivering 5 core messages & alerting him to box warning. Also reviewed appropriate patient type & showed initiation guide. Discussed 3 doses available, with 5 & 10mcg being two starting doses depending on the patient. He said he does not typically start patients with opioids & refers out. I asked if he would agree that he does have some patients who he is comfortable treating with opioids. He said maybe a few. Discussed Butrans as an option for these appropriate patients & discussed OxyContin as an option for appropriate patients beyond Butrans.
	Westlake	OH	44145	11/22/2011	Quick call, Dr was packed today since he is off Thurs/Fri. I asked Dr how the patient feedback has been for Butrans. He said the few patients that he has on Butrans are doing fine. I asked if he would write Butrans for a few new patients this week and he agreed.
PPLPMDL0020000001	Parma	OH	44134	11/22/2011	LOYALIST- I reminded Dr Hernandez of our last conversation when he told me that most of his Butrans patients have been new patients, who he has started on 5mcg. He said this is true. I asked him what about patients who are taking 3-4 Vicodin 5mg per day- would he consider that as a Butrans patient. He said that was a really good idea & that he has not thought of this prior to me bringing it up. He added that usually, he will "max out" a patient's Vicodin & then will put them on OxyContin 15mg. I told him that that sounds like an appropriate OxyContin patient type. I asked him if he would, instead of continuing to escalate someone's Vicodin, switch appropriate patients to Butrans. He said he would do this. Gave him "Experience" invite & asked him to participate. He said he would have a look.
	Independence	OH	44131	11/22/2011	NON-PRESCRIBER- Dr Sundaram said he recently started a patient on Butrans who had seen in the hospital. I asked if he knew if the patient was able to get it but he said he did not know. Discussed Butrans appropriate patient type & discussed appropriate range of patient, including OxyContin as an option for patients beyond Butrans. He said he still keeps Butrans in mind & may be able to find more patients.
PPLPMDL0020000001	N Royalton	OH	44133	11/22/2011	Spoke with floater pharmacist & introduced Butrans. She said she has seen it on the shelf & checked this location's shelf, ensuring they do have it. Discussed appropriate patient type, focusing on patients who take around-the-clock tramadol or Vicodin whose pain is not well-controlled. Also mentioned patients who call in too soon for refills of short-acting around-the-clock opioids. Discussed printing savings cards from Butrans.com & OxyContin savings cards. Reminded her savings cards can only be used for patients with insurance or who pay cash.
	N Royalton	OH	44133	11/22/2011	NON-PRESCRIBER- Introduced Butrans to Dr Matt, delivering 5 core messages & alerting him to box warning. He asked about dosing & what molecule is in Butrans. Discussed 3 doses, 5 & 10 being two of the starting doses depending on patient type. Also went over appropriate range of patients & discussed OxyContin as an option for appropriate patients beyond Butrans. Discussed buprenorphine as a partial agonist at mu opioid receptor. He asked if that is what is in Buprenex & added that he has used that in the past for kidney stones. He also asked who was using Butrans. Told him that a variety of different specialties are using it because so many types of physicians treat patients for pain with around-the-clock tramadol or Vicodin. Discussed Butrans as a CII opioid with abuse & addiction potential & let him know Butrans can be called in. Discussed managed care & savings cards for Butrans & OxyContin. He said he is glad to have another option for this type of patient & will keep it in mind for appropriate patients who fit the patient type.
PPLPMDL0020000001	Cleveland	OH	44109	11/22/2011	talked to Erin,Pharmacist,about Butrans and Erin said no Rx yet for Butrans but she thinks Butrans is a good option for patients.i asked Erin what she liked about Butrans and showed visual aid,with 5 core selling messages.Erin said she really likes that Butrans is a patch and the once weekly dosing could be appealing to some patients.i asked Erin if she's giving patient info booklets to patients,so they can talk to their HCP's,when their short-acting opioids arent controlling their pain? Erin said yes she's given a few booklets out and patients are talking to their HCP's. i asked Erin if she would continue doing this? Erin committed to do this.we discussed Butrans formulary coverage,focus on commercial plan patients.showed Erin OxyContin formulary grid and we talked about appropriate patients for OxyContin and 7 tablet strengths available.Erin said she's not seen new Rx for OxyContin recently, just the same patients monthly getting their Rx filled for OxyContin.recommended Senokot-S
	North Royalton	OH	44133	11/22/2011	NON-PRESCRIBER- Introduced Butrans to Dr Jennifer, delivering 5 core messages & alerting her to box warning. She said she has seen a patient in the nursing home who came from the hospital on it. Spent time going over appropriate patient type & range, & discussed OxyContin for patients beyond Butrans. Also showed demo patch. She asked if it was an agonist/antagonist. Told her Butrans is considered a partial agonist at the mu opioid receptor. Dr Jen said none of the physicians in that office treat any type of chronic pain. I asked where she saw a place for Butrans. She said possibly nursing homes. She added that pain patients are not the type of patient they like to "deal with" at the office. Empathized with her & asked if she would agree that it can be difficult for legitimate pain patients to get the care they need. She said yes but they take no chances. She said they refer all patients needing more than Tylenol to pain management.
PPLPMDL0020000001	Solon	OH	44139	11/22/2011	NON-PRESCRIBER- I showed Dr Zaidi BUP3015 efficacy results, pointing out that 49% of patients reported at least 30% reduction in pain score on Butrans 20mcg dose. I asked him if this had any meaning for him. He asked who did the study. I told him it was a study done for FDA approval. He said it did not mean much to him. I asked him where, in his mind, Butrans should be used. He said probably more primary care because they see patients on lower doses of opioids & asked if primary care physicians are using it. I told him a variety of specialties have found a place for Butrans. I asked him why he felt it was not more appropriate for patients like he sees. He said he has thought of it a few times but there is always "something" that makes the patient not a good candidate. He went on to say that he would want the patient to be a compliant one for "something like" Butrans. I asked him if he was saying that he would need to find a more compliant patient for Butrans than would be necessary for other pain medications. He said yes. I asked him why. He said he wouldn't want them putting on more than what they were supposed to. I agreed that a patient should only use Butrans as prescribed, just like any other medication. He only said he would continue to keep it in mind. Gave him OxyContin savings cards & reminded him of favorable managed care coverage.
	Cleveland	OH	44109	11/22/2011	i talked to dr about any chronic pain therapies he would like to replace? dr said the immediate release opioids are his biggest frustration as patients need to have their pain controlled but they want more and more and it never stops. i talked to dr about starting patients on Butrans after the 1st dose of short-acting opioid doesnt control patients pain instead of waiting so long to discuss Butrans with them. dr agreed saying that was a good idea and he will think of patients coming in this week.i focused dr on commercial plan patients and discussed PA for Caresource patients.<font color=blue><b>CHUDAKOB's query on 12/02/2011</b></font>Amy, while i realize that in the past i saw your next objective as a good question, upon further thought, there may be a comparative implication here. The implication is that while Butrans may provide at least a 30% reduction in pain, the short-actings may not. This comparative implication is that we will provide this reduction in pain better than they will and clearly there is no data to support this type of implied claim. Please refrain from using this in the future. Thanks!<font color=green><b>BROOKAM's response on 12/07/2011</b></font>-thanks barry<font color=blue><b>CHUDAKOB added notes on 12/07/2011</b></font>-Thank you!
PPLPMDL0020000001	Cleveland	OH	44104	11/22/2011	dr said she gave a few patient info booklets out last week to patients as she felt Butrans could be an option for them.i asked dr what made her think of Butrans for them? dr said patients were taking tramadol and not controlled so she is following up with a couple patients in 2 weeks to see if they read the Butrans patient info booklet. showed BUP3015,discussed opioid experienced patients and i asked dr if she could start 1-2 patients this week on Butrans? dr said if patients arent controlled and are asking for more pills,then she'll consider it as long as insurance covers it.i focused dr on commercial plan patients.recommended Senokot-S
	Cleveland	OH	44103	11/22/2011	dr said she's starting more and more patients on Butrans as she's gotten a few PA's approved for Medicaid patients.dr said patients are doing well on Butrans so she's happy.i showed dr BUP3015,asked if 30% clinical reduction was clinically significant? dr said yes any pain reduction was good and she rarely see's 30% reduction with short-acting opioids.i asked dr if this reduction was enough for her to prescribe Butrans weekly? dr said yes she prefers long-acting opioids and as long as she can get it approved she'll continue starting patients on Butrans.
PPLPMDL0020000001	Cleveland	OH	44195	11/22/2011	i talked to Anne,NP,about opioid experienced patients that are appropriate for Butrans,showed BUP3015,discussed 30% clinical reduction and Anne said that was impressive data.i asked Anne if she see's a 30% reduction in pain with short-acting opioids? Anne said no she doesn't,patients have the same or worse pain every time she see's them. I asked Anne if this was clinically significant enough for her to prescribe Butrans? Anne said yes it was and committed to starting a few patients focused Anne on commercial plan patients.
	Cleveland	OH	44105	11/22/2011	i talked to Luz,MA,who said that dr is out of town all week.i asked Luz if dr gave Butrans patient info booklets out last week? Luz said she thinks so as some patients made a comment about reading it over and following up with dr in 2 weeks. Luz said to come see dr on Dec.1st as she'll be back in office that day.
PPLPMDL0020000001	Westlake	OH	44145	11/22/2011	Quick call through window, i reviewed the managed care for Butrans and that Tina has had success getting Butrans approved on Caresource. I asked if he would start some new patients this week and he agreed. I also spoke with Tina regarding managed care for Butrans and OxyContin.
	Cleveland	OH	44143	11/22/2011	Quick call....reminded doc for the butrans patient type and that if he prescribes butrans after 300mg of tramadol, 10mcg would be an appropriate starting. I asked him to focus on non-medicare patients for best success.
PPLPMDL0020000001	Euclid	OH	44117	11/22/2011	Window call....Showed doc the demo patch and reminded him of the once weekly dosing. I asked him if he has any patients that might prefer a once a week analgesic. He smiled and said probably not enough. I asked him to try just one of those patients this week.
	Cleveland	OH	44113	11/22/2011	dr called me and wanted more savings cards,gave dr 5 packs of Butrans patient savings cards and dr said since Deb has joined practice they are starting more patients on Butrans every day. i asked dr if he will start a few patients today and tomorrow on Butrans? dr said yes he will do that.



PPLPMDL0020000001	Westlake	OH	44145	11/22/2011	Quick call, Dr was way behind, I asked him if he would start a few new Butrans patients this week and he agreed. I asked if he's been happy with the results he has seen and he said yes. Reminder that OxyContin is still an option and he said he does use it for very severe pain and patients who are terminal.
PPLPMDL0020000001	Lyndhurst	OH	44124	11/22/2011	I reviewed the butrans coverage - with commercial plans and now with Caresource. She said she does not much medicaid and she has not had any issues with patients getting the product. I asked her if she is prescribing with refills. She said she likes to try them for a month, have them come back and then prescribe with refills if appropriate. I discussed the flexible dosing options of oxycontin and provide formulary grid for both.
PPLPMDL0020000001	Cleveland	OH	44109	11/22/2011	I talked to Paul and Allen, Pharmacists, about Butrans scripts and stocking. both of them said they are getting scripts for Butrans, BWC is paying for it and commercial insurance, medicaid/caresource has approved a few scripts for Butrans. I showed both pharmacists BUP3015, discussed the clinical trial with focus on 30% reduction in pain, I asked paul and allen if they see that kind of pain reduction with short-acting opioids? paul and allen said its rare if patients get that much pain reduction, they were impressed by the data. I asked if they could continue giving patients the patient info booklets, so patients can talk to their HCP's about Butrans? paul and allen agreed to do this and said they do provide patient counseling for patients taking opioids. we talked about OxyContin stocking and I asked if there are new Rx for OxyContin coming in to the pharmacy? paul and allen said not a lot of new Rx, mainly the same patients every month getting their scripts. discussed formulary coverage for OxyContin and recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	11/22/2011	I talked to dr about BUP3015, opioid experienced patients and asked dr if he's treating the pain conditions that were seen in the inclusion criteria? dr said yes he see's a lot of low back pain and arthritic patients. asked dr how he's treating their chronic pain? dr said he starts patients on tramadol and when that doesn't work he goes to vicodin and percocet. dr said he would like to decrease the amount of short-acting opioids he prescribes and thinks Butrans is a great option. dr said his only concern is insurance coverage as Deb, doctors MA, couldnt get Butrans approved through UH. I explained to dr that Deb, MA, had Prescriptions Solutions insurance under UH and there was a PA there, that's the reason Deb couldnt start on Butrans. dr said ok. I asked dr if he has other commercial plan patients to start on Butrans? dr said yes and committed to starting a few patients on Butrans. <font color=
PPLPMDL0020000001	Cleveland	OH	44127	11/22/2011	blue><b>CHUDAKOB's query on 12/02/2011</b></font>Perhaps a way to rephrase the next call objective is to ask the physician what type of percent reduction in pain does he look for in his patients that he considers significant. Then you can discuss what Butrans offers without bringing another product into the conversation. <font color=green><b>BROOKAM's response on 12/07/2011</b></font>ok thanks<font color=blue><b>CHUDAKOB added notes on 12/07/2011</b></font>Thank you!
PPLPMDL0020000001	Parma	OH	44129	11/22/2011	dr said she's given a few patients Butrans patient info booklets to read and she's following up with them in 2 weeks. we talked about opioid experienced patients trying Butrans and I talked to dr about initiation and titration. dr said biggest challenge is medicaid, dr asked about medicaid coverage for Butrans? I talked to dr about PA for Medicaid and Caresource patients. I asked dr if she could start a few patients on Butrans this week? dr said yes she has some coming in that she could talk to. I talked to Josie, MA, about PA for Caresource patients, as she processes all PA's.
PPLPMDL0020000001	Lyndhurst	OH	44124	11/22/2011	NON-PRESCRIBER- Quick call in the hallway between patients. Jen said she had not identified any Butrans patients since my last visit but that she is keeping an eye out for patients failing on tramadol. She also said that next Thursday will be her last day at the practice. Spent time with Dawn, who said that starting in December, Caryn will be at the Parma office 2 days per week when Jen leaves. She also said Deb Torres will come over to cover while they find a replacement for Jen. Dawn said she has not been flagged any charts recently for Butrans because things have been so chaotic at the office but said once they get up & running again, she will try to help with reminding practitioners.
PPLPMDL0020000001	Mayfield Hts	OH	44124	11/22/2011	I apologized to doc about his previous bad patient experience with butrans. I explained that an appropriate/ideal patient type for butrans is one just taking 3 or fewer tablets/day of a short acting like tramadol or vicodin and whose pain is more moderate. I also reviewed the initiation dosing and that 20mcg is not a starting dose. He said that he started her at 20mcg because she had been on others pain meds before and nothing else helped. I explained the potential for withdrawal symptoms if patient not tapered down from current therapy before starting on Butrans. I also explained that medicaid will not cover butrans and it will be expensive for those patients. I asked him to try butrans again for appropriate commercially insured patients and give them a savings card. He said ever product has a savings card. I told him that it should be easy to remember to give the card then. No commitment. I discussed the oxycontin patient type and the flexible dosing as an option for more sever pain. He mentioned a article about Purdue that was not favorable in Fortune magazine.
PPLPMDL0020000001	Parma	OH	44129	11/22/2011	I reviewed the butrans indication and described the patient type. I asked him if he sees that he will ever prescribe this product. He said it just seems like such a niche product and he forgets about it. I told him that's why I keep coming back. I asked him to try one patient that is failing on tramadol or vicodin and try them on butrans. He said ok. <font color=blue><b>CHUDAKOB's query on 12/02/2011</b></font>That is interesting that he sees this as a niche product. Did you ask him about where he sees it being niched?<font color=green><b>SIMERTOC's response on 12/13/2011</b></font>He has previously expressed that all patients taking tramadol or vicodin are not taking them chronically. <font color=blue><b>CHUDAKOB added notes on 12/15/2011</b></font>Ok. But did you ask him specifically where he sees it being niched? This may have been a good follow-up question.
PPLPMDL0020000001	Highland Heights	OH	44143	11/22/2011	REPEAT CUSTOMER- Dr Ortega said he had nothing new to tell me about Butrans. I asked if he is still starting new patients & giving Butrans a trial. He said not really because most patients are satisfied with the medication they are already on. I asked him if he is at least offering it to patients like we had discussed before. He said maybe he does have some more patients for it. He also added that he writes OxyContin for patients who are on higher opioid doses instead of offering Butrans. I agreed that this sounded like the right thing to do.
PPLPMDL0020000001	Westlake	OH	44145	11/23/2011	Asked doc if he has Caresource patients in his practice that may be taking a short acting like tramadol or vicodin. He said he is sure he does. I told him that Caresource is now paying for butrans after failing on tramadol or vicodin or tylenol with codiene. He said he does not have a lot of medicaid but its good to know. Gave him a formulary grid and also reminded him that oxycontin is option for patients not appropriate for butrans. Spoke with Deanna, we discussed the medication guide for Butrans and the appropriate patients for Butrans. I asked if she would give a medication guide to a patient who is taking tramadol around the clock and let them know about Butrans as an option they can discuss with their Dr. She said she usually does not do that but she would if the patient was asking about other options. I reviewed the manged care for Butrans and that OxyContin is also covered on most managed care plans.
PPLPMDL0020000001	Bedford	OH	44146	11/23/2011	Spoke with Matt, PharmD, & reviewed Butrans core messages. He checked his system & said he has not dispensed any in the last two months. I showed him patient information booklets & discussed how they can be used for current Butrans patients or those who Matt thinks may be good candidates based on appropriate patient type. Matt said he would keep a few on hand & asked if it has any type of patient assistance in it. Discussed savings via e-voucher for Wal-Mart customers. Also discussed OxyContin savings cards. Matt said they do not stock OxyContin at this location.
PPLPMDL0020000001	Warrensville Heights	OH	44122	11/23/2011	NON-PRESCRIBER- Dr Zivic said he has tried to prescribe Butrans a few time but that it got rejected by managed care. I asked if he knew what plans but he did not. I reviewed managed care coverage with him in detail, discussing prior authorization requirements for Medicaid. I asked if he felt that the Medicaid prior authorization would hinder his prescribing of Butrans & he said no because that type of patient is who he would write for anyway. I asked if Butrans is dosed once a week. I said yes & discussed dosing. He asked about adverse events. Showed him rates- he said he was interested in seeing application site skin reaction rates. He said they do not look "bad". He asked if he would start a patient on 5mcg. I reviewed initiation guide & discussed how to start Butrans depending on current opioid dose. Also discussed ability to titrate after 3 days & ability for patients to take supplemental analgesia with Butrans. I asked after how long he considers a condition chronic. He said a few weeks. I asked if the information we discussed today would help him feel confident in prescribing Butrans. He said he would start to use it. Also discussed OxyContin 7 tablet strengths & q12h dosing for appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44113	11/23/2011	dr said he's given a few patient info booklets out to patients so they can read about Butrans and he's following up in 2wks. showed dr BUP3015, we discussed opioid experienced patients, dr focused on vicodin patients, and I asked dr if he could start 1-2 patients this week on Butrans? dr said if patients are willing to wear a patch and insurance covers it he will start a few patients. dr asked about BWC coverage? focused dr on BWC and commercial plan patients. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	11/23/2011	talked to dr about opioid experienced patients, dr focused on vicodin patients that arent controlled and asking him for more pills, and how dr can consider Butrans as an option for them. dr said he's been gone 3 weeks, just returned monday and has given a few patient info booklets out for patients to read and he'll follow up with them. I asked dr if he could start 1-2 patients today on Butrans? dr said he will do his best and probably will see some patients today that he can start on Butrans. recommended Senokot-S
PPLPMDL0020000001	Westlake	OH	44145	11/23/2011	I reviewed our previous conversation about Butrans as an option when tramadol is not longer controlling the patients pain. He said he's tried to write Butrans but more often than not managed care has been an issue. I discussed where Butrans is covered and patients can get Butrans for a little as \$15 per month. I asked him to focus on anthem and medical mutual patients and he agree.
PPLPMDL0020000001	Cleveland	OH	44113	11/23/2011	I asked dr how a long-acting opioid fits into his treatment plan for chronic pain? dr said usually he waits as long as possible before starting patients on a long-acting opioid, unless patients have cancer pain. showed dr BUP3015, asked dr if he had some patients taking vicodin daily that werent controlled and could try Butrans? dr said he has a lot of patients taking vicodin and always asking for more pills or something else, so he will keep talking to patients about Butrans. dr said he did talk to a few patients after our lunch and he gave them patient info booklets. dr committed to giving booklets to patients ad I asked if he could start 1 patient on Butrans this week? dr committed. focused dr on commercial plan patients. recommended Senokot-S
PPLPMDL0020000001	Westlake	OH	44145	11/23/2011	Quick call at window, I asked if the couple patients he started on Butrans are having success. He said that he has not heard anything so he hopes they are doing fine, he will see them back in a month or two. I asked Dr if he would start a few more patients like those on Butrans and he agreed.
PPLPMDL0020000001	Cleveland	OH	44109	11/23/2011	dr said he's not started anyone on Butrans yet but is giving the patient info booklets out so he'll be following up with patients in 2 weeks. I asked dr if a 30% reduction in pain levels would be clinically significant? dr said yes absolutely. I showed dr BUP3015, opioid experienced clinical trial, dr focused on his vicodin patients and I asked dr if he could start 1-2 patients this week on Butrans? dr committed to do this. focused dr on BWC and commercial plans. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44114	11/23/2011	dr said she's been gone for 3 weeks so hasnt thought about Butrans, I asked dr if she's seen any patients this week that she felt were appropriate for Butrans? dr said she had a few and knows Butrans is available and will start more patients. dr said she just has to remember to start them on Butrans after tramadol as she usually goes to vicodin. showed dr BUP3015, we discussed opioid experienced patients, dr focused on vicodin patients, that she could start on Butrans? dr said she will start more, she's just going slower than other HCP's. focused dr on BWC and commercial plan patients and asked dr if she'll start 1-2 patients this week? dr said she'll do her best and if patients will try Butrans she will start them. recommended Senokot-S
PPLPMDL0020000001	Cleveland Bedford	OH	44109 44146	11/23/2011 11/23/2011	worked plan management and premier physicians offices throughout Lutheran hospital TRIALIST- Dr Moufawad said he was running too far behind today to talk. He added that Butrans is "in his mind" & that he should be able to start some patients soon. Gave him "Experience" invite & asked him to log on to participate.
PPLPMDL0020000001	Cleveland	OH	44113	11/23/2011	dr said he's giving patient info booklets out to patients but not many patients want to stop taking their pills. showed dr fpi, 2.4-maintenance of therapy, told dr he can still give these patients immediate release opioid or non-opioid therapy with Butrans. dr said ok he forgot that. I asked dr if he could start 1-2 patients this week on Butrans? dr said he will do that if patients are willing to try Butrans. dr asked about medicaid coverage? discussed PA for Caresource and focused dr on BWC and commercial insurance plans. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	11/23/2011	I talked to Dale, PA, about patients he's starting on Butrans, dale said most of them are taking vicodin or percocet, not controlled on 2 pills and asking for more so he's starting them on Butrans and working with dr shen, Pain management dr in practice he's recommending more patients be started on Butrans. I asked dale if he needed anything from me, he said no. I asked if dale could start more patients on Butrans this week? dale committed to doing this. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	11/23/2011	I asked dr if she has considered starting her hydrocodone patients on Butrans as she has a lot of experience so far starting her percocet patients on Butrans? dr said yes she's starting to consider these patients. dr said she started a couple patients that were taking vicodin and not controlled on Butrans and they are doing good so far on Butrans. I asked dr if she'll start more patients this week on Butrans? dr said yes she will do that. asked if he needed anything? dr said I could leave more patient info booklets but that was it. focused dr on BWC and commercial plan patients.
PPLPMDL0020000001	Cleveland	OH	44114	11/23/2011	talked to John about patients he's starting on Butrans, John said most of them are percocet patients but they have a few vicodin patients they've started. John said patients are fine with it when he tells them this is the only option they have and gives them patient info booklets to read about Butrans. John said biggest challenge is medicaid coverage of Butrans we discussed the PA for caresource patients, focused John on BWC and commercial plan patients. I asked John if he'll continue starting patients, as he works with Dr Marshall and Dr Katz? John said yes and committed to starting more patients on Butrans. recommend Senokot-S

PPLPMDL0020000001	Parma	OH	44129	11/23/2011	Quick call- Jackie said they had just been audited & it was not a good time, but added that she has not dispensed Butrans. Reminded her of patient information booklets that I have given her for patients & asked her to give them to patients who she thinks could benefit from Butrans. She agreed. Also delivered OxyContin savings card reminder.
PPLPMDL0020000001	Cleveland	OH	44109	11/23/2011	dr said she started a couple patients on Butrans.i asked dr why she chose Butrans? dr said these patients were taking percocet and not controlled and were asking for more pills so she wanted to try Butrans.we talked about initiation and titration and I asked dr to focus on BWC and commercial plan patients,dr said ok she would do that.recommended Senokot-S
PPLPMDL0020000001	Parma	OH	44129	11/23/2011	TRIALIST- Dr Gigliotti asked what Butrans' coverage is on Medicaid. Discussed Medicaid & prior authorization. I let him know that fortunately, the prior authorization requires only a failure of tramadol, hydrocodone, codeine, or oxycodone before a patient can get Butrans. I added that this is excellent news because he has told me in previous conversations that these are exactly the types of patients he would be prescribing Butrans for anyway (ie patients who were failing Vicodin.) He said that was good & added that perhaps after the holidays he could find some people to try on Butrans. I reminded him that he has many patients who take around-the-clock Vicodin, as he has told me in the past, & told him that certainly he could find one or two patients for a trial. Also reminder for OxyContin for those patients beyond Butrans.
PPLPMDL0020000001	Cleveland	OH	44109	11/23/2011	dr said he's starting patients on Butrans every week and patients are doing well on Butrans.i told dr that was good to hear and what feedback he's getting from patients? dr said patients are saying its easy to apply Butrans and it stays on for the 7 days and dr said he's seeing cognitive improvement in patients so he's happy. i asked dr if he will continue starting patients on Butrans this week? dr said yes,asked dr if he needed anything and dr said just leave Patient info booklets as he gives them to all patients that start on Butrans. focused dr on commercial plan patients.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44114	11/23/2011	dr said he's starting more patients on butrans,patients are doing well,no problems.i asked dr if he's considering his patients taking hydrocodone since he's got a lot of experience now with his percocet patients? dr said yes he's starting both vicodin and percocet patients on Butrans and does give some patients a small amount of short-acting opioids for breakthrough pain,others have to take non-opioid therapies with Butrans.i asked dr if he'll continue starting more patients this week? dr committed to this.recommended Senokot-S
PPLPMDL0020000001	Maple Heights	OH	44137	11/28/2011	Spoke with Marty, a floater pharmacist, & introduced Butrans to him as he had not heard of it before. Discussed core messages. He said he thinks he has seen it on some of the locations' shelves but has not dispensed any & did not know who/what it was for. Also discussed appropriate patient type. Offered OxyContin savings cards, but none were needed. Marty said that Andy, the former pharmacy manager, left & their new main pharmacist, Kim, was on maternity leave. He said this location will be having a lot of floaters filling in.
PPLPMDL0020000001	Cleveland	OH	44113	11/28/2011	talked to dr about the types of patients he's looking to start on Butrans.dr said if patients have been taking 4 vicodin daily,5/325 and maybe even an extra pill a day, so total of 4-5 vicodin daily and their pain isnt controlled,he talking to them about Butrans.dr said if insurance covers Butrans he's starting patients.asked dr if he'll start a couple patients on Butrans this week? dr said of course he will,he likes Butrans,thinks Butrans is a good product and will continue talking to patients about this option.talked to dr about PA for Caresource patients and focused dr on commercial plan patients. recommended Senokot-S
PPLPMDL0020000001	Warrensville Heights	OH	44122	11/28/2011	TRIALIST- I asked Dr Brooks about his more recent experience with Butrans & asked if he is still as satisfied with the results he sees. He said patients are very happy with the pain relief they get with Butrans. He added that a patient on Butrans just left his office. I asked him to tell me about her. He said she has "real" pain & was on Percocet prior to him switching her to Butrans. I asked him if he would ever consider using Butrans after tramadol. He said he had never thought of positioning it there. He added that he is happy to hear that he can use it as there as he was reserving it for later in the treatment algorithm. Discussed managed care coverage & explained Medicaid with prior authorization. I asked Dr Brooks if he would identify some appropriate patients & prescribe Butrans for them & he agreed. I asked where he typically uses OxyContin. He said he likes it most for patients with Sickle Cell Disease. He explained that the condition is very painful & that patients get good relief with OxyContin. I asked him to continue to use OxyContin where appropriate & he agreed.
PPLPMDL0020000001	Parma	OH	44129	11/28/2011	NON-PRESCRIBER- Reminder of Butrans appropriate patient range/type (ie patients not well-controlled on chronic tramadol or hydrocodone around-the-clock) & OxyContin for patients beyond that range. Dr Moysaenko said he would keep that in mind as he walked by.
PPLPMDL0020000001	Maple Heights	OH	44137	11/28/2011	Spoke with Kim, pharmacist/manager, who said she has not seen any movement of Butrans. Reviewed appropriate patient type & range. Also updated her on Butrans managed care, including Medicaid with explanation of prior authorization requirements. I asked if Kim fills a lot of prescriptions for chronic, around-the-clock short-acting opioids. She said yes. I asked if she ever makes a recommendation to a customer about a medication change, such as in this scenario. She said very rarely because they are so busy there they do not have time for such discussions. Also discussed OxyContin savings cards & reviewed eligibility requirements.
PPLPMDL0020000001	Parma	OH	44129	11/28/2011	NON-PRESCRIBER- Dr Taylor asked what the active molecule in Butrans is. I told her it is buprenorphine, a partial agonist at the mu-opioid receptor. I asked how the patient she had told me about is doing on Butrans. She said she is happy with the pain relief she is getting with Butrans. I asked if she would continue to prescribe Butrans for appropriate patients as she is getting good results so far. She said she is "getting rid" of "all her patients". I asked her to clarify. She said she is not taking on new patients & is discharging others on narcotics. I asked her if he meant all patients on narcotics. She said no & that she is keeping the appropriate ones. I told her she is right in evaluating patients & treating only those who are appropriate. I asked Dr Taylor if she would consider using Butrans for a patient who she was planning to start on opioid therapy for a chronic condition or if she would always go to a short-acting opioid first. She said she would probably prescribe short-acting first to ensure tolerability. She then asked if Butrans can be used on opioid-naive patients. I told her yes. She said she has not thought of using it there before but perhaps will start to consider that patient type as a potential Butrans patient type. Dr Taylor added that she likes that Butrans is a patch & is dosed once weekly. Reminded her that Butrans is still an opioid with abuse/addiction potential. She said she knows that. Also reminded her of OxyContin 7 tablet strengths.
PPLPMDL0020000001	Cleveland	OH	44109	11/28/2011	dr said he started a few patients on Butrans last week, but is waiting for Caresource to approve/disapprove the PA.I asked dr to tell me about these patients and why he chose Butrans for them. dr said patients were taking vicodin daily but still in pain and wanted more pills,so he talked to these patients about Butrans. dr said patients were open to trying Butrans but now they are waiting for Caresource approval. i asked dr to focus on BWC and commercial plan patients,dr said ok he will do that.i asked if dr will see a couple patients this week that he could start on Butrans? dr committed to doing this.recommended senokot-S
PPLPMDL0020000001	Cleveland	OH	44111	11/28/2011	Spoke with Steve,i asked if he's heard any feedback regarding Butrans and he said he has not heard anything. i reviewed that Butrans can be used with supplemental analgesia. Reminder that OxyContin is still an option when Butrans may not provide adequate analgesia. He said he still has many patients on OxyContin and we reviewed the OxyContin conversion guide.
PPLPMDL0020000001	Lakewood	OH	44107	11/28/2011	Quick call,i asked Dr if he would start a new Butrans patient today. He said he would. I asked if he knew who was coming in this afternoon and he said he'll have to look at the schedule. Reminder about OxyContin as an option and he said he will write it, mostly in the hospitals.<font color=blue><b>CHUDAKOB's query on 12/08/2011</b></font>Looks like this was a short-call and all about you! How could you have made it about him, or his patients and still asked for the business?<font color=green><b>HOLLUBA's response on 12/11/2011</b></font><b>His nurses told me that when he sees me, he writes a script of Butrans. Since he was moving in a week, I just closed him for one more script. I could have asked about the feedback from Butrans and asked if he had more patients that could benefit from Butrans.<font color=blue><b>CHUDAKOB added notes on 12/13/2011</b></font><b>I see. Thanks for the feedback.</b></font>
PPLPMDL0020000001	Cleveland	OH	44106	11/28/2011	dr said he's not started anyone on Butrans since he only has a few patients on narcotics. dr said he likes that Butrans is a patch and dosed once a week.i asked dr how his patients will feel about Butrans? dr said there are some patients that may prefer a patch over pills and once weekly dosing.dr said he'll think of some patients coming in this week and talk to them.i asked dr if he'll start a couple patients this week on Butrans? dr committed.focused dr on commercial plan patients.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	11/28/2011	talked to Deb,PA,about the patients she's starting on Butrans.Deb said her patients are doing great on Butrans,she loves Butrans and will continue starting more patients.i asked deb how she chooses Butrans for patients versus getting refills of short-acting opioids? Deb said if patients are taking 4-5 vicodin,5/325,daily and not controlled,she'll start them on Butrans.Deb said its easy to explain Butrans to patients and get them started.focused deb on commercial plan patients and PA for Caresource patients.
PPLPMDL0020000001	Cleveland	OH	44106	11/28/2011	worked pain management dept
PPLPMDL0020000001	Cleveland	OH	44106	11/28/2011	worked out-patient pharmacy
PPLPMDL0020000001	Cleveland	OH	44106	11/28/2011	talked to dr about patients he treats with pain conditions.pg.11 visual aid, and asked dr if he's seen anyone with these conditions? dr said yes a lot of patients with back pain and osteoarthritis.i asked dr how he treats their chronic pain? dr said by the time patients get to him they have usually tried at least 1 narcotic and he'll have patients start on tramadol before going to vicodin.i asked dr if he'll start a couple patients on Butrans this week instead of refilling tramadol? dr said yes he'll start some patients on Butrans as long as they are willing to wear a patch.showed dr Butrans patient info booklet,focused on application/rotation of Butrans and asked dr if he'll focus patient discussion on this,dr said he'll do this.focused dr on commercial plan patients and we discussed PA for Caresource.
PPLPMDL0020000001	Cleveland	OH	44106	11/28/2011	dr said he's not started anyone on Butrans, showed BUP3015 and discussed opioid experienced patients. asked dr if he see's these types of patients? dr said yes he see's them all the time. asked dr if he could start a couple patients this week? dr said if patients are willing to wear a patch and the attending physician approves him starting patients on Butrans,he will do that.we discussed initiation and titration of Butrans and i focused dr on commercial plan patients.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44106	11/28/2011	dr said he started 1 patient last week on Butrans,asked dr why he chose Butrans? dr said patient was taking tramadol,not controlled and wanted more pills so dr wanted to try Butrans. we discussed initiation and titration of Butrans, showed patient info booklet, and i asked dr if he has a couple more patients this week to start on Butrans? dr committed. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44106	11/28/2011	dr said he's started a few patients on Butrans,asked dr why he chose Butrans? dr said these patients were taking tramadol and not controlled so he started them on Butrans.we talked about follow-up appointments with patients, titration of Butrans and discussing side effects with patients.showed patient info booklet and asked dr to focus on application/rotation of Butrans.dr said he will do that.asked dr to start a few more patients this week on Butrans,dr committed.focus on commercial plan patients,we discussed Medicaid/Caresource patients and the PA for Caresource patients.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44106	11/28/2011	talked to dr about opioid experienced patients,showed BUP3015,and asked if she's seen any patients that are appropriate to start on Butrans? dr said yes she see's these patients every day but hasnt started anyone. we discussed initiation and titration of Butrans and i asked dr if she had 2 patients she could start on Butrans this week? dr committed. focused dr on commercial plans.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	11/28/2011	dr said she has a few patients on Butrans but hasnt started anyone recently as she doesnt have a lot of patients taking narcotics.i asked dr how the patients on Butrans were doing? dr said they were doing good,improvements in pain and cognitive functioning so she and her patients are happy so far.showed dr BUP3015,asked dr if she treats these types of patients? dr said yes,asked dr if she had a couple patients coming in this week that she could start on Butrans? dr said yes she's sure she will see a lot of patients this week that are appropriate for Butrans but her challenge is that medicaid doesnt cover Butrans.i talked to dr about PA for medicaid and Caresource patients and focused dr on Commercial plan patients.recommended senokot-S<font color=blue><b>CHUDAKOB's query on 12/07/2011</b></font><b>Amy, looking at your next call objective, I am wondering what "these types of pain conditions" are referring to?<font color=green><b>BROOKAM's response on 12/11/2011</b></font><b>pg. 11 visual aid or BUP 3015, inclusion criteria - I show 1 of these pages depending on call. thanks</b></font><b>color=blue><b>CHUDAKOB added notes on 12/15/2011</b></font><b>You might focus in on one of the disease states rather than all of them.</b></font>
PPLPMDL0020000001	Westlake	OH	44145	11/28/2011	I asked Dr if he has given up completely on Butrans or if he sees Butrans as an option for his patients. He said that he wants to use Butrans but ever since he was denied a few times, he has not wanted to write for it again. I reviewed the managed care and asked if he would give Butrans another chance, he said he would. Managed care aside, I asked where he sees a place for Butrans. He said that he wants to use it was a way to wean patients off of other opioid pills. I reviewed the initiation guide and how to properly start patients on Butrans as well as taper when they are on higher doses. He agreed to give Butrans another try. I spoke with Mo and Laura and they will keep me posted of any managed care issues.
PPLPMDL0020000001	Cleveland	OH	44102	11/28/2011	talked to Amol,Pharmacist,about Butrans and he's not seen any scripts yet.Amol said majority of patients are medicaid,we talked about PA for medicaid and Caresource patients.i showed Amol,BUP3015,discussed opioid experienced patients with Amol and he said there are a lot of patients like that here that get their short-acting opioids filled monthly but still arent controlled.i asked Amol if he would recommend Butrans to these patients by giving the patient info booklet to them and patients can speak with their HCP's about Butrans? Amol committed to doing this.we talked about OxyContin scripts,there's not been a lot of new Rx,only the same patients getting scripts monthly for OxyContin.we talked about formulary coverage for OxyContin and i recommended Senokot-S

PPLPMDL0020000001	Parma	OH	44134	11/28/2011	TRIALIST- Started to introduce Butrans efficacy clinical data for opioid-experienced patients to Dr Mandat. He stopped me & said that he just put a patient on Butrans a few minutes ago. I asked him what type of patient this was. He said it was a younger female patient who had been taking Vicodin around-the-clock for pain associated with "RSD". He added that he started her on the 5mcg dose. I told him it sounds like he did the right thing. He said he thinks she will be an ideal Butrans patient & then went into a room.
PPLPMDL0020000001	Cleveland	OH	44106	11/28/2011	talked to Jack,out-patient pharmacist,about Butrans 5 core selling messages and we discussed formulary status.Jack said pain management director isnt supportive of Butrans as he doesnt like narcotics and wont support Butrans on the VA formulary.i asked Jack if he saw a place for Butrans in the VA? Jack said yes he did initially as he thought their pharmacy could cut down on vicodin and percocet supply but the pain management director didnt support Butrans so its not being considered here. asked Jack if i could follow-up with him in December and see if there were any changes with formulary status? Jack said he doubts there will be any changes, but i can stop by and check in with him if i want.Jack said perhaps next year they will re-evaluate Butrans again for their formulary.we discussed OxyContin stocking.
PPLPMDL0020000001	Cleveland	OH	44113	11/29/2011	dr said he's still looking for the right patients to start on Butrans.i asked dr to explain to me who the appropriate patient was? dr said if patients are taking vicodin every day and its not controlling their pain and they ask him for something different,then he'll discuss Butrans with patients.dr said otherwise he's not recommending Butrans to patients that just want refills of their short-acting opioids.showed dr BUP3015,discussed 30% clinical reduction in pain,dr said 30% is clinically significant,but he's not going to change patients medication regimen unless they ask for something else.dr said he's going to cancel my 12/15/11 lunch as his staff doest need another Butrans presentation.dr said when he finds more patients to start on Butrans,he'll have me do some lunches and that'll be after the 1st of the year,2012. I told dr i was happy he found a few patients to start on Butrans and to hear that patients are doing well on Butrans. I told dr i am here as a resource if he needs anything otherwise i will just see him in the office and book lunches next year.dr said that was fine.
PPLPMDL0020000001	Cleveland	OH	44195	11/29/2011	anne,np,said dr stanton-hicks started a few patients on Butrans and they are doing well so she may be able to start some patients now on Butrans.Anne said she was waiting for dr stanton-hicks to start some patients and get his approval,so she will start considering Butrans.i showed Anne BUP3015,discussed opioid experienced patients with her and asked if she treats these types of pain conditions,inclusion criteria,anne said yes they see a lot of back pain specifically low back pain and arthritic patients.i asked anne if 30% reduction in pain was clinically significant? anne said yes any reduction in pain is good and 30% is impressive.i asked anne if its enough for her to prescribe Butrans? anne said yes it is.i asked anne if she will start 1-2 patients this week on Butrans? anne committed to do this.focused anne on BWC and commercial insurance patients.recommended Senokot-S
PPLPMDL0020000001	Westlake	OH	44145	11/29/2011	Dr complained to me that he has a patient who was taking 80mg OxyContin 4 times per day and he was trying to taper him down but the patient did not want to reduce the dose. I reviewed that OxyContin is only indicated Q12 hour and that he could write 2 80mg tablets Q12hr instead. He said that he would try to change this but also wants to start to decrease the patients dose. I reviewed that he should taper the dose of OxyContin gradually. We discussed that this patient would be on too high of an Oxycodone dose to consider Butrans. We discussed patients that may be appropriate for Butrans if they are taking low dose vicodin or percocet and meet the indication. He agreed to prescribe Butrans for these patients, but said that none of his patients want to try a patch or give up any of their pills.
PPLPMDL0020000001	Cleveland	OH	44109	11/29/2011	talked to dr about appropriate patients to start on Butrans,showed BUP3015 opioid experienced patients.dr said he's giving patient info booklets to patients and has tried to start a few patients on Butrans but Caresource wants PA for Butrans and its not always approved.dr said Caresource is very frustrating as they cant treat patients with all of the required PA's.i asked dr if he can start 1-2 patients on Butrans this week? dr committed to do this.focused dr on BWC and commercial insurance patients.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44102	11/29/2011	i talked to Nagla,PA,about patients that are wearing Butrans and how they are doing,Nagla said the couple patients dr carson and dr celeste have started on Butrans are doing well,no complaints or call backs from patients,nagla said thats a good sign.i asked if Caresource has been approving Butrans,thats majority of patients here,Nagla said some PA's are going through some arent.Nagla said Caresource wants a PA for every medication so its time consuming and frustrating for the HCP's.i asked Nagla if she will recommend Butrans to each HCP this week when she see's appropriate patients,showed BUP3015,opioid experienced patients was focus,Nagla said yes she will recommend Butrans.focused Nagla on BWC and commercial insurance patients.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44130	11/29/2011	Spoke with pharmacist John & presented patient information guides. He said he finally did see a prescription for Butrans but he did not know who prescribed it nor did he remember what patient type it was for. Discussed how patient information booklets can be used for patients who have a prescription for Butrans or for those who he identifies as potential Butrans patients. Discussed appropriate patient type, focusing on those who get refill after refill of short-acting around-the-clock opioids. He said he would do this. Discussed OxyContin savings cards as well.
PPLPMDL0020000001	Northfield	OH	44067	11/29/2011	Quick call with pharmacist (Paul?) & reviewed Butrans core messages with him. I asked if he had seen any activity lately as area physicians have indicated they are prescribing it. He said he has not seen any activity nor has he heard much about it. Discussed appropriate patient type. Also discussed savings through e-voucher for Butrans & through savings cards for OxyContin.
PPLPMDL0020000001	Euclid	OH	44117	11/29/2011	Quick call....Showed doc the butrans demo and asked him if he is still committed to giving it a fair try for appropriate patients. He said he has not given up on it yet. He said he was an hour behind. Left him a fomrulary grid reminder for oxycontin and gave a butrans initiation guide.
PPLPMDL0020000001	Cleveland	OH	44144	11/29/2011	NON-PRESCRIBER- Quick call as I caught Dr Paul at the window. Spent time with Carol discussing Butrans appropriate patient type.
PPLPMDL0020000001	Parma	OH	44134	11/29/2011	NON-PRESCRIBER- Lynda said she has not used Butrans & she really feels the pain patients up to Dr Scanlon at this point. She went on to say that she does not have a DEA number yet but has applied. Reviewed Butrans appropriate patient type & gave her an "Experience" invitation, explaining the interactive program. She said she would log on as she thinks it is important to stay current on her knowledge of medications.
PPLPMDL0020000001	Cleveland	OH	44130	11/29/2011	TRIALIST- Dr Fedorko said he does not think he has any patients for Butrans right now. I reminded him of previous conversations when he told me that he prescribes tramadol or Ryzoft for patients but with Ryzoft, he gets managed care pushback. I asked him if he would consider a Butrans patient the same patient type as a Ryzoft patient. He said the only reason he really writes Ryzoft is to make (the drug rep) happy. I told him if he has appropriate patients for Ryzoft or tramadol, he may have candidates for Butrans as well. He said he has one happy patient on Butrans who has spinal stenosis. I told him this sounds like an ideal patient. He said he has another who may be having surgery soon for his spinal condition & he may consider that patient as a Butrans patient. I let him know I would be following up with him.
PPLPMDL0020000001	Parma	OH	44134	11/29/2011	TRIALIST- Dr Scanlon said he has been using Butrans. I asked him to tell me about the patients & how they are doing. He said they are doing well & are happy with the results they are getting. I asked what types of patients he has been trying it on & if he has used it on any opioid-naive patients. He said they have all been on something short-acting & he uses it in place of those. I told him it sounds like he is finding appropriate patients. I let him know that Butrans can be used for patients who have not been on opioids before & that they can be started on the lowest starting dose, 5mcg. He said that was good to know. Also discussed OxyContin q12h as an option for patients beyond Butrans. Discussed savings cards for both products. Dr Scanlon said he has been giving out the Butrans savings cards. He left the room to go see a patient, then came back in & said he was going to give this patient Butrans & asked for a savings card to give to them.
PPLPMDL0020000001	Cleveland	OH	44124	11/29/2011	Quick call....asked doc if he has patients that may be taking vicodin several times/day pain. He said he prefers something longer acting but he probably does. I asked him to consider Butrans for those types of patients - Butrans is a CII like vicodin and can be called in or refilled. Plus Butrans is just a once weekly dose. Gave him a formulary grid and a butrans portal invite. I asked him to review it.
PPLPMDL0020000001	Cleveland	OH	44106	11/29/2011	i talked to Steve,Pharmacy Mgr,confirmed Butrans stocking but Steve said he's still not seen any Butrans scripts.i asked Steve how often does he provide patient counseling for patients taking opioids daily for their chronic pain? Steve said they provide a lot of patient counseling but the days vary as to how many patients are seen. i asked Steve if he would give the patient info booklets to patients he feels are appropriate for Butrans,so they can talk to their HCP's? Steve said yes he will do that and has given a few booklets out.focused steve on BWC and commercial plan patients to start on Butrans.confirmed OxyContin stocking and steve asked about coverage so i showed and left OxyContin formulary grids.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44195	11/29/2011	worked crile bldg pharmacy, pain managment dept-left BUP3015,fpj,patient savings card flashcard,formulary grid, web conferences for 11/29 and 11/30 for all HCP's in pain management with my business card as i couldnt see any doctors.
PPLPMDL0020000001	Cleveland	OH	44130	11/29/2011	TRIALIST- Reinforced Butrans formulary message & commercial insurance coverage at tier 3, showing formulary grid for support. Also showed him Butrans savings cards, explaining how those commercial insurance patients can save up to \$40 off that tier 3 co-pay. He said "OK, savings. Thank you," & walked into a room.
PPLPMDL0020000001	Cleveland	OH	44195	11/29/2011	kathy,PA,said some HCP's in dept are writing Butrans but she works with dr mekhill and dr mintzer and neither one of them has started anyone on Butrans.i asked why is that? kathy said dr mekhill likes the "tried and true" medications like tramadol and vicodin and until Butrans has been on the market for a long time,she doest see him starting anyone on Butrans.kathy said dr mintzer is open to newer medications but doest really like opioids and is trying to get her patients off narcotics.i showed Kathy BUP3015,opioid experienced patients,clinical trial and asked if they see patients like this in their practice? Kathy said yes they have a lot of patients taking short-acting opioids.kathy said she thinks Butrans is a great option for some patients that would be willing to wear a patch and she will do her best to recommend Butrans to the doctors but she cant promise anything.showed formulary grid and focused Kathy on BWC and commercial insurance plans. recommended Senokot-S
PPLPMDL0020000001	Parma	OH	44129	11/29/2011	REPEAT CUSTOMER- Dr Ortega said he did not have time for a discussion today. He said he will try to find some Butrans patients before my next visit so he has more feedback to give me. Reminded him of savings cards for Butrans & OxyContin & asked him to give them out with prescriptions when appropriate. He agreed.
PPLPMDL0020000001	Highland Heights	OH	44143	11/29/2011	Window call....i reviewed the positioning of butrans (before going to hydrocodone ATC) and oxycontin (for more severe pain and after 20mcg of butrans). Provided formulary grids for both and offered savings cards. None needed. nothing learned.
PPLPMDL0020000001	Westlake	OH	44145	11/29/2011	Went to Marlene's office to set up in service, she was in a meeting. Spoke with Will on 3rd Fl N/S. He helped me to leave a voicemail for Marlene and said to try to catch her in her office by phone between 8-9am. I reviewed Purdue's products and that I am working with her to schedule an in service.
PPLPMDL0020000001	Cleveland	OH	44114	11/29/2011	dr said he's starting more patients on Butrans every week.dr said he's starting patients with john stare's,PA here with dr, recommendation.dr said majority of patients are percocet patients but he's now considering some vicodin patients that arent controlled,to start on Butrans.i asked dr how patients were doing and how were discussions in the follow-up appointments? dr said patients are doing well on Butrans,no call-backs from patients,dr said follow-up appointments are where they discuss side effects and titration of Butrans and so far so good.i asked if dr he'll see more patients this week,that he can start on Butrans? dr committed to starting more patients on Butrans.dr said caresource is biggest challenge as they wont cover Butrans,focused dr on BWC and commercial insurance plans.
PPLPMDL0020000001	Cleveland	OH	44103	11/29/2011	talked to dr about patients she's started on Butrans,dr said majority of patients were taking percocet for their chronic pain and not controlled asking her for more pills,so she talked to them about Butrans and patients were willing to try Butrans.dr said she still gives some short-acting opioids for breakthrough pain but overall patients are doing great on Butrans.dr said only challenge now is getting Caresource to approve Butrans.dr said she's willing to do PA's for caresource patients so thats not the problem,its getting Caresource to just approve Butrans for her patients.i told dr i appreciated her patience with doing these PA's for caresource patients and asked that she continue starting more patients on Butrans,dr committed to do this. we talked about OxyContin being an option for patients.dr said she continues to start patients on OxyContin and gets approval for medicaid and medicare patients so no issues there.showed formulary grid for OxyContin and asked dr to continue choosing OxyContin for those patients she feels are appropriate.dr said she will do that.recommended Senokot-S
PPLPMDL0020000001	Parma	OH	44134	11/29/2011	LOYALIST- i showed Dr Hernandez the BUP3015 study results & reminded him of our previous conversation when we discussed trying Butrans on some opioid-experienced patients such as those on Vicodin a few times per day chronically. He said he remembers this. I asked what his thoughts were on the study data. He said it was interesting. He then said he just had a patient today who had been on Opana 20mg twice a day. The patient had the remainder of her Opana prescription stolen from her, went through withdrawal, then decided she did not want to go back on Opana after she came out of withdrawal. The patient was in pain but not "excruciating" pain per Dr Hernandez. He said he chose this as a potential Butrans patient & that he prescribed the 20mcg dose for her. He said he knows 20mcg is not a typical starting dose & that the Butrans might not work. Discussed OxyContin as a possible option for patients beyond Butrans. He said he would let me know how this new patient does on Butrans.

	Mayfield Heights	OH	44124	11/29/2011	Spoke to Warren about the movement of butrans. He said he really has not been seeing much lately and when he does see a script it has come from the hillcrest pain mgmt. I explained to him the allowable use of supplemental analgesics in case he gets an alert. He said he would just override such an alert. He said that the oxycontin volume has been steady still and some patients use that savings cards. Only a couple of patients may have a higher co pay of about \$100. I told him I would provide savings cards the next time I was in.<font color=blue><b>CHUDAKOB's query on 12/08/2011</b></font>Just curious as to why you did not provide them on this call? How many scripts could he have used them on between now and the next time you are in? Seel with a sense of urgency!<font color=green><b>SIMERTOC's response on 12/13/2011</b></font>Didn't have them in my bag at the time. He never said that copays were too high for patients to pay.<font color=blue><b>CHUDAKOB added notes on 12/15/2011</b></font>Preparation!
PPLPMDL0020000001	Cleveland	OH	44114	11/29/2011	dr said she started a few patients on Butrans after I saw her last week.I told dr that was great and asked why she chose Butrans for these patients.dr said these patients were taking vicodin,not controlled and asking her for more pills so she explained that Butrans was a once weekly dosing option in a patch that they would rotate once a week,dr asked the patients if they would be interested in trying this option,all of the patients said they would be willing to try Butrans but asked if they could still have their vicodin for breakthrough pain? dr told them yes they could start on Butrans and still have some vicodin for breakthrough.dr said it was easy to explain to patients and they got Butrans at the pharmacies,no problems.I asked dr if she has more patients like this coming into the office this week? dr said probably so.I asked dr if she will start these patients on Butrans? dr committed and I focused dr on BWC and commercial insurance patients.recommended Senokot-5
PPLPMDL0020000001	Mayfield Heights	OH	44124	11/29/2011	Doc said he wrote a couple of scripts of butrans since I was last there. I asked him about the patients and their previous therapy. He said one patient was previously on precocet. He did not remember the strength of butrans he wrote. I showed him the conversion guide and explained the appropriate starting dose. He also said that one patient was medicare and one was regular insurance. I explained that medicare patients may not be good candidates as butrans is not covered on medicare. I reviewed the commercial coverage and reminded him to give a savings card. I asked him to continue to prescribe for patients who fail on tramadol or who can not tolerate hydrocodone like he said he would. He said he will write more now that he has gotten his feet wet. I reminded him that oxycontin is another option for patients that have more severe pain and provides more flexible dosing options.<font color=blue><b>CHUDAKOB's query on 12/08/2011</b></font>Do we have a conversion guide for Butrans?<font color=green><b>SIMERTOC's response on 12/13/2011</b></font>Initiation guide<font color=blue><b>CHUDAKOB added notes on 12/15/2011</b></font>Thanks! Please be reread your notes before submitting them.
PPLPMDL0020000001	South Euclid	OH	44121	11/29/2011	Spoke to Tricia about the stocking of butrans. She confirmed that they have it stocked but she personally had not filled any scripts. I told her where we are asking docs to use butrans(after tramadol failures) but also let her know that supplemental analgesics can be used concurrently and referred to the Appropriate FPI section. Let her know about the savings card program and the availability online if customers come without the card.
PPLPMDL0020000001	Westlake	OH	44145	11/29/2011	Dr said that he just started a new patient on Butrans yesterday. She was a patient who has difficulty swallowing pills. He has not heard back from her yet. I reviewed that Butrans reached steady state in 3 days.
PPLPMDL0020000001	Cleveland	OH	44103	11/29/2011	I talked to Tim,Pharmacist,about Butrans stocking,Tim said they have 1 carton Butrans 5mgc in stock but no scripts.Tim said I need to speak with Joe,Owner Sheliga Drug,but he's on vacation this week.Tim said to call Joe and set-up appointment because they dont stock any CII narcotics and he's surprised Butrans was in stock since they haven't had CII narcotics in stock in the past. I asked Tim what features of Butrans stood out to him,showed visual aid? Tim said transdermal delivery and 1 application every 7 days.Tim said there are probably some patients who would be willing to wear a patch and like this type of delivery but he's not seen any scripts for Butrans yet.Tim asked about medicaid coverage so we discussed PA for medicaid and caresource patients.focused Tim on BWC and commercial insurance patients and I asked tim if he would be willing to give patient info booklets to patients that are taking immediate release opioids but not controlled and patients can discuss Butrans with their HCP's? Tim said I have to get approval from Joe,Owner,to do this.
PPLPMDL0020000001	Cleveland	OH	44114	11/29/2011	talked to John,PA,about the patients he's starting on Butrans and John said majority are perccot patients but they are looking at vicodin patients who arent controlled,to start them on Butrans too,John said biggest challenge is caresource,John said 1 PA for a Caresource patient was approved,due to the patient meeting the PA requirement of trying 2 long-acting opioids first before getting Butrans approved. John said for other Caresource patients,only taking short-acting opioids,they haven't been able to get Caresource's approval for Butrans with failure of 2 short-acting opioids.I asked John if he'll continue starting patients on Butrans but focus on BWC and commercial insurance patients? John said he will do that.recommended Senokot-5
PPLPMDL0020000001	Mayfield Village	OH	44143	11/29/2011	HCP said they have written Butrans a couple of times but it isnt being covered. I asked about the coverage of the patients tried. She said they have a lot of medicare and they dont tend to look at the insurance while she is in with them. I asked her to consider the patient's age. If they are less than 60-65 years of age they are more likely to have the proper commercial coverage. She said she tried a patient that was previously on perccot, the patient was able to get it initially and it worked well but cold not afford thhe refills so he was switched back to perccot. She said she would keep trying but narcotics are reserved as a last resort in the practice and those patients are usually medicare. Told her that I understand and keep butrans in mind for the younger patient. (Dr. Mandel was on vacation this week)
PPLPMDL0020000001	Beachwood	OH	44122	11/30/2011	TRIALIST- Showed Dr Yokiel BUP3015 efficacy results, explaining the study. Pointed out that nearly half the patients on Butrans 20mcg reported at least a 30% reduction in pain. I asked if that was in line with what results he would expect. He said he generally talks about a 50% reduction being the ultimate goal & added that he thinks 30% is still "pretty good". He asked me how to taper patients on, for example 6 5mg Percocet per day. Showed initiation guide & discussed tapering to no more than 15mg oxycodone before starting Butrans. I asked if he thought that was reasonable. He said yes for most patients. He said he would start by trying patients on 3-4 Percocet per day on Butrans & if he gets good results, he will continue. He said he had been somewhat concerned about tapering patients or causing them to go into withdrawal with Butrans. I asked if this conversation cleared things up for him & he said yes. He said again he would prescribe. Discussed OxyContin q12h as an option for appropriate patients beyond Butrans 20mcg.
PPLPMDL0020000001	Rocky River	OH	44116	11/30/2011	I reviewed the medication guide for Butrans and that it take 3 days to reach steady state. I discussed that Butrans can be used with supplemental analgesia and she said she did not know this. I asked about the movement of Butrans and she has not seen many scripts. I asked if she would let patients know about Butrans as an option and she agreed to it if she consults with them. Reminder that OxyContin is another long acting option.
PPLPMDL0020000001	Maple Heights	OH	44137	11/30/2011	NON-PRESCRIBER- Dr Gene said he is "almost" to the point of prescribing Butrans. I asked him to clarify. He said he feels that he knows about it well enough. I asked him what he thinks is holding him back from prescribing then. He said it is just a matter of seeing the right patient. Reviewed the appropriate patient type, focusing on patients who are not well-controlled on either NSAID's/COX-2's, Vicodin, or tramadol a few times per day. He said he actually does have patients who fall into that. I told him those are his potential Butrans candidates. He said he recently went to a convention where Purdue was there & he discussed Butrans with some of the reps. He said he knows that patients can take supplemental analgesia with Butrans. I told him this is correct. Also discussed OxyContin as an option for appropriate patients. I asked him where he thinks OxyContin should be used. He said in patients who are terminally ill or by pain management specialists. He said he does think it is a good, effective drug, but only in the hands of the appropriate patient. I agreed that it should only be used on appropriate patients & that caution should be exercised in prescribing it, just as it should be with all opioids.
PPLPMDL0020000001	Rocky River	OH	44116	11/30/2011	Spoke with Leigh Ann, I reviewed the Butrans medication guide and asked if she would ever let appropriate patients know about Butrans as an option. She said probably not, but only if they asked her. I asked her to take the time to reviewed the medication guide with patients and she agreed.
PPLPMDL0020000001	Cleveland	OH	44109	11/30/2011	showed dr BUP3015,we discussed opioid experienced patients,dr said he hasnt started anyone on Butrans,dr said he doesnt write a lot of narcotics.showed dr BUP3015,30% clinical reduction page and asked if this was clinically significant? dr said yes any reduction in pain was good for patients.I asked if this was significant enough for him to prescribe Butrans? dr said if he has appropriate patients and their insurance covers Butrans,he'll consider it.dr asked about medicaid coverage for Butrans,we discussed PA for caresource and medicaid patients.I asked dr if he has 1-2 patients,commercial insurance,that he can start on Butrans this week? dr said he'll see who comes in this week and will consider Butrans if patients are appropriate.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44109	11/30/2011	dr said he's not started anyone on Butrans but has given some patient info booklets for patients to read and he's following up with them in a couple weeks.dr said these patients were taking perccot,not controlled and asking for more pills so he wanted to see if they would be interested in starting Butrans.I asked dr how patients responded? dr said all of the patients wanted to read more info on Butrans and asked if they could still take their perccot for breakthrough pain? dr told patients they could have both.I asked dr if he has a couple patients coming in this week that he can start on Butrans? dr said he probably will and if insurance covers Butrans he'll start patients.dr asked about medicaid coverage,we discussed PA for caresource and medicaid.told dr he still has option of OxyContin for appropriate patients,showed flashcard.dr said he doesnt really have many patients on OxyContin but will keep it in mind,showed formulary grid and discussed insurance coverage for OxyContin.recommended Senokot-5
PPLPMDL0020000001	Garfield Heights	OH	44125	11/30/2011	Spoke with Heather, pharmacist. She said they have not seen any activity for Butrans there. Showed patient information booklet. She said she has some. I let her know they can be given to customers even if that person does not have a prescription for Butrans. Discussed appropriate patient type & focused on patients who get chronic around-the-clock opioids, especially those who are not well-controlled on their current medication or if she thinks they could benefit from a transdermal system dosed once weekly. She said she would do this. Also discussed OxyContin savings cards & gave her a package of them per her request.
PPLPMDL0020000001	Cleveland Hts	OH	44118	11/30/2011	I asked doc if that cleveland clinic employee patient was ever able to get his butrans script filled. He said he was not sure and had his staff call to find out. The patient did not pick it up as it was \$50+. I told doc that cleveland clinic employees are encouraged to have their scripts filled at a cleveland clinic pharmacy at a more affordable copay. Doc said he also had one incident where butrans was on back order at a CVS pharmacy. He should me the back order. The cleveland clinic was coming in to pick up a script for Lortab. Reminded doc that butrans can be called in. He said he will try to remember. Informed him of the caresource coverage after tramadol failures. Also reminded him of the preferred coverage with oxycontin for appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44109	11/30/2011	dr said he started 1 patient on Butrans,I asked dr why he chose Butrans? dr said this patient was taking perccot,2 pills a day,and that wasnt controlling the pain and patient wanted more pills.dr told patient he wasnt giving more pills but was going to start patient on Butrans and gave patient info booklet for patient to read about Butrans.dr said it was easy to explain to this patient and patient got Butrans from pharmacy easily.I asked dr if he had more patients like this that are taking perccot every day but not controlled,dr said he has a lot of patients like this but medicaid is biggest challenge here.dr asked about coverage for Butrans? showed formulary grid,focused dr on commercial insurance plans and we talked about PA for caresource and medicaid patients.I asked dr if he could find 1 patient this week to start on Butrans,focusing on commercial insurance? dr said he'll see who comes in and will keep Butrans in mind.we talked about OxyContin formulary coverage,dr said he doesnt have problems with OxyContin coverage.showed appropriate patients flashcard and asked dr if he'll continue starting patients on OxyContin? dr committed to do this.recommended Senokot-5
PPLPMDL0020000001	Bedford	OH	44146	11/30/2011	TRIALIST- Dr Moufawad said he is sorry but he has not "had a chance" to prescribe Butrans. I asked if he means he hasn't had any appropriate patients for it. He said that he has really been getting rid of a lot of patients from his practice. He added that he has some patients who, when they find out he will not prescribe any medication at the first visit, do not want to come there, or has patients who may be on 3 Percocet per day & if he mentions a switch to Butrans the patients do not want to change from their Percocet, so he discharges them. He said those are the really the two types he has been seeing lately. He added that he knows who the appropriate patient type is & that he will prescribe "soon". Discussed OxyContin 7 tablet strengths.
PPLPMDL0020000001	Cleveland	OH	44109	11/30/2011	dr said she appreciated info on Butrans,took initiation guide but said she only has 1 or 2 patients on opioids.I asked dr if patients ever say their short-acting opioids arent controlling their pain? dr said occasionally but she doesnt have many patients taking opioids,told dr she has Butrans as an option if she feels patients are appropriate,dr said ok and took patient info booklet.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44109	11/30/2011	I talked to dr about how she manages chronic pain conditions.pg.11 visual aid,now? dr said usually non-narcotic and when patients need opioids she'll consult with pain management and pm&r first.I asked dr if she will see a couple patients this week,like the opioid experienced patients in BUP3015? dr said probably so.I asked dr if she'll start 1-2 patients on Butrans? dr said if insurance covers it,she'll start them on Butrans.dr asked about medicaid coverage? discussed PA for medicaid and caresource patients,being a frustration. I reviewed the PA information regarding Caresource and Medicaid. I asked Dr to focus on those BWC and commercial insurance patients and he agreed that he will. I spoke with Angela and she said that the PA are a pain but they do them and she does know that a Butrans one recently when through approved for 3 months.
PPLPMDL0020000001	Westlake	OH	44145	11/30/2011	I reviewed Drs last conversation with Amy regarding managing care with a frustration. I reviewed the PA information regarding Caresource and Medicaid. I asked Dr to focus on those BWC and commercial insurance patients and he agreed that he will. I spoke with Angela and she said that the PA are a pain but they do them and she does know that a Butrans one recently when through approved for 3 months.
PPLPMDL0020000001	Cleveland	OH	44104	11/30/2011	dr said she's been giving patient info booklets out to patients for their education on Butrans but hasnt started anyone.dr said most of her patients are controlled on short-acting opioids and if they arent she'll usually send them to pain management.I asked dr if she had a few patients that are taking tramadol every day for their chronic pain condition yet at some point ask her for more pills? dr said yes that does happen.I told dr that's where Butrans could be an option,showed BUP3015,30% clinical reduction in pain,dr said that was Impressive data and she'd keep it in mind.I asked dr it was significant enough for her to prescribe Butrans? dr said yes it was.I asked dr if she could start 1 patient this week on Butrans? dr said if patients are asking for something else besides pills and their insurance covers Butrans,she'll start them. focused dr on commercial insurance

	Cleveland	OH	44104	11/30/2011	dr said the 1 patient she has on Butrans is doing great and she's very happy so far with Butrans.i told dr that was great she started 1 patient and the patients doing well on Butrans,i asked dr if she had more patients like this 1 that she could start on Butrans? dr said majority of her patients just want their pills and aren't willing to wear a patch.dr said she's been telling patients about Butrans but they aren't interested. we talked about patients starting on Butrans but still having some immediate release opioid for breakthrough pain,showed fpi,2.4 maintenance of therapy,dr said ok she will start mentioning that to patients and see if that makes a difference.i asked dr to start 1 patient this week that is appropriate for Butrans,showed visual aid focused on opioid experienced patients.dr said she will do her best.focused dr on commercial insurance patients and discussed PA for caresource and medicaid patients.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	11/30/2011	dr said he's not started anyone on Butrans and doesn't have a lot of patients taking narcotics.dr asked about opioid experienced patients and who is appropriate for Butrans? showed visual aid,discussed these patients with dr and asked dr if he treats these patients? dr said yes but he rarely starts patients on narcotics,dr said if pain management or pm&r has patients on narcotics,then he'll continue patients on narcotics.i asked dr if he could think of 1 patient this week that's appropriate,to start on Butrans? dr said he will think about it and if someone is appropriate,he'll consider Butrans.focused dr on commercial insurance plans.recommended Senokot-S
PPLPMDL0020000001	University Hts Cleveland	OH OH	44118 44109	11/30/2011 11/30/2011	Window call...Reminded doc of the butrans patient type, once weekly dosing, and CII status which means it can be called in and refilled. Provided Butrans portal invite and formulary grid. Nothing learned. dr said he rarely writes narcotics and appreciated the Butrans info but he doesn't see himself prescribing Butrans anytime soon.i showed dr BUP3015,discussed opioid experienced patients with dr and asked if he treats these types of pain conditions,inclusion criteria? dr said yes he does and its with non-narcotic treatments.i asked dr what he does when non-narcotic treatments don't work? dr said he will refer to pain management or pm&r and work with the specialists.i asked dr if he felt a 30% reduction in pain was clinically significant? dr said yes it was.i told dr that's what he can expect from Butrans.dr said ok and took the study saying he'll think it over.
PPLPMDL0020000001	Northfield Maple Heights	OH OH	44067 44137	11/30/2011 11/30/2011	Quick call- Spoke with Sun Li (pharmacist). She said they are stocking Butrans. Discussed savings for CVS customers through e-voucher & also reviewed OxyContin savings cards. She said they still have cards from a previous Spoke with Jim, pharmacist. i asked about this location's stocking of Butrans. He said he might have gotten an auto-shipment, but he sent it back because they had not seen any prescriptions for it, as that is their policy. I presented patient information booklets & showed him how they can be used for patients who have a prescription or for patients who he thinks, based on discussions and/or prescription history, that they might be a good candidate for Butrans. He said he would keep one on hand for this purpose & would give it out if he sees anyone who he thinks would be a good candidate. Also discussed OxyContin savings cards. He said he has plenty of cards as he only has 2-3 people on it regularly.
PPLPMDL0020000001	Cleveland	OH	44106	11/30/2011	asked dr how he's explaining Butrans to patients? dr said he tells them Butrans is easy,with 1 patch and they just have to rotate patch once a week.dr said unless patients ask for something different,he's not really talking to them about Butrans.i asked dr if patients are taking 200mg tramadol daily for 1 of the chronic pain conditions shown on pg.11 visual aid,and not controlled,would he consider Butrans for them? dr said if patients want a refill of tramadol or more pills,he may just give them more,300mg is max he would give,but if patients asked for something different,then he would talk about Butrans.i asked dr if he's seeing clinical reductions in patients pain levels when he refills tramadol every month? dr said usually not,its just maintenance therapy,showed dr BUP3015,30% clinical reductions in pain page,asked dr if this was clinically significant? dr said yes it is.i asked if this reduction was clinically significant enough for dr to prescribe Butrans? dr said he will consider it and thinks Butrans is a good drug. focused dr on commercial insurance patients. recommended Senokot-S
PPLPMDL0020000001	Westlake	OH	44145	11/30/2011	Quick call at window, i asked if he was still getting success stories with his Butrans patients and he said he is. He said most patients are doing well. I asked if there were any updates to getting Butrans on formulary and he said the he's still working on it. I let him know that I would be doing some educating with the nurses on the floors of the hospital.
PPLPMDL0020000001	Cleveland	OH	44130	11/30/2011	TRIALIST- Quick window call with Dr Kansal. I handed back the "Experience" invitation & described the interactive programs. I asked him to log on to participate & let him know it may help him identify potential Butrans candidates. He thanked me & walked away. Discussed savings cards for Butrans & OxyContin with Dorothy.
PPLPMDL0020000001	Cleveland	OH	44109	11/30/2011	dr said she started 1 patient on Butrans and patient is doing well.i asked dr why she chose Butrans? dr said patient was taking percocet every day and not controlled and was asking for something else besides percocet for pain,dr talked to patient about Butrans and showed patient info booklet and patient was willing to try Butrans.dr said not all patients are willing to wear a patch as they want their pills.i showed dr fpi,2.4 maintenance of therapy section,discussed immediate release opioid or non-opioid therapies with Butrans,dr said ok she'll consider that next time.i asked dr if she'll start a few patients this week on Butrans,focusing on commercial insurance patients,dr said he will talk to patients and if they are willing to wear Butrans and rotate once a week,he'll start them.focused dr on commercial insurance patients.recommended Senokot-S
PPLPMDL0020000001	Mayfield Heights	OH	44124	11/30/2011	Spoke to Marsha about the stocking of Butrans. She said she may have filled it once and they did get it in. I explained the savings card to reduce customer cost. I referred to the section on supplemental use on short acting opioids and non opioids while on butrans therapy, in case she gets a prescription and gets an alert suggesting that combo therapy is not allowed. She said when that happens it is usually because of insurance restrictions.
PPLPMDL0020000001	Cleveland	OH	44104	11/30/2011	dr said he has a couple patients on Butrans and they are doing well,dr said no call backs so that's a good sign.i asked dr why he chose Butrans for these patients? dr said patients were taking vicodin and 1 patient was taking percocet daily but not controlled so he thought Butrans could be a different option.i asked dr if it was his decision or patients asking for something else? dr said both patients wanted more pills and he wasn't comfortable with giving more pills so he started them on Butrans and gave less immediate release opioid for breakthrough pain. asked dr if he has more patients like this,that he can start on Butrans this week? dr said he has a lot of patients taking vicodin and percocet that he just refills every month and its maintenance therapy so he thinks Butrans would be a great option but the challenge is these are his medicaid patients.dr asked about medicaid coverage? we discussed PA for caresource and medicaid patients and i focused dr on commercial insurance patients. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44104	11/30/2011	dr said he's given Butrans patient info booklets to patients,for them to read about Butrans and follow-up with him in 2 weeks.dr said he doesn't have a lot of commercial insurance patients but the one's he does have,he's given booklets. dr said majority of his patients are medicare so he's hoping they will cover Butrans next year.i told dr i don't have any info on that right now but will keep him updated.i asked dr to start 1 commercial insurance patient on Butrans this week if he feels this is an appropriate option, dr committed to do this,we talked about OxyContin formulary coverage and dr said he easily starts patients on OxyContin no issues with insurance.i asked dr to continue starting patients on OxyContin,dr said he will do that.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	11/30/2011	talked to dr quickly about the %of adults in his practice.dr said he treats 10-20% adults,majority are children.i asked dr if he had 1-2 adult patients that were appropriate for Butrans? dr said he might.showed BUP3015,discussed 30% clinical reduction in pain levels and asked dr if this was clinically significant? dr said yes it is. asked if it was enough for dr to prescribe Butrans for those 1-2 patients? dr said he will start some patients as long as insurance covers Butrans.dr asked about medicaid coverage,we talked about PA for medicaid,focused dr on commercial insurance patients.recommended Senokot-S
PPLPMDL0020000001	Cleveland Mayfield Heights	OH OH	44106 44124	11/30/2011 11/30/2011	worked apm dept Spoke to Albina about the positioning of butrans and the indication. She said she has not seen any scripts. I referred to the FPI and discussed the section on supplemental analgesia. I explained that supplemental analgesia can be used while on butrans therapy in the event she gets some alert indicating the contrary. Provided FPI and patient info guides.
PPLPMDL0020000001	Cleveland	OH	44120	11/30/2011	i talked to Darryl, floater pharmacist, as Mark, pharmacist/narcotics buyer is off today,i showed darryl fpi,2.4 maintenance of therapy,darryl said that was helpful as he's seen Butrans scripts filled here and some pharmacists are confused on the use of immediate release opioids with Butrans.i asked darryl if he's seeing titration of Butrans? darryl said he's only here occasionally so he doesn't know.i asked if darryl could hand out patient info booklets today,if any patients are taking short-acting opioids and not controlled and then patients can talk to their HCP's about Butrans? darryl said he would do that and asked that i follow-up next week with mark to show him the Butrans fpi too.i told him i would do that.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	11/30/2011	showed dr BUP3015,we discussed opioid experienced patients,dr said she's not started anyone on Butrans.showed 30% clinical reduction page,asked dr if that was clinically significant? dr said yes.i asked dr if it was significant enough for dr to prescribe Butrans? dr said yes it was.i asked dr if she can start 1 patient on Butrans this week? dr committed to do this,we discussed initiation and titration of Butrans and i asked dr to give patient info booklet to patients showing application/rotation section,dr agreed to do this. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	11/30/2011	showed dr BUP3015,we discussed opioid experienced patients,dr said she's not started anyone yet as she doesn't have many patients on opioids but will keep Butrans in mind,we discussed initiation and titration of Butrans and i asked dr to find 1-2 patients this week,focusing on commercial insurance patients,dr committed,recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44106	11/30/2011	talked to dr about BUP3015,opioid experienced patients and asked dr if he has any patients like this in his practice,looking at inclusion criteria? dr said yes they see a lot of these conditions,we talked about 30% clinical reduction in pain and asked dr if this was clinically significant? dr said yes it is. asked dr if its enough for him to prescribe Butrans? dr said yes and he is starting patients on Butrans. showed initiation and titration info in visual aid and asked dr to start 1-2 patients this week on Butrans.dr committed,focused dr on commercial insurance plans and discussed PA for caresource and medicaid patients. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	11/30/2011	i asked Dale,PA,how he's explaining Butrans to patients and how are patients receiving that info? dale said when patients ask for more pills and he's not going to give them more he tells patients there's a different option for them called Butrans,dale said he gives patients the patient info booklet to read about Butrans,gives the script and tells them he'll follow-up in 4 weeks to assess the pain levels,side effects,discuss titration,etc.i told dale that was great he has a comfort level explaining Butrans to patients and a thorough plan in the follow-up appointment.i asked dale if he could find more patients this week to start on Butrans? dale said yes he will continue starting patients on Butrans.focused dale on commercial insurance patients.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44106	11/30/2011	talked to dr about what triggers him to start patients on Butrans,dr said when patients tell him their short-acting opioids aren't lasting long enough, ask for more pills or ask him for something else he will talk to them about Butrans.i showed dr visual aid,focused on initiation and titration of Butrans,dr said he does titrate patients dose in follow-up appointments or if patients call into office Lisa,MA,will call the Butrans script into pharmacies. i asked dr if he had more patients to start on Butrans today? dr said he may have a couple and will start them if its appropriate.focused dr on commercial insurance patients,we discussed OxyContin being an option for patients,talked about 7 tablet strengths available and formulary coverage.dr said he has some patients on OxyContin and knows its available. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	11/30/2011	asked dr what her expectations were with short-acting opioids,when treating chronic pain conditions,showed pg.11 visual aid? dr said if patients get pain relief from short-acting opioids that's the goal. asked dr what clinical reduction she sees from short-acting opioids? dr said some patients get a 30% reduction others don't and they are just maintaining by taking pills every day for their pain.i asked dr if 30% clinical reduction in pain was significant? dr said yes it was.i asked if it was enough for dr to start 1-2 patients on Butrans? dr said yes and she will start some patients on Butrans,depends on insurance coverage.dr said majority here are medicaid or cash paying,we talked about medicaid and caresource PA's,dr said she'll keep Butrans in mind.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44106	11/30/2011	i talked to Margie,Pharmacy supervisor,about Butrans stocking and scripts.Margie said no Butrans scripts have come here yet but she still has Butrans in stock.i asked Margie who are the biggest tramadol,vicodin and percocet writers besides pain management and oncology? margie said those 2 departments write the most vicodin and percocet but internal medicine and family medicine prescribe a lot of tramadol.i asked Margie if she could give Butrans booklets to patients that are taking these short-acting opioids and not controlled,so that patients can talk to their HCP's about Butrans? margie said yes she will do that and has been giving the booklets out to patients and telling them to speak with their doctors about Butrans.told Margie i appreciated her doing this and if she speaks with any HCP's in family medicine that i can't see she can give them a Butrans FPI and BUP3015,margie said she would do that and took a couple of each. we discussed OxyContin stocking and formulary coverage.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	11/30/2011	dr said she started 1 patient on Butrans,after my last lunch with her,dr said patient is doing great on Butrans so she's happy.i asked dr if she'll start more patients like this one? dr said yes she will.dr asked about medicaid coverage? we talked about PA for caresource and medicaid and i focused dr on commercial insurance patients to start on Butrans,dr said ok,dr said she has everything she needs and will call me if she has any problems or questions.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	11/30/2011	talked to dr about how he treats his chronic pain patients,dr said he will always start with NSAID's,exercise,physical therapy and non-narcotic drugs like Cymbalta,Lyrica,Savella,etc. dr said when all of that fails,he'll consult with pain management to discuss opioids,dr said if opioids are chosen,he would start patients on low dose tramadol and see if patients pain can be controlled with that regimen.showed dr BUP3015,discussed opioid experienced patients with dr and asked if a 30% clinical reduction in pain was significant? dr said yes,any reduction in pain was a step in the right direction.told dr that's what he can expect to see with Butrans.i asked dr if he can think of 1 patient that has commercial insurance,to start on Butrans? dr said he will keep Butrans in mind in case he sees anyone that's appropriate.focused dr on commercial insurance patients and discussed patient savings card program with him.recommended Senokot-S



PPLPMDL0020000001	Beachwood	OH	44122	11/30/2011	NON-PRESCRIBER- Reviewed Butrans with Jennifer & showed her demo patch. She asked how often patients have a problem with the patch staying on for a full week. I told her Butrans is designed to stay on for a full 7 days & if patients do have a problem with adhesion, they could cover it with Bioclusive or Tegaderm type coverings. Also discussed heat warning & adverse events. Jennifer informed me that she would be keeping Butrans in mind, however, today is her last day in practice before moving to China.
PPLPMDL0020000001	Cleveland	OH	44109	11/30/2011	i asked dr how she's treating these types of pain conditions.pg.11 visual aid? dr said she starts with NSAID's,physical therapy,exercise,SSRI's/SSNRI's and when all else fails she'll consult with pain management and pm&r on patients taking any narcotics.dr said she's not comfortable prescribing narcotics at this point.dr said she likes that Butrans is a patch and dosed once week as some patients may like this option.I asked dr if she could think of 1 patient this week,like the opioid experienced patients in BUP3015,opioid experienced clinical trial,to start on Butrans? dr said she will keep Butrans in mind.recommended Senokot-5
PPLPMDL0020000001	Rocky River	OH	44116	11/30/2011	Spoke with Elani, She said they have a few patients on Butrans and she has not heard any feedback from them. I reviewed the medication guide and she agreed to hand it out with Butrans scripts. We reviewed that Butrans reaches steady state in 3 days and that Butrans can be prescribed along with supplemental analgesia. We discussed OxyContin as an option when Butrans may not provide adequate analgesia.
PPLPMDL0020000001	Bedford	OH	44146	11/30/2011	TRIALIST- Spoke with MA Roberta who said Dr Haddad is out all week for family business. Discussed & handed back "Experience" invite & asked her to make sure Dr Haddad sees it & encourage him to log on. She agreed. Also discussed savings cards for both Butrans & OxyContin.<font color=blue><b>CHUDAKOB's query on 12/08/2011</b></font>While I know that Roberta is an MA, what does she do in this practice. You spoke to her, but it was all about the Dr. Could you get better buy in by talking to her like she was as important as the doctor instead of talking as a liaison to the doctor?<font color=green><b>APSEGAS's response on 12/11/2011</b></font>I will try this with her. Thank you.<font color=blue><b>CHUDAKOB added notes on 12/15/2011</b></font>Let me know how this works. Make the person you speak to feel like they are the most important person you are talking to...because they are.
PPLPMDL0020000001	University Heights	OH	44121	11/30/2011	Told doc I understand that cost is always a concern for patients being able to afford their medications. I described the butrans patient type and the savings cards for commercially insured patients to bring down the cost of their copay and Caresource is now covering butrans for patients that have failed on tramadol/vicodin/or codeine. He said that they will still require a Prior auth and he is going to stop doing them. He also said that many of his oxycontin patients are now requiring a PA and they dont always go through. Nothing else learned. Reminded him of the oxycontin preferred formulary coverage.
PPLPMDL0020000001	Cleveland	OH	44113	11/30/2011	dr said she's starting more patients on Butrans since she's seeing good results in her patients.dr said patients are happy with Butrans and she's seeing clinical improvements in their pain levels and cognitive functioning.i asked dr to keep starting more patients on Butrans.dr committed to do this.focused dr on commercial insurance patients.recommended Senokot-5
PPLPMDL0020000001	Beachwood	OH	44122	11/30/2011	NON-PRESCRIBER- Introduced Butrans to Roberta, Dr Yokiel's new NP. Reviewed core messages & alerted her to box warning. Presented initiation guide & discussed appropriate range of patients. Showed her a demo & demonstrated disposal with disposal unit. She said she liked the way the adhesive felt & felt it would be effectively stuck on skin for 7 days. She asked about adverse events. Showed her AE rates & asked if anything seemed out of line with what she would expect. She said she has not dealt with a lot of pain medications before in her other practices, but she did not feel the rates were bad. Discussed heat warning & black box. I asked if she feels like Butrans might be something she would be able to use in practice & she said yes.<font color=blue><b>CHUDAKOB's query on 12/08/2011</b></font>This was a good trial close. By adding in the next step, which is will you use it in your practice, you can gain a firmer commitment. Do you see how this can make a difference?<font color=green><b>APSEGAS's response on 12/11/2011</b></font>Yes, I can see that. This makes sense. Thank you for the suggestion.<font color=blue><b>CHUDAKOB added notes on 12/13/2011</b></font>Thank you for taking the suggestion!
PPLPMDL0020000001	Northfield Center	OH	44067	12/1/2011	Spoke with Kate, pharmacist/manager. Inquired about Butrans stocking. She said they actually just got a prescription for one patch for a patient. Kate said it was prescribed by a physician who specializes in treating migraines. She said the patient had been taking Percocet prior to being put on Butrans. Discussed appropriate patient type & range for Butrans. Also asked about OxyContin stocking. She said they do stock it & have a few people on the 20mg dose. She said they did not need any savings cards at this time.
PPLPMDL0020000001	Sagamore Hills	OH	44067	12/1/2011	NON-PRESCRIBER- Reminded Dr Lenox of previous Butrans conversations & core messages. He said he does not like to do a lot of pain management. I agreed that it can be difficult & that appropriate patient selection is imperative. Reviewed appropriate Butrans patient type/range, including OxyContin as an option for patients beyond the Butrans range. He said he does like that Butrans is a CIII. I suggested that he think of Butrans for patients who he is comfortable putting on opioid therapy for a chronic condition as a potential option before referring. He agreed this was a good position for Butrans.
PPLPMDL0020000001	Cleveland	OH	44103	12/1/2011	talked to Nick Pharmacist,about medication management therapy and how much he does this,Nick said occasionally he'll counsel patients as it relates to opioids,Nick said usually patients just want their pills but sometimes patients will tell him their short-acting opioids aren't controlling their pain so he'll recommend products.i asked Nick if he would give Butrans patient info booklets to those patients that are asking for something different? Nick agreed to do this,showed application/rotation section in booklet and told Nick to discuss this info with patients and have patients talk to their HCP's about Butrans,Nick said that sounded good and was comfortable doing this we talked about OxyContin being an option for patients,showed appropriate patients flashcard,Nick said they have a lot of OxyContin patients that come here,but he doesnt recommend OxyContin to anyone,nick said thats the dr decision.i told Nick I understood and asked him to keep the formulary grids for reference,nick said that was helpful.recommended Senokot-5
PPLPMDL0020000001	Parma	OH	44134	12/1/2011	Spoke with pharmacist Lily & inquired about Butrans stocking. She said they do not stock it. I asked if they did at one time. She said yes but they sent it back because they did not see any prescriptions for it. Showed her patient information booklet & suggested it be given to someone who either has a prescription or who she identifies as a potential Butrans patient. Reviewed with her appropriate patient type. She asked for a refresher on Butrans. Discussed core messages. She asked if they could take opioid medications in addition to Butrans. Told her yes & showed FPI 2.4 for support. Also discussed ability to titrate after 3 days if necessary to a maximum of 20mgcd. Discussed OxyContin savings cards & gave her a package, reviewing eligibility.
PPLPMDL0020000001	Euclid	OH	44119	12/1/2011	I described an appropriate patient for butrans: less than medicare age, presenting with spondylolisthesis, maybe already taking a 2-3 tabs of vicodin. I asked doc if he had any such patients. He said a few. I asked him if he is opposed to starting a patient on butrans instead of titrating vicodin. He said he can do that. I reviewed the formulary coverage, savings cards and the caresource coverage after failure on tramadol. I asked him to try just one patient. Reminded him of the oxycontin option for more severe pain patients.
PPLPMDL0020000001	Sagamore Hills	OH	44067	12/1/2011	NON-PRESCRIBER- Dr Sevier said he still has two satisfied patients on Butrans. I asked if he has had to do any titration of dosing with either of them & he said no. Reviewed with him the core messages & discussed appropriate patient type & range, including OxyContin as an option for appropriate patients beyond Butrans. He said he would continue to keep Butrans in his mind & would try to find more patients.
PPLPMDL0020000001	Lyndhurst	OH	44124	12/1/2011	I asked doc how patients are doing on butrans. She said she has just a couple of patients that are taking and have the insurance to afford it but it is going well for them. She said one patient was taking tramadol and just didnt want to take pills. She believes that the patient is taking 10mgc. I showed her the conversion estimates if switching from another opioid. I reminded her of the oxycontin patient type and the savings cards for both products.
PPLPMDL0020000001	Solon	OH	44139	12/1/2011	I asked doc to continue to try butrans for appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44127	12/1/2011	I met with Denny Yanoscik and Chuck Calalesina to review Report 8 and plan for 2012. We discussed Purdue's scheduled marketing programs for laxatives and Slow-Mag. We also planned Marcs 2012 promotional calendar and the 1st 2012 promotion for Discount Drug Mart for February.
PPLPMDL0020000001	Cleveland	OH	44127	12/1/2011	dr said she tried to start a couple Caresource patients on Butrans but they didnt approve Butrans.dr said these patients were taking short-acting opioids and had tried 2 of them but Caresource still didnt approve the PA for Butrans.i told dr i appreciated her trying to start a couple patients on Butrans and was sorry they didnt get approved.i asked dr to focus on 1-2 commercial insurance patients that would be appropriate for Butrans,showed visual aid and discussed opioid experienced patients.dr said ok she doesnt have many commercial insurance patients but will keep Butrans in mind.recommended Senokot-5
PPLPMDL0020000001	Independence	OH	44131	12/1/2011	NON-PRESCRIBER- Spoke with Denise (MA) & Janelle. I gave them portal invites for each of the practitioners & explained the interactive programs for the physicians. I asked them to be sure each physician received an invite. They agreed. Denise said she remembers that Butrans is for pain. Reviewed with them Butrans indication & core messages. Also discussed savings cards for Butrans & OxyContin.
PPLPMDL0020000001	Cleveland	OH	44105	12/1/2011	i asked dr if she's given any patient info booklets to patients? dr said yes a lot of them but no patients are interested in stopping their percocet and trying Butrans.i showed dr fpi,section 2.4 maintenance of therapy section,and discussed with dr that she can give Butrans with immediate release opioid for breakthrough pain.dr said she remembered that but its the patients who dont want to try a patch.i asked dr if she could find 1 patient this week,thats willing to try Butrans and dr can decide if patient gets percocet for breakthrough? dr said she will keep giving booklets to patients and keep trying,focused dr on BWC and commercial insurance
PPLPMDL0020000001	Cleveland	OH	44113	12/1/2011	talked to dr about his patients taking vicodin every day for their chronic pain,but not controlled and asking dr for more pills,i asked dr to stop and start patients on Butrans instead of refilling the vicodin.dr said he's trying and is giving patients the Butrans patient info booklets to read about Butrans,dr said a lot of patients havent been interested in wearing a patch,they only want their pills.dr said he'll continue talking to patients about Butrans and give booklets out thats all he can do.i told dr that was great he was talking to patients about Butrans and im confident he'll start a few patients soon that are willing to try Butrans.focused dr on commercial insurance plans.
PPLPMDL0020000001	Parma	OH	44129	12/1/2011	TRIALIST- Dr Gigliotti said it was not a good day for a discussion. He did point out that he put the Butrans patient information booklets front & center on his desk & had his initiation guide "ready" for patients. I suggested that he use the patient information booklets to help him "sell" the idea of Butrans to a patient as there is a lot of information that could be useful to them within. He said that was a good idea & that he was sure he could find a patient for Butrans. Also reminded him of savings cards for Butrans & OxyContin.
PPLPMDL0020000001	Sagamore Hills	OH	44067	12/1/2011	NON-PRESCRIBER- Re-introduced Butrans to Penny, reminding her of core messages. She asked what "equivalence" Butrans has with tramadol 50mg. I told her we have no comparative data & showed initiation guide pg 6 to help her position Butrans. Gave her portal invite & explained the program. She said she would log on. I asked if she could see herself using Butrans in patients who fit the appropriate type & range of patients & she said she would think about it & it is good to know there is another option for her, as a nurse practitioner, to prescribe.
PPLPMDL0020000001	Cleveland	OH	44135	12/1/2011	Quick call at window, Dr said that he wrote another Butrans script yesterday and he's been happy with the results. I spoke with the staff regarding managed care and they said they have not had any issues.
PPLPMDL0020000001	Independence	OH	44131	12/1/2011	REPEAT CUSTOMER- Dr Trickett said she has been trying Butrans on a few different patients. She added that coverage & cost has been somewhat of a hindrance for some of the patients. Reviewed Butrans formulary information & reminded her of savings cards for eligible patients. She said she has a couple patients who are doing well on it & that she does keep it in the back of her mind when assessing medications for a patient.
PPLPMDL0020000001	Cleveland	OH	44113	12/1/2011	i showed dr BUP3015,discussed opioid experienced patients and asked dr if he treats these types of pain conditions? dr said yes a lot of back pain and arthritis.i asked dr if there were any therapies he would like to replace for these chronic pain conditions? dr said he doesnt like prescribing narcotics even though he has to,to manage patients pain.i asked dr how he decides if an immediate release opioid isnt the right option for patients and they need something different? dr said if patients ask him for more pills or say their short-acting opioids aren't lasting long enough,then he'll talk to patients about something different.i told dr thats where Butrans is perfect.we talked about initiation and titration of Butrans,i asked dr if he will start 1-2 patients this week on Butrans? dr said he will consider it if patients are willing to wear a patch and insurance covers Butrans.focused dr on commercial insurance patients.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44106	12/1/2011	talked to Emily,Pharmacist,about Butrans stocking and scripts,emily said they have gotten a few Butrans Rx,i asked who's writing Butrans? emily said she doesnt know specific HCP names but does know some are from the cleve clinic we talked about 6 butrans core selling messages,showed visual aid and asked emily if she would give patients the Butrans patient info booklets if they are taking short-acting opioids and not controlled,so patients can talk to their HCP's? emily said she'll hand them out and liked that idea so patients can learn about Butrans through the booklet we talked about formulary coverage,focused on commercial insurance plans and discussed PA for medicaid,discussed OxyContin stocking and scripts for OxyContin,emily said majority of patients are same one's monthly getting OxyContin,not new patients.we discussed formulary coverage for OxyContin and i recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44109	12/1/2011	dr said she started a couple patients on Butrans,patients are doing well and she's happy with Butrans.i asked dr why she chose Butrans for these patients? dr said 1 patient was taking vicodin,the other percocet and these short-acting opioids weren't controlling their pain so they were asking for more pills.dr said she told them no she wasn't going to give them more pills but wanted them to try something different so she started them on Butrans.i asked dr if she has more patients like this,to start on Butrans this week? dr said yes she probably will.i asked dr if she'll start 2 more patients on Butrans this week? dr committed to do this.we discussed titration and formulary coverage for Butrans and i focused dr on commercial insurance plans and BWC.recommended Senokot-5
PPLPMDL0020000001	Westlake	OH	44145	12/1/2011	i showed that Butrans can be an option after tramadol is no longer controlling his patients pain. I asked if he would find a few patients like this to start on Butrans and he agreed. I reviewed that patients on higher doses of opioids can convert to OxyContin when they need a long acting option.

	Solon	OH	44139	12/1/2011	Alan, Lynn and I attended meeting with Mike. Alan discussed parts of the contract for Member Health and Caremark. Mike hadn't had a chance to review much of the redlines but believes it will be easy to iron out much of it. He asked Alan to submit a bid for 2013 and said the request for Admn Fees is a new concept to him and Dan and that they can work through it later. We discussed Butrans which he said was looked at by both P&T Committees and given a "may add". He recalled that he and I reviewed pricing and he thought it was workable. He will provide pricing to Neal Lund who will run it through their modeling and determine if they can work with it at 2T or 3T. He's optimistic it will work. He cannot begin to add products to the 2012 formulary until after Jan. 1 because Caremark said to stop. As a result, he and Dan will look at Butrans in January and put it at the top of the list for deciding to add. If it does go, it'll be officially on the website formulary 4-1-12.
PPLPMDL0020000001	Independence	OH	44131	12/1/2011	NON-PRESCRIBER- Dr Sundaram said he prescribed Butrans for a patient a couple of weeks ago. He said this was a younger female patient who was withdrawing from heroin. I told him Butrans is not indicated for or recommended for that. He said he knows. He added that the patient was given Buprenex in the hospital & did well on it, so she was sent home on Butrans as that is what the addiction specialist wanted for her. He asked about cost/coverage. Reviewed formulary information & savings cards with him. I asked if he had pain patients with insurance who may be Butrans candidates. He said he would try to find some. OxyContin broad formulary
PPLPMDL0020000001	Cleveland	OH	44111	12/2/2011	Quick call at window, She told me that Dr Daoud is now only going to Westlake and Lutheran now. They have a new NP who will just be working in the hospital so Barbara is glad to be back in the office full time. They have a new Dr named Dr King. We reviewed Butrans key messages and I asked if she would share the info with Dr King. She agreed. We discussed the savings program for both Butrans and OxyContin.
PPLPMDL0020000001	Lakewood	OH	44107	12/2/2011	Dr told me that he had prescribed Butrans for a patient who was taking OxyContin 40mg and he had success. He said the patient is doing really well and likes Butrans. I let Dr know that Butrans may not provide adequate analgesia for patients taking more than 40mg of oxycodone per day. We discussed that patients taking more than 40mg per day of oxycodone should be tapered down before initiating Butrans to prevent withdraw symptoms. We discussed the invitation guide and when to initiate the 5mg or the 10mg dose based on what the patient is currently taking. He asked me about patients who are taking 10mg of percocet 4 times per day and I reviewed that he should taper these patients down to 15mg of oxycodone per day and then start on the 10mg dose. I reviewed the Butrans is a CII and Dr really liked this fact so that he can write refills. We discussed that steady state is 3 days and he can titrate after that. Dr said that he has been trying many patients on Butrans but some say it is too expensive. He said that he had a Medicare patient say the cost was over \$100. I reviewed the managed care for Butrans and asked him to focus on commercial insurance. I spoke with Pat regarding managed care and the savings cards. She said that he has recently started many patients on Butrans as has been giving savings cards out. She said that ideally all of their chronic patients would be on Butrans.
PPLPMDL0020000001	Garfield Hts	OH	44125	12/2/2011	NON-PRESCRIBER- Dr Sadowski saw me & pointed to "Butrans" on the literature in my hand. He said, "Oh, I just read someplace that this might actually work for some people." I told him I have been trying to tell him this for almost a year. He said that he thinks he wants to try it on some patients now. He added that the article he read was talking about "the higher doses". Discussed 3 total strengths, with 5 & 10mcg being the two starting doses & 20mcg being the maximum dose. Also discussed titration ability after 3 days. He asked if he has co-pay cards. Showed him where they are located & let him know Deena knows where they are as well in case he forgets. I asked if he thought he could identify a few patients to get started on Butrans for him to get his own clinical experience going. He said yes & that he does not like to write short-acting opioids. Reminded him that Butrans is still a CII opioid with abuse/addiction potential. Also reminded him of OxyContin savings cards.
PPLPMDL0020000001	Lakewood	OH	44107	12/2/2011	I reviewed the key messages for Butrans, though there is not a lot of opportunity to recommend in the hospital. We reviewed OxyContin as an option when patients are taking hydrocodone or oxycodone around the clock. She said that Dr Khuri does prescribe it and I asked if she would recommend it for appropriate patients. She agreed.
PPLPMDL0020000001	Cleveland	OH	44111	12/2/2011	Quick call with Jim, we reviewed the medication guide for Butrans. We reviewed that Butrans can be used with supplemental analgesia and that Butrans can be called in and refilled. I asked if he would let appropriate pain patients know about Butrans as an option and he agreed. We reviewed OxyContin as a long action option and that it is covered on most managed care plans.
PPLPMDL0020000001	Lakewood	OH	44107	12/2/2011	She said she is doing well learning more about pain management. I reviewed the key messages for Butrans and appropriate patients for Butrans. We discussed when OxyContin may be an option for patients taking hydrocodone or oxycodone around the clock. She agreed to recommend Butrans or OxyContin for appropriate patients.
PPLPMDL0020000001	Independence	OH	44131	12/2/2011	NON-PRESCRIBER/FORMER TRIALIST- Quick call- Caught Dr Pain in the hallway. Reminder of Butrans appropriate patient type, focusing on patients who are not well-controlled on tramadol. He said he is keeping it in his mind.
PPLPMDL0020000001	Independence	OH	44131	12/2/2011	NON-PRESCRIBER- Dr Jack said he is happy to see that I have not given up on them. I asked him why I would give up when he has acknowledged that he has many patients that would be appropriate for Butrans. He said I made a good point. Reminded him of appropriate patient type & handed him portal invite & asked him to log on, letting him know that this may help him identify Butrans patients within his practice. Also delivered OxyContin broad formulary coverage message.
PPLPMDL0020000001	Cleveland	OH	44109	12/2/2011	discussed initiations presentation with dr.dr said he wouldnt start an opioid naive patient on Butrans.dr said he always starts with short-acting opioids in combination with physical therapy and exercise.dr said he will start patients on a long-acting opioid like OxyContin or Duragesic,after all short-acting opioids have failed.i told dr that was fine if OxyContin was a choice for his patients,i showed dr appropriate patients flashcard for OxyContin and told dr that he should still be choosing OxyContin for appropriate patients,however dr has choice of Butrans before OxyContin.dr said he will think about it but asked about medicaid coverage? i asked dr how big medicaid was for his practice? dr said he doesnt know the number but stated theres a lot of medicaid patients here.told dr there's a PA for medicaid and caresource patients,but i asked dr if he had BWC and commercial insurance plans? dr said yes to both.i told dr thats the easiest place to start a couple patients on Butrans. asked dr if he will start 1-2 patients today and next week,that are appropriate for Butrans? dr committed to do this.recommended spoke briefly with Chris (pharmacist). Discussed patient information booklets which he said he has some of. Let him know they could be given to patients who he identifies as potentially benefiting from Butrans based on patient type. He said he would do that. Also reviewed savings cards for both products. He said he has enough of those also.
PPLPMDL0020000001	Cleveland	OH	44125	12/2/2011	Spoke with Ken, I reviewed the use of supplemental analgesia with Butrans. We reviewed the medication guide and he agreed to hand them out to patients. He said that they have seen a few scrips for Butrans. I asked if he would let appropriate chronic pain patients know about Butrans as another option and he agreed. Reminder that OxyContin is also a long acting option and they still had savings cards.
PPLPMDL0020000001	Cleveland	OH	44109	12/2/2011	dr said he started 1 patient on Butrans and patient was doing well so he's considering a couple more patients to start on Butrans.i asked dr why he chose Butrans? dr said patient was taking a couple vicodin a day and not controlled and wanted more pills so dr told patient they were going to try Butrans and patient could have vicodin for breakthrough pain.dr said it was easy to explain and gave the patient info booklet.i asked dr if he has more patients like this 1,that have commercial insurance that he can start on Butrans today and next week? dr said yes he has a couple patients in mind.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	12/2/2011	i discussed patient case studies,initiations presentation,with dr and asked dr if she's thought of any patients this week that are appropriate for Butrans? dr said she had a few patients take the patient info booklets home so they could read more about Butrans and she's following up with them.dr said biggest challenge is that patients dont want to stop taking their pills.showed dr fpj,section 2.4 maintenance of therapy section,discussed with dr that patients can take immediate release opioids or non-opioid therapy with Butrans,i asked dr if she could start 1 patient today-next week,focusing on commercial insurance plan patient? dr said she will keep talking to patients and when someone is interested in trying Butrans,she'll start them.recommended Senokot-S
PPLPMDL0020000001	Lakewood	OH	44107	12/2/2011	Met Karen, Dr Grimm's nurse. He will be starting next week but then out again for vacation for a few weeks. She said that Dr Grimm will be open to meeting with reps and she is also going to talk to him about having lunch appointments. She said I schedule an appointment in Jan when Dr gets back from vacation. We reviewed the key messages for Butrans and I reviewed OxyContin as another long acting option.
PPLPMDL0020000001	Lakewood	OH	44107	12/2/2011	Dr said that he just started 2 new patients on Butrans. I asked him why he thought of it for those patients and he said he just started remembering it. He said they are chronic pain patients who were taking vicodin several times per day. He said he will continue to look for more patients. I reviewed the Evelyn case study and asked if he would start a patient like her on Butrans and he said he would. I reviewed that OxyContin is still an option when Butrans may not provide adequate analgesia.
PPLPMDL0020000001	Mayfield Hts	OH	44124	12/2/2011	Window call....i asked doc if he is starting his newly referred patients on butrans. He said he is trying when the patient has the right insurance. I reminded him that butrans may be best positioned before patients have started on something like vicodin ATC. He said he knows.
PPLPMDL0020000001	Cleveland	OH	44109	12/2/2011	worked internal medicine dept-left BUP3015,12/7/11 web conference,initiation guide and my business card for Dr.Lindheim (Dept chairman),dr jones(attended a Butrans dinner program 8/10/11,Dr. Gelehrter and Dr.Harrington-cant see any of these HCP's during working hours; worked rheumatology dept- left SAME Butrans info as above for Dr. Ballou, Dr.Magrey and Dr.Singer - cant see any of these HCP's anymore,have to leave info at front desk for HCP's.worked pm&r - see call notes on dr jaffer, dr harris, dr jaffer and dr fox
PPLPMDL0020000001	Lakewood	OH	44107	12/2/2011	Today was Dr Nageeb's last day. I let him know he will have a Purdue rep on the east said to take care of him.
PPLPMDL0020000001	Cleveland	OH	44113	12/2/2011	i talked to dr about case studies,initiations presentation,dr said it helped him to see patients and discuss their history and figure out if Butrans is appropriate or not.dr said he wouldnt start an opioid naive patient but would consider starting patients that are currently taking opioids,i showed dr BUP3015,opioid experienced patients clinical trial,and we talked about 30% reduction in pain and dr said that was impressive.i asked dr if it was impressive enough for him to start 1-2 patients,with BWC or commercial insurance,today-next week? dr committed to do this.we talked about OxyContin being an option for those patients he feels are appropriate,i showed flashcard and we focused on insurance coverage as dr said he writes a lot of OxyContin.i asked dr if he'll continue starting patients on OxyContin? dr said yes he will.recommended Senokot-S
PPLPMDL0020000001	Parma	OH	44129	12/2/2011	NON-PRESCRIBER- Quick window call- Dr Roheny said he's not seeing reps today but that he is keeping Butrans in mind. Sent back a portal invite & asked him to at least log on & have a look as it may help him identify some Butrans patients. He thanked me & walked away. Spoke with Kathy & discussed savings cards for Butrans & OxyContin.
PPLPMDL0020000001	Lakewood	OH	44107	12/2/2011	I asked Dr if she has heard feedback from the couple of Butrans patients that she started. She said that she has not and she really has not used Butrans very much. I asked why and she said no reason she hasn't thought about it much and she had not had a lot of luck with managed care. I reviewed appropriate types of patients for Butrans and asked her thoughts. She agreed it could be a good option and I asked if she would prescribe it more often. She will keep it in mind. I reviewed OxyContin as an option when patients are taking more than 40mg of hydrocodone per day.
PPLPMDL0020000001	Cleveland	OH	44143	12/2/2011	I discussed the butrans indication and the positioning for moderate ATC pain. I explained the CII status which means that it can be called in or refilled. He said thats a good thing. He said he probably does not have much potential with his patient population. I told him that butrans can be used as a first line opioid after celebrex or tramadol, if he has any patients taking those on a daily basis without sufficient relief. I explained the commercial plans and the savings cards. No commitment.
PPLPMDL0020000001	Cleveland	OH	44109	12/2/2011	i talked to Erin,Pharmacist,about what her patients with chronic pain conditions say when she provides medication management therapy,erin said some patients will tell her their short-acting opioids dont last long enough and they want something different so she'll sometimes suggest a different medication to HCP's.i asked Erin if Butrans would be an option she would recommend to patients so that patients can take a patient info booklet and talk to HCP? Erin said yes she has given a couple booklets out and will continue doing this.Erin said she likes that Butrans is transdermal and dosed once a week.i asked Erin to continue giving booklets out and focused her on commercial insurance plans,erin asked about medicaid coverage so we talked about PA for medicaid and caresource patients.
PPLPMDL0020000001	Cleveland	OH	44109	12/2/2011	talked to Stephanie,floater pharmacist,about Butrans stocking and asked who's writing Butrans? stephanie said she didnt know and couldnt look for that info in computer now.we talked about 6 Butrans core selling messages,gave stephanie butrans patient info booklet and asked if she provides medication management therapy to patients taking opioids for chronic pain? stephanie said yes they do occasionally.i asked if she would give patients the booklet so patients can talk to their HCP's? Stephanie said she would do that but i should come back and talk to Nate,pharmacist who's normally here,next week.i left booklets and formulary grid.i also confirmed OxyContin stocking with stephanie and left formulary grids.recommended Senokot-S
PPLPMDL0020000001					

	Cleveland	OH	44109	12/2/2011	showed initiations presentation to dr, discussed case studies and dr said he tried to start 3 patients this week on Butrans but 1 patient had BWC-Employee sponsored and they wanted a PA and he couldnt get Butrans approved, the other 2 patients had Caresource, we talked about the PA for Caresource and dr said he's not willing to do PA's, too much work, dr asked about BWC and commercial insurance. I told dr I was happy he tried to start a few patients as he said he would do that last time. I focused dr on BWC-state and commercial insurance patients, I asked dr why he chose Butrans for these patients? dr said he doesn't base his medication decisions on patients' numeric pain levels, dr said he looks at patients' facial features, functioning and their mood. dr said he will then decide if patients get a refill of short-acting or if they need to try something different like Butrans. dr said he doesn't even like to give 2 Percocet a day to patients. dr said he would much rather have patients try Butrans and decrease the short-acting opioids for breakthrough pain monthly, dr said some patients are just so attached to the pills they won't even consider a patch like Butrans. dr said he will continue talking to patients about Butrans and start a couple patients with focus on BWC-state and commercial plan patients. we discussed patient info booklet, focused on application/rotation and talked about initiation and titration of Butrans, dr said I could follow-up next week.
PPLPMDL0020000001	Beachwood	OH	44122	12/2/2011	REPEAT CUSTOMER- I asked Dr Tabbaa what kind of results he was getting with Butrans. He said good overall. But Dr Tabbaa said Butrans has not worked for some of his patients. I asked him to elaborate. He said some of them reported feeling sedated but did not feel pain relief. I asked if he has titrated doses for many patients. He said some of them, but he also gives them Stadol for breakthrough pain. Discussed patient information booklets & savings cards for Butrans & OxyContin. He said he has given some out but still has enough for awhile. Reminder of appropriate Butrans patient type.
PPLPMDL0020000001	Cleveland	OH	44113	12/2/2011	I discussed case studies with dr, initiations presentation, dr said he wouldn't feel comfortable starting an opioid naive patient on a long-acting opioid, dr said he would try tramadol 1st, then exercise and physical therapy and see how patient feels after that. dr said if tramadol, vicodin or percocet aren't controlling patients' pain, then he would definitely consider Butrans. dr said his biggest concern with Butrans is insurance coverage. I showed formulary grid, focused dr on med mutual and anthem as he has these plans, discussed patient savings card program with dr and asked dr if he will start 1-2 patients today-next week? dr committed to do this. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	12/2/2011	showed dr initiations presentation and discussed case studies, dr said it helped to talk through these and consider Butrans for patients. dr said a lot of her patients don't want to stop taking their pills and aren't willing to wear a patch. I asked dr how she's explaining Butrans to patients? dr said she tells patients Butrans is a patch, they rotate it once a week, dr said a lot of patients worry that the patch won't work as they are used to their pills. showed dr fpi, section 2.4 maintenance of therapy section and told dr she can give patients immediate release opioid or non-opioid therapy with Butrans, dr said ok she will consider that next time. I asked dr to continue giving patient info booklets to patients and follow-up with them, if they are hesitant to start on Butrans, dr committed to do this. I asked dr if she could find 1 patient, commercial insurance, to start on Butrans today-next week? dr said she will do her best and will start someone at some point. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	12/2/2011	discussed initiations presentation case studies with dr, dr said he wouldn't start an opioid naive patient on Butrans, dr said even though his patients have chronic pain and it may not make sense he would still try tramadol, a short-acting opioid, first and then if that fails with physical therapy and exercise, then he would consider Butrans. dr said the patients he has on Butrans are doing much better, they are functioning and feeling better overall. dr said he's happy with Butrans so far and will continue to start patients. dr said leave him more patient info booklets as every patient gets 1 and I can follow-up next week. I told dr that was great his patients are feeling better and I would see him next Friday to hear about any patients he starts today and next week, dr said ok. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44143	12/2/2011	I discussed the butrans key selling messages and asked doc if he sees any merit to a product like butrans for his patients. He said he can see how other doctors would and it seems like a good idea he just doesn't know if he has any patients that would be right for it. He tries not to get into prescribing pain meds. I gave him a butrans portal invite and asked him to look at it.
PPLPMDL0020000001	Euclid	OH	44132	12/2/2011	Introduced doc to the butrans selling messages: indication, positioning, CII status and 7 day delivery. He asked about the molecule. I explained the buprenorphine molecule and the MOA. He asked about side effects and if they are similar to vicodin. I showed him the AE section of the sales aid particularly the incidence of skin irritation, per his inquiry. I told him that butrans can be used after NSAIDs/Tramadol failure. I gave him an initiation guide and a portal invite to learn more about butrans.
PPLPMDL0020000001	Cleveland	OH	44113	12/2/2011	briefly talked to dr as she said patients are doing great on Butrans, no problems and she's happy with the medication. I told dr that was great to hear and asked if she had more patients to start on Butrans today? dr said probably so she plans to use more Butrans.
PPLPMDL0020000001	Mayfield Heights	OH	44124	12/2/2011	I spoke to doc about the butrans indication and positioning. He immediately said that he has not written much butrans. He said he has tried to prescribe it a couple of times but he had issues with insurance. I asked him if he remembers the plan. He did not. I explained that medicare patients will not be covered. He said he has patients being referred to him that are on tramadol or some low dose of a short-acting opioid. I told him that that is an ideal patient type. He said he will try to prescribe more. I reminded him that OxyContin is still an excellent option for those patients that require a stronger opioid.
PPLPMDL0020000001	Lakewood	OH	44107	12/5/2011	Spoke with Kim, we discussed that key messages for Butrans and that Butrans is a CII and can be called in and refilled. I reviewed the use of Butrans with supplemental analgesia. I asked her if she would let appropriate patients know about Butrans as an option and she said she will. Reminder that OxyContin is an option when Butrans does not provide adequate analgesia.
PPLPMDL0020000001	Parma	OH	44129	12/5/2011	NON-PRESCRIBER- Spoke with Pauline, MA, & discussed Butrans core messages & appropriate patient type, reminding her of my previous discussion with Dr Moss. She said he rarely meets with reps. I asked if she thought he would have patients who may fit the Butrans indication. She said probably. Gave her BUP3015 study with my card & asked her to make sure Dr Moss saw the information. She agreed. Also discussed savings opportunities for Butrans & OxyContin.
PPLPMDL0020000001	Chagrin Falls	OH	44023	12/5/2011	Spoke with pharmacist, Jeff, & reviewed Butrans patient information booklets. He said he knows Dr Rood has a few patients on Butrans but did not know of anyone else who is prescribing. He did show me that he has Butrans 3 strengths stocked & tries to keep 2 boxes of each strength on hand. Discussed how information booklets can be used in patient counseling or can be given to patients who he identifies as potential Butrans patients based on patient type. Focused on patients getting chronic short-acting around-the-clock opioids filled month after month. He said he would keep a few of the booklets on hand. Also discussed e-voucher for Butrans & OxyContin savings cards, giving him one package. He asked if there was a generic for OxyContin. Let him know that it is no longer available. He asked what the "street value" of OxyContin is. I told him I did not know but that it should be cautiously prescribed & only given to appropriate patients. He agreed.
PPLPMDL0020000001	Parma	OH	44129	12/5/2011	REPEAT CUSTOMER- Dr Ortega said Butrans has been "better than he thought it would be". He added that it has worked in some patients for whom nothing else seemed to work. He told me about a patient who takes Opana 40mg q8h who does not want to be on it anymore. He asked if he could try Butrans on that patient. I reviewed with him the appropriate range of patient & told him that this patient is beyond Butrans & should be considered as a potential OxyContin patient if appropriate. Dr Ortega said he also has had success with OxyContin in treating patients for pain. Spent time on the appropriate patient type & how to initiate Butrans in patients depending on their current opioid dose. I suggested that Dr Ortega start offering Butrans as a treatment option to anyone who he thinks may benefit, even if that patient isn't complaining about his or her current pain medication. He agreed this may lead to more Butrans trials. Discussed how patient information booklets can be used for this type of discussion.
PPLPMDL0020000001	Beachwood	OH	44122	12/5/2011	NON-PRESCRIBER- Quick call with Dr Warren with reminder of appropriate Butrans patient type & once weekly dosing. Spent time with Donnie, his nurse. Discussed Butrans appropriate patient type & gave him initiation guide. Focused on patients taking around-the-clock short-acting opioids for chronically painful conditions. Discussed CII & abuse/addiction potential. Donnie said he thinks Butrans sounds like a great treatment option for many of Dr Warren's patients. He asked if a patient taking 3 Percocet per day who was asking to take 4 per day because of continued pain would be a candidate. I said a patient like this would be a good Butrans candidate. Discussed ability for patients to take supplemental analgesia in the form of opioid or non-opioid medications for breakthrough pain if necessary. I asked Donnie to help me remind Dr Warren of Butrans as a treatment option for these appropriate patients. Donnie agreed & said he would try to get a few written this week so they could start to get some experience with Butrans.
PPLPMDL0020000001	Westlake	OH	44145	12/5/2011	I let Dr know that Angela has been doing the PA's for Butrans and that they are being approved. I asked him if he has any Caresource, Commercial or BWC patients that he feels might benefit from a 7 day dose, and he said he will try to find a few patients. We reviewed Butrans starting doses and I asked for his commitment to try just a few patients.
PPLPMDL0020000001	Cleveland	OH	44113	12/5/2011	dr said she's not seen anyone lately that's appropriate for Butrans but she knows it's available and if insurance covers Butrans she'll start patients. dr said biggest challenge is medicaid is a huge plan here. I talked to dr about commercial insurance patients that are appropriate for Butrans, showed BUP3015, and asked dr if she'll start 2 patients like that, this week? dr said she will do this if they have commercial insurance or if she can get PA approved for medicaid patients. recommended Senokot-S
PPLPMDL0020000001	Lakewood	OH	44107	12/5/2011	Quick call with Joe, we reviewed that Butrans is a CII and can be called in and refilled. I reviewed the use of supplemental analgesia with Butrans. Joe said the new CVS should be open in Jan. Reminder that OxyContin is still an option when Butrans does not provide adequate analgesia.
PPLPMDL0020000001	South Euclid	OH	44121	12/5/2011	Window call...I reviewed the butrans patient type, formulary coverage and the savings card program. I reminded her that she liked the idea of butrans initially and asked her if she would give it another try. Reminded her to focus on commercially insured patients and give a savings card. She said she will see but didn't have much luck before with cost.
PPLPMDL0020000001	Parma Heights	OH	44129	12/5/2011	Spoke with pharmacist Larissa & reviewed Butrans core messages. She said she still has not seen any activity for it. Showed patient information guides & Larissa said she has some on hand. Encouraged her to give them to customers who she identifies as potential Butrans patients based on their patient type. She agreed. Also discussed OxyContin savings cards & gave her one package.
PPLPMDL0020000001	Lakewood	OH	44107	12/5/2011	I asked Dr if he will be seeing some patients this week whose pain is not well controlled on tramadol. I asked him if he would start these patients on Butrans and we reviewed the initiating guide. He said that he will use it this week.
PPLPMDL0020000001	Cleveland	OH	44121	12/5/2011	I reminded doc of the butrans patient type/positioning. I asked him if he has any patients that could benefit from a once weekly, 7 day analgesic. He said it all comes down to cost. I gave him an butrans portal invite and asked him to participate. Provide formulary grid reminder.
PPLPMDL0020000001	South Euclid	OH	44121	12/5/2011	Spoke to Bonnie about the stocking of butrans. She said she has not seen many scripts for it. I explained the positioning of butrans and that supplemental analgesics are acceptable per the FPI, in the event they get alerts indicating otherwise. I explained that some pharmacies have kicked back the script because of this. She did not recall that happening with butrans.
PPLPMDL0020000001	Parma	OH	44129	12/5/2011	NON-PRESCRIBER- Spoke with Dawn (office manager) who said Jen has officially left the practice. She said other NP's from the practice & Dr Nickels will be filling in until a permanent replacement is found. She said that Jen told her she started a couple patients on Butrans before she left.
PPLPMDL0020000001	Westlake	OH	44145	12/5/2011	Quick call, I asked Dr if he would start a few new Butrans patients this week and he said he will try. I asked if he's continued to get good feedback and he said that he has.
PPLPMDL0020000001	Parma	OH	44129	12/5/2011	NON-PRESCRIBER- Quick window call- Passed back portal invite & asked Dr Kushnar to log on to the interactive programs. Reminder of Butrans once weekly dosing & transdermal system. She said she is keeping it in mind.
PPLPMDL0020000001	Cleveland	OH	44109	12/5/2011	Spoke with Natalie, discussing appropriate Butrans patient type & reviewing Butrans savings cards & patient information booklets.
PPLPMDL0020000001	Lakewood	OH	44107	12/5/2011	worked internal medicine dept - left Butrans fpi/initiation guide, patient info booklet, formulary grid, patient savings card flashcard and web conference invites for 12/7/11.
PPLPMDL0020000001	Lakewood	OH	44107	12/5/2011	Quick call at window, I told Dr that I know he will have a chronic pain patient come in this week on tramadol whose pain is not well controlled. I asked if he would try these patients on Butrans and he agreed. I reviewed the managed care for Butrans as well as OxyContin.
PPLPMDL0020000001	Chagrin Falls	OH	44022	12/5/2011	REPEAT CUSTOMER- Spoke with MA Sherry & nurse Karen & reviewed Butrans core messages. Also discussed savings cards for Butrans & OxyContin. They did not need any Butrans cards but wanted one package of OxyContin cards. Discussed Portal Invite & asked them to ask Dr Rood to log on for interactive Butrans programs online. They agreed to give him the information.
PPLPMDL0020000001	Parma	OH	44129	12/5/2011	NON-PRESCRIBER- Quick call- Reminded Dr Taylor of lunch conversation when we discussed opioid-experienced as well as opioid-naïve patients as potential Butrans candidates. She said she is keeping it in mind but did not have time to stop to talk today.
PPLPMDL0020000001	Cleveland	OH	44106	12/5/2011	worked pm&r - dr baig and apm - fellows and attending physician calls

PPLPMDL0020000001	Cleveland	OH	44106	12/5/2011	i talked to dr about the chronic pain conditions,BUP3015 inclusion criteria and asked dr how often he see's patients with these conditions? dr said he see's a lot of back pain and arthritis patients.i asked dr how he's treating these patients? dr said most patients have tried 1 narcotic by the time he see's them so if their pain is controlled he'll refill the medication,if not he'll try another short-acting opioid and some patients have surgical procedures for their pain. i talked to dr about his patients taking tramadol for their chronic pain and when the pain isnt controlled,to start patients on Butrans,dr said he will consider Butrans for his patients but he doesnt have a lot of patients taking narcotics at this time. we discussed initiation and titration of Butrans and i asked dr to start 1 patient on Butrans this week,dr said he will do that if appropriate. focused dr on commercial plan
PPLPMDL0020000001	Westlake	OH	44145	12/5/2011	Dr said that he has tried Butrans on a few patients. i asked him what types of patients he is thinking of for Butrans. He said that in general he does not write for a lot of opioids, but he likes Butrans as an option for any patients with chronic pain where the pain is documented. He said he has tried Butrans for cancer patients, arthritis, back pain, or while a patient is waiting to get into surgery. We reviewed the initiation guide and when to start a patient on 5mcg or 10mcg based on what they are already taking. He said that most of his patients are on lower doses of opioid or opioid naive. i asked if he would continue to start new patients like the ones we just discussed and he agreed. He said he had a patient coming in later today to start. i reviewed the managed care for Butrans. He said that he does not maintain many patients on OxyContin, he prefers to refer these patients once they are taking higher doses of opioids.
PPLPMDL0020000001	Cleveland	OH	44113	12/5/2011	dr said he started 1 patient on Butrans this am,was a BWC patient taking tramadol and patient wanted something else as tramadol wasnt controlling the pain.i talked to dr about initiation and titration of Butrans and asked dr if he'll start a couple more patients today/this week,dr said he will do that.focused dr on BWC and commercial plan patients.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	12/5/2011	i talked to dr about his patients taking vicodin daily for their chronic pain,not controlled and asking him for something else,showed BUP3015 and told dr thats where Butrans could be an option.dr said he has a few patients in mind but they are medicaid so he doesnt know if he'll get PA approved.i focused dr on commercial plan patients and BWC.i asked dr if he can start 2 patients this week on Butrans? dr said he'll do his best.dr said if patients are appropriate,willing to wear a patch and dr can get Butrans approved,he'll start them.we discussed initiation and titration of Butrans and i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44106	12/5/2011	showed dr BUP3015,discussed 30% clinical reductions in pain,dr said the data is impressive and he knows Butrans is available.dr said he doesnt have a lot of patients taking narcotics so he's not seen anyone lately thats appropriate.i asked dr how often he treats the pain conditions seen in the inclusion criteria of BUP3015? dr said daily,dr said he will start some patients on Butrans once he has patients that are appropriate.i talked to dr about initiation and titration of Butrans,focused dr on commercial plan patients and asked dr to start 1 patient this week on butrans,dr committed to do this.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	12/5/2011	deb,PA,said she's starting more and more patients on Butrans,its going well.Deb said she gives patients Butrans patient info booklets,discusses 4 application sites with them and follows up at end of month.deb said she'll titrate patients Butrans dose at that time.i asked deb if she'll start more patients this week? deb said she will do this.focused dr on commercial insurance plans and BWC.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44106	12/5/2011	dr said he started a couple patients on Butrans last week,we talked about why he chose Butrans for these patients.dr said patients were taking tramadol,not controlled and wanted vicodin so dr wanted to try Butrans.we talked about initiation and titration of Butrans and i asked dr if he could start 2 more patients this week on Butrans? dr said he will,if patients are open to trying Butrans and he feels they are appropriate.focused dr on commercial insurance plan patients. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44106	12/5/2011	dr said he started another patient on Butrans,dr said patient was taking tramadol and not controlled asking for something else so dr wanted to try Butrans.dr said patient started on Butrans 10mcg and seems to be doing well so far,no call backs.i asked dr when he's following up with this patient? dr said in 2 weeks.i asked dr to show patient info booklet and be sure patient's applying Butrans to 1 of the 4 approved application sites,dr said he will do that.i asked dr what else he discusses with patients? dr said side effects and he decides if the current dosage strength is appropriate or if he needs to increase the dose.we talked about titration of Butrans. i asked dr if he can start 2 patients this week,perhaps like the 1 he started on Butrans? dr said he will do his best but biggest challenge at Main Campus is that majority of patients are medicaid.we talked about PA for medicaid/caresource patients and focused dr on commercial plan patients.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44106	12/5/2011	dr said she gave a few patient info booklets out to patients last week and is following up with them in 2 weeks.i asked dr why she chose to do this? dr said both patients were taking percocet for their chronic pain,not controlled and asking her for more pills so she talked to them about Butrans,told dr that was great she's discussing Butrans with patients and asked if she could start 1 patient this week,focus on commercial plan patient? dr said if patient's willing to try Butrans and the attending physician approves,she will do that.we talked about initiation and titration of Butrans.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44106	12/5/2011	dr said he's not started anyone on Butrans yet,showed dr BUP3015,discussed opioid experienced patients and asked dr if he treats the pain conditions listed in the inclusion criteria? dr said yes he does.i asked dr how he treats these pain conditions? dr said he starts with NSAID's,physical therapy,exercise and once that fails he'll start patients on tramadol.dr said he will prescribe vicodin or percocet if tramadol doesnt control patients pain but he prefers not to prescribe these narcotics.we talked about Butrans being an option for patients right after tramadol.showed 30% reduction in pain page,asked dr if this was clinically significant? dr said yes the 30% was impressive.i asked dr if this was impressive enough for him to prescribe Butrans? dr said yes and he would consider it if patients are willing to wear a patch and rotate Butrans once a week.i showed dr patient info booklet,focused on application/rotation section and asked dr to talk to patients about this info and the side effects of Butrans,dr said he would do that.i asked dr if he can start 1-2 patients this week on Butrans? dr said he'll look and see who's coming to see him and if appropriate he will prescribe Butrans.dr asked about insurance coverage for Butrans,showed formulary grid and focused dr on commercial plan patients.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44103	12/5/2011	talked to Eric,Pharmacist,about 6 Butrans Core selling messages,asked him what feature of Butrans stood out to him? Eric said he likes that Butrans is a patch and the once weekly dosing option.i asked Eric if he will give patient info booklets to patients that are taking short-acting opioids for their chronic pain conditions and not controlled and have patients talk to their HCP's.we discussed commercial plans for Butrans.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	12/5/2011	dr said he's been giving patients the patient info booklet as many patients arent sold on patch technology for their chronic pain,dr said patients like their pills and mentally become attached to them.showed dr fpi,section 2.4 maintenance of therapy section and told dr that he can give immediate release opioid or non-opioid therapy with Butrans,dr said he knows that and will keep trying.i asked dr if he can start 2 patients on Butrans this week? dr said he'll do his best and keep talking to patients.recommended Senokot-S
PPLPMDL0020000001	South Euclid	OH	44121	12/5/2011	Window call...Reminded doc of the Butrans coverage with commercial plans and BWC. i asked if he has caresource/medicaid as butrans is being paid for after failure on tramadol or other short acting opioids. He said he does not have much. Provided formulary grid reminder and portal invite.
PPLPMDL0020000001	Westlake	OH	44145	12/5/2011	Dr has not started anyone on Butrans. We reviewed the key messages and managed care and I asked if he would give Butrans a try. He said that he would. He asked about the abuse potential and we discussed that Butrans is a CIII with a boxed warning regarding proper patient selection. Dr said that he does not prescribe OxyContin as he prefers to refer these patients.
PPLPMDL0020000001	Cleveland	OH	44127	12/6/2011	dr said she's given a few patient info booklets to patients taking short-acting opioids that arent controlled and asking her for something else. dr said she's not had anyone be interested to start on Butrans and biggest challenge is getting Medicaid to approve PA for Butrans.i asked dr to think of 2 appropriate patients to start on Butrans this week,focusing on commercial plans,dr committed to do this.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44130	12/6/2011	TRIALIST- Dr Fedorko said he just prescribed Butrans for a patient yesterday. i asked him to tell me about the patient. He said it was a female patient who was in pain "all over". i asked what she had been taking before. He said nothing for the pain & added that it is hard to tell sometimes if someone is in real pain. i agreed that pain can be difficult to treat & reminded him that Butrans is a CIII opioid & should be prescribed only for appropriate patients. He said he thinks most people who "need" pain medication aren't really in pain. Dr Fedorko said he was looking for a Butrans savings card to give to the patient yesterday but that he found only patient information booklets. Discussed the patient education & suggested he give those to patients who he thinks could benefit from Butrans even if he is not giving them a Butrans prescription at that visit. i told him that sometimes patients may want to try it if they know it is available. Reviewed appropriate patient type & range, focusing on patients who are not well-controlled on Vicodin or tramadol.
PPLPMDL0020000001	Cleveland	OH	44130	12/6/2011	Spoke with Dawn, pharmacist, reviewing Butrans appropriate patient type & range. Dawn said she has seen no activity for Butrans. Focused on patients who get refill after refill of tramadol or Vicodin or those who are not well-controlled on their short-acting around-the-clock opioid regimen. Presented patient information booklets & discussed how they can be used in discussions with customers where appropriate. Also discussed OxyContin savings cards & 7 tablet strengths.
PPLPMDL0020000001	Parma	OH	44134	12/6/2011	Spoke with Pam & Erika (pharmacists) who said they had seen only a couple of prescriptions of Butrans. Reviewed Butrans appropriate patient type, letting them know i am focusing with physicians on patients who are not well-controlled on tramadol or Vicodin around-the-clock. Discussed once weekly transdermal dosing & CIII opioid with abuse/addiction potential. Presented patient information booklets & let them know they could be given to customers who, based on the appropriate Butrans patient type, they think could benefit from Butrans. Also discussed OxyContin, which Pam said they do stock, & savings cards.
PPLPMDL0020000001	Euclid	OH	44117	12/6/2011	i asked doc if he has totally abandoned trying butrans for some of his appropriate patients. He said its not that he has abandoned it. He said it just doesnt come up and he does not like to switch patients if it isnt broken. i told him i understand that. i reminded him that he said he has patients taking tramadol as monotherapy. i asked him for those patients that fail on tramadol to try butrans. He said he will try that and that i would be surprised. Provided oxycontin dosing reminder.
PPLPMDL0020000001	Shaker Heights	OH	44122	12/6/2011	NON-PRESCRIBER- Quick call between patients. Positioned Butrans, with once weekly dosing, for patients who are not well-controlled on tramadol around-the-clock. Also reminded him of improving managed care. He said he will try to remember.
PPLPMDL0020000001	Cleveland	OH	44113	12/6/2011	worked pharmacy-in patient, pain management-lunch with dr shen and worked premier physician offices
PPLPMDL0020000001	Brooklyn	OH	44144	12/6/2011	NON-PRESCRIBER- Caught Dr Deeb at the window for a quick call. Passed back Butrans webinar information & discussed live, interactive case study format. i asked him to log on to participate. He said he would see. Spoke with Aubrey (MA) & Nancy (nurse), reminding them of Butrans core messages & patient type. Also discussed OxyContin savings cards but they did not need any.
PPLPMDL0020000001	Cleveland	OH	44130	12/6/2011	TRIALIST- i asked Dr Diab if he had any patients on Butrans at this point. He said he might have two or three. i asked what kind of results they are getting. He said the one who is still on it is happy with it but others have discontinued because they could not afford it. Reminded him of where Butrans does have good coverage & focused on savings cards for commercial patients. Also reminded him of OxyContin savings cards. Encouraged Dr Diab to log on to webcast for interactive Butrans discussion.
PPLPMDL0020000001	Cleveland	OH	44105	12/6/2011	dr said she's been giving patients the Butrans patient info booklet but noone has wanted to try Butrans.dr said its tough to get patients to try something new but she likes that Butrans is a patch and will continue telling patients about it.i asked dr to start 2 patients on Butrans,this week,with BWC or commercial plan insurance,that are taking percocet every day for their chronic pain but not controlled and asking her for something else.dr said she will if patients are willing to try Butrans and insurance covers Butrans.showed dr Butrans formulary grid.recommended Senokot-S
PPLPMDL0020000001	Parma	OH	44134	12/6/2011	LOYALIST- i reminded Dr Hernandez of the patient he had told me about who he had started on the 20mcg Butrans. He said she was just in for her follow-up & is doing well on it. He added that he really was not certain if it would work for her since she had been on Opana before starting Butrans, but he said the patient reports good pain relief & is happy on the Butrans. i asked if she takes any supplemental analgesia with it & he said no. Reminded him of previous discussions when we talked about converting other opioid-experienced patients over to Butrans & asked him to continue to do this. He agreed. Gave him portal invite & encouraged him to participate & give me feedback. Also discussed OxyContin for patients who are beyond the Butrans appropriate range.
PPLPMDL0020000001	Cleveland	OH	44113	12/6/2011	discussed patient case studies with dr,initiations presentation,dr said he wouldnt start an opioid naive patient on Butrans.dr said he would start patients on tramadol and if pain isnt controlled after that he would consider Butrans.i asked dr if he has any patients taking tramadol for 1 of the chronic pain conditions shown in visual aid,pg.12 dr said he's sure he does and he'll continue talking to patients about Butrans.dr said biggest challenge is convincing patients to try wearing a patch for a week and insurance coverage.i asked dr if he had 2 patients with BWC or commercial plan insurance that he could start this week? dr said he will do his best and see who comes in to see him.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	12/6/2011	talked to dale,PA,about patients he's starting on Butrans.Dale said majority of patients are taking vicodin or percocet and not controlled so he tells them Butrans is the only option for them.i asked how he explains Butrans to patients? Dale said he tells patients its a patch and they rotate the patch once a week and they can still have some immediate release opiod medication for breakthrough pain.i asked dale if he'll continue starting patients,focusing on BWC and commercial plan patients,this week? dale said he'll do that.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	12/6/2011	dr said he's giving more patients the Butrans patient info booklet to educate them and is following up with patients.i asked dr if he'll start 2 BWC patients this week on Butrans? dr said if patients ask for something else he's willing to discuss Butrans with them.i told dr i would follow-up next week

PPLPMDL0020000001	Cleveland	OH	44130	12/6/2011	NON-PRESCRIBER- Quick call as I caught Dr Popa at the window. Positioned Butrans for patients who are not well-controlled on tramadol around-the-clock for chronically painful conditions. She thanked me & walked away.
	Cleveland	OH	44130	12/6/2011	Handed back webinar information & spoke with Dawn about appropriate Butrans patient type. I asked her to encourage Dr Popa to participate in the live program. She said she would give her the information.
PPLPMDL0020000001					Spoke with Gail (pharmacy technician) & Tammy (secretary) & introduced myself & Purdue's products. Inquired about getting an appointment with Stacey, the pharmacist, to discuss more about Butrans since I have not yet been able to reach her. Tammy said they do not do appointments to discuss products. She said I could only leave information & then Stacey would contact me if she wants additional information. Gave Gail a packet of information with my card. Included information on upcoming webinars.
	Cleveland	OH	44113	12/6/2011	showed dr initiations presentation and we discussed patient case studies.I asked dr if he's seen any patients like this in his practice? dr said yes he see's a lot of patients with back pain and arthritis and thinks Butrans would be a great option for them but he hasnt seen any patients that are willing to try Butrans.I showed dr Butrans S core selling messages and asked dr how he would explain Butrans to patients? dr said he would tell them this is a once a week patch and its a narcotic for their chronic pain.I asked dr to show patients the Butrans patient info booklet focusing on application/rotation and discuss side effects of Butrans with patients,dr said he will do that and keep trying.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	12/6/2011	showed dr initiations presentation,discussed patient case studies and dr said she wasnt comfortable starting an opioid naive patient on Butrans.dr said she would start patients on tramadol and see if their pain can be controlled.I asked dr when does she make a change in the medication regimen? dr said when patients tell her the tramadol isnt lasting long enough or say they want more pills,then she'll consider other options.I asked dr if she would consider Butrans after tramadol fails? dr said yes she would if patients insurance covered Butrans.focused dr on BWC and commercial insurance plans.I asked dr if she'll start 2 patients on Butrans,focusing on BWC and commercial plans,this week? dr said if patients are willing to wear Butrans and give it a try she'll start them.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	12/6/2011	talked to Mary,Pharmacy Tech,about Butrans stocking and Mary said because Butrans isnt on the Cleveland Clinics formulary,its not in stock.Mary said I would have to speak with Jeff,Pharmacy mgr and he's out of the office today.I talked to Mary about 6 Butrans core selling messages and asked Mary what features of Butrans stood out to her? Mary said she likes that Butrans is a patch and the once weekly dosing.Mary suggested I stop back later this week or next week to try and speak with Jeff.we discussed formulary coverage and I gave Mary the Butrans formulary grid.
	Cleveland	OH	44113	12/6/2011	showed dr Butrans initiations presentation and we discussed patient case studies.dr said he likes patch technology of Butrans and is willing to start a few patients but not everyone wants to wear a patch.I showed dr BUP3015,discussed inclusion criteria with dr and asked if he treats these types of pain conditions? dr said yes.I asked dr how he treats them? dr said with short-acting opioid analgesics.I asked dr when does he make changes in the opioids? dr said when patients say their short-acting opioids arent lasting long enough or they want more pills,dr will consider a medication change.I told dr thats where Butrans could be an option.I asked dr if he had patients taking vicodin for their chronic pain? dr said yes a lot of patients are taking vicodin every day and not controlled so they will ask for more pills or an increase in dosage strength at some point.I asked dr to stop and not refill their vicodin or increase the dosage strength but to start them on Butrans.dr said he will do that if insurance covers Butrans.dr asked about medicaid coverage for Butrans.we discussed PA for medicaid patients and I asked dr to focus on commercial plan patients,dr said he will do that.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	12/6/2011	dr said she's starting more and more patients on Butrans,she started 1 this am that was taking percocet but not controlled so she explained that Butrans was her next option,dr said the patient info booklet is great and she gives 1 to every patient.I asked dr what feedback she's getting from patients? dr said patients like Butrans,dr said she's seeing overall general functioning improvement in patients and she's seeing reductions in pain levels that patients have never experienced with short-acting opioids.dr said she's focusing on her BWC and commercial plan patients as thats the easiest place to get Butrans approved.I asked dr if she'll find more patients this week to start on Butrans,dr said she will do that.recommended Senokot-S
PPLPMDL0020000001	Westlake	OH	44145	12/7/2011	I asked Dr what he likes about Butrans and he said that he likes that it's a patch and 7 day dosing but most of his patients are on higher doses or else he would prescribe it much more often. He said he wishes he could get more patients to agree to taper down and try Butrans but they throw a fit when he tries to cut down on their dose. We discussed other appropriate patients and he agreed to try to start patients on lower doses of opioids. We discussed patients where OxyContin may an appropriate option.
PPLPMDL0020000001	Waterford	OH	45786	12/7/2011	W - Seeing good results with the patients that he has started on Butrans. Will continue to prescribe for patients if they have insurance that will cover it. Utilized OxyContin as his long acting of choice. Likes not having coverage issues with OxyContin. I - Review and follow up of Butrans? What successes has he seen with Butrans and how does he consider patients for Butrans eligibility? Review of formulary coverage and savings card
PPLPMDL0020000001	Lakewood	OH	44107	12/7/2011	I asked Dr about how his Butrans patients have been doing and the feedback. He said for the patients who can get it covered on managed care, they are doing well. His only concern is managed care coverage and reviewed that commercial coverage will as allow as a \$15 copay. Reminder that OxyContin is also covered by most managed care.
PPLPMDL0020000001	Beachwood	OH	44122	12/7/2011	Spoke with nurse manager at pain management clinic, Debbie Macko in effort to schedule inservice or appointment with doctors and/or staff. She said she would do her best to get me in with Dr Dmitri. Debbie said he is in on Mondays & Wednesdays seeing patients. Reviewed with her Butrans core messages & discussed appropriate patient type. She said they do not prescribe a lot of medications there (although this is inconsistent with data from the doctors there). Reviewed Butrans & OxyContin savings cards, offering to leave more, but she said they did not need any since they don't use a lot of medications there.
PPLPMDL0020000001	Parma	OH	44134	12/7/2011	Spoke with floater pharmacist & presented Butrans to her. Reviewed core messages & discussed appropriate patient type, focusing on patients who are not well-controlled on chronic around-the-clock short-acting opioids like tramadol or Vicodin. Also discussed patient information booklets & asked her to leave them for Margarita. Let her know they could be used in discussions with patients or given to customers who pharmacists identify as possible Butrans patients based on their patient type. Also reviewed e-voucher for CVS customers & OxyContin savings cards.
PPLPMDL0020000001	Waterford	OH	45786	12/7/2011	W - Hasn't written for Butrans but knows Waters has written for a few patients. Likes having the option of a CIII long acting product. I - Review and follow up of Butrans for appropriate patients who meet the indication when uncontrolled on current therapy and requesting a change. Discussion of Butrans utilization after tramadol if the indication is met. Review of formulary coverage and savings card program eligibility.
PPLPMDL0020000001	Waterford	OH	45786	12/7/2011	W - Miral hasn't written for Butrans other than the one time for the patient at the nursing home. Waters sees most of the chronic pain patients but would continue to consider for appropriate patients. I - Review and follow up of Butrans for appropriate patients who meet the indication when uncontrolled on current therapy and requesting a change. Discussion of Butrans utilization after tramadol if the indication is met. Review of formulary coverage and savings card program eligibility.
PPLPMDL0020000001	Bedford Heights	OH	44146	12/7/2011	NON-PRESCRIBER- Spoke with MA Jenny & reviewed Butrans appropriate patient type & core messages. Also told her about PurdueHCP.com & asked her to give Dr Hochman portal invite & encourage him to participate in the interactive program. Passed back Butrans webinar information & asked her to give that to him as well. She agreed to do this. Also discussed OxyContin savings cards, but she said they did not need any.
	Cleveland	OH	44109	12/7/2011	dr said she remembered me talking to her about Butrans but only remembered it was a patch dr asked who are the appropriate patients,when do they change the patch and how much does it cost? showed visual aid,discussed opioid naive and experienced patients to start on Butrans,dr said she would probably start with opioid experienced patients and see how they do on Butrans before she would consider an opioid naive patient.we discussed opioid experienced patients,initiation and titration,showed patient info booklet and asked dr if she has any commercial insurance patients? dr said a few but majority of patients here are medicaid and caresource. we discussed PA for medicaid and caresource and I asked dr if she had 2 patients this week that she could start on Butrans? dr said she probably does and will consider Butrans.recommended Senokot-S
PPLPMDL0020000001	Parma	OH	44129	12/7/2011	REPEAT CUSTOMER- I asked Dr Chagin to tell me about his experience thus far with Butrans. He said he just gave it to a patient yesterday who has cerebral palsy & is in pain. He said she cannot take pills, so he felt Butrans would be a good option. He added that he asked her to call him yesterday if she had any trouble getting it or if she did not like the medication & he did not hear from her. I asked him if he has been giving it mostly to patients who have already tried some sort of opioid therapy or if he has also tried patients who have not been on opioid medications. He said both types. He said that of the patients he has heard back from, each of them reports good results with Butrans. I asked if he has had to titrate anyone's dose & he said only one person. Discussed ability for patients to take supplemental analgesia with Butrans in form of non-opioids or immediate-release opioids. He asked how long it takes to work. I told him we do not have data on that & that it depends on the person. Also told him Butrans reaches steady state in 3 days but that does not necessarily coordinate with analgesia. I asked if he would continue to identify Butrans patients & prescribe Butrans for them when appropriate & he agreed. Also discussed OxyContin q12h for appropriate patients beyond Butrans & Ryzolet as a q24h tramadol product. Recommended Senokot-S for opioid-induced constipation.
PPLPMDL0020000001	Cleveland	OH	44109	12/7/2011	dr said he's not started anyone on Butrans as majority of patients are medicaid and he's not willing to do a PA for Butrans.I asked dr if he saw clinical value in Butrans? dr said he likes that Butrans has transdermal delivery and once weekly dosing but if his patients cant get it,he wont write it.I asked dr if he has any Aetna patients? dr said yes he has a small% commercial plans.I told dr that Butrans could be an option for those patients,showed patient savings card program flashcard and formulary grid.dr said ok he would try it in a few Aetna patients if he feels Butrans is appropriate.we discussed opioid experienced patients starting on Butrans,initiation and titration of Butrans.I asked dr if he had 2 aetna patients coming in this week that he could start on Butrans? dr said he didnt know but if he does see some them he'll consider Butrans.we talked about OxyContin being an option,showed challenging flashcard and we discussed appropriate patients for OxyContin.dr said he has a few patients on OxyContin and its covered on insurance so no issues with OxyContin.I asked dr to continue starting patients on OxyContin.dr said he will.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44106	12/7/2011	discussed patient case studies,initiations presentation with dr.dr we talked about appropriate patients for Butrans,dr is focusing on patients taking a couple tablets of short-acting opioids,not controlled and asking him for something else,he's talking to them about Butrans. we discussed initiation and titration of Butrans and I asked dr if he'll start 2 patients this week,focusing on commercial plan patients,dr committed.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	12/7/2011	discussed 6 Butrans core selling messages with dr,dr said she's heard some residents and attending HCP's talk about Butrans but she didnt know what it was for.dr focused discussion on appropriate patients,showed fpi and visual aid,initiation of butrans-showed initiation guide and we discussed titration of Butrans. I asked dr if this could be an option for some of her patients? dr said probably so.dr asked about medicaid coverage? we discussed PA for medicaid and caresource patients and I focused dr on commercial insurance patients.dr said ok she'll talk to some patients and see if they are willing to wear a patch.recommended Senokot-S
PPLPMDL0020000001	Bedford	OH	44146	12/7/2011	Spoke with Oleg (pharmacist/manager) & reviewed Butrans, including appropriate patient type. Focused on patients taking 3-4 tramadol or Vicodin every day & getting refill after refill. Oleg said they have "a lot" of people like that. He said he did see a Butrans prescription recently from Dr Moufawad. I showed him patient information guide & asked him to keep them on hand & give them out if he identifies someone who could benefit from Butrans. He said one particular Vicodin patient comes to mind & added that he will give the patient the booklet when he sees him next time. He said he thinks Butrans is a good option for this type of patient & that he likes that drug is delivered over 7 days instead of a short period of time. Also discussed OxyContin stocking. He said he has a few people on the 10, 20, 60, & 80mg strengths. He said he did not need any savings cards at this time.
PPLPMDL0020000001	Cleveland	OH	44109	12/7/2011	I talked to dr about how many patients she treats in the hospital versus out-patient,with chronic pain.dr said majority of patients in hospital with chronic pain she consults pain management and/or physical medicine and rehabilitation,dr said if appropriate she'll make narcotics decisions but its usually the specialists.dr said in the out-patient setting its her decision but right now she only has a couple patients taking narcotics.showed dr visual aid,focused on opioid experienced patients and asked dr if she will start 1 patient this week that could be appropriate for Butrans? dr said she will if patient is willing to wear a patch and if insurance pays for it.dr asked about medicaid coverage for Butrans? we discussed PA for medicaid patients and Butrans.I focused dr on commercial insurance plan patients,dr said ok.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44143	12/7/2011	Window call....I reviewed the butrans patient type, 7 day delivery and CIII status. I asked him if he has any patients that fit this positioning. He said he did not know. I gave him a Butrans portal leave behind. Also gave him a formulary grid for oxycontin and butrans.
PPLPMDL0020000001	Cleveland	OH	44109	12/7/2011	I talked to dr about how he manages chronic pain patients that are on narcotics after seeing a pain specialist or physical medicine and rehab,dr said if patients are started on narcotics by a specialist,he'll continue their therapy but most likely wont increase the number of pills per month.dr said he likes that Butrans is a different option for patients being a patch and a CIII opioid but he doesnt have many patients taking narcotics so at this point he probably wont be prescribing Butrans.I told dr I appreciated his honesty and asked him to keep an open mind in case 1 patient is appropriate for Butrans he'll have all of the information.dr said he would keep Butrans in mind,focused dr on commercial plan patients.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	12/7/2011	dr said he started a patient last week,under dr chrisman's guidance,on Butrans.I told dr that was great and asked why he chose Butrans? dr said patient was taking percocet every day for pain and not controlled asking him for more pills,so dr thought Butrans would be a great option.patient got Butrans so no issues at pharmacy.I asked dr if he has more patients like this 1 that he can start on Butrans.dr said probably so and he'll talk to dr chrisman, resident program director and get guidance from her too.focused dr on commercial plan patients so they can use patient savings cards,gave dr patient savings card flashcard.recommended Senokot-S
PPLPMDL0020000001					



PPLPMDL0020000001	Cleveland	OH	44109	12/7/2011	i showed dr visual aid,pg.11,we discussed dr expectations of short-acting opioids for chronic pain conditions.dr said she wants patients to have pain be manageable. i asked dr if Butrans 30% clinical reduction shown in BUP3015,was clinically significant? dr said yes 30% is impressive.i asked if it was enough for her to start 2 patients on Butrans.dr said she will consider Butrans but hasnt seen anyone lately because she doesnt have a lot of patients on narcotics.focused dr on commercial plan patients and asked her to start 2 patients on Butrans.dr committed to do this.recommended Senokot-S
PPLPMDL0020000001	Bedford	OH	44146	12/7/2011	TRIALIST- I asked Dr Haddad about his experience with Butrans since our last discussion. He said he has written it a few times since he saw me last. I asked him what type of feedback patients have given him. He said he has not heard anything so he assumes that is good. I asked if he plans to continue to prescribe Butrans since his feedback has been positive. He agreed to do this. I gave him portal invite, explained the interactive programs, & asked him to log on. He said he would have a look. I let him know I would be interested in his feedback. I also reminded him of OxyContin savings cards & asked him to give them out with a prescription. He agreed.
PPLPMDL0020000001	Cleveland	OH	44109	12/7/2011	showed dr BUP3015,discussed opioid experienced patients and dr said he see's a lot of patients like this.dr said he treats them with short-acting opioids for awhile until the pain is no longer controlled then he'll consider a long-acting opioid.i asked dr if 30% reduction in pain levels was clinically significant? dr said yes it is.i asked dr if its enough for him to prescribe Butrans? dr said he will talk to a few patients but it depends on the patient and if insurance will cover Butrans.i asked dr to focus on commercial plan patients and show patient info booklet to explain Butrans to patients,dr said ok he will try that out and see what happens.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	12/7/2011	i showed dr BUP3015,discussed opioid experienced patients and dr said she see's patients like this.i asked dr if a 30% reduction in pain was clinically significant? dr said yes it is.i asked dr if its enough for her to prescribe Butrans? dr said she had a few patients she wanted to start on Butrans but medicaid didnt approve the PA.we talked about commercial plan patients trying Butrans and i asked dr if she had 2 patients this week that she could start on Butrans? dr said probably so and she will consider Butrans.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	12/7/2011	lunch with family medicine - see call notes on HCP's; left BUP3015,initiation guide,formulary grid,patient savings card flashcard and my business card for
PPLPMDL0020000001	Cleveland	OH	44106	12/7/2011	Dr Jones,Dr Lindheim,Dr Harrington,Dr McCreery,Dr Ricanati,Dr Gelehrter as i couldnt see any of them - NO ACCESS DEPT.
PPLPMDL0020000001	Cleveland	OH	44106	12/7/2011	i discussed patient case studies,initiations presentation,with dr. dr said he started a couple patients last week and yesterday on Butrans and is happy with the clinical results he's seeing in patients.i asked dr what feedback he is getting from patients? dr said patients like that Butrans is a patch and the once weekly dosing.i asked dr if he'll start a couple patients today,focusing on commercial insurance,that are appropriate for Butrans? dr committed to do this. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	12/7/2011	showed BUP3015,discussed opioid experienced patients clinical trial and pain conditions,dr said he treats these conditions and for adults he'll prescribe narcotics when appropriate.i asked dr if a 30% reduction in pain was clinically significant? dr said yes it is and he'll keep Butrans in mind but doesnt have a lot of patients taking narcotics.i asked dr if he'll see 2 patients this week,that are appropriat for Butrans with commercial insurance? dr said he might and will start them if insurance covers Butrans. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44106	12/7/2011	worked apm dept and out-patient/bolwell pharmacy
PPLPMDL0020000001	Warrensville Heights	OH	44122	12/7/2011	NON-PRESCRIBER- Positioned Butrans for patients who are not well-controlled on tramadol around-the-clock. Dr Zivic said he is keeping it mind. Reminded him of Medicaid prior-authorization requirements & OxyContin favorable managed care. He said he will try to remember & then walked away. Discussed portal invite with Michelle & asked her to encourage Dr Zivic to participate. She said she would give him the invitation.
PPLPMDL0020000001	Cleveland	OH	44109	12/7/2011	i showed dr BUP3015,we discussed pain conditions seen in the inclusion criteria and dr said he treats many of these listed.dr focused on low back pain patients.dr said he thinks Butrans is a great option for patients who are willing to wear a patch and change it once a week.dr said he only has a few patients taking narcotics and they are controlled on tramadol.i asked dr whats the next step after tramadol in his treatment plan? dr said usually another short-acting opioid like vicodin. i told dr that where Butrans could be an option,right after tramadol fails to control patients pain.showed initiation guide and discussed initiation and titration of Butrans.dr said he'll talk to some patients and see if they will be willing to wear a patch for a week and change it weekly. i asked dr if he had 2,commercial insurance,patients that he could start on Butrans this week? dr said he probably does and will think about it.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	12/7/2011	showed dr Butrans visual aid,pg.11,and we discussed pain conditions,dr said he treats a lot of back pain and arthritis.dr said he starts with short-acting opioids,after NSAIDS,exercise and physical therapy dont work.we talked about Butrans being an option for opioid naive and experienced patients,dr said he wouldnt start a naive patient on a long-acting opioid but would consider opioid experienced patients for Butrans.we discussed initiation and titration of Butrans and dr asked about insurance coverage for medical aid patients? we discussed PA for medical aid patients and i asked dr if he had 2 commercial insurance patients that he could start on Butrans this week? dr said he might and will have to see who come's in to see him.focused dr on commercial insurance plans and showed formulary grid,we discussed patient savings card program for commercial insurance patients.recommended
PPLPMDL0020000001	Cleveland	OH	44109	12/7/2011	showed dr pg.11 visual aid and we discussed pain conditions noted here.dr talked about back pain and said it is the biggest complaint with patients but she always treats their pain with immediate release opioids.dr said she was trained that way,is comfortable with this and patients are controlled with their immediate release opioids.i asked dr if patients ever ask for more pills or something different? dr said rarely dr said she knows Butrans is available and will consider it when she deems appropriate.focused dr on commercial plan patients and asked dr if she'll see 2 patients this week to start on Butrans? dr said she doesnt know but if she does she knows Butrans
PPLPMDL0020000001	Cleveland	OH	44109	12/7/2011	i showed dr BUP3015,discussed opioid experienced patients and dr said she does treat some patients with chronic pain.i asked dr if a 30% reduction in pain was clinically significant? dr said yes it is.i asked dr if she would start 2 patients,commercial insurance,on Butrans this week? dr said if patients are willing to wear a patch for a week and insurance covers Butrans,sh'e'll start some patients on Butrans.we discussed initiation and titration of Butrans and i showed patient info booklet to dr and asked dr to give booklets to patients when starting them on Butrans,dr committed to do this.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	12/7/2011	dr said she started a couple patients on Butrans last week and will continue to do so.dr said she's excited that Butrans is available and that she can prescribe it.i asked dr who the patients are,that she considers appropriate for Butrans? dr said patients taking a couple tabs of short-acting opioids,not controlled and asking her for more pills,those are the patients she's considering appropriate for Butrans.i showed dr initiation guide,discussed initiation and titration and asked dr if she'll see 2 patients this week that she can start on Butrans? dr said she probably will and as long as insurance covers Butrans sh'e'll continue to prescribe. focused dr on commercial plan patients and showed formulary grid.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	12/7/2011	i talked to dr about 6 Butrans core selling messages,dr said she likes that Butrans is a patch,once weekly dosing and that its a CII so she can call in refills.i asked dr if she would consider opioid naive or experienced patients first to start on Butrans? dr said she would most likely start an opioid experienced patient on Butrans. we discussed initiation and titration of Butrans and i asked dr if she has any patients with commercial insurance? dr said there are a few but majority of patients have medicaid and caresource insurance.we discussed PA for medical aid and caresource patients and i showed dr Butrans patient savings card flashcard and told dr her commercial patients could use the patient savings cards.dr said ok she has a few patients in mind that she could discuss Butrans with and see if they would be willing to wear a patch for a week.i asked dr if she'll see 2 patients this week that she can start on Butrans? dr said she might and will keep Butrans in mind. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44114	12/7/2011	dr said he's starting a lot of patients on Butrans and will continue doing so as he's happy with Butrans.i asked dr what patients are saying about Butrans? dr said no complaints and they seem to like Butrans.we talked about initiation and titration of Butrans and i asked dr if he'll start more patients on Butrans this week? dr said he will do that.focused dr on BWC and commercial insurance patients. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44114	12/7/2011	John,PA,said they are starting more patients on Butrans and are happy with Butrans.i asked John what feedback is he getting from patients? John said he's seeing overall improvements in patients general functioning and patients are happy with wearing a patch and like the once weekly dosing.i asked John how he decides if Butrans is an appropriate option? John said if patients tell him their immediate release opioids arent controlling their pain and they either want an increase in the dosage strength or more pills,he tells them Butrans is their only option.we talked about initiation and titration of Butrans and i asked John if he'll start more patients on Butrans this week? John said yes he will do that.focused John on BWC and commercial insurance patients.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	12/7/2011	dr said she's not prescribed Butrans yet as she couldnt remember who was appropriate? i showed visual aid,we discussed opioid naive and experienced patients to start on Butrans.dr said she would only be comfortable starting opioid experienced patients on a long-acting opioid.we discussed initiation,titration,showed dr patient info booklet and asked dr to give every patient she starts on Butrans this booklet,dr said ok she will do that.dr asked about insurance coverage? i showed dr formulary grid and focused dr on commercial plan patients.i asked dr if she'll start 2 patients this week on Butrans,dr committed.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44106	12/7/2011	i talked to Margie,Pharmacy Supervisor,about how much medication management therapy she provides to patients taking short-acting opioids for chronic pain.Margie said she does a little bit of education but not many patients ask questions unless they are starting a new medication.i asked Margie what the conversations are like with these patients.Margie said occasionally she'll hear patients say their short-acting opioids arent lasting long enough or they dont like taking pills.i asked Margie if she would give Butrans patient info booklets to these patients so they can speak with their HCP's about Butrans? Margie said she will do that and has given a few booklets to patients.we discussed formulary coverage for Butrans.
PPLPMDL0020000001	Mayfield Heights	OH	44124	12/7/2011	Doc came out and said, "No, I haven't written Nucynta yet." I said, "You mean Butrans.". I asked doc if she is aware of patient insurance when she goes into a room. She said she does not and just tries to prescribe what she thinks is right. I reviewed the butrans coverage with commercial plans, BWC, and Caresource after failure on short acting. She said she may go as high as 300mg/day of tramadol before switching(100mg 3x/day). She asked if she should just think of butrans for younger patients. I told her certainly younger than medicare age. Told her that 10mcg might be a starting dose if she goes to 300mg of tramadol. I reviewed the oxycontin patient type and the preferred coverage for those patients.
PPLPMDL0020000001	Westlake	OH	44145	12/7/2011	Quick follow up with Dr Gerace, he requested more patients information for Butrans and he said he started a new patients. I asked if the patient was able to get Butrans smoothly and he said he has not heard back so he thinks they did. I reviewed the managed care for Butrans and asked if he would try a few more new patients. He agreed.
PPLPMDL0020000001	Cleveland	OH	44106	12/7/2011	i talked to dr about patient case studies,initiations presentation,dr said he likes Butrans is a patch and once weekly dosing.dr said he needs fellows/residents to remind him that Butrans is available as he forgets.i asked dr about his patients taking tramadol for their chronic pain,showed visual aid,pg.11 pain conditions listed,that he refills every month even if the tramadol isnt controlling their pain.i asked dr what are the clinical benefits of doing this? dr said its maintenance therapy for many patients and when tramadol fails he'll start some patients on vicodin.we talked about Butrans being an option after tramadol.i asked dr what he needs from me to remember Butrans? dr said keep reminding him and work with fellows so they can remind him.focused dr on commercial plan patients.we talked about OxyContin being an appropriate option for patients,showed flashcard dr said he writes a lot of OxyContin and no problems getting it covered.showed formulary grid and asked dr to continue starting patients on OxyContin,dr committed to do this.recommended Senokot-S
PPLPMDL0020000001	Mayfield Heights	OH	44124	12/7/2011	Window call....asked doc if he has had any feedback from the butrans patients yet. He said not yet. I reminded him of the formulary coverage and caresource after failure on a short acting opioid or tramadol. Gave him a formulary grid for butrans and oxycontin.
PPLPMDL0020000001	Bedford	OH	44146	12/7/2011	TRIALIST- Quick call- Dr Moufawad said he did not have time today. He added that he has not had a Butrans patient but that he thinks he will soon. He thanked me & walked into a room. Spoke with MA Christina & reviewed savings cards for Butrans & OxyContin. discussing usage for patients who pay cash or who are commercially insured.
PPLPMDL0020000001	Cleveland	OH	44109	12/7/2011	dr said she's not started anyone on Butrans as she doesnt have much experience prescribing narcotics yet dr said this is her 1st year post-grad,so she's learning from other residents and the attendings about opioids.we discussed 6 Butrans core selling messages and dr said if she see's any patients who arent controlled on immediate release opioids then she'll consider Butrans.showed formulary grid and focused dr on commercial insurance plans.i asked dr to think of 2 patients that could be appropriate for Butrans and start them this week.dr said she will if she see's anyone and if insurance covers Butrans, recommended Senokot-S
PPLPMDL0020000001	Parma	OH	44129	12/8/2011	Spoke with floater pharmacist who said he has filled Butrans prescriptions at some locations. Discussed appropriate patient type, focusing on those who take chronic, short-acting around-the-clock opioids, especially if they are not well-controlled or have their dose escalated. Also discussed e-voucher for Rite Aid customers & OxyContin savings cards.
PPLPMDL0020000001	Parma	OH	44129	12/8/2011	NON-PRESCRIBER- Quick call- Passed back Butrans webinar information, describing interactive nature of the program. I asked if she would be able to participate. She said she didn't know but probably not. Gave her portal invite & let her know that could be accessed at any time. She thanked me & walked away. Spoke with MA Brittni & reviewed Butrans appropriate patient type & OxyContin savings cards. She said she would try to remind Dr Rossi of Butrans.
PPLPMDL0020000001					

PPLPMDL0020000001	Cleveland	OH	44103	12/8/2011	dr said she's starting more patients on Butrans and patients are doing well.I asked dr who are the patients she's considering to start on Butrans? dr said most of these patients have been taking percocet and arent controlled so she's starting them on Butrans.I asked dr if she would consider starting patients on Butrans,after vicodin,when vicodin isnt controlling patients pain? dr said yes she would do that.dr said biggest challenge is getting medicaid to approve the PA for Butrans.we talked about PA requirements for Medicaid and I asked dr if she'll continue starting more patients this week? dr committed to do this. I showed dr appropriate patients flashcard for OxyContin,we discussed formulary coverage and I asked dr if she will continue starting patients on OxyContin? dr said she will no problems with OxyContin and coverage.recommended Senokot-S
	Beachwood	OH	44122	12/8/2011	NON-PRESCRIBER- Reminded Dr Malkamaki of previous Butrans discussions & how enthusiastic he had been about it. I asked him what happened & what his hesitation is with Butrans. He said it is a matter of finding the right patient. He then asked me what insurances would Butrans be "easy" to get on. Discussed focusing on private insurance & BWC as the path of least resistance. Reviewed appropriate patient type. He said although he likes to avoid chronic opioid therapy, he does have a lot of patients on chronic opioids. I asked if most are on short-acting or long-acting. He said mostly short-acting, but some on OxyContin. Discussed OxyContin as an option for appropriate patients beyond Butrans range. I asked if he believed in treating chronic pain with long-acting opioids. He said yes, as long as the person really does have chronic pain. I agreed that appropriate patient selection is important & that legitimate patients only should be considered. Discussed Butrans as a CII opioid delivering buprenorphine continuously for 7 days. He asked if a patient on fentanyl 25 would be a potential Butrans patient. I showed initiation guide pg 6. He said he really wants to try Butrans to start to gain experience. I told him only he can control that. He started looking in his computer & said he thinks he found his first Butrans patient. He added that the patient was on short-acting around-th-clock opioid & has BWC insurance. He said he will prescribe Butrans for that patient as his first one.
PPLPMDL0020000001	Cleveland	OH	44109	12/8/2011	dr said he's been giving Butrans patient info booklets to patients that he feels Butrans is an appropriate option.dr said patients tend to be resistant to a patch and its all mental because they are attached to their pills.dr asked how much short-acting opioids patients can take while wearing Butrans.I told dr I didnt have a recommendation but showed dr FPI,section 2.4 maintenance of therapy,noting that he can give immediate release opioid or non-opioid therapies with Butrans.dr said ok.I asked dr if he had any patients with 1 of the pain conditions,pg.11 visual aid,that are taking short-acting opioids but not controlled? dr said yes he has a lot of patients with these pain conditions but convincing the patient to try a patch for their pain,like Butrans,and getting Caresource/Medicaid to pay for it is another challenge.I asked dr if he had any BWC or commercial insurance patients that he could start on Butrans? dr said they have some here and more at the other offices.I asked dr to start 2 patients like that,this week,on Butrans.dr said he will keep trying and talking to patients about Butrans.dr said the booklets are helpful in educating the patients and he needs to get in a habit of starting patients on Butrans.we discussed OxyContin being an option for patients,showed challenging flashcard and showed formulary grid,I asked dr if he would start a couple patients on OxyContin that are appropriate? dr said he will if appropriate.I recommended Senokot-S
	Cleveland	OH	44104	12/8/2011	dr said she has 1 patient on Butrans and hasnt started anyone else,dr said this patient was motivated to try something else and didnt want short-acting opioids.I asked dr about her other patients with 1 of the chronic pain conditions,pg.11 visual aid, that are taking percocet daily for their pain but not controlled,would Butrans be an option for them? dr said majority of her patients only want pills and arent willing to try a patch.I asked dr if that was her perspective or if patients have said this? dr said patients always ask for pills,more pills,it never ends so its both her opinion and patients have said this. I asked dr if she'll start 2 commercial insurance patients,on Butrans,this week that are appropriate and willing to try Butrans? dr said she'll do her best and will continue giving patient info booklets to patients and see if that helps educate patients on Butrans.I recommended Senokot-S
PPLPMDL0020000001	Cleveland East Cleveland	OH	44113	12/8/2011	left BUP3015,initiation guide,patient info booklets,formulary grid,web conferences in dec 2011 and my business card - for Dr.Long and Patty Paczos,PA - in rheumatology dept
		OH	44112	12/8/2011	Doc took the initiation guide and said he was going to write it. I asked him where he is thinking about writing it. He said he needs to write it for one of his staff which he thinks would be a good candidate. I asked him where else would he prescribe butrans. He said for percocet patients with chronic pain. I explained that more moderate pain patients may be more appropriate - such as those taking tramadol or vicodin. He asked for confirmation of caresource coverage with a prior auth. Confirmed that it should go through. I reviewed the butrans starting doses. He said his staff has been doing more prior auths for oxycontin now. I told him that unfortunately medicaid is now requiring. He asked for more savings cards for oxycontin.
PPLPMDL0020000001	Cleveland	OH	44195	12/8/2011	I discussed patient case studies,initiations presentation,with Anne,NP Anne said dr stanton-hicks started a couple patients on Butrans so she's explained Butrans to a few patients and so far patients are doing good on Butrans.I asked Anne why Butrans was chosen? Anne said these patients were taking vicodin and not controlled so instead of giving more pills the dr wanted to try Butrans.Anne said because she see's all of the doctors patients,she's suggesting Butrans as an option more and more.I asked Anne how she explains Butrans to patients? anne said she tells patients Butrans is a patch for their pain and they need to rotate the patch once a week. we looked at patient info booklet,focused discussion on side effects,application/rotation of Butrans and disposal of Butrans.I asked Anne to give booklets to patients she starts on Butrans,Anne said she will and has been doing that.I asked Anne if she has 2 patients this week,with BWC or commercial insurance,that she can start on Butrans? Anne committed to do this.recommended Senokot-S
	Parma	OH	44129	12/8/2011	TRIALIST- Dr Gigliotti said he wrote a Butrans prescription on Tuesday. I asked him to tell me about the patient & why he chose Butrans for him/her. He said she had been taking Percocet around-the-clock for a couple months, then got switched by another doctor to Vicodin & was taking 5 per day. He said her insurance must have paid for it because he did not hear anything back from her about it. I asked if he planned to keep the momentum going & put more patients on Butrans & he said today might be the day again. Also reminded him of favorable OxyContin managed care.
PPLPMDL0020000001	Cleveland	OH	44195	12/8/2011	I discussed patient case studies,initiations presentation,with Kathy,PA.Kathy said more HCP's are prescribing Butrans in the dept but dr mekhail and dr minzter havent started anyone yet.I asked Kathy what features of Butrans really stand out to her? Kathy said she likes that Butrans is a patch,dosed once a week and being a CII is easy because she can call in refills. I asked Kathy if she will talk to her 2 HCP's she works with and discuss Butrans with them? Kathy said she will. I showed Kathy BUP3015,discussed opioid experienced patients clinical trial with Kathy and the 30% reductions in pain and asked Kathy to show both HCP's this study,Kathy said she will do that as 30% is impressive.I asked Kathy to focus on 2 patients,with commercial insurance,to start on Butrans this week.Kathy said she will do her best with the 2 HCP's and see if she can start anyone. recommended Senokot-S
	Lyndhurst	OH	44124	12/8/2011	Quick call....doc said she just wrote a script about a week ago. She the patient was a little lady that does not tolerate much so she started on the 5mcg even though the 10mcg is better. She just wanted to see how she does first. I gave reminder on the formulary coverage for butrans and oxycontin.
PPLPMDL0020000001	Cleveland	OH	44103	12/8/2011	I discussed patient case studies,initiations presentation,with dr.dr said he's given a few booklets out to patients but not a lot of patients want to wear a patch for their pain.dr said most patients want their pills.I showed dr FPI,section 2.4 maintenance of therapy section,told dr he can give immediate release opioid or non-opioid therapies with Butrans.dr said ok he'll talk to patients and see if he can convince a few patients to try Butrans.dr asked about medicaid coverage? we discussed PA requirements for Butrans.dr asked about OxyContin coverage for Medicaid patients? we discussed PA for OxyContin,showed formulary grid and I asked dr to continue prescribing OxyContin,dr said he will do that. recommended Senokot-S
	Beachwood	OH	44122	12/8/2011	NON-PRESCRIBER- Quick call- Gave Roberta upcoming Butrans webinar information & discussed interactive nature of the program. I let her know this would be a great opportunity to hear more about Butrans & discuss it with experts. I asked if she would participate. She said she would check her calendar. Also gave her portal invite & let her know that could be accessed at her convenience.
PPLPMDL0020000001	Cleveland	OH	44102	12/8/2011	I talked to Nagla,PA,about patient case studies-initiations presentation and Nagla said 2 of the HCP's-dr carson and dr celeste have started a few patients on Butrans.Nagla said she tells patients where to apply/rotate Butrans and shows the patient info booklet.Nagla said patients are doing well on Butrans so far and she's continually recommending Butrans to all the HCP's in the practice.we discussed initiation and titration of Butrans,showed visual aid an initiation guide,and I asked Nagla if she could start 2 patients this week focusing on BWC or commercial insurance? Nagla said she will keep recommending Butrans to the HCP's and if they agree with her,she'll start patients on Butrans.recommended Senokot-S
	Westlake	OH	44145	12/8/2011	I asked how his Butrans pateint was doing, the one who was not able to swallow tablets, he said that she seems to be doing well. He said he should be seeing her for a follow up soon and he will evaluate if he needs to titrate the dose. I asked if he would start other new patients this week and he agreed.
PPLPMDL0020000001	Cleveland	OH	44118	12/8/2011	Doc came out and asked if I "still had pain pills". I told him that I do still have oxycontin and I also have butrans which is a once a week CII opioid. I asked if he was interested in hearing about it. He said he is always interested even though he may not write it. I discussed the other selling messages and the coverage and savings cards. Nothing learned.
	Cleveland	OH	44195	12/8/2011	worked anesthesia dept - call notes on kathy kraus,PA and anne crawford,NP; left BUP3015,initiation guide,patient info booklets,formulary grid,patient savings card flashcard and my business card for dr covington, dr bamford,dr may,dr kriegler and dr stillman -neuro and chronic pain; worked rheumatology dept-SAME info as above for dr deal, dr calabrese,betsy kirschner,NP and dr chatterjee
PPLPMDL0020000001	Cleveland	OH	44102	12/8/2011	I talked to Vince,Pharmacist,about Butrans 6 core selling messages.Vince said no Rx yet,he's not ordering Butrans until he see's 1 script. I showed formulary grid and we discussed commercial insurance plans for Butrans.I asked Vince to give patient info booklets,to patients with chronic pain conditions that are taking immediate release opioids daily but not controlled,so patients can talk to their HCP's.Vince said he will do this.we talked about OxyContin writers in the area and I asked Vince if he's seeing new OxyContin Rx? Vince said no more of the same patients every month.I showed OxyContin formulary grids and briefly discussed OxyContin conversion guide.recommended senokot-s
	Cleveland Hts	OH	44118	12/8/2011	Spoke to tech, Sophia, about the stocking and movement of butrans. She was aware of one or two scripts being filled but does not know if they have been refilled. I asked if she knew the prescriber. She did not know. I explained the positioning of butrans and the savings card available for commercially insured patients. I asked about the volume of oxycontin scripts. She said they have plenty of those. No issues or concerns with oxycontin.
PPLPMDL0020000001	Cleveland Heights	OH	44118	12/8/2011	Spoke to Allan about the key selling messages of butrans including the positioning before going to vicodin ATC. I asked him how often does he see vicodin being refilled month after month. He said it is common. I gave him a patient info guide and asked him to consider giving it to a patient to let their doctor know about another option. He said maybe, if a customer asks.
	Parma	OH	44129	12/8/2011	NON-PRESCRIBER- Spoke with Sheila (MA) & discussed Butrans webinar. Described interactive nature of the program & asked her to be sure Dr Gallagher gets the information. She agreed. Also discussed Butrans core messages, reminding her of my previous discussions with Dr Gallagher. She said they are not scheduling anything at this time due to being busy. Let her know I would return to follow-up & try to catch Dr Gallagher. Discussed Butrans & OxyContin savings cards but they did not need any.
PPLPMDL0020000001	Cleveland	OH	44112	12/8/2011	I Showed doc the butrans demo and discussed the CII start times and 7 day delivery. He said he actually wrote a script fr it "2 days ago". I I asked him to tell me about the patient. He said the patient had Anthem and was taking 2-3 vicodin/day which was no longer enough. The patient didnt want to go to percocet so he put him on butran. I told him that is an ideal patient type for butrans. I asked if he gave a savings card. He said he did.
	Cleveland Hts	OH	44118	12/8/2011	I asked doc if he is having better luck with patients accessing butrans through insurance coverage and at the pharmacies. He said they seem to be getting it with no more problems. He said now we just have to see if its going to work. I told him the key is going to be proper patient selection and that patients failing on tramadol or low doses of vicodin are moer appropriate for butran. I reminded him of the caresource coverage after tramadol failures. I discussed the oxycontin patient type and coverage and left a conversion guide.
PPLPMDL0020000001	Highland Heights	OH	44143	12/8/2011	I said things are going well with butrans and he is still writing it. I asked him if he has prescribed for any medicaid patients. He said he doesnt think so. I asked him if he has any caresource patients. He said of course, "who doesn't?". I told him that caresource is covering butrans after failure on tramadol or other short acting. I also asked him if patients come to him opioid naive. He said sure and that he has a opioid naive patient now but she is medicaid. I asked him to consider a 5mcg dose for patients that are referred and are opioid naive. He said he has not had any issues with coverage/insurance. I discussed the oxycontin patient and the preferred covered for those patients. He said he only has about 5 patients on oxycontin and wishes he didn't.
	Cleveland Hts	OH	44118	12/8/2011	I reviewed the butrans indication and the other key selling messages. I asked if he has any patients that may be taking tramadol ATC but now need something else for their pain. He said he was just asking dr. ganz about alternatives to tramadol. I explained that as a CII butrans can be called in and refilled. He was rushing so I gave him an initiation guide and formulary grid. I asked doc to review and try a patient. He asked about the cost. I explained that commercial patients can expect to pay about \$15 when given a savings card which he has. Reminded him of the oxycontin savings cards as well.
PPLPMDL0020000001	Parma	OH	44129	12/9/2011	Spoke with pharmacy intern & reviewed Butrans core messages. Discussed appropriate patient type & showed him patient information booklets. He said he has read about Butrans & has seen it on the shelves. Discussed ability for patients to take supplemental analgesia with Butrans in form of non-opioid or immediate-release opioid medications. Also reviewed savings via e-voucher as well as OxyContin savings cards.

PPLPMDL0020000001	Twinsburg	OH	44087	12/9/2011	NON-PRESCRIBER- Reviewed Butrans core messages with Dr Pla & reminded her of previous Butrans discussions. Spent time going over appropriate patient type, focusing on patients who are not well-controlled on tramadol. I asked how long she usually considers "chronic". She said a couple months. I asked if she has patients like the ones we have talked about & she said yes. I asked if she thought it was fair for me to ask her to try Butrans on some of those patients if they are not getting relief from their current medication. She said yes. Showed adverse events & asked if anything surprised her. She said no. Discussed managed care coverage & savings cards for those eligible. She said she would keep it in mind & asked to keep the initiation guide so that she could reference it when that appropriate patient presents. Also discussed favorable coverage for OxyContin on Medicare D
PPLPMDL0020000001	Twinsburg	OH	44087	12/9/2011	NON-PRESCRIBER- Reminded Dr Hillard of other conversations we have had about Butrans. Told him I understand that he does not do a lot of chronic opioid therapy but asked if he would agree that he does have some patients who he feels are appropriate for it. He said yes. Discussed appropriate patient type at length, focusing on those who are not well-controlled on tramadol of who he is considering sending to pain management. I asked if it was fair to ask him to try Butrans for a patient before referring them to pain management. He said this would be an area he would use it. Reviewed dosing & 3 strengths. He asked about use in the elderly & adverse events. Showed adverse events & asked if anything surprised him. He said no & that they were what he would expect with an opioid. He asked for a "dosing card". I handed him initiation guide & showed how it may help him choose the right starting dose, depending on the patient. Discussed Butrans as a CII opioid with abuse/addiction potential. He asked about managed care coverage. Discussed where access is most favorable for Butrans & reviewed savings cards. I asked if he would try Butrans on the patient type we discussed today & he said yes. He said he would keep the initiation guide on his desk so that it is in front of him to help him remember. Also discussed OxyContin q12h for appropriate patients beyond Butrans.
PPLPMDL0020000001	Twinsburg	OH	44087	12/9/2011	NON-PRESCRIBER- Introduced myself & Purdue's products to Dr LeBaron. Delivered 5 Butrans core messages & discussed appropriate patient type. Also discussed Butrans as a CII opioid with abuse/addiction potential & showed her box warning. She asked about using Butrans in the elderly. I told her Butrans can be used in the elderly & that she would want to use the same caution she would use with treating this population with other opioids. Gave her an initiation guide & discussed dosing.
PPLPMDL0020000001	Parma	OH	44129	12/9/2011	NON-PRESCRIBER- Dr Roheny said the person who he had prescribed Butrans for reported back to him that she "couldn't take Butrans". I asked him to elaborate. He said it "made her sick". I asked him to clarify but he did not tell me what "sick" meant. I asked him to tell me more about the patient & what they were taking before Butrans. He said 4 Percocet per day. I showed initiation guide & pointed out the taper to less than 15mg oxycodone before starting Butrans & explained. He said that is good to know & he was glad he told me about it. I asked him if this would deter him from identifying more Butrans patients to try. He said no. Reviewed appropriate patient type & discussed patients taking 3 tramadol or Vicodin per day who ask for an increase in dose or dosing interval. He said he would try to remember all of these details. Gave him portal invite & asked him to participate. Also discussed OxyContin as an option for patients beyond range for Butrans.
PPLPMDL0020000001	Garfield Hts	OH	44125	12/9/2011	NON-PRESCRIBER- I asked Dr Sadowski how I could help him remember Butrans when the appropriate patient presents. He said he is ready to prescribe it & just needs to have a patient who needs it come in. He added that he has read studies about how long-acting opioids & patches are effective in treating pain. He said there are many options to treat these patients. I asked him why not choose Butrans for those appropriate. He said he will when he gets a patient. Spent time with Deena reviewing patient type. She said she can think of multiple patients in his practice who could benefit from Butrans. I asked if she would start flagging the charts with patient information booklets or savings cards when she identifies one of these patients in effort to help remind Dr Sadowski when he is seeing that patient. She agreed. Also reminded Dr Sadowski of OxyContin q12h as another long-acting option for treating appropriate patients beyond Butrans range.
PPLPMDL0020000001	Cleveland	OH	44104	12/9/2011	discussed patient case studies with dr dr said she likes that Butrans is an option for patients and will keep it in mind but she doesnt have many patients on narcotics.dr said those taking narcotics are controlled and if they need more pain medicine dr said she sends patients to pain management.we talked about patients that are taking tramadol and at some point they may need something else.i asked dr to consider Butrans for those patients.dr committed to do this.i asked dr if she had 2 patients coming in today/this week that could be appropriate for Butrans? dr said she doubts it but she'll keep Butrans in mind.focused dr on commercial insurance patients.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44111	12/9/2011	Spoke with John, we reviewed the Butrans medication guide and I asked if he would let appropriate chronic pain patients know about Butrans as an option and he said he would. We discussed how to instruct apteints about proper use and application of Butrans. I reviewed that Butrans and OxyContin have savings cards to reduce the copays.
PPLPMDL0020000001	Cleveland	OH	44114	12/9/2011	i talked to dave,pharmacy manager,about importance of handing out patient info booklets to patients.showed booklet and we discussed application/rotation,side effects and disposal of Butrans.dave said patients do get medication guide with this info but he see's value in booklet as its colorful and tabbed for the patient to easily find information.I asked dave if he will hand these booklets to every patient that gets a Butrans script filled here?
PPLPMDL0020000001	Mayfield Heights	OH	44124	12/9/2011	dave said he will do that.i recommended Senokot-5
PPLPMDL0020000001	Westlake	OH	44145	12/9/2011	I asked doc if he is still getting good results from butrans. She said she is and she is loving butrans. She said it is on her "therapeutic tier" meaning she goes to butrans when patients say they have pain all the time and the dont ddo well on tramadol. I told her that is exactly where we'd like her to use butrans. I told her now butrans is being covered by caresource after frallure on tramadol/codeine/vicodin. She said that expands the potential butrans patients and that news was worth the visit to her. Thanked her for her support,
PPLPMDL0020000001	Cleveland	OH	44111	12/9/2011	Spoke with Darrel, He said that he has not had any Butrans patients in a while, he checked the computer and said that it's been since May since they've seen a script. We reviewed Butrans medication guide and I asked if he would let appropriate chronic pain patients know about Butrans as an option and he said he might if he knows the patient. We discussed the use of supplemental analgesia with Butrans. Reminder that OxyContin is an option when Butrans may not provide adequate analgesia.
PPLPMDL0020000001	Cleveland	OH	44111	12/9/2011	Quick call with Katie, we reviewed the medication guide and savings program for Butrans. We discussed the savings program for OxyContin.
PPLPMDL0020000001	Cleveland	OH	44111	12/9/2011	Quick call, I asked Dr if he would start just a few patients on Butrans who have more moderate chronic pain like the ones we discussed last time. He agreed.
PPLPMDL0020000001	Cleveland	OH	44109	12/9/2011	i talked to dr about how he explains Butrans to patients.dr said he tells patients Butrans is a pain patch and has once a week dosing and patients have to rotate the patch.i showed dr patient info booklet,we discussed application/rotation,side effects and disposal sections and i asked dr to share this info with patients.dr committed to do this.dr said he's still giving booklets to patients and will start patients on Butrans but he has a lot of Medicaid and isnt willing to do a PA for Medicaid/caresource patients. I asked dr if he has BWC and/or commercial insurance patients? dr said yes he does.i asked dr to start 2 patients with BWC or commercial insurance that he feels are appropriate,dr committed to do this.recommended Senokot-5
PPLPMDL0020000001	Mayfield Hts	OH	44124	12/9/2011	Quick call...reviewed the butrans indication and the 7 day delivery in a CII opioid. Told him that because it is a CII it can be called in or refilled. I asked doc if he has these types of patients in his practice. He said sure. I asked him to try butrans for one patient this week. Reminded him that it is covered on BWC.
PPLPMDL0020000001	Cleveland	OH	44109	12/9/2011	worked pm&r dept
PPLPMDL0020000001	Cleveland	OH	44104	12/9/2011	discussed patient case studies with dr,initiations presentation,dr said he started a few more patients recently on Butrans.i asked dr if these were his clinic patients here or nursing home? dr said these are all nursing home and patients are doing great on Butrans.i asked dr why he's not started anyone from the out-patient clinic? dr said most of his patients are medicare and he's not had luck getting Butrans approved.i asked dr if he has any commercial plan patients? dr said a few.showed dr formulary grid,discussed commercial plan patients trying Butrans.dr said he will keep Butrans in mind for them.we discussed Butrans as an option for his patients,right after tramadol,dr said he thinks thats a good place and will consider that.i asked dr if he'll start 2 patients today/next week on Butrans? dr said yes he will but only if insurance pays for Butrans.i recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44113	12/9/2011	showed dr BUP3015,discussed inclusion and exclusion criteria,dr focused on back pain patients,i asked dr if 30% reductions in pain were clinically significant? dr said yes that was impressive.i asked dr how his patients would feel about that? dr said if he saw improvements in patients general functioning and overall improvement in mood,he would be happy.dr said his concern is Butrans isnt covered on commercial plans.i asked dr why? dr said because his MA,Deb,couldnt get Butrans and she has UH.i explained to dr that Deb's UH coverage is under Prescriptions Solutions,under Premier Physicians and there is a PA in place so unfortunately Deb couldnt get the medication as she didnt meet the PA requirements.i asked dr if he had any anthem and medical mutual patients that would be appropriate for Butrans? dr said he has both of those plans so he probably does.i asked dr if he would start 2 patients today/next week on Butrans? dr committed to do this. recommended Senokot-5
PPLPMDL0020000001	University Heights	OH	44121	12/9/2011	Quick call...I discussed the butrans indication and other selling messages. I asked doc if he has any patients that may be taking traamadol or low dose vicodin that might benefit from a product like butrans. He said he is sure he does he would just have to remember the product. I told him him I would come around more frequently to discuss butrans. Gave him an initiation guide and a formulary grid.
PPLPMDL0020000001	Cleveland	OH	44109	12/9/2011	i asked dr how he decides if patients get a refill of their short-acting opioids or if another medications appropriate? dr said he looks at patients general functioning,mood,facial appearance,if patients say their short-acting opioids arent lasting long enough so they have to take more pills he's considering another medication for them.i asked dr if he'll start a couple patients right after tramadol fails to control the pain,on Butrans? dr said he'll consider it.dr said he only has 1 patient on Butrans but thats due to the fact he doesnt have a lot of patients taking narcotics. we discussed initiation and titration and focused dr on commercial insurance plans.recommended
PPLPMDL0020000001	Independence	OH	44131	12/9/2011	Spoke briefly with pharmacist Regina. Reviewed Butrans as a once weekly transdermal system of buprenorphine & inquired about stocking. She said they do not have it stocked at this time & that she was too busy with computer issues to talk today. She asked that I come back another time. Gave her PurdueHCP.com Butrans information.
PPLPMDL0020000001	Cleveland	OH	44109	12/9/2011	i asked dr what triggers him to start patients on Butrans? dr said when patients are taking tramadol or vicodin and not controlled asking him for more pills or telling him their pills arent lasting long enough,he's talking to them about Butrans.dr said its been easy to explain Butrans and patients are fine with a patch.dr said he gives some patients immediate release opioids for breakthrough pain and hasnt had any resistance from patients. dr said only challenge is getting Caresource to approve Butrans.we talked about PA for Caresource and i focused dr on BWC and commercial insurance patients.i asked dr if he'll start more patients today and next week,on Butrans? dr said he will do that.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44109	12/9/2011	i asked dr how he evaluates patients pain? dr said overall functioning and facial gestures.dr said he looks to see if patients are following through on physical therapy and exercise and are they taking their pain medications as prescribed.i asked dr how he knows when a change in medication is necessary? dr said when patients say their short-acting opioids arent lasting long enough or they are taking more than prescribed,thats when he'll look at another short-acting or consider a long-acting opioid.i asked dr if he would consider Butrans right after tramadol,fails to control patients pain? dr said he might but usually goes to vicodin.i asked dr to start 2 patients today/next week on Butrans,after tramadol doesnt control patients pain,dr said if insurance pays for it he'll consider Butrans.dr asked about Medicaid coverage.we talked about PA for Medicaid patients and i asked dr if he had BWC and commercial insurance? dr said he does but majority of chronic pain patients are Medicaid.i asked dr to focus on BWC and commercial insurance patients,dr said ok.we talked about OxyContin being an option for patients,showed formulary grid and i asked dr if he'll continue starting patients on OxyContin? dr said he will do that.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44109	12/9/2011	dr said she started a couple patients on Butrans.i asked dr why she chose Butrans? dr said 2 patients were taking vicodin and I was taking percocet for their chronic pain,they were asking for more pills saying their immediate release opioids weren't lasting long enough.dr said she wanted to try something different so she started them on Butrans.i asked dr how she explained Butrans to patients.dr said she told patients its a patch for their pain and they rotate the patch on 1 of the 4 application sites,once a week.i showed dr patient info booklet and asked her to discuss side effects,disposal,etc with patients.dr said she briefly talks to patients and then just hands them the patient info booklet.i asked dr if she has 2 patients this week,like the one's she's started,to start on Butrans focusing on BWC and commercial insurance patients? dr said probably so and she'll continue talking about Butrans to patients.recommended Senokot-5
PPLPMDL0020000001	Independence	OH	44131	12/9/2011	NON-PRESCRIBER- Quick call. Positioned Butrans for patients who are not well-controlled on chronic around-the-clock tramadol. Dr Rob said he would keep it in mind & walked into a room. Maria said Dr Rob is considering making the office a no-see. Reviewed Butrans & OxyContin savings cards with her. No savings cards were needed.
PPLPMDL0020000001	CLEVELAND	OH	44109	12/9/2011	i talked to Ron,Pharmacist,about the largest writers of immediate release opioids in the area.Ron said he gets a lot of scripts from Metro HCP's and some local:ron mentioned dr nickels,dr raheja,dr celeste and dr carson.i told Ron i work with these HCP's,showed Ron the visual aid and discussed 5 core selling messages.Ron said he's not seen any Rx here for Butrans but likes that Butrans is a patch.showed Ron patient info booklet and asked Ron if he'll recommend Butrans to patients that are taking short-acting opioids but not controlled? Ron said he will give booklets to patients.i told Ron by doing this patients can talk to their HCP's about Butrans. we discussed formulary coverage for Butrans-focus on commercial plans but discussed PA for Medicaid patients.recommended Senokot-5
PPLPMDL0020000001					

PPLPMDL0020000001	Mayfield Heights	OH	44124	12/9/2011	Quick call....I reminded doc that those newly referred patients taking tramadol or vicodin are ideal for butrans starts. I gave him a formulary grid and asked him to focus on the non-medicare patients and give a savings card. He said ok.
PPLPMDL0020000001	Lakewood	OH	44107	12/12/2011	Quick call with Chuck, we discussed the Butrans medication guide and he said he has been handing them out. He said he has a few patients on Butrans. We discussed that Butrans can be used with supplemental analgesia. I asked if he would hand out the medication guides to appropriate patients and let them know about Butrans as an option and he said he will.
PPLPMDL0020000001	Cleveland	OH	44107	12/12/2011	Spoke with Nick, I reviewed the Butrans medication guide and how to teach patients about the proper use and application of Butrans. I reviewed that Butrans is a CII and the use of supplemental analgesia with Butrans. I asked him if he would let appropriate chronic pain patients know about Butrans as an option and if they would give them a medication guide to hand to their Dr. He said that he would.
PPLPMDL0020000001	LAKEWOOD	OH	44107	12/12/2011	Spoke with Ronnie and tech, we reviewed that Butrans can be used with supplemental analgesia. I reviewed the medication guide and they still have some to hand out to the patients. I asked if they might let patients know about Butrans as an option to discuss with their doctor and they would if the patient asked about what other options they could try. Reminder that OxyContin is still a long acting option for patients taking short acting opioids around the clock.
PPLPMDL0020000001	Lakewood	OH	44107	12/12/2011	I reviewed the case studies with the Dr. He told me about a few patients that he started on Butrans but were taking more than 40mg of oxycodone per day. I let him know that it is important to titrate these patients down to 15mg of oxycodone per day before starting them on Butrans 10mcg. He said that he understood this and was going to continue to switch patients from percoet to Butrans. I asked what he likes about Butrans and he said that it is a CII and can be refilled so that patients don't have to come in. We reviewed when OxyContin may be an appropriate option.
PPLPMDL0020000001	Cleveland	OH	44109	12/12/2011	I asked dr how he decides if patients get a refill of short-acting opioid or if a long-acting opioid is appropriate. dr said he will usually give patients a couple refills but if he hears them say its not lasting long enough or they are calling the office early every month for refills, he may consider a long-acting opioid. I told dr he can choose Butrans for these patients. I showed dr BUP3015, opioid experienced clinical trial and we discussed inclusion and exclusion criteria and 30% reduction in pain. dr said he knows Butrans is available, he's giving booklets to patients and will be following up with them and he'll get there its just taking him longer to get patients started on Butrans. I asked dr if he'll start 2 patients this week, focused on BWC or commercial plan patients? dr committed to do this. focused dr on BWC and commercial insurance patients and recommended Senokot-5
PPLPMDL0020000001	Hudson	OH	44236	12/12/2011	Spoke with floater pharmacist. Discussed Butrans core messages & appropriate patient type. Focused on patients who are not well-controlled on tramadol around-the-clock. Presented patient information booklet & discussed how they can be used for patient counsel or given to patients who the pharmacist identifies as potential Butrans candidates based on their patient type. She said she likes to give out patient information when possible.
PPLPMDL0020000001	Cleveland	OH	44106	12/12/2011	Reviewed automatic savings for CVS customers through the e-voucher program & discussed OxyContin savings cards. dr said he has all of the clinical info that he needs on Butrans but doesn't have any patients in mind that he can start on Butrans at this time. dr said since he joined the anesthesia/pain management dept a few months ago, he's not prescribing a lot of narcotics. dr said he prefers surgical procedures for patients with chronic pain but will keep Butrans in mind. showed dr BUP3015, we discussed inclusion and exclusion criteria and the 30% reduction in pain. dr said he likes the data its impressive and will keep Butrans in mind when he see's appropriate patients. I asked dr if he had 2 patients this week that he could start on Butrans? dr said he didn't know but would consider Butrans if he deems it appropriate. focused dr on commercial plan patients and recommended Senokot-5
PPLPMDL0020000001	Hudson	OH	44236	12/12/2011	NON-PRESCRIBER- Re-introduced Butrans to Dr Chase, reviewing core messages. He said he has not prescribed it yet. Spent time going over appropriate patient type & range, including OxyContin as an option for patients beyond Butrans range. He said as a family practitioner, he does not see a lot of chronic pain conditions & tries to refer chronic pain issues to pain management when possible. Discussed once weekly dosing with the ability for patients to take supplemental analgesia if necessary. Also discussed titration ability after 3 days to a maximum of 20mcg. Discussed Butrans as a CII opioid with abuse/addiction potential & advised to only consider patients with legitimate pain. He said that it can be difficult to determine at times. I agreed that appropriate patient selection can be challenging. Reviewed managed care & savings cards.
PPLPMDL0020000001	Hudson	OH	44236	12/12/2011	NON-PRESCRIBER- Introduced myself & Purdue's products to Dr Margocs. She said she had not had any experience with Butrans so far. Delivered core messages & alerted her to the fact that Butrans is a CII opioid with abuse/addiction potential. Spent time going over appropriate patient type, focusing on legitimate pain patients who are not well-controlled on tramadol around-the-clock for a chronically painful condition. Discussed ability for patients to take supplemental analgesia with Butrans, titration ability after 3 days, & maximum dosage of 20mcg. Presented initiation guide to help reinforce appropriate patient range. She said she found the information to be "interesting". She added that usually they try to refer out if someone has a chronic pain issue & she does not have a lot of experience in dealing with this as she is still in her residency.
PPLPMDL0020000001	Cleveland	OH	44106	12/12/2011	I talked to dr about appropriate patients for Butrans. showed opioid experienced patients in visual aid. dr said he is only starting patients if fellows recommend Butrans to him because he forgets about it. I asked dr if he'll see a few patients this week that are appropriate. to start on Butrans? dr said he's sure he will. I asked dr to start 2 patients on Butrans this week. dr committed. recommended Senokot-5
PPLPMDL0020000001	Hudson	OH	44236	12/12/2011	NON-PRESCRIBER- Reminded Dr Russ of previous Butrans conversation & asked what his experience has been. He said he has not used it. Reviewed Butrans core messages & spent time going over appropriate patient type. Focused on patients for whom he prescribes tramadol 3 times per day who then want an increase in dose or dosing interval upon follow-up. Discussed considering a switch to Butrans for this type of patient. He said this makes sense. He asked what the maximum dose for Butrans is. I told him 20mcg is the maximum dose recommended. He asked if patients could put on a 20 with a 5mcg patch. I told him it is only recommended to use one system at a time at a maximum dose of 20mcg. Discussed Butrans as a CII opioid with abuse/addiction potential. Also reviewed managed care coverage & savings cards for Butrans & OxyContin. I asked if the type of patient we discussed today presents if he would feel comfortable prescribing Butrans & he said yes.
PPLPMDL0020000001	Hudson	OH	44236	12/12/2011	TRIALIST- Dr Tosino said he has a few patients on Butrans now & that one actually was just in. I asked him about the kind of feedback he has been given. He said the patient who just left is doing very well on it & is very happy with her results. I asked him what the patient had been on prior to making the switch to Butrans. He said she had tried a variety of different short-acting medications, none of which seemed to work for her. He added that she seemed like a legitimate pain patient so he offered Butrans to her to see if that would help control her pain. Dr Tosino said again that she is very happy with her results. I asked what dose he put her on & he said 5mcg. Discussed ability to titrate after 3 days if necessary to a maximum dose of 20mcg. I asked if he had other patients who presented like this one if he would write Butrans for them as well & he said yes. He also asked me for additional savings cards, which I provided. Also discussed savings cards for OxyContin.
PPLPMDL0020000001	Solon	OH	44139	12/12/2011	NON-PRESCRIBER- Quick call- Passed back Butrans portal invite & described interactive nature of the online programs. I asked him to log on as this could help him better position Butrans in his practice. He said he would take a look at it. Also reminded him of OxyContin favorable managed care coverage. He said he writes it "all the time".
PPLPMDL0020000001	Cleveland	OH	44104	12/12/2011	dr said she has 1 patient on Butrans and that patients doing great. told dr that was great and asked if she had more patients like this 1? dr said she probably does but most of her percoet patients dont want to try a patch for their chronic pain. I asked dr if she's shown the patient info booklet to these patients and discussed Butrans? dr said a few patients she's given the booklets to and she's following up in 2 weeks but others dont want to try a patch at all. showed dr visual aid, opioid experienced patients section and asked dr to start 2 patients on Butrans this week, focusing on commercial insurance. dr said she will consider it. recommended Senokot-5
PPLPMDL0020000001	Lakewood	OH	44107	12/12/2011	I asked what results he thinks his patients might expect to get from Butrans. He said he really didn't know since he hasn't tried it, I reviewed the opioid experienced clinical trial data and asked his thoughts on the reduction in pain scores. He said he thought it was significant and agreed to try Butrans on these patient types.
PPLPMDL0020000001	Parma	OH	44134	12/12/2011	REPEAT CUSTOMER- Dr Mandat said he is really getting good results with Butrans & has had a few new starts since our last discussion. I asked what type of feedback his patients have been giving him. He said they report good pain relief. He added that he just had a patient in today for whom he prescribed Butrans. He said that this patient was on dialysis, so he chose Butrans for him & he is doing very well on it. I asked if he would continue to prescribe & he said yes. Showed him savings cards & presented patient information booklet. Described how they can be used in discussing Butrans with a patient. He said they would be very helpful & asked me to leave a few. Also recommended Senokot-5 for opioid-induced constipation.
PPLPMDL0020000001	Lakewood	OH	44107	12/12/2011	I asked what the downside would be to his patients if he tried Butrans for them. He said that it's expensive and may not be covered. I reviewed that if he focuses on commercial insurance patients will have as low as \$15
PPLPMDL0020000001	Cleveland	OH	44113	12/12/2011	dale, PA, said he started 1 patient today on Butrans. I asked Dale why he chose Butrans? dale said patient was taking percoet, 2 pills a day, and not controlled asking for more pills so he started patient on Butrans. we discussed patient info booklet and focusing on application/rotation info with patients. Dale agreed to do this. I asked dale if he has more patients this week that he can start on Butrans? dale said he's sure he will today but dr shen is going on vacation from 12/13/11 - 12/27/11 so he wont be seeing that many patients who need a change in their opioid regimen. focused dale on BWC and commercial insurance patients. recommended Senokot-5
PPLPMDL0020000001	Lakewood	OH	44107	12/12/2011	I asked Dr if he sees any benefit of Butrans for his patients. He said the 7 dosing. I asked if he had a few patients on tramadol who are not well controlled who he can try Butrans on and he agreed.
PPLPMDL0020000001	Lakewood	OH	44107	12/12/2011	I asked her why she decided to try Butrans for the one patient that she started. She said that she sees it as another option instead of vicodin around the clock. I asked if she had other patients on tramadol whose pain is not well controlled who she can start on Butrans and she said she will keep it in mind. Reminder that OxyContin is an option when Butrans 20mcg dose not provide adequate analgesia.
PPLPMDL0020000001	Cleveland	OH	44113	12/12/2011	dr said she started a couple more patients today on Butrans, told dr that was great and asked if she'll start more patients today on Butrans? dr said yes she will as this is her last day of work until dec 27th. I showed dr butrans initiation guide and patient info booklet and asked her to continue starting patients and give booklets to patients showing application/rotation info. dr said she and nurses give booklets to patients and she'll continue starting patients. focused dr on BWC and commercial insurance patients. recommended Senokot-5
PPLPMDL0020000001	Parma	OH	44129	12/12/2011	NON-PRESCRIBER- Quick call- Dr Taylor saw me through the window & said she has not had anyone to put on Butrans yet but that she is keeping it in mind & is ready when someone comes in. Spoke with Mary & discussed savings cards for Butrans & OxyContin. Also told Mary about managed care coverage for both products. She said they have enough savings cards for now. She said she would let Dr Taylor know about managed care.
PPLPMDL0020000001	Cleveland	OH	44106	12/12/2011	worked apm dept
PPLPMDL0020000001	Cleveland	OH	44106	12/12/2011	showed dr BUP3015, inclusion criteria and asked dr about the pain conditions listed if there were any therapies he would like to replace? dr said not really he feels the opioids have a place in treatment of chronic pain but he prefers to try surgical procedures. dr said he has a few patients on narcotics and is considering Butrans for patients. I asked dr if he could start 2 patients this week on Butrans? dr said he will look and see who comes in to see him and yes he'll consider Butrans for patients. focused dr on commercial insurance plans. recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44106	12/12/2011	showed dr pg.11 visual aid and we discussed pain conditions that dr treats. dr focused on arthritis patients and back pain-majority of patients here. dr said he will give narcotics but always starts with short-acting opioids to see if that manages pain. I asked dr when does he choose a long-acting opioid? dr said when all short-acting opioids fail. I asked dr if he has any patients like the opioid experienced patients. showed this section in visual aid, that could be appropriate for Butrans? dr said he probably does and will consider Butrans. dr said its up to the attending HCP's to say Butrans is an acceptable option for patients so he'll recommend Butrans to the attending HCP's and see what they say. focused dr on commercial plan patients and asked dr if he'll start 2 patients this week on Butrans? dr said if patients insurance covers Butrans and attending HCP's approve he will do that. recommended
PPLPMDL0020000001	Lakewood	OH	44107	12/12/2011	Quick call, I asked Dr how the 2 patients he started on Butrans are doing. he said he has not heard any feedback yet. I asked what he will do if the patients say that they are not getting good pain relief and he said he will titrate. I reviewed that he can do this after 3 days. Reminder that OxyContin is an option when Butrans does not provide adequate analgesia.
PPLPMDL0020000001	Mogadore	OH	44260	12/12/2011	Dr said he has not written BLTrans and honestly doesn't remember & asked if I could review it again because it sounds like something he would like. I reviewed indication, dosing and titration. HE asked if this is less abuseable and I said it has the same potential for abuse as any other c3 medication and referred to section 9 in the FPI. HE said he would definitely write it if covered, I reviewed managed care and savings cards program he said he would write it definitely. I reviewed Oxycontin dosing and managed care coverage.
PPLPMDL0020000001	Cleveland	OH	44104	12/12/2011	I showed dr Butrans visual aid, discussed opioid experienced patients. dr said he started a few patients on Butrans. I asked dr why he chose Butrans for them? dr said patients were taking percoet every day for their pain but not controlled and were asking him for more pills, so dr wanted to try Butrans. we discussed initiation, titration and side effects of Butrans. I asked dr if he has more patients like this that he can start on Butrans today? dr said today's his last day and he wont be back till the new year. 2012. I told dr i would follow-up with him the 1st week in jan 2012. dr said that would be fine. showed formulary grid and focused dr on commercial insurance patients. dr asked about medicaid coverage, we discussed PA for medicaid. recommended Senokot-5

PPLPMDL0020000001	Cleveland	OH	44106	12/12/2011	dr said he started a couple patients on Butrans,dr hayekes patients,i asked why he chose Butrans for these patients? dr said patients were maxed on tramadol and he wanted to try Butrans before going to vicodin.dr said patients will be back in 2 weeks for a follow-up so he'll know more then.we talked about titration and discussing side effects with patients and giving them the Butrans patient info booklets,dr said he gives those to patients.i asked dr if he has 2 patients this week,like the one's he started,that he can start on Butrans? dr said probably so and he'll consider it.dr said biggest challenge is medicaid/caresource coverage.we discussed PA for caresource patients and i asked dr to continue focusing on commercial plan patients.dr said he would do that.recommended Senokot-S
PPLPMDL0020000001	Mogadore	OH	44260	12/12/2011	Dr said he is still writing Butrans as long as managed care allows him to. I asked what do you mean, are you having difficulties and he said sometimes. I said have those obstacles prevented you from writing as much and he said some. HE asked if there are any changes and I said Caresource is paying for Butrans as long as they failed one of the 4 short acting. HE said hopefully that is that easy. I asked are your patients getting the success and he said yes, o i said do you see any sense in going to Vicodin from Tramadol if the patient is chronic. HE said as long as insurance will pay. I asked if he is using supplemental analgesic and he said yes, in most cases. I reviewed dosing for Oxycontin and he said he has some patients on it but is done with patients escalating and always calling because they are out. HE would rather refer. I said there may be some that he feels comfortable with who he has been treating for years, I said for those, write Oxycontin
PPLPMDL0020000001	Cleveland	OH	44102	12/12/2011	i talked to Amol,Pharmacist,about Butrans 6 core selling messages.Amol said he's not seen any Rx for Butrans and probably wont until we get better coverage on medicaid plans.we talked about PA for medicaid and caresource patients.i asked Amol who are some of the biggest short-acting opioid writers in area? Amol said he wasnt comfortable sharing that info but would recommend Butrans to patients that are appropriate and give patient info booklets to them so they can talk to their HCP's about Butrans.i told Amol that would be great and appreciated it. confirmed OxyContin stocking and gave formulary grids.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44114	12/12/2011	i talked to Joel,Pharmacy Mgr,about Butrans 5 core selling messages.Joel said Butrans sounds like a great product but he see's all of the patients here with chronic pain only wanting their pills.Joel said its rare if patients want to stop their pills and try a patch.i showed Joel Butrans FPJ,section 2.4 maintenance of therapy section,and we discussed the fact that patients can take immediate release opioids or non-opioid therapy with Butrans,Joel said that was fine but until HCP's start prescribing Butrans,patients will keep asking for pills only. we discussed Butrans formulary coverage,showed grids and Joel said majority of patients are medicaid,we discussed PA for medicaid and caresource patients.Joel said he'll order Butrans when he see's the 1st Rx.confirmed OxyContin stocking,Joel said these are the same patients monthly getting their OxyContin so no new Rx for OxyContin.showed formulary grids and recommended Senokot-S
PPLPMDL0020000001	Lakewood	OH	44107	12/12/2011	I asked Dr if he sees Butrans benefitting any of his patients. He said that he feels that his patients will not want to give up their pills or pay the higher expense. I asked him to not switch any patients who are on a stable dose of short acting, but rather patients taking tramadol whose pain is not well controlled and they are looking for another option. I let him know that the expense is as low as \$15 per month and he said it was reasonable. I asked if he would try a patient who is looking for a medication adjustment and he agreed. He said that many of his patients are on higher doses of opioids and we discussed when OxyContin may be an option.
PPLPMDL0020000001	Mogadore	OH	44260	12/12/2011	Dr peaked into lunch and asked what is new and I asked if he had any new patients nad he said he tried someone but wastn sure if it went through or not, he hasnt heard back. I told him about Caresource COverage and criteria. HE asked about medicare and I said PA but he can write low dose Oxycontin, it is 2nd tier on CCRX and aarp
PPLPMDL0020000001	Cleveland	OH	44106	12/12/2011	i talked to Wes,Pharmacist,about Butrans 6 core selling messages and formulary status.Wes said i should follow-up with him in 2012 for another formulary review because right now the P&T committee wont add Butrans to the formulary.Wes said the P&T committee members were focused on acute pain patients as thats majority in the hospital so Butrans didnt have a place at this time.i talked to Wes about Pain management HCP's prescribing Butrans,showed formulary grids and we discussed PA for caresource patients.Wes said if more HCP's prescribe Butrans maybe the P&T committee will reconsider Butrans,at this time its still a NO. we discussed OxyContin stocking and Wes said the strengths they have in the hospital are all they can stock in the Ommi cell so they dont have room for more strengths.we discussed formulary coverage for OxyContin and i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44106	12/12/2011	i showed dr BUP3015,inclusion criteria and asked dr if she's treating these pain conditions? dr said yes they see everything here i asked dr how she chooses an opioid for patients? dr said she always starts with tramadol and when patients are maxed out on tramadol,200mg,she'll consider vicodin.i asked dr at what point is a long-acting opioid appropriate? dr said thats the last choice for her.dr said she believes in surgical procedures and not a lot of narcotics for patients.i showed 30% reduction in pain page,BUP3015,asked dr if that was clinically significant? dr said yes it is.i asked dr if its significant enough for her to start 2 patients on Butrans this week? dr said she'll consider it but thats up to the Attending HCP's to approve her choice.focused dr on commercial insurance plans and recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44106	12/13/2011	i talked to Steve,Pharmacy Mgr,nothing new learned about Butrans or OxyContin.Steve said they havent filled any Butrans scripts here but he's giving patient info booklets to those chronic pain patients that tell him their pain isnt controlled with their short-acting opioids and Steve tells patients to talk to their HCP's about Butrans.Steve said i could leave more booklets and follow-up in 2012. confirmed OxyContin stocking with Steve and Steve said not many new Rx for OxyContin,same patients monthly getting their OxyContin.i showed Steve OxyContin formulary grids for commercial and Medicare plans and Steve said he'll keep these for reference.i recommended
PPLPMDL0020000001	Cleveland	OH	44103	12/13/2011	i talked to Abdul,Pharmacist,nothing new with Butrans-no Rx yet,Abdul said he doesnt think many HCP's will write Butrans until medicaid coverage gets better.we talked about PA for medicaid and caresource patients.i asked about OxyContin if he's seeing any new Rx? Abdul said not really,mainly same patients every month nothing new with OxyContin either.showed formulary grids and we discussed appropriate patients for OxyContin.recommended Senokot-S
PPLPMDL0020000001	Westlake	OH	44145	12/13/2011	Spoke with Jenn, we discussed the medication guide for Butrans and how to instruct patients about how to use Butrans. I reviewed that Butrans can be used with supplemental analgesia and that Butrans is a CII and can be called in. I asked if she would let appropriate pain patients know that Butrans is another option and she agreed. We reviewed that OxyContin is an option when Butrans may not provide adequate analgesia.
PPLPMDL0020000001	Brooklyn	OH	44144	12/13/2011	Spoke with David (pharmacist/manager). He said he has seen some movement of Butrans at this location & that they stock all 3 strengths. Reviewed with him the appropriate patient type, focusing on patients who take chronic short-acting opioids around-the-clock. Asked if he had patient information booklets on hand- he checked his shelf & said he does have some. Showed him a booklet & discussed how it can be used with patients who have a prescription for Butrans or for those who he thinks could benefit from Butrans based on their patient type. I asked if he would do this. He agreed. Discussed OxyContin & savings cards. He said he does not have anyone on it regularly & does not dispense very much of it. He added that he has some cards & will give them out when he gets a prescription.
PPLPMDL0020000001	Westlake	OH	44145	12/13/2011	Spoke with Lisa, I reviewed our last conversation and asked if she was able to let any patients know about Butrans as an option, she had not yet. I asked if she would just let any appropriate patients know that Butrans is another option that can talk to their doctor about and she agreed. We discussed that OxyContin is an option when Butrans does not provide adequate analgesia.
PPLPMDL0020000001	Parma	OH	44129	12/13/2011	NON-PRESCRIBER- Dr Jugulion said he had attended a convention about 6 months ago & Butrans was the topic of one of the lectures. He said he found it to be very interesting although he does not prescribe any narcotics. He said he got "burned" early in his practice by a patient who was addicted to morphine. I agreed that caution has to be exercised in prescribing opioids & that one should take all measures possible to protect one's practice. Also discussed importance of appropriate patient selection. He said he remembers learning from the lecture that Butrans isn't as abuseable as other narcotics. I told him that Butrans is a CII opioid & does carry abuse/addiction potential. I asked him to be just as cautious in prescribing Butrans as he would with any other opioid medication. Showed him a demo patch & discussed structure of the patch, including adhesive matrix. Also discussed OxyContin as an option for patients beyond the appropriate range for Butrans.
PPLPMDL0020000001	Cleveland	OH	44113	12/13/2011	i talked to dr about patients that are opioid experienced,not controlled and considering Butrans as an option,showed BUP3015 opioid experienced clinical trial,dr said he started 1 patient today on Butrans.i told dr that was great and asked why he chose Butrans? dr said patient was taking vicodin,not controlled and dr thought this patient would be willing to wear a patch and remember to rotate patch once a week.showed dr patient info booklet,asked if he discussed this info with patient? dr said he talked a little bit to patient about 4 application sites on each side of body but Stephanie,MA,discussed the booklet sections with patient.i asked dr if he has 2 more patients,like this 1,that he can start on Butrans this week? dr said he will keep looking,every day he looks to see who could be appropriate and gives patient info booklets to patients so he thinks thats helping met with Denny to plan for call on Ron Wheeler and we filled out paperwork for February promotion. Denny and I then called on Ron Wheeler at DDM to discuss 2012 plans and February promotion as well as to get planogram corrected and move Colace to a lower shelf. See Ron Wheeler (Discount Drug Mart) notes.
PPLPMDL0020000001	Cleveland	OH	44113	12/13/2011	dr said he started 1 patient on Butrans,nursing home patient,got coverage and patient's doing well.i asked dr if he had commercial insurance patients that are taking short-acting opioids daily but not controlled? dr said yes.i showed dr opioid experienced patients,visual aid,asked dr if he has 2 patients like this that he can start on Butrans this week? dr said he will think about it and see who comes in this week.dr said it all depends on insurance and he wants to make sure commercial plans cover Butrans,i showed dr Butrans formulary grid and we discussed patient savings card program for commercial plan patients.recommended Senokot-S
PPLPMDL0020000001	Stow	OH	44224	12/13/2011	Dr said he has used Butrans, I asked him how often he sees patients who come in on short acting a week who are ready for a medication change and he said he sees patients all week long like that. I asked him, now that there is Butrans, why would he go to Vicodin and he said that is a good point. I said when he sees patients likethat, can he fit Butrans in and he said yes. He asked what is the coverage and I told him about Caresource, commercial and BWC. I also spoke with Lisa in BWC and she said she has not seen any PAs for BWC.
PPLPMDL0020000001	Cleveland	OH	44113	12/13/2011	worked offices in hospital -lunch with dr farooqi,spoke with dr sharma and dr bhimani
PPLPMDL0020000001	Cleveland	OH	44195	12/13/2011	worked spm dept-left BUP3015,initiation guide,formulary grid and my business card for dr rosenquist,dr vrooman,dr mekhail and dr stanton-hicks as i couldnt see any HCP's. worked chronic pain-left SAME info for dr covington and dr mathews; worked neurology dept-left dr bamford same info as above with patient info booklets
PPLPMDL0020000001	Lyndhurst	OH	44124	12/13/2011	Spoke to Megan about the stocking and movement of butrans. She said she really had not seen that much. I asked if she knows if patients have gotten it refilled. She said not that she recalled but maybe another pharmacist has. She has not seen one in a few months. I explained the positioning, supplemental analgesis, and the savings cards. She has not had any issues with oxycontin and still sees plenty of it.
PPLPMDL0020000001	Cleveland	OH	44130	12/13/2011	TRIALIST- I showed Dr Diab the Butrans formulary grid & told him that patients on all these plans could get Butrans for an average of \$15 if using the savings cards he has. Also showed OxyContin grid & let him know that OxyContin is covered on over 90% of lives nationally. He said this was good, thanked me, & walked into a room.
PPLPMDL0020000001	Cleveland	OH	44130	12/13/2011	TRIALIST- Dr Fedorko said he thought he had some good Butrans news for me but he forgot what it was. He added that he did just put someone on it. I showed him the savings cards with patient information guide & reminded him to give them out to patients. Also reminded him of favorable managed care coverage for commercial plans. He said he would try to remember who he put on Butrans so he could tell me about them next time. Also showed OTC samples & recommended Senokot-S for opioid-induced constipation.
PPLPMDL0020000001	Westlake	OH	44145	12/13/2011	I asked Dr what he likes about Butrans, he said that it really works for some patients. I asked if he had a few new patients to start this week and he said he will keep Butrans in mind.
PPLPMDL0020000001	Cleveland	OH	44114	12/13/2011	dr said she's continually starting patients on Butrans and is happy so far with the clinical results.i asked dr who are the patients she feels are appropriate for Butrans? dr said patients taking a couple vicodin or percocet that are asking for more pills,she's talking to them about Butrans and starting them.i asked dr if she will start a few more patients this week on Butrans? dr committed to do this and i focused dr on BWC and commercial insurance plans.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44143	12/13/2011	I tried to ask doc about his experience with prescribing butrans. He said he did not have time to talk ans asked me to leave him some info. I provided him a copy of the opioid naive clinical trial and reminded him to focus on non-medicare patients.
PPLPMDL0020000001	Brooklyn	OH	44144	12/13/2011	Quick call with Michele. She said she has not had any movement with Butrans. Discussed insurance coverage & BWC as well as automatic savings for eligible customers through the e-voucher. Also reviewed OxyContin savings cards but Michele said they did not need any more at this time.
PPLPMDL0020000001	Cleveland	OH	44114	12/13/2011	dr said he's starting more patients on Butrans every week and patients are doing well.dr said these are patients taking a couple vicodin or percocet every day but not controlled and asking him for more pills,so he's not refilling the short-acting opioids and is telling patients Butrans is their option.i focused dr on application/rotation info-patient info booklet and asked dr to focus on BWC patients.dr said he is doing this but there are some medicaid patients he would like to start on Butrans,we discussed PA for medicaid and caresource patients.i asked dr if he has more patients he can start on Butrans this week,dr said yes he does.recommended Senokot-S
PPLPMDL0020000001	Euclid	OH	44117	12/13/2011	Quick call....i reminded doc of his commitment last week to prescribe butrans for those patients on tramadol and no longer control. He said he is going to and he tried to write for one patient but they did not want a patch. He said he will keep trying. Told him that after 300mg of tramadol 10mcg of butrans would be a good starting dose.



PPLPMDL0020000001	Westlake	OH	44145	12/13/2011	I asked Dr if he continued to get good feedback from his Butrans patients. He said he has. I asked about how many patients he currently has on Butrans and he said a couple. I asked if he thinks that more patients would benefit from Butrans and he said yes, he will look for some new patients to that might benefit.
PPLPMDL0020000001	Cleveland	OH	44129	12/13/2011	LOYAL CUSTOMER- Quick call- Caught Deb at the Parma office. She said she has been starting more patients on Butrans & has had success. She said she plans to continue doing this. Spoke with Dawn, manager, & discussed this location's schedule. Deb will be coming in January on Monday's permanently with Caryn working Tuesday/Thursday & Mayra working Wednesday. Dawn said she will try to remind each of them of Butrans where
PPLPMDL0020000001	Cleveland	OH	44103	12/13/2011	I talked to dr about her opioid experienced patients that could be appropriate for Butrans,dr focused on her percoct patients.dr said she's starting patients on Butrans almost weekly depends on her getting PA's approved by medicaid.I asked dr if she had a couple patients this week that she could start on Butrans,focusing on her commercial plan patients? dr said she will do that but majority are medicaid so she'll have to do the PA's for these patients to get Butrans.we talked about initiation and titration,showed visual aid for discussion,we talked about OxyContin being preferred on UHC/AARP which is a top plan for dr,I asked dr if she'll choose OxyContin for her UHC/AARP patients? dr said she will know its the lowest branded copay,showed formulary grid.recommended Senokot-5
PPLPMDL0020000001	Stow	OH	44224	12/13/2011	Abby just got her prescribing license finalized last week and has only been prescribing this week very little due to computers down. I reviewed Butrans again, dosing and titration and patient type. She said she has not been using BUTrans but nothing of anything else either. She said she will be seeing mainly follow up patients and refilling their meds. I said she will then be seeing when the patients will need medication changes. I said when patient is on Tramadol, instead of going to Vicodin she can go to Butrans,. She said she will keep Butrans in mind.
PPLPMDL0020000001	Cleveland	OH	44195	12/13/2011	dr said he's starting more patients on Butrans and is seeing good results.I asked dr why he's choosing Butrans? dr said some patients are taking vicodin and others percoct for their pain and its not controlling the pain so he's trying Butrans.I showed BUP3015,we discussed opioid experienced clinical trial and I asked dr if he would continue starting patients on Butrans this week? dr said yes he would.we discussed initiation and titration of Butrans,I focused dr on commercial and BWC patients.dr asked about OxyContin insurance coverage,I showed formulary grids,left savings cards and asked dr if he'll start a few patients on OxyContin this week? dr said yes he will but he doesn't start a lot of patients on OxyContin.I recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44113	12/13/2011	I talked to dr about Butrans being an option for his opioid experienced patients,showed BUP3015 and discussed inclusion and exclusion criteria,dr said he has a lot of patients on vicodin that he would like to start on Butrans but not every patient wants to try a patch.I asked dr to discuss Butrans with 2 patients,focusing on commercial insurance,show patients the patient info booklet and start them on Butrans this week,dr committed to do this.we discussed initiation and titration of Butrans and I recommended Senokot-5
PPLPMDL0020000001	Parma	OH	44134	12/13/2011	LOYALIST- Dr Hernandez told me again about the patient who had been on Opana who is getting good results with Butrans 20mcg. He said he was pleasantly surprised at the success. He added that Butrans is working for his patients so he likes prescribing it & will continue to do so. Discussed titration. Dr Hernandez said he does not believe that a patient would get "breakthrough pain". He went on to say that if a patient is experiencing pain while on a medication, that patient is not on the right dose of their medication. He said that if a patient he starts on Butrans or OxyContin reports that they need something for breakthrough pain, he simply titrates the patients dose of Butrans or OxyContin to the next higher dose & that resolves the breakthrough pain reported by the patient. I agreed that titration & frequent discussions between physician & patient should occur. Dr Hernandez said again that he will keep using Butrans & OxyContin.
PPLPMDL0020000001	Richmond Heights	OH	44143	12/13/2011	Window call...I asked doc if he has any patients that are taking tramadol as monotherapy for their pain on a daily basis. He confirmed that he did. I asked him how high he titrates those patients before going on to another product. He said it depends. I asked him to consider going to butrans after failure on tramadol and instead of going to maybe vicodin. He said he would look at 'it'. Gave him study on opioid experienced patients and gave a formulary grid. Let him know that Caresource will cover butrans with a PA after tramadol. Gave an oxycontin formulary grid also.
PPLPMDL0020000001	Stow	OH	44224	12/13/2011	janet is new PA and just started this week so has not finished all paper work and has not prescribed yet. I reviewed Butrans indication, dosing and titration, patient types and managed care coverage. She said she is going to be doing most of the BWC there and patient follow ups and said that she sees this as something she can write. I said I will follow up to see if she has had any questions.
PPLPMDL0020000001	Cleveland	OH	44113	12/13/2011	dr said he's been giving Butrans patient info booklets out but hasn't started anyone yet,I told dr that was great and asked when he's following up with these patients? dr said in 2 weeks so he'll talk to patients and see if they want to try Butrans.dr asked about insurance coverage for Butrans? I showed dr Butrans formulary grid and we discussed patient savings cards for commercial plan patients.I asked dr if he had 2 opioid experienced patients,showed visual aid,that aren't controlled on their short-acting opioids? dr said he has a lot of chronic pain patients that are taking short-acting opioids daily and not controlled.I told dr that's where Butrans could be an option.we discussed initiation and titration of Butrans and I asked dr if he could start those 2 patients on Butrans this week? dr said he's working this week,then on vacation 2 weeks till the new year,so he'll see what he can do.I focused dr on Commercial plan patients.dr asked about medicaid or caresource coverage,we discussed PA for both plans,recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44114	12/13/2011	John,PA,said he and dr marshall are continually starting more patients on Butrans,I asked John what triggers him to choose Butrans for patients? John said when patients are taking 1-2 tabs a day of vicodin or percoct and that dosing regimen isn't controlling the pain,he talks to patients about Butrans and starts them. we talked about initiation and titration of Butrans,showed visual aid with this info and I asked John if he'll start more patients this week? John said he will do that.I focused John on BWC patients.recommended Senokot-5
PPLPMDL0020000001	Akron	OH	44307	12/13/2011	Dr. Brown's clinical experience in sleep therapies, my role as a Medical Liaison with Purdue Pharma, possible future collaborations<hr>Telephone call to Dr. Brown to renew acquaintance and discuss his background in sleep therapy. He has a very strong ambulatory care program at Akron General; pharmacists in the Ambulatory Care service did all of the medication management (including sleep therapies) under a collaborative agreement. I described my role as an ML with Purdue Pharma. Dr. Brown is open to discussing possible future collaborations.
PPLPMDL0020000001	Cleveland	OH	44124	12/13/2011	Window call...Reminded doc of the butrans CII status, 7 day delivery and the positioning after tramadol failures. I asked him to try just one patient on butrans who may be failing on tramadol. I asked him to log onto the butrans portal to learn more about it. He said he would see. He need oxycontin savings cards.
PPLPMDL0020000001	Richmond Heights	OH	44143	12/13/2011	Spoke to tech, Katrina, about the movement of butrans. She said that they have a couple of patients on it regularly and come in for refills. I asked her if she recalls the use of a savings card. She did not but also does not recall they copays being too high. I explained the savings with the card and the availability online. Pharmacist was busy but gave and FPI for him.
PPLPMDL0020000001	Stow	OH	44224	12/13/2011	Dr said he mainly does procedures. I asked if there is any cases where he does the prescribing and he said no, he cannot take the time to review medications with them, he is only doing injection and going through that with the patients. HE said he was just talking about Butrans at their meeting last night and he said they were talking about adding Buprinorphine to their drug screening.
PPLPMDL0020000001	Mayfield Hts	OH	44124	12/13/2011	Quick call....I asked doc how much medicaid he sees in his practice. He said he has some as well as medicaid. I told him that while butrans may still be restricted with medicare, Caresource will pay for butrans after failure on tramadol. He said "really?" and he the would have to remember that. Left formulary grids for butrans and oxycontin
PPLPMDL0020000001	Parma	OH	44129	12/13/2011	NON-PRESCRIBER- Reminded Dr Moysaenko of previous lunch conversation about Butrans & refreshed his memory on core messages. Discussed once weekly dosing & delivery of buprenorphine over 7 days. He asked how Butrans compares with fentanyl. Showed initiation guide pg 6, letting him know patients on fentanyl were excluded from studies. Went over appropriate Butrans patient range, discussing OxyContin as an option for patients beyond Butrans. He asked what the street value is. I told him I did not have information on this but reminded him that Butrans is a CII opioid with abuse & addiction potential & advised him to use caution when prescribing. He agreed. He asked about insurance coverage. Discussed favorable coverage on commercial insurance plans. He asked if it was on formulary at the hospital. Let him know I am working on it & that the hospital has ordered Butrans before. I asked if it was fair of me to ask him to try some of the types of patients we reviewed today on Butrans & he said he would do that.
PPLPMDL0020000001	Stow	OH	44224	12/13/2011	I asked Dr what success stories is he seeing with his patients and he said the patients like Butrans and are doing well. HE said as long as insurance covers it. I asked which ones are not and he said medicare and I said they are going to be mainly PA> I asked how much of his practice is commercial and he said 50%, reviewed managed care with them as well as Caresource. HE said they only see Caresource. He said when a patient is on 4 pills a day, that is when he will switch to long acting. Barry said why not change when they are on 2 pills of Hydrcodone or when they are on Tramdol and ready for medication switch and he said that is possibility. I asked how often is he seeing patients who are on short acting and are ready for medicaiton change and he said all of the time. HE said alot of his patients are on higher doses and are not appropriate for Butrans and I said no they are not. HE said he is happy with it and will continue to write.
PPLPMDL0020000001	Westlake	OH	44145	12/13/2011	Introduction to Dr Yonan, he was already familiar with Butrans and said that he just started a new patient yesterday. I asked him to tell me about the patient and he said they were taking vicodin around the clock. I asked what he likes about Butrans and he said that he is finding that patients do not get a high from Butrans. I let him know that we have no data to support that, and that Butrans is a CII with risk of abuse and addiction. He said these are his thoughts from his clinical experience. He had questions about the savings program and that the patient that he started was on Anthem. He did not give her a savings card. I reviewed that patients can go to Butrans.com to print out a savings card and he was going to call the patient to make sure she gets \$40 off her copay. We discussed the OxyContin savings program and well as managed care coverage.
PPLPMDL0020000001	Parma	OH	44129	12/14/2011	REPEAT CUSTOMER- Followed up with Dr Chagin regarding the pain management assessment tools information he requested from me at my last lunch. Discussed PartnersAgainstPain.com & reviewed with him the resources that are available to him as a health care provider. He asked me about House Bill 93. I told him I did not know of the specifics but encouraged him to go online to Partners Against Pain site to get resources & tools to help him with pain management & protecting his practice. Also reviewed Butrans appropriate patient type & reminded him of savings cards available for eligible patients should someone present today or tomorrow. Finally, reminded him of OxyContin as an option for patients beyond that Butrans appropriate range. He thanked me for the resources & information & went into a room.
PPLPMDL0020000001	Westlake	OH	44145	12/14/2011	Quick call, I asked Dr if he had given Butrans another try for patients taking tramadol like we discussed last time. He said that he has not but he agreed to to find some appropriate patients.
PPLPMDL0020000001	Garfield Hts	OH	44125	12/14/2011	Spoke with Heather & reviewed Butrans core messages, reminding her of what Butrans is & who it is for & not for. She said she has seen it on the shelves but has not yet dispensed any herself. Spent time going over the appropriate patient type, focusing on patients who take tramadol 3-4 times per day chronically or those on low-dose Vicodin. Discussed once weekly dosing & automatic savings through e-voucher program for eligible CVS customers. Also discussed OxyContin savings cards but she said they did not need any at this time.
PPLPMDL0020000001	BEDFORD	OH	44146	12/14/2011	Spoke with pharmacist Marcus. He said he sent Butrans back as it was not moving but he will order it if he gets a prescription. I asked him if he fills a lot of prescriptions for short-acting opioids taken by patients chronically. He said yes & added that most patients are taking Percocet. I asked what about patients taking 3-4 tramadol or Vicodin per day. He said he fills a lot of those. Reviewed with him appropriate patient type & range. I showed him patients information booklet with him & discussed how it can be used for patients who have a prescription or those who he identifies as potential Butrans patients based on their patient type. He agreed that this would be a good idea as he knows of some patients who could benefit from Butrans. Discussed OxyContin 7 tablet strengths, all of which he says he stocks. Also reviewed savings cards but he did not need any at this time.
PPLPMDL0020000001	Bedford	OH	44146	12/14/2011	REPEAT CUSTOMER - I asked Dr Moufawwad when he was going to prescribe Butrans. He said he is planning on prescribing Butrans now as he is "expecting good news this week." He did not indicate what type of news this was that would impact his prescribing. Reviewed appropriate patient type with him & reminded him of savings cards available for Butrans & OxyContin.
PPLPMDL0020000001	Maple Heights	OH	44137	12/14/2011	NON-PRESCRIBER- Caught Dr Gene at the window for a quick call. I passed back a Butrans initiation & titration guide & let him know it would be a useful tool in identifying potential Butrans patients. Also reminded him of the appropriate patient type, positioning Butrans for patients who are not well-controlled on 3-4 tramadol per day. He thanked me & said he would have a look through the guide.
PPLPMDL0020000001	Cleveland	OH	44113	12/14/2011	I talked to deb,PA,about the patients she's starting on Butrans.deb said most patients are taking 4-5 pills,vicodin 5/325,a day and when they tell her their pain isn't controlled,she's starting them on Butrans and giving some vicodin for breakthrough pain.I showed BUP3015,we discussed opioid experienced patients clinical trial and I asked Deb if she'll start more patients this week on Butrans? deb said she will do that. Deb said only challenge is insurance,she's not getting Butrans approved,after the PA for her Caresource patients.I asked Deb to focus on BWC and commercial insurance.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44113	12/14/2011	dr said he started another patient on Butrans this week.dr said he's waiting for medicaid approval of the PA.I asked dr if he had BWC and commercial patients that he could start on Butrans this week? dr said he's sure he does and will continue starting patients.I showed patient info booklet to dr and asked dr to give these booklets to patients when he starts them on Butrans,dr said he does that and will continue.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44109	12/14/2011	talked to Debbie,RN,for Dr.Forde about patients that are appropriate for Butrans,showed BUP3015,and asked Debbie if she saw a place for Butrans in dr forde's practice? Debbie said absolutely but it comes down to insurance.Debbie said a lot of patients have medicaid here,we discussed PA for medicaid patients and I asked debbie if she could talk to dr forde about 2 patients that she knows are appropriate for Butrans and start them? debbie said yes she will do that.showed formulary grid and gave Debbie the "Discover" invite and web conferences for dec 2011 on Butrans.

PPLPMDL0020000001	Cleveland	OH	44113	12/14/2011	i talked to dr about BUP3015, discussed opioid experienced patients clinical trial, asked dr if she's seeing these types of pain conditions? dr said yes. showed 30% clinical reduction, asked dr if this was clinically significant? dr said yes it is. i asked if its enough for her to start 2 patients on Butrans? dr said she will consider it. dr said its tough for a lot of patients to try a patch because they only want their pills. i showed dr FPI, 2.4 maintenance of therapy, told dr that she can give immediate release or non-opioid therapies with Butrans, dr said ok she'll consider that. i focused dr on BWC and commercial insurance patients. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	12/14/2011	dr said she started a patient on Butrans and patient was excited to try Butrans so dr is happy and is going to think of more patients to discuss Butrans. i asked dr why she chose Butrans? dr said patient was taking 2 percoct daily, not controlled and asking for more pills so she wanted to try Butrans. dr said this patient was open and willing to wear a patch for a week and will remember to rotate the patch every week. dr said not every patient is that reliable. i talked to dr about Butrans patient info booklet, dr said she gives this to patients and it really helps educate them. i asked dr if she has 2 more patients like this 1, to start on Butrans? dr said probably so and it depends on insurance. i focused dr on BWC and commercial insurance patients, dr said ok she'll look to see who comes in this week. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44106	12/14/2011	i talked to dr about patients that are opioid experienced, showed visual aid, asked dr if he see's these types of patients often? dr said yes all the time. i asked dr if he's considering Butrans for them? dr said some patients he is but insurance is a big factor. i showed dr formulary grid, focused dr on commercial insurance patients and asked if dr has 2 patients with commercial insurance that he can start on Butrans this week? dr said he didnt know but will keep thinking of Butrans. dr said he knows Butrans is available. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	12/14/2011	worked out-patient pharmacy and pm&r dept- saw dr huang
PPLPMDL0020000001	Cleveland	OH	44113	12/14/2011	dr said he's still starting patients on Butrans, i asked dr who is the appropriate Butrans patient? dr said patients taking 4-5 pills, vicodin 5/325, daily and not controlled. dr said these are the patients that he starts on Butrans and gives some vicodin for breakthrough. dr said he knows Butrans is another option for his chronic pain patients and he'll continue talking to them about it. i asked dr if there were any drawbacks with starting patients on Butrans? dr said only drawback is insurance and he has a lot of caresource, dr said caresource hasnt been approving Butrans with the PA and now caresource wants a PA for every medication, monthly. dr said its very frustrating to treat patients when he cant prescribe what he feels is best for patients. i asked dr if he'll start 2 patients on Butrans, this week, focusing on BWC and commercial insurance? dr said he will do that if patients are willing to try Butrans and as long as insurance pays for Butrans. i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	12/14/2011	dr said he's not started anyone on Butrans but knows its available. i asked dr whats preventing him from starting patients on Butrans? dr said a lot of patients dont want to wear a patch for their pain and like their pills. we talked about FPI, section 2.4 maintenance of therapy and i told dr he can give immediate release or non-opioid therapies with Butrans. dr said ok he'll think about it. dr asked about medicaid coverage. we discussed PA for medicaid and i asked dr if he will start 2 patients on Butrans, focused on BWC and commercial insurance, this week? dr said if patients are willing to wear a patch and insurance covers Butrans, he'll start a few
PPLPMDL0020000001	Cleveland	OH	44106	12/14/2011	i talked to dr about his patients taking tramadol daily for their chronic pain and i asked dr if he would consider Butrans right after tramadol? dr said he would consider that if insurance covers Butrans. i asked dr if he'll start 2 patients today on Butrans, focusing on commercial insurance? dr said he will keep talking to patients about Butrans and will do his best to start a couple patients. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44122	12/14/2011	worked pain management dept
PPLPMDL0020000001	Warrensville Heights	OH	44106	12/14/2011	NON-PRESCRIBER- Showed Dr Zivic a demo patch. He said that actually the patient who was in one of his exam rooms would be a good candidate for Butrans clinically, but that she has Medicare Part D insurance. Reviewed managed care coverage, focusing on commercial insurance plans. Reminded him that OxyContin has favorable Medicare Part D coverage. He said he would keep that in mind & then walked into a room.
PPLPMDL0020000001	Cleveland	OH	44109	12/14/2011	i talked to Chris, Pharmacist, and confirmed Butrans stocking. Chris said a few Rx for Butrans have come from Family Medicine and Pain management but majority are coming from PM&R and its mainly dr greenwood. i discussed 6 Butrans core selling messages with Chris and i asked Chris if he would continue giving patient info booklets to those patients getting their scripts for Butrans. Chris said they give them out and will continue doing that. i showed Chris Butrans formulary grid, focused on commercial plans but Chris asked about BWC and medicaid patients so we talked about these plans. confirmed OxyContin stocking and we discussed formulary coverage. i asked if Rob, Pharmacy manager was available to see me? Chris said he was in a meeting and i could try back Friday and check in then or call Rob for an appointment. i recommended Senokot-S
PPLPMDL0020000001	Westlake	OH	44145	12/14/2011	Quick follow up, i asked if he had heard any feedback from the patient that he started and he said he has not. i let him know to keep me posted on managed care and how the patient is doing as i want to make sure everything goes smoothly and managed care is covered.
PPLPMDL0020000001	Cleveland	OH	44113	12/14/2011	i talked to Mike, Pharmacy Mgr, about 6 Butrans core selling messages. Mike said he's not seen any patients with Butrans on at this facility, but thinks its a great option for patients. Mike said to keep him updated on any insurance changes, if medicare covers Butrans in 2012. mike said CME courses are always a plus for him and his pharmacy staff. i told mike to go to the website purdue's medical education catalog, mike said he will look at that.
PPLPMDL0020000001	Parma	OH	44129	12/15/2011	Spoke with floater pharmacist Heather. Reviewed Butrans core messages with her & discussed appropriate patient type/range. Focused her on patients who are taking chronic short-acting around-the-clock opioids, especially if they comment to her that they are not getting adequate relief. Discussed dosing & titration up to a maximum 20mcg. i showed her patient information booklets, discussing how they can be used in patient counsel & asked her to leave them for Fred. She agreed. Also discussed automatic savings through e-voucher as well as OxyContin savings cards.
PPLPMDL0020000001	Westlake	OH	44145	12/15/2011	Dr complained to me that he is trying to get his patients to try Butrans, but they say they do not want a patch and they want to keep all of their pills. i discussed that he could start patients on Butrans before they ever start taking vicodin around the clock and he agreed but said that he does not have many patients like this. Dr said that he will keep trying and will be strict in not allowing his patients to titrate their dose of short acting and only offer Butrans as another option. We discussed that OxyContin may be an option for many of his patients as well.
PPLPMDL0020000001	Cleveland	OH	44109	12/15/2011	dr said he's trying to start patients on Butrans but medicaid isnt approving the PA's, dr said he's frustrated. i asked dr who are the appropriate patients for Butrans? dr said patients taking a couple vicodin or percoct every day that arent controlled and asking him for more pills. dr said he talks to patients about Butrans at that point and if insurance covers Butrans he'll start them. i asked dr if he had 2 patients this week that he could start on Butrans, focusing on BWC or commercial insurance plans? dr committed to do this. recommended Senokot-S
PPLPMDL0020000001	South Euclid	OH	44121	12/15/2011	Window call. i reminded doc of the butrans 7 day delivery of analgesia and that it can be called in and or refilled. i asked her if she will give it another try for an appropriate patient instead of going to hydrocodone
PPLPMDL0020000001	Parma	OH	44129	12/15/2011	ATC. She said she would try to give it another try. Gave her a formulary grid and asked her to focus on those patients.
PPLPMDL0020000001	Cleveland	OH	44105	12/15/2011	TRIALIST- Dr Gigliotti told me again about the last patient who he put on Butrans. He said he never did hear anything from the insurance, so it must have been covered. He also said he has not heard from the patient herself, so he considers that a good sign as well. Reviewed the appropriate patient type, discussing OxyContin as an option for patients beyond Butrans range.
PPLPMDL0020000001	Cleveland	OH	44130	12/15/2011	dr said she's still giving patient info booklets out to patients she feels are appropriate for Butrans. told dr that was great and asked who are the appropriate patients? dr said patients taking a couple percoct a day for their chronic pain but asking for more pills, dr said she doesnt want to give more pills and thinks patients just need another option. we talked about initiation and titration of Butrans and i told dr to continue giving patient info booklets out and focus on 2 patients with BWC or commercial insurance that she can start on Butrans, dr committed to do this.
PPLPMDL0020000001	Cleveland	OH	44113	12/15/2011	NON-PRESCRIBER- Reminded Dr Lash of Butrans core messages. Spent time going over appropriate patient type & range, discussing OxyContin as an option for patients beyond Butrans appropriate range. Discussed dosing & titration ability after 3 days to a maximum 20mcg dose. Also discussed inclusion criteria & conditions that may cause pain chronically. Also discussed the ability to take supplemental analgesia with Butrans in non-opioid medications or immediate-release opioids. He said he did not think an opioid would be very effective as breakthrough medication. i asked why. He said that if buprenorphine is occupying the mu opioid receptors, how could an opioid added make any difference. Showed FPI 2.4 as support that those medications can be used with Butrans, but let him know that acetaminophen or ibuprofen could also be used. i asked if he could see himself using Butrans in the type of patient we discussed today. He said yes. He added that when he first heard about Butrans it did not seem all that interesting to him, but now he can see himself using it. Discussed savings cards for both products, but Dr Lash said he is very lazy about giving them out & asked me not to leave any because he would probably forget to give them. Discussed OxyContin 7 tablet strengths. He said he uses the intermediate strengths & finds that OxyContin is a good, effective medication for patients in true pain.
PPLPMDL0020000001	Cleveland	OH	44103	12/15/2011	i talked to dr about her patients she's started on Butrans, dr said they are doing well, no complaints. dr said she's still having a challenge trying to get Butrans approved by medicaid with a PA but she's not giving up. i focused dr on commercial insurance patients for Butrans and dr said she knows thats easier with the Patient savings cards but she doesnt have a lot of those patients with chronic pain. dr said majority of patients with chronic pain are medicaid. i asked dr if she'll start a couple patients today and tomorrow on Butrans? dr committed to do this. recommended senokot-S
PPLPMDL0020000001	Cleveland	OH	44195	12/15/2011	i talked to Brittany, Pharmacy Tech, confirmed stocking of Butrans and OxyContin. Brittany said no Rx for Butrans and she doesnt understand why. Brittany said the HCP's in Taussig Cancer Center write a lot of short-acting opioids for patients with various types of cancer pain so she's surprised noone has started patients on Butrans. showed Brittany Visual aid, we discussed 5 core messages and Brittany talked about Butrans having transdermal delivery and once weekly dosing. i asked Brittany if patients ever say their short-acting opioids arent controlling their pain? Brittany said she would do that. told her i would follow-up in the new year
PPLPMDL0020000001	Cleveland	OH	44195	12/15/2011	anne, NP, said she hasnt started anyone on Butrans this week but knows its available and will continue talking to dr stanton-hicks about their patients who could be appropriate. i showed visual aid and we discussed opioid experienced patients. i asked anne if she'll start 2 patients on Butrans, this week, focusing on commercial insurance or BWC? Anne said as long as dr approves, she'll do that. recommended Senokot-S
PPLPMDL0020000001	Lyndhurst	OH	44124	12/15/2011	Spoke to Steve about the movement of butrans and oxycontin. He said he may have had one or 2 butrans in the past month. i asked if he recalls if the patient used a savings card. He card not recall but he does not remember any issues. i explained allowable use of supplemental analgesia per the FPI, in case he gets any indication otherwise that might effect his filling of the script. He said oxycontin has been steady with just a few regular
PPLPMDL0020000001	Westlake	OH	44145	12/15/2011	i asked Dr if he has seen any patients taking tramadol around the clock this week. He said he has a few. i asked if these patients might benefit from Butrans 7 day dosing and he said most of them are older with Med D or Medicaid. i asked him to try Butrans if any of these patients are commercial insurance and he agreed. i asked if he had some patients who are taking 10mg vicodin or percoct around the clock who may be appropriate for OxyContin and he said he does.
PPLPMDL0020000001	Cleveland Hts	OH	44118	12/15/2011	Quick call... i asked doc if he is continuing to have success with patients being able to get butrans. He said he has not heard anything since that one cleveland clinci employee. i asked if he has gotten on feedback on how well butrans is working. He said not yet and that he has told patients to give it a couple of weeks.
PPLPMDL0020000001	Cleveland	OH	44103	12/15/2011	showed dr BUP3015 and discussed opioid experienced patients clinical trial, i asked dr if he see's pain conditions listed in inclusion criteria? dr said yes, i asked how he manages chronic pain? dr said short-acting opioids. i asked dr at what point will he consider a long-acting opioid? dr said once patients have tried all short-acting opioids and nothing else is working, then he'll consider a long-acting opioid. i asked dr if he would consider starting patients on Butrans, right after tramadol? dr said he might if medicaid paid for Butrans. i talked to dr about PA for medicaid patients and focused dr on commercial insurance patients. i asked dr if he'll start 2 patients this week that are appropriate? dr said he'll think about it. we talked about OxyContin being an option for patients and dr said he writes a lot of OxyContin and patients can get it covered by insurance. recommended Senokot-S
PPLPMDL0020000001	Highland Heights	OH	44143	12/15/2011	Window call. ...reminded doc of the coverage for butrans and oxycontin and the respective savings cards. Nothing learned.
PPLPMDL0020000001	South Euclid	OH	44121	12/15/2011	Doc said he has a patient in mind for butrans - an older woman who would like to try the patch. He wrote a script but forgot to give a savings card. i gave him more but explained the availability online and at some of the
PPLPMDL0020000001	Cleveland	OH	44195	12/15/2011	pharmacies. i asked if the patient was medicare or commercially insured. He said she had Aetna medicare. i explained that she may or may not be able to use the savings card.
PPLPMDL0020000001	Cleveland	OH	44127	12/15/2011	i talked to Steve, Pharmacist, confirmed Butrans and OxyContin stocking. Steve said he was really busy and couldnt talk today but said he had plenty of patients savings cards and booklets so i should follow-up in the new year
PPLPMDL0020000001	Cleveland	OH	44127	12/15/2011	dr said she tried to start a couple patients on Butrans, but medicaid didnt approve the PA because patients hadnt tried a long-acting opioid 1st. asked dr if she had a couple commercial insurance patients that she could start on Butrans? dr said a couple but not many. we talked about initiation, titration of Butrans and discussed patient info booklet. i told dr i appreciated her trying to get a few patients started on Butrans but asked her to focus on 2 commercial plan patients today and tomorrow, dr committed to do this. recommended Senokot-S

PPLPMDL0020000001	Cleveland	OH	44130	12/15/2011	TRIALIST- I reminded Dr Kansal of previous conversations when he has told me about the difficulties in switching patients from short-acting to long-acting opioids. He said this is true. I asked him if he prescribes OxyContin. He said yes. I asked him why, then he couldn't see a place for Butrans. He said the mindset of the patient is different. I asked him to elaborate. He said if you ask a patient if they want to put on a patch for pain once a week or take 2 pills per day, the patient will almost always want the pill option. I asked him if this is because a patient wouldn't want to "give up" their pills. He said yes. I reminded him that patients can take supplemental analgesia with Butrans if necessary & also discussed titration of Butrans after 3 days if needed. He said that was a good point & he had forgotten that. I asked him if he ever has to increase someone's dose of short-acting opioid. He said yes. I asked isn't that an acknowledgment that what they are taking isn't working. He said yes. I asked if he felt a patient like this, who was not getting relief on their current medication would be a Butrans candidate. He said that was a good idea & he would try it. Also discussed OxyContin as an option for patients who are beyond the Butrans range.
PPLPMDL0020000001	Parma	OH	44129	12/15/2011	NON-PRESCRIBER- Positioned Butrans for patients who do not get adequate relief on 3-4 tramadol or Vicodin per day. Dr Paat asked me how often the 20mcg gets prescribed. I told him the 20mcg is a titration dose with 5 & 10 being the two starting doses. Discussed ability to titrate after 3 days up to a maximum 20mcg dose. He asked if patients could take hydrocodone with Butrans. I told him patients can take either opioid or non-opioid medications for breakthrough pain if necessary. I asked if he thought he would have someone coming in within the next few days who could benefit from Butrans & he said yes. Also reminded him of favorable Medicare Part D
PPLPMDL0020000001	East Cleveland	OH	44112	12/15/2011	Doc said the problem he has with butrans is that it is for those patients are just starting to have pain and his patients have been in pain for years. I read the exact indication and reviewed the positioning. He said he can think of one patient that he might try. The patient is currently just taking Tylenol with codiene. He could not recall what strength they were on but he remembered that I told him most of his patients would start on 10mcg. He said he is going to try but he does not want to be bothered with prior auths as they are already doing to many for other products including oxycontin. He said he would try.
PPLPMDL0020000001	Cleveland	OH	44103	12/15/2011	I talked to Amy, Pharmacy Manager, about some of the biggest short-acting opioid writers in the area. I knew all of the HCP's Amy mentioned: dr celeste, dr carson, dr nickels, dr boyd and dr robson. I talked to Amy about 6 Butrans core selling messages and I asked Amy if she would continue giving patient info booklets out to those patients she feels are appropriate for Butrans so they can talk to their HCP's about Butrans. Amy said she will do this confirmed stocking and recommended Senokot-S
PPLPMDL0020000001	Independence	OH	44131	12/15/2011	NON-PRESCRIBER- I asked Dr Sundaram how we were going to find him a Butrans patient. He said he actually just saw someone who might be a good candidate but the patient is self-pay. He asked the cash price for Butrans. I told him price will vary from pharmacy to pharmacy but showed WAC pricing sheet. Dr Sundaram said this patient is very well off & may pay out of pocket for Butrans. Reminded him to give the patient a savings card so he/she could save \$40 per month. I asked him to tell me more about the patient's condition. Dr Sundaram said the patient actually lost his job because his pain was affecting him at work. The patient was taking Tylenol to try to help with the pain. Dr Sundaram said he prescribed Ultram today but perhaps Butrans would have been a better option. He said he would find out what the patient wanted to do & would prescribe accordingly. Discussed OxyContin favorable managed care/savings cards as well.
PPLPMDL0020000001	Cleveland Hts	OH	44118	12/15/2011	Quick call...I reminded doc of the butrans positioning and other selling messages. I asked him if he sees opportunity to prescribe it for his patients. He said sure he just has not had a chance to look at the info I left him the last time. Reviewed the oxycontin flexible dosing options for moderate to severe pain and the availability of savings cards.
PPLPMDL0020000001	Sagamore Hills	OH	44067	12/16/2011	REPEAT CUSTOMER- Dr Scanlon said he has been prescribing Butrans & actually just prescribed it for a female patient before walking into breakfast. I asked if he typically gives patients refills of Butrans when giving them a prescription. He said yes. I asked if he could expand his utilization of Butrans since he has said that it is getting good results with it. He said he would try & that he has been trying to use it more. Reviewed appropriate patient type. Also discussed using patient information booklets to "sell" the concept of Butrans to appropriate patients. Dr Scanlon agreed to try this. Also discussed savings cards for Butrans & OxyContin. He asked for more Butrans
PPLPMDL0020000001	Independence	OH	44131	12/16/2011	Spoke with pharmacist David & reviewed Butrans core messages. Went over appropriate patient type, focusing on patients who take chronic short-acting around-the-clock opioids. Gave him patient information booklets & showed him how they can be used to help answer customer questions regarding Butrans. Also suggested he give them to customers who fit the appropriate Butrans patient type if he thinks they would be a good candidate. He agreed to do this. Also discussed OxyContin savings cards, but he said he did not need any more at this time.
PPLPMDL0020000001	Independence	OH	44131	12/16/2011	NON-PRESCRIBER- Dr Jack said he needs to think about Butrans more & that he can't believe it has been almost a year of me trying to get him to prescribe it. Reviewed core messages & asked him what he has to lose by trying it on a few appropriate patients. Reviewed appropriate patient type with him, focusing on patients who are not well-controlled on around-the-clock tramadol or Vicodin. Discussed OxyContin as an option for appropriate patients beyond Butrans range. Reminded him of once weekly dosing in a CII opioid & reminded him of abuse/addiction potential. Pointed out his savings cards. He said he would put a savings card in his pocket in effort to help him remember. I asked him to just find one or two appropriate patients to start. He agreed this was fair.
PPLPMDL0020000001	Sagamore Hills	OH	44067	12/16/2011	NON-PRESCRIBER- Reminded Dr Mike of previous Butrans conversations & reviewed core messages with him. I asked him his thoughts. He said he does not like to prescribe opioids. I agreed that appropriate patient selection is essential & asked if he would agree that opioids are sometimes warranted for certain patients in legitimate pain. He said yes but that it can be difficult to determine who truly has pain. He added that he does prescribe opioids occasionally. Reviewed with him the appropriate patient type, focusing on patients who are not well-controlled on 3-4 tramadol or Vicodin per day. Discussed OxyContin as an option for appropriate patients beyond Butrans range. Discussed Butrans delivering buprenorphine over 7 days. Also discussed ability to take supplemental analgesia with Butrans if necessary. Discussed warnings & precautions & Butrans as a CII opioid with abuse & addiction potential. Dr Mike said one of his concerns with Butrans would be that with a "steady" release of drug, patients may "get used to" the dose & then would need more & more. I agreed that physical tolerance is possible with all opioids. He said he would keep Butrans in mind for patients who he prescribes opioids.
PPLPMDL0020000001	Cleveland	OH	44102	12/16/2011	dr said he saw andrea yesterday and is looking for patients to start on Butrans. dr talked about his hydrocodone patients. i asked dr to start a couple patients on Butrans instead of increasing the hydrocodone dose and focus on BWC and/or commercial insurance patients. dr said he will do that.
PPLPMDL0020000001	Cleveland	OH	44111	12/16/2011	Quick call, I asked Dr who he thinks Butrans can benefit. he said he's not sure yet as he needs to gain experience. I asked if he would start some patients to see who can benefit and he agreed.
PPLPMDL0020000001	Cleveland	OH	44109	12/16/2011	dr said he started a few more patients on Butrans this week. i asked dr if he'll continue choosing Butrans for his patients? dr said yes he will. i asked dr where he's finding Butrans is appropriate? dr said after tramadol or vicodin, if patients aren't controlled and asking for more pills he discusses Butrans with them and some patients get immediate release opioid with Butrans and others have to take non-opioid therapy. i told dr that was great he sounds like he's getting more comfortable with Butrans and i asked dr if he'll start a couple more patients today? dr said as long as patients have the insurance coverage, he will. i focused dr on commercial and BWC patients.
PPLPMDL0020000001	Cleveland	OH	44109	12/16/2011	worked pm&r dept
PPLPMDL0020000001	Independence	OH	44131	12/16/2011	NON-PRESCRIBER- Quick call at the window- Positioned Butrans for patients with commercial insurance who are not well-controlled on tramadol around-the-clock. Also reminded Dr Pai of favorable Medicare Part D coverage for OxyContin.
PPLPMDL0020000001	Cleveland	OH	44113	12/16/2011	i showed dr visual aid, pg. 11 pain conditions, dr focused on patients with back pain, dr said there are so many patients with chronic low back pain and they are all taking short-acting opioids. i asked dr if she has a couple patients taking tramadol that aren't controlled and dr could start them on Butrans? dr said she has a lot of patients she would like to start on Butrans but not all of them are willing to wear a patch. dr said most patients just want their pills, nothing else. i showed dr fpi, section 2.4 maintenance of therapy section, noting she can give immediate release opioid or non-opioid therapy with Butrans. dr said ok she will talk to a few patients and see if she can convince them to try Butrans. i focused dr on commercial insurance patients. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	12/16/2011	i talked to Justin, Pharmacist and Maria, Pharmacy Technician. Justin said he just ordered more Butrans and dr boh1 started a few more patients this week on Butrans. i asked Justin if patients are asking him any questions about Butrans when they get their scripts filled? Justin said no but he makes sure patients have the patient info booklets. i asked what types of insurance these patients have? Justin said some patients have Caresource and they are getting Butrans approved with a PA and trial of short-acting opioids. 1 patient had Anthem-Medicare Part D and dr boh1 did a PA for this patient and medicare approved Butrans and the others were BWC. we talked about Butrans formulary coverage and i asked Justin to continue giving patient info booklets to patients, he committed to do this. confirmed OxyContin stocking and Justin said he is still seeing a lot of patients get switched to Opana ER and sometimes to Opana, immediate release, from OxyContin. we discussed OxyContin formulary coverage and i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	12/16/2011	dr said he has 1 patient on Butrans and patients doing good. dr said no calls from this patient is a good sign. i asked dr if he has a couple more patients like this that he can start on Butrans? dr said he probably does. we talked about initiation and titration of Butrans and i focused dr on BWC and commercial insurance patients.
PPLPMDL0020000001	Cleveland	OH	44109	12/16/2011	dr said he started 1 patient on Butrans this week. i asked dr why he chose Butrans? dr said patient was taking vicodin and wasn't happy with this and wanted something different so he talked to the patient about Butrans. we discussed initiation and titration of Butrans and i asked dr if he has 2 patients like this 1 that he can start on Butrans today? dr said he's not sure who's coming in but he'll look today and next week and will start a few more patients. focused dr on BWC and commercial insurance patients. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	12/16/2011	dr said he's not started anyone on Butrans but he gave a few patient info booklets to those patients that were hesitant about trying Butrans because it's a patch. i showed dr visual aid, discussed 5 core selling messages and dr focused on Butrans being transdermal and dosed once a week. i asked dr if he had 2 patients, BWC or commercial, that he knows is appropriate for Butrans? dr said he has a few patients in mind and will talk to patients next week. i told dr he does have an option of OxyContin for those patients that are ready for a long-acting opioid and aren't willing to try Butrans. dr said he knows OxyContin is available and writes a lot of it. showed formulary grid and i asked dr if he'll continue starting patients on OxyContin? dr said he will do that. recommended Senokot-S
PPLPMDL0020000001	Parma	OH	44129	12/19/2011	NON-PRESCRIBER- Introduced myself & Purdue's products to Dr Laluk. Reviewed Butrans core messages with him & discussed who the appropriate patient for Butrans could be. Showed initiation guide & focused him on pg 6, going through appropriate Butrans patient range, & discussing OxyContin as an option for appropriate patients beyond Butrans. Discussed various conditions that cause chronic pain, including osteoarthritis, spinal stenosis, & spondylolysis. Dr Laluk asked about insurance coverage. Discussed focusing on commercial insurance, where Butrans is obtainable. He asked what adverse events to expect. Showed him adverse event rates. He said some of the rates look a little higher than he would expect. He asked if it really works for 7 days. Told him Butrans is not for everyone & that Butrans is designed to release buprenorphine for 7 days. Showed core visual aid pg 6. Discussed savings cards for both products. Dr Laluk said he does have patients who fit the appropriate Butrans patient type & that he would keep Butrans in mind, although he does not often have to change or increase their medication. Discussed ability to take supplemental analgesia with Butrans. He said this was important.
PPLPMDL0020000001	Lakewood	OH	44107	12/19/2011	Spoke with Heather, we reviewed the medication guide and she said she does have them to hand out patients. I asked if she would let appropriate chronic pain patients know about Butrans as an option and she said she will if the patients want to discuss anything. Reminder that OxyContin is an option when Butrans does not provide adequate analgesia.
PPLPMDL0020000001	Lakewood	OH	44107	12/19/2011	Dr said that he is trying to convert patients who are on OxyContin to Butrans. He asked me how to initiate these patients based on which dose of OxyContin they are taking. I reviewed that patients taking OxyContin should be tapered down to 15mg of oxycodone per day before initiating 10mg Butrans. We reviewed titration. Dr asked how to initiate a patient taking 40mg of OxyContin and I reviewed that Butrans may not provide adequate analgesia for this patient and that he should taper them down to 15mg of oxycodone per day to prevent symptoms of withdrawal. He said he still maintains a lot of patients on OxyContin but where patients are willing to try something else, he is converting to Butrans and giving vicodin for break through. He said that he likes that Butrans is a CII. He asked about insurance coverage and we reviewed managed care for Butrans and OxyContin.
PPLPMDL0020000001	Northfield	OH	44067	12/19/2011	NON-PRESCRIBER- Spoke with nurse, Maggie, & reminded her of previous Butrans discussions with Dr Marshall. She said he was too far behind to talk today. Reviewed appropriate patient type & range with her, including OxyContin as an option for patients beyond the Butrans range. Also discussed once weekly transdermal dosing. Reviewed savings cards for both products with her. She said she would discuss it with Dr Marshall & promised to give him the initiation guide I left for him. Offered OCT samples, which she accepted.
PPLPMDL0020000001	Parma	OH	44129	12/19/2011	LOYAL CUSTOMER- Quick call- Passed back PurdueHCP.com lever & discussed interactive nature of the online Butrans programs with Dr Ortega. I encouraged him to log on to participate as this may help him identify more Butrans patients from his practice & would give him additional information. He said he would do this. Also reminder for OxyContin as an option for appropriate patients beyond Butrans. He said he is always keeping both in

	Beachwood	OH	44122	12/19/2011	Spoke with pharmacist, Shelly, who said she has not filled any Butrans prescriptions since our last discussion. She added that she had one customer who had a prescription for two patches & he got them, but she never got any feedback from him, & another customer had a prescription, Shelly ordered it, & the patient never returned to pick it up. Reviewed Butrans appropriate patient type & discussed ability to take supplemental analgesia with Butrans if necessary. Shelly said they really do not have a lot of pain management patients filling prescriptions there. She said most of them would probably not be willing to change medications. Discussed patients who get escalating doses as potential Butrans patients since that may indicate that their current medication may not be controlling their pain adequately. Discussed automatic savings via e-voucher & OxyContin savings cards. She said the customers who get OxyContin from her regularly have Medicare or Medicaid, so she did not have a need for the savings cards.
PPLPMDL0020000001	Lakewood	OH	44107	12/19/2011	I asked if he has been happy with the results he's seen with Butrans and he said that he has only heard back from one patient, but the feedback was good. I asked if he had more patients who would benefit from 7 day Butrans and he said he is starting to remember to think of Butrans and he agreed to start more new patients.
PPLPMDL0020000001	Lakewood	OH	44107	12/19/2011	I asked Dr if he had other pateints who could benefit from 7 day Butrans. He said he is keeping it in mind and agreed to prescribe.
PPLPMDL0020000001	Lakewood	OH	44107	12/19/2011	Quick call, I asked if she had a few patients who could benefit from 7 day Butrans and she said she is thinking of Butrans for a few patients taking tramadol. I reviewed the initiating guide.
PPLPMDL0020000001	Beachwood	OH	44122	12/19/2011	NON-PRESCRIBER- Quick window call- Passed back BUP3015 study & let Dr Warren know I was a study for Butrans done in opioid-experienced patients. I asked him to review it & told him it may help him become more comfortable with Butrans efficacy. Spoke with Donnie & asked if he had discussed Butrans with Dr Warren since my last visit. He said he did encourage him to use it because he thinks it would be a good option for a lot of their patients. Reviewed once weekly dosing, CII, & delivery system. Donnie said he would mention this again to Dr Warren.
PPLPMDL0020000001	Lakewood	OH	44107	12/19/2011	I reviewed the case studies and asked his thoughts. He said that he has a patient like Evelyn who he would like to start on Butrans. He said that she was taking about 200mg of tramadol per day and we reviewed how to initiate 5mcg Butrans and titrate if needed. He said that he will start her when he sees her next but he didn't know when that would be. We reviewed the managed care for Butrans and he said she has commercial insurance. We reviewed OxyContin managed care for Med D patients.
PPLPMDL0020000001	Woodmere	OH	44122	12/19/2011	Spoke briefly with a pharmacist who said she was too busy. Inquired about Butrans stocking & delivered Butrans overview (once weekly transdermal system for moderate to severe chronic pain) but she said she wasn't going to check to see if they have it. Offered OxyContin savings cards but she did not want any. Left PurdueHCP.com leaver for her to review at her convenience.
PPLPMDL0020000001	Lakewood	OH	44107	12/19/2011	Dr said he still has not started patients on Butrans. I reviewed the case studies and asked his thought about the patient types. He said he will keep Butrans in mind as an option after tramadol is no longer controlling the patients pain, but most of the patients he sees are like John and are more appropriate for OxyContin as an option. He said he has many patients on OxyContin and he's starting to get managed care issues. I asked which plans and he thought it was PAS being needed for Medicaid. We reviewed the managed care for both Butrans and OxyContin. I asked if he would try a few patients on Butrans and he agreed. He agreed to continue to use OxyContin as an option when patients are taking higher doses of opioids.
PPLPMDL0020000001	Independence	OH	44131	12/19/2011	REPEAT CUSTOMER- Dr Trickett said some of the patients she has put on Butrans are no longer on it. I asked her why they discontinued- was it lack of efficacy or adverse events. She said one patient did not like the way Butrans made her feel & that she said she just felt "weird" on it. Dr Trickett said another patient reported similar side effects. I asked if this was going to hinder her prescribing of Butrans. She said no. I asked what it typically is that causes her to choose Butrans for a patient. She said usually if they aren't doing well on short-acting opioids, she will try Butrans for them. Dr Trickett mentioned that cost has been a problem for at least one patient, but added that it was an older patient with Medicare. Discussed where Butrans is covered & reviewed savings cards. Also discussed OxyContin savings cards, which she said she could use more of. Provided one package.
PPLPMDL0020000001	Westlake	OH	44145	12/20/2011	Spoke with Dan, we reviewed the Butrans medication guide and how to teach patients about proper use and application of Butrans. We reviewed the use of supplemental analgesia with Butrans and that Butrans is a CII and can be called in and refilled. I asked if he would let appropriate chronic pain patients know about Butrans as an option and he said he would if he talks to them. Reminder that OxyContin is an option when Butrans may not provide adequate analgesia.
PPLPMDL0020000001	Cleveland	OH	44111	12/20/2011	Spoke with Dan, we reviewed Butrans medication guide and that Butrans is a CII and can be used with supplemental analgesia. We discussed Butrans as another option for patients taking tramadol around the clock, I asked if he would let these types of patients know about Butrans as an option and he agreed. Reminder that OxyContin is a long acting option when Butrans 20mcg does not provide adequate analgesia.
PPLPMDL0020000001	Middleburg Heights	OH	44130	12/20/2011	NON-PRESCRIBER- Spoke with Janet (MA) & introduced Butrans, discussing core messages & reviewing appropriate patient type. Also discussed savings cards for OxyContin & Butrans. Worked with Janet to schedule a lunch with physicians & staff to educate them more on Butrans & OxyContin.
PPLPMDL0020000001	Garfield Hts	OH	44125	12/20/2011	NON-PRESCRIBER- Quick call with Dr Sadowski- Positioned Butrans for appropriate patients for whom he finds himself escalating their dose of tramadol or Vicodin. Dr Sadowski said he is keeping it in mind & then walked out. Spoke with his MA, Deena, & told her about Butrans portal & online programs. Gave her information on how to log on & asked her to go through it with Dr Sadowski. She agreed. Also re-visited with her the topic of flagging appropriate patient charts when she identifies someone who could benefit from Butrans.
PPLPMDL0020000001	Parma	OH	44129	12/20/2011	NON-PRESCRIBER- Introduced Butrans to Dr Cowan, delivering core messages & alerting him to box warning. Discussed appropriate patient type & range & presented initiation guide, pointing out the chart on pg 6. Discussed OxyContin as an option for appropriate patients beyond Butrans range. Dr Cowan said he has always preferred MS Contin to OxyContin. I asked him why that was. He said he was not sure. Discussed Butrans as a CII opioid with once weekly dosing. Also reminded him that because Butrans is an opioid, it does carry abuse & addiction potential. He asked about dosing. Discussed 3 available doses, titration after 3 days to a maximum 20mcg, & ability to take supplemental analgesia with Butrans if necessary. Also showed him demo kit & discussed adhesive matrix. Demonstrated use of disposal unit. Dr Cowan said Butrans seems like an interesting option & he is glad to see that he has another option for treating his patients who need chronic opioid therapy.
PPLPMDL0020000001	Parma	OH	44129	12/20/2011	NON-PRESCRIBER- Introduced Butrans to Dr Eicher, delivering core messages & alerting him to box warning. Presented initiation guide & pointed out page 6. Spent time going over appropriate patient type & range, including OxyContin as an option for appropriate patients beyond Butrans range. I asked his thoughts. He said he thought Butrans seemed interesting & like something he would use in practice. Discussed Butrans as the only long-acting CII opioid & advised that he be just as cautious in prescribing Butrans as he would be with other opioid medications due to abuse/addiction potential. Discussed starting doses, titration, & ability to take supplemental analgesia with Butrans. Dr Eicher said he was happy that there is another option now for treating this type of pain patients. Also discussed OxyContin 7 tablet strengths. He said he was not aware of the 15, 30, & 60mg doses.
PPLPMDL0020000001	Cleveland	OH	44130	12/20/2011	Spoke with floater pharmacist filling in today. Discussed Butrans as a once weekly transdermal system of buprenorphine for moderate to severe chronic pain. Discussed insurance coverage & savings programs for Butrans & OxyContin. No savings cards were needed. Also presented patient information booklet for Butrans & left 3 of them to be put with the Butrans. Discussed how they can be given to patients with a prescription or customers who the pharmacist identifies as potential Butrans candidates based on their patient type.
PPLPMDL0020000001	Mayfield Hts	OH	44124	12/20/2011	Window call...I ask doc if he is still identifying appropriate butrans. He said he is trying to and thinks of butrans for newer patients. I told him that's a great place especially if they are just taking NSAIDS, tramadol or just a few tabs of low dose vicodin per day. He said he is going to do that.
PPLPMDL0020000001	Cleveland	OH	44130	12/20/2011	TRIALIST- Quick call- Delivered messaging to Dr Diab for Butrans providing buprenorphine for 7 days & once weekly transdermal application. He just waved & walked into a room.
PPLPMDL0020000001	Cleveland	OH	44130	12/20/2011	TRIALIST- Presented patient information booklets from the sample room to Dr Fedorko & showed him how it can be used to talk to patients about Butrans as an option to treat their moderate to severe chronic pain. Dr Fedorko showed me the application sites for Butrans & said he knows all about it, walking into a room.
PPLPMDL0020000001	Cleveland Hts	OH	44118	12/20/2011	Doc said he just wrote a script for butrans today. I asked him to tell me about the patient. He just said that it was an older woman that did not want to take a bunch of pills. I asked him what coverage she has as an older person is likel to be medicare. He said it was medicare because it required a prior auth. I explained that medicare will be the most difficult at going through and that it may be covered for the first month. I showed him the commercial plans and that medicare patients may be more appropriate for low dose oxycontin from a cost perspective.
PPLPMDL0020000001	Mayfield Heights	OH	44124	12/20/2011	Provided savings cards for oxycontin and butrans per our previous conversation. He asked if they would expire soon. I told them that they will both be honored until 03/12. He said he has 1 or 2 patients that can use the oxycontin cards. When patients did come in with butrans he thiks they had a card with them. Gave him a couple of butrans patient info guides as well.
PPLPMDL0020000001	Westlake	OH	44145	12/20/2011	Quick call, I reviewed the managed care for Butrans and asked if he had any commercial insurance patients who could benefit from 7 day Butrans. He said he will continue to use Butrans.
PPLPMDL0020000001	Westlake	OH	44145	12/20/2011	Dr said he just saw Amy and they discussed using Butrans for patients taking low dose vicodin or percocet instead of increasing their dose of short acting. I reviewed the managed care and asked if he would try just a few commercial patients and see how they do. He agreed. Reminder that OxyContin is an option for patients when Butrans 20mcg does not provide adequate analgesia. Spoke with Juan regarding savings cards and formulary
PPLPMDL0020000001	Westlake	OH	44145	12/20/2011	I asked Dr to tell me about recent patients that he started on Butrans and how they are doing. He said that he hasn't started a ton of patients, but has used it as an option mostly instead of vicodin for patients. I reviewed that this is a great patient for Butrans and reviewed the initiation guide. I asked him to continue starting new patients and he agreed.
PPLPMDL0020000001	Cleveland	OH	44129	12/20/2011	LOYAL CUSTOMER- Quick call- Deb said she "loves" Butrans & is getting great results. I offered Butrans savings cards & patient information booklets for this location. Deb said she needed patient information booklets because she was looking for one earlier when she started a patient on Butrans. I let her know that I submitted her idea for Spanish patient information booklets & that because of that, they are currently being translated to Spanish & will be available in the future. Deb said this would be very helpful & was pleased. Spent time with Dawn discussing Butrans patient type & managed care.
PPLPMDL0020000001	Westlake	OH	44145	12/20/2011	Quick follow up, I asked if his patient was able to get a savings card for Butrans and he said yes the pharmacy had one. I asked if he has been happy with the results and he said he has. Reminder about managed care for Butrans and Med D for OxyContin.
PPLPMDL0020000001	Parma	OH	44129	12/20/2011	NON-PRESCRIBER- I asked Dr Roheny if it was not for managed care, what limitations he would see with Butrans. He said he wants to use it more. I told him he was the only one who can control that & asked him why he doesn't then. He said the only patients he has who he could use it for have Medicare. I asked him if that means he has no working patients, for example, who have chronic low back pain or osteoarthritis who would be appropriate for Butrans. He said he might have one or two. I asked him why not try Butrans for those one or two then. He said maybe he would do that. He asked me how long Butrans has been out. I told him we launched in January. He said he cannot believe it has been out almost a year & he has not tried anyone on it. I told him again he is the one who can control this & asked if he would just try it for those one or two patients who he told me about. He agreed. Reminded him of favorable Medicare coverage for OxyContin.
PPLPMDL0020000001	University Hts	OH	44118	12/20/2011	Window call...Reminded doc of the butrans patient type, once weekly dosing, and CII status which means it can be called in and refilled. Provided Butrans portal invite and formulary grids for butrans and oxycontin. Nothing learned.<font color=blue>-b>CHUDAKOB added notes on 01/01/2012</b>-</font>Next time you have a window call, ask one of the questions in your next call objective instead of a reminder call. This is an area we will work on in the coming year.
PPLPMDL0020000001	Westlake	OH	44145	12/20/2011	Dr said that he had a patient who was taking high doses of short acting opioids around the clock. He said she kept asking him for more pills and he refused and sent her to pain management. He said when she came back to him the CCF pain management Dr started her on Butrans and cut back on her tablets. He never thought that she would have been appropriate for Butrans or willing to even try a patch instead of give up any of her pills. He said that this has opened his eyes that he may be able to taper some of these patients down on their short acting and start them on Butrans. He said he still has many patients taking OxyContin.
PPLPMDL0020000001	Mayfield Heights	OH	44124	12/20/2011	Window call...Reminded doc of the butrans positioning - for patients falling on tramadol and low dose vicodin. Gave him a formulary grid and asked him to focus on those plans for the best chance at success.
PPLPMDL0020000001	Parma	OH	44129	12/20/2011	NON-PRESCRIBER- Reminded Dr Lee of our previous Butrans discussion. He said he had forgotten about it. Reviewed 5 core messages & discussed Butrans as the only long-acting CII opioid available. Also alerted him to box warning & Butrans abuse/addiction potential. Dr Lee asked how Butrans is dosed. Showed initiation guide, focusing on page 6. I asked Dr Lee if he does a lot of chronic opioid therapy. He said yes. He added that he usually prescribes fentanyl. Re-focused him on more "moderate" pain & showed initiation guide again. He said he sees now where Butrans fits in & that he is even more interested in it, knowing it is for the more "moderate" pain patients. Showed him demo patch & discussed adhesive matrix. Dr Lee said he will keep Butrans in mind & that it is nice to have another option for this type of patient. Also discussed OxyContin 7 tablet strengths & OxyContin as an option for patients beyond Butrans range.

PPLPMDL0020000001	Cleveland	OH	44143	12/20/2011	I reviewed the appropriate butrans patient type - after tramadol failures. He said thats where he tried to write it but patients complained that it was too expensive even with a prior auth. I reminded him that commercially insured patients will have the best chance for success. I asked him to give it another try for the right patient.
PPLPMDL0020000001	Lyndhurst	OH	44124	12/20/2011	I asked doc to continue to identify butrans patients as those failing on tramadol throughout the holidays. She said she will be off from christmas to after new years so she isnt sure how much opportunity she will have. She said the patients that are on it seem to like it (butrans). I offered more savings cards but she said she had enough to get her through. I asked if she is still giving oxycontin savings cards as well. She does for new patients but doesnt have new oxycontin patients often.
PPLPMDL0020000001	Macedonia	OH	44056	12/21/2011	Spoke with Nancy & reviewed Butrans overview with her. Discussed appropriate patient type & range. Also showed FPI 2.4 & discussed ability for patients to take supplemental analgesia with Butrans in the form of immediate-release opioids or non-opioid medications. Nancy said she has not seen any Butrans activity since the initial prescription that was filled there several months ago. I asked if she knows why the customer did not get refills. She did not know. Discussed automatic savings through e-voucher & OxyContin savings cards.
PPLPMDL0020000001	Parma	OH	44134	12/21/2011	LOYALIST- Dr Hernandez said he continues to get good results with Butrans. I asked him what strength most of his patients are on. He said it really varies. He added that he starts them all at 5 & then will titrate if necessary. I asked how he determines what type of medication (ie an opioid like Butrans or OxyContin or a non-opioid medication) he chooses to help with someone's pain. He said it depends on the source of the pain. He went on to say that if the patient has pain due to a nerve issue (ie carpal tunnel or neuropathy), he chooses a medication like Lyrica. He said if the pain is of another nature, he chooses medications like Butrans or OxyContin. I asked if he would continue to prescribe Butrans & OxyContin in appropriate patients & he said yes.
PPLPMDL0020000001	Maple Heights	OH	44137	12/21/2011	NON-PRESCRIBER- Quick call with Dr Dale- Positioned Butrans for patients with commercial insurance who are not well-controlled on tramadol around-the-clock for their moderate to severe chronic pain. Also reminded him of broad formulary coverage for OxyContin.
PPLPMDL0020000001	Beachwood	OH	44122	12/21/2011	Spoke briefly with Alan, pharmacist, & reviewed Butrans. Inquired about activity. He said he fills about one a month or so. Discussed ability to take supplemental analgesia with Butrans in either non-opioid medications or immediate-release opioids. Showed FPI 2.4. Also discussed savings cards for both Butrans & OxyContin.
PPLPMDL0020000001	Westlake	OH	44145	12/21/2011	Quick call thru window, I asked Dr if he had any push back for managed care for Butrans and he said he hasn't tried any patients lately. I asked if he had patients who could benefit from 7 day Butrans and he said he will keep it in mind.
PPLPMDL0020000001	Westlake	OH	44145	12/21/2011	Quick call, I asked Dr hwo his Butrans patients are doing and he said they haven't come back in, but they haven't called yet. I asked if he would continued to find patients who might benefit from 7 day dosing and he agreed.
PPLPMDL0020000001	Bedford	OH	44146	12/21/2011	TRIALIST- Quick window call- Passed back Butrans formulary grid, reminding Dr Haddad of favorable commercial insurance coverage with Butrans & also handed him OxyContin CCRx alert, pointing out favorable Medicare D status for OxyContin. Dr Haddad said he is keeping them in mind, thanked me, & walked away. Spoke with Roberta (MA) & discussed managed care & savings cards for Butrans & OxyContin.
PPLPMDL0020000001	Westlake	OH	44145	12/21/2011	Quick call with Deanna, she said he might have seen one patients on Butrans. We reviewed the medication guide and she agreed to give them to new Butrans patients. Reminder that OxyContin is an option when Butrans 20mcg does not provide adequate analgesia.
PPLPMDL0020000001	Maple Heights	OH	44137	12/21/2011	NON-PRESCRIBER- Dr Gene said he just prescribed Butrans for a female patient. I asked him to tell me more about her. He said she was an 80 year old woman who has a spinal compression fracture. I asked what she was taking before Butrans. He said nothing, but that she had a lot of pain. He said that she paid over \$160 for the months supply of 5mcg patches, but she reports that she is doing well on it so far. He said that her Medicare plan would not cover it, so he wrote a letter explaining why she needs to be on Butrans. He said he hopes they will start to pay for it for her because he does not want her on fentanyl or another "strong" opioid. I reminded him that Butrans is a CIII opioid with the same attendant risks of other opioid medications. He said he knows but he feels it is the best option for her. I asked if he has other patients, perhaps who have commercial insurance, who he can think of who may benefit from Butrans. He said yes & that he has been thinking of other patients who he can try on it since he has had good results with the one he chose so far. Also discussed OxyContin 7 tablet
PPLPMDL0020000001	Cleveland	OH	44114	1/2/2012	I talked to dave,pharmacy mgr, about how his conversations sound with patients when providing patient counseling on opioids.dave said a lot of patients just ask about side effects and sometimes will ask for his opinion on other options available to them.I asked dave if he's been recommending Butrans to patients that he feels are appropriate and giving patients the patient info booklets so they can talk to their HCP's? dave said he's given a few booklets out and will continue doing so if he feels patients are appropriate.we talked about appropriate patients for OxyContin,showed visual aid and dave said he never recommends OxyContin to HCP's for patients,dave said thats up to the HCP to make any changes as it relates to OxyContin.we discussed formulary coverage and I recommended Senokot-S
PPLPMDL0020000001	Parma	OH	44129	1/2/2012	Spoke with Heath, pharmacist, reviewing Butrans. He checked his shelf & said that he has not dispensed any but does have it in stock. He did add, however, that the box they have on hand expires in May of this year.
PPLPMDL0020000001	Cleveland	OH	44114	1/2/2012	Reviewed with him the appropriate patient type, discussing patients who take chronic refills of tramadol or Vicodin. Discussed once weekly dosing & strengths available. Also discussed automatic savings via e-voucher & OxyContin savings cards. He said he does not need any additional savings cards.
PPLPMDL0020000001	CLEVELAND	OH	44109	1/2/2012	I talked to Laura,Pharmacy mgr,about medication management therapy,Laura said she provides some patient counseling on opioids and has given a couple patients the Butrans patient info booklets so they can talk to their HCP's.Laura said no Rx yet for Butrans but she likes the product and thinks it's just taking longer for HCP's to start patients on Butrans.showed visual aid,we discussed 6 core selling messages and laura talked about Butrans being a patch and once weekly dosing as 2 features she thought were great options for some patients.we discussed formulary coverage and discussed appropriate patients for OxyContin,Laura said she doesnt recommend OxyContin to any patients that the HCP's decision to make any changes with OxyContin. we discussed formulary coverage for OxyContin and I recommended Senokot-S
PPLPMDL0020000001	PARMA	OH	44134	1/2/2012	I talked to Ron,Pharmacist,about Butrans 6 core selling messages,Ron said he's not seen any Rx for Butrans but thinks Butrans transdermal system and once weekly dosing option could be an option for some patients.Ron focused on opioid experienced patients,I showed visual aid and we discussed these patients starting on Butrans.I asked Ron if he would give patient info booklets to those patients he feels are appropriate,per our discussion,Ron agreed to do this.we talked about appropriate patients for OxyContin,showed conversion guide and asked Ron if he's seen any new Rx for OxyContin? Ron said not lately,same patients getting OxyContin Rx.we discussed formulary coverage for OxyContin and savings cards.recommended Senokot-S
PPLPMDL0020000001	Parma	OH	44134	1/2/2012	Spoke with floater pharmacist. Discussed Butrans indication, dosing, & appropriate patient type. Focused him on patients who take short-acting opioids around-the-clock for chronic conditions. He pointed out the Butrans boxes on the shelf. He said he has filled prescriptions at other locations. Let him know that Butrans savings is automatic for CVS customers through Relay Health's e-voucher. Also discussed OxyContin savings cards. He said to check with the regular pharmacist to see if he wants savings cards as he was unsure.
PPLPMDL0020000001	Westlake	OH	44145	1/2/2012	Spoke with Darrel, we reviewed Butrans appropriate patients and the medication guide. I asked if he would let appropriate patients know about Butrans as an option and he agreed. We reviewed the savings program for both Butrans and OxyContin.
PPLPMDL0020000001	Cleveland	OH	44130	1/2/2012	Spoke with Allison & reviewed Butrans core messages to refresh her memory. She said she has not seen any prescriptions for Butrans. Reviewed appropriate patient type as well as the ability to take supplemental analgesia with Butrans. Also discussed e-voucher & automatic savings as well as OxyContin savings cards.
PPLPMDL0020000001	Rocky River	OH	44116	1/2/2012	Quick call with Stan, we reviewed the medication guide for Butrans and what to tell appropriate patients, he said he has a few patients on Butrans. I asked if how they are doing and what the feedback is and he said he has not heard anything. I asked if he would let patients know Butrans as another option and he said he might. Reminder that OxyContin is still a long acting option as well.
PPLPMDL0020000001	Parma	OH	44134	1/2/2012	Spoke with pharmacist James, who said he has yet to dispense a Butrans prescription. Reviewed appropriate patient type, focusing on patients taking chronic around-the-clock short-acting opioids. Discussed once weekly transdermal dosing. Also reminded him that savings for Marc's customers is automatic through the e-voucher program. He checked his OxyContin savings cards & did not need any additional cards at this time.
PPLPMDL0020000001	Cleveland	OH	44109	1/2/2012	I talked to Ron,Pharmacy Mgr,about what patients say to him when he provides patient counseling on opioids,Ron said patients usually say their short-acting opioids dont last long enough and will sometimes ask him for suggestions on other opioids.Ron said he's given a couple Butrans patient info booklets to patients so they can talk to their HCP's.we discussed formulary coverage for Butrans and Ron said he's still not seen any Rx for Butrans but will keep giving patient info booklets to those patients he deems appropriate.we talked about appropriate patients for OxyContin and formulary coverage,Ron said no new Rx for OxyContin just the same patients monthly getting their OxyContin scripts.recommended Senokot-S<font color=blue><b>CHUDAKOB's query on 01/13/2012</b></font>Good opening question Amy! Sound like it generated some good discussion.<font color=green><b>BROOKAM's response on 01/17/2012</b></font>-thanks Barry!<font color=blue><b>CHUDAKOB added notes on 01/18/2012</b></font>-Thanks for trying something different.
PPLPMDL0020000001	Lakewood	OH	44107	1/2/2012	Quick call with Aduwa, we reviewed Butrans and OxyContin savings programs. I asked if she would give out medication guides to appropriate pain patients and let them know that Butrans is an option and she agreed.
PPLPMDL0020000001	Cleveland	OH	44130	1/2/2012	Reminder that Butrans can be used with supplemental analgesia.
PPLPMDL0020000001					NON-PRESCRIBER- Reviewed Butrans core messages with Dr Popa. She said she knows she can "do better" in using Butrans. Reviewed appropriate patient type. I asked her what she typically does when a patient on tramadol wants refill after refill or asks for an escalating dose or dosing interval. She said she usually refuses because she does not "like to deal" with that type of patient. Advised that Butrans is a CIII opioid with abuse & addiction potential. I asked what her thoughts were on trying patients like this on a transdermal system that delivers buprenorphine over 7 days. She said she thought it may be good for them. She asked if Butrans is more or less abusable than tramadol or Vicodin. Reminded her that Butrans is a CIII opioid & because it is an opioid, she should use just as much caution in prescribing as she would with other opioid medications. I asked if she would try Butrans on appropriate patients after tramadol, before referring to pain management. She agreed. Reviewed OxyContin 7 tablet strengths available.
PPLPMDL0020000001	Euclid	OH	44123	1/2/2012	Spoke to Ben and Tech, Jessica, about the stocking of butrans. Jessica confirmed that it is stocked and Ben said that he has had a few scripts but he has had issues with all but one requiring PAs. He thinks they were all medical. I explained the commercial coverage focus and gave a formulary grid. I asked if he recalled the prescriber(s). He did not. He said he has on patient taking it without any issues.
PPLPMDL0020000001	Parma Heights	OH	44129	1/2/2012	Spoke with Larissa, pharmacist, reviewing Butrans core messages. She said Dr Levin writes a lot of Suboxone & Subutex. Discussed Butrans indication, letting her know that Butrans is only for pain. I asked if she knows if he prescribes for pain. She said she was not sure. She did not have any further recommendations on what area physicians may be interested in hearing more about Butrans. Discussed savings cards for Butrans & OxyContin & discussed OxyContin 7 tablet strengths.
PPLPMDL0020000001	Euclid	OH	44119	1/2/2012	Spoke to Laurel about the stocking and movement of butrans. She personally had not seen/filled any scripts. She confirmed that she had the 10 and 20mcg. I discussed the indication and the positioning. Gave her a patient info guide to give to potential customers which explained proper application. I asked about oxycontin scripts and she said that has been steady. I offered savings cards for oxycontin but she said most patients have reasonable out of pocket expense. They also have a lot of medicare/medicaid.
PPLPMDL0020000001	Euclid	OH	44119	1/2/2012	Spoke to Joan about the Butrans indication and positioning. I asked her if she was aware if doc had prescribed any yet. She said not that she is aware of and he has been out for about a week and is still out. Left a butrans initiation guide and formulary grid.
PPLPMDL0020000001	Parma	OH	44134	1/2/2012	REPEAT CUSTOMER- I asked Dr Mandat if he finds that his Butrans patients are requesting refills. He said he probably has 4 hospice patients on Butrans at this point. He added that each of them has had refills of Butrans. I asked if the patients typically take supplemental analgesia with Butrans or if they are just on Butrans alone. He said they all take supplemental analgesia. Supported this by pointing out FPI 2.4, reminding him that patients can take supplemental analgesia in the form of opioid or non-opioid medications. Also reminded him of savings cards & patient information booklets in his sample closet. He requested additional Senokot-S & Colace samples, which I provided.
PPLPMDL0020000001	Cleveland	OH	44109	1/2/2012	worked pm&r dept, internal medicine, family medicine and rheumatology departments - left Butrans fpi,initiation guide,patient info booklet and formulary grid for each hcp in departments
PPLPMDL0020000001	Brooklyn	OH	44130	1/2/2012	Spoke with pharmacist Danielle, who said they probably get about one to two Butrans prescriptions per month. Discussed ability for patients to take supplemental analgesia while taking Butrans. Also discussed automatic savings via e-voucher for Butrans & OxyContin savings cards. She requested one package of OxyContin cards, which I provided.
PPLPMDL0020000001	Euclid	OH	44123	1/2/2012	Spoke with Mary Jo briefly about the stocking of butrans. She said she was busy due to the first of the month. She only confirmed that they no longer had butrans as it sat on the shelves for months without moving so they sent it back. Provided her a copy of the patient info guide.



PPLPMDL0020000001	Euclid	OH	44119	1/2/2012	Spoke to Taneeka, about the stocking and movement of butrans. She checked and confirmed that they did have it stocked(must have been autoshipped) but also confirmed that they had not dispensed it. I explained the indication and the positioning. Gave her a couple of patient info guides and explained the proper application of the patch. She said the volume of oxycontin and been steady and no issues with access or questions about the
	Westlake	OH	44145	1/3/2012	Dr was on his way out, I asked if he has been having good success with Butrans, he said patients were doing well. I asked Juan what he has been hearing and he said he really has not heard anything good or bad. He said that he has recommend Butrans as an option to the Dr for some patients, but he said the Dr has not written many scripts lately. We reviewed the managed care for Butrans and I asked if he would continue to remind the Dr about Butrans as an option when he sees appropriate patients. He agreed. I reviewed the savings programs for both Butrans and OxyContin and to continue to use the cards in to 2012.
	Cleveland	OH	44130	1/3/2012	Dr Fedorko asked me to tell the medical student who was with him all about Butrans. Delivered Butrans core messages. The student said he had not yet heard of Butrans. Discussed Butrans as a CIII opioid with abuse & addiction potential. Dr Fedorko shared with the student that he has a few patients on Butrans who are doing well on it. Discussed appropriate patient type, focusing on patients who are taking 3-4 tramadol or Vicodin per day who may want a different option to treat their pain. Discussed OxyContin as an option for patients beyond appropriate Butrans range.
	Cleveland	OH	44102	1/3/2012	I talked to Vicky, Pharmacy mgr, about 6 Butrans core selling messages, showed visual aid and asked Vicky what features of Butrans stood out to her, Vicky said transdermal delivery and one butrans, 7 days buprenorphine. Vicky said she's not seen any Rx for Butrans lately but has given patient info booklets to those patients she feels are appropriate. I showed Vicky opioid experienced patients section, visual aid, discussed these patients and I asked Vicky if she'll continue giving booklets out? Vicky committed to do this. We talked about appropriate patients for OxyContin and discussed formulary coverage. recommended Senokot-S
	Cleveland	OH	44109	1/3/2012	talked to dr about opioid experienced patients-showed visual aid, dr said he has a lot of patients like this in his practice but majority are medicaid and they arent covering Butrans. I asked dr to find 2 commercial insurance patients this week that he can start on Butrans? dr said he will do that. recommended Senokot-S
	Cleveland	OH	44102	1/3/2012	talked to Nagla, PA, about opioid experienced patients, nagla said she see's a lot of patients like this and has been suggesting Butrans to the HCP's. I asked Nagla if she will start 2 commercial patients this week on Butrans? Nagla committed to do this. recommended Senokot-S
	Westlake	OH	44145	1/3/2012	Quick call at window, I let him know that the savings cards for Butrans would still be valid for 2012. I asked how his current patients are doing and he said they are doing well. I asked if he would continue to start new patients and he agreed.
	Mayfield Heights	OH	44124	1/3/2012	Window call....asked doc how his trial experience with butrans has been. He said so far so good. I asked if patients have been refilled. He said he wrote it with refills so he will see. I asked him to try another patient this
	Cleveland	OH	44143	1/3/2012	Quick call....reminded doc of the butrans patient type, once weekly dosing and that commercially insured patients can save up to \$40 off their co pay. I asked him if he would try an appropriate pateint this week. No
	Westlake	OH	44145	1/3/2012	Dr said he has about 10-15 patients on Butrans now and has been having good results. He said he has a patient right now in a room who is taking tramadol around the clock and he would like to try her on Butrans. I asked what managed care and he said Medicaid so he decided not to switch her. I asked if he would start some more new Butrans patients and he agreed.
	Westlake	OH	44145	1/3/2012	Dr told me that he had started a patient on Butrans because she did not want to take any short acting opioids. He said it was for back pain. I asked how the patient was doing and he said she did well but only used Butrans for about 3 weeks. I asked why and he said the pain got better. I reviewed the indication for Butrans and that it is only indicated for chronic pain. He said that he understood this but just wanted to try it anyway for this patient. I reviewed OxyContin as an option instead of short acting around the clock and he said he has many patients on OxyContin.
	Cleveland	OH	44130	1/3/2012	I asked Dr Dab if he ever uses the intermediate strengths of OxyContin, such as the 15, 30, or 60mg doses. He said he usually just uses the 10, 20, or 40mg strengths. Let him know that OxyContin offers 7 tablet strengths, allowing for flexibility in dosing if/when he needs to titrate a patient's dose. He said that was "a good idea". Also reminded him of favorable managed care coverage, including coverage on CCRx Medicare D plan. Also discussed Butrans managed care coverage/savings cards, reminding him that commercial plans will be his path of least resistance for getting it covered for patients at a reasonable co-pay.
	Westlake	OH	44145	1/3/2012	I reviewed that OxyContin is still a long acting option and he said most of his patients are on OxyContin. I asked how they are doing and he said fine, but they always ask for an increase in their dose and they are frustrating to treat. I asked if he has been able to try a few new patients on Butrans and he said he hasn't really switched anyone yet, but he will start talking to more patients about Butrans as he would prefer that they try Butrans instead of increasing their dose of short acting. He put the Butrans medication guides in the waiting room.
	Cleveland	OH	44109	1/4/2012	dr said he's continually starting patients on Butrans and patients are doing well so no complaints. i asked dr who are the patients he's starting on Butrans? dr said some patients have been taking tramadol and others vicodin, every day for their chronic pain, but werent controlled and dr thought Butrans would be appropriate. i asked dr if he has more patients like this to start on Butrans this week? dr said he's sure he does and he'll continue starting patients on Butrans, focused dr on BWC and commercial plan patients. recommended Senokot-S
	Cleveland	OH	44109	1/4/2012	dr said she started another patient on Butrans and is interested to see what clinical results she gets from Butrans. I asked dr why she chose Butrans for this patient? dr said patient was taking percocet every day, pain wasnt controlled so instead of increasing percocet dose she wanted to try Butrans. I showed opioid experienced patients section, visual aid and asked dr if she has more patients like the 1 she started? dr said yes she has a lot of patients that are appropriate for Butrans but not every patient wants to wear a patch for their pain and it depends on insurance. i focused dr on commercial plan patients and BWC, i showed dr formulary grid and i asked dr if she could start a couple BWC or commercial plan patients this week on Butrans? dr said she will do that as long as insurance pays for Butrans. recommended Senokot-S
	Maple Heights	OH	44137	1/4/2012	Spoke with Steve, pharmacist. Reviewed Butrans indication, dosing, & appropriate patient type. He said they do have it on the shelf but see zero prescriptions for it. I asked what type of managed care mix he sees at this location. He said they have probably 80% Medicaid or Medicare, including several dual eligible patients. Reviewed managed care coverage for Butrans & OxyContin. He said that because they see so much government insurance at this location, they did not need any savings cards.
	Cleveland	OH	44143	1/4/2012	Window call....I asked doc if he has any patients that might benefit from a once weekly transdermal analgesic for their moderate ATC pain. He said maybe. I gave him a formulary grid and initiation guide pointing out the CIII status and the three dosing options.
	Cleveland	OH	44104	1/4/2012	dr said she has 1 patient on Butrans and patient is doing great, i asked dr if she has more patients like this that she can start on Butrans? dr said not really, dr said majority of her patients taking vicodin and percocet only want their pills and arent willing to try a patch. dr said she's talked to several patients about Butrans that she feels are appropriate but patients arent willing to try Butrans. i showed dr Butrans patient info booklet and asked if she could give these to patients she feels are appropriate but perhaps need some education on Butrans? dr said she will try that. i asked dr if she could start 2 patients this week on Butrans, that she feels are appropriate? dr said she will do her best, focused dr on commercial plan patients. recommended Senokot-S
	Cleveland	OH	44113	1/4/2012	dr said he started 1 patient 2 weeks ago and has been giving patient info booklets to those patients he feels are appropriate for Butrans but are hesitant to start on Butrans. i asked dr if he has more patients like the 1 he started, that have BWC or commercial insurance, that he can start on Butrans this week? dr said he does and will continue starting patients on Butrans. recommended Senokot-S
	University Hts	OH	44118	1/4/2012	Quick call....reviewed the butrans indication and the 7 day delivery in a CIII narcotics. I asked him to try butrans for one patient this week. Reminded him that it is covered on BWC similar to oxycontin and most commercial plans. Provided formulary grids.
	Cleveland	OH	44121	1/4/2012	Quick call....I asked doc if he thinks that a product like butrans provides any benefits to his patient population. He said he did not know and but thought that butrans would be too expensive for his medicare patients. I asked him to try one patient that may have a commercial plan such as medical mutual or anthem. I reviewed the plans on the formulary grid.
	Cleveland	OH	44109	1/4/2012	dr said he started 1 patient on Butrans a few weeks ago and patient is happy doing well on Butrans. i asked dr why he chose Butrans for this patient? dr said patient was taking vicodin every day, pain wasnt controlled and dr suggested the patient try Butrans and see what happens, so far patient hasnt called back so dr is happy. i asked dr if he has more patients like this that he can start on Butrans? dr said he has a lot of patients he would like to start on Butrans but it comes down to insurance coverage. we discussed BWC and commercial plan patients starting on Butrans, showed formulary grid. showed dr visual aid, opioid experienced patients section and asked dr if he can think of a few patients today or tomorrow that may be appropriate for Butrans? dr said yes he will think about it and if insurance covers Butrans, he'll start some more patients. recommended Senokot-S
	Cleveland	OH	44114	1/4/2012	dr said she's not started any patients on Butrans recently but does have some patients on Butrans and they are doing fine. i showed dr visual aid, opioid experienced patients, and asked dr if she treats patients like this? dr said yes she has a lot of patients that she can start on Butrans and will be starting more. i asked dr if she'll start a couple BWC patients this week on Butrans? dr committed to do this. recommended Senokot-S
	Cleveland	OH	44106	1/4/2012	i asked dr what he's hearing from patients that triggers him to consider Butrans? dr said all patients are different, some will ask for something else or if he feels patients are maxed out on short-acting opioids he'll consider a long-acting opioid. dr said biggest challenge here at main campus is that majority of patients are medicaid. i asked dr if he had a couple commercial plan patients that are opioid experienced, showed visual aid, dr said he may have a few. i asked dr if he could start those commercial patients on Butrans this week? dr said if he feels Butrans is appropriate, he'll do that. recommended Senokot-s
	Cleveland	OH	44114	1/4/2012	dr said he started more patients on Butrans over the past 2 weeks, dr said these are mainly his percocet patients that he doesnt feel percocet is controlling the pain so he's starting patients on Butrans. i asked dr if he's discussing application/rotation info with patients? dr said sometimes but he usually just gives patient info booklet. I showed patient info booklet and asked dr to show patients the application/rotation info in booklet, dr agreed to do this. i asked dr if he'll start more BWC patients this week on Butrans? dr said he will do this. recommended Senokot-S
	Cleveland	OH	44109	1/4/2012	worked pm&r dept
	Cleveland	OH	44104	1/4/2012	dr said he's not thought of Butrans lately but does have 1 patient on Butrans who is doing well. i asked dr if he has more patients like this 1 he started? dr said he has a lot of patients taking short-acting opioids that are appropriate for Butrans but it comes down to insurance and if the patients are willing to wear a patch. i showed dr commercial plans formulary grid and focused dr on these patients, showed visual aid opioid experienced patients and asked dr if he treats patients like this? dr said yes he does. i asked dr to think of 2 patients this week like this, that have commercial insurance, to start on Butrans, dr said he will consider that if insurance covers
	University Heights	OH	44121	1/4/2012	I asked doc if he has BWC patients that may be taking short acting tabs for their moderate to severe pain. He said some. I asked him to try one of those patients on butrans 5mgc for loe dose opioid patients, and 10mcg if they are taking greater than 30mg of a morphine equivalent. He said as long as he doesnt have to fill out any forms. Told him there should be no PA required for BWC patients. REviewed the CCRx coverage of oxycontin at a preferred status.
	Cleveland	OH	44106	1/4/2012	dr said he started a patient a couple weeks ago on Butrans, i asked dr to tell me about the patient he started on Butrans, dr said patient was taking a couple percocet a day and not controlled so dr thought Butrans could be an option. i showed visual aid, opioid experienced patients, and asked dr if he see's these patients? dr said yes all the time, i asked dr if he could start a couple patients today, like the one he started recently on Butrans? dr said he will do that but depends on insurance. dr said there's a lot of medicaid patients here and medicaid not covering Butrans. i asked dr if he has a couple commercial plan patients that he could start on Butrans today? dr said he's not sure but will keep Butrans in mind for commercial plan patients. recommended Senokot-S
	South Euclid	OH	44121	1/4/2012	Window call.... Asked doc about the patient he said he had in mind for butrans - were they able to get their script filled. He said that he had to re-write the script and give another savings card because the patient lost both. He said he had not back from them since so he thinks they got it. I reminded him of the 5 and 10mcg starting doses. Gave an initiation guide. <font color=blue>cb</font>CHUDAKOB's query on 01/13/2012<b></font>-Good job of asking a question on this "window call". It appears you did learn something on this call.<font color=green>cb</font>SIMERTOC's response on 01/16/2012<b></font>-Thanks.<font color=blue>cb</font>CHUDAKOB added notes on 01/18/2012<b></font>-Thank you! Keep working on this.
	Cleveland	OH	44106	1/4/2012	worked pain management dept

PPLPMDL0020000001	Cleveland	OH	44130	1/4/2012	I asked Dr Kansal where he saw a place for long-acting opioids like Butrans & OxyContin if, as he has told me, patients are unwilling to switch from short-acting opioids to long-acting opioids. He said if he is the first physician someone sees for their pain, he puts them on a long-acting medication rather than short-acting. I asked how often this occurs. He said almost never. He added that patients almost always see other physicians first & are already on short-acting opioids when they come to see him. He asked me when he would ever see a patient for their pain before another physician. I asked what about an established patient who complains of pain due to osteoarthritis. He asked me if I thought that patient should be put directly on a narcotic. I told him he was the physician & would be the one to determine if that would be appropriate & asked if he would first go to an NSAID/COX-2. He said he would only ever use a non-steroidal for osteoarthritis & would never use a narcotic medication for that condition. I asked about a patient who presents with pain due to spinal stenosis. He said that patient would have gotten pain medications from another doctor by the time they saw him. I asked if he would keep an open mind & would at least offer Butrans & OxyContin as an option to patients as appropriate & he Dr Chagin asked me to tell the PA student who was with him about Butrans. Reviewed with her Butrans core messages. She said she had not heard of it yet. Presented initiation guide & discussed dosing, CII, abuse/addiction potential. Dr Chagin said Butrans might have been good for the patient they had just seen, but added that the patient was taking Vicodin plus Percocet multiple times per day, so he probably was not a candidate for Butrans. I agreed that this patient may be out of the appropriate Butrans range. I asked Dr Chagin if he would consider that patient for an appropriate dose of OxyContin q12h. He said he had not thought of that, but that would be a good idea. He asked how he would initiate OxyContin in this patient. Showed him conversion/titration guide & showed him the pages for hydrocodone & oxycodone products. He said he would definitely try changing this patient to OxyContin q12h because he is unhappy with what the patient is currently on. Discussed abuse/addiction potential of all opioid medications, including Butrans & OxyContin. I asked how many refills he gives patients of Butrans when he first prescribes it. He said sometimes one but likes them to follow-up or call him first. I asked if this is the point when he would evaluate & titrate if necessary & he said yes. Reviewed dosing/titration. I asked Dr Chagin if he would continue to identify Butrans patients & prescribe accordingly & he agreed.
	Parma	OH	44129	1/4/2012	I asked doc if he has had a chance to prescribe butrans as he promised he would. He said not yet. (?) I showed him the 3 strengths and asked which strength he was likely to use. He said the 5mcg. I explained that the 5mcg is more for opioid naive patients or those taking just a couple of tablets of low dose opioid. I told him that patients can titrate to 10mcg if necessary after 3 days. He noticed the 3rd tier status for all the commercial plans and objected. I explained that the savings card will offset the cost to patients on those plans. He said that this year will be the year for butrans. Thanked him in advance.
PPLPMDL0020000001	Euclid	OH	44119	1/4/2012	Quick call- Caught Dr Taylor between patients. I passed back information on PurdueHCP.com, describing the interactive nature of the programs for Butrans. I told her I thought it may be of value to her as she evaluates who is & is not appropriate for Butrans. She said she might have a look if she can find the time. Also reminded her of OxyContin 7 tablet strengths for flexibility in titration. She waved, thanked me, & walked into a room.
	Parma	OH	44129	1/4/2012	Window call....introduced butrans indication, CII status, 7 day delivery and other selling messages. Gave him formulary grid and savings cards. He said he does not like using savings cards. I explained the savings of up to \$40. Nothing learned.<font color=blue><b>CHUDAKOB's query on 01/13/2012</b></font>During this "window call, you got out the indication, what looks like most of the selling messages, you had time to give a formulary grid and discuss the savings cards. It appears you got some time with the physician. Why was there nothing learned?<font color=green><b>SIMERTOC's response on 01/16/2012</b></font>I was blurring it out and he wasn't exactly engaged.<font color=blue><b>CHUDAKOB added notes on 01/18/2012</b></font>That is where you come in. Asking him a good question my help get him engaged.
PPLPMDL0020000001	Cleveland	OH	44121	1/4/2012	Window call....Briefly reviewed the butrans indication, CII status, 7 day delivery. I asked her if she would give butrans another try for a patient currently failing on tramadol and is younger than medicare age. She said she would try. I asked her to be sure to give a savings card.
	South Euclid	OH	44121	1/4/2012	I asked Dr Gigliotti if he finds that he uses all 7 of the OxyContin tablet strengths that are available. He said he uses "a lot" of OxyContin & does use all the tablet strengths. He added that he likes the 60mg dose & finds that many patients end up on that strength. I asked if he continually evaluates patients' pain medications & keeps OxyContin in mind as an option offering q12h dosing with the flexibility of 7 strengths. He said he does & will keep doing it. He also added that he looks for Butrans patients but just hasn't seen anyone lately. Discussed managed care coverage for both products.
PPLPMDL0020000001	Parma	OH	44129	1/4/2012	Dr Moufawad said with it being a new year, he will have new Butrans prescriptions. I asked him if he is ready to prescribe & he said yes. I asked what type of patient he is thinking of. He said he has a few patients taking 3-5 Percocet per day who he is considering switching to Butrans, allowing one Percocet per day for breakthrough pain. I told him it sounds like he is on the right track. Discussed OxyContin as an option for patients beyond the Butrans appropriate range. He said he is not going to accept patients into his practice who are on high doses of opioids.
	Bedford	OH	44146	1/4/2012	I talked to George, Pharmacist, about Butrans stocking. George confirmed they have 1 carton of Butrans 5mcg. we discussed importance of stocking all dosage strengths. I showed butrans visual aid and we discussed appropriate patients for Butrans. George focused on opioid experienced patients. I asked if George ever recommends medications to patients when providing medication management therapy? George said he will occasionally recommend medications to patients and have them talk to their HCP's. I asked George if he would recommend Butrans to patients so they can talk to their HCP's about Butrans and give them patient info booklets? George committed to do this. we discussed OxyContin stocking and formulary coverage. I recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44106	1/5/2012	I discussed 6 Butrans key selling messages with dr, dr talked about transdermal delivery and once weekly dosing. I showed dr appropriate patients section, visual aid, asked dr which type of patient she would most likely prescribe Butrans for? dr said her patients taking tramadol or vicodin that arent controlled and are always asking for something else. I showed dr opioid experienced patients section, asked dr if she has patients like this, dr said yes. I asked if dr she can start 2 commercial insurance patients this week on Butrans? dr said she will talk to some patients, see if they are interested in trying Butrans and as long as insurance pays for it she's happy to try Butrans in a few patients. told dr I would stop back in a week to hear how those discussions went with 2 patients and answer any questions, dr said that was fine. recommended Senokot-S
	Cleveland	OH	44113	1/5/2012	I asked Dr Pai where OxyContin currently fits into his practice. He said that he typically uses it when a patient is taking Percocet multiple times per day. He added that many of the patients who he has on OxyContin or either older patients or have malignancies. I asked him what does he finds himself using most frequently. He said usually 10mg or up to 20mg. He added that his patients often have a difficult time finding 15mg OxyContin at retail pharmacies so he tells them to get their prescription filled at the outpatient pharmacy at the hospital. I asked him at what point he usually switches someone from Percocet to OxyContin- is it a matter of how high their dose is? He said that once someone is on Percocet 3 times per day & wants an increase in dose, he will make the switch to a q12h dose of OxyContin. I asked how he would make the determination between a low dose OxyContin patient & a Butrans candidate. He said he would use Butrans more on patients who were not well-controlled on tramadol whereas he would use OxyContin on patients who were in "more severe" pain. He said he just recently gave Butrans to a patient who had been taking tramadol for chronic pain. Also discussed the importance of appropriate patient selection & advised that like all opioids, OxyContin does carry abuse/addiction potential.
PPLPMDL0020000001	Independence	OH	44131	1/5/2012	Reminded him of favorable Medicare D coverage for OxyContin.
	East Cleveland	OH	44112	1/5/2012	I asked doc if he sees any merit to a product like butrans which a 7 day CII analgesic. He said he is sure there is some merit but many of his patients need stronger meds. I told him that oxycontin may be more appropriate for those patients but maybe he has just a few that might be appropriate for butrans. He said maybe and that he will look for those patients.
PPLPMDL0020000001	Cleveland	OH	44112	1/5/2012	I asked doc if he has had any feedback from the patients he tried on butrans. He said he does not know as he didnt hear anything back from them. I asked if he wrote the script(s) with refills. He said he must have. I asked him if he would continue to try it for a fair trial. He said to let him know about upcoming talks on butrans.
	Cleveland Hts	OH	44118	1/5/2012	Quick call....I asked doc how his patients are doing on feedback/if he has gotten any feedback. He said no not yet and that he has been gone for 10 days on vacation. I asked him if he would continue to prescribe butrans in the meantime. He said yes, as long as the patients can get it. I assured him that butrans is well stocked in area pharmacies.
PPLPMDL0020000001	Cleveland	OH	44113	1/5/2012	dr said he's not started anyone on Butrans recently. dr said he's continually looking for new patients to start on Butrans and will start more patients but biggest challenge is that medical aid wont pay for Butrans and thats the biggest plan he has here. we talked about dr starting a couple BWC or commercial insurance patients and dr said he will keep that in mind.
	Cleveland Hts	OH	44118	1/5/2012	I reminded doc of the butrans indication asked him where he thinks he would use it. He said it might be good for tramadol patients. I told him about the 5 mcg for opioid naive and 10mcg for opioid experienced patients taking 300mg of tramadol. Showed him the initiation guide. Reminded him of the commercial insurance coverage, savings cards similar to oxycontin.
PPLPMDL0020000001	Cleveland	OH	44195	1/5/2012	worked Neurology dept-left left Butrans fpi, initiation guide, formulary grid, patient info booklets, BUP3015 and my business card for dr bamford dr mays, dr covington-chronic pain. worked anesthesia/pain management-same promotional items for Dr. Mintzer, Dr. Mekhal, Dr. Cheng, Anne Crawford, Kathy kraus, Dr. Vrooman and Dr. Katyal. worked rheumatology-same info as above for dr calabrese, betsy kirchner, NP, dr chatterjee and dr deal.
	Highland Heights	OH	44143	1/5/2012	Window call...I reminded doc of the butrans patient type - one falling on low dose of tramadol or other short acting. He said he knows and has been on vacation. I reminded him to focus on commercial insurance plans for butrans and that oxycontin patients with CCRx are now being covered at a preferred 2nd tier status.
PPLPMDL0020000001	Fairview	OH	44111	1/6/2012	Quick call with Tom, we reviewed Butrans medication guide and indication. I asked if he would let appropriate patients know about Butrans as an option and he said that he would. He said he thought he saw a script but didn't remember who wrote. We reviewed OxyContin as an option instead of short acting around the clock.
	Cleveland	OH	44113	1/6/2012	I showed dr confident traveler flashcard for OxyContin, discussed managed care coverage for OxyContin and dr said he has a lot of patients on OxyContin and no issues with insurance coverage at the moment. told dr that was great and asked who's the appropriate patient for OxyContin? dr said patients who are maxed out on their short-acting opioids and arent getting pain relief, he'll consider a long-acting opioid. I asked dr if he'll continue prescribing OxyContin for these patients? dr said yes he will. I asked dr how Butrans could fit into his practice? dr said he wasn't sure he thinks of Butrans as another Duragesic patch so not sure where he will use Butrans in his practice. showed dr Butrans visual aid, discussed appropriate patients and I asked dr if he would consider Butrans right after tramadol? dr said he might. dr said it depends on patient if patient is willing to wear a patch for a week and if insurance covers Butrans, showed formulary grid and asked dr if he can think of 2 patients today or next week with commercial insurance that he can start on Butrans? dr said he'll think about it and will give it a dr said he's given a few patient info booklets out to those patients he feels are appropriate for Butrans. I asked dr who are the appropriate patients for Butrans? dr said patients taking short-acting opioids around the clock for their chronic pain but arent controlled. I told dr that was good he had those patients in mind and showed dr Butrans indication in visual aid. we discussed appropriate patients, dr focused on opioid experienced. I asked dr if he can think of 2 patients today that may be appropriate for Butrans? dr said he knows of a couple patients that he wants to start on Butrans but he thinks they will be in next week or week after. I asked dr if he'll start them on Butrans? dr said yes he will do that. focused dr on commercial insurance patients. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	1/6/2012	Reviewed Butrans core messages with Dr Mike. Discussed the importance of appropriate patient selection. He said one of the things he does not like about treating patients for pain is you cannot tell by looking at an X-ray if someone has pain. He said that he always worries about getting sued for malpractice for prescribing opioids if the patient ends up abusing it or taking it not as they are directed to. I asked if he finds that documentation of details about patient interaction helps with this. He said it does but it becomes difficult because a doctor's charts can always be questioned as well. Discussed Butrans as a once weekly option for appropriate patients for whom Dr Mike is considering opioids for moderate to severe chronic pain. He agreed to keep it in mind. Also discussed OxyContin, offering 7 tablet strengths for flexibility in dosing/titration.
	Sagamore Hills	OH	44067	1/6/2012	I reminded Dr Roheny of our previous conversation when he told me that he wanted to use more Butrans. I asked if he has put this into practice yet. He said no. I asked how many Vicodin refills he has written recently & he said "a lot". I asked if he had thought of Butrans for any of those patients. He did not answer. Reviewed appropriate patient type & managed care coverage. Dr Roheny asked if dosing is 5, 10, & 15mcg. Handed him initiation guide & pointed out doses of 5, 10, & 20mcg. He said he would try to be a better prescriber this year. Also discussed OxyContin q12h as an option for appropriate patients beyond Butrans range.
PPLPMDL0020000001	Parma	OH	44129	1/6/2012	Dr Rood said his patients on Butrans are doing well. He added that one female patient who is on Butrans 20mcg no longer requires any type of short-acting medication for breakthrough pain as she is completely controlled on Butrans alone. Showed him patient information booklet & discussed how they can be given to appropriate patients so that they can make an informed decision on if they think Butrans might be something they would want to try for their moderate to severe chronic pain. He agreed that this would be helpful in discussions with patients. Dr Rood said he does not have a lot of patients who he could convert over, but he does have some & he has no clinical objections to Butrans. I asked if he would consider Butrans for a patient who had not yet been on opioid therapy. He said he would probably not go to Butrans first. Discussed OxyContin q12h as an option for appropriate patients beyond Butrans range. He said he does see a place for it although he thinks that it is still over-prescribed. Discussed importance of appropriate patient selection, also reviewing that both Butrans & OxyContin are opioids & carry abuse & addiction potential.
	Chagrin Falls	OH	44022	1/6/2012	I asked if he had tried patients taking tramadol on Butrans like we discussed. He said he hasn't but he said he will try. He said he has not due to his bad experience with managed care. I asked him to find a few commercial insurance patients and he agreed.
PPLPMDL0020000001	Westlake	OH	44145	1/6/2012	

PPLPMDL0020000001	Cleveland	OH	44113	1/6/2012	dr said she's been giving patient info booklets out to patients but hasn't started anyone yet. I told dr that was great and asked why she chose to give booklets to these patients? dr said patients were maxed on tramadol and she thought Butrans would be a different option instead of converting patients to another short-acting opioid. I asked dr if she'll continue handing out booklets? dr said yes she will do that. I asked dr if there are 2 patients, commercial insurance, that she can think of where Butrans would be an option? dr said she has a few patients coming into office in the next few weeks and she'll talk to them and see if they are willing to try Butrans. focused dr on tricare and commercial insurance patients. recommended Senokot-S
PPLPMDL0020000001	Mayfield Hts	OH	44124	1/6/2012	I asked doc where he is seeing the best results with butrans. He said he only has a few patients on it but he likes it for older patients that may already be on other medications. I reminded him to just stick with those patients that have commercially insured plans like Anthem, medical mutual, etc. He said he would. Gave him a formulary grid for butrans and oxycontin.
PPLPMDL0020000001	Cleveland	OH	44109	1/6/2012	worked pm&r -left dr malkamak, dr harris, dr fox and dr daffari Butrans patient info booklets, formulary grids, initiation guides, BUP3015 clinical trials and my business card for each dr as I couldn't see them today. worked internal medicine-left dr jones, dr lindheim and dr gelehrter same info as above. worked family medicine-left dr chrisman, dr forde, dr krofina, dr liu and dr magoulas all of the same info
PPLPMDL0020000001	Westlake	OH	44145	1/6/2012	Quick call at his other office, I reviewed the managed care for Butrans and savings cards for both Butrans and OxyContin. I asked if he had any patients today he could start on Butrans and he said he will.
PPLPMDL0020000001	Sagamore Hills	OH	44067	1/6/2012	Dr Scanlon showed me that he had just written a Butrans prescription for the 5mgc dose for a patient. He added that he has been prescribing Butrans because he is having good success with it. Discussed patient information booklets. I asked if he has been using them when he talks to patients about Butrans. He said yes & that he sometimes gives the booklets to patients to read about & allows the patient to then decide if they would like to try Butrans to treat their pain. I told him it sounds like he is doing the right thing. Discussed OxyContin with 7 tablet strengths as an option for patients who are beyond the appropriate range for Butrans. Dr Scanlon said he finds OxyContin to be effective in treating patients' pain & he does use it when patients are in more severe pain. I asked Dr Scanlon if he would continue to offer Butrans & OxyContin as an option when appropriate & he agreed.
PPLPMDL0020000001	Cleveland	OH	44135	1/6/2012	Quick call, Dr wanted more patient medication guide. He said that he has been starting a lot of patients on Butrans and has been getting good results. I did not have time to gain further information.
PPLPMDL0020000001	Cleveland	OH	44143	1/6/2012	Discussed the butrans selling messages over lunch - indication, positioning, CIII status, once weekly application. Also went over the proper application and disposal, formulary coverage and savings cards. He asked if the patch can be cut. I told him no and that it should not be altered in any way. He remembered that it was a CIII and can be called in. He wanted to know what the cash pay cost is. I asked him to focus on commercial (and younger than medicare) patients. He said their practice has a lot of medicare. He thought butrans would have been good after darvocet went off the market. told him that Butrans may still be an option for former darvocet patients.
PPLPMDL0020000001	Chagrin Falls	OH	44022	1/6/2012	He said he would see about prescribing. Quick call- Gave Dr Hudson an OxyContin conversion guide & asked her where OxyContin currently fits into her practice. She said she thinks she uses it a lot. Discussed 7 available tablet strengths, offering flexibility in dosing & titration. Also asked about her experience with Butrans. She said she would not prescribe it. I asked her why not. She said she does not know enough about it & she "doesn't want someone overdosing". I agreed that she should use caution in prescribing Butrans, as with all opioids. I asked what information I could provide to help her feel more comfortable with Butrans. She said nothing & that it just needs to be out for longer before she is
PPLPMDL0020000001	Mayfield Heights	OH	44124	1/6/2012	Doc said he didn't have much time to talk. I asked him if he has any concerns about trying butrans for patients instead of titrating them on vicodin or other short acting. He said no and that he would do better. Gave him a formulary grid and initiation guide.
PPLPMDL0020000001	Cleveland	OH	44111	1/6/2012	We reviewed the dosing for OxyContin, Dr said that he is still prescribing OxyContin often and he especially likes Butrans for cancer patients. We reviewed the initiating guide for Butrans and he said many of his patients are on higher doses of opioids, but he does have a few patients taking tramadol. He said he will try it.
PPLPMDL0020000001	Cleveland	OH	44143	1/6/2012	Discussed the butrans selling messages over lunch - indication, positioning, CIII status, once weekly application. Also went over the proper application and disposal, formulary coverage and savings cards. Doc asked about the molecule and if there is MU activity. Told him it is buprenorphine and is a partial agonist with some mu activity. He also asked if butrans can be used to treat addiction. I told him that butrans is only indicated for pain. He said he would think about it.
PPLPMDL0020000001	Euclid	OH	44132	1/6/2012	Discussed the butrans selling messages over lunch - indication, positioning, CIII status, once weekly application. Also went over the proper application and disposal, formulary coverage and savings cards. He asked about the effect of renal impairment. I explained that the pk profile of butrans is not altered during the course of renal failure (per sec 8.7). He also asked about skin sensitivity. I showed him the AE profile and the incidence of application site pruritis. He said the biggest problem will be cost. I asked him to focus on commercially insured patients and be sure to give them a savings card. He said he might prescribe tramadol as high as 100 QID. I showed the approximate starting dose of 10mcg for those patients.
PPLPMDL0020000001	Waterford	OH	45786	1/13/2012	W - Has written Butrans a few patients and likes what he has seen thus far. Started the patient on 10mcg/hr from vicodin. I - Butrans follow up and review of appropriate patient selection when the indication is met. Butrans for patients who are uncontrolled on their current therapy and a change has been requested. Review of the ability to titrate with Butrans after 72hrs and the use of supplemental analgesia can be utilized if necessary. Review of formulary coverage and savings card program eligibility.
PPLPMDL0020000001	Waterford	OH	45786	1/13/2012	W - Vickie hasn't written for Butrans but knows that Dr. Waters has a couple of times and maybe even Miral. Will continue to keep in mind as an option when a long acting agent may be needed. I - Review of Butrans indication, 7 days of buprenorphine delivery in 1 application with a CIII scheduling. Use of initiations guide to define appropriate patient selection when the indication is met. Patients who request a change from their current therapy due to uncontrolled pain. Review of formulary coverage - commercial plans with a 3T status. Savings card program eligibility.
PPLPMDL0020000001	Cleveland	OH	44111	1/13/2012	Spoke with Dr in the hospital, he asked me how Butrans is going. I asked him how it's going for him. He said he hasn't really had a chance to try a lot of patients. I asked if he thinks a 7 day patch as a place in his practice. He said he should try it and see and I asked if he would.<font color=blue><b>CHUDAKOB added notes on 01/19/2012</b></font>Seeing a Dr. in the hospital? Great idea!!! Good work!!!
PPLPMDL0020000001	Fairview	OH	44111	1/13/2012	Spoke with Katie, she said they had 2 patients on Butrans but it may be down to one now. She said they are instructing the patients on how to use Butrans and handing out the medication guide. She asked if the savings program was extended and I reviewed the savings programs for Butrans and OxyContin.
PPLPMDL0020000001	Cleveland	OH	44111	1/13/2012	I learned that Barbara is in charge of handing out patient info and savings cards. She or the nurses usually take the calls from patients who say their pain is not well controlled on their current medication. I asked what she usually does, she said they usually have to come in to see the doctor but it just depends on the patient and what they are currently taking. I reviewed Butrans as an option and she said she would remind the Drs about it as an option. She did not know what their hesitation was in prescribing Butrans.
PPLPMDL0020000001	Independence	OH	44131	1/13/2012	I asked Dr Jack what the odds were that someone he was seeing today would ask for an increase or change in their chronic Vicodin prescription. He said that the chances of that are very good. I told him that I have an option for a potential solution & reviewed with him that that patient may be a candidate for Butrans once weekly. I let Dr Jack know that the patient could take immediate-release opioids or non-opioids for supplemental analgesia if necessary. I asked if he would prescribe Butrans for that patient if appropriate. He did not answer. Dr Jack grabbed the titration guide out of my hand & said that at some point all of this "will click". Reminded him of OxyContin savings cards before he walked away.
PPLPMDL0020000001	Cleveland	OH	44125	1/13/2012	Spoke with pharmacist, Chris, & reviewed Butrans with him. Also went over appropriate Butrans patient type & range. I let him know I am focusing with physicians on prescribing Butrans for appropriate patients who are not well-controlled on 3 tramadol per day & who are refilling their chronic opioid over & over. Chris said he thought this was a good patient type to work with for Butrans. Discussed OxyContin savings cards & Chris requested one package. I asked him if he remembered any new OxyContin prescriptions recently or if it is only continuing prescriptions. He said that he doesn't know for sure as he has not been paying attention but said he would let me
PPLPMDL0020000001	Waterford	OH	45786	1/13/2012	W - Miral said that she initiated therapy with Butrans on a couple patients last month and hasn't seen them back yet. The patients were both started on 10mcg/hr of Butrans and had been on vicodin but needing stronger therapy. I - Butrans follow up and review of appropriate patient selection when the indication is met, patients are uncontrolled on current therapy and a change has been requested. Use of initiation/titration guide to discuss the ability to titrate after 72hours and that 20mcg/hr is the max dose. Use of the initiation guide to also discuss the use of supplemental analgesia can be utilized with Butrans. Review of formulary coverage and savings card
PPLPMDL0020000001	BEACHWOOD	OH	44122	1/13/2012	Spoke with pharmacist Bill who said he has not filled any Butrans prescriptions. Spent time reviewing appropriate patient type. Focused on patients taking chronic tramadol around-the-clock. I asked Bill if this sounded like customers he can think of. He said yes. I asked him if he would feel comfortable recommending Butrans to those patients or their physicians when he notices they are getting their tramadol refilled over & over. He agreed to do this & added that he felt that patients would appreciate that. Discussed ability to take supplemental analgesia for breakthrough pain if necessary. Also discussed OxyContin savings cards. He requested one package. I asked if he has seen any new OxyContin patient starts lately. He said not that he can think of. He added that they are very picky when it comes to whose OxyContin prescriptions they will fill. Bill said it has to be a patient who they trust. I agreed that OxyContin does carry abuse/addiction potential & that he should be aware & cautious when filling prescriptions.
PPLPMDL0020000001	Beachwood	OH	44122	1/13/2012	Spoke with nurse, Donnie, who said Dr Warren was too busy this morning to see me. Reviewed with him Butrans & appropriate patient type & asked him if patient profile of Emma sounded like patients who Dr Warren sees. He said yes. I asked if Donnie knows any specific reason Dr Warren has not at least tried Butrans. He said he knows of nothing. He said he would try to get me an appointment with Dr Warren for later today or next week. Discussed OxyContin savings cards, but Donnie said he does not need them. I asked if he knows if any new patients have been started on OxyContin lately. He said not that he knows of.
PPLPMDL0020000001	Cleveland	OH	44111	1/13/2012	Spoke with Braylon, I asked if he has seen any new Butrans scripts, he said he hasn't but they have a few patients on Butrans. We reviewed the medication guide and use of supplemental analgesia. He said that he would hand the booklets out to new patients. I asked if he's seen new scripts for OxyContin and he said they seem to always have new OxyContin patients.
PPLPMDL0020000001	Independence	OH	44131	1/13/2012	Quick call with Dr Rob. Attempted to stop him with him Butrans & OxyContin savings cards. He just thanked me & walked away.
PPLPMDL0020000001	Garfield Hts	OH	44125	1/13/2012	I asked Dr Sadowski if he thought it made sense to use Butrans for patients taking chronic tramadol 3 times per day who were not well-controlled. He said that he has been thinking about Butrans. I asked if he could think of a specific patient who fit that description. He said he is "thinking of patients for Butrans." Reminded him that he could start a patient like the one we are discussing at a 5mcg dose of Butrans & can allow breakthrough medication if necessary. Dr Sadowski showed me a Butrans patient information booklet & told me that he even has Butrans information on his desk. Reminder for OxyContin 7 tablet strengths.<font color=blue><b>CHUDAKOB's query on 01/19/2012</b></font>Clarifying question: What types of patients are you thinking of for Butrans? What is stopping you from trying it on those patients? Instead "reminding him" after he said he is thinking of a patient, try a clarifying question. Your thoughts?<font color=green><b>APSEGAS's response on 01/20/2012</b></font>-it's worth a shot! Thank you.<font color=blue><b>CHUDAKOB added notes on 01/25/2012</b></font>-Try to replace the word remind in your sales presentation!
PPLPMDL0020000001	Cleveland	OH	44111	1/13/2012	Met new NP, she is working mostly in-patient at the hospital and Barb moved to in-office. She had not heard of Butrans, and we reviewed the key messages. She asked if Butrans was on formulary at the hospital yet and I let her know that we are discussing it with CCF. She agreed to look at the information further. We reviewed OxyContin as an option that she can recommend in the hospital, she said that she does see it used for patients especially when they come in and are already taking OxyContin.
PPLPMDL0020000001	Independence	OH	44131	1/13/2012	Roman said he thinks OxyContin is a great drug & that he prescribes it frequently. I asked if he is still starting new patients on it & he said yes. Also discussed titration with the flexibility of 7 tablet strengths. Also discussed savings cards, reminding him that patients with any type of government insurance are not eligible to use them. He said it can be expensive even with the cards. I asked him why he hasn't been using any Butrans. He said that he is not going to use it because it is way too expensive & no one can afford it. I asked if he knew what plans gave him problems. He said he does not have the time to keep track of who has what insurance. Discussed commercial insurance coverage. Roman said he tried to prescribe it for about 7 patients & each of them called back saying it was over \$100. I told him it sounded like they were Medicare D plans. He said he has no time to think about insurance. He also added that he "thinks" someone did try it & liked it for awhile but then started getting headaches while she was on it. He said she liked it at first then discontinued. He went on to say that he was disappointed in the dinner program because no one would give him any off-label uses for Butrans. I told him he would not get that from me or any other representative of Purdue, including a speaker. Roman said he likes the idea of a once weekly patch & had thought Butrans would be something that he would prescribe a lot of.

PPLPMDL0020000001	Cleveland	OH	44111	1/13/2012	Spoke with Linda and Don Zabricki, clinical manager. I learned that the hospital is no longer doing in-servicing on the floors with the nurses. I asked what would be the best way to get the education about OxyContin, Butrans and Senokot to the floors of the hospital, and she said that I should consult with Mike and/or Don to find out if they could provide the product education and information at their meetings. Don thought that it would be valuable to review the providing relief preventing abuse brochure at our next in-service with the pharmacy. Linda informed me that the hospital is going to have the pharmacist much more involved in patient care and on the floors to help educate the nurses. Their hope is to educate the pharmacists who will then educate the nurses. She set me up with an appointment with Mike Hoying so that I can discuss Butrans and how I can be involved with helping to educate the pharmacists on our products and pain management.
PPLPMDL0020000001	Brooklyn	OH	44144	1/16/2012	Introduced myself & Purdue's products to Laura, MA. Reviewed Butrans core messages, appropriate patient type, & savings cards. Also discussed OxyContin savings cards & offered OTC samples. Worked with Laura to schedule appointments with the practice. She said Butrans sounded like something Dr Koepeke may be interested in. I asked her to give him Butrans information with my card & she agreed.
PPLPMDL0020000001	Lakewood	OH	44107	1/16/2012	Dr said that he has not started any new patients on OxyContin recently, he does not see any new patients. We reviewed the conversion guide and converting to the 10mg OxyContin for patients taking short acting around the clock. Dr said that he had many patients complain that they did not feel well when they switched to the OxyContin reformulation. (reported as AE)We reviewed the key messages for Butrans and he said he just forgot about it, he said that managed care is an issue as most of his patients are Med D and Medicaid. He said he does have some BWC patients and he would consider using Butrans here. We reviewed that OxyContin has coverage for Medicare and Medicaid patients. I met Leena, NP student and reviewed Butrans key messages and OxyContin conversion guide.
PPLPMDL0020000001	Parma	OH	44129	1/16/2012	Quick call with Dr Ortega at the window. He said he is busy as he is getting ready to take his trip to the Philippines, where he will be until February 20. Reminded him of patient savings cards for Butrans & OxyContin & also asked him to continue to give patients Butrans patient information guides when appropriate. He agreed. Spent time with Cindy. Reviewed managed care for Butrans & OxyContin. She said she just got a notice from BWC that they will not cover the 15mg dose of Opana ER for a patient. She asked me if I knew anything about it but I told her I did not.
PPLPMDL0020000001	Hudson	OH	44236	1/16/2012	Spoke with Beth who said she has seen no Butrans activity. Presented Butrans patient information booklets & reviewed appropriate patient type, focusing on patients who get chronic short-acting opioids. I asked if she would give the booklets to patients who she thinks could benefit from Butrans. She agreed. Also discussed OxyContin savings cards & eligibility.
PPLPMDL0020000001	Parma	OH	44134	1/16/2012	Spoke with floater pharmacist & reviewed Butrans core messages. He said he has filled prescriptions for Butrans at other locations. Discussed appropriate patient type, focusing on patients who take chronic short-acting opioids, especially if they are not well-controlled on their dose. He said this is a common patient type. Reviewed ability to take supplemental analgesia while on Butrans. Also discussed automatic savings via e-voucher & OxyContin savings cards.
PPLPMDL0020000001	Hudson	OH	44236	1/16/2012	Spoke with MA Melissa & reviewed Butrans with her. Discussed appropriate patient type, focusing on patients who call too soon for refills of short-acting opioids like tramadol or Vicodin. Melissa said she does get those calls occasionally. Discussed savings cards for Butrans & OxyContin, neither of which they needed. I asked her to give Dr Seiple Butrans Opioid-Naive clinical trial backgrounder & she agreed.
PPLPMDL0020000001	Parma	OH	44129	1/16/2012	I asked Dr Taylor what she thought the downsides of Butrans are. She said that patients do not "want to give up pills". Reminded her that patients could take supplemental analgesia while on Butrans. I asked if she thought patients would be more likely to be willing to try Butrans if they knew this & it was explained to them during patient counsel. She said maybe but added that she thinks it will have to be a "new" patient who gets put on Butrans. I asked what she meant by "new". She said someone who is not already on a short-acting opioid. I asked her if she would at least offer patients Butrans, letting them know that they can take supplemental analgesia if necessary for breakthrough pain. She agreed. Discussed the importance of appropriate patient selection for all opioid medications. Dr Taylor said that she has been using OARRS a lot recently due to House Bill 93 requirements. I asked if she felt that her practice was more protected this way. She said yes. I asked Dr Taylor if she has had any new OxyContin starts recently. She said she has not. I asked why. She said because she has cut back on the amount of pain management that she does & therefore doesn't write as many new opioids. Reviewed OxyContin & Butrans managed care coverage & gave her one package of OxyContin savings cards.
PPLPMDL0020000001	Brooklyn	OH	44144	1/16/2012	Started to review Butrans with Dr Hilton, discussing once weekly dosing in a transdermal system of buprenorphine. Also reviewed Butrans as a CII opioid with abuse/addiction potential. Dr Hilton said she did not want to discuss Butrans or OxyContin & added that she does not "write any of those" medications. I asked if she has any patients who take tramadol or Vicodin for pain from a condition such as osteoarthritis or spinal stenosis. She said that she has no patients on those medications. Discussed importance of appropriate patient selection & agreed that she should be cautious in prescribing any opioid medication, prescribing only for those in legitimate pain. She said that when a doctor writes pain medications chronically, "the DEA comes for you". She also said that she wishes Darvocet was back on the market. I asked her what it was about Darvocet that she liked so much. She said that it was "not as abusable" as other opioid medications. I asked if she would be interested in discussing resources & tools to help her in her practice for patients in pain, but she declined.
PPLPMDL0020000001	Cleveland	OH	44144	1/16/2012	Showed Dr Paul the "Emma" patient profile & reviewed it with her. I asked if this patient mirrored what she saw in her own clinical practice. She said she does see patients who sound like "Emma". Also showed Butrans study inclusion criteria & asked if she treats patients for pain associated with osteoarthritis & spinal stenosis with opioids. She said yes & added that she starts with NSAID's or COX-2's, then goes to tramadol & then Vicodin if they are still not well-controlled. I suggested that she may find a place for Butrans in patients who have been prescribed tramadol & who upon follow-up require a change in their medication. She agreed that this would make sense. Reviewed transdermal delivery system, seven day dosing, & Butrans as the only long-acting CII opioid. Discussed abuse/addiction potential & appropriate patient selection. She asked about what adverse events she could expect. Showed her rates & asked if anything stood out. She said no. She asked about contraindications, so I reviewed them with her. Dr Paul agreed that Butrans was a logical choice for the type of patient we discussed but added that most of her patients who she treats with chronic opioids are elderly. Discussed managed care for this population. Dr Paul said she does not do prior authorizations. She added that her patients with commercial insurance are not treated with chronic opioids. Discussed OxyContin for patients beyond Butrans & reviewed managed care coverage.
PPLPMDL0020000001	Cleveland	OH	44113	1/16/2012	I talked to Justin, Pharmacist, about physicians writing Butrans. Justin said only a few doctors wrote in past few weeks- dr shen and dr boh. He has seen some patients get titrated, we discussed titration of Butrans. Justin showed initiation guide and I asked if Justin has been giving booklets out to patients? Justin said yes he's given the patient info booklets out and also recommended Butrans to a few patients so they can talk to their HCP's about Butrans. We discussed appropriate patients for OxyContin. Justin said a lot of the same patients getting their OxyContin monthly no new Rx. I asked Justin if he would recommend OxyContin to HCP's for patients when appropriate? Justin said he might do that but depends on relationship with dr. confirmed OxyContin stocking and left formulary grids. recommended Senokot-S
PPLPMDL0020000001	Parma	OH	44129	1/16/2012	Reminded Dr Moysaenko about previous Butrans conversation when he told me that he could think of a few patients who may benefit from Butrans. I showed him patient information booklet, telling him I wanted to review something by him. I presented booklet & discussed how they can be used in patient discussions when he is telling them about Butrans or giving it to patients as an option. He agreed that this would be a useful tool. Reviewed core messages with him & asked him to at least offer Butrans to appropriate patients who he thinks would be good candidates. He agreed. Also OxyContin 7 tablet strengths for flexibility in titration reminder & recommended Senokot-S for opioid-induced constipation, leaving samples.
PPLPMDL0020000001	Cleveland	OH	44109	1/16/2012	worked internal medicine, pm&r, rheumatology, neurology and family medicine- couldnt see any HCP's had to leave info-left Butrans fpj, initiation guide, patient info booklet, formulary grid and my business card for every HCP on my target list
PPLPMDL0020000001	Lakewood	OH	44107	1/16/2012	I asked Dr who the patients are that he is thinking of Butrans. He said chronic back pain, fibromyalgia. He asked about managed care and I reviewed the managed care grid and savings program. Dr had a patient who he tried to write Butrans for and the cost was \$200 and not covered on Medicare. I redirected Dr to consider OxyContin for this patient where Med D plans are covered. Dr on mission trip for next 2 weeks in the Philippines.
PPLPMDL0020000001	Cleveland	OH	44109	1/16/2012	TRIALIST-dr said he has 2 patients on Butrans and 1 patient is doing extremely well-pain is controlled and improvement in overall functioning. dr said other patient is taking Butrans 10mcg and she said within the 1st 3 days of wearing Butrans it was too strong and she thinks its because she sweats a lot and gets hot at night. dr said he's going to lower the Butrans dosage strength to 5mcg for this patient. I reported AE info below. I asked dr if he has other patients, like the 1 who is doing well on Butrans, that he can start this week? dr said yes he does. I asked dr if he would consider starting a patient on Butrans after the 1st tramadol dose wasn't controlling that patient's pain? dr said he would consider that but he would have to talk to the patient and see if patients willing to try Butrans. I asked dr to describe to me how he discusses Butrans with his patients. dr said he tells patients Butrans is a patch and dosed once a week. I gave dr Butrans patient info booklets and asked him to give this to patients for education on Butrans and start 2 patients this week. dr committed to do this. focused dr on commercial
PPLPMDL0020000001	Parma	OH	44134	1/16/2012	I reminded Dr Mandat of our previous conversation when he told me that all of his Butrans patients take supplemental analgesia. I asked him how he decides whether he will titrate a patient's Butrans dose or add supplemental analgesia. He said he prefers long-acting medications whenever possible, especially for patients in care facilities. He went on to say that this is because it decreases the frequency of nursing visits to that patient to administer medications. I gave him Butrans opioid-naive clinical trial backgrounder & asked him to review it. He agreed.
PPLPMDL0020000001	Lakewood	OH	44107	1/16/2012	Spoke with Joe, we reviewed the Butrans medication guide and I asked if he ever needs to counsel patients. He said not really. Only if their medication is not working, which he rarely hears from vicodin patients. I asked if he would let patients know about Butrans as an option and he said he would. He said he has 2 patients on Butrans but, said that one patient on Butrans discontinued because he said he thinks it wasn't working for the patient. He did not know which dose or if the patient titrated. We reviewed that Butrans can be used with supplemental analgesia. He said he does not hear much about OxyContin any longer, that they tend to abuse vicodin now, we reviewed that OxyContin is still a CII and can be abused. New CVS should open in April-May.
PPLPMDL0020000001	Cleveland	OH	44111	1/16/2012	Spoke with Aimee, she is a floater, but has seen Butrans around at other pharmacies. I asked what questions her patients have that will prompt her to counsel them, she said that they ask how much medication they can take and about side effects. I asked if she would let them know about Butrans as an option and give them a medication guide and she said she would. We reviewed that Butrans is a CII and that it can be called in and refilled. We reviewed the OxyContin conversion guide and she will carry it with her. We reviewed the savings programs for Butrans and OxyContin.
PPLPMDL0020000001	Parma	OH	44129	1/17/2012	Spoke with MA Sheila & discussed savings cards for Butrans & OxyContin. Sheila said they needed OxyContin cards but not Butrans. Reminded her of appropriate Butrans patient type & asked her to give Dr Gallagher the Butrans Opioid-Experienced clinical trial backgrounder with my card. Also gave her OTC samples which she said they can always use. I also left my card to request an appointment with Dr Gallagher. Sheila said he is not doing any at this time.
PPLPMDL0020000001	Cleveland	OH	44113	1/17/2012	dr said he's still talking to patients about Butrans, thinks Butrans is a great product just not for everyone, dr said he has a couple patients on Butrans but so many of his patients dont want to try a patch and only want their pills. I asked dr who is the appropriate patient for Butrans? dr said patients taking 4-5 tabs daily of the 5/325mg vicodin, that arent controlled and are asking him for more pills, dr said thats when he will talk to them about Butrans. I asked dr if he would consider Butrans as an option, right after 2 tabs of vicodin 5/325 werent controlling the pain instead of increasing the amount of pills daily? dr said he might but usually he would give patients 3 pills a day, then 4 and eventually 5 pills daily is max. I asked dr what the clinical reasoning was for this? dr said he just does this as patients like trying the pills first then something like Butrans they might consider later on. I asked dr if he had 2 patients this week, BWC or commercial insurance, that he could start on Butrans? dr said he will do his best and talk to some patients and see what happens. focused dr on commercial insurance patients
PPLPMDL0020000001	Cleveland	OH	44129	1/17/2012	Quick call with Caryn between patients. I showed her a Butrans patient information booklet & asked her to start giving them to patients who she identifies as potential Butrans patients, even if she is not giving them a prescription. She said she is going to be leaving the practice. Spoke with Dawn who said Caryn will be leaving Cleveland Back & Pain. She added that Deb Torres will be practicing there Mondays & Wednesdays & Myra Gold will be there Tuesdays & Thursdays. I asked Dawn if any of the practitioners have been prescribing Butrans. She said she has not seen anything lately at all. Reviewed appropriate patient type & reminded her of where Butrans is covered. She said she would try to keep reminding the prescribers.
PPLPMDL0020000001	Cleveland	OH	44130	1/17/2012	Dr Fedorko asked if he can write Butrans for a patient in a nursing home. Reviewed managed care coverage. Discussed appropriate patient type as well as OxyContin as an option for appropriate patients beyond Butrans. I reminded Dr Fedorko of previous conversations when he told me that patients on short-acting opioids do not want to change their medication to a long-acting option. I showed him patient information booklets & discussed how they can be used in patient counsel. I also suggested that Dr Fedorko give them to appropriate patients who fit the indication, even if he assumes they will not want to change their medication. He said that he is glad that I told him that because that is something he will do. Showed him how the booklets educate patients so they can make an informed decision on whether or not Butrans would be a good option for them. Dr Fedorko said again that he will start giving the information booklets to appropriate patients. Also discussed Senokot-S for opioid-induced constipation & showed him samples.

PPLPMDL0020000001	Cleveland	OH	44125	1/17/2012	Spoke with pharmacist Emily & reviewed Butrans dosing & delivery system. She said she does not think they have dispensed any. Reviewed appropriate patient type, focusing on patients who get chronic refills of short-acting around-the-clock opioids. I asked if this is a commonly seen scenario. She said somewhat. I asked if she has seen any new prescriptions for OxyContin or if she is only seeing continuing prescriptions. She said it is mostly continuing, but occasionally, they will get a new prescription. Discussed savings cards for OxyContin & gave her one package.
PPLPMDL0020000001	Independence	OH	44131	1/17/2012	I showed Dr Sundaram the Butrans patient information booklet & asked if he gives patients resources like that. He said he does. I asked his thoughts on giving those booklets to appropriate patients when he refills a short-acting around-the-clock opioid prescription for them so that patients can educate themselves on a possible option. He said he thinks it is worth a try. Dr Sundaram told the medical student that was with him that Butrans is buprenorphine in a patch. Reviewed dosing & appropriate patient type. Also discussed favorable OxyContin managed care status & gave him CCRx alert. Gave OTC samples & recommended Senokot-S for opioid-induced Spoke with Georgia, technician, who said Jackie was assisting a customer. I reviewed the Butrans appropriate patient type & savings cards for both Butrans & OxyContin. I also asked her to check the shelf for Butrans patient information booklets that I had given to Jackie. She said they are still there. I asked her to remind Jackie to give them out to appropriate patients & she agreed. She said they do not need any additional savings cards for either product.
PPLPMDL0020000001	Parma	OH	44129	1/17/2012	I talked to Stan, Pharmacist, about Butrans 5 core selling messages, Stan said he's seen a lot of Butrans Rx here but doesn't know who's writing them and doesn't have time to look that info up today. Stan said I can follow up with Curt, pharmacy mgr, and maybe he'll share that info with me. Stan said they are handing out savings cards and patient info booklets and didn't need anything. I asked Stan what features of Butrans stood out to him? Stan said transdermal delivery, once weekly dosing and the fact that Butrans is a CIII so HCP's can call in refills. I asked Stan if he would hand out patient info booklets to patients taking opioids for their chronic pain but aren't controlled so that patients can speak with their HCP's about Butrans? Stan said he will do that. confirmed OxyContin stocking and we discussed appropriate patients for OxyContin, Stan said they fill a lot of OxyContin and its on hospital formulary but he doesn't know who is writing OxyContin besides the oncologists. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44195	1/17/2012	I talked to Cynthia, Pharmacist, about Butrans and she said no Rx yet and they don't have Butrans in stock. I showed Cynthia visual aid, 5 core selling messages and asked her what features of Butrans stood out? Cynthia said transdermal delivery and 7 day application. Cynthia said some patients may like this option. I discussed appropriate patients with Cynthia, she focused on opioid experienced patients. I asked her if she provides patient counseling to those patients taking opioids for chronic pain? Cynthia said occasionally they do that. I asked Cynthia if she would give patient info booklets to those patients asking for something different, so that they can talk to their HCP's about Butrans? Cynthia said she will do that and asked me to follow-up with Dave, pharmacy mgr, end of month as he's on vacation now. Cynthia said I should talk to Dave about giving patient info booklets out and I reminded Dr Kushnar of previous Butrans conversations when she told me that she thought she had a few patients who she continually refills tramadol or Vicodin for who may benefit from Butrans. She said she has not put anyone on Butrans yet. I asked what clinical concerns she has. She said she really does not have any but she wonders if patients would want to make that change. Reviewed appropriate patient type & range & reminded her of core messages. I showed her patient information booklets & asked her what her thoughts were on giving the booklets to patients when she refills or increases the dose of a patient's current short-acting around-the-clock opioid so the patient can educate themselves on a possible option for them. She said she thinks that is a great idea. She added that she will tell Lucy, her NP to do the same thing & that she would put the booklets in the room where both she & Lucy will be able to see them. Reminded her that patients can take supplemental analgesia if necessary while on Butrans & discussed titration to a maximum 20mcg dose. Also discussed OxyContin for appropriate patients beyond Butrans. Dr Kushnar said she has a few trusted patients on OxyContin & she thinks it is a good medication for those patients. She added that she has decided not to prescribe any new Percocet scripts because she thinks people abuse it too much. I agreed that opioids carry abuse & addiction potential & encouraged her to be cautious in prescribing any of them. OTC-font color=blue><b>CHUDAKOB's query on 01/26/2012:</b></font>Looks like a great call where you gained a solid commitment for some action. Did you leave her many booklets for her rooms-<font color=green><b>APSEGA's response on 01/29/2012:</b></font>She said due to limited space, she would keep them in the office space that she shares with Lucy. She did not want additional booklets at this time.<font color=blue><b>CHUDAKOB added notes on 01/31/2012:</b></font>OK
PPLPMDL0020000001	Cleveland	OH	44130	1/17/2012	I asked Dr Diab for what type of patient Butrans is a realistic option. He said, "someone who needs it & someone who's insurance pays for it." I asked him what he meant by someone needing it. He said it would be someone who is not well-controlled on their short-acting opioids. He said those are the patients who can especially benefit from it. I asked if that is a common scenario. He did not answer. He said that he thinks Butrans is a good drug that he likes but that insurance companies are just not paying for it & he does not have the time to justify his clinical choices for medications to insurance companies. I asked if he knows what type of insurance a patient has when he goes in to see them. He said he does not & that he bases his choices for medications on the patient, their condition, & what his findings are with that patient. I asked if that means he still attempts to prescribe Butrans for appropriate patients. He did not answer. He said there are cheaper alternatives to Butrans. I asked him what he means. He said he would go to an oral long-acting or fentanyl. He said that clinically he has no problems with Butrans & added that I should not worry because restricted managed care happens when medications come to market & then coverage eventually gets better. He added that it happened with OxyContin as well. Reminded him of OxyContin's favorable managed care coverage & savings cards for eligible patients for Butrans & OxyContin.
PPLPMDL0020000001	Cleveland	OH	44104	1/17/2012	TRIALIST: dr said the 1 patient she started on Butrans had an allergic reaction to the adhesive. dr said she had the patient rotate Butrans, all of the application sites, but the patient got a red rash around the patch site so dr had to stop Butrans. dr said patient was put back on vicodin and is in pain again. dr said this patient was getting good pain control with Butrans but because of this allergic reaction she had to stop. I asked dr if this will prevent her from starting other patients on Butrans? dr said no she is talking to patients about Butrans but its very hard to switch them to something new like Butrans. dr said patients are so used to their pills that all they want. I showed dr fpi, section 2.4 maintenance of therapy, we discussed patients taking immediate release opioids or non-opioid therapy with Butrans. dr said ok she'll keep that in mind. I asked dr if she would consider starting 2 patients on Butrans, this week, that are taking hydrocodone daily for their chronic pain but not controlled instead of converting them to another immediate release opioid? dr said yes she will do her best and keep talking to patients and see if anyone will try Butrans. I focused dr on commercial plan patients. we discussed patient savings card program for commercial plan patients.
PPLPMDL0020000001	Mayfield Heights	OH	44124	1/17/2012	Debbie asked if there were any changes in formulary coverage with butrans. I told her no and reviewed the formulary grid. Also let her know about the coming voucher for 1 month free trial. She like the idea of that. She asked if she could counsel patients to apply 2 5mcg patches if they say 5mch is not enough. I told her that the FPI does not recommend the use of more than 1 patch and has not been studied. She asked about the onset of analgesia. I told her that it has not been studied but measurably levels in the blood have been found after 17hrs. She said she loves butrans and will continue to prescribe it. She introduced me to a new PA in the office, Met the new PA in Hillcrest Pain mgmt. Introduced her to butrans - discussed indication, CII status, and 7 day delivery. She asked about cost. I explained the commercial coverage and the coming 1 month free trial voucher.
PPLPMDL0020000001	Mayfield Heights	OH	44124	1/17/2012	Discussed proper application and rotation of the patch
PPLPMDL0020000001	Westlake	OH	44145	1/17/2012	I reviewed the Med D pull through for OxyContin and asked if this information will influence his decision to choose OxyContin. He said that it does since managed care dictates what they can and can't prescribe and anytime he can get things covered without a prior auth and high copays it is less of a hassle for him. I reviewed the 7 tablet strengths and he said he has many patients
PPLPMDL0020000001	Mayfield Heights	OH	44124	1/17/2012	Spoke to Giovanni and Jessica about the stocking and movement of butrans and oxycontin. Giovanni is new to CVS (4 days) and not familiar with the volume. Jessica said they have a lot of transient customers and does not see alot of oxycontin scripts and has not seen any butrans scripts since she's been there. I discussed the positioning and and dosing of where butrans should be used. Giovanni asked about formulary coverage/insurance. I reviewed the grid and the savings cards. They did not think they needed any savings cards.
PPLPMDL0020000001	Mayfield Hts	OH	44124	1/17/2012	I asked doc what feedback he has gotten from Butrans patients. He said some good, some just ok. He just had one patient today that complained of skin rash on his arm but doc instructed him to apply some hydrocortisone. I asked doc if patient was rotating the patch regularly. he confirmed that the patient was rotating. I asked which dose he tends to initiate at. He said 5 or 10mcg.
PPLPMDL0020000001	Cleveland	OH	44113	1/17/2012	LOYALIST:DEB,PA,said she's starting patients on Butrans every week.I asked Deb what these patients were taking that prompted her to initiate Butrans therapy? Deb said patients were taking vicodin,4-5 tabs of 5/325mg daily and not controlled so she's starting them on Butrans.I asked Deb if she ever see's patients taking tramadol that aren't controlled and need a medication adjustment? Deb said yes.I asked Deb if she would wedge Butrans into her treatment plan right after tramadol? deb said she would consider that.I asked deb if she'll see more patients this week taking tramadol or vicodin that need medication changes? deb said yes every day.I asked deb if she would start these patients on Butrans? Deb committed to do this.I left more savings cards and patient info booklets per Deb's request.
PPLPMDL0020000001	South Euclid	OH	44121	1/17/2012	I asked doc about her past experience with butrans. She said that she only had a tiny bit and it didn't work for the patient but the patient had been on many other agents without success.I explain that that probably wasn't the right patient type and they might have been more appropriate for low dose oxycontin. She said she doesn't treat "that kind of chronic pain". I asked her if she treats low back pain, OA, and she said she did. Showed her the profile of the opioid naive patient and she agreed that she see those types. She then left.
PPLPMDL0020000001	Cleveland	OH	44104	1/17/2012	dr said she likes that Butrans is available,as an option for patients but all of her patients are taking immediate release opioids as needed.dr said none of her patients have chronic pain and when they do have chronic pain,she sends them to pain management.dr said she doesn't like dealing with narcotics and chronic pain patients.I asked dr how she defines "chronic" pain? dr said if patients ask for more pills,after the 1st dose,and their pain is longer than 3 months,she sends them to pain management.we talked about 5 core selling messages,dr focused on opioid experienced patients who would be appropriate for Butrans and said right now she doesn't have a place for Butrans in her practice.
PPLPMDL0020000001	Cleveland	OH	44121	1/17/2012	I opened the call by asking do when was the last time he initiated oxycontin for a new start patient. He said not recently and that he is trying to get away from prescribing narcotics. He said he just got a letter from an insurance company for a patient on oxycontin that now requires a PA. He said it was a commercial patient that has been on it for a while. He will write it but doesn't really want to. I suggested butrans as an alternative and has the same indication as oxycontin. Rereviewed the selling messages and he thought that as soon as he writes it a PA would be required. I told him to focus on the commercial plans and avoid medicare/medicaid. I asked him if he really sees a place for it in his practice. He said maybe. Reviewed the commercial coverage for both and gave savings cards.
PPLPMDL0020000001	Cleveland	OH	44127	1/17/2012	NON-PRESCRIBER: I showed dr Butrans fpi,visual aid and discussed 5 core selling messages with dr.dr said he's never heard of Buprenorphine or Butrans,dr focused on opioid experienced patients and said he has a lot of chronic pain patients that Butrans could be appropriate for but he has medicare and medicaid.dr asked about Butrans coverage on these plans,i discussed both with dr.dr said he doesn't prescribe CII long-acting opioids,OxyContin,Duragesic or even long-acting morphine.dr said if there is medicare coverage for Butrans he will consider prescribing for his elderly patients.i told dr there isnt any medicare coverage at the moment but i will follow-up with him if there are any changes.i asked dr if he treats any commercial insurance patients? dr said a few.I asked dr to review the information and focus on 1 patient he could start on Butrans this week, dr said Spoke with Sally, pharmacy technician, & introduced myself & Purdue's products. Asked to speak with pharmacy director, Stacy, but Sally said she was in a meeting. I asked Sally if Stacy ever meets with representatives. She said occasionally she does or their clinical pharmacist will. I asked her what the best way to get in touch with Stacy to discuss any type of opportunity they may have for me to do in-services with nurses & other staff members is. She suggested I leave information with my card & she would make sure that Stacy saw it. I left OxyContin information with my card.<font color=blue><b>CHUDAKOB added notes on 01/26/2012:</b></font>Stay persistent. This is the only way they will know that you are serious and that what you have is important.
PPLPMDL0020000001	North Olmsted	OH	44070	1/18/2012	Spoke with Jill, we reviewed Butrans medication guide, that Butrans is a CIII and the use of Butrans with supplemental analgesia. We discussed the appropriate patient types of Butrans and OxyContin. We discussed the savings cards for Butrans and OxyContin.
PPLPMDL0020000001	Parma	OH	44129	1/18/2012	Dr Gigliotti said he was pressed for time. I showed him the patient information booklets, describing to him how they can be used to discuss Butrans with patients on short-acting around-the-clock opioids to see if they would want to try it as an option to treat their pain. I suggested he do this so that patients at least know it is an option for them. He agreed.
PPLPMDL0020000001	Westlake	OH	44145	1/18/2012	Quick call. I asked Dr why he likes Butrans, he said it works. I asked if he would continue to start new patients and he agreed.
PPLPMDL0020000001	Cleveland	OH	44114	1/18/2012	LOYALIST: dr said he's starting more patients on Butrans every week and patients are doing great on Butrans.I asked dr to share with me who is the appropriate Butrans patient? dr said patients taking 1-2 percocet every day and not controlled,asking him for more pills,dr said he will not give them more percocet and tells them their only option is to start on Butrans.dr said some patients will get percocet for breakthrough but most don't.I asked dr if he would consider Butrans an option,after patients are taking 2 hydrocodone daily but not controlled? dr said yes he will but right now he's been focused on percocet patients.I asked dr to expand his clinical experience with Butrans and consider 2 patients this week,that are taking 1-2 hydrocodone every day for their chronic pain but not controlled,to start them on Butrans,dr said he will do that.I focused dr on BWC and commercial insurance patients.I talked to dr about his CCRX patients that are appropriate for OxyContin,dr said he doesn't prescribe OxyContin and won't but appreciated the insurance information.recommended Senokot-S



PPLPMDL0020000001	Cleveland	OH	44109	1/18/2012	worked family medicine-i left Butrans fpi,initiation guide,patient info booklet,formulary grid and my business card for dr chrisman,dr forde,dr adebambo,dr liu,dr magoulais and dr krofina; internal medicine-i left same info dr lindehim,dr jones,dr ricanati,dr harrington and dr gelehrer.
PPLPMDL0020000001	Richfield	OH	44286	1/18/2012	Introduced myself & Purdue's products to Janet Cnadr, RN, director of nursing. She said they are interested in pain management in-services for nursing staff as knowledge is lacking in that area. She added that nurses need education on long-acting medications, including OxyContin. She said Dr Menyah is the Medical Director at that facility & Dr Sundaram also goes there to see patients. Janet said they use Absolute Pharmacy in North Canton.
PPLPMDL0020000001	Cleveland	OH	44106	1/18/2012	TRIALIST-dr said he started a couple patients on Butrans the last few weeks,dr said the only challenge is getting medicine to approve Butrans.we discussed commercial insurance patients and i asked dr if he has a couple patients with commercial insurance that will be coming in today? dr said probably so.i asked dr if these patients are taking an immediate release opioid for their chronic pain,yet not controlled and needing a medication adjustment,is he willing to start them on Butrans? dr said he will consider that as long as the patients are willing to try wearing a patch and insurance covers Butrans.i showed dr Butrans patient info booklet,focused on application/rotation and side effects and asked dr to show patients this info,dr said he tells patients that Butrans is a patch dosed once a week and they have to rotate the patch on 1 of 4 application sites,dr said Lisa,His Med Assist,shows patients the booklet so he doesnt do that.i asked dr to focus on 2 patients today that he can start on Butrans,dr said he will do that.we discussed OxyContin being an option for patients,i showed confident treaters flashcard and we discussed formulary coverage,dr talked about medicare patients and i asked dr if he'll continue choosing OxyContin for patients he feels are appropriate? dr said yes he will do that.recommended Senokot-S dr said she's been starting more patients on Butrans and all of patients are caresource that require a Prior Authorization.i told dr i have heard this from other HCP's but i didnt even think Butrans would be covered as its an NDC block.dr said Caresource is approving the PA's so she's happy more patients are getting started on Butrans.i asked dr if she could focus on commercial and BWC patients,to start on Butrans this week? dr said yes she will do that.dr said she's getting good results with Butrans so she'll continue prescribing,doctors medical assistant,Jasmin,said an elderly woman patient of dr shen's called this morning saying she had shortness of breath and has chronic asthma and is wearing Butrans.Dale novak,PA in office,spoke with patient and told patient to remove Butrans.Jasmin said dr is going to see this patient this afternoon.Jasmin asked me if a patient with chronic asthma could take Butrans? i showed Jasmin and dr shen the FPI,contraindications,and said no patients with chronic asthma shouldnt be started on Butrans.dr said she appreciated that reminder and Jasmin took fpi.i recommended Senokot-S for opioid induced constipation.
PPLPMDL0020000001	Cleveland	OH	44114	1/18/2012	Jan is the Health Services Director in CLE and works with Dr.Lehner. She works with 18 CNPs who each cover 3-4 facilities or 45 facilities in total. They provide bed-side care with everyday service. They are special needs or dual eligibles so the CNPs must understand several disease states including mental health, diabetes, Pain, CHP, etc. They hold monthly staff meeting so March may be a good meeting to attend. She especially liked the Pain PACT and plans to order it online. i will then coordinate a conference call with her and MBK. She didn't think the LELE program was a fit but liked other pain resources including Pain Mngt Kit and Comfort assessment journal. She would evaluate the CNPs pain education as "Not Well-Managed" and really welcomed all of our resources. She's also interested in conversion guides especially from SAOs to LAOs. A lot of what they use is tylenol because many of the CNPs don't understand conversions.
PPLPMDL0020000001	Parma	OH	44129	1/18/2012	I asked Dr Chagin what typically triggers him to prescribe Butrans for a patient. He said it really just depends on the patient & he has tried all types of patients. I showed him the "William" patient profile & asked him if he sees patients like him in his practice. He said yes. I asked if that is a type of patient for whom he would prescribe Butrans. He said yes. I asked if he has tried any patients who were not already on an opioid on Butrans. He said he has. Discussed tools he can use for his practice, including DARRS. He said he has been using all the tools i provided him with. Dr Chagin said he likes that Butrans is not abusable. I told him Butrans IS an opioid & does carry abuse & addiction potential. I asked Dr Chagin to continue to identify Butrans patients & he agreed. I reminded him of the patient he had told me about who was taking Vicodin & Percocet who we had discussed as a potential OxyContin patient. I asked if he has converted that patient or if he is still considering it. He said he has not yet seen that patient back but is considering that switch. Reminded him to use the conversion/rtation guide to assist him in the conversion. Dr Chagin said the patient takes Percocet with Vicodin for breakthrough.
PPLPMDL0020000001	Cleveland	OH	44113	1/18/2012	TRIALIST-dr said she started a few patients on Butrans in the past few weeks.i asked dr why she's chosen Butrans for these patients? dr said 1 patient was taking vicodin and another patient was taking percocet,daily for their chronic pain, that wasnt controlling the pain so she wanted to try Butrans and got it approved.i showed dr visual aid,opioid experienced patients section,we discussed initiation and titration of Butrans and i asked dr if this seemed easy to start patients on Butrans? dr said yes once patients are willing to try Butrans and wear the patch for a week and remember to rotate Butrans weekly,dr said she's been getting approval from Caresource so thats helping her start more patients on Butrans.we discussed commercial insurance patients and showed formulary grid and dr said majority of her patients are medicaid but she does have a few commercial patients so she'll keep that in mind.i asked dr if she has 2 patients this week that she feels Butrans could be appropriate? dr said probably so and she'll start patients if she can get it approved.i recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	1/18/2012	TRIALIST-i talked to dale,PA,with dr shen,about the patients he's starting on Butrans.dale said a lot of the patients have been taking vicodin or percocet but arent controlled and ask him for something else,he's starting them on Butrans.i showed initiation guide,discussed titration and i asked dale if he'll start a few more patients this week on Butrans? dale said yes he will.i focused dale on commercial insurance and bwc patients.recommended i reminded Dr Zivic of previous conversations when he has told me that he believes in the concept of long-acting opioids to treat pain. I asked him if, when he has a patient who is taking a short-acting oxycodone like Percocet around-the-clock, he ever considers converting those patients over to OxyContin, a q12h dose of oxycodone. He said he does do this. I asked if there is a specific trigger, such as the dose of Percocet, that causes him to go to OxyContin. He said no. He said it usually depends on the patient & their pain level. He added that he usually does not discontinue the patient's Percocet when he starts them on OxyContin & allows patients to take it for breakthrough pain. Dr Zivic said he has had success treating patients with OxyContin. He said he heard there has been a shortage or some sort of problem with OxyContin availability. I told him i did not know of any such issue.
PPLPMDL0020000001	North Olmsted	OH	44070	1/18/2012	Reminded him of favorable managed care status & gave him a conversion/titration guide. He said i have given him a lot of them. I told him he can put them in various locations to help him in converting patients from short-acting opioids to OxyContin. I reminded him that i have also given him a Butrans initiation/titration guide & reminded him of savings cards for both Butrans & OxyContin.
PPLPMDL0020000001	Parma	OH	44134	1/18/2012	Spoke with Paula, we i asked what questions pain patients have that prompt her to consult with a patient. She said they sometimes ask about certain side effects and if they are normal, or they may have concerns about the warnings. I reviewed the medication guide and i asked if she would talk to patients about Butrans and hand them a medication guide, she said she would. We reviewed the savings cards for Butrans and OxyContin.
PPLPMDL0020000001	Cleveland	OH	44114	1/18/2012	Dr Hernandez told me about a patient who had been on 30mg Opana who he transitioned to Butrans 20mcg. He added that she is doing great on it. He also said he has a patient who had been on OxyContin 20mg who he switched to Butrans 20mcg who is also doing well. He said he knows that 20mcg is not a starting dose, but his patients are doing well. He added that he has a patient for whom 20mcg was not "quite enough", so he told the patient to cut one of the 20mcg in quarters & wear one quarter of it with the 20mcg, giving the patient 25mcg. Told him this is not recommended & has never been studied. He said he knows. I showed him "William" patient profile & asked him if he sees patients like this regularly. He said yes. I asked if this is the type of patient for whom he would prescribe Butrans. He said he "would now". He added that since he has had success converting patients from high doses of opioids like Opana to Butrans, he would. I asked if, when he makes a medication change, it is due to the patient's pills or their pain. He did not answer. He said BWC is going to stop paying for Vicodin & Percocet & that they already stopped paying for Suboxone. He added that he wants to stop taking all insurance & just have a cash pay policy. I asked if he would continue to prescribe Butrans & he agreed.
PPLPMDL0020000001	Cleveland	OH	44114	1/18/2012	Tidr said she just started another patient on Butrans,i asked dr to tell me about that patient and why she chose Butrans? dr said this patient was taking 3-4 hydrocodone a day for her chronic pain and the pain wasnt controlled,dr said she started this patient on Butrans and now the patients overall general functioning has improved and the patient is happier.i asked dr how she determines if a patient is taking tramadol and not controlled,would she start that patient on Butrans or go to hydrocodone? dr said she would go to hydrocodone because if patients are only taking 1-2 pills a day or they have 30 pills for a month or 3months,dr said she doesnt feel that warrants a long-acting opioid.dr said she will start patients on Butrans when they are taking 3-4 hydrocodone every day,dr said she wont increase the pills or convert them to percocet,she will start them on Butrans.i asked dr if there was a clinical benefit of going from 1 short-acting opioid like tramadol to hydrocodone? dr said there wasnt any clinical benefit,its cost a lot of times and she would rather wait to have patients start on Butrans as it'll cost more for patients than hydrocodone.dr said it all comes down to how many pills/per day patients are taking that prompts her to make a change and start patients on Butrans.i asked dr if she will start a couple patients this week on Butrans? dr agreed to do this.we discussed CCRX patients getting OxyContin at lowest branded co-pay,dr said she only has few pts on OxyContin
PPLPMDL0020000001	Cleveland	OH	44115	1/18/2012	Anona said their relationship with Medco is changing as they're receiving more real-time RPH data to assist with their CM responsibilities. Med Mutual is still not allowing drug companies to do inservices rather they have a resource center for drug info. The disease states they're focusing on is RA, Hep C and MS. They're also still only looking for education with CEs. Medco is still the PBMand Sonny is in RPH but she wonderd is the company will move away from just following Medco in all formulary decisions. The company has purchased a network in SC, GA and IN but membership is still the same. I provided product status updates since launch and made her aware of a drug we'll be launching soon - Intermeezo. The CMs will be interested in receiving data on this because insomnia is a real problem so contact her when i have them. There are more CMs who are retiring so a LELE program might be something they'll want to revise in a few months. Follow up with Anona at that time. The Financial Investigative Group has uncovered an \$8M fraud case that she said was huge.
PPLPMDL0020000001	Bedford	OH	44146	1/18/2012	I asked Dr Moufawad if he has been starting more patients on Butrans to expand his experience. He said yes. I showed him patient information booklets & discussed how they can be used in discussing Butrans with patients when he is starting them on it. He said he would do this. Dr Moufawad said one of the patients he started on Butrans got itchy. He added that the patient had been on OxyContin 20mg q12h prior to being switched to Butrans 10mcg. He said the patient has not yet discontinued Butrans & he is going to see him/her back to determine what to do with their dose. I also mentioned OxyContin savings cards, which he said he could use more of, so i left one package. He added that he is not starting any new patients on OxyContin due to "the stigma", but he will continue patients who are already on it. He asked me to focus on Butrans with him instead of OxyContin. Spoke with MA Christina- She said she is usually the one who gives out savings cards/patient information as patients leave. Discussed managed care coverage for Butrans & OxyContin. Gave her Butrans formulary grids & walked her how to utilize them. Asked if she makes a copy of patients' prescription cards with their medical insurance cards. She said she does not, but would like to start doing that since she also does prior authorizations. She hung up Butrans formulary grids for reference. Also discussed putting Butrans patient information & savings cards in potential patients' charts.
PPLPMDL0020000001	Cleveland	OH	44114	1/18/2012	I reported this AE below:John,PA,told me 1 patient called the office saying he cut Butrans in 1/2 because it wasnt strong enough.John told this patient he can NOT cut Butrans in 1/2 and needed to see the doctor for a medication adjustment and they can increase his Butrans to 10mcg/hr,patient is coming into office this week.John said all of the other patients are doing great on Butrans,John said he and dr marshall have been focused on the percocet patients and arent giving percocet for breakthrough pain.i asked John how he explains Butrans to patients? John said he gives patient info booklet to them,tells them this is their homework to read through booklet and he tells them Butrans is a once weekly patch and they must rotate every week on 1 of the 4 application sites,John shows the sites on body and gives patients a script.i asked John to discuss side effects and disposal of Butrans and he said he will do that.i asked John if he'll start a couple more patients this week on Butrans,focusing on BWC and commercial insurance? John committed to do this.recommended Senokot-S
PPLPMDL0020000001	N Royalton	OH	44133	1/19/2012	Spoke with John (7), pharmacist, & reviewed Butrans with him, including core messages & appropriate patient type. Alerted him to box warning & heat alert. Also discussed patient information booklets & gave him a few for their shelf, letting him know they can be given to patients with a prescription, or patients who he thinks could benefit from Butrans based on their patient type. Discussed savings via e-voucher for Butrans & OxyContin savings cards for those eligible.
PPLPMDL0020000001	Cleveland	OH	44109	1/19/2012	dr said she's started a couple patients on Butrans and they are doing well,dr asked for more patient info booklets as she gives these 2 patients before starting them on Butrans.i told dr that was great she's started a few patients and asked what prompted her to choose Butrans for these patients? dr said these patients were taking 2 percocet daily for their chronic pain but not controlled so she wanted to try Butrans instead of increasing the percocet,dr said patients easily got Butrans from the pharmacy and are happy,i showed dr visual aid,opioid experienced patients section,asked dr if she has more patients coming in this week,similar to the patients she started on Butrans? dr said she probably does but it comes down to patients acceptance of trying a patch for their pain and if their insurance will cover Butrans.i focused dr on BWC and commercial insurance patients and asked if she could start 2 patients this week on Butrans? dr said she will do that if patients are appropriate and insurance covers Butrans.i asked dr at what point is OxyContin appropriate? dr said she waits as long as possible before starting patients on OxyContin,dr said she will prescribe OxyContin but rarely we discussed appropriate patients for OxyContin,conversion from short-acting opioids to OxyContin and i focused dr on medicare and commercial insurance patients for OxyContin.i asked dr if she will start 2 new patients on OxyContin this week? dr said she will think about it.recommended Senokot-S
PPLPMDL0020000001	Beachwood	OH	44122	1/19/2012	Reminded Roberta of previous Butrans conversations. Reviewed with her the appropriate patient type & range. She said she usually just writes refills of what a patient is already on & does not do a lot of medication switches as she is still getting settled with pain management. Discussed the option of Butrans for appropriate patients & reviewed dosing. Gave her an initiation guide which she agreed to review to further her knowledge about

	Cleveland	OH	44113	1/19/2012	dr said he's not started anyone on Butrans yet as he's nervous that patients will get their scripts and come back to him saying they lost them.i asked dr if this happens a lot with the opioids he currently prescribes for chronic pain? dr said yes it does.i told dr i have no control over what his patients will do but can empathize with him and understand his concerns.i showed dr visual aid.pg.11,we discussed pain conditions,dr talked about low back pain patients,dr focused on opioid experienced patients.dr said he has a lot of patients taking tramadol and vicodin that he thinks are appropriate for Butrans so he will start a couple people and see what happens.dr asked which plans cover Butrans? i showed dr formulary grid,we discussed patient savings card program for commercial patients.i asked dr if he had 2 patients that had low back pain,coming in this week,that he could start on Butrans? dr said he probably does and will look to see who is coming into the office.dr said he will try it though and see what clinical results he gets from Butrans.dr asked if Purdue is still making OxyContin? i told dr yes and asked what his comfort level is with OxyContin? dr said he rarely prescribes OxyContin unless its nursing home or hospice patients.i showed dr OxyContin flashcard,do you find it challenging? and we discussed appropriate patients for OxyContin,focused dr on medicare and commercial patients and asked dr if he had few patients to start on OxyContin? dr said he will consider it
PPLPMDL0020000001	North Royalton	OH	44133	1/19/2012	Spoke with pharmacist Cheryl, reviewing Butrans appropriate patient type. Also discussed supplemental analgesia with Butrans, titration ability after 3 days, & maximum dose of 20mcg. She said she has not seen much activity for it. i asked if he ever makes medication suggestions to patients. She said rarely, but sometimes. Let her know patient information booklets can be given to patients who she thinks may benefit so they can talk to their doctor about it. Also discussed OxyContin q12h & 7 tablet strengths. She said she sees mostly 10, 20, & 40mg.
PPLPMDL0020000001	Cleveland	OH	44195	1/19/2012	i talked to Curt,Pharmacy Mgr,about Butrans Rx's,Curt said he's not seen much activity lately but knows some HCP's are prescribing.i asked Curt who is prescribing Butrans? Curt said he didnt know off hand but hasnt seen a lot of Rx's for Butrans lately.Curt said he has Butrans in stock and asked if i talked to Sabrina Spikes,in-patient pharmacy,regarding the Virtual sample program at CCF? i told Curt i spoke with Sabrina last year but i will re-contact her about this program.Curt said if he had virtual samples/vouchers for Butrans in the computer system it would help him in pharmacy and increase Cleveland Clinic physicians use of Butrans.Curt asked me to leave savings cards and booklets and i asked Curt if he would recommend Butrans to appropriate patients,handing them booklets so they can speak to their HCP's? Curt said he will do that.i asked if he's seeing new Rx for OxyContin? Curt said occasionally,i asked if he gives the OxyContin savings cards to patients,when appropriate? Curt said he doesnt really need them for OxyContin.i showed Curt the OxyContin formulary grid,focused on medicare and commercial patient starts and asked Curt to share this info with physicians if patients are ready for a long-acting opioid and OxyContin could be an option,Curt said he doesnt recommend OxyContin to HCP's but he
PPLPMDL0020000001	Solon	OH	44139	1/19/2012	Spoke briefly with pharmacist who said his time was limited. Inquired about Butrans activity, which he said has been zero. Discussed patient information booklets, describing how they can be used in patient counsel or given to potential Butrans patients based on their patient type. He said he would put them on the shelf. Reviewed appropriate patient type, focusing on those on chronic low-dose short-acting opioids around-the-clock. Also reviewed OxyContin savings cards, but he said they did not need any.
PPLPMDL0020000001	Cleveland	OH	44103	1/19/2012	i talked to Tim,Pharmacist,about 6 Butrans core selling messages.Tim said they dont stock CII or CIII opioids and he didnt have Butrans in stock.Tim said the wholesaler autoshipped Butrans to their store last year but they ended up sending it back because of their policy about not stocking CII or CIII opioids.i asked Tim if he saw a place for Butrans in appropriate patients (showed visual aid opioid naive and experienced patients)? Tim said yes there is a place for it but they wont stock it here.Tim said i can follow-up with Joe,owner of Sheliga Drug,if i have further questions.
PPLPMDL0020000001	Beachwood	OH	44122	1/19/2012	i asked Dr Yokiell what typically triggers him to start a patient on OxyContin. He said when he notices a patient is taking short-acting medications around-the-clock, he will try them on OxyContin. He added that many time, the patient is taking Percocet around-the-clock before he goes to OxyContin. He also added that sometimes patients like the convenience of q12h dosing, while others prefer to take short-acting medications instead. He said he tries to assess the patient & figure out what will be best for each of them. Dr Yokiell said he likes OxyContin & does use it frequently. He said he likes that people cannot abuse the reformulation as easily as they could the original formulation. i told him we have no data to support that. He said he knows. He said when patients were switched from the old to new formulation, many of them complained, but now that has diminished. i asked how patients who are new to the brand respond to it & he said he hears no complaints from them. Reminded him of favorable managed care coverage & savings. Discussed Butrans as an option for patients on less high doses of opioids. Dr Yokiell said it is difficult for him to use because most of his patients are on such high doses of opioids, Butrans is not an appropriate option for them. Focused him on patients he does have who take lower doses of opioids & asked him to write Butrans for those appropriate patients. He said he would.
PPLPMDL0020000001	Stow	OH	44224	1/19/2012	Abby said she has not written Butrans but has treated several pateints who were on it through Dr Yuang. i asked her what does she think is going to go wrong if she starts a patient on Butrns and She said she doesnt see new consults, she usually does medication adjustments and follow ups and i said medication adjustments are the best time to start someone on Butrans. i said when she sees those patients does she see any reason to continue them on a short acting and she said no. We reviewed dosing and where she would start patients and managed care coverage. She said she would definately try it in someone, she had to go.
PPLPMDL0020000001	Stow	OH	44224	1/19/2012	Dr said he has been trying to write Butrans but it has not been covered and i asked what type of insurance do they have and he said he thinks commercisl and i said sometimes patients medical insurance is different than prescriptions. i said BWC is also covering it and i asked him what types of medication therapy are these patients coming off of and he said all patients come in on some sort of opioid. HE then said he had to go because he got there late. i gave him the opioid experienced study to review until next time.
PPLPMDL0020000001	Cleveland	OH	44109	1/19/2012	dr said he's started a few more patients on Butrans,needed savings cards and booklets.i told dr that was great news to hear he's gaining some clinical experience with Butrans and asked dr why he's been choosing Butrans? dr said these patients had been taking vicodin for years and not controlled asking him for something else so he wanted to try Butrans.i showed dr visual aid,opioid experienced patients section,i asked dr if he will see more patients like the one's he started,this week? dr said probably so.i asked dr if he will start those patients on Butrans when he needs to make a medication change? dr said he will do that.i focused dr on commercial insurance patients and BWC.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	1/19/2012	worked pm&r dept-see call notes on dr fox and dr huang
PPLPMDL0020000001	Parma	OH	44129	1/19/2012	Quick window call with Dr Paat. Positioned Butrans for patients taking 2-3 tramadol, hydrocodone, or oxycodone per day around-the-clock & reminded him that patients can take supplemental analgesia while on Butrans if necessary for breakthrough pain. Sent back Butrans formulary grid & also reminded him of favorable OxyContin coverage.
PPLPMDL0020000001	Mogadore	OH	44260	1/19/2012	Dr said he has written a couple of Butrans.HE said one patient was an older man who he thought would be perfect who had a lot of neuropathic pain and alot of issues and has a hard time with pills so he thought this would be good but wasn't covered. i said it is usually PA with Medicare. We reviewed case studies and i asked him what type of patient does he see more and he said probably the patient who is on Tramadol. HE said he would try it again. i asked when the last time he wrote Oxycontin and he said he has some patients, usually his old ladies, he refers all others. We reviewed low doses and managed care with MedD plans
PPLPMDL0020000001	Stow	OH	44224	1/19/2012	Spoke w/ Gregg and Marcy and they said they are not stocking all products simply bc they do not have the room. if they have Butrans script they can just go downstairs to Acme. Marcy said they process about 70-80 scripts a day in that pharmacy. They may get it in someday, still working out all of the kinks. Gave them formulary coverage and dosing.
PPLPMDL0020000001	Cleveland	OH	44113	1/19/2012	dr said he hasnt started anyone on Butrans yet but thinks this is more for hospite/nursing home patients.i asked dr why? dr said he thinks it'll be easier to start someone on a new product.dr said a lot of his patients in office like their pills and dont want to try anything new.i asked dr if he would be willing to discuss Butrans with 2 patients,commercial insurance,show the patient info booklets? dr said yes he will do that he just doesnt know if patients will want to try Butrans.i told dr he will never know until he talks to patients.dr looked at Butrans demo patch and Butrans carton,asked about insurance coverage,i focused dr on commercial insurance and showed formulary grid,we discussed patient savings card program.i asked dr if he will start 2 patients on Butrans,showed visual aid-dr focused on opioid experienced patients,between now and next week? dr said he will talk to a few patients and see what he can do.i asked dr where OxyContin fits into his treatment plan? dr said he writes a lot of OxyContin for nursing home patients.i focused dr on CCRX patients,showed grid and asked dr if he will start a few CCRX patients on OxyContin this week? dr said he will do that if appropriate.dr requested savings cards for patients with high co-pays and he has a few cash paying patients for OxyContin.
PPLPMDL0020000001	Independence	OH	44131	1/19/2012	i reminded Dr Trickett of our last conversation when she told me that she usually goes to Butrans when a patient is not well-controlled on their short-acting opioid medication. i asked her what determines whether she goes to a long-acting opioid or if she increases their dose of short-acting opioid. She said that in general, she does not like short-acting opioids, so she uses a long-acting option whenever possible. She added that once she can see that a patient's pain is going to last for a longer period of time, it is time to switch them to a long-acting. Discussed commercial insurance coverage & savings cards. She said the few patients she does have on Butrans are doing fine. Discussed dosing & titration to a maximum of 20mcg dose. i asked if she would continue to prescribe Butrans when a patient's short-acting around-the-clock opioid is not working. She agreed. Also reminded her of OxyContin q12h as a long-acting option for patients beyond Butrans & reminded her of favorable managed care status.
PPLPMDL0020000001	Cleveland	OH	44195	1/19/2012	worked neurology-left Butrans patient info booklet,initiation guide,BUP3015/opioid experienced clinical trial,formulary grid and my business card for Dr.Bamford,Dr.Mays,Dr.Kriegler and Dr.Stillman.left SAME info for Dr.Covington-chronic pain-see him on 1/26 at 7am lecture. worked apm-left SAME info for Dr.Cheng,Dr.Stanton-Hicks,Dr.Rosenquist,Dr.Vrooman,Dr.Samuel and Dr.Mekhal. Worked Rheumatology-left Dr.Deal,Dr.Calabrese,Betsy Kirschner(NP)and DR Chatterjee SAME Butrans info-couldnt see any HCP's only can leave info for HCP's.
PPLPMDL0020000001	Mogadore	OH	44260	1/19/2012	Joe said he started patient on Butrans, i asked how he is doing and he said he did well on the product and i asked if he is still on Butrans and he said he didnt think so, he gave him enough to get through football season, he is a referee with bad knees waiting to see orthopedic and i asked him was it acute pain and he said no, but he did not want to take pills and needed something to get him through the last month of season. i said other than him, how often do ou see patients who are like him who have chronic pain and he said he sees them alot. We went through patient case studies in vis aid. HE said he sees more like the one on Tramadol. HE said he feels comfortable treating patients who are older with chronic pain, not anyone under 60. HE said younger patients if he feels are going to be chronic he will send to pain manager. i said the problem with committing toButrans in older patients is that patient most likely will have medicare which does not cover it. i said can you see using this in your patients who may be working in 40s or 50s and you have been treating and he said yes, he will use it there. HE said he does not use Oxycontin, cannot write it as PA-
PPLPMDL0020000001	Solon	OH	44139	1/19/2012	With Kendra Kormos, Dan Doucette. Butrans - to be discussed next on 1/20/12 at P&T conference call. Going to try to get feedback on Butrans. Didn't require any additional information. Pricing included in contract. Will notify us on Feb 14th. Caremark Med D - coinsurance language will be adjusted. LICs issue - Mike will follow up with Jim Dixon on identification of plans.MemberHealth Med D - Indemnification clause - lawyers may need to address. Mike will discuss with lawyers. Agreed to all other terms.Dan described how co-insurance rates are set by CMS -in Part-D, as more brands come off the market, this affects the co-insurance diffs &#8211; they will depreciate. CMS and the actuaries will dictate the differentials not the PBMs or the plans. The co-insurance differentials and co-pays vary per CMS region as the utilization of brands and generics affects them. In the NE, consumers tend to use more brand products whereas the West Coast consumers tend to use more generics. Overall, MH&#8217;s co-insurance rates will decrease from 28% at 2T to 24% and 3T will decrease from 53% (?) to 47%. Discussed Intermezzo. Mike said Ambien -well aware of insomnia. Dan said he has MOTIN. Issue is that they have contract with Lunesta - 70% rebate. If looked at as a competitor, can't add Intermezzo. Discussed different indication. Going to see if they can differentiate it and it won't affect contract.
PPLPMDL0020000001	Stow	OH	44224	1/19/2012	Janet said she has not written Butrans soley because she has been in process of finishing up paperwork and just seeing other mid levels patients but hasnt been writing scripts but will be soon and she said she remembers Butrans and likes it because it is a once a week and schedule 3. i reviewed dosing and patient types with her and she said she definatley will use and i said in the mean time Dr or PA you are working with and she said no problem
PPLPMDL0020000001	Northfield Center	OH	44067	1/20/2012	Spoke with pharmacist, Kate, who said the patient she had told me about who was prescribed one Butrans 5mcg patch did not return with any further prescriptions for it. Also, they now have all 3 strengths of Butrans stocked. Kate said that must indicate that they are anticipating prescriptions for it, although she has not dispensed any other than the one she told me about. She said Dr Deborah Reed prescribed it. Kate did not know where she was located. Discussed appropriate patient type & reviewed patient information booklets, suggesting she give them to patients who she identifies as potential Butrans patients based on their patient type. She said it is common for patients to end up on chronic short-acting opioids long term. Reviewed OxyContin savings cards. Kate said they really do not have a lot of patients on it.
PPLPMDL0020000001	Parma	OH	44129	1/20/2012	Spoke with pharmacist, Mary Jo, & reviewed Butrans patient information booklets. Discussed appropriate patient type, focusing on patients who are taking short-acting around-the-clock opioids chronically. Mary Jo said this is very common. She asked if i called on Drs Rutkowski and Dr Nickle's practice. i let her know i have been working with the Rutkowski's & the Parma location of Cleveland Back & Pain. She said they come to mind as having a lot of patients fitting that description. Discussed OxyContin savings cards. Mary Jo asked that i not leave any cards because she said it would just be one more step they have to take & she knows they will end up not getting used. Discussed automatic savings for Butrans via e-voucher & let her know that would be coming soon for new OxyContin patient starts.
PPLPMDL0020000001					

PPLPMDL0020000001	Cleveland	OH	44130	1/20/2012	Spoke with floater pharmacist. He verified that this location does have Butrans on the shelf. Discussed patient information booklets, appropriate patient type, & ability for patients to take supplemental analgesia with Butrans. Also discussed dosing & titration ability after 3 days. Discussed automatic savings for Butrans via e-voucher & savings cards for OxyContin. Reviewed eligibility requirements.
	Brooklyn	OH	44144	1/20/2012	Discussed OxyContin q12h with 7 tablet strengths. Dr Detwiler said he has been getting increasing managed care push-back for OxyContin since there is no more generic available. I showed him formulary coverage, pointing out favorable coverage. He said sometimes even if a drug is "covered", the insurance company sends him letters because even if it is not costing the patient a large co-pay, the insurance company has to pay a lot for it. Discussed savings cards where applicable. Dr Detwiler said he uses OxyContin when he wants to put a patient on a long-acting opioid. He asked for a refresher on Butrans. Reviewed core messages with him & discussed managed care, letting him know I realize this is a concern for him. Told him I want to be a resource for him to help him with getting our medications for appropriate patients at a reasonable out-of-pocket expense. Discussed Butrans as a CIII opioid with abuse/addiction potential. He asked why he would use it instead of Vicodin & asked what the equivalent for that would be in Butrans. Told him we do not have comparative data & showed initiation guide pg 6, pointing out how a patient on hydrocodone would be started on Butrans. He said fentanyl will remain his first choice since it is cheaper. He said he would consider Butrans as an option if he started a patient on fentanyl & they reported sedation. Showed him Butrans adverse events, pointing out that Butrans carries potential for similar types of side effects as other opioids.
PPLPMDL0020000001	Brooklyn	OH	44144	1/20/2012	Dr Miguel asked me to remind him about Butrans as he has forgotten what it is exactly. Reviewed core messages with him & spent time discussing appropriate patient type & range, including OxyContin as an option for appropriate patients beyond the Butrans range. I asked Dr Miguel how common it is in his practice for a patient to be taking hydrocodone 2-4 times every day. He said it is very common. He added that tramadol does not work. I asked him what a typical dose of Vicodin is for one of his patients like this. He said usually he starts them at 2 Vicodin per day, but finds that they almost always come back asking for an increase in dose or dosing interval. I told him that these could be potential Butrans patients. Showed initiation guide, pointing out where these patients fall in the range & showing how they could be initiated on Butrans 5mcg, also letting him know that patients can take supplemental analgesia in opioid or non-opioid form if necessary. Also discussed CIII, meaning he can call in prescriptions & write refills. Discussed abuse/addiction potential. He asked about side effects- showed rates. I asked Dr Miguel if he can think of specific patients in his practice who fit this description & he said yes, adding that he is going to put those patients on Butrans. Discussed OxyContin 7 tablet strengths. He asked me how it is dosed. I told him q12h. He said Dr Detwiler writes a lot of it.
PPLPMDL0020000001	Cleveland	OH	44103	1/20/2012	I talked to Amy, Pharmacy Mgr, about 6 core Butrans selling messages and asked Amy what features of Butrans stand out to her? showed visual aid, Amy said transdermal delivery and 1 application 7 days buprenorphine. I asked why that stood out to her? Amy said some patients don't like taking short-acting opioids every day so they may want to try this option. I talked to Amy about appropriate patients, Amy focused on opioid experienced patients section/visual aid, I asked if Amy provides patient counseling on opioids? Amy said yes sometimes she does. I asked Amy if she would recommend Butrans to these patients and give patient info booklets to them so they can discuss Butrans with their HCP's? Amy agreed to do this. I confirmed stocking of OxyContin, Amy said its up to HCP's if they want to change patients OxyContin dose, she won't recommend anything as it relates to OxyContin but she will tell doctors she's not dispensing OxyContin unless it's Q12H. I told Amy that was good she told HCP's the Q12H is only approved dosing option for OxyContin and I showed her the OxyContin fpi section 2.2 and Amy took fpi for reference we discussed formulary coverage for OxyContin and I recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	1/20/2012	NON-PRESCRIBER: asked dr what is she hearing from patients in the exam room, when they are taking tramadol daily but not controlled, that prompts her to make a medication change? dr said when patients are taking 200mg tramadol/day and that's not controlling their pain, they are asking for something else, she'll convert them to Vicodin. I asked dr if she would consider Butrans right after tramadol? dr said she might depend on patients, if patients are willing to wear a patch and if insurance covers Butrans. I showed formulary grid to dr, focused dr on commercial insurance patients. I asked dr if she could start 2 patients on Butrans within the next week? dr said she probably can and will do her best, dr said its tough to convince patients to try something new. <font color=blue><b>CHUDAKOB's query on 01/25/2012</b></font>-Aren't they trying something new when they go from tramadol to Vicodin. They don't seem to mind that change. Why would they mind going from tramadol to Butrans? Just a thought!<font color=green><b>BROOKAM's response on 01/29/2012</b></font>-no its not "new" in the HCP's mind as vicodin is another short-acting opioid been on the market for years so its familiar to the HCP. Butrans launched last january, new to them and its a long-acting opioid which this doctor typically does NOT write much of, so those are some reasons.<font color=blue><b>CHUDAKOB added notes on 02/08/2012</b></font>-So then your job is to help her see that going from tramadol to Vicodin is not much different than going from tramadol to Butrans when appropriate.
PPLPMDL0020000001	Cleveland	OH	44109	1/20/2012	worked pm&r-dr harris, dr greenwood, dr jaffer, dr fox, dr daftari and dr malikamaki-left Butrans patient info booklet, BUP3015, initiation guide and my business card for every dr.couldnt see any HCP's today. Worked IM-SAME info as above for Butrans and also left OxyContin FPI, conversion guide and my business card for Dr. Lindeheim, Dr. Jones, Dr. Ricanati, Dr. Gelehrter, Dr. Mc-Creery, Dr. Falck-Ytter and Dr. Harrington
PPLPMDL0020000001	Independence	OH	44131	1/20/2012	Spoke with Jill, MA, who said Dr Pai is out of the office today. Reviewed OxyContin & Butrans savings cards. Discussed eligibility & reminded her that patients with government insurance are not able to use the cards. Jill asked if OxyContin has Tylenol in it. I told her it does not. She asked if patients can take Alleve or Tylenol with OxyContin. I told her that they can. Discussed 7 tablet strengths available. She agreed to make sure to let Dr Pai know that I left savings cards.
PPLPMDL0020000001	Sagamore Hills	OH	44067	1/20/2012	Quick window call- Gave Dr Scanlon Butrans & OxyContin savings cards for his patients. He said they are helpful & also said he has really been trying to use more Butrans because patients are doing well on it. He then said he had to go see patients.
PPLPMDL0020000001	Cleveland	OH	44106	1/20/2012	worked in-patient pharmacy and family medicine-left Dr.Marsh and Dr.Trux-Butrans fpi,initiation guide,BUP3015/opioid experienced clinical trial,patient info booklet,formulary grid and my business card
PPLPMDL0020000001	Cleveland	OH	44113	1/20/2012	I talked to dr about insurance coverage for OxyContin, dr said he doesn't have any issues with OxyContin, I asked dr who is appropriate for OxyContin? dr said when patients are maxed out on percocet, he'll convert them to OxyContin. showed dr conversion guide, we discussed some examples of short-acting opioids converting to OxyContin and I asked dr if he'll continue starting new patients on OxyContin? dr said he will. I asked dr how Butrans can fit into his treatment plan? dr said he keeps thinking of Butrans like Duragesic and hasn't started anyone. showed dr Butrans initiation guide and visual aid, focused on opioid experienced patients and asked dr if he has patients taking these short-acting opioids that could be appropriate for Butrans? dr said he has a lot of patients taking tramadol and vicodin that he might consider starting on Butrans. we discussed initiation of Butrans and titration and I focused dr on commercial and BWC patients. I asked dr if he can start 2 patients on Butrans, between today and next week and I will follow-up? dr said he will do his best, talk to some patients about Butrans and see what happens. I recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44103	1/20/2012	dr said he needed OxyContin savings cards and asked about medicaid changes for OxyContin because he's getting PA requests all the time from Medicaid. we discussed medicaid coverage for OxyContin and PA. I asked dr if that's stopped him from prescribing OxyContin? dr said no. dr said he has a lot of cash paying patients too so he needs savings cards. I asked dr who is appropriate for OxyContin? dr said when patients are maxed out on percocet, he'll convert them to OxyContin. I asked dr if he'll continue starting new patients on OxyContin? dr said he will do that. I asked dr if there have been any patients he feels are appropriate for Butrans? dr said no he's given a few patient info booklets out to those he would like to start on Butrans but no one has been interested. I showed opioid experienced patients pg in visual aid, I asked dr if he could think of 2 patients to start on Butrans, focused on commercial insurance, over the course of next week? dr said he'll see who comes in to see him and go from there.
PPLPMDL0020000001	Parma	OH	44129	1/20/2012	I showed Dr Roheny the "William" patient profile & asked if he sees patients like this in his practice. He said he does. I asked him how he determines whether to titrate someone's short-acting opioid or switch them to a long-acting option like Butrans or OxyContin. Dr Roheny said that was a good question & that he hasn't thought about that before. He said he guesses he chooses the long-acting options once he realizes that a patient is going to need to be on pain medication for a longer period of time. I told Dr Roheny that a patient like "William" would be a potential Butrans candidate at a 10mcg/hr dose. Dr Roheny asked if the doses were 5, 10, & 20mcg & dosed once weekly. I told him he is correct. He said he really does want to start using it & that he honestly does have patients like the one in the profile on short-acting opioids chronically. He added that it is just difficult because he knows he can really only write it for patients with private insurance. I asked if he still has patients like "William" who have private insurance. He said yes. I asked if he feels comfortable initiating Butrans in patients depending on their current opioid dose. He said yes. I asked if he would at least try Butrans for a few of those patients so he can start to get clinical experience with it. Dr Roheny also said he has been looking for a pain management conference. I told him I would get him some educational resources which he said he would appreciate.
PPLPMDL0020000001	Cleveland	OH	44103	1/20/2012	TRIALIST-dr said she's starting more patients on Butrans and is getting some PA's for Caresource patients approved. I asked dr how the patients are doing? dr said patients are doing great and she just needed some patient info booklets. I asked dr if she can find more patients today and next week to start on Butrans? dr said she will do that. I asked dr if she is aware of OxyContin's formulary coverage for her medicare patients? dr said she hasn't had problems with OxyContin's insurance coverage. I showed dr UHC/AARP formulary grid and asked dr if she can start a couple of her UHC/AARP patients on OxyContin? dr said ok that was good info to know and she'll keep that in mind. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44130	1/20/2012	Discussed managed care status for OxyContin & Butrans. Also pointed out favorable coverage for OxyContin on CCRx. Dr Kansal said he is frustrated with managed care because they want him to see too many patients per hour & he refuses to see more than 4. I asked if there were any resources that I could provide that would help him in his practice, mainly in his dealings with pain management or OxyContin & Butrans. He said to just continue to update him & talk to him about them.
PPLPMDL0020000001	Cleveland	OH	44109	1/23/2012	I talked to Cheryl, Pharmacy Tech, about who is writing Butrans, Cheryl said dr shen, dale novak(PA), dr marshall just started a BWC patient today, dr nickels, deb torres (PA) and dr hernandez. Cheryl said they have all 3 dosage strengths in stock and patient info booklets. I met Jag, Pharmacist, discussed Butrans indication and asked Jag if he provides patient counseling to those taking opioids daily for their chronic pain? Jag said yes he does that. I asked Jag if he would recommend Butrans to appropriate patients, hand them patient info booklets and have patients talk to their HCP's about Butrans? Jag agreed to do this. I asked Jag what insurance he sees most often? Jag said Medicaid, Medicare and BWC only a few commercial insurance patients. I asked Jag if he had OxyContin in stock? Jag said yes most strengths, I asked Jag how many? Jag said 5 dosage strengths.
PPLPMDL0020000001	TWINSBURG	OH	44087	1/23/2012	Spoke with pharmacist, Amy, & reviewed Butrans core messages. Discussed appropriate patient type, focusing on patients taking chronic tramadol or Vicodin around-the-clock. She said this is common. She said Dr Ningengowda is in this office one day a week at this time. Reviewed OxyContin savings cards. Amy asked me if cash-pay patients can use them. I told her yes. She said she tried to use one for a patient & it did not work. I reviewed eligibility requirements with her, reminding her that patients with Medicare & Medicaid are not able to utilize the cards. She said she thinks it was a Medicare patient who she had tried it for.
PPLPMDL0020000001	Cleveland	OH	44113	1/23/2012	I asked dr if he see's a benefit in One Butrans-7 days buprenorphine delivery and patients wearing Butrans for 1 week? dr said yes he does. I asked dr who are the appropriate patients for Butrans? dr said patients with chronic pain taking vicodin or percocet daily no chance to close d
PPLPMDL0020000001	Bedford	OH	44146	1/23/2012	Presented OxyContin conversion/titration guide to Dr Haddad & showed him how he can use it when converting patients from around-the-clock short-acting medications like Percocet or Vicodin over to OxyContin. Also showed him 7 tablet strengths, pointing out intermediate doses of 15, 30, & 60mg. Reminded him of savings cards for eligible patients. Dr Haddad said he uses OxyContin & is comfortable with it & asked me if I still have Butrans as well. I asked him to tell me more about his experience with Butrans. He said it seems to work well if it is covered. Reviewed managed care coverage with him, focusing on commercial insurance & BWC. Also reviewed appropriate patient type, focusing on patients who take 3-4 tramadol per day, for whom he would otherwise increase the dose or switch them to Vicodin. He said he would try to find more patients. Also discussed upcoming dinner programs. He said he would try to make it to one.
PPLPMDL0020000001	Beachwood	OH	44122	1/23/2012	Introduced myself & Purdue's products to Dr Craig. Discussed indication, dosing, CIII, abuse/addiction potential, & appropriate patient type. Focused on patients taking tramadol chronically, around-the-clock. She asked how she would start a patient who is taking tramadol 4 times per day. Showed initiation guide pg 6, letting her know that patient could start on the 5mcg dose. Discussed titration ability after 3 days & ability to take supplemental analgesia with Butrans. She asked about insurance coverage. Discussed focusing on commercial insurance, where patients have access. She asked about BWC. Let her know that as of now, Butrans is being paid for. She said she anticipates insurance companies telling her to use fentanyl instead. Re-focused her on appropriate patient type & range, including OxyContin as an option for appropriate patients beyond Butrans range. She said she better understands now who the right patient type is. She asked me to schedule a lunch to discuss Butrans further.
PPLPMDL0020000001	Cleveland	OH	44113	1/23/2012	dr said majority of his patients start on Butrans 10mcg/hr, after 4wks need to be titrated to 20mcg/hr, dr said some patients need immediate release opioids with Butrans and only a few can take ibuprofen with Butrans. I asked dr who are the appropriate patients for Butrans? dr said patients taking 4-5 pills/day, dr explained his treatment algorithm 5mg, 7.5mg and 10mg hydrocodone, I positioned Butrans after 5mg hydrocodone. dr said yes that

	Warrensville Heights	OH	44122	1/23/2012	I showed Dr Brooks the "Emma" patient profile & asked him if this mirrors patients he sees in his practice. He said he does see patients like that. I asked if he would consider that a Butrans patient. He said yes. He added that he actually would not use tramadol first, but would use Butrans first line because he does not use tramadol chronically. I asked Dr Brooks what makes him choose a long-acting over a short-acting medication. He said if it is acute, he prescribes short-acting & if it is a chronic issue, he prescribes long-acting. I asked Dr Brooks what he would say prevents him from using more Butrans. He said it is purely a matter of insurance coverage & patients having access to Butrans. He said he thinks of Butrans as a first line choice, but added that he has a hard time getting it covered. Focused him on commercial insurance patients. Also discussed OxyContin, with broad formulary access, for patients where appropriate. He said he uses OxyContin mainly for patients with cancer pain. I asked if he has prescribed new OxyContin starts recently. He said he has. I asked what patients are on before they start on OxyContin. Dr Brooks said if he inherits a patient from another practitioner who was treating a patient with short-acting opioids like Percocet chronically, that is a new OxyContin patient for him. I told him it sounds like he is doing the right thing. I asked him to continue to prescribe both medications & he agreed.
PPLPMDL0020000001	Cleveland	OH	44109	1/23/2012	I asked dr if he started 2 patients with chronic pain taking tramadol daily but not controlled and ready for a medication change,per our discussion last monday,on Butrans? dr said no he didnt.dr said there's many factors involved he needs to talk to patients about Butrans and see if they are willing to try Butrans,dr said they are also trying to get their patient numbers up too so thats a factor.I asked dr if he can think of 2 patients this week that he can discuss Butrans with and hand them the patient info booklets to assist in educating them,dr said he'll look and see who's coming into the other office tomorrow.I asked dr to focus on BWC and commercial insurance patients,dr said ok
PPLPMDL0020000001	Lakewood	OH	44107	1/23/2012	Quick call, Dr said that he is still working on finding a patient for Butrans. I let him know that we will find the right patient and asked if he would have a patient on low dose vicodin or tramadol coming in asking for a change in their medication. He said they might but most patients are stable but he will try.
PPLPMDL0020000001	Cleveland	OH	44105	1/23/2012	dr said she's retiring the end of March 2012 and is with another dr today as he may be taking over the practice.reminded dr of previous discussion of her patients taking percocet daily for chronic pain and I asked if dr would hand patients a patient info booklet and start them on Butrans? dr said she'll think about it and asked me to come back next week.I talked to doctors MA,Luz,and asked if Luz would recommend Butrans to patients that have BWC or commercial insurance,Luz agreed to do this.
PPLPMDL0020000001	Lakewood	OH	44107	1/23/2012	Dr said that he has been keeping Butrans in mind. I showed Emma and asked if he would start a patient like this on Butrans. He agreed.
PPLPMDL0020000001	Westlake	OH	44145	1/23/2012	We reviewed the Butrans initiation guide and I asked when he decided to use Butrans as an option. He said when patients are taking vicodin around the clock. I reviewed William case study and I asked how often he sees patients like these. He said he does and he agreed to try Butrans for more of those patients. I reviewed the managed care for Butrans and that OxyContin is covered on most Med D plans.
PPLPMDL0020000001	Cleveland	OH	44114	1/23/2012	I asked Horace and Amonte,Pharmacists,what patients say to them when taking chronic opioids daily? Amonte said patients only ask questions when their pills are missing.I asked if patient education brochures would be helpful about protecting your medicines? Both pharmacists said I could bring brochures as it may be helpful for elderly patients.Amonte asked if we provide any education for pharmacists? I discussed LEELE program with Amonte and he is going to have pharmacy association secretary call me.
PPLPMDL0020000001	Strongsville	OH	44136	1/24/2012	Spoke briefly with Megan, pharmacist, who said they have one or two patients on Butrans. Reviewed appropriate patient type & discussed patient information booklets. Also discussed savings cards for Butrans & OxyContin. She said they did not need any savings cards at this time.
PPLPMDL0020000001	Lakewood	OH	44107	1/24/2012	I showed the formulary grids for OxyContin med D. He said that he does have many Medicaid patients. I asked if he would prescribe Butrans for patients taking vicodin or percocet around the clock and he agreed.
PPLPMDL0020000001	Westlake	OH	44145	1/24/2012	I asked Dr after which step in the process does he decided to go to Butrans. He said when patients are taking vicodin or even tramadol and instead of increasing their dose. He said that he does not like to prescribe more than 4 tramadol per day, so he would consider Butrans. I reviewed Emma case study and that this is an appropriate patient for Butrans. I reviewed OxyContin as an option and he said he saves OxyContin for patients with cancer worked pm&r dept-see call notes on dr greenwood, dr jaffer and dr fox-also spoke with 2 medical secretaries (jodi and vanessa) and worked with stephanie,MA and Tony,RN discussing Butrans and appropriate patients,initiation,titration,patient info booklet,formulary coverage and patient savings card program
PPLPMDL0020000001	Cleveland	OH	44109	1/24/2012	I asked Dr Abraham to tell me about the experience he has been getting with Butrans. He said that he really likes buprenorphine & has used it a lot as an anesthesiologist. He added that he has been happy with the results he sees with Butrans. I asked what a "Butrans patient" is for him. He said someone on a short-acting opioid like Vicodin or Percocet 3 times per day would be an ideal candidate for Butrans to him. I told him it sounds like he is choosing the right patient type. He said his only problem has been with managed care coverage. He added that he would love to be able to use Butrans in his elderly patient population, but Medicare will not allow it without failure of other long-acting opioids. I asked if he knows the type of insurance a patient has when he goes into a room. He said he does. Reviewed commercial insurance coverage & also showed 28 day trials/savings cards for Butrans. He said 3/4 his patients would be on Butrans if the coverage was better. I asked if he will look for the same type of patient clinically, but with commercial insurance. He said the problem with his younger patients is he does not trust them. He went on to say that one of his complaints with Butrans is that the patch is not tamper-resistant. I agreed that Butrans is a CII opioid & does carry abuse/addiction potential & advised that he is right in being cautious. He said he wishes it had naloxone in it. He said he will still use Butrans in the appropriate patients who he trusts.
PPLPMDL0020000001	Garfield Heights	OH	44125	1/24/2012	Doc said he is havings sucess with butrans. He has written it twice - one for medicare and one for commercial insurance. He believes both are still taking butrans. He said if patients like it and it works they may be willing to pay a bit more for it. I asked him if he will continue to prescribe butrans for appropriate patients. He said he would. He said he would prescribe for opioid naive or opioid experienced. I discussed the appropriate starting doses. I asked doc to think if butrans when patients come in for a dose adjustment on their current therapy. Provided new savings cards and explained the on month free trial for commercially insured patients. I explained that oxycontin is another option for patients that may require more flexibility in dosing and higher strengths.
PPLPMDL0020000001	Mayfield Heights	OH	44124	1/24/2012	I discussed Butrans fpi,6 core selling messages,dr said he read some info on Butrans but didnt think his patients could get it because they are medicaid.we discussed PA requirements for medicaid patients and Butrans,dr said ok he has patients in mind and will start talking to them about Butrans.I showed dr visual aid,appropriate patients and dr focused on opioid experienced patients.I asked dr if he treats these patients? dr said yes.I asked dr if he felt Butrans could be an option for some of his patients? dr said if they are willing to wear a patch and insurance pays for Butrans.I showed dr patient info booklet,asked dr to give booklets to patients and discuss Butrans with them,dr said he will do that and see what happens.I asked dr how OxyContin plays a role in his practice? dr said he writes a lot of OxyContin and could always get it covered but now theres a PA for medicaid patients.we discussed PA for medicaid patients and OxyContin and i discussed Medicare part D patients getting OxyContin at lowest branded co-pay,showed formulary grid.I asked dr if he will continue starting new patients on OxyContin? dr agreed to do this.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44113	1/24/2012	Quick call as doc was behind. I reviewed the positioning and CII status and once weekly dosing. Reminded him that butrans is covered on BWC as is oxycontin. Provided formulary grids and initiation guide.
PPLPMDL0020000001	Euclid	OH	44132	1/24/2012	dr said she has a few patients on Butrans,they are doing great,dr said she's happy with Butrans as she's seeing clinical reductions in pain for these patients.I asked dr if she's seeing any commercial insurance patients that she considers appropriate for Butrans? dr said she has a few commercial but a lot of medicaid and is getting PA's approved by Caresource.I showed patient case study,emma,discussed patients like this that dr can start on Butrans,dr said she will do that and see what happens.I asked dr how OxyContin plays a role in his practice? dr said he writes a lot of OxyContin and could always get it covered but now theres a PA for medicaid patients.we discussed PA for medicaid patients and OxyContin and i discussed Medicare part D patients getting OxyContin at lowest branded co-pay,showed formulary grid.I asked dr if he will continue starting new patients on OxyContin? dr agreed to do this.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44113	1/24/2012	Quick call-Dr Fedorko said he has been giving out the Butrans patient information booklets to patients. I showed him new Butrans trial offer & explained eligibility requirements. He took one card from me & put it on his desk. He said he knows of someone to give it to who he thinks would be a good candidate for Butrans.
PPLPMDL0020000001	Garfield Hts	OH	44125	1/24/2012	dr said he has a couple patients on Butrans now and he's seeing good results.I showed dr BUP3015,opioid experienced patients clinical trial and asked dr if he felt a 30% clinical reduction in pain was significant? dr said yes it is.I asked dr if it was clinically significant enough for him to prescribe Butrans this week? dr said yes and he will consider Butrans as an option for patients.we discussed Butrans trial offer and patient savings program and I asked dr if he had 5 patients in mind that he could start on Butrans? dr said he probably will see 5 patients in the next week or 2 that are appropriate for Butrans.dr asked that I leave 1 pack of cards.
PPLPMDL0020000001	Brooklyn	OH	44144	1/24/2012	Spoke to Jesse about the stocking of movement of butrans. He said he may have had a script once but doesn't think the patient ended up getting it. He does not remember why. He asked about the coverage. I showed him the formulary grid and expressed that commercial plans are the focus. I explained the positioning of butrans and the provided information on the proper application.
PPLPMDL0020000001	Garfield Hts	OH	44125	1/24/2012	dr said he started a few patients on Butrans last week,dr said these were patients taking tramadol,not controlled and he talked to them about Butrans.I showed dr Butrans patient info booklet and asked dr if he's discussing application/rotation info with patients? dr said he tells them to read the booklet and verbally tells them about application/rotation info.I asked dr to just show patients that section,dr said he will do that.I asked dr if he has more patients like the one's he's started recently,coming in this week that he could start on Butrans? dr said he's sure he does.I showed dr Butrans trial offer and savings card program and asked dr if he has 5 patients this week that he could start on Butrans,only commercial insurance patients? dr said he will look and see but probably does have some coming in this week.recommended Senokot-5
PPLPMDL0020000001	Mayfield Heights	OH	44124	1/24/2012	Spoke to Warren about the movement of butrans. He said that he has not been seeing anymore scripts for it. He said that dr. Laham had asked if he was stocking butans a while back but he never got a script from him. I told him that it may just be a coincidence that he hasnt not seen any scripts from Laham. I referred to the FPI and that supplemental analgesia can be used ith butrans, in case he gets push with any future script. Gave him more oxycontin savings cards as the last ones I gave expired.
PPLPMDL0020000001	Cleveland	OH	44109	1/24/2012	dr said he started another patient on Butrans last week,I asked dr to tell me about this patient and why he chose Butrans? dr said patient was taking vicodin daily for chronic pain but it wasnt controlling the pain so dr suggested Butrans and patient was willing to try Butrans.I asked dr if he has more patients coming in this week that perhaps need medication adjustments where he could discuss Butrans and start them on Butrans? dr said he probably does and will look to see who's coming into office.dr asked about insurance coverage for medicaid patients. we discussed PA for medicaid patients.I asked dr to focus on commercial insurance patients and showed dr Butrans trial offer and patient savings card program,dr asked for 1 pack.I asked dr if he'll see 5 patients today-next week that he can give the card to and patients can try Butrans and use patient savings card after that? dr committed to this.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44143	1/24/2012	I showed doc the profile on Emma and asked if he ha patients like that. He said all his patients are different. I reviewed the butrans indication and asked doc to if he would prescribe butrans for appropriate patients like Emma that come in for a dose adjustment on their tramadol. He said he would think about it. I showed him to the formulary grid and asked him to stick with those plans. Gave angela new savings cards too replace the expired ones.<font color=blue><b>CHUDAKOB's query on 02/02/2012</b></font><b>Charmaine, what is Dr. Mandel's HBDI color? Asking him a question in his thinking style may elicit a different type of response.<font color=green><b>SIMERTOC's response on 02/16/2012</b></font>I wasn't sure of his color so I initially left it blank. If I had to guess, I would say green.<font color=blue><b>CHUDAKOB added notes on 02/17/2012</b></font>Perhaps looking at a question relating to his HBDI color may help!
PPLPMDL0020000001					

PPLPMDL0020000001	Cleveland	OH	44114	1/24/2012	dr said he started another patient on Butrans yesterday,i asked dr to tell me about that patient and why he chose Butrans? dr said patient was taking Percocet, daily,not controlled so he started this patient on Butrans.i asked dr if he has more patients like this,focusing on commercial and BWC,coming in this week? dr said he probably does.i discussed free trial offer and savings card program with dr,dr asked for 1 pack and committed to starting 5 patients on Butrans.
PPLPMDL0020000001	Cleveland	OH	44130	1/24/2012	Spoke with MA Marki & introduced Butrans. She said i would need to leave information with my card & she would give it to Dr Panigutti. Attempted to see his nurse, but Marki said she was unavailable. Discussed OxyContin savings cards. Marki asked for a package & said Dr Panigutti would appreciate them. I asked her to make sure that he got the information i left & she agreed.
PPLPMDL0020000001	Cleveland	OH	44114	1/24/2012	dr said she's got a few patients coming in this week that she knows are taking hydrocodone daily but aren't controlled so she's considering Butrans for them.we discussed initiation and titration of Butrans,i showed initiation guide and asked dr to start a couple patients this week? dr said she will.i showed dr Butrans trial offer and savings card program,dr committed to starting 5 patients on Butrans this week.focused dr on commercial and BWC
PPLPMDL0020000001	Euclid	OH	44132	1/24/2012	Introduction. Discussed the butrans and oxycontin patient type. I discussed the key selling messages of butrans before she got called away. She asked that i leave some literature. Provided savings cards, formulary grid and portal invite.
PPLPMDL0020000001	Cleveland	OH	44124	1/24/2012	Quick call....reviewed the butrans selling messages with doc and asked him if he sees a place for butrans. He said his patients are on stronger meds and asked about the coverage. I gave him a formulary grid and info on the savings cards. He asked if PAs are required as he does not do PAs. I advised him to stick with the covered plans to minimize PAs. I explained the extension on the oxycontin savings cards til 03/31/12 but also gave new ones.
PPLPMDL0020000001	Parma	OH	44134	1/24/2012	Dr Hernandez said he just put 2 patients on Butrans. I asked him to tell me more about them. He said one was a new patient & the other was a refill. I asked him what the new patient was on & what his pain was from. He said the patient has pain in his hip & did not like to take pills, so Dr Hernandez put him on Butrans. I asked what dose. He said 5mcg. He said the patient called him & reported experiencing nausea with Butrans, so he gave him fenergan for the nausea & now the patient is doing well. He added that the patient said the pain relief he gets from Butrans is great. Gave Dr Hernandez Butrans free trial offer & explained eligibility requirements. I asked Dr Hernandez if he ever writes any new OxyContin prescriptions. He said he usually just continues patients who are already on it. I asked him when he would start a new start. He said only if the patient was awaiting surgery. I asked why. He said because he does not like anyone to be on it long term, so if someone is awaiting a surgery & only needs it to get by until the surgery, he would start them on OxyContin. He said he doesn't like his patients to be on any opioid long term. He added that if a patient needs something long term, he allows only Suboxone. I asked him if patients ever come to him already on short-acting opioids around-the-clock-He said yes. I asked what he thought of offering those patients OxyContin q12h if appropriate. He said many of them may like that option & that he would offer it where appropriate
PPLPMDL0020000001	Westlake	OH	44145	1/24/2012	I asked when he decided that Butrans may be a good option. He said that when they need something before they come in for injections and when short acting meds are not working well. He said that there is no one type of patient that each case is different.
PPLPMDL0020000001	Westlake	OH	44145	1/24/2012	Quick call with Katy, I asked to schedule an appointment with her, the pharmacist or NPs to review Butrans and OxyContin information. She said she would not be able to set anything up right now, as they have been extremely busy. She took product information and said she will pass it along to the pharmacists.
PPLPMDL0020000001	Garfield Hts	OH	44125	1/24/2012	I showed Dr Sadowski Butrans 28-day trial cards with savings cards. He asked me to put them in his main exam room in the front so that he can see them to help him remember Butrans when patients come in. OxyContin CCRx coverage message before he walked into a room. Spoke with MA Deena & reviewed eligibility for savings cards. I asked her to alert Dr Sadowski when a potential Butrans patient calls her to ask for a refill of tramadol or Vicodin, especially if they are saying it is not lasting long enough. She agreed. Also discussed OxyContin Medicare D coverage & showed her CCRx leaver.
PPLPMDL0020000001	Parma	OH	44129	1/25/2012	Quick call: Showed Dr Gliolitti the new Butrans 28 day trial/savings cards & gave him one package. Also explained eligibility. I asked him to at least give potential Butrans candidates the patient information booklet I gave him last time so they could educate themselves on it & decide if it would be something they would want to try. He agreed to do this & said he liked the idea of the trial certificates. Spent time with Jazz. Discussed new trial/savings cards for Butrans. She asked me what Butrans is for. Discussed appropriate patient type & 7 day dosing in a transdermal system. Also reviewed managed care coverage for OxyContin & showed her savings cards. <font color=blue><b>CHUDAKOB's query on 02/02/2012</b></font>Good next call objective. I like how your next call is a progression from the previous call.<font color=green><b>APSEGAS's response on 02/04/2012</b></font>Thank you. I feel like that is a good approach with him because he only gives blips of real time & often I feel that my goal was not entirely reached in a single call.<font color=blue><b>CHUDAKOB added notes on 02/08/2012</b></font>Sound like you have a good plan!
PPLPMDL0020000001	Euclid	OH	44117	1/25/2012	I asked doc if he has patients in his practice that are taking tramadol as monotherapy. He said tons of them. I showed him the butrans demo and asked him to try appropriate patients on butrans when they come in for a dose adjustment on their current therapy. He said he wrote it a couple of times. I asked him what was the feedback. He said honestly they didn't want to take the patch. He looked up one patient he wrote it for and he realized the patient had not been back in a couple of months. He said he would give it another try for the patient type I mentioned.
PPLPMDL0020000001	Bedford	OH	44146	1/25/2012	Spoke with floater pharmacist, Veronica, & reviewed Butrans appropriate patient type, focusing on patients taking around-the-clock short-acting opioids like tramadol or Vicodin. Also showed her new 28 day trial/savings cards for Butrans & discussed e-voucher for monthly savings. Also discussed 7 tablet strengths of OxyContin. She agreed to leave Butrans information for the pharmacy manager.
PPLPMDL0020000001	University Heights	OH	44121	1/25/2012	I showed doc the profile of william - Less than medicare age, low back pain, and taking vicodin 7.5mg q6hr. He said yes. I told him those might be appropriate patients for butrans and asked him to try that patient on 10mcg of butrans when those patients come in for a dose adjustment. He asked if they would be able to afford it. I told him if they have a commercial plan like medical mutual it should be \$15-20 with a savings card. He asked what if they don't. I asked him to focus on commercial insurance for butrans but most medicare patients might be appropriate for low dose oxycontin.
PPLPMDL0020000001	Cleveland	OH	44106	1/25/2012	dr said he started a couple patients on Butrans and they are doing good.i asked dr why he chose Butrans for these patients? dr said patients were taking tramadol,not controlled instead of giving them vicodin he started them on Butrans.i showed initiation guide and discussed initiation and titration of Butrans with dr,showed visual aid and we discussed appropriate patients-dr focused on opioid experienced patients and we talked about his patients taking tramadol that could be appropriate for Butrans.i asked dr if he has 5 new commercial patients coming in this week that he could start on Butrans? dr said he will have to see who's coming in and i should talk to Lisa,patient care coordinator who handles insurance,i discussed with dr the Butrans trial offer and \$40savings program for commercial insurance patients,dr said that sounded great leave the cards and he'll see what he can do.i showed dr appropriate patients flashcard for OxyContin,dr said he writes a lot of OxyContin thinks it's a good drug and will continue doing so.i asked dr how does he decide OxyContin is the option for patients? dr said when patients have tried all shor-acting opioids he'll convert them to OxyContin.showed dr formulary grid and we discussed medicare and commercial insurance patients starting on OxyContin,i asked dr if he'll continue prescribing OxyContin for new patients? dr said yes he will do that.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44103	1/25/2012	i talked to dr about appropriate patients for OxyContin,showed appropriate flashcard,dr said he starts a lot of patients on OxyContin,no issues with insurance other than PA for medicaid patients now.i asked dr if he titrates the OxyContin doses? dr said yes he will at follow-up visits,nothing is done over the phone,i showed dr conversion guide and we discussed 7 tab strengths.i asked dr if he'll continue starting new patients on OxyContin? dr committed.i showed formulary grid for commercial and medicare patients.i asked dr if any patients are still taking short-acting opioids that perhaps could be appropriate for Butrans? dr said probably so we discussed opioid experienced patients,showed visual aid and i asked dr if he could start 2 patients on Butrans if they have commercial insurance and use free trial offer card/\$40 savings card? dr said he will talk to patients about Butrans,give the booklet and see what they say.i focused dr on commercial insurance patients for Butrans starts.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44106	1/25/2012	i talked to Patty,Pharmacist,about Butrans stocking and Rx's,Patty said no Rx yet for Butrans but they still have Butrans in stock.i asked Patty who she felt would be appropriate for Butrans? Patty said patients taking a couple hydrocodone or oxycodone that aren't controlled and are asking for more pills.i showed Patty Butrans visual aid,we discussed opioid experienced patients and i asked Patty if she would recommend Butrans,hand patient info booklets to appropriate patients,that aren't controlled on short-acting opioids? Patty said yes they have been giving them out and all they need now is the doctors to start writing Butrans.we talked about 6 core selling messages,focused discussion on commercial insurance patients and we talked about patient savings program.confirmed OxyContin stocking and we discussed appropriate patients-showed visual aid,patty said doctors make decisions on OxyContin they never recommend OxyContin for anyone.gave formulary grid and i recommended Senokot-S
PPLPMDL0020000001	N Royalton	OH	44133	1/25/2012	Introduced Butrans to Dr Saul, delivering core messages. Alerted him to black box & heat warning. Spent time going over appropriate patient type, including OxyContin as an option for appropriate patients beyond Butrans range. He asked if he has to have a special license to prescribe it-I told him he does not. He said that some products, such as one fentanyl product, requires a special training to be able to prescribe the medication. He added that he is not comfortable prescribing a lot of short-acting opioids. I asked if when he has a patient on tramadol 3 times per day, it is common to have to increase the patient's dose. He said it happens frequently & he would prefer not prescribe high quantities of pills. I asked if Butrans sounded like something he would find useful in his practice. He said yes. I asked if he has a specific patient in mind based on the appropriate patient type. He said yes. He said the patient is on fentanyl 12.5mcg. He added that he really didn't want the patient to be on fentanyl, but he also did not want to prescribe a high quantity of Vicodin, so he chose the only transdermal option. Showed initiation guide & walked him through initiating Butrans, letting him know fentanyl patients were excluded from studies. He asked about side effects-Showed him rates. Discussed managed care & trials/savings cards. I asked if he would start this patient on Butrans & he said yes. Asked if i could follow-up & he said i could.
PPLPMDL0020000001	Cleveland	OH	44143	1/25/2012	Window call....Reviewed the butrans and oxycontin indications. Explained that both are covered on BWC and well covered commercially and with savings cards. Gave doc initiation guides and formulary grids. Nothing Learned. Tamara was out sick so unable to schedule lunch.
PPLPMDL0020000001	University Hts	OH	44118	1/25/2012	Window call....Reviewed the butrans CII status and once weekly transdermal analgesic. I asked if he has an patients that might benefit from such a product. He said maybe. I gave him a patient profile and explained taht butrans can be used for opioid naive of those coming in for a dose adjustment to their tramadol or vicodin. Nothing learned. Provided formulary info.
PPLPMDL0020000001	Independence	OH	44131	1/25/2012	Spoke with pharmacist, David, & explained new Butrans 28 day trial offer & savings cards. Reviewed eligibility requirements for usage. Reminded him of patient information booklets that we discussed & encouraged him to give them out to patients getting chronic tramadol or Vicodin prescriptions if he thinks they could benefit from Butrans. I asked if he had seen any new OxyContin prescriptions recently. He said they really do not move a lot of OxyContin at this location & almost all of what they fill is refills.
PPLPMDL0020000001	Westlake	OH	44145	1/25/2012	Spoke with Jen, we reviewed the savings card and free trial for Butrans. We discussed the medication guide and i asked if she would let patients know about Butrans as an option. I showed the patient cases on tramadol or vicodin around the clock. We reviewed OxyContin as an option with 7 tablet strengths.
PPLPMDL0020000001	Parma	OH	44134	1/25/2012	Dr Hernandez said he has a patient who is on Suboxone for pain & who has BWC. He said BWC is no longer paying for Suboxone for pain. He said he prescribed Butrans 20mcg for the patient, but the patient said it was "not enough" to control his pain adequately. Dr Hernandez said he told the patient to cut one of the patches & wear the half 20mcg plus a full 20mcg patch. He said this also was not enough, so he told the patient to try two 20mcg patches at the same time. I told Dr Hernandez it is not recommended to cut the patches or go over 20mcg. I told him neither of these has been studied & again told him it is not recommended. He said he knows this, but his patients on Suboxone get a lot more buprenorphine with Suboxone than they do with Butrans, & he finds this amount to be clinically effective & thinks it is what is best for the patient. Dr Hernandez asked if the pharmacies would dispense a quantity of 8 patches per month. I told him I do not know since it is not recommended. Dr Hernandez said he is going to try to see if the pharmacy will fill the prescription.
PPLPMDL0020000001	Sagamore Hills	OH	44067	1/25/2012	Spoke with Linda, MA, & reviewed new Butrans 28 day trial/savings cards. Discussed eligibility requirements. I asked Linda to make sure each of the practitioners & their nurses was made aware of the new program & she agreed to let them know. I also asked her to leave Butrans information for each of the practitioners. She said i could leave information for all of them except Dr Maguire, who does not take any information about medications. They did not need additional OxyContin savings cards.
PPLPMDL0020000001	Westlake	OH	44145	1/25/2012	Spoke with Caitlin, Dr was out today, but she said she would give the Dr the Butrans free trial offer savings cards and will explain to the Dr about the program and to use them for commercial insurance pateints.



PPLPMDL0020000001	Cleveland	OH	44104	1/25/2012	dr said he has 1 patient on Butrans and patient is doing well.dr said a lot of patients dont want to try a patch and only want their pills.i showed dr fpi,section 2.4 maintenance of therapy,we discussed dr having the option of starting patients on Butrans with immediate release opioids OR non-opioid therapy.dr said he'll continue talking to patients about Butrans and see what happens.i discussed Butrans free trial offer,for commercial insurance patients and asked dr if that would make a difference? dr said absolutely.i discussed program and asked dr if he could start 5 new patients on Butrans over the next 2 weeks? dr said he will do that with these cards.we discussed initiation of Butrans,showed initiation guide,focused dr on commercial insurance patients.i asked dr at what point is he considering OxyContin an option? dr said thats his last choice and he tries to get patients off OxyContin.showed challenging flashcard,discussed appropriate OxyContin patients with dr but dr said he had to go,he took formulary grids for OxyContin.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44104	1/25/2012	dr said he's not started anyone on Butrans recently.dr focused on his hospice and nursing home patients that he has started on Butrans and said that process was easy and patients are controlled on Butrans.i asked dr if he has a couple commercial insurance patients that he could start on Butrans? dr said he might but will have to see who's coming in this week.i showed dr patient case study,emma.dr said he see's patients like this,i asked dr to focus on 2 patients like this and start them on Butrans.dr said he will do that if patients are willing to wear a patch and if insurance covers it.i showed formulary grid,focused dr on commercial insurance patients.recommended
PPLPMDL0020000001	Parma	OH	44129	1/25/2012	Spoke with MA, Dina, introducing myself & Purdue's products. She said Dr Salama is in this location all day Wednesday & Fridays seeing patients. Offered new Butrans 28 day trial/savings cards & OxyContin savings cards. She accepted both of them, adding that Dr Salama really likes Butrans, so the cards will be very useful there. Reviewed eligibility requirements. Scheduled an appointment to meet with Dr Salama to discuss Butrans & OxyContin.
PPLPMDL0020000001	Cleveland	OH	44113	1/25/2012	dr said she's starting patients on Butrans every week and they are doing great so far,i asked dr if she's thought of any patients taking hydrocodone daily that aren't controlled to be appropriate for Butrans? dr said yes she has a few patients that were taking vicodin and she started them on Butrans.i talked to dr about Butrans free trial offer and asked dr if she had 5 new,commercial insurance patients,that she could start on Butrans this week? dr said she probably does and will take them.dr said the free trial offer will help him sell some patients on Butrans so they can try it first and then use the \$40 savings card.i focused dr on commercial insurance patients for this
PPLPMDL0020000001	Westlake	OH	44145	1/25/2012	Follow up with Dr at his Westlake office. i reviewed the savings cards for Butrans and the free month trial for patients with commercial insurance. He said that he just started a few more Butrans patients and that he has been happy with the results. i asked if the free month trial will help him to start more new patients and he said yes it will.
PPLPMDL0020000001	Parma	OH	44129	1/25/2012	Spoke with nurse, Pam, & introduced myself & Purdue's products. Went over Butrans core messages. She said it sounds like something Dr Antonelli would be interested in & that he has patients who may be able to benefit from Butrans. She said because it is CIII, he may be more interested in it. She added that he really does not prescribe CII products such as OxyContin. Alerted her to box warning & discussed abuse/addiction potential. She asked me about insurance coverage. Discussed managed care status for Butrans & asked her to focus Dr Antonelli on patients with commercial/private insurance since those patients have the best access to Butrans. i asked her to give Dr Antonelli a Butrans FPI with my card to request an appointment with him. She agreed & took notes about Butrans on my card. She asked me to come back in a few weeks to follow-up & she would try to get me
PPLPMDL0020000001	Cleveland	OH	44103	1/25/2012	dr said she's starting patients on Butrans every week and is getting a lot of PA's for Medicaid approved.we discussed the patients she's starting on Butrans,dr said majority of patients were taking percocet every day for their chronic pain but weren't controlled so she talked to them about Butrans and started them dr said patients are doing well on Butrans.i asked dr if she has a couple patients like the one's she's started,with commercial insurance,that she can start over the next week on Butrans? dr said she probably does.i discussed free trial offer with dr,dr said to leave 1 pack and she'll definitely talk to patients and start them.we discussed OxyContin as an option for doctors medical and medicare patients,dr said no problem with OxyContin she's doing more PA's for medical patients but she likes OxyContin as it works well for her patients.recommended Senokot-S
PPLPMDL0020000001	Cleveland Hts	OH	44118	1/25/2012	Doc was out of the office on vacation today. Spoke to Rukia about the butrans savings cards. i explained that the ones he has are expired and how the new ones offer a one month free trial. i also explained that the cards would not be good for medicare/medicaid/cash pay patients. Left savings cards as doc will be back tomorrow.
PPLPMDL0020000001	Westlake	OH	44145	1/25/2012	Spoke with Kelly, Wed is a busy day for them and Dr was back in procedures. i let her know about the Butrans free month trial offer and she agreed to pass along the info.
PPLPMDL0020000001	Bedford	OH	44146	1/25/2012	Quick call- Dr Moufawad said he is really starting to get a lot more Butrans patients & he is excited about upcoming speaker programs. He asked me when he would get his slides. i let him know i would look into it & will follow-up with him. Showed him new Butrans 28 day trial/savings cards & also reviewed them with Christina. Also gave him OxyContin CCRx leaver & let him know of favorable access.
PPLPMDL0020000001	Cleveland	OH	44113	1/25/2012	dale,pa,said he's starting more patients on Butrans and is happy with the clinical results he's seeing with Butrans.i asked dale to explain what results he's seeing from Butrans? dale said patients are having improvements in overall general functioning,improvements in mood and pain reductions to a 2 and 3 on pain scale.i asked dale if he has more patients coming in this week,similar to the one's he's started recently,that he can start on Butrans? dale said yes.i showed visual aid,opioid experienced patients section,i asked dale if he had 5 new patients with commercial insurance coming in this week or next that he could start on Butrans? dale said probably so.i discussed Butrans trial offer program with dale and \$40 patient savings card program,dale said to leave 1 pack and he'll start 5 patients on Butrans.i focused dale on commercial insurance patients.recommended Senokot-S
PPLPMDL0020000001	Westlake	OH	44145	1/25/2012	Spoke with Tom, we reviewed Butrans key messages and medication guide for patients. i asked what questions patients usually have that prompt him to counsel them on their pain medication. He said they ask about how many they can take or if they can get a refill early. i asked what he does and he said he says that it is all up to their Dr as to what they get. i asked if he would let patients know about Butrans as an option and he agreed. i reviewed that Butrans can be used with supplemental analgesia. Reminder that OxyContin is an option with 7 tablet strengths.
PPLPMDL0020000001	Independence	OH	44131	1/26/2012	Passed back OxyContin formulary grid for Medicare D & pointed out favorable coverage. Dr Pal thanked me & then said he was able to get Butrans approved for the patient who he had told me about at our lunch. i asked if he has received feedback from her. He said she is doing well on it so far & he will keep me posted on how she does. He then walked back to a patient room. Spent time with MA Kathi reviewing Butrans core messages & appropriate patient type/range.
PPLPMDL0020000001	Hudson	OH	44236	1/26/2012	Dr Tosino said his one patient on Butrans loves it. He said unfortunately, once January hit, the patient's insurance started requiring a prior authorization to get Butrans. He said he had to put her on Morphine for awhile until it goes through, but at that point, he will be putting her back on Butrans since she was doing so well. Dr Tosino said he has a lot of patients taking short-acting around-the-clock opioids. i asked him what a typical dose is. He said most of them are on Vicodin either 1-2 or 4-6 times per day. Discussed focusing on patients who are taking between 3-4 Vicodin per day. i asked if he considers this a reasonable patient type to try Butrans on. He said yes. Discussed ability to take supplemental analgesia with Butrans. i asked if he would start prescribing Butrans for patients like those we discussed today & he agreed to do this. Discussed OxyContin as an option for appropriate patients beyond Butrans.
PPLPMDL0020000001	Cleveland	OH	44113	1/26/2012	i talked to dr about patients he treats with immediate release opioids for their chronic pain,asked dr at what point is OxyContin appropriate? dr said he will go to OxyContin when patients have tried all short-acting opioids and failed.i showed OxyContin visual aid,we discussed appropriate patients and i asked dr if he would be willing to start a couple new patients this week on OxyContin? dr said yes he will do that.dr said he writes more OxyContin for his hospice and nursing home patients.showed dr OxyContin formulary grid,focused dr on medicare patient starts.i asked dr when treating patients with low back pain,showed Butrans visual aid pg.11 noting pain conditions,how does he decide which immediate release opioid to treat patients with? dr said he starts with tramadol,then hydrocodone and oxycodone,dr said he doesn't really like to write narcotics but has to treat patients pain.i asked dr how Butrans could fit into his treatment plan? dr said he thinks it'll be great in nursing homes and hospice patients but isn't sure about his office patients.i showed dr initiation guide,we discussed opioid experienced patients and i asked dr if he's seeing patients in the listed dosage ranges? dr said yes every day.i asked dr if he would consider Butrans as an option when patients need a medication adjustment? dr said he'll talk to some patients and see if they are willing to try Butrans.dr asked about Butrans insurance coverage,showed formulary grid,focused on commercial insurance<font color=blue><b>CHUDAKOB's query on 02/02/2012</b></font>Why does he think Vicodin and Percocet are OK for his office patients, but Butrans isn't? Seems like there is something he is not understanding?<font color=green><b>BROOKAM's response on 02/06/2012</b></font><b></font>thats a good question, i need to probe deeper on this and that will ultimately be the question next time)</font color=blue><b>CHUDAKOB added notes on 02/08/2012</b></font>That appointment is dr said he hasn't started anyone on Butrans but likes the idea of a 7 day patch.i showed dr Butrans visual aid,we discussed 6 core selling messages and focused on 1 application,7 days of buprenorphine.i asked dr who are the appropriate Butrans patients in your mind? dr said patients taking low dose tramadol,vicodin or percocet.i showed dr initiation guide,we discussed initiation and titration and i asked dr if this seemed like an easy step by step process? dr said yes it was very straightforward.dr asked me to talk with his RN,Kim,and tell her about Butrans and appropriate patients.i talked to Kim,RN,about Butrans fpi,appropriate patients and initiation/titration of Butrans.both dr and Kim,RN,said they have patients in mind they just have to remember how to write the script for Butrans and remember to give the patient info booklets.i asked dr if he had a couple patients with BWC,Commercial or Tricare insurance coming in this week? dr said he probably does.i asked dr if he would feel comfortable starting a couple patients on Butrans? dr said he will do that.i discussed with dr,Butrans Free trial offer program and \$40 patient savings card program and asked if he could start 5 patients on Butrans? dr said he will do this best but thinks he does have 5 patients that would be willing to try Butrans.
PPLPMDL0020000001	Hudson	OH	44236	1/26/2012	i asked Dr Seiple why he thinks he hasn't used Butrans since his initial patient he put on it several months ago. He said that it is really a matter of forgetting it is there & being lazy about switching patients. He added that he really does want to use it. i asked what he likes about Butrans. He said he likes the once weekly dosing, transdermal delivery, & that he really likes buprenorphine as a molecule. i asked if he can think of specific patients who he would like to change over to Butrans. He said yes. i presented initiation/titration guide & he read pg 6. Discussed initiating treatment in these patients, titration, & supplemental analgesia. Dr Seiple said he is going to keep the initiation guide handy so he does not forget about Butrans because he really does want to use it. i told him it sounds like he is ready & prepared to prescribe. i asked if he would just simply try Butrans for a few appropriate patients & he committed to doing so. Discussed OxyContin q12h for appropriate patients beyond Butrans. He said he likes OxyContin for appropriate patients & finds it to be effective for those patients in more dr said she needed a refresher on Butrans as to who are the appropriate patients and how does she start patients on Butrans? i showed dr patient case study,Emma,asked dr if she treats patients like Emma? dr said yes she has a few patients taking tramadol and only a handful of patients taking vicodin and percocet.dr said she tries to send all of her chronic pain patients to dr shen and dr daoud(cleveland clinic pain management in the same hospital as dr flores) asked dr if she still see's patients,after pain management,dr said yes and she'll maintain the pain management specialists recommendation for patients.i asked dr at what point is she sending patients to pain management? dr said if patients are taking tramadol and that doesn't control pain she will try vicoprofen and if that doesn't control patients pain,she'll send them to pain management.i asked dr if she had 2 patients,like the case study Emma,that she could start on Butrans right after tramadol failed to control the pain? dr said she does have a couple patients in mind so she'll talk to them,show the patient info booklet to educate them and see if they want to start on Butrans.dr asked about medicaid patients,dr said thats majority in their practice.i talked to dr about PA for Butrans and medical patients and asked dr to focus on Commercial insurance patients and tricare,dr said ok she will do that.recommended Senokot-S
PPLPMDL0020000001	Brooklyn	OH	44144	1/26/2012	Spoke with pharmacist, Michele, who said they have not seen any Butrans activity. i reviewed appropriate patient type with her, focusing on patients taking chronic short-acting around-the-clock opioids like tramadol & Vicodin. i asked if this is a patient type she sees frequently. She said yes. i reminded her of patient information booklets & asked her to give them to patients who fit the description of the appropriate patient type for Butrans so that they are made aware of the option & can speak to their doctor about it. She agreed. i asked if she ever recommends medication changes to physicians. She said she doesn't. Discussed new Butrans 28 day trial/savings cards & OxyContin savings cards. i asked what type of insurance most of her OxyContin customers have. She said mostly BWC. Let her know about upcoming changes with BWC & prior authorization.
PPLPMDL0020000001	Cleveland	OH	44127	1/26/2012	dr said he's still reviewing the Butrans fpi and initiation guide i gave him last week.i asked dr what questions he has for me about Butrans? dr asked me to review appropriate patients again,i showed visual aid we discussed opioid naive and experienced patients,dr talked about his patients taking tylenol with codeine and said he thinks some of them could be appropriate for Butrans,we discussed initiation of Butrans and i asked dr if he see's any commercial insurance patients that could be appropriate for Butrans? dr said he has a couple but majority of patients are medical and medicare.i focused dr on commercial insurance patients and asked dr to start 2 patients between now and next week and i will follow up,dr said ok he will talk to some patients and see if they are interested in trying Butrans.recommended Senokot-S
PPLPMDL0020000001	Parma	OH	44129	1/26/2012	Reminded Dr Rossi of previous conversation when she said she would try Butrans for a patient who was not well-controlled on tramadol around-the-clock. She said she has not done this. i asked why- she said she doesn't know. i asked if she has patients who take Vicodin around-the-clock for whom she refills the prescription month after month. She said yes. i asked her why not try Butrans on some of those patients. i asked what the typical dose of Vicodin is that she would start a patient on. She said she would prescribe it q6h. i asked if she ever finds that she has to increase the patients' dose. She said yes. i told her those are potential Butrans patients. Discussed once weekly dosing & transdermal delivery. i asked her thoughts on transdermal systems. She said they work for some people. She said she is tired of new patients coming in seeking narcotics. i re-focused her on appropriate patients & asked if she has patients in her practice for whom she does feel comfortable prescribing these medications- She said yes. She added that she always has some imaging done to confirm that the patient has a condition causing the pain. She added that many of her patients are older & have spinal stenosis & she prescribes opioids for them. i asked if any of these patients are not on Medicare, perhaps a patient around 50 years old. She said yes. i asked if she would try Butrans on one of them if they ask for a change in their medication & she agreed. Discussed OxyContin managed care.

PPLPMDL0020000001	Cleveland	OH	44127	1/26/2012	i showed dr Butrans patient case study,Emma,discussed Butrans being an option for patients like Emma.dr said she has a lot of patients taking tramadol,their pain is never controlled and they always ask for more pills.i asked dr if she would start a couple patients like Emma,on Butrans,when she has to make a medication change? dr said yes she'll consider that but asked if medicaid covered Butrans? we discussed PA for medicaid patients and Butrans and i focused dr on commercial insurance patients.dr said she only has a few commercial insurance patients,we discussed patient savings program for those patients.i asked dr if she'll see 2 patients today or tomorrow that she could start on Butrans? dr said she might and will talk to patients about Butrans and see if they are willing to try Butrans.i showed dr patient info booklet and asked that she give this to patients and discuss with them,dr committed to do this.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	1/26/2012	i asked dr what he meant about the practice needing to get the patient numbers up and how that could impact Butrans? dr said when patients 1st see him for their chronic pain he will start them on short-acting opioids and consider Butrans as an option later in therapy.i asked dr if he has a step by step approach for treating chronic pain? dr said yes patients must exercise,do physical therapy,take their medications as prescribed.i asked dr at what point are you making medication changes,as it relates to opioids? dr said when patients are taking max amount of tramadol or vicodin,he'll consider a change.i asked dr if Butrans could be an option right there? dr said he could consider that as long as patients are willing to wear a patch and insurance covers Butrans.i talked to dr about commercial insurance patients trying Butrans,we discussed patient savings card program and i asked dr if he has a couple patients like this coming in this week that he can start on Butrans? dr said yes he probably does and he'll talk to them about Butrans.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44103	1/26/2012	i talked to Abdul,Pharmacist,and asked what are patients saying to him when he provides patient counseling on opioids? Abdul said usually patients just want their pills but sometimes they will ask him for other options and ideas to talk to their HCP's.i asked Abdul if he's given Butrans patient info booklets out to patients so they can talk to their HCP's about Butrans? Abdul said yes he's given a couple booklets out but no Rx yet for Butrans.we talked about insurance coverage-focused conversation on commercial insurance patients,explained free trial offer and \$40 savings card program.Abul said he'll continue giving booklets out.
PPLPMDL0020000001	Independence	OH	44131	1/26/2012	Spoke with floater pharmacist & reviewed Butrans core messages. Also showed her patient information booklets & discussed application/rotation. Asked her to leave a few patient information booklets on the shelf for the regular pharmacists. Also let her know about new Butrans trials/savings cards & discussed OxyContin savings cards. Reviewed eligibility requirements for cards.
PPLPMDL0020000001	Hudson	OH	44236	1/26/2012	Spoke with Angie, pharmacist, & reviewed Butrans patient information booklets. Suggested she give them to patients who she sees who get chronic refills of tramadol or Vicodin around-the-clock. She said this was a good idea & said she would keep a few on hand. Discussed new 28 day trial/savings cards & reviewed e-voucher for monthly savings. I asked about stocking of OxyContin. She said she thinks they stock most of the strengths. Discussed savings cards & gave her one package of cards.
PPLPMDL0020000001	Highland Heights	OH	44143	1/26/2012	Spoke to Kristien about the stocking of butrans. She has not seen any scripts. I asked her what kind of info she likes to hear from sales reps about products. She said she read a lot of the newsletters so she doesn't. I shared with her the positioning of butrans and the use of supplemental analgesic. Confirmed the ready health voucher program.
PPLPMDL0020000001	Cleveland	OH	44109	1/26/2012	dr said she started a patient on Butrans this week,i asked why she chose Butrans for this patient? dr said patient was taking 2 percocet every day,not controlled and asking her for something else so dr talked to her about Butrans,showed patient info booklet and started her.i showed visual aid,focused discussion on opioid experienced patients and i asked dr if she has more patients coming in this week and next,with commercial insurance,that she can start on Butrans? dr committed to this.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	1/26/2012	worked pm&r dept-saw dr huang - see call note
PPLPMDL0020000001	Highland Heights	OH	44143	1/26/2012	Spoke to Marianne, about the new savings cards and the free trial offer. I explained the importance of giving them to new patients to butrans and to those with commercial insurance so that they can stay on the medication and be able to afford it. She was aware of a new free trial.
PPLPMDL0020000001	Westlake	OH	44145	1/26/2012	Quick follow up at Lorain office. I gave him the savings cards that he requested I bring to this location. I asked if this will help him to start more new Butrans patients and he said it will. He said he has been using Butrans more and more and agreed to start some new patients this week.
PPLPMDL0020000001	Cleveland	OH	44113	1/26/2012	i showed dr pg.11,visual aid,we discussed pain conditions,dr focused on back pain and said she has a lot of patients with back pain taking tramadol every day but never controlled and always asking her for more pills.i asked dr how she handles that,whats the next step for her in her treatment algorithm? dr said she will start patients on vicodin,after tramadol doesnt control the pain,and if vicodin doesnt work she'll tell patients they have to see pain management.dr said she doesnt like dealing with chronic pain patients.i showed patient case study,emma,asked dr if he would consider Butrans as an option right after tramadol,instead of starting this patient on hydrocodone? dr said yes she would consider that.dr said the challenge is getting patients to be open to the idea of a patch for their pain and then it comes down to insurance coverage.dr asked about medicaid coverage,we discussed PA requirements for Butrans,i focused dr on BWC,commercial insurance and Tri-Care patients.i asked dr if she could start 2 patients on Butrans between today and next week when i see her? dr said she'll look to see who's coming in the office and will talk to patients.recommended Senokot-S
PPLPMDL0020000001	Shaker Heights	OH	44122	1/26/2012	Quick call- Handed Dr Agarwal new Butrans initiation/titration guide & delivered core messages to him. Positioned Butrans for patients taking tramadol or Vicodin around-the-clock who are not well-controlled. OxyContin favorable managed care status message.
PPLPMDL0020000001	Cleveland Hts	OH	44118	1/26/2012	Doc said he has been on vacation a lot and has not had much feedback. One patient he wrote for he is sure if the patient filled the script. He had an elderly woman who had to titrate up on her strength. He didn't say what strength. He said that she was a medicare. I explained that medicare patients will likely have a harder time getting butrans. I asked him to focus on commercial plans and be sure to give them a savings card. I explained the new free trial offer and how they must be commercial patients.
PPLPMDL0020000001	Cleveland	OH	44113	1/26/2012	dr said he's given a few booklets out to patients and is following up with them in next week,i asked dr what prompted him to discuss Butrans with patients? dr said patients had chronic pain and were taking vicodin every day but not controlled so he suggested Butrans be an option.dr said insurance is biggest issue,we discussed PA requirements for Medicaid patients and i focused dr on commercial insurance patients.recommended Senokot-S<font color=blue>b<b>CHUDAKOB's query on 02/02/2012</b></font>Amy, nice job on selling him on the idea of handing out the patient booklets. Perhaps a next call objection could be more aligned with what he has already done, such as, before you give the patients the booklets are you counseling them at all on Butrans? This might be the step you want to sell him on before he hands out a booklet.<font color=green>b<b>BROOKAM's response on 02/06/2012</b></font>yes thats a great question, i agree with you. I will see him Thursday or Friday this week and i have lunch with him on 2/16. thanks Barry!<font color=blue>b<b>CHUDAKOB added notes on 02/08/2012</b></font>OK. Let me know how that works!
PPLPMDL0020000001	Beachwood	OH	44122	1/27/2012	Spoke with pharmacist, Ashley, who said they have a few patients on Butrans. She said she has not talked to any of them about it so she doesn't know what their feedback is. Reviewed appropriate patient type, focusing on patients who take chronic short-acting opioids around-the-clock. Discussed giving patients the patient information booklets if she identifies them as someone who could benefit from Butrans so they can discuss it with their doctor. She said this was a good idea. Also reviewed ability to take supplemental analgesia while on Butrans. Presented new Butrans 28 day trials & savings cards. Reviewed eligibility requirements. Discussed OxyContin savings cards. I asked if most of the patients they have on OxyContin are Medicaid/Medicare. She said they also have some with insurance. I reminded her that the OxyContin savings cards can help with plans with high co-
PPLPMDL0020000001	Cleveland	OH	44109	1/27/2012	i talked to Nate,Pharmacist,briefly about Butrans he didnt have time to look up names of HCP's who are prescribing but said he's seen Rx for Butrans and they have it in stock.i showed Nate Butrans initiation guide,he took it as he liked the pull-out tool,i asked Nate who are the appropriate patients for Butrans? Nate said patients taking a couple immediate release opioids daily for chronic pain.Nate said he will continue handing out booklets when patients pick up their Butrans Rx.i asked Nate if he provides patient counseling to those patients taking opioids for chronic pain? Nate said they do provide patient counseling but its usually patients asking about side effects or dosage strengths.i asked Nate if he would be willing to hand these patients the Butrans patient info booklets so patients could talk to their HCP's? Nate said yes he will do that.we discussed OxyContin stocking,appropriate patients and Nate said they dont recommend OxyContin as that decision is up to HCP's.i gave formulary grids and focused Nate on medicare and commercial insurance patients.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	1/27/2012	i talked to 2 of doctors nurses:Toni,RN and Debbie,RN,about appropriate patients to start on Butrans.i showed initiation guide,they both said there are a lot of doctors patients taking short-acting opioids,with chronic pain,that are appropriate for Butrans.i asked Toni and Debbie if they could show the initiation guide to dr and focus on a couple patients today and next week with commercial insurance or BWC,and start them on Butrans? they both agreed to do this.i showed both Nurses the Butrans patient info booklet and asked them to show patients the application/rotation section,both nurses agreed to do this.focused nurses on commercial insurance patients to use free trial offer and \$40 savings card program and BWC patients
PPLPMDL0020000001	Shaker Heights	OH	44122	1/27/2012	Spoke with pharmacy manager, Nahla, who confirmed they still have 5mcg Butrans on their shelf. Discussed appropriate patient type & range & asked her to give patients who she identifies as potentially benefiting from Butrans the patient information booklets. Discussed new trial & savings cards as well as e-voucher for regular prescriptions. Discussed OxyContin savings cards & gave her one package. Reviewed eligibility requirements for using any of the savings programs.
PPLPMDL0020000001	Maple Heights	OH	44137	1/27/2012	Reviewed Butrans core messages with Dr Dale & spent time discussing appropriate patient type & range. I asked if he has patients who have pain from conditions such as spinal stenosis & spondylyolsthesis who take tramadol or Vicodin 2-4 times per day. He said yes. Positioned Butrans for that patient type. Discussed Butrans as a CIII opioid with abuse & addiction potential. He asked about adverse events- I showed him the rates. He said nothing surprised him with them. Discussed dosing & titration after 3 days to a maximum of 20mcg. Showed him how to use initiation guide to determine correct starting dose for a patient. He asked how long it takes for Butrans to start working. Showed him pK profile from core visual aid & told him we have no data to show onset of action. Discussed ability to take supplemental analgesia if necessary. Also reviewed managed care coverage & new trial/savings cards for Butrans. I asked if he would choose one or two patients who fit the description we talked about to switch to Butrans & he agreed. Discussed OxyContin q12h for appropriate patients beyond Butrans range. He said he thinks it is a good drug for the right type of people & that he uses it in severe pain patients.
PPLPMDL0020000001	Maple Heights	OH	44137	1/27/2012	Dr Gene said he has a patient on Butrans now & she is very happy with the results she is getting. I asked him to tell me about the patient. He said she has a rare, painful spinal condition that has caused her pain for a long time. I asked what medication she was using for pain prior to being put on Butrans. He said she had been on Vicodin. He added that he started her at the 5mcg dose & then titrated her to a 10mcg dose. Dr Gene said he definitely plans to get more patients on Butrans. I asked what he will look for in a potential Butrans patient. He said someone who is taking tramadol or Vicodin every day. I asked if he would ever use it for someone who was not currently on an opioid, such as a patient who was taking NSAID's or COX-2's & not getting adequate relief or if he would always go to a short-acting opioid such as tramadol or Vicodin first. He said he actually would go to Butrans before the short-acting opioids. Discussed how 5mcg would be the starting dose for that type of patient. Also reviewed managed care coverage with him & explained new 28 day trial/savings cards. Discussed OxyContin as an option for appropriate patients beyond Butrans. Reviewed 7 tablet strengths for flexibility in dosing.
PPLPMDL0020000001	Cleveland	OH	44103	1/27/2012	i talked to Eric,Pharmacist,about 6 Butrans core selling messages,Eric said no Rx for Butrans have come here but he thinks the patch is a good option for chronic pain patients.i asked Eric if he provides patient counseling to those patients taking opioids for their chronic pain? Eric said yes sometimes they do that.i asked Eric if he would be willing to give patient info booklets to patients so they can discuss Butrans with their HCP's? Eric said he will do that.we discussed formulary coverage,gave grid focused Eric on commercial insurance patients,we discussed OxyContin stocking and appropriate patients,showed visual aid,eric said they dont recommend OxyContin to patients or HCP's thats up to the doctor to choose that medication.i showed formulary grids,we discussed medicare and commercial insurance patients getting OxyContin.recommended Senokot-S
PPLPMDL0020000001	Independence	OH	44131	1/27/2012	Positioned Butrans as the first & only CIII long-acting opioid, dosed once weekly with transdermal delivery. Dr Jack said he always forgets that Butrans is CIII. Reminded him that Butrans still has abuse/addiction potential. He said he would always rather write a CIII than a CII. I told him if this was the case, he should be able to find a few appropriate patients for Butrans. He asked for something to put on his desk to help remind him. Gave him a new initiation guide. Also positioned OxyContin for appropriate patients beyond range for Butrans.
PPLPMDL0020000001	Cleveland	OH	44109	1/27/2012	worked internal medicine-left Butrans initiation guide,patient info booklet and business card for Dr.Lindheim,Dr.Jones,Dr.Gelehrter and Dr.Harrington. worked pm&r-left dinner invites for Residents and attendings for 3/8/12.
PPLPMDL0020000001	Cleveland	OH	44135	1/27/2012	worked rheumatology dept-left Butrans initiation guide,patient info booklet and business card for Dr.Ballou,Dr.Magrey and Dr.Singer
PPLPMDL0020000001	Cleveland	OH	44135	1/27/2012	Dr said he really likes Butrans and is starting new patients. We reviewed the patient savings cards and trial offer for Butrans and commercial patients. I asked if this will help him to start new patients. He said that it would.

PPLPMDL0020000001	Cleveland	OH	44113	1/27/2012	dr said he's started a few patients on Butrans in the last week,i asked dr why he chose Butrans? dr said these are chronic vicodin users and he doesnt want to keep giving them vicodin so he started them on Butrans.i showed dr initiation guide,we discussed initiation and titration of Butrans,i asked dr if he would consider Butrans an option right after tramadol fails for a patient like Emma(i showed dr patient case study)? dr said no he would send the patient to pain management.dr said he's really trying to send more patients to pain management this year,for their chronic pain pills,but does have a lot of patients taking vicodin every day for their chronic pain so thats where he see's Butrans playing a role in his practice.i discussed the Butrans free trial offer program with dr,dr said to leave 1 pack but he wont be starting anyone on Butrans for 3 weeks because he goes out of town next week&week after.i told dr i would follow-up in a few weeks to see if he started 5 BWC or commercial insurance patients on Butrans? dr said that was fine.recommended Senokot-5
PPLPMDL0020000001	Independence	OH	44131	1/27/2012	I gave Roman new Butrans trial/savings cards & explained eligibility requirements. He said some of the patients he has seen who have come in on Butrans have reported application site skin reactions. He said they all have discontinued treatment due to the reactions. He added that he does still want to use Butrans. He asked me to register him & Lisa for my March program. Roman asked what dose he would start a patient on. I showed initiation guide & told him it depends on the dose of opioid the patient is already on. He asked about a patient taking Percocet 30mg every day. I showed him on the table how to initiate. Discussed titration ability after 3 days. He asked about a patient who is taking 60mg total daily dose of oxycodone. Showed him how that is out of the range & discussed OxyContin possibly being an option for that type of patient. Roman asked if he starts a patient on 5 & he finds they need to be titrated to a 10mcg, can he just tell the patient to put on 2 of the 5mcg patches. I told him this has never been studied & is therefore not recommended. He said he wants to know these types of things from other doctors who have experience with Butrans so he knows how it is really being used. I told him I can only speak to what is in our full prescribing information & that is how Butrans should be used. Roman said he is glad i am not giving up & that he wants Butrans to be something he will use, he just needs to talk to other practitioners about it.
PPLPMDL0020000001	Westlake	OH	44145	1/27/2012	Dr was not in yet, spoke with Pam, we reviewed the new initiation titrate guide for Butrans and how to determine the starting doses for patients based on what they are already taking.
PPLPMDL0020000001	Independence	OH	44131	1/27/2012	Pointed out OxyContin 7 tablet strengths for flexibility in titration & positioned Butrans as once weekly transdermal system for moderate to severe chronic pain. Dr Rob just thanked me & walked into a room. Spoke with Amanda, MA, & reviewed managed care & savings cards for OxyContin including eligibility requirements. She said they did not need any additional cards.
PPLPMDL0020000001	Cleveland	OH	44109	1/27/2012	I talked to Ray,Pharmacy tech,about Butrans stocking and he said they dont have any Butrans in stock,no Rx for Butrans yet.we talked about 6 core selling messages and Ray said he likes idea of a patch for chronic pain patients but hasnt seen any Rx for Butrans.I asked Ray if they provide patient counseling to those patients taking opioids for chronic pain? Ray said the pharmacist does this sometimes.I asked Ray if he would give patients the Butrans patient info booklets to these patients and have them talk to their HCP's? Ray said he will tell pharmacist the info and they'll hand out booklets.confirmed OxyContin stocking and showed formulary grid and we discussed commercial insurance patients and medicare part d patients.recommended Senokot-5
PPLPMDL0020000001	Beachwood	OH	44122	1/27/2012	I asked Dr Tabbaa if he starts new patients on OxyContin or if he only continues patients on it. He said he does both. I asked what someone typically is on before he initiates OxyContin. He said it just depends. I asked if he takes patients from short-acting around-the-clock opioids like hydrocodone or oxycodone & switches them to a q12h dose of OxyContin. He said he sometimes does that or sometimes he will take a patient from 10mg OxyContin to a short-acting if he is trying to taper the patients opioid dose down. He added that he does a lot of opioid rotation. Discussed managed care & savings cards. He said it seems to be well covered. He asked if patients can still extract the oxycodone from OxyContin to use it as an immediate release. Gave him field card & read through bullets. Let him know he could call medical services for more information, which he said he would do. I asked what patients are usually on before he starts them on Butrans. He said usually nothing, or he will use it for patients who have been on higher doses of opioids who he is trying to taper down. I asked if patients experience withdrawal symptoms from that. He said no. He went on to say that he likes buprenorphine as a molecule a lot & would probably use a lot more Butrans if coverage was better. Discussed managed care, asking him to focus on commercially insured patients. Also discussed new savings program/trial offer. I asked him to continue prescribing OxyContin & Butrans & he agreed deb,PA said a female patient that she started on Butrans 10mcg called the office earlier this week and told dr nickels(he works with Deb,PA,and is owner of practice)the 10mcg was too strong so dr nickels reduced the dose to 5mcg,the patient calling this morning saying the 5mcg isnt working and she wants to go on the 10mcg again,deb said she'll be starting this patient on Butrans 10mcg again today and talking to her about the 3 days it takes to reach steady state and monitor her from there.i asked Deb if she has been starting more patients on Butrans? Deb said yes she is finding patients do very well on Butrans and she tells them their short-acting opioid like vicodin or tramadol is only for breakthrough pain.deb said its easy to take a few minutes and explain Butrans to patients and patients are receptive.i asked deb if she could find more patients today and next week to start on Butrans? deb said yes she will do that.i talked to deb about Butrans free trial offer program for commercial insurance patients and asked deb if she could find 10 NEW patients to start on Butrans using this free trial offer? deb said yes she can start 10 new patients and she wanted more Butrans patient info booklets.
PPLPMDL0020000001	Lakewood	OH	44107	1/30/2012	Quick call with Megan, we reviewed Butrans key messages and I asked what patient feedback she has seen with Butrans. He said she has not heard much. I asked what feedback she gets from other pain meds, she said they complain that they need their refills early. I asked if she would ever recommend 7 day Butrans as an option. She said she might. I reviewed Butrans and OxyContin savings programs.
PPLPMDL0020000001	Parma	OH	44129	1/30/2012	Quick call- Reminded Dr Moysaenko of previous discussion when we talked about at least offering Butrans to appropriate patients letting them decide if it may be an option they are interested in trying. Dr Moysaenko said he forgot. Showed him patient information booklets, asking him to give them to appropriate patients when he has that conversation with them. Also reminded him of OxyContin favorable managed care status for Medicare.
PPLPMDL0020000001	Cleveland	OH	44106	1/30/2012	dr said he's not started anyone on Butrans as majority of his chronic pain patients are controlled on their narcotics so no need to make any changes.i agreed with dr that if patients are controlled,theres no need to make changes however i asked dr if he ever see's patients like Emma,patient case study? dr said all the time.i asked dr if he would consider Butrans for this type of patient when a medication change is necessary? dr said he would consider it,jt hasnt thought of Butrans its not in his mind.i talked to dr about how he can get Butrans in his mind,dr said just keep reminding him of appropriate patients and how he should write the Rx for Butrans.i showed dr Butrans initiation guide and asked if he could find 2 patients this week,that are appropriate for Butrans? dr said he will do his best and see who comes into the office.dr asked about insurance coverage,focused dr on commercial insurance and BWC patients.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44109	1/30/2012	dr said he started another patient on Butrans last week.i asked dr why he chose Butrans for this patient? dr said patient was taking vicodin every day for low back pain,not controlled and wanted more pills,so he talked to the patient about Butrans,patient was willing to try Butrans,so he started this patient on Butrans,we discussed initiation/titration of Butrans and i showed dr Butrans initiation guide,i focused dr on BWC and commercial insurance patients.i asked dr if he will see 5 patients this week that are appropriate for Butrans? dr said he didnt know but will look to see who's coming into the office.i asked dr at what point is OxyContin an option for patients? dr said he rarely starts new patients on OxyContin,he's just maintaining,the patients he inherited when he joined the practice on OxyContin.i showed visual aid and we briefly discussed appropriate patients,dr said he appreciated the info but doesnt really like to start patients on OxyContin.i showed CCRX pull through sheet and talked about formulary coverage with dr,dr thanked me for info and said he'll talk to me next week.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44114	1/30/2012	I talked to Dave,Pharmacist,asked him who are the appropriate patients for Butrans and OxyContin,in his opinion? Dave said patients taking a couple immediate release opioids like tramadol,vicodin or percocet every day for their chronic pain and not controlled,they should start on Butrans.Dave said he believes these patients taking immediate release opioids every day will eventually end up on a long-acting opioid.Dave said patients who have tried all immediate release opioid options and still not controlled,could be appropriate for OxyContin.i showed visual aid for Butrans,opioid experienced patients and i asked Dave if he would give patient info booklets to anyone he feels is appropriate for Butrans,so that these patients can talk to their HCP's about Butrans? Dave said he's given a few booklets out and will do that,focused dave on commercial insurance and BWC patients for Butrans.i showed Dave OxyContin visual aid,we discussed appropriate patients for OxyContin and Dave said he doesnt recommend OxyContin to anyone,thats the HCP's decision.i told dave i respected his decision and asked if he would at least take a conversion guide in case he gets any questions from HCP's? dave said he would take the conversion guide as some HCP's do ask occasionally.i focused dave on commercial insurance and medicare patients for OxyContin formulary coverage.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44106	1/30/2012	i showed dr Butrans patient case study,Emma and asked dr if he see's patients like this? dr said all the time.i asked dr if he would consider Butrans as the next step in therapy when a medication adjustment is necessary? dr said yes he would consider Butrans.dr said he's started a few patients on Butrans,he's just so busy he forgets about Butrans and is in a habit of writing tramadol.i asked dr if it seemed easy to start patients like Emma on Butrans? dr said yes it does seem easy as Lisa,Patient care coordinator,gives them the booklets and explains more to them about Butrans,dr said he doesnt have time to do that.i asked dr if he'll see a couple patients like Emma,this week,that he can start on Butrans? dr said if he does he'll consider Butrans.dr asked about OxyContin formulary coverage for medicare patients? i showed dr OxyContin formulary grid,we discussed plans and i asked dr if he's still starting new patients on OxyContin? dr said yes he is,he likes OxyContin and thinks its a good medication for appropriate patients.dr said he had to go but appreciated the info.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44109	1/30/2012	I talked to Erin,Pharmacist,about 6 core selling messages of Butrans,Erin said she's not seen any Rx yet for Butrans but does get a lot of dr nickels and dr raheja's patients who get short-acting opioids every month.erin focused on opioid experienced patients,i showed visual aid and i asked Erin if she would give patient info booklets out to those patients taking opioids daily for their chronic pain but not controlled,so that patients can speak with their HCP's about Butrans? Erin said yes she will do that,she's given some booklets out to patients.we discussed free trial offer program and \$40 savings card program for commercial insurance patients.confirmed OxyContin stocking and we discussed appropriate patients for OxyContin,Erin said she doesnt recommend OxyContin and only a few HCP's prescribe OxyContin that she knows of.focused erin on medicare and commercial insurance coverage for OxyContin.recommended Senokot-5
PPLPMDL0020000001	Lakewood	OH	44107	1/30/2012	Quick call, I showed Dr the new Butrans savings program and trial offer. I asked if this would help him to start new patients and he said yes. He agreed to start 5 new patients.
PPLPMDL0020000001	Lakewood	OH	44107	1/30/2012	Dr asked me what the most common starting dose of Butrans is. I asked about the patients he is thinking of starting and he said those that are taking 3-4 5mg or 7.5 mg vicodin per day. He asked about managed care and he said that he has a hard time figuring out what the patients prescription coverage really is. We reviewed the commercial insurance for Butrans and that patients over 65 are going to Med D. I presented the savings cards for Butrans and the trial offer, he agreed to try 5 new patients on Butrans and he said he is going to write a script for a patient right now. We reviewed that OxyContin is an option for most appropriate Medicare patients. I've decided that Dr is Blue not Green.
PPLPMDL0020000001	Cleveland	OH	44106	1/30/2012	dr said he started a couple of dr hayeks patients (dr hayek is CHIEF of dept)so he's waiting to see how patients do on Butrans? i asked dr why he chose Butrans? dr said patients were taking tramadol daily,not controlled and asking for something else so he tried Butrans.i showed visual aid,we discussed opioid experienced patients and i asked dr if he had 5 more patients coming into the office this week,that are like the one's he started? dr said probably so but biggest challenge is that medicaid is biggest plan here.we talked about PA for medicaid patients and Butrans.i focused dr on commercial insurance patients and recommended Senokot-5
PPLPMDL0020000001	Parma	OH	44129	1/30/2012	Caught Dr Kushnar at the window- reminded her of our previous discussion when we talked about offering patient information booklets to patients when she refills their short-acting opioid prescriptions. She said she does still have the booklets & will try to remember to give them to patients. She thanked me for the reminder & walked back into a room. Also gave OTC samples. Spoke with MA Natalie & reviewed Butrans managed care coverage, focusing her on commercially insured patients.
PPLPMDL0020000001	Lakewood	OH	44107	1/30/2012	I asked Dr if he would give Butrans another try, and he said he would. I showed the Butrans initiation guide and asked if he would try patients on Butrans who are taking tramadol around the clock. He agreed. I reviewed the savings program and managed care for Butrans and OxyContin with Karen.
PPLPMDL0020000001	Lakewood	OH	44107	1/30/2012	Spoke with Jean, we reviewed the key messages for Butrans. I reviewed the use of Butrans with supplemental analgesia and that it can be called in and refilled. We discussed the managed care and savings program for Butrans and OxyContin.
PPLPMDL0020000001	Independence	OH	44131	1/30/2012	Quick window call- Passed back new Butrans trial/savings cards to Dr Trickett. Explained eligibility requirements & asked if she thought those were something she could use. She said yes & that any savings is good. Reminded her of commercial insurance coverage & OxyContin favorable Part D coverage.
PPLPMDL0020000001	Cleveland	OH	44106	1/30/2012	dr said he started 1 patient on Butrans and patients doing well.i asked dr why he chose Butrans? dr said he likes that Butrans is a patch and dosed once a week and some patients like the 1 he started take tramadol every day for their chronic pain yet still arent controlled.dr said he told patient about Butrans and the patient was willing to try it so it was easy.dr asked about initiation dosage strengths of Butrans,i showed initiation guide and asked dr if he has a couple more patients this week that he could start on Butrans? dr said he might and he'll keep Butrans in mind.i focused dr on commercial insurance patients and use of Butrans patient savings
PPLPMDL0020000001					

	Cleveland	OH	44106	1/30/2012	dr said she's not started anyone on Butrans and only has a couple patients taking narcotics for their chronic pain.i asked dr if she see's patients like Emma,we discussed this patient case study,in her practice? dr said she see's a lot of patients taking tramadol but its not her decision as to what the patients get for narcotics,dr said she has to talk to the attending HCP about her opioid choice and if the attending approves her choice,then she prescribes the narcotic.i asked dr how she feels Butrans can fit into her practice? dr said she doesnt know at this point,its a long-acting opioid and sounds like a great option but she needs to start a couple patients and get some clinical experience with the medication first.i asked dr if she will start a couple patients like Emma,this week,on Butrans,to gain that clinical experience? dr said she will consider it.dr asked about medicaid coverage as thats majority of patients.we discussed PA for medicaid patients and i focused dr on commercial insurance patients.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44195	1/30/2012	worked neurology-left initiation guide and BUP3015 with my business card for dr mays,dr bamford,dr krieger and dr stillman. worked oncology-left SAME info as above as well as OxyContin fpi and conversion/titration guide for DR.Davis,Dr.Parala,Dr.Dreicer,Dr.Rini,Dr.Lagman and Dr.LeGrand - cant see any of these Cleveland Clinic HCP's
PPLPMDL0020000001	Lakewood	OH	44107	1/30/2012	Dr asked me how he is supposed to titrate a patient in three days on Butrans as this is his concern. He asked about a patient using 2 patches at a time and what to do with the left over patches. I asked if his questions mean that he has a patient in mind to start on Butrans and he said yes. I reviewed the proper way to titrate a patient and that our FPI says to only use one patch at a time. He said that he may choose to go off label. I let him know that he can wait longer than 3 days to titrate as well but 3 days is the soonest. I reviewed the Butrans savings cards and trial offer. I asked him to tell me about his patient that he is thinking of starting. He said she is taking tramadol and we reviewed the invitation pull out tool and determined he should start her on the 5 mcg Butrans. I asked if he would start that patient and find 4 more new patients to start on Butrans with the trial offer. He laughed and said he will try. I asked if I reviewed the formulary grids for Butrans and OxyContin with Shelly. She said that she finds the grids helpful for when she gets call backs.
PPLPMDL0020000001	Lakewood	OH	44107	1/30/2012	I showed the trial offer and Butrans savings cards and asked if this would help her start some more new patients on Butrans. She agreed. I asked if she would start a few tramadol patients on Butrans and we reviewed the initiation pull out to determine which starting dose to use. She agreed to start a tramadol patient on Butrans instead of going to vicodin.
PPLPMDL0020000001	Cleveland	OH	44106	1/30/2012	dr said he started a few patients on Butrans,these were Dr.Hayeks patients(dr hayek is CHIEF OF DEPT)and patients are doing well on Butrans.i asked dr what prompted him to start patients on Butrans? dr said these patients have had injections and surgical procedures and still in chronic pain taking tramadol daily so he wanted to try Butrans and see what happens.we talked about initiation of Butrans,showed guide and i asked dr if he had more patients coming in this week that he could start on Butrans? dr said he didnt know but will keep Butrans in mind.dr asked about medicaid coverage as thats majority of patients here.i focused dr on commercial insurance patients and we discussed PA for medicaid patients and Butrans.recommended Senokot-S
PPLPMDL0020000001	Lakewood	OH	44107	1/31/2012	Spoke with Chuck, I asked what types of questions patients have that prompt him to counsel them about their pain meds. He said that have questions about side effects, how often they can take their tablets. I asked if he would let patients know about Butrans as an option and he said that he would. We reviewed that OxyContin may also be a long acting option and I showed the conversions from short acting.<font color=blue><b>CHUDAKOB's query on 02/08/2012</b></font>Did you discuss the side effects of our Butrans with the pharmacist. He said he gets questions on this. Providing him with answers for our product is a great way to add value to your call.<font color=green><b>HOLUBA's response on 02/13/2012</b></font>I agree, I don't remember why I didn't but I think this was a quick call so I just gave him the Butrans medication guides, asked him to let patients know about it, and showed him the updated OxyContin conversion guide.<font color=blue><b>CHUDAKOB added notes on 02/14/2012</b></font>Next time, if you abandon your agenda and follow his, you may end up with an even more productive call.
PPLPMDL0020000001	Parma	OH	44129	1/31/2012	I gave Dr Roehny new Butrans trial/savings information & discussed eligibility requirements. I asked if he thought this would help him find an appropriate patient for Butrans since the patient would likely not be out any money to simply try it. He said he would really try to find someone & he thought the new savings program was a good idea. Reviewed appropriate patient type & reminded me how he had told me last time that he does have patients who fit the description of an appropriate patient. Also reminded him of favorable OxyContin Medicare D coverage. I also gave him web-based resources catalog, reminding him of how he told me he was interested in education on pain management. He was very appreciative & said that that would really help him feel more confident when treating patients with painful conditions.
PPLPMDL0020000001	Westlake	OH	44145	1/31/2012	I asked when the last time was that he initiated a patient on OxyContin. He said that he's dismissing more patients than starting on OxyContin. He said that patients come in and have street drugs in their urine drug screens so he has dismissed several patients over the last week. I asked what types of patients does he see benefiting from a 7 day transdermal system. He said the patients that are open minded enough to try it. He said that patients tend to not want to try anything new. I asked if he would consider Butrans only when aptoins need a medication adjustment and he agreed. I reviewed the initiation pull out tool and he really liked it and said he will use it to find appropriate patients. I reviewed the patient savings program and trial for Butrans and he agreed to use the cards.<font color=blue><b>CHUDAKOB's query on 02/08/2012</b></font>Look at your next call objective. Looks like you got the answer to your first question on this past call? Am I reading this right?<font color=green><b>HOLUBA's response on 02/13/2012</b></font>Yes, I guess I need to find out why he has not started any new patients on OxyContin instead of going into a conversation about drug seekers how he is dismissing all of these patients.<font color=blue><b>CHUDAKOB added notes on 02/14/2012</b></font>Good idea. Sell the
PPLPMDL0020000001	Parma	OH	44129	1/31/2012	Spoke with Edwin, pharmacist, who said he does not stock Butrans. I asked if he knows why not. He said he has seen no activity for it, so he does not stock it, but he can get it for a customer next day. I asked if he had heard or read about Butrans at all. He said no. Delivered core messages & discussed CII/abuse/addiction potential. Also reviewed appropriate patient type, focusing on patients getting refill after refill of tramadol or Vicodin. Also discussed automatic savings through e-voucher & trial cards as well as OxyContin savings cards. Edwin said he has a few OxyContin strengths in stock, but he did not have time to check which ones.
PPLPMDL0020000001	Northfield	OH	44067	1/31/2012	Spoke with Sun-Li, pharmacist, & reviewed with her the appropriate Butrans patient type. Focused on patients taking around-the-clock short-acting opioids chronically. I asked her to give patient information booklets to patients who she identifies as potential Butrans candidates based on their patient type. She said she would. Discussed new trial/savings program for Butrans & OxyContin savings cards, reviewing eligibility requirements.
PPLPMDL0020000001	Cleveland	OH	44114	1/31/2012	Introductory conference call with Evercare, a division of United Health Care, located in Cleveland Ohio. This organization provides care focused on Long Term Care customers in Northern Ohio. The group is interested in Purdue's educational programs. Reviewed the Pain PACT program, and discussed possible applications/utilization of the pain management resources. Ms. Hanna was interested in reviewing the slide sets and requested that we present at her team meeting, scheduled for 3/14/12.
PPLPMDL0020000001	Cleveland	OH	44114	1/31/2012	dr said he started a few new patients last week with the free trial offer cards,dr said these were commercial insurance patients and it helped to convince these patients to try Butrans by giving the free trial offer.i asked dr what these patients were taking? dr said percoacet every day,not controlled,so he started them on Butrans.i asked dr if he'll see 5 patients this week that have commercial insurance that he can give free trial offer to and start them on Butrans? dr said he will do his best and is sure he'll start more patients on Butrans this week.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44114	1/31/2012	John,PA,said he started a few more patients on Butrans last week and he'll continue to do so.i asked John if he's seeing the clinical results he expected with Butrans? John said yes,he's happy with patients results but wishes medicaid would make it easier to start patients on Butrans.we discussed PA for medicaid patients,i focused John on BWC and commercial insurance patients and we discussed free trial offer program.i asked John if he had 5 patients coming in this week,with commercial insurance,that he can give the free trial offer card to? John said yes and we discussed that these have to be 5 new patient starts on Butrans,john said ok he'll do his best to get 5 started on Butrans.
PPLPMDL0020000001	Independence	OH	44131	1/31/2012	Quick call- Gave Dr Sundaram new Butrans trial/savings cards & explained eligibility requirements. He said he thought that it was a good idea to allow patients to try Butrans before buying it. I asked him to prescribe Butrans & give a card where appropriate for a patient who initiates a conversation with him about a medication change for their short-acting around-the-clock opioid medication. He said he would try to find someone. Also OxyContin favorable Medicare D message.
PPLPMDL0020000001	Cleveland	OH	44114	1/31/2012	Participated in a conference call with MBK, Mary Cook, Jan, Laura & Lisa to discuss educational opportunities with their CNPs in the LTC division of Evercare/UHC. Since the CNPs come from various backgrounds, their pain management experience varies across the board where it is not well managed. There are 17 CNPs who cover from Canton to Toledo where there are 2 CMs - Lisa and a vacant spot manage the CNPs. Laura is responsible for education and all report to Jan. Laura and Lisa would like to understand more about Pain PACT because Jan is the only person who saw it but they're like the slides to review. They have monthly meetings scheduled and they'd like MBK to present on Thurs, March 15. I will also provide the Med Ed catalogs for online CEs.
PPLPMDL0020000001	Parma	OH	44129	1/31/2012	Introduced Butrans to Myra, delivering core messages & alerting her to box warning. She said she had heard of Butrans but had not yet prescribed it as she wanted additional information. I showed her patient profile of "William" & asked if this is like what she sees in her practice. She took time to read the profile & made notes on it. She said this does sound like patients she sees daily. She then started reading the "Emma" profile. I asked if she also sees patients like that. Myra said yes. She said many of their patients are taking both tramadol & Vicodin. Gave her initiation guide & showed her appropriate range of patients for Butrans. Discussed dosing, initiation, & titration. Myra asked about insurance coverage. Showed her formulary grid & discussed BWC & commercial insurance patients. Also presented new trial/savings cards & discussed how the program works. Myra said she thinks Butrans sounds very interesting & like something many of her patients can benefit from. I gave her invitations for two upcoming dinner programs. She said she would love to attend & would register once she figured out what date was best for her. She asked if I could leave the Butrans information with her as she would like to review it & read the information at home. I asked if I could follow-up with her in 2 weeks to get her feedback & I asked Dr Zaldi if he still starts new patients on OxyContin or if he just continues patients. He said he starts new patients "all the time". I asked him what a patient is typically on before he initiates OxyContin. He said it depends, but usually Percocet since it is the same molecule. Discussed 7 tablet strengths for flexibility in dosing. He said most of his patients are on 20 or 40mg. I asked how he determines which long-acting opioid to put a patient on since there are several options. He said there is no single answer to that question. He said sometimes it is a tolerability issue, sometimes it is cost. Discussed OxyContin formulary grids & CCRx. Also gave him new savings cards & discussed eligibility for the program. Also discussed new Butrans trial/savings cards. He said he did not need those cards. He added that he just doesn't think he has any patients who he would put on it & said he wants to talk to other pain management specialists & physicians about their experience before using it himself. Gave him upcoming dinner invitations. He said maybe he would go to one of those.
PPLPMDL0020000001	Lakewood	OH	44107	1/31/2012	Quick call with Joe, I asked what questions do patients have that prompt him to consult a pain patient about their medication. He said that it is usually an issue of patients wanting a refill early or asking how many pills they can take each day. He said he usually warns them about taking too many tablets. I asked if he would let patients know about Butrans as another option and he agreed. I reviewed the savings cards and managed care for Butrans and OxyContin.
PPLPMDL0020000001	Cleveland	OH	44130	1/31/2012	Dr Diab said he gave a Butrans trial card to a patient & the patient's insurance wouldn't cover it. I asked if he remembered the plan. He said no & that he had to go see a patient, so he could not investigate now. He said we could talk about it another time. Tried to refocus him back on commercially insured patients. He just thanked me & walked into a room.
PPLPMDL0020000001	Cleveland	OH	44130	1/31/2012	Dr Fedorko asked if he could write Butrans for a 26 year old patient with menstrual migraines. I reviewed indication with him. He said the patient wants to be put on Vicodin but he does not want to do that due to abuse potential. Reminded him that Butrans is a CII opioid that does carry abuse/addiction potential. He said the patient is coming in Friday & he may give her Butrans, then he walked into a room. Spoke with MA Mindy, who told me that Medical Mutual recently rejected a Butrans prescription. I asked if it was commercial Medical Mutual or a Medicare B plan. She said it was commercial insurance. I asked what they wanted Dr Fedorko to prescribe instead. Mindy said she wouldn't cover anything at all. She asked if it could be a carve out. I told her this was likely the issue & asked her to keep me posted on Butrans managed care. Also discussed trial & savings cards with I talked to Hakeem,Pharmacist,owner about this being a new pharmacy.hakeem said he will order 3 strengths of Butrans and all 7 strengths of OxyContin.hakeem asked me who i worked with in the building? we discussed 5 doctors and i asked Hakeem if he would recommend Butrans to appropriate patients,when providing patient counseling on opioids? Hakeem said he will do that.i asked Hakeem to give patients the Butrans patient info booklets so that patients can talk to their doctors about Butrans.Hakeem agreed to do this.we discussed insurance coverage for Butrans and then discussed appropriate OxyContin patients.i showed conversion guide and Hakeem said this will be helpful as he gets questions about converting to OxyContin from short-acting opioids.we discussed commercial and medicare coverage for OxyContin.recommended Senokot-S
PPLPMDL0020000001	Waterford	OH	45786	2/1/2012	W - Miral said that she hasn't initiated therapy with Butrans recently but does have patients doing very well on it. She said that patients seem to do very well on Butrans and it is controlling pain to their liking. Will continue to prescribe and likes that she can put refills on the scripts and they can call it in to the pharmacy. I - Butrans follow up and review of patients that she has initiated with Butrans therapy? Use of patient profiler to discuss possible conditions where patients may be appropriate and that she may see in her clinical practice such as pain associated with low back pain and OA. Review of formulary coverage and savings card program.
PPLPMDL0020000001					

PPLPMDL0020000001	Cleveland	OH	44195	2/1/2012	dr said he's started a few more patients on Butrans,i showed dr BUP3015,we discussed opioid experienced patients and i asked dr if these pain conditions are what he trests(inclusion criteria)dr said yes he treats these conditions.i asked dr if he felt a 30% reduction in pain was clinically significant? dr said yes any reduction in pain is good but 30% is impressive.i told dr thats potentially what he can expect with Butrans.i asked dr if he had 5 new commercial insurance patients that he can start on Butrans this week? dr said this week or next week he'll surely see 5 commercial insurance patients.i asked dr if he would start them on Butrans? dr said yes he will.dr asked me to talk with his NP,Mei,and discuss appropriate patients,initiation of Butrans and insurance coverage for Butrans.i asked dr at what point is OxyContin appropriate? dr said when patients are maxed out on short-acting opioids,asking for more pills,he will consider a long-acting opioid like OxyContin.i showed dr OxyContin formulary grid,focused dr on commercial and medicare patient starts and asked dr if he will continue starting new patients on OxyContin this week? dr said he will do that and appreciated info but had to go.
PPLPMDL0020000001	Cleveland	OH	44128	2/1/2012	Spoke with Lisa, pharmacist, who said she still hasn't seen any activity for Butrans. Showed initiation guide pg 6 & discussed appropriate range of patients, focusing on those who are not well-controlled on their short-acting around-the-clock opioid regimen. Lisa said she sees a lot of that. I asked if she has given out any patient information booklets. She said she has not. Reminded her to give them to patients who she identifies as potential Butrans candidates. She said one particular patient comes to mind who is not well-controlled on her short-acting opioid. She said the patient sees Dr Eckstein. I asked her to give a booklet to that patient. She said she would do this. Discussed OxyContin savings cards & gave her one package. She said she has been running a lot more OARRS reports lately as CVS recently got access to do them on location. She said she finds it to be a useful tool for monitoring appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44130	2/1/2012	Spoke with pharmacist, Patty, & discussed Butrans appropriate patient type. Showed her initiation guide pg 6 to demonstrate range of patients who may be appropriate. Focused on patients who take chronic, short-acting opioids around-the-clock, especially if they call too soon for refills or complain that their medication is not controlling their pain adequately. Also discussed new trial/savings program & eligibility. Gave her one package of OxyContin savings cards. She said they dispense a lot of OxyContin.
PPLPMDL0020000001	Waterford	OH	45786	2/1/2012	W - Waters said his only complaint with Butrans would be formulary coverage. He likes the efficacy he is seeing with patients and they tend to like the 7 day therapy. Has had no issues or adverse events with Butrans and will continue to consider as an option for patients. I - Butrans follow up and review of patients that he has initiated with Butrans? Discussion of appropriate patient selection when the indication is met, uncontrolled on tramadol/hydrocodone and a change has been requested. Review of formulary coverage - BWC and commercial plans. Savings card program eligibility with the new addition of the one month trial offer for eligible new starts.
PPLPMDL0020000001	Cleveland	OH	44130	2/1/2012	Review of OxyContin formulary coverage with Med Part D plans/commercial coverage/BWC and the \$70 savings card program.
PPLPMDL0020000001	Cleveland	OH	44130	2/1/2012	Briefly met Dr Gundapaneni, introducing myself & Purdue's products. Introduced Butrans core messages & started to review appropriate patient type. Dr Gundapaneni said he could not stay. I gave him Butrans initiation/titration guide.
PPLPMDL0020000001	Middleburg Heights	OH	44130	2/1/2012	Introduced Butrans to Dr Mistry, delivering core messages & alerting him to box warning. Reviewed with him appropriate patient type & range, showing him initiation guide pg 6. I asked if he has patients who sound like this. He said yes, many. I asked if it is common to have to increase the patients' dose of short-acting opioids or switch them from one to another. He said it is very common & he does it every day. I asked him how he thought they would feel about a once weekly transdermal option to treat their pain. He said he thinks patients would like it. He added that patients often become frustrated with having to increase the amount of pills they have to take every day. Discussed Butrans delivery of buprenorphine over 7 days. Also discussed dosing, titration, & ability to take supplemental analgesia. Dr Mistry asked about insurance coverage. Discussed commercial insurance & new trial/savings program. He asked me to review this information with his nurse, Susan. (Spoke with Susan & explained cards, eligibility, application, rotation, & dosing.) I asked Dr Mistry to prescribe Butrans for the patients he sees this week who fit the description of the appropriate patient type & he agreed, saying he would let me know how they do upon follow-up. Also discussed OxyContin q12h 7 tablet strengths for flexibility in titration. He said he writes OxyContin frequently & finds it to be very effective. Discussed OxyContin as an option for patients on ATC Percocet.
PPLPMDL0020000001	Cleveland	OH	44104	2/1/2012	dr said he started 2 patients, 1 male and 1 female, on Butrans, the female said after a few weeks on Butrans she was so nauseous that she had to stop the medication, dr said the male patient said Butrans wasn't strong enough, dr said he thinks the male patient just wanted pills and nothing else.i asked dr if he's seen any patients this week taking opioids for chronic pain that have required a medication adjustment? dr said yes he has a lot of patients on Percocet that are always asking for more pills, dr said he wants to start prescribing more Butrans but is concerned with medicaid coverage, we talked about PA for medicaid patients and Butrans,i focused dr on his medco patients and we discussed free trial offer for commercial insurance patients, dr said he will start a couple more patients to get some experience with Butrans.i showed dr initiation guide, we discussed initiation of Butrans and titration and i showed dr patient info booklet focusing on application/rotation section, dr said he'll give those to patients when starting on Butrans.i asked dr at what point is OxyContin an option? dr said thats his last resort and he's trying to get people off OxyContin.i asked dr if there are any patients taking OxyContin that he feels comfortable prescribing for? dr said yes there are a few patients, we talked about OxyContin 7 dosage strengths and appropriate patients, showed visual aid and conversion guide, dr said he'll look the info over and keep it in mind, recommended Senokot-5
PPLPMDL0020000001	Parma	OH	44129	2/1/2012	Dr Gigliotti said he was on his way out of the office. He did stop to tell me that he recently went to a lecture about pain management. I asked if specific medications like Butrans and/or OxyContin were mentioned or if it was just about pain management in general. He reminded me again that he "wishes he didn't have a DEA number". I agreed that he should be cautious in prescribing but reminded him that there are legitimate, appropriate patients in pain who need physicians who are willing to provide pain management medications to them. He said he knows & that he is looking for Butrans patients & he is sure he will see
PPLPMDL0020000001	Middleburg Heights	OH	44130	2/1/2012	Introduced Butrans to Dr Munjapara, reviewing core messages & alerting him to box warning. Showed initiation guide & focused him on pg 6, reviewing appropriate patient type/range. I asked if this sounds like patients he treats regularly. He said it is very common. Positioned Butrans as an option for appropriate patients like this. I asked if it is common to have to increase a patient's dose of short-acting opioid. He said yes. He asked about insurance coverage. Discussed focusing on patients with commercial insurance & reviewed new Butrans trial/savings cards. Dr Munjapara said he would try Butrans for some patients & that he was looking forward to using it.
PPLPMDL0020000001	Cleveland	OH	44195	2/1/2012	Also discussed OxyContin q12h with 7 tablet strengths. He said he uses OxyContin.
PPLPMDL0020000001	Warrensville Heights	OH	44122	2/1/2012	Mei, NP, asked me to discuss appropriate patients, initiation and insurance coverage for Butrans with her as she isn't comfortable with Butrans yet, we discussed 6 core selling messages, Mei focused initially on opioid experienced patients saying majority of their practice is already in the 15-40mg range for immediate release opioids, i asked Mei if it made sense to start these patients on a long-acting opioid when a medication adjustment is necessary? Mei said absolutely these patients should be started on a long-acting opioid sooner than later.i asked Mei if she will see 5 new commercial insurance patients, appropriate for Butrans, that she can give the free trial card to and start on Butrans? Mei said she will use the cards and yes they have a lot of commercial insurance patients here.i showed Mei Butrans patient info booklet, Mei talked about application sites for Butrans and Mei said she thinks Butrans is a great option and loves that its a CII because that makes it easier for her to call in and write for refills. Mei said she has 1 patient in mind that has chronic pain but hasn't tried any opioid, Mei asked if Butrans would be appropriate for an opioid naive patient? I told Mei yes that is an appropriate patient, i showed visual aid opioid naive section and initiation guide and Mei said ok she felt comfortable starting this patient on Butrans Smcg and will let me know what happens. focused Mei on commercial insurance patients.
PPLPMDL0020000001	Mayfield Heights	OH	44124	2/1/2012	Caught Dr Zivic between patients. Gave him OxyContin formulary grid, letting him know it is covered on 91% of lives nationally, 75% at Tier 2. He said that was good to know. I asked him to write OxyContin for appropriate patients who could benefit from a q12h dose of oxycodone. Also gave him Butrans program invitation for 2/29 Cleveland program. He said he was interested in hearing Dr Laham speak & would try to come to the program. He added that he is still keeping Butrans in mind, then walked into a room.
PPLPMDL0020000001	Westlake	OH	44145	2/1/2012	Window call...explained that Denise called for savings cards. I explained the new expiration date and the free trial with the new cards. She liked the free trial. Nothing learned.
PPLPMDL0020000001	Cleveland	OH	44104	2/1/2012	I asked Dr his thoughts on Butrans and what his objections are to giving it a try. He said that 99% of his patients have Medicaid, Caresource or Med D. He said that he has a hard time talking his patients into trying something different when all they want is vicodin. I asked if he has just 5 patients in his practice who have commercial insurance where he could let them try the Butrans trial instead of increasing their dose of vicodin. He said he will try to find them. I asked Danielle how many commercial insurance patients he has and she said about 20% and mostly medical mutual and blue cross.
PPLPMDL0020000001	Cleveland	OH	44104	2/1/2012	dr said she is thinking of Butrans for any patients that have chronic pain but majority of her patients taking opioids have acute pain, dr said when patients have chronic pain she sends them to pain management.i asked dr to think of 2 commercial insurance patients, that can use the free trial offer and meet Butrans indication, to start on Butrans over the next 2 weeks, dr said she will do her best and if patients are willing to wear a patch and insurance covers Butrans she'll consider it.i focused dr on commercial insurance patients, showed patient info booklet and we discussed application/rotation of Butrans, i asked dr to give patient info booklets to patients as this will help educate them on Butrans, dr said she will do that, recommended Senokot-5
PPLPMDL0020000001	Mogadore	OH	44260	2/1/2012	Spoke with Lisa and she said Dr CAin could not talk but she is his nurse and will relay everything. I explained new trial cards and she said these are awesome and she asked about the old ones because they were expired and I said they are good til March of 2013. She said what if her patients threw the card away and I said pharmacy should have the info. but these cards are only good for new patients and she said ok. She said their patients are doing well on Butrans and I reviewed what type of patient to look for
PPLPMDL0020000001	Cleveland	OH	44113	2/1/2012	dr said she started another patient on Butrans last week, commercial insurance and gave patient the free trial offer card and explained program to the patient. I asked dr why she chose Butrans? dr said patient was taking vicodin every day for chronic pain, still in a lot of pain and asking for other options, so dr talked to patient about Butrans and started the patient. I asked dr if she can start 4 new commercial insurance patients on Butrans this week, giving free trial offer cards to them? dr said she doesn't have a lot of commercial insurance patients, majority are medicaid, but she'll use the 4 cards she has left in the next few weeks. dr said she's pleased with Butrans clinical results and patients are doing great on Butrans.
PPLPMDL0020000001	Cleveland	OH	44195	2/1/2012	worked apm dept-see call notes on mei ngo, NP, dr cheng and kathy kraus, PA; worked neurology-left Butrans initiation guide, patient info booklet and 3/8/12 dinner program invitation for dr bamford, dr mays, dr kriegler and dr stillman - all are NO see appt only
PPLPMDL0020000001	Cleveland	OH	44195	2/1/2012	kathy, pa, said dr berenger and dr stanton-hicks both started patients on Butrans and patients are happy and pain is controlled. I asked Kathy what these patients were taking prior to Butrans? kathy said she thinks 1 patient was taking percocet and the other patient vicodin every day for chronic pain but never controlled and now that the patients started on Butrans they are finally controlled. I told Kathy that was great news. I asked Kathy if she will see more patients like this that are appropriate for Butrans, this week? Kathy said they see these patients every day so she'll keep recommending Butrans to the attending HCP's and see what she can do to get more patients started on Butrans. we discussed free trial offer program and focused Kathy on commercial insurance patients. Kathy asked for OxyContin savings cards and said a couple HCP's like dr vrooman and dr stanton-hicks still start a lot of patients on OxyContin. i showed Kathy OxyContin conversion guide and she was surprised to see they hydrocodone. 9 conversion, i asked Kathy if she will focus on medicare and commercial patients to start on OxyContin? Kathy said she will do that, recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44113	2/1/2012	dr said he thinks Butrans is another option for patients and will continue talking to patients about Butrans. dr said not every patient wants to try a patch thats 1 challenge and they have a lot of medicaid here so not every medicaid PA is getting approved. i talked to dr about his patients taking vicodin every day that come and see him saying they need a change and dr has to make a medication adjustment. I told dr thats where Butrans can be an option, dr said ok he'll think about that and will continue starting patients on Butrans. I focused dr on commercial insurance and BWC patients and we discussed PA for medicaid patients.
PPLPMDL0020000001	Cleveland	OH	44113	2/1/2012	deb, pa, said she's given a few Butrans trial offer program cards to patients with commercial insurance and patients like this offer. we talked about application/rotation section in booklet, deb said she goes through this info with patients and gives every patient a booklet. I asked deb if she can start 5 new commercial insurance patients on Butrans this week, giving them the free trial offer? deb said she'll see who comes in but will use the cards. I focused deb on commercial insurance and BWC patients.
PPLPMDL0020000001	Cleveland	OH	44113	2/1/2012	dr said he's not thought much about Butrans as majority of his patients have acute pain. dr said if he has anyone with chronic pain he prefers to send them to pain management. I asked dr if he will manage these patients opioids after pain management? dr said yes he would do that but he wouldn't make any medication changes, that would be pain management HCP decision. I asked dr if he could think of 2 patients taking hydrocodone, daily, that meet Butrans indication? dr said he probably has a few like this. I asked dr to consider Butrans as an option when these patients need a medication change perhaps before he sends them to pain management? dr said he hadn't thought of that and would consider that. I gave initiation guide, we discussed initiation/titration of Butrans and i asked dr to start 2 new commercial insurance patients using free trial offer program or 2 new BWC patients on Butrans, this week. dr said he will see who comes into office and will consider Butrans.
PPLPMDL0020000001					



	Bedford	OH	44146	2/1/2012	Dr Moufawad said he has been starting more patients on Butrans as he re-works how he is practicing. He went on to say that some patients "are in love with their pills" & those patients are unwilling to switch to Butrans, so he usually discharges those patients. I asked him what he is looking for as he looks for Butrans patients. He said someone like a patient who is taking 4-5 Vicodin per day he would switch to Butrans. He added that he would allow the patient a reduced supply of Vicodin for breakthrough pain & then will titrate the Butrans if necessary. I showed him "William" patient profile & told him it sounds like he is doing the right thing. Dr Moufawad said he plans to use a lot of Butrans as time goes on & that once he "gets going" with a medication, he uses a lot, but added that he is starting slowly as that is the approach he likes to take. Reminded him of new savings cards for Butrans & OxyContin. Also spoke with MA Christina & inquired about Butrans prior authorizations. She said she has not encountered any yet & will call me if she ever has any issue.
PPLPMDL0020000001	Parma	OH	44129	2/1/2012	Quick window call- I passed back a new Butrans initiation/titration guide to Dr Taylor & showed her how to use the new slide-out tool. She said she has just not had any new patients for it lately. Also passed back OxyContin CCRx leaver, letting her know that patients with that plan can get OxyContin at the lowest branded co-pay.
	Euclid	OH	44119	2/1/2012	Spoke to Audrey Stein about the stocking and movement of butrans and oxycontin. She confirmed stocking of both but she is a fill in pharmacist so she was not sure about butrans. I explained the key selling messages and the positioning and asked her if she would ever make any recommendations to customers that may be taking short acting tablets around the clock. She said that they are always so busy that there just inst time but they would like to do more. Provided her with butrans guide.
PPLPMDL0020000001	Euclid	OH	44119	2/1/2012	Doc said he would likely start butrans for an opioid naive patient. I reminded him that 5mcg is the starting dose. He remembered that they can go to 10mcg. I asked him what's holding him up. He said he forgets. I asked him to prescribe butrans for patients taking 200mg of tramadol and asking for a dosing adjustment. I reviewed the commercial coverage and the savings cards.
PPLPMDL0020000001	Westlake	OH	44145	2/1/2012	Spoke with Mollie, she said that they will have another health fair this year on Sept 27th. She will email me the details so that I can be a part of it. She Wanted to know if we have any speakers and I told her about our LELE programs. She told me that Sharon Barron is in charge of product information and that I can talk to her about doing an in-service.
PPLPMDL0020000001	Euclid	OH	44119	2/1/2012	Spoke to Dave and Tonika about the stocking and movement of butrans and oxycontin. She said still no butrans scripts but they do still have it. Oxycontin has been steady with no new prescribers or new patients, basically just regular customers. I offered the oxycontin conversion guide. Dave said they usually dont have to worry about that but its nice to have it. Provided butrans guide.
	Westlake	OH	44145	2/1/2012	Spoke with Marlene, she does think it would be beneficial to have an in-service with her nursing staff in order to make them aware of Butrans and answer any questions about pain management and OxyContin. We reviewed the key messages. I gave her a continuing education catalog and showed her the palliative care CE for nurses. She said that she will probably have them complete this course. She explained that left side is more stroke, heart focused what right side is more surgical, and going to be becoming palliative care.
PPLPMDL0020000001	North Olmsted	OH	44070	2/2/2012	Spoke with Rita, we reviewed the key messages for Butrans. I reviewed that Butrans is a CII and can be called in and refilled and the use of supplemental analgesia with Butrans. I asked what questions patients usually have regarding their pain medication and she said they are usually needing a stool softener. I reminded her that Colace and Senokot S are options that are available. I reviewed Butrans medication guide and I asked if she would ever recommend Butrans or OxyContin for a patient taking short acting around the clock. She said that she might if she has a good relationship with the patient.
PPLPMDL0020000001	Highland Heights	OH	44143	2/2/2012	Doc asked what's new with butrans. I explained that the savings cards now offers a free one month trial for new patients. Specified that the patients should be new to butrans and have a commercial insurance plan. He and Marianne asked if the free trial can be for 2 weeks. I explained that most pharmacies might resist dispensing 2 patches. He wanted to monitor this particular patient closely by just giving her 2 weeks worth. He said he has prescribed butrans (20mcg) for a medicare patient who was able to get it but she is also in a nursing home. The patient is loving it. He said most patients are resistant to patches because they think they wont work or wont stick I asked him if he can prescribe butrans for more appropriate patients. He said we have to get it on medicare/medicaid as that's 40% of his patients. He asked about BWC. I confirmed that it is covered there. He did not remember if he has prescribed for BWC but assumed he had. I asked doc when was the last time he started a new patient on oxycontin. He said he doesn't (prescribe for new patients), only those that are on it already.
PPLPMDL0020000001	Parma	OH	44134	2/2/2012	Spoke with pharmacist, Dave, who said he has all 3 strengths of Butrans on his shelf & dispenses quite a bit of it. Reviewed Butrans appropriate patient type & range as well as dosing/titration. Focused on patients taking tramadol or Vicodin around-the-clock every month. Also discussed new trial/savings program & OxyContin savings cards. He said he hates dispensing OxyContin & Opana & said there is a large abuse problem in that area & he is frustrated because "no one" seems to be doing anything to help stop the abuse. I agreed that OxyContin, like all opioids, does carry abuse & addiction potential & let him know that we ask physicians to be cautious in who they prescribe for. Also reminded him that there are patients in true pain who need these medications.
PPLPMDL0020000001	Cleveland	OH	44103	2/2/2012	I asked dr how often she see's appropriate Butrans patients? dr said all the time every day but it comes down to insurance coverage.dr said majority of her patients are medicaid and medicare and they are the patients that have chronic pain,dr said its rare that her commercial insurance patients have chronic pain.dr said she's still getting a few PA's for medicaid approved but thats why she's not starting a lot more patients on Butrans.we talked about dr focusing on commercial insurance patients and I told dr I appreciated her starting patients on Butrans and gaining some clinical experienced with Butrans.I asked dr if she will see 2 patients over the course of the next week that she feels Butrans could be an option for? dr said she probably will and will discuss Butrans with patients,dr said she'll continue starting patients on Butrans as long as insurance covers it.dr asked for more OxyContin savings cards and said she's continually starting new patients on OxyContin.dr had to go so I said I would follow up in a week and discuss with her appropriate OxyContin patients,dr said ok.I recommended Senokot-S
PPLPMDL0020000001	University Hts	OH	44118	2/2/2012	Quick call...I showed doc the patient profile of Emma and asked if he has any similar patients- younger than medicare age- that he thinks would be appropriate for a once weekly transdermal. He said he would think about it. I gave him invites to the upcoming programs and formulary grids for butrans and oxycontin.
PPLPMDL0020000001	Cleveland	OH	44118	2/2/2012	I reviewed the key features of butrans and asked doc if he has any patients that might benefit from a once weekly transdermal analgesic. He said he does not get into pain mgmt. I told him that is a CII similar to vicodin. I asked him to consider attending one of the upcoming programs to learn more about the product. He said he would see what works for him.
PPLPMDL0020000001	Parma	OH	44129	2/2/2012	Quick call- Caught Dr Chagin at the window. Passed back Butrans dinner program invitation & asked if he thought he could attend. He said he would really like to & he would check his calendar & let me know. I let him know I would follow-up. Also told him about new Butrans trial/savings program & gave him a package of cards. He asked me to review program details with Debbie. Discussed details of the program with Debbie. She said she was actually running low on Butrans savings cards so she was glad I brought some. She said they did not need any additional OxyContin savings cards at this time.
PPLPMDL0020000001	Woodmere	OH	44122	2/2/2012	Spoke with technician, Trisha, & reviewed Butrans patient information booklets & new Butrans & OxyContin savings programs. I asked to leave OxyContin cards. Trisha asked pharmacist, Sandy, if they could take the cards. Sandy declined, saying they could not accept them. I asked Trisha if that was a new policy but she did not know. Gave her Butrans patient information booklets & asked her to give them to the pharmacist.
PPLPMDL0020000001	Cleveland	OH	44109	2/2/2012	dr said she's talking to more patients about Butrans,giving the booklets to them when they are hesitant to try Butrans and she has a few patients on Butrans that are doing well. I asked dr who is the appropriate Butrans patient in her mind? dr said patients taking a couple short-acting opioids every day for their chronic pain but thats not controlling the pain and patients are asking for more pills,dr said thats where she's stopping and considering Butrans.I showed visual aid,opioid experienced section and asked dr if she has a couple commercial insurance patients coming in this week that would be appropriate for Butrans? dr said she has a lot of medicaid, BWC and small % of commercial insurance patients.I talked to dr about free trial program for new commercial insurance patient starts and I asked dr to start a couple of these patients this week and next week,dr said she will do that.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	2/2/2012	worked oncology dept-out-patient RN mgr-Diane Wolfe said NO reps are allowed to give in-services/training to the nursing staff on anything.I talked to Diane about pain management education,Diane said NON-BRANDED info is only acceptable info here.Diane took Med Ed catalogs and told me to drop more off and any NON-BRANDED patient education for her in the future. worked PM&R-see call note dr huang: worked rheumatology-left Butrans initiation guide and BUP3015 for Dr.Ballou and Dr.Singer(Dept Chairman) with my business card as you cant see HCP's
PPLPMDL0020000001	Parma	OH	44129	2/2/2012	Quick call- Passed back Butrans dinner invitation for Cleveland 2/16 program & asked Dr Paat if he would be able to attend. He said he does not know. I let him know it would be a good opportunity to discuss Butrans with other area physicians & experts with various experience levels. He said he would try. Gave him new Butrans initiation guide & OxyContin formulary grid for Medicare D. Spoke with MA Shari & reviewed managed care coverage for both products.
PPLPMDL0020000001	Cleveland	OH	44113	2/2/2012	dr said he's not started anyone on Butrans but has given a few patient info booklets out.I asked dr to tell me about those patients and why he wanted to give the booklets to them? dr said he saw a couple patients that have chronic pain and are taking vicodin every day for their pain but they are never controlled and are always asking for more pills.dr said he'll see patients in 2 weeks and will see if they are interested in trying Butrans.I asked dr if he felt a 1 month free trial offer of Butrans would help him with patients like this? dr said yes it would but he has a lot of medicaid patients that have chronic pain not so much commercial insurance patients.I asked dr if he could think of a couple commercial insurance patients that he can start on Butrans between now and next week when I see him again? dr said he will see who comes into the office and talk to patients.recommended Senokot-
PPLPMDL0020000001	Cleveland	OH	44106	2/2/2012	worked family medicine,pain management dept and rheumatology
PPLPMDL0020000001	Cleveland	OH	44130	2/2/2012	I met with Melene Petropoulos and Tom Roth to discuss Intermezzo. Reviewed FPI, slide deck, promotional terms, and packaging. They liked the sublingual tablets, as needed dosing, bar codes, packaging, driving study, and promotional terms. She will do an auto-ship through McKesson to her 43 stores of 2 1.75mg and 1- 3.5 mg cartons to each store.
PPLPMDL0020000001	Parma	OH	44134	2/2/2012	Dr Mandat said he just put a patient on Butrans. I asked him who he told me to tell more about the patient. He said she is an 80 year-old woman who has lumbar stenosis who was taking Vicodin every day. He said she was not being well-controlled & she had a history of GI bleed, so he did not want to put her on NSAID's. He said he thought she was a good candidate for Butrans. I agreed that she sounded like a good patient clinically, but asked him if older patients' managed care plans give him any push-back. He said he did just get a denial from Wellcare that required a failure of either methadone or morphine ER before they would allow Butrans. He went on to say that he finds this to be clinically wrong & he would not want his patient on either of those for various reasons. I asked if he ever considers writing letters to the managed care plans in support of Butrans. He said if they deny Butrans for his patients, he would be willing to write a letter. I asked about patients in his office, perhaps 50-60 years old with spinal stenosis, low back pain, or osteoarthritis. I asked what his treatment algorithm is. He said first NSAID's/COX-2's, then tramadol. I asked what dose. He said 3-4 times per day. He paused & said he could be writing Butrans for those patients. I showed "Emma" patient profile to support his statement. Discussed managed care & new trial/savings program. Also discussed OxyContin as an option for patients beyond Butrans.
PPLPMDL0020000001	Cleveland Hts	OH	44118	2/2/2012	Showed doc the profiles of Emma and William and asked which patient type he sees more of. He said William. I explained that 10mcg would likely be the starting dose for patients like William already on several tabs of hydrocodone. He said he has been writing it and will write it as long as patients can get it. He said he has not had any access problems recently so no news, is good news. Gave him options to attend a speaker program. He said he would check his schedule. Reminded him of the preferred coverage with oxycontin for medicare plans AARP and CCRX.
PPLPMDL0020000001	Cleveland	OH	44113	2/2/2012	dr said he likes concept of 1 patch,once weekly dosing of Butrans but he's not had anyone be interested in trying Butrans.I asked dr how he's explaining Butrans to patients? dr said he tells them its a once weekly pain patch and they have to rotate sites once a week.I asked dr if he's given patient info booklets to patients to assist in educating them? dr said a few patients but others he's just told them about Butrans.I showed dr Butrans visual aid,we discussed opioid experienced patients,dr asked how to initiate Butrans.I showed dr Butrans intiation guide,we discussed initiation/titration of Butrans and I asked dr if he had 2 commercial insurance patients coming in this week that perhaps could be appropriate for Butrans? dr said he probably does and will consider Butrans for them.dr asked about medicaid coverage as thats a large plan here,we discussed PA for medicaid patients and Butrans,I focused dr on commercial insurance patients.
PPLPMDL0020000001	Parma	OH	44134	2/2/2012	Dr Hernandez said that he has been starting patients who were on Suboxone for pain on a 20mcg Butrans & then titrates them to 2 of the 20mcg patches. I reminded him that 20mcg is not one of the recommended starting doses & that 20mcg/hr is the maximum dose recommended. He said he knows, but he is comfortable with buprenorphine enough to do this. He said he has not had any managed care push-back at this point. I asked Dr Hernandez when a patient comes in & has pain, what his treatment algorithm is. He said he always starts them on an anti-inflammatory medication & will also give them either Butrans or Vicodin 5mg. I asked him what makes someone a Butrans candidate & what makes someone a Vicodin patient. He said it all depends on their insurance/cost. He said if they pay for their medicine completely out-of-pocket, he puts them on Vicodin & if not, he prescribes Butrans. He also said he gave a patient who had "Anthem" one of the new Butrans trial/savings cards & after going through the questions on the phone system for activation, he was denied for the program. I asked if it was someone new to the brand & with commercial insurance. He said yes. Uncovered that the patient was 67 years old, so I asked if it was possible that the patient had Anthem Senior Advantage. Dr Hernandez said this is possible. He said he was going to give up on giving out the new savings cards. I asked him not to do this as I suspected the patient had a Medicare Anthem plan. He agreed to keep trying.
PPLPMDL0020000001					

PPLPMDL0020000001	Akron	OH	44308	2/2/2012	Carla stated Buckeye submitted a RFP for bid for Ohio Medicaid lives. This was due in January and they will know which plans receive the bids by April. They changes will go into affect Jan. 1, 2013. The state is consolidating the 9 regions into 3 regions. There will be 3 statewide plans with 1 Regional plan per region. Buckeye, Care Source and one other already have this presence. Carla is interested in scheduling the ASAP modules for two programs due to the increased number of cases where there are issues due to drugs and alcohol abuse. They are seeing this in their ABD and CFC division. She'd also like to start the first program the last week Feb where they're available any day during the week.
PPLPMDL0020000001	Cleveland Hts	OH	44118	2/2/2012	I discussed the butrans key selling messages and the positioning. I asked doc how often he has patients taking tramadol or vicodin ATC and come in asking for a dose adjustment. He said a lot. I explained that butrans is an option instead of increasing their current therapy. He asked how butrans differs from fentanyl. I told him that butrans is a CIII which can be called in and refilled and can be used as a first line opioid. I reviewed the coverage and the savings card program. He said he would look at the literature but it sounds interesting. I gave him invites to the speaker programs. He suggested I talk to Dr. ganz about attending. He expressed interest in the
PPLPMDL0020000001	Beachwood	OH	44122	2/2/2012	Spoke with nurse, Vickie, & presented new Butrans trial/savings cards & OxyContin savings cards. Explained eligibility requirements. Vickie said she did not realize that Butrans is not a CII medication. I told her she is correct & that Butrans is a CIII opioid, meaning patients can have refills & the prescription can be called in. Reminded her that because Butrans is an opioid, it does still carry abuse/addiction potential. She said she does not think Dr Yokiell realized that Butrans is CIII. She added that she was just talking to him about Butrans a few days ago & she thinks now that he realizes Butrans is CIII, he may start to use it. She said she would keep me posted.
PPLPMDL0020000001	Northfield	OH	44067	2/3/2012	Spoke with JoAnn, floater pharmacist, & Carolyn, tech. Reviewed Butrans core messages & discussed appropriate patient type & range. Carolyn said she thinks they have a patient on it but was not completely certain. Also discussed OxyContin & new savings cards. Carolyn said they have a few patients who get OxyContin but not very many. Discussed importance of appropriate patient selection.
PPLPMDL0020000001	Cleveland	OH	44130	2/3/2012	Discussed new trial/savings cards for Butrans & went over eligibility stipulations. He said he would put them to use. Reviewed appropriate patient type & reminded him that patients can take supplemental analgesia with Butrans. Also gave him new savings cards for OxyContin & reminded him of 7 tablet strengths for flexibility in dosing. Discussed both programs with Dorothy as well.
PPLPMDL0020000001	Cleveland	OH	44114	2/3/2012	I asked Laura, Pharmacist, who are the appropriate Butrans and OxyContin patients in her mind? Laura said patients taking a couple short-acting opioids daily for their chronic pain would be appropriate for Butrans and those patients that have tried all short-acting opioids and nothing is controlling their pain, perhaps OxyContin could be an option. I showed Butrans visual aid, we discussed 6 core selling messages and Laura focused on once weekly dosing of Butrans. I asked Laura to hand patient info booklets to patients she feels are appropriate for Butrans so they can talk to their HCP's about Butrans. Laura said she will do that. We looked at OxyContin visual aid, appropriate patients and I asked Laura if she ever gets questions from patients taking OxyContin? Laura said no not really, some side effect questions. I talked to Laura about side effects of OxyContin, showed FPI and talked to Laura about conversions, showed conversion/titration guide. We discussed formulary coverage for insurance, confirmed OxyContin and recommended Senokot-S
PPLPMDL0020000001	Brooklyn	OH	44144	2/3/2012	Spoke with floater pharmacist & reviewed Butrans core messages. Discussed once weekly dosing, titration, & ability to take supplemental analgesia with Butrans. Also discussed Butrans as a CIII opioid with abuse/addiction potential. Went over appropriate patient type, focusing on patients who take chronic, short-acting opioids around-the-clock. She said this is common every place she goes. Positioned Butrans as an option for that type of patient where appropriate. Reviewed automatic savings via e-voucher & discussed OxyContin savings cards & 7 tablet strengths.
PPLPMDL0020000001	Lyndhurst	OH	44124	2/3/2012	I discussed the butrans indication and other selling messages and asked doc what he thinks about a once weekly dosed analgesic. He said he tried it and it made his patient sick. I apologized and explained that the patient that he previously described was like not an appropriate patient as the patient had already been on stronger opioids. I asked him to try again for more appropriate commercially insured patients and give them a savings card. No commitment.
PPLPMDL0020000001	Cleveland	OH	44135	2/3/2012	Spoke with Megan, I asked what her patients usually ask about when they have questions about their pain medications. She said they usually don't ask anything but they might ask about side effects. I reviewed the side effect profile for Butrans and asked asked her thoughts. She said that they looked similar to other pain meds. I reviewed the medication guide for Butrans and asked if she would let appropriate patients know about Butrans as an option and she said she would. We reviewed the OxyContin conversion guide.
PPLPMDL0020000001	Cleveland	OH	44109	2/3/2012	I asked Ron, Pharmacist, what features of Butrans stand out? Ron said transdermal delivery and once weekly dosing. I asked Ron who are the appropriate Butrans patients in his mind? Ron said patients taking couple short-acting opioids daily for chronic pain but not controlled. I asked Ron if he would recommend Butrans to these patients by giving them a patient info booklet and having the patients speak with their HCP's about Butrans? Ron said yes he has given some booklets out and will continue doing so. I asked Ron who are the appropriate OxyContin patients? Ron said patients that have tried all short-acting opioids and this is last option. I showed Ron, OxyContin visual aid and we discussed appropriate patients for OxyContin, showed conversion guide and discussed a few conversions with Ron. We discussed formulary coverage, showed grid and focused Ron on medicare and commercial insurance patients on OxyContin. Ron said he would take info but doesn't recommend OxyContin, recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	2/3/2012	dr said he's started more patients on Butrans and given the initial trial cards away, dr wanted 2 more packs. I asked dr how his patients are doing on Butrans and what feedback he is getting from patients? dr said patients are doing great on Butrans, pain is controlled, patients are happy and so is he. I asked dr if he'll see 10 new commercial patients over the course of the next week? dr said he will see 10 new patients within 1-2 weeks so I can follow-up in 2 weeks. I recommended Senokot-S
PPLPMDL0020000001	Mayfield Hts	OH	44124	2/3/2012	Quick call.... I asked doc how often his patients come in for a dose adjustment of their tramadol or vicodin. He laughed and said that near happens. I reminded him of butrans and its once weekly dosing and the fact that it is a CIII which can be called in and refilled. He asked about coverage. I asked him to prescribe butrans for commercially insured patients or BWC.
PPLPMDL0020000001	Cleveland	OH	44113	2/3/2012	dale, PA, said he started another patient on Butrans today and has been starting patients on Butrans weekly. I asked dale if he'll see more BWC and commercial insurance patients to start on Butrans today and next week? dale said yes he sees dr shen's patients and she averages 15 patients a day when working here at Lutheran hospital. I asked dale if there was anyone he wouldn't start on Butrans? dale said obviously if patients didn't meet the Butrans indication or if patients were controlled on their short-acting opioids. I asked dale to start patients on Butrans when they are taking short-acting opioids, not controlled, and need a medication adjustment. dale agreed to do this. We discussed initial trial offer and \$40 savings card program.
PPLPMDL0020000001	South Euclid	OH	44121	2/3/2012	Spoke to Melinda and Dina about the movement of butrans. Dina said that she has not seen any recently. They had one patient on it but has not noticed any refills lately. She believes the customer had a savings card with about a \$25 co pay. I discussed the positioning of butrans and asked if they would ever make recommendation for a product like butrans. She said maybe but a most customers like their vicodin as a security blanket. Dina suggested I talk to Dr. Stein. I explained that he has prescribed. They said oxycontin has been steady and they have not had any issues. Provided butrans initiation guide.
PPLPMDL0020000001	South Euclid	OH	44121	2/3/2012	Spoke to Grisleda about the stocking/movement of butrans. She confirmed that they have it and get scripts from time to time. I explained the positioning and asked if they would ever make suggestions about alternative therapies. She said not really and not for a specific brand. I explained the savings cards program and the availability of the cards online in case customers come in without it.
PPLPMDL0020000001	Brooklyn	OH	44144	2/3/2012	Quick call- Caught Dr Detwiler between patients. Showed him new OxyContin savings cards in his sample closet & asked him to give them to patients with commercial insurance. He said he would do that. Also positioned Butrans for patients who are not well-controlled on daily around-the-clock tramadol or Vicodin. He waved & walked into a room.
PPLPMDL0020000001	Cleveland	OH	44109	2/3/2012	dr said he's been handing out patient info booklets to those patients he feels Butrans is an option for, but some patients are hesitant to try a patch for their chronic pain. I asked dr who are these patients he feels are appropriate for Butrans? dr said patients taking low doses of tramadol, vicodin or percocet every day for their chronic pain but they aren't controlled and are asking him for something else, dr said he started 1 patient on Butrans and that patient is doing good so far, dr said he likes that Butrans is dosed once every 7 days, is a CIII so he can call in re-fills if he needs to and likes that Butrans is a patch. I asked dr if he can start 2 new commercial insurance patients on Butrans today-next week? dr said he's sure he'll see commercial insurance patients and will consider Butrans if patients are willing to wear the patch, rotate it and insurance pays for
PPLPMDL0020000001	Berea	OH	44017	2/3/2012	Quick call, I asked where he sees Butrans fitting into his practice. He said he hasn't had enough experience to know yet. He did not have time to talk further and I scheduled an appointment. He said he will try to attend a dinner program to learn more.
PPLPMDL0020000001	Berea	OH	44017	2/3/2012	Dr said that he has not tried Butrans yet, I asked why and he said he just doesn't like to treat pain, I asked if he still treats it and he said some. I reviewed the 5mcg as a starting dose. I invited him to our programs and he said he would not be able to come.
PPLPMDL0020000001	Cleveland	OH	44109	2/3/2012	worked pm&dr dept-see call notes on dr greenwood and dr jaffer
PPLPMDL0020000001	Cleveland	OH	44135	2/3/2012	Spoke with Ann Zudek, she said that I can continue to work with her to get information to the prescriber's now that Randy and Jim are no longer there. We reviewed the Butrans initiation tool and OxyContin conversion guide.
PPLPMDL0020000001	Sagamore Hills	OH	44067	2/3/2012	Spoke with Karen, nurse, who said Dr Scanlon had an emergency, so he was not in. Reviewed Butrans & OxyContin formulary grids. She said she thinks Dr Scanlon has been prescribing Butrans. Discussed new trial/savings program along with eligibility requirements. She said to wait to give the cards to Dr Scanlon directly so I could explain the details to him. Also discussed OxyContin savings cards. She said they have enough of those for now.
PPLPMDL0020000001	Cleveland	OH	44135	2/3/2012	Dr came to window and told me that he has used the new trial cards for Butrans and asked for more. I asked if he would use these 5 cards by next week and I will be back to follow up and he agreed. I spoke with Issy about the Drs commitment and she said that she would make sure to keep the cards on his desk so that he will use them up.
PPLPMDL0020000001	Lyndhurst	OH	44124	2/3/2012	HCP said she has not prescribed butrans yet but asked about the starting dose. I showed her the profiles of Emma and William and the 5 and 10mcg starting dose for the respective patient types. I explained that because butrans is a CIII it can be called in or refilled similar to hydrocodone. She sees Dr. reeds patients for follow up so she can't commit to trying it. I explained the commercial coverage and the savings card program. <font color=
PPLPMDL0020000001	Cleveland	OH	44106	2/3/2012	color=blue>-b>CHUDAKOB added notes on 02/08/2012</b></font>If she is seeing Dr. Reed's patients for follow-up does she need Dr. Reed's approval for every medication change she deems necessary for every patient she worked rheumatology dept and family medicine
PPLPMDL0020000001	Cleveland University Heights	OH	44121	2/3/2012	I introduced butrans as another option for patients with moderate to severe chronic pain (such as pain associated with OA, low back, etc). I reminded doc that butrans is a once weekly dosed transdermal and a CIII similar to hydrocodone. He asked how much will it cost patients. I asked him to focus on patients with private insurance such as medical mutual/anthem and give those patients a savings card and most should be able to save up to \$40 off their co pay. I asked to schedule a lunch. He asked me to just leave some information. <font color=blue>-b>CHUDAKOB's query on 02/08/2012</b></font>He appears to be an oncologist? Is this true? If so, curious as to why you are discussing chronic low back pain and OA?<font color=green>-b>SIMERTOC's response on 02/08/2012</b></font>He is mostly primary care/oncology like Dr. Price. They share the practice which is mostly primary care. However, I should ask what types of pain he sees most.<font color=blue>-b>CHUDAKOB added notes on 02/17/2012</b></font>OK. Thanks for the clarification!
PPLPMDL0020000001	Lyndhurst	OH	44124	2/3/2012	HCP said she has prescribed butrans 2 or 3 times but it has been all within the past month so she has not had any feedback yet. She believes she wrote it with refills and asked how many are allowed. I told her I believe 3 refills. I explained the savings card and the one month trial offer. I gave invites to the upcoming programs and she may try to make it to the 2/16 program in Rocky River. <font color=blue>-b>CHUDAKOB added notes on 02/08/2012</b></font>Refills for schedule III medications are limited to five (5) in a six (6) month period. Please be sure to correct this with Patricia.
PPLPMDL0020000001	Lyndhurst	OH	44124	2/3/2012	Doc said she has a few patients on butrans and they are doing ok. I asked if she is writing it with refills. She said after she makes sure how they are doing on it, she will write it with refills. She did say that they potential for where she would prescribe butrans is limited. I reviewed the profiles of Emma and William - she stated that she sees both types of patients, although for migraine related pain. I explained the new savings cards with the one month trial offer. She thought that the trial offer is a good incentive. I reviewed the oxycontin patient type and that maybe oxycontin is an option for patients that may not be able to access butrans.
PPLPMDL0020000001	Brooklyn	OH	44144	2/3/2012	Dr Miguel saw the Butrans initiation guide in my hand & said he hasn't written Butrans yet but plans to. I asked what he is waiting for. He said he has two patients in mind who have not been in since he saw me, but he is planning to start both of them on Butrans when they come in for their next appointment. Reviewed dosing & titration. Also showed him new OxyContin savings cards.

PPLPMDL0020000001	Cleveland	OH	44113	2/3/2012	dr said she likes Butrans, is getting great results from Butrans in her patients and insurance is paying for Butrans. I asked dr how long she expects patients to stay on Butrans? dr said forever. dr said these patients have chronic pain and will never be pain free. dr said patients will always need something so she would like them to stay on Butrans. I asked dr how she handles titration of Butrans, in the 4 wk follow-up? dr said if patients are tolerating the dosage strength of Butrans and most of her patients start on Butrans 10mcg, she'll give them a couple refills and they will stay on the 10mcg. dr said if patients are saying the 10mcg isn't giving them pain relief, she'll increase dosage strength to 20mcg and see the patients in 4 weeks for another follow-up to assess the Butrans 20mcg. I asked dr if patient are taking hydrocodone or oxycodone daily for their chronic pain but need a medication adjustment would she consider Butrans? dr said yes absolutely. I asked dr if she can start 5 new commercial insurance patients today-next week, using the initial trial offer and \$40 patient savings card? dr said yes she will see 5 patients that Butrans is appropriate for. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44135	2/3/2012	Spoke with Ken, I asked what questions do patients usually have about their pain medication. He said that most don't have questions because they have been on it for a while. We reviewed the medication guide for Butrans and I asked if hand these out and let some of those patients know about Butrans as a 7 day option. She said that he would. I reviewed the conversion guide for OxyContin.
PPLPMDL0020000001	Richmond Heights	OH	44143	2/3/2012	Quick window call...I reminded doc of the butrans once weekly dosing and and the CII status which means it can be called in and refilled. I gave him a clinical trial leave behind (per his request for clinical trial data) and invited him to the 2/29 speaker program. He said he would look at it.
PPLPMDL0020000001	Garfield Hts	OH	44125	2/3/2012	I reminded Dr Sadowski that he has been telling me that he is "thinking of Butrans" & asked him what he is looking for in a Butrans patient. He said he is waiting for someone with moderate pain who is ready to be started on an opioid of some sort. He went on to say that he would rather start someone on Butrans than start them on a pill form. I reminded him that Butrans is a CII opioid with abuse/addiction potential. He said he knows but he likes that it is a once per week patch. Positioned OxyContin for patients beyond the Butrans range.
PPLPMDL0020000001	Cleveland	OH	44109	2/6/2012	dropped off Butrans initiation guide, formulary grid, patient info booklet, OxyContin slim jim, conversion guide, OxyContin fpi and my business card for Internal med doctors, Family medicine and PM&R physicians as I cant see
PPLPMDL0020000001	LAKEWOOD	OH	44107	2/6/2012	Spoke with tech, Angelina, I asked about the movement of Butrans. She said she just saw a script of Butrans, but she didn't remember which Dr wrote. I reviewed the patient medication guide and she said she will hand them out with any new scripts. I reviewed the managed care and savings program for Butrans and OxyContin.
PPLPMDL0020000001	Lakewood	OH	44107	2/6/2012	Spoke with Angie regarding managed care for OxyContin. She is the one who gets the call backs when something is not covered, She said that she finds the managed care grids helpful and said that when something is not covered she will refer to the OxyContin grid and let the Dr know if it is an option for the patient. She will give Butrans invite to Dr.
PPLPMDL0020000001	Lakewood	OH	44107	2/6/2012	Quick call, I reviewed the managed care pull through for CCRX and Med D plans, she said that she does not have a lot of problems with OxyContin not being covered. I asked if she has started any new patients on Butrans, she has not, I invited her to our upcoming Butrans dinners, she will look at the dates.
PPLPMDL0020000001	Lakewood	OH	44107	2/6/2012	I spoke with Ryan, I asked if she had any questions about appropriate patients for Butrans, she said that she still has all of the information, but the Dr does not like to write any medications until the specialists start prescribing. I asked her to give the Dr our Butrans program invites and he can hear a pain specialist talk about Butrans. She will pass it along.
PPLPMDL0020000001	Lakewood	OH	44107	2/6/2012	Lisa tole me Dr was not having a good day and I kept it quick at the window, I asked Dr if his patients were doing well on Butrans and he said he has not heard much feedback, I invited him to our upcoming dinner and he will take a look. Spoke with Lisa MA, we reviewed the managed care and savings program for Butrans and she will make sure to help remind him that the trial is available.
PPLPMDL0020000001	Lakewood	OH	44107	2/6/2012	Saw Dr while waiting for Dr ElGazzar, I told him I know that Ashleigh takes care of him at his other location, but I asked if he would like to also keep Butrans savings cards at his Lakewood location. He said that he would like some and asked me to put them on his desk.
PPLPMDL0020000001	Cleveland	OH	44105	2/6/2012	dr said she's given some Butrans patient info booklets, to those patients she feels are appropriate for Butrans but hasn't started anyone on Butrans. I asked dr how she's explaining Butrans to patients and what's preventing her from starting patients? dr said majority of her patients are Medicaid and they aren't covering Butrans, we discussed the PA for Medicaid patients and Butrans. dr said ok she'll have to see if any patients have tried 2 long-acting opioids and are appropriate for Butrans. dr said she tells patients this is a once weekly pain patch and hands them the patient info booklet. I told dr that was good she's talking to patients about Butrans and asked if she can find 2 patients this week that are appropriate for Butrans and just start them? dr said she will see who comes in and do her best. dr said she's just trying to do what she can with these patients, until March when she retires.
PPLPMDL0020000001	Cleveland	OH	44109	2/6/2012	worked at wellness center - left info for all HCP's in dept and talked to Kathy, MA, about the changes in dept (ie: no lunches) and what I can provide them, perhaps in-services/training/education for the nurses, medical assistants, etc. Kathy said to stop back on a Friday as it's easier to see some of the HCP's on this day.
PPLPMDL0020000001	Lakewood	OH	44107	2/6/2012	Quick call in hall, I asked Dr if he would try just a few patients on the month trial who might benefit from a 7 day transdermal, he said he will. I invited him to our upcoming Butrans dinner and he said he will try to come to the west side program.
PPLPMDL0020000001	Cleveland	OH	44127	2/6/2012	I talked to dr about Butrans 6 core selling messages, dr said she likes that Butrans is a patch and dosed once every 7 days but her challenge is that majority of her patients are Medicaid. we discussed PA for Medicaid and Butrans and dr said she doesn't really write long-acting opioids so she would have a challenge getting the PA approved for her Medicaid patients. I asked dr if she had 2 commercial insurance patients that would be appropriate for Butrans? dr said she might but will have to think about it. Josie, Doctors Med assistant said majority of patients are Caresource here so if the PA changes let her know. we discussed initiation and titration of Butrans and dr talked about her tylenol with codeine patients that she would love to try Butrans on, dr said she'll see what she can do.
PPLPMDL0020000001	Lakewood	OH	44107	2/6/2012	Spoke with Taylor, she said that Butrans seems to be picking up and she remembers ordering it. We reviewed the medication guide for Butrans. I asked what questions patients usually have about their pain medication. She said with a patch they ask how the small patch is supposed to give them pain relief where they need it. We reviewed where to place Butrans per the FPI and that patients should not place the patch on the site of their pain.
PPLPMDL0020000001	Lakewood	OH	44107	2/6/2012	We reviewed the savings program for Butrans. We discussed the OxyContin conversion guide and I reviewed the conversions from hydrocodone or oxycodone.
PPLPMDL0020000001	Lakewood	OH	44107	2/6/2012	I reviewed the pull through piece for OxyContin and asked Dr if he had a few vicodin patients who might benefit from Q12hr dosing. I asked if he was able to start those low dose vicodin patients on Butrans with the trial offer, he had not. I asked if he would come to our upcoming dinner to learn more about the appropriate use of Butrans and he agreed. He said he would try to make it to the west side program.
PPLPMDL0020000001	Lakewood	OH	44107	2/6/2012	I reviewed the pull out initiation tool with Dr and said I remember you said you had about 5 patients who you thought would be good to try on Butrans, what happened. He said that he just forgets, it's such a habit to prescribe what he's always used. I reviewed the trial program for Butrans and asked if he would try 5 new patients and see what the feedback is he agreed. I spoke with Laura, and she said that she would help remind the Dr about the trial cards and that she could also think of a few patients that she will try to remind the Dr to try on Butrans.
PPLPMDL0020000001	Lakewood	OH	44107	2/6/2012	Quick call, I reviewed the Butrans pull out initiation guide and asked the Dr if he has patients taking tramadol around the clock that could benefit from a 7 day transdermal, he said he will take a look. Robin overheard my conversation and said that she can think of several patients that would be good for Butrans. She said they prescribe a lot of tramadol and he typically does not like to go over 5 tablets per day. I asked if those patients have commercial insurance and she said that most do, we reviewed the formulary grid and she said that they see a lot of medical mutual, medco, express scripts. She thinks that Butrans would be an option that he should start using and she will do her best to remind the Dr about it. She said that they like CII so they can call it in and write refills, and she said that Dr avoids going to CII when they can. I reviewed the Butrans still has abuse potential as a CII and she understood. I invited him to our upcoming program but Robin said he does not typically go to dinners.
PPLPMDL0020000001	Westlake	OH	44145	2/7/2012	Spoke with Amid, I asked about the movement of Butrans and he said he still has not seen many scripts. I reviewed the medication guide and I asked if he would give them to appropriate patients for Butrans to talk to their Dr. He said he would. I reviewed the application of Butrans and that patients can take supplemental analgesia. I reviewed the OxyContin conversion guide and that it is a long acting option when patients are taking short acting around the clock.
PPLPMDL0020000001	CLEVELAND	OH	44109	2/7/2012	I talked to Ron, Pharmacist, about who the appropriate Butrans and OxyContin patients are in his mind, Ron said patients taking a couple tabs of immediate release opioids are appropriate for Butrans and patients who have tried all immediate release opioids and are maxed out would be appropriate for OxyContin. I showed Butrans indication, visual aid, Ron focused on opioid experienced patients saying he sees a lot of these patients but they are all Medicaid. Ron said he didn't think Medicaid paid for Butrans? I talked to Ron about PA requirements for Butrans, showed formulary grid with discussion on commercial insurance patients. I asked Ron if he would give appropriate patients the Butrans patient info booklets so they can talk to their HCP's about Butrans? Ron agreed to do this. I showed Ron OxyContin visual aid, discussed indication and appropriate patients, Ron said he won't recommend OxyContin that's up to HCP's to start patients on OxyContin. discussed formulary coverage, focus on Medicare and commercial insurance patients starting on OxyContin.
PPLPMDL0020000001	Cleveland	OH	44109	2/7/2012	I talked to Raban, Pharmacy Mgr, about Butrans 6 core selling messages, Raban focused on patients taking opioids every day that could be appropriate for Butrans. Raban said most patients don't want to stop taking their pills and aren't open to trying a patch that's once a week. I showed Raban FPI, 2.4 maintenance of therapy, noting patients can take immediate release opioids or non-opioid therapy with Butrans, Raban said ok but its up to HCP to convince patients to try Butrans. I told Raban I agreed that this is a discussion between HCP's and patients but would be willing to give patient info booklets to appropriate patients so that they can talk to their HCP's? Raban agreed to do this. we discussed formulary coverage-focused on commercial insurance patients and trial offer/patient savings card program. we discussed appropriate OxyContin patients, showed visual aid and asked Raban if he's seeing new Rx for OxyContin? Raban said he mainly sees the same patients getting their OxyContin monthly but occasionally see a new Rx. we talked about Medicare and commercial insurance patients starting on OxyContin and I showed Raban formulary grid. I asked if Raban ever recommends a long-acting opioid like OxyContin, to HCP's, if patients are appropriate? Raban said no he doesn't do that, its up to the HCP's. recommended I talked to Erin, Pharmacist, no Rx yet for Butrans. Erin said she thinks Butrans is a good option for patients with chronic pain but doctors need to persuade patients to try it. we talked about appropriate patients, I showed visual aid and I asked Erin if she saw patients like this in the pharmacy? Erin said there are a lot of patients taking short-acting opioids that would be appropriate for Butrans but its up to the HCP to discuss with patients. I asked Erin if she would continue recommending Butrans to patients by handing the patient info booklets to appropriate patients so they can talk to their HCP's? Erin agreed to do this. we discussed insurance, focus on commercial insurance and trial offer/savings card program. we talked about appropriate OxyContin patients, showed visual aid, and Erin said she won't recommend OxyContin but will take any patient education. I left Erin "safeguard your meds" approved literature, to hand out. I left med educ catalog as Erin said CME courses would be greatly appreciated for her and pharmacy tech's. I showed OxyContin formulary grid we discussed commercial and Medicare patients. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	2/7/2012	dr said he tried to start another patient on Butrans last week but Buckeye wouldn't approve it, even after dr did the PA. I asked dr to focus on Commercial insurance and BWC patients. dr said majority of patients here are BWC with some commercial. I asked dr if he'll see 5 new commercial patients this week that will require a medication adjustment? dr said he sees these patients every day so he's sure he will. I asked doctors medical assist, Crissy, if she would look at the days charts and flag charts for those appropriate Butrans patients, Crissy said she will do that and dr said that was fine. I discussed with dr Butrans initial trial program/\$40 savings card program and asked dr if he'll start 5 new commercial patients on Butrans this week? dr said he will see who comes in and do the best he can. we talked about initiation of Butrans and showed initiation tool guide. I asked dr if he still has patients that he feels are appropriate for OxyContin? dr said he's maintaining a lot of patients on OxyContin from a previous doctor in practice but doesn't really like to start new patients on OxyContin. I showed appropriate patients page OxyContin visual aid, dr said he has patients like this and he'll think about it. dr said majority of OxyContin patients are BWC, commercial and a few Medicare and cash paying patients, I showed formulary grid for commercial and Medicare patients and focused dr on these patients for new patient starts on OxyContin. recommended Senokot-S
PPLPMDL0020000001	Berea	OH	44017	2/7/2012	I asked Dr where in the big picture of his practice does he see Butrans fitting in? He said he only tried one patient and did not get any feedback. He said that since he no longer prescribes long acting like OxyContin, he can see using Butrans when he needs a long acting. I asked if he would consider Butrans as an option instead of going to vicodin around the clock. We reviewed the invitation pull out tool and he agreed that he may have some appropriate patients for Butrans who are taking tramadol or vicodin. I reviewed the managed care and trial card. I asked if he would start 5 new patients on Butrans so that he can see what the patient feedback is, and he agreed. We reviewed the 7 tablet strengths of OxyContin and he said that he maintains 2 patients on OxyContin but does not start new patients. I reviewed that OxyContin is a Q12hr option when patients are taking vicodin or perccet around the clock. I spoke with Diane regarding managed care for Butrans and OxyContin.
PPLPMDL0020000001	Stow	OH	44224	2/7/2012	Spoke with Corey and he said he is stocking the 5 and the 10mcg and he said he is seeing scripts from Yuan, he may have 2 or 3 scripts. HE said most of them have been refills. HE said if needed he would get the 20mcg in. I told him about the trial cards and gave him patient education so that if he sees appropriate patients he would recommend and he said he would do that. HE said he does not see any OxyContin nor stocks it.

PPLPMDL0020000001	Cleveland Stow	OH OH	44114 44224	2/7/2012 2/7/2012	As a follow-up to our conference call on 1/30/12, forwarded copies (as PDF) of Pain Pact slide modules for Ms. Hanna's review. Modules sent in handout format, PDF. Dr said he is going to start seeing more patients and prescribing more rather than doing procedures 100% of the time. I asked where do you see yourself using Butrans and he said he classifies Butrans in with the long acting and I asked him to clarify and does he mean that he is grouping Butrans in with Duragesic and he said yes. I said let me clarify again and say that BUTrans is to be used before Duragesic and he said he knows, he meant the fact that it is sustained release. I showed him initiation grid and he said he would like that to keep. I showed him where he would start patients who are taking Vicodin ATC. I explained trial program and to use in new commercial patients. HE said he would keep it in mind.
PPLPMDL0020000001	Westlake	OH	44145	2/7/2012	I asked Dr if he would start a few new patients on Butrans today. He said that he would try. He asked about BWC and I reviewed the managed care for Butrans. I reviewed the savings program and trial card for Butrans and he agreed to start 5 new patients this week. I invited him to our upcoming program and he will try to make it to the west side dinner. I spoke with Rachel, and we discussed the managed care and savings program for Butrans.
PPLPMDL0020000001	Stow	OH	44224	2/7/2012	Janet said she has not written Butrans but she just started seeing her own patients yesterday. She said again that she is seeing mainly BWC patients and I asked are those patients on some sort of short acting and she said yes and I asked her where she would go and she said Butrans seems like a good option and she likes it because it is C3 and I said it is the only C3 long acting. She said she would try and asked the managed care coverage again and we reviewed BWC and commercial and showed her trial cards
PPLPMDL0020000001	Stow	OH	44224	2/7/2012	Sandra said that she has not written Butrans, I said that she said she saw the benefit of C3 and that it is once a week and what is preventing her and she said nothing and then she said managed care and I asked if she wrote in a government plan and she said she couldn't remember. I stated that she should write in commercial and BWC. I talked to her about her patients on Vicodin and she said that is who she would write it in and she said percoct patients. We Reviewed dosing and initiation card as well as trial cards and she said she would definitely try
PPLPMDL0020000001	Lakewood	OH	44107	2/7/2012	I asked Dr if he had a chance to start any patients on the trial. He said he has not, but still has the cards in his office, I reviewed that he has nothing to lose as commercial patients can get their first month as a trial. He agreed to try it for patients taking tramadol. He will try to make the west side program, he lives in rocky river.
PPLPMDL0020000001	Westlake	OH	44145	2/7/2012	I reviewed the low doses of OxyContin and asked if he might think of OxyContin as an option when patients are taking 4 vicodin or percoct per day. He agreed, but said that most of the time patients are titrated up on the short acting before converting. I asked why and he said it's just easier and covered on managed care. We reviewed that OxyContin is covered on most plans including Med D. We reviewed for those same patients with commercial insurance, Butrans may be an option and we discussed the trial and savings program.
PPLPMDL0020000001	Westlake	OH	44145	2/7/2012	Quick call, I reviewed the medication guide for Butrans and asked what questions she usually gets from patients regarding their pain meds. She said that she most patients have been taking their meds for a while and she does not get a lot of questions. Reminder that OxyContin is also a long acting option and I left the conversion guide.
PPLPMDL0020000001	Cleveland	OH	44127	2/7/2012	I talked to dr about 6 Butrans core selling messages,dr focused on his tylenol with codeine patients that could be appropriate for Butrans.i asked dr if he would consider a long-acting opioid after the 1st dose of tylenol with codeine wasnt controlling the patients chronic pain? dr said he doesnt write long-acting opioids unless its a hospice or nursing home patient.dr said he will send patients to pain management if patients continue to ask for refills.i asked dr how he feels about Butrans being a CII opioid that is a long-acting opioid option for patients? dr said he might consider it but it comes down to insurance covering Butrans.dr said majority of patients are medicaid and medicare here.i talked to dr about PA requirements for Medicaid patients and Butrans,dr said he doesnt write the long-acting opioids so this could be a challenge.dr said he has a couple commercial insurance patients he'll have to think about it and see if anyone is appropriate for Butrans.dr said he may start a few nursing home or hospice patients on Butrans to get some clinical experience.i focused dr on commercial insurance patients and we discussed initial trial offer and \$40 patient savings card program.i asked dr if he will start 2 commercial insurance patients, appropriate for Butrans,this week? dr said he'll see who comes into office and will
PPLPMDL0020000001	Stow	OH	44224	2/7/2012	Barry spoke with Laura while I was speaking with Sandra and Janet. HE filled me in and said he discussed with Laura positioning of Butrans in Vicodin patients and also the new trial cards. She is seeing follow up patients and can do medication changes. She said she has not written it, she said she needs to keep it in mind and will think about it.
PPLPMDL0020000001	Stow	OH	44224	2/7/2012	I asked the Dr if he sees Butrans as ever replacing hydrcodone in chronic patients and he said no, he uses Vicodin along with Butrans and I said let me clarify that I am talking about patients who are just coming to you and taking Vicodin ATC, and he said he likes Butrans as his baseline medication and he uses Vicodin with it but cuts down on the amount of pills. I said the dose you start patients on is 10mcg, correct? and he said yes, I said what happens if a patient comes to you and says it is not working any more and he said he would increase it and I said increase the Butrans to 20mcg or increase the Vicodin and he said increasing the Butrans is doubling the dose, he said he has not had to but he would, seemed hesitant. I asked him how often are you seeing patients like the ones you have prescribed Butrans in and do you think you see more. HE said he sees alot and would prescribe more is insurance covers it. I stressed commercial and BWC and showed him trail cards. I asked if 10 or 15 cards would be enough and he said leave 15.
PPLPMDL0020000001	Cleveland	OH	44113	2/8/2012	I asked dr how he decides if patients start on Butrans or dont? dr said he's told me several times that it depends on how many pills/day patients are taking,other factors are involved like insurance. I asked dr if patients are taking 4-5 pills/day as he's mentioned in past,needing a medication adjustment,does that mean he's starting them all on Butrans? dr said no.
PPLPMDL0020000001	Cleveland	OH	44113	2/8/2012	I asked dr when patients start on Butrans does dr think it's world's work? dr said he doesnt know.i told dr im sure as a physician,he prescribes opioids because he believes they will work,dr said yes for the most part.i asked dr if he felt that way about Butrans? dr said not really he doesnt have enough experience with Butrans.dr said it takes too much time to explain Butrans to patients.dr said he might attend a dinner program.left invitations for feb and march 2012 programs
PPLPMDL0020000001	Westlake	OH	44145	2/8/2012	Quick call, I asked if he had been able to use the trial cards for Butrans since he said he has been starting patients. He said he wasn't sure if he gave them a new or old card. I let him know that the other cards still work, but patients can benefit from the trial offer with the new program.i asked if he would use them and he agreed.
PPLPMDL0020000001	Cleveland	OH	44127	2/8/2012	i talked to dr about 6 Butrans core selling messages,talked to dr about opioid naive and experienced patients,dr said he see's both and would consider Butrans,likes idea of 1 Butrans,7 days buprenorphine.dr said he has patients taking vicodin every day that he thinks Butrans could be an option.showed dr opioid naive and experienced graphs in visual aid,asked dr if a 30% reduction in pain,seen in opioid experienced patient trial,is clinically significant? dr said yes it is.i asked if its enough for him to Rx Butrans? dr said yes he'll try it in a few patients.dr asked if medicaid covered Butrans or aetna or medical mutual? i focused dr on commercial insurance patients,discussed initial trial offer and \$40 savings card program,i asked dr how often he see's commercial insurance patients? dr said 2-3 patients/month.dr said majority of patients are medicaid.i talked to dr about PA for medicaid patients and Butrans,dr said he doesnt really write long-acting opioids so doesnt know if he would meet PA requirements.i told dr i would follow-up end of month.
PPLPMDL0020000001	Westlake	OH	44145	2/9/2012	I showed Dr the initiation pull out tool and asked if he had patients taking short acting pain meds in these dosage range. He said he does. I reviewed that those would be appropriate patients for Butrans when they have commercial insurance. He agreed and said he will try to prescribe Butrans more often.
PPLPMDL0020000001	Mayfield Heights	OH	44124	2/9/2012	Window call...Reminded doc of the CII status and once weekly dosing of butrans and asked what kind of feedback he has had. He said nothing more yet. As far as he knows the patient is still on it. I asked him to try again for appropriate patients. Gave him invites to the upcoming programs. No commitment.
PPLPMDL0020000001	Cleveland	OH	44103	2/9/2012	showed dr emma patient case study.i asked dr if he would consider Butrans for a patient like Emma? dr said if medicaid covered it he would.dr said if medicaid isnt paying for Butrans he wont write it.i focused dr on commercial insurance patients and asked dr what does he do now when patients are maxed on tramadol and need a medication adjustment? dr said he will start patients on vicodin.i asked dr if he will start 2 new commercial insurance patients on Butrans over the course of this week and next? dr said he'll see who comes in and think about it.i asked dr at what point is a long-acting opioid appropriate? dr said if patients are maxed on short-acting opioids,have tried all options and still in pain,he'll consider a long-acting opioid.showed OxyContin visual aid,appropriate patients section and showed dr formulary grid.i asked dr if he'll start a couple new patients on OxyContin? dr said he will do that.<font color=blue><b><CHUDAKOB's query on 02/15/2012</b></font><!-- Dr. Robson an OxyContin Core? If so, this should be the primary presentation and the next call objective should relate to OxyContin, don't you think?<font color=green><b><BROOKAM's response on 02/17/2012</b></font><!--yes every time he see's me he knows i am talking to Dr.Boyd about Butrans and OxyContin so we get into discussions on both products from now on i will be sure to just talk to him about OxyContin thanks<font color=blue><b><CHUDAKOB added notes on 02/21/2012</b></font><!--Not JUST about OxyContin, but OxyContin in the primary position and Butrans in the secondary position. Thanks Amy!
PPLPMDL0020000001	Mayfield Heights	OH	44124	2/9/2012	I reviewed the butrans selling messages and asked do if she really sees a merit to a product like butrans for her patient population. She said she is just afraid it will be too expensive and patients wont be able to afford it. I told her that medicare and medicaid wont cover it but she agreed that she participates in most of the butrans MCO plans. I described the appropriate patients using the profiles of Emma and William. She said she would try to remember. I also explained the importance of the savings cards and that oxycontin may be a better covered option for those medicare patients. Invited her to the various speaker programs. She was more interested in the one on 2/29 as it is closer to her home but she will be there the very next day for an event.
PPLPMDL0020000001	Cleveland	OH	44104	2/9/2012	dr said she hasnt started anyone else on Butrans.dr talked about her percoct patients starting on Butrans and her having to convince patients to try Butrans.i showed dr Butrans patient info booklet and asked if she can give this to patients and see if this will assist in educating patients,i asked dr if that helped? dr said yes she'll keep talking to patients about Butrans but depends if medicaid will pay for it.i talked to dr about PA for Medicaid and Butrans,dr said she'll try it and look for a few patients.
PPLPMDL0020000001	Cleveland	OH	44113	2/9/2012	i reminded dr what he said in last call about Butrans being appropriate for patients taking vicodin daily for chronic pain,i showed Butrans indication to dr,showed visual aid,asked dr if patients ever asked for a medication change or need an adjustment? dr said yes all the time.i told dr thats where Butrans can be an option.dr said ok.i asked dr if he had a couple patients like we discussed,with commercial insurance coming in this week? dr said probably so.i asked dr to start 2 patients like this on Butrans.dr said ok he will consider but had to go.
PPLPMDL0020000001	Cleveland	OH	44103	2/9/2012	dr said she's not started anyone on Butrans recently due to medicaid not approving the PA's.i asked dr who are the patients she's trying to start on Butrans? dr said majority of her practice is medicaid and medicare and she's looking at her percoct patients that arent controlled and asking her for something else,thats who she wants to start on Butrans but she cant get the PA approved.we talked about PA for medicaid patients and i asked dr to continue focusing on the couple commercial insurance patients she has,showed visual aid and we discussed vicodin and percoct patients trying Butrans.dr said she'll keep trying to get PA's approved because she likes Butrans for her patients.we talked about OxyContin being an option for her UHC/AARP and CCRX medicare patients,dr said she didnt realize OxyContin had coverage there but appreciated the info.i asked dr if i had her commitment to start more new patients on OxyContin that had CCRX and UHC/AARP this week? dr committed to do this.recommended Senokot-S<font color=blue><b><CHUDAKOB added notes on 02/15/2012</b></font><!--Another OxyContin Core? OxyContin should be primary.
PPLPMDL0020000001	South Euclid	OH	44121	2/9/2012	Spoke to Mitch about the movement of butrans. He again said thathe personally had not seen any scripts for it, however, the tech chimmed in and said she thinks she has seen one but can't remember if the customer ever came back for it as it wasn't a regular customer. I discussed the positioning of butrans and how to properly apply it if they do get scripts and/or questions. Provided patient info guide. Mitch said that they still get plenty of oxycontin scripts and the have a lot of medicare so no savings cards needed.
PPLPMDL0020000001	Cleveland	OH	44113	2/9/2012	showed dr BUP3015,opioid experienced clinical trial,we discussed inclusion criteria and 30% reduction in pain page.i asked dr if this was clinically significant? dr said yes it is,any reduction in pain is good but 30% for an opioid is impressive.i asked dr if it was enough for him to prescribe Butrans? dr said yes it is,dr said Butrans is a new medication to him so he doesnt have any comfort level with it.i asked dr if he would start 2 patients this week on Butran,with commercial insurance? dr said he will consider it as long as insurance covers Butrans.i showed dr Butrans formulary grid and we discussed initial trial offer and \$40 patient savings card program.dr said he will do his best and talk with me more at lunch next week.
PPLPMDL0020000001	Mayfield Heights	OH	44124	2/9/2012	Quick call...Reminded HCP of the CII status of butrans and that it can be refilled and called in. She said she just recently refilled one for Dr. Dews. I asked her to focus on commercially insured patients. Gave her invites to the speaker programs. She said she would try but she has two small children.
PPLPMDL0020000001	East Cleveland	OH	44112	2/9/2012	Doc said he has been out of office for about 3 weeks and has forgotten about butrans. I reminded him of positioning - for tramadol failures or those on a short acting opioid asking for a dose adjustment. He said his patient are more severe than that but he will try to find someone for butrans. I asked him to try butrans for a BWC patient as it is covered as is oxycontin. He said he has been having problems with BWC and medicaid. I informed him of the preferred medicare plans with oxycontin. Provided formulary grid for both products.

PPLPMDL0020000001	Berea	OH	44017	2/9/2012	Spoke with Joe, he said that he has not seen any scripts from Dr Kavlich or many from any Drs in the area. He said that Dr Kavlich seems to like patches like duragesic and that he thought he would at least try it. I asked what questions do patients usually have about their pain meds, he said for a patch they will want to know where to apply and how to apply. We reviewed the medication guide. Reminder that OxyContin is a Q12hr option when patients are taking opioids around the clock.
	Cleveland	OH	44113	2/9/2012	I talked to dr about 2 options for his patients-Butrans and OxyContin.dr said he writes a lot of OxyContin in nursing homes and hospice.I showed dr OxyContin visual aid,we discussed appropriate OxyContin patients and dr said he usually doesnt prescribe OxyContin for his office based patients unless he really trusts them.I asked dr if he's ok giving percoet or vicodin to these patients? dr said he doesnt like writing narcotics but he has to manage patients chronic pain.I showed OxyContin conversion guide,we discussed potency of percoet to OxyContin,dr said he forgets that a 1 to 1 conversion.I asked dr if he'll start a couple new patients in the office on OxyContin,if appropriate,and showed formulary grid focused discussion on medicare patients.dr said he will do that. I told dr when his patients are in the dosage ranges shown in Butrans initiation guide,he does have choice of starting patients on Butrans instead of converting patients to another short-acting opioid to manage their chronic pain.dr said he likes the idea of Butrans and is giving booklets to patients but he's been in the habit of writing the short-acting opioids and Butrans is new to him so it'll take a little bit to get used to.I showed dr Butrans script example in the initiation guide and asked if this would help? dr said he will take it and try to remember.focused dr on commercial insurance patients for Butrans.recommended Senokot-S
PPLPMDL0020000001	Westlake	OH	44145	2/9/2012	I reviewed the pull out invitation tool for Butrans, I asked if he has a few patients in this daily range to start on the 10mcg Butrans. He said that he does probably more of his tramadol patients will be more likely to try Butrans. I reviewed that patients can take supplemental analgesia and I asked if he would do this and start a few of these tramadol patients. He said that he would. We reviewed OxyContin as a Q12hr option for patients taking vicodin around the clock.
PPLPMDL0020000001	Berea	OH	44017	2/9/2012	Spoke with April, we reviewed the Butrans medication guide and that it is a CII and can be called in. I asked if she would ever recommend Butrans for a patient and give them a medication guide to give to their Dr. She said usually not unless they had specific questions about it. I reviewed that Butrans can be used with supplemental analgesia. Reminder that OxyContin is a Q12hr option instead of hydrocodone around the clock.
PPLPMDL0020000001	Olmsted Falls	OH	44138	2/9/2012	Quick call, I reviewed the key messages for Butrans. Dr said that he does like the fact it is a CIII. I reviewed that Butrans still has potential for abuse. He asked that I schedule time to tell again about Butrans and where to use it as he has not tried it yet. I scheduled an appointment.
	Westlake	OH	44145	2/9/2012	Dr told me that Opana has had major manufacturing issues and that he may switch some of those patients over to Butrans. I reviewed the initiation tool pull out and we reviewed the how to initiate patients based on what they are already taking. I reminded him that OxyContin may also be an option depending on the dose of Opana ER that patients are taking. I gave him the formulary kit for Butrans and he said that he is going to give it to the clinical coordinator Ron. He said that he is still trying to get Butrans on formulary. I invited him to our upcoming dinner program for Butrans and he said that he probably would not be about to come since that is his family time (3 kids) He said that he knows Dr Laham and Moufawad very well and he asked me if he could be a speaker. I let him know I will let Purdue know about his request to be a speaker.
PPLPMDL0020000001	Mayfield Heights	OH	44124	2/9/2012	Window call....discussed the butrans indication and positioning and that it is a CIII, once weekly transdermal. I asked if he has had any experience with it. He said no and asked me to leave info. Provided patient profiles and invites to the speaker programs.
	Cleveland	OH	44107	2/10/2012	Spoke with Laurie, we reviewed the Butrans medication guide and I asked what questions do patients usually have about their pain meds, she said they don't usually have that many questions about the pills but a patch may be different. We reviewed the medication guide and proper application and use of Butrans. I asked if she would give out the medication guides and let patients know that Butrans may be an option for them to talk to their Dr about. She said she would. We reviewed OxyContin as a Q12hr option and the 7 tablets strengths.
PPLPMDL0020000001	Westlake	OH	44145	2/10/2012	I introduced Dr to Butrans and the key messages as she has not heard a lot about it. She agreed to review the info when she has more time. I discussed the appropriate patient types for Butrans and the initiation pull out tool. I asked her to come to our upcoming dinner and she said she usually does not go.
PPLPMDL0020000001	Cleveland	OH	44135	2/10/2012	I asked Dr where he is finding Butrans fitting into his protocol. He said that he likes to go to Butrans instead of vicodin or covert a patient that is on vicodin. He said that his patients seem to be doing well. I reviewed the trial card and asked if he had 5 patients that he could start on Butrans this week and he said that he will use up the cards. I reviewed the managed care for Butrans with Erica.
PPLPMDL0020000001	Lyndhurst	OH	44124	2/10/2012	Spoke to Erine about the movement of butrans. She said that get may see one script per month and is not sure if she has any repeat customers. I asked if they come in with savings cards. She was not sure. I explained the savings card program and the focus on commercially insured patients. I also discussed the positioning and the proper application. She said that oxycontin business continues to be steady. I offered savings cards but she didnt
PPLPMDL0020000001	Cleveland	OH	44111	2/10/2012	Spoke with Ziad, we reviewed the medication guide for Butrans and how to instruct patients on the proper application and use. I reviewed that Butrans is a CIII and can be called in and refilled. I asked if he would let patients know about Butrans as an option and hand them a medication guide and he agreed. We reviewed the conversions in the OxyContin conversion guide.
	Lyndhurst	OH	44124	2/10/2012	Spoke to Steve about the movement of butrans and oxycontin. He said he had not seen any recent scripts for butrans but he still has a box of 5 and 10mcg. I explained the positioning of butrans and asked how often he sees customers refilled on vicodin every month. He said all the time. I asked if he would ever make suggestions to customers about a long acting alternative. He said only if the customers ask. I gave him patient info guides to give to customers that might be appropriate. He said that that dont giet many new customers with oxycontin scripts any more and probably only has the 10,20, and 40mg.
PPLPMDL0020000001	Westlake	OH	44145	2/10/2012	Dr just got back to full time after his knee surgery. I asked if he remembered Butrans, he said that he does but hasn't tried it yet. He said he is sure managed care will be a pain. I reviewed that commercial insurance is covered and the trial program. I asked if he would use some of the cards by the time I follow up and he agreed. I reviewed the Med D grid for OxyContin and that it is covered for most of these patients.
PPLPMDL0020000001	Cleveland	OH	44113	2/10/2012	dr said she's giving Butrans patient info booklets out but not started anyone yet.I asked dr whats holding her back? dr said patients arent sure about trying a patch for their pain so she's having patients take booklet,read over the info and is following up with them.I asked dr if she can focus on 2 patients this week that look like emma,showed patient case study,and need a medication change and just start them on Butrans? dr committed to do this.dr asked about medicaid coverage for Butrans,told dr about PA for medicaid and focused dr back on commercial insurance patients.
PPLPMDL0020000001	Cleveland	OH	44113	2/10/2012	dr said she's not started anyone on Butrans but will continue thinking of it as an option.I asked dr who is an appropriate Butrans patient in her mind? dr said patients taking tramadol daily for chronic pain that arent controlled and asking her for more pills or for another opioid.I told dr that was great she had Butrans in that place,showed Emma patient case study,dr said she see's a lot of patients like Emma,I asked dr if she would start 2 commercial insurance patients like Emma,on Butrans over the next week? dr said she'll talk to patients,see what they say and if insurance pays for Butrans she will start a few patients.I discussed initial trial offer and \$40 patient savings card program with dr,dr said she knows its there in office and will consider that for a couple patients.recommended Senokot-S
PPLPMDL0020000001	Westlake	OH	44145	2/10/2012	Spoke with Claudia, Dr just went to hospital, I reviewed the key messages for Butrans. She will review the info with the Dr and help me get to see him to talk further. She will invite him to our upcoming programs. I reviewed the OxyContin conversion guide and she finds the info interesting since she is in nursing school.
PPLPMDL0020000001	Cleveland	OH	44109	2/10/2012	worked internal medicine,family medicine,pm&r and rheumatology depts-had to leave info for ALL attending HCP's so I left Butrans initiation guide,formulary grid,patient info booklet and my business card for each HCP.
PPLPMDL0020000001	Westlake	OH	44145	2/10/2012	Quick follow up.I reviewed the trial program for Butrans and asked if he had 5 commercial patients in a week that he could start. He said that he will try to use them all. I asked if he had registered for the Butrans program yet and he said that he will try to make it but it all depends on what time he gets out that day.
PPLPMDL0020000001	Cleveland	OH	44113	2/10/2012	dr said she didnt have a lot of time to talk,dr said she's starting patients on Butrans,they are doing great and she will continue to start patients.I asked dr if she needed any patient info booklets? dr said no they have everything they need.I asked dr for her continued new patient starts on Butrans,dr committed to do this.
PPLPMDL0020000001	Cleveland	OH	44113	2/10/2012	deb,PA,said she started a Caresource patient on Butrans yesterday and it was approved,we disussed PA for Caresource and Butrans,I asked Deb if she'll see more patients like the 1 she started yesterday to start on Butrans today? Deb said absolutely she's starting patients all the time on Butrans.I asked deb if she needed anything at this point,booklets for patients? deb said no check in next week.
PPLPMDL0020000001	Euclid	OH	44119	2/10/2012	I reviewed the butrans core messages, formulary coverage and the trial offer with the new savings cards. He said, "Now you're talking"! He liked the trial offer as he is concerned about patient's cost and what if they dont like it. I asked if he would prescribe for naive or experienced patients. He said "new" patients. I explained the starting 5mcg dose for opioid naive and that they can titrate to 10mcg after 3 days if necessary. He said he would try it now that patients can try for free. I explained the \$75 max. I explained the oxycontin indication, patient type and 7 flexible dosing options. Doc said he would come to the speaker program on 2/29.
PPLPMDL0020000001	Cleveland	OH	44113	2/10/2012	showed dr patient case study,emma,we disussed Butrans being an option for patients like emma,dr said he see's a lot of patients like Emma and will consider Butrans but didnt think Butrans was covered by medicaid? I talked to dr about PA for medicaid,dr specified he has a lot of Caresource patients,and Butrans,I focused dr on BWC and commercial insurance patients starting on Butrans.I asked dr if he'll start 2 patients on Butrans today-next week? dr said he will talk to patients and yes will consider Butrans.dr asked how to write the script for Butrans? I showed initiation guide,script example,we talked about initiation and titration.I asked dr if he's still starting new patients on OxyContin? dr said yes.I asked dr what strengths of OxyContin does he typically start patients on? dr said a couple strengths,10mg-80mg,I showed dr conversion/titration guide showed 7 tablet strengths and we discussed titration of OxyContin.I asked dr if he will continue starting new patients on OxyContin? dr agreed to do this.focused dr on medicare patients and commercial,showed formulary grid.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	2/10/2012	I asked Dale,PA,what are patients saying about Butrans when you see them in a 4 week follow-up? Dale said patients tell him if the Butrans dosage strength is working for them or if they need a higher strength,dale said he talks to patients about side effects and if they are tolerating them and he's not hearing anything about that,dale said they titrate Butrans when patients come into office for the 4 week follow-up visit,if patients stay on the same dosage strength of Butrans for a few months,he and dr shen (pain management dr in office) may give patients a few refills of Butrans but no refills of Butrans initially. I asked Dale if he will continue starting patients on Butrans this week,focusing on BWC and commercial insurance and BWC patients? Dale committed to this.
PPLPMDL0020000001	Westlake	OH	44145	2/10/2012	I asked Dr if he is still starting new Butrans patients. He said that he is but is somewhat limited since most of his chronic pain patients are older with Med D. I reviewed the managed care for commercial insurance. I asked Dr if he would attend our Butrans dinner program and he said he may. I reviewed OxyContin as an option for those Med D patients and showed the grid.
PPLPMDL0020000001	Mayfield Heights	OH	44124	2/10/2012	Window call....Doc said he has tried to prescribe butrans a couple of times but its not being covered. I showed him the commercial plans where it is covered. I also told him that medicare and medicaid will not covered. Told him medicare patients may be appropriate for low dose oxycontin instead. I asked him about the speaker program on 2/29. He said he couldnt make it.
PPLPMDL0020000001	Cleveland	OH	44106	2/13/2012	dr said he's not started anyone on Butrans and wanted me to remind him of appropriate patients for Butrans.I showed dr visual aid,we discussed opioid experienced patients,dr talked about tramadol patients that could be appropriate for Butrans.I asked dr if he see's a lot of these patients? dr said yes.I asked dr if he would be willing to start a couple of these patients on Butrans to gain some clinical experience with Butrans? dr said yes he will do that,dr asked about medicaid coverage for Butrans? I talked to dr about PA for Butrans,focused dr on commercial insurance patients.recommended Senokot-S
PPLPMDL0020000001	Parma	OH	44129	2/13/2012	Spoke with new pharmacist, Jennifer, & introduced Butrans to her. She said she used to dispense a lot of it at the last store location she worked at but has not seen very much activity on it at this store. Reviewed appropriate patient type, focusing on patients taking tramadol or Vicodin around-the-clock chronically. Also discussed ability to take supplemental analgesia If necessary. Gave her new OxyContin savings cards & reviewed eligibility.
PPLPMDL0020000001	Parma	OH	44129	2/13/2012	I stopped Dr Moysaenko in the hallway by handing him a new Butrans initiation/titration guide. I showed him how this guide & the initiation tool can be used to figure out the appropriate starting dose of once weekly transdermal Butrans for a patient. He stopped to look at the tool. Discussed appropriate range of patients, including OxyContin as an option for appropriate patients beyond Butrans. I asked if he felt patients taking short-acting around-the-clock opioids chronically may like the option of a once weekly patch. He asked about insurance coverage. Showed him formulary grid & asked him to focus on commercially insured patients who could take advantage of the savings program. He said he would look at the guide in more detail & added that he actually does have a few patients who he thinks would be good candidates for Butrans. He then walked into a room.
PPLPMDL0020000001	Beachwood	OH	44122	2/13/2012	Reminded Dr Myton-Craig of our previous Butrans discussion when I introduced it to her. She said she remembers somewhat. Reviewed core messages & showed initiation guide pg 6 to help demonstrate appropriate patient type/range. Discussed OxyContin as an option for appropriate patients beyond Butrans. Discussed ability for patients to take supplemental analgesia with Butrans if necessary & reviewed titration. She asked where the patient would put the patches. Showed application sites. She asked what insurances would pay for Butrans & asked about BWC. Let her know that BWC is paying for Butrans currently & that it is covered on commercial insurance plans. I asked if she thought a once weekly medication for this patient type we discussed would be something she would be able to use in her practice. She said possibly & asked if she could keep the initiation guide to review in more detail.
PPLPMDL0020000001					



PPLPMDL0020000001	Cleveland	OH	44102	2/13/2012	i talked to Vince,Pharmacist,about how HCP's are writing OxyContin and asked what he's seeing? Vince said a lot of doctors prescribe OxyContin Q8h but he wont fill that and tells them they have to prescribe OxyContin Q12h,i told Vince that was correct and showed OxyContin FPI 2.6 individualization of dosage,noting the Q12h dosing.i asked Vince if he would ever recommend OxyContin to physicians if a patient was appropriate for a long-acting opioid? Vince said no he wont do that its up to the HCP's.we discussed formulary coverage and confirmed stocking.i asked Vince if there are any appropriate patients for Butrans looking at initiation guide? Vince said there are a lot of patients that are potentially appropriate for Butrans.i asked Vince to give patient info booklets to those patients so they can talk to their HCP's,vince said he will do that.we discussed formulary coverage focus on commercial insurance patients.recommended Senokot-S
	Cleveland	OH	44121	2/13/2012	Window call...reminded doc of the appropriate patient type for butrans as one coming for a dose adjustment on tramadol or hydrocodone for their moderate to severe pain. Provided formulary grids for butrans and oxycontin and explained that most of his medicare patients can get oxycontin at a preferred tier 2 copay. Nothing learned. Gave invites to speaker programs.<font color=blue><b>CHUDAKOB's query on 02/22/2012</b></font>If this is an OxyContin core, why is the majority of your call Butrans related. You marked a primary OxyContin, but your notes suggest a primary Butrans.<font color=green><b>SIMERTOC's response on 03/05/2012</b></font>i talked about both products.<font color=blue><b>CHUDAKOB added notes on 03/07/2012</b></font>Your call notes suggest you sold Butrans and mentioned OxyContin and yet marked a Butrans primary on an OxyContin core. With only 20 OxyContin cores, it is important that your primary calls are correct for the physician you are calling on. Thanks Charmaine!
PPLPMDL0020000001	Cleveland	OH	44106	2/13/2012	i talked to dr about appropriate patients for OxyContin,showed visual aid,and asked dr at what point is OxyContin appropriate? dr said when patients have tried all short-acting opioids and still have persistent pain then he'll consider a long-acting opioid.dr said he writes all strengths of OxyContin and knows everthing he needs to know about it.i showed dr conversion guide and we discussed dr starting patients on OxyContin 10 and 15mg,converting from short-acting opioids.i asked dr if he would be willing to start a couple new patients on OxyContin 10mg or 15mg Q12H this week? dr committed to this.i showed dr Butrans initiation guide,asked dr if he see's patients in the dosage ranges for the short-acting opioids listed in guide? dr said yes a lot of patients taking tramadol that he refills monthly.i asked dr if he would consider Butrans as an option for a couple patients taking tramadol but not controlled and needing a medication adjustment? dr said yes he will consider that.focused dr on commercial insurance plans,dr asked about medicaid coverage as thats majority of patients here.we discussed PA for medicaid patients and Butrans.
	University Hts	OH	44118	2/13/2012	I reviewed the appropriate butrans positioning and asked if he has patients that come in for a dose adjustment on their tramadol or vicodin. He said they all want more. I asked him to try just one of those patients on butrans and give them a savings card and they can get a trial month. He said that might help. I gave him a formulary grid and he asked about BWC. Confirmed that it is covered on BWC. Gave another program invite.
PPLPMDL0020000001	Cleveland Hts	OH	44118	2/13/2012	Spoke to Saurab about the stocking of butrans. He said he still does not have it as he has not seen any scripts. I explained the positioning of butrans and asked if he would ever make any suggestions for a long acting opioid like butrans for patients taking hydrocodone ATC. He said not unless customers ask about something else. I explained the commercial plans and the savings cards. He sid he does see much oxycontin either, only a few regular customers.
	Lyndhurst	OH	44121	2/13/2012	Spoke to Jim about the stocking of butrans. He confirmed that they have it but he doesnt see to much of it. He said maybe the other pharmacists have filled more of it. He asked who is prescribing it - pain docs or primary care. I explained that pain mgmt has been prescribing and trying to get more PCPs to prescribe. I discussed the positioning after tramadol and before vicodin ATC. He asked what insurances are covering butrans. I reviewed the butrans formulary grid and the savings cards and relay health.
PPLPMDL0020000001	Cleveland	OH	44106	2/13/2012	dr said he's not started anyone on Butrans but knows its available and is an option.i asked dr who is the appropriate Butrans patient? dr said patients taking a couple pills of short-acting opioid daily for chronic pain,not controlled.i showed dr patient case study,emma,we discussed emma and i asked dr if he would consider starting this patient on Butrans after tramadol? dr said yes if insurance covered it.dr asked about medicaid coverage for Butrans,we discussed PA for medicaid patients and Butrans and i focused dr on commercial insurance patients. i asked dr if he will start 2 new patients on Butrans this week,per our conversation? dr committed to do this.recommended Senokot-S
	Cleveland	OH	44106	2/13/2012	worked amr dept-see call notes on HCP's, worked family medicine and internal medicine-left Butrans initiation guide,BUP3015,patient info booklet,dinner program invitations and my business card for dr marsh and dr truxan in family medicine and the 5 Chief Residents in Internal medicine and Dr.Armitage.
PPLPMDL0020000001	Beachwood	OH	44122	2/13/2012	Spoke with nurse, Donnie, reviewing Butrans core messages/discussions we have had & asked him what Dr Warren has said about it. Donnie said he asked for me to come back on a Friday after 3 to discuss Butrans further. I agreed & asked Donnie to give Dr Warren a Butrans dinner invitation & ask him to attend. Donnie said he would give it to him but was not sure if he would attend. I let him know this would be a good opportunity for him to learn more about Butrans from other physicians & area experts. Donnie said he would see what he could do. OxyContin favorable Part D formulary coverage reminder.
	South Euclid	OH	44121	2/13/2012	Window call....i reminded doc that she said she treats low back pain and OA. i asked her if she would try butrans again for a patient that may not be controlled on vicodin or if they are coming in for a dose adjustment. She said she really does not know if she has the right patients. I gave a formulary grid reminder and invites to the upcoming speaker program.<font color=blue><b>CHUDAKOB's query on 02/22/2012</b></font>She said she doesn't know if she has the right patients. This seems to suggest that she does not know who the right patients are... even if you told her many times.<font color=green><b>SIMERTOC's response on 03/05/2012</b></font>i have told her many times.<font color=blue><b>CHUDAKOB's query on 03/07/2012</b></font>Please re-read my query. Because you told her many times does not mean she remembers even once. Are you suggesting that because you told her she should remember? I am a little confused by your response?<font color=green><b>SIMERTOC's response on 03/15/2012</b></font>i'm not understanding your query. I'm not sure what you are asking me.<font color=blue><b>CHUDAKOB added notes on 03/16/2012</b></font>i am suggesting that perhaps your call should focus on clarifying who she feels are the right patients for Butrans, since she feels she doesn't have them. If indeed she doesn't have them, then why are you calling on her?
PPLPMDL0020000001	Cleveland	OH	44106	2/13/2012	dr said he started 2 of dr hayeks patients on Butrans,i asked dr why he chose Butrans? dr said patients were maxed on tramadol and wanted more pills so dr talked to patients about Butrans and patients were willing to try it.dr said this was recently so no feedback yet.we talked about initiation and titration of Butrans and i asked dr if he would start more patients like this,this week,on Butrans? dr said yes he will.dr asked about medicaid coverage,if there have been any changes? i talked to dr about PA for medicaid patients and Butrans,focused dr on commercial plan patients.recommended Senokot-S
	Cleveland	OH	44113	2/13/2012	i showed dr patient case study,Emma,asked if Butrans would be appropriate for this patient? dr said yes she would consider Butrans there but hasnt had any patients be willing to try a patch.dr said these patients want vicodin or percocet after tramadol fails.i asked dr how is she describing Butrans to patients? dr said she tells them its a once a week patch for their chronic pain.dr said most patients still want their pills only,not even trying a patch.we talked about the initial trial offer/\$40 patient savings card program and i asked dr if she will see 2 commercial insurance patients this week,looking like Emma,that she can start on Butrans? dr said shes,did her best and see who comes into the office.i asked dr when i should follow-up with her to hear about these 2 patients getting started? dr said within 1-2 weeks i could follow-up.recommended Senokot-S
PPLPMDL0020000001	South Euclid	OH	44121	2/13/2012	Quick call....i reminded doc of the once weekly dosing, CII status, and patient type. I asked what his experience has been prescribing. He said that patients complained of the cost. I reviewed the coverage with commercial plans and the savings cards. He said he believe the one patient was medicare. Left a formulary grids for butrans and oxycontin and invites to the coming speaker programs.
	Parma	OH	44129	2/13/2012	Dr Taylor said she tried to prescribe Butrans for a new patient but they were unable to get it. She added that the patient had a managed Medicare plan. Reminded her where Butrans is covered & showed formulary grid. I showed her Butrans patient profiles for Emma, Jessica, & William, & told her there are three different patient types who she may find appropriate for Butrans, asking her not to limit it to only new patients as she has told me she is doing. I told her it seems she finds value in Butrans. She said she does & she likes the transdermal technology & once weekly dosing. I reviewed the profiles with her & asked which of the patients she would say she sees most often. She said probably the "Emma" patient would be the one where she would try Butrans. She added that once a patient starts taking oral pain medications, they do not want to "give that up". I reminded her of the ability for patients to take supplemental analgesia with Butrans. I asked how she usually prescribes tramadol when she starts a patient. She said TID. I asked if patients often return asking for an increase in dose/dosing interval. She said yes. I let her know that is a potential Butrans patient. Showed her how patient information booklets can be used in patient counsel & described new patient savings/trial program. I asked if she feels that she has more Butrans patients now. She said yes & added that she really likes the idea of Butrans. Discussed OxyContin managed care coverage.
PPLPMDL0020000001	Cleveland	OH	44106	2/13/2012	i talked to dr about what she looks for in her chronic pain patients that she's considering making a medication adjustment? dr said if patients are controlled on their short-acting opioids and controlled,theres no adjustment needed just a refill,but if they are complaining their opioid isnt controlling the pain,she will prescribe another short-acting opioid.i asked dr at what point does she consider a long-acting opioid appropriate? dr said she will consider a long-acting opioid when all short-acting opioid options have failed.i showed dr patient case study,emma,asked if she would consider Butrans for this type of patient? dr said she would consider if insurance pays for Butrans,dr focused on medicaid patients.we talked about PA for Medicaid patients and Butrans,i asked dr if she'll see 2 new patients this week that are appropriate for Butrans that she can start? dr said she probably will and will consider Butrans.recommended senokot-S
	Parma	OH	44129	2/14/2012	Introduced myself & Purdue's products to Dr Khoobali. He said he & his staff were just talking about finding a Purdue rep & asked me how I found out about him. I told him I saw that he & his NP registered for the upcoming Butrans dinner program. He said this is correct & that he is looking forward to learning more about Butrans at the dinner. I presented core visual aid & reviewed core messages. He said that he is a cardiology & internal medicine physician. I asked if he treats patients for pain. He said he does, when appropriate. He said he is comfortable treating patients for pain because he is meticulous about documenting everything. I agreed that documentation is imperative when treating patients. Briefly discussed overview of appropriate patient type, focusing on those who take chronic tramadol or Vicodin around-the-clock. He said he actually has a few patients in mind but would like to attend the dinner before changing anyone's medication.
PPLPMDL0020000001	Cleveland	OH	44104	2/14/2012	i talked to dr about appropriate patients for Butrans,showed visual aid,dr talked about his percocet patients that could be appropriate but asked if medicaid is covering Butrans? we talked about PA criteria for these patients,dr said he will consider trying a couple patients on Butrans as he does PA's for every other drug Caresource requires.i showed dr OxyContin visual aid,we discussed appropriate patients and dr said he thinks OxyContin is a good drug and appropriate for some patients,dr said its usually after percocet doesnt control pain he will consider OxyContin.we discussed 7 tablet strengths and i asked dr if he will start a couple new OxyContin patients this week,focusing on his CCRX patients and showed formulary grid? dr committed to this.recommended senokot-S
	Parma	OH	44129	2/14/2012	Dr Roheny asked me if he told me last time that he prescribed Butrans. I told him he had not told me that & asked if he did prescribe it. He said no, but he thought he told me he did. He said that because I was not in for one week, he forgot. I reminded him that he had told me that he did have patients who would be appropriate for it & that he did want to prescribe it. He said he cannot prescribe it for Medicare patients. I told him that the coverage is favorable with commercial insurance patients, so for the least push-back, he should focus on appropriate patients, such as those who take Vicodin or tramadol chronically around-the-clock with private insurance. He then got an emergency call from the hospital. Spoke with Terry (MA) & discussed OxyContin formulary coverage, focusing on Medicare plans.
PPLPMDL0020000001	Parma	OH	44129	2/14/2012	Spoke with Laurie, pharmacist, & reviewed Butrans appropriate patient type. She checked the shelf & said they do not actually stock it at this time due to lack of activity. Discussed new trial/savings program & eligibility & went over e-voucher for Target customers. Also gave her a new package of OxyContin savings cards.
	Parma	OH	44129	2/14/2012	Presented Butrans patient profiles & told Dr Paat that there are three different places where he could use Butrans for appropriate patients. Went through patient profiles of Jessica, Emma, & William & reviewed Butrans indication. I asked if any of these patients sounded like those who he treats in his own practice. He said he does have a few. He asked if patients could take fentanyl with Butrans. Showed initiation guide pg 6, explaining patient type & range, including OxyContin as an option for patients beyond Butrans. I told Dr Paat that patients can take immediate release opioids or non-opioids with Butrans. He said a lot of his patients, who fit the description of the right patient have Medicare insurance. I told him I understand that coverage can be an issue & asked him to focus on patients who have private insurance. I asked if he has patients in their 50's who have chronic low back pain. He said he does. I suggested that he may find that Butrans is an appropriate option for some of those patients. He said he thinks Butrans sounds like a good medication & he would like to try it.
PPLPMDL0020000001					Discussed new trial/savings cards. He asked if buprenorphine is also used to treat opioid dependence. I told him that Butrans is only indicated for pain. Reviewed OxyContin favorable Medicare coverage.

	Parma	OH	44129	2/14/2012	Reviewed Butrans core messages with Dr Tolentino. Spoke with Kathy (MA) beforehand & she told me that Dr Tolentino has many patients who Butrans would be appropriate for. I showed Butrans patient profiles of Jessica, Emma, & William & explained that there are three different patients types who may be candidates for Butrans. After reviewing each profile I asked Dr Tolentino if any of these sounded like her patients. She said she does have many patients like that, mostly like Emma & William. I asked her to think of one specifically & tell me about him/her. She said she has a male patient taking Vicodin month after month. I asked her how many times per day he takes it. She said 4 times per day. Presented new initiation/titration guide & pulled out initiation tool, showing her how to use it to figure out the recommended starting dose for Butrans based on what the patient is already on. Also discussed OxyContin as an option for appropriate patients beyond the range for Butrans. Discussed titration & ability for patients to take supplemental analgesia. Also gave new trial/savings cards & explained eligibility requirements. I asked if the patient she was thinking of had commercial insurance. She said yes. I asked how often she sees this patient. She said he comes in monthly just for his Vicodin prescription. I asked her to write Butrans for this patient when he comes in next time & she agreed to do this. Spoke with Kathy, who said she would help remind Dr Tolentino when he comes in
PPLPMDL0020000001	Parma	OH	44129	2/14/2012	Myra said that she registered herself & another PA for the upcoming dinner program for Butrans. Reminded her of our previous discussion when she expressed interest in prescribing Butrans & learning more about it. I asked if she had gone over any of the information I gave her during my last visit. She said she has not yet. Reminded her of Butrans core messages & appropriate patient type. She said she thinks she will have many patients who could benefit from Butrans & is interested in speaking with other area practitioners & experts to find out how they are using it. She suggested I schedule a lunch to discuss Butrans further & in more depth. I scheduled first
PPLPMDL0020000001	Cleveland	OH	44127	2/14/2012	I talked to dr about her patients taking tramadol and codeine every month for their chronic pain but not controlled,dr said she has a lot of patients like this,i showed dr Emma,patient case study and asked dr if she would consider Butrans for this patient? dr said yes,dr asked how did she write the Butrans script,i showed dr initiation guide and asked dr if she had a couple patients in mind to start on Butrans? dr said yes she has a few patients she would like to start dr asked about medical coverage,we discussed PA for caresource patients,dr said she will start a few patients this week and asked me to follow-up next week.i told dr that was great i would see her then and showed dr Butrans patient info booklet,focused dr on application sites and rotation of Butrans section and asked dr to give 1 booklet to each patient she starts on Butrans,dr said ok she will do that.recommended
PPLPMDL0020000001	Euclid	OH	44132	2/14/2012	Quick call. I asked doc if he has patients taking tramadol monotherapy. He said that he does. I asked him to prescribe butrans for those patients that are coming in for a dose adjustment to their tramadol. I explained the initiation dosing for <300mg of tramadol and the dose for > 300mg of tramadol. He said he might be able to make the 2/29 program at flemings.
PPLPMDL0020000001	Cleveland	OH	44103	2/14/2012	dr said she wants to start more patients on Butrans but Medicaid hasn't been approving it so she stopped starting patients,we talked about PA requirements for Caresource patients and Butrans,i asked dr if she had any Caresource patients that she felt were appropriate to start on Butrans? dr said majority of the patients are Caresource,dr said she will see a few patients this week and see if the PA gets approved by Caresource.i told dr that was great and was looking forward to hearing more about those patients next time i see her.i asked dr if she had 5 new patient starts that i could leave 5 patient info booklets for her to give them? dr said yes i leave them.
PPLPMDL0020000001	Cleveland	OH	44124	2/14/2012	Quick call...i reminded doc that the new oxycontin savings cards are now good until the march of 2013 for commercially insured patients. I showed the formulary grids for CCRX and medicare plans and explained that most of his medicare patients can get oxycontin at the lowest branded co pay and that those patients may pay as little as \$5.00 for their prescription. He said as long as there is no PA. I asked him prescribe for those patients. Gave him a program invite.
PPLPMDL0020000001	Cleveland	OH	44130	2/14/2012	Spoke briefly with Dave, pharmacist/pharmacy manager, & shared with him the details of the new Butrans trial/savings cards. Also discussed automatic savings through e-voucher for CVS customers. I asked Dave if they still stock the 10mcg strength of Butrans. He checked the shelf & said they now have all three strengths. Gave him new OxyContin savings cards & discussed eligibility requirements.
PPLPMDL0020000001	Cleveland	OH	44130	2/14/2012	Dr Fedorko said he has not had any new Butrans patients lately. I showed him his new Butrans trial/savings cards, reminding him of eligibility requirements. He stopped & said he did actually give Butrans to someone in Avon Lake recently but he added that he doesn't know if the patient was able to get it. He said he will keep looking for patients & walked into a room.
PPLPMDL0020000001	Cleveland	OH	44114	2/14/2012	dr said she started another patient on Butrans,i asked dr why she chose Butrans? dr said patient was taking vicodin every day,not controlled and still in pain asking for more pills so dr wanted to try Butrans? i asked dr if she see's patients like this every day? dr said usually every day,i asked dr if she would consider Butrans as an option for these patients and start a couple more patients this week on Butrans?dr said yes she will,focused dr on BWC
PPLPMDL0020000001	Berea	OH	44017	2/14/2012	Quick call. I asked Dr if he had a chance to start 5 patients on Butrans trial to get their feedback, he said he has not but he was out of town last week. I asked him to come to our upcoming dinner program and he said he will
PPLPMDL0020000001	Cleveland	OH	44114	2/14/2012	I asked dr how often he's seeing patients taking hydrocodone for their chronic pain? dr said every day,i asked dr if he would consider Butrans for these patients if appropriate? dr said yes he will but right now he's focused on percocet patients,i showed dr OxyContin conversion guide and we discussed potency of oxycodone and hydrocodone,dr said he knows this info and appreciates me sharing this with him but right now he's going to continue focusing on patients taking percocet that aren't controlled to start on Butrans.i told dr that was great and i appreciated his continued business,focused dr on BWC patients and asked dr if i have his commitment to start more patients on Butrans this week? dr said yes,we recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	2/14/2012	I talked to dr about his renally impaired patients and how Butrans could be an option for them,dr said he knows this information and has a diabetic patient with renal impairment that he started on Butrans and patient is still on Butrans doing well. I asked dr if he will continue prescribing Butrans for these patients? dr said yes he will,i asked dr if i can count on him to continue prescribing Butrans for patients? dr said yes.
PPLPMDL0020000001	Cleveland	OH	44113	2/14/2012	showed dr Emma,patient case study,asked dr if he see's patients like this in his practice? dr said yes all the time he has a lot of patients taking tramadol for their chronic pain,i asked dr if he would consider Butrans an option when patients like Emma need a medication adjustment? dr said he will consider it and has been giving booklets out,dr asked about caresource coverage for Butrans as that's majority of his practice,we talked about PA requirements for Caresource and Butrans,asked dr if he had a couple patients in mind that he could start this week on Butrans? dr said yes he does and he will start some patients.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44103	2/14/2012	showed dr Emma,patient case study,asked dr if he's seeing patients like this? dr said yes every day,i asked dr if he's considering Butrans when these patients need a medication adjustment? dr said he's given a few booklets out but that's it,i asked dr if he'll see 2 patients this week that he could hand a booklet to and also start on Butrans? dr said he probably will but depends on patients being willing to try a patch and if insurance will cover Butrans,dr asked about medical coverage for Butrans? we talked about PA requirements for Butrans and Caresource.
PPLPMDL0020000001	Cleveland	OH	44114	2/14/2012	i talked to John,PA,about patients he's starting on Butrans,John said they are mainly patients taking percocet every day that aren't controlled and are asking him for more pills,he and dr marshall are stopping and not refilling percocet but starting them on Butrans,i asked john if he would consider any patients appropriate that are taking hydrocodone daily for their chronic pain but not controlled? John said yes but right now they are focused on percocet group,he will consider hydrocodone patients at some point,focused John on BWC patients and asked John if i have his commitment to start more patients on Butrans this week? john said yes,we recommended Senokot-S
PPLPMDL0020000001	Westlake	OH	44145	2/14/2012	Quick call in Lorain, I asked if he has been happy with the results he has seen with Butrans, he said he has. I reminded him to give his commercial patients a one month trial of Butrans with the cards. I invited him to our upcoming dinner. Reminder that OxyContin is covered on Med D.
PPLPMDL0020000001	Cleveland	OH	44130	2/14/2012	I reminded Dr Diab how he told me that he had given a Butrans card/prescription to a patient recently. I asked if he remembered what it was clinically about that particular patient/case that made him choose Butrans for him/her. He said he remembers but is too busy to talk today. Gave him a Butrans program invitation & OxyContin formulary grid.
PPLPMDL0020000001	Cleveland	OH	44143	2/14/2012	I reviewed that butrans positioning and shared that profiles of Emma and William. Doc said he would more likely prescribe butrans for patients like Emma - taking tramadol. I asked how high he would titrate. He said 200, 300, or 400mg, it depends. I showed him the initiation dosing. He said the problem is this senate bill 93 that is impacting the number of narcotics they can write. He said they will continue to write it and then left to take a conference call.
PPLPMDL0020000001	Cleveland	OH	44127	2/14/2012	dr said he likes idea of Butrans being a patch and once weekly dosing option for his patients but he is concerned with medical coverage.dr asked about caresource coverage for Butrans? we talked about PA requirements for Caresource patients and Butrans.i asked dr if he has patients who take Tylenol with Codeine for their chronic pain but aren't controlled? dr said yes he has a lot of those patients.i asked dr to think of 2 patients this week that are appropriate for Butrans, that he can start this week,dr said he will do that.i showed initiation guide and how to write the Butrans script.i asked dr if this seemed easy to do? dr said yes and he will see who comes in this week and will start a couple patients.recommended Senokot-S
PPLPMDL0020000001	Mayfield Village	OH	44143	2/14/2012	I showed Joanna the Emma patient profile and asked if she has similar patients taking tramadol as monotherapy. She said she does. I explained that those may be good candidates for butrans instead of titrating tramadol. I showed her the appropriate starting doses. She asked if there are new discount cards. I explained the trial month with the new cards and the potential \$40 savings after that. She said she has a patient that she might start on butrans. The male patient is currently taking tramadol and some of his mother's percocets. (?) She said this patient needs more than tramadol but she does not want to give him percocet or vicodin. She confirmed that he has commercial coverage.
PPLPMDL0020000001	Westlake	OH	44145	2/14/2012	Quick call with Kyle as they were very busy, I reviewed the medication guide for Butrans and if she or her patients have had any questions, she said no she understands everything. We reviewed that Butrans and OxyContin have savings programs and Butrans has a month trial.
PPLPMDL0020000001	Cleveland Hts	OH	44118	2/14/2012	Quick call....i asked doc if he is still having good results with butrans. He said he isnt having any problems and he is trying to write it. I asked him about his RSVP to the speaker program and wanted to confirm that he is coming to the program on 2/16 in Rocky River. He said he had his staff fax in the invite(s) that I gave him and he does know if he can make the that one but wanted reminding about the one on 2/29.
PPLPMDL0020000001	Euclid	OH	44117	2/14/2012	Doc said he is basically refilling patients on oxycontin as most of his patients see Dr. Mofawad. I explained that preferred tier 2 coverage for medicare patients that have AARP, CCRX, and Silverscript and that many of those patient can get oxycontin for as little as a few dollars. He asked what's up with Butrans. I reminded him that he said he has patients taking tramadol monotherapy. I asked him to prescribe butrans for those tramadol patients coming in for a dose adjustment. I invited him to the speaker programs. He was interested in when Moufawad was speaking but the Wednesday event 2/29 was more convenient and fits into his schedule. He said
PPLPMDL0020000001	Cleveland Hts	OH	44118	2/14/2012	I reviewed the butrans patient type and the CIII, once weekly selling messages. I asked him if he has any patients taking just tramadol for their chronic pain. He said sure. I explained that they may be an appropriate butrans patient. I reminded him fo the upcoming speaker program on 2/29. He said he will attend. I explained how to register. He asked if she can bring his wife as she is a physician. I told him he could as long as she is a physician, NP, or PA.
PPLPMDL0020000001	BEDFORD	OH	44146	2/15/2012	Spoke with Shonda, pharmacist, & reviewed Butrans with core messages. Also discussed appropriate patient type. She said they do not stock Butrans but could order it if necessary. Told her about new trial/savings cards & reviewed eligibility requirements. Also gave her a new package of OxyContin savings cards & explained that savings program.
PPLPMDL0020000001	Cleveland	OH	44106	2/15/2012	dr said he's not started anyone on Butrans because he only has a few patients he has on narcotics but he likes the idea of Butrans being a once weekly patch.dr asked about dosage ranges again for appropriate patients,i showed dr initiation guide,we discussed initiation and titration and i asked dr if he will at least see 1 patient over the course of this and next week,that he can start on Butrans? dr said he might but has to see who comes in, but he will consider Butrans if appropriate.dr asked about insurance coverage,focused on caresource,we discussed PA for Caresource patients and Butrans and we discussed initial trial offer/\$40 patient savings card program for commercial insurance patients, recommended Senokot-S
PPLPMDL0020000001	Warrensville Heights	OH	44122	2/15/2012	Re-introduced Butrans to Dr Gulati. He said he remembers reading about it. I asked what he remembers about Butrans. He said not a lot. Reviewed core messages. Presented 3 patient profiles, telling him there are 3 different patients types who he may find Butrans appropriate for. After reviewing these with him, I asked if he sees patients like these in his practice. He said he does. He added that he does refer some to pain management, but he does have patients on OxyContin 40mg q12h. Presented new initiation guide & showed him Butrans appropriate range, showing him that a patient on 80mg per day of oxycodone would be out of the range for Butrans. I asked if he has patients on the more "moderate" side. He said he has some. Discussed dosing & ability for patients to take supplemental analgesia with Butrans if necessary. He asked about insurance coverage. Discussed focusing on commercially insured patients who can take advantage of the new trial/savings program. Showed him the cards & discussed eligibility. I asked if he would prescribe Butrans for appropriate patients like the types we discussed today & he agreed. Discussed OxyContin q12h as an option for patients who are taking oxycodone immediate release around-the-clock for an extended period of time. I asked what his thoughts were on using long-acting opioids. He said he likes them for patients on opioids for a long time. I asked if there is a specific time limit- he said no.
PPLPMDL0020000001					

	Parma	OH	44134	2/15/2012	Dr Hernandez showed me that he was all out of the new Butrans trial/savings cards that I had given him. I asked him if he has had any additional issues with them since our last conversation. He said no & that they have worked for everyone else he has given them to. I asked him to tell me a little bit about the last patient he started on Butrans. He said this patient had been taking Suboxone & is now doing well on Butrans. He went on to say that he has the patient on one 20mcg patch plus 3/4 of another 20mcg patch. I reminded him that 20mcg is the maximum dose recommended & also that cutting patches is not recommended. He said he knows. Dr Hernandez said the only trouble he has had in prescribing this way is with pharmacists. I asked what he meant. He said he gets called back from the pharmacist telling him he can't prescribe that way & that it is "too soon" for patients to get additional patches. I asked what he does when this happens. He said he explains that the patient was getting a much higher dose of buprenorphine on Suboxone & therefore taking more than 20mcg of Butrans should not be a problem. He said they usually fill the prescription at that point, but he has run into situations where they will not fill it. I told him again that 20mcg is the highest recommended dose. Discussed OxyContin for appropriate patients beyond Butrans range & gave him new savings cards, explaining eligibility requirements.
PPLPMDL0020000001	Cleveland	OH	44122	2/15/2012	Re-introduced Butrans to Dr Rastogi, reviewing core messages. He said he is familiar with buprenorphine but in much larger doses. He added that he thinks a once weekly transdermal form of it for pain is interesting. Discussed abuse & addiction potential due to mu opioid receptor activity. Presented each of the 3 patient profiles, letting him know that there are 3 different patient types that he may find Butrans appropriate for. I asked Dr Rastogi if these sounded like patients in his practice. He said yes. Discussed Butrans dosing & gave him new initiation guide with tool & showed him how to use it. Discussed ability for patients to take supplemental analgesia with Butrans. He asked about insurance coverage. Discussed focusing on commercial insurance patients & presented new trial/savings program. He said to give the cards to his nurse, Kim. I asked if he would prescribe Butrans for appropriate patients like the ones we discussed & he agreed. Discussed OxyContin as an option for patients beyond Butrans range.
PPLPMDL0020000001	Westlake	OH	44145	2/15/2012	In-service with nurses and nursing students day shift on 3 north and south (Med/Serg) I reviewed the key messages for Butrans, application sites, use of supplemental analgesia and side effects. We reviewed the patient medication guide, and appropriate patients types using the initiation tool. We discussed what to do if the patch starts to come off per the FPI, we reviewed the OxyContin conversion guide and that OxyContin is a Q12hr option with 7 tablet strengths. We discussed that OxyContin is only indicated for Q12hr dosing and anything other than that would be off label. I spoke with Jennifer Fleming in the medical education department and she would like to have a LEL program in the fall for the new students and residents.
PPLPMDL0020000001	Lyndhurst	OH	44124	2/15/2012	Quick call...I asked doc if he sees any benefits to a transdermal for the treatment of pain. He said it's still a narcotic and he thinks all narcotics are being overused. I explained that they are not for everyone and the butrans might be appropriate for patients taking tramadol 2-3 times per day.
PPLPMDL0020000001	Mayfield Hts	OH	44124	2/15/2012	I asked doc if he has any patients that may be taking tramadol monotherapy 2-3 times per day. He said "some". I asked him to try those one of those patients on butrans the next time they come in for a dose adjustment to their tramadol. He asked about coverage. I showed him the formulary grid and told him about BWC coverage similar to oxycontin on BWC. He said he has a workers comp patient that he can probably try. I explained why commercial patients should get a savings card.
PPLPMDL0020000001	Cleveland	OH	44104	2/15/2012	I showed dr patient case study,emma,asked dr if she treats patients like this? dr said yes but she only has a handful of patients taking narcotics for pain and most of them have acute pain so they dont meet the Butrans indication.I agreed with dr and asked if any of these patients like emma ever need a medication adjustment? dr said yes that does happen but dr said if patients have chronic pain she will send them to pain management.dr said she will keep Butrans in mind as an option before she sends patients to pain management because she likes the idea of a once weekly patch option with Butrans.we talked about PA for Caresource patients and commercial insurance patients trying initial trial offer/\$40 patient savings card program.dr said ok she'll keep it in mind.
PPLPMDL0020000001	Cleveland	OH	44104	2/15/2012	I talked to dr about her patients that look like William,patient case study,dr said she see's patients like this all day but there arent a lot of patients willing to try a patch for their pain,dr said thats her battle and she has a lot of medicaid patients we talked about dr giving patients the Butrans patient info booklet to educate patients,dr said that does help and she will continue giving those to patients she feels are appropriate.I talked to dr about PA for Caresource patients and Butrans,dr said ok she will see if she can start a few Caresource patients.I asked dr if he will start 2 new patients between today and next week when I see her for lunch.dr said she cant promise anything but she'll do her best and will see who comes into the office.recommended senokot-5
PPLPMDL0020000001	Bedford	OH	44146	2/15/2012	Spoke with pharmacy manager, Oleg, & discussed the details of the new Butrans trial/savings program. He said he still has not seen any prescriptions for Butrans but is ready to order & thinks it is a good option for patients. Also discussed new OxyContin savings cards & reviewed eligibility requirements for all savings cards. Oleg said he thinks most of his OxyContin patients have Medicare, but he wanted to keep cards on hand just in case.
PPLPMDL0020000001	Westlake	OH	44145	2/15/2012	Saw Dr in hospital on 3N, I let him know that I was educating the nurses on Butrans and OxyContin. I invited him to our upcoming Butrans dinners and he said he will check his calendar.
PPLPMDL0020000001	Cleveland	OH	44106	2/15/2012	I asked dr who is the appropriate Butrans patient in your mind? dr said patients taking low dose oxycodone,morphine,tramadol,hydrocodone,dr said he has a few patients on Butrans and they are doing well.I asked dr how often he see's patients that are taking the short-acting opioids he mentioned? dr said all the time but there are various factors involved when deciding to make a medication change.dr said medicaid is the biggest challenge here at main campus as they haven't been approving Butrans.I talked to dr about PA for Caresource patients and asked dr if he would consider starting a couple new patients on Butrans over the course of this and next week? dr said yes he will.I talked to dr about OxyContin being an option for his medicare patients,focused on CCRX,dr said ok good to know
PPLPMDL0020000001	Cleveland	OH	44109	2/15/2012	worked family medicine - left attending HCP's and residents butrans initiation guides,patient info booklets,BUP3015 clinical trial,formulary grids and my business card. worked oncology - left OxyContin fpi,conversion guide,Butrans FPI,initiation guide and my business card for dr snell,dr hergenroeder and dr o'brien-medical sect takes info and I requested an appt with doctors,have to wait for doctors approval
PPLPMDL0020000001	Cleveland	OH	44104	2/15/2012	dr said he's given a few booklets out but not started anyone on Butrans because he cant get medicaid to approve Butrans.we talked about PA for Caresource patients and Butrans,dr said that seems reasonable and he will see if he can start a few patients on Butrans. I asked dr if he has a few patients coming in this week,looking like william,patient case study,that need a medication adjustment where he could start them on Butrans? dr said yes he will probably see patients like this.I asked dr if he would start 2 patients on Butrans between today and next week when I see him again? dr said he will do that.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44104	2/15/2012	showed dr patient case study,Emma,dr said he has older patients in his practice and some of them take tramadol,he thinks Butrans would be a great option after tramadol but he cant get medicare to cover Butrans.I talked to dr about focusing on commercial insurance patients that look like Emma where he could start on Butrans.dr said ok he will do that but he only see's these patients a couple times a month. I asked dr if he would consider OxyContin as an option for those medicare patients that are ready for a long-acting opioid? dr said yes he would.I showed OxyContin formulary grid,we discussed UHC/AARP and CCRX patients,dr said ok he does prescribe OxyContin but more so for his nursing home and hospice patients.I asked dr if he will start a couple new patients on OxyContin over the course of this week and next? dr said yes he will.recommended senokot-5
PPLPMDL0020000001	Cleveland	OH	44130	2/15/2012	Spoke with Sally, technician, & reminded her of previous discussion. Showed her Partners Against Pain booklet discussing medication administration options. I told Sally this is one of the resources Purdue has available that I could do an inservice on for applicable staff/floors. I asked if she thought Stacey would be interested in seeing that example. She said she was not sure but said she would make sure she got it. I also asked her to give Stacey my card & Butrans information. She agreed. I let her know I would return periodically to try to catch Stacey & leave resources/information.
PPLPMDL0020000001	Westlake	OH	44145	2/15/2012	Ran into Dr in the hospital, I let him know I was doing in-services for Butrans and OxyContin on the floors. He asked if I could go see Jennifer and keep her up to date on anything the residents should know about and I let him know that I would stop there. I asked if he would like to have another LEL program for the residents in the fall and he thought it was a great idea. I spoke with Jennifer and will coordinate with her to set up LEL for fall of
PPLPMDL0020000001	Cleveland	OH	44106	2/15/2012	worked apm dept-lunch with resident,fellow and attending HCP's, worked family medicine-left Butrans dinner invitations,initiation guide,patient info booklet and my business card for dr marsh and dr truax
PPLPMDL0020000001	Cleveland	OH	44106	2/15/2012	dr said he's started a few patients on Butrans,I asked dr to tell me a little bit about these patients and why he chose Butrans? dr said they were taking tramadol,not controlled and asking for more pills.dr said he started them on Butrans and it got approved.I asked dr to focus on commercial insurance patients,we discussed initial trial offer/\$40 patient savings card program and dr asked about caresource patients as thats majority here at main campus clinic.we talked about PA for caresource patients and Butrans.dr said that was great he will start more patients on Butrans.I gave dr initiation guide,asked dr if he will start a couple new patients on Butrans over the course of this week and next? dr said yes he will do that.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44114	2/15/2012	i talked to Dave,Pharmacist,about OxyContin and what he see's most prescribed? dave said it varies but could be 10mg-80mg strengths,I asked dave if he see's the 15mg or 30mg prescribed ever? dave said rarely.i showed dave OxyContin conversion guide,we discussed 7 tablet strengths for titration and dave said he would keep the guide for a reference.i asked dave if HCP's ever ask him about conversions? dave said it happens once in awhile.i showed dave OxyContin formulary grid,focused discussion on UHC/AARP and CCRX med d patients and commercial insurance patients for OxyContin.i left dave some patient education brochures on safeguarding their medicines,dave said that was good to leave with him.
PPLPMDL0020000001	Cleveland	OH	44106	2/15/2012	i showed dr patient case study,emma,we discussed patient type and dr said he has a lot of patients like this.I asked dr if he would consider Butrans as an option right after tramadol fails to control patients pain? dr said yes he will.dr said he has started a couple patients on Butrans.we talked about those patients,dr said patients were taking tramadol,werent controlled so he started them on Butrans.I showed dr initiation guide,we discussed initiation and titration of Butrans and I asked dr if he will continue starting patients on Butrans? dr said he will do that.dr asked about medicaid coverage for Butrans? we discussed PA for caresource patients and Butrans,dr said ok he will start more patients.recommended Senokot-5
PPLPMDL0020000001	Maple Heights	OH	44137	2/15/2012	Quick call- Caught Dr Gene at the window. Passed back Butrans dinner program invitations & asked if he thought any of the available dates would work for him. He said he was not sure. I asked him to try to attend one of the programs as it may help him better understand who is & who is not appropriate for Butrans & would give him the opportunity to speak with other area physicians & experts about their experience with Butrans. He said he would try.
PPLPMDL0020000001	Westlake	OH	44145	2/15/2012	Saw Dr in the hospital, I let him know that I was doing in-services on Butrans and OxyContin, I reviewed the OxyContin conversion guide and that it may be a Q12hr option when patients are taking short acting around the clock. he said he will keep it as his station.
PPLPMDL0020000001	Westlake	OH	44145	2/15/2012	Saw Dr in the hospital, I asked if he's been able to start any new patients with the Butrans trial. He has not, I asked if he had just 3 patients to try Butrans on this week with the month trial cards and he said he will try. He said most of his chronic pain patients are Med D. I told him that OxyContin is an option for them. I asked him to come to our Butrans dinner programs he is busy with his kids that night.
PPLPMDL0020000001	Cleveland	OH	44106	2/15/2012	met dr for the 1st time,she's a resident,dr said she didnt know anything about Butrans but couldnt talk long.I showed visual aid,talked to dr about 6 key Butrans selling messages,dr focused on Butrans being a CILL,once weekly dosing option thats transdermal.I asked dr if he felt there would be a place for Butrans in the patients she's treating? dr said yes but she needs to review the information,talk to a couple of the fellows and attendances about Butrans before she really feels comfortable with the medication.I told dr that was fine I understood that and gave dr initiation guide and said I would follow-up next week to answer any questions she may have after reviewing the Butrans FPI dr said ok that was fine.
PPLPMDL0020000001	Bedford	OH	44146	2/15/2012	Dr Moufawwad said he has been putting more patients on Butrans & is having good results. He added that he is prescribing more frequently now & plans to gradually increase his usage as time goes on. He also said that he is going to be prescribing more OxyContin because he heard that people are abusing it less & abusing Opana more. I told him that we have no data to suggest that OxyContin is any less abuseable & asked that he remain as cautious as always in his prescribing. He said he knows there is no data on it because "where there is a will, there is a way" to abuse something if someone wants to. He added that he believes it may be more "work" for patients to abuse OxyContin than other medications. I told him again that there is no data suggesting that. Spoke with Christina (MA) who asked if there is way to extend the savings program. I asked her what she meant by that. She said some of the cards have expired & she asked if they are still usable. I let her know that the savings program has been extended & those cards can be used.
PPLPMDL0020000001	Westlake	OH	44145	2/15/2012	In-service with night shift nurses, 3N and 3S. I reviewed the key messages for Butrans, side effects, opioid experienced clinical trial, dosing, medication guide and proper application and managed care. I reviewed the conversion guide for OxyContin and that it is a Q12hr option.
PPLPMDL0020000001					

PPLPMDL0020000001	Cleveland	OH	44102	2/16/2012	i talked to Nagla,PA,about appropriate patients for Butrans,Nagla said dr carson has started a few patients recently but thats it.we talked about patients taking 1 of the short-acting opioids listed in the initiation guide,and when they need a medication adjustment starting them on Butrans.Nagla said she is always recommending Butrans for these patients but the challenge has been medicaid coverage,specifically Caresource.we talked about the PA for Caresource patients and i asked Nagla if she could think of a couple Caresource patients to start on Butrans this week? Nagla said she will see who comes in this week and suggest to the dr that Butrans be the option.
PPLPMDL0020000001	Parma	OH	44134	2/16/2012	Spoke with floater pharmacist. Reviewed Butrans core messages & discussed appropriate patient type & range. Showed initiation tool & focused on patients taking short-acting opioids around-the-clock chronically. Also discussed e-voucher & new trial program. Also discussed OxyContin savings cards.
PPLPMDL0020000001	Parma	OH	44134	2/16/2012	Spoke with pharmacist, Caitlin, & reviewed Butrans appropriate patient type, focusing on patients taking around-the-clock short-acting opioids chronically. Also discussed e-voucher savings as well as new trial/savings program along with eligibility requirements. Gave her new OxyContin savings cards. She said they do not have a lot of people on OxyContin.
	Cleveland	OH	44109	2/16/2012	i talked to dr about appropriate patients to start on Butrans,dr focused on her percocet patients,i showed dr patient case study,william,and asked if she see's patients like this? dr said yes all the time.i asked dr whats the next step for patients like William that require a medication adjustment? dr said either give a refill,increase the dosage strength or consider a long-acting opioid.we discussed Butrans being an option for her patients like William,dr said that made sense and she will consider that next time she see's patients like this.i asked dr if she'll see 2 patients like William today or tomorrow,that she can start on Butrans? dr said she probably will and as long as patients are willing to wear a patch and insurance covers it,she'll start them on Butrans.dr asked about medicaid coverage,focusing on Caresource? i talked to dr about PA requirements for Caresource and asked dr if that seemed feasible to do? dr said yes.i asked dr if i could follow-up next week to hear about the 2 patients she's committed to start on Butrans? dr said yes that would be fine.i showed dr butrans patient info booklet,we discussed application/rotation of Butrans,i asked dr to give booklets to patients to assist in educating them. dr agreed to do this.recommended Senokot-S<font color=blue><b>CHUDAKOB's query on 02/22/2012</b></font>Amy, this looks like it was a very complete call. You used the visual, you trial closed her, as well as gained a commitment, and you asked for follow-up. Nice job!<font color=green><b>BROOKAM's response on 02/27/2012</b></font><font color=blue><b>CHUDAKOB added notes on 02/29/2012</b></font>Thank you! Use this call as a model for other calls.
PPLPMDL0020000001	Cleveland	OH	44113	2/16/2012	i asked dr what he remembers about Butrans and who are the appropriate patients in his practice? dr said he knows Butrans is for chronic pain,for patients taking a ouple vicodin or percocet but not controlled and is a patch.showed dr visual aid,we discussed opioid experienced patients,dr focused on percocet patients,i asked dr if he see's patients that take percocet daily for their chronic pain but arent controlled? dr said yes all the time.i asked dr if he would consider Butrans as an option when patients need a medication adjustment instead of refilling the percocet or increasing the dosage strength,dr said yes he will do that.dr asked about insurance,caresource was focus,we discussed PA for caresource patients and Butrans and i talked to dr about initial trial offer for commercial insurance patients,i asked dr if he will start 2 patients on Butrans between today and next week? dr said he will do that.recommended Senokot-S
PPLPMDL0020000001	Parma	OH	44129	2/16/2012	Dr Gigliotti said patients don't want to "give up their pills". I told him that patients don't necessarily have to give anything up. Reminded him that patients can take supplemental analgesia with Butrans. I asked if he thought patients would be more receptive to trying Butrans if they knew they could still take supplemental analgesia for breakthrough pain. He said maybe. He added that if he was a patient, he would much prefer applying a patch once a week to taking pills around-the-clock. I told him Butrans is not for everyone & suggested that he offer Butrans to appropriate patients who initiate a conversation with him about a change or increase in their pain medication. I asked if this sounded like something reasonable to do. He said he guesses. He said he is still writing OxyContin- more than he would like to. I reminded him that he should be cautious in prescribing & reminded him that there are legitimate pain patients who can benefit from pain medications.
PPLPMDL0020000001	Independence	OH	44131	2/16/2012	Dr Sundaram said he has not prescribed Butrans still but that he has thought of it. I asked him what has made him think of it. He said patients just want the cheapest option & he has written Butrans for a few patients & they have said the Butrans co-pay is \$25-40. He added that because the generic short-acting medications are so much cheaper, the patients just want to stay on that. I asked if he is giving them the savings cards. He said he does have the cards. I reminded him of the new trial + savings cards along with eligibility requirements. I asked why not let appropriate patients try Butrans for 28 days for little or nothing out-of-pocket, then let the patient determine if they want to stay on it & use the next card to save \$40, bringing them down to a \$15-\$20 co-pay. He said he should do that. I agreed. Discussed OxyContin for appropriate patients beyond Butrans who could benefit from q12h dosing, such as those on Percocet around-the-clock.
PPLPMDL0020000001	Shaker Heights	OH	44122	2/16/2012	Caught Dr Agarwal between patients- Reviewed Butrans dosing & showed back of patient profiles, displaying each of the strengths & how to write the prescription. Also discussed ability of patients to take supplemental analgesia with Butrans if necessary for breakthrough pain. Positioned Butrans for patients with private insurance who need a change or increase in their tramadol prescription. Also reminded him of favorable OxyContin Medicare coverage. He said he will keep both in mind.
PPLPMDL0020000001	Cleveland	OH	44109	2/16/2012	i showed dr William,patient case study,we discussed this patient type and i asked dr how often he's seeing patients like this? dr said every day and these patients always want more pills.i asked dr if Butrans would be appropriate for a patient like william? dr said yes it is appropriate.i asked dr if he will see any patients like William today or tomorrow? dr said he probably will.i asked dr to start 2 patients like William on Butrans and either give them the initial trial offer card if they have commercial insurance or there is a PA for Caresource patients,we discussed the PA requirements,dr said ok he will do that.recommended Senokot-S<font color=blue><b>CHUDAKOB's query on 02/22/2012</b></font>The question to ask is why is it the patients decision what medication they get?<font color=green><b>BROOKAM's response on 02/27/2012</b></font><font color=ok<font color=blue><b>CHUDAKOB added notes on 02/29/2012</b></font>Thanks. I hope you will try it.
PPLPMDL0020000001	Westlake	OH	44145	2/16/2012	Reminder that OxyContin is covered for most of his med 0 patients and showed the grid. I reviewed the Butrans trial cards and asked if he would try just a few patients and what does he have to lose. He agreed and said he will hand them out. Dr informed me that he just registered for the Butrans program tonight.
PPLPMDL0020000001	Cleveland	OH	44105	2/16/2012	i showed dr patient case study,william,we discussed this patient profile,dr said she see's a lot of patients like william and also has a lot of patients taking percocet for their chronic pain.i asked dr if she's considered Butrans for anyone yet? dr said yes but patients don't want to take a patch for their pain,dr said she knows they can have pills too with Butrans but patients only want their pills.i asked dr if the patient info booklet is helping to educate patients? dr said yes and she's handing them out.dr said she'll continue talking to patients about Butrans and giving booklets out but thats all she can do unless patients are willing to try Butrans.i focused dr on BWC and commercial insurance patients to try Butrans.i asked dr if she can start 2 patients on Butrans today or tomorrow? dr said she will do her best
PPLPMDL0020000001	Cleveland	OH	44114	2/16/2012	Emailled invitation for upcoming webinar (scheduled for 3/14/12). Email included handout (as PDF) for the "Science and Nature of Pain" presentation from the Pain PACT series.
PPLPMDL0020000001	Cleveland	OH	44113	2/16/2012	dr said he's not started anyone on Butrans in his office but thinks his nursing home patients could be appropriate as they have a lot of chronic pain.we talked about dr focusing on patients in the office that are taking 1 of the short-acting opioids listed in the initiation guide,showed dr this info,dr said he does have patients taking these narcotics for chronic pain it just comes down to the fact that Butrans is newer to him and not a habit.i asked dr if he could start 1 new commercially insured patient on Butrans either today or tomorrow? dr said he will see who comes into the office.dr took initiation guide.we talked about OxyContin being an option for doctors nursing home patients,i showed dr OxyContin formulary grid and focused dr on medicare or commercial patients coming into the office that could be appropriate for Butrans.dr said ok took info.recommended Senokot-S
PPLPMDL0020000001	Cleveland Hts	OH	44118	2/16/2012	Doc complained that he has been writing butrans but he has been getting push back from insurance companies. I asked him if he recalled the plan(s). He said that one was express scripts which required a PA and was dstitl denied. The patient was previously on Utram and tylenol with codeine. He said he wants to write it but its got to be covered and he has a lot of medicare. I explained that a low dose of oxycontin might be appropriate for those patients and is covered and tier 2 preferred on AARP, CCRx, and Silverscript. He said it just might be better to write oxycontin then.
PPLPMDL0020000001	Cleveland	OH	44143	2/16/2012	I reviewed the butrans indication and patient type. I asked doc if he sees any merit for such a product with his patient population. He said probably not only because he tries not to have his patients taking meds ATC. If they need more than 60 tabs/month, he would refer them to pain mgmt. I reminded him that butrans is a CIII similar to vicodin.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/16/2012	Met patrick pharmacist. Discussed both Butrans and OxyContin. Patrick said they have both products in stock and fill them regularly. Pharmacy is on e-voucher but wanted OxyContin copay cards.Patrick mention ed that they have been splitting Butrans samples and relazize that they will be utilized. Discussed that drs in area are writing for both products and copay cards are important to pharmacy. Gave Relay for health card and discussed 28 day trial voucher for Butrans.
PPLPMDL0020000001	Westlake	OH	44145	2/16/2012	Quick call, I asked Dr if he would come to our Butrans dinner programs, and he will take a look. I asked if he had a chance to try it. He said new patients on Butrans and he has not.
PPLPMDL0020000001	C. Falls	OH	44223	2/16/2012	Spoke with Cindy the pharmacist. Cindy said they had stocked butrans but not currently. Had a patient from pain clinic but now is off. Cindy said the pharmacy participates in e-voucher program. Discussed Butrans trial offer informations and savings card information. Cindy was under impression the OxyContin coverage was not good. Discussed coverage information and Med D and CCRx.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/16/2012	Introduced myself to Jen(Receptionist) and Dr. Asked dr if he has heard of Butrans and dr said that he has and said that it was a 7 day patch. Dr mentioned that he does use OxyContin and has a few patients on it. Asked dr where he uses it in his treatment of pain? Dr said that he uses it if his patients on Vicodin are not getting enough pain relief. Asked dr if i could get some time with him to further discuss Butrans and where it could fit in his practice. Dr agreed to set up lunch.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/16/2012	First call on Dr. said he is still writing OxyContin. He then began discussing workers comp and medicaid coverage. Explained that would look into specific criteria. nothing else learned
PPLPMDL0020000001	Mayfield Heights	OH	44124	2/16/2012	Spoke to Steve ilko about the movement of butrans. He has only been at this store for about one month and has not seen any scripts for it since he's been there. I explained the indication and positioning and asked him if he would ever make any suggestions to those customers taking short acting opioids month after month. He said no and that most customers like their vicodin because it works. I explained the proper application and rotation in case he gets a script. Provided patient info guides.
PPLPMDL0020000001	Highland Heights	OH	44143	2/16/2012	Quick call....I asked doc if he is still having success with butrans. He said for some patients. I asked him if he is prescribing with refills. He said he was. I reminded doc that butrans is covered on BWC as well as the other commercial plans. I asked him to prescribe low dose oxycontin for medicare patients. No commitment there.
PPLPMDL0020000001	Akron	OH	44310	2/16/2012	Asked dr if he had used Butrans? Dr said he had used it. Asked dr what the results were. Dr said the results were good. Asked dr where he placed Butrans for that patient? He said after a Cox-2. He asked about managed care coverage. Explained 28day trial offer and co-pay card. Asked dr to continue using? He said yes.
PPLPMDL0020000001	Brooklyn	OH	44130	2/16/2012	Spoke with Danielle (pharmacist) & presented patient information booklets. Showed her how she can use the booklets in patient counsel & suggested she give them to patients who she identifies as potential Butrans candidates based on their patient type. Discussed patients taking month after month of tramadol or Vicodin around-the-clock. She said she would keep more booklets on the shelf to give patients. Reviewed new trial/savings cards & discussed OxyContin savings cards. Also reviewed eligibility requirements.
PPLPMDL0020000001	Parma	OH	44134	2/16/2012	Reviewed details of new Butrans trial/savings cards with Dr Mandat. He said to be sure he has cards because now that he is thinking about it, he should have given one to a patient this morning & started him on Butrans. He said this patient would have been a good candidate. I asked what made him a good Butrans patient. He said the patient has chronic low back pain & has been taking short-acting opioids. Dr Mandat said he has been working on decreasing the amount the patient takes & thinks that using Butrans for him would be a good option. Also followed-up with Dr Mandat & Linda on the patient who's Wellcare plan was requiring prior authorization for Butrans after denying the prescription. They said after Dr Mandat did the prior authorization the plan approved it & the patient was able to get Butrans.
PPLPMDL0020000001	Cleveland	OH	44109	2/16/2012	i talked to dr about the PA for Caresource patients,that dr feels are appropriate for Butrans,i asked dr if he would be willing to start a few patients based on this information? dr said yes he will do that.i talked to dr about initiation and titration of Butrans and told dr i will follow-up next week to hear about the couple patients he starts on Butrans,dr said ok.i told dr he also has option of OxyContin,q12h,for those patients with medicare or commercial insurance that he feels are appropriate,dr said he does prescribe OxyContin so he'll keep that in mind.
PPLPMDL0020000001	Euclid	OH	44132	2/16/2012	I reviewed the butrans key selling messages and reminded doc he said that he would usually titrate patients to OI0 of tramadol. I positioning butrans as an alternative to that. He asked about the side effects. I showed him the AE profile. He said the application site prutitis is to be expected. He asked about coverage. I showed the formulary grid. He frowned at the tier 3 coverage. I explained the savings cards and the trial offer for one month. He liked the idea and thought he might try that.
PPLPMDL0020000001					

PLPMDL0020000001	Parma	OH	44129	2/16/2012	Spoke with Pam, nurse, & reminded her of my previous visit when I introduced Butrans to her. Reminded her of core messages. I asked if I could get an appointment to introduce Butrans to Dr Antonelli. She said he does not do that. I reminded her that he has not yet been detailed on Butrans & he might not have heard of it yet. I asked her to give him Butrans information with my card & ask him if I could speak with him. She took the information to him & said he would read the information but did not have time right now to discuss it. I let her know I would follow-up.
PLPMDL0020000001	Cleveland Heights	OH	44118	2/16/2012	Doc is new to the territory. I discussed the butrans indication and key selling messages. He said he is familiar with it and has prescribe it. he said he has one female patient on the highest dose (20mcg ) and doing well. He is really pleased with the results of butrans and likes that it can be called in and written with refills. He said the only issues is the coverage and getting it to go through. I asked him to focus his prescribing on commercially insured patients. I also explained that those patients can try butrans for the first month Before the monthly savings. He said he will continue to prescribe. He also said he would come to the 2/29 speaker program.
PLPMDL0020000001	Brooklyn	OH	44144	2/16/2012	Quick call- Caught Dr Deeb at the window- Passed back Butrans dinner invitation for February Cleveland area dinner programs. Reminded him of previous conversations when he expressed interest in attending a program, especially with Dr Laham as a speaker. Encouraged him to attend a program as it would be a good opportunity for him to discuss Butrans with other physicians & area experts. He said he would check his calendar to see if he could attend one.
PLPMDL0020000001	Cuyahoga Falls	OH	44221	2/16/2012	Re-introduced Butrans to Dr and discussed dosing, how to prescribe, and conversion scale. Dr said that she has used Butrans in the past but remembers there being problems with it. Dr was not sure if it was a cost issue or another issue. Dr said that it must have been a cost issue and mentioned that she had some savings cards at one time. Reviewed trial offer card and savings card info. Dr said she needs to remember Butrans and is willing to give it another try.
PLPMDL0020000001	Westlake	OH	44145	2/16/2012	I reviewed the Butrans trial offer and told him that in the past he was concerned about managed care for Butrans. I asked what does he have to lose by trying a few patients on Butrans with commercial insurance and they can get it for free or very little out of pocket. He said that he will try a few patients and the cards definitely help. I invited Dr to our upcoming Butrans dinner and he said will not go. I reviewed the OxyContin is an option when patients are taking vicodin around the clock.
PLPMDL0020000001	Cuyahoga Falls	OH	44223	2/16/2012	Spoke to pharmacist Maureen about Butrans. Gave her overview of Butrans with dosing and that it is a CIII product with same abuse and liability as any other Opioid. Discussed Butrans Trail Offer and copy card savings information. Asked Maureen if she has it stock and she said no. McKesson is wholesaler and will order it when an Rx comes in. There have been no Rx's filled at the pharmacy per her knowledge. Maureen said that Giant Eagle does participate in Relay Health.
PLPMDL0020000001	Cuyahoga Falls	OH	44223	2/16/2012	Asked dr if he has heard to Butrans. Dr said he was not sure. Gave information and conversion guide info. Told dr it is a CIII and he can call it in and refill it. Aked dr if he has used patches before. Dr said yes and Fentanyl was his of choice. He liked that Butrans is a CIII but wondered about managed care coverage. asked which plan[s]he is wondering about. Dr said no specific plan. Just wondered about overall coverage. Gave dr information on trial off and copy cards for commercial patients. Dr was impressed with 28 day trial offer. Asked dr if I could speak to him next time more indepth and dr said yes.
PLPMDL0020000001	Westlake	OH	44145	2/16/2012	I asked Dr if she had any questions regarding Butrans since I was there last. She said she thinks it might be something that could fit into her practice and looks interesting. I reviewed the Butrans trial card offer and asked if she would try just a couple of patients and she will consider it.
PLPMDL0020000001	Cleveland	OH	44111	2/17/2012	I reviewed Butrans key messages and asked if she has had a chance to recommend it. She hasn't and said she has not seen the doctors prescribe yet. I asked what the hesitation is and she said she feels they just forget or decide to go to something stronger. We reviewed the appropriate patient type and asked if she would look for a patient like William. She agreed. Reminder that OxyContin is an option with 7 tablet strengths.
PLPMDL0020000001	Cleveland	OH	44111	2/17/2012	Spoke with Dave, we reviewed the Butrans medication guide, use of supplemental analgesia, application sites. I asked what types of questions patients usually have, he said they usually ask how many they can take. We reviewed that patients get 4 patches per carton and that patients should not wear more than one patch at a time.
PLPMDL0020000001	Garfield Heights	OH	44125	2/17/2012	Spoke with nurse, Kim, who also works with Drs Gulati & Rastogi. Discussed Butrans appropriate patient type/range, showing her patient profiles. I asked her to give the profile booklet to Dr Gupta. She agreed. I also discussed Butrans trial/savings cards & OxyContin savings cards & reviewed eligibility requirements. Scheduled first available lunch with Dr Gupta.
PLPMDL0020000001	Macedonia	OH	44056	2/17/2012	Spoke with Eve, pharmacist, who said she recently did see a Butrans prescription. She said the physician wrote for 2 5mcg patches & 2 10mcg patches for the patient to try. I asked if the patient was on some sort of short-acting opioid before starting Butrans. Eve said yes. Discussed new patient trial/savings program & eligibility requirements. Eve asked if the trial would work if the prescription was written for fewer than 28 days worth. I told her as long as the patient meets eligibility requirements, the patient's first prescription's co-pay should be credited \$75 with the trial card. Discussed e-voucher for automatic monthly savings. Also reviewed appropriate patient type. Gave Eve a new package of OxyContin savings cards & reviewed eligibility requirements. She said she can think of a few people who will really benefit from those savings cards.
PLPMDL0020000001	Cleveland	OH	44102	2/17/2012	I talked to Vicki, pharmacy mgr, about Butrans stocking and Vicki said no Rx for Butrans lately, only 1 last year and she had 1 box of Butrans 5mcg, hasn't ordered Butrans since. I asked Vicki what features of Butrans stood out to her, showed visual aid 5 core selling messages, Vicki said transdermal delivery and 1 application 7 days buprenorphine. I asked Vicki if she would give appropriate patients a Butrans patient info booklet and have patients talk to their HCP's about Butrans? Vicki agreed to do this. I confirmed OxyContin stocking, showed conversion guide, Vicki said she doesn't recommend OxyContin, that's up to HCP's but she appreciated conversion info as she does get questions from doctors on conversions occasionally. recommended Senokot-5
PLPMDL0020000001	Garfield Hts	OH	44125	2/17/2012	Dr Sadowksi asked me if he could use Butrans for someone on OxyContin. I told him it depends on what dose OxyContin the patient is on & showed him initiation guide table on pg 6. I asked him why he asked. He said he read an article in the Huffington Post about how in Canada, they are concerned about abuse of OxyContin & are looking for alternatives & he wondered if Butrans would be a good substitute. I agreed that all opioids, including OxyContin & Butrans, have abuse & addiction potential. Re-focused him on appropriate patient type & asked him to try Butrans for appropriate patients who he is getting ready to start on opioids around-the-clock if their condition is chronic, or patients on short-acting opioids who are not well-controlled. Also reminded him of new trial/savings program for patients with commercial insurance.
PLPMDL0020000001	Sagamore Hills	OH	44067	2/17/2012	Dr Saridakis reported that a female patient of his came in on Butrans from a pain management physician & the patient said that when she put Butrans on, she experienced vaginal bleeding. He said the patient said she stopped Butrans & the bleeding stopped, then tried Butrans again & started bleeding again. Patient discontinued due to this adverse event. I let him know I would report this. Discussed 3 patient types where Butrans could be used, giving him options. Discussed Butrans as a CIII opioid with abuse & addiction potential. I asked if he prescribes short-acting opioids like tramadol & Vicodin. He said he does, but mostly for acute use. He added that he does have some patients on them chronically. He said the trouble with this is he believes opioids simply numb the patients' pain receptors. He said inevitably patients say they need more & more. I agreed that tolerance does occur with opioids. I asked him to focus on legitimate patients who are not well-controlled on their short-acting opioid around-the-clock. Also discussed OxyContin as a q12h option for appropriate patients beyond Butrans
PLPMDL0020000001	Sagamore Hills	OH	44067	2/17/2012	Dr Scanlon said he is using Butrans. He said he just tried to write it Tuesday for a patient but she called back & said it was too expensive. I asked if the patient could have had Medicare coverage. He said possibly. Discussed commercial insurance coverage. Dr Scanlon said he is down to his last savings cards. Presented new patient trial/savings program & reviewed eligibility. He said this was great. I presented 3 patient profiles & let him know he has different options of types of patients he could use Butrans for. He said that was good to know. He said overall, patients are getting good results. I asked if they are getting refills. He said usually. Discussed Butrans as a CIII opioid, meaning he can call it in & prescribe refills. Also reminded him of abuse & addiction potential. He said he plans to continue to prescribe Butrans for appropriate patients. Discussed OxyContin q12h as an option for appropriate patients beyond Butrans.
PLPMDL0020000001	Macedonia	OH	44056	2/17/2012	Presented Butrans 3 patient profiles. Dr Yager said he actually has multiple patients who either are on NSAID's/COX-2's or tramadol chronically who would be good candidates for Butrans. He said he likes the transdermal technology & once weekly dosing. He also said he likes that Butrans probably does not have a street value. I told him that Butrans is still a CIII opioid & does carry abuse & addiction potential just like other opioid medications. He said he realizes that, but he does not think it will be as widely abused as other narcotics. I asked that he be just as cautious with Butrans as he is with other opioid medications. Dr Yager said again that he has many patients who he would like to try on Butrans. I gave him a new initiation tool & showed him how to use it to figure out the recommended starting dose for a patient depending on their current medication regimen. Also discussed insurance coverage, asking him to focus on his appropriate patients with commercial insurance. Gave him new trial/savings cards & reviewed eligibility requirements. I told him it sounded like he has some specific patients in mind for Butrans. He said he does. I asked him to give each of them a trial/savings card if they are eligible & let him know I would follow up. He said he would do this. Also discussed OxyContin for appropriate patients beyond Butrans. He said he has a few elderly severe pain patients on OxyContin & he prescribes with caution. I agreed that he should be cautious with opioids
PLPMDL0020000001	Cleveland	OH	44135	2/17/2012	Quick call, I asked Dr if he has thought of using Butrans for patients with chronic pain who have not been on other opioids yet. He said that he would would do this and has had good results with Butrans thus far. I asked if he writes refills, he said he does once the patient has been back for a follow up and is stable on their dose.
PLPMDL0020000001	Akron	OH	44319	2/17/2012	Met Brian(Pharmacist) and asked if they had Butrans and OxyContin in stock. They have both. Brian said that they do not auto ship but had an prescription come in and ordered it. Could not remember Dr who prescribed. Discussed Butrans dosing and trial offer and copy cards. Pharmacy does participate in e-coucher. provided OxyContin copy cards
PLPMDL0020000001	Cleveland	OH	44113	2/17/2012	worked dr bhimani's office-lunch with him and staff, saw dr shen-worked pain management dept
PLPMDL0020000001	Cleveland	OH	44125	2/17/2012	Spoke briefly with pharmacist, Chris. Presented new Butrans trial/savings program & reviewed eligibility requirements. Also reminded him of OxyContin savings cards. He thanked me for the information.
PLPMDL0020000001	Cleveland	OH	44113	2/17/2012	showed dr Emma, patient case study, asked dr when a patient like this is ready for a medication adjustment, is she comfortable prescribing a long-acting opioid? dr said no usually she would convert patients to vicodin, after they are maxed out on tramadol dr said she rarely prescribes long-acting opioids but does like the idea of Butrans being a patch and it is a CIII which she likes because she can call in refills. I asked dr if she had 2 patients with commercial insurance coming in today or next week, that she could start on Butrans? dr said she probably does and will consider Butrans. dr asked about insurance coverage, focusing on caresource patients. we talked about PA for Caresource and Butrans and I focused dr on commercial insurance patients, dr said ok. recommended Senokot-5
PLPMDL0020000001	Uniontown	OH	44685	2/17/2012	Discussed Butrans Trail offer vouchers. Mike(Pharmacist) said they do participate in e-voucher. Pharmacy has seen patients on Butrans but cant recall who wrote. Asked if he would hand out Butrans Patient information kits.
PLPMDL0020000001	Akron	OH	44312	2/17/2012	Spoke with Diane(MA) about scheduling lunch. Introduced products to Diane.
PLPMDL0020000001	Westlake	OH	44145	2/17/2012	Quick follow up I asked Dr if he was able to give the Butrans formulary kit to Ron and what he thought about it. He has not yet looked through it but said he will be sure to get it to Ron.
PLPMDL0020000001	Cleveland	OH	44130	2/17/2012	Quick call- Passed back patient profile booklet & told Dr Kansal that within that literature was information on what 3 different patient types may be candidates for Butrans. Also reminded him of new trial/savings program for Butrans & OxyContin savings cards. Spoke with Dorothy & reviewed eligibility requirements for each savings program.
PLPMDL0020000001	Cleveland	OH	44111	2/17/2012	Quick call, I reviewed the key messages for Butrans and I asked if she had patients in mind who she could recommend it for. She said she may have some, she will keep it in mind.
PLPMDL0020000001	Cleveland	OH	44113	2/17/2012	dr said she's still starting patients on Butrans, every week and patients are doing great dr said she needed a few more booklets but nothing else at this time. I talked to dr about focusing on BWC and commercial insurance patients next week to continue starting patients on Butrans, dr said she will do that. I discussed with dr the PA requirements for Caresource as dr mentioned she has some medicaid patients she would like to start on Butrans. dr said that information helped. I asked dr if I had her commitment to continue starting more patients on Butrans today and next week? dr said yes.
PLPMDL0020000001	Akron	OH	44312	2/17/2012	asked dr at window if he has used Butrans. Dr said he couldnt recall but wants more information on Product. Quick review about product and informed about CIII call in and refill status. Spoke to Nadia(MA) about Butrans and will leave info on next call.
PLPMDL0020000001	Akron	OH	44319	2/17/2012	spoke to Dr about Butrans and asked if he has prescribed it recently. Dr said he has not but one of his nursing home patients is on it and doing well. Gave overview of product with doing and titration guide. Dr asked about managed care coverage with SummaCare and Med D. Told Dr that it is on tier 3 for some plans but will return with more managed care information. Reviewed trial offer card and copy cards.



	Cleveland	OH	44113	2/17/2012	dr said he will start prescribing Butrans because he likes the idea of a patch for his chronic pain patients.dr said as long as insurance covers Butrans he will prescribe.dr said he has a lot of medicaid,medicare and commercial insurance.i showed formulary grid,we focused on commercial insurance patients starting on Butrans and discussed initial trial offer,dr said that seemed easy and he will start some patients and see what happens.dr said he has 1 patient on Butrans that dr shen (pain management dr) started on Butrans and this patient is doing well.we talked about PA for caresource patients,dr said to tell Judy,office mgr and Debbie,MA,because they do all the PA's.i discussed this info with both women.we talked about initiation,titration,side effects of Butrans and the importance of giving patients the patient info booklet to educate them on Butrans,dr said he will do that.i asked of if he could start 2 patients next week on Butrans? dr said yes he will.
PPLPMDL0020000001	Cleveland	OH	44113	2/17/2012	dr just got back from vacation and conferences,he's not started anyone on Butrans.dr said he will be seeing patients today and next week that are taking vicodin every day for their chronic pain that he wants to start on Butrans,dr asked me to follow-up next Friday when we have lunch.i gave dr Butrans initiation guide,we discussed initiation and titration of Butrans.focused dr on BWC and commercial insurance patients.
PPLPMDL0020000001	Uniontown	OH	44685	2/17/2012	Dr said he doesnt treat chronic pain after being given Butrans information. If Dr gets patients that need CII or CIII drugs he refers out to pain mgt. Dr said he would review doing and titration guide.
	Cleveland	OH	44109	2/17/2012	i asked dr what patients are saying to him at 4week follow-up visit,after starting on Butrans? dr said patients usually tell them they are doing good on Butrans.dr said if patients need to be titrated to next higher dosage strength of Butrans he will do this in the follow-up appointment.dr said he discusses side effects with patients too.dr said this hasnt been an issue with his patients he started on Butrans.i asked dr if he has more patients that he can start on Butrans today and next week? dr said yes he does.i focused dr on commercial insurance patients and using the initial trial offer cards,dr said he has used a couple of those cards.dr asked about medicaid coverage,we discussed PA for Caresource patients and i asked dr if i had his commitment to start more patients on Butrans? dr committed to do this.
PPLPMDL0020000001	Cleveland	OH	44109	2/17/2012	dr said he has 1 patient on Butrans and patient is doing great.i asked dr if he has more patients like the 1 he started on Butrans? dr said yes he has a couple patients he wants to start on Butrans but has had a hard time getting it covered,i asked dr what plans? dr said medicaid,we talked about PA for Caresource patients and i asked dr if he would be willing to do that? dr said yes but the nurses do the PA's not him,he just tells them to do the PA.dr said i should talk to Debbie,RN and Toni,RN,to explain PA for Caresource.i showed dr initiation guide,we discussed appropriate initiation of Butrans and titration and i asked dr if he will see 2 patients today-next week,that are appropriate for Butrans? dr said he probably will and if insurance pays for Butrans he'll start a couple patients.
PPLPMDL0020000001	Cleveland	OH	44109	2/17/2012	left Butrans fpi,initiation guide,patient info booklet,formulary grid,OxyContin fpi,conversion/titration guide,formulary grid and my business card for each HCP: dr campbell,dr baker,dr dhillion and dr geho.cant see any HCP's,leave info at front desk and if HCP's are interested in meeting with you,they will contact you.
	Beachwood	OH	44122	2/17/2012	Presented 3 patient profiles to Dr Warren. He stopped me & said this made him think of a few patients. He asked if he could use Butrans on a patient to help bring them down from fentanyl. I asked what dose fentanyl the patient he was thinking of is on. He said 12.5 & he would like to decrease the patient's dose. I showed him new initiation guide & tool & let him know that patients on fentanyl were excluded from studies. Dr Warren said he is in the process of trying to decrease many of his patients' opioid doses if possible. He went on to say that he thinks Butrans would be really good for a lot of his patients. He asked if patients can take other medications for breakthrough pain. Discussed supplemental analgesia, dosing, titration & abuse/addiction potential. Dr Warren said he has some patients who are taking high doses of NSAID's who are now having renal problems because of it & asked if Butrans could be used for them. I let him know there are no dosage adjustments for renally impaired patients & went through contraindications. Reviewed new trial/savings program. Dr Warren said again that he is going to use Butrans for the patients he told me about & he was excited about trying it. Discussed OxyContin savings cards. Dr Warren said he no longer has patients on OxyContin as he has been trying to decrease his patients' opioid doses. I asked if he was just getting patients off OxyContin or if he was also doing so with other medications. He said all CII's.
PPLPMDL0020000001	Brook Park	OH	44142	2/17/2012	Spoke with Josh, we reviewed the Butrans medication guide and i asked about the movement. He said he has seen a few scripts. He did not remember which Drs. We reviewed the side effects, application sites and use of supplemental analgesia. Reminder that OxyContin is a Q12hr option for apetins and we reviewed the conversion guide.
PPLPMDL0020000001	Akron	OH	44312	2/17/2012	met Diane(MA) and introduced products.<font color=blue><b>CHUDAKOB's query on 02/23/2012</b></font>Nice job on recording this as non-HCP call. Your call notes should be more expensive than introduced products. What did you discuss? What concerns were raised? Did you discuss the savings card program? Introduced products is too general.<font color=green><b>REICHCL's response on 02/29/2012</b></font>i am getting better being more descriptive on what aspect of the products were discussed over this week.<font color=blue><b>CHUDAKOB added notes on 03/04/2012</b></font>Keep working on it!
PPLPMDL0020000001	Uniontown	OH	44685	2/17/2012	Had discussion with Kelly(MA) and Cindy(Receptionist) about drs use of OxyContin and Butrans. Dr does not use OxyContin much anymore. Too many problems. Refers out to pain management.Dr has used Butrans and has approximately 2 patients on it. Informed staff about trial offer and copy card details. Kelly stated that dr likes that he can call Butrans in and can refill it.<font color=blue><b>CHUDAKOB's query on 02/23/2012</b></font>Cliff, another case of a non-HCP call. Remember, a non-HCP call is only on an MA or RN, not on a receptionist. Good to see you are bulling fast relationships.<font color=green><b>REICHCL's response on 02/29/2012</b></font>Understood. Thanks.<font color=blue><b>CHUDAKOB added notes on 03/04/2012</b></font>Thank you!
PPLPMDL0020000001	Cleveland	OH	44109	2/21/2012	dr said he has a couple patients on Butrans and they are doing good.i asked dr if he has more patients like the one's he started,that he can start on Butrans this week? dr said yes he does but not every patient is willing to wear a patch for a week.dr said he will keep trying and will talk to patients and if insurance pays for Butrans he will prescribe more of it.dr said some plans arent covering Butrans.i asked dr which plans is he referring to? dr said medicaid and medicaid,we talked about dr focusing on BWC,commercial insurance patients or Caresource patients if he's willing to do the PA for caresource patients.dr said he does PA's for Caresource already so thats not an issue,we talked about PA requirements for Caresource.i asked dr if he has a couple patients in mind,appropriate for Butrans,that he can start on Butrans this week? dr committed to do this,we talked about OxyContin being an option for patients,showed visual aid and dr said he has some patients on OxyContin but doesnt start a lot of patients,these are patients he "inherited" when he joined the practice. i asked dr if he would at least consider OxyContin an option,if patients are appropriate? dr said yes he will,showed formulary grid and recommended Senokot-S
PPLPMDL0020000001	Fairview	OH	44111	2/21/2012	Spoke with Katie, we reviewed the medication guide for Butrans and I asked about the movement of Butrans. They said they only have one patient now on Butrans and it was from Dr Shen. They said that they can only fill CCF employees or scripts from CCF Drs. I asked what questions patients usually have about their pain meds and she said they usually don't have any.
PPLPMDL0020000001	Cleveland	OH	44113	2/21/2012	i asked dr how often he's seeing patients that he feels are appropriate for Butrans? dr said it depends some weeks he will see a couple patients that he starts on Butrans and then there will be weeks where he doesnt see anyone who is appropriate,we talked about appropriate patients to start on Butrans,dr said those patients taking 4-5 vicodin/day,not controlled and still in pain,thats who he's considering appropriate for Butrans.i asked dr if he see's these patients daily? dr said it varies but he will continue starting patients on Butrans and thinks its a great option for patients.i asked dr for his commitment to start patients on Butrans this week? dr agreed
PPLPMDL0020000001	Brooklyn	OH	44144	2/21/2012	Introduced Butrans to Dr Charles, delivering core messages & alerting him to box warning. Showed initiation guide table on pg 6 to help with positioning. Discussed appropriate patient type, focusing on patients taking around-the-clock short-acting opioids for chronic conditions like osteoarthritis or low back pain. Also discussed Butrans as a CII opioid with abuse/addiction potential. Discussed OxyContin as an option for appropriate patients beyond Butrans range. Dr Charles asked how Butrans compares with fentanyl. Told him we have no comparative data & that fentanyl patients were excluded from Butrans studies. Showed him table on pg 6 of initiation guide again to re-focus him on appropriate range of patients. He asked then if Butrans is "like tramadol in a patch". Again, I told him we have no comparative data & showed him the table on pg 6 of the initiation guide. I asked if this made sense & he said yes.
PPLPMDL0020000001	Brooklyn	OH	44144	2/21/2012	Introduced myself & Purdue's products to Dr Morgan, a new physician with the practice. Presented Butrans core messages & discussed appropriate patient type, focusing on patients with chronic issues who take short-acting opioids around-the-clock. Gave her an initiation guide & showed pg 6 table to help with positioning. Discussed OxyContin as an option for patients beyond Butrans range. Also discussed Butrans as a CII opioid with abuse & addiction potential. Showed her demo patch. She said she does not like treating chronic pain as this can be a difficult patient type. Discussed patients with osteoarthritis or low back pain who she is considering starting or continuing on opioids as potential Butrans patients.
PPLPMDL0020000001	Parma	OH	44134	2/21/2012	Introduced Butrans to Dr Silverman, delivering core messages & alerting him to box warning. Discussed appropriate range of patients & gave him initiation guide, showing him pg 6 table. Discussed OxyContin as an option for appropriate patients beyond Butrans range. Focused him on patients taking short-acting opioids like tramadol or Vicodin around-the-clock who have chronic conditions such as osteoarthritis or low back pain.
	Brooklyn	OH	44144	2/21/2012	Introduced Butrans to Dr Keith, delivering 5 core messages & alerting him to box warning. Presented initiation/titration guide, showing table on pg 6 to help with positioning. Discussed appropriate patient type & range, including OxyContin as an option for patients beyond Butrans range. Focused on patients taking short-acting opioids around-the-clock chronically. Dr Keith said he would like to look over the initiation guide when he has more time. He said he is glad there is another option for treating this type of patient as he finds it a difficult population to treat at times.
PPLPMDL0020000001	Cleveland	OH	44103	2/21/2012	i talked to Abdul about Butrans stocking and 6 core selling messages,showed visual aid,Abdul hasnt seen any Rx for Butrans.Abdul said biggest challenge he see's is medicaid coverage for Butrans.we talked about PA for Caresource patients and Butrans.i asked Abdul if he would continue recommending Butrans,to appropriate patients,and give them patient info booklets so they can talk to their HCP's? Abdul agreed to do this,we talked about OxyContin stocking and HCP's prescribing in area,i showed conversion guide and we discussed 7 tablet strengths,i asked Abdul if he would share this info with HCP's when they have questions about converting patients to OxyContin? Abdul agreed to do this,showed formulary grid for OxyContin and we discussed medicaid and commercial insurance coverage.recommended Senokot-S
PPLPMDL0020000001	North Olmsted	OH	44070	2/21/2012	Spoke with Katy, they only had one patient on Butrans and he was started on the 20mcg. It was a patient of Dr Saudra, and the patient was previously on fentanyl patch. We discussed the appropriate patients for Butrans and the initiation tool, we reviewed that Butrans is a CII and can be used with supplemental analgesia. She had concerns about cost and we reviewed the managed care for Butrans and savings program. We reviewed that OxyContin is an option for patients taking 4 hydrocodone around the clock per the conversion guide.
PPLPMDL0020000001	Cleveland	OH	44111	2/21/2012	Spoke with Earl, he has seen some movement of Butrans but not much. He has the 10mcg in stock. we reviewed the medication guide for Butrans, use of supplemental analgesia and that it is a CII that can be called in and refilled. I asked if he would recommend Butrans as an option to an appropriate patients, He said that he would call the Dr to recommend it but would not tell the patient. I asked what questions patients usually have about their pain meds. He said they usually don't have questions about their pills. Reminder that OxyContin is an option with 7 tablet strengths, He said that he is still getting new scripts for OxyContin.
PPLPMDL0020000001	Cleveland	OH	44103	2/21/2012	talked to Nick,pharmacist,about Butrans 5 core selling messages and showed visual aid,Nick said they havent had any Butrans scripts since last year,just 1 carton of Butrans 5mcg,Nick said most patients just want their pills and arent open to wearing a patch once a week for their chronic pain.i showed Nick Butrans FPI,section 2.4 maintenance of therapy section,we discussed that patients can take immediate release opioids or non-opioid therapy with Butrans,its up to the HCP,Nick said ok. asked Nick if he will continue handing out the Butrans patient info booklets,to appropriate patients? Nick agreed to do this,we talked about OxyContin stocking,Nick said he doesnt recommend OxyContin but wanted a conversion guide as he sometimes gets questions from HCP about converting patients from short-acting opioids to OxyContin.recommended Senokot-S
PPLPMDL0020000001	Lakewood	OH	44107	2/21/2012	i reviewed the initiation guide for Butrans. I discussed the Butrans savings card and he asked that I explain them to pat and Elizabeth which I did. Pat said that OxyContin has been denied in many patients for Medicaid. We reviewed the managed care for Medicaid for OxyContin and Butrans.
PPLPMDL0020000001	Solon	OH	44139	2/21/2012	Quick call- Dr Zaidi said he has been starting more patients on OxyContin due to "what's happening" with Opana supplies. I passed back new savings cards along with Butrans dinner invitations to upcoming programs. He thanked me & walked away. Spoke with Deborah (nurse) & discussed new OxyContin savings cards. She said they have been switching a lot of patients to OxyContin lately.
PPLPMDL0020000001	Cleveland	OH	44113	2/21/2012	worked pain management-talked to Yasmin,MA,for Dr Shen and Dale Novak,PA,who told me both of these HCP's are out for the week at a Pain management conference in Florida,we talked about patients getting started on Butrans,Yasmin said only 1 Butrans denial from BWC and thats because the patient was self-insured so the employer didnt approve the PA,other than that no issues with BWC or commercial insurance covering Butrans. i worked dr elbadway's office too-spoke with Isa,MA,to dr as dr wasnt available-see notes
PPLPMDL0020000001	Cleveland	OH	44130	2/21/2012	Quick call- Dr Fedorko said he hasn't found any Butrans patients lately, but he knows all about it & will find someone eventually. I told him I had some patient examples I wanted to run by him but he said he had no time. I let him know I would leave him a copy of them & would follow-up to discuss them.
PPLPMDL0020000001	Akron	OH	44319	2/21/2012	Thomas W(Pharmacist) has Butrans 10mcg is in stock. Does participate in E-voucher but has not seen any prescriptions come through. Agreed to look over Butrans pharmacy information.
PPLPMDL0020000001	Parma	OH	44129	2/21/2012	Quick window call- Passed back new Butrans trial/savings cards & discussed eligibility requirements. He said to give them to Cindy & talk to her about them. Spoke with Cindy (MA) & reviewed program requirements with her. She said she thought this was a very good program & added that Dr Ortega just started someone with commercial insurance on Butrans. She suggested I come back next week as Dr Ortega was not feeling well today.

PPLPMDL0020000001	Cleveland	OH	44113	2/21/2012	deb,pa,said she's continually starting patients on Butrans,patients are doing well on Butrans and she said to just keep her stocked with booklets.I talked to deb about caresource patients starting on Butrans,deb said she got a couple PA's approved for caresource patients last week.I asked deb if i have her commitment to start more patients on Butrans this week? deb committed to this.
PPLPMDL0020000001	Cleveland	OH	44130	2/21/2012	Caught Dr Diab between patients. Positioned Butrans for commercially insured patients who can take advantage of the savings & trial programs. Also invited him to 2/29 program, but he said it was too far away for him to go. Let him know there will be others soon too. Reminded him of Medicare D coverage for OxyContin.
PPLPMDL0020000001	Uniontown	OH	44685	2/21/2012	Provided overview of Butrans and OxyContin. Dr had not heard of Butrans and wanted information. Asked Dr what she does with patient whom are not controlled on Ultram? Dr said she will to Vicoden or refer out. Asked dr to use Butrans after patients fail on Ultram. Dr asked about price. asked her which plans concern her. She said all of them. Gave Butrans trial offer info and copy card info. Dr said she would consider an extended release product after Ultram or Vicoden.
PPLPMDL0020000001	Copley	OH	44321	2/21/2012	Followed up with Dr on his previous use of Butrans in 2011. Dr said his patients responded well with Butrans but ended up having a lot of trouble getting it though managed care. Too many PA's and step edits. Asked dr about what plan(s) and couldnt remember. Reviewed dosing and titration guide. asked if he uses Ultram and/or vicoden? Dr said he does and that he used it before for patients uncontrolled on Ultram. Told him to use it for his Ultram patients. Reviewed trial offer and copy card info.
PPLPMDL0020000001	Richmond Heights	OH	44143	2/21/2012	Spoke to Joel about the movement of butrans. He said he knows he has one customer on it regularly. He did not know if they were using a savings card. He asked where they can get the card. I explained that the doctor should give witht the script but can be printed from online. Also, if he has enough need I can provide them to him. He didnt need them. I explained the proper application and rotation and gave him patient info guides. He said that oxycontin volume has been steady with no problems.
PPLPMDL0020000001	Brooklyn	OH	44144	2/21/2012	Spoke with pharmacist, Gary, & presented new Butrans trial/savings cards along with eligibility requirements. Gary said they have a lot of Medicaid patients there. Discussed prior authorization requirements for Butrans on CareSource. Also gave him a new package of OxyContin savings cards. He said he can think of one patient who pays cash who will appreciate the savings. Let him know that cash patients can use the card every 14 days if they have a prescription written that way.
PPLPMDL0020000001	Cleveland	OH	44113	2/21/2012	i talked to Isa,MA,about Butrans 6 core selling messages,Isa said i needed to book a lunch to get time with dr.i told Isa that dr told me in last lunch,to follow-up with him in future if the caresource coverage changed for Butrans.i talked to Isa about the PA for CareSource patients and she said that she will give the info to the dr and i can follow-up with him.
PPLPMDL0020000001	Mayfield Hts	OH	44094	2/21/2012	Window call.....i reminded doc of the once weekly dosing of butrans and the CII status similar to vicodin. I described that patient type as one that may take vicodin month to month. I invited him to attend the speaker program on 2/29. He said he does not have time to go to those things. Provided patient profile guide.
PPLPMDL0020000001	Cleveland	OH	44111	2/21/2012	Spoke with Mike Hoying, we discussed Butrans and he said that he did not see it being used in-patient at this point for several reasons one being that it is a 7 day patch and most patients hospital stay is less than 4 days. They would be paying for the extra days that the patient is not cared for. Mike said they are trying to have all of the in servicing done by the pharmacists and that I may be able to assist with this. Linda said that I should call Ron to discuss opportunities to be a resource when pharmacist are doing in-services on the floors with the nurses. I educated all of the pharmacist regarding Butrans and OxyContin.
PPLPMDL0020000001	Akron	OH	44304	2/22/2012	discussed Butrans with Kim(Recept), Tina(ma), and Danthony(ma). Provided Dosing and titration guide overview. Asked about patients on commercial insurance plans to qualify on Butrans savings cards. Office does have a fair amount of commercial insurance patients and would utilize cards. Was told that Dr does use OxyContin but refers out a lot of patients beyond his scope. Gave information about Butrans being a CII product.
PPLPMDL0020000001	Lyndhurst	OH	44124	2/22/2012	Doc said he has a couple of people using butrans with good success. He said it is expensive but he has some patients that can afford it. I explained the appropriate patient as one who is younger than medicare age, commercially insured, and meets the indication of butrans. I reviewed the appropriate starting dose for opioid naive or experienced patients. He said he would try butrans again since it seems to be working, the coverage is
PPLPMDL0020000001	North Royalton	OH	44133	2/22/2012	Reminded Dr Jen of our previous conversation about Butrans & OxyContin & reviewed with her that Butrans is a CII transdermal system of buprenorphine for patients with moderate to severe chronic pain. She said they do not treat any type of chronic pain there & therefore there was nothing to discuss further with Butrans or OxyContin. She said they do not want "that type of patient" in their practice. She did say she prescribes opioids in nursing homes because they are controlled there. She asked why Butrans is better than fentanyl. I told her we have no comparative studies. I showed her initiation guide table on pg 6 & told her fentanyl patients were
PPLPMDL0020000001	Cleveland	OH	44102	2/22/2012	excluded from our studies. Discussed OxyContin as an option for appropriate patients beyond Butrans range. I asked if this helped her position Butrans & see where it would be used. She said yes. I talked to Marian,MA,as dr wasnt able to see me today.I asked Marian if dr has started any new OxyContin patients recently? Marian said no she hasnt seen a lot of new starts,just same patients getting their refills of Oxycontin monthly.i showed Marian OxyContin conversion guide,we discussed patients taking 4 vicodin or percocet a day that are appropriate for OxyContin and starting them,i asked Marian if she would show dr this info,Marian agreed we also discussed Butrans 6 core selling messages,Marian said she knows dr carson (in same office) has started a few patients on Butrans recently but not dr celeste.we discussed appropriate patients for Butrans and i asked Marian if she would recommend Butrans to dr if patients are appropriate? marian agreed
PPLPMDL0020000001	Cleveland	OH	44114	2/22/2012	I asked John,PA,what his thoughts were post the 2/16/12 dinner program he attended with Dr.Moufawad? John said it was a good lecture,he likes dr moufawad(speaker) as they refer to him so he appreciated hearing him speak.i asked John if he learned anything new? John said no not really.i talked to John about appropriate patients to start on Butrans.John said he just got a CareSource PA approved for a patient that had tried tramadol and percocet and failed on these medications.John said he is happy that CareSource has changed the PA requirements so he will start more patients on Butrans with this change.i asked John how often he's seeing patients that take vicodin or percocet every day for their chronic pain but need a medication adjustment? John said every day they see these patients,john said he tells percocet patients that arent controlled,that Butrans is their only option and once he tells them that,they are fine with it and Butrans works for them.John said some patients get percocet for breakthrough but many dont,they just take ibuprofen or aspirin with Butrans.i asked John if i had his commitment to start more patients on Butrans this week? John committed to do this.
PPLPMDL0020000001	N Royalton	OH	44133	2/22/2012	Introduced Butrans to Donna, delivering core messages & alerting her to box warning. Presented patient profile of Jessica & Emma. After presenting "Emma", I asked Donna how she would typically treat a patient like this. She said she would use NSAID's or Celebrex & then tramadol. She said if that was not working, she would prescribe Vicodin. She also said she sometimes refers out. I asked her how she would determine who she would treat herself vs who she would refer out. She said once someone needs more than Vicodin, she refers out. Discussed Butrans as a once weekly transdermal option to treat these types of patients. Discussed Butrans as a CII opioid with abuse & addiction potential. Also let her know this means refills can be written & prescriptions can be called in. Showed initiation guide table on pg 6 to help demonstrate positioning & discussed OxyContin as an option for appropriate patients beyond Butrans range. Also showed her a demo patch. She said she liked the structure of the patch. She asked about insurance coverage, commenting that cost always seems to be an issue. Shown Butrans formulary grid & gave her new Butrans trial/savings cards, explaining usage. She said she would keep it in mind for the types of patients we discussed.
PPLPMDL0020000001	Parma	OH	44134	2/22/2012	Spoke with pharmacist, Margarita, & reminded her of previous Butrans discussions & asked her if they are stocking Butrans yet. She said no & they have seen no prescriptions for it. I asked if she had received any phone calls about it from patients or physicians. She said no. Positioned Butrans for patients taking short-acting around-the-clock opioids chronically, refilling them month after month. I asked her what she does when she notices that a patient is getting refill after refill of short-acting opioids. She said it depends on a case-by-case basis & usually she just fills the prescription. I asked if she ever calls the physician or makes a recommendation to a patient. She said not usually. Reminded her of patient information booklets & asked if she still has some. She said she does. I asked her to give them to patients who she identifies as potential Butrans patients based on their patient type. She said she would. Also discussed new OxyContin savings cards & gave her a package. Discussed usage & eligibility.
PPLPMDL0020000001	Barberton	OH	44203	2/22/2012	Met Pharmacist(Linda) and explained Butrans information and copy cards and asked if they participate in Relay Health. Pharmacist said that they did not participate but she knows patients on Butrans are they have all three doses in stock. Left Butrans trial cards and copy cards. Mentioned OxyContin and copy card information.
PPLPMDL0020000001	Cleveland	OH	44104	2/22/2012	dr said he's not started anyone on Butrans recently,dr asked about medicaid coverage,we discussed PA requirements for CareSource patients,i asked dr if he had any patients who he will see this week that are appropriate for Butrans? dr said probably so.i showed initiation guide and discussed short-acting opioid dosage ranges that would be appropriate to convert patients to Butrans.dr said ok he will start some patients,focused dr on commercial insurance patients,we discussed initial trial offer program and CareSource patients.
PPLPMDL0020000001	Barberton	OH	44203	2/22/2012	Provided Melissa(ma) information on Butrans and OxyContin. Discussed patient copy card information.
PPLPMDL0020000001	Cleveland	OH	44106	2/22/2012	i talked to dr about patients he feels are appropriate to start on Butrans? dr said patients taking a couple vicodin or percocet,not controlled and asking him for more pills,thats where he talks to patients about Butrans.i asked dr if he see's those patients daily/weekly? dr said the 2 days a week he is here,he does see a lot of those patients.i asked dr what would prevent him from prescribing Butrans? dr said if patients arent willing to wear a patch and try Butrans and if insurance wont cover it.dr said he started a patient on Butrans a week or so ago.i talked to dr about commercial insurance patients trying the initial trial offer and asked dr if he has patients with this insurance that he can start on Butrans today? dr said probably i have to check with Lisa,patient care coordinator.i talked to dr about PA requirements for CareSource patients and asked dr to start a couple more patients on Butrans today,dr agreed to do this.
PPLPMDL0020000001	Cleveland	OH	44106	2/22/2012	dr didnt have a lot of time to talk,dr said he knows Butrans is available and likes that Its a patch but hasnt started anyone.i asked dr who is the appropriate Butrans patient in your mind? dr said patient taking a couple vicodin or percocet for chronic pain but not controlled.dr took initiation guide and had to go
PPLPMDL0020000001	N Royalton	OH	44133	2/22/2012	Dr Marty asked me for the Butrans "rundown." Presented Butrans as a CII, once weekly transdermal system of buprenorphine used to treat patients with moderate to severe chronic pain. Positioned Butrans for patients who he is either getting ready to start on an opioid or who is currently taking short-acting opioids like tramadol or Vicodin around-the-clock daily who may benefit from a once weekly transdermal medication if they have a chronic condition like osteoarthritis or low back pain. He said they do not do any type of chronic opioid therapy at the practice. I asked him what he would do with a patient who is established in his practice who presents with pain from osteoarthritis or low back pain. He asked me what he should do. I told him each physician has their own way of practicing & I was wondering what he would do. He asked if I would know what the right answer was if he told me. I told him I was not sure there was a "right" answer as each doctor runs his/her practice differently. He told me the right answer is to treat the patient with Lyrica or other non-opioid medications or have the patient undergo surgery before ever starting on an opioid.
PPLPMDL0020000001	Lyndhurst	OH	44124	2/22/2012	I reviewed the butrans indication and other selling messages. She said she is also trying to get away from prescribing narcotics (like Dr. Kim) as it has become a headache. She asked about medicare/medicaid coverage. I explained the caresource coverage with a PAI invited her to the speaker program and she said she may come if Dr. Kim attends.
PPLPMDL0020000001	Akron	OH	44320	2/22/2012	gave Dr my products and asked dr if he has used Butrans recently? Dr said no but he has tried it in the past and it worked well. Asked if he could give me a few mutes at a later time to further discuss Butrans and where it would fit in his practice. Dr agreed to next week. OxyContin for his patients in respect to the indication per FPI. Gave DR Dosing and titration guide.
PPLPMDL0020000001	Barberton	OH	44203	2/22/2012	discussion about Kimberly(ma) about Butrans. Gave information on doing and titration, 1 application for 7 days, schedule II, copy card information, no further information discussed with dr.
PPLPMDL0020000001	akron	OH	44319	2/22/2012	gave quick overview to dr about Butrans and discussed savings cards. Dr had no comment or questions. Asked him when is a better time and he wasnt sure. Left OxyContin savings cards
PPLPMDL0020000001	Cleveland	OH	44114	2/22/2012	dr said she started another patient on Butrans recently and patients are doing well.dr said she's thinking of patients taking vicodin who arent controlled and require a medication change,thats where she's comfortable discussing Butrans.dr said she doesnt like to prescribe percocet so Butrans is a great option after vicodin fails.i asked dr if she will see patients taking vicodin for chronic pain,today,that perhaps need a medication adjustment? dr said probably so.i asked dr if i have her commitment to start more patients today and next week on Butrans? dr committed to do this.i asked dr if she has any patients on OxyContin? dr said yes she has a few taking OxyContin.i asked dr if she starts new patients or just maintains these patients on OxyContin? dr said she doesnt start new patients on OxyContin,she doesnt like OxyContin and she worries more about these patients that they will smoke marijuana or have other illegal substances in them.i asked dr if she worries about this issue with her tramadol or vicodin patients? dr said not really.i asked dr if she does random drug screening? dr said yes they do that here and she knows its all opioids with a risk that patients could take illegal substances but she worries more about the patients taking OxyContin.dr said she doesnt like OxyContin,its nothing personal against me she likes me as her representative but doesnt like OxyContin the medication.dr said she will continue starting patients on Butrans,focused dr on BWC and commercial

PPLPMDL0020000001	Mayfield Hts	OH	44124	2/22/2012	I asked doc where he would likely use butrans - opioid naive or opioid experienced. He hesitated and said that he is trying to get away from prescribing narcotics. I explained that if patients are taking tramadol month after month that is a butrans patient. He asked about BWC coverage again. I confirmed the BWC coverage and the commercial plans and the savings cards. He said he would try and will try to attend the 2/29 speaker program.
	Cleveland	OH	44114	2/22/2012	dr said he's starting patients on Butrans every week, no problems, dr said BWC is still paying for Butrans and they got 1 Caresource PA approved recently for Butrans so he's happy, dr said a lot of patients have BWC but also have Caresource or commercial insurance, majority are the caresource patients. dr said he's only had 1 patient develop dermatitis from Butrans and he had to stop the Butrans because the rash was all over application site. dr said this can happen to any patient when wearing a patch so he's not concerned. I asked dr if he has more patients coming in today- this week that are appropriate for Butrans that he can start on Butrans? dr said yes he will continue starting patients on Butrans. dr mentioned that BWC isn't paying for OxyContin for new patient starts and talked about criteria they have to meet in order to get OxyContin approved. I asked dr if he ever starts patients on OxyContin? dr said no he's just maintaining those patients on OxyContin that are doing well and are controlled, or he's taking them off and trying something else. dr said he doesn't like prescribing OxyContin.
PPLPMDL0020000001	Bedford	OH	44146	2/22/2012	I reminded Dr Moufawad of our previous discussion when he told me that he has a few patients on Butrans, is gradually increasing his usage, & is getting good results so far. He said this is still true. I asked if he is writing refills of Butrans. He said he likes to start someone, then see them back every month for a few months to make sure the dose is right for the patient. He added that he has been getting a lot of referrals from primary care physicians with patients taking 6-12 Vicodin 5mg per day. Dr Moufawad said he is putting some of these patients on Butrans & is allowing 2 Vicodin per day for breakthrough pain. I told him it sounds like he is doing the right thing. He said he has reviewed claims for BWC where physicians are putting 2 Butrans patches on patients at a time or are prescribing more than 20mcg at a time. He went on to say that he knows this is not recommended per the full prescribing information. He said that he is decreasing his Suboxone patients & is increasing the number of patients he has on Butrans as he does this. He said the fewer patients he has on Suboxone, the more he will put on Butrans. Discussed new Butrans trial/savings program & eligibility requirements. Also discussed OxyContin savings cards. He said he could use them as he is increasing his usage due to hearing that it is being abused less than Opana. Reminded him that we do not have data to suggest that & that it is still abusable.
PPLPMDL0020000001	Parma	OH	44129	2/23/2012	Myra said she is excited about Butrans & that she was looking forward to talking about it & learning more about it. She said she thinks she has a lot of patients who may be appropriate for it. She went on to say that she has a lot of patients who are taking Vicodin around-the-clock daily who may benefit from a transdermal medication dosed once weekly. She asked what she would do if a patient reported that the patch fell off. Discussed taping the edges with first aid tape if they loosen. Also showed her demo patch. She said she liked the structure of the patch. She asked if patients could manipulate the patch to extract the drug & abuse it. Told her Butrans is a CIII opioid with abuse & addiction potential. Discussed insurance coverage with focus on commercially insured patients who could take advantage of the trial/savings offer. Also discussed CareSource prior authorization requirements, which Myra said was excellent. She asked how quickly after the patch is removed the analgesic effect would wear off. Showed pK profile & told her we have no studies on analgesic effect & plasma levels as each patient will be different. She asked if she could allow patients to continue on their Vicodin with Butrans. Told her patients can take supplemental analgesia. Discussed heat warning & using caution when driving. Showed initiation tool to help assist her in choosing correct Butrans starting dose. Myra said she is very excited to prescribe Butrans for these types of patients.
PPLPMDL0020000001	Cleveland	OH	44109	2/23/2012	dr said he hasn't started anyone on Butrans yet but he's giving patient info booklets to patients and will follow-up with them in a few weeks. I told dr that was fine and im confident he will get there at some point and start a couple patients on Butrans as I know he has the appropriate patients here. I told dr he does have option of OxyContin for his patients, showed visual aid, we discussed appropriate patients and I showed dr formulary grid focusing on medicare and commercial insurance patients starting on OxyContin. dr said he will look at it and keep this in mind.
PPLPMDL0020000001	Cleveland	OH	44104	2/23/2012	dr said she had 1 patient on Butrans that we discussed in past calls and patient had to stop Butrans (AE already reported in past call). dr said she's not thought much about Butrans but she knows who the appropriate patients are for Butrans. I asked dr who are those patients in her mind? dr said patients taking a couple vicodin or percocet for chronic pain not controlled and asking her for something else. I told dr that was great she had a clear vision of who's appropriate but asked dr to think of Butrans when these patients need a medication adjustment, that's where she can start them on Butrans. dr said ok she will do that. I asked dr if there were any barriers she see's in prescribing Butrans, putting insurance aside? dr said no there aren't any she feels fine prescribing the medication. I talked to dr about PA requirements for caresource patients and asked dr if she has 2 patients today or tomorrow that she can start on Butrans? dr said she probably will as she see's chronic pain patients every day. I asked dr if she will at least do that, to gain some clinical experience with Butrans? dr agreed to do this.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	2/23/2012	asked dr what she does for patients on vicodin who need a dose adjustment. Dr said that he will usually either refer them out to a pain clinic or increase the dose. asked dr to use Butrans either before vicodin or when a dose adjustment is necessary. Especially for patients that she may need to increase to 30-40mg/day. Reviewed dosing and conversions. Dr agreed that that would be where she would use Butrans. Reviewed copy card and trial offer information again. Asked if she would give it a try in the appropriate patient. Dr agreed.
PPLPMDL0020000001	Cleveland	OH	44102	2/23/2012	I talked to Nagla, PA, about appropriate patients to start on Butrans. I showed Nagla patient case studies and asked who she see's a lot of? Nagla said a lot of patients like Emma and William. I asked Nagla if Butrans or OxyContin is an option for any of these patients? Nagla said it depends on the dr in this practice as there are 3 HCP's prescribing opioids. nagla said dr carson has started another patient recently on Butrans and dr celeste continues to prescribe a lot of OxyContin, dr bairnsbairn hasn't started anyone on Butrans. Nagla said a lot of it is based on patients willingness to try a patch for their pain and if insurance will cover Butrans. I asked Nagla if she would recommend Butrans to all 3 doctors, when she see's patients like Emma and William? nagla agreed to do this. we discussed PA requirements for Caresource patients, focused Nagla on commercial insurance patients and BWC.
PPLPMDL0020000001	Akron	OH	44310	2/23/2012	Soke to Rhonda (PA) and Dr. Goswami about Butrans. Asked Dr what his uses most for a short acting opioid? Dr uses Vicodin for most patients needing analgesia relief. Reviewed Butrans indication per FPI, dosing, conversions, appropriate patient on vicoden needing a dose adjustment. Dr asked if it was a CII. Discussed that it is a CIII and he can call it in and refill it. Dr very much liked that aspect. Dr said he can see it being used when he knows he can use it as a long acting opioid instead of referring out. <font color=blue><b>CHUDAKOB's query on 03/01/2012</b></font><b>Cliff, in this case, a PA is considered a separate call as PA's are considered prescribers. If there is not a profile on Rhonda and she is a PA, then you can add her in as a new customer. If you need help, let me know.</font><font color=green><b>REICHCL's response on 03/05/2012</b></font></b> did figure out how to add a new customer last week. I will do this for Rhonda. Thanks-<font color=blue><b>CHUDAKOB added notes on 03/07/2012</b></font><b>Thank you!
PPLPMDL0020000001	Cleveland	OH	44113	2/23/2012	I talked to Cynde, MA, to dr, about appropriate patients for Butrans and asked if dr had started anyone on Butrans post my lunch last Thursday? Cynde said no she didn't think so. I showed Cynde patient case study, William, asked if she see's patients like this in this practice? Cynde said yes all the time. I asked Cynde if she would recommend/remind dr that Butrans is an option for these patients? Cynde said yes she will do that. we discussed commercial insurance patients using initial trial offer/savings card program and talked about PA requirements for Caresource patients.
PPLPMDL0020000001	Cleveland	OH	44103	2/23/2012	I showed dr OxyContin visual aid, we discussed appropriate patients for OxyContin. dr said he writes a lot of OxyContin and thinks it's a good medication, only challenge is doing a PA for medical aid patients. I asked dr at what point is OxyContin an option for his patients? dr said when patients have tried all short-acting opioids and pain is persisting he will go to a long-acting opioid. I showed formulary coverage, focused dr on medicare and commercial patients and we discussed PA for medical aid patients and OxyContin. dr said he had to go, gave dr conversion/titration guide.
PPLPMDL0020000001	Cleveland	OH	44103	2/23/2012	saw dr at door, she was busy and couldn't talk but wanted me to talk with Valerie, LPN. I talked to Valerie about OxyContin preferred coverage on medicare and commercial insurance plans, gave formulary grids. Valerie said she knows dr starts a lot of patients on OxyContin so she'll share the info with her. I showed Valerie OxyContin conversion guide, discussed appropriate patients for OxyContin and asked Valerie if she would show dr this info, she agreed to do this.
PPLPMDL0020000001	Cleveland	OH	44103	2/23/2012	talked to Dave, pharmacy mgr, about large short-acting opioid writers in area. Dave said a lot of scripts from Cleve Clinic but he doesn't know names, Dave said dr Boyd and dr Robson write a lot of narcotics he does know that. showed Dave Butrans visual aid, discussed 6 core selling messages with him and asked Dave what features of Butrans stand out? Dave said transdermal delivery and 7 days buprenorphine delivery. showed Dave initiation guide and discussed appropriate patients. I asked Dave if he saw patients within the dosage ranges listed in initiation guide? Dave said yes all the time. I asked Dave if he would be willing to give patient info booklets to appropriate patients so they can talk to their HCP's about Butrans? Dave agreed. we discussed insurance coverage, no Rx filled here yet for Butrans. confirmed OxyContin stocking.
PPLPMDL0020000001	Parma	OH	44129	2/23/2012	I reminded Dr Gigliotti of previous Butrans discussions about how patients do not want to try Butrans when he offers it. I asked him if he is still offering Butrans to appropriate patients. He said he is. I reminded him of new Butrans trial/savings program where most patients with commercial insurance will be able to try Butrans for 28 days at no out-of-pocket cost. He said he offered Butrans to a patient who was taking fentanyl who wanted a higher dose. I told him a patient on fentanyl might be beyond the Butrans range & said OxyContin may be an appropriate option for that type of patient. I asked him to think of Butrans for patients who are taking tramadol or Vicodin a few times per day instead of increasing their daily dose of short-acting opioid. Reminded him that Butrans is a CIII opioid that he can refill & call in. He said he "just has to do it". I agreed.
PPLPMDL0020000001	CLEVELAND	OH	44109	2/23/2012	I talked to Eric, Pharmacist, about 6 Butrans core selling messages. asked Eric what features of Butrans stand out to him? Eric said he likes that Butrans is a patch and dosed once a week but its up to doctors to prescribe. Eric said a lot of chronic pain patients don't want to stop their pills. we talked about patients taking immediate release opioids or non-opioid therapy with Butrans, showed FPI section 2.4, Eric said ok he will keep FPI in case he has questions. I asked Eric if he would be willing to give patient info booklets to appropriate patients, so they can talk to their HCP's? Eric agreed to do this. confirmed OxyContin stocking.
PPLPMDL0020000001	Cleveland	OH	44127	2/23/2012	showed dr Butrans initiation guide, dosage ranges of short-acting opioids. dr said she has a lot of patients taking codeine and percocet and she doesn't want to keep giving more pills so she is going to start a few patients on Butrans and see how they do. dr asked about caresource coverage, we talked about PA requirements, Josie, the MA, said she processes all PA's and will take care of anyone who dr wants to start on Butrans. dr said great she will start a few patients tomorrow and I can follow-up next week.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	2/23/2012	Discussed Butrans Relay for Health with Amy (pharmacist) and asked if she has seen any prescriptions in the pharmacy. She does not recall if there have been any but they do have e-voucher. Explained Butrans dosing, conversions, and 1 patch for 7 days. CII product. Discussed OxyContin dosing, conversions and copy cards. Amy said she would give out the OxyContin copy cards to commercial patients.
PPLPMDL0020000001	South Euclid	OH	44121	2/23/2012	I spoke to Gray about the stocking of Butrans. He said he still does not have it and has not received any request for it. I asked him what pain docs he gets scripts from. He said all of them but he gets a lot of scripts from Drs. Price and Craig for narcotics. I explained the positioning of butrans and the proper application and rotation. He said he would like to see more scripts for something like butrans rather than all the vicodin he sees. I gave him patient info guides and the FPI.
PPLPMDL0020000001	Cleveland	OH	44105	2/23/2012	dr said her last day is 3/27/12 so I will be working with a new dr, cardiologist/internist from St. Vincent's charity hospital. I showed dr Butrans initiation guide, we discussed her patients taking percocet daily for chronic pain being appropriate to start on Butrans. I asked dr if she will start 2 patients tomorrow on Butrans instead of refilling or increasing their percocet? dr said she will do her best tomorrow and see if there are any patients willing to wear a patch for a week. dr said she's on vacation next week so she'll see me in March before she retires. dr asked if there was coverage for medical aid patients? we talked about PA requirements for caresource patients, dr said that will help make it easier for her to get patients starting on Butrans. I talked to dr about BWC and commercial insurance patients trying Butrans too.
PPLPMDL0020000001	Cleveland	OH	44113	2/23/2012	I talked to Cynde, MA and Sade, MA, about dr starting any new patients on OxyContin. Cynde and Sade both said they haven't seen anyone leave office with a new Rx for OxyContin. Cynde said she knows dr writes a lot of OxyContin in nursing home and hospice but that's it, not a lot in office. I showed formulary grid and we discussed medicare patients starting on OxyContin. Cynde said ok she will remind dr.
PPLPMDL0020000001	Cleveland Hts	OH	44118	2/23/2012	Quick call... I reminded doc that oxycontin may be a option for medicare patients that may not be able to get butrans. Explained the similar indication and the lowest branded co-pay (as little as couple of bucks) for silverscript patients. Told him that I am working on the express script issue.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/23/2012	Scheduled lunch though Janet (ma) for March 13th. <font color=blue><b>CHUDAKOB's query on 03/01/2012</b></font><b>Cliff, if all you did was schedule a lunch, then this would not be recorded as a call.</font><font color=green><b>REICHCL's response on 03/05/2012</b></font><b>oops. sorry AGAIN. growing pains with call notes I guess.</font><font color=blue><b>CHUDAKOB added notes on 03/07/2012</b></font><b>OK. There will be those.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/23/2012	spoke with Jose (receptionist) for Falls Family Practice. Dr typically does NOT write narcotics or even vicodin and will most likely be interested. Explained Butrans indication, CII, call in and refill, and 1 patch for 7 days. Allowed to schedule lunch to introduce to doctor Sassano. <font color=blue><b>CHUDAKOB's query on 03/01/2012</b></font><b>Cliff, the receptionist is not considered a non-HCP call. A non-HCP call has to still be on a health care practitioner such as a nurse or an MA. A receptionist does not fall into this category.</font><font color=green><b>REICHCL's response on 03/05/2012</b></font><b>understood. How can I log information in the system to help me remember important office/physician details?(like above). I feel that it will help when placing a HCP call.</font><font color=blue><b>CHUDAKOB added notes on 03/07/2012</b></font><b>We can discuss this when we work together.

PPLPMDL0020000001	Beachwood	OH	44122	2/23/2012	Roberta said she recently wrote a prescription for Butrans & she received a call back from the pharmacist saying that they would not fill the prescription. I asked why. She said the pharmacist told her that as a NP, she cannot prescribe it. Roberta said she consulted the Butrans literature I gave her & re-read that Butrans is CIII. I told her she is correct & that NP's & PA's can prescribe Butrans. I asked what ended up happening to that patient's prescription. Roberta said they ended up writing it under Dr Yokiel's name instead. She did not know what pharmacy this happened at. I asked her to tell me about the patient & asked what it was about them that made her think of Butrans. Roberta said this patient had been on "everything" in the past & nothing worked. She said the patient had fibromyalgia & back pain. She said she talked to Dr Yokiel about it & they decided to give Butrans a try. Discussed appropriate type/range of patients, asking her to try Butrans for patients who are taking Vicodin a few times per day. I asked that she not let the experience with the pharmacy discourage her usage & asked her to continue to try. She said she would. Invited her to 2/29 program. She said she does not think she can attend.
	University Hts	OH	44118	2/23/2012	I discussed the key selling messages of butrans and asked doc what his thoughts were about using butrans in his practice. He said that he is just a creature of habit and he is used to going to tramadol or vicodin. I explained that butrans is a CIII similar to vicodin - can be called in or refilled. He said the problem he anticipates is convincing patients to try a patch over the pills. I asked him to try butrans for a tramadol patient coming in for a dose adjustment. Also explained that one month trial of butrans for eligible patients; maybe that might encourage them to try. He asked about the side effects and I reviewed the AE profile. I reviewed the coverage for butrans and the lack of medicare. He asked about BWC. I confirmed and he thought that was great. He said he needs constant reminding but he is going to give it a try. I reminded him of the oxycontin patient type and the preferred medicare plans.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	2/23/2012	Spoke to Melody(Receptionist) and office manager about seeing doctor. Does not see drug reps during office hours and may possibly be called for lunch. Left Butrans Dosing and titration guide.<font color=blue><b>CHUDAKOB added notes on 03/01/2012</b></font>Same as Dr. Sassano. Melody is not considered a non-HCP call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/23/2012	discussion with Jen about the office patient population. Have commerical patients and a lot of Med D patients. Discussed OxyContin dosing and titration guide. Intermediate doses. Jen said that he has patients on 10mg, 15mg, 30mg and 60mg.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	2/23/2012	Spoke to Melody(Receptionist) and office manager about seeing doctor. Does not see drug reps during office hours and may possibly be called for lunch. Left Butrans Dosing and titration guide.
PPLPMDL0020000001	Cleveland	OH	44143	2/23/2012	Window call...I reminded doc of our discussion of butrans and the key selling messages. I asked him what hesitations he may have about prescribing butrans. He said he cant remember it. He asked that we talk over lunch so that he has more time to ask questions. I invited him to the upcoming speaker programs to learn more. He said he would see.
PPLPMDL0020000001	East Cleveland	OH	44112	2/23/2012	I discussed the Butrans once weekly application and the CIII status (meaning refills and call-ins allowable). He said he still has not seen any patients on it. I told him he may not and that this is a product that PCPs should be prescribing. I reminded him that he said he has some patients taking tramadol that might be appropriate. I asked him to just try one patient on butrans that has failed on tramadol. I showed the butrans initiation guide and the 10mcg dose for patients after 300mg of tramadol. He said he would try it. I asked him the try one BWC patient. I asked him to try appropriate medicare patients on low dose oxycontin and explained the preferred tier 2 status of CCRX and silverscript.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/23/2012	Spoke with Kristina(pharmacist)about Butrans and discussed dosing,CIII product and 1 patch for 7 days. Pharmacy does not have in stock but does have most doses of OxyContin. Agreed to hand out OxyContin copy cards to patients with higher copays.
PPLPMDL0020000001	Independence	OH	44131	2/23/2012	Dr Pai said he would like me to furnish a list of pharmacies that are stocking OxyContin & added that his patients are having a hard time getting OxyContin from Sheliga Pharmacy (E 55th St, St. Clair) & St Vincent Hospital's outpatient pharmacy. He said the pharmacist said he is not carrying it due to safety. I let Dr Pai know that I would try to get a list of nearby pharmacies that are stocking OxyContin so that he could help his patients. He said he would appreciate this very much. He also said that he recently was able to get Butrans approved for a patient who had Medicare. I asked how that patient is doing on Butrans & he said she is doing well. He then said he had to go see patients.
PPLPMDL0020000001	Beachwood	OH	44122	2/23/2012	Reminded Dr Yokiel of previous discussions when he has told me that he prescribes OxyContin frequently, especially for patients who were taking Percocet around-the-clock. I asked if he would take a patient from Vicodin to OxyContin. He said he would & added that he usually tells the patient all the options of long-acting medications available & discusses each of them with them. He said he generally starts patients on 20mg OxyContin. He said cost is sometimes a factor as well. Let him know that OxyContin is covered on approximately 91% of lives nationally & reminded him of savings cards. He asked what is going on with BWC & their long-acting opioid changes made recently. He said he received a letter saying that morphine was basically the only option for treating patients. He said this makes practicing very difficult. I asked if he would continue to prescribe OxyContin where appropriate & he agreed. I reminded him of previous Butrans discussions. He said the problem is that most patients come to him on high doses of opioids & he does not want to try to wean them off before trying Butrans. Discussed appropriate range of patients & told him patients would not need to be weaned off, but rather tapered before starting Butrans. Discussed Butrans as a CIII opioid. Presented new trial/savings program & eligibility requirements. He said if a patient does come in on a few Vicodin per day, he would consider Butrans for that patient.
PPLPMDL0020000001	Akron Independence	OH	44319	2/24/2012	Gretchen(Pharmacist) has not heard about Butrans and do not participate in Relay for Health. Did not have time to take copy cards. Left information. Nothing else learned.
PPLPMDL0020000001		OH	44131	2/24/2012	Presented new Butrans trial/savings cards to Dr Jack, explaining eligibility requirements & reviewing appropriate patient type, focusing on patients taking Vicodin 3-4 times per day for whom he is considering increasing the dose. He said I should not give up & told me it took him over a year to start writing a blood pressure medication that they use all the time now. I told him I had no intention of giving up & asked him how much time has to go by before he will identify an appropriate Butrans patient. He did not answer. I offered new OxyContin savings cards, but he said that it is "taboo" to prescribe OxyContin "in this area". I asked him what he meant by that. He said because of House Bill 93 & then walked into a room.
PPLPMDL0020000001	Sagamore Hills	OH	44067	2/24/2012	Dr Gemma said she did not have much time. Reminded her of previous discussions when she has told me that Butrans has worked well for the patient or two who she has put on it. She said this is still true. I showed her new Butrans trial/savings cards & reviewed eligibility requirements. I asked her to start a few new appropriate patients on Butrans & give them the savings card if they were eligible. She said she would. Also reminded her of OxyContin savings program.
PPLPMDL0020000001	Garfield Heights	OH	44125	2/24/2012	Spoke with floater pharmacist, Ashley, & asked her if she was familiar with Butrans. She said she is. Reviewed with her appropriate patient type, focusing on patients who take tramadol or Vicodin around-the-clock chronically. She said this is extremely common. Discussed Butrans as a once weekly transdermal options for those types of patients. Also discussed OxyContin savings program & eligibility requirements. She said she would leave them for the regular pharmacists.
PPLPMDL0020000001	Sagamore Hills	OH	44067	2/24/2012	Reviewed Butrans core messages with Penny. She said a House Bill recently passed in Ohio that will give mid-level practitioners the ability to prescribe CII medications. I told her I had not heard this. Discussed appropriate range of Butrans patients, pointing out that there are 3 different patient types where she may consider Butrans. Also discussed OxyContin as an option for appropriate patients beyond Butrans. Reviewed Butrans dosing, titration, & ability to take supplemental analgesia with Butrans. Penny said she will continue to keep it in mind for the types of patients we discussed.
PPLPMDL0020000001	Cleveland	OH	44109	2/24/2012	I talked to Allen,Pharmacist,about Butrans 6 core selling messages,Allen focused on Butrans being a CIII so HCP's can call in refills,Allen said he is seeing refills for Butrans but only after patients have taken Butrans for a few months.we talked about HCP's prescribing Butrans in the area.i asked Allen if he's giving patients the Butrans patient info booklet when they get their scripts filled here? Allen said yes patients get the booklet. I asked Allen if he will continue recommending Butrans to appropriate patients by giving booklets so that patients can discuss Butrans with their HCP's? Allen agreed.we discussed insurance coverage,focus on caresource and medicaid coverage of Butrans.
PPLPMDL0020000001	Sagamore Hills	OH	44067	2/24/2012	Presented Butrans patient profiles of Jessica, Emma, & William to Dr Sevier, explaining that there are 3 different patient types where he may consider Butrans. Showed initiation guide pg 6 & discussed range of patients & OxyContin as an option for appropriate patients beyond Butrans range. Also presented new trial/savings program. He said this will help many patients. Discussed eligibility requirements. Reviewed Butrans dosing, titration, & ability to take supplemental analgesia while on Butrans. Also discussed Butrans as a CIII opioid, meaning he can call in prescriptions & write refills. He said he would try Butrans on some patients like the one's we discussed.
PPLPMDL0020000001	Cleveland	OH	44109	2/24/2012	talked to Shelby,Pharmacist,briefly about 6 Butrans core selling messages,Shelby said they have gotten scripts for Butrans and have Butrans stocked.i asked if Shelby knew the HCP's prescribing? Shelby said no time to look today but knows they have Butrans.i asked if they are giving patient info booklets to patients when they get their Rx filled here for Butrans? Shelby said they dont have any booklets,gave them out and i could leave more today.i asked Shelby to show patients application/rotation info and asked if they discuss side effects with patients? Shelby said only if patients have questions.gained commitment to give booklets out to patients when filling Butrans Rx.i asked Shelby if the pharmacists would recommend Butrans,to appropriate patients,and give patient info booklets,so they can talk to their HCP's about Butrans? Shelby agreed.showed formulary grid and we discussed BWC and caresource/medicaid patients.confirmed OxyContin stocking and showed formulary grids,they didnt need savings cards.
PPLPMDL0020000001	Cleveland	OH	44113	2/24/2012	showed dr OxyContin visual aid,we discussed appropriate patients and dr said he does prescribe a lot of OxyContin,likes the medication and doesnt have any problems with insurance.i showed dr OxyContin formulary grid,we focused on commercial and medicare patients starting on OxyContin,i asked dr if he will start a couple new patients on OxyContin today and next week? dr agreed
PPLPMDL0020000001	Cleveland	OH	44113	2/24/2012	showed dr initiation guide,we discussed dosage ranges of short-acting opioids and i asked dr if he saw any patients this week within this range? dr said yes he gave a few patient info booklets this week and is seeing patients back next week to see if they are interested in starting on Butrans.focused dr on commercial insurance patients and caresource patients starting on Butrans.i asked dr if he will see 2 patients today or next week that he can start on Butrans? dr said yes he will do that.
PPLPMDL0020000001	Cleveland	OH	44113	2/24/2012	worked various physician offices
PPLPMDL0020000001	Brooklyn	OH	44144	2/24/2012	Quick call - Pointed out new OxyContin savings cards & invited Dr Detwiler to upcoming Butrans dinner program, letting him know this would be a good opportunity for him to discuss Butrans patient types. He thanked me & walked into a room.
PPLPMDL0020000001	Cleveland	OH	44113	2/24/2012	showed dr emma,patient case study,asked dr if she's seen patients like this,this week? dr said yes she has a lot of patients taking tramadol that arent controlled.i asked dr if she's started any of them on Butrans? dr said no not yet.dr said a lot of patients are hesitant to wear a patch for their pain.we talked about patients starting on Butrans and still taking tramadol,i showed dr FPI,2.4maintenance of therapy section,dr said ok she will see who comes in today and next week.i asked dr if she will start 2 new patients like emma,on Butrans,focusing on commercial insurance,today or next week? dr agreed to do this.focused dr on commercial insurance and tricare patients.
PPLPMDL0020000001	Cleveland	OH	44113	2/24/2012	showed dr butrans patient case study,emma,asked dr whats the clinical benefit of refilling tramadol for a patient like this or converting to another short-acting opioid? dr said she didnt have a clinical reason other than its easy to refill these medications and get patients out the door.i asked dr if she will start 2 patients on Butrans today and next week? dr said she will consider it and if insurance pays for it she will start a couple patients.focused dr on commercial insurance patients.
PPLPMDL0020000001	Uniontown	OH	44685	2/24/2012	Matt(pharmacist) said that the pharmacy has 3 patients on Butrans and have all three doses in stock. Gave Butrans indication, dosing, 1 patch 7 days, and asked what opioids they see most prescriptions for. Matt said they see a lot of vicoden and Ultram. Provided where Butrans is appropriate before Vicoden or when a dose adjustment is necessary.
PPLPMDL0020000001	Mayfield Heights	OH	44124	2/24/2012	Spoke with Mesky, who was filling in for Marcia, about the stocking and movement of butrans. She was not familiar with butrans. I explained the indication and the positioning. She said she see a lot of vicodin scripts filled at other stores. She said she might under some circumstances make recommendation for a long acting agt. Provided patient info guide and intiation guide. Nothing learned.
PPLPMDL0020000001	Cleveland	OH	44109	2/24/2012	worked internal medicine, pm&r, rheumatology and family med dept's - had to leave info for all doctors as i couldnt see anyone. left Butrans FPI,initiation guide,patient info booklet,formulary grid and my business card.i also left dr harrington-internal medicine-OxyContin fpi,conversion guide and formulary grid.
PPLPMDL0020000001	Brooklyn	OH	44144	2/24/2012	Caught Dr Miguel quickly between patients- Gave him a Butrans dinner invitation, encouraging him to attend as this would give him the opportunity to hear more about who is & who is not a good candidate for Butrans. Also pointed out new OxyContin savings cards. He said he would try to attend the program as he did want to hear more about Butrans. I told him to register ASAP.
PPLPMDL0020000001	Akron	OH	44312	2/24/2012	great discussion with Jen and Donna(MA's) about Butrans. Neither had knowledge of product. Provided overview of product with indication, dosing, CIII, 7 day transdermal opioid analgesic. Both drs use tramadol, vicoden and Percocet. Discussed trial offer and copy cards. Also discussed OxyContin with indication per FPI and where to use.

	Mayfield Heights	OH	44124	2/24/2012	Spoke to Lin, a floating pharmacist, about butrans. She had not seen any scripts for and had not heard of it. I explained the indication, positioning and the other key messages. I also explained the use of supplemental analgesics. She did ask how it differs from fentanyl. I told her no head to head data and the patient type is different. I provided FPI and patient info guide. She has not noticed any issues with oxycontin. I explained the conversion guide and left it as a reference.
PPLPMDL0020000001	Akron	OH	44312	2/24/2012	great discussion with Jen and Donna(MA's) about Butrans. Neither had knowledge of product. Provided overview of product with indication, dosing, CIII, 7 day transdermal opioid analgesic. Both drs use tramadol, vicoden and Percocet. Discussed trial offer and copy cards. Also discussed OxyContin with indication per FPI and where to use.
PPLPMDL0020000001	Akron	OH	44319	2/24/2012	caught dr as he was leaving for lunch. Asked dr if he has used Butrans since I saw him last. Dr said no but appreciated the review on the last visit. Asked dr if he has vicoden patients on commercial insurance. Dr said he does and knows that is the place for Butrans. Asked dr to get more time on next visit to discuss further. Dr agreed.
PPLPMDL0020000001	Sagamore Hills	OH	44067	2/24/2012	Dr Lenox said he was glad I came in today because while he has not yet written Butrans, he plans to. He went on to say that he has been gathering the information he has on it in a folder & he intends to prescribe it. Showed him patient profiles of Jessica, Emma, & William, showing him that there are three different patient types where he may consider Butrans. When we were discussing "Emma", Dr Lenox said he thinks there are too many tolerability issues with tramadol. He said his patients always end up complaining about nausea, headache, & dizziness with tramadol. I reminded him that Butrans is also & opioid & also can have those types of adverse events as many opioids do. He said he knows but tramadol always gives his patients a problem. He said he thinks the true ideal place for Butrans is in place of Darvocet as there was not any option in his opinion for those patients when Darvocet was taken off the market. Reminded him of once weekly transdermal dosing & ability to take supplemental analgesia. Also discussed new Butrans trial/savings program, which he said will help patients who can use them. Discussed OxyContin q12h as an option for patients beyond Butrans range. Dr Lenox said again that he plans to prescribe Butrans.<font color=blue><b>CHUDAKOB's query on 03/01/2012</b></font>Ashleigh, while we do not promote Ryzolt, we do still have the product and therefore are required to report AE's for the product, particularly when the brand name is not known. This is probably something you should call in. While it is not on a specific patient, you should still call this in. In addition, remember that Darvocet was indicated for mild to moderate pain and therefore depending on the patient type, Butrans may not be appropriate.<font color=green><b>APSEGAS's response on 03/02/2012</b></font>I will call this in. I was not aware of Darvocet's indication.<font color=blue><b>CHUDAKOB added notes on 03/05/2012</b></font>Thank you.
PPLPMDL0020000001	South Euclid	OH	44121	2/24/2012	I reviewed the butrans key selling messages and asked doc what her thoughts were on using butrans in her practice. She said that she would really prefer to prescribe something butrans over vicodin but she just doesn't think she has enough chronic pain patients that would be appropriate for butrans. I asked her to consider butrans for patients taking tramadol monotherapy and coming in for a dose adjustment. She said she will try to remember it. I explained the trial offer with the new savings cards. She thought that might be incentive.
PPLPMDL0020000001	Uniontown	OH	44685	2/24/2012	spoke to through window. Asked if he remembers Butrans. Explained indication per FPI, CIII product, 1 patch 7 days and asked if he uses Tramadol and/or vicoden? Dr said that he uses some but not much. Refers to pain management early. Gave dosing and titration guide. set up lunches.
PPLPMDL0020000001	N Royalton	OH	44133	2/24/2012	Spoke with pharmacist, Matt, who said he had very little time. Introduced new Butrans trial/savings cards, along with eligibility requirements. Also reviewed Butrans appropriate type, focusing on patients who take tramadol or Vicodin around-the-clock month after month. Matt said he thinks they have one or two customers on it. Also gave him new OxyContin savings cards & discussed eligibility requirements & cash-paying patient usage.
PPLPMDL0020000001	Cleveland	OH	44121	2/24/2012	Doc said he has been prescribing oxycontin and has initiated patients recently. I showed him the medicare pull through pieces and explained the preferred tier 2 coverage. He said he has had more PA required. He mentioned that he is using a lot of cymbalta before going to an opioid and cymbalta also requires a PA. I asked when he would start a patient on oxycontin. He said when he has tried other things without succes. I explained the similar butrans indication for patients with commercial coverage. I showed him the formulary grid. He was hesitant to believe no PA is required for butrans. I focused him on the plans on the grid and be sure to give a savings card. I explained the one month trial offer.
PPLPMDL0020000001	Lyndhurst	OH	44124	2/24/2012	HCP said she enjoyed the speaker program with Dr. Mourfawad although he was a little difficult to hear at times. She thought his talk was in line with what Dr. Reed had told her. She said she had prescribed butrans a couple of times but has not gotten any feedback yet. One patient was on vicodin several times a day and she started them on 10mcg. I told her that was a perfect dose. the other patient she believes was a patient of Dr. Reeds that came for a refill. I reminded her that butrans can be called in or refilled. She said she likes the idea of a once a week patch. She did give patients the savings cards with a trial month.
PPLPMDL0020000001	Akron	OH	44304	2/24/2012	met Lynn(floatar pharmacist) and Rob (pharmacist). Gave Butrans indication, dosing, conversion scale, CIII product and trial offer/savings cards. Asked if they had in stock? Butrans not in stock. Liked the CIII and that it can be called in and refilled.
PPLPMDL0020000001	Parma	OH	44129	2/24/2012	Caught Dr Roheny quickly between patients. I handed him an invitation to the 3/13 Butrans dinner program in Independence. Reminded him of the several times he has asked me what other physicians are saying about Butrans. Encouraged him to attend & told him this would be a good opportunity to discuss Butrans with physicians from the surrounding area & to learn more about their experience. He said he would consider. Also gave him an OxyContin Medicare D formulary grid, pointing out favorable coverage. Reminded him that OxyContin is a q12h dose of oxycodone.
PPLPMDL0020000001	Cleveland	OH	44121	2/24/2012	Quick call...Doc could not stay for lunch as he was an hour behind. I introduced butrans and the key selling messages. gave him a fomulary grid a initiation guide. He asked me to stop taking at that point.
PPLPMDL0020000001	Lyndhurst	OH	44124	2/24/2012	Quick call....as was was going in with a new patient. I invited her to one of the upcoming speaker programs. She said she would take a look at it later but said she has write a couple of scripts. Nothing more learned.
PPLPMDL0020000001	South Euclid	OH	44121	2/24/2012	I discussed the butrans indication, positioning, and key selling messages. He had questions about side effects and application sites. I reviewed the AE profile and how to properly apply. I reviewed the initiation guide which he wanted to keep. Reviewed the managed care and the savings cards. He said he would give it a try.
PPLPMDL0020000001	Lakewood	OH	44107	2/27/2012	I reviewed the OxyContin conversion guide and that the 7 tablet strengths are options when patients are taking short acting hydrocodone around the clock. I asked how often she converts patients like this to OxyContin and she said that she does when she feels they need something long acting. Reminder that Butrans is also another long acting option before patients are taking larger doses of opioids.
PPLPMDL0020000001	Parma	OH	44129	2/27/2012	Spoke briefly with pharmacist, Heath, & discussed new Butrans trial/savings program & eligibility requirements. Also discussed OxyContin savings cards/eligibility. He said he will keep an eye out but that he had a line of waiting customers so he could not talk. Let him know I would follow up another day.
PPLPMDL0020000001	Cleveland	OH	44104	2/27/2012	I showed dr OxyContin visual aid, we discussed appropriate patients for OxyContin,dr said he has a lot of patients taking percocet for their chronic pain and he does convert some of them to OxyContin.i asked dr what factors are involved in that decision? dr said several factors and it varies from patient to patient.I asked dr if he has 2 patients coming in today or this week,taking percocet for chronic pain but will need a medication adjustment? dr said probably so that appears every day.i asked dr if he will start those patients on OxyContin? dr agreed.we discussed 7 tablet strengths and i asked dr to focus on CCRX and UHC medicare part d patients to start on OxyContin,dr said ok.left formulary grids and told dr i would follow-up next week.
PPLPMDL0020000001	Parma	OH	44129	2/27/2012	Discussed Butrans appropriate patient type with Dr Ortega, focusing on appropriate patients who are taking short-acting around-the-clock opioids chronically, for whom he would otherwise change the medication or increase the dose. He said he is still trying patients on it. Reminded him of details of new trail/savings program & reviewed eligibility requirements. He said he thought that was a good idea. Also discussed OxyContin as an option for appropriate patients beyond Butrans range & reminded him of available savings for eligible patients.
PPLPMDL0020000001	Bedford	OH	44146	2/27/2012	Showed Dr Haddad the new OxyContin conversion/titration guide, pointing out the oxycodone immediate-release to OxyContin conversions. He said he is comfortable prescribing OxyContin where appropriate. Also invited Dr Haddad to upcoming Butrans dinner programs. He said he will go to the 3/13 program & asked me to register him. Reminded him of appropriate Butrans patient type/range, positioning OxyContin for appropriate patients beyond Butrans range. Focused on patients taking lower doses of short-acting around-the-clock opioids chronically.
PPLPMDL0020000001	Cleveland	OH	44102	2/27/2012	I talked to Amonte,Pharmacist,about 6 Butrans core selling messages,asked Amonte what features of Butrans really stood out to him? Amonte said transdermal delivery and 1 butrans 7 days buprenorphine delivery.we talked about appropriate patients,i showed Amonte visual aid,he focused on opioid experienced patients saying they have a lot of these types of patients.Amonte asked about medicaid/caresource coverage of Butrans? we discussed PA requirements for Caresource patients and discussed initial trial offer program for commercial insurance patients.i asked Amonte if he would hand out patient info booklets to patients he feels are appropriate for Butrans so they can talk to their HCP's about Butrans? Amonte said yes.
PPLPMDL0020000001	Lakewood	OH	44107	2/27/2012	Quick follow up as Dr was behind today, I reviewed the invitation guide and the appropriate starting dose for patients taking short acting around the clock. I checked the savings cards with Patty, they still had a few but he has been handing them out. She said that he did start another new patient today and hopes that managed care is covered. I asked what plan, she did not remember, but a commercial plan.
PPLPMDL0020000001	Akron	OH	44333	2/27/2012	Asked Dr if she remembered Butrans and if she recalls and success with the product. Dr said she has used it but needs to be refreshed. Dr. did not have time to talk much. Reminded Butrans is 7 days and left FPI
PPLPMDL0020000001	Independence	OH	44131	2/27/2012	Spoke with floatar pharmacist & reviewed Butrans core messages. Also showed patient information booklet, discussing how they can be used in patient counsel or given to patients based on the patient's type. Reviewed appropriate range of patients for Butrans, focusing on those taking around-the-clock tramadol or Vicodin chronically. Discussed new Butrans trial/savings program & reviewed eligibility requirements. Also discussed OxyContin savings program. She said she would leave information for the regular pharmacist.
PPLPMDL0020000001	Akron	OH	44313	2/27/2012	Discussed Butrans with pharmacist, indication, dosing, and CIII product. Reviewed new trial cards and pharamcy does have e-voucher.
PPLPMDL0020000001	Independence	OH	44131	2/27/2012	Spoke with pharmacist, JT, who said he recently filled a Butrans prescription. He said it was written by Dr Hernandez for a BWC patient & was for the 20mcg dose. Presented new Butrans trial/savings program & reviewed eligibility requirements. Also gave him new OxyContin savings cards. He said while he does not move a lot of it, he does have some private insurance customers who are on it.
PPLPMDL0020000001	Westlake	OH	44145	2/27/2012	I asked Dr if he had a chance to give a few patients a free trial of Butrans to see what he thinks. He had not, I asked if he would try Butrans for patients taking tramadol around the clock like Emma before going to vicodin. He said that he would. I reviewed that low dose OxyContin is still an option for patients taking 4 vicodin around the clock.
PPLPMDL0020000001	Cleveland	OH	44106	2/27/2012	talked to dr about patients like emma,patient case study,dr said he see's these patients all the time and has been considering Butrans as an option but depends on insurance covering Butrans.dr asked about caresource coverage.we talked about PA requirements,i asked dr if this seemed feasible to do? dr said yes he will start a few patients on Butrans and see what happens.showed patient info booklet to dr,application/rotation section and asked dr to discuss with patients and hand to them before they leave office with a Butrans Rx,dr agreed.
PPLPMDL0020000001	Parma	OH	44129	2/27/2012	Handed Butrans dinner invitations to Dr Moysaenko & reviewed each program's details. He said he would not be able to attend any of them due to scheduling conflicts. Positioned Butrans for patients taking tramadol or Vicodin around-the-clock chronically & reviewed details of Butrans trial/savings program. Also reminded him of favorable managed care coverage for OxyContin. He said he didn't have time to stop & talk today.
PPLPMDL0020000001	Cleveland	OH	44113	2/27/2012	dr said he started a couple more patients on Butrans last week and will continue doing so.dr said Butrans definitely has a place in his practice and he is considering it for patients.i asked dr if i had his commitment to continue starting patients on Butrans? dr said yes,focused dr on caresource,BWC and commercial insurance patients.
PPLPMDL0020000001	Lakewood	OH	44107	2/27/2012	I asked Dr what his hesitation is in trying Butrans. He said he doesn't know, just hasn't had to change a lot of patient's medication. I asked if he would think of just 5 patients taking tramadol around the clock who he can offer the free trial to and he agreed. We reviewed the initiation guide as to the starting dose based on how much tramadol the patients are taking.
PPLPMDL0020000001	Cleveland	OH	44106	2/27/2012	worked apm dept, left info for FM doctors
PPLPMDL0020000001	Cleveland	OH	44106	2/27/2012	dr said he started a patient on Butrans,we talked about why he chose Butrans for the patient,dr said patient was taking tramadol not controlled and he wanted to try Butrans on this patient,we talked about Caresource patients and the PA requirements for Caresource patients and initial trial offer for commercial insurance patients.i asked dr if he has more patients coming in this week that he can start on Butrans? dr said probably so.
PPLPMDL0020000001	akron	OH	44333	2/27/2012	Asked Dr if he had any patients that are currently on Ultram or Vicoden who are not getting adequate pain relief or ready for a dosing adjustment? Dr. said he refers out many patients with cronic pain but he has some. Discussed Butrans indication, dosing, titration, CIII, 1 patch 7 days for an extended release option. Discussed copy cards. Dr said that he does have a couple of patients on private insurance whom may fit the indication for Butrans. Asked Dr to use product for those patients.
PPLPMDL0020000001	Lakewood	OH	44107	2/27/2012	Dr said that he's just been too busy to think of anything new like Butrans. When he goes through his day, it's just hard to stop and thinks of something different when he is in the habit of going to vicodin. I asked if he would keep the trial cards for Butrans somewhere he might remember to just give them to patients to try and that most patients will be free. He agreed. Reminder that OxyContin is still an option for Med D patients AARP and CC



PPLPMDL0020000001	Cleveland	OH	44109	2/27/2012	dr said he started a couple more patients on Butrans in the last week or so,we talked about why he chose Butrans for these patients,dr said patients were taking vicodin and not controlled so he told them about Butrans and started them.dr focused on vicodin patients,showed dr initiation guide we discussed initiation and titration of Butrans and i asked dr if he has more patients like this that he can start on Butrans? dr said he does and will start more.i talked to dr about Caresource PA requirements and asked dr if he will focus on a couple caresource patients, BWC and commercial insurance patients to start on Butrans this week? dr committed to do this.
	Cleveland	OH	44106	2/27/2012	dr said he started a patient on Butrans last week,asked dr to tell me more about this patient and why he chose Butrans.dr said patient was maxed on tramadol and needed something else for the pain so he talked to the patient about Butrans and started the patient.we talked about initiation and titration,showed guide,asked dr if he has more patients like this coming in this week? dr said probably so.i asked dr if he will start a few more patients on Butrans,focusing on commercial insurance patients or Caresource? dr agreed
PPLPMDL0020000001	Cleveland	OH	44114	2/27/2012	i talked to Joel,Pharmacy manager,about safeguarding your meds brochure,he said i could leave them and he would hand them to patients.we talked about importance of opioid education for him and pharmacy staff,joel said i could leave any certified medical education with him and he will look it over.i gave the med educ catalog to him.we talked about OxyContin stocking and i showed him OxyContin conversion guide we discussed potency and a few examples of short-acting opioids conversion to OxyContin,joel thanked me for info and couldnt talk more
	Cleveland	OH	44145	2/27/2012	Discussed Intermezzo amendment and the need for a quick turnaround signature from Tony, which he said shouldn't be an issue. They already signed the Senokot amendment which he thought was taen care of last week. I presented Intermezzo slide deck and insomnia brochure. He questioned why the T-Max was affected if it's a sublingual medication - send this to Medical Services for follow up. He didn't provide much feedback other than stating this is more of a retail medication, maybe a little hospital and not so much LTC. He confirmed our contracting for LTC which i reminded him we won't contract there for anything. We discussed the parameters we follow for educational programs and speakers for Purdue. I provided the topic selections where we thought institutional diversion would be a good choice for their upcoming conference in Miami in May or Dallas in Sept. This conference would be attended by hospital RPHs. The Pain PACT brochure brought little discussion so there didn't seem to be any interest in pursuing this. Finally he asked for more data when we make the payments for our contracts - this would go to Tara Goldburg.
PPLPMDL0020000001	Fairlawn	OH	44333	2/27/2012	Asked Jessica and pharmacy technician if they have Butrans in stock? Jessica said they do have the 5mcg and 10mcg in stock. Jessica said the just got a prescription filled last week from Dr Shah and one from Dr Lababidi. The pharmacy does participate in relay health and have had patients whom have used it.Left OxyContin savings cards. Pharmacist agreed to hand out.
PPLPMDL0020000001	Akron	OH	44333	2/27/2012	Dr said he was worried that there was no longer a Purdue rep in the territory. Staff has called Purdue a couple of times to ask for copay and product information. Dr said that he used Butrans twice last week and is out of copay cards. Wanted as much as i could leave. Dr also said he wants OxyContin information and copay cards. Asked dr for a couple of minutes next visit. Dr said he will try.
PPLPMDL0020000001	Independence	OH	44131	2/27/2012	Passed back Butrans dinner invitations for 3/8 & 3/13. I asked Dr Trickett if she thought she could attend either. She said perhaps the 3/13 program but said she is not sure. Encouraged her to attend so she may learn more about Butrans & have the opportunity to discuss it with various physicians & area experts. Positioned Butrans for patients taking tramadol or Vicodin around-the-clock chronically. Also discussed OxyContin for patients beyond Butrans appropriate range as a q12h dose of oxycodone. Reminded her of Butrans trial/savings program & eligibility requirements. She said she had forgotten about the new trial program.
	Cleveland	OH	44106	2/27/2012	dr said she's not given much thought about Butrans but if she is working with an attending that mentions Butrans or wants to start a patient on Butrans,she will consider that option.i asked dr whats holding her back from considering Butrans for a patient like Emma,patient case study? dr said if patients are maxed on tramadol she will usually go to vicodin and see if that controls the patients pain.i asked dr if Butrans would be an option right after tramadol fails? dr said it might she's just not given much thought to it.i asked dr if she would give some thought to this patient type,emma,and consider Butrans for a couple patients this week that are ready for a long-acting opioid? dr said she will consider it.dr asked about medicaid coverage,focused on caresource for Butrans? we discussed PA requirements for Caresource patients and i asked dr if she could start 2 patients on Butrans this week? dr said she will see who comes in and if appropriate will start patients on Butrans.<font color=blue><b>CHUDAKOB added notes on 03/08/2012</b></font>Dr. hasn't given much thought because she is not sold on the product. Once you find out what her concern is, and are able to address, you will have broken through a major barrier.
PPLPMDL0020000001	Parma	OH	44129	2/28/2012	Invited Dr Chagin to the Butrans dinner program on 3/13 & asked him to attend so that he could learn more about Butrans & could discuss it with other physicians & area experts. He said he would attend & asked me to register him. Also gave him Partners Against Pain pain scales & discussed using them in patient rooms to help patients describe their pain. He said resources like this are helpful to him. Also discussed appropriate patient types for Butrans. He said he has not had any negative feedback. I asked if patients are getting refills. He did not answer. He asked me what the most common starting dose is. Showed initiation/titration guide, pointing out that 5mcg & 10mcg are the two starting doses, with the ability to titrate up to 20mcg max. He said he had recently put a patient on the 5mcg & they asked for an increase in dose. He said he titrated this patient to the 10mcg. I told him it sounds like he did the right thing. Also reminded him of new Butrans trial/savings program & explained it. He said this would be helpful when he starts new patients. Discussed OxyContin q12h as an option for appropriate patients beyond Butrans range.
PPLPMDL0020000001	Parma	OH	44129	2/28/2012	Reminded Dr Gallagher of previous Butrans discussions & asked him what his experience has been. He said he does not have any patients on it, not because he has anything against it, but rather because he just hasn't remembered it. Presented 3 patient profiles, pointing out that there are 3 different patient types for whom he may consider using Butrans. Showed "Jessica" & asked what he may usually do for a patient like this. He said generally prescribe Mobic or possibly tramadol. Discussed Butrans 5mcg as a possible option. Presented "Emma" & asked how common this is. He said somewhat common. Discussed Butrans as a possible option for that type of patient. Also discussed titration & ability to take supplemental analgesia with Butrans. Went through "William" profile. Dr Gallagher read the entire profile carefully & said he has a few specific patients who he is thinking of who fit this profile very closely. He said they are each taking Vicodin 3 times a day & have stated that while they do get some relief from it, they are frustrated that they do not get more relief. I asked if these patients had commercial insurance. He said they do. Presented details of new Butrans trial/savings program. Discussed Butrans as a CII opioid with abuse & addiction potential. Also discussed ability to write refills & call in prescriptions. I asked if he would prescribe Butrans for these specific patients & he agreed. Discussed OxyContin as an option for appropriate patients beyond Butrans range.
PPLPMDL0020000001	Euclid	OH	44132	2/28/2012	Spoke to Jordan about the key selling messages of butrans and the positioning. He thought doc might have a lot of appropriate patients but he was not aware of him prescribing it yet. I left a reminder invite to the 2/29 program as doc has RSVP'd. He said he was not sure if he would talk to him before then but he would try.
PPLPMDL0020000001	Cleveland	OH	44195	2/28/2012	i talked to Anne,NP,about patients she's treating and if they looked like william,patient case study,anne said every day she treats patients like that.i asked Anne if she is considering Butrans for patients like William? Anne said if dr stanton-hicks is willing to start patients on Butrans,she will,anne said dr has started a few patients on Butrans and they are doing good so she will see if he starts more patients.i told anne that she can prescribe Butrans because its a CII,Anne said she knows that but always has dr approval for all of their patients as she works so closely with him.we talked about 6 core selling messages,anne focused on vicodin and percoct patients trying Butrans and the fact that Butrans is a once weekly dosing option.i asked Anne if she will recommend Butrans to dr,for appropriate patients like william? anne agreed.i focused anne on BWC and commercial insurance patients.anne asked about caresource coverage,we discussed PA requirements,anne said that was much easier than other PA.
PPLPMDL0020000001	Twinsburg	OH	44087	2/28/2012	Lou (pharmacist) said he has still not dispensed any Butrans. I asked if he fills a lot of prescriptions there for chronic short-acting opioids like tramadol or Vicodin. He said he fills "tons". Discussed appropriate patient type, once weekly dosing, & ability to take supplemental analgesia with Butrans. Also gave him new package of OxyContin savings cards. He said he dispenses "a lot" of OxyContin. He said he sometimes turns people away with prescriptions for narcotics out of safety concerns. I told him he is correct in being cautious. Focused him on appropriate patients who take chronic short-acting opioids who may benefit from the option of a q12h dose of oxycodone. He said he realizes that there are legitimate patients out there who need relief.
PPLPMDL0020000001	Cleveland	OH	44130	2/28/2012	Invited Dr Diab to Butrans dinner program on 3/8. He said he would not be able to attend as he would not get out of his office until 6 that day. I updated him on CareSource's prior authorization requirements. Discussed Butrans for patients who are taking tramadol around-the-clock chronically. Also gave him OxyContin Caremark formulary announcement & let him know patients with that plan can obtain OxyContin at the lowest branded co-
PPLPMDL0020000001	Cleveland Heights	OH	44118	2/28/2012	Window call...I reminded doc of the butrans patient type/positioning and that he expressed interest in attending the program tomorrow. I asked if he is still attending. He said he plans on being there and the company has been faxing regular reminders as well.
PPLPMDL0020000001	Westlake	OH	44145	2/28/2012	Quick call, I reviewed the lower doses of OxyContin as an option to patients taking 4 hydrocodone per day. He said that he does still have many patients using OxyContin and he is not opposed to started new patients who
PPLPMDL0020000001	Cleveland	OH	44195	2/28/2012	i talked to dr about patients taking vicodin daily for their chronic pain that need a medication adjustment and considering Butrans.dr said he started a couple patients on Butrans,patients are doing well,he will start more.i talked to dr about BUP3015,discussed inclusion criteria and 30% reduction in pain,i asked dr if that was clinically significant? dr said yes.i asked if it was enough to prescribe more Butrans? dr said yes.i asked dr if he will see 2 patients this week that he can start on Butrans? dr said he didnt know who was coming into the clinic,he will keep Butrans in mind.focused dr on BWC,commercial insurance patients and we discussed Caresource PA
	Cleveland	OH	44195	2/28/2012	worked apm dept, chronic pain and neurology-left Butrans initiation guide,dinner invites for 3/2012 dinner programs,formulary grid and my business card, same info left for rheumatology and internal med HCP.left OxyContin fpi,conversion guide and formulary grids for Oncologists-left business card with each secretary who gets info to HCP's
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/28/2012	Asked Dr if he has received information on Butrans in the past. Dr said know but he wanted more information and didnt have time to discuss. Nothing else learned. Left FPI.
PPLPMDL0020000001	Cleveland	OH	44102	2/28/2012	showed Nagla,PA,initiation guide,asked if she see's patients here taking these short-acting opioids? nagla said yes all the time every day.i asked how Butrans could fit into algorithm,Nagla said she thinks after patients are maxed on short-acting opioids,a long-acting opioid is appropriate.i asked Nagla if she's recommended Butrans to any of the HCP's.Nagla said she works closely with dr baishnab every tuesday and thursday and is working with him to start a couple patients on Butrans.nagla said dr celeste started a couple patients on Butrans,awhile ago,and she did talk to patients about Butrans and gave patient info booklets.nagla said she thinks the challenge is that they have so many savings cards they dont remember to grab one and start patients on Butrans.nagla said i should place 1 5-pack of Butrans initial trial offer cards with booklets in each exam room,5 total,to ensure the HCP's think of Butrans.i left the cards and booklets and we placed 1 pack in each exam room.i asked Nagla for her commitment to recommend Butrans to all 3 of the HCP's she works with and gain more clinical experience with Butrans,nagla agreed to do this.
PPLPMDL0020000001	Cleveland	OH	44130	2/28/2012	Dr Fedorko said he just prescribed Butrans for a patient yesterday. I asked him what the patient was taking prior to being switched to Butrans. He said it was actually a refill & he does not remember what the patient was taking before. I told him his patient must be doing well on Butrans if they are requesting refills. He said she is happy with it. Positioned Butrans for patients taking tramadol or Vicodin around-the-clock for whom he would otherwise increase the doses of their current medication. Reminded him of ability of patients to take supplemental analgesia with Butrans. He said he will continue to look for patients.
PPLPMDL0020000001	Cleveland	OH	44112	2/28/2012	Quick call as doc was leaving for the day. I showed him the butrans invites with 3 options, the first being tomorrow. I reminded him that he previously thought he might like to attend as it was convenient to his home. He said he could not attend tomorrow but maybe in a couple of weeks. Let him know about the preferred tier 2 coverage of oxycontin of silverscript and CCRX.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	2/28/2012	Met pharmacist (Bob) and asked if he had Butrans in stock. Bob said that they did have the 5mcg and 10mcg in stock due to a few patients on the product. Asked if they participated in Realy Health. Giant Eagle does.
PPLPMDL0020000001	Cleveland	OH	44119	2/28/2012	Spoke to Marianne Monreal about the oxycontin and butrans patients types. She liked the pain scales that Purdue makes and she requested them from the company but she never received them. I provided 2 packs of the pain scales and butrans patient profile.
PPLPMDL0020000001	Olmsted Falls	OH	44138	2/28/2012	I reviewed the key messages for Butrans and asked his thoughts on where it might fit into his practice. He said that he can see it being used as an option for those patients who probably need to go to an opioid but he is hesitant to go to vicodin. We reviewed the initiation guide based on what patients are already taking per day, we reviewed the managed care and trial program. Dr said that he would like to try it and agreed to try 5 patients on Butrans. We reviewed OxyContin as an option and Dr said that he does not usually initiate new patients, he will send them to pain management. <font color=blue><b>CHUDAKOB's query on 03/09/2012</b></font>If he is hesitant to go to Vicodin, couldn't this be an option before Vicodin?<font color=green><b>HOLUBA's response on 03/14/2012</b></font>Yes, this is what the dr and i talked about and where i will be discussing it, i'll fix my next call objective.<font color=blue><b>CHUDAKOB added notes on 03/15/2012</b></font>Great! Glad to hear it.
PPLPMDL0020000001	Berea	OH	44017	2/28/2012	I noticed that Dr has not yet used any cards for Butrans and i asked if he would start a few patients who are taking tramadol or vicodin around the clock instead of increasing their dose. He said that he will. I asked if he would come to an upcoming dinner program and he asked if i had another invite for him to take a look at. Reminder that OxyContin is still an option for those patients on Med D.
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	Cleveland	OH	44195	2/28/2012	kathy,pa,said she has a couple patients on Butrans,they are doing well and she didnt need anything right now.i asked Kathy what these patients were taking that prompted her and the dr to start patients on Butrans? kathy said patients were taking short-acting opioid analgesics,not controlled and asking for something else so doctors wanted to try Butrans and she gets patients started on Butrans,once dr makes the decision.i showed emma and william,patient case studies and asked kathy if she is treating patients like them? kathy said yes everyday.i asked Kathy if she would recommend Butrans for these types of patients,to any doctors she works with here in the clinic? kathy agreed to do this.we discussed patient info booklets being given to patients when started and i asked kathy if she would give Butrans patient info booklets to those patients she feels are appropriate but perhaps still hesitant in trying Butrans? kathy agreed to do this.focused Kathy on BWC and commercial insurance patients and we discussed caresource PA requirements.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/28/2012	Dr said he is continuing to use OxyContin on a regular basis and said the copy cards left last time were given out in 4 days. Provided more copy cards. Nothing else learned.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/28/2012	Asked dr if he has had any clinical use of Butrans? Dr said no but he does know about buprenorphine. Dr did not have time to discuss. nothing else learned. Left FPI.
PPLPMDL0020000001	Parma	OH	44129	2/28/2012	Quick call- i reminded Dr Tolentino of previous conversations about Butrans & reminded her of her interest in trying it for a few appropriate patietns. She said she has not yet done that but said that she plans to attend one of the upcoming dinner programs. i asked her which one. She said it is the one Dr Paat is going to in March. i let her know this would be an excellent opportunity to discuss Butrans in more depth with various area practitioners & experts to get a better idea of where it might fit into her practice.
PPLPMDL0020000001	Cleveland	OH	44113	2/28/2012	deb,pa,said she just started a patient on Butrans today but the PA was denied.i asked what type of insurance patient had? Deb said it was Caresource patient taking ultram and has tried vicodin in the past,she wanted to start this patient on Butrans but PA not approved.we talked about PA requirements for Caresource and Deb said she will try again and see what happens.i asked deb if she will see more patients this week that she can start on Butrans? deb said yes just leave booklets as all patients get one that she starts on Butrans and some patients take booklets home to read before deciding if they want to try a patch.focused deb on commercial insurance patients,BWC and caresource
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/28/2012	Asked dr if he has patients that present with chronic low back pain or osteoarthritis? Dr said yes and that he typically will prescribe ultram or vicoden. showed dr patient profiles and used "william" on hydrocodone not controlled with chronic low back pain. Showed dosing and titration scale to show conversions. Dr asked where he would use OxyContin? Showed on dosing conversion chart. Over 40mg/day hydrocodone may not be appropriate for Butrans and would be for OxyContin. Explained trial offer and copy cards. Asked Dr if he would use Butrans for the next patient fitting the profile outlined and dr agreed.
PPLPMDL0020000001	Cleveland	OH	44127	2/28/2012	dr said she started 1 patient on Butrans,i asked what patient was taking and why dr decided to start patient on Butrans? dr said tramadol and patient was maxed out and wanted more pills or something else for the pain.dr said PA was covered by Caresource and was easy for Josie,receptionist/MA to process,so she's happy.we discussed initiation and titration,showed guide to dr,i asked dr when will she follow-up with this patient? dr said in 4 weeks,i asked if dr gave patient the Butrans patient info booklet? dr said yes.i asked dr if she has more patients like this 1,coming in this week that she can start on Butrans? dr said probably so and she will start more patients on Butrans and see what happens.focused dr on Caresource and commercial insurance patients.
PPLPMDL0020000001	Cleveland	OH	44109	2/28/2012	dr said he started 1 patient on Butrans,in the westlake ofc,i told dr that was fantastic and asked why he chose Butrans for this patient? dr said patient was taking percocet,not controlled and wanted more pills so dr started patient on 10mcg Butrans.dr said he didnt have savings card to give patient so he hopes patient gets electronic voucher as this was a commercial insurance patient.i asked dr when he's bringing patient back for follow up? dr said in 4 weeks,we talked about titration of Butrans and discussing side effects with patient in that visit.i asked dr if he will see more patients like the 1 he started,this week? dr said probably so he will have to look and see who is coming into office.i talked to dr about caresource PA requirements for Butrans,as dr said that his biggest challenge to start patients on Butrans in this office.i asked dr if this PA seemed feasible? dr said yes it is and he will start more patients on Butrans.dr said he just needed to start 1 patient on Butrans,get in the habit of writing Butrans and he will be fine.i asked dr to focus on commercial insurance patients for the initial trial offer,BWC patients and Caresource patients,dr said he will do that.
PPLPMDL0020000001	Parma	OH	44129	2/28/2012	Caught Dr Paat between patients at the window. Handled back new OxyContin conversion/titration guide & let him know he could use it when converting patients from short-acting opioids like immediate-release oxycodone or hydrocodone over to an appropriate dose of OxyContin q12h. Also followed-up on our previous conversation about Butrans programs & asked if he planned to attend any of the upcoming events. He said he plans to go to the 3/13 program & asked me to register him.
PPLPMDL0020000001	Cleveland Hts	OH	44118	2/28/2012	Spoke to Shanicke, tech(pharmacist, Sara, was busy) about the stocking of butrans and oxycontin. She said that they did not have butrans and she was not familiar with it. I explained the indication and the other selling messages. Provided patient info guide and initiation guide. She said that oxycontin is steady and she does not notice any issues with customers being able to get/afford the product.
PPLPMDL0020000001	Euclid	OH	44132	2/28/2012	Spoke to Anna and Tim about the movement of butrans and oxycontin. They said oxycontin is steady with long term customers still on it. They suspect that there might be an increase in oxycontin due to the recall of opana ER. Tim said he has been seeing switched from opana to oxycodone. They said that they still only have the one patient on butrans. The building will be getting a new BWC doc (dr. Patel?) in a couple of months who might be a target for butrans or oxycontin. Tim informed me of a letter he received from the office of Drs. Price and Park indicating that as of 3/1/12 they will no longer be prescribing scheduled narcotics for non-cancer pain. Tim thought that might be an opportunity for butrans.
PPLPMDL0020000001	Westlake	OH	44145	2/28/2012	Spoke with Jennifer, we reviewed the medication guide and key messages for Butrans. We reviewed Butrans managed care and savings program. I asked what questions she thinks that patients will have about Butrans. She said how to apply it and if it will stay on for 7 days. We reviewed proper application and rotation. We reviewed the OxyContin conversion guide and that it is an option for patients taking 4 short acting opioids around the clock.<font color=blue><b>CHUDAKOB's query on 03/09/2012</b></font>This is a good specific next call objective. Good thinking. Try this in all your pharmacies. The more specific patient type you describe, the more likely they will think of one.<font color=green><b>HOLUBA's response on 03/14/2012</b></font>Thanks.<font color=blue><b>CHUDAKOB added notes on 03/15/2012</b></font>Let me know how this works!
PPLPMDL0020000001	Cleveland Hts	OH	44118	2/28/2012	Quick call.....i reminded doc that he RSVP'd to tomorrow's speaker program and that I just wanted to confirm his attendance. He he won't know until tomorrow and that I should have just come by tomorrow. Told him I would try back tomorrow. He did say that he is getting good results from butrans though.
PPLPMDL0020000001	Westlake	OH	44145	2/28/2012	I asked Dr if he is still starting new patients on Butrans, he said that he is and still likes it as an option. I asked if he had a chance to start any new OxyContin patients like he said he may the last time we spoke, he said he will consider patients who are not able to get opana at the pharmacy. <font color=blue><b>CHUDAKOB's query on 03/09/2012</b></font>Have you asked him what he likes about Opana ER that he would consider it an option rather than OxyContin? Remember, to listen for those objections and put them back on the physician. Ask them to give you a reason for their statement.<font color=green><b>HOLUBA's response on 03/14/2012</b></font>In the past he told me that he saves OxyContin as a last result due to the abuse potential, he prefers to not have any patients on opioids for long periods of time and does procedures/injections. I will ask again to see if his thoughts have changed.<font color=blue><b>CHUDAKOB added notes on 03/15/2012</b></font>If he is prescribing Opana ER, it sound like his thoughts have changed. Might be worth exploring.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/28/2012	Asked dr what his clinical experience is with Butrans. Dr has not used it yet. Asked dr if he has patients on private insurance on either ultram or vicoden? Dr primarily used vivoden but will refer to pain mgt if patient has spinal problems. Asked dr if he sees patients with chonic lower back problems or osteoarthritis? He does see both. Asked dr to use Butrans 7 days, CII in place of vicoden or when a dosing adjustment is necessary. Dr understood placement. Discussed AE's and patch sites with doctor. Asked dr if he would choose Butrans for the next patient that fits the profile discussed and he said yes.
PPLPMDL0020000001	Westlake	OH	44145	2/28/2012	We reviewed the savings program and trial offer for Butrans, I asked if he has give some patients the trial cards. He said that he forgets they can get a trial month, and he will start trying more patients. I asked Dr if he would come to our upcoming dinner program for Butrans, he said that he works late most nights so he is just not able to get there on time. <font color=blue><b>CHUDAKOB's query on 03/09/2012</b></font>Where can he put those cards so he will see them and remember them? This sound like a goal for you to get him to use them more.<font color=green><b>HOLUBA's response on 03/14/2012</b></font>I agree. This is tough since he goes to 3 different offices where he shares space. In Lakewood he only has a drawer and I try to keep them on his desk in Westlake but they seem to get moved. I put them on his desk last time I was in Westlake. I need to work with the girls to see if they will help me more.<font color=blue><b>CHUDAKOB added notes on 03/15/2012</b></font>Good idea. Keep working on it.
PPLPMDL0020000001	Westlake	OH	44145	2/28/2012	Quick call with Lisa, we reviewed the medication guide for Butrans, and that Butrans can be used with supplemental analgesia, she agreed to give out the medication guides. We reviewed the OxyContin conversion guide and using it as a Q12hr option instead of hydrocodone around the clock.
PPLPMDL0020000001	Westlake	OH	44145	2/28/2012	Quick follow up with 3N and S. I stopped by the nursing stations and asked if they had any questions regarding Butrans or OxyContin since I was here last. I reviewed the initiating guide and reminder of the key messages for Butrans for a few of the staff.
PPLPMDL0020000001	Cleveland Hts	OH	44118	2/28/2012	Quick call....Reminded doc of the butrans patient indication/positioning. I reminded him of the speaker program on 2/29. He said he and his wife (doctor) will be there.
PPLPMDL0020000001	Akron	OH	44320	2/29/2012	Asked dr if he had any private insured patients currently on Ultram or Vicoden. Dr said yes and claimed to know what Butrans was all about. Explained indication, dosing and titration, CIII, 7 day transdermal patch. Asked dr to think of patients that had chronic low back pain and were already on vicoden and may need a dose adjustment. This would be an appropriate patient for Butrans. Dr agreed and said he would try it.
PPLPMDL0020000001	Copley	OH	44321	2/29/2012	Discussed Butrans with Doug Potts(pharmacist). Asked if he knew the product and had it in stock. Pharmacist said that he does have a few patients on it and he has the 5 and 10mcg doses. The pharmacy does participate in relay health. Explained the trial offer and copy cards for both Butrans and OxyContin.
PPLPMDL0020000001	Lakewood	OH	44107	2/29/2012	Quick call, I showed the OxyContin conversion guide and asked if Dr still initiates new patients. He said that he does if they are already established patients but not for new patients. I asked if he would convert to OxyContin once a patient is taking 4 hydrocodone per day and he agreed. We reviewed that managed care coverage is good for commercial and Med D.
PPLPMDL0020000001	Westlake	OH	44145	2/29/2012	I asked Dr when he decides to prescribe OxyContin for a patient. He said that in this practice it seems like everyone is on OxyContin already and he is trying to cut them down. We discussed the appropriate patients for OxyContin and that low dose OxyContin is also an option. Dr told me that he started some patients on Butrans, I asked if he has been happy with the results and he said we'll see.
PPLPMDL0020000001	Maple Heights	OH	44137	2/29/2012	Spoke with Trisha (?), floater pharmacist, & reviewed Butrans core messages. Also discussed appropriate patient type, focusing on patients who take tramadol or Vicodin around-the-clock chronically. Also discussed new Butrans trial/savings programs & eligibility requirements as well as OxyContin savings cards/eligibility. She said she would leave my card & information.
PPLPMDL0020000001	Copley	OH	44321	2/29/2012	asked dr if he remembers themanged care plan(s) that he had iddues with in 2011 when he prescribed Butrans. Dr said that all the plans with not paying for it. Reviewed appropriate patient profile"william" for patient on Vicoden and uncontrolled or ready for a dose adjustment. Use Butrans for that patient presenting with chronic low back pain. Asked dr to try Butrans again and to take use of the trial offer. Dr agreed he would try it again.
PPLPMDL0020000001	Warrensville Heights	OH	44122	2/29/2012	Caught Dr Zivic between patients. Showed him OxyContin main visual pg 8, pointing out 7 tablet strengths for dosing flexibility. Also discussed ability to titrate every 1-2 days. He said that was a good reminder. Also reminded him of savings cards for eligible patients & favorable managed care for Medicare. Butrans dosing/appropriate patient type message.
PPLPMDL0020000001	Beachwood	OH	44122	2/29/2012	Spoke with one of the nurses in the pain management clinic, Judy. Presented Butrans core messages & discussed appropriate patient type, including OxyContin as an option for appropriate patients beyond Butrans range. I asked her how to set up an appointment to see the physicians & staff there. She said I would have to speak with Debbie Macko, their nurse manager. Let Judy know that I have been in contact with Debbie & am working with her to get this set up. She said she would leave my card & product information for Debbie.
PPLPMDL0020000001	Stow	OH	44224	2/29/2012	Regina came out but was in meeting so was quick. She said Dr Bressi is writing more BUtrans and I asked if they are having any good feedback and she said not that she is aware of. I gave her new trial cards. She said she would relay to the Drs they are there
PPLPMDL0020000001	Bedford	OH	44146	2/29/2012	Introduced myself & Purdue's products to Yolanda, one of the pharmacists. Inquired about opportunities for inservices on the floors & partner with the staff, providing resources on pain management. She said I would need to go through their Pharmacy Manager, Andrew (Andy) Bragalone. She gave me his information & asked that I call him. I asked her to give my card to him & she agreed.
PPLPMDL0020000001	Cleveland Heights	OH	44118	2/29/2012	Spoke o Allen about the stocking of burtans. He said he still has not seen any scripts for it so he has not gotten it in. He asked what docs we are talking to. I told him PCPs and pain specialists among others. He asked about insurance because he gets a lot of medicaid customers. I explained the medicare/medicaid status as well as the commercially insured plans. I explained the positioning and the proper application. Provided patient info guide and initiation guide in case he gets a script.
PPLPMDL0020000001					

PPLPMDL0020000001	Lakewood	OH	44107	2/29/2012	I showed the conversion OxyContin conversion guide for hydrocodone patients, I asked if he has patients like these that he could convert to low dose OxyContin and he said he does. Reminder about Butrans as an option and I asked if he's been able to use the trial cards like we discussed last time. He has not tried it, but said that he will find a few patients.
PPLPMDL0020000001	Westlake	OH	44145	2/29/2012	We discussed Butrans as an option instead of increasing tramadol or vicodin. I showed the patient case studies and I asked which of the patient types would be most likely to start on Butrans, he said wither tramadol or vicodin around the clock patients. I asked if he would give out the 5 trial cards and he agreed. Reminder that OxyContin is an option for his Med D patients. Met the Drs wife Kandy.
PPLPMDL0020000001	South Euclid	OH	44121	2/29/2012	Spoke to Bonnie about the stocking and movement of butrans and oxycontin. She said they had one patient come in for butrans but never came back for a refill. She was sent there because they had it stocked. I explained the positioning and the proper application and rotation. Provide her a patient info guide. She said the oxycontin has been steady and no issues. She did have one patient come in recently for the 30mg but they did not have it stocked. no other issues. I explained the conversion guide and she liked having it as a resource.
PPLPMDL0020000001	Cleveland	OH	44114	2/29/2012	dr asked me if there are any issues with Butrans and showering? I told dr patients can shower, swim, bathe, while wearing Butrans, why? dr said she saw a male patient yesterday who has been taking Butrans and doing great but said Butrans didnt stick when showering. dr said the patient was taking Vicodin ES, 90 tabs/month and had 15 pills left when she him, so Butrans is working well for him, just not sticking in shower. dr told patient to apply first aid tape or bioclusive or tegaderm dressing so she will see if that helps the patient.
PPLPMDL0020000001	Bedford	OH	44146	2/29/2012	Dr Moufawad said he did not have time today for a discussion. He said that he is still starting patients on Butrans & that he is satisfied with the results that he & his patients get with it. Reminded him of new trial/savings program as well as OxyContin savings cards that we discussed last week.
PPLPMDL0020000001	Cleveland	OH	44113	2/29/2012	dale sat in same lunch with dr shen, we discussed new patients and how they wont prescribe narcotics on 1st visit, dale said they will run OOARS report and look at tox screens and if they feel comfortable in 2nd visit the new patients may get narcotics at that time. followed up with dale on Butrans dinner program he attended 2/16/12, dale said he liked dr moufawad and learned some info from dr moufawad he didnt know before. I asked dale if I had his commitment to start more patients on Butrans? dale said yes
PPLPMDL0020000001	University Heights	OH	44121	2/29/2012	I discussed the oxycontin indication and patients that may have medicare. I explained the preferred tier 2 coverage for those patients which means a co pay as little as a couple of dollars. He asked what about the medicaid patients and the prior auths. I told him that now those patients do require a PA. I asked him what his thoughts are about prescribing a CIII once weekly transdermal for patients with mod to severe pain. He said he would think about. I asked him to focus on patients with commercial insurance such as medical mutual. He said he would think about it.
PPLPMDL0020000001	Euclid	OH	44119	2/29/2012	Window call...I reviewed the oxycontin and butrans patient types and let him know butrans is covered well commercially and on BWC. Showed him the formulary grid and explained the savings card. Told him in eligible medicare patients may be appropriate for low dose oxycontin.
PPLPMDL0020000001	Cleveland Heights	OH	44118	2/29/2012	Spoke to Jennifer about the stocking of butrans. She was familiar with the product but had not seen a script but she is new to the store. She confirmed stocking of the 5mcg. I explained the butrans indication and position. Provided patient info guide. She said they have just a few of the oxycontin scripts and dont have any issues with it. I explained and offered the conversion guide but she said they have no need for it and cant do any converting to CIIIs.
PPLPMDL0020000001	Akron	OH	44313	2/29/2012	aked dr though window if he feels comfortable prescribing a controlled release OxyContin for patients that are titrating up on vicoden? Dr said yes but provided no further information. Left formulary information, senokot information, and OxyContin dosing and titration guide with the MA.
PPLPMDL0020000001	Cleveland	OH	44113	2/29/2012	talked to Justin Pharmacist about Butrans stocking, all 3 dosage strengths in stock, confirmed who's prescribing- dr bohli, dr shen, dale novak and deb torres. I asked Justin if he's seeing any refills? Justin said only 1 refill for dr bohli's patient. we discussed formulary coverage for Butrans and I asked Justin if he's giving patient info booklets to patients when they fill scripts? Justin said yes he is handing booklets to patients we discussed importance of doctors titrating and refilling Butrans. confirmed OxyContin stocking, discussed Q12h dosing and converting patients from short-acting opioids to OxyContin earlier and starting patients on OxyContin 10mg, 15mg or 20mg.
PPLPMDL0020000001	Cleveland	OH	44114	2/29/2012	Provided updates to Butrans since the launch and gave him the initiation-titration guide. Also, presented intermezzo data for which he didn't have very many questions. He was surprised by the gender specific dosing and interested in the driving study but no further questions to pursue. We discussed resources which he'd like to order 10 Med Ed catalogs for the Case Managers. He'd like for me to re-send the FACETS sheet to review but didn't show alot of interest in scheduling a program. I offered him to sit in for a few slides of the program we're doing with the Evercare CNPs on March 15 which he may if he's in the office.
PPLPMDL0020000001	Cleveland	OH	44113	2/29/2012	I asked dr if he ever sees himself prescribing Butrans again and seeing Butrans play a role in his practice? dr said yes absolutely. I told dr that was great to hear because I was getting the feeling that wasnt the case seeing that if he was really sold on this product he would be prescribing more of it. dr said he just has to remember Butrans thats all. I asked dr what he needs to remember Butrans? dr said he doesnt know he just has to write it and get into habit of prescribing Butrans. I told dr there are patient info booklets and savings cards in exam rooms, so would that help remind him to start patients on Butrans? dr said yes I gave dr butrans initiation guide and asked him to keep this with him to help remind him, dr said ok he has started a few patients on Butrans so he will keep thinking of Butrans.
PPLPMDL0020000001	Parma	OH	44134	2/29/2012	Dr Hernandez said that "a couple" of patients have complained of "feeling sick" when he put them on Butrans. He said they both complained of vomiting. I asked if he thought it could have been dose-related & the patient needed a dosage decrease. He said that one of the patients, a female, had been put on the 5mcg dose, so that was not the case. Dr Hernandez said that most of his patients get great results from Butrans & he is still happy with it, which is why he prescribes it. He added that pharmacists have been getting better about dispensing Butrans with the way he prescribes it, which is sometimes one & a half Butrans 20mcg patches. I reminded him that 20mcg is the maximum dose & pointed out that this is due to increased QTc interval prolongation risk. He asked why that has never been brought up with the other buprenorphine products like Suboxone. I told him I do not know & that I can only speak to the Butrans FPI, which states that there is an increased risk of QTc interval prolongation when studied with 40mcg Butrans. Reminded him of the details for the new Butrans trial/savings program. He said he just gave one to a patient yesterday who had private insurance. Dr Hernandez said he continues to have various issues with BWC & pain medications getting paid for. Discussed OxyContin q12h dosing interval. Dr Hernandez said he recently acquired a patient who was taking 40mg OxyContin TID. I told him OxyContin should be prescribed q12h. He said that is how he does it.
PPLPMDL0020000001	Lyndhurst	OH	44124	2/29/2012	I showed HCP the patient profiles of william and Emma and explained that either patient would be an ideal candidate for butrans. She said she sees those patients all the time wanting more meds before its time. I showed the initiation guide and the starting dose for both. I reminded her of the speaker program tonight and that she seemed interested last week. She said she has to p/u her kid from the daycare so she cant make it. Gave her invites for the other upcoming programs.
PPLPMDL0020000001	Euclid	OH	44119	2/29/2012	Quick call....Doc again said this is the year for butrans. I asked him if he has had an experience with it yet. He said not yet but this is the year. I reminded him that he said he would come to tonight program. He had forgotten. He said he would come and asked if his wife can attend. I told him it was limited to HCPS.
PPLPMDL0020000001	Mayfield Hts	OH	44124	2/29/2012	Quick call...I reminded doc of the speaker program this evening and that he said he wanted to go because he is friends with dr. Laham but he said he cant make it as something has come up. He said he would be interested in other programs where Laham is the speaker. I asked if he would be interested in going downtown as Laham will be speaker at John Q's on 3/8/12. He said he isnt interested in going downtown. I asked him to nevertheless give butrans a try for an appropriate BWC patient.
PPLPMDL0020000001	Euclid	OH	44119	2/29/2012	Spoke to Carol in the pain mgmt clinic about the butrans key selling messages and about scheduling an appt/lunch with dr saeed to discuss further. She said I should contact Carl Van Pelt next week (she is on vacation) to find out more about scheduling.
PPLPMDL0020000001	Euclid	OH	44117	2/29/2012	Window call...I reviewed the butrans positionoing - after tramadol failures or those coming in for a dose adjustment. Oxycontin would be appropriate for medicare patients that are not eligible for butrans. Let him know its covered on BWC. I reminded him about the speaker program tonight and that he might try to make it. He said looked at the flyer and said he will try to make it.
PPLPMDL0020000001	Cleveland	OH	44113	2/29/2012	I talked to dr about her chronic pain patients taking percocet for years and getting to the point where they need a long-acting opioid like OxyContin, dr said she usually waits until patients are ready for 60mg or 80mg OxyContin. I talked to dr about earlier initiation of OxyContin, 10mg or 15mg and asked dr what she likes about OxyContin? dr said she used to write a lot of OxyContin 11 yrs ago, likes the molecule, but is trying to get away from it as so many patients are coming to her for pills and thats not what she chose to do, dr said she's not a pain management specialist. dr said she's sending all of her chronic pain patients to specialists for opioid management and at this point no use in me calling on her because she doesnt want to waste my time. I asked dr if I can follow-up in 6 months, to see if there are any chronic pain patients left in practice, dr said that was fine.
PPLPMDL0020000001	Parma	OH	44134	2/29/2012	Spoke with pharmacist, Marko, who said he has dispensed 3 boxes of Butrans in the last week, so it is picking up. He added that he now stocks 4 total boxes of Butrans. He looked in his computer & said that Dr Hernandez was the prescriber. I let him know that I have been working with him. Presented the details of the new Butrans trial/savings program & discussed eligibility requirements. Also discussed OxyContin savings cards & gave him a new package of cards, reviewing usage, including cash-paying patients being able to use them every 14 days if they have a prescription written that way.
PPLPMDL0020000001	Cleveland	OH	44113	2/29/2012	showed dr William, patient case study, asked what would be the next step for a patient like William? dr said she would probably start patient on Butrans. I asked dr how she handles new patients that look like William? dr said if patients are new to her, she doesnt give narcotics on 1st visit maybe 2nd visit if she feels comfortable prescribing narcotics. I asked dr if there is an age group she feels most comfortable prescribing Butrans in? dr said no she starts elderly patients, they are most receptive to starting on Butrans and younger patients that are willing to try Butrans. We discussed initial trial offer program for commercial insurance patients and focused dr on BWC.
PPLPMDL0020000001	Stow	OH	44224	2/29/2012	Spoke with Mike and he said they are stocking Butrans he believed it was the 10 and I asked if he could check and he said he couldnt at the moment, he was by himself. I showed him the new trial cards and how to use them. I said I left some with Regina and gave initiation guide for reference.
PPLPMDL0020000001	Cleveland	OH	44129	2/29/2012	Caught Deb quickly between patients. I invited her to upcoming Butrans dinner program. She said she would attend the 3/13 program in Independence & asked me to register her. I told her it would be a good opportunity to discuss her experience with other practitioners & experts. She said she would like to hear Dr Moufawad speak about Butrans. Reminded her of new trial/savings program for Butrans.
PPLPMDL0020000001	Westlake	OH	44145	2/29/2012	Dr told me he has not started any patients on Butrans yet, I asked why not, he said he just does not maintain many patients on opioid. I asked where he sees Butrans fitting in if at all, and he said he thinks that the niche would be older patients with arthritis where surgery or injections might not be an option. We reviewed the use of Butrans for geriatric patients, but that Med D plans are not covering it. I asked if he had any patients like these who are less than 65 years old who may still be working and he said a few. I asked if he would think of Butrans for these patients and let them try a free trial and he agreed. We reviewed that Med D patients can get access to OxyContin and he said that he would refer patients to pain management before initiating OxyContin.
PPLPMDL0020000001	Cleveland	OH	44103	3/1/2012	I talked to dr about appropriate patients for OxyContin, showed visual aid and asked dr if these are patients that she would consider starting on OxyContin? dr said yes, if patients are taking percocet every day and its not controlling their pain and they want more pills, she'll consider OxyContin. I told dr that she can start her CCRX and UHC/AARP patients on OxyContin, showed formulary grid dr said ok she didnt realize we had good coverage for these patients. I asked dr if she will see a couple CCRX or UHC/AARP patients today or tomorrow that she can start on OxyContin? dr said probably so she'll keep it in mind.
PPLPMDL0020000001	Independence	OH	44131	3/1/2012	Reminded Dr Sundaram of previous conversations when he has told me that patients often want to stay what they are on & do not want to switch to Butrans. I suggested he try Butrans for appropriate patients who are asking him for a medication increase or change for their moderate to severe pain. I asked if this made sense. Dr Sundaram said it does. I reminded him of Butrans trial/savings offer for commercial insurance patients, so most can try Butrans without having to pay out of-pocket for it. Dr Sundaram said he would try to find some patients. Discussed favorable Medicare D OxyContin coverage & showed formulary grid.
PPLPMDL0020000001	Hudson	OH	44236	3/1/2012	Introduced myself & Purdue's products to Dr Spittler. He said he had heard of Butrans but has not yet prescribed it. I asked if he treats patients with pain from conditions such as osteoarthritis & low back problems. He said yes. I asked what he typically prescribes for these patients. He said usually tramadol or sometimes Vicodin. Showed patient profiles & discussed the 3 different patient types where Butrans may be appropriate. Discussed CIII & abuse/addiction potential. Showed demo patch. Discussed appropriate range of patients & OxyContin as an option for appropriate patients beyond Butrans range. Dr Spittler said it is good to have a long-acting option for this type of patient.
PPLPMDL0020000001	Hudson	OH	44236	3/1/2012	Spoke with Chris & discussed appropriate patient type, focusing on patients taking around-the-clock tramadol or Vicodin who are not getting adequate relief. He said Butrans is stocked here. Showed patient information booklet & discussed application, rotation, & disposal. Also presented new Butrans trial/savings program & eligibility requirements. Discussed OxyContin savings cards, eligibility requirements, & q12h dosing.

PPLPMDL0020000001	Hudson	OH	44236	3/1/2012	Spoke with Cherie & presented details about new Butrans trial/savings cards. Reviewed eligibility requirements. She said they have not seen any Butrans activity. Reviewed appropriate patient type & range, letting her know I am focusing on patients who are not being well-controlled on a short-acting around-the-clock regimen. Also discussed OxyContin savings cards & q12h dosing.
	Cleveland	OH	44113	3/1/2012	showed dr OxyContin visual aid,focused discussion on appropriate patients,dr said he hasnt thought much about OxyContin for his office patients only nursing home and hospice.i told dr that was great he did that but why not office patients? dr said he doesnt trust many of the patients who have chronic pain so he wont give them OxyContin.i asked dr if there are any patients who are taking a couple vicodin or percocet,for chronic pain,showed conversion guide examples,that he trusts? dr said yes he does have a few.i asked dr if he will start a couple patients on OxyContin? dr said he will.i told dr to start his UHC/AARP and CCRX patients on OxyContin,showed formulary grids,dr said ok,we discussed what that meant to him and patients that OxyContin was lowest branded co-pay.
PPLPMDL0020000001	Parma	OH	44129	3/1/2012	I asked Dr Gigliotti what he thinks it is that is causing him to not prescribe Butrans. He said he doesn't know. I asked if he has any specific concerns or hesitations about the clinical aspects of Butrans. He said no. He went on to say that Butrans is "probably the best" of the pain medication options. I asked why then he does not have any patients on it. He said most patients are taking "too many pills" to want to try Butrans. I suggested he think of patients who he starts on tramadol or Vicodin who come back asking for an increase in dose or say their pain is not adequately controlled. Positioned Butrans as an option for those appropriate patients & reminded him of the ability to take supplemental analgesia with Butrans, so they don't necessarily have to "give up" anything. Added that with the new trial/savings program, patients with commercial insurance will likely not have to pay out-of-pocket to try Butrans. Dr Gigliotti agreed that these patients have nothing to lose, but said again that so many patients take too many pills. I agreed that some patients may be out of the Butrans range & may be candidates for OxyContin if appropriate.<font color=blue><b>CHUDAKOB's query on 03/09/2012</b></font>What does he consider too many pills? Six pills a day, depending on the strength is still a potential Butrans candidate.<font color=green><b>APSEGAS's response on 03/09/2012</b></font>I will ask him next time. He has been particularly difficult to focus lately. This may help. Thanks.<font color=blue><b>CHUDAKOB added notes on 03/12/2012</b></font>I hope it does help!
	Hudson	OH	44236	3/1/2012	Introduced myself & Purdue's products to Dr Marler, who was working with Dr Seiple today. Presented Butrans core messages & showed patient profiles. Discussed each of the 3 profiles, showing him there are 3 different patient types where Butrans may be appropriate. Discussed once weekly dosing, buprenorphine as a partial mu opioid receptor agonist, & CII with abuse/addiction potential. He asked if patients can "suck the medication" out of the patch like fentanyl patches. Showed demo patch to show him structure of Butrans. Told him that because Butrans is still an opioid, it does have abuse & addiction potential. Showed initiation guide with appropriate range of patients & discussed OxyContin q12h as an option for appropriate patients beyond Butrans range. Dr Marler said he had not yet heard of Butrans but was glad to hear that there is a once weekly transdermal option to treat this type of patient. He added that chronic pain from various conditions can be difficult to treat. I agreed that this can be difficult & discussed importance of appropriate patient selection & documentation.
PPLPMDL0020000001	Hudson	OH	44236	3/1/2012	Dr Seiple said since the last time I saw him, he started a patient on Butrans. He went on to say that this patient "got a rash" from Butrans. I asked if it was just at the application site or if it was systemic. He said the patient put the patch on his chest & got a rash on his face. He also said the patient reported excellent pain relief, but Dr Seiple had him discontinue Butrans. I agreed that this was the right thing to do. I asked if this would deter him from prescribing Butrans again. He said no, especially since the patient reported such good pain relief. I asked what the patient had been taking prior to being switched to Butrans. He said Vicodin & that he started the patient on the 10mcg dose. Discussed 3 different patient types where he may be able to use Butrans, ability to take supplemental analgesia, & new trial/savings program. Dr Seiple said he had actually given that patient a card, so he was happy that the patient did not have to pay for the trial. I asked Dr Seiple if he has more appropriate patients who he could try Butrans on & he said yes. I asked if he would choose some who have commercial insurance, give them a trial card, & start them on Butrans. He said he would do this. Also discussed OxyContin q12h for appropriate patients beyond Butrans range.
	Hudson	OH	44236	3/1/2012	Dr Tosine said that the patient he had told me about who liked Butrans but had to come off it temporarily because of managed care is back on Butrans & is happy with her results. He said the process was a hassle, but it was worth it. I asked if he had other patients like her who may benefit from Butrans. He said yes. He added that he has no issues with Butrans, he thinks it is a great medication, but he habitually refills patients' Vicodin because it takes less time & is easier. He added that he knows this is not the best thing to do, but due to time constraints, he finds himself writing refills. I asked what I can do to help him with this. He asked that I continue to give him resources like patient information booklets & savings cards because he can give them to patients & let them educate themselves instead of taking a lot of time to discuss every detail with them. I told him I am not asking that he switch all of his patients from short-acting opioids to Butrans, but asked that he prescribe it for appropriate patients who are not being well-controlled on their current medication regimen. I asked if this was a reasonable request. He said it is & that he will try to get better about taking the time up front to explain it to patients. Discussed OxyContin q12h for appropriate patients beyond Butrans. He said he recently had a pharmacist change a patient's OxyContin Rx to oxycodone plain IR. He said he cannot believe a pharmacist would confuse them-He did not remember pharmacy
PPLPMDL0020000001	Shaker Heights	OH	44122	3/1/2012	Caught Dr Agarwal between patients. Stopped him with new Butrans trial/savings cards & told him I had something that I thought he would find useful for his patients. Explained the trial/savings program & eligibility requirements. Positioned Butrans for patients with commercial insurance who are not being well-controlled on tramadol around-the-clock. Showed OxyContin Medicare D formulary grid, pointing out favorable coverage. Dr Agarwal said he thought the Butrans trial program was "a good idea" & took one of the cards from the package as he walked into a patient room.
PPLPMDL0020000001	Cleveland	OH	44127	3/1/2012	showed initiation guide to dr,we talked about dr starting patients on Butrans that are currently taking codeine but not controlled and patients are needing a medication adjustment,dr said she is getting more comfortable with remembering Butrans and Josie,Receptionist/MA helps with PA's for Caresource patients so she will keep starting patients on Butrans.i asked dr if she will start 2 patients today or tomorrow on Butrans? dr agreed to do this
PPLPMDL0020000001	Mayfield Heights	OH	44124	3/1/2012	I showed doc the profiles of Emma and William. I asked her which patient type would she likely prescribe butrans for. She said either one. I explained the starting dose for both patient types, 5 and 10mcg, respectively. She asked,"No medicaid right?". I confirmed that medicaid and medicaid will likely not be appropriate. I showed the formulary grid and asked her to focus on these plans and give a savings card and new patients can get a trial month. I told her that those medicaid patients may be appropriate for low dose oxycontin.
PPLPMDL0020000001	Brooklyn	OH	44144	3/1/2012	Quick call- Caught Dr Deeb at the window. Passed back Butrans program invitation for 3/8 event, reminded him of previous Butrans discussions, & asked him to attend. He said he would try to but was not sure he would be able to. Encouraged him to come discuss Butrans & case studies with other physicians & area experts.
	Cleveland	OH	44105	3/1/2012	i talked to dr about her patients taking percocet for chronic pain that could be appropriate for Butrans,dr said at this point she's giving booklets to patients to read and following up with patients but thats it,dr said she doesnt want to argue with patients and she's retiring soon so she's doing the best she can till then.i told dr i completely understood and appreciated her giving booklets out.i asked dr to start 2 patients,BWC or commercial insurance,today or tomorrow when she gives them booklets,just to gain some clinical experience,dr said she will do that if patients are willing to wear a patch and try Butrans,dr said she likes idea of a patch dosed once a
PPLPMDL0020000001	Mayfield Heights	OH	44124	3/1/2012	Window call....i asked doc if he is still having good results with the patient he started on butrans. He said its good. I showed him the new savings cards and how new patients that he tries on butrans can get a one month trial
PPLPMDL0020000001	Cleveland	OH	44127	3/1/2012	in addition to monthly savings off their copay. He said good. I talked to dr about his patients with chronic pain that are taking codeine every day around the clock for their pain but still not controlled,dr said he has a lot of patients like this and he doesnt like managing chronic pain.dr said if patients arent controlled on codeine he will send to pain management.i asked dr if he he would consider Butrans an option for thos patients that need a medication adjustmetn instead of increasing codeine? showed dr initiation guide for discussion,dr said he would consider Butrans but he has Medicaid and medicaid,dr asked about insurance coverage for these plans? talked to dr about medicaid and caresource PA requirements for Butrans,dr said that was reasonable and he will try it in a few patients and let me know what happens.i asked dr if he will see any patients today or next week that he knows Butrans could be an option for? dr said probably so because he see's chronic pain patients daily.i asked dr if he could start 2 patients on Butrans between today and next week? dr said he will do his best and see who comes into his office.showed dr patient info booklet,discussed importance of rotating Butrans and application sites and dr said he will hand them to patients.
PPLPMDL0020000001	Cleveland	OH	44113	3/1/2012	showed dr william,patient case study,asked if he see's patients like this? dr said yes he has a lot of patients taking vicodin who always ask for something else.i asked dr what he tyically does for a patient like William? dr said increase dosing interval or increase dosage strength.i asked dr if he would start 2 patients like william,on Butrans,between today and next week? dr said he will do that,its just a habit writing vicodin and he has to remember Butrans.i gave dr Butrans initiation guide,he put in pocket for a reminder.I focused dr on commercial insurance patients,use of initial trial offer cards and we discussed PA for caresource patients.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/1/2012	Catherine(pharmacist) said she has not filled a Butrans prescription but knew of the product. Has knowledge that it is a CII, indication, and dosing. Asked if they had it in stock and she said yes. Explained trial offer and copy cards. Catherine asked if it is on OH medicaid and I said no but it is tier 3 on most major formularies.
PPLPMDL0020000001	Mayfield Hts	OH	44124	3/1/2012	Quick call...complimented doc on a great job at the speaker program last night. He asked if I, personally, would be doing any other programs. I told him maybe later in the year. I gave him savings cards and explained the trial month now. He said that's better.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	3/1/2012	Spoke with Nurse(Rhonda?) about Butrans. She asked for more Butrans savings cards and patient information brochures. She said that Dr is continuing to use but patients are confused on where to place the patch.
PPLPMDL0020000001	Cleveland	OH	44195	3/1/2012	Explained sites for patch and provided dosing and titration guide. worked rheumatology dept-left dr deal,dr calabrese,betsy kirchner(NP)-Butrans dinner invitations for 3/8 and 3/13 programs,Butrans formulary grid,patient savings card flashcard,initiation guide and BUP3015-opioid experienced patient clinical trial with my business card; left dr chatterjee-OxyContin conversion/titration guide and formulary grids with my business card - you cant see any HCP's-leave info only per medical secretaries who take care of HCP's; worked neurology dept-left Butrans initiation guide,formulary grid,patient savings card flashcard,BUP3015,for dr may,dr kriegler,dr stillman and dr bamford-no see HCP's-leave info at desks; worked chronic pain dept-left same info as i did for neurology doctors-for dr covington and dr mathews.
PPLPMDL0020000001	Euclid	OH	44117	3/1/2012	Doc is working part time in Dr. Morley's Office. Dr. morley said that he (Demico) would be a great candidate to prescribe butrans. Dr. DeMicco has heard about butrans from Morely. I discussed the key selling messages of butrans and the positioning compared to that of oxycontin. He could not believe that the patch lasts one week. I discussed how to properly apply the patch and rotate it every week. He asked if it was a long acting vicodin. I explained that butrans is a CII like vicodin - can be called in and refilled. I explained that buprenorphine molecule is a partial mu agonist.
PPLPMDL0020000001	Westlake	OH	44145	3/1/2012	I showed the Butrans initiation tool and asked if he has patients on these dosage range of Butrans. He said that he does sometimes. I asked if he would at least try a few patients with the free trial and he agreed to give it a try. He feels that patients are not going to want a patch when they are taking pills around the clock and we discussed the use of supplemental analgesia. We discussed that OxyContin may be an option for patients taking higher doses of opioids and he said he would.
PPLPMDL0020000001	Westlake	OH	44145	3/1/2012	Quick follow up, I asked Dr if he had used at least one Butrans trial yet and he said no, I asked if he would try a few patients before the weekend and he said he will try but he does not see chronic pain patients every single
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/1/2012	Spoke with Patrick(pharmacist) about Butrans. He said that they had a couple scripts come though today. He asked for copy cards for Butrans. He said that he wants them just in case the system malfunctions. I asked for continued support of Butrans and OxyContin and he agreed.
PPLPMDL0020000001	Euclid	OH	44117	3/1/2012	I reviewed the key selling messages of butrans and ask doc what hesitations he has about butrans. He said that most of his patients are BWC but he is not a pain doc. Most of his patients are also seeing doc moufawad and he follows moufawad recommendations for pain mgmt and he has yet to any patient come in on butrans. Doc asked if Moufawad is writing butrans. I told him I was not sure how much he is prescribing. He had tried to write it twice but those patients never came back. I showed him the profiles of Emma and William. I explained the butrans positioning-after tramadol and before oxycontin. Doc said he is more likely to prescribe butrans after tramadol. I reviewed the appropriate starting dose. Doc said he will give it a try.
PPLPMDL0020000001	Garfield Hts	OH	44125	3/2/2012	Quick call- Handed Dr Sadowski Butrans dinner invitations for upcoming programs & encouraged him to attend so that he could discuss Butrans & patient types with various physicians & area experts. He said he would not attend dinner programs. He added that he "does not like" Butrans & he had no time today to discuss it. Spent time with Deena who told me about a patient taking Percocet 5mg 3-4 times per day. She asked me if butrans would be an option for someone like that. I told her it is possible & showed initiation guide pg 6 with table of Butrans appropriate patient range. She said she thinks this patient could benefit from Butrans & that she would suggest it as an option to Dr Sadowski. Discussed new trial/savings program for Butrans & went over OxyContin formulary grid. Deena said Dr Sadowski probably was not being serious when he said he "does not like" Butrans. She added that she knows he has patients who could benefit from it.
PPLPMDL0020000001					

PPLPMDL0020000001	Maple Heights	OH	44137	3/2/2012	Spoke with pharmacist Antuina, who said she does still have Butrans on the shelf. Reviewed appropriate patient type & presented new Butrans trial/savings program information. Discussed eligibility requirements & automatic monthly savings through e-voucher. She said the automatic savings is very convenient for them & for the customer, as it prevents them from having to keep so many different cards. I asked if she stocks OxyContin. She said she does have a few people on it regularly but does not see a lot of new prescriptions for it. Discussed OxyContin savings cards & eligibility requirements/usage, including use every 14 days for cash-pay patients if their prescription has been written that way.
PPLPMDL0020000001	Akron	OH	44319	3/2/2012	Asked Dr Yee if he has patients with commercial insurance on Vicoden 15-40mg/day whom are not experiencing pain relief? Dr said he does but was still concerned about cost. Showed dr "William" and explained the appropriate patient selection. Asked if that sounds like a patient he has. Dr still is concerned about cost. Further explained trial offer and cost for commercial patients with copay card. Dr agreed it sounded cost effective for the appropriate patient.
PPLPMDL0020000001	BEACHWOOD	OH	44122	3/2/2012	Sandy (pharmacist) said she couldn't take as this was one of her busiest times. Presented new Butrans trial/savings program & OxyContin savings cards & eligibility requirements for both. I let her know I would return at a more convenient time & left my card & FPI's for both products.
PPLPMDL0020000001	Cleveland	OH	44109	3/2/2012	dr said he's not started anyone else on Butrans, only 1 patient. I asked dr what's holding him back from starting more patients? dr said a lot of patients dont want to wear a patch for their chronic pain and others have medicaid so its not been covering Butrans. I talked to dr about caesource PA requirements for Butrans and dr said ok he will try it again with a Caresource patient and see if Butrans gets approved. I showed dr patient case study, william, asked dr if he treats patients like william? dr said yes he does. dr said he has patients on tramadol and vicodin that he feels Butrans would be an option for, but it depends on how receptive patients are with trying a patch and if insurance pays for Butrans. I asked dr if he will see patients like william today or next week? dr said yes. I asked dr if he will start a couple patients like william on Butrans? dr said he will do that.
PPLPMDL0020000001	Cleveland	OH	44130	3/2/2012	Caught Dr Kansal briefly between patients- Handed him Butrans dinner invitations & asked if he could attend one of the events. he said he probably would not be attending. I asked him to consider as it would give him the opportunity to discuss Butrans & different patient types with various physicians & area experts. Also reminded him of savings cards for Butrans with trial cards & for OxyContin for \$70 off the patient's co-pay if they have commercial insurance. Reviewed managed care coverage with Dorothy.
PPLPMDL0020000001	Barberton	OH	44203	3/2/2012	attempted to discuss Butrans with Dr Kim. When dr heard that it was a CIII he told me that his office didnt want anything to do with it. nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44109	3/2/2012	worked family medicine-left Butrans initiation guide, formulary dr, patient savings card, flashcard, BUP3015 and my business card for dr chrisman, dr forde, dr krofina, dr magoulias and dr adebambo-talked to karen, front desk, who said i had to leave info with her and they give to the HCP's. worked internal medicine-same info left for dr lindheim, dr harrington, dr ricanati, dr mcCreery, dr gelehrter and dr falck-ytter; worked rheumatology dept- left SAME info as noted above for dr ballou, dr singer and dr magrey; worked pm&r dept-saw dr jaffer, dr fox and dr greenwood
PPLPMDL0020000001	Lyndhurst	OH	44124	3/2/2012	I discussed the butrans patients types and the profiles of emma and william. She said she sees both and that's where she has written. She has no heard any feedback yet some she thinks things are going well. I reminded her of the one month trial for patients with commercial insurance. She asked if there is still a monthly savings. I showed her the 2 cards in the butrans savings packette.
PPLPMDL0020000001	Westlake	OH	44145	3/2/2012	Quick call at window, Dr requested savings cards. I asked if she has used the ones I left, she had not, and then checked and found the cards. She had started a patient and did not hear back from them about the cost. I let her know the chain pharmacies should give the 40 off at the register.
PPLPMDL0020000001	Richmond Heights	OH	44143	3/2/2012	Window call...I reminded doc of the butrans patient type and showed him he spread of the profiles of Emma and William. Gave him a formulary grid and explained that commercial patients can get a one month trial and \$40 off every month. Nothing learned.
PPLPMDL0020000001	Westlake	OH	44145	3/2/2012	Quick call, I showed the initiation tool and asked if Dr if he would start a patient on the 10mg Butrans when they are on this dosage of short acting. He agreed and liked the tool.
PPLPMDL0020000001	Lyndhurst	OH	44124	3/2/2012	Doc said things are going well with the patients she has on butrans. In fact, she just started a new patient yesterday on butrans. The patient was taking Xodol (hydrocodone) and had actually asked for butrans. Doc said she gave the patient the savings card. I reminded her of the one month trial for new patients. I discussed the oxycontin patient type and doc said she is not having any issues with oxycontin either. She mentioned that only 20-25% of her practice is on narcotics (re. the senate bill 93). I reviewed the preferred coverage of oxycontin and the lowestest branded co pay for most medicare patients.
PPLPMDL0020000001	Lyndhurst	OH	44124	3/2/2012	Lunch with Dr. Reed's office. I reviewed the butrans positioning and showed the patient profiles of Jessica, Emma, and William. She said she wouldn't use it for opioid naive but maybe after tramadol. I showed her the appropriate starting dose. She said they are liking it in the office and the trial month helps.
PPLPMDL0020000001	Beachwood	OH	44122	3/2/2012	Dr Warren said he did not have time to talk today. I passed back Butrans program invitations & asked if he thought he could attend. He said he doesn't know. Let him know it would be a good opportunity to learn more about Butrans & patient types since he had expressed interest during our last discussion. He said he would do his best. OxyContin 7 tablet strengths message.
PPLPMDL0020000001	Cleveland	OH	44135	3/2/2012	I asked Dr if he has been happy with the patients results who he's straited on Butrans, he has been. I asked if he has more patients like the ones we discussed in the past who might be appropriate for Butrans instead of going to vicodin or percocet. He said this is where he is using Butrans and he prefers to go to a long acting as soon as possible when he knows the patients have a chronic pain condition. I asked how he determined when pain is chronic and he said usually by the disease state and that the patients have to have a diagnosis, not just complain of back pain. I asked if he would continue to start new patients and he agreed.
PPLPMDL0020000001	Independence	OH	44131	3/2/2012	I asked Roman how he typically prescribes OxyContin. He said everyone who leaves their surgery goes home with a prescription for OxyContin. He said it is effective for pain relief & he does not understand why some doctors are "afraid" to prescribe it. He said he guesses it is because of the stigma & negative media. I agreed that everyone should be cautious in prescribing OxyContin, Butrans, & any other opioid medication due to abuse & addiction potential. Discussed OxyContin as a q12h dose of oxycodone. Roman said he would prefer a patient take OxyContin q12h than Percocet around-the-clock. Discussed savings cards & gave him another package. I asked if he was still planning to attend the Butrans dinner program on 3/13. He said he is glad I stopped in because he had to schedule a hip replacement for himself & it ended up being scheduled for that day, so he cannot come. He said Lisa is still going to go & that he is going to give her a list of questions that he would like to have answered from the speaker or one of the attendees. Roman said he wants to use Butrans, but he wants to learn a little more first. He asked how to dose Butrans for someone on Vicodin. Showed initiation tool. Roman asked if he could keep it & said he really liked it. He also said he told Dr Keppler about the new trial/savings program & that Dr Keppler was excited to start some patients on Butrans.
PPLPMDL0020000001	Cleveland	OH	44109	3/2/2012	I talked to chris, pharmacist, about Butrans stocking, asked chris who's prescribing butrans, chris said he knows some family medicine and pm&r physicians have prescribed but doesnt know names of HCP's. we talked about patients getting patient info booklets and handing them out when they get scripts. I asked chris if he will do this? chris said yes. I asked what questions patients have about butrans? chris said some patients ask about application sites and dosing interval, I asked chris to show patients the application/rotation sections in patient info booklet, chris agreed, confirmed stocking, asked to see rob, pharmacy mgr, rob wasnt available left card for him to get an appointment. Left chris Butrans formulary grid, discussed commercial insurance patients and use of initial trial offer cards, we discussed BWC and caesource PA requirements.
PPLPMDL0020000001	Akron	OH	44310	3/2/2012	Char(Cremer's MA) said that Dr Cremer is using Butrans regularly for patients on vicoden and percocet. Likes Butrans because it is a CIII and it can be called in a refill. He has good success with a patch for chronic pain especially a 7 day application. Discussed with Char about initiating Butrans earlier in his algorithm. Use after Tramadol. Char said that most patients present already on Tramadol or vicoden. Provided patient information kits and dosing and titration guide. Explained trial offer which she did not know about and said it would help help prescribe more often.
PPLPMDL0020000001	Barberton	OH	44203	3/2/2012	discussed Butrans indication, CIII, RelayHealth, dosing and titration with Cathy(Pharmacist). Asked if they had it in stock and she said no. Pharmacist was not very interested in the product and did want any other information. Left pharmacy card.
PPLPMDL0020000001	Cleveland	OH	44109	3/2/2012	showed dr bup3015, discussed inclusion criteria and asked dr if he felt a 30% reduction in pain was clinically significant? dr said yes. I asked dr if its significant enough to start a couple patients on Butrans? dr said yes he has started a couple more patients on Butrans recently, we talked about initiation and titration of Butrans, I asked dr when he's following up with these patients? dr said in 4 weeks. I asked what is dr discussing in follow-up appt? dr said side effects, pain relief, he decides if patient needs to be titrated or stay on same dose of Butrans. I asked dr if he will start a couple more patients on Butrans between today and next Friday, when I see him again? dr said he will do that. focused dr on commercial insurance patients, we discussed PA requirements for Caresource patients too.
PPLPMDL0020000001	Barberton	OH	44203	3/2/2012	Discussed Butrans indication, dosing, titration, CIII, 7 day controlled release product for chronic pain. Asked Dr if he has had patients that are currently on Ultram or Vicoden and are not getting appropriate pain relief? She said yes she does and asked about cost. Discussed coverage and used managed care leave behind. Asked if there is a particular plan and she said no. Dr wanted more OxyContin savings cards. She has a few patients on it and would like more starts. Dr said she will initiate OxyContin for patients after vicoden. Asked if Butrans is a product that would fit in her practice and she said yes.
PPLPMDL0020000001	University Heights	OH	44121	3/2/2012	I asked doc how high he titrates patients on tramadol. He said he usually prescribes 50mg/day. I showed him the Emma profile and explained that if they are taking less than 300mg per day every day, patients can start on the 5mcg dose. I asked if he thinks he would ever prescribe butrans. He said he just has to identify the right patient. I reminded him to think of non-medicare/medicaid patients and commercial patients can get a trial month of butrans.
PPLPMDL0020000001	Beachwood	OH	44122	3/2/2012	I asked Dr Tabbaa how he determines which long-acting opioid option to prescribe for each patient since there are so many options. He said that conversation would take more time than what he had today. I gave him a new OxyContin conversion/titration guide & asked if he would find that to be useful. He said he would like to give some to his residents. He asked if there is a conversion in the guide from Opana to OxyContin. I told him that is not in the guide. Discussed OxyContin favorable managed care & savings cards. Also asked if he could use a new Butrans initiation/titration guides. He said he did not need one & his residents don't get involved with Butrans as he does that himself. Dr Tabbaa said he usually starts a patient on Stadol before initiating Butrans since Stadol is also buprenorphine. I asked why that is. He said it allows him to make sure the patient responds to the molecule & can tolerate it. He said he continues to keep patients on Stadol while on Butrans if they say they need a little more relief. Discussed titration of Butrans. Dr Tabbaa said he would continue to prescribe both Butrans & Stadol.
PPLPMDL0020000001	Akron	OH	44312	3/2/2012	Spoke with Nadia(MA) about Butrans. Explained the indication, dosing, titration, CIII, controlled release buprenorphine for 7 days. Gave patient profile information. Asked her to review with DR Taylor when appropriate prior to my appointment. nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44114	3/2/2012	talked to Laura, Pharmacy Mgr, about 6 key Butrans selling messages, Laura hasnt seen any Butrans rx, she said she likes the idea of a transdermal system with 7 days delivery. I asked Laura what patients say to her when picking up their scripts of short-acting opioids? Laura said patients usually just want their pills and sometimes ask questions about side effects. I asked Laura if she'll hand out patient info booklets to patients that could be appropriate for Butrans? Laura said yes she will do that. we talked about formulary coverage and confirmed oxycontin stocking.
PPLPMDL0020000001	Twinsburg	OH	44087	3/2/2012	Met with the clinical pharmacists @ Envision Rx Options on March 2nd, 2012, 10 am PST. Al had the opportunity to provide a clinical presentation regarding Intermezzo. AlThe request for an Intermezzo presentation was unsolicited and submitted to Medical Services through Chris Almeida. AlThe slide presentation was created per the specific request from Envision and reviewed by Medical Services and Legal. AlThe following is a high level summary of the 60 minute presentation/discussion. AlTwo Envision Rx Options pharmacists attended the presentation: Christine Nguyen, PharmD, MBA, AlManager, Trade Relations; and AlPatty M. Long, PharmD, AlClinical Pharmacist. AlChris-2. We spent some time discussing the Intermezzo indication, that it specifically provides a treatment option for patients with middle of the night awakening with difficulty returning to sleep [w/ at least 4 hours of sleep remaining]. AlChristine personally felt that Al#8220;prophylaxis treatment with a generic zolpidem was a better way to go. AlThere is less stress about waking up in the middle of the night and having to take something. Al#8221;3. The pharmacists did find the driving study interesting and felt that it added to the overall information available regarding Intermezzo. AlThey recognized that Intermezzo is for a specific patient population, with a very narrow indication. AlThey referred to Intermezzo as Al#8220;niche Al#8221; product. Christine is concerned that since it is Al#8220;niche Al#8221; product, that the cost will be greater. AlI did state that Chris could address cost with her. Al5. Christine wanted to compare the PK profile for Edluar vs. Intermezzo, since they are both sublingual tablets. AlWe did discuss that they have different doses, indications, etc. Al6. Peggy shared that for the Medicare population, certain medications have been identified that should be used with caution in the >65 year population. AlShe stated that zolpidem has been one of them and there have been placed additional steps edits (than the average population). AlCurrently, all branded sedative-hypnotics currently require trial of 2 generic medications for Envision Rx member population.



PPLPMDL0020000001	Cleveland	OH	44109	3/2/2012	dr said he's still starting patients on Butrans and its going well,patients are happy and he's seeing good clinical results.I asked dr what he meant by good clinical results? dr said improvements in general functioning,mood and overall improvements in pain,dr said he will continue prescribing.I talked to dr about caresource PA requirements and asked dr if he has a couple caresource,BWC or commercial insurance patients that he will see today or next week,to start on Butrans? dr said yes he probably will,dr said all he needs are the patient info booklets and he will continue prescribing.
PPLPMDL0020000001	Beachwood	OH	44122	3/2/2012	Spoke briefly with Shelly, pharmacist, & presented new Butrans trial/savings program & eligibility requirements. She said she is still not seeing any activity for Butrans. Also discussed OxyContin savings program & eligibility/usage, including cash-paying patients having the ability to utilize the savings cards every 14 days.
PPLPMDL0020000001	Parma Heights	OH	44129	3/5/2012	Spoke with Cathy, a new pharmacist, & a technician. Reviewed Butrans core messages as she said she didn't really know a lot about Butrans. Discussed appropriate patient type, focusing on patients taking chronic short-acting opioids around-the-clock. Also discussed new trial/savings program & OxyContin savings cards. Reviewed eligibility requirements for both savings programs. They said to check next time to see if they need any savings cards for either product.
PPLPMDL0020000001	Cleveland	OH	44106	3/5/2012	dr said he hasn't started anyone recently on Butrans but knows its there as an option.I asked dr who are the appropriate patients for Butrans in his mind? dr said patients taking a couple tramadol or vicodin every day for chronic pain but not controlled.showed dr visual aid,we discussed dosage ranges for patients that would be appropriate for Butrans,I asked dr if he see's patients like this? dr said yes,I asked dr if he will start 2 patients this week on Butrans? dr agreed dr asked about medicaid insurance coverage? we talked about PA requirements for Caresource patients and I asked dr if he's willing to start a couple patients and gain some clinical experience? dr said yes.focused dr on commercial and caresource patients.
PPLPMDL0020000001	Olmsted Falls	OH	44138	3/5/2012	Quick follow up, I told Dr that I thought he seemed very interested to try Butrans last time we spoke and asked if he has done so yet. He said he has not as he has not seen many chronic pain patients since last week, but he will definitely give Butrans a try. I let him know that I know he will see an appropriate patients this week- one who is taking tramadol around the clock and he agreed.
PPLPMDL0020000001	Berea	OH	44017	3/5/2012	I asked Dr where he sees Butrans fitting in in the big picture of things. He said he wasn't sure yet but he would try it and walked into a room. I reviewed the managed care and appropriate patient types with Diane, and she said he would try to help me remind him to give it a try in a few patients.
PPLPMDL0020000001	Parma	OH	44129	3/5/2012	Gave Dr Taylor Butrans dinner invitations for upcoming programs. I asked if she thought she would be able to attend, encouraging her to participate as it would be a good opportunity to discuss Butrans & patient types. She said she may be able to attend the 3/13 event. Reminded her of our lunch discussion when we talked about patients taking tramadol around-the-clock who are asking for an increase in dose & asked her to prescribe Butrans for those patients. She said she would. Discussed OxyContin 7 tablet strengths for appropriate patients beyond Butrans range.
PPLPMDL0020000001	Northfield Center	OH	44067	3/5/2012	Spoke with pharmacist, Sarah, who said they have Butrans in stock but do not see many prescriptions for it. Reviewed appropriate patient type, focusing on those taking chronic tramadol or Vicodin around-the-clock. Also presented new Butrans trial/savings cards & explained eligibility requirements. Also asked about OxyContin stocking. She said they do have a few patients on it. Gave her new savings cards & reviewed usage requirements, including cash-paying patients' ability to use the card every 14 days if their prescription is written that way.
PPLPMDL0020000001	Cleveland	OH	44104	3/5/2012	showed dr oxycontin visual aid, we discussed appropriate patients and I asked dr when he's considering OxyContin as an option? dr said when patients have severe pain and have been taking percocet daily but not controlled,he'll consider OxyContin.we talked about dr considering OxyContin for patients earlier in therapy,showed conversions and I asked dr if he has a few patients in mind that he could start on OxyContin 10mg,15mg, or 20mg Q12h, this week? dr said he probably will see patients like that and yes he'll consider OxyContin earlier in therapy,covered dr on UHC/AARP and CCR patients starting on OxyContin and commercial insurance patients.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44195	3/5/2012	worked apm dept-left Butrans initiation guide,formulary grid,inner invites for 3/2012 programs and BUP3015-opioid experienced clinical trial-for dr vrooman,dr mekhal,dr mintzer,dr cheng,dr stanton-hicks and dr katyal. worked chronic pain-same info as above for dr covington and dr mathews. worked neurology dept-same info as above for dr bamford, dr mays, dr kriegler and dr stillman.
PPLPMDL0020000001	Cleveland	OH	44130	3/5/2012	Quick call- Positioned Butrans for patients who are not well-controlled on tramadol around-the-clock & showed trial cards. Dr Fedorko said he has been using more Butrans. I asked him to tell me about the patients but he said he did not have time today.
PPLPMDL0020000001	Parma	OH	44134	3/5/2012	Handed Dr Mandat Butrans dinner invitations & reviewed event details of each program. I asked if he thought he would be able to attend. He said he would be interested in hearing more about Butrans from other physicians who have experience using it. I agreed that a program would be a great opportunity to learn more about Butrans & patient types, such as the types we have discussed like those who are not well-controlled on short-acting around-the-clock opioids. He said he would do his best. Showed him Butrans trial/savings cards in his closet & asked him to be sure to give one to each patient who he starts on Butrans who has commercial insurance. He agreed. Also gave him OTC samples.
PPLPMDL0020000001	Beachwood	OH	44122	3/5/2012	Quick call- Passed back Butrans dinner invitations & asked Dr Myton-Craig if she could attend. She said probably not. Encouraged her to attend & presented it as an opportunity to discuss Butrans & patient types with various physicians & area experts. She said she would see.
PPLPMDL0020000001	Cleveland	OH	44113	3/5/2012	dr said he started more patients on Butrans last week and is getting more Caresource PA's approved so thats helping.I showed dr patient case study,william,asked what would be the next step for a patient like him? dr said he would consider Butrans but again he would have to look at all factors and insurance being the biggest factor.I asked dr for his commitment to start more patients like william,who have commercial insurance,BWC or Caresource coverage,dr said he will continue starting patients on Butrans.recommended Senokot-S<font color=blue><b>CHUDAKOB's query on 03/14/2012</b></font>Amy, this is a good next call objective as long as you focus him on the specifics of what triggers him to prescribe Butrans. Make sense?<font color=green><b>BROOKAM's response on 03/16/2012</b></font>yes it does,we can talk on Tuesday about nickels and the call because you and I have lunch with him and Deb<font color=blue><b>CHUDAKOB added notes on 03/18/2012</b></font>OK. Sounds good!
PPLPMDL0020000001	Parma	OH	44129	3/5/2012	Quick call- Positioned Butrans for patients who initiate a conversation with him about a medication change, if they are appropriate. Also reminded him of trial offer for those eligible & OxyContin savings cards. Spoke with MA Cindy, who said Dr Blackburn will be moving from Metro over to across from Southwest Hospital. She suggested I call on him ASAP for Butrans.
PPLPMDL0020000001	Independence	OH	44131	3/5/2012	Handed Dr Jack a Butrans dinner invitation for the 3/13 program, pointing out program details. I asked if he would attend. I told him it would be a great opportunity to finally discuss Butrans with other practitioners to see if it might be something that could benefit some of his patients. He said he will attend & asked if I could register him. OxyContin reminder for patients beyond Butrans range.
PPLPMDL0020000001	Cleveland	OH	44106	3/5/2012	I showed dr patient case study,emma,I asked dr if he treats patients like this? dr said yes every day,dr said he doesn't have many patients on narcotics but he likes that Butrans is a patch and dosed once a week.dr said he will consider Butrans if appropriate,dr asked about medicaid coverage? I asked dr if he has a medicaid patient in mind? dr said thats majority of population,we talked about PA requirements for Caresource patients and I asked dr if he'll start a couple patients this week on Butrans,if appropriate? dr agreed.<font color=blue><b>CHUDAKOB added notes on 03/14/2012</b></font>Nice question back to him when he asked about Medicaid coverage. You are putting into practice what we discussed at the meeting. Nice job!
PPLPMDL0020000001	Cleveland	OH	44106	3/5/2012	worked apm dept
PPLPMDL0020000001	Lakewood	OH	44107	3/5/2012	I asked Dr if he has still been having success with Butrans and he said he is. I asked if he has continued to use Butrans for patients like we discussed before who have low back pain and he said yes. I asked if he would start a few new patients this week and he agreed. I reviewed the OxyContin managed pull thru grid with Patty and Dr.
PPLPMDL0020000001	Cleveland	OH	44106	3/5/2012	dr said she started 1 patient on Butrans recently,I asked dr to share with me why she chose Butrans? dr said patient was taking tramadol every day for chronic pain,not controlled,and was asking for more pills so she wanted to try Butrans.we talked about initiation and titration of Butrans and dr said she'll see this patient in 4wks for a follow-up.I asked dr if she gave patient a Butrans patient info booklet? dr said lisa,patient care coordinator,gives booklets to patients so she thinks so.I asked dr if she has a couple patients coming in this week,like the 1 she started,that she can start on Butrans? dr said probably so she'll see who comes into the clinic today.focused dr on caresource and commercial insurance patients.recommended Senokot-S
PPLPMDL0020000001	Westlake	OH	44145	3/5/2012	I asked Dr what is he afraid might happen if he actually gave Butrans a try, he said that he guesses that he's worried it won't be covered and it will be more time and hassle out of his day. I asked if this is the only reason and he said he forgets about it as well. I asked if he would try just a few commercial patients and see if it is a hassle and he agreed. Reminder that OxyContin is an option for patients with Med D coverage
PPLPMDL0020000001	Lakewood	OH	44107	3/5/2012	Dr saw me and said that he has not started a patient on Butrans yet and he knows that he is supposed to try a patient who is on tramadol around the clock. I told him I was glad he is listening. I asked if he would do this in the next day so that he does not forget and he agreed. I reviewed the managed care and trial card for Butrans, he still has them back in his office. I reviewed OxyContin as an option for patients with Med D coverage.
PPLPMDL0020000001	Cleveland	OH	44104	3/7/2012	talked to dr about who is the appropriate Butrans patient,dr said patients taking a couple short-acting analgesics,not controlled and asking for more pills.showed dr william,patient case study,asked if he treats these types of patients? dr said yes.I asked dr whats the next step for patients like william? dr said increase dosage strength of hydrocodone or convert to percocet.I told dr instead of doing that he can start patients like william on Butrans,dr said ok.I asked dr if that seemed easy to do? dr said yes,dr asked about medicaid coverage,we discussed PA for Caresource,I asked dr if that would make a difference and he would start a few patients on Butrans? dr said yes it does and he will start some patients on Butrans.I showed dr OxyContin visual aid and asked where on the moderate to severe pain scale does dr see OxyContin appropriate? dr said severe pain patients and he only has a few patients on OxyContin and doesn't like to prescribe it.dr had to leave so gave him OxyContin slim jay and said I would follow-up next week on appropriate patients for OxyContin,dr said ok.recommended Caught Dr Gene at the window. Passed back Butrans program invitation & asked if he thought he could attend. He said they usually do not go to them but he would look at his calendar later. I asked if he continues to have success with Butrans for appropriate patients. He said he is still having success. He then walked back into the patient care area.
PPLPMDL0020000001	Maple Heights	OH	44137	3/7/2012	showed dr william,patient case study,asked if he's treating these patients on a weekly basis? dr said yes he has a lot of patients taking short-acting opioids for chronic pain.dr said he's comfortable using Butrans and knows who is appropriate.I told dr that was great to hear and asked him to describe those appropriate patients for Butrans? dr said patients taking a couple vicodin,percocet or morphine,not controlled,asking him for more pills.dr said a patch isnt for everyone though so he has to talk to patients to be sure they are willing to try Butrans and he has so much caresource and medicaid here Butrans wasn't covered so its been impossible to start patients.we talked about Caresource PA requirements,I asked dr if that seemed feasible to do? dr said yes.I asked dr if he had a few patients like William,that he'll see this week or next,that he can start on Butrans? dr said he will consider it and appreciated the information.
PPLPMDL0020000001	Barberton	OH	44203	3/7/2012	Discussed with staff and DR Patel Butrans indication, dosing and titration, CIII, application sites, where it is appropriate. Discussed appropriate patient type(s) for Butrans. Trial offer cards, patient information kits. Dr said his patients are dosing well on Butrans and don't have the need for supplemental analgesia anymore. He is using after Tramadol and/or Vicoden with success. Asked Dr if he will continue to prescribe Butrans for a patient with low back pain or osteoarthritis who could use a 7 day transdermal patch for moderate to severe pain. Dr agreed to get back to using. Reviewed OxyContin indication, dosing, and where to use. Dr said he uses OxyContin for mostly his severe pain patients. Reminded dr of 10 and 15mg doses for patients whom a Q12h dose may be appropriate.
PPLPMDL0020000001	Parma	OH	44134	3/7/2012	Dr Hernandez said one of the patients he started on Butrans 20mcg complained of a "rash". I asked if it was just around the application site or if it was systemic. He said just around the patch. He added that the patient reported good pain relief with Butrans & did not wish to discontinue. Discussed titration & use of supplemental analgesia with Butrans. Dr Hernandez said he is so comfortable with Butrans, he has no issue doing either. He said he can imagine primary care physicians not wanting to prescribe two opioids concomitantly as having a patient on only one opioid medication is the ideal scenario. Reminded him that non-opioids could also be used for supplemental analgesia. He said he proactively treats potential adverse events by giving patients prescriptions for fenergan to fill if they should get nausea while on Butrans. He said this seems to work. Discussed new trial/savings program. Dr Hernandez said he still has enough cards. Discussed OxyContin q12h for appropriate patients beyond Butrans range. Dr Hernandez said he does still prescribe it occasionally & has patients who stay on it. I asked him what percentage of his patients who he starts on Butrans stay on it. He said 90%.

PPLPMDL0020000001	Cleveland	OH	44103	3/7/2012	showed dr OxyContin visual aid,appropriate patients page,i asked dr if he has patients taking 4 vicodin or percocet for their chronic pain that arent controlled and need a medication adjustment? dr said yes every day that happens.i asked dr if he's considering OxyContin for those patients? dr said usually he does convert them to OxyContin,dr said he likes OxyContin and it works.i showed dr 7 tablet strengths page,we discussed titration and dr said he knows what to do as he's been prescribing OxyContin for years and years.dr said he doesnt need any Savings cards and had to go.i gave conversion guide to dr and asked if he would like a reference guide with conversion/titration info? dr took it.
PPLPMDL0020000001	Broadview Heights	OH	44147	3/7/2012	Presented patient profiles of "Jessica", "Emma", & "William", pointing out that there are 3 different patient types he may find that Butrans is an option for. He said he thinks the "Jessica" profile is the most ideal place to use it. Discussed starting that patient at the 5mcg dose. I asked if he sees patients like this. He said yes. Also spent time going over titration ability after 3 days up to a maximum 20mcg. Discussed supplemental analgesia & ability for patients to take non-opioid medications or immediate release opioids for supplemental analgesia. I asked if he had a patient who had been on 3 tramadol per day & he decided to start them on Butrans at the 5mcg dose, if he would allow that patient to take tramadol as supplemental analgesia. He said he only allows NSAID's for breakthrough pain. I showed him BUP3015 opioid-experienced study folder & pointed out that in studies with these patients, we allowed ibuprofen or acetaminophen for supplemental analgesia. He asked how the lower doses compare with 20mcg dose as far as efficacy. I showed him the BUP3015 backgrounder & showed results of that study. Margaret, his nurse, asked about insurance coverage. Reviewed coverage, asking them to focus on commercially insured patients who would have the most access to Butrans & who could take advantage of the trial/savings program. Also discussed favorable OxyContin coverage & gave CVS/Caremark notice. Discussed OxyContin as an option for appropriate patients beyond Butrans range
PPLPMDL0020000001	Broadview Heights	OH	44147	3/7/2012	Presented patient profiles of "Jessica", "Emma", & "William", pointing out that there are 3 different patient types he may find that Butrans is an option for. He said he thinks the "Jessica" profile is the most ideal place to use it. Discussed starting that patient at the 5mcg dose. I asked if he sees patients like this. He said yes. Also spent time going over titration ability after 3 days up to a maximum 20mcg. Discussed supplemental analgesia & ability for patients to take non-opioid medications or immediate release opioids for supplemental analgesia. I asked if he had a patient who had been on 3 tramadol per day & he decided to start them on Butrans at the 5mcg dose, if he would allow that patient to take tramadol as supplemental analgesia. He said he only allows NSAID's for breakthrough pain. I showed him BUP3015 opioid-experienced study folder & pointed out that in studies with these patients, we allowed ibuprofen or acetaminophen for supplemental analgesia. He asked how the lower doses compare with 20mcg dose as far as efficacy. I showed him the BUP3015 backgrounder & showed results of that study. Margaret, his nurse, asked about insurance coverage. Reviewed coverage, asking them to focus on commercially insured patients who would have the most access to Butrans & who could take advantage of the trial/savings program. Also discussed favorable OxyContin coverage & gave CVS/Caremark notice. Discussed OxyContin as an option for appropriate patients beyond Butrans range
PPLPMDL0020000001	Cleveland	OH	44120	3/7/2012	talked to Chuck, Pharmacy Mgr, about Butrans 6 core selling messages, Chuck said he likes that Butrans is a patch and a CII opioid but they have so much medical aid he didnt think Butrans was covered. i talked to Chuck about Caresource PA requirements for Butrans, Chuck said that sounded great and i should tell the HCP's in the internal medicine dept upstairs. i told Chuck the dept stopped all lunches and leaving info at receptionist desk is only option. Chuck said he will mention Butrans and the updated info about Caresource to a few doctors in this dept and see if that helps me get an appointment. i told Chuck i would really appreciate that and asked if he's still seeing scripts for oxycontin? Chuck said the same patients, every month, getting their OxyContin Rx filled but no new patients. i asked if he's seeing other long-acting opioids prescribed for new patients? Chuck said a few Rx for Opana Er but mainly generic long-acting morphine. i showed Chuck OxyContin visual aid, we discussed appropriate patients and i showed formulary grids to chuck focusing discussion on medicare and commercial insurance patients. i asked Chuck if he would ever recommend OxyContin to patients he feels are appropriate? Chuck said no not for OxyContin but he would recommend Butrans to a few doctors that he has a good relationship with. i gave Chuck a few patient info booklets and asked him to hand out to appropriate patients so they can talk to their HCP's, Chuck agreed to do this. recommended Senokot-S
PPLPMDL0020000001	Bedford	OH	44146	3/7/2012	Dr Moufawad said he is still remodeling his practice to weed out more patients. He said that Butrans fits perfectly into that plan for him. I asked him how so. He said because going forward, he does not want to prescribe more than 100mg Morphine equivalents, so with the limit with Butrans being 80mg, it is the perfect fit. He went on to say that he is getting good results & he does plan to increase his usage as his practice remodeling process takes place. Dr Moufawad thanked me for not "pressuring" him to write more Butrans than he is ready to prescribe & said he appreciates that I work with him & come in to speak with him about it frequently to stay on top of things. He said he does plan to use more OxyContin instead of Opana. He said he used to not start any new patients on OxyContin & that he would try to get patients off of it, but now he has increased confidence in the product. He said while he still is very cautious with it, he likes that it was reformulated. I agreed that he should be just as cautious in choosing appropriate patients. Reviewed favorable OxyContin managed care coverage. <font color=
PPLPMDL0020000001	Cleveland	OH	44109	3/7/2012	blue><b>CHUDAKOB's query on 03/14/2012</b></font>Why does Dr. Moufawad like the fact that OxyContin was reformulated?<font color=green><b>APSEGAS's response on 03/15/2012</b></font>He believes it is being less abused than Opana now. Each time he makes that statement (that OxyContin is being abused less than Opana), I tell him there is no data to suggest that the reformulated OxyContin is any less abusive than the original & ask him to use the same caution he always has with it. He said that he knows there is no data but this is his belief.<font color=blue><b>CHUDAKOB added notes on 03/16/2012</b></font>OK. Thanks for the i talked to Debbie, pharmacist, about 6 Butrans core selling messages, she's not seen any Butrans and wont order it until she see's a script. we talked about appropriate patients, showed her visual aid, asked if debbie see's patients like that here? debbie said yes a lot of opioid experienced patients getting their narcotics every month. i asked debbie what are patients saying when she provides medication management to those taking short-acting opioids for chronic pain? debbie said they just want their pills, its rare if patients ask for a suggestion of a different medication they can talk to their doctors about. i asked debbie if she would hand out patient info booklets to these patients asking for something else or if she feels they are appropriate for Butrans and patients can talk to their HCP's? debbie agreed to do this. we talked about insurance coverage- showed formulary grid and debbie focused on medical aid patients, we discussed caresource pa requirements.
PPLPMDL0020000001	Cleveland	OH	44104	3/7/2012	showed dr Butrans initiation guide, asked if dr if she has patients in her practice taking 1 of these 4 short-acting opioids? dr said yes a lot of vicodin and percocet but she's not started another patient on Butrans, she just doesnt think about Butrans. dr told me not to take it personal but she just gets so frustrated with the chronic pain patients that it's easier for her to just give a refill and get patients out the door versus explaining a new medication and a patch to patients. i asked dr if she really saw a clinical benefit in Butrans, because as a doctor i would think she wants the best medication for her patients. dr said she does see clinical value in Butrans but not every patient will wear a patch and will remember to rotate weekly, dr said it has to be smart patients. i asked dr if she has more than 1, like the 1 she started on Butrans, patient she feels is appropriate and can start on Butrans? dr said she will think about it not sure at the moment but she'll give some booklets out and see if that helps educate some patients. i left booklets and asked dr for her commitment to start 2 new patients in the next week, dr said she will do her best and yes will get people started on Butrans eventually, focused dr on commercial insurance and Caresource patients. recommended Senokot-S
PPLPMDL0020000001	Parma	OH	44129	3/7/2012	Spoke with pharmacist, Rick, & presented information on new Butrans trial/savings program. Discussed usage/eligibility requirements. Discussed appropriate Butrans patient type, focusing on patients taking around-the-clock short-acting opioids, especially if they are escalating the dose or not getting adequate relief. Also discussed OxyContin savings cards & reviewed usage, including use every 14 days if the prescription is written that way.
PPLPMDL0020000001	MAYfield Heights	OH	44124	3/7/2012	Spoke to Jesse about the movement of butrans. He said that they still have it but he has not seen any recently. I asked if he recalls any customers getting refills. He said he does not think he has had any regular customer. I explained the positioning, the coverage and the savings card program. He asked about medicare coverage. I told him that butrans is not covered there but oxycontin is well covered on medicare plans. He said he does not have any issues with oxycontin and customers can usually afford it.
PPLPMDL0020000001	Lyndhurst	OH	44124	3/7/2012	I reviewed the butrans positionng and showed the patient profiles of Jessica, Emma, and William. She said she wouldn't use it for opioid naive but maybe after tramadol. I showed her the appropriate starting dose. She said she knows that Dr. Isakov has prescribed it with good results and she thought she should try it. She asked about the side effects. I referred to the CSA and the top for AE's. I asked her to try a commercially insured patient and give them a savings card so they can get a one month trial first.
PPLPMDL0020000001	Cleveland	OH	44114	3/7/2012	dr said he's still starting patients on Butrans every week and its going well. dr said patients are controlled on Butrans and he's much happier with them being on Butrans. i talked to dr about considering some patients taking vicodin every day for their chronic pain that look like william, patient case study, dr said he will consider some of those patients but as he's told me in the past he is focused on his percocet patients right now. i told dr im happy he's getting good clinical results with Butrans in this percocet group of patients, but asked if he would consider starting 2 patients this week on Butrans, that are taking vicodin but not controlled and need a medication adjustment? dr agreed to try this and said he'll see what happens. focused dr on BWC and caresource patients
PPLPMDL0020000001	Parma	OH	44129	3/7/2012	Spoke with Crystal, pharmacy technician, who said Kevin & Stan were gone for the evening. Reminded her of previous lunch i had with the staff & reviewed Butrans & OxyContin with her. I showed her Butrans "Information Kit" & asked her to leave it for Kevin & Stan with my card. She agreed. I let her know i would follow-up. She said to call or email Kevin or Stan as that is the best way to get an appointment. <font color=blue><b>CHUDAKOB's query on 03/14/2012</b></font>Ashleigh, good to see you going back into the hospital...persistence. Instead of asking the pharmacy about in-servicing on the floors, try asking your offices who the nurse manager is on the medical-surgical floor. This may be an easier route to the right person. What do you think?<font color=green><b>APSEGAS's response on 03/15/2012</b></font>It is worth a try. i had planned to ask that question to Dr Roheny the last couple of times i tried to see him but he was out of the office. i plan to see him tomorrow, so i will try this.<font color=blue><b>CHUDAKOB added notes on 03/16/2012</b></font>Perhaps Gigliotti will know as well. There are many pphysicians who can probably help you with this.
PPLPMDL0020000001	Fairlawn	OH	44333	3/7/2012	Miesha(intern) and Sue(pharmacist). Asked if they are continuing to use butrans prescriptions. Sue said yes and for Dr shah for a patient on Caremark was received Butrans for \$15.00 Discussed trial offer cards, copy cards, patient information kits. Pharmacist agreed to hand out with Butrans prescriptions. Asked if Dr Lefkowitz is still prescribing OxyContin? He is still prescribing but has lost of his patients recently.
PPLPMDL0020000001	Cleveland	OH	44104	3/7/2012	talked to dr about patients like emma, patient case study, dr said he treats patients like her, i asked dr what's the next step? dr said probably vicodin. i asked dr if she would consider Butrans for this patient type? dr said if insurance covered it and patient was willing to wear a patch he would do that. we talked about commercial insurance and Caresource PA requirements and i asked dr if he had 2 patients like emma that he could start on Butrans, when they need a medication adjustment? dr said yes he will do that. we talked about appropriate OxyContin patients, showed visual aid and dr said he writes more OxyContin in hospice and nursing homes as he see's more patients there but he will consider OxyContin for office patients when appropriate. we talked about geriatric patients trying OxyContin, office based patients, showed dr OxyContin fpi, section 8.5, i asked dr if he will start a couple patients that are ready for OxyContin for office patients have UHC/AARP or CCRX? dr said he will consider that, gave formulary grids and told dr i would follow-up next week. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44106	3/7/2012	showed dr william, patient case study, asked dr if he treats patients like this? dr said yes, i asked how often? dr said when he's at the clinic, 2x week, he see's a lot of these patients taking vicodin or percocet. i asked dr what's the next step for patients like this? dr said if patients insurance covers Butrans, he would start them on Butrans. i asked dr what he did before Butrans? dr said increase the dosage strength, number of pills or convert to another short-acting opioid. i asked dr when he see's patients today and next week, like William, patient case study, requiring a medication adjustment, will you start them on Butrans? dr agreed. we talked about caresource PA requirements and commercial insurance patients. recommended Senokot-S
PPLPMDL0020000001	Parma	OH	44129	3/7/2012	Spoke with medical assistant who requested more Butrans & OxyContin savings cards for this location. Reviewed usage & eligibility requirements for each card. Also asked her to give invitations for upcoming Butrans programs. She agreed.
PPLPMDL0020000001	Cleveland	OH	44114	3/7/2012	i talked to john about patients he's starting on Butrans, with dr katz and dr marshall. john said dr marshall's patients have been taking percocet but not controlled so they are starting these patients on Butrans and its been working well. i asked john if he'll start a few patients on Butrans this week, that are taking vicodin, not controlled and needing a medication adjustment? john said yes he will do that and will talk to dr marshall. john said dr katz does start patients on Butrans that have been taking vicodin but not controlled but he'll keep this in mind. focused John on BWC and caresource patients
PPLPMDL0020000001	Cleveland	OH	44106	3/7/2012	worked apm dept
PPLPMDL0020000001	Cleveland	OH	44135	3/7/2012	I asked Dr if he is titrating Butrans and how, he said that he does titrate if the patient is not getting adequate pain relief. I reviewed the doses and that patients can titrate after 3 days. He said he usually gives it at least a week or waits for them to come in a month for their follow up. I asked when was the last time he started a patient on OxyContin, he said he only uses it for cancer pain and terminally ill patients.
PPLPMDL0020000001	Uniontown	OH	44685	3/7/2012	Kim(pharmacist) has knowledge of Butrans but has not seen a prescription. Discussed trial offer and copy cards. Asked how often they are seeing OxyContin prescriptions as well as other pain medicines? Kim said that they are seeing more Opana than anything else lately. More Opana coming from the local pain clinic(Lababidjin town and a good amount of the short acting products.
PPLPMDL0020000001	akron	OH	44304	3/7/2012	Quick overview of product based on physician time available. Presented indication, CII product, transdermal patch delivery buprenorphine for 7 days and reviewed dosing and titration guide. Dr seemed interested and told her i will be back to discuss further.
PPLPMDL0020000001					

PPLPMDL0020000001	Akron	OH	44313	3/7/2012	Asked dr if he knows about Butrans? Dr said no. Gave him the indication, CII and left dosing and titration guide. Butrans 7 doses and asked he knew there were 10 and 15mg? Dr did not know about low doses. Asked dr to take patients on low dose vicodin or percocet to start on OxyContin q12h. Dr agreed to take and review information on both products.
PPLPMDL0020000001	Akron	OH	44320	3/7/2012	Asked dr if he sees patients that are on short acting opioids that continue to have them filled multiple times over many months? Dr responded by nodding head and I told him that those patients are appropriate to initiating Butrans. 7 day delivery of buprenorphine, CII, showed initiation/titration guide to show morphine equivalents to Butrans. Told dr that if patients are over 80mg of a morphine equivalent are appropriate for OxyContin.
PPLPMDL0020000001	Westlake	OH	44145	3/7/2012	I asked Dr how he titrates his patients, he said that he usually starts with the 10mcg, he likes to titrate by 50% of the dose so he has had patients use a 5 and 10mcg before going to 10mcg. I let him know that prescribing 2 patches for patient would be considered off label and that we only recommend patients to wear one patch at a time and he said he understood this. I asked when the last time he started an OxyContin patient and he said that he has converted a few from Opana.
PPLPMDL0020000001	Cleveland	OH	44114	3/7/2012	dr said she started another patient on Butrans a week ago and she will continue choosing Butrans for her patients.i asked dr to tell me about the patients she's recently started on Butrans and why she chose Butrans for them? dr said patients were taking vicodin,not controlled and asking for more pills and she wasn't going to do that so she started them on Butrans.i asked dr what strengths are these patients being initiated on? dr said usually Butrans 10mcg but sometimes the 5mcg.we talked about titration,side effects,handing out patient info booklets to patients and discussing application sites/rotation of Butrans and i asked dr if she will start a couple more patients on Butrans this week,like the one's she's already started? dr agreed. focused dr on BWC and caresource patients.
PPLPMDL0020000001	Cleveland	OH	44104	3/7/2012	i asked dr if Butrans was ever going to play a role in her practice? dr said probably not she doesn't treat chronic pain,she refers to specialists as she doesn't want to deal with chronic pain patients.dr said she appreciates me sharing Butrans info with her every time at lunch but right now,there's no place for Butrans in her practice
PPLPMDL0020000001	Cleveland	OH	44103	3/7/2012	i talked to dr about what she does for those patients with chronic pain that are taking percocet 5/325 and how does she know its time for a medication adjustment.dr said she will start patients on 1-2 percocet daily but if patients start calling every month saying they need to see her earlier because they are out of their pills,she will make an adjustment.i asked dr if she will consider OxyContin for these patients when an adjustment is necessary? dr agreed.i showed dr UHC/AARP and CCRX formulary grids,i asked dr if she has patients with these 2 plans? dr said yes she has a lot of medicare and keeps forgetting OxyContin is covered on these plans.we talked about coverage for these 2 plans for OxyContin.i asked dr if she will start a couple patients with UCH/AARP or CCRX this week,on OxyContin? dr agreed.we talked about Caresource patients that are taking 1 of 4 short-acting opioids listed in the Butrans initiation guide,that meet Butrans indication,that dr can start this week.dr said she will see who's coming into the office this week and start talking to patients again about Butrans.dr said she hasn't done much with Butrans because medicaid and caresource weren't covering Butrans.we talked about PA requirements for Butrans and i asked dr if i had her commitment to start 2 new patients this week on Butrans? dr said she will do her best and see who comes into the office.
PPLPMDL0020000001	Mayfield Heights	OH	44124	3/7/2012	Spoke to Gardenia, Tech, as pharmacist was very busy. She confirmed that butrans is stocked and she has personally seen scripts. It has been covered but she was not aware of the savings cards. I explained the eligibility and the trial month and the monthly savings. I also gave her patient info guides to explain the proper application and rotation. Left initiation guide for Giovanni.
PPLPMDL0020000001	Maple Heights	OH	44137	3/7/2012	Spoke with Jim, pharmacist, who said his time was very limited. Presented new Butrans trial/savings program. Jim said he has one customer on Butrans now & that patient has BWC. Discussed use only for patients new to the brand & with commercial insurance. He said he would keep some of the cards on hand in case more patients start getting it. Also gave him new OxyContin savings cards & instruction sheet. Jim said he would keep my card in case he has any questions.
PPLPMDL0020000001	Westlake	OH	44145	3/7/2012	I asked Dr if he sees merit to using something like Butrans, he said he understands the concept and thinks it will be a good product for some, but not everyone likes a patch, and even those that are willing to give it a try may not be able to afford it or it may not work, so it is a small niche of people with the right managed care, the right types of pain, and that are looking for another option. I asked how often he sees these patients and he said some, but not that often. I asked if he could start just one of these patients that he described each week and he agreed.
PPLPMDL0020000001	Lyndhurst	OH	44124	3/7/2012	Doc said he has been getting good results from butrans despite the one bad experience (see previous note). He said the problem we have is that it isn't covered on medicare. I reviewed the covering commercial plans and the savings cards. He told me to make sure Helen knows as she give out the coupons. did same. I showed him the profiles of Emma and William. He said he would like to use for patients after tramadol. I reviewed the appropriate starting dose. He said he has a lot of medicaid. I told him that butrans is being covered on Caresource with a PA after failure on a short acting opioid. He said he is going to try to use more butrans instead of percocet.<font color=blue><b>CHUDAKOB's query on 03/14/2012</b></font>Looks like you are making headway. If he is going to prescribe instead of Percocet, then starting on the correct dose is going to be very important as well as explaining to him about tapering the dose. Do you agree?<font color=green><b>SIMERTOC's response on 03/20/2012</b></font>Absolutely.<font color=blue><b>CHUDAKOB added notes on 03/21/2012</b></font>OK. Glad we are on the same page.
PPLPMDL0020000001	Mayfield Hts	OH	44124	3/7/2012	Quick call...Doc was too busy to come to lunch. I asked him what his thoughts were on using butrans for his patient population. He said he wants to try it but he just can't remember it. I told him I can come by more often if it would help him remember. He said just leave him something. I asked him to try butrans after tramadol and try for a BWC patient. Provided formulary grids for butrans and oxycontin.
PPLPMDL0020000001	Cleveland	OH	44130	3/7/2012	Spoke with MA, Melissa, & gave her new OxyContin savings cards. She said they do not write a lot of OxyContin out of the office, but would see if they needed them to give to patients they send home with prescriptions for it. She said they do not use a lot of OxyContin & "try not to write it" due to addiction. I agreed that OxyContin, like all opioids does have abuse/addiction potential. Also delivered Butrans core messages & asked if she thought Dr Panigutti would be interested in discussing it. She said she was not sure. She asked that I give her some information with my card & said she would give it to Dr Panigutti to see if he was interested. Let her know I would follow-up.
PPLPMDL0020000001	Cleveland	OH	44130	3/8/2012	Spoke with Laura, pharmacy manager, who said she sent the Butrans they were shipped back because she did not see any prescription activity for it & it expired. Reviewed appropriate patient type, focusing on patients taking chronic short-acting opioids around-the-clock. Also presented new trial/savings program for Butrans & discussed e-voucher for monthly savings for patients who are eligible. Presented OxyContin savings cards & discussed eligibility requirements. She said she has a few customers on OxyContin regularly.
PPLPMDL0020000001	Cleveland	OH	44113	3/8/2012	dr said he's not started anyone on Butrans yet,he knows who the appropriate patients are for Butrans but needs to get in the habit of writing Butrans because he doesn't remember it now.i asked dr to describe to me the appropriate patients for Butrans? dr said patients taking a couple tramadol,vicodin or percocet,not controlled and asking him for more pills,he could start them on Butrans.i showed dr initiation guide,dosage strength ranges,we discussed patients he's treating with 1 of these 4 short-acting opioids that have chronic pain,but need a medication adjustment,i told dr that's where he can start a couple patients on Butrans.dr asked about the clinical trial with patients that had been taking opioids,dr wanted to know which opioids were patients taking,how big was trial,what were the results and what was the discontinuation rate? i showed dr Butrans FPI,section 14 clinical studies,we discussed all info.dr said he was surprised at the discontinuation rate as he thought it would be lower for a pain medication.i asked dr if that was a factor he would consider when prescribing,that could prevent him from starting a couple patients on Butrans? dr said no he will still start a couple patients on Butrans he's just surprised by that discontinuation rate as its a high number to him.i asked dr if he had 2 patients in mind that he could start on Butrans between today and next week? dr said yes and gave commitment to start patients on Butrans.focused dr on commercial insurance patient
PPLPMDL0020000001	Parma	OH	44134	3/8/2012	Dr Mike said he actually did prescribe Butrans for a patient recently. I asked him to tell me about the patient. He said it was an older woman with chronic back pain who had been on many different pain medications. He went on to say that the patient complained of a "tingling sensation" at the application site & wanted to discontinue treatment. He said she showed no signs of redness, rash, or allergic reaction & just said she felt "tingling" at the application site. He said he tried to tell her it was not anything to be concerned about, but she wanted to discontinue treatment. Reviewed appropriate patient type/range & discussed OxyContin q12h as an option for appropriate patients beyond Butrans. He said he does not believe in chronic opioid therapy. He said he is amazed at patients who present with seemingly normal x-rays who complain of horrible pain. He said they are not in real pain in his opinion & that most pain patients just have weak minds, not true pain. I agreed that some patients may not be appropriate for opioid medications, but reminded him that there are some patients in legitimate pain who need treatment in attempt to re-direct him to more appropriate patients.
PPLPMDL0020000001	Parma	OH	44129	3/8/2012	Reviewed Butrans core messages with Dr Khooblal. He confirmed that he is going to tonight's Cleveland Butrans dinner. He said he is looking forward to hearing Dr Laham speak & discussing Butrans with other physicians. Discussed the importance of appropriate patient selection when treating with any type of chronic opioid therapy. He said he "fires" patients when he feels they are not legitimate. I told him this is a good way to protect his practice. Discussed appropriate Butrans patient type/range, including OxyContin as an option for appropriate patients beyond Butrans. Dr Khooblal said he does not prescribe OxyContin because he thinks it is too abusable. I agreed that like all opioids, OxyContin does have abuse/addiction potential. Reminded him that there are still legitimate patients who need medications to help control their pain. He agreed that it is important to continue to treat those patients. I asked if he prescribes Percocet or any other CII medications. He said he does not. I asked if he is comfortable having patients on chronic opioids. He said as long as he feels they are in true pain & they have some sort of evidence of pain, he does not have a problem having them on appropriate opioid treatments.
PPLPMDL0020000001	Cleveland	OH	44130	3/8/2012	Spoke with pharmacist, Stephanie, who said she thinks they have one customer on Butrans. Discussed appropriate patient type, focusing on patients taking chronic short-acting opioids around-the-clock. Presented information on new savings & trial programs for Butrans & gave her one package of OxyContin savings cards. Reviewed eligibility requirements, reminding her they cannot be used for patients with any type of government insurance. She said she sees some very high co-pays, so she is appreciative of the savings for customers with higher co-pays.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/8/2012	Linda(PA) for Dr. Narouze does know about Butrans from a pain seminar in Las Vegas each March. Provided indication, CII, 7 day transdermal patch for moderate to severe pain. She had used a test patch at her seminar.
PPLPMDL0020000001	Cleveland	OH	44113	3/8/2012	showed initiation guide to dr,dosage ranges for short-acting opioids,asked dr if he is considering Butrans for patients taking 1 of these short-acting opioids when a medication adjustment is necessary? dr said yes he has and has given a few booklets to patients so they can read,dr said not every patient will wear a patch but he is talking about it so he'll see what happens in follow-up visit.i asked dr if he can start 1 patient on Butrans,focusing on commercial insurance patients,today-next week? dr said yes he will do that.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	3/8/2012	showed patient profile,william,to dr,asked if he treats patients like this and if so what's next step? dr said yes he has a lot of these patients.dr said he is starting patients on Butrans,just has to remember Butrans is there.i showed dr Butrans initiation guide,asked if he will start a couple patients like william on Butrans today-next week? dr said yes he will and he will see me tonight at dinner program with dr laham.focused dr on BWC and commercial insurance patients
PPLPMDL0020000001	Cleveland	OH	44109	3/8/2012	dr said he started another patient on Butrans this week but it wasn't covered,asked dr what plan? dr said buckeye.told dr i was happy he started another patient on Butrans but showed formulary grid,we discussed commercial insurance patients,BWC and Caresource pa requirements.dr said ok he forgot about caresource coverage.i asked dr if he will start a couple more patients today and tomorrow on Butrans,focusing on plans we discussed? dr agreed. showed dr OxyContin visual aid,we discussed appropriate patients for OxyContin,dr said he doesn't like to start new patients on OxyContin,he's just maintaining the patients he inherited in the practice when he joined.i asked if dr had any patients he felt OxyContin was appropriate for? dr said a few.i asked dr if he would consider Oxycontin for them? dr said he'll think about it.i showed dr medicare and commercial insurance grids and asked that he focus on these plans.dr agreed.recommended senokot-S
PPLPMDL0020000001	Lyndhurst	OH	44124	3/8/2012	Spoke to Megan about the stocking and movement of butrans. She said she has a couple of customers on butrans. I asked if she recalls the use of a savings card. She did not recall but it seemed affordable. I explained the eligibility o-for the cards and the one month trial. I informed her of the oxycontin savings cards. She said they really have not heard much from oxycontin customers lately. They still get a fair amount of scripts and most can afford it. Gave her a conversion guide as a tool.
PPLPMDL0020000001	Cleveland	OH	44130	3/8/2012	Invited Dr Diab to final Cleveland area program. He said he cannot attend. Discussed ability to take supplemental analgesia with Butrans in the form of immediate-release opioids or non-opioid medications. Also showed OxyContin formulary coverage.
PPLPMDL0020000001	Euclid	OH	44119	3/8/2012	Spoke to Lauren about the stocking and movement of butrans. She said she has maybe only seen it a few scripts. I asked her if she knows if those customers have gotten refills. She was not aware of if they have come back because they were not regular customers and she did not recall the prescriber. I explained the positioning and the docs can write with refills or call it in. Showed her the patient info guide and explained the proper application and rotation.
PPLPMDL0020000001					

PPLPMDL0020000001	Cleveland	OH	44113	3/8/2012	showed dr william,patient case study,asked dr if he treats patients like this? dr said yes he has a lot of patients with chronic pain that take vicodin every day and always want more pills or another opioid like percocet.i asked dr whats the next step for patients like william? dr said he might increase to vicodin 10mg or ES,but he would consider Butrans if insurance covers it.dr asked about medicaid coverage? we talked about PA requirements for Caresource patients,i asked dr if that sounded feasible? dr said yes.i asked dr if he could start 1 patient on Butrans,who looks like william,between today and next week? dr said he will do that.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	3/8/2012	dr said she's started a few patients on Butrans but wanted to know what coverage there is for medicaid patients? we talked about caresource pA requirements and i asked dr if she could that? dr said yes she forgot about that but will start more patients on Butrans knowing this info.i showed emma,patient case study,to dr and asked if she's treating patients like this? dr said yes.i asked what next step is for patients like this? dr said usually vicodin.i asked dr if she would start a couple patients today-next week on Butrans,that look like emma,patient case study,needing a medication adjustment instead of starting them on vicodin? dr agreed.focused dr on BWC,caresource patients and commercial insurance patients.recommended Senokot-S
PPLPMDL0020000001	Euclid	OH	44132	3/8/2012	Quick call....Met new doc in Dr. Thomas' office. Introduced her to butrans, the indication and positioning, CII status and once weekly dosing. SHe was not familiar with it ans asked the difference from fentanyl. I explained no head to head data and butrans is for more moderate pain. Gave her butrans guide and formulary grid. Scheduled a lunch.
PPLPMDL0020000001	Rocky River	OH	44116	3/8/2012	Quick call with Kim, we reviewed Butrans medication guide and i asked if they have seen scripts at this location, she has not yet. I reviewed Butrans use of supplemental analgesia and that doctors can call in and write refills. Reminder that OxyContin is an option for patients instead of short acting around the clock.
PPLPMDL0020000001	Independence	OH	44131	3/8/2012	Followed up with Dr Pai regarding OxyContin pharmacy stocking. Discussed pharmacies in his area who are stocking OxyContin. Dr Pai said this would be helpful in giving patients options of where they can get their prescription for OxyContin filled. Reminded him of favorable managed care coverage & gave him formulary grids. Dr Pai told me again about the patient for whom he recently started on Butrans, then took a patient back.
PPLPMDL0020000001	Highland Heights	OH	44143	3/8/2012	Window call...I showed doc the butrans demo and explained how now new patients to butrans can get a trial month up to \$75 the continued monthly savings of up to \$40. He said he remembers and to leave the cards with the girls. Reminded him of oxycontin patient type and that that might be a more affordable option for appropriate medicare patients due to preferred coverage. Provided formulary grids for both.Next Objective
PPLPMDL0020000001	Cleveland Hts	OH	44118	3/8/2012	Quick call...I asked doc what he thought of the butrans program last week. He said he thought it was one of the best talks he has been to and Dr. Laham did a great job. He said His wife, Dr. Mrs. Tucker also enjoyed it. He said he wants to try butrans and thinks he has some patients for it. I reminded him of the commercial insurance and the trial month with the savings cards.
PPLPMDL0020000001	Westlake	OH	44145	3/8/2012	Dr said he just has not found a place in his practice for Butrans, he said he wanted to come to a dinner program but did not want to go downtown tonight, I asked if he would come to Independence and he said he will try. He would like to see how other doctors are fitting it into their practices. I asked if he is continuing to start new patients on OxyContin and he does, I showed the pain types and he said he does treat all three. He said the specialist don't treat pain very well and he is the one who usually has to help his patients, he said that the ortho doctors seem to be the worst at treating pain. Even some of the oncologist don't give pain meds until the patient is on hospice. We reviewed the conversion guide. Dr said that he would like to start using more of the lower strengths of OxyContin and I asked if he would convert patients to OxyContin before titrating the short
PPLPMDL0020000001	Rocky River	OH	44116	3/8/2012	Spoke with Stan, we reviewed the Butrans medication guide and I asked if he's seen new patients. He has not. We reviewed the doses and that patients may need to be titrated after 3 days. I asked if he would let patients know to contact their doctor if they are not getting adequate pain relief so they can be titrated and he said he would. We reviewed the OxyContin conversion guide and that it is also a long acting option.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/8/2012	Followed up on conversation with Dr and Gina at the home office. Dr remembers speaking with Gina whom he knew from CCF and did not know about Ryzolt or Butrans. Provided indication, CII, 7 day delivery of buprenorphine in a transdermal patch. Dr said that they are a narcotic free clinic but seemed interested in Butrans because it is a controlled release CII product. Provided FPI and dosing and titration guide. Asked dr to review information and will follow up at lunch next week.
PPLPMDL0020000001	Parma	OH	44134	3/8/2012	Dr Scanlon said he is writing a lot of Butrans. I asked him who he wouldn't write Butrans for. He said just someone who didn't have pain. I agreed that a Butrans candidate would be someone in moderate to severe chronic pain. I asked about patients taking Vicodin daily. does he consider those patients Butrans patients. He said he has been writing for that type of patient. I asked what triggers him to prescribe. He said when the patient says that their Vicodin isn't quite providing enough relief, he will give them Butrans. I asked if he allows Vicodin for supplemental analgesia. He said always. He said often he keeps the patient on both. I recommended he consider titrating Butrans if necessary, reminding him this can be done at day 3 up to a maximum of 20mcg/hr. He said that was a good reminder. I asked if he would continue to prescribe Butrans for this type of patient. He said he will. Discussed OxyContin for patients beyond Butrans range, especially if they are taking immediate-release oxycodone. & may be appropriate for q12h dosing.
PPLPMDL0020000001	Cleveland	OH	44143	3/8/2012	I reviewed the key selling messages of butrans and asked doc where he thought he might use it in his practice. He said he would more than likely start them on a short acting opioid first. He asked about head to head data with any other opioid. I told him there is no such data. I showed him the AE profile and he thought it was comparable to other opioids. He also asked about the delivery systme - if butrans had a resevoir like duragesic. I showed him the demo and discussed the matrix delivery system. He said he likes the idea of a patch as it is less abusable. I showed him the boxed warning and explained that butrans is still an opioid and has risks similar to other opioids. He said he will give it a try but thinks he would use it for younger patients as his older patients have problems with patches. I discussed the commercial and caresource coverage and lack of medicare. He liked the savings cards plan. I reminded him that oxycontin is still an appropriate option for elderly patients with mod to severe pain and has preferred formulary coverage for those patients.
PPLPMDL0020000001	Cleveland	OH	44113	3/8/2012	showed dr BUP301S,opioid experienced patients clinical trial,discussed with dr asked if he treats pain conditions,like those in the inclusion criteria? dr said yes,dr said a lot of his patients take narcotics for acute pain but he does have some taking for chronic pain.i asked dr if he would start a couple of those patients on Butrans,that have chronic pain,when they need a medication adjustment? dr said he will do that and asked about BWC coverage? we talked about BWC,caresource PA requirements and Commercial insurance patients.i asked dr if i can follow-up next week to hear about these couple patietns he started and see if he has any questions? dr
PPLPMDL0020000001	Parma	OH	44129	3/8/2012	Caught Myra between patients. She said she attended the Beachwood program for Butrans but did not have a good experience, so she confirmed that she will be at the 3/13 Independence program. Reviewed patient information booklets with her & Dawn.
PPLPMDL0020000001	Cleveland Hts	OH	44118	3/8/2012	Quick call...I asked doc if he was still having success with butrans. He said yes and that patients seem to like it. I asked him to try butrans for similar patients - those failing on tramadol or low dose vicodin. Reminded him that new patients to butrans can try butrans for one month.
PPLPMDL0020000001	Euclid	OH	44119	3/8/2012	I thanked doc for attending the butrans speaker program. I asked him what he thought of the program. He said it was good. I asked him if he has a better idea of where to use butrans in his practice. He said yes and he will probably use it for a tramadol patient. I showed him the initiation tool and the appropriate starting doses. I reminded him of the commercial formulary plans and the savings card with the one month trial. He said "now you're talking". He said this is the year. I asked him if he could start a patient this week. No reponse.
PPLPMDL0020000001	Cleveland	OH	44113	3/8/2012	dr is PGY-1,working with dr sharma,he didnt know anything about Butrans so we discussed 6 Core selling messages,dr focused on Butrans being transdermal,CII and a patch for chronic pain.dr said he liked patch technology,we discussed patients taking vicodin and percocet for chronic pain and how Butrans could be an option when patients need a medication adjustment,dr said ok he appreciated info and if dr sharma starts some patients on Butrans he will feel more comfortable prescribing after he does.dr asked about insurance coverage,focusing on caresource patients,we talked about pa requirements for caresource patients, and talked about commercial insurance patients trying Butrans using the initial trial offer cards.i asked dr if he will start 1 patient on Butrans,while working with dr sharma,if he feels its appropriate? dr agreed.recommended Senokot-S
PPLPMDL0020000001	Independence	OH	44131	3/8/2012	Quick call- Handed Dr Sundaram Butrans dinner invitations for upcoming events. I asked if he would attend. He said he may be able to make the 3/13 program across the street but did not want to commit fully. He said he is keeping Butrans in mind. I encouraged him to attend the program as he may find that the information & discussion will help him identify who is & is not a Butrans patient. Also gave OxyContin formulary grid, reminding him of favorable coverage.
PPLPMDL0020000001	Richmond Heights	OH	44143	3/8/2012	Met new NP in Dr. Balaji's office. Introduced her to the butrans indication and positioning, and other key selling messages. SHe asked if it was like fentanyl. I told her there is no head to head data bit butrans is a CII narcotic that can be prescribed as a first line opioid. I reviewed the dosing options and 5 and 10 as starting doses. She likes the idea of a patch better than pills. She was concerned about the cost. I told her about the commercial coverage and caresource but no medicare coverage. Explained the savings cards which she thought was a great savings. She liked the initiation tool as a resource and said that she would try butrans. I discussed the oxycontin patient type, the 7 dosing options and the preferred medicare coverage there.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/9/2012	Asked dr if he has had any clinical experience with Butrans? Dr said he did not but he will probably use it when he has the appropriate patient. Asked dr where he would put Butrans? Dr said after Tramadol before the next medicine. Reviewed patient carse study on tramadol initiating on 5mcg. Dr agreed. No further information.
PPLPMDL0020000001	Lakewood	OH	44107	3/9/2012	Spoke with Megan, she has not seen movement of Butrans and just thinks that there must not be doctors in the area prescribing, i reviewed the appropriate patient types and if she would ever recommend Butrans to a patient instead of short acting around the clock, she said patients love their pills and they have no reason to want to switch to a patch. We discussed the use of supplemental analgesia and that it may be an option for patients not getting adequate pain relief for their current therapy. we reviewed the conversion guide for OxyContin.
PPLPMDL0020000001	Parma	OH	44129	3/9/2012	Followed-up with Dr Salewski per his request at the Butrans dinner program. Dr Salewski said his only experience with Butrans has been a patient who came in on it who said it did not work. He added that the patient was "a mess with cancer" & that put the patient on 75mcg fentanyl in addition to Percocet & the patient is now doing fine. He said he did learn at the program that it could have been a dosing issue with that patient. He went on to say that if Butrans does not have Medicare D coverage, he probably will not prescribe it. He said his patients need something that works that will not cost them a lot of money. He said most of his patients who he has on chronic pain medications have Medicare D coverage. He said he believes in long-term opioid therapy only in older patients & added that for his younger patients, his goal is to get them off the pain medications & if that does not work, get them in to a neurosurgeon who may be able to help them. He said he does not like to prescribe OxyContin or long-acting Morphine & mostly prescribes fentanyl due to efficacy & cost. Asked if he has any patients who are in the 50-60 year-old range, still working, with commercial insurance. He said he does have some but he tries not to get into chronic opioids with them. Dr Salewski said he likes that Butrans is transdermal with once weekly dosing. He asked that I follow up in 6 weeks to update him on Medicare coverage.
PPLPMDL0020000001	Parma	OH	44129	3/9/2012	Dr Gigliotti asked if Butrans is "taking off". I told him physidians of various specialties have found that Butrans is an option for some appropriate patients, although Butrans is not for everyone. Discussed appropriate patient type & reviewed trial/savings program for eligible patients. Gave Portal invite & encouraged him to try the site. Also reminded him of favorable OxyContin formulary coverage.
PPLPMDL0020000001	Cleveland	OH	44114	3/9/2012	talked to dave,pharmacy mgr,about OxyContin stocking and writers in area.dave didnt have time to look up names but said he knows dr robson and dr boyd prescribe a lot of OxyContin,dave said there are some cleveland clinic patients that will get their Rx filled here but he doesnt know names off hand.showed dave OxyContin visual aid,we discussed appropriate patients and dave said he always thinks of OxyContin for severe pain but its up to doctors when they want to start patients on OxyContin.showed dave OxyContin conversion guide and asked if dave would talk to HCP's about 7 tab strengths,if patients need to be titrated? dave said some HCP's he can talk to about this but others he cant.we talked about certified medical education catalogs for pharmacy,left a couple with dave.i asked dave if he's seen any Butrans Rx here? dave said no Rx yet,he likes idea of patch for chronic pain but hasnt seen any Rx yet. showed visual aid,we discussed appropriate patients,dave focused on opioid experienced and i asked if dave seen's these patients here? dave said yes all the time.i asked dave if he would recommend Butrans to appropriate patients by handing the patient info booklets out to patients so they can talk to their HCP's.recommended Senokot-S
PPLPMDL0020000001	Chagrin Falls	OH	44023	3/9/2012	Spoke with Ben, pharmacy manager, who confirmed Butrans stocking & said he thinks he has one customer on Butrans. He said he has not heard any feedback from this customer. Presented new trial/savings program & reviewed eligibility requirements. Also reviewed appropriate patient type. Discussed OxyContin savings program, eligibility requirements, & usage, including use for cash paying patients. Ben said savings information is always
PPLPMDL0020000001	Chagrin Falls	OH	44022	3/9/2012	Dr Rood said the patient who he has on 20mcg Butrans is doing well. I asked if the patient takes supplemental analgesia with it. He said this particular patient is very reluctant to take short-acting opioids due to past bad experience with them, so although he told her she could take supplemental analgesia with immediate-release opioids, she elected not to. I asked if he has her take NSAID's for supplemental analgesia. He said that is what he recommends to her. I told him he was correct in telling the patient that since in clinical studies, patients were given acetaminophen or ibuprofen for supplemental analgesia. Presented new Butrans trial/savings cards & eligibility requirements. Also discussed appropriate patien type & discussed OxyContin q12h for appropriate patients beyond that Butrans range. He said he will continue to look for patients who may be appropriate for Butrans but reminded me that he does not have a lot of patients on chronic opioid therapy.

PPLPMDL0020000001	Lakewood	OH	44107	3/9/2012	Quick call, I reviewed the trial cards for Butrans and asked if he has been starting new patients with the cards. He said he didn't know and to talk to Patty, he said that he is still staring new patients but some of them may be Medicaid and they do the prior auth, he asked about where else Butrans is covered and we reviewed the managed care. We discussed that Medicare D patients have access to OxyContin.
PPLPMDL0020000001	Cleveland	OH	44113	3/9/2012	worked pain management dept-see call notes on dr shen and dale novak,pa
	Cleveland	OH	44113	3/9/2012	dr said she's been starting patients on Butrans since we came out with initial trial offer cards and caresource PA requirements got easier for Butrans.i asked dr to describe to me the patients she's starting on Butrans and why Butrans? dr said patients were taking either vicodin or percocet for chronic pain but not controlled so she wanted to try Butrans.dr said she gives patient info booklet to patients she starts and that helps to educate them.i asked dr if she will continue to start more patients on Butrans today-next week? dr said yes.focused dr on caresource and commercial insurance patients.used Butrans initiation guide for discussion.
PPLPMDL0020000001	Westlake	OH	44145	3/9/2012	I showed the inclusion criteria from OxyContin sales aid and asked if he treats these pain conditions. He said he does see back and arthritis, some cancer but not that often. We reviewed that OxyContin is an option for patients taking short acting around the clock and he agreed to think of patients to convert. Reminder that Butrans is also a 7 day option, he has not started any new patients lately, he is still having insurance issues. I asked if he would try commercial insurance and just one patient on the trial to see how it works out, he agreed.
PPLPMDL0020000001	Chagrin Falls	OH	44023	3/9/2012	Spoke with pharmacist Deidre who said she did not have much time today. Presented information on new Butrans trial/savings program & reviewed eligibility requirements. Also reviewed OxyContin savings cards & gave her one package of cards along with instructional leaver. She said she would give the cards to eligible patients.
PPLPMDL0020000001	South Euclid	OH	44121	3/9/2012	Quick call....reviewed the Butrans indication, CII, dosing, and 7 day delivery. Asked her to prescribe for a commercially insured patient, give them a savings card and those patients can try butrans for one month.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/9/2012	Quick Butrans call at desk. provided dr with indication, CII 7 day transdermal patch, patient appropriate for product. Asked dr if he uses tramadol and/or vicodin for patient with pain? Dr said yes. Nothing else learned.
	Highland Heights	OH	44143	3/9/2012	Spoke to Kristen about the movement of butrans. She said she cant recall filling any scripts recently but the tech said that she saw a script for it. I asked if she knows if the customer came back for a refill. She did not remember. I explained the positioning and the CII status which means HCPs can prescribe with refills. Informed them of the savings card and the one month trial. Kristen has not had any issues with oxycontin and is stocking most of the strengths, but not 15mg. I explained the oxycontin savings cards now on relay health.
PPLPMDL0020000001					
PPLPMDL0020000001	Westlake	OH	44145	3/9/2012	Quick call, I reminded Dr of his commitment to at least try one patient on Butrans, I gave him the trial card and told him to write for one commercial patient. He said he would.
PPLPMDL0020000001	Cleveland	OH	44105	3/9/2012	dr said she's handing out the Butrans patient info booklets, to patients, but not started anyone on Butrans.dr said she's just waiting to retire at the end of the month and managing patients chronic pain until then.i showed dr patient profile,william,asked dr if she see's patients like william? dr said yes a lot of patients with chronic pain take vicodin or percocet,dr said these patients just want their pills and arent always open to trying something new,like Butrans.i asked dr if she would at least talk to a few patients that look like william,and start them on Butrans? dr said she will consider that.focused dr on BWC and commercial insurance patients trying Butrans.dr asked about caresource patients,we discussed PA requirements for Caresource patients.
PPLPMDL0020000001	Cleveland	OH	44113	3/9/2012	showed dr patient case study,emma,asked dr if she treats patients like this? dr said yes.i asked dr whats the next step for patients like emma? dr said either increase tramadol to 300mg/day or convert to vicodin.dr said she doesnt like treating chronic pain patients as its very frustrating.i asked dr if she would ever consider a long-acting opioid for a patient like emma? dr said maybe,depends on the patient and if insurance pays for it.i asked dr to put aside insurance,clinically would she consider it for this patient based on patient history shown here? dr said she would.dr asked about medical aid insurance coverage for Butrans? I asked dr if she has a specific patient in mind? dr said she has some caresource patients that she feels could be appropriate for Butrans. we talked about PA requirements for Caresource patients and I asked dr if she would start a couple of these patients between today and next week on Butrans? dr said she will dr said she has to be sure patients are willing to wear a patch and remember to rotate weekly but she'll talk to some patients and see what happens.i told dr i will follow-up next week to hear about those couple patients she's committed to starting on Butrans.focused dr on commercial,trice and caresource patients
PPLPMDL0020000001	Cleveland	OH	44111	3/9/2012	Spoke with John, we reviewed the medication guide for Butrans and the use of supplemental analgesia, we discussed that Butrans is a CII and can be called in and refilled. He has seen a few scripts from doctors downtown. I asked if he would let patients know about Butrans as an option and he agreed. We reviewed the OxyContin conversion guide and that OxyContin is an option instead of short acting around the clock.
PPLPMDL0020000001	Solon	OH	44139	3/9/2012	Discussed scheduling a meeting at AMCP - Mike said he would check with Deb. Doesn't know his schedule but knows he is pretty booked up. Butrans - Clinical is not that interested in Butrans at this point. What is going to take is when they model the analgesic class. He has had a difficult time getting clinical to reconsider. Will try to get them to request additional information.Mike said he will look at what he can do about the language on US requirements. Understood what we are looking for and will try to get CA remark to agree to language.Has not had time to review proposal for 2013. Said contracts are coming back with much less red than originally thought. Will follow up upon review from lawyers.
PPLPMDL0020000001	Lakewood	OH	44107	3/9/2012	Quick call, I asked when the last time she said it was in the nursing home. I reviewed the OxyContin is covered on most Med D plans and that low dose is an option
PPLPMDL0020000001	Cleveland	OH	44113	3/9/2012	dr said she's starting patients on Butrans every week and has been since we had lunch last week.i told dr that was great she's getting so much clinical experience with Butrans and asked for her continued business.dr said yes she will continue starting patients on Butrans she is happy and so are patients.
PPLPMDL0020000001	Akron	OH	44310	3/9/2012	Asked Dr where his has used OxyContin in the past and for what type[s] of pain. Dr claimed to not writing much anymore and has used it for all types of pain including spinal/low back pain. nothing else learned. Gave FPI for Butrans and reminded of 7 day transdermal system for moderate to severe chronic pain.
PPLPMDL0020000001	Cleveland	OH	44113	3/9/2012	dale said he's started a couple more patients on Butrans,since our lunch last week.showed dale William,patient case study,asked if he's treating patients like this? dale said yes.i asked how often? dale said daily,i asked dale whats the next step? dale said he would consider Butrans now,in the past probably increase dose to 10mg vicodin or vicodin ES.i asked dale if i have his commitment to starting a couple patients like william,today-next week on Butrans? dale agreed.focused dale on BWC,commercial insurance patients and Caresource patients.recommended Senokat-S
PPLPMDL0020000001	Cleveland	OH	44127	3/9/2012	dr said she's not started anyone on Butrans recently,dr said she hasnt been prescribing narcotics to any patients lately and posted a sign on the door telling patients this info,she sends them to pain management doctors.i asked dr if she could see herself prescribing Butrans for patients knowing this info? dr said yes she knows Butrans is a CII opioid in a patch but she's interested in starting a few patients on Butrans and keeping some patients in the practice without sending to pain management.i talked to dr about Butrans initiating dosage strengths,titration and how to write the Rx of Butrans.dr asked about Caresource coverage? we discussed PA requirements for Caresource patients,i asked dr if that seemed easy to do? dr said yes she will start 1 or 2 patients today-next week and see what happens.
PPLPMDL0020000001	Brooklyn	OH	44144	3/9/2012	Quick call- Attempted to stop Dr Detwiler with new OxyContin conversion/titration guide. He thanked me & said he would use it. Also told him I know he is concerned about saving his patients money & showed new Butrans trial/savings cards & reviewed eligibility. He thanked me & walked into a room.
PPLPMDL0020000001	Chagrin Falls	OH	44022	3/9/2012	Discussed OxyContin q12h with 7 tablet strengths for flexibility in dosing. Dr Hudson asked if I still carry Butrans. I told her yes. She told me she has a patient who came to her on Butrans 10mcg from pain management. She said the patient had tried multiple other medications to control her pain but was not getting relief. She said the patient reported that she liked Butrans & that it worked well for the first few days but then did not seem to work as well after that. Dr Hudson asked what she should do with that patient's Butrans. Discussed titration ability after day 3 to a maximum of 20mcg. Also discussed supplemental analgesia in the form of immediate-release opioids or non-opioid medications. She said her understanding was that opioids could not be taken with Butrans. Discussed Butrans as a partial agonist, not an agonist/antagonist. Showed FPI 2.4 for evidence of ability to take opioids as supplemental analgesia. Gave Dr Hudson initiation guide & tool for figuring out appropriate dosing. She said she was glad I was there today because she did not know what to do with this patient & now she better understand.
PPLPMDL0020000001	South Russell	OH	44022	3/9/2012	Quick call- Attempted to stop Dr Kale with new Butrans initiation/titration guide, but she said she had to go to the hospital to do rounds & couldn't talk. I let her know I would leave it for her & let her know it was a useful tool in figuring out appropriate starting doses of Butrans. Also reminded her of OxyContin savings cards in their sample closet.
PPLPMDL0020000001	Barberton	OH	44203	3/9/2012	Bill(pharmacist) said he has both Butrans and OxyContin in stock. Explained Butrans indication, CII, 7 day transdermal delivery, dosing and titration. Bill said he has seen a few prescription come through but couldn't remember from whom. Discussed OxyContin indication, CII, and copy cards. Bill said he would hand them out when necessary.
PPLPMDL0020000001	Cleveland	OH	44113	3/9/2012	i talked to dr about 6 Butrans core selling messages,dr focused on Butrans being transdermal,a CII and once weekly dosing.i asked dr if he treats patients like emma,patient case study? dr said yes he has a lot of patients on tramadol and vicodin for chronic pain and they always want more and more pills.dr said patients with chronic pain build tolerance and dependance on the opioids so he has a hard time figuring out if patients have legitimate pain.i asked dr how he decides on which opioid is appropriate for patients like emma? dr said patients like emma,not controlled on tramadol,would probably get started on vicodin.i asked dr if he would consider Butrans for patients like emma? dr said yes he would.dr said he and dr lolita agra have been sending all chronic pain patients to pain management specialists,as its been tough to manage these patients.i asked dr if he would start a couple of patients like emma,on Butrans,today-next week? dr said yes he will.dr asked about application sites of Butrans? i showed patient info booklet to dr,we discussed application sites,rotation and dr asked about side effects of Butrans,i showed dr Butrans visual aid,AE page and i asked dr if there were any side effects that surprised him? dr said no the side effects looked like other opioids.i told dr to give patients the booklet when they leave with a script of Butrans,dr said he will do that. asked dr if i could follow-up next week? dr said yes.focused on caresource patients,commercial insurance
PPLPMDL0020000001	Cleveland Heights	OH	44118	3/9/2012	Introduced doc to the butrans indication, positioning, and other key selling messages. Heasked how strong butrans is compared to other narcotics. I explained that while there is no head to head data with other opioids, butrans is a CII similar to vicodin and that butrans can be called in and refilled and can be used as a first line opioid. He asked about dosing options and how to start the product. I showed him the initiation guide and how to start on 5 or 10mcg dose. He said he has a patient that has been "buggin him" for percocet but he does not want to give it to her. He said she is taking about 30mg of percocet and wants/needs more. I explained that she would need to be tapered down a bit before starting on 10mcg of butrans. If her pain has progressed that patient may be more appropriate for a low dose of oxycontin. He asked if oxycontin was a CII or CII. I confirmed that it is CII. He said he is trying not to prescribe CII's. He said he will have to write butrans than refer to pain mgmt for more narcotic than that. Reviewed coverage and savings card. Reviewed same with MA, Michelle.
PPLPMDL0020000001	Berea	OH	44017	3/9/2012	I asked Dr if he would come to the independence program on Tues and he said he will try to make it. We reviewed the trial card for Butrans and I asked if he would try just one patient to start, he agreed.
PPLPMDL0020000001	Lakewood	OH	44107	3/9/2012	I asked Dr what his thought are on where Butrans is going to fit in, he said that he really hasn't had much time to think about it, he has been so busy with his nursing homes hospital and everything else, he said we can talk more if he has time next week and he'll tell me more about everything going on.
PPLPMDL0020000001	Brooklyn	OH	44144	3/9/2012	Quick call- Positioned Butrans for patients taking 3-4 Vicodin per day who are asking for an increase in dose or change in their medication regimen. Also reminder for OxyContin q12h for patients beyond Butrans range.
PPLPMDL0020000001	Westlake	OH	44145	3/9/2012	Dr told me that he forgets about Butrans and the month trial card. I asked if we could but the cards on his desk so he won't forget and he agreed. I asked if he would try Butrans for patients taking vicodin around the clock and give the the trial month and he agreed. He said that Dr Shah has also been using Butrans. I reviewed the coverage for OxyContin on Medicare D.
PPLPMDL0020000001	Lakewood	OH	44107	3/12/2012	Quick call, I asked Dr to think of OxyContin as an option for patients with the inclusion criteria and he agreed that these were appropriate patients. I reviewed that OxyContin may be an option for patients with Med D and I used the pull through piece.
PPLPMDL0020000001	Solon	OH	44139	3/12/2012	Spoke with Jennifer, pharmacist, & presented new Butrans trial/savings card program. Also discussed eligibility requirements, reminding her patients with any type of government insurance cannot use the cards. Also discussed OxyContin savings cards/usage. She said they stock OxyContin but have not seen Butrans activity. Reviewed appropriate patient type, focusing on patients who get increases in dose or dosing interval of their chronic short-acting opioid medications. She said that is common. Reminded her of patient information booklets they have on the shelf that can be given to patients who she identifies as appropriate.
PPLPMDL0020000001	Cleveland	OH	44106	3/12/2012	dr said he hasnt started anyone on Butrans recently but knows its available,i asked dr if he's seen any appropriate patients for Butrans in the past week? dr said he doesnt have a lot of patients taking narcotics but does realize that Butrans is there if he wants a long-acting opioid.i asked dr who is the appropriate Butrans patient in his mind? dr said patients taking a couple tramadol or vicodin,not controlled and asking for more pills,showed dr initiation guide,we discussed dosage ranges for appropriate patients and i asked dr if he would consider 2 patients,this week,to start on Butrans,when he needs to make a medication adjustment? dr said he will do that.focused dr on commercial insurance patients and we discussed PA requirements for Caresource patients.
PPLPMDL0020000001	Lakewood	OH	44107	3/12/2012	Quick call with Dr. I asked if he he had any thoughts about where Butrans may fit in, and he said that he was not sure yet but he will try it. I showed Emma and asked if he would try a patient like this. I reviewed the trial cards with Robin and asked if she would help find some appropriate patients for the doctor to try and she agreed.
PPLPMDL0020000001					



PLPMDL0020000001	Parma	OH	44129	3/12/2012	Stopped Dr Moysaenko in the hallway with Butrans formulary grid. I showed him the commercial insurance plans listed & let him know that patients new to Butrans with these plans could take advantage of the new Butrans trial & savings program where most can try Butrans for 28 days at no out-of-pocket cost. Positioned Butrans for patients taking tramadol or Vicodin who are not adequately controlled. He asked if he has some of the Butrans cards. I confirmed that he does. Also positioned OxyContin for appropriate patients beyond Butrans range.
	Solon	OH	44139	3/12/2012	Dr Zaidi said he has still been starting more patients on OxyContin. Discussed formulary coverage & savings cards. He said they have been useful & he does not have managed care problems with OxyContin. I asked if he typically prescribes a short-acting opioid along with a long-acting option like OxyContin for patients to use as supplemental analgesia. He said he does sometimes but avoids it if possible. He added that if he can have a patient on only one, that is the ideal. He went on to say that this is why he prescribes OxyContin 3 times per day instead of q12h. I reminded him that OxyContin is intended for q12h dosing. He said he knows this. I asked if he has considered increasing the OxyContin total daily dose by titrating to the next tablet strength instead of increasing the dosing interval. He said it just works better for patients if he does it 3 times per day. He said even if he increased a patient's dose of OxyContin to maintain the q12h dosing, the patient would still want something for supplemental analgesia. I showed him Butrans dinner invitation for 3/13 program & asked if he could attend. He said he would like to & he may be able to attend, but asked if he can send his nurse to take notes for him in the event that he can't make it. I let him know I would have to get approval beforehand. Reviewed appropriate patient type & discussed titration to a maximum of 20mcg. He said he would do his best.
PLPMDL0020000001	Independence	OH	44131	3/12/2012	Quick call- Followed-up with Dr Jack & asked if he was still coming to the Butrans program tomorrow evening. He said unfortunately he cannot go as something came up last minute. Showed Butrans initiation/titration tool & positioned Butrans for patients not well-controlled on chronic short-acting opioids around-the-clock, reminding him that patients can take supplemental analgesia with Butrans. Also reminded him of OxyContin as a q12h dose of oxycodone for appropriate patients.
PLPMDL0020000001	Bedford	OH	44146	3/12/2012	Showed OxyContin formulary grid, reminding Dr Haddad of favorable coverage. Positioned OxyContin as a q12h option for appropriate patients, especially if they are already taking an immediate-release form of oxycodone. Dr Haddad said he prescribes OxyContin. Reminded him of savings cards for eligible patients. He said he had forgotten. I asked if he was still coming to the Butrans dinner program. He said he is still coming & checked his calendar to ensure it was still on it. I let him know various physicians of different backgrounds would be in attendance & that their should be good discussion of the appropriate patient type for Butrans. He said he is looking talked to George, Pharmacist, about 6 Butrans core selling messages, George hasn't seen any Butrans rx here lately but does like that its a pain patch and dosed once a week. I asked George if he would be willing to hand out patient info booklets to appropriate patients so they can talk to their HCP's about Butrans? George agreed. confirmed OxyContin stocking, no new Rx for OxyContin, same patients every month getting OxyContin. showed visual aid, we discussed appropriate patients george said he doesn't recommend OxyContin that's up to HCP's to prescribe that for patients. we discussed formulary coverage for both Butrans and OxyContin. recommended Senokot-5
PLPMDL0020000001	Cleveland	OH	44106	3/12/2012	talked to Nick, Pharmacist, asked who are the biggest writers of short-acting opioids in area? Nick said he doesn't have time to look up a whole list but knows dr boyd, dr robson, dr craig, dr sahal and dr hayek from UH pain management. I talked to Nick about 6 Butrans core selling messages, Nick focused on Butrans being a patch and dosed once week. I showed patient info booklet to Nick asked if he could hand these out to appropriate patients so they can talk to their HCP's? Nick said yes he will do that, Nick said majority of patients here are Medicaid, we discussed PA for Caresource patients. confirmed OxyContin stocking, showed visual aid and briefly discussed appropriate patients for OxyContin. Nick said he doesn't recommend OxyContin that's up to HCP's to prescribe, we discussed formulary coverage for OxyContin and I recommended Senokot-5
PLPMDL0020000001	Akron	OH	44333	3/12/2012	Asked pharmacist if he has Butrans and OxyContin in stock. They have OxyContin but did not know about Butrans. Explained indication, CII, 7 day transdermal patch. They do have e-voucher. nothing else learned
PLPMDL0020000001	Westlake	OH	44145	3/12/2012	I reviewed OxyContin as an option for patients taking short acting. He said most of his OxyContin patients he has inherited but he would start new patients. Dr told me that he started a patient on Butrans. I asked how they are doing and he said that he has not seen them back yet. I asked when he typically sees them and he said about a month, I asked if he gives a refill and he said no, I reviewed the scenario if a patient does not come in for 31 days and I asked if he would give a refill. He said he will consider it.
PLPMDL0020000001	Mogadore	OH	44260	3/12/2012	Dr came in and said she has started a patient on Butrans but has not seen the patient back. I asked when she is seeing her back and she said in a month. I said with Butrans, the script is for 28 days and if she sees the patient back in one month they may run out of medication and she said that does make sense. I reminded her that it is sched 3 and she can write refills. I showed her the 3 patient profiles and where else she can write Butrans other than in patients taking Vicodin. She asked about cost again and we reviewed the trial cards and she said it is good to know that it is on Caresource. We discussed where she would go after Butrans and she said she would refer at that point and I showed her low doses of Oxycontin and she said she would still refer. <font color=blue><b>CHUDAKOB's query on 03/28/2012</b></font> Butrans is not on Caresource. alt still requires a PA. <font color=green><b>THORNTOK's response on 04/01/2012</b></font> I know, it was explained<font color=blue><b>CHUDAKOB added notes on 04/05/2012</b></font>OK. aYour note made it sound like she thinks it is covered. aThanks for the clarification.
PLPMDL0020000001	Lakewood	OH	44107	3/12/2012	I showed Dr the inclusion criteria for OxyContin and asked how he treats these types of pain, he said that many of them on on OxyContin and these are the types of patients he would most likely start on OxyContin. I asked if he would start patients with these pain conditions on low dose OxyContin when they start taking 5 mg hydrocodone around the clock and he agreed.
PLPMDL0020000001	Mogadore	OH	44260	3/12/2012	Dr came down to lunch and said he could not stay, he asked if anything is new and I said if he sees patients who call in on Tramadol or Vicodin and are not controlled, write Butrans and I gave him new initiation tool and formulary grid
PLPMDL0020000001	Westlake	OH	44145	3/12/2012	Quick follow up, I asked Dr if he would come to our upcoming dinner program to learn more about how other doctors are fitting it into their practice. He said that he will try. I asked if he had a chance to find a patient like William who he could try a month trial of Butrans and he said not yet, I asked if he would try to use this one card this week and he agreed.
PLPMDL0020000001	Parma	OH	44129	3/12/2012	Spoke with floater pharmacist & reviewed Butrans core messages. Also presented new trial/savings program & e-voucher for automatic monthly savings. Reviewed eligibility requirements for savings program/cards. Also discussed OxyContin savings cards.
PLPMDL0020000001	akron	OH	44302	3/12/2012	OxyContin indication, CII, managed care information. Office called for OxyContin savings cards for the office. Provided overview of cards to reimbursement specialist.
PLPMDL0020000001	Lakewood	OH	44107	3/12/2012	I asked Dr if he has given Butrans another try, he has not, I asked why and he said he just hasn't seen the right patient, I let him know that I know he will see the right type of patient this week. I showed Emma and asked if he would try a patient like this and give them the month trial card, he agreed. Reminder that OxyContin is an option for patients taking vicodin around the clock.
PLPMDL0020000001	Fairlawn	OH	44333	3/12/2012	Asked if they have seen any more Butrans prescriptions since last week. Pharmacist could not remember. No time to talk. nothing else learned.
PLPMDL0020000001	Parma	OH	44129	3/12/2012	Quick call- Followed-up with Dr Taylor & inquired as to whether or not she would be able to attend the Butrans dinner program tomorrow. She said she still was not sure & it would depend how the day went. Positioned Butrans for patients who take 3 tramadol per day, who come back saying they would like an increase in dose or dosing interval. Also reminder for favorable OxyContin managed care.
PLPMDL0020000001	Cleveland	OH	44106	3/12/2012	worked apnd dept-calls on fellows; worked internal med dept-left Butrans fpi, initiation guide, formulary grid and my business card for 5 chief residents and dr armitage as I couldnt see them today; worked family medicine-left DISCOVER card, initiation guide and my business card for Dr. Marsh and Dr. Truax- no see HCP's in this dept; worked oncology- left OxyContin fpi, conversion guide, formulary grids and my business card for oncologists here at front desk- no see dept
PLPMDL0020000001	Cleveland	OH	44106	3/12/2012	dr said he started another patient on Butrans, asked dr why he chose Butrans? dr said patient was taking vicodin, not controlled, so he talked to the patient about Butrans and patient was willing to try it. I asked dr what type of insurance this patient had? dr said he thinks caresource, PA went through and patient got medication. we talked about dr following up with patient in 2 weeks to assess pain and side effects and dr said he will let me know what happens. asked dr if he has more patients like this, to start on Butrans, this week? dr said probably so, he will start more patients on Butrans. focused dr on commercial insurance and caresource patients
PLPMDL0020000001	Akron	OH	44333	3/12/2012	Dr is currently using Butrans weekly but admitted she had dropped off on prescribing due to not being reminded. Asked where she is currently using it? Dr said she is using after tramadol and vicodin for patients she knows could use an extended release product. the product has been working well for her patients with good pain relief. Dr is using OxyContin regularly as well and has many patients on the higher doses. Admitted that it works very well and wanted Senokot-5 for those patients. Reviewed managed care information and discussed new trial offer cards.
PLPMDL0020000001	Mogadore	OH	44260	3/12/2012	Dr said he started another patient last week. I asked him, what made him think of Butrans and he said the patient was taking Vicodin atc. He said he is tired of people getting so pill dependant. I showed him patient profiles and asked him what type of patient does he see himself using Butrans and he said probably the second 2nd. I asked him him if a patient is taking NSAIDs and has a condition that is chronic, what medical benefit does he see going to a short acting and he said none, it is just habit. He said it makes sense. He said the titration sliding tool is nice and will put in his desk so he knows how to write because he said it is hard to look up. I asked how he writes the script and he said he writes with a couple of refills and I said that is good because script is only 28 days and dont want to run out. I asked if he writes supplemental and he said yes but as needed. We reviewed managed care and trial cards. HE said this is good because he doesn't write Oxycontin or any other 2nd tier meds, he refers at that point. <font color=blue><b>CHUDAKOB's query on 03/28/2012</b></font> Kristen, I would stay away from any discussion regarding dependence on pills, even if he brought it up, as this can lead down a road you cannot go to. <font color=green><b>THORNTOK's response on 04/01/2012</b></font> <font color=blue><b>CHUDAKOB added notes on 04/05/2012</b></font> Thanks!
PLPMDL0020000001	Mogadore	OH	44260	3/12/2012	Dr said to refresh him again on Butrans because he has not written. We reviewed material again and I showed him the profiles of the 3 patient types that it can be written in and I asked him what type of patient would he write it in and he said he is not writing as much chronic pain medicine in new patients and I asked him do you have any existing patients who look like any of these patients and he said yes, he has a lot of patients taking Vicodin who this would work in and he asked about the cost again and I reviewed that. He asked about cash and medicare and I told him cost and said no medicare but showed him coverage in Oxycontin in medicare and he said he had to get going and asked if he can take initiation slide card. <font color=blue><b>CHUDAKOB added notes on 03/28/2012</b></font> This would have been a good time to clarify his understanding and a belief in the product, as managed care will mean nothing if he is not sold on the product. aThis is an area to continue to work on. a
PLPMDL0020000001	Cuyahoga Falls	OH	44223	3/12/2012	Dr is continuing to prescribe Butrans on regular basis. Attempted to inform Dr on Butrans and where it would fit in his practice. Dr said that he knows what buprenorphine is. I explained that Butrans is not for treatment of addiction. nothing else learned.
PLPMDL0020000001	Cleveland	OH	44106	3/12/2012	talked to dr about Butrans fitting into her practice or not, dr said she likes the idea of a once a week patch for chronic pain but she doesn't prescribe a lot of long-acting opioids. I asked dr how she treats chronic pain? dr said she starts with short-acting opioids and procedures, dr said if an attending physician wants to prescribe a long-acting opioid then she might consider it. I asked dr what features of Butrans really stood out to her, besides being a patch dosed once a week? dr said that's about all she remembered with Butrans. showed visual aid, we discussed 5 core Butrans selling messages, asked dr if it meant anything to her that Butrans was a CII? dr said yes she can call in refills so that made it easier on her and the staff. I asked dr if she could think of 2 patients this week that could be appropriate for Butrans? dr said yes she will consider Butrans.
PLPMDL0020000001	Cleveland	OH	44109	3/13/2012	I talked to Jen, Pharmacy tech, pharmacist wasn't available to talk. confirmed Butrans stocking. Jen said they have gotten a few Rx for Butrans, dr carson's patient was 1 person but she doesn't know the others. I showed Jen Butrans guide, focused discussion on section 2.4, maintenance of therapy. Jen wasn't sure if patients can take short-acting opioids with Butrans. we also discussed indication of Butrans and appropriate patients. showed Jen Butrans initiation guide asked if she see patients with chronic pain taking these opioids? Jen said yes a lot of people. I asked Jen if she would give patient info booklets to appropriate patients if their short-acting opioids aren't controlling their pain so they can talk to their HCP's about Butrans? Jen agreed to do this. we discussed formulary coverage. Jen asked about Medicaid we discussed PA requirements for Caresource patients and BWC.
PLPMDL0020000001	Cleveland	OH	44113	3/13/2012	dr said he's starting patients on Butrans pretty much every week now that Caresource has been approving PA's. I asked dr if he has more patients he can start on Butrans this week? dr said he's sure he does and will continue prescribing Butrans for appropriate patients. focused dr on caresource, BWC and commercial insurance patients

PPLPMDL0020000001	Cleveland	OH	44106	3/13/2012	showed dr william,patient case study,asked if dr treats patients like this? dr said yes.asked dr whats the next step for patients like this? dr said in the past he would start patients on percocet and see if that controls the pain but now that he has Butrans as an option,he would consider that.i asked dr if he's started any patients like William,on Butrans recently? dr said no.i asked dr why not? dr said he just hasnt done so but does know its available.dr asked about medicaid coverage for Butrans? we talked about PA requirements for Caresource patients,i asked dr if that was reasonable? dr said yes,dr said he gives all PA forms to Lisa,patient care coordinator and she processes them so if its approved he doesnt hear about anything if its not approved Lisa tells him to change medications.i asked dr for his commitment to start a couple patients like william,on Butrans,this week? dr agreed.showed dr oxycontin visual aid,we discussed appropriate patients,dr said he does prescribe some OxyContin but for severe pain,thats where he's comfortable using OxyContin,dr couldnt talk more about this so showed formulary grids,focused on medicaid plans and commercial and asked dr to start a couple new OxyContin patients this week? dr said he will if appropriate.recommended Senokot-5
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/13/2012	Reviewed titration guide and appropriate patients for Butrans. Asked Catherine if they stocked Butrans. She said they do not stock Butrans but do stock OxyContin. Asked what doctors do you see prescriptions from for pain medicines. She said Bressi and some from the pain managment clinic. She said she has not seen many prescriptions but based on the way the the Western Reserve pain managment clinic treats pain that they would see Butrans as an appropriate option.
PPLPMDL0020000001	Cleveland	OH	44106	3/13/2012	showed dr Butrans initiation guide,we discussed dosage strengths for appropriate Butrans patients,dr said he's started a couple patients on Butrans,i asked dr what these patients were taking that prompted him to start them on Butrans? dr said patients were taking tramadol,not controlled and wanted more pills,he wanted to start them on Butrans so he did.we talked about initiation and titration of Butrans,i asked dr if he has more patients like this,to start on Butrans this week? dr said probably so he'll keep Butrans in mind.dr asked about medicaid coverage for Butrans? we talked about PA requirements for Caresource patients,focused dr on commercial insurance patients trying Butrans using the initial trial offer cards.showed dr Oxycontin visual aid,we discussed appropriate patients,dr said he writes a lot of OxyContin,thinks its a good long-acting medication and will continue prescribing.showed formulary grids and asked dr for his commitment to start more new patients on Oxycontin,dr agreed.recommended Senokot-5
PPLPMDL0020000001	Uniontown	OH	44685	3/13/2012	Reminded Dr of first discussion with Butrans and OxyContin. Presented indication, 7 day transdermal delivery of buprenorphine. As dr how she typically treats chronic pain? Dr said she will use tramadol then vicodin but will refer out when patient needs dose adjustment or is refilling too often. Discussed patient selection for Butrans with patient on tramadol who could be appropriate for a long acting opioid. Showed dosing and titration guide and should how to use. Dr agreed to try for appropriate patient on a private insurance plan like BCBS.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/13/2012	Dr asked for an overview of Butrans again. I asked dr where he has used it previously? Dr said he has used Butransfor patients that did not tolerate other opioids. I reviewed appropriate patient selection and all key selling messages for Butrans. Reviewed copay cards and trial offer information. Dr said he does have patients that would fit well with what Butrans can offer and will prescribe it again. Dr like the dosing and initiation guide and will use it.
PPLPMDL0020000001	Cleveland	OH	44125	3/13/2012	Spoke with Christine, pharmacist, who said they have one or two customers on Butrans. Discussed the appropriate patient type & asked if she ever makes any recommendations to physicians about medication changes. She said she has found that physicians are not very receptive to suggestions & does not really get involved. Presented new Butrans trial/savings cards & eligibility requirements. Also discussed automatic monthly savings through e-voucher. Gave her a package of new OxyContin savings cards & let her know cash patients can use it every 14 days if their prescription is written that way. She said she does have one customer who pays cash who will appreciate that savings. She added that the patient is taking 20mg + 10mg. I asked if she stocks the 30mg strength. She said she has tried to get the physician to change the patient to 30mg q12h, but the doctor insists on having the patient on it three times per day with the two different strengths. Discussed OxyContin as a q12h medication. Christine said she knows this, but she has been unable to change this patient.
PPLPMDL0020000001	Independence	OH	44131	3/13/2012	Dr Sundaram said he has not seen any potential Butrans candidates yet & that he has only been seeing the patients who have been on Percocet for a long time. I asked if he has seen patients who are on tramadol, Vicodin, or Percocet, who are asking for an increase in dose or dosing interval. He said he had not really considered these patients. He said that many times patients do not want to give up their pills. I told him that patients can take supplemental analgesia with Butrans in the form of immediate-release opioids or non-opioids, so he would not be asking the patient to "give up" anything necessarily. He said this was a good point. I asked if he would try Butrans for one or two patients that he sees like that this week if they are appropriate & he agreed. Also reminded him of OxyContin q12h for appropriate patients beyond Butrans.
PPLPMDL0020000001	Parma	OH	44129	3/13/2012	Quick call- Followed-up with Dr Chagin & asked if he is still coming to the Butrans dinner program this evening. He said he still plans on attending. Positioned Butrans for patients who are not well-controlled on short-acting around-the-clock opioids. He said he will try to find more patients. Reminded him of new trial/savings program & OxyContin savings cards.
PPLPMDL0020000001	Cleveland	OH	44104	3/13/2012	showed dr OxyContin visual aid,we discussed indication dr said he usually prescribes OxyContin for severe pain patients,i asked why? dr said usually patients are well controlled on short-acting opioids for awhile before needing a long-acting opioid dr said if patients need a long-acting opioid he will convert them to OxyContin or morphine.i asked why morphine? dr said cost.we discussed medicaid and commercial insurance patients being started on OxyContin.dr said majority of his practice is medicaid so he has to do a PA for them to get OxyContin,dr said he doesnt like doing PA's and has to do them all the time for medicaid and caresource patients.i asked dr if that will prevent him from starting new patients on OxyContin? dr said no.i asked dr if he'll start a couple new patients on OxyContin this week? dr agreed.recommended Senokot-5
PPLPMDL0020000001	Cleveland Hts	OH	44118	3/13/2012	I reviewed the butrans patient type and asked doc about the success he has been having with butrans. He said the issue is not success but whether or not they can get it from the pharmacy and if it is covered. He said he has not had any issues with it recently. I asked him where he is using it. He said after tramadol or vicodin. I explained that butrans can be used opioid naive after NSAIDS. He said he did not remember and that he would try it there. Focused him on the Smcg starting dose. Discussed the maximum 20mcg dose and low dose oxycontin as an option after that. Reminded him of the coverage and savings cards.
PPLPMDL0020000001	Cleveland	OH	44114	3/13/2012	dr said he had a male patient recently who developed dermatitis while wearing Butrans 20mcg/hr,i asked dr how long the patient was wearing Butrans 20mcg/hr before this started? dr said a couple weeks maybe but didnt recall.i asked dr what he did for this patient? dr said he told patient to remove Butrans 20mcg/hr and put this patient back on Butrans 10mcg/hr,patients dermatitis cleared and patient is controlled and doing fine on Butrans 10mcg/hr with supplemental analgesia for break through pain.dr said he had 2 other patients with dermatitis while wearing Butrans 20mcg/hr but once he put patients back on 10mcg/hr dermatitis cleared.i asked dr if that'll prevent him from starting more patients on Butrans? dr said no he's still starting patients on Butrans and knows that dermatitis can develop in some patients who wear a patch.focused dr on BWC patients and asked dr for his commitment to start more patients on Butrans this week? dr committed.
PPLPMDL0020000001	Parma	OH	44129	3/13/2012	Quick call- Showed OxyContin formulary grid & reminded Dr Paat of favorable Medicare coverage. Also followed-up & asked if he is still coming to the Butrans dinner program. He said he cannot go now. Positioned Butrans for patients like we have talked about, taking around-the-clock short-acting opioids for chronically painful conditions, especially if they are asking for an increase in dose. Spoke with MA Shari & discussed savings cards for Butrans & OxyContin.
PPLPMDL0020000001	Cleveland	OH	44106	3/13/2012	showed dr emma,patient profile,asked dr if he treats patients like this? dr said yes.asked dr whats the next step in therapy for a patient like this? dr said he would probably convert patient to vicodin or another short-acting opioid.i asked dr if Butrans would be an option,after patients arent getting pain control with tramadol? dr said he would consider it.dr said if patients are willing to wear a patch and remember to change it once a week,he would talk to some patients about Butrans.asked dr if he had patients in mind that he could talk to about Butrans,dr said he will see who comes into the clinic and will keep Butrans in mind as an option.dr asked about insurance coverage for medicaid patients,we discussed PA requirements for Caresource patients,focused dr on commercial insurance patients and asked dr for his commitment to start 2 patients on Butrans between today and next week? dr agreed.recommended Senokot-5
PPLPMDL0020000001	Garfield Heights	OH	44125	3/13/2012	I asked Dalbir if he is still planning to attend the Butrans dinner program tonight that he registered for. He said he is planning on it but there is a slight chance he will not. I asked how I can convince him to attend for sure. Reviewed Butrans patient type & range & asked if he sees patients like this in his practice. He said he does. I let him know the program would be an excellent opportunity for him to discuss Butrans with various specialists & area physicians with different experience levels. He said he will really do his best in making it. Dosing reminder.
PPLPMDL0020000001	Cleveland	OH	44113	3/13/2012	debbie said she's starting patients on Butrans every week,patients are doing well on Butrans,she asked for more booklets and we discussed PA requirements for Caresource patients.i asked Debbie for her commitment to start more patients on Butrans this week? debbie agreed
PPLPMDL0020000001	Cleveland	OH	44106	3/13/2012	worked apm clinic
PPLPMDL0020000001	Cleveland	OH	44109	3/13/2012	dr said he tried to start a Buckeye patient on Butrans last week but they wouldnt approve PA for Butrans,dr said this patient had already been on Butrans a couple months and was doing great on the 10mcg/hr but when he tried to increase the dosage strength to 20mcg/hr Buckeye wouldnt cover it.dr asked who is covering Butrans,for medicaid patients? we talked about PA requirements for Caresource and medicaid patients and i asked dr if he would be willing to focus on a couple Caresource patients,BWC or medical mutual patients this week,to start on Butrans? dr agreed.we discussed initiation and titration of Butrans,showed initiation guide and dr said he will keep starting more patients on Butrans.recommended Senokot-5
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/13/2012	Asked Linda about Butrans and if Dr Narouze has used Butrans? She said no and that he has not had time. Asked Linda to help ensure he knows about it and asked her to use it where appropriate. Used Key selling messages.
PPLPMDL0020000001	Cleveland	OH	44130	3/13/2012	Dr Fedorko said he has not put any patients on Butrans over the last few weeks & added that he just has not had any patients for it. I showed him "Emma" patient profile & asked if he has patients like this. He told me about a patient who he has who changed their prescription from 180 pills per month to 480. He said the pharmacist alerted him & he plans to "fire" the patient. He went on to say that many people do not realize that tramadol is addictive because it is not scheduled. I agreed that tramadol, like all opioids does have abuse & addiction potential & should be prescribed with caution. I asked if he has patients who are in legitimate pain who are taking tramadol around-the-clock like "Emma" & if he would prescribe Butrans for those patients. He agreed.
PPLPMDL0020000001	Euclid	OH	44117	3/13/2012	Doc came to the window and said that he just started a patient on butrans yesterday. I asked him about the patient. He said the patient was on percocet and he didnt remember the dose but doc said he isnt giving the patient pills because he failed a drug screen. I asked him to focus on the those patients and those on tramadol. Reminded him of the appropriate starting dose. <font color=blue><b>CHUDAKOB's query on 03/21/2012</b></font>-This conversation sounds like he implied he prescribed Butrans because he feels it is less abusive; at least that seems like the tone of the conversation. If he isn't giving the patients "pills" because he failed a drug screen, bit is willing to give Butrans, why is this? Did you make any mention of the abuse liability with Butrans. If so, what?<font color=green><b>SIMERTOC's response on 03/22/2012</b></font>I honestly dont remember him saying why he didnt want to give pills. &He definitely did not say that he thought butrans was less abusive because i would have most certainly caught that. &i did remind him that butrans is a CII.<font color=blue><b>CHUDAKOB's query on 03/27/2012</b></font>-Your call says why he didnt want to give pills; because they failed a drug screen. &You then said you asked him to focus on those patients. &i am wondering why you asked him to focus on patients who fail a drug screen. &do you see the&iimplication&here? &i<font color=green><b>SIMERTOC's response on 03/29/2012</b></font>i didn't mean for him to focus on patients that failed a drug screen. &i asked him to focus on patients that he thought would be better on a patch. &i see how it might sound.<font color=blue><b>CHUDAKOB added notes on 03/30/2012</b></font>-OK. &i just wanted to point to make sure you are writing what you mean. &Your last response said "would be better on a patch". &Another example of something that can be misinterpreted. &Please be make sure you are writing exactly what you mean in I reviewed the the key selling messages of butrans and asked doc where he thinks he would use it. He said probably for cancer patients after vicodin. I asked why just for cancer pain as Butrans is a CII for more moderate pain. He said that the hospital (university) does not want them prescribing narcotics for non cancer pain. I asked if that applied to CII's. He did not remember that it was a CII. He asked about coverage. I explained the coverage with BWC and the commercial plans. He also asked about the tier status. I explained the tier 3 status but also the savings cards and the trial offer. I reviewed the dosing options and the proper application. I asked what objections he has to prescribing butrans. he said only cost. I reiterated the cost/coverage/savings and the caresource eligibility. He said he would try it for patients taking 1 or 2 vicodin or even after NSAIDS because he thinks NSAIDS are horrible. I discussed the oxycontin indication and how that might be more appropriate for cancer patients than butrans. He said patients now want Opana. He confirmed that he does still have some patients on oxycontin including cancer patients. Reminded him of the coverage and savings cards there as well.
PPLPMDL0020000001	Brooklyn	OH	44130	3/13/2012	Spoke with pharmacist, Renee' who said she has one customer who consistently gets Butrans. Discussed patient information booklets & giving them to patients who she identifies as potentially benefiting from Butrans. I asked if she stocks OxyContin. She said she does, with the most common doses being 10mg & 20mg. I asked if she sees new prescriptions or only continuing. She said mostly continuing & occasionally new. Gave her a new package of savings cards for OxyContin which she said she could really use. She said she has a few customers who pay cash for their prescription. Let her know that cash-paying patients can use the card every 14 days.

PPLPMDL0020000001	Cleveland	OH	44103	3/14/2012	saw dr at door asked dr if she's seen any appropriate patients to start on OxyContin in past week? dr said yes she has. asked dr to focus on medicare patients for OxyContin, dr said ok. dr said she started another patient on Butrans and got it approved by caresource so she'll keep talking to patients about Butrans and starting them if medicad approves it. told dr i appreciated her continued business and starting patients on both OxyContin and
PPLPMDL0020000001	South Euclid	OH	44121	3/14/2012	Window call...I showed doc the butrans demo, reminded her that if she has patients on tramadol and looking for a dose adjustment, those might be appropriate patients for butrans. I asked her to try one of those patients. Gave her formulary grid and initiation guide.
PPLPMDL0020000001	Copley	OH	44321	3/14/2012	Revisited last call with a patient on tramadol with commercial insurance that he considered a long acting product to use such as Butran. Asked dr what plans(s) he has most? Dr said he sees all plans but his medicad and medicare are the patients that have the most pain. I asked if he sees the plan the patient has when he goes into a room. Dr said he does see the patients mc plan before going into a room. Told dr that formulary coverage has improved since he prescribed it last year. Dr said he does fight for patients to be on the appropriate medicine. Explained Caresource and private insurance plans for Butrans. Showed initiation pull out tool with tramadol and appropriate initiation doses with Butrans. Dr agreed to use it again for the appropriate patient.
PPLPMDL0020000001	Cleveland	OH	44130	3/14/2012	Dr Popa said again she knows she can "do better" with Butrans. She went on to say that she doesn't know if she has any patients who she could use it for because she does not do a lot with pain, especially treating it long-term. Discussed appropriate type/range of patients for Butrans & asked if she has patients for whom she refills tramadol or Vicodin for. She said she does not prescribe chronic Vicodin. I asked how long she would keep them on it typically. She said 2-3 months. She said after that she refers out. I asked again about patients on tramadol. She said that tramadol is not scheduled & Vicodin is CIII. I told her this is correct & reminded her that all opioids, including Butrans, carry abuse & addiction potential. I asked if she started a patient on tramadol 3 times per day & they returned asking for an increase in dose or dosing interval, if she could see herself using Butrans once weekly for those patients instead of Vicodin. She said she does not know & said again that she doesn't like "dealing with" this type of patient. Attempted to re-direct her to appropriate patients in legitimate pain. She said she would see what she could do then left the room. Spoke with MA Michelle & reviewed Butrans & OxyContin formulary grids.
PPLPMDL0020000001	Akron	OH	44313	3/14/2012	Asked Tina(ma) and dr if they still had OxyContin copy cards. Was told they had three left and have been using them regularly. Reviewed managed care grid for OxyContin and asked dr where he is using it. Dr did not have time to respond but said he is continuing to use it often. nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44113	3/14/2012	dr said most of his patients have acute pain so not a place for Butrans and he is sending majority of his chronic pain patients to pain management now. i asked dr who he's referring to? dr said cleve clinic pain management, a lot of patients see dr shen because she's right there at lutheran hospital where he is, i asked dr if he ever see's a place for Butrans in his practice, since he's sending majority of his chronic pain patients out? dr said maybe in the future but doesn't think so right now. we talked about BWC, commercial insurance and PA for Caresource patients in case dr had anyone that was appropriate, dr said he appreciated info and would let me know if he starts
PPLPMDL0020000001	Cleveland	OH	44113	3/14/2012	asked dr what his thoughts were post the Butrans dinner program 3/8/12 with dr laham, dr said he isn't sure how big a role Butrans will play in his practice at this point because he's sending his chronic pain patients to dr shen, pain management HCP, dr said he doesn't want to manage these people anymore with their continual need and requests for more opioids. i asked dr if he's going to send his tramadol patients to dr shen or will he manage those patients? dr said he will probably manage them and thinks that Butrans could be an option for them. asked dr if he would consider starting a few tramadol patients, on Butrans, when they need a medication adjustment? dr said yes he would consider that. we discussed BWC, commercial insurance and PA for Caresource patients.
PPLPMDL0020000001	Lyndhurst	OH	44124	3/14/2012	Spoke to Tom who said he has gotten a few scripts of butrans. He doesn't know who wrote the scripts or if they have been refilled yet. I asked if customers presented a savings card. He did not recall. I explained the availability and who is eligible for the card plus the trial month. I gave him a patient info guide which explains proper application.
PPLPMDL0020000001	Cleveland	OH	44114	3/14/2012	asked dr what she thought of Butrans dinner program last night with dr moufawad? dr said she likes him and refers to him so she already has a relationship with him and that helped, dr said he gave a good talk and followed compliance with the slide deck. i asked dr if there was anything she would do differently after the program? dr said the opioid naive patient is a consideration now, after the program, as she has some patients who don't want to take vicodin or percocet, that she could start on Butrans. i asked dr if i had her commitment to start more patients on Butrans this week and perhaps a couple patients that are opioid naive? dr agreed. focused dr on BWC, commercial and caresource patients starting on Butrans.
PPLPMDL0020000001	Mayfield Heights	OH	44124	3/14/2012	Window call...I discussed the once weekly, CII status of butrans adn asked doc if he sees a place for a product in his practice. He said maybe and that he has not been prescribing long acting narcotics. I explained that butrans is a CIII similar to vicodin. He said he will think about it.
PPLPMDL0020000001	Mayfield Heights	OH	44124	3/14/2012	Spoke with Tech, Mike, about butrans and oxycontin. Steve was on a conference call. Mike confirmed that they have one patient on butrans regularly and using a savings card. He said he has some extra savings cards and patient info guides. He said oxycontin is going well and they have a steady volume.
PPLPMDL0020000001	Cleveland	OH	44113	3/14/2012	dr said she's starting patients on Butrans every week and patients are doing good. dr said she didn't need anything at the moment but asked about the PA for Caresource patients, what the requirements are, we discussed this info. i asked dr for her commitment to start more patients on Butrans this week, focusing on BWC and commercial insurance patients, dr agreed saying she's here this week and will start more patients on Butrans but then on vacation for a week. I told dr i appreciated her business and would follow up end of month after her vacation
PPLPMDL0020000001	Cleveland	OH	44114	3/14/2012	asked john what his feedback was from the dinner program last night with dr moufawad and did he hear anything new about Butrans? john said nothing new, but enjoyed listening to dr moufawad as they refer to him so he likes him and respects him as a physician. john said the opioid naive patient was interesting because they haven't started any opioid naive patients on Butrans. i asked john if he would recommend Butrans to dr marshall or dr katz, for those opioid naive patients that he feels Butrans would be an option for? john agreed to do this. focused john on starting a couple new patients on Butrans this week, gained john's commitment to do so and focused him on BWC, commercial insurance patients and caresource patients.
PPLPMDL0020000001	South Euclid	OH	44121	3/14/2012	Window call...I reviewed the butrans CII status and once weekly application. I asked him if he has any commercially insured patients like medical mutual, anthem that might be appropriate for butrans. He said its more of the older medicare patients that are in pain. I showed him the formulary grid and asked him to try butrans for one of those patients.
PPLPMDL0020000001	Cleveland	OH	44129	3/14/2012	Caught Deb between patients. Followed-up with her regarding last evening's Butrans dinner program. She said she learned a lot from Dr Moufawad even though she has already been to a program for Butrans. She said her experience with Butrans has been very positive & she plans to continue to prescribe it where appropriate. She asked me for Spanish medication guides that I told her about at the program, so I provided her with a stack. She said she always gives a patient an info booklet & tells them to go to Butrans.com in order to learn about the medication. She also said she makes the patient tell her exactly how they are going to use Butrans so that she is certain they understand application, rotation, & usage. Reminded her of savings cards/trial offer for eligible patients.
PPLPMDL0020000001	Independence	OH	44131	3/14/2012	Quick call- Caught Dr Trickett at the window. Butrans trial/savings cards for eligible patients messaging as well as OxyContin savings cards reminder. She said her OxyContin savings cards expired, so I provided her with a new package.
PPLPMDL0020000001	Bedford	OH	44146	3/14/2012	Spoke with PharmD, Steve, who is new to this location. Reviewed Butrans core messages & presented new trial/savings program. Discussed eligibility requirements. I asked if he stocks OxyContin. He said they do. Gave him a package of new OxyContin savings cards & discussed eligibility/usage.
PPLPMDL0020000001	Warrensville Heights	OH	44122	3/14/2012	Quick call- Discussed favorable OxyContin Medicare D status & reviewed managed care grid with Dr Zivic. He said this was good since he has so many older patients. Also gave him Butrans portal invite & asked him to log on to participate in interactive programs that may help him identify potential Butrans patients within his own practice. He said he would do his best then walked into a room. Spoke with Michele & reviewed managed care information for both Butrans & OxyContin.
PPLPMDL0020000001	Bedford	OH	44146	3/14/2012	Dr Moufawad said one of his patients who he started on Butrans 5mcg reported a headache with Butrans. The patient told him that as soon as he removed the patch, the headache went away. Dr Moufawad had the patient continue on Butrans & said now the patient is reporting that he is not getting a headache from Butrans. He asked me for more patient information booklets. He said he likes to give them to patients when he prescribes Butrans because even when you tell the patient exactly how to use it, they forget, so having the booklet helps them. Provided him with 6 booklets. Dr Moufawad said by next week when I come he may need more as he has been prescribing Butrans more lately. He also said he has increased his OxyContin prescribing some.
PPLPMDL0020000001	Cleveland	OH	44104	3/14/2012	talked to dr about her patients that are taking percocet every day for chronic pain but not controlled and always asking her for more pills, dr said its very frustrating and she ends up refilling their medication just to get them out the door. dr said she will start more patients on Butrans, she just needs to remember it. showed dr initiation guide, asked dr if that would help her to remember Butrans? dr said she has one, its just a matter of her talking to patients about Butrans and starting some people. we discussed initiation and titration of Butrans and i asked dr if she could find 1 patient this week to start on Butrans? dr said she will see who comes in but will get started its just taking her awhile. focused dr on commercial insurance patients, dr asked about medicad patients, we discussed PA requirements for Caresource patients. i asked dr if that was feasible? dr said yes.
PPLPMDL0020000001	Parma	OH	44134	3/14/2012	Dr Hernandez said he is still getting positive feedback from patients, from patients started on 5mcg through patients started on 20mcg. i reminded him that 20mcg is not one of the recommended starting doses. I asked how he determines how he will start a patient on Butrans. He said he starts patients who had been on Opana or OxyContin on 20mcg & has had success in doing so. I asked why he typically changes patients from OxyContin. He said because BWC is no longer paying for patients to have anything other than morphine & he does not like to prescribe that, so he gives them Butrans instead. I asked who he would start on the 5mcg. He said a patient who has not been on an opioid prior. I asked if he ever starts anyone on 10mcg. He said sometimes, perhaps if someone was on 10mg OxyContin. I asked what about patients taking Vicodin or Percocet daily around-the-clock. He said a Vicodin patient maybe would start on 10mcg depending on how many they take per day & a Percocet patient would start on 20mcg because they are usually on a higher dose. I asked if any of the patients are taking supplemental analgesia. He said all his patients take an anti-inflammatory & he would not give them a short-acting opioid for breakthrough. He said he only wants them on one opioid at a time & added that he would simply titrate the Butrans if the patient reported breakthrough pain. Discussed savings cards for both products.
PPLPMDL0020000001	Cleveland	OH	44114	3/14/2012	asked dr what his feedback was from dinner program last night with dr moufawad? dr said he enjoyed dinner program, likes dr moufawad and refers to him. asked dr if there was anything he heard that was new info to him? dr said no not really, asked dr if there was anything he would do differently post the dinner program? dr said not really, he feels comfortable starting patients on Butrans, titrating the dose and feels they are doing good focusing on the percocet group of patients to start on Butrans. asked dr if he would consider starting patients that take vicodin daily for chronic pain, but not controlled, on Butrans, when they need a medication adjustment? dr said yes he would consider that and has done that 1-2 times. i asked dr if he will continue starting patients on Butrans this week? dr agreed. focused dr on BWC, commercial insurance and Caresource patients to start on Butrans.
PPLPMDL0020000001	Akron	OH	44307	3/14/2012	provided key selling messages for Butrans and OxyContin to Marc(technician) Pharmacy does not stock Butrans but does for OxyContin. Provided initiation and titration guides and Butrans patient information brochures.
PPLPMDL0020000001	Cleveland	OH	44106	3/14/2012	showed dr BUP3015, opioid experienced clinical trial, we discussed inclusion criteria and i asked dr if he treats these pain conditions? dr said yes, i asked what he treating the condition with now? dr talked about non-narcotic drugs like cymbalta, muscle relaxers, nsaid's, injections and other procedures for patients and then narcotics. i asked dr if he really felt Butrans had a place in his practice? dr said yes he does. i asked where does it fit in? dr said he thinks if patients are taking a couple vicodin or percocet, low dose Butrans is a good option to have if it's covered by patients insurance. i asked dr if he has any patients coming in this week that are like we discussed where he can start them on Butrans? dr said yes probably so he'll have to look and see who's coming into office. i asked for dr commitment to start a couple patients on Butrans this week, dr agreed. focused dr on commercial insurance patients and dr asked about medicad coverage, we discussed PA for Caresource patients, dr said that was reasonable to do that PA.
PPLPMDL0020000001	Parma	OH	44134	3/14/2012	Spoke with technician, Mary who said that James, their regular pharmacist was not in & the fill-in was too busy. She asked that I give my information to her & she would relay everything to James when he returns. Discussed Butrans & OxyContin savings programs & eligibility requirements. I asked if they needed updated OxyContin savings cards. She said James keeps them locked up, so I would have to check with him as she was not sure. Mary said she knows they dispense OxyContin but was not sure about Butrans. She said she would leave all my information for James.
PPLPMDL0020000001	Barberton	OH	44203	3/14/2012	Followed up on lunch last week. Asked Dr if he has seen any new patients for Butrans? Dr said no and then asked where his success has been with the product? He has had patients with low back problems who are on vicoden or other short acting? Asked dr if he feels comfortable using Butrans for patients on vicoden. Dr agreed and then i showed the inclusion criteria for opioid experienced patients. Dr agreed that those patients are all the ones he sees in his practice. Dr asked about where it is covered and asked which plans he sees most often. He said Medical Mutual and showed formulary grid. Explained coverage. Dr agreed to find patients appropriate for Butrans on commercial plans.
PPLPMDL0020000001					

PPLPMDL0020000001	AKRON	OH	44304	3/14/2012	Asked pharmacist if they have seen Butrans prescriptions in the pharmacy. John(head technician) said they have seen one in March of 2011 but none since. Pharmacy has copy cards for Butrans and OxyContin. Discussed Butrans and OxyContin key selling messages. Asked what doctors they see most prescribing pain medicine. Drs Lababidi, Fouad, and Bressi are most common. There is no pain management office in the professional building.
PPLPMDL0020000001	Mayfield Heights	OH	44124	3/14/2012	Window call...I reviewed the patient type for butrans (after tramadol failures) and oxycontin (for more severe pain) patient types. He said he does not like to use oxycontin much but has is trying to remember to write for butrans. I explained that commercial patients can get one moth trial with butrans in addition to monthly savings off co pay. Gave formulary grids for both.
PPLPMDL0020000001	Waterford	OH	45786	3/15/2012	W - Hasn't initiated Butrans lately but likes having the CII option for patients who are uncontrolled on hydrocodone. I - Butrans follow up and review of appropriate patient selection when the indication is met, uncontrolled on tramadol or hydrocodone and a change is requested. Use of the initiation guide page 6 to discuss appropriate starting doses for patients depending on their current therapy. Review of formulary coverage and savings card program to help offset copy costs for eligible patients.
PPLPMDL0020000001	Waterford	OH	45786	3/15/2012	W - Miral hasn't initiated Butrans therapy since our last visit will continue to consider as an option for appropriate patients. Likes having a CII extended release product like Butrans that she is capable of prescribing. I - Butrans follow up and review of appropriate patient selection when the indication is met, uncontrolled on tramadol or hydrocodone and a change is requested. Use of the initiation guide page 6 to discuss appropriate starting doses for patients depending on their current therapy. Review of formulary coverage and savings card program to help offset copy costs for eligible patients.
PPLPMDL0020000001	Waterford	OH	45786	3/15/2012	W - Waters had a new start with Butrans last week. Patient was uncontrolled on hydrocodone and did not want oxycodone but was receptive to try Butrans. Will see the patient back in a month to check on how it is controlling the pain. Utilizes OxyContin and Opana ER as his long acting CII agents of choice. He is very selective of patients that he has on CII products but believes in the efficacy of both products. I - Butrans follow up and review of appropriate patient selection when the indication is met, uncontrolled on tramadol or hydrocodone and a change is requested. Use of the initiation guide page 6 to discuss appropriate starting doses for patients depending on their current therapy. OxyContin as an option for appropriate patients who meet the indication. Review of formulary coverage and savings card program to help offset copy costs for eligible patients.
PPLPMDL0020000001	Cleveland	OH	44195	3/15/2012	talked to Dave,pharmacy mgr,about 6 Butrans core selling messages,dave said he likes idea of a patch but its just another opioid.I asked dave if he saw patients here getting 1 of the short-acting opioids,Butrans initiation guide,for chronic pain? dave said yes.dave said he's not seen any Rx for Butrans and wont order until he see's 1 Rx.we talked importance of stocking and i asked dave if i could follow-up next month to see if anyone has prescribed Butrans yet? dave said that would be fine.we discussed insurance coverage for Butrans,confirmed OxyContin stocking,no discussion further on OxyContin,recommended Senokot-S and left protocol pads
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	3/15/2012	Asked Dr if she had found any candidates for Butrans. Dr said no but she has been keeping it in mind. Reviewed inclusion criteria for Butrans and asked if she had patients that have presneted with that criteria. Dr responded yes and that the information helped her find the appropriate patient. Reviewed managed care grid and asked for her Muedical mutual patients.
PPLPMDL0020000001	Cleveland	OH	44113	3/15/2012	dr said he's not started anyone on Butrans yet.I asked dr whats holding him back? dr said he just has to remember Butrans.showed initiation guide,we discussed dosage ranges for appropriate patients and asked dr if he'll see 1-2 patients this week that he can start on Butrans? dr said probaby so and he will start some patients.focused dr on commercial insurance patients and caresource
PPLPMDL0020000001	Cleveland	OH	44195	3/15/2012	talked to Brittany,Pharmacy Tech,Laura pharmacy mgr was busy with patients.I asked brittany if she's seen any scripts for Butrans? Brittany said no.I asked if any patients come to pharmacy for scripts of the short-acting opioids,showed initiation guide? Brittany said yes every day.I asked Brittany if they would hand out Butrans patient info booklets to appropriate patients if patients arent controlled on short-acting opioids and perhaps could talk to their HCP's about Butrans? Brittany said she'll talk to Janet but doesnt see that being a problem. we discussed formulary coverage for Butrans.confirmed OxyContin stocking and we discussed formulary coverage Brittany said to come back in a week or 2 and talk to Janet more about who's prescribing OxyContin and what strengths.recommended senokot-S
PPLPMDL0020000001	Parma	OH	44129	3/15/2012	Dr Gigliotti said he is surprised I am not tired of calling on him. I asked if he is tired of seeing me. He said no, he just feels bad that he has not used Butrans. I told him I would not be so persistent if I did not think he had patients who may be able to benefit from Butrans. Showed him new initiation tool. He spent time using the tool & pulling out the slide. He said he liked this tool. I told him he could use it if he thinks a patient may be within the appropriate Butrans range. He said he just needs to write it. I agreed this is true if he has appropriate patients. Reminded him Butrans is a CII opioid with abuse & addiction potential & reminded him that he has not had a CII long-acting opioid before. I asked if, when he prescribes a long-acting opioid, he allows the patient to take short-acting opioids for supplemental analgesia. He said he does. I reminded him that this is possible to do with Butrans as well & he could use his clinical judgment on how much short-acting he allows the patient to have while initiating Butrans. He asked what the insurance coverage is. Discussed focusing on commercially insured patients & reviewed trial/savings program. Also reminded him of favorable OxyContin Medicare coverage.
PPLPMDL0020000001	Cleveland	OH	44113	3/15/2012	showed initiation guide to dr,asked dr if he's treating patients with 1 of these short-acting opioids? dr said yes.I asked dr if he's considered Butrans for patients when they need a medication adjustment? dr said not recently,he started 1 patient in nursing home on Butrans but thats it.I asked dr whats holding him back? dr said he just has to remember Butrans.I gave dr Butrans initiation guide tool and asked if he would keep this with him if this helps to remind him,dr took it.I asked dr if he can start 1 patient today or tomorrow on Butrans? dr said he will see who comes into office,focused dr on commercial insurance patients and use of initial trial offer cards.
PPLPMDL0020000001	University Hts	OH	44118	3/15/2012	IQuick call... reviewed the once weekly dose and CII status of butrans and that doc said he wanted to give it a try but needed reminded. He said he has not written it yet but he plans on it. He said he still has the display (savings cards) I gave him. I reminded him for the commercial and BWC coverage for butrans and oxycontin.
PPLPMDL0020000001	Cleveland Heights	OH	44118	3/15/2012	Window call....I discussed the butrans CII status and once weekly dosing. I asked doc if he has thought about where he would like to use it. He said giving patients a bunch of tablets. I reminded him of the starting dose and the coverage plans.
PPLPMDL0020000001	Westlake	OH	44145	3/15/2012	Dr said that he is done treating pain as he had a bad incident this morning with a patient who he had to dismiss from his practice. He said that he does not want to initiate any new patients on OxyContin. I asked about Butrans as an option before patients go to vicodin and he said he just want to have a practice with patients have other issues than pain. I spoke with Danielle about using Butrans for BWC patients and she said she will
PPLPMDL0020000001	East Cleveland	OH	44112	3/15/2012	Quick call...asked doc if he is still initiating patients on oxycontin. He said he is not taking any new pain patients and the ones he has on oxycontin have been on it. He said its requiring more PAs lately. I reveied the formulary plans and the CCR, Silverscript plans which are covering oxycontin and a preferred tier 2 cop pay.
PPLPMDL0020000001	Brooklyn	OH	44144	3/15/2012	Followed-up with Dr Deeb following the Butrans program he attended last week. He said he was not sure how many patients he would have for Butrans. Positioned Butrans for patients taking 3 tramadol per day who are not getting relief or are asking for an increase in dose or dosing interval. Presented new trial/savings cards & reviewed eligibility requirements. Asked if he needed any OxyContin savings cards but he said he did not. He thanked me & walked away.
PPLPMDL0020000001	Cleveland	OH	44105	3/15/2012	talked to dr about handing Butrans patient info booklets out to those patients taking percocet for chronic pain but arent controlled,dr said she's handed them out but noone's wanted to start on Butrans.dr said she will keep giving them to patients and if anyone is interested to try Butrans she will start them.dr said she retires in 1.5 weeks so she's doing what she can till then.
PPLPMDL0020000001	Cleveland	OH	44114	3/15/2012	Presented the "Science and Nature of Pain" module from the Pain PACT series to nurse practitioners with Evercare in northern OH. Also provided an overview of the Pain PACT program and accompanying resources.<hr>Attendees were provided with a copy of the slides (Sent as a PDF, 3 slides per page).
PPLPMDL0020000001	Cleveland	OH	44113	3/15/2012	showed dr OxyContin conversion guide,we discussed patients taking percocet that arent controlled and dr starting these patients on a long-acting opioid,I asked dr if he would start them on OxyContin? dr said he will.focused dr on medicare patients starting on OxyContin,showed formulary grids.
PPLPMDL0020000001	Westlake	OH	44145	3/15/2012	I asked Dr if he had a chance to convert patients from Opana ER to OxyContin per our last meeting. He said that he really only has a few patients on either one and he does not like to write for those medications. Remidner about Butrans as an option and he said ok.
PPLPMDL0020000001	Cleveland	OH	44109	3/15/2012	worked pm&r-saw dr huang
PPLPMDL0020000001	Cleveland Hts	OH	44118	3/15/2012	I reviewed the oxycontin and butrans patient types and positioning and asked doc where he thinks he will use butrans. He asked if he should use it after vicodin. I reminded him that after tramadol or before going to vicodin ATC. Showed him the initiation tool for appropriate dosing. I reviewed the coverage plans and the savings cards.
PPLPMDL0020000001	Cleveland	OH	44114	3/15/2012	Attended Evercare's monthly meeting where Maribeth presented "Science and Nature of Pain". There were 25 attendees at the program. I then distributed the Med Ed catalog and discussed the available online CEs. Jan said to follow up with her for further Pain Management education & feedback.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/15/2012	Asked Dr if he has found any candidates for Butrans? Dr said he had one patient that he wanted to initiate on Butrans but the patient had too many issues with morphine and had to take a different approach for her pain. I used patient inclusion criteria for Butrans. Dr agreed that he has patients with nerve root entrapment and osteoarthritis. Dr asked about Summa coverage. Showed managed care grid and showed SummaCare coverage on 3rd tier. Further explained trial offer and \$40 copy cards. Dr agreed to use for his commercial insurance patients with osteoarthritis.
PPLPMDL0020000001	Cleveland	OH	44109	3/15/2012	showed dr emma,patient profile,asked if she's seeing these patients? dr said yes every day.I asked dr whats the next step for patients like emma? dr said usually vicodin.I asked dr if she would consider starting a couple patients on Butrans right after tramadol fails to control pain? dr said yes she would as long as patients willing to wear a patch and insurance covers Butrans.dr asked about medicaid coverage,we discussed PA requirements for Caresource patients,I asked dr if she can start a couple patients on Butrans between today and next week when i see her again? dr committed to do this.focused dr on BWC,commercial insurance and caresource patients.recommended Senokot-S
PPLPMDL0020000001	Shaker Heights	OH	44122	3/15/2012	Stopped Dr Agarwal between patients with new initiation/titration guide slide-out tool. I showed him how a patient taking less than 300mg tramadol could start on 5mcg Butrans & a patient taking 300-400mg would start on the 10mcg. Dr Agarwal said he keeps forgetting about Butrans. He said he does remember now that I had given him trial cards. He asked that I be sure he still has those. Also reminded him of OxyContin savings cards for eligible patients. He thanked me & walked into a room. Discussed savings cards with Michelle & Stephanie.
PPLPMDL0020000001	Cleveland	OH	44127	3/15/2012	showed dr patient profile,emma,asked dr if she treats patients like emma? dr said yes.I asked dr whats the next step for patients like emma? dr said she's been sending patients to pain management because she doesnt want to manage the chronic pain patients anymore.dr said she is going to start a couple patients on Butrans though and see what happens.I asked dr if she will start 1 patient on Butrans today or tomorrow,to gain some clinical experience? dr said yes.dr asked about initiating dosage strengths of Butrans,showed initiation guide,we discussed initiation and titration.I asked dr to give 1 patient the Butrans patient info booklet when leaving with a Butrans Rx,dr agreed to do this.focused dr on caresource patients and dr asked if Josie,Receptionist,knew what th PA requirements were for Butrans? I told dr yes I already spoke with Josie about the PA requirements and she can do the PA's for Butrans,dr said ok that made it easier on her.recommended Senokot-S
PPLPMDL0020000001	Highland Heights	OH	44143	3/15/2012	Doc came out and asked what's new with butrans. I asked him what's new and why has hasn't been writing more butrans. He said he wants to write it for the elderly and he asked when butrans will be covered by medicare. I told him I didnt know and asked him if he has any patients that are younger than medicare age that might be appropriate. He said that those patients dont want to try a patch. I asked if he has any patients taking tramadol monotherapy and what he does when their current therapy is not enough. He said he has those patients and he tends to titrate them. I asked him to try butrans for those patients and that the new savings card allows them a one month trial. He said he would try butrans there. I started to discuss the patient type for oxycontin and he told me to forget about it.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/15/2012	short discussion in hallway about Butrans indication, CII, and 7 day controlled release of buprenorphine. Asked dr if he had patients on tramadol or vicoden that may be appropriate for a product like Butrans? Dr said yes. nothing else learned. Left dosing and titration guide and managed care information.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	3/15/2012	Discussed Butrans key selling messages with pharmacist. Explained trial offer cards and copy cards. Asked what they see most often filled for pain. Pharmacy sees alot all equally. Vicoden, Ultram and percocet. Discussed Patient information kits. They feel comfortable passing them out where appropriate.
PPLPMDL0020000001	Northfield	OH	44067	3/15/2012	Spoke with pharmacist, Sun-Li. Presented new Butrans trial/savings program & reviewed eligibility requirements. Also discussed automatic savings through e-voucher for CVS customers. Discussed OxyContin savings cards & eligibility/usage, including cash-paying patients having the ability to use the card every 14 days if their prescription is written that way.

PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/15/2012	Asked Patrick if he has seen any Butrans prescriptions come through in the last week? He was not sure but didnt remember. Asked him about OxyContin stocking. Patrick said they have most doses and have given out a few of the copy cards. Asked pharmacist if he would provide the patient information kits to patient coming into pharmacy filling Butrans or giving to patients on high doses of tramadol or even cox2's? Patrick said he would and liked that they provided information on application sites.<font color=blue><b>CHUDAKOB's query on 03/28/2012</b></font>Look at your next call objective. &What does "Contin relationship" mean?<font color=green><b>REICHL's response on 04/01/2012</b></font>not sure what that means?!? &I obviously didn't check my call notes for accuracy.<font color=blue><b>CHUDAKOB added notes on 04/04/2012</b></font>Please make sure you do that before submitting them. &Thanks!
PPLPMDL0020000001	Parma	OH	44134	3/15/2012	I reminded Dr Mandat that prior to Butrans, there has not been a long-acting opioid therapy in the CII class. I asked what his thoughts were on this. He said that is a good way to look at Butrans & that using Butrans is a good way to get a long-acting opioid without having to prescribe a CII medication. I reminded him that Butrans still has abuse & addiction potential. Spoke with Rebecca who asked if we still have OxyContin savings cards. I told her I do & offered a package. She said they do not actually keep them in the office but asked that I leave at least one instead with Marc's Pharmacy on Snow Rd. She went on to say that Dr Mandat is seeing a patient this afternoon who had only an expired card & needed an updated version. I let her know that the patient's card may still work even if it says it is expired but let her know I would drop off a new package at Marc's just in case.
PPLPMDL0020000001	Brooklyn	OH	44144	3/15/2012	Spoke with pharmacist, Matt, & reviewed Butrans. He said he has not seen any activity for it. Presented new trial/savings program & reviewed eligibility requirements. Also discussed automatic monthly savings through e-voucher. I asked if he is seeing any new OxyContin prescriptions. He said they have all been continuing scripts. He added that Opana has really started to "take over", but they do not stock it due to risk of abuse potential. I asked why they stock other opioids if that is the concern. He said he stocks OxyContin because it was reformulated. I reminded him that there is no data to suggest that the reformulated version of OxyContin is any less abusable than the original formulation. He said he knows that but based on what he has seen, he believes it is easier for patients to abuse Opana than OxyContin. I told him again there is no data that says that. Gave him a package of new OxyContin savings cards & reviewed eligibility requirements & usage, including cash-paying patients being able to use it every 14 days if their prescription is written that way. He said there are a few patients who he can think of who will really benefit from that.
PPLPMDL0020000001	Parma	OH	44134	3/15/2012	Spoke again with Mary, technician, who said that the floater pharmacist was in again today. I let her know that I had just been in Dr Mandat's office & they asked that I come down to ensure they were stocked with OxyContin savings cards as they had a patient who needed one & they do not keep them in the office. Discussed eligibility requirements for use & let her know cash-paying patients like the one Dr Mandat's office had told me about can use the card every 14 days if their prescription is written that way. She said she would give the cards to the pharmacist & would pass along this information. Gave her the information sheet for OxyContin savings cards as well.
PPLPMDL0020000001	Macedonia	OH	44056	3/16/2012	I reminded Dr Yager of our previous conversation about Butrans & how he had expressed interest in using it for appropriate patients who were not well-controlled on tramadol. He said he is still interested & just hasn't really thought to use it. He said it is probably lack of comfort & not really knowing exactly how to start a patient. I asked if he could think of 1 or 2 specific patients who fit the profile we were talking about. He said yes. I told him I would go over exactly how he could initiate Butrans in these patients if appropriate. Showed initiation tool & asked how much tramadol one of the patients is taking. He said probably around 300mg. Showed him on the tool how this patient could start on Butrans. Then I showed him the example of how a prescription would be written. I asked if this helped. He said yes. He said one of the other reasons he probably hasn't written it yet is that he doesn't want to get a call back that it is too expensive or not covered. Showed him formulary grid & asked him to focus on commercially insured patients. He said one problem is that most of his patients who fit the profile are Medicare patients. I asked what about patients in the 50-60 year old range who are still working. He said he actually does have some like that. I asked if he would commit to trying Butrans for one or two of them. He agreed.
PPLPMDL0020000001	Garfield Hts	OH	44125	3/16/2012	Discussed OxyContin for patients beyond Butrans range who could benefit from a q12h dosing.<font color=blue><b>CHUDAKOB's query on 03/21/2012</b></font>Wow, what a great call. Looks like you did a really nice job of getting patient specific and handling his objections. Nice job!<font color=green><b>APSEGAS's response on 03/23/2012</b></font>Thank you. &I felt really good about this one. &I walked away feeling like something really clicked with him. &Now I just have to wait & see & follow-up with him to keep it in his mind.<font color=blue><b>CHUDAKOB added notes on 03/27/2012</b></font>Keep up the good work!
PPLPMDL0020000001	Parma	OH	44129	3/16/2012	Spoke with Alene, PharmD, who said they are stocking & dispensing 5 & 10mcg Butrans. Discussed new Butrans trial/savings program & reviewed eligibility requirements. Also reviewed appropriate patient type. Gave her one package of OxyContin savings cards & reviewed eligibility requirements for usage.
PPLPMDL0020000001	Cleveland	OH	44109	3/16/2012	Dr Roheny said he knows Butrans is dosed in 5, 10, & 20mcg. I told him this is correct. I showed him initiation guide slide-out tool. He spent time looking at it. He asked why the 20mcg is not on there. Discussed 20mcg as a titration dose, not a starting dose & using the guide to help start patients. Also discussed appropriate range of patients & OxyContin as an option for appropriate patients beyond Butrans range. Discussed Butrans as a long-acting CII opioid. Also reminded him of abuse/addiction potential.
PPLPMDL0020000001	Cleveland	OH	44130	3/16/2012	showed dr OxyContin visual aid,we discussed appropriate patients and asked dr where he feels OxyContin is appropriate? dr said for severe pain.I asked dr what he's prescribing for moderate pain? dr said short-acting opioids.I asked dr at what point is a long-acting opioid appropriate? dr said when patients have tried a couple short-acting opioids,maxed out,and still in pain then he'll talk to patients about a long-acting opioid.asked dr if he'll start a couple new patients on OxyContin today-next week? dr said he will and does start a lot of patients on OxyContin.told dr thats great to hear and i appreciated his continued business.I asked dr if he knew about CVS/Caremark and UHC/AARP Part D patients getting OxyContin at lowest branded co-pay? dr said no he didnt.showed formulary grids and we discussed this info.I asked dr if he would start a couple new patients on OxyContin that have CVS/Caremark or UHC/AARP insurance? dr said he'll try and remember.dr told me to show the nurses this info as they handle all PA's when medications arent covered and deal with insurance
PPLPMDL0020000001	Cleveland	OH	44130	3/16/2012	Dr Kansal said he has not put any patients on Butrans. I told him it is not for everyone, but I am confident that he has some appropriate patients in his practice for whom he could consider Butrans. Discussed appropriate patient type & range, including OxyContin as an option for appropriate patients beyond Butrans range. Dr Kansal reminded me that he believes that by the time patients get to him, they are already "too used" to taking pills. Reminded him of the ability for patients to take supplemental analgesia with Butrans. He said he will do his best. Spoke with Sharon & Dorothy about Butrans appropriate patient type. They said he does have patients on Vicodin & Percocet several times per day.
PPLPMDL0020000001	Beachwood	OH	44122	3/16/2012	Followed-up with Dr Warren & reminded him of our previous discussion when he told me that he wanted to try Butrans for patients who he was trying to decrease from fentanyl & also for patients who cannot tolerate NSAID's. He said he remembers & actually did start a patient. I asked him to tell me more about them. He said it was a patient who was new to him who had been on fentanyl a long time ago but was only on NSAID's now & who had renal problems. I told him it sounded like he picked a good patient. He said he has not heard any feedback yet. I asked if he has more patients like that or the ones we talked about last month. He said he does. I asked if he would prescribe Butrans for some of them where appropriate. He said he would. Reminded him of managed care coverage, asking him to focus on patients with commercial insurance. Also reminded him of new trial/savings program. Discussed OxyContin as an option for appropriate patients who are taking more than 20mg per day of Percocet.<font color=blue><b>CHUDAKOB's query on 03/21/2012</b></font>When you say discussed OxyContin....., what exactly did that look like in this call?<font color=green><b>APSEGAS's response on 03/23/2012</b></font>In this call I positioned OxyContin for patients taking Percocet. I have my OxyContin conversion guide open to the oxycodone conversion page, so I showed that & asked him to consider a q12h dose of OxyContin for those patients. He has been telling me that he is no longer prescribing any CII's, including Percocet, so this is all the further I got on that end. &His numbers do show a decrease in opioids.<font color=blue><b>CHUDAKOB added notes on 03/27/2012</b></font>OK. &Thanks for the clarification. &Discussed OxyContin is rather vague, but your explanation was good. &
PPLPMDL0020000001	Lakewood	OH	44107	3/16/2012	Dr was asking about Butrans managed care coverage and said that some of his patients are not able to get it. I asked if he knows what the patients plan is when he goes into a room. He said that Patty and Elizabeth are the ones who know. I spoke with Pat and Elizabeth and we discussed the managed care for Butrans. They said they are the ones who will recommend medications to the doctor based on what the patients insurance is. They both said they will let Dr know when they are in a room with a patient, that Butrans may be an appropriate option if it is commercial insurance or Caresource. They do many prior auths for Caresource. We reviewed that for Med D patients, OxyContin may be an option.<font color=blue><b>CHUDAKOB's query on 03/28/2012</b></font>Sounds like you need to sell Pat and Elizabeth on Butrans as well as the doctor.<font color=green><b>HOLUBA's response on 04/01/2012</b></font>Yes I have been trying to do this.<font color=blue><b>CHUDAKOB's query on 04/04/2012</b></font>You said you have been trying to do this. &What is holding you back?<font color=green><b>HOLUBA's response on 04/09/2012</b></font>nothing. I talk to Pat and Elizabeth each time I am in there.<font color=blue><b>CHUDAKOB added notes on 04/11/2012</b></font>OK. &find out what is
PPLPMDL0020000001	Lakewood	OH	44107	3/16/2012	Quick call with Hannah, she just got back from the hospital doing rounds for Dr Khuri's patients. I asked if she ever has patients whose pain is not well controlled and what does she do, she said that she will usually talk to Dr Khuri first before changing pain meds. She said that he does use OxyContin from time to time. We reviewed the conversion guide for OxyContin.
PPLPMDL0020000001	Cleveland	OH	44111	3/16/2012	Spoke with Michelle tech, we reviewed the medication guide for Butrans and I asked if she would hand them out when they get a Butrans script and she agreed. I reviewed the savings programs for Butrans and OxyContin and she was familiar with the e-voucher program. She said she will make sure that patients get the discount.
PPLPMDL0020000001	Cleveland	OH	44111	3/16/2012	Spoke with Steve, I asked if he would ever let patients know about Butrans as an another option and give them a medication guide. He said he might if they asked him, I asked what types of things patients will ask about their pain meds and he said that they will want to know if it will stick, can they shower,and where to put it on. We reviewed the Butrans medication guide and what they patients should know about application. We reviewed the OxyContin conversion guide and he said they still see new patients.
PPLPMDL0020000001	Cleveland	OH	44109	3/16/2012	showed dr william,patient profile,asked dr if he's treating patients like this? dr said yes.I asked dr whats the next step for patients like this? dr said he would either go to 10mg vicodin or percocet.I asked dr if he's considering Butrans as an option here? dr said for some patients yes but not all patients want to wear a patch for their pain,dr said thats been the challenge.I asked dr if he's giving Butrans patient info booklets to patients to educate them? dr said yes and some patients want to read it over and he follows up with them.I asked dr if he could think of 2 patients between today and next week that look like william,requiring a medication adjustment,and start them on Butrans? dr said yes he will see who comes into the office and will start more patients on Butrans as long as insurance covers it.dr asked about medicaid coverage,I asked dr if he has some medicaid patients in mind? dr said yes.we discussed PA requirements for caresource patients.recommended Senokot-S
PPLPMDL0020000001	Lakewood	OH	44107	3/16/2012	I asked if Dr Grimm has been having success with Butrans and she said that she thinks he has tried it. She saw one of his patients and they seemed to be doing well. I reviewed the patient profiles and I asked if she sees patients like William, she does all the time. We discussed that this might be an appropriate Butrans patient and she said that she would try it for a patient like this. Lori said that she has not been very happy in pain management and that she is applying for jobs back at main campus. She said that Dr Grimm did not give her any training, help of support in her position.
PPLPMDL0020000001	Lakewood	OH	44107	3/16/2012	Spoke with MaryAnn, we discussed having a LEE this fall and I let her know I will help coordinate this. She did not know if they are still allowing reps to do in-services on the floors and she will ask Joanne to contact me regarding this.
PPLPMDL0020000001	Cleveland	OH	44109	3/16/2012	worked pm&r-see call notes on HCP's,worked family medicine-had to leave Butrans fpi's,initiation guides,patient info booklets,formulary grids and business cards for dr chrisman,dr forde,dr magoulias,dr krofina and dr adebamito as i couldnt see HCP's,left SAME info for Internal Med HCP's>Dr Lindheim,Dr Jones,Dr Ricanai,Dr McCreery,Dr Gelehrter,Dr Harrington and Dr Falck-Ytter.
PPLPMDL0020000001	Lakewood	OH	44107	3/16/2012	I showed the inclusion criteria for OxyContin and asked if she treats these types of conditions. She said that she does. I asked if these would be the types of patients where she may prescribe OxyContin and she said they are, but depending on the patient she may send them to pain management. I asked how she decides, and she said if they are younger and might benefit from other non- medication therapy then she would send them out. I asked if she would go to OxyContin when patients are taking short acting around the clock and she agreed. We discussed that Butrans could also be an option for patients instead of going to vicodin in the first place and I asked if she would start a commercial patient on Butrans with the trial card and she agreed.
PPLPMDL0020000001	Barberton	OH	44203	3/16/2012	Asked Dr where she believes she would use Butrans? Dr said that since it is a long acting product that it would be before OxyContin and most likley before Vicoden. Asked Dr if she has patients on commercial insurance that have osteoarthritis, or nerve root entrapment? Showed inclusion criteria from main visad. Dr said she treats all those diseases. Asked dr to use Butrans in those positions and to use the trial offer. Dr agreed to try in those
PPLPMDL0020000001	Akron	OH	44319	3/16/2012	Gave dr the managed care grid for Butrans. Renee(ma) said that the office sees an equal amount of Anthem, medical mutual and UHC for commercial plans. Gave Dr Yee the Butrans grid and asked him to prescribe Butrans for an osteoarthritis patient on low dose vicoden with medical mutual insurance. Dr said that he has been thinking about it and the information helped.



PPLPMDL0020000001	Cleveland	OH	44109	3/16/2012	dr said he's starting more patients on Butrans and needs patient info booklets.i asked dr how the patients are doing on Butrans? dr said patients are doing good,pain is controlled and no issues at this time.i asked dr if he's starting patients like emma,patient profile,on Butrans? dr said yes a lot of patients are taking tramadol but pain isnt controlled so he's starting them on Butrans instead of going to vicodin.we discussed initiation and titration of Butrans,asked dr if he has more patients he'll see this week that he can start on Butrans? dr said yes,focused dr on BWC and commercial insurance patients.recommended Senokot-S
	Cleveland	OH	44109	3/16/2012	showed dr BUP3015,we discussed opioid experienced clinical trial,asked dr if 30% reduction in pain was clinically significant? dr said yes any reduction in pain is good.asked dr if it was significant enough that he would start a couple patients on Butrans? dr said yes he will.dr said he started another patient on Butrans recently so he has 2 patients on Butrans right now.we discussed initiation and titration of Butrans.asked dr if he has a couple patients in mind to start on Butrans between today and next week? dr said yes he does and he'll start a couple more patients on Butrans.focused dr on BWC,Commercial insurance patients and we discussed PA requirements for Caresource patients.
PPLPMDL0020000001	Cleveland	OH	44125	3/16/2012	Spoke with Betsy & reviewed new Butrans trial/savings program with her. She said they really do not see any prescriptions for Butrans. Discussed appropriate range of patients. Also gave her new OxyContin savings cards as her old ones had expired. Discussed eligibility requirements for usage & let her know patients who pay cash can use the card every 14 days if their prescription is written that way.
PPLPMDL0020000001	Cleveland	OH	44109	3/16/2012	talked to nate,pharmacist,about Butrans 6 core selling messages,asked nate what features of Butrans stood out to him? nate said transdermal delivery and 1 application with 7 days buprenorphine.i asked nate if he felt patients were appropriate for Butrans that come here for short-acting opioids? nate said some patients are taking short-acting opioids for chronic pain but arent controlled so he thinks Butrans would be a great option.i asked Nate if he would give these patients Butrans patient info booklets so patients can talk to their HCP's? nate agreed.confirmed stocking,left booklets and gave nate a couple certified med educ catalogs for pharmacy staff.confirmed OxyContin stocking but nate didnt have time to keep talking.recommended Senokot-S
	Cleveland	OH	44109	3/16/2012	discussed 6 Butrans core selling messages with dr,dr said he likes idea of once weekly dosing in a patch for chronic pain patients,dr said he doesnt have anyone on narcotics though,except for a few patients.i asked dr how he's treating chronic pain at this point? dr said non-narcotic options.asked dr what were some of those options? dr said NSAID's,COX-2's,muscle relaxers,SSRI and SSNRI's,injections,physical therapy,etc...i asked dr if he saw a place for Butrans in his practice? dr said yes if he has a choice of a long-acting opioid he would consider Butrans.we discussed BWC,commercial insurance and PA requirements for Caresource patients that dr could start on Butrans.i asked dr if he will consider Butrans for 1-2 patients the next time he treats someone for chronic pain thats ready for a long-acting opioid? dr agreed.recommended Senokot-S
PPLPMDL0020000001	Barberton	OH	44203	3/16/2012	Spoke with Laura(MA) and Connie(RN) about OxyContin and Butrans. Discussed key selling messages, patient copy card savings, Senokot-S. Dr is using OxyContin and has not recieved information on Butrans previously.
PPLPMDL0020000001	Akron	OH	44307	3/16/2012	Asked if Butrans might be a product that the doctor would use? Was told that he might but he will review information and will let me know his thoughts
PPLPMDL0020000001					Discussion with Mary(RN) about OxyContin. Discussed key selling messages for OxyContin along with dosing/conversion guide. Mary asked about insurance coverage changes. Mary has been having issues with the QL with OxyContin and has been having to do overrides but does get it covered. Most patients have medicare B or Medicaid with some commercial coverage. Discussed Butrans and where it may fit in Dr Hazras practice. Asked for continued use of OxyContin where appropriate.
	Lakewood	OH	44107	3/16/2012	Dr told me that he did try to write for Butrans again but they said it was too expensive. He said he thought it was commercial insurance when he wrote it and he gave them a card, but now that he thinks about it they may have been Medicare with a supplemental prescription insurance. I let him that know that Butrans is not well covered on Medicare and they will not be able to use the savings cards. He said most of his patients who need chronic opioids are older. He said that any younger patients he is sending out to pain management. He is trying to write for any opioids long term. He said usually when he writes for vicodin he is only giving it for a week or so for acute issues. We discussed the inclusion criteria for Butrans and I asked if he treats these conditions, he said he does. I asked if he would consider trying Butrans as an option instead of going to vicodin and before sending them out to pain management and he said he will see. I reviewed the manged care and savings program.
PPLPMDL0020000001	Akron	OH	44319	3/16/2012	Asked Dr if he has patients on Tramadol or vicodin around the clock. Dr said yes he does but not many. Gave quick selling message for Butrans and reviewed initiation guide. Asked if he is still using OxyContin. Dr agreed he is and wanted the conversion guide for his reference and copy cards. Nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44109	3/16/2012	talked to Toni,Nurse and Samanthra,MA,as dr wasnt free to talk-we discussed 6 Butrans core selling messages,Toni said they have a lot of patients taking short-acting opioids for chronic pain that she thinks Butrans would be an appropriate option for,Toni said i could leave info for dr and she'll talk to him later today,gave initiation guide and showed patient info booklet,we discussed application sites/rotation/side effects of Butrans.Toni and Samanthra asked about insurance coverage for Butrans? we discussed commercial insurance,BWC and Caresource patients trying Butrans.Tony said to try back again next week and see if dr is available to talk
PPLPMDL0020000001	Westlake	OH	44145	3/16/2012	I told Dr that i was here again so that he does not forget about Butrans. I asked if he would start a patient tonight and give them a trial of Butrans. He agreed. He said that he thinks Dr Shah has started prescribing Butrans. I asked if he's talked to Dr Shah about his success and he has not yet, but he will if he sees him. He is at the office on Wed when he is not there.
PPLPMDL0020000001	Cleveland	OH	44102	3/16/2012	talked to Deb,pharmacy tech,about 6 Butrans core selling messages,asked Deb what features of Butrans stood out to her? deb said once weekly dosing and its a patch for pain,deb said she thinks there are patients that would be appropriate for Butrans that come here to get their short-acting opioids scripts.asked deb if she would give patients the Butrans patient info booklets so patients can talk to their HCP's about Butrans? deb agreed.confirmed OxyContin stocking and deb said to come back in a week or 2 as Vicky,Pharmacy mgr was out today.recommended senokot-S
PPLPMDL0020000001	Akron	OH	44319	3/16/2012	Sara(Pharmacist) wanted OxyContin copy cards. The pharmacy had OxyContin in stock and fills it regularly. Did not know about Butrans and have not filled it. Gave key selling messages and introduced trial offer and copy
PPLPMDL0020000001	Shaker Heights	OH	44122	3/16/2012	Spoke with pharmacist Nahla & presented new Butrans trial/savings program. Discussed eligibility requirements & commercial insurance coverage. Also discussed new OxyContin savings cards & reviewed eligibility/usage for them. Let her know cash-paying patients can use the cards once every 14 days if their prescription is written that way.
	Cleveland	OH	44113	3/19/2012	re-capped for dr Butrans key selling messages that he told me in past-transdermal delivery,once weekly dosing,CII and patients with moderate to severe chronic pain taking tramadol ready for a medication adjustment,dr said yes he likes all of that.i told dr he's mentioned in past he doesnt prescribe long-acting opioids so in fairness to him,he is comfortable prescribing Butrans knowing its a long-acting opioid? dr said yes he has no problems with Butrans because less street value than OxyContin.i told dr there could be street value for Butrans in future because its an opioid,dr said he knows but he's not concerned with that for Butrans.
PPLPMDL0020000001	Beachwood	OH	44122	3/19/2012	Presented Butrans trial/savings program to Dr Myton-Craig. Reviewed eligibility requirements & commercial insurance coverage. Positioned Butrans for patients who are taking 3 tramadol per day & are asking for an increase in dose or dosing interval. Positioned OxyContin for appropriate patients beyond Butrans range. Dr Myton-Craig said she would try Butrans.
PPLPMDL0020000001	Cleveland	OH	44120	3/19/2012	I talked to Hakeem,Pharmacist,about OxyContin stocking-all strengths are in stock,asked who is prescribing OxyContin? Hakeem said dr pandit had 4 patients come here for OxyContin scripts and a few other doctors but thats it.Hakeem said he's not seen new Rx for OxyContin,we talked about a lot of HCP's starting new patients on Opana or switching them from OxyContin to Opana.i asked Hakeem what is the most common strength of OxyContin prescribed here? Hakeem said the 20mg OxyContin.i told Hakeem im discussing 7 tab strengths with HCP's in area.confirmed Butrans stocking,no Rx yet but all 3 dosage strengths in stock and I asked if Hakeem would continue handing out patient info booklets to appropriate patients? Hakeem agreed to continue doing this.
PPLPMDL0020000001	Cleveland	OH	44105	3/19/2012	talked to Abdul,Pharmacist,about Butrans stocking he has 10mcg in stock and has seen 2 patients of dr nickels(pain management HCP)get started on Butrans 10mcg.Abdul said 1 patient was taking Vicodin ES,5 pills/day and came back saying Butrans wasnt working for her,dr stopped Butrans for this patient.i asked Abdul if he would give appropriate patients the Butrans patient info booklet and have them talk to their HCP's about Butrans? Abdul said yes he has done that and will continue to do so.i asked Abdul if he's seeing new Rx for OxyContin? Abdul said no only Opana and a lot of patients getting switched to Opana.Abdul said he thinks its patients requesting that switch and doctors are doing that.i asked Abdul who are some OxyContin writers in area? abdul said dr celeste and a lot of doctors from Metro,i asked if Dr harris was still starting new patients on OxyContin? Abdul said yes a lot of patients from Dr harris but same patients every month getting OxyContin.i asked Abdul what are some of the common dosage strengths he's seeing prescribed? Abdul said OxyContin 20mg.Abdul said i should focus on educating doctors about the 7 tablet strengths and Q12H dosing.gave Abdul Certified med education catalog and patient education on safeguarding medications.
PPLPMDL0020000001	Parma	OH	44129	3/19/2012	Dr Taylor asked me to review BWC Butrans coverage & asked if a prior authorization is required. I told her that at this time, no prior authorization is needed for Butrans. She said this was great news because she just found out that BWC has limited what pain medications a patient has access to. She said it seems they do not allow anything anymore, including OxyContin. She went on to say that patients can no longer get Vicodin & that this will "help Butrans out". Reviewed Butrans appropriate patient type/range & asked if she would prescribe Butrans for appropriate patients fitting the indication when Vicodin is not covered. She agreed. Also reviewed prior authorization requirements for OxyContin on BWC.
PPLPMDL0020000001	Cleveland	OH	44127	3/19/2012	dr said she didnt start anyone on Butrans yet,she's sending most of her chronic pain patients to pain management.I asked dr what she will do for her tramadol patients that need a medication adjustment? dr said she will start them on Butrans.i showed dr Butrans initiation guide,dr said she will start 2 patients on Butrans within 1 week.
PPLPMDL0020000001	Lakewood	OH	44107	3/19/2012	Email invitation sent for Microsoft Live Meeting webinar, to be held on Thursday, March 22.-chr>Attachment included the proposed handout for the 3/22 presentation. áThe handout was sent as a PDF file, 3 slides per page. á Quick call, I asked Dr if he treats the pain seen in the inclusion criteria and he said he does, I asked if he would consider OxyContin as an option for patients taking hydrocodone around the clock and I showed the conversion guide. He agreed.
PPLPMDL0020000001	Lakewood	OH	44107	3/19/2012	Quick call- Caught Dr Laluk at the window. Passed back wrapped Butrans "Special Report" article & asked him to review it. Reminded him of previous discussion about Butrans & reviewed core messages. He said he would take a look at the article.
PPLPMDL0020000001	Parma	OH	44129	3/19/2012	Quick call- I showed Dr the pull out tool and asked if he would consider patients taking these doses of opioids, he said that he would. I reminded him that most commercial patients can get Butrans and that Karen can do a PA for Caresource patients. He said OK.
PPLPMDL0020000001	Lakewood	OH	44107	3/19/2012	Spoke with Shah, I asked about the movement of Butrans and he said he did not know of many patients on it. I asked if he would let patients know about Butrans as an option and he said he would. We reviewed what to let patients know about Butrans regarding application and rotation. I reviewed the OxyContin conversion guide
PPLPMDL0020000001	Cleveland	OH	44104	3/19/2012	i showed dr OxyContin visual aid,pain scale and conversion guide with percoacet conversion example-i told dr that he's mentioned in past he has a lot of patients taking percoacet for chronic pain and asked where on pain scale he thinks OxyContin is appropriate? dr said he's got too much going on today,charts and 3 patients still to see,dr said as of 2012 he's taking everyone off percoacet and isnt writing OxyContin.i asked dr what is he going to do when he see's patients that have been taking Percocet for their chronic pain? dr said he will put them on tramadol.dr said he had to go and couldnt talk more
PPLPMDL0020000001	Garfield Hts	OH	44125	3/20/2012	Stopped Dr Sadowski between patients by handing him Butrans initiation tool. I showed him how to use the tool to figure out the recommended starting dose for Butrans. Showed him example of a patient taking less than 300mg tramadol per day starting on the 5mcg Butrans & then showed how someone taking 300-400mg tramadol could start on Butrans 10mcg. He said this would be a useful tool & put it in his pocket. Reminded him of OxyContin for appropriate patients beyond Butrans, especially if they are already on oxycodone around-the-clock. He just waved & walked into a room.
PPLPMDL0020000001	Cleveland	OH	44113	3/20/2012	dr said he remembered Butrans and that Purdue makes OxyContin too.i told dr that he wanted me to follow-up with him when the PA for Caresource was better than before and it is now we discussed PA requirements for Caresource patients,showed dr Butrans initiation guide,dr said 1/2 of his patient population is Caresource so he will try it in a few patients and see what happens.dr said he would like to get people off of hydrocodone and percoacet and try Butrans.i explained that Butrans is a CII opioid and still potential for abuse.dr had concern about patients sweating in summer.i explained product sticks well.told dr i appreciated his commitment to starting 2 patients on Butrans,showed dr Butrans patient info booklet as dr asked about application sites.
PPLPMDL0020000001	Cleveland	OH	44130	3/20/2012	I showed Dr Diab Butrans trial/savings card & asked him to give one to patients with commercial insurance who are getting a new Butrans prescription, allowing most to try it at no cost. He asked me to leave more of the cards as he did not know where his others were. Also reminded him of the OxyContin savings program for eligible appropriate patients. He thanked me & walked into a room.

PPLPMDL0020000001	Cleveland	OH	44102	3/20/2012	i asked Naga if the patient info booklets and initial trial offer cards in the exam room is helping doctors remember Butrans? Nagla said yes she thinks so,Nagla said they really dont remember any of the savings cards in back room so having Butrans booklets and cards in exam rooms does help physicians and patients and can read booklets to learn more about Butrans.I asked Nagla if she will recommend Butrans to dr carson,for appropriate patients? Nagla said she doesnt work a lot with dr carson and he likes to do everything on his own,but dr celeste and dr baishnab she works closely with,asked Nagla if she would recommend Butrans to them when appropriate for patients? Nagla said yes she will do that
	Maple Heights	OH	44137	3/20/2012	Reviewed Butrans core messages with Dr Dale & reminded him that Butrans is a CIII opioid with abuse & addiction potential. I showed him patient profiles, letting him know there are three different patient types for whom he may find Butrans appropriate for. Started with "Jessica" profile & asked Dr Dale if he would ever prescribe a long-acting opioid for a patient who was failing NSAID's/COX-2's. He said he would rather prescribe something short-acting first, just to see how they tolerate opioids. He went on to say that if the patient was not well-controlled on the tramadol, he would then go to something like Butrans. I asked when he starts a patient on tramadol, how does he prescribe it. He said usually 50mg q6h. I showed "Emma" patient profile & told him that is just like another patient for whom Butrans may be appropriate. I told him it sounds like he is on the right track. Discussed ability for patients to take supplemental analgesia. I let him know he could either allow patients to take an immediate-release opioid or a non-opioid medication. Also showed him that in clinical trials, we allowed patients to take acetaminophen or ibuprofen for supplemental analgesia. He said this was good to know & he would be more likely to have them do that than to take two opioids together. Discussed titration & individualization of dosing. Also discussed managed care & trial/savings program. Discussed OxyContin as an option for appropriate patients beyond Butrans.
PPLPMDL0020000001	Maple Heights	OH	44137	3/20/2012	Dr Gene said he thinks Butrans is a good product & the patient who he has on it has remained on it & is doing well. He said he thinks it fits a good "niche". I told him there are actually 3 different patient types for whom he may find that Butrans is an option for. Showed Jessica patient profile & asked if he had a patient like this, not well-controlled on NSAID's or COX-2's, would he consider that patient a Butrans candidate. He said he would have no hesitation about starting that type of patient on 5mgc Butrans. I showed "Emma" & "William" profiles & discussed those as other patient types who he may find are appropriate for Butrans. Discussed Butrans as a CIII opioid with abuse & addiction potential. Reviewed managed care coverage & trial/savings program. Also discussed OxyContin as an option for appropriate patients beyond Butrans range, especially if they are already taking oxycodone around-the-clock. He said it is a good medication for the right patients. I asked if he would prescribe Butrans for a few more appropriate patients who fit the indication & who were like the patient profiles we asked dr how patients are doing on Butrans? dr said good he just gets frustrated when insurance companies dont cover Butrans thats it.I asked dr if he will continue starting patients on Butrans besides the insurance frustrations? dr said yes he will
PPLPMDL0020000001	Cleveland	OH	44109	3/20/2012	Doc said that because Opana ER is no longer available he is writing more he is switching people back to Oxycontin. He had written less oxycontin due to more PAs being required and he tries not to do them. I explained that the cards he may have will expire the end of this month and the new one's are good for the next year. I asked him if he has more medicare or medicaid patients. He said neither really. Provided a formulary grid anyway and one for CCRX and Silverscript.
PPLPMDL0020000001	Mayfield Heights	OH	44124	3/20/2012	Windwo call....Reminded doc about the savings cards and the formulary coverage. I reminded her that the new savings cards offer a one month trial. She just said that she is still liking butrans and its going well. Nothing more learned.
PPLPMDL0020000001	Cleveland	OH	44130	3/20/2012	Reminded Dr Fedorko of previous conversation when we discussed patients taking tramadol daily around-the-clock & how Butrans may be an option for them. Showed initiation tool & pointed out how patients taking 300-400mg per day of tramadol could start on Butrans 10mgc & patients taking less than 300mg per day would start on the 5mgc. He told me that tramadol is only \$4 & he would guess that Butrans is around \$80. I reminded him of Butrans trial/savings program which allows most eligible patients to try 28 days of Butrans at no out-of-pocket cost. He said the patients he has that take tramadol are "hooked" on it & do not need it for pain, then he walked into a room.<font color=blue><b>CHUDAKOB's query on 03/28/2012</b></font>Perhaps refocusing him back to the patients he has written for and the success he has had with those patients might help him see the right patients again.<font color=green><b>APSEGA's response on 04/01/2012</b></font>I will give that a try this week. &Thank you.<font color=blue><b>CHUDAKOB added notes on 04/04/2012</b></font>I like your Saw doc at the window and showed him the butrans demo patch and explained that it is a CIII similar to vicodin but butrans is a once weekly dose. I asked him if he has any patients that could benefit from butrans. He said his patients are not interested in a once a week patch. Nothing more learned.
	Mayfield Hts	OH	44094	3/20/2012	asked dr if patients are happy with Butrans? dr said yes for the most part,dr expressed his frustrations with Caresource not approving Butrans.we discussed PA requirements for Caresource,told dr i would follow-up with Kendra,Managed Care rep about Caresource PA.
PPLPMDL0020000001	Cleveland	OH	44113	3/20/2012	Spoke with Sarah (floater pharmacist) & reviewed Butrans patient type & range. Also discussed patient information booklets & how they can be given to potential Butrans patients or used in patient counsel. Also reviewed new trial/savings program & OxyContin savings cards.
PPLPMDL0020000001	Parma	OH	44129	3/20/2012	Spoke with Dawn, pharmacist, who said she still hasn't seen any prescriptions for Butrans. She added that she does not understand why as it seems like a good idea for some patients. Reviewed savings program & trial offer with her & discussed eligibility requirements. Also reviewed OxyContin savings program & usage. I asked if she has seen any new OxyContin prescriptions or only continuing scripts. She said she mostly sees continuing but has seen some new.
PPLPMDL0020000001	Cleveland	OH	44114	3/20/2012	elaine said she started 1 patient on Butrans but insurance didnt cover.asked what insurance plan? elaine said it was BWC,we discussed employer sponsored/self-insured BWC plans may not cover Butrans but State BWC seems to be paying for Butrans.thanked Elaine for trying to start a patient on Butrans,Elaine said it was easy because the patient was willing to work with her and wanted to try Butrans.
PPLPMDL0020000001	Mayfield Heights	OH	44124	3/20/2012	Spoke to Sirisha about the movement of butrans and oxycontin. She still has not seen any butrans scripts. I discussed the indication and the positioning and the savings on relay health and with cards. She said they have just a few oxycontin customers and does not have any issues with the product.
PPLPMDL0020000001	Richmond Heights	OH	44143	3/20/2012	I discussed the butrans indication and key selling messages. I asked doc where he might use butrans he said maybe after tramadol - not for opioid naive. I asked how high he titrates tramadol. He said usually no more than 200mg. I showed/explained the starting doses. He asked what narcotic butrans is comparable to. I told him there is no head to head data but butrans is a CIII like vicodin (can be refilled, called in). He said he is familiar with using suboxone and would like to try butrans. He asked about the coverage. I discussed the covered plans and the savings cards. He said he would try it and start patients on 5mgc. I asked him if he has any patients on oxycontin. He said he only uses oxycontin in Hospice. I explained the broad indication for moderate to severe. He is medical director at Odessa Nursing home.
PPLPMDL0020000001	Parma	OH	44129	3/20/2012	Discussed Butrans dosing, titration, & ability to take supplemental analgesia in the form of immediate-release opioid or non-opioid medications with Dr Ortega. I asked if a patient says that Butrans doesn't work, what does he do. He said usually titrate. I reminded him that Butrans offers 5, 10 & 20mgc dosing. Dr Ortega said that he has been taking over for Dr Marshall since he has been ill & has encountered a lot of patients taking short-acting opioids around-the-clock for whom Butrans may be appropriate. He asked what the maximum dose of Percocet a patient could be on in order to be considered a Butrans candidate. I showed initiation guide & told him that if a patient is on more than 40mg oxycodone per day, Butrans may not provide adequate analgesia. I asked why he asked. He said he has seen patients lately taking high doses of Percocet every day. I reminded Dr Ortega that if the patient is beyond the Butrans appropriate range, OxyContin may be an option, especially if they are already taking oxycodone. Dr Ortega said that was a good reminder. I asked if he would continue to prescribe both Butrans & OxyContin where appropriate & he agreed.
PPLPMDL0020000001	Mayfield Village	OH	44040	3/20/2012	Quick call....Spoke with Tech, Patty, as pharmacist, Mike, was busy. She confirmed stocking on one box of 5mgc and 1 1/2 box of 20mcg. She guessed that they must have customers on it but she was not aware of any specifics. I explained the how to properly apply and rotate the patch in case they get questions. Provided butrans and oxycontin guides for pharmacist.
PPLPMDL0020000001	Mayfield Hts	OH	44124	3/20/2012	Quick call.....Doc was busy. I reminded doc of the new savings cards and the trial month feature. He said that should help. I congratulated him on the jobs he has done with the speaker programs. He asked when i would be doing another. I told him not until later in the year.
PPLPMDL0020000001	Cleveland	OH	44113	3/20/2012	followed up on dinner program,deb thought it was intersting,deb talked about patients not wanting to try Butrans because they like taking their pills and depends on patient,deb said she has gotten a few PA's approved for Caresource but not recently she's having difficulties with Caresource,told deb i would follow-up with Kendra,Managed care rep,deb asked if i had spanish medication guides,40% of patients are spanish speaking in this office.
PPLPMDL0020000001	Parma	OH	44134	3/21/2012	Spoke with Allene (pharmacist) & reviewed Butrans core messages. Discussed appropriate patient type & presented new Butrans trial/savings program. Reviewed eligibility requirements. Also discussed OxyContin savings cards. She said most patients who get OxyContin are on Medicare & can't use the cards. I asked if they see new OxyContin prescriptions or just continuing. She said almost everything she sees is continuing.
PPLPMDL0020000001	Olmsted Falls	OH	44138	3/21/2012	Dr told me that he had a patient in mind for Butrans but then he realized they are Medicare. I asked him about the patient and he said she is taking tramadol around the clock. I let him know that this is an appropriate patient and to look for those patients with commercial insurance and he agreed. We reviewed the savings program. I let him know that 10mg OxyContin would be an appropriate option and is available on Med D. He said he will think
PPLPMDL0020000001	Berea	OH	44017	3/21/2012	I asked Dr if he had been able to use the trial cards for Butrans. He said he is going to. I reviewed the appropriate patients type for Butrans and the initiation pull out tool.
PPLPMDL0020000001	Cleveland	OH	44143	3/21/2012	Quick call.....I reviewed the butrans CIII status and once weekly dosing for appropriate patients and asked doc if he might have any appropriate patients. He said he really does not prescribe a lot of chronic pain meds at all and his patients are older. He asked if it was covered on medicare. I told him no. He said he probably doesnt see the right patients.
PPLPMDL0020000001	Parma	OH	44129	3/21/2012	Spoke with Laurie, pharmacist, & reviewed Butrans patient information booklets. Also discussed trial/savings program & reviewed eligibility requirements. She said they have not dispensed any Butrans. Discussed appropriate patient type/range. Also discussed OxyContin 7 tablet strengths & savings program.
PPLPMDL0020000001	Parma	OH	44129	3/21/2012	Dr Khoobball said something came up unexpectedly so he did not get to go to the Butrans program in Independence, but he did go to the one downtown. He added that he learned a lot from that program about treating pain & when to use Butrans as well as when not to. Showed initiation guide & focused him on pg 6, discussing appropriate range of patients including OxyContin q12h as an option for appropriate patients beyond Butrans range. He said he really does not write CII's. Discussed Butrans as a CIII opioid with abuse & addiction potential. He said he can see using Butrans for very old patients & those who are dying. Positioned Butrans as an option for patients for whom he would otherwise prescribe hydrocodone or tramadol around-the-clock for an extended period of time. Discussed patients with pain from osteoarthritis or low back pain. Also asked him to focus on patients who have commercial insurance, perhaps patients 50-60 years old with pain from a chronic condition. He said he has a few patients in mind. Reviewed trial/savings program & eligibility requirements. I asked if he would prescribe Butrans when someone presents who fits the description we discussed today & he agreed.
PPLPMDL0020000001	Cleveland	OH	44113	3/21/2012	I asked dr at what point is OxyContin appropriate for his patients? dr said when patients have tried all short-acting opioids,have specific pain conditions,he looks at MRI,pathology,etc,dr said every patient is different but he does prescribe a lot of OxyContin.showed dr OxyContin visual aid,we discussed appropriate patients and I asked dr where he feels on the pain scale OxyContin is most appropriate? dr said probably more severe pain.I asked dr how he treats the moderate pain? dr said tramadol.I told dr that's where Butrans could be an option and he can still start new patients on OxyContin that are appropriate,dr said ok he will continue doing so. dr asked who is the Butrans patient? showed emma,patient profile,asked dr if he see's patients like this? dr said yes all the time,we talked about Butrans being an option for these patients,dr asked about abuse potential with Butrans and the indication of Butrans, I showed dr Butrans fpl,black box warning and section 9.2 abuse, I asked dr if that answered his questions? dr said yes.I asked dr who comes to mind that you feel Butrans would be an option for? dr said he has a lot of patients that he would like to try Butrans on but only if insurance covers it,dr said he doesnt look at insurance so a lot of times he doesnt prescribe branded drugs as the patients cant always get the medication,then patient returns,he has to write another Rx and he's annoyed,focused dr on BWC,commercial and PA for caresource patients-asked dr for commitmt
PPLPMDL0020000001	Independence	OH	44131	3/21/2012	I asked Dr She said that some of the patients she has put on Butrans have discontinued due to "not feeling well" on it. She went on to say that she thinks she only has a couple of patients who have remained on it. I asked what she does if someone says it is not working when they try it. She said she would titrate & asked if the maximum was 20mcg. I told her this is correct. I asked if she allows patients to take supplemental analgesia with Butrans & she said she does. Discussed appropriate patient type & range & discussed OxyContin as an option for appropriate patients beyond Butrans range. She said she does have some patients on OxyContin & finds it to be effective for the right patients. Discussed importance of appropriate patient selection. She said she finds that most patients with legitimate pain have some sort of osteoarthritis. I asked if she has used Butrans on any of those patients. She said most have Medicare, so it is difficult to get for those patients. I agreed that BWC & commercial insurance plans would be where patients would have access to Butrans most easily. Reviewed details & eligibility requirements with Butrans trial/savings program & asked her to give cards to appropriate patients with Butrans prescriptions. She agreed. I asked her to continue to prescribe Butrans & OxyContin for patients where
PPLPMDL0020000001					

	Brooklyn	OH	44144	3/21/2012	Spoke with pharmacy manager, Dave, who said he has all 3 strengths of Butrans on the shelf but that he only has one or maybe two people on it regularly. Reviewed appropriate patient type & discussed dosing, titration, & ability for patients to take supplemental analgesia if necessary. I asked Dave if he fills a lot of prescriptions for short-acting around-the-clock opioids. He said he does. Discussed Butrans appropriate patient range. I reminded him that he has told me that he does not fill a lot of OxyContin scripts & asked if he fills a lot of scripts for Percocet around-the-clock. He said he does. Let him know this is a patient type I am talking to doctors about & suggesting OxyContin may be an option for some of them if appropriate, since OxyContin is a q12h dose of oxycodone. He said this makes sense. He said one reason he may not see a lot of OxyContin activity is probably because he really does not keep it stocked. He said when a script does come over, he orders it, but many times patients do not want to wait for it to come in, so they fill their prescriptions elsewhere. Discussed 7 tablet
PPLPMDL0020000001	Cleveland Heights	OH	44118	3/21/2012	Doc said he just wrote a script for oxycotin yesterday. He said the patient was previously on percocet. He did not recall the dose. I explained the range of appropriate patients from moderate to severe. Also discussed the coverage and savings cards. I reviewed the key selling messages of butrans. Doc said he wants to write it but he needs to remember it. I reminded him of the positioning of butrans. He said he might prescribe tramadol as high as 50mg 4x/day. I showed him the starting dose of 5mgc per the initiation tool. He asked what types of pain butrans should be used for. I explained that as long as the patient meets the indication and the pain is chronic they may be appropriate. He asked if he could write it in the hospitals. I told him that he can write it but the hospital may have to order it. He asked about cost. I explained the commercial coverage, caresource, and savings cards. He said he has to remember to try it.
PPLPMDL0020000001	Parma	OH	44134	3/21/2012	Dr Hernandez said he is still starting patients on OxyContin & is still getting good results. He said it is usually coming down to insurance coverage, most of which he sees BWC. He said starting in May BWC will no longer pay for Vicodin. I asked if he would prescribe Butrans for those patients, where appropriate. He agreed. I asked if Butrans is generally an easy "sell" to his patients who were taking short-acting opioids around-the-clock. He said this can be a more difficult patient type to start on Butrans because those patients are generally used to taking pills & therefore that is there preference. He said that because of what BWC is going to be doing, these patients are going to have to just realize that they can either try Butrans or pay out-of-pocket for their medication since, as he told me again, he is not going to be prescribing morphine for those patients as BWC dictates. I asked again if Butrans would be his choice for these patients if they are appropriate. He said it will be for sure. Discussed OxyContin as a q12h dose of oxycodone for appropriate patients. He said again that BWC coverage has been an issue for OxyContin & therefore those patients are also getting Butrans.
PPLPMDL0020000001	Cleveland	OH	44113	3/21/2012	asked dr if he's considering Butrans as an option after tramadol for the chronic pain patients he's keeping in his practice and managing? dr said yes he has a few patients he would like to start on Butrans that he'll be seeing next month.showed emma,patient profile,asked dr if he see's patients like her? dr said yes.i told dr patients like this is where Butrans could be an option,dr said ok he will do that.focused dr on BWC and commercial insurance and briefly discussed PA requirements for Caresource.
PPLPMDL0020000001	Akron	OH	44333	3/21/2012	Asked dr if she has initiated Butrans on a new patient since the lunch appointment. Dr said she has not and has not used any copy cards. She is continuing to think of Butrans when she visits with patients. Reminded doctor about Butrans being 7 days and CII. Gave updated managed care matrices for Butrans and OxyContin.
PPLPMDL0020000001	Mayfield Heights	OH	44124	3/21/2012	Doc came out and said that she just thought about butrans yesterday. She had a patient that was on tramadol that did not do well but she did not remember enough about how to prescribe butrans. I reviewed the starting doses and showed her the sliding tool. She thought it was simple enough. I reminded her that it is once a week dosing because she said "once a day". I reviewed the covered plans and the savings cards. Also discussed the oxycotin patient type and the preferred coverage with CCRX and silverscript. She said she will try to use butrans.
PPLPMDL0020000001	Cleveland	OH	44113	3/21/2012	dr said she's not started anyone on Butrans yet because she only has 2 patients taking vicodin and a handful of patients taking tramadol for chronic pain.i asked dr if there was any clinical data she needed that perhaps i didnt provide in past? dr said no,she's comfortable with the science and likes that its a once weekly pain patch but she doesnt have any patients in mind at the moment that she could start on Butrans.i showed dr the patient profiles,emma and william and asked dr if she's treating patients like this? dr said yes.i asked if Butrans would be an option for them? dr said she might consider it,depending on the patients willingness to try a patch and if insurance pays for Butrans we talked about commercial insurance patients using initial trial offer cards and i asked dr if she could start 2 patients on Butrans over the next 2 weeks,that look like Emma and William? dr said she will see who comes into her office and if appropriate she will start them on Butrans.dr asked if we had any studies to leave with her about Butrans clinica trials? i left Journal of Pain reprint for dr
PPLPMDL0020000001	Cleveland	OH	44109	3/21/2012	dr said he has a female patient on Butrans,been doing well and has gotten pain under control but recently developed a rash under the Butrans transdermal system.dr asked me if i had any clinical advice for him to give to the patient to treat this rash? i told dr i dont have any clinical advice,showed fpi that reports of rashes did occur with Butrans,we discussed AE's with Butrans and i gave dr Purdue med services number to contact and discuss his question with them.
PPLPMDL0020000001	Westlake	OH	44145	3/21/2012	Dr said that he has been trying to find a place for Butrans but his biggest challenges has been that people don't want to try a patch and for older patients it is too expensive. I reviewed that commercial patients can use the trial so they can try it with no or little out of pocket. He said that he is trying to find patients and I asked him to look for commercial insurance who are taking tramadol or vicodin around the clock. He agreed.
PPLPMDL0020000001	Cleveland Hts	OH	44118	3/21/2012	Quick call....i showed doc the butrans demo and explained that this is what the 5mgc starting dose looks like and the appropriate dose for patients coming off of NSAIDs or other non-narcotics. I reminded him that he said he would also prescribe butrans for these type patients. He said that's right and that he might write it after celebrex. I reminded him of the trial month.
PPLPMDL0020000001	Mayfield Heights	OH	44124	3/21/2012	Spoke to tech, Jenise and Warren, Rx, briefly about the movement of butrans. He said that it has been slow. He saw one script last week. The customer did not have a savings card. I explained the eligibility, trial offer and the \$40 potential savings. Provided initiation guide and cards.
PPLPMDL0020000001	Cleveland	OH	44114	3/21/2012	dr said she's starting more patients on Butrans since the dinner program with dr moufawad and is thinking to place Butrans right after tramadol instead of waiting for patients to be maxed on vicodin.i told dr that was great she is thinking differently and starting a few patients after tramadol.i asked dr if she will have more patients this week that she can start on Butrans? dr said yes she will,focused dr on BWC patients
PPLPMDL0020000001	Cleveland	OH	44106	3/21/2012	asked dr how Butrans is fitting into his practice? dr said he's not started anyone on Butrans recently because there's so much medical here at main campus and Butrans wasn't covered.we discussed PA for Caresource and asked dr if he would be willing to start a couple more patients on Butrans knowing this PA now? dr said yes he will consider it.showed patient profile william,asked dr if he see's patients like this? dr said yes.dr said he knows where Butrans fits in and will start a couple patients.focused dr on commercial insurance and caresource patients
PPLPMDL0020000001	Mayfield Heights	OH	44124	3/21/2012	Window call....Office was packed. Only had time to remind doc about the butrans and oxycotin patient types. Provided formulary grids for both and initiation guides. Nothing learned.
PPLPMDL0020000001	Cleveland	OH	44114	3/21/2012	talked to dr about his patients like william,patient profile,taking hydrocodone every day for their chronic pain,not controlled and considering Butrans as the next step in therapy.dr said he's focused on percocet patients but will consider some hydrocodone patients.showed dr OxyContin conversion guide,we discussed hydrocodone and oxycodone potency and i asked dr if he would consider the hydrocodone patients like william,after our discussion on potency? dr said yes he will.i asked dr for his commitment to start more patients this week,dr committed to do this.
PPLPMDL0020000001	Cleveland	OH	44143	3/21/2012	i showed doc the butrans demo and reminded him that butrans is a once weekly CII narcotic and an alternative to going to vicodin ATC. He said does not have patients take vicodin ATC , just as they need it. I explained that butrans can also be used as a first line opioid after NSAIDs or after tramadol. I asked if he sees any merit to butrans for any of his patients. He said maybe, he'll think about it.<font color=blue><b>CHUDAKOB's query on 03/28/2012</b></font><b>The first question sounds like it might be how, or if he is treating patients with persistence pain.<font color=green><b>SIMERTOC's response on 04/10/2012</b></font>i agree.<font color=blue><b>CHUDAKOB added notes on 04/13/2012</b></font>Good. & hope it works.
PPLPMDL0020000001	Cleveland	OH	44114	3/21/2012	showed John OxyContin conversion guide,we discussed potency of oxycodone and hydrocodone,i asked John if he would consider starting patients like william,patient profile,on Butrans? John said yes he would consider that but he's been focused on percocet patients.i asked John if there are a couple patients coming in this week that look like william,where Butrans could be an option? John said yes he's sure there will be patients like william,patient profile,focused John on BWC patients.
PPLPMDL0020000001	Cleveland	OH	44106	3/21/2012	worked apm dept
PPLPMDL0020000001	Akron	OH	44320	3/21/2012	Introduced Butrans to dr by giving key selling messages. Asked dr if she treats patients with cronic pain? Dr said she does and has read about Butrans and said that she probably cant use it because she has approximately 80% Medicaid and no BWC. Reviewed dosing and titration guide and trial offers and copy cards. Gave OxyContin indication, CII, Q12h dosing. Dr said she typically refers out to pain mgt if a patient is taking more than 100 pills/month. Dr did admit to using tramadol and vicoden but monitors closely. Agreed to use OxyContin where appropriate.
PPLPMDL0020000001	Munroe Falls	OH	44262	3/21/2012	Dr did know about Butrans or had forgotten. Gave Butrans Key selling messages and reviewed dosing and titration of Butrans. Dr does use Cox2's, tramadol and some vicoden. Dr understood the place for Butrans and has patients that would fit the profile. Dr has used OxyContin but rarely. Refers out often for a lot of her patients. Information provided about Butrans and OxyContin savings programs.
PPLPMDL0020000001	Cleveland	OH	44106	3/21/2012	dr said he started a couple patients last week on Butrans,asked dr why he chose Butrans? dr said patients were taking percocet,not controlled,asking for more pills so he wanted to try Butrans because he wasnt giving more percocet.i asked dr what dosage strength they started on? dr said 1 patient was 5mgc and other patient was 10mgc,we discussed titration and giving patients the Butrans patient info booklets and dr said Lisa,MA,gives booklets to patients and handles all insurance issues,we discussed commercial insurance patients using initial trial offer cards and PA for Caresource,dr said that PA sounds easier and will help him start more patients on Butrans.i asked dr for his commitment to start a couple more patients today,dr said he will do that.<font color=blue><b>CHUDAKOB's query on 03/29/2012</b></font><b>The patient started on the Sug:1) What dose of Percocet were they on? &This could be a case of exactly what we discussed at the district meeting, that is, starting the patient too low. &1) Did you discuss the importance of supplemental?<font color=green><b>BROOKAM's response on 04/01/2012</b></font><b>yes we discussed dosage ranges for patients starting on 5mgc or 10mgc - dr started patients on appropriate dose of Butrans.2.) yes we discussed importance of supplemental analgesiaethatn you<font color=blue><b>CHUDAKOB added notes on 04/04/2012</b></font>OK. &Thanks!
PPLPMDL0020000001	akron	OH	44304	3/21/2012	Dr thanked me for being respectful of her time when i visited las week. She wanted to know more about Butrans. Gave key selling messages and asked how she treats pain? Dr said that she does use tramadol and vicoden and does not like to use percocet much. She refers out at that point to a specialist. Reviewed inclusion criteria and dr said she does treat for the criteria. Discussed Butrans use in opioid naive and asked if she would use Butrans for those patients failing? Dr agreed and said that it seems kie a good place. Showed dr placebo patch which dr said it helped to see the product. Discussed trial offer and copy cards. Dr agreed to try.
PPLPMDL0020000001	Akron	OH	44320	3/21/2012	Asked Dr Bonyo if he had any SummaCare patients that are currently on short acting opioids that may be appropriate for an extended release, 7 day transdermal delivery of burenorphine? Dr agred that he would give a try on a commercial patient. Reviewed key selling messages and asked if he also had patients naive to opioids that may be failing NSAIDs or celebrex? Dr said he does and that he can look for those patients as well. Asked for the business this week for Butrans!
PPLPMDL0020000001	Lakewood	OH	44107	3/21/2012	Re-sent email to Karen Vann with webinar invite for upcoming presentation of the ASAP modules "Scope of the Problem" and "Recognition". &
PPLPMDL0020000001	Akron	OH	44304	3/21/2012	spoke to pharmacist about Butrans and OxyContin. Provided key selling messages for both. pharmacy does stock OxyContin but not Butrans to his knowledge. Discussed copy cards for Butrans and OxyContin.
PPLPMDL0020000001	Cleveland	OH	44113	3/21/2012	dr said she knows Butrans is a once weekly patch for chronic pain but she doesnt have anyone that's appropriate.i asked dr if she's treating patients like emma,showed patient profile? dr said yes but she only has a few patients taking tramadol,dr said most of her patients are diabetic,arthritis,womens health,cholesterol and blood pressure issues,not a lot of chronic pain.dr said for the couple patients that do have chronic pain they are controlled on tramadol.i asked dr what does she do when those patients tell her their tramadol isnt controlling their pain and they need something else? dr said she doesnt prescribe vicodin or percocet so she would tell them all they can have is tramadol or go to pain management.i asked dr if she would ever consider a long-acting opioid appropriate after tramadol? dr said probably not.i asked dr why not? dr said she worries that a long-telling opioid means long side effects and is more maintenance with that patient than what she wants to deal with.i asked dr if felt comfortable with Butrans,clinically? dr said she felt ok with it but probably would need to read/see more studies in Butrans and patients.gave dr Journal of Pain study to review and dr said she will read and i can follow-up.dr said again at this time i dont have any patients that are appropriate for Butrans.we discussed BWC,Commercial insurance coverage and PA requirements for Caresource patients to try Butrans.dr said she will keep in mind if someone's ever appropriate for Butrans.

	Bedford	OH	44146	3/21/2012	Dr Moufawad said he has been writing more Butrans lately. He went on to say that last week, one day alone he wrote 4-5 prescriptions for it. I asked him to tell me about the patient type he is writing for. He said he is using it for patients who are on less than 80mg equivalent of morphine. He said he no longer will treat patients who are taking more than that amount of opioids. He said he offers patients Butrans also when a patient comes to him from their primary care physician when that primary care physician does not want to prescribe opioids or keep patients on them for an extended period of time. I told him it sounds like he is doing the right thing. He asked me to leave more patient information booklets as he has been giving them out. Dr Moufawad also said he has been prescribing more OxyContin lately because he attended a conference where they said that OxyContin abuse has not been as bad lately as Opana abuse. I told him we have no data to suggest that, that OxyContin is a CII opioid with abuse & addiction potential, & that he should be just as cautious as he always has been with it. I asked who he is prescribing it for, since he told me he is not prescribing anything for patients who are taking more than 80mg morphine equivalent. He said that is really only the case for his new patients. He said he is prescribing OxyContin for his existing patients who are on higher doses of opioids like Opana.
PPLPMDL0020000001	Uniontown	OH	44685	3/21/2012	Asked Kim if they are seeing patients come in on Butrans or OxyContin? Kim said that they have not filled a Butrans but have patients coming in on OxyContin. Asked Kim what doses of OxyContin is she filling most? They are filling 20mg, 30mg, and 40mg and does have a couple of patients on 60mg. Asked if they have seen patients from Comprehensive Pain Mgt in Green(Lababidi, Fouad)? She does not see there patients.
	Cleveland	OH	44104	3/22/2012	showed dr OxyContin visual aid,asked dr where does Butrans fit into his practice on the moderate to severe pain scale? dr said severe pain is where he would give OxyContin to patients. asked dr what he gives patients that have moderate pain? dr said probably vicodin or percocet. I asked dr at what point is a long-acting opioid appropriate? dr said he always starts with short-acting opioids to see if that controls the pain and patients can live and function, if so they will stay on their short-acting opioids for awhile. dr said if patients pain gets worse he will consider a long-acting opioid at that time. dr had to go, left OxyContin slim jim and told dr I would see him next
PPLPMDL0020000001	Cleveland	OH	44111	3/22/2012	Spoke with Dave, we reviewed the Butrans medication guide. I asked if he would let patients know about Butrans as an option, and he said he would. I reviewed that pateints can use supplemental analgesia with Butrans. We reviewed the OxyContin conversion guide and that OxyContin is an option when pateints are taking hydrocodone around the clock.
PPLPMDL0020000001	Westlake	OH	44145	3/22/2012	I asked Dr if there was anything I could help with regarding his frustration with finding the appropriate patients. He said he is taking everyone off of OxyContin and decreasing the doses of short acting as well, he is sending half of his patients to pain management. I asked if he thought that Butrans still might have a place, he said he didn't know. I reviewed that Butrans could be an option instead of vicodin around the clock. I asked if he would try a few patients and see how they do and discussed commercial, BWC and Caresource have access to Butrans.
PPLPMDL0020000001	Akron	OH	44312	3/22/2012	Asked Dr if he uses NSAIDs, Cox2's or tramadol to treat patient in pain. aDr said he does use all those meds as well as vicoden as needed. aProvided dr with Butrans key selling messages and reviewed initiation and titration guide. aGave specific conditions from inclusion criteria for appropriate patient types. aDr liked that it is a CII product and he may give it a try. aDr asked about insurance coverage. aasked dr which plans and he said medical mutual Anthem, Medco. aGave managed care matrix and explained trial offer and copy cards.
PPLPMDL0020000001	Cleveland	OH	44103	3/22/2012	showed OxyContin visual aid, we discussed appropriate patients, I asked dr where she feels OxyContin is most appropriate on pain scale of moderate to severe. dr said severe pain. I asked dr what does she give patients for moderate pain? dr said vicodin or percocet. I asked dr at what point is it appropriate to convert to long-acting opioids? dr said if patients are taking 2 percocet a day and thats not controlling pain and they want more pills, she will consider a long-acting opioid. dr said the earlier you start patients on a long-acting opioid the better because she likes and prefers long-acting medications. we talked about Q12H dosing of OxyContin, 7 tablet strengths and I asked dr if she will start a couple new OxyContin patients this week? dr said yes she will do that, focused dr on medicare-JHC/AARP we discussed dr starting these patients and showed formulary grid.
PPLPMDL0020000001	Parma	OH	44129	3/22/2012	Quick call- Positioned Butrans for patients taking 3-4 tramadol or Vicodin per day who are not well-controlled & OxyContin for appropriate patients taking Percocet around-the-clock as a q12h dose of oxycodone. He said he just hasn't had main lately.
PPLPMDL0020000001	Sagamore Hills	OH	44067	3/22/2012	Reviewed Butrans key messages & presented initiation guide. Discussed appropriate patient type for Butrans, focusing on those who start on 3 tramadol per day & who return asking for an increase in dose because their pain is not being well-controlled. Also discussed Butrans as a once weekly CII opioid & reminded her Butrans has abuse/addiction potential like other opioids. I asked if she, as a nurse practitioner, thought there was a place for Butrans in her practice. She said she does prescribe pain medications more than she thought she would. She asked about insurance coverage. Reviewed formulary grid & trial/savings program. I asked if she would try Butrans for a few appropriate patients who fit the description we discussed today & she agreed. Penny said she will soon have authority to prescribe CII medications such as OxyContin. I asked her thoughts on that. She said there were both good & bad parts to it but she likes the freedom to prescribe more medications.
PPLPMDL0020000001	Sagamore Hills	OH	44067	3/22/2012	Dr Lenox said he found the speaker program to be helpful to him. He went on to say that while he has not prescribed yet, he does feel that he will be ready to when the appropriate patient type presents. Discussed patients taking 3-4 tramadol or Vicodin per day who are not well-controlled. Reviewed managed care & trial/savings program. Also discussed OxyContin as a q12h dose of oxycodone for appropriate patients.
PPLPMDL0020000001	Akron	OH	44308	3/22/2012	MBK presented the ASAP modules 1 & 3 to the Case Managers. There were 25 participants in the Akron office including Carla (Director) and Maurine (Manager). I then distributed the Med Ed catalog and providing relief brochure after the program.
PPLPMDL0020000001	Cleveland	OH	44195	3/22/2012	worked neurology, apm, rheumatology dept's - had to leave info for all HCP's couldn't see anyone-left Butrans initiation guide, fpi, formulary grid, business card for each MD, NP and PA in departments
PPLPMDL0020000001	Cleveland	OH	44121	3/22/2012	Window call....I discussed the oxycontin patient type and the preferred covered on most plans, showed formulary grid and explained that these plans should not require a PA. aAlso offered new savings cards to replace the cards that will expire the end of the month.
PPLPMDL0020000001	Westlake	OH	44145	3/22/2012	Dr told me he still needs to give Butrans a try. I agreed. I asked how he will know how it works for his patients until he tries it. I showed Emma patient profile and asked if he could try Butrans on just a few patients who are taking tramadol around the clock instead of going to vicodin. He agreed. We discussed that OxyContin is an option for his patients who are already taking vicodin around the clock and need to increase and he said he does still start new patients on OxyContin.
PPLPMDL0020000001	Westlake	OH	44145	3/22/2012	Quick call, I asked Dr if he would give out the trial cards for Butrans today and and let the patients see how they do. He agreed and said that he is still starting new patients, he just does not like to write any opioids over the long term if he can help it, he wants them to be on Butrans or any other long acting for a while until they can find other solutions to their chronic pain. He feels the same way about using short acting or OxyContin for long periods of time.
PPLPMDL0020000001	Cleveland	OH	44109	3/22/2012	worked family medicine, internal medicine, oncology, pm&r and rheumatology-left all doctors OxyContin fpi, conversion guide, formulary grids and my business card. also left Butrans patient info booklet, initiation guide, formulary grid and business card
PPLPMDL0020000001	Cleveland	OH	44103	3/22/2012	asked dr if he's seen any patients this week taking 4 percocet, showed OxyContin conversion guide? dr said yes he has a lot of patients taking percocet. I asked if he's considered OxyContin for them this week? dr said for some yes others no. I asked dr how he decides if patients get more percocet or start on OxyContin? dr said depends on patients MRI, pathology, if pain is controlled or worse, dr said if pain is worse he'll start patients on long-acting opioid. I asked dr if he'll start a couple new patients on OxyContin today and tomorrow, focusing on AARP and CCRX patients? dr said he will. showed formulary grids
PPLPMDL0020000001	Cleveland	OH	44127	3/22/2012	showed dr Butrans initiation guide, asked dr if he has patients with chronic pain that meet Butrans indication, taking tylenol with codeine? dr said yes he has a lot of chronic pain patients like this. dr said he likes idea of patch and once weekly dosing but he has all medicaid and medicare so he didnt think Butrans was covered. I told dr about PA for Caresource and asked if that would be feasible to do? dr said yes that was easy so he would think of some patients to try Butrans on and see what happens. I asked dr if he will start 2 patients within the next week, dr committed to do this.
PPLPMDL0020000001	Akron	OH	44312	3/22/2012	gave dr Butrans initiation and titration guide and FPI at window. aKey messages....CIII, indication. aNothing else learned.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/22/2012	Asked dr if she treats patients for pain? aDr said she does but will refer out when patients are beyond her scope. aAdmitted not liking prescribing opioids. aAsked Dr if she prescribes NSAIDs, Cox2's, or short acting products for pain. aDr said that she prescribes them all. aDiscussed Butrans key selling messages. aShowed placebo patch and asked if she treats patients with nerve root entrapment or osteoarthritis? aDr admitted to treating all inclusion criteria for Butrans. aDiscussed trial offer cards and showed initiation and titration guide. aDiscussed OxyContin key selling messages and asked if she had clinical experience with it. aDr does use OxyContin but not very often. aWanted to keep dosing and titration guide and said that she likes the Q12h dosing and the addition of intermediate doses. aDr agreed to use Butrans where we discussed.
PPLPMDL0020000001	Sagamore Hills	OH	44067	3/22/2012	I asked Dr Sevier what types of patients he typically prescribes OxyContin for- does he reserve it for severe pain. He said it is often for severe pain patients. I asked what generally triggers him to prescribe OxyContin. He said if a patient is taking or needs to take more than 4 doses of short-acting opioids per day. Showed conversion/titration guide. He also said he recently prescribed Butrans for a patient. I asked him to tell me more about him/her. He said she is an older woman who has osteoarthritis. He added that she had tried Vicodin & tramadol but he thought Butrans might be a good option for her. I agreed that she sounded like a good patient clinically & reviewed managed care & the likelihood that he will have to do a prior authorization for Butrans on Medicare. He said he would do it. I asked if he has patients who are perhaps 50-60 years old with similar painful conditions who are taking short-acting opioids around-the-clock. He said he does. I asked if he would try Butrans for some of them to gain clinical experience without managed care hassle. He agreed.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/22/2012	Asked dr if he had patients that he treats for osteoarthritis or nerve root entrapment? aDr said he does see all conditions that cause some pain. aReviewed inclusion criteria for Butrans and gave key selling messages. aAsked Dr to write Butrans for patients with back conditions that may be naive to opioids or on tramadol and failing. aDr said ok. aNo further information.
PPLPMDL0020000001	Akron	OH	44310	3/22/2012	Asked Dr Blaser if she has hear about Butrans for moderate to severe chronic pain? aDr said she does not remember. aGave quick explanation with initiation and titration guide. aKey selling messages. aNo further information.
PPLPMDL0020000001	Cleveland	OH	44195	3/22/2012	showed Anne the Butrans patient profiles, emma and william, asked if she's treating patients like this? Anne said yes all the time, asked Anne what would be the next step, Anne said she would either go to another short-acting opioid or consider Butrans. Anne said dr stanton-hicks, who she works with in pain management, has a few patients on Butrans and she helped get them started. showed Anne Butrans initiation guide, we discussed initiation and titration and I asked Anne if she's giving patient info booklets to patients? Anne said yes. I asked Anne if she'll see any patients like emma and william, today or tomorrow, that she can start on Butrans? Anne said she probably will see patients like this and she will consider Butrans. we discussed BWC, commercial insurance coverage and PA for Caresource
PPLPMDL0020000001	Independence	OH	44131	3/22/2012	Followed-up with Dr Pai to ensure his patients have been able to get OxyContin since he told me pharmacy stocking has been an issue. He said it seems to be better. Showed new conversion/titration guide & directed him to oxycodone conversion page. I asked him to consider switching some patients taking IR oxycodone to a q12h dose of OxyContin if appropriate. Dr Pai said his Butrans patient is still doing well.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/22/2012	Asked Dr if he had ever used Butrans to treat moderate to severe pain in the past. aDr said he had not but knows about Buprenorphine for treatment of addiction. aUsed FPI to explain Butrans indication and key selling messages. aProvided initiation and titration guide. aNothing else learned.
PPLPMDL0020000001	Lakewood	OH	44107	3/22/2012	Presented a webinar (via web and teleconference) to Case Managers and Nurses with Buckeye Health. <hr>Presented the "Scope of the Problem" and "Recognition" modules from the ASAP series via webinar. aAttendees included Case Managers and Nurses, and sites that participated included Cleveland, Toledo and Akron. Attendees were provided with a copy of the handout (was emailed as a PDF file, 3 slides per page). a
PPLPMDL0020000001	Olmsted Falls	OH	44138	3/22/2012	Spoke with Matt, he said he thinks they still have on patient taking Butrans. We discussed the medication guide and I asked if he would let others know about Butrans as an option when appropriate. He said he would. We discussed the initiation pull out tool and the starting doses. I reviewed the conversion guide for OxyContin, and that patients taking hydrocodone or oxycodone around the clock may be appropriate for a Q12hr option.
PPLPMDL0020000001	Akron	OH	44312	3/22/2012	Pharmacist Gary said that they have a patient on Butrans and he believed it was 20mcg. aHe could not remember prescriber. aGave Butrans Key selling messages and reviewed pharmacy sell sheet with e-voucher. aRite aid is working on a system for e-voucher but currently does not have it. aPharmacy does not stock OxyContin because of too many problems and risk with stocking. aHe would not elaborate.
PPLPMDL0020000001	Berea	OH	44017	3/22/2012	I showed the patient profiles and asked which of these patients does he think he would prescribe Butrans for. He said he could see trying it for any of them if they are willing to try a patch. He asked about managed care and we discussed that he has many commercial insurance patients. I asked if he would give these patients a month trial of Butrans and he said that he will keep in mind as an option. I asked if he still starts new patients on OxyContin and he said he does. He said that he tries to send patients off to pain management but it he is frustrated that the pain docs just want to do injections and will not managed the patients maedicaitons. He feels comfortable using OxyContin when it is the right patient and they are compliant.
PPLPMDL0020000001					

PPLPMDL0020000001	Akron	OH	44310	3/22/2012	Asked Dr if he has seen any more patients that fit for Butrans. âDr said he has not had any patients for Butrans lately. âReviewed key selling messages and asked if he has patients that are failing Cox2's or on tramadol ready for another dosing adjustment? âDr said he does have patients that fit that mold and agreed that Butrans is a good medicine. âAsked dr to "try" Butrans on the next patient that is on commercial insurance on a cox2 or tramadol. âReminded that Butrans can be used for opioid naive patients.
PPLPMDL0020000001	Macedonia	OH	44056	3/23/2012	Spoke with Nancy, pharmacist, who said she has not seen much activity with Butrans but pointed out that they do have it in stock. Discussed new Butrans savings & trial programs & reviewed eligibility requirements. Also reviewed appropriate patient type & reminded her to give appropriate information booklets to patients she identifies as potential Butrans candidates based on their patient type. Discussed OxyContin savings cards & usage. I asked if she sees new prescriptions for OxyContin or just continuing scripts. She said everything she sees is continuing.
PPLPMDL0020000001	Strongsville	OH	44136	3/23/2012	Spoke with Jim, pharmacy manager, who said he just dispensed Butrans this week. He went on to say that the patient had been on Opana, then Kadian, & then was switched to Butrans. I asked what dose. He said 10mcg. I asked who wrote the prescription. He said it was Dr Samuel. Reviewed appropriate patient type/range, including OxyContin as an option for appropriate patients beyond the Butrans range. Also discussed titration after 3 days to a maximum 20mcg in case the patient was not adequately controlled on the 10mcg. Jim said the patient had a savings card from Dr Samuel for Butrans. Discussed OxyContin as a q12h dose of oxycodone. Also reviewed savings cards & gave him a new package.
PPLPMDL0020000001	Lyndhurst	OH	44124	3/23/2012	I showed HCP the butrans demo and explained its what the 5mcg looks like. âI also showed her the pull out initiation tool which she thinks is simple to use/remember. âI reminded her that when she writes butrans she can write it with refills as it is a CIII. âShe asked how many refills are allowed. âI told her that patients can get up to 5 fills for CIII.
PPLPMDL0020000001	Akron	OH	44319	3/23/2012	Asked pharmacist if they would hand out Butrans patient brochures where appropriate. âBrian agreed to take information but has not seen any Butrans come through recently. âHe said they see a lot of vicoden and percocet filled in the pharmacy.
PPLPMDL0020000001	Cleveland	OH	44109	3/23/2012	talked to Nasr, Pharmacist and Adam, Pharmacy Tech, about Butrans patient info booklets and are they discussing application/rotation info with patients? Nasr said no they just hand booklets to patients with Butrans. I asked Nasr and Adam to show application/rotation info because patients need to know the approved and proper application sites for Butrans and then discuss side effects with patients. I asked Nasr and Adam if they would do that moving forward? both agreed. I asked if they would give patient info booklets to patients they feel are appropriate for Butrans so patients could talk to their HCP's about Butrans? Nasr said yes they will do that. we discussed formulary coverage for Butrans. confirmed OxyContin stocking and we discussed formulary coverage nothing more learned on OxyContin
PPLPMDL0020000001	Lyndhurst	OH	44121	3/23/2012	Spoke to Paul, floating Rx, about the movement of butrans and oxycontin. âhe is not familiar with this store but he sees a couple of butrans scripts per month and does not recall any issues at the point of purchase. âI explained the positioning, dosing, and the savings cards availability. âHe was no familiar with the relay health program. âHe said he sees oxycontin scripts everywhere he goes. âI reviewed the conversion guide and he likes having it as a reference to know what comparable doses are.
PPLPMDL0020000001	Cleveland	OH	44109	3/23/2012	I asked dr how his patients are doing on Butrans? dr said great he's happy with Butrans and the clinical results he's seeing and patients are happy. I asked dr to explain what he's seeing from a clinical result perspective? dr said patients pain levels are going down from 8-10 and they are just feeling better. I asked dr for his commitment to start more patients on Butrans today-next week, dr agreed
PPLPMDL0020000001	Cleveland	OH	44109	3/23/2012	showed dr oxycontin visual aid, asked dr where he considers OxyContin appropriate on pain scale of moderate to severe. dr said severe pain. asked dr what he gives patients to treat moderate pain? dr said vicodin or percocet, a short-acting opioid. I asked dr at what point is a long-acting opioid appropriate? dr said when patients are maxed on short-acting opioids and pain is persisting then he'll start a long-acting opioid. dr had to go couldnt talk more. I told dr he had option of OxyContin for these patients, focused on Silverscript Med D patients and gave grid, dr said ok he will keep it in mind.
PPLPMDL0020000001	Akron	OH	44307	3/23/2012	Provided OxyContin copy cards from physician request
PPLPMDL0020000001	Cleveland	OH	44109	3/23/2012	worked pm&r - see call notes on HCP's in this dept
PPLPMDL0020000001	Cleveland	OH	44109	3/23/2012	left Butrans fpi, initiation guide, patient info booklet, formulary grid and business card for all doctors in dept. left OxyContin fpi, conversion guide and formulary grids-medicare part d for all hcp's-dr campbell, dr baker, dr harrington, dr dhilon and dr geha. â
PPLPMDL0020000001	Barberton	OH	44203	3/23/2012	Asked dr if she thinks she has patients that would be appropriate for initiating Butrans. âDr said that she does have a few patients that have low back or spinal conditions on vicoden or tramadol that could benefit from a 7 day transdermal patch. âShowed placebo patch and discussed application sites. âReviewed opioid experienced clinical reprint and agreed with inclusion criteria and outcomes. âDr said she also has some patients on OxyContin and are doing well. âMost patients are under 40mg. âAgreed to continue using more OxyContin and to initiate patients on Butrans.
PPLPMDL0020000001	Lyndhurst	OH	44124	3/23/2012	I asked doc about the patient that recently came in taking hydrocodone and was prescribed butrans by the doc. âDoc sid that the patient has not been back yet but she has not heard anything either. âI asked if she is writing butrans with refills as it is a CIII. âShe said she usually has patients come back after the first month first then she will write refills. âShe asked about the occurrence of skin rashes with butrans after being treated for several months (see note on her NP, Karen Steffey). âI referred to the FPI and explained that such rashes can occur. âThe patient decided to stay on the medication. â
PPLPMDL0020000001	Lyndhurst	OH	44124	3/23/2012	HCP stated that a patient that had been on butrans for about 6 mos came in yesterday complaining of skin rashes at the application sites. âI asked if the patient had been rotating the patch weekly and not shaving any of the sites. âShe confirmed that he was rotating and not shaving. âI referred to the FPI and that it is possible and had occurred in clinical trials. âShe said the patient is happy with butrans otherwise and decided to continue to give
PPLPMDL0020000001	Akron	OH	44319	3/23/2012	Asked doctor if he would take the time to read study for opioid experienced patients and dr agreed. âAsked if we could discuss on my next visit. âNothing else learned.
PPLPMDL0020000001	Euclid	OH	44132	3/23/2012	I discussed the key selling messages with doc and NP, Kristin Biddell. âDoc asked about the MOA of action. âI showed her the CSA and explained that butrans is a partial agonist. âShe asked if Butrans is as addictive as vicodin and the others. âI explained that there is no head to head data but butrans is still a scheduled narcotic with risks similar to other narcotics. They both agreed that they have a lot of patients that complain of chronic pain. âShe mostly practices homeopathy but she needs to treat some pain. âI reviewed the coverage and savings cards program. âShe said she would think about it. âI reminded her of the positioning vs. Oxycontin.
PPLPMDL0020000001	Independence	OH	44131	3/23/2012	Quick call- Caught Dr Rob briefly between patients. I handed him new OxyContin conversion/titration guide, opened to pg 10. Showed him that patients taking 5mg Percocet q6h could take the same amount of oxycodone by taking 10mg OxyContin q12h. He just thanked me & walked into a room.
PPLPMDL0020000001	Euclid	OH	44132	3/23/2012	I introduced HCP to Butrans, discussing the positioning and the key selling messages. âShe said they treat a lot of chronic pain and that butrans sounds like a good alternative. âShe asked about application - how to apply, rotate, adhesion. âI explained same. âShe asked about the side effects compared to other opioids. âI told her no head to head data but showed her the AE profile. âShe said they would normally refer patients to pain mgmt but it takes so long for patients to get into see a pain doc. âI explained the coverage and savings cards. âShe said that she likes the idea of butrans and that she might prescribe as it is a CIII. âReminded her that CIII means that it can be called in or refilled.
PPLPMDL0020000001	Cleveland	OH	44114	3/23/2012	talked to Joel, Pharmacist, about where he see's Butrans fitting into the treatment plan for patients that come here. showed Joel Butrans visual aid, 5 core selling messages- Joel said the chronic pain patients here just want their pills and never really ask about another option. Joel said doctors will have to be the one's to start patients on Butrans and decrease the amount of pills prescribed. I asked Joel if he would recommend Butrans to patients. giving patient info booklets, if appropriate where patients are interested in talking to their HCP's about a different option? Joel said he would do that. confirmed OxyContin stocking and briefly discussed formulary coverage.
PPLPMDL0020000001	Brooklyn	OH	44144	3/23/2012	Caught Dr Detwiler in the hallway & attempted to stop him with OxyContin conversion guide which I had opened to pg 10. Pointed out that patients taking Percocet 5mg q6h could take OxyContin 10mg q12h. He said he didn't have time to stop & talk then walked into a room.
PPLPMDL0020000001	Barberton	OH	44203	3/23/2012	Bobby(pharmacist) said that they have filled prescriptions for Butrans recently. âWas told that Dr K. Patel prescribed 5mcg recently. âDiscussed key selling messages for Butrans and OxyContin. âpharmacy is stocking select doses of OxyContin but was told that patients say they dont like it as much after the reformulation. âPharmacist said that the manufacturer of Opana stopped making the product due to a reformulation. âHe said it is difficult to find a pharmacy with Opana in stock. Discussed rebate programs for both products.
PPLPMDL0020000001	Akron	OH	44310	3/23/2012	Gave key selling messages for OxyContin and Butrans. âAsked Dr and Rhonda(NP) about where in their practice are they using OxyContin. âDr said he is trying not to use it as much and is referring out. âAsked at what point do you refer out. âDr said he likes to refer out when he knows patients are taking more meds than needed. âReviewed dosing and conversion guide for OxyContin. âGave Butrans Key selling messages and asked for him to use for patients on commercial insurance on tramadol or vicoden whom are failing. âReviewed trial offer and copy cards for both products. âDr agreed to use OxyContin where appropriate.
PPLPMDL0020000001	Cleveland	OH	44109	3/23/2012	showed william, patient profile, to dr and asked what are patients saying that prompts him to make a medication adjustment? dr said he looks at patients overall functioning, mood and their general facial expressions and if they look good but say their pain is a 10 he doesnt give more medication. dr said if the pain is worse and facial expressions are present, he will give more medication or something different. I asked dr if he would consider Butrans for patients like william, patient profile, when a medication adjustment is necessary? dr said yes. dr said his challenge is that not every patient wants to wear a patch for chronic pain, they like their pills. I told dr he should be giving some supplemental analgesia initially when patients start Butrans and after the patient is on appropriate dose of Butrans, he can decide how much supplemental analgesia he wants to give patients. dr said ok. I asked dr if that will help when talking to patients? dr said yes it will. I asked dr if he's giving patients the Butrans patient info booklet to educate them? dr said yes he's given a few booklets to patients. dr said his other concern is insurance coverage for Butrans. dr asked about medicaid coverage? we discussed PA criteria for CareSource. I asked dr if this info will make it easier for him to prescribe Butrans? dr said yes it will. I asked dr if he can start 2 patients between today and next week on Butrans? dr said yes he will see who's coming into the office and will start more patients.
PPLPMDL0020000001	Cleveland	OH	44130	3/23/2012	Passed back Butrans clinical trial in plastic wrap to Dr Kansal. I asked if he would take the time to read through it. He said he would. Positioned once-weekly Butrans for patients not well-controlled on their short-acting opioid around-the-clock & OxyContin q12h for patients beyond the appropriate Butrans range. Dr Kansal said if he saw anyone who was willing to try something long-acting he would keep both in mind. â
PPLPMDL0020000001	Cleveland	OH	44109	3/23/2012	I talked to Mike, Pharmacist, as Rob(pharmacy mgr) is on vacation this week, we discussed Butrans stocking, they have all 3 dosage strengths in stock. I asked Mike if they are giving patient info booklets to patients getting their Butrans? Mike said no they dont have any left so he wanted more booklets. I asked Mike if patients ask any ?'s when they get Butrans? Mike said not really. I asked Mike to discuss with patients the application/rotation info, disposal, side effects, etc, in Butrans patient info booklet, Mike said he will do that. we talked about Butrans being a CII and doctors being able to give supplemental analgesia with Butrans, showed Mike Butrans FPI section 2.4-maintenance of therapy and supplemental analgesia. I asked Mike if he knew who was prescribing Butrans? Mike said he knows most patients are coming from PM&R but a few patients were from Family Medicine and Internal Medicine doctors. I asked Mike if he knew who was prescribing Butrans in those dept's? Mike said he didnt know anyone besides Dr greenwood as he's called the pharmacy to be sure they have Butrans in stock. Mike said it would be helpful to speak with Rob, pharmacy mgr, about an in-service to the pharmacy staff to educate everyone on Butrans as he didnt feel like even he had enough clinical info on Butrans. I left FPI, initiation guide and patient info booklets. Mike said to stop back next week and see Rob.
PPLPMDL0020000001	Brooklyn	OH	44144	3/23/2012	I showed Dr Miguel the Butrans initiation slide-out tool & reminded him of our discussions about patients taking tramadol or Vicodin who are not getting relief & how Butrans may be an option for them. Discussed once weekly transdermal dosing & ability for patients to take supplemental analgesia with Butrans. He looked at the slide-out tool & pointed to tramadol. He asked me if tramadol is an opioid. I told him tramadol does have mu opioid receptor activity & therefore is an opioid & carries abuse/addiction potential. He said he does not think people realize that tramadol is abusable because it is not scheduled. I agreed that all opioids, including Butrans, have abuse & addiction potential. He asked if he could keep the tool & stuck it in his pocket. I asked Dr Miguel to try Butrans for a patient like we talked about. âAlso reminded him of previous discussions we have had when we discussed OxyContin as an option for patients taking Percocet around-the-clock since they are both oxycodone.
PPLPMDL0020000001	Lakewood	OH	44107	3/26/2012	I showed Dr the managed care grid for OxyContin and Med D. I reviewed that low dose OxyContin may be a Q12hr option for patients taking short acting pain meds around the clock and that it is covered for most of his older patients on Med D. â
PPLPMDL0020000001	Parma	OH	44129	3/26/2012	Dr Taylor said she still hasn't had the opportunity to prescribe Butrans. I reminded her of our discussion regarding appropriate patients with BWC last week. She said that she is certain that she will be prescribing Butrans soon, especially once May 1st arrives. Reviewed appropriate patient type, focusing on patients taking 3 tramadol or Vicodin per day, especially if they are not getting relief from their current therapy. Also discussed OxyContin for appropriate patients beyond Butrans range, especially if they are already taking oxycodone IR around-the-clock.
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PPLPMDL0020000001	Bedford	OH	44146	3/26/2012	Quick call. Passed back OxyContin conversion/titration guide & pointed out pg 10. I asked him to prescribe OxyContin for appropriate patients who he sees this week who are taking Percocet 4 times per day. He agreed. Also positioned Butrans for appropriate patients who are not well-controlled on 3 tramadol or Vicodin per day, especially if they have BWC or commercial insurance.
	Solon	OH	44139	3/26/2012	Spoke with nurse, Julie, who said Dr Zaidi is out all week. I asked her to leave OxyContin & Butrans information for him & she agreed. I asked if they have seen an increase in referrals from primary care. She said it seems that they are seeing more BWC patients lately. Discussed BWC coverage/prior authorization for OxyContin. She said they have not had any problems getting it covered because Deborah does the prior authorizations. Julie said the patients they get from primary care tend to be on high doses of multiple opioids. She went on to say that Dr Zaidi does not allow them to stay on those high doses of their medications, which sometimes causes the patients to get angry. Discussed appropriate patient type for OxyContin & Butrans.
PPLPMDL0020000001	Beachwood	OH	44122	3/26/2012	Spoke with pharmacist, Ashley, who said they are out of Butrans savings cards already. Gave her another package & reviewed eligibility requirements. Also discussed patient information booklets & gave her 3 per her request. I asked if patients have had questions about Butrans when getting their script filled. She said not usually, but she thinks the booklets will be helpful. Discussed appropriate patient type & range, focusing on those taking short-acting opioids around-the-clock. Also reviewed OxyContin savings cards & gave her a new package.
PPLPMDL0020000001	Parma Heights	OH	44129	3/26/2012	Spoke with pharmacist, Larissa, who had requested new OxyContin savings cards because hers had expired. Gave her one package. Reviewed eligibility requirements & usage, including cash-paying patients having the ability to use the cards every 14 days if their prescription is written that way. Also discussed Butrans trial & savings program. She said she still has one strength on the shelf but has not seen a single prescription for it. Reviewed appropriate patient type.
PPLPMDL0020000001	Cleveland	OH	44127	3/26/2012	dr said she started 2 patients on Butrans and Caresource approved the PA's so she will be starting more patients on Butrans this week. I asked dr to focus on patients taking codeine that are coming in to see her and need a medication adjustment, this week and start them on Butrans. dr said she will do that, showed dr patient info booklet and asked dr to give booklets to every patient that starts on Butrans.
PPLPMDL0020000001	Akron	OH	44333	3/26/2012	Discussed with Jen (Nurse) about OxyContin Indication. Asked if dr is continuing to prescribe OxyContin. Asked if dr is writing Nucynta and Opana. Alen said that dr is prescribing a lot of OxyContin, some Nucynta but not much and is writing a good amount of Opana. Asked if Dr uses copy cards and if he would use copy cards for OxyContin. Answered cards and then discussed managed care matrix.
PPLPMDL0020000001	Akron	OH	44307	3/26/2012	Spoke to Jeff (pharmacist) about Butrans and OxyContin. Asked if they are seeing OxyContin prescriptions and Butrans. A pharmacy is NOT seeing Butrans but sees OxyContin as the number one prescribed extended-release opioid. Asked if he sees a lot of short acting opioids and he said yes but more Norco now due to high amounts of APAP in Vicodin. A wife Rhonda works as a Pharm D with Petrus and other doctors in the worked pain management dept-dr shen and dale novak, pa
PPLPMDL0020000001	Cleveland Lakewood	OH	44113	3/26/2012	Spoke with Cindy, I reviewed the medication guide for Butrans and asked if they have seen any new patient starts. She said she has seen a few here and there but not very consistently. I reviewed the info that the patients should know about application and rotation. She will make sure that the patients get the information. I reviewed the savings program for Butrans and OxyContin.
PPLPMDL0020000001	Lakewood	OH	44107	3/26/2012	Spoke with Stacy, she said that Dr Grimm was asking about Butrans and that he wanted some trial cards for his Strongsville location. I gave her the Butrans pull out tool for Karen to keep on hand.
PPLPMDL0020000001	Cleveland	OH	44106	3/26/2012	showed dr OxyContin visual aid, asked dr where he feels OxyContin is appropriate on moderate to severe pain measurement? dr said usually severe pain. I asked dr what he prescribes for moderate pain? dr said tramadol is always the 1st step. I asked dr what he does for patients that look like emma, when tramadol doesn't control the pain? dr said he will usually max the tramadol, then go to vicodin or percocet in some patients. asked dr when does he decide OxyContin is appropriate? dr said when all short-acting opioids are maxed out and patients are still in pain, then he'll consider a long-acting opioid like OxyContin. showed dr a couple conversions from hydrocodone to OxyContin and percocet to OxyContin. I asked dr if he will start a couple patients on OxyContin this week? dr said he will do that. focused dr on medicare patients -UHC/AARP/CCRX and Silverscript patients and
PPLPMDL0020000001	Akron	OH	44303	3/26/2012	Asked pharmacist if he stocked OxyContin and Butrans. Answered he stock of OxyContin but has not seen Butrans prescriptions and does not stock. Asked if he knew who was prescribing OxyContin in the area. Discussed physicians writing. Pharmacist wanted OxyContin copy cards.
PPLPMDL0020000001	Lakewood	OH	44107	3/26/2012	I reviewed our last conversation about using Butrans as an option before going to vicodin around the clock. he said that he will use it in this place. He is said he would like to use it more for older patients but knows it is not covered. He would will try to find those patients with commercial coverage. I reviewed the trial card and asked if he would give a few patients a trial. He agreed. We reviewed the conversion guide for OxyContin and that it is covered on Med D plans for older patients.
PPLPMDL0020000001	Lakewood	OH	44107	3/26/2012	Quick call. I reviewed the Butrans pull out tool and asked if he would start a patient on Butrans with the month trial card who is taking tramadol around the clock. he said this is where he would most likely try it for a
PPLPMDL0020000001	Cleveland	OH	44113	3/26/2012	I talked to dale about patients like william, patient profile, dale said they see patients like this every day. I asked dale if he would consider Butrans as the next step in therapy for patients like william? dale said yes as long as insurance covers Butrans. we talked about BWC, commercial insurance and Caresource patients starting on Butrans. I asked dale if he will start a couple patients like william on Butrans this week? dale committed to doing this
PPLPMDL0020000001	Cleveland	OH	44127	3/26/2012	showed dr william, patient profile, asked dr if he's treating patients like this? dr said yes he has some patients taking vicodin but more patients taking codeine. showed dr initiation guide, we discussed dosage ranges and I asked dr if he has patients in this range taking codeine for chronic pain that could be appropriate for Butrans? dr said yes, dr said his challenge is that 50% of patients are medicaid and other 50% are medicare. I talked to dr about PA criteria for Caresource patients and asked dr if that was feasible to do? dr said yes he would consider doing that. PA asked dr if he had 2 patients in mind that were appropriate for Butrans this week? dr said yes he probably will see some patients that he can talk to about Butrans. showed dr Butrans patient info booklet, we discussed application/rotation of Butrans, side effects, disposal, etc. and asked dr to hand patients this booklet when he gives them a script for Butrans. dr said he will try it and see what happens. focused dr on caresource patients.
PPLPMDL0020000001	Cleveland	OH	44113	3/26/2012	dr said she hasn't started anyone in past week but will do so. I asked dr if she's seeing patients like william, patient profile, every day? dr said yes. I asked dr if she will start a couple patients like william, this week, on Butrans? dr said she will do that. focused dr on BWC and commercial insurance patients.
PPLPMDL0020000001	Lakewood	OH	44107	3/26/2012	I asked Dr if he has really not seen any patients taking tramadol about the clock that he could start on Butrans. He said that he does have a few in mind but these are mostly his older patients, he is going to have to see if he can find any with commercial insurance so they can get the trial offer. I reminded him that low dose OxyContin would be a good option for those Med D patients and I showed him that 10mg OxyContin is an appropriate starting dose for this type of patient.
PPLPMDL0020000001	Cleveland	OH	44106	3/26/2012	worked apm dept-fellows clinic, see call notes; worked internal medicine and family medicine-left Butrans fpi, initiation guide, patient info booklet, formulary grid and BUP3015 for each physician in the dept's.
PPLPMDL0020000001	Cleveland	OH	44106	3/26/2012	talked to dr about patients like emma, patient profile, asked dr how often she sees patients like this? dr said all the time. I asked dr what's typically the next step? dr said if patients are maxed on tramadol she'll consider another short-acting opioid like vicodin. I asked dr if she would ever consider Butrans for patients like this? dr said yes she would. I asked dr if she will see patients like this today? dr said probably so. I asked dr if she'll start a couple patients like emma, on Butrans today? dr said if insurance pays for it, she will talk to patients and to the attending physicians and if they approve then yes she will start them on Butrans. focused dr on commercial insurance patients and caresource patients.
PPLPMDL0020000001	Lakewood	OH	44107	3/26/2012	I asked Dr where he is finding Butrans fitting into the big picture of his practice, he said that he would prefer all of his patients to be on Butrans instead of other oral opioids including OxyContin. I reviewed the appropriate patients for Butrans based on their current amount of opioid and that patients should be tapered down before initiating Butrans. We discussed that OxyContin is an option when patients are taking hydrocodone or oxycodone around the clock and that it is covered for older patients with Med D.
PPLPMDL0020000001	Parma	OH	44134	3/26/2012	Discussed dosing of Butrans with Dr Mandat & showed back of core visual aid displaying 3 strengths. Pointed out that Butrans can be titrated to a max 20mcg if necessary. He said he has had success with Butrans & that he has not had to titrate as high as 20mcg yet. He thanked me for the reminder & said he had not remembered the 20mcg strength. Also gave him Portal invite & asked him to log on for interactive Butrans programs. He said he would have a look.
PPLPMDL0020000001	Akron	OH	44305	3/26/2012	Discussed Butrans key selling messages and discussed where Butrans would be appropriate. Kathy (nurse) asked about whether the patch adheres well and where it fits into the treatment of pain. Spoke about using a med alert patch of Tagaderm of patch is falling off and discussed about using if patient is falling on NSAIDs, Coxs or tramadol. Discussed initiation and titration of Butrans. Discussed adverse events for fair balance.
PPLPMDL0020000001	Cleveland	OH	44106	3/26/2012	OxyContin indication discussion. Kathy spoke about using a lot of OxyContin as well as other extended release products. Spoke about partners against pain resources. Kathy wants resources and titration/conversion dr said he's started a couple patients on Butrans. I asked dr if they were here in this clinic? dr said 1 patient was here at main campus other patients at the other offices. I asked dr why he chose Butrans for patients? dr said patients were maxed on tramadol, still in pain and not candidates for surgery so he wanted to try Butrans. we discussed initiation and titration of Butrans. I asked dr when he's following up with these patients? dr said after 2 weeks he will see patients and see how they are doing. I asked dr if he gave patients the Butrans patient info booklets? dr said yes. I asked dr if he has more patients like the one he started, to start on Butrans today and this week? dr said he's sure he does and will consider Butrans. we talked about PA requirements for Caresource patients and focused dr on commercial insurance patients.
PPLPMDL0020000001	Lakewood	OH	44107	3/26/2012	Spoke with Taylor, We reviewed Butrans as an option instead of vicodin around the clock, she has seen some scripts come through since the last time we spoke. I asked if there had been any questions about Butrans from patients and she said not that she heard. They have the medication guides to give to patients and will let them know how to apply. We reviewed that OxyContin is an option when Butrans 20mcg may not provide adequate
PPLPMDL0020000001	Lakewood	OH	44107	3/26/2012	I asked Dr how often he is refilling hydrocodone around the clock, he said he does, but he will try to get them on a long acting if they are taking pills around the clock. I reviewed the conversion guide for OxyContin and that patients can take a low dose of OxyContin Q12hr instead of hydrocodone or oxycodone around the clock. I asked if he would convert patients who he feels may benefit and he said he will.
PPLPMDL0020000001	Cleveland	OH	44106	3/26/2012	talked to dr about patients that look like emma, patient profile, dr said they have a lot of patients taking tramadol for chronic pain and he thinks Butrans is a good option for them, it depends on the patients wanting to try a patch and if insurance pays for Butrans. I asked dr how he feels about a long-acting opioid right after tramadol fails to control patients pain? dr said it's new to him but he will consider it. I asked dr if he can start 2 patients this week on Butrans, looking like emma? dr said yes he will. we discussed commercial insurance and caresource patients starting on Butrans.
PPLPMDL0020000001	Parma	OH	44129	3/26/2012	Caught Dr Moysaenko in the hallway & handed him Butrans initiation slide-out tool. Discussed Butrans as a possible option for patients who are taking 3 tramadol or Vicodin per day who, upon follow-up, request an increase in dose or dosing interval. Reminded him that Butrans is a long-acting CIII. He said that if he switched those patients, "they wouldn't get a high, so they wouldn't want it". Reminded him that Butrans still has abuse/addiction potential & like all other opioids, he should only prescribe for patients in legitimate pain. He said that was a good point & said he would try to find someone for Butrans. Also reminded him of favorable OxyContin managed care coverage on Medicare plans.
PPLPMDL0020000001	Lakewood	OH	44107	3/27/2012	Quick call, I reviewed that Butrans may be an option for patients who are taking tramadol around the clock. He said Ok and will look at the information. I spoke with Robin and asked if she would help remind him, she agreed. She thinks they have a lot of appropriate patients.
PPLPMDL0020000001	Independence	OH	44131	3/27/2012	Spoke with Lisa, Terry, & June & reviewed Butrans & OxyContin formulary grids. I asked who handles phone calls for Dr Sundaram regarding refill/medication requests from patients. June said she does most of that. Discussed Butrans appropriate patient type & range, focusing on patients taking tramadol or Vicodin who are not well-controlled on their dose or who call her too soon asking for more medication because their pain is not being adequately relieved. June said she would leave my information for Dr Sundaram & that he would be back in the office next week.
PPLPMDL0020000001	Parma	OH	44129	3/27/2012	Spoke with Kathy, MA, who said Dr Tolentino had already left for the day. She added that she has not prescribed Butrans for anyone yet. Reviewed appropriate patient type & core messages. Kathy said she knows Dr Tolentino has a lot of potential candidates for Butrans but that it is always difficult to get an doctor who has been in practice for a long time to prescribe newer medications. I asked if she would help alert Dr Tolentino when she recognizes that a patient may be a good candidate for Butrans & she agreed. Also asked her to leave Butrans information & OxyContin formulary grid.
PPLPMDL0020000001					

PPLPMDL0020000001	Cleveland	OH	44103	3/27/2012	asked Dave,pharmacy mgr,what patients are saying to him when providing medication management therapy to those patients taking opioids for chronic pain? dave said usually patients have questions about side effects but overall they dont ask much they just want their pills.i asked dave if he's recommended Butrans to any patients and given patient info booklets to them? dave said a couple patients.i asked dave if he will continue doing this? dave said yes.we discussed BWC,commercial insurance and Caresource coverage for Butrans.confirmed OxyContin stocking.Dave said not many new Rx for OxyContin just same patients every month getting their scripts filled.I asked what he is seeing new Rx for,in the long-acting opioid market? dave said a lot of generic long-acting morphine,due to low cost and a lot of Opana ER,dave said he thinks the Opana ER is for the patients who dont want OxyContin so doctors are just switching them to Opana ER.showed OxyContin visual aid,we discussed appropriate patients and 7 tablet strengths and i gave dave an OxyContin conversion/titration guide,Dave said he wont recommend OxyContin to patients but he will keep info for himself in case doctors ask any questions on conversion which happens occasionally.showed OxyContin formulary grids,focus of discussion was on commercial and medicare part d plans.recommended Senokot-S
PPLPMDL0020000001	Stow	OH	44224	3/27/2012	I asked Dr if she is still writing Oxycontin in her patients and she said occasionally. I showed her dosing and titration guide reminding of 7 strengths and said I also have a product that she can use in her patients who have moderate to severe pain and I introduced Butrans to her, reviewed indication, dosing, titration, supplemental, boxed warning and appropriate patients. She said she sees a niche for this in her practice but wanted to know cost, al reviewed managed care and trial cards and she said she would consider it.
PPLPMDL0020000001	Sagamore Hills	OH	44067	3/27/2012	Reviewed Butrans appropriate patient type & core messages with Lynda. Focused on patients taking tramadol or Vicodin 3 times per day who were not well-controlled. Discussed Butrans as a CII long-acting option, allowing her, as a nurse practitioner, to prescribe a long-acting opioid. Also reviewed abuse/addiction potential & asked that she prescribe with the same caution she would use with other opioids. Lynda said she does not have a DEA number because she said mid-level practitioners are only allowed to prescribe scheduled medications for a 24 hour period & the patient must be terminal. I asked if she meant for just CII medications, like the new legislation. She said her understanding is that it is for every scheduled product, no matter what schedule it is. I told her I had not heard that before & that a variety of different health care providers, including mid-level practitioners, were finding a place for Butrans. Lynda said she is going to look on the Board of Nursing site to find out what the rules are & added that if I am correct & she can prescribe scheduled medications, she will get her DEA number because she would like to have the authority to prescribe these medications where appropriate.
PPLPMDL0020000001	Cleveland	OH	44130	3/27/2012	I handed Dr Diab the Butrans initiation slide-out tool & told him I thought it would be of interest to him. He looked at it & manipulated the slide-out feature. I walked him through how he can use it to figure out the appropriate starting dose of Butrans & showed that appropriate patients taking over 80mg oral morphinearequivalentswould be considered more of an OxyContin patients & would be beyond Butrans. He asked if he could have an additional tool because he tends to lose things. Gave him another & asked him to put it to use this week.
PPLPMDL0020000001	Westlake	OH	44145	3/27/2012	Quick call, Dr said he isareferinggaall pain patients to painmanagement&and not writing for OxyContin any longer. He said is trying to get out of pain management. Iareviewed&that Butrans may be an option instead of going to vicodin around the clock and he said he will keep it in mind.
PPLPMDL0020000001	Cleveland	OH	44113	3/27/2012	dr said she's been starting more patients on Butrans as Caresource is approving the PA.i asked dr how her patients were doing on Butrans? dr said good,no complaints.i asked dr if she's handing out the patient info booklets to patients when they leave with their Butrans scripts? dr said yes.i asked dr if she will commit to starting more patients on Butrans this week? dr said yes she will.focused dr on caresource and commercial insurance patients.
PPLPMDL0020000001	Cleveland	OH	44130	3/27/2012	Gave Dr Fedorko Butrans initiation slide-out tool & showed him how it can be used to figure out the recommended starting dose for Butrans depending on what their current dose of opioids is. He put it with his Butrans trial cards. Reviewed details of the savings program. Started to talk about patients who are taking 3 tramadol per day who are not well-controlled on that dose, but he stopped me & said he would not memorize dosing & then walked into a room.
PPLPMDL0020000001	Parma	OH	44129	3/27/2012	I asked Myra to tell me about her experience with Butrans since the program. She said she has actually started a couple of patients on Butrans but has not heard any feedback. She added that she would like to use it in the nursing homes but that she has been having a hard time getting it covered. I reminded her of coverage & asked her to focus more on her office patients who have BWC or commercial insurance. Also discussed Caresource prior authorization requirements. Myra took notes. She said she would try to find more patients for Butrans. Spoke with Dawn who said that she had gotten calls from patients who Myra prescribed Butrans for about 2 days after they started Butrans asking if they could take something for breakthrough pain. Discussed supplemental analgesia. Dawn said Myra typically will switch the patient to Butrans even if they say they want to stay on their pills. Dawn asked me about BWC coverage for pain medications. Reviewed requirements for Butrans & OxyContin. a
PPLPMDL0020000001	Westlake	OH	44145	3/27/2012	I reviewed the Butrans trial offer for commercial insurance. aIasked&I he would try a few&patients&this week and he agreed. I asked how he would decide between OpanaER and OxyContin. He said he tries not to write
PPLPMDL0020000001	Cleveland	OH	44113	3/27/2012	talked to dr about his patients that he starts on Butrans and asked dr how he feels about starting them on Butrans dr said he likes the fact that Butrans is a different option for patients,being a patch and dosed 1x week,dr said its easy to describe to patients and he's been starting more patients on Butrans every week.i asked dr if he will continue starting patients on Butrans this week? dr said yes he will.focused dr on BWC and commercial insurance patients,but dr said caresource is a large group here so we talked about PA criteria for Butrans and this patient group.recommended Senokot-S
PPLPMDL0020000001	Westlake	OH	44145	3/27/2012	Quick call in between patients, I asked if he would start a few patients tonight on Butrans with the trial cards. I reviewed the commercial plans to look for, he agreed.
PPLPMDL0020000001	Stow	OH	44224	3/27/2012	Spoke to Gregg and he said they are stocking the 10 and 20mcg now. HE said they only have 2 patients on Butrans there. HE said the others can be filling it somewhere else. HE said these 2 patients are Dr Yuangs. I let him know that the Drs can keep patient on an opioid or non opioid for supplemental
PPLPMDL0020000001	Sagamore Hills	OH	44067	3/27/2012	Dr Loyke said he recently encountered another physician's patient who was on Butrans. He went on to say that this patient had ankylosing spondylitis & was only 23 years old & on Butrans. He added that he thinks it is horrible that a 23 year-old patient would be on any opioid for any length of time & that no patient should be on chronic opioid therapy because it does not work. I asked if he was saying that chronic opioid therapy is not appropriate for anyone at all. He said 99.9% of people who are on long-termopioids&do not need them. I asked him to think about simply one or two patients who may benefit from a medication like Butrans. Discussed Butrans & OxyContin as opioid medications that should be prescribed with caution & are abusable & addictive. He said he remembers many years ago when his rep told him that OxyContin was not abusable. I assured him that this is not the case & told him again that OxyContin is abusable & should be prescribed with caution. He said he knows this & that it does not matter what any rep tells him because he doesn't listen to or believe a word
PPLPMDL0020000001	Stow	OH	44224	3/27/2012	Introduced Butrans to Dr again and reviewed indication, dosing and titration, looked at appropriate patients who are not controlled on Tramadol or NSAID and he asked about the cost. I reviewed managed care and trial cards and asked if he thinks this is something that he can implement into his practice and he said there is & he said as long as it is covered. He said he had to get going&
PPLPMDL0020000001	Cleveland	OH	44195	3/27/2012	worked rheumatology dept-left Butrans initiation guide,clinical trial leave behind,formulary grid,patient info booklet and my business card for Dr.Chatterjee.worked neurology dept-left same Butrans info and OxyContin info as above for Dr.Bamford,Dr.Mays,Dr.Kriegler and Dr.Stillman. worked apm dept-left same Butrans and OxyContin info for Dr.Vrooman,DR.Rosenquist,DR.Stanton-Hicks,Dr.Cheng,Dr.Katyal,DR.MKhalil,Dr.Mintzer,Anne Crawford(NP),DR.Leizman and Kathy Kraus(PA)-left her Butrans info-couldnt see any HCP's
PPLPMDL0020000001	Cleveland	OH	44114	3/27/2012	I asked Elaine what prompted her to start 1 patient on Butrans? Elaine said the patient was taking a couple vicodin a day,not controlled and wanted more pills,she told the patient about Butrans as a different option and the patient was willing to try Butrans so that made it easier on her to get the patient started.we discussed initiation and titration of Butrans,i asked Elaine if she had more patients like this 1 that she could start on Butrans this week? Elaine said yes,focused Elaine on BWC,commercial insurance patients and caresource patients starting on Butrans.
PPLPMDL0020000001	Euclid	OH	44132	3/27/2012	I reviewed the butrans patient type and positioning and coverage. aDoc said the problem is coverage and PAs. aHis staff is frustrated with PAs and still getting rejected. aI asked him to focus on the commercial plans and BWC (showed the grid). I also showed the initiation tool which he liked. aHe asked if he can keep patients on some short acting opioid for supplemental. aI confirmed using the FPI section on supplemental analgesia. aHe said he is going to have to start using more butrans. a
PPLPMDL0020000001	Cleveland	OH	44103	3/27/2012	showed dr OxyContin visual aid,we discussed moderate to severe pain scale and the fact that dr prescribes vicodin or percocet for moderate pain,i asked dr at what point will dr stop the short-acting opioids and start patients on a long-acting opioid? dr said when patients are maxed on the number of pills she's comfortable prescribing.i asked dr for patients taking percocet whats her usual max? dr said usually 2 pills/day,sometimes 3 pills/day,when thats not working and patients are asking for more pills,she will give OxyContin as thats her preferred long-acting opioid. asked dr what factors does she consider when choosing a long-acting opioid? dr said cost and insurance coverage is number 1,then she talks to the patients about the medication she's choosing and makes a decision if that long-acting opioid is appropriate.we discussed Q12h dosing of OxyContin,showed conversion guide and i asked dr if she can start a couple new patients on OxyContin this week? dr said yes she will.focused dr on UHC/AARP med part d patients and showed Med part D formulary grids.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44103	3/27/2012	talked to Abdul,pharmacist,about what patients say to him when providing medication management therapy to those taking opioids for chronic pain.Abdul said most patients usually just want their pills and sometimes have questions about side effects.i asked if patients are ever ready for a long-acting opioid where he recommends this to physicians? Abdul said sometimes that happens but not often.Abdul said it depends on the HCP if he feels comfortable recommending a long-acting opioid.showed patient profiles,asked if he see's patients like this? Abdul said yes a lot of patients like emma and william.i asked if Abdul would recommend Butrans to those HCP's he feels comfortable doing so? Abdul agreed to do this and said he's given a few patient info booklets to those patients he felt were appropriate for Butrans.we discussed BWC,commercial insurance and Caresource coverage for Butrans.confirmed OxyContin stocking,left conversion guide and formulary grids.
PPLPMDL0020000001	South Euclid	OH	44121	3/27/2012	Spoke to Dina about the movement of butrans. aShe said she just saw a script yesterday for 10mcg but she was out of it so she sent the customer to a CVS down the street. aShe did not recall the prescriber. aOtherwise she has not seen much movement of butrans. aShe said oxycontin volume has been steady. aI explained and offered the oxycontin conversion guide. a
PPLPMDL0020000001	Lakewood	OH	44107	3/27/2012	Quick call, I asked Dr if he had a few patients where he could prescribe Butrans instead of going to vicodin in the first place. He said he just forgets to do it, I showed him the initiation pull out tool and asked him to keep it in his office.
PPLPMDL0020000001	South Euclid	OH	44121	3/27/2012	Quick call...spoke to patricia about the movement of butrans. aShe was aware that they had it stocked but she had not seen any scripts or it. aI discussed the key selling messages and the savings cards. aProvided initiation
PPLPMDL0020000001	Northfield	OH	44067	3/27/2012	Spoke with Carolyn, technician, who said they had a floater pharmacist in today. Reviewed Butrans core messages with her & showed her patient information booklets. Discussed using them to answer patient questions about Butrans when they have a prescription. Gave her a few booklets which she said she would leave for Greg. Also discussed savings programs for Butrans & OxyContin.
PPLPMDL0020000001	Sagamore Hills	OH	44067	3/27/2012	I reminded Dr Scanlon of our previous Butrans discussion when he was telling me that he has been prescribing Butrans for patients taking Vicodin. He said he remembers. I asked him if he waits until the patient is on a specific dose of Vicodin before he would initiate Butrans. He said he usually waits until the patient is taking 5mg q6h & then would go to Butrans. I asked if he had ever tried Butrans for patients taking tramadol who were not well-controlled. He said yes. I asked if he had good results with that. He said yes. I asked him why not, then, go to Butrans sooner than waiting until the patient is on Vicodin q6h. He paused & said that actually made a lot of sense because he has found that many times patients who are already taking Vicodin multiple times per day are beyond the range of Butrans. Discussed OxyContin q12h as an option for some of those patients, if appropriate. I asked if he would start initiating Butrans sooner if appropriate & he agreed. He also asked me for more trial/savings cards because he was almost out of them. I gave him another pack.
PPLPMDL0020000001	Bedford	OH	44146	3/28/2012	Spoke with Oleg, pharmacy manager, who said they have still not seen any prescription activity for Butrans. Reviewed appropriate patient type & trial/savings program. I asked if he has seen any new prescriptions for OxyContin recently or if they have all been continuing prescriptions. He said lately it has been all continuing. He said recently he did see adprescriptionsfor either Opana or OxyContin but their was a prior authorization required so the patient was switched to morphine. He said he has seen more rejections lately from BWC for many of the pain medications. He said even Vicodin will not be covered in May. I let him know Butrans is being paid for at this time by BWC. He said if he has the opportunity to recommend Butrans for an appropriate patient who cannot get Vicodin, he will do this.
PPLPMDL0020000001	Mayfield Heights	OH	44124	3/28/2012	Window call...I asked doc.what experience he has had prescribing butrans. aHe said he has one or two patients currently on it and it seems to be working. aI asked him to try more appropriate patients and explained the trial month now available for new patients. aProvided formulary grid.

PPLPMDL0020000001	Bedford	OH	44146	3/28/2012	Dr Moufawad said he needed more patient information booklets because he has been using them so much. He went on to say that patients are doing well on Butrans & he has steadily increased his usage. I asked if he reviews the patient information booklets with patients or just gives it to them. He said he goes through some of the booklet, mainly ensuring that the patient understands application & rotation. He added that he typically prescribes Butrans 5mcg for patients but only writes for a single patch in anticipation that they will need to be titrated to 10mcg. He said occasionally he will need to then titrate them to 20mcg. Dr Moufawad also said he is still also using OxyContin for appropriate patients taking more than 80mg&equivalentof morphine.
	Cleveland	OH	44106	3/28/2012	showed dr emma,patient profile,asked dr if he's seeing patients like this? dr said yes a lot of patients take tramadol for chronic pain.asked dr if he would consider starting these patients on Butrans when a medication adjustment is necessary? dr said yes he would consider it but he doesn't have a lot of patients taking opioids for chronic pain.dr said he will keep Butrans in mind tho. we talked about initiation and titration of Butrans,showed guide. asked dr if he thinks there will be any appropriate patients this week,that he can start on Butrans? dr said he doesn't know but will consider Butrans if appropriate. we discussed commercial insurance and Caresource patients starting on Butrans.<font color=blue><b>CHUDAKOB's query on 04/05/2012</b></font>Amy, I don't know if the call is progressing as you are writing it as I wasn't there, but it sounds like you are presenting a profile and then asking him to write it. &There seems to be a few steps before that to ensure he is sold and understands the product.<font color=green><b>BROOKAM's response on 04/07/2012</b></font>yes you got it...he is a tough one though, doesn't write a lot of opioids and need to be brief and to the point with him...i have lunch on April 30th with him and the Fellows so we will see how that goes! thanks for your feedback Barry!<font color=blue><b>CHUDAKOB added notes on 04/11/2012</b></font>Thanks for the clarification Amy!
PPLPMDL0020000001	Parma	OH	44134	3/28/2012	Dr Hernandez said he just prescribed Butrans for a patient today. He added that his patients have been happy with their results. I asked if he usually gives a patient information booklet to patients with a new prescription. He said that he sometimes does, depending on the patient. He said when he does, he asks the patient to not read the side effects listed because he believes this causes patients to think they are getting the side effect even if they are not. I reminded him of our previous conversation when he told me that once BWC stops paying for Vicodin in May, he will be switching those patients to Butrans. He said that is still the case & he has started educating the patients on Butrans now so they are prepared for the change. Reviewed appropriate patient type & range & asked him to continue to prescribe Butrans & OxyContin where appropriate. He agreed.
	Cleveland	OH	44104	3/28/2012	showed dr OxyContin conversion guide,we discussed patients taking percocet for chronic pain that aren't controlled and are ready for a long-acting opioid.dr said he's not prescribing percocet or OxyContin anymore this year,he's sending them all to pain management.I asked dr who he did feel comfortable prescribing OxyContin for in the past? dr said his elderly patients who had legitimate chronic pain he would prescribe OxyContin for them.I showed dr OxyContin fpi,geriatric use-section, we discussed the clinical results and I asked dr if he would be willing to start a couple patients who are 65+ yrs old on OxyContin? dr said probably not because he doesn't want to prescribe OxyContin anymore.dr said he will start patients on Butrans and likes that Butrans is a CIII and a patch for chronic pain.I showed dr Butrans initiation guide,we discussed appropriate patients and dosage ranges for potential Butrans patients.dr said he will start a couple patients on Butrans and see what happens, but not OxyContin.focused dr on commercial insurance and Caresource patients starting on Butrans,gave dr OxyContin formulary grid focused dr on med part d plans.<font color=blue><b>CHUDAKOB's query on 04/05/2012</b></font>Is he sending all his schedule II opioid patients to pain management, or just his oxycodone patients?<font color=green><b>BROOKAM's response on 04/07/2012</b></font>yes or so he says....not sure if I should keep him as an OxyContin core? need to see him a few more times but core's lock out I think on the 15th so he may have to stay as an OxyContin core for the quarter. thank&dr <font color=blue><b>CHUDAKOB added notes on 04/13/2012</b></font>Keep working on him. &Focus on one patient at a time.
PPLPMDL0020000001	Cleveland	OH	44104	3/28/2012	showed dr william,patient profile,asked dr if she treats patients like this? dr said yes but more patients are taking percocet for their chronic pain.I asked dr what's the next step for patients like William? dr said when patients are taking vicodin every day and its not controlling their pain,she will start them on percocet to see if that works. I asked dr if she would consider a long-acting opioid right after vicodin isnt controlling the pain? dr said she might but most patients only want their pills and aren't willing to try anything else like a patch for their pain. I asked dr if she would be willing to talk to a couple patients that look like william, this week and start them on Butrans instead of starting them on percocet? dr said yes she will dr said she has to remember butrans that's the only challenge. I talked to dr about her ma,dori,saying that she would be willing to flag charts and remind dr,if dr would be ok with that? dr said that would be fine we discussed PA criteria for caresource patients as that's a majority of her chronic pain patients here. I asked dr if I could follow-up next week to see how it goes with her starting a couple patients on Butrans? dr said yes I could do that.&font color=blue><b>CHUDAKOB's query on 04/05/2012</b></font>My guess is her assumption is that they don't want a patch. &she is probably not offering it to them because she thinks they don't want it.<font color=green><b>BROOKAM's response on 04/07/2012</b></font>she has said that before in past notes...especially early on,before she started that 1 patient on Butrans, we discussed that and I asked her if that was HER thought process (that patients didn't want a patch OR if patients actually TOLD her this, she admitted it was HER thought process and not patients saying this her) so I think there is more to this with her...as I mentioned on Friday's call-in,she must not see clinical value in Butrans otherwise she WOULD offer to patients,she is a project!<font color=blue><b>CHUDAKOB added notes on 04/13/2012</b></font>OK. &Keep working to sil her. &Please be careful about call physicians "a project" even in replies to me. &Thanks Amy!
	Cleveland	OH	44113	3/28/2012	asked dr if he started any patients like emma,patient profile,in last week? dr said he is talking to patients about Butrans and will prescribe Butrans he hasn't started anyone recently though. asked dr if there was anything preventing him from starting patients on Butrans? dr said no not really,just the fact he's sending a lot of his chronic pain patients to dr shen (pain management dr)now. asked dr if he will start 2 patients like emma,patient profile,this week on Butrans? dr agreed to do this.focused dr on BWC,commercial insurance patients to start on Butrans and we discussed PA criteria for Caresource patients starting on Butrans.
PPLPMDL0020000001	Cleveland	OH	44109	3/28/2012	showed dr william,patient profile,asked dr if he's treating patients like this? dr said yes all the time a lot of his patients take vicodin for chronic pain.I asked dr if he's considering Butrans as the next step for them when a medication adjustment is necessary? dr said for some patients he has tried to start them on Butrans but insurance didn't cover it.dr said its Buckeye that wont pay for Butrans. we talked about dr focusing on BWC and commercial insurance patients to start on Butrans. I asked dr if he will start a couple patients,like william,this week on Butrans? dr agreed to do this. asked dr how OxyContin plays a role in his practice? dr said he doesn't start new patients on OxyContin,he is just maintaining the patients he inherited when joining this practice. showed dr OxyContin visual aid,we discussed moderate to severe pain scale,asked dr where OxyContin falls in that range? dr said severe pain. asked dr what he prescribes for moderate pain? dr said a short-acting opioid like tramadol,vicodin or percocet for some patients. I asked dr if he would consider starting a few patients on OxyContin that are over 65yrs old,this week,if they are ready for a long-acting opioid? dr said he will consider it. I showed OxyContin formulary grids-focused on UHC/AARP and CCRX med part d plans.recommended Senokot-S
	Cleveland	OH	44124	3/28/2012	Quick call...I reminded doc of an alternative to prescribing short acting tabs ATC and explained the CIII status and once weekly dosing of butrans. &He said most patients are already on some long acting narcotic and just have on short acting for supplemental analgesia. &I explained that he can do the same with butrans except that butrans is indicated for more moderate pain.<font color=blue><b>CHUDAKOB's query on 04/05/2012</b></font>Charmaine, Butrans is indicated for moderate to severe chronic pain. &It may be used for more moderate pain, but it is not indicated only there. &Your note suggests that may be the case. &I want you <font color=green><b>SIMERTOC's response on 04/10/2012</b></font>I understand how that might be misinterpreted.<font color=blue><b>CHUDAKOB added notes on 04/13/2012</b></font>Thank you! &Please review what you
PPLPMDL0020000001	Cleveland	OH	44113	3/28/2012	worked pain management dept-see call notes dr shen and dale novak,pa
	Cleveland	OH	44111	3/28/2012	Spoke with Katie, we&reviewedthe Butrans&medication&guide and I asked if she has been handing them out with any new scripts and she said she has them with the product. I reviewed the Butrans savings program and the trial cards. We discussed that OxyContin may also be an option when patients are taking hydrocodone around the clock.&
PPLPMDL0020000001	Cleveland	OH	44114	3/28/2012	dr said she is starting patients on Butrans almost every week. I asked dr if she's&starting patients like emma,patient profile? dr said most of the patients she's started on Butrans have been taking Vicodin for chronic pain but she is thinking of her patients taking tramadol,to start on Butrans. I asked dr for her commitment to start more patients this week on Butrans that look like emma,patient profile,when a medication adjustment is necessary? dr committed to do this.
	Cleveland	OH	44106	3/28/2012	showed dr William,patient profile,asked how he decides if Butrans is the next step in therapy or continue the hydrocodone? dr said every patient is different,if he feels like the hydrocodone is a good option he will increase dosage strength to see if that controls the pain otherwise he will consider a long-acting opioid. dr said there are several factors involved and 1 of them is cost.dr said most patients have medicaid here so that's why he's not started many patients on Butrans. I talked to dr about his caresource patients starting on Butrans,if appropriate, and we discussed PA criteria for caresource patients.dr said ok that will make it easier,he'll keep it in mind. I asked dr if he'll start a couple patients on Butrans,that look like william,between today and next week when I see him again? dr said he will see who comes into the office and if appropriate he will consider Butrans.<font color=blue><b>CHUDAKOB's query on 04/05/2012</b></font>The question to ask him when he says that most of his patients are medicaid is " Dr., if medicaid or insurance were not an issue, would Butrans be a medication you would routinely prescribe? &When he asks about insurance, put it back on him.<font color=green><b>BROOKAM's response on 04/07/2012</b></font>yes I know that and have been doing this with many HCP's...we have discussed this question before (past calls) and dr will tell you that yes, he would write more of Butrans if medicaid paid for it...now its a matter of him doing the PA's for caresource patients...remember what Lisa,MA,told me though..he is writing a lot of Nucuynta&Nucuynta ER,yet he didn't mention to me...so have to get that out of him!<font color=blue><b>CHUDAKOB added notes on 04/13/2012</b></font>That's interesting. &Is that covered
PPLPMDL0020000001	Copley	OH	44321	3/28/2012	Discussed Butrans patient types. &Discussed all three case study patients and dr said that he will most likely use after tramadol before vicodin. &Dr is still skeptical whether insurance is going to pay for it. &Spoke about trial offer and discussed with Melissa and TJ(ma's) about Butrans trial offer and copy cards and National commercial coverage. &Dr continues to agree to use. &Nothing else learned.
	Cleveland	OH	44114	3/28/2012	dr said he's starting patients on Butrans every week,its going well,nothing new. I asked dr how his patients are doing on Butrans and any feedback? dr said no feedback other than patients seem to be doing well on Butrans,no complaints so that's good. we talked about giving patients the Butrans patient info booklet and focusing discussion on application/rotation of Butrans,side effects,etc.. dr said John,PA,gives the booklet to patients he doesn't really talk to them much about that info. I asked dr for his commitment to start more patients on Butrans this week? dr said he will do that.focused dr on BWC patients starting on Butrans&
PPLPMDL0020000001	Cleveland	OH	44113	3/28/2012	showed dale the Butrans patient profiles,asked which patient he see's most often? dale said william,patient taking hydrocodone is the most common here. I asked dale if he's considering Butrans as the next step? dale said as long as insurance covers Butrans he's talking to patients about Butrans.dale said he likes long-acting opioids,patients have been doing well on Butrans and he likes the fact that Butrans is a patch dosed 1x/week. I asked dale if he will see patients like william this week? dale said yes. I asked dale if he will start these patients on Butrans? dale agreed to do this
	Fairlawn	OH	44333	3/28/2012	Discussed Butrans and OxyContin with Tan and Sue(Pharmacists) &Asked who has prescribed Butrans recently and OxyContin? &Dr Shah wrote Butrans last week and she couldn't give me specific names for OxyContin. &Both pharmacists wanted me to review savings cards eligibility for Butrans and OxyContin.
PPLPMDL0020000001	Cleveland	OH	44114	3/28/2012	talked to John about patients he's starting on Butrans,John said most of them are still the patients taking percocet but not controlled,so he's not giving more percocet but telling patients Butrans is next step in therapy John said its going well,no issues and they are getting coverage from BWC and a few PA's for caresource patients are getting approved. I asked John if he will continue starting patients on Butrans this week? John said he will do that. I asked John if he will start some patients who look like william,patient profile? John said yes he's started a couple patients on Butrans that were taking vicodin but weren't controlled,so he will look at these patients more closely like he has with the percocet patients.focused John on BWC and caresource patients starting on Butrans
	Cleveland	OH	44113	3/28/2012	worked pain management and out-patient pharmacy
PPLPMDL0020000001	Cleveland	OH	44113	3/28/2012	showed dr william,patient profile,asked dr if he see's patients like this? dr said yes but majority of his patients are taking opioids for acute pain not chronic.dr said he only has a couple patients taking opioids for chronic pain and he's going to send them to pain management, dr shen, as he doesn't want to deal with them. I asked dr if he would consider starting patients like william,patient profile, on a long-acting opioid before sending them to pain management? dr said probably not only because he doesn't want to manage these people anymore. showed Butrans visual aid, we discussed 6 core Butrans selling messages.dr said he likes that Butrans is a patch for chronic pain,likes that its a CIII so refills can be written and its dosed once a week but at this point he doesn't see a place for Butrans in his practice. I asked dr if I should follow-up in 3-6 months to see if anything has changed,where Butrans could be an option for patients? dr said I can do that as he knows I work with dr boh, his colleague, but he's not sure anything will have changed.
	Cleveland	OH	44106	3/28/2012	talked to Margie,pharmacy supervisor,about how often she and the other pharmacists are providing medication management therapy for patients taking opioids for chronic pain? Margie said occasionally not often. I asked Margie what do patients typically ask you about? Margie said usually its side effects questions,if patients are taking opioids she tells them to buy a laxative and explains why they need one. we talked about Senokot-S being an option for these patients,Left the Senokot-S protocol pad for her to give patients. asked Margie if she would continue recommending Butrans and giving patients the patient info booklets so they can talk to their HCP's about Butrans,margie agreed to do this. we discussed formulary coverage
PPLPMDL0020000001					

PPLPMDL0020000001	Akron	OH	44313	3/28/2012	Asked Jerry(pharmacist) if he has seen Butrans prescriptions filled at the pharmacy? âThey have not seen Butrans prescriptions and so not stock it. âHe did not know about the product. âGave key selling messages and explained copy cards. âJerry asked about cash paying patients with cards. âExplained trial offer does not apply to those patients but \$40 off copy does and that OxyContin is also for cash paying. âReviewed OxyContin dosing and he said that they are seeing frequent prescriptions come through but the numbers have come way down since the reformulation.
PPLPMDL0020000001	BEDFORD	OH	44146	3/28/2012	Spoke with floater pharmacist who said she has dispensed Butrans at various locations & is familiar with it. Discussed application & rotation & reviewed trial/savings program. Also discussed OxyContin q12h dosing & 7 tablet strengths. Reviewed savings program.
PPLPMDL0020000001	Cleveland	OH	44106	3/28/2012	showed dr william,patient profile,asked dr whats typically the next step for patients like william? dr said he would consider Butrans.i told dr to put Butrans aside,before Butrans,what was typically his next step for patients like this? dr said usually percoet would be next step,asked dr to explain his logic for patients like this starting on percoet.dr said he usually maxes all of the short-acting opioids for patients as some patients get injections,pumps or have surgical procedures so the opioids are just a part of the treatment plan.i asked dr if he would consider starting a couple patients like william,on Butrans,today and next week instead of starting them on percoet? dr said he will consider that.we discussed caresource patients starting on Butrans,dr asked about PA criteria so we talked about that for caresource patients.<font color=blue><b>CHUDAKOB's query on 04/05/2012</b></font>-looks like you are challenging him a little more. âNice work!! âWhy does he feel it is better to max out on short-acting rather than put the patient on a long-acting? âThis thought process is what you will want to explore further, don't you think?<font color=green><b>BROOKAM's response on 04/07/2012</b></font>-yes i agree with you!! and thanks for feedback-><font color=blue><b>CHUDAKOB added notes on 04/07/2012</b></font>-I asked Dr Salama to tell me about his experience with Butrans. He said he likes it & gets good results, but many of the patients for whom he would like to prescribe it he can't because they are Medicare. I agreed that BWC & commercial insurance patients will have the most access. I asked what patient type he considers a Butrans patient. He said someone who has either not been on an opioid or one who is on tramadol or sometimes 2 Vicodin per day. I agreed that these are good patient types for Butrans. He said he just prescribed Butrans for a patient who was taking 2 Vicodin per day. I asked what type of patient he would not consider appropriate for Butrans. He said one who is already taking a lot of opioid medications. I asked what about patients who are taking 3-5 Vicodin per day- would he consider those Butrans patients. He said that he would start using Butrans in that type of patient now. I asked if patients ever say they do not want to take Butrans because they do not want to "give up" their pills. He said&occasionally&a patient will say this, but he said he insists that those patients try Butrans anyway. Reminded him Butrans has abuse/addiction potential. Dr Salama said he does not write OxyContin& would prefer me to not even try to sell it to him. I asked why he does not like it. He said "it has a bad name". He added that he does think it is a good medication for the right patients & he does continue some on it. I asked him to continue doing that & he agreed.
PPLPMDL0020000001	Parma	OH	44129	3/28/2012	showed dr Butrans patient profile,william,asked dr how she decides if patients get a refill and continue hydrocodone or start on Butrans? dr said if patients were taking the same amount of hydrocodone as william,patient profile,she would consider Butrans and not give more short-acting opioid.dr said she believes Butrans is a great option for patients like william and she's started many patients on Butrans,that look like this patient profile.i asked dr if she will start more patients,looking like william,this week on Butrans? dr said yes she will,focused dr on BWC,commercial insurance patients to start on Butrans.
PPLPMDL0020000001	Warrensville Heights	OH	44122	3/28/2012	Dr Zivic said he did not have time to talk today. I showed him OxyContin conversion guide opened to pg 10 & asked him to consider q12h OxyContin for patients who are taking oxycodone immediate-release q6h since they are both oxycodone. He said he would do that. He also added that he has been thinking of Butrans more & then walked into a room. Left OTC samples.
PPLPMDL0020000001	Beachwood	OH	44122	3/29/2012	Tried to catch Dr Malkamaki during lunch per his request on Monday, but he was unavailable according to his staff. Spoke with one of the medical assistants who said that I should try back in a month. Showed her Butrans initiation guide & discussed appropriate patient type. I asked her to give Dr Malkamaki that along with an OxyContin conversion guide. She agreed.& talked to Amy,Pharmacy Mgr,about Butrans stocking and Amy said she's not seen any Rx for Butrans lately,we talked about appropriate patients for Butrans,showed visual aid-opioid experienced patients section and dosage ranges in initiation guide.i asked Amy if she would recommend Butrans to patients that are ready for a long-acting opioid and hand them a patient info booklet so they can talk to their HCP? Amy said yes she will do that.we discussed PA criteria for Caresource patients and Butrans and briefly discussed OxyContin stocking,formulary coverage and i asked Amy if she's seeing new Rx for OxyContin? Amy said not new Rx but still a lot of patients getting their OxyContin filled here,same patients monthly recommended Senokot-S and left protocol pad for Amy to hand out to patients,amy agreed to do this.
PPLPMDL0020000001	Cleveland	OH	44103	3/29/2012	showed dr OxyContin visual aid,we discussed moderate to severe pain and where dr feels OxyContin is appropriate? dr said severe pain,we talked about appropriate patients that dr could start on OxyContin,showed conversion guide with percoet examples and asked dr if he would consider starting patients on OxyContin? dr said yes he will,focused dr on med part d patients,showed formulary grids.
PPLPMDL0020000001	Independence	OH	44131	3/29/2012	Dr Jack said he really should prescribe Butrans. I agreed that he probably has some appropriate patients to at least try it on, especially since they can try it now for 28 days if they have commercial insurance. I reminded him that I am not asking that he switch all of his patients, but simply to try one or two appropriate patients on Butrans if they are dissatisfied with their current pain control option. He said he would try. Started to position OxyContin for&patients&taking Percocet around-the-clock, but he just said he had to go & went into a room.
PPLPMDL0020000001	Parma	OH	44129	3/29/2012	Spoke with Veronica, floater pharmacist, as Bethany was busy assisting customers. Veronica said she had just finished school & was not familiar with Butrans. Reviewed appropriate patient type/range & gave her FPI & initiation guide. Discussed dosing, adverse events, & abuse/addiction potential. She asked if Butrans could be used in fibromyalgia. I told her there is no specification on what the chronic pain has to be caused from. Also discussed OxyContin appropriate patient type & importance of appropriate patient selection.
PPLPMDL0020000001	East Cleveland	OH	44112	3/29/2012	I asked doc if he sees any merit to a once weekly CII analgesic in a transdermal delivery system. âHe thought for a moment and said he sees that once weekly might be convenient but most of his patients require higher doses of narcotics. âI asked him if ALL of his patients required higher doses of narcotic or if he can thin of any that may be more moderate. âHe said maybe a few. âI asked him to try just one appropriate patient. âShowed the profile of William and Asked him to try 10mcg of butrans on a similar patient. âHe said he will try to find a patient.& Dr Gigliotti asked me what Dr Salama was doing with Butrans. I encouraged him to speak directly with Dr Salama to find out his thoughts & experience. I let Dr Gigliotti know that a variety of different specialists & physicians have found a place for Butrans in their practice because so many types of practitioners have patients who fit the appropriate patient type & range. Positioned Butrans for patients taking tramadol or Vicodin 3 times per day who are not well-controlled, reminding him that patients can take supplemental analgesia with Butrans. He said he knows he will find someone. Positioned OxyContin q12h for appropriate patients beyond Butrans range.
PPLPMDL0020000001	Parma	OH	44129	3/29/2012	showed dr emma,patient profile,asked dr if he's seeing patients like this? dr said yes,asked dr whats the next step for patients like emma? dr said vicodin.i asked dr if he would consider Butrans right after tramadol? dr said yes he would and is going to start a couple patients on Butrans,dr said insurance was only issue with him as he has so much medicaid,we discussed PA criteria for Caresource patients,asked dr if he will start a couple patients this week on Butrans? dr agreed to do this.
PPLPMDL0020000001	Cleveland	OH	44127	3/29/2012	dr said she started 3 patients on Butrans in the last 2 days and all 3 were Caresource patients and the PA was approved.i asked dr if she will start more patients on Butrans this week? dr said yes she will,showed dr Butrans initiation guide,focused dr on her patients taking cocaine but when they need a medication adjustment,starting them on Butrans.dr said ok she will do that.recommended Senokot-s
PPLPMDL0020000001	Cleveland	OH	44109	3/29/2012	dr talked to me about the 2 dinner programs,with dr laham and dr moufawad on 3/8 and 3/13,saying both HCP's said the same thing as they had to follow the slide deck,asked dr if there was anything he heard that gave him a different perspective on Butrans? dr said the opioid naive patient and dr laham talked a lot about his use of Butrans in these patients.i asked dr where he saw himself realistically starting patients on Butrans? dr said probably after tramadol or vicodin.i asked dr if he had any patients coming in this week that look like emma,patient profile? dr said yes,asked dr if he will start these patients on Butrans? dr said yes,focused dr on commercial insurance,caresource and BWC patients.showed OxyContin visual aid,we discussed moderate to severe pain scale and where dr starts patients on OxyContin,dr said severe pain would be where he feels comfortable with OxyContin but dr said he doesn't like starting patients on OxyContin,he's just maintaining the patients he has on OxyContin as he inherited them when joining the practice.i asked dr what he prescribes for moderate pain? dr said any 1 of the short-acting opioids.showed formulary grids and told dr i would talk to him next time about his geniatric patients that could start on OxyContin.dr said ok.
PPLPMDL0020000001	Cleveland	OH	44113	3/29/2012	talked to dr about his comfort level with Butrans and how he seems to know who's appropriate for Butrans,dr said he's comfortable with Butrans and does know who is appropriate he just hasn't started anyone yet.i asked dr whats holding him back? dr said nothing really he just has to remember Butrans and hopes insurance covers it,dr said he doesn't want hassles of new medication not being covered and patients calling back,etc.,we talked about commercial insurance patients being the focus for dr and giving patients the initial trial offer card,dr said he will do that,asked dr if he will start a couple patients today and tomorrow on Butrans to gain some clinical experience? dr agreed to do this.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	3/29/2012	worked premier physician offices-dr bhimani,dr sharma was on vacation and dr elbadaway
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	3/29/2012	Asked Randy(Pharmacist) if he knew if Butrans had come through the pharmacy? âRandy said there are 2 two patients on it currently but has not seen them in a while for refills...Dr Sable wrote for one of those patients.
PPLPMDL0020000001	Cleveland	OH	44102	3/29/2012	âRandy said that they do fill OxyContin prescriptions on a regular basis and wanted copy cards. âHas seen prescriptions of OxyContin from Kareti recently. âOthers from area pain medicine physicians.
PPLPMDL0020000001	Cleveland	OH	44102	3/29/2012	talked to Nagla about recommending Butrans to the HCP's in the office,Nagla said she's doing this with dr baihnaab and dr celeste.i asked Nagla if she could give patient info booklets to those patients she feels are appropriate and start them on Butrans? Nagla agreed to do this,focused Nagla on commercial insurance patients using initial trial offer cards and we discussed PA criteria for Caresource patients.
PPLPMDL0020000001	Strongsville	OH	44136	3/29/2012	Spoke with MA, Melissa, who said Karen was unavailable. Let Melissa know that Butrans savings cards were requested for the Strongsville location by staff at the Westlake office. Reviewed eligibility requirements for trial & savings cards. I asked Melissa to give my card & the savings information to Karen for Dr Grimm & she agreed.
PPLPMDL0020000001	Olmsted Falls	OH	44138	3/29/2012	I showed Emma patient profile and asked Dr if he has been able to find a patient like this taking tramadol around the clock with commercial&insurance. He said he is going to keep it in mind and he will try it when he dose see someone with commercial as that is the hardest part. I&reviewed&the&initiation&guide and he said he will keep it on hand.&
PPLPMDL0020000001	Euclid	OH	44119	3/29/2012	Doc came out and said "Butrans". âI asked him what else he remembers about butrans. âHe said it's a pain patch. âI told him yes and that butrans is a CII which can be called and refilled and it is a once a week patch. âI asked him what keeps him from trying it. âHe just said that he is going to write it. âI showed him the initiation tool and the starting doses. âI reminded him that he liked the idea of the trial month. âHe said is still going to try it.
PPLPMDL0020000001	Berea	OH	44017	3/29/2012	I reviewed the trial cards for Butrans and that he can use them for any commercial&insurance&patients. He said that he will. I showed the Emma patient profile and asked if he would think of patients taking tramadol. âI
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/29/2012	Patrick said that he continues to see both OxyContin and Butrans prescriptions come through the pharmacy and has been handing out the OxyContin copy cards. âNothing else learned.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/29/2012	Asked Dr Pitt if he is still prescribing OxyContin. âDr said he is still using it but insurance is becoming much more difficult in covering it. âHe admitted liking OxyContin and will continue to use regularly. âAsked Dr about Butrans and if he sees where it might fit in his practice. âDr said that he has been detailed a few times by the previous reps and used it on a couple of patients but its too expensive and a lot of his patients are past what Butrans can offer. Talked about managed care coverage for both products and explained the Butrans trial offer and copy cards. âDr said he will still use OxyContin as primary.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/29/2012	Caught dr at window and gave her the opioid experienced trial. âReviewed the inclusion criteria and asked her to go over the study. âDr said she would. âNothing else learned.
PPLPMDL0020000001	Euclid	OH	44119	3/29/2012	Spoke to David about the stocking and movement of butrans and oxycontin. He said that he still has not seen any scripts for it. âHe wanted to know if the pain docs at Euclid hospital are prescribing it. âI told him that I was not sure but most prescribers are pain docs. âI explained the positioning. after tramadol. âHe said oxycontin is still steady. âProvided initiation guide.&
PPLPMDL0020000001	Highland Heights	OH	44143	3/29/2012	Window call...I showed doc initiation sliding tool and and explained the starting doses for those patients taking tramadol or vicodin. âI asked which dose he tends to start patients on. âHe said either the 5 or 10mcg but most patients need the 10mcg. âI offered savings cards to Marianne but she said they still had some. âI reminded both of the trial month for new patients to the butrans savings program.
PPLPMDL0020000001	Garfield Heights	OH	44125	3/29/2012	Spoke with nurse, Denise, who requested more patient information booklets for Butrans. I asked if the practitioners have been handing them out with new prescriptions for Butrans & using them to help the patients understand how to use it. She said usually more they give them out with the savings cards. They had enough trial/savings cards. Reviewed eligibility requirements & discussed OxyContin savings cards. Denise said all the physicians try to avoid prescribing OxyContin. She said they try not to write CII medications. Inquired about doing a breakfast or lunch but she asked me to check back next month. Also gave her Partners Against Pain spiral book about medication routes/delivery systems & asked her to look through it & let me know if she would be interested in having her staff inserviced on different pain management topics. She agreed.
PPLPMDL0020000001	Cleveland	OH	44113	3/29/2012	deb said her patients are doing well on Butrans,no complaints and she just needed patient info booklets,we talked about what deb tells patients when starting Butrans,deb said she shows patients the application/rotation info in booklet and talks about rotating Butrans once a week,we talked about patients needing supplemental analgesia when starting Butrans and Deb said she does this,focused deb on Caresource patients and BWC

PPLPMDL0020000001	Shaker Heights	OH	44122	3/29/2012	Quick call- Dr Agarwal said he had no time today but will try to find a patient to try on Butrans. Reviewed dosing & titration with him, showing him the 3 strengths & how to write the prescription & reminded him of OxyContin's favorable managed care coverage on Medicare plans. He thanked me & walked into a room.
PPLPMDL0020000001	Parma	OH	44134	3/29/2012	Spoke with pharmacist, Jason, & reviewed Butrans core messages. Discussed dosing & titration. He said they dispense all 3 strengths. Reviewed new trial/savings program with him & discussed automatic savings monthly through e-voucher. Also discussed OxyContin savings cards. He checked their supply & they had not yet expired, so he did not need additional cards.
PPLPMDL0020000001	Cleveland Hts	OH	44118	3/29/2012	Quick call...I reminded doc that butrans is a CIII which can be refilled and called in. I asked doc if he has written it with refills. He said yes and that's what he likes about it. I asked if he has had to titrate any patients. He said not yet. I showed him the initiation guide and that he can go to 20mcg if necessary. I
PPLPMDL0020000001	Cleveland Heights	OH	44118	3/29/2012	Window call...Showed doc the butrans demo and reminded him that he expressed interest in prescribing butrans. I reviewed the indication and the positioning for more moderate pain and asked him what keeps him from trying butrans. He said he didn't know why and that he will try to prescribe butrans. I reminded him of the positioning - after failure on tramadol. I also reminded him of the one month trial.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	3/29/2012	Asked Amy if she has seen any Butrans or OxyContin prescriptions for the week. Pharmacy has not seen Butrans but a few OxyContin. I asked if she has reviewed copy card information for both products and reviewed dosing for Butrans.
PPLPMDL0020000001	Euclid	OH	44117	3/29/2012	I asked doc if he has had any feedback from the percoet patient he started on butrans. He said not yet so he is not sure if he is taking it or got it filled. I asked him if he remembers writing a refill for it. He said he believes that he did. I showed him the initiation guide and the starting dose for patients that may be failing on tramadol monotherapy. I explained that if they are taking more than 40mg of percoet, they may be more appropriate for a low dose of oxycontin. I provided oxycontin formulary grids.
PPLPMDL0020000001	Cleveland	OH	44109	3/30/2012	talked to erin, pharmacist, about any physicians writing Butrans in the area. Erin said she's not seen any Rx of Butrans. I asked erin who writes a lot of short-acting opioids in area, showed initiation guide? erin said dr nickels, deb torres, dr raheja and doctors from metro. we talked about 6 core Butrans selling messages, I asked Erin if she would be willing to give patient info booklets to those appropriate patients ready for a long-acting opioid, so patients can talk to their doctors about Butrans? erin agreed. confirmed OxyContin and we discussed formulary coverage for OxyContin-focus on commercial and med part d plans.
PPLPMDL0020000001	Uniontown	OH	44685	3/30/2012	Asked dr if he would use Butrans for a controlled release product instead of taking a patient to vicoden? dr said he has used it but doesn't remember if the patient is still on it. He said he used it after vicoden before percoet. I discussed proper patient for Butrans and to use it for moderate to severe chronic pain. dr took BUP 3015 and said he would review. nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44102	3/30/2012	talked to vince, pharmacist, about some writers of short-acting opioids in the area, I call on most of the physicians- dr celeste, dr baishnab, dr carson, dr nickels, dr shen. showed Vince Butrans initiation guide, we discussed dosage ranges for appropriate patients and I asked if he would give patient info booklets to patients so they can talk to their HCP's about Butrans? Vince said he'll do that. we talked about insurance-medicaid is biggest plan here, some BWC and commercial insurance. confirmed OxyContin stocking and discussed formulary coverage.
PPLPMDL0020000001	Brooklyn	OH	44144	3/30/2012	Reviewed core messages with Dr Keith & discussed appropriate patient type. Showed him appropriate range of patients for Butrans & discussed OxyContin q12h as an option for appropriate patients beyond Butrans range, especially if they are already taking Percocet. Dr Keith said "everyone" he sees is in pain & he probably has fewer patients not in pain than patients in pain. He went on to say that he just saw a 34 year-old male who has been complaining of severe back pain for the last 2-3 months. He said the patient hurt his back playing his X-Box gaming system. He added that the patient's MRI is unremarkable. I asked if he thinks that patient is in real pain & how he determines that. He said he believes this patient is probably not in true pain, or at least not as severe of pain as he reports. I asked what he does for a patient like this. He said he refers them out. I agreed that finding appropriate patients can be difficult. He directed him to patients who are in legitimate pain who he trusts & reminded him of Butrans's abuse & addiction potential due to it being an opioid. Positioned Butrans for appropriate patients with commercial insurance who are not well-controlled on 3 tramadol per day.
PPLPMDL0020000001	Brooklyn	OH	44144	3/30/2012	Reminded Dr Morgan of previous Butrans discussion & reviewed core messages. She said she remembers that Butrans is a patch for pain. Reviewed dosing & discussed titration. Discussed appropriate patient type, focusing on patients taking 3 tramadol per day who are asking for an increase in dose or dosing interval due to inadequate pain control. Reminded her that Butrans is a CII/III opioid with abuse & addiction potential & also that Butrans is the only CIII long-acting option available. She asked me to review insurance coverage with her. Showed formulary grid & reviewed trial & savings program. Discussed OxyContin q12h as an option for appropriate patients beyond the Butrans range.
PPLPMDL0020000001	Parma	OH	44129	3/30/2012	I asked Dr Roheny if he really thinks he will ever find a place in his practice for Butrans. He said he does think he should be able to find someone. I agreed that he probably sees an appropriate patient at least a few times every week. He told me the strengths (5, 10, & 20mcg). I told him he is correct & now just needs to identify an appropriate patient to at least try on it. I asked him if he has a patient who is taking 3 tramadol per day, who is not well-controlled & is requesting an increase in dose or dosing interval, what would the down side of trying that patient on Butrans instead of increasing their dose of tramadol or switching them to something like hydrocodone. He said he doesn't know. Reminded him of the ability of patients to take supplemental analgesia if necessary & discussed titration to a maximum of 20mcg. Discussed OxyContin as an option for appropriate patients beyond the Butrans range. I asked Dr Roheny to identify one patient who fits the description we talked about. He said he would do his best.
PPLPMDL0020000001	CLEVELAND	OH	44109	3/30/2012	I asked Rod, pharmacy mgr, about what patients are saying when he provides medication management therapy to those taking opioids for chronic pain. Rod said most patients want their pills and only questions were on side effects. showed Rod Butrans visual aid, opioid experienced patients, and we discussed initiation and titration of Butrans, showed patient info booklet and asked Rod if he would give booklets to those appropriate patients so they can talk to their doctors? Rod said yes he would do that. we discussed formulary coverage for Butrans and OxyContin.
PPLPMDL0020000001	Westlake	OH	44145	3/30/2012	Quick call with Jamie, he said they have not seen a ton of Butrans yet, I reviewed the appropriate patient types and asked if they might be able to recommend Butrans as an option and he said he might but most patients seem happy with their pills. I asked how he feels about that, and he said there's not much he can do if the doctor is ok with it and they are not going over their tablet limit. We reviewed that OxyContin is also an option for patients taking short acting around the clock. I
PPLPMDL0020000001	Cleveland	OH	44113	3/30/2012	showed dr OxyContin visual aid, we talked about appropriate patients and asked dr if he will start new patients this week on OxyContin? talked to dr about his med d patients starting on Butrans. asked dr if he's seen any patients like emma, patient profile, this week? dr said yes he's seen a lot of patients taking tramadol every day but he hasn't started anyone on Butrans. dr said his concern is that Butrans won't be covered on insurance plans because the branded drugs he's prescribed in past weren't covered. we talked about commercial plan coverage for Butrans, use of initial trial offer cards, and we talked about dr focusing on BWC plans. asked dr if he can start 2 patients in next week? dr said yes. recommended Senokot-S
PPLPMDL0020000001	Garfield Hts	OH	44125	3/30/2012	Dr Sadowski looked at me & said he is "working on it" & "thinking about it" with regards to Butrans. I asked him if he was just saying that because he thinks that is what I want to hear or because he has truly started to identify some appropriate Butrans patients. He said he really has been thinking of Butrans for patients but that he "has to try other things first". I asked him what that meant. He said he likes to try a patient on medications such as Lyrica before prescribing any opioids for anyone for pain. I asked him if he was speaking about a specific patient. He said yes. I asked him if he would prescribe Butrans for that patient if the non-opioid medication he put him/her on did not help them. He said he would. He asked me to review dosing & managed care coverage with him. I showed formulary grid & dosing with initiation tool & guide. Also reminded him of trial/savings cards & discussed prior authorization requirements for CareSource. Dr Sadowski asked me to go over it with Deena again too & he asked her to help him remember the patient they had discussed that he told me about. Discussed these details with Deena who said she has other patients in mind for Butrans as well & will alert Dr Sadowski when they call or come in. I let him know I would be following up about this conversation & also positioned OxyContin for appropriate patients beyond the Butrans range who may like having a q12h option.
PPLPMDL0020000001	Brooklyn	OH	44144	3/30/2012	Reviewed Butrans core messages with Dr Silverman & discussed appropriate patient type & range for Butrans, including OxyContin q12h as an option for appropriate patients beyond this Butrans range. Focused him on patients taking tramadol 3 times per day who are not well-controlled on this dose, perhaps asking for an increase in dose or dosing interval. Reminded him that Butrans is the only long-acting CIII opioid & also reminded him that Butrans is still an opioid with abuse & addiction potential. Reviewed commercial insurance coverage & savings/trial program. I
PPLPMDL0020000001	Mayfield Hts	OH	44124	3/30/2012	Quick call....Doc was in the middle of procedures. He said Butrans is going well. He is writing it more and the patients seem to like it. I reminded him that new patients to the savings program can get a one month trial. He said that's what he has been telling patients.
PPLPMDL0020000001	Parma	OH	44134	3/30/2012	Spoke with Mercedes, pharmacist, & inquired about current Butrans stocking. She said they do stock Butrans. I asked what strengths. She said they have 2 of the 3 strengths & have a few patients on it regularly. Reviewed savings program & eligibility. Also asked which of the 7 strengths of OxyContin they stock. She said they order it on a case-by-case basis. I asked if they see new prescriptions for it or only continuing. She said mostly continuing but occasionally a new script. I
PPLPMDL0020000001	Cleveland	OH	44113	3/30/2012	showed dr Emma, patient profile, asked dr if she's seen patients like this, this week? dr said yes a couple patients. dr said she's not started anyone on Butrans but she's given patient info booklets to these patients and will follow-up with them in a few weeks. I asked dr if she will start 2 patients between today and next week on Butrans? dr said she will look and see who's coming in next week and if appropriate she will start patients on Butrans. focused dr on commercial insurance patients and them using initial trial offer cards. recommended Senokot-S
PPLPMDL0020000001	Barberton	OH	44203	3/30/2012	Asked pharmacist what medicines they fill most often for pain. I asked pharmacist to tell me that they fill a lot of vicoden and percoet. was told that percoet comes mostly from pain management and oncology. I asked vicoden comes from family medicine. Reviewed OxyContin initiation and conversion guide and the same for Butrans. I asked the pharmacy has not seen Butrans lately. I asked product guides for both products.
PPLPMDL0020000001	Lyndhurst	OH	44124	3/30/2012	I showed doc the butrans demo and the formulary grid. I explained that while medicare may not cover butrans but it is well covered commercially and with the savings card, new patients can get a trial month. He asked about the cost after the trial month. I explained the up to \$40. He said "very good".
PPLPMDL0020000001	Mayfield Heights	OH	44124	3/30/2012	Spoke to Marcia about the movement of butrans. He said that she has only filled a couple of times. I asked if she has seen any refills on it. He said he did not recall. I explained the positioning of butrans and that he can be called in and refilled. He said that docs should be writing more patches than pills anyway. I explained the savings cards and the trial month available.
PPLPMDL0020000001	Cleveland University Heights	OH	44109	3/30/2012	worked pm&R dept
PPLPMDL0020000001	Cleveland University Heights	OH	44121	3/30/2012	Quick call....I reminded doc of the butrans indication and positioning. I asked him if he would consider a product like butrans for patients needing a dose adjustment to their short acting analgesic. He asked how much it cost. I gave him a formulary grid and asked him to give patients a savings card. I
PPLPMDL0020000001	Westlake	OH	44145	3/30/2012	I showed the trial cards for Butrans and asked if he would try a few patients today, he agreed. I showed emma and william case study and he said these are the patient types that he sees in the office. I
PPLPMDL0020000001	Mayfield Heights	OH	44124	3/30/2012	Spoke to Scott Naples about the stocking of butrans. He said he does not have and has not seen a script for it. He was aware of the product through a CE. I explained the positioning and indication. He said he does get scripts from the hillcrest pain mgmt and asked if they are writing it. I told him they are. I asked if he has a script for a few of branded narcotics. He said it depends. I said the docs write for branded and they get the script, they will order it. I provided the initiation guide and explained the application and rotation.
PPLPMDL0020000001	Akron	OH	44320	3/30/2012	asked dr Bonyo if he remembered Butrans and showed him the patch. I explained placement for this product in his practice and reviewed initiation and titration guide. I asked dr if he uses OxyContin. dr Bonyo said he does not use much but he likes the managed care coverage. nothing else learned
PPLPMDL0020000001	Cleveland	OH	44109	3/30/2012	dr said he's starting patients on Butrans pretty regularly, no issues with patients getting started except for a few PA's with CareSource. asked dr how his patients are doing on Butrans? dr said good, he hasn't heard any complaints about side effects so he's assuming all is well if patients are calling his office. I asked dr who he still considers to be appropriate for Butrans? dr said patients taking a couple tramadol or vicodin or percoet every day for chronic pain but not controlled, when he has patients asking for more pills because their current dose isn't controlling the pain, that's where he's stopping and telling them about Butrans and starting patients. we talked about initiation, titration, patient info booklets being given to every patient and follow-up discussions with patients. I asked dr for his commitment to start more patients on Butrans today-next week? dr said he will do that. recommended Senokot-S



PPLPMDL0020000001	Cleveland	OH	44109	3/30/2012	showed dr patient profiles emma and william,asked dr where he would feel comfortable prescribing Butrans? dr said either patient he would consider Butrans.dr said it depends on the patient.asked dr to explain what he meant by that? dr said not every patient wants to wear a patch for chronic pain and insurance is a big factor.dr said he has a lot of medicaid patients.i asked dr if he has a couple medicaid patients in mind that he would like to prescribe Butrans for? dr said yes he does. we talked about PA criteria for Caresource and asked dr if this sounds reasonable to do? dr said yes.asked dr if he will start a couple patients on Butrans between today-next week? dr agreed to do this.we talked about initiation and titration of Butrans. recommended Senokot-S
PPLPMDL0020000001	Akron	OH	44319	3/30/2012	Asked Jim(pharmacist) if he has seen Butrans filled in the pharmacy. äJim said he has on a few occasions. äReviewed dosing and titration and application site information from patient guide. äJim did not know application sites or rotation schedule. äPharmacy does see OxyContin on a regular basis. äJim would not give me any physician information on either product. äDiscussed trial offer and copay card information on both products.
PPLPMDL0020000001	akron	OH	44304	3/30/2012	Showed Dr Adams the placebo patch and asked her if she remembered what it was. äDr could not remember at first then finally remembered and said she remembers its a CIII, 7 day patch. äReviewed key selling messages and asked her to use it when her patients on ultram and vicodin fail. nothing else learned.
PPLPMDL0020000001	Westlake	OH	44145	3/30/2012	Quick call at the window, i showed dr the inclusion criteria for OxyContin and asked if will think of OxyContin Q12hr dosing for these patients. He said that he will. I left Butrans initiation guide and asked Laura to remind him that patients can get a month trial and she said she will help remind him.
PPLPMDL0020000001	Cleveland	OH	44109	3/30/2012	i talked to dr about patient profile,william,asked dr how often he see's patients like this? dr said every day.dr said he has a lot of patients taking vicodin.dr said he likes the idea of Butrans being an option for patients and has a couple patients on Butrans.i asked dr how his patients are doing on Butrans? dr said they are doing good no problems now.i asked dr if he will see more patients today-next week that look like william? dr said yes he will.i asked dr if he will start these patients on Butrans when a medication adjustment is necessary? dr agreed to do this.recommended Senokot-S
PPLPMDL0020000001	Lyndhurst	OH	44124	3/30/2012	i reviewed the butrans key selling messages and the positioning after tramadol patients come in for a dose adjustment. äI asked her if she would be willing to try a patient like this on butrans. äShe nodded and asked about the dosing. äI showed her the sliding initiation tool for starting doses. äI reminded her to give a savings card to commercially insured patients. äShe wanted confirmation that butrans is not covered on medicaid. äI told her that Caresource will cover it with a PA after failure on a short acting opioid.
PPLPMDL0020000001	Akron	OH	44319	3/30/2012	Dr said he has read about Butrans in his medical Journals. äAttempted to explain the product but dr said it is on his mind and to not worry about it.....Asked for OxyContin use instead of moving to percocet after vicodin failure.
PPLPMDL0020000001	Mayfield Hts	OH	44124	3/30/2012	I asked doc what keeps him from prescribing to Butrans. äHe said he just keeps forgetting about it. äI asked if he sees any benefit to a once a week CIII in a transdermal. äHe agreed that he did and asked to be reminded of the coverage again. äI showed him the formulary grid and explained the BWC coverage. äHe said he would try it.ä
PPLPMDL0020000001	Brooklyn	OH	44144	3/30/2012	Dr Charles said he was on his way out of the office & he had no time for a discussion today. Positioned Butrans for patients taking tramadol 3 times per day who are saying they would like an increase in dose or dosing interval because their pain control is not adequate. Reviewed dosing & showed initiation slide-out tool. Also reminded him that Butrans is a CIII opioid with abuse & addiction potential. He said he would keep it in mind & then walked
PPLPMDL0020000001	Westlake	OH	44145	3/30/2012	Spoke with Lisa, I asked how often patients have questions about their pain medications, she said not often. Iaskedäwhat info she thought would be important to tell the patients about Butrans and she said where and how to apply and weäreviewedäthe medication guide. If she would let patients know about Butrans as an option and she said she will if patients talk to her.äReminderräthat OxyContin is a Q12hr option instead of hydrocodone around the clock.ä
PPLPMDL0020000001	Akron	OH	44312	3/30/2012	Showed dr the placebo Butrans patch. äExplained to dr that if he prescribes celebrex or Ultram and patiens fail to initiate Butrans. äExplained application sites and asked for him to use it. äDr agreed he would use it prior to OxyContin and likes the CIII of Butrans. äAgreed to give it a try.
PPLPMDL0020000001	Mayfield Village	OH	44143	3/30/2012	I reminded HCP of the appropriate butrans patient type, formulary coverage, and the starting doses. äShe said the problem is the coverage because they have a lot of medicare. äI asked her to think of those medicare patients that may also have supplemental insurance. äShe agreed that there are some. äReminded her that commercially insured patients can get a trial month. äShe Liked the initiation tool. äShe said they are cutting back on their prescribing of narcotics in general.
PPLPMDL0020000001	Lakewood	OH	44107	4/2/2012	Spoke with Megan, she said she has still not seen any Butrans and asked if it's covered on Medicaid. She said that the reason may be due to the fact that most of her patients at this pharmacy are Medicaid. äIreviewedäthat Caresource is covering Butrans with a Prior auth and she said that may be the only hope in getting scripts at this location. Weäreviewedäthat OxyContin is an option for patients who are taking hydrocodone around the clock.
PPLPMDL0020000001	LAKEWOOD	OH	44107	4/2/2012	Spoke with Ronnie, we discussed the Butrans medication guide and they still have some on hand to give out to patients. I asked what types of questions do patients have about their pain medication and said not many. I reviewed that there is a savings program for both Butrans and OxyContin and they will make sure that theäpatientsäknow about the savings.ä
PPLPMDL0020000001	Lakewood	OH	44107	4/2/2012	I reviewed that low dose OxyContin is an option for patients taking 4 hydrocodone or oxycodone. I asked if he would prescribe OxyContin for patients like these. He said he would, but it is just so cheap to increase their vicodin and patients do not want to pay more for a brand name like OxyContin. I reviewed that commercialäinsuranceäpatients can get OxyContin for \$25 with the savings cards. He said that he does think it is a good option for certain patients. I asked if he wouldäprescribeälow dose OxyContin for theäpatientsätypes we discussed and he said he would. I asked if he sees a place for Butrans and he said he just forgets about it. I discussed a patient like Emma who is taking tramadol around the clock. I asked if he has these types of patients and he said that he does. Iaskedäif he would try Butrans instead of going to vicodin and he said he will. Leena said she will help remind him. Weäreviewedäthe savings cards for Butrans and managed care for Caresource. I spoke with Angela regarding the prior auth for Angela and she said it would not be a problem to do it.ä
PPLPMDL0020000001	Parma	OH	44129	4/2/2012	Caught Dr Taylor quickly between patients. Passed back information on online interactive programs & encouraged her to log on. Positioned Butrans for patients who she is ready to start on an around-the-clock regimen of Vicodin if they have a chronic condition. She said she is still keeping it in mind. Positioned OxyContin q12h for patients beyond Butrans range, especially if they are already taking an around-the-clock dose of Percocet.
PPLPMDL0020000001	Independence	OH	44131	4/2/2012	Spoke with Dave, pharmacist, & reviewed Butrans appropriate patient type. Also reminded him of savings programs for Butrans & OxyContin & reviewed eligibility requirements.äReviewedämanaged care coverage for Butrans, pointing out most favorable access on commercial insurance plans & discussed prior authorization requirements for Butrans for Caresource.ä
PPLPMDL0020000001	Cleveland	OH	44106	4/2/2012	showed dr OxyContin visual aid,we discussed moderate to severe pain scale and appropriate patients,dr said he writes a lot of OxyContin and thinks its a good long-acting opioid.i asked dr who he considers appropriate for OxyContin? dr said patients who have tried other short-acting opioids and are maxed out he will consider a long-acting opioid.dr said he usually considers his older patients appropriate to start on OxyContin.showed dr OxyContin FPI,section 8.5 geriatric use,asked dr if this info surprised him? dr said not really he knows OxyContin works and is fine prescribing it.i asked dr if he will start a couple new Med part d patients this week on OxyContin? dr agreed. we talked about appropriate patients for Butrans,showed initiation guide,asked dr if he will consider a couple patients this week to start on Butrans? dr said yes he likes Butrans,has started a couple patients and will consider starting more on Butrans.recommended Senokot-S
PPLPMDL0020000001	Lakewood	OH	44107	4/2/2012	I asked doctor if he has thought about where Butrans might fit into his practice and that in the past we talked about patients taking tramadol around the clock. He said that he will keep it in mind. äIäaskedäRobin if she has had any success in giving the doctor a savings card for Butrans when she sees an appropriate patient, she has not but said she will do this.äReminderräthat we also have the OxyContin savings program as well.ä
PPLPMDL0020000001	Cleveland	OH	44106	4/2/2012	showed dr patient profile,william,we talked about dr seeing patients like william,dr said he only has a handful of patients taking narcotics for chronic pain.dr said he thinks Butrans is a great option being that its a once weekly dosing option and is in a patch.i asked dr if he would consider starting patients like william,on Butrans,when a medication dosage adjustment is necessary? dr said yes he would but hasnt had anyone he felt needed to start on Butrans lately.i asked dr if he would consider 1-2 patients this week,to start on Butrans,that look like william/patient profile? dr said he will consider it.showed dr OxyContin visual aid,we discussed appropriate patients,dr said he doesnt ever write OxyContin but appreciates info
PPLPMDL0020000001	Cleveland	OH	44106	4/2/2012	showed dr emma,patient profile,asked dr if he's seen any patients like this recently? dr said yes every day he see's patients taking tramadol who arent controlled and need something else.dr said he likes Butrans,has started a couple patients on Butrans but insurance has been a challenge.asked dr what insurance plan? dr said medicaid.we talked about PA criteria for Caresource patients and i asked dr if that seemed feasible? dr said yes that was easy to do and would make a difference in him starting more patients on Butrans.asked dr if he will start a couple patients on Butrans this week? dr agreed.focused dr on caresource and commercial insurance patients.showed dr OxyContin visual aid,we discussed appropriate patients,asked dr where he would consider OxyContin appropriate? dr said patients with severe pain,dr said he only has a couple patients on Oxycontin and thats it he doesnt prescribe a lot of OxyContin.we talked about dr considering his geriatric patients,to start on OxyContin,and discussed med part d plans coverage for OxyContin.dr said he will consider that.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44106	4/2/2012	showed dr emma,patient profile,we talked about starting patients like this on Butrans when a medication dosage adjustment is necessary.dr said she likes the notion of a long-acting opioid in a once weekly dosing option and in a patch but she's not had anyone recently that she's felt was appropriate.dr said i can talk to the attending physicians as she consults with all of them on her decisions for patients opioids.i told dr i have been working with the attendings and will continue to discuss Butrans as an option for patients.i asked dr if that would help her feel more comfortable with Butrans,if the attendings were recommending it? dr said yes it would.we talked about side effects of Butrans and i asked dr if anything stood out to her that was unusual,for opioids? dr said no nothing stood out to her.i asked dr if she would be comfortable starting 1 patient this week on Butrans? dr said she will think about it and if appropriate will do so.we discussed insurance coverage-focus on commercial insurance and caresource patients.showed dr OxyContin visual aid,we discussed appropriate patients,dr said she doesnt start anyone on OxyContin.focused dr on geriatric patients starting on OxyContin
PPLPMDL0020000001	Parma	OH	44129	4/2/2012	Reminded Dr Rossi of our previous conversation when we discussed Butrans as an option for appropriate patients in the age range of 50-60, still working, with chronic low back pain or osteoarthritis, especially if their short-acting opioid was not controlling their pain. Discussed once weekly transdermal dosing & Butrans as a CIIIäopioid, the only long-acting CIII available. Reminded her of abuse & addiction potential. I asked if she has any concerns treating this type of patient with a long-acting opioid. She said no. Discussed commercial insurance coverage & reviewed trial/savings program. I asked who she is thinking of trying Butrans on. She said she would try it on the patient type we were talking about, repeating that it would be a 50-60 year old patient with chronic, moderate pain who was not getting relief. I asked if she would really do this & she said yes. I asked where she generally uses OxyContin. She said she tries to avoid it, but will prescribe in elderly patients in severe pain. Showed conversion guide pg 10 & pointed out that appropriate patients on Percocet 4 times per day could try OxyContin q12h, getting the same amount of the same molecule. Also discussed 7 tablet strengths for dosing flexibility. Reviewed Medicare D coverage. I asked if she would continue to prescribe OxyContin for appropriate
PPLPMDL0020000001	Akron	OH	44333	4/2/2012	Asked Dr if she has had any new starts on Butrans or OxyContin? äDr said no on Butrans but is trying to remember. äAsked her to use after Tramadol or Vicodin. Dr agreed to use. äAsked her to use OxyContin instead of percocet. äExplained Partners Against Pain USB pain management pain kit office tools to Hope(receptionist), Michele(Offc mgr) and Elyse(ma). äStaff loved the information and agreed to show it to Dr Brown.
PPLPMDL0020000001	Lakewood	OH	44107	4/2/2012	Quick call, I showed the pull out tool for Butrans and reminded him that he told me he had patients he thought might be appropriate. He said he is keeping Butrans in mind.ä
PPLPMDL0020000001	Akron	OH	44303	4/2/2012	Asked Rod if he would hand out Butrans patient information kits to patients that may come in with a prescription. Road agreed to use. Asked him if he has seen Butrans yet? äRoad said no but he sees OxyContin daily and has already used a copay card.
PPLPMDL0020000001	Lakewood	OH	44107	4/2/2012	I asked if he wouldäprescribeäButrans if managed care was not an issue. He said that he would consider it. I reviewed Butrans as an option after tramadol instead of going to vicodin and he said that he would. äI showed him the managed care and he said that he will focus on commercial insurance. I reviewed that OxyContin is an option that he has coverage for Med D.ä
PPLPMDL0020000001	Cleveland	OH	44104	4/2/2012	showed dr OxyContin conversion guide,asked dr to share with me how he's going to manage his patients taking percocet for chronic pain,since he isnt prescribing OxyContin anymore? dr said he's going to tell patients they can have tramadol,vicodin or even try Butrans because he's not prescribing CII opioids anymore.i asked dr if he has patients over 65yrs that he feels could be appropriate for OxyContin? dr said he only has hospice or nursing home patients on OxyContin and would give them that medication.i told dr that was great he felt comfortable still prescribing OxyContin for these patients and asked if he would continue doing that? dr said yes.focused dr on med part d patients for OxyContin new starts.showed dr william,patient profile,asked if dr saw these patients? dr said yes.asked dr if he would consider starting these patients on Butrans when a medication adjustment is necessary? dr said he would do that.focused dr on caresource and commercial insurance patients starting on Butrans.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/2/2012	Asked Dr Pitt if he is having any issues getting OxyContin for his patients? äDr said it is becoming more difficult but he has so many patients on it that they do what is needed to get it. äAsked Dr to use lower doses for patients and start it earlier in hisäalgorithm. äAsked Dr if he reviewed the Butrans trial for experienced patients? äDr said no but its on his desk.
PPLPMDL0020000001					

PPLPMDL0020000001	Cleveland	OH	44106	4/2/2012	worked apm dept-see call notes; worked internal medicine-left Butrans fpi,initiation guide,patient info booklet and BUP3015 for each Chief Resident and Dr.Armitage and same Butrans info for Dr.Truax and Dr.Marsh-Family Medicine
	Cleveland	OH	44104	4/2/2012	showed dr butrans initiation guide,we discussed appropriate dosage ranges and i asked dr if she will start a couple patients this week on Butrans? dr said she is considering Butrans for some patients but not every patient wants to wear a patch for their chronic pain.i asked dr if she would be willing to hand out the butrans patient info booklets to those patients that she feels are appropriate and follow-up with them? dr said yes she will do that and has given some booklets out.i asked dr if she feels comfortable starting patients on Butrans? dr said yes she is comfortable,we discussed initiation and titration and focused dr on caresource and commercial insurance patients.showed dr OxyContin visual aid,asked dr where OxyContin fits into her treatment plan? dr said she rarely starts patients on OxyContin but if she did it would be for severe pain,dr said she doesnt like to prescribe Asked Jason if the pharmacy stocked Butrans and OxyContin. âPharmacist said that they do see a couple of patients on Butrans and have the Sand 10mcg in stock. âThey are stocking OxyContin and very much wanted savings cards. âJason could not remember the physician that had prescribed Butrans and said he did not have time. Explained Butrans as a CIII, 7 day patch, dosing and titration and gave indication from FPI. âPharmacy does have e-voucher. âReviewed saving card and trial offer info.
PPLPMDL0020000001	Akron	OH	44305	4/2/2012	
PPLPMDL0020000001	Akron	OH	44333	4/2/2012	Gave Butrans Key selling messages and asked if the pharmacy had in stock? âPharmacist said yes but told me she didnt have time to talk. âLeft OxyConmtin dosing and conversion guide.
PPLPMDL0020000001	Brooklyn	OH	44144	4/2/2012	Spoke with pharmacist, Kristlen, & reviewed savings programs for Butrans & OxyContin. I asked if she has seen any new prescriptions for OxyContin lately or if they are only seeing continuing scripts. She said almost all continuing but they do see a new script occasionally. She said they are cautious with who they fill prescriptions for. I agreed that they should be alert & that all opioids carry abuse & addiction potential, so they should remain cautious with these medications, including Butrans & OxyContin.
PPLPMDL0020000001	Lakewood	OH	44107	4/2/2012	I reviewed the managed care for OxyContin and that patients who are taking hydrocodone around the clock can have Q12hr dosing with OxyContin. He said he does prescribe for his patients and will continue.â
PPLPMDL0020000001	Cleveland	OH	44106	4/2/2012	showed dr emma,patient profile,dr said he does see patients like this but doesnt have a lot of patients taking narcotics for chronic pain.dr said patients get pumps,injections other surgical procedures for their pain.i asked dr if he will consider Butrans for patients that look like emma,taking tramadol but need a medication adjustment? dr agreed.we talked about OxyContin being an option for patients,showed dr visual aid,dr said he rarely writes long-acting opioids like OxyContin or duragesic but would keep info in mind.recommended Senokot-S
PPLPMDL0020000001	Beachwood	OH	44122	4/2/2012	Caught Dr Myton-Craig between patients. Positioned Butrans for patients for whom she is considering starting onâVicodin. Discussed Butrans as a once weekly transdermal system in the CIII class, reminding her it still has abuse/addiction potential. Reminded her of Butrans coverage on commercial plans & pointed out Medical Mutual. Also gave her another package of trial/savings cards & reviewed the program. She said she did not know where the other cards went but would put the new ones in the sample closet. Also positioned OxyContin for patients beyond Butrans range & showed savings cards. She said she does not need any cards.
PPLPMDL0020000001	Parma	OH	44129	4/2/2012	Quick window call- Dr Ortega said he is still finding patients for butrans & is having success with it. He asked what is going on with BWC regarding OxyContin & other pain medications. Discussed prior authorization requirements & let him know the most up-to-date information can probably be found online & he may have received a letter about it. Spoke with Cindy who said Dr Ortega has still been filling in for Dr Marshall. I asked if she needed any Butrans or OxyContin savings cards for the other location. She said it is all BWC there so they could not use the cards. She also gave me address & phone information for Dr Blackburn, who she recommended again that I see regarding Butrans. Let her know I would investigate.â
PPLPMDL0020000001	Cleveland	OH	44104	4/2/2012	showed dr OxyContin visual aid, we discussed moderate to severe pain scale and dr said he typically considers OxyContin appropriate for his severe pain patients.dr believes he can control patients pain with other short-acting opioids first before having to prescribe a long-acting opioid like OxyContin.showed dr OxyContin fpi geriatric section 8.5,asked dr if this info was surprising to him? dr said no he has a lot of hospice and nursing home patients taking OxyContin and doesnt have a problem prescribing it,he just doesnt start a lot of his clinic patients on OxyContin.i asked dr why not? dr said its a trust issue with some patients.i asked dr if he has any patients 65yrs+ that come to the clinic that he trusts where OxyContin could be appropriate? dr said probably a couple patients he could consider, focused dr on med part d patients and asked dr to start a couple new elderly patients on OxyContin this week? dr said he will do that we talked about Butrans being an option for patients under 65yrs of age,with commercial insurance or caresource,showed initiation guide,asked dr if he will start 1 patient on Butrans this week? dr said he will if patients are willing to try the patch and insurance covers Butrans.
PPLPMDL0020000001	Akron	OH	44309	4/2/2012	Barb is the Director of Clin Mngt which is over Case, Utilization & Disease Mngt. There are about 35 RNs and 5 non-clinical Asst's. She does work with Medical Directors, however, Dr. Terri Koenig is not longer the CMO. There do educational programs occasionally, however, pain is not in their top 5 list of disease states. It's in top 10 but there aren't restrictions to pain procedures/meds anymore. The only part of utilization review they've seen associated with pain is frequent ED visits. I reviewed our Med Ed CE Catalog which she was very impressed with it. We discussed different ways to offer CEs whether to the CMs or when the CMs interact with HCPs. Barb asked for an order of 40 catalogs. I then reviewed options for education programs by showing FACETS, LELE & ASAP modules - she esp liked LELE. Finally I showed the Safeguard my meds & How to Protect brochures which she asked for 500 brochures each. They have RNs who are required to follow up with patient from SNIP as well as older patients and she wants these RNs to have these brochures with them when speaking with members. Barb meets with other RNs & Medical Directors every month and is interested in sharing all of the various pain resources with the group. I offered to put together packets for her to review with them and she thought it was a great idea - 25 packets. She present in next month then F/up with me. â â
PPLPMDL0020000001	Cleveland	OH	44130	4/3/2012	Caught Dr Fedorko quickly between patients in the sample closet. He showed me that he keeps his Butrans initiation tool with his trial/savings cards. I told him having it ready is half the battle & using it for an appropriate patient is the other half. He said he does try to find patients, then he left the room.
PPLPMDL0020000001	Parma	OH	44129	4/3/2012	Reviewed Butrans core messages with Lucy & spent time going over appropriate patient type & range. She said she generally does not make medication changes as Dr Kushnar takes care of that. I asked if she ever makes suggestions to her about what therapy may be good for a patient. She said occasionally, but not usually. âI asked if she feels comfortable enough with Butrans that she would be able to identify potential candidates for it based on their patient type. She said she does. Discussed Senokot-S for medication-induced constipation.
PPLPMDL0020000001	Parma	OH	44129	4/3/2012	Dr Kushnar asked if Butrans is covered by BWC. I told her as of right now, BWC is paying for Butrans without prior authorization. She said she has started working some hours at an urgent care facility & she thinks she could use Butrans in some of those patients because they seem to come in when their short-acting pain medications are not working long enough. Reviewed indication & discussed the importance of appropriate patient selection. Also discussed that Butrans is a CIII opioid with abuse & addiction potential. I asked her to share her thoughts on using long-acting opioids in general, such as OxyContin. She said she does have a patient on OxyContin. She said she typically uses long-acting medications such as Duragesic or OxyContin in older patients because she is not as worried about abuse with that population. I asked if she has patients in her practice ages 50-60, still working, who have pain from conditions such as osteoarthritis or low back pain. She said she does. Showed her how a patient like that who is currently taking up to 80mg oral morphineâequivalentsâmay be candidates for Butrans once weekly, while those taking more than 80mgâequivalentsâmay be candidates for OxyContin q12h. Discussed the ability for patients to takeâsupplementalâanalgesia.â
PPLPMDL0020000001	Independence	OH	44131	4/3/2012	Dr Sundaram told the resident he was with that I sold Butrans & told her it is a "Buprenex patch". I said Butrans is buprenorphine in a once weekly transdermal system. He said he wishes he could get it in the nursing homes, but it is not covered for those patients, so he does not get a lot of chances to use it. I agreed that commercially insured patients are the population that will have the most access to Butrans at this time. I asked if he sees patients in his office who are 50-60 years old, still working, who suffer from pain due to osteoarthritis or low back pain. He said yes, but most office patients "just want to take Percocet". I suggested that appropriate patients taking around-the-clock Percocet could be candidates for an appropriate dose of OxyContin q12h. I went on to say that patients could get the same amount of oxycodone in a q12h dose. He said he would do his best.
PPLPMDL0020000001	Cleveland	OH	44114	4/3/2012	Recommended Senokot-S for opioid-induced constipation & left samples. talked to Laura,Pharmacist,about physicians in area writing short-acting opioids,Laura said dr nickels,dr patel,dr boyd,dr carson,dr celeste,dr agra and dr rodriguez are some of the biggest writers of opioids.i asked Laura if there was anyone i should talk to about Butrans? laura said all of the HCP's we discussed,told her i have done that,showed laura Butrans visual aid and we discussed opioid experienced patients starting on Butrans,initiation and titration of Butrans.i asked Laura if she would continue handing out booklets to appropriate patients so they can talk to their HCP's? Laura agreed to do this.we discussed appropriate patients for OxyContin,showed visual aid and conversion guide and Laura said she's not seeing a lot of new Rx for OxyContin,same patients getting OxyContin every month,we discussed my message to doctors of starting new Geriatric patients-showed Laura section 8.5,geriatric use,in oxyContin fpi,left conversion guide and laura said she wont recommend OxyContin for patients to HCP's but she will keep the conversion guide in case she gets any questions from HCP's about converting patients to OxyContin.left senokot-s protocol pads and recommended senokot-s
PPLPMDL0020000001	Cleveland Heights	OH	44118	4/3/2012	I reviewed the key selling messages of Butrans, confirmed that doc has prescribed butrans before. âI asked him what keeps him from trying butrans again. âHe asked if the coverage has gotten any better. âI reviewed the commercial plans and the coverage by Caresource after failure on a short acting and the savings cards offering a trial month to new patients. I used the initiation tool to show him the appropriate starting doses. âI asked him to try it for an appropriate patient. âHe said ok.
PPLPMDL0020000001	Cleveland	OH	44130	4/3/2012	I asked Dr Diab for what type of patient he typically prescribes OxyContin for. He said he writes it for patients who need long-acting pain control medication. I asked him how he determines who "needs" a long-acting option. He said when their short-acting medication is no longer controlling their pain. He said he did not have any more time. Positioned Butrans for appropriate patients taking up to 80mgâequivalentâoral morphine per day.
PPLPMDL0020000001	Parma	OH	44129	4/3/2012	Showed Dr Paat 7 OxyContin tablet strengths. He said he has a patient in severe pain who is on the 80mg OxyContin tablets q12h & Percocet for breakthrough pain. I told him that he can prescribe more than 80mg of OxyContin q12h if necessary. He said he might have to do that for this patient. I showed conversion guide pg 10 & asked if he has any patients who are taking Percocet around-the-clock. He said he does. I showed him that appropriate patients taking Percocet q6h could be converted to a q12h dose of OxyContin as low as 10mg q12h, depending on their dose of Percocet. I asked if patients ever complain about having to take pills multiple times per day. He said yes. I asked if he thinks some of them might like the option of taking the medication q12h. He said yes. I asked him to identify perhaps one or two appropriate patients taking around-the-clock Percocet & switch them to an appropriate dose of OxyContin. He agreed. Also discussed Butrans once weekly for appropriate patients taking less than 80mgâequivalentâoral morphine per day.
PPLPMDL0020000001	Cleveland Hts	OH	44118	4/3/2012	Spoke to Cynthia and Dorothy (MA and Receptionist) about the product portfolio and range of appropriate patients. âThey were both aware of oxycontin but not sure if doc had prescribe butrans. âI reviewed the key selling messages.
PPLPMDL0020000001	Cleveland	OH	44127	4/3/2012	talked to dr about her 3 patients she started on Butrans,dr said patients got Butrans from the pharmacy,applied the patch and are doing well,dr said no complaints so far so thats a good thing.i asked dr if she will have more patients like these 3 that she can start on Butrans over the next 2 weeks before i see her again? dr said yes she will start a couple more.focused dr on her codeine patients that need a medication adjustment,starting them on Butrans and focused dr on caresource patients.
PPLPMDL0020000001	Cleveland	OH	44195	4/3/2012	left Butrans fpi,initiation guide,patient info booklet,my business card and leave behind Journal of Pain study for Anne Crawford,NP in APM dept-couldnt see her; did talk to medical secretary Pat,who works with dr stanton-hicks and Anne Crawford-she said just leave info at front desk and they will both look it over
PPLPMDL0020000001	Cleveland	OH	44130	4/3/2012	Spoke with Area Pharmacy Manager who said they did not have a regular pharmacist in today. Discussed Butrans dosing & stocking. He said they stock it at most of his locations, depending on need/demand. I presented patient information booklets & showed application/rotation & disposal. He said that would be a useful tool to possibly save on calls back to them about instructions for use. Gave him a few to keep on hand. Discussed OxyContin stocking & 7 tablet strengths.
PPLPMDL0020000001	South Euclid	OH	44121	4/3/2012	Window call....i showed doc the profile of Emma and asked if she has any patients that present like this. âShe said maybe but they are not necessarily taking that much tramadol per day. âI explained that Butrans can be used for opioid naive patients so they dont need to be taking 200mg/day. âThey may be appropriate as long as they meet the indication and require analgesia ATC. âShe said she would try. âGave her a formulary grid and reminded of the trial offer
PPLPMDL0020000001	Mayfield Heights	OH	44124	4/3/2012	Quick call....Doc said that she has been writing Butrans and she still likes it as a go-to drug for newer patients. âI reminded her that the new savings cards offer a trial month for new patients. âI asked her what about oxycontin. âShe said she has been writing a little of that too. â

PPLPMDL0020000001	Cleveland	OH	44113	4/3/2012	showed dr william,patient profile,asked dr if he's seeing patients like this? dr said yes he has a lot of patients taking vicodin.dr said he thinks Butrans is a good choice for these types of patients but hasnt started anyone yet.asked dr whats holding him back? dr said nothing really he just needs to talk to patients,give patient info booklet to educate patients and as long as insurance pays for Butrans he will do it.we discussed dr starting a couple Caresource patients on Butrans,discussed with dr the PA criteria for Caresource.asked dr for his commitment to start 2 patients on Butrans in the next 2 weeks,dr agreed to do this.
PPLPMDL0020000001	Cleveland	OH	44121	4/3/2012	Window call....reminded doc of to options for treating his patients with chronic pain: butrans for moderate pain patients and oxycontin for more severe pain. al reminded him that both products offer coupons to save patients money. aNothing learned.
PPLPMDL0020000001	Parma	OH	44134	4/3/2012	Spoke with pharmacist, Pam, & reviewed Butrans patient type. Focused on patients taking 3 tramadol or Vicodin per day who are not well-controlled. Showed initiation tool to demonstrate range of patients. Also discussed trial/savings cards for Butrans & automatic savings through e-voucher program. Reviewed OxyContin 7 tablet strengths & savings cards for eligible patients.
PPLPMDL0020000001	Cleveland	OH	44114	4/3/2012	dr said she didnt see any patients yesterday that required a change in their pain medication but she is keeping Butrans in mind.dr said after the dinner program with dr moufawad she is thinking of her patients taking tramadol that need medication adjustments, to start on Butrans,instead of starting them on vicodin.i told dr that was great she's plning Butrans right there and i look forward to hearing more patient successes in the next few weeks. asked dr for her commitment to start a couple patients on Butrans this week.dr said she will do that but she's not seeing a lot of new patients and less BWC,dr said all of the new patients and personal injury patients are going to dr marshall,dr said she will keep Butrans in mind as an option for her patients she's worked with for years.
PPLPMDL0020000001	Cleveland	OH	44114	4/3/2012	talked to dr about his new patient load and new personal injury patients and how Butrans could be an option for them.dr said yes he is seeing a lot of new patients and personal injury patients and is considering Butrans once these patients have tried short-acting opioids and its not controlling their pain.showed dr patient profile,william,asked dr if he will consider Butrans as the next step in therapy for patients like this when a medication adjustment is necessary? dr said he will do that.dr said his patients are doing well on Butrans so he will continue starting more patients focused dr on BWC and caresource patients starting on Butrans.
PPLPMDL0020000001	Cleveland	OH	44114	4/3/2012	i showed john the patient profiles and asked which patient type does he see most often? john said emma and william.i asked john if he's suggesting Butrans as the option for patients like this,to dr katz and/or dr marshall? john said yes he is recommending Butrans for more patients like william,taking vicodin every day for chronic pain but needing a medication adjustment.i asked john if he will continue starting patients like william,on Butrans this week? john agreed to do this.asked john if he will start a couple patients like emma,taking tramadol daily but needing a medication adjustment,on Butrans this week? john said he will talk to the doctors and if they are ok with that he will do that.focused john on BWC and caresource patients starting on Butrans.
PPLPMDL0020000001	South Euclid	OH	44121	4/3/2012	Window call....i showed doc the butrans profiles of Emma and William and explained that either patient type is appropriate for a start on butrans. al asked him to try butrans for one of those patients and that the new savings cards provide for a free month. aHe said he thinks he still has some. a
PPLPMDL0020000001	Cleveland	OH	44127	4/3/2012	showed dr Butrans visual aid, we discussed 6 core selling messages,dr focused on once weekly dosing and Butrans being transdermal.dr said he likes idea of a patch for his chronic pain patients.dr asked about medicaid insurance coverage as thatts the biggest plan here and medicare patients. we talked about PA criteria for caresource patients,asked dr if he can start 2 patients in the next 2 weeks on Butrans? dr said yes he will do that.we talked about doctors patients taking 1 of the short-acting opioids listed in initiation guide and how to start patients on Butrans and handle titration,side effects,etc.i asked dr for his commitment to start 2 patients on Butrans before i see him again? dr said yes he will do that.
PPLPMDL0020000001	Cleveland	OH	44113	4/3/2012	showed dr Butrans initiation guide,asked dr if he's seen any patients this week that are in the appropriate dosage ranges for Butrans? dr said yes he started a patient on Butrans a couple weeks ago.asked dr what strength of Butrans he started the patient on? dr said he cant remember but hasnt heard from patient so patient must be doing well. we discussed initiation and titration of Butrans and i asked dr if he has more patients that are appropriate, to start on Butrans this week? dr said yes he will focused dr on BWC and caresource patients, we discussed PA criteria for Caresource patients.
PPLPMDL0020000001	Cleveland	OH	44109	4/3/2012	showed dr OxyContin visual aid, we discussed moderate to severe pain scale,asked dr where he feels most comfortable prescribing OxyContin? dr said for severe pain.asked dr what he prescribes for moderate pain? dr said a short-acting opioid.showed dr conversion guide and we discussed his patients taking percocet for chronic pain that could be appropriate for OxyContin.dr said he will consider that but he doesnt like prescribing OxyContin,dr said he doesnt start many new patients,just continues patients on OxyContin that he inherited when joining this practice we discussed dr focusing on patients 65yrs and older,with med part d insurance coverage,as new patient starts.dr said ok he will consider these patients for OxyContin.showed Butrans initiation guide, we discussed appropriate dosage ranges,initiation and titration of Butrans,dr said he has tried to start a couple patients on Butrans but insurance didnt cover it.dr said it was Buckeye.i talked to dr about focusing on commercial insurance,BWC or Caresource patients,to start on Butrans.dr said ok he will do that,recommended Senokot 5-font color=blue><b>CHUDAKOB's query on 04/13/2012</b></font>-You might try to find out why he is OK prescribing Percocet 4 times/day, but not OxyContin (same molecule) twice/day?<font color=green><b>BROOKAM's response on 04/17/2012</b></font>-ok will do-font color=blue><b>CHUDAKOB added notes on 04/17/2012</b></font>-Let me know what he says.
PPLPMDL0020000001	Akron	OH	44310	4/3/2012	Asked dr about his clinical experience with Butrans. aWho and where are you using it in your practice and what have the results been like? aDr Cremer said that he is using Butrans for more of his moderate patients after tramadol. aAdmitted to not liking vicoden much because his clinical experience has shown it to not provide good analgesia. aInitiates either after a tramadol patient or for patients on NSAIDS or cox2's. aAsked dr what dose he prescribes most? aDr said that the 10mcg is the most common and will only prescribe it when the patient is over 300mg/day of tramadol. Reviewed Butrans key selling messages and provided overview of Butrans application sites and site preparation. Gave fair balance with Butrans as a CII still carries the same abuse potential as any other opioid. Discussed Butrans patient savings. aDr did not know about the trial offer. aDr liked to see the patch and it made an impact he said. aAsked dr about his experience with OxyContin? aDr said he has gotten away from using it. aAsked why and he said that it brings too many problems and feels more comfortable using Kadian or Opana. aSaid that they don't have the street name that OxyContin has. aReviewed conversion guide for OxyContin. aDr admitted to using a lot of percocet. aSled dr to consider using OxyContin as a Q12h option instead of percocet. aDr agreed and may use it more.<font color=blue><b>CHUDAKOB's query on 04/13/2012</b></font>-This looked like a very good call!!! al really like when you asked why regarding his decline in OxyContin use. aNice job!!!<font color=green><b>REICHL's response on 04/16/2012</b></font>-Thanks. al found him to be an easy guy to talk with and seemed very honest about his usage of our products.<font color=blue><b>CHUDAKOB added notes on 04/16/2012</b></font>-Nice work!
PPLPMDL0020000001	Uniontown	OH	44685	4/3/2012	Asked dr if she had seen any candidates appropriate for Butrans. aDr said she had not but had been thinking about it. aAsked where she sees it fitting in her practice. aShe said she can see using Butrans for patients on Tramadol. aShe said again that she doesn't like to treat pain and does refer out early but said she does see how it can fit in. aAsked Dr to use in those tramadol patients that have failed.<font color=blue><b>CHUDAKOB's query on 04/13/2012</b></font>-Cliff, your next call objective is something you are asking her to do rather than something you are going to do toaurtheraadvance the call. You want to focus on the what you can do to further the call in the next call objective.<font color=green><b>REICHL's response on 04/16/2012</b></font>-agreed. aThanks for the suggestion.<font color=blue><b>CHUDAKOB added notes on 04/16/2012</b></font>-Thank you! aKeep working on it.
PPLPMDL0020000001	Cleveland	OH	44113	4/4/2012	showed dr OxyContin visual aid,asked dr if he's seen any patients that have moderate to severe pain and meet OxyContin indication? dr said yes he has and he's started a few patients on OxyContin.we talked about doctor converting his percocet patients to OxyContin,showed conversion guide and asked dr for his commitment to start more patients this week,dr agreed.focused dr on his patients 65 and older,med part d plans-UHC/AARP,CCRX and Silverscript.dr said he's not had any issues with insurance coverage and OxyContin.dr said he's been hesitant to start anyone on Butrans because its a branded,newer medication and usually those are the one's that patients cant get covered.we talked about dr focusing on BWC and commercial insurance patients to start on Butrans,dr said he will start a few people on Butrans its just taking him some time.showed initiation guide,discussed appropriate dosage ranges and asked dr if he will start 2 patients on Butrans in next 2 weeks? dr agreed.
PPLPMDL0020000001	Cleveland	OH	44113	4/4/2012	talked to dale about the patients he and dr shen(pain management dr here)are starting on Butrans,dale said its a lot of vicodin and percocet patients that they are starting on Butrans.i asked dale if they ever see patients looking like emma,patient profile? dale said yes they have a few patients taking tramadol for chronic pain.asked dale if he has considered Butrans for those patients? dale said yes and he's suggested that to dr shen.i asked dale if i have his commitment to starting more patients on Butrans this week? dale agreed.focused dale on BWC and commercial insurance patients.
PPLPMDL0020000001	Cleveland	OH	44135	4/4/2012	Spoke with Ken, we reviewed the medication guide for Butrans. I asked if he sees a lot of BWC patients, he said he does. I asked if he would recommend Butrans as an option for appropriate patients and he said that he would. I reviewed the pull out tool and appropriate patients for Butrans. We discussed that OxyContin may be an option for patients when Butrans may not provide adequate analgesia.
PPLPMDL0020000001	Cleveland	OH	44135	4/4/2012	Spoke with Ann, we reviewed the pull out tool for Butrans, the savings program for Butrans and OxyContin, and the OxyContin conversion guide and appropriate patients for either Butrans or OxyContin. She will pass the info along to the doctors.a
PPLPMDL0020000001	Cleveland	OH	44122	4/4/2012	Reviewed core messages with Dr Rastogi, who said he had not yet tried Butrans on any patients. I showed him inclusion criteria for Butrans opioid experience patient trials. I asked if he treats patients for pain from those conditions. He said yes, especially osteoarthritis. Focused him on commercially insured patients, perhaps 50-60 years old with pain from osteoarthritis. Further reviewed appropriate patient type & range, discussing OxyContin as an option for appropriate patients beyond that range. Dr Rastogi said he thinks there is a place for Butrans. I asked if he would identify one or two patients & try it & he agreed. Reviewed dosing & ability to take supplemental analgesia. He asked if it can be used for patients with renal insufficiencies. I asked if he finds that that is a common population in his practice. He said yes, making combination opioids less desirable. I told him Butrans can be used in patients with all ranges of renal impairment. I asked where he typically uses OxyContin. He said usually in nursing homes. Showed conversion guide with oxycodone conversions & asked him to consider OxyContin q12h for appropriate patients taking oxycodone around-the-clock. He agreed.
PPLPMDL0020000001	Cleveland	OH	44135	4/4/2012	Quick call at window, Erica asked Dr if he wanted more of the savings cards. He said sure, I asked if he has been giving out the month trial and he said he is. I asked about the success he is having with Butrans and he said it's been going well, and he likes it. al spoke with Erica further regarding the saving program and managed care. aShe agreed to help the dr know when a patient has appropriate managed care.a
PPLPMDL0020000001	Westlake	OH	44145	4/4/2012	I asked if he has started new patients on Butrans. He said did start a new patient. He said it is hard to get patients to switch from vicodin to a patch. We discussed that he could write for Butrans as an option after tramadol around the clock instead of going to vicodin and he agreed. aHe is no longer seeing Caresource patients but has a few BWC or commercial. We reviewed that OxyContin may be an option for patients with Med D.
PPLPMDL0020000001	Cleveland	OH	44113	4/4/2012	worked premier physician office and pain management dept-see call notes
PPLPMDL0020000001	Parma	OH	44129	4/4/2012	Quick call as i caught Dr Chagin at the window- He said he is still using Butrans & will try to find morepatients. He said he still has trial/savings cards. Started to ask him about the patients he has uses Butrans on but he said he could not stop to talk today. Spoke with Debbie & reviewed trial/savings program for Butrans. She said they have a lot of savings cards still & she has not given any out lately. I asked if she knows if any of their patients are still on Butrans but she did not know. Also asked if she needed additional OxyContin savings cards but she did not.
PPLPMDL0020000001	Cleveland	OH	44113	4/4/2012	dr said she's having success getting PA's approved by Caresource,for Butrans,so that makes it easier for her to start more patients.i asked dr what dosage strengths she is typically starting patients on Butrans? dr said both the 5 and 10mcg strengths,i asked dr if the patient info booklets are helping educate patients? dr said yes.dr asked for more patient info booklets and said she didnt need anything else at this time.focused dr on caresource and commercial insurance patients and asked dr for her commitment to continue starting more patients on Butrans? dr said she will do that.
PPLPMDL0020000001	Cleveland	OH	44113	4/4/2012	showed emma,patient profile to dr asked if she's seen any patients like this,last week or today? dr said yes a few but none needed to be changed from their tramadol so she didnt talk to them about Butrans.i asked dr if she would give patient info booklets to patients,if she feels Butrans is appropriate? dr agreed to do this.i asked dr if she will have 1 patient in next 1-2 weeks that she feels may need a medication adjustment? dr said yes she will have a couple patients who probably need adjustments in their pain medications.asked dr if she would be willing to start them on Butrans? dr said she will but has to discuss with patients,educate them on what Butrans is and will give booklets and see how patients respond.focused dr on commercial insurance patients
PPLPMDL0020000001	Maple Heights	OH	44137	4/4/2012	Spoke with floatar pharmacist & presented information on Butrans & OxyContin savings program. Reviewed eligibility requirements & reminded her patients on any type of government insurance cannot utilize the programs. Discussed automatic savings for Butrans monthly via e-voucher if the patient is eligible. Reviewed Butrans & dosing & ability for patients to take supplemental analgesia if necessary in the form of non-opioid or immediate release opioid medications. Discussed availability of 7 tablet strengths of OxyContin.

PPLPMDL0020000001	Lakewood	OH	44107	4/4/2012	Spoke with Stacey MA, she told me that she has seen a few scripts from Dr Grimm for Butrans. I asked if there has been any managed care issues and she said not that she heard of. I reviewed the savings program for patients and managed care.
PPLPMDL0020000001	Akron	OH	44307	4/4/2012	Spoke with Mary(RN) about OxyContin and asked her if she has used any of the copy cards I gave her on the last visit. âMary said she did hand one out for a private prescription patient. âLet Mary know that OxyContin is covered well for Medicare D plans. âReviewed Medicare D plans with Mary. â
PPLPMDL0020000001	Westlake	OH	44145	4/4/2012	Quick call, I asked dr if he has started new Butrans patients lately, she said no new ones but still has a handful of patients on Butrans and it's working well. I asked if it is working well, what is stopping him from trying other new patients he said he will try to write for others.
PPLPMDL0020000001	Cleveland	OH	44106	4/4/2012	showed dr patient profiles,asked dr who he treats most often? dr said he has a lot of patients like emma,taking tramadol for chronic pain.dr said he knows Butrans is an option,he likes that its a patch and is available but he has other options to consider too.i asked dr what would be the next step for a patient like emma? dr said he has been starting more patients on Nucunida lately and then the ER version as he's seeing good pain control with these 2 medications.i asked dr how he decided if Butrans would be appropriate or keep patients on short-acting? dr said he has many factors he considers and doesnt want to bore me with details,dr said he will consider Butrans when appropriate and knows its for patients taking a couple tramadol,vicodin or morphine,that arent controlled.showed dr initiation guide,we discussed dosage ranges and i asked dr if he would consider starting 2 patients,like emma,on Butrans this week? dr said if appropriate he will do that.we discussed PA criteria for Caresource patients starting on Butrans,dr said that'll help as many patients here are medicalaid.showed OxyContin visual aid,asked dr how OxyContin fits into his treatment plan? dr said he thinks OxyContin is a good medication,for the right patient,but he had to go and couldnt talk more.showed dr moderate to severe pain scale,with indication and asked dr where he felt OxyContin was appropriate? dr said for severe pain.
PPLPMDL0020000001	Lakewood	OH	44107	4/4/2012	Dr told me that he did try again to write for Butrans. He was not sure if about the managed care of the patient but it was a patient taking tramadol. He asked about patients with Med D that have supplemental prescription coverage. I let him know that he can see what happens but Med D patients are not able to use the savings cards. âWe reviewed that OxyContin may be an option for patients with Med D coverage.â
PPLPMDL0020000001	Cleveland	OH	44135	4/4/2012	Spoke with Lisa, we reviewed the Butrans pull out tool and when Butrans may be an option. She asked about cost and we reviewed the managed care, savings program and trial offer for Butrans. She thought it was a good program to give a month trial. We reviewed that OxyContin also has savings program
PPLPMDL0020000001	Westlake	OH	44145	4/4/2012	Spoke with Caitlin MA, we reviewed the pull out tool for Butrans and I asked if everything was going well with their Butrans patients. She said she has not heard a lot of feedback. She will help remind the Dr about appropriate patients for Butrans. â
PPLPMDL0020000001	Barberton	OH	44203	4/4/2012	Asked Dr Patel if he had any patients for Butrans recently. âDr said that he had not and wanted to confirm managed care coverage and BWC. âDiscussed coverage and asked if he had patients with private prescription coverage. âDr said he did. âTold him to use Butrans that fit the indication with private insurance. âAsked him to use the month trial cards and copy cards to help reduce cost. âDr agreed with information and agreed to keep
PPLPMDL0020000001	Parma	OH	44129	4/4/2012	Quick call- Introduced myself to Dr Rakhit & started to present Butrans (once weekly transdermal system for moderate to severe chronic pain), but he cut me off & told me to schedule lunch. Spent time with Irena, who worked with me to schedule first available lunch with Dr Rakhit as that is the only way he will discuss products. She said cost/insurance coverage is important to him, so she said to make sure I cover that when I talk to him. I asked what type of managed care mix they see & she said "everything". She said they see commercial, Medicare, & Medicaid, but no BWC. Introduced Butrans & core messages to Irena. She said she thought Dr Rakhit would be interested to hear more about it.
PPLPMDL0020000001	Lakewood	OH	44107	4/4/2012	Quick call while talking to Dr Khuri, I let her know that OxyContin coverage is good for Med D, commercial insurance. She was having a few issues with Medicaid for patients who were doing well on OxyContin, but she said she has been getting PAs to go through if they have been on it previously.â
PPLPMDL0020000001	Cleveland	OH	44129	4/4/2012	Deb said she is still prescribing Butrans & getting good results. She said she continues to have success in treating her patients with Butrans. She asked for more Spanish medication guides, so I gave her a stack. She said they are useful for her other location. Deb said she couldn't stay & talk because she was running behind.
PPLPMDL0020000001	Cleveland	OH	44106	4/4/2012	worked apm dept-see call notes on doctors,worked rheumatology dept-saw Carmi,got updated fellow lecture for April 2012,there are 4 fellows and dr askari(dept chair) is only here Monday for fellows clinic and thursdays for fellow lectures,otherwise he's in Beachwood.Carmi wanted me to leave Butrans info for each Fellow and Dr.Askari-left Butrans initiation guide and plastic leave behind Journal of Pain study,worked internal medicine-left info with Barb,Resident Coordinator for Chief Residents and need to follow-up on booking lunches with Barb end of month; worked family medicine-left dr trux and dr marsh Butrans initiation guide,plastic leave behind Journal of Pain study and my business card for each HCP.
PPLPMDL0020000001	Warrensville Heights	OH	44122	4/4/2012	I asked Dr Gulati for what type of patient he usually prescribes OxyContin. He said he uses it a lot in his nursing home patients. I asked if he also uses it in the office & he said yes. I asked what generally triggers him to prescribe OxyContin. Dr Gulati said he believes in using long-acting opioids instead of short-acting opioids chronically. He went on to say that if a patient is asking for Percocet, he would typically prescribe OxyContin for them instead so that they can have a medication dosed q12h. I showed him conversion/titration guide. I asked him since he likes using long-acting opioids, what his thoughts were on Butrans, a long-acting opioid in the CIII class. He said he actually tried to get it for a patient but their plan required prior authorization. Discussed coverage & prior authorization requirements for Caresource & Medicare. I asked him to think of patients with commercial insurance, taking tramadol or Vicodin chronically around 3 times per day. I asked if he thought they would like having Butrans as an option. He said he thinks so. Reviewed dosing & ability for patients to take supplemental analgesia. I asked if he would try Butrans on appropriate patients& continue using OxyContin where appropriate & he said yes.
PPLPMDL0020000001	Barberton	OH	44203	4/4/2012	Saw dr in hallway and asked for a minute. âDr said that I need to get him out to a dinner in order to discuss products. âGave Dr the OxyContin conversion and titration guide and asked him to review. âNothing else learned. â
PPLPMDL0020000001	Akron	OH	44305	4/4/2012	Spoke with Cindy(RN) about OxyContin and Butrans. âFollowed up from discussion with kathy(RN) about the products. âAsked if the practice uses OxyConin. âCindy said they do use it often. âShe really seemed interested in Butrans. âDiscussed key selling messages and reviewed the dosing and titration booklet. âExplained where Butrans is appropriate and reviewed inclusion criteria from main visaid. âAsked Cindy if she thinks Butrans would fit in the practice. âCindy said she said it does have a place for the younger patients that would rather have a patch than pills. Cindy said she will discuss information with Dr Mubishir.
PPLPMDL0020000001	Barberton	OH	44203	4/4/2012	Asked pharmacist what he sees most often come through the pharmacy for pain. âPharmacist said that they see all kinds of meds for pain but mostly vicoden and percocet. âAsked if they have seen any more Butrans? âNo more Butrans in pharmacy. âReviewed dosing and titration for Butrans and reviewed conversion guide for OxyContin.
PPLPMDL0020000001	Cleveland	OH	44113	4/4/2012	dr said she's having good success with Butrans,likes the medication and patients are doing well.dr said she doesnt need anything at this point unless theres something new. told dr i was happy to hear all of that and asked if she will commit to starting more patients on Butrans this week? dr agreed.i showed dr Butrans initiation guide,we discussed 5mcg and 10mcg being the initiation dosage strengths and titrating appropriately,i asked dr if there was any reason she wouldnt start patients on Butrans? dr said no not really,as long as insurance pays for it she's telling some patients its their only option and does give short-acting opioid for supplemental analgesia,told dr that was great to hear and i look forward to hearing more about these patient starts at the end of the month when i see her next,dr said ok.focused dr on BWC and commercial insurance patients starting on Butrans.
PPLPMDL0020000001	Lakewood	OH	44107	4/4/2012	Dr told me that he had a patient in mind for Butrans but they ended up being Medicare. I reviewed that low dose OxyContin may also be a long acting option for patients with Med D. I asked if he sees commercial insurance where he could use the trial card. He said he will try, and asked how the card will work when titrating. I asked how he will titrate patients and he said he will most likely start with the 10mcg dose and then have the patient call after a week or two to tell him how it is going. I reminded him that he will be able to call in the next dose at that time if needed since Butrans is a CIII. Dr said that he does see Caresource patients and that he will keep it in mind for these patients as well.â
PPLPMDL0020000001	Akron	OH	44304	4/4/2012	Spoke with Shadi(Pharmacist)about Butrans and OxyContin. âShowed the placebo patch and asked if he knew about the product. âHe said he knew about it but needed to learn more. âExplained key selling messages and told him where it is appropriate. âHe has a couple of patients that come in for it but said they ask him about application sites. âGave pharmacist the patient information brochures and explain application sites. âAsked if they fill OxyContin and he admitted alot! âAsked him who is prescribing and he would not tell me. âleft conversion guide.
PPLPMDL0020000001	Parma	OH	44134	4/4/2012	Dr Hernandez said it is easy for him to support a product that he believes in such as Butrans. I asked him what I should be telling my primary care physicians about Butrans. He said he is surprised that primary care physicians are not the primary prescribers of Butrans. I told him a variety of specialties are using Butrans. He said most physicians just want to do what is easy & don't always think about what is the best option in the long run. He said he thinks one important point is that each Butrans system releases medication for 7 days. He also said he likes that the 5mcg patch contains 5mg buprenorphine, so he knows his patients are getting 5mg of an opioid per week if they are on the 5mcg dose, & 10mg on the 10mcg, etc. He said Butrans just "makes sense". He also said prescribers don't realize that switching patients is not difficult. He added that ideally, they would use it in opioid-naïve patients to get the best results & to avoid short-acting around-the-clock opioid regimens. I reminded him that Butrans is still an opioid, thus has abuse & addiction potential. He said he knows. He said any physician who wanted to talk to him about it would be welcome to call him & he would be happy to share his good experience with them. I asked if he is still finding a place for OxyContin. He said sometimes, but BWC has been an issue lately, so he sometimes has to give them something else just so the patient's medication can get paid for.
PPLPMDL0020000001	Parma	OH	44134	4/4/2012	Spoke with Judy, who said Marko was dealing with a customer issue & couldn't stop to talk. Reviewed Butrans & OxyContin savings programs & showed her patient information booklets. She said she knows they have been dispensing some Butrans within the last month. She said she would give my information to Marko.
PPLPMDL0020000001	Cleveland	OH	44106	4/4/2012	dr said he didnt start any patients on Butrans yesterday as he's so busy with injections and procedures and hasnt thought of Butrans.showed dr william,patient profile,asked dr if he's seen patients like this? dr said yes he has,asked dr if he's thought of Butrans? dr said no he hasnt.asked dr if there is anything holding him back? dr said no he just has to remember it and as long as insurance pays for Butrans he will start prescribing more.we talked about PA criteria for Caresource patients,asked dr if he will see a couple patients,like william,today? dr said probably so.asked dr if he would be comfortable starting them on Butrans? dr said yes its easy to explain to patients and get them started so thats not a concern.i asked dr if he could start a couple patients between today and next time i see him,which will be in 1.5 weeks? dr said yes he will do that.showed OxyContin visual aid,asked dr where he feels OxyContin is appropriate? dr said for severe pain.dr said he has patients taking OxyContin but doesnt prescribe a lot of OxyContin.asked dr what he prescribes for moderate pain? dr said 1 of the short-acting opioids starting with tramadol,then vicodin and eventually patients get started on percocet.showed dr conversion guide,percocet examples and asked dr if he would start a couple patients on oxycontin,if they are ready for a long-acting opioid? dr said yes he will consider that.
PPLPMDL0020000001	Independence	OH	44131	4/4/2012	Quick call- Dr Trickett said Butrans is still in her list of potential treatments for patients she sees & said she will continue to prescribe where appropriate. Positioned Butrans once weekly for patients taking less than 80mg of equivalent oral morphine per day & OxyContin q12h for appropriate patients taking more than 80mg, especially if they are taking Percocet around the clock.
PPLPMDL0020000001	Lakewood	OH	44107	4/5/2012	Doctor said he is still having success with Butrans where it is covered. I asked if he has given the trial month cards and he said he did not know. âI reviewed the pull out tool for Butrans and asked if he would think of patients taking tramadol around the clock, he agreed. I spoke with Patty regarding the managed care for both Butrans and OxyContin and the details of both savings program. She will help remind the doctor about appropriate patients for Butrans.â
PPLPMDL0020000001	Cleveland	OH	44113	4/5/2012	showed dr patient profile,emma,asked dr what the next step was for patients like this? dr said he would usually go to vicodin.i asked dr how he would feel starting a patient like emma on Butrans? dr said he would consider that.dr said he knows the indication for Butrans,knows that Butrans is for patients taking a couple tramadol or vicodin daily and need something else.told dr thats great he knows all of that info so based on that,has he started anyone yet? dr said no.i asked dr whats holding him back from starting 1 patient on Butrans? dr said he doesnt know,he just hasnt thought about Butrans.i asked dr what he needs to remember Butrans? dr said he will remember Butrans and will start a couple patients on Butrans.dr said its just taking him longer than normal because its newer to him.left initiation guide and asked dr if he would start a couple patients with medco or medical mutual insurance who can use initial trial offer cards? dr said he will do that.showed OxyContin visual aid,we talked about appropriate patients for OxyContin,dr said he has a few patients on OxyContin but doesnt start many patients on OxyContin.i asked dr if he felt comfortable starting his 65+ patients on OxyContin? dr said he has a few patients like that taking OxyContin and feels comfortable prescribing for these patients.we talked about med part d insurance coverage for OxyContin,asked dr for his commitment to start a couple patients who are 65+ on OxyContin this week,dr agreed to do this.
PPLPMDL0020000001					

PPLPMDL0020000001	Rocky River	OH	44116	4/5/2012	Spoke with Stan, we reviewed the medication guide for Butrans and he said that he will make sure that patients know how to properly use Butrans. He has not seen a lot of movement, there has been a few patients and he is not sure if they are still on Butrans. We reviewed the pull out tool for Butrans and appropriate patient types, and when OxyContin may be an option for patients when 20mcg Butrans does not provide adequate analgesia.â
PPLPMDL0020000001	Berea	OH	44017	4/5/2012	Dr said he used one of the Butrans cards. I asked about the patient and he walked into a room. I met Stephanie the med student and discussed appropriate patients for Butrans and the conversion guide for OxyContin.â I spoke with Diane and Cherry regarding managed care for Butrans and OxyContin.
PPLPMDL0020000001	Rocky River	OH	44116	4/5/2012	Spoke with Kim, we reviewed the medication guide for Butrans. I showed her the Butrans pull out tool and appropriate patient types, she said that she will let patients know about Butrans as an option if they consult with her.
PPLPMDL0020000001	Cleveland	OH	44109	4/5/2012	We reviewed that OxyContin is also an option for patients taking short acting around the clock.â showed Dr OxyContin visual aid, we discussed appropriate patients for OxyContin, asked dr if he see's patients taking percocet for chronic pain every day? dr said yes. asked dr if he would be willing to convert a couple patients like this from a short-acting oxycodone to a long-acting oxycodone option like OxyContin? dr said yes he would consider this. we discussed Q12H dosing and 7 tablet dosage strengths. showed dr Butrans initiation guide, we talked about appropriate patients to start on Butrans, dr said he started 1 patient on Butrans and will start more patients on Butrans, focused dr on commercial insurance patients and use of initial trial offer cards. we discussed PA criteria for Caresource patients and asked dr if he could start a couple patients on Butrans next week? dr said he will do that.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/5/2012	quick second to ask about use of Butrans. âlinda said that he she doesnt really know if dr Narouse has used it and she has not. âReminded about Cili, 7 day delivery of Buprenorphine. nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44195	4/5/2012	worked apn dept-see kathy kraus call note; left Butrans initiation guide, patient info booklet and Journal of Pain plastic leave behind study for each attending and NP(Anne and Mei) in dept; worked neuro dept-left Dr. Bamford, Dr. Mays and Dr. Stillman-same info as above left behind for these HCP's.
PPLPMDL0020000001	Cleveland	OH	44102	4/5/2012	talked to Nagla about starting patients like emma, patient profile, on Butrans. Nagla said she's been recommending Butrans more to the doctors and likes having the patient info booklets in the exam rooms to educate patients. I asked Nagla if she would work with the doctors this week and next, on starting more patients on Butrans? Nagla said she will do this.
PPLPMDL0020000001	Olmsted Falls	OH	44138	4/5/2012	Dr said that he is keeping Butrans in mind, but still is hesitant to use it since it is an opioid and he is trying not to treat these patients. I asked what he will do when the patient is taking tramadol or celebrex but needs something more, asked if he would give Butrans as an option instead of vicodin. He said he will keep it in mind.â
PPLPMDL0020000001	Lakewood	OH	44107	4/5/2012	Ran into Dr in the hospital, he said that he has been very involved in the hospital as he is on the board now and is also very involved with nursing homes. He has 4 nursing homes to go to tomorrow. He is starting his own business with NPs in the nursing home setting.â
PPLPMDL0020000001	Lakewood	OH	44107	4/5/2012	Spoke with MaryAnn, we set a date for LELE program in the fall for their grand rounds. âWe reviewed that I will be able to provide information on the OARRS program and well as some other materials for the attendees.â I reviewed that doctor said he may have a few patients in mind for Butrans. I asked if he has tried it, he has not, he forgot. I reviewed the month trial for Butrans and asked if he had any tramadol patients with commercial insurance who he could try. He said he will. I reviewed that patients taking hydrocodone around the clock may be appropriate for OxyContin.â
PPLPMDL0020000001	Berea	OH	44017	4/5/2012	Showned Dr Butrans placebo patch. âtold dr where Butrans is appropriate by showing the inclusion criteria from main visual and case study patients Jessica and Emma. âAsked dr to use Butrans for patients that wither cant tolerate celebrex orâTramadoland those that require ATC Opioidanalgesiafor an extended period of time. âdr asked about how Butrans compares to Fentanyl? âAsked dr where he usually puts it in his practice. âdr said usually when he has exhausted his short acting products. âReminded dr that I cannot compare FPI to FPI but that Butrans is for moderate to severe pain and that it should be used early in his treatment of pain.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/5/2012	Spoke with Gaye Graffinger - she was getting on a conference and asked that I schedule an appointment to see her. She has taken over for Steve Mack who is no longer with Pharmacia. Sally Glass is still the RN educator and Madonna Newman is still the Chief Consultant RPh for that facility.
PPLPMDL0020000001	Twinsburg	OH	44087	4/5/2012	showed Dr OxyContin visual aid, we discussed pain conditions, asked dr which pain condition he typically would prescribe OxyContin for? dr said he looks at patients individually, doesnt care what pain condition patients have, dr said if he feels OxyContin is the next step for patients he will prescribe it, asked dr if he treats these pain conditions listed in visual aid? dr said yes. I asked dr for his commitment to start a couple patients on OxyContin this week and next? dr said he will do that, focused dr on med part d patients-UHC/AARP, CCRX and Silverscript patients, showed dr Butrans initiation guide, we discussed appropriate dosage ranges for patients and asked dr if he has a couple patients that he could start on Butrans in next 2 weeks? dr said if medicad pays for it he will try it in a few patients and see what happens. we talked about PA criteria for Caresource patients and I asked dr if that sounded feasible? dr said yes he will consider that, recommended Senokot-5
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/5/2012	Asked Catherine if she has seen any Butrans filled? âShe said no and had a discussion about how the pain drs in the hospital do not send patients to their pharmacy. âThey do see patients from cuyahoga falls family practice but cost may be an issue. âShe said that chain pharmacist can help with cost and Giant Eagle with fuel perks keep their pharmacy at a disadvantage. âAsked what they fill most for short acting pain? âShe said they fill more percocet than vicodin but fill them all. âAsked her to hand out patient information kits for Butrans for patients on vicodin or tramadol. âCatherine agreed. âDiscussed conversions for OxyContin and discussed conversion showed OxyContin fpi, section 8.5-Geriatric use, we talked about dr starting her patients 65+ on OxyContin, dr said she has prescribed OxyContin for years and thinks its a good long-acting opioid as it works for patients, dr said she didnt remember that OxyContin had good coverage on med d plans, we talked about UCH/AARP CVS/Caremark and Silverscript plans and coverage for OxyContin, asked dr for her commitment to start a couple new med d patients this week and next on OxyContin? dr said she will do that, showed Butrans initiation guide, we discussed dosage ranges and discussed initiation of Butrans and titration, dr said she started 1 patient on Butrans recently and it was a medicad patient who got it approved so that made it easy on her. I asked dr if she would start a couple new patients on Butrans, focusing on Caresource patients? dr said yes she will but asked about the PA for Caresource, we discussed PA criteria for Caresource patients, asked dr if that seemed reasonable to complete? dr said yes. I asked dr if she will start a couple of these patients on Butrans, in the next 2 weeks, knowing this PA for Caresource? dr said she will do that.
PPLPMDL0020000001	Cleveland	OH	44113	4/5/2012	asked dr how his patients are doing on Butrans? dr said great, he's seeing good results with Butrans and is happy he has this option to go to for patients, asked dr how the follow-up visits are sounding with these patients? dr said it depends on the patient but he addresses side effects and titration in the 4 week follow-up and so far its going good, asked dr if he needed anything else from me? dr said just leave patient info booklets, asked dr for his commitment to continue starting more patients on Butrans, dr said he will do that.
PPLPMDL0020000001	BEACHWOOD	OH	44122	4/5/2012	Met with Kilee, Pharmacy Manager, to follow-up on her request for OxyContin medication guides. She said she has had difficulty getting what she needs & only received 10 guides & needs 200-300. I let her know I would obtain more & bring them to her. She said most of the time OxyContin is used for a short time at Ahuja, most often in orthopedics for 5 days following a surgery. Kilee also said sometimes patients come in on it. She asked if the new formulation was less easy to abuse. I told her we have no data to suggest that & ask that it is prescribed with just as much caution as before. She said many of the patients who had been on the original formulation of OxyContin have reported that the reformulation does not control their pain as well. I asked what about patients new to the drug. She said none of them complain. Discussed abuse & addiction potential, dosing, & supplemental analgesia. I offered to inservice staff regarding OxyContin or pain management. Kilee said they do monthly lunch-and-learns with the pharmacy staff, so she would let the clinical pharmacist know I can do that as she thinks there would be interest in having that.â
PPLPMDL0020000001	Parma	OH	44129	4/5/2012	I asked Dr Gigliotti why he really thinks he is not finding any Butrans patients. He said he just hasn't seen many people with pain lately. Positioned Butrans for patients when 3 Vicodin per day is not controlling their pain. I asked what the drawback to that would be. He said nothing really & that he likes the concept of Butrans because it is dosed once weekly & is a patch. Positioned OxyContin q12h for patients taking Percocet around-the-clock.
PPLPMDL0020000001	Cleveland	OH	44104	4/5/2012	Dr Gigliotti said he wishes he did not have a DEA number. showed Dr OxyContin conversion guide, asked dr if he has patients taking short-acting oxycodone for chronic pain that are ready for a long-acting opioid? dr said yes he has a lot of patients taking percocet. I asked dr how he decides on which long-acting opioid is appropriate for patients? dr said it depends on insurance coverage and how long he's treated patient, dr said he will start patients on OxyContin but is careful with new patients as he doesnt want a reputation on streets that he dispenses a lot of OxyContin. I asked dr if he would start a couple patients on OxyContin this week based on our discussion? dr said he will do that, focused dr on med part d patients starting on OxyContin, showed Butrans initiation guide, we discussed appropriate dosage ranges and I asked dr if he has patients taking any of these short-acting opioids for chronic pain? dr said yes he does, dr said he likes the idea of patch technology and once weekly dosing with Butrans but if its not covered on Medicaid he wont write it. we talked about PA criteria for Caresource patients, asked dr if that was feasible? dr said he will think about it and let me know if he's willing to do that next time he see's me because he has to do the PA's for ALL medications and he's not sure if he wants to do another for Butrans.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/5/2012	Asked Dr if he had "tried" Butrans on any patients. âdr said that he had not but did consider it for a Medicare patient but realized that it was "not covered" âdr could not remember which plan but admitted to trying to remember it. âReviewed key selling messages for Butrans and asked him to continue to think about it. Nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44195	4/5/2012	talked to Kathy, about her feedback after Butrans dinner program 3/13/12 with dr moufawad as speaker, Kathy said she really liked the dr and listening to the case studies, Kathy said she has been talking to some of the attending HCP's in the APM dept, post the program, to recommend more use of Butrans, told Kathy that was great and asked if she would continue doing that? Kathy said yes she will do that, showed initiation guide, we discussed appropriate dosage ranges for Butrans, asked Kathy if she's seeing patients in these ranges? Kathy said yes every day, Kathy said doctors here are starting more patients on Butrans so she will take the conversion guide and keep working with HCP's on this. I asked Kathy for her commitment to start more patients on Butrans this week and next, Kathy agreed to do so. we discussed PA criteria for Caresource patients, BWC and commercial insurance patients. recommended Senokot-5
PPLPMDL0020000001	Mayfield Hts	OH	44094	4/5/2012	I discussed the butrans key selling messages with doc and Monica(she called because she got several requests for butrans). âThey have a patient that does not want to take pills. âDoc wanted to know who is prescribing and if any other orthos are prescribing it. âHe asked about AE's. âl showed him the AE page of the CSA. âHe asked about cost. âl told him about the commercial coverage and the savings cards. âMonica asked about BWC coverage. âTold her it was covered. Doc said he would try it.â
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/5/2012	Asked Dr if he is continuing to prescribe OxyContin. âdr said he is but not as much as he used to. âAsked dr why. âdr said that the "street name" has prevented him from using as much. âdr asked about Butrans. âReviewed key selling messages and dr would not answer any questions I asked. âNothing else learned.â
PPLPMDL0020000001	Cleveland	OH	44113	4/5/2012	showed dr BUP3015, opioid experienced patients clinical trial, we discussed inclusion criteria and 30% reduction in pain, asked dr if this was still clinically significant in his opinion? dr said yes 30% was, asked dr if he felt that 30% was enough for him to start a few patients on Butrans? dr said yes, dr said since dr farooqi left the practice and he's seeing all of his patients now, he has been extremely busy and hasnt thought of Butrans. I asked dr if he felt Butrans would be easy to describe to patients or take more time? dr said he thinks because Butrans is new to him and patients he would have to explain it a little bit and then give the patient info booklet, but that does take more of his time and he's not had extra time recently. I asked dr if he would talk 2 a couple patients this week or next about Butrans and start them? dr said he will see who comes into his practice and if he can, he will start a couple patients, focused dr on commercial insurance patients and use of initial trial offer cards, showed dr OxyContin visual aid, asked dr where he feels OxyContin plays a role in his practice? dr said he rarely prescribes long-acting opioids like OxyContin, CII opioids, so he doesnt really have a place for it, we talked about moderate to severe pain scale and where OxyContin could play a role in his practice, asked dr where he would feel most comfortable starting patients on OxyContin, if he deemed that appropriate? dr said for severe pain, dr had to go, asked dr if he would start a ..
PPLPMDL0020000001	Cleveland	OH	44109	4/6/2012	showed dr patient profile, emma, asked dr if he has patients like this? dr said yes he has a handful of patients taking tramadol for chronic pain that are always asking for something else when tramadol doesnt control the pain anymore, asked dr if he's discussing Butrans with patients like that? dr said a couple patients he has talked to about Butrans, gave patient info booklets to them to educate them on Butrans but hasnt seen them back so at this point he only has 1 patient on Butrans, asked dr if he had any concerns with starting patients like emma on Butrans? dr said no he will do it, as long as insurance pays for it and patients have to be willing to wear a patch for a week and remember to rotate the patch, we talked about importance of patient info booklet and discussing application sites/rotation with patients, asked dr if he would be willing to do that with a couple patients today and next week? dr said yes he will, asked dr if he would actually start those couple patients on Butrans, after discussing with them the application/rotation info? dr said yes he will, dr asked about medicad coverage? asked dr if he had medicad patients in mind, to start on Butrans? dr said yes he has a couple patients he would like to start on Butrans but they are Caresource, we talked about PA criteria for Caresource patients starting on Butrans, asked dr if that was feasible? dr said yes he will see who comes in the clinic today and next week, focused dr on BWC, commercial insurance patients too.



PPLPMDL0020000001	Parma	OH	44129	4/6/2012	Spoke briefly with Mary Jo, pharmacist. Reviewed Butrans appropriate patient type, dosing, & ability to take supplemental analgesia if necessary. Reminded her of monthly savings through e-voucher. Also reviewed OxyContin savings cards & usage.
PPLPMDL0020000001	Westlake	OH	44145	4/6/2012	Quick call, dr said that he will write Butrans tonight. Spoke with Pam, she agreed to help give the Butrans cards out to appropriate patients. She said that Dr Shah has been going through a lot of the trial month cards. I asked about Dr Raslan and she said he is still prescribing Butrans too and she will help to remind him.
PPLPMDL0020000001	Independence	OH	44131	4/6/2012	Roman asked for more OxyContin savings cards, so I gave him a package. Showed 7 tablet strengths. He said they use all of them & he would rather talk about Butrans today. He asked how the program was last month. I asked what it would take for him to at least try Butrans on a few appropriate patients. He said he wants to talk to other practitioners. He added he needs to hear things from people with real-life experience with Butrans. I told him he is welcome to call whomever he respects to ask them about their experience as I cannot speak to other practitioners' experience. He asked me to ask Dr Nickels' PA's if he can call them to hear about their experience. I offered Medical Services's number, but he said he knows the company will not give him the information he really wants. I encouraged him again to call, but he declined. I asked if in the meantime, he would at least consider a few patients. He said he really needs more information.
PPLPMDL0020000001	Garfield Hts	OH	44125	4/6/2012	I reminded Dr Sadowski how he had told me last time that he has a specific patient in mind for Butrans. He said he thinks he will be able to use it in other patients. Spent time going over appropriate patient type. He asked if it could be used "first line". I showed him "Jessica" patient profile. Dr Sadowski said that is the type of patient he would want to use it for. I told him this is a great patient type to try Butrans on starting at 5mg. Discussed dosing, titration, & supplemental analgesia. He asked about cost. Reviewed insurance coverage, asking him to focus on commercially insured patients who can take advantage of the trial & savings program. Also reviewed Caresource prior authorization requirements. Discussed Butrans as a CII opioid with abuse & addiction potential, just like other opioids. He asked if there is less abuse potential. I told him we have no comparative data & that he should be just as cautious with this as he is with other opioids. Discussed OxyContin q12h as an option for appropriate patients taking Percocet around-the-clock. He said it is always in the news. I asked if he felt that OxyContin is a good medication in the right people. He said yes. Aspent time with Deena who said she is going to go in to talk to Dr Sadowski immediately about a patient who she thinks would be ideal for Butrans. She asked about Caresource coverage. Discussed prior authorization requirements. Deena said she would do the prior auth if Dr Sadowski says it is ok.
PPLPMDL0020000001	Cleveland	OH	44109	4/6/2012	showed dr OxyContin conversion guide,we discussed his patients taking percocet that are ready for a long-acting oxycodone and Q12h dosing,dr said he writes a lot of OxyContin,its a good medication and he will continue doing so.asked dr if he has any patients 65+yr's that he feels are appropriate for a long-acting opioid,currently taking percocet? dr said he probably has some like that.asked dr if he would start these patients on OxyContin? dr said yes he will do that.we talked about 7 tablet strengths and dr said he forgets about the 15,30 and 60mg dosing strengths but thats a good reminder.dr took conversion guide and focused dr on UHC/AARP,Silverscript and CCRX patients.showed dr Butrans initiation guide,we discussed appropriate patients in the dosage ranges listed and dr said he will think about it but hasnt prescribed Butrans yet.asked dr if there was any info that he needed to feel clinically more comfortable prescribing Butrans for appropriate patients? dr said no he has all of the info and he will think about it.asked dr if he will start 1 patient on Butrans,focusing on BWC or commercial insurance today or next week? dr said he will look at the initiation guide and see who comes into the clinic and if appropriate he will start 1 patient.recommended Senokot-S
PPLPMDL0020000001	Westlake	OH	44145	4/6/2012	Introduced myself and asked his thoughts on Butrans so far. He said he thinks it is a good medication but is having issues getting it approved on managed care. dWe reviewed the managed care for Butrans and the savings program. He knows Dr Nickels and is starting a neurology NP group for nursing homes. I let him know we also have OxyContin as an option when Butrans 20mcg does not provide adequate analgesia. I asked HCP if they (dr. need) tends to use a short acting opioids as supplemental analgesia for chronic pain sufferers. dHe said they try not to. al referred to the sections 2.4 of the FPI on supplemental analgesia and that patients can take an OTC as opposed to a short acting prescription. dHe said she would first encourage them to do that.
PPLPMDL0020000001	Lyndhurst	OH	44124	4/6/2012	Dr told me that he has tried Butrans, and a fewpatientscould not net it covered. We discussed Butrans managed care and savings program. He liked the trial cards. Elizabeth or the other MA usually do the prior auths. d
PPLPMDL0020000001	Westlake	OH	44145	4/6/2012	Spoke with pharmacist Bill who said he has not seen any prescriptions for Butrans still. I asked if he fills a lot of prescriptions for chronic, short-acting opioids. He said yes. Discussed Butrans patient type, focusing on those taking 3 tramadol or Vicodin every day not getting adequate relief. Also discussed OxyContin stocking. He said he thinks they have all strengths. Discussed availability of 7 strengths. He said he has the 60mg but was not aware of the 15 & 30mg.
PPLPMDL0020000001	BEACHWOOD	OH	44122	4/6/2012	dr said she started a patient on Butrans this week,i told dr that was great to hear and asked dr to share with me why she chose Butrans for this patient? dr said patient was taking vicodin every day,wasnt controlled pain worsening so she wanted to try Butrans and the patient was willing to try Butrans.asked dr what type of insurance did patient have? dr said commercial insurance,she gave patient the trial offer card and patient got Butrans from Metro Pharmacy.i asked dr if she has more patients like this,that she can start on Butrans,today and next week? dr said she will talk to a couple more patients and will start using more Butrans.focused dr on BWC,commercial insurance patients and we talked about PA criteria for Caresource patients as dr asked about Medicaid coverage.asked dr if this PA was feasible? dr said yes it is.showed dr OxyContin conversion guide,percocet example and asked if she has patients taking this amount of percocet? dr said yes,a couple patients,asked dr if she would consider converting these patients from a short-acting oxycodone to a long-acting oxycodone like OxyContin? dr said she rarely prescribes OxyContin and if she does its for geriatric patients.we talked about med d coverage for patients 65+ and i asked dr if she would start a couple new patients on OxyContin in the next week? dr said she will if she feels its appropriate.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	4/6/2012	worked pmkr - see call notes, worked oncology dept-had to leave OxyContin fpi,conversion guide and my business card and talked to med secretaries for dr o'brien and dr hergenroeder,requesting an appt with each HCP.
PPLPMDL0020000001	Beachwood	OH	44122	4/6/2012	Spoke with pharmacist, Rina, & inquired about Butrans & OxyContin stocking. She said they do not keep Butrans on hand, but they do order it when a patient brings in a prescription. I asked if they have actually started seeing prescriptions. She said she has a few patients who are on it. She said they do not see a lot of OxyContin activity here, but do keep some on hand. I asked what strengths she sees most of- she said 20 & 40mg. d
PPLPMDL0020000001	Cleveland	OH	44127	4/6/2012	showed dr Butrans initiation guide,we discussed doctors patients taking tylenol with codeine for chronic pain and how he's constantly making adjustments every month when he see's patients,i asked dr if he would consider starting just 1 patient on Butrans,the next time he see's a patient that needs a medication adjustment? dr said yes as long as Medicaid approves Butrans.we talked about PA criteria for Caresource patients,dr said his wife,mrs.rodriguez processes all PA's so i need to tell her about this and he will think of a patient or two and start on Butrans.i told dr i will see him in 2 weeks and am looking forward to hearing about at least that 1 patient he starts on Butrans,dr said ok that was fair.
PPLPMDL0020000001	Cleveland	OH	44113	4/6/2012	i talked to deb about how her patients are doing on Butrans,Deb said they are doing good and she's still starting more patients on Butrans.asked deb for her commitment to start more patients on Butrans today and next week,Deb said of course she will,she loves Butrans as an option for patients.left more spanish med guides and patient info booklets.focused Deb on Caresource and BWC patients here to start on Butrans.
PPLPMDL0020000001	Barberton	OH	44203	4/6/2012	Asked dr if she has patients on Vicoden or percocet that are taking it Q4 or Q6? dDr Minich agreed that she did. dUsed Master said and conversion guide and asked her how her patients may feel about moving to OxyContin Q12h dosing? dDr said when she uses OxyContin it is exactly for that reason. dAsked her how those patients are doing? dShe said her patients are doing much better with twice a day dosing and OxyContin give the patients the analgesia they require. Reviewed where OxyContin may be appropriate from visaid and asked if she would move patients that are on vicoden and percocet to OxyContin. dDr said she has a couple that she will consider.
PPLPMDL0020000001	Akron	OH	44310	4/6/2012	Reminded dr about Butrans and showed placebo patch again. dAsked her to use Butrans for patients that meet theindicationand are failing on celebrex or tramadol.
PPLPMDL0020000001					Asked dr if he would use OxyContin for his patients that are on percocet who would be open to Q12h dosing? dDr said that he is no longer prescribing CII products. dHe said that patients that are on CII products for more than 6 months in his clinical experience that they should go to pain management. dAsked dr if he would be open to prescribing Butrans, a CII? dDr said that he is open to it for patients that fail celebrex or ultram. al gave the dr the titration slide guide and showed him the conversions from short acting to Butrans. dDr said he wishes managed care coverage was better. dHe said that he has many medicare and med D patients who don't qualify for savings. dAsked dr if he has commercially insured patients who could use the savings? dDr said he does and will consider it for them.
PPLPMDL0020000001	Akron	OH	44319	4/6/2012	Gave dr the initiation and titration guide for Butrans through window. dTold him that Butrans is a CII, 7 day transdermal patch for moderate to severe chronic pain. dDr said he will look it over. dNothing else learned.
PPLPMDL0020000001	Cleveland	OH	44109	4/6/2012	dr said he has a couple patients on Butrans and will continue talking about Butrans and starting them,dr said so far he's happy with the clinical results as patients are getting good pain control.told dr thats great to hear and i look forward to hearing more patient successes from him in next 2 weeks.i asked dr to focus on BWC,commercial insurance and Caresource patients,to start on Butrans.we discussed PA criteria for Caresource patients and asked dr if that seemed feasible? dr said yes he will have 1 of the RN's process the PA.showed OxyContin visaid al,asked dr where OxyContin fits into his practice on pain scale of moderate to severe? dr said severe pain and he doesnt prescribe a lot of OxyContin.dr said he might have a couple patients on OxyContin but thats it.i asked dr what his concerns are regarding OxyContin? dr said he doesnt have a lot of clinical experience prescribing OxyContin and really feels it should be prescribed for severe pain.dr said he had to go but took conversion guide for a reference.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	4/6/2012	dr said he's still starting patients on Butrans,nothing has come up with patients as patients seem to be doing well on Butrans,asked dr what feedback they are giving him? dr said patients feel better,overall improvement in their moods and better pain control being on Butrans.asked dr if that meant he would continue starting more patients on Butrans today and next week? dr said yes he will continue starting patients and just asked for more patient info booklets.focused dr on BWC and commercial insurance patients to start on Butrans.
PPLPMDL0020000001	Garfield Heights	OH	44125	4/6/2012	Spoke with Heather & inquired about Butrans & OxyContin stocking. She said she has not yet seen any Butrans prescriptions. She said she does fill a good amount of OxyContin. I asked if she has seen new scripts for it or only continuing. She said mostly continuing, but on occasion she sees new scripts. I asked what strengths they stock. She said she thinks they have "them all". Discussed 7 tablet strengths. She said they see a lot of 40 & 80mg.
PPLPMDL0020000001	Cleveland	OH	44109	4/6/2012	Reviewed Butrans patient type & asked her again to give out the patientinfoandbooklets.
PPLPMDL0020000001					talked to Chris,Pharmacist,about Butrans stocking and we discussed doctors prescribing Butrans.asked if Rob,pharmacy mgr,was there? Rob's out today for long holiday weekend.asked Chris what patients are saying when they get Butrans? Chris said patients usually ask about side effects and sometimes ask where they should apply Butrans.asked Chris if he's handing out patient info booklets to patients getting Butrans? Chris said yes they have been giving them out. asked Chris if he's given any booklets to patients getting their short-acting opioid scripts filled here,that might be ready for a long-acting opioid,so they can talk to their HCP's? Chris said only patients getting Butrans are being given the patient info booklets.i asked Chris if he would be willing to do this? Chris said yes he will do that.we discussed formulary coverage-focused on PA criteria for Caresource patients,BWC and commercial insurance patients using initial trial offer cards.Chris said majority of patients are Medicaid or cash paying here with small % commercial insurance patients. we discussed OxyContin stocking,showed conversion guide and discussed vicodin and percocet examples and what that conversion would be to OxyContin.we talked about OxyContin coverage for patients 65+ on med d plans-CCRX,Silverscript and UHC/AARP. recommended I asked doc if patient decided to stay on butrans despite the skin rash. dShe said that he said he would continue on it and she has not heard back from him yet. al reviewed the AE profile and talked about the importance of rotation of the patch. dShe agreed that patients are instructed to rotate it weekly. al asked her if she has started any patients on oxycontin recently. dShe did not recall how recently, only that she continues to use it. al explained the preferred formulary coverage with medicare plans.<font color=blue>b</font>CHUDAKOB's query on 04/13/2012</b></font>Did you report the "skin rash" AE?<font color=green>b</font>SIMERTOC's response on 04/30/2012</b></font>It was previously reported<font color=blue>b</font>CHUDAKOB added notes on 04/30/2012</b></font>OK. dJust Checking.
PPLPMDL0020000001	Parma	OH	44129	4/6/2012	Dr Roheny said he did not have a lot of time as he was trying to wrap up his day. Positioned Butrans for patients taking short-acting opioids chronically around-the-clock up to 80mg oral morphine&equivalent& OxyContin for those beyond that range. Reminded him that there are savings programs for both which can benefit commercially insured patients. He said he is trying.
PPLPMDL0020000001	Lyndhurst	OH	44124	4/6/2012	I explained the proper application and rotation of the Butrans patch to maximize success and minimize possible irritation. dShe asked what if it falls off. al asked if she has had that problem. She said no but just wanted to know. al informed her that a new patch should be applied to a different site. dShe said that has told patients that.<font color=blue>b</font>CHUDAKOB's query on 04/13/2012</b></font>Nice job of asking the question back before answering it. dAking her if she has had that problem, reinforces to her that she has not. dGood work<font color=green>b</font>SIMERTOC's response on 04/30/2012</b></font>thx<font color=blue>b</font>CHUDAKOB added notes on 04/30/2012</b></font>Your Welcome!
PPLPMDL0020000001					

PPLPMDL0020000001	Parma	OH	44129	4/9/2012	I reminded Dr Khoobball how he had told me last time that he has some specific patients in mind for Butrans. He said he absolutely does. I asked if any of them had come in in the last couple weeks. He said one is seeing a neurosurgeon currently, so he is awaiting test results from them to see if he will start the patient on Butrans. He said another patient is going to be having surgery, so he will wait to see how that goes. He then told me about another patient who he has in mind. The patient is 40 years old & dying of cancer of the small bowel. I reviewed appropriate patient type/range & asked if he thinks that patient may be in more severe pain than what Butrans would be effective for or if he thinks perhaps that patient may be more of an OxyContin candidate. Dr Khoobball said he would prefer trying the Butrans first for this patient as he tries to avoid writing any CII products. He added that Butrans is going to be the only chronic opioid he will be writing going forward. Asked him to consider trying Butrans on appropriate patients for whom he would otherwise be starting on short-acting around-the-clock opioids or refilling or increasing a patient's dose of short-acting around-the-clock opioid. He said he will do this.
PPLPMDL0020000001	Parma	OH	44129	4/9/2012	Spoke with Linda & Donna (MA & nurse), & reviewed Butrans core messages & appropriate patient type. Also told them about "Initiations" program & asked them to give the invitation to Dr Laluk & encourage him to log on. They said he generally does not pay attention to things reps leave. I told them it was worth a try. Also discussed OxyContin managed care & savings cards. They said they did not need any cards.
PPLPMDL0020000001	Parma	OH	44134	4/9/2012	Spoke with Linda & Rebecca (MA) & reviewed Butrans trial/savings program & eligibility requirements. Also spent time going over appropriate patient type & range, focusing them on patients who take chronic short-acting opioids around-the-clock. Rebecca said they do have some office patients like that, although Dr Mandat uses narcotics mainly in his nursing home population. I asked them to leave information for Dr Mandat, who will be returning next week & they agreed.
PPLPMDL0020000001	Westlake	OH	44145	4/9/2012	I asked doctor what the feedback has been for Butrans, he said that he has had trouble getting it paid for on managed care. I reviewed the managed care and trial card. I asked if he would continue to try to use Butrans for patients with commercial insurance. He had questions about patients using 2 patches to make a 15mcg dose and I let him know this would be off label, and that only one patch should be used at a time. I reviewed the dosing and proper way to titrate from the 10mcg to the 20mcg patch. I asked about the types of patients he has tried Butrans for and he said that patients are taking 8 vicodin around the clock. I reviewed that Butrans should be for patients taking tramadol or low dose hydrocodone or oxycodone and that patients taking more than 40mg of hydrocodone may not be appropriate for Butrans. I reviewed that OxyContin may be an option for these patients. I asked him to consider trying Butrans on appropriate patients for whom he would otherwise be starting on short-acting around-the-clock opioids or refilling or increasing a patient's dose of short-acting around-the-clock opioid. He said he will do this.
PPLPMDL0020000001	Parma	OH	44129	4/9/2012	Dr Taylor said she is going to use Butrans & she is going to use it in BWC patients. I asked her what is really holding her back, since it sounds like she is ready to prescribe. She said she is not really starting or getting any new patients. I told her it does not necessarily have to be new patients only who she considers for Butrans. Discussed appropriate patient type, focusing her on existing patients who take short-acting opioids around-the-clock, especially if they ask for an increase in dose or dosing interval. She said this was a good point. Discussed Butrans as the only CII long-acting opioid, but reminded her that Butrans, as an opioid, has abuse & addiction potential. Reviewed ability for patients to take supplemental analgesia in the form of immediate-release opioids or non-opioid medications. Also reviewed insurance coverage, Caresource prior authorization requirements, & trial/savings cards. Dr Taylor said she really does want to use Butrans & likes the idea of it. She said she is not prescribing any new OxyContin scripts. I asked her why not. She said she thinks it is "more abusable" than any other medication. I agreed that OxyContin does have abuse & addiction potential. I asked if she has the same policy with Percocet, since it is also oxycodone. She said she does not think Percocet is as abused as OxyContin. I asked if she would still continue her appropriate patients who are on OxyContin & she said yes.
PPLPMDL0020000001	Bedford	OH	44146	4/9/2012	Spoke with floater pharmacist who said she did see Butrans on the shelf at this location & has filled prescriptions for it at various other Wal-Mart stores. Discussed appropriate patient type, focusing on patients taking around-the-clock short-acting opioids, especially if their pain is not adequately controlled. Showed patient information booklets & discussed using them to answer patient questions. Discussed automatic monthly savings for Butrans & OxyContin savings cards.
PPLPMDL0020000001	Stow	OH	44224	4/9/2012	Reviewed Butrans with the Dr again and showed patient profiles of the 3 Butrans patients and I asked where would he write Butrans if he were to write it and he said probably in a William. HE said he would like to get the patient to where they are stable and then initiate Butrans. I said so do you see any benefit if you know the disease state is chronic and they are in pain atc to starting them on Butrans and he said he has a brain formulary and that he can use the short acting because of cost and he then asked what is the cost and we reviewed that and he said we are still paying for it somehow. HE said he would try to find a spot for Butrans. I asked him where OxyContin plays a part and he said he treats very little chronic pain but has a few patients on it but not a big place in his practice. I reviewed low dose with him as an option.
PPLPMDL0020000001	Parma	OH	44129	4/9/2012	Spoke with nurse, Lynn, & reviewed Butrans patient type. Discussed patients taking short-acting opioids around-the-clock chronically, especially if they say their pain control is inadequate. Reviewed managed care coverage & trial/savings program. Inquired about a lunch/appointment with Dr Gallagher- she said they are still not doing either at this time. Offered OxyContin savings cards but Lynn said they did not need any. I asked her to give Dr Gallagher Butrans sealed article & she agreed.
PPLPMDL0020000001	Stow	OH	44224	4/9/2012	Introduced a Butrans with Kristen, reviewed dosing, titration, appropriate patients, tapering and supplemental analgesia, boxed warning. Started to review patient profiles and she said she had to go. I told her about managed care and copy cards and she said she would keep it in mind.
PPLPMDL0020000001	Bedford	OH	44146	4/9/2012	Discussed OxyContin 7 tablet strengths for flexibility in dosing & titration. Dr Haddad said he prescribes them all. He asked how Butrans is going. I asked if he has started any new patients recently. He said he has a few patients who are on it regularly. He went on to say that he thinks a few of them have BWC & there is one patient who pays cash every month for it. Discussed BWC & commercial insurance coverage & reviewed trial/savings program. Reminded Dr Haddad that Butrans is the only CII opioid that is long-acting, but cautioned him that it carries abuse & addiction potential, just like other opioids. I asked if he would identify additional Butrans patients this week & he agreed. Also reviewed OxyContin managed care coverage & savings cards.
PPLPMDL0020000001	Westlake	OH	44145	4/9/2012	I asked doctor where he is finding Butrans fitting in, he said he has no problem prescribing it for patients who need it. I asked what he means and he said that every day he sees patients who should not be on chronic opioids based on their age and indication. He said wrote a Butrans script today for a patient with RS. I asked what dose he starts on, he said he always starts on the 5mcg unless they have already been on buprenorphine before. We reviewed the pull out tool and he said that he prefers to start at the lowest dose and then titrate from there. He said he does not write for any refills and that patients must come in for their medications. He does not refill hydrocodone either. I reminded him that one script of Butrans will only last a patient for 28 days and he said he does take this into consideration. I reviewed that patients taking more than 80mg of oral morphine are equivalent to a patient taking 10mg of Butrans. I asked him to consider trying Butrans on appropriate patients for whom he would otherwise be starting on short-acting around-the-clock opioids or refilling or increasing a patient's dose of short-acting around-the-clock opioid. He said he will do this.
PPLPMDL0020000001	Solon	OH	44139	4/9/2012	Spoke with nurse, Deborah, who handles prior authorizations. Discussed insurance coverage for OxyContin & Butrans. She asked about BWC. Discussed coverage. Also discussed savings program for both products. Deborah said coverage has really not been an issue for OxyContin & added that Dr Zaidi is not writing Butrans. Discussed Butrans patient type, focusing on patients taking less than 80mg of oral morphine equivalent of short-acting opioid medications.
PPLPMDL0020000001	Northfield	OH	44067	4/9/2012	Spoke with Sun-Li, pharmacist & also with technician, Stephanie, who said they are stocking Butrans. Discussed Butrans patient type, focusing on patients taking up to 80mg of oral morphine per day, especially if they are not well-controlled on their dose. Reviewed patient information booklets, but they did not need any. Also discussed OxyContin 7 tablet strengths & savings program. They did not need any savings cards.
PPLPMDL0020000001	Stow	OH	44224	4/9/2012	Reviewed Butrans with the Dr more and then reviewed patient profiles and I asked her what types of patients does she see the most and she said she sees all of them, I asked her where she would be most likely to use Butrans if she were to prescribe it. She said she would probably use it in opioid experienced patients like Emma and William in profiles. She then asked the cost and I reviewed the managed care coverage and she said copy cards are good but if the cost of the drug is so high, we are paying for it in some way or another. I said cost aside, do you think that there is some benefit to Butrans in your patients because if you are not sold on the product, cost means nothing and she said she sees a place for it in her practice but it is not for every one. I asked her when she is starting a patient on OxyContin, what would her first script look like and she said that varies. I showed her conversion form Vicodin and Percocet and said that if she has patient on that dose she has option of going to 10mg of Oxycontin q12h. She said she usually starts them on 10mg of Oxycontin. I said it is also safe in your elderly patients. she said she had to get going.
PPLPMDL0020000001	Independence	OH	44131	4/10/2012	I reminded Dr Jack about when he told me he does not want to write CII medications like OxyContin anymore. He said this is true. I asked him how then, can Butrans fit into your practice as a long-acting CII. He said I made a very good point. Reminded him that Butrans still has abuse & addiction potential. He said he knows. He said I must never give up on him because "one of these times it's going to click". He added that every time I talk to him I make a good point & that he agrees with every one of them. I asked him what is holding him back from trying an appropriate patient on Butrans then. He said he doesn't know but that I should keep trying with him. I handed him sealed article & asked him to at least read it. He agreed.
PPLPMDL0020000001	Brooklyn	OH	44144	4/10/2012	Spoke with Carol & Wendy (nurse) & reviewed Butrans core messages. Discussed appropriate patient type, focusing on patients taking short-acting opioids such as tramadol or Vicodin chronically around-the-clock. They said Dr Hilton & Dr Paul both have patients who fit that description. I asked them to give Butrans initiation guides to each of them & reviewed OxyContin formulary grid.
PPLPMDL0020000001	Parma	OH	44129	4/10/2012	Quick call- Positioned Butrans once weekly for appropriate patients for whom Dr Jugullion would typically start on a short-acting opioid around-the-clock opioid regimen. He just thanked me & walked into a room.
PPLPMDL0020000001	Cleveland	OH	44130	4/10/2012	Spoke with pharmacist John, & presented Butrans initiation guide with tool & OxyContin conversion/titration guide. Showed him how he can use them both to find out recommended doses of Butrans & OxyContin for appropriate patients. He asked how often Butrans is dosed. I told him once weekly & added that titration ability is after 3 days. He said he received a phone call from a physician asking that question & he had a hard time finding an answer in the FPI. I asked who had inquired. He said it was Dr Partal & asked if I call on him. I told him I leave information for him. I asked if he knew what type of patient Dr Partal had in mind, but he said he did not indicate that. Reviewed savings programs for both products.
PPLPMDL0020000001	Cleveland	OH	44143	4/10/2012	I showed doc the butrans patient profile of Emma as an appropriate patient type - less than medicare age, pain score of 6 out of 10, and currently taking 50mg of tramadol Q6h. I asked him to consider trying Butrans on appropriate patients for whom he would otherwise be starting on short-acting around-the-clock opioids or refilling or increasing a patient's dose of short-acting around-the-clock opioid. He said he will do this.
PPLPMDL0020000001	Cleveland	OH	44124	4/10/2012	Quick call...I asked doc if he thinks he has a larger population of elderly patients. I asked him to consider trying Butrans on appropriate patients for whom he would otherwise be starting on short-acting around-the-clock opioids or refilling or increasing a patient's dose of short-acting around-the-clock opioid. He said he will do this.
PPLPMDL0020000001	Westlake	OH	44145	4/10/2012	Quick call, I showed the day of the week and asked doctor if he would write Butrans as an option instead of going to vicodin around the clock. I asked him to consider trying Butrans on appropriate patients for whom he would otherwise be starting on short-acting around-the-clock opioids or refilling or increasing a patient's dose of short-acting around-the-clock opioid. He said he will do this.
PPLPMDL0020000001	Shaker Heights	OH	44122	4/10/2012	I showed Dr Agarwal 7 OxyContin tablet strengths, pointing out the intermediate strengths. Started to ask him which of the strengths he uses most often but he cut me off & took the Butrans demonstration box out of my other hand & said he had just seen "one of these". I told him this is what a one-month supply of Butrans looks like when patients pick it up from the pharmacy. He said one of his patients brought one in to him. He walked into a room before I could respond.
PPLPMDL0020000001	Richmond Heights	OH	44143	4/10/2012	Spoke to Mel about the movement of butrans. I asked him to consider trying Butrans on appropriate patients for whom he would otherwise be starting on short-acting around-the-clock opioids or refilling or increasing a patient's dose of short-acting around-the-clock opioid. He said he will do this.
PPLPMDL0020000001	Cleveland	OH	44130	4/10/2012	Quick call- Showed Dr Diab OxyContin savings cards & reviewed eligibility requirements for usage. I asked him where to put them & he asked me to put them in his office. Also pointed out Butrans trial/savings cards for commercially insured patients. He just said that was good, thanked me & walked into a room.
PPLPMDL0020000001	Highland Heights	OH	44143	4/10/2012	Spoke to Diane G., who was filling in for Kristen. I asked her to consider trying Butrans on appropriate patients for whom he would otherwise be starting on short-acting around-the-clock opioids or refilling or increasing a patient's dose of short-acting around-the-clock opioid. He said he will do this.
PPLPMDL0020000001	Euclid	OH	44117	4/10/2012	I asked doc if he is still initiating patients on oxycontin. I asked him to consider trying Butrans on appropriate patients for whom he would otherwise be starting on short-acting around-the-clock opioids or refilling or increasing a patient's dose of short-acting around-the-clock opioid. He said he will do this.
PPLPMDL0020000001					I asked doc if he is still initiating patients on oxycontin. I asked him to consider trying Butrans on appropriate patients for whom he would otherwise be starting on short-acting around-the-clock opioids or refilling or increasing a patient's dose of short-acting around-the-clock opioid. He said he will do this.

PPLPMDL0020000001	Cleveland	OH	44130	4/10/2012	I asked Dr Fedorko how the patients he has tried Butrans on have done on it. He did not answer & said that he is frustrated with narcotics & does not want to "deal with those patients" anymore. He went on to say that none of the patients ever want to stop taking their Vicodin & it always becomes a problem. I agreed that all opioids have abuse & addiction potential & asked if he would agree that there are patients in legitimate pain who take opioid medications responsibly. He said there are some. I asked him to think of those patients when thinking of Butrans. Positioned Butrans for patients taking tramadol or Vicodin chronically around-the-clock who are saying their pain medication is no longer adequately controlling their pain. He said he would use Butrans & is not opposed to using it for the right patients. I asked about his experience with OxyContin. He said he hates it & has not had good experiences with it. He said he has a patient who has cancer who is taking it, but other than that, he will not use it. I spoke with Mindy & Mary Ann (MA's) who said that a patient who had been on Butrans 10mcg since Oct 2011 recently called complaining of nausea & vertigo. They said the patient is blaming the Butrans for these adverse events & discontinued Butrans. I let them know I would report this.
PPLPMDL0020000001	Cleveland	OH	44130	4/10/2012	Spoke with Allison & presented information on savings programs for Butrans & OxyContin. Discussed eligibility requirements for use of trial & savings cards & discussed automatic monthly savings through e-voucher for eligible customers. Reminded her that OxyContin cards can be used once every 14 days for patients who pay cash who have a prescription written that way.
PPLPMDL0020000001	Parma	OH	44129	4/10/2012	Myra said she was running behind today & did not have time to stop & talk. She added that she is trying Butrans on a few patients & keeps forgetting that she really can't use it in her nursing home population. Let her know there is a chance patients on Medicare could obtain Butrans, but that a prior authorization would have to be completed. I asked her to go through that process if she really believes Butrans is the best option for a particular patient. She said she would.
PPLPMDL0020000001	Euclid	OH	44119	4/10/2012	I showed doc the spread of the profiles of Emma and William. I explained the different patient types and asked which one of the types he sees most often. He said he sees both types. I asked him which one would he more likely prescribe butrans for. He pointed to the profile of Emma. I supported his opinion that patients falling on tramadol would be an appropriate candidate for butrans. I showed him the sliding initiation tool on how to start patients. I reminded him that new patients to butrans can get a one month trial with the savings cards.
PPLPMDL0020000001	Mayfield Village	OH	44143	4/10/2012	I reviewed the "Emma" patient profile for butrans and asked her if they saw patients like that. She agreed that they do have patients just taking tramadol. I explained that ideally, patients should be less than medicare age unless they have supplemental third party insurance. She said that's the problem. I asked if she has caresource patients. She said they do have a few. I explained the coverage there with a PA. She said she would try. She agreed to one script a week.
PPLPMDL0020000001	Bedford	OH	44146	4/11/2012	Dr Moufawad said everything is going well still with Butrans. He said if one of his patients is getting a long-acting opioid, they are getting Butrans. He went on to say that some patients have called only a few hours after they say they apply Butrans & are stating they "don't feel well" on it. Dr Moufawad said he gets suspicious of these patients because he thinks they just don't want anything other than pills. He said he gives them Butrans or nothing, unless he feels the patient is legitimate & being honest. I agreed that appropriate patient selection is important. Dr Moufawad asked me to leave more patient information booklets. He showed me how he opens the booklet with patients & shows them proper application & rotation. I told him that is a good thing to do. He also said patients have asked for savings cards & showed me where he keeps them. He asked me to make sure they stay stocked. I pointed out OxyContin savings cards next to the Butrans cards. Dr Moufawad said he has been giving those out as well. He then said he had to go & walked into a room.
PPLPMDL0020000001	Cleveland	OH	44128	4/11/2012	Spoke with floater pharmacist who said he had very little time this morning. Inquired about Butrans stocking. He said he does not think they have it here & added that some other locations he has been at don't stock it either. Reviewed appropriate patient type/range & reviewed OxyContin savings cards.
PPLPMDL0020000001	Cleveland	OH	44130	4/11/2012	Spoke with Michele, MA, & reviewed Butrans dosing, delivery system, & appropriate patient type. She said she does get phone calls from patients asking for refills of their short-acting opioid medications too soon. She went on to say that they get suspicious of this depending on the patient. Discussed the importance of appropriate patient selection & told her they should be cautious with all opioids. I asked if Dr Popa uses OARRS. Michele said she doesn't know. I asked her to give Dr Popa Butrans patient profile information & Initiations invitation & she agreed. I told her about the interactive nature of the Butrans program. She said Dr Popa probably won't do it, but she will leave it for her anyway. Also discussed OxyContin savings program. She said Dr Popa really doesn't prescribe OxyContin.
PPLPMDL0020000001	Parma	OH	44129	4/11/2012	I reminded Dr Gigliotti of previous discussions when he told me that patients are on "too many pills" for Butrans & asked if he thinks they fit more of an OxyContin patient type. He said he doesn't know. Reviewed patient type for both products & focused on appropriate patients taking 80mg equivalent oral morphine per day or less as potential Butrans candidates & those on more than that as potential OxyContin candidates. He said some patients just don't want to change. I told him if someone is not looking for a change, they may not be the right candidate. I asked what about patients who are asking for a medication adjustment to their opioid therapy- asking for either an increase in dose or dosing interval or who are saying their current medication is no longer controlling their pain. He said that makes sense. I asked him if this is a familiar scenario. He said "oh yes". I told him those may be his potential Butrans patients, if appropriate. He paused & asked what about a patient who needs a pain medication for "a short period". I asked him what kind of time frame he is talking about- what does he consider "a short period". He said "a few weeks". I reminded him Butrans is dosed once weekly & comes in a box of 4 patches, which would last a month. Also reviewed indication. I told him this may not be a Butrans patient. Dr Gigliotti said he knows he can find someone. I told him he is probably right.
PPLPMDL0020000001	Maple Heights	OH	44137	4/11/2012	Spoke with Kimberly (pharmacist) & inquired about current stocking of Butrans. She said she hasn't filled any prescriptions for it & the supply they did have expired, so she sent it back. She went on to say that she did see one prescription but the patient did not want to pay the \$80 co-pay, so they did not fill it. Discussed coverage & automatic savings through e-voucher. Reviewed appropriate patient type. Gave her a package of OxyContin savings cards & reviewed eligibility. Kimberly said she recently got a prescription for "1-2 80mg tablets every 12 hours". She asked why it might be written that way as she thought it was an unusual dose & dosing interval since she sees OxyContin written for every 8 hours usually. I told her OxyContin should be dosed every 12 hours per the full prescribing information. I also told her that there is no maximum dose of OxyContin & that that dose would depend on each patient & is limited by adverse events. I showed FPI 6.1 & let her know that doses as high as 640mg per day were studied. Kimberly said she did not end up filling the prescription because she was suspicious. I added color=blue>CHUDAKOB added notes on 04/19/2012- Nice use of the FPI here!
PPLPMDL0020000001	Warrensville Heights	OH	44122	4/11/2012	Quick call- Positioned OxyContin q12h for appropriate patients taking greater than 80mg equivalent oral morphine per day & Butrans once weekly for those taking up to 80mg equivalent oral morphine per day. Dr Zivic said he would "do his best" & walked into a room.
PPLPMDL0020000001	Beachwood	OH	44122	4/11/2012	Spoke with Debbie Macko, nurse manager with the pain management department. Inquired about an opportunity to inservice nurses or staff in addition to getting an appointment to meet Dr Dimitri. Debbie said she would see if this would be possible. Offered OxyContin savings cards but Debbie said that none of the physicians really write OxyContin. I asked if she knows why not but she said she didn't know, but they try not to write medications "like that". Discussed Butrans & reviewed once weekly dosing in a transdermal system. She said again she would try to get me in with Dr Dimitri.
PPLPMDL0020000001	Bedford Heights	OH	44146	4/11/2012	Spoke with Sheena, MA, who said Dr Hochman was out of the office this week. Discussed Butrans care messages & asked her thoughts. She said she does not know if Dr Hochman would be interested or not as he has made changes to his practice & the types of patients he treats. Gave her sealed article & Initiations invite & asked her to make sure Dr Hochman got them. She agreed. Also asked her to give him my card in request for an appointment. She said he really does not do that but said she would give him my card anyway.
PPLPMDL0020000001	Westlake	OH	44145	4/11/2012	I reviewed that Butrans is an option for patients taking less than 40mg of hydrocodone per day and that patients taking more than this may not be appropriate. He said he understood this and will try to write for a few Butrans patients today. I gave him the OxyContin conversion guide.
PPLPMDL0020000001	Independence	OH	44131	4/12/2012	Spoke with MA, Kathi, & reviewed Butrans appropriate patient type & dosing. She said her mother takes Percocet around-the-clock & asked if Butrans would be good for her. I told her she should have her talk to her doctor & showed initiation guide pg 6, pointing out the appropriate range of patients. I added that if the patient is taking more than 40mg per day of oxycodone, they may not be appropriate for Butrans because it might not provide adequate analgesia. I asked if she gets calls too soon for refills of tramadol or Vicodin from patients of Dr Reddy. She said she does. She said he does not really talk to reps anymore, but agreed to give him Butrans sealed article & Initiations invite. Reviewed OxyContin 7 tablet strengths & managed care.
PPLPMDL0020000001	Hudson	OH	44236	4/12/2012	Spoke with pharmacist Bob & inquired about current Butrans stocking. He said he does stock it & used to have one customer on it regularly, but he is not sure if she is still on it. Reviewed appropriate patient type & savings through e-voucher for CVS customers. I asked if he ever sees new OxyContin prescriptions or just continuing. He said he does occasionally fill new prescriptions for OxyContin, usually for patients for a short period of time, such as after a surgery or injury. Discussed savings program- he still had some cards.
PPLPMDL0020000001	Independence	OH	44131	4/12/2012	I asked Dr Sundaram what it usually is that causes him to prescribe a long-acting opioid as opposed to a short-acting around-the-clock regimen. He said usually when a patient is taking short-acting opioids 4-6 times per day, that is when he changes them to a long-acting opioid. He went on to say that he also goes to long-acting when he knows a patient is going to need to be on pain medication for a year or more. He also said he has a lot of patients on OxyContin. Reviewed appropriate patient range for Butrans & included OxyContin for appropriate patients beyond Butrans range. I asked if he thinks that he is finding more OxyContin patients than Butrans because he is waiting until a patient is taking short-acting opioids up to 6 times per day before changing them to a long-acting option. He said this was a good point but added that there are "just so many options". I asked him to consider switching some patients sooner to Butrans, if appropriate & to continue to switch appropriate patients to OxyContin when they are already beyond the Butrans range. He agreed & said I made a good point.
PPLPMDL0020000001	Independence	OH	44131	4/12/2012	Dr Pai said he has been prescribing not as much OxyContin lately. I asked if there was a specific reason such as the problem he was having with pharmacy stocking. He said no reason in particular, he just finds that he is writing Percocet more than OxyContin. Discussed OxyContin as a q12h dose of oxycodone. He said he really doesn't have a problem with OxyContin. I asked if he is still waiting until patients on Percocet need 4 or more per day. His reply was that when a patient needs a long-acting opioid, then he goes to OxyContin. He then went on to say that his Butrans patient is still on it & doing well. I asked him to prescribe Butrans for appropriate patients who are taking less than 80mg equivalent oral morphine per day & OxyContin for those who are taking beyond 80mg equivalent.
PPLPMDL0020000001	Hudson	OH	44236	4/12/2012	Dr Seiple said he prescribed Butrans for a patient & the patient could not take it because he was "only" & Butrans did not stick. He went on to say that he has been trying to get most of his chronic pain medication patients referred out to pain management because he really does not like dealing with chronic pain medications. Discussed the importance of appropriate patient selection for all opioids. I asked Dr Seiple if he would, then, consider Butrans for patients who he is getting ready to refer to pain management. He said he thought this was a good place for it. Reviewed appropriate Butrans patient range, reminding him that patients beyond 80mg equivalent oral morphine per day may be more of an OxyContin q12h candidate if appropriate. Discussed Butrans as the only long-acting CII opioid, but reminded him of abuse & addiction potential. He said he will try Butrans on appropriate patients when they present.
PPLPMDL0020000001	Hudson	OH	44236	4/12/2012	I asked Dr Tosino what the difference really is between having a patient on Percocet around-the-clock or an equivalent dose of OxyContin q12h. He said he isn't opposed to OxyContin, but there is a negative stigma surrounding the name. I asked if he would prescribe OxyContin q12h for appropriate patients who are taking Percocet around-the-clock & he agreed, saying it is a good drug for the right people. Discussed the importance of appropriate patient selection. Dr Tosino said he has been keeping Butrans in mind. I asked if he has had any additional experience with Butrans since our last discussion. He said not really. I asked how frequently someone on short-acting opioids around-the-clock request a medication adjustment in the form of an increase in dose or dosing interval. He said not very often. I asked him to prescribe Butrans for those appropriate patients since patients who are not well-controlled on their current therapy are more likely to be willing to try something different. He agreed this would be a good patient type. He went on to say that patients do call too soon for refills because they make adjustments to their dose without telling him & he is more cautious with those patients to make sure they are doing so because of legitimate pain.
PPLPMDL0020000001	Mayfield Heights	OH	44124	4/12/2012	Quick call....HCP asked what's new with butrans. I reviewed the butrans covered plans and explained the one month trial with the new cards. She said she has not had any issues with butrans but she has been been over at the hospital most days of the week and not seeing patients often enough to prescribe more. She said her Schedule would be channing soon. I provided the initialiaion dosing tool.
PPLPMDL0020000001	Independence	OH	44131	4/12/2012	Spoke with MA Denise & discussed Butrans interactive program, passing back an Initiations invite for each physician (Boose, Clayton, Grusenmeyer). Asked her to give those to each of them & ask them to participate in the program. She said she would. Offered savings cards for both products & reviewed eligibility requirements for use. She said they did not need any & added that they don't really prescribe OxyContin. I asked if she knew why but she said she didn't know. I asked about an appointment but she said they are still not doing them. Gave her my card & asked her to call me if a change to the policy is made. She agreed.
PPLPMDL0020000001	Mayfield Heights	OH	44124	4/12/2012	Spoke to Debbie, MA, about the butrans patient type. Doc was out today. I explained the once weekly dosing and the CII status which means that butrans can be called in or refilled. She asked if it is covered on medicare. I told her no and explained the commercial plans and the savings cards. She confirmed that doc has them.

PPLPMDL0020000001	Hudson	OH	44236	4/12/2012	Spoke briefly with pharmacist & reviewed trial/savings program for Butrans as well as OxyContin savings cards. Discussed eligibility requirements for both programs.
PPLPMDL0020000001	Cleveland Hts	OH	44118	4/12/2012	I asked doc if he was still having success with butrans. âHe said yes but he just has to find the right patients for it. âI showed him the profiles of Emma and William as a reminder. âHe confirmed that he still has savings cards.
PPLPMDL0020000001	Highland Heights	OH	44143	4/12/2012	âAlso reminded him of the oxycontin indication and the preferred med D coverage for patients that may not have access to butrans.
PPLPMDL0020000001	Akron	OH	44309	4/12/2012	Spoke to Cindy, MA, about the butrans patient type and savings cards. âDoc was off today and not due back til next week. âShe confirmed that they still had enough savings cards to get to then.
PPLPMDL0020000001	Mayfield Heights	OH	44124	4/12/2012	Met Barb to provide her the 25 packets for her upcoming Medical meetings. I was short 4 Med Ed catalogs which Barb said she'd pull 4 of them from her order that we placed a couple of weeks ago. I will re-order her a packet of 5 for the Case Managers. She will provide this info at the Ohio & TN meetings. She may not be ready to make a decision for educational training for the CMs so she agreed that I'd follow up in May then again when I return from maternity leave this Fall.â
PPLPMDL0020000001	Mayfield Heights	OH	44124	4/12/2012	Spoke to Mary, MA, about butrans and doc was during blocks today. âI explained the indication, positioning, and the savings cards including eligibility and the trial month. âGave her a initiation guide and discover invite to give to doc.
PPLPMDL0020000001	Cleveland	OH	44143	4/12/2012	Window call....I reviewed the butrans CIII status, once weekly dosing, and indication and asked doc how his experience with butrans has been. âHe just said good. âI asked him to try butrans for a patient failing on a daily dose of tramadol and new patients can get a trial month. â
PPLPMDL0020000001	University Hts	OH	44118	4/12/2012	Window call....Reminded doc of the the oxycontin and butrans patient types. âI explained the preferred coverage of oxycontin âfor most MED D plans. âFor patients with most commercial plans, butrans is an option for patients with mod to severe chronic pain. âI showed him the profiles of Emma and William and reminded him that he said he would prescribe butrans for a patient that has already been on a short acting. âI asked him to try one patient that has failed on tramadol monotherapy. âNo commitment.
PPLPMDL0020000001	East Cleveland	OH	44112	4/12/2012	Quick call...I asked doc if he still has his savings cards as a reminder to prescribe butrans. âHe said he still has them but he just forgets about it because he is just used to writing pills. âHe asked for a dosing reminder again. âI reviewed the 3 strengths and that 5 and 10mcg are starting doses. â
PPLPMDL0020000001	Parma	OH	44134	4/12/2012	I reviewed the patient types for both oxycontin and Butrans. âI reminded doc that he agreed that he had patients that were taking hydrocodone monotherapy similar to the profile of William in the sales aid. âHe said he probably wont have a chance to write it because he is closing his office at the end of April 2012. âDoc will be relocating out of state.
PPLPMDL0020000001	Westlake	OH	44145	4/13/2012	I asked Dr Hernandez what usually causes him to switch someone from a short-acting around-the-clock opioid regimen to a long-acting option. He said he tries to switch almost everyone to Butrans or Suboxone because he likes buprenorphine so much. He added that he is thinking of writing an article about the topic because he has had a lot of successes in treating patients who had been on high doses of opioids like Opana or OxyContin to Butrans. I told him this surprised me because most of those patients are beyond what is considered in the full prescribing information to be appropriate. I asked if those patients are getting adequate pain relief with Butrans. He said he knows it is "off label", but he starts these patients on 20mcg or more of Butrans when making the transition. I agreed that 5 & 10 are the only starting doses & that the maximum dose is 20mcg/hr. I asked if this ever causes patients to go into withdrawal. He said no. He said his patients have done well on his method. He asked for new OxyContin savings cards because a patient recently said the pharmacist would not let her use it clinically and he said it seems like it might be good. I asked him to try it in a patient who has commercial insurance and he said he will try. I spoke with Pat and Sam regarding the appropriate patients for Butrans and they said that he has many patients who could try Butrans before going to hydrocodone.â
PPLPMDL0020000001	Beachwood	OH	44122	4/13/2012	Spoke with Latrice (MA) & discussed Butrans as a once weekly transdermal system to treat patients suffering from moderate to severe chronic pain. Reviewed appropriate patient type & range. Also discussed OxyContin managed care coverage & savings programs for both products. I asked her to make sure Dr Eckstein got the sealed article for Butrans & OxyContin conversion guide I left for him & she agreed. Still no lunch or appointment
PPLPMDL0020000001	Brooklyn	OH	44144	4/13/2012	Reviewed Butrans appropriate patient type with Dr Miguel, focusing him on his patients taking chronic Vicodin at the dose of about 3 tablets per day. Discussed once weekly transdermal dosing. He said he had forgotten it was dosed only once a week. Discussed OxyContin for patients beyond the Butrans range, such as those taking more than 40mg per day of hydrocodone. Dr Miguel said Dr Detwiler has patients on OxyContin, but he typically does not write CII medications. âHe took the initiation/titration guide for Butrans out of my hand & said he was going to use Butrans, then walked out of the room.
PPLPMDL0020000001	Parma	OH	44129	4/13/2012	Dr Roheny said he is "working on it" with Butrans. I told him I am confident that he has at least one appropriate patient who he could try Butrans on. Positioned Butrans for patients who are taking short-acting opioid medications around-the-clock & who are asking him about some sort of a medication change- either an increase in dose or dosing interval or someone who is asking for a different option to treat their pain. Asked him to focus on patients who are taking less than 80mg equivalent oral morphine per day for Butrans & consider OxyContin for those appropriate patients beyond that range. He asked if patients can take Percocet or Vicodin with Butrans. I told him they can, or they can take a non-opioid medication for supplemental analgesia. He then got a phone call & had to go.
PPLPMDL0020000001	Beachwood	OH	44122	4/13/2012	Quick call- Dr Warren said he had to work on a presentation he was giving over the weekend at a conference so he did not have time. Positioned Butrans for appropriate patients taking up to 80mg equivalent oral morphine per day & OxyContin for those beyond that range, especially if the patient is requesting a medication adjustment. He just thanked me & walked into his office. Spent time with his nurse, Donnie, going over appropriate patient type & range for each product & gave him initiation & conversion guide to keep at his desk. Donnie said Dr Warren hasn't really been using either of the medications but was not sure why not. He said I could try coming back next week to talk more with Dr Warren. I asked Donnie to give Dr Warren sealed article for Butrans.
PPLPMDL0020000001	Westlake	OH	44145	4/13/2012	Quick call at the window, I let him know that OxyContin is preferred for many patients with Medicare and in fact OxyContin has been studied in geriatric patients 65 and 75 years and older. I left the FPI info for his review.
PPLPMDL0020000001	Berea	OH	44017	4/13/2012	Spoke with Adam, I reviewed the use of supplemental analgesia with Butrans and that Butrans can be used in patients with renal impairment per the FPI. I reviewed the medication guide for Butrans and asked if he would let patients know about Butrans as an option, he agreed. I showed the conversion guide for OxyContin, he said he does not see as many new patients for OxyContin as he used to.
PPLPMDL0020000001	Berea	OH	44017	4/13/2012	Spoke with Nikki, we discussed the key messages for Butrans and the FPI regarding use of Butrans with supplemental analgesia and for patients with renal impairment. we reviewed the medication guide for Butrans and I asked if she would let patients know about it as an option, she said he might if they are looking for something else to try. I showed that OxyContin has been studied in geriatric patients and the conversion guide and low dose OxyContin 10 or 15mg as an option.â
PPLPMDL0020000001	Cleveland	OH	44130	4/13/2012	Spoke with Dorothy & Sharon (staff) & reviewed Butrans & OxyContin managed care. Sharon said she usually takes care of billing & prior authorizations. Discussed savings programs for both products & prior authorization process for Caresource. They said Dr Kansal sees a lot of Caresource patients. I asked if they get phone calls from patients asking for refills of medications such as tramadol or Vicodin before they are due to get them. They both said they take those calls.â
PPLPMDL0020000001	Berea	OH	44017	4/13/2012	Dr said that he has not tried Butrans yet, I asked if he would try Butrans as an option instead of going to vicodin around the clock and he said that he will. The table where the Butrans cards was gone and he said I could leave more at his station. I reminded him that low dose OxyContin is an option for patients taking vicodin or percocet around the clock.â
PPLPMDL0020000001	Berea	OH	44017	4/13/2012	Spoke with Jill, doctor is out this week for spring break. âI asked if she takes care of managed care issues for patients and she said they all do. I reviewed the managed care and savings program for Butrans.â
PPLPMDL0020000001	Beachwood	OH	44122	4/13/2012	Quick call- Dr Tabbaa said he is still prescribing Butrans & OxyContin & everything is going well with both products. He said he couldn't stay to talk & asked me to review any information I had with Jim, his nurse, who would relay it back to him. Spoke with Jim & reviewed Butrans dosing, managed care, & trial/savings cards. I asked him to give Dr Tabbaa a sealed Butrans article & he agreed. He said Dr Tabbaa would probably review it with his residents that were there today.â
PPLPMDL0020000001	Brooklyn	OH	44144	4/13/2012	I asked Dr Detwiler where long-acting opioids fit into his practice. He said generally, when a patient has a chronically painful condition, he treats them with long-acting opioids. He went on to say that because of state laws & regulations, he first has to have patients undergo many tests & sometimes surgeries before getting them into opioid treatments. I asked what the treatment algorithm looks like when he does start them on opioids. He said tramadol, then Vicodin, then Percocet, then long-acting such as OxyContin or fentanyl. He also added that he typically sticks with generic medications because they are the least expensive treatment. He added that even if the branded option is more effective, he typically uses generic due to cost. Discussed 7 OxyContin tablet strengths for flexibility in dosing. Dr Detwiler said he actually was not aware of the 15mg dose, so that was a good reminder. Discussed titration. I asked if, when he has a patient on a long-acting opioid, he allows something for supplemental analgesia. He said yes- usually Vicodin or Percocet. Discussed range of patients for Butrans as patients taking less than 80mg equivalent oral morphine per day & OxyContin for those beyond that range. Reviewed Butrans dosing, adverse events, abuse/addiction potential, titration, supplemental analgesia usage, & managed care/savings program. He spent time looking at the table on pg 6 of the Butrans initiation guide.
PPLPMDL0020000001	Woodmere	OH	44122	4/13/2012	Spoke briefly with Sharee & reviewed Butrans & OxyContin savings information & eligibility requirements. Also discussed appropriate Butrans type/range. She said they were too busy to check on stocking today.
PPLPMDL0020000001	Northfield Center	OH	44067	4/13/2012	Spoke with Kim, floater pharmacist, & reviewed Butrans patient type. Also showed her Butrans trial cards & reviewed eligibility requirements. Discussed automatic savings for CVS customer via e-voucher. Discussed OxyContin savings cards & floated eligibility/usage, including cash-paying patients having the ability to use it every 14 days if their prescription is written that way. She said she would leave my information for the regular pharmacists.
PPLPMDL0020000001	Westlake	OH	44145	4/13/2012	I asked Dr who he has written Butrans for lately, he said he usually thinks of Butrans as an option for patients taking vicodin and he wants to try a different medication. I asked how often he has these types of patients and he said he has many. I asked if he would continue to prescribe Butrans for these patients, he said that he would.â<font color=blue><b>CHUDAKOB's query on 04/19/2012</b></font>-You are asking him to continue to prescribe Butrans, yet he is rarely prescribing it. Perhaps a better conversation might be if he has so many patients that fit the Butrans profile, what is keeping him from using it routinely for those patients. You have to get to the reason he does not prescribe more. âOnce you find this out, you will have a place to build from.â<font color=green><b>HOLLUBA's response on 04/24/2012</b></font>-My next objective is now:why do you think Butrans is a good option for older patients? Do you think that Butrans would be good for younger patients for those same reasons?â<font color=blue><b>CHUDAKOB added notes on 04/25/2012</b></font>-Very good! âLet me know how it
PPLPMDL0020000001	Cleveland	OH	44135	4/13/2012	Spoke with Erica, she said that doctor has been utilizing the trial cards. I asked if she had noticed if he has started any new patients recently and she could not think of any. We reviewed the managed care for Butrans and that it is an option before he prescribes vicodin around the clock.â<font color=blue><b>CHUDAKOB's query on 04/19/2012</b></font>-What did you do on this call to make Erica feel important? âDid you ask her about how she works with the doctor? âDid you make her feel like the most important person you were speaking with, or was your conversation with her all about the doctor? âSomething to think about?â<font color=green><b>HOLLUBA's response on 04/24/2012</b></font>-ok, thanks-â<font color=blue><b>CHUDAKOB added notes on 04/25/2012</b></font>-Make every person you speak with feel like they are the most important person in the office and they will return it ten fold!
PPLPMDL0020000001	Cleveland	OH	44106	4/16/2012	I talked to dr about whats holding her back from starting patients on Butrans, dr said she hasnt seen the attending HCP's prescribe a lot of Butrans and follows their lead so at this point she's not started anyone asked dr who is the appropriate patient to start on Butrans, in her mind? dr said she thinks patients taking a couple vicodin or percocet, not controlled, would be appropriate. showed initiation guide, we discussed appropriate dosage ranges and asked dr if she's seeing patients within these ranges? dr said yes, asked dr if she would start 1 patient on Butrans, next time a patient needs a medication adjustment for 1 of these short-acting opioids? dr said she will consider it but has to get approval from attending HCP, told dr I understood that protocol and respected her decision regarding this, asked dr if I could follow-up next monday to see how it went with her starting 1 patient this week? dr said that would be fine, dr asked about insurance coverage for medicaid patients and Butrans? asked dr if she had a specific patient in mind? dr said no she just knows there is a lot of medicaid/caresource here at Main Campus and wants to know if Butrans is covered or not, we talked about PA criteria for Butrans and Caresource patients, asked dr if that seemed reasonable? dr said yes, we talked about commercial insurance patients starting on Butrans and use of initial trial offer cards and I asked dr to focus on these patients initially, dr said ok, showed dr OxyContin visual aid, asked dr
PPLPMDL0020000001					

	Cleveland	OH	44127	4/16/2012	showed dr patient profile,william,we talked about patients like this dr see's every day in practice,dr said when patients are maxed out on vicodin he usually starts them on percocet.asked dr how he feels about that? dr said not good,he would like reduce some of the short-acting opioids and try a medication like Butrans.dr said Butrans is newer to him so he's not comfortable with it yet and has to remember how to prescribe Butrans.showed initiation guide,we talked about initiation and titration of Butrans,asked dr if he has a couple patients in mind that he could start on Butrans this week? dr said yes he has a lot of patients in mind.dr asked about Medicaid coverage as thats majority of his patients,we talked about PA criteria for Caresource patients and I asked dr if he thought that was feasible? dr said yes it seemed easy enough and would start a couple patients.showed dr OxyContin visual aid,we discussed appropriate patients,asked dr how OxyContin plays a role in his practice? dr said it doesnt he rarely prescribes CII long-acting opioids.dr had to go so told dr I would follow-up next week to hear about the couple patients he committed to start on Butrans,dr said ok
PPLPMDL0020000001	Lakewood	OH	44107	4/16/2012	Spoke with Angela, I reviewed the the savings program for Butrans and OxyContin, they were good on cards. I asked if she had done any PAs for Butrans, she had not. I reviewed the coverage of Butrans for Caresource.â
PPLPMDL0020000001	Cleveland	OH	44127	4/16/2012	dr said he's not started anyone on Butrans yet but will do so,asked dr whats holding him back? dr said he keeps forgetting about Butrans,showed dr patient profile,william,asked dr if he treats patients like this? dr said yes but he has more started patients with codeine,asked dr if he will start 2 patients like this on Butrans,when a medication adjustment is necessary? dr said he will do that.dr asked about medicare and Medicaid coverage as thats his patient population,we talked about PA criteria for Caresource patients,asked dr if he thought that was feasible? dr said yes he could do that.showed dr OxyContin visual aid,we talked about dr starting his geriatric patients on OxyContin,dr said he doesnt prescribe CII opioids,dr said he sends those patients to pain management.
PPLPMDL0020000001	Akron	OH	44333	4/16/2012	Asked dr if she has had any candidates for Butrans and/or OxyContin in the last 2 weeks? âDr said that she continues to use OxyContin and attempted to write Butrans on Wednesday of last week. âDr said that she wanted to use it for a patient on Vicodin but the patient was not on Medicaid and it would have cost the patient \$240.00 Thanks dr and Elyse(ma) for thinking of Butrans for that patient. âReviewed patient profiles and discussed copy card conditions. âAsked for âcommerciallyâinsured patient on tramadol or vicodin for Butrans. âDr agreed to continue finding appropriate patients.â
PPLPMDL0020000001	Brooklyn	OH	44144	4/16/2012	Spoke with Rhonda & delivered Butrans core messages. She said she hasn't seen any Butrans in the store. Reviewed appropriate patient type with her, showing appropriate patient range in the Butrans initiation guide. Also let her know about automatic monthly savings through e-voucher & discussed OxyContin savings program. Reviewed eligibilityârequirementsâfor savings programs, including no usage for patients with any type of government
PPLPMDL0020000001	Parma	OH	44129	4/16/2012	Quick call- Reminded Dr Taylor of our previous conversation when we discussed Butrans for appropriate patients who are requesting a medication adjustment for their chronic opioid therapy. She said she is keeping it in mind. OxyContin reminder message.
PPLPMDL0020000001	Parma	OH	44134	4/16/2012	Lynda said that since our last discussion, she learned that mid-level practitioners can prescribe CII products. Reminded her that Butrans is CIII & OxyContin is CII. Also reminded her that Butrans is the only long-acting CIII opioid available. Discussed Butrans once weekly dosing in a transdermal system. Reviewed appropriate patient type, focusing her on patients who are not well-controlled on tramadol instead of starting them on Vicodin or increasing their dose of tramadol. Lynda said that because she is still newer to the practice, she typically sees "overflow" patients & not those who are getting maintained on medications. She said that while she is not doing a lot of prescribing right now, she plans to do so when she has more authority within the practice. She also said she is willing to suggest Butrans to the physicians if she identifies an appropriate patient.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/16/2012	Asked Dr if he has patients that are on NSAIDS, Cox2's, tramadol or vicodin that are failing or may need a dose adjustment. âDr said he has patients on all medicines I mentioned. âDr said he knows about Butrans because of being detailed a long time ago but had forgotten about the product. âReintroduced Butrans and gave key selling messages. âDr liked that it is a CIII because the practice has banned ALL CII products because of abuse problems. âDr mentioned that OxyContin has also been banned from office. âDr's will refer to pain specialists for patients that need OxyContin. âDiscussed appropriate patient selection for OxyContin and used pages 4 and 5 of main visual. âDr agreed that Butrans may have a place in his practice. âDr wanted me to ensure Jessica has Butrans in his Escribe system so he can use it. âDr agreed to try the product.
PPLPMDL0020000001	Parma	OH	44134	4/16/2012	Quick call- Reminded Dr Loyke of previous Butrans discussions. Reviewed Butrans once weekly dosing & delivery system. Also discussed Butrans as the only CIII long-acting opioid. I asked him to try Butrans for an appropriate patient in legitimate pain who he does feel comfortable having on long-term opioids. He thanked me for the information & left.
PPLPMDL0020000001	Parma	OH	44129	4/16/2012	Spoke with Alla, new pharmacist at this store, & inquired about stocking of Butrans. She said they do not have it on their shelf nor has she heard of it. Reviewed core messages & discussed appropriate patient type, showing her patient range in initiation guide. Also asked her about OxyContin stocking. She said they stock "the 5mg strength". I told her OxyContin does not come in 5mg & showed her 7 tablet strengths. She went to her safe & showed me a bottle of "oxycodone 5mg". Discussed OxyContin as a q12h dose of oxycodone in extended release form. She said she didn't realize that difference.
PPLPMDL0020000001	Parma	OH	44134	4/16/2012	Reminded Dr George of previous discussions about Butrans & OxyContin. He said he actually did try Butrans on "a couple" of patients. He went on to say that one of the patients filled the prescription but "was afraid" to try it. I asked why. He said it was the patient's family that was afraid to have her on it but he did not know why, especially because they filled the prescription. I asked what the patient had been on prior to him giving her Butrans. He said this patient had been on Vicodin but felt sick from it. Reminded Dr George that Butrans has similar opioid-type adverse events. Discussed once weekly transdermal dosing & reviewed appropriate patient type, focusing him on patients who are not well-controlled on tramadol before he initiates Vicodin or when an appropriate patient on chronic opioids for whom he is considering a medication adjustment. Also discussed the ability for patients to take supplemental analgesia with Butrans, CII, & abuse/addiction potential. Dr George said he will give Butrans another shot. He asked about patient savings cards. Discussed trial/savings program & reviewed eligibility requirements. Dr George said he would try it.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/16/2012	Dr said that he has used Butrans in the past but nothing recently. âsked dr why he stopped using Butrans and are the patients you did use it for still on Butrans? Dr said he has just forgotten about it and that the patients are still on Butrans.Gave key selling messages and showed dr the case study patients to resolidify appropriate patient selection for Butrans. âDr agreed that he currently has a few patients that could benefit from using Butrans.
PPLPMDL0020000001	Parma	OH	44134	4/16/2012	âOxyContin is banned from the practice along with all CII's. Dr Scanlon said he is still prescribing Butrans with good results. Discussed appropriate range of patients for Butrans & OxyContin q12h as an option for appropriate patients beyond that range. I asked Dr Scanlon to prescribe Butrans for appropriate patients who are not well-controlled on tramadol, before starting them on Vicodin, encouraging him to initiate Butrans sooner in opioid therapy if appropriate. He said that he does do that. Also discussed patients who are taking Vicodin chronically when the dose they are started on is not controlling their pain. He said he uses Butrans on those patients as well & added that when he does that, he gives them a reduced supply of Vicodin to help with the transition. I told him it sounds like he is on the right track. He committed to continuing to prescribe for appropriate patients like the ones we discussed today.
PPLPMDL0020000001	Parma	OH	44134	4/16/2012	Stopped Dr Mandat in the hallway between patients with Butrans formulary grid. I told him I realize he mostly uses Butrans & opioids in his nursing home population, but pointed out favorable commercial insurance coverage, asking if he ever finds himself refilling or escalating the dose of an office patient's tramadol prescription. He paused & said he actually now is thinking of one particular patient for whom he will prescribe Butrans for when she returns for her follow-up visit. He said now that he is thinking about it, Butrans would be a good option for her. He then took the formulary grid & walked into a room. Left OTC samples.
PPLPMDL0020000001	Lakewood	OH	44107	4/16/2012	Spoke with Cindy tech, I reviewed the medication guide for Butrans and she said she still has some, she said they will give them to new Butrans patients and be sure that they know how to use it. I reviewed the savings program for Butrans and OxyContin and she said it will show up in their computer system when a discount is available.â
PPLPMDL0020000001	Cleveland	OH	44106	4/16/2012	I showed dr OxyContin conversion guide,vicodin examples,we talked about patients taking vicodin daily for chronic pain,ready for a long-acting opioid,dr said he has some patients taking vicodin and would consider OxyContin.dr said he writes a lot of OxyContin,knows we get data so I should know this.told dr I appreciated his business and asked if he would continue starting these patients on OxyContin? dr said yes he will.focused dr on his med of patients for OxyContin starts.showed Butrans initiation guide,we discussed doctors tramadol prescription. He asked dr if he will start a couple patients on Butrans the next time patients need a medication adjustment? dr said yes he will.dr said he has a couple patients on Butrans,likes that its a patch and a CIII so he can call in refills,asked dr if he's called in refills for Butrans? dr said not yet but he will once patients have been on Butrans for a few months and are on a stable dose of Butrans.we discussed importance of at least 1 refill,dr said that makes sense and he'll consider it next time focused dr on caresource and commercial insurance patients to start on Butrans.âsked dr if he will start 2 patients on Butrans this week,per our discussion? dr said he will do that.
PPLPMDL0020000001	Lakewood	OH	44107	4/16/2012	I told dr I want to make it as easy as possible for his patients to try Butrans. I asked if he would try some commercial patients this week and give them a trial card, the patients can try Butrans most likely for free. âHe said that he will try. âI reminded him that OxyContin is covered on Med D plans and that it has been studied in geriatric patients ages 65 and 75 and older.
PPLPMDL0020000001	Barberton	OH	44203	4/16/2012	Dr said that he has been detailed on Butrans but has forgotten most of it. âReintroduced Butrans and asked about his patient population that see him for pain. âDr said he doesnt like treating for pain but likes Butrans CIII and the 7 days patch could be a benefit to many of his patients. âDr asked about managed care information. âDiscussed trial offer and copy card information. âReviewed case study patients and showed the opioid naive and tramadol patients. âDr agreed where it should be used. âDr said he would try it when he finds the right patient. âOffice has banned CII's
PPLPMDL0020000001	Lakewood	OH	44107	4/16/2012	I reviewed our conversion about starting patients that are taking tramadol around the clock on Butrans. He said he will try, I asked what is holding him back, he said he just needs to see the right managed care. I that was all and he said yes, I reviewed the coverage for caresource and he said he said he will give it a try. I reviewed that his Med D patients may be appropriate for a low dose OxyContin since it is covered on most plans like AARP.â
PPLPMDL0020000001	Cleveland	OH	44106	4/16/2012	worked apm dept, internal medicine and family medicine depts
PPLPMDL0020000001	Lakewood	OH	44107	4/16/2012	I asked doctor how he chooses between Butrans and OxyContin, he said that he is trying to switch patients to Butrans when he can. He had tried to switch patients on OxyContin to Butrans also. I reviewed that patients should be tapered down before starting Butrans to 30mg of oral morphineâequivalent. âI reviewed the patient profile and when Butrans is appropriate. I spoke with Pat regarding the savings program for Butrans.â
PPLPMDL0020000001	Lakewood	OH	44107	4/16/2012	Spoke with John, I reviewed the Butrans FPI, use of supplemental analgesia and that the use of Butrans for patients with renal impairment. We reviewed the medication guide, I asked if he would let patients know about Butrans as an option and he said he might. âI reviewed the conversion guide for OxyContin and that patients taking hydrocodone around the clock may be appropriate for the 10 or 15mg OxyContin Q12hr.â
PPLPMDL0020000001	Akron	OH	44333	4/16/2012	Asked dr if he had read about Butrans or has used the product? âDr said he was not aware of the product. âsked dr if he has patients on NSAIDS, tramadol, or vicodin that are failing or need a dose adjustment? âDr said he has patients on all those products. âReviewed Butrans key selling messages and showed placebo patch. âDr asked how it compares to Fentanyl patch. âTold dr that I am unable to compare FPI to FPI but asked where he used Fentanyl? âDr said he does not use often but usually after Vicodin. âTold dr that Butrans should be used early on in the treatment of pain for moderate to severe pain. âReviewed case study patients to aid in where to use Butrans. Dr said he has patients that he sees could benefit from Butrans and liked that it is a CIII. âsked dr if he will try Butrans and dr agreed. âsked dr if he uses OxyContin. âDr said he tries to stay away from CII products and only has a couple of patients on percocet. âReviewed key selling messages for OxyContin and asked him to use instead of the short acting percocet. âshowed dr the dosing and conversion guide. âDr agreed to review and let
PPLPMDL0020000001	Lakewood	OH	44107	4/16/2012	I showed the vis aid for OxyContin and asked if he thinks of OxyContin for moderate pain per the indication, he said he usually starts them after they are taking 4 short acting, he does titrate the dose of the short acting up. I reviewed the conversion guide and asked if he would convert patients to 10 or 15mg OxyContin instead of increasing the short acting, he agreed.
PPLPMDL0020000001	Cleveland	OH	44106	4/16/2012	showed dr patient profile,emma,dr said he see's patients like this,is considering Butrans but hasn't started anyone on Butrans.âsked dr whats holding him back from starting a couple patients on Butrans? dr said he has a handful of patients on short-acting opioids but thats it he doesnt prescribe a lot of narcotics,we talked about dr considering 2 patients,like emma, that need a medication adjustment and considering Butrans.dr said he will do that.dr said he is only here 2 more months then leaving UH so he will do the best he can to start a few patients before he leaves we talked about initiation and titration of Butrans and I focused dr on commercial insurance patients that can use the initial trial offer cards.âsked dr for his commitment to start 2 patients on Butrans before I see him again next week,dr said ok he will see who comes into the clinic and if appropriate start patients on Butrans.showed dr OxyContin visual aid,we discussed moderate to severe pain scale and where dr feels OxyContin is appropriate,dr said for severe pain only,dr said he has a couple patients on Duragesic but those are for severe pain patients.âsked dr whats holding him back from starting a couple patients on OxyContin? dr said nothing he has 1 or 2 patients on oxycontin,dr said he just doesnt have a lot of clinical experience prescribing OxyContin but would if appropriate.focused dr on patients over 65yrs of age,we discussed med part d patients starting on OxyContin,dr said he will consider that
PPLPMDL0020000001					



	Cleveland	OH	44106	4/16/2012	dr said he started another patient on Butrans,we talked about the patient he started, patient was taking tramadol,maxed out and wanted more pills,dr talked to patient about Butrans and patient was willing to try Butrans so it worked out.told dr that was great and asked if patient was able to get Butrans from pharmacy? dr said yes,insurance paid for it and this was a medicaid patient.we talked about initiation dosage strengths of Butrans and titration,side effects,dr said he will titrate Butrans and discuss side effects in 2 week follow-up visit with patient. asked dr if he had more patients like this,to start on Butrans this week? dr said probably so and he will consider it.we talked about PA criteria for Caresource patients as dr said that majority of patients here at Main Campus.showed OxyContin visual aid,asked where dr feels OxyContin fits into his practice? dr said he thinks its a good long-acting opioid option and has a couple patients on OxyContin,dr said he doesnt really start many patients on CII opioids like OxyContin but thinks there's a place for them.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/16/2012	window call with Dr and gave brief overview of Butrans. âCIII, 7 day transdermal patch for moderate to severe chronic pain. âShowed placebo patch and asked dr to use it for patients failing on celebrex or tramadol. âDr said ok. ânothing else learned.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/16/2012	Met Holly T.(pharmacist) and discussed Butrans and OxyContin. âAsked if the pharmacy has filled Butrans. âShe said that they have the 5 and 10mcg in stock and two patients come in to fill. âHolly could not remember the physicians prescribing. âReviewed Butrans key selling messages and gave overview of trial offer and copy card. âHolly also said that pharmacy does fill OxyContin. âThey already had copy cards. âGave key selling messages for OxyContin.
PPLPMDL0020000001	Parma	OH	44129	4/16/2012	Dr Ortega said he has not started any new patients on Butrans recently. I asked him why not. He said he has mostly been filling in still for Dr Marshall & has decided not to make any medication adjustments for those patients since they are not "his". He said that he has, however, told each of them that if they decide to stay with him after Dr Marshall returns, he will be making medication dosing adjustments. He went on to explain that many, many of Dr Marshall's patients are on 7.5mg Percocet 4 times per day or more, which is a level he is not comfortable with. He said he does not know what he will do with those patients, but he might look to Butrans for them. Discussed appropriate range of aptiens for Butrans & asked him if he would ever consider OxyContin for a patient who was beyond Butrans. Dr Ortega said he did not know but perhaps he would. He then asked me what "oxycodone IR" is. I told him it is immediate-release oxycodone. He asked me if that is the same as OxyContin. I told him OxyContin is an extended-release (q12h) form of oxycodone, so they are the same molecule, but not the same delivery. He said that makes sense. I asked if he would continue to use Butrans & OxyContin where appropriate & he agreed.
PPLPMDL0020000001	Fairlawn	OH	44333	4/16/2012	Pharmacist(Sue) said that they continue to see random prescriptions for Butrans(Shah) and have many physicians who are using OxyContin on a regular basis. Sue said she didnt have time to run a query on OxyContin prescribers and asked me to come back and said that Mondays are typically too busy. Left OxyContin conversion guide.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/16/2012	Gave key selling messages for Butrans and OxyContin. âDr said he had not heard about Butrans but was interested to learn more. âDr asked about how often he can dose adjust and application sites as well as AE's and managed care coverage. âTold dr about adjusting dose every 72 hours and about steady state from FPI. âReviewed patient information guide to show application sites and well as show him the placebo patch. âDiscussed Butrans coverage and discussed trial offer and copy card information. Asked dr if he had patients that may fit the indication and profile for Butrans? âDr said he has many patients on celebrex and tramadol where he could initiate Butrans. âOffice has banned all CII's
PPLPMDL0020000001	Waterford	OH	45786	4/17/2012	W - Has written for Butrans and continues to consider as an option for patients after hydrocodone.âI - Butrans for appropriate patients who meet the indication when uncontrolled on hydrocodone/vicodin and requesting a change in therapy. Use of the patient profiler to discuss appropriate patients and starting doses of Butrans based on their current therapy.â
PPLPMDL0020000001	Waterford	OH	45786	4/17/2012	W - Continues to prescribe and consider Butrans for patients once they begin needing or taking their short acting medication around the clock.âI - Butrans for appropriate patients who meet the indication when uncontrolled on hydrocodone/vicodin and requesting a change in therapy. Use of the patient profiler to discuss appropriate patients and starting doses of Butrans based on their current therapy. Review of formulary coverage.â
PPLPMDL0020000001	Cleveland	OH	44113	4/17/2012	showed Oxycontin visual aid to dr,we discussed appropriate patients,dr said he starts a lot of patients on OxyContin as it works and no issues with insurance coverage,dr said he's happy prescribing OxyContin for appropriate patients so no issues there.I asked dr for his continued commitment to start more patients on OxyContin? dr said he will do that,showed dr OxyContin conversion guide with vicodin and percocet examples and asked if these are what patients take when he decides to convert to OxyContin? dr said yes sometimes,dr said it depends on patients,we talked about these conversions and starting on an appropriate OxyContin dose,focused dr on his geriatric,med part d,patients to start on OxyContin and asked dr if he will start a couple new patients on OxyContin this week,focusing on geriatric? dr said he will do that,showed Butrans initiation guide,we discussed short-acting opioid dosage ranges where Butrans would be appropriate,dr said he likes the idea of a once weekly dosing option in a patch like Butrans but his concern is insurance coverage because its a newer product to him,asked dr what insurance plan he was concerned about? dr said medicad,asked dr if he had a medicad patient in mind that he wants to start on Butrans? dr said no he just needs to know the insurance coverage for these patients as he has a lot of caresource,we talked about PA criteria for Caresource patients and Butrans and I asked dr if that was feasible? dr said yes and he will start patients
PPLPMDL0020000001	Waterford	OH	45786	4/17/2012	W - Continues to prescribe OxyContin for patients who have exhausted the use of percocet or continually needs adjustments in their short acting medication. Continues to consider Butrans for patients.âI - OxyContin for appropriate patient conversions from percocet when the indication is met. Review of q12h dosing, 7 dosing strengths and the ability to titrate 25-50% of the current dose. Butrans for appropriate patients who meet the indication when uncontrolled on tramadol or hydrocodone requesting a therapeutic change. Review of both OxyContin and Butrans formulary coverage.â
PPLPMDL0020000001	Cleveland	OH	44127	4/17/2012	showed dr emma,patient profile,asked dr if he's treating patients like this? dr said yes,asked dr whats the next step for patients like emma? dr said in past he would consider vicodin or another short-acting opioid but now he and his wife,dr agra,are sending patients to pain management as they dont want to prescribe a lot of short-acting opioids,we talked about dr starting patients like emma on Butrans when a dosage adjustment is required,i asked dr if that was something he was comfortable doing? dr said yes he will consider that,dr said he reviewed the info from our last discussion-Butrans fpi and initiation guide,and has considered Butrans for a few patients but he didnt think medicad covered Butrans,we talked about PA criteria for Caresource patients and Butrans,asked dr if he would be willing to start a couple patients on Butrans,based on our discussion,this week? dr said yes he will consider that,i told dr that Josie,Receptionist,processed a couple PA's for Caresource patients already so he can discuss this with her,dr said that was great and made it easier on him.
PPLPMDL0020000001	Cleveland	OH	44113	4/17/2012	showed emma,patient profile,to dr asked if he treats patients like this? dr said yes he has a lot of patients taking tramadol for chronic pain,asked dr whats holding him back from starting a couple patients on Butrans when a medication adjustment is necessary for patients like emma? dr said he doesnt know why he hasnt started anyone,he's just not thought of it and its a habit to write tramadol and just refill,we talked about initiation of Butrans and asked dr if that seemed easy? dr said yes,asked dr for his commitment to start 2 patients on Butrans this week? dr said he will do that,focused dr on commercial insurance patients and use of initial trial offer cards,asked dr if i could follow-up this friday to hear about the 2 patients he committed to start on Butrans? dr said that will be fine,showed OxyContin visual aid,we discussed moderate to severe pain scale,dr said he only has 1 or 2 patients on OxyContin unless they are nursing home or hospice patients,we talked about geriatric patients in his practice starting on OxyContin,when ready for a long-acting opioid,dr said he doesnt really start patients on OxyContin,its his practice.
PPLPMDL0020000001	Westlake	OH	44145	4/17/2012	Spoke with Dan, weâreviewedâthe FPI for Butrans regarding the use of supplemental analgesia and use with renalâimpairment. I asked if this type of info is helpful and he said that it is. I reviewed that medication guide for Butrans and how to instruct patients. We discussed low dose OxyContin as an option and reviewed the conversionâguide.â
PPLPMDL0020000001	Cleveland	OH	44130	4/17/2012	I reminded Dr Lash of our previous Butrans discussion when he told me that it sounded like something he would be able to use. I asked if he still feels this way. He said yes. I asked him what, then, is holding him back from identifying an appropriate patient & initiating Butrans. He said it is truly a matter of needing to be reminded about it more frequently. I asked if he reads any of the information that is left by representatives. He said he gets a large stack of paperwork from pharmaceutical companies every day & to be honest, he throws it all away. I asked how i can remind him. He said he wasn't sure. Reviewed Butrans appropriate patient type/range & discussed OxyContin as an option for appropriate patients beyond that range. I asked if he can think of patients in his practice that are in the Butrans range. He said yes. I asked if he would try Butrans for a few of them if appropriate. He said he would.â
PPLPMDL0020000001	Cleveland	OH	44130	4/17/2012	I briefly spoke with Patty, pharmacist, who said she still has not seen activity for Butrans, so they do not stock it. Reviewed appropriate patient type/range & asked if that sounded like customers she has. She said yes.
PPLPMDL0020000001	Cleveland	OH	44106	4/17/2012	Discussed OxyContin savings cards/usage & gave her one package per her request.
PPLPMDL0020000001	Cleveland	OH	44106	4/17/2012	showed dr Butrans initiation guide,dr said she remembered this patch for pain but didnt think there was coverage for medicad patients,we talked about PA criteria for Caresource patients and I asked dr if that was feasible? dr said yes that was reasonable to do and she will consider Butrans now for some patients,showed dr dosage ranges for appropriate patients,dr talked about her vicodin and percocet patients that she would like to try on Butrans,we discussed initiation of Butrans,titration and side effects,i asked dr if she will start 1 patient on Butrans before i see her again within the next week? dr said she will see who comes into the office but she will consider it now,dr asked me to book a lunch so we can spend more time discussing everything,booked in may.
PPLPMDL0020000001	Middleburg Heights	OH	44130	4/17/2012	Introduced myself & Purdue's products to Dr Abdallah. He said he has not heard of Butrans yet. Delivered core messages & showed initiation guide pg 6 to display the appropriate range of patients. Discussed OxyContin as an option for appropriate patients beyond that range. I asked if he has patients who fit into the Butrans range. He said yes. Discussed which dose a patient could start on depending on their current therapy. He asked if it could be used acutely. I told him Butrans is indicated for moderate to severe chronic pain. Discussed Butrans as the only long-acting CII opioid available & abuse/addiction potential. Also discussed ability ofâpatientsâto take supplemental analgesia in the form of immediate-release opioid or non-opioid medications if necessary. Dr Abdallah thanked me & walked out of the room.
PPLPMDL0020000001	Cleveland	OH	44130	4/17/2012	Positioned OxyContin q12h for appropriate patients who are taking Percocet around-the-clock. Showed Butrans formulary grid, stressing commercial insurance coverage. Dr Diab just thanked me & walked into a patient room.
PPLPMDL0020000001	Parma	OH	44129	4/17/2012	Stopped Dr Moysaenko in the hallway with Butrans initiation guide & OxyContin conversion guide. Positioned Butrans for appropriate patients taking less than 80mg equivalent oral morphine per day, especially if they are asking him for some type of medication adjustment or change. Reminded him of once weekly dosing in a transdermal system that is CII. He said he would try to find some patients. I showed him 7 OxyContin tablet strengths, pointing out the intermediate doses. He said that was a good reminder as he does not ever think of intermediate strengths.
PPLPMDL0020000001	Westlake	OH	44145	4/17/2012	I asked Brian where Butrans is fitting into his practice, she said he likes that it is a CII so he can write it and he is using it for patients where he thinks the managed care is going through. I spoke with Lori and set up an appointment to talk further about where he is having success with Butrans.â
PPLPMDL0020000001	Westlake	OH	44145	4/17/2012	Dr said that he tried to write for Butrans but it wasn't covered. He did not know which plan and i would have to talk to Elizabeth who was not in. I asked if managed care has been the only issue and he said yes. I asked doctor if he uses other long acting options like Oxycontin and he said he does use duragesic. I let him know I made an appointment so we can sit down and discuss further to make prescribing Butrans simple for him andElizabeth.
PPLPMDL0020000001					Spoke with Lori, she dose some of the PAs but mostly Elizabeth is the one to talk to
PPLPMDL0020000001	Cleveland	OH	44195	4/17/2012	worked apm dept
PPLPMDL0020000001	Cleveland Heights	OH	44118	4/17/2012	Spoke to Allen about the indication and positioning of butrans. âHe asked if butrans is like fentanyl. âI explained that there is no head to head data and that butrans is a CII narcotic which can be used as a first line opioid. âI also pointed out the use of supplemental analgesia and explained why i was telling him. âHe said he does get alerts like that and would normally call the doctor back. âProvided and initiation guide.
PPLPMDL0020000001	Westlake	OH	44145	4/17/2012	Spoke with Darrel, we reviewed the use of Butrans with supplemental analgesia. He asked about managed care and we reviewed the savings program for Butrans and OxyContin. âWe discussed that OxyContin is preferred on most Med D plans and that it has been studied in geriatric patients. He said this is good to know.â
PPLPMDL0020000001	Cleveland	OH	44130	4/17/2012	Dr Fedorko came out of a patient room & told me that the patient in that room was going to be going on Butrans. I gave him one of his savings cards & patientâinformationâbooklets to pass along to the patient if she is eligible. He said he had to go back into her room & could not stay to talk but thanked me for the information. Spoke with Mindy, who told me again about the patient she told me about last week who had been on Butrans for several months doing well &suddenlyâstarted to feel ill while on Butrans. Mindy said Dr Fedorko may put the patient back on Butrans. I told her that would be something they would have to decide, but reminded her that if the patient reacted badly to Butrans, he may want to choose a different option for her. Mindy said the patient had reported very good pain relief, so that is why she might go back on it.
PPLPMDL0020000001	Parma	OH	44129	4/17/2012	Spoke with Dawn (nurse, manager) who said Myra was too far behind to see me today. She said she thinks Myra has been using Butrans, though. She also asked me for more Butrans savings cards, so i provided some to her.
PPLPMDL0020000001					Reviewed eligibility requirements for usage. They were also running low on patient information booklets, so i left a few of them as well. Dawn said to stop back next week to meet their new PA, Elaine Tyron, who will be working at this location soon.â

PPLPMDL0020000001	Westlake	OH	44145	4/17/2012	I asked doctor if he would be seeing patients today who could benefit from Butrans as an option and he said that he might and will be sure to start them on Butrans. I spoke with Kelly regarding caresource and Butrans and she will let Tina know about the prior auth info.â
PPLPMDL0020000001	Westlake	OH	44145	4/17/2012	Quick call as he was getting done for the day, I asked doctor what his hesitation is with starting patients on Butrans, he said he does not have any hesitation, I asked if he would try Butrans for a patient taking tramadol around the clock and he agreed. I spoke with Juan and we reviewed the managed care, he did not know of any recent patient starts with Butrans but he said he will help to remind the doctor about it as an option.â
PPLPMDL0020000001	East Cleveland	OH	44112	4/17/2012	Quick call as doc was leaving. âI introduced butrans, the indication, positioning, and the once weekly delivery in a transdermal. âShe asked if it really last for one week. âI confirmed that it does. âProvided a formulary grid, initiation guide and asked her to review the product info.
PPLPMDL0020000001	Westlake	OH	44145	4/17/2012	Spoke with Kaitlin, I asked how I might be able to follow up with the doctor, she said she will ask again and see if we can get an appointment in the books. âShe did not know of any current patients on Butrans or the feedback.
PPLPMDL0020000001	Garfield Hts	OH	44125	4/17/2012	We reviewed the saving program for Butrans and OxyContin and had the cards.â
PPLPMDL0020000001	Westlake	OH	44145	4/17/2012	Caught Dr Sadowski briefly. Reminded him of our last Butrans discussion when we talked about patients who are not well-controlled on NSAID's or COX-2's & how Butrans could be an option for some of them. He said this is true but he was on his way out of the office, so he asked me to come back next week if I wanted to discuss it further. I agreed.
PPLPMDL0020000001	Cleveland	OH	44114	4/17/2012	Spoke with Jennifer, education dept. She is looking into fall's schedule and will let me know about dates for a LELE for the residents. I asked the best way to get Butrans and OxyContin info to the residents and she said I can always leave info for them. She will let me know more details about journal club and an in-service for Butrans.â
PPLPMDL0020000001					talked to John about patients he's starting,with dr marshall and dr katz in this practice, John said majority of patients are taking percocet,pain isnt controlled so they are starting them on Butrans and having success with this.I asked John about patients taking vicodin,showed william,patient profile,that arent controlled and need a medication adjustment,is he considering Butrans for these patients? John said yes he is now,John said since BWC isnt paying for Vicodin ES anymore,they have started a couple of these patients on Butrans as Butrans is being covered by BWC at this time.I asked John how the patients are doing? John said great,no complaints and they will continue using Butrans there for these patients.I asked John for his continued commitment to start more patients on Butrans this week? John said yes he will do that.
PPLPMDL0020000001	Akron	OH	44309	4/17/2012	Provided Barb the 5 Med Ed catalogs that I was short for the packets I created for her upcoming meeting.â
PPLPMDL0020000001	Westlake	OH	44145	4/17/2012	Saw dr in the resident education office, I asked if he had tried Butrans yet and if his residents were being educated on Butrans as an option. He said he did not think so, and said I could make an appointment to talk to him at his westlake office to talk further.â
PPLPMDL0020000001	Cleveland Hts	OH	44118	4/17/2012	Quick call....Reminded doc of the product portfolio and the patient types for butrans and oxycontin. âI showed doc the profiles of Emma and William and the respective starting dose.s I asked him try butrans when a patient comes in requesting a dose adjustment. âProvided formulary grid and asked him to give a savings card.
PPLPMDL0020000001	Cleveland Heights	OH	44118	4/17/2012	Spoke to Jennifer about the stocking and movement of butrans. âShe confirmed that they do have it but she still have not seen any scripts for it. âI explained the allowable use of supplemental analgesia, in case they do get a script where a patient is also taking breakthrough meds. âI provided an oxycontin conversion guide. âShe said they dont fill a lot of oxycontin scripts.
PPLPMDL0020000001	Cleveland	OH	44127	4/17/2012	I talked to dr about the 3 patients she started on Butrans,dr said patients are doing good, no complaints and she's going to start more patients on Butrans.I asked dr if she had patients taking codeine every day for chronic pain? dr said yes she has a lot of patients like that.I asked dr if she will start these patients on Butrans,the next time they need a dosage medication adjustment? dr said yes she will do that.showed initiation guide,we discussed dosage ranges and dr focused on codeine.dr said her patients are usually at 90mg or less/day of codeine,we talked about Butrans 5mgc being the starting dosage strength,we talked about titration and side effects of Butrans and I showed dr Butrans patient info booklet and asked dr to hand these out to patients she starts on Butrans,dr said she will do that.focused dr on caresource patients starting on Butrans and we discussed PA criteria for Caresource patients,asked dr if that was feasible? dr said yes it seemed easy and she will start more patients on Butrans.
PPLPMDL0020000001	Westlake	OH	44145	4/17/2012	I asked how he is titrating his patients down, he said that he is letting them know ahead of time and then lowering the dose or number of tablets for his patients who have been on opioids for a long time. He said that he is dismissing many patients that he feels are not appropriate for opioids. He said that he would like to write for more Butrans. He said that he wrote it for a patient taking a total of 30mg of oxycodone per day and she said it did not work. I reviewed that patients should taper down first before starting on Butrans and that patients who are taking lower doses of opioids would beâappropriate. He said he has hardly anyone who is taking just tramadol around the clock, but he does have some patients who are taking either 7.5 or 10mg hydrocodone 2-3 times per day. âI reviewed how he could initiate Butrans for these patients. I reviewed the savings program and managed care. He said that most of his BWC are already taking high doses of other long acting opioids. He said that he will try to fit Butrans in and will try it in patients that he can.â
PPLPMDL0020000001	Cleveland	OH	44195	4/17/2012	talked to anne about starting patients on Butrans in appropriate dosage ranges,showed initiation guide,anne said dr stanton-hicks has been starting more patients on Butrans lately and she see's all of his patients so she's happy so far with clinical results of Butrans.I asked anne to share with me the types of patients they are starting on Butrans? anne said patients taking vicodin or percocet,pain not controlled and asking for more pills,those are the patients they are starting on Butrans,we discussed initiation and titration of Butrans and I asked Anne if she will start more patients on Butrans this week? anne said yes she will.we discussed insurance coverage,with focus on BWC and commercial insurance patients and use of initial trial offer cards.
PPLPMDL0020000001	Cleveland	OH	44125	4/17/2012	Spoke with Emily & presented Butrans trial/savings card information. Also discussed automatic monthly savings for eligible patients through e-voucher. Also discussed OxyContin savings cards & reviewed eligibility requirements. Gave her new OxyContin conversion/titration guide for her reference.
PPLPMDL0020000001	Cleveland Hts	OH	44118	4/17/2012	Doc said that patients seem to be doing OK on butrans. âHe has only had to titrate one patient (previously mentioned). âHe said most patients are on the 10mcg. âI asked if he is advising patients to rotate the patch weekly. âHe confirmed that he was. âI reviewed the formulary plans and the savings cards with the trial month. âHe said he will continue to prescribe butrans where he sees it appropriate.
PPLPMDL0020000001	Cleveland	OH	44114	4/17/2012	dr said she's been starting more patients on Butrans lately,I told dr that was great and was happy to hear that and asked how her patients are doing on Butrans? dr said good so far,dr said these are vicodin patients that werent controlled so she wanted to start them on Butrans instead of giving more vicodin.dr said since BWC isnt paying for Vicodin ES anymore thats another factor she's considering for those patients,to start them on Butrans and its been working well so far.I asked dr if she will see more patients today/this week,that she can start on Butrans? dr said yes she will.tell dr I appreciated her continued business and was here to answer any questions/concerns,we discussed initiation dosage strengths of Butrans and titration and the patient info booklets to give patients when she starts them on Butrans.
PPLPMDL0020000001	Cleveland	OH	44114	4/17/2012	dr said he's started more patients on Butrans in past week and patients are doing great,asked dr to share with me who he's starting on Butrans that he feels are appropriate? dr said patients taking vicodin or percocet,when patients say their pills aren't controlling the pain anymore,he and john,pa,are starting them on Butrans,asked dr how patients are responding to this? dr said patients dont care when they know this is their only option.dr said its getting approved through BWC no issues so he's happy,asked dr for his commitment to start more patients on Butrans this week,dr agreed to do this.showed dr Butrans initiation guide,we discussed initiation and titration and told dr I appreciated his continued business
PPLPMDL0020000001	Cleveland	OH	44195	4/17/2012	hallway call-talked to dr about patients he's starting on Butrans,dr said he's received all of my info I left-Butrans fpi,initiation guide,formulary grid and appreciates the info as thats why he started some patients on Butrans.dr said he's started patients on Butrans that were taking vicodin and percocet but not controlled and asking him for more pills,we talked about initiating patients on Butrans,titrating,discussing side effects and giving patient info booklets to patients when he starts them on Butrans,dr said he's gotten those too that I left and will continue handing them out,asked dr if he will start more patients on Butrans this week? dr said yes he will focused dr on BWC and commercial insurance patients
PPLPMDL0020000001	Cleveland	OH	44112	4/17/2012	I reviewed the oxycontin indication and asked doc if he has initiating any patients on oxycontin lately. âHe said he has not and has just a few people on oxycontin still. âHe said many plans are requiring a PA for. âI confirmed a PA for Caresource but explained the coverage with most MED d Plans. âHe did not remember what plans. âI reviewed the butrans indication and key selling messages. âHe said that I will need to remind him because now his schedule has gotten busier working at different locations. âI showed the patient profiles and doc said he is interested in trying it. âHe already has savings cards. â
PPLPMDL0020000001	Westlake	OH	44145	4/17/2012	I reviewed that low dose OxyContin may be an option for patients taking oxycodone around the clock, he said that he agrees and he is trying to covert patients like these. He said that he uses the higher strengths of OxyContin and forgets that 10 and 15mg may be an option. I asked if he ever sees himself using Butrans as an option. He said that he would like to try it still, he asked about managed care and I asked if this is the only thing preventing him from trying it, he said yes, I reviewed the Butrans savings program and he asked what will happen if he forgets the card. I let him know that patients can still get the discount on the their copay at most chain pharmacies. He said that he will give it a try. We reviewed how and where patients should apply Butrans.
PPLPMDL0020000001	Cleveland Heights	OH	44118	4/17/2012	New PA in Dr. Harris' office. âI introduced the butrans indication, positioning, and other key selling messages. âExplained the formulary coverage and savings cards. âNothing learned.
PPLPMDL0020000001	Highland Heights	OH	44143	4/17/2012	Window call...I asked doc if he is still getting good results with butrans. âHe said he has been on vacation and has not had a chance to write it. âI asked him if he still has any patients taking butrans. âHe said he thinks so but the problem is there is no coverage with medicare or medicaid. âI explained that caresource will cover butrans with a PA. âProvided a formulary grid.
PPLPMDL0020000001	Parma	OH	44129	4/18/2012	Quick call- Introduced myself & Purdue's products to Dr Cutarelli. She asked for a quick overview of Butrans. Delivered core messages & discussed appropriate range of patients, focusing on patients taking 3-4 tramadol or Vicodin per day chronically, & discussing OxyContin q12h as an option for appropriate patients beyond the Butrans range. She said she would have Dr Saul fill her in as she did not have time to stop & talk. Left information for showed dr OxyContin conversion guide,percocet examples,dr said he's not prescribing OxyContin anymore for his patients and is taking all of his patients off percocet,dr said he will consider Butrans as an option for them but not OxyContin.I asked dr if he has any patients 65+yr old that he feels OxyContin is appropriate for? dr said a couple,asked dr if he will continue those patients on OxyContin and titrate appropriately? dr said he probably will keep them on OxyContin if they are on a stable dose and pain is controlled.I asked dr if he will start a couple new patients like the geriatric patients he has on OxyContin,this week? dr said if he see's anyone that he feels should start on OxyContin he will do that but highly doubts it,asked dr to focus on med part d patients and we discussed OxyContin coverage on med part d plans.showed Butrans initiation guide,we discussed dosage ranges for patients that are appropriate for Butrans,I asked dr if he had a couple patients in mind that he felt Butrans could be the next step in therapy? dr said yes he has a lot of patients he would like to start on Butrans,dr said he has to remember Butrans,how to write the Rx and if insurance will pay for Butrans,dr focused on medicaid patients-we discussed PA criteria for caresource patients,asked dr if he can start 2 patients on Butrans between today and next week when I see him again? dr said he will see who comes into the office but yes he will consider Butrans for patients.
PPLPMDL0020000001	Olmsted Falls	OH	44138	4/18/2012	Dr said he is keeping Butrans in mind as an option, I reviewed the appropriate patient type and doctor asked what starting dose. We reviewed how to initiate Butrans based on what the patient is already taking. He asked about cost and I let reviewed the managed care and savings program for Butrans. He said that he will try to prescribe it.
PPLPMDL0020000001	Cleveland	OH	44106	4/18/2012	talked to dr about his patients taking tramadol for chronic pain and considering Butrans as an option when a dosage adjustment is necessary,showed initiation guide,dr said he knows who the appropriate patients are for Butrans but hasn't started many patients here because of medicaid coverage,we talked about PA criteria for Caresource patients and I asked dr if that made a difference in him choosing Butrans for patients? dr said yes,asked dr if he will see any patients today that will need a dosage adjustment in their tramadol? dr said probably so,asked dr if he will start a couple patients on Butrans? dr said if patients are willing to wear a patch and insurance covers Butrans he will do that.
PPLPMDL0020000001	Parma	OH	44129	4/18/2012	Dr Saul said he remembers that Butrans is a once weekly patch for patients in place of tramadol or Vicodin. He also showed me in the office where he still has his Butrans initiation guide. He said he kept it close by in case he had a patient for it as he thinks it is a great option. He said he does not like to have patients onâmultiplepills per day & prefers transdermal products when available & he is glad to have an option that he can use before fentanyl. Showed him how to use initiationâtool to select the starting dose for Butrans & discussed titration & use of supplemental analgesia. Dr Saul asked about insurance coverage. Stressed commercial insurance coverage & usage of the trial/savings program. Discussed Medicare prior authorization process. He said that does make it more challenging because many of the patients he thought of for Butrans have Medicare. I asked him to think of his patients who are in the 50-60 year old range who still have third party insurance but who may suffer from pain from conditions such as osteoarthritis or low back pain. He said that would be a fair area for him to focus on for Butrans. He said he is hearing of more & more narcotics that physicians have to get certified with REMS to prescribe. Discussed OxyContin as an option for appropriate patients beyond the Butrans range, letting him know about favorable Medicare coverage. Reminded him that OxyContin is a q12h dose of oxycodone. He said it is an effective medication for the right patients.

PPLPMDL0020000001	Westlake	OH	44145	4/18/2012	Spoke with Vanessa, Dr not in today, we reviewed the OxyContin and Butrans savings program and managed care. I asked if she would help to choose appropriate patients for Butrans who can use the trial cards. We discussed providing relief preventing abuse brochure.
PPLPMDL0020000001	Parma	OH	44129	4/18/2012	Spoke with Jackie, pharmacist, who said she has not filled any Butrans prescriptions. Reviewed appropriate patient type with her. She said she thinks it would be a good option for patients taking short-acting opioids around-the-clock. Discussed ability for patients to take supplemental analgesia with Butrans. Also discussed abuse & addiction potential. Jackie said she would try to remember to mention it to some of the doctors when she is discussing a patient of this type with them. Also discussed OxyContin savings cards & eligibility for usage. Gave her one package of cards.
PPLPMDL0020000001	Cleveland	OH	44135	4/18/2012	Quick call at window, I asked doctor where he is having the most success with Butrans, he said he likes it as an option instead of giving patients other long acting options. He said he thinks patients should be a long acting as soon as they have a condition where they are in pain around the clock. Al spoke with Erica and she will make sure that he has the trial cards in his office where he can see them.
PPLPMDL0020000001	Cleveland	OH	44113	4/18/2012	worked pain management dept-saw dale novak,pa,dr shen is out until 4/25/12 on vacation,the staff said to follow-up week after because she will be swamped next wednesday and friday after being out of the office for 2.5 dr said she's been starting patients on Butrans every week and she's getting Caresource to approve PA's.told dr that was great to hear and asked if she will continue starting patients on Butrans? dr said yes.showed patient profiles,emma and william,asked dr which patient she treats most often? dr said both,asked dr what's the next step in therapy for patients like this? dr said in the past she would prescribe more of the same short-acting opioid or convert to another short-acting opioid to see if that controlled the pain but now that Butrans is available she thinks that's the next step for patients like this.asked dr if she will see patients like emma and william, this week,where she can start them on Butrans? dr said she probably will and yes will consider Butrans.focused dr on commercial insurance patients using initial trial offer cards and PA criteria for Caresource patients.
PPLPMDL0020000001	Olmsted Falls	OH	44138	4/18/2012	Spoke with Kelly, we reviewed the FPI for Butrans and the use of supplemental analgesia, and the use of Butrans with renal patients. I asked if she would use the medication guides to let patients know about Butrans as an option and she agreed. We discussed that OxyContin is covered for many Med D patients and that it has been studied in geriatric patients.
PPLPMDL0020000001	Warrensville Heights	OH	44122	4/18/2012	Spoke with MA Lucy & reminded her of my recent lunch with Dr Gulati & staff. Reviewed OxyContin formulary coverage & reminded her of savings cards for those eligible. Also described the interactive online Butrans Initiations program & asked her to give Dr Gulati an invitation. She agreed. Worked with her to schedule upcoming appointments.
PPLPMDL0020000001	Cleveland	OH	44104	4/18/2012	I talked to Robin,MA,who said that this office was closing next week and moving to Richmond Heights.I told Robin that wasnt in my territory but I would be sure to share their new office location info with the appropriate Purdue Rep so that person can talk to dr about our products,Robin said that was fine.
PPLPMDL0020000001	Bedford	OH	44146	4/18/2012	Dr Moufawad said he didn't have much time today & said he is still writing Butrans & having success. He told me that he has learned that other opioids are requiring a REMS to be completed by physicians in order to prescribe them. He asked if OxyContin falls into that group. I told him we do have a REMS program for OxyContin, however, it is not required in order to prescribe. He said that was good to hear. He took the Butrans patient information booklets out of my hand & put them in his exam room.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/18/2012	asked dr where he is using OxyContin in his practice. aDr said he is using it a lot for patients that need a long acting opioid. aHe said that it is getting more difficult to get for his patients but he said its important and he does what he can to get it approved. aAsked which plans? aDr said all of them. Asked if he will use Butrans? aDr said he has used it and it doesn't really have a place in his practice. aNothing else learned.<font color=blue>->-CHUDAKOB added notes on 04/26/2012>->-</font>-This is an OxyContin core. aNext call objective should relate to OxyContin.
PPLPMDL0020000001	Parma	OH	44129	4/18/2012	Spoke with pharmacist Jennifer who said she has not seen much of anything for Butrans. I asked if she frequently fills prescriptions for patients for refills of tramadol or Vicodin in the appropriate Butrans patient range (showed her the range) in initiation guide). She said she does. Discussed Butrans as a potential option for some of those patients. Reminded her of automatic monthly savings with e-voucher & discussed OxyContin 7 tablet strengths. She said she thinks they have most of them stocked.
PPLPMDL0020000001	Cleveland	OH	44104	4/18/2012	showed dr OxyContin conversion guide-we discussed vicodin and percocet conversions to OxyContin,dr said he has started more patients on OxyContin recently and a lot in hospice and nursing homes.dr focused discussion on his elderly patients,showed dr OxyContin fpi,geriatric 8.5,we discussed dr starting new patients on OxyContin that are over 65-yrs of age,dr said he will do that.we talked about UHC/AARP Silverscript and CCRX coverage for OxyContin,showed dr Butrans initiation guide,focused on tramadol dosage ranges and asked dr if he had patients taking tramadol for chronic pain? dr said yes more of his patients are taking tramadol than vicodin or percocet.we talked about Butrans being an option in therapy for these patients when a medication adjustment is necessary,dr said he started a couple patients on Butrans and they are doing well,asked dr if he will start a couple more patients on Butrans,when they need an adjustment in their tramadol dose? dr said yes he will consider Butrans.we discussed commercial insurance coverage and use of initial trial offer cards for these patients and we discussed PA criteria for Caresource patients.
PPLPMDL0020000001	Parma	OH	44129	4/18/2012	Spoke with Dina (MA) & reviewed Butrans & OxyContin savings information. Offered cards but they did not need any. I passed back sealed study on opioid-experienced patients & asked the girls to be sure Dr Salama got it. They agreed.
PPLPMDL0020000001	Cleveland	OH	44106	4/18/2012	showed dr Butrans initiation guide,we discussed dosage ranges for short-acting opioids where Butrans would be appropriate,dr said he likes that Butrans is a patch,likes that its once a week,dr couldnt remember if it was a CII or CIII,showed dr Butrans fpi and visual aid and we discussed Butrans is a CII and what that meant in terms of refills,dr said ok that was good to know and easier for him and staff if he wanted to call in a refill. asked dr what's holding him back from starting 1 patient on Butrans? dr said he hasnt seen any patients in the clinic that he feels aren't controlled on short-acting opioids and need a long-acting opioid.dr said he appreciates info and will keep Butrans in mind as an option for patients we talked about commercial insurance patients starting on Butrans and using initial trial offer cards and we discussed PA criteria for Caresource patients,i asked dr if this info made it easier for him to start 1 patient on Butrans,dr said yes if insurance covers Butrans that does make it easier on him,asked dr if i can follow-up next week,to hear about the 1 patient he has committed to start on Butrans? dr
PPLPMDL0020000001	Barberton	OH	44203	4/18/2012	Asked dr if he has used Butrans in his practice yet? aDr said he has not but he plans to. aAsked dr if there is anything holding him back or any questions about the product to make him feel more confident in using? aDR said no and thinks Butrans is a great product but just hasn't used it. aAsked dr where he sees using Butrans and OxyContin in his practice? aDR said that he uses OxyContin for his patients on vicoden or percocet who need a long acting product. aDr said that he believes Butrans to be used earlier after tramadol or vicoden. aGave key selling messages to dr again and confirmed his belief on proper placement with initiation and titration guide. aAsked dr to please start to use Butrans again. aDr agreed.
PPLPMDL0020000001	Copley	OH	44321	4/18/2012	Asked dr if he has had found a candidate for Butrans since our lunch a few weeks ago? aDr said he has not. aAsked if there is anything holding him back or questions he might have to increase his confidence? aDr said that he feels confident since he has used it in the past but he just hasn't used it yet. aAsked dr to use Butrans for his tramadol patient with low back pain who are on private insurance. aDr agreed to try again.
PPLPMDL0020000001	Berea	OH	44017	4/18/2012	We reviewed Butrans as an option instead of going to vicodin around the clock, doctor said that he has been wanting to try Butrans but has been too busy with his other businesses and remodeling the building that he has not thought of anything new. I asked if he thinks Butrans has a place in his practice and he said yes. I reviewed the dosing, initiation and titration. Doctor agreed to try Butrans. We discussed that low dose OxyContin is an option for patients taking short acting opioids around the clock, he said that he is referring all of these patients out of his practice. He lets the patients choose who they are going to see, but some go to daoud, and girls. aHe will not send anyone to Dr Nickels.
PPLPMDL0020000001	Cleveland	OH	44109	4/18/2012	worked internal medicine,family medicine and rheumatology dept's-left Butrans fpi,initiation guides,formulary grids and patient info booklets for each HCP in these dept's; left OxyContin fpi and conversion/titration guide
PPLPMDL0020000001	Cleveland	OH	44113	4/18/2012	talked to dale about patients like emma,patient profile,that are appropriate for Butrans,dale said he started a couple patients on Butrans recently,we talked about these patients and initiation,titration of Butrans.i asked dale if he will continue starting patients on Butrans? dale said yes he will.focused dale on BWC and commercial insurance patients to start on Butrans.
PPLPMDL0020000001	Cleveland	OH	44103	4/18/2012	talked to nick,pharmacist,about what patients are saying to him when they have chronic pain and are taking opioids daily for their pain.nick said patients usually just ask about side effects,sometimes he will get questions about which laxative is the best choice and sometimes patients will ask him for recommendations of another medication if what they are taking isnt controlling their pain.i asked nick if he recommends medications to patients,in the opioid class? nick said sometimes he will and he has recommended Butrans to some patients and given patient info booklets to them so they can talk to their HCP's about Butrans.told nick i appreciated him doing that and asked for his commitment to continue doing that,nick agreed to do that.we talked about initiation and titration of Butrans,application sites-showed booklet and we discussed side effects and refills of Butrans.showed Nick OxyContin conversion guide,we discussed patients converting from hydrocodone or oxycodone to OxyContin,nick said he rarely gets questions on converting to Oxycontin but he will take the guide as a reference in case someone asks him.we talked about med part d coverage for OxyContin with focus of our discussion on geriatric patients starting on OxyContin.showed nick OxyContin fpi,geriatric 8.5, and talked to Nick about me discussing this info with my HCP's.Nick said that was a good reminder for him about the efficacy and safety of OxyContin in this patient population
PPLPMDL0020000001	Cleveland	OH	44106	4/18/2012	showed dr william,patient profile,we discussed this patient type,dr said he see's patients like this and has started patients on Butrans.told dr that was great to hear and asked how long ago was it that he started a new patient on Butrans? dr said its been awhile.dr said its been hectic as he's covered for a few attending physicians and hasnt thought much about Butrans but knows its there.we talked about initiation and titration of Butrans and i asked dr for his commitment to start a couple patients on Butrans today and next week,dr agreed to do this.focused dr on PA criteria for Caresource patients starting on Butrans and we discussed commercial insurance patients starting on Butrans and using initial trial offer cards.showed dr OxyContin conversion/titration guide,we talked about geriatric patients converting from percocet to OxyContin,dr said he is starting patients on OxyContin,asked dr what dosage strengths does he usually prescribe to start patients? dr said 10mg or 20mg usually for patients,we talked about 7 tablet strengths of OxyContin and titrating appropriately,asked dr if he will start a couple new patients on OxyContin between today and next week? dr agreed to do this.focused dr on med d plans and coverage for OxyContin
PPLPMDL0020000001	Akron	OH	44313	4/18/2012	Brief conversation through window. aAsked dr if he is using percocet to treat patients for pain? aDr said yes. aAsked dr what it would mean to his patients to be on OxyContin Q12h as many as 2 pills a day? aDr said he uses OxyContin and understands where to use it. aAsked if he has used Butrans yet? aDr said no. aNothing else learned. aDiscussed Butrans with staff.
PPLPMDL0020000001	Cleveland	OH	44104	4/18/2012	dr said she's not started anyone on Butrans again but will do so,dr said she keeps forgetting about Butrans and its just not a habit,asked dr if there was any clinical info she needed in order to feel more comfortable prescribing Butrans? dr said no,i told dr ok knowing that she is comfortable with the clinical side of Butrans what does dr feel is the biggest challenge in starting 1 or 2 patients on Butrans? dr said a lot of patients just want their pills,dont want a patch and she doesnt have time to discuss Butrans at length with patients to convince them to try it,we talked about patient info booklet educating patients,asked dr if that was helpful in her opinion? dr said yes but some patients still only want their pills.we discussed dr starting 2 patients on Butrans,looking like william,patient profile,and giving the patient info booklets for education,dr said she will do that,asked dr if she can start 1 patient before my lunch with her next tuesday? dr said yes she will do that,we discussed PA criteria for Caresource patients and Butrans as dr said thats her biggest patient population.
PPLPMDL0020000001	Parma	OH	44129	4/18/2012	I asked Dr Chagin what experience with Butrans he has had lately. He said he has not started anyone recently but is not sure why. He went on to say that so many of his patients are taking Percocet around the clock. He asked if it would be difficult to switch those patients to Butrans. I told him it will depend on the patient & what dose they are taking & suggested that some of them on higher doses may be more of a potential OxyContin patient than Butrans. I asked him for an example of a dose of Percocet that a patient he is thinking of takes. He said his highest takes 40mg total per day. I told Dr Chagin this patient is right on the cusp of the appropriate Butrans patient range & said he may want to consider OxyContin 20mg q12h for that patient. I asked if he has patients taking less than 40mg per day total. He said he has a lot. I showed him on initiation tool how those patients, if appropriate, could be initiated on Butrans. Discussed the ability for patients to take supplemental analgesia with Butrans. Also discussed Butrans as the only long-acting CII opioid analgesic. He asked what the abuse potential is compared to other opioids. I told him we have no comparative data, but that because it is an opioid, Butrans does carry abuse & addiction potential & advised him to be just as cautious with it as he is with other CII medications. Reminded him of savings programs for both products. Dr Chagin said he will start using Butrans more.
PPLPMDL0020000001	Copley	OH	44321	4/18/2012	Spoke to Jenna(pharmacist) about Butrans and OxyContin. aAsked her if she knew about Butrans. aShe said there are a couple of patients on it. aOne patient on 5mcg and the other on 10mcg. aAsked her if she knew who was writing and she said no. aDiscussed Butrans key selling messages and explained copy card and trial offer. aAsked if pharmacy dispenses OxyContin. aJenna said they do a lot of prescription fills for OxyContin. aAsked Jenna what med they fill most for pain? aJenna said that it is a toss up between vicoden and percocet. aExplained OxyContin dosing and conversion guide and reminded that it is Q12h.
PPLPMDL0020000001					

	Parma	OH	44134	4/18/2012	Dr Hernandez said he has given out some of the new OxyContin savings cards & has not heard anything back about them, so they must be working out. He went on to say that he is clinically happy with Butrans & his only complaint is that he sometimes has problems with the pharmacists filling his prescriptions. I asked him to elaborate. He said sometimes they will not fill the prescription when he writes it for 20mcg patches two every 7 days. I told him this is probably due to the fact that the Butrans FPI states that 20mcg/hr is the maximum recommended dose. He said he knows that, but he has to explain to the pharmacists that his patients typically take about 32mg per day of buprenorphine in the form of Suboxone, so taking 40mcg/hr should not be a problem. I told him when we studied two of the 20mcg systems together there was an increased risk of QTc interval prolongation. He said this does not concern him since other buprenorphine products do not have such dosing restrictions. I told him I can only speak to the FPI. He said he knows that but he has to do what is best for his patients.á
PPLPMDL0020000001	Cleveland	OH	44145	4/18/2012	Ash said our LELE speaker is not needed for the May 2 program in Miami. The program agenda was full and they could not squeeze him in. I asked for more notification next time because we were just told this and it's two weeks before the conference. I also stated if he can't confirm our speaker for the Sept program before I leave for maternity leave then I'm cancelling our speaker altogether. He shared his interest in working with Purdue to utilize our resources with his customers so the conversation shifted to Pain PACT. He's interested in speaking with MBK regarding this opportunity with his independent RPHs. á á
PPLPMDL0020000001	Cleveland	OH	44113	4/19/2012	talked to dr about patients like william,patient profile,and starting them on Butrans when a medication adjustment is necessary.dr said he's been swamped with patients,hasnt thought of Butrans but will start a couple patients.dr said he promises to do this.we talked about dr starting patients on Butrans 5mcg or 10mcg and discussed titration and side effects,showed dr patient info booklet we discussed application sites,rotation and disposal,asked dr if he can start 1 patient on Butrans this week or next? dr said yes he will do that.focused dr on commercial insurance patients and asked dr where OxyContin plays a role in his practice? dr said nowhere because he doesnt prescribe OxyContin,dr said he doesnt write many long-acting opioidsá
PPLPMDL0020000001	Brooklyn	OH	44144	4/19/2012	Spoke with MA Audrey briefly, reminding her of my last discussion with Dr Deeb regarding Butrans & the appropriate patient type/range. She said she really didn't have any time to see if Dr Deeb could see me. I showed her savings cards for both medications & asked if she needed more of either of them. She said she had no time to check & I would have to come back another time.
PPLPMDL0020000001	Independence	OH	44131	4/19/2012	I stopped Dr Jack between patients & told him I had just one question for him. I asked him what the downsides would be of starting an appropriate patient on Butrans. He said there are none & that that was a good question. I gave him initiation guide slide-out tool. He said this would help him. I told him he has to choose a patient first. He said that Butrans is CIII & once a week. I told him he is correct. Started to go through OxyContin formulary grid but he said he had to go.
PPLPMDL0020000001	Cleveland	OH	44106	4/19/2012	talked to george,pharmacist,about short-acting opioids listed in Butrans initiation guide,asked George if he see's patients taking all of these? George said yes patients come in every month for refills,asked George how the conversation sounds with these patients when providing med mgmt therapy? George said usually patients just have questions about side effects and sometimes ask for recommendations on another med.I asked George if he's been recommending Butrans? George said yes to some patients where a long-acting opioid is the next step and appropriate,he's given patient info booklets to patients and tells them to talk to their HCP's about Butrans.asked George if he will continue doing so? George agreed to do this.confirmed Butrans stocking and we discussed formulary coverage.showed OxyContin visual aid,we discussed appropriate patients,george said he doesnt recommend OxyContin to patients but doctors still write a lot of OxyContin.George said its the same patients monthly,not many new Rx for OxyContin,we talked about converting patients from hydrocodone or percocet to OxyContin.George took the conversion guide and said he would keep for his reference.we talked about insurance coverage,discussion focused on geriatric patients and med d patients starting on
PPLPMDL0020000001	Cleveland	OH	44195	4/19/2012	talked to Curt,pharmacy mgr,briefly about Butrans stocking and asked Curt who is writing Butrans in the hospital? Curt said he knows some pain management HCP's are writing but doesnt have time to look up every script in their computer.we talked about 6 core selling messages,Curt focused on Butrans being a patch and CIII,saying he liked these features of Butrans.asked Curt if he would continue giving patients the patient info booklet when he feels a long-acting opioid could be the next step in therapy,so patients can talk to their HCP's about Butrans? Curt agreed to do this.we talked about refills and I told Curt i am discussing this with my HCP's as Curt said he rarely see's a refill for Butrans.we discussed PA criteria for Caresource and commercial insurance coverage.we discussed appropriate patients for OxyContin,showed visual aid and we discussed med part d coverage with focus of our talk on geriatric patients.confirmed OxyContin stocking.
PPLPMDL0020000001	Shaker Heights	OH	44122	4/19/2012	Quick call- Showed OxyContin formulary grid, pointing out Medicare D status. Also showed him Butrans demo patch, letting him know this is what one week of Butrans looks like. He said he will try to remember it.á
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	4/19/2012	asked dr through window about her success with Butrans. ádr said they are all doing well and the trial offer has helped significantly. Nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44113	4/19/2012	showed dr Butrans initiation guide,asked dr if Butrans could play a role in his practice? dr said no,not at this time,dr said he's only seeing acute pain patients and sending all chronic pain patients to pain management.dr said he sends most of his patients to dr shen,at lutheran hospital.dr said he doesnt want to do Tox screens,pain agreements,see these patients every 4 weeks,dr said pain management can do that.dr said he will take info and appreciated it but there's no place for Butrans at this time because the indication is only for chronic pain.
PPLPMDL0020000001	Cleveland	OH	44113	4/19/2012	showed dr William,patient profile,asked dr how he would treat a patient like this and what would be the next step in opioid t[herapy]? dr said he would probably give a refill of vicodin or increase dosage strength but now that Butrans is available he wants to start patients on Butrans? I asked dr what he likes about Butrans? dr said he likes that Butrans is transdermal,once weekly delivery and its a CIII.we talked about Butrans being a CIII,meaning dr can call in refills or write them,dr said that was much easier for him.I asked dr if he will see a couple patients today-next week,that look like william,where he can start on Butrans? dr said probably so and he will do that.dr asked how to write the Rx for Butrans? showed initiation guide and script example for Butrans,dr said ok,we talked about PA criteria for Caresource patients and Butrans,dr said that helps as majority of his patients are medicaid-caresource patients.
PPLPMDL0020000001	Akron	OH	44310	4/19/2012	Followed up on Drs Butrans prescriptions. áAsked dr if I was incorrect or did he prescribe Butrans. áDr Goswami said he doesnt recall prescribing Butrans. áI asked if maybe he had a patient referred to him that was already on it and he refilled the prescription? áDr said he doesn't remember prescribing or refilling. áAfter a short discussion he thought he DID remember prescribing Butrans but wasn't sure...Rhonda(NP) thinks he did write Butrans and just cant remember.
PPLPMDL0020000001	Berea	OH	44017	4/19/2012	Quick call, I reminded doctor that he said he wanted to try Butrans for tramadol patients instead of vicodin and that patients can get a trial month, he said ok. I asked if he had tried it, he said no, I asked if anything was holding him back, he said no just hadn't thought of it.á
PPLPMDL0020000001	Shaker Heights	OH	44122	4/19/2012	Spoke with pharmacist, Doug, who said he does not stock Butrans since he has not seen any prescriptions for it. Discussed appropriate type/range of patients. He said he does have a lot of customers on pain management medications. I asked what strengths OxyContin they stock. He said he has all of them. Discussed savings programs & asked what type of managed care plans he sees most of. He said a lot of Medicare & Medicaid, but added that he does see some commercial insurance as well.á
PPLPMDL0020000001	Cleveland	OH	44113	4/19/2012	talked to deb about the patients she's starting on Butrans,deb said these patients are taking vicodin,but at the 4-5 pills/day range,not controlled and need something else thats where she's placing Butrans.I asked deb if she would consider patients taking 3 vicodin/day,not controlled,appropriate for Butrans? deb said she might start a patient like that on Butrans,depends on the patient.deb said she had to go but will think about our discussion,I asked deb for her commitment to start more patients on Butrans today and tomorrow? deb said she will do that.
PPLPMDL0020000001	Cleveland	OH	44106	4/19/2012	attended fellow lecture-rheumatology-met 4 fellows,left Butrans fpi,initiation guide and leave behind Clinical trial with each fellow for their review.
PPLPMDL0020000001	Beachwood	OH	44122	4/19/2012	Dr Yokiel said BWC's formulary changes have been frustrating to deal with, especially when it comes to long-acting opioids like OxyContin. Reviewed coverage with him & discussed savings cards. Gave him one package. Dr Yokiel asked what BWC is doing with Butrans as he did not see it listed on the letter. I told him as of now, it is being paid for with no prior authorization. He said that was very good to know & that he would use it more not that he knows that. He asked what the coverage for Butrans is with Medicaid & Caresource. Discussed prior authorization requirements for Caresource. He said that was reasonable. He added that he did start a patient recently on Butrans & they complained of nausea. He said the patient did not want to stay on it. Discussed appropriate range of patients for Butrans & that those beyond that range may be more appropriate for OxyContin. Also discussed titration to a maximum of 20mcg & use of supplemental analgesia if necessary.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/19/2012	Spoke to Patrick and Bobby(pharmacists) about Butrans and OxyContin. áAsked Patrick if he has filled Butrans recently. áHe attempted to run a report and the system was not working properly. áPatrick said that they are ordering 5mcg about 1-2 times a month and 10mcg 3-4 times a month and have been going through the copy cards. Patrick discussed how Opana shortage is still a problem and company is calling pharmacies to see if they have it in stock. áKleins does have it in stock and found out that there are two different pills of the reformulated product. áTwo different sizes and shapes. áAsked if they are continuing to get prescriptions for OxyContin. áBobby said they see it a lot and have been using the copy cards when appropriate but many patients are paying cash or through medicaid.
PPLPMDL0020000001	Cleveland	OH	44195	4/19/2012	worked apm-had to leave Butrans initiation guide,patient info booklet,formulary grid,patient savings card flashcard,leave behind clinical trial,OxyContin fpi,conversion/titration guide and my business card for each HCP in this dept as i couldnt see anyone:dr cheng,dr mekhail,dr mintzer,dr katyal,dr vrooman,dr leizman,dr stanton-hicks and dr rosenquist.worked neuro dept-left SAME info for dr bamford,dr mays,dr kriegler and dr stillman. worked internal med-left same info as noted above for dr weiss.
PPLPMDL0020000001	Cleveland	OH	44103	4/19/2012	showed dr OxyContin conversion guide-we talked about patients taking percocet,daily,for chronic pain but not controlled and asking him for more pills.I asked dr how/when does he decide a long-acting opioid is appropriate.dr said if patients are taking 2 percocet a day,sometimes 4/day,and still not controlled,then he'll start them on OxyContin.we talked about initiation and titration of OxyContin and dr said he forgets about the 15mg and 30mg OxyContin dosage strengths,dr said he usually starts patients on higher dosage strengths and occasionally 10mg or 20mg dosage strengths.we discussed geriatric patients starting on OxyContin and I focused dr on the med part d coverage for OxyContin,showed formulary grid and asked dr if he will start a couple new patients on OxyContin this week? dr said he will do that.showed Butrans initiation guide,we discussed short-acting opioid dosage ranges and initiation of Butrans,dr said he's not started anyone yet but will consider it.dr said biggest challenge is medicaid,if they dont pay for Butrans he wont write it.we talked about PA criteria for Butrans and I asked dr if that was feasible? dr said yes he will consider it he just has to remember Butrans.showed formulary grid,we briefly discussed commercial insurance patients and use of initial trial offer cards,dr focused on medicaid patients as that's majority of practice.asked dr if he had 1 patient he could start on Butrans between today and next week when I see him again? dr said yes
PPLPMDL0020000001	Beachwood	OH	44122	4/19/2012	Roberta said she recently started a patient on Butrans & the patient discontinued. I asked why & she said she doesn't remember exactly but she thinks the patient said that it did not work. I asked her to tell me more about the patient- what was she taking prior to being on Butrans. Roberta said she did not remember but she thinks this patient had tried almost every other option, so she might not have been a good candidate for Butrans anyway. I asked if she had considered titrating Butrans instead of discontinuing. She said she did not. She added that she does not think the patient's insurance covered Butrans. Discussed managed care & Caresource prior authorization requirements. Also discussed trial/savings program. Roberta showed me where she keeps the cards in her office. Also discussed OxyContin savings cards & gave her a package as hers had expired. She also showed me the patient information booklets that she keeps on hand & said that she likes being able to give patients instructions because they forget a lot of what was discussed once they leave the office. I agreed that they are useful tools for patients as well as providers for teaching the patient. I asked if patient expectations are discussed when discussing medications. She said they do try to get patients to understand what is a reasonable expectation for pain control. Discussed supplemental analgesia & titration with Butrans.
PPLPMDL0020000001	Cleveland	OH	44113	4/19/2012	dr said he started a BWC patient on Butrans a week or so ago and the patient called right before our lunch stating she had a rash from Butrans.dr didnt ask any questions about severity of rash or location,dr told patient to stop wearing Butrans and come see him this afternoon.I asked dr what the patient was taking prior to starting Butrans and did she meet any of the contraindications for Butrans? I showed dr Butrans fpi,we discussed contraindications,dr said this patient didnt have any contraindications prior to starting on Butrans.I asked dr what opioid was this patient taking before starting on Butrans? dr said vicodin and he started her on Butrans 5mcg/hr.dr said he doesnt know why he keeps getting patients that start on Butrans and develop rashes (all Ae's have been reported in Phoenix call notes in past calls)so he's not sure what to tell me.dr said at this point he's been sending almost ALL of his chronic pain patients to pain management,dr shen at lutheran hospital,is seeing majority of his patients,dr said he doesnt want to deal with chronic pain patients anymore.
PPLPMDL0020000001					

	Parma	OH	44134	4/19/2012	Spoke with Jan, pharmacy technician, who had been working with Ruth at Myra Gold's office regarding a patient's prescription for Butrans. Ruth said the patient told her CVS said her script would be \$130 despite having given them the savings card for the trial. Jan said the patient has Express Scripts coverage, which brought the co-pay down from \$275.99 cash price to around \$164. Jan said she then ran the savings card the patient gave her through & it took \$40 through e-voucher. I explained that there are 2 separate cards & that the e-voucher is not the same as the trial card. Jan said the patient only gave her the \$40 card, not the trial/\$75 card. Jan said it is possible that the patient has a deductible that she has not yet met or some sort of co-insurance where her co-pay is a designated percentage of the cash price. I relayed this information back to Ruth at Cleveland Back & Pain. Discussed OxyContin savings program with Jan.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	4/19/2012	Asked is she had found any candidates for Butrans yet? dDr said she had not. aAsked dr if there are any questions she has about Butrans or there is something holding her back. aDr said no she has to remember it and asked for me to continue reminding her. aTold dr that she needs to use it for patients not controlled on Cox2's or tramadol. aDr said she may have a couple of patients and agreed to look into it for those patients
	Beachwood	OH	44122	4/19/2012	I reminded Dr Malkamak of our last Butrans discussion when he seemed ready to write it. He said he remembers & he really does want to start using Butrans, he has just "been lazy" & has been refilling meds instead of thinking of new options. He went on to say that my counterpart at main campus (Amy Brooks) & I have done a good job of being respectful yet assertive with him in getting him to prescribe. He said he knows Butrans would be perfect for his practice since all his patients are on less than 80mgdequivalentoral morphine per day & he believes in using long-acting opioids like OxyContin when possible. He asked me to review insurance coverage with him, so I went over BWC, commercial insurance, & Caresource prior authorization. He wrote Caresource PA requirements on the back of my card along with BWC. He asked why he is not trying Butrans. I told him that was what I was there to find out. I suggested he think of a few specific patients who will be coming in soon. He looked up his patient list for Monday on his computer & said the first name that came up would be the perfect patient- on low-dose short-acting, not well-controlled, right insurance. He wrote the patient's name on the back of my card & said he was going to keep it close by. He then said he thought of another. I suggested he start a list for himself & keep it so he knows exactly who he wanted to start on Butrans. He said he would use the initiation tool to help guide him.a
PPLPMDL0020000001	Cleveland	OH	44113	4/19/2012	dr said he's starting patients on Butrans every week,giving them patient info booklets and no problems with insurance lately.dr said he couldnt talk longer today but said he didnt need anything at this time.told dr that was great he's continually starting patients on Butrans and appreciated his business.
PPLPMDL0020000001	Parma	OH	44129	4/19/2012	Brought Butrans trial/savings cards per request from the office. Reviewed eligibility requirements & program details. Spoke with MA Abbey who said Dr Saul wrote his first Butrans prescription yesterday after I left. She said she would call me with any questions.
	Cleveland	OH	44114	4/19/2012	I asked Elaine how her training is going and how Butrans can fit into her practice? Elaine said she started 2 patients on Butrans,1 patient she started on Butrans earlier this week and she's excited for this patient because this woman couldnt take vicodin for her chronic pain and her pain was severe.I asked elaine what dose of Butrans did she start this woman on? Elaine said she gave her Butrans 5mcg,1month supply so only 4 Butrans and is following up with her in 4 weeks.Elaine said she showed her the 4 application sites on each side of the body and gave the patient info booklet to her.I asked Elaine if she felt it was easy to explain Butrans to this patient? Elaine said yes very easy and the patient loved that Butrans was once a week so she didnt have to think about it. we discussed supplemental analgesia and steady state and Elaine said this patient did have some tramadol for supplemental analgesia. I asked elaine what type of insurance this patient had? elaine said the patient was an 89 yr old woman so she had medicare part d coverage.I asked Elaine if the patient was able to get Butrans at the pharmacy and discussed with Elaine that we dont have any medicare part d coverage for Butrans.Elaine said this patient must have gotten Butrans because she didnt call back and she prays that medicare will continue to pay for it.I asked Elaine if she looks at patients insurance in the chart before seeing them? Elaine said yes she looks at that and worries about that when choosing meds
PPLPMDL0020000001	Cleveland	OH	44109	4/20/2012	showed dr patient profile.emma.dr said he has patients taking tramadol like this that arent controlled and does think Butrans could be an option.I asked dr whats holding him back from starting more patients on Butrans,as he only has 1 patient on Butrans? dr said its just habit writing short-acting opioids and he needs to start more patients to get more clinical experience with Butrans.focused dr on Commercial insurance patients using initial trial offer cards and we discussed PA criteria for Caresource patients.I asked dr if the PA criteria was feasible? dr said yes and he has some medicaid patients he would like to start on Butrans so he will try it and see if Caresource pays for Butrans.asked dr if he can start 1 patient on Butrans in next week? dr said yes he will do that.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	4/20/2012	talked to Jen,pharmacy tech and Raban,Pharmacy mgr,about Butrans 6 core selling messages-both of them talked about Butrans being dosed once a week and transdermal.Raban said they have seen a few Rx for Butrans and they have it in stock.I asked if they would continue giving patient info booklets to patients when they get Butrans and also when providing med mgmt therapy where Raban feels a long-acting opioid could be an option for patients? Raban said yes he will keep doing that and has told a few patients to discuss Butrans with their HCP's so it does help to educate patients.we discussed insurance coverage-focus on commercial,BWC and PA criteria for Caresource patients.confirmed OxyContin,we discussed appropriate patients and we discussed 7 tablet strengths and showed formulary grids-focus on commercial and med d plans
PPLPMDL0020000001	Cleveland	OH	44109	4/20/2012	talked to Toni,RN,as dr was busy with patients,about appropriate patients for Butrans,showed Toni initiation guide dosage ranges for short-acting opioids and starting patients on Butrans 5mcg or 10mcg.Toni said she knows a couple.HCP's here are prescribing Butrans as she's given the patient info booklets out.I asked Toni if she would share this info with the dr and ask him to consider Butrans for appropriate patients.Toni said she will do that.focused Toni on Commercial insurance patients using initial trial offer cards and we discussed BWC and PA criteria for Caresource patients.
PPLPMDL0020000001	Cleveland	OH	44109	4/20/2012	talked to debbie,pharmacist,about 6 Butrans core selling messages,debbie said she's not seen any Butrans so they dont have it in stock.we talked about appropriate patients-debbie focused on opioid experienced patients,we discussed dosage ranges for short-acting opioids where Butrans could be an option,showed conversion guide and asked Debbie if she's seeing patients like this? debbie said yes a lot of patients are taking short-acting opioids for chronic pain.asked debbie if she would recommend Butrans and give patient info booklets to those patients that she feels are ready for long-acting opioid so they can talk to their HCP's about Butrans? debbie said she will do that.we discussed Butrans commercial insurance coverage,BWC and PA criteria for Caresource patients.confirmed OxyContin stocking,showed hydrocodone and percocet examples and conversions to OxyContin and debbie said she would take the guide for reference.we discussed formulary coverage-commercial and med d plans for OxyContin.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44113	4/20/2012	worked premier physician office-dr gadmack and dr flores
PPLPMDL0020000001	Westlake	OH	44145	4/20/2012	Quick call at window, I left dr conversion guide and said when you have patients on oxycondone around the clock, why not low dose OxyContin, he said ok. I spoke with Laura and Mo regarding manged care for OxyContin and Butrans, they will help remind the Dr.a
	Cleveland	OH	44113	4/20/2012	we talked about patient profiles,emma and william,dr said she see's both types of patients but she doesnt have a lot of patients taking narcotics.dr said its very tough to manage chronic pain patients and frustrating,told dr i understood and hear that often from other HCP's so she's not alone.told dr based on her feelings with chronic pain patients,how does she fit a medication like Butrans into her practice? dr said she doesnt know,she has been writing the same short-acting opioids for years.showed dr Butrans initiation guide,dosage ranges for short-acting opioids and asked dr if she would consider Butrans for 2 patients like emma and william,when they need an adjustment in their short-acting opioids? dr said she will consider it.we discussed commercial insurance patients using initial trial offer cards and tricare patients starting on Butrans.I asked dr if i could follow-up next week to hear about the 2 patients she's committed to start on Butrans? dr said she will do her best and see who comes in and yes i can follow-up and check in with her.
PPLPMDL0020000001	Cleveland	OH	44113	4/20/2012	showed dr patient profile,emma,dr said she does have some patients taking tramadol for chronic pain but they are controlled and doing fine.dr said she's not forgotten about Butrans,she hasnt had any patients that she feels are appropriate for a long-acting opioid.I asked dr how comfortable she feels with long-acting opioids? dr said not that comfortable as she doesnt prescribe OxyContin,Duragesic or long-acting morphine,dr said she likes that Butrans is a once weekly patch and a CIII but at this time she doesnt have any patients that are appropriate.asked dr if she would look at her patients today and next week,when they need an adjustment in their tramadol,and start them on Butrans? dr said she will consider it but doesnt have a lot of patients taking narcotics.dr said she doesnt like managing chronic pain patients so she sends a lot of them to pain management.told dr i appreciate her honesty and i am looking forward to hearing about the couple patients she starts on Butrans in the next week. dr said she will see who comes into the office and will consider Butrans.we discussed commercial insurance and tricare patients starting on Butrans.recommended Senokot-S<font color=blue><b>CHUDAKOB's query on 04/26/2012</b></font>My guess from your call note is that when you say "chronic pain" she is thinking of all the patients she does not want to treat. aPerhaps taking a different approach with the inclusion criteria will get her thinking a little differently. What do you think?<font color=green><b>BROOKAM's response on 04/27/2012</b></font>yes i agree, thanks for the insight<font color=blue><b>CHUDAKOB added notes on 04/27/2012</b></font>Great. al hope it works out well.
PPLPMDL0020000001	Cleveland	OH	44109	4/20/2012	dr said he's started a few patients on Butrans recently,told dr thats great to hear asked what these patients were taking before starting Butrans? dr said most patients have been taking tramadol or vicodin,still in pain and asking him for more pills so he tells them about Butrans,gives patient info booklets to them and starts them on Butrans.I asked dr if he will start more patients on Butrans today and next week? dr said yes focused dr on commercial insurance patients and BWC.
PPLPMDL0020000001	Cleveland	OH	44109	4/20/2012	left Butrans initiation guide,patient info booklet,formulary grid,clinical trial leave behind-opioid experienced patients,OxyContin FPI,conversion guide,formulary grids and business card for each HCP:dr campbell,dr geho,dr gemecho and dr baker.
	Cleveland	OH	44113	4/20/2012	talked to deb about patients she see's that are taking 3 vicodin/day and instead of giving patients that 4th or 5th pill,start them on butrans.deb said she might consider that for some patients,but they usually give a 4th or 5th pill to see if that controls the pain,then go to Butrans.I asked deb if she would at least consider it for a couple patients taking 3 vicodin/day but asking for more pills? deb said yes.deb talked about how she loves Butrans,that its a patch and dosed once a week,deb said patients think its easy and she explains everything to patients in detail when she starts them and gives them the Butrans patient info booklet.we talked about PA criteria for Caresource patients,discussed BWC and commercial insurance patients.I asked deb for her continued commitment to start more patients on Butrans.deb agreed to do this.<font color=blue><b>CHUDAKOB's query on 04/26/2012</b></font>The question is why do they go to that 4th or 5th pill. als there a medical reason? <font color=green><b>BROOKAM's response on 04/27/2012</b></font>well Barry that is the ? Ashleigh and I have tried to uncover and clearly we havent done a good job! LOL I like your ? simply put so I will ask Deb that when we see her next Thursday! athanks for your comment Barry!<font color=blue><b>CHUDAKOB added notes on 04/27/2012</b></font>I think you have done a good job. aSometimes a simple why question can go a long way.
PPLPMDL0020000001	Lyndhurst	OH	44124	4/20/2012	I showed HCP the butrans demo and asked her what experience she has had with butrans. aShe said that she and Dr. Isakov have prescribed it but the issue is cost. al showed the discussed the coverage with commercial plans as well as caresource and BWC. aShe asked about the application sites as she has a patient suffering from knee pain,asked dr if he would consider starting a couple patients with moderate pain,on OxyContin,that were ready for a long-acting opioid? dr said he hasnt in past,its been for severe pain, but he would consider it,depends on the patient.we talked about converting from vicodin dr percocet to OxyContin,dr said he will continue prescribing OxyContin.focused dr on geriatric patients,we discussed med d coverage for OxyContin,dr said he started 1 patient on Butrans recently,told dr that was great news,asked why he chose Butrans? dr said patient was taking vicodin, not controlled and wanted something else,so dr wanted to try Butrans.asked dr what dosage strength he started this patient on? dr said 10mcg,we talked about titration,side effects and refills of Butrans.asked dr if he has more patients to start on Butrans today and next week? dr said yes he will start a couple more and see how patients do on Butrans.focused dr on commercial insurance patients using initial trial offer cards,dr asked about medicaid coverage and i asked dr if he had medicaid patients in mind to start on Butrans? dr said yes he does,we discussed PA criteria for Caresource patients and we talked about dr starting a couple BWC patients on Butrans.a
PPLPMDL0020000001	Cleveland	OH	44109	4/20/2012	Quick call...I asked asked doc what types of persistent pain he treats. aHe said osteoarthritis. al asked how he typically treats that type of pain. aHe said it depends on the patient. aHe said he didnt have time to talk today as he was behind. al reminded him of the butrans once weekly transdermal dosing. aNothing learned.
PPLPMDL0020000001	Cleveland	OH	44109	4/20/2012	showed dr OxyContin visual aid,we discussed pain scale moderate to severe pain,asked dr if he would consider starting a couple patients with moderate pain,on OxyContin,that were ready for a long-acting opioid? dr said he hasnt in past,its been for severe pain, but he would consider it,depends on the patient.we talked about converting from vicodin dr percocet to OxyContin,dr said he will continue prescribing OxyContin.focused dr on geriatric patients,we discussed med d coverage for OxyContin,dr said he started 1 patient on Butrans recently,told dr that was great news,asked why he chose Butrans? dr said patient was taking vicodin, not controlled and wanted something else,so dr wanted to try Butrans.asked dr what dosage strength he started this patient on? dr said 10mcg,we talked about titration,side effects and refills of Butrans.asked dr if he has more patients to start on Butrans today and next week? dr said yes he will start a couple more and see how patients do on Butrans.focused dr on commercial insurance patients using initial trial offer cards,dr asked about medicaid coverage and i asked dr if he had medicaid patients in mind to start on Butrans? dr said yes he does,we discussed PA criteria for Caresource patients and we talked about dr starting a couple BWC patients on Butrans.a
PPLPMDL0020000001	Mayfield Heights	OH	44124	4/20/2012	Window call....I reminded doc of the butrans patient type - after failure on tramadol and before going to hydrocodone ATC. aHe said he has to write it more. al asked him to prescribe butrans for commercially insured patients and give them a trial month with a savings card. aNo commitment.





	Cleveland	OH	44114	4/23/2012	talked to dave,pharmacy mgr,about OxyContin stocking and what strengths are most commonly prescribed.Dave said they see a lot of OxyContin 40mg,80mg and 10mg strengths.showed Dave OxyContin conversing/titration guide,we discussed 7 tablet strengths and i asked Dave if he ever discusses these different strengths with physicians.dave said no he doesnt make any recommendations for OxyContin and will occasionally get a 7 on converting patients from short-acting opioids to OxyContin.dave said he will take conversion guide as reference but thats all he can do.told dave i understood and appreciated our conversation.showed Butrans visual aid,5 core selling messages,asked Dave what features of Butrans stood out to him? Dave said transdermal delivery,once weekly dosing and CIII.I asked dave if he would recommend Butrans to those patients ready for a long-acting opioid where they can take a patient info booklet and talk to their HCP's about Butrans? dave said he will do that and has been doing that.recommended Senokot-S
PPLPMDL0020000001	Akron	OH	44319	4/23/2012	spoke with Sara(pharmacist) about OxyContin and Butrans. Asked if they are filling OxyContin and if they have copay cards? aSara said they fill it on a regular basis and the 40 and 60mg doses are most often filled. aShe said they just used up their copay cards recently and wanted new ones. aSara said they hand them out when necessary. aSara knew about Butrans and said she has one patient on 5mgc but currently does not have any in stock. aReviewed iniation and titration guide and gave key selling messages. adiscussed trial offer and copay cards. a
PPLPMDL0020000001	Cleveland	OH	44127	4/23/2012	talked to dr about patients like william,patient profile,dr said he has some patients taking vicodin for chronic pain but majority are taking codeine.dr said he would like to start a couple patients on Butrans but didnt think medicare was covering Butrans.i asked dr if he had any patients with Caresource? dr said yes medicaid and medicare are plans here.we discussed PA criteria for Caresource patients,asked dr if that was feasible? dr said yes.asked dr if he can start 1 patient on Butrans this week,that looks like william or is taking codeine for chronic pain that would be appropriate for Butrans? dr said yes he will do it he hasnt remembered Butrans because its newer to him and its a habit refilling the short-acting opioids.gave dr Butrans initiation guide,we discussed initiation,titration,side effects and how to write Butrans prescription.asked dr if he felt comfortable with this? dr said yes but he needs to look it over more when i leave.
PPLPMDL0020000001	Akron	OH	44333	4/23/2012	Spoke to Jen about Dr using OxyContin and Butrans. aJen told me that she sees every Rx that goes out and he is using aa lot of OxyContin and has gone through a number of copay cards that i provided a month ago. aAsked Jen about Butrans. aShe said that he knows about it but just has not pulled the trigger. aAsked to see dr but dr claimed he was too busy. aGave Jen Butrans key selling messages and asked her to give to dr.
PPLPMDL0020000001	Westlake	OH	44145	4/23/2012	I reviewed Butrans as an option instead of going to short acting hydrocodone in the first place and reviewed the managed care. Danielle said she will help let patients know about Butrans as an option and reminded me that they will no longer be taking caresource patients.ai showed OxyContin conversion guide for oxycodone and asked him for patients taking short acting oxycodone around the clock, why not OxyContin, even if he is tapering down the total daily dose. He said he will try to do this.a
PPLPMDL0020000001	Maple Heights	OH	44137	4/23/2012	Reminded Dr Dale of our previous Butrans discussion when we talked about Butrans as a possible option for patients who are not well-controlled on tramadol around-the-clock. He said he is not, in general, a big proponent of long-acting medications. He said not just in regards to pain medications, but in all classes of drugs, he does not generally like long-acting options. I asked him why not. He said even when we (the company) have studies that show that the medication lasts a certain amount of time, they never seem to actually last that long, so he ends up treating or "chasing" the breakthrough pain, which he does not want to do. I asked if he would, for example, take a patient from around-the-clock Percocet & switch them to anequivalentdose of OxyContin, an extended-release form of oxycodone. He said with an even conversion like that, he would not have a problem with doing that. He said in theory, the idea of Butrans sounds good, but it is just a matter of it being different & getting patients to buy into it. I asked him to think about patients who come to him on short-acting opioids, like tramadol, who are asking for an increase in dose or dosing interval- in other words, patients who are looking for a medication change. Reminded him of the ability for patients to take supplemental analgesia, so patients do not have to Dr Gene said he has a couple of patients now on Butrans who are doing well. He said one is an 85 year-old woman with multiple spine fractures who did not tolerate Vicodin well. She is doing well on the 10mgc dose. He added that he has another patient now, who is around 55, who was not well-controlled on tramadol. He said she is up to the 20mgc dose & is doing very well. He said her pain is due to painful cysts in her sacrum. He said he thinks Butrans is a good medication & he has had good results with it. I asked if he could find more patients like the ones he has on it, who he could switch to Butrans & he said yes. I asked about his experience with OxyContin. He said he does not use it at all. I asked him why not. He said he does not like to do pain management in general, & he does not like the stigma that goes along with OxyContin. I asked if he has that rule with all CII medications. He said he does have some patients on the fentanyl patch. He said he is close to retirement & does not want to "deal" with OxyContin or the patient type associated with it.
PPLPMDL0020000001	Maple Heights	OH	44137	4/23/2012	showed dr patient profile,emma,asked how he decides if patients start on Butrans or continue on tramadol? dr said he usually refills tramadol or converts patients to another short-acting opioid dr said he doesnt have much experience prescribing long-acting opioids and doesnt have many patients taking short-acting opioids.asked dr how he manages his patients chronic pain then? dr said most of his patients have surgical implants, injections,etc and are doing fine.dr said he will keep Butrans in mind.asked dr how he feels about prescribing Butrans knowing its a long-acting opioid and he just shared with me he doesnt have a lot of experience prescribing long-acting opioids? dr said he feels comfortable with Butrans but doesnt have any patients in mind at the moment.asked dr if he can think of 1 patient this week,like emma,that he could start on Butrans? dr said he will think about it and see who comes into the clinic this week.focused dr on commercial insurance patients to use initial trial offer cards and we discussed PA criteria for Caresource patients to start on Butrans. showed dr OxyContin visual aid,we talked about moderate to severe pain scale,asked dr where he would consider OxyContin appropriate? dr said severe pain and he doesnt prescribe OxyContin.dr said several attending physicians do prescribe OxyContin so if they do,he will manage that patient but he's not starting patients on OxyContin.asked dr why not? dr said he's just not doing that.recommended Senokot-S
PPLPMDL0020000001	Lakewood	OH	44107	4/23/2012	I asked Dr what is holding him back from trying Butrans. He said that he has used Butrans in the hospital in the skilled nursing floor, he is medical director there. I asked if he is seeing good outcomes and he said yes. I asked him why not prescribe Butrans in his out patient practice. aHe said that most of his patients he inherited are addicted to vicodin and all they want are their pills, he said they will not try a patch and will not try other options like going to pain management. I said if he has patients that are taking tramadol, he said yes. I asked what the next step is usually for those patients and he said it's vicodin. I asked if he would use Butrans as an option instead of going to vicodin around the clock and he said he will keep in mind. I asked what else his holding him back from trying Butrans. He said it's just a matter of getting patients to try it. I asked him what if 50% of patients he tried on Butrans had results, and I showed him the opioid experience clinical trial. He said he thought the results were significant. I asked if he would try just a few patients on Butrans and he agreed. I reviewed the managed care and savings program. I asked him for patients who are taking oxycodone around the clock why not Q12hr OxyContin and he said he does convert these types of patients.a
PPLPMDL0020000001	Copley	OH	44321	4/23/2012	Asked dr at front desk where he is using OxyContin in his practice? aDr said he didnt have time to talk but he is using it often. Told me to schedule a lunch to discuss further. alunch next week. aAsked Dana(ma) and Rick(managed care employee) asked what percentage of his patients are working class with private prescription insurance? aRick said that he believes about 60% of the practice has private insurance and not many are asked if dr had patients that have been on tramadol for more than 3 months and have prescription insurance? aDr said that he didnt have time to talk but he knows where Butrans should be used....asked him if he is available on Friday and he said he would speak to me more then. aNothing else learned.
PPLPMDL0020000001	Cleveland	OH	44124	4/24/2012	Quick call....showed doc the patient profile of william and asked him if he sees patients like that. aHe said he may have some but they are often on more than one drug. ai asked him to try butrans the next time a patient taking vicodin come in for a dose adjustment. aHe said ok. ai gave him a formulary grid but asked him to try for BWC.
PPLPMDL0020000001	Parma	OH	44129	4/24/2012	I asked Myra to tell me more about her recent experience with Butrans. She said she has been trying it but has had a few insurance coverage/cost issues. She said she had a patient last week who had an unusually high co-pay for Butrans even when using the \$75 off card. I let her know i worked on this with Ruth & told her this was a rare circumstance with that patient's particular insurance plan & assured her that this is not the norm when it comes to patients with commercial insurance. I asked Myra to not give up on Butrans. She promised she would not & added that she wants to try it even more. I asked her what type of patients she sees as potential Butrans patients. She said when a patient is "maxed out" on tramadol, she sees that patient as a Butrans patient. She also said she typically gives the patient about 3 days worth of what they are already on & then gives them a prescription for Butrans to start to ensure the patient is not without medication when making the transition. I told her it sounds like she is doing the right thing. She also said when she sees a patient who has tried tramadol & then has moved to Vicodin, she sees that patient as a Butrans candidate. I told her this is another great patient type. I told her she is choosing great patients clinically & asked her again not to give up on Butrans. She said again that she won't & said again that she is going to use it more. She also said if we have more programs, she is interested in attending.a
PPLPMDL0020000001	Cleveland	OH	44106	4/24/2012	showed dr Butrans initiation guide,asked dr if he's treating patients with chronic pain that are taking 1 of these short-acting opioids? dr said yes he see's a lot of patients taking these medications.i asked dr whats the next step for those patients that need an adjustment in their medication? dr said he will either increase dosage strength,dosing interval,or monthly amount of pills,dr said it depends on patient.dr said he started some patients on Butrans last year but insurance didnt always cover it.i asked dr what plans? dr said medicaid and medicare.i asked dr if he could focus on commercial insurance patients to start on Butrans so they can use initial trial offer cards? dr said he has small% of commercial insurance patients here but will consider that for them.dr said medicaid is biggest plan,we talked about PA criteria for Caresource patients and i asked dr if that seemed feasible? dr said yes.i asked dr if he will start a couple patients on Butrans,the next time patients need dosage adjustments in 1 of these short-acting opioids? dr said yes he will do that.recommended Senokot-S
PPLPMDL0020000001	Stow	OH	44224	4/24/2012	Spoke to Gregg and he said he is stocking 5 and 10 of Butrans. He said he has a couple of patients on it. I asked if most go downstairs and he said they may. HE said they do around 80 prescriptions a day. I reminded of trial cards for the Drs and giving patient ed
PPLPMDL0020000001	Parma	OH	44129	4/24/2012	I asked Dr Roheny if he has a patient who is under 65, working or on Caresource, who has a condition which causes them pain where he is refilling their tramadol month after month or they are asking for an increase in dose, what would the down side of trying Butrans for that patient be? He said he does not have a shortage of patients. I asked him if he meant patients like the one i described. He said he has some. I asked why not try Butrans for them instead of prescribing Vicodin. He did not answer. He said it is a matter of insurance, not that he has any problem with the medication. He also added that he also does not have much experience with Butrans. I told him he has to start somewhere- one patient at a time. Discussed prior authorization requirements for Butrans on Caresource. Also let him know that if he has a patient on Medicare who is appropriate, OxyContin has excellent Medicare D coverage. He said he just prescribed OxyContin for a patient. I asked what the patient was on before he put them on OxyContin. He said it is an 85 year-old female patient in the hospital who was taking Percocet 4 times per day, so he gave her OxyContin 10mg twice a day. I told him it sounds like he picked a great patient. Dr Roheny said he "promises" to find a Butrans patient before i see him next week. I let him know i would be sure to follow-up on that promise.
PPLPMDL0020000001	Stow	OH	44224	4/24/2012	Dr said he still continues to use Butrans in patients and i asked him to tell me about those patients and he said all patients taking pills atc and he adds Butrans. I discussed tapering and using the short acting as a supplemental. I asked how realistic is it that you see several patients a day who are appropriate for Butrans and he said he would say that is realistic. I said when you see more patients like that will you write Butrans and he said yes.
PPLPMDL0020000001	Stow	OH	44224	4/24/2012	Reminded of Oxycontin as an option after Butrans and he smiled
PPLPMDL0020000001	Cleveland	OH	44103	4/24/2012	Abby said she has thought of Butrans alot latley and discussed it with Laura. I said what patient types and she said patients who need opioid ATC. She said she is seeing new patients and follow ups, she said alot of the patients are coming from internal med and they are not even on an opioid yet. She said wanted her grandpa on it and the internal med Dr said she was too thin. WE discussed appropriate patients and titration,, she asked how to titrate and supplemental. I showed her low dose Oxycontin as an option after Butrans and she said she doesnt do c2s
PPLPMDL0020000001	Cleveland	OH	44103	4/24/2012	talked to Abdul Pharmacist,about Butrans writers in area and Abdul said he has seen 1 Rx recently from Dr Nickels but its a medicaid patient so he's still waiting for Dr Nickels to process the PA before patient can get Butrans,we talked about appropriate opioid experienced patients starting on Butrans,showed Abdul initiation guide and asked Abdul if he would continue recommending Butrans to those patients who are perhaps ready for a long-acting opioid and give them patient info booklets so they can talk to their HCP's,Abdul agreed to do this and said he's been giving the booklets to patients,we briefly discussed BWC,commercial insurance coverage for Butrans and PA criteria for Caresource patients.asked Abdul if he's seeing any new Rx for OxyContin,Abdul said no he's not seen new Rx,same patients getting their OxyContin monthly,Abdul said he's lost a lot of business recently because Dr Price (in Charmaine Simerton's territory)has stopped prescribing OxyContin and majority of his patients got their OxyContin Rx here,we talked about appropriate patients for OxyContin,i showed Abdul OxyContin visual aid and we discussed conversions from hydrocodone ato OxyContin,Q12H dosing and oxycodone to OxyContin with focus of discussion on appropriate conversions to OxyContin,Q12H dosing,7 tablet strengths and we discussed formulary coverage with focus of discussion on med part d and commercial insurance coverage for OxyContin.
PPLPMDL0020000001					

PPLPMDL0020000001	Cleveland	OH	44105	4/24/2012	talked to Abdul about OxyContin writers in area-same list of HCP's from before at Metro Hospital and dr celeste, dr carson, dr baishnab, we talked about Q12H dosing of OxyContin and 7 tablet strengths, i asked Abdul if he ever gets questions from HCP's about converting patients from short-acting opioids to OxyContin? Abdul said occasionally, i asked Abdul if he will share this conversion guide info with HCP's that do ask him questions? Abdul said he will do that but he wont recommend OxyContin for patients, thats up to HCP's to prescribe OxyContin. told Abdul i understood his feelings on that and appreciated him sharing conversion info when appropriate with HCP's. showed OxyContin formulary grids, we discussed med part d patients and commercial insurance patients starting on OxyContin. we discussed 6 core selling messages of Butrans, showed Abdul Butrans initiation guide, we discussed dosage ranges for appropriate patients to start on Butrans, asked Abdul if he will continue handing out patient info booklets to those appropriate patients that can talk to their HCP's about Butrans? Abdul said yes he will continue to do this. we discussed PA criteria for Caresource patients, BWC and commercial insurance patients starting on Butrans.
PPLPMDL0020000001	Mayfield Hts	OH	44094	4/24/2012	Quick call....Doc said he has been writing butrans a few times. al asked him if he has gotten any feedback yet. al did have one medicare patient that could not use the savings card and was a little upset but he thinks she got it filled anyway. al asked him to continue to prescribe for appropriate patients and stick with the commercially insured patients (and give them a savings card) or workers comp. aMonica said that she has not had any complaint of butrans not working. aShe also said that the patient that has requested butrans has not been back yet. aThey had only 2 savings cards left.-font color=blue>b>CHUDAKOB's query on 05/06/2012</b>-</font>Did you re-explain that the savings cards cannot be used for any government funded program. if you did, then this should be included in your call notes.-font color=green>b>SIMERTOC's response on 05/08/2012</b>-</font>Did you explain the savings cards.-font color=blue>b>CHUDAKOB's query on 05/09/2012</b>-</font>Did you re-explain that the savings cards cannot be used for any government funded program.-font color=green>b>SIMERTOC's response on 05/18/2012</b>-</font>yes-font color=blue>b>CHUDAKOB added notes on 05/31/2012</b>-</font>OK. Be sure to include your fair balance response in your call notes. Thank you!
PPLPMDL0020000001	Lakewood	OH	44107	4/24/2012	Dr is out this week, spoke with Elizabeth and Patty, we discussed managed care and savings cards for Butrans and OxyContin, we reviewed the difference between Medical coverage and Prescription coverage and that they may want to ask for both cards.
PPLPMDL0020000001	Cleveland	OH	44109	4/24/2012	i talked to Mana, Pharmacist and Cheryl, Pharmacy Tech, about Butrans stocking- all strengths are stocked, i asked both of them what are patients saying or asking when they get their Butrans? Mana said patients usually ask about side effects, he recommends a laxative to them so we talked about Senokot-5 being an option for patients and i asked Mana if he would recommend Senokot-5? Mana said yes he will. i asked Mana if he hands patients the patient info booklet? Mana said yes he shows application/rotation info and talks to patients about disposal of Butrans. i asked Mana what types of insurance is he seeing for those patients being prescribed Butrans? Mana said its usually BWC, some Caresource and he's seeing more Medicare patients recently get Butrans approved. we talked about PA criteria for Caresource patients starting on Butrans and BWC, but i told Mana i am not recommending to HCP's that medicare patients be started on Butrans because i dont have any info on specific medicare plans that cover Butrans. i talked to Mana about commercial insurance patients starting on Butrans but Mana said he only has about 5% commercial insurance, the rest is BWC, Medicaid and Medicare. i asked Mana if he would give patient info booklets to those patients he feels are ready for a long-acting opioid, so patients can talk to their HCP's about Butrans? Mana said yes he will do that. confirmed OxyContin stocking, we discussed formulary coverage- Mana focused on medicare part d patients starting on OxyContin
PPLPMDL0020000001	Stow	OH	44224	4/24/2012	Spoke to Corey and he said Butrans has picked up quite a bit. HE said he had one script yesterday from Yuang, patient was on a 10 and a 5 and it was new patient. i asked if they weretaking it together and he said he did not know but they did not have copy card. They paid 50 for each script. i said the Drs have copy cards and i showed him trial cards and he was amazed how much money the patient could have saved. he said he will remember
PPLPMDL0020000001	Cleveland	OH	44127	4/24/2012	i showed dr Butrans initiation guide, focusing on her patients with chronic pain taking codeine every day but coming to her needing an adjustment in their medication and starting them on Butrans at that point. dr said she has 3 patients on Butrans and will start a couple more. we talked about dr giving patients the Butrans patient info booklets, showing them application/rotation info and discussing side effects of Butrans with patients. dr said she has given booklets to those 3 patients she started and so far so good, no complaints. i asked dr to focus on her Caresource patients, as Josie (Receptionist) processes all PA's for dr, dr said ok and we talked about PA criteria for Caresource patients. asked dr if she can start 1 patient on Butrans this week before i see her again next week? dr said yes she will do that. recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44127	4/24/2012	showed dr Butrans initiation guide, we discussed dosage ranges for short-acting opioids where Butrans would be appropriate, dr focused on his codeine patients that arent controlled and asking him for more pills. i asked dr if he would start 1 patient on Butrans in the next week? dr said yes he will do that. we discussed PA criteria for Caresource patients and i asked dr for his commitment again to start 1 patient on Butrans in next week? dr agreed to do this. asked dr how OxyContin fits into his practice? dr said he doesnt prescribe long-acting opioids, CII opioids like OxyContin. recommended Senokot-5
PPLPMDL0020000001	Euclid	OH	44132	4/24/2012	Doc didnt have much time to talk. al just reminded him that he said he would prescribe more butrans. al asked him to prescribe for a patient before going to vicodin ATC and to try for a BWC patient. a
PPLPMDL0020000001	Lakewood	OH	44107	4/24/2012	Spoke with Stacy, MA, she said they could use more savings cards. She said she knows that Dr Grimm is prescribing Butrans but she has not heard any feedback from patients. We discussed the savings cards for Butrans and OxyContin, she will be sure to let Karen know. i asked if there is a good time to see Karen, she said there is no good time, but i can keep trying and see if i can catch during a slow time.
PPLPMDL0020000001	Mayfield Heights	OH	44124	4/24/2012	Spoke to Warren about the movement of butrans and the savings cards i gave him. He said that he still has them and had one patient come in with their own card. i asked if he is seeing butrans being refilled. aHe said he cant think of anyone taking it regularly. al discussed the use of supplemental analgesia with butrans and positioning. a
PPLPMDL0020000001	Westlake	OH	44145	4/24/2012	Caught dr on his way out, i asked if he had new Butrans patients who he can give the month trial card and let them try Butrans, he said he will prescribe it and walked out. i spoke with Kelly, left managed care info for Tina, and they still had savings cards.
PPLPMDL0020000001	Lakewood	OH	44107	4/24/2012	i reminded doctor that must have thought was a good option for the older patient he tried. i asked what he liked about it would be good for them since they would not have to remember to take their tablets. i asked if he had other patients who he thinks might like Butrans as a option who have commercial insurance, he said he is trying.
PPLPMDL0020000001	Lakewood	OH	44107	4/24/2012	Spoke with Adu, We discussed the Butrans FPI and the use of Butrans with supplemental analgesia, i showed the Butrans medication guide for patients and asked if they would give them out and let patients know about Butrans as an option, she agreed. i reviewed the OxyContin FPI and use in geriatric patients. a
PPLPMDL0020000001	Westlake	OH	44145	4/24/2012	Spoke with tech, we discussed the medication guide for Butrans and she said they will hand them out to patients. i reviewed the managed care for Butrans and OxyContin and the savings program for both, she said they do see the e voucher in the computer as patients check out. a
PPLPMDL0020000001	Middleburg Heights	OH	44130	4/24/2012	Spoke with Tammy, pharmacy secretary, who said the policy at the hospital is to check in at Materials Management with Melissa prior to going on. She said Melissa is a good resource for names & information about the hospital & also said that res need to be registered with Vendor Credentialing Service prior to working with the hospital. Tammy said Dave & Kyle are two of the PharmD's in the pharmacy. She said i can leave information with her to give to the pharmacists. Let her know that the goal of me being there is to provide education to the staff regarding OxyContin, not to "sell" it, since they are already ordering it. She said this might be something they are interested in. Gave Tammy my card. Spoke with Vonda in Materials Management as Melissa was unavailable. She said i would need to register with VCS before working in the hospital. a
PPLPMDL0020000001	Parma	OH	44129	4/24/2012	Introduced myself to Elaine (NP) who said she will be starting at the Parma office on Mondays & Wednesdays & Myra will be there Tuesdays & Thursdays. i asked about her experience with Butrans. She said she does have a few patients on it. She said one of her patients was an 89 year-old woman who had been on Vicodin. She said she does allow supplemental analgesia.
PPLPMDL0020000001	Cleveland	OH	44106	4/24/2012	worked apm dept-saw dr sahgal
PPLPMDL0020000001	Uniontown	OH	44685	4/24/2012	Asked dr Lohmeyer if she had patients that are 30-50 yrs old, currently working with private prescription insurance, suffering from intervertebral disc disease, spinal stenosis, or osteoarthritis and have been on tramadol or vicodin for more than 3 months? aDr said she does have patients that fit that profile. aShe said that she remembers liking what Butrans has to offer but could not remember where to use it. aReviewed initiation and titration guide scale and copy cards. aAsked Dr to use Butrans in the patients described. aDr said that she will begin looking for patients for Butrans.
PPLPMDL0020000001	Cleveland	OH	44104	4/24/2012	talked to dr about her comfort level with buprenorphine and Butrans being a long-acting opioid, dr said she is comfortable with all of the clinical aspects of Butrans. i asked dr whats holding her back then from starting a couple patients on Butrans? dr said majority of her chronic pain patients are Medicaid/Caresource and she didnt think Butrans was covered. i talked to dr about PA Criteria for Caresource patients and asked dr if that sounded reasonable? dr said yes. i asked dr if she will start a couple patients on Butrans based on this information? dr said yes she will. showed dr Butrans initiation guide, we discussed initiation and titration of Butrans and i told dr i will follow-up next week to hear about the couple patients she committed to starting on Butrans, dr said that was fine.-font color=blue>b>CHUDAKOB's query on 05/06/2012</b>-</font>Asking her expectations of Butrans is a good question. aYou can ask this as it relates to efficacy, side effects or cost as three different examples. aNice thinking on your part!-font color=green>b>BROOKAM's response on 05/07/2012</b>-</font>ok thanks-font color=blue>b>CHUDAKOB added notes on 05/09/2012</b>-</font>Thank you!
PPLPMDL0020000001	Stow	OH	44224	4/24/2012	Dr said he has been starting alot of patients on Butrans, i said tell me about the patients and he said they are patients who are taking short acting ATC, HE said he usually keeps them on Short acting for supplemental. i said what if they acall back and it does not work and he said he will increase dose. i reminded him of trial cards and managed care coverage. i said is this something that you can write every day with your volume and he said yes. a
PPLPMDL0020000001	Stow	OH	44224	4/24/2012	Janet said she has been thinking of Butrans but has not tried yet. She seemed unsure of right patients so we went through initiation guide and when she sees patients taking those doses. she asked about how to taper and titrate and supplemental and we reviewed all of them. i said are you seeing new and follow ups and she said yes. i said how often are you seeing patients who are in persistant pain and she said all of the time and i said do you feel more comfortable using Butrans and she said yes she definitely will try
PPLPMDL0020000001	Westlake	OH	44145	4/24/2012	We discussed that the dr can taper down the total daily dose of oxycodone and still give patients Q12hr dosing of OxyContin. We discussed the conversion guide and the 7 tablet strengths of OxyContin. Dr agreed that this could be an option for some patients. We discussed Butrans as an option instead of going to hydrocodone or oxycodone in the first place and he agreed but said he wished he saw more patients at this point. i asked if he has any other objections to trying Butrans and he said no, its just that most of his patients are taking higher doses of opioids. a
PPLPMDL0020000001	Mayfield Heights	OH	44124	4/24/2012	i reminded doc that she thought about butrans for a patient that was on tramadol. al asked her if she has tried that patient on butrans. aShe said they had not been back yet. aShe could not remember their insurance. al i reviewe the formulary grid and how to prescribe butrans- 1 carton, #4 apply every seven days. aShe said she just has to remember. al explained that medicare patients might benefit from the q12 dosing of oxycontin which is well covered on most med D plans.
PPLPMDL0020000001	Cleveland	OH	44195	4/24/2012	worked apm dept-left Butrans initiation guide, patient info booklet, opioid experienced clinical trial leave behind and formulary grid with my business card for Dr. Cheng, Ngo(NP), Dr. Stanton-Hicks, Dr. Vrooman, Dr. Katyal, Dr. Samuel, Dr. Mintzar and also left OxyContin formulary grids for commercial and med part d plans and OxyContin conversion guides. worked neurology dept-left SAME info as noted above for Dr. Bamford, Dr. Mays, Dr. Krieglger and Dr. Stillman-couldnt see any HCP's, leave info only. worked Rheumatology dept-left SAME info as noted above for Dr. Deal, Dr. Long, Patty Paccos, Dr. Calabrese, Betsy Kirchner(NP) and Dr. Chatterjee. worked PM&R -left SAME info as noted above for Dr. Schaefer, Dr. Mazanec, Dr. Capulong and Dr. Frost - every med secretary said i had to leave info at receptionist desk and they will distribute all info to HCP's
PPLPMDL0020000001	Cleveland	OH	44130	4/24/2012	i asked Dr Fedorko why not prescribe Butrans before starting someone on Vicodin. He said because he has to do a prior authorization always for it. i told him this is correct for Medicare patients, but is not the case for commercial insurance patients & they can use the trial & savings cards. He said patients taking narcotics are always a problem & he has been getting calls from local pharmacies who are saying people have tried to forge a prescription for a narcotic from him. i agreed that this can be a problem but reminded him that there are patients who are legitimately in pain who benefit from these medications. Asked how many patients with commercial insurance who are 40-60 years old who he is refilling tramadol for. He said he does not prescribe tramadol. Asked what about patients like that on Vicodin. He said some. He said he thinks Butrans would be good for someone with whiplash. i told him that sounds more acute & Butrans is for chronic use. Dr Fedorko said Butrans has no street value. i reminded him Butrans is a CIII opioid with abuse & addiction potential.
PPLPMDL0020000001	Westlake	OH	44145	4/24/2012	i showed the main vis aid and that patients with moderate pain may also be appropriate for OxyContin. i asked if he has patients who are taking oxycodone who he may be able to covert to low dose OxyContin Q12hr and he said he will do this. i reviewed Butrans as an option after tramadol and before going to vicodin, he said he is worried that patients don't want to try a patch, i asked if he would at least present it as a option as some patients may want it as an option. He said he will. a
PPLPMDL0020000001	Parma	OH	44129	4/24/2012	Spoke with pharmacist, Keith, who said they do stock Butrans. i showed Butrans FPI section 2.4, discussing the ability for patients to take supplemental analgesia with Butrans in the form of immediate-release opioid or non-opioid medications. i let him know that this is something physicians as about. He said he was aware of this. Gave him informational overview of Butrans trial/savings program & discussed automatic monthly savings through e-voucher for Giant Eagle customers. Reviewed OxyContin savings cards & let him know cash-pay patients can use the card every 14 days.

PPLPMDL0020000001	Uniontown	OH	44685	4/24/2012	Asked Matt if he has seen any new prescriptions with Butrans? âMatt said that they have 3 patients on Butrans and have the 5 and 10mcg in stock. âMatt said that the patients are from comprehensive pain management in Green. âDrs Fouad and Lababidi.Asked Matt about OxyContin prescriptions and the doses they have in stock. âMatt said they have all doses in stock and 2 bottles of each dose. âMatt said all patients get it paid for wither by third party, BWC, or Medicaid. âAsked about copay cards and Matt said they were out. âLeft more copay cards and Matt said they continue to hand them out.
	Cleveland	OH	44113	4/24/2012	i talked to dr about PA criteria for Caresource patients.dr said that sounded good and much easier to do than our discussion last year about the PA with 2 long-acting opioids.showed dr Butrans initiation guide,we discussed dosage ranges of short-acting opioids,i asked dr if he had a couple patients taking 1 of these and dr would inevitably have to make a dosage adjustment? dr said yes he has a lot of patients taking short-acting opioids for chronic pain and will start a patient and see what happens.dr asked about frequency of dosing and indication for Butrans,we talked about both and i showed dr this info on initiation guide.i asked dr if i could follow-up next week to hear about the 1 patient he committed to starting on Butrans? dr said yes.i talked to Sheila,RN,about PA criteria for Caresource patients starting on Butrans as she processes all PA's,Sheila said that sounded great and believed dr would definitely start patients on Butrans now.
PPLPMDL0020000001	Parma	OH	44129	4/24/2012	i reminded Dr Khoobiall of our previous conversation when he told me that he has specific patients in mind for Butrans. He said he remembers telling me about the patient who was dying of cancer. He went on to say that he went to visit that patient in the nursing home & asked the patient what he was taking for pain. The patient said he was taking morphine & OxyContin. I told him this patient was beyond Butrans & he agreed that Butrans would not have been effective for him. I asked him to think of his patients who are taking tramadol around-the-clock every day, especially those who may ask him for an increase in dose or dosing interval. I asked him, instead of prescribing Vicodin for this type of patient or increasing their tramadol, why not try Butrans. He said he is used to hydrocodone/Vicoprofen. Discussed patients who are under 65 years old & therefore not on Medicare, working, who fit the description of the patient type we were talking about. Dr Khoobiall said he is thinking of a specific patient who is under 65, who has excellent insurance coverage, who would be a good candidate. He said he just saw the patient yesterday & added that he will offer Butrans to this patient during his next visit. Discussed Butrans trial/savings cards. I asked about his experience with OxyContin. He said he does not prescribe it as he does not want the medical board investigating him. He said everyone abuses OxyContin & then the doctors "get watched".
	Mayfield Heights	OH	44124	4/24/2012	I asked doc if he has any patients that are still taking butrans. âHe said he does have one patient that is on it and doing well. âI asked him what keeps him from trying other since he has had success. âHe said the problem is coverage. âI showed him the formulary grid and he agreed that he participate in most plans. He said that he would likely start butrans after a patient has failed on a short acting opioid. âI explained that that's where we would like to see it used. âDoc said he has written it with refills and he will try again. âI showed doc the range of patients for oxycontin and he said he prefers not to prescribe CII's like oxycontin. âI explained the elderly patients may be more able to afford oxycontin due to the preferred Med D coverage on most plans.<font color=blue><b><CHUDAKOB's query on 05/06/2012</b></font>He said he doesn't like to prescribe OxyContin and said his elderly may be more able to afford it. âWhat happened to the part where you asked him why he doesn't like OxyContin and how you responded to it?<font color=green><b>SIMERTOC's response on 05/08/2012</b></font>What do you mean, what happened to it?<font color=blue><b><CHUDAKOB added notes on 05/09/2012</b></font>What I mean is did you ask him that question and if so, where is it in your call notes? These are the types of questions we should be asking rather than just accepting that he doesn't like OxyContin.
PPLPMDL0020000001	Stow	OH	44224	4/24/2012	Sandra said she has not started on Butrans. She said she has thought of it. I asked her what her concerns were and she said coverage and we reviewed trial cards and coverage and they she wanted to know about Intermezzo with Megan
	Cleveland	OH	44113	4/25/2012	talked to Patty,RN,as today is dr 1st day back from a 2.5week vacation so she couldn't see me.i talked to patty about opioid experienced patients,she focused on vicodin and percocet patients,that are appropriate for Butrans,we discussed initiation and titration and i asked if she would continue explaining Butrans to patients showing patient info booklets and discussing application/rotation info with patients? patty said yes she loves the booklets and will do that.i asked Patty if she would talk to dr shen about appropriate patients and ask her to continue starting patients on Butrans this week? patty said yes she will do that.i asked Patty if anyone saw her patients for the 2.5weeks she was on vacation? patty said no that's why she's swamped with patients today,left more patient info booklets and asked Patty to focus dr on BWC and commercial insurance patients to start on Butrans,Patty said she will do that.
PPLPMDL0020000001	Bedford	OH	44146	4/25/2012	Dr Moufawad said he is still slowly prescribing Butrans with success. I reminded him that he had told me that sometimes patients call after only a few hours of being on Butrans saying it doesn't work. He said this has happened. I asked how long he expects Butrans to take to work. He said a few days. I asked if he asks the patients to try it for a few days before making a judgement on whether or not it is working. He said when he counsels the patients when he is prescribing it initially, telling them to try it for a few days before deciding if it works. I told him it sounds like he is doing the right thing. I asked if he is still comfortable with OxyContin for appropriate patients. He said in general, if a patient needs more than 80-100mg morphine per day, he does not continue to treat them because he no longer wants to prescribe high doses of opioids. He said it is his existing patients who he would be willing to prescribe OxyContin.
	Cleveland	OH	44104	4/25/2012	talked to Hakeem,Pharmacist,about 6 key selling messages of Butrans and asked Hakeem what features of Butrans stand out to him? Hakeem said transdermal delivery and once every 7 day dosing interval of Butrans,we talked about Butrans being a CII and HCP's being able to write refills,Hakeem said he's not seen any Rx yet but has it in stock.told Hakeem i appreciated him ordering Butrans.i asked Hakeem who is the appropriate Butrans patient and OxyContin patient? Hakeem said it could be the same patient,he talked about patients taking vicodin or percocet for chonic pain but not controlled and needing a long-acting opioid,Hakeem said it probably depends on HCP's comfort level with long-acting opioids.i showed Hakeem Butrans visual aid,we discussed opioid experienced patients and showed OxyContin visual aid,we discussed appropriate patients,i told Hakeem he was right that it is up to HCP's as to which product is appropriate,but for Butrans there is a max dose,Butrans 20mcg versus OxyContin where there's no ceiling dose,Hakeem agreed saying that was a great point.i asked Hakeem if he will continue giving patients Butrans patient info booklet,if they are ready for a long-acting opioid and he's recommending a medication to them,so they can talk to their HCP's about Butrans? Hakeem said yes he has been doing that and will continue to do so.we discussed insurance coverage for Butrans and OxyContin
PPLPMDL0020000001	Cleveland	OH	44130	4/25/2012	Dr Kansal said OxyContin is "fine". I asked him if he finds himself prescribing all 7 tablet strengths. He said he rarely does it about 60mg q12h. I asked what dose he usually starts patients on. He said it depends what is causing their pain. I asked if he uses it for moderate to severe pain or reserves it for more severe. He said usually severe, starting at about a 7 on the pain scale. He said usually patients are on a long-acting with a short-acting. I asked about his patients on tramadol. He said it is not an effective medication & uses it for mild to moderate pain. I asked him what he does for the patients in between tramadol & OxyContin. He said he has been trying to stay away from combo medications because patients are getting entirely too much Tylenol in his opinion. He said he has been switching patients from combo medication regimens for this reason. I asked him if it is meaningful to him that Butrans is a single-entity opioid containing only buprenorphine. He said it really didn't matter to him. He said it is hard to get a patient to switch from a short-acting around-the-clock regimen to a long-acting medication. Discussed ability for patients to take supplemental analgesia with Butrans. Let him know patients do not have to give anything up, just have a medication adjustment. I suggested he start with appropriate patients who are seeking a medication adjustment. He said this is rare. I told him I'm not asking him to switch all his patients, just one or two.
	Solon	OH	44139	4/25/2012	met with Denny and Chuck on DDM and Marcs accounts. Reviewed Report 8, IRI FDMx data, Purdue 2012 plan and account specific promotions.â
PPLPMDL0020000001	Cleveland	OH	44113	4/25/2012	worked pain management dept-dr shen and dale novak,pa and worked premier physicians office
	Cleveland	OH	44135	4/25/2012	Spoke with Ken, we reviewed the Butrans FPI regarding the use of supplemental analgesia, he said he was aware of this. I reviewed the managed care for Butrans and he said they see a lot of caresource and BWC, we discussed that OxyContin may be an option for Med D patients and that it has been studied in patients 65 and 75 and older.â
PPLPMDL0020000001	Munroe Falls	OH	44262	4/25/2012	Asked dr if she has patients not controlled on an NSAID or tramadol? âDr said she did and told me she would look over info. âDR told me to schecule a lunch for more time. ânothing else learned.
	Cleveland	OH	44135	4/25/2012	Quick call with Megan, I reviewed the Butrans medication guide to give to patients and the Butrans FPI regarding use of supplemental analgesia. We discussed Butrans as an option before going to vicodin around the clock and she said most patients are already beyond vicodin around the clock. I discussed OxyContin as an option for patients taking short acting around the clock.â
PPLPMDL0020000001	Cleveland	OH	44114	4/25/2012	dr said he's starting patients on Butrans every week and all is going well.asked dr how his patients are doing on Butrans and any feedback? dr said no call backs from patients so thats a good sign in his opinion.dr said when he follows up with patients,in 4weeks,he asks to see the Butrans patch,discusses rotation with patients and side effects.i asked dr how he handles side effects and does he keep patients on Butrans? dr said yes he keeps patients on Butrans,unless it was an allergic reaction or rash,then he would have patient remove Butrans,but if not he will treat side effects appropriately and keep them on Butrans.asked dr if he's seeing the clinical results he expected? dr said yes he's happy and will continue prescribing Butrans focused dr on BWC patients starting on Butrans.dr said John,PA,handles all of the insurance issues especially the Medicaid/Caresource patients,dr told me to remind John about PA criteria for Caresource patients.i talked to John and discussed this info
	Cuyahoga Falls	OH	44223	4/25/2012	Dr said that things are going as expected with OxyContin when it comes to the insurance companies. âAsked how his patients are doing clinically on OxyContin. âHe said that most are doing well and he feels comfortable using because he knows it works. nothing else learned.
PPLPMDL0020000001	Brooklyn	OH	44130	4/25/2012	Spoke with Brooke, floater pharmacist, & reviewed Butrans core messages. Also went over information on Butrans trial/savings programs & discussed eligibility requirements. She said she has seen activity in other stores as she works "all over". Showed OxyContin savings cards, reviewed eligibility/usage. She said she would leave my information for the regular staff.
	akron	OH	44304	4/25/2012	Asked dr Adams if she has patients that are currently working, suffering from low back problems or osteoarthritis and are failing on celebrex or Ultram? âDr said she did but said its a small niche but she could think of a couple. âReviewed initiation and titration guide and asked to write. âDr agreed to try.
PPLPMDL0020000001	Cleveland	OH	44103	4/25/2012	showed dr OxyContin conversion guide,we talked about dr starting a couple patients this week that are taking a couple percocet a day but not controlled,instead of refilling or increasing percocet dosage strength,dr said she likes OxyContin as its a good long-acting opioid,we talked about 7 tablet strengths being available for her to titrate patients OxyContin and Q12H dosing-showed visual aid.i asked dr if she will start a couple new patients on OxyContin this week,focusing on her patients 65+ys of age with UHC/AARP? dr said yes she will.showed formulary grid for med part d plans and explained what that meant for her patients to get OxyContin and her not to get call backs.dr said ok she forgot we had coverage on med part d plans.recommended Senokot-S
	Cleveland	OH	44120	4/25/2012	i talked to Jen,Pharmacy Tech and Julie,Pharmacist,about Butrans stocking and 6 key selling messages.Julie,pharmacist,said she likes the idea of a transdermal option dosed once a week but i need to see Mark,Narcotics Buyer,and discuss all of the clinical info with him.I showed Julie,Pharmacist,Butrans patient info booklet,we discussed application/rotation info and i asked Julie if she can at least hand out patient info booklets today,since she's working,if patients come into pharmacy to get Butrans scripts filled? Julie said yes she will do that and i should come back next Monday or Wednesday afternoon to see Mark.left Butrans fpi,initiation guide and patient
PPLPMDL0020000001	Cleveland	OH	44135	4/25/2012	Dr said that he is having fantastic results with Butrans for the patients who can afford it. He said that he would like it to be available for Med D patients and thinks that it is an ideal option for older patients. I asked what he likes about it, and he said he likes that is a 7 day patch and that patients don't have to worry about taking pills. He does think it is a great option for younger patients as well for these reasons. He said that he has also prescribed in in the nursing homes and has been able to get it in some cases. He said he usually starts patients on the 10mcg as they have usually been on other opioids before. He said that sometimes the pharmacies fight him on starting with the 10mcg and I reviewed the pull out tool and that the 5 or 10mcg can be used as starting doses based on what patients are already taking. We discussed the managed care coverage for Butrans and the savings program. I asked if he would ever consider 10mg OxyContin for those patients with Med D who can't afford Butrans, he said he tries not to write for CII opioids and would send them to pain management. I spoke with Erica and Izzy, we reviewed the patient information for Butrans and the savings program.â
	Akron	OH	44313	4/25/2012	Asked Toshia, Brian, and Jerry(Pharmacist) who they are seeing OxyContin prescriptions from in the area? âWas told that they see them from Bressi, Yang,Oyakawa and Amanabu. âReviewed conversion and titration guide. âAsked if they have seen Butrans Yet? âPharmacy has not and do not stock it. âReviewed key messages for Butrans and gavew information on where it can be used. âPharmacist said they stock all doses of OxyContin.

PPLPMDL0020000001	Cleveland	OH	44113	4/25/2012	talked to dr about patients like emma,patient profile,taking tramadol but not controlled and ready for a dosage adjustment,dr said she has some patients taking tramadol but they are controlled and doing well so she's not making any changes.i told dr thats great to hear that her patients are all controlled so if they are,then she is right,no need to change their medication.however,i asked dr if she has any patients that need more tramadol or say its not controlling their pain? dr said occasionally.i asked dr if she would be willing to start those couple patients on Butrans? dr said yes she will but doesnt know when she will see them.we talked about initiation and titration of Butrans,showed initiation guide and asked dr if this seemed easy to do,getting a couple patients started on Butrans? dr said yes but not many chronic pain patients want to wear a patch for their pain,dr said patients just want their pills its psychological.told dr i hear that often but is that her assumption or actual feedback from patients? dr said its her opinion.i asked dr if she would be willing to ask a couple of these patients who are ready for a dosage adjustment,how they would feel about a once weekly dosing option thats transdermal? dr said yes she will talk to a few patients and see what happens.showed dr patient info booklet,we discussed application/rotation and side effects of Butrans.asked dr if she was comfortable with this info? dr said yes she was fine with it.focused dr on commercial pts
PPLPMDL0020000001	Cleveland	OH	44114	4/25/2012	dr said she's not seen any patients this week that she felt were ready to start on Butrans.i showed dr William,patient profile,asked dr if she's seen any patients like him? dr said a couple.i asked dr why not Butrans for patients like this? dr said patients didnt want to try a patch they wanted their pills so for a couple patients she was ok giving them another month of vicodin and see how they do with that.dr said if patients come back in next months visit and arent controlled,she will start them on Butrans.told dr that sounded fair and asked dr if she will start a couple patients on Butrans either today or this week? dr said yes if appropriate,she will do that.we talked about initiation,titration and writing for 1 refill of Butrans.focused dr on BWC patients to start on Butrans.
PPLPMDL0020000001	Cleveland	OH	44113	4/25/2012	briefly talked to dale about opioid experienced patients,he focused on vicodin and percocet patients,that are appropriate for Butrans.i asked dale if he's started anyone on Butrans recently? dale said 1 or 2 patients but with dr shen out for 2.5 weeks he didnt see as many patients that he normally would that are appropriate for Butrans.i asked dale for his commitment to start a couple new patients this week on Butrans? dale said he will do that.we discussed initiation and titration of Butrans and i asked dale to focus on BWC and commercial insurance patients,Dale said he will do that.
PPLPMDL0020000001	Cleveland	OH	44103	4/25/2012	saw dr briefly,asked dr if he's seen any patients this week taking a couple percocet,showed conversion guide with examples,where a long-acting opioid was appropriate? dr said yes and he's started some patients on OxyContin.i asked dr what dosage strength he started them on? dr said 10mg,40mg and 80mg,we discussed 7 tablet strengths being available for flexibility in titration and we talked about Q12H dosing,showed dr Visual aid for discussion on titration and Q12H dosing,asked dr for his commitment to start more patients on OxyContin this week? dr said yes he will do that.focused dr on med part d patients starting on OxyContin,showed formulary grid.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44114	4/25/2012	talked to John,per dr marshall's request,about PA criteria for Caresource patients and asked John if he's started any patients this week that were appropriate for Butrans? john said yes he and dr marshall started 1 patient yesterday,we talked about patient taking percocet daily for chronic pain,not controlled,so dr marshall and john felt Butrans was the right choice for this patient.told john that was great to hear and asked how patient responded? john said the patient was very receptive and willing to try Butrans.we discussed initiation,titration and writing 1 refill of Butrans.i asked John if he will start a couple more patients this week,like the 1 yesterday,on Butrans? john said yes he will do that.focused John on BWC and Caresource patients starting on Butrans
PPLPMDL0020000001	Akron	OH	44312	4/25/2012	Full Butrans detail with drs. Discussed indication, 7 day transdermal system, CIII, inclusion criteria. aAsked dr if he had patients that are currently working with insurance coverage and suffer from moderate to severe pain? aDr said he does and most have low back problems. aAsked if some of those patients have been on Cox2's or tramadol or 3 months or more. aDr said just about all of them fit that category. aExplained iniation and titration guide and showed placebo patch. aDr agreed to use. aDiscussed OxyContin and reviewed indication and where he is currently using it. aDr said he tries to stay away from it but finds himself using for patients in more severe pain. aWill refer out to Fouad or Lababidi in most cases but has seen patients in the practice on Butrans from Dr Shah.
PPLPMDL0020000001	Warrensville Heights	OH	44122	4/25/2012	I showed Dr Zivic OxyContin conversion/titration guide, opened to the oxydcone conversion page. I asked him if he thought any of his patients taking a medication regimen like the column on the left would be interested in at least having the option to get the same amount of medication in a q12h dose. He said maybe & that he uses OxyContin all the time. He then went on to say that he has heard that "some bad stuff" is going on with OxyContin & that it is a "big problem". I asked him if he is still hearing that & if he has had any issues. He said he last heard it about a month ago. I agreed that all opioid medications, like OxyContin as well as Butrans, do have abuse & addiction potential & asked that he is as cautious as always when prescribing. He said he is. I asked if he would agree that some patients are in true pain & can benefit from medications like this & he agreed.
PPLPMDL0020000001	Akron	OH	44313	4/25/2012	once again i asked the Dr when he typically uses OxyContin for patients on vicodin? aDr said that not all the patients are the same but usually if the patient gets up to 6-7 pills a day he will move to OxyContin. aAsked dr if he would consider moving them to OxyContin earlier? aDr said he does at times. aAsked Dr if he has patients failing on celebrex or trmaadol? aDr said yes. aAsked dr to use Butrans for those patients and showed conversion scale from short acting agonists. aDr took scale. aNothing else learned.
PPLPMDL0020000001	Akron	OH	44320	4/25/2012	Asked dr ab out his OxyContin clinical experience. aDr said that he does use it and typically for patients that need more than vicodin. aDr said the Q12h dosing was nice. aAsked dr if his patients like the Q12h dosing. aDr said that they do like taking fewer pills. aGave overview again of Butrans and asked if he would use. aDr said he sees how Butrans is a good option for patients failing on Ultram. aAgreed to try.
PPLPMDL0020000001	Cleveland	OH	44109	4/25/2012	showed dr OxyContin conversion guide,percocet examples and asked dr how he manages his patients taking 4 percocet/day? dr said he would consider starting those patients on a long-acting opioid like OxyContin but every patients different.i asked dr how it made sense clinically to prescribe 4 percocet/day versus Q12H dosing of OxyContin? dr said he hadnt thought about it much but will moving forward,asked dr if he will start a couple patients on OxyContin this week? dr said yes he will.asked dr to consider his geriatric patients,65+,showed formulary grid and we discussed med part d coverage for OxyContin,dr said ok he will do that.showed Butrans initiation guide,we discussed dosage ranges for short-acting opioids where patients would be appropriate to start on Butrans,dr said he's not started anyone recently on Butrans but will do that.i asked dr if there was anything clinically holding him back from starting patients on Butrans? dr said no he just has to remember it and talk to patients.dr asked about medicaid coverage saying he has a lot of medicaid here.i talked to dr about PA criteria for Caresource patients and asked dr if that seemed feasible? dr said yes,asked dr if he will start a couple patients on Butrans this week,focusing on BWC, Commercial insurance and Caresource patients? dr said yes he will do
PPLPMDL0020000001	Akron	OH	44310	4/25/2012	Asked Clinton(pharmacist) if he knew of Butrans and had it in stock. aPharmacist said that they have one patient on Butrans of Fouad on the 5mcg. aThey only have the 5mcg in stock. aReviewed key selling messages and discussed patient savings. aAsked about OxyContin stocking and they have all but 15mg. aClinton said that most patients on OxyContin have insurance and are out of copay cards.
PPLPMDL0020000001	Twinsburg	OH	44087	4/25/2012	Spoke with Bob, pharmacist, who said they do stock Butrans & he has dispensed it. Showed FPI 2.4 & discussed the ability for patients to take supplemental analgesia in the form of opioid or non-opioid medications. He said buprenorphine is "wicked stuff". I asked what he meant. He said he has seen patients convulse from buprenorphine. I asked him what doses. He said sometimes very low, if the person has a sensitivity to it. Discussed OxyContin 7 tablet strengths. He said they no longer stock the 80mg strength. He then went on to say that for safety, they have been trying to restrict what they carry & they are always cautious about revealing stocking information, especially over the phone. He said he has had a lot of calls for Opana lately inquiring about stocking. He said this makes him suspicious. I agreed that all opioid medications have abuse & addiction potential & are subject to diversion. I told him he is doing the right thing by being cautious.
PPLPMDL0020000001	Akron	OH	44312	4/25/2012	provided overview of Butrans and OxyContin. aDiscussed Butrans indication, 7 day transdermal patch, CIII and inclusion criteria. aDr said he was impressed with the 7 day patch. aDr said he understands where to use it. aDr asked about use with Benzodiazapines. aReferred to FPI to answer question. aShowed placebo patch and asked to use for patients failing on Cox2's or tramadol. aDr said he will try it. aDr claimed not to use OxyContin and will refer out. aNothing else learned.
PPLPMDL0020000001	University Hts	OH	44118	4/26/2012	Window call...i reviewed the key selling messages of butrans and the patient profiles of Emma and William. ai asked doc if he has similar patients. He nodded. ai just asked him to try one of those patients on butrans.
PPLPMDL0020000001	Westlake	OH	44145	4/26/2012	aProcided formulary grid. aNothing learned. I asked Brian where he sees Butrans fitting into his practice, he said that they treat a lot of pain conditions such as back, neck spine pain and arthritis. He said they do use opioids for some patients based on the type of pain. He said that he likes that Butrans is a 7 day patch and that it is a CIII so that he is allowed to prescribe it. He thinks it would be a great option for older patients and he sees nursing home patients. He said that he and the dr would like to start using more Butrans to gain more experience with it to see what types of patients it can benefit. They currently use a lot of duragesic and like patch technology. We discussed the appropriate patients for Butrans and then for OxyContin based on what patients are already taking. We discussed the managed care for Butrans and OxyContin as well and the savings cards programs.a<font color=blue><b>CHUDAKOB's query on 05/06/2012</b></font>Andrea, review your call note. als he going to have success with Butrans on the patients he is describing? aHow did you handle this?<b>HOLUBA's response on 05/08/2012</b></font>< font color=blue><b>CHUDAKOB added notes on 05/11/2012</b></font>OK. Just wanted to make sure that the patients he is going to have the biggest chance for success with his Butrans Patients.
PPLPMDL0020000001	Cleveland	OH	44109	4/26/2012	showed dr OxyContin visual aid,discussed Q12H dosing and 7 tab strengths,asked dr if he will start a couple new patients on OxyContin this week? dr said he doesnt start many patients on OxyContin but he will consider it. dr said he wants to start prescribing more Butrans,dr said he has 1 patient on Butrans,its not a habit for him yet to prescribe Butrans.asked dr if he's comfortable with Butrans being a long-acting opioid? dr said yes he is fine with that,asked if he knew who the appropriate patient was? dr said yes,patients taking a couple vicodin or percocet,not controlled and asking him for more pills,asked dr to think about the next time he see's patients that need a dosage adjustment in their short-acting opioids, to stop and think Butrans.dr said ok he can do that.i showed dr initiation guide,we discussed dosage ranges of short-acting opioids where Butrans is appropriate,initiation and titration of Butrans,asked dr if he knows how to write the script for Butrans? dr said yes,showed back of initiation guide to confirm this.dr asked about PA criteria for Caresource patients starting on Butrans,confirmed that end of JUNE they will no longer accept Caresource,i asked dr to focus on commercial insurance and BWC patients,dr said ok but he might start a couple Caresource patients on Butrans,told dr that was great he wanted to do that as long as he processes the PA,dr said ok.told dr i would follow-up in 1wk to hear about patient he committed to starting on Butrans.dr said ok
PPLPMDL0020000001	Cleveland	OH	44113	4/26/2012	showed OxyContin visual aid,talked to dr about appropriate patients to start on OxyContin,we discussed Q12H dosing and 7 tab strengths for titration,asked dr if he will see any patients over 65yrs of age today or tomorrow that he feels are ready to start on a long-acting opioid? dr said he doesnt know but probably will have some patients that he starts on OxyContin.asked dr to start a couple patients like this on OxyContin,showed Percocet examples in conversion guide and dr said he feels comfortable starting patients on OxyContin and will continue doing so.told dr i appreciate his continued business and commitment to start more patients.
PPLPMDL0020000001	Parma	OH	44129	4/26/2012	Quick call- Caught Dr Tolentino at the window & passed back OxyContin conversion/titration guide. I let her know this could be a useful tool when converting appropriate patients from a short-acting around-the-clock opioid medication regimen to a q12h dose of OxyContin. She just thanked me & walked away.
PPLPMDL0020000001	Cleveland	OH	44113	4/26/2012	talked to Cynde,MA,as dr couldnt see me today,Cynde said lunch is my best opportunity to speak with dr and i can leave info. I talked to Cynde about 6 Butrans core selling messages,she focused on Butrans being transdermal,dosed once every 7 days and a CIII.i asked Cynde if she felt they had appropriate patients for Butrans? Cynde said yes a lot of patients are appropriate but its up to the dr to start them on Butrans.i asked Cynde what she felt was holding the dr back from starting just 1 patient on Butrans? Cynde said she thinks its just not familiar to him so its a comfort level thing here as he is comfortable prescribing short-acting opioids and doesnt really prescribe long-acting opioids
PPLPMDL0020000001	Parma	OH	44129	4/26/2012	Spoke with Bethany & inquired about Butrans activity. She said she does have one customer on Butrans now & added that Myra Gold wrote the prescription. Bethany said the patient has not given feedback yet & was prescribed 2 weeks' worth. She said she did counsel the patient as he had a lot of questions about how to use it & transition from his Vicodin ES. I asked if he was given any supplemental analgesia. She said he did have something for breakthrough pain. Also discussed savings cards. Bethany said she actually had to call Myra because Cleveland Back & Pain typically writes their prescriptions for 2 weeks at a time. She let Myra know that the patient would only be able to use the card once per month & Myra changed the prescription to a month's supply for that patient. Discussed OxyContin stocking. Bethany said that since the recent robbery of a Cleveland-area pharmacy for Opana, many physicians are not writing it anymore & pharmacies are less likely to stock it. Discussed importance of appropriate patient selection. She said Opana recently reformulated their medication like OxyContin did. Reminded her that there is no data that the reformulation of OxyContin is any less abusable than the original.



	Westlake	OH	44145	4/26/2012	I told dr that I wanted to address some of his managed care issues but first wanted to get his thought on where Butrans is fitting into his practice. He explained to me that he is&isnourlogy&but has a sub-specialty&in pain management so there is some overlap with these pain patients. &he does work with dr Khalil and the other specialties to address all of the patients issues. He said that in the past he has been a big fan of duragesic and he likes the patch technology, he sees Butrans as an option to try before duragesic and he has tried Butrans for a patient who was taking 25mcg of duragesic but was not tolerating it well. He said that the patient had good results when the switched to Butrans. He said that he will continue to gain more experience with Butrans and try more patients. &I was discussed managed care for Butrans and he said he does see Caresource and BWC patients. &he said that he will get a patient on OxyContin from time to time and prescribes it once in a while. I spoke with Lori and Elizabeth regarding managed care for Butrans.&
PPLPMDL0020000001	Cleveland	OH	44122	4/26/2012	Spoke with Gerlina and another Case Manager who stated Pam was not in the office today or Fr. Jonas was also scheduled to be in Cleveland but that was cancelled too. She reviewed both of their calendars and suggested next week. We reviewed the Rx Matters brochure which she suggested we discuss for the CMs as well as BH. &&
PPLPMDL0020000001	Cleveland	OH	44124	4/26/2012	Doc said he may just have to start trying patients on butrans as the state is making it really hard to practice medicine and treat pain. &he said he is trying to get away from prescribing narcotics altogether. &I reminded him that butrans is a CIII once weekly transdermal and is covered on BWC. &&
PPLPMDL0020000001	Cleveland Hts	OH	44118	4/26/2012	Spoke to Rola about the indication and positioning of butrans. &he said they did not have it stocked and she doesnt recall getting any scripts for it. &I gave her a patient info guide and explained the proper application. &Provided a oxycontin conversion guide as a referenced tool.
PPLPMDL0020000001	Euclid	OH	44119	4/26/2012	Spoke to Kevin about the movement of butrans. &he said eh really isnt seeing any script for it. &I explained the positioning of butrans and the appropriate starting doses. &Provided patient info guide. &Gave him an oxycontin conversion as a reference tool.
PPLPMDL0020000001	Cleveland	OH	44102	4/26/2012	showed Nagla patient profile,emma,asked if she's treating patients like this? Nagla said yes a lot of patients take tramadol for chronic pain and they always want more or another short-acting opioid like vicodin or percocet.asked Nagla if it made sense to start patients on Butrans,right after tramadol isnt controlling the pain for patients like emma? Nagla said yes but its up to the doctors in this practice (3 of them) to start patients on Butrans.Nagla said she likes that Butrans is a patch and dosed once a week and she can still give some tramadol for supplemental analgesia.I asked Nagla if she will recommend Butrans to the doctors this week,for patients like emma? Nagla said yes she will do that.Nagla said they are seeing Caresource patients till the end of June,after that patients will have to leave the practice or switch plans if they want to stay with them.we talked about commercial insurance patients starting on Butrans and BWC patients,Nagla said she will suggest Butrans to the HCP's here and look at patients with these insurance plans.
PPLPMDL0020000001	Warrensville Heights	OH	44122	4/26/2012	Re-introduced myself & Purdue's products to Dr Gupta. Delivered Butrans care messages. Dr Gupta said he does not do any type of pain management for patients. I asked if he refers out. He said yes. He added that he "doesn't even like to prescribe Percocet". I asked him if he has patients on tramadol or Vicodin. He said yes, but he prefers to refer out. I asked him to think of Butrans for patients before referring out & before he prescribes Percocet, positioning Butrans for patients taking 3 tramadol or Vicodin per day who request a medication adjustment. He walked out of the room.
PPLPMDL0020000001	Garfield Heights	OH	44125	4/26/2012	Quick call- Dr Geeta came back to lunch & I re-introduced myself & Purdue's products. Delivered Butrans care messages. She said she doesn't treat pain at all & then walked out.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/26/2012	asked Dr if he has had the opportunity to "try" Butrans yet. &Dr said no but he does remember it. &Asked dr where he thinks he would use the product. &Dr said he remembered that it can be used for patients on opioids or those who have never been on opioids. I agreed with dr and showed him the conversion scale and the patient profile aid. &Dr agreed it is a good option and will reconsider.
PPLPMDL0020000001	Euclid	OH	44119	4/26/2012	Quick call...I reminded doc that he agreed that he has patients taking tramadol monotherapy. &I showed him the profile of Emma and asked him to write butrans for a similar patient coming in for a dose adjustment. &he said today is the day.
PPLPMDL0020000001	Berea	OH	44017	4/26/2012	Quick call, I asked dr if he had tried Butrans yet, he said he did but not sure if they got it due to cost. I asked if they called back and he said no, he just didn't remember which managed care plan. I showed the trial card and asked him to prescribe Butrans for patients on tramadol, he said ok. &
PPLPMDL0020000001	Berea	OH	44017	4/26/2012	Quick call, I showed the pull out tool and that he said he wanted to try Butrans last time we spoke, I asked if anything was holding him back, he asked to leave the pull out tool and he will give it a try. I reminded Jill that patients can get a month trial for Butrans and she will help to get the cards out when he prescribes. &
PPLPMDL0020000001	Cleveland	OH	44113	4/26/2012	asked dr how his patients are doing on Butrans and any feedback? dr said patients are doing well on Butrans, no complaints at the moment so he's happy.dr said he thinks its a great option to have for those patients taking 4-5 vicodin/day,told dr that was great to hear his patients are doing so well on Butrans and he's happy,asked dr for his continued commitment to start more patients on Butrans,dr said yes he will do that.we talked about PA criteria for Caresource patients,BWC and commercial insurance patients starting on Butrans.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/26/2012	Asked Dr if he has found any candidates for Butrans as we discussed on my last visit. &Dr said no. &Asked dr if he had any patients that are on celebrex or NSAIDs that need additional analgesia? &Dr said he probably does. &Asked dr if he has patients on tramadol or vicodin that may need a dose adjustment or been on for three or more months? &Dr said probably. &Asked dr to use Butrans in those places for patients 30-60yrs old that are working and have private insurance. &Dr said that he WILL use it.
PPLPMDL0020000001	Highland Heights	OH	44143	4/26/2012	Window call...&Showed doc the butrans formulary grid and asked him to continue to prescribe for those patients with these commercial plans and be sure to give them a savings card. &he asked when will it be on medicare. &I told him I didn't know.&
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/26/2012	Asked if they had seen a prescription for Butrans from Narouze in the last week. &Pharmacist told me that they had not and yet to see one. &I was reminded that the pain management drs typically do not send their patients to the hospital pharmacy. &they are seeing OxyContin from primary care physicians and keep it in stock as much as they can. &Reviewed conversion scales for both products and reminded of Butrans being a CIII.
PPLPMDL0020000001	Cleveland Hts	OH	44118	4/26/2012	I reviewed the butrans key selling messages and asked doc what kind of results he has had. &he said its working ok when he is able to get it to go through. &Doc said the coverage is hit or miss. &I asked if he is writing it with refills. &he said he was, &I went over the covered plans again and asked him to focus there. &I asked if he has started any patients on oxycontin lately. &he said he has patients on it but he does not know if he started anybody recently.&reminded him of coverage and savings cards.&
PPLPMDL0020000001	Cleveland	OH	44113	4/26/2012	talked to deb,MA,as dr was swamped due to 1 employee calling off sick today,I asked deb if she's seen any patients within the dosage ranges of short-acting opioids where Butrans could be an option? Deb said yes they have a lot of patients taking tramadol who are appropriate for Butrans so she doesnt know why dr hasnt started anyone on Butrans yet,deb said I should come back tomorrow am and talk to dr.we talked about initiation and titration of Butrans and commercial insurance patients starting on Butrans so they can use initial trial offer cards,deb said she will talk to dr today about Butrans being an option for patients and asked me to come back tomorrow am.
PPLPMDL0020000001	Cleveland	OH	44195	4/26/2012	worked apm, neurology,rheumatology,p&m&r and oncology Dept's - left Butrans fpi,initiation guide,opioid experienced clinical trial leave behind,patient info booklet,formulary grid and business card for every HCP.for oncologists left SAME info and OxyContin fpi,conversion/titration guide and formulary grids.
PPLPMDL0020000001	Cleveland	OH	44113	4/26/2012	asked dr to describe the appropriate Butrans patient,dr said patients taking a couple vicodin or percocet every day for chronic pain,not controlled and asking him for more pills.showed dr Butrans visual aid,we discussed opioid experienced patients,dr focused on vicodin patients,starting on Butrans,we discussed initiation and titration,I asked dr if that seemed easy to start patients on Butrans? dr said yes and he will start a couple patients on Butrans,dr said he just has to remember it and do it,gave dr Butrans initiation guide,showed the pull-out tool guide and told him to keep this as a reminder,dr said that was a good idea and will help.I asked dr if he will see 1 patient today or tomorrow, that's taking vicodin like we discussed? dr said yes he probably will.I asked dr if he will start that 1 patient on Butrans? dr said yes he will do that.we talked about PA criteria for Caresource patients,dr said that seemed reasonable to do and he will do it.I told dr I will see him tuesday at lunch and am looking forward to hearing about the 1 patient he committed to starting on Butrans,dr said ok sounds good.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/26/2012	Gave dr Raniel Butrans initiation and titration guide through window. &Asked her if he has had a chance to try and she said no. &I claimed she would look over information again. &Nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44103	4/26/2012	Talked to amy.pharmacy mgr,about HCP's prescribing short-acting opioids in area-amy mentioned dr boyd,dr robson,dr carson,dr celeste and some other HCP's I call on already.we talked about dosage ranges for short-acting opioids where patients would be appropriate,initiation and titration of Butrans,Amy said she's handed out some patient info booklets and will continue to do that so patients can talk to their HCP's about Butrans.we discussed Butrans insurance coverage-focus of talk was on PA criteria for Caresource patients.confirmed OxyContin stocking.we briefly discussed Q12H and 7 tablet strengths to allow for titration of OxyContin.recommended
PPLPMDL0020000001	Cleveland Heights	OH	44118	4/26/2012	I discussed the key selling messages of butrans. &I asked doc if he sees any benefit to a product like butrans for any of his patients. &he said he likes the idea of it, its just that coverage isn't that good. &I discussed where butrans is covered and the savings cards. &He thought of a couple of patients that he might try on but

PPLPMDL0020000001	Euclid	OH	44117	4/26/2012	Doc was busy and running behind today. ai asked him if the patient he recently tried on butrans ever came back he said he did not know. ai just reminded him to think of butrans after tramadol failure. aProvided initiation guide for butrans and oxycontin.
PPLPMDL0020000001	Parma	OH	44129	4/26/2012	Spoke with Dr Saul's MA Abby & asked if the patient who he prescribed Butrans for last week was able to get it & if the trial/savings card worked. Abby said that everything went great & the patient was able to obtain the Butrans. She said the patient has not called with any problems, so she does not think the patient is unhappy with it so far. I asked how long Dr Saul usually waits before having a patient follow-up about a new medication. Abby said usually 1-3 months, although she was not certain how long he was having this patient wait. I let her know i would return to follow-up. Discussed OxyContin savings cards as well. She said they did not need any at Caught dr as he was leaving for the day and asked him if he has patients that have been on short acting agents for pain for more than 3 months? adr said he supposes he does. aGave quick overview of Butrans with indication, CIII, 7 day transdermal system. anothing else learned.
PPLPMDL0020000001	akron	OH	44333	4/27/2012	Asked Dr if he had found a candidate for Butrans? adr said that he has not however he told me that he does see how it would fit in his practice. adr Bashor said that he will use Butrans for a few patients on celebrex and tramadol. adr said that these patients have been on this products for some time and could use Butrans for long acting analgesia. aReviewed patient profiles with dr to help show appropriate patients. aReviewed inclusion criteria again to drive home use of product. aDiscussed managed care coverage along with Caresource. adr said he does have caresource patients and agreed to use.
PPLPMDL0020000001	Mayfield Village	OH	44143	4/27/2012	I reminded HCP that she said she would try to prescribe Butrans once a week for the appropriate patient. aShe said she is trying but its hard to find the right patient with the right coverage. ai showed her the Emma profile and asked her to think of similar patients with commercial insurance. aShe said she would try.
PPLPMDL0020000001	Cleveland	OH	44114	4/27/2012	asked Joel,Pharmacy Mgr,how many times a day he see's patients getting their short-acting opioid scripts filled here? Joel said a lot,Joel said the chronic pain patients that come here only want their pills nothing else.i asked Joel if he's given anyone the Butrans patient info booklets,so patients can discuss Butrans with their HCP's? Joel said he's given a couple booklets out but not many.we talked about appropriate patients for Butrans that are within dosage ranges listed in the Butrans initiation guide,we discussed initiation and titration of Butrans,Joel said he will keep the guide but hasnt seen any scripts for Butrans.Joel said its all medicaid here and some medicare,Joel asked me about Caresource coverage for Butrans,we discussed PA criteria for Butrans and i asked if Joel would continue handing booklets out to appropriate patients so they can talk to their HCP's? Joel said yes he will do that.confirmed OxyContin stocking,we looked at percoct examples in OxyContin conversion guide and discussed 7 tablet strengths of OxyContin with Q12H dosing,showed visual aid for discussion on Q12H dosing,Joel said he only has a few strengths of OxyContin in stock and he wont recommend OxyContin to patients or HCP's,i told Joel i understood and respected that.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44125	4/27/2012	Spoke briefly with Betsy (pharmacist) & reviewed Butrans appropriate patient type & savings/trial card offers. She said they have not seen anything for Butrans. Also discussed OxyContin 7 tablet strengths. She said she was too busy to check stocking. Reminded her about savings program & she said she has enough cards.
PPLPMDL0020000001	Sagamore Hills	OH	44067	4/27/2012	Dr Lenox said that House Bill 93 is ridiculous & puts too harsh of restrictions & requirements on physicians for no reason. He said he has written to Congress regarding it. He said he has not yet prescribed Butrans but does not have a problem with it. Positioned Butrans for appropriate patients ages 50-60, working, who are not well-controlled on 3 tramadol or Vicodin per day. Positioned OxyContin q12h for appropriate patients beyond 80mg oral morphine equivalent.
PPLPMDL0020000001	Brooklyn	OH	44144	4/27/2012	I asked Dr Miguel what a typical dose of Vicodin is for a patient when he prescribes it for them. He said no more than twice a day. He then stopped & said that he did prescribe Butrans for a patient. He added that this patient was on Dilaudid around-the-clock & that Butrans did not work for this patient. I showed Butrans appropriate patient range & told Dr Miguel this patient was beyond what Butrans would be considered appropriate for. I asked if he had considered an appropriate dose of OxyContin q12h for this patient. Dr Miguel said he actually referred the patient out because he did not feel comfortable having someone on that high a dose of opioids. I asked Dr Miguel if this experience with Butrans was going to deter him from using it again. He said no. Focused him on patients taking Vicodin 2 times per day, who are not well-controlled or who may like the option of a once weekly
PPLPMDL0020000001	Garfield Hts	OH	44125	4/27/2012	Dr Sadowski said he hasn't prescribed Butrans yet but he is thinking of it. I asked what happened, since he had indicated such readiness to prescribe during our last conversation. He said he just hasn't had that patient yet. I positioned Butrans 5mcg/hr once weekly for patients who are 50-60 years old, still working, who have a chronically painful condition, who are not well-controlled on NSAID's or COX-2's instead of going to tramadol or Vicodin. Discussed OxyContin as an option for appropriate patients beyond Butrans. Reminded him of trial/savings program for eligible patients. He said he would prescribe when that patient presents.<font color=blue><b>CHUDAKOB's query on 05/06/2012</b></font>You may have asked him who "that" patient is and see what he is thinking about? aThen you can either re-position it for him or support him as thinking for the correct patient type.<font color=green><b>APSEGAS's response on 05/07/2012</b></font>He had told me on the previous call about a specific patient for whom he was going to prescribe Butrans when she came in. He was referencing her, telling me that "that patient" hasn't come back for a follow-up visit yet. I can ask him about others who fit the same criteria. (For Dr Sadowski, this is someone who is failing NSAID's or COX-2's.)<font color=blue><b>CHUDAKOB added notes on 05/09/2012</b></font>This is what your call note said. "He said he just hasn't had that patient yet"The context of your note does not appear that he was speaking of a patient he I showed Dr Sevier 7 OxyContin tablet strengths & asked if he finds that he uses some of them more than others. He said he usually uses up to the 40mg strength but doesn't go beyond that. Discussed the importance of appropriate patient selection. He said he thinks that House Bill 93 has scared practitioners away from prescribing pain medications, which he added was not always a good thing. He said he tries to attend one pain conference every year. He said the speakers vary widely in what they recommend. He went on to say that one school of thought suggests that practitioners are not treating pain enough & that more medications need to be given & the other school of thought suggests that it is completely psychological & that no medications should be used. He said he tries to find a "happy medium" of treating appropriate patients & not over-treating pain. I told him it sounds like he is doing the right thing. Dr Sevier said he tried to put a patient on Butrans recently but they did not get it because of too high a cost because they had Medicare. Positioned Butrans once weekly for patients suffering from a chronically painful condition, who are between the ages of 50-60 & who are still working, thus have commercial insurance. Asked him to think of patients like this who are not well-controlled on a3 tramadol or Vicodin per day. He said he would try to find a patient not on Medicare.
PPLPMDL0020000001	Macedonia	OH	44056	4/27/2012	Spoke with TJ, a floater pharmacist who said he has been at this location lately a lot to fill in for Eve while she is on maternity leave. Inquired about Butrans stocking & reviewed core messages & appropriate patient type with him. He looked in the system & said they do not stock it. Also asked about OxyContin stocking, showing him 7 tablet strengths. He checked the safe & said that they do not have OxyContin either. I asked if it is a Wal-Mart policy as i have found other Wal-Mart's that do not stock OxyContin. He said usually the stores will stock it if they have someone on it regularly, but otherwise they do not. I asked if this was a policy with all CII medications or just OxyContin. He said he thinks it is because it is not prescribed as much now since the reformulation, they do not stock it as much. He said this is just his theory, not an absolute reason.
PPLPMDL0020000001	Beachwood	OH	44122	4/27/2012	Spoke with nurse, Donnie, who said Dr Warren was too busy today. He went on to say that Dr Warren has not yet prescribed Butrans. I asked if he knows why not. He said he doesn't know. I reminded him of the patient types Dr Warren was interested in trying Butrans for (those who cannot tolerate NSAID's & those for whom are not doing well on a low dose of fentanyl). I asked Donnie to help remind Dr Warren about Butrans when an appropriate patient like that presents or calls him. He said he would do his best. Discussed savings programs & formulary information for Butrans & OxyContin.
PPLPMDL0020000001	Cleveland	OH	44113	4/27/2012	worked premier physician office - dr bhimani
PPLPMDL0020000001	Cleveland	OH	44113	4/27/2012	dr said she is starting patients on Butrans weekly,no issues with PA for Caresource patients so thats making it easier on her to get more patients started.told dr that was great to hear and asked about feedback from patients? dr said patients are happy as their pain is finally being controlled since starting Butrans.we talked about showing patients the Butrans patient info booklet,discussing application/rotation with them,dr said yes she gives that to every patient she starts on Butrans.asked dr if she will start more patients today and next week? dr said yes she will do that.
PPLPMDL0020000001	Westlake	OH	44145	4/27/2012	Quick call thru the window, I asked doctor if he has patients on tramadol for 3 or more months under 65 years old, he said most are older. I asked if he would try Butrans for the ones less than 65 and he agreed. I showed the managed care grid to Pat and reviewed the coverage for Butrans and for OxyContin for those older patients with Med D.
PPLPMDL0020000001	Mayfield Heights	OH	44124	4/27/2012	Spoke to Jesse about the butrans positioning and the messages we are telling doc, ai also explained that butrans can be used with supplemental analgesic, per the FPI. ai explained the MOA and the molecule similar to buxone. aHe said it has not come up but its good to know. aProvided patient info guide and FPI.
PPLPMDL0020000001	Cleveland	OH	44109	4/27/2012	dr said he's talked to a few patients about Butrans and gave booklets to them and is following up in a few weeks.i asked dr why he didnt start the patients on Butrans? dr said these patients were resistant to trying a patch so dr wanted them to look over the booklet and get some info before the next appointment.i told dr that was fine to do that and i will look forward to hearing about these patients following up with him in the next 2 weeks.i asked dr if he's seen any patients like emma,patient profile,this week? dr said yes he has.i asked dr if there is any reason why he wouldnt start patients like emma on Butrans? dr said not really,depends on patients if they are willing to try a patch and insurance if it will be covered by medicaid.dr asked about caresource coverage,i asked dr if he had caresource patients in mind to start on Butrans? dr said yes he does.we talked about PA criteria for Caresource patients and i asked dr for his commitment to start a couple patients on Butrans next week,dr said he will see who comes in and will consider Butrans for some patients.recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44109	4/27/2012	worked family medicine and internal medicine-left Butrans fpi,initiation guide,patient info booklet,formulary grid,patient savings card flashcard and opioid experienced clinical trial leave behind for all HCP's in dept; worked pm&dept - saw HCP's
PPLPMDL0020000001	Cleveland	OH	44109	4/27/2012	Left OxyContin FPI,conversion guide,formulary grid,Butrans fpi,initiation guide,formulary grid and opioid experienced clinical trial leave behind for each HCP in the Sr.Wellness Dept.
PPLPMDL0020000001	Lyndhurst	OH	44124	4/27/2012	Dr.Baker,Dr.Campbell,Dr.Corrigan,Dr.Dhillon,Dr.Dziwis,Dr.Geho,Dr.Gemecho and Mary Jo Slattery,NP.
PPLPMDL0020000001	Lyndhurst	OH	44124	4/27/2012	I reviewed the patient profile of emma and the starting dose of 5mcg. aShe said that they have been starting most patients on 10mcg. ai explained the importance of giving a patient info guide so that patients can reference it if they have questions on how to apply the patch. aShe said they have not been giving them out but thinks they would be helpful.
PPLPMDL0020000001	Uniontown	OH	44685	4/27/2012	Asked dr about using Butrans recently? adr said he did switch a male patient from Tramadol to Butrans. adr said that he knew that the patient would need a long acting opioid and he did NOT discontinue tramadol. aAsked dr if he will use more? adr said he just needs to remember it and that if this patient does well he will be more prone to remember more.
PPLPMDL0020000001	Westlake	OH	44145	4/27/2012	Quick call at Lorain, he saw the savings cards and asked if Med D patients can use them because they have high copays, i let him know that these cards and the month trial can only be used for 3rd party insurance. I reminded him that Caresource and BWC patients also have access to Butrans and will not need a card. I spoke with Marian, and she will help to get the Careource pa's through for Caresource.
PPLPMDL0020000001	Lakewood	OH	44107	4/27/2012	Dr just got back in town and was extremely busy, I showed the Butrans pull out tool and asked if he would write for patients on tramadol or hydrocodone who have been on it for 3 or more months. He said he agreed, and is trying to move more patients to Butrans. I reminded Pat and Elizabeth about managed care coverage and trial month cards.a
PPLPMDL0020000001	Cleveland	OH	44113	4/27/2012	dr said he knows he has to write Butrans,hasnt done it and keeps forgetting about Butrans.dr said it just doesnt pop in his mind.i asked dr about his patients with low back pain or arthritis that are taking tramadol daily,not controlled,and require a dosage adjustment,does he see these types of patients? dr said yes every day. i told dr those are the patients that he can start on Butrans.dr said by the end of the month he will start a patient on Butrans.i talked to dr about initiation and titration of Butrans,left initiation guide with pull-out tool and asked dr if he will commit to starting 1 patient on Butrans by next week? dr said yes he will do that.told dr i will follow-up next week and look forward to hearing about this 1 patient he committed to starting on Butrans.dr said ok-focused dr on commercial insurance patients starting on Butrans and using initial trial offer cards.
PPLPMDL0020000001	Cleveland	OH	44109	4/27/2012	dr said he started another patient on Butrans, told dr that was great to hear and asked why he chose Butrans and what was the patient taking prior to Butrans? dr said patient had chronic low back pain, was taking vicodin every day and still in pain and wanted more pills so he decided to start the patient on Butrans.dr said the patient is doing good so far so he's happy.we discussed initiation,supplemental analgesia and titration of Butrans.i asked dr if he will start more patients like this one,next week, on Butrans? dr said yes he will.we discussed commercial insurance and BWC patients starting on Butrans.recommended Senokot-S
PPLPMDL0020000001	Lyndhurst	OH	44124	4/27/2012	Doc said she is having success with butrans as long as the patients can get it. aShe said that she has been focusing on younger patients as they tend to have the coverage. aShe spoke of a younger patient (20's) that was forgetting to rotate the patch but it was working fine. ai showed her the patient info guide and asked her to give to patients that get a script so they can know how to proper apply it every week. aShe agreed that she would.

PPLPMDL0020000001	Cleveland	OH	44113	4/27/2012	talked to Briana,MA,as dr was behind with patients and couldnt talk today.i talked to Briana about opioid experienced patients,showed visual aid,Briana talked about the tramadol patients they see with chronic pain and how Butrans could be an option for them.we talked about initiation and titration of Butrans and discussed formulary coverage-with focus on commercial insurance patients using initial trial offer cards.Briana said she thinks there are some patients that can benefit from trying Butrans but its up to dr to start patients and she has to be comfortable with the medication and Butrans is new to her so it could take some time.gave Briana a Butrans initiation guide and formulary grid and asked her to discuss with dr.Briana agreed to do this.
PPLPMDL0020000001	Cleveland	OH	44109	4/27/2012	talked to dr about patients he's starting on Butrans,dr said they are mostly tramadol patients that arent controlled and ready for a medication adjustment so he starts them on Butrans.we discussed initiation and titration of Butrans,i asked dr for his commitment to start more patients on Butrans? dr said yes he will.we discussed dr starting patients with commercial insurance and BWC.recommended Senokot-S
PPLPMDL0020000001	Sagamore Hills	OH	44067	4/27/2012	Penny said she recently prescribed Butrans for a patient & the patient is doing great on it. I asked her to tell me about the patient. She said it is a woman with osteomyelitis who had taken Vicodin in the past & had been switched to Percocet. The patient had been on escalating doses prior to being initiated on Butrans. Penny said the patient was taking 2 Percocet every 6 hours & did not want to have to take that much medication every day. Penny said she started the patient on 10mcg & she just saw the patient back on follow-up & the patient is very happy with the results. She said the patient said she takes maybe 2 Percocet per day for supplemental analgesia. She also said the patient said her pain is now at a 4 on the pain scale, which she finds very manageable. She said it has allowed her to do things she hasn't been able to do in years. I showed Penny appropriate range of patients for Butrans, showing her that this patient was on the far edge of what would be considered a good candidate, so I was happy to hear that the patient was doing so well. Penny said she was surprised herself somewhat & added that she was prepared to titrate to 20mcg but did not need to. She said when she told the patient about Butrans, they discussed that it would take 72 hours to reach steady state & also discussed expectations of pain control level. I told Penny she did exactly what I wish other practitioners would do. I asked if she would prescribe Butrans for more patients like this & she agreed.
PPLPMDL0020000001	Mayfield Heights	OH	44124	4/27/2012	Spoke briefly with Debbie about the butrans patients. aShe said she is still prescribing it when she can but she is at the hospital most of the time now. ai asked her to keep prescribing butrans for patients failing on a short acting opioid. a
PPLPMDL0020000001	East Cleveland	OH	44112	4/27/2012	This happened on yesterday April 26th. aDoctor's office was raided by Cleveland Heights Police, State Pharmacy board and other authorities after a year long investigation into over prescribing narcotics. Doctor had already planned to close his practice and re-locate the end of April 2012.
PPLPMDL0020000001	Mayfield Heights	OH	44124	4/27/2012	Spoke to Jessica about the movement of butrans. aShe said they see a script here a there but not everyday. ai asked if they have had any issues with filling the scripts. aShe does not believe so. aShe did not know if there are any customers on it monthly. ai reviewed the positioning of butrans and coverage with commercial insurance. aProvided patient info guides and oxycontin conversion guide as a reference tool.,
PPLPMDL0020000001	Brooklyn	OH	44144	4/27/2012	Quick call- positioned OxyContin for patients taking Percocet around-the-clock who may benefit from an extended release q12h dose of oxycodone. Dr Detwiler just thanked me & walked into a room. Spoke with Trish & Tiffanie (MA) & reviewed Butrans trial/savings cards along with eligibility requirements.
PPLPMDL0020000001	Sagamore Hills	OH	44067	4/27/2012	Dr Gemma said she recently had her first patient "failure" on Butrans. I asked her to elaborate. She said the patient was somewhat of a "train wreck" who suffered from a multitude of conditions. She said the patient had been on Lyrica prior to starting Butrans. Dr Gemma said the patient ended up in the hospital after starting Butrans from vomiting & feeling very sick. She said she believes it was not the Butrans necessarily that caused this feeling & she believes the patient would have been that ill no matter what narcotic she would have given him. I asked if this would deter her from prescribing Butrans again & she said it absolutely would not. She said that she has no problem with using Butrans & that the only reason she does not use more of it is because she has tailored her practice in such a way that she really does not have many patients with painful conditions. She added that she sends those patients to Dr Lango, who is more comfortable treating those conditions. Dr Gemma said she has probably prescribed OxyContin twice in her lifetime of practice. She went on to say that it is a great medication for the right patients, but that she just does not have patients with that severe of pain. She said she sends patients elsewhere who have that kind of pain because she feels it is beyond what she can help the patient with & that she likes dealing with colds/coughs rather than pain & other complicated illnesses.
PPLPMDL0020000001	Cleveland	OH	44109	4/27/2012	showed dr OxyContin conversion guide,percocet examples,we discussed patients taking these doses and ready for a long-acting opioid and dr starting them on OxyContin.dr said he has a lot of patients on OxyContin and is comfortable with the medication.i asked dr if he prescribes all 7 tablet strengths? dr said no he doesnt,dr said he forgets there are 7 strengths.i showed dr 7 tablet strengths in visual aid and we discussed Q12H dosing of OxyContin.asked dr for his commitment to start more patients on OxyContin next week? dr said yes he will.focused dr on med part d patients starting on OxyContin.recommended Senokot-S
PPLPMDL0020000001	Copley	OH	44321	4/27/2012	Asked r if he sees himself using Butrans in his practice? aDr said that he has tried to use it three times and each time the insurance companies would not want to cover it. aTold dr that a lot has changed in a year with the insurance coverage. aShowed managed care matrix and asked dr to just"try" Butrans for those patients failing on a cox2 or tramadol and have insurance through their employer. aDr said that he would give it another shot.
PPLPMDL0020000001	Cleveland	OH	44143	4/27/2012	Spoke to Angela about the butrans selling messages and asked if doc still plans on finding a place for butrans in his practice. aShe said that he tries but then she has to tell him that the patient has medicare and he has to write something else. ai gave a formulary grid and reminded her of commercial plans and savings cards.
PPLPMDL0020000001	Independence	OH	44131	4/27/2012	Quick call- Caught Dr Pal at the window. Passed back OxyContin formulary grid & pointed out favorable coverage & lowest branded co-pay for his appropriate elderly patients who may benefit from a q12h dose of OxyContin. He just thanked me & walked away. Spoke with MA Jill & discussed savings cards for Butrans & OxyContin. She said most of his patients have Medicare or Medicaid, so no cards were needed.
PPLPMDL0020000001	Lyndhurst	OH	44124	4/27/2012	Spoke to Karen and Nancy(nurse) about the butrans patient type. ai asked what they are telling patients about applying the patch properly. aKaren said that she tells them to rotate the patch but not sure if they are doing it. ai showed her the patient info guides and asked her to give to any patient with a butrans script. ai explained that proper application can mean the difference between success and failure on the patch. aShe thinks the guides are a good idea and a time saver for them.
PPLPMDL0020000001	Cleveland	OH	44113	4/27/2012	quick call as deb was busy with patients today-asked deb to tell me about some patients she's started this week,deb said she started a couple on Butrbans,all of these patients are taking vicodin,not controlled so she discusses Butrans with them,deb said she loves Butrans for her patients,likes that its a once weekly patch and will continue prescribing Butrans we briefly discussed PA criteria for Caresource patients and i focused deb on BWC and commercial insurance patients starting on Butrans,deb said ok she had to go but will remember that
PPLPMDL0020000001	Akron	OH	44319	4/27/2012	Introduced products to dr and gave key selling messages. aDr Wu claimed to not using scheduled products. aAsked dr if he prescribes NSAIDS or Cox2's? aDr said he does but didnt treat chronic pain. aNothing else learned.
PPLPMDL0020000001	Mayfield Heights	OH	44124	4/27/2012	Window call...I asked doc about his experience prescribing butrans. aHe said he really has not prescribed it much. ai asked why he thinks he has not written for more of it. aHe said he had problems with coverage a couple of times and he just forgets about it. ai gave him a formulary grid and asked him to focus on the non-medicare/medical patients.
PPLPMDL0020000001	Parma	OH	44134	4/30/2012	Quick call- Dr Mandat said the patient who he had just seen is on Butrans & is getting good results. Discussed trial & savings cards & asked him to consider Butrans for an appropriate patient aged 50-60 who fits the indication. He requested Senokot-S samples, so I gave him 2 boxes.
PPLPMDL0020000001	Akron	OH	44333	4/30/2012	Asked dr about her recent experience with Butrans. aDr said she can't remember the specifics but she has used it for a patient on vicodin. aDr said that she is really trying to use it but because she has such a large Medicare population it makes it difficult. ai inquired about Caresource and Michele(ofc mgr) said that they do not accept managed Medicaid(Caresource/Buckeye). aDr did tell me that she finds herself using more OxyContin because it works well and it is well covered. aShe said she is using thearesourcesai gave the office for the products. aDr said she knows there are many patients that should be on Butrans but they are medicare patients. ai asked dr to please continue to find the appropriate patient.
PPLPMDL0020000001	Parma	OH	44129	4/30/2012	Spoke with MA Shelley, who said Dr Moysaenko was not seeing reps today. Passed back Butrans portal invite & asked her to make sure he gets it. Reviewed with her the Butrans appropriate patient type, focusing on working patients getting refills of short-acting opioids. Discussed once weekly application. She said Butrans sounded interesting & said she would be sure to give Dr Moysaenko the invite. Reviewed OxyContin formulary coverage with her. She said she doesn't think they have anyone on it. Shelley agreed to let me return to the office another day this week.
PPLPMDL0020000001	Lakewood	OH	44107	4/30/2012	I asked dr if Butrans was covered, was there anything else holding him back from prescribing, he said no he will try it. I asked what type of patient does he see him self prescribing Butrans for, he said a patient taking tramadol and I confirmed that this may be an appropriate patient. aReminder that OxyContin is an option when patients are taking hydrocodone around the clock.
PPLPMDL0020000001	Parma	OH	44129	4/30/2012	Refreshed Dr Laluk's memory on Butrans by reviewing core messages. Handed him initiation/titration guide & described appropriate patient type/range, including OxyContin q12h as an option for appropriate patients beyond Butrans. I asked him to, as we discussed Butrans, think of his own practice & the patients he treats. I asked him to think of specific patients who are 50-60 years old, still working (& have commercial insurance), who are suffering from pain from a chronic condition such as osteoarthritis or low back pain, especially if they come to mind as being difficult to control on an around-the-clock short-acting opioid regimen of a low dose. He said he does have patients like that. Reviewed adverse events, use in hepatically impaired patients & renal impairment. Also discussed Butrans as a CII opioid with abuse & addiction potential. Showed FPI 2.4 & discussed supplemental analgesia with Butrans. He said patients always seem to have breakthrough pain. Discussed option of giving immediate-release opioid or non-opioid medications for supplemental analgesia. Also showed formulary grids for both products. Discussed Butrans savings program, again mentioning the 50-60 year old working patient that we had been discussing. I asked him if he could see himself prescribing Butrans for some of the patients in his practice who fit the description we had been talking about & he said yes. Reminded him to give those patients trial/savings cards & showed him how to use them.
PPLPMDL0020000001	Cleveland	OH	44106	4/30/2012	showed dr Butrans intiation guide,we discussed dosage ranges for appropriate patients to start on Butrans,dr said he doesnt really have any patients taking narcotics but appreciates info and will keep Butrans in mind if appropriate,asked dr how he treats his patients chronic pain,showed visual aid and we discussed pain conditions like arthrits and low back pain,dr said all non-narcotic drugs or surgical procedures.asked dr if he would at least think of 1 patient he see's this week that is taking tramadol every day,not controlled and when this patient needs a dosage adjustment,consider Butrans,dr said he will do that.we discussed initiation,titration and insurance coverage for Butrans
PPLPMDL0020000001	Cleveland	OH	44103	4/30/2012	talked to dave,pharmacist,about Butrans stocking and no Rx of Butrans here.showed dave Butrans visual aid,we discussed 6 core selling messages,dave said he likes that Butrans is transdermal and once weekly dosed but its up to doctors to write this product.we discussed initiation and titration of Butrans,we talked about dave handing out patient info booklets,to appropriate patients so they can talk to their HCP's about Butrans,asked dave if he would do this? dave said yes,showed patient profiles,asked dave if he's seeing patients taking tramadol or hydrocodone,like emma and william patient profiles? dave said yes,told dave these are patients that could be appropriate for Butrans,dave said ok,we discussed formulary coverage and i confirmed OxyContin stocking,recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44102	4/30/2012	talked to vicky,pharmacist,about Butrans stocking,no Butrans Rx here since 2011 and that was only 1 carton of Butrans 5mgc,we discussed 6 core selling messages,asked Vicky what features stand out to her? Vicki said transdermal delivery,once weekly dosing and Butrans being a CII so HCP's can write and call in refills,we discussed appropriate patients,showed patient profiles and asked vicky if she's seeing patients like this? vicky said yes every day,i asked vicky if she would be willing to hand out patient info booklets to appropriate patients so they can talk to their HCP's about Butrans? Vicky said yes she will do this,we discussed insurance coverage for Butrans and confirmed OxyContin stocking vicky said no new Rx for OxyContin,same patients getting OxyContin every month,gave conversion guide to vicky and briefly discussed percocet conversions to OxyContin.recommended
PPLPMDL0020000001	Mayfield Hts	OH	44124	4/30/2012	I reviewed the butrans Once weekly CII transdermal and the coverage with BWC. ai reminded doc that he agreed that he had appropriate patients and asked him if he will ever try it. aHe said he just keeps forgetting about it. ai asked him to prescribe butrans for one BWC patient this week. aHe said he would.
PPLPMDL0020000001	Parma	OH	44134	4/30/2012	Spoke with Lawrence, pharmacist, & introduced myself & Purdue's products. He said he remembers the company as "Purdue Frederick". Discussed Butrans core messages. He said he has seen Butrans. Reviewed appropriate patient type & discussed OxyContin q12h with 7 tablet strengths. He said the unfortunate thing about pain medications like these today is that patients who really need them & who are in true pain sometimes have a hard time obtaining them because doctors are afraid to prescribe them. I agreed that some patients have a hard time getting appropriate treatment. Gave him educational resources catalog which he said was unbelievably helpful as he needs many CME's. a
PPLPMDL0020000001					

	Beachwood	OH	44122	4/30/2012	I stopped Dr Myton-Craig with the Butrans demo patch. She spent time looking at the patch & I showed her the structure, pointing out the adhesive matrix. She said she liked the way the patch is built & asked how patients apply it. I showed her application sites/instructions for patients. She asked if Butrans adheres effectively for a full week. I told her it is designed to stay on for 7 days, but let her know it can be covered with Bioclusive or Tegaderm or the edges can be taped with first aid tape if it starts to loosen. I reminded Dr Myton-Craig of the appropriate patient type/range for Butrans, including OxyContin as a q12h option for patients beyond Butrans range. Positioned Butrans for patients instead of initiating Vicodin or escalating a dose of short-acting opioids if the patient is appropriate. I asked her if she can see herself prescribing Butrans for this type of patient. She said yes. Reminded her about savings cards for those eligible, as well as trial card. I let her know I would return to follow-up on her new Butrans patients. Spent time with MA Tammy going over Butrans dosing, application, CII/abuse/addiction potential & how the prescription can be written. Tammy said she will help remind Dr Myton-Craig of Butrans because she thinks it would be great for a lot of patients they have. She also said Dr has been referring to pain management a lot recently. I asked Tammy to ask Dr to use Butrans before referring out & she agreed.
PPLPMDL0020000001	Northfield Center	OH	44067	4/30/2012	Spoke with Sarah, pharmacist, & gave her online educational resources. Also reviewed Butrans FPI 2.4 & discussed supplemental analgesia usage. Showed information on Butrans trial/savings program & explained details of usage & went over automatic savings through e-voucher for CVS customers. I asked Sarah what strengths OxyContin they stock. She said they have all of them. She said she has savings cards, so she did not need more.
PPLPMDL0020000001	Lakewood	OH	44107	4/30/2012	I showed the disease states for OxyContin and asked if he would write OxyContin for patients with these disease states who are already taking hydrocodone or oxycodone around the clock. He said he would. I reminded him that Butrans is an option before patients even get vicodin, for example a patient taking tramadol around the clock.
PPLPMDL0020000001	Lakewood	OH	44107	4/30/2012	I reviewed that he said he would consider Butrans for patients taking tramadol around the clock, he said yes he thinks it's a good option. I asked how he will present Butrans to his patients, he said he will just let them know that this is a 7 day patch so that they will get pain relief around the clock. I reminded him that he can give supplemental analgesia.
PPLPMDL0020000001	Lakewood	OH	44107	4/30/2012	I asked dr if he has had a chance to try Butrans, he has not, I asked if anything is holding him back, he said no, he just needs to look over the info. I talked to Robin, she agreed to help remind the dr about Butrans for commercial patients who are taking tramadol around the clock and give patients the trial cards. We reviewed the OxyContin savings cards.
PPLPMDL0020000001	Beachwood	OH	44122	4/30/2012	Spoke with MA Tricia & reviewed Butrans & OxyContin formulary grids. I let her know about the discussion Dr Malkamaki & I had previously where he expressed a lot of interest in Butrans. I asked her to make sure that he gets a copy of the formulary grid with my card as the grid may help him as he identifies potential Butrans candidates.
PPLPMDL0020000001	Cleveland	OH	44109	4/30/2012	worked family medicine,internal medicine,oncology and rheumatology depts-had to leave info at every receptionist desk and they give to the HCP's
PPLPMDL0020000001	Akron	OH	44333	4/30/2012	Asked why he has not used the 20mcg for Butrans? dr said that the majority of his patient fall on the 10mcg conversion and they are getting enough analgesia with 10mcg. dr asked dr what the majority of his patients are on when heinitiates Butrans. dr said that they have been on most everything short acting, at tramadol through percocet. dr asked dr if he will continue to use and to use earlier on in treatment. dr agreed.
PPLPMDL0020000001	Parma	OH	44129	4/30/2012	Quick call- Passed back Butrans portal invite, encouraging Dr Taylor to log on & participate as it may help her better identify different types of patients who may be appropriate for Butrans. Told her one never knows what might spark the thought of a specific patient in her own practice. She just thanked me & walked away. Spoke with Mary & reviewed insurance coverage for Butrans & OxyContin. I asked her to encourage Dr Taylor to do the online Butrans activity & let her know that sometimes, practitioners are able to get medically relevant gifts for doing them. Mary said she would try to help.
PPLPMDL0020000001	Cleveland	OH	44114	4/30/2012	Provided Jan 25 copies of OxyContin conversion guides & reviewed each section. She felt these are perfect to assist the NPs with initiating LAOs. I reviewed coverage of OxyContin for AARP patients as well. I also provided Butrans initiation guides & reviewed each section. Although she feels this drug is very appropriate for their members, there still isn't coverage. She asked me to provide her updates if anything changes with the formulary status. We discussed next steps in rolling out Pain PACT for the NPs which she said they'll need more education around pain management and Pain PACT itself before they do that. Their current priority is to open 6 new facilities in their region over the summer. So we discussed initiating this again when I return from maternity leave this fall. She thought the faculty forum specific to the NPs would be good then another specific to the sites as worked apm dept. - see call notes on HCP's
PPLPMDL0020000001	Cleveland	OH	44106	4/30/2012	asked dr if he had any patients that have prescription insurance through their employer who have been on a short acting products for more than 3 months? dr said that he does but its a very small part of his practice?
PPLPMDL0020000001	Akron	OH	44319	4/30/2012	dr reviewed the managed care grid and then asked him if he believes in Butrans clinically. dr told me that he has used it before and it was a headache to get covered. Let dr know that good things have happened in a year since you used it last. dr asked dr to get it another try and he said he would.
PPLPMDL0020000001	Cleveland	OH	44106	4/30/2012	talked to dr about Butrans 6 core selling messages, dr never heard of Butrans and is a resident. dr said he doesnt have a lot of experience prescribing narcotics. asked dr what features of Butrans stood out to him? dr said he likes that Butrans is transdermal and dosed once a week, we discussed initiation and titration and asked dr if he has a couple patients this week that he can start on Butrans? dr said he doesnt know, he will look over the Butrans fpi and conversion guide and speak with the attending HCP's as they approve all medication decisions.
PPLPMDL0020000001	Akron	OH	44302	4/30/2012	Asked dr if he remembers Butrans as the only 7 day transdermal system for moderate to severe patients who require around the clock opioid analgesic for an extended period of time? dr said that he did but vaguely. Gave dr all key selling messages to Butrans and asked if he felt it would fit into his practice. dr said that it would and asked about onset of action. dr told dr that there are not studies for onset of action however steady state is reached in 3 days which means he can titrate then. dr liked the schedule III and that it is 7 days. dr asked about managed care coverage. dr reviewed commercial coverage and explained trial offer and copay cards. dr asked dr if he feels like Butrans would have a place in his office? dr said that it would and that he classifies chronic as something for longer than 3 months. dr used OxyContin as a product that would be appropriate for a patient who is beyond Butrans and used the conversion scale. dr said he uses OxyContin and has had good clinical success. dr had to take an ER call. anything else learned.
PPLPMDL0020000001	Cleveland	OH	44106	4/30/2012	dr said he hasnt started anyone on Butrans but has all of the info i have given him and will keep Butrans in mind as an option for patients. asked dr who he believes is appropriate for Butrans? dr said patients taking a couple vicodin or percocet, not controlled and wanting more pills. showed dr visual aid, we discussed opioid experienced patients starting on Butrans and showed titration guide to discuss dosage ranges of short-acting opioids where Butrans would be appropriate. dr said ok he will think about it and if anyone is appropriate he will consider Butrans. we discussed commercial insurance and Caresource patients starting on Butrans.
PPLPMDL0020000001	Akron	OH	44319	4/30/2012	Asked Brian if he has filled Butrans recently? dr said he has filled the 5mcg once a while ago and has not seen the patient back for a refill. dr said he couldn't remember the physician name. dr gave Butrans key selling messages and reviewed copay and trial offer programs. dr asked if he is filling OxyContin regularly? dr said yes he is and stocks most doses. dr asked if he has patients getting OxyContin who have private prescription insurance? dr said yes but a small number and said he would use the copay cards.
PPLPMDL0020000001	Cleveland	OH	44106	4/30/2012	dr never heard of Butrans, said she's a resident and not much experience prescribing narcotics. gave dr Butrans fpi and initiation guide, we discussed 6 core selling messages and dr said she likes idea of transdermal delivery and once weekly dosing. dr asked about insurance coverage for medicaid patients. we discussed PA criteria for Caresource patients and I asked dr if that was feasible and if she had a few patients in mind to try Butrans? dr said no patients in mind at the moment but she needs to know if Butrans is covered so she's not wasting her time talking to me. told dr i understood and asked dr if she will start 2 patients this week on Butrans, per our discussion? dr said she will look over FPI and initiation guide and talk to attending HCP's as they make all final med decisions. told dr i understood and that i would follow-up with her.
PPLPMDL0020000001	Barberton	OH	44203	4/30/2012	Asked Dr Minich if she has had the opportunity to look into the patients on short acting opioids q4-q6 and moved them to OxyContin? dr said she has not and that she has not seen them to evaluate for OxyContin. dr reviewed main visad pages to show patients appropriate for OxyContin. dr asked dr when she will see these patients and she did not know. dr asked dr if she has patients appropriate to Butrans the CII, 7 day transdermal system and showed dosing page of visad. dr said she may and said she does understand where both products fit. dr said that she is now limited on how much pain medicine she prescribes because of the new law.
PPLPMDL0020000001	Parma	OH	44129	4/30/2012	Dr Ortega said he does not like writing refills for Butrans. I asked him why not. He said he likes to see patients every month & give them the prescription when he sees them so if he needs to make any adjustments, he can do that. He asked me why he has to do that with Butrans. I told him he does not have to do it, it is just an option for him since Butrans is CII. I told him OxyContin, & all CII's requires a new prescription every month, whereas Butrans & other CII's can be refilled 5 times in a 6 month period. I told him it is not required that he write refills. He said he thinks he will stop doing refills so the patient has to come in for each prescription. He said otherwise, sometimes they don't follow-up when they are supposed to & he doesn't know how they are doing. Dr Ortega said Dr Marshall is now back, so over the next month or so he will see if any of Dr Marshall's patients come to him instead of staying with Dr Marshall. He said he has prepared patients that medication adjustments will come for them. He said some of them will probably get Butrans. Reviewed appropriate range of patients & reminded him that OxyContin q12h may be an option for other appropriate Percocet patients. He said how will keep me posted. I asked if he would continue using both medications where appropriate & he agreed.
PPLPMDL0020000001	Cleveland	OH	44106	4/30/2012	dr never heard of Butrans, is a resident and only wanted brief info. gave dr Butrans fpi, we discussed 6 core selling messages, asked dr what features of Butrans stood out? dr said Butrans being a transdermal option with once every 7 day dosing was interesting. i asked dr if there were patients in this practice that look like emma, patient profile? dr said yes a lot of patients are taking tramadol for chronic pain. i told dr that could be a patient thats appropriate for Butrans, dr said ok. dr said i can leave info and next time we can talk more. left initiation guide, fpi and patient info booklet for dr to review and i said i will follow up in a week to get doctors thoughts on how Butrans could fit into dr practice.
PPLPMDL0020000001	Akron	OH	44305	4/30/2012	asked dr what he typically does to treat pain? dr said that he uses most of the short acting products such as Ultram, vicoden and percocet. dr asked dr again if he has any patients that have been on a short acting agent more than three months. dr said that he does and wanted to know more about Butrans. dr said he has one patient in a nursing home on Butrans 5mcg from another dr. dr gave Dr all Butrans key selling messages and provided inclusion criteria from main visad. dr asked dr if he sees himself using Butrans in his practice. dr said yes. dr said that the patient in the nursing home is doing much better with Butrans and thats the type of clinical findings he needs to feel comfortable writing. dr gave OxyContin messages and asked for him to use OxyContin when Butrans may not be appropriate.
PPLPMDL0020000001	Cleveland	OH	44109	5/1/2012	showed dr patient profile, emma, asked dr if she's treating patients like this? dr said yes, dr said she started a patient like this on Butrans and patient is doing well. told dr that was great to hear and asked why she chose Butrans for this patient? dr said patient wasnt controlled on tramadol and she didnt want to start this patient on vicodin so she tried Butrans. we discussed initiation, titration and side effects of Butrans- showed visual aid and conversion guide asked dr if she'll see more patients like emma this week that she can start on Butrans? dr said yes she will. dr asked about medicaid coverage as thats a lot of her patients with chronic pain. asked dr if she had some patients in mind to start on Butrans? dr said yes we discussed PA criteria for Caresource patients and i asked dr if she will start 2 patients this week on Butrans? dr said yes she will. recommended Senokot-S
PPLPMDL0020000001	Berea	OH	44017	5/1/2012	Spoke with Adam, he still hasn't seen Butrans scripts from Kavlich, I asked if he notices if Dr Kavlich has appropriate patients for Butrans taking tramadol around the clock, and he said he's sure he does. I asked if he would let those patients know about Butrans as an option and that Dr Kavlich is familiar with it and said he will try it. We reviewed OxyContin as an option and he said he number of patients have gone down that they used to see from Handled Dr Diab OxyContin Medicare D formulary grid & let him know many of his appropriate patients with Medicare D coverage can obtain OxyContin at the lowest branded co-pay. Also gave him Butrans formulary grid, letting him know that many of his appropriate commercially insured patients can obtain Butrans with no prior authorization & utilize our trial & savings programs. He said this was all good news & then walked into a room.
PPLPMDL0020000001	Cleveland	OH	44130	5/1/2012	Spoke with Heather, pharmacist, & gave her online education information, which she said was much needed. Showed her information sheet on Butrans trial & savings program. She said she still does not have anyone on Butrans & is surprised. I asked if she sees a lot of chronic short-acting opioids. She said yes. She also said she recently filled a prescription for a newer CII product for breakthrough pain. She said it is an oral spray & added that it was extremely expensive (around \$1,000). She said she had not heard of that medication prior to seeing that prescription. Reviewed Butrans appropriate patient type, focusing on those on 3 tramadol or Vicodin daily who inquire about a medication adjustment. Also discussed OxyContin savings cards & gave her a new package as hers had expired.
PPLPMDL0020000001	Independence	OH	44131	5/1/2012	Positioned Butrans for patients who are taking 3 tramadol or Vicodin per day if they need a medication adjustment, instead of increasing the dose or dosing interval of short-acting opioid. Dr Sundaram said he recently prescribed Butrans for a patient & the patient questioned the once weekly dosing. He said the patient was surprised that it is dosed ever 7 days. I asked Dr Sundaram if the patient saw this as a benefit or a downfall. He said he thinks the patient was somewhat leery of a medication lasting 7 days. He went on to say that he thinks sometimes patients think that it is not possible for a medication to last that long, so they will call back too soon saying it isn't working, when really it is all in their mindset. I agreed that setting appropriate patient expectations is important & reminded him of steady state in 72 hours & titration ability. He said he really has been keeping it in his mind. I asked if he would attempt to identify more Butrans patients & he agreed. Also asked him to continue prescribing OxyContin for appropriate patients beyond Butrans range.
PPLPMDL0020000001					

	Cleveland	OH	44113	5/1/2012	talked to dr about the patients she's starting on Butrans, dr said she's happy with clinical results she's seeing as her patients are finally getting good pain control with Butrans. asked dr what these patients were taking before Butrans and is she giving short-acting opioids for supplemental analgesia? dr said her patients were taking tramadol, vicodin or percocet before Butrans and some of them have some short-acting opioids for supplemental. asked dr for her commitment to start more patients on Butrans this week, dr said yes she will. we discussed PA criteria for Caresource patients and dr said PA's are going through so that makes it easier for her to get more patients started on Butrans.
PPLPMDL0020000001	Cleveland	OH	44195	5/1/2012	worked apm dept-left Butrans initiation guide, opioid experienced clinical trial leave behind, patient info booklet, patient savings card flashcard and my business card. for anne crawford, np, kathy kraus, pa, mei ngo, np, dr cheng, dr vrooman, dr rosenquist, dr stanton-hicks, dr katyal, dr mekhail, dr samuel, dr mintzer and dr leizman as i couldnt see anyone today. left same info for dr bamford-neuro dept
PPLPMDL0020000001	Cleveland	OH	44130	5/1/2012	Spoke with Ron, pharmacist, & showed him information on Butrans trial & savings programs. Reviewed eligibility requirements for the program & discussed automatic monthly savings through e-voucher. Discussed OxyContin with 7 total strengths available & asked about stocking. He said they carry "most of them". Reviewed details of the savings program.
PPLPMDL0020000001	Cleveland	OH	44130	5/1/2012	Quick call- Dr Fedorko said he did not have time to stop today. Showed him Butrans formulary grid & reminded him of favorable coverage on commercial plans, also reminding him of savings & trial programs. He said he would try to find someone then walked into a room.
PPLPMDL0020000001	Maple Heights	OH	44137	5/1/2012	Spoke briefly with Kim, pharmacist, & reviewed Butrans trial & savings program information along with OxyContin savings information. Gave her information sheet on each one. She said she hasn't seen anything for Butrans. Discussed Caresource prior authorization requirements.
PPLPMDL0020000001	Berea	OH	44017	5/1/2012	I asked dr if he had had any feedback yet for the patient who he said he tried Butrans, he said no, I asked about the patient and he said they were on tramadol. I asked if he has other tramadol patients he can try on Butrans and he said he will. I said for his patients who are taking hydrocodone around the clock why not OxyContin, he said he's trying not to prescribe OxyContin or other long acting opioids any longer.
PPLPMDL0020000001	Cleveland	OH	44130	5/1/2012	Spoke with Michelle, MA, & showed her portal invite. I told her about the conversation I had recently had with Dr Lash regarding Butrans & getting information in front of him. I described the online, interactive structure of the portal & asked her to be sure Dr Lash received the invite along with my card. Discussed Butrans indication & dosing. Also reviewed OxyContin formulary grid for commercial & Part D coverage.
PPLPMDL0020000001	Berea	OH	44017	5/1/2012	I asked Dr if he has been able to try a patient under 65 taking tramadol on Butrans 7 day patch yet, he said I need to keep reminding him. I let him know I can be there to remind him every week. He said he will give it a try and I reminded him about the month trial for commercial patients.
PPLPMDL0020000001	Cleveland	OH	44109	5/1/2012	worked pm&r dept-saw dr huang
PPLPMDL0020000001	Fairlawn	OH	44333	5/1/2012	Used pages 3-6 of main visual to provide overview and key selling messages for OxyContin. Asked dr where he has used OxyContin and what types of clinical findings does he have? dr said that he has used OxyContin at times after Ultram, vicoden and percocet. dr said that he typically will titrate to 80mg 2 times a day but he most common dose used is 40mg. Asked dr if he has used OxyContin 2 times a day instead of percocet q4-q6? dr agreed and tries to do that as much as possible. dr said that he likes OxyContin and his patients do very well on it. dr said he primarily uses it for patients with low back pain, osteoarthritis and cancer pain. asked dr to use OxyContin instead of percocet q4-q6 if patients meet the indication. dr agreed. dr gave Butrans key selling messages and asked dr if he sees a place for the product. dr said he sees a place for it for sure and understands where to use the product. dr said he can think of a couple of patients on celebrex around the clock that would be positioned from Butrans. dr said dr to Use it for that patient. dr said he sees celebrex patients all the time and said it should be a great option for an extended release 7 day patch.
PPLPMDL0020000001	Cleveland	OH	44130	5/1/2012	Quick call- Caught Dr Popa at the window. Passed back Butrans initiation/titration guide & pointed out dosing. Positioned Butrans for patients before she sends them to pain management. She said she would "try" & then walked away. Spoke with MA & gave her portal invite, describing interactive nature of the program. I asked her to ask Dr Popa to log on to participate.
PPLPMDL0020000001	Cleveland	OH	44113	5/1/2012	dr asked about insurance coverage for Butrans? we discussed PA criteria for Caresource patients and Butrans; I asked dr if that was really the only concern he had? dr said yes; I told dr that he gave me his commitment to start 2 patients, last time we talked, has he done it? dr said no and he doesnt know why. dr said he would like to get his vicodin and percocet patients started on Butrans. I talked to dr about dosage ranges for short-acting opioids in initiation guide and appropriate initiation of Butrans, we discussed supplemental analgesia and I asked dr if this seemed easy to identify patients, discuss Butrans and start them? dr said yes. I asked dr what patients did he feel would be most appropriate for Butrans? dr said almost all of his patients are taking 5/325mg vicodin, 4 tabs/day, so 20mg daily, dr said he doesnt write more than 20mg also patients see him monthly for refills and if they dont like that or pain has worsened he sends them to pain management. I asked dr if he will start 1 patient in the next week, on Butrans based on our discussion instead of refilling vicodin or percocet? dr said yes he will do that. dr took patient info booklets for each exam room to help remind him to discuss Butrans. I showed dr application/rotation info in booklet and asked dr to discuss with patients, dr said he will do that. dr asked if patients can shower with hot heat? showed Butrans fpi section 5.11 application of heat, asked dr if he was comfortable starting 1 patient on Butrans? dr said yes
PPLPMDL0020000001	Shaker Heights	OH	44122	5/1/2012	Quick call- Dr Agarwal said he couldn't stop today. I showed him OxyContin conversion/titration guide opened to pg 6 & pointed out that patients taking 5mg Percocet 4 times per day could have the option of taking OxyContin q12h, getting an equivalent dose of oxycodone. Dr Agarwal just waved & went into a room. Michelle said they have plenty of savings cards for both products.
PPLPMDL0020000001	Cleveland	OH	44113	5/1/2012	met Greta for 1st time as she's in dr elbadaways practice, we discussed Butrans & core selling messages. Greta focused on Butrans being transdermal, dosed once every 7 days and a CII. Greta said they have patients taking vicodin and percocet daily for chronic pain and she would prefer to give a patch and decrease some of the short-acting opioids. we discussed initiation and titration of Butrans, showed initiation guide and fpi for discussion. I asked Greta if she has 1 patient in mind that she can start on Butrans this week? Greta said she didnt know, needs to read over the FPI in detail and will let me know if she has any further questions. told Greta I respect that and will follow up next week. we briefly discussed PA criteria for Caresource patients as Greta said most of their patients are caresource.
PPLPMDL0020000001	Cleveland	OH	44114	5/1/2012	talked to dr about patients she's started on Butrans, dr said the patients she's started on Butrans were taking vicodin, not controlled and still in pain so she started them on Butrans and patients are doing well. asked dr if she has any patients looking like emma, patient profile, that she can start on Butrans? dr said she will consider it but hasnt had anyone recently need a medication change. we talked about dr starting a couple patients like emma, patient profile, this week, on Butrans when a dosage adjustment is necessary, asked dr if she will do this? dr said yes she will. we discussed initiation, titration and focused dr on BWC patients starting on Butrans.
PPLPMDL0020000001	Westlake	OH	44145	5/1/2012	I reviewed the OxyContin conversion guide and we discussed that patients can taper their total daily dose and still switch to Q12hr. He said he will think of this for some patients who are on higher doses. I reviewed Butrans as an option before even giving the patients the option of vicodin. He said this would be ideal for patients not on higher doses yet.
PPLPMDL0020000001	Berea	OH	44017	5/1/2012	Spoke with April, we reviewed the Butrans medication guide and the FPI regarding use of supplemental analgesia. We discussed Butrans as an option instead of going to vicodin around the clock. Reminder that OxyContin Q12hr is still an option for those patients taking short acting around the clock and it is approved on most Medicaid.
PPLPMDL0020000001	Olmsted Falls	OH	44138	5/1/2012	I asked dr what his thoughts are on where Butrans will fit in, he said that he is really trying not to prescribe opioids and is very concerned about addiction. I asked if that means he does not prescribe hydrocodone and he said he does prescribe hydrocodone because now that darvocet is off the market he feels there is really no go-between from nsaid to stronger narcotics. I asked if Butrans may be able to fit in as an option after nsaid or tramadol and before going to vicodin and he agreed. I reviewed the clinical trial with opioid-naïve patients. He asked if it was studies in geriatric patients, I showed him the FPI regarding geriatric patients, but let him know that Med D is a PA. We reviewed managed care for Butrans and OxyContin for Med D patients. I asked if he would at least give Butrans a try in those patients younger than 65 who are taking tramadol around the clock and he agreed.
PPLPMDL0020000001	Beachwood	OH	44122	5/2/2012	Spoke with Debbie Mackedo, nurse manager on the 2nd floor pain management center. She said Dr Dmitri is now scheduling lunches with reps, so she scheduled me for the first available. I showed her Butrans initiation/titration guide & OxyContin conversion/titration guide & asked if she & the other staff would find tools like that useful. She said they probably would, but to bring them back when I do the lunch so she can spend more time reviewing them. Reviewed Butrans appropriate patient type/range.
PPLPMDL0020000001	Cleveland	OH	44143	5/2/2012	Window call... reminded doc of the range of appropriate patients for oxycontin - moderate to severe- and the preferred coverage for most MED D plans. al also reminded him of the butrans patient that and that that he said he would start a younger patient who was failing on a short acting. aHe said he is going to try it.
PPLPMDL0020000001	Parma	OH	44129	5/2/2012	Spoke with Karen, nurse, & introduced myself & Purdue's products. Started to go over Butrans indication & appropriate patient type/range, but she interrupted me & said he doesn't write anything for pain at all & that "they would pass" on scheduling an appointment with me. I asked if Dr Davis may want to at least hear about Butrans & make the determination on whether or not he would be interested in prescribing it, especially since Butrans is a product he hasn't been spoken with about yet. She said no. I asked if I could leave information on Butrans. She said that would be OK. I asked her to give Dr Davis my card & Butrans FPI & she agreed.
PPLPMDL0020000001	Bedford	OH	44146	5/2/2012	Quick call- I asked Dr Haddad if he thinks he has some patients on Percocet around-the-clock who may like the option of getting their medication in a q12h dose with OxyContin. Dr Haddad said probably. I asked him to switch appropriate patients like this to OxyContin. He said he would do this. Gave him Butrans portal invite & asked him to log on to participate.
PPLPMDL0020000001	akron	OH	44304	5/2/2012	Asked dr if she has had any opportunities for Butrans as we discussed on the last visit? dr said she has not but does now remember Butrans and agreed to actively look for patients. nothing else learned. aSpoke to Nicole(ma) about Butrans to ensure she also has knowledge of the product and where it is to be positioned.
PPLPMDL0020000001	Maple Heights	OH	44137	5/2/2012	Quick call- Caught Dr Gene at the window & passed back Butrans portal invite. I asked him to log on to participate in interactive programs that may help him identify Butrans patients within his practice. He said he would have a look, thanked me, & walked into a room.
PPLPMDL0020000001	Bedford	OH	44146	5/2/2012	Spoke with Diane, materials management, & introduced myself & Purdue's products. She briefed me on the hospital's policies regarding vendors, including needing to get credentialed by VCS. I let her know I just began the process. Discussed educational resources Purdue has available that can help nurses & other staff members. She said I would need to meet with Andy, pharmacy manager, but that I would need to request an appointment with him first. I asked her if I could leave information on Butrans & OxyContin along with my card for him & she agreed to deliver it to him personally.
PPLPMDL0020000001	Cleveland	OH	44104	5/2/2012	asked Julissa, receptionist, to give Dr some info on Butrans as dr said she cant remember Butrans, Julissa said she will do that. talked to Dorie, MA, who said dr has been talking about Butrans since my lunch last week, to patients taking percocet and giving booklets to them but patients dont want to try a patch and only want their pills. talked to Dorie about starting patients on Butrans but giving percocet for supplemental, just giving less percocet than their normal monthly amount. Dorie said she doesnt know if dr will do that as she wants her patients off percocet but will talk to dr and see what she says. dorie said there a couple of new pain patients coming into the office soon so she will suggest to dr that she start them on Butrans, told dorie to consider Caresource patients knowing the PA criteria, Dorie said ok.
PPLPMDL0020000001	Akron	OH	44308	5/2/2012	Emailled invitation for upcoming webinar on 5/9/12. Attachments included the handout and eval form. Akron, Toledo and Cleveland Buckeye Health locations invited to the webinar: <hr>Handout sent as PDF file, 3 slides per
PPLPMDL0020000001	Lakewood	OH	44107	5/2/2012	Electronic invitation sent to Buckeye Health for the upcoming webinar (scheduled for 5/9/12 program. Invitation included handout (ASAP modules Prevention and Recognition).
PPLPMDL0020000001	Cleveland	OH	44113	5/2/2012	worked pain mgmt - saw dr shen and dr bohl/premier physicians
PPLPMDL0020000001	Barberton	OH	44203	5/2/2012	Asked if Butrans had been filled recently. aWas told that Butrans has not been filled in the pharmacy. dr gave Butrans indication, CII and 7 day transdermal system. dr Pharmacy is filling OxyContin on a regular basis. gave OxyContin conversion guide and explained conversions. dr explained patient copay saving programs for both products.
PPLPMDL0020000001	Maple Heights	OH	44137	5/2/2012	Spoke with Jim, pharmacist, & presented Butrans patient information booklets. I showed him application/rotation & told him the books can be used to counsel patients or to help save on calls back to the pharmacy regarding these procedures. He said he has had only one patient on Butrans & that patient actually just came off it. I asked if he knows why that patient discontinued. He said she was a BWC patient who used Butrans before undergoing a surgery. He said she recently had the surgery & then discontinued. Reviewed OxyContin savings cards. None needed. Gave him online educational resources information.
PPLPMDL0020000001	Parma Heights	OH	44129	5/2/2012	Spoke with floater pharmacist & gave her information on Purdue's online educational resources. She said she is always looking for CEU's. Reviewed Butrans dosing. She said she has dispensed it at various locations but has not gotten any feedback or heard anything from patients on it. Reviewed savings programs for Butrans & OxyContin. She said she would leave my card & information for the regular pharmacists.
PPLPMDL0020000001	Richmond Heights	OH	44143	5/2/2012	Met doc's MA, Robin, about my product portfolio. aShe said doc wont be in til next week for reps and lunches. a



PPLPMDL0020000001	Bedford Heights	OH	44146	5/2/2012	Spoke with Carrie, MA, & asked her if Dr Hochman is referring more patients to pain management now since House Bill 93 came about. She said yes. I asked who he is referring to. She said Dr Moufawad & Dr Tabbaa. She said there might be others but she couldn't find the full list. I asked if he is maintaining any patients at all. She said he really wants nothing to do with pain medications, so he just refers out. I asked her to give Dr Hochman educational resources catalog with my card. She agreed.
PPLPMDL0020000001	Copley	OH	44321	5/2/2012	followed up on last call about his belief about Butrans having a place in his practice. âDr said he has patients but many of them are on Medicare and its too difficult. âReminded dr that he admitted having a number of patients on Medco and Medical Mutual that have insurance coverage and that is where he needs to focus. âDr agreed and said to give him time. âNothing else learned...
PPLPMDL0020000001	Barberton	OH	44203	5/2/2012	Asked dr if he could think of any patients that are currently on a short acting opioid and have been for 3+ months who may not be getting the appropriate level of analgesia? âDR said that hes sure that he might have a patient that fits thats description. âReviewed case studies to back up question. âDR agreed that Butrans is a good product and that he just needs to find a patient that meets the patient profile. âAsked that when he does to use Butrans. âDr agreed to.
PPLPMDL0020000001	Independence	OH	44131	5/2/2012	Dr Jack said he knows I am there to remind him about Butrans. I told him I actually had a question as I'm confident that it is not reminding that he needs. He said that is probably true since I have been talking to him about it for over a year. I asked him what 3 strengths Butrans comes in. He said he didn't know. I showed him the 3 strengths. Dr Jack said he knew that & was only kidding. He then told me Butrans is dosed once weekly & is a CIII. I asked him what other opioid analgesic is a long-acting CIII. He said there aren't any. He then said he really doesn't know why he doesn't use Butrans & then walked away.
PPLPMDL0020000001	Cleveland	OH	44113	5/2/2012	talked to dr about starting patients on Butrans that are under 65,commercial insurance or BWC,have been taking vicodin or percocet for past 2-3 months and need a medication adjustment,dr said she has started a couple patients like this on Butrans.I told dr that was good as I thought she started most of her patients over 65yrs on Butrans.dr said no she has started a couple patients under 65yrs on Butrans but they tell her Butrans wears off at 5 days so it doesnt work for them.showed dr pharmacokinetics Butrans fpi,graph depicting 7 day dosing intervals and told dr she can give some short-acting opioids to these patients for supplemental analgesia,dr said she doesnt want to give more pills.told dr she doesnt have to,he can give less short-acting opioid than she normally would prescribe and also give these patients Butrans,dr said ok.
PPLPMDL0020000001	Cleveland Hts	OH	44118	5/2/2012	I reviewed the butrans and oxycontin patients types and asked doc if he knows where he would use them both in his practice. âHe said he knows he uses oxycontin for more severe pain. âHe asked if he would use butrans instead of duragesic. âI explained that butrans may be used before going to a low dose of oxycontin and maybe after tramadol. âHe said he could do that if he remembers. âI gave him an initiation tool and a formulary grid and explained the savings cards.
PPLPMDL0020000001	Mayfield Heights	OH	44124	5/2/2012	Spoke with Cory about the movement of butrans. âShe confirmed that they have it stocked but she has not seen any scripts. âI explained the positioning of butrans and the allowable use of supplemental analgesia. âI explained the proper application and rotation of the patch using the patient info guide. â
PPLPMDL0020000001	Akron	OH	44320	5/2/2012	Asked DR Bonyo to give me information on his clinical experience with OxyContin. âDR said that he uses it but has found that he needs to be very selective on who he prescribes it for because of the abuse potential. âAsked about the criteria he uses to decide if OxyContin is appropriate? âDR said that he said"he can tell by using his instincts" over the years on who he can and can't prescribe OxyContin. âAsked if he has patients on percocet q4-q6 for more than 3 months. âDR said that he does. âAsked dr what it would mean to those patients to be on a q12h product like OxyContin. âDR said he has done that before and agreed that he should consider that more often. âReviewed managed care opportunities with OxyContin. âAsked dr about his history with Butrans and asked if he still has patients falling on Ultram or Vicoden? âDR said he understand where Butrans fits. âAsked dr to use it again for those patients with Low back problems or osteoarthritis on those short acting products for 3+ months to use Butrans. âDR said ok.
PPLPMDL0020000001	Cleveland	OH	44113	5/2/2012	dr said he saw a patient monday that was on Butrans 5mg and had itching all over her body,this is same patient I reported an AE on monday,april 30th,as I was told patient had a rash,there wasnt a rash only itching all over.dr said patient didnt want to continue Butrans so she stopped it.showed dr Butrans fpi,discussed AE's seen in opioid experienced clinical trials and discussed percentages of patients that had itching in trials,dr said he didnt know why this happened and will continue trying to start patients on Butrans.
PPLPMDL0020000001	Cleveland	OH	44114	5/2/2012	dr said his patients are doing well on Butrans,asked dr if he's titrating Butrans? dr said no they have to be on stable dose for a few months before he increases Butrans dose.asked dr if he's considering patients taking vicodin daily for chronic pain,not controlled and needing a dosage adjustment,to start on Butrans? dr said yes he is,dr said he started with his percocet patients but now he's considering vicodin patients.dr said he doesnt like any of the narcotics but if he has to prescribe one it will be Butrans,asked dr for his commitment to continue prescribing? dr agreed
PPLPMDL0020000001	Bedford	OH	44146	5/2/2012	Dr Moufawad said Butrans has not worked for everyone he has put on it, but he wouldn't expect any medication to, so he is still happy with Butrans. I asked him how he determines whether to titrate a patient's dose of Butrans or take them off. Dr Moufawad said he always titrates to a maximum of 20mcg in addition to giving short-acting for breakthrough pain. He said if that still does not work, he will take them off, but added that he really does not want to have any patients on more than 120mg morphine equivalent. He also said if a patient reports a legitimate side effect, such as nausea or itching, he treats the side effect if possible before discontinuing Butrans. I told him it sounds like he is really doing the right thing & asked him to continue identifying appropriate Butrans patients. He agreed & said he is eager to do more speaker programs. I asked how OxyContin is fitting in to his practice now. He said he is comfortable having patients on OxyContin but does not like to prescribe more than 40mg strength. He said he probably has a patient or two on the 80mg, but in general, he likes to use the lower strengths (10 & 20). I asked him to continue to prescribe OxyContin where appropriate & he agreed.
PPLPMDL0020000001	Westlake	OH	44145	5/2/2012	Presented Intermezzo to Jim who confirmed they do see a fair amount of zolpidem. He was interested but didn't provide too much feedback. He questioned the formulary coverage for the PDPs because they see alot of dual/LIS patients. When talking specific plans, he stated CCRx is the biggest plan but also Silverscript. I reviewed the coverage for all Purdue products for the top 5 Part-D plans. I also provided an initiation-titration guide for OxyContin and Butrans and shared the recent win for ESI Part-D for Butrans. I provided a Med Ed catalog for CEs & webinar forms but left the rest of the packet for Deanne and the Consultants. She is away at a conference for OxyContin and Butrans and patients starting on Butrans and when they follow up with them? john said in 4wk appt he will assess pain and side effects.asked john if he will titrate Butrans dose then? john said no,he and dr marshall like the patients to stay on same Butrans dose for a couple months,then when appropriate titration will occur,john said he tells patients they will never be pain free,they will always have some sort of pain so they will need to take their Butrans and only a few patients get short-acting opioids for supplemental analgesia.asked john if he will continue starting patients on Butrans? john said yes,focused john on BWC and discussed PA criteria for talked to Marc,Pharmacist,about Butrans indication and initiation,Marc said he doesnt have Butrans in stock,hasnt seen any Rx in past 6months and doesnt remember who wrote Rx and doesnt have time to run a report.we talked about importance of stocking,marc said he wont order Butrans unless he see's a script,we discussed OxyContin stocking,marc said he's seeing HCP's still prescribe a lot of OxyContin no change since reformulation.I asked Marc if he's seeing Q12H dosing? Marc said yes for most part,sometimes get a Q8H or Q1D dosing and he will call office,talk to HCP and document if dr wants to continue with that dosing interval.showed OxyContin fpi,Q12H dosing only recommended Dosing interval,Marc said he does know that.asked Marc what patients said in med mgmt therapy,when taking OxyContin? marc said they tell him about side effects typical of opioids-nausea,somnolence and constipation.told Marc he has Senokot-S as option to treat constipation,gave Med D formulary grid,asked Marc what insurance they see? marc said med part d and medicaid,marc took formulary grid
PPLPMDL0020000001	University Heights	OH	44121	5/2/2012	I showed doc the butrans demo and reminded him that he said he would use butrans after NSAIDS or for patients falling on 1 or 2 vicodin. âI asked him if he would still try just one patient like that that is coming in for a dose adjustment. âHe said asked if they would be able to afford it. âI asked him to focus on working, insured patients and give them a savings card. âHe said ok.
PPLPMDL0020000001	AKRON	OH	44304	5/2/2012	Spoke with John about Butrans and asked if he has seen any other prescriptions since last year. âPharmacist ran a report and said that they have not seen any since last year. âGave Butrans key selling messages. âPharmacy does dispense OxyContin on a fairly regular basis and has used 2 of the copy cards left on last visit. Asked about the other pain medicines pharmacy dispenses. âWas told that they fill everything....
PPLPMDL0020000001	Broadview Heights	OH	44147	5/2/2012	Spoke with MA, Angela, & reviewed details of Butrans trial/savings cards & OxyContin savings cards. Attempted to see Dr Samuel but Angela said he was out doing a procedure. Worked with her to schedule an appointment to speak with him. She said they did not need any Butrans or OxyContin savings cards or Butrans patient information booklets. She agreed to give Dr Samuel Butrans patient profile information.
PPLPMDL0020000001	Broadview Heights	OH	44147	5/2/2012	Spoke with MA, Angela, & reviewed details of Butrans trial/savings cards & OxyContin savings cards. Attempted to see Dr Samuel but Angela said he was out doing a procedure. Worked with her to schedule an appointment to speak with him. She said they did not need any Butrans or OxyContin savings cards or Butrans patient information booklets. She agreed to give Dr Samuel Butrans patient profile information.
PPLPMDL0020000001	Macedonia	OH	44056	5/3/2012	Introduced myself & Purdue's products to Dr Pai (this is what he goes by), who is new to the practice. Delivered Butrans core messages & alerted him to Butrans being a CIII opioid with abuse & addiction potential. I asked if he has patients who are 40-60 years old, still working, who suffer from moderate to severe chronic pain from conditions such as osteoarthritis or low back pain. He said he does. Showed Butrans initiation/titration guide & showed him how patients can be started on 5 or 10mcg depending on their current medication. He asked if he has to have a special license like you do for other buprenorphine products. I told him there is no necessary special license & also reminded him that Butrans is indicated only for pain & is not used in addiction treatment. Reviewed dosing & showed 3 strengths. I asked if he thought Butrans sounded like something he could use in his practice & he said probably, but on a limited basis. I agreed that Butrans is not for everyone. Discussed advice for patients to take supplemental analgesia with Butrans. I asked if he typically gives patients on long-acting opioids breakthrough medication & he said he does & typically prescribes short-acting opioids for that. I asked where OxyContin fits into his practice. He said he uses it for patients with severe pain & doses it q12h. I asked if he would continue prescribing OxyContin q12h for appropriate patients & he agreed.
PPLPMDL0020000001	Cleveland	OH	44114	5/3/2012	asked Elaine what type of patient does she think of when Butrans is appropriate? Elaine said patients not controlled on their short-acting or need Butrans as an add-on to their vicodin.showed Elaine Butrans initiation guide,dosage ranges for short-acting opioids and told her that patients taking 3-8 tabs vicodin/daily,or 15mg-40mg,not controlled and requiring a medication adjustment,are appropriate for Butrans.we talked about Elaine seeing mostly patients taking vicodin 3-5 pills/day,5 pills max,that she can start on Butrans 5mcg or 10mcg.Elaine wanted the initiation guide to keep with her as a reference.
PPLPMDL0020000001	TWINSBURG	OH	44087	5/3/2012	Spoke with pharmacist, Amy, & reviewed Butrans appropriate patient type. She said she has not seen any utilization of Butrans yet. She asked for new OxyContin savings cards as hers were expired. Gave her one package. I asked if she stocks all 7 tablet strengths of OxyContin. She said she had them all, then checked her stock. She said they did not have the 15mg & she was not aware of it. I gave her an OxyContin conversion/titration guide which said would be very useful. I let her know that some physicians don't realize there is a 15mg strength, so she can let them know if she notices a situation where a patient is being titrated from 10mg to 20mg. She agreed Quick call: Dr Moysaenko said he didn't have time today. I showed him core visual aid pg 17, pointing out the initiation table. Positioned Butrans once weekly for appropriate patients taking less than 80mg equivalent morphine per day & OxyContin q12h for those beyond that range.
PPLPMDL0020000001	Parma	OH	44129	5/3/2012	In response to email from Karen Vann, series of emails and resent handout for the upcoming educational program, scheduled for 5/9/12 via webinar-<hr>Handout (3 slides per page) was saved in color as a PDF file, and showed dr emma,patient profile,asked dr if she see's patients like this? dr said yes but only a couple patients taking tramadol for chronic pain.dr said she has 3 patients taking vicodin,she doesnt like to prescribe narcotics.dr said she has a lot of acute pain patients taking short-acting opioids for a couple months but thats it. It asked dr if she has a patient looking like emma,patient profile,where she would consider Butrans? dr said she will look it over,took initiation guide we discussed appropriate dosage ranges of short-acting opioids and initiating Butrans on 5mcg or 10mcg.
PPLPMDL0020000001	Lakewood	OH	44107	5/3/2012	Quick call...Doc asked what's new with Butrans. âI asked him of he sees caresource patients. âHe said tons. âI reminded him that butrans is being covered by caresource with a PA. âI also informed him of thr TRI CARE coverage and pointed out that they are not on the formulary grid. â
PPLPMDL0020000001	Highland Heights	OH	44143	5/3/2012	Today is Dr Yager's last day in the practice as he will be moving to Nevada. Discussed Butrans core messages & patient type. I asked him to continue to consider patients for Butrans & OxyContin where appropriate & he Caught dr at window and reminded him that he said over lunch appointment that he needed to continue hearing and seeing Butrans in order for him to use. âGaveinitiationguide and asked for business in patients on a short acting agent for 3+ months. âDR said ok. nothing else learned.
PPLPMDL0020000001	Macedonia	OH	44056	5/3/2012	Asked DR if he has patients in their 40-50's suffering from low back problems or osteoarthritis and have been on a short acting opioid for 3 months or longer? âDR said he did have those patients. âTold dr that these types of patients are most appropriate for Butrans. âGave indication, CIII, 7 day transdermal system. âDR said he had been trying to remember and the type of patient that I outlined made it easier to remember. âDR asked about cost for the working class? âReviewed trial offer, copy cards and reviewed commercial coverage with Butrans coverage sheet.<font color=blue><b>CHUDAKOB's query on 05/10/2012</b></font>When he asks about insurance coverage, a possible response, instead of telling him the coverage right away is" Dr, are you asking this question because you are thinking of a specific patient to prescribe Butrans?<font color=green><b>REICHCL's response on 05/14/2012</b></font>sounds good. Thanks<font color=blue><b>CHUDAKOB added notes on 05/16/2012</b></font>Give it a try. I would love to hear how it works!
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/3/2012	
PPLPMDL0020000001	Akron	OH	44310	5/3/2012	

PPLPMDL0020000001	Akron Parma	OH	44310	5/3/2012	Gave Dr Blaser Butrans indication, CIII, 7 day transdermal patch. âReviewed initiation and titration guide. âDr said she would review. ânothing else learned.
		OH	44129	5/3/2012	Myra said she is still having issues with Butrans coverage. I asked her if she is talking about her office patients or nursing home. She said office patients. I told her this was very surprising, considering the managed care mix they see (BWC primarily). She said she has been very cautious with what plans she writes for & has only been using it for BWC or commercial patients. I asked what plans specifically but she did not know & Dawn couldn't remember. They said they would start flagging charts when that happens. Dawn told Myra to stick with new patients.âMyra said that there have been a few patients who have discontinued Butrans because they say it did not work. I asked if she had tried titrating them. She said no & that she just gave them what they had been on before, per the patients' requests. Dawn said patients don't want to "give up" their pills. I reminded them that patients don't need to "give up" anything & that the patient can take short-acting opioids, if appropriate, for supplemental analgesia. Myra said she does give patients supplemental analgesia. She said she would revisit the Butrans topic with these patients when she sees them back to determine if she just needs to titrate them or if Butrans just isn't right for them. She said some of her construction working patients don't want to try it because they don't believe it will stick on for the full 7 days. She said she has not even been able to get them to try it but she does try to get them to at least try.â
PPLPMDL0020000001	Twinsburg	OH	44139	5/3/2012	Spoke with Helen, MA, who said Dr Ningegowda does office hours in Twinsburg only on Wednesdays, & is there other days doing procedures. Introduced myself & Purdue's products. Showed her Butransinitiation/titration guide & reviewed indication. Helen said no nurse was available & I would have to stop back to speak with her about getting some time with Dr Ningegowda. She said to come back on a Wednesday.
PPLPMDL0020000001	Twinsburg	OH	44139	5/3/2012	Spoke with Helen, MA, who said Dr Ningegowda does office hours in Twinsburg only on Wednesdays, & is there other days doing procedures. Introduced myself & Purdue's products. Showed her Butransinitiation/titration guide & reviewed indication. Helen said no nurse was available & I would have to stop back to speak with her about getting some time with Dr Ningegowda. She said to come back on a Wednesday.
PPLPMDL0020000001	Northfield Parma	OH	44067	5/3/2012	Spoke briefly with Sun-Li, pharmacist, & gave her information on Butrans & OxyContin savings programs. Also gave her online educational resources information. She said to come back when she wasn't so busy- I agreed.
PPLPMDL0020000001		OH	44134	5/3/2012	Dr Hernandez said lately, he has had more (3) patients complain of application site skin reactions/redness at the application site for Butrans. He said two of the patients discontinued & one wanted to continue because of good pain relief. I asked if he tried having the patients rotate to a different site to see if that helped. He said he just took them off. He said other patients are still doing well. I asked what kind of information he shares with patients when starting them on Butrans. He said he tells them where to put it & tells them to take it off & put a new patch on at a different site after 7 days. He said he also lets them know if the patch starts to loosen, they can tape the edges or cover it with certain coverings. He said a lot of doctors don't want to take the time to explain to patients how to use products that they haven't used before. He also said it seems that more primary care physicians are refusing to treat their patients for pain & are referring more because they are afraid of prescribing narcotics.OxyContin savings card reminder.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/3/2012	Asked Brad if he could tell me who's writing Butrans 5 and 10mcg. âHe said heâcouldn'tâdo it now because he was just too busy. âAsked if he is continuing to see OxyContin prescriptions. âBrad said they are and have had to order more recently because of Opana. ânothing else learned.
PPLPMDL0020000001	Cleveland	OH	44113	5/3/2012	talked to dr about his patients that he's starting on Butrans,dr said his patients get started on 10mcg or 20mcg and he feels thats the best for his patients.showed dr Butrans initiation guide,told dr 5mcg and 10mcg are initiation dosage strengths for Butrans and 20mcg is the max dose but not a starting dose.dr said he knows that but this works for his patients.i asked dr how his patients are doing when starting on Butrans 20mcg? dr said good no problems.asked dr if he hears more side effect questions/complaints when patients are started on 20mcg? dr said no.i asked dr what if your patients call saying they are itching all over,how would you handle that? dr said he would have patients take some benadryl and if patients try benadryl a few times and nothing works,then he would remove Butrans.dr said he would treat side effects 1st before removing Butrans.showed dr safeguarding your meds brochure,asked dr if this would be something he found value in giving to his patients? dr said yes he talks to patients about safeguarding their med's.told dr i will bring more brochures back to him.told dr i appreciated his business and commitment to starting more patients on Butrans.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/3/2012	Asked dr Saunders if he has patients that are on short acting opioids where OxyContin a q12h product may be appropriate? âDr said he does but told me again that he doesn't feel as comfortable using OxyContin like he used to. âsked Dr why? âDr said because he just doesn't...nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44113	5/3/2012	asked deb how many patients she see's daily? deb said 45 patients but 67 are on the books.i asked deb how many of those patients are taking 4-5 vicodin/day,not controlled and need a medication adjustment? deb said a lot of them,asked if at least 5 patients/day are taking this amount? she said a lot more than that deb said she would write more Butrans but she cant get PA approved by Caresource.i talked to deb about PA criteria for Caresource patients and deb said she is stating that Butrans is an add-on to vicodin.i told deb that could b the reason PA's arent getting approved,Caresource has to see "failure" of tramadol or vicodin in past 30 days,we discussed Deb starting patients on Butrans and giving some vicodin or tramadol for supplemental analgesia.asked deb if she would be willing to start a couple patients on Butrans today and try the PA for Caresource again?
PPLPMDL0020000001	Cleveland	OH	44113	5/4/2012	asked dr who is appropriate patient for Butrans? dr said patients taking a couple vicodin or percocet,not controlled and asking him for something else.showed dr Butrans initiation guide,showed dosage ranges for appropriate Butrans patient starts,we talked about 5mcg or 10mcg being initiation dosage strengths and i asked dr if this seemed easy for him to do? dr said yes,dr said Butrans just doesnt pop in his head so he doesnt think to write it.I asked dr if the patient info booklets,in exam rooms,would help? dr said maybe he will take a couple and see if that helps.showed formulary grid,focused dr on med mutual and medco patients starting on Butrans and using initial trial offer cards,asked dr if he will see 2 patients within the next week,that are taking tramadol or vicodin or percocet,that will need medication adjustments? dr said yes he will.dr said he will write Butrans its just taking him awhile to get started.
PPLPMDL0020000001	Cleveland	OH	44109	5/4/2012	talked to Ray,Pharmacist,briefly about appropriate patients for Butrans,showed initiation guide,we discussed initiation and titration,Ray said he's seen some Rx for Butrans but doesnt know who is writing and no time to run report,we talked about insurance coverage-focus was on medicalid and BWC patients.confirmed OxyContin stocking,showed conversion guide we discussed vicodin and percocet conversions to OxyContin,Dave said he never recommends OxyContin its up to HCP's.showed formulary grids-focus on med part d patients starting on OxyContin.dave said he will keep grid as a reference and appreciated info.recommended Senokot-S
PPLPMDL0020000001	Northfield	OH	44067	5/4/2012	Spoke with pharmacist, Michael, who said they have not seen any activity for Butrans & have not needed to stock it. Reviewed appropriate patient type. Michael said there are many patients who fit that description. Discussed ability for patients to take supplemental analgesia with Butrans. Also reviewed details of trial/savings program as well as OxyContin savings program & gave information sheet on both.â
PPLPMDL0020000001	Cleveland	OH	44127	5/4/2012	i talked to dr about appropriate patients for Butrans,showed initiation guide,dr said he has a patient in the exam room now who has chronic low back pain,has been taking percocet but pain isnt controlled and patient wants more pills,dr said he doesnt want to give more percocet but wants to try Butrans and give tramadol for supplemental.I told dr that was great to hear and he can do that,dr started patient on Butrans,gave patient info booklet,explained application sites/rotation of Butrans and patient had med mutual insurance so dr gave patient the Butrans initial trial offer card.i talked to dr about commercial patients only being allowed to use initial trial offer cards,dr said ok,asked dr if he had more patients like this one,to start on Butrans today and next week? dr said yes he will continue prescribing Butrans.
PPLPMDL0020000001	Cleveland	OH	44130	5/4/2012	Quick call- Caught Dr Kansal as he was leaving. Positioned OxyContin for appropriate patients who may benefit from a q12h dose of oxycodone, such as patients taking Percocet around-the-clock who may want a different
PPLPMDL0020000001	South Euclid	OH	44121	5/4/2012	Window call...I reminded doc that she previously said she wasn't sure if she has the right patients for butrans. âI showed her the patent profile of Jessica and asked her if she has patients like Jessica. âShe said she does but probably would go straight to a long acting drug for a patient like that. âI told her that I just wanted to let her know it was an option. âProvided patient profile guide.
PPLPMDL0020000001	Cleveland	OH	44113	5/4/2012	worked pain mgmt dept-dale novak, premier physicians offices in hospital
PPLPMDL0020000001	Akron	OH	44310	5/4/2012	Spoke to Char about the Butrans prescriptions lately. âAsked about copy cards and use of them. âChar said that most of the prescriptions are not from commercial patients. ânothing else learned.
PPLPMDL0020000001	Garfield Hts	OH	44125	5/4/2012	Spoke briefly with Heather, pharmacist, & reviewed Butrans FPI 2.4, pointing out the ability for patients to take supplemental analgesia with Butrans if necessary. Also gave her information sheets on both Butrans & OxyContin savings programs. Reminded her that Butrans now has 2 different cards & that the monthly savings will come off automatically with the e-voucher program for qualified customers.
PPLPMDL0020000001	Akron	OH	44312	5/4/2012	Gary(pharmacist) said that Dr Cain had a patient fill Butrans in Pharmacy and customer is not in my territory. âAsked if any pain medicine drs have prescribed. âGary said no but he is filling OxyContin fairly regularly and didnt have time to provide any further information. ânothing else learned.
PPLPMDL0020000001	Mayfield Hts	OH	44124	5/4/2012	Quick call....Let doc know about the recent change with Express scripts and the preferred coverage now with that plan. âI asked if he has much express scripts. âHe said he is not sure, probably. âExplained that those patients can still use the savings cards but will likely have a lower copay than than other commercial plans.
PPLPMDL0020000001	Mayfield Heights	OH	44124	5/4/2012	Window call...I reminded doc that he previously expressed frustration in the coverage with butrans. âI let him know that butrans is now preferred brand with Express scripts and that patients can still us the savings cards making butrans more affordable for those patients. âHe said he'll try to think of butrans for those patient.
PPLPMDL0020000001	Akron	OH	44312	5/4/2012	Gave Dr McRoberts the Butrans indication, CII, and 7 day transdermal patch messages through window. âDr tookâinitiationâand titration guide and said he would review and speak with me more over lunch appointment.
PPLPMDL0020000001	Cleveland	OH	44113	5/4/2012	showed dr emma,patient profile,asked dr what would be the next step for this patient? dr said she really doesnt have many patients with chronic pain in her practice,most of them are acute pain taking tramadol,dr said she will keep Butrans in mind if someone does have chronic pain and she doesnt want to keep increasing tramadol,but right now all chronic pain patients go to pain management as she doesnt want to deal with them.showed initiation guide,we discussed appropriate dosage ranges of short-acting opioids where Butrans would be appropriate and discussed the initiation dosage strengths of Butrans.dr said ok,took initiation guide and a patient info booklet.showed formulary grid and discussed intial trial offer cards for commercial insurance patients.
PPLPMDL0020000001	Sagamore Hills	OH	44067	5/4/2012	Dr Scanlon said he couldn't stay to talk at my lunch because he had to go play golf. I told him I was going to paint a picture for him to think about while he was on the course. I asked if he has patients who are 40-60 years old, still working, who have moderate to severe chronic pain from conditions such as low back pain or osteoarthritis, who are not well-controlled on 3 Vicodin per day. He said he is sure that he does. I asked him to write Butrans for those patients, where appropriate & to consider OxyContin for those who are taking more than 40mg hydrocodone per day. He said he is using Butrans & will continue to.
PPLPMDL0020000001	Cleveland	OH	44127	5/4/2012	dr said she started 1 patient on Butrans earlier this week,told dr that was great to hear and asked why she chose Butrans? dr said patient was taking tramadol and vicodin,had chronic low back pain and was still in pain asking for more pills.dr said she started the patient on Butrans,gave patient info booklet and was fine with trying Butrans.asked dr if the patient actually got the Butrans at pharmacy? dr said she assumes the patient did as the pharmacy never called her back or the patient.dr said she saw a patient this morning,with brustitis,in a lot of pain,dr gave her tylenol with codeine-1 week supply,celebrex and a Butrans patient info booklet and told patient she will come back in 1 week and dr is starting her on Butrans.patient was fine with tht and dr said she's happy starting more patients on Butrans.we talked about importance of giving patients some short-acting opioid with Butrans,for supplemental analgesia,focused dr on Caresource patients and we discussed PA criteria and i asked dr if she will continue starting patients on Butrans? dr said yes,told dr i will follow-up next week to see how it went with the patient from today that is coming back next week to start on Butrans,dr said ok.
PPLPMDL0020000001	Akron	OH	44312	5/4/2012	asked dr Robinson is he has patients under 65yrs that have low back pain and been on cox2's, Ultram, Vicoden for 3+ months? âDr said he did but said he tries not to write much for pain. âGave Butrans Review, all key selling messages. âDr said he understand where it is appropriate and may have a patient or two that it be work for. âExplained trial offer and copy cards. â
PPLPMDL0020000001	Garfield Hts	OH	44125	5/4/2012	I told Dr Sadowski I had to come visit him every week because he keeps telling me that he has patients for Butrans but they just haven't come in yet, so every week I have to check to see if any of those patients came in. He said the patient he just saw has back pain & asked if he should just put him on Butrans. I asked how long the patient has had it. He said a few weeks. I told Dr Sadowski Butrans is not for everyone & that he will have to make the determination if Butrans is right for that particular patient. Reviewed indication & dosing. I asked Dr Sadowski if he can show me exactly how a prescription would be written. He said he doesn't remember. I told him I must not be doing a good enough job leaving him information that shows a picture of an example of a prescription, so I would be certain to start leaving him even more literature. Handed him an initiation guide opened to the back, showing him the example prescription. Dr Sadowski said he will write Butrans. I asked him not to forget about OxyContin where appropriate. He told me he would rather just think about Butrans instead & then walked
PPLPMDL0020000001	Akron	OH	44319	5/4/2012	Asked dr if he had any patients that are under 65yrs suffering from low back or osteoarthritis and have been on a short acting agent for 3+ months? âDr said probably he did but he claimed to know all about Butrans. âGave quick review of slide conversion scale and discussed doses. âButrans may not be appropriate for patients over 80mg or morphine equivalent. âDr gave me no indication about use. âsked dr if Butrans has a place in his practice? âDr said that he will see....nothing else learned.
PPLPMDL0020000001					

	Cleveland	OH	44109	5/4/2012	talked to Nasr, Pharmacist, about Butrans stocking. Nasr confirmed they have seen Rx for Butrans but he doesn't know who's writing and no time to run report. showed initiation guide, we discussed appropriate dosage ranges for short-acting opioids where Butrans would be appropriate. I asked Nasr if he's seeing patients taking these short-acting opioids? Nasr said yes a lot of them. asked if he will give patients the patient info booklet so they can talk to their HCP's about Butrans? Nasr said yes he will do that. asked Nasr to show application/rotation info in booklet to those patients that do get their Butrans Rx filled here. Nasr said he has done this. we discussed insurance coverage-focusing on Medicaid/PA criteria for Caresource patients. we discussed OxyContin Rx. Nasr said a lot of the same patients not new Rx for OxyContin, showed conversion guide, we discussed 7 tablet strengths for titration and Q12H dosing and gave formulary grids-focus on commercial insurance and med part d patients. recommended Senokot-S
PPLPMDL0020000001	Cleveland	OH	44121	5/4/2012	Window call...I showed doc the oxycontin conversion guide and the 7 dosing strengths. al asked him if he titrates throughout the range of dose. aHe said he tries not to go too high on oxycontin and if they need more than like 40mg BID he sends them to pain mgmt. al gave him a couple of conversion guides as he wanted one for his MA.
	Cleveland	OH	44113	5/4/2012	showed dale, william patient profile, asked how often he see's patients like this? dale said majority of their patients are taking vicodin or percocet so every day he works with dr shen, pain mgmt dr, he see's these patients. I asked dale what's the next step for these patients? dale said now he's recommending to dr shen that patients get started on Butrans. dale said he likes that its a once weekly dosing option in a patch and that its a CII so they can call in refills if they wanted. we talked about initiation and titration of Butrans and I asked dale if he will see patients like this today and next week? dale said yes. I asked if he will commit to starting a couple patients on Butrans? dale said yes he will. focused dale on BWC and commercial insurance patients, briefly discussed PA criteria for Caresource patients.
PPLPMDL0020000001	Cleveland	OH	44113	5/4/2012	asked dr if he's been able to read some of the Butrans info I left last time? dr said yes he looked at it, thinks there's a place for Butrans in his practice but hasn't given much thought to it. dr said he's so busy he just writes what he knows and that's short-acting opioids. asked dr if he would consider Butrans for patients like william, patient profile, dr said yes he will. we discussed initiation, titration and insurance coverage and asked dr if he will start 1 patient in next week on Butrans? dr agreed. asked dr how OxyContin plays a role in his practice? dr said it doesn't, he has 1 patient on OxyContin. dr had to go couldnt discuss more
PPLPMDL0020000001	Sagamore Hills	OH	44067	5/4/2012	Reviewed Butrans once weekly dosing & strengths with Lynda. She said she is still somewhat "shadowing" the physicians. She said it is amazing how different each of them practices & how much their philosophies differ. Discussed Butrans as the only long-acting opioid analgesic in the CII class. Also reminded her that Butrans has abuse & addiction potential. Lynda said she does think of Butrans sometimes when she is in with patients. She said she will start suggesting it to some of the doctors where appropriate.
PPLPMDL0020000001	South Euclid	OH	44121	5/4/2012	Spoke to Grisleda who said they have been seeing regular scripts for butrans and have had to reorder it routinely it seems. al asked if patients have asked questions about how to use the patch. aShe was not sure. al explained the helpfulness of the patient info guides and the importance of proper application. aShe said they would be helpful and wanted savings cards. a
PPLPMDL0020000001	South Euclid	OH	44121	5/4/2012	Spoke to Bonnie about the butrans key selling messages and how we are positioning butrans after patients have failed on tramadol or before going to vicodin ATC. al also explained the use of supplemental analgesia. aShe said that they have seen a few scripts and does not recall there been any issues with the product. al asked if she has noticed any refills. aShe thought there may be 1 or 2 patients on it. al provided a patient info guide as reference for application and rotation.
PPLPMDL0020000001	Sagamore Hills	OH	44067	5/4/2012	Dr Loyke said if I sold any products other than narcotics he would write "a ton" of it for me, but that he just doesn't believe in chronic opioid therapy. I agreed that chronic opioids are not for everyone. He said he really does not have a problem with Butrans & added that he will probably use it at some point. He said he has prescribed OxyContin & prescribes fentanyl. I told him to think of Butrans for patients before fentanyl if appropriate. Discussed Butrans as a long-acting CII medication. He said he probably writes hydrocodone more than anything if he is going to prescribe something. aFont color=blue><b>CHUDAKOB's query on 05/10/2012</b></font>Why hydrocodone?<font color=green><b>APSEGAS's response on 05/11/2012</b></font>I will ask him next time I see him.<font color=blue><b>CHUDAKOB added notes on 05/16/2012</b></font>I know he does not write very many opioids, but it is interesting he is going to write hydrocodone if he writes anything. I would be interesting to know his thoughts on this.
PPLPMDL0020000001	AKRON	OH	44319	5/4/2012	Asked pharmacist if they had 15mg of OxyContin in stock. aPharmacy does not have it and earliest would be Tuesday but they can only order it if the pharmacy manager is in and he is not. Gave overview of Butrans with all key selling messages. ano other info learned
PPLPMDL0020000001	Cleveland	OH	44109	5/4/2012	worked pm&r-couldnt see HCP's today, have to go in AM, but left Butrans initiation guide, patient info booklets and formulary grids for Dr. Malkamaki Dr. Greenwood, Dr. Harris, Dr. Fox, Dr. Jaffer. Left same info for HCP's in Internal medicine and family medicine.<font color=blue><b>CHUDAKOB's query on 05/10/2012</b></font>Amy, if all you are doing is leaving information and not making an HCP or a non-HCP call, then this should not be recorded as a call. It would be the same as going into a physician's office and just dropping information.<font color=green><b>BROOKAM's response on 05/11/2012</b></font>ok well I am confused then. I have been entering my Hospital calls like this for 2.5yrs (almost 3 yrs in July) noting which departments were worked, etc.. what should I be putting here then? sorry but that must have been a miscommunication between us then. Thanks Barry.<font color=blue><b>CHUDAKOB added notes on 05/16/2012</b></font>If you are speaking with HCP's, NPs, PAs, Nurses etc, then you can put that you worked the department. If you are just going around to drop information, then this should not be recorded as a call.
PPLPMDL0020000001	Akron	OH	44305	5/4/2012	Asked dr about his clinical experience with OxyContin. aDr said a majority of his patients are on 20mg/2xday and he also has a few on 80mg twice a day. aHe said his experience is very positive with excellent pain control. aGave dr with dosing and conversion guide. aReferred to va said to discuss patient types appropriate for OxyContin. aAsked dr if he knew about Butrans and he said he has heard about it but doesn't know much. aProvided all key selling messages and asked if he has patients on short acting opioids around the clock to manage pain. aDr agreed that he does. aProvided conversion scale and discussed steady state, clinical trials, and inclusion criteria. aAsked dr if he has patients that he believes would be appropriate for Butrans? aDr agreed that he has some patients. aDr had no further questions.
PPLPMDL0020000001	University Heights	OH	44121	5/4/2012	I reminded dr that he said he would use butrans if he found the tight patient. al asked him if he has thought about the right patient. aHe said no. al showed the initiation guide and explained that butrans can be used after NSAIDs or after patients have failed on a couple of tabs of tramadol - both patient types would start on the 5mgc staring dose. al showed him the coverage plans. aHe balked at the 3rd tier coverage. al pointed out that he has savings cards to offset the cost. aHe said ok.
PPLPMDL0020000001	South Euclid	OH	44121	5/4/2012	Window call...I reviewed the butrans indication, positioning and the other key selling messages. aProvided formulary grid reminder and initiation guide. aSpoke with Lisa, MA, and confirmed that doc still has savings cards.
PPLPMDL0020000001	Cleveland	OH	44114	5/7/2012	talked to Laura, pharmacist, about 6 Butrans core selling messages, no Rx here for Butrans so Laura isnt ordering Butrans. we discussed importance of stocking Butrans. showed initiation guide, we discussed appropriate patients for Butrans and initiation, titration, showed formulary grid and focused discussion on commercial insurance patients and showed initial trial offer cards for commercial insurance patients. laura asked about medicaid coverage as thats big population here, we discussed PA criteria for Caresource patients. confirmed OxyContin stocking and briefly discussed 7 tablet strengths and formulary coverage. recommended Senokot-S
PPLPMDL0020000001	Parma	OH	44129	5/7/2012	Introduced myself & Purdue's products to Dr Lin. I asked if she does a lot of chronic opioid therapy in her practice. She said every day. Delivered Butrans core messages, each of which she repeated back to me. Discussed appropriate patient type/range, showing her chart in initiation guide & discussed OxyContin q12h as an option for appropriate patients beyond the Butrans range. She said to leave her info because she had to leave for the Cancer Committee meeting & then walked out of the room.
PPLPMDL0020000001	Independence	OH	44131	5/7/2012	Quick call- Caught Dr Trickett briefly at the window. Reminded her of our previous conversation when we discussed patients under the age of 60 who suffer from pain from chronic conditions like spinal stenosis or spondylolysis & how Butrans may be an option for some of them. She said she continues to keep Butrans in her brain formulary. I passed back OxyContin Medicare formulary grid & pointed out favorable coverage for her
PPLPMDL0020000001	Westlake	OH	44145	5/7/2012	I reviewed the Butrans FPI and use of supplemental analgesia and Butrans. He said there still has not been much movement of Butrans in this store. I asked if he would let patients who are taking tramadol around the clock know about Butrans as another option, and he said maybe if he gets a chance to talk to them. He said most tramadol patients get their scripts and do not ask questions about other meds. I reviewed that OxyContin may be a Q12hr option instead of taking short acting oxycodone around the clock.
PPLPMDL0020000001	Parma	OH	44134	5/7/2012	Spoke with pharmacist, Caitlyn, & inquired about Butrans stocking. She said they do not have it & haven't seen any activity for it. Reviewed appropriate patient type, focusing on patients taking around-the-clock tramadol or Vicodin. Also presented savings & trial programs & discussed e-voucher & automatic monthly savings for qualified customers. Gave her information on OxyContin savings program & discussed eligibility & usage. I also gave her information on educational resources.
PPLPMDL0020000001	Parma	OH	44129	5/7/2012	Dr Gigliotti said he just wrote a Butrans script about 15 minutes before I walked in. He said he couldn't find the savings cards, but Linda found them & made sure the patient got one before she left. I asked him to tell me more about this patient. He said she had neck surgery recently & was still in pain. He added that she was taking Vicodin every day at a low dose, so he thought she would be a good candidate for Butrans. I agreed that it sounded like he chose a good patient. I asked what dose he started her on. He said he gave her the 10mcg. I asked if he told her she could take her Vicodin for supplemental analgesia if necessary & he said he did. I told him I was impressed at how well he must listen to me to have done so well with this patient. He said he would let me know how she does. I asked if he also had good news to tell me about OxyContin & finding appropriate patients for it. He said no & that he really tries to refer his more severe pain patients down the hall to Dr Salama.
PPLPMDL0020000001	Cleveland	OH	44106	5/7/2012	asked dr if she reviewed Butrans info from last week? dr said she looked at a little bit of the FPI but wanted me to remind her of indication, appropriate patients and insurance coverage for Butrans. we discussed 6 Butrans core selling messages, dr focused on transdermal delivery and once weekly dosing of Butrans, dr said she liked both features. I asked dr if she had patients taking tramadol daily for chronic pain like low back pain? dr said yes but she is only a resident so she works with fellows and attendings on all medication decisions. dr said she will talk to them about their thoughts on using Butrans in their practice and go from there. I asked dr if she will consider 1 patient to start on Butrans this week, if attending HCP's feel its appropriate? dr said yes. we discussed PA criteria for Caresource and focused on commercial insurance patients, showed formulary grid.
PPLPMDL0020000001	Cleveland	OH	44109	5/7/2012	showed dr OxyContin visual aid, discussed appropriate patients, asked dr who he feels OxyContin is appropriate for? dr said he isnt accepting new patients that take narcotics or want them, for chronic pain. dr said he will prescribe tramadol for new patients but that its nothing else. asked dr how he feels about prescribing OxyContin for his patients now? dr said not good. dr said he doesnt like OxyContin or percocet and wants to wean patients off these medications. dr said if patients are taking 4 percocet, 10mg, daily, and still in pain, he will tell them thats it, no other option. asked dr if he would consider OxyContin appropriate at that point? dr said probably not. dr said he rarely starts patients on OxyContin, showed dr OxyContin conversion guide and talked about patients taking 40mg/day percocet, ready for a long-acting opioid could start on OxyContin, showed 7 tablet strengths and discussed flexibility in titration and Q12H dosing. asked dr if he will at least titrate a few of his OxyContin patients, if necessary, since he's not starting new patients? dr said yes he will. asked dr if said he has some patients taking vicodin and percocet, not controlled, and needing a dosage adjustment? dr said every day. we discussed Butrans being an option, initiation of Butrans, asked dr if he has BWC and commercial insurance patients? dr said yes a lot of these patients, asked dr if he will start a couple patients on Butrans in the next week? dr said yes he will before his 5/15th vacation begins
PPLPMDL0020000001	Parma	OH	44129	5/7/2012	Reminded Dr Eicher of our previous conversation when I introduced Butrans & reminded him that he had seemed interested. Reviewed core messages. Showed appropriate patient type/range in initiation/titration guide & discussed OxyContin q12h as an option for appropriate patients beyond the Butrans range. Dr Eicher said he does use OxyContin occasionally. Discussed Butrans as the only long-acting CII opioid analgesic available. Dr Eicher said he would try to remember to use Butrans & then walked away.
PPLPMDL0020000001	Cleveland	OH	44106	5/7/2012	talked about appropriate patients to start on Butrans, showed initiation guide we discussed dosage ranges for patients taking tramadol that arent controlled and ready for a dosage adjustment. dr said he likes that Butrans is transdermal and once weekly dosing, medicaid coverage has been challenge here at main campus. we discussed PA criteria for Caresource patients and asked dr if there was any reason he wouldnt prescribe Butrans? dr said no, as long as attendings are ok with it, he will start patients on Butrans. we discussed initiation, titration and patient info booklets. asked dr for his commitment to start a couple patients on Butrans this week, dr said yes he will do that. recommended Senokot-S
PPLPMDL0020000001	Parma	OH	44129	5/7/2012	Quick call as Dr Cowan had to go to the Cancer Committee meeting. Reviewed Butrans core messages & discussed appropriate patient type, including OxyContin q12h for appropriate patients beyond the Butrans range. He said he had forgotten about Butrans but will keep it in mind.

	Parma	OH	44129	5/7/2012	Reminded Dr Hines of our previous conversation when I introduced Butrans. He said he vaguely remembers. Reviewed core messages & reminded him that he had seemed interested in having Butrans as an option for treating appropriate patients. He said he had forgotten about it. I asked if he treats patients frequently with chronic opioid therapy. He said all of them there do. Positioned Butrans as a once weekly transdermal option for treating patients taking less than 80mg equivalent oral morphine per day & OxyContin q12h for appropriate patients beyond the Butrans range. He said it is unfortunate that OxyContin has a negative stigma associated with it because it prevents many appropriate patients from getting it when they need it. I agreed that appropriate patient selection is very important.á
PPLPMDL0020000001	Fairlawn	OH	44333	5/7/2012	Talked with Ashley(receptionist) and Christy and discussed Butrans and OxyContin. áGave Butrans key selling messages and appropriate patients for Butrans. áAsked about OxyContin copay cards and provided new ones.
PPLPMDL0020000001	Parma	OH	44129	5/7/2012	Caught Dr Taylor at the window. She said she has not prescribed Butrans & that she has been especially busy with practice problems, such as her computer system, lately. Positioned Butrans for an appropriate established patient who requests a medication adjustment, whether it be an increase in dose or dosing interval. Dr Taylor said she really is keeping it in mind. I also asked her to write OxyContin for appropriate patients who are doing well on it. She agreed to continue those patients. Gave her web educational resources booklet which she really liked.
PPLPMDL0020000001	Lyndhurst	OH	44124	5/7/2012	Spoke to Megan about the movement of butrans. áShe said she has about 1 or 2 customers on it regularly. áI asked her if she was aware of customers getting it filled once but not coming back. áShe said she was not really seeing that. áShe just has to couple of regular customers. áI explained the positioning and the patient type. áProvided initiation tool and discussed the proper application and rotation for best results.
PPLPMDL0020000001	Lyndhurst	OH	44124	5/7/2012	Spoke to Tom about the positioning of butrans and what we are telling docs and pharmacists about the use of supplemental analgesia (referred to FPI). áHe said he has been seeing a couple of scripts. áI asked if he recalls the prescribers or if there were any issues with filling. áHe said he gets a lot of scripts from Hillcrest pain mgmt so it was probably one of them. áHe thinks that the cost was reasonable for patients. áI explained the savings card for commercially insured patients. áProvided patient info guides to provide to customers. áExplained the importance of proper application.
PPLPMDL0020000001	Westlake	OH	44145	5/7/2012	Quick call at the window, I asked him if he's tried Butrans yet, he said he has not, but he will. áI asked what type of patient he is looking for and he said one with chronic pain who has good insurance.á
PPLPMDL0020000001	Lakewood	OH	44107	5/7/2012	I told Dr we have two options for treating pain, OxyContin for patients who are taking hydrocodone or oxycodone around the clock, and Butrans for patients who are taking tramadol around the clock instead of going to vicodin in the first place. He said he will give Butrans a try he just has many more patients that are on OxyContin or on short acting opioids already. I asked if he could try just one patient younger than 65 with commercial insurance on Butrans and he agreed.á
PPLPMDL0020000001	Cleveland	OH	44106	5/7/2012	dr said he's not started anyone on Butrans,doesn't have many patients taking narcotics but will keep Butrans in mind.asked dr who is the appropriate Butrans patient in his mind? dr said patients taking a couple vicodin or percocet for chronic pain,not controlled,showed dr Butrans initiation guide,we discussed indication and dosage ranges of short-acting opioids where Butrans would be appropriate,dr said ok he will keep guide as a reference and consider Butrans if he has anyone that he feels is appropriate.we discussed insurance coverage-focus of discussion on PA criteria for Caresource patients as medicaid is big plan here at main campus.recommended
PPLPMDL0020000001	Lakewood	OH	44107	5/7/2012	Dr came to the window and I asked if he would try Butrans for the patients that we discussed who are under 65 years old, taking tramadol around the clock. He said that he will try it. I asked Kim how I can remind him to try Butrans and she said will put reminders at his desk. I asked if she would look for these types of patients getting tramadol refilled and she said she will. Spoke with Laura and asked her to look for these specific types of patients and she agreed.
PPLPMDL0020000001	Richmond Heights	OH	44143	5/7/2012	Quick introduction through window. áI introduced oxycontin and butrans as my products and their patient types. áHe said he is aware of them both. áToday was his first day open so I told him I would come back.
PPLPMDL0020000001	Cleveland	OH	44109	5/7/2012	left info for PM&R doctors- Butrans fpi,initiation guide, patient info booklet,formulary grid and my business card-couldnt see any HCP's this am. left SAME info for IM and FM HCP's.
PPLPMDL0020000001	Lakewood	OH	44107	5/7/2012	I showed dr the pull out tool for Butrans and asked if he would try Butrans for patients who are younger than 65 who are taking tramadol around the clock, he said he has tried those patients and it wasn't covered. I asked if managed care is the only thing stopping áhim from writing Butrans and he said yes.
PPLPMDL0020000001	Mayfield Hts	OH	44094	5/7/2012	Window call...I asked doc if he is having success with the patients that he has had on butrans. áHe said that he has been writing it a patients seem to like. áA couple of patients he has not heard back from. áI asked if he prescribed with refills. áHe said he could not recall. áI reminded him that butrans can be called in and refilled.
PPLPMDL0020000001	Hudson	OH	44236	5/7/2012	Quick call- Dr Tosino saw me at the window, waved, & said he is keeping Butrans in mind. I asked if he has enough trial/savings cards & he said he does. Passed back OxyContin formulary grid & pointed out favorable coverage.
PPLPMDL0020000001	Cleveland	OH	44106	5/7/2012	He just thanked me & walked away.
PPLPMDL0020000001	Akron	OH	44333	5/7/2012	worked apm dept
PPLPMDL0020000001	Independence	OH	44131	5/7/2012	Gave Dr overview of Butrans with all key selling messages. áAsked dr how he treats pain in his practice. áDr said that he does not treat pain and will refer his patients out if they need to go to something more than tramadol. áDr said he does understand where Butrans fits but said that he would not be the one likely to use it. á
PPLPMDL0020000001	Westlake	OH	44145	5/7/2012	Spoke with Regina, pharmacy manager & gave her information on online educational resources. She said she has not seen any movement of Butrans & will order it when she sees scripts. I asked about OxyContin stocking but she said she was too busy to check on that.
PPLPMDL0020000001	Westlake	OH	44145	5/7/2012	Quick call with Will, I reviewed the FPI regarding the use of supplemental analgesia with Butrans. I reviewed the medication guide for Butrans and how to instruct patients on proper use, and application. I asked if patients usually have questions about their pain meds and he said no, I let him know OxyContin is an option when patients are taking hydrocodone or oxycodone around the clock and showed the conversion guide.á
PPLPMDL0020000001	Lyndhurst	OH	44124	5/7/2012	I showed doc the patient profiles of Emma and William and explained the positioning of butrans after tramadol or a few tabs of vicodin. áHe said he has used it for patients taking more than that. áExplained the importance of the right starting dose for the best result. áI showed the initiation guide and the sliding tool. áI asked him to try one patient this week that has been failing on tramadol or vicodin.á
PPLPMDL0020000001	Lyndhurst	OH	44124	5/7/2012	I asked HCP about the patient that was suffering from knee pain and was considering butrans for. áShe said he has not been back in. áI asked if the patient is commercially insured. áShe said she believes he is. áI showed the formulary grid and explained the co pay cost along with the savings cards. á
PPLPMDL0020000001	Lakewood	OH	44107	5/7/2012	Dr said he has not yet tried Butrans. I asked what his hesitation is. He said that with new medications, managed care is usually an issue. I asked if that was his only concern and his thoughts on Butrans clinically. He said that he would try it if it was covered. I reviewed the managed care where Butrans is covered and the savings cards for commercial patients. I asked Robin if she would give the cards to patients and she agreed. We reviewed that low dose OxyContin may be an option that is covered on Med D plans like AARP.á
PPLPMDL0020000001	Mayfield Hts	OH	44124	5/7/2012	Quick call...I reminded doc of the butrans key selling messages and that he said he keeps for forgetting about it. áI asked him to try just one patient this week that needs a dose adjustment to their tramadol of vicodin dose, possibly a BWC patient where butrans is covered. áI showed him the initiation tool for the right starting doses. á
PPLPMDL0020000001	Parma	OH	44129	5/7/2012	Dr Lee said he couldn't stay because he had to go to the Cancer Committee meeting. Reminded him of previous conversations when I introduced Butrans, a once weekly transdermal system for moderate to severe chronic pain. He said he remembers but has not used it. Positioned Butrans for patients taking less than 80mg equivalent oral morphine per day & OxyContin q12h for those beyond that range. He said he does not do a lot of opioid therapy with patients, but said he would keep both in mind as options.á
PPLPMDL0020000001	Fairlawn	OH	44333	5/7/2012	Spoke with Jessica about Butrans and OxyContin. áAsked if they have seen any prescriptions from Butrans recently. áJessica said they have seen them from Shah. Gave new information about Butrans on Express Scripts 2nd tier. áJessica said for Express Scripts they cannot see the individual plans but the employer carve outs they can. áDiscussed key selling messages for Butrans and asked who they are seeing prescribe for OxyContin. áJessica said Lefkowitz and said that most are continuing to refill. áAsked Jessica to hand out copay cards for both products and she agreed.
PPLPMDL0020000001	Akron	OH	44313	5/7/2012	Met Jason(pharmacist) and discussed Butrans and OxyContin. áGave key selling messages for both products and asked if they stocked Butrans. áJason said they do not currently but have filled it in the past. áAsked what doses of OxyContin they fill the most and he said 20mg and 80mg are most common. áDiscussed Butrans trial offer and copay cards for both products.
PPLPMDL0020000001	Cleveland	OH	44106	5/7/2012	showed dr emma,patient profile,asked dr if she see's patients like emma? dr said yes.asked dr if she would consider Butrans as the next step in therapy? dr said if attending HCP's allowed it,yes she would.dr said she doesn't have any experience prescribing Butrans yet so she's not comfortable with it.we discussed 6 Butrans core selling messages,dr said she liked that Butrans was transdermal and once weekly dosing.asked dr if she will start 1 patient,like emma,this week on Butrans? dr asked about medicaid insurance coverage? we discussed PA criteria for Caresource patients and i asked dr if she had a couple patients in mind that looked like emma,patient profile and had Caresource? dr said no patients in mind but she needs to know if Butrans is covered by Caresource as that's majority of patients here at main campus.
PPLPMDL0020000001	Akron	OH	44333	5/7/2012	Gave dr overview of Butrans and recapped last discussion. áReviewed Butrans conversion scale and showed where Butrans is appropriate and not appropriate and that OxyContin may be more appropriate for patients over80mg or morphine. Asked dr if he thinks Butrans has a place in his practice? áDr said possibly for a couple of patients on short acting products.
PPLPMDL0020000001	Richmond Heights	OH	44143	5/7/2012	I discussed the butrans key selling messages and the positioning. I asked her where she might use butrans. She said said maybe for a patient that would prefer a patch instead of pills. I gave her a patient profile guide and asked her to try butrans for a patient like Emma- on a low dose of tramadol. Provided formulary grid.
PPLPMDL0020000001	Parma	OH	44129	5/8/2012	Quick call- Caught Dr Roheny briefly at the window while I was waiting to be let back. He said "Butrans" to me & said he's keeping it in mind, but then he walked into a room. Spoke with nurse, Terry, who said he was late coming back from lunch today & was still way behind. She asked me to come back later this week or next week if I wanted to talk to Dr Roheny further. I agreed.
PPLPMDL0020000001	Garfield Heights	OH	44125	5/8/2012	Spoke with head nurse, Denise, who said I would have to request an appointment with Dr Abraham via phone or mail as he was too busy today. Discussed details on trial/savings program for Butrans, reminding her that eligible patients now get two different savings cards in the brochures. Gave her informational sheet. Also reviewed OxyContin savings program for qualified patients & let her know those paying cash can use the card every 14 days if their prescription is written that way. Gave Denise the web educational resources booklet & let her know it may be useful for her, her other nurses, Dalbir (PA) & each of the physicians. She said she would put it in their
PPLPMDL0020000001	Parma	OH	44129	5/8/2012	Spoke with MA, Anita, & reviewed Butrans appropriate patient type/range. Also discussed trial/savings cards & reviewed additional information on usage of OxyContin savings cards. She said they are still not scheduling any appointments with reps but to just keep checking back. I asked her to give Dr Gallagher my card, portal invite, & sealed article & she agreed. No savings cards were needed.
PPLPMDL0020000001	Parma	OH	44129	5/8/2012	Caught Dr Khoobloo on his way out of the office. He said he was running late for an appointment & asked if I could be brief today. Reviewed appropriate patient type for Butrans, asking him to identify potential patients by looking for those who are ages 40-60, still working, who are not well-controlled on their current pain medication, if appropriate. He said he is thinking of patients for Butrans & wants to try it. He said to come back another day & we could sit & talk about it.
PPLPMDL0020000001	Uniontown	OH	44685	5/8/2012	Recapped previous call with Dr Lohmeyer about the appropriate patient for Butrans. Discussed that she uses tramadol for her patients in moderate to severe pain as well as vicodin. áUsed patient profile page(Emma) to support the appropriate patient for Butrans. áDr agreed that she does use tramadol and realizes where Butrans fits for the patient under 65 and employed with private insurance. áDiscussed Senokot and Colace and how they Discussed Butrans and reviewed all key selling messages. áDr had previously reviewed the FPI and initiation guide. áDiscussed appropriate patients for Butrans for patients on vicodin. áDr said he uses percocet and that there are patients of his that may be to or over the 20mcg dose. áDr admitted to seeing a lot of medicaid and medicare patients. áDiscussed Caresource and PA required. Discussed commercial patients and cost savings appropriate for Butrans with trial offer and copay card. áDr admitted to seeing how Butrans is a good option to have available and will look to prescribing it where appropriate.
PPLPMDL0020000001	Barberton	OH	44203	5/8/2012	Spent time discussing the Butrans appropriate patient type/range & how appropriate patients beyond that range may be candidates for a q12h dose of OxyContin. Dr Ortega said he does not think Dr Marshall realizes that he could be giving his Percocet patients OxyContin q12h instead of Percocet 4 times per day. He said he does not think many doctors realize that both medications contain oxycodone & he didn't realize this until he was educated. He mentioned that he has still been seeing some of Dr Marshall's patients & has been educating them on long-acting options. Showed Butrans initiation guide chart on page 6 & showed him how some of those Percocet patients may be in the appropriate Butrans range, whereas others may be better suited for OxyContin if appropriate. Dr Ortega said he does plan to switch some of those patients as they start to come to him regularly. He said he will give them Butrans or OxyContin, depending on what they are already on.á
PPLPMDL0020000001	Euclid	OH	44132	5/8/2012	Doc said that today is his last day with the Medical Care Group. áHe said he does not know what he will be doing or where he will be going. áI just asked him to keep butrans and oxycontin in mind wherever he ends up practicing. He thanked me for coming to his office.á
PPLPMDL0020000001					

PPLPMDL0020000001	Cleveland Parma	OH OH	44195 44134	5/8/2012 5/8/2012	worked apm,neuro,chronic pain,rheumatology-left info for HCP's Spoke with technician & showed information sheets on Butrans trial/savings program & OxyContin savings cards. Discussed eligibility requirements for both programs. She said she does enter savings card information into their system sometimes. Let her know the monthly savings with Butrans should come off automatically through their e-voucher system but that customers would need to have the trial card to get that savings. Also let her know OxyContin cards can be used every 14 days if the prescription is written that way.
PPLPMDL0020000001	Cleveland	OH	44130	5/8/2012	Quick call- Reminded Dr Diab of favorable broad formulary coverage of OxyContin, including Medicare plans. He just said that was good then walked into a room.
PPLPMDL0020000001	Cleveland	OH	44113	5/8/2012	dr said he gave a couple Butrans patient info booklets out this week to some patients he feels need to start on Butrans but patient were resistant so he gave them booklets to read and is following up in 1 week. asked dr what patients were resistant to? dr said the fact Butrans is a patch and patients get nervous if the patch will control pain for the week. I asked dr if he discussed the fact that patients can still take their short-acting opioids with Butrans? dr said no he didnt tell them that. showed dr Butrans initiation guide, we discussed initiation of Butrans and giving short-acting opioid for supplemental analgesia. I asked dr if he will discuss this with a couple patients this week and start them on Butrans? dr said yes he will. focused dr on PA criteria for Caresource patients, asked for dr commitment to start 2 patients on Butrans this week, dr said he will. recommended Senokot-5 Quick call- Dr Fedorko said he just prescribed Butrans yesterday for a patient. I asked him to tell me more about the patient & why he chose Butrans. He said he started the patient on 10mcg. He then said he couldn't remember other details about the patient & he didn't have time. He then walked into a room.
PPLPMDL0020000001	Cleveland	OH	44130	5/8/2012	Spoke with David, pharmacy manager, who said he was in a rush today. He said he has not seen a lot of Butrans activity but he knows they have at least one person, maybe two on it. Discussed savings for Butrans & OxyContin & gave him information on web educational resources. He said he would make sure each of his pharmacists got a copy.
PPLPMDL0020000001	Brooklyn	OH	44144	5/8/2012	Dr told me that Butrans continues to work well, he likes it as an option and has only been prescribing nycynta and Butrans. I reviewed the month trial and I asked if he would let patients try Butrans first, he agreed. I asked dr his thoughts on where Butrans is fitting into his practice, he said most of his patients that could benefit are older or Medicaid and it's not covered. I let him know that it is covered on most plans for patients younger than 65 years old who are taking tramadol around the clock. He agreed to try it. I reviewed the trial cards with Juan.
PPLPMDL0020000001	Westlake	OH	44145	5/8/2012	worked main campus - fam med, internal med, neurology and rheumatology dept's-left info on Butrans and OxyContin for each HCP in dept; worked metro broadway location-left Butrans fpi, initiation guide, patient info booklet, formulary grid, patient savings card flashcard and my business card for every HCP in express care office and internal med office.
PPLPMDL0020000001	Westlake	OH	44109	5/8/2012	Spoke with Caitlyn, I asked if she knew how their Butrans patients were doing. She said she has not heard much, and thinks that Dr Nair has one patient on Butrans. We reviewed the Butrans savings cards and month trial, she will make sure Dr Nair has all the details.
PPLPMDL0020000001	Westlake	OH	44145	5/8/2012	I reviewed our last conversation about Butrans for patients older patients, I asked if he would use Butrans for patients under 65 years old for those same reasons, he said that he does, more of his patients and those with chronic pain tend to be older. I asked if he would give the trial cards out today for patients to try Butrans and he agreed.
PPLPMDL0020000001	Tallmadge	OH	44278	5/8/2012	Spoke to Ryan and he said he was filling in but was very familiar with Butrans, he is from N Canton. HE said they were stocking Butrans here and seemed to be moving it but could not be specific. I let him know about express scripts. HE said they do move some Oxycontin but mainly regulars. Reminded of SenS in opioid induced constipation
PPLPMDL0020000001	Akron	OH	44305	5/8/2012	Asked Dr Vora how the nursing home patient is doing on Butrans? dr said the patient is continuing to do quite well on Butrans. Asked Dr if he has patients that are on tramadol or vicodin around the clock that would be good candidates for Butrans. dr said he has a lot of patients on both of those products and that he has a lot of patients in pain. I asked dr to use Butrans for those patients to provide them with a controlled release patch for moderate to severe pain. I mentioned to dr that Butrans patients can still use short acting products for supplemental analgesia. dr agreed that he has patients for Butrans.
PPLPMDL0020000001	Tallmadge	OH	44278	5/8/2012	Introduced Butrans, reviewed dosing, indication, delivery system, 5 core messages and warnings. He said he traditionally starts tramadol then Vicodin then ES and so forth unless it is a disease state like spinal stenosis or OA where he knows it will progress he will write a long acting. HE said he likes the fact that it is schedule 3. I asked if he can think of patients who would benefit and he said yes. He asked about the price and coverage and he said he thinks it is a reasonable price to pay. HE said he would definitely write it. HE asked about Oxycontin and if generics are still available and I told him no and asked why and he said he was just confused on what was going on with that. I said it is a nice option for his patients after Butran and he said he does write some Oxycontin low dose but not alot. I reviewed managed care with Oxycontin as well. I talked to Stan, Pharmacist, briefly about Butrans and OxyContin stocking, asked Stan if he knows who's prescribing Butrans. Stan didnt know and no time to look up in computer, he asked me to come back later in week and talk to Curt about this we discussed initiation, titration of Butrans and showed patient info booklet. asked Stan if he will give patient info booklets to patients that get their Butrans scripts here? Stan said yes he will do that. showed formulary grid, we discussed BWC and Caresource PA criteria too. asked Stan about OxyContin writers in hospital, Stan said various HCP's prescribe OxyContin and he doesnt know specific names. showed conversion guide, we discussed 7 tab strengths and Q12H dosing and showed formulary grid-focus was on med part d patients and commercial insurance patients starting on OxyContin. recommended Senokot-5
PPLPMDL0020000001	Akron	OH	44310	5/8/2012	Asked Dr Cremer about his recent usage. ASKed him where he is seeing his success and at what point in his treatment of pain is he using Butrans. dr Cremer said he is seeing good success with Butrans and pain scores have lowered for patients on Butrans. dr is using Butrans in place of percocet and his most common dose is 10mcg. I asked dr if he is titrating through to the 20mcg and he admitted to doing so but not for all his patients. dr Cremer admitted to ensuring he is under the 50% rule for chronic pain medicine and that it is a little limiting on prescribing. Dr said he will continue to find the place for Butrans. I asked dr to continue to use Butrans and asked for his commitment.
PPLPMDL0020000001	Cleveland	OH	44113	5/8/2012	showed Greta the patient profile, emma, asked if she see's patients like this? Greta said yes they have a lot of patients taking tramadol for chronic pain. asked Greta how she would treat this patient? Greta said probably another short-acting opioid. asked Greta why another short-acting opioid when treating a chronic pain condition? Greta said its how she's been trained. Greta said she's not opposed to a long-acting opioid like Butrans that's transdermal but she needs to discuss with dr elbadaway as she's doing her clinicals here and works with him on all medication choices for patients in his practice. told Greta I understood that and we talked about initiation and titration of Butrans, showed patient info booklet and discussed PA criteria for Caresource patients starting on Butrans. asked Greta if she will start 1 patient on Butrans this week? Greta said she will talk to dr and see what he says and if appropriate they will start a patient on Butrans. recommended Senokot-5
PPLPMDL0020000001	Tallmadge	OH	44278	5/8/2012	Introduced Butrans, reviewed indication, dosing, Titration, application, delivery system, warnings and 5 core messages. He asked about tapering he was confused and I reviewed that. HE said he likes this and seemed excited for it. I reviewed managed care and trial cards. HE asked about medicare and I said no, only Express scripts but he has option of Oxycontin low dose and I reviewed managed care.
PPLPMDL0020000001	Westlake	OH	44145	5/8/2012	Dr said he is not taking any new pain patients or starting any new patients on OxyContin. I discussed adding up the total daily dose of oxycodone that patients are taking and switching them to Q12hr OxyContin and he can choose to taper down their total daily dose. HE said he will consider doing that for some patients. We discussed Butrans as an option for those patients taking tramadol or low dose vicodin and giving them Butrans as a option or they will be referred to pain management. We reviewed managed care for Butrans and he thinks he may have a few BWC patients where he can try Butrans.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	5/8/2012	Discussed Butrans and OxyContin with Ashley(pharmacist). Asked Ashley if pharmacy currently stocked Butrans. AShe said that they did at one time but do not now. AShe may have returned due to no prescriptions. ASheley knew about Butrans and had to take a quiz from pharmacy. I discussed indication, 7 day transdermal patch, and application sites. ASheley has not had any prescriptions of Butrans. ASheley asked Ashley about the doses stocked of OxyContin. ASheley stocks 60's and 80mg. ASheley reviewed dosing and conversion guide.
PPLPMDL0020000001	Richmond Heights	OH	44143	5/8/2012	I reviewed the butrans key selling messages. AShe said the problem is coverage. She has a patient that would be perfect for it but he has medicare. AI asked her if that meant she sees merit to a product like butrans. AShe said sure but cost is important. AI showed her the commercial coverage and the savings cards asking her to focus on commercially insured patients. AProvided savings cards and initiation tool.
PPLPMDL0020000001	Waterford	OH	45786	5/9/2012	W - Vickie said that she has a few patients that has had success with Butrans, but due to formulary coverage was unable to stay on Butrans. She said that she will continue to utilize Butrans when patients could benefit from an extended release product. I - Butrans for appropriate patient conversions from tramadol or hydrocodone requesting a therapeutic change. Review of appropriate starting doses depending on patients current therapy. Use of patient profiler to discuss examples of potential patients for Butrans. Review of formulary coverage and savings card program.
PPLPMDL0020000001	Waterford	OH	45786	5/9/2012	W - Has had a few successes with Butrans and will continue to prescribe for patients when patients are no longer controlled by short acting medication. Likes having a long acting CIII option. I - Butrans for appropriate patient conversions from tramadol or hydrocodone requesting a therapeutic change. Review of appropriate starting doses depending on patients current therapy. Use of patient profiler to discuss examples of potential patients for Butrans. Review of formulary coverage and savings card program.
PPLPMDL0020000001	Waterford	OH	45786	5/9/2012	W - Waters continues to prescribe OxyContin and has had success with Butrans. He shared that formulary coverage may have been a problem with a couple of patients. Emily, support staff who does prior authorizations, said that she has been able to get approval on Molina with Butrans and couldn't remember any other issues concerning denials of formulary. Waters said he will continue to prescribe both Butrans and OxyContin when appropriate. I - Review of OxyContin for appropriate patient conversions from percocet when the indication is met. Discussion of q12h dosing with 7 dosing strengths. Butrans for appropriate patient conversions from tramadol or hydrocodone requesting a therapeutic change. Review of appropriate starting doses depending on patients current therapy. Use of patient profiler to discuss examples of potential patients for Butrans. Review of formulary coverage and savings card programs for both products.
PPLPMDL0020000001	Cleveland	OH	44104	5/9/2012	dr said she's been talking to patients about Butrans, giving patient info booklets to them but patients aren't willing to wear a patch, dr said she's following up with a few patients in next week or 2 and will see what happens. told dr im happy to hear she's at least talking to patients about Butrans, asked dr if she explained to patients that when they start Butrans she can still give them short-acting opioid for supplemental? dr said she really doesn't want to give both but will if she has to, dr said she's trying to get patients off percocet. I asked dr if she will talk to 1 patient this week yet start the patient on Butrans? dr said yes.
PPLPMDL0020000001	Cleveland	OH	44106	5/9/2012	talked to matthew, pharmacist, about Butrans 6 core selling messages. Matthew said I need to talk to Steve, Pharmacy mgr about Butrans stocking because they haven't seen any Rx and he doesn't have Butrans in stock. we discussed importance of stocking and I told Matthew I would follow-up with Steve next week. showed initiation guide, we discussed appropriate opioid experienced patients starting on Butrans, titration, showed patient info booklet and asked Matthew if he would give patient info booklets to any patients that he feels are ready for a long-acting opioid, through his med mgmt discussions with patients, so they can talk to their HCP's about Butrans? Matthew said he will do that. we discussed formulary coverage for Butrans. confirmed OxyContin stocking, showed conversion guide and discussed a few examples of short-acting opioids like hydrocodone and oxycodone conversion to OxyContin. Matthew said he doesn't recommend OxyContin to patients, that's up to HCP's. we discussed med part d and commercial insurance coverage for OxyContin. recommended Senokot-5
PPLPMDL0020000001	Copley	OH	44321	5/9/2012	Asked dr where he sees Butrans fitting in his practice? Dr said that he had used it early after Ultram in patients in pain for 3 to 6 months. Asked dr if those patients had improved analgesia? Dr said they did but insurance kept them from staying on Butrans. Reminded Dr about the patient we are focusing on. Patients under 65, currently have insurance through their employer, and may be ready for a dose adjustment or failing their current therapy. Asked dr if that patient sounds like the patient he sees. Dr agreed. nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44106	5/9/2012	showed dr OxyContin visual aid, discussed appropriate patients, dr said he writes a lot of OxyContin, feels very comfortable prescribing, titrating and no issues with coverage. told dr that was great to hear and appreciated his continued business with OxyContin. asked dr how his patients are doing on OxyContin? dr said no complaints, he starts them on low doses usually, 10mg or 20mg and will titrate from there. showed dr conversion guide and visual aid discussed 7 tablet strengths of OxyContin. asked dr if he will continue prescribing OxyContin and starting new patients? dr said yes he will. showed formulary grid-focus was on med part d patients. dr asked about Butrans, the starting doses for patients. showed dr initiation guide, we discussed initiation and titration of Butrans. I asked dr if he has any patients taking tramadol that he feels could be appropriate for Butrans? dr said yes, dr said he started 1 patient on Butrans he just needs to remember Butrans dr said he will start more patients on Butrans.
PPLPMDL0020000001	Cleveland	OH	44106	5/9/2012	talked to Margie, pharmacy supervisor, about Butrans stocking. Margie said unfortunately the return guy just took the Butrans as its been on the shelf since last January and not filled. I asked Margie if she's had any Rx for Butrans? Margie said 1 Rx last 12/2011, from Elias, apm fellow and Marissa, apm fellow in 4/2012, there was another Butrans rx this year but she doesn't know from who and the Rx was denied as a PA was required. Margie said she doesn't get it, why HCP's aren't prescribing more Butrans as its a great option for chronic pain patients. showed Margie Butrans initiation guide, told her I appreciated her ordering Butrans last year and keeping it in stock and told her what im discussing with HCP's- focusing on appropriate patients, initiation, titration, formulary coverage, etc.. Margie said she will wait to re-order Butrans until she see's more Rx.
PPLPMDL0020000001					



PPLPMDL0020000001	Cleveland	OH	44104	5/9/2012	showed dr OxyContin visual aid,discussed appropriate patients,dr said he's not starting anyone new on OxyContin or percocet.talked to dr about starting patients over 65yrs old,on OxyContin,showed conversion guide and asked dr if he would do this? dr said he might start some elderly patients on OxyContin but none else.dr said he will start other patients on Butrans,showed dr initiation guide and discussed initiation and titration of Butrans,asked dr if he will start 1 patient on Butrans this week? dr said yes.recommended Senokot-5
PPLPMDL0020000001	Westlake	OH	44145	5/9/2012	Dr said he wants to try Butrans more often, but patients don't want a patch. We discussed the appropriate patients for Butrans and he said so many are on higher doses of opioids. We reviewed OxyContin as an option and he said he's trying not to start any new patients on OxyContin, just maintain them.
PPLPMDL0020000001	Parma	OH	44129	5/9/2012	Dr Chagin had a PA student with him & asked me to go over Butrans with them. Delivered core messages & spent time going over the appropriate patient type. I asked Dr Chagin what his experience has been like with Butrans- are the patients he put on it still taking it. He said they must be because they haven't called to say they stopped. I asked him to prescribe Butrans for patients who are not well-controlled on tramadol or Vicodin 3 times per day. I asked him to initiate Butrans instead of increasing the dose of short-acting medication for the patient if/when they need a medication adjustment. He said this makes sense. Showed demo patch & discussed application sites/rotation & skin preparation. Also demonstrated disposal unit. Lynn asked what the quantity limit is for prescribing. I showed her the example prescription & told her the patient would receive 4 Butrans in the package. Also warned that patients should only wear one at a time. Discussed focusing on commercially insured patients who can take advantage of the trial & savings program. Dr Chagin told me he is going to start using a lot of Butrans & he discussed specific patients with Lynn & Debbie. Showed OxyContin conversion guide & showed the conversion ratio page. Dr Chagin said it is somewhat surprising. Showed examples of appropriate OxyContin doses depending on what dose of short-acting the patient is on. He said the guide is useful. Discussed OxyContin q12h as an option for appropriate patients beyond Butrans
PPLPMDL0020000001	Warrensville Heights	OH	44122	5/9/2012	I asked Dr Zivic if patients are always on Percocet before he switches them to OxyContin or if he ever takes someone from Vicodin to OxyContin. He said it all depends on the patient & that he does sometimes switch from medications other than Percocet to OxyContin. He added that sometimes patients aren't even on a short-acting opioid before he initiates OxyContin. I asked what other therapies they might be on prior to initiating OxyContin. He said sometimes NSAID's, sometimes NSAID's plus tramadol. I asked if he finds that he writes mostly the lower doses of OxyContin such as 10 & 20mg. He said yes. I reminded him of intermediate strengths like 15mg also. He said he finds OxyContin to be a good option & that he actually chooses OxyContin more than any of the other long-acting options or "competitors". I asked him to continue to identify appropriate patients for OxyContin & he agreed. I asked what he thinks the main reason is for him not trying Butrans- I asked if it is simply an issue of managed care coverage or if there was something else. He asked what type of patient he should use it for. Discussed appropriate patient type & range. He said sometimes patients do not like transdermal systems & he thinks the older patients would really be the ones most receptive to it, unfortunately. I asked if his younger patients ever complain about the amount of oral medications they take for pain control. He said surprisingly, they really do not.
PPLPMDL0020000001	Akron	OH	44313	5/9/2012	Asked if pharmacy is stocking Butrans. Pharmacy is not stocking. Asked about OxyContin stocking. Pharmacy is stocking OxyContin and gave doses. Was told they didn't have time to talk and to leave information. Gave Butrans indications and CIL. Nothing else learned.
PPLPMDL0020000001	Akron	OH	44308	5/9/2012	Based on schedule conflicts with Buckeye Health, rescheduled webinar from 5/9/12 to 5/22/12. Emailed invitation for new webinar date of 5/22/12. Attachments included the handout and eval form. Akron, Toledo and Cleveland Buckeye Health locations invited to the webinar.->Handout was sent as a PDF file, 3 slides per page.
PPLPMDL0020000001	Lakewood	OH	44107	5/9/2012	Based on schedule conflicts with Buckeye Health, rescheduled webinar from 5/9/12 to 5/22/12. Emailed invitation for new webinar date of 5/22/12. Attachments included the handout and eval form. Akron, Toledo and Cleveland Buckeye Health locations invited to the webinar.->Handout sent as PDF file, 3 slides per page.
PPLPMDL0020000001	Cleveland	OH	44113	5/9/2012	talked to dr about the patients she's starting on Butrans,dr said patients are taking 1 of the short-acting opioids:vicodin,percocet or tylenol with codeine,for chronic pain,not controlled and she tells them Butrans is the next option.dr said as long as Caresource keeps approving the PA for Butrans she will continue starting patients.i asked dr for her commitment to start a couple more patients this week on Butrans,dr said she will do that.
PPLPMDL0020000001	Cleveland	OH	44109	5/9/2012	worked fam med - left Butrans and OxyContin approved promo items for each HCP in the dept-no access HCP's
PPLPMDL0020000001	Bedford	OH	44146	5/9/2012	Dr Moulfawad said he didn't have time to stop & talk today. He said he doesn't have anything new to report with Butrans & that he is still using it. I asked him to continue to identify more appropriate Butrans patients as well as appropriate OxyContin patients & he agreed.
PPLPMDL0020000001	Maple Heights	OH	44137	5/9/2012	Spoke with floater pharmacist & reviewed Butrans dosing. Showed FPI 2.4 & discussed ability for patients to take supplemental analgesia if necessary. Reviewed trial/savings program for Butrans, including automatic monthly savings through e-voucher for Rite Aid customers. Showed information on OxyContin savings program & reviewed the details of the program with him. He said he would leave my information for the regular pharmacist.
PPLPMDL0020000001	Cleveland	OH	44106	5/9/2012	dr said he's had 2 patients, 1 male and 1 female,tell him Butrans didnt stick to the skin.dr said female patient worked in a greenhouse and sweat a lot so that was the reason her Butrans didnt stick and male patient worked in construction sweating a lot so Butrans wouldnt stick.i asked dr if patients tried first aid tape or a dressing over Butrans? dr said yes patients tried both and nothing helped to keep Butrans sticking to skin.asked dr if this will prevent him from prescribing more Butrans? dr said no.dr said he likes that Butrans is transdermal and once weekly dosing.dr said he has a lot of rehab patients who take vicodin or percocet daily for chronic pain.dr said he's thinking of Butrans when patients tell him their pain is worse and pills arent controlling the pain.asked dr if there's anything preventing him from prescribing more Butrans today and next week? dr said no he will.dr said the only drawback has been medicaid coverage,we discussed PA criteria for Caresource patients and i asked dr if this was feasible? dr said yes it is and he will start more patients on Butrans.
PPLPMDL0020000001	Cleveland	OH	44114	5/9/2012	showed John,william,patient profile,asked how often he see's patients like this? John said every day,John said they have a lot of patients taking vicodin that are always asking for more pills because their pain is worsening.i asked John if he would consider Butrans for patients like this? John said yes and he's been doing that.asked John for his continued commitment to start patients on Butrans,John said he will do that.recommended Senokot-5
PPLPMDL0020000001	Cleveland	OH	44106	5/9/2012	worked apm dept-lunch with HCP's,called on Butrans,dr said patients are taking 1 of the short-acting opioids:vicodin,percocet or tylenol with codeine,for chronic pain,not controlled and she tells them Butrans is the next option.dr said as long as Caresource keeps approving the PA for Butrans she will continue starting patients.i asked dr for her commitment to start a couple more patients this week on Butrans,dr said she will do that.
PPLPMDL0020000001	Akron	OH	44313	5/9/2012	Caught dr at window and asked him if he is continuing to use OxyContin for his patients with moderate to severe pain? Dr said they are doing well. Reminded dr of 7 doses and asked him to remember the 10mg dose. Dr said ok. Handed dr the Butrans titration guide. Gave indication, 7 day transdermal system, and CIL. Asked dr if he is ok with patch technology. Dr said he does use Fentanyl patch and is ok with it. Asked dr to review information and told him about the Caresource PA and commercial coverage information.
PPLPMDL0020000001	Cleveland	OH	44114	5/9/2012	showed dr william,patient profile,asked dr if she see's patients like this? dr said yes,asked whats the next step in therapy for these patients? dr said depends on patient,dr said some patients like william might get a refill of vicodin,depends on patients reaction to her discussing Butrans with them.dr said if patients are open to trying a patch,with her giving them some vicodin for supplemental analgesia,then she would start them on Butrans.we discussed initiation and titration of Butrans and i asked dr if she will start a couple new patients on Butrans this week,looking like william? dr said yes she will.
PPLPMDL0020000001	Cleveland	OH	44106	5/9/2012	asked dr how Butrans is fitting into his practice? dr said he's not started anyone on Butrans recently,dr said his concern is medicaid coverage as there's so much medicaid here at main campus.asked dr if there is a patient he has in mind that he wants to start on Butrans? dr said no he just wants to know insurance coverage for medicaid patients and Butrans.we discussed PA criteria for Caresource patients,asked dr if that was feasible? dr said yes.asked dr if there was anything else holding him back from prescribing Butrans? dr said no.dr said he likes that Butrans is once weekly dosing and transdermal.dr said he will talk to a couple patients and see what happens we discussed initiation,titration of Butrans,showed patient info booklet and discussed application/rotation info with dr.asked dr if he will start 1 patient on Butrans this week? dr said yes.
PPLPMDL0020000001	Cleveland	OH	44114	5/9/2012	showed dr William,patient profile,asked if he see's patients like this? dr said yes every day.asked whats typically the next step? dr said in the past he would have refilled vicodin or increased dosage strength but now that Butrans is available,he starts patients like this on Butrans.we discussed initiation and titration of Butrans and i asked dr if he will start a couple patients this week,like william/patient profile,on Butrans? dr said yes he will.recommended Senokot-5.
PPLPMDL0020000001	Cleveland	OH	44106	5/9/2012	showed dr patient profile,emma,dr said he has a couple patients taking tramadol but none thats ready for a long-acting opioid like Butrans.dr said he performs a lot of procedures and patients do fine with tramadol,dr said he appreciates info but at this time doesnt have anyone appropriate for Butrans.gave dr initiation guide,briefly discussed initiation and titration of Butrans and asked dr to consider Butrans for any of his patients that take tramadol but at some point need a medication adjustment.dr said ok he will keep it in mind.
PPLPMDL0020000001	Beachwood	OH	44122	5/9/2012	Quick call- Caught Roberta at the window. Reviewed Butrans dosing & titration to a maximum of 20mcg/hr. Also reminded her that patients can take supplemental analgesia with Butrans if needed. She thanked me & walked away.
PPLPMDL0020000001	Cleveland	OH	44106	5/9/2012	dr said she started 1 patient on Butrans last week,told dr that was great to hear and asked dr to share with me why she chose Butrans and tell me about the patient,dr said patient was taking tramadol every day,pain was persisting and dr wanted to try Butrans instead of refilling or giving more tramadol.asked dr what dosage strength of Butrans she started the patient on? dr said 5mcg,showed dr initiation guide,we discussed initiation and titration of Butrans and asked dr if she will start more patients on Butrans like the 1 she started? dr said yes.we discussed PA criteria for Caresource patients and commercial insurance patients starting on Butrans.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/9/2012	Gave full overview of Butrans, OxyContin and OTC products. Provided Butrans key selling messages as well as patients that are appropriate and NOT appropriate for Butrans. Provided placebo patch and discussed trial offer and copay cards. Asked dr if she has patients in her practice that would be appropriate for Butrans. Dr said that she does have patients that would fit however she typically refers out if a patient needs to go beyond 2 pills a day of vicoden. Dr said she likes Butrans as a long acting option for patients prior to pain management. Explained OxyContin dosing and conversion guide and main vial used with patient selection. Dr said she does not use OxyContin and claimed there is not much need in her practice.Explained product further and dr said that she refers out way before OxyContin. Dr wanted OTC samples for her patients.
PPLPMDL0020000001	Akron	OH	44308	5/9/2012	Introduced the RxSafety Matters packet to her. She was impressed with Purdue's support for Rx drug abuse. She especially liked the Time to Act and Time to Get Help hotline for people to call. She has worked in Drug abuse centers before so she was aware of the second of the ASAP program we re-scheduled for May 22. She intends to instruct her Team to participate in the webinar.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/9/2012	Gave dr Crawford all key selling messages for Butrans, OxyContin and OTC medicines. Explained patch technology with Butrans and that it is the first and only CIL, 7 day transdermal patch for moderate to severe patients. Dr said that he sees where Butrans is appropriate and said that he sees himself using it when he knows the patient is in chronic pain. Dr said the option for placement is clear to him. Discussed OxyContin dosing and conversion. Dr said he has no need to use it in his practice as he refers out early. Dr wanted OTC samples.
PPLPMDL0020000001	Warrensville Heights	OH	44122	5/9/2012	Spoke with Lucy, MA, & reviewed information on Butrans & OxyContin savings programs. She said she doesn't think they have used any of the cards so far & said sometimes they forget they have savings for certain medications. I asked her to give Dr Gulati an OxyContin confident treater leaver & Butrans portal invite. She agreed.
PPLPMDL0020000001	Cleveland	OH	44106	5/9/2012	met dr for the 1st time,she was in OR with attending HCP and only spoke with me for a minute-gave dr Butrans fpi,discussed 6 core selling messages with dr and dr said she liked the idea of a once weekly patch for chronic pain patients.dr said she will look over the info and i can follow-up with her another day.gave dr initiation guide and told her i would see her next week to answer any questions.
PPLPMDL0020000001	Cleveland Hts	OH	44118	5/10/2012	I asked doc about how many express scripts patients he think he has. He said he has some but its not the majority. I let him know that butrans is now being covered 2nd tier on express scripts. He said he tried it for a patient when it was supposed to be 3tier but it didn't go through. I told him that as of 5/1/12 the national plan for express scripts is covering butrans at a preferred tier 2 co pay. Also reminded him that BWC is covering butrans and those patients dont need a savings card.
PPLPMDL0020000001	Cleveland	OH	44106	5/10/2012	discussed with dr PA criteria for Caresource patients as dr said in 2011 that she couldnt prescribe Butrans till we had an easier PA for Caresource.i asked dr if this was reasonable to process this PA now? dr said yes.dr asked me to remind her of indication,appropriate patients,contraindications,dr asked about renal impaired patients-showed Butrans FPI and discussed all of this info.showed dr initiation guide, asked dr where she felt most comfortable starting a couple patients on Butrans? dr said she has a lot of tramadol and some vicodin patients that call every day,every month,saying they ran out of their pills because they are taking too many pills every day.i asked dr what dosage strength of Butrans she saw herself prescribing initially? dr said all of her patients will be started on Butrans 5mcg because she never writes more than 200mg tramadol/daily and most of her vicodin patients are only taking 1-2 tabs/day so the 5mcg Butrans is going to be her starting dose for these patients.we discussed initiation,side effects-i asked dr what if patients call and say they are constipated,dizzy,etc? what would you do? dr said she would treat constipation,if dizziness occurred she would tell patient to wait it out,nausea she would give an anti-nausea medication.told dr that was great she will proactively treat side effects.asked dr if she had a couple patients in mind? dr said yes there were 2 patients she saw yesterday that would have been great to start on Butrans,asked dr if she
PPLPMDL0020000001					

PPLPMDL0020000001	Independence	OH	44131	5/10/2012	Quick call- Caught Dr Reddy at the window. I passed back Butrans portal invite & asked him to log on to learn more about Butrans, a CII opioid analgesic in a transdermal system dosed once weekly. He just waved & walked away. Spoke with Kathi, his MA, & discussed appropriate patient type/range. She said she would try to remind Dr Reddy but he is not always receptive to suggestions.
	Independence	OH	44131	5/10/2012	Dr Pai said he has found himself writing more OxyContin lately. He said he is not sure why he has increased, but he has noticed that. He said his patients are getting better access to OxyContin at pharmacies than he previously reported. I asked Dr Pai if he would continue to prescribe OxyContin for appropriate patients & he agreed. He said his one patient on Butrans is doing well. I asked since he is having good success with Butrans in this patient, what is preventing him from prescribing it more. He said he has no problem with the medication at all & that it is simply a matter of finding the right combination of the right patient with the right insurance. He said the patient he has on it now has Humana Medicare & he had to do a prior authorization. I agreed that Medicare patients may have difficulties accessing Butrans. I asked Dr Pai if he has a patient who he feels truly could benefit from Butrans if he would do a prior authorization if necessary & he said he would.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/10/2012	Discussed appropriate patient for Butrans as discussed on previous calls. Dr said that he does have a patient on vicodin and has been for about a year and has lower back problems and is thinking about Butrans. Told dr that that is great to hear and discussed approximate dosing and that he can continue to use vicodin. Dr said he will need to initiate on 10mcg dose and should be seeing the patient back soon. Left conversion chart and discussed the trial offer and copy card.
PPLPMDL0020000001	Independence	OH	44131	5/10/2012	Dr Sundaram said he just tried to "sell" Butrans two days ago. I asked what he meant. He said he told a patient about it & wrote them a prescription & when the patient found out it was dosed once weekly, she said she didn't want it. I asked what it was about the patient that made him think of Butrans for her. He said he did not want to start her on short-acting opioids around-the-clock & she had good insurance coverage. I asked what this patient's concern was with once weekly dosing. He said she was afraid it would fall off. I assured him that Butrans is designed to stay on for 7 full days. I also told him that everyone is different, & discussed taping the edges with first aid tape or covering with Bioclusive or Tegaderm if there is a problem with adhesion. He said he tried to sell the patient but she wasn't convinced. I gave him patient information booklets & showed him some of the pages. I asked if he thought this would be helpful in "selling" the patients on Butrans. He said it might. I also reminded him of the trial/savings offer where most patients with commercial insurance can try Butrans at no cost for the first 28 days. He said that was a good point. I asked Dr Sundaram what the patient had to risk by simply trying it for those 28 days to see if it really did stay on for the full 7 days. He said nothing. I asked if he would continue to try Butrans for appropriate patients & he agreed to keep trying. Also positioned OxyContin for patients beyond the Butrans range.
PPLPMDL0020000001	Parma	OH	44134	5/10/2012	Quick call- Dr Mandat said he has been using Butrans still with success. He said he didn't have time to talk about specifics today. I gave him Butrans sealed article & asked him to review the information.
PPLPMDL0020000001	Fairview Park	OH	44126	5/10/2012	I asked Dr if he is still having the great results with Butrans that he told me about, he said yes, I asked if he would start more new patients on Butrans who are younger than 65 years old since that will be the best coverage.
PPLPMDL0020000001	Cleveland	OH	44113	5/10/2012	dr said he gave a few patient info booklets to some patients this week that he wants to start on Butrans but didn't start them.told dr im happy to hear he's at least discussing Butrans with patients,but whats preventing him from starting patients? dr said a lot of patients dont want to wear a patch for their chronic pain.we talked about patients starting on Butrans yet still having some short-acting opioid for supplemental analgesia.dr said yes he knows that and will keep talking to patients about Butrans
PPLPMDL0020000001	Cleveland Heights	OH	44118	5/10/2012	Window call....I asked doc about that list of appropriate butrans patients he was keeping - has he had a chance to try any of them. He checked with Jasmine who wrote down 2 names but those patients have not been back in yet. I gave him a dosing tool and reminded him of the 5 and 10mcg starting dose.
PPLPMDL0020000001	Westlake	OH	44145	5/10/2012	I reviewed that OxyContin is an option for Med D patients and let him know that OxyContin had been studied in geriatric patients ages 65 and 75 and older. I asked if he would use low dose OxyContin as an option instead of hydrocodone around the clock and he agreed. We reviewed where Butrans may be an option for patients who are taking tramadol around the clock. He said he would like to try it for these types of patients. We reviewed the pull out tool and how to initiate patients. I asked if he would try Butrans for patients taking tramadol who are younger than 65 years old since they will have the best chance at getting it covered by insurance. He agreed to try Butrans for these patient types.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	5/10/2012	Asked Amy if she has seen any Butrans prescriptions come through the pharmacy. Amy looked and has not seen any and does not have it in stock. She said that a CII will usually be ordered when prescription comes through. Gave Amy an overview of the product, doses, 7 day transdermal patch and showed application sites with patient information sites. Asked about OxyContin stocking. Amy is stocking a few doses and admitted they are not seeing as much prescriptions since the reformulation. Gave the conversion guide.
PPLPMDL0020000001	Independence	OH	44131	5/10/2012	Spoke with pharmacist, Dave, & gave him information on RxPatrol. Discussed how he can use this program to help protect his pharmacy & staff. He said he would log on to check it out, although they do not stock a lot of pain medications at this location. He said he has not seen any activity for Butrans & will order it if he sees a prescription. He said he has only a few customers on OxyContin.
PPLPMDL0020000001	Westlake	OH	44145	5/10/2012	I asked Dr if he will ever try Butrans and he said yes, I asked if he sees patients who are taking tramadol around the clock and he said yes, I let him know that these patients would be appropriate for Butrans. He said that he will try it. He asked about the dosing and we discussed the pull out tool and how to initiate patients. We reviewed the managed care and month trial. He agreed to give it a try in a few patients. I reminded him that OxyContin is an option for those patients taking hydrocodone around the clock and that it is also covered on Med D plans.
PPLPMDL0020000001	Parma	OH	44134	5/10/2012	Dr Hernandez said his Butrans are very happy & he is still having success with it. He said he almost always doses at 20mcg, two patches per week. I reminded him that that is not consistent with our FPI labeling & that 20mcg & one patch at a time are the maximums recommended. He said he sometimes has to talk to pharmacists to explain his writing because they see the maximum recommended dose in their computer. He said he explains to the pharmacists that when he writes Suboxone, patients get much more buprenorphine than in two 20mcg Butrans. I told him again that that is not recommended. He said he knows. Suggested he use Butrans for patients who are taking low doses of short-acting opioids who may benefit from once weekly transdermal dosing. He said he does use it in those patients also & will continue to. OxyContin broad formulary coverage reminder message.
PPLPMDL0020000001	Mayfield Heights	OH	44124	5/10/2012	Window call.....Showed doc the butrans initiation tool and explained how it might be helpful when deciding what dose a butrans patient should be on. I also reminded him that new commercially insured patients can get a trial offer and up to \$40 off every month. He said sounds good.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/10/2012	Asked dr how his patients are doing on OxyContin and how their pain scales have reduced. Dr said he uses it because it works well to control pain and it is well covered.
PPLPMDL0020000001	Cleveland	OH	44113	5/10/2012	showed dr Butrans visual aid,we discussed opioid experienced patients that would be appropriate for Butrans,dr said he likes Butrans being a transdermal option,likes that its a once weekly dosing option and its a CII so he can write and call-in refills,told dr that was great to hear and asked whats holding him back from starting 1 patient on Butrans? dr said he doesnt have a lot of clinical experience prescribing long-acting opioids so he needs to feel comfortable prescribing Butrans,asked dr what he needs from me to feel comfortable so he can start 1 patient? dr said nothing he has all clinical info he needs,he just needs to find 1 patient and start the patient on Butrans,asked dr if he will see 1 patient like william,showed patient profile,today or tomorrow? dr said yes he probably will,asked dr if he will start this 1 patient on Butrans? dr said yes he will,focused dr on commercial insurance patients and discussed use of initial trial offer cards for these patients,dr said ok that helps patients
PPLPMDL0020000001	Cleveland	OH	44113	5/10/2012	talked to deb about starting patients on Butrans and giving short-acting opioid only as supplemental analgesia,deb said she usually adds Butrans to the vicodin as an add-on,we discussed how Deb can start patients on Butrans and only give vicodin or tramadol for supplemental analgesia,i asked deb if she could do that with a couple patients today or tomorrow? deb said yes she will,we discussed PA criteria for Butrans,asked deb if i have her commitment to start more patients on Butrans this week? deb said yes.
PPLPMDL0020000001	Cleveland	OH	44106	5/10/2012	dr walked into lunch,took a plate of food,asked about Butrans indication and if there was a Pediatric indication as he's a Pediatrician.showed dr Butrans FPI,section 8.4, stating there is not and Butrans isnt recommended for use in pediatric patients.dr said ok,took an initiation guide and FPI and left lunch room
PPLPMDL0020000001	Westlake	OH	44145	5/10/2012	I showed OxyContin FPI and that OxyContin has been studied in geriatric patients. We reviewed that OxyContin is covered on Med D plans CCRX and AARP. He said he is still starting patients on OxyContin and they are mostly back pain patients. He said he has not problem prescribing OxyContin for these patients, but Medicaid has been a pain with PAs because they want the patients to try morphine first. He said he is still trying to write for Butrans and he will give it a try.
PPLPMDL0020000001	Mayfield Heights	OH	44124	5/10/2012	Introduced doc to the butrans indication, and other key selling messages. She asked how often the patch is applied. I re-iterated "every 7day". She thinks it would be good for some of her OA patients that have some pain everyday. She wanted the core sales aid as a reference. I gave her the initiation tool instead. I showed the appropriate dosing for opioid naive or low dose opioid patients (which is where she said she would use it). I reviewed the formulary coverage and the lack of medicare coverage and the savings card program. She said she thinks she has a patient she might want to try.
PPLPMDL0020000001	Cleveland	OH	44127	5/10/2012	dr said she started another patient on Butrans,caresource approved PA so she's happy and going to continue starting patients on Butrans.told dr that was great to hear,asked dr what the patient was taking prior to Butrans? dr said patient was taking tylenol with codeine,pain was worsening,and patient wanted more pills but was open to trying Butrans,dr said it was easy to start this patient.we talked about initiation and titration of Butrans and asked dr if she will continue starting more patients on Butrans today and tomorrow? dr said yes she will
PPLPMDL0020000001	Cleveland	OH	44103	5/10/2012	showed dr OxyContin conversion guide,we discussed 7 tab strengths of OxyContin to titrate patients dose,dr said yes she always forgets about 15mg,30mg strengths,we talked about doctors patients taking percocet every day yet still not controlled,asked dr if she would start a couple new patients on OxyContin today or tomorrow? dr said yes she will,we talked about dr starting her 65yrs+patients on OxyContin,we discussed UHC/AARP and CCRX med part d coverage for OxyContin,dr said ok she will keep that in mind.showed dr Butrans initiation guide,asked dr if she's seen any patients this week in the dosage ranges shown for short-acting opioids where patients needed a dosage adjustment? dr said yes every day patients ask for more pills,dr said she is always making adjustments,asked dr if she will start 2 new patients on Butrans in the next week? dr said yes,dr said medicaid was only set back with Butrans but she got a PA approved for a Caresource patient recently so she will start prescribing again,we discussed PA criteria for Caresource patients and Butrans.
PPLPMDL0020000001	Cleveland	OH	44113	5/10/2012	saw dr briefly-dr said he's starting patients on Butrans weekly and they are doing well,showed dr initiation guide,we discussed Butrans initiation dosage strengths and titration and i asked dr for his commitment to continue starting patients on Butrans this week? dr said yes he will.
PPLPMDL0020000001	Mayfield Heights	OH	44124	5/10/2012	I reviewed the Butrans indication, CII status, once weekly dosing with doc and asked her if she would prescribe butrans for a patient failing on their daily dose of tramadol or vicodin. He said she would like to but patients don't want to give up their pills. I told her that they can still take supplemental analgesia, either OTC or short acting tablets. I reviewed the insurance coverage and savings cards program.
PPLPMDL0020000001	Berea	OH	44017	5/10/2012	I asked dr if he would start patients on Butrans who are taking tramadol around the clock instead of going to vicodin. He said that he will. I showed the savings program and asked him to think of those younger patients and give them a card for their month trial.
PPLPMDL0020000001	Lakewood	OH	44107	5/10/2012	Dr said he is trying to remember to try Butrans, he said he just forgets about it with all the things on his plate. We discussed Butrans as an option instead of going to vicodin for younger than 65 patients who are taking tramadol around the clock. He said he will give Butrans a try. Reminder that for his older patients OxyContin was studied in ages 65 and 75 and older and is covered on Medicare.
PPLPMDL0020000001	Mayfield Heights	OH	44124	5/10/2012	Spoke to Marcia about the butrans indication and other selling messages. I explained the helpfulness of the patient info guides to for customers who may have questions about how to apply and rotate the patch. She liked them and thought it easier than trying to explain it to them. Provided same.
PPLPMDL0020000001	Highland Heights	OH	44143	5/10/2012	I asked doc what kind of results he is getting with butrans. He said he is prescribing it but will be able to prescribe it more once it is on medicare. That is where he wants to positioning butrans. He realizes that it takes time. He said it seems that butrans works well for females who seem like being on the patch. I asked if the patch is not working for males. He said that females are just more receptive to it and he thinks men tend to need something stronger. He is overall please with butrans. I reviewed the appropriate starting doses and asked him to continue to prescribe butrans for the right patient. I explained the proper application and the usefulness of the patient info guides. He said he has not had any issue with that.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/10/2012	Discussed Rx patrol with staff and also gave additional information about Butrans clinical studies. Discussed what I am speaking to customers about and where Butrans should be placed. Gave OxyContin conversion guides.

	Brooklyn	OH	44144	5/11/2012	Dr Charles asked me to review Butrans with him because he had forgotten the details. Delivered core messages & discussed appropriate patient type & range. Positioned Butrans once weekly for appropriate patients who are taking a low dose (around 3) tramadol or Vicodin per day for a chronically painful condition such as osteoarthritis or low back pain from spinal stenosis. I asked if he has patients like this. He said yes. Showed initiation guide & discussed dosing, titration, & supplemental analgesia. Discussed Butrans as the only long-acting CIII opioid analgesic & advised that it carries abuse & addiction potential. He said it is a good option for that type of patient & he will keep it in mind although he does not treat a lot of pain. I told him I understand that he may not have a lot of patients & asked him to think of just one or two. Discussed OxyContin q12h as an option for appropriate patients beyond the Butrans range. He said he does think it is a good medication for the right people, but that a few bad people have spoiled it for everyone. I agreed that appropriate patient selection can be difficult & advised that he remain cautious in prescribing all opioids.
PPLPMDL0020000001	Akron	OH	44333	5/11/2012	Discussed OxyContin and Butrans in depth. Reviewed appropriate patient types for OxyContin as well as dosing and conversions. Dr said he uses OxyContin on a regular basis and has seen great success clinically. Dr said he has used it after vicoden and percocet and that it works well for severe pain. Dr said he likes the Q@12h dosing compared to the short acting products. Asked dr if he will use OxyContin instead of the Q4 toQ6 percocet when appropriate. Dr said he does use it in that location. Asked dr to continue using OxyContin more frequently when patients are in severe pain. Reviewed Butrans key selling messages and proper placement. Discussed case study patients and dr said he has patients on both NSAIDs and Ultram ATC and he thinks Butrans is a good option as a controlled release product. I asked dr why he has not used it in over a year. Dr claimed that he forgot about it since there hasn't been any Purdue representation. Discussed managed care and patient copay cards and trial offer. Asked dr if he will try it again clinically and he said he would.
PPLPMDL0020000001	Brooklyn	OH	44144	5/11/2012	Quick call as Dr Keith was on his way out. Positioned Butrans once weekly transdermal system for appropriate patients taking less than 80mg equivalent oral morphine per day & OxyContin q12h as an option for those taking more than 80mg equivalent oral morphine per day. Dr Keith thanked me for the information & left.
PPLPMDL0020000001	Lyndhurst	OH	44124	5/11/2012	Office was busy. I showed HCP the patient profile of Emma and reminded her that this patient type would likely start on the 5mcg. I reminded her to give appropriate patients a savings card and a patient info booklet.
PPLPMDL0020000001	Beachwood	OH	44122	5/11/2012	Dr Tabbaa asked that I go over any updates or information about Butrans or OxyContin with Jim, his nurse. He said everything is going fine with both products. Spoke with Jim, who said that the only problems he has had have been with BWC recently with regards to OxyContin. He said he has had to do prior authorizations a few times this week for that. Gave Jim updated formulary grids for both products. Jim said most patients they put on Butrans do like it, however, usually with any transdermal product, patients get tired of using patches. I asked if it is due to skin reactions or something else. He said sometimes they do get skin reactions but also they just tend to get sick of using them & would rather take oral medications. He said the exception to that is older patients. Jim said he will continue to do whatever it takes to get approvals for Butrans & OxyContin for appropriate patients.
PPLPMDL0020000001	Mayfield Heights	OH	44124	5/11/2012	Informed Debbie about the update in coverage with butrans and express scripts now covering butrans at a tier 2 co pay which is more affordable. I asked if she has much express scripts. Se said she thinks so as they see patients with all kinds of plans. She thought that the update was great and just wants to know when medicare will cover it.
PPLPMDL0020000001	Cleveland	OH	44113	5/11/2012	worked pain mgmt dept and premier physician office
PPLPMDL0020000001	Norton	OH	44203	5/11/2012	Spoke with Valerie about Butrans and OxyContin. Explained Butrans CIII, 7 day transdermal patch and gave indication. Asked if the pharmacy has filled Butrans. She said that pharmacy does have three patients on Butrans. All all either the 5 or 10mcg/hr. Asked which drs and she could only remember KR Patel in Barberton. Reviewed patient information guide and application sites. Pharmacy does stock OxyContin and fills it regularly. Explained copay cards and reviewed conversion guide.<font color=blue><b>CHUDAKOB's query on 05/17/2012</b></font>Cliff, while I know what you meant, using verbiage like "major players" in your next call objective can have implications, especially when referring to pain medications. How might you re-phrase this<font color=green><b>REICHCL's response on 05/21/2012</b></font>Is there a way that you might be able to tell me who is prescribing OxyContin in the area<font color=blue><b>CHUDAKOB added notes on 05/31/2012</b></font>Sounds much better.
PPLPMDL0020000001	Chagrin Falls	OH	44023	5/11/2012	Spoke briefly with a male pharmacist (Jeff?) & reviewed Butrans FPI 2.4 & ability for patients to take supplemental analgesia with Butrans. Also discussed trial/savings program & gave him an information sheet on it along with an OxyContin savings card information sheet.
PPLPMDL0020000001	Brooklyn	OH	44144	5/11/2012	Spoke with Gary who said he hasn't seen any movement of Butrans, but he thinks it is largely due to the insurance they see (Medicaid). Discussed Caresource prior authorization requirements. Discussed access on commercial insurance plans. Also discussed OxyContin broad formulary coverage & savings programs for both products.
PPLPMDL0020000001	Cleveland	OH	44109	5/11/2012	showed dr patient profile,william,asked dr if he's treating patients like this? dr said yes and he's started a couple patients like this on Butrans.told dr that was great to hear and asked how his patients are doing on Butrans? dr said patients are doing well,pain is more controlled on Butrans and he's happy with clinical results.asked dr if he will start a couple patients like the one's he's started on Butrans,today and next week?
PPLPMDL0020000001	Chagrin Falls	OH	44022	5/11/2012	Spoke with Lucy, MA, & reviewed Butrans dosing & delivery system. Discussed trial/savings cards for eligible patients. Also discussed OxyContin savings program & asked if they needed any cards. Lucy said they have enough. I asked Lucy to give Dr Hudson the Butrans opioid-experienced backgrounder & OxyContin conversion guide. She agreed.
PPLPMDL0020000001	Cleveland	OH	44109	5/11/2012	dr said he's still starting patients on Butrans,weekly,and its going well,i asked dr what his patients were taking prior to starting Butrans? dr said most patients were on tramadol or vicodin,but pain wasnt controlled,so he talked to them about Butrans,shows patients the booklet and starts them,dr said its easy and out-patient pharmacy has it in stock so no call-backs from pharmacies.i asked dr if he will continue starting more patients on Butrans today and next week? dr said yes he will do that.we briefly discussed PA criteria for Caresource patients,focused dr on commercial insurance patients.
PPLPMDL0020000001	Cleveland	OH	44109	5/11/2012	talked to dr about why he's not started more patients on Butrans,he started 1 patient,dr said he doesn't have a lot of patients asking for a change in their medication so he's not thought of Butrans.showed patient profile emma,asked if he's seeing patients like this? dr said yes he has a handful of patients taking tramadol.asked dr what he does when patients say tramadol isnt controlling pain? dr said usually refill or convert to another short-acting opioid.we discussed dr starting a couple patients like emma,patient profile,on Butrans,instead of doing what he mentioned.i asked dr if he could do this? dr said yes he will,dr asked about medicaid coverage as he has some medicaid patients in mind.talked to dr about PA criteria for Caresource patients,asked if that was feasible? dr said yes and he will do that.
PPLPMDL0020000001	Cleveland	OH	44109	5/11/2012	worked pm&r
PPLPMDL0020000001	Cleveland	OH	44109	5/11/2012	left OxyContin fpi,conversion guide and formulary grids for all HCP's in dept-no see doctors
PPLPMDL0020000001	Brooklyn	OH	44144	5/11/2012	Quick call- Reminded Dr Miguel of his interest in Butrans & positioned Butrans 5mcg once weekly for patients taking Vicodin twice a day, especially if they are not well-controlled on their medication. Also reminded him of OxyContin broad formulary access.
PPLPMDL0020000001	Lyndhurst	OH	44124	5/11/2012	I reviewed the butrans positioning and reminded her of the Emma patient type. I pointed out the patient info guides and asked her to be sure to give one to anyone getting a script for butrans. She agreed that she would.
PPLPMDL0020000001	Lyndhurst	OH	44124	5/11/2012	Doc's office was having a bit of a crisis so didnt get much time. I asked her if she has had an opportunity to prescribe butrans and give a patient info guide along with the scripts. She said she thinks she has just refilled a script but forgot to give a patient info guide.
PPLPMDL0020000001	Mayfield Heights	OH	44124	5/11/2012	Spoke to Christy and Mike about the movement of butrans. They confirmed that they just have one customer on it regularly. There have been no issues with efficacy or cost but they have not seen other scripts recently.
PPLPMDL0020000001	Independence	OH	44131	5/11/2012	They said that oxycontin has been steady - nothing out of the ordinary. Now they are seeing a demand with Opana ER. Provided patient info guides as a reference tool.
PPLPMDL0020000001	Uniontown	OH	44685	5/11/2012	Quick call- Dr Jack said he is still "thinking" of "my medicine". I asked him what it is called. He said "Butrans". I asked if he had thought of any patients for it while he has been thinking of it. He said not yet & then walked into a room.
PPLPMDL0020000001	Westlake	OH	44145	5/11/2012	spoke with dr through window and asked about additional patients such as his last that he used Butrans for? Dr said that he has not. Asked how the patient is doing on Butrans. Dr said he has not had a follow up yet and he will let me know. nothing else learned.
PPLPMDL0020000001					I asked Dr if he had stared any new Butrans patients recently, he said he has, I asked him why he decided to try them on Butrans and he said they were taking vicodin around the clock, I reviewed the pull out tool and that that patients taking more than 40mg of hydrocodone per day may not get adequate analgesia from Butrans and he said Ok, I asked if he would try Butrans on patients younger than 65 and taking tramadol or low dose vicodin and he agreed. Reminder that OxyContin may be an option for patients taking 10mg vicodin around the clock.
PPLPMDL0020000001	Brooklyn	OH	44144	5/11/2012	Quick call- Showed Dr Detwiler 7 OxyContin tablet strengths & pointed out the intermediate doses. I also pointed out that titration ability is every 1-2 days. Showed him OxyContin savings cards & let him know eligible patients could save \$70 per month with the card. He said that is helpful since OxyContin is not generic. Reminder message for Butrans as a once weekly transdermal system.
PPLPMDL0020000001	Cleveland	OH	44113	5/11/2012	talked to dr about patients she's seen this week that look like emma and if she's considered Butrans for any patients,dr said she hasnt started anyone but gave a couple patient info booklets to patients and will follow-up.showed initiation guide,we discussed initiation and titration of Butrans and discussed commercial insurance patients starting on Butrans using the initial trial offer cards.dr said ok.asked dr if she can start 1 patient between today and next week? dr said she didnt know who will come in,but will keep Butrans in mind as an option
PPLPMDL0020000001	Cleveland	OH	44113	5/11/2012	dr said he has a couple patients in mind that he wants to start on Butrans but hasnt seen them yet.we talked about initiation and titration of Butrans,i asked dr if he will see 1 patient today that he can start on Butrans? dr said probably so and he will start some patients on Butrans now that the PA is easier for Caresource.we discussed PA criteria for Caresource patients.
PPLPMDL0020000001	Cleveland	OH	44113	5/11/2012	showed dale the patient profiles,for butrans,asked if there were any patients he wouldnt start on Butrans? dale said no.dale said he thinks patients who are "opioid naive" should be started on a long-acting opioid for chronic pain but they dont see opioid naive patients here,its rare.dale said every patient has tried 1 of the short-acting opioids,showed initiation guide,so they are being considered for Butrans if they are still in pain with the short-acting opioids and asking for more pills.we discussed initiation,titration,patient info booklet-application/titration,proactively treating side effects.asked dale what if patients call in saying they are dizzy or have application site pruritus? dale said they will talk to patients about side effects and treat appropriately they wouldnt stop Butrans unless some1 is having severe side effects.asked dale if he will continue starting patients on Butrans today and talked to dr about what they does when her patients under 65yrs tell her Butrans only lasts 5 days? dr said a couple patients didnt want to stay on Butrans but there were a few that did and she told them to take their short-acting opioids to help them till day 7.i asked dr if she hears the same comment from her older patients,since she told me in last call majority of her Butrans patients are older than 65yrs,dr said she doesnt hear this from them.i talked to dr about starting a couple patients under 65,commercial insurance,and seeing if the responses change or are the same,dr said she will do that.we discussed initiation,titration and showed patient info booklet-focus of discussion on application and rotation of Butrans.dr said patty,rn and patricia,rn,show booklet and discuss with patients.asked dr for her commitment to continue starting new patients on Butrans today and next week? dr said Dr asked for a 30 second Butrans detail. Showed dosing and key selling messages from main visad and asked dr if she had any patients under 65yrs who are currently working with prescription coverage through their employer or any Caresource patients who have been on a short acting opioid for 3 months or longer. Dr said yes and remembered everything about Butrans. Dr asked about Caresource coverage. Explained PA and dr said that that was an easy situation and had no problem with it. Asked dr to prescribe for patient type explained and she said that she will look.<font color=blue><b>CHUDAKOB's query on 05/17/2012</b></font>Is this physician a pediatrician?<font color=green><b>REICHCL's response on 05/21/2012</b></font>no. We discussed this on the ride along you had with me. If I remember correctly you said you could help me get this corrected. Can you help?<font color=blue><b>CHUDAKOB added notes on 05/31/2012</b></font>I don't remember that discussion, although I do remember us discussing this subsequently on the phone. We have discussed how to fix this.
PPLPMDL0020000001	Barberton	OH	44203	5/11/2012	Asked dr about her patients on percocet. Asked how many patients she currently has on percocet. Dr said she has a few. Used main visad to discuss how OxyContin is appropriate for her patients on percocet and are not getting enough analgesia. OxyContin is as few as 2 pills a day Dr agreed that she may have those patients switch. Provided placement information about Butrans and asked if she has patients on Ultram or vicoden taking multiple pills per day. Dr said she does have some and she needs to keep in mind with multiple pills and dose adjustments of short acting goes against her 50-1 law. She said she will look more at Butrans for those patients.<font color=blue><b>CHUDAKOB's query on 05/17/2012</b></font>Cliff, you do not want to be discussing patients taking multiple pills/day. We cannot make any comparisons with Butrans, or OxyContin and any other opioids based on fewer pills.<font color=green><b>REICHCL's response on 05/21/2012</b></font><font color=blue><b>CHUDAKOB added notes on 05/31/2012</b></font>Thanks Cliff. If you have any questions on this, please don't hesitate to call.

PPLPMDL0020000001	Richmond Heights	OH	44143	5/11/2012	Window call...I reminded doc of our discussion of butrans and the key selling messages. I asked him what hesitations he may have about prescribing butrans. He said he cant remember it. He said he wants to write it because he is familiar with suboxone and doesnt know why he cant remember it. I gave him a dosing initiation tool and asked him to use it as a reminder.<font color=blue><b>CHUDAKOB's query on 06/21/2012</b></font>Charmaine, when a physician says he want to write Butrans because he is familiar with Suboxone, what is the implication here? How should you address this with the physician?<font color=green><b>SIMERTOC's response on 07/03/2012</b></font>The implication is that they are the same thing. I have told him before that butrans is only for pain and not addiction. He said he knows that. He is just familiar and comfortable with the molecule.<font color=blue><b>CHUDAKOB added notes on 07/05/2012</b></font>This is something that should be addressed with the exact indication every time he says it and you need to
PPLPMDL0020000001	Independence	OH	44131	5/11/2012	I stopped Dr Rob between patients & told him I had some OxyContin formulary information to share with him as well as Butrans information. Dr Rob stopped me & said he does not write either of them, so he did not want any information. He then walked into a room.
PPLPMDL0020000001	Parma	OH	44134	5/14/2012	Dr Mandat said he continues to have success with Butrans. I asked what type of patient he uses it in. He said typically a patient is on 4 tramadol per day & if they are not getting relief, he will prescribe Butrans for them. He said he thinks this is the ideal place to use Butrans. I agreed that a patient not well-controlled on around-the-clock tramadol is an ideal patient type. He went on to say that he typically only treats patients with opioids chronically when they are in hospice or nursing homes. He said usually if a patient is 60 or older, he will go ahead & treat them, but otherwise he does not. I asked if he refers the others out. He said he actually just never takes them on as patients. I asked if he has a patient who he has been treating for various things for awhile & he trusts them, & they present with a chronically painful condition, & they are under the age of 60 what he would do. He said he would probably go ahead & treat that patient. I asked if he would be comfortable using Butrans in this patient population & he said yes. He added that he has had enough experience with Butrans now that he feels safe using it & has confidence in it. Dr Mandat said he really does not like to treat patients with high doses of opioids like OxyContin because it is so easy for patients to become addicted to this type of medication. He said he only uses it in patients with cancer or those who are dying. I asked him to continue to prescribe for appropriate patients & he agreed.
PPLPMDL0020000001	Akron	OH	44333	5/14/2012	Discussed managed care information for Butrans and OxyContin with Dr Brown and Elyse. Focused on their patients with private prescription insurance for Butrans and Medical Mutual patients. Dr agreed she needs to continue to look for those types of patients even though she has a lot of Medicare. Discussed Medicare coverage with CCRX and Anthem Sr Advantage coverage. asked for more Butrans business.
PPLPMDL0020000001	Lakewood	OH	44107	5/14/2012	Quick call at front, I showed Dr the OxyContin managed care grid and that most of his Med Dr patients should have access to OxyContin. I reviewed that OxyContin had been studied in geriatric patients ages 65 and 75 and older and he agreed to prescribe low dose OxyContin for his older patients.
PPLPMDL0020000001	Cleveland	OH	44109	5/14/2012	showed dr OxyContin visual aid,asked dr if he started any new patients on OxyContin since our lunch last monday? dr said no but he has continued a couple patients on OxyContin.we discussed 7 tablet strengths and Q12H dosing and i asked dr if he would start a couple new patients this week? dr said today is his last day of work then he's on vacation till May 29th so he will see who comes into office today.we discussed Butrans initiation and titration,asked dr if he has a couple patients he will see today that would be appropriate for Butrans? dr said probably so and he will start a couple patients.focused dr on BWC and commercial insurance patients to start on
PPLPMDL0020000001	Cleveland	OH	44106	5/14/2012	showed dr butrans initiation guide,we discussed dosage ranges for appropriate patients,dr said he just didnt have many patients taking opioids,dr said he likes that Butrans is transdermal and once weekly dosing,just doesnt have anyone in mind for Butrans now,asked dr if he will consider 1 patient this week,to start on Butrans,if patient needs a dosage adjustment in short-acting opioid? dr agreed.
PPLPMDL0020000001	Parma	OH	44129	5/14/2012	Spoke with Linda (MA) & reviewed Butrans dosing & indication. Went over appropriate patient type, focusing on those taking tramadol or Vicodin around-the-clock, especially if they are not well-controlled on that medication. Also discussed favorable coverage on commercial insurance, including tier 2 on Express Scripts national formulary. Also discussed OxyContin's favorable status on Medicare D plans. Linda said Dr Laluk would return dr said she has 1 patient on Butrans,patient is doing well,she is watching to see how this patient does and if she has more patients like this 1,she will consider Butrans for them.we discussed appropriate patients,showed visual aid-opioid experienced patients and asked dr for her commitment to start 1-2 patients this week,dr said she will if its appropriate and if attending HCP's approve of this choice.
PPLPMDL0020000001	Cleveland	OH	44106	5/14/2012	Dr Sadowski asked if a patient gets headaches if they can try Butrans by applying it directly to their head. I showed him the approved applications sites & told him Butrans is a systemic medication, not locally acting. I told him the first step he has to complete is identifying a single appropriate patient who he thinks could benefit from Butrans & the next step is to prescribe an appropriate starting dose for that patient. He said he is keeping it in mind & then walked into a room. Spoke with MA Deena & discussed Butrans & OxyContin managed care coverage & trial/savings programs. I asked her to help remind Dr Sadowski of Butrans when she identifies a patient who may be an appropriate candidate. She agreed.
PPLPMDL0020000001	Fairlawn	OH	44333	5/14/2012	Asked dr if he had patients that are currently on NSAIDS, Cox2 inhibitors, Tramadol or vicoden? Dr said he does but does not like to treat patients in pain. Dr said he typically refers out to a specialist early in treatment. Gave dr all Butrans key selling messages and used case studies and inclusion criteria to show appropriate patients. Showed placebo patch and asked dr if he sees himself using a product like Butrans for patients failing on short acting opioids? Dr said that he may possibly use it but not likely anytime soon. Asked why? Dr said he doesn't have the time to manage pain. Asked dr who he refers to. Dr said he likes to refer to Narouze and Sable group.
PPLPMDL0020000001	Euclid	OH	44119	5/14/2012	I asked doc what he still needs to know before he will write butrans. He said nothing. I asked him if he feels comfortable with prescribing butrans. He said he does not have a problem with it he just has to find the right patient. I showed the profile of Emma as an appropriate patient. He said Emma has to have the right coverage. I gave him a formulary grid and asked him to think of commercially insured patients.
PPLPMDL0020000001	Akron	OH	44333	5/14/2012	Asked dr if he recalls receiving Butrans product information last week about Butrans. Dr said he does recall looking at it briefly however admitted to not knowing much about it. Explained how Butrans is a CII, 7 day transdermal patch for moderate to severe pain. Reviewed doses and approximate conversions for morphine equivalents. Discussed appropriate patient types with case studies. Asked dr if he would use it and he admitted that he probably would not because he does not like treat pain with opioids. Explained how it has a place early on in his treatment for his patients failing on Ultram or vicoden which he admitted using. Dr said he may try it and likes the 7 day patch. He also said that he is sure to see some of his patients referred to him on Butrans and was glad to get the information.
PPLPMDL0020000001	Lyndhurst	OH	44124	5/14/2012	Spoke to Kimberly, fill in pharmacist for Jessica, about the butrans movement. She was not familiar with this store but her store (Kinsman CVS)has one regular customer on it. I provided patient info guides and explained proper application and rotation.
PPLPMDL0020000001	Mayfield Heights	OH	44124	5/14/2012	Dr. Dewis is out all this week. I explained the savings cards and the formulary coverage to Denise. I pointed out that Express scripts is now covering butrans at a tier 2 copay.
PPLPMDL0020000001	Lakewood	OH	44107	5/14/2012	Quick call with John, I reviewed that Butrans can be used with supplemental analgesia and he remembered, I reviewed the medication guide and he will let patients know about Butrans as an option if he talks to them. We reviewed the conversion guide for OxyContin.
PPLPMDL0020000001	Westlake	OH	44145	5/14/2012	I told Dr last time I was in, you said you wanted to try Butrans for a patient taking tramadol around the clock instead of going to vicodin. Have you prescribed it? He said he thought of it, but the patient was Med D, so he just increased the tramadol. He said he will try it for a commercial patient. Reminder that low dose OxyContin may be an option for Med D patients who fit the indication.
PPLPMDL0020000001	Parma	OH	44134	5/14/2012	Spoke briefly with Alicia, pharmacist, who said they have not seen any Butrans activity. I gave her information sheet on Butrans trial/savings program & discussed eligibility requirements. Also reviewed automatic monthly savings with e-voucher but let her know all eligible patients would need the actual card for the trial offer. Also gave her information sheet on OxyContin savings program & reviewed eligibility. She said they did not need any cards at this time.
PPLPMDL0020000001	Lyndhurst	OH	44124	5/14/2012	I showed doc the butrans demo, reviewed the once weekly, CII status. He said he has been writing it. I asked him if he has prescribed for percoct patients like he said he would. He said vicodin and percoctet. I reviewed the appropriate starting dose depending on their current therapy. I reminded him about the commercial plans and the savings cards. He said he has a medicare patient on it that does not care about the cost so she is staying on
PPLPMDL0020000001	Lakewood	OH	44107	5/14/2012	Quick call while Dr was on the way to the hospital, I asked if he would give some of those month trial cards for patients to try Butrans and he said he will, he has given a card but it was the wrong managed care. Dr said he knows that only commercial patients should get a trial card. Reminder that Med D patients may have access to OxyContin.
PPLPMDL0020000001	Mayfield Hts	OH	44124	5/14/2012	Doc could not stay for lunch. I showed him the butrans demo and reminded him of the 10mcg starting dose for patients taking vicodin 5mg, 3x day. I reminded him that butrans is covered on BWC and asked him to try one patient this week. He said he would try.
PPLPMDL0020000001	Munroe Falls	OH	44262	5/14/2012	I asked dr if she had seen patients in the last week that are currently in moderate to severe chronic pain that may be appropriate with a 7 day transdermal patch? Dr said that she doesn't see too many patients with chronic pain. I asked dr what her definition of chronic pain is. Dr said that it varies but mostly 3-6 months. I asked dr if she feels comfortable treating pain with a patch. Dr said she was ok with it and will try again to think of patients still in pain on their current medicines. Told dr i will follow up in a week to check in.
PPLPMDL0020000001	Lakewood	OH	44107	5/14/2012	Spoke with Megan, I reviewed that Butrans can be used with supplemental analgesia and she said they don't see scripts due to the fact it's bee denied so many times. I asked which plans and she said Med D and medicaid. We reviewed the managed care for Butrans. We reviewed the conversion guide for OxyContin and the grid for managed care.
PPLPMDL0020000001	Euclid	OH	44117	5/14/2012	Window call...I asked doc what commercial insurance plans he see regularly other than BWC. He said workers comp really is the bulk of his practice he has a few patients with Anthem, medical mutual. I explained that oxycontin is covered at a tier 2 status on those plans and I have savings cards to help with the cost of the co pay, up to \$70 per month. He said he does not like to bother with cards and if the patients can't afford a drug without the card he will prescribe them something else. Told him I just wanted him to know of the option.
PPLPMDL0020000001	Beachwood	OH	44122	5/14/2012	Quick call- Started to talk about Butrans & Dr Myton-Craig stopped me & said she just tried to write a generic fentanyl patch for a BWC patient & "they wouldn't even pay for that", so she questioned Butrans formulary coverage with managed care. I let her know that as of now, BWC can get Butrans without prior authorization. She asked me if I was sure. I told her this was the latest information I had seen, but to consult BWC's website to be certain. Discussed prior authorization requirements for OxyContin on BWC as well.
PPLPMDL0020000001	Parma	OH	44134	5/14/2012	Marko (pharmacist) said he is still stocking 2 boxes of each strength of Butrans. Gave him information sheet on Butrans & OxyContin savings programs. Discussed Butrans trial offer/\$75 off & also discussed automatic monthly savings for Rite Aid customers through the e-voucher program. Let him know eligible patients would need the actual card for the trial offer as it is not part of the e-voucher. Also reviewed OxyContin \$70 off & discussed eligibility requirements/usage.
PPLPMDL0020000001	Lakewood	OH	44107	5/14/2012	I reviewed the managed care grid for OxyContin and that most Med D AARP and CCRX patients will have access to OxyContin. She said she had not tried Butrans since she had a few managed care issues. I asked her to think of chronic pain patients who are younger than 65 and have commercial insurance, she agreed.
PPLPMDL0020000001	Parma	OH	44129	5/14/2012	Quick call- Dr Taylor said she still hasn't started anyone on Butrans but she is keeping it in mind. Positioned Butrans for patients not well-controlled on tramadol or Vicodin 3 times per day, if they are working, aged 40-60 with a chronically painful condition. She said she will try to find a patient.
PPLPMDL0020000001	Parma	OH	44129	5/14/2012	Caught Elaine briefly between patients. She said she is still using Butrans but did not have time to stop for a talk because she was running too far behind. I gave her a sealed study & asked her to review it. She agreed. Spent time with Dawn going over formulary coverage for Butrans. She said Myra had a patient last week that she was going to put on Butrans but the patient had Medicare.
PPLPMDL0020000001	Mayfield Heights	OH	44124	5/14/2012	Quick call....Doc apologized that he did not have much time but he is the only doc in the office today. I gave him a patient profile guide and asked him to try butrans for a commercially insured patient this week.
PPLPMDL0020000001	Cleveland	OH	44113	5/14/2012	Dr said he's not started anyone on Butrans has given a couple patient info booklets out and is following up with patients in next week so he will start them at that time we discussed initiation,titration,refills and focus was on PA criteria for Caresource patients,told dr i will follow-up with him next week to hear about those couple patients he has committed to starting on Butrans,dr said ok.
PPLPMDL0020000001	Cleveland	OH	44106	5/14/2012	dr said he is keeping Butrans in mind as an option for patients but he's so busy hasn't thought about it lately,showed initiation guide,asked dr if he see's patients in dosage ranges listed for short-acting opioids? dr said yes,a lot of tramadol patients,asked dr if he will start a couple patients on Butrans this week when patients need a dosage adjustment in their tramadol? dr said yes he will.we discussed initiation,titration,refills and PA criteria for Caresource patients.
PPLPMDL0020000001	Cleveland	OH	44114	5/14/2012	dr said she's starting patients on Butrans weekly,is happy with Butrans,patients are happy and doing well,no complaints,told dr that was great to hear,asked her what patients were taking prior to Butrans? most criteria for were taking vicodin and when they wanted more pills,she decided it was time to start them on butrans.we discussed initiation and titration of Butrans,dr said BWC is paying for Butrans so that makes it easier on her to start patients on butrans,asked dr for her commitment to start more patients on Butrans,dr said yes she will.
PPLPMDL0020000001					

PPLPMDL0020000001	Cleveland	OH	44114	5/14/2012	talked to john about patients they are starting on Butrans,john said dr marshall and dr katz are starting patients on Butrans weekly and these are patients that were taking vicodin or percocet for their chronic pain yet not controlled and asking them for more pills so they wont give more pills they start patients on Butrans.we discussed initiation of Butrans,titration and refills,asked John for his commitment to start more patients on Butrans,john committed.
PPLPMDL0020000001	Parma	OH	44129	5/14/2012	Quick call- Dr Ortega saw me at the window. He stopped & said that he didn't have anything new to tell me about Butrans or OxyContin since I saw him last. He then walked away. Spoke with Cindy & discussed BWC prior authorization requirements for OxyContin. Also let her know that BWC is still not requiring prior authorization for Butrans. She said she hasn't really had any problems with either medication recently.
PPLPMDL0020000001	Cleveland	OH	44124	5/14/2012	I discussed the butrans indication and other selling messages. I asked doc what kinds of pain does she treat with tramadol or vicodin on a daily basis. She does not treat chronic pain. I explained that butrans can also be used for patients failing on non-opioids such as NSAIDS. I showed the 5mgc starting dose for those patients. She wanted an initiation tool as a reference.
PPLPMDL0020000001	Fairlawn	OH	44333	5/14/2012	Provided dr with all Butrans key selling messages. Reviewed cause studies, study inclusion criteria, and conversions. Asked dr if she sees a place for it. Dr said the entire practice is getting away from treating ANY pain in patients over three months. She refers out and said that she will not use the product. nothing else learned.
PPLPMDL0020000001	Akron	OH	44310	5/17/2012	Asked dr if he truly believes that Butrans has a place in his practice and handed him the initiation and titration guide. Dr said that he thinks it does. I asked him where he thinks it might fit? Dr said that its an extended release product and he would think about it for patients on short acting. I asked him if he uses Ultram or vicodin. Dr said he does. I asked what his patients might think about using a 7 day transdermal patch? Dr said that some might like it and other not. Asked dr to ask his patients if they would consider using Butrans. Dr said he will do that. I told dr I would follow up and hope he can identify a few patients as candidates that fit the
PPLPMDL0020000001	Parma	OH	44129	5/17/2012	Quick call at the window- Passed back to Dr Paat the OxyContin Medicare D formulary grid & pointed out favorable OxyContin coverage. He just thanked me & walked away. Spent time with Sherry (MA) discussing coverage & appropriate patient type for both OxyContin & Butrans. Gave her Colace per her request.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/17/2012	I outlined a patient that would be appropriate in his practice. Told dr that the appropriate patient would be that patient that is under 65, has commercial insurance and is currently on Ultram or low dose vicodin for 3 months or longer and does not have the pain under control. Reviewed inclusion criteria again and asked dr if he can think of a patient that fits that description? Dr said he can think of one or two. I asked dr if he will initiate Butrans on those patients. Dr said ok. nothing else learned.
PPLPMDL0020000001	Parma	OH	44129	5/17/2012	Spoke with Kathy (MA) & reviewed appropriate patient types of OxyContin & Butrans & also reviewed formulary coverage for both products. She said Dr Tolentino was seeing patients & couldn't come to the window but promised she would pass the information along to her.
PPLPMDL0020000001	Cleveland	OH	44114	5/17/2012	talked to Eileen about appropriate patients,showed dosage ranges for short-acting opioids in Butrans initiation guide,asked Eileen if she would start a patient on Butrans if they were taking 2-3 vicodin/day but not controlled and needed a dosage adjustment? Eileen said she would think about it but she's been trained to wait until patients are at 4-5 vicodin/day then she would consider a long-acting opioid like Butrans.we talked about why she would wait longer but no real clinical answer; asked Eileen to start 2 patients today or tomorrow on Butrans? Eileen said she will.we discussed medicaid-Caresource PA criteria and commercial insurance patients starting on
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/17/2012	Dr asked me about using short acting opioids with Butrans? I asked him why and he said that he was wondering that from the last time we spoke. I referred to the FPI section 2.4 and read it to him. I also read the clinical pharmacology MOA and asked if that makes it clear. Dr said that it did and wanted a copy of the FPI. Dr also asked where he should use Butrans. Earlier or later in the therapy. I explained from the case studies and conversion tool and he said he had many patients on Ultram and vicoden that could benefit from a controlled release product. Dr said he uses OxyContin a lot in the hospital. Reviewed the titration and conversion guide and discussed appropriate patients for OxyContin. Dr said he tries to take patients to OxyContin instead of percocet because of the tylenol. I asked dr to TRY Butrans and dr agreed to use on the next patient that fits the
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/17/2012	Handed dr the Butrans initiation and titration guide. Gave dr the indication, CII, 7 day transdermal patch. I asked dr if he has patients on Ultram or vicodin around the clock who may not be receiving adequate analgesia? Dr said he figures that he does and is impressed with the 7 day application. Dr asked what Butrans is equivalent to? Showed dr the approximate conversion tool to discuss the appropriate patient. Dr said that he understands what Butrans is and where he needs to use it. Dr asked about insurance coverage. I asked dr which plans are most important to his practice? Dr said BWC, Medco and Medical Mutual. I showed the managed care flashcard and copy cards and explained how little appropriate patients can pay. Dr said that he is impressed with the product and wanted the conversion card to help him remember to use Butrans. Dr said he will try it.
PPLPMDL0020000001	Parma	OH	44129	5/17/2012	Dr Gigliotti said he is still writing "a lot" of OxyContin, but he is also referring a lot to Dr Salama. I asked what determines who he keeps & who he refers. He said if they are on a high dose or if he suspects abuse, he refers. He also said he has not had feedback from the patient he recently put on Butrans. He said he has not heard anything from her. I asked if this patient would have called if there was a problem getting the medication or if she wasn't getting good results. Dr Gigliotti said she definitely would call if that was the case. I asked when he expects her to follow-up. He said usually after about 2 weeks, so she could be coming back any day now. He said he never knows who is coming in until he walks into the room. I asked if he will look for other appropriate patients like her & he agreed.
PPLPMDL0020000001	Cleveland	OH	44113	5/17/2012	dr said he's not started anyone in past week but he will continue talking to patients and trying Butrans.we discussed initiation,showed initiation guide-appropriate dosage ranges of short-acting opioids,and talked to dr about BWC and commercial insurance patients starting on Butrans,asked dr for his commitment to start a couple patients on Butrans,dr agreed to do this.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	5/17/2012	saw dr though window and asked her if her patients are responding well to Butrans? Dr said they are all doing well and that she likes Butrans alot. Dr said she likes that Butrans is delivered through a patch and that it is for 7 days. nothing else learned.
PPLPMDL0020000001	South Euclid	OH	44121	5/17/2012	Window call....Reminded doc of the butrans indication and the positioning for opioid naive or opioid experienced patients. I asked her if she has any patients that may be taking NSAIDS ATC. She said maybe daily but not ATC. She also said that she would not go to a long acting narcotic after NSAIDS. I gave her a patient profile guide and asked her to consider butrans after tramadol.
PPLPMDL0020000001	Cleveland	OH	44121	5/17/2012	Window call.....reminded doc of the range of oxycontin patient types showing him the spread form moderate to severe and asked him if where along the spectrum he is using oxycontin. He said more towards the severe end. I showed him the 7 tablets and that there is enough flexibility in the dosing to include moderate pain patients as well. Provided a conversion guide and FPI.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/17/2012	Asked if the pharmacy sees patients with ESI. Was told that they do have some ESI but not too many. Gave Butrans Win with ESI and explained status. Gave overview of commercial coverage for Butrans and asked if they have had patients using copy cards or trial offer. Pharmacy has used 1 trial offer and have used saving via their system. Provided OxyContin initiation guide.
PPLPMDL0020000001	Cleveland	OH	44106	5/17/2012	asked dr how the patient is doing on Butrans,that she committed to start last Thursday at our lunch? dr said she hasnt started anyone.showed dr patient profile emma,asked dr if she's seen patients like emma since last Thursday? dr said yes every day, she has forgotten about Butrans.reviewed initiation of Butrans and asked dr if she will commit to starting 1 patient in the next week on Butrans? dr said yes she will do that.reviewed PA Criteria for Caresource patients with dr,dr said ok she will start a couple patients on Butrans.<font color=blue><b>CHUDAKOB added notes on 05/27/2012</b></font>Nice job of working with the staff.
PPLPMDL0020000001	Parma	OH	44134	5/17/2012	Dr Hernandez said everything is going well with his Butrans patients & those he still has on OxyContin. He started to tell me about a patient for whom he prescribed Butrans recently, but then got a patient phone call that he had to take care of. Spoke with Val & discussed savings programs for both products along with eligibility requirements. Let Val know I would return another time to discuss further with Dr Hernandez.
PPLPMDL0020000001	Berea	OH	44017	5/17/2012	I told dr for his patients who are taking tramadol around the clock and need to take the next step, to prescribe Butrans, he said ok. I gave him the pull out tool and initiation guide.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/17/2012	I asked Brad if he could tell me who had prescribed OxyContin lately. Brad looked and told me that Dr McIntosh in Uniontown wrote yesterday and he has seen a lot from Dr Petrus as well in recent weeks. Brad wanted to ensure they had up to date OxyContin copy cards which they did. Brad also said that they have seen prescriptions from Narouze and Sable for Butrans as well as Fouad. Reviewed copy cards and gave updates about ESI and
PPLPMDL0020000001	South Euclid	OH	44121	5/17/2012	Spoke to Mitch about the movement of butrans. He said he has seen one or two scripts. I asked if he has any regular customers on it. He said he didn't think so. I also asked if he knew who the prescriber(s) was/were. He did not know. I explained that butrans can be called in and refilled and that's why I asked. I explained the allowable use of supplemental analgesia with butrans and referred to section 2.4 of the FPI. I provided the FPI and the patient info guide to explain the proper application and rotation of the patch.
PPLPMDL0020000001	Cleveland	OH	44114	5/17/2012	talked to dr about patients he's continually starting on Butrans,dr said patients are doing well,no complaints and he will continue writing,asked dr if he will start more patients like william,showed patient profile,dr said yes he will,focused dr on BWC and Caresource patients.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/17/2012	I asked Dr Narouze about his recent Butrans prescriptions and asked him why he used it? Dr said that he needed a controlled release product for a couple of patients early in their treatment of pain. I asked dr what the patients were using for pain control prior to Butrans? Dr said he could not remember and told me to ask his PA Linda Armstrong. Dr said he liked the 7 day application and the low incidence of side effects such as constipation. Gave dr information about additional patient types that are appropriate for Butrans with case studies. Dr said he understands where to use it....nothing else learned.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/17/2012	I asked Dr Sable what he likes about Butrans and the types of patients he is initiating Butrans on. Dr Sable said that he first likes Butrans because it works and has seen great pain relief with it. He said he had one patient that went from a 9 to a 4 on the pain scale with Butrans. Dr said he also uses Butrans for patients that have bad side effects from short acting opioids like constipation. Dr mentioned that he is probably going to use it earlier in his treatment of moderate to severe pain. Dr asked about any insurance changes. Discussed ESI and Caresource wins. Dr said he will be using more often.
PPLPMDL0020000001	Shaker Heights	OH	44122	5/17/2012	I asked Dr Agarwal where OxyContin fits into his practice. He said he uses it "a lot", but only in nursing homes, not office patients. I asked him why not. He said because of government regulations, he does not want to manage/maintain any patients on long-term opioids in his office. He elaborated by saying that he treats the patients' overall body systems, not just their pain. He said it takes time to treat patients' pain & if he treated that, plus their blood pressure, plus their other disease states, he would not be able to see enough patients to stay in business. He said he simply does not have time to do urine drug screening, OARRS, & other documentation, so he refers those patients out. I asked how he determines who he refers & who he treats. He said if it is chronic, he refers. I asked how he determines if a patient's condition is chronic. He said he treats their pain with non-opioid medications first, & if those don't work, he considers their condition to be chronic & refers out at that point. Dr Agarwal said he might be able to use Butrans in his nursing home patients. Discussed managed care coverage & prior authorization requirements for Medicare plans. I asked what typically causes him to prescribe OxyContin for a nursing home patient. He said Percocet is cheap, so he uses that prior to OxyContin. He said when he starts to worry about the amount of Tylenol they are getting, he will switch them to 10 or 20mg OxyContin. Discussed importance of appropriate pt selection
PPLPMDL0020000001	Cleveland	OH	44103	5/17/2012	showed OxyContin visual aid,pain conditions,asked dr where she feels most comfortable prescribing OxyContin? dr said she will prescribe for any pain condition she feels a long-acting opioid is appropriate,dr said she prefers long-acting opioids,we discussed Q12H dosing and 7 tab strengths,asked dr if she will start a couple new patients on OxyContin today or tomorrow,focusing on UHC/AARP and silverscript med d patients? dr said she will.
PPLPMDL0020000001	Cleveland	OH	44109	5/17/2012	talked to dr about patients she's started on Butrans and who is appropriate,dr said she is looking at patients taking a short-acting opioid daily,not controlled and asking her for more pills,we discussed initiation of Butrans and titration,asked dr if she had any patients today or tomorrow that she knows will need a dosage adjustment that she could start on Butrans? dr said she doesnt know,will see who comes into office,focused dr on commercial and BWC patients
PPLPMDL0020000001	Cleveland	OH	44113	5/17/2012	dr said patients are doing good on Butrans,we discussed initiation of Butrans,dr said most of his patients are on Butrans 10mcg,we talked about titration,dr said he will discuss side effects and titrate appropriately in the 4wk follow-up visit,asked dr for his commitment to start more patients on Butrans this week,dr agreed to do this.we briefly discussed PA criteria for Caresource patients and focused dr on commercial insurance patients using initial trial offer cards
PPLPMDL0020000001	Westlake	OH	44145	5/17/2012	Dr told me that he wrote 4 scripts last week for Butrans. We discussed the patient type for Butrans- under 65 years old, with insurance through work or BWC, requesting a medication adjustment with vicodin or tramadol. Dr said that he has been starting at the 5mgc for patients who are taking 3 5mg vicodin per day and we reviewed the pull out tool. I asked will he do if a patient says that the 5mgc Butrans is not working and they want their vicodin back, and he said that he would titrate to the 10mgc. We reviewed the use of supplemental analgesia with Butrans. We reviewed the FPI regarding mode of action, pharmacokinetics, drug interactions. About I gave savings cards to Rachel for the Middleburg and Lakewood offices.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/17/2012	Discussed Butrans and asked Linda about the patients dr Narouze initiated on Butrans. Linds said she does not know much about the patients situation that were started on Butrans but she will look into it for herself and me. Discussed Butrans indication and key selling messages. Linda said that she has spoke to dr Narouze about Butrans and remembers that he was starting a couple of patients on it. Linda agreed that I could follow up with her in 2 weeks about the Butrans patients criteria.
PPLPMDL0020000001					



PPLPMDL0020000001	South Euclid	OH	44121	5/17/2012	Spoke to Dina, tech, about the stocking and movement of butrans. She confirmed all 3 strengths of butrans and that they get a few scripts for butrans but not really consistently. I discussed the positioning of butrans - after tramadol failures and asked her if there were any writers of tramadol or vicodin that are being refilled month after month. She only mentioned Dr. Stein as a regular prescriber. I offered a butrans patient info guide but she already had one of the shelf.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	5/17/2012	I gave dr a very specific patient type for Butrans. Asked dr if she has any ESI patients for commercial insurance. Dr said she knows she has a fair amount. Asked dr to use Butrans on an ESI patient under 65 who is working and has prescription insurance though their employer. This patient has also been on a either Ultram or Vicoden for three months or longer and pain is not under control. Do you have patients like this in your practice? Dr said she can think of a few. Asked dr if she would try Butrans on those patients and use the trial offer car and copy card? Dr said that she will find those patients.
PPLPMDL0020000001	Olmsted Falls	OH	44138	5/17/2012	Spoke with Al, I reviewed the medication guide for Butrans and the use of supplemental analgesia. We discussed the Express Scripts managed care change to 2nd tier. He has seen some scripts of Butrans and they do have it in stock. He said he does see OPERS and retired public employees. I asked if he sees any employer groups and he said no, just the berea school employees. I asked what he puts on the bottle if the dr writes OxyContin BID, he said that he will put twice a day. We discussed that many patients may not be taking OxyContin Q12hr and that it will seem that it does not last long enough.
PPLPMDL0020000001	Olmsted Falls	OH	44138	5/17/2012	We reviewed the avg pain scores for the opioid naive clinical trial in the FPI and used the pain scale. Dr said that he did have a patient in mind who has caresource and is taking vicodin 5mg 4-5 times per day. He would like to switch her to Butrans. I reviewed that he would taper this patient down on their hydrocodone and start the 10mcg Butrans patch. I reviewed that he can prescribe supplemental analgesia with Butrans. He said that he will give it a try. I discussed that patients with insurance through work can use the savings card and trial month. He agreed to give it a try.
PPLPMDL0020000001	Cleveland	OH	44103	5/17/2012	showed OxyContin conversion guide,hydrocodone and oxycodone examples asked dr what he's hearing from patients that prompts him to start patients on OxyContin? dr said he hears many answers from patients,depends on patient,but if patients are taking several pills a day consistently,still in pain and asking for more pills,he will consider OxyContin.we discussed Q12H dosing and 7 tab strengths,focused dr on med d patients,asked dr if he will start a couple new patients today or tomorrow on OxyContin? dr said if he feels its appropriate,he will do that.
PPLPMDL0020000001	Cleveland	OH	44113	5/17/2012	talked to deb about patients taking vicodin that arent controlled and needing something else,deb said she is starting patients on Butrans but still giving tramadol or vicodin for supplemental analgesia.talked to deb about Caresource PA criteria,asked for Deb's commitment to start more patients.deb said yes she will she loves Butrans.deb said she just saw a female patient who had tried all short-acting opioids prior to Butrans,was always in pain and hesitant to start Butrans but now that she's on Butrans she told deb that she cant believe she functioned prior to Butrans,deb said this patient's pain is controlled and she feels so good now.<font color=blue><b>CHUDAKOB added notes on 05/27/2012</b></font> WOW. What a great success. This would have happened without your selling her first. Nice work!
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/17/2012	Spoke with Cindy about Butrans and OxyContin. I told Cindy that I had just finished speaking with the in patient pharmacist Glenn at the hospital. I told Cindy that Glenn had mentioned that they make their best effort to send prescriptions for outpatients to their pharmacy. Cindy said they have not seen any prescriptions for Butrans or OxyContin except for an order from Glenn for 2 patches which she did not fill. I reviewed the trial offer and copy cards as well as key selling messages for both products.
PPLPMDL0020000001	Beachwood	OH	44122	5/18/2012	I reminded Dr Warren of our previous conversations when he has expressed interest in prescribing Butrans for some of his patients, namely those who cannot tolerate NSAID's or those who he is reducing their dose of opioids. Also added that OxyContin may be an option for appropriate patients beyond the Butrans range, showing him slide-on initiation tool. Discussed doses & titration to a maximum 20mcg. He said he would use the tool to help him when starting patients on Butrans. Spoke with Donnie, his nurse, & reviewed dosing/titration information with him as well. Also told Donnie the two types of patients for whom Dr Warren had been interested in prescribing Butrans for. Donnie said he does not know why Dr Warren hasn't tried it yet because he does seem interested.
PPLPMDL0020000001	Uniontown	OH	44685	5/18/2012	Asked dr if he currently prescribes short acting opioids like tramadol or vicoden. Dr said he uses very little. Explained how Butrans is an option for his patients that have been on a short acting for more than 3 months. Asked dr if he has any patients like that. Dr said that if he has to continue to adjust the dose he refers out immediately. Dr said he would look at the info again. nothing else learned.
PPLPMDL0020000001	Fairview	OH	44111	5/18/2012	Spoke with Katie, we discussed that Butrans can be used with supplemental analgesia, we discussed Butrans managed care updates. We discussed OxyContin Q12hr instead of BID.
PPLPMDL0020000001	Cleveland	OH	44111	5/18/2012	Spoke with Dan, we reviewed the Butrans FPI and use of supplemental analgesia. We discussed Q12 hr dosing for OxyContin vs BID and he thought it would be good for Drs to think about writing out Q12hr with the times.
PPLPMDL0020000001	Garfield Heights	OH	44125	5/18/2012	Reviewed Butrans core messages with Dr Gupta. Showed range of appropriate patients & discussed OxyContin as an option for appropriate patients beyond the Butrans range. Focused him on patients taking tramadol or Vicodin 3 times per day for pain from a chronic condition. He asked how Butrans compares with fentanyl. I told him we do not have comparative data & showed the Butrans range in the initiation guide again. I asked if that helped him see where to position Butrans. He asked if we have any comparative data to see what Butrans is "better" than. I told him we do not. I asked him to try Butrans on a few appropriate patients in order to get his own clinical experience. He just thanked me & walked out of the room.
PPLPMDL0020000001	Parma	OH	44129	5/18/2012	Introduced Butrans to Dr Rakhit, delivering core messages & alerting him to box warning. Discussed appropriate patient type/range as well as OxyContin q12h as an option for appropriate patients beyond Butrans. Dr Rakhit said "all these medications" are getting abused & the government & insurance are making everything even words. I agreed that all opioids, including Butrans, a CII & OxyContin, a CII, are abuseable & should be prescribed with caution. I asked if he would agree that there are some patients in true legitimate pain who need opioids to help them. He said yes, it just can be hard to determine who is who. Focused him on patients who he trusts, who have legitimate pain conditions for whom he would otherwise start or continue on a dose of short-acting opioids around-the-clock. Reviewed managed care coverage & trial/savings program.
PPLPMDL0020000001	Cleveland	OH	44113	5/18/2012	dr said she's starting patients on Butrans weekly,no complaints from patients and will continue prescribing asked dr if she has gotten any feedback from patients on Butrans? dr said patients are doing well,pain is controlled so she's happy,gave more patient info booklets and asked dr for her commitment to start more patients,dr agreed.
PPLPMDL0020000001	Fairview Park	OH	44126	5/18/2012	Dr said that he is still having success with Butrans, I asked if he has more patients like the ones he started who are under 65 years old with insurance through work or BWC who are looking for an adjustment in their medication, he said yes this is exactly who he thinks is a good Butrans patient.
PPLPMDL0020000001	akron	OH	44333	5/18/2012	Excellent clinical discussion about Butrans positioning and patient profiles. Spoke to doctor about his clinical practice and asked him if he had any patients that have been in chronic pain for 3+ months and are currently not controlled on around the clock opioids or non opioid therapy. Dr spoke about a couple of patients that he thought would be appropriate for Butrans. One patient has been on Ultram for a while and is still in continuous pain. Another patient has been on many different therapies and is also still in pain. Reviewed patient case studies and ask him to initiate those patients on Butrans. Discussed approximate conversions, doses, and application sites. Reviewed managed care coverage, trial offer cards and copy cards. Dr said that he will start using Butrans.
PPLPMDL0020000001	Akron	OH	44310	5/18/2012	I asked dr if he has any patients on vivoden that he could move to Butrans? Dr said he doesnt have too many patients on vicoden but realizes that he should probably think about using Butrans for them. I told dr that Butrans is positioned well for not just patients on vicoden but Tramadol as well. Gave dr the conversion chart. nothing else learned.
PPLPMDL0020000001	Uniontown	OH	44685	5/18/2012	Asked Matt if he has seen any recent prescriptions for Butrans and OxyContin. Matt said that they fairly consistently see prescriptions from Comprehensive pain management for both products. Discussed Butrans indication and MOA, CII, 7 day transdermal application. Asked what they fill most for pain management. Pharmacy fills Ultram to percoet all about equal.
PPLPMDL0020000001	Akron	OH	44310	5/18/2012	Asked dr if he has had any more candidates for Butrans since his first use. Dr said he still doesnt remember using. I asked dr if his uses short acting opioids for analgesia? Dr said he does but tries to not even use those. I asked dr if he has patients under 65, currently working and have insurance though their employer. These patients also have suffered from pain for three months or longer and should be appropriate for a controlled release 7 day transdermal patch? Dr said he likes the concept of Butrans and said he likes the science behind it. Dr said he likes the CII, and that the low doses of buprenorphine make it applicable for many patients. Left conversion chart and managed care flashcard.
PPLPMDL0020000001	Cleveland	OH	44109	5/18/2012	talked to dr about patients that look like emma and william,patient profiles,dr said he see's both of these patients every day,asked dr if he's considered Butrans for these patients? dr said not that often as a lot of patients dont want to wear a patch.we discussed dr starting patients on Butrans but still give short-acting opioids for supplemental analgesia,showed FPI section 2.4 Maintenance of Therapy and Supplemental Analgesia.dr said ok he will talk to a few patients and see if anyone will try it.dr asked about medicaid coverage,we discussed PA criteria for Caresource patients,asked dr if that was feasible? dr said yes he will try it and let me know what happens.
PPLPMDL0020000001	Independence	OH	44131	5/18/2012	Spoke with MA Diana & reviewed Butrans & OxyContin managed care grids. Also showed her savings cards for both products. She said they did not need any new cards at this time. Inquired about scheduling a lunch, but she said they are still not doing them. She said she would leave my card for Dr Keppler.
PPLPMDL0020000001	Cleveland	OH	44113	5/18/2012	showed dr patient profile,emma,we discussed this patient type,dr said he see's patients like this,wants to start using Butrans just hasnt thought of it.asked dr if there was anything clinically holding him back from starting a few patients on Butrans? dr said no he is comfortable with this info.asked dr if he will consider a couple patients,like emma,to start on Butrans in the next week? dr said yes he will.showed initiation guide and visual aid for showed dr patient profile william,we talked about dr considering patients like this for Butrans as dr said most of her patients are elderly that she started on Butrans and she's getting it covered on Medicare plans so its not an issue.told dr that was great and asked her to continue starting those patients if she continues to get coverage on medicare plans,dr said she will do that.asked dr if she would start a couple new patients,like william/patient profile,on Butrans today and next week? dr committed to do this.we discussed BWC and commercial insurance patients starting on Butrans.
PPLPMDL0020000001	Cleveland	OH	44113	5/18/2012	I reminded Dr Roheny how he had promised me that he was going to prescribe Butrans & asked if he kept his promise. He said he wishes he could tell me that he kept it, but he has not prescribed Butrans. I asked him if it was because he was not thinking of it, but because he hasn't seen the right patient, or he has an issue with the drug clinically. He said he loves the idea of Butrans. I asked if that was true or if he is just saying that. He said he seriously does love the idea of it. He said it is just a matter of finding someone for it. I asked if he meant clinically or managed care-wise. He asked if Caresource patients could get it. I reviewed prior authorization requirements for it. I asked dr if he has patients under 65, currently working and have insurance though their employer. These patients also have suffered from pain for three months or longer and should be appropriate for a controlled release 7 day transdermal patch? Dr said he likes the concept of Butrans and said he likes the science behind it. Dr said he likes the CII, and that the low doses of buprenorphine make it applicable for many patients. Left conversion chart and managed care flashcard.
PPLPMDL0020000001	Parma	OH	44129	5/18/2012	I reminded Dr Roheny how he had promised me that he was going to prescribe Butrans & asked if he kept his promise. He said he wishes he could tell me that he kept it, but he has not prescribed Butrans. I asked him if it was because he was not thinking of it, but because he hasn't seen the right patient, or he has an issue with the drug clinically. He said he loves the idea of Butrans. I asked if that was true or if he is just saying that. He said he seriously does love the idea of it. He said it is just a matter of finding someone for it. I asked if he meant clinically or managed care-wise. He asked if Caresource patients could get it. I reviewed prior authorization requirements for it. I asked dr if he has patients under 65, currently working and have insurance though their employer. These patients also have suffered from pain for three months or longer and should be appropriate for a controlled release 7 day transdermal patch? Dr said he likes the concept of Butrans and said he likes the science behind it. Dr said he likes the CII, and that the low doses of buprenorphine make it applicable for many patients. Left conversion chart and managed care flashcard.
PPLPMDL0020000001	Independence	OH	44131	5/18/2012	Roman said he has been giving out the OxyContin savings cards that I gave him but that he does not need any more yet. He did ask for Butrans trial/savings cards. I asked him why he needs them, since he has indicated that until he can speak to some practitioners directly, he will not be using Butrans. He said he knows & that is still true, but he might as well have them. He asked if Butrans would be for someone on 2 Vicodin per day. I showed him initiation tool & showed him that that patient would start on a 5mcg Butrans. Discussed titration ability after 3 days & supplemental analgesia. He asked if he can just tell the patient to put two 5mcg patches on instead of writing a new prescription for 10mcg. I told him it has not been studied this way & that we only recommend one patch at a time. He said that doesn't make sense. I told him that is the only recommendation I can give him as that is all we have studied. He said this is why he needs to talk to other practitioners. I let him know there would be another series of programs coming up where he could ask physicians questions if he chose, but reminded him that at programs, we only speak on-label.
PPLPMDL0020000001	Parma	OH	44134	5/18/2012	Spoke with floater pharmacist & reviewed Butrans dosing, titration, & supplemental analgesia. Also discussed automatic monthly savings for eligible patients with e-voucher. Discussed availability of 7 tablet strengths of OxyContin & reviewed a12h dosing. Also showed information sheet for OxyContin savings program. She said she would leave the information for the regular pharmacist.
PPLPMDL0020000001	Cleveland	OH	44125	5/18/2012	Spoke with pharmacist, Christine, & reviewed Butrans dosing & titration after day 3 up to a maximum 20mcg. Also discussed OxyContin titration ability every 1-2 days. Reviewed Butrans once weekly dosing & OxyContin q12h dosing. Christine said it is common for OxyContin prescriptions to come in not dosed q12h. She said many physicians insist on prescribing it q8h. Showed her FPI & let her know OxyContin has only been studied q12h & it is not recommended to dose at any other interval. She said she knows, but physicians do what they want to do.
PPLPMDL0020000001	Cleveland	OH	44109	5/18/2012	talked to dr about patient profile,emma,dr said he has a lot of patients on tramadol and is considering Butrans for them.we discussed initiation and titration of Butrans,dr wanted more patient info booklets,asked dr for his commitment to start more patients on Butrans today and next week? dr agreed to do this,focused dr on BWC and commercial insurance patients.

PPLPMDL0020000001	Cleveland	OH	44143	5/18/2012	I asked doc how high he titrates tramadol before going to another agent for pain control. He said maybe 200mg per day. I asked him to try 5mcg of butrans for one of those patients that comes in for a dose adjustment to their tramadol. He just said ok. I spoke to Angie about the covered plans. She confirmed that they do see express scripts plans. I explained the tier 2 co pay for those patients.
PPLPMDL0020000001	Westlake	OH	44145	5/18/2012	I showed the main vis aid a and asked if he would treat these pain patients the same, he said he it depends on what the patients are currently taking as to what dose of OxyContin they would move to. I let him know that he is right and should individualize the dose based on the conversion guide. I reviewed that low dose OxyContin is an option before patients are taking higher doses of hydrocodone and he agreed. I asked him to think of Butrans for those patients who are not yet taking vicodin and are taking NAlDs or tramadol.
PPLPMDL0020000001	Highland Heights	OH	44143	5/18/2012	Spoke to Kristen about the movement of butrans. She said they get a script here and there but she is not seeing a lot of it. I asked if they have any regular customers on butrans. She said she didnt think so. I asked if customers have expressed any feedback or questions about butrans. She personally had not heard anything. I gave her a patient info guide as a tool and explained the proper application and rotation of the patch.
PPLPMDL0020000001	Cleveland	OH	44111	5/18/2012	Spoke with Ed, we discussed Butrans medication guides and I showed him that Butrans can be used with supplemental analgesia. We reviewed that OxyContin should be dosed Q12hr and he agreed. He said that if it is written BID he may let the patient know to take it Q12hr.
PPLPMDL0020000001	Berea	OH	44017	5/18/2012	I told Dr, you want me to keep reminding you about the right patient for Butrans so remember this patient- under 65 years old, insurance through work or BWC, taking tramadol and looking for an increase or switch of their medication. I asked if he sees this patient and he said he does sometimes, he said a lot of them are older than 65 but he will remember Butrans for the younger patients.
PPLPMDL0020000001	Richmond Heights	OH	44143	5/18/2012	Had lunch but doc didnt stay long. I reviewed the butrans selling messages and reminded him that he said he wanted to try butrans. I showed him the initiation guide and that 5mcg would be the starting dose for those patients that fail on 200mg of tramadol. He asked about coverage with medicare. I told him no medicare coverage but well covered commercially and on caresource with a PA. I reviewed the savings cards requirements for commercial patients.
PPLPMDL0020000001	Uniontown	OH	44685	5/18/2012	Asked Dr Stetler if he has seen the patient back in for a follow up on Butrans? Dr said he has not but he has not heard from patient with any concerns. I asked dr if he has patients that are on NSAIDs or Ultram around the clock that could also be candidates for Butrans? Dr said he probably does and realize that Butrans is used in that position. Showed patient profiles and discussed. Dr said he will continue to look for patients. Discussed ESI and Caresource wins for Butrans with Cindy and Kelly(ma).
PPLPMDL0020000001	Mayfield Village	OH	44143	5/18/2012	I showed Joanna the butrans formulary grid. She confirmed that they do participate in those plans. She confirmed that they also have some express scripts. I explained that Express Scripts patients can now get butrans at a tier 2 co pay. I asked her to try to identify one butrans patient a week.<font color=blue><b>CHUDAKOB's query on 05/27/2012</b></font>I am guessing this was a quick call and that is shi you went to the insurance. I am wondering if she is sold on any aspect of Butrans because if not, she will not write because of insurance.<font color=green><b>SIMERTOC's response on 06/05/2012</b></font>Her only objection is that they (dr. Mandel - rheum) has mostly medicare patients. I'm trying to show her where she can write it.<font color=blue><b>CHUDAKOB added notes on 06/06/2012</b></font>I see. Thanks!
PPLPMDL0020000001	Westlake	OH	44145	5/21/2012	I showed the conversions case study with a patient taking 7.5 hydrocodone 4 times per day. I asked if he thought this would be an appropriate patient for OxyContin, he said yes because OxyContin would have a longer duration, and the patient would not have to remember to take their pills. I showed the conversion guide and that patients like this one can go to the lowest dose 10mg OxyContin.
PPLPMDL0020000001	Cleveland	OH	44109	5/21/2012	talked to debbie,pharmacist,about stocking of Butrans and OxyContin,no Rx for Butrans yet and wont stock till they have scripts here,we discussed importance of stocking,showed visual aid and discussed opioid experienced patients and asked debbie if she will give patient info booklets to patients that could be appropriate for Butrans so they can discuss with their HCP's? debbie said yes she will do that,showed OxyContin visual aid, we discussed apps for patients and pain conditions and debbie said they dont recommend OxyContin up to HCP's,showed formulary grids for both products
PPLPMDL0020000001	Lakewood	OH	44107	5/21/2012	I reviewed the appropriate patient type for Butrans- taking tramadol around the clock, looking for a medication adjustment, under 65 years old with insurance through work. I asked if he has just 5 patients that fit this profile. He said that he probably can only think of one, because all of his chronic pain patients are older. I let him know that I was considering him for the Butrans experience program. He said that he is flattered but does not have many commercial insurance patients that could take advantage of the program. I asked if he sees Caresource patients that may be appropriate for Butrans and he said he does, and this may be a more appropriate place to try Butrans. I reviewed the PA requirements. I spoke with Shelly regarding the managed care for Butrans, as well as the medication guide.
PPLPMDL0020000001	Parma	OH	44129	5/21/2012	Dr Lee asked me to review Butrans details with him (dosing, patient type, molecule). Delivered core messages & showed him visual of 3 strengths. Reviewed appropriate patient type & discussed OxyContin q12h as an option for appropriate patients beyond the Butrans range. Discussed once weekly dosing & titration. Dr Lee said pain can be difficult to manage & he is glad there is another treatment option for some of these patients now.
PPLPMDL0020000001	Parma	OH	44134	5/21/2012	Dr George asked how Butrans was being received overall. I told him that Butrans is not for everyone, but a variety of specialties have found a place for Butrans for their patients. I reminded him of our previous discussion about Butrans & asked him if he has had a chance to identify any additional Butrans patients. He said he has given it to one more patient, who has so far reported good results. I asked if he allows supplemental analgesia with Butrans. He said yes. I asked if he has titrated anyone or if the starting dose was sufficient. He said so far, the starting dose has been fine. He asked what all the doses are. Showed 3 strengths of Butrans & reviewed appropriate type/range, including OxyContin q12h as an option for appropriate patients beyond Butrans. Dr George then got called for a patient emergency.
PPLPMDL0020000001	Parma	OH	44134	5/21/2012	Caught Lynda briefly before she went into a room- Positioned Butrans once weekly for appropriate patients taking up to 80mg equivalent oral morphine per day. She said she is keeping it in mind.
PPLPMDL0020000001	Parma	OH	44129	5/21/2012	Quick call as Dr Cowan was running behind. Positioned Butrans once weekly transdermal system for appropriate patients who are taking up to 80mg equivalent oral morphine per day to manage moderate to severe pain from a chronic condition & OxyContin q12h for appropriate patients beyond that range. Handed him Butrans initiation guide & OxyContin conversion guide.
PPLPMDL0020000001	Parma	OH	44129	5/21/2012	Dr Lin picked up the Butrans demonstration box that I had set on the table. She overheard me telling one of the other physicians about Butrans as a once weekly transdermal system of buprenorphine. She asked me how Butrans compares with fentanyl. I told her we do not have comparative data & showed her Butrans appropriate patient type/range, including OxyContin as an option for patients in the more "severe" category. Discussed Butrans as a single-entity opioid. She said she does not like patients to take combo products because they end up getting Tylenol that they don't necessarily need. She said she likes that Butrans is dosed transdermally & that it is a single-entity opioid. Also discussed CIII/abuse/addiction potential & advised that Butrans is not for everyone. Showed appropriate patient type/range in initiation guide. Dr Lin asked me to call her MA, Deena, to schedule an appointment to come in to talk to her more about Butrans because she could not stay to learn more today. I agreed to do this.
PPLPMDL0020000001	Brooklyn	OH	44144	5/21/2012	Spoke with Rhonda & gave her information sheets on Butrans & OxyContin savings programs, reviewing eligibility requirements for card usage. She said they have not seen much activity with Butrans. Discussed appropriate patient type, focusing on appropriate patients who are not well-controlled on NSAID's/COX-2's or tramadol or Vicodin at a low dose around-the-clock. I asked Rhonda when they see OxyContin prescriptions how they are seeing it dosed. Rhonda said they do not see a lot of OxyContin anymore. I asked what she meant. She said they used to have a lot more people on it, but when the reformulation was rolled out, a lot of patients stopped taking it & started taking Opana. She also added that they do not carry Opana at their location because Michelle said she feels safer not carrying it. I agreed that physicians & pharmacies should be cautious when prescribing/dispersing any opioid medication & that opioids are not for everyone. Rhonda said they are careful about who they dispense to because she recognizes that some patients legitimately do need opioid medications
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/21/2012	Asked Dr how he is dosing OxyContin. Dr said he is dosing it Q12h and patients are doing just fine. Discussed what is an appropriate option piece and reviewed appropriate patients and dosing. nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44102	5/21/2012	talked to Vicky,Pharmacy Mgr,about stocking of Butrans and OxyContin.no Butrans Rx here yet,we discussed 6 key selling messages,discussed importance of stocking and Vicky said when they get Rx for Butrans they will order,we discussed insurance coverage for both products and I asked Vicky if she will hand out patient info booklets to appropriate patients so they can talk to their HCP's about Butrans? Vicky agreed to do this.
PPLPMDL0020000001	Parma	OH	44129	5/21/2012	Quick call- Dr Taylor saw me at the window & said she hasn't written Butrans yet but it is in her mind & when she sees a patient for it, she has no problem with writing it. I asked her to simply consider Butrans the next time she is considering a medication adjustment for an appropriate patient. She agreed. Passed back new OxyContin conversion guide.
PPLPMDL0020000001	Akron	OH	44310	5/21/2012	Discussed Butrans with pharmacist and asked if they had seen any additional prescriptions since my last visit. Pharmacy has not seen any new prescriptions. he looked and they have two patients on Butrans 5mcg. Clinton could not remember who the prescribing doctors were. Clinton said they continue to see prescriptions and there are those who pay for it through their prescription insurance. Wanted more copy cards.
PPLPMDL0020000001	Westlake	OH	44145	5/21/2012	Spoke with Lori and Elizabeth, we reviewed the managed care for Butrans, commercial insurance and Express Scripts. Elizabeth said that Express scripts is a big pain for her. We discussed the difference between Tier 2 and 3 coverage.
PPLPMDL0020000001	LAKEWOOD	OH	44107	5/21/2012	Spoke with Ken, we reviewed the medication guide for Butrans, we discussed the managed care for Butrans and the ESI win, he said they do see OPERS patients. He said he has not seen a lot of movement of Butrans. I discussed the use of supplemental analgesia with Butrans. I reviewed the twitter Rx patrol.
PPLPMDL0020000001	Cleveland	OH	44106	5/21/2012	showed dr initiation guide,we discussed short-acting opioid dosage ranges,asked dr if he would see any patients in these ranges this week who need a medication adjustment? dr said yes he will,asked dr if he will consider Butrans for a couple patients? dr said he will if he see's anyone thats appropriate,dr said he doesnt have many patients taking narcotics for chronic pain,we discussed commercial insurance coverage and PA criteria for showed dr Butrans visual aid,we discussed opioid experienced patients starting on Butrans,dr said she's a resident and right now doesnt make opioid decisions she looks to the fellows and attendings for that,told dr i understood and asked what features of Butrans stood out to her? dr said once weekly dosing and transdermal delivery,asked dr if she will consider Butrans for patients that are taking short-acting opioids but need a dosage adjustment? dr said she will but will consult with attendings first,we discussed commercial insurance and PA criteria for Caresource patients.
PPLPMDL0020000001	Westlake	OH	44145	5/21/2012	I asked Dr between nuynta and Butrans, where does he go first, he said that he goes to Butrans when it's a chronic condition. He said that he really likes the fact that Butrans is every 7 days vs every 3 days like duragesic, because he feels it is easier to have someone change their patch every week on the same day instead of 72 hours.
PPLPMDL0020000001	Cleveland	OH	44114	5/21/2012	talked to dr about her starting patients on Butrans every week,dr said most patients have been taking vicodin and when she starts them on Butrans she's seeing patients get their pain in more control.dr said she's happy and will continue starting patients,we discussed BWC and caresouce patients starting on Butrans
PPLPMDL0020000001	Cleveland	OH	44113	5/21/2012	dr said he hasn't started anyone on Butrans but will do so,dr asked about initiation and PA for Caresource patients,we discussed both and i showed dr initiation guide.asked dr for his commitment to start 1 patient on Butrans this week,dr agreed to do so.
PPLPMDL0020000001	Parma	OH	44134	5/21/2012	Quick call- Caught Dr Loyke briefly between patients. Butrans dosing message, showing the 3 strengths. Dr Loyke said he is sure he will write it eventually.
PPLPMDL0020000001	Lakewood	OH	44107	5/21/2012	We discussed Butrans patient type William, I asked if he thinks this would be a good Butrans patient and he said yes, I asked if he has patients like this in his practice and he said he does. Dr said that Butrans is expensive. I reviewed the managed care and savings program. I reviewed the managed care grid for Butrans with Elizabeth.
PPLPMDL0020000001	Mayfield Hts	OH	44094	5/21/2012	Doc said he has about 3 or 4 patients taking butrans and he has not heard anything bad about it. They should be coming back in soon for a follow up. I asked if he prescribed with refills. He said he wanted them to come back in a month. I explained that butrans can be called in or refilled. He said he has one medicare patient on it that is paying out of pocket. I explained that the savings card won't work with medicare. He said he knew that. He asked if Dr. Yokiel is writing butrans. I told him I did not know. Doc wanted to know why he should write butrans over vicodin. I told him there is no head to head data and that butrans is an alternative to vicodin. He said he does not like to manage patients on chronic meds. I explained that if he has patients refilling tramadol or vicodin month after month they may be appropriate for butrans. He said it seems to be going well. I asked him to continue to prescribe for the right patients.
PPLPMDL0020000001	Akron	OH	44333	5/21/2012	asked dr at window if he had any patients on short acting opioids for 3+ months who are complaining about being in pain. Dr said he doesnt prescribe many opioids and if he does its on a prn basis. explained Butrans and gave key selling messages. Dr said he will look it over. nothing else learned.
PPLPMDL0020000001	Parma	OH	44129	5/21/2012	Dr Eicher said he does think he prescribed Butrans for a patient but she "couldn't take it". I asked if he meant she couldn't get it due to managed care or she had an adverse event or if her pain wasn't well-controlled. He said she had pancreatic cancer & multiple other medical problems & Butrans just did not work well for her. Discussed 3 strengths & titration ability as well as ability to take supplemental analgesia with Butrans. He said he would look for other patients. Reviewed Butrans formulary grid & showed favorable OxyContin coverage for Medicare patients on grid.

PPLPMDL0020000001	Lakewood	OH	44107	5/21/2012	I asked Dr to think of a patient who is taking tramadol around the clock, younger than 65 years old and meets the indication for Butrans. He said that he does have a patient like this and he needs to call him. We reviewed how to initiate Butrans based on the amount of tramadol he is taking. Dr said that he has Anthem insurance so he does have commercial. He agreed to start this patient on tramadol and give them a trial card and savings card. We reviewed that Butrans can be used with supplemental analgesia. I let him know he can titrate in 3 days if needed.
PPLPMDL0020000001	Parma	OH	44129	5/21/2012	Spoke with Jennifer, pharmacist, & showed information sheets on Butrans & OxyContin savings programs. Discussed eligibility requirements for both programs & reviewed e-voucher. Jennifer said they do have a few patients on Butrans regularly. She added that one patient recently was titrated from the 10mcg to 20mcg. I asked if, when she sees an OxyContin prescription, she is seeing it dosed properly, q12h. She said usually it is written q12h, although sometimes she does see q8h. Reminded her that OxyContin is only recommended to be dosed q12h & the only when has been evaluated for safety & efficacy when dosed q12h. I asked if she sees it written BID. She said occasionally. Discussed 7 tablet strengths for flexibility in titration & asked if he would be willing to call the physician when she sees Butrans written for anything other than q12h. She said she would counsel patients on q12h dosing to help them get the most out of their experience with it.
PPLPMDL0020000001	Parma	OH	44134	5/21/2012	Dr Scanlon said he is still writing Butrans & that a lot of patients are asking for refills. He added that he likes that he can call it in & write refills since it is CIII. Positioned Butrans for patients who are 40-60 years old, still working with insurance, who have a chronically painful condition if he is going to start them on an opioid or escalate the dose of their current short-acting opioid medication. Dr Scanlon said he thinks he can find more patients who fit that description. He added that he usually does use Butrans instead of escalating the dose of their current opioid. He asked for more trial & savings cards because he was looking for them last week & could not find any. I asked what type of patient he typically uses OxyContin in. He said usually patients with severe pain or that he will maintain them on it when pain management sends them back to him on it. Showed 7 tablet strengths to Brian about Butrans. Asked if he has seen any prescriptions for Butrans recently. Brian said he has not but does have it in stock. Reviewed Butrans selling messages and explained steady state from FPI. Quick discussion in Rx patrol.
PPLPMDL0020000001	Akron	OH	44305	5/21/2012	Spoke with Jim, we reviewed the Butrans FPI and use of supplemental analgesia, I reviewed the medication guide and asked him to give them out to Butrans patients, or those who are taking tramadol and may be looking for another option. We reviewed the managed care info for Butrans and that Express Scripts is tier 2. He does see some OPERS patients. He asked about Q8hr dosing with OxyContin and I reviewed that OxyContin is only indicated Q12hr and we reviewed the main vis aid. I asked if he sees a difference between when a dr prescribes OxyContin Q12hr vs BID and he said yes. He said that he might write on the bottle Q12hr in parentheses and let the patients know to take it Q12hr.
PPLPMDL0020000001	Cleveland	OH	44111	5/21/2012	Spoke with Dana and Steve(ma) about Dr Heim's use of OxyContin and Butrans. Steve said that he does use a good amount of OxyContin but wasn't sure where he is using it most. Staff doesn't remember Dr Heim using Butrans. I gave all key selling message for Bugtrons edvand positioned Butrans for his patients on Ultram and vicoden. Gave OxyContin conversion guide and explained conversions.
PPLPMDL0020000001	Copley	OH	44321	5/21/2012	Dr Ortega said he wishes he would have had a tape recorder to record the feedback a patient just gave him about Butrans. I asked him to tell me about it. He said this patient was truly elated with the pain control they received on Butrans. He added that the patient is on Butrans 10mcg & told him today that Butrans is working better for them than any pill they have ever taken & even said the patient reports feeling 100% improvement in pain. I asked if this solidifies his confidence in Butrans. He said it does. I asked if he has other patients like this one who may benefit from Butrans. He said he does. I asked him to identify them, initiate Butrans if appropriate, & give them a patient information booklet with the prescription. He agreed. I asked if he has any similar stories to share with me about OxyContin. He said he does not today but that he finds it to be an effective product for the right patients. I agreed that OxyContin is not for everyone.
PPLPMDL0020000001	Parma	OH	44129	5/21/2012	I reviewed the Butrans selling messages with doc and Judy, MA. She began to say that its not covered on medicare. I told her no but showed the formulary grid and asked her if she has any patients with Anthem or medical mutual. She said she does have some. I explained that those patients can get butrans for about \$15 with the savings cards after a trial month. Left her formulary grid and initiation guide.
PPLPMDL0020000001	Richmond Heights	OH	44143	5/21/2012	Asked dr if he could provide me with some clinical findings he has had recently with Butrans. Asked dr where he using it most? Dr said he is using it for patients with low back disorders to arthritis. Asked dr to provide me with efficacy information with Butrans. What pain score improvements have you seen. Dr said he has had very good succes clinically and didnt know any pain score improvements. Dr did say that not all his patients have had good efficacy. I asked dr what he does if a patient isnt getting enough pain relief. Dr said he increases the dose and it helps. Dr said he only has a few patients on the 20mcg dose. Most patients do very well on the 10mcg. Explained Butrans formulary win with ESI. March Fox does PA's and was veryu glad to get the ESI information. Explained the trial offer and copay card info.
PPLPMDL0020000001	Akron	OH	44333	5/21/2012	showed dr the Butrans patient profiles and asked him if he happened to have any of the ones described. Dr said possibly. I asked if dr had an issue with Butrans clinically? Dr said no. I asked if he had problems with the side effects listed in the FPI. Dr said no. I asked dr why he has not prescribed Butrans since last year. Dr said he doesn't know but most likely it was coverage. nothing else learned.-font color=blue>->CHUDAKOB added notes on 05/31/2012</b>->-font>-Cliff, it is good to see you asking good questions rather than giving reminders. I also like the next call objective, which is based on an objection from the previous call. You are getting the hang of it!! Nice work!
PPLPMDL0020000001	Akron	OH	44319	5/22/2012	Quick call- Dr Fedorko said he has been out of the country & just returned, so he was running far behind. Positioned Butrans for appropriate patients, who he sees this week who meet the indication & for whom he is considering a medication adjustment for their pain. He said he would. Left sealed article.
PPLPMDL0020000001	Cleveland	OH	44130	5/22/2012	I reminded Dr Jugulion of previous discussions when he has told me that he does not prescribe pain medications. I asked what he does when patients who are established with him complain of pain. He said there are several pain management specialists in the area, so he just refers them out immediately. He added that he will not even prescribe pain medications for a patient after they have surgery & that he leaves all of that up to other doctors. Discussed importance of appropriate patient selection. He said he recently attended a conference where they discussed the epidemic of prescription drug abuse in the United States. He said it is alarming how big of a problem it is. I agreed that abuse is a problem & stressed again the importance of selecting legitimate patients in pain as well as the importance of counseling patients on the risk of abuse/addiction when taking any opioid product, including Butrans or OxyContin. Dr Jugulion said he thinks the idea of Butrans is a good one, but added that he thinks it is only a matter of time before it gets into the wrong hands & people abuse it. I told Dr Jugulion that because Butrans is a CIII opioid, it does carry abuse & addiction potential, & this is why practitioners must always be cautious in prescribing.
PPLPMDL0020000001	Cleveland	OH	44130	5/22/2012	Spoke with MA Carla who said Dr Khoobball wasn't in today. Reviewed Butrans once weekly transdermal system & discussed appropriate patient type, including OxyContin as an option for appropriate patients beyond Butrans range. Also showed savings information for both products. She said he doesn't prescribe CII opioids as a general rule, but he does have patients on other short-acting opioids. She said to come back another day to discuss Butrans with him further as she is sure he will be interested.-font color=blue>->CHUDAKOB's query on 05/31/2012</b>->-font>-Ashleigh, what is Carla's specific role in the office? I know she is an MA, but what is her specific job. The value you can provide her can be very beneficial if you tailor it to her specific role in the office.-font color=green>->APSEGAS's response on 06/01/2012</b>->-font>-As Dr Khoobball has told me, she does "everything". She is actually his only staff member, so she really does do everything from prior authorizations, to patient calls for refills/appointments/complaints/questions. I have been working on getting "in" with her during the time I have been calling on this office. I hope that answers your question.-font color=blue>->CHUDAKOB added notes on 06/05/2012</b>->-font>-The question was really more for you. If you can tailor your calls to her about what she does, this will help her see the value that you provide.
PPLPMDL0020000001	Parma	OH	44129	5/22/2012	Dr Moysaenko asked me to go over Butrans with him again. Reviewed core messages & showed initiation guide pg 6 to demonstrate appropriate patient type/range. He asked if it was on formulary at the hospital. I told him that I have spoken with the hospital pharmacists & they have told me they will get it for patients who come in on it but it is not officially on the formulary at this time. Dr Moysaenko said it is probably because Butrans is supposed to be used chronically & the hospital is more of an acute setting. I showed indication & agreed that Butrans is for patients with moderate to severe chronic pain. Discussed OxyContin q12h as an option for appropriate patients beyond Butrans range. I asked his thoughts on long-acting opioids. He said he hates using opioids. I asked if he meant long-acting opioids only or all opioids in general. He said all of them. I asked if he sees a place for long-acting opioids for chronic conditions. He said yes. I asked if he has patients who fit the type we were discussing & he said he does. He asked about cost. I told him it depends on insurance & presented formulary grid & trial/savings program. Discussed broad formulary coverage for OxyContin. Showed Butrans demo kit & patch, along with disposal unit. Discussed importance of appropriate patient selection & discussed Butrans as a CIII opioid with abuse/addiction potential. Showed adverse event rates in FPI. He said he thought the nausea rates were high for Butrans.
PPLPMDL0020000001	Lakewood	OH	44107	5/22/2012	Responded to email from Karen Vann, requesting additional details on the educational webinar scheduled for 5/22/12.->-font>-In email, reiterated webinar times and general information. K. Vann was in receipt of the handout and feedback form.
PPLPMDL0020000001	Lakewood	OH	44107	5/22/2012	As the second in a two-part educational series, presented the two ASAP modules "Prevention" and "Referral" to case managers and nurses with Buckeye Health. Presentation was via webinar, and attendees received a copy of the handout (paper) and a feedback form.
PPLPMDL0020000001	Uniontown	OH	44685	5/22/2012	I asked dr if she feels that I have positioned Butrans correctly for her practice. Dr said that I have and the patients on NSAIDs and vicoden seem most appropriate. I asked dr if she would be able to find a patient soon. Dr said that she will try. Discussed new ESI win and doctor said she has ESI patients. Told dr to use the trial offer and copay card for her new Butrans patients.
PPLPMDL0020000001	Parma	OH	44129	5/22/2012	Spoke with pharmacist & gave her information on Butrans trial/savings & OxyContin savings cards. Reviewed eligibility requirements for both programs. Also discussed the importance of adhering to the OxyContin q12h dosing interval. She said she sees it written q12h & q8h. Discussed 7 tablet strengths for flexibility in titration & asked her to advise practitioners of this when she sees prescriptions written for OxyContin for dosing intervals other than q12h.
PPLPMDL0020000001	Cleveland	OH	44122	5/22/2012	Met with Pam, Timia & Lynn - both except Pam are new to Care Source. The Cleveland office has expanded from about 35 people to over 100 when all new people are hired. This is due to the new requirements by Ohio Medicaid as well as the RFP for Medicaid lives and the Dual-LTC lives, which are being bid right now. They have also established a new partnership with Humana because Humana doesn't have experience in this market. Care Source will remain with Caremark as their PBM. I presented the new RX Safety Matters brochure to them where both Lynn and Timia were impressed with it. Lynn expressed interest in scheduling a LELE program for this Fall in Cleveland. She also is planning to get approval by Care Source to distribute some of our brochures to members when they are doing face to face calls. She will order them through me when they receive approval. Pam said she still received Purdue resources and brought up the Med Ed catalog. Both are interested in seeing it for the Case Managers.
PPLPMDL0020000001	Cleveland	OH	44130	5/22/2012	Showed OxyContin core visual aid page 6, showing q12h dosing interval. I asked Dr Diab if this is how he prescribes OxyContin. He said "sure" & started to walk into a room. Let him know Butrans is now Tier 2 on Express Scripts national formulary.
PPLPMDL0020000001	Cleveland	OH	44130	5/22/2012	Spoke with Colleen, pharmacist, & gave her information sheets on Butrans trial/savings & OxyContin savings programs. Reviewed eligibility requirements & reminded her about automatic monthly savings through e-voucher. I asked when she sees an OxyContin prescription, how she is typically seeing it dosed. She said usually q12h, although she has had some instances of q8h. She asked if this an acceptable dosing interval. I told her we have never studied it with a dosing interval other than q12h & therefore it is not recommended. She said when she sees that, she does call the practitioner. She said the HCP's are typically insistent on the q8 dosing. I asked if she sees BID dosing. She said sometimes. I asked her to suggest q12h dosing to those practitioners in order for patients to get the most out of their experience with OxyContin. She said that was a good idea & agreed to do that.
PPLPMDL0020000001	Copley	OH	44321	5/22/2012	I asked dr if he had any reservations clinically or otherwise with Butrans? Dr said that he did not. I asked dr if he had patients in mind for Butrans? Dr said that he did not. I asked dr that based on past discussions about Butrans product positioning, clinical discussions, and managed care coverage has helped him formulate a patient in his practice. Dr said he will prescribe it in due time. Explained Butrans key selling messages to staff and ESI win to TJ(call backs and PA's) and rest of staff.
PPLPMDL0020000001	Independence	OH	44131	5/22/2012	Dr Sundaram said he was running behind & didn't have much time. I handed him a Butrans application & rotation DVD & reminded him how he had told me that he has had a hard time "selling" Butrans to patients. I explained that the DVD could be utilized as a tool for him to teach patients more about Butrans & how it is used. I asked if he thought this would be useful in teaching patients. He said he thought that was a great idea. I gave him one DVD & asked him to simply identify one patient who he thought would be a good candidate for Butrans & either show them or give them DVD for them to watch. He agreed to do this & said he would keep it out on his table to remind him. Broad formulary coverage for OxyContin message.
PPLPMDL0020000001					

PPLPMDL0020000001	Cleveland	OH	44104	5/23/2012	talked to dr briefly about his comfort level prescribing OxyContin in elderly patients,dr said he isnt prescribing OxyContin or percocet anymore not even for his elderly patients in the office.dr said if patients are in nursing home or hospice he will prescribe OxyContin.showed OxyContin visual aid,briefly discussed pain conditions with dr and dr said again he's not prescribing OxyContin for patients anymore.dr said he will prescribe Butrans for a few patients and just refilled a patients Butrans Rx so he's happy with that so far.we discussed appropriate patients for Butrans,showed initiation guide and asked dr if he will start a couple new patients on Butrans this week?
PPLPMDL0020000001	Cleveland	OH	44130	5/23/2012	Re-introduced Butrans to Dr Gundapaneni, delivering core messages. Showed him initiation/titration guide & slide-out tool to choose appropriate starting dose of Butrans depending on the patient's current dose of opioid medication. Discussed OxyContin q12h for appropriate patients beyond the Butrans range. I asked him to think of patients who are 40-60 years old, working with insurance, who suffer from pain from osteoarthritis or low back pain conditions for whom he is considering a medication adjustment. I asked him to consider Butrans if appropriate & at least offer it to patients who he identifies as potential Butrans candidates. He said he would.
PPLPMDL0020000001	Akron	OH	44307	5/23/2012	Spoke with Mary(Rn) about new OxyContin conversion and titration guide and reviewed Butrans key selling messages. Asked Mary if her patients on OxyContin like the Q12h dosing. Mary said that she is told that taking two pills a day is a good thing for most. Discussed appropriate patient selection from main visit and asked her to speak with Dr about appropriate patient selection. Discussed Butrans patient selection and asked if she felt the dr has patients that fit the indication. Mary said yes but a select few because most are past Butrans.
PPLPMDL0020000001	Middleburg Heights	OH	44130	5/23/2012	Re-introduced Butrans to Dr Mistry & reminded him of his excitement the last time we discussed it. He said he does think it is something he will be able to use. Spent time going over the appropriate patient type/range & discussed formulary coverage, asking him to keep patients in mind who are 40-60 years old & still working. Discussed patients for whom he is ready to start on an opioid or those who he has started on short-acting opioids like tramadol or Vicodin around-the-clock who return upon follow-up or call asking for a medication adjustment. Dr Mistry said that is a very common patient type. I told him now he has another option to treat some of those patients, if they meet the full indication for Butrans. Went over dosing & titration & showed him demo kit/patch. Discussed Butrans as the only long-acting CII opioid but cautioned him about abuse/addiction potential due to its opioid properties. Presented trial/savings program. I asked Dr Mistry if Butrans is truly something he can see himself prescribing for appropriate patients. He said it definitely is. Spent time with his nurse, ensuring she knows where to find savings cards in their closet. Reviewed appropriate pt type with her & discussed application/rotation. Dr Mistry said he has a lot of experience using OxyContin & that he finds it to be the most effective pain medication if used for the right people. I agreed that appropriate patient selection is important. I asked if he would continue to write it & he agreed
PPLPMDL0020000001	Middleburg Heights	OH	44130	5/23/2012	Re-introduced Butrans to Dr Munjapara & reviewed appropriate patient type. Showed him initiation/titration guide displaying appropriate patient type/range. Also discussed OxyContin q12h as an option for appropriate patients beyond the Butrans range. Dr Munjapara said he does have patients on OxyContin & thinks it is a good medication for the right patient. Discussed importance of appropriate patient selection with all opioids, including Butrans & OxyContin. Showed him Butrans demo kit & patch & discussed Butrans as the only long-acting CII opioid analgesic. Also warned that Butrans carries abuse & addiction potential like other opioids. I asked him to think of patients in his practice who he is either thinking of starting on around-the-clock opioids or who he considers a medication adjustment for. Showed him starting doses & discussed titration & ability for patients to take supplemental analgesia with Butrans. I asked if he can see himself using Butrans for appropriate patients. He said he can. He asked about insurance coverage. I asked him to think of patients who are 40-60 & still working, have insurance, who meet the indication & description we talked about. He said he would try it for some of those patients.
PPLPMDL0020000001	Akron	OH	44333	5/23/2012	Introduced Butrans patient experience program to Dr Brown and Elyse. They very much thought it would be a good idea to keep better track of their patients on Butrans without all the extra paperwork. Reviewed Butrans clinical selling messages with main visit, steady state, use of supplemental analgesia. Dr said she is trying hard to think of Butrans as an option and needs to be reminded. Dr said her patients are doing quite well on Butrans and have had great pain relief. Discussed Express Scripts win with commercial and Med D. Asked about OxyContin and dr said she just wrote two prescriptions earlier today. Reviewed new conversion guide and discussed appropriate patient selection.
PPLPMDL0020000001	BEDFORD	OH	44146	5/23/2012	Spoke with Carla, a new pharmacist at this location. Presented information on Butrans & OxyContin savings programs & reviewed eligibility requirements. She said she has not seen any Butrans prescriptions but has filled some OxyContin scripts. Reviewed Butrans appropriate patient type/range. I asked how OxyContin is being dosed when she sees prescriptions for it. She said usually BID, but sometimes q12h or q8h. I reminded her that we have only studied & approved OxyContin for q12h dosing & asked her to remind physicians of this when the opportunity presents itself. She said she would counsel patients on q12h dosing of OxyContin.
PPLPMDL0020000001	Bedford	OH	44146	5/23/2012	Dr Moufawad said he has been seeing an increase in referrals from primary care physicians for patients who are on extremely high doses of opioids. He went on to say that these patients have been very difficult to treat & they come in yelling for pain medication. He said he does not want this type of patient as he does his best to have patients on the lowest opioid dose possible for each patient. He said around 80% of his practice is on a mild to moderate level of pain medications. He also said he has been using Butrans with success. I asked him to consider OxyContin q12h for appropriate patients who are on higher doses of opioids from primary care.
PPLPMDL0020000001	Bedford	OH	44146	5/23/2012	Spoke with Lin, a pharmacist filling in at this location. She said she hasn't really seen Butrans stocked at any of the locations she has worked at. She said each of them probably just order it in on a case-by-case basis rather than keeping stock on hand. Reviewed appropriate patient type & presented information on trial/savings programs. Discussed eligibility requirements. Also gave her information on OxyContin savings information. Discussed usage of card including cash-pay patients using it every 14 days if their prescription is written that way.
PPLPMDL0020000001	Akron	OH	44320	5/23/2012	Dr told me that he has decided to not use oxycodone or OxyContin because of the potential harm that it causes. Dr said that Butrans seems like a product that he feels more comfortable using for his patients in moderate to severe pain. Dr said that he would try it on the next patient with insurance and is on a short acting opioid.
PPLPMDL0020000001	Akron	OH	44320	5/23/2012	Reviewed Butrans case studies and asked dr if she had any patients that fit those descriptions? Dr said she does have them and asked if Butrans is on Medicare or medicaid. Asked dr what percentage of her patients fall into that category. Dr said a large portion of the, are medicare or medicaid. Asked if she did indeed have commercial patients under 65 and have prescription insurance though their work? Dr said she does and said that there are those that are taking short acting opioids. I showed dr conversion scale and asked her to consider Butrans for those patients that fit the indication. Dr agreed.
PPLPMDL0020000001	Cleveland	OH	44106	5/23/2012	dr said he knows Butrans is available,thinks its a good option for patients but hasnt had anyone in mind for Butrans recently.showed patient profile,william,asked dr if he would consider Butrans? dr said yes he would if insurance covered it,we discussed express scripts coverage,dr said at main campus its mainly medicare and caresource patients,we discussed PA criteria for Caresource patients,asked dr if he would consider starting 1 patient that looks like william, on Butrans? dr said yes he will.
PPLPMDL0020000001	Cleveland	OH	44113	5/23/2012	talked to dale about patients he's starting on Butrans,asked dale how they are doing and any feedback? dale said patients are doing well,no complaints and they are getting insurance to cover Butrans so that makes it easier.asked dale if he will continue starting more patients on Butrans? dale said yes he will,we discussed PA Criteria for Caresource patients and discussed BWC and commercial insurance coverage for Butrans.
PPLPMDL0020000001	Fairlawn	OH	44333	5/23/2012	asked dr if he has any patients that have been on tramadol or vicoden for 3+ months. Dr said he is sure he does and said he knows about Butrans. Dr said the 7 day patch is nice and that the CII is also a good thing. nothing else learned.
PPLPMDL0020000001	University Heights	OH	44121	5/23/2012	I asked doc what he keeps him from prescribing butrans. He asked if it was expensive. I told him that commercially insured patients can expect to pay about \$15 with a savings card and butrans is covered on BWC. I asked him to try one patient that is on BWC. I said maybe.
PPLPMDL0020000001	Cleveland	OH	44106	5/23/2012	dr said he's starting patients on Butrans,still likes it and thinks its a great option for patients.asked dr who is appropriate for Butrans? dr said patients taking any 1 of the short-acting opioids for chronic pain where the pain is persisting or worsening and patients are asking for more pills,dr said thats where he will discuss Butrans.i asked dr if he will start a couple new patients on Butrans today? dr said he will see who comes into the office and yes he will start some patients on Butrans,we discussed insurance coverage-express scripts,commercial insurance plans and Caresource PA criteria for Butrans
PPLPMDL0020000001	Cleveland	OH	44113	5/23/2012	talked to dr about her patients with express scripts coverage and how Butrans is a Tier 2 and what that means,dr said ok that was good to know.dr said most of her Butrans patients are elderly though and she's still having success getting PA's approved.i asked dr if she would consider a few of her patients with Express Scripts,under 65yrs,to start on Butrans? dr said yes she will do that.i asked dr if she will do that this week? dr said yes.
PPLPMDL0020000001	Cleveland	OH	44104	5/23/2012	dr said she started 1 patient on Butrans last week,patient was taking percocet for chronic pain wasnt controlled so she started the patient on Butrans 5mcg,dr said patients doing well and she will follow-up with her next week,to see if she needs to increase dose to 10mcg,told dr that was great to hear she started another patient on Butrans.asked dr if she has more patients like this 1, to start on Butrans this week? dr said yes she will keep talking to patients and see what she can do.
PPLPMDL0020000001	Cleveland	OH	44113	5/23/2012	asked dr how her patients are doing on Butrans? dr said they are doing well,no complaints and she's seeing improvements in pain levels for these patients.i asked dr if she will continue starting patients on Butrans? dr said yes she will,we discussed PA criteria for Caresource patients.
PPLPMDL0020000001	Parma	OH	44134	5/23/2012	Dr Hernandez said his last patient who he just saw is on Butrans & is doing great. He said he has been pleasantly surprised at the results he has gotten, even when switching patients from high doses of opioids like Opana. I asked what his patients like most about Butrans. He said hands down it is the pain relief they get from it. He said that that is more important to them than the once weekly dosing & the fact that it is a patch. Discussed trial/savings program for Butrans & savings cards for OxyContin. He said he gives them to patients when he can, but he does see a lot of Medicare, Medicaid, & BWC, so he cannot always use them. Discussed prior authorization requirements for Caresource. He said that was good to know. I asked him to continue to prescribe Butrans & OxyContin where appropriate & he agreed.
PPLPMDL0020000001	Akron	OH	44303	5/23/2012	Introduced Rx Patrol program to Rod. Explained benefits to independent pharmacies. Rod asked if the website also had a place to document fraudulent prescriptions. I did not know the answer. I advised Rod to get on the website and check it out.
PPLPMDL0020000001	Cleveland	OH	44130	5/23/2012	Dr Kansal said he still thinks OxyContin is a good, effective medication for the right patients, but added that he has recently evaluated his practice & has referred many of his patients who were on higher doses of opioids out because he does not want to treat pain anymore. He also said he is not taking any new patients with pain unless he ends up getting them from his on-call days. He asked me how Butrans is doing & what the market share was. I told him I do not know about market share & that a variety of types of physicians have found Butrans to be a good option for some of their patients, although like any medication it is not for everyone. I asked him why he asked me that question. He said it would tell him how Butrans is doing. I told him I have a feeling that the only way he would really be able to tell how good of a drug Butrans is is if he got his own clinical experience. He said he has his doubts about Butrans. I asked him what his concerns are. He said patients don't want long-acting opioids because they want to take oral medications. I reminded him about the ability to take supplemental analgesia. I asked Dr Kansal if he would give me the opportunity to prove Butrans' worth & explained Patient Experience Program. He looked over the information & said he would do it. I told him he has to be sure he has 5 appropriate pts with commercial insurance & be sure that he actually gives them the kit due to limited avail of kits. He promised & said this will be easy for him
PPLPMDL0020000001	Barberton	OH	44203	5/23/2012	I asked dr if he has patients taking NSAIDS around the clock for pain? Dr said he does but he will not use any scheduled products. Gave key selling messages for Butrans and explained product placement. Dr said he will review information. nothing else learned.
PPLPMDL0020000001	Barberton	OH	44203	5/23/2012	I asked dr if the patients he placed on Butrans last year on are it. Dr said that he does still have patients on it. Asked dr how the patients are doing on Butrans. Dr said that is is working well with no problems. I asked dr since he says Butrans works and since you told me that his patients have had no side effect issues: why are you not prescribing Butrans anymore? Dr said he didn't know why and that he needs to find the right patient. I reviewed the patient profiles with dr and asked if he had any patients that fit the case study profiles. Dr said that he probably does and that he will look more into using Butrans.
PPLPMDL0020000001	Akron	OH	44313	5/23/2012	Introduced Rx Patrol to Jason. Explained how it works and the programs use. Jason said that Tom has received information in Rx Patrol before and he sees it veru valuable for the independent pharmacies.
PPLPMDL0020000001	Sagamore Hills	OH	44067	5/24/2012	Dr Lenox said he feels bad that he has not prescribed Butrans yet. I asked him what has held him back. He said he doesn't know. He said he thinks he likes the idea of having patients on Butrans more than keeping them on Vicodin. He said he does not know what it doesn't pop into his mind when he is with his patients. I asked him how common it is that he prescribes a short-acting opioid around-the-clock for a patient & they return asking for a medication adjustment (either an increase in dose or dosing interval). He said it is fairly common. I asked him why not try Butrans once weekly transdermal system for patients like that? He said that was a good idea. Discussed ability to take supplemental analgesia with Butrans. Also discussed insurance coverage, asking him to focus on patients who are 40-60 years old, still working, who fit the indication & description we were discussing. He said he is going to really try to find someone to try Butrans on. Discussed OxyContin q12h for appropriate patients beyond Butrans range. He said he really doesn't prescribe CII medications.
PPLPMDL0020000001	Parma	OH	44129	5/24/2012	Caught Dr Chagin briefly at the window. Told him I have a new program for Butrans, called the Patient Experience Program that I have limited quantities of. I asked if we could discuss the details of it, but he said he is trying to get out of the office to leave for vacation, so he could not talk today. He said that he has been thinking of Butrans more lately & that he is interested in hearing more about the program. He said to come back next week.

PPLPMDL0020000001	Cleveland	OH	44113	5/24/2012	talked to deb about patients she's starting on Butrans,no complaints from patients,asked deb if she will continue prescribing Butrans for appropriate patients this week? deb said yes she will.we discussed PA criteria for Caresource patients and asked deb to keep starting these patients on Butrans,deb said she will and that she got another PA approved this week.
	Cleveland	OH	44103	5/24/2012	showed dr OxyContin visual aid,we discussed pain conditions where OxyContin could be appropriate for low back pain or osteoarthritis,dr said she prescribes a lot of OxyContin for different pain conditions and thinks its a good long-acting opioid.showed dr OxyContin conversion guide,we discussed conversions from percocet to OxyContin and vicodin to OxyContin,i asked dr if she will start a couple new patients this week on OxyContin? dr said yes she will,focused dr on uhc/aarp and silverscript patients to start on OxyContin.dr said she does have 1 patient on Butrans and will keep trying to get PA's approved by Caresource as she likes the fact that Butrans is a patch and dosed once a week.showed dr initiation guide,we discussed appropriate patients,initiation and titration of Butrans.asked dr for her commitment to start a couple new patients on Butrans in the next week? dr said yes she
PPLPMDL0020000001	Northfield	OH	44067	5/24/2012	Dr Lango said she prescribed Butrans for a patient but the patient didn't want to stay on it because it made her feel sick. I asked her to tell me more about that patient. She said that the patient complained of opioid-type side effects like nausea & headache. She added that the patient did report, however, that it was very effective for her pain control. Dr Lango said she encouraged the patient to stay with it, but the patient did not want to. She said this patient had been on every other opioid possible at some point, so she probably was not ideal to try on Butrans. Reviewed appropriate patient type/range, focusing her on appropriate patients getting refill after refill of Vicodin or tramadol. She asked about using it for older patients who she puts on fentanyl 12.5- could she use Butrans for one of those patients if they did not tolerate the fentanyl at the lowest dose. Discussed managed care coverage, including Medicare plans & prior authorization requirements. I told Dr Lango it is possible they would approve that & told her she can try if she has patients who she really thinks could benefit from Butrans.
PPLPMDL0020000001					Discussed OxyContin as an option for appropriate patients beyond Butrans. Dr Lango said she has some patients on it & finds it to be a good medication for the right patients.
PPLPMDL0020000001	BEACHWOOD	OH	44122	5/24/2012	Spoke briefly with Sandra, pharmacist, & gave her information on Butrans & OxyContin savings programs. Also reviewed eligibility requirements for both programs. She said she hasn't seen any Butrans prescriptions so she doesn't carry it. She said she really doesn't see very much OxyContin either.
PPLPMDL0020000001	Cleveland	OH	44106	5/24/2012	dr said she's given a couple patient info booklets to patients but not started anyone yet,dr said she will do this.we discussed appropriate opioid experienced patients,showed initiation guide and asked dr for her commitment to start 1 patient this week on Butrans? dr said she will do that.
PPLPMDL0020000001	Mayfield Heights	OH	44124	5/24/2012	I asked doc what feedback he has had with butrans patients. He said he has not heard anything so assumes everything is good. He said they never say when things are working good only when they dont work. He confirmed that he is prescribing with refills. I asked him if he is using supplemental analgesia with butrans. He said if they need it, sure. I showed him the section 2.4 of the FPI on supplemental analgesia. He still had savings cards but said he was giving them to patients. He did say that he has one medicare patient on it that could not use the card but he is still on it because it is working for him. I showed him the formulary grid and asked him to focus on commercial plans. He said he does participate in express scripts. I told him about the preferred tier 2 copay with express scripts.
PPLPMDL0020000001	Cleveland	OH	44113	5/24/2012	dr said he's still starting patients on Butrans,no complaints from patients and he will continue prescribing,we briefly discussed patient info booklet and asked dr if he would be sure every patient has the booklet showing the application/rotation section,dr said he does give this to patients and will continue doing so,told dr i appreciated his commitment to starting more patients on Butrans.
PPLPMDL0020000001	Mayfield Heights	OH	44124	5/24/2012	Quick call as doc was leaving for the other office.....I reminded her that she recently expressed interest in butrans. I reviewed the key selling messages, showed her the patch and asked her to consider butrans when patients come in for a dose adjustment to their tramadol or vicodin.
	Cleveland	OH	44104	5/24/2012	I discussed Butrans 6 core selling messages with dr,dr focused on once weekly dosing and CII,dr said she has patients in mind for Butrans,dr talked about patients calling in early for refills and thinks this would be a great option for them dr said she doesn't like treating chronic pain but has to do it so she just gives refills because she has to treat the pain,showed Butrans FPI and initiation guide for discussion,we discussed appropriate dosage ranges of short-acting opioids and starting patients on appropriate Butrans dose,asked dr if will start a couple patients on Butrans in next week, dr said yes she will.i asked dr what would be a fair amount of time to follow-up with her and see how these patients are doing on Butrans? dr said 1st week in June would be good as that gives her today and tomorrow and next week is short-week,talked to Carolyn,RN,about patient info booklet,initiation of Butrans,titration and we discussed commercial insurance patients using initial trial offer cards and we discussed PA criteria for Caresource patients,Carolyn handles all insurance for dr.
PPLPMDL0020000001	Mayfield Heights	OH	44124	5/24/2012	I told doc that I was reminding her of the appropriate butrans patient because she said she forgets. She said she just has not found the right patient. I asked her how high she tends to titrate tramadol and vicodin. She said tramadol 6x/day and vicodin maybe 4-6x/day. I showed and explained that those patients could start on the lowest dose of butrans, 5mcg and still take supplemental analgesia as needed. She said there is still the problem of insurance. I explained that those patients that have insurance through their employer can still get butrans for about \$15/month and a one month trial. She said she will try.
PPLPMDL0020000001	Beachwood	OH	44122	5/24/2012	Spoke with pharmacist, Alan, who said they have started to see an increase in Butrans prescriptions of all strengths. Discussed appropriate range of patients & dosing. Let him know that 5 & 10mcg are the two starting doses & patients may be titrated every 3 days to a maximum of 20mcg/hr. He said he has not heard any feedback from patients. He said they did not need any Butrans or OxyContin savings cards today.
PPLPMDL0020000001	Akron	OH	44312	5/24/2012	Gave Greg Rx Patrol information and explained how the website works. Greg said he didnt know about it but would look at it and that it sounds like a good resource. No Butrans prescriptions have come through. Gave Greg steady state info with Butrans and reviewed dosing and titration. Gave the new OxyContin conversion guide and explained conversions.
PPLPMDL0020000001	Akron	OH	44312	5/24/2012	good conversation at window. Gave all key selling messages with Butrans and positioned Butrans for patients failing/or requiring a dose adjustment on tramadol or vicodin. Asked dr if he uses tramadol or vicodin to treat pain. Dr said he does use both. Dr was glad to hear Butrans is a schedule III medicine and likes the patch. Dr asked if there is a dose adjustment for the elderly. Referred dr to FPI section 1.3 elderly. Dr said he will look over FPI and initiation and titration guide. Told dr i will follow up on upcoming lunch.
PPLPMDL0020000001	Cleveland	OH	44114	5/24/2012	talked to Elaine about patients she considers appropriate for Butrans,showed her Butrans initiation guide discussed short-acting opioid dosage ranges and asked Elaine if she will start a couple patients this week on Butrans when patients need a dosage adjustment in 1 of the short-acting opioids listed,she agreed to do this.we discussed initiation and titration of Butrans
PPLPMDL0020000001	Beachwood	OH	44122	5/24/2012	Roberta said she doesn't think she has really used much Butrans. I asked her why not. She said people who are taking a few Vicodin or tramadol every day who seek a medication adjustment don't always want to change medications or add a new one to what they are already on. She said they usually just want to increase what they are already on. I asked her if it made sense that maybe a patient doesn't need more of the same molecule they are already on, but rather a different molecule. She said that does make sense. She said sometimes it is just a matter of getting a patient to buy into that. I showed her patient information booklets & shared with her that various other practitioners have found the booklets to be useful in educating their potential Butrans patients about the medication & how it is used. I suggested that Roberta give patients the booklets if she is considering Butrans for them to give the patient an opportunity to read about it before making the decision that they don't want it. She said that was a good idea & agreed to do it. Discussed titration & ability for patients to take supplemental analgesia. Reviewed managed care coverage & let her know BWC is still paying for Butrans with no prior authorization. Also discussed savings cards for Butrans & OxyContin. She did not need additional cards at
PPLPMDL0020000001	Sagamore Hills	OH	44067	5/24/2012	I reminded Penny of our previous discussion when she told me she recently had started a patient on Butrans & asked if she has heard feedback from the patient. She said the patient was doing excellent on Butrans, but her condition worsened & she had to get her infected bone debrided , which brought her pain back up. She said the patient may go back to Butrans once her condition changes again. Discussed appropriate range of patients for Butrans & how some patients beyond the range of Butrans may be appropriate for OxyContin q12h. I asked if Penny has more patients who she thinks she would put on Butrans. She said she has no problem with the medication & the only reason she doesn't have more patients on Butrans is because she does not treat a lot of patients who have painful conditions. She said she is interested in pain, though & is involved in research studies about alternative therapies for pain other than narcotics. I gave her the catalog of CME courses which she was very interested in.
PPLPMDL0020000001	Mayfield Heights	OH	44124	5/24/2012	Spoke to Warren about the movement of butrans and oxycontin. He said he has not been seeing many scripts for it and wanted to know when he would. I told him that Hillcrest pain mgmt is prescribing and its just a matter of time before customers come to his pharmacy. I reviewed the patient info guide and how to properly apply and rotate the patch for best results. He said oxycontin has been steady with no new prescribers or customers. He said the problem that he is having is now with Opana. Customers are calling and asking about the old formulation like they did with oxycontin. He said he will gladly refuse scripts are turn people away for narcotics if he does not feel good about it.
PPLPMDL0020000001	Akron	OH	44312	5/24/2012	asked dr Manning if he prescribed short acting opioids such as tramadol or vicoden for pain. Dr said he does prescribe short acting products but tries not to take patients too high on the doses. Told dr that Butrans may be appropriate for his patients not getting enough analgesia on short acting products. Gave dr indication, CII, dosing, 7 day transdermal patch, and said again that it may be appropriate for his patients on tramadol or vicoden. Dr said that it sounds intriguing and agreed to look over information. Told dr about trial offer and savings cards.
PPLPMDL0020000001	Mayfield Heights	OH	44124	5/24/2012	Quick call....Reminded doc of the positioning of butrans and oxycontin. I asked him to prescribe butrans after patients fail on tramadol and oxycontin after patients have failed on vicodin or percocet. Reminded him of the savings cards for commercially insured patients.
PPLPMDL0020000001	Beachwood	OH	44122	5/24/2012	I asked Dr Yokiel how he typically doses OxyContin. He said if it is an elderly patient, he usually starts them at 10mg "twice a day" & if the patient is on a relatively low dose of short-acting opioids, he starts them on 20mg "twice a day". I asked if he writes it q12h or BID. He said q12h to start. I asked him to clarify- does he mean that he changes the dosing interval at some point during therapy? He said sometimes he will dose it q8h or even q6, although he added that he really does not like to do this. I reminded him that OxyContin has only been studied for safety & efficacy & is only recommended in patients with a q12h dosing interval. He said he just evaluates each patient on a case-by-case basis & it is not always so black & white. He went on to say that sometimes, patients psychologically get hung up on how many times they take a medication per day & they don't necessarily believe that a medication can last 12 hours. I told him that has also been a hurdle to a degree with Butrans, as some people don't believe that it can last 7 days. He said he can see that. I asked if allowing supplemental analgesia helps ease these patients' anxiety. He said sometimes. He said he usually allows 3-4 doses of supplemental per day. He said he has not used Butrans primarily because he does not have patients on low enough doses
PPLPMDL0020000001	Brooklyn	OH	44144	5/25/2012	Spoke with MA's Tiffanie & Brittany who said Dr Detwiler is on vacation. Discussed appropriate patient type/range for Butrans & OxyContin. Also discussed Butrans once weekly transdermal dosing & showed them demo patch. Reviewed managed care information for Butrans & OxyContin. They said Dr Detwiler sees an even mix of insurances (Medicare & commercial).
PPLPMDL0020000001	Parma	OH	44129	5/25/2012	Spoke with floater pharmacist & discussed Butrans once weekly transdermal dosing & appropriate patient type. Also discussed ability for patients to take supplemental analgesia with Butrans in the form of immediate-release opioid or non-opioid medications. Also reviewed automatic monthly savings for Butrans & OxyContin through Relay Health e-voucher.
PPLPMDL0020000001	Barberton	OH	44203	5/25/2012	Showed Dr new OxyContin conversion piece and asked dr to use OxyContin for patients that may be appropriate for a q12h dosing. Showed appropriate patients from the main visaid. Used initiation and titration guide for Butrans and asked her to use Butrans for patients on tramadol or vicoden if they may require a dose adjustment. Dr agreed. nothing else learned.
PPLPMDL0020000001	Garfield Hts	OH	44125	5/25/2012	Positioned Butrans for appropriate patients, like the ones we have been talking about, who fit the indication & who are not well-controlled on NSAID's/COX-2's. He stopped briefly in the hallway, told me he is working on it & then walked into a room. I spent time with Deena discussing this patient type. Showed her in initiation/titration guide how that patient would start on the 5mcg Butrans, if appropriate. Showed patient information booklets & showed her how she can educate patients on how to correctly apply & rotate Butrans each week. I asked Deena to help Dr Sadowsky by pointing out patients who she thinks he may find Butrans an appropriate option to treat their pain. Reviewed savings/trial cards & asked her to stick with commercially insured patients for managed care access. Also reviewed OxyContin formulary grid, pointing out favorable coverage.
PPLPMDL0020000001	Brooklyn	OH	44144	5/25/2012	I reminded Dr Miguel that he had been interested in prescribing Butrans, specifically instead of Vicodin for appropriate patients who were taking it twice a day. He said he has been reluctant to prescribe any pain medications. I asked him why. He said that the government is cracking down on the number of people who should be on pain medications. He added that a local prescriber recently "got in trouble" for prescribing too many pain pills & fentanyl patches. I agreed that appropriate patient selection is very important & that only patients with legitimate pain who are appropriate should be treated. Also told him that it is important to have good documentation for patients treated for pain. I asked if he would agree that there are some patients who are legitimate who can benefit from opioid medications. He said yes, but that "everyone" is on something for pain & then walked into a
PPLPMDL0020000001	Hudson	OH	44236	5/25/2012	Re-introduced Butrans to Dr Russ. He said he has used some Butrans, but not a lot, as he does not treat many patients for pain. Discussed appropriate patient type/range for Butrans & OxyContin as an option for appropriate patients beyond Butrans who could benefit from q12h dosing. He asked if he has a patient on tramadol 3 times per day, & that patient is saying they need more or he is thinking of changing them to Vicodin, why he would switch them to Butrans instead. I told him we do not have comparative data. Discussed once weekly transdermal dosing. Also discussed Butrans as the only long-acting opioid analgesic in the CII class, but also warned that because Butrans is an opioid, it does carry abuse & addiction potential. Discussed ability for patients to take supplemental analgesia with Butrans. Dr Russ said he thinks he will try Butrans on a few more patients to get more
PPLPMDL0020000001					



PPLPMDL0020000001	Hudson	OH	44236	5/25/2012	Dr Seiple had a medical student with him, so he asked me to tell him about Butrans. Reviewed core messages & went over appropriate patient type, focusing on patients who meet the indication, who are seeking some sort of medication adjustment with their short-acting opioid medication. Discussed range of patients & OxyContin q12h for appropriate patients beyond the range of Butrans. Dr Seiple explained buprenorphine to the student. Discussed importance of appropriate patient selection for opioids, including Butrans, a CII medication. Dr Seiple said he has tried Butrans on a few patients. He committed to trying more appropriate patients on Butrans.
	Hudson	OH	44236	5/25/2012	Started to go through OxyContin Conversions program, but Dr Tosino stopped me & asked if we could talk about Butrans because he wants to use more of it. I asked if he wants to use more of it, why isn't he. He said he doesn't know. He went on to explain that he has offered it to a few patients, but sometimes they don't want to use patches. He said they also get reluctant to stop taking their oral medications. I asked him to focus on appropriate patients who fit the Butrans indication who are seeking a medication change as this type of patient tends to be more receptive to other options. Also reminded him that patients can take supplemental analgesia with Butrans, so they are not "giving anything up" necessarily. Discussed importance of documentation & appropriate patient selection. I asked Dr Tosino if he has tried giving prospective Butrans patients an information booklet to help them educate themselves about Butrans. He said he hasn't thought of that. I asked him to start giving them to potential patients, even if he hasn't given them a prescription yet, so that they can read & learn more about Butrans & take time to decide if they think it would be a good option for them. Also reminded him that with the trial cards, most commercially insured patients get to try Butrans for a month with no out-of-pocket cost, so they are not out anything to simply try it. Dr Tosino committed to giving the information booklets & savings cards to patients & trying more of them on Butrans.
PPLPMDL0020000001	Westlake	OH	44145	5/25/2012	I told him I know you wanted to try Butrans for a lot of the older patients you see, but here is where you will have the least push back from managed care, under 65 with insurance through work, BWC or Caresource, taking tramadol and looking for a medication increase. He said he will think of Butrans for these patients.
PPLPMDL0020000001	Berea	OH	44017	5/25/2012	Spoke with Adam, he did see a script from kavlich, he said that he has 3 patients on Butrans, 5, 10, and 20mcg doses. He asked about what to do if the patch starts to fall off and we reviewed what to do if the edges come up and if the patch completely falls off per the medication guide. We reviewed the use of supplemental analgesia with Butrans. We discussed the managed care for Butrans and ESI. We reviewed the conversion guide and low dose OxyContin instead of percocet around the clock.
PPLPMDL0020000001	Berea	OH	44017	5/25/2012	Spoke with Nicki, not seeing an increased movement with Butrans, we discussed the managed care info for Butrans and the express scripts win, she said she would hand out medication guides to patients taking tramadol who may be looking for another option. We reviewed the OxyContin conversion guide and the low doses as a conversion option from hydrocodone.
PPLPMDL0020000001	Twinsburg	OH	44087	5/25/2012	Spoke with floater pharmacist & presented information on Butrans trial/savings program & OxyContin savings cards. Also discussed automatic monthly savings for their customers through Relay Health's e-voucher program.
PPLPMDL0020000001	Lakewood	OH	44107	5/25/2012	I asked Dr if he remembers the patients he should look for for Butrans, he said instead of vicodin, I told him yes and also under 65 with insurance through work and to give them a trial card. He said he would. Spoke with Kim and Laura, he said he would remind him.
PPLPMDL0020000001	Olmsted Falls	OH	44138	5/25/2012	I asked Dr to remember Butrans for the patient type we have been discussing, under 65, insurance through work, taking tramadol, he said he has a few patients like this. I asked if he has started the patient he told me about last time, he said no he hasn't seen her, he was not sure when she would come in. I showed the trial offer cards and that patients can get their first month virtually free. He said he will try it.
PPLPMDL0020000001	Berea	OH	44017	5/25/2012	Quick call, I showed the Dr the managed care info for Butrans and that ESI is now covered tier 2. I asked if he would think of patients who are taking tramadol around the clock and to try Butrans next and said he will.
PPLPMDL0020000001	Berea	OH	44017	5/25/2012	I reviewed the patient type for Butrans, under 65 insurance through work and taking tramadol, he said he will remember, I gave him an updated OxyContin conversion guide and showed that low dose OxyContin may be an option for a patient taking hydrocodone 4 times per day.
PPLPMDL0020000001	Barberton	OH	44203	5/25/2012	Asked Bill if he has seen any new prescriptions for Butrans since my last visit. Bill said they have two patients currently on Butrans 5mcg. Both drs are local but couldn't remember names. Told Bill about Butrans and external heat sources since the hot weather is upon us. Bill did NOT know about possible absorption of buprenorphine with external heat sources. Also discussed steady state and titration instructions. Reviewed dosing and conversions and ESI. Pharmacy does accept ESI. Gave info about ESI win. Discussed OxyContin conversions from oxycodone IR.
PPLPMDL0020000001	Akron	OH	44319	5/25/2012	Told dr that I have an extended release option for his patients whom are on vicodin that may not be getting adequate analgesia or may need a dose adjustment. Reviewed dosing, CII, 7 day transdermal patch. Asked if all his patients on vicoden are well controlled? Dr said he does have the need to increase doses. Told dr to consider Butrans for those patients while still being able to have patients continue to use their vicoden as needed for supplemental analgesia. Discussed titration with steady state reached at 72 hours. Dr said he will look over information and consider its use.
PPLPMDL0020000001	Cleveland	OH	44125	5/25/2012	Spoke with technician who said all the pharmacists were too busy to talk today, I showed her information sheets on Butrans & OxyContin savings programs & reviewed eligibility requirements. She said they always try to give patients savings cards when they can & some products have automatic savings through their Cleveland Clinic system. She said she would leave my information for the pharmacists & asked that I come back at another time.
PPLPMDL0020000001	Barberton	OH	44203	5/25/2012	Spoke with Cathy about Butrans and OxyContin. Told cathy about Butrans dosing, CII and steady state info from FPI. Cathy said they have two patients on it and one dr is from the area. Discussed ESI information. Gave OxyContin conversion guide and gave Rx Patrol information. nothing else learned.
PPLPMDL0020000001	Lakewood	OH	44107	5/25/2012	I showed the conversion guide and asked if he has patients on short acting hydrocodone who he could covert to Q12hr OxyContin. He said yes, he will be seeing a patient next week and he will convert her, I reviewed the conversion guide and he said he would probably start her on 20mg, but he will have to see how she is doing. He asked how Butrans is going, I asked him if he is finding a place for it in his practice, he said he is working on it, I told him to remember this patient type- under 65, insurance through work, BWC or caresource and taking tramadol needing an med adjustment. He said he will try these patients.
PPLPMDL0020000001	Lakewood	OH	44107	5/25/2012	I told Dr that I know his is concerned about managed care with Butrans, I asked if he has patients that fall into this description, under 65 with insurance through work or BWC, taking tramadol around the clock, he said he does have those patients. I asked if he would try Butrans and give them a month trial, he agreed. We discussed that those patients over 65 may be appropriate for low dose OxyContin.
PPLPMDL0020000001	Lakewood	OH	44107	5/25/2012	I told Dr to think of this patient for Butrans, under 65 with insurance through work, BWC or caresource, taking tramadol around the clock, I asked if he would try Butrans instead of going to vicodin and he agreed. I reviewed the managed care grid and ESI info with his MA. I showed him the updated OxyContin conversion guide and asked him to convert patients taking hydrocodone to Q12hr OxyContin instead of increasing the dose, he said he'll send them to pain management.
PPLPMDL0020000001	Lakewood	OH	44107	5/29/2012	Quick call at the front desk, I reviewed our previous conversation that he felt patients don't want to pay for name brand. I let him know that many patients can get OxyContin for only \$25 per month with the savings cards and that it is covered by Med D plans. I asked if he would convert patients taking oxycodone to Q12hr dosing and he agreed.
PPLPMDL0020000001	Cleveland	OH	44130	5/29/2012	Dr Fedoriko said he had no time today. I showed him Butrans core visual aid page 16, pointing out that Butrans 5mcg may be an option for appropriate patients who are not getting adequate relief from their NSAID's or COX-2's if they meet the indication. He said he would try to remember that & then walked into a room. Left sealed Journal of Pain piece for his review.
PPLPMDL0020000001	Parma	OH	44129	5/29/2012	I reminded Dr Khoobail of the interest he has expressed in trying Butrans for a few appropriate patients from his practice. He said he does want to try it, but has been out of town, so he hasn't had a chance yet. He also said the cases he has seen lately that involve pain have been more acute cases. I agreed that Butrans is for chronic pain. He said he will use Butrans as soon as a good candidate presents. He apologized that he will likely not be prescribing OxyContin because he does not prescribe CII medications.
PPLPMDL0020000001	Parma	OH	44129	5/29/2012	Spoke with pharmacist Heath & showed Butrans FPI 2.4, reviewing ability for patients to take supplemental analgesia with Butrans in the form of immediate-release opioid or non-opioid medications. He said he has not filled any scripts for Butrans yet. Reviewed appropriate patient type. Discussed Relay Health e-voucher for monthly savings automatically for eligible Butrans & OxyContin prescriptions.
PPLPMDL0020000001	Parma	OH	44129	5/29/2012	Myra said she prescribed Butrans for a patient & he reported that he did not want to stay on it because it did not work. She said she switched him. I asked if she considered titrating him instead of changing him altogether. She said he did not want to try the next higher strength, but added that she will keep titration in mind for future patients. She asked if she has a patient taking hydrocodone 10mg 5 times per day, what strength Butrans she would start them on. I told her because this patient was taking a total of 50mg hydrocodone per day, he/she might not be an appropriate candidate for Butrans & added that that patient may be a candidate for a q12h dose of OxyContin instead. She said she really wanted to give this patient Butrans, but she appreciated my honesty in that this may not be a good candidate. She said sometimes patients are reluctant to give Butrans a try because it is transdermal & they are used to pills. I asked if she has been utilizing the patient information booklets. She said she has just started using them. I encouraged her to give them to patients even if she is not giving them a Butrans prescription at that time so the patient can educate themselves on Butrans to decide if they would like it as an option. She said that was a good idea. Positioned Butrans for appropriate patients for whom she is considering a medication change if they are taking less than 40mg hydrocodone per day. She agreed & said she does want to start using it more.
PPLPMDL0020000001	Fairlawn	OH	44333	5/29/2012	Positioned Butrans for appropriate patients for whom she is considering a medication change if they are taking less than 40mg hydrocodone per day. She agreed & said she does want to start using it more.
PPLPMDL0020000001	Cleveland	OH	44130	5/29/2012	Positioned Butrans for appropriate patients for whom she is considering a medication change if they are taking less than 40mg hydrocodone per day. She agreed & said she does want to start using it more.
PPLPMDL0020000001	Cleveland	OH	44124	5/29/2012	Positioned Butrans for appropriate patients for whom she is considering a medication change if they are taking less than 40mg hydrocodone per day. She agreed & said she does want to start using it more.
PPLPMDL0020000001	Cleveland	OH	44114	5/29/2012	Positioned Butrans for appropriate patients for whom she is considering a medication change if they are taking less than 40mg hydrocodone per day. She agreed & said she does want to start using it more.
PPLPMDL0020000001	Mayfield Heights	OH	44124	5/29/2012	Positioned Butrans for appropriate patients for whom she is considering a medication change if they are taking less than 40mg hydrocodone per day. She agreed & said she does want to start using it more.
PPLPMDL0020000001	Cleveland	OH	44107	5/29/2012	Positioned Butrans for appropriate patients for whom she is considering a medication change if they are taking less than 40mg hydrocodone per day. She agreed & said she does want to start using it more.
PPLPMDL0020000001	Richmond Heights	OH	44143	5/29/2012	Positioned Butrans for appropriate patients for whom she is considering a medication change if they are taking less than 40mg hydrocodone per day. She agreed & said she does want to start using it more.
PPLPMDL0020000001	Cleveland Hts	OH	44118	5/29/2012	Positioned Butrans for appropriate patients for whom she is considering a medication change if they are taking less than 40mg hydrocodone per day. She agreed & said she does want to start using it more.
PPLPMDL0020000001	Mayfield Hts	OH	44124	5/29/2012	Positioned Butrans for appropriate patients for whom she is considering a medication change if they are taking less than 40mg hydrocodone per day. She agreed & said she does want to start using it more.
PPLPMDL0020000001	Cleveland	OH	44143	5/29/2012	Positioned Butrans for appropriate patients for whom she is considering a medication change if they are taking less than 40mg hydrocodone per day. She agreed & said she does want to start using it more.

	Lakewood	OH	44107	5/29/2012	I told Dr that it sounds like he has been having success with Butrans, and he agreed. I asked if he would start more patients like those taking tramadol or low dose vicodin on Butrans and he agreed if they can afford it. I reviewed that most patients can get Butrans, and to think of patients who are under 65 years old. I discussed that OxyContin has been studied in older patients. I reviewed the ESI managed care with Elizabeth she said he has been continuing to prescribe Butrans and has not heard a lot of feedback from the patients.
PPLPMDL0020000001	Lakewood	OH	44107	5/29/2012	I reviewed our last conversation that Dr said he has only a couple of patients with commercial insurance who may be appropriate for Butrans but that he does see Caresource. I asked if he can think of some Caresource patients that he is seeing this week who have patients taking tramadol where he could try Butrans. He said he might and will give it a try. I reviewed the PA and he said that it should be ok to do the PA. We reviewed that low dose OxyContin may be an option for older patients and was studied in patients 65 and 75 and older.
PPLPMDL0020000001	Akron	OH	44305	5/29/2012	Recalled last visit. Quick review of Butrans dosing and product placement for his vicoden and treamadol patients. I asked dr if he feels comfortable enough with Butrans in the nursing homes to his own practice. Dr said that he does and he likes Butrans as an option for his pain patients. I asked him to use Butrans for the next patient he sees in the office uncontrolled on a short acting opioid? Dr said he will use it.
PPLPMDL0020000001	Akron	OH	44319	5/29/2012	Do you have any patients that have been on Tramadol or Vicoden for 3+ months and still experiencing pain? Dr said that he wasn't sure. Told dr to initiate those patients that are uncontrolled on Butrans. 7 day controlled release, CII, transdermal patch for moderate to severe pain. Dr said ok.
PPLPMDL0020000001	Cleveland	OH	44113	5/29/2012	showed dr william,patient profile,dr said she has patients like this and is considering Butrans.we discussed initiation,titration and PA criteria for Caresource patients,i asked dr for her commitment to start more patients on Butrans this week,dr said she will do that.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/29/2012	Spoke with Herman(pharmacist) about Butrans and OxyContin. Herman did not know about Butrans. Discussed all key selling messages with Butrans, gave steady state information, application site instruction, copy card introduction and gave ESI message with flashcard which CVS accepts. Herman asked about Butrans compared to Duragesic. Told him there sre no head to head studies and told Herman where Butrans can be used. Pharmacy does not stock and have not seen any prescriptions. Discussed OxyContin and reviewed the new conversion and titration guide.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	5/29/2012	Bob said they still have the 5 and 10mcg of Butrans in stock. I asked Bob if he has seen any prescriptions and he said he has not filled any recently. Reviewed clinical data for Butrans. Discussed steady state, dosing, titration and conversions. Provided new ESI flashcard and provided copy card information.
PPLPMDL0020000001	Lakewood	OH	44107	5/29/2012	Quick follow up, I asked Dr if he had started the tramadol patient he had told me about the last time. He did start the patient, I asked how he will titrate the patient and he said he will move him up to the 10mcg if need be but he has not heard back yet, I asked if he had any other tramadol patients like this one sitting in his pile of charts and he said he will look and see. We reviewed the updated conversion guide for OxyContin and that it is covered for patients with Med D.
PPLPMDL0020000001	Lakewood	OH	44107	5/29/2012	I showed the main vis aid for OxyContin and ask if she would treat all of these patients pain the same, she said no, every patient is different. I reviewed the options of 7 tablet strengths with OxyContin. She said she will keep all of the doses in mind for titration. I reviewed the managed care update for Butrans and ESI.
PPLPMDL0020000001	University Hts	OH	44118	5/29/2012	Window call..Reminded doc of the butrans patient type and the key selling messages. I asked him if he still has his reminder of savings cards. He said he does. I asked him to try just one BWC patient that may be failing on their tramadol or vicodin. Provided a formulary grid and initiation guide.
PPLPMDL0020000001	Akron	OH	44333	5/29/2012	Spoke to Michele(ofc mgr) about Butrans Patient Experience kit. Michele said they have been haing a lot of problems with Opana recently. Dr Browns patients on Opana have not been able to get it and when they do get a prescription filled, the pharmacy does not have enough pills to fill the entire prescription. DR Brown said that she is not prescribing Opana anymore.
PPLPMDL0020000001	Westlake	OH	44145	5/29/2012	I reviewed our conversation about Butrans and that he can decrease the total daily dose of opioids and give OxyContin Q12hr. He said he will consider it for some. We discussed for those patients with insurance through work or BWC, that Butrans may be an option and he said he would prefer to start patients here before going to vicodin. I asked if he would find just one or two patients and he agreed.
PPLPMDL0020000001	Cleveland	OH	44103	5/29/2012	talked to Abdul,Pharmacist,about Butrans 6 core selling messages,Abdul said he likes that Butrans is transdermal and dosed once a week but hasnt seen any Rx for Butrans recently.we discussed commercial insurance,BWC and Caresource PA criteria for Butrans.i asked Abdul to continue handing out patient info booklets to patients that are appropriate for Butrans,showed initiation guide with dosage ranges for short-acting opioids where Butrans is appropriate,Abdul agreed we discussed OxyContin stocking 7 tablet strengths and Q12h dosing,showed formulary grids and we discussed commercial insurance and Med Part D plan coverage for OxyContin.
PPLPMDL0020000001	Lakewood	OH	44107	5/29/2012	Spoke with Kim, we reviewed the medication guide for Butrans, they do have a handful of patients on Butrans and she will make sure they have the booklets. I reviewed the Butrans FPI and use of supplemental analgesia. I reviewed the managed care for Butrans and ESI win. We discussed OxyContin as a Q12hr option for patients taking hydrocodone or oxycodone around the clock.
PPLPMDL0020000001	Mayfield Heights	OH	44124	5/29/2012	Quick call with Jessica who said she was busy. I just discussed the savings cards with butrans and offered them to her but she said she really does not see that much of it and didn't need the cards. Provided a patient info guide as a resource to explain the proper application and rotation of the patch.
PPLPMDL0020000001	Cleveland	OH	44112	5/29/2012	I asked doc when was the last time he initiated a patient on oxycontin. He said he just did. I asked him which strength. He said that the 20mg. I reminded him that we have savings cards for those commercial patients. He said he forgets about this. He said that the patient was on percocet. I reviewed the butrans key messages and he said he prescribed it for a patient last week. I reminded him of the mostly commercial insurance coverage. He said that it was a Cleveland Clinic employee so he is sure it was covered but he has not heard back yet. I left him formulary grids and initiation guide.
PPLPMDL0020000001	Parma	OH	44129	5/29/2012	Dr Roheny said he did give the patient he told me about a prescription for Butrans & the patient came back & said he went to fill the prescription & his out-of-pocket portion would have been \$200. I asked what insurance the patient had. They pulled the patient's chart & found that he had Summacare. Showed Butrans formulary grid & explained that Summacare should cover Butrans at a Tier 3 co-pay. I asked Dr Roheny if he gave the patient a trial/savings card brochure. He said he did. (Loraine said the patient said he did not have a savings card). I asked if it was possible that the patient had different prescription coverage than medical. Loraine called the patient who reported that Summacare covers his medications as well as his medical. I asked Dr Roheny if this has discouraged him from trying another patient on Butrans. He said no. Left formulary grids for Butrans & OxyContin along with my card & asked them to call me if they got any additional information on the Butrans prescription. Loraine said the patient said CVS at the corner of State & Pleasant Valley did not have Butrans [this is conflicting with what the pharmacy tells me] & that the prescription is now at a Walgreens on Euclid Ave.
PPLPMDL0020000001	Mayfield Heights	OH	44124	5/29/2012	Spoke to Kelly Warren about the key selling messages of butrans and where it is positioned. She confirmed that they were not stocking it and she has not seen any scripts for it but would order it if they get prescriptiong. I provided a butrans initiation guide.
PPLPMDL0020000001	Brooklyn	OH	44130	5/29/2012	Spoke with technician who said they had a floater pharmacist in today & she was too busy. Showed her information sheets on Butrans trial/savings program & OxyContin savings cards. Also discussed eligibility requirements for card usage, letting her know that patients are ineligible. She said she knows Danielle & Renee are good about providing savings cards when they have them. Let her know that some patients will save automatically at Wal-Mart through an e-voucher. She said she would leave my information for Danielle & Renee.
PPLPMDL0020000001	CLEVELAND	OH	44109	5/29/2012	talked to Rod,Pharmacy,Mgr,about 6 Butrans core selling messages,Rod focused on once weekly dosing and transdermal delivery of Butrans,Rod said he thinks there's a place for Butrans but he still wont order till he see's Rx's.we discussed commercial insurance,BWC and Caresource PA for Butrans,gave more med educ catalogs.
PPLPMDL0020000001	Lakewood	OH	44107	5/30/2012	I explained the patient experience program for Butrans and asked if he would like to participate. He said that he would do it for me, but that it might take a few months for him to find 5 appropriate patients. He said that he does not see that many patients who are new and most of his patients on tramadol are stable and they are very reluctant to change, also most of those are older patients so he feels it may be hard to find the right patients for this program. He said that he will continue to try Butrans for caresource patients and for those few who are under 65 years old and have insurance through work who are looking for a medication adjustment. We reviewed that low dose OxyContin may be an option for older patients and he does prescribe it in the hospital and nursing homes especially.
PPLPMDL0020000001	Parma	OH	44129	5/30/2012	Spoke with Dr Salama's staff of MA's & reviewed savings information for Butrans & OxyContin. They said they have "tons" of cards. I asked them to be sure to give them to eligible appropriate patients who leave with a Butrans or OxyContin script. Also asked them to give out the Butrans patient information booklets where appropriate to help save on call-backs to the office asking about how to use Butrans. Left Butrans sealed study & Express Scripts information & asked them to be sure Dr Salama sees it. They agreed.
PPLPMDL0020000001	Bedford	OH	44146	5/30/2012	Dr Moufawad requested more Butrans patient information booklets. He added that he has been giving them to patients with BWC. I asked him to also be sure to give patients with commercial insurance the trial cards if they are new to the brand. He said to leave more of those as well. He said he probably has enough OxyContin cards for now. I asked him to prescribe OxyContin for appropriate patients who come to him on more than 80mg equivalent oral morphine per day. He said that he would, adding that he doesn't have as many of those patients now as he used to.
PPLPMDL0020000001	Akron	OH	44313	5/30/2012	Spoke with pharmacist about Butrans and OxyContin. Gave him all the information on the product. Pharmacist did not know about Butrans and had the 10mcg in stock. Gave him the Butrans conversion guide and discussed OxyContin briefly and the pharmacist said he did not want any information on the product. Nothing else learned.
PPLPMDL0020000001	Bedford	OH	44146	5/30/2012	Spoke with Jennifer, a floater pharmacist. Gave her information on Butrans & OxyContin savings cards. Also discussed e-voucher, which provides automatic monthly savings for eligible customers. She said she would leave my information for Oleg.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	5/30/2012	Asked Ryan if he had seen any more Butrans activity for Butrans since my last visit. Ryan said that he only has one patient on Butrans. The other patient from Karet is no longer on Butrans and couldn't remember what the patient is on now. Reviewed conversions from short acting opioids and further explained copy cards for Butrans. Reviewed new OxyContin conversion guide and spoke to him about the IR OxyCodone to OxyContin conversions. Explained the ratio of hydrocodone to oxyCodone. Ryan said it was good for him to see and hear that again. He forgot how close the conversion ratio is.
PPLPMDL0020000001	Cleveland	OH	44113	5/30/2012	showed dr patient profile,william,asked dr if he's seen any patients like this? dr said yes he has and hasnt started anyone on Butrans,dr said he hasnt remembered r Butrans but will start a couple patients,dr asked about initiation of Butrans and PA for Caresource again,we reviewed both,asked dr for his commitment to start 1 patient on Butrans in next week? dr said yes,told dr i will follow-up next thursday at our lunch and look forward to hearing about this 1 patient he's committed to start on Butrans,dr said ok that was fair.
PPLPMDL0020000001	Rocky River	OH	44116	5/30/2012	Spoke with Stan, we reviewed the FPI for Butrans and the use of supplemental analgesia, he thinks there is still one patient on Butrans. We reviewed the medication guide and how to apply. We reviewed the Butrans managed care. We discussed the OxyContin conversion guide and that it is an option for patients instead of short acting around the clock.
PPLPMDL0020000001	Parma	OH	44129	5/30/2012	Dr Gigliotti said the patient who he put on Butrans still hasn't been back for a follow-up. He said he would have Jaz call the patient to find out how she is doing & that he would let me know what he finds out. I reminded him of the patient type he had selected for Butrans- a working patient who was suffering from pain, not tolerating her current therapy. I asked if he has more patients like that who he could try on Butrans. He said he does but that they just haven't been coming in lately. He said he would try to find more patients. He also said he still writes a lot of OxyContin.
PPLPMDL0020000001	Cleveland	OH	44106	5/30/2012	talked to dr about his patients that look like emma,patient profile,dr said he has a lot of patients on tramadol but doesnt remember Butrans,asked dr what he needs to remember? dr said just keep reminding him and tell fellows they will remind him too about initiation of Butrans,showed initiation guide,we discussed appropriate dosage ranges and asked dr if he will start a couple patients on Butrans this week? dr said he will do that,we discussed PA criteria for Caresource patients starting on Butrans.
PPLPMDL0020000001	Cleveland	OH	44106	5/30/2012	spoke to dr briefly about his thoughts on where Butrans plays a role in his practice? dr said he likes Butrans as an option for patients but hasnt had anyone he feels is appropriate lately,showed william,patient profile,asked dr if he's seen patients like this? dr said yes,asked if Butrans was an option? dr said no he hasnt thought of Butrans but does think its a good option for patients,asked dr if he will start 1 patient this week on Butrans,showed initiation guide and asked if dr felt comfortable doing this? dr said yes he does and he will consider Butrans for some patients.
PPLPMDL0020000001	Rocky River	OH	44116	5/30/2012	Spoke with Kim, we reviewed Butrans managed care updates, she feels that older patients are the ones who would be most interested in trying Butrans. We discussed that patients under 65 with insurance through work, BWC or Caresource are the best chance at getting it covered. I reviewed that OxyContin has been studied in geriatric patients and may be a long acting option.

PPLPMDL0020000001	Cleveland	OH	44114	5/30/2012	showed dr william,patient profile,asked dr why he would/wouldnt start this patient on Butrans? dr said he likes Butrans,its working for patients and has been starting more patients on Butrans.asked dr if he would consider Butrans for a patient taking 2 vicodin/day,when a dosage adjustment is necessary? dr said he might,in past he probably would have given another pill to see if that would control patients pain but now he's had some good success with Butrans,dr said he would consider Butrans.asked dr for his commitment to start more patients on Butrans this week,dr agreed.
PPLPMDL0020000001	Lakewood	OH	44107	5/30/2012	Quick call as Dr was on his way to the hospital, I asked if he would find those patients taking tramadol, who are under 65 with insurance through work of BWC, he agreed.
PPLPMDL0020000001	Independence	OH	44131	5/30/2012	Stopped Dr Jack in the hallway with a Butrans sealed study. I handed it to him & asked him to review it. He said he would. He said he should be using Butrans. I agreed. He said he is going to & then walked into a room. Spoke with Maria who agreed to allow me to schedule a lunch.
PPLPMDL0020000001	Cleveland	OH	44106	5/30/2012	showed william,patient profile,asked dr if he's seeing this patient type? dr said yes.asked dr whats the next step in therapy for this patient? dr said he would start this patient on Butrans as long as insurance covers it.dr said its been easy for him to describe Butrans to patients,he tells them its once a week and a patch so he thinks its convenient for patients.dr said he will continue starting patients on Butrans,asked dr for his commitment to start patients on Butrans,that look like william,today? dr said he will do that.
PPLPMDL0020000001	Cleveland	OH	44106	5/30/2012	showed dr Butrans initiation guide,asked dr if he's seen any patients this week taking short-acting opioids that needed a medication adjustment? dr said yes he see's patients like this every day.asked dr if he considered Butrans? dr said not yet.asked dr what's the hesitation? dr said nothing he hasnt thought of Butras.asked dr if he would think of Butrans this week for a couple patients that need a dosage adjustment? dr said yes he will.
PPLPMDL0020000001	Cleveland	OH	44113	5/30/2012	talked to dr about patient profile,william,asked dr how often she see's patients like this? dr said every day.dr said she is considering Butrans for patients like this but some younger,under 65yrs,patients like to argue/debate with her about starting Butrans and only want their pills.i talked to dr about starting a couple patients like william and still continue to start the geriatric patients on Butrans if she's getting the Rx approved by medicare plans.dr said she is and will continue doing this.told dr that was great she's getting Rx's approved and appreciated her business.
PPLPMDL0020000001	Cleveland	OH	44143	5/30/2012	I reviewed the Butrans patient profile of Emma. Ask doc if he has similar patients taking tramadol ATC. He said maybe. I asked if they come in for a dose adjustment. he said they do sometimes. When I asked him what he then does for those patients, he didn't respond. He remembered that butrans was a CII and can be called in. I reviewed the commercial insurance and the savings card. He said he would think about it.
PPLPMDL0020000001	Cleveland	OH	44106	5/30/2012	showed dr patient profile,emma,dr see's patients like this but only has a handful of patients on opioids for chronic pain.dr said she does a lot of surgical procedures and patients tend to do well with that.we discussed patients like emma that may still need opioids to manage their chronic pain and i asked dr to consider a couple patients this week,to start on Butrans,like emma? dr said she would do that.we discussed pA criteria for Caresource patients and told dr i would follow-up next week to hear about the patients she committed to start on Butrans,dr said that was fair.
PPLPMDL0020000001	Warrensville Heights	OH	44122	5/30/2012	Quick call- Dr Zivic said he will keep OxyContin & Butrans in mind. I showed him that approximately 91% of lives nationally are covered for OxyContin. He said he has not had coverage issues with it that he can think of, then he went into a room. Discussed Butrans formulary coverage with Michelle (MA).
PPLPMDL0020000001	Solon	OH	44139	5/30/2012	Went through the first two vignettes in OxyContin Conversions program. I asked if these patients mirrored what he saw in his practice. He said he rarely sees patients who are on that low a dose of narcotics when they come to him. He said they are usually on much higher doses & are on multiple pain medications as well. He went on to say that he has been using "a ton" of OxyContin lately & added that he has probably tripled the number of OxyContin patients over the last couple of months. I asked him why. He said that there has been a stocking issue with Opana ER, so all those patients needed to be switched. I asked how patients generally respond to that change. He said most of them do well. Discussed broad formulary coverage & savings cards. He said those help a lot. Julie requested 3 packages. Dr Zaidi got called away for an emergency. I handed him sealed Butrans studies & asked him to review them, reminding him that he has requested Butrans study information in the past when they were not available to us. He agreed to read them. Recommended Senkot-S for opioid-induced constipation & gave samples per their request.
PPLPMDL0020000001	Westlake	OH	44145	5/30/2012	I reviewed the patient type for Butrans, patients under 65 with insurance, BWC or caresource. He said the under 65 really limits his selection. I agreed and said to focus on a small subset of patients and asked if he has just 2 a week like this, he said he probably does and said he will try.<font color=blue><b>CHUDAKOB added notes on 06/08/2012</b></font>Patient profiles and clinical data. Help him identify patient types through a visual and give him reasons to prescribe Butrans.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/30/2012	Showed Dr the new OxyContin conversion and titration guide and asked him where he uses OxyContin? Dr said that he does not use it as much anymore however when he does it is after vicoden or after percocet depending on the patient. Showed dr the conversions from percocet and asked what a Q12h dosing from OxyContin means to his patient? Dr agreed that dosing a medicine 2 times a day is a benefit to a lot of patients. Asked dr to use OxyContin when appropriate for patients in moderate to severe pain. Dr agreed that OxyContin works well. Provided Dr with another overview of Butrans and asked dr if he uses Tramadol or vicoden to treat pain. Dr said yes. Showed dr Butrans conversions scale and gave key selling messages. Dr said that he believes Butrans to be a good option for his patients that have been on a short acting opioid for an extended period of time. Asked dr to "try" Butrans and asked him to try it on an insured patient under 65. Reviewed copy cards. Dr said he will try it.
PPLPMDL0020000001	Akron	OH	44305	5/30/2012	Spoke with Cindy(RN)about new OxyContin conversion and titration guide. Cindy said they are using OxyContin on a regular basis and she admitted that they could be using more OxyContin Q12h instead of short acting products Q4-6h. She wanted more copy cards for both products. Reviewed Butrans key selling messages. Cindy said she doesn't believe Butrans had been used yet but she does she a place for it. Discussed ESI coverage and how trial offer and copy cards work.
PPLPMDL0020000001	Cleveland	OH	44113	5/30/2012	talked to dale about patients that look like william,patient profile,asked dale if he will see patients like this today? dale said yes. asked dale if he will start them on Butrans? dale said yes he will.we discussed initiation,titration and handling side effects that patients may have with Butrans,dale said he's not heard much from patients about side effects and patients are doing well on Butrans so far.asked for his commitment to start more patients on Butrans,dale agreed.
PPLPMDL0020000001	Akron	OH	44313	5/30/2012	Asked Dr if he has ESI. Dr said he didn't know but he thought he had some. Tina(ma) said they did have ESI. Gave ESI information for Butrans. Gave dr new conversion guide for OxyContin and asked if he had patients on a short acting opioid such as vicoden or percocet. Asked dr to consider OxyContin as an option for Q12h dosing. nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44128	5/30/2012	Spoke with technician who said Lisa was too busy dealing with a customer issue. Showed her information sheets on Butrans & OxyContin savings programs. Also let her know that eligible customers will receive automatic monthly savings through the e-voucher system. Reminded her that patients on any type of government insurance are not eligible for savings cards. She said they try to give savings out, but a lot of their patients are insured through Medicare or Medicaid. She said she would leave my information for Lisa & said to come back another day.
PPLPMDL0020000001	Lakewood	OH	44107	5/30/2012	We discussed the OxyContin FPI and that it has been studied in geriatric patients ages 65 and 75 and older. He said that is good to know but it seems that the copays for OxyContin are still very expensive for older patients and that they can not use the savings cards. We reviewed the managed care grid and that many patients do have good coverage and a low copay. We discussed Butrans as a option for patients before going to OxyContin, when patients are taking tramadol or low dose vicodin. He said most of his patients are taking vicodin. He had tried to use Butrans in the past for patients who were older and were not tolerating the vicodin or percocet but he had problems with coverage. I focused the plans where he will have the most success, commercial, BWC, Careource. He agreed to try Butrans again for these types of patients.
PPLPMDL0020000001	Munroe Falls	OH	44262	5/30/2012	Discussed Butrans key selling messages. Discussed application sites, application site preparation, exposure to external heat sources. Showed conversion scale and asked dr if she uses vicoden, tramadol, or percocet? Dr said she uses all short acting opioids to treat pain in her patients. Discussed conversions to Butrans. Patient selection with conversion scale and asked dr to prescribe Butrans to her patients on a short acting opioid for 3+ months, currently have pain or she is considering a dose adjustment. Dr said she already had thought of 2 or 3 patients where she thinks Butrans would be appropriate. Discussed patient information kits, and copy card.
PPLPMDL0020000001	Cleveland	OH	44143	5/30/2012	I reviewed the profile of Emma and asked doc if he has patients like this. He agreed that he does. I asked what he does for those patients who fail. He said put them on a narcotic although he does not want to. Or he refers to pain mgmt. I explained that butrans is another option. I reviewed the key selling messages. He asked about cost. I explained the approximate cash cost and the commercial plans and the savings card program. he expressed frustration with PA and insurance issues. He said he would think about it for commercial insurance.
PPLPMDL0020000001	Akron	OH	44333	5/30/2012	Saw Dr. in between procedures. Asked Dr Shah how his stock of Butrans trial offer and copy cards? Dr looked and said he only has two cards left for all his exam rooms. Dr said he likes to have a pack of them for each exam room. Gave dr two packs of copy cards. Dr said his patients continue to do very well on Butrans. Asked dr if he explains the trial offer and copy cards. Dr told me that Marsha Fox does it the most. Marsha said that every patient that qualifies for the cards gets them and she explains them. I reviewed the cards again with her and she is on point with how they work. I asked about any issues or problems with them from patients. Marsha said none that she knows about abd has had some PA's to conduct and she has always gotten Butrans approved. Reminded Marsha of ESI commercial and Med D.
PPLPMDL0020000001	Cleveland	OH	44114	5/30/2012	John asked me if Butrans can be prescribed as #6? I asked why would he want to prescribe 6 Butrans? John said he has a patient that will be gone for 6 weeks so they cant do a 4week follow-up visit with him and he wants to be sure the patient has enough medication for the 6 weeks.John said he knows that many retail pharmacies wont open another carton to give the extra 2 Butrans that are necessary but he may call a couple of the independent pharmacies.told John he could try that and discuss this option with the pharmacist.i asked John if insurance was paying for 6 Butrans? john said yes no problem with insurance.
PPLPMDL0020000001	Cleveland	OH	44109	5/31/2012	showed OxyContin conversion guide-percocet examples and visual aid-discussed appropriate patients and pain conditions.asked dr where he feels OxyContin is appropriate? dr said patients with severe pain but he doesnt like starting patients on OxyContin,dr said he's just maintaining the patients he has on OxyContin not starting new patients.asked dr if he has patients taking percocet,showed examples in conversion guide,that may be ready for a long-acting opioid? dr said he does have patients on percocet and could consider OxyContin.dr said he will look at conversion guide and think about it.we discussed med part d and commercial insurance patients starting on OxyContin.dr said he is still considering Butrans for patients in his practice,dr said its taking him a long time to get started with Butrans as its hard to change habits,asked dr if he's seeing patients that are taking short-acting opioids,showed initiation guide,where a dosage adjustment is necessary? dr said yes.asked dr if he will consider Butrans for a couple of patients this week? dr said yes he will.we discussed commercial insurance patients using initial trial offer cards and starting on Butrans,dr said ok
PPLPMDL0020000001	Cleveland Hts	OH	44118	5/31/2012	I tried to review the patient profile of Emma but doc said he didnt have time. I asked him what feedback he has had. he said it is working ok for most patients that are able to get it. I reviewed the savings cards and appropriate patient. He said he is writing for those patients on tramadol or vicodin. He recently had a PA denied for a caresource patient. I reminded him of the commercial plans and savings cards.
PPLPMDL0020000001	Parma	OH	44129	5/31/2012	Spoke with Allana & reviewed Butrans dosing & appropriate patient type. Focused on patients who are getting refill after refill of short-acting opioids, taking them around-the-clock. Also showed information on Butrans trial/savings cards as well as OxyContin savings cards. Discussed automatic monthly savings through e-voucher, but let her know that eligible patients would need the actual card for the Butrans trial. Offered cards- she said she really didn't have a place for them since they don't stock Butrans at this point. Offered OxyContin savings cards but she said they didn't need them either.
PPLPMDL0020000001	Maple Heights	OH	44137	5/31/2012	Dr Dale said he remembers I have Butrans & OxyContin. I told him that is a start. He asked me to tell him more about Butrans because he has been thinking of using it recently. He said he specifically is interested in writing it for his Medicare patients. I explained Butrans coverage, asking him to focus on patients with commercial insurance. He said he really wanted to use it for Medicare patients because he feels they are ideal for a product like Butrans. He said he recently called Jim, the pharmacist at Drug Mart, & asked how much it would be for one of his specific patients to start Butrans. He said the patient had Medicare & Jim said it would be very expensive. I asked Dr Dale what the difference clinically is between an elderly patient with a chronically painful condition who requires around-the-clock opioid treatment & one who is 40-60 years old, working, with a chronically painful condition who requires around-the-clock opioid treatment. He said nothing really & that he sees my point. Positioned Butrans for those appropriate patients who are 40-60, working, who have a painful condition such as osteoarthritis or spinal stenosis, who are seeking a medication adjustment. I asked him why increase their dose of current medication rather than trying a different option such as Butrans. He said that makes a lot of sense.
PPLPMDL0020000001					Discussed initiating Butrans, dosing, titration, & supplemental analgesia. I asked Dr Dale if he would try Butrans for patients like we discussed & he agreed.

	Maple Heights	OH	44137	5/31/2012	Dr Gene said his older patient who was on Butrans is still on it & is now on the 20mcg dose, doing well. I asked him why he thinks he hasn't placed more patients on Butrans. He said he really hasn't been "putting anyone on pain patches" lately. Positioned Butrans for patients who are taking tramadol or Vicodin month after month who are seeking a medication change. I asked if he has seen those patients. He said yes. I asked him what his thoughts were on initiating Butrans in those patients if appropriate, keeping in mind that patients can take supplemental analgesia if necessary until analgesia is achieved with Butrans. He said his only reluctance with that is that putting them on more medications makes him feel like he is getting too much into pain management & he does not like to do that. I asked him what the difference would be in starting the patient on Butrans or increasing their dose of current opioid. He said he sees my point. Explained how he could initiate Butrans, allowing supplemental analgesia if necessary, in appropriate patients. Also discussed titration. Reminded him that acetaminophen or ibuprofen can be used for supplemental analgesia if he feels more comfortable with that. Positioned Butrans again for appropriate patients aged 40-60 who are still working, for whom he is considering a medication adjustment. Reviewed savings & trial cards & asked if he would initiate Butrans in appropriate patients fitting the description we discussed & he agreed.
PPLPMDL0020000001	Cleveland	OH	44127	5/31/2012	talked to dr about patients taking codeine every day for chronic pain,showed initiation guide and asked dr if she's considering Butrans when these patients require a dosage adjustment? dr said she's talking to patients about Butrans and giving booklets out and she's started a few patients on Butrans.i asked dr if she would consider starting a couple more patients on Butrans this week? dr said yes she will do that.we discussed PA criteria for Caresource patients.
PPLPMDL0020000001	Cleveland	OH	44127	5/31/2012	talked to dr about patients like william,patient profile,asked dr if he's seeing patients like this? dr said yes.asked dr how often? dr said almost every day he's seeing patients that are taking vicodin, or percocet or codeine for chronic pain. asked dr if he would be willing to start a couple patients on Butrans,when a dosage adjustment is necessary,this week? dr said yes he will do that.we discussed PA criteria for Caresource patients.told dr i will follow-up next week to hear about the patients he committed to starting on Butrans,dr said that was fine.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	5/31/2012	Asked dr if she had used Butrans yet. Dr said she did use it recently. I asked her where she used it and she couldn't remember?!! I told her that I would like to know why she used it and what the patient(s) were taking previously. Dr still couldn't remember. I reviewed the case studies again and told her to continue use. Explained the ESI win with Butrans and asked her to prescribe it for her ESI patients. Dr agreed and admitted she has a showed dr emma,patient profile,asked dr if she's seen patients like this? dr said yes.dr said she's given Butrans patient info booklets this week but hasn't started anyone yet.asked dr what's holding her back? dr said nothing she has to remember the initiation dosage strengths of Butrans and just start a couple patients.we talked about dr starting 2 patients in the next week on Butrans,dr committed to do this.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/31/2012	Asked dr if he could recall where he used Butrans for his patients recently? Dr said he could not remember but he likes Butrans because it has low doses of buprenorphine and that it's a patch. His patients like the ability to wear a patch for a week. Reviewed patient case studies and asked for continued business. nothing else learned.
PPLPMDL0020000001	Akron	OH	44310	5/31/2012	I asked Dr if there is any more information on Butrans that I can provide so he feels comfortable enough to prescribe? Dr said no and he understand where to use it. I asked where he thinks it will fit with his patients. He said that he has some patients on tramadol that might be a good fit for Butrans. I told dr that I was glad to hear that and that I was looking forward to hearing about it.
PPLPMDL0020000001	Cleveland	OH	44113	5/31/2012	deb said she's starting more patients on Butrans lately,as Caresource has been approving the PA's.i asked deb for her commitment to start more patients on Butrans this week,deb agreed
PPLPMDL0020000001	Parma	OH	44134	5/31/2012	Dr Hernandez asked if I saw the patient who just left his office. I told him I did not. He said he just started him on Butrans. I asked him to tell me more about the patient. Dr Hernandez said the patient had been on a higher dose of opioids prior to this, so he started him on 20mcg & is anticipating titrating him up. I reminded him that this is not consistent with Butrans FPI & reminded him that 20mcg is not a starting dose, but rather should be used for titration & is also the maximum dose recommended. He said he knows, but this is how he likes to use Butrans & this is how he is having success with it. I asked what about OxyContin for this type of patient. He said he does not like to have patients on chronic opioids at high doses, such as OxyContin or Opana. He said he will still use OxyContin for shorter term treatment.
PPLPMDL0020000001	Euclid	OH	44119	5/31/2012	I discussed the patient profile of Emma and asked doc if he has patients like this. He said he does. I asked what he does when those patients ask for a dose adjustment. He said he might titrate or switch them to another product or send to pain mgmt. I suggested trying those patients on butrans. He said what about the 3rd tier coverage. I explained the commercial plans and the savings cards. He asked about workers comp. He said he spoke with Patrick and discussed Butrans and OxyContin. Asked him if he is filling more 5mcg or 10mcg. Patrick said the 5mcg for sure and doesn't understand it the dose is not being titrated like it should if the patient may require it. Reviewed the Butrans conversion and titration chart. Pharmacy is still stocking and filling OxyContin on a regular basis. Introduced RxPatrol programs and explained it in detail. Patrick said he can see how it would benefit the smaller, local pharmacy. He said he would log on to check it out.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/31/2012	Asked Linda about Butrans and asked if she has prescribed yet? Linda said that she had not but Dr Narouze did. Explained Butrans...CII, 7 day transdermal patch, dosing, product placement for patients failing on tramadol or vicodin.Linda asked about Butrans on the PA formulary. Explained to her that she is able to prescribe Butrans.<font color=blue><b>CHUDAKOB added notes on 06/08/2012</b></font>A small tweak might be to discuss patients like those in the profile rather than patients on a specific medication as the focus of the call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/31/2012	Spoke with Dr at window and asked her if she had used Butrans yet and if she had any questions. Dr said she has not used but likes Butrans and that she probably has 2 patients that it would work for that are on short acting opioids. Gave dr the Opioid Naive study and asked her to also consider opioid naive patients as Butrans candidates. Dr took study and said ok.
PPLPMDL0020000001	Cleveland Heights	OH	44118	5/31/2012	I asked doc about the list of potential butrans candidates he said he would keep. He said he tried about 4 or 5 people and the Prior auth was a problem. He said that I would have to check with Jazmine on which plans they were. I reviewed the commercial plans and the savings card program. I asked him to continue to think of butrans for patients who fail on tramadol.
PPLPMDL0020000001	Maple Heights	OH	44137	5/31/2012	Spoke with Dawn who said Jim was too busy today to talk. Gave her information on Butrans trial/savings cards & OxyContin savings cards. Pointed out the information for pharmacists to call if they have any questions or problems with the cards. I asked if they check to see if products have savings cards when they fill prescriptions. She said they try to be aware of what products have them. She said a lot of their customers are older or have Medicaid. She asked if they can use the cards. I let her know that patients with any type of government insurance, including Medicare & Medicaid, are not eligible for savings cards. She said she would leave my information for
PPLPMDL0020000001	MAYfield Heights	OH	44124	5/31/2012	Spoke to Jesse about the movement of butrans and oxycontin. He said that he has not seen much of it but does see other transdermals with multiple plans. He does not recall any issues/concerns with customers and patches. I explained the positioning, the coverage and savings cards. He said the volume of oxycontin has been steady with no new prescribers.
PPLPMDL0020000001	C. Falls	OH	44223	5/31/2012	Asked if the pharmacy would hand out Butrans patient information guides? Linda said they will set them out for patient to take if the are interested. Still no Butrans seen at pharmacy. Reviewed Butrans key selling messages.
PPLPMDL0020000001	Macedonia	OH	44056	6/1/2012	Reviewed OxyContin conversion guide. nothing else learned.
PPLPMDL0020000001	Macedonia	OH	44056	6/1/2012	Quick call- Caught Dr Dhungat Pal at the window. Passed back Butrans "Initiations" invite & asked him to participate as it would give him useful information about Butrans & patient selection. He said he would check it out & then walked away. Spoke with MA Linda & scheduled a lunch at first availability. Also reviewed OxyContin formulary grid with her & asked her to leave the information for Dr Pal. She agreed.
PPLPMDL0020000001	Macedonia	OH	44056	6/1/2012	Spoke with pharmacist, Eve, & gave her information sheets on Butrans trial/savings cards & OxyContin savings program. Reviewed eligibility requirements for each program & discussed automatic monthly savings through e-voucher for eligible customers. Let her know all eligible customers would need the actual card for the trial offer. She said she has not noticed Butrans movement but that she has been gone for awhile. Discussed appropriate patient type/range.
PPLPMDL0020000001	Cleveland	OH	44109	6/1/2012	showed OxyContin conversion guide and visual aid,we discussed appropriate patients for OxyContin and discussed percocet and vicodin conversions to OxyContin,dr said he starts a lot of patients on OxyContin and he knows how to convert patients.told dr that was great he knew everything and asked if he would continue starting patients on OxyContin today and next week? dr said yes he will.dr said he has 1 patient on Butrans,patient is doing well and he's considering others to start on Butrans.showed initiation guide,we discussed dosage ranges of short-acting opioids where Butrans would be appropriate,we discussed initiation,titration and insurance coverage.i asked dr if he would be willing to start a couple patients on Butrans in the next week? dr said yes he will see who comes into the clinic.<font color=blue><b>CHUDAKOB's query on 06/08/2012</b></font>Amy, this is where the patient profiles along with the clinical data we discussed could make an impact. Dr. Harris is in a teaching facility. While he has started one patient do you think he really knows the right patient type? How can the clinical trials help reinforce your message to him? These are the things to think about for next call objectives.<font color=green><b>BROOKAM's response on 06/10/2012</b></font><font color=blue><b>CHUDAKOB added notes on 06/19/2012</b></font>Thanks. Let me know how it works out.
PPLPMDL0020000001	South Russell	OH	44022	6/1/2012	Quick call with Dr Kale on her way out of the office- Showed Butrans initiation/titration guide table on pg 6 & positioned Butrans for appropriate patients taking less than 80mg equivalent oral morphine per day & OxyContin as an option for appropriate patients beyond that range. She said to leave information on the table & she would review it later. Left initiation guide & OxyContin conversion guide.
PPLPMDL0020000001	Beachwood	OH	44122	6/1/2012	Caught Dr Warren briefly at the window. Passed back Butrans sealed Special Report #3 article & asked Dr Warren to review it. Positioned Butrans for appropriate patients taking less than 80mg equivalent oral morphine per day & OxyContin for appropriate patients taking oxycodone immediate-release around-the-clock who may benefit from a q12h dose of oxycodone. He thanked me & walked away. Spoke with Donnie, his nurse, & updated him on Butrans formulary win on Express Scripts National formulary.
PPLPMDL0020000001	Olmsted Falls	OH	44138	6/1/2012	I reviewed the open label pain scores for the Butrans clinical trial and that he thought that this was a good reduction. I asked if he would start just a few patients on Butrans to see if these are the results he gets and he agreed. We reviewed the OxyContin conversion guide and low dose OxyContin as an option. He said he may prescribe it for patients who are older or have cancer.
PPLPMDL0020000001	Berea	OH	44017	6/1/2012	Dr told me he just hasn't thought of Butrans, i showed Emma and asked if he sees patients like these, he said he does but many are older. I told him I know some patients will not be appropriate, but when he sees a patient like Emma, that is under 65 will he try them on Butrans and he agreed.
PPLPMDL0020000001	Independence	OH	44131	6/1/2012	Quick call- Passed back Butrans formulary update for Express Scripts & OxyContin Medicare D formulary grid. Dr Pal said he is keeping Butrans & OxyContin in mind. He said it is just a matter of finding the right patients. Spoke with Jill & reviewed coverage & prior authorization requirements for Butrans on Medicare.
PPLPMDL0020000001	Cleveland	OH	44113	6/1/2012	window call-dr said he's not written Butrans and will talk to me more at my lunch.i showed patient profile,william,asked dr if he's seen patients like this? dr said yes every day.i told dr this patient type could potentially be appropriate for Butrans if dr was willing to start this patient type on Butrans,dr said ok he will look it over and asked dr it told dr i will follow-up next week,dr said ok
PPLPMDL0020000001	Akron	OH	44320	6/1/2012	Reviewed Butrans patient profiles again and asked where he sees Butrans fitting best. Dr said either for his patients on tramadol or vicodin. Dr said he thinks it's a good product. Told dr about steady state and titration and conversion information. Asked dr to "try" Butrans. Dr said ok.
PPLPMDL0020000001	Chagrin Falls	OH	44022	6/1/2012	I asked Dr Hudson where she typically prescribes OxyContin. She said she uses it mostly in her cancer patients with pain or in serious chronic pain patients. She went on to say that it is a good medication for the right patients. Dr Hudson said she now has a couple of patients on Butrans & added that she thinks it is a good option. I asked what she likes about it & what kinds of feedback she has received. She said one of her patients who she wanted to use it on had too low of blood pressure, so she did not end up using it & another patient is going to be following up soon to let her know. I asked where she is positioning Butrans in terms of the treatment algorithm. She said if a patient has a condition that is causing pain & is chronic, she will give them Butrans. I asked if she always gives it to a patient after they have already tried tramadol and/or Vicodin. She said not necessarily & said that if she knows up front that the patient's condition will be chronic, she will use Butrans at that point, or if a patient has tried tramadol, then Vicodin, & it becomes evident that the condition will be chronic in nature, she would use it there. Discussed titration to a maximum 20mcg & supplemental analgesia. She said she allows a patient to take their short-acting for breakthrough pain. Discussed trial/savings program & eligibility. Also reviewed Butrans as a CII opioid, meaning she can call it in & write refills- advised that it is an opioid & carries abuse/addiction potential.
PPLPMDL0020000001	Cleveland	OH	44109	6/1/2012	talked to debbie,RN,as dr wasn't free to talk today,we discussed patient profiles,william and emma,that could be appropriate for Butrans,Debbie said they have a lot of patients taking short-acting opioids for chronic pain so Butrans could potentially be an option for them,but its up to the doctors.i asked debbie to share these patient profiles with dr and we discussed initiation and titration of Butrans,gave initiation guide to debbie and asked her to show dr,we discussed insurance coverage,asked debbie to discuss with dr too.
PPLPMDL0020000001	Akron	OH	44312	6/1/2012	I asked Dr Robinson if he could think of a patient from his practice that would be appropriate for Butrans? Dr said that the nitche is small but he thinks that he might have a patient that has been on tramadol for a while that Butrans may fit. I reviewed the conversions and asked dr to use Butrans for this patient. Discussed steady state and titration.
PPLPMDL0020000001	Akron	OH	44312	6/1/2012	handed dr the Butrans conversion and titration guide and asked if he had patients on short acting opioids for 3+ months. Dr said yes and that he would review the information. nothing else learned.

PPLPMDL0020000001	Uniontown Cleveland	OH OH	44685 44113	6/1/2012 6/1/2012	Gave quick Butrans message to dr though window. Told dr that Butrans steady state is 72 hours and he can titrate after 3 days. Dr said that is good to know. nothing else learned. showed dr emma,patient profile,dr said he has a lot of patients taking tramadol that would be appropriate for Butrans,the problem is that Butrans isnt popping into his mind,dr said he needs to remember Butrans.asked dr what he needs from me to remember Butrans? dr said nothing just need telling him about initiation dosage strengths and insurance coverage.asked dr if he will start 1 patient like emma in next week,focusing on commercial insurance patients so they can use initial trial offer cards? dr said yes he will do this.
PPLPMDL0020000001	Beachwood	OH	44122	6/1/2012	Spoke with Armesia (MA), who said Dr Eckstein was too busy to see me. I gave her Butrans trial/savings cards & showed her each card, describing usage of each one. Discussed eligibility requirements. She said she would show Dr Eckstein & walk him through how the cards are to be used. Offered OxyContin savings cards but she said she thinks his patients on OxyContin are probably on Medicare.
PPLPMDL0020000001	Cleveland	OH	44109	6/1/2012	talked to dr about patients he's starting on Butrans,dr said most of the patients have been taking tramadol every day for some sort of chronic pain condition and asking him for more pills,so he's not giving more pills but starting them on Butrans.dr said patients pain levels are reducing and they are happy.i asked dr if he will continue prescribing Butrans today and next week? dr said yes.asked dr what he does if patients call in with side effect questions? dr said he will treat side effect,such as nausea or a rash but not stop Butrans.told dr that was good to hear and asked him to continue doing this.we discussed commercial insurance patients using initial trial offer cards and we discussed PA criteria for Caresource patients.<font color=blue><b>CHUDAKOB's query on 06/08/2012</b></font>Amy. Good what if question!! I wonder how often he hears side effects.<font color=green><b>BROOKAM's response on 06/10/2012</b></font><font color=blue><b>CHUDAKOB added notes on 06/15/2012</b></font>Thank you!
PPLPMDL0020000001	Cleveland	OH	44109	6/1/2012	dr said he's not started any patients on Butrans lately,asked dr why and whats holding him back? dr said he keeps forgetting about Butrans,dr said its a habit and easier for him to refill tramadol or vicodin and not every patient wants to wear a patch for their pain.showed dr emma and william,patient profiles, we discussed both and dr see's both patient types.i asked dr if he would be willing to prescribe Butrans for patients like this? dr said yes he will consider Butrans,dr asked about medicaid coverage as he has a lot of medicaid patients.we discussed PA criteria for Caresource patients,asked dr if that was feasible to do? dr said yes.asked dr if i can follow-up next week? dr said yes<font color=blue><b>CHUDAKOB added notes on 06/08/2012</b></font>Here is another example of where the clinical trials may have helped. Showing him the type of pain reduction his patients might expect may give him a new perspective on Butrans and how it may help his patients.
PPLPMDL0020000001	Lyndhurst	OH	44124	6/1/2012	I showed doc the profiles of Emma and William and asked doc which patient type she is likely to prescribe for. She said that tramadol patient because she wants to delay going to something stronger as much as possible. I told her that it a great place to position butrans. She said it has been working well but has been having some reports of skin reactions in as much as 50-75% of the patients she has on butrans. I asked what she does for those patients. She said that she will try to continue them a little longer on the patch but ultimately she has switched a couple of patients to oral meds. She said she did not have similar cases with fentanyl. I explained that application site pruritis is one of the frequently reported AEs and if patients continue to be unable to tolerate it, they should be discontinued. She said that she would start a patient on butrans if they are appropriate. I asked if she has started any patients on oxycontin lately. She said not recently but she doesn't use too much oxycontin anyway and its usually after patients have failed on most other meds. I reminded her of the formulary coverage of both oxycontin and butrans and the savings cards.
PPLPMDL0020000001	Garfield Hts	OH	44125	6/1/2012	Stopped Dr Sadowski between patients by handing him a laminated Partners Against Pain pain scale. When I handed it to him, I let him know that in Butrans clinical studies of opioid-experienced & opioid-naive patients, patients saw a reduction in pain score from about 7 to about 3. I asked if he thought that was significant. He said he guesses. I asked if he asks his patients to rate their pain/give it a number when they talk about it. He said no. He said he couldn't stay to talk & said to talk to Deena. Spent time with Deena & showed her Butrans initiation guide. Deena said Dr Sadowski writes fentanyl, so it seems like he should write Butrans. I showed her appropriate range of patients & discussed patients beyond the range having OxyContin as an option. Discussed Butrans as a once weekly. CII opioid with abuse & addiction potential like other opioid analgesics. I asked her to think of patients who Dr Sadowski sees who are getting refill after refill of tramadol, Vicodin, or Percocet. She said he has a lot of those & pointed to a patient's chart, saying that patient was getting Percocet. She also said a patient in one of his rooms was complaining of pain. I asked Deena to ask Dr Sadowski if Butrans could be an option for one of them. She said she would because she doesn't know why he's not using it. She said between the Karen said she has written butrans a few times and most people like it but some patients have skin rashes after using butrans. He recommends hydrocortisone to see if that helps. I confirmed that skin irritations is one of the side effects and that patients should be discontinued if the problem persists. She said it seems to be an issue for patients with fairer skin. I asked her if she will continue to look for other patients for butrans. She said she would try. I reviewed the commercial insurance plans including express scripts.
PPLPMDL0020000001	Lyndhurst	OH	44124	6/1/2012	We discussed the Butrans patient experience program and the feedback it may offer him as well as what the patient gets. He said he will participate. He said that this will help him to finally give Butrans a try. I asked why he has not tried it very much in the past and he said that he gets so busy it is hard to think of anything new. He said he has been using a muscle relaxer often and will try it as an option after NSAIDS and tramadol. He said he likes that that this new muscle relaxer is a less addicting medication to soma and other opioids. He said he does think that Butrans has a place in his practice and he committed to starting 5 patients on the program to gain more experience. Reminded him of his interest in Butrans & told him this program will allow personalized feedback from patients directly to him. I showed him a kit & explained enrollment. Showed him an example of the feedback form he would receive.I asked if he thought he could find at least 5 appropriate patients for Butrans & remember to give them the Butrans Patient Experience Program kit. Reminded him of appropriate patient type, focusing on patients who are taking chronic short-acting opioids around-the-clock, especially if they are not well-controlled on their current treatment regimen. He said he will do this. I let him know I would follow-up.
PPLPMDL0020000001	Berea	OH	44017	6/1/2012	Dr Mandat said he has been having a lot of new starts on Butrans lately. I reminded him of our previous conversation when he told me that he typically starts a patient on Butrans if 4 tramadol per day is not controlling their pain. He said this is true. I asked what the typical starting dose of tramadol is for someone like this. He said usually one tablet q6h. He said if they are taking it like that & are not getting relief, he prescribes Butrans. I showed him savings cards & told him I would replenish his supply since he was out of them & would also leave patient information booklets that give instructions to patients & could help reduce call-backs to the office of patients asking questions on how to use Butrans. He said he would appreciate that. I let him know I would return for further follow-up for further Butrans successes.
PPLPMDL0020000001	Parma	OH	44129	6/4/2012	talked to dr about patient profile,william,dr see's patients like this but hasnt started anyone on Butrans,dr said he only has a few patients taking narcotics and he will keep Butrans in mind but not an option at the moment.
PPLPMDL0020000001	Parma	OH	44134	6/4/2012	asked dr how he feels about prescribing long-acting opioids? dr said not much experience prescribing them but likes the idea of Butrans being transdermal and once weekly dosing,dr said he will keep it in mind for any appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44106	6/4/2012	Reviewed Butrans appropriate patient type with Dr Myton-Craig, focusing her on patients who are 40-60, working, who are seeking some sort of medication adjustment with their around-the-clock opioid regimen. She asked if they could be BWC. I asked if that was a large part of her practice. She said not really but she does have a few patients on it who she treats chronically with opioids. She said a lot of patients are trying to decrease the amount of opioid medications they are taking. I handed her the Butrans initiation guide tool. She looked at the range of patients & asked what the maximum dose is for Butrans. I told her 20mcg is the highest dose, used for titration. She said she has a patient who may be good for Butrans. She went on to say that the patient has a good job & was taking OxyContin & has been decreased to short-acting oxycodone. She said she could start this patient on 10mcg Butrans. I asked how frequently this patient comes in. She said once a month. She said she would try Butrans for him & see if it works. Discussed supplemental analgesia & titration after 3 days. Spoke with Tammy & gave her Butrans formulary grid. She said they are useful for her. I asked if they usually do prior authorizations if a medication requires it. She said yes. I asked how much BWC they have. She said in the time she has worked there, maybe 3-4 patients total.
PPLPMDL0020000001	Cleveland	OH	44103	6/4/2012	talked to Nick,pharmacist,about Butrans and OxyContin stocking, no new Rx for Butrans,showed nick Butrans visual aid,discussed 6 core selling messages and discussed insurance coverage.asked nick to hand out patient info booklets to appropriate patients so they can talk to their HCP's about Butrans,Nick agreed. showed OxyContin conversion guide,discussed a couple examples of conversions from short-acting opioids to OxyContin and gave formulary grids.
PPLPMDL0020000001	Cleveland	OH	44114	6/4/2012	dr talked about the fact she's leaving this office on june 12th and is notifying her patients in person and isnt sure how many patients will go to UH,her new job,that she can manage as UH will not allow her to prescribe ANY narcotics/opioids longer than 6 weeks.dr said she may have a few exceptions for some of her amputee patients that take vicodin every day for chronic pain as they will be taking vicodin for life.dr said other than that,she wont be allowed to prescribe opioids.dr said her patients wearing Butrans will have to stay with this practice and be managed by dr marshall or another HCP if someone else is hired to replace her.
PPLPMDL0020000001	akron	OH	44333	6/4/2012	Asked dr if he initiated a Butrans patient? Dr said no and said he feels bad because he said he told me he would. I asked if he could find a patient appropriate this week. Dr said he will look for it this week.
PPLPMDL0020000001	Westlake	OH	44145	6/4/2012	Spoke with Jennifer, we reviewed the Butrans medication guide, reminder that Butrans can be used with supplemental analgesia and she remembered. We reviewed the 7 tablet strengths for OxyContin and the conversion
PPLPMDL0020000001	Lakewood	OH	44107	6/4/2012	Quick call, I gave the Dr the pull out tool and asked him to start a patient taking tramadol around the clock on Butrans, he said that he will try again. I told him to think of those patients on tramadol who are younger than 65.
PPLPMDL0020000001	Akron	OH	44333	6/4/2012	Followed up on last visit and reintroduced Butrans. Discussed patient case studies and inclusion criteria for Butrans. Asked dr if he has patients like those in the case studies? Dr said that he probably will not prescribe Butrans. I asked why? Dr said that prescribing any scheduled medicines has become too difficult and cumbersome. Dr did say that he has patient on Butrans from pain specialist and that its good to have the knowledge about the product but he will not use it. nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44106	6/4/2012	talked to dr about starting patients like emma,showed patient profile,dr said he has started a couple patients like this on Butrans and they are doing good.asked dr how often he's seeing patients like emma? dr said he see's them every day he's in clinic but he does a lot of procedures so not everyone is appropriate for Butrans.i asked dr if he will start a couple patients like emma,this week,on Butrans? dr said yes he will do that.
PPLPMDL0020000001	Cleveland	OH	44106	6/4/2012	dr said she hasnt started anyone on Butrans lately but does have 1 patient on Butrans and patient is doing good.asked dr whats holding her back from starting more patients on Butrans? dr said nothing she likes Butrans and will start more patients but she does a lot of procedures so not every patient is appropriate.showed patient profile,emma,we discussed patient profile,dr see's patients like this and said she will keep it in mind.asked dr if she will start a couple of patients like emma,on Butrans,this week? dr said yes she will.
PPLPMDL0020000001	Akron	OH	44333	6/4/2012	reviewed patient case studies for Butrans. Dr said that he thinks it's a good product but does not like to prescribe scheduled products. Dr said that the practice as a whole does not like prescribing scheduled products.
PPLPMDL0020000001	Westlake	OH	44145	6/4/2012	nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44114	6/4/2012	We discussed that Butrans may be an option for patients who have not yet started taking vicodin 10mg around the clock, he agreed and said that his patients are limited for Butrans. I let him know to focus on BWC and those under 65 with insurance and said he will try Butrans instead of increasing vicodin for these patients. I showed the main vis aid for OxyContin and we reviewed the 7 tablet strengths for patients. He said most of his OxyContin patients he is maintaining and trying not to increase the dose, I let him know he can titrate down as well and he said he would like to for most patients.
PPLPMDL0020000001	Akron	OH	44333	6/4/2012	talked to john about patients like emma and william,patient profiles,john said he see's these patient types every day and he is considering Butrans for them,john said he will continue starting patients on Butrans,we discussed appropriate initiation and titration of Butrans,we discussed PA criteria for Caresource patients to get started on Butrans and BWC
PPLPMDL0020000001	Lakewood	OH	44107	6/4/2012	asked dr where he is using OxyContin most often. Dr said he uses it a good amount but mostly for his vicodin and percocet patients. Asked dr that if he has patients on tramadol or vicodin that need additional analgesia? Dr said he has not used Butrans yet but has all the information on the product from my lunch. Continued to review Butrans with Jen and she believes he has patients where Butrans will fit. Discussed trial offer and copy cards as well as ESI information.
PPLPMDL0020000001	Lakewood	OH	44107	6/4/2012	I showed the main vis aid and asked him if he would treat all of these chronic pain patients the same, he said no each patient is different.I reviewed that OxyContin offers 7 tablet strengths so that he can choose the dose that is right for each patient, he agreed. I asked if he would convert patients taking short acting oxycodone around the clock to Q12hr OxyContin and he agreed. He said that he is still looking for those patients who are not yet on higher doses of opioids to try on Butrans and I reviewed the pull out tool.



PPLPMDL0020000001	Fairlawn	OH	44333	6/4/2012	Jessica said that the pharmacy is out of OxyCotin copay cards. discussed conversion guide. Butrans prescriptions from DR Shah still coming in and are asking questions about the product. Gave Jessica Butrans patient information kits and reviewed it with her. Jessica said that she likes them and she will hand out to patients.<font color=blue><b>CHUDAKOB's query on 06/15/2012</b></font>-Cliff, Nice work on picking up and recording an adverse event. When you record the adverse event, putting it in the call note as well will allow anyone reading the note to see what the adverse event was, as we cannot see the adverse event part of the call note. Thanks Cliff!<font color=green><b>REIChCL's response on 06/18/2012</b></font>-you're welcome.<font color=blue><b>CHUDAKOB added notes on 06/19/2012</b></font>-Keep up the good work!
PPLPMDL0020000001	Westlake	OH	44145	6/4/2012	Quick call with Lisa, I asked if any questions with Butrans, she said no, they have not seen many scripts. I asked if he would let patients know about Butrans as an option and give them a medication guide and she said most patients do not ask about other options since they get their pills each month. We reviewed that OxyContin Q12hr is also an option instead of short acting around the clock
PPLPMDL0020000001	Norton	OH	44203	6/5/2012	Call in Green office. Introduced Butrans to Dr Borges with visaid and dosing and conversion guide. Provided all key selling messages and discussed appropriate patient selection for Butrans. Dr asked if there are studies about how Butrans help to get patients off short acting opioids? I told dr that there are no studies of that natures however the goal is to treat patients in chronic moderate to severe pain on a long acting product such as Butrans with supplemental analgesia used if necessary. Dr asked about onset of action with Butrans and what the steady state is. I told dr that there are no studies on onset of action but the steady state is 72 hours. Discussed titration at that point with doses. Dr asked about half life. I told dr that half life is 26 hours. I asked what that means to him. Dr said a longer half life is better and 26 hours is good. I asked if he sees himself using Butrans in the appropriate patient. Dr said that he thinks there is a need for Butrans and he will have to look over his patients to find the right one.
PPLPMDL0020000001	Parma	OH	44134	6/5/2012	Dr Scanlon said he continues to try Butrans on patients with good results. I asked him what type(s) of patients he is having the most success with. He said all kinds. I showed "Emma" patient profile & walked through the case study. I asked if he would consider "Emma" a Butrans candidate. He said he has tried it on patients like that at 5mcg. He said he tells the patient to try that for about a week & then will titrate them to 10mcg if necessary. I asked if he has ever had to titrate to 20mcg. He said he has only had to go to 10mcg. He requested additional trial/savings cards because he said he always seems to be running low on them. I asked if he would identify additional Butrans patients this week & he said he would. Positioned OxyContin for appropriate patients beyond Butrans range who could benefit from q12h dosing of oxycodone.
PPLPMDL0020000001	Cleveland	OH	44109	6/5/2012	talked to adam,pharmacy tech,confirmed only 1 Rx for Butrans has showed up,asked adam who wrote the Rx? adam said dr baishnab and for a Caresource patient.adam said patient got Butrans for 1 month,paid cash and never returned.I talked to adam about PA criteria for Caresource patients.I asked Adam if he or pharmacists ever recommend long-acting opioids for patients with chronic pain that are taking short-acting opioids daily yet not controlled? adam said no he didnt and didnt think pharmacists do that.I talked to anisha,pharmacist,confirmed she doesnt provide medication management to patients taking opioids.anisha asked about misuse,potential for abuse,showed this info in Butrans initiation guide,discussed initiation of Butrans and PA criteria for caresource patients to start on Butrans.confirmed OxyContin stocking and Butrans stocking.provided med education catalogs
PPLPMDL0020000001	Cleveland	OH	44130	6/5/2012	I asked Dr Fedorko how often he is the one who starts a patient on an opioid analgesic. He said he hates "all those" medications. I told Dr Fedorko he should be cautious in prescribing all opioid medications, including Butrans & OxyContin. He said he does not prescribe tramadol because it is not effective, so when he does start a patient on an opioid, it is Vicodin, although he rarely prescribes any opioids. He said he does have a few patients on Butrans & they are doing well. He said he wanted to use it in his nursing home patients, but they always get switched to fentanyl because of cost. I agreed that patients with the best access to Butrans will be those who have commercial insurance. I positioned Butrans for appropriate patients who are aged 40-60, working, for whom he is ready to start on an opioid or for whom he is considering some sort of medication adjustment in their opioid analgesic. if they meet the full Butrans indication. I told Dr Fedorko I am not expecting him to write hundreds of Butrans prescriptions, but I do think he probably has a few patients who would be appropriate for Butrans & who may be able to benefit from it.
PPLPMDL0020000001	Parma	OH	44134	6/5/2012	Dr Hernandez asked if he could be a speaker for Purdue for Butrans. I let him know I would submit his name. He said he likes to speak for medicines that work & that are safe. He said he recently started a patient on Butrans for a patient who has foot pain despite multiple surgeries. He said this patient has had gastric bypass surgery in the past, so she was somewhat limited by that in what she could take for it. He said Butrans has been a great option for her & that she is getting good results. He said she will be going soon for another surgery, but he will keep her on Butrans for awhile because he expects her pain to last for awhile. I asked if he thought he would be finding more Butrans patients this week & he said yes. He said he has tried Butrans on a variety of patient types, from those not on opioid medications to patients on high doses of opioids with success. I told him it sounds like he is getting a good range of experience with Butrans. Positioned OxyContin for appropriate patients who are taking chronic short-acting opioids if they could benefit from OxyContin's q12h dosing.
PPLPMDL0020000001	Parma	OH	44134	6/5/2012	Quick call- Handed Lynda Butrans patient profiles & asked her to look through it for examples of patients/patient types who may be appropriate for Butrans. She said she has been thinking of it & that she would read through the profiles. Let her know I would follow-up to discuss the cases.
PPLPMDL0020000001	Akron	OH	44333	6/5/2012	Spoke to hope about Dr Brown mentioning to me about how she wants to prescribe more Butrans but she can't remember it when she is with a patient. Hope confirmed that Dr Brown has a hard time remembering things. I asked Hope if she could place a Butrans conversion card in each one of the exam rooms to help her remember. Hope said that it sounds like a good idea and she will do it.
PPLPMDL0020000001	Westlake	OH	44145	6/5/2012	Quick call, I showed the main vis aid and that OxyContin can be dosed based on patients individual needs, I reviewed that OxyContin may be an option even when adjusting a patients dose down and he said he will try.
PPLPMDL0020000001	Northfield Center	OH	44067	6/5/2012	Spoke with pharmacist Sarah who said she has not dispensed Butrans lately. I asked her if the OxyContin prescriptions she sees, are any of them new or are they all patients continuing on it. She said most are continuing & every once in awhile a new one will come through, although they are careful any time someone is getting a new opioid medication filled, especially if they are a new customer. I agreed that they should always be cautious with opioid medications.
PPLPMDL0020000001	Cleveland	OH	44111	6/5/2012	Quick call with Steve, I reminded him about the use of supplemental analgesia with Butrans and he said he remembered. He has seen a few scripts here and there for Butrans. We reviewed the conversions for OxyContin when moving from hydrocodone or oxycodone short acting.
PPLPMDL0020000001	Parma	OH	44134	6/5/2012	Quick call- Dr Loyke said he hasn't written Butrans but he will if he ever decides that he has a patient who could benefit from long-term opioid treatment.
PPLPMDL0020000001	Cleveland	OH	44143	6/5/2012	I asked doc what feedback he has had from trying butrans. He said he really does not know and can't keep track of those details. He did say that he wrote for a patient out in Chardon who could not afford it. I reminded him to think of butrans for patients that have their insurance through work or less than medicare age (I reviewed the Emma Profile). He said he has the "jist" of where to use it. He said its just a cost issue. I explained the savings with the savings cards. He said he will keep butrans in mind as he agreed that he sees a place for it and is comfortable with the delivery system.
PPLPMDL0020000001	Mayfield Heights	OH	44124	6/5/2012	Spoke to Cory about the movement of butrans. I discussed the indication and the positioning. She had not seen any scripts for it. She said she does not see about of scripts for fentanyl patches either. I provided a patient info guide as a reference tool which explained proper application and rotation.
PPLPMDL0020000001	Cleveland	OH	44109	6/5/2012	showed dr OxyContin initiation guide,talked to dr about patients taking 4,10mg percocet,daily for chronic pain yet not controlled,asked dr to consider OxyContin 20mg Q12H,noted OxyContin being a single entity opioid and discussed dr starting patients on OxyContin 10mg,15mg or 20mg and not waiting for patients to be started on higher doses of OxyContin,dr said ok.dr said he will do that,dr said he saw a Workers Comp patient this morning that was taking percocet and he started this patient on OxyContin.
PPLPMDL0020000001	Cleveland	OH	44104	6/5/2012	talked to dorie,ma,dr started 1 patient on Butrans 5mcg,patient had some itching under patch when it was on side of her chest after 1 week of wearing Butrans.patient switched application sites to the upper arm and itching is gone,patient needed to be titrated to Butrans 10mcg with percocet for supplemental analgesia and is doing well,pain is controlled.dorie said they are accepting more new patients with chronic pain,they are started on tramadol and then they are going to start patients on Butrans and get PA approved by Caresource.dorie said dr started 1 patient today on tramadol and after 1 month,dr will be following up with patient and starting patient on Butrans.asked dorie if patients know this expectation already? dorie said yes patients know,dr is telling them upfront that they will be starting on Butrans and gives patient info booklets to them.
PPLPMDL0020000001	Mayfield Village	OH	44143	6/5/2012	I reviewed the Emma patient profile and she agreed she would prescribe butrans for a patient like this. I asked her about her previous promise to try to write one script a week. She said she would try to do better. She said she wrote 20mcg for a patient that was on high doses of vicodin and was about toe have surgery. I explained that 20mcg is only a titration dose and should be start on 10mcg first. I also explained that if the patient was taking more than 40mg of vicodin, he may not have been appropriate for butrans and may be more appropriate for a low dose of oxycotin. She did not recall the exact dose of vicodin-only that it was high. I discussed the covered insurance plans and the savings cards including the trial month.
PPLPMDL0020000001	Cleveland	OH	44113	6/5/2012	showed dr emma,patient profile,discussed this patient with dr,asked dr if he see's patients like this,dr said yes he has patients like this,asked dr how he would treat them? dr said he would give NSAID's,muscle relaxers,physical therapy &non-opioid options.noted to dr that emma,patient profile,is taking tramadol every day,asked dr what he would do then? dr said he didnt think this patient was bad enough for Butrans,dr said 6 on pain scale wasn't severe enough that he would start on Butrans.told dr this is patient type he could start on Butrans,dr said ok.asked dr what hesitations he has in doing this? dr talked about opioid epidemic in patients,dr said there are flaws in his care for chronic pain patients,room for improvement,dr said he hopes patients will eventually be able to decrease opioid amount or wean off all opioids completely,asked dr if he can start 1 patient on Butrans in next week? dr said 1 week? confirmed 1 week I will follow-up,left initiation guide,discussed PA criteria for Caresource patients,dr said ok
PPLPMDL0020000001	Northfield	OH	44067	6/5/2012	Spoke with Carolyn & gave her information on Butrans & OxyContin savings programs. Showed her back of information sheets & pointed out phone number/contact info for pharmacists in the event there is a problem with a savings card. Also discussed automatic savings through e-voucher. She said they always try to give patients savings if they know it is available. I let her know they could print savings cards at Butrans.com. She said she would share this information with Greg.
PPLPMDL0020000001	Mayfield Hts	OH	44094	6/5/2012	I asked doc how patients are doing on butrans. He said he guesses ok. He has had one patient come back and seems to like it and is working well enough. I asked him if he will continue to try butrans for patients instead of increasing their short acting tablet. He said he will where it fits. Doc was busy and didnt have much time.
PPLPMDL0020000001	Parma	OH	44129	6/5/2012	Quick call- Dr Ortega came up to the window, saw me, & said that he has been keeping Butrans & OxyContin in mind. He said he didn't have time to stop & talk today but said to come back another time to discuss further.
PPLPMDL0020000001	Independence	OH	44131	6/5/2012	Spoke with Cindy & discussed managed care coverage for Butrans & OxyContin. She said she has not had any troubles with pharmacy stocking or managed care for Butrans or OxyContin.
PPLPMDL0020000001	Barberton	OH	44203	6/6/2012	Dr Sundaram said he just tried to sell Butrans to a patient who was still in one of his exam rooms. He went on to say that the patient said they did not want to try Butrans & they wanted Opana. I asked Dr Sundaram what he was going to do. He said he would not give it to her. I asked what the patient is currently on. He said this patient was from Colorado & wanted Opana or OxyContin. I advised that he be cautious in prescribing any opioid medication, including Butrans & OxyContin. I showed him his Butrans patient information booklets & reviewed with him how he can use them in patient counsel & in his process of "selling" the idea of Butrans to patients. He said he would remember that because he thinks it will help. I asked if there was any additional information I could provide him with that would assist him. He said no.
PPLPMDL0020000001	Barberton	OH	44203	6/6/2012	Discussed OxyContin with Dr and asked her about her existing percocet patients. If you have patients that are taking percocet around the clock for an extended period of time, consider using OxyContin two times a day. Dr said that she has some that are on it prn but will consider OxyContin for those that are on percocet around the clock. Discussed Butrans and reviewed Emma as the patient on hydrocodone that needs additional analgesia. Dr said she will use Butrans for that right patient. Explained trial offer and copay cards.
PPLPMDL0020000001	Parma	OH	44129	6/6/2012	Spoke with MA Abbey & reminded her about the patient for whom Dr Saul had prescribed Butrans that we had discussed prior. I asked if she has spoken with that patient to find out how she is doing on Butrans or to make sure the savings card I gave her worked. She said the patient has not called to say it didn't work. Reviewed Butrans appropriate patient type & managed care information. Discussed OxyContin formulary coverage as well, letting her know about favorable coverage on Medicare plans. Offered savings cards but they did not need any. I asked her to give Dr Saul the sealed Butrans Special Report #3 & she agreed.
PPLPMDL0020000001	Akron	OH	44320	6/6/2012	Gave overview of Butrans to doctor. Explained Butrans as a CII, 7 day delivery of buprenorphine. Reviewed doses and appropriate patients using conversion guide. Discussed steady state and titration at that time if needed. Dr asked about comparisons with the fentanyl patch. Told dr that there are no head to head studies and explained how Butrans is to be used after failures on NSAIDs, tramadol or vicodin. Asked dr where she has used Fentanyl? Dr said at the very end of her spectrum of prescribing. Dr asked about insurance coverage. Told her it is covered on Caresource with a PA and explained the criteria for the PA. Asked dr to prescribe and she said

	Lakewood	OH	44107	6/6/2012	I reviewed the patient profile for Emma and asked if he thought this would be an appropriate patient to try Butrans. He said yes and that he does not prescribe higher than 200mg of tramadol for a patient. We reviewed that this type of patient can start on a 5mcg Butrans and then titrate up from there if needed. We reviewed the use of supplemental analgesia and that pain score reduction patients saw in our clinical trials. Dr committed to starting a few patients like this on Butrans and said they will most likely be Caresource patients. I reviewed the PA for Caresource and also discussed this with Shelly and Robyn. We discussed that low dose OxyContin may be an option for older patients and that it was studied in patients over 65.
PPLPMDL0020000001	Cleveland	OH	44130	6/6/2012	I pointed out the Butrans Patient Experience Program kits that I had given to Dr Kansal out to him & asked why all 5 kits were still there. He said he hasn't given any out yet. I asked him why. He said he doesn't know. I told him again that there is a very limited supply of those kits & during our last discussion he committed to identifying 5 appropriate patients to give the kits to. He said he will give them out. I asked him how I can help him get into the right hands. He said there was nothing I could do. He said he will look for some patients & moved the kits right into his direct line of sight when he sits at his desk. I let him know I would be returning again to stay on top of the issue. I also reminded him that he has OxyContin savings cards that can be given to appropriate patients.
PPLPMDL0020000001	Akron	OH	44320	6/6/2012	Asked dr about her patient the put on Butrans. Dr said that the man she had on the 10mcg/day got a rash with a lot of itching. Asked dr is that will stop her from prescribing? Dr said no that one patient getting a rash doesn't mean they all will. Discussed Caresource with dr and talked about the criteria for the PA.
PPLPMDL0020000001	Akron	OH	44320	6/6/2012	Asked dr if Butrans or OxyContin would be more applicable for the patients in his practice in treating their pain? Dr said that probably Butrans because he said he is in a rough part of town and he has to be careful about what he prescribes. Told dr that with Butrans, you can help control their pain with 4 patches a month and that it is a CII. Dr said he will prescribe.
PPLPMDL0020000001	Cleveland	OH	44113	6/6/2012	showed dr patient profiles,emma and william,talked to dr about these patients and if she would consider Butrans? dr said yes she would if insurance paid for Butrans.showed dr clinical background,opioid experienced patients trial and we discussed 30% pain reduction seen in clinical trial,asked dr if that was significant? dr said yes it is,asked dr if she will start more patients,like emma and william,based on this info,on Butrans this week? dr committed to do this
PPLPMDL0020000001	Westlake	OH	44145	6/6/2012	Quick call at window, I told him he has 2 long acting choices, for patients taking vicodin or percocet around the clock and can convert to OxyContin and I gave him the conversion guide. For patients taking tramadol around the clock, Butrans would be an appropriate option and I showed the pull out tool. I asked if he would try Butrans for a patient taking tramadol instead of trying vicodin and he agreed. Laura agreed to help remind him.
PPLPMDL0020000001	Barberton	OH	44203	6/6/2012	Discussed Butrans and OxyContin with Doug(pharmacist). Asked about Butrans prescriptions and Doug said that they have two patients from local drs that are on the 10mcg dose. Discussed patient information guide with Doug and explained application sites and proper disposal of Butrans. Asked about OxyContin prescriptions and what the most common dose is that they fill. Doug told me that the 20mg is the most common and that the local oncologist prescribes the most often.
PPLPMDL0020000001	Lakewood	OH	44107	6/6/2012	Dr Grimm out this week, spoke with MA and she requested more Butrans savings cards. We reviewed the savings programs for Butrans and OxyContin and the insurance coverage for Butrans.
PPLPMDL0020000001	Warrensville Heights	OH	44122	6/6/2012	Dr Gulati said he talked to the patient for whom he tried to write Butrans & he is going to give her another prescription for Butrans & will do the prior authorization. I asked him to tell me more about the patient. He said she is taking tramadol 50mg 4 times per day & does not want to have to take pills. He said she has Aetna commercial insurance. Showed trial/savings cards & discussed eligibility. I asked if he has started anyone on OxyContin lately. He said he writes it "all the time" & then left.
PPLPMDL0020000001	Lakewood	OH	44107	6/6/2012	Quick call at the window, I showed the Butrans FPI and clinical trial pain score reduction for the open label phase, he said that is a good result. I asked if he has patients taking tramadol who are under 65 who he can try on Butrans and he said he will try.
PPLPMDL0020000001	Lakewood	OH	44107	6/6/2012	I told Dr I know that he said he only gets a few patients who would be right for Butrans. I asked if he would be seeing just one this week he can start who is under 65 and taking tramadol around the clock, he said that he will keep an eye out and try to prescribe it. He has not heard back yet from the patient who he started on Butrans which he thinks is probably a good sign. He said he does continue to have patients appropriate for OxyContin, especially in the nursing homes and hospitals.
PPLPMDL0020000001	Lakewood	OH	44107	6/6/2012	Quick call with Megan, I let her know about Butrans managed care updates, caresource and BWC, I asked if she sees OPERS and she said that yes they do see some more a lot of Med D and Medicaid still. I asked her thoughts on the Caresource PA and she thinks that it does not seem too bad since most patients try tramadol or vicodin first anyway. We reviewed that OxyContin may be an option for patients who have Med D plans like aarp and talked to dr about patients he's starting on Butrans,showed patient profile william and discussed clinical background for opioid experienced patients,we discussed 30% pain reduction seen in trial,asked dr if that was significant? dr said yes,asked dr if it was enough for him to start more patients on Butrans? dr said yes it is and he will do that.
PPLPMDL0020000001	Cleveland	OH	44114	6/6/2012	Dr Moufawad said he has been using Butrans, getting more experience. He said he gets mixed results. He said many people are getting good relief from Butrans. He said he instructs patients on how to use it & advises them of maximum dose & only using one patch at a time. I told him it sounds like he is doing the right thing. He said he will usually allow up to 2 Percocet per day for supplemental analgesia. He also said he is using more OxyContin. He said there was an Opana shortage for awhile & then they reformulated it & now patients do not want it. He said he has confidence in OxyContin now more so than before because when OxyContin was first reformulated, it seemed that Purdue was not giving all the information he wanted. I asked if he needs any additional information at this point & mentioned Medical Services. He said he does not at this time.
PPLPMDL0020000001	Beachwood	OH	44122	6/6/2012	Spoke with pharmacist (floater) & presented information on Butrans & OxyContin savings programs. Also discussed automatic savings through e-voucher for Rite Aid customers. She said she would leave my information for the regular staff.
PPLPMDL0020000001	Lakewood	OH	44107	6/6/2012	Quick call, I gave her a managed care grid and let her know that most patients have good managed care access to OxyContin including Med D, I let her know that OxyContin has been studied in patients over 65 and 75 years old, she said she remembered that.
PPLPMDL0020000001	Cleveland	OH	44106	6/6/2012	showed dr patient profile,william,talked about this patient type,dr see's patients like this supported discussion with clinical background-pain reduction page,asked dr if 30% reduction in pain is clinically significant to him? dr said yes it is,asked dr if it's enough for him to prescribe Butrans? dr said yes,dr said he is starting patients on Butrans,likes that he has this option for patients and will continue doing so,told dr i appreciate his continued business and commitment to starting more patients on Butrans.
PPLPMDL0020000001	Cleveland	OH	44113	6/6/2012	showed patient profile,william,we discussed this patient type and showed dr clinical background on pain reduction seen in opioid experienced patients clinical trial,dr said she has patients like william but hasnt started a lot of patients under age 65 on Butrans,dr said she's having success with older patients getting started on Butrans and medicare approving Butrans.i asked dr if she felt Butrans would be appropriate for patients under 65yrs of age? dr said yes,asked dr if she would start a couple patients like william on Butrans this week? dr said yes she will.
PPLPMDL0020000001	Westlake	OH	44145	6/6/2012	I showed Dr the Emma patient profile and asked what he would normally do with this type of patient. He said that he would go to vicodin. He does not prescribe more than 200mg of tramadol for a patient. I asked what his thoughts are on trying Butrans 5mcg instead of going to vicodin and he said that he will try it. We reviewed the clinical trial, inclusion criteria and results. I asked if the pain reduction was significant and he said yes. We reviewed use of supplemental analgesia and titration. Dr said that he will try at least one patients this week. We discussed that OxyContin may be an option when patients are taking more than 40mg of hydrocodone or oxycodone around the clock.
PPLPMDL0020000001	Akron	OH	44319	6/6/2012	Asked if there have been any prescriptions for Butrans recently? Pharmacist(Sara) said no. Gave doing and titration guide and showed conversions. Asked about OxyContin prescriptions and what dose if most commonly filled. She said the 20mg. Gave copay card information for both products. nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44124	6/6/2012	I discussed the key selling messages of butrans as well as the positioning for mod to severe pain patients such as those failing on tramadol or vicodin. I showed the demo and the approximate morphine equivalents. Doc said he thinks that butrans might be a good product but probably not for his patients. His patients are veterans and taking higher doses than is recommending for butrans. I thanked him and told him how much I appreciated his honesty. I asked if he is still initiating patients on oxycotin and at what point. He said he is not taking any new pain patients but will still initiate oxycotin for older patients that have been on other agents for a while. I discussed the savings cards and the formulary coverage for both including MED D plans and oxycotin. He said he does not have issues with oxycotin insurance and patients seem to find a way to afford it.
PPLPMDL0020000001	LAKEWOOD	OH	44107	6/6/2012	Spoke with Ken, We reviewed the medication guide for Butrans and the use of supplemental analgesia. I asked his thoughts on BID vs Q12hr and he said he there is not a big difference, but he can see why it would be important to note for OxyContin. He said he could let the patients know about Q12hr if he talks to them.
PPLPMDL0020000001	Maple Heights	OH	44137	6/6/2012	Spoke with Kim & gave her web course catalog. Also showed information on trial/savings cards for Butrans & OxyContin savings program. Discussed automatic monthly savings for Giant Eagle customers with e-voucher. She said the automatic savings makes things very easy for them. She said they see a variety of insurances here, but do have a lot of Medicare & Medicaid & also some cash pay. Discussed eligibility for savings programs.
PPLPMDL0020000001	Beachwood	OH	44122	6/6/2012	Quick call- Dr Geeta came back to lunch & asked what products I sold. I told her Butrans & OxyContin & reminded her of previous discussions about each of them. She said she had to go to the hospital so she could not stay & asked that I leave information for her with her staff. I agreed.
PPLPMDL0020000001	Copley	OH	44321	6/6/2012	I asked dr if he sees himself prescribing Butrans anytime in the near future? Dr said that managed care is prohibiting him. Told dr that it is covered on Caresource with a PA and described criteria for PA. Explained to dr the coverage is considerably better than a year ago,asked dr to prescribe Butrans for the Tramadol patient we have been speaking about. Told dr i would be back in two weeks and I want him to write a prescription.
PPLPMDL0020000001	Cleveland	OH	44113	6/6/2012	showed dale the william,patient profile,discussed this patient type with dale and showed clinical background,discussed pain reduction seen in opioid experienced clinical trial,dale said they have patients like william and will consider this patient type for Butrans,dale said dr shen,pain mgmt dr,has started a lot of elderly patients on Butrans because they dont fight her on wearing a patch like Butrans for their chronic pain,dale said a lot of younger, under 65yrs of age,patients will fight dr shen and dale on wanting only their pills.we discussed starting patients like william on Butrans and still giving some short-acting opioid for supplemental analgesia,dale said yes he knows that and will continue working with dr shen on considering patients under 65yrs of age to start on Butrans,asked dale for his commitment to start more patients on Butrans this week,dale agreed.
PPLPMDL0020000001	Cleveland	OH	44122	6/6/2012	Dr Rastogi asked if he has to have a special license to prescribe Butrans. I told him no. He asked if you have to for other buprenorphine medications. I told him there is a different drug that require some sort of license, but Butrans is used only to treat pain & does not require any special requirements. He asked if Butrans can/should be used after NSAID's for a patient who has a chronically painful condition. I told him this is a great patient type in which to use Butrans. I showed him "Jessica" profile spread to support this. I asked what he would typically prescribe for someone like this. He said probably Vicodin. I asked if he can see himself prescribing Butrans 5mcg once weekly for this patient now instead of Vicodin. He said yes. He asked if we sample Butrans. I showed him Butrans trial/savings cards & walked him through eligibility & usage, asking him to focus on patients who have commercial insurance. I asked if he has patients 40-60, working, who meet the Butrans indication who may not be getting adequate relief from their non-opioid medication. He said he does. I asked him to select a few of those patients & try Butrans for them & he agreed. I asked what type of patient he usually uses OxyContin for. He said mostly nursing home patients because they usually have chronic pain & he likes the q12h dosing interval. I asked if he ever uses it in patients in his office. He said yes, if he knows up-front that their condition is chronic,asked him to continue, he agreed.
PPLPMDL0020000001	Lakewood	OH	44107	6/7/2012	I showed the vis aid for OxyContin and that OxyContin has managed care coverage for most patients. I asked him to prescribe OxyContin for patients who are taking 4 oxycodone per day and he said he will. I reviewed the ESI managed care info with Angie.
PPLPMDL0020000001	Cleveland	OH	44113	6/7/2012	talked to Cynde,MA,about patients that would be appropriate for Butrans-showed opioid experienced clinical trial,we discussed inclusion criteria and pain reduction and showed emma and william patient profiles,Cynde said she thinks its a good option for patients with chronic pain taking short-acting opioids every day but thinks the dr just forgets about Butrans.i asked Cynde if she would share all of the info we discussed with dr today? Cynde agreed to do this we discussed PA criteria for Caresource patients and initial trial offer cards for commercial insurance patients.
PPLPMDL0020000001	Parma	OH	44129	6/7/2012	Caught Dr Paat at the window. He said he had to go over to the hospital so he couldn't stay to talk. I reviewed OxyContin favorable managed care coverage with approximately 91% of lives covered & handed him Butrans patient profile booklet. I asked him to take a look at the three patient cases inside & let him know I would be following up with him to discuss them in a few weeks at my lunch. Spoke with Shari (MA) & reviewed appropriate
PPLPMDL0020000001	Beachwood	OH	44122	6/7/2012	Caught Roberta at the window- Positioned Butrans for appropriate patients who are not well-controlled on 3-5 Vicodin per day or those who could benefit from once weekly transdermal dosing. She said she will keep it in mind & then walked away. Spoke with Laura & Vicki (nurse) & discussed managed care for Butrans & OxyContin.

	Cuyahoga Falls	OH	44223	6/7/2012	I asked dr if he has had the opportunity to prescribe Butrans? Dr said no. I told dr that a very important part of prescribing pain medicine is the appropriate medicine for the appropriate patient. Dr agreed. I used the patient profiles to identify again the tramadol and vicoden patient as appropriate patients for Butrans. Told dr that it is a CIII, 7 day patch and if sees it being valuable to his practice? Dr said he believes Butrans works and does fit but admitted to not remembering it. I gave dr the conversion guide and told him that it will help him remember. Dr agreed to remember Butrans.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/7/2012	Opened call with dr Parikh by telling him how important it is to prescribe the appropriate medicine for the appropriate patient. Asked dr if he knows what I was going to be speaking about today? Dr said yes, the Butrans patch. Discussed calls when we have described appropriate patients for Butrans. Discussed Emma case study and explained why Emma is appropriate for Butrans. Discussed William case study and why he is appropriate for Butrans. I asked dr what he would do in a situation with a patient on tramadol or vicoden needs additional analgesia and you have a decision to make. The decision for a dose adjustment or a therapeutic change. Dr said he would initiate with Butrans on both of those occasions. I asked dr to do that for those patients. Dr asked about insurance coverage. I asked which plan is most important to his practice. Dr said SummaCare. Showed dr his own copy of the managed care flashcard where SummaCare is and explained the trial offer and copy cards. Dr agreed to use Butrans.
PPLPMDL0020000001	Fairview Park	OH	44126	6/7/2012	Quick call, I showed Emma profile and asked if he has seen patients who are like Emma where he can try Butrans. He looked at it and said that he does think this is an appropriate Butrans patient, I asked if he would continue to write for these patients and he said that he would and is happy with the results.
PPLPMDL0020000001	Shaker Heights	OH	44122	6/7/2012	Quick call- Dr Agarwal said he knows, "OxyContin & the patch". I asked if he meant Butrans. He said yes. He said he will keep them in mind & then walked into a room. Spoke with Michelle (nurse) & gave her web resources catalog, asking her to give it to Dr Agarwal. She agreed & asked if she could also have a copy of it, so I gave her one.
PPLPMDL0020000001	Cleveland	OH	44127	6/7/2012	showed dr william,patient profile,asked dr if he see's patients like this? dr said yes,asked dr whats next step for patient? dr said refill vicodin or send to pain management.asked dr if he would consider Butrans? dr said yes he would now.dr said he has 1 patient on Butrans and patient is doing well so he will start more patients on Butrans.told dr that was great to hear and happy the patient is doing so well.showed dr Butrans clinical background-opioid experienced patients,we discussed inclusion criteria and 30% reduction in pain seen in clinical trial with these patients-asked dr if this was clinically significant? dr said yes.asked dr for his commitment to start a couple patients on Butrans within next week.
PPLPMDL0020000001	Cleveland	OH	44143	6/7/2012	Window call...I reminded doc of the the two options for treating patients with chronic pain -Oxycontin for patients taking percocet ATC and butrans patients taking tramadol ATC. Gave him a formulary grid and explained that commercial patients can get a one month trial and \$40 off every month.
PPLPMDL0020000001	Mogadore	OH	44260	6/7/2012	Discussed Butrans in her patients who are like Jessica in patient profiles and instead of going to a tramadol or Vicodin when the patient is in pain all day, she has option of Butrans. She said it is more that she cannot remember Butrans and she said to continue to come in and talk about it, she is creature of habit. Reviewed managed care in Butrans and Oxycontin. Reviewed low doses in her elderly patients.
PPLPMDL0020000001	Cleveland	OH	44102	6/7/2012	talked to Nagla about emma and william,patient profiles,asked if she's seeing these patients here? Nagla said yes every day,asked whats the next step for these patients? Nagla said the HCP's here will usually refill the short-acting opioid or convert to another short-acting opioid,asked Nagla if she is recommending Butrans for patients like emma and william? Nagla said yes she is but its up to HCP's to write Rx and get patients started on Butrans.Nagla said they have patient info booklets and initial trial offer cards in exam rooms so thats helping to prompt discussions of Butrans.asked Nagla if she will start a couple patients on Butrans in next week? Nagla said yes she will talk to HCP's and keep working with them.
PPLPMDL0020000001	Cleveland	OH	44113	6/7/2012	showed dr emma,patient profile,dr said she would consider Butrans for this patient type but doesnt have any patients that need a long-acting opioid at this point.dr said her patients like this taking tramadol are controlled so no need to convert them to a long-acting opioid like Butrans.dr said she likes once weekly dosing of Butrans and that its transdermal and will keep in mind,but doesnt think she has any patients for Butrans,we talked about appropriate dosage ranges for short-acting opioids when considering patients to start on Butrans,gave initiation guide and asked dr to consider Butrans for any patients within the week,that need a dosage adjustment for their tramadol.dr said she will consider that.
PPLPMDL0020000001	Bedford	OH	44146	6/7/2012	Spoke with MA Roberta, who said Dr Haddad left for the day. Discussed savings cards for OxyContin & Butrans. I asked who usually gives the card to the patient. She said usually the doctors. Reviewed prior authorization requirements for Butrans on Caresource. She said I would just have to try back another time to see Dr Haddad.
PPLPMDL0020000001	Lakewood	OH	44107	6/7/2012	I asked Dr if he see patients like Emma on a regular bases, he said that more of his patients look like William and are already taking vicodin. I asked what his next step usually is and he said that he will increase their dose or send them to pain management, but now he likes to try Butrans. We reviewed the pull out tool and how to initiate a patient on vicodin, he agreed to continue to write Butrans for these types of patients. We discussed that OxyContin may be an option for patients taking more than 40mg of hydrocodone.
PPLPMDL0020000001	Westlake	OH	44145	6/7/2012	Dr said that he's been writing tons of Butrans and Megan confirmed. I asked how the patients are doing and he said they are doing well, not a lot of complaints except that for some it is too expensive, he had one patient who was unhappy who said that the cost was \$160 and they could not use the savings cards. I asked if the patient was over 65 and Megan said she might have been. I reviewed the managed care and the plans to get Butrans through- commercial, BWC, caresource. She said that a lot of scripts have not had any managed care issues. Dr committed to continuing to prescribe Butrans.
PPLPMDL0020000001	Parma	OH	44129	6/7/2012	Dr Rossi saw me at the window. Passed Butrans patient profiles back to her, opened to the "Jessica" page. I asked her to take a look at that patient case & asked what her treatment plan for a patient like that would be. She said she didn't have time for a discussion & suggested I schedule a lunch. Spoke with Brittanie & scheduled first available lunch. Reviewed appropriate Butrans patient type with her. She said Dr Rossi has a lot of patients who get refill after refill of pain medications.
PPLPMDL0020000001	Akron	OH	44310	6/7/2012	Told dr to remember Butrans for those patients of his that are still having pain on short acting opioids. Showed conversion guide and asked him to keep it on his desk. Dr agreed and said he likes Butrans.
PPLPMDL0020000001	Mogadore	OH	44260	6/7/2012	Dr said he has written Some Butrans. I asked how many of his patients are still on Butrans and he said some are on and some are off. I asked what type of patients are you looking at and he said patients who have taken everything. I showed him Jessica and asked him if he had this patient, what would he typically write for her and he said Tramadol. I said would you ever consider Butrans considering the patient is in pain ATC and he said yes that makes more sense. I showed opioid naive study and pain reduction and he was impressed with the 7.2 to 2.6 decrease in pain. I reviewed managed care and said that those other patients who are on everything, Oxycontin may be a better choice.
PPLPMDL0020000001	Cleveland	OH	44113	6/7/2012	talked to deb about patients she's starting on Butrans,asked deb to consider Butrans earlier in therapy-focused discussion on patients taking 2-3 vicodin/day,not controlled,needing a dosage adjustment,instead of giving 4th vicodin,start patients on Butrans.deb said she will consider but most of the patients she's starting on Butrans are taking 4-5 vicodin/day,we discussed PA criteria for Caresource patients and deb said she's getting more PA's approved at this point so she's happy as she can start more patients on Butrans.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/7/2012	Asked dr if he has patients on vicoden around the clock? Dr hesitated and said not many. I asked dr of that small amount, are they all pain free? Dr said that he does not treat much pain and that he refers out immediately.
PPLPMDL0020000001	Richmond Heights	OH	44143	6/7/2012	Asked dr if a patient comes into you complaining of low back pain that you would not treat it. Dr said sometimes he will for the right case but mostly he refers out to Narouze. Dr asked if Narouze has used it and I told dr to I spoke to Mel about the key selling messages of butrans and where we are asking docs to prescribe butrans. He said he has a few customers taking it. I asked what kinds of questions, if any if gets about patches. He he usually doesn't get too many questions. I explained the importance of proper application and rotation of butrans for the best results. I gave him the patient info guide as a reference tool.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/7/2012	Barry conducted call with Jackie(pharmacist). Reviewed initiation and titration guide in detail and asked if they stocked Butrans. Pharmacy does not stock Butrans and Jackie did not know about Butrans. Discussed trial offer cards and copy cards. Pharmacy said most of their patients are Medicare and Medicaid. Pharmacist asked about coverage with Butrans. Discussed Caresource and status on commercial plans as well as discussing need for patient information guide. Jackie thanked us for the information.
PPLPMDL0020000001	Berea	OH	44017	6/7/2012	We reviewed the patient profile of Emma, I asked what he would typically do next for a patient like this, he said that he would keep her on tramadol, do physical therapy, and possibly prescribe a muscle relaxer. I asked if he would consider Butrans for this patient, he said he would because he thinks that a 7 day patch is easy, he said he would be most concerned about managed care not covering it, and the patient calling back to complain. I reviewed the managed care for Butrans and the savings program. I asked if he would try Butrans on just a few patients who are younger than 65 and have insurance and he said that he will. We reviewed the pull out tool and that he can titrate in 3 days if need be. We reviewed the medication guide and where to place Butrans.
PPLPMDL0020000001	Cleveland	OH	44113	6/7/2012	talked to dr about patients he's starting on Butrans,dr said most patients get started on Butrans 10mcg and eventually will be titrated to 20mcg,dr said patients are doing well on Butrans,still some insurance issues occasionally with Caresource but getting more PA's approved.asked dr if he will continue starting more patients on Butrans in next week? dr said yes he will.
PPLPMDL0020000001	Mogadore	OH	44260	6/7/2012	Dr said he is still writing Butrans if it is getting paid for. I asked what do you mean, are you talking about medicare or commercial and he said medicare and medicad. I said medicare wont be covered more than likely but Caresource is PA if they are chronic and failing a short acting and he said he was talking about Buckeye and I said not covered. I let him know about Express scripts and he said that is great. I said when you see patient like hypothetical Jessica and they are taking OTCs and NSAIDs and they have a disease state like spinal stenosis or disc disease, what would your next step be and he said tramadol or Vicodin. I said do you think it makes sense to go to 5mcg of Butrans and he said yes. HE said he thinks it is a great drug, it is just the coverage. HE asked about Oxycontin and I said Oxycontin is a great option for your patients who are on Mecdicare who you say do not get covered on medicare. I said Oxycontin has been studied in elderly and is safe to use in elderly and said if you are giving them Percocet 4 times a day he can write Oxycontin 10mg q12h
PPLPMDL0020000001	Cleveland	OH	44111	6/7/2012	Spoke with John, we reviewed the medication guide for Butrans and he agreed to hand them out, we discussed Butrans FPI and the use of supplemental analgesia. I asked if he sees a difference in Q12hr vs BID and he said yes, We discussed the importance of patients taking OxyContin Q12hr as indicated and he agreed.
PPLPMDL0020000001	Northfield	OH	44067	6/7/2012	Gave Sun-Li Rx Patrol information leaver & explained the program. I asked if he finds this type of information to be helpful. She said yes. Discussed appropriate range of patients for Butrans, from patients not well-controlled on NSAID's to patients taking up to 80mg equivalent oral morphine per day. I asked if she makes recommendations to physicians or patients. She said usually not.
PPLPMDL0020000001	Woodmere	OH	44122	6/7/2012	Spoke with Tamika & gave her information on Rx Patrol for the pharmacists. Also discussed savings opportunities for patients for Butrans & OxyContin. Discussed eligibility requirements for savings programs. She said she would let the pharmacists know. She said none of the pharmacists had time to speak with me.
PPLPMDL0020000001	Macedonia	OH	44056	6/7/2012	Reminded Dr Pai of previous Butrans conversation. He said he does not have a lot of patients on chronic opioids & added that he refers those patients to pain management. I asked him at what point he would refer a patient to pain management. He said he is generally willing to give a patient one pill of pain medication for them to take at night, as that is how pain generally starts for these patients. He said when they start saying more than that single dose at night, he refers out. He said he will treat them up until they can get in with pain management. I asked how long that typically is. He said usually 2-3 months. I asked if he would be willing to give patients Butrans for that 2-3 months while they are waiting for their appointment. He said that was a great idea. He went on to say that when we talked at my first lunch with him, he remembers thinking that Butrans was really something he could use & that there is a place for it. He added that what he really needs is just a simple reminder tool to keep on hand so that he will not forget about Butrans. I gave him an initiation guide & showed him the slide-out tool. He said that was the perfect item to help remind him. I asked if he gets the information I leave for him. He said sometimes & that it just depends on how much other literature he gets. Reviewed managed care & savings. He said he uses OxyContin in severe pain or older patients. I asked him to continue & he agreed.
PPLPMDL0020000001	Cleveland	OH	44113	6/7/2012	dr said he's not started anyone on Butrans yet,asked dr whats holding him back from starting the 1 or 2 patients he committed to? dr said he's given a few booklets to patients but patients dont want a patch they only want their pills.dr said he is fine refilling tramadol and vicodin every month,its his percocet patients he doesnt like refilling every month.dr said he's starting to send a lot of his percocet patients to pain management and whatever they come back to him on,he will just maintain patients opioids.i asked dr if he has a couple patients taking percocet that he could start on Butrans,just to try,before sending to pain management? dr said yes,he will consider that but he still believes patients only want their pills.we discussed dr starting patients on Butrans 5mcg or 10mcg,showed initiation guide,and giving short-acting opioids [percocet in this discussion] for supplemental analgesia,referenced Butrans FPI on supplemental analgesia and Butrans.dr said ok,asked dr if this seemed easy to do,dr said yes he will try,dr asked about PA criteria for Caresource patients to get Butrans? we discussed PA criteria,asked dr if that was feasible? dr said yes he has Isa,MA,process all PA's so i need to share this info with her.i talked to Isa about PA criteria for Caresource patients,Isa said that sounded easy and she will handle all PA's.i put patient info booklets in exam rooms so dr could remember Butrans
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PPLPMDL0020000001	North Olmsted	OH	44070	6/7/2012	Spoke with Floater, we reviewed the key messages for Butrans and the medication guide, I showed the FPI for Butrans and the use of supplemental analgesia. We reviewed OxyContin conversion guide and Q12hr as an option instead of short acting around the clock.
PPLPMDL0020000001	Highland Heights	OH	44143	6/7/2012	Window call...Doc was busy. He waved and said "Butrans, I know". I told him butrans id now tier 2 preferred on express scripts. Provided grid to Marianne and explained the lower co pay. Nothing learned.
	Cleveland	OH	44114	6/7/2012	talked to Elaine about patients she feels are appropriate for Butrans,showed initiation guide,Elaine said most patients want their pills and dont want to try a patch,Elaine said its tough treating chronic pain as these patients have a psychological dependence on the pills,asked Elaine how comfortable she is discussing Butrans with patients and starting them? Elaine said she's getting there and its getting easier to discuss with patients but she still has to give patients some short-acting opioid for supplemental,told Elaine that was good to do that and showed FPI,discussed use of supplemental analgesia with Butrans.I asked Elaine if she can start a couple patients on Butrans in next week? Elaine said yes she will do that.
PPLPMDL0020000001	Mayfield Hts	OH	44124	6/8/2012	Doc said he only had time to "sign". I discribed the patient taking tramadol 20mg ATC everyday and that instead of increasing their dose, try those appropriate patients on 5mcg of butrans. I asked him to try for just one BWC patient.
PPLPMDL0020000001	Cleveland	OH	44111	6/8/2012	Spoke with John, we reviewed the medication guide for Butrans and he said that he has seen scripts from downtown Drs mostly. He does give the medication guide to patients. I reviewed the FPI and use of supplemental analgesia with Butrans. We reviewed the OxyContin conversion guide and that it is another long acting option when patients are taking over 40mg of hydrocodone per day.
PPLPMDL0020000001	Cleveland	OH	44109	6/8/2012	dr said he's still starting patients on Butrans weekly,patients are doing well nothing new to update.dr said he needs patient info booklets but thats it.told dr i appreciated his commitment to starting patients on Butrans weekly and asked if he will continue doing so? dr said yes.we discussed PA criteria for Caresource patients,BWC patients starting on Butrans and commercial insurance patients starting on Butrans using initial trial offer cards
	Cleveland	OH	44109	6/8/2012	showed dr emma,patient profile and BUP 3015,opioid experienced clinical trial,we discussed patients like emma as dr said he treats a lot of patients with tramadol,dr said he would normally start patients on vicodin,after tramadol,but he has considered Butrans for some patients if they are willing to wear a patch,rotate patch once a week and insurance covers Butrans.we discussed inclusion criteria and 30% reduction in pain seen in clinical trial,dr said the % in pain reduction was impressive.asked dr if he would start a couple patients on Butrans in next week? dr said yes he will.dr asked about PA criteria for Caresource patients,we discussed this and commercial insurance patients starting on Butrans.
PPLPMDL0020000001	Akron	OH	44319	6/8/2012	Asked dr if he feels like Butrans is a product he would feel comfortable prescribing? Dr said maybe. I asked him if he would feel comfortable providing a long acting option for his patient that the on short acting ipioids? Dr said maybe. nothing else learned.
PPLPMDL0020000001	Akron	OH	44312	6/8/2012	Saw dr through window and asked him if Butrans was a product that would fit for him in his practice? Handed him the conversion scale. Dr said he remembers my lunch with him and remembers thats a 7 day patch. Dr said he sees it being a good option for patients that would like a patch instead of pills. I asked dr to prescribe it to the patient that is currently on a short acting opioid and has been on one for 3+ months and may require a long acting option. Dr agreed to review info again.
PPLPMDL0020000001	Mayfield Heights	OH	44124	6/8/2012	Window call....I reviewed the patient types for butrans and oxycontin. I explained that both are being covered on BWC and have savings cards for commercially insured patients. Provided formulary grids for both.
PPLPMDL0020000001	Westlake	OH	44145	6/8/2012	Brian told me he has been writing Butrans for several patients in the nursing home, I asked if he has been able to get them through on managed care, and he said some of them. I asked what type of patients has he thought of Butrans for and he said for patients with chronic pain who are taking too much vicodin. I showed him the pull out tool and where Butrans may and may not be appropriate, he said ok. I showed him Emma and asked if he would consider a patient like this for Butrans, he said sure. He agreed to continue to prescribe Butrans. I asked if he will be prescribing CII and he said yes, I reviewed OxyContin as a Q12hr option.
PPLPMDL0020000001	Cleveland	OH	44103	6/8/2012	showed dr OxyContin visual aid,asked dr which pain conditions he feels most comfortable prescribing OxyContin in? dr said doesnt matter,if patients have legitimate documented pain and he's treating them he considers a long-acting opioid at some point.dr said he likes OxyContin,it works and is easy to get covered.we discussed dr starting his elderly,65yrs+,patients on OxyContin,dr said he does and he has a lot of medicaid patients he starts on OxyContin.asked dr for his continued commitment starting new patients on OxyContin,in next week,dr said yes he will do this.
PPLPMDL0020000001	Westlake	OH	44145	6/8/2012	The Dr told me that he has continued to use Butrans and that he probably has about 10 patients on it now. He said they are on all different strengths, and one patient on the 20mcg. I showed the Dr the patient profile for Emma, and asked if he would consider her for Butrans, he said that most of the patients that he has put on Butrans were previously taking hydrocodone or oxycodone. We reviewed the pull out tool and when Butrans may be appropriate based on the total daily dose. We discussed titration and I showed him the clinical trial for patients taking the 20mcg dose of Butrans. We reviewed that OxyContin may be an option for patients who are taking more than 40mg of hydrocodone per day.
PPLPMDL0020000001	Akron	OH	44305	6/8/2012	Gave Butrans patient information kits and asked if they would find it valuable to have if patients have questions about Butrans. Pharmacist said he would. Asked about OxyContin prescriptions. Was told that a lot of OxyContin is filled and most common dose must be the 20, 40 and 80 mg doses. Provided Dosing and titration guide.
PPLPMDL0020000001	Akron	OH	44312	6/8/2012	Asked pharmacist if he fills a lot of vicoden and percocet? Was told that they fill a lot of the short acting opioids. Asked if he sees the patients on these products having increasing doses filled. He said sometimes and agreed that Butrans is a good option. Reviewed CII, steady state, titration, and ESI win.
PPLPMDL0020000001	Cleveland	OH	44109	6/8/2012	showed dr william,patient profile,dr said he see's patients like this,asked dr what's the next step? dr said probably refill vicodin or start on percocet,dr said he would consider Butrans if patients willing to wear a patch and insurance covers Butrans.we talked about dr starting patients on Butrans but still giving short-acting opioids for supplemental analgesia.showed fpi for this info.we discussed initiation,titration and commercial insurance patients starting on Butrans and using initial trial offer cards.showed BUP 3015,opioid experienced clinical trial,we discussed inclusion criteria and 30% reduction in pain,dr said the data was impressive.asked dr if it was impressive enough for him to start a couple patients on Butrans in the next week? dr said yes he will do that.
PPLPMDL0020000001	University Heights	OH	44121	6/8/2012	I discussed the patient profile of Emma and asked doc what he does when patients taking 200mg of tramadol come in for a dose adjustment. He said he tried not to go that high. I explained that even if they are taking 100-150mg of tramadol butrans might be an option instead of titrating those patients. I asked if he would do something like that. He said if patients can afford it. I explained that commercially insured patients can expect to pay about \$15/mo with a savings card. Nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44103	6/8/2012	showed dr OxyContin visual aid and conversion guide,vicodin and percocet examples,asked dr when she considers a long-acting opioid appropriate? dr said if patients are taking 2 percocet/day,not controlled,she will consider OxyContin.we discussed starting patients on lower dosage strengths of OxyContin,showed 7 tablet strengths and we discussed Q12H dosing of OxyContin.asked dr if she will start a couple new patients on OxyContin in next week? dr said yes.we discussed dr starting patients over 65yrs on Butran and showed formulary grid with this info
PPLPMDL0020000001	Akron	OH	44310	6/8/2012	Spoke wot Char and Dr about Butrans. Asked both about any new patients on Butrans. Was told that BWC encompasses most of their Butrans Patients. Dr said his patients are doing well and does not know of any problems of the medicine. nothing else learned
PPLPMDL0020000001	South Euclid	OH	44121	6/8/2012	Spoke to Jill about the movement of butrans. She said she thinks they have a few patients on it. I asked if she was aware of any issues with cost to the patient or non-coverage issues. She did not know but knows that she has seen people pick up scripts for it. I asked if patients have brought in the savings cards. he said that she thinks so as the copays have been reasonable. I explained that I left savings cards the last time I was there. She looked and found them. I gave her a patient info guide as a reference tool for customer questions.
PPLPMDL0020000001	Lyndhurst	OH	44124	6/8/2012	I started to discuss the Emma profile and asked HCP if she has patients like that. She asked if I was serious or joking. I asked her what she does for patients failing on 200mg of tramadol. She said refer them to pain mgmt. I explained that that might be an ideal patient for butrans - she would be treating their chronic pain and keeping that patient in the office. She said the problem is coverage. She mostly sees medicare and medicaid. I asked her to consider for commercially insured patients.
PPLPMDL0020000001	Mayfield Hts	OH	44124	6/8/2012	I discussed the commercial insurance plans covering butrans including express scripts which is tier 2 preferred. I stressed the importance of continuing to give patients the savings card. I informed doc of the need to sign his speaker program forms in order to be on the list of speakers. He submitted the forms while I was there.
PPLPMDL0020000001	Parma	OH	44134	6/11/2012	Spoke with floater pharmacist & Mary (technician). Gave them information sheets on Butrans & OxyContin savings programs. Explained eligibility requirements. Offered cards for both products but they said to wait until a regular pharmacist is in to see if they want them. Reviewed appropriate patient type/range for Butrans & OxyContin.
PPLPMDL0020000001	Parma	OH	44129	6/11/2012	Spoke with Karen (nurse) & reminded her of my recent lunch. Discussed appropriate patient type, showing her patient profile booklet's 3 different examples & discussing OxyContin as an example of an option for appropriate patients beyond the Butrans range. She said Dr Moysaenko does have some patients on chronic pain medications, but added that he does not have a lot of them. Discussed how Butrans once weekly transdermal system may be an appropriate option for some of them. She said she would share this information with Dr Moysaenko when he returns from vacation.
PPLPMDL0020000001	Cleveland	OH	44106	6/11/2012	asked dr if he saw any challenges/drawbacks in starting patients on Butrans? dr said some patients dont want to wear a patch and insurance coverage can be a challenge especially for medicaid patients.we discussed appropriate patients,showed william patient profile,dr said he would consider Butrans for patients like this,asked if he see 'these patients often? dr said yes,dr said he will consider Butrans.we discussed initiation and titration of Butrans,showed initiation guide asked dr for his commitment to start a couple patients on Butrans this week,dr agreed.
PPLPMDL0020000001	Independence	OH	44131	6/11/2012	Introduced the Butrans Patient Experience Program to Dr Trickett. I let her know that there is an extremely limited quantity of kits available & asked if she was willing to find 5 appropriate patients to start on Butrans & give the kit to. She said she would do that. Discussed eligibility requirements for the program & asked her to look for appropriate patients with commercial insurance who meet the full indication & who will be willing to enroll in the program & take the assessments every 7 days. I asked what her experience with Butrans has been like thus far. She said she does not know if anyone is still on it at this time. I asked when she prescribes Butrans how long she expects the patient to be on Butrans. She said it depends on the patient & what condition they have. She said if it is possible, the ultimate goal for any of her patients is to get off all pain medications, but for some, this is not realistic. I asked again if she is certain that she will be able to identify 5 appropriate patients for the program & she asked if there is an amount of time that she has to give them all out. I asked her to do it as quickly as possible, while keeping the appropriate patient & criteria in mind. She said she never knows what patient will be walking through her door so she can't make any promises on how soon she will give out the kits, but said she will do her best. Let her know I would be following up frequently to stay on top of it. OxyContin broad formulary access message.
PPLPMDL0020000001	akron	OH	44333	6/11/2012	Asked Dr and Shella(m) about butrans managed care coverage and their amount of ESI patients. Office does have ESI and a good amount of OPERS and STRS patients. Dr was glad that it is now tier 2. I asked for him to prescribe Butrans to the next patient with ESI prescription coverage on wither tramadol or vicoden. Dr agreed.
PPLPMDL0020000001	Parma Heights	OH	44129	6/11/2012	Spoke with Cathy, a new pharmacist at this location. Presented Butrans & OxyContin savings programs. She said most of the time, patients are willing to pay whatever a co-pay is for their OxyContin. I explained that if a patient's co-pay is over \$25, she can save them money with the cards. She took one package of them. She said they do dispense Butrans as well & asked about savings for it. Showed her trial offer & savings card & explained eligibility requirements. She said she would keep them with the Butrans & would give them to eligible patients.
PPLPMDL0020000001	Parma	OH	44129	6/11/2012	Dr Gigliotti said he just wrote another Butrans prescription last week. He said that makes 2 that he has written. I asked what made him write Butrans for this patient. He said it was because he was on "a ton of Vicodin". I asked him what dose & how much per day. He said he doesn't remember. I showed initiation guide pg 6 table & pointed out the appropriate range, adding that patients beyond that may be candidates for OxyContin. He said he thought Butrans would be better for this patient.
PPLPMDL0020000001	Lakewood	OH	44107	6/11/2012	Quick call, I showed Dr the patient profile for Emma and that 50% of patients saw about a 30% pain score reduction. He said ok, he he said he is trying to prescribe and has tried it in the nursing homes. I reviewed that OxyContin is also an option that is covered on Med D and also has been studied in geriatric patients.
PPLPMDL0020000001	Copley	OH	44321	6/11/2012	Spoke to Dana about the OxyContin and Butrans managed care coverage updates.Asked Dana who does the call backs and PA's. Spoke to Jen about the OxyContin coverage. I asked her if they have Medical Mutual prescription insurance patients and Anthem Sr Advantage. Jen said they have a good amount of both. Showed OxyContin managed care matrix and highlighted coverage on appropriate plans. Gave ESI Butrans flashcard and discussed overall coverage.
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PPLPMDL0020000001	Parma	OH	44129	6/11/2012	Introduced myself & Purdue's products to Betty (MA). Explained that Dr Henig had contacted the company to request a sales rep visit. She said she remembers him doing that. She said he had already left for today but asked that I return on Wednesday morning. She asked me to bring samples of Senokot-S and/or Colace- I agreed. She asked me what Butrans is. Delivered indication & explained once weekly transdermal dosing. She said Dr Henig may be interested in hearing more about it. I told her he may not be based on his specialty. She said he does more than OB/GYN & also does endocrinology.
PPLPMDL0020000001	Akron	OH	44303	6/11/2012	Asked Rod if he has seen any Butrans prescriptions yet. he said not but he continues to use OxyContin. Provided Rod with formulary information and asked if he is getting any kickback from insurance companies. Rod said not really but sometimes there is a PA and they always go through. Rod said he needed more OxyContin copy cards. Discussed ESI and Caresource wins with Butrans.
PPLPMDL0020000001	Cleveland	OH	44114	6/11/2012	today is dr last day in office,she's going to University Hospitals in Euclid,dr said she won't be allowed to prescribe any opioids except for tramadol and thats only for patients with acute pain-6weeks is max allowed.dr said any patient that has chronic pain needing more than tramadol will have to be referred to pain management.dr said she won't be able to manage her patients that have been taking Butrans as she signed a non-compete so she's not allowed to tell her patients where her new office is going to be at. dr said if patients find her then she will see them and might be allowed to maintain a couple patients on Butrans but most will be referred to pain management as they all have chronic pain(the patients she started on Butrans),wished dr good luck in new office
PPLPMDL0020000001	Lakewood	OH	44107	6/11/2012	Quick call- I showed the patient profile and asked if he would start a patient like Emma on Butrans next time he sees a patient like this. He said that he will.
PPLPMDL0020000001	Cleveland	OH	44113	6/11/2012	talked to dale about patients they are starting on Butrans,dale said its a mix of younger and older,dale said they have some BWC patients on Butrans and overall patients are doing well on Butrans.asked dale what patients are saying in 4week follow-up,dale said he hasn't heard anything negative,or side effects about Butrans.dale said patients are decreasing about 3 points on pain scale.asked dale what most patients pain levels are when he see's them? dale said most patients are at an 8-10 on pain scale so they are decreasing from that point.asked dale if that was clinically relevant to him? dale said yes.asked dale for his commitment to starting more patients on Butrans? dale said yes he will.we discussed importance of patient info booklets and showing application/rotation sections,dale said he does give booklets and nurses go through that info with patients.
PPLPMDL0020000001	Cleveland	OH	44106	6/11/2012	showed dr BUP3015,opioid experienced patients,clinical trial,we discussed inclusion criteria and 30% pain reduction,asked dr if this was clinically significant? dr said yes it is.asked dr if this was enough for him to prescribe Butrans? dr said yes he will consider Butrans for patients.showed william,patient profile,asked dr if he would consider patients like william to start on Butrans? dr said yes he will.asked dr if he can start 1 patient on Butrans within next week?
PPLPMDL0020000001	Akron	OH	44333	6/11/2012	Told dr that since our last discussion was on the efficacy and pain responses that I felt it was important he has the studies for Butrans. I outlined the opioid experienced trial with help of FPI. Reviewed mean pain scores and explained the graph depicting the responder rates and reduction in pain. Gave copy of opioid naive patients and then explained the patient information guide. Dr said he wanted about 15 of those to hand out to patients to ensure better success.
PPLPMDL0020000001	Parma	OH	44129	6/11/2012	Quick call- Turned Butrans patient profile booklet to "William" & handed it back to Dr Taylor. I told her it was an example of a patient type that she may encounter every week in her office & asked her to read through it. She said she didn't have time right now but she would keep it & read it when she was done seeing her patients. I let her know I would follow up as I was interested in getting her thoughts on how she would treat a patient like this. OxyContin broad formulary coverage reminder.
PPLPMDL0020000001	Akron	OH	44305	6/11/2012	I asked dr Vora if he has had the chance to use Butrans? Dr said he has not yet. I told dr that since his nursing home patient has done so well that he needs to use Butrans for his own patients in his practice. Reviewed Emma and William case study profiles. Dr said that it makes sense to use Butrans for the controlled release option in those patients discussed. I showed dr pain score reductions from both studies. Dr said he knows first hand that it work clinically. Dr agreed to use.
PPLPMDL0020000001	Cleveland	OH	44106	6/11/2012	showed patient profiles emma and william,dr said she would consider both patients for Butrans,dr said if attendings will approve of her starting patients on Butrans she will start them.we discussed initiation of Butrans,showed initiation guide and showed BUP3015,opioid experienced clinical trial,we discussed inclusion criteria and 30% pain reduction,dr said that was impressive and she will consider Butrans for a couple patients,asked dr if she will start a couple patients this week on Butrans,dr said yes she will.
PPLPMDL0020000001	Uniontown	OH	44685	6/11/2012	Told dr that one of the most important things about Butrans is its placement in a physicians algorithm. Discussed in detail all case studies. Dr said that he sees it fitting for the tramadol and vicoden patients. Discussed dosing, titration, steady state, warning against external heat sources, and proper disposal of Butrans. Discussed managed care and copy cards. Dr said that he understands how and where to use it and Butrans is listed in his E-scribe system.
PPLPMDL0020000001	Akron	OH	44333	6/11/2012	Spoke with Mary about the doctor and OxyContin and Butrans. Provided her with OxyContin managed care flyer and Butrans initiation and titration guide. Mary said that she knows that the dr has looked over the Butrans prescribing information and understands where it is to be used. I asked where it might be used best for him and she did not know.
PPLPMDL0020000001	Cleveland	OH	44109	6/11/2012	asked dr what dose of OxyContin are patients usually started on? dr said he rarely starts a new patient on OxyContin,they are all continuing patients on OxyContin.showed dr OxyContin conversion guide,we talked about patients taking 2-4 perccet/day and converting to OxyContin earlier so dr can start patients on OxyContin 10mg,15mg or 20mg Q12H,dr said ok he will think about it as its a good reminder.asked dr if he could start a couple new patients on OxyContin this week? dr agreed.showed Butrans initiation guide,we discussed appropriate dosage ranges for short-acting opioids and starting patients on Butrans,dr said he will start a couple patients this week on Butrans we discussed express scripts and BWC patients starting on Butrans.<font color=blue><b></b></font>CHUDAKOB's query on 06/20/2012</b></font>You said the Dr. said he starts no new patients on OxyContin and yet you asked him to start new patients on OxyContin, and he agreed? What did you say to him that convinced him to start new patients?<font color=green><b></b></font>BROOKAM's response on 06/22/2012</b></font>barry he continues his patients on OxyContin,as i noted in my call note,but i am working with him on considering new patients for low dosage strengths,hence what you read above which he was open to hearing,thank you<font color=blue><b></b></font>CHUDAKOB added notes on 06/22/2012</b></font>Amy, I was just reiterating what your call note said. Thanks for the clarification!
PPLPMDL0020000001	Lakewood	OH	44107	6/11/2012	I showed the patient profile of William and asked if he would be more likely to prescribe Butrans or OxyContin for this patient. He said probably OxyContin, but he does think that Butrans could now be an option as well. I reviewed the clinical trial for Butrans for patients who are opioid experienced and the pull out tool to help explain when Butrans would be an appropriate option or OxyContin Q12 hr. I asked the Dr if he would start patients on OxyContin or Butrans based on their current opioid and he agreed.
PPLPMDL0020000001	Cleveland	OH	44113	6/11/2012	dr asked if there was anything new with Butrans? I told dr i was looking forward to discussing how her patients are doing on Butrans and what feedback she is hearing from patients on follow-up appointments? dr said most patients are at high levels of pain,9-10,and she is seeing 3 point drops after patients starton Butrans.asked dr if that was clinically significant? dr said yes.dr said she has a handful of patients that are elderly on Butrans,medicare plans are approving Butrans,and patients are doing well so she's happy.asked dr if she's started any patients on Butrans that are under 65yrs of age, commercial insurance or Caresource? dr said yes she has a couple commercial insurance patients on Butrans and BWC,thats not a problem,dr said Caresource just denied a PA for a patient that was appropriate for Butrans and had tried vicodin and perccet(at different times) recently and Caresource still denied PA,so she's not really thinking of Caresource patients for Butrans. we discussed PA criteria again,dr said she knows it sometimes depends on who answers the phone at Caresource as to the PA's getting approved or not.asked dr to continue focusing on patients under 65yrs,to start on Butrans,dr said ok she will
PPLPMDL0020000001	Parma	OH	44129	6/11/2012	Quick call- Elaine said she is still writing Butrans. She said she gives the patient a Butrans script & allows short-acting for supplemental analgesia. Spent time with Dawn & gave her pamphlets for protecting prescription drugs. She said they would be very helpful. She said Myra & Elaine have been trying Butrans & have both been very busy. She said they did not need savings cards or patient education at this time.
PPLPMDL0020000001	Parma	OH	44129	6/12/2012	Dr Roheny said didn't have much time today & added that he hasn't tried Butrans on anyone else yet. I showed him Butrans formulary grid & discussed Caresource prior authorization requirements, letting him know patients can obtain Butrans if they have tried tramadol, codeine, hydrocodone, or oxycodone. I asked if he would ever consider Butrans as an option for patients who had not yet been on any of those 4 medications. He said "never say never" & started walking into a room. OxyContin broad formulary coverage message.
PPLPMDL0020000001	Stow	OH	44224	6/12/2012	Abby said she was going to call me the other day, she said she had a patient who was on suboxone and she did not know how to convert. She said they ended up taking the patient off of Suboxone and then initiated Butrans and the patient was doing fine. I showed her the opioid experienced patient study and showed pain reduction and she thought that was significant. I asked her what patients look like she is writing in and she said patients who are on morphine or fentanyl and I said those may not be appropriate patients and she said why and I said they are on more than our maximum dose and asked her if she sees patients who are on Vicodin or Percocet 4-6 times a day and she said all of the time. I said those may be more of an appropriate patient. I reviewed managed care coverage
PPLPMDL0020000001	Cleveland	OH	44130	6/12/2012	I showed Dr Diab OxyContin core visual aid page 4, pointing out the top continuum. I showed him that OxyContin can be used in appropriate patients with moderate to severe pain. I asked him if he ever uses it in moderate pain or if he reserves it for severe pain. He said "both" & then walked into a room.
PPLPMDL0020000001	Cleveland	OH	44125	6/12/2012	Spoke with Emily (pharmacist), who said she thinks they have only one person, maybe two, on Butrans. Reviewed appropriate patient type/range. I asked if she sees new OxyContin starts or only continuing. She said both, it just depends on if the patient is taking it for a chronic condition or for a shorter time, such as after a surgery.
PPLPMDL0020000001	Garfield Hts	OH	44125	6/12/2012	Dr Sadowski said the patient who he just saw was a candidate for Butrans. I told him it seems that this has been happening a lot lately that he has been telling me this, so he must have more potential Butrans patients than he realizes. I asked why that patient was a potential Butrans patient. Dr Sadowski said the patient has pain from arthritis. He asked if Butrans could help a patient like that. I told him Butrans was studied in patients with osteoarthritis. I asked him why he didn't give the patient a Butrans prescription today. He said that he gave him Celebrex to try first, but if that did not work, he will give him Butrans. I asked if that is a firm commitment & he said yes. I reminded him that OxyContin may be an option for appropriate patients who may benefit from oxycodone dosed q12h. I gave him sealed Butrans "Special Report" & asked him to read it. He agreed.<font color=blue><b></b></font>CHUDAKOB's query on 06/21/2012</b></font>Ashleigh, while we did study Butrans in osteoarthritis, this was one of the studies that failed and you have an obligation to tell him that.<font color=green><b></b></font>APSEGAS's response on 06/22/2012</b></font>OK I will do this ASAP.<font color=blue><b></b></font>CHUDAKOB added notes on 06/22/2012</b></font>Thanks Ashleigh!
PPLPMDL0020000001	Cleveland	OH	44109	6/12/2012	showed dr OxyContin visual aid,we discussed appropriate patients for OxyContin,dr said he doesn't start new patients on OxyContin only continuing patients.asked dr if he had patients taking 2-4 perccet/day (showed conversion guide)that could be appropriate for a long-acting opioid? dr said he has patients taking perccet but hasn't started anyone recently on OxyContin,dr said he will think about it.we discussed starting patients on lower dosage strengths - 10mg,15mg,20mg OxyContin and discussed Q12H dosing.asked dr if he will start a couple patients on OxyContin this week,with focus on patients over 65yrs as we discussed insurance coverage? dr said he will think about it.dr said he will start a few patients on Butrans,dr said its taking him longer to get started with Butrans as its not a habit for him but he will start writing soon.we discussed appropriate patients for Butrans,initiation and titration of Butrans and PA criteria for caresource patients
PPLPMDL0020000001	Uniontown	OH	44685	6/12/2012	Discussed Butrans and OxyContin with Barb(pharmacist) and Lynn(head technician). Reviewed all key selling messages, steady state, exposure to external heat sources, proper application and disposal. Lynn said that they had a patient on Butrans 10mgc who was on Medco and used the copy card and paid only \$15 but didn't think the patient was still on it. Lynn did not know who the prescriber was. Explained the trial offer and copy cards. Gave new OxyContin conversion guide and discussed appropriate patients and copy cards.
PPLPMDL0020000001	Cleveland	OH	44113	6/12/2012	showed dr william,patient profile and clinical background, BUP3015, discussed inclusion criteria and patients like william being considered for Butrans therapy,discussed 30% reduction in pain,asked dr if this was clinically significant? dr said yes it is,asked dr if its enough for her to continue prescribing Butrans? dr said yes,asked dr if she will start a couple patients,like william,on Butrans this week? dr said yes she will.we discussed insurance coverage-focus on PA criteria for Caresource patients.
PPLPMDL0020000001	Norton	OH	44203	6/12/2012	I asked dr if he had any question about Butrans from our discussion last week. Dr said that he did not and feels that Butrans is pretty straight forward. I asked dr if he sees himself using it and where? Dr said he does not have any new starts yet but does see the niche for his patients uncontrolled on tramadol or vicoden. I told dr that he will never know how effective Butrans can be until he uses it in his practice. I reviewed pain scale efficacy date from both clinical trials and asked him if the pain scale reductions in the studies made him feel more comfortable in prescribing? Dr said he would very much like to see those type of reductions and said he will continue to search for the right patient.



PPLPMDL0020000001	Cleveland	OH	44130	6/12/2012	Spoke with fill-in pharmacist & showed him savings cards for Butrans & OxyContin. Explained trial offer for Butrans & eligibility requirements. Discussed e-voucher's monthly savings being automatic. Also reviewed OxyContin savings program & discussed usage requirements. He asked for cards to leave for the regular pharmacist.
PPLPMDL0020000001	Cleveland	OH	44130	6/12/2012	Dr Fedorko said he would try to find more patients for Butrans for me this week. I reminded him that we agreed that a reasonable patient type was one who is appropriate, 40-60 years old, working, who could benefit from a once weekly transdermal system for their moderate to severe chronic pain. He said he will try & then walked into a room.
PPLPMDL0020000001	Parma	OH	44129	6/12/2012	Spoke with Anita & Lynn (MA & nurse). Reviewed Butrans & OxyContin savings opportunities & favorable broad managed care status for OxyContin. They said he does not treat as many patients for pain as he has in the past. They did not give a reason or explanation. They did not need any savings cards for either product at this time.
PPLPMDL0020000001	Berea	OH	44017	6/12/2012	Spoke with Nikki, we reviewed the Butrans medication guide and asked if he would let patients know about it as an option. She does see scripts from Kavlich but no Butrans yet, she is still maintaining one Butrans patient. We reviewed OxyContin as an option instead of hydrocodone or oxycodone around the clock.
PPLPMDL0020000001	Westlake	OH	44145	6/12/2012	I showed the clinical trial for Butrans opioid experienced patients and the reduction of pain scores in the FPI. I asked if he thought it was significant. Dr does prescribe suboxone for opioid addiction. He said that he does see how Butrans can be used with supplemental analgesia because it is a low dose. Dr said that the reason why he does not write more Butrans is due to managed care. He said that 30% of his practice have commercial insurance. I reviewed the managed care for Butrans. I showed Dr the patient experience program and asked if he would participate. He agreed.
PPLPMDL0020000001	Berea	OH	44017	6/12/2012	He said that he that he is referring patients that are taking any opioid for chronic pain even t3. I asked where Butrans fits in and he said that he would feel comfortable prescribing Butrans before sending them to pain management. I presented Emma patient profile and I asked if he sees this type of patient, he said he does often, I asked what he would do next and he said that he would get an MRI, try muscle relaxers, I asked if he would start this patient on Butrans 5mgc and he said he would.
PPLPMDL0020000001	Berea	OH	44017	6/12/2012	I reviewed William patient profile for Butrans, I asked where he would go next for this patient and he said that he understands that Butrans would be an option for a patient like this. He said is only objection is cost because this patient will just want to keep their pills because its cheaper.
PPLPMDL0020000001	Parma	OH	44129	6/12/2012	I reminded Dr Kushnar of our previous Butrans discussions & asked her what she thinks it really is that is holding her back from prescribing Butrans. She said she thinks it is a matter of just not seeing the right patient. She then said she actually may have one particular patient in mind for it who will be likely coming in within the next 2 weeks or so. I asked what makes her think this particular patient would be a good candidate. She said she is out of things to try for him. I asked her to clarify & showed her the appropriate range of patient for Butrans. She said he actually is someone who doesn't like narcotics. I reminded her that Butrans is a CIII opioid with abuse & addiction potential. She said she knows that & that it is just that the patient may not perceive Butrans as a narcotic because the delivery system & dosing is different than other narcotics. I asked what this patient's pain is from. She said he has multiple disc herniations. She said he used to come in every few months but her has been coming in more & more frequently, complaining of more & more pain. Discussed dosing, titration, & use of supplemental analgesia with Butrans. Also reviewed managed care & trial/savings cards. I asked if she would prescribe Butrans for this patient when he comes in next time & she agreed. Also discussed OxyContin savings cards. She said she just writes the script & does not worry about what they have to pay for it. She said she probably wouldn't give the cards out.
PPLPMDL0020000001	Akron	OH	44319	6/12/2012	I asked dr if he has any reservations using Butrans again for his patients? Dr said no. I asked what may be holding him back from prescribing again. Dr said he needs to find the right patient first. I asked if a patient called back on tramadol and said he/she is still in pain what do you do? Dr said he would either start a new product or titrate same product. Showed how Butrans is that option for that particular patient. nothing else learned.
PPLPMDL0020000001	Stow	OH	44224	6/12/2012	Dr said he is using Butrans. I asked him what types of patients is he writing Butrans in and he said patients who are on Vicodin or Percocet. I asked what has to happen in order to initiate Butrans. He didnt really answer he started talking about making pills harder to manipulate. HE said he likes Butrans because it is harder to abuse. I said to him it is schedule 3 and still has the potential for abuse. HE said he does not do conversions with medications. HE said he moves them up and if they do better he keeps them on it. I asked what percentage of his patients are taking hydracodone and he said about 80% and then asked him how many are appropriate for Butrans and he said 40%. I REVIEWED MANAGED CARE
PPLPMDL0020000001	Westlake	OH	44145	6/12/2012	I reviewed Butrans patient profile of William. Dr said that he does see patients like this but some are taking even higher doses. I asked what he would do if William called him to say he was still in pain and Dr said he could see Butrans being a good option at this point. We reviewed the clinical trial for Butrans and pain score reductions. Dr said that he wishes he could see these types of results with his patients, but they always say they are a 10/10 pain score. We discussed the dosing for Butrans and I asked if he would start a patient like William and he agreed. Dr mentioned that when OxyContin was reformulated, there were many unhappy patients, but now it seems to have slowed down.
PPLPMDL0020000001	Berea	OH	44017	6/12/2012	Spoke with Cora, she just graduated from pharmacy school and will be a pharmacist for CVS, we discussed the medication guide and key messages for Butrans, she will keep the medication guide as a reference and will also hand them out to any new patients. We reviewed the use of supplemental analgesia with Butrans per the FPI. She said she did not know that and thought it was very good to know. We reviewed the managed care for Butrans and the ESI win. I showed her the OxyContin conversion guide and that Q12hr OxyContin may be an option for a patient on hydrocodone or oxycodone around the clock.
PPLPMDL0020000001	Cleveland	OH	44113	6/12/2012	showed dr william,patient profile,asked dr whats the next step for this patient and is this patient appropriate for Butrans? dr said he would refill the vicodin and no he didnt think william,patient profile,was bad enough for Butrans.dr said like the patient profile,emma,a 6 on a pain scale wasnt bad enough to warrant a long-acting opioid,dr said he would keep this patient on vicodin longer and try physical therapy, exercise,etc and see if patients pain could be controlled and decreased by doing these things.I asked dr when is a long-acting opioid appropriate then? dr said if patients pain is consistently at a 9-10 on pain scale,after trying everything and being on short-acting opioids for awhile,then he might consider Butrans.dr said he doesnt prescribe long-acting opioids overall so this might be tough for him to prescribe.
PPLPMDL0020000001	Uniontown	OH	44685	6/12/2012	Discussed Butrans with follow up from last call. Asked dr if she had any new starts? Dr said she had not yet but plans to continue looking. Dr admitted that the amount of patients appropriate for Butrans is limited. I discussed how she admitted having some patients that are opioid naive and also had some on tramadol. Dr agreed and wanted another approximate conversion chart to remind her.
PPLPMDL0020000001	Parma	OH	44129	6/12/2012	Quick call- Discussed BWC coverage for Butrans (no prior authorization required at this time) & OxyContin (prior authorization required). Dr Ortega said he is using both medications. Spoke with Cindy & reviewed managed care coverage, focusing on BWC. She said lately they have not given her much trouble with Butrans or OxyContin.
PPLPMDL0020000001	Stow	OH	44224	6/12/2012	I showed the Dr opioid experienced study and asked him if he thinks that is what he is seeing in his practice and I said do you think that is a significant reduction and he said yes. I asked if he is seeing that in his practice and he said there are 2 things that prevent him from using more and he said one is insurance and he said the other is if it is not strong enough and I asked him what types of patients is he seeing that it is not strong enough and he said patients who are on morphine or Fentanyl and I said those patients may not be appropriate for Butrans and he said why. I showed him initiation guide and said if the patient is on more than 80mg morphine equivalent they may not get the pain relief. HE said then I would put 2 on and I said our max dose is 20mcg and he said he did not like that. I asked him how often in a day do you see patient who are on Vicodin or percocet ATC and he said all of the time. I said those are Butrans patients. HE then asked about managed care coverage and I reviewed that and he kept asking about BWC and he said that is good bc all they will approve is Morphine. I asked for his BWC patients and he said he will
PPLPMDL0020000001	Cleveland	OH	44111	6/13/2012	Spoke with Dave, we reviewed the managed care info for Butrans and the ESI win, I asked if he sees any specific employer groups and he said not really and he sees a lot of Med D and Medicaid. We discussed that OxyContin may be an option for patients who are on Med D and I reviewed the formulary grid.
PPLPMDL0020000001	Akron	OH	44310	6/13/2012	Spoke with Char about Butrans and asked about recent success. Char said that the majority of their patients are BWC but do have some private prescription insurance patients. Discussed appropriate patients for Butrans and Discussed Emma and William case studies. Char said they do have patients that fit those descriptions and that Butrans is a good option.
PPLPMDL0020000001	Cleveland	OH	44130	6/13/2012	I showed Dr Popa Butrans patient profile for "Emma". I asked if she sees this type of patient in her practice. She didn't answer. She asked if Butrans is CII or CIII. I told her it is CIII & is an opioid, meaning it does carry abuse/addiction potential. I showed her "Emma" again. She took the profiles out of my hand & looked at "Emma" & "William". Discussed Butrans as a once weekly transdermal system for patients suffering from pain from conditions such as osteoarthritis & low back pain. She said she would try it. She asked what else I have- started to talk about OxyContin, but she said "forget it" & walked out of the room. Spoke with MA Renee & discussed Butrans appropriate patient type. She said Dr Popa has patients on tramadol, Vicodin, & Percocet month after month. Discussed Butrans once weekly transdermal dosing.
PPLPMDL0020000001	Maple Heights	OH	44137	6/13/2012	Quick call- Positioned Butrans once weekly for appropriate patients who are 40-60, suffering from pain from a chronic condition such as osteoarthritis. Reminded him about his trial/savings cards. He said he is keeping it in mind. Also asked him to consider OxyContin for appropriate patients beyond the Butrans range.
PPLPMDL0020000001	Akron	OH	44320	6/13/2012	I asked dr what he currently does for a patient on vicoden who is still having pain? Dr said it depends on insurance. I asked if he is sold on Butrans itself? Dr said he is but insurance dictates what his decision will be. I explained Caresource coverage and PA criteria. I asked dr to try Butrans on the appropriate patient and explained that his private insurance patients can get it for as low as \$15 a month. Dr agreed.
PPLPMDL0020000001	Garfield Heights	OH	44125	6/13/2012	Spoke with a floater pharmacist who said the hours for the pharmacy are under review, as is the rest of the store due to some KMart stores closing around the country. Discussed Butrans appropriate patient type, focusing on those who are taking up to 80mg equivalent oral morphine per day. Discussed application & rotation. Reviewed OxyContin savings cards. She said she would leave my information for Heather.
PPLPMDL0020000001	Bedford	OH	44146	6/13/2012	Dr Moufawad said he received some letters from Purdue & he is confused. I asked him to elaborate. He said they include papers & forms for him to fill out regarding Butrans side effects that he has told me about. I explained that we are required to report any adverse events we hear about to the company. He said he can understand reporting serious side effects, but that for minor things, he does not feel that warrants spending so much time filling out paperwork. I told him he is not required to fill out the forms, but let him know this information can help. He asked that Purdue not send him any more paperwork like this in the future if the side effect is not serious. I let him know I would still need to report the adverse events, but would request he not be contacted in certain situations. I asked him to continue to prescribe Butrans & OxyContin for appropriate patients. He agreed.
PPLPMDL0020000001	Warrensville Heights	OH	44122	6/13/2012	Quick call- Positioned OxyContin for appropriate patients who suffer from moderate to severe pain who may benefit from q12h dosing. Also discussed Butrans Caresource prior authorization requirements. Recommended Senokot-S for opioid-induced constipation. Spoke with Michelle (nurse) & reviewed savings cards for Butrans & OxyContin. Also gave her OTC samples.
PPLPMDL0020000001	Akron	OH	44320	6/13/2012	Told dr to focus on her patients on tramadol and vicoden who are uncontrolled and still in pain. Showed conversion guide and discussed dosing from IR opioids.
PPLPMDL0020000001	Cleveland	OH	44111	6/13/2012	Spoke with Jim, I reviewed the patient medication guide and the 4 places to apply Butrans. I showed him the demo and disposal unit and reviewed how to dispose of Butrans. He said he will be sure to let the patients know. I reviewed the OxyContin conversion guide and that this is the reference we leave with the Drs in the area.
PPLPMDL0020000001	Cleveland	OH	44106	6/13/2012	showed dr patient profiles-emma and william,we discussed both of these patient types and dr said he see's both of them,asked dr whats the next step? dr said he would either refill the short-acting opioid or talk to patient about Butrans and see if patient was willing to wear a patch,remember to rotate once a week and if insurance covered Butrans.I asked dr if insurance was put aside,would he be hesitant to prescribe Butrans for these patient types? dr said no he thinks theres a place for Butrans in his practice he just hasnt started anyone recently,we discussed PA criteria for Caresource patients and initial trial offer cards for Commercial insurance patients,asked dr if he would start a couple patients on Butrans this week? dr said he will consider it,dr said he leaves monday, june 18th for a month on vacation so he will see me again in July,told dr i appreciated his commitment to starting a couple patients on Butrans.
PPLPMDL0020000001	Cleveland	OH	44130	6/13/2012	Spoke briefly with John & discussed Butrans application & rotation. Gave him some patient information booklets as he could not find the others I had given him. I asked if he has seen any new OxyContin prescriptions lately or just continuing. He said he hasn't noticed, but thinks most of what they see is continuing.
PPLPMDL0020000001	Cleveland	OH	44114	6/13/2012	dr said he's starting patients every week the number fluctuates-some weeks there could be 1 patient other weeks 4 or 5 patients,asked dr if he will start a couple new patients on Butrans this week that look like william,showed patient profile? dr said yes he will,discussed PA criteria for Caresource patients with John,PA in office.
PPLPMDL0020000001	Barberton	OH	44203	6/13/2012	Discussed Butrans in depth with case studies and clinical data from FPI on pain scale reductions. I asked dr if he has any reservations using Butrans again? Dr said no and his previous patients on Butrans are still on it and doing well. provided fair balance information about exposure to external heat and proper patch application and sites. Asked dr to use Butrans again to gain new clinical data from his patients. Reviewed OxyContin conversion guide. Discussed formulary information on both products.
PPLPMDL0020000001					

PPLPMDL0020000001	Cleveland	OH	44104	6/13/2012	dr said he has a couple patients on Butrans,they are doing well but hasnt started anyone recently.we discussed dr looking at his commercial insurance patients,in the office,that are appropriate for Butrans-showed william,patient profile and initiation guide,dr said he has a couple patients with commercial insurance that are under 65yrs and will consider Butrans for them.showed OxyContin conversion guide discussed patients taking hydrocodone and oxycodone that arent controlled and are ready for a long-acting opioid like OxyContin,dr said he prescribes OxyContin for nursing home and hospice patients but will consider for patients in the office.
PPLPMDL0020000001	Cleveland	OH	44106	6/13/2012	showed dr patient profile,william and BUP3015-opioid experienced clinical trial background-asked dr if he's seeing these types of patients in his practice? dr said yes he does and he does discuss Butrans with them.asked dr if there was any reason why he wouldnt start patients on Butrans? dr said no unless insurance didnt cover Butrans,we discussed PA criteria for Caresource patients and i asked dr for his commitment to starting more patients on Butrans,dr said yes he will do that.
PPLPMDL0020000001	Cleveland	OH	44114	6/13/2012	talked to John about patients they are starting on Butrans,we discussed dr katz leaving the office and dr marshall now taking care of all her patients,john said they will maintain the patients on Butrans that dr katz started and he will continue to start new patients every week. showed william,patient profile and clinical background discussing 30% pain reduction seen in trial,asked John if this was clinically significant? john said yes.asked if John will start more patients on Butrans this week? John said yes he will.we discussed PA criteria for Caresource patients and BWC patients starting on Butrans.
PPLPMDL0020000001	Parma	OH	44134	6/13/2012	Dr Hernandez was leaving for the day. He stopped & said that he just started someone on Butrans today & gave them the trial/savings card. He added that the patient has had back pain for years so he thought Butrans would be a good option for him. He said he consistently gets good results from Butrans & that is why he writes it because if his patients are happy, he is happy. I asked if he has started anyone on OxyContin lately. He said he still writes it, just not as much, especially with BWC's coverage now.
PPLPMDL0020000001	Akron	OH	44313	6/13/2012	Spoke to pharmacist about Butrans and OxyContin. Pharmacist said he did not know about Butrans. Explained Butrans in depth and discussed all key selling messages. Steady state, exposure to external heat sources, and conversion and titration guide. Reviewed copay cards and trial offer. Pharmacist said that they do not see much OxyContin filled in the pharmacy and did not have need for copay cards.
PPLPMDL0020000001	Westlake	OH	44145	6/13/2012	Quick call, I showed Emma patient profile and asked what he will do for this patient when she calls and says that she is still in pain. He said that he will prescribe Butrans, I asked if that is really what he will do and he said he will try. I asked if he remembered what dose to start and he said the lowest 5mcg. I let him know he can start there and then titrate to the 10mcg as soon as 3 days.
PPLPMDL0020000001	Akron	OH	44320	6/13/2012	Followed up on last call about discussing dosing, titration, and proper patient selection. Asked dr what she does currently when she has a patient on vicoden who calls in or comes in for a follow up appointment saying they are still in pain? Dr said she would refer out immediately or possibly go to percocet. I asked dr about her use of percocet and why she wouldn't go to the ER oxycodone instead of percocet. Dr said she didn't know why. Discussed Q12h dosing with OxyContin and ability to individualize the dose with it. Dr asked about insurance coverage. Reviewed formulary and asked her to use Butrans for her tramadol and vicoden failures and OxyContin instead of the IR OxyCodone.
PPLPMDL0020000001	Cleveland	OH	44104	6/13/2012	showed OxyContin conversion guide,examples of percocet and asked dr how he's managing his patients chronic pain that are taking percocet every day? dr said he see's these patients every month and is only maintaining some of them, said a lot of these patients are being sent to pain management,asked dr if he would consider converting a couple of these patients,taking 2-4 percocet/day,to OxyContin? dr said no he's not starting anyone new on OxyContin,dr said he'll try Butrans but isnt going to start new patients on OxyContin.we discussed appropriate dosage ranges,showed initiation guide,for Butrans and discussed initiation,titration and insurance coverage for Caresource and commercial insurance patients,asked dr if he will start a couple patients on Butrans this week? dr said he will see who comes into the office but he will start some patients on Butrans.
PPLPMDL0020000001	Akron	OH	44313	6/13/2012	Spoke to Dr about OxyContin and Butrans. Gave dr about patients in the OxyContin over 65 at 33% and over 75 at 9%. Told dr that the reason I am telling you this is because he can prescribe it for his Medicare D patients. Showed formulary card. Showed dr the Butrans patch. Discussed CIII, 7 day transdermal patch. I asked dr what he likes most about OxyContin. Dr said because he knows it works and it is well covered. Dr wanted to have us leave Butrans information with Tina. Discussed all key selling message for Butrans with Tina and formulary coverage with private insurance and Caresource.
PPLPMDL0020000001	Akron	OH	44313	6/13/2012	Spoke to Ann(pharmacist) about Butrans and OxyContin. Gave all key selling messages for Butrans. Explained the copay cards and e voucher. Ann asked about abuse potential with Butrans. Told Ann that Butrans is an opioid like any other and it can be abused. Provided conversion guide for both products.
PPLPMDL0020000001	Shaker Heights	OH	44122	6/13/2012	Spoke with technician as the pharmacist was busy with a customer issue. I showed her information on savings cards for Butrans & OxyContin. I explained eligibility & let her know patients with any type of government insurance cannot use the cards. She asked about patients who pay cash. I explained that cash paying patients cannot use trial cards but can use the other cards. She said they usually give eligible patients cards if they have them but said they didn't need any of either at this time. She said she would give my information to Nahla.
PPLPMDL0020000001	Cleveland	OH	44103	6/14/2012	showed dr OxyContin visual aid,discussed appropriate patients that are taking short-acting opioids,focus was percocet,but not controlled and ready for a long-acting opioid,dr said she prescribes a lot of OxyContin and will continue doing so,talked to dr about starting patients on lower dosage strengths of OxyContin and titrating appropriately,dr said ok she will do that,asked dr if she will start a couple of her UHC/AARP and Silverscript Med Part D patients on OxyContin as i showed her formulary grids? dr said she will,dr talked about the couple patients that are still wearing Butrans and doing well,dr said insurance coverage has been only barrier and some patients dont want to wear a patch they only want their pills,talked to dr about starting patients on Butrans yet still giving short-acting opioids for supplemental analgesia,dr said ok she will do that-showed Butrans FPI with this info,asked dr if she has a couple patients coming in today or tomorrow that are taking 1 of the short-acting opioids listed in Butrans initiation guide? dr said she probably does and will consider Butrans.we discussed PA criteria for Caresource patients,this is biggest population and medicare.
PPLPMDL0020000001	Beachwood	OH	44122	6/14/2012	Spent time with all the nurses from pain management. Introduced Butrans, delivering core messages. Discussed Butrans as a CIII opioid with abuse/addiction potential. Gave them initiation guides & discussed range of patients that may be appropriate for Butrans. The nurses discussed several patients who they thought would be good candidates for Butrans. Discussed formulary coverage. Gave them patient information booklets & showed them how they can be used in patient counsel. Reviewed application, rotation, adhesion, structure of patch, & disposal. I asked if they ever see patients who are not yet on an opioid. They said sometimes. Discussed that Butrans can be used in opioid-naive patients at 5mcg. Discussed titration & steady state after 3 days. Also discussed use of supplemental analgesia. I asked if the doctors there used OxyContin. They said some of them do, although the doctors are all trying to ween patients off their opioids & are especially strict with long-acting opioids. They said they do not understand this because some patients just do well on fewer pills per day. Discussed opioids, including Butrans & OxyContin having abuse & addiction potential & the importance of appropriate patient selection. They said they can see the doctors using Butrans & said they would try to remind them. I asked for a follow-up appointment & scheduled next available.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/14/2012	Asked Shelby(pharmacist) about any information about Tricare PA criteria. Shelby said that they do not get any criteria information about PA's and that would have to come from the dr when the PA comes up. Shelby admitted to not knowing much about Butrans other than having a couple of patients on it. Gave her Butrans key selling messages and discussed appropriate patients with initiation and titration guide as well as patient profiles. Shelby asked if patients can cut the patches since its a matrix system? I advised her that per the FPI that the patch should not be cut in any way. Shelby thanked me for the overview and wanted patient information guides after reviewing the application sites and disposal of Butrans.
PPLPMDL0020000001	Bedford	OH	44146	6/14/2012	Quick call- Passed back OxyContin & Butrans formulary grids to Dr Haddad. Positioned OxyContin for appropriate patients who may benefit from a q12h dose of oxycodone & Butrans for working patients 40-60 years old with chronically painful conditions who may benefit from once weekly transdermal pain medication. He just thanked me & walked away.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/14/2012	spoke with Lindsay(ma) about Butrans. Provided all key selling messages and discussed appropriate patient types. confirmed appointment for next week.
PPLPMDL0020000001	Warrensville Heights	OH	44122	6/14/2012	Introduced myself & Purdue's products to Dr Dmitri. I asked how familiar he is with Butrans. He said he is familiar with it somewhat & with buprenorphine in general. He added that his colleagues are reluctant to use Butrans because they associate it with drug addicts. I asked if this is because of the medication that contains buprenorphine that is used for addiction treatment. He said yes. I showed him Butrans dosing & assured him that Butrans is used only for pain. He said he can see a big difference in the dosing for Suboxone & Butrans. Dr Dmitri said he loves the idea of Butrans & he has read great things about it. Showed him demo & page 6 of initiation guide to help show the range of patients that may be appropriate for Butrans. I asked if he sees patients that fall into this range & he said yes. I asked if he is reluctant to prescribe an opioid for opioid-naive patients. He said yes because research shows that long term opioid therapy does not work & only makes patients hyper sensitive to pain. Dr Dmitri asked what types of conditions Butrans could be used in. I showed him inclusion criteria & told him the indication for Butrans doesn't specify what pain must be from. Discussed managed care & savings. He said he sees himself using Butrans when he is reducing patient's opioid medications & added that he likes that it is CIII. Dr Dmitri said he uses OxyContin for appropriate patients & for cancer pain.
PPLPMDL0020000001	University Hts	OH	44118	6/14/2012	I reviewed the once weekly, CIII status of butrans and asked doc how comfortable he is with transdermals. He said he is just stuck in his rutt. I showed him the profile of Emma and asked him to think of starting a patient like Emma on 5mcg of butrans when they come in for a dose adjustment. He asked if its covered on medicaid. I told him its covered by caresource with a PA. He said he tries to avoid doing PAs. I explained the coverage with BWC and commercial plans along with the savings cards.
PPLPMDL0020000001	Parma	OH	44129	6/14/2012	Quick window call- Reminded Dr Chagin to give out Butrans Patient Experience Kits that we discussed last week. He said he hasn't given any out yet but he will. Spoke with MA Debbie & discussed the kits. She said she doesn't think he will be very good about giving them out. I explained how few of the kits are available & asked for her to help remind him about the kits. She said she would do her best, but she was not sure how much help she could be. Discussed OxyContin savings cards & OTC products. She did not need any cards or samples at this time.
PPLPMDL0020000001	Mayfield Heights	OH	44124	6/14/2012	I reviewed the profiles of Emma and William. I asked doc which patient types she sees more. She said she sees both. I explained that both are appropriate for butrans, 5 and 10mcg, respectively. She said she knows and that she thinks those patients tend to be medicare patients. I asked her to keep butrans as an option for patients that may have insurance through their employer. Reminded her that oxycontin is always an option for medicare patients. She said she does prescribe that.
PPLPMDL0020000001	Mayfield Heights	OH	44124	6/14/2012	I showed doc the butrans demo patch and reminded him that the starting dose of 5mcg might be appropriate if patients are taking up to 300mg of tramadol per day. I asked him to prescribe butrans for patients with commercial insurance and give a savings card. He just nodded and said ok.
PPLPMDL0020000001	Parma	OH	44129	6/14/2012	Spoke with technician, Julieanne, introducing myself & Purdue's products. Reviewed Butrans once weekly transdermal dosing & patient range. Also discussed OxyContin's 7 tablet strengths available in hospital unit dosing. She gave me Stan & Kevin's contact information & asked that i contact them for an appointment.
PPLPMDL0020000001	Independence	OH	44131	6/14/2012	Quick call- Handed Dr Jack a pain scale & asked if he usually has his patients rate their pain to help him understand what level of pain they are experiencing. He said he does ask & then added that he knows he should be using Butrans. He then just thanked me & walked into a room.
PPLPMDL0020000001	Cleveland Heights	OH	44118	6/14/2012	Spoke to Eric about the movement of butrans. He said that he has it and has one patient that has been taking the 5mcg. He did not know who the prescriber was. He has not seen any addtl scripts. The patient has been using a savings card. I explained the availability of the savings on relay health. Eric asked if patients can shower with the patch. I confirmed that they can as long as they dont apply external heat to dry it. Provided initiation tool as a reference.
PPLPMDL0020000001	Cleveland Heights	OH	44118	6/14/2012	Spoke to doc and Jazmine about the feedback on butrans. He said He is still having a hard time getting it to go through. And a one or two patients that say they just don't like it. He did say that these patients had been on other meds that have failed before trying butrans. Jazmine said they have tried for medicare, medicaid, and commercial insurance. I explained that commercially insured patients have the best chance at getting it approve. Provided formulary grid. I explained that the savings card offers a \$75 off the first month and up to \$40 off every month after that. They forgot about the trial month and the savings every month. Doc said he is tired of trying and having it denied. He said he might try a couple of more times. I stressed the importance of proper dose initiation depending on their current therapy.
PPLPMDL0020000001	Mayfield Heights	OH	44124	6/14/2012	I discussed the indication for butrans and oxycontin for moderate to severe chronic pain patients. I explained that while medicare patients may have trouble getting butrans, oxycontin is preferred tier 2 on many Med D plans. She thanked me for the reminder.

PPLPMDL0020000001	Cleveland	OH	44103	6/14/2012	showed dr OxyContin conversion guide,asked what dosage strength dr is typically starting patients on,when they are ready for OxyContin? dr said depends on patient,some patients start on 40,60 or 80mg and others he will start on 10mg or 20mg,showed dr percocet examples and discussed conversion to 10mg,15mg,20mg and 30mg OxyContin with Q12H dosing,dr said ok he will keep this in mind. asked dr for his commitment to start a couple patients on OxyContin today and tomorrow,dr agreed to do this,we discussed med part d patients starting on OxyContin
PPLPMDL0020000001	Akron	OH	44307	6/14/2012	Spoke to pharmacist up front and gave information on Butrans and OxyContin. Did quick review of Butrans with initiation and titration guide as well and conversion guide for OxyContin.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	6/14/2012	Dr Azem said that she really likes Butrans and has used it a number of times. I asked her where she is using it. Dr said she is using it for her NSAID, celebrex, and tramadol patients that need additional analgesia. Dr said she has not had any formulary issues and patients are doing much better with their pain. Reviewed patient profiles and asked dr to use more often when patients require an around the clock opioid analgesic. Discussed patch technology, steady state, titration and gave pain score information from opioid experienced trial. Gave formulary updates to drs and Carolyn(pa's and call backs).
PPLPMDL0020000001	Mayfield Heights	OH	44124	6/14/2012	Quick call.... asked HCP which strenght of butrans she tends to initiate patients on. She said the 5 or the 10mcg. I asked if she has to titrate to the 20mcg. She said that most patients are fine when they get the 10mcg. I just reminded her that 20mcg is an option as a titration necessary if necessary. Reminded her of the preferred 2 tier coverage with express scripts.
PPLPMDL0020000001	Cleveland Hts	OH	44118	6/14/2012	Quick call.... asked doc at what dose he is titrating butrans. he said mostly the 10mcg. I asked if he has had to titrate any patients to the 20mcg. Maybe just a few. He said he is still having problems getting it approved. I showed the formulary grid and the covered plans. He glanced at it and walked away.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	6/14/2012	Dr told me that she needs to know all the information about Butrans since she was on maternity leave when the last rep came in to discuss Butrans. Explained all key selling messages for Butrans, outlined Jessica and Emma case studies. I asked dr what she is currently doing for patients that are failing on NSAIDS or tramadol. Dr said she does not like treating pain so she will titrate a little then refer out. Dr said she does understand the benefit of patients using Butrans for long term management of pain. Discussed steady state, dosing, titration, study pain scale reductions, and formulary information. Dr said she will prescribe Butrans and said she feel comfortable enough to prescribe.
PPLPMDL0020000001	C. Falls	OH	44223	6/14/2012	Reviewed Butrans clinical information. Discussed steady state, titration, patient selection, and pain score reductions from FPI. Was told that Butrans sounds like an excellent option for patient uncontrolled on IR opioids. Left initiation and titration guide for Butrans and OxyContin.
PPLPMDL0020000001	Maple Heights	OH	44137	6/14/2012	Spoke with Steve & reviewed Butrans savings & trial card programs. Also discussed e-voucher's automatic monthly savings for those eligible. He said they see a lot of Medicaid & cash-pay at this location. Discussed OxyContin 7 tablet strengths & q12h dosing.
PPLPMDL0020000001	Brooklyn	OH	44144	6/15/2012	Dr Miguel said the new pain management specialist at Parma is not treating Dr Salwesi's old patients. He added that he has had two of his patients come back to him saying that the new doctor told them both to go to detox at St Vincent. He said these are not patients who divert & they truly need pain management. He said he feels over his head in treating patients long-term on opioid medications & that should be the role of pain management. I suggested he check to see if there are any other pain management specialists in the area that he could refer to. Discussed importance of appropriate patient selection for opioid medications, including Butrans & OxyContin. Discussed appropriate range of patients for Butrans & OxyContin q12h as an option for appropriate patients beyond the Butrans range. Also gave him web resources catalog for him to get more education on pain management to help him become more comfortable with the topic.
PPLPMDL0020000001	Independence	OH	44131	6/15/2012	Spoke with pharmacist, Dave, & asked if BWC patients can use savings cards. He said he does not know & said since most of them have a \$0 co-pay, it wouldn't even matter. He said they do stock Butrans but have seen limited movement. I asked when he sees OxyContin prescriptions if he is seeing them dosed q12h. He said usually yes, however he used to work at a location right across the street from a pain clinic where they insisted on writing it TID, so he would not fill those prescriptions. He said the rep for OxyContin used to literally yell at him for not filling them, but he told the rep that the OxyContin FPI states that it should only be dosed q12h. I told him he is correct & apologized for the other rep being so unprofessional. I asked that he continue to encourage physicians to prescribe OxyContin adhering to the q12h dosing interval. Discussed difference between q12h dosing & BID dosing. He said he would tell the patients about sticking to the every 12 hour regimen.
PPLPMDL0020000001	Brooklyn	OH	44144	6/15/2012	Quick call- Showed Dr Detwiler OxyContin's broad formulary access with formulary grids & asked him to give savings cards to appropriate patients with their prescriptions. He just thanked me & walked into a room. Spoke with Trish & Tiffanie & reviewed Butrans formulary grid & showed them trial/savings offer.
PPLPMDL0020000001	Parma	OH	44129	6/15/2012	Quick call- Caught Dr Rakhit up front & passed back Butrans initiation guide opened to pg 6. Discussed appropriate range of patients for Butrans & asked that he try it for the next appropriate patient for whom he is making a medication adjustment for their current opioid treatment. He said he would have a look & walked away. Spoke with Iryna & reviewed managed care & savings information.
PPLPMDL0020000001	Lyndhurst	OH	44124	6/15/2012	Spoke call as doc was without NPs today. I asked her if she has had an opportunity to prescribe butrans again or refill since her last report of skin irritation. She said she had another patient come in for a follow up who did not complain about the patch so she assumed it does not bother everybody. I asked her to continue to prescribe butrans for appropriate patients.
PPLPMDL0020000001	Akron	OH	44319	6/15/2012	Spoke with Sue about Butrans. Pharmacy did not know about Butrans. Explained all key selling messages and reviewed initiation and titration guide. Discussed appropriate patients and managed care information. Pharmacy does not stock but fills fair amount of short acting opioids.
PPLPMDL0020000001	Twinsburg	OH	44087	6/15/2012	Spoke with pharmacist, Lou, who said he actually does have a few customers on Butrans now. He said he does not remember who wrote them, but he said he thinks some of them might be from Dr Moufawad. I showed him trial/savings cards & he asked if he could keep some. Explained usage & eligibility. Also let him know that the monthly savings will come off automatically for eligible customers through the e-voucher system. Also discussed OxyContin savings cards. He said he has been dispensing a lot of it & asked for the cards. I asked if he usually sees it dosed q12h or another dosing interval. He said almost always q12h. He said he can't remember the last time he saw it dosed otherwise. Reviewed difference between q12h & BID dosing. Discussed importance of appropriate patient selection. Lou said he is always cautious about who he dispenses any narcotics to.
PPLPMDL0020000001	Independence	OH	44131	6/15/2012	Spoke with Stephanie & gave her information on Butrans & OxyContin savings programs. Discussed eligibility requirements for usage. I asked her if she knows if BWC patients can utilize savings cards. She said she wouldn't think they need them since they get free prescriptions anyway. Discussed automatic monthly savings through Relay Health's e-voucher system for CVS customers. She said this is a convenient program.
PPLPMDL0020000001	Cleveland	OH	44109	6/15/2012	showed dr emma,patient profile,dr said he see's patients like this and has started them on Butrans. asked dr if there was any reason why he wouldn't? dr said no insurance would be only barrier. we discussed PA criteria for caresource patients and initial trial offer for commercial insurance patients,asked dr if he will continue starting patients on Butrans this week? dr said yes he will.
PPLPMDL0020000001	Independence	OH	44131	6/15/2012	Quick call- Passed back Butrans patient profile booklet opened to "Emma" & asked Dr Reddy if he could think of anyone he has seen this week that reminds him of this patient. He said he didn't have time to look at it now as he was seeing patients. He said he would look at it later. I let him know there are other examples in the booklet as possible Butrans patient types as well.
PPLPMDL0020000001	Akron	OH	44312	6/15/2012	Asked dr if he feels like Butrans has a place in his practice? Dr said he does but the niche is small. I asked dr if he has patients that have been on an NDAID, Cox2, or tramadol for 3+ months and still experiencing pain? Dr asked how long the patch works? Reviewed CIII, 7 day transdermal patch for moderate to severe pain. Dr said he doesn't treat chronic pain. I asked dr again if he currently has patients on a short acting opioid who have been on it for 3+ months. Dr said a few. Asked dr what he considers chronic pain? Dr said any treatment that requires a long acting narcotic. I asked dr how he feels about a CIII, 7 day transdermal patch? Dr said that the CIII makes it better but he will consider its use.
PPLPMDL0020000001	Akron	OH	44319	6/15/2012	I asked dr what he currently does for his patients on vicoden complain about pain? Dr said he refers them to pain management. Used William case study to discuss how Butrans is the option to be used for that patient.
PPLPMDL0020000001	Cleveland	OH	44109	6/15/2012	Explained all key selling messages and told him about BWC, Caresource, and private insurance patients copy cards and trial offer. Dr said he will consider it and wanted to conversion guide. showed dr emma,patient profile,dr said he see's patients like this but hasnt started anyone on Butrans recently,dr said a lot of patients just dont want to wear a patch for pain and only want their pills. asked dr if there was anything else clinically holding him back from starting a couple patients on Butrans? dr said no he feels comfortable with the medication. asked dr if he can start a couple patients on Butrans in the next week but still give them some short-acting opioid for supplemental analgesia? dr said yes he will consider that but has to see who is coming in today and next week. gave initiation and titration info, showed guide and dr committed to starting a couple patients on Butrans.
PPLPMDL0020000001	Akron	OH	44312	6/15/2012	Asked dr if he had the opportunity to consider Butrans for any of his patients? Dr said he has not but he remembers speaking with me about it on my last visit. I asked dr what he currently does when a patient on Tramadol calls back in pain. Dr said typically he will either titrate the dose or refer to a specialist but he likes Butrans as an option. DR said he will be remembering it the next patient that fits that description.
PPLPMDL0020000001	Akron	OH	44312	6/15/2012	Handed dr the Butrans initiation and titration guide and asked him if he sees Butrans fitting in for his patients on Tramadol who still have pain? Dr said he remembers the lunch I had and spoke about it. Dr said he thinks its a good product and will review the information again. nothing else learned.
PPLPMDL0020000001	akron	OH	44319	6/15/2012	Discussed Butrans with staff. Gave full overview of product including all key selling messages.
PPLPMDL0020000001	Cleveland Heights	OH	44118	6/15/2012	Brief call with doc at Richmond Heights. I reminded him of oxycontin and butrans for moderate to severe pain. He asked me to call before I come so that I dont miss him but he was too busy today.
PPLPMDL0020000001	Cleveland	OH	44106	6/15/2012	showed emma,patient profile and BUP 3015,asked dr if he treats patients like this? dr said yes. asked dr whats next step? dr said refill tramadol. asked dr if he would start patients on Butrans? dr said yes he will but cant remember Butrans as he's so busy. told dr that he remembers to refill tramadol so asked dr if he would keep an initiation guide to help him remember? dr said yes. we discussed 30% pain reduction seen in BUP 3015, asked dr if this was clinically significant? dr said yes. asked dr if he will start more patients on Butrans based on this info? dr said yes. we discussed insurance coverage for Caresource and commercial insurance patients.
PPLPMDL0020000001	Westlake	OH	44145	6/15/2012	I asked Dr if he remembers the right patient for Butrans, he said yes, if they are on tramadol or vicodin and need a change. I let him know that both of these are ideal patients and I showed Emma and William patient profiles. He said he would try Butrans for either one of these patients.
PPLPMDL0020000001	Akron	OH	44307	6/15/2012	Spoke with Kurt about Butrans and OxyContin. Gave full overview of Butrans. Kurt knew about product but had not seen the patch before or filled a prescription. Kurt asked if it is less abusable because its a patch. Read from FPI about abusability of opioids. Reviewed conversions and Kurt said he fills a good amount of IR opioids and he can understand where Butrans fits. Discussed dosing and conversions for OxyContin.
PPLPMDL0020000001	Beachwood	OH	44122	6/15/2012	Dr Tabbaa said everything with OxyContin & Butrans is going well & that Jim has been getting it approved. Spent time with Jim who said next Friday will be his last day in the office & that Dr Tabbaa will be back to the variety of staff helpers he had during Jim's absence. He also said that OxyContin has been "a pain" to get approved. I asked what plans. He said it seems like all of them. He said a lot of Medicare plans, BWC, & Medicaid were the main ones he could think of. He said a patient will be on it for years & then suddenly the managed care company will require prior authorization. He said it seems to be really bad lately. Reviewed formulary coverage. He said Butrans has not been giving him as much trouble. Gave him pamphlets for safeguarding Rx's. Jim said he would leave all my information for whomever takes over his position.
PPLPMDL0020000001	Lakewood	OH	44107	6/18/2012	Quick call while talking to Dr Khuri, I let her know we were discussing that geriatric patients were studied in our clinical trials for OxyContin. I reviewed that for patients who are working and younger than 65, Butrans is an option and I gave her Emma as an appropriate patient type.
PPLPMDL0020000001	Parma	OH	44129	6/18/2012	Quick call- Reminded Dr Moysaenko of my recent lunch & positioned Butrans for appropriate patients who are working. ages 40-60, suffering from pain from a chronic condition such as osteoarthritis, especially if he is considering a medication change for them for their pain medication regimen. He said he will try to find some patients & then walked away.
PPLPMDL0020000001	Fairlawn	OH	44333	6/18/2012	Spoke to Jessica about Butrans. She said she still fills Butrans for Dr Shah and Fouad. Reviewed steady state, titration and appropriate patients. Asked Jessica about BWC and Butrans. Was told that BWC is state and federally funded so they cannot use copy cards. Gave OxyContin info and managed care flashcard.
PPLPMDL0020000001	Lakewood	OH	44107	6/18/2012	Dr and Elizabeth MA told me that a patient had been on Butrans for several months and then all of a sudden got a burn on her skin from the patch. The staff told me that they think the patient went in the sun with the patch exposed. (Reported as AE) Dr said that he is taking Butrans off his list of options because of this. I asked if he has other patients who are having success with Butrans and he said yes he has other patients on it. I asked how often skin reactions have happened and he said this is the first one. I asked if he would still give Butrans a chance with appropriate patients and I showed him Emma and William. He asked about a patient that is taking 80mg of oxycodone per day and I showed him the pull out tool and that this patient may not be appropriate for Butrans. We discussed that patients taking more than 20mg of OxyContin Q12hr may not get adequate analgesia from Butrans.
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PPLPMDL0020000001	Cleveland	OH	44113	6/18/2012	dr said he will write Butrans someday,told dr he's mentioned to me that he cant remember Butrans as it doesnt pop into his head,so i introduced patient experience program,dr said ok he will try it.briefly explained the program to dr
PPLPMDL0020000001	Parma	OH	44134	6/18/2012	Dr Mandat said he has had several new patient starts on Butrans lately. I asked how these patients are doing. He said they are actually all doing very well & he has been pleased with the results as his patients seem well-controlled. Gave Senokot-S samples & he signed for additional OTC samples.
PPLPMDL0020000001	Lakewood	OH	44107	6/18/2012	I showed Dr the Emma profile and pointed out that she is under 65. I let him know there is a high likely hood that patients under 65 can get access to Butrans and most commercial insurance will not have a prior auth. He said OK, and I asked if he will give Butrans another try. He said that he would.
PPLPMDL0020000001	Cleveland	OH	44113	6/18/2012	dr said female patient was wearing Butrans 10mcg,had 2 skin rashes in 2 different application sites so patient had to stop Butrans. asked dr how his other patients are doing on Butrans? dr said patients are doing well,Butrans is a good option but not for everyone.
PPLPMDL0020000001	Lakewood	OH	44107	6/18/2012	I showed Emma patient profile, I asked what he will do when this patient calls him to say she is still in pain. He said that he thinks this would be a great patient for Butrans. I let him know that she is and pointed out that she is also under 65 years old. We reviewed Butrans formulary coverage for commercial and caresource. We discussed that OxyContin is covered on Med D plans AARP and CCRX
PPLPMDL0020000001	Parma	OH	44129	6/18/2012	Quick call- Passed back Butrans Express Scripts update & reminded Dr Laluk that during our last discussion, we talked about appropriate working patients ages 50-60 who have pain from osteoarthritis may be good candidates for Butrans, especially if he is considering a medication adjustment for them. OxyContin broad formulary access message. He thanked me & walked away. Spoke with Linda & gave her Senokot-S samples, discussing dual mode of action for medication-induced constipation.
PPLPMDL0020000001	Akron	OH	44333	6/18/2012	I asked Dr what are the most important things about Butrans when he prescribes it. Dr said he knows it works, its safe and said that patients have to get it for a good price. I asked what type of patient is he prescribing Butrans for as I showed him the case studies. Dr said he has used it just about everywhere but mostly his vicoden and percocet patients. gave dr quick overview of new formulary wins and explained to Marsha Fox in detail about BWC, ESI, ESI Med D, and Caresource PA criteria. Marsha was excited to have all that info to help her make her job easier.
PPLPMDL0020000001	akron	OH	44333	6/18/2012	Asked dr if he had any new starts with Butrans since we spoke last. Dr said he did prescribe Butrans to one of his in home patients. The patient has cancer and is on many medicines but felt he needed additional pain control over his vicoden. Discussed Butrans application sites and titration at 72hrs is necessary.
PPLPMDL0020000001	Akron	OH	44304	6/18/2012	Spoke to Cindy about Butrans and OxyContin. She has filled a number of Butrans prescriptions and filled one last week for Dr Shah at 5mcg. Reviewed Butrans titration, steady state, and managed care coverage. Cindy said that BWC is run by state only and copy cards won't do any good for a BWC patient because their copy is \$0 anyway. Reviewed OxyContin conversion and titration guide. Pharmacy fills a large amount of OxyContin.
PPLPMDL0020000001	Fairlawn	OH	44333	6/18/2012	Reviewed conversions from IR opioids to OxyContin.
PPLPMDL0020000001	Lakewood	OH	44107	6/18/2012	Able to give quick Butrans intro at window after asking to see him. Gave key selling messages and asked if he would see himself using it. DR say maybe but said he doesn't like treating pain. He agreed to review initiation and titration guide. nothing else learned.
PPLPMDL0020000001	Akron	OH	44313	6/18/2012	I followed up regarding the patient he started on Butrans, he said that he thinks he is still on the 10mcg dose and he doing fine. I let him know he can titrate to the 20mcg dose if need be and showed him the results for patients who were force titrated in our clinical trials. He said that he is still prescribing OxyContin and more so in the hospital and nursing homes. I showed him that geriatric patients were studied in our clinical trials with Spoke with Jason about Butrans and OxyContin. Jason said that he filled a prescription for dr Narouze for Butrans about a week and a half ago. Reviewed Butrans steady state and titration. Asked about BWC patients with Butrans copy cards. Jason said that the BWC patients copy would be \$0 and it is a state program not federal. No need for copy card at \$0 copay.
PPLPMDL0020000001	Cleveland	OH	44113	6/18/2012	told deb that melissa,MA,said PA's for Caresource are getting approved and deb told me that was biggest barrier in past,deb said yes it was,asked deb if patients are doing well on Butrans? deb said yes and she's starting every patient on Butrans,she loves Butrans,reiterated patients on hydrocodone not doing well could start on Butrans and titrated if necessary, deb agreed.
PPLPMDL0020000001	Akron	OH	44333	6/18/2012	Checked in with dr and Alyse about the Butrans patient experience kits. Dr said she did use one for a patient recently but didn't remember who or what the patient was taking. Reviewed information about the kits and asked to use the remaining kits. Quick review for OxyContin and asked dr to use OxyContin Q12h instead of percocet.
PPLPMDL0020000001	Cleveland	OH	44105	6/18/2012	Abdul,Pharmacist,said 1 patient came back to pharmacy after 2 weeks of wearing Butrans and said Butrans didnt work and patient wanted vicodin only,Abdul referred patient back to dr for follow-up,asked Abdul if he's seen any Butrans Rx? Abdul said no,only 1 Rx,asked Abdul if he has given patient info booklets to patients so they can discuss Butrans with their HCP's? Abdul said yes he gave all the booklets out that I left,asked Abdul to give 5 more booklets to patients he feels are appropriate for Butrans? Abdul agreed to do this.confirmed OxyContin stocking,asked Abdul if he's seeing new Rx for OxyContin? Abdul said he's seeing more patients get switched from Opana ER to OxyContin,due to the Opana shortage and more HCP's are prescribing Duragesic,asked Abdul who the biggest writers of long-acting opioids are in the area? Abdul said a lot of HCP's from metro,Dr.Harrington (geriatrics/Internal med) and pain management HCP's (dr tabbaa,dr ryan and dr astley-all of these HCP's are at W.150th and Beachwood not based at Main campus) are prescribing OxyContin,talked to Abdul about converting patients from short-acting opioids earlier to lower dosage strengths of OxyContin,Abdul said most patients are coming in and either starting on 10mg Q12H or 80mg Q12H of OxyContin,so we discussed 7 tablet strengths being a focus of discussion with HCP's.
PPLPMDL0020000001	Mayfield Village	OH	44040	6/18/2012	Spoke to Tom about the movement of butrans. He confirmed that they have it but he has only seen a couple of scripts. He thinks he has one person on it regularly. I asked if he knew who the prescriber was. He did not know. I explained the savings card and asked if he knew if the customer was using the savings card. He said he thinks one patient complained of the cost but he was not sure if they had a savings card. I provided patient info guide as a reference in case customers had questions about application.
PPLPMDL0020000001	Lakewood	OH	44107	6/18/2012	I showed Emma patient profile and asked what he would do when she calls back to say she is still in pain. He said his next step after MRI, and soma would be vicodin. I asked why not Butrans for this patient. He said he does see how Butrans could be an option, but he does not want to get any call backs or have the patient not be able to afford it at the pharmacy. I let him know that as long as this patient has a job, she would be able to get Butrans as low as \$15 per month. He said he will give Butrans a try here. We discussed William patient profile and he said that his next step would be OxyContin. I asked his thoughts on trying Butrans for this patient before going to OxyContin and he said that he thinks that the patient will not want to give up their pills and they like being able to take something every 4 hours. I went back to Emma and pointed out that he could try the patients on Butrans before even giving them vicodin as a option and he said this was a good point. We reviewed that OxyContin could be a Q12hr option for William or for patients taking higher doses of opioids than William.
PPLPMDL0020000001	Beachwood	OH	44122	6/18/2012	Reminded Dr Myton-Craig of our previous conversation when she told me about the patient who she has who she was going to start on Butrans. She said she forgot & she does want to try Butrans on that patient. I asked what it is about Butrans that makes her think it would be a good option for that particular patient. She said he is on short-acting & really needs better pain control. She said he has BWC coverage. Let her know that BWC is currently paying for Butrans without prior authorization. She said she is going to flag the patient's chart so that she doesn't forget again. Showed her savings cards for Butrans & OxyContin, letting her know about favorable Butrans coverage on commercial plans & broad formulary access for OxyContin. She said she hasn't had any new OxyContin starts lately & then walked into a room.
PPLPMDL0020000001	Parma	OH	44129	6/18/2012	Quick call- Dr Ortega saw me at the window & said he has been using Butrans & OxyContin & that everything is "fine", then he walked away. I spoke with Cindy (MA) who said Dr Ortega has been prescribing. She said she has not had any issue with coverage for Butrans & patients have not called with any complaints or concerns regarding it. She said they will be closing the office until July 9th.
PPLPMDL0020000001	Parma	OH	44129	6/18/2012	Spoke with Jackie, pharmacist, who said she still hasn't seen any activity for Butrans. I asked if she has mentioned it to any patients or physicians. She said she hasn't really had a situation that would fit for her to do that. Reviewed patient type, focusing on patients who are taking short-acting opioids around-the-clock, especially if they are not being well-controlled on that medication. I asked her when she sees OxyContin prescriptions if she is seeing them dosed q12h. She said usually, although sometimes they dose it differently. Told her that OxyContin is only intended for q12h dosing & is not recommended in any other dosing interval. I asked that she discuss the importance of adhering to this when dispensing OxyContin to patients. She agreed.
PPLPMDL0020000001	Parma	OH	44129	6/18/2012	I showed Elaine the Butrans patient profiles & asked what most patients are taking when they come to her. She said almost all of them are on tramadol & hydrocodone. She said adding a patch to that seems like a lot. I asked her what about initiating Butrans instead of continuing one of the short-acting medications. She said she would do that & added that she would take the patient off tramadol & leave them on hydrocodone when starting Butrans. She said one problem she might have with Butrans would be getting it paid for. I asked what plans she sees most of. She said Caresource & BWC. Let her know BWC is paying for Butrans & reviewed Caresource prior authorization requirements. I asked if that seemed reasonable to her. She said yes. I asked what she likes about Butrans. She said she thinks it is ideal to have a patient on a long-acting medication plus a short-acting for breakthrough. She said she likes that patients only have to worry about Butrans once a week when they apply it & she thinks it is convenient. Showed her patient information booklets. She asked if she could keep one for patient counsel. Also gave her a Butrans slide-out initiation tool. She spent time looking at it & said it would be very helpful. Showed her how to use it to choose a starting dose. She mentioned she read a study that suggested that once a patient is on OxyContin daily, if they stay on it for one year, the person's life expectancy is only 10 more years. I told her I had not heard of that study.
PPLPMDL0020000001	Cleveland	OH	44130	6/19/2012	Dr Fedorko said he just does not treat a lot of patients for chronic pain. I tried to show him "Jessica" patient profile. I showed him that she reports a 7 on the 11 point pain scale. He said he "fires" patients like that right away because he doesn't want to deal with them. I asked if he refers to pain management. He said he would give them Vicodin for a few days for them to get into someplace else. I told him that is the patient type he could use Butrans in. He said the insurance companies won't let him do that. He said they would want the patient to fail other cheaper things first. I told him commercially insured patients do have access to Butrans, mostly without any type of prior authorization. Positioned Butrans for appropriate patients who he is referring out to pain management as a means to control their pain while they are waiting to get in to see the specialist.
PPLPMDL0020000001	Mayfield Village	OH	44143	6/19/2012	Quick call...I showed HCP the patient profile of Emma and reminded her that this patient type would likely start on the 5mcg. I reminded her to give appropriate patients a savings card and a patient info booklet.
PPLPMDL0020000001	Brooklyn	OH	44144	6/19/2012	Dr Keith said he thinks he has read about Butrans somewhere. I asked what he typically does if he has an established patient who presents with pain from a chronic condition such as osteoarthritis. He said he would usually put them on some sort of scheduled medication as he generally trusts his patients & would be comfortable having them on those types of medication. Discussed Butrans as a CIII opioid with abuse/addiction potential.
PPLPMDL0020000001	Brooklyn	OH	44144	6/19/2012	Reviewed once weekly dosing in a transdermal system. Showed him initiation guide pg 6 with range of patients, discussing OxyContin as an option for appropriate patients beyond the Butrans range. Discussed supplemental analgesia, dosing & titration. I asked if patients are typically receptive to the idea of long acting medications & transdermal products. He said they usually like those options, it is just a matter of insurance coverage. He said he thinks Butrans is something that he would use & said he might actually have patients on it already but he couldn't remember. He said again he thinks Butrans is something he will be able to use.
PPLPMDL0020000001	Brooklyn	OH	44144	6/19/2012	Re-introduced Butrans to Dr Silverman. I asked what he typically does if a patient who he has had for awhile presents with pain from a chronic condition such as osteoarthritis. He said usually acetaminophen or NSAID's & if that doesn't work, he would try a narcotic. I asked what one he typically starts with. He said Vicodin. I asked what the typical starting dose would be. He said 5mg once per day or maybe more. Showed him how this could be a Butrans patient at the 5mcg dose. Discussed delivery of medication over 7 days. He repeated the once weekly dosing back to me a few times. He asked how Butrans compares with fentanyl. I told him we have no comparative data & showed appropriate range of patients, mentioning OxyContin for appropriate patients beyond the Butrans range. Discussed Butrans as the only long acting CIII opioid analgesic & warned of abuse/addiction potential. He asked what the cost is. Discussed commercial insurance coverage & trial/savings cards. He said he would keep it in mind & then left the room.
PPLPMDL0020000001	Parma	OH	44129	6/19/2012	Introduced Butrans to Dr Lin & gave indication. She said she treats patients with moderate to severe chronic pain every day. I asked if she is ever the person who starts a patient on their first opioid medication. She said yes & added that every new cancer patient who she sees she ends up starting on an opioid. Showed her how this patient could start on 5mcg Butrans. Discussed dosing, titration, steady state in 3 days, & maximum dose. Gave her initiation guide & showed slide-out tool. She said she would not start an opioid naive patient on a patch & that it is better to start them on oral medications to establish what level of pain control they need. Discussed appropriate range of patients & OxyContin as an option for appropriate patients beyond Butrans range. She said she uses OxyContin a lot & likes the medication for her patients. She asked about Butrans insurance coverage. Discussed commercial insurance, Express Scripts, & Caresource prior authorization requirements. Also went over trial/savings cards for Butrans & OxyContin savings cards. Dr Lin said most of her patients with cancer pain have Medicaid. I asked if she is comfortable with Butrans clinically to start appropriate patients & she said yes.

PPLPMDL0020000001	Cleveland	OH	44113	6/19/2012	Customer attended the Purdue Pharma Pain Care non-accredited webinar "Insomnia: Overview". Attendees received a copy of the slides (handout, as PDF file), along with the feedback form and approved flyers for upcoming webinars (uploaded to Microsoft Live Meeting link during webinar). NOTE: 8 attendees from this location participated in the webinar
PPLPMDL0020000001	North Olmsted	OH	44070	6/19/2012	Spoke with Paula, we reviewed the Butrans formulary coverage and the trial cards. I let her know about the ESI win and she said the cards definitely help with the copays and most of the time they come off automatically at the register. We reviewed that OxyContin also has the savings cards.
PPLPMDL0020000001	Olmsted Falls	OH	44138	6/19/2012	Spoke with Kay, we reviewed the Butrans commercial coverage and ESI Win. We discussed the Butrans trial cards and the Butrans and OxyContin savings cards that patients can use each month. We reviewed that OxyContin is also covered on some Med D plans and has been studied in geriatric patients.
PPLPMDL0020000001	Akron	OH	44310	6/19/2012	I asked dr if he sees Butrans as an option for his patients who have been on opioid for 3+ months and still getting pain? Dr said he does see Butrans as a good option and knows that his patients on tramadol. Reviewed tramadol and vicoden patient and gave updated formulary information.
PPLPMDL0020000001	Cleveland	OH	44109	6/19/2012	showed dr emma,patient profile,dr said he has patients like this but usually doesnt convert to long-acting opioids when tramadol isnt controlling patients pain,dr said he would either refill tramadol for a little bit longer or convert to another short-acting opioid,with patients also doing physical therapy,exercise,etc..asked dr if he would consider a 30% reduction in pain meaningful? dr said yes.showed BUP 3015,we discussed inclusion criteria,pain reduction and showed FPI with baseline pain scores,asked dr if he would consider Butrans for patients like emma based on this info and our discussion? dr said yes he will.dr asked about medicaid coverage? we discussed PA criteria for Caresource patients and discussed commercial insurance patients starting on Butrans using initial trial offer cards.dr committed to start 1 or 2 patients on Butrans in next week
PPLPMDL0020000001	Berea	OH	44017	6/19/2012	Quick call, I asked Dr if he would start a tramadol patient like Emma on the patient experience program. He said that he will.
PPLPMDL0020000001	Berea	OH	44017	6/19/2012	I showed William patient type and asked Dr to try Butrans when the patient has commercial insurance, BWC, or Caresource. I showed the trial card and asked if he would start a new patient and he agreed.
PPLPMDL0020000001	Cleveland	OH	44114	6/19/2012	showed john patient profiles,emma and william,john is seeing both types of patients here and they are considering Butrans for them.asked John if he would have any hesitation to start patients like this on Butrans? john said no,he likes Butrans,it works and patients are doing well,john said he and dr marshall will continue starting patients on Butrans.asked John if he will start more patients on Butrans this week? john said yes he will,focused John on BWC patients and we discussed PA criteria for Caresource patients.<font color=blue><b>CHUDAKOB added notes on 06/29/2012</b></font>Amy, nice job on the use of the patient profiles to identify a patient. Now the next step is to incorporate the clinical data as the reason to prescribe.
PPLPMDL0020000001	Cleveland	OH	44114	6/19/2012	talked to dr about patients he's starting on Butrans,dr said patients are doing well and he's looking at patients taking vicodin or percocet daily that arent controlled with these short-acting opioids and starting them on Butrans. we discussed Butrans 5mgc and 10mgc as initiating dosage strengths and titration,dr said usually patients are on same Butrans dose for a couple of months before he titrates.we discussed BWC being dr focus for new patient starts and asked dr for commitment to start more patients on Butrans,dr agreed to do this.
PPLPMDL0020000001	Akron	OH	44310	6/19/2012	good appointment with Dr Cremer and Char. Discussed patients he currently has on Butrans. Dr said that a vast majority of his patient are on BWC and does have some with private insurance however all are doing well. He said that a couple complain it doesn't work as well as their pills but don't want him to take them off. He said he has seen a marked improvement in pain in most patients. Reviewed tramadol and vicoden patient profiles and dr said he does see it being appropriate for many different patient types. Reviewed new formulary coverage improvements. Dr said he still doesn't see the need for OxyContin.
PPLPMDL0020000001	Cleveland Heights	OH	44118	6/19/2012	Spoke to Lisa about the stocking and movement of butrans and oxycontin. She does not have butrans as no scripts seen. I explained the positioning and the key selling messages and savings card. She said she could think of a few patients that she might suggest butrans to. She said they have mostly regular customers on oxycontin that tend to be older. They see way more percocet than oxycontin. She wanted butrans savings cards to provide to potential customers. Provided same along with initiation guide.
PPLPMDL0020000001	Cleveland	OH	44109	6/19/2012	showed dr emma and william,patient profiles,asked dr who he sees's most often? dr said he has both types of patients and has been considering Butrans for these patients.asked dr if there was any reason why he wouldn't start patients on Butrans? dr said if patients are resistant to a patch or insurance doesnt cover Butrans.showed dr patient info booklet,asked dr to show patients application/rotation info and discussed supplemental analgesia with dr when starting patients on Butrans.asked dr for his continued commitment to start a couple more patients on Butrans,dr agreed to do this.<font color=blue><b>CHUDAKOB added notes on 06/29/2012</b></font>The clinical data might be just what he needs to help see this to his patients. How would they react if he can sell them on the reduction in pain they might feel with Butrans. He has to be sold on this first. The clinical data is the I conducted the oxycontin conversion with doc. Only had time to go over the profile of Catlin and doc guessed the right dose of 15mg. He did admit that he forgets about the 15mg of oxycontin and that he has not been prescribing it much lately but he remembers how to prescribe it. I reminded him of the preferred tier 2 coverage with most Med D plans. I reminded him of the commercial coverage and savings cards for oxycontin and talked to dr about patients he has on Butrans,patients are doing well no problems and he's happy,dr said he's starting patients on Butrans weekly and all he needs is patient info booklets.showed dr emma,patient profile,asked dr if he's starting patients like emma on Butrans? dr said yes he has a lot of patients taking tramadol and Butrans seems to be a great next step option for them.asked dr for his commitment to start more patients like emma on Butrans,dr agreed.
PPLPMDL0020000001	Parma	OH	44134	6/19/2012	Dr Hernandez said he just gave Butrans to a patient. I asked what the patient was taking before. He said OxyContin & that he started the patient on Butrans 20mcg. He said he has had success in treating patients who were taking Opana or OxyContin up to 30mg to Butrans 20mcg. I asked why change the patient off OxyContin. Dr said he does not like having patients on OxyContin for a long time after they have undergone their surgery because he doesn't want them on it long term. He said if they need pain control still after having surgery a few times, then he will use Butrans for them. He said Butrans works & that is why he likes it. I asked if he always has patients rate their pain. He said yes. He said patients are typically at a 5 or higher when he is using Butrans. I discussed Butrans in clinical trials of opioid-naïve & opioid-experienced patients taking patients' pain from around a 7 to around a 3 & asked if that is consistent with what he sees in his practice. He said he thinks he gets even better results. He said sometimes patients can get below a 3.
PPLPMDL0020000001	Cleveland	OH	44143	6/19/2012	Quick call...I reminded doc of the patient type for butrans the Emma profile - someone failing on tramadol ATC. I asked him to prescribe for commercially insured patients. Doc said he is trying.
PPLPMDL0020000001	Mayfield Hts	OH	44094	6/19/2012	I doc the butrans and explained that it is the size of the starting dose of butrans, 5mcg. I reminded him that that butrans is a CII narcotic similar to vicodin which means it can be called in and refilled. He said he has tried it a couple of times and still waiting to hear feedback. Monica said that she had one patient pay cash for and seems to like it. I reminded her to focus on commercially insured patients.
PPLPMDL0020000001	Parma	OH	44134	6/20/2012	Spoke with Dave, pharmacist, & verified Butrans stocking of all 3 strengths per Dr Hernandez's office request. Dave said he has frequent contact with Dr Hernandez & that he comes in & calls all the time. Presented Butrans & OxyContin savings programs & eligibility requirements. Offered cards, but Dave said they still have some & also added that he is careful with who he gives them to. Discussed importance of appropriate patient selection & told him he should be cautious in dispensing all opioid medications.
PPLPMDL0020000001	Parma	OH	44129	6/20/2012	Quick call- Dr Gigliotti said he had to get out of the office on time today so he couldn't stay long to talk. He added that he has not had Butrans feedback yet but should soon. He said he will keep writing Butrans & OxyContin for me. I told him he should write it to help his appropriate patients, not for my benefit.
PPLPMDL0020000001	Cleveland	OH	44106	6/20/2012	talked to dr about appropriate patients for OxyContin,dr said he writes a lot of OxyContin and doesnt need education on it,dr said he likes any certified med educ courses we have available so I gave dr a catalog,told dr im happy he's confident prescribing OxyContin and knows who's appropriate,showed conversion guide and discussed earlier conversion from short-acting opioids to OxyContin using lower dosage strengths,dr said ok he will keep in mind.showed Butrans initiation guide and emma,patient profile,dr said he has a lot of patients taking tramadol and he's started some patients on Butrans,dr said he likes that Butrans is once a week and transdermal and will start more patients.dr asked about medicaid coverage,we discussed PA criteria for Caresource patients and I asked dr if he will start a couple new patients on Butrans this week? dr said he'll do his best as he starts vacation 6/25th and is gone 1 month
PPLPMDL0020000001	Parma	OH	44129	6/20/2012	Dr Khoobballi said he was just looking for my card to call me. I asked him what I could do for him. He showed me a post-it note he had written that said "Butrans". He told me about a patient who he has who presented earlier complaining of abdominal pain. He said the patient was ultimately diagnosed with an abdominal mass & was undergoing surgery for it. He said he wants to give the patient Butrans if he continues to have pain. Discussed appropriate range of patients. I asked what the patient has been given so far for pain. He said the hospital has given him fentanyl & asked if he can still give the patient Butrans. Explained range of patients & told him we have no conversion for fentanyl & have no comparative data. I told him the patient may be out of the Butrans range depending on what dose of fentanyl the patient is on. Discussed OxyContin as an option for appropriate patients who are beyond Butrans range. He said he would really like to at least try the Butrans. He said he remembers that we have some sort of trial or savings card. I gave him another package of cards & explained the program. Also gave him patient information booklets. I let him know I would follow-up to see how the patient was doing.
PPLPMDL0020000001	Munroe Falls	OH	44262	6/20/2012	Followed up on lunch appointment for Butrans. Reviewed Butrans dosing, titration, appropriate patients and conversions from IR opioids. Dr said she remembers much of the information but liked the review. Dr agreed to try on her next patient on 3+ months of tramadol.
PPLPMDL0020000001	Cleveland	OH	44130	6/20/2012	Quick call- Followed-up again with Dr Kansal to inquire about usage of Butrans Patient Experience Kits. He said he hasn't given any out. He said he won't forget. Reviewed appropriate patient type/range, asking him to focus on appropriate patients ages 40-60 with commercial insurance who meet the Butrans indication. I asked what he or his patients have to lose. He said nothing. I asked Dorothy to help encourage Dr Kansal to utilize the kits, reminding her how limited the kits are in quantity.
PPLPMDL0020000001	Cleveland	OH	44113	6/20/2012	dr said he's not started anyone recently on Butrans but is still considering patients.asked dr if he's seeing patients like emma and/or william? dr said yes.asked dr if he would consider Butrans for these patients? dr said yes he is looking at patients taking vicodin/daily for chronic pain that arent controlled where he can start them on Butrans.we discussed initiation and asked dr if he will commit to starting 1-2 patients in next week on Butrans? dr said yes he will,focused dr on BWC and commercial insurance patients starting on Butrans.
PPLPMDL0020000001	Parma	OH	44134	6/20/2012	Spoke with Mercedes, pharmacist, & verified Butrans stocking. She said she has some customers on it. Reviewed details of the trial/savings program & discussed automatic savings with e-voucher. Let her know that all eligible customers would need the actual card for the trial. Offered cards but she said she didn't want them. Discussed OxyContin savings program. I asked what strengths OxyContin she stocks. She said she thinks she has all of them.
PPLPMDL0020000001	Westlake	OH	44145	6/20/2012	I showed Dr the Emma patient profile and the results she can expect based on our clinical trial, I asked if he thought the pain reductions were significant and he said he did. I asked if it was significant enough to finally give Butrans a try and he said yes he will give it a try.
PPLPMDL0020000001	Cleveland	OH	44113	6/20/2012	dr said he's not started anyone on Butrans but knows he should be prescribing it for his patients taking percocet that he doesnt want to manage anymore.dr said he will consider Butrans for some of these patients before sending them to pain management.dr said he's fine refilling tramadol and vicodin but doesnt want to keep managing patients who are getting percocet.we discussed patients like william,showed patient profile,dr said he didnt think 6 on pain scale was bad enough to start a long-acting opioid,he would refill vicodin.I asked dr if he will consider starting a couple patients this week,that are taking percocet like we discussed,on Butrans,while the patients are waiting to get into pain management? dr agreed to do this.we discussed PA criteria for caresource patients
PPLPMDL0020000001	Parma	OH	44129	6/20/2012	Introduced myself & Purdue's products to Dr Henig & told him I had received notification that he had requested a sales rep visit. He said he had called Purdue & asked for a visit. He asked what products I have. Presented Butrans & delivered overview with core messages. I asked if he treats any type of pain chronically. He said he really doesn't. He said occasionally he will prescribe Tylenol with Codeine for a patient but only for a month or less. I asked if he refers to pain management. He said sometimes. He said he has written OxyContin in the past but just does not have the need in his practice for opioid analgesics. I told him that makes sense with the type of medicine he practices (OB/GYN). Discussed OTC products & gave Senokat-S samples, explaining dual mode of action. Recommended Senokat-S for medication-induced constipation. He signed for Colace & Slow-Mag samples. talked to justin,pharmacist and maria,pharmacy tech,asked them if they see a lot of patients coming here for short-acting opioids? both said yes but they still have a lot of patients getting their OxyContin Rx's filled here.asked justin how he feels about refilling so much short-acting opioid Rx's? justin said it would be nice to decrease that amount.we discussed justin handing out patient info booklets to patients and recommending that patients discuss Butrans with their HCP's,he agreed to do this.we discussed OxyContin writers and confirmed stocking discussed insurance coverage for both products
PPLPMDL0020000001	Cleveland	OH	44113	6/20/2012	I asked dr to prescribe Butrans for his Medical Mutual patients with private prescription insurance who are on tramadol or vicoden for 3+ months who come in or call in saying they are still having pain. I showed dr pain score reductions on opioid experienced patients. Spoke to TJ about copy cards and explained in detail the cards, trial offer and formulary coverage.
PPLPMDL0020000001	Copley	OH	44321	6/20/2012	



PPLPMDL0020000001	Bedford	OH	44146	6/20/2012	Spoke with Dr Moufawad's MA's who said he is out of the office until 6/25. Reviewed managed care information & savings cards with them for Butrans & OxyContin. Checked stock of cards & patient information & they did not need any today.
	Cleveland	OH	44113	6/20/2012	showed dale the emma and william patient profiles,discussed each point with dale,dale said they see patients like this every day but more patients taking vicodin or percocet when they get to pain management.asked dale whats next step for patients? dale said he and dr shen are starting more and more patients on Butrans so thats next step for many but if patients insurance wont cover Butrans then patients get refill of short-acting opioids. we discussed BUP 3015 clinical trial,asked dale if he's seeing pain conditions that were included in the study? dale said yes.asked if the 30% pain reduction was clinically significant to him? dale said yes.asked dale for commitment to start more patients like emma and/or william on Butrans this week,dale agreed to do this
PPLPMDL0020000001	Cuyahoga Falls Cleveland	OH	44223	6/20/2012	Dr said his OxyContin patients get good pain relief and said he wishes medicaid would pay for it....nothing else learned
		OH	44106	6/20/2012	showed dr patient profile,william,discussed each point and showed clinical background- dr said he is starting patients on Butrans,likes the drug and thinks it works for patients so no complaints.asked dr how often he's seeing patients like william? dr said the 2 days he's working in the clinic he see's patients like this.asked whats typically the next step? dr said depends on patient,he might refill vicodin if patient is resistant to a patch or insurance doesnt cover Butrans or he would start patient on Butrans if patients willing to try wearing a patch,we discussed use of supplemental analgesia with Butrans-showed fpi,asked dr for his commitment to start more patients on Butrans today-next week,dr agreed
PPLPMDL0020000001	Cleveland	OH	44113	6/20/2012	showed dr emma and william,patient profiles,we discussed each point,dr said she see's patients like this and is considering Butrans for them.asked dr how often she see's patients like this? dr said every day and she is considering Butrans for them.asked dr if she's getting the clinical pain reductions she wanted/expected with Butrans? dr said yes she's happy with Butrans.showed BUP 3015,we discussed inclusion criteria and pain reduction and focused on emma and william patients,asked dr for her commitment to start more patients like this,this week,dr agreed to do this.
PPLPMDL0020000001	Akron	OH	44333	6/20/2012	Spoke to Pharmacist Donna to discuss Butrans and OxyContin. Donna did not know about Butrans. Explained all key selling messages and Donna said it sounds like a great option and she has many patients that have been refilling the short acting opioids for a long time. Pharmacy did not have it in stock. Explained OxyContin dosing and titrations as well as conversions.
PPLPMDL0020000001	Westlake	OH	44145	6/20/2012	I showed Dr William patient profile and we discussed the potential options for this patients if they need a medication adjustment and that this patient may be appropriate for Butrans or OxyContin. He said that he will try Butrans in this case, but so many patients will give him push back because they will say that the patch does not work. I told him he won't know unless he tries this on several patients to see what the feedback is and he
PPLPMDL0020000001	Lyndhurst	OH	44121	6/20/2012	Spoke to Justin about what he as a pharmacist would like to hear from drug reps - what we are telling docs or patient info. He said patient information. I discussed the patient info guides and the importance of proper application. He said he sometimes gets questions about how to keep patches on and getting in water. I explained that patients can shower, exercise, etc. He asked about the tolerability of butrans vs. vicodin as his mother
PPLPMDL0020000001	Lyndhurst	OH	44124	6/20/2012	has chronic pain and she does not want to take tramadol or vicodin. I suggested he has her talk to her doctor about butrans. Justin confirmed that she has commercial coverage. Doc expressed frustration about the amount of abuse with opioids. They recently had a DEA speaker come in to talk about the prevalence of drug abuse of prescription medication. He said that he really needs to cut back from prescribing scheduled narcotics. I asked him if he felt that way about Cils and Cills. I tried to talk about the once weekly status of Butrans and that it is a CII like vicodin. He did say that he could probably work with something like butrans. He said he has not prescribed any oxycontin in the past several years.
PPLPMDL0020000001	Broadview Heights	OH	44147	6/20/2012	Dr Samuel asked if I still represent OxyContin. I told him I do. He said he has been writing more of it since the reformulation because he feels like it is safer. I told him we have no data to suggest that the new formulation is any less abusable than the original formulation & told him to be just as cautious as always with it. He said he appreciates me telling him that, but he has done his own research. I asked what his experience has been with Butrans. He said he thinks he has a couple of people who are maintained on Butrans. He said the majority of his patients are Medicare. Discussed prior authorization requirements. He asked about Medicaid coverage.
		OH	44147	6/20/2012	Discussed Caresource prior authorization requirements. He said that may be good for patients who he is stepping down from their opioid medication. I asked if the ultimate goal for patients is typically to get them off all opioids. He said ideally, yes. He said that is unrealistic for some people though. He said those are the ones he maintains. Discussed Butrans range of patients & those beyond that range being possible OxyContin candidates. I asked if he would continue to identify Butrans & OxyContin patients & he said he would & also asked his nurse, Margaret, to help remind him of Butrans when she identifies a potential patient.
PPLPMDL0020000001	Broadview Heights	OH	44147	6/20/2012	Dr Samuel asked if I still represent OxyContin. I told him I do. He said he has been writing more of it since the reformulation because he feels like it is safer. I told him we have no data to suggest that the new formulation is any less abusable than the original formulation & told him to be just as cautious as always with it. He said he appreciates me telling him that, but he has done his own research. I asked what his experience has been with Butrans. He said he thinks he has a couple of people who are maintained on Butrans. He said the majority of his patients are Medicare. Discussed prior authorization requirements. He asked about Medicaid coverage.
		OH	44130	6/20/2012	Discussed Caresource prior authorization requirements. He said that may be good for patients who he is stepping down from their opioid medication. I asked if the ultimate goal for patients is typically to get them off all opioids. He said ideally, yes. He said that is unrealistic for some people though. He said those are the ones he maintains. Discussed Butrans range of patients & those beyond that range being possible OxyContin candidates. I asked if he would continue to identify Butrans & OxyContin patients & he said he would & also asked his nurse, Margaret, to help remind him of Butrans when she identifies a potential patient.
PPLPMDL0020000001	Cleveland	OH	44130	6/20/2012	Spoke with Dawn, pharmacist, & reviewed Butrans & the savings/trial program & eligibility requirements. She said they have not received any Butrans prescriptions. I asked her how she is seeing OxyContin being dosed. She said usually q12h or q8h. I showed her that OxyContin is only recommended & has only been studied with a q12h dosing interval. I asked her to advise physicians when she sees other dosing intervals. She said that was a good
PPLPMDL0020000001	Highland Heights	OH	44143	6/21/2012	reminder but that physicians often insist on doing things the way they want to. Quick call....Reminded doc of the now preferred tier 2 coverage of butrans on express scripts. Provided the formulary grid. Also reminded him that oxycontin might be a great option for those med D patients with mod to severe chronic pain (due to the preferred coverage on many Med D plans). Provided more savings cards for commercially insured patients.<font color=blue><b>CHUDAKOB's query on 06/29/2012</b></font>Here is one of those reminder calls. Do you think the Dr. know what prescription insurance his patients have? If not, then telling him about Express Scripts may not have much impact. Providing him with clinical reasons to prescribe will, even if it's only one.<font color=green><b>SIMERTOC's response on 07/25/2012</b></font>I keep forgetting. I feel like its important for him to know that coverage is improving.<font color=blue><b>CHUDAKOB added notes on 07/25/2012</b></font>He probably does not care as much as you think! He surely cares about good reasons to prescribe a product for his patient.
PPLPMDL0020000001	Cleveland	OH	44143	6/21/2012	I reviewed the range of appropriate patients for oxycontin - moderate to severe and that there are 7 doses for flexibility. I showed him the formulary grid for commercial plans and the MED D plans of CCRX, Silverscript and AARP. I explained that those silverscript patients can get oxycontin for as little as a couple of dollars.
PPLPMDL0020000001	Parma	OH	44134	6/21/2012	Quick call- Positioned Butrans for appropriate patients who are not well-controlled on less than 40mg hydrocodone per day if they meet the full indication. She said she has been keeping it in mind when she sees some of the patients & has thought of it as an option.
PPLPMDL0020000001	Cleveland	OH	44103	6/21/2012	talked to Abdul,pharmacist,about Butrans stocking,no Rx yet,we discussed Butrans being transdermal and once weekly dosing option,showed initiation guide and we discussed appropriate patients for Butrans.I asked Abdul if he would continue giving patient info booklets to patients that are appropriate for Butrans so they can talk to their HCP's? Abdul agreed.confirmed OxyContin stocking and discussed a couple conversions from short-acting opioids to OxyContin.
PPLPMDL0020000001	Cleveland	OH	44114	6/21/2012	talked to Joel,Pharmacist,asked what features of Butrans stood out to him,showed visual aid? Joel said Butrans being a patch and dosed once a week but not many patients want to stop their pills.showed Butrans fpi,we discussed supplemental analgesia with Butrans,told Joel I am sharing this info with HCP's.showed initiation guide,we discussed appropriate patients and PA criteria for medicaid.Joel said all of the patients here are medicaid and medicare.confirmed OxyContin stocking and showed conversion guide,discussed a couple conversions of short-acting opioids to OxyContin.
PPLPMDL0020000001	Parma	OH	44134	6/21/2012	Dr Scanlon said he has been writing for Butrans. He added he gets relatively good results with it. I agreed that it is not for everyone. He said he has used it on a variety of patients from those taking Vicodin several times per day to those who are just taking a few tramadol. I showed him Butrans patient profiles & told him it sounds like he is getting some good experience. He said some of the patients have called back saying Butrans is too expensive. Reviewed formulary grid & focused him on appropriate patients who meet the indication who are ages 40-60 & still working, especially if their current therapy is inadequate. He said that was a good way to sum it up. He said he is going to continue to use Butrans in those types of patients. I asked if he has started anyone on OxyContin lately. He said not really & that he does have some patients who he maintains on it, but that is pretty
PPLPMDL0020000001	Parma	OH	44134	6/21/2012	Spoke with pharmacy intern as Allene was assisting a customer. Reviewed Butrans appropriate patient type/range. Discussed once weekly transdermal dosing of buprenorphine & CII opioid. Alerted him to box warning. Discussed OxyContin 7 tablet strengths & q12h dosing of oxycodone.
PPLPMDL0020000001	Stow	OH	44224	6/21/2012	Spoke with Corey and he said he has seen a pick up with Butrans from Bressis Office. I asked are they using the savings cards and he said he thinks, he said some may be BWC. Gave him patient education. HE said they do not get oxycontin scripts from above so they do not stock it
PPLPMDL0020000001	Shaker Heights	OH	44122	6/21/2012	Quick call- Dr Agarwal said he just wrote OxyContin. I asked him what type of patient it was. He just said it was one of his nursing home patients & then walked away. Michelle (nurse) said he only uses OxyContin in his nursing home patients, which is why he never uses any savings cards. He said he is very cautious about treating patients in the office for any type of pain. She said he refers to South Pointe Pain Management.
PPLPMDL0020000001	Cleveland	OH	44127	6/21/2012	showed dr emma,patient profile,asked dr if he would consider starting patients like this on Butrans? dr said yes.dr said he started 1 patient on Butrans and has more patients in mind.showed BUP3015,discussed opioid experienced clinical trial,asked dr if 30% pain reduction was clinically significant? dr said yes.asked dr if he'll start a couple patients on Butrans within the week? dr said yes
PPLPMDL0020000001	Akron	OH	44310	6/21/2012	Gave dr a quick review of last conversation about Butrans. Dr said she thinks it sounds like a good option and agreed to remember where it should be placed. Showed dr the conversion guide and asked her to keep in her lab
PPLPMDL0020000001	Stow	OH	44224	6/21/2012	Dr was very brief today, he said he started a patient on Butrans the other day and it made them feel nauseated. I asked what dose and he said 10mcg and I asked did he lower it and he said no, he just took him off of it. I said for future, maybe the 5mcg was appropriate dose. He said that can happen with any medication and he still will continue to prescribe it. HE apologized for the quickness but was overloaded today.
PPLPMDL0020000001	Highland Heights	OH	44143	6/21/2012	Spoke to Debbie and asked what types of info she would like to hear from drug reps - patient info or what we are talking to docs about. She said she would rather have patient info. I provided a couple of patient info guides and explained the importance of proper application and rotation of the patch and how to apply to a clean dry site. She said they have not seen a lot of scripts for butrans but they have it. I discussed the commercial insurance and the savings cards and relay health.<font color=blue><b>CHUDAKOB added notes on 06/29/2012</b></font>Nice job of working on this opening. This is when you bring value to the customer.
PPLPMDL0020000001	Cleveland	OH	44102	6/21/2012	showed nagla patient profile,emma,discussed profile and asked if he see's patients like this? nagla said yes she does and the doctors are considering Butrans for patients but sometimes its hard to convince patients to try a patch for their pain,we discussed starting patients on Butrans and still giving short-acting opioid for supplemental analgesia,showed fpi,nagla said they have done that with a couple of patients.asked nagla if she will start a couple patients on Butrans in next week? nagla said she works with dr celeste and dr baishnab mostly and whatever medication they start patients on,she discusses with patients.I asked nagla if she will suggest Butrans to the doctors? nagla agreed.
PPLPMDL0020000001	Parma	OH	44129	6/21/2012	Quick call- Myra was running behind & said she couldn't really stop to talk. She said she has been looking for more Butrans patients & has written a few times since seeing me last. She said she seems to remember at least one that required prior authorization but said to check with Dawn for more information. Spoke with Dawn who said it was probably Caresource. Discussed prior authorization requirements. She said usually they do get approved. Saw dr through window and dr said she did prescribe Butrans since last visit! Dr and Lori(ma) told her that the prescription needed to be hand written. Dr and Lori asked about calling in and refilling Butrans as I stated on last visit. I confirmed ability to so so and asked her to call pharmacy to confirm. Dr said she did give the prescription to patient to fill. Dr said the CII meds should be able to called in and I confirmed.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/21/2012	Reviewed Butrans case studies and asked dr where he thinks Butrans will fit best. Dr said he sees it working for his patients on tramadol or vicoden and said he needs to use it. Discussed him using Butrans for his patients under 65 with private prescription insurance. Dr agreed to use.
PPLPMDL0020000001	Parma	OH	44134	6/21/2012	Spoke with Marko, pharmacist, who said he is still seeing some Butrans prescriptions. He said he has a few people consistently on it & he is glad to see some usage. I asked if he has gotten any patient feedback & he said no. Discussed application & rotation & gave some patient information booklets. I asked if he is still seeing OxyContin prescriptions. He said some but not as many as he used to.

PPLPMDL0020000001	Cleveland	OH	44127	6/21/2012	showed dr BUP 3015,opioid experienced clinical trial,we discussed inclusion criteria,pain reduction and appropriate initiation of Butrans.dr said it sounds good but he doesnt know if his patients will be interested in wearing a patch for their chronic pain.showed dr fpi,supplemental analgesia use with Butrans,asked dr if he would consider starting a patient on Butrans yet still giving some short-acting opioid for supplemental? dr said yes he would consider that..showed william,patient profile,dr said he has patients taking vicodin but a lot of medicare and medicad patients.we discussed PA requirements for medicaid patients.i asked dr if he will start 1 patient in next week on Butrans? dr said he will consider that but has to see who comes into office and talk to patients.
PPLPMDL0020000001	Stow	OH	44224	6/21/2012	Spoke with Gregg and Marcy and they said she has seen increase in Butrans scripts. She said they have been writing in United health care medicad plan and she doing a PA for that now. She said she tells the Drs all of the time not to write it in those patients but they still do. I thanked her for doing PAs for Butrans and asked her if she need anything to help her do her job and she said no, i gave her patient ed books.
PPLPMDL0020000001	Independence	OH	44131	6/21/2012	I showed Dr Sundaram opioid-experienced clinical background & pointed out that 62% of patients in this trial were on hydrocodone before entering the trial & 21% were on oxycodone. Showed FPI section 14 & pointed out the reduction in pain that patients saw. I asked what he thought. He said that seemed "ok". Discussed once weekly dosing in transdermal system. He said he would try to get some patients on it. Spoke with Terry & June & reviewed OxyContin formulary information. June said he uses it in the nursing home patients.
PPLPMDL0020000001	Beachwood	OH	44122	6/21/2012	Dr Yokiell said he feels like he has been using more OxyContin lately. I asked him if there was any particular reason. He said no. He said other than BWC, he doesn't think they get managed care push-back for it. Discussed BWC requirements for OxyContin. He asked what BWC does about Butrans. I told him as of now, BWC is paying for Butrans with no prior authorization. He said he did not know this & that that will cause him to use Butrans more. He said he just assumed that BWC wouldn't cover it because it seems like they don't want to cover anything anymore.
PPLPMDL0020000001	Sagamore Hills	OH	44067	6/21/2012	Dr Mike said he just doesn't believe in long-term treatment with opioids & added that he actually prides himself of getting his patients off opioids. I asked if there are any types of situations that he thinks would warrant long-term opioid therapy. He said for his end-of-life patients, he thinks it is acceptable & has some of them on OxyContin. I asked how long he considers an appropriate length of time to have a patient on something like tramadol or Vicodin. He said maybe 2 weeks. He did add that he has a few patients who take 2 Vicodin per day for osteoarthritis. I told him this is a patient type that he may find Butrans to be useful for.
PPLPMDL0020000001	Cleveland	OH	44127	6/21/2012	showed dr patient profiles,emma and william,we discussed all points in profiles,asked dr whats the next step for these patients? dr said she would have refilled the tramadol or vicodin in past but now she's starting more patients on Butrans.dr said she likes that Butrans is once a week and a patch.we discussed dr starting patients on Butrans but still giving short-acting opioid for supplemental analgesia,dr said ok she will do this.dr said she has a lot of patients taking codeine for chronic pain that always want their pills so she thinks some of them should be started on Butrans.we discussed initiation,titration and PA criteria for Caresource patients.i asked dr if she will start a couple patients on Butrans within the week? dr agreed to do this
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	6/21/2012	Followed up with drs after lunch last week. Asked dr though window if she had any new starts since we spoke. Dr said no but said she will continue to use as often as she can based on the patients needs. left initiation and titration guide. nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44104	6/21/2012	dr said she started another patient on Butrans,patient was taking percocet not controlled so she started patient on Butrans. asked dr what dosage strength? dr said 5mcg and she'll follow-up with patient in 4wks if patient needs to try Butrans 10mcg she'll give the script then.we discussed initiation and titration and i asked dr if she's seeing patients like emma and william,patient profiles? dr said yes she see's both types of patients,asked dr if she will consider Butrans for both patients? dr said yes she will.we discussed PA criteria for Caresource patients and asked dr for her commitment to start more patients on Butrans,dr said she will do that.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/21/2012	spoke to pharmacists about Butrans steady state at 72 hours and titration. Explained transdermal system, matrix, buprenorphine as active ingredient. Discussed efficacy pain score values.
PPLPMDL0020000001	Akron	OH	44305	6/21/2012	Spoke to Brian about Butrans and OxyContin. Brian said they currently do not have it stock and previously filled for Vora at 5mcg. Discussed Butrans titration at 72 hours and no dose adjustment for renal or hepatic impairment. Reviewed all managed care coverage especially with ESI and ESI Med D. Caresource PA criteria. Brian said that they have a lot of Managed Medicaid customers in the area and that the Caresource coverage is great. Brian said the PA is easy because they have a lot of those patients. The pharmacy still had OxyContin copy cards.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	6/21/2012	Met Nick the pharmacist and asked if he knew about Butrans. Nick said he did not. Did quick overview about product with CIII, 7 day transdermal patch, dosing and titration. Nick said they were too busy to engage in a discussion but he would review the information. nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44113	6/21/2012	showed dr emma,patient profile,dr said she has patients like this but hasn't started anyone on Butrans.dr said her patients taking tramadol are controlled but she will keep Butrans in mind as an option.asked dr if she will see anyone like william,showed patient profile,within the week? dr said she probably will,asked dr if she will discuss Butrans with patients like william and start a couple patients? dr said she will see who comes into the office and will keep Butrans in mind.we discussed initiation,titration and insurance coverage for Butrans.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/21/2012	Asked Patrick about Butrans prescriptions being filled. Patrick said he has not filled any recently that he remembers. Discussed steady state at 72 hours and discussed titration. Asked if the pharmacy sees BWC patients. He said they see a lot and that it is either run by the state or the employer group and copy is at \$0. Copy cards will do the BWC patient no good.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/21/2012	I asked DR Raniel if she had initiated Butrans since we spoke last. Dr admitted not using Butrans yet but agreed it may have a place in her practice. I outlined all case study patients and asked her which patient type she felt would be most likely to need Butrans in her practice? Dr said the opioid naive patient would be most appropriate for her. Dr said she doesn't use many short acting opioids. She does have patients on NSAIDs and Cox2's around the clock. I asked dr when a patient like this tells you they are still having pain what does she typically do? Dr said either start tramadol or refer out based on all the criteria of the patient. I asked dr at what point does she know she needs to make a therapy change. Dr said if a patient has been on an analgesic for 3-6 months and is still in pain then she knows either a therapy change or referral is needed. I asked dr to make Butrans that therapy change. Reviewed doses, titration, application sites and reviewed pain scale reductions in both studies.
PPLPMDL0020000001	Akron	OH	44305	6/21/2012	Dr said he titrated a patient in a nursing home on Butrans. 5mcg to 10mcg. Reviewed dosing and titration at 72 hours. Discussed no dose adjustment of hepatic or renal impairment. I asked dr to use Butrans on a patient in his private practice who is currently on a short acting opioid and still getting pain. Dr said he intends to and asked about formulary coverage. Dr said he has Caresource but no BWC. Discussed Caresource PA criteria and reviewed commercial insurance plans.
PPLPMDL0020000001	Beachwood	OH	44122	6/21/2012	Roberta said she actually just tried to get a patient to try Butrans yesterday. She added that the patient had been taking Vicodin for several months & needed something different. Roberta said she gave the patient the patient information booklet to review, but after the patient looked through it, she told Roberta that she didn't want to try it. I asked Roberta what reason the patient gave. She said she didn't really ask but she thinks the patient saw the list of side effects & got scared. Showed adverse event rates & asked Roberta if she thought these were in line with what she would expect in an opioid medication. She said yes. She said she plans to talk about Butrans more with this patient. Roberta then told me about another patient who she thinks Butrans would be good for. She said it is a male patient who is waiting for a total knee replacement. She said the patient will need pain treatment until September when he has the surgery & may need treatment beyond that as well. She said he is currently taking Vicodin & asked if he would be a good patient. I showed her that 62% of patients in Butrans opioid-experienced patient trials were on hydrocodone & showed "William" patient profile. Discussed titration & supplemental analgesia. She said she plans to give Butrans to this patient. She asked me about OxyContin formulary coverage- reviewed grid with her.
PPLPMDL0020000001	Stow	OH	44224	6/21/2012	Abby said she just wrote a script of Butrans this morning but it needs to get a PA, I asked her if the patient was on a short acting and she said no, the patient is allergic to fentanyl and cannot swallow pills because of problems with her esophagus. She said hopefully with those 12 things that will go through. She also wrote on in Union patient and I said I do not think the PA is as easy as the Caresource one. I showed her patient profiles and asked where she would write it and she said she sees more of the opioid experienced patients. I said when we last talked she had said something about some of her patients she was considering were coming from Fentanyl or MORphine and I wanted to make sure she had the right patient type and those patients may be more appropriate For Oxycontin. Reviewed managed care.
PPLPMDL0020000001	Richmond Heights	OH	44143	6/21/2012	Window call....I reviewed the butrans indication, positioning and the other key selling messages. Provided formulary grid reminder and initiation guide. Spoke with Robin, MA, and confirmed that doc still has savings cards.
PPLPMDL0020000001	Akron	OH	44310	6/21/2012	Asked dr Schukay if he truly believes that Butrans is a product that would be appropriate for his patients? Dr said yes but admitted that he doesn't like treating long term pain. Asked if he has patients on short acting opioids for 3+ months? Dr said probably but if his patients need something beyond that he refers out. I asked dr to try Butrans for those patients. 1 patch =7 days. 4 patches a month. DR said he will try.
PPLPMDL0020000001	Parma	OH	44129	6/22/2012	I asked Dr Roheny what he has to lose by identifying a few appropriate patients for Butrans & prescribing it for them. He asked who he should be looking for. Reviewed appropriate patient type & asked him to think about his patients who are 40-60 years old, still working, who suffer from pain from a chronic condition such as osteoarthritis or low back pain. He said he really hasn't seen a lot of patients like that lately. He told me the Butrans dosing (5, 10, & 20mcg) & I told him he is correct. Reminded him of his trial/savings cards that he has & asked what appropriate patients would have to lose by simply trying Butrans. He did not answer. He said he wrote OxyContin for a patient in the hospital recently. I asked if they use hospitalists at Parma. He said they have them available & it is up to each physician if they want to utilize them or not. He said he does not use them but other physicians choose to use them (Saul, Cultarelli). Dr Roheny said he will see if he can find Butrans patients.<font color=blue><b>CHUDAKOB added notes on 06/29/2012</b></font> see your next call objective is the patient profile.
PPLPMDL0020000001	Garfield Hts	OH	44125	6/22/2012	When he asked who he should be looking for, this would have been a great time to pull out the profiles and tell him that any of these three types of patients might be appropriate...and go through them. This is on application I reminded Dr Sadowski of our last discussion & let him know that while Butrans was studied in osteoarthritis, Butrans failed to show efficacy in that particular study. He just said "ok" & started to walk away. I handed him Butrans opioid-naive clinical background & let him know it may give him more information about the patient type that we have been talking about. He said he would look at it. Positioned OxyContin for appropriate patients taking short-acting oxycodone around-the-clock who may benefit from q12h dosing.
PPLPMDL0020000001	Mayfield Heights	OH	44124	6/22/2012	Quick call....Reminded HCP of the butrans indication and the recommendation to rotate the patch every week. She asked about medicare. I told her no coverage with medicare yet but Express scripts plans are now at a tier 2 preferred status. Provided formulary grid.
PPLPMDL0020000001	Garfield Hts	OH	44125	6/22/2012	Spoke with Chris (pharmacist) & reviewed Butrans dosing & ability to take supplemental analgesia. Also showed him information sheet on savings program & offered cards. He said they didn't need them. Let him know monthly savings for eligible patients will come off automatically with e-voucher. Also discussed OxyContin savings program & offered cards, but he said they didn't need those either.
PPLPMDL0020000001	South Euclid	OH	44121	6/22/2012	Spoken to Lauren and Dina about the movement of butrans. Lauren said she just filled one yesterday. She said it was a medicare patients that paid \$180 for it. She did not recall the prescriber. I explained how we are asking HCPs to prescribe for commercial insurance. She said there was a PA that did go through. She thinks the patient was already on it. I discussed the savings card and the trail month for commercial insurance.
PPLPMDL0020000001	South Euclid	OH	44121	6/22/2012	Quick call...I showed doc the EMMA profile and explained that if she is refilling tramadol at 60 tabs or more/mo, those patients may be appropriate for a low dose of butrans. I reminded her of the commercial insurance with the initiation guide.
PPLPMDL0020000001	Cleveland	OH	44111	6/22/2012	Spoke with Braylon, we reviewed Butrans medication guide and I showed the FPI and use of Butrans with supplemental analgesia, he said that he will give the info to new patients, he has seen a few scripts but did not know which Drs, we reviewed the managed care for Butrans and OxyContin.
PPLPMDL0020000001	South Euclid	OH	44121	6/22/2012	Spoke to Mitchell about the stocking and movement of Butrans. He said that it was sent back because he wasn't seeing any scripts for it. He maybe has had a couple, total. He said he has a large elderly population there and move a lot of generics. I did discuss the commercial insurance and PA for medicare and medicaid. I explained the positioning and the proper application and rotation.
PPLPMDL0020000001	Cleveland	OH	44122	6/22/2012	Ran into Dr Rastogi in the hallway at Marymount medical building. I asked if he has had the opportunity to try any patients on Butrans. He said he hasn't but he will. He said he was on his way out.
PPLPMDL0020000001	Uniontown	OH	44685	6/22/2012	Showed dr the efficacy pain score reductions from both studies. Reviewed Emma profile and asked dr to prescribe Butrans again. Reviewed updated formulary coverage with Kelly.
PPLPMDL0020000001	Brooklyn	OH	44130	6/22/2012	Spoke with pharmacist, Danielle, who confirmed stocking of Butrans all 3 strengths. She said she can think of at least 2 people who get it regularly. I asked if they have ever given any type of feedback about Butrans. Danielle said they haven't, but she said she would ask each of them the next time she sees them. Discussed savings & patient information booklets. Also reviewed application & rotation. Danielle said they didn't need any information booklets or savings cards for Butrans or OxyContin at this time.
PPLPMDL0020000001	Beachwood	OH	44122	6/22/2012	Quick call- Passed back Butrans opioid-naive clinical background & OxyContin Medicare D formulary grid. I asked him to review the Butrans clinical data & asked if I could return to discuss it with him. He said OK, thanked me & then walked away.

PPLPMDL0020000001	Mayfield Heights	OH	44124	6/22/2012	Window call....I asked doc if he has any patients that might benefit from a once weekly transdermal analgesic for their moderate ATC pain. He said sure but he's not so sure he has enough of those patients. I gave him a formulary grid and initiation guide pointing out the CII status and the three dosing options.
PPLPMDL0020000001	Cleveland	OH	44121	6/22/2012	Window call...I reminded doc of the 7 strength of oxycontin for patients with mod to sever pain. I showed him the page in cores sales aid showing the q12 dosing and 8 a.m and 8p.m. I asked him to convert patients to oxycontin at the a low dose of 20mg q12. Provided new conversion guide.
PPLPMDL0020000001	Uniontown	OH	44685	6/22/2012	I asked dr and his nurse about using Butrans? Dr asked if Butrans is a scheduled medicine? I told him it is a CIII, 7 day controlled release transdermal patch. Dr said he does not prescribe narcotics. I asked dr if he has patients on NSAIDs, Cox2's or tramadol around the clock. Dr said he has maybe 4 or 56 patients that fit that description. I explained Butrans indication and told him that Butrans is appropriate for opioid naive patients or lpioid experienced patients. Reviewed case studies. Dr said he will consider but typically refers to Dr Bressi. I asked dr to review FPI and initiation and titration guide and to consider. Dr said ok.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/22/2012	Spoke to pharmacist about Butrans and asked about e-script for CII products. Pharmacist told me that the pharmacy level cannot process e-scripts due to pharmacy board has not updated the system to allow it. Gave initiation and titration guide.
PPLPMDL0020000001	Akron	OH	44310	6/22/2012	Dr Goswami told me today that he recently prescribed 5mcg for a patient on vicoden. I asked if he gave a copyay card and he said he is not the one who provides that. I spoke to Ruth and she said the patient did get a copyay card. Dr said the patient should be back in two weeks for follow up. I reminded dr that steady state is 72 hours and he can titrate then if necessary.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/22/2012	Discussed Butrans and OxyContin with dr and all drs at lunch. Dr said he remembers Butrans but wanted further information. Discussed dosing, titration, 7 day patch, application sites. Also discussed Jessica and Emma case studies, coupled it with pain scale reductions from both studies. Dr Laszlo said that he sees the value in a controlled release product and will use it in his tramadol or vicoden patients needing more analgesia. Dr asked about how often you can titrate. Used FPI to discuss steady state at 72 hours. Titrate every 3 days if medically necessary.
PPLPMDL0020000001	Barberton	OH	44203	6/22/2012	Discussed Butrans and OxyContin with dr and all drs at lunch. Dr said he remembers Butrans but wanted further information. Discussed dosing, titration, 7 day patch, application sites. Also discussed Jessica and Emma case studies, coupled it with pain scale reductions from both studies. Dr wanted the conversion guide to remind him about the product and said most of his patients are going to initiate on the 5mcg but does have some that would need to start on the 10mcg.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/22/2012	Discussed Butrans and OxyContin with dr and all drs at lunch. Dr said he remembers Butrans but wanted further information. Discussed dosing, titration, 7 day patch, application sites. Also discussed Jessica and Emma case studies, coupled it with pain scale reductions from both studies. Dr said he will find a place for it in his non opioid analgesics.
PPLPMDL0020000001	South Euclid	OH	44121	6/22/2012	Spoke to Bonnie about the movement of Butrans. She said she really has not seen many scripts for it in recent months. She recalls one patient that didnt have insurance for it and it was too expensive. I explained the positioning and that we are asking docs to focus on commercially insured patients. She said she likes the idea of a patch instead of vicodin which they do a lot of. She asked about how well the patch stays on because they get questions about the fentanyl patch falling off in heat/water,etc. I explained the importance of proper application and rotation for best results. Provided initiation guide.
PPLPMDL0020000001	Independence	OH	44131	6/22/2012	Dr Pal said he still has a patient doing well on Butrans. I asked if he has other patients who are similar to that one who may benefit from a different option. He said probably, but so many of his patients are either Medicare or Medicaid. Discussed prior authorization requirements for Caresource. I reminded him that OxyContin has broad formulary access. He said he doesn't seem to be having any problems getting that covered. Spoke with MA Jill who said Dr Pal will now be in independence on Monday & Wednesday in addition to his regular days (Thursday & Friday). She said he comes to the office in the morning & then spends the rest of his time at the hospital. I discussed the Emma profile and asked doc what he does for a patient like Emma when they fail on tramadol. He said he would go to an opioid, maybe vicodin. I explained that that is a good place to try butrans instead of going to vicodin. Explained the once weekly dose and the CII status. He asked about the tier and the co pay. I explained the commercial coverage and the savings cards (trail month and the up to \$40 off every month. I asked him if he would try to prescribe butrans the next time he sees a patient like Emma. He said ok.
PPLPMDL0020000001	Akron	OH	44319	6/22/2012	I asked dr if he would use Butrans for a patient on tramadol tells you they are still in pain? Dr said possibly but said formulary coverage may prohibit him. I asked if he believes in product first? Dr said he guesses. left him formulary grid.
PPLPMDL0020000001	Fairlawn	OH	44333	6/25/2012	Met Mike(pharmacist) and discussed Butrans. Mike said they have filled a few prescriptions but could not remember who it was filled for. Gave overview of Butrans. CIII, 7 day transdermal patch, titration, dosing, no dose adjustments for renal or hepatic impairment. Gave copyay card information. Mike said he hates copyay cards but they use e-voucher.
PPLPMDL0020000001	Solon	OH	44139	6/25/2012	Spoke with Rikki (MA), who said Dr Zaidi is out all week. I asked if they needed more OxyContin savings cards, but she said they still have some from last time. She did say that Dr Zaidi continues to switch patients to OxyContin & patients seem happy. Gave her Express Scripts Butrans update & reviewed appropriate patient type, focusing on patients who are taking short-acting opioids around-the-clock who are not getting adequate relief. Asked her to give information to Dr Zaidi when he returns & she agreed.
PPLPMDL0020000001	Parma	OH	44129	6/25/2012	Stopped Dr Moysenko with Senokot-S samples. I showed him Butrans clinical data from FPI & pointed out that in clinical trials, patients reported pain reduction with Butrans from approximately a 7 on the pain scale to approximately a 3. Showed him that this was the case with both opioid-experience patients & opioid-naive patients. Reviewed dosing & appropriate patient type/range. I asked if he thought he could find one or two patients who fit the indication & description. He said he would try. Reminder for OxyContin 7 tablet strengths for individualization of dose.
PPLPMDL0020000001	Independence	OH	44131	6/25/2012	Dr Trickett said she has not given out any of the Butrans patient experience kits that I gave her. She added that she was out of town all last week, so that was one of the main reasons for this. She showed me a letter she had received introducing her to the program. I asked if she is still confident that she will have at least 5 appropriate patients to give the kits to. She said yes & that she would like to use more Butrans. She said she did have one patient on it who started in November of 2011 & discontinued in April of 2012 due to adverse events. Dr Trickett asked if Butrans is being prescribed a lot. I told her a variety of physicians in various specialties have found a place for Butrans. Showed her 3 patient profiles & explained that there are 3 different patient types who she may find appropriate for Butrans. Presented clinical data in FPI, showing reduction in pain scores. She said she felt that this was significant. Spent a lot of time discussing the importance of appropriate patient selection & setting appropriate patient expectations. Showed her how she can use patient information booklets to talk to patients about Butrans when she is initiating them on it. Discussed supplemental analgesia & dosing. Also reviewed managed care information for Butrans & OxyContin. Dr Trickett said it seems that even pain management specialists do not want to have patients on narcotics anymore. Focused her on appropriate patients age 40-60 who fit the indication. She said she would Rx.
PPLPMDL0020000001	Akron	OH	44312	6/25/2012	Introduced Butrans to dr. Gave all key selling messages and showed placebo patch. Dr asked about cash price. Asked dr if she has a lot of cash prices? Dr said a few but she was curious. Discussed appropriate patients with patient case studies and reviewed dosing and titration. Dr said she thought the CII and 7 days was a nice benefit and she has a patient on Opana who might be appropriate for Butrans. Discussed copyay cards for Butrans and OxyContin.
PPLPMDL0020000001	Akron	OH	44312	6/25/2012	Discussed Butrans in depth and discussed new OxyContin conversion and titration guide. Discussed all key selling messages with Butrans and asked for appropriate patients while reviewing case studies. DR said it seems like a great option for long term pain control and agreed to try it. Dr said he can think of a hand full of patients he thinks will be appropriate. Dr asked about coverage. Discussed formulary coverage with ESI, BWC, Caresource, and commercial plans with copyay cards and 28 day trial. Dr said he likes it because it is a 7 day patch and he will maybe be able to get a few patients off of some of their short acting opioids. Dr said he will be using it.
PPLPMDL0020000001	Akron	OH	44312	6/25/2012	Good discussion with Butrans and OxyContin. Gave review of new OxyContin conversion and titration guide. Dr said he likes OxyContin because it works and it has good formulary coverage but did admit that he is not prescribing it as much anymore. I asked why and he said that pain patients are very difficult to deal with as an internal med doctor. Discussed Butrans in depth. Efficacy with FPI, safety, appropriate patients with case studies, dosing and titrations as well as conversions. Discussed application sites and proper skin prep. Dr said he will use it.
PPLPMDL0020000001	Cleveland	OH	44109	6/25/2012	talked to erin,pharmacist,about appropriate patients for Butrans and OxyContin,showed initiation guide for Butrans discussion and OxyContin visual aid.asked if erin is seeing patients here that could be appropriate for either medication? erin said yes,there are a lot of patients taking short-acting opioids for chronic pain.we discussed giving patient info booklets to patients that are appropriate for Butrans and having them talk to their HCP's.we discussed conversions from short-acting opioids to OxyContin,showed guide and visual aid to discuss appropriate patients.we discussed insurance coverage and asked if patient brochures about safeguarding med's would be valuable? erin said yes
PPLPMDL0020000001	Akron	OH	44333	6/25/2012	Spoke to Michele, Elyse, and Hope about the new patient for the Butrans Experience program. Elyse could not remember what the patient was on prior to Butrans but was a commercial patient with Anthem BC/BS. The patient was given all the necessary information and enrolled correctly. Asked Elyse to use the remaining kits! Dr out of town.
PPLPMDL0020000001	Solon	OH	44139	6/25/2012	Spoke with Joe, PharmD, & inquired about Butrans stocking at this location. He said they do have some, but do not have anyone on it regularly. He said he can think of one person who did get it once or twice, but they are not on it anymore. I asked why the patient discontinued but he said he did not know. Discussed Butrans trial/savings cards & offered some, but he said he would rather not have them take up shelf space, so he will rely on the physicians to give those to patients. Let him know monthly savings would come off automatically for CVS customers, but they would need the actual card for the trial. Also discussed OxyContin savings cards & reviewed eligibility requirements. Joe said they have plenty of cards for OxyContin. Gave him web resources catalog.
PPLPMDL0020000001	Lakewood	OH	44107	6/25/2012	Spoke with Chuck, we reviewed the medication guide for Butrans and the use of supplemental analgesia from the FPI, I asked if he has seen scripts from Dr Raslan, he did not remember but not recently. We discussed that OxyContin has been studied in geriatric patients and may be an option for some Med D patients.
PPLPMDL0020000001	Lakewood	OH	44107	6/25/2012	I showed the patient profile for William and reminded him about our conversation where he said he would write OxyContin for this patient type, he agreed. I showed the 7 tablet strengths and asked if he would write Butrans for those patients taking vicodin around the clock, he agreed. I showed Emma and reminded him that Butrans could be an option before he starts a patient on vicodin and he said he will try a few patients.
PPLPMDL0020000001	Rocky River	OH	44116	6/25/2012	Spoke with Elani, I reviewed the medication guide for Butrans and the managed care win for ESI, she said they do see a lot of Express scripts. We discussed the managed for OxyContin and that most Med D patients have access to OxyContin, I showed the FPI and that it has been studied in geriatric patients.
PPLPMDL0020000001	Brooklyn	OH	44144	6/25/2012	Spoke with floater pharmacist. Reviewed Butrans & OxyContin savings information sheets & left them for Dave upon his return. Discussed eligibility requirements for usage of cards & automatic savings with e-voucher for Giant Eagle customers.
PPLPMDL0020000001	Lakewood	OH	44107	6/25/2012	I asked Dr if he had other patients like the one he started on Butrans who was previously taking tramadol. He said he does from time to time, but not a ton. I asked if he would start just one patient this week that looks like Emma patient profile and he agreed. I gave him OxyContin managed care grid and asked him to consider patients with Med D coverage and he said he does.
PPLPMDL0020000001	Lakewood	OH	44107	6/25/2012	I showed Emma and asked if he would try Butrans in this patient type, he said that he would. I reminded him that most commercial insurance will not have any call backs.
PPLPMDL0020000001	Cleveland	OH	44113	6/25/2012	talked to dr about how patients are doing on Butrans, no complaints from patients and dr is seeing good pain control with Butrans,dr said he likes Butrans and its just another option they have for patients.asked dr for his continued commitment to starting patients on Butrans,dr agreed
PPLPMDL0020000001	Fairlawn	OH	44333	6/25/2012	I asked what doses of OxyContin they are filling most often? The 20, 40 and 60 mg are probably filled most often. Gave Butrans patient information kits and checked copyay cards.
PPLPMDL0020000001	Cleveland	OH	44127	6/25/2012	showed dr williams, patient profile, we discussed each point in the profile,dr has patients like william,asked dr whats the next step in therapy for patients like this? dr said refill vicodin,dr said he has a lot of patients taking codeine that are med part d and medicaid and he didnt think Butrans was covered there we discussed PA criteria for Caresource patients and asked dr if he will start 1 patient in next week on Butrans,per our discussion? dr
PPLPMDL0020000001	Parma	OH	44129	6/25/2012	Dr Taylor said she doesn't think she has written Butrans yet. She added that she has been looking for BWC patients to put on it. I showed her 3 Butrans patient profiles & explained that there are 3 different examples of patient types she may find Butrans to be appropriate for. Also showed her clinical trial results in FPI & pointed out pain reduction. She said she would try to find patients. Also reminded her that OxyContin offers 7 tablet strengths for individualization of dosing.
PPLPMDL0020000001	Cleveland	OH	44113	6/25/2012	discussed patient profile,william,with deb,asked if she's seeing patients like this? deb said yes,asked deb whats the next step? deb said she's considering Butrans for a lot of patients as long as insurance covers it.we discussed initiation of Butrans for patients like william,discussed PA criteria for Caresource patients and asked deb for her commitment to start more patients like william on Butrans this week?

PPLPMDL0020000001	Cleveland	OH	44106	6/25/2012	talked to dr about patient profiles,emma and william,asked dr if there was any reason why he wouldnt start these types of patients on Butrans? dr said no he would consider them appropriate for Butrans.dr said he has a couple patients on Butrans and likes that its transdermal.asked dr for his commitment to start a couple patients on Butrans,like emma and william,this week? dr said yes he will do that.
PPLPMDL0020000001	Akron	OH	44333	6/25/2012	dr told me that he prescribed Butrans last week. I asked him what the patient was on and he couldn't remember....he thought it was a vicoden patients but wasn't sure. I asked Jen and she didn't know either. Scheduled lunch for 7/2 to follow up. provided OxyContin conversion and titration guide.
PPLPMDL0020000001	Cleveland	OH	44106	6/25/2012	talked to dr about patients like emma and william,showed patient profiles,we discussed initiation and titration of Butrans and managed care coverage.dr said he doesnt have that many patients taking opioids for chronic pain but he knows about Butrans and will keep it in mind as an option.asked dr if he could look for patients like emma and william this week,to start on Butrans,dr said he will do that.
PPLPMDL0020000001	Cleveland	OH	44106	6/25/2012	showed dr patient profiles,emma and william,asked dr what drawbacks she saw in Butrans? dr said she thinks Butrans is a good option,cant think of any drawbacks at the moment other than the attending HCP's have to approve her decision to start patients on Butrans,dr said she doesnt have anyone right now that needs a dosage adjustment of their short-acting opioids,dr said she will keep Butrans in mind.briefly discussed initiation,titration and managed care coverage for Butrans
PPLPMDL0020000001	Cleveland	OH	44130	6/26/2012	Quick call- Dr Fedorko said, "I know, Butrans" & said again that he doesn't have a lot of patients for it. I reminded him that I am not looking for "a lot" of patients & that I am just there to help him in appropriate patient selection even if it is only one patient that he has. Started to show him Butrans patient profile but he said he had no time & went into a room.
PPLPMDL0020000001	Independence	OH	44131	6/26/2012	Quick call- Dr Jack said I was there to remind him about Butrans. I handed him the patient profile booklet & told him I was actually there simply to help him identify a patient or two from his own practice that may be appropriate for Butrans. He said he is referring out a lot more patients. I asked him why not give appropriate patients Butrans so they have something for the 1-2 months they are waiting to get into pain management.
PPLPMDL0020000001	Cleveland	OH	44127	6/26/2012	talked to dr about appropriate patients for Butrans,showed initiation guide and patient profiles-we discussed emma and william,dr said she has a lot of patients taking codeine for chronic pain that she's starting on Butrans,dr said the couple patients she has on Butrans are doing well and she's considering it for more patients.told dr that was great to hear and asked for her commitment to start more patients on Butrans within the week,dr said she will do that.we discussed PA criteria for Caresource patients.
PPLPMDL0020000001	Cleveland	OH	44113	6/26/2012	talked to dr about appropriate patients for Butrans-showed emma and william,patient profiles-dr said he will write Butrans,dr said its taking him longer as this is a new medication to him and he doesnt remember Butrans.showed initiation guide,asked dr to keep the tool with him,dr agreed.asked dr about any hesitations to prescribe Butrans because its a long-acting opioid? dr said no he's fine with that.we discussed commercial insurance patients starting on Butrans and using initial trial offer cards,dr said he will start 1 patient on Butrans.
PPLPMDL0020000001	Parma	OH	44129	6/26/2012	Went through OxyContin "Conversions" vignettes 1-2. Dr Paat said he uses OxyContin sometimes if patients have severe pain. I asked if he treats his office patients with it more or his nursing home patients. He said office patients because he worries about sedation with his nursing home patients. Discussed Butrans as a once weekly transdermal option in the CIII class for patients either not well-controlled on non-opioid medications or those not well-controlled on short-acting opioids around-the-clock, if they meet the full indication. He asked if he has a patient with low back pain if they should put Butrans where the pain is. Explained that Butrans is a systemic medication & is not locally acting. I told him he can use Butrans in patients with low back pain & showed him that this is one of the conditions Butrans was evaluated for safety & efficacy in. Also showed him application sites & discussed rotation & disposal. Positioned Butrans for appropriate patients ages 40-60, being treated for pain from a chronic condition if they could benefit from a once weekly transdermal opioid pain medication. Discussed abuse/addiction potential. Also discussed dosing & supplemental analgesia & showed him how the prescription should be written. He said he would try to find some patients. Shari (MA) said she would do her best to help showed dr OxyContin visual aid we discussed appropriate patients, 7 tablet strengths for titration and Q12H dosing,dr said she does prescribe OxyContin Q12H and said she forgets about some of the OxyContin dosage strengths,we discussed dr converting patients from percocet earlier in therapy to OxyContin,starting patients on low dosage strengths,dr agreed to do this,focused dr on medicare patients starting on OxyContin
PPLPMDL0020000001	Cleveland	OH	44103	6/26/2012	Went through OxyContin "Conversions" program vignettes 1 & 2. Dr Tolentino said she uses OxyContin in office patients when they are in need of "strong" pain medication. Discussed range of patients who may be appropriate for Butrans & those beyond being potential OxyContin candidates, especially if short-acting oxycodone around-the-clock is not controlling their pain. Gave her Butrans initiation/titration guide & showed her dosing & how to write the prescription. Positioned Butrans for appropriate patients who are age 40-60, still working, who suffer from pain from a chronic condition, not getting relief on either non-opioid medications or short-acting opioid around-the-clock. She asked if Butrans has any anti-inflammatory effects. I told her Butrans is only for pain & is a single-entity opioid. Kathy (MA) asked if patients with arthritis can take an anti-inflammatory with Butrans. I told her they can & discussed non-opioid & immediate-release opioids as an option for supplemental analgesia. Kathy said she is sure that they have patients who could benefit from Butrans. Discussed dosing, application sites, rotation & showed disposal unit. Dr Tolentino asked if she can use Butrans for patients with strains because they often need treatment for over a month for pain. I reviewed Butrans indication with her. She said she would consider anything a month or longer as chronic.
PPLPMDL0020000001	Cleveland	OH	44102	6/26/2012	talked to Amonte,pharmacist,about Butrans 6 core selling messages and OxyContin appropriate patients and managed care,Amonte hasnt seen any Rx for Butrans and not a lot of OxyContin prescribed here.showed Butrans patient info booklets and asked Amonte to give these to appropriate patients so they can talk to their HCP's,he agreed to do this.confirmed stocking for both products
PPLPMDL0020000001	Hudson	OH	44236	6/26/2012	Dr Seiple said he hasn't put anyone new on Butrans but he did recently see a patient who came in on it. I reminded him of previous conversations when he has told me that he has patients on Vicodin & that is typically the short-acting he prescribes. I asked how long he typically keeps them on it. He said it completely depends on the patient. He added that he has some patients who are taking 2-3 Vicodin per day & are stable, doing well, & do not want to change medications. I told him if someone is doing well on their current therapy, that probably wouldn't be the ideal Butrans candidate. Positioned Butrans for those for whom he would otherwise adjust the dose or change the medication. I showed him opioid-experienced backgrounder & pointed out that 62% of patients in that trial were on hydrocodone. Showed "William" as an example of this type of patient & then showed FPI clinical results & pointed out reduction in pain. Dr Seiple said he does think Butrans is a good option but added that he doesn't like treating this type of patient. I asked him to focus on legitimate patients in true pain who he is comfortable treating with opioid medications. He said he has a patient who has had chronic low back pain who he put on OxyContin one 60mg tablet at bedtime & the patient reports that he is sleeping better now than ever.
PPLPMDL0020000001	Cleveland	OH	44113	6/26/2012	dr said she's starting patients on Butrans weekly and all is going well,no complaints from patients asked dr if she's starting patients like emma and william,showed profiles,dr said yes.asked dr for her continued commitment to starting more patients on Butrans,dr agreed to do this.
PPLPMDL0020000001	Hudson	OH	44236	6/26/2012	Spoke with Angie, pharmacist, & technician. Reviewed Butrans dosing & ability for patients to take supplemental analgesia in the form of immediate-release opioid or non-opioid medications. Angie said she thinks they have a customer on Butrans. She said they do stock it. Reviewed details of trial/savings program along with eligibility requirements. Also discussed e-voucher. Reviewed OxyContin savings cards- they did not need any today.
PPLPMDL0020000001	Cleveland	OH	44130	6/26/2012	Stopped Dr Diab with OxyContin formulary grid & Butrans Express Scripts announcement. He asked about the Butrans page. I told him the Express Scripts coverage included their Medicare D Express Scripts plan as well, letting him know Butrans is gaining broader formulary access. He took the announcement & put it in his office & told me that was good news & said maybe he could find someone for it now. I reminded him that patients with commercial insurance plans will still have the easier coverage with Butrans.
PPLPMDL0020000001	Hudson	OH	44236	6/26/2012	Spoke with Beth, pharmacist, who said she has not seen a single prescription of Butrans. She added that the boxes that she had in stock expired, so she does not currently stock it. Reviewed dosing & ability to use supplemental analgesia with Butrans. Discussed savings for Butrans & OxyContin & reviewed eligibility requirements.
PPLPMDL0020000001	Westlake	OH	44145	6/26/2012	Quick call as Dr left for his other office, I asked if he had tried Butrans yet as we discussed and he has not, I asked if he sees patients like Emma and what is holding him back from trying it, he asked about managed care. I asked if I could show him that it is covered will he give Butrans a try and he said yes, and I should talk to Sam about that. I spoke with Sam, we reviewed the Emma patient type and managed care coverage, she agreed to help pick a few patients for Butrans and remind him to give it a try. We also discussed the managed care for OxyContin, and the savings cards.
PPLPMDL0020000001	Cleveland	OH	44113	6/26/2012	dr said he's not started anyone on Butrans yet but he will,dr said he has to remember Butrans and just start 1 patient so he can get in habit of writing,asked dr if he had any other hesitations with starting patients on Butrans? dr said no.showed initiation guide and discussed dr starting 1 patient in next week on Butrans,dr said he will do that.we discussed PA criteria for Caresource patients.
PPLPMDL0020000001	Euclid	OH	44132	6/26/2012	Spoke to Tim and Anna about the movement of butrans and oxycontin. Anna stated that they still have the same patient on butrans monthly but no new scripts. She said that oxycontin volume is steady although they are seeing a surge in IR oxycodone. Recently they have been seeing a shortage on many narcotics overall. Tim stated that filling narcotic scripts is really getting frustrating and to the point where they me stop altogether. They informed me that Dr. M. Patel will be moving into the building in july.
PPLPMDL0020000001	Lyndhurst	OH	44124	6/26/2012	I reminded doc of our discussion last week of scheduled narcotics. I reminded him that he said he could "work with butrans" instead of writing vicodin or percocet. He said he was going to write for the people with the insurance coverage.
PPLPMDL0020000001	Berea	OH	44017	6/26/2012	I reminded Dr of Emma patient type and patients like her can take supplemental analgesia with Butrans. He said ok and he agreed to start patients on the patient experience program.
PPLPMDL0020000001	Berea	OH	44017	6/26/2012	I reminded Dr of William patient type, and asked him to look for those patients younger than 65, or Caresource, he said that patients will not want to fill 2 scripts. I asked if he would at least give it as an option and then let the patient decide. We discussed that for many patient the copay is \$15.
PPLPMDL0020000001	Macedonia	OH	44056	6/26/2012	Spoke with Dr Pal's medical assistant & reviewed Butrans core messages with her. She said she does not think Dr Pal has used Butrans yet. I told her that he had told me during our last lunch that he needed frequent reminders & asked for her help. She said she would do what she could. Gave her Butrans information with my card & asked her to give them to Dr Pal- she agreed. Also discussed OxyContin 7 tablet strengths with her. She said he doesn't have very many patients on OxyContin.
PPLPMDL0020000001	North Olmsted	OH	44070	6/26/2012	Spoke with Mary, we reviewed the medication guide for Butrans and that Butrans can be used with supplemental analgesia. We discussed the ESI update for managed care. We reviewed the OxyContin formulary grid and that OxyContin has been studied in geriatric patients.
PPLPMDL0020000001	Westlake	OH	44145	6/26/2012	Spoke with Deanna, I asked if she has seen any scripts from Dr Raslan, she has not seen any from him, but they have one patient on the 20mcg from Dr Neri. I reviewed the managed care updates for Butrans, she asked about what to do if the Butrans patch falls off, I asked if she has seen that happen and she said no. I reviewed what to do if the patch curls up or comes off per the FPI medication guide. We reviewed that OxyContin may be an option for patients taking over 40mg of hydrocodone per day.
PPLPMDL0020000001	Euclid	OH	44119	6/26/2012	Quick call...saw doc at the receptionist desk and reminded him if the butrans are once weekly, CIII status for moderate to severe pain. I asked him if they were scheduling lunches again. He told me to talk to Carla who would have to approve it. Gave my contact info to give to Carla who was away.
PPLPMDL0020000001	Lakewood	OH	44107	6/26/2012	I asked Dr why he hasn't tried Butrans yet on a patient taking 200mg of tramadol per day, and he said he hasn't seen that patient with commercial insurance, I reminded him that Caresource patients may also be an option. I showed him that patients can continue to take short acting with Butrans. I showed the FPI for OxyContin and that it is an option for patients over 65 and 75 year old.
PPLPMDL0020000001	Macedonia	OH	44056	6/26/2012	Spoke with pharmacist, Eve, who said she needed more OxyContin savings cards. She requested 2 packages. She said she recently needed one & noticed she was out. Gave her my card for future. Reviewed eligibility requirements for card usage. Also asked about Butrans. She said she hasn't filled any lately & that they do not need cards for that. Let her know any monthly savings would come off automatically for eligible patients through showed dr patient profiles emma and william,dr see's both patient types,asked dr whats the next step for these patients? dr said he would have refilled the tramadol or vicodin in past but now he's considering Butrans for patients we discussed initiation and titration of Butrans,asked dr if he will start a couple patients like emma and william on Butrans within the week? dr agreed.we discussed PA criteria for Caresource patients
PPLPMDL0020000001	Cleveland	OH	44127	6/26/2012	I reviewed the patient type of William, and that he told me he would start this type of patient on Butrans, and that he has some caresource patient like this. He said he does. I reviewed that this patient would start on a 10mcg and thathe could titrate him to the 20mcg after 3 days. I also showed him that patients can use supplemental analgesia and he said that he would try to get the patient down off the vicodin. We discussed that OxyContin is an option when patient are taking more than 40mg of vicodin per day.
PPLPMDL0020000001	Olmsted Falls	OH	44138	6/26/2012	I reminded doc that the last time I was there he said he has patients like Emma - taking tramadol but currently failing. I asked him to try those patients on butrans before referring them to pain mgmt. He said,"but the coverage is not good." I told him that for people with insurance through their employer, most can get butrans for about \$15/mon with a savings card. He just said ok.
PPLPMDL0020000001	Euclid	OH	44119	6/26/2012	

PPLPMDL0020000001	Mayfield Hts	OH	44124	6/26/2012	Quick calllll asked doc if he has patient on tramadol monotherapy for their persistent pain. He said sure. I showed him the butrans initiation guide and asked him if he had any objections to prescribing butrans after failure on tramadol. He asked for confirmation that BWC covers it. I told him that BWC is covering butrans.
	Euclid	OH	44117	6/26/2012	Conducted oxycontin conversions. Doc said he knows the dose from plenty of experience. He said he has not been started any patients on oxycontin lately but he has no problem doing so. He said that BWC is now requiring patients to start on MS contin as the first long acting. Recently they would also allow Nucynta Er as the first long acting but no more. I discussed the appropriate positioning for butrans. He said he has written it a couple of times but he thinks there is a psychological matter of getting people to stop taking pills and go to a patch. He asked who is writing it. I told him many of the specialists and some PCPs that treat pain. He asked about the starting doses. I explained the 5 and 10mcg but that many of his patients would start on the 10mcg if he prescribes after a max dose of 300mg of tramadol which is his max dose. He wrote a dummy script for butrans and said he is going to try to write butrans after tramadol and before referring to pain mgmt. I explained the molecule and the MOA of butrans.
PPLPMDL0020000001	Independence	OH	44131	6/26/2012	Quick call- Caught Dr Rob in the hallway briefly & he asked me what I have. I told him Butrans, the once weekly CII transdermal system & OxyContin. He stopped me & said he is not interested & then walked away. Scheduled a lunch in effort to uncover more.
PPLPMDL0020000001	Barberton	OH	44203	6/27/2012	Introduced Butrans Experience Program to dr and asked him if he will use them. Dr said he will and anything that will help the patient and make it easier on him he likes. Asked dr to use all 5 kits and explained appropriate patients and formulary coverage.
PPLPMDL0020000001	Cleveland	OH	44109	6/27/2012	talked to Mana,Pharmacist,about hcp's writing Butrans,confirmed stocking and asked Mana if doctors are writing refills? Mana said he's not seen any doctors write refills,but patients are coming back for refills.gave patient info booklets and asked if Mana will hand them to appropriate patients so they can talk to their HCP's,he agreed to do this,confirmed OxyContin stocking and discussed formulary coverage.
PPLPMDL0020000001	Cleveland	OH	44104	6/27/2012	dr didnt want to discuss OxyContin,dr said he's not starting new patients on OxyContin and is taking his patients off it,dr said he just started a patient on Butrans though and wanted to talk about appropriate patients for Butrans,we discussed this patient he started and dr said patient got the medication and he's not heard back so he assumes patients doing well.showed initiation guide,we discussed initiation,titration and PA criteria for Caresource patients to start on Butrans.asked dr for his commitment to start a couple new patients on Butrans within the week,dr agreed to do this.
	Parma	OH	44129	6/27/2012	I asked Dr Salama if he was still finding a place for Butrans. He said he does still prescribe it but that most of the patients he wants to use it for are Medicare patients. I showed him Express Scripts update & let him know that this does include their Medicare D formulary. Explained that this means that patients who have Express Scripts Medicare D insurance can get Butrans with no PA & at the lowest branded co-pay. He said that is great. He said he will try Butrans for patients who he thinks it is appropriate for & just hope that it is covered. Told him Butrans still has most access with commercial insurances. Focused him on appropriate patients ages 40-60, still working, with legitimate pain. He said he wouldn't use Butrans for younger patients. I asked him why not. He said most of those patients come to him on Percocet 4-5 times per day. He said he wouldn't think even the highest dose of Butrans would work for someone like that. He asked me if that is true. I handed him an initiation guide & showed him slide tool. I showed him the range of appropriate oxycodone patients for Butrans & reminded him that they can use supplemental analgesia if necessary. Also discussed titration. He said he would try more patients on Butrans. I asked why he doesn't like OxyContin. He said because of the stigma. He said if a new patient comes in on it he either switches them or doesn't take them on as a patient. His only patients on it are those he put on it years ago.
PPLPMDL0020000001	Bedford	OH	44146	6/27/2012	Dr Moufawad asked if I know what labs can test for buprenorphine. I told him that there are labs that do, so he will just have to check with each individual lab. I asked him, as an expert, what he thinks is most important for me to tell my primary care physicians about Butrans. He said they first need to screen who is in legitimate pain & who is not. I agreed that appropriate patient selection is imperative. He said he tries new patients on Butrans to get an idea of how much medication they will need & then goes from there if they tolerate it. He said he will go as high as giving them 20mcg Butrans with a few Percocet for breakthrough pain. He said he uses the patient information booklets to teach patients about Butrans & finds that to be a useful tool. He said physicians should know that Butrans works & if it doesn't, they should refer to pain management. I told him this is a tactic I am trying with some of my practitioners. Dr Moufawad said patients do not want the reformulated OxyContin or Opana. I told him he should be just as cautious with the new formulation of OxyContin as he was with the original formulation. He said he knows, but he does think patients will start abusing more Percocet & Vicodin.<font color=blue>cbCHUDAKOB added notes on 07/06/2012</font>Very good opening question to this physician! You might have pulled out the patient profile and told him that these are the patient types we are discussing and asked his thoughts about them. This would have given him an opportunity to see the patient types we are discussing with others and reinforce it with him.
PPLPMDL0020000001	Maple Heights	OH	44137	6/27/2012	Quick call- Passed back Butrans patient profile booklet & told him I thought it might be helpful in showing him some examples of patient types who may be appropriate for Butrans since he has said that he has had good results so far. He said he would look through it. I let him know I have a lunch coming up that we can discuss the patient types at.
PPLPMDL0020000001	Cleveland	OH	44104	6/27/2012	dr said she's started a few more patients on Butrans and is giving patient info booklets out,asked dr what her clinical expectations are of Butrans when she 1st starts patients? dr said to control the pain and decrease the pills patients are taking,asked dr if she will start a couple more patients on Butrans within the week? dr agreed.
PPLPMDL0020000001	Cleveland	OH	44113	6/27/2012	dr said he's given a few patient info booklets to patients but hasn't started anyone recently on Butrans. we discussed patients like emma and william,showed patient profiles and initiation guide,asked dr for his commitment to start a couple patients on Butrans within the week? dr agreed.focused dr on commercial insurance patients using initial trial offer cards
PPLPMDL0020000001	Parma	OH	44129	6/27/2012	Spoke with Mary Jo, pharmacist. Discussed Butrans trial/savings program & voucher. Also reviewed eligibility requirements. She said she thinks they might have one person on it but was not sure. She then got called for a customer issue. Gave her information for OxyContin savings cards.
PPLPMDL0020000001	Cleveland	OH	44106	6/27/2012	dr said she's not started anyone on Butrans yet but has given a few booklets to patients so she can follow-up with them,asked dr if theres anything holding her back from starting patients on Butrans? dr said no,we discussed initiation of Butrans,showed emma patient profile,asked dr if she'll start a couple patients like emma in next week? dr agreed to do this,we discussed PA criteria for Caresource patients to start on Butrans
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/27/2012	I asked dr what he likes best about OxyContin? Dr said because it works and its covered on most insurances except for managed Medicaid. Dr said his patients do well on the product. nothing else learned.
	Westlake	OH	44145	6/27/2012	Met David Drew, he is director of material management, he said that they use vendor credentialing services. www.csdatabase.com He said that this is what all UH facilities use. I spoke with Jennifer Flemming and she told me that Jason Umlie is the chief resident in charge of setting up journal club meetings. They have journal club meetings meet every 3rd Wed of every month and about 15-20 people attend. They have about 42 residents in the program, 6 FP, 9 IM, 15 EM/IM, and 15 EM. Spoke with Mary Beth Malco, she in medical staffing and in charge of department meetings, she said that they have very poor attendance at their meeting and only 2 drs showed up at their last one.
PPLPMDL0020000001	Akron	OH	44313	6/27/2012	Thanked dr for giving me a few minutes a couple of weeks ago and asked if he has any questions about OxyContin or Butrans. Dr said he is intrigued about Butrans and asked about insurance coverage. Gave him BWC, Caresource and commercial coverage information. He said he will look for patients. told him about dosing, titration and steady state.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/27/2012	Dr said she had forgotten a lot about Butrans since my last visit. Gave Dr Bedrick all Butrans key selling messages and discussed titration, steady state, application sites, pain scale reductions. Dr said that she typically will refer a patient out after Butrans application. I asked why and she said she does not want to be known for treating chronic pain and patients talk with one another. I asked her if she could get similar pain reductions with a CII, 7 day patch would she keep the patients? She said she probably would keep them. She refers most of her patients to Western Reserve Hospital in Cuyahoga Falls drs Narouze, Sable and Ali because she likes their conservative approach. Dr said she will prescribe Butrans for her next Cox2 or vicoden patient who needs additional analgesia.
PPLPMDL0020000001	Copley	OH	44321	6/27/2012	spoke to Jenna about oxyContin and asked if she had the intermediate doses. She said she had 1 bottle of 15mg and has all the other doses. Reviewed conversions and dosing, and titration. The pharmacy has two patients on Butrans 5mcg and 10mcg. Discussed titration and dosing of Butrans and steady state at 72 hours.
PPLPMDL0020000001	Munroe Falls	OH	44262	6/27/2012	Quick Butrans hit in hallway. Asked dr if she had any Butrans candidates yet. Dr said know but she does remember it. Gave another Butrans initiation and titration guide.
PPLPMDL0020000001	Cleveland	OH	44113	6/27/2012	dale said he's starting patients on Butrans every week,with dr shen (pain mgmt doctor),asked dale if they are patients like emma and william,patient profiles? dale said most patients look like william,on vicodin or some are taking percocet that aren't controlled and they tell patients Butrans is next option,asked dale for his commitment to start more patients on Butrans within the week,dale agreed.we discussed initiation,titration and insurance coverage for Butrans
PPLPMDL0020000001	Barberton	OH	44203	6/27/2012	Asked pharmacist if they have filled any Butrans recently? Pharmacist said not recently but remembered that Butrans is a CII, 7 day patch. Gave dosing and titration guidelines and told him that opioid naive can use Butrans in addition to opioid experienced. Pharmacy is filling OxyContin regularly and has all doses.
PPLPMDL0020000001	Parma	OH	44134	6/27/2012	Dr Hernandez said everything is going well with Butrans. He said his patients continue to be successful on it. He said the only problem he has occasionally is with pharmacies stocking it or pharmacists not understanding his dosing. He said a Wal-Mart pharmacy recently told one of his patients that it would take them 1 week to get Butrans in stock. I told him this sounds unusual. He said he thinks the pharmacy lied to the patient as they have not had issues with stocking anywhere else. I asked about OxyContin & his recent usage. He said he does still prescribe, he just doesn't want patients to be on it indefinitely. I asked if he always does it q12h. He said yes, always. He said he has seen other physicians write it more frequently. I told him he is correct to dose only q12h & discussed 7 tablet strengths for individualization of dose. Discussed savings programs/cards & patient information.
PPLPMDL0020000001	Copley	OH	44321	6/27/2012	Asked dr if he had any new starts with Butrans. Dr said he had not. I asked dr if he thinks Butrans has a place and if he believes in its efficacy. Dr said he is good with all of that except for formulary coverage. He said he doesn't want to have to deal with call backs, PA's, and non coverage. I told dr that's why I am trying to be specific with you on where to use it. Told dr to prescribe it for a patient under 65 with private prescription insurance. Dr said ok. nothing else learned.
PPLPMDL0020000001	University Heights	OH	44121	6/27/2012	I reviewed the Emma profile and asked doc what he would do for patients that fail on tramadol 50mg q6h. He said said he would go to tramadol 100mg q4h. I asked him to consider going to butrans instead of maxing those patients on trmaadol. Doc said he isn't writing opioids anymore because the government does not want him to write narcotics for less than cancer pain. He said he would think about it for cancer pain patients.
PPLPMDL0020000001	Waterford	OH	45786	6/28/2012	W - Hasn't had any recent Butrans indications but continues to consider Butrans for patients. I - Butrans for appropriate patients who meet the indication when uncontrolled on tramadol or hydrocodone once a therapeutic change is requested. Review of Emma profile as possible patient type she may see and treat in her practice that could be appropriate for Butrans therapy. Review of formulary coverage and savings card programs.
PPLPMDL0020000001	Waterford	OH	45786	6/28/2012	W - Miral recently had a new start with Butrans. The patient was uncontrolled on hydrocodone and was needing a change in therapy. She is allowing the patient to continue using hydrocodone as a break through medication with hopes of reducing the break through medication down the road. I - Butrans for appropriate patients who meet the indication when uncontrolled on tramadol or hydrocodone once a therapeutic change is requested. Review of Emma profile as a patient that she may see in her practice that could be appropriate for Butrans therapy. Review of Formulary coverage and savings card program.
PPLPMDL0020000001	Waterford	OH	45786	6/28/2012	W - Continues to prescribe OxyContin for patients and considers Butrans for patients once a short acting medication is no longer controlling a patients pain pm. Once a condition goes from as needed pain to chronic pain then an extended release product becomes necessary for patients. I - Review of Butrans patient profiles - Emma/William as possible patients that he may see in his practice that could be appropriate for therapy. Butrans for appropriate patients who meet the indication when uncontrolled on tramadol or hydrocodone once a therapeutic change is requested. OxyContin low dose conversions from short acting medication once the indication is met.
PPLPMDL0020000001					Review of formulary coverage and savings card programs.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/28/2012	Dr very busy after returning from vacation. Quick Butrans discussion at counter. Asked if he had any new starts. Dr said no but is trying to keep it in mind for his tramadol patients. Left conversion slide for him.
PPLPMDL0020000001	Parma	OH	44134	6/28/2012	Spoke with pharmacist, Lily, & reviewed Butrans patient type/range, letting her know I am working with physicians trying to get them to focus on appropriate patients who are seeking a dosage adjustment for their short-acting opioid regimen, if they fall within the range. Discussed dosing & titration. Also reviewed savings program/eligibility. Discussed OxyContin q12h dosing & 7 tablet strengths.
PPLPMDL0020000001	Parma	OH	44129	6/28/2012	Spoke with MA Caitlyn & reviewed Butrans & OxyContin formulary grids. Reviewed Butrans core messages with her as she did not remember details on it. Offered savings cards for both products & explained eligibility requirements for card usage. She said they have cards for both products. Scheduled first available lunch with the group. I asked her to leave Butrans clinical backgrounder for each physician in the oncology suite & she agreed.
PPLPMDL0020000001	North Hampton	OH	45349	6/28/2012	Butrans Introduction. Doctor said that she is very interested in learning more but would like to set up a lunch one week from now. We set up an appt and said she looks forward to our meeting and learning more.



PPLPMDL0020000001	Parma	OH	44129	6/28/2012	Myra said she recently had to take a patient off Butrans because it would not stick on a patient. She said this was a larger male patient who works outside & sweats often due to his manual labor job. She said the patient tried taping it on several times, but to no avail. I asked Myra if she would continue to try Butrans on other patients & she said she would. I asked if she is a member of any PA groups that we could do a dinner program for. She took my card & said she can put me in touch with someone from the OAPA. She said they would definitely be interested in having a Butrans program. Dawn asked me when NP's & PA's will be able to write CII medications like OxyContin. I told her I did not know the exact date & asked her if she thinks that will have an impact on the way they practice there. She said no.
	Sagamore Hills	OH	44067	6/28/2012	Penny said she has not tried Butrans on anyone since her last patient who she had on it. I asked why not. She said it is truly a matter of just not treating patients for chronic pain. She said the patients she sees just typically do not have those types of issues. I asked if a patient did present, would she feel comfortable enough with Butrans to write it again. She said she definitely would. She said she likes a lot of things about Butrans & the patient who she did have on it loved it, so she has no hesitations about writing more of it if the right patient presents.
PPLPMDL0020000001	Northfield	OH	44067	6/28/2012	Spoke with Dr Lango briefly as she was arriving late & was over an hour behind. She said she remembers I am the Butrans & OxyContin rep. She said she has maybe tried one more patient on Butrans since I saw her last but has not yet heard back from that patient. She said she should be getting feedback soon. She added that she writes OxyContin fairly regularly & then left.
PPLPMDL0020000001	Sagamore Hills	OH	44067	6/28/2012	Dr Lenox said he can't open a journal anymore without seeing an ad for Butrans or OxyContin. He went on to say that he has not tried Butrans on anyone yet, but does not know why. He said he likes the idea of it & has no reason not to prescribe. He said the patient who he just saw would have been a good candidate, so he does not know why he didn't give him Butrans. He said he thinks it is just a matter of remembering it. I asked what the best way for me to keep Butrans fresh in his mind is since he does not see reps outside of scheduled lunches. He said that what I am doing is the best way & that he will try harder to remember. He said he has been referring to pain management less frequently lately because it seems that it is sometimes taking 3 months for patients to be seen & that is doing the patient a disservice to have to wait that long. I asked what typically triggers him to refer to pain management. He said he refers when a patient needs an epidural block. He said it is not a matter of how much medication they are taking for it or how long he has been treating them for their pain. He said it seems that pain management doesn't write many medications anymore anyway, so he just assumes do that himself. He said he is going to use Butrans & then left.
PPLPMDL0020000001	C. Falls	OH	44223	6/28/2012	Spoke with Cindy about OxyContin and Butrans. I asked which doses she fills most often. Cindy said she filled 7 - 10mg in the month of June. Also filled most of the 20mg, 15, and 40mg. Cindy said she just filled a 15mg for Dr Sable yesterday. Reviewed conversion ratios and conversions from short acting opioids.
PPLPMDL0020000001	Independence	OH	44131	6/28/2012	Quick call- Reviewed Butrans core messages with Lisa. She said they don't really use it. Reviewed appropriate range of patients & requested to come in for a lunch. She said she would allow it. Let her know I would have a patient experience program to introduce to her & Dr Keppler. She said he may be interested in that.
PPLPMDL0020000001	Independence	OH	44131	6/28/2012	Quick call- Caught Roman at the window. He said he is still writing OxyContin "all the time". I asked him to continue to do so & reminded him of q12h dosing interval. He said he knows. He also said he has plenty of savings
PPLPMDL0020000001	Mayfield Heights	OH	44124	6/28/2012	Doc said he still has patients on butrans and seemingly doing well. I asked him if he has started any new patients recently. He said sure. I asked doc what types of information is important to him when it comes to initiating an opioid. He said efficacy and cost. I reviewed the clinical data in opioid experienced patients and he agreed that 30% improvement in pain is good, even though he does not use pain scales. I asked him to continue to prescribe butrans when he sees patients like Emma (revealed profile). Reminded him of the savings cards, commercial coverage, and oxycontin as an option for patients with more severe pain or Med D patients.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	6/28/2012	Spoke to Amy about OxyContin and Butrans. Reviewed new conversion and titration piece. Amy said she has all doses which includes the intermediate dosing. Amy said that she has them all despite the high theft potential. I asked if she knows about any thefts in the area recently? She said no but the potential is there. Told her about the RxPatrol system. Gave her the initiation and titration guide and explained dosing and titration.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	6/28/2012	Asked dr if she has patients on NSAIDs, Celebrex or Tramadol who tell you they are still in pain? Dr said she has heard patients say that but sometimes not sure if they are being honest. I asked dr to think Butrans for those patients. The CII, 7 day transdermal patch for moderate to severe pain. Showed conversion scale and discussed titration at 72hrs if necessary. Dr said she needs to remember it. I told her to keep the conversion scale in each exam room. Dr took 4 scales and agreed it would help.
PPLPMDL0020000001	Brooklyn	OH	44144	6/28/2012	Spoke with Kristen, pharmacist, & discussed Butrans dosing, titration, & ability for patients to take supplemental analgesia if necessary. She said they used to stock it but it expired. She said they would order it if they got a script. Also reviewed OxyContin dosing interval of q12h. I asked if that is how she is seeing it written. She said usually, although occasionally she will see it dosed q8h. Reminded her that OxyContin is only approved for q12h dosing & asked her to advise patients & physicians.
PPLPMDL0020000001	Mayfield Heights	OH	44124	6/28/2012	Window call....I showed doc the butrans initiation guide and the appropriate starting dose dependent upon patients current therapy. I asked her to try butrans for a commercially insured patient that comes in for a dose adjustment to their current therapy.
PPLPMDL0020000001	Mayfield Heights	OH	44124	6/28/2012	Caught doc as she was leaving....Reminded her of the butrans indication and other key selling messages. I also reminded her that she was intersted in proably starting a patient. She said she could not remember who. She wanted to know about coverage. I discussed the commercial insurance plans and the savings card. Gave her an initiation guide and formulary grid.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	6/28/2012	Discussed RxPatrol with pharmacist. All pharmacy staff thought it is a good idea to have a comprehensive site to provide information to help protect about pharmacy theft. They have not filled any Butrans yet. Reviewed all key selling messages.
PPLPMDL0020000001	Cleveland	OH	44130	6/29/2012	Followed-up with Dr Kansal again to find out about usage of Butrans Patient Experience kits. He has still not used any of them. I asked him what it is going to take for him to give them to appropriate Butrans patients. He said he needs more patients. He said he just hasn't seen any patients for pain & he is not treating any new patients for pain. I told him it doesn't have to be a patient new to his practice & reviewed appropriate range of patients, also discussing OxyContin as an option for appropriate patients beyond Butrans. I reminded him what a rare opportunity it is to have the kits & pointed out that I am asking him to only find 5 appropriate patients. He said if he had the patients, he would give them out.
PPLPMDL0020000001	Brooklyn	OH	44144	6/29/2012	Caught Dr Miguel & stopped him with Butrans dinner invitation. He said he would try to attend. I let him know I would follow-up before the program for a more firm answer. Discussed Butrans dosing & appropriate patient type/range as well as OxyContin as an option for appropriate patients beyond the Butrans range. He said his patients continue to come to him saying that pain management will not give them any medication. I asked Dr Miguel why not try Butrans for those patients so they are getting some sort of medication to get them through until a different pain management physician can see them. He said that was a good idea.
PPLPMDL0020000001	Lyndhurst	OH	44124	6/29/2012	Quick call....I showed doc the butrans demo, reminded her that if she has patients on tramadol and looking for a dose adjustment, those might be appropriate patients for butrans. I asked her to try one of those patients. Gave her formulary grid and initiation guide.
PPLPMDL0020000001	Bedford	OH	44146	6/29/2012	Introduced myself & Purdue's product line to Dr Hilal, Chrissy, & Peggy (MA's). Delivered core messages & showed appropriate range of patients in initiation guide. Also discussed OxyContin as an option for appropriate patients who are beyond the Butrans range. Also handed him patient profile booklet & walked him through 3 different patient examples where Butrans may be appropriate. He said he does treat patients like this. He said he also refers to pain management for chronic pain. I asked what typically triggers him to refer- is it a matter of amount of medication? A matter of length of time someone has been on a pain medication? He said it is more a length of time. He said he is willing to treat them for 2-6 months, but if at that point they are not better, he refers. He also said he does not use narcotics for osteoarthritis because he does not believe in treating the older population with narcotics if it can be avoided. Reviewed Butrans dosing, titration, managed care, trial/savings program. He asked how Butrans compares with Duragesic. Let him know we have no comparative data & showed range of patients again. Also showed him how to use slide-out tool which he liked. I asked if he thought Butrans would be something he would prescribe & he said he would & would need help remembering. I asked about his usage of OxyContin. He said he avoids it if possible. Discussed OARRS & importance of appropriate patient selection with all opioid medications, including Butrans & OxyContin
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/29/2012	Discussed both Butrans and OxyContin key selling messages. Asked dr if she uses tramadol or vicoden to treat pain. Dr said she does and likes them both. Discussed appropriate patients for Butrans with case studies and conversion guide. Dr asked about comparison with Fentanyl. Discussed how there are no head to head studies and dr said she uses fentanyl later in the treatment. I talked about where Butrans is appropriate and how the dosing and titration work. Discussed application sites, steady state, skin prep, and dr asked what to do if patch comes off or peels away. Discussed from FPI appropriate ways to treat patch falling off or pulling away. Reviewed pain score reductions from FPI. Dr said she sees herself using Butrans but asked about AE's and cost. Reviewed both in depth. Dr has many commercial patients appropriate for Butrans. Reviewed OxyContin and dr said she does not use it for any new starts because of the abuse and street value. Dr asked about reformulation. Discussed the issue with dr. Reviewed dosing flexibility and the Q12h oxycodone and the q4-6 options. Reviewed copy cards for both products.<font color=blue><b>CHUDAKOB's query on 07/06/2012</b></font><font>What exactly did you discuss with the Dr. when she asked about the reformulation? You said "discussed the issue with the Dr."<font color=green><b>REICHCL's response on 07/10/2012</b></font><font>I discussed what we are allowed to discuss. The information on the reformulation card only<font color=blue><b>CHUDAKOB added notes on 07/12/2012</b></font>Thank you for that clarification. This is something that should be included in the call notes. You should write that you read the reformulation card in response to his question. This way there will be no question on what was said.
PPLPMDL0020000001	Beachwood	OH	44122	6/29/2012	Spoke with Rina, pharmacist, who said she has one customer on Butrans. She said she has not gotten any specific feedback, but the patient must be doing OK if they continue. Reviewed appropriate patient type. I asked when she sees OxyContin prescriptions how they are being dosed. She said typically q12h. I let her know I have been focusing on the importance of adhering to the appropriate q12h dosing interval. I asked her to be sure to explain this to patients as sometimes patients confuse it with "twice a day". She said that makes sense & she will do it. Reviewed savings cards.
PPLPMDL0020000001	Mogadore	OH	44260	6/29/2012	Dr said she had started a patient on Butrans and they never came back so she doesn't know how they are doing and then joked that she must have cured them. I asked if the patient had chronic pain and she said he did but she doesn't know what happened to him. I reviewed opioid naive study and said if she sees patients before they are on Vicodin with the pain conditions in the study to write Butrans and reviewed managed care.
PPLPMDL0020000001	Mogadore	OH	44260	6/29/2012	Spoke with Jerry and he said he sees Butrans but doesn't know who they are from, he said he does not pay attention. I asked if they had savings cards and he said he didn't know, he thinks and then he pulled out our pat ed books and asked if they had coupons and I said no. HE said oxycontin has actually slowed down and I asked him what has picked up and he said Percocet and also Duragesic. Reminded him of SenS in opioid induced
PPLPMDL0020000001	Brooklyn	OH	44144	6/29/2012	Extended Butrans dinner invitation to Dr Detwiler. He said he usually does not attend programs but would consider. Showed broad formulary coverage for OxyContin & 7 tablet strengths for individualization of dosing. He just thanked me & walked into a room. Spoke with Trish & asked her to encourage Dr Detwiler to attend the Butrans program, especially since it is not a presentation he has seen before. She agreed to help recruit him.
PPLPMDL0020000001	Cleveland	OH	44106	6/29/2012	showed dr william and emma,patient profiles,we discussed the points in profile,dr said he has patients like this but hasn't started them on Butrans.dr said a lot of patients just want their pills,we discussed patients starting on Butrans with short-acting opioids for supplemental analgesia,dr said ok he will consider that,asked dr if he can start 1-2 patients on Butrans within the week? dr said yes,we discussed PA criteria for Caresource patients.
PPLPMDL0020000001	Cleveland	OH	44109	6/29/2012	We discussed dr starting patients on OxyContin that are currently taking percocet but not controlled,showed dr OxyContin conversion guide we discussed examples of converting from percocet to OxyContin,asked dr to start a couple new patients on OxyContin,considering the lower dosage strengths,today and next week,dr agreed to do this,we discussed medicare and commercial insurance patients starting on OxyContin.
PPLPMDL0020000001	Cleveland	OH	44109	6/29/2012	talked to Toni,Nurse,about opioid experienced patients being appropriate for Butrans,showed initiation guide and asked Toni if she would share the info with dr7 Toni agreed,we discussed PA criteria for Caresource patients
PPLPMDL0020000001	Parma	OH	44129	6/29/2012	Quick call- Passed back Butrans patient profile booklet & reminded him of our previous Butrans discussion. Asked him to look through the 3 examples of possible Butrans patients & let him know I would follow-up to discuss it with him. He just thanked me & walked away.
PPLPMDL0020000001	Mayfield Heights	OH	44124	6/29/2012	Spoke to Steve and tech, Mike, about the movement of butrans. Mike said they still just have the one patient on butrans. One of Dr. Dews' patients. Steve said he had one patient come in with a script (a young male) who obviously did not have insurance for it because it would have cost him \$170. I explained the commercial plans covering butrans and the savings card to help. No recent changes in volume with oxycontin, no issues.
PPLPMDL0020000001	Cleveland	OH	44143	6/29/2012	I reminded doc of the Emma patient profile I talked about last time. I asked how high he goes on tramadol. He said it depends on the patient. I asked him to try one of those patients, with commercial insurance, on butrans instead of referring out. I explained that it is a CII which can be called in and refilled.
PPLPMDL0020000001	Uniontown	OH	44685	6/29/2012	Introduced new Butrans Experience Kit to Kelly and Cindy. Kelly said dr prescribed another Butrans yesterday and thinks the kits are perfect timing. Kelly agreed to introduce to dr and that she will be the one handing out kits to the patients after the prescription is written.

PPLPMDL0020000001	Cleveland	OH	44106	6/29/2012	showed dr emma and william,patient profiles,we discussed each point and showed clinical backgrounder-opioid experienced patients discussed this study,asked dr if he is treating patients like emma and william? dr said yes,dr said he likes Butrans,its a different option but not every patient wants to wear a patch for pain they just want their pills,we talked about patients having some pills for supplemental analgesia,showed fpi,when starting on Butrans,asked dr for his commitment to start more patients on Butrans,dr agreed.
PPLPMDL0020000001	Beachwood	OH	44122	6/29/2012	I asked Dr Barrett to tell me about his experience with Butrans. He said it has been good & that he really likes it. I asked if he finds it to be effective, even with the pain conditions he sees as a pain management specialist. He said yes & that he thinks narcotics tend to be over-prescribed, so he does not treat his patients the way that other pain management specialists do. He said patients seem to like it as well. I asked where he typically positions Butrans along the treatment algorithm. He said that is too complex to answer & that everyone is so different that he just treats each individual patient differently. He added that it really is a matter of insurance coverage. Discussed Butrans formulary coverage, BWC, & Caresource, including prior authorization requirements. He said in his office, he sees BWC almost exclusively. I asked him where he uses OxyContin. He said he does find it to be an effective, good medication for the right patients. He said he does not find opioids to be effective for some painful conditions, including osteoarthritis. He said he likes OxyContin for his patients who come to him taking 4 Percocet per day. He said it just makes sense. Reviewed managed care coverage.
PPLPMDL0020000001	Cleveland	OH	44109	6/29/2012	showed dr william,patient profile,showed clinical backgrounder opioid experienced patients and we discussed each point in profile,inclusion criteria and pain reduction scores,dr said data was impressive.asked dr if he has patients like william that he will see today and next week that he can start on Butrans? dr said probably so,dr said he has a couple patients on Butrans and will keep it in mind as an option for patients.we discussed initiation,titration and managed care coverage.
PPLPMDL0020000001	Akron	OH	44312	6/29/2012	Saw dr at window and gave quick Butrans message. Told dr to use the CIII, 7 day transdermal Butrans for his patients on short acting opioids that need additional analgesia. Dr said he will review the initiation and titration guide prior to our lunch
PPLPMDL0020000001	Cleveland	OH	44109	6/29/2012	showed dr emma,patient profile,we discussed each point and showed fpi discussing pain reduction scores in opioid experienced study,asked dr if this data was meaningful? dr said yes.asked dr if he had patients like emma that he could start on Butrans this week? dr said he will see who comes in and consider Butrans if he feels thats appropriate,we discussed initiation,titration and managed care coverage.told dr i will follow-up next week to hear about the patients he committed to start on Butrans,dr said ok
PPLPMDL0020000001	Brooklyn	OH	44144	6/29/2012	Spoke with floater pharmacist & Rhonda. I asked about Butrans stocking at this location & Rhonda said they do have it & have maybe one or two people who have been on it. She said none of them have given any feedback. Discussed dosing & titration every 3 days to a maximum 20mcg dose. Discussed savings opportunities for Butrans & OxyContin. They did not need any cards.
PPLPMDL0020000001	Barberton	OH	44203	6/29/2012	Showed dr the Individualize the dose piece and asked dr to use OxyContin q12h and to use all the doses as necessary and titration is 1-2 days. Dr said she uses the intermediate doses and likes the flexibility. Asked for Butrans business for her patients on NSAIDS and tramadol around the clock who need additional analgesia. Dr agreed to try Butrans.
PPLPMDL0020000001	Cleveland	OH	44106	6/29/2012	showed dr patient profiles,dr said he see's both types of patients emma and william,but hasn't started anyone on Butrans,dr said his patients taking short-acting opioids are controlled at the moment but he will keep Butrans in mind.i asked dr if he has anyone ever call in and ask for a refill earlier than he/she should? dr said sometimes,told dr that could potentially be a Butrans patient,we discussed initiation,titration and managed care coverage.asked dr if he will consider 1-2 patients like emma and william,to start on Butrans in the next week? dr agreed
PPLPMDL0020000001	Cleveland	OH	44113	6/29/2012	talked to Cynde,MA and Sade,Receptionist,as dr was with patients,we discussed opioid experienced patients,showed initiation guide and discussed dosage ranges for short-acting opioids where Butrans could be an option.we discussed initiation and titration and insurance coverage. I asked Cynde if she will recommend Butrans to dr,when she see's patients that are appropriate for Butrans? Cynde said she will remind dr.dr still has initial trial offer cards and patient info booklets but they dont know why dr hasn't started anyone yet on Butrans.
PPLPMDL0020000001	Mogadore	OH	44260	6/29/2012	Dr said he is continuing to write Butrans. I asked him how he assesses pain and he said through their quality of life and if they can do what they need to do. HE said he thinks pain scales are stupid because everyone comes in and sayd they are a 10. HE pointed to my study of opioid naive patients and said he knows we have to use pain scales so that we can prove the product works but that is not what is done in the practice. I said to him do you think something like Butran that could replace chronic Vicodin and he said he thinks it is something that can be written more but when you have a patient who you start on Vicodin because you think they are acute and then it turns out to be chronic, then the patient doesnt want to get off of Vicodin. I showed him inclusion data and I said to him I assumes he sees patients like this and they start on NSAIDS, right? HE said yes. I said then if you know the pateints condition at that point is chronic than why not start them on 5 mcg and he said what if they are just flare ups and I said I am talking about the patient in pain all day and he said then ,yes he would write BUTrans. I reviewed managed care with him with Butrans and said for the Vicodin patients he has option of Oxycontin.
PPLPMDL0020000001	Barberton	OH	44203	6/29/2012	Asked about recent OxyContin fills. Cathy said she would like to give me that info but she said she was too busy and to come back another time and maybe she can run a report. Gave her the OxyContin and Butrans dosing information.
PPLPMDL0020000001	Cleveland	OH	44143	6/29/2012	Quick call.....I discussed the butrans indication and the other key selling messages. I asked doc if he sees any opportunity for a product like butrans in his practice. He said not likely because he just does not have the right patient type. Thanked him for being honest.
PPLPMDL0020000001	Akron	OH	44311	6/29/2012	Spoke with Pharmacist Matt about Butrans. I asked how much he knew about the product. Matt admitted not to know much about it. Gave him all the key selling messages and showed him the placebo patch. Discussed application sites, steady state, and formulary coverage. Matt asked about BWC and Caresource because a lot of their patients go through these sources. Discussed coverage and criteria. showed pharmacy card and discussed e-voucher which the pharmacy has.<font color=blue><b><font>This sounds like a rather generic next call objective. I would hope you are going to "show" Butrans and OxyContin information. What can you provide the pharmacist on your next call that will bring value to his pharmacy?<font color=green><b>REICHCL's response on 07/10/2012<font>Provide Butrans no dose adjustment in renal or hepatic impairment and discuss patient information kits<font color=blue><b>CHUDAKOB added notes on 07/12/2012<font>Thanks Cliff. That is much better. Providing value on every call will give the pharmacists reasons to see you on every call.
PPLPMDL0020000001	Lyndhurst	OH	44124	6/29/2012	I tried to discuss the butrans key selling messages and ask how her patients were doing on butrans. She just said she has not prescribed it too much but things are ok. The office was busy so she had to go.
PPLPMDL0020000001	Lyndhurst	OH	44124	6/29/2012	Doc was very busy today and didnt have much time to talk. I reminded her of oxycontin and butrans after patients have failed on IR opioids. Left formally grids and confirmed no savings cards needed.
PPLPMDL0020000001	Cleveland	OH	44143	6/29/2012	I discussed the Emma patient profile and asked doc what he would do for patient that failed on tramdol. He said,'you asked me that already'. I told him I wanted to make sure of his answer and I wanted him to consider another option to referring to pain mgmt. He said ok and he will try to remember.
PPLPMDL0020000001	Cleveland	OH	44113	6/29/2012	dr said she's starting patients on Butrans every week,no problems or complaints from patients,dr said she's happy with Butrans.asked dr if she will continue prescribing Butrans for patients and refilling for those patients taking Butrans? dr agreed
PPLPMDL0020000001	Cleveland	OH	44106	6/29/2012	dr is rotating through pain management,met dr for 1st time,discussed 6 key selling messages for Butrans,dr said she'll review fpi,initiation guide and clinical study-left backgrounder for opioid experienced patients.told dr i will follow-up with her next week,dr said that was fair
PPLPMDL0020000001	Mogadore	OH	44260	6/29/2012	Dr said he started another patient on BUTrans and they are doing well, he said patient was on Vicodin prior. I showed him opioid naive study and showed him pain reduction and asked him if he uses pain scales and he said no, he doesnt think they are helpful. HE just wants to know if patient can do what they need to do to function. HE does think if his patient can have a pain reduction like the one in the study that is significant. I said do you see more patients in your practice who are on NSAids with chronic pain and he said he sees all 3 types of patients naive and not naive. I reviewed managed care with him and reminded of Oxycontin for the patients who are on higher doses of Vicodin
PPLPMDL0020000001	CLEVELAND	OH	44109	6/29/2012	talked to rod,pharmacist,showed OxyContin conversion guide we discussed conversion from short-acting opioids to OxyContin and starting patients on lower dosage strengths,we discussed 7 tablet strengths and Q12H dosing.Rod said he doesnt stock OxyContin but appreciated info.showed formulary grids,discussed insurance.no Butrans Rx yet either and not in stock
PPLPMDL0020000001	Beachwood	OH	44122	7/2/2012	Handed Butrans dinner invitation to Dr Myton-Craig & asked if she thought she could attend. Reminded her that she has thought of at least one specific patient who she thought could benefit from Butrans & let her know the program would be a good venue to learn about other patient types. She said she has a scheduling conflict with that date as she already has plans for an event. Positioned Butrans for appropriate patients who are seeking a medication change for their chronic opioid therapy. She said she has been thinking of it. Positioned OxyContin for appropriate patients beyond the Butrans range.
PPLPMDL0020000001	Cleveland	OH	44113	7/2/2012	dale said they are starting more patients on Butrans as dr shen,pain mgmt dr here,likes Butrans and they are getting good results from patients.we discussed pain reductions they are seeing with Butrans,patients are happy and dr is happy no complaints.asked dale if he will continue to choose Butrans for appropriate patients this week? dale said yes.showed initiation guide and visual aid for discussion.
PPLPMDL0020000001	Cleveland	OH	44109	7/2/2012	talked to dr about his patients taking OxyContin and how he is just continuing these patients on OxyContin,not starting new patients. we discussed 7 tab strengths of OxyContin for dr to titrate these patients appropriately and Q12H dosing,showed visual aid for discussion.asked dr to titrate patients dose of OxyContin,those currently on OxyContin,so that its Q12H dosing,dr said he will do that.we discussed medicare and commercial insurance coverage for OxyContin.we discussed appropriate patients for Butrans,showed emma and william,discussed patient profiles and asked dr if he will consider a couple patients this week to start on Butrans? dr said he will.
PPLPMDL0020000001	Parma	OH	44129	7/2/2012	Quick call- Handed back Butrans dinner invitation & asked Dr Taylor to attend. She said she would but she will be out of town, so she declined. Reminded Dr Taylor that she told me last time that she does want to prescribe Butrans & positioned it for appropriate patients who are seeking a medication adjustment for their moderate to severe chronic pain therapy. She said she will find a BWC patient. OxyContin reminder message.
PPLPMDL0020000001	Cleveland	OH	44104	7/2/2012	dr said she's starting more patients on Butrans and giving booklets to patients for review and then starting them on Butrans.showed dr emma and william,patient profiles,we discussed profiles and asked dr if she's considering patients like this for Butrans? dr said yes.asked dr if she will start a couple patients like emma and william this week on Butrans? dr said yes.we discussed PA criteria for Caresource patients
PPLPMDL0020000001	Akron	OH	44333	7/2/2012	Dr asked what she needs to prescribe for me? I told her she can always prescribe more Butrans and OxyContin. I discussed with her the Butrans Experience kits and told her that Elyse is on it and understands the program. I told her that she received her first patient survey today and she should review it. I asked dr to make sure she uses all her 5 kits. Dr asked about whether Butrans is Lipodic and I told her I would look into it.
PPLPMDL0020000001	Parma	OH	44129	7/2/2012	Handed Dr Chagin an invitation for the upcoming Butrans dinner program. He said he would attend & asked me to RSVP for him. Also followed-up about Butrans Patient Experience kit that I gave him. He said he hasn't given out any of the kits but will. I asked if there was a specific reason he hasn't given any out. He said he just hasn't been seeing many patients in pain lately. He said he would try to find some patients for Butrans.
PPLPMDL0020000001	Mayfield Heights	OH	44124	7/2/2012	Quick call....doc asked how everything is going with butrans. I told her everything is well and that butrans has recently gone from tier 3 to tier 2 on Medco plans. Explained that that should insure a \$15 co pay for those patients. Remeinded her of the oxycontin patient type and savings cards.
PPLPMDL0020000001	Cleveland	OH	44106	7/2/2012	showed patient profiles emma and william,we discussed profile points,asked dr if he will consider Butrans for these patient types this week? dr said he will consider it but doesnt have a lot of patients taking opioids,we discussed Butrans being once a week and a long-acting opioid,showed visual aid
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/2/2012	Asked dr about whats new with OxyContin. Dr said hes upset because the state is not paying for it. Asked about what commercial insurances his patients do have. Dr said medical mutual and they are even difficult to get covered. Discussed Med D patients and coverage with OxyContin. nothing else learned.
PPLPMDL0020000001	Parma	OH	44129	7/2/2012	Spoke with technician, Sarah, who said the pharmacist was unavailable. I asked if she or the pharmacist usually lets the patient know if there is a savings card available for his/her prescription. She said either of them. Discussed savings/trial program for Butrans & OxyContin savings card. Also reviewed e-voucher with her. She said she had heard of it. I asked if they ever tell customers what the co-pay will be before they fill the script & alert a patient about managed care coverage. She said they just fill the prescription as far as she knows. I asked her to leave information & my card for the pharmacists & she agreed.
PPLPMDL0020000001	Akron	OH	44313	7/2/2012	Spoke to Jason and Met Tom and discussed Butrans formulary wins. Discussed ESI commercial and Med D plans with average reduction in copays along with Medco. Jason said they see many patients with Medco and ESI and that is is important to their business. Reviewed copay cards for Butrans and reviewed OxyContin dosing.
PPLPMDL0020000001	Cleveland	OH	44113	7/2/2012	dr said she's starting more patients on Butrans,no complaints from patients and she likes Butrans.asked dr for her commitment to start more patients on Butrans this week,dr said she will do that.

PPLPMDL0020000001	Cleveland	OH	44106	7/2/2012	dr said she has 1 patient on Butrans,patient is doing well no complaints,showed patient profiles emma and william,we discussed these profiles and asked dr if she will consider Butrans for these patients this week? dr agreed
PPLPMDL0020000001	Mayfield Heights	OH	44124	7/2/2012	Quick call...reminded doc of the appropriate butrans patient type and let him know that butrans is now tier 2 on medco plans. I also reminded him that he said that coverage was not good with butrans. I explained that tier 2 means those patients can have a \$15 copay. He thought that \$15 was not bad.
PPLPMDL0020000001	Independence	OH	44131	7/2/2012	I asked Dr Sundaram how often he is the physician to start a patient on their first opioid. He said quite often. I asked how common it is for him to know up front that the patient will need treatment for that pain chronically. He said sometimes, while other times, the condition seems acute & ends up persisting or the condition simply is acute. Dr Sundaram paused & said that maybe a good place for Butrans would be there, instead of starting them on short-acting, for patients who have osteoarthritis. He went on to say that he has a lot of "older ladies" for whom he prescribes Vicodin or Tylenol with codeine 60 pills per month. He said he is going to keep an eye out for those patients & start them on Butrans instead. I reviewed Butrans managed care information with him & asked him to focus on patients like that, who are ages 40-60 & still working & therefore have access to Butrans at an affordable co-pay. Reviewed trial/savings program. I asked if this sounds reasonable. He said yes. I invited him to the upcoming Butrans dinner program & asked him to attend. He asked me to RSVP "yes" for him & put it in his phone calendar. Discussed OxyContin as a possible option for those older patients who he sees who are in moderate to severe pain.
PPLPMDL0020000001	Akron	OH	44333	7/2/2012	Asked dr about his recent usage of Butrans in his practice. Dr said he has used it a couple of times for a patient on vicoden and another on tramadol. Dr said the vicoden patient was on less than 15mg/day and initiated on 5mgc Butrans. Showed conversion scale to point out dosing, titration and conversions. Told dr that I would cover efficacy, safety and formulary coverage which I did using FPI, initiation and titration piece and formulary grid. Showed dr the safety profile and asked if anything stands out. Dr said no and that he would treat any rash or puritis depending on its severity if a patient stated as such. Reviewed OxyContin individualization of dosing and Q12h. Dr said he prescribes OxyContin Q12h not bid. Reviewed OTC brands.
PPLPMDL0020000001	Cleveland	OH	44113	7/2/2012	dr said she's starting patients on Butrans weekly, no issues and patients pain levels are being controlled with Butrans.asked dr if she will continue starting patients on Butrans? dr said yes she will.gave dr initiation guide,briefly discussed initiation and titration and focused on PA criteria for Caresource patients.
PPLPMDL0020000001	Fairlawn	OH	44333	7/2/2012	Spoke to Jessica and Sue about Butrans. Asked about Butrans stocking due to inventory. Jessica said they have a third party people doing the inventory and said she doesn't know. Reviewed dosing and initiation with opioid naive patients to initiate on 5mgc. Reviewed titration at 72 hours and initiation at 20mcg is not appropriate and is most likely a patient suitable to OxyContin. Gave ESI commercial and Med D plan information as well as Medco commercial at tier 2 status.
PPLPMDL0020000001	Cleveland	OH	44113	7/3/2012	talked to Cynde,MA and Sade,Receptionist,about appropriate patients for Butrans,showed initiation guide and discussed dosage ranges for short-acting opioids where Butrans could be an option.Cynde said dr hasnt started anyone on Butrans and she doesnt know why but she'll share all of the info with dr.we discussed initial trial offer cards for commercial insurance patients starting on Butrans.
PPLPMDL0020000001	Lakewood	OH	44107	7/3/2012	I showed the OxyContin FPI and that she can titrate every 1-2 days, using the 7 tablet strengths. She said that is good to keep in mind. I gave Dr the formulary grid for OxyContin and that most patients have access to OxyContin. I showed the patient profile for Emma and that this is an appropriate patients for Butrans. She said she will try it for patients like this.
PPLPMDL0020000001	Cleveland	OH	44113	7/3/2012	dr said he had a patient in mind for Butrans but forgot about it.dr said he will start 1 or 2 patients on Butrans,he just has to remember Butrans.showed dr initiation guide,we discussed short-acting opioid dosage ranges where Butrans could be an option,asked dr for his commitment to start 1 or 2 patients on Butrans within the week,dr agreed.
PPLPMDL0020000001	Lakewood	OH	44107	7/3/2012	I showed the main vis aid for OxyContin and that it is covered by insurance for most of his patients, he said he hasn't had too much push back for OxyContin. He said he has not yet started anyone on Butrans. I asked why and he said he just prefers to write for short acting and then would be more likely to switch to OxyContin. I showed Emma patient profile as a possible place to write Butrans and he said he will try to remember this patient.
PPLPMDL0020000001	Lakewood	OH	44107	7/3/2012	Quick call as Dr left for hospital. He said he thinks his Butrans patient is doing ok and it's working well. I asked if he has more patient like this one who was previously taking tramadol and he said he will keep an eye out for them. I asked if he would convert patient taking short acting oxycodone to OxyContin in the hospital and he said that he would.
PPLPMDL0020000001	Lakewood	OH	44107	7/3/2012	I showed the Butrans managed care info, and gave him the updates on ESI and Medco. I reviewed that his patients under 65 should have access to Butrans with no call backs. I asked if he would give Butrans another try and he agreed.
PPLPMDL0020000001	Lakewood	OH	44107	7/3/2012	I asked Dr if he has started any new patients like William on Butrans, he said that he tried but it was not covered and the patient was upset about the copay. I let him know that for Med D patients over 65, Butrans may not be covered. I redirected him to commercial insurance and Caresource. I reviewed the managed care with Elizabeth and she has been helping remind him about the savings cards and trial.
PPLPMDL0020000001	Lakewood	OH	44107	7/3/2012	I showed William patient profile and the reduction in pain scores in the FPI, I asked his thoughts and he said he thinks it is great. He said that for some people they do get those types of reductions, as long as they don't have skin reactions it seems to work well. I asked if he has continued to prescribe and he said that he just wrote for Butrans again last week. I spoke with his MA and she did not know which pharmacy the patient goes to.
PPLPMDL0020000001	Lakewood	OH	44107	7/3/2012	Spoke with Jean, we reviewed the medication guide for Butrans and how to teach patients about the proper use. I reviewed the managed care updates for ESI and Medco, and reviewed the managed care coverage for OxyContin for Med D patients.
PPLPMDL0020000001	Uniontown	OH	44685	7/3/2012	Spoke to Kim about Butrans and OxyContin. I asked if they have seen any Butrans recently and what their stock of it is currently. Kim said they have not seen any prescriptions recently and only have half a box of 10mgc. Discussed updated formulary coverage and trial offer cards along with copay cards. Asked about OxyContin prescriptions and Kim said they have most doses but not 15mg. She said they are seeing more Nucynta and Nucynta ER recently. Kim said OxyContin is still moving but has slowed a bit due to the Nucynta prescriptions.
PPLPMDL0020000001	Cleveland	OH	44106	7/3/2012	showed dr emma and william,patient profiles,we discussed each patient type,dr see's both types,asked dr whats next step in therapy for these patients? dr said refill short-acting opioids.asked dr if he will consider Butrans for patients like emma and william? dr agreed.
PPLPMDL0020000001	Cleveland	OH	44106	7/3/2012	showed dr emma and william,patient profiles,we discussed each patient type,dr see's both types,asked dr whats next step in therapy for these patients? dr said refill short-acting opioids.asked dr if he will consider Butrans for patients like emma and william? dr agreed.
PPLPMDL0020000001	Akron	OH	44333	7/3/2012	Asked dr about his Butrans usage recently. Dr said he is continuing to use it and initiates on the 5mgc and titrates to the 10mcg dose. Dr said the majority of his patients are controlled on the 10mcg and do not need the 20mcg. Updated dr on formulary coverages as well as discussing Medco with Marsha Fox.
PPLPMDL0020000001	Cleveland	OH	44103	7/3/2012	showed dr OxyContin conversion guide,we discussed dr converting her percoct patients to OxyContin,using low dosage strengths,discussed 7 tablet strengths and Q12h dosing.asked dr for her commitment to start more patients on OxyContin this week,dr agreed.focused on medicare patients starting on OxyContin,showed grid
PPLPMDL0020000001	Cleveland	OH	44103	7/3/2012	showed dr OxyContin conversion guide,discussed patients taking vicodin and percoct and using lower dosage strengths of OxyContin when converting,discussed 7 tablet strengths and Q12h dosing,asked dr for his commitment to start more patients on OxyContin this week,dr said he writes a lot of OxyContin,no problems. we discussed medicare patients starting on OxyContin,showed grid
PPLPMDL0020000001	Cleveland	OH	44113	7/3/2012	showed dr initiation guide,dr said he's not started anyone on Butrans yet but will at some point its taking him awhile to get started.we discussed appropriate dosage ranges for short-acting opioids where Butrans could be an option,we discussed initiation and titration of Butrans and discussed commercial insurance patients using initial trial offer cards.dr said he will start 1 or 2 patients on Butrans
PPLPMDL0020000001	Norton	OH	44203	7/3/2012	Opened call with dr discussing the case study patients on tramadol or vicoden. I asked dr Borges what he typically does for a patient on Vicoden who he is considering a dose adjustment? Dr said he would either place the patient on percoct or refer them to pain management. Discussed the solution of Butrans for that patient prior to the referral and how that solution would be appropriate so the patient will have been on at least 2 medicines prior to referral. Dr said it sounds like a fair idea but that he has not seen any patients back from pain management on Butrans. Discussed how Butrans is being used by the specialists and how many of their patients are on high doses of vicoden. How about giving them a good referral with a patient on Butrans? Dr said there is no downside to that solution. Recapped patient profile and discussed copay cards and trial offer.
PPLPMDL0020000001	Shaker Heights	OH	44122	7/5/2012	Dr Agarwal stopped briefly between patients & told me "yes, I know all about OxyContin & Butrans." Positioned Butrans for appropriate patients who he is referring to pain management as an option for patients while they are waiting to get in to see the specialist. He said he would keep that in mind & started to walk away. Handed him Butrans dinner invitation but he said he won't go & then walked away.
PPLPMDL0020000001	Cleveland	OH	44113	7/5/2012	dr is on vacation all week,i spoke with JoAnne,MA,about patients dr has on Butrans and how they are doing,JoAnne said patients are doing good on Butrans,no call backs/complaints and she's been getting PA's approved so thats helping,we discussed appropriate patients for Butrans,showed initiation guide and discussed PA criteria for Caresource patients.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/5/2012	I asked dr if he thinks he will prescribe Butrans? Dr said yes. I gave quick review of appropriate patients and asked which one seemed most likely? Dr said he has about an equal number of tramadol and vicoden patients. I told dr that the next time a patient like that comes in and complains of pain and a dose adjustment is necessary to initiate Butrans. Dr agreed to do so.
PPLPMDL0020000001	Cleveland	OH	44114	7/5/2012	talked to elaine about appropriate patients to start on Butrans,showed initiation guide and we discussed short-acting opioid dosage ranges where Butrans could be an option.elaine said she has some patients on Butrans and they are doing well and she'll continue starting patients on Butrans we discussed insurance coverage-focus on PA criteria for Caresource patients.asked elaine for her commitment to start more patients on Butrans,elaine
PPLPMDL0020000001	Akron	OH	44310	7/5/2012	Asked dr if she remembers Butrans? Dr sai yes but she wanted more information. I provided key selling messages. CIII, 7 day transdermal patch, reviewed initiation and titration guide. Explained appropriate patient types for Butrans and asked her if she has patients on tramadol or vicoden? Dr said she does and looked at the conversion scale and said that Butrans makes sense and she does have a few patients that where Butrans would work.
PPLPMDL0020000001	Parma	OH	44129	7/5/2012	Followed up with Dr Khooball regarding the patient who he had told me last time he was going to put on Butrans that day. He said that the patient's wife did pick up the prescription. I asked if they were able to fill it. He said he was not sure as he has not heard anything from the patient. He called the patient but he was not available. Dr Khooball said he would let me know how the patient is doing when he sees me again. Reviewed dosing & titration & let him know he can titrate the patient after 3 days to a maximum 20mcg. Dr Khooball said he wrote the scrip for the 10mcg. Discussed OxyContin q12h as an option for appropriate patients beyond the Butrans range. Invited him to upcoming Butrans dinner program. He said he plans to attend.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/5/2012	Reviewed key selling messages and asked if he had used Butrans yet? Dr said he doesn't know why because he thinks it is a great medicine. I gave dr the appropriate patients with case studies. I asked dr which patient he thinks is most appropriate for his patients. Dr said the vicoden patient he sees most often. I asked him when the vicoden needs a dose andustment and you know a change in therapy is necessary to use Butrans. Dr agreed to do so so.
PPLPMDL0020000001	Cleveland	OH	44109	7/5/2012	Dr asked about using Butrans for pregnant women. I explained from FPI about use in Pregnancy with category C.
PPLPMDL0020000001	Cleveland	OH	44113	7/5/2012	dr said he's starting patients on Butrans,no complaints from patients and will continue prescribing. asked dr for his commitment to start more patients on Butrans this week,dr agreed
PPLPMDL0020000001	Cleveland	OH	44113	7/5/2012	dr said he's not started anyone on Butrans recently but will try to on some patients again,showed initiation guide,we discussed initiation and insurance coverage,asked dr for his commitment to start a couple patients on Butrans within the week,dr agreed.
PPLPMDL0020000001	Westlake	OH	44145	7/5/2012	We reviewed the patient types of Emma and William, Dr said that he sees both of these in his practice. I asked which one he would start on Butrans and he said he would start either of them. He pointed out that with William he would probably want to prescribe hydrocodone for supplemental analgesia and just decrease the dose. I reviewed that he can use supplemental analgesia with Butrans. He said that he will prescribe Butrans for these types of patients. He asked about side effects, and what to do if the patch falls off and I showed the FPI. I showed the OxyContin main vis aid and the 7 tablet strengths.
PPLPMDL0020000001	Parma	OH	44134	7/5/2012	Dr Hernandez said he has still be using Butrans with success & has also been using OxyContin for a few patients. He said he has not been called by a pharmacy lately regarding his writing of Butrans, which he said he is pleased with. Dr Hernandez said he gives out patient information booklets & savings cards when someone doesn't have BWC or a government insurance. I told him it sounds like he is doing the right thing. I invited him to the Butrans dinner program but he said he will not attend because his wife is not invited. I told him this is due to company policy in adherence with PhRma guidelines.
PPLPMDL0020000001	Cleveland	OH	44109	7/5/2012	talked to dr about patients like emma and william,showed patient profiles and discussed,dr see's patients like this,asked dr if he'll start 1-2 patients within the week on Butrans? dr said he will,we discussed insurance coverage
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/5/2012	Told dr that i am going to provide three reasons why he needs to prescribe Butrans. Explained the opioid Naive trial graph about 60% of patients achieved pain reduction, Opioid experienced trial that 49% of patients on 20mcg patch achieved 30% pain reduction, and formulary coverage. Explained Medco, ESI, ESI Med D, BWC and trial offer and copay card. Dr said that it sounds like a no brainer and he will look for patients.
PPLPMDL0020000001	Independence	OH	44131	7/5/2012	Quick call - I passed back Butrans dinner invitation & asked Dr Reddy to attend. Re-capped Butrans with him, reviewing once weekly dosing in a CIII opioid analgesic. He said he doesn't go to dinners. Passed back OxyContin Medicare D coverage & pointed out favorable coverage. He just thanked me & walked away.
PPLPMDL0020000001					

PPLPMDL0020000001	Akron	OH	44310	7/5/2012	I gave dr 2 reasons why he needs to prescribe Butrans. Gave dr two clinical reasons one from each clinical trial. Dr said he agrees that Butrans is efficacious. He asked about formulary. Gave him all new formulary coverage and asked for his private prescription patients. Explained copy card and trial offer. I asked if he will prescribe. Dr said he will look for patients.
PPLPMDL0020000001	Cleveland	OH	44113	7/5/2012	talked to deb about patients she's starting on Butrans,deb said patients are doing well,she's happy with Butrans,loves Butrans and will continue starting patients on Butrans.we discussed PA criteria for Caresource patients and i asked deb for her commitment to start more patients on Butrans within the week,deb agreed to do this
PPLPMDL0020000001	Akron	OH	44313	7/5/2012	Spoke to Sarah about Butrans and OxyContin. I asked if they had it in stock and they had the 10mcg. Sarah said that they had a patient on the 5mcg from Western Reserve Pain mgt but have not seen the patient in a while. I reviewed Butrans CII, dosing, titration, no dose adjustments in hepatic or renal impairment. Discussed copy cards and provided updates on formulary coverage-<font color=blue><b>CHUDAKOB's query on 07/12/2012</b></font>-Cliff, when discussing Butrans in hepatic impairment, remember that we have no data on patients with severe hepatic impairment. When you say only hepatic impairment in your call notes, it implies all forms of hepatic impairment, which is incorrect.<font color=green><b>REICHCL's response on 07/16/2012</b></font>-I will be more specific going forward on this part of the FPI-<font color=blue><b>CHUDAKOB added notes on 07/18/2012</b></font>-Thank you!
PPLPMDL0020000001	Cleveland	OH	44109	7/5/2012	showed dr clinical bkgrounder-opioid experienced clinical trial,we talked about patients like william,patient profile and the inclusion criteria and pain reduction,dr said he has a couple patients on Butrans and is considering it for patients.discussed initiation,titration and insurance coverage,asked dr if he will start a couple more patients on Butrans within the week? dr agreed
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/5/2012	Handed Butrans initiation and titration guide and asked her to use Butrans this week when she sees a patient on an NSAID around the clock who needs additional analgesia. Dr said ok and said she has all the information I gave her on her desk. nothing else learned.
PPLPMDL0020000001	Akron	OH	44310	7/5/2012	Explained Butrans patient information guides. Clinton said he would hand them out to patients that had questions. I asked if he would hand them out when patients refill Butrans or get a new prescription. Pharmacy will hand them out. Provided clinical information from FPI about Butrans hepatic and renal impairment no dose adjustment.
PPLPMDL0020000001	Brooklyn	OH	44144	7/5/2012	Dr Deeb said he feels bad for not seeing reps anymore but he allowed me back briefly. I handed him a Butrans dinner invitation & reviewed Butrans once weekly transdermal dosing of buprenorphine, a CII opioid analgesic. He looked at the invitation & said he saw Dr Laham speak on Butrans but that he would be interested in hearing what Dr Moufawad has to say as well. I asked if he thought he could attend. He said he is going to do his best to be there.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/5/2012	stopped by lunch room for quick bite to eat. I asked dr how his Butrans patients are doing and if he had any questions? Dr said he patients are doing well but he is having trouble with Medicare. I asked him where he has used it. He didn't tell me specifically. Dr said he is using it when his patients are in chronic pain. I told dr that I was giving him w clinical reasons why he should prescribe more Butrans. Discussed opioid naive and experienced trials with 60% of patients getting pain relief and difference in % of patients getting 30% improvement in pain. Dr agreed that is does provide good pain relief. nothing else learned.
PPLPMDL0020000001	Independence	OH	44131	7/5/2012	Spoke with MA Kathi, who said Dr Pai was out of the office today. Reviewed Butrans core messages. She asked me if it is "better" than Percocet or OxyContin. I told her we have no comparative data & reviewed with her the appropriate Butrans patient type/range. Discussed Butrans as a CII opioid with abuse & addiction potential like other opioids. Also discussed OxyContin. She said that some patients are afraid to take OxyContin because of what they heard about it several years back about how abused it is. I told her OxyContin is abusable & addictive & said physicians should be cautious in prescribing. I asked her to be sure Dr Pai received the Butrans dinner invitation I gave her & she agreed.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/5/2012	DR Sable said that his patients are all doing quite well on Butrans but his problem with prescribing is his large Medicare population. Dr said his patients are telling him it is too expensive. I reviewed all formulary coverage and asked him to focus on his private insurance patients. I gave key selling messages and discussed no dose adjustments in renal or hepatic impairment. I also explained the Geriatric use from the FPI. Dr asked how the patch can be abused? I told him that Purdue does not have any data on that yet but Butrans is an opioid and it is abusable like any other. I asked dr if he has used Butrans first line since we spoke last because thats what he told me. Dr said he has and likes the side effect profile.
PPLPMDL0020000001	Akron	OH	44312	7/6/2012	Asked dr if he has initiated Butrans yet. Dr said he had not but wanted me to give Paula and Nadia the updated formulary coverage. I asked him if he believes in the product clinically? Dr said he did and said he would use it for his vicoden patients instead of dose adjusting. Spoke with paula and Nadia in depth about Butrans, formulary coverage and copy cards.
PPLPMDL0020000001	Akron	OH	44320	7/6/2012	I asked dr if he had prescribed OxyContin or Butrans since my last visit. Dr told me that he will most likely not start a patient on OxyContin but would for Butrans. I told dr two reasons why he needs to prescribe Butrans again. One is due to efficacy from the opioid experienced trial. 49% versus 33% reach 30% pain reduction. The other is insurance coverage with caresource and explained PA. The others are commercial coverage as well as BWC. Dr agreed to prescribe based on appropriate patients we discussed.
PPLPMDL0020000001	Hudson	OH	44236	7/6/2012	Spoke with MA Melissa & reviewed managed care update for Butrans with Medco. Also gave her OxyContin managed care grids for commercial & Medicare plans. She said she would give the grids to the MA's who work directly with the doctors. Gave her Butrans dinner invitations for each physician & asked her to be sure each of them received one. She agreed. She asked about Butrans. Reviewed dosing & appropriate patient type/range.
PPLPMDL0020000001	Akron	OH	44320	7/6/2012	Gave dr two clinical reasons why she needs to continue prescribing Butrans. Both are parts from each study with reduction in pain scores. I also gave dr updated insurance information and asked her if she still feels confident prescribing Butrans? Dr said she does and is continuing to look for patients we discussed to be appropriate
PPLPMDL0020000001	Berea	OH	44017	7/6/2012	Spoke with Adam, we discussed the use of supplemental analgesia and Butrans and he that most patients who they have on it, do get some short acting. We discussed the managed care for Butrans and the Medco and ESI 2nd tier status. He said that's a great thing and they see tons of these plans. We discussed that OxyContin is covered for Med D patients and it has been studied in geriatric patients.
PPLPMDL0020000001	Olmsted Falls	OH	44138	7/6/2012	I showed the patient profile for William, and that this patient would start on the 10mcg Butrans. I showed the FPI and data regarding the reduction in pain scores on the opioid experienced trial. He said that he will give it a try and asked about managed care. I reviewed the coverage and medco, ESI 2nd tier status. I reviewed that OxyContin is covered on most Med D plans.
PPLPMDL0020000001	Berea	OH	44017	7/6/2012	I gave the Dr Emma patient profile and asked if he would give out the kits this month to commercial patients, he said that he will do this.
PPLPMDL0020000001	Berea	OH	44017	7/6/2012	I showed William patient profile and that patients like this are appropriate for Butrans. He brought up managed care and I asked if this is really the only reason he has not tried it yet. He said yes, he does not want the hassle and patients to have to pay a high copay. I showed that most patients will have only \$15 copay for commercial and they can try it virtually free for the first month. He agreed to try a few patients on the trial. We reviewed that OxyContin may be an option for older patients that is covered on Med D.
PPLPMDL0020000001	Parma	OH	44129	7/6/2012	I reminded Dr Roheny how he had asked me during our last conversation who he should be looking for in a Butrans patient. I handed him patient profile booklet & opened it to "William". I walked him through the profile & told him this is an example of a patient who may be appropriate for Butrans. I asked if he has patients like that. He said he guesses he does. I asked why not try Butrans in some of them, if appropriate, especially if they are ages 40-60 with commercial insurance. He said he doesn't know. He said he thinks since it is summer time, patients will not want to try Butrans because they will want to be able to swim. I told him Butrans is designed to be worn for 7 full days & that patients can swim, bathe, & shower with Butrans. Advised him about heat warning. I asked if there was any other reason not to try it. He said he doesn't know & propped the profile up on his desk. I handed him a Butrans dinner invitation & asked if he could attend. He said probably not. Reminded him of OxyContin's 7 tablet strengths, offering individualization of dosing.
PPLPMDL0020000001	North Hampton	OH	45349	7/6/2012	Dr liked the fact that butrans is a CII pain medication. Like most other, she is frustrated with chronic pain medications and the patients. We kept the conversation focused on those with real chonic pain that is back up by a mri diagnosis. She said she could see herself using butrans for lower back pain. I handed her our study and she said she would read through it
PPLPMDL0020000001	Garfield Hts	OH	44125	7/6/2012	Dr Sadowski said he wrote Butrans today. I asked him to tell me about the patient. He said she had been on Percocet in the past, but most recently was taking only NSAID's but was complaining of still having back pain. He said he did not want to put her back on Percocet & she did not want that either. He said he told her about Butrans & she wanted to try it. I asked what dose he started her on. He said 5mcg. I told him it sounds like he did the right thing. He said she is an older patient (77) & has Medicare Anthem. I discussed the likelihood of a prior authorization. Also discussed this with Deena. I let them know I would follow-up next week to find out what happened with this prescription. They agreed. I invited Dr Sadowski to the upcoming Butrans dinner program. He said he will start coming to programs when his daughter moves out of the house later this year. I promised to invite him to more programs in the future. Discussed favorable coverage for OxyContin on Medicare plans.
PPLPMDL0020000001	Independence	OH	44131	7/6/2012	Roman said he wants to hear more about Butrans, but he wants to hear it from other practitioners, preferably Dr Nickels' staff. I handed him invite for upcoming program & asked him to attend. He said he & Lisa will be there & asked me to RSVP for them. He said he will not use Butrans until his questions get answered but said he knows I can't answer them because they are off-label. I told him he is correct & that I can only speak to Butrans labeling & FPI. I asked if he has started anyone on OxyContin this week. He said yes & that he always writes it.
PPLPMDL0020000001	Uniontown	OH	44685	7/6/2012	I asked the Dr if he had a chance to review the Butrans initiation and titration guide I left the last two visits. Dr said that he had not. I gave the dr the opioid experienced trial. Dr did say he would review. I asked if I could get time on next visit to discuss Butrans. Dr said maybe.
PPLPMDL0020000001	Berea	OH	44017	7/6/2012	Spoke with Nikki, they have not seen scripts from Kavlich or Raslan, she didn't know if they still had a few patients on Butrans. We discussed the Medco managed care update and trial offer. I showed the OxyContin FPI and that Drs can titrate ever 1-2 days if needed and there are 7 tablet strengths.
PPLPMDL0020000001	Akron	OH	44310	7/6/2012	Dr said that he prescribed a Butrans yesterday and two within the last two weeks. I asked him about the patients insurance plans and analgesia before Butrans. Dr said the patient yesterday was on vicoden and had Medicare part D. I explained to the dr about insurance coverage and he said he understands it may be difficult or too expensive for the patient. We discussed titration at 72 hours and max dose at 20mcg. Dr said he will keep me in the loop about the patient.
PPLPMDL0020000001	Akron	OH	44319	7/6/2012	Reintroduced Butrans with pharmacist and asked if they still have it in stock. Pharmacy does have Butrans 5mcg in stock and have 2 patients on it. I asked by which physicians and they would not provide physician information. Asked about OxyContin and was told that they do fill it regularly and have all doses on shelf, at least one bottle. Gave initiation and titration guide.
PPLPMDL0020000001	Uniontown	OH	44685	7/6/2012	I asked dr about his recent prescription of Butrans. Dr said that the patient has a lot of physical and mental pain with many comorbidities. Dr placed patient on 5mcg patch and then needed to titrate to 10mcg patch. Patient said she seems like she is doing a little better but that was after 1 1/2 weeks on Butrans. Dr said he is going to give it more time. I told him that the patient can take short acting opioids for supplemental therapy. Further explained the Butrans Experience Program. Dr and Kelly said they will use.
PPLPMDL0020000001	TWINSBURG	OH	44087	7/6/2012	Spoke with pharmacist, Amy, & asked how she sees OxyContin being dosed. She said usually she sees it dosed q12h, but sometimes physicians prescribe it q8h. She said she tells the physicians that OxyContin should be written q12h, but usually the doctor keeps it the same. I told Amy she is correct in advocating for the q12h dosing interval as that is the only way it has been studied & is recommended. Reviewed appropriate Butrans patient type. She said she has yet to see any utilization there.
PPLPMDL0020000001	Lakewood	OH	44107	7/6/2012	I showed patient profiles William and Emma, I asked which patient they see the most often and he said they are probably more like William. He said that he thinks that Butrans would be better used in a patient like Emma due to the fact that patients do not want to give up their pills or try anything else. He said that he has tried to give Butrans but the patients tell them they don't want it they just want to keep taking their pills. We reviewed Emma and going to Butrans before even giving the patient the option of vicodin and he said he will try to do this. We reviewed the use of supplemental analgesia with Butrans. I showed the FPI and pain score reduction for patients during open label. I asked if he would at least give the patients the option to try Butrans and he agreed.<font color=blue><b>CHUDAKOB's query on 07/15/2012</b></font>-Andrea, perhaps discussing the fact that we are suggesting Butrans when what they are in is no longer controlling their pain. Why would a patient want to continue the same medication when it is not working? Sometimes I wonder if they think we are trying to get them to convert everyone on short-acting opioids.<font color=green><b>HOLUBA's response on 07/16/2012</b></font>-Thanks, I agree.<font color=blue><b>CHUDAKOB added notes on 07/20/2012</b></font>-Thanks
PPLPMDL0020000001	Akron	OH	44312	7/6/2012	Gave comprehensive Butrans presentation to both doctors. Explained all key selling messages, pain score reductions from FPI, no dose adjustments, pregnancy category C, application sites, case studies, patch technology, AE's in opioid experienced, and copy cards and cost. Dr said that Butrans seems like a product that has a place for sure. Both drs said that they use both tramadol and vicoden and that Butrans seems like a good option for an extended release product.
PPLPMDL0020000001					

PPLPMDL0020000001	Akron	OH	44319	7/6/2012	Gave an abbreviated version of key selling messages at window. Told dr about Butrans being the first and only CIII, 7 day transdermal patch for moderate to severe pain. Showed dr the placebo patch and asked if he had patients needing a dose adjustment on tramadol or vicodin. Dr said he did and will review information.
PPLPMDL0020000001	Akron	OH	44312	7/6/2012	Gave comprehensive Butrans presentation to both doctors. Explained all key selling messages, pain score reductions from FPI, no dose adjustments, pregnancy category C, application sites, case studies, patch technology, AE's in opioid experienced, and copy cards and cost. Dr said that Butrans seems like a product that has a place for sure. Both drs said that they use both tramadol and vicodin and that Butrans seems like a good option for an extended release product.
PPLPMDL0020000001	Akron	OH	44305	7/6/2012	While speaking with Cindy(RN) we caught dr in hallway to ask if he has prescribed Butrans. Dr said no but he has the copy cards in his office. I reviewed the dosing, CIII, 7 day transdermal patch and asked him if he thinks it will work in his practice for his patients on vicodin who need a dose adjustment. Dr said he intends to use it and said he will further review the information. Cindy said they needed additional OxyContin and Butrans copy cards in the main sample closet.
PPLPMDL0020000001	Akron	OH	44319	7/6/2012	I asked dr if he believes Butrans has a place in his practice? Dr said maybe. I told dr that there are two reasons why he needs to prescribe Butrans. Explained Butrans efficacy from FPI and gave new formulary info. I asked dr to prescribe Butrans again for his patients on tramadol or vicodin who need a dose adjustment.
PPLPMDL0020000001	Lakewood	OH	44107	7/9/2012	I showed the main vis aid for OxyContin and that he has 7 tablet strengths to choose from to individualize the dose for patients. I showed that FPI and that he can titrate every one to two days with OxyContin. He agreed to continue to prescribe.
PPLPMDL0020000001	Beachwood	OH	44122	7/9/2012	Spoke with Allison, MA, & Ted, nurse, & reviewed Butrans appropriate patient type/range. They both said they don't think Dr Malkamaki has used Butrans. I told them that in past discussions with Dr Malkamaki, he has expressed true interest in prescribing. Showed patient profiles & asked them to give the booklet to Dr Malkamaki. They agreed. Discussed broad OxyContin formulary coverage.
PPLPMDL0020000001	Solon	OH	44139	7/9/2012	Quick call- Caught Dr Zaidi at the window. He said he is finding that he is still writing more OxyContin. He said everything is going fine with it. I passed back a Butrans dinner invitation & asked him to attend. He said that he will talk to his nurse, Julie, to figure out if one of them is able to attend.
PPLPMDL0020000001	akron	OH	44333	7/9/2012	Dr Bashor gave me the Butrans patient information. Male patient in his 70's with bone cancer. Patients was taking 5 vicodin a day for pain prior to initiating Butrans 10mcg. Patients pain is reduced significantly and is only paying \$30 with Medicare and AARP secondary. Dr said he is continuing to look for more patients to fit the Butrans profile. Provided dr and office staff with updated formulary coverage.
PPLPMDL0020000001	Lakewood	OH	44107	7/9/2012	Spoke with Kim, we reviewed the managed care updates for Butrans with ESI and Medco. She said she sees a lot of both and it's good to know. We discussed that OxyContin may be an option for patients with Med D coverage and that OxyContin has been studied in geriatric patients.
PPLPMDL0020000001	Lakewood	OH	44107	7/9/2012	I showed the FPI for OxyContin and that OxyContin has been studied in geriatric patients and it is covered on Med D plans. He said that it is usually his first choice for a long acting. I showed Emma and that patients can start on Butrans after taking tramadol around the clock. He said he will try to start those types of patients.
PPLPMDL0020000001	BEACHWOOD	OH	44122	7/9/2012	Spoke with Bill, pharmacist, who said he still has not seen any Butrans prescriptions. I asked if he could suggest any physicians who may be interested in hearing more about this once weekly transdermal CIII opioid analgesic. He said not that he could think of. Discussed patient type & savings program. Offered cards, but he said they did not need any since they have not seen any activity for it. Offered OxyContin savings cards. He said they have
PPLPMDL0020000001	LAKEWOOD	OH	44107	7/9/2012	Spoke with Ronnie, we discussed the managed care wins for Butrans, ESI and Medco. We discussed the saving programs for Butrans and OxyContin. I reviewed the OxyContin FPI and that it has been studied in geriatric patients and is also covered by most Med D plans.
PPLPMDL0020000001	Copley	OH	44321	7/9/2012	Asked dr the type of results he gets with OxyContin? Dr said he didnt have time for discussion and to set up a lunch. Handed him the Butrans initiation guide. nothing else learned
PPLPMDL0020000001	Lakewood	OH	44107	7/9/2012	I reviewed the managed care updates for Butrans with ESI and Medco, he said that he will give it another try.
PPLPMDL0020000001	Lakewood	OH	44107	7/9/2012	I showed Emma profile and the FPI regarding the pain score reduction in the clinical trials. He said that he will give it a try on any patients like this with commercial insurance. I reminded him to give them a savings card. I reviewed that OxyContin may be an option that is covered on Med D.
PPLPMDL0020000001	Parma	OH	44129	7/9/2012	Quick call- Dr Taylor saw me at the window with Mary & said she is still "keeping Butrans in mind", looking for patients with BWC & has written some OxyContin lately. She said she had to see patients & then walked away. I asked Mary if she gets calls from patients requesting refills of medications like Vicodin or tramadol from the same patients over & over. She said it does seem to happen quite a bit. I reviewed Butrans patient types with her & asked her to help me remind Dr Taylor. She said she would do her best. Left OxyContin & Butrans formulary grids.
PPLPMDL0020000001	Independence	OH	44131	7/9/2012	Quick call- Saw Dr Trickett at the window. I followed-up again regarding the Butrans Patient Experience Program & inquired as to whether she has given out any of the kits. She said she has not, but she will. I asked her to please give them to appropriate, eligible patients as soon as possible so she can start seeing the benefits of the program. Also passed back Butrans dinner invitation & asked if she could attend. She said probably not as it is difficult to get to evening events during the summer because of her kids. OxyContin savings card message. She said she didn't need any at this time.
PPLPMDL0020000001	Parma	OH	44134	7/9/2012	Dr Mandat said that he is still putting more patients on Butrans with success. I reminded him of previous discussions when he has told me that he generally uses Butrans for patients for whom 4 tramadol is not controlling their pain. He said this is correct. I asked if he ever has tried it for a patient who is on Vicodin. He said he has more that have come from tramadol, but he does have a few that had been on Vicodin. He added that he finds that he has to use a higher dose of Butrans for those patients. Showed chart in initiation guide. I asked if he has been writing refills for Butrans or giving patients new prescriptions every month. He said he does write refills & titrates if necessary. I asked what typically causes him to refer patients to pain management. He said it is a matter of patient age for him. He said he refers younger patients & feels more comfortable with treating patients who are older himself. He said he worries about abuse/addiction. I told him he is right in being cautious & added that he should use that same caution with Butrans. He asked what is happening with the OxyContin patent as he has been hearing about it recently in the news. I told him I do not know. He said he uses OxyContin for his severe pain patients in nursing homes or hospice. Also discussed Senokot-S for opioid-induced constipation. He said he just got the samples of the various OTC products I sent. I invited him to the Butrans program but he declined, saying he no longer attends them
PPLPMDL0020000001	Akron	OH	44333	7/9/2012	Spoke to Donna about Butrans and OxyContin. I asked Donna if she has seen any Butrans prescriptions. Dr said no but maybe Jim has. Donna and Jim split the hours per week. I reviewed dosing, CIII, and titration. Steady state at 72 hours. I asked Donna about what they see for OxyContin prescriptions. Donna said they see too much OxyContin being filled. I asked if they are refills mostly or new prescriptions? Donna said they see a lot of new patient starts and they fill a good amount of 10, 40 and 60mg. I asked if they are prescribed Q12h or bid? Donna said they see a few dosed bid but most are Q12h. Left OxyContin dosing and conversion guide.
PPLPMDL0020000001	Beachwood	OH	44122	7/9/2012	Spoke with Ashley, pharmacist, who said she has noticed she has been filling a lot of Butrans prescriptions lately. She said they were filling a lot, then it dropped off, but now it has picked back up again. I asked what doses she sees most frequently. She said all of them. Discussed titration & ability to take supplemental analgesia. Also reviewed savings program, but she said they were stocked on all savings cards right now. I asked how she sees OxyContin being dosed. She said generally q12h. I asked if she talks to patients about the importance of adhering to the q12h dosing interval. She said sometimes, but added she would start doing so more frequently.
PPLPMDL0020000001	Fairlawn	OH	44333	7/9/2012	Spoke to Kay and Gary(Pharmacist) about Butrans and OxyContin. Gary said they have the 5 and 10mcg in stock and have seen prescriptions from Dr Shah. Reviewed initiation and titration guide. CIII, 7 day transdermal patch, titration and no dose adjustments in renal or hepatic impairment. OxyContin dosing and conversion guide
PPLPMDL0020000001	Westlake	OH	44145	7/9/2012	I showed the main vis aid for OxyContin and that he can individualize the dose using the 7 tablet strengths. We discussed that OxyContin may be an option for geriatric patients and I showed the FPI and managed care for Med D. I reviewed the Butrans managed care wins. He said that he would like there to be a 15mcg dose. I let him know that Butrans is approved to be able to titrate from the 10 to the 20mcg dose. He said that he thinks that for some patients it can create side effects. I showed the clinical trial to show him the results after patients were force titrated to the the 20mcg. I asked his thoughts and he said it's fine, he just may use 2 patches to make a 15mcg dose. I let him know that this is not approve and would be off label as we have not studied it this way.
PPLPMDL0020000001	Akron	OH	44333	7/9/2012	I asked dr to prescribe more Butrans for those patients in her practice that may require a dose adjustment on tramadol or vicodin. Dr said she tries not to use Tramadol but will use Butrans in place of it if the patient is in chronic pain. Dr said she received a second report from t he patient enrolled on the patient experience program but has not reviewed it yet. Asked dr for OxyContin usage for her patients that are appropriate for a Q12h individualized dosing.
PPLPMDL0020000001	Parma	OH	44129	7/9/2012	Passed back Butrans program invitation & asked Dr Laluk if he could attend, encouraging him to do so as it would be a great opportunity for him to learn more about Butrans patient types & speak to area physicians & specialists about it. He said he does not go to programs, thanked me anyway, & walked away. Spoke with Linda, MA, & reviewed patient types & OxyContin formulary coverage. Gave her grids.
PPLPMDL0020000001	Fairlawn	OH	44333	7/9/2012	Gave more specific Butrans information to pharmacy; steady state, no dose adjustment in elderly, renal or hepatic impairment, patch technology.
PPLPMDL0020000001	Cleveland	OH	44130	7/10/2012	Dr Fedorko had a medical student with him & asked me to tell the student about my products. Delivered Butrans core messages & alerted them to box warning. Reviewed Butrans appropriate patient type/range & discussed OxyContin q12h, with 7 tablet strengths, as a possible option for appropriate patients beyond the Butrans range. Dr Fedorko told the student he likes Butrans. Discussed importance of appropriate patient selection & advised that Butrans, a CIII opioid, does carry abuse & addiction potential. Dr Fedorko added that all opioids carry that risk. I invited Dr Fedorko to the dinner program. He said he might attend & asked that I remind him next week. I Window call...I showed doc the patient profiles of Emma and William and explained that these are the appropriate patient types for butrans. He asked about medicaid coverage. I explained that commercial plans are mostly covering butrans with Medco and Express Scripts at a preferred branded co-pay. Also explained the savings with the copy card. Micki said she had savings cards as they dont really have a lot of patients that can use them.
PPLPMDL0020000001	Cleveland	OH	44130	7/10/2012	Spoke with pharmacist, Colleen, who said they do have a patient or two on Butrans now. She said she remembers dispensing it. Reviewed appropriate patient type & showed her information on trial/savings cards. Also discussed e-voucher for automatic monthly savings, but let her know patients would need the actual card for trial offer. Also reviewed eligibility requirements. Gave her a package of cards. Also gave her information on OxyContin savings program & gave her one package of cards. She said some co-pays have gotten so high that she is always happy when she can offer savings to a patient.
PPLPMDL0020000001	Cleveland	OH	44130	7/10/2012	Spoke with Stephanie, pharmacist, who said they no longer have any customers on Butrans. I asked if she knows why people discontinued. She said she does not know. Reviewed appropriate patient type/range & dosing. Also discussed trial/savings program & e-voucher for those eligible. Offered OxyContin savings cards, but she said they still have some. She added that she just gave one to someone last week & it really helped the patient out. Doc said he seriously thought about prescribing butrans the other day, but ultimately didn't. I asked him why he didn't write the script. He said he was busy and thought it would be a hassle to get it covered and explain it to the patient. He also did not remember what the patient was on. I discussed the formulary coverage with commercial plans and preferred status with Medco and Express Scripts. I also explained the patient info guides to provide to patients getting a script of butrans. He thought that might be helpful. I discussed the appropriate patient types such as Emma and William. He asked about how to write the script. I showed him the sales aid on how to write the script. He tends to max out patient on tramadol at 400mg. I explained the starting dose of 10mcg as likely. He said he will try it - he has a patient that alternates between taking vicodin and percocet and does not want to take many pills. I reminded him of the oxycontin patient type and to consider oxycontin for patients failing on higher doses of IR opioids.
PPLPMDL0020000001	Cleveland	OH	44130	7/10/2012	Showed Dr Diab 7 OxyContin tablet strengths & reviewed broad formulary access. Also gave him Butrans dinner invitation. He said he can't go because he works too late on Tuesdays. I reminded him of his past interest in Butrans & let him know that coverage continues to improve, most recently gaining preferred status on Medco. He said that was good. I asked if he thought he would be willing to try writing it for some appropriate patients with the improved coverage. He said he thinks so.
PPLPMDL0020000001	Beachwood	OH	44122	7/10/2012	Gave Dr Warren a Butrans dinner invitation & asked if he thought he could attend. He said he gets out late from work on Tuesdays, so if he could come, he would be late. He added that he would be interested in hearing Dr Moufawad speak. I reminded him of previous conversations when he has told me that he has a lot of interest in Butrans. Reminded him that he has said that he would like to try Butrans for patients who cannot tolerate NSAIDs or those who he is backing down from higher doses of opioids. He said this is true. He asked if there is only one dose. I showed him the 3 doses on sales aid. Discussed dosing for the two patient types we had been talking about. Reminded him of once weekly dosing & CIII opioid. He asked if it will really stick for a week. I told him Butrans was designed to stay on for a full 7 days & reviewed taping edges with first aid tape if necessary or covering with Bioclusive or Tegaderm. Reviewed managed care coverage & reminded him of trial/savings program for eligible patients. I asked what he or his patients have to lose by simply trying Butrans. He said nothing. I asked if he would prescribe & he agreed. Discussed OxyContin as an option for appropriate patients beyond the Butrans range. Reviewed q12h dosing. He said that is how he writes it.



PPLPMDL0020000001	Westlake	OH	44145	7/10/2012	Quick call, I showed William and reviewed that he said he may need supplemental analgesia for patients like this. We discussed that this could be an appropriate OxyContin patient as well.
PPLPMDL0020000001	Cleveland Hts	OH	44118	7/10/2012	Spoke to James Patterson about the movement of butrans and oxycontin. He said he has seen some butrans but not often and it usually has to be reordered. I asked if that meant he does not have any regular customers on it. He said he could not tell. I discussed the positioning and the dosing of butrans. He said they see plenty of oxycontin and oxycodone. There are no issues with either. Provided dosing guides for both products.
PPLPMDL0020000001	Westlake	OH	44145	7/10/2012	Spoke with Dr and Sam, I asked if they have been able to find patients like Emma to try for Butrans. Sam said that she will help to remind him. Dr said that he will try to give it a try if it is covered on managed care. I reviewed the ESI and Medco coverage.
PPLPMDL0020000001	Parma	OH	44129	7/10/2012	Quick call- Invited Myra to Butrans dinner program. She said she will attend & will bring another PA. She said she has not yet spoken with the OAPA about doing a Butrans dinner program, but she will at her earliest ability. She said she didn't have time to talk today but added that she has still been trying Butrans.
PPLPMDL0020000001	Euclid	OH	44119	7/10/2012	I reviewed the butrans patient type and asked doc if insurance coverage keeps him from trying butrans. He said his patients can't afford it. I asked him if he participates in Medco. He said yes. I asked him if he participates in Express scripts. I told him that now butrans is now at a preferred branded copay and that patient would those plans can expect to pay \$15 with a savings cards. He said that that's better.
PPLPMDL0020000001	Garfield Heights	OH	44125	7/10/2012	Quick call- Caught Dalbir at the window & passed back Butrans dinner invitation. I reminded him of his prior interest in attending a program to learn more about Butrans & the types of patients he may want to treat with it. I asked if he thought he could attend. He said he was not sure, but if he does not have other plans, he will go. I asked him to register ASAP. Started to discuss Butrans dosing, but Dalbir said he had to go see patients.
PPLPMDL0020000001	Euclid	OH	44132	7/10/2012	Quick call....Reminded doc of the butrans indication, CII status, and once weekly application. I asked her if she sees any merit to a product like butrans. She said yes but not sure if she has the right patients. I described the patients that may be taking tramadol and failing on their current dose. Provided a patient profile guide and formulary grid.<font color=blue><b>CHUDAKOB's query on 07/20/2012</b></font>Does she have the right patients? If the answer is yes, then your charge is to help her fully understand the right patient type. She gave you her objections. Before you move on with any other objective make her feel comfortable with this one first. What do you think?<font color=green><b>SIMERTOC's response on 07/25/2012</b></font>I think you are right need to make sure I have addressed the first concern.<font color=blue><b>CHUDAKOB added notes on 07/25/2012</b></font>Thank you for taking the suggestions. I believe you will move the call forward faster.
PPLPMDL0020000001	Westlake	OH	44145	7/10/2012	I showed Dr the OxyContin FPI and that he can titrate every 1-2 days with the 7 tablet strengths. He said he does think it is easy to adjust the dose for patients. I asked if he would think of Butrans before patients are taking higher doses of opioids and he said he is trying to prescribe Butrans more often.
PPLPMDL0020000001	Cleveland Hts	OH	44118	7/10/2012	Spoke to Rola about the movement of butrans. She said she really has not seen any scripts for it but she is not sure if the other pharmacist(s) has. She said she did just read about butrans recently in CE material so the product info was fresh in her mind. I explained the positioning of butrans and the other key selling messages. Provided initiation guide as a reference for application and rotation.
PPLPMDL0020000001	Cleveland	OH	44112	7/10/2012	I showed doc the oxycontin conversion guide and reminded him of the 7 dosing options for flexible dosing. I asked him to consider 15, 30, 60mg instead of increasing the frequency to 3x/day. He said he tries not to do that. I discussed the preferred branded coverage for many Med D plans which means affordability for his elderly patients. I reviewed the butrans selling messages as an option for patients with commercial insurance. He said,"good point."
PPLPMDL0020000001	Euclid	OH	44117	7/10/2012	Quick call....I reminded doc of our recent discussion of butrans and oxycontin and that that he said he would try butrans. Gave him an initiation guide and asked him to try 10mcg for a patient failing on 300mg of tramadol.
PPLPMDL0020000001	Parma	OH	44129	7/10/2012	Quick call- Dr Ortega said he has been starting some patients on Butrans & has had good results. I asked what feedback he has gotten. He said just that it is working. Invited him to upcoming program. He said he would attend & put it in his phone's calendar. Dr Ortega said he would like to hear Dr Moufawad speak on Butrans. Discussed savings offers for Butrans & OxyContin. Dr Ortega said he probably doesn't go through them very fast because he mostly sees BWC patients.
PPLPMDL0020000001	Akron	OH	44333	7/10/2012	good discussion about Butrans indication and its MOA. Dr asked about Butrans MOA and claimed he was not aware Supplemental analgesia could be used with Butrans. Read section 2.4 from FPI about the use of supplemental analgesia. Discussed the patient types he is prescribing Butrans for. Dr said his older patients are the ones he is primarily prescribing for. Dr said that more often it is the younger patient who want to keep their pills. Further discussed patient types with case studies, copay cards and new formulary coverage.
PPLPMDL0020000001	Independence	OH	44131	7/11/2012	I asked Dr Jack how his treatment of patients in pain has changed over the last few months. He said he probably doesn't treat as many patients for their pain as he used to. I reminded him how he told me during one conversation that it was not accepted to write OxyContin anymore. He said that is true & he doesn't write any anymore. I asked why not. He said the constant negative media attention has given it a bad name. He said he constantly sees news & reads articles reporting on the dangers of it. He went on to say that Ohio's house bill did make some restrictions, but it has not severely limited him in his practice. I asked if it is only OxyContin that he will not write anymore or if there are others. He said OxyContin has the worst reputation. He also said he realizes that it is a good, effective medication when dosed properly & given to the right patients. He asked if Butrans was CII. I told him he is correct. I asked him, given his practice & patients, what it would take for him to prescribe Butrans for some appropriate patients. He said he thinks he will now. I asked why now & not for the last 2 years when he has been telling me he would write it. He said he needs something to fill the gap in his practice made by his decrease in writing strong narcotics. I asked what type of patient he sees himself writing for. He said ideally a new patient who hasn't been on an opioid. Reviewed dosing for different types of patients. He said he would write.
PPLPMDL0020000001	Beachwood	OH	44122	7/11/2012	Spoke with nurses Lauren & Jackie & reminded them of my recent lunch when we discussed Butrans & OxyContin. Reminded them of the interest that they had expressed as well as Dr Dimitri. I asked if they have noticed any utilization of Butrans since that discussion. They said they have not noticed any Butrans being written. Discussed savings & patient information booklets. They said they still have enough of all materials. I reviewed Butrans & OxyContin patient types with them & asked them to remind the physicians, including Dr Dimitri, to use each when they identify an appropriate patient. They agreed. Gave them Butrans dinner invitation & asked them to post it in an area for all of the physicians. They agreed. Let them know I would follow-up.
PPLPMDL0020000001	Bedford	OH	44146	7/11/2012	Dr Moufawad said he did not have much time today. He said he is still writing Butrans for his appropriate patients. He also said he has been writing OxyContin for some patients as well. Confirmed details of next Tuesday's program. Spoke with MA Christina & reviewed managed care information, letting her know Butrans is now preferred on Medco.
PPLPMDL0020000001	Bedford	OH	44146	7/11/2012	Spoke with Steve, pharmacist, who said they do stock Butrans now. He said he can think of one person who is on it. I asked if he has gotten any feedback from him/her regarding Butrans. He said he thinks the patient likes it, but he hasn't seen him lately, so he is not sure if he is still on it. Discussed appropriate patient type & dosing. Steve said they do stock OxyContin as they have a handful of patients who are on it regularly.
PPLPMDL0020000001	Akron	OH	44302	7/11/2012	Discussed Butrans and OxyContin with Dr Petrus and Rhonda his Pharm D. I asked Dr about his recent initiation of Butrans. Dr said it didn't work for the patient and he initiated on the 10mcg patch. The patient was female and on 40mg of hydrocodone a day. Dr said that the patient claimed she did not get any additional analgesia from Butrans. I asked if the patient was titrated to 20mcg and he said no because the patient requested to stop treatment. I reviewed case studies with dr and he said he will continue to look fort patients on vicoden or percocet who he thinks need to be on a long term treatment for pain. Most of his patients are in severe cancer pain and Butrans may not be appropriate. Dr said he likes the fact that it is 7 days 4 patches a month and some patients will find it to be nice to only have to remember 1 patch per week. Discussed formulary coverage with new plans especially Medco as he is the #1 customer with Medco patients. Reviewed copay cards and trial offer. Dr said he will still look for appropriate patients.
PPLPMDL0020000001	Bedford	OH	44146	7/11/2012	Dr Haddad asked me what was going on with OxyContin. I asked what he meant. He said he just read an article today about studies with OxyContin in children in effort to extend the patent by 6 months. I told him I did not know about this. He said he thinks OxyContin is a good, effective medication for the right patients & could see why some physicians would want to use it on younger patients in extreme cases, perhaps in cancer patients. I told him as of now, OxyContin is approved only for ages 18 & up. I invited him to the Butrans dinner program. He said he will attend. I asked if he has had any new starts on Butrans lately. He said he thinks he has a few patients on it, although he added he guesses he does not know for sure if they really fill the prescription. Discussed appropriate patient type/range & dosing. He said UH has advised using more caution in prescribing pain medications lately. He said he is very cautious & documents everything. I told him he is doing the right thing by doing so. He said he has been trying non-narcotic medications for some patients for their pain. He said if that does not work, he might refer to pain management for a consult as UH does not want primary care physicians initiating narcotics on patients for pain, they want pain management to do it. He asked that I remind him about the program.
PPLPMDL0020000001	Lyndhurst	OH	44124	7/11/2012	Told doc I wanted to share one clinical reason to use butrans for the appropriate patient. I discussed the opioid experienced clinical study, explained the design and the 30% improvement in 50% of the patients studied. He said,"and then they all become addicts." He said he was busy and rushed off then.
PPLPMDL0020000001	Cleveland	OH	44122	7/11/2012	Quick call- Caught Dr Rastogi at the window. Reviewed Butrans appropriate patient type & passed back invitation, encouraging him to attend to learn more about these patient types & speak to area experts about Butrans. He just thanked me & walked away.
PPLPMDL0020000001	Independence	OH	44131	7/11/2012	Spoke briefly with Dr Rob- handed him Butrans dinner invitation & asked if he could attend. He said he would see. I encouraged him to attend to speak with area physicians & experts about Butrans & appropriate patient types. He just thanked me & walked away. Reviewed OxyContin managed care coverage with Maria. She said they do not write any more OxyContin anymore. I asked if she knows why. She said they refer all those patients out & started doing so recently because of the Ohio legislation.
PPLPMDL0020000001	Cleveland	OH	44119	7/11/2012	Spoke to Shelly Roberson about the hospice resbates. Encouraged her to submit her rebate invoices for the previous quarters to be reimbursed.
PPLPMDL0020000001	University Heights	OH	44121	7/11/2012	I discussed the Jessica patient profile with doc and that 5mcg would be an appropriate starting dose. I asked him if he would consider writing butrans at the lowest dose since he previously stated that he hates NSAIDS. He said no because UH hospital does not want him prescribing for non-cancer pain. He said that includes all scheduled narcotics. I reminded him of the indication of moderate to severe and that butrans can still be considered for those cancer pain.
PPLPMDL0020000001	Cleveland Heights	OH	44118	7/11/2012	Spoke to Eric about the movement of butrans and oxycontin. He said he still just has the one patient on butrans and he cant see who the prescriber is. I discussed the positioning and the proper application. He said he has savings cards. He said that oxyconti has been steady but sometimes has issues with coverage/cost as anything about \$10 is expensive for many of his customers. I discussed the importance of the conversion guide.
PPLPMDL0020000001	Warrensville Heights	OH	44122	7/11/2012	Dr Zivic said he's been writing more OxyContin lately. I asked if there was any particular reason for that. He said he doesn't think so, it is just what seems to be. Discussed 7 tablet strengths for individualization of dose. Invited him to Butrans dinner program but he said he could not attend. I let him know that managed care coverage is improving, updating him on Medco preferred status. He said that is good & asked me to go over dosing with him again. Showed 3 tablet strengths & gave him initiation guide. Discussed 5 & 10mcg being the two starting doses depending on a patient's current opioid therapy.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/11/2012	Reviewed conversion and titration guide for OxyContin and dr said he still uses OxyContin but not as much as previous years. I asked why and he said he has found other ways to treat pain and thinks Butrans may be a product that will fit for his patients. Reviewed case studies and discussed pain scale reductions. Dr asked about formulary and I reviewed all plans coverage and new additions.
PPLPMDL0020000001	Barberton	OH	44203	7/11/2012	Handed Dr the new OxyContin conversion and titration guide as well as the Butrans initiation and titration guide. Dr said he needed more copay cards but would not engage in a conversation.
PPLPMDL0020000001	Munroe Falls	OH	44262	7/11/2012	Dr said she kind of forgot about Butrans. I told dr that she needs to focus on the appropriate type of patient for Butrans. Discussed case studies and dr said that she does have patient where Butrans will fit which is her tramadol and vicoden patients. Reviewed dosing and titration and asked for the business.
PPLPMDL0020000001	Barberton	OH	44203	7/11/2012	Follow up with dr on recent Butrans prescription. Dr said it was a patient on vicoden who needed more analgesia. Dr initiated on 10mcg and made the vicoden prn. I asked dr about the patients insurance coverage and asked if he remembers providing a copay card. Dr said it was a BWC patient. I reminded dr about his ability to titrate in 72 hours if necessary and left another conversion chart. I asked dr to continue to think of patients just like the one he prescribed for and to continue prescribing.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/11/2012	Asked for continued OxyContin prescriptions and titrating every 1-2 days. Discussed patients in studies over 65 and 75 in studies. Reviewed commercial formulary coverage. nothing else learned
PPLPMDL0020000001	Parma	OH	44129	7/11/2012	Spoke with floater pharmacist & reviewed Butrans dosing & titration ability after 3 days to a maximum 20mcg. She said she saw it on the shelf here but has not dispensed a lot of it herself. Reviewed appropriate Butrans patient type. Discussed OxyContin savings cards, e-voucher, & eligibility requirements. Gave her information on Rx safety. She said she would leave my information for Beth.
PPLPMDL0020000001	Mayfield Hts	OH	44124	7/11/2012	I discussed the opioid experienced clinical study and explained the 30% reduction in pain score in 50% of the patients studied. I asked if that was impactful. He said sure. I asked if it was enough to get him to try it. He said he is just a creature of habit but he is going to try it. I asked him to prescribe for a patient that that is failing on tramadol or vicodin.

PPLPMDL0020000001	Euclid	OH	44119	7/11/2012	Met doc and introduced butrans to him. Discussed the indication and other key selling messages. He was not familiar with it as he is in a hospice setting.
	Strongsville	OH	44136	7/12/2012	Spoke with Jim, pharmacist, who said he just filled a patient's Butrans 10mcg prescription this week. He added that this is the same patient who he told me about awhile ago who Dr Samuel had started on it. He said the patient is doing well & is maintained on the 10mcg dose. He said that is really the only person he can think of who is on it. Reviewed appropriate patient type/range. Jim said there are a lot of patients who fit that description. Discussed trial/savings program & eligibility requirements. He said he does not need any cards for Butrans or OxyContin at this time.
PPLPMDL0020000001	Akron	OH	44305	7/12/2012	I asked Dr if he has initiated Butrans on a patient in his practice yet? Dr said he has not. I asked him if he has an issue with Butrans pain score reductions. Dr said he does not and said he is just waiting for the right patient. I asked dr what he considers the right patient. Dr said the patient with acute pain that needs additional analgesia. I corrected Dr Vora and discussed the indication and appropriate patients with use of the case studies. Dr said he does have patients on tramadol and vicoden that could benefit from Butrans. I asked dr if he understand what Butrans is indicated for and who it is appropriate for? Dr said he does and will look to getting Butrans.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/12/2012	Spoke with Johnathan a Pharm D new to the pharmacy. I asked if he had knowledge about Butrans. Dr said that he did not so I fully explained the product with all key selling messages, steady state, no dose adjustments necessary for elderly, renal or hepatic impairment. Discussed appropriate patients with use of initiation and titration guide. Jonathan said that it sounds like a great product and sees the product fitting well. I asked him if he has filled OxyContin prescriptions yet. He said he filled one. I asked if he remembers if it was prescribed Q12h? Jonathan was not sure. I reviewed conversion and titration guide.
PPLPMDL0020000001	Parma	OH	44129	7/12/2012	Spoke with Alliana, pharmacist. She said they have one customer on Butrans 20mcg. I asked about any feedback she has heard. She said she hasn't heard anything. Reviewed appropriate patient type. I asked if this patient was started directly on the 20mcg. She said she didn't know. Discussed 5 & 10mcg as the only recommended starting doses, with 20 being a titration dose. Also reviewed savings program for Butrans & OxyContin. She said they do not dispense a lot of OxyContin.
PPLPMDL0020000001	Cleveland	OH	44130	7/12/2012	Quick call- Dr Popa saw me at the window & said that I have "that pain medication". I reminded her that it is Butrans, the once weekly transdermal system for moderate to severe chronic pain. Passed back dinner invitation & asked if she could go. She said she doesn't do that & then walked away. Spoke with MA & reviewed Butrans patient type. She said Dr Popa has patients who fit that description.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	7/12/2012	I asked Dr what reservations she has in prescribing Butrans. Dr said she doesn't have any clinically and asked about insurance coverage. I told dr that the most important thing for her to know if she is comfortable with Butrans to know where to use it. I asked if she has patients on tramadol or vicoden who need a dose adjustment? Dr said she does and said she remembers formulary being an issue. I told her that that was in 2011 and a lot has changed. Reviewed updated formulary and asked for a Medco or ESI patient that meets that criteria. Dr agreed to remember. Discussed Butrans product information and formulary with Courtney. She was surprised about Medco and happy.
PPLPMDL0020000001	Parma	OH	44129	7/12/2012	Quick call- Passed back Butrans dinner invitation & asked Dr Kushnar if she thought she could attend. She said she didn't think so as she usually does not go to them. I encouraged her to attend since it would be the first formal presentation on Butrans she would see & also so that she could discuss Butrans & patient types with area experts & other physicians. Asked if they needed additional Butrans or OxyContin savings cards, but she did.
PPLPMDL0020000001	Parma	OH	44129	7/12/2012	Dr Paat asked how many doses of Butrans there are. Reviewed 3 strengths & discussed how a patient could start on either 5 or 10mcg depending on their current opioid therapy. I handed him a dinner invitation & asked if he could attend. He said he thought he could make it. Spoke with Shari, who said Dr Paat does attend programs, but only if Dr Tolentino goes also. Reviewed OxyContin formulary grid, pointing out broad coverage.
PPLPMDL0020000001	Highland Heights	OH	44143	7/12/2012	Doc asked what's new with butrans. I reminded him of the Express Scripts tier 2 copay and now Medco is now covering butrans at the lowest branded co pay as well. He was surprised to hear about medco. I explained that Medco is the largest PBM in the nation. He said most of the patients he wants to write butrans for are medicare patients. He has been writing it and doing PAS to get them through. I showed him the profile of William and asked if he would prescribe 10mcg if the patient was on percocet instead of vicodin. he said that percocet is stronger. He showed him the oxycotin potency chart and the similarity between the two molecules. Doc said he does not like to have patients on short acting too as it defeats the purpose of the once a week patch. I asked him to consider butrans for those patients less than medicare age. I tried to bring up oxycotin as an option for patients that may be taking more than 4 tabs of percocet but he told me not to waste my time.
PPLPMDL0020000001	Parma	OH	44129	7/12/2012	Passed back Butrans dinner invitation & asked Dr Tolentino if she could attend, reminding her of her previous interest in attending a Butrans dinner. Reminded her that she has not yet seen a formal presentation about Butrans. She said she did not know & asked if her husband could attend with her. I asked if he is a physician also & she said he is. I let her know that would be OK. She then said she had to go see patients. Spent time with Kathy, who said Dr Tolentino hasn't prescribed Butrans yet. I asked Kathy if, in her opinion, Dr Tolentino has some patients who fit the appropriate Butrans patient type based on what we have discussed previously. She said yes. I asked Kathy to bring to her attention the potential Butrans patients who she identifies. Kathy said she would do this. Reviewed OxyContin formulary coverage & showed broad availability on managed care plans. She said they did not need savings cards at this time.
PPLPMDL0020000001	Beachwood	OH	44122	7/12/2012	Quick call- Passed back Butrans dinner invitation & asked Dr Yokiel if he could attend. He thanked me but said probably not. OxyContin broad formulary access message. Spoke with nurse, Vicki, who said she has not had any managed care problems with Butrans or OxyContin lately.
PPLPMDL0020000001	Waterford	OH	45786	7/13/2012	W - She has written for Butrans and likes having a CII long acting option. She will continue to prescribe for patients when patients exceed the need of prn medication. I - Butrans for appropriate patients who meet the indication when uncontrolled on tramadol or hydrocodone once a therapeutic change is requested. Review of Emma/William profiles in order to help identify appropriate patients for Butrans. Review of appropriate starting doses for patients based on current therapy. Review of formulary coverage and savings card program eligibility.
PPLPMDL0020000001	Waterford	OH	45786	7/13/2012	W - Miral does have a couple patients on Butrans. She likes having the option for patients after hydrocodone and willing to give Butrans a try prior to a referral to pain management. I - Butrans for appropriate patients who meet the indication when uncontrolled on tramadol or hydrocodone once a therapeutic change is requested. Review of Emma/William profiles in order to help identify appropriate patients for Butrans. Review of appropriate starting doses for patients based on current therapy. Review of formulary coverage and savings card program eligibility.
PPLPMDL0020000001	Waterford	OH	45786	7/13/2012	W - Hasn't had any recent new starts with Butrans but seems to think he does have one or two patients controlled and doing well. He continues to prescribe OxyContin as his long acting agent of choice for patients. I - OxyContin for appropriate patient conversions from short acting opioids sooner rather than later when the indication is met. Review of 10-15mg new starts, q12h dosing. Butrans for appropriate patients who meet the indication when uncontrolled on tramadol or hydrocodone once a therapeutic change is requested. Review of appropriate starting doses for patients based on current therapy. Review of Butrans and OxyContin formulary coverage and savings card program eligibility.
PPLPMDL0020000001	Maple Heights	OH	44137	7/13/2012	Sat down with Dr Gene & Dr Dale. They asked how pain management physicians are responding to Butrans. I told them that physicians from various specialties, including pain management, have found a place for Butrans in their practice & reviewed appropriate patient type/range. Discussed OxyContin as an option for appropriate patients beyond the Butrans range. I asked if they are finding that they are referring out to pain management more frequently now than in the past. Dr Dale said yes, he definitely is. I asked him why not try Butrans for those patients when he refers them out. I went on to explain that it can sometimes take awhile for patients to get appointments with specialists. If the patient does well on Butrans, they are sending the pain management physician a good referral. If the patient does not respond to Butrans, then they are confirming that they really do need to be with pain management. I asked what his thoughts were on this. Dr Dale said this was a great point & he will use Butrans in patients like this. Updated him on Medco preferred status. Dr Gene said that is great because it seems like Medco doesn't put anything on preferred status.
PPLPMDL0020000001	Maple Heights	OH	44137	7/13/2012	Dr Gene asked how pain management physicians are responding to Butrans. I told him physicians from various specialties, including pain management, have found a place for Butrans in their practice & reviewed appropriate patient type/range. Discussed OxyContin as an option for appropriate patients beyond the Butrans range. I asked if they are finding that they are referring out to pain management more frequently now than in the past. Dr Gene said yes, he definitely is. I asked him why not try Butrans for those patients when he refers them out. I went on to explain that it can sometimes take awhile for patients to get appointments with specialists. If the patient does well on Butrans, they are sending the pain management physician a good referral. If the patient does not respond to Butrans, then they are confirming that they really do need to be with pain management. I added that since he has reported good success with Butrans in other patients, why not try it in more appropriate patients. Dr Gene said this was a great point & he will use Butrans in patients like this. Updated him on Medco preferred status. Dr Gene said that is great because it seems like Medco doesn't put anything on preferred status.
PPLPMDL0020000001	Northfield Center	OH	44067	7/13/2012	Spoke briefly with Kate. Reviewed Butrans appropriate patient type & confirmed stocking. She said she hasn't filled a script recently. Reminded her of savings opportunities, including e-voucher at CVS. Also discussed OxyContin 7 tablet strengths. She said they stock most of them.
PPLPMDL0020000001	Chagrin Falls	OH	44023	7/13/2012	Spoke with Ben, pharmacist, who said he used to have a customer or 2 on Butrans, but they have not filled a script in a few months. I asked if he knows why not. He said he is not sure. He added that he does still stock it, he just hasn't seen more prescriptions. Reviewed appropriate patient type & trial/savings program. He said he does dispense a lot of OxyContin. Discussed importance of appropriate patient selection. Reviewed savings program & gave him cards.
PPLPMDL0020000001	Parma	OH	44134	7/13/2012	Quick call- Dr Loyke said he was running late. Positioned Butrans once weekly for appropriate patients who are not well-controlled on NSAID's for whom he would otherwise start on a short-acting opioid chronically & OxyContin for appropriate patients beyond the Butrans range. Invited him to Butrans program.
PPLPMDL0020000001	Akron	OH	44319	7/13/2012	Spoke to Dr Wu and his office staff about Butrans. Gave all key selling messages and discussed dosing, titration, and appropriate patients using case studies. The staff really liked that it is 7 days and that BWC is paying for it along with Medco. I asked dr Wu based on case studies where he believes Butrans would fit. Dr said for his Ultram or vicoden patients. Dr said the CII and 7 days are an advantage for come of his patients but said he is mostly worried about cost. I told dr that for best results to stick with private insured patients that fit the indication and are in chronic pain. Dr said he will look for patients.
PPLPMDL0020000001	Chagrin Falls	OH	44023	7/13/2012	Spoke with Jeff, pharmacist, briefly. Reviewed savings programs & appropriate patient type/range for Butrans. He said he was very busy with no time to stop to talk today. Saw Butrans on the shelf.
PPLPMDL0020000001	Brooklyn	OH	44144	7/13/2012	Quick call- Positioned Butrans for appropriate patients who are not well-controlled on their current therapy, even if he is referring them to pain management if they fall within the range for Butrans. Positioned OxyContin as a q12h dose of oxycodone for appropriate patients who are beyond that range. Dr Miguel just thanked me & walked away.
PPLPMDL0020000001	akron	OH	44319	7/13/2012	I asked dr what his thoughts were on the Butrans product information I had been leaving? Dr said he has not looked at anything yet but will. nothing else learned.
PPLPMDL0020000001	Akron	OH	44310	7/13/2012	Saw dr quickly at window and asked him how his patients are doing on Butrans. Dr said that he has not heard any bad reports from his patients so he said he continues to be happy with it. gave Dr and Char the updated formulary list and focused on Medco. Char said that they have a good amount of Medco prescription coverage and that it really helps.
PPLPMDL0020000001	Cleveland	OH	44135	7/13/2012	Spoke with Ken, we discussed the managed care updates for Butrans for ESI and Medco, They see both, but also a ton of government. We reviewed the managed care for Med D, Caresource and Commercial for Butrans and OxyContin. We discussed the copays after the savings cards.
PPLPMDL0020000001	North Hampton	OH	45349	7/13/2012	Dr was very enthusiastic about butrans. She expressed he distaste for long term use of SAO but patients that do not require a CII product. She asked me to leave her a study in order to learn more on her own time.
PPLPMDL0020000001	Olmsted Falls	OH	44138	7/13/2012	I showed the Butrans FPI and clinical trial and asked Dr if he had a few patients who might benefit from this type of reduction in their pain scores. He said that he has just a few, but he will talk to them about it.
PPLPMDL0020000001	Berea	OH	44017	7/13/2012	Quick call. I showed Dr patient experience box and asked if he would try just these 5 patients on Butrans who are taking tramadol around the clock. He agreed.
PPLPMDL0020000001	Barberton	OH	44203	7/13/2012	I asked dr if he is willing to try a patch for patient on short acting opioids? Dr said he will not prescribe a scheduled product even though its a patch. dr walked away.....nothing else learned.
PPLPMDL0020000001	Berea	OH	44017	7/13/2012	I let Dr know about Butrans formulary updates for Medco and ESI, I asked his thoughts, and he said that he understands but he still thinks that patients are going to complain that its too expensive. I showed the trial card and that they can even try it for a month virtually free. I asked if he would at least try it and he agreed.
PPLPMDL0020000001	Cleveland	OH	44135	7/13/2012	Spoke with Meagan, I showed the managed care grids for Butrans and the updates for ESI and Medco. I showed the managed care grid for Med D OxyContin. I reviewed that OxyContin has been studied in geriatric patients.

PPLPMDL0020000001	Chagrin Falls	OH	44022	7/13/2012	Spoke with MA Sherry & updated her on Butrans managed care with Medco preferred status. Also reviewed favorable commercial insurance coverage. Showed OxyContin formulary grids & discussed savings cards for both products. She said she would make sure each physician sees the information.
PPLPMDL0020000001	Parma	OH	44134	7/13/2012	Dr Scanlon said he is writing Butrans. I asked what the most recent feedback from patients has been. He said they are happy. Showed patient profiles, showing that there are 3 different patient types where he could use Butrans. He said he has tried it on all types of patients. I updated him with Medco preferred status & asked if he thought he could find more appropriate Butrans patients & he said yes. Showed broad formulary access for OxyContin & reviewed savings program.<font color=blue><b><CHUDAKOB's query on 07/20/2012</b></font>Ashleigh, your prior next call objective was the same as your next. I am wondering why you decided to change instead of going with what you had written.<font color=green><b><ASPEGAS's response on 07/22/2012</b></font>Since the initiative has been using the patient profiles, I thought I would utilize those & see if that got me anywhere. After the call, I decided that my original next call objective might have been a better choice so I wanted to try that next time.<font color=blue><b><CHUDAKOB added notes on 07/24/2012</b></font>Thanks for the
PPLPMDL0020000001	Barberton	OH	44203	7/13/2012	Spoke to Bill and asked him about Butrans stocking and fills. Bill said he has not seen any filled recently. Gave him FPI information on pain scale reductions, no dose adjustments in renal or hepatic impairment, and titration at 72 hours. Bill said that he believes Butrans is a good product and hopes to see it in his pharmacy. Gave overview of OxyContin and dosing at Q12h
PPLPMDL0020000001	Barberton	OH	44203	7/13/2012	Discussed OxyContin individualized dosing. Dr said she prescribes OxyContin Q12h and I asked her to remember all 7 doses. Used Emma Case study to present Butrans patient case study. Reviewed Emmas profile and asked Dr if she has patients like Emma? Dr said she does and said it makes sense to use Butrans when the patient need more analgesia instead of moving to vicoden. Reviewed updated formulary coverage with Butrans.
PPLPMDL0020000001	Lakewood	OH	44107	7/16/2012	I showed the managed care grids for OxyContin and Med D. I showed him that OxyContin has been studied in geriatric patients ages 65 and 75 and older. He told me about an older man over 75 who was doing really well on OxyContin. He said he was on NSAIDs but was having some side effects, and he tried him on low dose OxyContin and he is doing really well. I asked if he has others like him who he can start on 10mg OxyContin and he said he will keep it in mind for those types of patients.
PPLPMDL0020000001	Independence	OH	44131	7/16/2012	I reminded Dr Sundaram of previous Butrans conversations when we have discussed using Butrans for appropriate patients who are under Medicare age, for insurance purposes. I also reminded him that Butrans is for chronic use. I asked him what type of painful conditions he sees with this population. He said back pain. I asked if that is something that he generally treats with opioids. He said not really. He went on to say that with the passage of Ohio House Bill 93, the government is really cracking down on writing prescription narcotics. He said the DEA has been even to his office to discuss patients. He said he has signed up for OARRS & now makes patients sign a pain contract. I agreed that he should be cautious in prescribing opioids & told him it is good to have signed up for OARRS & to use the pain contract. I asked if he is doing any urine drug screening. He said that is in the contract but he has not had to do that yet. I asked him to think of his patients who are perhaps in the 50-60 year old range who are established patients. He said he has a lot of old patients who he would want to use Butrans for who have many types of pain conditions. I asked if those are the types of patients he uses OxyContin for. He did not answer. He said he is writing fewer & fewer pain medications. I asked if he refers out to pain management. He said he just doesn't take those patients in the first place.
PPLPMDL0020000001	Fairlawn	OH	44333	7/16/2012	I asked Dr about OxyContin patients and where he is using it the most? Dr said both elderly and middle aged patients use it the most in his practice. Dr said he uses OxyContin because it works and he likes the 7 doses. His patients tell him that it works well. I asked Dr if he remembers Butrans? Dr said he does and said it is the schedule III, 7 day patch. I reviewed Butrans indication, titration and discussed case studies. I asked Dr which patient profile he believes fits best in his practice. Dr said he has patients on tramadol and vicoden that he thinks could use Butrans. Dr said that he sees where Butrans fits and will look into finding appropriate patients. Reviewed new formulary coverages and focused on his Medco patients. Discussed trial offer and copay cards.
PPLPMDL0020000001	Parma	OH	44129	7/16/2012	I reminded Dr Rossi of our previous conversations about Butrans & asked her if she thinks it is something she will be able to use in her practice. She said she thinks she tried to give it to some people but it was too expensive for them. I reminded her that patients with commercial insurance coverage would have the most access to Butrans & I she wrote it for a Medicare patient, there is a good chance that the cost was high. I asked what type of patient she was thinking of. She did not answer. I showed her the "Jessica" patient profile & walked her through the patient type (opioid naive). I asked if this is the type of patient who she sees in her practice. She said yes, but added that "all patients are different". I asked what she meant. She said many patients have other conditions they are dealing with like diabetes. I asked if this changes how she treats their pain. She did not answer. I showed her that this is one of the types of patients who she may find Butrans effective for & added that she should look for appropriate patients ages 50-60 who have commercial insurance coverage. Showed her how this patients could start at Butrans 5mcg with titration ability after 3 days. She said she doesn't have a lot of patients like that. I asked her to use Butrans in one or two appropriate patients who fit the description. I asked what type of patient she uses OxyContin in & reminded her she had mentioned older patients last time. She said she uses it in patients in severe pain.
PPLPMDL0020000001	Akron	OH	44333	7/16/2012	I asked Dr Brown if she has had the opportunity to read over her patient surveys for the Butrans Patient Experience program? Dr said she has not had much time but did look at briefly. She did say that one of the patients did enjoy telling her about it and was happy. I told dr that Butrans formulary is growing and Medco is now 2nd tier with copay about \$20-30. Dr said she does have Medco patients and it will make it easier to prescribe. left Butrans patient information guides and updated formulary coverage.
PPLPMDL0020000001	Lakewood	OH	44107	7/16/2012	I showed the managed care grids for OxyContin and Med D. I showed him that OxyContin has been studied in geriatric patients ages 65 and 75 and older. He said he will continue to prescribe it. I reviewed Butrans as an option for those patients with commercial insurance and he said he will try it.
PPLPMDL0020000001	Rocky River	OH	44116	7/16/2012	Spoke with Stan, we reviewed the managed care for Butrans and the updated to ESI and Medco, we discussed that Butrans has a trial offer and OxyContin also still has a savings program.
PPLPMDL0020000001	Akron	OH	44303	7/16/2012	Rod said he has been going through the OxyContin copay cards and needed more. He was working on something for a patient and didn't have time. nothing else learned.
PPLPMDL0020000001	Lakewood	OH	44107	7/16/2012	I asked Dr if he has more patients taking tramadol who he could start on Butrans. I showed the clinical trial and the pain score reduction for patients. He said that he will start more patients. I asked if he would think of OxyContin for those Med D patients since it is well covered and he agreed.
PPLPMDL0020000001	Rocky River	OH	44116	7/16/2012	Spoke with Kim, I reviewed the managed care updates for Butrans for ESI and Medco, she said they see a lot of both plans. We reviewed Butrans as an option for those patients with BWC. I showed the managed care grids for OxyContin and that it is an option for those patients with Med D coverage.
PPLPMDL0020000001	Lakewood	OH	44107	7/16/2012	I showed the patient experience program and asked is thoughts on if he thinks his patients could benefit, he said that he just doesn't know if he would have 5 patients for it, I showed him the trial cards and said he can just try a few patients on Butrans without participating.
PPLPMDL0020000001	Akron	OH	44312	7/16/2012	Asked Gary if the pharmacy has filled Butrans recently? Gary said that they have but only for Dr Cain and have not had another. He has a 5mcg in stock and its about to expire. I told him about the 72 hour steady state and titration with dosing review. The pharmacy has copay cards in stock. nothing else learned.
PPLPMDL0020000001	Akron	OH	44312	7/16/2012	I asked Dr at window if he has had the opportunity to initiate Butrans. Dr said no but claimed he does like the product and thinks he may have a patient or two who could benefit from Butrans. I asked what type of patient? Dr said he has a couple of patients on IR opioids who could use Butrans. gave initiation and titration guide and told him not to forget about titrating at 72 hours if necessary.
PPLPMDL0020000001	Parma	OH	44129	7/16/2012	I asked Dr Ortega how often he is the one to start a patient on their first opioid analgesic. He didn't answer. I asked if most patients are already on a pain medication when they come to him or if he is the one who starts them. He said most patients are already on something & he prefers not to start a patient on an opioid since his ultimate goal is to decrease their opioid or eliminate it altogether. He said he just put a patient on Butrans who was a 90 year old man who was taking Vicodin 3 times per day. He added that the patient is still taking the Vicodin. I asked what dose Butrans he put this patient on. He said 5mcg. I asked if he has considered titrating the patient to 10mcg Butrans in effort to possibly decrease the need for supplemental analgesia. He said that was a good thought. He asked what dose Percocet someone could be on & still be a good candidate for Butrans. I showed him Butrans initiation guide & showed the ranges & that the patient could start on 5 or 10mcg depending on their current dose of Percocet. He mentioned that he has been seeing some of Dr Marshall's patients who are on various amounts of Percocet. I reminded him that some of those patients, if on a higher dose of Percocet, may be appropriate for OxyContin. Showed him potency chart in OxyContin conversion guide. Also discussed Butrans as a CIII opioid that he can call in & write refills for.
PPLPMDL0020000001	Copley	OH	44321	7/16/2012	Spoke to Steve(ma) about OxyContin and Butrans. Steve said that dr doses have a number of patients on OxyContin and that he sees a lot of 20mg doses. Reviewed doses and conversions with Steve and asked him if he knew about Butrans? Steve said that he did not. Reviewed all key selling messages and Steve said he will be sure the Dr sees it.
PPLPMDL0020000001	Fairlawn	OH	44333	7/16/2012	while speaking with Christy about OxyContin and Butrans Dr walked up to window and said he gave a quick review of the Butrans stuff I left him. I asked him what he thinks about Butrans? Dr said hes not sure yet and will look into the FPI a little more. I asked dr if there is a time where we could speak about Butrans? Dr said he will look over the information.
PPLPMDL0020000001	Beachwood	OH	44122	7/16/2012	I reminded Dr Myton-Craig of previous Butrans conversations & asked her what type of patient she is thinking of for Butrans. She said because Butrans "has limitations", she is thinking of it for her BWC patients. She said because of limited time, she does not want to write it for Medicare or Medicaid patients, who's plans will more than likely require prior authorization for it. I asked her what about patients who are working & have insurance coverage through their work. She said she does have commercially insured patients. I reminded her of trial/savings cards for those eligible. She asked if she would still have to do a prior authorization for it. I told her she would not on most plans. Updated her on Medco preferred status as well as Express Scripts. She said she has a patient who she just saw who would be a good candidate for Butrans & asked that I leave a Butrans information piece for his chart to be flagged. She said this patient has BWC & is on "a lot of short-acting" & then went into a room.
PPLPMDL0020000001	Fairlawn	OH	44333	7/16/2012	Asked if Butrans has been filled recently. Pharmacy fills often for Dr Shah and have seen some for Fouad. The 5 and 10mcg doses have been filled for each dr. Pharmacy very busy and didn't have time to discuss product information.
PPLPMDL0020000001	Cleveland	OH	44130	7/17/2012	Pointed out favorable OxyContin formulary status & reminded Dr Diab there are 7 tablet strengths for individualization of dose. Also reminded him of Butrans update with preferred status with Medco. He just thanked me & walked into a room.
PPLPMDL0020000001	Cleveland	OH	44130	7/17/2012	Dr Fedorko showed me samples of a new non-steroidal combo medication. He said his patient he was seeing has been complaining of atypical migraines for a very long time & no one seems to be able to figure out what is causing them. He said if the samples he was giving him of this medication did not work, he was going to give him Butrans. I asked if he thinks this patient meets the Butrans indication of moderate to severe chronic pain. Dr Fedorko said he thinks so but added that the patient is on Medicare. I reminded him that this patient may not have access to Butrans with a Medicare plan & warned that he would likely need to prior authorize it.
PPLPMDL0020000001	Northfield	OH	44067	7/17/2012	Spoke briefly with floater pharmacist. Discussed Butrans once weekly dosing & reviewed appropriate patient type/range. Also discussed e-voucher savings for Butrans & OxyContin.
PPLPMDL0020000001	Parma	OH	44129	7/17/2012	I asked Dr Chagin if he is still coming to the Butrans dinner program tonight. He said he is. I also asked if he has given out any Butrans Patient Experience kits out, reminding him of how limited they are. He said he has not. Positioned Butrans for appropriate patients who are seeking a medication adjustment for their moderate to severe chronic pain. Also reminded him of OxyContin with 7 tablet strengths for appropriate patients beyond the Butrans range.
PPLPMDL0020000001	Parma	OH	44129	7/17/2012	Positioned Butrans once weekly for appropriate patients who are seeking a medication adjustment for their moderate to severe chronic pain if they are taking less than 80mg equivalent oral morphine per day. Also positioned OxyContin as a q12h dose of oxycodone for appropriate patients beyond that range.
PPLPMDL0020000001	Parma	OH	44129	7/17/2012	Dr Moysaenko said he didn't have much time because he was dealing with a patient emergency. Positioned Butrans for appropriate patients taking up to 80mg oral morphine equivalent & showed initiation guide chart to demonstrate range. Positioned OxyContin as an option for appropriate patients beyond the Butrans range who may benefit from q12h dosing. He asked me to leave the initiation guide & said he would spend time looking at it when he had more time.
PPLPMDL0020000001	Parma	OH	44129	7/17/2012	Quick call- Confirmed that Dr Tolentino is attending the Butrans program. Positioned Butrans for appropriate patients seeking a medication adjustment for their moderate to severe chronic pain taking less than 80mg equivalent oral morphine per day. OxyContin 7 tablet strength reminder.
PPLPMDL0020000001	Westlake	OH	44145	7/17/2012	I asked Dr if he had tried Butrans since I've been in, he said he's trying to find the right patient. I asked what that means and he said one who can afford it. I reviewed the managed care for Butrans and the ESI and Medco coverage. I asked him to just try it on a few commercial patients and that they will most likely go through with a \$15 copay.

PPLPMDL0020000001	Westlake	OH	44145	7/17/2012	Spoke with Will, we reviewed the managed care updates to Butrans for ESI and Medco, we discussed that OxyContin is also well covered on managed care and I showed the Med D grid. I showed the FPI that OxyContin has been studied in geriatric patients ages 65 and 75 and older.
PPLPMDL0020000001	Parma Heights	OH	44129	7/17/2012	Spoke with technician, Megan, & showed her information on Butrans & OxyContin savings programs. I asked if it is the technicians or the pharmacists who give patients savings information. She said either of them do it but they do try to make sure to provide savings opportunities for all patients. I reminded her that patients on any type of government insurance are not eligible for the savings programs. She said she would give my information to the pharmacist.
PPLPMDL0020000001	Westlake	OH	44145	7/17/2012	I showed Emma patient profile and said I'm sure you will be seeing a patient this week who is taking tramadol who are not well controlled, would you start Butrans for these patients? He said that he would try. I asked Sam if she could help remind him and she said that she would. I asked if they have any patients coming in today who are taking tramadol around the clock, she agreed to check and then place a medication guide with the chart.
PPLPMDL0020000001	Parma	OH	44129	7/17/2012	Myra said she is coming to the Butrans dinner program tonight. She also asked about Caresource prior authorization requirements. I reviewed the requirements with her. She said she gave it to a Caresource patient last week & was hoping it would get approved.
PPLPMDL0020000001	Akron	OH	44313	7/18/2012	asked dr through window if he had any recent successes with OxyContin. Dr said he likes it and has not had any issues with OxyContin. I asked if he has initiated Butrans yet? Dr said he has not and wanted the information and asked me to discuss with Tina. Discussed appropriate patients and insurance with Tina. Tina said she will help the dr Butrans patients.
PPLPMDL0020000001	Akron	OH	44310	7/18/2012	I gave dr two reasons why he needs to prescribe Butrans. One is because Butrans is the only CII, 7 day transdermal patch for moderate to severe chronic pain. The other is because 70% of Butrans is eliminated in the feces in 7 days and 27% is excreted in the urine. I asked dr if that means anything to him? Dr said it did and he said he likes the product. I asked him if he has patients under 65 who have been on vicoden for 3+ months? Dr said he had a good number of them. I asked if he feels Butrans would be a good option for those vicoden patients in chronic pain? Dr said that hes sure he could initiate Butrans for some of those patients. I told him to do so and provided new formulary information. Dr said he would try it again.
PPLPMDL0020000001	Akron	OH	44313	7/18/2012	Spoke with Jamie. She knew about Butrans and said she did not believe they have filled Butrans yet. They have 5mcg on the shelf. Discussed Butrans dosing, CII, 7 day transdermal application. Discussed application sites and titration at 72 hours. Pharmacy did not have copay cards after discussion about patient savings.
PPLPMDL0020000001	Copley	OH	44321	7/18/2012	I asked dr if he has initiated Butrans yet. Dr said he did last week for a 76 yr old female on SummaCare Medicare who was on norco bid. Dr said he started her on 5mcg once a week. I discussed the Medicare situation with Butrans and discussed the Medco and Express Scripts win. Dr continues to tell me how commercial insurances require PA's and SE's when branded medicines are prescribed. I told him to try a patient on Medco prescription insurance patients. Dr said he would try to prove a point. I told him that other physicians that are writing Butrans have not had coverage issues with commercial prescription insurance. left updated insurance information with the staff.
PPLPMDL0020000001	Westlake	OH	44145	7/18/2012	I showed him Emma patient profile and that she would be an appropriate patient for Butrans. He agreed and said that he does see her from time to time and he would try Butrans when managed care allows. I showed William and asked his thoughts on this type of patient. He said that he may try Butrans, or other long acting. I let him know this is an appropriate patient for Butrans. I showed that if a patient like this has Med D insurance, then he may be also try OxyContin since it is covered on most Med D plans.
PPLPMDL0020000001	Cleveland	OH	44143	7/18/2012	I showed doc the butrans demo and reminded him of the appropriate patient - after failure on tramadol. He said he knows and asked what else is new. I told him that butrans is available at the lowest branded co-pay for patients with express scripts and medco. I spoke to Angie and informed her of the coverage and to just be sure patients still get the savings cards.
PPLPMDL0020000001	Mayfield Heights	OH	44124	7/18/2012	Quick call...I showed doc the Emma profile and explained that if she is refilling tramadol at 60 tabs or more/mo, those patients may be appropriate for a low dose of butrans. I let her know about the recent updates with express scripts and Medco - butrans now at the lowest branded co pay for patients with those plans. She was surprised and said that's good.<font color=blue><b>CHUDAKOB's query on 07/29/2012</b></font>Charmaine, this is a case where "60 tabs or more/month" might imply that there is a benefit to Butrans relating to less refilling. Remember that we are talking about patients that need dose adjustments, not patients that refill tablets.<font color=green><b>SIMERTOC's response on 07/31/2012</b></font>OK, I will avoid that terminology.<font color=blue><b>CHUDAKOB added notes on 07/31/2012</b></font>Thank you!
PPLPMDL0020000001	Richmond Heights	OH	44143	7/18/2012	Spoke to Mel about the movement of butrans. He said that he sees scripts occasionally. I asked if he has any regular customers refilling it. he said he does not know. He asked if butrans is covered by medicare and medicaid. I told him that Caresource will cover it with a PA but probably not medicare. I gave him an initiation guide and explained the application and rotation.
PPLPMDL0020000001	Mayfield Heights	OH	44124	7/18/2012	Window call...I reminded doc of the butrans patient types like Emma and William that we previously discussed. I informed him that now Express scripts and Medco are no at the lowest branded co pay for so patients with those plans can expect to pay about \$15/mo. Provided formulary grids for oxycontin and butrans to Jessica.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/18/2012	I asked dr if he has had the opportunity to initiate Butrans. Dr said that he has not. I asked dr if he has patients on vicoden for osteoporosis or low back pain? Dr said he is getting many more patients on vicoden because of the Tylenol scare. I showed dr the vicoden patient case study and asked him what he would typically do with a patient on vicoden who needs a dose adjustment? Dr looked at the conversion scale and said that he will consider using Butrans for that patient. Dr said it makes sense. I gave dr updated formulary coverage and asked him to try Butrans. Dr agreed. Told dr that the copay cards are in their sample closet.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/18/2012	I asked Dr Bedrick if she has initiated a patient on Butrans? Dr said she has not and reminded me that it's a very small niche for her. I asked her what that niche is? Dr said for the patient taking too much vicoden. I asked her what's too much. she said it varies per patient but if a patient goes above 4 a day she likes to refer. I gave dr the initiation and titration guide and asked her to initiate Butrans for those patients prior to the referral. Dr said she will continue to look for patients. Gave staff the updated patients covered for Butrans.
PPLPMDL0020000001	Copley	OH	44321	7/18/2012	I asked Jenna if they have filled Butrans recently? She said that she didnt think they had however she wasn't sure. I asked if she could look up fills and the last one filled was last month for 5mcg. I reviewed Butrans CII, 7 day transdermal patch, explained dosing and titration schedule and showed conversion scale.
PPLPMDL0020000001	Richmond Heights	OH	44143	7/18/2012	Introduced doc to butrans- detailing the indication, once weekly application, CII status and the positioning using the patient profiles. He asked about the molecule. I explained that it is buprenorphine and the mechanism of action. He said he had heard something about a buprenorphine patch but he could not remember the name. I asked if he sees a place for a product like butrans. He said sure and asked about coverage. I explained the commercial coverage including preferred branded co pay with medco and express scripts. Also explained the details and eligibility of the savings cards. I discussed the oxycontin patient type and that if he has patients taking hydrocodone 5mg q6h, that patient may be appropriate for a low 10mg dose of oxycontin.
PPLPMDL0020000001	Bedford	OH	44146	7/18/2012	Spoke with pharmacist, Ed, & inquired about Butrans stocking. He said they do not have it. Reviewed once weekly dosing of buprenorphine in a transdermal system. I asked if when he sees an OxyContin prescription, he is seeing it dosed q12h as the FPI suggests. He said yes. I asked if he discusses this with patients, since many people think q12h is the same as "twice a day". He then said most doctors write it "twice a day". I asked if he counsels patients on the importance of actually taking it every 12 hours. He said he does when he has the chance.
PPLPMDL0020000001	Westlake	OH	44145	7/18/2012	Quick call, I caught Dr and Candy on his way out. He said that he hasn't written Butrans lately, he just forgets about it. I asked if there is a way I can get in more often to remind him since his lunches are booked up. He said I can ask when I come to the office, but it will depend on how busy the day is. I asked him to give Butrans another shot for those patients taking short acting around the clock and he agreed.
PPLPMDL0020000001	Parma	OH	44129	7/18/2012	Dr Gigliotti said he thinks he has 3 patients on Butrans now. I asked what he looks for in a patient for Butrans. He said nothing specific. He said one patient who he has is doing very well on Butrans & the others he has not heard back from. I asked him to tell me about the patient who is doing well. He said she had failed surgery on her neck leaving her with pain. He said she is only 30 years old & the pain severely impacts her life. He said she has been on Percocet in the past, but he did not want to continue her on that, so he put her on Butrans 10mcg, with one or two Vicodin for breakthrough pain. He said again she is doing great & is a good testimonial for Butrans. I asked if he is still referring many of his OxyContin patients to Dr Salama. He said some, but he still has many on it that he maintains. Dr Gigliotti said he plans to put more patients on Butrans & added that he has savings cards to give to those patients.
PPLPMDL0020000001	Parma	OH	44134	7/18/2012	I asked Dr Hernandez how he measures success when treating a patient with a pain medication- is a particular decrease in pain rating that he is looking for? He said he does look for a reduction in pain score & he finds that to be an effective way to measure how well a patient is doing on any given treatment. He said he continues to use Butrans with success & that his patients on it are happy. He said occasionally someone will report skin irritation, but most of the time the patient is getting good enough pain relief that they do not want to be taken off Butrans. Dr Hernandez said he gives the patient the option of discontinuing, but they usually just stay on it. I asked, with having success using the 20mcg dose on patients who he has taken from higher doses of other opioid medications, what he is doing with his patients who are taking Vicodin a few times per day- would he consider those to be Butrans candidates at a lower dose? He said sometimes he switches them. He said he offers it to them, but sometimes patients want to stay with Vicodin. I suggested that if a patient is doing well on a stable dose, they might not be good candidates for Butrans, but if they are seeking a medication adjustment, that might be a good opportunity to suggest Butrans if appropriate. He said BWC is no longer paying for Vicodin at doses higher than 5mg, so there might be some potential for those to become Butrans patients.
PPLPMDL0020000001	Bedford	OH	44146	7/18/2012	I asked Dr Moufawad how he measures success in treating patients for their pain- is it a reduction in pain score that he is looking for? He said it is not pain score that he pays attention to. He went on to say that it is more function of the patient that he looks at. He said for some patients, this means being able to return to work. For others it is simply emptying the dishwasher. Asked if an improvement in function correlates with a reduction in pain score. He said it often does, but not always. He said that pain scores sometimes cause patients to put too much thought into the number they rate their pain depending on what that patient is looking for the doctor to do. Dr Moufawad said he is happy with the results he gets with Butrans. He said he knows that the FPI says that Butrans can be used in patients taking up to 80mg morphine per day, but he has even used it on patients taking up to 120mg by first bringing their dose down & then initiating Butrans, also giving them supplemental analgesia. Dr Moufawad said he has increased his usage of OxyContin because he feels the stigma has decreased & in general people are shifting back to illicit drugs instead of prescription medications which he thinks is good because it allows for prescription medications to be used for real pain, benefiting the right patients.
PPLPMDL0020000001	Shaker Heights	OH	44122	7/19/2012	Quick call: Showed Dr Agarwal OxyContin's 7 tablet strengths for individualization of dose. Positioned Butrans for appropriate patients who he is referring to pain management for moderate to severe chronic pain. Shared information on Medco preferred status for Butrans with Michelle.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/19/2012	I asked dr if he had been able to identify a Butrans patient yet. Dr said he had not and that he didn't have a good explanation. I reviewed the appropriate patient again and asked him to just try Butrans. Reminded him of formulary coverage with Medco. Nothing else learned
PPLPMDL0020000001	Independence	OH	44131	7/19/2012	Introduced Butrans Patient Experience Program to Roman. He said he enjoyed the program he attended this week & learned a lot about Butrans & the patient types he could try it on. He said he has decided that he is going to try it on patients who are taking up to 5 Vicodin per day. Discussed dosing, titration, & ability for patients to take supplemental analgesia if necessary. Also reviewed insurance coverage & trial/savings program. Gave him more OxyContin savings cards. He said he does not understand why so many physicians are afraid to write OxyContin. He said they do not realize that not all patients are drug seeking addicts. He said many of their patients have had multiple failed surgeries & are in true pain & rely on pain medications like OxyContin. Discussed importance of appropriate patient selection.
PPLPMDL0020000001	Independence	OH	44131	7/19/2012	Lisa said she enjoyed the Butrans program & believes they are ready to use it now. Introduced the Butrans Patient Experience Program & walked her through the process. Discussed appropriate patient types. She said she thinks they will be starting with patients who are taking Vicodin 3-5 times per day. I agreed that some of these patients may be appropriate for Butrans. Discussed dosing, titration, & supplemental analgesia. She said she is interested in getting patient feedback & committed to finding at least 5 patients to enroll in the program. Discussed OxyContin savings program. She said they use a lot of OxyContin at that practice. She added that they are in the process of looking to add a pain management physician to their group because they end up maintaining so many of their patients after surgery they really need a specialist for this.
PPLPMDL0020000001	Independence	OH	44131	7/19/2012	Spoke with pharmacist, JT, who said he just does not see any movement of Butrans. He said he thinks he has filled one prescription since it came out. Reviewed appropriate patient type. He said he does not really fill a lot of opioid prescriptions & suggested I call on the Drug Mart location on York Rd. I let him know I also call on that pharmacy. I reminded him of 7 OxyContin tablet strengths for individualization of dose & asked that he remind prescribers of this if he notices that they are not adhering to the q12h dosing interval.
PPLPMDL0020000001					

	Independence	OH	44131	7/19/2012	Reviewed Butrans once weekly transdermal system of buprenorphine for patients with moderate to severe chronic pain. Dr Keppler asked me to tell him about buprenorphine as a molecule. Discussed partial agonism at mu opioid receptor. I reiterated that Butrans is for pain only. Spent time going over the appropriate patient type, showing him the range. He said they have a lot of patients who take 3-5 Vicodin per day. I told him some of those patients may be appropriate for Butrans. Discussed managed care coverage & introduced the Patient Experience Program. He agreed to finding at least 5 appropriate patients to give the kits to. Also discussed OxyContin q12h with 7 tablet strengths. Dr Keppler said he thinks OxyContin is a good, safe medication when used as prescribed for appropriate patients.
PPLPMDL0020000001	Mayfield Heights	OH	44124	7/19/2012	Quick call...Caught HCP as she was leaving for the hospital. I handed her a butrans formulary grid and let her know about the updates with Express scripts and Medco plans now covering butrans at the lowest branded copay and that those patients can expect to pay about \$15/month. She asked about medicaid. I told her that caresource will cover with a PA.
PPLPMDL0020000001	Lyndhurst	OH	44124	7/19/2012	Spoke to Erin about the movement of butrans and oxycontin. She said she has not seen any recent scripts for butrans but has a few regular customers on oxycontin. I explained the butrans patient type, the proper application and rotation, and the savings cards. Provided patient info guide and oxycontin conversion guide.
PPLPMDL0020000001	Akron	OH	44305	7/19/2012	I asked Brian what doses of OxyContin he fills most often? They fill all doses and he said that the probably fill the 40 and 60mg the most. I asked if he knows of any employer groups he sees the most. Brian said he doesn't know most of them but does see a lot of Medco and Express Scripts patients. I reviewed the Butrans formulary coverage.
PPLPMDL0020000001	Cleveland Hts	OH	44118	7/19/2012	I asked doc if he has been prescribing refills for butrans. He said tries to see how they do after the first month and then he would write for refills. I reminded him that butrans can also be called in. I showed him the formulary grid and pointed out that express and medco are tier 2 and now at the lowest branded co pay- \$15 for those patients. I asked him to remember oxycontin for patients that may be taking 4 tabs of percoct.
PPLPMDL0020000001	Berea	OH	44017	7/19/2012	Quick call, I asked Dr if he would find just 5 patients for the patient experience program and he said that he will. I asked if he will try to hand at least 2 out this week and he said ok.
PPLPMDL0020000001	Parma	OH	44129	7/19/2012	Quick call- Caught Dr Khoobball on his way out of the office. I asked if he learned anything new at the Butrans dinner program. He said he learned a lot & thinks he has a couple more patients he can try it on. I asked if he got feedback from the patient who he had started on Butrans a few weeks back. He said no.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/19/2012	Spoke to Patrick about Butrans and Medco formulary. I asked if he could help me with employer groups in the area with Medco prescription coverage. Patrick told me that the only ones he knows are Klein's employees and tire Express which are Goodyear employees. Pat said that they do not see the employer of patients when prescriptions are filled.
PPLPMDL0020000001	Berea	OH	44017	7/19/2012	I asked Dr how will he know if Butrans is covered for patients unless he starts giving it a try and finding out first hand if patients can afford it or if he gets call backs. He said I have a point. I asked if he would try just 3 patients with commercial insurance and we will see if they are covered for Butrans. He said he will and he has been keeping it in mind.
PPLPMDL0020000001	Independence	OH	44131	7/19/2012	Quick call- I asked Dr Trickett if she has given out any Butrans Patient Experience Kits. She said she has not but Butrans is in her brain as an option. She said she thought of Butrans for a Medicare patient recently but knows she cannot use it there. I agreed that access on Medicare plans can be difficult & asked her to think of other patients who are similar clinically but who have commercial insurance. She said she would do her best.
PPLPMDL0020000001	Akron	OH	44305	7/19/2012	Dr asked me where the Butrans copay cards were. I showed how they were out by the front desk. I asked why and he said he has a patient Tuesday that he initiated Butrans for and couldn't find the cards. The secretary was calling the patient to provide the card. I asked what the patient was taking previously. Dr said it was a tramadol patient complaining of pain and he said instead of titrating the IR opioid that he initiated Butrans 5mcg. I reviewed the inclusion and exclusion criteria for Butrans from the opioid-experienced trial. Dr said he treats all conditions from the study and will continue to use since he has seen such good results.
PPLPMDL0020000001	Parma	OH	44134	7/19/2012	Spoke with Mercedes, pharmacist, & Ravi, a new technician at this store. Discussed Butrans dosing & titration, as well as use of supplemental analgesia. Mercedes asked if a patient can use 2 of the 5mcg patches. I told her this has not been studied & is not recommended per the FPI. Discussed automatic savings with e-voucher & OxyContin savings cards.
PPLPMDL0020000001	Independence	OH	44131	7/19/2012	Quick call- Passed back OxyContin sales piece & showed Dr Pal 7 tablet strengths for individualization of dose. Also reminded him of titration ability every 1-2 days. Butrans dosing reminder, also reminding him it can be titrated after day 3. Dr Pal said he has been writing OxyContin & has one patient on Butrans. He then thanked me & walked away. Spoke with Jill & asked if she has patients give her their prescription coverage card. She said she does not. I suggested she consider doing this as it can help save on callbacks regarding insurance coverage for medications.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	7/19/2012	Was speaking with Darlene about updated formulary and dr walked up to say hello. Discussed Butrans with dr and staff. Dr said they do have Caresource patients. Dr Azem and Darlene were glad to know it is covered.
PPLPMDL0020000001	Lyndhurst	OH	44124	7/19/2012	Discussed criteria for Caresource coverage. Dr and Darlene said it sounds easy enough to get approved. Dr said her Butrans patients are all doing well and likes the patch technology.
PPLPMDL0020000001	Lyndhurst	OH	44124	7/19/2012	Spoke to Lia, tech, as Tom was busy. I explained the butrans proper application and rotation using the patient info guide. She said she has seen some scripts for it but didn't know much about it. Provided oxycontin conversion guide as a tool for pharmacist.
PPLPMDL0020000001	Olmsted Falls	OH	44138	7/19/2012	In our previous conversations you said you have patients in mind for Butrans who are currently taking 5mg vicodin around the clock, have you initiated Butrans for this type of patient? He said he has not, I asked what is really holding him back and he said he forgets and also, he has a fear that it will not be covered on managed care. I let him know about the Medco and ESI updates, he said that he will try it. I reviewed that low dose OxyContin may be an option for Med D covered patients and showed the grid.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/19/2012	I asked dr if he has been using the OxyContin copay cards? Dr asked why and I said that the cards that I left a month ago have not been used and that it seemed like he used to use them much more frequently. Dr said he has not had the need. Dr claimed he has a lot of cash paying patients and Medicare. I informed him that cash paying patients can use the cards. I asked Liz about their insurance plans for their patients. Liz said they have 6 BWC patients, 81 cash paying, 20 Medco, 35 ESI, and lots of Medicare and Medicaid. Discussed Butrans and OxyContin coverage.
PPLPMDL0020000001	Independence	OH	44131	7/20/2012	Quick call- I reminded Dr Jack of his interest in Butrans during our last discussion & also how he committed to starting some patients on it. He said he has been thinking of it & just needs reminders, then walked away.
PPLPMDL0020000001	Akron	OH	44320	7/20/2012	I asked Dr Adams to Use Butrans for her tramadol or vicoden patients who are still having pain and she may consider adjusting the dose. Told dr that Butrans should be the product used when patients need an opioid analgesic for an extended period of time. I asked dr to identify patients that may fit that indication. Dr said she still continue to look for appropriate patients.
PPLPMDL0020000001	Garfield Hts	OH	44125	7/20/2012	Dr Sadowski said he just got some paperwork back for the patient he gave Butrans to. I reminded him how we discussed this likelihood because the patient has Medicare. I asked if he would be willing to do the prior authorization. He said he would. He asked Deena for the paperwork & filled it out, handing it back to her. Deena sent it over to the insurance company. I asked Dr Sadowski if he has patients who are clinically similar to this patient who may have commercial insurance, having more access to Butrans. He said he is "actively looking" for more patients for Butrans.OxyContin reminder for appropriate patients with Medicare due to favorable
PPLPMDL0020000001	Cleveland	OH	44130	7/20/2012	Spoke with Dave, pharmacist, & reviewed Butrans dosing & appropriate patient type. Discussed titration after 3 days to a maximum 20mcg. Also discussed supplemental analgesia. Reviewed e-voucher for eligible customers & discussed OxyContin savings program/eligibility. Dave said he did not need any cards.
PPLPMDL0020000001	Parma	OH	44129	7/20/2012	Dr Roheny said he needs to find a Butrans patient. I agreed. I told him it was probably not as difficult as he thinks. I asked him to think about his practice, perhaps even some of the patients who he saw this week. I asked if he could think of any off hand that were ages 40-60, still working, who he is treating month after month from pain from a chronic condition. He looked up & said that he actually can think of a patient who fits that description. I asked him to tell me more. He said this patient is probably around 45 years old, has a job, & takes 3-4 Vicodin 5mg per day. I showed him the initiation guide & showed him how patients taking less than 15mg hydrocodone per day would start at Butrans 5mcg & patients taking up to 40mg hydrocodone per day would start at 10mcg. I asked what dose he thought he would start that patient on, based on this information. He said he thinks the patient would probably do best starting on 10mcg. Discussed titration ability after 3 days & use of supplemental analgesia. I showed him his trial/savings cards & asked him to be sure to give the patient one. He said he will talk to the patient about Butrans when he comes in again. I also reminded Dr Roheny that OxyContin could be an option for appropriate patients who are beyond the Butrans range.
PPLPMDL0020000001	Brooklyn	OH	44144	7/20/2012	I asked Dr Detwiler what makes someone a good candidate for a long-acting opioid. He said basically if the short-acting isn't controlling someone's pain around-the-clock, it is time for something long-acting. He said he has a lot of patients on OxyContin. He added they are usually elderly patients with multiple conditions causing pain. He said he used to be a director of hospice, so he is comfortable writing strong & long-acting opioids, but he is also very cautious in how he does this. I agreed that appropriate patient selection is very important. I asked if he always doses OxyContin q12h. He said not usually & said most patients need to take it 3 times per day. I reminded him that q12h is the only recommended dosing interval. I showed him 7 tablet strengths, asking him to consider increasing the tablet strength instead of the dosing interval. He said he just forgets those are there. I asked if he sees a potential place for a product like Butrans that offers once weekly transdermal dosing with an opioid analgesic in the CIII class. He said maybe & asked about insurance. Reviewed coverage & asked him to focus on appropriate patients ages 50-60 who have commercial insurance. He said he would do this. Reviewed dosing & gave him initiation guide.
PPLPMDL0020000001	Mayfield Heights	OH	44124	7/20/2012	Spoke to Jessica about the butrans indication and the positioning. She said they only see a few scripts a month maybe. I asked if customers are presenting a savings card. She wasn't sure but she thinks the copay cost must be reasonable. I explained the trial month and the monthly savings for eligible customers.
PPLPMDL0020000001	Twinsburg	OH	44087	7/20/2012	Spoke with Lou, pharmacist, who said he has filled "a couple" of Butrans prescriptions since I saw him last. I asked if he has given out any trial cards. He said no & that they were patients already getting Butrans. I asked if he knew what they were taking before being put on Butrans. He said he couldn't remember specifically, but he thinks they were probably on Vicodin. He also said he is filling "a lot" of OxyContin as usual. I asked if he has seen any increase or decrease over the last few months. He said he has not noticed any change.
PPLPMDL0020000001	Akron	OH	44319	7/20/2012	Spoke to Jim and Andy about Butrans and OxyContin. I updated them both on the new formulary coverages with Butrans.I asked about the doses of Butrans they had in stock. They had the 5 and 10mcg and did not have any more Butrans copays cards. Jim ordered the 20mcg while I was there. I asked about employers for Medco and ESI, Summit County employees. Jim told me that Goodyear uses Medco, and Summit county uses their own pharmacy. New Choice? left copay cards and pharmacists told me that they have the largest stock of medicines of any pharmacy in the area.
PPLPMDL0020000001	Akron	OH	44310	7/20/2012	I asked Dr Cremer if he has seen any of his Butrans patients in recently for follow up appointments. Dr said he sees them often and all are doing quite well. Char also said that majority of patients on Butrans are BWC. I asked dr to continue prescribing for patients on vicoden who may need a dose adjustment and are suffering from a low back disorder or osteoarthritis. Dr said he will try to use Butrans more regularly.
PPLPMDL0020000001	Lyndhurst	OH	44124	7/20/2012	Quick call...I discussed the appropriate butrans patient as one failing on tramadol and coming in for a dose adjustment. She said she has not had a lot of opportunity to prescribe lately because she is working fewer hours. I informed her of the updated formulary status with express scripts and medco.
PPLPMDL0020000001	Parma	OH	44134	7/20/2012	Spoke with Nate, who said they fill quite a few Butrans prescriptions there. He said Dr Hernandez seems to write a lot. I asked if there are other physicians he would recommend I speak with about it, but he had no suggestions. Discussed titration after 3 days & supplemental analgesia. Discussed importance of adhering to the q12h dosing interval for OxyContin. He said they fill a lot of prescriptions for OxyContin there but are cautious when doing so. I agreed that he should be cautious when dispensing any narcotic medication.
PPLPMDL0020000001	Brooklyn	OH	44144	7/20/2012	Reviewed Butrans once weekly dosing with Dr Miguel & showed him dosages. Discussed how he could start patients on 5 or 10mcg depending on what their current dose of opioid is. Also discussed titration after 3 days & ability to take supplemental analgesia. Also showed OxyContin conversion guide to demonstrate what different doses of short-acting opioids look like & showed how those patients could be Butrans or OxyContin patients.
PPLPMDL0020000001	Uniontown	OH	44685	7/20/2012	Spoke with Rosemary about Butrans and OxyContin. Rosemary said they have the Butrans 5 and 10mcg and all the OxyContin doses. I reviewed key selling point for Butrans and showed her the formulary grid. Spoke about updates and asked about employer groups in the area that use Medco or ESI. Rosemary told me that Goodyear uses Medco, Summa in Green, and FedEx. She also told me that ESI and Medco are merging and the Summit County employees use Medco.
PPLPMDL0020000001	Mayfield Hts	OH	44124	7/20/2012	Quick call...Updated doc on the butrans formulary coverage. I explained that his patients with express scripts and now Medco plans are covering butrans at the lowest branded co pay which means they can expect about a \$15 copay. He said he has a lot of medco. He asked about more speaker programs. I told him we are working on it.
PPLPMDL0020000001	Mayfield Heights	OH	44124	7/20/2012	Spoke to Marcia about the indication and the positioning of butrans and how we are asking docs to prescribe butrans before going on to hydrocodone. She said that would be nice because they see tons of vicodin. I asked if she is seeing any butrans scripts. She said she did not and thinks that it was sent back. I discussed the proper application and rotation and left a patient info guide in case she gets questions.



PPLPMDL0020000001	Lyndhurst	OH	44124	7/20/2012	Spoke to Doc and NPs about the recent formulary updates with butrans. I explained that express scripts and now medco are covering butrans at the lowest branded co-pay. I asked if they have a lot of medco patients. Nancy said they have a lot. I asked doc if she is still finding new patients to initiate on butrans. She said she thinks of it after patients have started to take too many tramadol or vicodin. I told her that a great place to position butrans, I reminded her that oxycontin is an option for patients failing on percoet.
PPLPMDL0020000001	Independence	OH	44131	7/23/2012	Spoke with MA Denise & asked if they have started allowing lunches or appointments with the physicians yet. She said no. I reviewed Butrans appropriate patient type/range with her. She said they have some patients who get refill after refill of medications like Vicodin & Ultram. Also discussed savings cards for Butrans & OxyContin.
PPLPMDL0020000001	Parma	OH	44134	7/23/2012	Dr Silverman said he did not have time to stay for lunch. I reviewed Butrans once weekly dosing & appropriate patient type/range. Positioned OxyContin for appropriate patients beyond that range. Reviewed Butrans as the only CIII opioid analgesic that delivers medication over 7 days. He just thanked me & walked away.
PPLPMDL0020000001	Brooklyn	OH	44144	7/23/2012	Dr Charles said entirely too many patients complain of pain- some real pain, but some "fake pain". I agreed that appropriate patient selection is imperative when prescribing opioids to patients. I asked if he finds that he is referring more to pain management. He said he thinks he probably is. I asked what generally causes him to refer. He said he has some patients who have confirmed, real pain, who he has treated for various other things for a long time who he will maintain on pain medications himself. He added that it is the patients who are new, who come with the chief complaint of chronic pain that he refers out. Discussed Butrans appropriate type/range, & OxyContin q12h as an option for appropriate patients beyond that range. He asked me to review dosing. I showed him dosing & how he would start a patient on either 5mcg or 10mcg depending on their current dose of opioid medication. Dr Charles asked if patients can roll Butrans up & smoke it. I told him while I have not heard of that, Butrans is a CIII opioid medication & should be prescribed with the same type of caution he would Dr Keith said he had to go early today so he couldn't stay long to talk. I reminded him of our previous conversation about Butrans. Reviewed dosing once weekly, pointing out that Butrans is the only opioid analgesic in the CIII class that delivers medication for 7 days. Positioned Butrans for appropriate patients taking less than 80mg total per day oral morphine equivalent & OxyContin for appropriate patients beyond that range. He took the initiation guide, thanked me, & left.
PPLPMDL0020000001	Brooklyn	OH	44144	7/23/2012	Caught Dr Kansal at the window. Positioned OxyContin q12h for appropriate patients who are not well-controlled on their short-acting opioid analgesic, especially if they are taking oxycodone around-the-clock. Positioned Butrans once weekly for appropriate patients who are taking up to 80mg equivalent oral morphine per day, reminding him that Butrans is the only CIII medication that offers 7 days of drug delivery. He just thanked me & walked away. Spoke with Dorothy who said they are not longer taking new patients who call complaining of pain, asking to see Dr Kansal. She said they are referring out the more difficult-to-treat pain patients but are keeping a few of the ones who have not caused them any issues. I asked if she finds that pain management often sends patients back to them for their medication. Dorothy said this happens all the time. I asked what happens then. She said they just refer most of them to someone else who will prescribe the patient their medication.
PPLPMDL0020000001	Parma	OH	44134	7/23/2012	Quick call- Dr Mandat said he is still using Butrans with success. I updated him on favorable Medco & Express Scripts coverage, letting him know those patients can get Butrans at the lowest available branded co-pay. He said that was good to know.
PPLPMDL0020000001	Parma	OH	44134	7/23/2012	Spoke with pharmacist, Connie, who said she thinks they have one customer who gets Butrans so they do have some on their shelf. I asked what employer groups in the area use Medco or Express Scripts. Connie said she did not know of any. She said maybe some of the school systems, but she really does not know. She said she would start paying more attention to that. Discussed OxyContin savings cards & gave her one package. Reviewed eligibility requirements.
PPLPMDL0020000001	Parma	OH	44134	7/23/2012	Spoke with floater pharmacist & technician, Mary. I asked if Mary knows of any employer groups in the area who use Medco or Express Scripts for their prescription insurance coverage. Mary said she knows they have a lot of customers who have Medco & Express Scripts, but she does not know of any big employers specifically who have it. Updated them on Medco & Express Scripts favorable Butrans coverage, reminding them also about the savings program for Butrans. Reviewed OxyContin savings cards. They had enough cards.
PPLPMDL0020000001	Parma	OH	44134	7/23/2012	Spoke with Marko, pharmacist, who said he still has customers on Butrans. I asked if he has received any feedback from them. He said no. He said they must be doing OK since they are still on it. Updated him on Medco & Express Scripts coverage & asked if he can think of any employer groups who use them. He said no. I asked how he is seeing OxyContin being dosed. He said sometimes q12h but many physicians write it q8h. I asked if he ever suggests to those physicians that they increase the tablet strength of OxyContin instead of the dosing interval. He said he has done this, but the doctors always seem to want to keep it q8h. I told Marko OxyContin has only been studied & is only recommended to be dosed q12h.
PPLPMDL0020000001	Parma	OH	44129	7/23/2012	Quick call- Caught Dr Taylor at the window. She said she didn't have time today because she is just getting back from vacation & is very busy. I updated her on Butrans Medco & Express Scripts preferred status & delivered OxyContin broad formulary coverage message. She said she will keep both medications in mind.
PPLPMDL0020000001	Garfield Heights	OH	44125	7/24/2012	Spoke with nurse, Denise, & updated her on Butrans's favorable status with Medco & Express Scripts formularies. Let her know this means that appropriate patients with those prescription insurance carriers can get Butrans at the lowest branded co-pay. Also reviewed savings programs for both products. Denise said she would let Dr Abraham know. I asked about getting an appointment with him, but she said he is not interested in doing them right
PPLPMDL0020000001	Cleveland	OH	44130	7/24/2012	Dr Fedorko said he would look for Butrans patients. I tried to show him the patient profiles, but he said he did not have time. I let him know I replenished his supply of Butrans trial/savings cards since he only had 2 left. Positioned Butrans for appropriate patients who are not well-controlled on NSAID's/COX-2's and/or those who he is referring to pain management.
PPLPMDL0020000001	Northfield	OH	44067	7/24/2012	Spoke with nurse, Maggie, & pleaded my case again for an appointment with Dr Marshall to discuss Butrans. I reviewed appropriate patient type/range with her & asked if that sounded like the range of patients they see. She said yes. Discussed dosing & ability for patients to use supplemental analgesia. She promised to give me information to Dr Marshall & to recommend to him that he see me to discuss Butrans & appropriate patient types.
PPLPMDL0020000001	Parma	OH	44129	7/24/2012	Dr Chagin said he is actually referring most patients who need pain medication now. He went on to say that when patients call for refills of any pain medication, he gives them a list of pain management specialists for them to choose from. I asked what sparked this change in his practice. He said this is all due to House Bill 93. He said he just does not want to have to deal with pain medications anymore. I asked him if he thinks there is even a place for Butrans & OxyContin in his practice anymore. He said he maintains some patients. He added that if he has a patient who he knows & has treated for years, who he knows has legitimate pain, he will treat them, especially if they are an older patient. I asked him what about patients who are between the ages of 55 & 60- if they have a legitimate complaint about pain, if he trusts them, would he treat them? He said he would. I asked him what he is currently doing with patients who have legitimate pain who are no longer controlled on NSAID's or COX-2's. He said he would feel comfortable prescribing an opioid for them. I showed him "Jessica" patient profile. Positioned Butrans for patients like this. I told him even if he recommends that they see pain management, he can give them a Butrans 5mcg prescription, if appropriate, to give the patient something in the event that it takes awhile for them to get into pain management for an appointment. Asked him to give them Butrans Pt Experience kit, reviewing program. He agreed.
PPLPMDL0020000001	Cleveland	OH	44130	7/24/2012	I showed Dr Diab OxyContin 7 tablet strengths for individualization of dose. I told him I also wanted to make a case for Butrans once weekly for appropriate patients who are not well-controlled on their short-acting opioid around-the-clock. I pointed out the pain score reduction patients could expect from the FPI & reminded him that insurance coverage does continue to get better.
PPLPMDL0020000001	Brooklyn	OH	44144	7/24/2012	Spoke with Rhonda & updated her on Butrans's preferred coverage on Medco & Express Scripts. I asked what employer groups in the area use either of those plans. She said the majority of their customers have Medicare (AARP) coverage. She looked in her computer & said that the City of Brooklyn employees have Medco coverage. She said she could not think of anyone else. She said she would try to pay better attention to that. Discussed Butrans & OxyContin savings programs, reminding her that only patients with no type of government insurance can use the cards. She said they have some.
PPLPMDL0020000001	Parma	OH	44129	7/24/2012	Quick call- Dr Ortega saw me at the window & said he enjoyed the Butrans program last week. I asked if he learned anything there that he did not know before. He said not really, but it always helps to hear things again & to hear them from specialists. He said he is sure he will find more patients for Butrans. OxyContin 7 tablet strength reminder.
PPLPMDL0020000001	Akron	OH	44319	7/24/2012	Dr Yee told me that he just prescribed Butrans for a patient in a nursing home. Dr said that he had seen that the pain doctors are prescribing it and the patient was on vicoden and prescribed Butrans. I asked what dose he initiated the patient on & he said 5mcg. I told dr that he can titrate every three days and reviewed dosing. I asked dr to continue prescribing for his patients in his practice. Reviewed copy card information and asked for continued prescribing.
PPLPMDL0020000001	Akron	OH	44319	7/24/2012	I reviewed doses and indication with Andrew(pharmacist). I asked what doses they had in stock. He said they have the 5mcg only and have not seen a prescription recently. I asked Andrew about employer groups in Akron and he didn't have much knowledge but said that the city of Akron he believes goes with Express Scripts. Andrew knew that Summit County employees have Medco but couldn't remember what the name of the pharmacy downtown Akron was. He said that they can get a couple of local chain prescriptions than after that they have to go through the downtown pharmacy.
PPLPMDL0020000001	Brooklyn	OH	44130	7/24/2012	Spoke with Rene (pharmacist) & updated her on Medco & Express Scripts preferred status for Butrans. I asked what employer groups come to mind from the area who use those prescription insurance companies. She said she was not sure who the Plain Dealer uses & American Greetings uses Caremark. She said in Parma, she thinks that some of the auto companies use Medco. I explained that I was trying to gain this information so that I can bring coverage down to a local level for physicians. She said the doctors never seem to know what type of medical insurance, let alone prescription insurance their patients have. I let her know I have been trying to work with doctors & staff to encourage them to collect this information to help decrease call-backs. She said she would be surprised if any of them actually did that. Reviewed savings programs & eligibility requirements.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/25/2012	Provided Butrans opioid experienced trial inclusion/exclusion criteria and used it to support the appropriate patient type with the case studies. I asked if he believes Butrans has a place in his practice? Dr said he thinks it does and he may have a few patients that may benefit from it. Dr said he has used it before with good results. Dr wanted to know the main adverse events. I reviewed the adverse events >5% and he said nothing stands out. Dr asked about insurance coverage. Reviewed the formulary flashlight and discussed the copy cards with the trial offer. Dr said he will look to use it again.
PPLPMDL0020000001	Barberton	OH	44203	7/25/2012	Discussed Butrans and used the opioid experienced trial to define appropriate patients with the inclusion/exclusion criteria. Dr said he sees those types of patients and sees where Butrans may fit. I asked dr if he has patients on tramadol or vicoden for 3+ months who may need a dose adjustment? Dr said he does but not many. I asked dr to use Butrans for those that meet the indication. Provided dr the managed care grid and discussed the copy cards. Dr said he will use Butrans with that patient comes along.
PPLPMDL0020000001	Parma	OH	44129	7/25/2012	Elaine said she was sorry she missed the Butrans dinner program. I asked what her recent experience with Butrans has been. She said she doesn't know if she has really started anyone new on Butrans lately. Reviewed appropriate patient type & showed patient profile of "William". I asked if patients come to her like this. She said sometimes or sometimes they are on Vicodin plus tramadol or some other opioids. Positioned Butrans for appropriate patients who are taking less than 80mg equivalent oral morphine per day, especially if they are seeking some sort of medication adjustment. Discussed supplemental analgesia & titration. Reviewed Caresource prior authorization requirements, BWG, & commercial insurance coverage. I asked her to identify more Butrans patients & she agreed.
PPLPMDL0020000001	Bedford	OH	44146	7/25/2012	Dr Moulfawad said he has noticed that he has been writing more Butrans & more OxyContin lately. I asked him why he thinks that is. He said he is not sure, it is just something he has noticed. He went on to say that he likes OxyContin for the right patients because in general, patients tend to ask for it less frequently. He asked what I knew about articles & letters he has been seeing that someone is investigating companies who manufacture pain medications & their relationship with pain societies & physicians. I told him I do not know anything about this. He said there is an implication that there is an inappropriate relationship there which upsets him. Dr Moulfawad said he has been very careful about choosing appropriate patients. I agreed that he should continue to do this. I reminded him of our previous conversation when we discussed reduction in pain score. I asked if he thinks this is information that would be valuable to primary care physicians. He said he doesn't know & it would depend on the physician. He said he gauges if a medication is working on how the patient is functioning, not on a number.

	Beachwood	OH	44122	7/25/2012	Spoke with Jenny, Debbie, Jude, Carol, Jackie, Kristen, & Linda (nurses), who said they needed a review of Butrans insurance coverage because a few prescriptions were written for it that did not go through. I reviewed this information with them & Debbie (nurse manager) wrote down the information to keep on hand for reference. Spent time going over appropriate patient type/range & gave them initiation guides & slide-out tools, which they really liked. Showed them how to determine what the recommended starting dose for Butrans would be based on their current opioid medication. Reviewed Butrans dosing, titration, & ability for patients to take supplemental analgesia. They said they think many of their patients would benefit from a medication dosed once weekly. Showed them demo patch & how Butrans is packaged. Discussed Butrans as a CII opioid with abuse & addiction potential. Let them know prescriptions can be written with refills & can be called in. Reminded them of trial/savings program & reviewed eligibility requirements. Also gave them OxyContin conversion guides, which they said they liked as some patients do need OxyContin for their pain. I asked if they have patients rate their pain when they come in. They said they do. I gave them laminated pain scales & showed Butrans reduction in pain from clinical studies. They said they thought that was good.
PPLPMDL0020000001	Warrensville Heights	OH	44122	7/25/2012	Quick call- Showed Dr Zivich the OxyContin 7 tablet strengths & Butrans 3 patch doses. Positioned OxyContin for appropriate patients who could benefit from q12h dosing & Butrans for those who may benefit from a once weekly transdermal system.
PPLPMDL0020000001	Cleveland	OH	44124	7/25/2012	Quick call...I asked doc if he is still initiating patients on oxycontin. He said when he has to and when nothing else seems to work. I gave him a formulary grid and reminded him of the preferred coverage with many Med D
PPLPMDL0020000001	Cleveland	OH	44143	7/25/2012	Spoke to Tamara, MA, about the oxycontin conversion guide and how it can be a tool for doc when switching patients from vicodin or percocet to oxycontin. Also provided formulary grid. Doc is on vacation right now.
PPLPMDL0020000001	Maple Heights	OH	44137	7/25/2012	Spoke with pharmacist, Antuina, & reviewed Butrans update for coverage on Medco & Express Scripts. I asked if she knows of any employer groups who use Medco or Express Scripts as their pharmacy benefits manager. She said she didn't know & asked her tech, who also said she did not know. Antuina said they see a lot of Medicare & Medicaid. Discussed broad formulary access for OxyContin. She then got called away to help a customer.
	Parma	OH	44134	7/25/2012	Dr Hernandez said he has been prescribing Butrans & his patients are well-maintained on it. I asked if he has started any new patients lately. He said he thinks he probably starts at least one new person on it per week, sometimes more, & has others who he maintains on it. He said his patients really do well on it & he wishes more primary care physicians would understand buprenorphine enough to try some patients on it. He said most physicians just don't know how to treat pain in general. OxyContin 7 tablet strength reminder.
PPLPMDL0020000001	Munroe Falls	OH	44262	7/25/2012	I asked dr if he had initiated Butrans yet. Dr said she had not. I explained the opioid experienced trial and reviewed the inclusion and exclusion criteria. I asked if she felt comfortable as to where to place Butrans. Dr said she can think of a couple of vicodin patients and admitted that she needs to just remember it. I gave her conversion charts and asked her to place them in her exam rooms. Dr agreed.
PPLPMDL0020000001	Akron	OH	44320	7/25/2012	Showed Butrans inclusion/exclusion criteria for Butrans from opioid experienced trial. I asked dr if she sees patients with the conditions in the trial. Dr Adams said she does and osteoporosis and low back pain are the most common for her practice. I provided the Butrans indication again and showed the Butrans conversion scale and asked if she will initiate Butrans again? Dr said she will and likes that she can get it approved on CareSource.
PPLPMDL0020000001	Akron	OH	44312	7/25/2012	I asked dr McRoberts if he initiated a patient on Butrans? Dr said no but he feels it has its place. I asked where he thinks it will fit? Dr said he thinks he has some vicodin patients that Butrans may work for. I reviewed dosing, titration, and copy cards. Reminded of Medco and ESI.
PPLPMDL0020000001	Akron	OH	44313	7/25/2012	Dr said that he likes OxyContin because it works and it is covered well. I asked what he typically does for patient still in pain on vicodin? Dr said it varies for each patient but he either gives percocet or OxyContin. I asked for the dr to use the Q12h OxyContin. Dr said that cost is typically why he uses what he uses.
PPLPMDL0020000001	Barberton	OH	44203	7/25/2012	I asked dr if he has used any of his Butrans Experience Kits. Dr said he did a couple of weeks ago for a BWC patient. I asked dr if he has received a survey yet. Dr said he has not but should be soon. I told dr that following intramuscular administration of 2mcg/kg dose of buprenorphine, approximately 70% of the dose was excreted in the feces in 7 days. I asked dr what that means to him. Dr said that he has always liked Butrans and it just means that it is safe on the kidneys. Dr said he will continue to look for patients.
PPLPMDL0020000001	Maple Heights	OH	44137	7/25/2012	Spoke with Gunjeet (pharmacist) who said they had recently received a Butrans prescription, but it required a prior authorization, so it was not filled. I asked what plan it was. He said it was something he had never heard of before. I asked if it was possible that it was Medicare or Medicaid. He said yes, as about 80% of their customers have Medicaid. Reviewed update for Butrans on Medco & Express Scripts. I asked if they knew of any local employer groups who use Medco or Express Scripts. He said no. The technician added that the patient's place of work is not listed on their insurance cards. Discussed OxyContin 7 tablet strengths & q12h dosing.
PPLPMDL0020000001	Warrensville Heights	OH	44122	7/25/2012	Dr Dmitri said he tried Butrans on two patients & neither of them got filled because of insurance. He said he needed information on coverage so that this can be avoided in the future, because he wants to start using it, but cannot make his patients wait around for prior authorizations or denials. I agreed that this can be frustrating & confusing & let him know I was here to work with him & his staff to help them understand coverage. I showed him formulary grid & gave him Express Scripts info. I let him know that commercially insured patients will have the most access to Butrans, as well as BWC patients. Also discussed prior authorization requirements for CareSource. I let him know that Medicare is difficult to get Butrans covered on & encouraged him to stick with commercially insured patients. Reminded him of savings & trial cards for those patients. I asked him to tell me more about the patients he prescribed Butrans for. He said one was a 92 year old with pain from multiple sources. He said the other had good insurance & he wanted to avoid putting both on fentanyl because he said neither of them needed that much opioid medication. He also said he does not believe in chronic opioid therapy. I asked him where, then does he see a place for Butrans. He said for patients who will need it for 1-3 months to help them with rehabbing & physical therapy. Discussed OxyContin q12h dosing.
PPLPMDL0020000001	Akron	OH	44312	7/25/2012	Dr told me through window that he is still searching for Butrans patients however many of his patients he believes are good for Butrans have Medicare, Medicaid, or cash patients. I reminded dr to look for patients currently working with private prescription insurance. Dr said he will continue looking.
PPLPMDL0020000001	Waterford	OH	45786	7/26/2012	W - Continues to prescribe Butrans for patients. Just had a recent new start a few weeks ago. Could probably utilize Butrans more in the Medicare Part D community once coverage is available. Does have patients on OxyContin and doing very well. Will continue to utilize both products as needed. I - OxyContin low dose conversions from short acting opioids once the indication is met. Butrans for appropriate patients who meet the indication when uncontrolled on short acting opioids once a therapeutic change is requested. Review of Emma/William profiles in order to help identify appropriate patients for Butrans. Discussion of appropriate starting doses for Butrans based on patients current therapy. Patients can start on the 10mcg/hr dose if applicable. Review of formulary coverage for both Butrans and OxyContin along with savings card programs.
PPLPMDL0020000001	Waterford	OH	45786	7/26/2012	W - Had a recent 5mcg/hr new start for Butrans. Patient was uncontrolled on hydrocodone and needed a change. Likes having a CII extended release product as an option. Will continue to prescribe for Butrans. I - Butrans for appropriate patients who meet the indication when uncontrolled on short acting opioids once a therapeutic change is requested. Review of Jessica/Emma profiles in order to help identify appropriate patients for Butrans. Discussion of appropriate starting doses for Butrans based on patients current therapy. Review of the ability to titrate after 72hours with a max dose of 20mcg/hr. Review of formulary coverage for both Butrans along with savings card program.
PPLPMDL0020000001	Waterford	OH	45786	7/26/2012	W - Miral recently had 2 new starts with Butrans. She has been utilizing the 10mcg/hr as a starting dose because they are on higher doses of hydrocodone. I - Butrans for appropriate patients who meet the indication when uncontrolled on short acting opioids once a therapeutic change is requested. Review of Jessica/Emma profiles in order to help identify appropriate patients for Butrans. Discussion of appropriate starting doses for Butrans based on patients current therapy. Review of titration after 72hours with the max dose of 20mcg/hr. Review of formulary coverage for both Butrans along with savings card program.
PPLPMDL0020000001	Euclid	OH	44119	7/26/2012	I reviewed the butrans key messages and asked doc what keeps him from trying butrans for the appropriate patient. He said cost. I showed him the updated formulary grid showing the Medco and Express scripts is now covering butrans at a tier 2 copay. He smiled and gave a thumbs up. I asked if that means he will try butrans now. He said yes. I also reminded him of BWC coverage. I showed him the appropriate starting dose depending on current therapies.
PPLPMDL0020000001	Parma	OH	44129	7/26/2012	Spoke with MA Abbey & updated her on Medco & Express Scripts coverage at Tier 2 preferred status for Butrans. She said she is not sure if Dr Saul has tried it on anyone & has heard no feedback. Discussed appropriate patient type/range. I asked her to be sure to give Dr Saul my card & Butrans patient profile booklet & she agreed.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	7/26/2012	Spoke with Jeff about Butrans and OxyContin. Jeff said they do not have any Butrans in stock. They sent back expired 5 and 20mcg doses. Reviewed initiation and titration guide and discussed appropriate patients. OxyContin dosing and conversion guide discussion.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	7/26/2012	Kimse(pharmacist) was not knowledgeable about Butrans. Provided all key selling messages, titration, dosing and 72 hours for steady state. Showed application sites. Kimse did not have any in stock and said that Mckesson did not ever ship them any. The pharmacy has not seen any prescriptions. Provided Kimse with appropriate patient selection information from the initiation and titration guide.
PPLPMDL0020000001	Shaker Heights	OH	44122	7/26/2012	Quick call- Positioned OxyContin q12h for appropriate patients who can benefit from q12h dosing & Butrans for appropriate patients who he is referring to pain management, like we have discussed. Gave OTC samples. He just thanked me & walked away.
PPLPMDL0020000001	Parma	OH	44129	7/26/2012	Quick call- Positioned OxyContin for appropriate patients who could benefit from a q12h dose of oxycodone. Reviewed Butrans dosing & asked him to identify one of his patients who he thinks could benefit from Butrans & once weekly dosing. Spoke with MA Shari & updated her on Medco & Express Scripts coverage for Butrans.
PPLPMDL0020000001	Shaker Heights	OH	44122	7/26/2012	Spoke with floater pharmacist & reviewed Butrans appropriate patient type/range. Showed initiation guide table on pg 6 to demonstrate range. Discussed e-voucher for eligible patients & OxyContin savings cards. Also reviewed OxyContin q12h dosing.
PPLPMDL0020000001	Mayfield Heights	OH	44124	7/26/2012	Window call only...I asked HCP is she is still having success with butrans. She said that most patients seem to like it. I gave her an updated formulary grid and explained how patients with medco and express scripts can now get butrans for about \$15 with the savings cards.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	7/26/2012	Dr asked if there is anything new with Butrans. I told her that there was but asked if she had any new news for me about using the product. Dr said she has not. I asked her if she has patient with Medco or ESI. Dr said that those are her top two plans. I gave her the new managed care information and asked her to prescribe it for her vicodin patients needing a dose adjustment. Dr said she will prescribe more ??
PPLPMDL0020000001	Euclid	OH	44119	7/26/2012	Spoke to Laurel about the movement of butrans and oxycontin. She said she still has not seen any butrans scripts and just gets regular customers on oxycontin now - no issues. I explained the patient type and proper application. Provided patient info guide and oxycontin conversion guide.
PPLPMDL0020000001	Stow	OH	44224	7/26/2012	Dr came in quickly and asked what is new with Butrans, he said unfortunately he has not written it he is still doing more of the procedures. I asked him if he was faced with a patient who is not doing well on their short acting, would Butrans be something he would use and he said yes, he said they need more options for long actings and this offers 7 days. he would definitely write it. I reviewed managed care with him.
PPLPMDL0020000001	Richmond Heights	OH	44143	7/26/2012	Spoke to Robin, MA, about the oxycontin formulary status and the eligibility for the savings cards. She said that doc is not taking samples or savings cards and especially not for oxycontin as he is trying not to prescribe any oxycontin. Doc is on vacation until next week.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	7/26/2012	Caught dr through window and asked how her Butrans patients are doing? Dr said she has not heard anything so that must be a good thing! I asked dr what patient types she initiated on Butrans? Dr said patients that she felt were taking too much IR opioids. She said she likes the 7 day patch.
PPLPMDL0020000001	Olmsted Falls	OH	44138	7/26/2012	I showed William patient profile and the reduction in pain scores. I asked if he would try this type of patient and see what results he sees. He said that he will try to remember. I showed the trial cards and asked if he would keep them out so he will remember, he said ok.
PPLPMDL0020000001	Berea	OH	44017	7/26/2012	I showed the patient experience program and asked Dr if he would start the patients so he can see the feedback. He said that he will.
PPLPMDL0020000001	Berea	OH	44017	7/26/2012	Quick call, I asked Dr if he would start a patient on Butrans, now that managed care coverage is very good. I reviewed the Medco and ESI as well as commercial coverage and that patients will pay as low as \$15 per month. He said he will keep it in mind.
PPLPMDL0020000001	Euclid	OH	44119	7/26/2012	Spoke to Dave and Tonika about the movement of butrans. Both confirmed that they don't recall dispensing it and that it was probably sent back because it wasn't on the shelf. I explained that patient type and the proper application and rotation. Discussed and provided the oxycontin conversion guide. He thought it was helpful.

PPLPMDL0020000001	Highland Heights	OH	44143	7/26/2012	Window call...Showed doc the the butrans clinical study in opioid experienced patients. I explained that those patients got a at least a %30 impovrement in there pain score on butrans. I asked if that sounds like what he is seeing clinically. He said he doesn't know, just that some patients like it. Gave him an updates butrans formulary grid.
PPLPMDL0020000001	Solon	OH	44139	7/26/2012	Dr Zaidi said he is still switching patients to OxyContin. I asked if he & his patients are seeing the results they expect. He said yes, everyone is doing well & he has not had any problems with the switches. I asked if he has seen an increase in referrals for new patients from primary care. He said he has had a large increase. I asked what the typical patient from primary care comes in on. He said they are on high doses of opioids- higher than he would have ever expected from primary care physicians. I asked for an example. He said many patients have come in already on OxyContin 80mg 3 times per day plus oxycodone for breakthrough pain. I reminded him that OxyContin is only recommended for q12h dosing. He said he knows this & that when he writes it q8h it is in lieu of prescribing a short-acting opioid for breakthrough pain. I showed him Butrans "William" profile & asked if he ever sees patients like him, taking hydrocodone around-the-clock. He said this is a rare occurrence & most commonly, if patients are taking that, they are also on other opioids simultaneously. He said he has thought of trying to use Butrans, but for his patients, it just would not be a strong enough medication. Reviewed appropriate range of patients. He said I should probably just focus on OxyContin with him.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	7/26/2012	Introduced Butrans Experience Program to Dr Azem. Dr said that she thinks its a great idea to have patients feel more involved in their treatment with Butrans. Dr said the surveys will help her chart the patients progress on Butrans. Dr Azem said that Butrans has been works very well for her patients with great success. I reminded dr that she can titrate every 72 hours if necessary.
PPLPMDL0020000001	Stow	OH	44224	7/26/2012	Abby said she has written Butrans but has not had any in the past couple of weeks. I asked what types of patients is she using it in and she said usually patients whoare on Vicodin. I showed profile and she said like William. I reviewed titration and supplemental dosing and she said she didnt use supplemental in one bc she didnt want them taking 2 things, she didnt trust them with more than one opioid. I let her know about managed care coverage and she said that is great.
PPLPMDL0020000001	Cleveland Hts	OH	44118	7/26/2012	Quick call...I showed doc the initiation dosing of butrans - 5mcg for patients currently taking less than 30mg of morphine, 10mcg if they are taking greater than 30mg. I asked if he is titrating to 20mcg. He said maybe a couple. I reminded him that 20mcg is only a titration dose and not an initiation dose. I explained the oxycontin maybe a better option for patients several dose of percoet per day.
PPLPMDL0020000001	Stow	OH	44224	7/26/2012	Dr said she has not used Butrans and I asked what is preventing her and she said she has not seen right patient and I showed her patient profile of patient who is on NSIAD and instead of going to Tramadol or Vicodin a 3-4 times a day she has the option of Butrans 5 mcg. WE discussed titration and also managed care coverage with Butrans. I said for her patients who may be taking higher doses of Vicodin she has the option of Low dose
PPLPMDL0020000001	Parma	OH	44129	7/26/2012	Dr Khoobball said he heard from his patient who he has on Butrans. I asked how he is doing. He said the patient is doing very well- even better than he would have expected. I asked what dose he is on. Dr Khoobball said he is on 10mcg. He added that he had been prepared to titrate, but it has not been necessary. He also told me he spoke with another physician who told him that he uses Butrans 5mcg without incidence in his practice for his cancer patients, but he has found that with the 20mcg, patients seem to report more cases of application site skin reactions. He asked me if this is true. I showed him adverse events in FPI. Also discussed proper application & importance of rotation of the patch. He said that made sense. I asked if he has other patients who he thinks could benefit from Butrans. Dr Khoobball said most of the patients who he has on hydrocodone only take it PRN, but he is ready to use Butrans for a patient as soon as he sees a good candidate.
PPLPMDL0020000001	Stow	OH	44224	7/26/2012	Janet said she has written a couple of Butrans and she was very rushed today. She said she has had good results with it and likes it. I asked what types of patients is she looking at and she said patients usually come in on Vicodin so when they are not doing well would be good for Butrans. I reviewed titration and steady state and managed care coverage with Butrans.
PPLPMDL0020000001	Stow	OH	44224	7/26/2012	Laura said she has a patient or maybe 2 on Butrans and she said as far as she knows they are doing well. I asked how she is titrating and she said she has not had to. I reviewed titration with her as well as patient types and she said she is using it in patients who are taking Vicodin 5 or 7.5 4 times a day. I reviewed managed care coverage and she said that is great and this is something that they are all talking about writing more.
PPLPMDL0020000001	Stow	OH	44224	7/26/2012	Spoke with Corey and he said he has seen more Butrans from the PAs upstairs. HE said there are no problems with managed care and I reviewed that with him. I asked what they see in regards to long acting and he said fentanyl and short acting. I reminded him of Trila cards and to make sure the patients are using those.
PPLPMDL0020000001	Stow	OH	44224	7/26/2012	Dr said he has started to write alot more of Butrans. HE said other than the patient he saw today who had a bad skin rash from it he is getting good results from it. I asked what type of patient he is writing it in and he said all kinds of patients. I said are you writing them in patients who are coming in on short acting like the ones in the profiles under 80mg morphine equivalent, and he said some are, he said that doesnt mean anything, if it is the right product and it works for him, than he writes it. HE said he has patients who are on Vicodin and they are making them go to the new one that has less acetaminopjon and it is brand. I said if they are not controlled, Would you write Butrans for those patients and he said yes. I reviewed managed care with him adn the staff.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/26/2012	I asked Dr Parikh if he had initiated a patient on Butrans yet? Dr said that he has not but he intends to. I asked dr if he has any clinical reservations in using Butrans? Dr said he did not it was just a matter of identifying the right patient. I asked him what he felt what the right patient was? Dr said the Medco patient on vicoden who still complains of pain. I told dr that that seems like an ideal patient for his practice. I gave dr the Medco/ESI updated information and asked for the Butrans business.
PPLPMDL0020000001	Barberton	OH	44203	7/27/2012	Asked dr if she has initiated OxyContin or Butrans to a new patient recently. Dr said she has not but she has a number of patient on OxyContin and said she thinks Butrans is a good product. I showed dr the inclusion/exclusion criteria from the opioid experienced patients and asked her if she has patients fitting that description. Dr said she does and agreed to try Butrans for her next patient on tramadol/vicoden needing more.
PPLPMDL0020000001	Parma	OH	44129	7/27/2012	Dr Roheny said he did not have much time today. Positioned Butrans for appropriate patients who are aged 40-60, with commercial insurance, who he is treating for pain from a chronic condition. Reminded him that during our last conversation he had thought of a male patient, in his 40's, who takes Vicodin daily. I asked him to identify additional patients like this & try them on Butrans if appropriate. He said it is not always that easy. OxyContin broad formulary coverage message. Spoke with Terry & Lorraine & updated them on Butrans preferred status with Express Scripts & Medco.
PPLPMDL0020000001	Beachwood	OH	44122	7/27/2012	Quick call- Reminded Dr Barrett of our last conversation when we discussed Butrans for appropriate patients with BWC since insurance coverage has been his biggest hurdle in prescribing. Reminded him that BWC is paying for Butrans with no prior authorization & passed back commercial coverage grid. OxyContin broad formulary coverage message.
PPLPMDL0020000001	Independence	OH	44131	7/27/2012	I asked Dr Jack what the down side of trying an appropriate patient on Butrans would be. He said he knows he would be using it. He said me being in there reminding him helps. I told him something must be missing if he is still not using it. He said he will find someone for it.Offered OxyContin conversion guide, but he said he didn't want it.
PPLPMDL0020000001	Parma	OH	44129	7/27/2012	Quick call- Positioned Butrans once weekly for appropriate patients taking less than 80mg equivalent oral morphine per day who suffer from moderate to severe chronic pain. Dr Rakhit just waved & walked into a room.
PPLPMDL0020000001	Cleveland	OH	44125	7/27/2012	Spoke with pharmacist, Beth, & updated her on Butrans coverage at tier 2 for Medco & Express Scripts national formularies. I asked what employer groups in the area she knows of that's employees use Medco or Express Scripts for their pharmacy benefit manager. She said she is newer to this location & used to work in Brecksville. She said she knows the City of Brecksville employees have Medco prescription coverage & she added that she thinks the teachers had it also. She said she knows Cleveland Clinic employees have Caremark right now. Discussed OxyContin savings cards, but she said they did not need any at this time.
PPLPMDL0020000001	Akron	OH	44310	7/27/2012	I asked dr if any of his Butrans patients have been in for follow up appointments. I asked if the Medicare patients he initiated on Butrans have called in or said it was too expensive? Dr said he has not heard from them. I asked if he knew what pharmacies the patients got their Butrans filled and he said he did not know. I reviewed case studies and asked again for his tramadol/vicoden patients needing a dose adjustment to be initiated on Butrans and showed the conversions chart. I told him about the Medco/ESI wins and asked him to think of patients with that insurance for Butrans. Dr said he will continue to find patients. I checked with Ruth about the copay cards and she has them in her sample closet.
PPLPMDL0020000001	Akron	OH	44312	7/27/2012	I asked dr if he had identified any of his patient on vicoden that would be appropriate for Butrans. Dr said he has not and that if a patient of his has been on an opioid for more than 12 weeks he refers them to pain management. I told dr that I respected his position and asked him if he would ever consider initiating Butrans for that type of patient then referring? Dr said he never thought of that but he would consider it. I showed dr the new Medco/ESI formulary grid and asked for the business.
PPLPMDL0020000001	Uniontown	OH	44685	7/27/2012	I asked dr how his patients are doing on Butrans. Dr said as far as he knows they are doing well and said that he likes the patch technology but hes not sure how his patients like it. I asked why and he said that he was told that the patients want pills. I told dr that the patients on Butrans can use IR opioids as supplemental analgesia. Dr said he understands and will continue to think about it and use the experience kits. Gave Kelly(ma) the updated Medco/ESI formulary updates.
PPLPMDL0020000001	Beachwood	OH	44122	7/27/2012	Quick call- Passed back Butrans Express Scripts update & let Dr Tabbaa know about Medco preferred status. OxyContin broad formulary coverage message. He just thanked me & walked away.
PPLPMDL0020000001	Akron	OH	44307	7/27/2012	Spoke to Jeff(pharmacist) about Butrans and OxyContin. I asked if he has seen Butrans? Jeff said he has not and has the 5mcg in stock. I provided key selling points and asked about what doses he sees for OxyContin. Jeff said that he has seen more because he heard that there is a shortage on percoet. He fills mostly the 20 and 80mg doses and sees them from Petrus, Mubishir and Shah. Left Jeff the OxyContin conversion and titration guide.
PPLPMDL0020000001	Parma	OH	44129	7/27/2012	Spoke with technician who said Keith was busy dealing with a customer situation. I reviewed Butrans dosing, indication, & once weekly transdermal system. Updated her on recent Medco & Express Scripts preferred status. I asked if the technicians are usually the ones to put insurance information into their computer system. She said usually. I asked if she can think of any employer groups in the area who use Medco or Express Scripts. She said she doesn't know of any. She said some patient's cards have it printed on them, but some don't. She said she knows they do fill a lot of Medco & Express Scripts prescriptions, though. Discussed OxyContin savings cards. She said to check next time to see if they need more.
PPLPMDL0020000001	Akron	OH	44319	7/27/2012	I asked dr Wu if he had any patients that are on vicoden who need a dose adjustment? Dr said he thinks Butrans may fit for him but is concerned about his Medicare patients paying too much for it. I told dr I appreciate his concern and asked if he has any Medco/ESI patients? Dr said he figures he does but said that his older patients are the ones that need Butrans. I asked dr if he has patients under 65 that are currently taking IR products for 3+ months? Dr said he will consider Butrans.
PPLPMDL0020000001	Parma	OH	44134	7/30/2012	Dr Scanlon said he is still getting good results with Butrans. I asked him what it is about a patient or their case that makes him think of Butrans. He said usually if he is treating someone for pain & they are not well-controlled on their medication, he will either give them Butrans in addition to that therapy or he will take them off their current medication & start Butrans. Discussed dosing & titration to a maximum 20mcg. I asked if he finds that most patients do take something for supplemental analgesia. He said yes & added that when they start Butrans, it allows them to take less of their other medication, so he likes that aspect of it. Reminder of OxyContin as an option for appropriate patients beyond the Butrans range.
PPLPMDL0020000001	Parma	OH	44134	7/30/2012	Quick call- Lynda said she was just returning from vacation & could not talk long. Positioned Butrans for appropriate patients who are not well-controlled on their medication treating their moderate to severe chronic pain. Gave her an initiation guide with slide-out tool. She thanked me & said she would look through it.
PPLPMDL0020000001	Parma	OH	44134	7/30/2012	Positioned Butrans for appropriate patients ages 40-60 who he sees in his office who are not well-controlled on 3-4 tramadol per day. Dr Mandat asked if he has savings cards in the closet. I let him know he does & pointed out patient information booklets also. Updated him on preferred status for Butrans on Medco & Express Scripts formularies.
PPLPMDL0020000001	Parma	OH	44129	7/30/2012	Updated Jackie (pharmacy manager) on Butrans coverage with Medco & Express Scripts. She said she has still not seen any prescriptions for Butrans. Reviewed appropriate patient type/ range. I asked what area employers have Medco or Express Scripts coverage for their medications. She said she does not know of any. She said they do not generally ask customers where they work & they do not enter that information into their computer system. Discussed OxyContin savings cards & offered some, but she said she still has some.
PPLPMDL0020000001	Parma	OH	44129	7/30/2012	I reminded Dr Laluk of our previous conversation regarding appropriate patients ages 40-60, who are working, suffering from pain from a chronic condition such as osteoarthritis or spinal stenosis, not getting relief from their current therapy. I showed him patient profiles, pointing out 3 different patient types where he may find Butrans to be an option. Discussed once weekly transdermal dosing & Butrans as the only CII long-acting opioid available. Reviewed abuse/addiction potential. I asked what the usual treatment is for someone like the patients we were discussing. He said generally tramadol or Vicodin up to 3 times per day. Positioned Butrans for appropriate patients with commercial insurance or BWC who report to him that their 3 tramadol or Vicodin are not controlling their pain around-the-clock. I asked if he would use Butrans in that patient type & he said he will. He asked about use in elderly patients. Let him know there are not any clinical restrictions, but explained Medicare coverage & prior authorization. Discussed trial/savings offer. He asked me to leave more cards. I asked where OxyContin fits into his practice. He said he uses it in nursing home patients occasionally.
PPLPMDL0020000001					

PPLPMDL0020000001	Parma	OH	44134	7/30/2012	Dr George said he really hasn't used Butrans much. I asked if he has found that he is referring more frequently to pain management. He said yes, unfortunately, due to the recent House Bill. He said patients have to wait a long time to get in to pain management because so many primary care physicians are doing the same thing. Positioned Butrans for appropriate patients who he is sending to pain management if they fit the indication. Discussed Butrans as the only long-acting CIII opioid available but advised about abuse/addiction potential. Reviewed appropriate patient type/range & discussed OxyContin as an option for appropriate patients beyond the Butrans range. He asked how Butrans is with elderly patients. I told him there are no restrictions clinically, but explained Medicare coverage & prior authorization. I asked Dr George to think of appropriate patients ages 40-60, with legitimate pain from conditions such as spinal stenosis, osteoarthritis, or spondylolsthesis, especially if their current therapy is not adequately controlling their pain. Dr George said that makes sense & that he does want to help his patients with legitimate pain because he understands what it is like because he has pain from spondylolsthesis. He asked for savings cards & put one in his pocket.
	Akron	OH	44312	7/30/2012	Followed up on last call and provided appropriate patient(s) for Butrans. Reviewed "Emma" case study on Ultram. DR once again complained about price and asked me for cash prices. I asked dr if she believed in the product clinically? Dr said she may use it but still wanted to haggle over the cost of Butrans and the cost of Ultram. I asked her if she had any private insured patients on Ultram? Dr did not want to answer and said she may use Butrans but not in the Ultram patient...nothing else learned.
PPLPMDL0020000001	Parma	OH	44129	7/30/2012	Passed back Express Scripts announcement for Butrans & updated Dr Taylor on Medco/Express Scripts coverage on tier 2. She said insurance is always denying everything & then she walked away. Spoke with Mary & reviewed Butrans coverage & appropriate patient type. She said Dr Taylor has referred out a lot of patients who she thought were taking pain medications for the wrong reasons. I agreed that she should screen her patients & treat only those in legitimate pain.<font color=blue><b>CHUDAKOB added notes on 08/08/2012</b></font>Good next call objective Ashleigh!
	Copley Northfield	OH	44321	7/30/2012	Saw dr at front desk and asked him if he has anything to report about his OxyContin patients. Dr said he likes using it because it works and it has good formulary coverage. confirmed lunch for Wed.
PPLPMDL0020000001	Akron	OH	44067	7/30/2012	Spoke with floater pharmacist & presented information on Butrans trial/savings cards & OxyContin savings cards. Reviewed eligibility requirements for both products. Also let him know that Marc's uses Relay Health's e-voucher, offering eligible patients automatic savings. He said he would leave my information for Greg & the other pharmacists.
	Akron	OH	44333	7/30/2012	I asked dr at window how his OxyContin and Butrans patients are doing and if he has anything to report on the status of his patients. Dr said that he has seen both his Butrans patients back for follow ups appointments and both are doing well. He mentioned that one patient found it to be expensive but decided to maintain therapy. Dr said he couldn't remember the plan.I reminded dr that he can titrate every 72 hours if necessary.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/30/2012	Followed up on last visit about Butrans. Reviewed CIII, dosing, titration, steady state. Discussed inclusion and exclusion criteria from opioid experienced trial and backed it up with pain score reductions from FPI. Dr said she has not used Butrans yet but sees where it will be useful and agreed to use. Discussed new formulary wins and dr said she has plenty of Medco/ESI patients.
	Parma	OH	44134	7/30/2012	Quick call- Gave Dr Loyke a Butrans initiation/titration guide & asked him to keep it on hand in the event that one of his established patients presents with pain from a chronic condition & he thinks Butrans might be an option for. He just thanked me & walked away.
PPLPMDL0020000001	Copley	OH	44321	7/30/2012	Asked dr if he has seen his Butrans patient back in fort a follow up appointment. Dr said she has not been in yet and looks from 2 wks to a month for follow up. I reviewed dosing and told him steady state is 72 hours and he can titrate every three days if necessary. Provided inclusion criteria and spoke about Medco/ESI coverage. Dr said he will look for commercial insured patients.
	Akron	OH	44333	7/30/2012	I asked dr what product(s) his patients are on when he initiates Butrans? Dr said most are on vicoden or percocet. Dr said he still likes to initiate on 5mcg then titrate to 10mcg. I showed dr the conversion scale and asked him to initiate properly. DR said he does start patient on 10mcg when necessary. Reviewed Butrans patient information guide again.
PPLPMDL0020000001	Parma	OH	44129	7/30/2012	Dr Gigliotti said he was just thinking about me because "one of those Butrans people" had just come in for their follow-up appointment. I asked what the patient's feedback was. He said the patient said she got the trial of Butrans at no cost, but claimed she received only one patch for the trial. The patient said when she went back to get a refill, the co-pay was too high. Dr Gigliotti said the patient did report good pain relief with Butrans. He said her story sounded unusual & asked if I thought it sounded right. I told him patients are entitled to a box of 4 patches for the trial offer, unless he wrote the prescription for only one patch. He said he did not do this & wrote it for a month's supply. I told Dr Gigliotti if the patient was able to use the trial card, she also should have been able to use the co-pay card, which should have brought her co-pay down to \$15-20. I asked what pharmacy & what insurance plan. He said he was not sure. He said maybe the patient was not telling the truth. He asked Jazz if she knew about it but she said she did not. Jazz said the patient is coming back in 2 weeks & said she would ask the patient more questions & would let me know what was going on. I asked Dr Gigliotti if he would continue to look for appropriate Butrans patients & he said he would. Discussed OxyContin savings cards with him & asked about recent fills of Butrans and OxyContin. The pharmacy has filled Butrans for Shah and OxyContin for Labadini in recent weeks. Provided Butrans Medco/ESI wins and asked if they see any patients from Goodyear. Pharmacy tech said that they don't see too much employer information but does know that they have some employees filling at their location.
	Fairlawn	OH	44333	7/30/2012	Dr Fedorko said "he knows, Butrans". Positioned Butrans for appropriate patients who he is sending to pain management as a way to offer them medication while they wait to get into the specialist, reminding him that this can take up to a couple months. He said he will look for patients & walked into a room. Left OTC samples.
PPLPMDL0020000001	Cleveland	OH	44130	7/31/2012	Spoke with floater pharmacist & reviewed Butrans appropriate patient type/range & once weekly transdermal dosing. She said some patients seem to like having medication in patches rather than pills. Discussed savings programs for Butrans & OxyContin & let her know Giant Eagle customers will get automatic savings if they are eligible. Discussed eligibility requirements. She said she would leave my card for Christine.
	Cleveland	OH	44125	7/31/2012	Spoke with Dawn, reviewing Butrans once weekly transdermal dosing & appropriate patient type/range. She said they have never seen any prescriptions for it. Updated her on Medco & Express Scripts preferred status & asked what employers have either of them as their PBM. She said she could not think of any specifically. Discussed savings cards for Butrans & OxyContin & reviewed eligibility requirements for usage.
PPLPMDL0020000001	Cleveland	OH	44130	7/31/2012	Dr Pai said he found the Butrans program to be informative. I asked him to elaborate. He said he always is concerned about being perceived as an inappropriate prescriber just for having a few appropriate patients on pain medications because the government scares doctors into thinking that. He said the speaker made him feel a bit more comfortable with prescribing if absolutely necessary for some appropriate patients. He added that he does, however, still refer almost everyone to pain management. He said he is just not comfortable with patients on more than 1 or 2 pain pills at bedtime. Reviewed appropriate patient type & asked Dr Pai to think about Butrans for appropriate patients who he is referring out as an option to offer while the patient is waiting to get in to see pain management. I asked if he thought this was a place he could use Butrans. He said maybe. He added that if Butrans were covered on Medicare D plans, he would have a larger place for it as he is somewhat more comfortable writing pain medications for elderly patients, although he is still cautious. I asked if this is the population he generally uses OxyContin in & reminded him of favorable coverage. He said if he uses OxyContin, it is generally for severe cases & elderly patients.
	Macedonia	OH	44056	7/31/2012	Delivered broad formulary access message for OxyContin to Dr Diab. Also let him know that the two largest PBM's in the country, Express Scripts & Medco, have Butrans at a tier 2 preferred status, offering its patients access to Butrans for the lowest branded co-pay. Dr Diab said that was good & walked into a room.
PPLPMDL0020000001	Cleveland	OH	44130	7/31/2012	Spoke to Angie at front desk and asked to see the doctor. Was told that the only way I can see him is to get a lunch with him on a Friday only and he is booked for the rest of the year. Discussed Butrans with Angie discussing indication, CIII and 7 day transdermal patch.
	Norton	OH	44203	7/31/2012	Quick call- I asked Dr Sadowski if his patient for whom he has told me about who he prescribed Butrans for was able to get the medication after they did the prior authorization he did. He said he didn't have time to talk today because he was very late coming in this afternoon. He said he is not sure if she got it but he has a stack of paperwork he has to go through, so the answer may be in there. He said to check back another day & he would let me know. Spoke with MA Deena & asked her about it. She said she has not heard back from the patient personally & she was unable to contact her. She said she should have an answer for me the next time I come in.
PPLPMDL0020000001	Garfield Hts	OH	44125	7/31/2012	Window call.....I showed doc the oxycontin conversion guide and the flexibility of the dosing. I explained that 7 strengths allows for more slower titration as opposed to increasing supplemental analgesia.
	Mayfield Heights	OH	44124	7/31/2012	I showed doc the clinical studies data and how %50 of patients got at least a 30% improvement in their pain score after treatment with butrans. I asked her if she is seeing that kind of efficacy. She said that sounds about right. Left her a formulary grid with Medco and express scripts update.
PPLPMDL0020000001	Mayfield Hts	OH	44124	7/31/2012	I asked doc if he is directing patients to rotate the butrans patch site every 7 days. He said he tells them that and assumes that they are doing it. I reminded him that doing so might minimize the risks of the skin irritation that he previously spoke of. He said he has not been seeing it as much.
	Cleveland	OH	44143	7/31/2012	I reviewed the butrans key selling messages and patient type. I explained the graph showing that half of the patients studied got at least a %30 improvement in their pain score. I asked him if he access patients pain through pain scores. He said he goes by what his patients tell him. Nothing more learned. I discussed the medco and express scripts updates with Angie. She thought that \$15 is a much better co pay.
PPLPMDL0020000001	Lyndhurst	OH	44124	7/31/2012	I showed doc the initiation guide and the 4 possible application sites. I asked if she is directing them to rotate the butrans patch to a different site weekly. She confirmed that she does tell them that. I explained how proper application and rotation may result in better outcome. She said she has not had many issues with tolerability of the patch lately. I Provided the oxycontin conversion guide and reminded her of oxycontin as an option for patients failing on percocet monotherapy. Provided formulary updates.
	Akron	OH	44313	8/1/2012	Told Dr that he can titrate OxyContin every 1-2 days due to steady state at 24-36 hours and asked him if he finds the need to titrate doses often. Dr said he does titrate when patients need more analgesia. Showed dr the new managed care coverages with Medco/ESI and told him that BWC is paying for it. I asked dr if he has patients on IR opioids who may need a dose adjustment? Dr said maybe. I showed dr the Butrans initiation and titration guide and asked him to use Butrans in appropriate patients. Dr said he will look to use it.
PPLPMDL0020000001	Bedford	OH	44146	8/1/2012	Dr Moufawad said he really thinks he has been using more Butrans & OxyContin lately. He said he doesn't know why, but he has been trying to use more. He added that he is getting good results & patients are happy with Butrans & he wishes primary care physicians understood better how to use it & who to use it for. He said they should be using Butrans before sending patients to him. I let him know this is an area I am working on & asked if he has suggestions for how to get primary care physicians to try it. He said he is not sure because they are all so different. Spoke with Christina & updated her on Medco & Express Scripts tier 2 coverage for Butrans.
	Cuyahoga Falls	OH	44223	8/1/2012	Dr saw me and remembered that I had Butrans. I asked if he had used it and he said not yet but he plans on using it. I asked dr where he thinks Butrans will fit best in his practice and he said for his patients on an IR opioid and have chronic pain. I agreed and gave quick glance at the case studies. Dr asked about insurance coverage and I showed him the formulary grid. Dr admitted to having a good number of Medco patients.
PPLPMDL0020000001	Mayfield Heights	OH	44124	8/1/2012	Spoke to Jesse who said that he still has not seen any butrans scrips. I explained the patient type and the positioning of butrans. He asked how long the patch lasts. I reminded him that butrans is a once a week patch. I also discussed the oxycontin conversion guide as a tool. He liked the idea of it.
	Broadview Heights	OH	44147	8/1/2012	Spoke with Lisa B, pharmacist, & introduced myself & Purdue's products. She said they do not stock Butrans because they haven't seen any prescriptions for it, but they do have customers on OxyContin. Reviewed appropriate Butrans patient type/range & once weekly transdermal dosing. Gave her information on savings programs for Butrans & OxyContin & reviewed eligibility requirements. Lisa said that would be helpful as many patients are on multiple medications & have high co-pays.
PPLPMDL0020000001	Broadview Heights	OH	44147	8/1/2012	Spoke with Lisa B, pharmacist, & introduced myself & Purdue's products. She said they do not stock Butrans because they haven't seen any prescriptions for it, but they do have customers on OxyContin. Reviewed appropriate Butrans patient type/range & once weekly transdermal dosing. Gave her information on savings programs for Butrans & OxyContin & reviewed eligibility requirements. Lisa said that would be helpful as many patients are on multiple medications & have high co-pays.
	Bedford	OH	44146	8/1/2012	Spoke with new MA & introduced Butrans. She said Dr Haddad would not be able to see me today. They did not have savings cards for Butrans, so I left one package. Reviewed eligibility requirements. Also discussed broad formulary coverage for OxyContin & gave Senokot-S samples. I asked her to give Dr Haddad my card along with Express Scripts update for Butrans & clinical backgrounder. She agreed.
PPLPMDL0020000001	Parma	OH	44134	8/1/2012	Dr Hernandez asked if I saw the patient who just left his office & said that he just gave him Butrans. I asked if this patient was new to Butrans or was being continued. He said he is new to the brand. He added that the patient has back & leg pain & walks on crutches. Dr Hernandez said he likes Butrans because it has an interesting delivery system. He said many of the best medications are old molecules that simply have a new, innovative delivery system. He said he also likes it because it is effective. He asked for more OxyContin savings cards, which I gave him, reviewing eligibility requirements for usage.
	Akron	OH	44303	8/1/2012	I gave Rod the new Butrans managed care coverage with Medco/ESI. I asked him if he is aware of who the City of Akron and Summit County employees have for their prescription coverage. Rod looked up the information and said that they both go through Caremark/ESI and that Summit County does go through their own pharmacy in downtown Akron. The Caps Group?

PPLPMDL0020000001	Northfield	OH	44067	8/1/2012	Dr Lango said she was running behind & couldn't stay long for lunch. I updated her on Butrans tier 2 coverage on Medco & Express Scripts formularies, offering its patients the lowest branded co-pay. She said that was good to know & looked at the announcement. Also broad formulary coverage for OxyContin message. She said she has a patient on Butrans & then walked out of the room.
PPLPMDL0020000001	Sagamore Hills	OH	44067	8/1/2012	Dr Lenox came back briefly for lunch. He said he knows he should be writing Butrans & really doesn't know why he can't remember it. He showed me his file of Butrans literature & materials to prove his interest to me. I gave him a patient profile booklet & let him know this may help him identify patients in his own practice who may be appropriate for Butrans. He said he would look when he has time.
PPLPMDL0020000001	Parma	OH	44129	8/1/2012	Spoke with Dina, MA, who said Dr Salama was out of the office. Updated her on Butrans coverage on Medco & Express Scripts formularies. Let her know patients with either of these for their PBM can receive Butrans at the lowest branded co-pay. She said she would be sure to leave my information for Dr Salama. I asked if they needed any Butrans or OxyContin savings cards, but she said they had enough.
PPLPMDL0020000001	Broadview Heights	OH	44147	8/1/2012	Quick call- Saw Dr Samuel at the window. Passed back Express Scripts update for Butrans. Also informed him that Medco is covering Butrans at the lowest branded co-pay. He said that was good & then said he will keep it in mind. Broad formulary access for OxyContin message. Spoke with nurse, Margaret, & updated her on Butrans managed care & reviewed savings cards. She said she doesn't think Dr Samuel has anyone on Butrans & that he rarely uses OxyContin.
PPLPMDL0020000001	Broadview Heights	OH	44147	8/1/2012	Quick call- Saw Dr Samuel at the window. Passed back Express Scripts update for Butrans. Also informed him that Medco is covering Butrans at the lowest branded co-pay. He said that was good & then said he will keep it in mind. Broad formulary access for OxyContin message. Spoke with nurse, Margaret, & updated her on Butrans managed care & reviewed savings cards. She said she doesn't think Dr Samuel has anyone on Butrans & that he rarely uses OxyContin.
PPLPMDL0020000001	Macedonia	OH	44056	8/1/2012	Updated Eve on Butrans coverage on Medco & Express Scripts preferred status. She said they have many customers with both those plans. I asked what area employer groups have Medco or Express Scripts for their PBM. She said she does not know. She said they don't necessarily know where customers work. She said they haven't dispensed much Butrans. Reviewed patient type. Also discussed OxyContin savings cards. She said she still has some from last time.
PPLPMDL0020000001	Sagamore Hills	OH	44067	8/1/2012	Went through the first 2 vignettes for OxyContin Conversions program. I asked if these were patients like those he would put on OxyContin. He said he actually is referring more to pain management. I asked him what it is usually that causes him to refer patients- is it a certain level of medication, length of treatment, or other factor? He said anyone who he has on CII medications for pain is getting referred. He added that this is largely due to the House Bill. I asked if he is saying that everyone who he has on OxyContin is now being seen by pain management instead of getting their medication from him. He said not necessarily. He said that often times, he just sends them to pain management so that he has documentation of the patient being seen by pain management. He said he sometimes just wants the pain management specialist to see what he is treating the patient with & verify that he agrees that this is the right treatment for the patient. Dr Sevier said he then will continue to prescribe the medication for the patient. He said it is a matter of checks & balances. I asked where he sees a place for Butrans, with it being a long-acting opioid in the CII class. He said for patients with osteoarthritis or back pain. I asked if he would use it after tramadol? Or after Vicodin? He said most likely after Vicodin. He asked for a reminder literature piece to keep with him. He said it is just a matter of him thinking of it instead of automatically prescribing short-acting.
PPLPMDL0020000001	Akron	OH	44320	8/1/2012	Dr echoed Dr Adams about referring patients on pain medicine earlier. I asked what she typically will start a patient on who is in pain? Dr said it depends on the condition but typically either Ultram or vicodin. I asked if she finds herself titrating on Ultram. She said not typically. Dr stated that she moves to vicodin. I asked dr if she would consider initiating a patient on Butrans after Ultram for a patient with chronic pain? Dr said she will consider it but doesn't like prescribing extended release products. I asked if the Butrans patch made sense? Dr said it does and she will give it a try.
PPLPMDL0020000001	Akron	OH	44320	8/1/2012	I asked dr if she has had any recent starts with Butrans? Dr said she has not and the office has decided to begin referring patients to pain management earlier in their treatment. I asked dr what "earlier" means? Dr said the patients they believe are seekers or abusers are being referred and will not be seen along with patients who take too much IR opioids. I asked dr what too much is and she said that all the criteria has not been established yet. I asked dr to initiate Butrans on a patient who is taking 2-3 vicodin q4 or q6 who may need additional analgesia to initiate Butrans. Dr said she will let me know when they make the decision.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/2/2012	I asked if he believes Butrans would produce results similar to the pain scale reductions I spoke about in the FPI and if he had any reservations in using Butrans. Dr said he didn't have a reason clinically for not using it but just has not remembered to use it. I asked dr if he would place the Butrans conversion scale in his exam rooms to help him remember it? Dr said that that was a good idea and he will try to remember.
PPLPMDL0020000001	Independence	OH	44131	8/2/2012	Quick call- Dr Sundaram said he was running very far behind so he didn't have much time. Positioned Butrans for appropriate patients ages 50-60 who have legitimately painful chronic conditions who are not well-controlled on their current medication therapy. He said he would try to find some patients. Positioned OxyContin for appropriate patients beyond the Butrans range, especially if they are taking short-acting oxycodone around-the-
PPLPMDL0020000001	Akron	OH	44310	8/2/2012	I asked dr if she had an opportunity to use Butrans? Dr said she had not but said that Butrans seems like a good medication with a purpose. I reviewed case studies and asked her if she had patients that fit any of the cases? Dr said she will try it but did not answer my question.
PPLPMDL0020000001	Brooklyn	OH	44144	8/2/2012	Spoke with pharmacist, Cheryl, & updated her on Butrans coverage for patients with Medco & Express Scripts. I asked her what area employers use either plan for their PBM. She said she knows that Key Bank employees & General Motors employees have Medco. She said American Greetings & Cleveland Clinic have Caremark. She said she does not know of any others. Reviewed savings programs for Butrans & OxyContin. Cheryl said they did not need any more OxyContin savings cards because they do not have many customers who are on it.
PPLPMDL0020000001	Parma	OH	44129	8/2/2012	Myra said she couldn't talk long because she was very far behind. Updated her on Medco & Express Scripts preferred status for Butrans. Also reviewed prior authorization requirements for Caresource since she has told me several times that she has a hard time remembering that she can write Butrans for most of her Caresource patients. She said she was glad I reminded her & went into a room. Spoke with Dawn & reviewed coverage updates & let her know Caresource prior authorization will be done automatically through Smart PA in the next few months. She said that would help a lot. I asked if they currently are doing Caresource prior authorizations. She said they are willing to do them. Explained Butrans requirements & that most of their patients will have already met the requirements. She agreed.
PPLPMDL0020000001	Independence	OH	44131	8/2/2012	Spoke with MA Jill, who said Dr Pai is out of town until 8/13, then is out again from 8/17 until 8/30. Discussed Butrans managed care updates, including Express Scripts & Medco. I told her this is a testament of how Butrans coverage is improving. Also discussed OxyContin broad formulary coverage, including Medicare D plans. Jill said they have mostly all Medicare & some Medicaid. I asked her to leave formulary information for Dr Pai & she
PPLPMDL0020000001	Parma	OH	44129	8/2/2012	Quick call- Dr Tolentino said the Butrans dinner was "nice". I asked if it helped her think of patients in her own practice who may be good candidates for Butrans. She said she wasn't sure & then walked away. Spoke with Kathy & updated her on Medco & Express Scripts preferred status for Butrans & gave her formulary grids for OxyContin. She said she would try to work with Dr Tolentino to find patients.
PPLPMDL0020000001	Independence	OH	44131	8/2/2012	Updated Dr Trickett with Butrans on preferred status with Express Scripts & Medco & delivered broad formulary coverage for OxyContin message. She said this was great news. I told her this is evidence that Butrans coverage is getting better & managed care companies are taking notice. I asked about utilization of Butrans Patient Experience Kits. She said she has not used any & added that she hasn't really had anyone in lately. I asked what she meant. She said she hasn't seen anyone lately who has needed long-term treatment with opioids. I asked what she means by "long-term". She said for example, she would not prescribe Butrans for patients who only need opioid therapy for a few months. She said is thinking of patients who need opioid treatment indefinitely. She said if someone needs something for a few months, she would not use Butrans.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/2/2012	I asked dr what he can tell me about his patients on OxyContin and if he is still starting new patients? Dr told me about how Anthem BC/BS of Mass. has instituted a new state plan about IR opioids. The IR opioid can only be prescribed for 15 days. A new prescription for another 15 days can be prescribed. If the patients needs more IR opioids after 30 days, an ER opioid must be prescribed going forward. Dr said that he agrees with it and all states will adopt this plan. Dr said he still prescribes new OxyContin and does titrates often and has many patients on 80mg. I asked dr to prescribe OxyContin for his Medical Mutual patients since a large amount of his patients use that plan and it is \$20-25 per the OxyContin formulary grid.
PPLPMDL0020000001	Brooklyn	OH	44144	8/3/2012	Stopped Dr Miguel in the hallway with the Butrans Medco & Express Scripts announcement. He asked if Butrans is transdermal. I told him he is correct & reviewed once weekly dosing, showing him 3 strengths. Positioned Butrans for appropriate patients who are not well-controlled on Vicodin around-the-clock. Dr Miguel said he knows he has patients for this. I agreed that he probably sees patients who would be appropriate for Butrans daily. He said he is going to put the Butrans announcement where he will see it because he thinks he just needs to remember it. OxyContin broad formulary access message.
PPLPMDL0020000001	Barberton	OH	44203	8/3/2012	Dr told me that she placed a patient on OxyContin 10mg from percoct and patient was a Medicare patient. Dr said that patient called back and said that it would cost her \$360 for 1 month and could not afford it. Dr said she kept her on percoct due to cost. I asked what Medicare plan and she did not know the specifics. I asked dr to continue to use OxyContin in that place she had just done. Outlined appropriate patients for Butrans with Inclusion/exclusion criteria and asked for dr to identify patients on IR opioids that may need a therapy adjustment.
PPLPMDL0020000001	Cleveland	OH	44130	8/3/2012	Dr Munjapara said he couldn't stay long because his rounding ran late & he was behind. Showed OxyContin 7 tablet strengths & reviewed q12h dosing. Reviewed Butrans & positioned it for appropriate patients ages 40-60 with chronically painful conditions such as osteoarthritis or low back pain, for whom he is either starting on or continuing on opioid therapy around-the-clock. Updated him on Medco & Express Scripts. He said he would use it. Introduced myself & Purdue's products to Dr Kaushal, who is new to the practice. She said she has prescribed OxyContin but was not familiar with Butrans. Introduced Butrans to her, delivering core messages. Spent time going over appropriate patient type/range. Reviewed dosing & buprenorphine as a partial mu opioid receptor agonist. Discussed abuse & addiction potential. Positioned Butrans for appropriate patients who are ages 40-60, working, with a chronically painful condition, for whom she is getting ready to start on an opioid analgesic or who she is continuing on opioid therapy around-the-clock. Discussed formulary coverage & trial/savings program. I asked if she has patients who fit this description. She said she does & that she likes the idea of having a long-acting opioid in the CII class.
PPLPMDL0020000001	Cleveland	OH	44130	8/3/2012	Introduced myself & Purdue's products to Dr Dohar. He said he is familiar with OxyContin & has some patients on it. He asked me to tell him about Butrans as he was not familiar with it. Delivered core messages & spent time on appropriate type/range of patients. Discussed once weekly dosing & 3 strengths. Discussed buprenorphine as a partial agonist at mu opioid receptor & advised him of abuse & addiction potential. Positioned Butrans for appropriate patients ages 40-60, working, who have pain from osteoarthritis or low back pain for whom he is getting ready to start on an opioid regimen or for whom he is adjusting the dose of current opioid therapy.
PPLPMDL0020000001	Independence	OH	44131	8/3/2012	Discussed insurance coverage & trial/savings program. I asked if he could see himself prescribing Butrans for appropriate patients like those we discussed today & he said yes. Roman said he is still writing a lot of OxyContin & plans to continue. He said he has tried Butrans on a few patients but has not had great results. I asked him to elaborate. He said one female patient got blisters from it & discontinued. He said another patient said it did not work. I asked what dose the patient was on & if he was titrating them. He said he put him on 10mcg due to the dose of Vicodin he was on prior to Butrans. He said he did not try to titrate him to 20mcg. I asked if he allowed the patient supplemental analgesia. He said he forgot that he could allow that. I reviewed that with him. Roman agreed to continue trying Butrans on appropriate patients & said he will try again, this time not being afraid to titrate or allow supplemental analgesia.
PPLPMDL0020000001	Middleburg Heights	OH	44130	8/3/2012	Dr Mistry said he really should be using Butrans. He said he just never thinks of it. I reviewed the appropriate patient type/range for Butrans & asked him how frequently he sees patients like this. He said daily. I asked what proportion of them are ages 40-60 & working. He said most of them. Showed him initiation guide & dosing & walked him through how to figure out the recommended starting dose for each patient. He said he has so many patients who he treats with short-acting opioids around-the-clock & he would like to transition them to Butrans. He asked if he can allow them to take their short-acting with Butrans. Reviewed use of supplemental analgesia. Also discussed titration every 3 days to a maximum 20mcg. Dr Mistry committed to trying patients on Butrans & letting me know his clinical experience when I am in next time. Discussed OxyContin for appropriate patients beyond the Butrans range & reviewed q12h dosing. He said he writes it all the time.
PPLPMDL0020000001	Mogadore	OH	44260	8/3/2012	Dr said he is still writing Butrans as long as it is covered. I said managed care is the best it has always been. WE reviewed managed care and trial cards. I asked if he is seeing patients who are coming in for medication adjustments on short acting and he said yes, I said that is where you would write Butrans. He said he will continue but had to get back up to patients, behind for the day.
PPLPMDL0020000001	Brooklyn	OH	44144	8/3/2012	Stopped Dr Detwiler with OxyContin conversion guide, showing him 7 tablet strengths. Pointed out the intermediate doses. He said that was a good reminder. I handed him Butrans Medco/Express Scripts update. He said that was surprising, but good news then he walked into a room.
PPLPMDL0020000001	Cleveland	OH	44130	8/3/2012	Spoke with technician who said the pharmacists were unavailable. I updated him on Butrans coverage on Medco & Express Scripts. I asked if he knows of any employers who use these as the PBM for their employees. He said he does not. I asked if they generally know where customers work. He said not really, unless the company logo is recognizable & is on the card. He said they do not really pay attention to that. Discussed savings programs for Butrans & OxyContin & showed him information sheets on both.



PPLPMDL0020000001	Parma	OH	44129	8/3/2012	Spoke with Marian, pharmacy manager, who said she does not have all Butrans strengths but she does have some on the shelf as they have a few customers who get it. Updated her on Medco & Express Scripts preferred status. I asked her what employers that she knows of uses either of them as their PBM. She said over half their customers use Medco, so no specific employer comes to mind. She said she feels like everyone has Medco.
PPLPMDL0020000001	Independence	OH	44131	8/3/2012	Discussed savings programs for Butrans & OxyContin & e-voucher.
PPLPMDL0020000001	Cleveland	OH	44143	8/3/2012	Quick call- Caught Lisa at the window. She said they have been trying a few patients on Butrans & giving out the Patient Experience Kits. I asked what type of feedback she has received. She said she hasn't really talked to anyone yet. She then said she had to go see patients & walked away.
PPLPMDL0020000001	Mogadore	OH	44260	8/3/2012	I discussed the Emma patient profile and asked doc what he would do for patient that failed on tramadol. He said, 'you asked me that already'. I told him I wanted to make sure of his answer and I wanted him to consider another option to referring to pain mgmt. He said ok and he will try to remember.
PPLPMDL0020000001	Akron	OH	44319	8/3/2012	Dr said she had a patient on it but never saw them back. I asked if they were chronic and she said yes, they never came back though. I said do you feel like you do not see patient types like the ones in the profiles and she said she does. I said I feel as if there is something preventing you from writing Butrans and she said no, just habit. We reviewed patient types again and I did show her the graph in vis aid on page 6 on removal. We discussed titration and supplemental as well as managed care coverage. I said for you patients who are on higher doses of Vicodin she has the option of Oxycontin low dose.
PPLPMDL0020000001	Akron	OH	44310	8/3/2012	I asked pharmacist if they have filled Butrans? The pharmacist said they have not filled it and don't have it in stock. Reviewed initiation and titration guide. nothing else learned.
PPLPMDL0020000001	Mogadore	OH	44260	8/3/2012	Dr said that he has been using Butrans more often in the last couple of weeks. I asked dr why and he said that he just remembers getting good results from it. Dr said that his older patients like it instead of the alternatives. I asked dr if he sees himself titrating often? Dr said not really especially if he initiates on 10mcg.
PPLPMDL0020000001	Akron	OH	44319	8/3/2012	Joe said he has written Butrans but he said the patients have followed up with Dr McCluskey so he assumes they are doing well. I asked if he sees this as something that he would write every week and he said he didnt think. I asked if he sees patients on Tramadol or Vicodin every week and he said yes. I said when they come in for an adjustment, that is where he would write Butrans. We reviewed titration, supplemental dosing and also removal page. I reviewed managed care for both Butrans and Oxycontin
PPLPMDL0020000001	Akron	OH	44319	8/3/2012	Spoke with Thomas W. about Butrans and told him that the last time I spoke with him they had not filled Butrans and asked if things have changed? Thomas said that they have about 5-6 patient on Butrans. Thomas said that he has filled it for Cremer, Fouad, and Lababidi. Thomas said that currently they do not have any dose in stock but said the order for today has not been stocked and expects to have Butrans. Reviewed initiation and titration guide with Thomas.
PPLPMDL0020000001	Akron	OH	44319	8/3/2012	I asked dr Wu what he typically does for a patient on vicodin who needs more analgesia? Dr said depending on the dose he either titrates up or refers out. I asked dr to use Butrans for a patient(explained inclusion criteria) who has been on vicodin for 3+ months. Showed dr the placebo patch and the initiation and titration guide. Dr said he will consider it. Gave quick review of private prescription plans who are paying for Butrans and told him about the copy card.
PPLPMDL0020000001	Parma	OH	44129	8/3/2012	I reminded Dr Roheny how he has told me about a male patient in his 40's who he treats with Vicodin around-the-clock for his pain & how he has told me that he wants to offer this patient Butrans. He said he does & that is still true, but that patient has not been in yet. He assured me that this will be his next Butrans patient. He went on to say that patients do not seem to "want" to try Butrans. He said when he tells patients about it, they say they do not want to try. I asked him if these are patients who are doing well on what their current therapy is or if they are patients complaining that their current medication is not working. He said some of both. I asked him his thoughts on patients who are saying that what they are on is not working, yet they are unwilling to try something new that could potentially help them. He said this makes him think that patients are taking the oral medications just to get a high. I reminded him that Butrans is still an opioid & still carries abuse & addiction potential. I asked him why not at least have the patient try Butrans, reminding him they can take supplemental analgesia if necessary. Dr Roheny said this makes sense. Reminder for 7 OxyContin tablet strengths for individualization of dose. Left OTC samples.
PPLPMDL0020000001	Cleveland	OH	44143	8/3/2012	I reviewed the butrans key selling messages. Doc said he remembers. I asked where he thinks he would use butrans. he said maybe instead of vicodin. I showed him the Emma profile and asked him to consider butrans for a similar patient type. Informed him of the updated formulary status.
PPLPMDL0020000001	Cleveland	OH	44143	8/3/2012	Quick call....I discussed the butrans indication and the other key selling messages. I asked doc if he sees any opportunity for a product like butrans in his practice. He said not likely because he just does not have the right patient type. Thanked him for being honest.
PPLPMDL0020000001	Mogadore	OH	44260	8/3/2012	Dr said he has some patients on Butrans but he knows he probably has more patients than he knows. I said what do you do when patient calls in and medication is not working and he said it depends, usually increases it. I said that is where you would write Butrans. We also talked about the opioid naive patient and he seemed concerned about 7 day patch and I showed him vis aid and 50% leaving after removal and he said that is good, but he didnt think our graph was too impressive with the mean Buprinorphine levels he said there is alot of drop off. I asked if his patients complained of it dropping off or not lasting and he said no. I reviewed managed care with Butrans as well as Oxycontin as an option.
PPLPMDL0020000001	Uniontown	OH	44685	8/3/2012	provided quick Butrans message at window. I told dr that steady state is 72 hours for Butrans and to continue to identify patients who meet the criteria and indication. I asked Kelly if she has seen any patient surveys yet. Kelly said she has not seen them yet.
PPLPMDL0020000001	Akron	OH	44333	8/6/2012	I asked dr if he has any recent successes with Butrans? Dr said he patients are doing very well and said that he prescribed OxyContin to his last patient. I asked dr what the patient was on previously and dr said vicodin. I told dr that he can titrate every 1-2 days and Butrans 3 days or 72 hours. Gave office staff new Butrans Medco/ESI information.
PPLPMDL0020000001	akron	OH	44333	8/6/2012	Asked doctor if he has had follow up appointments with his Butrans patients recently? Dr said he had one of them set for a follow up last week and the patient cancelled. Dr said he has not heard anything from the patients about Butrans being too expensive or not working well enough. Reviewed Medco/ESI formulary information as well as a discussion about appropriate patients with case studies.
PPLPMDL0020000001	Cleveland	OH	44130	8/6/2012	Dr Fedorko said he thinks Butrans is a good medication for patients in legitimate pain. He said it is just that "90%" of patients on Vicodin do not have legitimate pain. I told him I was talking only about patients in legitimate pain, even if that was a smaller part of his practice. Reviewed appropriate patient type & discussed OxyContin as an option for appropriate patients beyond the Butrans range. Dr Fedorko said he no longer has any OxyContin patients. He said he would only ever consider it for patients dying & with severe cancer pain. Discussed OARRS & gave him information on how to sign up. Encouraged him to sign up for OARRS to help him protect his practice & to allow him to feel confident when treating patients with opioids that they are legitimate patients. He said he would do this. His staff (Mary Ellen & Mary Ann) said they would help him do this & would encourage it. Dr Fedorko said one of the problems with medications is prior authorizations, cost, & insurance. I told him this is why I encourage him to think of patients ages 40-60, still working, who fit the indication. Reviewed commercial coverage, as well as BWC. He said he always forgets that BWC pays for Butrans. He agreed to start using Butrans in appropriate patients with BWC. He asked that I continue to remind him of coverage here.
PPLPMDL0020000001	University Heights	OH	44121	8/6/2012	I reminded doc of the butrans patient type like Emma. He asked about the coverage particularly with express scripts and medco where patients can expect the lowest branded co pay. He asked about the starting doses again. I showed him the doses and explained the 5 and 10mcg starting doses.
PPLPMDL0020000001	Mayfield Heights	OH	44124	8/6/2012	Quick call....I gave doc a oxycontin conversion guide and showed her how 4 tabs of percocet 10mg/day is comparable to 20mg of oxycontin. I asked her to consider going to low dose oxycontin before increasing the dose of percocet. She said she does do that. I reminded her of the butrans indication and the formulary plans.
PPLPMDL0020000001	Mayfield Heights	OH	44124	8/6/2012	Window call....I showed doc the butrans demo patch and asked him if he is still considering it for his patients with mod to severe chronic pain. He said sure. I gave him a formulary grid and reminded him that butrans is now tier 2 preferred on medco and express scripts plans which means the lowest branded co pay.
PPLPMDL0020000001	Cleveland	OH	44130	8/6/2012	Spoke with John, pharmacist, & reviewed Butrans managed care coverage, updating him on recent changes with Medco & Express Scripts formularies. He said he has a lot of customers with Medco. I asked if he knows of any employers who use Medco or Express Scripts as their PBM. He said he could not think of any specifically off hand. Discussed OxyContin & Butrans savings programs. He did not need any cards.
PPLPMDL0020000001	Richmond Heights	OH	44143	8/6/2012	Doc asked if the coverage with oxycontin has gotten any better because he was having problems getting it approved so he has not been writing it much lately. I reviewed the covered commercial and med D plans. He said he has a lot of medicaid. I explained the coverage with caresource with a prior auth. I discussed the butrans patient type and the key selling messages. He was not familiar with it. He said he sees that there may be a place for it but many of his patients just want to take pills plus he mostly does not deal with savings cards/coupons. Provided cards anyway and he said maybe he would try it.
PPLPMDL0020000001	Akron	OH	44333	8/6/2012	Spoke to Donna about OxyContin. Donna said they continue to fill OxyContin but not as much as a year ago. Told Donna about steady state being achieved at 24-36 hours which means doctors can titrate every 1-2 days if necessary. Told Donna about the chief hazard being respiratory depression. Donna said they have all doses in stock.
PPLPMDL0020000001	Fairlawn	OH	44333	8/6/2012	Dr said he has not looked at the Butrans information yet. Provided OxyContin conversion and titration guide and new Butrans formulary coverage. Christy told me that the doctor is retiring at the end of this year.
PPLPMDL0020000001	Euclid	OH	44117	8/6/2012	Window call....I reminded doc of the butran and oxycontin patient type and the positioning of butrans. He said he still has not prescribed butrans. I asked him to think of butrans after patients have failed on tramadol monotherapy. Offered savings cards but he said he didnt need any.
PPLPMDL0020000001	Fairlawn	OH	44333	8/6/2012	Met Michele(pharmacist) and asked about the stocking of Butrans. Michele said that they only have 5 of the 5mcg and claimed she doesn't fill much Butrans. She said she splits the time with the other pharmacist. I reviewed the product with her and discussed new Medco/ESI coverage with her. I checked her stocking of OxyContin and copay cards. Sue(tech) told me that Dr Heim is being investigated.
PPLPMDL0020000001	Cleveland	OH	44144	8/7/2012	Updated nurse, Wendy, on Butrans preferred status on Medco & Express Scripts formularies. Also discussed OxyContin coverage with broad formulary access. Reminded her that both products have savings programs & reviewed eligibility. Wendy said she does not know if either physician has ever prescribed Butrans & said they wouldn't write OxyContin. Reviewed Butrans patient type & worked with her to schedule lunch. I asked her to give Dr Hilton & Dr Paul Butrans formulary update & she agreed.
PPLPMDL0020000001	Cleveland	OH	44130	8/7/2012	Handed Dr Diab Butrans Medco/Express Scripts announcement & showed OxyContin formulary grid, letting him know both medications are available on Medco & Express Scripts at the lowest branded co-pay. He put the Butrans notice on his desk. I asked him why not try it on a few appropriate patients since coverage has gotten better. He just said that was good & walked away.
PPLPMDL0020000001	Shaker Heights	OH	44122	8/7/2012	Positioned OxyContin for appropriate patients who may benefit from a q12h form of oxycodone. Handed him Butrans Medco & Express Scripts update & let him know patients with these PBM's can get Butrans at the lowest branded co-pay.
PPLPMDL0020000001	Richmond Heights	OH	44143	8/7/2012	I reviewed the butrans indication and the once weekly CII status. I showed him the initiation guide and the appropriate starting dose depending on their current therapy. Provided formulary grid.
PPLPMDL0020000001	Mayfield Hts	OH	44094	8/7/2012	I asked doc if he is still having success with butrans. He said he thinks so and advised me to talk to Monica. Monica said that a couple of patients said they couldnt afford he copay even with the savings card but they have one patient on it still. I discussed the formulary plans and the lowest branded co pay with express scripts and medco.
PPLPMDL0020000001	Beachwood	OH	44122	8/7/2012	Quick call-Updated Dr Myton-Craig on Medco & Express Scripts preferred tier 2 status for Butrans, letting her know that patients with these PBM's can get Butrans at the lowest branded co-pay. Also reminded her of BWC. She said she would find Butrans patients. Also reviewed broad formulary coverage for OxyContin.
PPLPMDL0020000001	Beachwood	OH	44122	8/7/2012	Spoke with Rina & reviewed updated Butrans formulary coverage information. I asked if she could think of any employers who use Medco or Express Scripts. She said she couldn't off-hand. She said she would try to pay attention to that & let me know. Reminded her of Butrans & OxyContin savings programs & reviewed eligibility requirements.
PPLPMDL0020000001	Cleveland	OH	44143	8/7/2012	I reviewed the patient type for butrans using the Emma profile - someone failing on tramadol ATC. I asked him to prescribe for commercially insured patients and explained that medco and express scripts is covering butrans at the lowest branded co-pay. I discussed the formulary coverage with Angie.
PPLPMDL0020000001	Mayfield Village	OH	44143	8/7/2012	I showed Joanna the patient profile of Emma and asked her if she sees patients like this. She said she does but the problem is coverage. I showed her the formulary coverage and that of medco and express scripts.

PPLPMDL0020000001	Munroe Falls	OH	44262	8/8/2012	Discussed Butrans, OxyContin and laxatives with the doctor. The dr mentioned that she sees patients with low back pain or spinal stenosis. I mentioned that Butrans has been studied in many different low back conditions and osteoarthritis and reviewed inclusion and exclusion criteria from opioid experienced trial. I reviewed Emma case study and asked the doctor what she typically does when a patient on Ultram presents with continued pain? Dr said she will either titrate the dose or go to vicoden which she doesn't always want to do. I asked her if she feels like Butrans would be a good solution for the patient? DR said it does sound like a good option because an extended release product would be best. I discussed the initiation and titration schedule, indication, application sites, and conversions from IR opioids. I asked dr about OxyContin and what criteria she uses when she places a patient on OxyContin. Dr said when she has a patient on more Ultram or Vicoden and wants more and more that she will go towards a long acting opioid like OxyContin. I reviewed the dosing schedule as Q12h and discussed the appropriate patients. Told dr about laxatives and benefit to patients.
PPLPMDL0020000001	BEDFORD	OH	44146	8/8/2012	Spoke with pharmacist, Shonda, & reviewed Butrans dosing & appropriate patient type/range. She said she hasn't seen any prescriptions for it. Showed her that patients can take supplemental analgesia with Butrans if necessary. Updated her on Medco & Express Scripts preferred tier 2 coverage for Butrans. Gave her OxyContin savings cards & reviewed eligibility requirements.
PPLPMDL0020000001	Parma	OH	44129	8/8/2012	Quick call- Positioned Butrans for appropriate patients who he is treating for pain from a chronic condition, for whom he would otherwise prescribe hydrocodone. Positioned OxyContin for appropriate patients with more severe pain.
PPLPMDL0020000001	Parma	OH	44129	8/8/2012	Reviewed Butrans appropriate patient type with Lucy. Also discussed dosing & transdermal delivery. Advised her of Butrans as a CIII opioid analgesic with abuse & addiction potential. She said she does not treat a lot of patients for any type of chronically painful conditions as she treats mostly acute matters at this point. She said she likes the idea of the once weekly dosing & thinks patients might like that option. Also discussed OxyContin for appropriate patients beyond Butrans, as a q12h dose of oxycodone. Discussed the importance of appropriate patient selection. Lucy said they do urine drug screens before prescribing controlled drugs of any kind for patients. She also said they run OARRS on patients. I told her these are 2 excellent ways for them to protect the practice & encouraged her to continue to use these tools.
PPLPMDL0020000001	Parma	OH	44129	8/8/2012	Dr Kushnar said she has not yet tried Butrans on anyone. Positioned Butrans for appropriate patients who are established & she knows/trusts, who she is treating for pain from a chronic condition such as osteoarthritis or spinal stenosis. I asked her to consider once weekly transdermal Butrans instead of short-acting around-the-clock opioid regimen. I updated her on Medco/Express Scripts coverage at the lowest branded co-pay & reviewed trial/savings program. I asked her what she or her patients had to lose by trying Butrans if appropriate. She said she guesses nothing. I asked if she thought she could find a few patients & she said she probably has a few.
PPLPMDL0020000001	Bedford	OH	44146	8/8/2012	Positioned OxyContin for appropriate patients with more severe pain, reviewing q12h dosing.
PPLPMDL0020000001	Parma	OH	44134	8/8/2012	Dr Moufawad requested more Butrans patient information booklets & savings cards. He added that he has been giving them both out & he ran out earlier this week. He asked me if NP's & PA's can prescribe CII medications. I told him that there was recently a change in law, allowing mid-level practitioners in Ohio to prescribe CII medications. He said on one hand, the government seems to want to limit the prescriptions for these medications, but then on the other, they are allowing more practitioners to prescribe. He said this does not make sense. Discussed importance of appropriate patient selection & OARRS. Updated him on Butrans coverage on Medco & Express Scripts & reviewed broad formulary access for OxyContin.
PPLPMDL0020000001	Parma	OH	44134	8/8/2012	I asked Dr Hernandez how he determines whether to increase someone's short-acting opioid or change/add a medication. He said it depends on many factors. I asked him, for example, if a patient came to him on 3 Vicodin & was saying it was not working, what would he do. Dr Hernandez said most of the time, he will change the medication & would choose Butrans for this patient. I explained that many primary care physicians say their patients will not want to make that change. I asked Dr Hernandez if patients really do say this. He said it is very common. I asked what he does in this situation. He said he tells the patient that he is not willing to prescribe the amount of short-acting they are asking for. He said he tells them it is their choice. They can choose to try Butrans or they can choose to find a physician who is willing to just give them what they want. He said he explains to patients that they are coming to him for pain relief & that Butrans may provide that for them. He said he tells the patients that he is the doctor & that it is their choice. I told him it sounds like he is doing the right thing. He said patients generally do well on Butrans. I also asked him to continue to prescribe OxyContin for appropriate patients & he agreed.
PPLPMDL0020000001	Akron	OH	44320	8/8/2012	I spoke to Dr Adams about proper patients for Butrans and reviewed inclusion criteria with her and asked her when she has a patient present to her that is on an IR product like Ultram or vicoden to use Butrans when you know the condition is chronic in nature. Discussed Caresource, BWC, Medco/ESI coverage.
PPLPMDL0020000001	Akron	OH	44320	8/8/2012	I asked dr Bonyo how comfortable prescribing percoet? Dr said he does not prescribe much but he will if he has to. I asked what differences he sees in percoet and OxyContin and showed him the conversion chart. Dr said it makes sense to prescribe OxyContin instead of percoet and he will look into it.
PPLPMDL0020000001	Copley	OH	44321	8/8/2012	I asked Jenna about Butrans and OxyContin and reviewed the products. I told Jenna about Medco/ESI wins for Butrans and asked if she sees patients with any local employer groups that use those plans? Jenna said she did not know but does have a couple of patients on Butrans. I asked about OxyContin and if she sees primarily refills or new prescriptions? Jenna said they are mostly refills. Left formulary information with her.
PPLPMDL0020000001	Copley	OH	44321	8/8/2012	I asked dr that when he prescribes a pain medicine the goal is to reduce the patients pain? Dr said yes but at 60%. I asked him what the other 40% is. Dr said because they want it. I asked him if he was to prescribe Butrans that the studies showed in the 20mcg dose that about 50% of the patients received a 30% reduction in pain. I asked if he would be happy about that? Dr said that a percentage of pain relief is subjective and its hard to tell. Dr said if the patient can afford the medicine and it works he will use it. I asked what he does with patient the patients that say they want their pills? Dr didn't really answer but said pain relief is subjective. I told dr to identify patients that have been on an IR opioid for 3+ months that have Medco or Medical Mutual insurance that may need a dose adjustment. These are patients appropriate for Butrans.
PPLPMDL0020000001	Parma	OH	44129	8/8/2012	Spoke with Heath, pharmacist, who said he does think he has one or two customers who are getting Butrans now. He said he does not remember who wrote the prescriptions. I updated him on Medco/Express Scripts preferred tier 2 status for Butrans, letting him know those patients would be getting Butrans at the lowest branded co-pay. Also reviewed e-voucher & OxyContin savings cards.
PPLPMDL0020000001	Barberton	OH	44203	8/8/2012	I asked Dr about his recent patient on Butrans. Dr said the patient came back in for a follow up and is doing well. I asked if it was a patient on vicoden? Dr said yes and he initiated on 10mcg. I asked dr what type of conditions he sees his patients suffering from such as spinal stenosis? Dr said low back pain is common but usually its just low back pain and they need to evaluate the problem then he medicates. I told him that those are the types of patients Butrans was studied in. Told dr to use his Butrans Experience kits.
PPLPMDL0020000001	Parma	OH	44129	8/8/2012	Dr Gigliotti said he did not have much time this afternoon due to having to deal with a hostile patient situation. Updated him on Butrans Medco & Express Scripts preferred tier 2 status, allowing those patients to get Butrans at the lowest branded co-pay. Also reviewed broad OxyContin coverage. He said to come back next week so we could talk more.
PPLPMDL0020000001	Akron	OH	44305	8/9/2012	I explained to Dr Vora the Emma patient profile and asked him how his most recent patient he switched to Butrans from Tramadol is doing. Dr Vora said his patient is doing well and had a follow up appointment and patient said the pain is better. I asked dr to continue to identify patients on Tramadol who are still complaining of pain and showed Emma case study.
PPLPMDL0020000001	Maple Heights	OH	44137	8/9/2012	Passed back Butrans Medco/Express Scripts announcement, pointing out to Dr Gene that patients with these PBM's offer appropriate patients Butrans at the lowest branded co-pay. Also told him this is evidence of continually improving Butrans coverage. He said this was good to know. Also reviewed Medicare D coverage for OxyContin. He just waved & walked away.
PPLPMDL0020000001	Beachwood	OH	44122	8/9/2012	Spoke with nurse, Carol, & reminded of her my last appointment, when we discussed Butrans & appropriate patient type. Reviewed dosing & transdermal delivery with her. I asked about utilization since that discussion. She said she does not think anyone has tried it. I updated her on Medco & Express Scripts tier 2 status for Butrans & also reviewed BWC & commercial coverage with her. Discussed savings programs for Butrans & OxyContin but she said they already have cards & patient information. She said she would leave the information in their lounge for the other nurses & doctors to see.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	8/9/2012	Goal was to identify the appropriate patient type by using the patient profiles. Reviewed the tramadol and vicoden patient and dr said she sees the benefit to using a product like Butrans but in the past it was a managed care/coverage/cost issue. Spoke about commercial insurance plans and cost associated. Discussed the copay card and trial offer. Dr said she was glad to hear about patient savings and wanted to know where the cards were.
PPLPMDL0020000001	Independence	OH	44131	8/9/2012	Handed Dr Jack Butrans Medco/Express Scripts announcement, pointing out that patients with those PBM's can obtain Butrans for the lowest branded co-pay. He said Butrans is "5, 10, & 20". I asked if he was telling me the dosing. He said yes. I told him he is correct on the mcg doses & his next step was to identify an appropriate patient & prescribe it for them. He said he will then walked away.
PPLPMDL0020000001	Fairlawn	OH	44333	8/9/2012	Introduced Butrans to dr using initiation and titration guide, placebo patch, main visaid to review adverse events. Discussed with dr the appropriate patient types and asked what his previous experience is with it. Dr said he remembers using it but the cost was too high and he changed them to something different. I reviewed the formulary for Butrans with dr and focused on under 65 year old patients with private prescription insurance. Dr said he has not used it again because they haven't see a rep in a while. Dr agreed to use it again.
PPLPMDL0020000001	Cleveland	OH	44130	8/9/2012	I asked Dr Kansal to tell me a little about the patients for whom he prescribes OxyContin- what patient types does he find it to be effective for. He said he has decreased the number of OxyContin patients he has & that he has gotten rid of many of them. I asked why. He said because he did not trust them. I told him patient screening & appropriate patient selection were very important & that he should be cautious when prescribing any opioid. Dr Kansal said he is weaning patients off OxyContin. I asked if he is talking about all CII opioids or just OxyContin. He said just OxyContin. I asked why he is targeting that specific medication. He said he does not want to be associated with the name. He said the negative media attention OxyContin has received has lead to a very bad stigma that he does not want to be associated with. I reminded him that he has told me in the past that he thinks it is a good medication for the right people. I asked if he feels that OxyContin is effective & safe. He said he does not have a problem with OxyContin clinically. I asked if he thinks Butrans has a place in his practice. He said he thinks he needs to move his savings cards & Patient Experience Kits to his exam rooms so he sees them more & remembers. He then moved the cards & kits.
PPLPMDL0020000001	Beachwood	OH	44122	8/9/2012	Roberta said she hasn't prescribed Butrans since she saw me last. I asked why not. She said she has offered it to patients, but they have not wanted to try it. She said she thinks patients do not think a pain medication that is not a pill will not work. I asked if the patients she is offering it to are ones who are not being well-controlled on their current medication. She said yes. I asked what her thoughts were on patients who are not getting relief, yet are unwilling to try a different option. She said it leads her to believe the patient is seeking pills for the wrong reasons. I reminded her of the ability to use supplemental analgesia if necessary, reminding her that patients do not have to "give up" anything when starting Butrans. She said this was a good point. Reviewed appropriate patient type, showing her "William" profile. Also reviewed managed care coverage, focusing on BWC & Medco/Express Scripts. I asked her to continue to try Butrans, reminding her that she is the expert, not the patient. Roberta said she would do this. She said she had recently given out an OxyContin savings card, but does not Spoke with Amy and asked her if she has seen any patients recently that she has filled Butrans for? Amy said that she did have a patient in just the other day as a new start on Butrans 5mcg from Dr Hegde. I asked if the patient was under 65 and what her copay was. Amy said the patient was over 65 but had private insurance through her husbands work and paid \$15 for 28 days of Butrans. I asked about fill rates of OxyContin. Amy said they have all 7 doses because they have at least one patient on each dose. I told Amy about the new formulary wins with Butrans about Medco/ESI. Amy said that Medco typically allows the patient 3 fills at the local pharmacy level then they require them to do mail order for the maintenance prescriptions.
PPLPMDL0020000001	Mayfield Heights	OH	44124	8/9/2012	Quick call...I reviewed the butrans commercial insurance plans including the recent updates with express scripts and medco. I explained that those plans now cover butrans at the lowest branded copay. Provided formulary information, but he said he did not need it. Also discussed OxyContin savings & broad formulary access.
PPLPMDL0020000001	Maple Heights	OH	44137	8/9/2012	Updated Jim, pharmacist, on Medco/Express Scripts coverage of Butrans at tier 2, the lowest branded co-pay. He said he fills a lot of prescriptions for those plans. Reviewed Butrans patient type/range & offered patient information, but he said he did not need it. Also discussed OxyContin savings & broad formulary access.
PPLPMDL0020000001	North Hampton	OH	45349	8/9/2012	Discussed going to butrans instead of choosing chronic hydrocodone therapy. She expressed frustration with chronic vicodin patients and asked about formulary. We reviewed the commercial plans, medco expresscripts, and bwc patients. She asked if I could set up a lunch and we were able to agree on a date for next week.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	8/9/2012	Spoke to Lori about the doctor's prescribing of Butrans and asked if she has prescribed it recently and if she knew whether the experience kits have been used. Lori said that there is a patient coming in on percoet complaining of pain today and that the doctor will consider Butrans as an option. I explained how Butrans can be titrated every 72 hours. I provided another managed care grid with new Medco/ESI info.
PPLPMDL0020000001	Highland Heights	OH	44143	8/9/2012	Quick call...I showed doc the butrans demo and asked if he has had to titrate the dose of the patch often. He said not too much and that he usually gives them a short acting for breakthrough pain. I reminded him that 20mcg is the max dose and that a low dose of oxycontin might be appropriate. He grinned.

PPLPMDL0020000001	Beachwood	OH	44122	8/9/2012	Dr Yokiel said it seems that BWC will not pay for anything anymore. He said patients can't get OxyContin without trying ER Morphine first & other long-acting opioid have even further restrictions. He said that is probably 25% of his patient population here. I let him know BWC is paying for Butrans, as is Medco & Express Scripts. He said that was good. Showed "William" patient profile with initiation guide. Reviewed dosing, pointing out that most of his patients would probably start at 10mcg, with some possibly titrating to 20mcg. He said he does want to try it more. Spoke with nurse, Vicki, who handles prior authorizations. She said BWC is not paying for Butrans. I told her that last I heard, there were no restrictions on Butrans for BWC patients. She said she had a denial on BWC. I asked if it was State BWC or private insurance. She said she could not remember & that she wished she would have written the patient down to refer to it. I gave her my card & asked her to alert me if she continues to find this is a problem. I told her her case was the first I had heard of BWC not paying for Butrans. She said she would keep trying & would let me know.
PPLPMDL0020000001	Independence	OH	44131	8/9/2012	Spoke with pharmacist, Dave, & reviewed Butrans update with Medco & Express Scripts. I asked if they fill prescriptions for those PBM's. He said yes, quite a few. I asked if he knows of any specific area employers who use them & he said he does not pay attention to that. Reviewed OxyContin q12h dosing.
PPLPMDL0020000001	Mayfield Heights	OH	44124	8/9/2012	Quick call.....reviewed the butrans patient type as one that may be failing on tramadol 300mg. I showed the initiation guide and how 10mcg would be an appropriate starting dose of butrans. Reminded him of the lowest branded co pay on medco and scripts plans.
PPLPMDL0020000001	Mayfield Hts	OH	44124	8/10/2012	Quick Call.....reviewed the appropriate patient type for butrans using the Emma profile. He asked for confirmation of coverage on BWC. I told him butrans is being covered by BWC and now at the lowest branded co pay for medco and express scripts plans.
PPLPMDL0020000001	Parma	OH	44134	8/10/2012	Caught Lynda at the window- passed back Butrans Medco/Express Scripts announcement, letting her know patients with these PBM's can obtain Butrans at the lowest branded co-pay. Also told her this was evidence of improving coverage. She said this was good news, thanked me, & walked away.
PPLPMDL0020000001	Northfield Center	OH	44067	8/10/2012	Spoke with floater pharmacist & updated him on Butrans Medco/Express Scripts coverage at tier 2 preferred. Also reviewed Butrans once weekly transdermal dosing. He said he has not dispensed much of it. Started to explain e-voucher for Butrans & OxyContin, but he got called away to help a customer & could not finish the conversation.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/10/2012	Spoke to Shelby about Butrans and OxyContin. Shelby said they have a couple of patients on Butrans and thinks one of them is Dr Narouze. I asked about employer groups she sees and she said that they pharmacists really dont see that information. Provided her with the OxyContin conversion guide and asked if he had all the doses. Shelby said they do and have patients on each dose. left initiation guide for Butrans and told her about
PPLPMDL0020000001	Akron	OH	44333	8/10/2012	Found out from Crystal Clinic that Dr Greene is not with the practice anymore and has moved to the Cleveland Clinic.
PPLPMDL0020000001	Lyndhurst	OH	44124	8/10/2012	Doc said she is seeing worse skin irritation with butrans than with fentanyl. She said some patients really like it and dont mind the irritation but other don't like the side effect. She said just wrote for a couple of patients. I discussed the recent improvements in formulary coverage and she thought that was great.
PPLPMDL0020000001	Lyndhurst	OH	44124	8/10/2012	HCP stated that she just refilled a script for butrans for a male patient that seems to be doing well on it and not having any skin reaction. I discussed the dosing options depending upon current therapy and that 20mcg is the max dose.
PPLPMDL0020000001	Akron	OH	44310	8/10/2012	Dr came back to lunch room and asked if I needed a signature. Told dr that I have scheduled medicines and I have Butrans and OxyContin. I asked dr what she typically does when a patient comes in complaining of pain and is on tramadol or vicoden? Dr said it depends on their condition but she would insured patients like Medco/ESI/medical mutual. Dr said she will consider using and likes the 7 days.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/10/2012	I asked dr what conditions he treats OxyContin for. Dr said he is not prescribing ER opioids much at all anymore. I asked why and he said that most of his patients are controlled on IR opioids. The precall from the LRx report confirms his limited use of SEO opioids. I showed dr the initiation and titration guide for Butrans and asked what he does for patients on Ultram complain of being in pain. Dr said he is referring out earlier now. I asked if a CIII, 7 day transdermal system makes sense to switch a patient to? Dr said that it does make sense and he might use it in that location. I asked dr to try the product so he can make a clinical opinion on its efficacy and safety.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/10/2012	I presented Butrans inclusion/exclusion criteria for Butrans with dr and followed up with EMMA case study. I asked dr if using Butrans in a patient complaining of pain on Ultram instead of titrating? Dr said it does make sense especially in the patients he believes to be chronic. Dr said he will remember to use. Nothing else learned.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/10/2012	Spoke with Anna(pharmacist) about Butrans and OxyContin. Pharmacist said she has not filled any Butrans from what she can remember and does not have any on the shelf. Anna did say that she fills OxyContin regularly. I reviewed the conversions from IR opioids and she said she can't understand why so many doctors are prescribing so many IR opioids but don't prescribe OxyContin and the Q12h option. Anna said that she has a patient of Dr Anne Grantham who is taking Ultram, vicoden and percocet all at the same time. Pharmacist said she is not going to fill them anymore and request the patient starts with OxyContin.
PPLPMDL0020000001	Akron	OH	44319	8/10/2012	Dr out on Fridays however did speak with staff and the MA about Butrans and OxyContin. Staff did not know much about Butrans. Provided all key selling messages and gave quick review of formulary status.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/10/2012	I asked dr if he has initiated Butrans yet. Dr said no. I asked dr if he believes in the product and if there is anything holding him back? Dr said no and he just has not found a patient yet. Dr admitted that his practice has really slowed down and that it is going to take longer to find a patient on an IR opioid that he believes needs an ER opioid product. I told dr that I understand that and asked him to focus on the patient under 65 who has private commercial insurance and explained the average copays.
PPLPMDL0020000001	Parma	OH	44134	8/13/2012	Spoke with pharmacist, updating her on Butrans tier 2 preferred status on Medco & Express Scripts. She said they have a lot of customers with those plans. I let her know that these appropriate patients can obtain Butrans at the lowest branded co-pay. Also discussed e-voucher & OxyContin savings cards along with eligibility requirements.
PPLPMDL0020000001	Fairlawn	OH	44333	8/13/2012	I asked dr Oyakawa what criteria he uses to determine of OxyContin is appropriate for a patient. Dr said if the patient has a chronic condition such as low back problems, osteoarthritis or cancer pain. I asked dr if he has patient with cancer pain and he said he has a few and they are on OxyContin. I used the main visad to show appropriate patients and conditions. I asked if he feels comfortable titrating every 1-2 days if necessary. Dr said he typically will start low but does try to equate the IR opioid to OxyContin. Used conversion and titration guide to discuss conversions. Reviewed managed care with CCRx and AARP along with commercial plans. Used Butrans main visad to discuss appropriate patients. I asked dr what he typically does with a patient on tramadol or vicoden whom he is considering an adjustment? Dr said he either titrates the dose or use another product and said that Butrans seems like a product that would fit in that place. Discussed case studies with Emma and William. Reviewed managed care coverage with Medco/ESI, BWC. Dr said he thinks Butrans is a great product but he just needs to remember it. I gave dr the conversion scale to have him put it in his lab coat.
PPLPMDL0020000001	Akron	OH	44333	8/13/2012	Discussion with dr as he was getting to office in morning. I showed dr the CCRx and AARP OxyContin formulary cards. I asked dr if he has patients with these plans? Dr said he has many of them and is aware how good the coverage is. I asked about his Butrans patients and how they are doing? Dr said he has not heard about any problems and likes the outcomes so far. I asked dr to continue to find those appropriate patients we have spoken
PPLPMDL0020000001	Cleveland	OH	44130	8/13/2012	Reviewed Butrans core messages with Dr Popa. Dr Popa said she "hates" patients with pain & she doesn't "deal with" them. I asked if she is referring to pain management. She said sometimes, or she just tells the patients to get off all narcotics. I asked if that was realistic for every patient on opioid analgesics. She didn't answer. Positioned Butrans once weekly transdermal system for appropriate patients who she is sending to pain management, especially if they have to wait for a month or more to get in to see the specialist. She agreed to write a script of Butrans for patients who she is referring. Showed initiation guide pg 6 to show how different patients would be initiated on Butrans if appropriate. Updated her on Butrans coverage at tier 2 preferred for Medco & Express Scripts. Dr Popa said drug reps do not understand that even when a patient only pays \$15 out of pocket for a preferred prescription, it ultimately still leads to higher costs for health insurance, so it is really not a savings for the patient. She said it is for this reason that all her patients are on generic medications at \$4. Reviewed broad formulary coverage for OxyContin. She said she has no patients on it.
PPLPMDL0020000001	Independence	OH	44131	8/13/2012	Responded to a call from Dr Keppler/Roman's office requesting Butrans trial/savings cards. Roman said he has been giving out Butrans trial/savings cards & instructions. He said he educates patients about Butrans & gives them the information. He said he hasn't had any feedback recently but has been giving it out. He said he will let me know. He said he did not need OxyContin savings cards as he still has enough.
PPLPMDL0020000001	Independence	OH	44131	8/13/2012	Caught Dr Keppler in the hallway. I asked if he has been finding patients for the Butrans Patient Experience Program kits. He said he thinks Roman has given them out as he does most of the medication prescribing. He said he hasn't gotten feedback about Butrans that he can think of. He then thanked me & walked away.
PPLPMDL0020000001	Parma	OH	44129	8/13/2012	Passed back Butrans Medco/Express Scripts announcement to Dr Laluk. Also reviewed broad formulary access for OxyContin, including Medicare. Spoke with Donna & reviewed formulary coverage for both products.
PPLPMDL0020000001	Fairlawn	OH	44333	8/13/2012	Christy told me today that Dr. Lefkowitz is retiring the end of August 2012.
PPLPMDL0020000001	Parma	OH	44129	8/13/2012	Spoke with Edwin, pharmacist, & reviewed savings programs for Butrans & OxyContin. Discussed eligibility requirements for usage of cards. He asked for Butrans cards, so I gave him one package. He said he recently spoke with a physician who said he could dispense fewer than a full box of Butrans patches at a time. I told Edwin that that is correct, that physicians can prescribe as few as one patch at a time. He asked how that can work, since there is only one package of disposal units. I told him there are 4 disposal units in that package, so he could open that & dispense whatever number of patches the doctor wanted plus that number of disposal units. He said this was good to know & that it made sense.
PPLPMDL0020000001	Parma	OH	44129	8/13/2012	Caught Elaine between patients. She said she has written Butrans a few times lately but didn't have any feedback yet. She then just thanked me & walked into a room. Spent time with Dawn, reinforcing Medco/Express Scripts preferred status for Butrans as well as BWC & Caresource prior authorization requirements.
PPLPMDL0020000001	Fairlawn	OH	44333	8/13/2012	Spoke to Su and met new pharmacist Gilbert. I gave the pharmacist about Butrans discussing CIII, 7 day transdermal system, dosing and titration. Discussed Medco/ESI wins. Pharmacist said he has seen it at other pharmacies. OxyContin dosing and conversions. pharmacy good on all copay cards. No news on Dr Lisa Brown.
PPLPMDL0020000001	Akron	OH	44333	8/13/2012	office called and said they need more Butrans copay cards. provided cards and asked dr how his patients are doing? Dr said most are doing well. I asked if he is titrating if a patient needs additional analgesia? Dr said the 10mcg is still the dose a majority of his patients are on. I told dr to titrate to 20mcg when necessary. Gave Medco/ESI message.<font color=blue><b>CHUDAKOB's query on 08/24/2012</b></font>Using the clinical study data to show why patients might be titrated to the 20ug may help him see the clinical rationale for doing it. What are your thoughts?<font color=green><b>REICHEL's response on 08/29/2012</b></font>I agree and I will provide that on a future call to back up titrating to 20mcg<font color=blue><b>CHUDAKOB added notes on 09/04/2012</b></font>Thanks Cliff. I hope it works out for you!
PPLPMDL0020000001	akron	OH	44333	8/13/2012	I asked Dr Bashor to provide me with an update on his Butrans patients. Dr said he has prescribed it twice and his first patient he titrated to the 10mcg and has also increased his vicoden for supplemental. The patient has cancer and is in a lot of pain. Dr said he sees himself having to titrate to the 20mcg dose. The second patient is also on the 10mcg dose and is doing excellent. I reminded dr that he can adjust the dose every three days if necessary. Discussed managed care updates for Butrans and told dr about excellent coverage with OxyContin on CCRx and AARP.
PPLPMDL0020000001	Akron	OH	44313	8/13/2012	I asked Jason if he has had any recent Butrans fills? Jason said he had one from Narouze last week and it was a titration from 5mgcg to 10mcg. I asked Jason about OxyContin fills and he said that they fill on a regular basis but not many new starts. I asked Jason about Medco patients required to do mail order after 3 prescriptions locally. Jason said that is correct however it all depends on what the employer dictates. Some require it and some
PPLPMDL0020000001	Parma	OH	44134	8/13/2012	Dr Mandat said he started two patients on Butrans last week. I asked him what it was about those patients that made him think Butrans was the right option for them. He said in both cases, the patient was on Ultram chronically. He said they were each taking it 3-4 times per day & mentioned to him that they were "tired" of taking the pills every day. I told him it sounds like he chose ideal candidates. I told him he is positioning Butrans in a great place & asked him to continue to identify patients like this & offer them Butrans if appropriate. He agreed.
PPLPMDL0020000001	Parma	OH	44129	8/13/2012	Dr Taylor said she just cannot make any money in private practice anymore. She went on to say that she is considering going to Daytona, FL to join a practice there that she thinks is a good opportunity. She said that government regulations are making it more & more difficult to stay in business. She also said House Bill 93 came out & made such rapid deadlines, that she did not go through the paperwork to become an official pain management practice, but now regrets doing so. I reminded her that she has patients with legitimate pain issues that she helps them with. Discussed Butrans & OxyContin as possible options for some of those patients, also reviewing with her that Butrans is the only long-acting CIII opioid analgesic. Reviewed abuse/addiction potential & asked her to remain cautious in prescribing any opioid medication. Medco/Express Scripts Butrans tier 2

PPLPMDL0020000001	Cleveland	OH	44130	8/14/2012	Quick call- I reminded Dr Fedorko of our lunch conversation when he told me that he would be willing to write Butrans for appropriate patients who have coverage through BWC. He said he had already forgotten, so it was good that I was there to tell him. He added that as soon as he has a BWC patient who comes in for a painful condition, he will prescribe Butrans for them.
	Waterford	OH	45786	8/14/2012	W - Continues to prescribe and consider Butrans for patients. Likes that she has a CIII long acting option to prescribe. Once patients are uncontrolled on vicodin then she likes to either consider Butrans or refer these patients to a pain specialist for recommendation of therapy. I - Review of Butrans for appropriate patients who meet the indication when uncontrolled on short acting opioids once a therapeutic change is requested. Review of inclusion criteria in order to help identify appropriate patients for Butrans therapy. Review of appropriate starting doses for patients based on current therapy. Review of formulary coverage and savings card program for
PPLPMDL0020000001	Waterford	OH	45786	8/14/2012	W - Vicki has one patient well controlled on Butrans 5mgc/hr and continues to consider it an option for patients once they have uncontrolled pain on short acting medication. I - Butrans for appropriate patients who meet the indication when uncontrolled on short acting opioids once a therapeutic change is requested. Review of Jessica/Emma profiles in order to help identify appropriate patients. Review of appropriate starting doses for patients based on patients current therapy. Review of the ability to titrate after 72hours and the ability to prescribe supplemental analgesia as needed according to section 2.4 of the FPI. Review of formulary coverage and savings card program for Butrans.
PPLPMDL0020000001	Euclid	OH	44119	8/14/2012	I reviewed the Emma patient profile and asked doc if he has any patients like this. He said he does and he is going to put them on butrans. I asked him seriously, if he thinks he will ever start an appropriate patient on butrans. He said one day soon. I explained the 5 and 10mcg starting doses and the preferred commercial coverage with medco and express scripts.
	Waterford	OH	45786	8/14/2012	W - Continues to prescribe OxyContin for patients who need an extended release product due to uncontrolled pain on short acting medication. Formulary coverage becomes the deciding factor for patients because cost is a major issue. Does have patients on Butrans as well and continues to consider both products. I - Review of OxyContin for appropriate patient conversions from short acting opioids once the indication is met. Review of Butrans for appropriate patients who meet the indication when uncontrolled on short acting opioids requesting a therapeutic change. Review of inclusion criteria and reduction in pain scores for patients after 12 weeks of Butrans therapy. Review of Emma/William profiles in order to help identify appropriate patients for Butrans. Review of formulary coverage for both products and savings card programs. Butrans has BWC coverage without the need to do a prior authorization, 2nd and 3rd tier coverages with commercial plans and some Medicare part D plans.
PPLPMDL0020000001	Norton	OH	44203	8/14/2012	Good discussion around appropriate patient types for Butrans and OxyContin. Reviewed the case studies for Butrans and asked him what he typically does for patients on tramadol or low dose vicodin who may need a dose adjustment? Dr said he will either titrate the dose, choose another medicine or refer out. Dr said he understands where he needs to use Butrans and wanted to know about patients for OxyContin? I showed the main visaid page discussing appropriate patient types. Reviewed conversions from IR opioids. Dr had to go to see a patient and said he will use Butrans.
PPLPMDL0020000001	Hudson	OH	44236	8/14/2012	Dr Seiple said he just prescribed Butrans for a patient last week. I asked him to tell me about this patient & why he chose Butrans for him/her. He said she is a nursing student who has had chronic pain for many years, suffering from stage 4 endometriosis. He said she was not currently on any type of narcotic therapy for it but has been in the past. Dr Seiple said the patient actually asked him if he thought Butrans would be a good option for her because she had heard about it & had spoken to other nurses about it. He said after discussing it further with the patient, he thought it would be a good option for her & so he wrote her a script for 5mcg to start. He added that he realizes he may need to titrate, but has not heard back from her yet to see. Dr Seiple went on to say that the reason he does not have more patients on Butrans is not because he has a problem with it clinically, but rather that he just does not have a lot of patients who say they are not doing well on what they are currently taking. He said he doesn't see the point of switching patients who are doing well on their current medication. I agreed that there would likely not be a reason to switch those patients who are doing well. Dr Seiple said he will continue to offer Butrans to patients. Discussed OxyContin q12h as an option for appropriate patients who may benefit from q12h dosing of oxycodone.
PPLPMDL0020000001	Cleveland	OH	44130	8/14/2012	Positioned OxyContin q12h for appropriate patients who may benefit from a q12h dose of oxycodone & reviewed broad formulary coverage. Showed Butrans core visual aid pg 17 & positioned Butrans for appropriate patients who are taking less than 80mg equivalent oral morphine per day, especially if they are not well-controlled on their current pain medication regimen. Dr Diab just thanked me & walked into a room.
PPLPMDL0020000001	Garfield Hts	OH	44125	8/14/2012	Dr Sadowski said he did try to write Butrans, but "it was rejected". I reminded him that Medicare coverage for Butrans is not generally very good, requiring prior authorizations that may or may not be approved. Reviewed formulary coverage for Butrans, reminding him that commercially insured patients will have the most access to Butrans, as well as patients with BWC & Caresource with a more reasonable prior authorization. Also pointed out that appropriate patients may be candidates for OxyContin, which has broad formulary coverage, including Medicare. He said he plans to find more patients for Butrans & said he does not have a problem with the medication itself. Dr Sadowski asked me how long it takes for Butrans to start working. I told him we have no onset of action data/studies & reminded him that Butrans reaches steady state in 3 days. He asked if it is acceptable to give short-acting medications during the first few days of starting Butrans. I told him this was advisable & showed Butrans core visual aid pg 17 (first bullet point under charts) as evidence.
PPLPMDL0020000001	Hudson	OH	44236	8/14/2012	Reviewed core messages for Butrans with Dr Spittler, also discussing appropriate patient type/range, including OxyContin for appropriate patients beyond the Butrans range. Discussed Butrans as a long-acting CIII opioid analgesic with abuse/addiction potential. I asked him if he currently has patients who take tramadol or hydrocodone around-the-clock for a chronic condition causing pain. He said he does. Reviewed dosing, use of supplemental analgesia, & managed care status, updating him on Medco & Express Scripts. I asked if he refers to pain management. He said he does often, but finds that patients often have to wait a month or more to get in, so he ends up refilling their scripts for them in the mean time. I asked his thoughts on giving those appropriate patients a prescription for Butrans when he refers them. He said he thought this made sense & said this is where Dr Tosino walked into lunch & stated that he has a few patients on Butrans who are doing well. He said it seems that if the patient is willing to try it & have reasonable expectations, that Butrans is effective. He said the problem is that many patients are not receptive to changing from around-the-clock oral medications to a once weekly transdermal system. He said in their mind, it will not work. I asked if this is even the case with patients who are not doing well on their oral medications. He said yes. He said sometimes he refers to pain management, but this can be tricky because so many patients are trying to get in to pain management, that it takes over a month for them to be seen. I asked his thoughts on giving appropriate patients a prescription for Butrans when he refers them- that way, if it works, he is sending a good referral, & if it doesn't, it confirms that that patient was a good candidate for pain management. He said this makes sense. Discussed setting appropriate patient expectations. He said he will also keep offering it/suggesting it to other patients who he thinks would be good candidates. Discussed OxyContin as a q12h dose of oxycodone for appropriate patients who could benefit from this dosing. He said he still uses OxyContin for some patients.
PPLPMDL0020000001	Hudson	OH	44236	8/14/2012	Updated pharmacist on Butrans coverage on Medco/Express Scripts. Also reviewed savings programs for Butrans & OxyContin & discussed e-voucher for eligible patients.
PPLPMDL0020000001	North Hampton	OH	45349	8/14/2012	She loves the idea about butrans but forgot. She said she is going to use it for her vicodin patients. She said she doesn't like tramadol and prefers pain patches when possible. We reviewed formulary and she has majority commercial patients.
PPLPMDL0020000001	Uniontown	OH	44685	8/14/2012	Dr was just leaving office when I entered. I asked dr if she had any starts for Butrans. Dr said she did not and I told her to just try it for a patient on tramadol or vicodin that says they need more analgesia. Dr agreed to try and remember.
PPLPMDL0020000001	Euclid	OH	44117	8/14/2012	Quick call....Doc said he was late for a conference call. I gave him a formulary grid and conversion guide. Nothing learned and was asked to come back.
	Highland Heights	OH	44143	8/14/2012	Doc asked if butrans is covered by workers comp. I explained that the state workers comp is covering butrans but self insured employers may not. He said that they have submitted a PA 2 or 3 times but they have not gotten a response yet. He said he does not recall who the patient works for. I gave him a formulary grid and pointed out the medco and express scripts coverage. Also gave him an oxycontin conversion guide and reminded him of the low dose options of oxycontin.
PPLPMDL0020000001	Uniontown	OH	44685	8/14/2012	Dr is out of the office until 8/20/2012. Spoke with Kelly(ma) about Butrans inclusion criteria from the opioid experienced trial and reviewed new Medco/ESI information. I asked if she knew how many Butrans Experience Kits? Kelly said they had 2 left and said she tries to remember using them when he prescribes it.
PPLPMDL0020000001	Parma	OH	44129	8/14/2012	Quick call- Dr Ortega came to the window & said he had a headache & wanted to go home, so he couldn't stay to talk today. He added that he assures me that he has been prescribing both Butrans & OxyContin. He said to come back next week & he would talk to me more. Spoke with Cindy & discussed patient information booklets for Butrans. She said she needed more of them because they have been taking them to Northfield's office as he uses Butrans for many of those patients.
PPLPMDL0020000001	Garfield Hts	OH	44125	8/14/2012	Spoke with floater pharmacist & technician. Reviewed Butrans core messages & dosing. Also discussed use of supplemental analgesia if necessary & steady state in 3 days, allowing titration every 3 days to a maximum 20mcg dose. Also reviewed savings programs for Butrans & OxyContin. They did not need any savings cards.
PPLPMDL0020000001	Cleveland	OH	44124	8/14/2012	I gave doc a formulary grid and asked him how many of the 7 strengths he is prescribing. He said the 20, 40, 80mg. I explained that if patients are converted sooner they can start on a low dose of oxycontin such as the 10, 15, or 20mg. Gave more savings cards as he said the nurses give them out.
PPLPMDL0020000001	Uniontown	OH	44685	8/14/2012	I asked receptionist to see the dr to get his take on all the Butrans materials I have left for him. She said he was busy with patients. I left him another FPI and told her I would love to get his professional opinion of Butrans. nothing else learned.
PPLPMDL0020000001	Parma	OH	44129	8/15/2012	Quick call- Updated Dr Chagin on Butrans's increasingly favorable managed care status, reviewing Medco & Express Scripts coverage at tier 2. He said to check with Debbie because he thought he needed more savings cards. Spoke with Debbie, who said she has given out a few Butrans cards lately. She checked her OxyContin savings card expiration dates & said she did not need any more cards yet. Reviewed Butrans coverage on Medco & Express Scripts with her.
PPLPMDL0020000001	Warrensville Heights	OH	44122	8/15/2012	Dr Gulati said he was on his way out of the office so he did not have time. I handed him OxyContin conversion guide & let him know he could use it as a guide in converting appropriate patients to OxyContin. Also reviewed broad formulary coverage. Spoke with Kim, his MA, who said she had tried to get her Butrans prescription filled, but the co-pay (even with the trial card) was so high (\$145) that she did not get it. She said she has Aetna insurance & did do the prior authorization, which got approved. She said she just could not pay that kind of co-pay & added that she was really disappointed because she thinks Butrans sounds like something that could really
PPLPMDL0020000001	Parma	OH	44134	8/15/2012	Dr Hernandez said he is glad that Butrans is available because it has been so good for his patients. He said the patient who had just left was on Butrans & has been for several months, doing well. I asked Dr Hernandez what patient type(s) he uses OxyContin in. He said he does not like to have patients on it indefinitely because he does not feel that is good for someone. He said if someone needs pain control indefinitely, he would want them on something less strong. I asked who, then, is an appropriate patient for it. He said generally, he puts patients on OxyContin as they await surgery. He said sometimes BWC makes them wait awhile to get a surgery, so he gives them OxyContin in that time frame. He said following the surgery, he would expect the patient to no longer need pain medication & if they do, he would want them on something like Butrans.
PPLPMDL0020000001	Cleveland	OH	44122	8/15/2012	I reminded Dr Rastogi of our last conversation when he shared with me that he typically uses OxyContin in his nursing home patients or in office patients if he knows their condition is chronic. I asked if there are any specific patient types or conditions that he finds OxyContin to be effective in. He said usually he uses it for patients who have osteoarthritis. I asked if these patients are typically on some sort of short-acting opioid medication first. He said yes. I gave him an OxyContin conversion guide, showing him how to use the guide. I asked what he remembers about Butrans. He said that it is a once-a-week patch of buprenorphine. He asked if he would have to do a prior authorization for patients to get it. Discussed coverage, asking him to focus on appropriate patients who have commercial insurance. Also updated him on Medco/Express Scripts coverage. Also reviewed trial/savings cards. I showed him Butrans initiation guide & slide-out tool, demonstrating how he can use it to find the appropriate starting dose of Butrans for patients. I asked if he would try Butrans for a few appropriate patients, perhaps those aged 40-60, with a chronically painful condition. He said he would.
PPLPMDL0020000001	Parma Heights	OH	44129	8/15/2012	Spoke with Cathy, pharmacist, & updated her on Butrans coverage on Medco & Express Scripts. She said they fill scripts for both those plans. She also said she thinks they have one or two customers on Butrans now. Discussed savings cards for Butrans & OxyContin savings cards & reviewed eligibility requirements. Also discussed Butrans patient information booklets. She said she did not need any savings or patient education.
PPLPMDL0020000001	Bedford	OH	44146	8/15/2012	Dr Moufawad asked for more patient information booklets again. He said he has been giving out Butrans & OxyContin both lately. He said he feels that Butrans has been a good addition to his practice & that his patients have good success with it. He said he is careful to always discuss it at length with them when he is starting them on it so they understand what to expect. I told Dr Moufawad it sounds like he is doing the right thing. I asked him to continue to identify Butrans & OxyContin patients & prescribe each when appropriate & he agreed.
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PPLPMDL0020000001	Bedford	OH	44146	8/15/2012	Spoke with Steve, pharmacist, & updated him on coverage at tier 2 preferred for Butrans on Medco & Express Scripts. Reviewed savings cards & eligibility requirements for usage. Also discussed e-voucher. Steve said they did not need any savings cards.
PPLPMDL0020000001	Cleveland	OH	44121	8/15/2012	Quick call...I discussed the indication for oxycontin for moderate to severe chronic pain and explained that patients with OA fall into this category. I gave him a conversion guide and reminded him that there are low dose options for of oxycontin like 10, 15, and 20mg.
PPLPMDL0020000001	Cleveland	OH	44143	8/15/2012	I asked doc if he is still initiating patients on oxycontin for those that might require ATC treatment for their chronic pain. He said he has a few regular patients on it. I asked him what strengths he uses most. He said 10 and 20mg. I showed him how a 20mg would be comparable to 4 tabs of 10mg of percocet per day. He said he is having more trouble getting it to go through insurances. I explained the commercial plans and those of Med D plans covering at a preferred tier 2 status. I explained that medicaid may require a PA. Provided formulary grid.
PPLPMDL0020000001	University Heights	OH	44121	8/15/2012	I asked doc if he thinks that transdermal analgesics have a place for his cancer patients. He asked if it would be strong enough. I explained the butrans indication is for moderate to severe chronic pain. He asked about the dosing options. I showed him the 5 and 10mcg starting doses dependent upon patients current therapy. I asked him to try one patient. He said if patients can afford it. Nothing else learned. Left him a formulary grid.
PPLPMDL0020000001	Independence	OH	44131	8/16/2012	Handed Dr Sundaram Butrans Medco/Express Scripts announcement & let him know coverage for Butrans is improving. I asked if he felt that formulary coverage was a hindrance for him in prescribing Butrans. He did not answer. Positioned Butrans for appropriate patients ages 40-60, with legitimate pain, for whom he is considering a pain medication change or adjustment. OxyContin broad formulary coverage message.
PPLPMDL0020000001	Independence	OH	44131	8/16/2012	Spoke with floater pharmacist & updated her on Butrans coverage with Medco/Express Scripts. Also reviewed Butrans dosing & delivery system. Discussed ability for patients to take supplemental analgesia with Butrans. Reviewed savings cards & e-voucher for Butrans & OxyContin, also reviewed eligibility requirements. She said she would leave my information for Regina.
PPLPMDL0020000001	Parma	OH	44129	8/16/2012	Quick call- Handed Dr Moysaenko OxyContin formulary grid & pointed out broad favorable coverage. Also gave him Butrans Medco/Express Scripts announcement & told him it is evidence that Butrans coverage is improving with managed care companies. He just thanked me & walked away.
PPLPMDL0020000001	Parma	OH	44129	8/16/2012	Quick call- Saw Dr Paat at the window. Passed back OxyContin formulary grid & pointed out OxyContin's broad formulary access for a variety of plans. Also handed back Medco/Express Scripts announcement & let him know coverage is improving. He just thanked me & walked away. Spoke with Shari & reviewed coverage for Butrans & OxyContin. She said she would try to keep reminding Dr Paat.
PPLPMDL0020000001	Independence	OH	44131	8/16/2012	Dr Pai said he just wrote a prescription for a patient for OxyContin. I asked him to tell me more about this patient. He said she is 92 & suffered a back fracture, so he gave her OxyContin 10mg & allows her to take Percocet for breakthrough pain. I told him it sounds like he chose a good patient. I reminded him of previous conversations when he has told me that he typically prescribes OxyContin for patients who are no longer well-controlled on 4 Percocet per day. He said this is true. I asked him if patients basically start on a low dose of a short-acting opioid & then are escalated, ultimately to 4 Percocet per day over time. He said yes. I asked him what the rationale is for starting a patient with a condition that is known to cause pain chronically on short-acting opioids, then escalating them instead of just prescribing a low dose of a long-acting option, such as OxyContin 10mg, to begin with. I asked if this is just a comfort level issue, or a habit, or something else. Dr Pai explained that for him, he likes to start a patient on short-acting first to see what level/amount of medication they are going to require. He said, for example, a patient may only need to take 1-2 Percocet per day, so there would not be a dose low enough to start them on. He said this is not the case with just pain- that even with diabetics, doctors typically start with a short-acting insulin instead of going to a long-acting option right away. He said he still only has one patient on Butrans.
PPLPMDL0020000001	Independence	OH	44131	8/16/2012	Quick call- Passed back Butrans announcement for Medco/Express Scripts to Dr Reddy & pointed out improving coverage. Started to review dosing but he waved & walked away. Spoke with MA Kathi & reviewed coverage, dosing, & patient type.
PPLPMDL0020000001	Sagamore Hills	OH	44067	8/17/2012	Dr Mike asked me to tell his medical student about Butrans. Delivered core messages & gave him an initiation guide. Discussed appropriate patient type. Dr Mike said almost no one is in real pain. He said it is unfathomable that a patient could have normal imaging but be in real pain. I agreed that appropriate patient selection is important with all opioid medications, but reminded him that there are patients in true, sometimes severe pain, who benefit from opioids. I asked if he refers patients claiming to have pain to pain management. He said he refers a fair amount, but often the pain management physicians "get patients hooked on drugs" & he said he then has to get the patient off the pain medications.
PPLPMDL0020000001	Parma	OH	44134	8/17/2012	Dr Scanlon said he just wrote Butrans for a patient yesterday. I asked him to tell me more about the patient. He said they were on Vicodin before but were not well-controlled on it, so he gave them Butrans. Discussed Medco & Express Scripts tier 2 coverage & savings cards. I asked Dr Scanlon what type of patient(s) he has found OxyContin to be effective for. He said he is sure to do "a work up" of everyone who he prescribes OxyContin for. I asked what all that entails & asked if it includes checking OARRS. He asked what OARRS is. I gave him information on signing up & encouraged him to register as a measure to protect his practice. He said that sounded like a good idea. Discussed importance of appropriate patient selection for all opioid medications. Dr Scanlon said he would find more Butrans patients.
PPLPMDL0020000001	Parma	OH	44129	8/17/2012	Dr Gigliotti said he has had no further feedback about Butrans. He said one patient who he had started said that she only received one patch for the Butrans trial offer instead of 4. He said he wasn't sure if he should believe her. I told him I would let the company know in case it was some sort of manufacturing problem. He said she may have been lying. I told him it is always best & safest to report such events. Dr Gigliotti said he will keep finding Butrans patients. I asked him to also continue appropriate patients on OxyContin.
PPLPMDL0020000001	Independence	OH	44131	8/17/2012	Roman's staff called me & asked me to come to the office. He said there must be a problem with the Butrans trial cards. I asked him to clarify. He said he has had 3 calls today from patients saying that the pharmacies are saying they still owe over \$100 even with the trial card. I asked Roman if these patients all had commercial insurance. He said he doesn't know, he just asked if they had insurance. Explained coverage for Butrans, letting him know patients with commercial insurances have the most access to Butrans as Medicare plans have more difficult requirements. Roman said he will do a better job at clarifying to ask if the patient has commercial insurance. Reminded him that OxyContin has broad formulary access for appropriate patients with a variety of types of insurances, including Medicare plans.
PPLPMDL0020000001	Mayfield Hts	OH	44124	8/17/2012	Told doc I wanted to share one clinical reason to use butrans for the appropriate patient. I discussed the opioid experienced clinical study, explained the design and the 30% improvement in 50% of the patients studied. I asked him if that was impactful. He just said maybe. Reminded him of the commercial plans and BWC.
PPLPMDL0020000001	Brooklyn	OH	44144	8/17/2012	I reminded Dr Miguel how he has told me that he has a few patients on Vicodin who he thinks may benefit from Butrans with once weekly transdermal dosing. He said he has a lot of patients on Vicodin who he would like to not have on it anymore. I showed him initiation guide slide-out tool. I asked what dose of hydrocodone per day he would say the majority of these patients are on. He said probably 10-20mg per day. I showed him on the tool how he could initiate Butrans in some of these appropriate patients at either 5mcg or 10mcg, depending on their current medication quantity. Discussed Butrans range & reviewed OxyContin q12h for appropriate patients beyond that range. Dr Miguel asked if he could keep the initiation guide. He said he promises he is going to use Butrans- he just has to remember it when he sees those patients.
PPLPMDL0020000001	Parma	OH	44129	8/17/2012	Reviewed Butrans core messages with Dr Rakhit. He said the United States government has ruined pain management in this country & has just ended up creating a bunch of people addicted to pain medications. He said patients get addicted to the spike in medication when they take a short-acting opioid. I agreed that physicians should be cautious when prescribing any opioid medication as all do have abuse & addiction potential. Discussed Butrans once weekly transdermal dosing. Dr Rakhit said patients always end up asking for more & more medication. I asked him what the clinical benefit is of increasing the dose of a patient's short-acting opioid medication if that medication is not adequately controlling their pain in the first place- why give more of a medication that isn't working. He said there is no benefit. Positioned Butrans for appropriate patients who are not well-controlled on their current short-acting opioid medication instead of giving them more of that short-acting opioid. Dr Rakhit took notes on dosing. He asked what else I have. I told him OxyContin. He said he thinks it is a good medication only for terminal patients with cancer in severe pain. He asked me if Percocet is like OxyContin, but "at a much higher dose". I showed OxyContin conversion guide & pointed out that both are oxycodone & the difference is how often they are dosed, with OxyContin always being dosed q12h. Showed that the potency is the same & patients can get the same amount of oxycodone q12h.
PPLPMDL0020000001	Northfield	OH	44067	8/17/2012	Updated Sun Li on Butrans coverage at tier 2 preferred for Medco & Express Scripts national formularies. She said she has customers with those plans. Reviewed trial offer & savings cards, also reviewing e-voucher for CVS customers. Discussed OxyContin savings cards.
PPLPMDL0020000001	Lyndhurst	OH	44124	8/17/2012	I reviewed the Emma and William patient types and reminded him that he said he didn't want to prescribe vicodin and percocet. He said that butrans was expensive. I explained that patients with commercial plans can get butrans for as little \$15 with a savings card. Provided a formulary grid.
PPLPMDL0020000001	Mayfield Hts	OH	44124	8/17/2012	Doc asked about co pay with butrans - how much it is. I explained that 3rd tier co pays may be \$55-60 but the savings cards could save up to \$40 every month. I showed him the formulary grid and that medco and express scripts are covering butrans at the lowest branded co pay. He asked to make sure he has plenty of savings cards.
PPLPMDL0020000001	Middleburg Heights	OH	44130	8/17/2012	Spoke with Wanda (MA) & reviewed OxyContin formulary grid. Also reviewed Butrans core messages. She said she does not think Dr Mistry has written any Butrans yet. I asked her to give him the OxyContin formulary information & Butrans patient profile booklet. She agreed. Scheduled first available lunch.
PPLPMDL0020000001	Mayfield Heights	OH	44124	8/17/2012	Quick call...I asked if coverage is the issue with him not trying butrans more. He said it's a concern. I showed him the formulary grid and that medco and express scripts will cover butrans at the lowest branded co pay which means \$15 copay with the savings cards for eligible patients.
PPLPMDL0020000001	Parma	OH	44129	8/20/2012	Quick call- Dr Roheny said it was his first day back from vacation so he really didn't have time. Handed him Butrans Medco/Express Scripts announcement & let him know Butrans coverage is improving. I asked him what he has to lose by prescribing Butrans for an appropriate patient on one of those plans. He didn't answer. Also reminded him of favorable broad formulary coverage for OxyContin for appropriate patients.
PPLPMDL0020000001	Beachwood	OH	44122	8/20/2012	Quick call- Dr Myton-Craig said she didn't have time to talk today. Positioned Butrans for appropriate patients who are not well-controlled on 3-5 Vicodin or tramadol per day. Reminded her of Butrans tier 2 preferred status on Medco & Express Scripts as well as access on BWC. Reviewed broad OxyContin formulary coverage. She took the Butrans Medco/ESI announcement & put it in her office before walking into a room.
PPLPMDL0020000001	Parma	OH	44129	8/20/2012	Reminded Dr Taylor of our past Butrans conversations & how she has expressed interest in trying it for some patients. I asked her what she is waiting for. She said she does think she has tried to write Butrans for a few patients, but it seems they must have been Medicare patients because none of them have actually been able to get it due to insurance. I reminded her of recent change in Butrans's status to a tier 2 preferred on Medco & ESI. She said she had forgotten that. Also reminded her that BWC has been paying for Butrans. Also reviewed trial/savings cards. Reviewed appropriate patient type/range. She said sometimes patients are resistant to trying Butrans because they do not want to get rid of their current oral medication. I asked her how she feels about this. She said she wishes they would try it. I asked her what they have to lose, if they are appropriate patients & have commercial insurance or BWC by simply trying Butrans for a month. Reminded her that this patient population would have access to Butrans for the first 28 days for little or no out-of-pocket cost & that they do not have to "give up" their current medication. Also reminded her that if a patient is not well-controlled on their current medication, they should be open to trying something that may help them. She agreed & said she would try more patients although most of hers are stable on their medication. Also discussed OxyContin patient type/range. She said it seems less accepted to write CII medications.
PPLPMDL0020000001	Beachwood	OH	44122	8/20/2012	Dr Warren said he thinks he did try to write Butrans for a patient but he didn't think they were able to get it due to insurance. I asked him if he knows if the patient had a Medicare plan. He said it was possible. Reviewed Butrans coverage with him, letting him know patients with commercial plans will have the most access to Butrans without prior authorization. I let him know that OxyContin is, however, covered on many Medicare D plans. He said it seems that OxyContin isn't being prescribed as much anymore. I asked if he notices this specifically with OxyContin or with all CII medications. He said CII medications in general. He said he does have about 5 patients who are on it. Discussed importance of appropriate patient selection & asked if he has found OxyContin to be effective for these patients. He said yes & agreed that it is a good medication for the right people. Reminded him that he has said that he wanted to try Butrans for patients who could not tolerate NSAID's or for those who he is trying to decrease them from fentanyl to another option. He said this is true. I asked if he can think of some patients like this who have commercial insurance. He said he thinks so. I asked him to prescribe Butrans for them if appropriate & he agreed. Discussed dosing, titration, & supplemental analgesia. I asked him again to prescribe & he agreed. <font color=
PPLPMDL0020000001	Northfield	OH	44067	8/20/2012	<font color=blue>b>CHUDAKOB added notes on 08/29/2012</font>Nice job of weaving OxyContin in the call. It looked the call flowed very well and you got in two solid presentations. Spoke with Maggie, nurse, & reviewed Butrans appropriate patient type. I asked her if she has asked Dr Marshall about meeting with me to discuss Butrans & OxyContin. She said she is working on it. I asked if Dr Marshall has a lot of patients taking short-acting opioids such as Percocet or Vicodin daily. She said yes. Showed her patient range for Butrans & discussed OxyContin as a q12h dose of oxycodone, offering the same molecule as Percocet in a q12h tablet. She said she would talk to Dr Marshall again.



	Akron	OH	44310	8/20/2012	I asked dr how his patients are doing on Butrans. Dr Goswami said they are doing well. I asked if he has gotten any feedback from them with their reduced pain level. Dr said he doesn't recall seeing one of them recently but he did say that their pain level had decreased. I asked if either of the patients on Medicare had any issues with cost. Dr said they did not because they have a secondary insurance which helped pay for it. I showed dr Emma and asked what he typically does with a patient like her where a dose adjustment may be necessary? Dr said he will continue to think of Butrans in that place as long as they meet the indication.<font color=blue><b>CHUDAKOB's query on 08/30/2012</b></font>Has he written any Butrans for him to know if they are doing well?<font color=green><b>REICHCL's response on 08/31/2012</b></font>yes he has. They were both Medicare patients and I never got credit for them. The same goes for Bashor. he has also prescribed it twice and I have never seen them appear on earlyview. Do you know why?<font color=blue><b>CHUDAKOB added notes on 09/04/2012</b></font>We can discuss the reasons why in person. Glad to hear you are having impact with them.
PPLPMDL0020000001	Fairlawn	OH	44333	8/20/2012	I asked Jason to see Dr Meli to introduce Butrans. Jason reminded me that he only sees reps one day a week on Wednesday lunch.<font color=blue><b>CHUDAKOB added notes on 08/29/2012</b></font>Cliff, this is not considered a non-HCP call. These has to be some product discussion. Asking to see a physician does not constitute a product call. Thanks!
PPLPMDL0020000001	Parma	OH	44129	8/20/2012	Caught Dr Rossi at the window- Passed back OxyContin formulary grid, pointing out favorable coverage & broad access. Also handed her Butrans announcement for tier 2 preferred status on Medco/Express Scripts. Dr Rossi just thanked me & walked away. Spoke with nurse, Edy & updated her on managed care.
PPLPMDL0020000001	Fairlawn	OH	44333	8/20/2012	I asked Jason to see doctor to follow up on lunch appointment recently. Jason reminded me that he only speak with reps during lunch appointments.
PPLPMDL0020000001	University Heights	OH	44121	8/20/2012	Quick call.....I reminded doc of the butrans indication and positioning for patients failing on tramadol or hydrocodone. I asked him if he would consider a product like butrans for patients needing a dose adjustment to their short acting analgesic. He asked about coverage. I explained the commercial plans including medco and express scripts and the savings cards.
PPLPMDL0020000001	Akron	OH	44333	8/20/2012	Spoke with James(pharmacist) and Laurie(tech) about Butrans and OxyContin. I told James that I spoken with Donna on a few occasions. Gave James an overview of Butrans and asked him if they filled Butrans recently? Laurie said they filled the 5mcg today and ordered the 10mcg and 20mcg and will be in tomorrow. I asked who the prescription was from and Laurie said it was from Dr Fouad. James said he did not know any employer information. Provided OxyContin conversions and titration guide and James seemed that he did not want to engage in a conversation about OxyContin.
PPLPMDL0020000001	akron	OH	44333	8/20/2012	Gave a quick review of Emma and William and asked if he could thinks of patients that fit that description. Dr said he is somewhat limited with patients that fit that description but agreed to continue finding patients. I reviewed the titration time period and the Medco/ESI wins.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	8/20/2012	Spoke with Steve about Butrans and OxyContin. Steve said he has filled Butrans a couple of times and has heard good things from patients about it. I asked about patients bringing in copay cards and Steve said he thinks he remembers a patient with one and the cost has been reasonable for the patients. I reviewed the dosing and titration and steady state at 72 hours.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	8/20/2012	I spoke with Lori about seeing the dr this morning to follow up on a patient she had that was having an AE with Butrans. I reported the AE last week and wanted to discuss items in the FPI about Butrans titration and cessation of therapy. Lori said she is not available so I reviewed it with her and to provide the FPI to Dr Hegde.
PPLPMDL0020000001	Fairlawn	OH	44333	8/20/2012	I asked what doses of OxyContin they are filling the most. Susan told me that they fill a lot of 20, 40, 60 and 80mg doses are patients do tend to titrate up but it depends on the dr. Provided Butrans initiation and titration guide and asked if they filled recently. I was told that they fill regularly for Fouad and Shah. Pharmacy was very busy...nothing else learned.
PPLPMDL0020000001	Akron	OH	44333	8/20/2012	I asked dr if he could provide me any information on how his patients are doing on Butrans. Dr said they are all doing well and he likes the results. I asked if the results exceeded his expectations at times. Dr said he knows what to expect from Butrans and it is controlling pain well. I showed dr the OxyContin conversion and titration guide and asked him if he feels comfortable prescribing it? Dr said he does in situations where patients are taking higher doses of IR opioids. Dr said he likes the controlled release Q12h availability with OxyContin. Gave dr the most recent formulary grid and told him that it has been studied in patients over 75 yrs and it is preferred on AARP and CCNY.
PPLPMDL0020000001	University Hts	OH	44118	8/20/2012	Window call....Reminded doc of the oxycontin patient type and the flexibility of the dosing. I showed him the conversion guide and that 10mg of oxycontin q12 might be comparable to 5mg q6 of percocet. Provided formulary grid and explained the lowest branded co pay for many med d plans.
PPLPMDL0020000001	Cleveland Heights	OH	44118	8/20/2012	Window call.....I asked doc if he sees patients with medco prescription plans. He said that he does. I informed him of the recent update with butrans on express scripts and now medco. He said that he has more medicaid and medicare. I reminded him that caresource will cover butrans with a PA after failure on an IR opioid or tramadol.
PPLPMDL0020000001	Beachwood	OH	44122	8/20/2012	Spoke with Alan, pharmacist, who requested more Butrans savings cards. Reviewed eligibility requirements. I asked what feedback he has received- either via physician or patient. Alan said he hasn't heard any feedback, but he can think of 3 patients who are on Butrans & who get refills month after month, so he said they must be doing well on it. Showed patient information booklets & discussed using them if/when patients have questions. Alan said he has some & will use them if he gets a new patient on Butrans. He said he is surprised there haven't been more patient questions because the patients who he can think of who are on it each were switched from other opioid medications. Discussed OxyContin q12h & savings cards. He said he did not need any cards.
PPLPMDL0020000001	Parma	OH	44134	8/20/2012	Spoke with floater pharmacist & updated her on Butrans tier 2 preferred status on Medco & Express Scripts national formularies. Also reviewed savings & trial cards & eligibility requirements for card usage. She said she thinks she has dispensed Butrans once or twice at various locations. Discussed OxyContin q12h & savings cards. She said she would give my information to Margarita.
PPLPMDL0020000001	North Hampton	OH	45349	8/20/2012	DR said she prescribed butrans the day after I had lunch. She said she isnt sure if the patient was able to get it filled but believes that she has more patients that will qualify for butrans 10 mcg
PPLPMDL0020000001	Cleveland Hts	OH	44118	8/20/2012	Doc said he has a couple of patients on butrans but hasnt been able to find anybody else that is willing to try it if they dont have the right coverage. I showed him the formulary grid with updates to medco and express scrips which means the lowest branded co pau for patients with those plans. I asked him to try butrans again for patients failing on tramadol or vicodin and with the right coverage. I said he would try.
PPLPMDL0020000001	Akron	OH	44333	8/20/2012	Dr moved from UH in Cleveland to his new office in Fairlawn. Dr said that he wanted copy cards for Butrans and OxyContin as he has used Butrans in the past and has seen great results. Dr said he has used it for patients on tramadol and low dose vicoden who need more analgesia. Discussed Butrans patient experience kits with dr and he said he has used them and will use the ones already in his office.
PPLPMDL0020000001	Cleveland	OH	44130	8/21/2012	Dr Fedorko said he had just been thinking of me this morning. I asked if it was because he had an appropriate patient with BWC for whom he prescribed Butrans. He said that wasn't it. I reminded him of our previous conversations when we have discussed Butrans coverage & how he has expressed interest in writing for an appropriate patient with BWC. I asked what he is looking for in his next Butrans patient. He said he just hasn't had anyone in lately for pain with BWC. He said he is sure that will eventually happen. I reminded him that the patient doesn't have to be BWC- reviewed favorable coverage on commercial plans.
PPLPMDL0020000001	Cleveland	OH	44130	8/21/2012	Positioned OxyContin for appropriate patients who could benefit from q12h dosing of oxycodone & Butrans for patients on the more moderate side of pain, taking less than 80mg equivalent of morphine per day, for whom he is considering a medication adjustment. Dr Diab just waved & walked into a room.
PPLPMDL0020000001	Parma	OH	44129	8/21/2012	Myra said she has found some success with Butrans. She said some patients do very well on it. She added that some patients can be reluctant to try it & she thinks this is because they get "trained" to think that they need to take a pill every few hours to help their pain. Reminded her that patients can take supplemental analgesia with Butrans. She asked if there is any issue with them taking hydrocodone with Butrans. I told her they can take immediate release opioids or non-opioid medications for supplemental analgesia. She said this was a good reminder. Discussed counseling patients & setting their expectations. I asked if she has patients rate pain on a scale of 0-10. She said yes. I asked if they talk about a specific goal for reduction in the rating. She said yes, although some patients expect that they should feel no pain at all which can be unrealistic. Discussed Butrans appropriate patient type/range & OxyContin as a q12h dose of oxycodone for appropriate patients beyond this range. Myra asked me to review managed care coverage. Discussed Caresource prior authorization requirements & reviewed BWC & commercial insurance coverage. She said she plans to prescribe Butrans for more patients. She also said she will contact the new head of the OAPA to start setting up a Butrans program for them.
PPLPMDL0020000001	Uniontown	OH	44685	8/21/2012	I asked dr if she has initiated Butrans yet. Dr said that she has not. I told dr that I guessed she has patients on tramadol or vicoden that may need a dose adjustment? Dr agreed that she probably does. I asked dr to prescribe Butrans at that point for patients that have chronic pain. I reviewed inclusion criteria and asked if she treats those conditions? Dr said she has many patients with low back pain and osteoarthritis. I asked if Butrans make sense and if she sees a down side to using Butrans? Dr said she believes it is a good product she just needs to remember to use it. I provided her with the conversion scale and she put it in her lab coat.
PPLPMDL0020000001	Cleveland	OH	44130	8/21/2012	Spoke with technician who said Dave was too busy today to talk to me. I asked if the technicians are generally the ones who put a customer's prescription insurance information into the computer. She said usually. I asked if they give out savings cards when they have them for medications. She said they try to remember to do that. Discussed Butrans & OxyContin savings programs & reviewed eligibility requirements, reminding her that patients with any type of government insurance cannot utilize the cards. She said she would give my information to Dave.
PPLPMDL0020000001	Uniontown	OH	44685	8/21/2012	Spoke to barb and Lynn about Butrans and OxyContin. I asked Barb if they have filled Butrans recently. She said they did but the patient was not on it for more than a month or two and couldn't remember who prescribed it. I reviewed the Medco/ESI coverage and asked about local employer groups with one of those plans. Barb said that she knows the City of Green and General tire both have ESI. I reviewed the managed care coverage for both products and asked about OxyContin fills. I was told by Lynn that they keep all the doses of OxyContin in stock and have a lot of dr Lababidi's patients. Explained the Butrans and OxyContin copay cards.
PPLPMDL0020000001	Parma	OH	44134	8/22/2012	I asked Dr Hernandez when he prescribes Butrans, how long does he generally expect the patient to be on it. He said forever. He said for patients with a chronic condition, it is just what makes sense. He added that he has had great results so there is really no reason to not put someone on Butrans. He said he has had success switching patients from Vicodin to Butrans & Opana to Butrans. I told him it sounds like he is doing the right thing & has great clinical experience. Asked him what if a patient needs more than 20mcg Butrans, what does he do at that point. He said he would add more Butrans even though he knows that 20mcg is the maximum recommended dose & that it is not recommended. He said he is comfortable prescribing larger doses because he uses buprenorphine in larger doses with Suboxone. He said again he knows the company does not recommend this. I asked him to continue to prescribe for appropriate patients & he agreed.
PPLPMDL0020000001	Akron	OH	44313	8/22/2012	I asked dr what conditions he prescribes OxyContin for? Dr said he has patient on it with Cancer pain and many different types of low back pain. I showed dr the OxyContin visaid with the conditions it was studied in. Dr said he likes it and it works well. I showed dr the Butrans patch and dr said he knew it was Butrans. Dr said he has not used it yet. Reviewed indication, 7 day transdermal system, and discussed appropriate patients on Ultram or low dose vicoden who he has a dose adjustment. I told dr it is covered on Caresource with PA, Medco, ESI and Medical Mutual. Dr told me to leave Butrans information. Left the Opioid experienced trial and initiation and I asked Dr Bonyo why he need to use Butrans again? Dr said he didnt know but that he will. I used the initiation and titration guide along with Emma and William profiles to show appropriate patients for Butrans and to show initiation from IR opioids, and titration. I asked dr if he will gain some clinical experience with Butrans in 2012? Dr said he will.
PPLPMDL0020000001	Barberton	OH	44203	8/22/2012	I asked Bill if he has filled Butrans recently. Bill told me that he filled one of Dr Patel in Barberton within the last month and initiated on the 5mcg dose. I reviewed dosing, titration, and appropriate patients. I asked Bill which doses he has of OxyContin and he said he has all doses except the 15mg dose. Reviewed dosing and conversions with Bill and he said he is still seeing it but not as much as he used to. B ill said he is seeing an increase in vicoden and percocet.
PPLPMDL0020000001	Copley	OH	44321	8/22/2012	I provided pharmacist with Butrans FPI information. Told her about steady state, appropriate patient types and adverse events. The pharmacy has not filled Butrans recently but do have the 5 and 10mcg in stock. OxyContin dosing information and conversion discussion.
PPLPMDL0020000001	Barberton	OH	44203	8/22/2012	Provided overview of Butrans and OxyContin and asked about stocking of the products. They have all OxyContin except for 15mg and the Butrans 5mg. They have filled Butrans in the past but nothing recently. I reviewed Butrans steady state, appropriate patients and explanation of the conversions from IR opioids.
PPLPMDL0020000001	Akron	OH	44320	8/22/2012	I asked dr if she had any reservations in using Butrans? Dr said not but she reminded me that she is referring out many of her chronic patients. I asked her to think of patients on NSAIDs and Ultram who may need a dose adjustment. Dr said she will consider it.

	Parma	OH	44129	8/22/2012	I asked Elaine what it is about a patient's case that causes her to think of Butrans for them. She said it is a matter of if the patient is getting good pain relief on their medication- if they are not, she thinks of Butrans for them. I asked what patients are typically on when they come to her. She said usually Vicodin or sometimes Percocet. She added that if they are on Percocet, she switches them to a CII. I asked if this is a place where Butrans could be positioned for her. She said yes. She said she is getting to the point where she is more comfortable practicing there. She said pain management is different from any other type of medicine she has done in the past, but she is getting more comfortable now & is getting a sense of where medications can fit into her practice.
PPLPMDL0020000001	Maple Heights	OH	44137	8/22/2012	I reminded Dr Dale of our previous conversation when we talked about referring patients to pain management & giving them a prescription for Butrans when they refer. Dr Dale said he remembers that & added that he actually just wrote Butrans 2 weeks ago for a patient who he was referring to pain management. I asked what the patient was on before he switched & referred her. He said this patient had back pain & had been on tramadol, not well-controlled. He said he started her at Butrans 5mg. He added that he allowed her to take tramadol for supplemental analgesia, especially for the first few days. Discussed the importance of setting appropriate expectations with patients. He said he tells the patients to try Butrans for at least 3 days before deciding if they like it. I reminded him that he can titrate at that 3 day mark. He said he probably wouldn't titrate that early & that he would probably wait a week or so before increasing their dose. I asked if there was any reason he wouldn't continue to write Butrans for this patient type. He said he plans to continue this. Discussed managed care/savings. I asked what patient type he feels is appropriate for OxyContin. He said he would use this as a last resort- for a patient who had maxed out on short-acting & for whom nothing else worked.
PPLPMDL0020000001	Barberton	OH	44203	8/22/2012	I asked dr if he believes there is any downside to using Butrans on a regular basis? Dr said he has used it quite a bit and he has always had good results with Butrans. Dr said that if he has a patient that is on an opioid and their pain is under control he would not use Butrans. I asked if he has had such good results is there a reason why you are not using it more often. Dr said he has used it recently and the patient is doing well. Dr said he just needs to identify patients who need more pain relief and who are suffering from low back pain or arthritis. I reviewed the Ultram and vicodin patient profiles as well as managed care information. I asked dr if he understands where Butrans is appropriate. Dr agreed to understand and will continue to prescribe.
PPLPMDL0020000001	Akron	OH	44320	8/22/2012	Gave quick review to Butrans indication, 7 day transdermal system, and where to use. I asked if she sees herself using Butrans. Dr said maybe if she finds the right patient. I asked what she thinks the right patient is? Dr said a patient that needs an extended release opioid in a patch form. I showed her the initiation and titration guide and asked her if she has patient on tramadol and if she would use it for that patient that may need a dose adjustment. Dr agreed and said she understood.
PPLPMDL0020000001	Akron	OH	44319	8/22/2012	Spoke to office staff about my products and was told that the doctor had prescribed Butrans within the last week. I asked if they knew any specifics and the staff told me that the patient was discharged from Summa Akron City on Butrans and doctor refilled the Butrans. Saw dr in the office and introduced myself. Doctor said she was glad to have someone but said she would try go give me time to discuss my products soon.
PPLPMDL0020000001	Garfield Heights	OH	44125	8/22/2012	Spoke with pharmacist, Nate, & inquired about Butrans stocking. He said they do not have it & would order it on an as-needed basis. He added that he has no patients on it at this time. Updated him on Medco & Express Scripts preferred tier 2 status. He said they do fill prescriptions for those plans. I asked, when he sees prescriptions for OxyContin if he is seeing it dosed q12h or in any other dosing interval (like BID). He said he usually sees it q12h. I asked if he counsels patients on the importance of adhering to this q12h dosing interval, explaining that it is different than BID. He said patients who are on OxyContin are knowledgeable & know to take it every 12 Dr said he has not had his recent Butrans patient back in for a follow up. I asked dr to give me the patients feedback and hopefully he will be more prone to prescribe on a regular basis. Dr said he does like the product and has no problem with it. I told him to continue to identify Ultram patients needing a dose adjustment.
PPLPMDL0020000001	Copley	OH	44321	8/22/2012	Quick call...I showed doc the patient profile of Emma and reminded him that he said he would prescribe for this patient type. He said he has tried but the coverage limits him. I gave him a formulary grid showing medco and express scripts at the lowest branded co pay. I also explained that savings cards will provide further savings.
PPLPMDL0020000001	Bedford	OH	44146	8/22/2012	Dr Moufawad said he has been using more Butrans & OxyContin. I asked if there is any particular specific patient type(s) that he finds OxyContin to be effective for. He said he is limiting the amount of opioid his patients are on to no more than 100-120mg morphine equivalent per day. He said he has been taking patients off Opana & putting them on OxyContin because he feels that patients are more likely to try to abuse Opana. He said he knows we do not have data to show that & that it is just a matter of his personal opinion. He said as he decreases his Opana patients, he is increasing his OxyContin patients. Asked him if he has a patient on oxycodone plain or Percocet & he wanted them on something long-acting, why not choose OxyContin for them. Dr Moufawad said that actually for him, those patients would be offered Butrans as a long-acting option. He said he is trying to get most of his patients on Butrans if their insurance allows it & as long as the patient tolerates it.
PPLPMDL0020000001	Broadview Heights	OH	44147	8/22/2012	Dr Samuel said he just prescribed Butrans for a patient. He said he actually has a few patients on it. I asked him what, to him, makes a patient a good candidate for Butrans. He said this last patient he wrote it for was a 79 year old woman, not well-controlled on non-opioid medications. He added that she had been on hydrocodone in the past, but that was ineffective. Discussed managed care & likelihood of prior authorization required for Medicare. I asked him to think of Butrans for patients like this one clinically, but with commercial insurance for access to Butrans. He said probably 40% of his practice is commercially insured vs 60% with Medicare. Dr Samuel said he thinks Butrans is best used earlier in opioid therapy rather than later, when a patient is accustomed to taking short-acting opioids around-the-clock. I asked him where OxyContin fits in to his practice. He said he does not like to write it due to the stigma associated with it. I asked if he feels that OxyContin is safe & effective. He said it is the best. He said it is a great medication with a bad reputation & patients are afraid to take it due to the stigma associated with it. I asked if he feels that OxyContin is safe & effective. He said it is the best. He said it is a great medication with a bad reputation & patients are afraid to take it due to the stigma associated with it.
PPLPMDL0020000001	Broadview Heights	OH	44147	8/22/2012	Dr Samuel said he just prescribed Butrans for a patient. He said he actually has a few patients on it. I asked him what, to him, makes a patient a good candidate for Butrans. He said this last patient he wrote it for was a 79 year old woman, not well-controlled on non-opioid medications. He added that she had been on hydrocodone in the past, but that was ineffective. Discussed managed care & likelihood of prior authorization required for Medicare. I asked him to think of Butrans for patients like this one clinically, but with commercial insurance for access to Butrans. He said probably 40% of his practice is commercially insured vs 60% with Medicare. Dr Samuel said he thinks Butrans is best used earlier in opioid therapy rather than later, when a patient is accustomed to taking short-acting opioids around-the-clock. I asked him where OxyContin fits in to his practice. He said he does not like to write it due to the stigma associated with it. I asked if he feels that OxyContin is safe & effective. He said it is the best. He said it is a great medication with a bad reputation & patients are afraid to take it due to the stigma associated with it.
PPLPMDL0020000001	Warrensville Heights	OH	44122	8/22/2012	I showed Dr Zivic the q12h dosing interval spread in the OxyContin core visual aid. I asked him if when he writes OxyContin if he writes it in this q12h dosing interval. He said he almost always does. I asked if there are circumstances he would not do that on. He said only if he is in a hurry or something & does it by mistake- he said he always writes it q12h. I told him he is doing the right thing as OxyContin has only been studied & is only recommended to be dosed q12h. I asked if he talks to patients about what "every 12 hours" means, since patients could interpret this as "twice a day". He said he does talk to patients about this. I updated him on Butrans coverage on Medco & Express Scripts at the lowest branded co-pay. He said this was good news. I told him this is evidence that coverage continues to improve.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/23/2012	I asked dr if he had identified a Butrans patient yet? Dr said he has not but has asked a few patients about using the Butrans patch. Doctor said that the patients said they don't want to wear a patch. I asked doctor what the age of the patients are he had asked about Butrans? Dr said all were over 65yrs. I told dr to focus on patients that are under Medicare age who are currently working because maybe they would rather wear a patch under their clothes while working. Doctor thought that was a good idea and said he will continue to find new patients. Gave quick review of Butrans dosing and the case study profiles.
PPLPMDL0020000001	Mayfield Heights	OH	44124	8/23/2012	Doc said he has not written more butrans but the coverage is not good. I showed him the formulary grid and explained the commercial plans covering including medco and express scripts which cover butrans at the lowest branded co pay. He said he has just a few patients on it. I asked him to consider increasing his use of butrans for appropriate patients. Provided an initiation guide.
PPLPMDL0020000001	Fairlawn	OH	44333	8/23/2012	I asked dr if he feels comfortable using OxyContin? Dr said he does and uses it often for patients with low back pain and cancer pain? I asked dr what has to happen with a patient for him to use OxyContin. Doctor said when he has a patient with long term pain like cancer or osteoarthritis he likes to use it. Dr said that he does titrate through the doses when necessary to gain analgesia. I told dr that I want him to be as comfortable with Butrans as he is with OxyContin but the only way for him to accomplish that is to gain some clinical experience. I reviewed all key selling messages and discussed appropriate patients with the initiation and titration guide. Dr agreed to use Butrans.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	8/23/2012	I asked Lori to see the Dr to discuss Butrans. Lori told me that she typically will not see reps for walk in calls. I spoke with Lori and Dyan about Butrans and asked if there were any Butrans Experience kits left. There are three kits left.
PPLPMDL0020000001	Mayfield Heights	OH	44124	8/23/2012	Quick call...I reminded doc of the oxycontin indication, the flexibility of dosing, and the preferred formulary status of most Med D plans.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	8/23/2012	I asked dr if she had identified any Butrans customers? Dr said not and looked as if she wasn't sure what Butrans was. I reviewed the patient profiles with her and asked her to identify a patient and gain some clinical experience. Dr said ok.
PPLPMDL0020000001	Mayfield Heights	OH	44124	8/23/2012	Quick call...I reminded doc of the butrans patient type and the commercial plans and the lowest branded co pay for medco and express scripts patients.
PPLPMDL0020000001	Mayfield Hts	OH	44124	8/23/2012	Doc needed butrans savings cards at his beachwood office time share.
PPLPMDL0020000001	C. Falls	OH	44223	8/23/2012	I spoke to Jenn and Cindy about Butrans and OxyContin. I asked if they have seen any Butrans yet? Jenn told them that they were told by Glenn that they will be sending patients from pain management in the hospital so they ordered it then never saw the patients. They sent the Butrans back then a patient came in a month later wanting to fill the 5mg. The pharmacy did not have the dose needed and missed the Rx. I asked why they sent it back so soon and I was told they don't remember why. I asked if they work closely with Glenn(Pharmacist in pain mgt). Jenn told them they do work with him closely and they have a good working relationship. I asked about their fills and stocking of OxyContin and Cindy said they have all doses in stock and do fill it regularly but not as much as the last few years. They have enough copay cards and Butrans patient guides.
PPLPMDL0020000001	Akron	OH	44310	8/23/2012	I asked doctor to gain more clinical experience with Butrans by trying it in a patient taking Ultram needing a dose adjustment. Dr said he said he has used it but could not give me any specifics where he used it. I gave quick review of Emma case study and reviewed the formulary coverage with Medco/ESI.
PPLPMDL0020000001	Akron	OH	44305	8/23/2012	Used main visual and case study with Emma and asked dr to initiate Butrans in the Ultram patient who tells you they need more and still have pain. I showed doctor Vora the Butrans information guide and managed care coverage and asked him to gain additional clinical experience with Butrans. Dr said he likes the results and will continue to identify patients.
PPLPMDL0020000001	Parma	OH	44129	8/23/2012	I asked Dr Knochball what types of conditions he typically treats with hydrocodone for a month or more. He said he usually only uses hydrocodone for patients with back pain & he treats them for approximately 10 days with it. I showed him the Butrans opioid-experienced patient clinical backgrounder inclusion criteria & asked him what he does if his patients present with these types of conditions. He said he would certainly not prescribe any type of narcotics right off the bat for these patients. He said he would order an MRI, then send the patient to a neurosurgeon for a surgery. He said that it important to fix the problem instead of just covering it up with pain medication. I agreed that opioid therapy would not likely be a first line treatment for these patients. I asked what he does if/when a patient has tried other avenues (ie surgery) yet is still in pain. He said he is sympathetic to patients in pain because he has been in pain himself before. He said if the patient is trustworthy, he will treat them.
PPLPMDL0020000001	Parma	OH	44134	8/23/2012	Presented Butrans Patient Experience Program to Dr Mandat. He said he just put someone on Butrans from one of his nursing homes. He added that this patient had been on Vicodin & was too debilitated to request more when she needed it. He said he thought Butrans would be a good option for her because it would offer a continuous delivery of medication. I asked if, with him using it for his nursing home patients, managed care was ever a problem. He said he has been fortunate & has not had any problems. I asked if he has had good clinical experience with Butrans. He said he has no complaints. Explained how the Butrans Patient Experience Program could help patients communicate their results with Butrans weekly directly to him. I asked if he thought he would be able to utilize the 5 kits, reminding him that this would be more for office-based patients. He said he would use HCP asked if he can prescribe 15mcg (or 2 patches). I explained that 2 patches is not recommended and is not in our labeling. She also asked when patients might see measurable effects from butrans. I explained that steady state is reached in 3 days after which time she can titrate. She said she had a patient that was taking 10mcg which didnt work for them so he was titrated to 20mcg. She said they still love the product and the put
PPLPMDL0020000001	Mayfield Heights	OH	44124	8/23/2012	I asked Jean and Sarah about Butrans fills and stocking information. Jean told me that they do not have any in stock and told me they have not seen a prescription. I reviewed the initiation and titration guide for Butrans.
PPLPMDL0020000001	Akron	OH	44313	8/23/2012	I asked Janet if I could get a second with the doctor to discuss Butrans. Janet checked and said he was way behind and did not have time to talk. Left initiation and titration guide for Butrans.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/23/2012	Doctor reminded me that he is not starting any new patients on OxyContin. I asked dr if he would consider initiating a CII, 7 day transdermal system? Dr said possibly but he refers out if he thinks the patient is in chronic pain. I gave dr the initiation and titration guide and asked him to review. nothing else learned.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/23/2012	

	Garfield Hts	OH	44125	8/23/2012	I asked Dr Sadowski when he prescribes hydrocodone for a patient how he doses it. He said once a day. He also said he very rarely starts someone on hydrocodone. He said he avoids opioid medications whenever possible. I agreed that he should be cautious in prescribing all opioid medications as they are all abusable & addictive. I asked him where, then he sees a place for Butrans, also an opioid medication. He said he likes that it is transdermal because his experience has been that patients are not as likely to abuse them. I reminded him that Butrans is an opioid & still has abuse/addiction potential. I presented Butrans Patient Experience Program, explaining how they can be used & who they are for. He said about 80% of his practice is probably Medicare. I asked him to focus, then on the 20% with commercial insurance. I asked him to think of patients age 40-60 with chronically painful conditions. He said he has no problem with Butrans & it is just a matter of finding someone who can get it. Discussed managed care again, reviewing coverage on third party plans. Dr Sadowski said he has one patient on OxyContin. I asked him what it is about that one patient that makes him/her a good candidate for OxyContin. He said the patient came to him already on it so he continues them on it.
PPLPMDL0020000001	Parma	OH	44129	8/24/2012	Dr Gigliotti said he has been referring patients to Dr Salama (pain management specialist) down the hall so he does not have to manage them. I asked if he is referring everyone or just some. He said just some at this point. He said if he has any suspicions of the patient he refers them. I agreed that appropriate patient selection is important with all opioid medications, including Butrans & OxyContin.
PPLPMDL0020000001	Lyndhurst	OH	44124	8/24/2012	Quick Call.....reviewed the appropriate patient type for butrans using the Emma profile. He asked for confirmation of coverage on BWC. I told him butrans is being covered by BWC and now at the lowest branded co pay for medco and express scripts plans.
PPLPMDL0020000001	Akron	OH	44312	8/24/2012	Good discussion on Butrans and OxyContin. Doctor said that he had a patient who was taking vicoden who he thought was a good candidate for Butrans. The patient checked with his SummaCare Secure and Butrans was 4th tier on his plan and was too costly. Dr said that he thinks Butrans is a great product and said that the patch is a big plus for many patients. I reviewed the appropriate patients by using case studies of Emma and William, pain score reductions, application sites, managed care coverage review. Dr said he will continue to search for the appropriate candidate.
PPLPMDL0020000001	Lyndhurst	OH	44124	8/24/2012	Doc said she has not seen any skin reactions to butrans lately and she will continue to identify appropriate patients. I discussed the starting doses and formulary coverage.
PPLPMDL0020000001	Uniontown	OH	44685	8/24/2012	Quick message to Kelly(ma) and Dr Stetler about appropriate patients for Butrans. I reviewed Emma and William and asked dr if he feels comfortable enough with Butrans to continue prescribing for a patient on Ultram or vicoden who need a dose adjustment. Dr said it sounds good and said he will continue to identify patients. Left initiation and titration guide and reminded them to use the remaining Butrans patient experience kits.
PPLPMDL0020000001	Lyndhurst	OH	44124	8/24/2012	HCP said she has not had enough opportunity to prescribe much butrans as she has been workin fewer hours. I reminded her of the appropriate patient type -those failing on tramadol monotherapy. Provided a formulary
PPLPMDL0020000001	Parma	OH	44129	8/24/2012	Dr Salama said he has been having "issues" with Butrans. I asked him to elaborate. He said insurance companies continue to deny prescriptions for Butrans. He said he did not know what plans they were. Reviewed coverage & gave him Medco/Express Scripts announcement. I asked him to do his best to offer Butrans to appropriate patients with commercial insurance or BWC. He said he does give out the cards to eligible patients & that they help very much. Offered OxyContin savings cards but he said he did not want any. He said one of the other problems has been that in the hotter weather, Butrans does not seem to be sticking as well to patients. He asked what to do about this. Showed him patient information booklets & discussed taping edges with first aid tape or covering with something like Tegaderm or Bioclusive. He said he would start telling patients about the Tegaderm. He said finally, he has had issues with pharmacy stocking. He asked me who in the area stocks Butrans. I let him know I am in pharmacies often & have confirmed stocking at most major pharmacy retailers in the area. He said he has also encountered pharmacies not wanting to open a box to dispense fewer than 4 patches. I assured him if he is allowed to do this & let him know some pharmacies do not like to do it. Discussed dosing/range of patients. I asked him to continue prescribing Butrans in appropriate patients & he agreed.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/24/2012	Dr said he is still using OxyContin but it continues to be harder and harder to get through insurance. I asked if it is his go to long acting opioid and he said that it is. I reminded him of the AARP and CCRX coverage.
PPLPMDL0020000001	BEACHWOOD	OH	44122	8/24/2012	Spoke with Kylie Yarosh, RPH & Pharmacy Manager, & presented Purdue's products. I asked Kylie if there were any opportunities for me to provide education for any of the Ahuja staff/departments. Kylie said they would be interested in trying it. She said we could start with an in-service for the pharmacy staff on the topic of pain management & different types of treatment options available. I scheduled this for October. Kylie said that after that is complete, she will talk to other departments & nursing staff to come up with an educational in-service for them as well.
PPLPMDL0020000001	Chagrin Falls	OH	44023	8/24/2012	Spoke with pharmacist, Chris, who confirmed Butrans stocking of 2 of each strength. Reviewed Butrans managed care status with him & gave a package of trial/savings cards. Discussed eligibility for card usage & discussed how to activate & use the card. Also reviewed e-voucher for CVS customers. Discussed OxyContin savings program- he did not need any cards as he already had some.
PPLPMDL0020000001	Akron	OH	44319	8/24/2012	Spoke with Thomas about Butrans. Reviewed indication, CII, 7 day transdermal patch. Thomas said he has not filled it recently and does not have it in stock. No patient guides necessary yet.
PPLPMDL0020000001	Cleveland	OH	44130	8/24/2012	Quick call- Caught Dr Kansal on his way out of the office. I asked if he has been giving out the Butrans savings cards and/or Patient Experience Kits that we put in his exam rooms. He said he hasn't but added that he had very few patients this week. He said he remembers Butrans more now that the cards & kits are right in front of him when he is with patients. Spent time with Dorothy. Went over managed care information for Butrans & OxyContin. She said sh doesn't think Dr Kansal has given out any Butrans or OxyContin savings cards lately. She said they have been slow & reminded me that they are not taking as many patients who complain of pain. Gave OTC samples to Dorothy. Explained Senokot-S dual mode of action.
PPLPMDL0020000001	Chagrin Falls	OH	44022	8/24/2012	Quick call- Saw Dr Rood at the window & passed back Butrans Medco/Express Scripts announcement. I let him know patients with these prescription plans can get Butrans now at the lowest branded co-pay. He just thanked me & walked away. Gave Sherry Senokot-S samples.
PPLPMDL0020000001	Lyndhurst	OH	44124	8/24/2012	Reminded HCP of the appropriate butrans patient type, coverage and the savings cards.
PPLPMDL0020000001	Akron	OH	44312	8/24/2012	saw doctor through window and told him to use Butrans which is a CII, 7 day transdermal patch. Dr said he has not used yet. I told dr to use it for patients on Ultram or vicoden patients that need a dose adjustment. Dr said ok. I left the Butrans Pain Medicine News Special report article.
PPLPMDL0020000001	Beachwood	OH	44122	8/24/2012	Spoke with staff members Laura & Vicki who said that Dr Barrett will be leaving the practice in September. They said they will be going to Southpointe & working at their pain management center. I asked Vicki about managed care issues or questions for Butrans or OxyContin. She said she has not noticed anything different than usual with either of them. I gave her Butrans Medco/Express Scripts announcement & informed her about improving coverage. Also reminded her that BWC has been paying for Butrans. Gave her OxyContin Medicare D formulary grid.
PPLPMDL0020000001	Akron	OH	44319	8/24/2012	I asked dr Yee since he prescribed Butrans again recently if he feels comfortable enough to use on a more regular basis. Dr said maybe not on a regular basis. I asked dr why not? Dr said being able to find patients. I asked dr what patients he feels are appropriate for Butrans? Dr didn't really answer so I told him to use it instead of titrating up on patients on Ultram or vicoden. Dr said he will look into it.
PPLPMDL0020000001	Uniontown	OH	44685	8/24/2012	I asked dr if he believes Butrans is a product he would use for patients on IR opioids who may need a dose adjustment. Dr really didn't answer me and said that he still has not looked over all the product information I have left. I told him that Butrans is the first and only CII, 7 day transdermal patch. Dr said he will look it over.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/24/2012	Asked pharmacist about Butrans and OxyContin. They have the 5 and 10mcg of Butrans and all but the 60mg of OxyContin. Gave quick review of both products. Pharmacist said she was very busy and din't have time to talk.
PPLPMDL0020000001	Independence	OH	44131	8/24/2012	Quick call- Roman came to the window- I followed-up on last week's discussions regarding Butrans savings cards. He said everything was going ok now & added that he did not have any questions or issues at this time. I asked him to continue to give them out & he agreed. He said he did not need additional OxyContin savings cards at this time.
PPLPMDL0020000001	Mayfield Hts	OH	44124	8/24/2012	I showed doc the butrans demo patch and reminded him of the CII, once weekly status and an option for patients failing on tramadol monotherapy for chronic. pain. I asked him to try just one patient. Reminded him of the BWC coverage.
PPLPMDL0020000001	Akron	OH	44312	8/24/2012	Dr manning said he started two patients on Butrans. I asked him about the patient profiles and what IR opioids they were taking. Dr said Oxycodone. I reviewed the approximate conversions to Butrans and reminded dr when initiating patients on Butrans for patients over 30mg of a morphine equivalent to ensure to taper down to no more than 30mg before initiating Butrans. Doctor said they were both under 30mg but said its good information to know. I told dr that I would like to hear the results when the patient comes back in for a follow up. I reviewed the case studies, application sites, pain score reductions and managed care coverage. Dr said he will continue to look for patients and likes the patch instead of pills.
PPLPMDL0020000001	Munroe Falls	OH	44262	8/27/2012	I asked dr if she had identified appropriate patients for Butrans. Dr said she did not but thinks it is a good product and plans to try it. I reviewed the dosing, titration and provided quick review of appropriate patients using the initiation and titration guide. I told her to use Butrans on those patients under Medicare age who are in chronic pain. Dr said she would try Butrans.
PPLPMDL0020000001	Beachwood	OH	44122	8/27/2012	Spoke with MA (Allison) & reviewed Butrans appropriate patient type/range. Updated her on Butrans tier 2 status on Medco & Express Scripts national formularies. Also reviewed BWC. She said they see mostly BWC there. Reviewed OxyContin broad formulary access. Allison agreed to leave Butrans information & my card for Dr Malkamaki. She said he was just too busy to talk today.
PPLPMDL0020000001	Solon	OH	44139	8/27/2012	Spoke with pharmacist & updated him on Butrans coverage at a tier 2 co-pay for customers who use Medco or Express Scripts as their pharmacy benefits manager. Reviewed savings cards for Butrans & OxyContin & discussed eligibility requirements, reminding him patients who have any type of government insurance are not eligible for usage. He asked for one package of OxyContin savings cards.
PPLPMDL0020000001	Parma	OH	44134	8/27/2012	Spoke with pharmacist, Nate, who said he did not have any more Butrans savings cards. Discussed e-voucher for both Butrans & OxyContin savings cards. Gave him one package of Butrans cards & walked him through usage & eligibility requirements. Let him know customers would need the actual card for the trial offer, as this is not part of e-voucher. He said he has plenty of patient information booklets. I encouraged him to give them out to customers, especially if they are new to the brand, in effort to possibly reduce callbacks to the pharmacy about usage.
PPLPMDL0020000001	Mayfield Heights	OH	44124	8/27/2012	Reviewed the butrans formulary coverage and the recent updates with medco and express scripts - tier 2 coverage along with the savings cards means the lowest branded copay for those plans,
PPLPMDL0020000001	Akron	OH	44333	8/27/2012	I asked to see the doctor and was told she is way behind and could not see me. I left Butrans FPI and OxyContin formulary grid.
PPLPMDL0020000001	Akron	OH	44310	8/27/2012	I asked dr if it makes sense to initiate Butrans for patients that tell you they need more of their IR opioid and they have a chronic condition? Dr said it does and he will use it for those patients on vicoden. I showed the case studies and focused on Emma. Dr said he uses Ultram and will look at using Butrans there as well. Gave quick overview of formulary coverage to doctor and Ruth(ma) in the lab.
PPLPMDL0020000001	Independence	OH	44131	8/27/2012	Quick call- Dr Jack said he is sure he will find a patient for Butrans. I reminded him it has been almost 2 years of him telling me that & asked him if he would agree that he probably sees patients daily who would be appropriate to at least try Butrans. He said I was probably right & walked away.
PPLPMDL0020000001	Parma	OH	44129	8/27/2012	Quick call- Dr Taylor saw me at the window & said she hasn't put anyone on Butrans since lunch last week. She added that she knows she will find someone though. Broad formulary access for OxyContin message.
PPLPMDL0020000001	Akron	OH	44333	8/27/2012	Met Rachel(MA) and spoke to her about OxyContin and Butrans. Showed her the Butrans Patient experience kits and explained the patient and doctor benefit. Reviewed Butrans indication, CII, and asked him about his experience. Dr said he has used it a few times and has liked the results. I asked him where he has used it and he told me for patients on Ultram, vicoden or percocet. Dr told me to schedule a lunch to further discuss. Gave quick run down of managed care coverage.
PPLPMDL0020000001	Independence	OH	44131	8/27/2012	I asked Dr Trickett what types of patients she finds OxyContin to be a good medication for. She said someone with more severe pain & someone who has a chronically painful condition like osteoarthritis. She said she finds that no matter what condition or medication, patients always tend to need escalating doses of opioid medications. Discussed physical dependence, tolerance, & addiction & the differences between these terms. Dr Trickett said she has noticed that pain management physicians don't even want to seem to write narcotic medications anymore. She said sometimes she doesn't know what to do with patients because she will get to a point with some of them where she is no longer comfortable writing their medication, so she refers to pain management, only to have pain management send them back to her for their medications. I agreed that this can be challenging. I reminded Dr Trickett of our last conversation when she told me that she thinks of Butrans for patients who she thinks will need pain medication for the rest of their lives & asked her what about patients who need treatment for a month to a few months. She said she does use Butrans after a patient has been on short-acting like Vicodin for one month, but statistically, patients who aren't better within one month, will be on that pain medication forever. She said she puts them on Butrans after one month but in her mind, that patient will be on it indefinitely. She said she would like to find more good patients for it.
PPLPMDL0020000001	Akron	OH	44333	8/27/2012	Marsha Fox told me that the doctor was over an hour behind however allow me 30 seconds. I gave quick overview of the inclusion criteria for Butrans opioid experienced patients and asked the doctor if he treated patient with those conditions with Butrans. Doctor said a large part of his Butrans prescriptions come from chronic low back problems and osteoarthritis. nothing else learned.

PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/27/2012	I asked dr if he finds himself needing to titrate his OxyContin patients? Dr said he does but the government wants him to titrate his patients down on OxyContin. I asked dr if that is best for his patients who are still in pain. Dr said it is not good so he will continue to titrate up when necessary. AARP and CCRx coverage review.
PPLPMDL0020000001	Solon	OH	44139	8/27/2012	Spoke with nurse, Julie, who said Dr Zaidi is out today. Reviewed OxyContin formulary grids. She said there really have not been any managed care issues other than BWC denials, but she said this has been a class-wide problem. Discussed Butrans coverage, updating her on Medco/Express Scripts coverage at tier 2. Reviewed savings cards for both products.
PPLPMDL0020000001	Akron	OH	44333	8/27/2012	I asked dr about his OxyContin use and wanted to know what has to happen in order for him to prescribe Butrans? Dr said that most of his OxyContin patients are those that are on vicoden and need more of a long acting product like OxyContin. Dr said he likes the Q12h dosing, dosing flexibility, and managed care coverage. Dr said he has patients on just about every dose. I reviewed the conversions and asked if he always moves patients from vicoden to OxyContin or they get moved to percocet first. Dr said in most cases if he knows the patient has chronic pain he will skip the percocet and go to OxyContin from vicoden. Reviewed Butrans dosing, titration, inclusion criteria, case studies, and managed care coverage. Dr said his results so far have been positive and wanted to know when it will get on Medicare. I told him I didnt know and asked if he has Medco/ESI patients. Dr said he did and likes the copy cards with the trial offer. Dr said his patients on OxyContin get constipation and asked what product he should provide. I told him that Senokot S is good because it has both Senna and Docusate Sodium which works well for medication induced constipation. Dr agreed to prescribe more OxyContin and Butrans.
PPLPMDL0020000001	Fairlawn	OH	44333	8/27/2012	Spoke to Christopher and asked if he knew about Butrans. He said he did but admitted that they have only filled one or two prescriptions in a year. Reviewed dosing and titration at 3 days. He said they had the 5 and 10 that they just ordered and probably because they had an order come in. Provided copy card information and discussed managed care coverage.
PPLPMDL0020000001	Copley	OH	44321	8/27/2012	I asked staff to see the doctor. I was told that the doctor is with patients and will not see reps without an appointment. I reminded staff that he cancelled my last two lunches. Left OxyContin conversion and titration guide and Butrans FPI.
PPLPMDL0020000001	Akron	OH	44303	8/27/2012	I asked Rod if he has filled a Butrans prescription in August. Rod said he has not but has the copy cards and information I gave him. I asked where most of his OxyContin business is coming from. Rod said most of the prescriptions come from the Akron area such as Lababidi. He is good on copy cards.
PPLPMDL0020000001	Cleveland	OH	44130	8/28/2012	Quick call- Dr Fedorko said he didn't have any time today. Positioned Butrans for appropriate patients with BWC for whom he is considering starting on or adjusting an opioid medication. Also gave him OxyContin formulary
PPLPMDL0020000001	Parma	OH	44129	8/28/2012	Quick call- I handed Dr Roheny an updated Butrans formulary grid. I showed him that on some of the nation's biggest plans, such as Medical Mutual & Medco, patients can get Butrans for the lowest branded co-pay without restrictions. I reminded him that he has trial/savings cards, allowing those patients to try Butrans for 28 days, then pay only \$15-20 out of pocket monthly. I asked him what reasons he would have to not try Butrans on a few appropriate patients. He did not answer. He exposed the adhesive backing on the formulary grid & hung it on the door in his office, saying this would help him remember. I asked him if he wanted an OxyContin one to hang next to it, reminding him of favorable & broad access. He said he would just stay with the Butrans grid.
PPLPMDL0020000001	Parma	OH	44129	8/28/2012	Discussed the importance of appropriate patient selection & reviewed appropriate patient type for Butrans & OxyContin. Also discussed OARRS, urine drug screening, & pain contracts- Dr Jugulion agrees that those measures are important to take if a physician decides to prescribe any type of narcotic medication. I asked, since he has told me that he does not write any pain medication, if he refers frequently to pain management. He said he does so a lot for blocks. He went on to explain that some pain management physicians do not practice responsibly so he avoids referring to them. He said he does have a few different physicians who he refers to when a patient has pain. Dr Jugulion said many of his patients have back pain. He said he refers all these patients. <font color=blue>b>CHUDAKOB's query on 09/05/2012</b></font>Ashleigh, I saw in your notes it says you discussed urine drug screening. What did you discuss about this?<font color=green>b>APSEGA's response on 09/06/2012</b></font>We talked about it being a way to monitor patients for whom opioid medications are prescribed. He was saying that if a doctor is going to prescribe opioids, he/she should use every measure possible (OARRS, urine drug screens, pain contracts) to protect his/her practice.<font color=blue>b>CHUDAKOB added notes on 09/06/2012</b></font>Ok. Thanks for the clarification.
PPLPMDL0020000001	Cleveland	OH	44130	8/28/2012	Gave Dr Diab OxyContin savings cards as they had thrown many of the savings cards & patient information brochures for all medications away. Reviewed broad formulary coverage. Also handed him updated Butrans formulary grid, pointing out to him that on his top plans, Medical Mutual & Medco, Butrans is covered at tier 2 with no prior authorization. I reminded him that he had said before that he liked Butrans clinically & his only issue was coverage. I asked him to give Butrans another try on a few appropriate patients since coverage has improved. He said he would see.
PPLPMDL0020000001	Independence	OH	44131	8/28/2012	Dr Sundaram said he has not written Butrans lately but he has used OxyContin. I asked what types of patients he finds he uses OxyContin for. He said usually patients at nursing homes or in the hospital. I asked about usage for his office patients. He said some of them are on OxyContin, but more & more, the government is watching the prescription narcotics & doctors writing them. He said he is more cautious than ever now. He added that it is unfortunate that it has come to this. I agreed that abuse, misuse, & diversion have caused many issues & encouraged him to be as cautious as possible in prescribing. I asked if he is using OARRS. He said he is now. He also said he uses a pain contract & does random drug screening. Dr Sundaram said he is no longer taking any new patients calling in for pain. I asked what about his established patients who come to him with pain. He said he is willing to treat these patients. He said he probably has a total of 30-40 patients falling into that category. I told him that that is the segment of his patients I would be focusing on when discussing Butrans or OxyContin with him. I asked him to continue to use OxyContin in appropriate patients & to consider Butrans once weekly for some of them who could benefit from that dosing. He said he would do his best.
PPLPMDL0020000001	Parma	OH	44134	8/28/2012	Spoke with Kathy & reviewed Butrans patient type/range & updated her on Medco/Express Scripts coverage of Butrans on tier 2 without restrictions. Also discussed savings cards & eligibility requirements for card usage, reminding her that patients with any type of government insurance cannot use the cards. She said they do not currently have anyone on Butrans. I asked if they fill scripts for chronic short-acting opioids. She said many. Discussed rage of patients again. Also reviewed OxyContin savings program & eligibility requirements.
PPLPMDL0020000001	Parma	OH	44134	8/28/2012	Spoke with floater pharmacist (Amanda) & Lesia, technician. Reviewed Butrans update for Medco/Express Scripts & discussed patient type. Also discussed trial/savings program & eligibility requirements. Lesia said she thinks they have 2 people on it. They checked the shelf & said they did not have any savings cards. Gave them one package. Also discussed OxyContin savings cards. They did not need any at this time.
PPLPMDL0020000001	Highland Heights	OH	44143	8/28/2012	Doc asked when butrans would be covered by medicare. I told him that i could not answer that question. I did tell him that there are a lot of med D scripts going through with a PA and that each PA done is kind of an endorsement for butrans. He said his staff does not like doing PAS. I told him that it may be extra work for his staff but it could benefit his patients. Discussed the commercial plans covering butrans.
PPLPMDL0020000001	Fairlawn	OH	44333	8/28/2012	I gave quick review of Butrans to dr Parisi over the counter and asked him if he had identified any patients yet. Dr told me that he did not and he thanked me for the reminder. I left dr with the initiation and titration guide and asked him to review it to help him identify patients
PPLPMDL0020000001	Cleveland	OH	44143	8/28/2012	I discussed the butrans patient type as one falling on tramadol - I asked him to try the patient on butrans when 200 or 300mg of tramadol no longer controls their pain. Let him know that I was leaving him more saving cards for eligible patients.
PPLPMDL0020000001	Parma	OH	44129	8/28/2012	I asked Dr Moysaenko what patient type(s) he feels comfortable using OxyContin in. He said not very many. He said he tries to avoid prescribing it whenever possible. I asked if this is something exclusive to OxyContin or if he is speaking of CII medications in general. He said especially OxyContin due to the negative stigma attached to it. I asked if he has found it to be helpful for any of his patients. He said he does use it for patients for whom nothing else works for. He said if someone has tried everything else with no success & they are legitimately in pain, he would prescribe OxyContin for that patient. Reviewed Butrans core messages. I asked where he sees a place for Butrans. He said he wasn't sure. He added that most patients on any type of pain medication are only on it for "a short time". I asked what he means by that- weeks? months? He said he typically uses it for maybe a week or two for someone. I agreed that Butrans should not be used for acute pain. I asked if he ever finds himself refilling prescriptions for short-acting opioid for patients month after month. He said rarely. Discussed Butrans as a possible option for that type of patient if they meet the indication. Updated him on formulary coverage.
PPLPMDL0020000001	Parma	OH	44129	8/28/2012	Spoke with MA Cindy who said Dr Ortega was out of the office today. I asked if she has had any managed care issues with either Butrans or OxyContin or if any patients had given feedback on either recently since she handles all of the office's phone calls. She said everything has gone smoothly for both products. Reviewed Butrans patient information booklets with her & showed her how to use them to answer questions. Also suggested she keep one on hand at her desk so that if a patient calls with a question she can consult the booklet. I asked if they have patients on managed care plans other than BWC. She said some, but most are BWC. Discussed improving
PPLPMDL0020000001	Akron	OH	44310	8/29/2012	Spoke to Dr Cremer and Char about the appropriate patient types for Butrans. Dr said he remembered what I said last time about trying to identify existing patients on Ultram or vicoden who need a dose adjustment. Char said that they had been looking at new patients that fit the criteria. I reviewed Emma and William case studies.
PPLPMDL0020000001	Parma	OH	44129	8/29/2012	Introduced Butrans to Dr Al-Abousi, delivering core messages. Discussed Butrans as a once weekly transdermal system of buprenorphine, a partial mu opioid receptor agonist. She asked how Butrans compares to fentanyl. I told her we do not have comparative data & showed appropriate patient type/range. She said she does think Butrans would be a good option for patients in nursing homes. Discussed formulary coverage. Focused her on appropriate patients ages 50-60 with pain from conditions such as osteoarthritis or spinal stenosis. I asked if she has patients like that in her office. She said she does. She also said she has some elderly patients on Percocet around-the-clock. I showed OxyContin conversion guide & showed how patients on Percocet could get the same amount of oxycodone in a q12h dose with OxyContin. Went over OxyContin formulary grid. Also reviewed Butrans formulary grid & showed demo patch. Dr Al-Abousi said she likes the idea of Butrans & will think of it for her patients.
PPLPMDL0020000001	Parma	OH	44129	8/29/2012	Dr Gigliotti said he probably only has 3 patients on Butrans & he feels like he should have more because I am so nice & patient. I told him he does not need to increase his prescribing for me, but because he thinks his patients could benefit from it. I asked why he thinks he doesn't have more patients on Butrans. He said he doesn't know. I asked what kind of feedback he has had. He said he knows one person did like it & has stayed on it. Discussed importance of appropriate patient selection for all opioid medications & assessing pain on a 0-10 scale. I asked if he has patients rate their pain on that scale. He said he does. Dr Gigliotti said he does still have many patients on OxyContin. Discussed what range of patients may be appropriate for Butrans & how those beyond that range, especially those on oxycodone IR around-the-clock, may benefit from q12h OxyContin. Dr Gigliotti agreed that it makes sense for patients on Percocet to be on OxyContin since it is the same molecule in q12h dosing. Dr Gigliotti said he would find more patients for Butrans.
PPLPMDL0020000001	Stow	OH	44224	8/29/2012	Dr asked to be quick, she was leaving. I said for her patients she sees who are taking Percocet etc, she has option of Oxycontin and I reviewed low doses and said it is 2nd tier on most commercial and medicare plans. Let her know Butrans preferred status with Medco and Express scripts.
PPLPMDL0020000001	Parma	OH	44129	8/29/2012	Saw Dr Salama at Dr Gigliotti's office. He said he has put a few more patients on Butrans, but not OxyContin, since he saw me last. I asked him to continue to identify Butrans patients & continue those appropriate on OxyContin & he agreed. He mentioned that I was now his only Butrans rep due to the East Cleveland rep leaving. I assured him I would take care of his office & would keep him stocked on savings & information until that spot saw dr through the window and asked him if he has prescribed an OxyContin or Butrans prescription this week. Dr laughed and told me he has a handful or two of OxyContin patients but has not had many new starts recently. Dr said he hasn't gotten to Butrans and asked if its on Medicare yet. I told him it is not and to look for patients with private prescription insurance like Medco/ESI. Gave additional information to Nadia about OxyContin and Butrans managed care.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/29/2012	Told dr through window about Butrans as the CII. I day transdermal patch and asked her if she had any new starts? Dr said that she had not but said she would try to remember it. I told her to remember it when she has a patient that needs a dose adjustment on Ultram or Vicoden. I left her the initiation and titration guide.
PPLPMDL0020000001	Akron	OH	44304	8/29/2012	Pharmacist told me that she didnt have time to talk much but did tell me that they have filled a Butrans prescription 5mcg recently. Left initiation and titration guide and managed care flashcard.
PPLPMDL0020000001	Akron	OH	44312	8/29/2012	I asked to see the doctor to review Butrans. I was told that doctor does not see reps without an appointment for lunch. The office is booked until the end of November. I asked to review Butrans with the nurse or ma for dr Kile. I gave quick review of Butrans to his ma and provided all key selling messages. Left initiation and titration guide for Dr Kile.
PPLPMDL0020000001	Stow	OH	44224	8/29/2012	I asked Dr if he sees patients like this patient who is on Tramdol who has chronic condition and he said yes. I said when they come in and say it is no longer working do you increase or go to Vicodin and he said yes. I said would you consider Butrans and he said yes. HE said especially now with his Vlcodin patients he has to switch them to Norco, he said this is a good option. I reviewed managed care and said for your patients who are taking higher doses of Vicodin, he has option of low dose oxycontin,
PPLPMDL0020000001					

PPLPMDL0020000001	Stow	OH	44224	8/29/2012	I asked Kristen if she sees patients who are on Tramadol and she said yes. I said what happens when they say it is not working and she said she has them take more or changes it or refers. I said would you consider Butrans and she said yes. She asked if it can be abused or cut open and I said it is schedule 3 and can be abused like other schedule 3 opioids and she said she would give it a try. I reviewed trial cards with her and managed care
PPLPMDL0020000001	Barberton	OH	44203	8/29/2012	Hospital receptionist told me that the rules have changed with reps in to to see Haas and Hazra. Apparently a couple of reps abused the doctors time and access has been shut off even though I am certified through RepTrax.
PPLPMDL0020000001	Akron	OH	44307	8/29/2012	Hospital receptionist told me that the rules have changed with reps in to to see Haas and Hazra. Apparently a couple of reps abused the doctors time and access has been shut off even though I am certified through RepTrax.
PPLPMDL0020000001	Parma	OH	44129	8/30/2012	Quick call- Gave Dr Chagin Medco/Express Scripts Butrans announcement & asked about recent prescribing of Butrans. He said he has written a few prescriptions since our last lunch. I asked him to be sure to give the Patient Experience Kit with the prescription. Delivered broad formulary access message.
PPLPMDL0020000001	Bedford	OH	44146	8/30/2012	Spoke with pharmacist Ed. I asked what type of information he would find helpful for him and/or his technicians that I could provide. He said he doesn't really know. He said he always seems to have all the information he needs. He said he guesses if anything new with my medications comes up, he would want to hear about that. Discussed savings programs & eligibility requirements.
PPLPMDL0020000001	Brooklyn	OH	44144	8/30/2012	Quick call- Caught Dr Deeb at the window. Passed back Medco/Express Scripts announcement for Butrans & delivered OxyContin broad formulary access message. He thanked me & walked away.
PPLPMDL0020000001	Parma	OH	44129	8/30/2012	Myra said she contacted the head of the OAPA & gave her my information, asking her to contact me to set up a Butrans program for their group. She said Bridgett should be contacting me within the next couple of weeks. Myra said she has prescribed Butrans lately & plans to continue to do so. I showed her results from Butrans clinical backgrounder & asked her thoughts- does she find these results significant. She said she does. I asked if she felt they were mirrored in what she has seen with Butrans. She said she hasn't really thought about it. She then got called away for a patient issue. Spent time with Dawn & asked her about Butrans managed care. She said she seems to be getting pushback with prior authorizations that are ridiculous. She said it was for Medicaid. Discussed the different Medicaid plans & told her about Caresource's prior authorization. Uncovered that it was WellCare plan giving her the issues, not Caresource.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/30/2012	Asked Pat about recent fills and ordering of Butrans. Pat said that they have filled it a few times recently and just ordered two boxes of 10mcg and one of the 5mcg. Gave Pat the new managed care updates and asked about OxyContin patients coming in to fill. Pat said they see all age ranges and the most common doses filled are the 10, 20 and 40mg doses.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/30/2012	I asked dr if he has reservations in using Butrans? Dr said no. I asked dr what he has not tried it. Dr said he doesn't know. I asked if he has any patients on Ultram or vicoden? Dr said a few. I asked dr to try it. Dr did not
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/30/2012	Spoke to Jackie about Butrans. Provided review of the product with key selling messages. Jackie said they have not filled the product and do not have any in stock.
PPLPMDL0020000001	Bedford	OH	44146	8/30/2012	Dr Moufawad said he has been giving out the patient information guides & savings cards to non-BWC patients. He said the interesting thing about opioids is that different molecules work differently for every individual. He said what works for someone may not work for someone else. He said this is why it would be strange to see a prescriber writing only one or two medications. He said to practice effectively, the provider has to be open to all the treatment options. He said he has found Butrans & OxyContin to be good for many of his patients. I asked him to continue to prescribe each of them where appropriate & he agreed. Spoke with MA Christina who said Dr Moufawad is considering eliminating his office hours in Twinsburg. She said he has been talking about doing that for awhile but he would lose business by doing so he is not sure.
PPLPMDL0020000001	Brooklyn	OH	44130	8/30/2012	Floater pharmacist was filling in today. Showed Butrans patient information booklets & showed how it can be used to answer patient questions regarding Butrans. She checked their shelf to ensure they had some available. Also discussed savings programs for Butrans & OxyContin. She said she gives out the savings cards when she is at a location that has them.
PPLPMDL0020000001	Akron	OH	44312	8/31/2012	I asked dr Hill if he thinks Butrans will fit in his practice? Dr said he thinks so but he has not found a patient yet. I gave quick overview of appropriate patients and dr said he will try to find one.
PPLPMDL0020000001	Akron	OH	44312	8/31/2012	I asked dr if he had seen any of his Butrans back in for follow up appointments? Dr said he will see one of them last week and said he thinks Butrans is a really good product because of the 7 day controlled release and low incidence of constipation. I told dr to continue using for those patient needing a dose adjustment on IR opioids.
PPLPMDL0020000001	Uniontown	OH	44685	8/31/2012	Matt said the pharmacy has not filled Butrans recently but they do have the 5 and 10mcg on the shelf. I gave review of Butrans application sites and titration every three days. They are stocked with OxyContin and Matt said that they have patients on just about every dose. I asked about the average age of the OxyContin patient and he said most are over 65 and have AARP. Reviewed Med D plan coverage.
PPLPMDL0020000001	Akron	OH	44312	8/31/2012	I asked dr if he had the opportunity to use Butrans yet? Dr said he had not but has a couple of patient that have Medicare and know s it may be too expensive. I asked if any of them have secondary insurance? Dr said he was not sure but will check. I reminded him of 7 days and able to titrate every three days.
PPLPMDL0020000001	Akron	OH	44319	8/31/2012	Provided review of Butrans dosing and titration as well as OxyContin. Sara said she didn't have time to talk and said she has not filled a Butrans prescription. nothing else learned.
PPLPMDL0020000001	Akron	OH	44319	8/31/2012	I asked dr what his overall impression of Butrans is? Dr said he is not sure yet and is concerned about coverage for medicare and Medicaid. I asked if he believes in the product clinically? Dr said no because he has yet to use it! I asked him to find out for himself and gain some clinical experience! Dr again asked about Medicare. I asked him if he has patients under 65 who have private prescription insurance and may need a dose adjustment on Ultram. Dr said yes but a small amount. I gave him managed care coverages.
PPLPMDL0020000001	Parma	OH	44129	9/4/2012	Dr Ortega said he was on his way out of the office so he did not have time to talk today. Positioned Butrans for appropriate patients taking less than 40mg equivalent short-acting oxycodone per day & OxyContin for those taking beyond that. Dr Ortega said he has been prescribing both.
PPLPMDL0020000001	Garfield Hts	OH	44125	9/4/2012	Quick call- Dr Sadowski said he was behind today & didn't have time. Recapped our previous conversations & reminded him of his interest in Butrans. He said he will prescribe it as soon as he sees the right patient. Positioned Butrans for appropriate patients with commercial insurance who fit the indication, for whom he is ready to start on an opioid analgesic. Spoke with Deena & reviewed formulary grids, pointing out favorable OxyContin coverage across various formularies & Butrans coverage with commercial insurance.
PPLPMDL0020000001	Cleveland	OH	44144	9/4/2012	Dr Paul said she likes Butrans. I asked her to tell me more about that. She said she has had a few of her patients put on Butrans by other physicians- one at the hospital & one from pain management. She added that patients have done well on it, so she has continued them on it. She added that she thinks patients experience fewer side effects & find it convenient. I told her we have no data to support that. She said it doesn't matter- that is what she has seen. She said the longer it is out & the more physicians she sees using it, the more likely she is to use it. She said the only thing that would hinder that would be insurance. She asked what kind of coverage Butrans has. Showed updated formulary grid & discussed focusing on patients with commercial insurance. Reviewed appropriate patient type, discussing those 40-60, working, who are not well-controlled on their short-acting opioid around-the-clock or those who she is considering starting on an opioid. Discussed dosing & titration. I asked Dr Paul to continue patients who come in on it where appropriate & look for new starts & she agreed. I asked where she sees a place for OxyContin. She said she doesn't use much of it at all. Positioned OxyContin for appropriate patients who could benefit from a q12h dose of oxycodone, especially if they are already on Percocet or
PPLPMDL0020000001	Cleveland	OH	44130	9/4/2012	Positioned OxyContin q12h, with 7 tablet strengths, for appropriate patients who could benefit from a q12h dose of oxycodone. Also reviewed Butrans once weekly as the only long-acting CII opioid analgesic available.
PPLPMDL0020000001	Brooklyn	OH	44144	9/4/2012	Positioned Butrans for appropriate patients aged 40-60, working, who are not well-controlled on a short-acting opioid analgesic around-the-clock. Reviewed dosing. Positioned OxyContin for appropriate patients who could benefit from a q12h dose of oxycodone, especially if they are already on an immediate-release form of oxycodone. Dr Hilton said she doesn't write many pain medications, said she was running behind, then left the room.
PPLPMDL0020000001	Cleveland	OH	44125	9/4/2012	Spoke with pharmacist, Chris, who said he had very little time. Reviewed Butrans & OxyContin savings programs & asked if he needed cards. He said he did not at this time. He said he has filled Butrans before but cannot think of anyone on it regularly.
PPLPMDL0020000001	Fairlawn	OH	44333	9/4/2012	I asked if they have filled Butrans recently? Gary said that they have not but do have 5mcg and 120mcg in stock. Provided Butrans managed care coverage and discussed OxyContin conversions and doses they are filling. Gary said that they fill all doses but mostly fill the 10, 20, and 40mg doses. Left formulary grid cards with pharmacy.
PPLPMDL0020000001	Uniontown	OH	44685	9/4/2012	Barb said they have not filled any more Butrans recently but do fill OxyContin regularly. I asked which doses and she told me that they fill mostly 10, 20, 40, and 60. I asked about the ages of the patients they see on OxyContin and they told me that there is a vast age difference from mid 30's to 80's. Provided conversion guide and they took Butrans patient information guides.
PPLPMDL0020000001	Norton	OH	44203	9/4/2012	Dr Borges said he had time for one point on Butrans. I told him when he sees a patient with Low back pain to think of Butrans. I showed him the dosings and conversions with main visaid and showed him the two low back studies from FPI. Dr Borges said he has a couple of patient this week that have mow back pain and he will consider Butrans.
PPLPMDL0020000001	Uniontown	OH	44685	9/4/2012	I asked dr if he had any Butrans initiations? Dr said she has not and has been trying to remember it. I told her to remember one point with Butrans. When you have a patient in to see you with low back pain, think Butrans. I showed her both studies from FPI and told her that they both are for low back pain patients. Dr said she can remember that and will do her best to get some experience with the product.
PPLPMDL0020000001	Strongsville	OH	44136	9/4/2012	Spoke with pharmacist, Jim, who said he does have a few patients on Butrans consistently. He said the ones he is thinking of are from Dr Samuel. He asked if I call on him. I let him know that I do work with Dr Samuel. Discussed dosing & titration. I asked if any of these patients have been titrated at all. He said that he does not think any dosing adjustments have been made. Discussed OxyContin 7 tablet strengths. Jim said they stock most
PPLPMDL0020000001	Akron	OH	44333	9/4/2012	Gave overview of OxyContin and Butrans giving all key selling messages. I asked dr what his clinical experience is with OxyContin? Dr said he uses it but reserves it for his "hard cases". Dr said he uses it for patients in severe pain after surgery. Dr said he uses mostly the 20mg dose which he said works well and doesn't have to titrate much. Dr said he wishes there was an extended release product for more moderate pain. I introduced Butrans and discussed all key selling messages. Dr wanted to know side effects and managed care coverage and dr said he was really glad that BWC covers it. Dr said he will continue to use OxyContin and thinks Butrans will be a good addition for him. closed with copay cards.
PPLPMDL0020000001	Cleveland	OH	44130	9/4/2012	Dr Fedorko said insurance companies never want to pay for branded medications. I showed him updated Butrans formulary grid & OxyContin formulary grid. I pointed out various plans that cover Butrans & OxyContin without restrictions. I reminded him also that BWC is paying for Butrans. I told Dr Fedorko if he focuses on BWC & commercially insured patients who are appropriate for Butrans, he should not have any problems from insurance. He said he just hates pain medications. I reminded him that medications like Butrans & OxyContin are there for patients in legitimate moderate to severe pain. He agreed that some patients do have real pain, but added that it doesn't seem like there are many.
PPLPMDL0020000001	Munroe Falls	OH	44262	9/5/2012	I asked dr if she had identified any Butrans patients yet? Dr said that she had not but said she thinks it will be good for a few of her patients. I asked which patients? Dr said she has a couple she is considering for Butrans that are on vicoden. I told her that it sounded great and look forward to hearing about it. I showed her the doses and conversions.
PPLPMDL0020000001	Parma	OH	44129	9/5/2012	Reviewed Butrans with Dr Hines. He said he has not yet prescribed Butrans. Reviewed appropriate patient type/range, including OxyContin as an option for appropriate patients beyond Butrans. Showed him Butrans range of patients in initiation guide. Dr Hines said most of his patients tend to be in the "beyond Butrans" range. Discussed OxyContin, with 7 tablet strengths, as an option for those patients. I asked if he is ever the one to start a patient on their first opioid. He said sometimes. Discussed Butrans once weekly dosing & supplemental analgesia. He said patients would not be able to wear a patch for a week. He added that when they use patches now, they never seem to last very long. I asked if he means the medication or the adhesive. He said the adhesive. I showed him a Butrans demo patch & asked if after looking at it if he had any doubts about the Butrans adhesive. He said no & that it seems like it actually would stick for the week. I told him everyone is different & it is possible that the adhesive would not stick on everyone. I let him know patients can tape the edges with first aid tape or cover it with Bioclusive or Tegaderm. He asked about insurance coverage. Showed formulary grid & asked him to focus on patients who have commercial insurance.
PPLPMDL0020000001	Parma	OH	44129	9/5/2012	Introduced myself & Purdue's products to Dr Kim. Delivered Butrans core messages & discussed appropriate patient type, including OxyContin as an option for appropriate patients beyond the Butrans range. Dr Kim just thanked me & left the room.
PPLPMDL0020000001	Parma	OH	44129	9/5/2012	Quick call- Elaine said she was running behind & didn't have a lot of time. Positioned Butrans for appropriate patients who may benefit from once weekly transdermal dosing. Also discussed supplemental analgesia if necessary. Spoke with Dawn & discussed Caresource prior authorization requirements as well as other managed care plans, reminding her that commercially insured patients have the most access to Butrans.
PPLPMDL0020000001	Norton	OH	44203	9/5/2012	Spoke to Jenny about Butrans and asked her if they have dispensed it. Jenny said that they have a few patient on it from Dr Lababidi and Katsaros. All their patients that come in to refill are on either the 10mcg or 20mcg. I reviewed dosing, titration, appropriate patients and managed care updates. Jenny said she ran a trial offer card last week.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	9/5/2012	asked dr if he finds himself using OxyContin for new start patients? Dr said he doesn't use it much anymore and is trying to get out of prescribing CII products because of the patients he found it brings. Dr said he feels comfortable with the thought of Butrans since it is a CII and extended release. Gave quick overview of appropriate patients, application sites, titration, and managed care. Dr said he will look for patients.



PPLPMDL0020000001	Parma	OH	44129	9/5/2012	I asked Dr Eicher if he treats a lot of pain in his patient population. He said in oncology, patients are often in pain. I asked if there are any types of cancer that tend to be more painful than others or if all completely depends on the individual patient. He said bone cancer tends to be one of the most painful forms of cancer. I asked if he treats his patients in pain with opioid analgesics. He said often times he does & mentioned that he uses OxyContin in some of the patients. Reviewed Butrans with him & discussed appropriate patient type/range. Went over titration, dosing, & supplemental analgesia. Gave him initiation/titration guide & he spent time looking at the slide-out tool. Discussed Butrans as the only long-acting opioid in the CIII class. Also reminded him that Butrans has abuse/addiction potential as it works as a partial agonist at the mu opioid receptor. I asked Dr Eicher if he could see himself using Butrans for appropriate patients & he said he will.
PPLPMDL0020000001	Parma	OH	44129	9/5/2012	Dr Lin said she has not yet prescribed Butrans. She asked me to review it with her. Reviewed key points including dosing, titration, appropriate patient type/range, & supplemental analgesia usage if necessary. She said a lot of her patients are in more severe pain than the Butrans range. Discussed OxyContin as an option for some of those appropriate patients. She said she does use OxyContin for many of those patients. She asked about Butrans insurance coverage. I showed formulary grid & asked that she think of her commercially insured patients. She said all her patients are old. I told her I understand that many of her patients may have Medicare, but asked if she does have some patients who are still working or have insurance through their spouses work. She said yes. She said she was actually thinking of a specific patient who is taking oxycodone immediate release for his pain. She also said he has commercial insurance. Discussed dosing & titration for this patient & gave her patient information booklets & savings cards. She said she is going to to this patient. She gave her nurse one booklet & one savings card & asked her to remind her to offer Butrans to this patient when he comes in next visit. Positioned Butrans for those appropriate patients. Discussed OxyContin broad formulary coverage & savings cards for eligible
PPLPMDL0020000001	Akron	OH	44313	9/5/2012	I asked dr what criteria lead him to use OxyContin? Dr said when he knows a patient could benefit from an extended release product. Doctor also said that he likes OxyContin because it works and it is covered. I asked dr if he had used Butrans yet and he said no but did look over the product data. I asked dr if he will use it and he asked about coverage. I asked dr if he feels comfortable enough with the product clinically. Dr said yes but he has not used it... I gave quick review of the managed care coverage and focused on Caresource, BWC, Medco/ESI. Dr said he will look to use it and I told him it is suited for patients that need a dose adjustment on and IR opioid.
PPLPMDL0020000001	Maple Heights	OH	44137	9/5/2012	Quick call- Caught Dr Gene at the window. Passed back updated Butrans formulary grid, pointing out favorable coverage on commercial plans & reminding him that these patients can also use the savings card he has for Butrans, allowing them to pay only \$15-20 out-of-pocket. He said this was great, thanked me, & walked away.
PPLPMDL0020000001	Maple Heights	OH	44137	9/5/2012	Spoke with Jim, pharmacist, who said he does have one person getting Butrans. Discussed formulary coverage & savings program. He said he doesn't remember what insurance this patient has. Reviewed eligibility requirements for card utilization & discussed OxyContin savings cards. He said most patients have Medicare or Medicaid there, so they could not use the cards.
PPLPMDL0020000001	Maple Heights	OH	44137	9/5/2012	Spoke with floater pharmacist & technician. They said Butrans is not stocked there. The technician said they have seen some prescriptions for it, but it has not been covered by the patients' insurance. Discussed Medco/Express Scripts tier 2 status. The technician said they see a lot of Medicaid & Medicare insurances there. Discussed savings for non-government insurance patients.
PPLPMDL0020000001	Copley	OH	44321	9/5/2012	I told dr to use Butrans for his patients with low back pain. I showed him the inclusion criteria from the opioid experienced trial. From the FPI, I showed him that both studies were conducted with patients with low back pain. Dr said he would look for patients.
PPLPMDL0020000001	Uniontown	OH	44685	9/5/2012	Introductions to staff and products. I spoke to the ma about Butrans and OxyContin and she said that the doctor does not deal with "those type" of products. I asked why and she could not give me an answer. I introduced Butrans and discussed all key selling messages. Left initiation and titration guide, FPI and managed care grid. I was told I would be contacted for a possible lunch.
PPLPMDL0020000001	Akron	OH	44313	9/5/2012	I asked Valarie if the pharmacy has filled Butrans recently. Valarie told me that they have been seeing a lot of prescriptions from many of the pain specialists in the area and the 10mcg has been the most prescribed dose. Valarie admitted not knowing that much about Butrans. I gave her an overview and provided all key selling messages. I asked about OxyContin dispensing and she told me that they used to fill a large amount of 20mg but are now seeing Opana because they have the original formulation on the shelf and some doses are not reformulated yet. Discussed savings cards for both products.
PPLPMDL0020000001	Bedford	OH	44146	9/5/2012	Dr Moufawad said he recently had a patient who he tried to give Butrans to, but the patient had Caresource & it got rejected. He said the patient had failed Vicodin & Percocet but Caresource wanted failure of ER Morphine before they would allow Butrans. He said he gave the patient ER Morphine & will give him Butrans if the morphine doesn't work for him. I told Dr Moufawad this sounded unusual to me as Caresource's prior authorization is for trial of tramadol, codeine, hydrocodone, or oxycodone. I let him know I would look into this for him. Gave him Butrans formulary grid & showed favorable coverage on commercial insurance formularies, pointing out tier 2 status on Medco & Express Scripts. Also reviewed OxyContin formulary grid with him, showing him broad availability.
PPLPMDL0020000001	Independence	OH	44131	9/5/2012	Dr Jack said he wrote a prescription for Butrans this week. He said I probably won't believe him, but that he really did write a prescription for it. He said he would pull the chart to show me if he had time, but that he couldn't do that now & walked away.
PPLPMDL0020000001	Parma	OH	44134	9/6/2012	Reviewed Butrans appropriate patient type with Lynda, discussing range. She said Dr Scanlon is the one in the practice who has the most patients on opioids. She also said she has been seeing more & more patients on her own. I showed her Butrans patient profiles & asked if she sees patients like any of them. She said occasionally. Discussed Butrans as a possible option for some of those patients. She asked about insurance coverage. Gave her Butrans formulary grid & reviewed Medco/Express Scripts tier 2 status. Also showed her trial/savings cards for eligible patients.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	9/6/2012	discussed appropriate patients for Butrans. Dr said she needed to feel more comfortable with the product before she can use again because of the last patient not doing so well on the product. These previous information was sent in as an AE. Discussed opioid experienced trial inclusion criteria, FPI study description, case studies for Ultram and vicoden. discussed managed care and doctor asked about Medicare. I focused on private prescription insured patients and gave overview of the Butrans Experience kits again which she said she has used but does not have any surveys yet. Dr said she feels more comfortable now in using Butrans again.
PPLPMDL0020000001	Parma	OH	44134	9/6/2012	Dr Scanlon said he has been prescribing Butrans. I asked him with the success he has reported, would he consider Butrans a first-line treatment for appropriate patients. He said he does. He said he has used it in patients who are getting their first opioid & for those who are saying their short-acting opioid isn't controlling their pain adequately. Reviewed OxyContin formulary grid, pointing out broad access.
PPLPMDL0020000001	Akron	OH	44305	9/6/2012	Kris(RN) told me she did not know anything about Butrans and wanted me to give her an overview. I provided her with all the Butrans key selling messages including, dosing, titration, application sites, indication and appropriate patients. Kris said that they use OxyContin on a regular basis due to the pain that cancer brings. Kris said she is not sure if Butrans can control pain like OxyContin. I reviewed patient types with the case studies and asked if she has patients with moderate pain. Kris said they do but it can change and fluctuate often. I told Kris that the indication is for moderate to severe pain. Kris said she will look into it more and relay Butrans to appropriate patients.
PPLPMDL0020000001	Beachwood	OH	44122	9/6/2012	Spoke with Debbie (nurse manager) who said she does think Dr Dmitri prescribed Butrans for someone but he was not sure. Reviewed appropriate patient type & commercial insurance coverage. Went over patient information booklet & discussed using them to counsel patients & answer their questions, potentially cutting down on callbacks about usage. She said this would be helpful & added that they do spend time with patients discussing their medications. Also showed OxyContin conversion guide & showed Percocet to OxyContin page, showing her how patients on Percocet around-the-clock can get the same amount of oxycodone in a q12h dose.
PPLPMDL0020000001	Parma	OH	44134	9/6/2012	Quick call- Positioned Butrans, for appropriate patients who are not well-controlled on up to 80mg oral morphine equivalent & OxyContin for those beyond that. Dr Mike just thanked me & walked out of the room.
PPLPMDL0020000001	Shaker Heights	OH	44122	9/6/2012	Showed Dr Agarwal OxyContin Medicare D formulary grid, pointing out favorable coverage for those plans. Also reviewed Butrans tier 2 coverage on Medco & Express Scripts. He just took the formulary grid & walked away.
PPLPMDL0020000001	Mogadore	OH	44260	9/6/2012	Dr said he has had a few patients who has taken Butrans and has tolerated it and it went through managed care. I asked him does he write refills and he said he writes a couple months. I asked what were the patients taking and he said some sort short acting, that is the only way to go to Butrans and I said actually, there is the opioid naive patient and we reviewed the patient profile and I said if they are in pain all day and are chronic, than you can go to Butrans instead of a short acting. He said he would consider that, it just seems like everyone is on some sort of pain med. I reviewed managed care with Butrans as well as oxycontin with his medicare patients
PPLPMDL0020000001	Parma	OH	44134	9/6/2012	Dr Hernandez said he was on his way out of the office for a meeting. He added that he has been prescribing Butrans for some new patients & continuing others on it with success. I showed him updated Butrans formulary grid & pointed out that BWC is not the only place where he can write Butrans without restrictions. He said he does have some patients with insurance on it. Reviewed OxyContin broad formulary coverage.
PPLPMDL0020000001	Mogadore	OH	44260	9/6/2012	Dr said she actually started a patient on Butrans since she saw me last and she has not seen the patient since. She said she is not sure if they filled it or if they were just looking to stay on pills. I said what mad e you thing of Butrans and she said the patient was taking their medication ATC and she thought this would be a better option. I asked her if she kept the patient on the short acting during initiation and for supplemental and she said yes. She said she only wrote one month first and they were to follow up and never came back in. I said it sounds like you had the ideal patient and she said she did and will continue to look for patients like this one. She thinks it is a good medication. Reviewed managed care in Butrans as well as Oxycontin in her patients who are taking higher doses of Vicodin.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	9/6/2012	I told Dr Dilauro to use Butrans for those patients she examines who are on Ultram or vicoden and have low back problems or osteoporosis. I showed her the two case studies again and asked her if it made sense. She said it did but has not used. I asked her why and she didn't have a good reason other than not remembering. I handed her a conversion slide scale and told her to put it in her primary exam room.
PPLPMDL0020000001	Brooklyn	OH	44144	9/6/2012	Spoke with technician Rhonda who confirmed that they are now stocking Butrans & added that they have a few customers on it. She said she was not sure who had written the prescriptions, though, & suggested I come back another time because they have a new, recently graduated pharmacist in today & she was running really far behind. Gave Rhonda patient information booklets for Butrans & showed her application instructions to help answer potential questions from customers. Also asked which strengths OxyContin they stock. She said she wasn't sure off hand & said a pharmacist would have to open the safe to know for sure.
PPLPMDL0020000001	Mogadore	OH	44260	9/6/2012	Dr said he has started a couple of patients on Butrans and I said tell me about the patients who he started, what were they taking and he said some are nsoids but mostly patients taking short acting ATC. HE said he has had success with it and he said and then you have patients who don't want a patch. He said it is something he definitely considers on more patients now. HE then apologized but was very far behind from morning and had to go finish his am charts. I reviewed managed care and said in your patients who are on higher doses of Vicodin or on Percocet, he has Oxycontin as an option
PPLPMDL0020000001	Cleveland	OH	44130	9/7/2012	Dr Kansal asked if I know how many OxyContin prescriptions he writes every month & said I should talk to Dorothy to get the number. I reminded him that he has been telling me for awhile now that he has fewer & fewer patients who he is treating for pain. He said he does have fewer now than before but he keeps the "good" patients. He said he hasn't given out any of the Butrans savings cards. I asked why not. He said he has been out of town & is getting ready to go out of town again. Positioned Butrans for appropriate patients who ask for an increase in their short-acting opioid medication if they are on less than 40mg hydrocodone or oxycodone per day & OxyContin for those on more than that amount.
PPLPMDL0020000001	Brooklyn	OH	44144	9/7/2012	Dr Miguel said he was out of town for over a week, so he has not prescribed Butrans yet, but added that he has Butrans information in his office to help remind him. Reviewed appropriate patient type/range & showed patient profiles. I asked how frequently he sees patients on Vicodin, taking it daily. He said quite a bit. I asked if the patient has commercial insurance, if there is any reason he would not try Butrans for some of those appropriate patients, especially if they are not well-controlled on the Vicodin. He said he would prescribe Butrans. Let him know I would follow-up to hear about how it was working. OxyContin 7 tablet strength for
PPLPMDL0020000001	Akron	OH	44333	9/7/2012	I told dr that I needed to discuss Butrans appropriate patients and to review the opioid experienced trial. I review the Butrans case studies with Emma and William and asked dr if he sees patients like those in his practice? Dr. said he did and most of his patients are like those I discussed who he initiates on Butrans. Provided review of opioid experienced trial highlighting the study design, inclusion/exclusion criteria, use of supplemental analgesia, and results with higher proportion of patients on 20mcg vs 5mcg experiencing at least a 30% improvement in pain reduction. Dr said he was glad I reviewed it with him and that he would like a copy of it to read in
PPLPMDL0020000001	Akron	OH	44312	9/7/2012	I asked Dr Taylor if he thinks Butrans is a product he will use? Dr said maybe but he needs to find the right patient on a short acting opioid who needs additional analgesia. Handed dr the initiation and titration guide and asked him to identify patients with low back pain or Osteoarthritis. <font color=blue>-<b>CHUDAKOB's query on 09/25/2012</b>-</font>What do you think he is telling you with his response of "the right patient who needs additional analgesia" For what patient type does he perceive Butrans to be dosed?<font color=green>-<b>REICHCL's response on 09/27/2012</b>-</font>Im sure he was telling me what I wanted to hear so he could get back to work... He tried to get Butrans for a Medicare patient a few months ago and it was too expensive. I have provided him with appropriate patient types and managed care info but its hard to see him often enough to drive the point home. I continue to rely on Nadia(his ma) to relay the appropriate info.<font color=blue>-<b>CHUDAKOB added notes on 09/28/2012</b>-</font>Okay. Keep working with her. Could be the key to your success in the
PPLPMDL0020000001	Chagrin Falls	OH	44023	9/7/2012	Spoke with Sarah & reviewed Butrans appropriate patient type. Discussed dosing & titration, & supplemental analgesia usage if necessary. She said she thinks a couple of their customers are on Butrans. She did not know who wrote any of the prescriptions. Discussed savings cards for Butrans & OxyContin. She did not need additional cards at this time.

PPLPMDL0020000001	Chagrin Falls	OH	44022	9/7/2012	Quick call- Dr Hudson said she has one patient on Butrans. She said he started on 10mcg & was then titrated to 20mcg. Updated her on Medco/Express Scripts coverage & also gave her OxyContin formulary grid, pointing out broad coverage. She agreed to continue to identify Butrans patients & continue appropriate patients on OxyContin.
PPLPMDL0020000001	Brooklyn	OH	44144	9/7/2012	Quick call- Handed Dr Dettwiler OxyContin formulary grid & pointed out broad coverage. Also showed him savings cards in his sample closet. He just thanked me & walked away.
PPLPMDL0020000001	Shaker Heights	OH	44122	9/7/2012	Spoke with Tanisha (technician) who said no pharmacists were available. Reviewed Butrans & OxyContin savings cards. She checked their stock & said they did not need any cards. Reviewed eligibility requirements & asked if they give out cards to eligible customers. She said if they have them they do give them to customers.
PPLPMDL0020000001	Chagrin Falls	OH	44022	9/7/2012	I showed Dr Rood Butrans patient profiles & asked if he sees patients like these. He said he really tries to avoid writing opioid medications whenever possible. I asked if patients come in on opioids ever. He said yes. He added that he will either continue them or try to get them off or at a reduced dose if possible, depending on the case. He also said he recently went to a family physician group meeting in Columbus & heard a presentation on opioids. He went on to say that not only did they talk about House Bill 93, but also that there will soon be even more restrictions on opioid prescribing which include mandates (rather than suggestions) on how physicians practice. I asked if this means he is now & will be referring more to pain management. He said he refers less because it is so difficult for patients to get in to pain management & often when they do, the specialists don't want to write the narcotics either. He said he tries to avoid bouncing the patient around. He said if he can manage the patient himself, he will. He said this is where Butrans can fit in for him. He said he does not like to start patients with chronically painful conditions on short-acting opioids, so Butrans would be a good option. OxyContin 7 tablet strengths for individualization of dosing message.
PPLPMDL0020000001	Uniontown	OH	44685	9/7/2012	I asked Dr Stetler if he has had any Ultram or vicoden patients recently who may be Butrans candidates? Dr said she has not had anyone in recently who he thought might be a candidate. Dr asked about any new formulary coverage. Reviewed managed care matrix with Dr Stetler and Kelly(ma). Gave formulary information and Butrans patient information guides.
PPLPMDL0020000001	Akron	OH	44310	9/7/2012	I spoke to Char and the doctor about identifying patients for Butrans. I gave a quick overview of the opioid experienced trial and focused on the inclusion criteria and patients studied with chronic low back pain. Dr said he appreciates the study and will try to use more Butrans for low back pain on an IR opioid. Provided Char with updated formulary grid.
PPLPMDL0020000001	Akron	OH	44319	9/7/2012	I asked the pharmacist if they have filled Butrans recently? Pharmacist said they have one patient on Butrans 5mcg and they have the 5 and 10mcg in stock. I asked who the physician was for the 5mcg and he told me he didn't remember. Told him that they patient can be titrated every 3 days and left initiation and titration guide
PPLPMDL0020000001	Parma	OH	44129	9/7/2012	Dr Roheny asked why he has not prescribed Butrans yet. I told him that was exactly the question I was going to ask him. I asked what he thinks the reason is for not prescribing yet. He said he doesn't know. He said he needs to find a patient who has insurance. He also told me he remembers that Medco & Express Scripts have Butrans at tier 2 now. I told him I was impressed at his memory of that. I told him he also needs the patient to have moderate to severe chronic pain & that they would especially be a candidate if they are not well-controlled on their current medication. I asked him why increase someone's short-acting opioid if it is not working for them at their prescribed dose? He said he doesn't know. Positioned Butrans for that patient type. Also reminded him that OxyContin's coverage includes many Medicare plans. He said he has no problem prescribing OxyContin for that patient type.
PPLPMDL0020000001	Parma	OH	44134	9/10/2012	Dr Mandat said he has started several patients on Butrans in the last 2 weeks. I asked him what it was about each of them that made him choose Butrans for them. He said usually it was patients who were not adequately controlled on tramadol a few times per day. He said so far he has heard no negative feedback from them & added that actually, some have found relief in Butrans. He said because he gets good results, he will continue to prescribe for this type of patient. Showed appropriate range of patients, letting him know patients on other immediate-release opioids could be candidates for Butrans as well. He said he will keep that in mind. Gave him OTC Spoke to Michele and Jen(ma) about Butrans. I asked Jen if she knows about Butrans? Jen said she did but not very much. Provided her all the key selling messages and discussed appropriate patient types. Jen asked about titration and adverse events. Provided her an initiation and titration guide and showed her the adverse events from main visad. Reviewed new managed care matrix.
PPLPMDL0020000001	Akron	OH	44333	9/10/2012	Spoke with pharmacist & verified Butrans stocking. She said they might have one or two people on Butrans, some of whom get it regularly. I asked if she knows any of the prescribers. She said she couldn't remember & didn't have time to look that up. Discussed appropriate patient type & reviewed savings information sheet. Also discussed OxyContin q12h dosing.
PPLPMDL0020000001	Parma	OH	44129	9/10/2012	Spoke with Shelia(ma) and Gretchen about patient in for follow up appointments on Butrans. Patients are doing well on Butrans and cost does not seem to be a factor for Shelia's perspective. Shelia said that one of the patients is doing remarkably well and the pain has been reduced. I was told that the patient is now on the 10mcg patch.
PPLPMDL0020000001	akron	OH	44333	9/10/2012	Spoke with Shelia(ma) and Gretchen about patient in for follow up appointments on Butrans. Patients are doing well on Butrans and cost does not seem to be a factor for Shelia's perspective. Shelia said that one of the patients is doing remarkably well and the pain has been reduced. I was told that the patient is now on the 10mcg patch.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	9/10/2012	I asked Amy if she had stocked any other doses than the 5mcg since early August? Amy said they still only have 5mcg. Amy said she has not filled any Butrans in over a month. Provided new Managed Care matrix highlighting Medco/ESI/Medical Mutual.
PPLPMDL0020000001	Akron	OH	44305	9/10/2012	I asked Brian if he has filled any Butrans recently. Brian said he did about a week ago for Dr Hegde in Cuyahoga Falls. I asked about the dose and he said it was the 10mcg new start however it was a Medicare patient and he said the cost was about \$170 a month. Brian said he forgot that Medicare patients are ineligible for savings cards. He said the patient paid but said he could not afford to stay on it. I reviewed the managed care coverage and copay card eligibility.
PPLPMDL0020000001	Woodmere	OH	44122	9/10/2012	Spoke with technician who said the pharmacist would not come talk to me. Showed information on Butrans savings program & asked if they usually give cards out to eligible customers. She said they do sometimes. She said not know if they had Butrans on their shelves. Also reviewed OxyContin savings cards & eligibility requirements for usage.
PPLPMDL0020000001	Akron	OH	44305	9/10/2012	I showed dr the Emma case study profile and gave review of details? I asked dr if he has patients on Ultram who are suffering from a low back condition? Dr said he sees many patients with low back conditions. Dr said they are on Ultram to percocet with varying levels of pain. I showed dr the other case studies and he should use Butrans for any of those patients who need a dose adjustment.
PPLPMDL0020000001	Akron	OH	44333	9/10/2012	Spoke to Jen(ma) about OxyContin and Butrans. Asked Jen if she has seen any new OxyContin or Butrans prescriptions recently? Jen said she has not seen any new Butrans but he has many patients on OxyContin and he has prescribed it in the last couple of weeks. I asked if she knew the doses or what condition he was treating? Jen said she didn't know and can't remember. Dr came to window and asked him to prescribe OxyContin for his patients on higher dose vicoden and percocet. I asked him if he would use Butrans for his patients on low dose vicoden for those patients needing a dose adjustment. Dr agreed to and took initiation and titration guide and OxyContin piece to individualize the dose.
PPLPMDL0020000001	Parma	OH	44129	9/10/2012	Dr Gigliotti said one of the patients who he had on Butrans said it was not working to control her pain. I asked if he took her off or titrated her. He said she was on the 20mcg so he took her off. I asked if she had been on Butrans for awhile & it stopped working or if she was new to the medication. He said she had been on it for about a month. I pointed out that perhaps she was a potential OxyContin candidate. He said she is going to Cleveland Clinic's pain management program now.
PPLPMDL0020000001	Beachwood	OH	44122	9/10/2012	Showed Dr Myton-Craig range of Butrans patients, pointing out that those on less than 40mg equivalent hydrocodone or oxycodone per day may be candidates for Butrans once weekly. I reminded her of her previous interest in Butrans, especially for one patient who takes short-acting opioids but is not well-controlled. I asked Dr Myton-Craig if that patient is in that range. She said he is. She asked if I was sure patients with BWC could get Butrans. I told her state BWC has been paying for Butrans without restrictions so far. Also gave her updated formulary grid & pointed out managed care plans where Butrans has coverage without restrictions. She said she is going to offer Butrans to this particular patient who she has been thinking of & added that she is going to put the information in his chart now so she doesn't forget. She said he has been in since we started talking about him months ago, but has had serious personal matters that she has needed to address & adjusting his pain medication has not been a priority. Pointed out savings cards for Butrans & OxyContin in the sample closet.
PPLPMDL0020000001	Fairlawn	OH	44333	9/10/2012	Susan said that the pharmacy continues to see Butrans patients in for refills from Shah, Lababidi and Fouad. Most patients are on 10mcg patch and some on 20mcg. Susan said the pharmacy does not look too much about who patients are employed by but she did say that they do have Goodyear, Firestone, Akron Schools who all have Medco?
PPLPMDL0020000001	Parma	OH	44129	9/11/2012	Quick call- Positioned OxyContin, with 7 tablet strengths for individualization of dosing for appropriate patients who are not well-controlled on more than 40mg oxycodone per day & Butrans for those taking less than 40mg.
PPLPMDL0020000001	Hudson	OH	44236	9/11/2012	Quick call- Caught Dr Seiple up front. Positioned Butrans for appropriate patients who are not well-controlled on 3-4 tramadol or Vicodin per day, reminding him to focus on patients with commercial insurance. He thanked me & walked away. Spoke with MA Melissa & discussed managed care, reviewing formulary grids for Butrans & OxyContin.
PPLPMDL0020000001	TWINSBURG	OH	44087	9/11/2012	Spoke with Diana & reviewed Butrans appropriate patient type, dosing, & titration. Also gave her information sheet on savings program & discussed eligibility requirements. She said she does not think they stock it. Also discussed OxyContin savings cards & 7 tablet strengths. She said she would share the information with all the pharmacists.
PPLPMDL0020000001	Cleveland	OH	44130	9/11/2012	I asked Dr Diab how he determines whether to titrate a patient's short-acting opioid or try a long-acting option. He said it depends on the patient. I asked what factors it depends on. He said "everything". Reviewed OxyContin 7 tablet strengths for individualization of dosing. I also asked him if he thinks it might be time to give Butrans a try for a few appropriate patients. He said he will do that "in time". He then walked away.
PPLPMDL0020000001	Middleburg Heights	OH	44130	9/11/2012	Introduced myself & Purdue's products to Dr Ignat. Delivered Butrans core messages. Dr Ignat asked if Butrans was in the same class as fentanyl. Reviewed appropriate patient type/range & let him know Butrans is a CII opioid with abuse/addiction potential. Dr Ignat pointed to the range of patients in the table on pg 18 of the core visual aid. He said he has many patients on this range of pain medications. I told him those are potential Butrans patients. Showed demo patch & discussed adhesive matrix, application, & rotation. He asked about side effects. I showed him rates. He said they are typical opioid side-effects that do not surprise him. He asked what insurance plans cover Butrans. Showed him formulary grid & reviewed it with him. Also discussed savings program. He asked me where he could find the savings cards in the office. I showed him where they are & walked him through how eligible patients use each one. Reviewed dosing, titration, & steady state with him. I asked Dr Ignat if he would identify a few appropriate Butrans patients in his practice to get some clinical experience with it & Spoke with pharmacist, Lou, who said he does have some people on Butrans & that OxyContin is steady. He said he has gotten no feedback or questions regarding Butrans. I asked if he has seen any changes at all in pain medication prescribing since the House bill. He said not really. I asked why, in his opinion, it is so common for physicians to prescribe short-acting opioids around-the-clock for patients, yet are sometimes reluctant to switch them to long-acting options. He said he does not know because it makes sense to use long-acting for chronic pain. I asked if he would make a recommendation to physicians, when appropriate, to try a long-acting option like Butrans or OxyContin. He agreed. Reviewed appropriate patient types.
PPLPMDL0020000001	Twinsburg	OH	44087	9/11/2012	Myra said she has been writing more Butrans lately. She said she couldn't stop & talk today but she would keep writing more & more. Spoke with Dawn who verified that both Elaine & Myra have been writing more Butrans. Dawn said she has noticed they are especially using it more in patients with Medical Mutual. Discussed other plans where she could have success getting Butrans approved, including BWC & for patients with Express Scripts. Dawn said they would continue to use Butrans.
PPLPMDL0020000001	Cleveland	OH	44130	9/11/2012	Dr Fedorko said he just hasn't seen any patients for Butrans lately, but added that he promises he will prescribe it when he does. I asked if he remembers the formulary coverage that we have been talking about. He asked me to remind him. Discussed BWC & commercial insurance. Dr Fedorko said he is glad I am there all the time to remind him because he forgets easily. I promised never to let him forget about Butrans or OxyContin.
PPLPMDL0020000001	Cleveland	OH	44130	9/11/2012	Introduced myself & Purdue's products to Dr Jethva. Delivered Butrans core messages & showed him appropriate range of patients. I asked if he sees patients like this. He said sometimes. Discussed Butrans as a CII opioid with abuse/addiction potential. Reviewed once weekly transdermal dosing & supplemental analgesia.
PPLPMDL0020000001	Parma	OH	44129	9/12/2012	Dr Chagin asked how Butrans is doing. I told him various physicians of many specialties have found a place for Butrans in some of their appropriate patients. I asked if he is still referring patients to pain management. He said he has referred all of those who he wanted to get rid of. He added that some patients just were on too high a dose of opioids for him to feel comfortable maintaining them. He said he is comfortable with the patients he has left. I reminded him that he has told me that he would try Butrans for appropriate patients who were not well-controlled on NSAID's or COX-2's. I asked if he still felt that would be a good place for it. He said yes. He asked me to go through dosing. Showed him range of patients & how to start different patients based on their current therapy. He said sometimes patients don't want to try Butrans because they don't think it will work. I asked why allow them to make that decision since he is the doctor. He said that was a good point. Discussed importance of appropriate patient selection & reviewed ability to take supplemental analgesia if necessary. Also went over formulary grid & savings program. Positioned OxyContin for appropriate patients who are taking Percocet around-the-clock.
PPLPMDL0020000001	Parma	OH	44129	9/12/2012	Positioned Butrans for appropriate patients who are not well-controlled on less than 80mg equivalent oral morphine per day & OxyContin for those beyond that range, showing her the table in the core visual aid pg 17. Spoke with MA Abbey, reviewing formulary grids & savings programs.

PPLPMDL0020000001	Barberton	OH	44203	9/12/2012	I asked dr Patel is he believes Butrans is a product he could use on a regular basis? I asked him how often he sees patients with low back conditions? dr said he sees them. I showed him the inclusion criteria and emphasized low back conditions as appropriate patients who may need dose adjustments on IR opioids. I told dr to use the patient experience kits.
	Parma	OH	44129	9/12/2012	Dr Saul said he has not yet prescribed Butrans successfully. I asked him to elaborate. He said he tried to write it for a couple of patients, but their managed care plans would not allow it to be obtained. Handed him formulary grid & went over commercial coverage with savings program. He said the problem, then, was probably that his patients had Medicare because most of his patients who he treats for pain are older. I asked what it was clinically that caused him to choose Butrans for the patients. He said basically, he was trying it before going to transdermal fentanyl. He said he likes transdermal technologies, especially for patients with chronic conditions. He added that he used to prescribe fentanyl because it was the only option, but now he could use Butrans instead. Reviewed appropriate patient type/range & discussed OxyContin as an option for appropriate patients beyond the Butrans range. I asked what about patients who are not well-controlled on NSAID's or COX-2's- would he use Butrans there. He said possibly. He said he would be most likely to use Butrans after tramadol, instead of Vicodin. I agreed that this would be a good place to try Butrans & showed patient profile of "Emma" to support the message. I asked Dr Saul to try Butrans again, this time focusing more on commercially insured patients, like those 40-60, still working, with chronically painful conditions. He agreed.
PPLPMDL0020000001	Macedonia	OH	44056	9/12/2012	Introduced myself & Purdue's products to Dr Jeffers, who is new to the practice, at the window. Delivered Butrans core messages & handed her formulary grid. She asked for additional literature for Butrans as she did not have time today to learn about it. She suggested I schedule a lunch to sit down & discuss details.
PPLPMDL0020000001	Bedford	OH	44146	9/12/2012	Quick call- Dr Moufawad showed me that he still has the Butrans formulary grid that I gave him last week out. I asked if he has had any issues since we talked. He said not that he can think of. He added that he has been using more & more Butrans & thinks he has been prescribing more OxyContin as well. He said he was running behind today, & suggested I stop back next week. I agreed.
PPLPMDL0020000001	Macedonia	OH	44056	9/12/2012	Spoke with technician who said Eve was not able to stop to talk to me today. Gave him information sheet on Butrans savings program & explained eligibility requirements for card usage. Also discussed OxyContin savings. He said they are pretty good about giving out savings cards when they have them. He agreed to leave my information for Eve & Nancy.
PPLPMDL0020000001	Akron	OH	44320	9/12/2012	I showed dr the two studies for Butrans and told him about each one of them involving patients with low back pain. I asked dr to use Butrans for patients on an IR opioid with low back pain and a dose adjustment is necessary. Dr said it makes sense and asked about insurance coverage. I explained the CareSource PA, Medco, ESI, and BWC. Dr said he will prescribe again.
PPLPMDL0020000001	Barberton	OH	44203	9/12/2012	I asked dr what he does to treat patient with low back pain. Dr Kim said it depends on the condition and severity of the pain. I asked dr if he uses short acting opioids like vicodin. Dr said he does not want to deal with patients in chronic pain. I asked him if he has treated patients in pain for 3 months or longer? Dr said maybe but he does not want to treat them longer and will not prescribe a scheduled medicine. I told dr to use Butrans for patients in pain for more than 3+ months.
PPLPMDL0020000001	Munroe Falls	OH	44262	9/12/2012	I asked dr if she had identified any Butrans patients yet? Dr said she had a patient in yesterday who has spinal stenosis and taking vicodin. She forgot to think about Butrans because the patient said he was still in pain. I reviewed the opioid experienced trial focusing on use of supplemental analgesia, patients studied had low back pain, inclusion criteria and results. Dr said she will call the patient to make another visit to re-evaluate.
PPLPMDL0020000001	Parma	OH	44129	9/12/2012	Spoke with Heath who said he has a few customers on Butrans. Discussed titration ability after 3 days & ability for patients to use supplemental analgesia if necessary. He said he thinks the customers who are on it have been on the same dose the whole time, but maybe one has increased. Reviewed savings programs for Butrans & OxyContin. He said he didn't need any cards.
PPLPMDL0020000001	Barberton	OH	44203	9/12/2012	I asked the pharmacist what dose(s) of OxyContin do they fill most often? I was told that they fill a fair amount of 20mg and 40mg but recently have been dispensing more 10mg. I asked where the prescriptions are coming from and learned that dr Lababidi has patients that fill at this pharmacy. I asked about age of patients and was told that they see mostly middle age men and women but a pretty wide age range refills often.
PPLPMDL0020000001	Barberton	OH	44203	9/12/2012	I asked Bobby if they have dispensed Butrans since my last visit? Bobby said they had not and gave me all the stocking information. I provided Bobby with Butrans selling points. He had no more time to talk due to a line of patients.
PPLPMDL0020000001	Parma	OH	44134	9/12/2012	Dr Hernandez said the patient who just left just got started on Butrans. He added that actually, he has seen 3 patients already today who are on it. He said they are all very happy, which makes him happy. He said he would really like to be a speaker for Butrans so he can help other physicians become more comfortable with Butrans & buprenorphine. He went on to say that he thinks that if someone understands buprenorphine, they would be more likely to prescribe it because it is such an interesting molecule. I asked if he has any recommendations for how to explain it to my primary care physicians. He said he isn't sure. I asked if he only offers Butrans to patients who are not doing well on their current medication or if he also proactively offers it to others. He said he does both, but added that usually if they are not doing well on their current medication they are more likely to try Butrans. He said others "aren't ready" for Butrans. Discussed managed care for Butrans & OxyContin. He said he is still writing OxyContin for some patients.
PPLPMDL0020000001	Independence	OH	44131	9/13/2012	Quick call- Caught Dr Reddy up front. Passed back Butrans patient profiles & reviewed dosing (once weekly, transdermal delivery). He said "no thanks" & walked away. Spoke with Kathi & reviewed Butrans appropriate patient type.
PPLPMDL0020000001	Independence	OH	44131	9/13/2012	Spoke with pharmacist Dave & pharmacy intern. Dave said he now has one customer on Butrans consistently. Discussed savings program & offered cards, but he said at this point, he really does not need any. He said the customer who he has on it has BWC, so it is covered anyway. Discussed OxyContin savings program & importance of appropriate patient selection. Also reviewed Butrans appropriate patient type with intern as he did not understand the positioning for Butrans.
PPLPMDL0020000001	Parma	OH	44129	9/13/2012	Quick call- Dr Khoobal said he had to go to a meeting with another doctor so he did not have time to talk today. Positioned Butrans for appropriate patients who are not well-controlled on hydrocodone around-the-clock. Dr Khoobal said he has been looking for patients to put on Butrans.
PPLPMDL0020000001	Independence	OH	44131	9/13/2012	Quick call- Dr Sundaram said he was running very far behind today & asked me to be brief. Positioned Butrans for appropriate patients who are not well-controlled on tramadol or Vicodin 3-5 times per day & OxyContin for those beyond that range. Reminded him that commercially insured patients will have the most access to Butrans.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	9/13/2012	Spoke to dr in depth about OxyContin and Butrans. Dr said he is the ONLY pain management dr at Akron City Hospital and prescribes OxyContin on a fairly regular basis. I asked him at what point he prescribes it? Dr said mostly for patients in severe low back or hip pain 2-3 days following surgery or converting patients from percocet to what Dr. said is the BID OxyContin option. I asked dr if he prescribes it BID or Q12h. Dr said BID and asked why? I showed him the dosing schedule page in the main visaid and told him that OxyContin is recommended to be dosed Q12h. 8am and 8pm. Dr said he didnt know that and was glad to learn. Presented Butrans key selling messages focusing on appropriate patients reviewed the trials and inclusion criteria. I asked dr to gain some clinical experience and he agreed to prescribe.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	9/13/2012	I asked dr if he knew about Butrans. Dr said he had read up on it but has not used it. I provided dr with all the key selling messages and reviewed managed care coverage. Dr did not have any questions so I gave quick review of appropriate patient type selection using the studies and inclusion criteria. Dr said it sounds like a product he would use. I asked him to use it to gain some clinical experience and allow the product to speak for itself. Dr said he uses a fair amount of OxyContin. I asked him why he likes it. Dr said because it works and is well covered by insurances. nothing else learned.
PPLPMDL0020000001	Independence	OH	44131	9/13/2012	Quick call- Saw Dr Trickett at the window. Passed back OxyContin formulary grid for Medicare D, pointing out favorable coverage. Also gave her & Steve National Pain Awareness Month brochures for their patient areas. They were very appreciative of this information for their patients.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	9/13/2012	Spoke to Jenna(pharmacist) about OxyContin and Butrans. Jenna said they have many patients on OxyContin and have seen very little with Butrans. I provided new managed care information for Butrans and reviewed the one for OxyContin. I discussed copay cards for both products.
PPLPMDL0020000001	Independence	OH	44131	9/13/2012	Quick call- Passed back OxyContin Medicare coverage information sheet & pointed out CVS Caremark & AARP coverage. Dr Pai said he has been writing more OxyContin lately & he has not had the pharmacy issues he was having at one time. He thanked me for the information & walked away.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	9/13/2012	I asked dr Pitt and Liz what the number one plan the patient have in their office. They both said Medical Mutual by a landslide but they have lots of self pay and Medicaid. I showed them the OxyContin and Butrans managed care flashcards and discussed the 2nd tier \$20-30 copay for OxyContin. Dr said OxyContin is his number one long acting opioid.
PPLPMDL0020000001	Parma	OH	44129	9/13/2012	Quick call- Caught Dr Tolentino briefly at the window. Passed back OxyContin formulary grid, pointing out favorable coverage on Medicare plans since she has told me that she sees a lot of Medicare. Dr Tolentino said she likes OxyContin, thanked me, & walked away. Went over coverage with Kathy.
PPLPMDL0020000001	Akron	OH	44310	9/13/2012	Gave quick review of Butrans and told him that Im not sure I gave him enough information yet on the patient types appropriate for Butrans. I reviewed the inclusion criteria for Butrans and told him that both trials included patients with low back pain. I asked if he could identify patients with low back conditions like the ones I discussed who may be appropriate for Butrans. Dr said he might have some and will consider it. Dr asked how well it covered? I told dr to focus on patients that are under medicare age. Reviewed formaulary grid.
PPLPMDL0020000001	Akron	OH	44310	9/13/2012	Spoke to Kathy(RN)about OxyContin and Butrans. Discussed Butrans in depth and Kathy said that Dr Brower does not like patches. I asked why and she said she was not sure but had problems in the past with other products. Kathy did say he uses a fair amount of OxyContin and wanted copay cards and conversion and titration guide. Kathy said she would give all Butrans and OxyContin literature to him.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	9/13/2012	I asked dr at what point he decides to go with a different option in treating pain. Dr said when he knows the IR opioid isnt working he will typically refer to pain management especially if they are taking a lot of IR medicine. I asked if he thinks it makes sense to initiate Butrans prior to referral so he can refer the patient on an extended release medicine. Dr said that could be done and make sense in some cases but dr said he has inquired to his patients about Butrans and most are opposed to a patch. I asked why and he said various reasons. I asked dr to gain some clinical experience to allow Butrans to speak for itself.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	9/13/2012	I asked dr if he feels he has the patient population for a product like Butrans? Dr said he may have a patient or two on a short acting opioid who may be able to use Butrans. I asked dr why he hasn't used it yet for these patients? Dr said he didnt know but may look at them for it. I asked dr if he has any patients with low back problems. Dr said he has a few and will look into Butrans.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	9/13/2012	I asked dr what he likes about OxyContin? Dr said he likes the 7 doses, it works well for the right patient, and it has good insurance coverage. Dr said he uses it for patients who can benefit from the Q12h dosing and likes the reformulated product. Dr said he wants to use more Butrans but is having a hard time because many of his patients are Medicare and can't afford it. I asked dr what % of his patients are Medicare. He said at least 50%. I asked dr to take the patch of least resistance and look at the patients with private prescription insurance. Reviewed all managed care plans and copay cards. Dr said he still likes it because of its good Adverse Event profile compared to the IR opioids. I discussed proper patient selection by using studies and told him to use in patient with low back conditions. Dr agreed to try to use more and said that the transdermal system really makes sense to him and he councls his patients on it often.
PPLPMDL0020000001	Cleveland	OH	44130	9/14/2012	Quick call- Passed back Butrans formulary grid & positioned Butrans for appropriate patients who she is referring to pain management. She just waved & walked away.
PPLPMDL0020000001	Parma	OH	44129	9/14/2012	Quick call- Dr Rakhit asked what I had for him to sign. Positioned Butrans once weekly patch for appropriate patients not well-controlled on 3-5 Vicodin or tramadol per day. He just walked away & went into a room. Spoke with Ilyna & re-entered managed care message of commercial insurance for Butrans & broad formulary access for OxyContin. Gave her grids for support.
PPLPMDL0020000001	Akron	OH	44333	9/14/2012	I asked dr about his Butrans experience. Dr said when he used it at UH he used it about 50% of the time. I asked why and he said that some people liked it and other didnt like a patch for pain control. I discussed all key selling messages and spent time on appropriate patients with studies, inclusion criteria and initiation and titration guide. Discussed managed Care and dr said he has a large number of BWC patients and is glad to have that update. Dr said he plans to use it more often because the patients he acquired from Dr brown are doing well on Butrans.
PPLPMDL0020000001	Barberton	OH	44203	9/14/2012	I provided Dr with FPI detail information about the percentage of patients studied over 65 and 75yrs. I asked dr to use OxyContin for patients appropriate for Q12h dosing Medicare age with AARP and CCRx. Dr said that she is still having problems with Med D plans and OxyContin. She had a patient last week with a Med D plan(couldnt remember which one) that she had to switch to ER morphine because the plan would not cover OxyContin. I asked dr to stick with AARP and CCRx plans. gave quick review of Butrans and appropriate patients.
PPLPMDL0020000001					

	Independence	OH	44131	9/14/2012	Dr Jack asked me if the script he wrote for Butrans showed up. I asked him why he wrote the prescription. He said he isn't really sure, but probably because it was an older patient & he thought the transdermal option may be good for her. He said also probably because he thought a long-acting option may be better for her particular case. I told him it sounds like he chose an ideal patient clinically, but my only concern would be that if the patient was older, she may not have been able to obtain Butrans if she has Medicare. Dr Jack said no matter what the cost would be, he is certain the patient's son, who is very wealthy, would pay for the prescription. I asked him to try to focus on appropriate patients who are commercially insured or have BWC. He said he did not realize that & added that he will start looking at his BWC patients to see who may be a good candidate.
PPLPMDL0020000001	Cleveland	OH	44130	9/14/2012	Spoke with Laura & reviewed Butrans patient information booklets, showing how they can be used for patient counsel. I also suggested giving them to patients who she thinks would be good candidates for the once weekly transdermal treatment. Also discussed savings programs & eligibility for Butrans & OxyContin cards & offered them, but she said they had enough for now.
PPLPMDL0020000001	Garfield Hts	OH	44125	9/14/2012	Showed Dr Sadowski range of Butrans patients with the chart on pg 17 of the core visual aid, positioning Butrans for this range of patients & OxyContin for those beyond the range. I asked Dr Sadowski how many patients he saw this week who fell within this range & had a chronic condition. He said "some". I asked how many he thinks had commercial insurance. He said he isn't sure. He asked what about Medicaid. Explained Caresource prior authorization requirements but advised that he try to avoid the other Medicaid plans & focus more on where it is covered, such as patients 40-60, working, with a chronically painful condition. He said he will do his best.
PPLPMDL0020000001	Fairlawn	OH	44333	9/14/2012	Pharmacy was packed with patients. Asked Gary if he has seen any Butrans prescriptions and gave a brief description of the product. Gary said he could look but he didn't have time. I provided dosing, titration, and managed care data.
PPLPMDL0020000001	Cleveland	OH	44130	9/14/2012	Spoke with floater pharmacist & reviewed Butrans dosing & titration. Also discussed use of supplemental analgesia if necessary in the form of immediate release opioid or non-opioid medications. Showed patient information booklets & discussed application & rotation. Also discussed savings programs for Butrans & OxyContin.
PPLPMDL0020000001	Akron	OH	44312	9/14/2012	I gave a quick review of Butrans and asked dr if he feels Butrans will fit in his practice? Dr said he thinks it will he just hasn't found the right patient yet. I asked what the right patient is? Dr said he is looking for a patient on Ultram who needs more analgesia. I told dr that that is ideal and to possibly focus on patients with low back conditions. Gave dr initiation and titration guide.
PPLPMDL0020000001	Beachwood	OH	44122	9/14/2012	Dr Barrett said he really likes Butrans & that it has been effective for his patients. He asked about insurance coverage. I reviewed formulary grid with him. He said it looks like tier 3 which seems like that would require extra work on their part. I told him tier 3 is just a slightly higher co-pay & clarified that on commercial insurance plans, prior authorization is not required. I added that with the savings program, patients could expect to pay only \$15-20 for a month's supply after the initial trial offer. He also said he uses a lot of OxyContin. He added that he uses low doses, not the 60 or 80mg. I asked why he only uses low doses. He said he has not found the need for higher doses & finds that most patients can be controlled at lower doses than some physicians realize. Dr Barrett also said today is his last day in Beachwood as he will now be at Southpoint Pain Management. I let him know I would follow up with him there.
PPLPMDL0020000001	Akron	OH	44310	9/14/2012	I provided review of case studies and focused on patients under 65 with low back conditions who are on an IR opioid and need a dose adjustment. Dr said he understands that Medicare may be tough to get approved so he has been looking for younger patients with that problem. Reviewed updated managed care and asked for him to prescribe again.
PPLPMDL0020000001	Akron	OH	44319	9/14/2012	Showed dr the 5mcg placebo patch and asked him if he has patients under 65 who come to see you complaining of a low back condition? Dr said he does have a few. I showed dr the inclusion criteria and asked dr if he was opposed to using patch technology? Dr said he does not but he is concerned about cost. I asked himself if he understands the science behind Butrans. Dr said he does and where he should use it. I told dr to focus on patients under 65 who have private prescription insurance needing a dose adjustment on their short acting product. Dr said he will consider it. Went over cost and copay cards.
PPLPMDL0020000001	Beachwood	OH	44122	9/14/2012	Dr Yokiell said no one is paying for Butrans. I asked what he means. He asked who is covering it. I went over the formulary grid & let him know BWC is paying for it as well. I asked how much of his practice is BWC. He said probably 25%. I told him if he is writing for commercially insured patients & BWC, they should not likely pay more than \$15-20 out of pocket if they are using the savings card. He said he just wrote a script for Butrans yesterday for a patient with commercial insurance & gave them a card. I asked what he thinks the biggest hindrance has been for him in writing more Butrans. He said it is mostly the patient type. He said primary care physicians are sending him patients who are on OxyContin plus Percocet for breakthrough. He said he simply cannot expect to taper that patient down & hope that Butrans works for them at that point. I agreed that this type of patient would probably not be a Butrans candidate. I asked if all the patients who are being referred are on that high a dose of opioids. He said most are. Positioned Butrans for those who are appropriate, not on that high a dose, & with commercial insurance or BWC. Dr Yokiell agreed to try to identify patients like this & use Butrans for them. Discussed OxyContin individualization of dose with 7 tablet strengths.
PPLPMDL0020000001	Beachwood	OH	44122	9/17/2012	Spoke with MA & gave her Butrans Medco/ESI announcement. Reviewed appropriate patient type for Butrans & showed range of patients. Also gave her OxyContin formulary grid & pointed out broad coverage. Offered savings cards for both medications, but she said Dr Eckstein had enough of them for now. Attempted to schedule lunch- they are still booked.
PPLPMDL0020000001	Beachwood	OH	44122	9/17/2012	Spoke with pharmacy intern & introduced Butrans. She said she has not really heard of it & added that she does not think they stock it at this location. Reviewed appropriate patient type/range, CII, dosing, & savings program. She said they did not need cards since they do not have anyone on it at this time. Reviewed OxyContin savings program & eligibility requirements. She said they would take some cards, so I provided her with one package. She said she would give all the information to Shelley when she was available.
PPLPMDL0020000001	Beachwood	OH	44122	9/17/2012	Positioned OxyContin for appropriate patients who take Percocet around-the-clock, especially if they are not getting adequate relief. Also reviewed broad formulary coverage, giving a variety of patients access to OxyContin. Also positioned Butrans for appropriate patients who cannot control NSAID's/COX-2's or those who he is reducing the amount of opioid they are taking if they fall within the appropriate range of doses. Gave updated formulary grid & pointed out favorable commercial coverage. Suggested Butrans for appropriate patients ages 40-60 with insurance through work who fall into the range we discussed. Dr Warren said he will try Butrans.
PPLPMDL0020000001	Akron	OH	44303	9/17/2012	Rod told me that he has a customer that he gave OxyContin copay cards to help with cost and her employer just made the decision to make the patient use ESI mail order. He was upset because he lost business. I told Rod that the decision for mail order was the employers not Purdue. I asked Rod what age range he dispenses OxyContin for? Rod said most are over 40yrs. Rod said he has not dispensed Butrans yet.
PPLPMDL0020000001	Parma	OH	44129	9/17/2012	Quick call- Passed back Butrans sealed study & asked Dr Laluk to review it as it may help him identify Butrans patients in his own practice. He just walked away. Linda said he probably won't read it. I asked her to encourage him to read it if possible. Gave OTC samples & discussed dual MOA for Senokot-S.
PPLPMDL0020000001	Parma	OH	44129	9/17/2012	Spoke with Tiffany & reviewed Butrans patient type. Also reviewed eligibility requirements for savings programs for Butrans & OxyContin. I asked if she is the one who enters the patient's prescription insurance information into the computer. She said she does that a lot. I asked what plans come to mind as being commonly seen. She said Medicare plans & some Medicaid plans. Also Medical Mutual/Medco & Anthem. She said they did not need any savings cards at this time.
PPLPMDL0020000001	Akron	OH	44313	9/17/2012	Showed Jason the OxyContin Managed Care grid and asked if he has patients on Med D plans who he dispenses OxyContin for? Jason said he does have some patients. I focused on AARP and CCRx coverage with average costs. Jason said he has filled it fairly regularly and has plenty of copay cards but there are some patients that they have had to switch to MS Contin or ER Morphine due to OxyContin not being covered.
PPLPMDL0020000001	Akron	OH	44333	9/17/2012	I asked dr at window if she had read up on Butrans 7 day transdermal system for moderate to severe pain? Dr said she has heard of it. I handed her the initiation and titration guide and gave overview of Butrans. Dr said she would review and asked if BWC covers it. I told her yes 100% along with Caresource with a PA, Medco/ESI/Medical Mutual.
PPLPMDL0020000001	Akron	OH	44333	9/17/2012	I asked dr Shah if he had time to read the opioid experienced trial yet. Dr said he has not had the time but its on his desk and he will review it. I told dr to remember he can titrate every three days if necessary. Reviewed managed care with staff for Butrans and AARP and CCRx for OxyContin.
PPLPMDL0020000001	Uniontown	OH	44685	9/17/2012	Dr Stetler said he has had pretty good success with Butrans. Dr said he did have one patient that he titrated to the 20mcg dose and patient was not leaving the patches on for 7 days. Dr said he advised to leave patch on for 7 days. Discussed all key selling messages and focused on patient type selection with inclusion criteria for experienced and non opioid experienced patients. Gave quick review of studies with chronic low back patients and pain score reductions. Dr said that most of the patients going forward for Butrans will be opioid naive patients because he only has a handful of patients on short acting opioids all of which are for acute pain. I reviewed managed care, copay card and Butrans patient experience kits. Dr said that if he has a patient who he deems chronic(3+ mos) he refers out. I asked dr who he refers to at he said Narouze, Sable, Fouad, and Lababidi. I also asked dr if he would feel comfortable prescribing Butrans before he refers to send a good referral? Dr said it makes sense and he will consider doing it.
PPLPMDL0020000001	Fairlawn	OH	44333	9/17/2012	Pharmacy called asking for additional Butrans savings cards. Jessica said they have been filling more Butrans recently for Shah, Lababidi and Fouad along with DR Larsen. Reviewed Butrans indication and dosing and they have all doses in stock. The 10mcg seems to be used most often.
PPLPMDL0020000001	Parma	OH	44129	9/17/2012	Elaine said she has been using Butrans for some patients if tramadol is no longer controlling their pain. I showed her "Emma" profile to support that this is a good patient type. I asked what type of feedback she has been getting. She said mostly good (ie good analgesic effect), but is also hearing from some patients (typically male) that they are having problems with adhesion. Discussed taping edges with first aid tape or covering the system with Bioclusive or Tegaderm-type covering. She said she does tell them this. She also said a female patient who is on Butrans came in & said that one of her other doctors recommended coming off the Butrans because this doctor was convinced that it was causing her to be "almost in slow motion" & with slurred speech. Elaine & the staff said, however, that that is how this patient always is, not just with Butrans. I asked Elaine if she has tried Butrans for patients who are taking Vicodin around-the-clock. She said she just wants the medication to be covered by insurance when she writes it. Showed formulary grid & discussed BWC as well as prior authorization requirements for Caresource. Elaine said she likes Butrans because it seems easy for patients & she is getting adequate results. She said she would keep writing it.
PPLPMDL0020000001	Cleveland	OH	44130	9/18/2012	Dr Fedorko said he did not have time today. Positioned Butrans for appropriate patients who have BWC or commercial insurance, with a chronically painful conditions, not well-controlled on hydrocodone 3-5 times per day. He said he is trying to find patients.
PPLPMDL0020000001	Middleburg Heights	OH	44130	9/18/2012	Quick call- Positioned Butrans once weekly for appropriate patients who are not well-controlled on tramadol or hydrocodone 3-5 times per day if they have commercial insurance. Also pointed out the savings cards in the hallway. Dr Ignat thanked me & walked away.
PPLPMDL0020000001	Solon	OH	44139	9/18/2012	I asked Dr Zaidi how frequently he has a new start on OxyContin. He said he does this multiple times per day now. He went on to say that he has always liked OxyContin, but he did have to change a lot of patients after the reformulation of OxyContin. He said then, when Opana was having issues, he changed back to writing more OxyContin. Discussed 7 tablet strengths. I asked about his usage of intermediate strengths- does he use all 3 of those doses. He said he writes mostly 20 & 30mg. He added that he tries not to write the higher doses. I asked what about the 15mg. He said he actually tends to forget about the 15mg. He said he will try to remember that next time he is switching someone from 10 to 20 or vice versa. I asked about recent referrals from primary care. He said he continues to be alarmed at the high doses of opioids that some primary care physicians have patients on. He said he tries to get patients down as quickly as is reasonable. I asked Dr Zaidi what kinds of conditions patients he treats have that warrant chronic opioid therapy. He said a variety of things including accidents that have chronic effects & failed surgeries. Discussed OxyContin broad formulary coverage & savings program. He said he never has insurance problems with OxyContin. Discussed appropriate patient type for Butrans & asked him to prescribe it if a patient in the appropriate range does present in his practice. He agreed.
PPLPMDL0020000001	Parma	OH	44129	9/18/2012	Quick call- Positioned Butrans for appropriate patients who are not well-controlled on up to 80mg oxycodone per day & OxyContin for those beyond that range. Reviewed managed care coverage with Cindy & discussed savings where applicable (no government insurances).
PPLPMDL0020000001	Parma	OH	44129	9/18/2012	Dr Roheny said he hasn't found any patients with commercial insurance yet. I told him that was hard to believe. I asked him if he has patients who clinically fit the Butrans appropriate patient description who have Caresource for their insurance. He said he has a lot. I reviewed Butrans prior authorization requirements (ie failure of tramadol, hydrocodone, oxycodone, or codeine). Dr Roheny said all the patients have already tried at least one of those medications. Positioned Butrans for those patients if appropriate. He said he would do his best. Reviewed OxyContin broad formulary access.
PPLPMDL0020000001	Cleveland	OH	44130	9/18/2012	I showed Dr Diab pg 10 of OxyContin core visual aid, pointing out the 7 tablet strengths. I told him the purpose of this is individualization of dose. He said that was good & walked away.
PPLPMDL0020000001	Parma	OH	44129	9/18/2012	Quick call- Reminded Dr Lin of recent lunch & her interest in Butrans for one particular patient. She said she plans to talk to him about it, thanked me, & walked away. Spoke with Deana & reviewed managed care grids for Butrans & OxyContin. Also worked with her to schedule first available breakfast.

PPLPMDL0020000001	Parma	OH	44129	9/18/2012	Spoke with Georgia, technician, who said a floater pharmacist was in. Discussed Butrans once weekly transdermal dosing & patient type. Also gave her information sheet on Butrans savings program & discussed eligibility requirements. She said they did not need any savings cards for Butrans or OxyContin.
PPLPMDL0020000001	Parma	OH	44134	9/18/2012	Spoke with Mary who said the pharmacist was too busy today. Discussed Butrans application/rotation/disposal. Showed her patient information booklets & gave her 2 to keep on hand or give out. Discussed patient type/range for Butrans. She said they have a lot of customers on chronic narcotics for pain. I asked what type of insurance she sees most of. She said Medicare & Medicaid. I asked her to give the pharmacist my information & I asked Dr Bonyo if he sees any downside to using Butrans for the appropriate patient? Dr said he doesn't think so. I asked if he can gain some more clinical experience with it for a patient needing a dose adjustment from an IR opioid? Dr said he will try to. I gave review of initiation and titration guide and discussed BWC and Caresource coverage.
PPLPMDL0020000001	Akron	OH	44320	9/19/2012	Introduced myself & Purdue's products to Dr Manuel. Presented Butrans, delivering core messages. Also discussed Butrans as the only long-acting CII opioid, reminding him that because Butrans is an opioid, it does carry abuse & addiction potential. Discussed appropriate patient type/range, focusing him on appropriate patients with confirmed pain conditions such as osteoarthritis or low back pain, for whom he is ready to start on opioid therapy or for whom he is considering a dosage adjustment of their current opioid. I asked if he sees patients like this. He said very few. He said he refers as soon as possible. Asked if he initiates anything before/when sending to pain management. He said he does not typically do this. He said I made some good points, but added that he would likely not have a need for something like Butrans. Asked what aspects of Butrans he thought sounded like good points. He said once weekly dosing. He asked what else I have. Showed OxyContin 7 tablet strengths, pointing out individualization of dosing. He said this was good to know as he was unaware of those strengths. I asked if he currently has any patients on OxyContin. He said he does not.
PPLPMDL0020000001	Akron	OH	44313	9/19/2012	Spoke to Kieth and Natalie about Butrans. Kieth said they have received 2 prescriptions for Butrans this week. One 5mcg from Shah and another from Lababidi 5mcg. I reviewed the Butrans dosing, application sites, patient information guide, copay cards and appropriate patients.
PPLPMDL0020000001	Bedford	OH	44146	9/19/2012	I reminded Dr Haddad in his previous interest in Butrans. I asked what managed care plans he sees most of, since he had expressed to me before that he had tried to write Butrans when we first launched, but had had many managed care set-backs, so he stopped trying. He mentioned Medicare, Medicaid, & commercial plans. I asked about Caresource. He said he has a lot of Caresource. I explained the prior authorization requirements & also reminded him of favorable coverage on commercial insurance plans & that BWC is paying for Butrans. I reminded Dr Haddad that he had liked many aspect of Butrans clinically, such as once weekly transdermal dosing & long-acting CIII. He said this is true & added that he will start to try Butrans on appropriate patients again. I asked about recent utilization of OxyContin. He said he probably has only 1-2 patients on it. I reminded him that he used to speak positively about it & had told me he had many patients on it doing well. He said the stigma with OxyContin has been so negative, that physicians frown upon prescribing it. He said even though he has had good clinical experience, when physicians collectively talk about a medication's stigma negatively & stop writing it, it becomes something other area physicians adopt. Dr Haddad said he knows Percocet is the same molecule as OxyContin, but is more comfortable writing Percocet because he does not feel it has the same stigma as OxyContin. I asked him to continue appropriate patients on it & he agreed.
PPLPMDL0020000001	Sagamore Hills	OH	44067	9/19/2012	I asked Dr Mike what conditions he does feel warrant chronic opioid therapy, reminding him of our previous discussions about Butrans & OxyContin & where they could fit into his practice. He said it completely depends on the patient. He said that basically if someone is old & dying, he might write an opioid for them, but otherwise he would have a hard time doing so. He said he has sent many patients who are on chronic opioids to rehab & those patients end up no longer "needing" to take the opioids because they learn to manage their pain, which he added is usually mostly psychological. He said because of this, it is difficult to justify prescribing opioids to rehab patients, especially for a long period of time. I agreed that opioids & chronic opioid therapy are not for everyone & agreed that he should be cautious in prescribing any of these medications. I asked if he uses OARRS. He said sometimes. Dr Mike said he will keep Butrans & OxyContin in mind in the event he has an appropriate patient.
PPLPMDL0020000001	Akron	OH	44313	9/19/2012	I asked dr how his patients are doing on OxyContin? Dr said they are doing well and agreed to continue using where appropriate. I asked dr if its ok to have Tina place the Butrans initiation and conversion guides in each of his 4 exam rooms to help him remember Butrans? Dr said that its ok if she does that and wanted to know if its covered on Medicaid. I discussed Caresource, BWC and other plans. I asked dr to gain some clinical experience with the product.
PPLPMDL0020000001	Copley	OH	44321	9/19/2012	provided dr with Wong Baker pain scale and asked him how it assesses his patients pain. Dr said he doesn't use pain scales and just uses his intuition. I gave brief outline of opioid experienced trial and asked dr to use Butrans for those patients on IR opioids needing a dose adjustment.
PPLPMDL0020000001	Sagamore Hills	OH	44067	9/19/2012	Dr Scanlon said he has been prescribing Butrans. I asked him what types of painful conditions his patients on Butrans are suffering from. He said he likes to use Butrans for patients who are on some sort of short-acting opioid for whom he would otherwise increase the dose of short-acting. He said he has found that he can initiate Butrans instead of increasing the number of short-acting pills the patient takes in a day. He added that sometimes patients just get "caught up" in taking pills every few hours, making initiation of a long-acting opioid more difficult. I suggested initiating Butrans sooner in therapy if appropriate to minimize this. He agreed that this was a good idea. Reviewed OxyContin broad formulation coverage.
PPLPMDL0020000001	Norton	OH	44203	9/19/2012	Discussed Butrans and OxyContin over lunch appointment. Provided all key selling messages for Butrans, discussed inclusion/exclusion criteria, case studies, managed care coverage and initiation and titration guide. Dr said he most likely will not use it but knows his partner Katsaros does. I asked why and he said he just doesn't feel comfortable prescribing any scheduled product. He refers out or sends them to his partner. nothing else learned.
PPLPMDL0020000001	Solon	OH	44139	9/19/2012	I met with Denny and Chuck. Reviewed 2012 and 2013 Marketing plan. Went over report 8. Also current promotions with DDM and Marc's. Discussed off-invoice program for Senokot. They felt in the future we should consider doing a scan instead, as it is harder for less sophisticated regional accounts to track the off invoice on their end. Chuck asked me to speak with Melenioe Petropoulos about setting up a Senokot To Go display at the pharmacy counter. DDM now charges \$1,500 for an ad, plus scan cost for 4-6 weeks. It cost \$750 just to do a TPR alone plus scan for 4-6 weeks. Some DDM stores had the Senokot-To-Go clippings up and others did not. Denny said the instructions and product were just sent out this week. Discussed horizontal packaging seen at Marcs.
PPLPMDL0020000001	Akron	OH	44320	9/19/2012	Primary objective was to provide dr with one patient type to use Butrans in. Used Emma to explain how the Ultram patient who may need a dose adjustment is an ideal candidate for Butrans. Dr said she was sick and didn't feel like discussing but agreed to look for those patients.
PPLPMDL0020000001	Bedford	OH	44146	9/19/2012	I reminded Dr Moufawad about the situation he told me about with the patient who he had wanted to put on Butrans, but who's Caresource plan was requiring a failure of morphine before they were able to get Butrans. Dr Moufawad said this was true, although he could not remember which patient it was. I told him again that this was atypical of the Caresource Butrans coverage/prior authorization requirements. He said what happens is managed care plans always tell the pharmaceutical companies one thing & then tell the offices something else. He said he is no longer going to accept Wellcare Medicaid because of this. I asked about his clinical experience with Butrans & OxyContin recently. He said he has been using both with good results. He said he was low on Butrans savings cards & asked me to give more to Brenda & Christina. He said he would be sure to keep better track of any insurance denials he got for Butrans.
PPLPMDL0020000001	Twinsburg	OH	44087	9/19/2012	Spoke with Lisa, who handles some of the prior authorizations for medications for Pharmacia. She said Gay would be the person to speak with regarding any decreases in ordering of specific medications & added that Gay is out of the office until Friday afternoon. She suggested we email her for an appointment. Lisa said Medicare D dictates what medications are allowed (it is not up to each individual facility). She said the doctors will prescribe a medication, then Medicare sends Pharmacia a prior authorization. Lisa said Sally Glass is still with Pharmacia, as is Madonna, but neither of them are usually in-house as they are out at facilities the majority of the time. Gave Lisa my card. Kendra will email Gay to request an appointment for us to come in to speak with her.
PPLPMDL0020000001	Warrensville Heights	OH	44122	9/20/2012	Dr Dmitri told me again about the patients he had written Butrans for who were unable to get it due to insurance. I reminded him that Medicare plans are not covering Butrans & reviewed the formulary grid with him again. Also clarified Caresource prior authorization requirements & BWC. I suggested Dr Dmitri think of appropriate patients who are between the ages of 40-60 with BWC, Caresource, or commercial prescription coverage, who meet the indication instead of his Medicare population, even if that is fewer patients. He said he will do this because he does want to try Butrans for some of his patients. I reminded him that in our previous conversation, we talked about patients who needed something to control their moderate to severe pain over a few months & asked if this is still the population he plans to use it in. He said it is. He said those patients could benefit from a transdermal medication like Butrans & said he likes the molecule. Discussed OxyContin 7 tablet strengths for individualization of dosing. He said he very rarely prescribes OxyContin.
PPLPMDL0020000001	Beachwood	OH	44122	9/20/2012	Spoke with Linda, Carol, Debbie, & Kristen (pain management nurses) who said Dr Souzalnitski was planning to leave to go to Summa & Dr Barrett will be taking his place. They said they do not know for sure if he is leaving yet, but it is likely. I asked about prescribing of Butrans within the department. They said they did not know of any. I presented Butrans to them again, reviewing dosing, appropriate patient type, titration, & supplemental analgesia. I asked if the doctors there usually have patients on long-acting opioids with short-acting for breakthrough or if they only allow one opioid medication at a time. They said they do both/either. I asked if they are the ones who typically discuss medications with patients or if the doctors do the counsel. They said usually they do, but occasionally the doctors will. Showed patient information booklets & discussed application, rotation, & disposal. They were very interested in the disposal & said it was a great idea. Discussed the importance of setting appropriate patient expectations up-front & importance of contact between the office & patient after a few days of initiation do discuss possible titration if necessary. They said they could think of many patients for whom Butrans would be a good option & agreed to suggest it when appropriate. Discussed OxyContin as a q12h dose of oxycodone, positioning it for appropriate patients who could benefit from q12h dosing of oxycodone.
PPLPMDL0020000001	Shaker Heights	OH	44122	9/20/2012	Quick call- Positioned OxyContin q12h for appropriate patients who are taking oxycodone immediate release around-the-clock if they will be on it for an extended period of time. Dr Agarwal just said that he knows all about OxyContin & then walked into a room.
PPLPMDL0020000001	Fairlawn	OH	44333	9/20/2012	I asked dr what his normal algorithm for moving to OxyContin is? Dr said that a lot of times he will move a vicoden patient taking 6-8 pills a day straight to OxyContin because he knows they most likely need additional pain control and the Q12h is probably necessary. Discussed additional patient types for OxyContin, dosing, managed care and copay cards. I handed Dr the case study for "William" to the dr and asked him to review on his own. I asked dr if he has patients like William in his practice? Dr said he is sure he does. I asked what he is doing currently with a patient like William who may need a dose adjustment? Dr said depending on the dose he would adjust the dose of vicoden or consider OxyContin. I asked if he thinks Butrans would be an appropriate option? Dr said that Butrans as an intermediate product would fit for William. I asked dr what downside there is to Butrans? Dr said none except that some patients don't want patches. I asked if he has asked any about Butrans? Dr said he had not. I asked dr to start explaining the Butrans option to those appropriate patients and to use I asked dr to gain clinical experience with Butrans to find out clinically if he can believe in the product. Showed him pain score reductions from both studies and identified appropriate patients.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	9/20/2012	Quick call- Handed Dr Al-Abousi Butrans initiation guide opened to pg 6, pointing out the appropriate range of patients to consider. Reminded her of once weekly transdermal dosing & CII opioid. She said she would keep it in mind.
PPLPMDL0020000001	Parma	OH	44129	9/20/2012	Spoke with pharmacist, Christine, who said she thinks she has dispensed Butrans once but added she is not sure if the patient is still on it. I asked if she remembers what the patient had been taking prior to being initiated on Butrans. She said she does not. Discussed savings & gave her information sheet on the program, showing her how one can go online to get additional information. Discussed OxyContin & 7 tablet strengths.
PPLPMDL0020000001	Cleveland	OH	44125	9/20/2012	Spoke with technician & discussed Butrans overview of dosing, delivery system, & patient type. Also gave her information sheet on savings program & reviewed eligibility requirements. Discussed OxyContin 7 tablet strengths. She said she knows they do stock OxyContin & have some customers on it, but she was unsure which strengths they have on hand. She agreed to give my information to the pharmacists.
PPLPMDL0020000001	Broadview Heights	OH	44147	9/20/2012	Spoke with technician & discussed Butrans overview of dosing, delivery system, & patient type. Also gave her information sheet on savings program & reviewed eligibility requirements. Discussed OxyContin 7 tablet strengths. She said she knows they do stock OxyContin & have some customers on it, but she was unsure which strengths they have on hand. She agreed to give my information to the pharmacists.
PPLPMDL0020000001	Broadview Heights	OH	44147	9/20/2012	Quick call- Dr Gigliotti said he didn't have any new feedback for me on Butrans & added that he hasn't really had any patients for it recently. He also said he just wrote an OxyContin prescription.
PPLPMDL0020000001	Parma	OH	44129	9/20/2012	Spoke to Holly the pharmacist about dispensing and stocking of Butrans and OxyContin. Holly said they have been dispensing about 2 prescriptions a week for Butrans. I asked who may be prescribing them and she did not know and didn't have time to look in the system. They have all three doses in stock. Pharmacy has all doses of OxyContin except for the 60 and 80mg doses. The most common doses dispensed are 10, 20 and 40mg. left her with initiation and titration guides for both products.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	9/20/2012	Spoke to Holly the pharmacist about dispensing and stocking of Butrans and OxyContin. Holly said they have been dispensing about 2 prescriptions a week for Butrans. I asked who may be prescribing them and she did not know and didn't have time to look in the system. They have all three doses in stock. Pharmacy has all doses of OxyContin except for the 60 and 80mg doses. The most common doses dispensed are 10, 20 and 40mg. left her with initiation and titration guides for both products.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	9/20/2012	Spoke to dave about products and asked for stocking and dispensing. They have filled a few Butrans but nothing recently and have the 5 and 10mcg doses avail. gave quick review of Butrans selling points.



PPLPMDL0020000001	Waterford	OH	45786	9/21/2012	W - Continues to prescribe Butrans for patients once a long acting agent is beneficial. Will have the ability to prescribe CII products after some training. I - Review of Butrans opioid experienced clinical trial discussing the inclusion criteria, dosing/prior opioid therapy and reduction in pain scores for patients. Butrans for appropriate patients who meet the indication when uncontrolled on short acting opioids and requesting a therapeutic change. Use of initiation guide page 6 to discuss appropriate starting doses for patients based on their current therapy. Review of dosing, titration and the use of supplemental analgesia if needed. OxyContin q12h dosing with 7 dosing strengths for appropriate patient conversions from short acting opioids once the indication is met. Review of formulary coverage and savings card programs for both Butrans and OxyContin.
	Waterford	OH	45786	9/21/2012	W - Does have patients doing well on Butrans and will continue to prescribe. Will like having the ability to prescribe CII products like OxyContin after additional training and certification especially for her nursing home patients. I - Review of Butrans opioid experienced clinical trial discussing the inclusion criteria, dosing/prior opioid therapy and reduction in pain scores for patients. Butrans for appropriate patients who meet the indication when uncontrolled on short acting opioids and requesting a therapeutic change. Use of initiation guide page 6 to discuss appropriate starting doses for patients based on their current therapy. Review of dosing, titration and the use of supplemental analgesia if needed. OxyContin q12h dosing with 7 dosing strengths for appropriate patient conversions from short acting opioids once the indication is met. Review of formulary coverage and savings card programs for both Butrans and OxyContin.
PPLPMDL0020000001	Waterford	OH	45786	9/21/2012	W - Continues to prescribe both OxyContin and Butrans for patients. Likes having another transdermal option for patients. I - OxyContin for appropriate patient conversions from short acting opioids once the indication is met. Review of Butrans opioid experienced clinical trial discussing the inclusion criteria, dosing/prior opioid therapy and reduction in pain scores for patients. Butrans for appropriate patients who meet the indication when uncontrolled on short acting opioids and requesting a therapeutic change. Review of dosing, titration and the use of supplemental analgesia if needed. Review of formulary coverage and savings card programs for both I asked dr if he has had any of his Butrans patients back in for follow up appointments? Dr said not yet but he has not heard from them to he expects them to be doing well. I asked dr to continue to identify patients on Ultram or vicoden who are uncontrolled.
PPLPMDL0020000001	Akron	OH	44312	9/21/2012	I asked dr if he truly feels Butrans is the option for him when patients are uncontrolled on IR opioids? Dr said he does think that and is concerned about it not being covered on Medicare. I asked dr to identify patients under Medicare with chronic pain. Dr agreed to have a few under 65 but said he could b e prescribing a good amount if it was cheaper for Medicare patients.
PPLPMDL0020000001	Akron	OH	44312	9/21/2012	Quick call- Positioned Butrans for appropriate patients who are not well-controlled on Vicodin around-the-clock, reminding Dr Miguel of his previous interest. He said he will prescribe. Pointed out OxyContin savings cards in his sample closet.
PPLPMDL0020000001	Brooklyn	OH	44144	9/21/2012	Told Michele about Butrans and provided her with key selling messages and reviewed application sites as well as conversion scales. Michele said they have filled it a couple times and have the 5 and 20mcg in stock. gave her the steady state and titration information. OxyContin key selling messages and they have all doses except the 80mg. provided steady state information and appropriate patient selection.
PPLPMDL0020000001	Akron	OH	44312	9/21/2012	Penny said she & the other practitioners in the office seem to be doing more acute & chronic pain management lately. I asked why she thinks that is. She said because so often, a patient will go to a specialist, such as an orthopedic surgeon, get a procedure done, then the specialist writes them only 10 pain pills & tells them to follow-up with primary care for more medication if needed. She also said that since so many HCP's are referring to pain management, the clinics are full & they are forced to treat the patients for pain. She said she is trying to get the clinic to adopt urine drug screening as another measure to protect the practice. I gave Penny Partners Against Pain information & discussed resources such as pain contracts. She said she would definitely be interested in looking at our examples. I asked, with her increased pain treating, does Butrans fit into the picture. She said she likes Butrans & has had good success with it. Discussed appropriate patient type & reviewed patient profiles. Penny agreed to using Butrans when appropriate patients like that present. Also discussed OxyContin as an option for appropriate patients beyond the Butrans range. Penny said she is comfortable with the idea of prescribing schedule II medications for the right people. Recommended Senokot-S for opioid-induced constipation.
PPLPMDL0020000001	Sagamore Hills	OH	44067	9/21/2012	Quick call- Dr Lenox came in briefly for lunch but said he couldn't stay long to talk. Positioned Butrans for appropriate patients not well-controlled on up to 80mg equivalent oral morphine per day & OxyContin for those beyond that range. He said he is keeping them in mind.
PPLPMDL0020000001	Sagamore Hills	OH	44067	9/21/2012	Dr Sevier said he has had a couple of patients come in from pain management on Butrans. I asked what type of feedback he has gotten from them. He said they have all said that it is helping their pain. He said this makes him more confident in Butrans & more comfortable to use it in his own practice. Reviewed patient type & showed profiles. He said he really wants to use Butrans for some of his Medicare population. I told him I understand these can be ideal patients clinically, but reminded him of lack of coverage for those plans. I asked him to think of patients who are similar to those patients, but perhaps slightly younger, maybe 40-60 years old, with insurance. He said he would do his best. Discussed OxyContin as an option for appropriate patients beyond the Butrans range. Dr Sevier said he has some patients still on it & he is comfortable with that. He said some of the doctors there want to do urine drug screenings, but he finds OARRS to be enough of a safety measure. I told him urine drug screening is one additional way to help protect the practice. Gave Senokot-S samples & recommended it for opioid-induced constipation.
PPLPMDL0020000001	Beachwood	OH	44122	9/21/2012	Quick call- Dr Tabbaa said he didn't have time to talk today & asked if I could just give him literature/information. Passed back OxyContin formulary grid & reviewed broad favorable coverage. Also handed back Butrans opioid-experienced clinical background & let him know I would follow-up for his feedback.
PPLPMDL0020000001	Northfield Center	OH	44067	9/21/2012	Spoke with Katie, reviewing Butrans dosing. She said she has dispensed it a few times & showed me that it is stocked here. She also said she has patient information booklets. I reviewed application, rotation, & disposal. She said she has some savings information & gives it out when she has someone without Medicare or Medicaid. Reviewed OxyContin savings & asked if she needed additional cards. She said she had enough of them for now.
PPLPMDL0020000001	Brooklyn	OH	44144	9/21/2012	Quick call- Showed Dr Dettwiler OxyContin 7 tablet strengths & reviewed broad formulary access. He spent a moment reviewing what strengths of OxyContin are available, thanked me, & walked into a room.
PPLPMDL0020000001	Brooklyn	OH	44144	9/21/2012	Spoke with technician who said David was on the phone & was behind. I gave him information sheet on Butrans savings program & reviewed eligibility requirements. Discussed appropriate range of patients. Also reviewed OxyContin savings program. He said he would give the information to David when he was available.
PPLPMDL0020000001	Akron	OH	44310	9/21/2012	I showed dr the Emma profile and asked him what he typically does for a patient on Ultram who needs a dose adjustment. Dr said it depends on many factors but he will try and remember Butrans as an option for chronic pain. I gave quick review of inclusion criteria and asked dr to look for patients with these conditions.
PPLPMDL0020000001	Independence	OH	44131	9/21/2012	Roman requested additional OxyContin savings cards, so I provided a package. Also gave OTC samples, recommending Senokot-S for opioid-induced constipation. I asked Roman about his experience with Butrans, reminding him of Butrans Patient Experience Program Kits. He said he has given some out but some of the patients have not been able to get Butrans due to insurance/cost. Reviewed formulary grid & BWC. I asked him to stick with commercially insured patients who meet the indication. He said he would try.
PPLPMDL0020000001	Akron	OH	44305	9/21/2012	I asked dr if he had identified any additional patients for Butrans? Dr said he had not recently but has had good success with his own patients. I asked him what the response is? Dr said he has been able to have Butrans only as the product for pain relief and it is doing well. I showed dr the Ultram patient again and asked for continued use.
PPLPMDL0020000001	Akron	OH	44312	9/21/2012	Saw dr at window and asked him how his Oxycontin patients are and if he has prescribed Butrans yet? Dr said he has not prescribed Butrans and would really like it to be covered on Medicare. Dr said he still likes OxyContin and will continue to keep his patients on it when they respond well.
PPLPMDL0020000001	Akron	OH	44333	9/21/2012	I asked dr how many patients she figures she treats for pain in the average week? Dr said she does not like treating pain and refers them out immediately. I asked what the point is when she refers out? Dr said as early as possible. I asked if she finds herself treating patients with low back pain with Ultram or vicoden? Dr said she does a little but likes to refer to Comprehensive Pain Mgt or Dr Shah. I asked if it makes sense to place a patient on a medicine like Butrans if they meet the indication prior to the referral? Dr said she could see herself doing that. I provided all selling points, reviewed case studies, discussed dosing, titration and initiation from IR opioids. Discussed placebo patch and the science behind Butrans transdermal system. Dr said she will consider using.
PPLPMDL0020000001	Akron	OH	44312	9/21/2012	Asked Amy about stocking and dispensing of Butrans and OxyContin. They only have the 10mcg Butrans and most of OxyContin. Gave selling messages for both products and Amy said she was too busy to continue talking.
PPLPMDL0020000001	Parma	OH	44129	9/21/2012	Spoke with new pharmacist & introduced Butrans. Discussed dosing & delivery system & steady state in 3 days. She said she has seen it on the shelves. Reviewed ability for patients to use supplemental analgesia if necessary, showing FPI 2.4. Gave her information on savings program & discussed eligibility requirements. She checked & said they did not need cards for Butrans or OxyContin.
PPLPMDL0020000001	Akron	OH	44319	9/21/2012	I asked dr what he does with his patients on vicoden who need a dose adjustment? Dr said he will put the patient on whatever medicine is covered on the patients insurance. I asked dr if he is serious and how many patients does he have to be that concerned about that with. Dr told me that the PA's are so often and it takes 20-30 mins to get a medicine approved. I told dr that he needs to prescribe Butrans for patients with private prescription insurance to minimize PA's and step edits.
PPLPMDL0020000001	Parma	OH	44129	9/24/2012	Dr Taylor said she has been out of the office for the last 2 weeks, so she has not written Butrans. Positioned Butrans for appropriate patients who are not well-controlled on their current short-acting opioid regimen & OxyContin for appropriate patients beyond the Butrans range. She said she would keep both in mind. Spoke with Mary, reviewing savings programs.
PPLPMDL0020000001	Parma	OH	44129	9/24/2012	I asked Dr Rossi what type of patient(s) she typically uses OxyContin in. She said she doesn't know. She said she guesses cancer patients. I showed her OxyContin core visual aid pg 5, pointing out that cancer pain is one of the conditions OxyContin can be used for. I asked if she has patients suffering from osteoarthritis or low back pain on OxyContin as well. She said so many patients are coming in that are abusing pain medications it is difficult to know who is telling the truth & who is not. I asked what types of measures she has in place to help protect her practice. She said she uses OARRS frequently. I told her this is a great way to protect her practice. I reminded her of previous Butrans discussions, reminding her that she had seemed interested in trying it for appropriate patients. She said she tried to write it but none of the patients she tried to get on it were able to get it. Discussed managed care. Dr Rossi said one of the patients was younger (non-Medicare) but that patient did not want to try Butrans. I asked why not. She said probably because it is different than what she is used to. I asked what the patient was on. She said she didn't remember. Positioned Butrans for appropriate commercially insured patients who are seeking a medication adjustment for their chronic opioid therapy, if they are taking less than 80mg equivalent oral morphine per day & OxyContin for those beyond that range.
PPLPMDL0020000001	Akron	OH	44312	9/24/2012	Gary said they have not filled a prescription for Butrans recently. Provided review of dosing, titration and appropriate patients. Asked when the last dispensing of OxyContin took place. gary said they fill them every day and could not give me specifics.
PPLPMDL0020000001	Akron	OH	44307	9/24/2012	I asked about the doses of OxyContin they fill most often? Eric said that they fill lots of 10, 20, 40, and 80mg doses. They still have yet to get any Butrans prescriptions. I reviewed the dosing, titration and appropriate that if they were new to a medication. He said some of them probably would read it. Showed Butrans application/rotation/disposal instructions. Gave him some booklets & OxyContin savings cards. He said he would talk to the pharmacist about it & give them the information as soon as they were available.
PPLPMDL0020000001	Parma Heights	OH	44129	9/24/2012	Spoke with technician (Raj?) who said neither of the pharmacists were available. I showed him Butrans patient information booklet & asked if he thought some of the customers there would appreciate getting something like that if they were new to a medication. He said some of them probably would read it. Showed Butrans application/rotation/disposal instructions. Gave him some booklets & OxyContin savings cards. He said he would talk to the pharmacist about it & give them the information as soon as they were available.
PPLPMDL0020000001	BEACHWOOD	OH	44122	9/24/2012	Spoke with technician & reviewed Butrans once weekly transdermal dosing. Gave her information sheet on Butrans savings program & explained eligibility requirements for the program, reminding her that patients with any type of government insurance, including Medicaid & Medicare cannot utilize savings cards. She said they do give savings cards to customers when they have them. Reviewed OxyContin cards & offered some, but she said they probably have enough. She said she would give my information to the pharmacist.
PPLPMDL0020000001	Parma	OH	44134	9/24/2012	Quick call- Dr Mandat said he just had a patient who he started on Butrans. He added that she was not getting adequate pain relief from tramadol 3-4 times per day, so he thought Butrans would be a good option for her. I told him it sounded like he chose a good candidate. Started to show him Butrans opioid-experienced clinical background, but he said he did not have time today.
PPLPMDL0020000001	Parma	OH	44134	9/24/2012	Quick call- Showed Dr Myton-Craig Butrans opioid-experienced clinical background, pointing out inclusion criteria. I asked how frequently she sees patients with these conditions in her practice. She said all the time, then walked away. Spent time with Tammi going over Butrans & OxyContin formulary grids. Discussed commercial insurance & BWC for Butrans & Medicare coverage for OxyContin. Tammi said she would keep the formulary grids

	akron	OH	44333	9/24/2012	I reviewed inclusion criteria for Butrans and asked dr if he has patients with those type of conditions? Dr said he does but his pool of patients is small. I asked him to look at patients with those conditions that have Medco, Medical Mutual, ESI. Dr said that a majority of patients are well over 65 and the one patient he has on Butrans is now Metastatic with his cancer and he will be titrating him to the 20mcg patch. Reviewed titration schedule and conversions. I asked dr if he has a patient on IR opioids who he knows he has to refer if it would make sense to refer out to pain management on a controlled release product like Butrans? Dr said it makes sense if he finds himself in that situation and that he would do it if the patient agrees and the insurance is right.
PPLPMDL0020000001	Akron	OH	44333	9/24/2012	Spoke to Jen(ma) about OxyContin and Butrans. Provided OxyContin conversion and titration guide and asked about OxyContin use for Dr Reilly. Jen said that she knows he uses it for his patients in severe pain after surgery. She said he typically uses the low doses to treat. Provided Butrans selling points. Jen said that the doctor should like Butrans because of low dose and administration mode.
PPLPMDL0020000001	Akron	OH	44312	9/24/2012	Reviewed Butrans dosing and titration and provided a review of inclusion criteria and read the pain score reductions from FPI. I asked dr if he would be happy with those kind of reductions. Dr said he would and reminded me he does not treat chronic pain. I told him that he has told me before but asked him if he has a patient on IR opioids who is continued pain why would you not prescribe a controlled release product. Dr told me because thats the job of pain management.
PPLPMDL0020000001	Akron	OH	44333	9/24/2012	I asked dr if he had a chance to review the opioid experienced trial after our discussion last week. Dr said he looked at it but not closely. I asked dr how he now feels about titrating and using supplemental analgesia for patients needing it? Dr said he does but he said most of his patients on Butrans don't need it. Dr said he wants them to use Butrans only. I asked dr if he feels comfortable using short acting opioids for supplemental analgesia if necessary. Dr said yes. Spoke to Wendy and Marsh about the practice taking on a large number of Lefkowitz's patients. Wendy said a large portion of patients have BWC. Discussed BWC coverage with Butrans, I asked staff and dr what the three top private insurance plans are for their patient base. TJ said Medco, Express Scripts, and Caremark. I told the staff and dr that all three plans are covered on Butrans and two of them are the lowest branded copay. I told dr that he needs to focus on patients with one of those three plans when patients are on Ultram or vicoden and need a dose adjustment. I reviewed Emma and William case studies and asked dr if he would prescribe Butrans in that place. Dr said he is more inclined than ever to refer to pain management because there are so many abused and seekers. I asked dr if all his patients in pain are like that. He said no not all. I told dr that Butrans is for patients who he deems are in legitimate chronic pain. I asked dr to initiate Butrans prior to sending to Pain Mgt? Dr said he can do that and it makes sense.
PPLPMDL0020000001	Copley	OH	44321	9/24/2012	Spoke with Dave, pharmacist & reviewed Butrans appropriate patient type. Also showed FPI 2.4, reminding him patients on Butrans can take supplemental analgesia if necessary. He said knows that. I asked if there is any specific type of information I can provide when I come in that he would find useful. He said not really, just new information when available. Discussed Butrans & OxyContin savings. Cathy said she just recommended Butrans for a patient, but Dr Tolentino didn't want to try it for them. She added that this is the 5th or 6th patient who was appropriate & had the right insurance that she asked Dr Tolentino to try Butrans for. Cathy said she just will not try it & she is giving up on trying. I asked Cathy why she thinks Dr Tolentino won't at least try Butrans for an appropriate patient, especially if they have commercial insurance. She said she does not know. I asked Cathy not to give up. Reviewed appropriate patient type. Cathy said they have so many of those patients. I asked her to keep reminding Dr Tolentino when appropriate. She finally agreed. Reviewed formulary grids & savings program. Also discussed patient instructions/booklets. I asked if they use OARRS. Cathy said they don't but she wants Dr Tolentino to sign up to protect the practice. I agreed this was a good idea & gave her information. Cathy said she would do her best with Dr Tolentino & Butrans.
PPLPMDL0020000001	Parma	OH	44129	9/25/2012	I asked Dr Paat what type of patient he finds that he uses OxyContin for. He said those in chronic pain. I asked what patients are usually on before he starts them on OxyContin. He said it depends. He said he has patients on 10mg of OxyContin q12h & some on 80mg q12h. He asked if patients can take Butrans with OxyContin. I told him Butrans can be taken with immediate-release opioids, but has not been studied with other long-acting opioids & is therefore not recommended. He asked what doses Butrans would be started at. Showed starting appropriate patients on either 5 or 10mcg depending on their current dose. I asked what therapy he would say most of his patients are on. He said Vicodin & pointed to the 15-40mg range. Discussed starting those patients on 10mcg Butrans & titration ability after 3 days to 20mcg if necessary. Also discussed supplemental analgesia with immediate-release opioid or non-opioid medications. Reviewed insurance coverage & savings program. Dr Paat asked about application sites. Showed him sites & discussed application & rotation. Also discussed abuse/addiction potential & advised him to be as cautious in prescribing Butrans as he is with other opioids. Also asked if he uses OARRS & gave him & Shari information. He said he would write Butrans & Shari said she would help him remember it for those appropriate patients.
PPLPMDL0020000001	Independence	OH	44131	9/25/2012	Dr Sundaram said he hasn't really had any patients treated for pain lately. He added that he has recently adopted urine drug screening into his practice. I agreed that this is a great tool to utilize in protecting the practice. I reminded him that there are legitimate patients in pain & reminded him of his past interest in Butrans for patients like that. Positioned Butrans for appropriate patients taking between 15 & 40mg equivalent oxycodone or hydrocodone & OxyContin for those beyond that range. He said he will keep both in mind & agreed that he does have patients in legitimate pain who could benefit from both medications.
PPLPMDL0020000001	Cleveland	OH	44130	9/25/2012	Dr Diab said he just wrote a Butrans prescription & added that he does not know if the insurance will cover it. I asked what plan the patient has. He said he doesn't know but some sort of Medicare. I reviewed Butrans formulary coverage & pointed out that OxyContin has favorable Medicare coverage, but he just walked away. Spent time with Barb, who confirmed that the patient who Dr Diab wrote Butrans for does have Medicare. Discussed where Butrans is covered. Barb said Dr Diab probably won't try to write Butrans again after this because it seems never to be covered. I asked that she encourage him to not give up on it, reminding her that commercial insurance, including Medco & Express Scripts do cover Butrans.
PPLPMDL0020000001	Cleveland	OH	44130	9/25/2012	I showed Dr Fedorko Butrans opioid-experienced clinical background inclusion criteria. I asked how often a patient with one of those conditions presents in his office. He said all the time. He said he couldn't talk today & then walked into a room. Spoke with Mary Ann & reviewed the conditions for her, letting her know patients with these conditions may be candidates for Butrans once weekly.
PPLPMDL0020000001	Parma	OH	44129	9/25/2012	Myra said she just wrote a prescription for Butrans. I asked her to tell me about the patient. She said the patient has Cigna insurance, non-Medicare, & was taking Lortab around-the-clock. Myra said she did not want to increase the Lortab, so she thought Butrans would be a good option. She said the patient was excited to try this different option. I agreed that it sounded like it would be a good patient type. Myra said she has been writing Butrans more & plans to continue to do so. Spent time with Dawn, who verified that Butrans has been written more frequently. She then got a call from the patient for whom Myra had just written Butrans, saying she was at the pharmacy & the Butrans was going to cost her \$194, even with her insurance & the trial card. I asked what pharmacy & Dawn gave me the pharmacy information. I let her know I would look in to this.
PPLPMDL0020000001	Uniontown	OH	44685	9/25/2012	Provided Matt with Butrans managed Care grid highlighting the Medco/ESI, Medical Mutual, and BWC coverages. Matt said they see a lot of patients with those prescription plans. Still has only dispensed a couple of Butrans for Fouad and one from Stetler he thought. Have him an initiation and titration guide.
PPLPMDL0020000001	Parma	OH	44134	9/25/2012	Spoke with pharmacist & asked her about a patient with Cigna insurance who came from Cleveland Back & Pain with a prescription for Butrans. She said she knows of the situation. Discussed trial card & \$75 off initial prescription. The pharmacist said the cash price for Butrans 20mcg is \$431.99 & with the patient's insurance & trial card, it was \$194. She did not know specifics of the patient's plan. Reviewed coverage & savings program/eligibility. Also discussed OxyContin savings program.
PPLPMDL0020000001	Uniontown	OH	44685	9/25/2012	Dr said she does not have any new starts with Butrans yet but did speak to a patient about it and the patient was on Medicare and it would have cost too much and didnt want a patch anyway. I showed Dr Emma case study and asked her to focus on patients on Ultram, under 65, and may need a dose adjustment. I gave her the managed care grid and copy card and told her about the private prescription patients. Dr agreed to look for that specific patient.
PPLPMDL0020000001	Uniontown	OH	44685	9/25/2012	Both Kim and Sue the tech said they have been dispensing more Butrans recently. I asked why and from where and Kim said many of Dr Lefkowitz's patients who have gone to other pain drs are getting Butrans. I was told that Dr Shah and Fouad and Lababidi are prescribing the most. Discussed savings cards which they wanted to have on hand. Staff also wanted more OxyContin savings cards which I discussed along with Med D coverage.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	9/26/2012	I asked dr to continue prescribing OxyContin for his appropriate patients and showed him the patients studied for OxyContin from main vaisaid. Dr said he is not prescribing it much anymore but does have a number of patients who are doing well on it. I asked dr where he thinks Butrans would be used in his practice? Dr said he is not sure but sees it being used for patients who would like a patch over pills. I gave dr quick overview of Butrans application sites, CIII, 7 days. I showed dr Emma and William and asked him if he has patients in those situations? Dr said he does and will look into using Butrans for them.
PPLPMDL0020000001	Parma	OH	44129	9/26/2012	Dr Khooball said he hasn't put anyone on Butrans lately. I asked why not. He said he hasn't really seen any patients being treated for pain lately. I showed him Butrans opioid-experienced background & reviewed conditions from inclusion criteria with him. I asked how often non-opioid measures & treatments are sufficient to control pain in patients with these conditions. He said it depends. Positioned 5mcg Butrans for appropriate patients who he is getting ready to start on an opioid.
PPLPMDL0020000001	Warrensville Heights	OH	44122	9/26/2012	Quick call- Positioned OxyContin for appropriate patients who could benefit from a q12h dose of oxycodone for their moderate to severe pain. Also showed 7 tablet strengths. Dr Zivic just said he would prescribe it, then walked into a patient room.
PPLPMDL0020000001	Akron	OH	44320	9/26/2012	I gave dr one point about Butrans. Showed the emma profile and asked her if she had any patients fitting a similar description? Dr said she figures she does. I asked her to prescribe Butrans for that patient when they meet the indication. Dr said she will try to remember.
PPLPMDL0020000001	Akron	OH	44320	9/26/2012	I asked dr if he feels ok prescribing CIII products to treat pain. Dr said sure. I asked him why he has not prescribed Butrans. The only CIII, 7 day transdermal system for moderate to severe pain? Dr said he will he just needs to do it. I asked him to prescribe it for the next patient he has on Ultram or vicoden who may need a dose adjustment and meets the indication.
PPLPMDL0020000001	Independence	OH	44131	9/26/2012	Spoke with Regina, pharmacist, who said she did not have time to talk today. Gave her information sheet on Butrans savings program, reviewing eligibility requirements. Also reminded her of availability of OxyContin savings. She said she wasn't interested & walked away.
PPLPMDL0020000001	Akron	OH	44320	9/26/2012	Showed dr the Emma profile and if she would prescribe Butrans for a patient meeting that similar description? Dr said she would if the patient is ok with a patch. I told dr that when she feels its appropriate to sell the patient on Butrans. Showed her the patient information guide which will help drive home her point.
PPLPMDL0020000001	Parma	OH	44134	9/26/2012	Dr Hernandez said he just started a patient on Butrans. He asked if, with the trial offer, the patient would often be able to get 2 boxes of Butrans since he writes them for 20mcg two patches at a time, causing the patient to need two boxes for one month. I reminded him that this is not recommended nor has it ever been studied. Also reminded him that 20mcg is the maximum dose of Butrans. He said he knows all that but he prefers to write it that way, even if it is off-label. He requested more Butrans trial cards, so I provided one package. I told him his patient he just told me about would likely only be able to obtain one box of Butrans with the trial offer. Dr Hernandez said he has not been writing as much OxyContin lately. I asked why not. He said he finds that he does not need to now that he can use Butrans for some of these patients.
PPLPMDL0020000001	Cleveland	OH	44122	9/26/2012	Reviewed OxyContin 7 tablet strengths with Dr Rastogi & asked if he currently prescribes all strengths. He said he usually uses 20 & 40mg. I showed him that the 7 tablet strengths allow for individualization of dose for each patient. He said he is comfortable with OxyContin for the right patient. He asked me to review Butrans dosing with him. Gave him initiation/titration guide & showed him how to determine which dose of Butrans would be recommended. Discussed titration ability after 3 days to a maximum 20mcg. Also discussed ability for patients to take supplemental analgesia if necessary. He said he would try to think of patients who he could start today. I asked if he will be seeing anyone who has a chronically painful condition who he is either planning to start on an opioid or is planning to adjust their current opioid medication, also adding that ideally, the patient would have commercial insurance. Dr Rastogi said he is not sure he will be able to find that exact combination but added that he would try as he is interested in starting to use Butrans.
PPLPMDL0020000001	Akron	OH	44312	9/26/2012	Gave dr review of Butrans and asked her if she believes in its MOA? Dr said she does and said she told me on my last visit that that she has a patient or two she is thinking of but has not used it yet. I asked dr what those patients are on currently and she said she thinks Ultram or vicoden. I showed her the two case studies and said that they are ideal candidates if they meet the indication. Showed managed care grid and asked her for some clinical experience.
PPLPMDL0020000001	Bedford	OH	44146	9/26/2012	Dr Moufawad said he has seen recent studies that suggest that patients on 100-200mg morphine can be switched to buprenorphine & that helps improve the patient's function. He said the studies switched patients to Suboxone & results suggested that while the patients' pain score did not improve, their overall daily life functioning was improved. I told him we do not have studies of that sort. He said he knows, but information like this helps him have even more confidence in buprenorphine as a molecule as well as medications that contain it such as Butrans. I asked about his clinical results with Butrans. He said they have gone well. He asked for additional OxyContin savings cards, adding that he continues to prescribe more of it.

	Bedford	OH	44146	9/26/2012	Spoke with pharmacy technician, reviewing Butrans dosing once weekly transdermally. She said she thinks they have a few people who get Butrans. Discussed Butrans patient information booklets & showed her how they can be used to answer questions from customers or counsel them on how to apply/use Butrans. She said they have some books on the shelf. Reviewed savings program for Butrans & gave her information sheet. Also discussed OxyContin savings. She said she would give my information to the pharmacist.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	9/27/2012	Quick message about appropriate patients with Emma and Ultram. I asked dr if he would prescribe Butrans? Dr said possibly but when he asks his patients they are not in favor of a patch. I asked dr to be very selective in his appropriate patients and to sell the product when he knows they meet the indication.
PPLPMDL0020000001	Stow	OH	44224	9/27/2012	Spoke with Cory and he said he is seeing more Butrans, he said he has filled 2 20mcgs this month and a couple of 10s. HE said he has savings cards but most have had them or have been government plans. I gave him patient education for Butrans. they dont see Oxycontin or stock it. Reminded of sen 5 in opioid induced constipation,
PPLPMDL0020000001	Stow	OH	44224	9/27/2012	Reviewed patient profile of patient who is taking Tramadol and not controlled and needs medication change and asked if he has any hesitation of going to BUtrans and he said nothing really, it is covered. I reviewed managed care coverage with Butrans. Reminded of low dose oxycontin in his patients who are on MeD.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	9/27/2012	I asked DR Cinsy if she has any reservations with Butrans. Dr said no she doesnt and seemed like she didnt know what it was! I told her to use the CIII, 7 day transdermal system for her Medco patients on Ultram who need a dose adjustment and meet the indication. Dr Cindy will try to remember.
PPLPMDL0020000001	Stow	OH	44224	9/27/2012	Janet said she has started someone on Butrans, she said she likes the concept of Butran and would like it in alot of her patients. I asked her if she is still seeing alot of BWC and she said yes. I let her know it is still being paid for. I reviewed opioid experienced study and she said she had to get going. Reviewed managed care.
PPLPMDL0020000001	Stow	OH	44224	9/27/2012	Caught Sandra as she was leaving she said she has not written Butrans lately, she said she thought of it in a patients but she cant remember why she didnt. I reviewed managed care changes with Butrans, she had to go
PPLPMDL0020000001	Stow	OH	44224	9/27/2012	Spoke with Gregg and he said they are seeing alot more Butrans. MARcy said she has been doing more PAs but they are getting covered. HE said they are using 10s and 20s and savings cards unless they are government. Reviewed managed care with them and gave patient education
PPLPMDL0020000001	Stow	OH	44224	9/27/2012	Abby said she is having good experience with Butrans. SHE said she had a patient who she has been trying to get a pa since the last time she saw me who is unison and could not swallow and they finally got it approved. She said she would rather write Butrans than a short acting. I reviewed titration and using supplemental. I reviewed managed care and she said that is good about state medical.
PPLPMDL0020000001	Stow	OH	44224	9/27/2012	Dr said he still has not written Butrans, he said he does mainly procedures but would like if patients are referred on BUtrans. he said it is hard to get patients off of short acting. HE said it is hard to get Drs to give patients a c2 right away and I said Butrans is not a C2 it is C3 and he said he did not realize that. I reviewed opioid experience study showing comparison of 5 and 10mcg and importance of titration. Reviewed managed care coverage.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	9/27/2012	I asked pharmacist if he had seen any Butrans prescriptions? The pharmacy has not filled any recently but do have the 5mcg in stock. Provided additional info on dosing and titration.
PPLPMDL0020000001	Stow	OH	44224	9/27/2012	Laura said she just wrote a script of Butrans this morning. She said she has written quite a few lately. she said she is writing it in patients who are taking Vicodin. I discussed titration and supplemental dosing. I reviewed managed care with her and the staff. I reminded her of low dose Oxycontin in her patients taking higher doses of Vicodin
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	9/27/2012	I asked if she prescribed any Butrans recently? Dr said she has not but has a patient in mind she is seeing soon. I asked her about the patient and she said the patient is taking Ultram and has low back trouble. I asked her to prescribe Butrans if the patient fits the indication.
PPLPMDL0020000001	Stow	OH	44224	9/27/2012	Reviewed Oxycontin in her elderly patients showing safety in FPI. Reviewed low doses in her patients who are taking Vicodin or Percocet atc and asked if there is any downfall to going to low dose Oxycontin and she said no, just cost. I reviewed managed care with Oxycontin. Reminded of Butrans in her patients who are not controlled on NSAID or Tramadol
PPLPMDL0020000001	C. Falls	OH	44223	9/27/2012	Spoke to Gary(pharmacist) and asked about recent dispensing of Butrans. Gary said they have had one recently from Narouze but the pain group does not send them much and they are a little miffed about it. I discussed Butrans with Gary and gave him some of the key selling messages. Gary said they have the 5 and 10mcg in stock.
PPLPMDL0020000001	Independence	OH	44131	9/28/2012	Reviewed favorable coverage for Butrans on Medco & Express Scripts & reviewed that BWC is paying for Butrans currently. Dr Jack said "everyone" is writing Butrans now & he has had several patients come in on it. He said it must be the #1 patch for pain prescribed. I told him I have no information on that. He said "no one" is prescribing OxyContin anymore & then went into a room.
PPLPMDL0020000001	Akron	OH	44305	9/28/2012	I asked dr about the age of his patients he has on OxyContin. Dr said the majority of his patients are over 65 and Medicare age. I read the geriatric section from the FPI about the % of patients over 65 and 75 in the trials. Followed that up with AARP and CCRx managed care coverage. I asked dr what criteria he uses to determine a candidate for OxyContin. Dr said when a patient is in severe pain and they are on high doses of Vicodin he will move to OxyContin. Dr said he does see some additional pain relief with the APAP in vicoden so he adjusts the dose of OxyContin accordingly. Dr said he uses all doses but tries to find the lowest dose that provides pain relief and also reduce side effects. Provided all Butrans selling points also including application sites, approximate conversions, appropriate patient types with William, and managed care. I asked dr what his honest opinion is of Butrans. Dr said he doesnt know because he has not used it. I asked dr to try it for his next vicoden patient in moderate to severe pain. Dr said ok but showed no true interest.
PPLPMDL0020000001	Parma	OH	44129	9/28/2012	Quick call- Positioned Butrans for appropriate patients not well-controlled on up to 40mg oxycodone per day & OxyContin q12h for those beyond that dose per day. Dr Rakhit said he had not time & walked away. Spoke with Iryna & reviewed Butrans as a CIII opioid, meaning it can be called in & have refills for it. Reminded her that because Butrans is an opioid, it carries abuse/addiction potential.
PPLPMDL0020000001	Garfield Hts	OH	44125	9/28/2012	Spoke with Heather & reviewed Butrans dosing & ability for patients to take supplemental analgesia. Showed FPI 2.4 for support. She said they stock it & have a few patients on it regularly. I asked if she remembers what any of them were on prior to Butrans. She said she doesn't know & added that she thinks they still take something short-acting with it. Gave her information sheet on Butrans savings program & discussed the program as well as the OxyContin program.
PPLPMDL0020000001	Parma	OH	44134	9/28/2012	Spoke with technician, Jessica, & gave her information on Butrans savings program. She checked her computer & said the have not yet dispensed Butrans at this store. Discussed dosing & patient type. She asked for a package of cards to keep on hand in case someone gets a prescription for it. Gave her one package & explained trial card & savings card, letting her know customers would need the trial card itself, but not the monthly card as their savings would be built in through Relay Health's e-voucher. Also reviewed OxyContin savings cards. She said she had enough of those. Jessica agreed to give the information & my card to Margarita when she becomes not sure because he has yet to use it.
PPLPMDL0020000001	Uniontown	OH	44685	9/28/2012	Told dr to use Butrans for a 7 day transdermal system for patients on short acting opioids who need a dose adjustment. Dr said ok but he has yet to review the info I left him. I asked if Butrans makes sense and he said hes not sure because he has yet to use it.
PPLPMDL0020000001	Akron	OH	44312	9/28/2012	I asked dr Hill if he initiated Butrans yet. Dr said not yet but thinks it is a good medicine. I asked why and he said he likes that its a CIII and transdermal. I asked him to use it and showed him the Emma profile.
PPLPMDL0020000001	Independence	OH	44131	9/28/2012	Quick call- Reviewed OxyContin's broad formulary access with Dr Pai. Also reviewed Butrans coverage on Medco & Express Scripts National formulary, including their Part D segment. He thanked me & walked away.
PPLPMDL0020000001	Uniontown	OH	44685	9/28/2012	I gave quick Butrans to dr through window. Told dr to keep patients with low back conditions on IR opioids who need a dose adjustment to prescribe Butrans. Dr said he continues to keep it in mind.
PPLPMDL0020000001	Akron	OH	44312	9/28/2012	Showed dr the 5mcg Butrans placebo patch and asked him to continue to look for patients on short acting opioids with commercial insurance who need a dose adjustment. Dr said he is trying but the patients who need it are over 65 or have Medicaid. I told him I understand and told him about caresource and BWC.
PPLPMDL0020000001	Akron	OH	44310	9/28/2012	I gave one point on Butrans about patient types. I asked if he could identify a few patients that are currently working who have low back pain and are on IR opioids. Dr said he knows he does. I asked dr to look if any of them need a dose adjustment and to initiate Butrans instead if they meet the indication. Dr said he will try. Spoke managed care with staff
PPLPMDL0020000001	Akron	OH	44319	9/28/2012	Gave dr message at window and asked him if he could identify a couple of patients next week for Butrans? Dr said maybe and said its too much of a managed care headache. I asked why with Butrans? He said not specifically with Butrans but he wants it to be easy. gave thorough review of Butrans managed care and asked him to just use it more for commercial plans with copay and trial cards.
PPLPMDL0020000001	Akron	OH	44307	9/28/2012	Spoke to Jeff the pharmacist about Butrans and OxyContin. Jeff said the almost always have all the doses of OxyContin and dispense it often with the 10, 20 40 and 80 being used the most. I asked about ages of patients and he said anywhere from 20's to 80's get OxyContin. Jeff said they see a good amount from Petrus. Provided Butrans selling points and Jeff said they don't have any in stock.
PPLPMDL0020000001	Akron	OH	44320	9/28/2012	spoke to technician and pharmacist about Butrans. I reviewed all selling points and asked if they have dispensed. The pharmacist said not recently. Gave managed care info.
PPLPMDL0020000001	Parma	OH	44129	9/28/2012	I asked Dr Roheny if he would rather start our discussion with Butrans or OxyContin. He then said he has not yet prescribed Butrans but he does have some patients on OxyContin. He said he was just contacted by Purdue to take some sort of online survey. He said it was asking about what messages are most/least important to him as a physician. I told him I did not know of this survey. I asked what is most important to him in terms of messaging. He did not respond. He said he plans to read an article on pain management this weekend that he saw on Medscape. He said it mentions something about having a pain contract if you prescribe opioids. He said he thought that sounded like a good idea & he thinks he will implement one. I told him about Partners Against Pain resources for HCP's that he can find online. Gave him a webkey. He was very appreciative of this information. He asked for pain scales which I provided. Also gave him my card & let him know if he has questions along the way he can contact me any time.
PPLPMDL0020000001	Independence	OH	44131	9/28/2012	Quick call as Dr Rob paused very briefly in the hallway. Reviewed Butrans dosing & once weekly transdermal system. He just waved & walked away.
PPLPMDL0020000001	Akron	OH	44312	9/28/2012	Dr said he tried Butrans again and it wasn't covered on insurance. I asked him which insurance and what the patient was on previously? Dr said the patient was opioid naive and was on Medicaid but couldn't remember which plan. Dr said insurance said the patient must fail on a short acting opioid first. Dr said he started Ultram. I thanked dr for trying Butrans and that Caresource is the Medicaid plan covered and explained PA criteria. I asked dr to look for patients on commercial insurance on short acting opioids and to use copay cards. Nadia said they have a good amount of patients that are dual eligible.
PPLPMDL0020000001	Parma	OH	44129	10/1/2012	Dr Gigliotti said he wrote a prescription last week for me. I asked if he meant Butrans or OxyContin. He said Butrans. He tried to remember who it was, but said he couldn't think of the specific patient. I asked if he could remember what it was about the situation that caused him to think of Butrans. He said he couldn't but he would try to remember by the next time he saw me. He said the patient had been on something short-acting, but added that they weren't on "too high" of a dose, because he knows if they are on a higher dose, Butrans may not work for them. I added that OxyContin could be considered for those patients if appropriate. Reviewed patient information booklets & discussed using them when he is educating patients about Butrans. He said they would be helpful.
PPLPMDL0020000001	Maple Heights	OH	44137	10/1/2012	Dr Gene said the patient he had told me about with the unusual cyst who he had on Butrans 20mcg doing well has come off it. I asked why. He went on to explain that it had nothing to do with Butrans, but rather the patient's condition had been eliminated after the cyst was surgically removed. He said he intends to put more patients on Butrans & has been keeping his eye out. He said the problem is, once a patient is already on short-acting opioids, it is very difficult, if not impossible, to get them well-controlled on something long-acting. I asked him, then, if he would use Butrans for appropriate patients who he is ready to start on their first opioid. He said he would usually go to tramadol at that stage, but said it actually does make more sense to go to Butrans instead of or before that. He said he would prefer a patient be on Butrans. I let him know he could start these appropriate patients on 5mcg Butrans once weekly & could titrate to a maximum 20mcg with titration ability after 3 days. I showed him clinical background to support titration to 20mcg. Dr Gene said he would do that & would also try it for patients who he is sending to pain management instead of increasing their short-acting. Discussed OxyContin Medicare coverage.
PPLPMDL0020000001	Maple Heights	OH	44137	10/1/2012	Dr Dale said he was too far behind to come back for lunch. Positioned Butrans for appropriate patients who are not well-controlled on up to 80mg equivalent oral morphine per day & OxyContin q12h for those beyond that range. He just said he will keep both in mind & left the room.
PPLPMDL0020000001	Garfield Hts	OH	44125	10/1/2012	Quick call- Positioned Butrans 5mcg for appropriate patients who are not well-controlled on NSAID's or COX-2's for chronic moderate to severe pain & OxyContin for those who could benefit from a q12h dose of oxycodone. Spoke with Deena about Butrans patient type/range & reviewed managed care coverage.
PPLPMDL0020000001	Akron	OH	44333	10/1/2012	I asked dr that since she had Butrans explained in depth to her recently if she feels like Butrans is a product that she would feel comfortable prescribing? Dr said that the patients she sees in urgent care would not be appropriate for Butrans and she said that even though Butrans is a CIII, she feels more comfortable referring out. I told her I appreciate her honesty and asked her to sent referrals with Butrans to pain management.
PPLPMDL0020000001	Parma	OH	44129	10/1/2012	Caught Dr Ortega on his way out of the office. He said he did not have anything new to tell me regarding Butrans or OxyContin. He said he continues to prescribe both "every day". Spoke with Cindy & reviewed Butrans patient type/range & OxyContin as a possible option for those beyond the Butrans range.

PPLPMDL0020000001	Fairlawn	OH	44333	10/1/2012	Spoke to Jessica and Sue about Butrans and OxyContin dispensing. Sue told me that they have noticed an increase in patients filling Butrans and OxyContin since Lefkowitz retired. They have seen more activity from Fouad and Shah and Jessica told me that many of Lefkowitz's patients also went to Bressi's office. They also continue to fill OxyContin and average age is fairly broad Sue told me. Anywhere from mid 20's to 80's all doses.
PPLPMDL0020000001	Akron	OH	44333	10/1/2012	Spoke to Dr and Marsha Fox about Butrans on Medco, Medical Mutual and ESI. Dr and Marsha said they have all those plans and CareSource. I explained to Marsha about the PA for CareSource and she said that it is easy. Marsha said that they have many additional patients from Lefkowitz's office who have BWC and CareSource. I asked dr to place patients on Butrans when they meet the indication.
PPLPMDL0020000001	Akron	OH	44333	10/1/2012	Spoke to dr and Jen about the most recent prescriptions of Butrans. I asked dr if he remembered the patient type and medicine the patient was on when Butrans was initiated. Dr said he can remember that one was on vicodin 30mg/day and he initiated on the 10mcg. Dr said patient has low back spinal conditions. I reminded dr that low back pain patients were included in the Butrans trials. I spoke to Jen about the Butrans patient information kits and provided a few to her. Jen said they will come in handy.<font color=blue><b>CHUDAKOB's query on 10/12/2012</b></font>When do you think the doctor is thinking about Butrans for his patients. In other words, what has to occur in the exam room for the Dr. to prescribe Butrans for a patient? Once you determine this, you can build upon it.<font color=green><b>REICHCL's response on 10/15/2012</b></font>He is thinking of Butrans when he sees a patient in chronic pain and the patient needs a dose adjustment. He told me this in a lunch.<font color=blue><b>CHUDAKOB added notes on 10/23/2012</b></font>Does that mean a dose adjustment after Vicodin 5mg q6h, or after 7.5mg q6h. There are many scenarios of dose adjustment that can occur. Try to get a specific as possible to help with his thought process. If he is thinking after any dose adjustment, he would be prescribing every day. He is doing something else first before Butrans.
PPLPMDL0020000001	Parma	OH	44129	10/1/2012	Caught Dr Taylor at the window. I asked her when the last time was that she had to adjust a patient's chronic opioid medication. She said it has been awhile but added that she will consider Butrans when it does occur. She said she has all the information she needs, she just needs a patient. Reviewed dosing & titration. Also reviewed broad OxyContin coverage.
PPLPMDL0020000001	Akron	OH	44305	10/1/2012	Showed dr the Emma case study and asked if he had identified any additional patients for Butrans. Dr said that he had not but he is trying to remember it when he is in with a patient on short acting opioids. I gave dr a couple of Butrans initiation and titration guides to place in his exam rooms to keep it front of mind. Dr said that he would remember Butrans.<font color=blue><b>CHUDAKOB's query on 10/12/2012</b></font>I think you would agree that a next call objective of discussing more managed care plans may be futile if he is prescribing such a minimal amount of Butrans. Is he sold on the product itself?<font color=green><b>REICHCL's response on 10/15/2012</b></font>He is sold on the product.<font color=blue><b>CHUDAKOB added notes on 10/18/2012</b></font>It is good to see you are working on the profiles. My thought is, if he is sold on the product, then he would be prescribing more. The proof of being sold on a product is his willingness to "buy", ie. prescribe. While managed care might play in, I am guessing he has some of the right managed care coverage. Keep working on selling him. The clinical data will provide the proof.
PPLPMDL0020000001	Maple Heights	OH	44137	10/1/2012	Spoke with Dawn & reviewed Butrans patient information booklets, showing her application/rotation instructions. I let her know they can be given to patients, potentially minimizing the number of call-backs to them asking how to use it. She said she would give the information to Jim when he was not as busy. Discussed OxyContin savings program & usage requirements. She said they have enough cards.
PPLPMDL0020000001	Akron	OH	44303	10/1/2012	Primary objective was to speak about product managed care coverage. Discussed Med D and commercial plan coverages for OxyContin. Discussed Butrans commercial plans, BWC and CareSource. Rod said that he doesn't have too much trouble getting OxyContin coverage and still has not dispensed Butrans.
PPLPMDL0020000001	Garfield Heights	OH	44125	10/1/2012	Spoke with technician (Sherry?) who said the pharmacist wasn't available. Gave her information on Butrans savings program & discussed eligibility requirements for savings card usage. Also showed her OxyContin savings cards & discussed usage/eligibility. I asked if they have many cash-pay customers there with no insurance. She said they have some. Explained that OxyContin savings cards can be used once every 14 days for cash patients to maximize their savings. She said she would pass the information along to Heather & Dave.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	10/4/2012	Discussed Butrans initiation and titration with Jackie and appropriate patient types. Jackie said she forgot where it is used and thanked me for the information.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	10/4/2012	I asked dr what doses of OxyContin the majority of his patients are on? Dr said he uses all of them but the 40, and 60mg doses are most often used. I told dr to continue to use the OxyContin copy cards. I also told dr to use OxyContin for his AARP and CCox plans for Med D.
PPLPMDL0020000001	Bedford	OH	44146	10/4/2012	I told Dr Moufawwad that I wanted to discuss titration of Butrans with him so that I could better understand how/when he is doing it & perhaps help in learning how I might explain it to my primary care physicians better. He said he starts patients & then follows up with them in 3-4 weeks to decide if he needs to titrate them. He said he starts patients taking 3-4 Vicodin per day on the 5mcg & allows supplemental analgesia while he starts patients taking more than that on the 10mcg, also allowing supplemental analgesia. He said at the 3-4 week follow-up, he decides whether or not to titrate Butrans. I asked how this decision is made. He said if the patient is not getting adequate pain relief, he titrates them upward.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	10/4/2012	Asked for dr at window with Janet and he walked by. I handed dr the opioid experienced trial and asked dr if he is finding himself titrating Butrans in order to achieve the appropriate level of pain control? Dr said he has needed to titrate a few patients. I told him about how almost 50% of patients achieved at least 30% reduction in pain on 20mcg compared to the 5mcg dose. Dr said he will review.
PPLPMDL0020000001	Parma	OH	44129	10/4/2012	Myra said she has wanted to use more Butrans but it has just been "such a hassle". I asked what she means by that. She said it is insurance & also patients have been going online & saying they don't want to try Butrans after reading about it. I asked what reasons they give for not wanting to try it. She said they are afraid of the side effects & think it won't work. Re-enforced where Butrans is covered (BWC, commercial insurance) & walked her & Ruth through how to use the trial & savings cards. Ruth said a patient with Medco reported back that they had a \$50 co-pay for Butrans. Explained that if the patient gave the pharmacy the savings card, they would have gotten the first month at no cost & each month after that at \$15. Ruth said she had not understood the card, so it was helpful to have it explained. Myra said she would not give up on Butrans because she thinks so many patients can benefit. She said there are many patients who wake up at night to take their Norco & Butrans could help them since it delivers the medication for 7 days. Myra said she allows supplemental analgesia & then tries to decrease the short-acting while possibly increasing the Butrans. I told her she is doing the right thing clinically & asked her if she would please continue to identify appropriate Butrans patients & prescribe. She said she gave quick overview of the product. Lead by telling dr that I wanted to prove efficacy, tolerability and titration with Butrans. Discussed Inclusion and Exclusion criteria and asked dr if she treats patients with those conditions. Dr and her ma said all the time. I went into the explanation of case study William and asked her if Butrans was not out yet and a patient like William told her that he needed more pain control what would she do. She said a patient like that on about 30mg a day of vicodin she may not titrate it but move to percoet. I asked her if it makes good clinical sense to use Butrans in that position to provide a controlled release analgesia. Dr said it does and that is where she would use it. I used the new supplemental analgesics and titration guide to discuss proper initiation and titration along with use of supplemental analgesia. I asked dr if she now will use Butrans for a patient like William? Dr said she feels much more comfortable with it now and agreed to remember it and use it. gave overview of managed care, copay and trial card.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	10/4/2012	I provided a review of the opioid experienced inclusion and exclusion criteria and asked dr if she sees patients with these conditions? Dr said she does quite a bit. I asked if she has patients on vicodin around the clock? Dr said she knows she does. I asked if ALL of them were without pain? Dr said no. I showed and discussed William case study and asked dr the next time she sees a patient like William to initiate Butrans instead of titrating the short acting. Dr agreed and asked about managed care. I told dr that her number one plan is Medco. I gave her all the Medco and copay card information.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	10/4/2012	Gave dr an overview of Butrans and reviewed the inclusion criteria from opioid experienced trial and asked him if he sees patients with those conditions? Dr said he does. I showed William and asked what he currently is doing when a patient like William needs a dose adjustment. Dr said depending on the dose he will titrate or refer out. I spoke to dr about how Butrans is the appropriate option because if the short acting is not working, a controlled release product is appropriate. Dr said again he has spoke to a few patients and agreed to again.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	10/4/2012	Spoke to Patrick about Butrans titration with new titration piece and use of supplemental analgesia. I also talked to him about proper starting doses. Patrick thanked me for the information and said they are continuing to see Butrans and filling the 10mcg most often.
PPLPMDL0020000001	Akron	OH	44310	10/4/2012	I gave quick review of Butrans and showed him the inclusion criteria for opioid experienced. I told him that when he is examining patients with those conditions and a profile like William to think Butrans when a dose adjustment is necessary. I asked dr what his thoughts are on Butrans? Dr said he thinks its a good medicine but does not like dealing with chronic pain. I told dr that patients with the conditions we spoke about should be controlled with a controlled release medication. The CIII, 7 day system is suited for such patients.
PPLPMDL0020000001	Akron	OH	44312	10/5/2012	Started call by discussing conditions that were studied with Butrans in the opioid experienced trial. Reviewed inclusion/exclusion criteria, Emma and William case studies, reviewed both studies and focused on the pain score reductions. Discussed the new titration and supplemental analgesia piece, spoke about appropriate initiation based on level or short acting opioids. Finished with managed care and trial offer and copay cards. Dr said that he WILL be using Butrans for his vicodin patients and will gain experience clinically.
PPLPMDL0020000001	Akron	OH	44319	10/5/2012	Spoke to Thomas about Butrans appropriate patient types explaining the inclusion and exclusion criteria. I discussed appropriate initiation doses based on the dose of short acting conversions. Gave him some managed care updates as well.
PPLPMDL0020000001	Akron	OH	44319	10/5/2012	Spoke to Geoff about Butrans and discussed the appropriate patient types and conditions studied for Butrans with the inclusion and exclusion criteria. I also discussed the appropriate initiation dose for the mg of short acting product. Gave managed care updates and they have it in stock but have not dispensed it.
PPLPMDL0020000001	Uniontown	OH	44685	10/5/2012	Showed dr the inclusion criteria for the opioid experienced trial and asked him to look for conditions like the ones discussed in his practice. Gave quick review on appropriate patient types and spoke about patients like Emma and William. Showed titrations schedule and asked dr if he has titrated patients. Dr said the last two patients he put on Butrans he titrated to the 20mcg dose and are doing well.
PPLPMDL0020000001	Akron	OH	44310	10/5/2012	I gave dr the opioid experienced trial and gave quick review of inclusion criteria. I told him about case study William on hydrocodone who may need a dose adjustment. I asked him to use Butrans instead of increasing the short acting and if he would do that? Dr said that is where he has used it before and will continue.
PPLPMDL0020000001	Akron	OH	44310	10/5/2012	Told dr that I wanted to give him information about conditions that patients suffered from in our Opioid clinical trial. I reviewed the inclusion/exclusion criteria and told him that 62% of patients were on Hydrocodone combinations. Went into the William case study and asked him if he sees patients like this? Dr said he does. I asked him instead of titrating the IR opioid when a dose adjustment is necessary, use Butrans. Dr agreed that he will look more often.
PPLPMDL0020000001	Akron	OH	44312	10/5/2012	Started call by discussing conditions that were studied with Butrans in the opioid experienced trial. Reviewed inclusion/exclusion criteria, Emma and William case studies, reviewed both studies and focused on the pain score reductions. Discussed the new titration and supplemental analgesia piece, spoke about appropriate initiation based on level or short acting opioids. Finished with managed care and trial offer and copay cards. Dr said that he WILL be using Butrans for his vicodin patients and will gain experience clinically.
PPLPMDL0020000001	Akron	OH	44319	10/5/2012	Dr said he does not prescribe OxyContin as a new start anymore. He said it is too much trouble than its worth. I explained Butrans and reviewed the inclusion criteria and discussed Emma and William. I asked if he would prescribe Butrans for those types of patients? I reminded him it is a CIII. Dr said maybe and will look over the info I left.
PPLPMDL0020000001	Fairlawn	OH	44333	10/8/2012	Reviewed the appropriate patient types with Sue and pharmacist. Discussed inclusion criteria for Butrans on 3015. Spoke about hydrocodone combination patients being appropriate for Butrans when they meet the indication. checked copay cards and reviewed the OxyContin managed care coverage for Med D plans.
PPLPMDL0020000001	akron	OH	44333	10/8/2012	I reviewed the BUR 3015 inclusion criteria and asked dr if he can think of any patients with any of those conditions that would meet the indication for Butrans? Dr said he has slim pickings but he can think of a few. I discussed the William case study along with the 62% of patients from study taking hydrocodone. I asked dr if he will continue looking for appropriate patients and he said he would.
PPLPMDL0020000001	Beachwood	OH	44122	10/8/2012	Focused Dr Myton-Craig on appropriate patients who are employed, with insurance like Medical Mutual or Medco, taking tramadol around-the-clock, not well-controlled, suffering from conditions such as osteoarthritis or spinal stenosis (showed inclusion criteria). I asked why not consider once weekly Butrans for those patients. Reminded her that they can take supplemental analgesia if necessary. She said she has a patient who works for the school system, with good insurance, who is on OxyContin now, but is open to medication adjustments. She said she thinks he would be a good candidate for Butrans. I asked what dose he is on. She said 20mg. I showed her titration piece & pointed out that this patient would likely start at the Butrans 10mcg dose, with supplemental analgesia (immediate-release opioid or non-opioid medication) if necessary. Also showed that she can titrate after 3 days to 20mcg. She said she would do this. I asked her to be sure to give him a trial card.
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PPLPMDL0020000001	Fairlawn	OH	44333	10/8/2012	Spoke to Joanne(tech) and Gary about Butrans. Joanne did not know of Butrans. I provided overview of product, indication, dosing, titration, appropriate patients, and application sites. Gary said they do not stock Butrans currently and have not dispensed any recently.
	Hudson	OH	44236	10/8/2012	Dr Russ said he does have a couple of patients on Butrans. He said one he put on it then sent to pain management & the other is doing well on it. I told him it sounds like he is choosing good patients & also that his positioning of Butrans is appropriate. Reviewed appropriate patient type/range including OxyContin as an option for appropriate patients beyond that range & discussed importance of selecting the appropriate starting dose for each patient based on their current therapy. Discussed titration after 3 days to a maximum of 20mcg/hr. Dr Russ said he is referring more to pain management, but often patients are sent back to him to maintain on medications. I asked him to continue to use Butrans in the patient type he has been trying it in. He said it is "in his brain" & it is just a matter of having the right patients. Reminded him to utilize trial & savings cards for Dr Seiple said he has tried Butrans for a couple of patients & he thinks it is a good drug. He said the first patient he tried it on had been on oxycodone several times per day. I told him this patient was likely out of the recommended range of Butrans patients & suggested OxyContin for that type of patient. He said that patient was already on it plus IR oxycodone. Positioned Butrans for appropriate patients not well-controlled on tramadol or Vicodin 3 times per day, especially if they are asking for more medication or some sort of adjustment. Discussed titration after 3 days to a maximum 20mcg. Also discussed supplemental analgesia & managed care/trial cards. Dr Seiple said he refers to pain management when possible but still ends up maintaining patients because sometimes pain management won't accept them. He said he hates this & wishes he did not have to do this. He said some of them are taking Percocet 3 times a day & want more. Suggested that some of them may be candidates for Butrans 10mcg. He said he has a female patient coming in today who he may try Butrans for.
	Hudson	OH	44236	10/8/2012	Dr Tosino said he has a couple of patients who he has put on Butrans. I asked if they are still on it. He said he thinks so. Discussed appropriate range of patients, including OxyContin as an option for appropriate patients beyond the Butrans range. Also discussed the importance of selecting the appropriate starting dose for Butrans & discussed how most patients on a short-acting opioid chronically would be candidates for Butrans 10mcg. Discussed titration ability at 3 days to a maximum 20mcg. He said he is not afraid to titrate Butrans & would not take a patient off it if they were not completely well-controlled on it at first. He said he would prescribe it, then have phone follow-up with the patient after one week. He said at that point he would either titrate them or keep them at the same dose for the remainder of that month & would reassess at their month follow-up. Told him it sounds like he is doing the right thing. Discussed trial/savings cards, reminding him to give them to commercially insured patients.
	Akron	OH	44333	10/8/2012	Used Carol on new patient assessment piece to help to identify additional patient types. I discussed the case studies patients information and asked dr if he would place this patient on OxyContin 30mg. Dr said he would and does it for the most part for patients in that situation. Reviewed Managed care with Jen and discussed plans for part D.<font color=blue><b>CHUDAKOB's query on 10/21/2012</b></font>Did you discuss Butrans? I don't see it in your call notes.<font color=green><b>REICHCL's response on 10/22/2012</b></font>I did but only how his patients are doing on Butrans as he was beginning to walk away and he didn't give me a response. That is why I did not put it in the notes.<font color=blue><b>CHUDAKOB added notes on 10/23/2012</b></font>Ok. Thanks.
	Hudson	OH	44236	10/8/2012	Spoke with Bob, pharmacist, who said he currently has the 5mcg Butrans in stock. I asked if the customers who he knew on it were still taking it. He said he thinks so. He said he noticed one customer who was on 20mcg was on it for about a year is no longer on it but did not know why she discontinued. Discussed titration of Butrans after 3 days if necessary to a maximum 20mcg. Also discussed OxyContin 7 tablet strengths. Let him know intermediate doses offer dosing/titration flexibility. He said he stocks all but the 80mg.
	Akron	OH	44305	10/8/2012	Went to the William case study today and used the BUP 3015 inclusion criteria and told dr that 62% of patients were on hydrocodone. Reviewed William case study and asked dr if he sees conditions like the ones in the study and if he has patients on vicoden that meet the Butrans indication. Dr said he does and said he needs to continue to look for Butrans candidates. I showed him the new titration/supplemental analgesia card and asked him to titrate if needed to avoid dose failure.
	Solon	OH	44139	10/8/2012	Pointed out to Dr Zaid that OxyContin has favorable managed care coverage, including on Medicare D formularies. Also let him know that patients on CCRx & AARP can get OxyContin for the lowest branded co-pay. He asked if he would have to prior authorize it. I told him not on those plans, but on some Medicare D plans he would have to do that. I asked Dr Zaidi if his main concern with Butrans is still that it will put patients into withdrawal. He said yes. He said pain management is not simple. He said it might be good for an opioid naive patient but not for someone who he also has on oxycodone. I pointed out that patients in Butrans clinical trials were allowed to take oxycodone as supplemental analgesia. I asked if this helped convince him that that was an option. He said part of the problem is convincing the patient. He said they sit around with their friends & perhaps hear that Butrans doesn't work & that they should get Percocet or something. I asked if he has offered it to a patient who said that. He said he has offered it to some patients who have not wanted to try it & who have requested Percocet first. Dr Zaidi said he is sure he will find a place for Butrans at some point.
	Akron	OH	44333	10/8/2012	I follow up again on discussion about BUP3015. I asked dr if he reviewed it and he said he did. I asked him what his thoughts are and if he had any questions? Dr said it was straight forward and he expects for the 20mcg patch to produce a higher percentage of patients with pain control. I reviewed the inclusion criteria and told him that 62% of patients in the study were on hydrocodone combinations. I asked him to prescribe Butrans for patients like that that need a dose adjustment. Dr confirmed with me that Butrans is a mixed agonist/antagonist like suboxone. I pulled out the new FPI and showed him the clinical pharmacology and reviewed the Mechanism of Action. Dr said that when he looks up Buprenorphine in his med list it shows it as a mixed product. I told him that must be the oral buprenorphine. Butrans transdermal system in the 5, 10 and 20mcg/h is not a mixed agonist/antagonist.<font color=blue><b>CHUDAKOB's query on 10/21/2012</b></font>Cliff. Buprenorphine is buprenorphine. When he tells you that he looked up Butrans and it tells him something different, your only recourse is to show him our FDA approved FPI. Telling him that it must be the oral formulation of buprenorphine is discussing another product that we do not have any information on and may be providing him misinformation. It is very important not to do this. If you have any questions on this, please let me know.<font color=green><b>REICHCL's response on 10/22/2012</b></font>I understand. Thanks for the clarification.<font color=blue><b>CHUDAKOB added notes on 10/23/2012</b></font>Thanks for helping us remain compliant.
	Independence	OH	44131	10/9/2012	Focused Dr Sundaram on appropriate patients who he trusts, that are working, with insurance through work, who are taking tramadol, hydrocodone, or oxycodone 3 times per day for a chronic condition such as osteoarthritis or spinal stenosis. Positioned Butrans 10mcg for those patients where appropriate, showing him titration piece. I pointed out that based on the patient population he has told me he has, he would start most patients at 10mcg. Also let him know that in 3 days, he can titrate Butrans to 20mcg if necessary, also keeping in mind that supplemental analgesia can be permitted. I asked him to identify a patient like this & prescribe Butrans & also give them a trial/savings card so they had little or no money to pay out-of-pocket. He said he would do his best. Also asked him to continue prescribing OxyContin in appropriate patients, reminding him of 7 tablet strengths for flexibility in dosing/titration. He agreed.
	Middleburg Heights	OH	44130	10/9/2012	Dr Ignat asked if Medicaid covers Butrans. I asked if he meant straight Medicaid or a managed plan like Caresource. He said he thinks just regular Medicaid "or Medicare". Reviewed Butrans coverage & asked Dr Ignat to focus on working patients with commercial insurance for his best chances of success getting Butrans through. He said he just wrote a prescription for Butrans that got denied by "one of those" plans. I asked what type of patient he had chosen clinically. He said it was a patient taking Percocet around-the-clock. Showed him titration piece & discussed dosing. He said he did start her on the 10mcg. Discussed ability to titrate after 3 days to a maximum 20mcg. I asked him to continue to identify patients like this, but with commercial insurance. He said he would. Asked him to give those patients Butrans trial/savings card with the prescription. Positioned OxyContin for appropriate patients beyond Butrans range, especially if they are already taking oxycodone.
	Independence	OH	44131	10/9/2012	Reminded Dr Trickett of previous conversations about Butrans when she has told me that she tries Butrans for patients who have been on short-acting for a month because at that time, she considers their condition to be chronic. She said that is true. Positioned Butrans for appropriate patients who are working, having either BWC or commercial insurance, who are not well-controlled on 3 doses of short-acting opioid per day. Showed her titration piece & discussed how most of her patients would probably start at 10mcg Butrans due to their dose of current medication. I asked if she was comfortable with titrating to the 20mcg after 3 days if necessary. She said she would. She asked that she allows supplemental analgesia but will titrate if their current dose isn't working. Dr Trickett said she does not know why she hasn't thought of Butrans lately but she will do her best to find a patient. Also asked her to give commercially insured patients the trial/savings booklet so they can try it for littler or no out-of-pocket cost. Reviewed broad formulary coverage for OxyContin.
	Parma	OH	44134	10/9/2012	I showed Dr Hernandez the initiation information for Butrans in the FPI. I asked if this is how he initiates Butrans for some of his patients. He said it depends. He said he often puts patients who were on Opana or OxyContin directly on the 20mcg Butrans. He added that he knows this is not how we say to do it. I agreed. He said he also does not taper their current opioid. I reminded him that we recommend this & asked if his patients have had problems with withdrawal. He said no. He said patients love Butrans & so does he because they get such good relief. I gave him DVD set for meditation/etc. He was appreciative & said it is always good to incorporate treatments other than medications in when treating pain. I asked him to continue prescribing Butrans & OxyContin in appropriate patients & he agreed.
	Parma	OH	44134	10/9/2012	Spoke with Dave & reviewed Butrans dosing, focusing on the importance of the correct starting dose based on the patient's current opioid medication levels. Sowed titration piece & reviewed use of supplemental analgesia if necessary. Let him know IR opioids or non-opioid medications can be used for this purpose. Discussed ability to titrate after 3 days & maximum dose of 20mcg. Discussed OxyContin's 7 tablet strengths, offering flexibility of dosing/titration.
	Northfield	OH	44067	10/9/2012	Spoke with Sun Li & discussed appropriate starting dose of Butrans based on patient current dose of opioid medication. Showed her range of patients & discussed titration after 3 days to a maximum 20mcg dose. Also reviewed use of supplemental analgesia if necessary. Also reviewed OxyContin 7 tablet strengths for flexibility in dosing & titration.
	Cleveland	OH	44130	10/9/2012	Dr Fedorko asked me what I was going to teach him today. I told him I was interested on getting his thoughts on different disease states that cause pain chronically. I asked what conditions warrant treatment with opioids long-term. He said what matters most is if the patient can be trusted. I attempted to show him inclusion criteria, but he said that was all he had time for, added that he does have one patient on Butrans, then walked into I used the FPI to explain the studies with design, outcomes, and results. I asked dr if she has initiated Butrans? Dr said no. I asked her if its possible that she will use it in her practice. Dr said yes but limited. She said that she does not see too many patients in chronic pain. I asked her to identify patients in the inclusion criteria of the studies. Dr said she will continue.
	Cuyahoga Falls	OH	44223	10/11/2012	spoke to dr at window about Butrans. Told dr Butrans is a CIII, 7 day controlled release patch. I showed dr new piece about dosing, titration and use of supplemental analgesia. I asked dr what he is currently doing for patients on 15-40mg of vicoden who present in pain? Dr said it depends on the patient but he will either titrate or refer out. I asked if it makes sense to use Butrans in that position? Dr said it does. I showed him initiation doses based on current opioid therapy. Dr said he will look into it.
	Cuyahoga Falls	OH	44223	10/11/2012	I asked dr if he had initiated Butrans for a patient yet? Dr said no. I asked if it is realistic for him to use it. Dr said maybe sometime. I asked when? Dr said he has not sure. I discussed the inclusion criteria with dr and told him about 62% of patients on hydrocodone combinations. I asked if he has patients on it. Dr said yes. I showed him William and asked him to look for patients like William and prescribe Butrans for them.
	Cuyahoga Falls	OH	44223	10/11/2012	Reviewed new titration/supplemental analgesia card along with inclusion criteria and use of William case study. I asked dr if she sees herself using for a patient like William? Dr said she thinks Butrans makes a lot of sense but she continues to forget. Dr did say that today the information has sunk in better and said she WILL prescribe for a vicoden patient like William. I asked dr if she would place a Butrans conversion slide scale in each exam room and she agreed.
	cuyahoga falls	OH	44223	10/11/2012	Discussed Butrans in depth with indication, dosing, titration, conversions from IR opioids, patient type discussion, use of supplemental analgesia, application sites, trial cards and copay cards. Dr said that he sees the need for Butrans in that vicoden patient who is still in pain and has a chronic condition. Dr said he will look into using where appropriate.
	Cuyahoga Falls	OH	44223	10/11/2012	Spoke with Jenna and reviewed new titration and supplemental analgesia piece. Discussed proper initiation dose based on current therapy dose, proper titration at 72 hours. Reviewed trial offer card and copay card. Jenna said they have not seen too many prescriptions and asked if Western Reserve Pain Mgt were using it. I told her that there are many pain specialist using it in the area.
	Cuyahoga Falls	OH	44221	10/11/2012	Reviewed Butrans dosing, titration, steady state and use of supplemental analgesia. Told pharmacist and technician about managed care access, trial cards and copay cards.



	Brooklyn	OH	44144	10/12/2012	Reviewed 7 tablet strengths of OxyContin, pointing out the 15, 30, & 60mg doses. He said he does always tend to forget about them. He asked me about Butrans dosing. I showed him the 3 strengths & showed him how he could determine the recommended starting dose for Butrans for a patient based on their current opioid medication dosing. He said "almost no one" would fall into the 5mcg recommended starting column. I agreed that most patients would likely start on the 10mcg. Showed titration piece & discussed use of supplemental analgesia. I told him supplemental analgesia could be IR opioids or non-opioid medications & pointed out that in clinical trials, patients were given acetaminophen or ibuprofen. He said this was an interesting detail. Discussed Butrans as a CII opioid with abuse/addiction potential. He said he can't believe he did not realize that Butrans was CII until now. He said he is more likely to prescribe it knowing that because he thought it was CII. He said he recently went to a conference from a DEA speaker who said all physicians should be doing urine drug screening & using pain contracts as well as running OARRS. He said he currently uses OARRS, but does not do drug screens or contracts. I asked if he was interested in contracts & other resources for physicians who treat pain. He said yes, so I gave him information for PurdueHCP.com.<font color=blue><b>CHUDAKOB's query on 10/21/2012</b></font> WOW! Looks like you are progressing nicely with him. Persistence pays off. Keep up the good work. Every time time you are in there is one step closer to him prescribing Butrans for an appropriate patient.<font color=green><b>APSEGAS's response on 10/22/2012</b></font>Thank you.<font color=blue><b>CHUDAKOB added notes on 10/23/2012</b></font>Nice work!
PPLPMDL0020000001	Parma	OH	44134	10/12/2012	Spoke with Cindy & reviewed Butrans appropriate patient type/range, showing her table in initiation guide. Discussed that most patients will start at 10mcg Butrans, especially if they are already taking an opioid medication. Also let her know titration ability is after 3 days, with Butrans reaching steady state in 72 hours. Discussed Butrans 20mcg as maximum dose due to increased risk of QTc interval prolongation. Discussed OxyContin's 7 tablet strengths, pointing out intermediate doses.
PPLPMDL0020000001	Brooklyn	OH	44144	10/12/2012	I asked Dr Miguel what he thought the reason(s) were for not having written Butrans yet. He said he doesn't know. He said pain management uses a lot of it. I told him a variety of specialties, including primary care, have found a place for Butrans since so many types of physicians treat patients with painful conditions. I showed him the appropriate patient range & titration piece. I reminded him that he had told me that he usually puts patients on 2 Vicodin per day. He said yes & that that is the maximum he does. I showed him that this patient could start at 5mcg Butrans & also added that they could be titrated after 3 days to a maximum 20mcg. Discussed ability for patients to use supplemental analgesia in form of IR opioid or non-opioid medications. I asked Dr Miguel to identify a couple patients from his practice to start on Butrans. He agreed. Showed OxyContin 7 tablet strengths & broad formulary access. He said he doesn't really use it.<font color=blue><b>CHUDAKOB's query on 10/21/2012</b></font>Ashleigh, can you please clarify what you meant by the statement below?" also added that they could be titrated after 3 days to a maximum 20mcg."<font color=green><b>APSEGAS's response on 10/22/2012</b></font>I was showing him the titration piece & pointed out how after 3 days, Butrans can be titrated to 10mcg, & then to 20mcg after another 3 days if necessary.<font color=blue><b>CHUDAKOB added notes on 10/23/2012</b></font>Ok. Thanks for the clarification. Your call notes made it look like the physician
PPLPMDL0020000001	Cleveland	OH	44130	10/12/2012	Dr Kansal said he was too far behind today for a talk. Positioned OxyContin for appropriate patients who could benefit from q12h dosing of oxycodone & asked him to give out Butrans patient experience kits to get some clinical experience & feedback. He said he was "trying" & then walked away.
PPLPMDL0020000001	Parma	OH	44129	10/12/2012	Dr Roheny said he hasn't prescribed Butrans yet. I asked him why not. He said he doesn't know. I told him there is obviously something missing because if he thought his patients could benefit from Butrans he would be at least trying it in a few patients. He asked me to review what plans he can write it on again. Reviewed commercial insurance coverage & discussed Caresource prior authorization requirements. I asked him, the next time a patient with commercial insurance, who has a chronically painful condition, taking 3 hydrocodone per day, asks for an increase in dose, will he tell the patient no & initiate them on Butrans at 10mcg if appropriate. He didn't answer. Reviewed trial cards & ability to take supplemental analgesia if necessary in the form of IR opioid or non-opioid medications. I asked him what they would have to lose. He said nothing. I gave him instructional tear-off pad & walked him through instructing patients how to apply Butrans as well as rotation. I asked him to just try it. He said he would do his best. Reviewed broad OxyContin formulary coverage.
PPLPMDL0020000001	Parma	OH	44129	10/12/2012	Dr Gigliotti said he just started another patient on Butrans on Wednesday. I asked if he remembers what made him do that. He didn't answer. I asked what dose he started the patient on. He said he thinks 10mcg. I told him that most of his patients would probably start on the 10mcg, depending on their current dose of opioid medication & showed the range. Showed titration piece & asked if he has any concerns titrating after 3 days if the patient is not getting adequate pain relief. He said he will give the patient 20mcg if they call back or come in saying it is not working. He said he knows he will find more patients. He also said he is still writing OxyContin.
PPLPMDL0020000001	Independence	OH	44131	10/12/2012	Quick call at the window- Passed back OxyContin piece & pointed out 7 tablet strengths. Reviewed flexibility of dosing/titration. He said he still writes it all the time. He added that he isn't using Butrans because it is too expensive. Passed back formulary grid. He walked away.
PPLPMDL0020000001	Brooklyn	OH	44144	10/12/2012	Spoke with Rhonda, who said she hasn't seen anyone come in with any Butrans prescriptions lately. I asked if they fill many prescriptions for short-acting opioids like Vicodin, Percocet or tramadol. She said they do. I asked if they are often refills month after month for the same people. She said yes. Rhonda said since they have so many older customers, they see a lot of patients getting prescriptions for pain from conditions like osteoarthritis. Showed inclusion criteria for Butrans studies & let her know this is the same type of patient we looked at in Butrans trials. She said she would share this information with the pharmacist. Reviewed 7 tablet strengths of OxyContin, explaining that the intermediate strengths allow for flexibility in dosing & titration.
PPLPMDL0020000001	Barberton	OH	44203	10/12/2012	Spoke to dr about Butrans and the hydrocodone patient. Explained the William case study and asked dr to look for patients already on hydrocodone with increasing pain. I asked dr instead of titrating the hydrocodone to prescribe Butrans. Reminded dr to use the Butrans patient experience patient. Dr said ok and he will continue to use.
PPLPMDL0020000001	Uniontown	OH	44685	10/12/2012	Dr said he prescribed Butrans about 1-1 1/2 weeks ago for an opioid naive patient on NSAIDs and Ultram. Dr initiated on the 5mcg and patient called in and said he was still in pain. Dr increased dose to 10mcg and patient said he was still in pain. Dr said that Butrans was not covered for the patient anyway. Discussed private prescription plan coverage. Discussed with dr the initiation doses, proper titration, and use of analgesics. Discussed inclusion criteria for opioid experienced patients and asked dr to look for patients with those types of conditions who meet the indication for Butrans. Dr said he will continue to
PPLPMDL0020000001	Brooklyn	OH	44130	10/12/2012	Spoke with pharmacist Danielle, & showed her Butrans titration piece. I asked if she knows if they currently have anyone still taking Butrans since she has told me previously that they have customers on it. She said there is one person she can think of but the others have discontinued. I asked her what strengths the patients who discontinued had been on. She looked in her system & said the patient currently on Butrans is on 20mcg, but it looked like the ones who discontinued had been on the lower strengths, usually 5mcg. I told Danielle this was not surprising & reviewed the patient type/range, letting her know fewer patients in clinical trials discontinued on 20mcg than 5mcg. Discussed ability to titrate after 3 days to a maximum of 20mcg. She said this made sense. I asked her to bring this to the attention of physician/patient if she is given the opportunity so they are getting a fair trial of Butrans. She agreed. Discussed OxyContin 7 tablet strengths & savings program. She said they still have cards.
PPLPMDL0020000001	Akron	OH	44319	10/12/2012	Talked with Dr Wun about Butrans patient type William from case study. I asked if he currently has patients on hydrocodone. Dr said he does. I used inclusion criteria from BUP 3015 and initiation and titration piece. I asked dr to take patients presenting to him in pain on hydrocodone and use Butrans for those patient that meet the indication. Dr asked about insurance coverage for his patients. I discussed the plans for his practice and spoke about trial offer cards and copy cards.
PPLPMDL0020000001	Barberton	OH	44203	10/12/2012	Used the Sam OxyContin profile to discuss OxyContin and reviewed reasons for the Q12h OxyContin. Explained the reasons why the patient was appropriate for OxyContin. Dr said that that is where she typically will use OxyContin. Explained Med D plans. Gave quick patient type for Butrans with vicoden patient and discussed inclusion criteria. Dr said she will try Butrans.
PPLPMDL0020000001	Akron	OH	44303	10/12/2012	Email sent requesting a meeting to discuss pain management and risk management educational resources. This was a follow-up to Dr. Mary Cook meeting with Dr. Ashbury at the American Osteopathic Association meeting in San Diego (October 2012). Dr. Ashbury's focus is geriatrics and Long Term Care.
PPLPMDL0020000001	Akron	OH	44303	10/15/2012	I asked Rod if he has dispensed Butrans yet? Rod said he has not. I asked him who in the area has he dispensed OxyContin for. Rod told me Dr Lababidi, Oyakawa and dr Norman. Told Rod about OxyContin Medicare D plan coverage.
PPLPMDL0020000001	Akron	OH	44320	10/15/2012	Gave dr the specifics of an appropriate patient type that I wanted her to find for Butrans. I discussed the William profile and asked dr to prescribe Butrans for a patient on hydrocodone uncontrolled with caresource.
PPLPMDL0020000001	Akron	OH	44320	10/15/2012	Discussed PA criteria for plan. I asked dr if she will do that. Dr said she will try.
PPLPMDL0020000001	Akron	OH	44320	10/15/2012	Reviewed Butrans 3 doses, CII, titration and appropriate patients. Focused on William case study and asked dr what she is currently doing for a hydrocodone patient uncontrolled. Dr asked about Oxycodone patients uncontrolled. I told dr that the oxycodone patient uncontrolled is a candidate for OxyContin not Butrans necessarily. I told dr to focus on patients on vicoden who have Caresource that are appropriate for an extended release product. Dr asked about starting dose for patients on hydrocodone. Showed dr the approximate conversion chart. I asked dr if she will find patients and she agreed.
PPLPMDL0020000001	Akron	OH	44313	10/15/2012	Spoke to Jason about Butrans and OxyContin. Jason said he is seeing Butrans prescriptions from Norman at 3131 Smith Rd. OxyContin from Oyakawa, Fouad and Lababidi and Wiedman. I told Jason about an appropriate patient type for OxyContin and reviewed the Tom case study.
PPLPMDL0020000001	Akron	OH	44310	10/15/2012	Discussed William case study with dr and Rhonda. I asked dr what he typically does with a patient on hydrocodone who is uncontrolled? Dr said all the patient cases are different but he thinks Butrans is a good option instead of titrating the IR opioid. I asked if there is anything about Butrans that is keeping him from prescribing more often? Doctor said the managed care coverage could be better. I told dr that the path of least resistance is for patients with private prescription coverage and gave him the plans. Dr said he knows that is where he needs to use it and will.
PPLPMDL0020000001	Stow	OH	44224	10/16/2012	Quick call, LAura said she has tried Butrans and could not come back to lunch, is there anything new and I let her know about medicaid change and she apologized but could not stay for lunch
PPLPMDL0020000001	Akron	OH	44312	10/16/2012	Reviewed Butrans appropriate starting dose and proper titration with new piece. I asked if they have seen any recent Butrans and Gary said he has not but he has it on the shelf.
PPLPMDL0020000001	Akron	OH	44312	10/16/2012	Told dr that he should be looking at his patients already on tramadol or vicoden and are still in pain. I asked for Dr McRoberts to prescribe Butrans for those patients if a dose adjustment on the short acting is necessary. Dr said he has not used and wished it was covered on Medicare. I asked dr to look for patients under Medicare age with prescription insurance. Left him with the initiation and titration guide.
PPLPMDL0020000001	Parma	OH	44129	10/16/2012	I asked Cindy what feedback she has gotten on Butrans for patients and/or pharmacies. She said patients seem to really like it. She said most of them are still on it. I asked if Dr Ortega starts someone at 5mcg if he titrates to 10mcg if the patient says it is not working. She said he does & added that he tells them up-front that they may have to go to the next higher dose. I told her this is exactly what he should be doing. She said he has had some patients who have decreased their Butrans dose. She said Dr Ortega uses it as a means to decrease or eliminate their short-acting opioid.
PPLPMDL0020000001	Garfield Hts	OH	44125	10/16/2012	I reminded Dr Sadowski of previous conversations when he told me that ideally he would like to use Butrans in patients who were no longer controlled on NSAID's or COX-2's. He said that is still his plan. I showed him "Jessica" patient profile & pointed out that this is exactly the type of patient we studied Butrans in. I showed him titration piece & pointed out that this patient could start at the lowest dose, 5mcg. Discussed importance of follow-up in 3 days to assess the patient's results & titration if necessary every 3 days to a maximum 20mcg. He said the patient could get adequate relief on 5mcg. I told him every patient is different & that is possible, but that I wanted him to feel prepared to titrate if necessary. Asked him to focus on commercially insured patients. Spent time with Deena & gave her Butrans formulary grid, stressing working patients for Butrans where appropriate. She told me about a patient with insurance who she thinks could benefit from Butrans. I gave her a savings card to put with the patient's chart. She said she would suggest it to Dr Sadowski.
PPLPMDL0020000001	Stow	OH	44224	10/16/2012	Abby asked what is new with Butrans, she said arethere any changes in managed care and I said yes and I informed her of medicaid change and she said that must have just happened because she had a patient who was medicaid. She said she had a patient who was perfect taking Percocet started on 5mcg and her arm swelled up and she took her off, she had never seen a reaction that bad. I showed her side effects. I also talked about dosing and initiation and titration by showing opioid experienced study.
PPLPMDL0020000001					

PPLPMDL0020000001	Parma	OH	44129	10/16/2012	Dr Lin said she has put 2 patients on Butrans but has not heard anything back from them. I asked how soon after starting a patient on a medication she usually has them follow-up with her to let her know how it is working for them. She said she has them call after 3 days. I told her this was perfect since she can titrate Butrans after 3 days. Discussed use of supplemental analgesia in the form of IR opioid or non-opioid medications. She said everyone on a long-acting opioid needs something for breakthrough pain. Dr Lin said if a patient on 5mcg said it was not working, she would titrate them to the next dose. She asked if she can have the patient just put 2 patches on instead of writing a whole new prescription. I told her we have not studied Butrans this way so it is not recommended. She said it just would make sense. I told her again it is not recommended because it has not been studied. I told Dr Lin that in Butrans clinical trials, even patients who were opioid-naïve were titrated up to 20mcg. She asked what the patient population was. I asked her to clarify. She asked if patients had cancer pain. I showed inclusion criteria, pointing out non-malignant pain. She said she would use more Butrans if Medicare covered it because it is ideal for older patients. Dr Lin said she uses OxyContin plus oxycodone for patients in more severe pain. Discussed 7 tablet strengths & q12h dosing. She said she always doses it q12h but forgets about intermediate strengths.
PPLPMDL0020000001	Akron	OH	44312	10/16/2012	I asked dr what the results of his Butrans use have been? Dr said his patients are doing well and Butrans has helped their pain. I asked if he has had to titrate? Dr said not much. I showed him the titration/supplemental analgesia piece and explained how he should titrate and ability to use supplemental analgesia with NSAIDs or opioids. I asked if he is going to continue to prescribe? Dr said he will.
PPLPMDL0020000001	Stow	OH	44224	10/16/2012	Janet came back quickly and said she has not written Butrans this week. I showed her pain reduction in opioid experienced study and also titrating the patients if Butrans is not effective. Reviewed managed care.
PPLPMDL0020000001	Stow	OH	44224	10/16/2012	Dr came in while I was going through clinical study with Leanne and Dr Bressi and was talking about starting doses at 10mcg and if it does not work to titrate and he asked what the coverage is or if any changes and I reviewed managed care and medicaid change.
PPLPMDL0020000001	Cleveland	OH	44130	10/16/2012	Dr said they are going to be using alot more Butrans because of new laws and he is going to write long actings and cut down on Vicodin and Percocet. I said when will you make that decision with the patient and he said when that patient comes in and if they are taking it q6 or more frequent he will put on long acting. HE said he will start with Butrans and then use Kadian or Avinza. HE asked about coverage and we reviewed that. HE said he will still not write Oxycontin regardless of reformulation. HE did ask for patient education for Butrans due to the REMS program.
PPLPMDL0020000001	Stow	OH	44224	10/16/2012	I reminded Dr Fedorko of our last discussion when he told me that he finds it acceptable to treat patients with chronic opioids if he trusts them. I asked how he determines who to trust. He said you can tell by looking at a person & talking to them. He said many patients come in, not able to deal with being in pain for a single day. He said that is how you know they are just seeking drugs. I asked him if he was saying that his established patients are those who are trusted generally, whereas a new patients coming in for pain would be suspicious. He said yes. He said he would like to use more Butrans but can't because of prior authorizations & patients having to fail multiple medications before they can get it. I reminded him where Butrans is covered, re-directing him to working patients with commercial insurance or BWC. I showed him trial/savings cards & walked him through how
PPLPMDL0020000001	Stow	OH	44224	10/16/2012	Dr said he has not written Butrans but he mainly does injections but will listen about Butrans and will write it if he is in the opportunity to. HE said he too is not going to be writing Vicodin and Percocet and supports more long acting. Reviewed amnaged care coverage,
PPLPMDL0020000001	Bedford	OH	44146	10/17/2012	Spoke with Marcy and Mike and they said everything is doing well with Butrans, She said it slowed down a little. They could not run any specifics on how much was written it was too busy. I left some patient education for the patients per request of Dr Bressi.
PPLPMDL0020000001	Akron	OH	44333	10/17/2012	Spoke with pharmacist & showed Butrans titration piece. Discussed ability to titrate after 3 days to a maximum 20mcg. Also discussed ability for patients to take supplemental analgesia with Butrans in the form of IR opioid or non-opioid medications. Pointed out that in studies, we gave patients ibuprofen or acetaminophen for supplemental analgesia. He said he hasn't seen any prescriptions for Butrans. Reviewed appropriate patient type/range. Discussed 7 tablet strengths of OxyContin for flexibility in dosing/titration.
PPLPMDL0020000001	Akron	OH	44333	10/17/2012	Discussed Butrans dosing, CIII, 7 day transdermal. Reviewed titration, conversions from short acting opioids and use of supplemental analgesia. I showed dr the William case study and asked him if he has patients that may meet the indication for Butrans who are taking vicoden. Dr said that his patients with more complex conditions who seem to be in more of a chronic state would be appropriate for Butrans. Dr said he wants to take the initiation and titration guide with the conversion scale to the surgery center. Dr said he will begin looking for candidates. Closed the dr on the appropriate patient with private prescription insurance.
PPLPMDL0020000001	Akron	OH	44333	10/17/2012	Introduced Butrans to dr by reviewing all key selling points including dosing, CIII, 7 day transdermal patch, titration, conversion, use of supplemental analgesia, trial cards and copy cards, and managed care overview. I used the BUP 3015 to discuss trial open label run in, double blind specifics and conclusion with pain score reductions. I discussed appropriate patients with those on tramadol and vicoden. Dr said he can see the use of this product but it will be limited due to the nature of his patients. Most are in acute pain but does have some in chronic pain. Dr said he will consider using.
PPLPMDL0020000001	Bedford	OH	44146	10/17/2012	Dr Moufawad said he just started another patient on Butrans. He added that he is still getting good results from Butrans & patients seem to like it. He said he always gives patients specific instructions on how to use Butrans. I showed him the tear-off pads & asked if he thought they would be helpful. He said they would be even better than the booklets that he uses currently. Dr Moufawad said he doesn't think insurance has been an issue lately for Butrans or OxyContin. Reviewed eligibility requirements for usage of savings cards.
PPLPMDL0020000001	Akron	OH	44333	10/17/2012	Dr said he has a patient in mind for Butrans and it is a guy who is on vicoden who is complaining of pain. Dr said he did not want to increase the dose since he is already on 30mg/day. I reviewed conversions with dr and instructed him to initiate on 10mcg/hr. Dr said he has BWC and wondered about coverage. I told dr about BWC coverage is good and should not be an issue. I told dr that his vicoden patients are ideal candidates for Butrans. I showed him how to titrate and about tapering off the IR opioid after 72 hours. Reminded him about copy cards and trial offer.
PPLPMDL0020000001	BEACHWOOD	OH	44122	10/17/2012	In-serviced pharmacists & staff. Reviewed "Providing Relief, Preventing Abuse" brochure & terms of pain management (addiction, dependence, tolerance). Presented Butrans, discussing buprenorphine, 7 day transdermal delivery, dosing, titration, & ability for patients to take supplemental analgesia with Butrans in the form of IR opioid or non-opioid medications. Showed demo patch & demonstrated disposal unit. One of the pharmacists asked if they could just use 2 of the patches instead of getting a whole new strength. I told him this has not been studied & is not recommended. Presented OxyContin, discussing that it is oxycodone dosed q12h. I asked how many tablet strengths they were aware of. They said they order only the 10 & 40mg. They were not aware of 15mg. Discussed OARRS & abuse/addiction potential of opioids. I asked how OxyContin is currently used at their center. They said primarily orthopedics after a procedure. Spoke with Kylie, pharmacy manager, who said she is on the Ohio Pharmacy Board. I asked how their formulary works. She said the procedure is that a physician submits a letter requesting that a medication be put on formulary. She said to let her know if any of my prescribers wanted to submit for Butrans.
PPLPMDL0020000001	Parma	OH	44129	10/17/2012	Introduced myself & Purdue's products to Dr Kalin. He said he has had some patients who he has put on Butrans & has had success with it. He said he is actually currently fighting for a Medicaid patient to get it because he is not comfortable having her on short-acting because of a prior bad experience she had with Percocet. He said he has had no issue getting Butrans in the hospital, but because the patient population he treats with opioids chronically is older, he can't use it in the office as much as he would like. I asked what about patients who are aged 50-60 with chronically painful conditions. He said that was a good point & perhaps he could use more there in the office. Reviewed managed care grid & discussed trial/savings cards. Walked him through how eligible patients would use each card. I asked what dose he usually starts patients on. He said it depends, usually 10mcg, but 5 if they are opioid-naïve. I asked if he ever has titrated to 20mcg. He said he has not. I showed him clinical studies from FPI & pointed out how opioid-naïve patients were started at 5mcg, then titrated to 10 or 20. Showed pain score reductions. Discussed steady state at 3 days. I asked if he allows supplemental analgesia with Butrans. He said no. I pointed out that in trials, we allowed ibuprofen or acetaminophen for supplemental analgesia. I asked where OxyContin fits in to his practice. He said cancer pain or pancreatitis or for severe pain,
PPLPMDL0020000001	Maple Heights	OH	44137	10/17/2012	Showed Butrans titration piece & reviewed dosing & titration. Discussed steady state in 3 days & titrating to a maximum of 20mcg if necessary. Also reviewed ability for patients to take supplemental analgesia if necessary. Let him know this can come in the form of IR opioid or non-opioid medications. He said this made sense. Discussed OxyContin's 7 tablet strengths, offering flexibility in dosing/titration.
PPLPMDL0020000001	Parma	OH	44129	10/17/2012	Quick call- Caught Elaine on her way out of the office. I showed her Butrans tear-off patient information sheets & showed her how they can be used in her discussions with patients about Butrans, especially in application, rotation, & disposal. She said she would like to use them & that they would be useful. Spent time with Dawn who said they have had 3 new patients started on Butrans this week. She said she wishes more primary care offices would put patients on Butrans before referring them to her office. I let her know I am working on this. Discussed managed care. She said they have had a few Caresource prior authorizations they have had to do, but otherwise, patients are getting it easily. Reviewed patient instruction tear-off pad with Dawn, She said this was good information. Discussed importance of patient counsel & setting appropriate expectations, including that titrating to a higher dose may be necessary. She said she would share this information with Myra also.
PPLPMDL0020000001	Beachwood	OH	44122	10/17/2012	Inserviced Kylie & her staff on pain management (Providing Relief, Preventing Abuse brochure). Also reviewed Butrans & OxyContin. Discussed dosing, titration, indication, patient type/range, & 7 day transdermal buprenorphine delivery. Also reviewed OxyContin as a q12h dose of oxycodone as well as 7 tablet strengths for flexibility in dosing/titration. Kylie said she serves on the Ohio Pharmacy Board. She said Ahuja follows main campus formulary & reviewed procedure for getting medications on formulary there. She said there is a form for a physician requesting it to be filled out which goes to the P&T committee. She said to call or email her if any of my physicians are interested in doing that.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	10/17/2012	Gave quick review of Sam and asked dr if he uses OxyContin for patients on oxycodone. Dr said he does but the patients like the cost of the oxycodone. I showed him Sam again and that he did not want to have to continue getting up to take his pill. I asked dr if he has patients that would be appropriate for a Q12h oxycodone? Dr said that that makes sense and will continue to look at doing that more often.
PPLPMDL0020000001	Parma	OH	44134	10/17/2012	I asked Dr Hernandez what patients are typically taking for pain when they come to him for the first time. He said he is seeing patients come in on Opana or hydrocodone or oxycodone. I asked how many times per day they are usually taking it. He said 4-5. I asked if he sees those patients as Butrans patients. He said he does, especially if they have a chronic condition. Dr Hernandez said he starts these patients all on 20mcg & gets good results. He said sometimes he does find that patients need a higher dose so he has them use 2 of the 20mcg patches at once. Reminded him that we have not studied Butrans this way & therefore it is not recommended. He said he knows. Reminded him that in studies, 2 of the 20mcg patches showed an increase risk of QTc interval prolongation. He said he is not concerned about that because he doses buprenorphine at much higher doses with other medications. I gave him new patient education tear-off pad. He said patients find that to be useful. He said he did not need additional Butrans or OxyContin savings cards at this time.
PPLPMDL0020000001	Parma	OH	44129	10/18/2012	I asked Dr Khoobla about the patient who he had started on Butrans. He said the patient is doing well & is still on it. I asked if when he had written the prescription he had written refills. He said he did- he always gives 3 refills. He said he is very cautious with patients with any type of pain. I asked him to focus only on those patients who he trusts & who have legitimate pain. He said if a patient has back pain, he would send them for a surgery consult & would prescribe hydrocodone for them at that time, not a long-acting opioid. He said if the patient's surgery failed or they were not a candidate for surgery, that is when he would choose a long-acting option. I asked why not start them on Butrans while they are waiting to get in to have the surgery. He said because that is too short of a time & clarified that that only takes a few days to a week. I agreed that this would be too short a time for Butrans. Discussed importance of appropriate patient selection & told him he is doing the right thing by screening his patients & treating only those who are legitimate. He said he would use Butrans for cancer patients. I showed him clinical trial inclusion criteria & pointed out that Butrans was studied in non-malignant pain conditions. I asked him to focus on appropriate patients with these types of conditions, who are age 50-60 & have insurance through work so they can use trial/savings card. Asked him to commit to write Butrans for the right patient- he agreed.
PPLPMDL0020000001	Waterford	OH	45786	10/18/2012	W - Continues to have patient new starts with Butrans after a failure of hydrocodone or when patients are in need of increasing the number of tablets consistently. I - Review of Butrans for appropriate patients who meet the indication when uncontrolled on short acting opioids once the indication is met. Review of Emma/William profiles as patient types that she may treat in her practice. Review of Butrans opioid experienced clinical trial - inclusion criteria, dosing/titration and reduction in pain scores. OxyContin for appropriate patient conversions from IR oxycodone once the indication is met. Review of q12h dosing with 7 dosing strengths. Review of formulary coverage and savings card programs for both Butrans and OxyContin.
PPLPMDL0020000001	AKRON	OH	44304	10/18/2012	Spoke to Rob(pharmacist) about Butrans and OxyContin. Rob did not know about Butrans so I gave all key selling messages and discussed CIII, starting dose, titration, application sites and appropriate patients. Rob has not filled Butrans and only have 5mcg patch in stock. Discussed how the patients over 80mg/day of morphine equivalent are appropriate for OxyContin. Discussed copy cards and patient savings.

	Waterford	OH	45786	10/18/2012	W - Continues to prescribe OxyContin and doesn't normally have any issues with coverage. Likes to start patients low and go slow in order to help identify the appropriate dose for the patient. Only issue he has had with Butrans is getting it covered on plans. Wasn't sure which plans or patient groups he has had the most trouble with getting Butrans covered. I - OxyContin for appropriate patient conversions from IR oxycodone once the indication is met. Review of q12h dosing with 7 dosing strengths. Review of Butrans for appropriate patients who meet the indication when uncontrolled on short acting opioids once the indication is met. Review of Emma/William profiles as patient types that he may treat in his practice. Review of Butrans opioid experienced clinical trial - inclusion criteria, dosing/titration and reduction in pain scores. Review of formulary coverage and savings card programs for both Butrans and OxyContin. In depth review of Butrans coverage with all different patient groups - BWC, Medicare Part D, Medicaid as well as commercial plans.
PPLPMDL0020000001	Parma	OH	44129	10/18/2012	I told Dr Chagin I was there to make a case for Butrans for his appropriate patients who are taking between 30 & 80mg morphine equivalent per day. I pointed out in the FPI that this is the type of patient we studied in Butrans clinical trials. I showed him that pain score reduction for this type of patient. I reminded Dr Chagin that he had told me that patients sometimes don't want to try Butrans because they don't think it will work. I told him I was sharing this information with him in effort to instill some confidence in Butrans in him. Reminded him of patient experience kits & trial/savings cards that he has, pointing out that patients with commercial insurance could try Butrans for little to no out-of-pocket expense. Dr Chagin said he needs to just remember Butrans. I asked him to just try it on a few patients.
PPLPMDL0020000001	Parma	OH	44134	10/18/2012	I showed Emma patient profile to Lynda & positioned Butrans 5mcg with 7 day delivery for appropriate patients like this. I asked what she would normally do with a patient like this. She said she would prescribe tramadol. Discussed Butrans as an option also for appropriate patients who are not well-controlled on short-acting opioids around-the-clock. Lynda said she doesn't have her DEA number yet to prescribe controlled substances, but she plans to get that this weekend since her patient load is increasing. Lynda said she is not comfortable treating pain, mainly due to a lack of training in schooling & while working with Dr Loyke. She said if she can get herself more comfortable with treating pain, she would like to try medications like Butrans. She asked if we have CE courses about pain. I let her know I would see what resources we have available.
PPLPMDL0020000001	Akron	OH	44303	10/18/2012	Introduced Butrans to dr using all key selling points including, CIII, 7 day transdermal patch, appropriate patients with Emma and William and inclusion criteria from BVUP 3015. Dr stopped me and said he will not prescribe Butrans because of all the heat the medical association is giving about use of narcotics. I asked dr if he prescribes Tramadol? Dr said he does. I asked what he does when his patients need more than what tramadol can offer? Dr said he moves to vicoden. I told dr that Butrans is a CIII just like vicoden except it is controlled release instead of immediate release and if a patient is in chronic pain why would a patient be kept on an immediate release product? Dr said that he may use Butrans there and he said he guesses he could see himself using it in that instance. I reviewed managed care and trial cards.
PPLPMDL0020000001	Sagamore Hills	OH	44067	10/18/2012	I asked Dr Mike of the trusted patients who he has who he continues on tramadol or Vicodin if any complain of waking up in pain or complain of their pain being controlled around-the-clock. He said yes. Positioned Butrans with 7 day buprenorphine delivery for appropriate patients. Dr Mike asked how buprenorphine is related to other medications like tramadol, Vicodin, Percocet, and fentanyl. I told him they all work on the mu opioid receptor & all have abuse/addiction potential. He said he finds that sometimes patients will tolerate one opioid but not another or others seem to have tolerability issues with several opioids. He asked if they would also have those issues with Butrans. I showed him FPI rates for adverse events & told him every patient is different. He said he has a patient in mind who has this type of issue with several opioids, but he thinks Butrans could be a good option for him. I asked if this patient has commercial insurance. He said he is Medicare. Dr Mike asked that most patients who they are willing to treat with opioids long-term are older. I suggested he think of appropriate patients who are ages 50-60, with insurance through work, who may benefit from Butrans since they can use the trial/savings cards. Showed him where the cards are kept.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	10/18/2012	I told dr to use Butrans for patients like the William case study who are on vicoden and have Medco insurance. I asked dr to remember Butrans as a medicine for patients who have chronic conditions like those in the inclusion criteria. Dr said she will do her best to remember.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	10/18/2012	Discussed William case study and asked dr again if he can identify one patient on vicoden who is not completely pain free. Dr said he will try. I asked him if he will commit to finding one patient to gain clinical experience. Dr said maybe in due time.
PPLPMDL0020000001	Akron	OH	44313	10/18/2012	Asked dr what he typically does for a patient uncontrolled on vicoden? Dr said it depends on the patient but if they are on a higher dose he will take them to percocet. I asked dr if he would consider moving the patient to Q12h oxycodone? Dr said he does at times but it depends on the patients ability to pay for it vs percocet. I told dr about the broad managed care coverage especially for Med D plans. Dr said ok and he will consider it. I showed him the Butrans initiation and titration guide and asked him to review. <font color=blue><b>CHUDAKOB's query on 10/26/2012</b></font>Cliff, instead of leading with a question, what if you led with a statement like Dr, would it surprise you to know that OxyContin is on a preferred branded tier on 82 % of lives nationally. Could this have a different impact than opening the call with a question?<font color=green><b>REICHCL's response on 11/01/2012</b></font><b>good suggestions</b><font color=blue><b>CHUDAKOB added notes on 11/01/2012</b></font><b>Give it a try. See if the impact is different.
PPLPMDL0020000001	Copley	OH	44321	10/18/2012	Used New titration and supplemental analgesia piece to discuss with Jenna the appropriate starting dose, titration at 72 hours, taper off short acting opioid after steady state and application sites. Jenna asked about using a 10mcg plus a 5mcg patch at the same time. I told her that it is not recommended per the FPI to use more than one patch at the same time. Reviewed managed care plans along with BWC and Caresource.
PPLPMDL0020000001	Fairlawn	OH	44333	10/18/2012	Discussed Butrans with all drs in office. Dr Weidman said she has used Butrans in the past and it worked well for a patient on vicoden. I asked dr why she has not used it since? Dr said because she forgot about it and was out of practice for a while. I discussed all key selling messages and discussed Emma and William profiles. Reviewed dosing, titration, conversions, application sites, and inclusion/exclusion criteria from BUP 3015. Dr said she will use it again because she said she thinks its a different approach to pain because of the mode of administration. I reviewed trial card, copy cards and managed care plans. Dr said she will place the initiation and titration guides in her exam rooms.
PPLPMDL0020000001	Parma	OH	44134	10/18/2012	I stopped Dr Mandat & told him I wanted to share some information with him from Butrans clinical trials for opioid-experienced patients. I pointed out that these patients were taking between 30 & 80mg equivalent oral morphine per day & had to discontinue that treatment when starting Butrans. I showed him that 62% of patients had been on hydrocodone in this study. I pointed out that patients generally reported pain score reductions of around 7 to around 3. I asked if he thought this would be relevant to his patient population & if he would try Butrans in this type of patient, broadening his clinical experience. He said he would.
PPLPMDL0020000001	Independence	OH	44131	10/19/2012	Dr Jack said he has been "thinking of" my patch. I asked him what patch he was talking about. He said Butrans. I asked him why not start writing it for a few appropriate patients instead of just thinking about it. He said he will, then walked away.
PPLPMDL0020000001	Parma	OH	44129	10/19/2012	Showed Dr Moysaenko OxyContin 7 tablet strengths, pointing out intermediate doses for flexibility in dosing/titration. Positioned Butrans for appropriate patients who are not well-controlled on 3-5 tramadol or Vicodin per day. He thanked me & walked into a patient room.
PPLPMDL0020000001	Independence	OH	44131	10/19/2012	Quick call- Positioned OxyContin as a q12h dose of oxycodone for appropriate patients who are taking immediate-release oxycodone around-the-clock. Dr Pai thanked me & walked away.
PPLPMDL0020000001	Parma	OH	44129	10/19/2012	Quick call- Caught Dr Salama at the window. I passed back the Butrans formulary grid & also reminded him that BWC is currently paying for Butrans. He said to have Dina write it on the grid. Spoke with Dina, who said they have enough savings cards for both Butrans & OxyContin. Reviewed eligibility requirements for card usage.
PPLPMDL0020000001	Brooklyn	OH	44144	10/19/2012	Spoke with Heather & reviewed Butrans dosing, titration, & use of supplemental analgesia. I showed her titration piece, pointing out that Butrans can be titrated after 3 days to a maximum of 20mcg. Let her know either IR opioids or non-opioid medications can be used for supplemental analgesia. I asked if she was aware of that & if it made sense. She said she had forgotten. Discussed titration ability every 1-2 days with OxyContin & also reviewed 7 different tablet strengths. She said they did not need savings cards for either product. <font color=blue><b>CHUDAKOB's query on 10/25/2012</b></font><b>Ashleigh, your call notes says that Butrans can be titrated to a maximum dose of 20ug after three days. Is this correct?</font color=green><b>APSEGAS's response on 10/28/2012</b></font> see how the note reads & how it could be interpreted. I have since been more cautious & specific in how I word it. When I talk to HCP's, I talk about the ability to titrate every 3 days, not "after" 3 days, to a maximum 20mcg. In calls, I show the 10 & how the patient would go from 5 to 10 to 20. I apologize for the poor wording & assure you I am more specific now that I have noticed this. <font color=blue><b>CHUDAKOB added notes on 10/29/2012</b></font>Thank you for the explanation. I am glad you saw how this can be interpreted and more importantly that you understand what is correct.
PPLPMDL0020000001	Parma	OH	44134	10/19/2012	Discussed Butrans titration ability after 3 days to a maximum 20mcg & ability to use supplemental analgesia if necessary in the form of immediate-release opioid or non-opioid medications. I asked how common it is for a patient to be on a long-acting & short-acting opioid at the same time. He said it is fairly common. Discussed savings programs for Butrans & OxyContin & reviewed eligibility requirements for participation.
PPLPMDL0020000001	Parma	OH	44129	10/22/2012	Quick call- Passed back new REMS packet to Dr Laluk & also reviewed with him Butrans dosing of 5, 10, & 20mcg with once weekly transdermal system. He just thanked me & walked away. Spoke with Linda & reviewed Butrans dosing & appropriate patient type.
PPLPMDL0020000001	Parma	OH	44129	10/22/2012	Positioned Butrans for appropriate patients who may benefit from a once weekly transdermal system of buprenorphine for their moderate to severe chronic pain. Dr Taylor said she knows & she will write it as soon as someone says they are not being well-controlled on their current medication. OxyContin 7 tablet strength reminder.
PPLPMDL0020000001	Independence	OH	44131	10/22/2012	I asked Dr Trickett what her comfort level with buprenorphine as a molecule is. She said she feels comfortable with it, but pharmacists do tend to scare patients when they talk to them about it. I asked her to clarify. She said when patients go to fill a prescription for Butrans, often times, pharmacists tell the patients it is for addiction treatment, which causes the patient to become afraid to try it. She said even though she reassures them that Butrans is only for pain, the patient at that point is not willing to try it. I asked what she thinks of when she hears "buprenorphine". She said now she thinks of Suboxone. I showed her FPI stating that Butrans is only for pain, not treatment of addiction. She said she realizes they are different & have different doses. I told her I wanted to share Butrans clinical data with her. Showed her FPI & went through opioid-experienced & opioid-naïve studies. I showed her that in both studies, patients were initially titrated to the next highest dose after 3 days. Also showed that the maximum dose they titrated to was 20mcg. She said she didn't realize she could titrate that soon. She asked when it reaches steady state. I told her 72 hours. I showed her pain reduction & that patients on 20mcg reported better pain reduction than 5mcg. She said that makes sense. I asked her to try Butrans on appropriate patients & titrate if they initially get sub-optimal response. She agreed. Discussed OxyContin 7 tablet strengths & gave her REMS.
PPLPMDL0020000001	Parma	OH	44129	10/22/2012	Dr Gigliotti said he has not heard back from any of his patients who he started on Butrans. He said that means it must be working for them. I asked what if they come back for follow-up & say it is not working. He said he will increase the dose. I told him it sounds like he is ready. He said he is still writing more OxyContin than he would like. I reminded him that there are legitimate, appropriate patients in pain & those are the ones he should focus on treating.
PPLPMDL0020000001	Akron	OH	44333	10/22/2012	Spoke to Jim(pharmacist) about Butrans and OxyContin. I reviewed Butrans dosing, titration and use of supplemental analgesia. I asked Jim what doses he dispenses the most? Jim said they have only dispensed it a handful of times. I asked what doses he has dispensed? Jim said mostly 5mcg and a couple of 10mcg. I explained appropriate patient types and appropriate initiation doses. I asked Jim if his patients receiving OxyContin are using the copy card? Jim said most are on Medicare and others have various employer plans who most of will not approve OxyContin until they fail other products first. I outlined OxyContin managed care plans focusing on Med D. Spoke to matthew(pharmacist) about Butrans and OxyContin. Pharmacist did not know much about Butrans other than he just filled it last week. I asked him if he knows who prescribed it and he said no and that he would have to run a report and didn't have time. I reviewed with Matthew the indication, CIII, 7 day transdermal system, dosing, titration and appropriate patients. I asked him if he has also dispensed OxyContin recently. Matthew said they fill it all the time and have all doses in stock.
PPLPMDL0020000001	Parma	OH	44129	10/22/2012	Quick call- Dr Ortega said he was on his way out of the office & is leaving on vacation. He said he won't be thinking about Butrans or OxyContin for awhile. I passed back Butrans titration piece & let him know that when he gets back we can have a detailed discussion about Butrans clinical trials, along with dosing & titration. Spoke with Cindy & reviewed appropriate patient type & ability for patients to take supplemental analgesia if necessary.
PPLPMDL0020000001	Fairlawn	OH	44333	10/22/2012	Discussion with Gilbert the store pharmacy manager about Butrans and OxyContin. I used the titration guide to review dosing, appropriate initiation dose, titration, indication, use of supplemental analgesia, trial cards and copy cards. Gilbert told me that patients on Butrans have been telling him Butrans is working but they have found it necessary to use more and more short acting products for breakthrough pain. Gilbert said the majority of dispensing is the 10mcg but feels most of the patients he fills for should be on the 20mcg. Gilbert wanted to know the approximate conversions from vicoden to the 10mcg. Discussed OxyContin appropriate patients with case studies and copy card.
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PPLPMDL0020000001	Akron	OH	44312	10/22/2012	I asked dr if he initiated Butrans on anyone since our last visit on October 5th for lunch? Dr said he has not yet and asked about insurance coverage. I asked dr if he feels comfortable about the product first? Dr said he does and wants to use it. I told him to stick with patients who have prescription insurance and to use trial cards and copy cards to have patients pay as little as \$15 a month for 4 patches. Dr told me to leave managed care info with his nurse.
PPLPMDL0020000001	Independence	OH	44131	10/22/2012	Spoke with Dave & reviewed Butrans titration, showing him titration piece. Reminded him of ability to titrate patients every 3 days to a maximum 20mcg. Also reviewed ability to take supplemental analgesia in the form of IR opioid or non-opioid medications. I asked if he has noticed any patients starting on Butrans at a lower dose, then discontinuing. He said he hasn't had very many people on it at all. Reviewed savings programs for Butrans & OxyContin.
PPLPMDL0020000001	Akron	OH	44333	10/22/2012	Window call about Butrans. I asked dr what kind of feedback his patients are giving him about Butrans. Dr said most patients are doing well with less pain. I told dr to make sure to titrate when patients say they are still in pain and it can be done anytime after 72 hours. Showed dr the new patient information tear sheets. Dr said he liked them a lot especially the application chart to ensure they rotate appropriately.
PPLPMDL0020000001	Maple Heights	OH	44137	10/22/2012	Quick call- Saw Dr Gene at the window- I showed him Butrans titration piece & reviewed dosing. Also gave him new REMS packet. He said he is looking for another Butrans patient, thanked me, & walked back to a room.
PPLPMDL0020000001	akron	OH	44333	10/22/2012	I told dr that he should be looking for patients in his practice who are on NSAIDs or cox 2 inhibitors around the clock and are still in pain. Dr said he may have a few. Provided short review of the BUP 3024 trial from FPI discussing open label period, forced titration to 20mcg and use of supplemental analgesia. I discussed significant pain score reductions and asked him if he could identify a few patients that would be appropriate. Dr said he will look and thanked me for the study review.
PPLPMDL0020000001	Parma	OH	44129	10/22/2012	Spoke with Marion & gave her Butrans titration piece. Pointed out 3 Butrans strengths & ability to titrate every 3 days to a maximum 20mcg dose. Also reminded her that Butrans is for pain only. Discussed savings program & e-voucher automatic savings. She said they have a few people on Butrans. I asked if she has noticed titration for any of them. She said she isn't sure. Discussed OxyContin's 7 tablet strengths for flexibility in dosing & titration.
PPLPMDL0020000001	Akron	OH	44305	10/22/2012	Dr said he just sent out a patient on Butrans right before I cam in. I asked dr what the patient was taking prior to Butrans? Dr said OxyCodone 5/325mg tid and he initiated on the 10mcg/hr patch. I told him that he initiated appropriately and showed him the titration/supplemental analgesia piece and reviewed proper titration and ability to use supplemental analgesia when the patient needs it. Dr said he feels more comfortable telling the patient to use ibuprofen instead of the IR opioid. I told dr that wither is appropriate. I asked dr if his clinical results are good enough for him to prescribe more often. Dr said he continues to look for patients.
PPLPMDL0020000001	Akron	OH	44312	10/22/2012	Gave quick overview of Sam case study for OxyContin and dr said he is trying to not use the CII's much anymore and he refers to comprehensive pain management. I asked dr if he has had any new Butrans starts since out lunch earlier in the month. Dr said he has a patient coming in sometime this week who he wants to use Butrans for. Dr said the patient in on vicoden and couldn't remember the dose. Dr asked about coverage for Medco? I told dr that it is the lowest branded copay even before the savings cards. I told dr to use the trial offer then the copay card so the patient could pay as little as \$15 for a month. Dr said that Nadia told him to use Butrans for that patient and is good at keeping him up on his treatment options. Thanked dr and told him I want to hear about the results and to call me with any questions.
PPLPMDL0020000001	Cleveland	OH	44130	10/23/2012	Dr Fedorko said he hasn't written Butrans for anyone since we last spoke. Showed him 3 doses on titration piece, pointing out ability to titrate every 72 hours to a maximum 20mcg. Spoke with Mindy & reviewed Butrans managed care. She said she doesn't think they have many people on it. Reviewed appropriate patient type with her. <font color=blue><b><b>CHUDAKOB added notes on 11/01/2012</b></b></font>-This looks like a good next call objective. Think about how you want to open this call. Do you want to ask him to think of one patient or do you want to teach him about the right patient type that he sees multiple times a day. It is good to see you wanting to get specific. Getting him thinking of a type of patient and then getting him to realize he sees that patient type may be the first step.
PPLPMDL0020000001	Uniontown	OH	44685	10/23/2012	I spoke to Matt about Butrans and OxyContin. I used the initiation and titration guide to review indication, dosing, titration, and application sites. I showed him the approximate conversion chart to show appropriate patients. Matt thanked me for the information and has not dispensed too much recently. He thought he saw one from Fouad but could not remember. Matt said their dispensing of OxyContin has gone down and does not know why? I asked who in the area he sees prescriptions from? Matt didn't know and said he was too busy to look. left him managed care grids.
PPLPMDL0020000001	Cleveland	OH	44130	10/23/2012	Spoke with new pharmacist, Julie, & presented Butrans since she said she was unfamiliar with it & does not stock it. Reviewed once weekly dosing, delivery system, & CII opioid with abuse/addiction potential. Discussed buprenorphine as the active ingredient, stressing that Butrans is only for pain. Reviewed appropriate patient type/range. Also showed titration piece & discussed titration interval of 72 hours to a maximum 20mcg. Gave her OxyContin savings cards & reviewed eligibility requirements for usage.
PPLPMDL0020000001	Uniontown	OH	44685	10/23/2012	Dr said that she told a patient last week about Butrans who was on vicoden and complaining about being in pain. Dr said that for some reason the patient refused to wear a patch and said the cost would be too high. I asked what insurance the patient had and she said she could not remember. I asked dr to continue looking for the appropriate patients and the vicoden patient is the ideal patient. Went to William and gave a quick review. Dr told me to leave formulary information.
PPLPMDL0020000001	Shaker Heights	OH	44122	10/23/2012	Quick call- Updated Dr Agarwal on OxyContin formulary coverage, pointing out favorable status on AARP & CCRx Medicare plans. He said this was good to know. Also gave him new REMS packet for Butrans & OxyContin & explained updates.
PPLPMDL0020000001	Parma	OH	44129	10/23/2012	Myra said she couldn't stay to talk but that she has started patients on Butrans over the last couple of weeks. She said she has no notable feedback at this time but will talk to me more about it after she gets back from vacation. Discussed scheduling another program.
PPLPMDL0020000001	Cleveland	OH	44130	10/23/2012	Reviewed OxyContin 7 tablet strengths & Butrans dosing with Dr Diab. Also handed him new REMS packet, explaining update.
PPLPMDL0020000001	Middleburg Heights	OH	44130	10/23/2012	Quick call- Handed Dr Ignat new REMS packet & updated him on format. Reviewed Butrans dosing. He said he didn't have time & walked away.
PPLPMDL0020000001	Uniontown	OH	44685	10/23/2012	I asked dr through the window what his thoughts on Butrans are after leaving product information a couple of times? Dr said he knows of it but has not used it. Dr said to come back next Tuesday about 11:30 and he will have more time to talk then.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	10/23/2012	I asked dr Pitt when he knows his patients need an extended release product where does OxyContin? Dr said he uses a lot of OxyContin but also uses Other products like Nucynta, Lyrycia and Opana. I aske dr if his patients get the analgesia they need with OxyContin. Dr said they all provide relief but admitted his go to is OxyContin. I asked him if he has patients on IR oxycodone who may be appropriate for Butrans? Dr said if they are doing ok on it he will not change it but if he feels the patient can benefit from an extended release he will prescribe it.
PPLPMDL0020000001	Cleveland	OH	44130	10/23/2012	Spoke with pharmacist, Laura, & showed her Butrans titration piece. She said she thinks she has one person who is on Butrans. I asked if she has noticed this patient being titrated at all or if they have only been on one dose. She said this patient has been on one dose only. Showed her that Butrans' titration interval is every 72 hours to a maximum 20mcg. Also discussed ability for patients to take supplemental analgesia in the form of IR opioid or non-opioid medications. I pointed out that Butrans is buprenorphine & asked what she usually thinks of when she sees/hears that molecule name. She said treating drug addiction. I reminded her that Butrans is only for pain & went over available doses. She said she thinks one of the keys with Butrans is the physician educating the patient. I agreed & let her know this is an area I work on with prescribers. Reviewed OxyContin 7 tablet strengths for flexibility in dosing/titration.<font color=blue><b><b>CHUDAKOB's query on 11/01/2012</b></b></font>-This looks like it was a very good pharmacy call. Nice job!<font color=green><b><b>APSEGAS's response on 11/02/2012</b></b></font>-Thank you!<font color=blue><b><b>CHUDAKOB added notes on 11/06/2012</b></b></font>-Keep up the good work!
PPLPMDL0020000001	Maple Heights	OH	44137	10/23/2012	Spoke with Kim & showed Butrans titration piece. Discussed 3 strengths & once weekly dosing of buprenorphine. Also reviewed titration interval of 72 hours to a maximum 20mcg. She said they haven't filled any Butrans prescriptions. Discussed OxyContin 7 tablet strengths for individualization of dosing & titration. Offered savings cards but she said most of their customers have Medicaid or Medicare.
PPLPMDL0020000001	Uniontown	OH	44685	10/23/2012	Spoke to Kim and Lynn about Butrans appropriate starting dose based on approximate conversion chart and the need for titration and steady state at 72 hours. Kim asked about taper period of short acting like vicoden? I discussed steady state is 72 hours so the taper off period should not begin until then and the amount and time period of taper is up to the physician. Kim said they have not seen much 20mcg dispensing at all and thanked me for the information because patients ask a lot of questions about their medicines. I gave the pharmacy a few of the patient information guides.
PPLPMDL0020000001	Independence	OH	44131	10/23/2012	Quick call- Positioned Butrans for appropriate trusted/established patients with third-party insurance, who are taking short-acting opioids for moderate to severe chronic pain, responding sub-optimally. Dr Sundaram said that Butrans "has its place." Reviewed OxyContin's 7 tablet strengths.
PPLPMDL0020000001	Cleveland	OH	44130	10/24/2012	Quick call- Caught Dr Popa at the window. Positioned Butrans once weekly transdermal system for appropriate patients who are not well-controlled on their short-acting opioid medication, even if she is referring to pain management. She just waved & walked away. Spent time with Renee' going over managed care information & Caresource prior authorization for Butrans.
PPLPMDL0020000001	Barberton	OH	44203	10/24/2012	I asked Dr Patel if he would identify patients on Ultram or vicoden who are uncontrolled or are deemed chronic and could be appropriate for a controlled release product? Dr said maybe and he supposes he does. I asked why those patients can't be placed on the product? Dr said he will consider it when he sees them in the office.
PPLPMDL0020000001	Akron	OH	44320	10/24/2012	I asked dr Bonyo if he was going to prescribe Butrans? Dr asked me if it is in his computer system? I checked with Barbara and it is. I told dr Bonyo that Butrans is a CII just like the vicoden he prescribes and he can call it in and make up to 5 refills. Dr Bonyo said he will prescribe it. I showed dr Bonyo the inclusion criteria and 62% of patients on hydrocodone. Dr said it makes sense and he told me he remembers it is covered on caresource. I explained the PA criteria and he was ok with it.
PPLPMDL0020000001	Cleveland	OH	44122	10/24/2012	Quick call- Caught Dr Rastogi at the window- Showed him OxyContin 7 tablet strengths & delivered broad formulary access message. Also passed back new REMS packet for Butrans & OxyContin & told him about updates. He just thanked me & walked away.
PPLPMDL0020000001	Garfield Heights	OH	44125	10/24/2012	Caught Dr Samuel on the way out of the office. I gave him new REMS packet for Butrans & OxyContin & let him know about the update with ER/LA opioid REMS. He said he would look it over & added that he has prescribed Butrans & OxyContin lately.
PPLPMDL0020000001	Akron	OH	44313	10/24/2012	I told dr that in the clinical trials with OxyContin, 33% of patients studied were over the age of 65 yrs and of that, 9% were over 75. I told dr that the reason I am telling him that is two fold. One, I want you to feel comfortable prescribing OxyContin to patients over 65 and that the Med D plan coverage is very good. I explained plans with approved piece. Dr said he does use it for the elderly and he has some on higher doses and it works very well. I showed dr the Butrans patch and asked if he has any patients with low back pain on vicoden who would be appropriate for the CII, 7 day patch? Dr told me to leave info and he will study it more.
PPLPMDL0020000001	BEDFORD	OH	44146	10/24/2012	Spoke with pharmacist, Shonda, & showed her Butrans titration piece, pointing out titration interval every 72 hours to a maximum 20mcg. Also discussed ability to take supplemental analgesia if necessary. Reviewed savings program & discussed e-voucher. Reviewed OxyContin 7 tablet strengths- she said she thinks they have them all.
PPLPMDL0020000001	Copley	OH	44321	10/24/2012	I gave a review of the BUP 2034 trial outlining the design criteria, how patients were force titrated to the maximal dose of 20mcg/h and % of patients moved to the double blind portion of the trial. Finished by providing pain score reductions at 24 hours of week 12. I followed that up with the new titration and supplemental analgesia piece speaking to the importance of titration and appropriate starting dose. I asked dr if there is anything keeping him from using Butrans regularly except for managed care? Dr said no. he thinks it is a good product but said it is too tough to get approved. I asked for a specific instance and he could not provide one. I asked dr to gain more experience with the product. Showed Dr the Tom profile with OxyContin.
PPLPMDL0020000001	Bedford	OH	44146	10/24/2012	I asked Dr Moufawad how frequently when he starts a patient on Butrans 10mcg he finds that they need to be titrated to 20mcg. He said quite often. He went on to say that he actually noticed that he has a bulk of patients who are controlled well on 5mcg & another set who are controlled at 20mcg. He said he probably has the fewest number of patients at 10mcg. He said overall, he is getting good results. I asked if he considers OxyContin when 20mcg Butrans doesn't control a patient's pain. He said sometimes.
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PPLPMDL0020000001	Akron	OH	44333	10/24/2012	I went through BUP 3015 trial discussing study design, open label portion of trial, double blind phase, inclusion criteria, 62% on hydrocodone, and pain score reductions. Dr said that he really likes Butrans for patients that are opioid naive. I asked why and he said they are the easiest patients to try a patch. Dr said he initiated a 5mcg patch for a patient last week with spinal stenosis and has no problem titrating to the max dose of 20mcg/h. Used titration piece to discuss when to titrate based on steady state and use of supplemental analgesia. Dr said he would tell patients to use non narcotics for breakthrough pain. Reviewed OxyContin case studies and asked dr what he thinks of moving patients on oxycodone IR to OxyContin when the meet the indication. Dr said he does use and and would prefer using an ER products instead of a short acting product. Dr said he will continue to use the Butrans patch.
PPLPMDL0020000001	Akron	OH	44320	10/24/2012	I repeated the same information to dr Adams as I did lat time and told her to focus on a patient like William who is uncontrolled on vicoden. Dr said ok and she knows she needs to give it another shot. I told her that many of the moderate to high doses of perccet may not be appropriate and they may be more of a candidate for OxyContin. Dr said she will focus on vicoden patients
PPLPMDL0020000001	Akron	OH	44304	10/24/2012	I asked pharmacist if they had butrans in stock? Pharmacist did not have any in stock at the moment but did fill it about a month ago but did not remember the physician. I gave Butrans key selling messages and discussed copy cards and trial card.
PPLPMDL0020000001	Bedford	OH	44146	10/25/2012	Spoke with Roberta who said Dr Haddad was unavailable due to a patient situation. I gave her new REMS packet & updated her. She agreed to make sure Dr Haddad got it. I reviewed Butrans appropriate patient type & OxyContin broad formulary coverage. Also discussed Senokot-S for medication-induced constipation & gave samples.
PPLPMDL0020000001	Parma	OH	44129	10/25/2012	Quick call- Passed back new REMS packet for Butrans & OxyContin & updated Dr Tolentino. Positioned OxyContin for appropriate patients taking Percocet around-the-clock & Butrans for those who are not well-controlled on 3-5 tramadol or Vicodin per day. She said she will try & walked away.
PPLPMDL0020000001	Parma	OH	44129	10/25/2012	Spoke with MA Sheila & reviewed Butrans once weekly transdermal dosing of CIII opioid. Also reviewed appropriate patient type & abuse/addiction potential. I showed her Butrans titration piece & asked if she & Lynn both take phone calls from patients regarding medication. She said yes. Discussed importance of titrating Butrans if necessary as long as they are tolerating it if they call saying it is not working at its current dose. Also let her know 20mcg is maximum dose. Gave REMS packet & discussed content list. Discussed OxyContin savings cards, but she said they did not need any. Sheila said she would give this information to Dr Gallagher.
PPLPMDL0020000001	Macedonia	OH	44056	10/25/2012	Spoke with floater pharmacist & reviewed Butrans dosing & appropriate patient type. Also showed titration piece & reviewed titration ability every 72 hours to a maximum 20mcg dose. Reviewed e-voucher for Butrans & OxyContin. She said she would give this information to Eve.
PPLPMDL0020000001	Sagamore Hills	OH	44067	10/25/2012	Penny said she likes Butrans & OxyContin for the right patients. Walked through both study designs & discussed results. Spent time with titration piece discussing recommended starting doses depending on the patient's current medication. Discussed managed care & trial/savings cards. Also discussed ability to use supplemental analgesia in the form of IR opioid or non-opioid medications. She asked how Butrans is for elderly patients. I showed her that there are no dosage adjustments necessary & advised she use the same type of caution she would use with other opioid medications. She said she has an 86 year old patient who does not need a strong opioid, but she feels tramadol is dangerous to use in the elderly due to changes in mental status seen in studies with this medication. Discussed Medicare & prior authorization. She said she would likely try to get Butrans for this patient due to lack of other options. She said she would prefer patients be on Butrans than oral medications & it makes sense to have patients on long-acting opioids if they are going to need something for a long period of time. I asked what she thinks prevents her from writing more Butrans. She said really just that she sees more acute conditions than chronic. Positioned OxyContin for appropriate patients taking Percocet around-the-clock chronically. She said she would prefer a patient be on OxyContin plus oxycodone IR for breakthrough pain. Also gave OTC samples & new REMS packet.
PPLPMDL0020000001	Sagamore Hills	OH	44067	10/25/2012	Dr Lenow said he hasn't prescribed Butrans yet. I told him I thought it would be helpful to review Butrans clinical trial data to assist in increasing his comfort with treating appropriate patients with the correct dose of Butrans. Walked him through both study designs & discussed results. I asked what he thought. He said it sounded good & added that he didn't realize Butrans could be titrated as soon as 3 days after initiating. He asked if he can have the patient use two patches at the same time. I told him this has not been studied & is not recommended. Discussed managed care & trial/savings cards, letting him know the next higher dose is covered if used for titration. Also discussed ability to use supplemental analgesia in the form of IR opioid or non-opioid medications. He said he is sure he can find someone for Butrans & knows he will use it eventually. Positioned OxyContin for appropriate patients taking Percocet around-the-clock chronically. Also gave OTC samples & new REMS packet.
PPLPMDL0020000001	C. Falls	OH	44223	10/25/2012	I asked Cindy if she has had any patients asking her about Butrans dosing? Cindy said they have not filled any recently. Spoke to Cindy about the initiation dose of Butrans based on short acting daily dose and proper titration. Cindy said they do dispense OxyContin but most are refills. Discussed appropriate patients on IR oxycodone.
PPLPMDL0020000001	Shaker Heights	OH	44122	10/25/2012	Spoke with Nahlia & showed Butrans titration piece. Discussed dosing & delivery system. She said she doesn't think anyone is on it. Reviewed appropriate patient type & managed care coverage. She said they have mostly Medicare & Medicaid. Discussed OxyContin 7 tablet strengths for flexibility in dosing & titration.
PPLPMDL0020000001	Sagamore Hills	OH	44067	10/25/2012	Discussed 7 tablet strengths of OxyContin allowing flexibility & individualization in dosing & titration. I told Dr Sevier I thought it would be helpful to review Butrans clinical trial data to assist in increasing his comfort with treating appropriate patients with the correct dose of Butrans. Walked him through both study designs & discussed results. I asked what he thought. He said it sounded good & added that he didn't realize Butrans could be titrated as soon as 3 days after initiating. He asked to see adverse events, so I showed him rates. He said the constipation rate is lower than other opioid medications. I told him we have no data comparing. He said this statement is based on his clinical experience. Discussed managed care & trial/savings cards, letting him know the next higher dose is covered if used for titration. Also discussed ability to use supplemental analgesia in the form of IR opioid or non-opioid medications. He also gave OTC samples & new REMS packet.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	10/25/2012	I told dr that im waiting to hear about how she used Butrans! Dr said she knows she needs to use it. I told her to use Butrans for her hydrocodone patients needing a dose adjustment and showed her the inclusion criteria for Butrans from BUP 3015. I told her that her patients have prescription plans that are very suitable to Butrans. Medco, Medical Mutual and Express Scripts all are tier 2 coverage before the trial card and copy card. Dr said she will prescribe.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	10/25/2012	I asked dr when he spoke to aptients about Butrans and they said they did not want to wear a patch if the Butrans DVD or patient information guide would help the patient feel more comfortable about using Butrans. Dr said possibly but he said the reason is that most of the patient like taking their pills and like what the pills do for them. I told dr I understand and that proper patient selection is very important. I asked dr to look for patients on Ultram or vicoden who are needing or asking for a change in therapy and to provide the patient with an information guide to Butrans. Dr said its a good idea and he will try it.
PPLPMDL0020000001	Akron	OH	44312	10/25/2012	Told dr that Butrans is the only CIII, 7 day transdermal system for moderate to severe pain. I told her that the last time we spoke who told me she had a couple of patients in mind for it. Dr said she has not prescribed but sees where it may be beneficial. I asked her where she thinks she would use it. Dr asked if the indication includes chronic pain? I told her it does and gave her the full indication. She told me to set up a lunch where we can talk more in depth.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	10/25/2012	I showed dr the Tom case study and asked him if he would use OxyContin in that instance? Dr said he told me before that he is not prescribing CII medicines and refers patients to pain management. I asked him about a CIII? Dr said he doesnt like prescribing any scheduled medicines.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	10/25/2012	Showed dr the Butrans placebo patch and asked her if she has prescribed since our lunch appointment? Dr said she has not but wants me to help her keep it front of mind. I told her to prescribe it for her patients uncontrolled on Ultram or vicoden. Left her the new piece on titration and supplemental analgesia.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	10/25/2012	Spoke to Amy about Butrans appropriate initiation dose and ability to titrate after 3 days. I asked if any patients have told her that Butrans was not working well? Amy said she has not heard that. I asked if she dispensed any recently and she said no. I asked her if they needed any OxyContin copy cards? Amy looked and said she had 4 and she didn't need anymore.
PPLPMDL0020000001	Akron	OH	44313	10/25/2012	Pharmacy is not currently stocking Butrans and pharmacist did not remember dispensing. I discussed initiation of Butrans with appropriate dose, titration, and application sites. I asked if they had all doses of OxyContin? They had all but the 15 and 60mg doses. I spoke about OxyContin as the single entity Q12h option for patients uncontrolled on oxycodone.
PPLPMDL0020000001	Parma	OH	44129	10/25/2012	Showed Dr Paat OxyContin's 7 tablet strengths for flexibility in dosing & titration. Also asked him to identify a Butrans patient in his practice who has commercial insurance & is not well-controlled on 3-5 doses of short-acting opioid per day.
PPLPMDL0020000001	Akron	OH	44310	10/25/2012	I asked dr if he has patients on hydrocodone? Dr said he does. I asked if he would feels comfortable talking to a patient who may need a dose adjustment on vicoden to discuss another CIII Butrans for a controlled release product? Dr said he would. I asked if there is any hang up about using it. Dr said he has used it before and that he feels good about the product. I asked him if the results with the other patient did not meet expectations? Dr said the patient did well. I asked what else he needs in order to prescribe again? Dr took the titration guide and said he will look at it.
PPLPMDL0020000001	Beachwood	OH	44122	10/25/2012	Quick call- Handed Roberta Butrans titration piece & reviewed dosing. Also pointed out that Butrans can be titrated every 72 hours to a maximum 20mcg. She just thanked me & said she was busy this morning.
PPLPMDL0020000001	Parma	OH	44134	10/25/2012	Dr Hernandez said he seems to be getting more referrals lately. I asked if he has considered any of them Butrans patients. He said yes, many. He said Butrans truly is a go-to medication for him due to the success he has had in treating patients. Reviewed managed care for Butrans & OxyContin. He said he is now only accepting some BWC & cash.
PPLPMDL0020000001	Cleveland	OH	44122	10/25/2012	ML met with Dr. Wine (PI) and Ms. Prayner (study coordinator) to discuss recruitment and enrollment for ONU 3704. Dr. Wine stated that he prefers to focus on recruiting patients from Rapid Medical Research&#8217;s central database of approximately 12,000 patients before considering advertising. Ms. Prayner mentioned she received a request from Quintiles to fill out a DEA 222 form so that additional study drug could be shipped to the site. Ms. Prayner stated that the site is already at capacity for study drug with the initial shipment and since they have yet to enroll a patient she is wondering why Quintiles is requesting that they order more study drug. ML will reach out to Quintiles for a response.
PPLPMDL0020000001	Brooklyn	OH	44144	10/26/2012	Positioned Butrans for appropriate patients who may benefit from once weekly transdermal dosing for moderate to severe pain from a chronic condition. Pointed out trial/savings cards & asked him to choose an appropriate commercial insurance patient.
PPLPMDL0020000001	Cleveland	OH	44130	10/26/2012	Quick call- Showed OxyContin's 7 tablet strengths for flexibility in dosing & titration. Dr Kansal said he still writes it, just not as much. Positioned Butrans for appropriate patients who meet the indication & could benefit from a once weekly transdermal system for their pain.
PPLPMDL0020000001	Brooklyn	OH	44144	10/26/2012	Dr Keith said he has a few patients on Butrans, although he does not have many patients who he treats for chronic pain. I asked what kind of results he is getting- he said good. Reviewed appropriate patient type & showed titration piece. I pointed out ability to titrate every 72 hours to a maximum 20mcg dose. Also pointed out that in studies, if the patients tolerated Butrans, they were titrated to 20mcg. I asked if he would ever titrate after 3 days. He said if it wasn't working he would. Reviewed managed care coverage & trial/savings program. I asked if he could think of anyone who he will see soon who he would try Butrans on. He said not that he knows of but that he will keep it in mind. OxyContin 7 tablet strengths for flexibility in dosing/titration.
PPLPMDL0020000001	Barberton	OH	44203	10/26/2012	I reviewed the Tom profile with Dr Minich as I did on the previous call to drive home the appropriate patients for OxyContin. I asked dr to move patients on oxycodone to OxyContin if the patient is still in ATC pain and are suitable for the Q12h option. I told her from the FPI that in the clinical studies that 33% of patients studied were 65yrs and over and of that 9% were 75yrs and over. I told her that the reason for talking about this is because the Medicare D plans are well covered. Dr said she realizes that she should be moving patients to OxyContin. I provided review of Butrans naive trial discussing study design, titration to maximal dose, % of patients moving to double blind and pain score reductions. Told her to initiate Naive patients on 5mcg and discussed improved efficacy with each titrating dose. I asked dr if she will use Butrans for her next patient that meets the indication. Dr said she will give it a try.
PPLPMDL0020000001	Parma	OH	44129	10/26/2012	Dr Roheny said he hasn't had anyone to put on Butrans or OxyContin lately. I showed him Butrans titration piece & reviewed dosing with him. He said he can remember that. I told him this is only helpful if he applies the knowledge by identifying & prescribing for an appropriate patient. I asked if he could think of anyone at all in his entire practice who he thought Butrans could benefit. He said he doesn't know. Provided Partners Against Pain information & Medical Education information.
PPLPMDL0020000001					



	Brooklyn	OH	44144	10/26/2012	Dr Silverman said he didn't really want to talk about Butrans because he doesn't use it. I told him that is exactly why he should stay to talk for awhile. Reviewed appropriate patient type/range & told him I realize it may not be a patient type that he treats multiple times per day, but I imagine he has a handful of patients who may benefit from it. Reviewed once weekly transdermal dosing of buprenorphine. He asked what doses there are. I showed him titration piece & pointed out ability to titrate every 72 hours to a maximum 20mcg. Also discussed ability for patients to take supplemental analgesia & pointed out that in clinical trials, patients were allowed ibuprofen or acetaminophen for this purpose. Also showed inclusion criteria. He said it sounds like fentanyl. I showed exclusion of fentanyl patients from studies & reviewed appropriate patient type & indication. He said he would think about it & left the room.
PPLPMDL0020000001	Parma	OH	44129	10/26/2012	Spoke with pharmacist, Heath, & showed him titration piece for Butrans. Pointed out titration ability every 72 hours to a maximum 20mcg. Reviewed appropriate patient type. He said he thinks they have one or two people who get Butrans. I asked if they have been titrated at all. He said he doesn't know. Discussed OxyContin 7 tablet strengths, pointing out intermediate doses.
	Brooklyn	OH	44144	10/26/2012	Dr Charles said he was on his way out of the office. I reviewed appropriate Butrans patient type & positioned Butrans for appropriate patients who fall within the range of patients, especially if they are not well-controlled on the initial dose of short-acting opioid he selects for the patient. Reviewed commercial insurance coverage & trial/savings program. Positioned OxyContin for appropriate patients who take Percocet around-the-clock chronically who may benefit from q12h dosing.
PPLPMDL0020000001	Brooklyn	OH	44144	10/26/2012	Dr Morgan said she remembers Butrans but does not have any patient on it. I asked her why she thinks that is. She said she really does not treat a lot of patients for pain. She added that if patients are already on pain medications, they are generally getting them from orthopedics or some other specialty. She said she does notice drug seekers & obviously won't prescribe for them. I agreed that she should only prescribe opioids for appropriate patients who are in legitimate pain. She said she generally asks a patient to get a tox screen before prescribing any opioids for them & often they never take that step, so she doesn't write the prescription. I agreed that this type of screening is a good idea. I asked if she uses OARRS, She said she does. She said she thinks there is a place for Butrans, she just doesn't happen to treat patients who would be appropriate for it. I asked what her experience has been with OxyContin. She said she hasn't prescribed it yet as she has not needed to write anything that strong. I agreed she should use caution & pointed out that OxyContin is oxycodone in a q12h
PPLPMDL0020000001	Brooklyn	OH	44144	10/26/2012	Showed OxyContin's 7 tablet strengths. Also reviewed that Butrans is the only long-acting CIII opioid available. Dr Detwiler said that was a good reminder, then walked into a room.
PPLPMDL0020000001	Akron	OH	44310	10/26/2012	Gave review of BUP 3015 focusing on patients forced to maximal dose, efficacy pain score reductions, inclusion criteria, 62% on hydrocodone combinations, tolerability and showed AE's over 5%. I asked dr if he would like to get pain score reductions like the ones in the trial and what his patients would think about the incidence of constipation with Butrans. Dr said he likes what he sees and said that he will look for patients on vicoden who should have a controlled release pain patch. I asked dr if it makes him feel more comfortable using Butrans and if he would continue using? Dr said he will and said it is a good medicine.
PPLPMDL0020000001	Barberton	OH	44203	10/26/2012	I asked Dr Kim what he currently does for a patient on vicoden who is uncontrolled? Dr said he refers to pain management and will not give them any more. I asked is a CIII, 7 day transdermal patch for patients uncontrolled on vicoden would be something he would be interested in? Dr said no because he doesn't treat chronic pain. I asked dr if he thinks some of his vicoden patients are chronic? Dr said no and hes not sure if he will use a patch. I asked why and he didnt give me an answer I could understand as he walked away.
PPLPMDL0020000001	Uniontown	OH	44685	10/26/2012	I asked dr through window along with Kelly(pjn) about using Butrans for patients who are uncontrolled on their current therapy whether its an opioid or non opioid? Dr said he is continuing to look for patients for Butrans. nothing else learned.
PPLPMDL0020000001	Strongsville	OH	44136	10/26/2012	Spoke with Heather & showed Butrans titration piece. Discussed ability to titrate every 72 hours & use of supplemental analgesia if necessary. I asked if she is aware of any patients they have on Butrans being titrated at all. She said she doesn't know & didn't have time to look it up. Reviewed managed care coverage & savings cards/trials. Also offered OxyContin savings cards. She said she didn't have time to look to see if they needed any so to bring them next time.
PPLPMDL0020000001	Norton	OH	44203	10/26/2012	Spoke to Bethany about Butrans and asked her if they dispense any Butrans. She said that they refill about once a week for a few patients. Bethany said they just refilled one for Dr Shah for a patient on the 10 mcg dose. I reviewed the new titration piece and explained what doses to initiate on and titration guidelines.
PPLPMDL0020000001	Barberton	OH	44203	10/26/2012	Told pharmacist about OxyContin use in the elderly and dose adjustments when necessary. I reviewed the proper initiation dose of Butrans based on dose of short acting product and need for titration with new piece. I also spoke about the ability for patients to use opioid or non opioid analgesics for break through pain.
PPLPMDL0020000001	Barberton	OH	44203	10/26/2012	I asked where they are getting most of their OxyContin prescriptions from? I was told that the prescriptions come from everywhere and not one location more than another. He said that they see them from Petrus, Lababidi, and some from other primary care drs. I asked about Butrans usage. I was told that they dispense it but not very often and only have the 5mcg in stock. Gave quick review of the need to dose appropriately and titrate every 3 days if necessary.
PPLPMDL0020000001	Akron	OH	44312	10/26/2012	spoke to dr and his student. I spoke to dr if he has patients currently taking vicoden around the clock? Dr said he has some. I told him that Butrans is the same CIII that vicoden is only Butrans is a 7 day transdermal system and he should use it for his patients on vicoden around the clock. Dr said he has told me before he does not treat chronic pain. I asked him if he thinks some of his vicoden patients are in chronic pain. Dr said they probably are but it is too much trouble to treat a patient with a long acting product. I asked why and he said because of all the govt, medical association and all the other groups making it difficult to treat chronic pain with long acting products. I asked dr to write Butrans prior to his referral.
PPLPMDL0020000001	Akron	OH	44319	10/26/2012	I showed dr the placebo patch through the window and asked if there is anything preventing him from using Butrans more often. Dr said nothing except managed care. I asked him which plans with Butrans has given him problems? Dr did not have an answer. I asked him what else he needs to know to feel more comfortable to use? He said nothing and will let me know when he uses again. I spoke to Renee about Butrans and gave her all key selling messages. She said she would help him remember to use since she rooms patients.
PPLPMDL0020000001	Beachwood	OH	44122	10/29/2012	Focused Dr Myton-Craig back on appropriate patients who have insurance through work, suffering from pain from a chronic condition, taking tramadol around-the-clock, with inadequate pain control. I asked if she had anyone like this in her practice. She said probably. I asked if she thought any of them would like to try a once weekly option to treat their pain, reminding her of trial/savings cards. Reviewed with her that OxyContin also offers a savings program, taking up to \$70 a patient's co-pay if eligible. She didn't respond & walked into a room.
PPLPMDL0020000001	Parma	OH	44129	10/29/2012	Focused Dr Taylor on appropriate patients who are insured through work or BWC, suffering from pain from a chronic condition, taking Vicodin, who may benefit from a once weekly transdermal option to treat their pain. Also reviewed trial/savings cards & asked what a patient would have to lose by just trying it. Dr Taylor said she doesn't know. Also reviewed OxyContin savings program. Discussed eligibility requirements for card utilization with Spoke with technician who said the pharmacists were too busy to talk to me. I showed her Butrans titration piece & discussed 3 doses. Also reviewed appropriate patient type & once weekly transdermal dosing. I asked if they give savings cards out to eligible customers. She said they are good about doing that. She checked their supplies & said they had enough Butrans & OxyContin cards for now. She agreed give me information to the pharmacists & I let her know I would follow-up.
PPLPMDL0020000001	Akron	OH	44313	10/29/2012	I spoke to Jerry about Butrans and OxyContin. I reviewed the indication, 7 day transdermal and CIII. I reviewed the need for appropriate starting dose with approximate conversion scale. Discussed the need to titrate and use of supplemental analgesia. I reviewed OxyContin dosing, titration, and appropriate patients.
PPLPMDL0020000001	Beachwood	OH	44122	10/29/2012	Positioned OxyContin for appropriate patients who are taking an immediate-release form of oxycodone who may benefit from OxyContin's q12h dosing. I told Dr Warren I thought it would be beneficial to show him some Butrans clinical trial information. I showed him opioid-experienced study design & showed results, pointing out pain score reduction on pain scale. Reviewed Butrans once weekly transdermal dosing & asked Dr Warren if he thinks any of his patients like the ones we studied could benefit from Butrans. He said he does have a lot of patients who are in the appropriate range (30-80mg oral morphine equivalent). I asked if any of them have commercial insurance/insurance through work. He said probably. I reviewed trial/savings cards & reminded him patients like this can use the card to try Butrans for little to no out-of-pocket expense. He said it sounded good
PPLPMDL0020000001	North Hampton	OH	45349	10/29/2012	DR said that she wanted to use butrans but just forgot. She said to continue to come by. She needed a reminder on doses and said that she has at least five people a week that are candidates.
PPLPMDL0020000001	Akron	OH	44333	10/29/2012	I asked dr Shah if his perception for Butrans has changed over the last few months? Dr asked no and why? I told him that I wanted to just make sure his clinical results have continued to prove his use. Dr said he is continuing to prescribe and said it is a good product. I asked him if he has seen any changes in his staffs ability to get it covered on insurance? Dr said as far as he know there have not been any issues. I asked dr for his continued support with Butrans. I spoke to Marsha Fox and asked her if she has had any coverage issues with Butrans recently? Marsha said there have been some recently where the plans have said the patient needs to be on other products first. I asked her which ones and she couldn't remember. I showed her the Butrans rotation videos and asked her to hand out.
PPLPMDL0020000001	Parma	OH	44129	10/29/2012	Quick call- Showed Elaine Butrans titration piece & pointed out that Butrans can be titrated every 72 hours. I asked if titration is something she discussed with patients. She said she was really far behind & walked into a room.
PPLPMDL0020000001	Akron	OH	44333	10/29/2012	I asked dr what his patients who he initiates on OxyContin are on prior? Dr save most are on percocet but he has seen more and more patients insurance companies saying they need to go on MS Contin or Fentanyl first. I asked dr to continue to use Q12h OxyContin for patients uncontrolled on IR oxycodone. I showed dr the new titration and supplemental analgesia piece. I asked if he finds himself titrating Butrans? He said that he has had to titrate to the 20mcg dose recently. I asked him why he titrated. Dr said the patients said they were still in pain and having to take there breakthrough pain meds more. I told dr he can titrate every three days and use opioids or non opioids for breakthrough pain.
PPLPMDL0020000001	Beachwood	OH	44122	10/29/2012	Spoke with pharmacist, Ashley, who said she has 3 customers who are on Butrans & have been for several months. I asked if she has noticed any titration of dosing for any of them. She checked her computer & said all of them started on the 10mcg & are still on that dose, so no titration has been necessary. I let her know titration is something I have been focusing on with physicians. Showed her that the titration interval is 72 hours for Butrans. Also let her know 20mcg would be the maximum dose. Pointed out that patients can take supplemental analgesia if necessary & showed her that patients in studies were allowed acetaminophen or ibuprofen for this purpose in studies. She said that was a good review. She agreed to let the physician or patient know that they can titrate if she notices a situation where that may benefit a patient. Reviewed trial & savings cards. Also reviewed OxyContin savings program.
PPLPMDL0020000001	Akron	OH	44319	10/29/2012	Dr asked me if there are patient savings cards for Butrans. I told her yes and explained card and trial offer through window. Dr said she wanted some but didn't have time for a discussion. I gave her the patients information guides and titration piece for her to review. I asked her to continue using. nothing else learned
PPLPMDL0020000001	Munroe Falls	OH	44262	10/29/2012	Caught dr at counter after being on vacation last week and told me she was very busy. Handed her the Butrans initiation and titration guide and asked her to prescribe.
PPLPMDL0020000001	Fairlawn	OH	44333	10/29/2012	I asked Jessica and Sue if they have seen any changes in the volume of Butrans for any local physicians recently? Jessica said she has not seen much from dr Shah recently for Butrans. I asked if she knows why and she did not. I asked if any of his patients are having a hard time getting Butrans through their insurance? Jessica said she has not had much of that from Butrans or Dr Shah. I gave Jessica a message about Butrans and titration and use of supplemental analgesia.
PPLPMDL0020000001	Akron	OH	44333	10/29/2012	I asked Dr since our lunch last week if he has initiated any more patients on Butrans? Dr said he just started a new patient this morning. Dr said the patient was on percocet and initiated on Butrans 10mcg. I asked what dose the patient was on of percocet? Dr said he couldn't remember but knew the 10mcg was the correct dose. I showed dr the approximate conversion chart to review appropriate starting dose. I asked if he gave a copy card? Dr said that Krissy did and likes the trial card as well. I explained trial card and copy cards and also asked him to give his patients new to Butrans the Butrans Experience Kit. Reviewed the kit with dr and Krissy. Dr said he will give those out from now on. I spoke to Krissy about titration and use of supplemental analgesia with new piece.
PPLPMDL0020000001	akron	OH	44333	10/29/2012	Followed up from last week and asked if the opioid naive study I review made sense and if he had any questions? Dr said not but sees that the opioid naive patient seems like a good fit for his practice as well as the experienced. I told him to review his charts for patients that meet the indication and are on NSAIDS around the clock. Dr said he will continue to look.
PPLPMDL0020000001	Parma	OH	44129	10/30/2012	Positioned Butrans for appropriate patients who are not well-controlled on hydrocodone chronically, who have commercial insurance. Also reviewed trial/savings cards, pointing out that eligible patients who use the program will pay little to no out-of-pocket cost for the first month. I asked Dr Khooiball what a patient like that would have to lose. He said nothing. I asked him to write Butrans when that patient presents. He agreed.

PPLPMDL0020000001	Akron	OH	44319	10/30/2012	Reviewed the dosing, CIII, 7 day transdermal system and discussed the need for appropriate patient selection by using the approximate conversion guide, need for dose titration, and copy cards with trial cards. Pharmacist said that they have not filled any recently to his knowledge. I asked about dispensing of OxyContin. Pharmacist said that they dispense a fair amount and that most doses are dispensed. Most common doses are the 10, 20, 40 and 60mg.
	Garfield Hts	OH	44125	10/30/2012	I reminded Dr Sadowski of our previous conversation about opioid-naïve patients being possible candidates for Butrans. I told him I wanted to continue to explore this with him. I showed him opioid-naïve clinical study data from FPI & explained study format. Also showed him pain score reductions seen in that study. He said "ok". I told him I was showing him this to help bolster his confidence in Butrans's efficacy in appropriate patients. I told him we have been talking about Butrans for almost two years now & he still has not used it, so there must be some reason for this. I told him going over clinical data may help him in identifying a Butrans candidate. I asked if he thinks Butrans works. He said yes. I asked if he thought it was safe. He said yes. I asked if he thinks it is priced reasonably for appropriate patients with commercial insurance who use the trial/savings cards. He said yes. I asked what, then, is missing. He said a patient like this just has not come in yet. I told him that is hard to believe & started to show him inclusion criteria, but he got called away for an emergency. Reviewed OxyContin q12h dosing & managed care with Deena.
PPLPMDL0020000001	Parma	OH	44129	10/30/2012	Quick call- Caught Dr Chagin at the window. I reminded him of our previous conversation about Butrans & asked what he thinks is missing, causing him not to prescribe or identify patients for Butrans. He said he just has to remember it. I asked what I can do to continue to "remind" him. He said he doesn't know & will try harder. Spoke with Debbie & reviewed savings program & formulary information for Butrans & OxyContin.
PPLPMDL0020000001	Akron	OH	44319	10/30/2012	I showed dr the Butrans placebo patch and asked him if he has given any more thought as to using it in his patients on vicoden who need a dose adjustment? Dr said he has the pieces I gave him last time and he needs to review it. I showed dr the William profile and asked him if he will initiate a patient who has commercial insurance. Dr said he will look. nothing else learned.
PPLPMDL0020000001	Akron	OH	44312	10/30/2012	Quick message about Butrans to dr at window and told him to use Butrans for his Ultram or vicoden patients who need a dose adjustment and meet the indication for Butrans. Dr said he has been considering it for a few patients on vicoden but is concerned about insurance coverage. One patient of Medicare and the other he was not sure what the coverage was. I told dr that proper patient selection is the most important and a vast majority of patients with private prescription insurance can get it at a fair price especially with the 28 day trial offer card. Dr said he will try to get them pushed through.
PPLPMDL0020000001	Cleveland	OH	44125	10/30/2012	Spoke with Angie & showed her Butrans titration piece, pointing out titration interval of 72 hrs. Let her know patients can take supplemental analgesia & showed her that in studies, we allowed patients to take ibuprofen or acetaminophen for this purpose if necessary. She said she has dispensed only "a couple" of Butrans prescriptions. I asked if she has noticed any titration at all with those patients. She said no. Reviewed savings programs for Butrans & OxyContin. Offered cards, but she said they had enough.
PPLPMDL0020000001	Akron	OH	44310	10/30/2012	Good discussion about Butrans and his clinical findings. Dr said that he has found that his patients either like it or they don't. There is no in between. I asked him to provide examples. Dr said that the patients he has on it that are working tell him that they feels woozy or dizzy at work and they can't afford to feel that way so want their perccet back. I asked him why they don't feel that way on perccet and dr said he didnt know other than the dosing schedule. I reviewed BUP 3015 discussing all major points including, study design, inclusion criteria, % of patients in each phase and dose, pain score reductions and AE's associated focusing on low incidence of constipation. Dr said he does like the low incidence of constipation and understand how the max dose would provide better analgesia. I discussed the need for titration and that they trial helps to prove the need to titration if a patient continues to be in pain. Dr said he will continue to look for more patients that fit the right description.
PPLPMDL0020000001	Garfield Hts	OH	44125	10/30/2012	Spoke with Heather & showed her Butrans titration piece. Pointed out titration interval of every 3 days & showed her that 20mcg is the maximum dose recommended. Also discussed ability for patients to take supplemental analgesia in the form of IR opioid or non-opioid medications. Discussed savings program & commercial insurance coverage. She asked about BWC. I let her know they are paying for it at this time. Reviewed OxyContin savings cards/usage & reminded her that cash-pay patients can use them every 14 days if their prescription is written that way.
PPLPMDL0020000001	Cleveland	OH	44130	10/30/2012	Spoke with Dave & presented Butrans titration piece. Discussed titration ability every 72 hours to a maximum of 20mcg. I asked if he has noticed any titration with Butrans in his customers. He said he hasn't dispensed a lot of it. Reviewed savings cards for Butrans & OxyContin.
PPLPMDL0020000001	Akron	OH	44312	10/30/2012	I showed dr the titration and supplemental analgesia piece and told dr that steady state with Butrans is 72 hours and he can titrate then if necessary. I asked if he has had the need to titrate in any of his Butrans patients? Dr said he has taken two of his patients from the 5mcg to the 10mcg because both are patients in more severe pain and they both told dr that they have had to take more breakthrough medicines because of the pain level. I told dr that he did exactly what he should have done and that I was glad to know he increased dose. I told him that the opioid experienced trial proves the need to titrate based on a larger proportion of patients achieving at least a 30% reduction on their 20mcg/hr dosen in pain compared to the 5mcg/h dose. Dr said the patients both said their pain is better controlled. I asked dr if he feels comfortable enough clinically with this medicine to use it more regularly? Dr said he will continue to look for the right patients.
PPLPMDL0020000001	Akron	OH	44319	10/30/2012	Discussed appropriate application sites for Butrans and reviewed patient information guide and showed how patients can track their patch rotation. Showed him the initiation and titration guide and what the appropriate starting dose should be based on the dose of IR opioids the patient is on.
PPLPMDL0020000001	Bedford	OH	44146	10/31/2012	Dr Moufawad asked if I knew anything about the new long-acting opioid REMS program. I gave him a packet for Butrans/OxyContin. He said he knows that sometime in the near future, they will be changing requirements to include giving the information to patients & having them sign something. He went on to discuss the importance of appropriate patient selection. I agreed. He said he wishes more primary care physicians would use tools like OARRS to help them not prescribe for some patients. I told him I encourage physicians to register for OARRS. Dr Moufawad said to keep doing this. He asked for more savings cards for Butrans & OxyContin for his other
PPLPMDL0020000001	Sagamore Hills	OH	44067	10/31/2012	I told Dr Scanlon that I wanted to present Butrans clinical data from trials in opioid-experienced patients in effort to further bolster his confidence in Butrans efficacy for appropriate patients. I showed him the study in the FPI & walked him through the design of the study. Showed him results & pain score reduction. Also incorporated the opioid-experienced clinical backgrounder & pointed out that 62% of patients in this study were on hydrocodone medications prior to the study. Also showed him inclusion/exclusion criteria. I asked if this sounds like his patients. He said many of them. I asked why not try Butrans on some of them if they are appropriate & meet the indication, adding that those with commercial insurance would have little or no out-of-pocket cost to try it. Dr Scanlon said Butrans is a good medication & it has "its place". I told Dr Scanlon I'd like him to try to make a bigger place for it in his practice in those appropriate patients. He agreed to try more patients on Butrans. I asked where he uses OxyContin. He said he tries to use it as infrequently as possible but agreed it is a good medication for the right patients. I asked him to consider OxyContin as an option for appropriate patients who are taking a form of IR oxycodone around-the-clock for moderate to severe pain.
PPLPMDL0020000001	Akron	OH	44310	10/31/2012	I spoke to Clinton about Butrans appropriate starting dose of Butrans based on the daily amount of morphine equivalents. I discussed titration of Butrans and titration at 72 hours. I asked if he has dispensed any recently? Clinton said that he has filled about 4 in the last month but could not remember who the prescribers are. I reviewed OxyContin doses and talked about appropriate patients.
PPLPMDL0020000001	Munroe Falls	OH	44262	10/31/2012	Provided overview of BUP 3015 and discussed all aspects of the trial focusing on titration, pain score reductions and tolerability. I asked dr if she had any questions and she said she was thinking about Butrans this morning for a patient on vicoden. I asked if she initiated Butrans and she said no because the patient is coming back in soon and she will consider it then. I reviewed dosing, appropriate patients, titration and conversions from IR opioids. Dr thanked me for keeping her in the loop with the info and she will let me know when she has a new start.
PPLPMDL0020000001	Sagamore Hills	OH	44067	10/31/2012	Reviewed Butrans with Dr Manuel & his medical student. Showed patients profiles & discussed appropriate patient type/range of patients. Also showed clinical study data from FPI & walked them through how both studies were conducted as well as results & pain score reductions. Discussed once weekly transdermal dosing & delivery system. Dr Manuel said that while he has never himself prescribed Butrans, he does like to know about different medications because there is a place for everything. Positioned Butrans for appropriate patients who are not well-controlled on tramadol, even if he is referring to pain management at that time. He said this is an area he would consider using Butrans. Discussed that Butrans is a CIII opioid with abuse & addiction potential. I asked if he uses OARRS. He said he does not because he is not very computer-literate. I gave him information on OARRS & encouraged him to sign up as a measure to protect his practice. I asked if OxyContin has any place in his practice. He said he doesn't write any at all. He said he would send anyone who came in on it to pain
PPLPMDL0020000001	Copley	OH	44321	10/31/2012	I asked TJ if she is the one who handles the managed care issues with products? She said she does but everyone in the office does it. I discussed Butrans to the staff. Explained the applications sites, CIII, 7 days, conversions from IR opioids. Dr said that he agreed to keep Butrans in mind and hopes it gets approved on Medicare. I told him that usage of the product can help ensure managed care access.
PPLPMDL0020000001	Sagamore Hills	OH	44067	10/31/2012	Quick call- Dr Mike said he couldn't stay long for lunch. He added that he would "keep Butrans in mind". I asked if he thinks he even has any patients for it or if he was just saying that he would "keep it in mind" out of habit. He said he might have some patients, but most of them he would try it on have Medicare.
PPLPMDL0020000001	Warrensville Heights	OH	44122	10/31/2012	Quick call- Pointed out OxyContin's 7 tablet strengths to Dr Zivic. I asked which he seems to use most of. He said he uses all of them, then thanked me & walked away.
PPLPMDL0020000001	Akron	OH	44320	10/31/2012	I spoke to dr about the patient types appropriate for Butrans by reviewing the inclusion criteria from BUP 3015 and William case study. Dr said she sees a lot of patients with low back pain who are probably on vicoden or perccet. I told dr about the pain score reductions seen in the clinical trials and that patients were force titrated to the 20mcg patch. Dr wants to ensure it is covered. I gave her overview of coverage and what to expect from Medicare and Medicaid.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	10/31/2012	quick hello through window and told dr that she can titrate Butrans every 3 days if necessary and patients can take opioids and non opioids for breakthrough pain. Dr said she really likes Butrans and told me whe would prescribe it more. I told her to look for Ultram or vicoden patients who need a dose adjustment who are not controlled. Left her with the titration and supplemental analgesia piece.
PPLPMDL0020000001	Akron	OH	44312	10/31/2012	I reviewed Butrans titration and use of supplemental analgesia piece. I discussed dosing, conversions, steady state and applications sites. The only prescription they have seen for Butrans was from Dr Cain and have not seen any prescriptions from any specialists.
PPLPMDL0020000001	Brooklyn	OH	44144	10/31/2012	Spoke with David & showed Butrans titration piece, pointing out 3 strengths & titration interval of 72 hours. Discussed maximum dose of 20mcg. He asked what the recommendation is with using 2 patches at once. I told him this has not been studied & is not recommended. He said he understands. I asked if he has noticed any titration of dose with his customers on Butrans. He said he hasn't noticed. Reviewed trial/savings program as well as OxyContin savings program.
PPLPMDL0020000001	Parma	OH	44129	10/31/2012	Quick call- Dr Kalin said he didn't have much time to talk today. I handed him the Butrans titration piece & showed 3 strengths/doses. Also reviewed titration interval of 72 hours. Reminded him that based on previous conversations about patient types, most of his patients would likely start at 10mcg with the possibility of titrating to 20mcg after 3 days. He thanked me, took the titration piece, & walked away.
PPLPMDL0020000001	Parma	OH	44129	10/31/2012	Spoke with Edwin & showed him titration piece for Butrans. I asked if he has noticed any titration with any Butrans customers. He said he thinks so. Pointed out titration interval of 72 hours & maximum dose of 20mcg/hr. Reviewed savings/trial cards & showed him both cards. Reviewed eligibility requirements for usage & went over OxyContin cards as well.
PPLPMDL0020000001	Independence	OH	44131	10/31/2012	Showed back of titration piece, featuring 3 Butrans strengths, to Dr Jack. He said he forgot there were 3 strengths & added that he is sure he is going to use it eventually. I gave him a new Butrans/OxyContin REMS packet & explained update.
PPLPMDL0020000001	Akron	OH	44320	10/31/2012	Dr had a patient in an exam room who he said he wanted to start Butrans for. Dr said that the patient is on oxycodone 5mg 4-5 times a day and he wanted to prescribe Butrans however the patients has Buckeye. Dr wanted to know if Butrans is covered on Buckeye. I told dr that it is not preferred on Buckeye and there will most likely be a PA. Dr said he is going to prescribe and see what happens. I asked if he has an issue with a PA? Dr said no because Barbara will do it. I told dr that he needs to initiate on the 10mcg patch and to begin the taper of oxycodone after steady state is reached at 3 days. Dr wants me to check back on Friday. Barbara was out today and will try back on Friday to discuss the PA for Buckeye. Spoke to Kendra(RAE) about Buckeye approval process.
PPLPMDL0020000001	Barberton	OH	44203	10/31/2012	I asked dr if his current patients are experiencing good pain relief on Butrans? Dr said they are doing very well. I asked dr that since his experience and his patients experience has been so positive why he is not prescribing it to new patients? Dr told me that he will be and said he knows where he wants to use it. I asked him if there are any limitations to using it that I need to know about? Dr said there are not any and said when he has a patients uncontrolled on vicoden he will prescribe Butrans. I told dr to use his patient experience kits.
PPLPMDL0020000001	Independence	OH	44131	10/31/2012	Handed Dr Rob a new Butrans/OxyContin REMS packet as he walked by. I explained the update for ER/LA opioids, letting him know this includes both CIII Butrans & CII OxyContin. He just said he doesn't write those & then walked into a room.

PPLPMDL0020000001	Akron	OH	44310	11/1/2012	Spoke to Stacey (office manager) about new OxyContin FPI and Medicare D plan coverage. Explained OxyContin appropriate patients with new piece and asked about Dr Taliwals and Brower's prescribing of OxyContin. Stacey said that Taliwal prescribes much more OxyContin than Brower and they use it for patients in severe pain.
PPLPMDL0020000001	Independence	OH	44131	11/1/2012	Quick call- Caught Dr Keppeler up front. I reviewed Butrans appropriate patient type/range & once weekly transdermal dosing. Reminded him that he has patient experience kits to provide patients which include a trial & savings offer. He just thanked me & walked away. Spoke with Diana & attempted to schedule a lunch or appointment, but they are still not doing them.
PPLPMDL0020000001	Warrensville Heights	OH	44122	11/1/2012	Dr Dimitri said he has been starting patients on Butrans. He added that he has started "a few" but he has not seen any of them back since starting them. I showed him Butrans titration piece with dosing. I asked if he would agree that most of his patients would likely start at 10mcg based on the patient type. He said yes. I pointed out that these patients can be titrated to 20mcg after 3 days if necessary. He said that was a good reminder. Also gave him new REMS packet for Butrans & OxyContin & explained update. I asked Dr Dimitri to continue to prescribing Butrans, making sure he gives a trial card to each patient with commercial insurance with their prescription. He agreed. I also asked if he would consider OxyContin q12h as an option for appropriate patients who are taking oxycodone around-the-clock.
PPLPMDL0020000001	Independence	OH	44131	11/1/2012	Dr Sundaram said he saw a patient earlier today who he thought of putting on Butrans but he did not the insurance would pay for it. I asked what plan. He looked in the patient's chart & it was Buckeye. I agreed that there would have likely been a fight with the insurance in that case. I asked why Butrans for this patient. He said because he keeps asking for more & more medication. I reminded Dr Sundaram that if a patient is in pain more than 80mg morphine equivalent, they are beyond the Butrans range. Re-directed him to appropriate patients in legitimate pain who are not well-controlled on 3-5 tramadol or Vicodin per day. I pointed out that in opioid-experienced studies, 62% of patients were on a hydrocodone combo & 21% an oxycodone combo. I asked if he has patients in this range. He said he does. I asked if some have commercial insurance. He said yes. I asked if he would identify one or two of them, write Butrans for them, & give them a trial/savings card with their script. He agreed. Also positioned OxyContin for appropriate patients who are taking Percocet around-the-clock.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	11/1/2012	Spoke to Stacey (office manager) about new OxyContin FPI and Medicare D plan coverage. Explained OxyContin appropriate patients with new piece and asked about Dr Taliwals and Brower's prescribing of OxyContin. Stacey said that Taliwal prescribes much more OxyContin than Brower and they use it for patients in severe pain. <font color=blue><b></b></font>CHUDAKOB's query on 11/09/2012<b></b></font>-Cliff, an office manager is not considered a non-HCP call. A non-HCP call is with a health care professional that is not a physician. While an office manager is that type of person, this should include ONLY RNs or MAS. If it is an NP or a PA, then it is a regular HCP call.<font color=green><b></b></font>REICHL's response on 11/14/2012<b></b></font>-I believe Stacey is an RN. I will check-<font color=blue><b></b></font>CHUDAKOB added notes on 11/25/2012<b></b></font>-Ok. Thanks!
PPLPMDL0020000001	Beachwood	OH	44122	11/1/2012	First Call: Spoke with receptionist, Shandana Holton, introduced self & purpose of call Re: Pain management & available resources. Left BCUUnable to meet with Nursing ADM staff d/t away at seminar. I was informed by receptionist that Cinthis Ezzone is no longer the D.O.N. The new D.O.N. is Phyllis Tabbs. Best to schedule an appt. to meet with her.
PPLPMDL0020000001	Mayfield Heights	OH	44124	11/1/2012	First Call: Spoke with Receptionist, Theresa George Introduced myself & purpose of call Re: Pain Management Education.Unable to meet with D.O.N., Sandra Brown (on vacation until 11/5/12) Advised by receptionist to call and set up an appt. Left BC
PPLPMDL0020000001	Beachwood	OH	44122	11/1/2012	First Call: Spoke with Receptionist, Carol Berger. Introduced myself and purpose of call. Re: Education on Pain Management/ Available ResourcesUnable to meet with D.O.N. Denise Trun or Director of Education, Merry Bunge.Advised to call for Appt. Left BC
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	11/1/2012	I told dr to use Butrans for his patients who are appropriate for a Cili, 7 day transdermal system. I reviewed the case studies of Emma and William again and asked him if they make sense? Dr said they do. I asked dr if he feels comfortable enough with the MOA of Butrans and the clinical pharmacology? Dr said he understands it and has read the information I have left him. I asked if he will prescribe it? Dr said he will at some point.<font color=blue><b></b></font>CHUDAKOB's query on 11/09/2012<b></b></font>-Cliff, please try to avoid using abbreviations in your call notes. I know it is easier, but sometimes they can be misinterpreted. Thanks for your help with this.<font color=green><b></b></font>REICHL's response on 11/14/2012<b></b></font>-sure-<font color=blue><b></b></font>CHUDAKOB added notes on 11/20/2012<b></b></font>-Thanks!
PPLPMDL0020000001	Beachwood	OH	44122	11/1/2012	First Call: Spoke with Receptionist, Jafunsa PageUnable to meet with D.O.N. Stephanie Forsythe or Nurse Educator d/t surveys on premises. Advised to call next week and make appt to meet with the D.O.N. Left BC
PPLPMDL0020000001	Parma	OH	44129	11/1/2012	Quick call- Handed Dr Al-Abousi new REMS packet for Butrans & OxyContin & updated her on REMS. Butrans dosing reminder, including ability to titrate every 3 days to a maximum 20mcg. She thanked me & walked away.
PPLPMDL0020000001	Beachwood	OH	44122	11/1/2012	Spoke with nursing staff who said Dr Dimitri actually has written some Butrans. They said they have not heard any type of feedback from anyone at this point though. I showed them patient information tear-off pads & asked if this is a tool they would utilize in discussing Butrans with patients. They said it would be very helpful & liked that it was concisely written on one page rather than a book. I asked what type of discussion they have with patients new to Butrans. They said they usually give them the booklet & savings card & tell them to change the patch every 7 days. I asked if titration is ever discussed, letting the patient know they may be moved to a higher dose after 3 days or more. They said no. I asked that they start doing this & recommended some sort of patients follow-up after 3 days to see if they needed to be titrated or not. They said they would start doing this. They asked how OxyContin is doing then added that many doctors don't like to have patients on it. I asked why they think that is. They said because of the stigma & negative media attention. I asked if they realized it is the same medication as Percocet in a q12h dose. A few of them were aware of this & others were not & were surprised. I asked that if they identify a patient who may benefit from a q12h dose of OxyContin that they bring this to the
PPLPMDL0020000001	Parma	OH	44134	11/1/2012	Spoke with floater pharmacist & showed Butrans titration piece. Pointed out titration interval of 72 hours & maximum dose of 20mcg. Showed her that patients are allowed to take supplemental analgesia if necessary in the form of IR opioids or non-opioid medications, which is what we offered in studies. Reviewed savings programs for Butrans & OxyContin.
PPLPMDL0020000001	Parma	OH	44129	11/1/2012	Dr Gigliotti said one of the patients he put on Butrans reported back that he wasn't able to use the savings card & did not want to pay out-of-pocket for it. I asked what prescription insurance coverage this patient has. He said he wasn't sure. Reviewed favorable commercial coverage & trial/savings card utilization. I asked what type of discussion he has about Butrans with his patients. He said he tells them how to put in on & that they wear it for a week. I asked if he tells them up front that there is a possibility they will need to be titrated to the next highest dose after 3 days. He said he does. I told him this is a good idea. Gave him new REMS packet for Butrans & OxyContin & explained update.
PPLPMDL0020000001	Bedford	OH	44146	11/1/2012	Spoke with Steve & showed Butrans titration piece, pointing out 3 doses. Discussed titration interval of 72 hours & maximum dose of 20mcg. Showed him that patients can take supplemental analgesia in the form of IR opioid or non-opioid medications if necessary. I asked if he has noticed any customers being titrated with Butrans. He said no. Reviewed Butrans & OxyContin savings programs & eligibility requirements for usage. He said he didn't need any for now.
PPLPMDL0020000001	Akron	OH	44305	11/1/2012	Gave 30 second overview of BUP 3015 showing patients randomized to 5, 20mcg and an active control. Showed him the 49% of patients gaining at least 30% reductions in pain on the 20mcg compared to the 5mcg at 33%. Discussed the tolerability of Butrans that was seen in the trial reviewing the AE's over 5% focusing on the incidence of constipation. I asked dr if the IR opioids have a higher or lower incidence than what Butrans shows? Dr said he does like the side effect profile and likes Butrans because he wants to move more of his patients on IR opioids off of them and Butrans is a good option. I asked dr for continued commitment.<font color=blue><b></b></font>CHUDAKOB's query on 11/09/2012<b></b></font>-Cliff, this is a touchy subject. When you focus on a specific side effect, and then ask the physician how it compares to other IR, it appears you are implying that Butrans has a lower rate of constipation than other IR opioids. Obviously we have no data to support this. You can however ask him to look at all the side effects and asks if anything surprises him. Then you are not comparing to any other product or group of products. I hope this makes sense. If not, let me know. Thanks-<font color=green><b></b></font>REICHL's response on 11/14/2012<b></b></font>-got it.<font color=blue><b></b></font>CHUDAKOB
PPLPMDL0020000001	Akron	OH	44320	11/2/2012	Spoke to dr about his patient he prescribed Butrans for on Wednesday. I told dr that I had Brian complete the PA form for Buckeye and would be faxed in today. Dr thanked me for doing that and said he thinks Butrans will work well for his patients. I asked him to continue using Butrans for his patients failing on vicoden or oxycodone.
PPLPMDL0020000001	Middleburg Heights	OH	44130	11/2/2012	Spent time discussing appropriate patient selection with Dr Kaushal. She said she is a big user & fan of OARRS. I told her this is a great tool to utilize to protect the practice. I gave her information on PAP & PurdueHCP.com for her to look at various other tools to protect the practice. She was very appreciative of this & said she is highly interested in learning more about these resources. I gave her my card & let her know I am available if she has any questions or needs additional information & let her know I would follow-up regarding these resources. Presented Butrans studies including design, patient type/selection, & results. Showed her titration piece & discussed ability to titrate every 3 days to a maximum 20mcg, pointing out the 3 strengths. Also discussed ability to use supplemental analgesia if necessary, showing her that in studies, patients were allowed APAP or ibuprofen for this purpose. Discussed savings/trial program & asked her to give one with each script for eligible patients. She agreed. Discussed OxyContin as a q12h dose of oxycodone. Also discussed abuse/addiction potential of all opioid medications. Recommended Senokot-S for opioid- & medication-induced constipation.
PPLPMDL0020000001	Middleburg Heights	OH	44130	11/2/2012	Positioned OxyContin q12h for appropriate patients who are taking an IR formulation of oxycodone around-the-clock for a chronic condition. Presented Butrans opioid-naïve & opioid-experienced studies & discussed dosing & titration. Discussed ability to titrate every 3 days to a maximum 20mcg dose. Also discussed pain score reductions from studies & once weekly transdermal dosing. Reviewed ability for patients to use supplemental analgesia if necessary. Spent time discussing appropriate patient selection, asking him to focus on patients who are in legitimate pain. Reviewed abuse/addiction potential of opioid medications, including Butrans & OxyContin. Reviewed trial & savings cards & asked him to give one with each prescription. He agreed.
PPLPMDL0020000001	Middleburg Heights	OH	44130	11/2/2012	Positioned OxyContin q12h for appropriate patients who are taking an IR formulation of oxycodone around-the-clock for a chronic condition. Showed 7 tablet strengths. Presented Butrans opioid-naïve & opioid-experienced studies & discussed dosing & titration. Discussed ability to titrate every 3 days to a maximum 20mcg dose. Also discussed pain score reductions from studies & once weekly transdermal dosing. Reviewed ability for patients to use supplemental analgesia if necessary. Spent time discussing appropriate patient selection, asking him to focus only on patients who are in legitimate pain. Reviewed abuse/addiction potential of opioid medications, including Butrans & OxyContin. Reviewed trial & savings cards & asked Dr Munjapara to give one with each prescription. He agreed. Discussed various practice tools such as OARRS, urine drug screens, pain contracts, & pain diaries as ways to protect the practice. Gave him information on PAP & PurdueHCP.com for his reference.
PPLPMDL0020000001	Akron	OH	44320	11/2/2012	Discussed with dr and Brian (ma who is doing the PA's) about the patient from Wednesday who was initiated on Butrans with Buckeye. Brian and Dr Adams filled out the PA for for Buckeye. Brian was faxing it to Buckeye today and will let me know what the result is. I asked dr Adams if she will use Butrans next week when she has a patient on an IR opioid in one of her exam rooms who needs a dose adjustment? Dr said she continues to look for patients who Butrans will work for. Reminded her of the copy cards and trial offer.
PPLPMDL0020000001	Akron	OH	44310	11/2/2012	Focus on driving home point of William case study on vicoden and needs a dose adjustment. use inclusion criteria for BUP 3015 to show 62% of patients in study were on hydrocodone combinations. Aetna preferred.
PPLPMDL0020000001	Beachwood	OH	44122	11/2/2012	Quick call- Dr Tabbaa said he was on his way out of the office. I handed back the new OxyContin/Butrans REMS packet & told him about the update. He asked if there is anything he has to do. I told him that at this time, there is not a requirement, but there are resources may be useful for him & his practice & encouraged him to read through the packet.
PPLPMDL0020000001	Independence	OH	44131	11/2/2012	Saw Dr Pai at the window- Showed him 7 strengths of OxyContin tablets & let him know this is for individualization of dosing/titration, pointing out that a patient could go from 10mg to 15mg instead of to 20mg if appropriate. He thanked me & walked away. Spoke with Jill & reviewed Butrans prior authorization requirements for Caresource.
PPLPMDL0020000001	Northfield Center	OH	44067	11/2/2012	Spoke with Stephanie & showed Butrans titration piece, pointing out 3 strengths. Discussed 72 hour titration interval & maximum dose of 20mcg. Also reviewed savings programs for Butrans & OxyContin. Reviewed eligibility requirements for card utilization.
PPLPMDL0020000001	Parma	OH	44129	11/2/2012	Quick call- Passed back new Butrans & OxyContin REMS packet & updated Dr Salama. He said he would have a look. Reminded him of ability to titrate Butrans every 3 days. He thanked me & walked away.
PPLPMDL0020000001	Hudson	OH	44236	11/2/2012	Quick call- Caught Dr Seiple at the window. Passed back Butrans titration piece & showed 3 strengths. Also pointed out minimum titration interval of 72 hours & maximum dose of 20mcg. Dr Seiple said he would try to find some patients & walked away.
PPLPMDL0020000001	Cleveland	OH	44130	11/2/2012	Spoke with Dawn & reviewed Butrans once weekly transdermal delivery. Also showed titration piece & pointed out ability to titrate every 3 days. Showed maximum dose of 20mcg. She said she hasn't seen any prescriptions & asked what insurance plans cover it. Discussed commercial insurance favorable coverage & Caresource prior authorization requirements. Reviewed trial/savings program & OxyContin savings cards.
PPLPMDL0020000001	Uniontown	OH	44685	11/2/2012	Dr told me that he moved a patient to the 10mcg patch from the 5mcg. I asked what the patient was on prior to Butrans? Dr said the patient was on vicoden and said he should have initiated on the 10mcg patch. I reviewed the titration and supplemental analgesia piece. Dr said he doesn't see the need for the patient to use his vicoden for breakthrough. I told dr that patients can also use NSAIDS as well for breakthrough. Reminded dr to use the Butrans patient experience kits and to use the trial cards for a possible 28 days free.
PPLPMDL0020000001					

PPLPMDL0020000001	Akron	OH	44312	11/5/2012	I asked dr about his use of OxyContin and he said he no longer prescribes CII medicines. Too much trouble in his office. He refers to CPM[Fouad]. I explained Butrans dosing, CII same as vicoden and reviewed William and showed him from inclusion criteria that 62% of patients in trials were on hydrocodone medicines. Dr said he has a patient taking vicoden 5/325 qid and is considering Butrans. Dr said the patient has spinal stenosis and he doesn't want to give any more vicoden. I told dr he needs to initiate on the 10mcg dose and he can titrate every 72 hours if needed. Dr asked about managed care coverage and I told him to stick with private prescription insurance and it also just went to 2nd tier on Aetna. Dr said he is going to prescribe Butrans for that patient.
PPLPMDL0020000001	Akron	OH	44312	11/5/2012	I asked dr if he had initiated any patients on Butrans since my last visit? Dr said he had a patient on tramadol who he prescribed Butrans for. Dr said he remembers there being a problem with the patient getting it but couldn't remember what plan the patient had. I spoke to his ma and she said it was a Medicare patient. I told dr that he should continue looking for patients on any IR opioids who need a dose adjustment. Showed him the case studies and gave quick explanation for each. Dr said he will continue to look for appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44144	11/5/2012	Dr Paul said she has written Butrans for a few patients who had come to her on it from pain management. She asked about insurance coverage. Reviewed this information with her, asking her to focus on appropriate patients who are commercially insured. Also reviewed Caresource prior authorization requirements. Dr Paul said she thinks Butrans is a "good drug" & said she would prescribe it for the right patient. I asked her what makes her say it is a good drug. She said she likes that it is a patch because she thinks it is less likely to be abused. I reminded her that Butrans is a CII opioid & that all opioids, including Butrans, have abuse/addiction potential. She said she still thinks it is less likely to be abused. I told her we have no data saying that & told her she should be just as cautious in prescribing Butrans as she would for any opioid. She asked about side effects. Showed her FPI adverse events. Also showed her discontinuation rates from studies. Reviewed opioid-naïve & opioid-experienced study design & results. Discussed titration every 72 hours. Gave her REMS packet for Butrans/OxyContin & explained update. Also recommended Senokot-S for opioid-induced constipation & gave her samples.
PPLPMDL0020000001	Akron	OH	44333	11/5/2012	I told dr Ahmad and Jen about OxyContin being covered on 82% of lives Nationally and that Butrans just got picked up on Aetna 2nd tier preferred. I asked if Their practice sees much Aetna prescription plans? Jen told me that they have a pretty good amount. Dr said that since Aetna was picked up that Butrans must be doing well? I told dr that managed care coverage is somewhat dependent on product usage and it is improving. told dr to continue to find appropriate patients on oxycontin for OxyContin and vicoden patients uncontrolled for Butrans.
PPLPMDL0020000001	Parma	OH	44129	11/5/2012	Quick call- Reviewed Butrans maximum dose of 20mcg & ability for patients to take supplemental analgesia in the form of non-opioid or IR opioid medications with Elaine. Spoke with Dawn & updated her on Butrans's tier 2 preferred status on Aetna. Dawn took notes & said this was great news because she remembers at least one patients who had a very high co-pay for Butrans on Aetna.
PPLPMDL0020000001	Independence	OH	44131	11/5/2012	Quick call- Reviewed broad OxyContin formulary coverage with Dr Trickett & updated her on Butrans tier 2 preferred status with Aetna. She said that was good news, thanked me, & walked back to a room.
PPLPMDL0020000001	Akron	OH	44319	11/5/2012	Showed Tomas the Butrans information guides and patient tear sheets and asked him if they would be helpful to the pharmacy? He said they would and liked the guides. I reviewed the application sites and when to titrate at 72 hours.
PPLPMDL0020000001	Chagrin Falls	OH	44023	11/5/2012	Spoke with Jeff & showed Butrans titration piece, pointing out all 3 strengths. Also showed him that minimum titration interval is 72 hours & maximum dose is 20mcg. I asked if he stocks all the strengths & if he has noticed any titration in dosing for customers. He said he probably has them all & hasn't noticed anything. Discussed trial/savings program & OxyContin savings cards.
PPLPMDL0020000001	Brooklyn	OH	44144	11/5/2012	Dr Hilton came in to lunch stating that she really has no interest in any opioid medications & asked me what information I had for her. Reviewed Butrans dosing with titration ability every 72 hours. Also gave her new Butrans/OxyContin REMS packet & explained update. She just walked away.
PPLPMDL0020000001	Parma	OH	44134	11/5/2012	Dr Mandat said he has actually had several new starts on Butrans lately & added that patients have been responding well to it, so he plans to keep using it. Reviewed ability to titrate every 72 hours & maximum dose of 20mcg. He said he rarely needs to go to 20mcg but thanked me for the information. Recommended Senokot-S for opioid-induced constipation & gave samples. He asked for Colace samples. I told him I would try to obtain Quick call- Caught Dr Rood at the window. Handed him Butrans titration piece & pointed out the 3 strengths & titration interval of 72 hours. He thanked me & walked away.
PPLPMDL0020000001	Chagrin Falls	OH	44022	11/5/2012	Provided review of the BUP 3015 from the FPI and focused on three main points. Forced titration starting at the 10mcg dose and % of patients moved to double blind, pain score reductions and 20mcg vs 5mcg dose for pain reduction and tolerability. I asked dr what kind of things his patients are saying about there ability to tolerate Butrans. Dr said his patients have not told him anything. I asked what it means to him and potentially his patients with the 6% incidence of constipation at the 20mcg dose? Dr said its good. Dr provided no clinical experience with Butrans.
PPLPMDL0020000001	Akron	OH	44333	11/5/2012	Updated Dr Taylor on Butrans's tier 2 preferred status on Aetna's formulary, letting her know this is evidence that Butrans coverage continues to improve. Positioned OxyContin, with 7 tablet strengths, for appropriate patients taking IR oxycontin around-the-clock.
PPLPMDL0020000001	Parma	OH	44129	11/6/2012	Placed Follow-up phone call to Phyllis Tabbs @ 216-464-1000 x112, was connected to: Celeste, Asst. Director of Nursing. N/A, left msg.
PPLPMDL0020000001	Beachwood	OH	44122	11/6/2012	Quick call- Dr Fedorko said he has a patient in a room with lumbar stenosis but added that this patient has Medicare so he cannot give him Butrans, so he is giving him hydrocodone instead. I agreed that he may have difficulties with Medicare formularies, but let him know that Aetna just added Butrans to their formulary at tier 2 preferred status, pointing out improving insurance coverage. I asked if he can think of any patients with commercial insurance, like working patients, who fit the Butrans criteria. He said he can only think of Medicare patients right now & then walked into a room.
PPLPMDL0020000001	Cleveland	OH	44130	11/6/2012	Spoke with Judy Kaptein, Evening Receptionist, introduced self and Purpose of visit. Re: pain & pain Management education. Met briefly with D.O.N., Katherine Myers. explained purpose of visit. Agreed to set up an appt. to meet w/ me.
PPLPMDL0020000001	Parma Heights	OH	44130	11/6/2012	Spoke with Receptionist, reluctant to give her name. Unable to meet with D.O.N., Cathryn Kader today d/t/ an event/program taking place. Advised to call and schedule appt. to meet with her. Left BC
PPLPMDL0020000001	Parma	OH	44134	11/6/2012	Placed follow-up phone call to D.O.N. Stephanie Forsythe @ 216-831-4303, N/A, left msg.
PPLPMDL0020000001	Beachwood	OH	44122	11/6/2012	Updated Dr Roheny on Butrans's tier 2 preferred status on Aetna formularies & told him this is evidence of Butrans coverage improving. Also reviewed prior authorization requirements on Caresource. I asked if he thought he could identify a patient this week who may benefit from Butrans who has coverage on one of those plans. He said he does have a lot of Caresource patients. I asked if he can think of any who fit the Butrans indication. He said he probably has a few. I asked him to write Butrans for one or two of them. He said he would try. Broad formulary coverage for OxyContin message.
PPLPMDL0020000001	Parma	OH	44129	11/6/2012	Updated Myra on Butrans's tier 2 preferred status on Aetna's formulary, letting her know this is evidence that insurance companies are taking notice of Butrans & coverage continues to improve. She said she likes Butrans & has had many successes for patients on it. She said she has been using it to help decrease the amount of hydrocodone a patient takes. She said she increases the Butrans while decreasing the hydrocodone. I showed her titration piece, pointing out titration ability every 72 hours & maximum dose of 20mcg.
PPLPMDL0020000001	Parma Heights	OH	44129	11/6/2012	Spoke with Larissa, pharmacist, & showed Butrans titration piece. She said she doesn't think they have filled any Butrans there, adding that they see a lot of Medicare & Medicaid there. I reviewed Caresource prior authorization requirements with her & discussed broad access on commercial formularies. Also reminded her of trial/savings program, reviewing eligibility requirements. Discussed OxyContin savings program- she said she had Spoke to Rosemary about Butrans initiation dose based on amount of daily dose of IR opioids. Showed her the conversion guide and titration and supplemental analgesia guide. Spoke about ability of patients to use supplemental analgesia for breakthrough pain. Rosemary said she had the 5 and 10mcg but no 20mcg. She said that patients she sees would be more suitable on the 10mcg darting dose. Reviewed managed care and I asked dr if he has initiated Butrans since our last call? Dr said he has not and he does not know why because he believes Butrans is a good medicine. Dr said he guesses he just cant remember to use it. I told dr to remember it when he has a patient who needs a dose adjustment for a patient on an IR opioid. Showed dr the doses and application sites and told him that Butrans is the only CII for moderate to severe pain that uses 1 patch for 7 days. I gave review of managed care coverage and told him to look for those patients discussed that have commercial insurance. Dr agreed to try it.
PPLPMDL0020000001	Norton	OH	44203	11/6/2012	Spoke with receptionist, Debbie. Introduced myself and purpose of visit. Re: Pain & Pain Management education. Unable to speak with D.O.N., Rena O'Hara. Debbie stated, "You must first make an appt. with Linda Belford in staff Development." Left BC
PPLPMDL0020000001	Parma	OH	44134	11/6/2012	Pointed out broad OxyContin formulary coverage & q12h dosing & updated Dr Diab on Butrans's tier 2 status on Aetna formulary. He just said this was "good" & walked into a room.
PPLPMDL0020000001	Cleveland	OH	44130	11/6/2012	Followed up on last call when dr told me that a vicoden patient she spoke to about Butrans refused to take it and it would cost too much \$. I showed dr the patient information guide for Butrans and told her the next time she speaks to a patient about Butrans that she needs to hand them this info to help the patient understand what Butrans is about to supplement what you have discussed about the product. Dr liked that idea and wanted me to put them in the cabinet. Dr asked about cost and I told her about the plans and Aetna win along with looking for patients that have private prescription insurance.
PPLPMDL0020000001	Parma	OH	44134	11/6/2012	Spoke with the receptionist, Roseanne. Introduced myself & purpose of visit. Re: Pain & Pain Management Education. Not able to speak w/ the D.O.N., Julie Swindell, appt needed.
PPLPMDL0020000001	Akron	OH	44320	11/7/2012	Quick message about Butrans at counter and asked her if she has put any more thought about using Butrans for her patients on short acting opioids that require more for their persistent pain? Dr admitted she had not but said she will use it and asked about coverage. I explained Caresource PA, BWC, and new Aetna coverage. I showed her the conversion guide and explained appropriate starting dose. <font color=blue><b>CHUDAKOB's query on 11/14/2012</b></font><b>Cliff, the use of the more more implies that Butrans might provide better pain relief than what she already has her patient on and this is clearly not the case. Instead of more discuss Butrans as a different option for controlling the patients pain. Comparative words of any kind cannot be used as we have no comparative data.<font color=green><b>REICHCL's response on 11/20/2012</b></font><b>got it</b><font color=blue><b>CHUDAKOB added notes on 11/25/2012</b></font>Thank you!
PPLPMDL0020000001	Bedford	OH	44146	11/7/2012	Quick call- Passed back new OxyContin/Butrans REMS packet & explained update. Also updated Dr Haddad on Aetna's coverage of Butrans on formulary as tier 2 preferred. He said he would try it.
PPLPMDL0020000001	Akron	OH	44303	11/7/2012	I asked Rod which doses of OxyContin he dispenses the most and what age ranges does he see most filling for. Rod said the uses all the doses but the 10, 20, 40, 60mg are dispensed most. Rod said there is no age specific patients getting OxyContin. It varies. I asked him to continue to use the copy cards for patients.
PPLPMDL0020000001	Mayfield Heights	OH	44124	11/7/2012	Phoned D.O.N., Sandra Brown N/A, Left Msg.
PPLPMDL0020000001	Akron	OH	44320	11/7/2012	I asked dr if she has initiated any additional patients on Butrans? Dr said she has not. I asked why and she said that she does not know but said she will continue to remember it when she has a patient with a chronic condition who would benefit from Butrans. I showed her the initial starting dose conversions and reason to titrate. I gave her an invite to the program and she said that day is good for her and she may attend.<font color=blue><b>CHUDAKOB added notes on 11/14/2012</b></font>That would be great if she could attend. See if you can get her to put it in her calendar. This might then become more of a firm commitment.
PPLPMDL0020000001	Munroe Falls	OH	44262	11/7/2012	Gave quick message about using Butrans for her patients that are in persistent pain and the short acting products are not working. Dr thanked me for reminding her and she plans to use it. I told her about Aetna coverage.<font color=blue><b>CHUDAKOB's query on 11/14/2012</b></font><b>Cliff, while the word persistent does appear once in the FPI under section 6.1, there is nothing that relates Butrans as a product to the treatment of persistent pain. This is a word we cannot use in presentations. Butrans is indicated for chronic pain and should only be discussed in such terms. If you need more clarification, please let me know. Thanks Cliff.<font color=green><b>REICHCL's response on 11/20/2012</b></font><b>got it</b><font color=blue><b>CHUDAKOB added notes on 11/25/2012</b></font><b>OK. Thanks!
PPLPMDL0020000001	Akron	OH	44333	11/7/2012	Dr said he prescribed Butrans for two ladies last week that were both taking vicoden for low back problems. He said that one lady called in and said it is working great. Dr said one of them was initiated on the 10mcg dose and the other on 5mcg dose based on their amount of vicoden. Dr also said that another male patient who has Lupus was taking Butrans 10mcg since June stopped the steroids he was on then broke out in a body rash. The patient stopped Butrans and the rash went away. Dr suspects that the steroid was keeping the rash at bay. Dr said the patient called Purdue and reported the incident. I told dr I wanted him to continue prescribing and to be giving out the experience kits. Dr said he will and thinks the kits are great for the patients because it makes them feel special.
PPLPMDL0020000001	Twinsburg	OH	44087	11/7/2012	Spoke with Lou & reviewed Butrans dosing & titration. Showed titration piece with minimum titration interval of 72 hours & pointed out maximum dose of 20mcg. Lou asked if patients can wear two patches of one strength to titrate. I told him this has not been studied & is not recommended. He asked what that would cost a patient. Discussed commercial insurance plans, trial/savings card & let him know patients can get more than one prescription for Butrans per month if they are being prescribed a higher dose due to titration. Reviewed OxyContin 7 tablet strengths for individualization of dosing/titration.

PPLPMDL0020000001	Broadview Heights	OH	44147	11/7/2012	Spoke with Stephanie, showing her Butrans titration piece. Reviewed dosing & titration ability every 3 days. Also pointed out highest dose of 20mcg. Discussed ability for patients to take supplemental analgesia. Reviewed insurance coverage & updated her on Aetna's formulary. Discussed trial/savings offer for Butrans & OxyContin savings cards. She said they did not need any cards.
PPLPMDL0020000001	Broadview Heights	OH	44147	11/7/2012	Spoke with Stephanie, showing her Butrans titration piece. Reviewed dosing & titration ability every 3 days. Also pointed out highest dose of 20mcg. Discussed ability for patients to take supplemental analgesia. Reviewed insurance coverage & updated her on Aetna's formulary. Discussed trial/savings offer for Butrans & OxyContin savings cards. She said they did not need any cards.
PPLPMDL0020000001	Alkon	OH	44312	11/7/2012	Spoke to pharmacy staff about products. Reviewed Butrans key selling messages and reviewed dosing and titration. Pharmacy has the 5mcg in stock. Discussed OxyContin doing and titration every 1-2 days. Pharmacist said they use the 10, 20 and 40mg most. Discussed copy cards for both products.
PPLPMDL0020000001	Parma	OH	44129	11/7/2012	Dr Khoobal said he has written Butrans for a patient recently & said he has not heard back from them. I asked if he typically asks the patient to follow up after 3 days. He said not usually & asked why. I showed him titration interval of 72 hours & let him know it is possible the patient would need to be titrated after the first 3 days, & possibly again after that to the maximum 20mcg. He said he thinks the patients will call if something isn't working for them. I encouraged him to have some sort of contact with patients after 3 days of starting on Butrans to assess whether the patient needs to be titrated or not.
PPLPMDL0020000001	Copley	OH	44321	11/7/2012	Dr was talking about how his patients are asking him for more vicoden and tramadol and he will not give it to them. I told dr that that is where he should use Butrans. Reviewed conversion chart and titration guide to show him where he should initiate based on the amount of IR opioid. Told him about the need to titrate and use supplemental analgesia. Told dr he could use non opioid analgesics for breakthrough pain. Discussed managed care and explained Aetna win.
PPLPMDL0020000001	Bedford	OH	44146	11/7/2012	Dr Moufawad saw the patient information tear-off sheets in my arm & said he has been giving them to patients when he starts them on Butrans. He added that he has given out 3 sheets so far. I asked how he is utilizing them when he talks to his patients- what does it sound like. He said he shows them application sites & tells them to rotate the site each week. He said he does need to do a better job of telling them not to go back to the same site for 3 weeks though. I agreed that this would be good information to relay. Dr Moufawad said he does let patients know that titration is a possibility & also discusses supplemental analgesia. He said his patients are getting good results. He added that he is still writing OxyContin as well, reminding me that he has come a long way with that medication.
PPLPMDL0020000001	Broadview Heights	OH	44147	11/7/2012	Dr Samuel said he just wrote OxyContin. He said he actually really likes it for his older patients at the 10mg dose q12h. He said he finds it to be effective & well covered for this population of patients. He said he has tried to write Butrans a few times but has had all of them denied due to Medicare not covering it. He said it seems that all his patients who he wants to use it for are 75 & older because they are the ones on "lower" doses of opioids. I asked what he finds patients 50-60 typically on. He said, for example, 4 Vicodin per day. He added that he would be reluctant to write Butrans for this type of patient because He had tried Butrans early on for a patient who had been on opioids before & that patient had issues with withdrawal. I showed Dr Samuel that a patient on 4 Vicodin per day does fall into the appropriate range of patients & they would start at 10mcg. I also showed that this patient could be titrated, if necessary, after 72 hours to 20mcg. I told Dr Samuel to consider discussing the likelihood of titration with the patient at the time of initiation. Also showed Butrans study designs & results, pointing out that even opioid-naïve patients were titrated to 20mcg if adequate analgesia was not established at 10mcg. Dr Samuel said he would now consider using Butrans in that patient type (4 Vicodin per day). Discussed savings program & asked him to give them a card when he writes the prescription. He agreed.
PPLPMDL0020000001	Broadview Heights	OH	44147	11/7/2012	Dr Samuel said he just wrote OxyContin. He said he actually really likes it for his older patients at the 10mg dose q12h. He said he finds it to be effective & well covered for this population of patients. He said he has tried to write Butrans a few times but has had all of them denied due to Medicare not covering it. He said it seems that all his patients who he wants to use it for are 75 & older because they are the ones on "lower" doses of opioids. I asked what he finds patients 50-60 typically on. He said, for example, 4 Vicodin per day. He added that he would be reluctant to write Butrans for this type of patient because He had tried Butrans early on for a patient who had been on opioids before & that patient had issues with withdrawal. I showed Dr Samuel that a patient on 4 Vicodin per day does fall into the appropriate range of patients & they would start at 10mcg. I also showed that this patient could be titrated, if necessary, after 72 hours to 20mcg. I told Dr Samuel to consider discussing the likelihood of titration with the patient at the time of initiation. Also showed Butrans study designs & results, pointing out that even opioid-naïve patients were titrated to 20mcg if adequate analgesia was not established at 10mcg. Dr Samuel said he would now consider using Butrans in that patient type (4 Vicodin per day). Discussed savings program & asked him to give them a card when he writes the prescription. He agreed.
PPLPMDL0020000001	Parma	OH	44134	11/7/2012	I asked Dr Hernandez what he thinks is the best way for me to explain a molecule like buprenorphine to primary care physicians. He said the best thing to do would be to get 4-5 of them in his office & he would talk to them about Butrans. I told him we are not able to do that. He said it makes no sense for a company to not allow that because it would help sales of the product. I told him that the top priority is doing what is right, not making sales. I told him I am confident that I can increase proper utilization of our products while still following all our rules, restrictions, & guidelines. Dr Hernandez said he has seen a few patients coming in on Butrans, which he added is good to see. I asked if these patients report good results. He said yes. He said continues to have success taking a patient from higher doses of Opana & OxyContin to Butrans. I asked what about patients on up to 80mg morphine equivalent like we recommend. He said those patients do well also. I asked if he thought he would have a new patient or two he could start on Butrans this week & he said he probably does.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	11/8/2012	Showed dr the Butrans conversion scale from IR opioids and titration and supplemental analgesia piece and asked dr how his patients are doing on Butrans? Dr said they are all doing well and it is helping. Dr said he is moving his patients from vicoden and oxycodone to Butrans. I asked if he is had to titrate? Dr said he has taken a few patients to the 20mcg and it is providing good relief. Dr said that Butrans in his experience is not for the severe pain patients because it isn't strong enough. I showed the pain score reductions with the 20mcg dose and graph from the 3015 trial. I asked him to continue to titrate to the 20mcg if patients day they are still in pain. Dr agreed to continue to use. explained copy cards and trial offer with dr and Glenn(pharmD). Provided patient information guides to Glenn, Dr Narouze and Dr Sable to help their patients understand their therapy better and may reduce call backs and improper usage of Butrans.
PPLPMDL0020000001	Cleveland	OH	44130	11/8/2012	Dr Kansal said he does still have some patients on OxyContin, adding that he is not taking anyone new with pain & is getting rid of some of the existing ones. I asked him to focus on patients who he would otherwise be writing opioids for for the purpose of this conversation as those would be the only types of patient who I would ask him to write either OxyContin or Butrans for. Reviewed once weekly transdermal dosing & 3 strengths of Butrans & q12h dosing & 7 tablet strengths of OxyContin. Also reviewed appropriate patient type/range for OxyContin & that of Butrans. Dr Kansal said the problem is that patients want to stay on their short-acting medications. I asked if he likes having them on those medications. He said no. I asked why, then, allow the patient to determine what they are on if he thinks another option may benefit them. He did not respond. Discussed ability to take supplemental analgesia. I asked if he could think of anyone at all who would be a good fit for Butrans. He asked Dorothy her thoughts. She named a patient & Dr Kansal asked what she was taking. The patient is currently taking Percocet 40mg per day total & has Medical Mutual (non-Medicare). I showed initiation guide & showed Dr Kansal instructions on starting this patient. Also discussed titration to 20mcg after 72 hours if necessary. Reminded Dr Kansal of trial/savings cards & asked him to Rx Butrans for this patient & give her a savings card. He agreed & put Butrans literature in her chart
PPLPMDL0020000001	Beachwood	OH	44122	11/8/2012	Roberta said she went to a NP conference recently where they discussed the ability to prescribe CII drugs like OxyContin. She also said the expert was talking about giving patients a long-acting opioid if they are taking 4 doses of short-acting opioid per day. She said this expert also said the patient should not be offered a short-acting opioid for supplemental analgesia, but should be given a non-opioid for this purpose. I told Roberta this was interesting & showed her Butrans titration piece. Discussed recommended starting doses & ability to titrate every 72 hours. Pointed out maximum dose of 20mcg & ability for patients to take supplemental analgesia. I showed her that in clinical studies, we allowed only acetaminophen or ibuprofen for supplemental analgesia. She said that was surprising but goes along with what the expert had told them. She also said this expert spoke highly of Butrans as an option. Reviewed trial/savings program. I asked Roberta to try Butrans, likely at the 10mcg dose, for an appropriate patient or 2 today & asked her to give them a savings card with the prescription. She said she preferred status. He just thanked me & walked away.
PPLPMDL0020000001	Shaker Heights	OH	44122	11/8/2012	Positioned OxyContin as a q12h form of oxycodone for appropriate patients who are taking an IR form of oxycodone around-the-clock. Also updated Dr Agarwal on Aetna's addition of Butrans to their formulary at tier 2
PPLPMDL0020000001	Stow	OH	44224	11/8/2012	Spoke with Corey and he said he has been seeing Butrans scripts, he thinks most of them go through Bressis pharmacy but they get a few a month. he said they are using the trial cards. I let him know about managed care coverage and if he sees patients who are appropriate for Butrans.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	11/8/2012	Saw dr at window and asked her how her patients on Butrans were doing and if she needs anything? Dr said she hasn't used it recently but the patient on it are doing well. I told her to use Butrans when she has a patient on an IR opioid who tells you they need more. I handed her an invite to the dinner program on 12/12 and she said she can't make it because of the kids. I told dr to use the trial offer cards for 28 days of free if the copay is under
PPLPMDL0020000001	Stow	OH	44224	11/8/2012	Reviewed inclusion data in opioid naïve study and asked if he sees patients like this and he said yes. I said these are the right patients for Butrans. I showed pain reduction in opioid naïve study and he said that is good to see. He said this is more for the moderate patient and I said yes. I reviewed dosing and managed care coverage. he asked about medicare and I said no, but he has option of low dose Oxycontin as an option
PPLPMDL0020000001	Stow	OH	44224	11/8/2012	Showed patient inclusion data in opioid naïve study and asked if he sees patients like this and she said yes. I showed pain reduction and she said that is impressive and I reviewed managed care coverage and trial cards.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	11/8/2012	I told dr that Butrans is a product that she needs to use for her patients on vicoden that have Medco prescription insurance who tell you they need more. one patch for 7 days and its a CIII. Dr said she agrees she needs to use it. I gave her an invite to the December Butrans program.
PPLPMDL0020000001	Stow	OH	44224	11/8/2012	Reviewed inclusion data in opioid naïve study and asked if she sees patient like this and she said yes. I showed her pain reduction and she seemed to turn her head as more interested. She then asked does it really stay on and I said yes but if it does start to come off to put first aid tape on it and she said it can happen with any patch and it is all about application and I said yes and I showed her the application section. I reviewed managed care coverage and using the trial cards. I said for her patients who may be taking Percocet she has Oxycontin as an option 7 strengths
PPLPMDL0020000001	Stow	OH	44224	11/8/2012	Spoke with Marcy and Mike and they said they are seeing both new and refills of Butrans there. he said they are using the trial cards and she said she has a patient right now who is waiting for a Butrans script. I gave her tear pad with patient education to give to her patients.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	11/8/2012	I asked Jeff if he has knowledge of Butrans. Jeff said he has one patient on Butrans 20mcg that comes in each month from a primary care doctor but couldn't remember the name. I explained Butrans dosing, initial starting dose based on amount of IR daily opioid, need for titration at 72 hours if necessary, and use of supplemental analgesia for breakthrough pain. Jeff said he can understand if a patient has the need to take more supplemental medicine to increase the dose of Butrans. I explained the copy cards and trial off and he wanted some to keep.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	11/8/2012	Dr Ali said he uses a lot of OxyContin for the inpatients in the hospital and likes using it when his patients on percocet need more extended pain relief. Dr said he prescribes almost all doses but will use the 10, 20mg doses the most. Dr said he has used Butrans and likes that it is a CIII and 7 day patch. Discussed appropriate initial dosing and need for titration and supplemental analgesia. Reminded dr and dr Sable that Butrans is NOT a mixed agonist/antagonist. Read MOA section from FPI.
PPLPMDL0020000001	Woodmere	OH	44122	11/8/2012	Spoke with Tiffanie & showed Butrans 3 strengths. Reviewed once weekly dosing & transdermal delivery. Showed FPI 2.4 & let her know patients can take supplemental analgesia if necessary. Also discussed steady state & titration ability every 72 hours. Reviewed savings programs for Butrans & OxyContin. They did not need cards at this time.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	11/8/2012	Saw dr walking into exam room and asked her how her patients are doing on Butrans? Dr said fine. I told her that she can titrate the Butrans dose at 3 days if the patient tells you they are getting more pain. Doctor said ok. I gave her an invite to the Butrans program.
PPLPMDL0020000001	Parma	OH	44129	11/8/2012	Dr Kalin said he really hasn't put anyone on Butrans for awhile. He added that he does think it is a good option, though. He went on to say that managed care is really probably the issue. I reviewed Butrans coverage with him, updating him on Aetna's formulary, as well as Medco/Express Scripts. Also discussed Caresource prior authorization requirements & Medicaid Smart PA. He said that actually is good & that about 39% of the practice is Medicare. I told him that would be the main segment that he would have coverage issues with. I asked what patients are typically on when they come to him. He said an example of an average would be someone on 4-5 Percocet per day. He then went on to say that he could actually use Butrans for many of those patients. I told him I couldn't have said it better myself. Dr Kalin said he would like to use more Butrans also when he is trying to decrease the amount of opioid a patient takes. Discussed range of patients. Also reviewed dosing/titration, & ability to take supplemental analgesia, reminding him that in clinical studies, we allowed acetaminophen & ibuprofen for this. He said he prefers Mobic because patients think it is stronger because they don't recognize the name. I asked if he thought he would be able to identify a few patients who may be appropriate for Butrans & if he would prescribe it for them in the next week or so. He said he thinks so. I asked him to give them a savings card. He agreed. Discussed 7 tablet strengths of OxyContin.



PPLPMDL0020000001	Beachwood	OH	44122	11/8/2012	Spoke with Raina & showed Butrans titration piece, pointing out 3 strengths. Also discussed titration interval of 72 hours & asked if she has noticed any titration of Butrans. She said no. I pointed out maximum dose of 20mcg & discussed ability for patients to use supplemental analgesia if necessary in the form of IR opioid or non-opioid medications. Discussed favorable commercial formulary coverage & discussed trial/savings program & eligibility requirements. She said they did not need any cards. Reviewed OxyContin savings program. She said they didn't need any of those either.
	Cuyahoga Falls	OH	44223	11/8/2012	Spoke to dr about his use of OxyContin and when he goes to it. Dr said he really likes the Q12h OxyContin when he has a patient in a nursing home or in the office who is on a short acting and is elderly. Dr said the older patients like taking fewer pills and the Q12h provides a good sustained level of pain control with does only two times a day. Reviewed case study Sam with dr and he said that he is the ideal patient who he uses OxyContin for. I discussed his use of Butrans and asked who he initiates on the 5mcg and who on the 10mcg. Dr said the 5mcg is for his patients naive to opioids and those who are only taking a couple vicoden or oxycodone. Dr said the 10 is for his patients who typically falls between 4-8 pills a day. I showed dr the conversion chart and told him that he is doing it correctly. Discussed Butrans as a single entity CIII, 7 day patch and if his patients are taking more than 30mcg/day or a morphine equivalent they need to be tapered down to no more than 20mg/day before initiating Butrans. Dr asked if Butrans was covered on Caresource. I discussed the smart PA with Caresource and dr said he is really glad and will use it for those patients now. Discussed need for titration and showed new piece.
PPLPMDL0020000001	Beachwood	OH	44122	11/8/2012	I asked Dr Yokiel if OxyContin is still a part of his practice. He said he still uses it a lot & also added that he has been writing more Butrans lately as well. He said coverage seems to be better. I agreed & updated him on Aetna's formulary, putting Butrans at tier 2 preferred. Also reviewed that BWC is paying for Butrans & discussed Caresource prior authorization requirements as well as Medicaid Smart PA. He said this was great news because Caresource always seems to give them trouble. I told him I really wanted to focus today on proper dosing & titration of dose. Showed him Butrans titration piece, pointing out that most of his patients will likely be in the range recommended to start on 10mcg. Pointed out titration interval of 72 hours to 20mcg from 10mcg starting dose. I showed him clinical data from FPI & pointed out that even patients in opioid-naive patients were titrated up to the maximum dose of 20mcg. Also discussed supplemental analgesia, pointing out that in both clinical studies, patients were allowed acetaminophen or ibuprofen for this purpose. He said he usually gives them hydrocodone or oxycodone. I asked his thoughts on offering acetaminophen or ibuprofen. He said that was interesting & that he would consider it. He said he thinks he will start using more Butrans now. I reviewed trial/savings & eligibility for usage & asked him, when he gives the prescription for Butrans, to give the patient a card with the script. He agreed.
	Cuyahoga Falls	OH	44223	11/8/2012	I asked dr if he could give me a reason for not initiating Butrans for a patient of his on a IR opioid who needs a dose adjustment? Dr said he believes Butrans is a good product but said his patients are doing well on their medicines. I asked him to use a controlled release product for a patient who is in chronic, persistent pain. Dr said that he will consider it. I gave him an invite to the Dec 12th program and he said he was going to be out of
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	11/8/2012	I showed dr the Sam profile and asked him if that profile was similar to patients in his practice? Dr said he uses OxyContin for anyone who he feels would benefit from a Q12h dosing. I asked dr to continue to transition oxycodone patients to OxyContin.
PPLPMDL0020000001	Independence	OH	44131	11/9/2012	Quick call- Butrans dosing & once weekly transdermal delivery message to Dr Reddy at the window. He just waved & walked away. Spoke with Kathi & reviewed insurance coverage & savings opportunities for eligible patients. Also reviewed appropriate patient type with her.
	Brooklyn	OH	44144	11/9/2012	Spoke with pharmacist & showed Butrans titration piece. Reviewed Butrans appropriate patient type/range & dosing. Showed titration ability every 72 hours & maximum dose of 20mcg. She asked about insurance coverage. Reviewed Butrans commercial insurance coverage, including most recent update on Aetna & Medco/Express Scripts. Showed trial/savings cards & reviewed eligibility requirements for usage. Also discussed OxyContin savings cards. No cards needed at this time.
PPLPMDL0020000001	Parma	OH	44129	11/9/2012	Positioned Butrans for appropriate patients taking up to 80mg oral morphine equivalents. Showed Dr Rakhit initiation guide, showing range of up to 40mg oxycodone per day. I asked if this is a patient type he sees frequently. He said he has some patients like that. I asked if he thought any of them would like the option of a once weekly transdermal system. He didn't answer. Showed titration piece, pointing out 3 strengths & titration up to 20mcg maximum. Reviewed trial/savings cards & discussed managed care. Also discussed OxyContin as an option for patients who are taking Percocet around-the-clock since it is a q12h dose of oxycodone. Discussed broad managed care coverage for OxyContin.
	Hudson	OH	44236	11/9/2012	Dr Seiple said he had a success story to tell me. He went on to tell me about a patient who he recently started on Butrans 10mcg who is doing very well on it. He said it has changed this patient's life in many ways. He said it really helps his belief in the product, it is just a matter of finding that right person for it. Reviewed appropriate patient type/range, dosing, & titration. Also discussed managed care & savings information. I asked if he can think of any other patients who fall into the range for Butrans treatment who may benefit from Butrans as an option. He said he would try to find more patients & said again that he believes in the drug. Also asked him to consider an appropriate dose of OxyContin for patients taking Percocet around-the-clock chronically. <font color=blue><b>CHUDAKOB added notes on 11/14/2012</b></font>-This would have been a good story to leave the team.
PPLPMDL0020000001	Barberton	OH	44203	11/9/2012	I asked dr if she has moved an oxycodone patient to OxyCotin recently? Dr said she has not had the need but when she has a patients that she feels will benefit from OxyCotin Q12h she will switch them. Reviewed Sam profile to reinforce appropriate patient. Showed Dr the Butrans Conversion scale and asked her to initiate Butrans on her next vicoden patient that needs a dose adjustment. Told dr about ensuring that for patients who are experienced with opioids, before initiating therapy that the IR opioid is tapered to no more than 30mg/day of a morphine equivalent.
	Lyndhurst	OH	44124	11/9/2012	Spoke with Receptionist, Thai Makupson, Introduced myself and purpose of visit, Re: Pain & Pain Management education/in-service opportunities. She stated, " Surveyors have been here all week." The D.O.N., Beanne Clipper was not available, Advised to call next week and make appt. w/ Linda Dabney,in Staff Development. 440-684-6622 (direct line). Left BC
PPLPMDL0020000001	Cleveland	OH	44128	11/9/2012	I spoke w/ Davielle C., Adm. Asst., Introduced myself and purpose of visit, Re: Pain & Pain Management education opportunities. D.O.N., Donna Sillases was not available.I Met with Roseanne Howell, Education Liason. Sat down & discussed educational needs of the NH and education/in-service topics that I could provide r/t Pain & Pain management. Briefly discussed branded materials as well. Verified 180 bed skilled facility, including short-term Rehabilitation unit and some hospice patients. Confirmed CPP is Omnicare. When I asked what % of patients are currently being treated for pain, she replied, "a lot." and what % are currently being treated with opioids, she replied, "a lot." Roseanne was excited about utilizing our program and stated that she wanted to talk with the D.O.N. to ask her what length of in-service she would prefer for the staff before scheduling w/ me. She mentioned that they currently have a 10-15 minute education session daily. She stated that she will get back w/ me sometime next week.
	Cleveland	OH	44122	11/9/2012	Spoke with Faith from Medical Records,who was filling in for the receptionist. Introduced myself and purpose of call, Re: Pain & Pain Management Education opportunities. The D.O.N., Connie Louis was not in. Advised to call and make appt.to meet w/ her. 216-752-3600 Left BC
PPLPMDL0020000001	Akron	OH	44319	11/9/2012	Spoke to Pharmacist about Butrans initial starting dose, titration and supplemental analgesia. Spoke about need to taper current opioid therapy if over morphine equivalent of 30mg/day. Pharmacy has not dispensed much but do have doses in stock.
	TWINSBURG	OH	44087	11/9/2012	Spoke with pharmacist & reviewed Butrans dosing & patient type/range. Also showed titration piece & pointed out 72 hour titration interval & ability to use supplemental analgesia if necessary. She said she still hasn't seen any Butrans activity. Discussed Butrans as the only long-acting CIII opioid available, reminding her that it still has abuse/addiction potential. Reviewed trial/savings program for Butrans & OxyContin savings cards. Also reviewed eligibility requirements.
PPLPMDL0020000001	Brooklyn	OH	44144	11/9/2012	Reviewed Butrans dosing & titration ability every 72 hours. Showed Dr Miguel that patients can take supplemental analgesia if necessary in the form of IR opioid or non-opioid medications. He said he is going to try it. OxyContin 7 tablet strengths for individualization of dosing/titration review.
	Barberton	OH	44203	11/9/2012	Spoke to Bill about Butrans starting dose based on amount of IR opioid use, need for titration as early as 72 hours, and use of supplemental analgesia. Bill said that is good info to know about the product. Pharmacy stocks the 5 and 10mcg doses.
PPLPMDL0020000001	Hudson	OH	44236	11/9/2012	I reminded Dr Russ of our last discussion about Butrans & asked him if he ended up putting that patient on Butrans like he said he would. He said he did. He said he actually wrote a prescription for Butrans 5mcg yesterday for a patient who is doing well on it. He said she has chronic pain due to an auto accident 10 years ago. He added that he started the patient at 5mcg & she is doing well, although she is now taking 3-4 hydrocodone per day with it & she used to only need 1-2 doses a day. I showed him Butrans titration piece & asked if he has considered titrating this patient to Butrans 10mcg since she is tolerating it. He said that was actually a good suggestion. Discussed ability to titrate after 72 hours & also showed him how patients in opioid-naive study were titrated to 20mcg dose. Also reviewed use of supplemental analgesia, pointing out that patients in both studies were allowed only acetaminophen or ibuprofen for supplemental analgesia. He asked if I thought he should have her use one of those instead of her hydrocodone. I told him this would be up to him & I only know that this is how Butrans was studied & what satisfied FDA requirements for approval. He said he would love to have her just on Butrans & a non-opioid & added that he is going to call this patient & titrate her to 10mcg also. I asked him to continue to identify Butrans patients & prescribe it for them, making sure he gives them a savings card. He agreed. OxyContin 7 tablet strengths reminder.<font color=blue><b>CHUDAKOB added notes on 11/14/2012</b></font><b>Very nice call!! Congratulations on this success. You are certainly bringing value to his practice.
	Akron	OH	44319	11/9/2012	I asked dr what he typically does for a vicoden patient who needs a dose adjustment. Dr said most of his patients are strapped for cash and want the lowest best option so he will titrate the dose if he feels the patient isn't maxed out. I asked what dose that might be? Dr said all patients are different. I told dr to initiate Butrans for those patients because it will work and is cost effective for commercial insured patients. nothing else learned
PPLPMDL0020000001	Cleveland Heights	OH	44106	11/9/2012	Spoke with Receptionist, Fatina Johnson, introduced myself and purpose of visit, Re: Pain & Pain Management Education opportunities. Asked if the D.O.N. was available to speak with me, Fatina stated, " she is in a meeting." When I asked about an Asst. D.O.N. and a Nurse Educator, Fatina said, "Everybody here is new,I don't know their names, the asst. D.O.N. just started yesterday, "I think her name is Kim, and we don't have a nurse educator."
	Cuyahoga Falls	OH	44223	11/9/2012	Gave dr the SAM profile message again and asked him if he feels like he has patients currently on percocet that would be appropriate for the Q12h oxycodone? Dr said hes sure he does and agreed with me that he needs to use that philosophy. I told him that it is a 1 to 1 conversion and he should look at his existing percocet patients and reevaluate them. Told dr to use Butrans for his patients on tramadol or vicoden that need a dose adjustment. 1 patch = 7 days and a CIII.
PPLPMDL0020000001	Akron	OH	44312	11/9/2012	Told dr about patients he is initiating on Butrans for patients already on opioids. Read from main visaid about tapering the dose of other opioids for up to 7 days for no more than 30mg of morphine a day. Dr said that is good information to know so patients don't go through withdraw when they are on 4 or more vicoden a day.
	Akron	OH	44310	11/12/2012	Told dr about Aetna coverage status change to 2nd tier. Char said they do have some Aetna patients and dr said the usage must be picking up if it is now preferred on Aetna. I agreed and asked him to continue to find appropriate patients like those not controlled on vicoden. Dr said he continue to look.
PPLPMDL0020000001	Parma	OH	44134	11/12/2012	I reminded Dr George of his previous interest in Butrans in earlier discussions. He said it has a place. Discussed Butrans as the only long-acting CIII opioid available, reminding him that it does carry abuse/addiction potential like other opioid medications. Discussed importance of appropriate patient selection, asking him to focus on patients with legitimate pain, for whom he would be comfortable prescribing opioids to. Reviewed managed care coverage, asking him to focus on patients with commercial insurance who can use the savings program. Reviewed appropriate patient type, asking him to think of patients who are ages 50-60 with a chronically painful condition such as low back pain or osteoarthritis. He said he believes Butrans has a place for the right patient. Discussed OxyContin 7 tablet strengths for individualization of dosing/titration. He said he rarely uses OxyContin, but will for the right patient if they have, for example, severe or cancer pain.
	Parma	OH	44129	11/12/2012	Dr Gliottoli said he thinks he has given Butrans to more patients, or tried to at least, but they have not been able to use them. I asked if there was any possibility that these are Medicare or Medicaid patients. He said he knows better than to give the cards to those patients & they were commercially insured. I spoke with Jaz who said she has not had any patients complain or call about not being able to get Butrans, so she was not sure what he was talking about. I asked Dr Gliottoli to start appropriate patients at 10mcg Butrans (those who are taking 15-40mg hydrocodone or oxycodone per day) & then assess after 3 days to determine if titration to 20mcg should be done. He said he would do this. He said he still has a lot of patients on OxyContin as well & he thinks it is good for the right person. He asked what is going to happen with medications/savings programs under the new healthcare system. I told him I do not know.
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	Parma	OH	44134	11/12/2012	I gave Lynda information information for resources on pain management per her request during our last discussion. She said she still has not gotten her DEA number. She added that she does want to become more comfortable with treating pain as she was only given a one day session for training on it. Discussed Butrans as the only long-acting CII opioid available, reminding her of abuse/addiction potential. Positioned once weekly transdermal Butrans for appropriate patients who Lynda is considering starting on an opioid if they meet the indication, even if she plans to refer to pain management. She said she thinks it is a good option. Discussed OxyContin for appropriate patients. Lynda said they can write for 5 days worth of CII's now.
PPLPMDL0020000001	Cleveland	OH	44195	11/12/2012	Met with Dr. Appachi, Dr. Henry and study coordinator to discuss having two pediatric protocols at this institution. Dr. Steiner also presented epidemiology data
PPLPMDL0020000001	Richmond Heights	OH	44143	11/12/2012	Spoke w/ receptionist, Darlene, introduced myself and purpose of visit. Re: Pain & Pain Management Education opportunities. I asked if the DON or Nurse Educator was available. She stated, "the D.O.N., Susan LoDolce is gone for the day." I left my BC and PAP handouts. (Medication Routes & Delivery Systems booklet, USB card, Comfort assessment Journal & Defining Key Terms in Pain Management)
	Parma	OH	44129	11/12/2012	Dr Ortega told me about 3 patients who he has on Butrans who have discontinued due to rash and/or redness at the application site. He said they are all patients who had been on Butrans for over a month, doing fine, but then suddenly they started to get these application site skin reactions. He said one of the patients had a more severe reaction, developing blister-like vesicles. I showed him section 5.11 in the FPI & showed him that in rare occasions, this has been reported. He said he discontinued all the patients, although some of them were getting good pain relief. He said they did not want to continue. I asked what patients are on before he gives them Butrans he said either Percocet or Vicodin. I asked how much. He said it depends. I asked if there is a limit to how much they are taking when he will start them on Butrans. He did not answer. He said he starts almost everyone at 5mcg & rarely has to change the dose. He told me about a patient who was taking Percocet who he started on Butrans. This patients called back stating that they wanted their Percocet back & didn't like the Butrans. Dr Ortega said he took the patient off Butrans. I showed titration piece, pointing out that Butrans can be titrated after 72 hours. I asked if he would titrate patients who are tolerating Butrans but not getting adequate relief instead of discontinuing. He agreed to try that. He said he likes OxyContin & uses it for patients for about a 6 month period following a surgery.
PPLPMDL0020000001	akron	OH	44333	11/12/2012	Spoke to dr about Butrans titration and use of supplemental analgesia. Dr said his one patient on Butrans he has had to titrate to the 20mcg. He also said he is taking 3-4 vicoden 5/500 a day and his pain is getting worse. Dr said the patients has cancer. I told dr that he has maxed out on the Butrans dose and that OxyContin is the option his patients needs. I told dr about dosing, indication, CII, and approximate conversion ratio for hydrocodone.
PPLPMDL0020000001	Akron	OH	44310	11/12/2012	Dr agreed that OxyCotin is going to be prescribing for this patient and thanked me for suggesting it. I gave managed care updates for Butrans and told dr about titration with OxyCotin in every 1-2 days. Showed dr the titration and supplemental analgesia piece and showed him how to properly initiate Butrans for a patient on a short acting opioid. Told dr that if patients need something to help for breakthrough pain he can use opioids or non opioid analgesics. Dr said he likes Butrans and asked if it is on Medicare yet. I told dr no but it just got picked up preferred on Aetna. Ruth said they have many patients with Aetna patients. Told Ruth and dr about the copay and trial offer cards.
PPLPMDL0020000001	Akron	OH	44313	11/12/2012	I showed Jason the piece on titration and supplemental analgesia. I discussed with him the importance on correct initiation dose and the need for titration at 72 hours. I told him about supplemental analgesia with opioid and non opioid analgesics.
PPLPMDL0020000001	Akron	OH	44333	11/12/2012	I gave dr the new piece on titration and use of supplemental analgesia. I told dr to titrate patients every 3 days when they tell you the need for more analgesia is warranted and/or they tell you they have had to increase breakthrough analgesia medicines. Dr said his patients are doing well and said he titrates....nothing else learned
PPLPMDL0020000001	Beachwood	OH	44122	11/12/2012	Met with Nurse Educator, Merri Bunge, discussed Pain & Pain Management education/resource opportunities. I reviewed with her the different types of in-services that I could present and gave her handouts on PAP (medication routes & delivery systems booklet, comfort assessment journal, defining key terms in Pain Management, and the USB handout). She is interested in in-services, but prior, is requesting a list of educational topics and asked to review the power point presentations that would be used, if any. Merri said, "I'm not going to copy them, I just want to review the material that is going to be presented, because in the past we have had some terrible speakers." Merri also stated, "we have our own education classes and CEU's throughout the year." She said that she will be working on next years calendar and would not have me present anything until after the first of the year. She wants to talk with the D.O.N., Denise Trun to get her thoughts and also with Bernita Munger the head of Hospice @ Menorah Park to confirm her needs as well. I said that I would be more than happy to meet with them, if necessary. She thanked me for coming nd said that she will wait to hear back from me. They have their own in-house pharmacy. I confirmed the # of beds: 360 total, which include 80% LTC, 70 dementia and 2 sub-acute units(Rehab/short term care). Merri stated, "68% of their residents are medicated with the balance being a mixture of medicare/commercial payors."
PPLPMDL0020000001	Richmond Heights	OH	44143	11/12/2012	Spoke with Receptionist, Cheryl Polter, introduced myself and purpose of visit. Re: Pain & Pain Management Education Opportunities. Asked to speak with the D.O.N. or Nurse Educator, no one was available. Cheryl advised that I call and talk with Wellness Director, Joan Southard, L.P.N. @ 216-289-9800. Left BC & PAP Handouts (Wong-Baker Pain Scale, Medication Routes & Delivery Systems booklet, Comfort Assessment Journal & USB card)
PPLPMDL0020000001	Parma	OH	44129	11/13/2012	Reviewed broad OxyContin formulary access with Dr Moysaenko, pointing out status of various Medicare D formularies. He thanked me & walked away. Spoke with Amanda & reviewed savings cards for Butrans & OxyContin. Also reviewed eligibility requirements with her.
PPLPMDL0020000001	Cleveland	OH	44130	11/13/2012	Quick call- Dr Fedorko said he has not had anyone to put on Butrans lately & he wishes he could use more of it for me. He said when we get Medicare coverage he can probably find more patients for it. Re-directed him to appropriate patients aged 50-60 who have insurance through work, who meet the indication. He said he will do his best.
PPLPMDL0020000001	Parma	OH	44134	11/13/2012	Spoke with floater pharmacist & discussed Butrans as a once weekly transdermal system of buprenorphine for patients with moderate to severe chronic pain. Showed appropriate patient type/range in initiation/titration guide. Reviewed savings programs for OxyContin & Butrans. Showed 7 tablet strengths of OxyContin for flexibility in dosing/titration.
PPLPMDL0020000001	Parma	OH	44129	11/13/2012	Dr Taylor said she "tried" to prescribe Butrans recently. I asked her what happened. She asked me why patients don't want to try a 7 day medication. I asked what her thoughts were. She said she thinks they do not believe it will really work for 7 days. She said they just want their pills. I asked her why she is allowing her patients to make that decision for her, the physician. She said she is not going to give patients an option anymore & will just insist they try Butrans for at least a month. I asked her what patients who have BWC or commercial insurance really have to lose by doing that. She said nothing. I told her that was a good idea. I also told her I wanted to re-enforce her belief in Butrans as well & showed her clinical data from Butrans trials. I pointed out that patients in opioid-experienced studies were not necessarily responding sub-optimally to their current medication regimen & showed inclusion criteria & clinical background, pointing out 62% of patients on hydrocodone & 21% on oxycodone. Dr Taylor said she does believe in long-acting opioids for chronic conditions & said again she is going to insist on a Butrans trial. Discussed titration ability every 72 hours & maximum dose of 20mcg as well as supplemental analgesia. I asked her to counsel patients on Butrans, letting them know about the possibility of titration after 3 days. Dr Taylor committed to trying Butrans on appropriate patients. Reviewed 7 strengths of OxyContin.
PPLPMDL0020000001	Solon	OH	44139	11/13/2012	Re-enforced OxyContin's favorable Medicare D coverage with Dr Zaldi, showing him the corresponding formulary grid. He said he has had a lot of success over the years with OxyContin. I asked what he likes about it. He said not only do patients get good results, but it is more well-known & patients also find it to be less expensive since it has been out quite a while now. I agreed that formulary access with OxyContin in broad & discussed savings program, including usage for cash patients. I asked Dr Zaldi what strengths he uses most of. He said mostly 20-40mg & added that he has been using more 10 & 15mg lately as well. Showed 7 tablet strengths. Dr Zaldi said he doesn't think primary care physicians know what they are doing when treating pain & they often don't do the right thing. I asked if he has seen an increase in referrals lately. He said he has. Discussed Butrans appropriate patient type/range & importance of appropriate patient selection. Also discussed setting appropriate patient expectations & having open communication. I asked Dr Zaldi what his comfort level was with buprenorphine as a molecule. He said he has never had experience with it & it doesn't seem like it would be effective in treating patients like his who are already on opioids. Showed range of patients & showed clinical background inclusion
PPLPMDL0020000001	Cleveland	OH	44130	11/13/2012	Pointed out intermediate strengths of OxyContin to Dr Diab, asking if he uses these. He said, "yes, very good" & then walked into a room. Spoke with Barb & reviewed Butrans favorable commercial insurance coverage & prior authorization requirements for Caresource patients.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	11/13/2012	Dr called requesting Butrans trial cards and copay cards along with patient information guides after discussion during lunch last week. Spoke to dr and outlines trial card importance and explained eligibility for copay cards. I reminded dr that he was excited to learn that Butrans is covered on Caresource with a PA. Explained PA requirement again and dr said he understands and sounds like a quick and easy PA. I asked dr to continue looking for Butrans patients that need a dose adjustment or those not tolerating IR opioids. Dr said he continue to look for the right patients.
PPLPMDL0020000001	Parma	OH	44129	11/13/2012	Myra said she has been using more Butrans lately, or trying to at least, but one of the patients was vomiting when she was on Butrans, so she discontinued them. I agreed that Butrans might not have been right for this patient. She said another patient was unwilling to try Butrans because he said he had tried patches before & they did not stick to him. Myra said other patients have said they just want their pills back. I asked what she does then. She said she is so busy, she just gives them what they want. I asked Myra what her thoughts were on titrating the patient's Butrans dose as long as they are tolerating the molecule. I asked if she thinks it could be more of a dosing failure than a medication failure. She said this is a good point, but she is just so busy & it takes more time to discuss Butrans than to just give them what they are asking for. I asked if she feels that giving them what they are asking for is the optimal clinical choice for patients. She said she would rather them stay on Butrans. I told her she is the practitioner, not the patient. She & Dawn said they would start titrating Butrans when a patient is tolerating it but saying it is not working or asking for their pills back. Showed titration piece, discussing titration interval of 72 hours & maximum dose of 20mcg.
PPLPMDL0020000001	Parma	OH	44129	11/13/2012	Delivered to Dr Ortega the DVD's on Meditation, Thai Chi, & Qi Gong that I had told him about. He said he had told some patients about them & they were very interested in viewing them, so he was very appreciative. Dr Ortega also said that one of his patients who he had on Butrans who had moved away ended up moving back & was very happy to be back on Butrans. Dr Ortega said he actually just wrote that patient a prescription today. Reminded him that when he starts a patient on Butrans, he can titrate them to the next highest dose after 72 hours like we recently discussed. He said he will keep that in mind when he has follow-up with patients.
PPLPMDL0020000001	Solon	OH	44139	11/13/2012	Spoke with Dave & showed Butrans 3 strengths & reviewed once weekly transdermal dosing. He said he has filled maybe one or two prescriptions for Butrans. He did not know if anyone has been titrated. Discussed titration ability every 72 hours & maximum recommended dose of 20mcg. Reviewed ability for patients to take supplemental analgesia if necessary in the form of immediate-release opioid or non-opioid medications. Showed trial/savings cards. He said they didn't need any. Also reviewed OxyContin savings program & eligibility requirements for usage. He said they have enough of those as well.
PPLPMDL0020000001	Northfield	OH	44067	11/13/2012	Spoke with pharmacist & reviewed Butrans dosing & titration ability every 72 hours to a maximum 20mcg. Also showed that patients can take supplemental analgesia in the form of IR opioid or non-opioid medications.
PPLPMDL0020000001	Akron	OH	44312	11/13/2012	Discussed Butrans as a CII opioid with abuse & addiction potential. Showed savings cards for Butrans & OxyContin & reviewed eligibility requirements for usage. Good discussion with dr about Both products. I asked what her typical algorithm is for patients that tell her they are in pain. Dr said that she will start with an over the counter analgesic like ibuprofen or Tylenol. Dr said if those cant control pain she will move to Ultram. I told dr that she should initiate Butrans for the Ultram patient that requires more. I explained the Emma case study along with the approximate conversion chart and titration and supplemental analgesia piece. Dr said that she can think of about 5 patients that Butrans would fit. Dr said one patient is on vicoden for spinal stenosis and is in chronic pain. Dr said that the patient has been complaining about being in pain lately and dr said she does not want to move her up on vicoden. Dr said Butrans would fit nicely for her. I reviewed the taper dose of IR opioids for up to 7 days to a dose no greater than 30mg of morphine/day before initiating Butrans. Dr said she will prescribe Butrans.
PPLPMDL0020000001	Waterford	OH	45786	11/14/2012	W - Continues to consider Butrans as an option for patients, but hasn't had any recent initiations. I - Review of Butrans for appropriate patients who meet the indication when uncontrolled on short acting opioids and requesting a therapeutic change. Review of Emma/William profiles as potential patients that she may treat in her practice that could be appropriate for Butrans therapy. Review of appropriate starting doses for patients based on their current therapy. Review of Butrans formulary coverage and savings card programs.
PPLPMDL0020000001	Bedford	OH	44146	11/14/2012	Spoke with Oleg & showed Butrans titration piece, pointing out 3 strengths & titration ability every 72 hours. Showed maximum dose of 20mcg. Oleg said he thinks Butrans is a good option but he does not see a lot of activity for it still. Reviewed appropriate patient type & asked him to recommend Butrans if he is given the opportunity & thinks it would benefit the patient. Also showed OxyContin 7 tablet strengths, discussing ability to titrate
PPLPMDL0020000001	Warrensville Heights	OH	44122	11/14/2012	Quick call- Showed OxyContin 7 tablet strengths & asked Dr Gulati to consider an intermediate strength of OxyContin (15, 30, or 60mg), if appropriate, when he is titrating a patient's dose. He said he would. Reviewed Butrans once weekly transdermal dosing for appropriate patients with moderate to severe chronic pain. He said he would keep it in mind & the left. Spoke with Kim, his MA, who said she wanted to try Butrans, but her insurance plan's co-pay was very high & they required prior authorization. I asked what plan. She said Aetna. I updated her on Aetna's formulary change for Butrans, as tier 2 preferred. She asked for trial/savings cards. Showed her each of them & discussed usage & eligibility.
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PPLPMDL0020000001	Waterford	OH	45786	11/14/2012	W - Waters continues to prescribe OxyContin as his long acting product of choice. He does prescribe and consider Butrans for patients as well. I - Review of OxyContin for appropriate patient conversions from IR oxycodone once the indication is met. Review of q12h dosing with 7 dosing strengths and the ability to titrate as needed every 24-36hours. Review of Butrans for appropriate patients who meet the indication when uncontrolled on short acting opioids and requesting a therapeutic change. Review of formulary coverage for both OxyContin and Butrans along with savings card programs.
PPLPMDL0020000001	Barberton	OH	44203	11/14/2012	I asked Bobby if the pharmacy would find the Butrans patient information kits would be useful when patients get Butrans dispensed after reviewing it. Bobby said that he would take a couple of them and said that he sees how a patient would need them. Left Dosing chart with Bobby.
PPLPMDL0020000001	Akron	OH	44320	11/14/2012	I told dr to continue to look for patients uncontrolled or cant tolerate IR opioids and need a dose adjustment. I showed the Ae's for Butrans as asked her what she thought about the incidence of constipation with Butrans. Dr said it is lower and she likes that compared to the oral meds. Dr said but patients who are used to oral medications are used to the constipation and are willing to continue. I asked if she has provided an overview of Butrans to those patients? Dr said she has not but will try and do so. Dr is still skeptical about coverage. I told her to look for patients with commercial insurance and explained trial offer and copy cards.
PPLPMDL0020000001	Beachwood	OH	44122	11/14/2012	Placed a follow-up phone call to Celeste, Asst. DON. I was informed by the Receptionist, Dana (Shandana) Holton, that Celeste no longer works there. She tried paging the DON, Phyllis Tabbs, w/ no reply. She stated that her voice mail needs set up. Left msg.w/ Dana for DON.
PPLPMDL0020000001	Parma	OH	44134	11/14/2012	Placed a phone call to Linda Belford, Staff Development Coordinator, to discuss pain & pain Management educational opportunities. N/A, left Msg.
PPLPMDL0020000001	Parma	OH	44134	11/14/2012	Placed a phone call to D.O.N., Cathryn Kader D.O.N., to discuss pain & pain Management educational opportunities. I was informed that she is on a conference call until 4:30 today. Left msg.on her voice mail.
PPLPMDL0020000001	Beachwood	OH	44122	11/14/2012	Placed 2nd follow-up phone call to DON, Stephanie Forsythe to discuss pain & pain Management educational opportunities. N/A, left Msg.
PPLPMDL0020000001	Parma	OH	44134	11/14/2012	Placed follow-up phone call to DON, Julie Swindell, to discuss pain & pain management educational opportunities. Recept. stated, " she is not available." left Msg. w/ her voice mail.
PPLPMDL0020000001	Cleveland	OH	44122	11/14/2012	Showed OxyContin formulary information for Medicare D plans, pointing out favorable coverage. Dr Rastogi asked if I still have Butrans. I told him I do & reminded him that he had told me that he was going to try to find patients for Butrans. He said he is thinking of someone in particular right now. He said he wants to use it for his elderly patients. I told him that while clinically older patients may be good candidates for Butrans, managed care with Medicare can be difficult. I asked him what about elderly patients makes him want to use Butrans. He said many of them have osteoarthritis. I asked what about patients like that who are aged 50-60, with insurance through work. Reviewed favorable commercial insurance coverage & savings/trial cards. I asked if he has patients like this. He said he might have one. I told him that is a great place to start. He said he would try it for that patient. Reviewed dosing/titration.
PPLPMDL0020000001	Barberton	OH	44203	11/14/2012	Spoke to pharmacist and technician about Butrans appropriate starting dose, how to titrate and use of supplemental analgesia. Technician(sandy) said that she has dispensed Butrans a couple of times for Dr Patel in Barberton. I asked if the patients have titrated since initiated and she said she did not know. Spoke about dosing and steady state at 72 hours.
PPLPMDL0020000001	Akron	OH	44320	11/14/2012	Good discussion with dr about patients appropriate for Butrans and the inclusion criteria which explains some conditions that were studies in the Butrans clinical trials. Used case studies with Emma and William. Dr said that she sees how Butrans would work well for those patients and said she was concerned about patients already on opioids going through withdraw when Butrans is initiated. I read the section from the main visad about needing to taper those dose for up to 7 days to no more than 30mg/day or a morphine equivalent. Dr said she understands and will look for patients with commercial insurance.
PPLPMDL0020000001	Parma	OH	44129	11/14/2012	I invited Dr Chagin to the upcoming Akron Butrans dinner program, giving him an invitation. I asked what the chances are that he can attend. He put a star on it & said he would like to attend & that as of right now, I can consider him as attending. He said to follow-up & I agreed. Gave him Butrans titration piece & pointed out ability to titrate after 72 hours. I askd dhim to see if he could find a few Butrans patients before Thanksgiving. He Spoke with Emily & showed Butrans titration piece. Discussed once weekly transdermal dosing & ability to titrate every 72 hour with a maximum dose of 20mcg. She said she has filled a few scripts for Butrans but has not gotten any feedback. Reviewed savings programs for Butrans & OxyContin. She did not need any cards at this time.
PPLPMDL0020000001	Cleveland	OH	44125	11/14/2012	I asked Dr Moufawad what he thinks is the best way for me to describe/explain buprenorphine to primary care physicians who don't understand it is. He said physicians are afraid of Butrans because they are too lazy to think about how it works & they just do whatever their patients want. He went on to say that he does not think they understand how to initiate Butrans. He suggested that part of the dinner program presentations be spending much more time going over how to start patients on Butrans & on appropriate dosing & titration. He said there should be a lot of time spent on it because these physicians need to be walked through multiple examples of how to initiate/titrate various patients on Butrans. He said otherwise, they don't give a lot of thought during the presentation about it & then are not as likely to use it in the real world because they don't really understand what to do. He said even early on when he started patients on Butrans, if they called back & said it didn't work, he was likely to put them back on their oral medications. He said now that he has a thorough understanding of the medication, he would titrate the patient until efficacy was reached. I told him he made a good point & let him know I would see if this is a suggestion we can submit. Dr Moufawad said he just wrote OxyContin for a patient & gave them a savings card because they had some sort of third-party insurance.
PPLPMDL0020000001	Barberton	OH	44203	11/14/2012	I told dr to ensure to titrate patients on Butrans as early as 3 days after current dose is initiated. I told dr to look for signs of increased pain such as having to increase the amount of breakthrough pain meds or pain scale score is still above a moderate level. Dr said he has titrated a couple of patients from the 5 to the 10mcg and they are doing much better. Provided an invite to the Butrans program on 12/12 and he said he loves Ken Stewarts and may attend. I told dr to use his Butrans experience kits.
PPLPMDL0020000001	Independence	OH	44131	11/14/2012	Stopped Dr Jack with Butrans titration piece & pointed out 3 strengths. Also let him know that Butrans has a titration interval of every 72 hours with a maximum dose of 20mcg. He said he's sure he will eventually write it. I told him he has been saying that for 2 years. Showed OxyContin 7 tablet strengths, but he just walked away.
PPLPMDL0020000001	Akron	OH	44333	11/14/2012	Spoke to dr about titration of Butrans and use of supplemental analgesia. Dr said that he just titrated Butrans in an elderly woman from 5 to 10mcg. Dr asked me if the patients needs more than 10mcg if the 20mcg would be too much? I told dr that it is his call when he evaluates the patient and that he should titrate if the patient is still in pain and asks for more short acting opioids for breakthrough pain. Dr said he will titrate to the 20mcg if necessary and understands that the patient is elderly and a bit frail. I spoke to dr Vucetic about his patient he initiated on Butrans and the patient did not get the experience kit. I told dr that the kits are for new Butrans patients only and if the patient already filled the prescription that the kits may not work. Dr said he understood and will ensure to give them out at the point of prescription.
PPLPMDL0020000001	Akron	OH	44320	11/14/2012	Followed up with dr about the patient with Buckeye insurance he wanted to initiate Butrans for. I told him Brian did a great job completing the Buckeye PA but it was declined. Spoke to dr about how the PA criteria for Buckeye is out of wack and dr agreed. I showed dr the Butrans approximate conversion scale and told him to continue looking for his existing patients on Ultram or vicoden that need a dose adjustment. I told him to initiate Butrans for those patients and showed him the doses to approximate. I also told him to look for insured patients to improve the success factor of coverage. Explained trial cards and copy cards.
PPLPMDL0020000001	Parma	OH	44134	11/14/2012	Dr Hernandez told me how much his patients like & appreciate Butrans. He went on to tell me about various patients who he has switched from other medications successfully to Butrans. He asked if higher strengths will be coming out. I told him that now 20mcg is the highest strength & that I know no details of plans for other strengths at this time. HE said it would be helpful to have a 40mcg. I reminded him that when we studied 2 of the 20mcg patches together, there was an increased risk of QTC interval prolongation seen. He said he has patients on 20mcg patches & has no issues with that because Suboxone is dosed much higher than Butrans. I reminded him again that 20mcg is the highest dose & that it is not recommended to do what he is doing. He said he knows. I asked if any of those patients are OxyContin candidates at a low dose. He said he doesn't want them on OxyContin for long periods of time & that he would rather keep them on Butrans.
PPLPMDL0020000001	Munroe Falls	OH	44262	11/14/2012	I told Dr about the new Aetna coverage on 2nd tier with Butrans. I reviewed the Emma and William profiles and asked if she has identified and Butrans candidates yet. Dr said she prescribed Butrans yesterday for a teacher who has chronic back problems. Dr initiated on 5mcg for this patient who was on vicoprofen previously and not getting enough analgesia. Dr said she gave out a savings card along with the trial offer. Dr said she would keep me in the loop with the patients response to Butrans.
PPLPMDL0020000001	Beachwood	OH	44122	11/15/2012	Showed Dr Myton-Craig the 3 strengths of Butrans & positioned Butrans 10mcg for appropriate patients who are taking between 15-40mg hydrocodone per day, reminding her that the patient can take supplemental analgesia if necessary & can be titrated after 3 days to 20mcg. Reviewed 7 tablet strengths of OxyContin for individualization of dosing. She just walked away.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	11/15/2012	Spoke with doctor about Butrans initial starting dose, titration, supplemental analgesia, appropriate patient types for Butrans and managed care. I asked dr if she has any reservations for using Butrans in her practice? Dr said she really does not but said that she already does not use many opioids in her practice. I asked her to also consider using Butrans for her opioid naive patients. Dr said she can see using Butrans for some patients on Cox 2 inhibitors who need more analgesia. I gave quick review of opioid naive trial. Dr said she will try to remember to use it.
PPLPMDL0020000001	Chagrin Falls	OH	44022	11/15/2012	Spoke w/ receptionist Kelley, introduced myself and purpose of visit, Re: Pain & Pain management education opportunities. She stated, " Surveyors are on the premises, D.O.N., Janet Johnson is not available." Left BC and PAP handouts.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	11/15/2012	I showed dr the emma and william profiles again for Butrans and asked dr if he would try to identify 2 patients that met this criteria? Dr said he would try and does think it would work well but needs to remember it. I told dr to take the approximate conversion scale and a information guide to help. I asked dr if he would keep them on his desk. Dr said he will and will try to use.
PPLPMDL0020000001	Parma	OH	44134	11/15/2012	Quick call - Showed Butrans initiation guide pointing out the range of patients/recommended starting doses of 5 & 10mcg. Pointed out the hydrocodone group & asked if he has patients who fall into this category. He said he guesses he has "some" & then walked into a room.
PPLPMDL0020000001	Independence	OH	44131	11/15/2012	Quick call - Reviewed Butrans formulary access on commercial insurance plans & reviewed trial/savings program. Also reminded Dr Sundaram of Caresource prior authorization requirements for Butrans. Showed OxyContin Medicare D formulary grid.
PPLPMDL0020000001	Maple Heights	OH	44137	11/15/2012	Showed Butrans 3 strengths & reviewed ability to titrate every 72 hours. Also pointed out that patients can take supplemental analgesia with Butrans, which can come in the form of non-opioid medications or IR opioids. Dr Gene said he will try to find more Butrans patients because he thinks it is a good medication.
PPLPMDL0020000001	Maple Heights	OH	44137	11/15/2012	Showed Jim Butrans titration piece, pointing out 3 doses & titration interval of 72 hours. Reviewed that 5 & 10mcg are the only starting doses with 20mcg being the highest dose. I asked if he has noticed any titration with Butrans. He said no. Showed OxyContin 7 tablet strengths & discussed individualization of dosing.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	11/15/2012	Spoke to Bobby about Butrans appropriate starting dose, titration and use of supplemental analgesia. Bobby said he is glad to know about when patients can titrate and the ability to use NSAIDS for breakthrough pain. Bobby said they have one patient coming in to fill Butrans each month from a local pain physician. I asked about OxyContin copy cards? Bobby said they have plenty and see it dispensed regularly. nothing else learned.
PPLPMDL0020000001	Parma	OH	44129	11/15/2012	Reviewed broad formulary coverage, pointing out Medicare D plans to Dr Paat. I also gave him Butrans titration piece & showed 3 strengths. Dr Paat said he likes OxyContin & added he will try to find someone for Butrans, then walked away.
PPLPMDL0020000001	Akron	OH	44305	11/15/2012	I asked dr if any of his Butrans patients have needed to titrate or use other medicines for breakthrough pain? Dr said he has titrated patients and does not have any patients that are using other medicines. I showed dr the new piece about titration and supplemental analgesia. Told dr that steady state blood levels are reached at 72 hours and he can titrate then if necessary. I told dr not to hesitate to titrate if a patients says that their pain is increasing. I also told him that he can use opioid and non opioid analgesics for patients that say they need something in addition to Butrans for breakthrough pain. Dr told me that information is good to know. invited to program on 12/12. Dr said he has something planned for that night.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	11/15/2012	Spoke to Cindy and technician about Butrans appropriate starting dose, titration and use of supplemental analgesia. Cindy said they filled a Butrans for a patient from Narouze and was initiated on the 5mcg dose. I asked about their OxyContin stocking and copy cards. Pharmacy needs copy cards and Cindy told me that they have most patients on 10, 20, 60, and 80mg doses. I asked Cinsy if she knows what patients are on prior to filling their OxyContin? Cindy said some are coming off percocet and some from vicoden or duragesic. Cindy told me that she has seen patients going to OxyContin from Opana. Some patients have told Cinsy that they dont like Opana and it is not strong enough.
PPLPMDL0020000001					

PPLPMDL0020000001	Cuyahoga Falls	OH	44223	11/15/2012	Dr told me he needed more OxyContin copy cards. I told dr that I have noticed that he had been using them more lately. Dr said he has but he goes in spurts. I told dr to continue using OxyContin as his number one single entity opioid for Q12h dosing. Dr said it is but he does use others as well. Dr said he can't be completely exclusive with one product. nothing else learned.
PPLPMDL0020000001	Akron	OH	44312	11/16/2012	Gave pharmacist information about Butrans appropriate starting dose, titration and use of supplemental analgesia. The pharmacy has the 5 and 10mcg in stock.
PPLPMDL0020000001	Parma	OH	44129	11/16/2012	Quick call- Positioned Butrans for an appropriate patient with moderate to severe pain & commercial insurance, who would otherwise be a candidate for hydrocodone around-the-clock at a total daily dose of 15-40mg. I asked Dr Roheny to give this patient a trial/savings card with their first Butrans prescription. He just waved & went into a room.
PPLPMDL0020000001	Garfield Hts	OH	44125	11/16/2012	Quick call- Showed Dr Sadowski Butrans inclusion criteria for opioid-naïve patients. I read the conditions to him & asked how frequently he finds that he ends up treating conditions like these & how many of those times he ends up putting those patients on opioid medications. He said he sees those conditions "a lot" & ends up putting them on opioids "often". Positioned Butrans for some of those appropriate patients if they meet indication. He just thanked me & walked away.
PPLPMDL0020000001	Sagamore Hills	OH	44067	11/16/2012	Quick call- Saw Dr Mike at the window & passed back Butrans trial/savings cards, reminding him that appropriate patients with plans like Medco/Express Scripts & Aetna can try Butrans at no out-of-pocket cost for the first 28 days, followed by refill costs of \$15 out-of-pocket every month. I asked him to be sure to, if he does find an appropriate Butrans patient, give the patient a card with their prescription.
PPLPMDL0020000001	Independence	OH	44131	11/16/2012	I asked Dr Pai to consider an intermediate strength of OxyContin (recited 15, 30, or 60mg) for appropriate patients for whom he is going to titrate their current OxyContin dose. Reminded him that these strengths allow for individualization of dose. He said he would do that & added that his patient who he has on Butrans is still doing well.
PPLPMDL0020000001	Solon	OH	44139	11/16/2012	Chuck Calalesina & I called on Carrie Jenne of marc's to discuss 2013 plans as well as to discuss horizontal packaging issue and provided her with the letter.
PPLPMDL0020000001	Hudson	OH	44236	11/16/2012	Spoke with technician who said the pharmacist was assisting a customer & couldn't stop today. I showed her Butrans & OxyContin savings cards & reviewed eligibility requirements for usage. She said they are good about giving out the cards when they can & checked their supply, saying they did not need any cards today. She agreed to give my information to Bob when he becomes available.
PPLPMDL0020000001	Parma	OH	44129	11/16/2012	Saw Dr Gigliotti at Dr Salama's office. He said one of his Butrans patients is reporting good results, so he was happy to hear that. I asked if he was awaiting more feedback to dictate if he would write more. He said definitely not & that he plans to write more even if some patients don't like it because no drug works for everyone. I agreed that Butrans, like everything else, is not for everyone. I asked if he thought he would have someone to start before Thanksgiving & he said he would do his best.
PPLPMDL0020000001	Cleveland	OH	44130	11/16/2012	Chuck Calalesina (Acosta) and I met with Carrie Jenne to discuss horizontal packaging issue and gave her copy of the letter, telling her I saw some of the lots in Marcs and Xpect stores. She had a surprised look and said she will discuss this with their wire buyer. She said she sees a lot of Senokot offers on the wire but never buys it that way herself and she only buys from Purdue. Reviewed 2013 national plans as well as report 8 and multi-outlet
PPLPMDL0020000001	Akron	OH	44319	11/16/2012	I told dr that he needed to evaluate his viden patients and identify ones that are in chronic pain and viden may not be working as well anymore. Dr said he will think about it. I asked him what there is to think about? Dr said cost! I told him that I wasn't sure that he has used it enough to know that it may be cost prohibitive? Dr said he will try to more. nothing else learned.
PPLPMDL0020000001	Akron	OH	44320	11/16/2012	Gave quick review of opioid experienced trial from FPI focusing on titration to max dose, use of supplemental analgesia, and 20 vs 5mcg dose comparison and showed graph. I told dr that the first thing she needs to do is to identify the right patient. The patient needing a dose adjustment on any IR opioid with commercial insurance or Caresource. Dr said she has a couple in mind and will let me know.
PPLPMDL0020000001	Akron	OH	44312	11/16/2012	Told Gary about Butrans initiation dose, approximate conversions, and use of opioids and non opioids for breakthrough pain. Gary said he was too busy to talk.
PPLPMDL0020000001	Akron	OH	44312	11/16/2012	I asked dr how his patients are doing on Butrans and if he has had to titrate doses? Dr said he has had to take a patient to the 20mcg dose and the patient is doing very well. I asked if it has been tolerable for the patient? Dr said the tolerability has been what has really impressed him. The patients has no problems. I showed dr the titration and supplemental analgesia piece and asked him if his Butrans patients are also taking other analgesics for breakthrough pain? Dr said they all are. I reminded him that patients can use opioid analgesics and non opioid analgesics. Gave dr the Butrans program invite.
PPLPMDL0020000001	Beachwood	OH	44122	11/16/2012	Spoke with Carol (nurse), Jenny, & Jackie, who gave me staffing update for physician changes. (Dr Dimitri PRN, Dr Ningegowda M/T, Dr Barrett F, Dr Yap TBD). They said it is a time of many changes. Reviewed Butrans & asked what questions patients have had. None of them could think of any. Reviewed Aetna update with them & reminded them of Medco/Express Scripts coverage & Caresource/Medicaid prior authorization requirements. They said they did not need education or savings for Butrans or OxyContin at this time.
PPLPMDL0020000001	Independence	OH	44131	11/16/2012	Spoke with Angela & reviewed Butrans dosing. Also showed patient information booklet section on application. I let her know patients can use first aid tape around the edges of Butrans or cover it with a covering like Bioclusive or Tegaderm if necessary. I asked if she ever gets questions from customers about patches. She said usually with the fentanyl patch because they fill more prescriptions for that than Butrans. Discussed savings opportunities & eligibility requirements for usage of Butrans & OxyContin programs.
PPLPMDL0020000001	Parma	OH	44129	11/16/2012	I told Dr Salama I was concerned that his interest & use in Butrans has faded & that my goal was to revive that interest once again. I told him I planned to do that by showing him clinical trial data. He said he does not need data to like Butrans. He said he likes Butrans a lot & that the only thing that has been problematic is insurance coverage. I reviewed recent Aetna win for Butrans & also reviewed BWC, Medco/Express Scripts, Medicaid/Caresource prior authorization requirements. He said perhaps he had tried to use it too early when it came out because he started writing what he considered a lot of it & it seemed to always get rejected by insurance. He said he was not aware of the Caresource/Medicaid requirements, but that does help. He added that he did used to try to write it more & that he will start writing it again since I have helped him with this information. Dr Salama said clinically, he would prefer patients be on Butrans than many of the oral medications they are on. He also said that one thing that is difficult is that some patients are not really "failing" their current medication, so often times, insurance makes it very difficult. I told him his path of least resistance will be commercial insurance & reviewed trial/savings cards. I asked if he could start some new patients on Butrans if they are appropriate candidates. He agreed to do this, saying again he would like to have many more patients on Butrans. I committed to following-up with him & his staff.
PPLPMDL0020000001	Akron	OH	44319	11/16/2012	I asked dr if he has read the information on Butrans that I left him after our last conversation? Dr said that he had not but wants to use it but is concerned about the cost. I told him that proper patient selection is very important and that himself and his staff. I told dr to focus on his patient on viden that have commercial insurance. I showed him the trial card and copy cards and discussed how they work and what approximate cost could be. I asked dr if he will use it clinically? Dr said he will try.
PPLPMDL0020000001	Uniontown	OH	44685	11/19/2012	Discussed with dr his patients current status on Butrans. Dr said the last patient he initiated on Butrans was the 5mcg and titrated to the 10mcg. Patient called in and said Butrans was help a lot but it cost too much \$\$ and he wanted something else. Patients was started on percocet. I asked dr if the patient had commercial insurance? Dr Stetler said he did but his insurance wasn't very good and it was about \$40-50 a month after the copy card. I discussed appropriate patients for Butrans using the case studies, inclusion/exclusion criteria, and approximate conversion chart. Dr said that his patient base is limited but he will continue to use it because he has seen it work clinically.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	11/19/2012	Gave overview of Butrans with all key selling messages including, Cili, 7 day transdermal patch, appropriate patient selection, approximate conversions, inclusion criteria for BUP 3015. Dr said he has heard of it but has not used it. Dr said he does not like treating pain but does treats patients who are elderly with chronic pain and are inoperable. Dr asked about Medicare D coverage. I reviewed coverage status and asked him to focus on patients who have commercial coverage. I discussed trial cards, copy cards and application sites. I asked dr if he will use Butrans? Dr said he will consider it for his elderly patients.
PPLPMDL0020000001	Akron	OH	44312	11/19/2012	I gave quick review of Emma and asked dr to prescribe when a patient like her asks for more analgesia. Showed conversion chart. nothing else learned.
PPLPMDL0020000001	Akron	OH	44333	11/19/2012	I asked dr what criteria he uses to determine the pain level in his patients? Dr said he is able to look at the patients movement, range of motion in limbs and asks to family members when they are present. I showed dr the titrating and supplemental analgesia piece and told dr to ensure his patients are titrated when his patients present with criteria not in line with a current dose. nothing else learned.
PPLPMDL0020000001	Fairlawn	OH	44333	11/19/2012	I asked Sue if the Butrans DVD rotation videos would be helpful for patients who ask questions about Butrans? Sue said they would since they see many of Dr Shahs and Fouads patients. I gave her a couple of them along with more of the information kits since they were out. Sue said they handed out all 5 I left.
PPLPMDL0020000001	Westlake	OH	44145	11/19/2012	Was greeted by Lisa, Marketing Director, introduced myself and purpose of visit. Re: Pain & Pain management Educational opportunities at no cost. Asked to speak w/ the D.O.N. or Nurse Educator. Lisa stated, "The D.O.N. is Mary Anne Rantala, she is very busy today d/t nurse call offs and is unable to speak w/ you." She advised I call to set up appt. to meet with her. Left BC and PAP handouts
PPLPMDL0020000001	Westlake	OH	44145	11/19/2012	Spoke w/ Receptionist, Melissa Knoll, introduced myself and purpose of visit, Re: Pain & Pain management educational opportunities. Asked to speak to the D.O.N. or Nurse Educator. I was informed that Lisa Duperow is the D.O.N. and an appt. is required. Left BC and PAP handouts.
PPLPMDL0020000001	Westlake	OH	44145	11/19/2012	Spoke with Receptionist, Nora Murray, introduced myself and purpose of visit. Re: Pain & Pain Management Education opportunities at no cost. Asked to speak to the D.O.N. or Nurse Educator. Sat down with Nurse Educator, Patty O'Shea, Explained reason for my visit and talked about several Pain & Pain Management Education topics/in-services that I could offer at no cost. Also presented PAP handouts. Patty stated, "I am in charge of education for the STNA's and teaching the STNA classes and would love to have you come to one of our classes and talk about pain/pain assessment." She said any day in December after day-3 of her class would be fine with her. She gave me a copy of her class calendar and said to call her in the next couple of days to schedule the in-service. Patty said the D.O.N., Ovisi Pilblad was unavailable, but said she will talk with her about education opportunities for the Nurses. I mentioned that I would call her to set up a time to meet w/ her. Left BC and PAP handouts.
PPLPMDL0020000001	Westlake	OH	44145	11/19/2012	While in line waiting to speak with the receptionist, Adm. Ann approached me and said, "can I help you.?" I introduced myself and purpose of visit. She said, Patty O'Shea at Rae Ann Suburban down the street handles education." Called on Rae Ann Suburban, spoke with Patty O'Shea, she stated, I don't handle the education for Rae Ann Westlake, Sue Williams is the D.O.N. there." she informed me that Ann, the Adm. is the sister to the Adm., John Griffith at Suburban and things are handled separately. Explained that I would call Sue Williams @ Rae Ann Westlake.
PPLPMDL0020000001	Akron	OH	44312	11/19/2012	I asked dr Taylor if he had any questions about how to initiate a patient on Butrans? Dr said he didn't but wanted to see the approximate conversion chart along with telling him to initiate Butrans for a patient he has on Ultram or viden who is ready for a dose adjustment and is in chronic pain. Told dr about Aetna formulary change and asked him to prescribe.
PPLPMDL0020000001	Westlake	OH	44145	11/19/2012	Spoke w/ Receptionist, JoAnne Kosik, introduced myself and purpose of visit, Re: Pain & Pain Management Educational Opportunities at no cost. Asked to speak w/ the D.O.N. or Nurse Educator. Met w/ the D.O.N. Liz Williams, presented Pain & Pain Management Educational Opportunities and discussed topics and in-services available at no cost. Also reviewed PAP materials. She stated, "my nurses can definitely benefit from this." Scheduled an in-service on December 13th @ 2PM (1 of 3 staff meetings that day) Liz stated, I will have you start by presenting only at 1 meeting, then have you return in January to present again. Left BC and PAP
PPLPMDL0020000001	Westlake	OH	44145	11/19/2012	Spoke w/ Receptionist, Bobbie Gachett, introduced myself and purpose of visit, Re: Pain & Pain Management Educational Opportunities. Asked to speak w/ the D.O.N. or Nurse Educator. She advised me that the D.O.N. is Nikki Ring and an appt. is required. Left BC and PAP handouts.
PPLPMDL0020000001	Uniontown	OH	44685	11/20/2012	I asked Dr to attend my Butrans event on 12/12. Dr said that Wednesdays are tough and likes Ken Stewart's but will let me know next time I come in. I showed dr the Butrans information guide again and asked her to use this piece to help her explain what Butrans is and how it works. Dr said she will use it and how it may take time. I asked her if she would just use it once and allow it to speak for itself for the appropriate patient. I used the approximate conversion guide to explain the patients suited for Butrans and how she would initiate the starting dose.
PPLPMDL0020000001	Norton	OH	44203	11/20/2012	I asked Dr to attend my 12/12 program for Butrans. Dr said he might be able to make it and will check his schedule. I told him I would follow up in a couple of weeks. I showed dr the Emma and William profiles and asked him to find patients like those to initiate Butrans. Dr said he appreciates me reminding him so when hes in a room he will remember it. I asked him to also look for commercial insured patients and gave the Aetna update. I told dr to gain clinical experience so he has a reference point for an appropriate patient.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	11/20/2012	Spoke to Ashley about Butrans dosing, approximate conversions, titration, application sites and appropriate patients. I asked Ashley if they have dispensed any? She said they have and have 2 patients that fill it every month. I asked who the prescribers are and she would not tell me. They have the 5 and 10 in stock and have not dispensed any 20mcg/hr.

PPLPMDL0020000001	Cuyahoga Falls	OH	44221	11/20/2012	Good discussion with drs about Butrans and OxyContin. Discussed Butrans appropriate starting dose, need for titration and supplemental analgesia. Used case studies of Emm and William to discuss patients appropriate for Butrans. Dr Azem said she starts almost all patients on the 5mcg regardless of the dose of short acting. Dr said she liked to see the conversion chart and said she realized that some of her patients should have initiated on the 10mcg. Dr said she wanted those charts off the initiation and titration guide. Dr said she also did not know she could have patients take non opioid analgesics for breakthrough pain and liked that option much better. I asked dr to look for patients like Emma or William who need a dose adjustment. Instead of adjusting on the short acting, initiate Butrans if the patient meets the indication. Discussed trial cards, copy cards, Butrans Experience program, and managed care plans with Aetna. Dr said she ill use more.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	11/20/2012	Short discussion on Butrans dosing, initial starting dose, titration and use of supplemental analgesia. Dr said she needs to continue giving Butrans a chance in the right patient which she said I discussed and explained very clearly. Dr did say that they have a lot of Medicare patients and she has prescribed it for some of them and it has been too expensive. Discussed commercial insurance being the path of least resistance as well as Caresource PA criteria which dr did not know and said she has many Caresource patients. Dr said she will prescribe again.
PPLPMDL0020000001	Euclid	OH	44117	11/20/2012	Spoke with Receptionist, Joe Nathan, I introduced myself and purpose of visit. Re; Pain & Pain management educational opportunities. Asked to speak with the D.O.N. or Nurse Educator. Met w/ the D.O.N. Kathy Nemeth, Discussed pain & pain management educational opportunities at no cost. Shared PAP materials and discussed topics/in-services r/t pain & pain management. She said, " I am certainly interested, I need to check my calendar and I will e-mail you with dates and times." Left BC and PAP handouts.
PPLPMDL0020000001	Euclid	OH	44117	11/20/2012	Spoke w/ Receptionist, Merv Fichlin, introduced myself and purpose of visit. Re: pain & Pain management educational opportunities. Asked to speak w/ the D.O.N. or Nurse Educator. Merv stated, " We don't have a nurse educator and the D.O.N. is currently in a meeting." Advised to call and make app. Left BC and PAP handouts.
PPLPMDL0020000001	Sagamore Hills	OH	44067	11/21/2012	Quick call- Positioned Butrans for appropriate patients who may benefit from a transdermal analgesic dosed once weekly. Also reviewed that patients with commercial insurance could use the trial & savings cards for optimal access to Butrans with low cost. He said he would try to find a patient.
PPLPMDL0020000001	Bedford	OH	44146	11/21/2012	Dr Moufawad said everything is still going well with Butrans but he wanted to talk to me about OxyContin. He said he has noticed that many times, surgeons of various specialties will start patients on long-acting opioids like OxyContin after their surgery & then just keep the patient on that what seems like indefinitely. He said sometimes the patient ends up being referred to him or other pain management. Dr Moufawad said the goal of surgery should be to decrease or eliminate the need for narcotics to control pain. I agreed that the goal should be the least amount of opioid possible that is appropriate for a patient, adding that that will obviously vary depending on the patient & their diagnosis. I showed OxyContin FPI pointing out that OxyContin should not be used for the first 24 hours post-op. He said it just seems like the surgeons start patients without any type of exit strategy & added he wishes this would not occur. Dr Moufawad said he appreciates my responsible promotion of my medications & that I ask only for appropriate patients, adding that not all representatives choose to take an ethical approach. <font color=
PPLPMDL0020000001	Parma	OH	44134	11/21/2012	Spoke with pharmacy intern & technician as Allene was not available. Showed them information on Butrans dosing & titration. Reviewed Butrans once weekly transdermal dosing as neither of them were very familiar with the medication. Discussed Butrans as the only long-acting CII opioid analgesic & reviewed appropriate patient type/range. Also discussed OxyContin savings card program & Butrans trial offer. They agreed to share this information with Allene when she became available.
PPLPMDL0020000001	Sagamore Hills	OH	44067	11/21/2012	Dr Gemma apologized, saying she would be unable to stay for a talk at lunch. She saw my Butrans literature & said she does think Butrans is a good option for patients who need long-term pain control. I asked what type of conditions she treats with pain medications over a long period of time. She said she really doesn't have many as she has chosen to focus more on acute care for her practice. Positioned Butrans for appropriate patients in the treatment range & showed 3 doses with titration ability every 72 hours. Positioned OxyContin as a q12h dose of oxycodone for appropriate patients. She said she would keep both in mind in the event someone needed chronic pain control in her office.
PPLPMDL0020000001	Northfield	OH	44067	11/21/2012	Quick call- Positioned OxyContin q12h for appropriate patients who may benefit from a q12h dose of oxycodone & Butrans once weekly transdermal system 5mcg for appropriate patients with moderate to severe chronic pain if NSAID's or COX-2's are not controlling their pain adequately. Showed doses & titration piece. Dr Lango said she would look at it later, then walked out.
PPLPMDL0020000001	Akron	OH	44320	11/21/2012	Provided quick review of Butrans appropriate patients and specifically asked for her to prescribe Butrans for patients with commercial coverage or Caresource and explained the PA. Dr said she can see using it for a Caresource patients and said she will try it. I asked dr to gain some clinical experience with Butrans. <font color=blue><b>CHUDAKOB's query on 11/30/2012</b></font>-Cliff, look at your call objective (prior) for this call. It was a good one! How come you didn't stick with it?<font color=green><b>REICHCL's response on 12/04/2012</b></font>-<b>funny because I dont remember! I think this conversation took place as she was walking towards an exam room and time was limited. I see her today for lunch and will use it.</font><font color=blue><b>CHUDAKOB added notes on 12/05/2012</b></font>-ok. I was just curious! thanks!
PPLPMDL0020000001	Parma	OH	44134	11/21/2012	Dr Hernandez said his patients on Butrans & OxyContin are doing well, so he is happy. I asked if he is utilizing the savings cards (8 trial cards for Butrans). He said he doesn't seem to really give them out as much because most of his patients have BWC. I asked what strengths OxyContin he uses mostly. He said he finds that usually the 10 or 15mg are sufficient for his patients, reminding me that he has fewer patients on OxyContin now because he uses so much Butrans. I asked if he typically adjusts a patient's medication on their first visit. He said if they need it he does.
PPLPMDL0020000001	Northfield	OH	44067	11/21/2012	Spoke with Carolyn & reviewed Butrans dosing & titration. Gave her titration piece & she said she would give this to Greg when he was available. Discussed savings/trial cards for Butrans & eligibility requirements for usage. Also discussed OxyContin. She said they generally do not stock CII medications but sometimes order them in as needed.
PPLPMDL0020000001	Akron	OH	44320	11/21/2012	I told dr to prescribe Butrans for patients that are failing IR opioids and have either commercial coverage or caresource. I explained Caresource PA and asked him to prescribe. Dr agreed to keep trying.
PPLPMDL0020000001	BEDFORD	OH	44146	11/21/2012	Spoke with technician & reviewed Butrans & OxyContin savings programs. Discussed eligibility requirements, letting her know patients with government insurances are not eligible to use the cards. Also let her know cash patients cannot use the Butrans trial card, but can use the monthly card. Also discussed ability for OxyContin savings card to be used every 14 days if their prescription is written this way.
PPLPMDL0020000001	Akron	OH	44313	11/21/2012	Gave Jerry information about Butrans initial dosing, titration and use of supplemental analgesia. Told Jerry about Butrans trial cards and copy cards. OxyContin dosing and asked him which doses they dispense most often. Jerry said they dispense the 10, 20, and 40mg most often. left him a copy card flyer for oxycontin.
PPLPMDL0020000001	Parma	OH	44129	11/21/2012	Quick call- Shared Butrans titration piece with Elaine, reminding her that patients can take ibuprofen or acetaminophen for supplemental analgesia & could be titrated every 72 hours to a maximum 20mcg dose. She said she's been having success with Butrans & then walked into a room. Spoke with Dawn & reviewed managed care & savings information.
PPLPMDL0020000001	Cleveland	OH	44122	11/21/2012	Had call with Timia and MBK regarding educational programs. Timia is interested in scheduling a series of programs with their Team and others. She'd like to pair up topics to present live and via webinar for the CMs who work remotely. She has a meeting with the 4 Directors of Case and Utilization Management to determine how they want to schedule these programs on Dec. 18. She asked that we send her dates we're not available through July.
PPLPMDL0020000001	Cleveland	OH	44122	11/21/2012	The feedback from the LLE program was very positive and they had a high turnout rate. Conference call held with Ms. DelPrete-Brown to discuss interest in a Purdue Pharma non-accredited educational program for the case managers with Care Source. There are currently over 400 case managers at the Care Source locations across the state of Ohio (4 regions, Cincinnati, Columbus, Cleveland and Dayton). Virtual programs (webinars) work well. Pain and risk management topics are of interest to the group. Reviewed the FACET modules as possible topics. Requested that I forward a copy of each FACET module (as handouts, PDF files) for Care Source to review. Care Source is also interested in the "Care of the Person with Chronic Pain" program. The plan is to schedule a series of educational webinars during 2013 (likely start in January). The plan is aware that these are non-accredited programs. Full disclosure for M. Kowalski was provided verbally and a copy of her bio Dr Kansal said he actually has started 2 patients on Butrans since our last discussion. He said one of them was the patient who he had told me about at our meeting & he also found another. I asked if he gave each of them the patient experience kit & he said he did. He said that is all he knows about it so far & then walked away. Spoke with Dorothy who said Dr Kansal really did give Butrans to two patients. She said neither of them has called back saying they couldn't get it or that there was a problem, so they believe this to be good. I let her know I would return shortly for feedback. Reviewed OxyContin formulary grid for Medicare patients.<font color=blue><b>CHUDAKOB added notes on 11/30/2012</b></font>-<b>Nice work Ashleigh! You are making progress and that has to feel good! Your persistence pays off!!!
PPLPMDL0020000001	Sagamore Hills	OH	44067	11/21/2012	Discussed OxyContin as a q12h dose of oxycodone. I asked Dr Sevier his thoughts on treating a patient with a chronically painful condition with q12h OxyContin instead of a short-acting around-the-clock regimen like Percocet q4-q6. He said he does not have a problem with that, adding that if the patient's condition will continue over a period of time, or be chronic, it makes sense to treat them with long-acting options. He said he has been looking for a patient to try on Butrans, but just has not had anyone lately who fits the criteria.
PPLPMDL0020000001	Parma	OH	44129	11/26/2012	Reminded Dr Taylor of our previous discussion & asked her what was holding her back from just selecting a few appropriate patients for Butrans. She said she just hasn't been in the office very much since then, but promised she would try it for someone. Reviewed commercial & BWC coverage & gave her OxyContin formulary grid, pointing out broad coverage there.
PPLPMDL0020000001	Beachwood	OH	44122	11/26/2012	Quick call- Showed Dr Warren OxyContin Medicare D formulary grid & pointed out favorable coverage on CCRx & AARP plans. Handed him Butrans backgrounder & pointed out 3 doses of once weekly Butrans. Reviewed appropriate patient type. He just thanked me & walked into a room.
PPLPMDL0020000001	Brooklyn	OH	44144	11/26/2012	Dr Keith said the only problem with Butrans is that he really doesn't have many patients with "that degree" of pain. I asked what he meant. He said most of his patients have pain that can be controlled on medications like tramadol or Vicodin. I showed him range of patients for Butrans (also discussing OxyContin as an option for appropriate patients beyond this range), & showed him that patients on some doses of tramadol or hydrocodone may candidates for Butrans once weekly transdermal system. Reviewed that Butrans is the only CII opioid analgesic with once weekly dosing. Dr Keith said this was helpful in helping him better position Butrans. I asked him to try it for a few appropriate patients like this with commercial insurance, making sure to give them a trial/savings card. He said he would do this.
PPLPMDL0020000001	Brooklyn	OH	44144	11/26/2012	Quick call- Dr Silverman said he couldn't stay due to a meeting. Positioned once weekly transdermal Butrans for appropriate patients who would otherwise be candidates for chronic short-acting opioids around-the-clock (showed range of patients) & OxyContin for those who could benefit from q12h dosing of oxycodone. He just thanked me & walked out.
PPLPMDL0020000001	akron	OH	44333	11/26/2012	I asked dr if he initiated OxyContin for that patient he told me about a few weeks ago? Dr said he comes back in another week or two. I asked which dose he will start with and he said probably 30mg. I reminded dr he can titrate every 1-2 days if necessary and asked dr to continue to find appropriate patients for Butrans. Reminded dr about the Butrans program on 12/12. Dr said its unlikely he will be able to attend due to his house call
PPLPMDL0020000001	BEACHWOOD	OH	44122	11/26/2012	Spoke with Bill & reviewed Butrans appropriate patient type/range. Also showed titration piece & explained titration ability every 3 days & maximum dose of one 20mcg patch. Reviewed savings programs & eligibility requirements for usage.
PPLPMDL0020000001	Brooklyn	OH	44130	11/26/2012	Spoke with floater pharmacist who confirmed stocking here & said she has filled Butrans prescriptions at other locations in the Northeastern Ohio area. Reviewed appropriate patient type, dosing & ability to titrate every 72 hours. Also reviewed application sites & once weekly dosing. Discussed savings programs & discussed commercial insurance coverage. Reviewed OxyContin savings program. She checked & said they did not need any cards
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	11/26/2012	Dr is an new physician in the Edwin Shaw Rehabilitation Center and wanted to be given information on Butrans and OxyContin. Provided all key selling messages for both products. Discussed Butrans CII, 7 day transdermal system, mechanism of action, appropriate patient types, initial dosing, titration, use of supplemental analgesia, adverse events, managed care, and trial cards with copy cards. Dr said he thinks it's a good option for patients that are chronic and the short acting don't provide enough analgesia. Dr asked if it can be chewed. I told dr that Butrans is an opioid like all other opioids and it has the potential to be misused or abused as such. I asked dr if he sees himself using it? Dr said it is a good option to have. He said he has not seen patients yet but likes the option. I discussed OxyContin use, indication, doses, titration, appropriate patient types with patient profile
PPLPMDL0020000001	Brooklyn	OH	44144	11/26/2012	I reminded Dr Charles of previous Butrans discussions & showed him Butrans clinical study inclusion criteria. I asked him what his patients with pain from these conditions are doing for their pain- Where are they going for treatment if he is not treating them with any opioids long-term. He did not respond. Reviewed Butrans appropriate patient type/range & discussed q12h OxyContin as an option for appropriate patients beyond the Butrans



	Parma	OH	44129	11/26/2012	Dr Ortega said he received papers from Purdue about the side effects from Butrans that he told me about. I explained that the company tries to gather as much information as possible about each event to do their due diligence for these matters. He said one of his patients who he had take off OxyContin per the patient's request (because the patient did not want to be on any medication for awhile), is now back on it as of today. Dr Ortega said the patient came to him asking for OxyContin again because it is the only relief he has gotten. He said he prescribed 10mg q12h because he is a known legitimate patient. I told Dr Ortega it sounds like he did the right thing for this patient. He said some of his Butrans patients have also said that it is the only thing that gives them any pain relief. I reviewed titration with Dr Ortega, explaining that if a patient is tolerating Butrans but is not getting adequate relief, they can be titrated to the next highest dose, to a maximum of 20mcg. He said he will do this next time.
PPLPMDL0020000001	Akron	OH	44333	11/26/2012	I asked which prescribers in the area do they fill OxyContin prescriptions for? Jim said he didn't know. I asked if they dispense it regularly? I was told that the pharmacy does not like to divulge prescriber information for opioid use. Gave Butrans flashcard. nothing else learned.
PPLPMDL0020000001	Fairlawn	OH	44333	11/26/2012	Spoke to Pharmacist Amy about Butrans and asked her if she knows about it and if the pharmacy has dispensed it? Amy said she knows it and they have 2 patients that come in to have it refilled who are patients of Dr Shah. She said they have the 5mcg in stock only. nothing else learned.
PPLPMDL0020000001	Akron	OH	44333	11/26/2012	Gave Dr Butrans program invite and asked him if he will attend? Dr said he is in Canton that day and it will be difficult but he may try. I asked him how his OxyContin and Butrans patients are doing and if there is anything I need to know about his patients success? Dr said they are doing well and is getting good results with Butrans but has had difficulties with Medicare coverage. I told dr that Butrans is covered very well on commercial insurance, BWC and Caresource with a PA. Showed dr the OxyContin Medicare C coverage sheet and told him to continue prescribing OxyContin and Butrans.
PPLPMDL0020000001	Euclid	OH	44117	11/26/2012	Called D.O.N., Kathy Nemeth, to discuss scheduling an in-service on pain/pain management for her nursing staff. N/A, left msg.
PPLPMDL0020000001	Euclid	OH	44117	11/26/2012	Called D.O.N., Beth Walla to discuss pain & pain management educational opportunities @ no cost. N/A, left msg.
PPLPMDL0020000001	Beachwood	OH	44122	11/26/2012	Spoke w/ Karen Wolfe & Joe Hennessy on 11/19. At this time there is no list of education in-service topics available to provide to the NH. Called Merri Bunge to explain and discuss scheduling an in-service on pain assessment. N/A, left msg. to review the PAP materials that I previously left w/ her and we can discuss for in-service.
PPLPMDL0020000001	Westlake	OH	44145	11/26/2012	Called and spoke with Nurse Educator, Patty O'Shea. Schedule an in-service for 12/19/12 @ 2PM for the STNA class on pain/pain assessment.
PPLPMDL0020000001	Akron	OH	44333	11/26/2012	I got a quick Butrans message at window with dr after talking to Marsha Fox about his Butrans prescribing. I asked Marsha if they have a lot of BWC patients? Marsha said they have many and continue to get more. I asked if she knows that Butrans is covered for BWC patients. She said she did because I told her but had forgotten and she does all the PA's and insurance stuff. I told dr that he should prescribe Butrans to patients on BWC when they meet the indication because it is covered. Dr said ok and it is good to know. He asked for more OxyContin copy cards. Told dr to take patients on IR oxycodone and move them to q12h OxyContin.
PPLPMDL0020000001	Akron	OH	44310	11/26/2012	I showed dr the Emma profile and asked him to initiate Butrans the next time a patient on Ultram tells him that their pain is increasing but he doesn't want to increase the dose. I showed him the placebo patch, titration guide and told him that he can titrate every 72 hours and use opioid or non opioid analgesics for supplemental use. I asked dr if he will use it again? Dr said he will.
PPLPMDL0020000001	Parma Heights	OH	44130	11/26/2012	Called and spoke with D.O.N., Katherine Myers on rescheduling appt. for 12/4/12. She requested that I call her the second week in December because she is currently busy preparing for Surveys.
PPLPMDL0020000001	Beachwood	OH	44122	11/26/2012	Showed "William" patient profile to Dr Myton-Craig & reminded her of her interest in Butrans for this type of patient. She said the problem with patients on short-acting opioid is that most of them do not want to change from what they are already on. She added that when she mentions it to someone, they don't want to change. Reviewed ability to take supplemental analgesia with Butrans & discussed commercial insurance coverage, encouraging her to give those patients trial/savings cards so they are not out anything for trying it. She asked if I was sure that these plans would not make her prior authorize it. I told her only if the patient's plan has some sort of a carve-out. I asked if she would try it for a patient like this & she agreed. Reviewed favorable OxyContin formulary coverage on a variety of plans.
PPLPMDL0020000001	Fairlawn	OH	44333	11/26/2012	I spoke to Jessica and Sue about the Butrans patient information guides. I asked if they have had patients ask them questions about Butrans when a new prescription is dispensed or a refill? Sue said she gets questions about the rotation of the patch and if they can wear it in the shower. I showed them both the information guide and how it speaks to all those questions. I asked them both to give patients the information guide when they fill a script. They said they will and it is a good idea.
PPLPMDL0020000001	Cleveland	OH	44130	11/27/2012	Dr Fedorko said he has not "given" me "any business" in the last couple of weeks. I asked why he thinks he has not found a place for Butrans in his practice yet. He said "everyone" has pain, but they want Vicodin. I asked if he just gives patients that. He said he does not. He then showed me various compounding pharmacy prescription pads & said that he has been giving patients these instead of narcotics. I asked if they are always effective. He said they are if a patient has real pain. Dr Fedorko said he would try to find a place for Butrans for me. I told him he should do this for his appropriate patients, not for my benefit.
PPLPMDL0020000001	Cleveland	OH	44130	11/27/2012	Showed OxyContin broad formulary coverage & positioned it for appropriate patients who may benefit from oxycodone in a q12h dose. Reviewed Butrans coverage on Aetna, Medical Mutual, & Express Scripts at tier 2 preferred. Dr Diab thanked me & walked into a room.
PPLPMDL0020000001	Strongsville	OH	44136	11/27/2012	Spoke with technician who said Jim was not available. Showed Butrans & OxyContin savings cards & discussed eligibility requirements for each program. Showed 2 separate Butrans cards. Also gave overview of Butrans (commercial insurance) coverage & let her know OxyContin is available on a variety of managed care plans. She said she would give my information to Jim as soon as he came back.
PPLPMDL0020000001	North Hampton	OH	45349	11/27/2012	DR said that she has prescribed butrans for one patient last week. She said she hasn't heard back so she thinks that her insurance covered it.
PPLPMDL0020000001	Akron	OH	44312	11/27/2012	Saw dr through window and asked him if he has prescribed Butrans? Dr said he has not. I showed him the slide approximate chart and told him to use Butrans when a patient that has a chronic low back condition and is on Ultram or vicoden and its not providing enough analgesia. Dr said he needs to use it but said it needs to get coverage for medicare because such a large part of his business is from Medicare. nothing else learned.
PPLPMDL0020000001	Independence	OH	44131	11/27/2012	Dr Sundaram said he is just not really treating a lot of "pain patients" anymore. I asked him what types of patients he is still treating. He said is still treating more than he would like because pain management is not easy to get patients into. He added that some of the clinics are making patients wait 5-6 months before they are seen & some are just not even taking patients. He said he has some patients with conditions such as fibromyalgia & various other chronic conditions that he does still treat with opioids. Dr Sundaram said that it is those who he has never seen that call for "back pain" as their chief complaint that he will not treat. I agreed that he should be cautious in who he treats for pain with any medication. He then paused & said, "I have a lot of patients on chronic opioids". He said some are on OxyContin, others on Morphine or fentanyl. I agreed that he has many options for how to treat these patients. Showed Butrans range of patients & asked him to identify a patient in his practice, who has commercial insurance, who may benefit from Butrans once weekly. He just thanked me & walked into a room. Gave June OTC samples.
PPLPMDL0020000001	Parma	OH	44129	11/27/2012	Dr Chagin said he has not put anyone on Butrans lately & added that he is looking for the right patient. He went on to say that he almost put a patient on Butrans yesterday but did not. I asked him to elaborate. He said this patient has cancer that has a lot of pain from cancer & was taking Percocet around-the-clock, but it was not adequately relieving his pain. I told Dr Chagin it sounds like this patient would have been out the range for Butrans & might have been a candidate for an option like q12h OxyContin. Dr Chagin said he actually had called the patient's oncologist & that doctor did recommend OxyContin with Percocet for supplemental analgesia. I showed Dr Chagin the Butrans appropriate range of patients & asked him to think of patients who he is ready to start on an opioid for the first time or one who is in the 3-5 Vicodin per day range. Reviewed CII opioid with abuse/addiction potential & once weekly dosing. Dr Chagin said he is going to come to the upcoming Akron Butrans program. I asked him to try to get some clinical experience with Butrans before the program & he agreed.
PPLPMDL0020000001	Parma	OH	44134	11/27/2012	Showed dosing again & discussed how a patient would start at either 5 or 10mcg & titration ability every 3 days to a maximum 20mcg. I asked again for him to try Butrans on a few patients & he agreed.
PPLPMDL0020000001	Middleburg Heights	OH	44130	11/27/2012	Spoke with Marko & showed Butrans titration piece, pointing out ability to titrate every 3 days. Also showed maximum dose of 20mcg & let him know only one patch at a time is recommended. Marko said he thinks he still has a few customers on Butrans but wasn't aware of any titration occurring with them. Reviewed trial/savings program & provided OxyContin savings cards.
PPLPMDL0020000001	North Olmsted	OH	44070	11/27/2012	Quick call- Showed Butrans trial/savings card & started to review commercial coverage. Dr Ignat said he was too busy & walked away.
PPLPMDL0020000001	Parma	OH	44129	11/27/2012	Spoke to receptionist, introduced myself and purpose of visit, re: pain & pain management education. (very busy w/ phone calls) Asked to speak to the D.O.N. or Nurse Educator. Was advised that an appt. is needed. Confirmed D.O.N. - Erica Wood. Left BC and PAP handouts.
PPLPMDL0020000001	Parma	OH	44129	11/27/2012	Passed back OxyContin formulary grid & asked Dr Tolentino if she realized how broadly covered OxyContin is on various managed care plans. She said she hadn't noticed but that it is good to know. She said she has not prescribed "my patch". I asked why that is. She said she doesn't know & added that she would try, then walked away. Spoke with Kathi who said she still doesn't understand why Dr Tolentino hasn't written Butrans because she has pointed out several patients where she could use it. I asked Kathi to keep trying & scheduled another lunch.
PPLPMDL0020000001	Macedonia	OH	44056	11/28/2012	Spoke with pharmacist & reviewed Butrans once weekly dosing transdermally. She said she has seen a few prescriptions for Butrans along the way, but not anything consistent. I asked if there is any information about buprenorphine as a molecule that she thinks is imperative for me to convey to physicians. She said not that she can think of. She said no one has asked her anything about Butrans. Reviewed appropriate patient type. She agreed that there are many, many patients on chronic short-acting opioid therapy. Reviewed savings program/eligibility requirements for Butrans & OxyContin cards. She said they did not need any cards today.
PPLPMDL0020000001	Macedonia	OH	44056	11/28/2012	Dr Jeffers said she has read some about Butrans but asked for a refresher. Discussed appropriate patient type & Butrans as a CII opioid with abuse & addiction potential. Discussed importance of appropriate patient selection & documentation. Gave her information on OARRS & encouraged her to register as a measure to protect her practice. Positioned Butrans for appropriate patients who may benefit from once weekly transdermal dosing of medication for their moderate to severe chronic pain. Showed patient profiles to help her better understand positioning. She said she does not have a lot of patients on pain medication chronically, but would be comfortable having a patient on Butrans if pain management agreed that that was the best option for the patient. I asked if she would always refer someone with pain. She said if they need more than a month of medication, she would likely refer them, at least to get a specialist's opinion. Reviewed formulary coverage & trial/savings program. Discussed OxyContin 7 tablet strengths & q12h dosing.
PPLPMDL0020000001	Akron	OH	44310	11/28/2012	Spoke to Dr about re-evaluating his vicoden patients and initiating them on Butrans before they need a dose adjustment. I showed him the approximate conversion guide and asked him what an average vicoden dose his patients are on? Dr said that by the time he sees them they are pretty high up on vicoden. 7.5 5 times a day to 7 times a day. I showed him the scale and told him that the patients on 7.5 5 times a day would be appropriate for the 10mcg dose. Barry and I also suggested initiating them on the 5mcg dose and keeping the patient on their short acting with the end goal of tapering the patient off the short acting. I asked dr to continue looking for the appropriate patient and reminded him of BWC coverage and Aetna addition to 2nd tier.
PPLPMDL0020000001	Macedonia	OH	44056	11/28/2012	Dr Pai said he does actually have some patients on Butrans, but added that this is not due to his prescribing, however. I asked what he meant. He said some patients have come to him already on it from pain management or other physicians. I asked what they tell him about it. He said they all give very positive feedback & all have liked it. He said where, in his mind, Butrans should be used. He said almost as a "last resort" for some patients who he wants to refer to pain management. He added that if someone is getting to the point where he is finding that they need chronic pain medications, he would put them on Butrans & give them a referral for pain management at that time. He said they do have difficulties with pain management specialists as they do not seem to really do pain management anymore. He said they do an injection, then send the patient back. Discussed importance of appropriate patient selection & importance of documentation. Also discussed OARRS. Dr Pai said he has the paperwork to get registered, but he hasn't sent it in. I encouraged him to do this as a measure to protect the practice. He agreed. Discussed OxyContin as a q12h dose of oxycodone for appropriate patients who may benefit from q12h dosing. Dr Pai said he has some patients on OxyContin. Reviewed managed care coverage for both Positioned Butrans for appropriate patients with moderate to severe pain from a chronic condition who may benefit from once weekly transdermal dosing of a CII opioid medication & OxyContin for appropriate patients who could benefit from oxycodone dosed q12h. Dr Jack said he would really try to write some Butrans, then walked into a room.
PPLPMDL0020000001	Beachwood	OH	44122	11/28/2012	Placed 2nd follow-up phone call w/ Phyllis Tabbs to discuss pain & pain management educational opportunities at no cost. N/A left msg. on voicemail.
PPLPMDL0020000001	Parma	OH	44129	11/28/2012	Dr Gigliotti said he didn't have anything new to tell me about Butrans. He said no one has given feedback that he can recall, adding that he does think one patient's insurance didn't cover it recently. I asked if this is a case other than what he has told me prior. He said yes, more recently. He did not remember the plan. Spoke to Jazz, who said she does not remember anyone saying this any time recently. She said she would keep her eyes out, however. I asked Dr Gigliotti if he has initiated OxyContin for any of his patients lately. He said he writes OxyContin "all the time".
PPLPMDL0020000001	Bedford	OH	44146	11/28/2012	Dr Moufawad apologized, saying he didn't have time today. He added that he is still giving Butrans to patients & it seems to be getting covered. Reviewed broad OxyContin formulary coverage as well.

PPLPMDL0020000001	Westlake	OH	44145	11/28/2012	Placed follow-up phone call to D.O.N., Susan Williams. I was informed that she was in a meeting. Left msg. on her voice mail, re; discuss pain & pain management educational opportunities @ no cost.
PPLPMDL0020000001	Cleveland	OH	44122	11/28/2012	Placed follow-up phone call to the D.O.N., Connie Louis to discuss pain & pain management educational opportunities at no cost. N/A, Left msg. on her voicemail.
	Warrensville Heights	OH	44122	11/28/2012	Pointed out favorable managed care coverage for OxyContin on various Medicare plans that are prominent in Dr Zivic's practice. Also reviewed Butrans prior authorization requirements on Caresource. Dr Zivic stopped & asked me if I was serious about Butrans PA requirements for Caresource & Medicaid. I told him I was & asked if this will change anything he does this week. He said he is going to think of Butrans more since he can use it for a lot of his patients on Caresource. I let him know I would return to follow-up on this.
PPLPMDL0020000001	Munroe Falls	OH	44262	11/28/2012	I asked dr about the patient she initiated on Butrans. Dr said he is a school teacher with good prescription insurance and has low back pain. Dr said patient was on vicoprofen and she initiated on the 5mcg patch. Dr said patient said he is doing really well with Butrans and is happy. Dr said she gave the patient the copy card and he used it. Dr said when he comes back in she will evaluate his pain level and titrate to the 10mcg dose if necessary. I told dr she can titrate after steady state is reached at 72 hours and she can have the patient use opioid analgesics or non opioid analgesics for supplemental analgesia. I told her to continue to find Butrans patients since her first experience has been so positive.
PPLPMDL0020000001	Akron	OH	44333	11/28/2012	Dr said he prescribed an opioid naive patient to Butrans yesterday. The patient has bad stenosis and is an older patient and dr said he initiated on the 5mcg dose. Dr said he also gave patient the Butrans Experience kit.I asked what pain level the patient is in. Dr said when he is sitting he is a 0 but when he moves he is a 6 or 7. I discussed dosing, titration at 72 hours and use of opioid and non opioid analgesics for supplemental analgesia. Dr said he is comfortable titrating. Discussed OxyContin Q12h for his IR oxycodone patients.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	11/28/2012	Spoke w/ Receptionist, Linda Bergman, introduced myself and purpose of visit, re; pain & pain management educational opportunities. Asked to speak with the D.O.N. or Nurse Educator. Met with the D.O.N., Debbie (Deb) Bouslough, talked about pain & pain management educational opportunities that I could offer her facility at no cost. Reviewed PAP materials with her. I explained that I can present in-services on unbranded/branded materials. She stated, "this is wonderful, we have staff meetings twice a month, Can you come every two weeks or monthly?" I said, "absolutely." Debbie said, "I am going to have you talk w/ our Asst. D.O.N., Debbie Lovette, she handles our staff education." Met w/ Debbie Lovette, we discussed pain & pain management topics, I also reviewed PAP materials w/ her. She requested the first in-service cover pain assessment. Scheduled in-service for 12/21 @ 2PM. We will continue to work together to meet their needs. I asked if there was a NP on staff that I could also meet with. Debbie stated, "yes, her name is Shanda, we can have you met with her at some point."
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	11/28/2012	Spoke w/ receptionist, Cheryl Isaacs, introduced myself and purpose of visit, re; pain & pain management educational opportunities at no cost. Asked to speak with the D.O.N. or Nurse Educator. Cheryl stated, "you need to speak with Nancy Strusser, the Staff Development Coordinator, but she is not available right now." The D.O.N. is Anne Fagerstrom. Left BC and PAP handouts.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	11/28/2012	Spoke w/ receptionist, Jenn Reid, introduced myself and purpose of visit, re: pain & pain management education opportunities at no cost. Asked to speak w/ the D.O.N. or nurse educator. She stated that the D.O.N., Deb Keller was at a meeting w/ Corporate. She mentioned that the name of the facility has been changed from Traditions at Bath Road to National Church Residences-Bath Road. Jenn stated "this facility will no longer have assisted living, only LTC." Left BC and PAP handouts.
PPLPMDL0020000001	Barberton	OH	44203	11/28/2012	Spoke to dr in depth about his use of Butrans and the factors that have gone into his limited prescribing currently. Dr told me that he understands and believes in the product clinically and has had good results with Butrans with the patients on it. Dr said his problem with it has been formulary coverage. Dr said he has mostly Medicare, Medicaid, private insurance and BWC. Dr said he knows it is covered for BWC. I spoke with dr about being specific with the type of patient he is initiating. A patient on Ultram, vicoden or low dose percocet that needs a dose adjustment and has private insurance. I explained that ALL patients with private insurance can not only use the trial offer card but use the copy card and pay as little as \$15 for 1 month of Butrans. Dr said he was glad to get that information because it will help him focus on the right patients. I told him to use the Butrans patient experience kits and to use more Butrans.
PPLPMDL0020000001	Maple Heights	OH	44137	11/28/2012	Spoke with Kimberly, pharmacy manager, who said she actually just ordered Butrans but ended up sending it right back because the co-pay for the customer was much higher than expected. I asked what plan this customer has. She said she thinks it was some sort of Medicare plan. Reviewed Butrans coverage on commercial plans as well as Medicaid prior authorization requirements. Gave her trial/savings cards per her request. Also discussed OxyContin cards. She said she didn't need any of those at this time.
PPLPMDL0020000001	Parma	OH	44129	11/29/2012	Introduced Butrans Patient Experience Program & Kits to Myra. She said she thought the program was an excellent idea & committed to giving out at least 5 kits. Myra said she is really going to start pushing Butrans more to patients. She said she truly thinks it would benefit so many of her patients. She went on to explain that so many patients just don't want to try it because they resist changing & don't believe in Butrans, saying it will not stick for 7 days. I asked Myra if she, as a medical professional, believes in Butrans. She said she does. I asked her if she is conveying that to patients. She said she could do a better job of insisting to appropriate patients that they try it. I pointed out that eligible patients using the trial/savings offers would be out little to nothing to simply try Butrans. I asked her to be a bit more persistent with Butrans, where appropriate, & encourage patients to at least give it a fair trial. Myra agreed. She looked at her next patient chart & asked how she would start a patient who is taking Lortab 10mg 5 times per day on Butrans- how would she taper this patient. I told Myra this patient is likely beyond Butrans. She asked if she could just start the patient at 20mcg. I told her this is not recommended & has not been studied. She said she was going to ask Dr Nickels what his thoughts were on trying the patient at 20mcg. I told her again we have not studied this. Re-directed her to appropriate range of patients & asked her to try Butrans
PPLPMDL0020000001	Parma	OH	44134	11/29/2012	Dr Hernandez told me about a patient who he just started on Butrans. He added that the patient has given feedback that is excellent & it has changed the patient's life. I asked if this is the type of thing he needs to hear to put more appropriate patients on Butrans. Dr Hernandez said he has always believed in Butrans, so he is always putting patients on it. Positioned OxyContin for appropriate patients who are beyond the Butrans range. Dr Hernandez said he often just uses more Butrans on those patients. I reviewed maximum dose of 20mcg for Butrans.
PPLPMDL0020000001	Parma	OH	44129	11/29/2012	Spoke with pharmacist, Rick, who said he does have a few customers regularly on Butrans. I asked what feedback he has gotten. He said he has not heard anything. I showed him trial/savings cards & asked if he was familiar with the savings program. He said he wasn't aware there was one. Walked him through how eligible customers could utilize the cards. Offered OxyContin savings cards but Rick said he was not interested in having them.
PPLPMDL0020000001	Akron	OH	44312	11/29/2012	Followed up with dr from lunch appointment last week. I asked dr if she has initiated any of the patients she said would be appropriate for Butrans. Dr said she discussed it with one of her patients but the patient did not want to change from her pills. I asked dr if her pills were providing enough analgesia? Dr said all she knows is that the patient did not want to change and dr said she will try again next time the patient comes back in. I told her to focus on the private insurance patients and to use the copy cards. Dr said she wanted another Butrans approximate slide conversion piece. nothing else learned.
PPLPMDL0020000001	Akron	OH	44310	11/29/2012	Quick Butrans message in hallway and asked dr to take his patients on Ultram who ask for a dose adjustment and initiate Butrans if they meet the indication. Showed dr the doses and approximate dosing scale. Dr said ok. nothing else learned. Gave him invite to program 12/12
PPLPMDL0020000001	Maple Heights	OH	44137	11/29/2012	Quick call- Reviewed Butrans dosing & titration with Dr Gene. He said it was a good reminder & said he would try to find someone for Butrans since he had a patient do really well on it.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	11/29/2012	I asked Amy about Butrans prescriptions she has dispensed recently. Amy said she has about 3 patients that come into fill Butrans. Amy said that 2 of them are on the 5mcg and one on the 10mcg she believes and the 10mcg was a titration dose. I showed Amy the titration and supplemental analgesia flashcard. nothing else learned.
PPLPMDL0020000001	Akron	OH	44319	11/29/2012	I asked pharmacist about Butrans dispensing and OxyContin dispensing. Jim said that they still have not filled any Butrans and fill OxyContin fairly regularly. The 109 and 40 mg doses are the most commonly dispensed. I showed the titration card and explained appropriate starting dose and titration.
PPLPMDL0020000001	Akron	OH	44305	11/29/2012	Spoke to Pherin(ma) about a patient she called me about last week for had Caresource and dr wanted to place on Butrans. Pherin said she filled out the PA and sent it in and Butrans was approved for 1 year. Dr said that patient was failing on Ultram and had bad back problems. Dr said he initiated on 5mcg because patient was not over 300mg/day of Ultram. I told dr that he can titrate every three days and patient can use opioid and non opioid therapy for supplemental analgesia. I asked dr to continue prescribing.
PPLPMDL0020000001	Fairlawn	OH	44333	11/29/2012	Spoke w/ receptionist, Dawn Taylor, introduced myself and purpose of visit, re; pain & pain management educational opportunities at no cost. Asked to speak w/ the D.O.N. or Nurse Educator. Dawn tried to reach the D.O.N, but N/A. Dawn said, "I think you will want to meet w/ our Educational Training Director, but she is doing an in-service right now." Verified CPP- Omnicare Left BC and PAP handouts.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	11/29/2012	Gave quick review Butrans dosing and asked him if he has patients currently on Ultram or vicoden for more than three months? Dr said he does. I told him to initiate Butrans for those patients that are not controlled on their IR opioids. I showed him the dosing and approximate conversion guide. Dr said he has tried to get patients to take but they refuse. I gave him a few of the Butrans patient information guides and told him to give the patients with commercial insurance after he explains why he believes Butrans may be the best option.
PPLPMDL0020000001	Akron	OH	44319	11/29/2012	I began speaking about OxyContin and dr said he does not use it. I asked why and he said he refers patients out early to pain management. I told him that Butrans may fit his patients earlier on in the treatment of pain. Dr told me to leave literature. nothing else learned.
PPLPMDL0020000001	Fairlawn	OH	44333	11/29/2012	Spoke w/ Receptionist, Debbie Gruelle, introduced myself and purpose of visit, re; pain & pain management educational opportunities at no cost. I asked to speak w/ the D.O.N. or Nurse Educator. Debbie stated, "we don't have a nurse educator and our D.O.N., Deborah Shafer is in an interview." Verified CPP- Omnicare Left BC and PAP handouts.
PPLPMDL0020000001	Fairlawn	OH	44333	11/29/2012	Spoke with receptionist, Judy Joyner, introduced myself and purpose of visit, re; pain & pain management educational opportunities at no cost. Asked to speak w/ the D.O.N. or Nurse Educator. Judy stated "Our D.O.N. Kathleen Franey, is in a meeting." Confirmed CPP- Omnicare Left BC and PAP handouts.
PPLPMDL0020000001	Akron	OH	44313	11/29/2012	Spoke w/ Receptionist, Nicole Greathouse, introduced myself and purpose of visit re; pain & pain management educational opportunities at no cost. Asked to speak to the D.O.N. or nurse educator. Nicole Stated, the D.O.N., Dayna Krosta is currently in a meeting." Advised its best to set up an appt. Left BC and PAP handouts.
PPLPMDL0020000001	Akron	OH	44312	11/30/2012	I asked dr if he would attend my event for Butrans on 12/12.? Dr said he does not have time to go to evening events but will talk with me about Butrans on Monday morning if I stop by. I told dr that I would and asked him if he has any clinical experience with Butrans yet? Dr said he has tried twice and knows he didn't have patients that could get it. I asked if that means managed care? Dr said yes and they both were Medicare patients. Dr said we can talk more Monday.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	11/30/2012	Gave dr the invite to the Butrans program on 12/12 and asked for his attendance. Dr said he will consider and thinks Butrans is a good product. I asked dr if he says that because he has used it? Dr said no but the times he said I have discussed it with him made sense. I told dr to use the CII, 7 day patch when a patient on an IR opioid or non opioid is failing the therapy. Dr said ok and left.
PPLPMDL0020000001	Parma	OH	44129	11/30/2012	Reviewed dosing for Butrans with Dr Khobaili & discussed choosing a recommended starting dose based on the patient's current medication regimen. Showed him how the prescriptions could be written. He said he would try to find a patient & that he is sure there is someone he can put on it. I asked him to be sure to give the appropriate patients the Butrans trial/savings cards & discussed this with Carla as well.
PPLPMDL0020000001	Garfield Hts	OH	44125	11/30/2012	I asked Dr Sadowski what the clinical benefit of having patients on around-the-clock short-acting opioids chronically was. He said nothing really. I asked him why, then has he not tried Butrans on a few appropriate patients. He said he promises he is keeping it in mind. I suggested he try writing it rather than just thinking of it. He said he would. Reviewed OxyContin 7 tablet strengths.
PPLPMDL0020000001	Cleveland	OH	44125	11/30/2012	Spoke with Chris & reviewed Butrans dosing & titration ability every 3 days. Also discussed maximum dose of 20mcg. I asked if he has noticed any titration with Butrans- he said he hasn't really seen any activity for it, so he does not think "anyone" is writing it. I told him physicians of various specialties have found a place for Butrans & reviewed appropriate patient type. Discussed savings programs for Butrans & OxyContin. He said they didn't need any cards.
PPLPMDL0020000001	Uniontown	OH	44685	11/30/2012	spoke to pharmacist about butrans dosing, titration approximate conversion scale, application sites and appropriate patients. Pharmacy has not filled any but have the 5mcg in stock.
PPLPMDL0020000001	Fairlawn	OH	44333	11/30/2012	Called and spoke w/ Education Training Director, Terri Gildone to discuss pain & pain management educational opportunities. She stated, "I just did an in-service on pain yesterday," She requested that I call her in March 2013 and we can set up something for then.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	11/30/2012	Placed a phone call to Nancy Strusser, in Staff Development to discuss pain & pain management educational opportunities. N/A, left msg.
PPLPMDL0020000001	North Olmsted	OH	44070	11/30/2012	Placed follow-up phone call to the D.O.N., Erica Wood. I was informed that she was off the premises. Left msg on her voice-mail.

PPLPMDL0020000001	Fairlawn	OH	44333	11/30/2012	Placed follow-up phone call to D.O.N., Debbie Shafer, to discuss pain & ain management educational opportunities. N/A, left msg.
PPLPMDL0020000001	Uniontown	OH	44685	11/30/2012	I asked Kim if they have had any more movement with Butrans or OxyContin? Kim said it has pretty much been the same since I was in last time. They have a couple of people on Butrans and are consistently refilling which is good. OxyContin remains the same with not many new prescriptions. I gave her some of the patient information guides and asked her to hand them out.
PPLPMDL0020000001	Fairlawn	OH	44333	11/30/2012	Placed phone call to D.O.N. Kathleen Franey to discuss pain & Pain Management Educational Opportunities, N/A, left msg on voice mail.
PPLPMDL0020000001	Akron	OH	44313	11/30/2012	Placed follow-up phone call to D.O.N., Dayna Krosta, The receptionist, Nicole said, "Dayna is not in today," requested voice-mail. I was unable to leave msg. d/t mailbox full. Will call on 12/10/12.
PPLPMDL0020000001	Akron	OH	44319	11/30/2012	I asked dr if it makes sense to place a patient on a controlled release product like Butrans for a patient that is uncontrolled on vicoden? Dr said because Butrans is too expensive. I asked dr how he knows sense he has not used it enough? Dr said it wont be cheaper than vicoden? I once again asked how he knows and if vicoden isn't working why refill the prescription? Dr said he doesnt want to talk about it. I asked him if he would attend my event on 12/12 and he said no. nothing else learned.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	11/30/2012	I asked dr if she has used Butrans yet since our last discussion? Dr said she has not but said she would use it at some time. I told her to look at her patients on Ultram or vicoden that she treats for low back pain or osteoarthritis who may need a dose adjustment. Dr said she would use it and she cannot attend my event on 12/12.
PPLPMDL0020000001	Sagamore Hills	OH	44067	11/30/2012	Caught Lynda at the window- passed back Butrans initiation/titration guide & reviewed 5 & 10mcg starting doses depending on patient's current medication regimen. Lynda said she would try to find someone for it because she thinks Butrans seems like a good medication.
PPLPMDL0020000001	Garfield Hts	OH	44125	11/30/2012	Spoke with floater pharmacist & showed Butrans titration piece. Reviewed 3 strengths & ability to titrate every 3 days to a maximum 20mcg patch. She asked if they can use 2 patches at once (ie 2 of the 10mcg patches). I told her this has not been studied & therefore is not recommended. Reviewed trial/savings program, letting her know the patient can use the savings card again if the new strength prescription is done for titration, minimizing out-of-pocket costs for eligible patients. Also discussed OxyContin savings program. She said she would leave my information for the regular staff.
PPLPMDL0020000001	Copley	OH	44321	11/30/2012	Spoke to Jenna again about the importance of proper initiation and titration of Butrans using the new piece. Jenna said she understands the importance and has not had any new prescriptions. I asked what they are stocking and she said the 5 and 10mcg. nothing else learned.
PPLPMDL0020000001	Brooklyn	OH	44144	11/30/2012	Shown 7 tablet strengths of OxyContin & asked Dr Detwiler to consider an intermediate strength if appropriate, the next time he is titrating a patient's OxyContin dose. He said he would try to remember to do that & walked away.
PPLPMDL0020000001	Akron	OH	44312	11/30/2012	Gave quick review at window about Butrans CIII, 7 day transdermal patch and showed dr doses. I told dr that Butrans should be used early on in the treatment of pain for patients who may or may not be on short acting opioid analgesics. Dr said he remembers and said he remembers thinking it has a good niche but has not used. I asked why and he said he just forgot about it. I told dr I wanted to stop back 1 or 2 times a month to provide information about Butrans. Dr said ok but can't promise he will always be available. I asked dr to use Butrans when he has a patient complaining about their Ultram or vicoden not working anymore to initiate Butrans. Handed him an initiation and titration guide.
PPLPMDL0020000001	Uniontown	OH	44685	11/30/2012	caught dr at window and told him there is a CIII, 7 day transdermal system available for his patients who may be failing on Ultram or vicoden. Dr said ok and told me to leave info. nothing else learned.
PPLPMDL0020000001	Independence	OH	44131	11/30/2012	Roman requested more OxyContin savings cards & also added that he wants to just give up on it sometimes. I asked what he meant. He said it just seems like insurance is never covering it. I asked if he was talking about Butrans or OxyContin. He said he feels like he has had trouble with OxyContin's coverage & cost lately. He said that patients are getting it fine in the hospital & in the nursing home even, but once they get out to go home, they can't get it anymore. He said Medicare must not be covering it anymore. I showed him OxyContin Medicare formulary grid & explained the abbreviations, walking him through plans, but reminding him that patients with any type of government insurance cannot utilize savings cards. Discussed broad formulary coverage & commercial coverage for Butrans. Roman had a student with him. He told the student that he has much success treating pain with OxyContin & he likes it because "patients who want to abuse it can't anymore". I told him that we have no data that suggests that & showed him field card for reformulation. He said he still thinks it is safer than it was. I told him he should be just as cautious as he always was in prescribing it.
PPLPMDL0020000001	Solon	OH	44139	11/30/2012	Spoke w/ Janet Mays from payroll who was covering for the receptionist. Introduced myself and purpose of visit. Re: pain & pain management educational opportunities at no cost. Asked to speak w/ the D.O.N. or Nurse Educator. Janet stated, "the D.O.N. is not in today, all education is handled through corporate (Kindred), but you may want to speak with Gretta Redus, the Staff Development Coordinator, but she is not available today." Janet informed that me, they are now part of Kindred Transitional Care and Rehabilitation. When I asked who their CPP was, she was not sure. Left BC and PAP handouts.
PPLPMDL0020000001	Copley	OH	44321	11/30/2012	I followed up on last call with dr about why he needs to initiate Butrans. I showed dr the patient types and told him when a patient comes in with legitimate pain on Ultram or vicoden and want more and you are not willing to increase the short acting, to initiate Butrans! I showed him the conversion chart to explain where he should initiate Butrans. Dr said ok. I asked him if he is going to use it and he said sure.
PPLPMDL0020000001	Twinsburg	OH	44087	11/30/2012	Spoke w/ receptionist, Marge Adams, introduced myself and purpose of visit, re: pain & pain management educational opportunities at no cost. Asked to speak w/ the D.O.N. or Nurse Educator. Marge stated, "an appt. is required." Confirmed CPP- Omnicare. left BC and PAP handouts.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	11/30/2012	Called to speak w/ D.O.N., Deb Keller, to discuss pain & pain management educational opportunities. I rec'd a msg, that she was not available. Left voice mail.
PPLPMDL0020000001	Parma	OH	44129	11/30/2012	Dr Roheny asked me how long I have been trying to get him to write Butrans for. I told him it has been just under 2 years. He said anyone else would have given up by now. I told him I had no plans to do that as I still believe he has patients who may benefit from a medication like Butrans. He asked me to go over dosing with him. I asked him if he is asking because he has specific patients in mind. He didn't answer. I showed him 3 strengths of Butrans & also pointed out examples of how the prescriptions could be written. Showed him chart on choosing the recommended starting dose depending on what the patient is currently taking. He asked what the status is for Caresource. Discussed prior authorization requirements for that plan & reviewed commercial insurance coverage. He said he would do his best. I asked him also to consider OxyContin at a low dose if Butrans is not covered & he thinks the patient is appropriate for that as an option.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	11/30/2012	Saw dr in hallway and asked him if he believes a CIII, 7 day transdermal patch would fit in his practice for his patients failing on IR opioids? Dr said probably not because he said is trying his best to not use long acting products. nothing else learned.
PPLPMDL0020000001	Solon	OH	44139	11/30/2012	Spoke w/ receptionist Rashida Hawthorn, introduced myself and purpose of visit. Re: pain & pain management educational opportunities at no cost. Asked to speak w/ the D.O.N. or Nurse Educator. Rashida phoned the D.O.N., Judith Sawtner, she was unable to meet w/ me, but asked if I could leave my BC. Verified the CPP- RemedyLeft BC and PAP handouts
PPLPMDL0020000001	Akron	OH	44312	11/30/2012	I told dr to continue to think about Butrans for those patients of his that are taking Ultram or vicoden and are failing. Dr said he has not used yet but plans to. I reminded him to look at those patients with private prescription insurance. Dr said he will look.
PPLPMDL0020000001	Akron	OH	44307	12/3/2012	Discussed Butrans titration and use of supplemental analgesia with Kurt. Kurt said that he has not seen any Butrans but does dispense a lot of the 10, 20 and 60 OxyContin. He said that most all of the dispensing are refills every month. Very few new prescriptions.
PPLPMDL0020000001	Parma	OH	44129	12/3/2012	Dr Taylor said she hasn't had any new patients so she has not been able to prescribe Butrans yet. I asked her why focus on only new patients, reviewing appropriate patient type. She said she wishes she would have never started these patients on short-acting opioids because she would have rather been able to use Butrans, adding that once someone is on short-acting, they cannot be switched to a long-acting opioid. I agreed that many patients would not be able to transition instantly, but reminded her that patients can take supplemental analgesia if necessary. Also reminded her that eligible patients could try Butrans for little-to-no out-of-pocket cost when using the trial card. She said she would do her best to find someone. She asked about BWC coverage. I let her know as of now, they are paying for it as far as I know. Reviewed broad OxyContin formulary coverage. Mary asked if she can give patients with BWC the Butrans trial/savings cards. I told her patients on BWC were not eligible for use & let her know they are for commercial insurance only.
PPLPMDL0020000001	Maple Heights	OH	44137	12/3/2012	Discussed OxyContin q12h dosing of oxycodone available in 7 tablet strengths for flexibility of dosing & titration. I asked Dr Dale where he thinks Butrans should be used clinically. He said he does not know really. He went on to say that there really is no one single answer probably & that there are different types to use it in. I agreed that there are different patient types that may be appropriate for Butrans. Reviewed appropriate patient type/range & discussed proper starting dose based on patient's current medication regimen. Also discussed Butrans as the only long-acting CIII opioid, also reminding him of abuse/addiction potential. Dr Dale said he thinks that all patches are somewhat of niche products because not very many patients like using patches. I showed him Butrans demo & asked what he thoughts patients would say about it. He said it was a nice feel & said it was different than what he was thinking of. I encouraged him to encourage appropriate patients to at least try Butrans to get some clinical experience to draw his own conclusions. Reminded him of managed care coverage & spoke with floater pharmacist & reviewed Butrans dosing & titration. Also discussed appropriate patient type/range, reminding her that Butrans is for pain only. Discussed maximum dose of 20mcg. Showed trial & savings cards & reviewed eligibility requirements for card utilization. Offered OxyContin savings cards, but she said to check with the regular pharmacist next time.
PPLPMDL0020000001	Akron	OH	44312	12/3/2012	Discussed Butrans and OxyContin with dr. Dr is new to Internal Medicine of Green and did not know about Butrans. Provided all key selling messages including, dosing, indication, titration, appropriate patients, application sites. Dr said the 7 days is great and sees how it would be a good option to have. Dr said he is just now building his patient base and will use Butrans where appropriate. I discussed managed care and copy cards.
PPLPMDL0020000001	Solon	OH	44139	12/3/2012	Reinforced OxyContin's favorable managed care status, reminding him of Medicare D coverage. Also passed back Butrans dinner invitation. Dr Zaidi asked if he can send Julie (nurse) if he cannot attend. I asked him to let me know so I could get approval.
PPLPMDL0020000001	Akron	OH	44319	12/3/2012	Spoke to Dr and his wife about the program on 12/12. Mrs. Katerji asked if she could attend? I asked her if she is a RN or NP? She said no but she is the office manager and everything goes through her. I told her that Purdue's policy is that she must have one of those designations to attend. Dr said he will probably not attend if she cannot go. nothing else learned.
PPLPMDL0020000001	Akron	OH	44319	12/3/2012	Asked dr at window how her Butrans patients are and why she chose Butrans. Dr said she only has 2 patient on it and they were referrals to her already on it. I asked if it is working to provide analgesia? Dr said everything is good. I asked if there is some time when I could speak to her more about Butrans and she told me no.
PPLPMDL0020000001	Maple Heights	OH	44137	12/3/2012	I asked Dr Gene where he thinks Butrans should ideally be positioned- who is the Butrans patient. He said he should try to use it more & added that he thinks if someone is not well-controlled on a current pain therapy, Butrans could be used there. I agreed this is potentially a patient type & reviewed the appropriate type/range. Reviewed Butrans as the only long-acting CIII opioid & advised about abuse & addiction potential. Spent time discussing proper starting dose & importance of titration if necessary. Also discussed titration every 3 days, ultimately to a maximum 20mcg if appropriate. Dr Gene asked if he is correct in that patients can take short-acting opioids with Butrans. I told him he is correct, also reminding him that ibuprofen or acetaminophen can be used as supplemental analgesia. Reviewed managed care coverage & asked him to select a patient or two for Butrans who have commercial insurance & give them a trial/savings brochure. He agreed. Reviewed OxyContin 7 tablet strengths & q12h dosing.
PPLPMDL0020000001	Fairlawn	OH	44333	12/3/2012	Quick call with Gary and asked him if he has dispensed any more Butrans? Gary said he didn't think so but they have the 5 and 10 on the shelf. I showed him the titration and supplemental analgesia piece and discussed that. I asked about his OxyContin dispensing and what he dispenses the most. He said the 10, 20 and 40 are most often dispensed and ordered. Left dosing information on both products.
PPLPMDL0020000001	Garfield Heights	OH	44125	12/3/2012	Spoke with Dave & reviewed Butrans dosing & titration. Reviewed appropriate Butrans patient type & showed savings/trial cards. He said he did not think he needed to keep any on hand. I let him know savings information can be accessed online. Also discussed OxyContin savings program & eligibility.
PPLPMDL0020000001	Akron	OH	44313	12/3/2012	I discuss the Butrans patient information guide to Jason and told him it might help patients with questions about Butrans. Jason said it is nice and he wanted a couple. Jason said he has a steady flow of OxyCotin but slower than normal on Butrans. I discussed the appropriate starting dose of Butrans and need for titration.
PPLPMDL0020000001	Akron	OH	44333	12/3/2012	I asked dr how often he may have patients referred to him on vicoden or percocet? Dr said he does. I told dr to initiate Butrans on those patients on the short acting products who may need a dose adjustment. Dr said that that is what he does and he likes Butrans. I reviewed the titration again and handed him a an initial titration and initiation guide. nothing else learned.

PPLPMDL0020000001	Parma	OH	44129	12/3/2012	Reviewed titration of Butrans every 3 days & maximum dose of 20mcg with Elaine. She just said she has been using it & was too busy to stop to talk. Spoke with Dawn & reviewed managed care information for Butrans & reminded her of Caresource & Medicaid prior authorization requirements. Dawn said both Elaine & Myra have been using more Butrans lately. Dawn said referrals to their office have increased.
	Parma	OH	44134	12/3/2012	I reminded Dr Mandat of previous conversations when he has told me that he feels the ideal place to use Butrans is in patients for whom tramadol is not adequately controlling pain. He said that is correct. I asked him what kind of results he would expect with Butrans for a patient who was not getting adequate pain relief from 3-5 Vicodin per day. He said he thinks it would be great. He also said that he has noticed that some of the nursing homes lately have, when he has requested Butrans for patients, asked him to change it to fentanyl instead. I asked what he does when that happens. He said he stays with what he wants, which is Butrans. He said he is still the doctor. I agreed. I asked him to try to identify a patient who is on Vicodin who may be a good candidate for Butrans & prescribe it for them if appropriate. He said he would see what he can do.
PPLPMDL0020000001	Akron	OH	44312	12/3/2012	Told dr that Butrans is the ONLY CIII, 7 day transdermal patch for moderate to severe pain. I told him that the most important thing before he prescribes is to know the type of patient it is suited for. Gave him the conversion guide and told him when a patient on an IR opioid tells him that it is not working as well anymore and a dose adjustment is apparent, to use Butrans for 7 days of buprenorphine. Dr said he is still looking for patients but he has a lot of Medicare and said it has been tough. I told him to focus on commercially insured patients.
PPLPMDL0020000001	Akron	OH	44312	12/3/2012	Dr told me that when patients are in enough pain to need OxyContin he will refer out to pain management. Dr said Butrans is a product that he will begin start using. Dr said he has one patient on Ultram with spinal stenosis who he believes is ideal for Butrans. I asked about the patients insurance coverage and he could not remember. I told him to continue looking for patients on any IR opioid that may need a dose adjustment to initiate Butrans if the patient meets the indication.
PPLPMDL0020000001	Uniontown	OH	44685	12/4/2012	I asked Rosemary about how the Butrans information kits may be helpful to the patients getting Butrans dispensed. Rosemary said she will take a few and that they have a few patients that get it refilled each month. She said could not remember the doctors but knew that 2 of them are on the 5mcg and one on the 10mcg. I discussed OxyContin copay cards and appropriate patients. The pharmacy still has 4 left.
PPLPMDL0020000001	Parma	OH	44134	12/4/2012	Lynda said she was too far behind to stay for lunch. Reviewed Butrans appropriate patient type & showed range of patients in initiation guide. I asked if she sees a patient who falls into this category, is appropriate, & meets the Butrans indication, she will write Butrans for them & give them a trial/savings card. She agreed.
PPLPMDL0020000001	Barberton	OH	44203	12/4/2012	I told dr Patel to continue to focus on two things for Butrans. First is the appropriate patient who may be on Ultram or vicoden and needs a dose adjustment. The other is which prescription plan the patients has. I told dr to stick with commercial insurance in which the patient can pay as low as \$15 a month for 4 patches. I asked dr to prescribe more Butrans. Dr said he will continue to find patients.
PPLPMDL0020000001	Independence	OH	44131	12/4/2012	Quick call- Dr Sundaram said he didn't have time today. He added that he has not put anyone on Butrans since I saw him last & said he doesn't think he has treated anyone for pain in the last week, oddly enough. I asked him to consider once weekly transdermal Butrans when an appropriate patient presents. He said he would & walked into a room. Spoke with Terry & June & reviewed OxyContin formulary coverage. Also discussed savings cards for Butrans & OxyContin.
PPLPMDL0020000001	Parma	OH	44129	12/4/2012	Quick call- Passed back Butrans patient information tear-off & discussed using them during patient counsel. I asked him to be sure to include in the discussion the possibility of titration with patients who he is starting on Butrans. He said he would. Reviewed OxyContin 7 tablet strengths & asked him to consider an intermediate dose for appropriate patients when titrating. Also reviewed patient information sheets with Cindy. She said she thought the patients would like them & be more likely to look at them than the booklets because it is more condensed.
PPLPMDL0020000001	Akron	OH	44320	12/4/2012	I spoke with both drs about how to make Butrans simpler. Focused on discussion about the appropriate patient type and managed care. Showed both drs the case studies and had discussion about patients currently on Ultram or vicoden. Both drs agreed that they have patients currently on IR opioids that would be good candidates for Butrans. Dr Adams stated that the problem is that most patients with chronic pain dont have insurance or are on Medicare or Medicaid. I discussed the managed care in depth and asked about the prescription insurance they have. Both drs agreed they have lots of SummaCare, Medco, Caresource, and Aetna. I told drs to look for patients with those prescription plans who are on Ultram or vicoden. Dr said that they see Caresource being the best option.
PPLPMDL0020000001	Akron	OH	44320	12/4/2012	I spoke with both drs about how to make Butrans simpler. Focused on discussion about the appropriate patient type and managed care. Showed both drs the case studies and had discussion about patients currently on Ultram or vicoden. Both drs agreed that they have patients currently on IR opioids that would be good candidates for Butrans. Dr Adams stated that the problem is that most patients with chronic pain dont have insurance or are on Medicare or Medicaid. I discussed the managed care in depth and asked about the prescription insurance they have. Both drs agreed they have lots of SummaCare, Medco, Caresource, and Aetna. I told drs to look for patients with those prescription plans who are on Ultram or vicoden. Dr said that they see Caresource being the best option.
PPLPMDL0020000001	Northfield	OH	44067	12/4/2012	Introduced myself & Purdue's products to Dr Steck, new to this location. He said he is helping out at this office while Dr Loyke is in Afghanistan. Introduced Butrans to him & delivered core messages. Discussed Butrans as a CIII opioid with abuse & addiction potential. He said that "by the time patient gets to that point of pain", he refers to pain management. I asked what he means. He said if they need something "that strong" he refers, adding that he will prescribe/does prescribe Percocet "or even Vicodin". Showed Butrans appropriate patient type/range & patient profiles for examples of patient types where Butrans can be used. I asked if this helped him better position Butrans. He said yes. He said he is thinking it would be a good option for a select group of patients for whom other methods of pain management are not successful, such as physical therapy. I agreed that opioids should not be used unless necessary & also stressed the importance of appropriate patient selection & documentation. Discussed OxyContin as a q12h dose of oxycodone for appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44130	12/4/2012	Dr Fedorko said he didn't put anyone on Butrans since the last time I talked to him. I asked why not. He said no one came in who would be good for it & added that "everyone wants Vicodin." I asked him why it matters so much what a patient wants. He did not respond- he just said he would "try" & walked into a room. Spoke with Mindy & reviewed managed care coverage for Butrans, updating her on Aetna.
PPLPMDL0020000001	Cleveland	OH	44122	12/4/2012	As a follow up our conference call on 11/21/12, and as requested, forward a copy of all the FACET modules (PDF files, 3 slides per page in handout format) and the "Care of the Person with Chronic Pain: Implications for Case Managers" to Care Source for their review. Following internal review, Care Source will select the modules that they would like presented to their >400 case managers in the state of Ohio. These will be non-accredited educational programs, and will be presented as a series during 2013.
PPLPMDL0020000001	Stow	OH	44224	12/4/2012	Dr came in real quick to lunch and asked what is new with Butrans and I gave him managed care update with medicaid and commercial plans. I said Butrans is the only schedule 3 that can treat pain once every 7 days.
PPLPMDL0020000001	Uniontown	OH	44685	12/4/2012	I told Dr that the path of least resistance when prescribing Butrans is to be specific about the type of patient and their prescription insurance. I showed her the conversion scale to review patient on IR opioids who need a dose adjustment. I then reviewed managed care formulary focusing on private prescription insurance. Barbl(pn) said that Dr Lohmeyer has many patients with SummaCare prescription insurance. I told dr that even SummaCare patients can get Butrans for as little as \$15 a month plus a possible 28 days free. I also showed her the patient information guide and told her to provide the patients those when she prescribes Butrans. Dr said
PPLPMDL0020000001	Cleveland	OH	44130	12/4/2012	Spoke with Julie & reviewed Butrans once weekly transdermal dosing of buprenorphine for moderate to severe chronic pain. Showed 3 strengths & discussed maximum dose being one 20mcg patch per week. Also reviewed savings cards for Butrans & OxyContin. Reviewed eligibility requirements with her, pointing out that patients who have any type of government insurance cannot utilize the cards. She said they did not need any cards at this
PPLPMDL0020000001	Stow	OH	44224	12/4/2012	Reviewed opioid experienced study and showed amount of Vicodin patients in the study and their pain reduction. I said are these like the patients you are seeing and she said yes. She said she has a few patients on BÜtrans, she said that workers comp and I said yes. We reviewed the rest of the plans.
PPLPMDL0020000001	Parma	OH	44129	12/4/2012	Quick call- Passed back OxyContin info leaver & reviewed broad formulary coverage. Also updated her on Butrans Aetna coverage at tier 2 preferred. Dr Rossi just thanked me & walked away. Spoke with MA Britney who said she is leaving the practice to go to nursing school. She said a replacement will be starting to help Edy.
PPLPMDL0020000001	Stow	OH	44224	12/4/2012	Sandra said that millenium said that they can detect Butrans now in Urine and said that makes a big difference in their writing their. She said she started 2 new pateints on BÜtrans. I reviewed the opioid experienced study showing the patient inclusion data and that showed the amount of vicodin patients in the study and the pain reduction and she said that she is considering Butrans alot more now and we reviewed managed care coverage.
PPLPMDL0020000001	Stow	OH	44224	12/4/2012	Spoke with Gregg and he said they are seeing Butrans and are not having any issues. He said it goes in spurts and that he did not say who was writing. I reminded him of the savings cards to use with them.
PPLPMDL0020000001	Stow	OH	44224	12/4/2012	Abby said she is still having good luck with bÜtrans, she doesnt have any problems except with managed care occasionally. I showed her opioid experienced study and inclusion data showing the amount of patients in the study who were on Vicodin and had pain reduction. She said that is impressive and will continue to write
PPLPMDL0020000001	Stow	OH	44224	12/4/2012	Spoke with Corey and he said he is seeing some BÜtrans and he said he thinks most are getting filled Upstairs. I reviewed application and titration with him and using the trial and savings cards.
PPLPMDL0020000001	Cleveland	OH	44130	12/4/2012	Spoke with Allison & showed Butrans titration piece, pointing out 3 strengths & maximum dose of 20mcg. Discussed Butrans reaching steady state in 72 hours with titration ability every 3 days. She said she hasn't filled any Butrans prescriptions but they might have one or two customers who have gotten it. Discussed trial/savings cards for Butrans & OxyContin savings program. Allison said they did not need cards for either medication as they already have plenty. She said most of their customers who get OxyContin are on Medicare.
PPLPMDL0020000001	Barberton	OH	44203	12/4/2012	Gave pharmacist information on Butrans appropriate initial dose along with titration and use of supplemental analgesia. Discussed OxyContin doses and ability to titrate every 1-2 days. Discussed copay cards and trial offer with Butrans. nothing else learned.
PPLPMDL0020000001	Stow	OH	44224	12/4/2012	Dr said he has had some issues with managed care lately, I asked if they were medicare and he said he did not know. I reviewed plans and said to write in patients under 65. HE said he has been starting patients on 10mcg and titrating to 20mcg because his patients are all on opioids but asked what I thought of him starting them on 20mcg and I said we only studied staring patients on 10 and then titrating them to the 20mcg. We reviewed managed care coverage
PPLPMDL0020000001	Akron	OH	44307	12/4/2012	Medical Liaison spoke with Dr. Brown at the American Society of Health-System PharmacistsMidyear Meeting. Medical Liaison advised Dr. Brown that sleep discussions for the Medical Liaisons have been postponed until after the first of the year.
PPLPMDL0020000001	Stow	OH	44224	12/4/2012	Dr said that he is going to be writing BÜtrans more and that it is on his preferred list and now that millinium said Butrans can be detected in their urine tests he feels more comfortable writing Butrans. WE reviewed patients he is using Butrans in and managed care coverage.
PPLPMDL0020000001	Cleveland	OH	44130	12/4/2012	Pointed out that patients taking immediate-release oxycodone around-the-clock can get an equivalent dose of oxycodone in a q12h dose with OxyContin. Dr Diab just waved & thanked me, walking into a room.
PPLPMDL0020000001	Stow	OH	44224	12/4/2012	Laura stopped in quickly and said that she has a few patients on Butrans and is having no problems with it. She asked what is new and I reviewed managed care coverage and then she said she had to go.
PPLPMDL0020000001	Parma	OH	44129	12/5/2012	Quick call- Confirmed with Dr Chagin that he will attend the upcoming Butrans program in Akron. He said he couldn't stop to talk today but added that he is keeping Butrans in mind. He recited the doses of "5, 10, & 20mcg", then walked into a room. Spoke with Debbie who said to her knowledge, Dr Chagin has not given out any Butrans this week & added that she will continue to remind him when she can.
PPLPMDL0020000001	Parma	OH	44129	12/5/2012	Reviewed Butrans dosing & titration with Dr Al-Abousi. Discussed appropriate patient type/range, as well as OxyContin as an option for appropriate patients beyond Butrans. She asked if pain management is using a lot of Butrans. I told her a variety of physicians in different specialties have found a place for Butrans as so many physicians/specialties see patients who fit the indication. I showed her patient profiles & asked if she would agree that primary care physicians often see patients like these. She said she would agree with that. Showed her how to choose an appropriate starting dose of Butrans based on the patients' current medication regimen. Discussed trial/savings program & asked her to think of her commercially insured patients, perhaps aged 50-60, who fit the indication & try Butrans for them if appropriate. She said she would keep it in mind, adding that she thinks it is Introduced Butrans Patient Experience Kits to Dr Gigliotti, explaining his role in the program as well as patient portion. I asked what his thoughts were. He said he thought it seemed like a good idea & that it would help increase communication/feedback about Butrans. He added that it seemed like it would give him more information than just a general how the patient is doing question. I agreed that the program is designed to help with communication between patients & physicians. I asked if he thought he would be able to give out all 5 kits. He said he would but added he did not know how quickly he could get them all out. I agreed that Butrans is not for everyone, but reminded him of the appropriate patient type. I told him I would imagine he would see 5 appropriate patients to give the kits to within a week or two & certainly before Christmas time. He said I was probably right. Discussed patient type/range as well as OxyContin q12h as an option for appropriate patients who could benefit from a q12h dose of oxycodone. Dr Gigliotti said OxyContin is still a good medication & that it just has to be used responsibly. I agreed that it is not for everyone & advised continuing to use caution in prescribing Butrans, OxyContin, & all other opioid medications.
PPLPMDL0020000001					

	Cuyahoga Falls	OH	44223	12/5/2012	I asked dr if she would attend my event on 12/12 for Butrans? Dr said she can't due to obligations with her children after work. I asked her if she has any apprehension with the product? Dr said no. Dr said she thinks Butrans has its place and thinks it will work well but said that she does not have many patients in chronic pain. I asked if she has patients on vicoden? Dr said yes but most are taking it prn. I told dr that she can initiate the 5mcg dose for patients taking under 3 pills a day of vicoden or percocet and under 300mg of Ultram along with the opioid naive patient. Dr said she understands and will try.
PPLPMDL0020000001	Cleveland	OH	44122	12/5/2012	As a follow up to sending the FACET modules (PDF copies, handouts - sent 12/4/12), sent an additional email with copy of my bio as a means of introduction.
PPLPMDL0020000001	Bedford	OH	44146	12/5/2012	I asked Dr Moufawad if he thinks his interest/enthusiasm with Butrans has faded. He said he probably has not started as many patients lately as he did before, but not due to anything with Butrans itself, just due to the patients he has been seeing lately. He added that probably 8 out of 10 patients who he starts on opioids are put on Butrans. I asked if the other 2 are OxyContin. He said that actually is fairly close because he does find himself using OxyContin more now than in the past.
PPLPMDL0020000001	Parma	OH	44129	12/5/2012	Quick call- Reviewed Butrans managed care coverage, reminding Dr Salama of favorable commercial coverage, including Medco/Express Scripts, & Aetna as well as BWC. Spoke with Dina & MA about Butrans managed care & savings program. They said they did not need savings cards at this time.
PPLPMDL0020000001	Bedford	OH	44146	12/5/2012	Spoke with floater pharmacist & reviewed Butrans dosing & titration. Also showed patient information booklets & reviewed savings programs for Butrans & OxyContin. She said she would leave my information for the regular pharmacist.
	Cleveland	OH	44130	12/5/2012	Dr Kansal said Butrans does "not work for anyone". I asked what he meant. He said he gave it to 2 patients (plus he had given it to one in the past) & all of them have reported that it does not work. I asked if he tried titrating them to the maximum of 20mcg. He did not respond. I asked what dose he started them each on & what each of them actually said when they talked to him about it. He did not answer & said he did not have time to discuss it today. He then walked away. Spoke with Dorothy who echoed what Dr Kansal said, telling me that "my drug" doesn't work. I told her that while Butrans is not for everyone, it is effective for some patients. I asked about dosing & titration, but she did not know the answers to my questions. She said people are resistant to change & that they did not like this medication. I asked when the soonest I could come back to discuss this further was & she said Dr Kansal is leaving the country for a few weeks & to try back after the new year.
PPLPMDL0020000001	Akron	OH	44320	12/5/2012	Spoke to Haleen about Butrans and asked her if they have dispensed Butrans and stock it. The pharmacy does stock the 5mcg and she said that they have dispensed it but it has been a while since it was dispensed. I discussed the dosing of Butrans and the titration at 72 hours. Discussed appropriate initial dose with use of approximate conversion guide.
PPLPMDL0020000001	Akron	OH	44333	12/5/2012	Dr said he prescribed Butrans for two patients this morning. Dr said one patient was taking three vicoden a day and the other was opioid naive. Both patients suffering from spinal stenosis. Dr said both patients are over 75. Dr said he initiated the 5mcg for both patients. Dr said both patients had insurance through their significant others as well and cost was not a factor. I discussed titration with dr and use of supplemental analgesia and dr said he has no problem up-titrating because most patients initiated on the 5mcg in his experience do not get much additional analgesia. Dr said he does not have anyone on the 5mcg anymore. They are all on the 10mcg. I asked dr if he sees Butrans appropriate for a patient in his/her 40's-50's? Dr said that patients in that age range for the most part do not have chronic pain. Dr said patients over 65 are ideally suited due to years of pain which develops over time. I asked dr for his continued growth of Butrans and OxyContin. Dr said Butrans is perfect for the style of how he practices.
PPLPMDL0020000001	Akron	OH	44313	12/5/2012	I asked dr at what point he makes the decision to use OxyContin? Dr said he knows OxyContin should be used when his patients are taking too much short acting. I asked dr what is too much? Dr said each patient is different. He said that he has started OxyContin right after vicoden and others when oxycodone is not working. I showed dr the OxyContin the Pat case study and he should consider using it earlier on in treatment. Dr said ok, nothing else learned.
PPLPMDL0020000001	Parma	OH	44134	12/5/2012	I asked Dr Hernandez to tell me a little about what happens when patients come in for their first visit- how often does he change a patient's medication on the first visit. Dr Hernandez said he changes it as early as possible for every patient because he is usually not willing to keep patients on the types of doses that they come in on. He added that he recently had a patient from primary care come in on OxyContin 60mg q12h & said he couldn't believe how high that dose was, adding that the patient had considered asking for something additional for breakthrough pain. I asked why he felt that 60mg q12h was a "high" dose, reminding him that in studies, OxyContin was dosed much higher. He said he just does not think patients need that much OxyContin & said he is OK with the medication, but likes his patients under 30mg q12h. He said he changed this patient to Suboxone, adding that Butrans doses just are not high enough for that patient. I agreed that patient was beyond the recommended range. Dr Hernandez said he does change most patients to Butrans, though, whenever it is feasible. He added that patients are happy with the molecule of buprenorphine.
PPLPMDL0020000001	Parma	OH	44129	12/5/2012	Spoke with Stephanie & reviewed Butrans dosing. Discussed once weekly dosing transdermal buprenorphine. She said she thought buprenorphine was Suboxone & that it was used for addiction. I showed her FPI stating that Butrans is only for pain & is not the same as Suboxone other than both of them containing buprenorphine. I stated again that Butrans is only for pain & should not be used to treat drug addiction. I asked her to make sure physicians/patients understand that as well. She said she hasn't filled any prescriptions for Butrans. Showed trial/savings cards & also discussed OxyContin savings cards.
PPLPMDL0020000001	Waterford	OH	45786	12/6/2012	W - Continues to have new starts with Butrans. Patients uncontrolled on hydrocodone are normally the patient conversions to Butrans. Likes Butrans as an option for her nursing home patients. I - Review of Butrans for appropriate patients who meet the indication when uncontrolled on short acting opioids and requesting a therapeutic change. Review of appropriate starting doses, titration after 72 hours and use of supplemental analgesia as needed. Review of OxyContin for appropriate patient conversions from IR oxycodone once the indication is met. Review of q12h dosing with 7 dosing strengths. Review of formulary coverage for both Butrans and OxyContin along with patient savings card programs.
PPLPMDL0020000001	Waterford	OH	45786	12/6/2012	W - Continues to have patient starts on both OxyContin and Butrans. Most recently had to titrate a patient from 5mcg/hr of Butrans to 10mcg/hr. I - Review of OxyContin for appropriate patient conversion from short acting opioids once the indication is met. Review of Butrans for appropriate patients who meet the indication when uncontrolled on short acting opioids and requesting a therapeutic change. Review of appropriate starting doses, titration after 72 hours and use of supplemental analgesia as needed. Review of formulary coverage for both Butrans and OxyContin along with patient savings card programs.
PPLPMDL0020000001	Akron	OH	44310	12/6/2012	I asked dr at what point he decides to move to another product when treating pain? Dr said that all patients are different and if he feels another product will fit the patient better he will use it. Dr said he makes switches if the patient can't tolerate or is not getting enough pain relief with the current product. I told dr to think of Butrans as a product he can go to when a patient can't tolerate or get enough analgesia with a short acting product. Dr said it makes sense. I asked dr if he will use more Butrans in that place? Dr said yes.
PPLPMDL0020000001	Parma	OH	44129	12/6/2012	Quick call- Dr Kalin said he has used Butrans in the hospital recently but not in his office, but he doesn't know why not. Positioned Butrans for appropriate patients who may benefit from once weekly dosing of buprenorphine in a transdermal system. Dr Kalin said he really should be using more Butrans. I agreed he probably has many appropriate patients for it. He said to come back another day to sit down & discuss further.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	12/6/2012	Told dr to simplify Butrans by keeping two things in mind. The appropriate patient and appropriate managed care coverage. I told dr to use Butrans for his patients on Ultram or vicoden and the patient needs something else for their pain. I told dr to focus on the commercial patients or those that have Medicare and a secondary insurance. Dr said he will try it but not until next year. Dr said he is leaving for Australia today and will not be back until January.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	12/6/2012	Spoke to leslie(trech) about Butrans. She said they have dispensed it and have the 5mcg in stock. I discussed the key selling messages with her and review appropriate patients, doses, titration and proper application sites and skin preparation and disposal. She asked if the disposal kits come with the prescription and explained that they do. I reviewed the information guides and she said they will give them out.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	12/6/2012	Spoke to Michele about Butrans and OxyContin. I asked Michele if she has dispensed Butrans or OxyContin recently? She said th8at they have not filled Butrans but have a few patients on it. I gave review of Butrans key messages and then discussed application sites, skin prep and appropriate patients. The pharmacy has the 5 and 10mcg in stock. Told her about titration and steady state at 72 hours. I asked Michele about OxyContin and which doses she dispenses the most. She said the 10 and 15mg are most common and patients fill OxyContin are of all ages.
PPLPMDL0020000001	Parma	OH	44129	12/6/2012	Myra said she is writing a lot more Butrans & showed me that she has given all but one of her patient experience kits. She asked for more, so I provided her with another kit. She said she has just started making appropriate patients just try Butrans & she is more insistent on it now than before. Dawn & Myra explained how they talk to patients about the kit & instruct them to use it. They also told me that BWC is officially putting Butrans on formulary starting January 1. Myra showed me the list of Butrans coverage notes she has taken during our talks on the back of her prescription pad. Dawn said in the last week Myra has started 6 patients on Butrans.
PPLPMDL0020000001	Independence	OH	44131	12/6/2012	Got to see Dr Trickett at the window briefly. Positioned OxyContin for appropriate patients who could benefit from oxycodone dosed q12h & Butrans for appropriate patients who she is getting ready to start on an opioid medication if they meet the indication. She said she will try to find a Butrans patient.
PPLPMDL0020000001	Shaker Heights	OH	44122	12/6/2012	Quick call- Showed Dr Agarwal 7 strengths of OxyContin & asked him when he would say the last time he used one of the intermediate strengths for a patient was. He just shook his head & said he doesn't remember & walked away.
	Cuyahoga Falls	OH	44221	12/6/2012	I told dr that she needs to attend my event on 12/12. Dr said that dr Moufauoad has been bugging her about it and she may attend but doesn't know if she can yet. Dr said her Butrans patients are doing well and she is continuing to prescribe but said that she has a lot of Medicare and they can't get it. I told her to continue to use Butrans for Butrans patients with Medicare and a secondary insurance and commercial insurance. Dr said ok and she will fax it in if she can attend.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	12/6/2012	I asked dr when he uses OxyContin? I asked him what has to happen for him to use OxyContin? Dr said he uses it all the time. Dr said he uses it when he thinks a patient can benefit from a long acting opioid. I asked dr if he will continue to use it and possibly earlier in the pain cycle. Dr said he uses it in a bunch of different places. nothing else learned.
PPLPMDL0020000001	Fairlawn	OH	44333	12/6/2012	I asked dr if he has a max dose threshold for his IR oxycodone patients before moving to OxyContin. Dr said he typically will take his patients to 40mg. If the patient needs more than 40mg he then moves to OxyContin. I asked dr if there is a situation when he would move a patient to OxyContin earlier? Dr said that it depends on the condition he is treating. Dr said when he has a patient with cancer or high low back pain. I asked dr about Butrans and if he has used it clinically? Dr said he has used it twice and both patients were opioid naive suffering from low back pain. Dr said he initiated on the 5mcg patch. I asked if he has had the patients back in for follow up? Dr said they have both been back and are doing great. Dsr said both are still taking their NSAIDs with Butrans. I reviewed the conversion scale and asked dr to continue to use Butrans early on in treatment and discussed titration. Dr said he will titrate if necessary. Discussed managed care and told him to focus on commercial prescription insurance. Dr said he will continue to prescribe.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	12/6/2012	I showed and explained the Butrans information guides and asked her if she would hand them out when a patient fills or refills a prescription. Amy said she would and said the one of the patients said the patch was peeling off. I explained proper skin prep and to use first aid tape on the corners. I asked Amy about the OxyContin prescriptions and she said they have not been filled too recently but the 10, 20 and 60 have been doses they dispense most. I told her that doses can be titrated every 1-2 days.
PPLPMDL0020000001	Parma	OH	44129	12/6/2012	Caught Dr Paat at the window- I showed him 7 OxyContin tablet strengths & pointed out intermediate doses (15, 30, & 60mg). I asked him, the next time he is considering titrating a patient who is on OxyContin, to be sure to keep in mind that those strengths are available & allow for individualization of dosing. He said that was good, waved, & walked away. Spoke with Shari & reviewed managed care for Butrans & OxyContin.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	12/6/2012	Dr said he prescribed Butrans the other day for a patient with an older patient taking 3 vicoden a day and was having tolerability issues. Dr said he initiated on the 5mcg but suspects he will need to titrate soon. I told dr that steady state is 72 hours and he can titrate then. I asked dr if he will continue to prescribe AND come to my program on 12/12. Dr said he will continue to use and may come on Wednesday. Dr would not commit to the event.
PPLPMDL0020000001	Maple Heights	OH	44137	12/6/2012	Spoke with floater pharmacist & reviewed Butrans once weekly dosing of buprenorphine in CII class. Discussed abuse/addiction potential. Showed patient information booklets pages on application/rotation & disposal & explained what all comes in a carton of Butrans. Also discussed savings programs for Butrans & OxyContin. She asked me to leave cards for both products in case they wanted them & let me know she would leave everything.
PPLPMDL0020000001	Barberton	OH	44203	12/7/2012	Gave quick review of Tom and Carol case studies for OxyContin and asked her what her max dose is for her patients on percocet? At what dose do you make the decision to move to OxyContin? Dr said typically when patients taking 7.5/500 O4 of oxycodone. Dr said about 30-40mg/day is when she moves if the patient can afford OxyContin. I told her that she should continue to think about switching patients when they hit 30mg. Dr said she thought about Butrans the other day for a patient but it was a Medicare patient and did not initiate. Dr said the patient is on vicoden about 3 times a day. I asked if she knew if the patient had coinsurance? Dr said she did not know. I told her to continue to search for the right patient and explained that with use of visad.
PPLPMDL0020000001					



PPLPMDL0020000001	Brooklyn	OH	44144	12/7/2012	Positioned Butrans for appropriate patients who are taking up to 40mg hydrocodone per day for moderate to severe chronic pain. Pointed out trial/savings cards & reminded him they are for commercial insurance. I asked what a patient, or he for that matter, had to lose by simply trying it. He said he knows he can find a patient for it & he does plan to use it.
PPLPMDL0020000001	Akron	OH	44312	12/7/2012	Gave another review of Butrans appropriate patient types and insurance plans. I asked dr if he would prescribe Butrans for a patient on vicoden before he refers to pain management? Dr said he will consider it. nothing else learned.
PPLPMDL0020000001	Beachwood	OH	44122	12/7/2012	Quick call- Passed back Butrans & OxyContin savings cards & reviewed eligibility requirements. Asked Dr Tabbaa to be sure to give eligible appropriate patients a savings card with their prescription.
PPLPMDL0020000001	North Hampton	OH	45349	12/7/2012	DR Gallardo said she is having a difficulty remembering butrans. I asked her how often she refills hydrocodone and she said often. I asked if she would consider butrans for the next one and she said she would.
PPLPMDL0020000001	Akron	OH	44312	12/7/2012	Handed dr the invite to my program and asked him to attend. Dr said he might come but was not sure. I asked him if he remembers Butrans as the CII, 7 day transdermal system for moderate to severe pain? Dr said he does and will keep it in mind. nothing else learned.
PPLPMDL0020000001	Beachwood	OH	44122	12/7/2012	Quick call- Passed back OxyContin formulary grid, pointing out broad favorable coverage. Also invited Dr Yokieli to upcoming Butrans dinner program. He said he would see if he could go, but probably not. Spoke with Vicki & told her about Butrans Patient Experience Program. Let her know I would be introducing them to Dr Yokieli at an upcoming scheduled breakfast. She said she thinks it would be something he would be interested in.
PPLPMDL0020000001	Beachwood	OH	44122	12/7/2012	Spoke with Alan & reviewed Butrans dosing. Showed him Butrans titration piece & reviewed steady state in 72 hours, allowing for titration every 3 days. Also discussed maximum dose of 20mcg. Reviewed eligibility requirements for savings programs for Butrans & OxyContin. Inquired about utilization of intermediate strengths of OxyContin. Alan said he hasn't really noticed anything in particular.
PPLPMDL0020000001	Northfield Center	OH	44067	12/7/2012	Spoke with Katie & reviewed Butrans dosing & titration, showing her titration piece. Discussed steady state at 72 hours with titration interval of every 3 days. Let her know 20mcg is maximum dose. Showed trial/savings cards for Butrans & discussed OxyContin savings program. She said she didn't need any cards at this time.
PPLPMDL0020000001	Parma	OH	44129	12/7/2012	Showed Butrans titration piece & reviewed dosing. Dr Khoobball said he knows the dosing. I pointed out from initiation guide that patients taking 15-40mg hydrocodone per day would start at 10mcg. I asked him to titrate in 3 days to 20mcg if the patient is tolerating Butrans. He said OK & told me the patients get the first month for free. I clarified, reviewing eligibility requirements & pointed out that if a patient has an unusually high co-pay, they may have a slight cost.
PPLPMDL0020000001	Akron	OH	44319	12/7/2012	Gave the pharmacist Butrans dosing, titration, and supplemental analgesia. She told me that they have the 5mcg in stock and have only filled one maybe two prescriptions. nothing else learned
PPLPMDL0020000001	Independence	OH	44131	12/7/2012	Showed Butrans dosing & let Dr Jack know that in the event that he has a patient taking between 15 & 40mg per day of oxycodone or hydrocodone who may benefit from once weekly transdermal medication for pain, he could start that patient at 10mcg Butrans & titrate to 20mcg after 3 days if the patient is tolerating the medication. Dr Jack asked if I know that he has a patient who he writes that for. I told him I was unaware of this. He said the patient is an older woman & that she really likes Butrans. He said maybe he has another patient who he could put on it. I told him he might just have one or two more patients who meet the indication.
PPLPMDL0020000001	Garfield Hts	OH	44125	12/7/2012	Reviewed Butrans dosing & ability to titrate every 3 days. I asked Dr Sadowski what an appropriate, commercially insured patient would have to lose by simply trying it. He said he "knows" & added that he is going to prescribe it, he just needs a patient for it. He then walked into a room. Spoke with Deena & gave her OxyContin formulary information. Also reminded her that OxyContin is a q12h dosing of oxycodone.
PPLPMDL0020000001	Akron	OH	44312	12/7/2012	I told dr that I wanted to provide him information on a CII, 7 day transdermal system for his patients that he has on Ultram or vicoden and are uncontrolled. Dr said he has read about Butrans a little but said he didn't have time to get into a discussion. I gave him the initiation and titration guide along with managed care pieces. I asked dr if there is a better time and he said I just have to get lucky with the time...
PPLPMDL0020000001	Akron	OH	44312	12/7/2012	Saw w/ McRoberts at window and asked him if he has initiated Butrans on any of his patients on Ultram or vicoden that are uncontrolled? Dr said he has tried on a couple of occasions but the patients were Medicare and it was not covered. I handed dr the managed care grid and told him to look for patients with private prescription insurance or patients on Medicare that have a secondary insurance plan. I asked dr to attend my program again and he said he is too busy but Dr Hill might. I asked for him to gain clinical experience with Butrans.
PPLPMDL0020000001	Akron	OH	44319	12/7/2012	I asked dr what he currently does for his vicoden patients who need a dose adjustment and have a condition like spinal stenosis? Dr said he would adjust the dose because cost is almost always an issue. I asked dr if he has patient with commercial prescription insurance? Dr said he does but not many. I asked if he has patients on Medco or medical mutual? Dr said he did. I told him to look at those patients as candidates. Dr said he will. I asked if he feels comfortable with the Butrans product itself and if he had questions? Dr said no and he will try to use it.
PPLPMDL0020000001	akron	OH	44333	12/10/2012	I asked dr if he will attend my event Wednesday? Dr said he might. I told him that I may be able to get approval for his office manager(n) to attend as well. Dr said that would help. Dr said his Butrans patients are doing quite well and he is continuing to initiate more patients. nothing else learned. Had to leave for a meeting.
PPLPMDL0020000001	Parma	OH	44134	12/10/2012	Spoke with floater pharmacist & introduced Butrans, as she did not seem to be aware of any details surrounding it. Discussed dosing & showed appropriate patient type/range. Showed application sites & discussed disposal options. Reviewed savings & trial program for Butrans, as well as OxyContin savings program. She said she didn't know if they would use cards, so I should ask next time I am in.
PPLPMDL0020000001	Parma	OH	44129	12/10/2012	Caught Dr Ortega at the window- Positioned Butrans for appropriate patients taking 40mg or less of oxycodone per day & OxyContin for those taking more than that. Reviewed dosing/strengths for Butrans & OxyContin. Also spoke with Cindy & explained Butrans & OxyContin managed care.
PPLPMDL0020000001	Independence	OH	44131	12/10/2012	Reminded Dr Sundaram that he had told me last time that he has a number of patients who are taking chronic opioids. I asked if he would say most of those patients take between 30 & 80mg oral morphine equivalent. He said probably. I showed him in initiation guide that appropriate patients taking this range of medication could start on Butrans 10mcg & be titrated to 20mcg if they are tolerating it after 3 days if necessary. I reviewed ability to use supplemental analgesia in the form of immediate-release opioid or non-opioid medication if necessary. Reminded him of trial/savings program & commercial insurance coverage. I asked Dr Sundaram why not try Butrans on a few of those patients if they are appropriate. He said he doesn't know & added that he is going to prescribe Butrans & feels bad that he hasn't done it yet. I asked him why he thinks he has not yet prescribed. He said he is certain he has had a patients who could use it, it is just that he is not thinking of it at the right time. I offered to come to his office every day to help him. He said that wasn't necessary, promising again to find a few patients. Reviewed dosing with him again. Positioned OxyContin q12h for appropriate patients who may benefit from a q12h dosing option of oxycodone.
PPLPMDL0020000001	Fairlawn	OH	44333	12/10/2012	I asked Jessica if the patients filling Butrans and OxyContin are in a particular age range? Jessica said the Butrans patients seem to be older(over65) and the OxyContin patients are of all ages. I asked Jessica if the Butrans patients have had any issues with cost and if insurance is covering? Jessica said she does not know about any patients say anything about cost. I gave overview of managed care for both products.
PPLPMDL0020000001	Akron	OH	44333	12/10/2012	I asked dr if he is going to attend my event Wednesday and he said he cant make it during the week. Dr said that he has been using a lot of Butrans recently. I asked where he is using it and he said for patient failing their short acting. I asked which medicines his Butrans patients were on and he said some are vicoden, some percocet and one Ultram he said he thinks. I told dr that he can titrate them if necessary after 3 days and he can prescribe opioid or non opioid analgesics for supplemental analgesia. Dr said that he likes that about Butrans. Dr said that the correct patient type if very important. I asked him what that is? Dr said a patient that early on in treatment needs a long acting product based on pain level and condition. I asked dr if he has a cutoff that he uses for his patients on percocet at which point he would move to OxyContin? Dr said sometimes he moves to the long acting at 30mg of percocet and that it all depends on the patient. Dr said that sometimes if he knows that the number of pills/day is leading to compliance issues he will move to a long acting. I told dr he can titrate every 1-2 days to 80mg max dose Q12h. I asked dr to continue prescribing both products and
PPLPMDL0020000001	Akron	OH	44303	12/10/2012	Spoke to Rod about Butrans titration and appropriate starting dose. Told Rod that Butrans patients can take opioid and non opioid analgesics for breakthrough pain. Rod said that is good information to know and he has not seen any come through his pharmacy yet. I asked Rod about OxyContin dispensing and he said that he has been filling more of the 40 and 80mg doses recently. He said that the number of new fills are very low. nothing else
PPLPMDL0020000001	Parma	OH	44129	12/10/2012	Dr Taylor said she did end up giving Butrans to a patient last week after she saw me- She said she has not yet had feedback from him. I told her it was important for us to discuss titration in the event that this patient needs to be titrated. I asked how she started the patient/how she wrote the prescription. She said she started him on 5mcg because he was not on a high dose of opioid prior to the change. She added that she advised him to take the 5mcg for 2 weeks & then wrote for the 10mcg to titrate him upward. I reminded her that the titration interval is every 72 hours, so if the patient were to call back now (one week after starting Butrans), saying that it is not working or asking for his pills back, it would be an option to titrate upward, as long as he is tolerating Butrans. Dr Taylor said OK. I also let her know that it is possible to ultimately titrate to 20mcg if appropriate/necessary. She said she would do this if necessary. I let Dr Taylor & Mary know I would follow up again & was always available for questions if need be. Reviewed OxyContin broad formulary coverage.<font color=blue><b>CHUDAKOB added notes on 01/07/2013</b></font>Another example of persistence paying off. Nice job!
PPLPMDL0020000001	Parma	OH	44134	12/10/2012	Spoke with Mary & reviewed Butrans dosing. Showed patient information booklet spread on application sites, rotation, & disposal. She said usually the pharmacist on duty will give patient information if a patient has questions or hasn't used a medicine before. Showed her savings cards & discussed eligibility requirements for usage of each one. She said they already have plenty of cards. She said she would give my information to the pharmacist when he became available.
PPLPMDL0020000001	Cleveland	OH	44122	12/11/2012	Introduced myself to Dr Ningeowda & asked about his experience/understanding of Butrans. He asked me to give him an overview as he knew about it, but had some questions. He asked if he needs a special license to prescribe Butrans. I told him he does not. I reminded him that Butrans is only for pain & is not to be used for the treatment of drug addiction. Showed him dosing & discussed appropriate patient type/range & discussed OxyContin being an option for appropriate patients beyond the Butrans range. Discussed Butrans as the only long-acting CII opioid & abuse/addiction potential. He asked what the amount of time until onset of action was. I showed plasma concentration graph per his request. I told him we do not have data about how long it takes until analgesia is achieved since that will be different depending on the patient. Discussed steady state in 72 hours with a minimum titration interval of 3 days & maximum dose of 20mcg. He asked about side effects. Showed FPI section 6 & discussed contraindications. He asked what the recommendations are for supplemental analgesia & cessation of therapy, so I showed him FPI sections 2.4-2.5. Dr Ningeowda asked what insurances cover Butrans. Discussed commercial insurance coverage with use of trial/savings cards & prior authorization requirements for Medicaid plans. I asked if he can see himself starting to use Butrans now & he said yes.
PPLPMDL0020000001	Beachwood	OH	44122	12/11/2012	Placed 3rd follow-up phone call w/ Phyllis Tabbs to discuss pain & pain management educational opportunities at no cost. N/A left msg. on voice-mail.
PPLPMDL0020000001	Euclid	OH	44117	12/11/2012	Called D.O.N., Kathy Nemeth, to discuss scheduling an in-service on pain/pain management for her nursing staff. N/A, left msg.
PPLPMDL0020000001	Parma Heights	OH	44130	12/11/2012	Called D.O.N., Katherine Myers to reschedule appointment to discuss Pain & Pain Management Education opportunities. N/A, left voice-mail msg.
PPLPMDL0020000001	Chagrin Falls	OH	44022	12/11/2012	Called and spoke w/ D.O.N., Janet Johnson, introduced myself and purpose of call, Re: Pain & Pain management education opportunities at no cost. She stated," I don't have time for that right now, she said, " I am swamped, we are waiting to be re-surveyed." I asked if we could set up something for January, She said, "you can call me back later in January."
PPLPMDL0020000001	Euclid	OH	44117	12/11/2012	Called D.O.N., Beth Walla to discuss pain & pain management educational opportunities @ no cost. N/A, left msg.
PPLPMDL0020000001	Beachwood	OH	44122	12/11/2012	Quick call- Reviewed favorable managed care coverage for Butrans on commercial insurance formularies with Dr Myton-Craig. Also reviewed BWC paying for Butrans as well as prior authorization requirements for Caresource & Medicaid. She said she is "going to use it" & walked away.
PPLPMDL0020000001	Beachwood	OH	44122	12/11/2012	Reviewed Butrans with nursing staff & discussed application/rotation/disposal instructions. They said they have given patient information pages & savings cards to patients when a doctor orders Butrans for them. They said Dr Barrett is probably the pharmacist there who uses Butrans most frequently. Discussed titration with them, letting them know this can be done every 3 days & discussed maximum dose of 20mcg. Linda asked if patients can pay on 2 patches instead of getting a new prescription. I told her only one patch should be worn at a time, not to exceed 20mcg. I told her wearing 2 is not recommended. Also explained to them that OxyContin is a q12h dose of oxycodone, which is the same molecule that is in Percocet. Some of them said they did not understand that before.
PPLPMDL0020000001	Brooklyn	OH	44144	12/11/2012	Spoke with Cheryl & reviewed Butrans dosing, showing her the titration piece. She said she has filled a few Butrans prescriptions, but doesn't think she has anyone who is consistently getting it filled. I asked if she has any idea why any of them would have discontinued but she said she did not know. Discussed ability to titrate every 3 days with a maximum dose of 20mcg. Showed savings & trial card & discussed eligibility requirements, also letting her know more can be printed online. Discussed OxyContin savings program & offered cards. She said she didn't need any as they do not have very many customers on OxyContin.
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PPLPMDL0020000001	Parma	OH	44129	12/11/2012	Caught Dr Moysaenko briefly between patients. I showed OxyContin 7 tablet strengths, pointing out 15, 30, & 60mg doses. He just thanked me & walked away. Spoke with Nicole & asked her to give Butrans initiation/titration information to Dr Moysaenko & she agreed.
PPLPMDL0020000001	Shaker Heights	OH	44122	12/11/2012	Spoke with floater pharmacist & discussed Butrans dosing & titration. She asked if Caresource is paying for Butrans. Discussed prior authorization requirements. Also introduced savings programs for Butrans & OxyContin & reviewed eligibility requirements for card usage, reminding her patients with any type of government coverage cannot use the cards.
PPLPMDL0020000001	Parma	OH	44134	12/11/2012	Placed a phone call to Linda Belford, Staff Development Coordinator, discussed pain & pain Management educational opportunities at no cost. Linda stated, " you will need to call back and speak with our D.O.N., Rena O'Hara, all outside vendors, must go through her." Called back and spoke with the D.O.N., Rena O'Hara, introduced myself and purpose of call. Re: pain & pain management educational opportunities at no cost. Rena stated, " the rest of December is busy with Christmas parties etc., but how about January?" Meeting w/ D.O.N., Rena O'Hara was scheduled for 1/21 @ 2pm to discuss in-service educational opportunities.
PPLPMDL0020000001	Cleveland	OH	44130	12/11/2012	Dr Fedorko asked me when I was going to get a different product so that he could give me some business. I told him that while he may not have tons of patients for Butrans or OxyContin, I was confident that he could find some who may benefit. Dr Fedorko said he is not writing any OxyContin. He said he has only a couple of patients per month who he gives Percocet to & that is it. I asked him what about patients on hydrocodone. Dr Fedorko said he has some of those. He asked me if it is correct that BWC pays for Butrans. I told him yes. He said that might be the only area where he can use Butrans, adding that he is going to stop taking BWC due to cost & paperwork. He said there are patients who irritate him because they call him every month for refills of Vicodin. I asked why not try Butrans on some of them who may be appropriate. He said the only problem with that is that they have to fail "all kinds of other stuff first". I told him this is not the case with patients who have commercial insurance, adding that those are patients who can use the trial/savings cards as well. Dr Fedorko said he will use Butrans in those patients & asked me to remind him of commercial coverage again & again. I agreed.
PPLPMDL0020000001	Richmond Heights	OH	44143	12/11/2012	Spoke w/ receptionist, Darlene, introduced myself and asked to speak w/ "the D.O.N., Susan LoDolce. Darlene stated" she will not be in until noon today." Left msg on her voice-mail.
PPLPMDL0020000001	Parma	OH	44129	12/11/2012	I handed Dr Roheny the Butrans patient profile for "William". He read each bullet point out loud. I asked how frequently someone like him presents in his practice. He said this patient is "too clean" to be real. I told him it doesn't have to be exact, but the point is to show some of the characteristics of a potential Butrans candidate. Dr Roheny said he will try to find me a Butrans patient before the next time I come in. I told him I can come back tomorrow if he thinks that is the case. He said I might need to give him a little longer. Reviewed managed care coverage & reminded him of reasonable Caresource prior authorization. Reminded him of favorable broad formulary access of OxyContin in the event he finds a patient who may benefit from a q12h dose of oxycodone.
PPLPMDL0020000001	Copley	OH	44321	12/12/2012	I asked dr to give me a for/against rationale for using Butrans. Dr said the thing against Butrans is cost and limited insurance coverage. I asked dr if that is the only thing against Butrans? Dr said all he can think of. I asked if he believes using Butrans clinically. Dr said yes but he doesn't have time to deal with PA's and insurance issues. I asked dr to prescribe it again and to focus on his private prescription insured patients. Dr said he will try it
PPLPMDL0020000001	Akron	OH	44320	12/12/2012	I asked dr to attend my program tonight and dr said she has rounds for Bonyo tonight and can't make it. I followed up on my last discussion with her about simplifying Butrans. Dr said she likes to keep it in mind to focus on a specific patient on a specific insurance plan(s). nothing else learned.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	12/12/2012	Placed a phone call to Nancy Strausser, in Staff Development, introduced myself and purpose of call, re: to discuss pain & pain management educational opportunities. Nancy stated, " I am working on the educational calendar for next year. I am interested and would like to see what you have to offer. Thursdays are seem to be a good time for me. " Appt. scheduled on Thursday 12/20 @ 11am to meet w/ her to discuss in-services for next year. She advised that I park off Tallmage Rd. and enter the Bldg. from there.
PPLPMDL0020000001	Parma	OH	44129	12/12/2012	I asked Dr Gigliotti if he has used any Butrans Patient Experience Kits yet. He said he hasn't I reviewed the program with him as well as Butrans patient type. He said he would do his best to find some patients. Also reminded him of OxyContin savings cards.
PPLPMDL0020000001	Lyndhurst	OH	44124	12/12/2012	Placed phone call to Linda Dabney in Staff Development @ 440-684-6622 to set up appt. to discuss Pain & Pain Management Education/in-service opportunities. N/A, Left Msg.
PPLPMDL0020000001	Beachwood	OH	44122	12/12/2012	1). Placed follow-up phone call to Nurse educator, Merri Bunge, N/A, left msg.2). RETURN PHONE CALL REC'D from Nurse Educator, Mary Bunge. Set up an appt. to meet on 1/3 @ 3pm to discuss in-service content for February in-service. 216-839-6631
PPLPMDL0020000001	Parma	OH	44134	12/12/2012	1). Placed a follow-up phone call to D.O.N., Cathryn Kader D.O.N., to discuss pain & pain Management educational opportunities. N/A, left msg.2). REC'D RETURN PHONE CALL from D.O.N. Cathryn (Trina) Kader, Re: unbranded/branded educational opportunities. She stated, " I'm not interested, we receive all our education from our Pharmacy and Hospice.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	12/12/2012	1). Placed call to D.O.N. Deb Keller, to discuss pain & pain management educational opportunities. N/A, left msg. 330-777-50022). RETURNED PHONE CALL REC'D from D.O.N., Deb Keller, appt. scheduled for 12/21 @ 10am to meet and discuss in-service opportunities for 2013.
PPLPMDL0020000001	Beachwood	OH	44122	12/12/2012	Placed follow-up phone call to DON, Stephanie Forsythe to discuss pain & pain Management educational opportunities. N/A, left msg.
PPLPMDL0020000001	Westlake	OH	44145	12/12/2012	Placed follow-up phone call to D.O.N., Susan Williams, introduced myself and purpose of call, re; discussed pain & pain management educational opportunities @ no cost. Appt. scheduled w. Susan for 12/28 @ 11am to discuss in-services for 2013.
PPLPMDL0020000001	Cleveland	OH	44106	12/12/2012	Made drop-in visit, There was a note on the door that read " Survey in process" Unable to meet w/ anyone.
PPLPMDL0020000001	Cleveland	OH	44128	12/12/2012	Made follow-up drop-in visit to Roseanne Howell, Spoke w/ receptionist Lisa Hives, Roseanne was in a meeting. left BC.
PPLPMDL0020000001	Richmond Heights	OH	44143	12/12/2012	Placed follow-up phone call to Wellness Director, Joan Southard, Spoke with Receptionist, Cheryl Polzer, introduced myself and purpose of call. Cheryl stated, " Joan is on vacation this week." Will make visit next week.
PPLPMDL0020000001	Akron	OH	44313	12/12/2012	Place follow-up phone call to D.O.N., Dayna Krost to discuss pain & pain management educational opportunities. N/A Voice-mail box is full.
PPLPMDL0020000001	Akron	OH	44310	12/12/2012	I told Clinton that there are many resources for OxyContin and pain management in general that I can provide and if he's wanted any? He said that they have limited space for a bunch of materials but he will let me know if they need anything or a patient has a question that I can help provide information on. nothing else learned.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	12/12/2012	Dr told me he will be unable to attend my event tonight. I asked him if he has initiated any patients? Dr said he has not and wanted to learn more about it but cant make it tonight. I told dr that I can help him understand how and who can use Butrans. I showed him the case studies and asked him if he knows of any patients on Ultram or vicoden who may need a dose adjustment? Dr said he might and agreed to try it. nothing else learned-font color=blue>b>CHUDAKOB added notes on 01/07/2013</b><font>Nice job of selling our product rather than just making this a "can you come to the program" call.
PPLPMDL0020000001	Parma	OH	44129	12/12/2012	Confirmed with Dr Chagin that he will be attending the Butrans dinner program as planned. Reviewed dosing with him & let him know he would learn more in-depth about dosing & titration at the program, but reminded him that we have discussed this before. He recited the doses (5, 10, 20) to me. I told him this is correct & added once weekly.
PPLPMDL0020000001	Akron	OH	44313	12/12/2012	Spoke with Jerry about Butrans appropriate starting dose, titration at 72 hours, supplemental analgesia and showed approximate conversion scale. Showed copy cards with trial card. Used OxyContin copy file card to explain patient savings. Pharmacy has the 5mcg of Butrans in stock and has a couple of patients on it who refill each month. Most common dispensed dose of OxyContin are 10, 20 and 40mg doses.
PPLPMDL0020000001	Munroe Falls	OH	44262	12/12/2012	I explained the patient information guides for Butrans. I asked dr to continue finding Butrans candidates and gave review of initiation and titration guide. Dr said the guides will help and she is glad to have the resource. Dr said she is pleased with the results of Butrans and will continue using it.
PPLPMDL0020000001	Parma	OH	44129	12/12/2012	Spoke with Bethany & reviewed Butrans & OxyContin dosing/strengths. Went over Butrans range of patients & showed range of patients in initiation guide. Reminded her of 3 day titration interval & maximum dose of 20mcg. She said she has not filled a Butrans prescription for quite awhile, but thinks it is a good option. I asked her to give patient information to customers who she thinks could benefit from Butrans as an option. Also reviewed savings programs. She did not need any cards at this time.
PPLPMDL0020000001	Warrensville Heights	OH	44122	12/12/2012	Showed OxyContin 7 tablet strengths, reviewing intermediate doses & encouraging Dr Zivic to consider an intermediate strength when titrating. Also reviewed prior authorization requirements for Butrans on Caresource & Medicaid.
PPLPMDL0020000001	Bedford	OH	44146	12/12/2012	The technician said the pharmacist was busy with an issue. Showed her savings cards/brochures for Butrans & OxyContin. Reviewed eligibility requirements with her, reminding her that patients with any type of government insurance cannot use the cards. Also let her know that cash paying patients can use the OxyContin cards every 14 days if their prescription is written that way. She agreed to give my information to the on-duty pharmacist when he became available.
PPLPMDL0020000001	Mayfield Heights	OH	44124	12/12/2012	Called and spoke w/ D.O.N., Sandra Brown, introduced myself and purpose of call, re: pain & pain management educational opportunities @ no cost. Sandra stated, "you need to speak with our staff development coordinator, MaryAnn Coplo, she is the one who sets up all our in-services, I will connect you with her." Once connected to MaryAnn Coplo, N/A. No voice-mail available to leave msg.
PPLPMDL0020000001	Bedford	OH	44146	12/12/2012	Dr Moufawad said he is frustrated with other specialties prescribing long-acting opioids for short-periods of time because it ends up getting some people addicted & then they become a problem, ultimately ending up in his office. He said then he is responsible for figuring out what to do with them. I agreed that Butrans & OxyContin, both long-acting opioids, should be used when pain is expected to last an extended period of time or chronically. Dr Moufawad said he has tried to use Butrans more recently & also has been using OxyContin. I asked Dr Moufawad why he thinks it is so common for physicians to be comfortable keeping patients on short-acting opioids for long periods of time. He said he does not know or understand why they do this. He added that they just don't understand how to treat pain in general.
PPLPMDL0020000001	Cleveland	OH	44102	12/12/2012	Made drop-in call, Spoke w/ Receptionist, Betty Washington, introduced myself and purpose of visit re: pain & pain management educational opportunities. I entered the St. Augustine Health Campus building, but noticed St. Augustine Manor was located across the street. I confirmed w/ Betty. She stated that the Health Campus building is for assisting living, while the St. Augustine Manor is LTC. The D.O.N. for the Assisted Living facility is Bridget Knowlan and Colleen Wilson is the D.O.N. for St. Augustine Manor. Neither D.O.N.'s were available to meet w/ me. Left BC and PAP handouts for both.
PPLPMDL0020000001	Parma	OH	44129	12/12/2012	Mary called me & asked me to come to the office as Dr Taylor needed information about Butrans from me. Dr Taylor said she has a patient who she really wants to put on Butrans & asked me if Medicare covers Butrans. I told her these plans generally do not cover Butrans. I asked what the patient has tried before. Dr Taylor said not much. Reviewed a broad overview of Medicare prior authorization requirements, but told her she would really need to check with the patient's specific plan since each are so different. Dr Taylor said she did not want to start this patient on a short-acting opioid medication & added that she has found a few patients to give Butrans to this week. She asked if it is correct that BWC is paying for Butrans. I told her this is correct. I reminded her of OxyContin's favorable broad formulary access & that appropriate opioid naive patients can be started on OxyContin at 10mg q12h. Dr Taylor said she would check with the patient about her prescription coverage & would go from there. Spent time with Mary going over Medicare D & prior authorization requirements for Butrans. She said she would call me with questions.
PPLPMDL0020000001	Parma	OH	44129	12/13/2012	Dr Kalin said he has had an increased number of patients recently who are "medically managed" for pain. I asked what he means by that. He said, in general, he tries to have patients on non-medication remedies/therapies for pain, but he has noticed an increase in patient population on medications. He went on to say that he thinks Butrans is going to be a bigger part of his practice due to these patients. I asked if they fall within the appropriate therapeutic range for Butrans. He said many of them do. I introduced the Butrans Patient Experience Program & walked him through how they are used. Discussed focusing on patients who would be likely to enroll & who have commercial insurance so they have the most favorable access to Butrans. Dr Kalin agreed to enroll 5 appropriate patients in the program. I let him know I would return for feedback/follow-up.
PPLPMDL0020000001	Parma	OH	44129	12/13/2012	Spoke with floater pharmacist & Georgia, technician. Reviewed Butrans appropriate patient type & trial/savings program. They said they did not see Butrans on the shelves here & Georgia said she doesn't think they have anyone on it. Discussed OxyContin savings program/eligibility. They did not need any cards at this time.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	12/13/2012	Gave a comprehensive overview of Butrans transdermal patch design, Mu receptor binding and ability for opioid or non opioid products to be used for supplemental analgesia, dosing, titration, appropriate patient selection, conversions, and managed care along with trial offer. Dr said she has a patient that would be perfect for Butrans and is on Medicare. Dr asked about Medicare coverage. Discussed coverage in depth and told dr to prescribe it if she feels its the best option and the indication is met. I asked Dr to prescribe Butrans. Dr said she keeps forgetting and wants to prescribe it and said she will keep the information on her desk.
PPLPMDL0020000001					

PPLPMDL0020000001	cuyahoga falls	OH	44223	12/13/2012	Gave a comprehensive overview of Butrans transdermal patch design, Mu receptor binding and ability for opioid or non opioid products to be used for supplemental analgesia, dosing, titration, appropriate patient selection, conversions, and managed care along with trial offer. I asked dr if he could think of any patients that meet the description we discussed? Dr said he has a couple of patients that it may be appropriate for and said he will try it clinically.
PPLPMDL0020000001	Parma	OH	44134	12/13/2012	Dr Hernandez reports that he is still putting new patients on Butrans & continuing others. He said he thinks he is writing as much Butrans now as ever. I asked if he still finds that he is starting opioid-naive patients on the 5mcg Butrans. He said he does when he gets a patient like that. Reviewed BWC coverage for Butrans & prior authorization requirements for OxyContin.
PPLPMDL0020000001	North Olmsted	OH	44070	12/13/2012	Made drop-in visit, Spoke with Receptionist, Sandi Cost, introduced myself and purpose of visit. Re: Pain & pain management educational opportunities. Asked if D.O.N. Erica Wood was available? Met w/ Erica Wood, introduced Purdue's Educational program and in-services that I could offer at no cost. Erica stated, "I no longer have monthly meetings, but have yearly mandatory competencies." Erica informed me that she will be holding these competencies in January and would have me come and do a "short" in-service on pain assessment. Erica asked me to contact her via e-mail the beginning of January to schedule the in-service.
PPLPMDL0020000001	Cleveland	OH	44128	12/13/2012	Placed phone call to RoseAnne Howell to see if she has spoken w/ D.O.N., Donna Sillanen on getting approval to set up in-service w/ me on Pain & Pain Assessment. N/A left msg.216-475-8880
PPLPMDL0020000001	Cleveland	OH	44122	12/13/2012	Place follow-up phone call to D.O.N., Connie Louis, to discuss pain & pain management educational opportunities. N/A left msg. on her voice-mail.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	12/13/2012	I asked dr if he has continued to speak to his patients falling on their IR opioids about the option of Butrans? Dr said he has on a couple other occasions but the patients want their pills he said. I asked dr if the pills are not working then why do they want to keep taking them? Dr said that is a good question but thinks it habit. I told dr to help them break that mental habit of taking pills that are not providing enough analgesia and to try the Butrans patch. I showed dr the Butrans patient information guide and explained to him about giving it to the patient to become more informed about Butrans which may help with the comfort level about Butrans. Dr said that its a good idea and he will try it.
PPLPMDL0020000001	Parma	OH	44129	12/13/2012	Myra said she has been writing a lot of Butrans lately, giving it to anyone who she sees who fits the indication & who is appropriate. She said she has been giving out the patient information kits & explaining them to patients & added that the patients seem to really like that component. She & Dawn showed me that they are again down to only one kit. I let her know I have ordered more for her again. She said she plans to continue writing Butrans & showed me how she still keeps her notes in her pocket with her prescription pad. Reviewed managed care coverage with her again. I asked about any clinical feedback, but Myra said not enough time has passed for any of them to follow-up, but that should start happening soon.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	12/13/2012	Reviewed Butrans dosing, appropriate starting dose, titration and ability to use supplemental analgesia. Showed approximate conversion chart as well. Jackie said that they have not filled Butrans and will order it when they see a prescription.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	12/13/2012	Spoke to Jenna about the Butrans application sites and importance of appropriate starting dose. Discussed titration and ability to use supplemental analgesia. Jenna said they have 2 patients on Butrans and both are on the 5mcg. She could not remember the drs who prescribed. Reviewed OxyContin dosing and copay cards.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	12/13/2012	Told dr at window that Butrans is the only CII 7 day transdermal system for moderate to severe pain. I told dr that her patients on IR opioids who need more, use Butrans instead of titrating the short acting. Dr said ok and said she has the information on her desk. nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44135	12/13/2012	Made drop-in visit, spoke w/ Angela Ederlack, admissions director/marketing, introduced myself and purpose of visit. Re: Main & Pain management educational opportunities at no cost. Asked to speak w/ head of education. Angela stated, "Our D.O.N. is Dan Rivera and he is in charge of education also." I asked if he was available, Angela said, he just went into a utilization review meeting." CPP Confirmed as Heartland Medical Services. Left my BC and PAP handouts.
PPLPMDL0020000001	Independence	OH	44131	12/13/2012	Dr Pai said he seems to be having trouble with OxyContin on some managed care plans all of a sudden. I asked if he knows which plans. He said he seems to think it is Caresource & AARP. I let him know I would look into details. He said one patient who has been on OxyContin for years, having failed on Morphine, brought a letter to him that stated that as of January 1, OxyContin will not be covered. Dr Pai said he had no choice but to put the patient on Opana, although he did not want to do this. I asked Dr Pai where he thinks Butrans fits clinically into the treatment algorithm for pain. He said probably someone who is failing on Vicodin. He added that he still has a patient on Butrans doing very well. He said he did have to prior authorize it as it is for a Medicare patient. I agreed that Butrans can be challenging to get on Medicare plans. I asked how much Caresource & straight OH Medicaid he sees. He said a fair amount of Caresource & some Medicaid. Discussed prior authorization requirements for Caresource & Medicaid. I asked if he thinks he will be able to use more Butrans knowing this information. He said he has many patient who fit into the indication & who Butrans could be good for who have Caresource. I asked him to try Butrans for some of them & he agreed.
PPLPMDL0020000001	Cleveland	OH	44106	12/13/2012	Placed call to speak w/ D.O.N. or Nurse Educator. The greeting was University Manor Healthcare which is part of Saber Healthcare Group. Marcia Wiggins is the Nurse Educator, N/A, left msg.
PPLPMDL0020000001	Akron	OH	44310	12/13/2012	I told dr to prescribe the CII, Butrans for his patients falling on their immediate release opioids or NSAIDs. I showed dr the dosing again and conversion scale and asked if he had any reservations using Butrans? Dr said no. I asked him to use it then in that situation. Dr did not give a response.
PPLPMDL0020000001	Westlake	OH	44145	12/13/2012	Received phone call from D.O.N., Liz Williams stating, "I'm so sorry, I should have called you earlier, but unfortunately, I am going to have to cancel the in-service for today. Corporate has called a meeting. I definitely want to pursue this opportunity. I will call you the first of the year to set up a new date and time." I assured her that this was not a problem and told her if I don't hear from her by the second week in January, that I would give her a call or stop in to reschedule the in-service. She stated, That would be great."
PPLPMDL0020000001	Beachwood	OH	44122	12/14/2012	Reviewed OxyContin & Butrans managed care plans. Showed OxyContin grids & reviewed savings cards & eligibility. I asked Dr Yokiel if most patients are already on a long-acting opioid when they get to him. He said most are already on an opioid, but usually not a long-acting option. I asked if he usually tries to get them on something long-acting as part of his treatment plan. He said he usually eventually does that. He said he has been using Butrans some more & plans to continue.
PPLPMDL0020000001	Brooklyn	OH	44144	12/14/2012	Reviewed Butrans appropriate patient type/range with Dr Miguel & discussed OxyContin q12h as an option for appropriate patients beyond the Butrans range. Reviewed Butrans once weekly transdermal dosing & delivery system. I reminded him that he has told me that he has several patients who chronically take 1-2 Vicodin per day for conditions such as osteoarthritis or spinal stenosis. He said this is true. I told him patients like that who are appropriate may be candidates for Butrans 5mcg. Showed doses & titration ability every 3 days & max dose of 20mcg. Reviewed insurance coverage & savings cards. Dr Miguel said he is going to prescribe it. Reviewed OxyContin with 7 available tablet strengths as a q12h dose of oxycodone. Dr Miguel said he didn't realize that OxyContin was the same molecule as Percocet but with a different delivery system & different dosing.
PPLPMDL0020000001	Independence	OH	44131	12/14/2012	Spoke with JT, who said they really do not seem to be moving much Butrans. He said he would imagine it probably moves better at locations like Euclid where they use more opioids. Reviewed appropriate patient type/range for Butrans. Reviewed CII & abuse/addiction potential. Discussed savings for Butrans & OxyContin. He said he has enough cards.
PPLPMDL0020000001	Solon	OH	44139	12/14/2012	Placed call to Staff Development Coordinator, Gretta Redus to discuss pain & pain Management Educational Opportunities. N/A, left msg. on her voice-mail.
PPLPMDL0020000001	Twinsburg	OH	44087	12/14/2012	Placed call to D.O.N., Shawn McMahon to discuss pain & pain management educational opportunities. N/A, left msg. on his voice-mail.
PPLPMDL0020000001	Mayfield Heights	OH	44124	12/14/2012	Correction: Drop-in visit scheduled for 12/17 not 12/14
PPLPMDL0020000001	Parma	OH	44134	12/14/2012	Placed a call to D.O.N., Julie Swindle to discuss pain & pain management educational opportunities. Per the receptionist, Roseanne, "Julie is not in today." left msg. on her voice-mail.
PPLPMDL0020000001	Fairlawn	OH	44333	12/14/2012	Called and spoke w/ D.O.N. Deborah Shafer, introduced myself and purpose of call. re: pain & pain management educational opportunities at no cost. Debroah asked," is there any way you can call me in January and we can set up something then. We schedule in-services for the last Thursday of every month," I think this would be great for the nurses."
PPLPMDL0020000001	Garfield Hts	OH	44125	12/14/2012	Dr Sadowski said he just wrote a Butrans prescription & asked Deena if he was correct. She said yes. I asked what insurance the patient has & what made him write Butrans for this patient. He said he wasn't sure what insurance the patient had- Deena did not know either. He said he wrote it for them because I am always in his office & then walked into a room. Reviewed OxyContin Medicare coverage with Deena. She said he has only one or two patients on OxyContin.
PPLPMDL0020000001	Solon	OH	44139	12/14/2012	Placed call to D.O.N. Judith Sawnter, to discuss pain & pain management educational opportunities at no cost. N/A, left msg on her voice-mail.
PPLPMDL0020000001	Fairlawn	OH	44333	12/14/2012	Placed call to D.O.N. Kathleen Franey to discuss pain & pain management educational opportunities at no cost. N/A, left msg on her voice-mail.
PPLPMDL0020000001	Akron	OH	44305	12/14/2012	Explained Butrans Experience Kits to Dr and told him when a patient with commercial insurance initiates with Butrans to provide them a kit which includes a copay card, information guide and how the surveys that are completed will help him track his patients experience. Dr said he likes the idea and that he just prescribed Butrans today and the patient is a dual eligible and Pherin wants to know coverage. I asked which Medicaid plan and she didn't know but said she will fill out the PA do get it covered. I explained the PA with Caresource and commercial plans.
PPLPMDL0020000001	Akron	OH	44305	12/14/2012	Spoke to Brian about the importance of appropriate starting dose and need for titration. I also told Brian about the ability to use opioid and non opioid analgesics for breakthrough pain. Brian said he sees that most patient probably fall within the 10mcg dose based on what he is seeing for vicoden and percocet doses. Brian has filled two more prescriptions for Vora since I was in last.
PPLPMDL0020000001	Uniontown	OH	44685	12/14/2012	Told dr at window that Butrans titration can take place every 72 hours if necessary. I asked if he has titrated any patient recently or had and new starts? Dr said he feels titration is necessary and he has not had any new patients yet but continues to look. nothing else learned
PPLPMDL0020000001	Brooklyn	OH	44144	12/14/2012	Discussed OxyContin 7 tablet strengths & showed visual of them. Dr Detwiler said he knows we have talked about it, but he continues to forget those doses. He said he does think it is a good idea to use them because a patient should not be given more opioid than necessary. I agreed. He asked if insurance companies will "balk" at the intermediate strengths. I told him all strengths are covered equally on insurance plans. He said he rarely finds the 10mg to be the correct dose for a patient, adding that they always need more than that. I asked if this is because by the time a patient is initiated on OxyContin they are already taking higher doses of short-acting, warranting use of higher doses of OxyContin. He said yes. I asked why he thinks it is so common to wait so long before trying OxyContin. He said he didn't know. Discussed Butrans as a once weekly option in the CII class. Discussed abuse/addiction potential. Reviewed insurance coverage & trial/savings cards. He asked what dose Butrans he would start a patient on if they were taking 3 Vicodin per day. Showed initiation guide table & pointed out 10mcg. He asked who he would give 5mcg to. I told him this would be for someone taking less than 30mg oral morphine equivalent.
PPLPMDL0020000001	Akron	OH	44319	12/14/2012	Told dr through window that he needs to initiate Butrans on his patients on vicoden who say they need more and meet the indication. Dr said ok but that vicoden is cheap. I asked why a patient wants to continue taking vicoden if it is not working? Dr said that he doesn't have long enough to explain it to me.. nothing else learned.
PPLPMDL0020000001	Akron	OH	44333	12/17/2012	Provided overview of Butrans BUP 30115 focusing on starting dose, titration and pain score reductions. Becky said that she sees most acute pain patients whoever she had a patient this morning that has bad spinal stenosis and was complaining because she has to take so many pills. Becky said Butrans would be a good product for her and I agreed. Becky said that she will have to refer her to pain management and wants to try Butrans first. Discussed OxyContin indication, titration, doses, and appropriate patients.
PPLPMDL0020000001	Beachwood	OH	44122	12/17/2012	Reviewed favorable OxyContin managed care coverage with Dr Warren & reminded him of 7 available tablet strengths. Also handed him Butrans patient education tear-offs to stop him. I showed him how this pad can be used when giving new patients Butrans in effort to explain application. Dr Warren said this would be very helpful. Reviewed managed care coverage with him & reminded him of trial/savings program for those eligible. He said "Plus, this is the one they can wear for a whole week." I told him he was correct & reviewed 3 strengths. Reviewed Butrans appropriate patient type/range, reminding him that he has shown consistent interest in Butrans for some of his patients. I asked why not choose a few of them to try Butrans. He said he would.
PPLPMDL0020000001	Parma	OH	44129	12/17/2012	Dr Ortega said the patient who he had told me had gotten a rash while on Butrans is now doing better with no rash & the patient desperately wants to go back on Butrans. I told Dr Ortega this would be up to his clinical judgement, but Butrans might not be the medication for that particular patient. Dr Ortega said he has had various other patients who have recently started on Butrans & they are doing very well, so he plans to continue writing. He also said his patients are liking the DVD's I gave him for Thai Chi, Qi Gong, & Meditation. He said he always spends a lot of time educating patients & many of them are receptive to Butrans so they are willing to try it. Reviewed OxyContin q12h for appropriate patients taking immediate-release oxycodone around-the-clock chronically if they are beyond the Butrans range.
PPLPMDL0020000001					

PPLPMDL0020000001	Akron	OH	44333	12/17/2012	I told dr Esterle that Butrans is the ONLY CIII, 7 day transdermal system for moderate to severe pain and if she has patients that have been on IR opioid for at least 3 months to switch them to Butrans. Dr said most of her patients in pain are seen more for acute pain and asked if Butrans is indicated as such. I explained to dr that it is not but if the patient is taking pain medicine for more than 3 months, it probably is not considered acute pain. I gave dr the approximate conversion slide guide and asked her to keep it with her to remind her of patient types and starting doses.
PPLPMDL0020000001	Parma	OH	44134	12/17/2012	Gave Dr Mandat Butrans patient education tear-off sheets & showed him how they can be used in patient counseling when instructing them for the first time how to use Butrans. Reviewed application sites. Dr Mandat said he would put them to use & then walked into a room. Spoke with MA & reviewed application instructions for Butrans.
PPLPMDL0020000001	Mayfield Heights	OH	44124	12/17/2012	Made drop-in visit to see Staff Development Coord., MaryAnne. Spoke w/ receptionist, Teresa George, she said, "I will try and call her, I am not allowed to page." MaryAnne did not answer. left my BC
PPLPMDL0020000001	Cleveland	OH	44106	12/17/2012	Provided and discussed epidemiology data; reminded PI of upcoming Summit and encouraged to register; reviewed recruitment strategies
PPLPMDL0020000001	Beachwood	OH	44122	12/17/2012	Spoke with floater pharmacist, reviewing Butrans indication & dosing. Also reviewed trial/savings program & eligibility requirements. Offered OxyContin savings cards, but she said to check with Shelly or Rina when they
PPLPMDL0020000001	Cleveland	OH	44102	12/17/2012	Place follow-up phone call to D.O.N., Colleen Wilson to discuss pain & pain management educational opportunities. N/A left msg. Verified CPP- I was informed by admissions that they have their own in-house pharmacy
PPLPMDL0020000001	Parma	OH	44129	12/17/2012	Quick call- Followed up with Dr Taylor & inquired about patients she has recently put on Butrans. She said one of the patient's insurance plans wouldn't allow Butrans, so she had to put her on something else. I asked if this was a Medicare plan. She said it was. Reviewed managed care coverage & asked her to focus on BWC & commercial insurance & not give up. She said she would keep trying.
PPLPMDL0020000001	Richmond Heights	OH	44143	12/17/2012	CHUK; Made a drop-in call to meet w/ D.O.N., Joan Southard, according to Marketing Coordinator, Maria Faraci, Joan was on the phone and not available. She said that she will give her the message that I stopped in." She also asked for a 2nd business card to give to Victoria Taylor, marketing Director/Sales. Verified CPP- Parkway
PPLPMDL0020000001	akron	OH	44333	12/17/2012	I introduced the Butrans patient experience kits do dr Bashor. Dr said he thinks its a great idea for him and the patient to get better connected to the patients therapy. Dr asked what im seeing from the pain specialist prescribing Butrans? I told dr that patients from all ages and sex are using the product and it is being used to treat all types of chronic back pain and osteoarthritis. I told dr that the results have been very positive and the specialists are using the product frequently. Dr said he will prescribe more Butrans and will use the kits.
PPLPMDL0020000001	Akron	OH	44333	12/17/2012	Due to the drastic reduction of new Butrans starts I decided to provide dr Shah with a Butrans patient Experience Kit. I explained the kit and its contents to Dr and the staff. I made sure that kits are for new patients to Butrans only and explained the surveys and how it will make the patient and the doctor even more in tune with how the patients is progressing with Butrans. Dr said he will use them and likes the idea. I told dr that the surveys will make it easier to ensure the patient is on the correct dose based on how they perceive their own pain level. I also told dr that they will help him decide when the patient needs to be titrated.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	12/17/2012	spoke to Bob about Butrans dosing, titration, use of supplemental analgesia and importance of appropriate starting dose. I asked about recent dispensing and he said that they have 3 or 4 patients on it and they are either on the 5 or 10mcg dose.
PPLPMDL0020000001	Parma	OH	44129	12/17/2012	Spoke with Jen & reviewed Butrans dosing & delivery system. Also showed FPI 2.4 & discussed ability for patients to take supplemental analgesia if necessary. She said she remembers filling a script for Butrans but did not recall what the patient had been on or who wrote it or what strength. Discussed titration & savings program. Also reviewed OxyContin savings program. They didn't need any additional cards at this time.
PPLPMDL0020000001	Fairlawn	OH	44333	12/17/2012	Discussed OxyContin patients in FPI that were studies over 65 and 75 years old. Discussed patient types from visit and dose adjustments necessary from FPI. Discussed need for appropriate starting dose and to titrate when necessary at 1-2 days. Provided overview of BUP 2015 discussing all aspects of study and primary end point. I stressed the importance of appropriate starting dose and need for titration to max dose if necessary. Dr Oyakawa said that he feels good about both OxyContin and Butrans and will continue to find more patients for the product.
PPLPMDL0020000001	Fairlawn	OH	44333	12/17/2012	Spoke to Gilbert & Sue about the Butrans patient experience kits and explained the patient/physician advantages. Gilbert said that he sees the kit as a way to ensure that the patient starts on the appropriate starting dose and that they titrate when necessary. Gilbert told me that they always carry all three doses and that they can handle the business.
PPLPMDL0020000001	Richmond Heights	OH	44143	12/17/2012	Stopped by and spoke with the receptionist, Darlene, asked to speak w/ D.O.N., Susan LoDolce. Darlene stated that she was not available, asked if there was a Nurse Educator that I may be able to speak with? Darlene stated, "we do have a nurse educator, her name is Aldona Bur, you can leave your BC and I will see that she gets it." Left BC and PAP handouts.
PPLPMDL0020000001	Parma	OH	44129	12/17/2012	I asked Elaine to tell me more about her clinical experience with Butrans & what types of patients she has been giving it to with most success. She said she has been having a lot of trouble with Butrans lately. I asked her to elaborate. She said "no one" is covering Butrans & that prior authorizations are not going through. I told her this is somewhat surprising to me based on the plans they see there, but asked her what plans if she could think of any specifically. She said Caresource. Explained prior authorization requirements & asked if she has been trying to write Butrans for patients who were not meeting the criteria. She said no. She said she simply cannot sit after hours with a pile of charts & go through every one to justify her clinical decisions. She said when she tries a patient on Butrans, she has to write them Butrans plus whatever else they were taking just in case the Butrans is not covered. I reminded her that supplemental analgesia is permissible if necessary with Butrans. She said she knows but she has to give them their full amount rather than a reduced amount like she would for supplemental just in case Butrans isn't covered & they have to stay on what their current med is because they only have patients follow-up every 4-6 wks & their office policy is to not phone in any prescriptions. So patients are "stuck" with whatever scripts they leave the office with. I let her know I would work with the office to get her a list of where Butrans is covered.
PPLPMDL0020000001	South Russell	OH	44022	12/18/2012	Introduced myself & Purdue's products to Dr Lackermann, a new physician in practice. She said she really doesn't write narcotic medications, adding that she "tries to avoid that." I agreed that opioid medications should always be prescribed with caution & only for the appropriate patients. Showed Butrans dosing & discussed appropriate patient type. Also showed 7 tablet strengths of OxyContin. She thanked me for the information & left.
PPLPMDL0020000001	Chagrin Falls	OH	44023	12/18/2012	Spoke with floater pharmacist & reviewed Butrans dosing & maximum of 20mcg. Also discussed appropriate patient type/range & showed savings card information for Butrans & OxyContin. She said she would leave my information for the regular pharmacist.
PPLPMDL0020000001	Cleveland	OH	44130	12/18/2012	Dr Fedorko said he had no time to talk about pain today. Reviewed trial/savings cards & managed care information for Butrans & asked what an appropriate patient has to lose. He said nothing if he could find the right person.
PPLPMDL0020000001	Chagrin Falls	OH	44022	12/18/2012	Spent time with Mindy reviewing Butrans managed care information.
PPLPMDL0020000001	Chagrin Falls	OH	44022	12/18/2012	Reviewed 7 tablet strengths of OxyContin, asking Dr Hudson to consider an intermediate dose of OxyContin for titration for the next appropriate patient for whom she is titrating. She said she uses "all" the strengths.
PPLPMDL0020000001	Chagrin Falls	OH	44022	12/18/2012	Reviewed Butrans managed care coverage. She said she didn't have time to talk & asked me to leave information.
PPLPMDL0020000001	Akron	OH	44310	12/18/2012	Dr Rood had a medical student with him, so he asked me to review Butrans for the student's benefit. Discussed dosing, titration, & appropriate patient type/range. Discussed Butrans as the only long-acting CIII opioid analgesic available & advised of abuse/addiction potential. Discussed ability for patients to use supplemental analgesia if necessary. The student asked how Butrans compares with fentanyl. I told him we have no comparative data & pointed out that fentanyl patients were excluded from our studies for Butrans. Re-visited appropriate patient type/range. Dr Rood told the student that Butrans would be for earlier in therapy than fentanyl typically.
PPLPMDL0020000001	Akron	OH	44310	12/18/2012	Reviewed managed care & trial/savings program. Also discussed OxyContin 7 tablet strengths offering q12h dosing of oxycodone for appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44130	12/18/2012	doctor mentioned that he had a patient in the office from Dr Kushnir who presented with 2x 20mcg patch administered. Dr said his medication history was consistent with OHRS and patient was not displaying any adverse events or otherwise. I read the QTc interval prolongation from FPI. Dr said he will re evaluate patient after the new year. I discussed dr looking for Butrans patients who were on vicoden up to 40mg/day and patients not able to tolerate their IR medication. Dr said he has really been happy with Butrans and said he will begin to use more.
PPLPMDL0020000001	Cleveland	OH	44130	12/18/2012	Showed Dr Diab favorable OxyContin managed care status & reviewed Butrans formulary coverage as well. Dr Diab just thanked me & walked away. Shared this information with Barb as well.
PPLPMDL0020000001	Parma	OH	44129	12/18/2012	Gave Myra additional Butrans Patient Experience Kits per her request. She said she couldn't stay to talk today, but added that she really has been prescribing a lot of Butrans. Dawn confirmed this & showed me that they were out of Patient Experience Kits. She said they keep them right on Dawn's desk, away from all the other drug information, so that Myra has quick, easy access to them, especially because she has been giving them out so fast. Dawn said so far, patients have been excited about the patient kits & program. She said they have not received any feedback at this point.<font color=blue><b>CHUDAKOB added notes on 01/07/2013</b></font>-This was a great SUCCESS STORY!!!
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	12/18/2012	I asked Patrick if he would find any of my resources like partners in pain, patient brochures, etc would be useful? Patrick said that I have given him most of the information already and he is using it where necessary. He said that they continue to fill prescriptions for Narouze and Sable as well as one from Shah.
PPLPMDL0020000001	Beachwood	OH	44122	12/18/2012	Made Drop-in visit, Stephanie Forsythe was not available, left BC and PAP handouts
PPLPMDL0020000001	Akron	OH	44310	12/18/2012	quick 10 second message about Butrans. I told dr to use Butrans for those patients failing their vicoden and showed appropriate starting dose and titration guide.
PPLPMDL0020000001	Cleveland	OH	44104	12/18/2012	Met with PI and SC; discussed challenges getting a new sub-investigator on the 1572; offered to discuss epidemiology data (which PI had already seen); reminder of PI summit
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	12/18/2012	I told dr to continue using OxyContin for his patients failing on their IR medications and a Q12h medicine is necessary. Dr said he likes OxyContin because he can trust that it works and will sustain analgesia for 12 hours. nothing else learned.
PPLPMDL0020000001	Parma	OH	44134	12/19/2012	Dr Hernandez said he has seen a slight increase in referrals with patients coming in already on Butrans & he said this is good to see. I asked if he generally continues them on it & he said he does. I let him know I try to focus primary care physicians on initiating Butrans for appropriate patients who are waiting to get in to see a pain management specialist. Dr Hernandez said he wishes more would do this. I asked if he sees patients coming in on OxyContin also. He said he does, but when that happens, depending on the patient & their situation, he tries to get them off OxyContin, with a goal of being on Butrans at some point. He did say that he is willing to keep them on OxyContin if it is only for a shorter period of time.
PPLPMDL0020000001	Independence	OH	44131	12/19/2012	Dr Jack said he probably should find some more patients for Butrans. I agreed that he probably has many appropriate patients & asked him to attempt to identify just a few of them. I asked if he has any patients for whom he still has on OxyContin who may be able to use savings cards. He said he doesn't write it anymore & walked away.
PPLPMDL0020000001	Sagamore Hills	OH	44067	12/19/2012	Dr Maguire asked me to go over Butrans with him again since it has been so long since we have discussed it. Reviewed core messages & showed dosing/titration. Discussed Butrans as a long-acting CIII opioid medication with abuse & addiction potential. Also reviewed appropriate patient type/range & ability for patients to take supplemental analgesia if necessary. Dr Maguire said he likes the idea of Butrans for patients with osteoarthritis. I asked his thoughts on identifying a few patients from his practice who he is either getting ready to start on their first opioid analgesic or for whom he is looking for a different option, perhaps aged 50-60 & working (for insurance purposes). He said he thought this was a great idea & said several times that he is going to use Butrans for some patients. Discussed which dose he could start them on depending on their current medication & showed application instructions/sites. Also discussed rotation & showed adverse events. Reviewed OxyContin, with 7 tablet strengths, as a q12h dosing option of oxycodone for appropriate patients.
PPLPMDL0020000001	Sagamore Hills	OH	44067	12/19/2012	Quick call- Dr Gemma said she was running very far behind & couldn't stay for lunch. Reviewed Butrans appropriate patient type & commercial insurance coverage. Also reviewed OxyContin as a q12h dose of oxycodone for appropriate patients who are beyond Butrans range. She said she will keep both in mind & suggested I speak with Dr Lang when she is in because she is the one in the practice with most of the patients on pain medications.
PPLPMDL0020000001	Bedford	OH	44146	12/19/2012	Dr Moufawad said he felt that the last Butrans program he did went well & he hopes we will have him continue to speak. He said he does wish there would be more slides on appropriate patient type examples to give attendees more variety. He added that his Butrans patients are doing well. I asked if he is still identifying new patients to start on Butrans & he said he is & also he is starting patients on OxyContin if they are already on a higher dose of opioids.
PPLPMDL0020000001	Copley	OH	44321	12/19/2012	I asked Jenna how many prescriptions of OxyContin they fill on an average month? She said she doesn't really know because she doesn't count them. I asked her to ballpark it and she said about 15-20 maybe 30 a month and those are refills. I spoke to her about patient savings through the copay cards.
PPLPMDL0020000001	Akron	OH	44320	12/19/2012	I asked dr if she has gained any clinical experience with Butrans since our last conversation? Dr said she has not but has also not ruled out using it. I asked her where she sees herself using Butrans and she said for a patient that she thinks need to be switched to an ER product. I asked her if she has a mg cutoff with vicoden before she switches? Dr said she does not because everyone reacts differently to medicine but typically about 5-6 pills a day. I asked her if it makes sense to switch to a 7 day patch like Butrans before the patient gets to 5 pills? Dr said maybe. nothing else learned.
PPLPMDL0020000001					

PPLPMDL0020000001	Beachwood	OH	44122	12/19/2012	Placed follow-up phone call w/ Phyllis Tabbs to discuss pain & pain management educational opportunities at no cost. Paged by Receptionist. N/A left msg. on voice-mail.
PPLPMDL0020000001	Akron	OH	44320	12/19/2012	Told dr that the patients that his examines that are on vicoden or tramadol and have been so for 3+ months to move them to Butrans. I told dr that his patients taking more than 3 pills a day of vicoden need to be started on 10mcg patch and to continue to find those patients with commercial prescription insurance or Caresource.
PPLPMDL0020000001	Euclid	OH	44117	12/19/2012	Called D.O.N., Kathy Nemeth, to discuss scheduling an in-service on pain/pain management for her nursing staff. N/A, left msg.
	Parma	OH	44129	12/19/2012	Dr Gigliotti said he started a patient on Butrans he thinks since he last saw me. I asked him to tell me more about this patient. He said he couldn't remember exactly, but he thinks the patient was on Vicodin "or something" but it didn't seem to be helping. I reviewed appropriate Butrans range, pointing out that if the patient was taking more than 40mg hydrocodone per day, OxyContin might have been an option. Reminded Dr Gigliotti to give out Butrans Patient Experience Kits when he initiates Butrans.
PPLPMDL0020000001	Parma Heights	OH	44130	12/19/2012	Called D.O.N., Katherine Myers to reschedule appointment to discuss Pain & Pain Management Education opportunities. N/A, left voice-mail msg.
PPLPMDL0020000001	Euclid	OH	44117	12/19/2012	Called D.O.N., Beth Walla, introduced myself and purpose of call, re: pain & pain management educational opportunities/in-services @ no cost. Beth stated, " we just had one done." I asked about future in-services and she said, "I am not interested." I tried to hear her about pain management in her facility, but she was not interested. Will remove from NE Core list.
PPLPMDL0020000001	Lyndhurst	OH	44124	12/19/2012	Placed phone call to Linda Dabney in Staff Development @ 440-684-6622 to set up appt. to discuss Pain & Pain Management Education/in-service opportunities. N/A, Left Msg.
PPLPMDL0020000001	Munroe Falls	OH	44262	12/19/2012	Very quick Butrans message in hallway. I told dr to continue using Butrans for patients like the one she just recently started. Dr said she plans on using more Butrans because it gave such good results. nothing else learned.
	Northfield	OH	44067	12/19/2012	Spoke with Carolyn & reviewed Butrans patient education booklets. Also showed application sites & rotation instructions. Discussed savings program & eligibility requirements for card utilization. She said they did not need any cards & agreed to give my information to Greg when he is available.
PPLPMDL0020000001	Barberton	OH	44203	12/19/2012	I told dr to continue using OxyContin where appropriate and to gain clinical experience with Butrans for her patients needing a dose adjustment on vicoden. Told dr and staff about realignment of territories.
PPLPMDL0020000001	Barberton	OH	44203	12/19/2012	I asked dr to continue to prescribe Butrans and OxyContin and to focus on his patients with commercial prescription insurance. Discussed Butrans for his BWC and Caresource patients as well. Told Dr and staff about realignment and about getting a new Purdue rep in first qtr 2013.
PPLPMDL0020000001	Westlake	OH	44145	12/19/2012	Rec'd phone call from Patty O'Shea, she had to cancel the in-service scheduled for today for the STNA Class, d/t no heat in the classroom. Today was the last of class. Patty stated that she will be starting another class in March and to "Keep in touch." She would like for me to contact her sometime the end of February.
PPLPMDL0020000001	Sagamore Hills	OH	44067	12/19/2012	Reviewed managed care & savings programs for Butrans & OxyContin with Dr Sevier. He said he keeps some of my Butrans information on his desk so it reminds him about it because he is sure that he will find someone to try it on. He then had to leave for a patient issue.
PPLPMDL0020000001	Broadview Heights	OH	44147	12/19/2012	Spoke with pharmacist & reviewed Butrans titration interval of 3 days & maximum dose of 20mcg. She asked if patients can wear 2 of the 5 or 10mcg patches at the same time, such as when they were titrating. I told her this has not been studied & is not recommended. She said it would make sense to be able to do that. I told her we do not recommend doing it. I explained trial & savings card programs for eligible patients & let her know patients can use the card twice in a month if it is for titration purposes. Offered cards, but she said they have some. Also reviewed OxyContin savings program. Gave her savings cards to keep on hand.
PPLPMDL0020000001	Broadview Heights	OH	44147	12/19/2012	Spoke with pharmacist & reviewed Butrans titration interval of 3 days & maximum dose of 20mcg. She asked if patients can wear 2 of the 5 or 10mcg patches at the same time, such as when they were titrating. I told her this has not been studied & is not recommended. She said it would make sense to be able to do that. I told her we do not recommend doing it. I explained trial & savings card programs for eligible patients & let her know patients can use the card twice in a month if it is for titration purposes. Offered cards, but she said they have some. Also reviewed OxyContin savings program. Gave her savings cards to keep on hand.
PPLPMDL0020000001	Barberton	OH	44203	12/19/2012	I told Bill about Butrans appropriate starting dose and the need for proper titration at 72 hours if necessary. I asked if they have seen any more activity and Bill said they have 3 or 4 patients coming into fill it. Bill said that starting dose is important especially for patients on vicoden. I showed him the approximate starting dose chart and discussed.
PPLPMDL0020000001	Copley	OH	44321	12/19/2012	I spoke to TJ and Melissa about Butrans managed care coverage and about Butrans itself. I asked them if they remember having problems getting Butrans covered for patient(s)? They both said they don't remember but said they think that Butrans is needed. I told them to speak to the dr about patients they see who may be appropriate for Butrans. I told dr to gain clinical experience with Butrans and to use it for his commercial prescription planned patient. Dr said he will use it again.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	12/20/2012	I discussed the Butrans information guide to dr to assist in his patients education about Butrans and asked him if he would continue to at least discuss the option of Butrans to the appropriate patients? Dr said he would but said it is a tough sale. I asked why and he said because his patients want to continue to stay on their pills. I asked if ALL his patients on pills are well enough controlled with their pain? Dr said not all but most. I asked dr to identify patient on short acting products that say they need more and they have hit the threshold he has set. What is your threshold I asked? Dr said everyone is different and it depends on their pain level. I asked dr to prescribe Butrans for a patient that is at the max dose you have set for them and they meet the indication. Dr said ok.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	12/20/2012	I received a phone call from ADON, Debbie Lovette at 11am today. She stated, We had scheduled an in-service on pain assessment for tomorrow at 2 and I need to cancel it because our staff meeting was moved to today due to a Christmas Party scheduled for tomorrow. She in-service. I explained that I have other appointments scheduled for today. Debbie said, I will e-mail you with dates for January after I look at my schedule.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	12/20/2012	I told dr that I am continuing to hear about how she prescribed Butrans and the story of success. Dr said she has not done it yet. I asked her why and is there something about Butrans she doesn't like? Dr said no but claimed to not have patients needing long acting medicines. dr walked away. nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44106	12/20/2012	Placed follow-up phone call to Marcia Wiggins, 216-721-1400. I was informed that she was gone for the Day, Left msg on her voice-mail.
PPLPMDL0020000001	Cleveland	OH	44128	12/20/2012	Placed follow-up phone call on 12/20 to Education Director, RoseAnne Howell. N/A left msg. on her voice-mail.
PPLPMDL0020000001	Akron	OH	44313	12/20/2012	Made drop-in visit to D.O.N., Dayna Krosta to discuss pain & pain management educational opportunities. I was informed by Nicole at the front desk that Dayna was not in today.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	12/20/2012	I saw dr through window, said hello and told her to continue to prescribe Butrans for her patients with low back pain or osteoarthritis on short actings and need a dose adjustment. Dr said she continues to use it but said that her Medicare patients are not able to get it because it is too expensive. I told her that if they have a coinsurance it won't be as expensive and to focus on her patients with private prescription insurance. Dr said ok and will see me in the new year.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	12/20/2012	I Met w/ Nancy Strausser from Staff Development to discuss pain and pain management opportunities for their facility at no cost. She informed me that the D.O.N. Anne was no longer working there and that the ADON, Kassidy Scalia, LPN and herself combined were taking on the role as DON temporarily. I shared w/ her resources from PAP and we discussed the type of in-services that I could provide her staff. I left copies of handouts w/ her to share and discuss w/ the ADON, Kassidy. I also mentioned that I could provide in-services on branded material as well (Butrans, Oxycontin & Senokot). I asked her what percentage of residents are currently being treated for pain? She answered "the Majority." She stated that they have Hospice, and short-term rehab as well as LTC. I asked about NP's on staff, and if it would be possible to speak with them. Nancy said that we could arrange that.Nancy Stated, "I have not even begun to schedule any education for next year yet." I will sit down and talk with Kassidy and get back with you sometime after the first of the year to schedule an in-service. She said that the beginning and end of shifts work best.
PPLPMDL0020000001	C. Falls	OH	44223	12/20/2012	Spoke to the two pharmacy techs about their need for additional copy cards for each product before the end of the year. Lisa said that they still are not seeing Butrans much but have it on the shelf. She said that most patient in the hospital don't know that they are even there. I told her that I will speak with Glenn(RPH) in pain management about sending patients tho the in house pharmacy. OxyContin is still filled regularly and continue to use mostly the 10, 20 40 and 60mg doses.
PPLPMDL0020000001	Akron	OH	44312	12/21/2012	Told dr to prescribe Butrans when he is faced with a decision to titrate the IR opioid when the patient meet the indication. Dr said he will but he just needs to find the right patient with the right insurance. I reviewed both items with dr.
PPLPMDL0020000001	Akron	OH	44312	12/21/2012	quick call at window after dr saying he really didn't have time. Told dr that 62% of patients in the opioid experienced trial were on hydrocodone medications and to use Butrans for those patients needing a dose adjustment. Dr said that he has a patient on Butrans from vicoden. I asked how the patient is doing and he said very well and patient is happy. nothing else learned.
PPLPMDL0020000001	Akron	OH	44312	12/21/2012	caught dr at window and told Dr that Butrans is the ONLY CII, 7 day transdermal system on the market and that he needs to use it for his patients who need a dose adjustment on their Ultram or Vicoden. Dr said he wants to but is having a tough time with Medicare coverage. I told dr to stick with commercial. Dr said most of his patients have Medicare. nothing else learned.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	12/21/2012	Rec'd phone call, Appt. w/ D.O.N. Deb Keller, for today was cancelled. Per her receptionist, Deb Keller said that she will call me to reschedule. 330-777-5002
PPLPMDL0020000001	Westlake	OH	44145	12/21/2012	Appt. w/ Susan Williams was cancelled for 12/28 d/t holiday.
PPLPMDL0020000001	Uniontown	OH	44685	12/21/2012	Wished dr and staff Merry Christmas and to continue using Butrans in the patient needing a CII, 7 day transdermal system. Dr agreed to keep writing where appropriate.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	12/21/2012	Reviewed Butrans dosing, titration, patient types, approximate conversions, application sites, managed care and that Butrans is a CII, 7 day trasdermal system. I asked dr if he has patients with spinal stenosis, low back pain or osteoarthritis who are taking IR opioids. Dr said he has many. I asked if dr if they are all controlled on their current dose. Dr said most likely not. I told dr to initiate Butrans in those patients that need a dose adjustment and meet the indication. Dr said he understands there is a need and thinks it will work well. I asked dr if he will prescribe it? Dr said he will try it.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	12/21/2012	Discussed Butrans with doctor for first time. Introduced Butrans dosing, titration, patient types, product makeup and design, application sites, approximate conversions and managed care. Dr said that he does have patients that would meet the indication for Butrans and he thinks it is a necessary option. Dr said he does treat patients who have conditions that have kept them in pain for many months. Dr said he sees Butrans working for his patients with chronic low back pain. Dr said the cost is great and he most of his practice is commercial insurance. Dr said he will use Butrans.
PPLPMDL0020000001	Barberton	OH	44203	12/21/2012	Reviewed Butrans dosing, titration, patient types, approximate conversions, application sites, managed care and that Butrans is a CII, 7 day trasdermal system. I asked dr if he has gained any clinical experience yet. Dr said no but he should be using it because he doesn't want his patients on all the short actings when they are clearly not working. I told dr to initiate Butrans based on the approximate conversion chart and he said he has patients to initiate on both the 5 and 10mcg. I told dr to try it in the right patient with the right insurance and let it speak for itself.
PPLPMDL0020000001	Parma	OH	44129	1/2/2013	Dr Gigliotti said Dr Salama "likes" Butrans. I asked about his own clinical experience. He said he hasn't given it to anyone lately that he can think of. Reviewed Patient Experience Kits & asked him to give them out to appropriate patients who he starts on Butrans. He said he would as soon as he gets a patient. OxyContin reminder. He said he still writes "too much" of it.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	1/2/2013	Placed follow-up phone call to ADON, Debbie Lovette to re-schedule Pain Assessment in-service. 330-929-4231. She was not available, left msg w/ the receptionist.
PPLPMDL0020000001	Parma	OH	44134	1/2/2013	Dr Hernandez said he didn't have time today to talk. He added that he promises to continue to write Butrans & OxyContin for patients & added he has been using Butrans a lot lately it seems. He said to check back next week so we could discuss it further. I agreed.
PPLPMDL0020000001	Westlake	OH	44145	1/2/2013	Placed phone call to D.O.N., Sue Williams to re-schedule appt. to discuss pain & Pain management Educational Opportunities. N/A Left msg.
PPLPMDL0020000001	Parma	OH	44129	1/2/2013	Quick call- Dr Taylor said she has been prescribing Butrans but doesn't have much to tell me feedback-wise. I reviewed BWC coverage. She said she has no reason at this point to not keep writing. Reminder for OxyContin.
PPLPMDL0020000001	Richmond Heights	OH	44143	1/2/2013	I received a phone call from Marketing Coordinator, Maria Faraci asking if I would be available on 2/21 at approx. 9:30 to do an in-service for an open-house that the Waterford of Richmond Hts. will be holding. Approx. length will be 45 minutes. She will e-mail me later this week with more details.



PPLPMDL0020000001	Akron	OH	44333	1/2/2013	Spoke to Dr about the types of patients he is seeing in his Kent office. Dr said his Kent office is very busy and his patients are all suffering from the same things he sees in Fairlawn. Spinal stenosis, chronic low back pain, cervical spine issues. I asked dr about using Butrans for patients that are naive to opioid patients. Dr said about all his patients by the time he sees them have almost all been on at least 1 short acting product. I told dr he can use it for the naive patient and explained dosing. Reviewed the Butrans Experience kits again and asked him to continue providing them to patients new to Butrans. Dr said new physician starting in the practice Dr. Wynne. Dr also said to speak with Karen Hodakievic(Np) for Dr Meta in Kent.
PPLPMDL0020000001	Akron	OH	44320	1/2/2013	Discussed the need to use Butrans when a patient in one of their exam rooms says that the IR opioid was working well but now my pain is increasing. I asked both drs what they do at that point. Both drs said depending on the specific situation they would either titrate the dose, switch therapies or refer. I discussed why Butrans is a choice for a change in therapies by using the case studies, approximate conversions, patch technologies and that it is a CIII, 7 day controlled release product. I spoke specifically about managed care with commercial coverage, Caresource, BWC, and copy cards. Both drs said they will use it more.
PPLPMDL0020000001	Akron	OH	44313	1/2/2013	Quick hello at window and asked him if he has patients on OxyContin who are eligible for the \$70 copy cards? Dr said he was out of cards and does use them. I explained the cards and told him to continue using OxyContin.
PPLPMDL0020000001	Maple Heights	OH	44137	1/2/2013	Showed him the Butrans initiation and titration scale and asked him to use Butrans in 2013. Dr said he needs to look it over again. I told him that we need to take a few minutes to discuss on my next visit. Dr said he will try.
PPLPMDL0020000001	Akron	OH	44320	1/2/2013	Quick call- Caught Dr Gene at the window. Showed Butrans dosing, reminding him of titration ability every 3 days. He said he knows he can find someone for Butrans.
PPLPMDL0020000001	Copley	OH	44321	1/2/2013	Discussed Butrans patient profiles, managed care, conversions. I discussed Butrans titration and to use Butrans when his patients tell him they need more of their IR medicine and they have had pain for 3+ months. Dr asked about tapering off the IR opioid. Reviewed FPI instructions about tapering. Dr said he will use Butrans.
PPLPMDL0020000001	Akron	OH	44320	1/2/2013	Spoke to Kristen about Butrans dosing, titration, and approximate conversions. Kristen said they have a few patients on it and said she thinks all are on the 10mcg. She could not remember the doctors that prescribed. I have her copy card information on both products and discussed dosing for OxyContin. Titration at 1-2 days. She said they currently sotck the 5 and 10mcg of Butrans and all but the 15mg of OxyContin.
PPLPMDL0020000001	Copley	OH	44321	1/2/2013	Discussed the need to use Butrans when a patient in one of their exam rooms says that the IR opioid was working well but now my pain is increasing. I asked both drs what they do at that point. Both drs said depending on the specific situation they would either titrate the dose, switch therapies or refer. I discussed why Butrans is a choice for a change in therapies by using the case studies, approximate conversions, patch technologies and that it is a CIII, 7 day controlled release product. I spoke specifically about managed care with commercial coverage, Caresource, BWC, and copy cards. Both drs said they will use it more.
PPLPMDL0020000001	Solon	OH	44139	1/2/2013	I told dr that in 2013 I wanted him to re-evaluate his patients that present to him in some type of pain and are currently on a short acting opioid or non opioid analgesic. I told him that if he has patients on a short acting for some time and to ask a couple of questions. Is the current therapy the patient is on providing enough analgesia and patient is still in pain? Is the patient tolerating their short acting product? if one of the answers is NO then he should use Butrans as the 7 day transdermal patch for moderate to severe pain. Reviewed doses and titration and reviewed copy cards and cost. I told dr to gain more clinical experience with Butrans and allow the product speak for itself. Dr said he will use it.
PPLPMDL0020000001	Akron	OH	44333	1/2/2013	Dr Zaidi said he always doses OxyContin q8h because he finds that that eliminates the need for short-acting opioids plus OxyContin q12h. I reminded him that OxyContin should only be written q12h. He said he would rather dose it more frequently & not have the patient on short-acting with it- he prefers to have patients on only one opioid medication at a time. Reviewed managed care coverage, highlighting positive Medicare coverage. Dr Zaidi said he thought he had a patient for Butrans. I asked him to elaborate. He said a patient taking Suboxone was open to the idea of Butrans. I reviewed dosing & told Dr Zaidi this patient may be out of the appropriate range. He said he did tell the patient that he would have to taper quite a bit to be a good candidate. I asked Dr Zaidi why not try patients who are taking Percocet a few times per day on Butrans if they are appropriate. He said patients do not believe that any medication will last a full week, even when he assures them it will. He said patients are afraid that they won't be able to take anything with it. Reviewed ability to take supplemental analgesia with Butrans if necessary. He said he knows, but he prefers to have patients on only one opioid medication at a time.
PPLPMDL0020000001	Parma	OH	44129	1/2/2013	Saw dr at window today and told him that Butrans is covered for his Caresource patients with a PA. Explained PA and dr said he had forgotten that and he has many patients with Caresource. I told dr about OxyContin copy cards and 7 doses. Dr said he uses it for his more severe pain patients. I asked him to take his patients on IR oxycodone and move them to OxyContin Q12h. Dr said thats when he moves them is when he knows the patient is going to be on an opioid for a long time. nothing else learned
PPLPMDL0020000001	Independence	OH	44131	1/3/2013	Elaine said she was too far behind to talk, adding that she has been writing more Butrans. She said she seems to think there has been some managed care concerns & asked me to talk to Dawn about it. Reviewed coverage with Dawn.
PPLPMDL0020000001	Tallmadge	OH	44278	1/3/2013	Dr Jack said he has kept Butrans in mind, telling me again about the one patient who he has on it. I reminded him that he probably has a lot more patients who may benefit from Butrans & reviewed appropriate patient type. He said he would look.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	1/3/2013	discussed Butrans with Dr for first time. Explained indication, dosing, patch design, approximate conversions, appropriate patients, titration, and copy cards. Dr said he can see using Butrans but said he does refer out often after vicoden. I asked him at what dose he typically makes that decision? Dr said that all patients are different but around 30-40mg/day. I asked dr why he titrates to that dose if it continues to not provide enough analgesia?
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	1/3/2013	Dr said mostly cost and options available he feels comfortable using. I told dr that I want to make him feel comfortable using Butrans. Dr said he will give me a chance.
PPLPMDL0020000001	Sagamore Hills	OH	44067	1/3/2013	Quick review of Butrans before he left for rounds. Showed dr the initiation and titration guide and told him when he begins to see patients in pain to think about Butrans. Reviewed indication, appropriate patients, dosing, and appropriate starting dose.
PPLPMDL0020000001	Independence	OH	44131	1/3/2013	I asked Jackie ab out their OxyContin dispensing. Jackie said they only have 2-3 patients filling OxyContin regularly. I asked about the ages of the patients and she said that they are all working and in their 50-60's. She said they have most doses. Asked about Butrans dispensing again. Jackie said they have not dispensed any and do not have it on the shelf. I reviewed appropriate patient types, steady state, appropriate starting dose based on approximate conversion chart.
PPLPMDL0020000001	Parma	OH	44134	1/3/2013	Showed Dr Mike Butrans 3 strengths. I asked how comfortable he felt with Butrans. He said he is "OK" with it & added that he did try it on one person, but unfortunately, they complained of itching with it. I asked if it was local or systemic. He said systemic, which can happen with opioids. I let him know I would let the company know. Dr Mike said opioids are "a touchy subject" & added that he hates writing them. I asked what would happen if an appropriate patient came in to him on Butrans doing well- would he at least continue them on Butrans. He said with Dr Scanlon retiring, he has had this happen, but he sends most to pain management as in his opinion, their condition does not warrant long-term use of opioids. He said he is "OK" with Butrans & perhaps if he has a patient in hospice or something, he would look at that or OxyContin as an option for them.
PPLPMDL0020000001	Stow	OH	44224	1/3/2013	Dr Sundaram told the resident he was working with that I sell the "patch with buprenex". I clarified that Butrans is a once weekly transdermal system of buprenorphine. The resident asked if Butrans is for drug addiction or pain. I told him Butrans is indicated only for pain & should not be used for the treatment of drug addiction. I explained dosing. Dr Sundaram said he very much likes the idea of Butrans & has no issues with it, it is just that for some reason, it is hard for him to actually prescribe it. I asked why that is. He said he doesn't know- it is just that when he is in front of a patient, he just doesn't prescribe. Dr Sundaram added that this year, he promises he will find someone. I told him he probably won't have to look as hard as he thinks & reviewed appropriate patient type/range. Also reminded him of OxyContin q12h for appropriate patients beyond Butrans.
PPLPMDL0020000001	Parma	OH	44134	1/3/2013	Showed Dr Mandat Butrans 3 strengths & asked about usage of 20mcg dose. He said he has not found that he has had to put anyone on that high a dose & that 5 or 10 have seemed sufficient so far.
PPLPMDL0020000001	Stow	OH	44224	1/3/2013	gave quick overview of Butrans. pharmacy was packed and technician and pharmacist only gave me a few seconds. Told them about Butrans, dosing and approximate conversions.
PPLPMDL0020000001	Parma	OH	44129	1/3/2013	Myra said she has been writing Butrans a lot & giving out Patient Experience Kits, showing that she has only one left. I let her know I would look into when she would get more. Also reviewed trial/savings program with Dawn & gave cards. Dawn said she feels like she gets a lot of managed care pushback from Butrans. She said she has 4 charts on her desk of patients who "couldn't get Butras". I asked her what patients mean when they say that- is it too expensive, is managed care not covering it, is the pharmacy just out of stock? She said she would start asking them to clarify. She asked about Aetna & Medical Mutual as those were 2 charts on her desk. I assured her that Butrans is tier 2 preferred on both plans, reminding her there is always a chance a patient's plan has some sort of carve-out. She called the pharmacy & was told that Butrans for a patient with Medical Mutual was a \$274 co-pay, but it was possible that the patient had a deductible for prescriptions. I told Dawn this made sense since it is a new year. She agreed that this is possible. Myra said she is going to keep writing.
PPLPMDL0020000001	Beachwood	OH	44122	1/3/2013	Met w/ Nurse Educator, Merri Bunge to discuss in-service topics. After she consulted with a Nursing Supv., it was decided that an in-service on pain assessment would be a great review. I also offered branded in-services on Butrans and Oxycontin. Merri stated, "we use a large amount of Oxycontin," She asked if I could do an in-service on pain medication in general and what to use when. I explained that I could only talk about Butrans and Oxycontin. Merri stated, "maybe you can do a 30 minute branded in-service for just the nurses following the unbranded in-service. She requested the in-services for May 7th & 8th. Time to be decided. Merri also requested a copy of the in-service content prior to the in-service.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	1/3/2013	Saw dr at Western Reserve Hospital. I told dr to continue using Butrans for his patients on IR opioids are not getting enough analgesia or can't tolerate them. Dr said he continue to use Butrans for those patients that have too many side effects with the short acting opioids. I told dr to initiate early and to use proper starting doses based on approximate conversion chart.
PPLPMDL0020000001	Akron	OH	44305	1/3/2013	good discussion with Dr about the patient experience in his practice with Butrans. Dr said that he has seen it work very well with moderate pain patients. Dr said he likes Butrans because it has proven to him that it does provide good analgesia and has helped him get some of his patients off of vicoden or percocet. I told dr that positive patient experience is the first step in him using Butrans more often and to use his Butrans Experience Kits. Dr said he will continue to use and that Pherin is doing a good job getting patients PA's pushed through for Caresource.
PPLPMDL0020000001	Parma	OH	44134	1/3/2013	Lynda said she hasn't started anyone on Butrans. I asked what her comfort level was with starting or continuing someone on it. She said she would continue someone on it if they were doing well. Showed 3 strengths & discussed titration if the patient is tolerating the medication but not getting adequate relief.
PPLPMDL0020000001	Akron	OH	44310	1/4/2013	I told dr that one of the most important things when using a medication has to be patient selection? Dr agreed. I spoke to dr about the appropriate patient types especially William and asked dr if he has patients like him in his practice? Dr said he does but he said that patients like him are very difficult and unwilling to change from oral medications. I asked dr if he will at least discuss the option of Butrans with the patients we discussed to see what their thoughts are? Dr said he will.
PPLPMDL0020000001	Akron	OH	44312	1/4/2013	hello in back hallway and asked dr to find the appropriate patient for Butrans and gave 10 second example of a patient like William in the case study. Dr said he will but he has tried on a couple of patients and it was not covered. I reminded him that Medicaid other than Caresource is not covered and Medicare patients may be difficult. Told dr to focus on commercial patients and Caresource with the PA.
PPLPMDL0020000001	Parma	OH	44129	1/4/2013	Dr Khoobiali said he hasn't written Butrans for awhile. Reviewed appropriate patient type & asked him to initiate Butrans on an appropriate patient who presents in his office. Started to review patient profiles but he said he didn't have time for that today. I let him know I would come back another time when we could explore these patients more closely. Spoke with Carla & reviewed patient type.
PPLPMDL0020000001	Parma	OH	44129	1/4/2013	Showed Dr Roheny the "William" patient profile & asked if he remembers him. He did not answer. Reviewed points of this profile with him & reminded him that he has said in the past that he does see patients like this in his office. Reviewed Butrans managed care & range of patients, pointing out that if a patient has Medicare or is beyond the Butrans range, & they are appropriate, they may be a candidate for OxyContin. Dr Roheny said he thinks he will write Butrans in 2013. I told him there is no time like the present if he sees an appropriate patient.
PPLPMDL0020000001	Akron	OH	44312	1/4/2013	good discussion about Butrans and how to initiate for patient on vicoden. Discussed approximate conversion chart, appropriate patient selection, mechanism of action with partial Mu receptor. Dana help me explain to dr Lababidi why other agonist analgesics can be used with Butrans.
PPLPMDL0020000001	Fairlawn	OH	44333	1/4/2013	Met dr for first time and discussed Butrans and OxyContin. Dr said he just prescribed Butrans for the first time last week. I asked dr what the patient was on and what dose he initiated. Dr said it was a young adult female with chronic pain and was taking oxycodone 5mg tid. Dr said he initiated on 5mcg. I showed dr the initiation and titration guide. Discussed dosing, titration, and appropriate starting dose. Dr said he needed to know that information and it was helpful to get the titration information and when. Discussed appropriate patients and how to initiate. I asked dr why he chose Butrans and he said the patient was not feeling well on oxycodone and has lots of nausea and constipation. Dr said he felt Butrans would be more tolerable. I showed dr the AE's for opioid experienced patients. Dr said he will continue prescribing.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	1/4/2013	I received an e-mail from Debbie Lovette requesting to reschedule an in-service on pain & pain management for 1/18 2 2PM.

PPLPMDL0020000001	Beachwood	OH	44122	1/4/2013	Placed follow-up phone, spoke w/ Phyllis Tabbs, introduced myself and purpose of call.Re: pain & pain management educational opportunities at no cost. She asked if I could call her back on Monday 1/7 after 11am b/c she had someone in her office and was in the middle of something.
PPLPMDL0020000001	Stow	OH	44224	1/4/2013	Met and spoke to Regina(CMA). Discussed Butrans and need for materials or copy cards. Regina said they have many cards and use Butrans frequently. Confirmed lunch.
	Cleveland	OH	44130	1/4/2013	I reminded Dr Kansal of our previous conversation regarding Butrans. He said he knows he told me that he hasn't found success with it, but wanted me to know that he has not, nor will he, given up on Butrans. He added that he only gives up on medications if he thinks they will harm his patients. He went on to say that he still thinks Butrans can be a good medication. Dr Kansal said the most important aspects of a medication are #1- cost & #2- drug-drug interactions. He said so far he does not have those issues with Butrans & he just needs to find more patients so he can get better clinical experience with it so that he can see what kind of efficacy he gets. Reviewed trial/savings program & showed him patient experience kits. I asked him to try Butrans for the next patient who he sees who he thinks is appropriate for the medication & give them the kit. He said he would try his best.
PPLPMDL0020000001	Lyndhurst	OH	44124	1/4/2013	Placed phone call to Linda Dabney in Staff Development @ 440-684-6622 to set up appt. to discuss Pain & Pain Management Education/in-service opportunities. N/A , Left Msg.
PPLPMDL0020000001	Akron	OH	44312	1/4/2013	Met for first time and discussed Butrans. She knew of Butrans and said she thinks its a great medication and has a distinct place for patients on too many short acting medications. Discussed doses, titration, appropriate starting dose and managed care.
PPLPMDL0020000001	Cleveland	OH	44130	1/4/2013	Spoke with floater pharmacist. Reviewed Butrans dosing & titration & showed trial/savings cards. Offered OxyContin cards, but she said to check with the regular pharmacist. She said she would leave my information for him.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	1/4/2013	I told dr that she should identify her patients on vicoden that need a dose adjustment and move them to Butrans. Dr said she will consider doing that. I told dr that we have has multiple conversations about using Butrans and wondered why she has not at least tried it? Dr said she didnt know and that she is too busy to remember it.
PPLPMDL0020000001	Stow	OH	44224	1/4/2013	Met and spoke to LeeAnn about Butrans and asked if she knows about the product and if they stock it. She said they currently do not have it in stock and have only seen about 2-3 patients fill it. I reviewed all key selling messages and copy cards. I also asked who has prescribed it and she did not know.
PPLPMDL0020000001	Stow	OH	44224	1/4/2013	Met Greg Wood and discussed the pharmacy linked up with Summit Pain Specialists and how it works. Greg said they see fill at least 50% of Bressi, Geigers prescriptions. Greg said he can order quantities like any hospital pharmacy can which makes it nice. I asked him what insurance plans their patients have that fill from them? He said BWC is vast majority, then Medicaid, then various commercial plans. I asked Greg about OxyContin and Summit Pain Specialist and he said they do not prescribe it because of past issues but did say that they prescribe large quantities of high dose percocet and vicoden. Greg said they also do all the PA's for the pain doctors and has someone on staff dedicated to that alone. I asked about issues with Butrans and he said it has been ok but that Caresource has been asking for failure on more than one IR opioid. Told Greg to contact me if he needs any Butrans resources or copy cards
PPLPMDL0020000001	Brooklyn	OH	44130	1/4/2013	Spoke with Renee & discussed Butrans dosing. She said she hasn't seen a Butrans prescription in awhile. I asked if she knows why there were discontinuations, reminding her that they used to have a few customers on it. She said she hasn't heard anything & said maybe it was cost. Reviewed managed care information with her. Also discussed OxyContin 7 tablet strengths & asked her to recommend one of them if she sees a script written q8 instead of q12. She said she would.
PPLPMDL0020000001	Parma	OH	44129	1/7/2013	Quick call- Dr Ortega said he has been using Butrans & has nothing to report- neither good nor bad. He said patients seem to be having good results & access to it. Reminder for OxyContin for appropriate patients. He said he still uses that too.
PPLPMDL0020000001	Akron	OH	44333	1/7/2013	Introduced Butrans Experience kit to dr and Jen(ma). Told dr about the patient advantage using the kit and completing the surveys to assist him in tracking the patients experience with Butrans. Dr said he will use them and will like to have extra documentation on a scheduled product. I asked dr if he has had any new OxyContin prescriptions? Dr said he has had a couple since the new year. Both were on percocet and switched them to OxyContin. He thought the patients were both taking around 30-40mg/day. DR needs OxyContin copy cards in North Canton.
PPLPMDL0020000001	akron	OH	44333	1/7/2013	Effective 1/3/2013 dr is part of UH. Office staff RN Shirley(wife) and Gretchen no longer work in his office. Discussed move to UH and how it may impact his business practices. Told dr to use his Butrans Patient Experience kits and OxyContin for his patients on oxycodone.
PPLPMDL0020000001	Beachwood	OH	44122	1/7/2013	Placed follow-up phone call to Phyllis Tabbs as per her request to set up appt. to meet w/ her to discuss pain & pain management educational opportunities. N/A, left msg.
PPLPMDL0020000001	Akron	OH	44310	1/7/2013	I showed dr the opioid experienced trial and reviewed patients of his that are on vicoden. I told him that 62% of the patients studied were on hydrocodone medications and when he has a vicoden patient that needs a dose adjustment to move to Butrans. Gave review of conversions and asked him if he will prescribe? Dr said ok.
PPLPMDL0020000001	Richmond Heights	OH	44143	1/7/2013	Placed follow-up phone call to NE, Aldona Bur to schedule appt. to meet to discuss pain & pain management educational opportunities. Spoke w/ Nicki, the wound care Nurse who stated, Aldona is not in today." She also spoke w/ the D.O.N., Susan who was close by. She took my contact information and said that she would have Aldona return my call.
PPLPMDL0020000001	Beachwood	OH	44122	1/7/2013	Dr Myton-Craig said she wants to know who will pay for Butrans. Reviewed Butrans managed care coverage, specifically with BWC & commercial insurance. She asked if she was going to have to do a prior authorization for those plans. I told her the national formularies have Butrans at tier 2 preferred, therefore she should not have to do anything other than write the Butrans prescription & give the patient a trial/savings card. She said she would see if she could find someone. Pointed out favorable OxyContin Medicare formulary coverage.
PPLPMDL0020000001	Akron	OH	44333	1/7/2013	quick message at window about 62% of patients in Butrans studies were on hydrocodone medications and to identify those patients on vicoden that may need a dose adjustment.
PPLPMDL0020000001	Akron	OH	44310	1/7/2013	I asked if they had filled any Butrans or OxyContin over the last two weeks? Clinton said they have filled OxyContin but no Butrans. He said that they only have 2 or 3 patients on Butrans. I told him that steady state is reached at 72 hours and titration can happen at that time. Gave OxyContin copy card information review.
PPLPMDL0020000001	Parma	OH	44129	1/7/2013	Spoke with Mandy & reviewed Butrans & OxyContin savings programs. They did not need any cards. I asked about Butrans stocking. She said she thinks there are a few people who get it regularly here. I reviewed ability to titrate after 3 days & maximum dose of 20mcg.
PPLPMDL0020000001	Fairlawn	OH	44333	1/7/2013	Spoke to Jessica about who she has seen prescription for OxyContin and Butrans over the last week or two. She said that OxyContin has come from Lababidi, Amanabu, and Ahmad. Butrans from Fouad and one from Bashor. I asked what type of insurance, if any, she is seeing from patients filling OxyContin? She said most of them are commercial insurance.
PPLPMDL0020000001	Shaker Heights	OH	44122	1/8/2013	Showed Dr Agarwal that OxyContin is covered for approximately 90% of plans in the nation. He stopped & repeated "90%", saying this was "good". Positioned Butrans for appropriate patients who could benefit from a CII once weekly opioid analgesic.
PPLPMDL0020000001	Cleveland	OH	44130	1/8/2013	Spoke with floater pharmacist who said she has filled Butrans at other locations but was not certain what this location had moved. I asked what feedback or questions she has received regarding Butrans. She said nothing that she could think of. Reviewed dosing & titration. Also showed trial/savings cards & discussed OxyContin savings opportunities. She said she would leave my information for the regular pharmacists.
PPLPMDL0020000001	Cleveland	OH	44130	1/8/2013	Pointed out favorable Medicare OxyContin coverage & messaged Butrans for appropriate patients taking up to 80mg equivalent oral morphine per day as a once weekly CII transdermal option for their pain.
PPLPMDL0020000001	Parma	OH	44129	1/8/2013	Dr Paat said he likes OxyContin. He then asked if he can dose it q8h instead of q12h. I told him OxyContin is intended only for q12h dosing & showed him 7 tablet strengths. I told him the recommendation would be to increase the total daily dose rather than the dosing interval. He said what if the patient is on 80mg q12h- can he just have the patient take 80mg q8h to increase the dose if they are asking for supplemental analgesia with it being dosed q12h. I told him he could instead maintain the q12h dosing interval & increase the dose from 80mg upward to what he thinks is appropriate. He said he thought 80mg was as high as it could be dosed. I told him that while 80mg is the greatest tablet strength, OxyContin can be dosed higher. He asked how high. I told him it was patient-dependent & that he would want to balance tolerability with efficacy, adding that it was studied in doses as high as 640mg. Discussed importance of appropriate patient selection & abuse/addiction potential of all opioids. Discussed Butrans appropriate patient type/range & asked Dr Paat to consider Butrans for patients who are taking short-acting opioids around-the-clock, if they have a chronic condition. He said he likes using long-acting opioids for chronic conditions because it makes sense. Discussed once weekly transdermal dosing.
PPLPMDL0020000001	Beachwood	OH	44122	1/8/2013	Spoke with nurse Carol, Jenny, & Barb & reviewed Butrans & OxyContin patient types. Also discussed savings programs & eligibility requirements. They said their schedule is still not solidified, adding that another Dr (Callahan?) will be joining them, but not until late March. Scheduled lunches with Dr Yap & Dr Barrett.
PPLPMDL0020000001	Parma Heights	OH	44130	1/8/2013	made a follow-up visit to / D.O.N., Katherine Myers, to set up appt.w/ her to discuss Pain & Pain Management Education opportunities. Spoke w/ Receptionist, Helen Sanka, who paged Katherine x4, N/A Left BC
PPLPMDL0020000001	Middleburg Heights	OH	44130	1/8/2013	Pointed out Butrans trial/savings cards & started to review eligibility requirements. Dr Ignat said he had no time for that.
PPLPMDL0020000001	Solon	OH	44139	1/8/2013	Placed call to Staff Development Coordinator, Gretta Redus to discuss pain & pain Management Educational Opportunities. N/A, left msg. on her voice-mail.
PPLPMDL0020000001	Cleveland	OH	44128	1/8/2013	Made drop-in visit spoke w/ RoseAnne Howell to see if she had met w/ D.O.N., Donna Silassen on getting approval to set up in-service w/ me on Pain & Pain Assessment. RoseAnne stated, "All in-services are on hold right now b/c we have not had our inspection yet." She asked me to contact her in March. I reviewed in-service content w/ her again. She said that she would talk with the D.O.N. and see what she could do. Left BCand PAP
PPLPMDL0020000001	Parma	OH	44129	1/8/2013	Dr Tolentino said she just hates opioid medications. She said they all tend to make her sick, so even though she has back pain, she does not take them. I asked if she has patients with chronically painful conditions who take Vicodin, getting refill after refill from her. She said she does. I asked how frequently patients like that typically ask for an increase in dose or dosing interval. She said actually no one has asked her for that lately. Discussed Butrans with once weekly dosing transdermally. She said it does seem like a good idea. Also discussed OxyContin q12h dosing & 7 tablet strengths. She said she really doesn't use that much.
PPLPMDL0020000001	Akron	OH	44333	1/8/2013	told dr to continue using OxyContin for his patients with not enough analgesia on percocet q4-Q6. Dr said that that is where and when he is using it. Reviewed managed care again for Medicare surveys
PPLPMDL0020000001	Euclid	OH	44117	1/8/2013	Made a drop-in visit to speak w/ D.O.N., Kathy Nemeth to set up an appt. to discuss educational in-service opportunities. Spoke w/ Receptionist,Joenathan, he stated ,"she is unavailable, we have surveyors on the premises and she is in a meeting. I left my BC and PAP handouts.
PPLPMDL0020000001	Cleveland	OH	44130	1/8/2013	Dr Fedorko said he didn't want to hear about Butrans or OxyContin today & added that he has had a lot of "problems" with narcotics lately & he wishes they were all pulled from the market. He went on to explain that over the last month or so, 3 different pharmacies have contacted him regarding fraudulent prescriptions that patients are trying to get filled under his name. He said that is the problem with "those people". I agreed that all opioids carry abuse & addiction potential, but reminded him that there is a place for them when patients are in legitimate pain & cannot get adequate relief from other measures. He said this was true. I told him those are the patients I would ask him to consider for Butrans or OxyContin.
PPLPMDL0020000001	Maple Heights	OH	44137	1/8/2013	Spoke with technician who said Kim was on a phone call with a customer, so she could not come speak with me. Showed her Butrans trial/savings brochure & walked her through how the customer would use them, if eligible. Also showed OxyContin cards. She said she thinks it is mostly their older patients who are on OxyContin. I let her know as long as the patient is not on any type of government insurance, they can utilize the card for savings. She said she would give my information to Kim when she became available.
PPLPMDL0020000001	Parma	OH	44134	1/8/2013	Made a drop-in visit, spoke with the receptionist, Roseanne. Introduced myself & purpose of visit. Re: Pain & Pain Management Education. asked to speak w/ the D.O.N., Julie Swindell. Roseanne stated, our ADON, Cheryl Sigley now handles all education. Asked if she was available. Roseanne said, "an appt. is needed and her ext. is 414." Left BC and PAP handouts.
PPLPMDL0020000001	Independence	OH	44131	1/9/2013	Quick call- Discussed OxyContin broad formulary access & Butrans coverage, including prior authorization requirements for Caresource. Dr Trickett said she knows she should write Butrans, but when she does, it seems to not be covered. I asked her to focus on commercial insurance patients for the "path of least resistance" for insurance.
PPLPMDL0020000001	Parma	OH	44129	1/9/2013	Spoke with pharmacist, Heath, & asked about any policy he knows of with Wal-Mart that prohibits the pharmacies from accepting savings cards for medications. He said he has never heard of this. I asked about Butrans stocking. He said he recently filled a prescription for someone & confirmed that they do stock it. I asked what feedback he has gotten, but he said he has not heard anything specifically so far. Reviewed appropriate patient type. Also showed Butrans & OxyContin savings brochures & asked if they needed any. Heath checked the shelves & said they have a large stack of both right now. I let him know the program would be updating soon & I would share details when I return.
PPLPMDL0020000001					

	Parma	OH	44129	1/9/2013	Dr Chagin said he has been on vacation & doesn't think he has written Butrans for anyone lately. He also said he is still sending more patients to pain management. I reminded him of previous conversations when he has told me that he has some patients who he feels are in legitimate pain who he does maintain himself. He said this is true. Positioned Butrans for appropriate patients who fit the indication & who could benefit from once weekly transdermal dosing. He said he would try. Reminder for OxyContin q12h for appropriate patients beyond the Butrans range.
PPLPMDL0020000001	Bedford	OH	44146	1/9/2013	Dr Moufawad showed me his REMS packet for Butrans & OxyContin & asked me if it is obligatory at this point. I told him it is not mandatory, but is encouraged. He said he thinks it is a great program & that higher restrictions on prescribing opioids will be very helpful in reducing abuse & diversion because he believes it will help cut down on physicians prescribing inappropriately. He said many physicians don't realize that short-acting opioids are just as dangerous for abuse/addiction/diversion as long-acting opioids. I agreed that caution & screening should be utilized in prescribing opioid medications & that they should only be used for appropriate patients. Dr Moufawad said he would prefer using more long-acting opioids because there are more "problems" with Vicodin & Percocet. I advised that the same amount of caution be used in prescribing long-acting opioids, including Spoke to Amy about Butrans and OxyContin and asked her if she knew of Butrans and she said she did but has not filled it in this location. I discussed appropriate patients for Butrans and what I am speaking to physicians about when it comes to appropriate dosing, indication, patients types. I asked how much OxyContin they dispense? Amy said tons. She said the most common dose if 40mg followed by 80mg. She asked me if I call on primary care doctors? I told her yes and she said that they see OxyContin from Bonyo, Amanabu, Petrus, Hazra are prescribing the most. I asked about the age group of patients for OxyContin? She said all age ranges from young adults to elderly. I explained the indication, dosing and dosed at Q12h.
PPLPMDL0020000001	Bedford	OH	44146	1/9/2013	Spoke with Steve (pharmacist) & offered Butrans & OxyContin savings cards. He said he cannot accept savings cards anymore. I asked him to elaborate. He said Wal-Mart's new policy is that they cannot accept any savings cards from reps anymore because it is "a kickback". He added that they can accept the cards from patients when they are filling a script (ie if the patient gets the card from their doctor), but can't take them from us anymore. I asked if that is just this location or all of them. He said as far as he knows it is a new corporate policy & that is his understanding of the policy. I asked if they are able to print savings cards from the internet for patients when they bring in prescriptions. He said they can do that. Told him about Butrans & OxyContin savings online.
PPLPMDL0020000001	Akron	OH	44320	1/9/2013	I told dr to identify patients appropriate for Butrans. I discussed the Ultram and vicoden patient profiles and asked him to prescribe Butrans for those patients the next time they are in and he is considering a dose adjustment. Dr said that he knows he needs to prescribe it and wanted me to remind him the coverage. I discussed the commercial insurance plans as well as caresource and BWC. Dr said he will look for patients
PPLPMDL0020000001	Parma Heights	OH	44130	1/9/2013	Placed a follow-up phone call to D.O.N., Katherine Myers 440-888-5900 to set up appt. to discuss educational opportunities and schedule in-service. Spoke w/ receptionist, Helen who said Katherine was gone for the day. Left msg. on her voicemail
PPLPMDL0020000001	Munroe Falls	OH	44262	1/9/2013	I asked dr if the success she has seen from Butrans to this point has inspired her to prescribe more Butrans. Dr said her one patient is a teacher and said Butrans has helped him immensely. Dr said she does plan on using Butrans more when she sees that it fits. I reviewed that Butrans is for patients who may need a dose adjustment on Ultram or vicoden and told her that patients Naive to opioids can use Butrans and to be started on the
PPLPMDL0020000001	Twinsburg	OH	44087	1/9/2013	Placed call to D.O.N., Shawn McMahon to discuss pain & pain management educational opportunities. N/A, left msg. on his voice-mail.
PPLPMDL0020000001	Mayfield Heights	OH	44124	1/9/2013	Placed a follow-up phone call to Staff Development Coord., MaryAnne. Spoke w/ receptionist, Teresa George, she said, "I will try and call her phone, I am not allowed to page." MaryAnne did not answer.No voice-mail available left msg. w/ Receptionist.
PPLPMDL0020000001	North Olmsted	OH	44070	1/9/2013	I e-mailed D.O.N., Erica Wood, as she requested to get dated & times for in-service on pain management, as we discussed on 12/13.
PPLPMDL0020000001	Cleveland	OH	44135	1/9/2013	Place follow-up phone call to D.O.N. Dan Rivera to discuss pain and pain management educational opportunities at no cost. N/A left msg. on his voice-mail. 216-251-3300
PPLPMDL0020000001	Beachwood	OH	44122	1/9/2013	Placed follow-up phone call to DOM, Stephanie Forsythe to discuss pain & pain Management educational opportunities. N/A, left Msg. 216-831-4303
PPLPMDL0020000001	Parma	OH	44134	1/9/2013	Placed phone call to ADON Cheryl Sigley to set up appt. to meet and schedule educational in-services. 216-661-6800 ext 414 N/A, left msg. on her voice-mail.
PPLPMDL0020000001	Richmond Heights	OH	44143	1/9/2013	I received a phone call from Marketing Coordinator, Maria Faraci confirming an in-service 2/21 at 9:30. This is an in-service for an open-house that the Waterford of Richmond Hts. will be holding. Approx. length will be 30 minutes. Topic: Pain
PPLPMDL0020000001	Parma	OH	44129	1/9/2013	Dr Taylor said a patient who she started on Butrans preferred the 5mcg dose to the 10mcg because he felt the 10mcg was "too much". She asked if patients can wear two patches at a time, adding that a patient had wanted to do this & she told them they couldn't. I told her this has not been studied & is not recommended, adding that she did the right thing in telling the patient to wear only one patch per week. Discussed dosing, titration, & ability for patients to use supplemental analgesia. I asked her to continue to try patients who are appropriate on Butrans & she agreed. OxyContin reminder.
PPLPMDL0020000001	Stow	OH	44224	1/9/2013	I asked Christa(pharmacist) about Butrans and asked her if she is familiar with it? She said she is and had dispensed it three or four times. I asked if she remembered the prescribers and she did not. Christa asked if Butrans was for pain or addiction. I explained what Butrans is and discussed the indication, dosing, CII.
PPLPMDL0020000001	Copley	OH	44321	1/9/2013	I told dr that he needs to gain clinical experience with Butrans before he can pass judgement. I told him about two patient types in the patient profile piece and asked him if he had patients like that? Dr said he does but cost may be a problem. I told dr that he needs to gain experience first and I will work with his staff to discuss coverage. Dr said ok.
PPLPMDL0020000001	Akron	OH	44302	1/9/2013	quick window call with Dr Petrus and Rhonda about OxyContin use. I asked when they get a referral for pain management what the patient is on typically when they come in? Rhonda said they are typically either on one or more short acting products most of the time in high doses and they have to adjust from there. Dr said that OxyContin is typically a go to for patients that need a long acting product for their condition or taking too many pills. Rhonda said that cost is always a factor so they use a lot of methadone and ER morphine because it is so cheap. Rhonda said they needed copy cards and will continue to use it for patients that meet the indication. I told Rhonda to keep Butrans in mind for those patients in more moderate level pain who are in chronic pain as a CII, 7 day transdermal patch.
PPLPMDL0020000001	Akron	OH	44303	1/9/2013	Email recent requesting a meeting to discuss pain management and risk management educational resources. This was a follow-up to Dr. Mary Cook meeting with Dr. Asbury at the American Osteopathic Association meeting in San Diego (October 2012). Dr. Asbury's focus is geriatrics and Long Term Care.Note: Incorrect email address when initially sent in November 2012.
PPLPMDL0020000001	Westlake	OH	44145	1/9/2013	Made a drop-in visit to speak w/ D.O.N., Stephanie Finkenthal. Spoke w/ receptionist, Shirley Toth, introduced myself and purpose of visit. re; pain & pain management educational opportunities at no cost. Shirley stated, an appt. is required. She also stated, "We are in the middle of changing from SunHealth to Genesis HealthCare." Left BC and PAP handouts.
PPLPMDL0020000001	Parma	OH	44134	1/10/2013	Spoke with floater pharmacist- reviewed Butrans dosing. She said she has filled Butrans prescriptions, but not very many & it has been at various location. I asked if she has had any discussions with patients or providers regarding Butrans. She said not that she can think of. Reviewed appropriate patient type/range & discussed trial/savings cards. Also showed OxyContin savings cards. She said to check with Margarita when she returns.
PPLPMDL0020000001	Stow	OH	44224	1/10/2013	Quick hit on Butrans and gave her Butrans indication, CII, 7 day transdermal and appropriate patients. I asked dr if he knew about it. I told her that I want to bring her up to speed about the product and how it will fit in her practice.
PPLPMDL0020000001	Stow	OH	44224	1/10/2013	I asked dr Bailly what knowledge he has of Butrans and if he has used it? Dr said he has used it for one patient and does know about it. I provided review of dosing, placebo patch, CII, 7 day transdermal patch, titration, appropriate patients and copy cards. Dr Bailey said that his only problem is that he likes Butrans for his older patients but it is not covered on Medicare and it makes it too expensive. I told dr I understood but to focus on commercial patients who meet the indication. Dr said he will continue to find patients for it under 65.
PPLPMDL0020000001	Maple Heights	OH	44137	1/10/2013	Spent time reviewing Butrans appropriate patient type with Dr Gene & Dr Dale. They both said they like the idea of Butrans. Dr Gene said he has had a patient on Butrans who did very well. He added that the problem with pain medication is that it is difficult to tell who is legitimate & who is not. I agreed that this can be difficult to assess, adding that they should continue to remain critical about screening patients & should only prescribe for those who are legitimate. I asked if they would agree that there are legitimate patients in their practice who are taking up to 40mg hydrocodone or oxycodone who could benefit from Butrans's once weekly dosing transdermally. Both Dr Gene & Dr Dale said they have patients & both said they would try to find some patients. OxyContin savings program reminder.
PPLPMDL0020000001	Maple Heights	OH	44137	1/10/2013	Spent time reviewing Butrans appropriate patient type with Dr Gene & Dr Dale. They both said they like the idea of Butrans. Dr Gene said he has had a patient on Butrans who did very well. He added that the problem with pain medication is that it is difficult to tell who is legitimate & who is not. I agreed that this can be difficult to assess, adding that they should continue to remain critical about screening patients & should only prescribe for those who are legitimate. I asked if they would agree that there are legitimate patients in their practice who are taking up to 40mg hydrocodone or oxycodone who could benefit from Butrans's once weekly dosing transdermally. Both Dr Gene & Dr Dale said they have patients & both said they would try to find some patients. OxyContin savings program reminder.
PPLPMDL0020000001	Solon	OH	44139	1/10/2013	Placed call to D.O.N. Judith Sawtner,introduced myself and purpose of call. Re: to discuss pain & pain management educational opportunities at no cost.Meeting set for 1/29 @ 2PM
PPLPMDL0020000001	Cleveland	OH	44128	1/10/2013	Recv'd a phone call from RoseAnne Howell requesting to set up in-service on Pain & Pain Assessment for all STNA's. She stated that the D.O.N., Donna Silasen would like this done as soon as possible on a Wednesday." They want to begin w/ the STNA's then do an in-service for the nurses later. In-Service scheduled for midnight on 1/22 and 2PM & 4PM on 1/23. Approx. 50 total will be in attendance. Will do 3 in-services at each designated time, on all 3 floors. 216-475-8880Rec'd a 2nd phone call from RoseAnne Howell requesting a third in-service day of 1/25 @ 2PM & 4PM, (Scheduled)
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	1/10/2013	I told dr to ensure she is initiating Butrans on the appropriate dose and showed her the slide scale. Dr said she still typically starts on 5 and titrates from there. I asked her how soon after the starting dose does she see the patient back to adjust the dose? Dr said about 3 weeks or she will tell the patient to call in if they feel they need more. I told dr that Butrans can be titrated every 72 hours and the patient may not be getting enough analgesia if the patient was on a higher amount of short acting. Dr said she understands and will try to keep in mind.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	1/10/2013	I told Amy that Butrans as a partial mu agonist allows patients to take short acting opioids like vicoden as needed as supplemental analgesia. Titration is 72 hours once steady state is achieved. Amy said that its good to know because patients complain about needing something for breakthrough pain. Amy said she has not filled any new prescriptions. I asked if she has filled any new OxyContin and she said no but does have patients on it. Left her with dosing information.
PPLPMDL0020000001	Parma	OH	44129	1/10/2013	Myra said she is really trying to use Butrans more. She asked me to go over insurance coverage with her & she took notes again as I told her about formularies. She also said the biggest problem in getting patients to try Butrans is that the patients have the mindset that they need to take pills & they are very resistant to other options. I told her that patient education & counsel is important & that it might take more than one conversation with the patient to get them on board with the idea, but if she does feel that Butrans is the right medication for the patient, it could be worth the time spent. She agreed. Myra said one of the patients who she had on Butrans reported that he felt light-headed after sitting too close to a heater in his neighbor's house. He wished to discontinue after this experience. She said again she is really trying to get more & more patients on Butrans, adding that she wanted more kits. I let her know I have ordered them for her & asked her to be sure to give the savings cards out in the mean time. She agreed. She asked what starting dose she should use for someone taking 7.5 hydrocodone 5 times per day, I showed her chart & told her 10mcg would be the recommendation, also going through titration information. She said that is what she has been doing- starting at 10mcg & titrating to 20mcg. She said she just wishes patients would come down from their short-acting when she titrates the Butrans upward. I told her that would be up to her & each patient
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	1/10/2013	Gave overview of Butrans and discussed the patient savings cards and insurance coverage. pharmacy extremely busy.
PPLPMDL0020000001	Parma	OH	44134	1/10/2013	Dr Hernandez said he really does like Butrans. He asked me for more savings cards as he was out of them & he went back into a patient room to give someone one. Dr Hernandez said he is starting this patient today. Dr Hernandez said he has had such good experience with Butrans. He said he does have a female patient who is on Butrans who called saying she is pregnant. He asked me if he should take off Butrans or not, adding that he does not think there is any reason to do so with buprenorphine. I showed him FPI Pregnancy section, letting him know that it has not been studied, but Butrans is Pregnancy Category C. Dr Hernandez said he would keep the FPI for reference. I told him he would really want to assess whether or not the benefits would outweigh the risks. Reviewed OxyContin savings program.
PPLPMDL0020000001	Parma	OH	44129	1/11/2013	Dr Gigliotti said he has given out some Butrans cards lately. I asked if he meant savings cards or the actual patient experience kits I gave him. He said he forgot about the kits & has been giving just the cards. I reviewed with him the difference between the kit & the savings card, encouraging him to give the kits, but letting him know he is still helping to reduce the out-of-pocket cost for patients by giving them the savings cards. I asked him to identify more Butrans candidate & give them the kits. He said he would. I reminded him that we also have a savings program for OxyContin & reviewed the details with him regarding usage & eligibility.
PPLPMDL0020000001					

PPLPMDL0020000001	Independence	OH	44131	1/11/2013	Stopped Dr Jack with Butrans savings card that I got from his holder. I showed him the cards. He said he has been giving them out & asked if they are "showing up". I asked him to continue to identify appropriate patients for Butrans, adding that he probably will even see a few today. He said I was probably right.
	Parma	OH	44129	1/11/2013	Reviewed Butrans dosing & titration with Dr Rossi. Went over choosing the recommended starting dose based on the patient's current opioid therapy. Discussed Butrans as a potential option for appropriate patients suffering from pain from conditions such as spinal stenosis or osteoarthritis, taking up to 40mg equivalent hydrocodone or oxycodone per day chronically. Discussed Butrans being the only CIII long-acting opioid analgesic & advised of abuse/addiction potential. I asked Dr Rossi to think of someone commercially insured in her practice like this & prescribe Butrans for them if appropriate, giving them a trial/savings card to minimize out-of-pocket expense. She said she would see. Positioned OxyContin as a q12h form of oxycodone.
PPLPMDL0020000001	Akron	OH	44312	1/11/2013	Discussed Butrans with Karla(pln). Discussed indication, CIII, 7 day transdermal patch, appropriate patients and titration. Gave initiation and titration guide to Dr Londorf
PPLPMDL0020000001	Northfield	OH	44067	1/11/2013	Spoke with technician who said their pharmacist was unavailable. Showed Butrans & OxyContin savings cards & offered both to her. She checked their shelves & said they could use some for Butrans. I asked about stocking & she said they do have it. I asked if she gives out the savings cards or if the pharmacists do that. She said they all do, it just depends on who gets to it first.
PPLPMDL0020000001	Akron	OH	44312	1/11/2013	began to discuss the introduction of the Butrans patient experience kits and Dr said he was really short on time. Told dr to continue to prescribe Butrans for his patients on short acting medications to Butrans.
PPLPMDL0020000001	Independence	OH	44131	1/11/2013	Passed back OxyContin savings cards & asked him to give them to patients who do not have government insurance when he is giving an OxyContin prescription, especially a new patient start. He said that was "good" & told me again about the one patient who he has who is on Butrans, doing well. I asked if he thought he had other patients like that who could benefit. He said probably, but they don't have the right insurance.
PPLPMDL0020000001	Cleveland	OH	44106	1/11/2013	Placed follow-up phone call to NE, Marcia Wiggins, 216-721-1400 N/A, Left msg on her voice-mail.
PPLPMDL0020000001	Cleveland	OH	44102	1/11/2013	Placed a follow-up phone call 216-634-7400, to D.O.N., Colleen Wilson to discuss pain & pain management educational opportunities. N/A left msg.
PPLPMDL0020000001	Fairlawn	OH	44333	1/11/2013	Placed a follow-up phone call to D.O.N. Kathleen Franey to discuss pain & pain management educational opportunities at no cost. I spoke w/ Kathleen and informed her of the purpose of my call. She forwarded me to Staff Development Coordinator, Michelle Williams, who handles education. Kathleen stated, "Michelle is not in today, but leave her a msg and she will get back with you." Left msg. for Michelle Williams.
PPLPMDL0020000001	Akron	OH	44319	1/11/2013	Told dr that when he has a vicoden patient in for a follow up appointment and they tell him that their pain is increasing and they need more vicoden to prescribe Butrans if they meet the indication. Dr said he knows where to prescribe it and cost is a factor. I asked him where and he said all plans. I told him to prescribe it first then tell me its not covered.
PPLPMDL0020000001	Mogadore	OH	44260	1/11/2013	Gave Jerry Butrans overview and gave all key selling points. Jerry said they have filled it b ut not much and said that they are seeing a lot of short acting opioids like percocet and vicoden. I gave him dosing info and copy card info.
PPLPMDL0020000001	Akron	OH	44312	1/11/2013	Spoke to Mikel(pharmacist) and asked him what experience he has with Butrans? Mike said that he knows about it and has dispensed it a number of times. I asked him if he knows who has prescribed and he could not remember. I reviewed indication, dosing, appropriate starting dose, titration, and copy cards.
PPLPMDL0020000001	Parma Heights	OH	44129	1/11/2013	Spoke with pharmacist Carol & reviewed savings cards for Butrax & Oxycontin. She asked for more OxyContin cards as she was out of them. I reviewed eligibility requirements for usage & details of the program. She asked if patients with any insurance can use the cards. I told her again that patients with any type of government insurance (including Medicare, Medicaid, TriCare, & BWC) cannot use the cards, but patients with commercial insurance or cash-paying patients can use the cards. I asked about Butrans stocking. Cathy said they usually do carry it but she did not see it on their shelf, so it was either dispensed or it expired & got sent back. She said she can order it for someone if necessary & get it in the next day usually.
PPLPMDL0020000001	Independence	OH	44131	1/11/2013	Roman said all his patients with total joint replacement surgeries go home on OxyContin plus Percocet for breakthrough pain. He said this is by far the most effective regimen. He said his tickets coverage is better now than when he last talked to me. Reviewed coverage with him. Also discussed savings program. He & his nurse, Colleen, said that they wish there was a way for the hospital to start the prior authorization process for patients for OxyContin when they leave the hospital because the surgeries are performed on Tuesday & patients go home on Friday, so if a prior authorization needs to be done, the patient is without the medication over the weekend. Colleen said they do not mind doing the paperwork, it is just that the patient ends up having to wait so she & Roman said they would talk to the hospital case managers to see if something can be done. I let them know I would follow up & bring them formulary grids as they both said they would take them to the hospital & they would be helpful. Roman said he has given some Butrans. I asked what makes him try it for some patients & not others. He said if he has someone on chronic Vicodin, he thinks that is a Butrans candidate. Discussed appropriate range of patients.
PPLPMDL0020000001	Fairlawn	OH	44333	1/11/2013	Called and spoke w/ D.O.N. Deborah Shafer, to schdulle in-service on pain & pain management. Debroah stated, "Everything has changed, since we talked last." She proceeded to explain that the facility has been sold, they were under TCM and now they have been bought by Legacy Health Care of Chicago (not Ohio). She has been informed not to schedule anything including education. Everything is on hold and in review, including vendors etc. Deborah said to give her 90 days for the turnover, before calling her. She said their name will be changed to Orchards of Ridgewood Healthcare Center.
PPLPMDL0020000001	Cleveland	OH	44122	1/11/2013	Placed follow-up phone call to Connie Louis, N/A. Re-routed to the operator. I asked to speak w/ a NE or Staff Development Coordinator. I spoke with Francine Young who is in charge of Education. I introduced myself and purpose of the call. She is interested, but was not in her office near her calendar and asked if I could call her back later today to schedule an appt. to meet with her. She will be in till 5PM. 216-752-3600 ext. 7066
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	1/18/2013	Completed an in-service on Pain Assessment for the Nursing Staff, consisting of the D.O.N., RN's & LPN's. A total of 14 were in attendance.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	1/18/2013	Made drop-in visit to Nancy Strasser, in Staff Development to talk w/ her about scheduling a date for an in-service on pain & pain management. She was unavailable. Called and left msg., on her voice-mail 330-945-9797
PPLPMDL0020000001	Cleveland	OH	44130	1/18/2013	Spoke with Chuck, floater pharmacist, & showed Butrans & OxyContin savings cards. Reviewed eligibility requirements. He checked stock & said they could use some OxyContin cards, so I provided them. Inquired about Intermezzo stocking. Chuck said he has never seen it in any of the stores. Reviewed Intermezzo pharmacy bullets & indication. He said he doesn't think anyone has heard of it.
PPLPMDL0020000001	Cleveland	OH	44130	1/18/2013	Quick call- Dr Kansal said he hasn't written either of my products since he saw me last. He quickly added that he is sure he will, I just have to give him time. I asked him to tell me more, but he said he didn't have time today. Spent time with Dorothy & Sharon & reviewed savings information for Butrans & OxyContin. Also delivered Intermezzo indication & asked what they thought Dr Kansal's interest level would be. Dorothy asked if it was expensive. I told her like all medications, it depends on the insurance. She said to talk to Dr Kansal about it next week.
PPLPMDL0020000001	Cleveland	OH	44130	1/18/2013	Delivered Insight 1 to Danielle, pharmacist, & asked her thoughts on it. She said she actually has never thought about it. She said she notices patients being switched to long-acting opioids from short-acting but hasn't noticed any switching back or discontinuing. She said it is not that it doesn't happen, it is just that she does not pay attention enough to that specifically. I asked if she ever notices difficulty in patients adjusting to the change of going from a short-acting opioid analgesic to a long-acting option. She said she can understand why it would be challenging for physicians to do this, but hasn't herself noticed anything. I asked about Intermezzo stocking. She said they have both strengths on the shelf but have not yet dispensed it. She said she has heard of it but did not know much about it. I showed her pharmacy information brochure & reviewed key points. She said she would keep an eye out for activity.
PPLPMDL0020000001	Richmond Heights	OH	44143	1/18/2013	I e-mailed Maria Fiarici and informed her that upon returning from the Nat'l Meeting, that I was told that at this time I am not able to present an in-service to the community. She thanked me for letting her know and said that she would remind the D.O.N. on in-services for their staff.
PPLPMDL0020000001	Akron	OH	44333	1/18/2013	Dr told me that after our last discussion about appropriate starting dose that he will now be using the 10mcg when it's appropriate instead of starting all patients at the 5mcg. I asked why and dr said that his patients are telling him that it doesn't work well enough. Dr admitted that I was right in telling him how to approximate the correct starting dose based on the initiation and titration guide. I reviewed the new titration piece and told him to use the 20 mcg dose where appropriate. Dr said he needed copy cards and information guides in his Kent office which I left. <font color=blue>-<b>CHUDAKOB's query on 01/19/2013</b>-</font>What happened to the insight. I sounds like you got time with him. Just because he led off the conversation, doesn't mean you cannot direct the conversation to the insight.<font color=green>-<b>REICHL's response on 01/21/2013</b>-</font>My intent was to lead with it but got side tracked with the discussion. Dr was also an hour behind and his nurse was pushing him into the next exam room as we talked. Next time <font color=blue>-<b>CHUDAKOB added notes</b>
PPLPMDL0020000001	Parma	OH	44129	1/18/2013	Delivered Insight 1 to Dr Khoobail. He said that is why he doesn't really write long-acting opioids & then told me about how he hates that type of patient. He said it is difficult to switch patients over to long-acting opioids once they have

PPLPMDL0020000001	akron	OH	44333	1/21/2013	Led with the insight statement and asked dr what that would mean to his practice? Dr said that his patient base doesn't support many patients on long acting opioids however since he had joined Uzh that he is hoping to gain many new patients. I asked dr what he does to ensure patients maintain their medications? Dr said that he will continue to do his concierge service to make house calls and he can't think of a better way to hold his patients accountable and have the personal touch. I told dr that Purdue hold many resources that he can use to strengthen the bond between his patients and Purdue medicines. I asked dr if he used any of the BPEP kits and how that is a good start. Dr said he has not but intends to. I provided review of Butrans patients provided OxyContin patient types. I asked for continued use of Purdue products and dr agreed and said I have already been a great help with him expanding his use of extended release products.
PPLPMDL0020000001	Parma	OH	44134	1/21/2013	Met w/D.O.N., Rena O'Hara discussed Pain & Pain Management Educational Opportunities at no cost. Presented PAP materials. Also briefly discussed branded educational in-service opportunities. Rena liked the handouts and stated, "this is something that we certainly can benefit from." I confirmed the # of beds, she said they currently have 209 occupied beds, 60 being skilled and the remaining LTC. I asked her what % of their pain therapy is Opioids? she stated, "a lot, we also use Tramadol and Percocet as well, we don't use hardly any duragesic, mainly all PO meds. we do use heavy pain therapy on our skilled unit." I confirmed the CPP. Rena said they just changed from Omnicare to Skilled Care Pharmacy in Twinsburg. NP's are on staff, along w/ Kaiser Physicians & NP's. Rena called the Staff Development Coordinator, Linda Belford and asked her to join our meeting. I explained the educational opportunities to her. Rena asked that Linda work with me in scheduling educational in-services. She prefers the Nurses be separate from the STNA's. Linda stated, "I will look at my calendar and call you to set up in-services on pain, pain assessment and the laxative line at first." Left my BC and PAP handouts. Rena also suggested that I contact their sister location, Pleasantview Care Center and offer this opportunity. (I added them to my target list and will stop by after completing this call)
PPLPMDL0020000001	Parma	OH	44129	1/21/2013	Made drop-in visit, spoke with receptionist, Sharon. Introduced myself and purpose of visit, I asked if the D.O.N. was available? She stated, "that our ADON, Jasvir Brar handles the education, but an appt. is needed. Left my BC and PAP handouts. Placed a phone call to the ADON, Jasvir Brar, N/A, left msg. 4408874208
PPLPMDL0020000001	Westlake	OH	44145	1/21/2013	Placed a Follow-up phone call to D.O.N., Sue Williams, to schedule appt. to meet and discuss pain & pain management education opportunities. 440-871-0500N/A, Left msg. on her voice-mail.
PPLPMDL0020000001	Fairlawn	OH	44333	1/21/2013	Jessica and Sue both said that they continue to dispense and refill Butrans fairly often. Discussed appropriate dosing, and appropriate dosing. Explained Intermezzo indication, dosing, and copy cards. Jessica said they dispensed an Intermezzo last week from Dr Grosebeck and patient got it covered and only paid \$15.
PPLPMDL0020000001	Akron	OH	44305	1/21/2013	Opened with the statistic about discontinuation rates. Dr said he is not over the flu yet and can't talk much due to coughing. I told dr to use his Butrans experience kits and gave review of new Vicodin patient type. Dr said that he will review with my next week. Nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44122	1/21/2013	Placed follow-up phone call to Staff Development Coordinator, Francine Young to discuss Pain & Pain Management Educational Opportunities/in-service. N/A. Left Msg. 216-752-3600 ext. 7066
PPLPMDL0020000001	Richmond Heights	OH	44143	1/21/2013	Placed a follow-up phone call to NE, Aldona Bur to set up appt. to discuss pain & pain management education opportunities. Spoke w/ Receptionist, Darlene, she stated that Aldona was in "Stand Up" Aldona's voice-mail is not working. Left msg. w/ Darlene for Aldona.
PPLPMDL0020000001	Independence	OH	44131	1/22/2013	Delivered insight one to Dr. Sundaram. He said "once they get a taste, they never want to get off it." I asked what he would estimate the discontinuation rate for his practice is for that type of patient, reminding him that we are talking about extended release opioids. He said he has no idea and that he has never thought about that before. He went on to say that patients get in the mindset that they need to take a pill every few hours for their pain. He said this is what makes it difficult to switch patients to along acting opioid option. I reviewed Butrans dosing, titration, and ability for patients to take supplemental analgesia with Butrans. I asked if he typically allows patients to take supplemental medication with their extended release opioid. He said sometimes. I asked if he thought this would help with appropriate patients giving long-acting opioids a fair trial. He said he doesn't know. He said that he does know that once patients are on OxyContin, they never get off the medication. I asked if he really thinks that. He said that's how it seems. <font color=blue><b>CHUDAKOB's query on 02/01/2013</b></font>Ashleigh, remember, that impact comes from the impact on the discontinuation to his staff, himself, and his patients. It really doesn't matter what the rate is because any level of discontinuation will interfere with his ability to adequately manage his patients pain. Show him how this impact his practice. Explain how the tools we have may reduce the impact on his staff. This will be the value you bring. The explain how all of that relates to our product. Make sense?<font color=green><b>APSEGA's response on 02/04/2013</b></font>Sure<font color=blue><b>CHUDAKOB added notes on 02/04/2013</b></font>Thanks Ashleigh!
PPLPMDL0020000001	Cleveland	OH	44130	1/22/2013	Delivered first part of insight 1 to Dr Diab. I asked him if that mirrors what he sees in his practice. He didn't answer. I asked what type of impact this has on his practice. He just said okay and walked into a patient room.
PPLPMDL0020000001	Northfield	OH	44067	1/22/2013	Delivered Insight 1 to Dr Stecky. He said he was already far behind and did not have time to talk today. I told him the reason for me giving him this information was to have a discussion with him that would hopefully help me bring more value and resources when I come see him. He said that was good, but didn't have time today. I gave him Butrans dosing information and intermezzo sheet.
PPLPMDL0020000001	Sagamore Hills	OH	44067	1/22/2013	Lynda came in and said that since Dr. Scanlon has retired, they have had a very large increase in patients who are taking chronic pain medications, sometimes in very high doses. She said that Dr. Scanlon was essentially practicing pain management, and that virtually all of his patients were on some sort of chronic pain medication. She added that none of the remaining practitioners are willing to continue to prescribe these patient's medication. Lynda said that they are referring all of them to pain management physicians from Parma. I asked Lynda if she would mind if I shared an interesting piece of information with her. Delivered insight one. She said that it doesn't seem to her that anyone on any pain medications ever wants to discontinue. She said that they have tried to reduce the amount that some of the patients are taking and many of them become belligerent. I reminded her that while there are people who are not legitimately in pain trying to get pain medications, there are also patients truly suffering who can benefit from opioid medications. I reminded her that Purdue offers many tools and resources to help practitioners protect themselves and their practice from patients who do not have good intentions. I told her about Partners Against Pain. She said she would use this information. Delivered Intermezzo indication. Lynda said she was instructed by the physicians not to get her DEA number, so she has not done this and cannot prescribe any scheduled medications.<font color=blue><b>CHUDAKOB's query on 02/01/2013</b></font>Doesn't look like she could prescribe opioids if she wanted to if she has no DEA. How do you see her interacting with physicians regarding opioids?<font color=green><b>APSEGA's response on 02/04/2013</b></font>This was the first time she told me that she doesn't intend to get a DEA number. I think she would say something if she thought it was warranted to use opioids when seeing a patient as the physicians there still prescribe.<font color=blue><b>CHUDAKOB added notes on 02/04/2013</b></font>OK. Sounds like you have a good handle on it.
PPLPMDL0020000001	Northfield Center	OH	44067	1/22/2013	Spoke with Paul, pharmacist, and reviewed intermezzo pharmacy selling points. He said he has maybe seen one prescription for it. I gave him new savings cards for each medication and explain how each one works and eligibility requirements for usage. He said they always look for each medication to see if there is a savings program for them, so the cards would be very helpful.<font color=blue><b>CHUDAKOB's query on 02/01/2013</b></font>Remember that Intermezzo is on relay health and with limited savings cards you might want to save them for your physicians or independent pharmacies. It appears you didn't get that many Intermezzo cards. Am I wrong on this?<font color=green><b>APSEGA's response on 02/04/2013</b></font>No. You are correct.<font color=blue><b>CHUDAKOB added notes on 02/04/2013</b></font>OK. Thanks
PPLPMDL0020000001	Parma	OH	44134	1/22/2013	Spoke with Ashley, pharmacist, and showed pharmacy selling points. She said she can remember that they ordered it for a female patient a while back. She said she doesn't know if the patient liked it or not. Reviewed savings programs/cards for all three medications. She said they have a lot of customers on Butrans, most of which have BWC.
PPLPMDL0020000001	Akron	OH	44310	1/23/2013	I led with insight. I asked Dr. what affect a statistic like that has on his practice and what his experience our experiences are with discontinuation rates of long-acting opioids. Dr. said that he does not have much discontinuation rates when he moves his patients to long-acting opioids. I asked Dr. why that is an doctor stated that when he moves a patient to along acting opioid from an immediate release opioid he spends a lot of time discussing that option with the patient. Doctor did say that getting long-acting opioids approved for insurance is becoming more and more difficult which makes it more difficult for him and his staff to appropriately place patients on the correct medicine that is necessary. I discussed the option of Butrans and the resources that are available for Butrans and also intermezzo and introduced intermezzo to Dr. and he seemed very intrigued with the low doses Oldham middle the night awakening product. I reviewed indication patient types dosing and limitations of use with Dr. and left him with a Internet so kit as well as discussing co-pay cards and also reviewed Butrans patient types and dosing for appropriate patients.
PPLPMDL0020000001	Parma	OH	44129	1/23/2013	I delivered first sentence of Insight 1 & asked Dr Gigliotti what his thoughts were on that finding. He said that opioid medications are difficult & the patients they are used to treat can be difficult as well. He added that converting patients from short-acting opioids to long-acting options in general is not easy. He also said that this is compounded when switching delivery systems, such as a change from a short-acting oral opioid to a transdermal like Butrans. I asked why let the patient dictate what they want & give them what you as the physician thinks is the right medication. He said he wishes it was that easy, adding that patients have a way of getting what they want- either by saying they tried something & that it didn't work or that they had an adverse reaction to it. He said this is just one of the things that makes it so difficult. I asked if, thinking of his Butrans patients, any of them have discontinued. He said if they have, they have done it on their own, not because he has told them to stop. I asked how often it happens that a patient does this without consulting him. He said all the time. I asked if he is still writing OxyContin for appropriate patients & he said he is, although he wishes he didn't have a DEA number most of the time.
PPLPMDL0020000001	Akron	OH	44312	1/23/2013	Dr walked into lunch and immediately wanted to tel me about how he initiated a patient on Butrans. Dr said that the patient was on Vicodin 20mg and still complaining about pain. Dr said he had good insurance and he initiated on the 10mcg dose. Dr asked if he initiated properly? I showed dr the patient profile Nancy which was very similar to his patient. I asked dr why he knew the patient was appropriate for Butrans. Dr said he remembers our conversations and knew from our discussions that it was a good patient. I asked dr if he gave the patient a copy card? Dr said he was not sure. I explained the new card with the \$50 savings and 28 days potentially free card. I asked dr to identify more patients like the last one and to initiated on Butrans. Dr said he plans to. I discussed the statistic with dr and asked him if that is something he experiences in his practice? Dr said life has become very difficult in trying to manage his patients pain. I told dr that I have many resources available for my products to help to strengthen his patients bond with their medications such as copy cards, pain diaries, Butrans rotation video, etc. dr said that is good but he is trying to avoid long acting narcotic prescriptions. Dr said he is getting Percocet and OxyContin names out of his vocabulary because it is causing him too much grief. I introduced intermezzo and discussed all key points. All drs said they are glad to see a product like it especially in low doses.
PPLPMDL0020000001	Broadview Heights	OH	44147	1/23/2013	Spoke with Jason, pharmacist/pharmacy manager, & reviewed pharmacy information for Intermezzo. He said they have not seen anything for it yet. Reviewed dosing & savings program. Also gave new savings cards for Butrans & OxyContin & explained card utilization. Jason said the OxyContin cards would be particularly helpful.. Reminded him of eligibility requirements. He said they do not currently stock Butrans because they don't have anyone on that either. Reviewed appropriate patient type/range.
PPLPMDL0020000001	Broadview Heights	OH	44147	1/23/2013	Spoke with Jason, pharmacist/pharmacy manager, & reviewed pharmacy information for Intermezzo. He said they have not seen anything for it yet. Reviewed dosing & savings program. Also gave new savings cards for Butrans & OxyContin & explained card utilization. Jason said the OxyContin cards would be particularly helpful.. Reminded him of eligibility requirements. He said they do not currently stock Butrans because they don't have anyone on that either. Reviewed appropriate patient type/range.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	1/23/2013	Spoke with Mary about all three products. Explained OxyContin dosing and asked about dispensing patterns. Mary said they do not fill much at this location but do in Springfield where she came from. I explained appropriate patients and new \$90 copy cards. Introduced Butrans and Mary said she has not dispensed it and did not know much. Provided all key selling messages and review patient types and initial starting doses. Introduced Intermezzo and explained key points on pharmacy sell sheet. Explained patient selection, indication and copy cards with 5 free pills. Mary said she will use that and sees prescriptions coming. Mary thanked me for coming in and being so thorough with the product information.
PPLPMDL0020000001	Akron	OH	44312	1/23/2013	Discussion along with dr Wells about his Butrans patient last week. Discussed Butrans indication, appropriate patients, approximate conversions from IR opioids, titration, need for supplemental analgesia and copy cards. I also discussed application sites, appropriate site prep and to avoid external heat sources. Dr said he will find patients. Introduced Intermezzo and discussed indication, patients, driving study, and dosing and dose adjustments per selling aid.
PPLPMDL0020000001	Akron	OH	44320	1/23/2013	I asked the pharmacist which IR opioids they dispense most? The pharmacist said that they dispense a lot of Vicodin and Percocet. I asked if they see the patients continuing to go up on the doses? The pharmacist said yes. I explained how Butrans is a CIII 7 day transdermal patch for patients failing on IR opioids. Explained copy cards and appropriate starting dose. I asked about OxyContin and appropriate patients. Introduced Intermezzo and reviewed pharmacy flash card.



	Bedford	OH	44146	1/23/2013	Spoke with Oleg, pharmacist, who said he has really not seen any activity for Butrans with the exception of one person who had a prescription but wasn't able to get it due to managed care. I delivered Insight 1 & asked if what he sees in his pharmacy mirrors what that statistic says. He said he honestly finds that all his customers generally stay on the long-acting opioids. I asked about patients who were taking short-acting therapies for awhile, then switching to long-acting- does he notice discontinuations there. He said he has not. Gave him new savings cards & explained each program. He said most or all of the people they have there who take opioids are on some sort of government insurance, although occasionally, he does see a 3rd party plan. He said he can think of one customer in particular who would be interested in Intermezzo. Oleg asked if a patient is on Ambien CR if they can also take Intermezzo. I told him this is not recommended. I gave him the FPI for his reference.
PPLPMDL0020000001	Munroe Falls	OH	44262	1/23/2013	I led with the insight and asked dr what she thinks about the statistic and how it may affect her and her practice? Dr said that it is a very interesting statement because she thinks that it is important when a patient discontinues a product to ask them why they stopped taking it. She said she will start to gain more specific information from her patients as to why they discontinued their medications. Dr said that they are having to spend less and less time with their patients due to the demand by the AMA and other health agencies. I told her that I have many resources available for my products that may be able to strengthen the bond between the patient and the medication. Dr said she will take whatever an have. I went into the two case study profiles for Butrans and discussed them both and asked for continued business. Dr said she thinks about using Butrans more and
PPLPMDL0020000001	Cleveland	OH	44130	1/23/2013	Spoke with Monica (coordinator at Seidman Cancer Institute) & Val, who had requested OxyContin savings cards for the office. I gave them 3 packages & showed them how the card is used. Also reviewed eligibility requirements for card usage. Monica said they had tried to go online to get savings, but the program was the \$70 savings that she said was expired. She said the pharmacist would not help them with any type of savings cards. I asked the to please call me if they need more & discussed scheduling a lunch with the staff & physicians there. Also reviewed Butrans indication, dosing, & delivery system. They said to schedule something to talk about at
PPLPMDL0020000001	Cleveland	OH	44128	1/23/2013	Completed 6 - 30 minute in-services @ 6am,6:30am,1:30pm,2pm,3:30pm & 4pm for the STNA's on pain & pain assessment. total in attendance was 35. Spoke w/ NE, RoseAnne Howell about future in-services. She stated that she will have me come back, but it will be after the surveyors come. They are expected at anytime. She stated, "I will be in touch."
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	1/23/2013	Spoke to Ashley and discussed Butrans appropriate starting doses and ability and need to titrate when appropriate after steady state is achieved. I asked about OxyContin prescriptions and how often they dispense. Pharmacist said that their numbers have gone down significantly due to reformulation but she does dispense and uses most 20, 30, and 40mg doses most often. Reviewed doses and titration every 1-2 days. Introduced Intermezzo but pharmacist was building a line of patients behind me. Next time.
PPLPMDL0020000001	Akron	OH	44312	1/23/2013	Caught dr as he was leaving for the day and attempted to recte insight and dr said he had 30 seconds. I gave review of OxyContin patient profiles and asked him to use OxyContin instead of titration through Percocet. Dr said he is not using much OxyContin anymore. Told dr about intermezzo indication and dosing. Nothing else learned.
PPLPMDL0020000001	Akron	OH	44320	1/23/2013	I led with insight to dr Bonyo and Dr Adams. Both drs said they are doing their best to not prescribe long acting opioids and to refer out earlier because it becomes too difficult to manage those types of patients. I asked why patients are taking so many IR opioids instead on long acting? Dr Bonyo said that he is trying to be very careful with what he prescribes to who and said he needs to be safe. Dr Adams said she sees how Butrans fits in but the managed care is making it hard for her to identify patients. Dr Bonyo said Butrans is a good product and that maybe it can help reduce the discontinuation rate I spoke about. I asked both drs to use Butrans for patients like Scott and Nancy and explained profiles. Introduced Intermezzo and explained dosing, limitations of use and copay cards.
PPLPMDL0020000001	Akron	OH	44320	1/23/2013	I led with insight to dr Bonyo and Dr Adams. Both drs said they are doing their best to not prescribe long acting opioids and to refer out earlier because it becomes too difficult to manage those types of patients. I asked why patients are taking so many IR opioids instead on long acting? Dr Bonyo said that he is trying to be very careful with what he prescribes to who and said he needs to be safe. Dr Adams said she sees how Butrans fits in but the managed care is making it hard for her to identify patients. Dr Bonyo said Butrans is a good product and that maybe it can help reduce the discontinuation rate I spoke about. I asked both drs to use Butrans for patients like Scott and Nancy and explained profiles. Introduced Intermezzo and explained dosing, limitations of use and copay cards.
PPLPMDL0020000001	Akron	OH	44320	1/23/2013	I led with insight. Dr said she can see how those numbers would be accurate. I asked why and she said because most patients on pain medicines are addicted and its to the short acting medicines like Vicodin and Percocet. I asked her if this is what she has experienced and dr said unfortunately it is. I asked her if resources that I have to offer on my products could help her get her patients more in tune with the medicine they are on? Dr said maybe. I gave quick review of OxyContin and Butrans and provided introduction of Intermezzo. Dr said she will continue to identify the patients for the medicines I have as I have discussed with her and said she sees
PPLPMDL0020000001	Bedford	OH	44146	1/23/2013	Intermezzo as a good product but if its not on Medicaid she probably won't use it. Nothing else learned. Delivered Insight 1 to Dr Moufawad & asked how this compares with discontinuations he sees in his practice. He said that the insight was quite vague, so it is difficult to draw comparisons without knowing more details, such as from which specialties the data was coming from. He said sometimes a discontinuation is good- for example, if a patient had been started from an orthopedist for a month or so following a surgery, a discontinuation would be a good thing. He said he doubts it is by day 35 & he doubts it is 59%. I asked what processes he has in place to ensure that patients who are appropriate for extended-release opioid therapy beyond day 35 stay on those medications. He said appropriate expectations must be set up-front. He said it completely is patient & case-dependent. Dr Moufawad also said if patients are resistant to his suggestions & recommendations to try a long-acting option, he considers discharging the patient, depending on the situation, because he sees this as somewhat of a red flag. He said Butrans is his first choice as a long-acting option & added that OxyContin is considered
PPLPMDL0020000001	Independence	OH	44131	1/23/2013	for patients on higher doses of opioids. I also let him know I am now promoting Intermezzo & that we have started DTC marketing, so he may see an increase in patients requesting it. Delivered Insight 1 to Dr Trickett. She repeated back to me that 59% of patients initiated on some long-acting opioids are no longer on that medication by day 35 & asked if she has that correct. I reviewed that this statistic is coming from an analysis by IMS. I asked her what reason(s) she thinks are the largest contributors to a discontinuation rate of 59%. She said getting a patient to take a long-acting opioid after they have been on short-acting around-the-clock opioid therapy is usually extremely difficult. I asked her to elaborate. She said patients who seem to be on these medications for any length of time seem to have very minimal reason for any pain & they tend to be people who just want to rely on pills to get through their day. She said they usually ask for their short-acting back if she starts them on long-acting. I asked her what she does, as the physician who has taken time to evaluate these patients & determine the appropriate therapy for them, for patients who have this situation. She said she has two choices- she can put the patient back on short acting or the patient will leave her practice & go to a new doctor. I asked if that is business she really wants anyway. She said she would prefer not having that type of clientele. Dr Trickett said she does believe in long-acting opioid analgesics like OxyContin & Butrans.
PPLPMDL0020000001	Warrensville Heights	OH	44122	1/23/2013	Shared Insight 1 with Dr Zivic & asked him how this compares to what he sees in his practice. He said he actually does not find that he has many patients who wish to discontinue due to anything other than common opioid adverse events. He said for whatever reason, he does not have any problems with patients who he initiates on an extended-release opioid staying on that medication. I asked what processes he has in place in his practice that he may attribute this perceived lower discontinuation rate to. He said he doesn't know & that he has never really thought about that. He added that he assumed that other physicians had similar experiences. Dr Zivic said he has always had good success in treating patients with some of the long-acting medications such as OxyContin. He said he can't remember the last time someone discontinued. I asked what type of expectations he sets with patients in the room when he initiates these long-acting options. He said he doesn't know & didn't really understand the question. I asked what he tells patients they can expect when they start on OxyContin. He said he doesn't really tell them anything other than how often to take it. He asked me to leave Butrans information for him because he said he thinks he should be able to utilize it in some patients.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	1/24/2013	Dr came in and told me he has a patient he believes is appropriate for Butrans. I asked him needed confirmation on as an appropriate patient is currently on Vicodin 3 pills a day but has chronic back pain. Dr said he doesn't want to titrate the Vicodin and thought Butrans would be a good option. I showed him the patient profiles along with the initiation and titration guide. I told him that the patient would be a candidate for Butrans and to initiate at the 5 mcg dose. I explained titration and the copay cards. Dr wanted to know pricing and about cost for cash pay. I told dr that cash patients can use the savings card. Dr said he will start using Butrans and said I did a great job of explaining the product and explaining the appropriate patient.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	1/24/2013	Led with insight and dr wanted to just get th fact about my products because he said he was very interested in Butrans because he has heard good things about it. I gave dr all the key selling points and focused on the appropriate patient selection and initial dosing. I used the initiation and titration guide, patient profiles, and titration guide to help him learn about the product. I showed dr the placebo patch and dr asked about potential abuse. I told him that Butrans is an opioid and can still be abused like any other. Dr said he sees it be less a usable due to the route of administration and low dose. I told dr that patient selection is very important and discussed approximate conversions from IR opioids. Dr said he will not use OxyContin and would not even engage in a conversation about it. Reviewed Intermezzo with indication, limitation of use, and dosing. Dr said one will remember Butrans and that it has a place in his practice.
PPLPMDL0020000001	Akron	OH	44305	1/24/2013	I asked Brian if he has filled any Butrans recently. Brian said he has not but have all doses in stock. I reviewed appropriate patients for Butrans and introduced Intermezzo. He said they have dispensed it a few times. I explained indication, dosing, and limitations of use.
PPLPMDL0020000001	Akron	OH	44313	1/24/2013	I spoke with Sarah( pharmacist) about all three products. I gave her key selling messages for all and asked her if she has dispensed a Butrans prescription yet? She said she has not and does not have any in stock. Sarah also said that they have dispensed an intermezzo but does not currently have any in stock either. I asked if the dispense many pain medications? She said they d but the numbers have gone way down because of abuse. I asked if they dispense many long acting products and she said not too many because most don't get approved by their insurance. I asked which plans and she said most of them. Gave OxyContin dosing and appropriate patients.
PPLPMDL0020000001	Parma	OH	44129	1/24/2013	Delivered Insight 1 to Myra. She said she just had a patient who she had put on Butrans who reported that it gave him a rash on his face, so she had to discontinue him. I asked what she thinks causes a 59% discontinuation rate by day 35 for patients initiated on extended-release opioids. She said she thinks a lot of it comes down to patients being resistant to the idea of changing or what they perceive as giving up their other/short-acting medication. I asked her if she would say that this is what causes the most amount of discontinuations on Butrans. She said she seems to be having a hard time at the pharmacy level lately. I asked her to elaborate. She said it almost seems like pharmacists don't want to order Butrans for patients because it seems like they are telling her patients that they can't get it in or that it will be very costly. She said most recently this happened at a Walgreens. Myra said it is very frustrating because it then takes a lot of back-and-forth between the office, patient, & pharmacy to get the patient the medication. She also said since it is an opioid, patients are supposed to only go to one pharmacy so that it doesn't appear that they are shopping around. Myra also said getting patients to even agree to make the change is difficult, but she has been finding successes with it along the way. Discussed patient counsel & expectations with Myra. She agreed that she could & would be more insistent that appropriate patients at least try Butrans.
PPLPMDL0020000001	Parma	OH	44129	1/24/2013	Dr Kalin said that since his practice is expanding, he thinks he will find a bigger place for Butrans. Delivered first part of insight, but he got called away to deal with a new patient situation. Spent time with MA Jocelyn & reviewed Butrans Patient Experience Program kits, asking her to remind Dr Kalin to give the out to appropriate patients who he initiating on Butrans. Also asked her to give him Intermezzo information. She said to return soon to continue my discussion with Dr Kalin.
PPLPMDL0020000001	Stow	OH	44224	1/24/2013	Led with insight. I asked dr what that would mean to his practice when that happens? Dr said he didn't think that 59% was accurate and that his results are not that high. I asked what he does when patients discontinue their medicines? Dr said it slows down his entire day even though he said he tries hard to keep all that in check. I told dr about how my medicines can help strengthen the bond between his patients and their medicines. Dr said he likes that and then I discussed Butrans and Intermezzo and partners I against pain.
PPLPMDL0020000001	Parma	OH	44134	1/24/2013	Spoke with Nate, pharmacist, & showed Intermezzo pharmacy cell sheet, pointing out key points. He said he thinks he might have one or two people who get it, but has not seen much activity nor has he heard any feedback from patients who have filled the prescription. Reviewed new savings cards/programs for Butrans, OxyContin, & Intermezzo. Nate said they dispense a lot of Butrans & asked if the e-voucher will work with Butrans. I let him know that the monthly savings will work through e-voucher, but patients would need the actual card for the trial/\$100 off first month's prescription.
PPLPMDL0020000001	Parma	OH	44134	1/24/2013	Spoke with technician, (Joan?), & presented savings cards/program details for Butrans, OxyContin, & Intermezzo. I reminded her of eligibility requirements for usage & asked if she is the one who typically gives the cards to customers. She said usually. She did not know whether or not they stocked Intermezzo.
PPLPMDL0020000001	Parma	OH	44129	1/24/2013	Spoke with Keith, pharmacist, & presented Intermezzo pharmacy information points. He said he wasn't sure if they have it or not, but he doesn't think they do. Gave him new savings cards for Butrans, OxyContin, & Intermezzo. Keith said they do stock Butrans & he thinks they dispense it occasionally, although not a lot. He said he has not had any feedback on it at this point.

	Akron	OH	44310	1/24/2013	Dr is leaving for India until Feb 7 and did not have time to talk much. I provided quick review of Butrans patient profile Nancy and asked him if he has patients like her? Dr said he does and that he will use Butrans but its tough because its not covered on Medicare. I asked dr if he has commercially insured patients? Dr said he does but those patients are mostly NOT in chronic pain. I told dr that I understand but he probably does have patients under 65 that meet the Butrans indication. Dr said he will look more into it. Nothing else learned.
PPLPMDL0020000001	Parma Heights	OH	44130	1/24/2013	Placed a follow-up phone call to D.O.N., Katherine Myers 440-888-5900 to set up appt. to discuss educational opportunities and schedule in-service. N/A, Left Msg. on her voice-mail
PPLPMDL0020000001	Cleveland	OH	44130	1/24/2013	Delivered Insight 1 to Dr Mandat & asked how it compares with what he sees in his practice. He asked me to repeat the statistic. Dr Kansal said no one discontinues long-acting opioids. I told him that seemed difficult to fathom & asked how this can be, since he has had a few patients on Butrans, a single long-acting opioid, who have discontinued. He said maybe 20% discontinue. I reminded him of multiple conversations we have had when he has told me that it is difficult to get a patient to give long-acting opioids a fair trial because they want the short-acting. He said that is right. I asked how, then, he has a relatively low discontinuation rate for long-acting opioids-what processes does he have in place that assist with this. He did not respond. He said he thinks it is going to go back to how it used to be in medicine when opioids were only allowed to be used for cancer pain. I asked if cancer pain of all types is always more severe than pain from other conditions. He said yes.
PPLPMDL0020000001	Solon	OH	44139	1/24/2013	Placed call to Staff Development Coordinator, Gretta Redus to discuss pain & pain Management Educational Opportunities. N/A, left msg. on her voice-mail.
PPLPMDL0020000001	North Olmsted	OH	44070	1/24/2013	I e-mailed D.O.N., Erica Wood, to follow-up on dates & times for in-service on pain management, as we discussed on 12/13. I was unable to accommodate her selected dates in January d/t attending the Nat'l Sales Meeting.
PPLPMDL0020000001	Westlake	OH	44145	1/24/2013	Placed Follow-up phone call w/ D.O.N., Stephanie Finkenthal, 440-871-5900 to discuss Educational opportunities at no cost. N/A left msg on her voice-mail.
	Cuyahoga Falls	OH	44223	1/24/2013	Led with insight to all drs at lunch. All drs wanted to discuss product due to limited time. Discussed Butrans indication, dosing, titration, appropriate starting dose and patient selection. I asked drs if they would use Butrans when a patient is failing a short acting opioid and meets the indication. They all said they would and like that Butrans is a schedule 3 medicine and that it is a transdermal patch administration. Introduced Intermezzo indication, dosing and limitations of use.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	1/24/2013	Led with insight to all drs at lunch. All drs wanted to discuss product due to limited time. Discussed Butrans indication, dosing, titration, appropriate starting dose and patient selection. I asked drs if they would use Butrans when a patient is failing a short acting opioid and meets the indication. They all said they would and like that Butrans is a schedule 3 medicine and that it is a transdermal patch administration. Finished with Intermezzo and gave the indication, dosing, and limitations of use.
PPLPMDL0020000001	Parma	OH	44134	1/24/2013	Delivered Insight 1 to Dr Mandat. I reminded him of our previous Butrans conversations & asked what percentage of those patients who he has initiated on Butrans does he think are still on it. He said he thinks almost everyone & he could not think of very many patients who did discontinue. Reviewed dosing/titration, reminding him that 20mcg is maximum dose. Also gave him new savings cards & asked him to give one to appropriate patients with their Butrans prescription.
PPLPMDL0020000001	Euclid	OH	44117	1/24/2013	Placed a call to speak w/ D.O.N., Kathy Nemeth to set up an appt. to discuss educational in-service opportunities. N/A Left Msg. on her voice-mail.
PPLPMDL0020000001	Chagrin Falls	OH	44022	1/24/2013	Called and spoke w/ D.O.N., Janet Johnson, introduced myself and purpose of call, Re: Pain & Pain management education opportunities at no cost. Janet stated,"we are busy right now, transferring to a computerized documentation system and will be busy in-serving on that." She said, "I don't foresee us being able to use your service at this time." I asked if I could check back with her in the spring. She agreed to me calling her back in Saw dr at window and asked her if she had a minute to talk. Dr said not really and told me that she began using Butrans again after she had some issues at first. I asked her what she is doing differently? Dr said that the last lunch I had with her helped her learn more about how to dose and choose the right patient. I told her that we have a lunch coming up and we can discuss further. Nothing else learned but did speak to Carolyn and asked her if there have been any other managed care issues with Butrans. She said no and that she is hearing good things about Butrans.
PPLPMDL0020000001	Stow	OH	44224	1/24/2013	Good discussion around the insight. Dr said that she understands how difficult it can be to get patients to do what you tell them and to take the medicine prescribed. Dr said patients these days feel they know everything and what's best to treat them. Dr said that she knows I have OxyContin since I'm with Purdue and wanted to know if had anything else? I asked dr what her experience with OxyContin? Dr said that she uses it sparingly. I asked where? Dr said for her patients she doesn't want on Percocet anymore. Dr said the transition is easy and most patients like 1 pill 2 times a day. Gave review of patient types and asked about Butransnin her practice? Dr said she does not know much about it. I gave all key selling messages and discussed patient types as well as copy cards. Nothing else learned.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	1/24/2013	I attempted to lead with the insight and he started telling me how hard it has been getting OxyContin approved. I asked him for specific examples and he had a hard time sating them. Finished insight and he told me that it is a never ending problem. Reviewed dosing and told him about the new copy cards. Nothing else learned.
PPLPMDL0020000001	Akron	OH	44333	1/24/2013	First time meeting dr. Led with insight and asked her what that means her practice. Dr said she is too new to experience that issue and she is building up her practice. Dr said if and when that happens it just puts a huge strain on the day and gets her backed up. I asked her how she treats pain currently? Dr said she does not initiate a patient on opioids and that she will start neurons in or gabapentin. Shen she said she moves to opioids if chronic pain persists. Good discussion about Butrans and OxyContin. Dr said she is now tapering off a patient from OxyContin per the patients request but believes it is a good product for the right patient. Gave all key selling messages and asked for the Business for all products when the indication is met.
PPLPMDL0020000001	Tallmadge	OH	44278	1/25/2013	Discussed all three products with Aubrey(pharmacist). Explained Butrans indication, dosing, titration, CII 7 day transdermal patch. Aubrey said she just dispensed it last week and could not remember who prescribed it but dispensed the 5mcg. Explained OxyContin dosing, patient types, conversions from oxycodone. Introduced Intermezzo key messages from pharmacy visaid. Aubrey said she has never dispensed it and said she doesn't see it being used much. I asked why and she said because Ambien is generic and most people will take that. I reminded her of the indication and how it is different. Left with doing cards.
PPLPMDL0020000001	Parma	OH	44129	1/25/2013	Spoke with Lynn (nurse) & Anita (MA) & reviewed Butrans dosing, delivery system, & appropriate patient type. Pleaded my case for an appointment to discuss Butrans further with Dr Gallagher, letting them know of his prior interest in Butrans & letting them know that discussing it further could help him have more clinical success with Butrans for appropriate patients. Also reviewed Intermezzo indication & asked if Dr Gallagher has discussed it with anyone in the past. Lynn asked what insurances would pay for it. I let her know the best chance for managed care approval would be commercial insurance plans, although there is a chance of prior authorization or step edit. She took down my information & said she would ask Dr Gallagher about an appointment & would get back with me. I left Butrans, OxyContin information sheets.
PPLPMDL0020000001	Akron	OH	44333	1/25/2013	Lisa said that she has a Medicare B patient who was on 10mg of Vicodin a day and wanted more. Lisa said that she did not want to increase the short acting so she prescribed Butrans 5mcg. Lisa said however the patient told her that Butrans was \$180 for one month and the patient said he could not afford it. I told her that Medicare patients do have a tough time getting abutrans at a reasonable cost and to look more at patients with commercial insurance.m I reviewed indication, dosing, titration and appropriate patients. Lisa said that she will continue to use Butrans in the appropriate patients and she like the efficacy that Butrans brings.
PPLPMDL0020000001	Uniontown	OH	44685	1/25/2013	Quick hello at window and gave him the insight statement. I asked what he does when he has a patient that comes back in for a follow up appointment after being placed on a extended release opioid and tells him that they stopped taking it? Dr said it doesn't happen much because he does not prescribe much of those and said, you know that Cliff! I told him that my point with the statement was that the discontinuation rate is high for patients on extended release opioids and my hope is for him to provide him with resources and materials his patients can use to become more familiar with their products. I particular my products. Dr said he will not use OxyContin but can see with Butrans why those things may help. I told him that I want him to become familiar with the materials I have to hopefully make you feel even more comfortable with Butrans. Dr said ok and left.
PPLPMDL0020000001	Independence	OH	44131	1/25/2013	Quick call- Delivered first part of insight 1 & let Dr Pal this is a topic I'd like to discuss at our upcoming lunch. Passed back new OxyContin savings cards & updated him on the program. He said his Butrans patient is still on it, doing well. Spoke with Jill & updated her on OxyContin savings & eligibility requirements for usage. She said it seems like everyone has some sort of government insurance now.
PPLPMDL0020000001	Parma	OH	44129	1/25/2013	Delivered first portion of Insight 1 to Dr Roheny & asked when this happens what impact it has on his practice. He asked if that was for Butrans & OxyContin. I told him it is for commonly prescribed extended-release opioids in general, as found by an analysis. He said he had to go. Lorraine said they are transitioning to EMR & Dr Roheny is not spending much time with reps anymore. I scheduled first available appointment, as that is the way to get more time with him now.
PPLPMDL0020000001	Independence	OH	44131	1/25/2013	Dr Jack saw me & said, "I know... Butrans... write it!" I told him while that was a nice message, I actually wanted to share some non-product-specific information with him. Delivered first part of Insight 1. He said he has never thought about that before but it was "food for thought". He then walked away.
PPLPMDL0020000001	Parma	OH	44129	1/25/2013	Delivered Intermezzo pharmacy key points to Laurie, pharmacist, & asked about stocking. She said they don't have it & have not seen any activity. Gave her trial/savings cards & reviewed eligibility requirements. Also gave her Butrans & OxyContin savings cards & updated her on each program's increased savings. She said they don't stock Butrans & most of their OxyContin customers are on some sort of government insurance, but she wanted to keep some cards on hand in case a new customer came in with a prescription.
PPLPMDL0020000001	Akron	OH	44319	1/25/2013	Got through part of the insight and dr asked me if he needed to sign. I said no and that he knows that. Dr said if I don't have samples then there is no reason for me to come. Nothing else learned. I left him the Butrans Nancy profile.
PPLPMDL0020000001	Akron	OH	44319	1/25/2013	Provided insight to dr and asked what he experiences are with patients discontinuing long acting opioids. Dr said he doesn't prescribe them because they are too expensive and if they need it he refers anyway. I asked what pain products he prescribes for patients who have spinal stenosis or chronic back pain? Dr said whatever is cheap. I asked him if cheap is always the best option? Dr paid most of the time because his patients can't afford much else. I asked if he has any patients with commercial insurance? Dr said not many. I told him that Purdue has resources that can help patients pay less for their medicines and help them be more knowledgeable about them. Dr said ok and that he had to go. Nothing else learned.
PPLPMDL0020000001	Akron	OH	44319	1/25/2013	Spoke to Brian about Butrans indication, dosing, titration, steady state and copy cards. Brian said he has a few patients on it but nothing recent. I asked if he knows the dose they are on and he did not. I introduced Itermezzo and explained three points on pharmacy sheet. Brian said he knows of it but has not dispensed it.
PPLPMDL0020000001	Fairlwan	OH	44333	1/25/2013	Quick hello in the lunch room and dr remembered I had Butrans and said the patient he told me about a few weeks ago came back in and is doing great. I asked what dose and he told me 5mcg. I reviewed the titration guide and ability to use supplemental analgesia. Dr said he likes the product and feels the administration through a patch is a nice change, especially for 7 days. I gave quick review of new copy cards. Nothing else learned.
PPLPMDL0020000001	Akron	OH	44312	1/25/2013	I led with insight with dr and he told me that it is the toughest thing he does and it is every day. I asked him what he and his staff does when that happens. Dr said they have to re-evaluate the patient and figure out a medicine that they will take and not abuse. I told him that it must take a lot of time to reevaluate. Dr said it does. I told him that I have many resources at my disposal to help him, his staff and his patients for my products. Dr said he likes the copy cards and pain tracking guides for Butrans. Dr said that since our last discussion he has used a lot more Butrans and is getting good results. Dr would not expand on the results after I asked him. I told dr that I want to continue to provide resources each time I see him to hopefully strengthen the bond between the patient and their medicine. I asked dr if he uses the copy cards for his patients and he said yes. I explained the added savings for the new cards and dr said that Purdue has always done a nice job helping with patients pain through patient materials.
PPLPMDL0020000001	Parma	OH	44129	1/25/2013	Spoke with Alla, pharmacist, & reviewed Intermezzo pharmacy selling points. She said she hasn't dispensed it & it seems like it is not covered by many insurance companies. I let her know commercial insurance plans will be those most likely to cover Intermezzo, but there is a chance of prior authorization requirements or step therapy. Reviewed trial/savings cards with her. Also presented new Butrans & OxyContin savings cards & reviewed eligibility requirements. Alla said they have a patient who order Butrans in for, but she thinks that is the only customer they have on it & she said they don't keep it on hand. I asked if she knows why not & she said the
PPLPMDL0020000001	Parma	OH	44129	1/25/2013	Delivered first part of Insight 1 to Dr Rakhit. Before I could finish, he just said "Ok, very busy" & walked into a room. Iryna said he was very far behind today. I asked if she ever takes calls from patients who complain of middle-of-the-night awakenings. She said she does often. I asked if Dr Rakhit prescribes sleep aids. She said she knows he has many older patients who are on them. I let her know that while there is no issue clinically with older patients & Intermezzo, managed care for that population can be challenging to get approval on. She asked about savings. Discussed programs for Butrans, OxyContin, & Intermezzo. She said to give them to him when I talk to him at upcoming lunch.
PPLPMDL0020000001	Independence	OH	44131	1/25/2013	Saw Dr Rob briefly in the hall- Stopped him with new Butrans savings cards & told him I have interesting information that I wanted to share with him that may help him when treating patients with extended-release opioid medications. He said, "no, thanks" & walked into a room. Attempted to schedule lunch with Maria, but she said to check back another day because she was too busy.

	Akron	OH	44312	1/25/2013	Dana was present when I gave the insight to Dr Lababidi. Dana said that she is always dealing with patient issues and their medicines. She said she has to be extremely careful prescribing certain medicines to certain people. I asked her to expand and she just said that she want most of her patients to be on extended release but most are low income or on Medicare which many of the long acting products are either too expensive or not covered. I told Dana that she needs to continue to be very specific about patient selection and that I can help her through all the materials I have. Dana said go and had to get to a patient.
PPLPMD.L0020000001	Akron	OH	44313	1/28/2013	Spoke to Victoria about all products. Provided key selling messages for all. Victoria said that they fill OxyContin but not as much as they used to. She said they are filling more Vicodin and Percocet than ever. I explained OxyContin dosing, indication, and titration. Explained Butrans and Intermezzo indications, dosing, and appropriate patients. Victoria said that she has filled Butrans a few times but didn't know about intermezzo. She said that it seems like a great medicine and since the zolpidem dose reduction it may be used more often. Discussed new copy cards and patient savings.
PPLPMD.L0020000001	Macedonia	OH	44056	1/28/2013	Dr Pai came into lunch with his Butrans initiation guide. He said he was trying to show me that he keeps it in front of himself all the time. Delivered Insight 1 & asked what impact it has on his practice when this occurs. He said he doesn't find that a lot of patients on long-acting opioids discontinue. He said he finds, rather, that changing a patient from a short-acting opioid to a long-acting is the hard part. I asked why. He said patients do not want to change & they just want to take pills many times per day. I asked him why someone would want to do that. He said he isn't sure, other than they are addicted. I asked if he really thinks that. He said many of them he thinks are, so he sends them to pain management. He added that pain management sends them back to him to do the med portion of the treatment. I agreed that caution should be used in writing all opioids. I asked Dr Pai what type of expectations & education he provides patients when discussing a change to a long-acting option for pain control. He didn't respond. Reviewed dosing, titration, use of supplemental analgesia, application, & savings information with Dr Pai. I asked what appropriate patients would have to lose by simply trying Butrans. He said nothing. I asked him, then, since he agrees, will he at least educate appropriate patients about Butrans when he identifies a potential candidate & ask them to give it a fair trial. He agreed. Introduced Intermezzo dosing, indication, savings. He was interested.
PPLPMD.L0020000001	Beachwood	OH	44122	1/28/2013	Dr Myton-Craig said she knows Butrans is covered on BWC & commercial insurance. Started delivery of Insight 1 message. She cut me off & said she didn't have time today. Spent time with MA Tammy & went over Butrans appropriate patient type, dosing, & new savings/trial cards. I asked Tammy what happens if an insurance company rejects a prescription- who takes care of that. Tammy said she usually does. She said she is the one to deal with the patients mostly. She said she puts the PA paperwork in front of the doctor & then the doctor decides what to do depending on the situation. Tammy said she wishes Dr Myton-Craig would at least try Butrans & added that there are several patients there who could benefit. Gave overview of Intermezzo to Tammy, delivering indication, delivery system, & dosing.
PPLPMD.L0020000001	Akron	OH	44333	1/28/2013	Quick call at window. Told Dr I had a statistic to throw at him and he said he's behind and will try to discuss next time. I did tell him about the new additional patient savings for OxyContin and Butrans. Dr said good and to discuss with Jen. I explained the new patient savings programs and asked Jen if she has seen any new starts for OxyContin or Butrans? Jen said he had a new patient start on Butrans last week and said she had a heck of a time getting it covered. I asked if she knew the plan and what the patient was taking previously? Jen said it was a CareSource patient and she thinks the patient was on Vicodin. She did not know what dose he was initiated on. Nothing else learned
PPLPMD.L0020000001	Solon	OH	44139	1/28/2013	Dr Zaidi came up to the window as I was discussing new OxyContin savings cards. He said he was glad to have more of them because he thought they were low. I told him I had some interesting information to share with him. He said I would have to wait to discuss that at a lunch. Scheduled with Kim.
PPLPMD.L0020000001	Beachwood	OH	44122	1/28/2013	Spoke with Ashley, pharmacist, & Beth (floater pharmacist for Cleveland Clinic Pharmacies) & presented Intermezzo pharmacy sheet to Beth since she was unfamiliar with it. Also gave her new savings cards for Butrans, OxyContin, & Intermezzo. Ashley said Butrans movement has been steady- she still has patients consistently filling it, but she hasn't seen a lot of new patients starting.
PPLPMD.L0020000001	Akron	OH	44313	1/28/2013	Dr came to front desk to say hello. I told dr the insight and he told me we need to discuss it in an appointment because it was a loaded statement. I told dr my products and gave quick review of Intermezzo. Nothing else
PPLPMD.L0020000001	Macedonia	OH	44056	1/28/2013	Introduced myself & Purdue's products to Natalie. I asked what types of patients she sees at the office, being a new NP there. She said she sees mostly acute cases. I asked if she sees patients with pain from conditions such as osteoarthritis or spinal stenosis. She said she does, but she does not have a DEA number, so she cannot prescribe any controlled medications. She said as a new NP, she likes this because it takes away the responsibility of weeding out the bad from the good as far as patients go. I agreed that prescribers must be cautious in prescribing opioid medications, but reminded her that there are patients in legitimate pain who can benefit from pain medications when appropriate. She agreed. Shared Insight 1 with her. I asked what type of impact this has on the practice from her point-of-view. She said she knows Dr Pai & the MA's spend time with paperwork from denied medications from the insurance companies. Gave information on PAP & let her know we have resources available to help clinicians in their practice with pain medication prescribing & the patients they help. Lead with insight and told him that he probably spends lots of time identifying which patients are appropriate for specific medicines. I asked him what his experience has been like with patients discontinuing? Dr said that he does not see much discontinuation. Dr went through the statistic and tried to figure out if he has had any of them. Dr said he can see cost, efficacy, and adverse events but said that it he AE's would be within the first few days or so. Dr said he reduces the discontinuation by ensuring he has the follow up appointment within the first 30 days to check on the patients status. Dr said it comes down to the time the dr can spend with the patient and the busy ones can't afford to take the time necessary to reduce discontinuation. I told dr about the resources available to help him and his patients like initiation and titration tools, partners against pain, and others. I discussed Butrans and OxyAcontin patient types and appropriate starting doses. I reviewed Intermezzo indication, dosing, and copy cards for all.
PPLPMD.L0020000001	Akron	OH	44313	1/28/2013	Spoke to Kieth(pharmacist) about all products. Reviewed dosing, titration, appropriate starting dose for Butrans, and application sites for Butrans and discussed dispensing of OxyContin. Keith said he filled a Butrans script last week and believed it was the 5mcg. I introduced Intermezzo which he had not seen. Explained dosing, indication, limitations of use. Keith said its good that a low dose is available for that indication and thinks it will pick up when the Ambien dose gets reduced.
PPLPMD.L0020000001	Parma	OH	44129	1/28/2013	Quick call- Dr Ortega was on his way out of the office. He stopped to say that he just put a patient on Butrans today. I asked if it was a new patient or someone who has already been on it. He said it was a patient who was already on it, but he gave them a different strength for titration today. I told him that made me think of an interesting piece of information I learned. Shared Insight 1. He said a lot of patients probably give up on medications before talking to their doctors, so that causes them to just discontinue. He then said he had to go & to talk to Cindy. I asked what impact it has on her when Dr Ortega prescribes a medication & then the patient discontinues before they are supposed to. She said she basically does everything in the office, so she talks to the patients usually before the doctor does. I asked if she talks to them about titration & application. She said she does sometimes. Reviewed new savings cards with her.
PPLPMD.L0020000001	Fairlawn	OH	44333	1/28/2013	Spoke to Sue and Gilbert about Butrans and OxyContin additional patient savings cards. I explained the dosing of Butrans and appropriate starting dose and titration. I asked if they have seen any new Rx's and Gilbert said they have been seeing more Butrans and has also noticed more 10mcg coming through as new starts. Explained Intermezzo dosing, indication, and limitations of use.
PPLPMD.L0020000001	Parma	OH	44129	1/28/2013	Spoke with Amanda, technician, as the pharmacist was busy. Went through savings cards/programs for Butrans, OxyCotin, & Intermezzo. She said they do have customers on Butrans, but do not have Intermezzo that she was aware of. Delivered indication.
PPLPMD.L0020000001	Parma	OH	44129	1/28/2013	Delivered insight one to Dr. Taylor. I asked what type of impact it has on her practice & the patient when this scenario occurs. She said it is always cost & coverage that causes patients not to get medications even filled, so it doesn't even give them a chance to try it. Dr Taylor & Mary spent time telling me about a patient who they said was unable to get Butrans at a Wal-Mart pharmacy. They said the patient reported that the pharmacist said they don't carry it & can't get it from their warehouse even. I told them this doesn't sound right because I visit Wal-Mart pharmacies frequently & many of them stock it regularly or can order it in 1 day. I asked what type of insurance the patient had. They said it is through Wal-Mart as the employer. I told them this doesn't sound right. I went over savings information & gave them new cards. Dr Taylor started making notes on Nucenta literature. I told her I do not promote Nucenta. They then realized that they were thinking of the wrong medication. Dr Taylor said she has been getting Butrans through just fine. I asked what type of information she goes over with the patient when giving a Butrans prescription. She then got called away to deal with a patient issue.
PPLPMD.L0020000001	Cleveland	OH	44130	1/29/2013	Started to deliver Insight 1 to Dr Fedorko. He interrupted me as soon as I said "extended-release opioids". He then told me that he is just firing a lot of patients because they want their Vicodin. I told him he should be screening patients & should not treat patients who are not in legitimate pain with opioid medications. He said he keeps getting calls from pharmacies about false prescriptions in his name & he is tired of "all these medications". He told me to find a new job. I told Dr Fedorko I was not there to ask him to prescribe anything for anyone he is not comfortable with, telling him again he is doing the right thing by weeding out inappropriate patients. I offered tools & resources to assist in appropriate patient selection. He just started walking away. Spoke with Mindy & reviewed Intermezzo indication & patient type. She said she does not think they have ever had
PPLPMD.L0020000001	Northfield	OH	44067	1/29/2013	Spoke with Greg, pharmacist, & delivered Intermezzo pharmacy messages. He said he has never seen a prescription for it. He said he does stock Butrans but only has one person who gets it & she gets it filled "every 6 months". He said she visits from out of state & gets her prescription for Butrans filled at his store when she is town & her script is up. He has heard no feedback on it clinically. Reviewed appropriate patient type & ability for patients to take supplemental analgesia with Butrans. He said people get in the mindset of taking pills every few hours & don't want to change. I asked why he thinks patients are being able to make these types of decisions for themselves rather than having the doctor tell them is the appropriate option. Greg said he does not know.
PPLPMD.L0020000001	Akron	OH	44308	1/29/2013	Contacted PI and SC to notify them of a change in the MSL supporting the site. Offered a "refresher" protocol training session for site staff. PI responded, noting this was not necessary.
PPLPMD.L0020000001	Beachwood	OH	44122	1/29/2013	Placed follow-up phone call, to DON, Phyllis Tabbs, to discuss pain & pain management educational opportunities at no cost. N/A, left msg.
PPLPMD.L0020000001	Parma	OH	44134	1/29/2013	Called Linda Belford in Staff Development to schedule in-service on pain/pain assessment as discussed in our meeting on 1/21. I was informed that Linda was not in today.
PPLPMD.L0020000001	Cleveland	OH	44130	1/29/2013	Dr Diab asked if I had OxyContin savings cards. Gave him a new package & asked him if offering savings for medications he is initiating patients on is something he does during patient counsel. He said whoever remembers gives the cards & then walked out of the room.
PPLPMD.L0020000001	Lyndhurst	OH	44124	1/29/2013	Made a drop-in visit to meet w/ Linda Dabney in Staff Development to discuss Pain/Pain Management educational opportunities. She was not answering her page. Left BC
PPLPMD.L0020000001	Uniontown	OH	44685	1/29/2013	I led with the approved insight message. I asked dr how this level of discontinuation affects her practice and if she has experienced discontinuation with extended release products? Dr said she did not know about discontinuation rates in her practice and that she didn't have time to discuss at all and headed towards an exam room. I told her I'm leaving her resources for OxyContin and Butrans.
PPLPMD.L0020000001	Beachwood	OH	44122	1/29/2013	Made a drop-in visit to meet w/ D.O.N.,Stephanie Forsythe, Spoke w/ dr/ receptionist, Lucy, she spoke w/ Stephanie, who stated that she was going into a meeting, but agreed to call me later. Left BC
PPLPMD.L0020000001	Cleveland	OH	44106	1/29/2013	Contacted PI to advise him of a change in his support team at Purdue, offered refresher presentation on protocol/enrollment strategies. Updated contact information provided. PI replied with appreciation but indicateded he planned to use information gained at the upcoming PI Summit to educate staff.
PPLPMD.L0020000001	Solon	OH	44139	1/29/2013	I was scheduled to meet w/ D.O.N., Judith Sawnor @2pm to discuss educational in-service opportunities. Upon arriving, I was informed by the receptionist that Judy was in a family conference covering for the social worker who was out sick today. At 2:20, I was informed by the receptionist that Judy will have to reschedule our meeting that Tuesdays is "Care Conference Day" and she had 3 other families waiting to see her. She apologized and said that Judy would call me to reschedule.
PPLPMD.L0020000001	Uniontown	OH	44685	1/29/2013	Discussed all products with Kim. Discussed OxyContin dosing and explained the new copy cards. Explained Butrans appropriate starting and titration dosing. Kim said she has a couple of patients on Butrans but has not seen any new recently. She said she has been seeing more of Fouads and is happy about that. Explained intermezzo key selling messages and explained pharmacy messages. Kim said she has not seen any prescriptions but does have the 1.75mg dose.
PPLPMD.L0020000001	Akron	OH	44333	1/29/2013	I opened the discussion with the insight then asked dr what his experience is with patient discontinuation of extended release opioids and what steps he takes when that happens? Dr said that he does have patients that stop taking their long acting especially coming off multiple pills. Dr said that it is a very complex situation for each patient. Dr said that the key is to hit long acting opioids before they get to taking lots of pills in a day. He said it becomes too difficult and will always want their 5-6 pills a day. I asked dr if he does put a patient back on their short acting if they are deemed chronic? Dr said he does not in some way that because it is not the best therapeutic option. Dr Fouad said that he figures 7 out of every 10 patients don't want extended release opioids because they are abusing or diverting the short acting products during the day. Dr said if they stop taking it he finds out the reason why then decides another extended release option for them. Dr went on to say that Butrans is working so well with his patients that it has become his medicine of choice for patients that need adequate pain relief when they are not coming off high doses of an IR opioid. Dr said he had a meeting and we will pick up the discussion next time.
PPLPMD.L0020000001					

PPLPMDL0020000001	Parma	OH	44134	1/29/2013	Dr Hernandez asked if I knew any more information about the patient he had called me about & why Butrans might have been so expensive for her despite her commercial insurance coverage. I explained to him that the patient might have had a deductible, which means that regardless of what medications she filled, until she reaches that deductible, she will have to pay cash price for her medications. I told him this is the most likely scenario for that situation, although unless she checks with her provider, we cannot be certain. He said he was satisfied with that answer & agreed to continue to prescribe Butrans. Delivered Insight 1. I asked what impact that has on his practice when it occurs. He said he doesn't see many discontinuations. He said he believes the reason for that is two-fold. One, he spends time with his patients educating them & setting expectations. Additionally, he does not allow patients to tell him what they want. He, rather, prescribes for them what he feels is the best clinical option for them. I agreed that these are both probably helping him keep the discontinuation rate to a minimum. Discussed resources & tools available to assist him in patient discussions surrounding Butrans & OxyContin. Dr Hernandez said he does not use OxyContin as much anymore because he likes Butrans better. I asked him if it is differentiating the two patient types, since our recommendation is that many OxyContin patients may be out of the Butrans range. He said he thinks it works
PPLPMDL0020000001	Uniontown	OH	44685	1/29/2013	I led with insight and asked her what her experience is in dealing with discontinuation? Dr. Keith said she did not treat chronic pain and does not prescribe extended release opioids. I asked dr if a patient presented in pain already on low dose Vicodin, what would the next move? Dr said, again, she will not treat chronic pain and she refers to pain management if a patient has a condition that deems a chronic condition. I told the dr my products and asked her if she has had experience with Butrans? Dr said she has not. I gave quick review of product and asked her if it made sense to prescribe Butrans for a patient that meets the indication who may have to wait a month or two before they can get into pain management. Dr said she didn't know. I asked if I could further discuss Butrans at another time? Dr said ok.
PPLPMDL0020000001	Fairlawn	OH	44333	1/29/2013	Placed a follow-up phone call, spoke to Staff Development Coordinator, Michelle Williams, 234-466-5222 ext. 137, introduced myself and purpose of call. I asked if she has had an opportunity to speak w/ the D.O.N. on educational in-services that I could offer. She stated Briefly. Appt. scheduled to meet w/ Michelle on 2/7 @ 1pm.
PPLPMDL0020000001	Beachwood	OH	44122	1/30/2013	Delivered Insight 1 to Roberta. I asked how it impacts her & the way she treats a patient when this occurs. She said she does not change a patient's medication & sees only follow-up visits. She said Dr Yokiell starts or changes patients medications & she just continues them if there are no issues. She said managed care & cost tend to be a big issue because they cost time. She said also, this causes patients to be in pain unnecessarily if they are not getting relief from the medication. I let her know we offer tools & resources for her & staff members in effort to help with these types of issues for our medications. Also discussed managed care & savings cards. She said she has not prescribed Intermezzo for anyone. Reviewed indication, dosing, & patient type & gave dosing card.
PPLPMDL0020000001	Solon	OH	44139	1/30/2013	met with Denny and Chuck to review 2013 programs for DDM and Marcs. Marcs has placed an order for 27 dozen Senokot-S 10's bonus packs. DDM will order Bonus Packs on Senokot-S 10's and Senokot 20's. Denny asked to have window signs made for DDM for sweepstakes program. The price has increased to a \$1500 fixed fee for future DDM promotions. DDM is down over 20% this past year. They have put in a lot of facings of generics.
PPLPMDL0020000001	Akron	OH	44320	1/30/2013	I asked dr our last call if she had put any more thought into her patient discontinuing on the opioid medications? Dr said she actually has and that she thinks she has identified 2 patients that may be good candidates for Butrans. I asked her why she thinks these patients are good candidates? Dr said because they are both in chronic pain and on short acting narcotics. Dr said she has to try to convince the Butrans option to them. I asked dr what she plans on saying to the patient to get them to buy into the Butrans option? Dr said that it is tough because patients don't want to give up their pills even though they are still in pain. She said she plans on fully explained Butrans and how it is patch technology. I told dr that the patient information guide for Butrans may come in handy to help back up what she says and may strengthen the bond of the patient and their medicine. Dr agreed and wanted them. Dr said she will keep me in the loop as to her success of introducing Butrans to these patients.
PPLPMDL0020000001	Parma	OH	44134	1/30/2013	Called Linda Belford to discuss Staff Development to schedule in-service on pain/pain assessment as discussed in our meeting on 1/21. N/A Let msg on her voice-mailrec'd phone call from Linda Belford, scheduled in-services on pain for the Nurses on 2/21 @ 2:15 & 3:15 and for the STNA's on 2/21 @ 2:15 & 3:15
PPLPMDL0020000001	Cleveland	OH	44104	1/30/2013	Spoke with SC regarding a website referral of a potential patient for OTR3001. Two return calls have been made and messages left but no response from the family have been received to date. SC agreed to try three more times at various times of day/week. Also reviewed current status of addition of Dr. Appachi to 1572 as a Sub-4 for this study. Final form submission was delayed due to it being received without a manual signature. Completion is expected within a week. Inquired to confirm that Dr. Henry had notified her of change in MSL and offer to provide a "refresher" protocol session. She was interested and would raise the discussion with the site's CRA. CRA and Clinical Operations were notified of the above.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	1/30/2013	Called and spoke w/ Staff Development Coord., Nancy Strausser 330-945-9797, to schedule educational in-service for nursing staff. Nancy stated, "I'm sorry, but I cannot do anything right now, I am acting D.O.N. and also running orientation. I am barely keeping my head above water, if you know what I mean. I have your card and I will call you when things settle down." Nancy agreed that it would be fare to call her in April, if she don't call me
PPLPMDL0020000001	Cleveland	OH	44122	1/30/2013	Quick call- Caught Dr Rastogi at the window. I told him I just had a quick point to make & delivered first part of Insight 1. He interrupted me & said he had to go. Spent time with Lucy & asked her what role she has in the office. She said she takes calls & messages from patients and schedules their appointments. I asked if some of the calls she takes are from patients who call about their medications (such as adverse events, cost, efficacy issues). She said she takes the calls & transfers the patient or takes a message regarding the issue. She said it really all depends. I asked her to give each of the physicians the Intermezzo packet & she agreed.
PPLPMDL0020000001	Parma	OH	44129	1/30/2013	Quick call. Elaine said she has been giving out the savings cards that I have been giving to the office when she is writing Butrans. She asked me to review dosing with her, so I did, giving her an initiation guide. She said she had to go. Spent time with Dawn. She said Elaine always seems confused about coverage & dosing of Butrans. She said she has been trying to help her when she can. I asked Dawn what additional tools I could give her that would assist with that. She said nothing she could think of & said she would think about it. She asked for updated formulary grids. I let her know I would get them to her as soon as they are delivered to me.
PPLPMDL0020000001	Akron	OH	44333	1/30/2013	Led with insight with dr and asked him about his experience with discontinuation. Dr said that his discontinuation rates are very low because of the way his practices which is conservative. Dr said that he knows I have learned that he does not prescribe many CI products except for Exalgo because dr said it is a once a day opioid and it is very difficult to manipulate. I asked dr the steps he takes to a unsure low discontinuation rates? Dr said that when he does have a patient stop taking an extended release product it's because of an adverse event or efficacy. Dr said when that happens to re-evaluate their pain and try his best to choose another ER opioid. I asked dr what resources he uses to help him in this process? Dr said that the drs in his practice have many forms and documents that patients can fill out to help them evaluate what products a best. I showed him the partners against pain webkey and he said he will look it over. Nothing else learned.
PPLPMDL0020000001	Akron	OH	44320	1/30/2013	I asked dr if he had identified patients for Butrans yet and if he has any ideas to his approach in treating pain? Dr said he knows he needs to use Butrans. I asked him what the hang up is? Dr said he doesn't have an answer for it but knows he needs to begin prescribing. I asked dr where he thinks Butrans would fit? Dr said that I have been doing a good job identifying patient types and he is going to try it on patients who are taking Vicodin. I asked him what his approach is going to be? He said he will take patients on low to moderate doses and do his best to convince them to try a patch. I showed him the initiation and titration guide and explained how to initiate and titrate. I also showed him the patient information guide and explained how it may help. I asked dr for intermezzo business and explained the dosing, and indication.
PPLPMDL0020000001	Akron	OH	44312	1/30/2013	Provided introduction to intermezzo and discussed Butrans. I asked the technician Sara if she knew about intermezzo and she did not but the pharmacist had. I explained dosing, indication, limitations of use. Explained trial offer and copay cards. Told pharmacist about Butrans dosing, CI, and titration. The pharmacy has dispensed once but has not seen it since. I left the initiation and titration guide.
PPLPMDL0020000001	Copley	OH	44321	1/30/2013	I led with the insight with dr and asked him what level of discontinuation is like for extended release opioids in his practice. Dr said that it is an interesting statistic but he has very little discontinuation because when he makes the decision to move to an ER opioid the patient is chronic and typically elderly. Dr said a large portion of his patients that are in chronic pain are much older than 65. Dr said that his patients on extended release opioids don't discontinue because either it is working or they are selling it. I asked him how he identifies between e two and what questions do he ask? Dr said he does urine testing and if it comes up positive for opioids then he will continue them on that product as long as their pain is controlled. Dr said if the screen comes back negative, he sends them to pain management. Dr said he prescribed 2 Butrans last week. I asked dr why he thought of Butrans for those patients? Dr said because they both had chronic back problems and the short acting opioids were not working. Dr said he initiated Butrans 5 mcg for each and told them to take the IR for breakthrough or a pro basis. I explained the dosing and titration as well as steady state and told him to continue prescribing. Dr said he is still upset about Butrans not covered on Medicare. I explained coverage and told him about the Caresource PA. I asked dr if he would find the partners against pain, pain assessment guide helpful in determining what the patients doing.
PPLPMDL0020000001	Parma	OH	44129	1/30/2013	Caught Dr Chagin at the window. Delivered Insight 1 & asked what impact it has on his practice when this happens. He didn't respond. I asked of his Butrans patients if any have discontinued. He said he hasn't taken anyone off it but he doesn't know if they still take it. He saw the Intermezzo savings cards & asked me about it. Delivered indication, dosing, & savings information. Also discussed delivery system. He asked for literature, which I provided. Updated him on Butrans & OxyContin programs. He said he promises he will write Butrans when he gets a patient who he determines is legitimate & who has chronic pain. He also said he plans to use Intermezzo.
PPLPMDL0020000001	Woodmere	OH	44122	1/30/2013	Spoke with Ashley Miller, pharmacist, & reviewed Intermezzo pharmacy selling messages. She said she knows she has dispensed it here but was unsure if it is something kept on the shelf consistently. Gave her new trial/savings cards & reviewed eligibility requirements. Also reviewed new Butrans & OxyContin savings programs. She said they do stock Butrans & have a few customers who get it regularly.
PPLPMDL0020000001	Bedford	OH	44146	1/30/2013	Reminded Dr Moufawad of our previous conversation regarding discontinuations on extended-release opioid medications. I asked what processes he has in place in his practice are done in effort to reduce discontinuations. He said a lot of time is spent educating patients. I asked what tools he uses in the exam room to assist with this. He said he uses the Butrans patient information guides a lot & also gives savings cards to help reduce costs. I provided him with new savings cards. I asked his thoughts on Intermezzo. He said he doesn't want to hurt my feelings, but he thinks it is a medication for rich people because he does not see it as a necessity. Reviewed indication. He said he just doesn't see that as a big problem & it isn't worth doing a prior authorization for. He said he has noticed that prior authorizations from various managed care companies are now saying that he himself has to fill them out, not his MA or nurse. He said he does not know how he is supposed to find the time to do all of this paperwork.
PPLPMDL0020000001	Beachwood	OH	44122	1/30/2013	Spoke with pharmacist, Rina, & reviewed Intermezzo pharmacy selling points. Also went over new savings programs for each medication. She said they have a few patients on Butrans regularly as well as someone on Intermezzo. She said she has heard positive feedback on both medications.
PPLPMDL0020000001	Akron	OH	44312	1/30/2013	Quick call with dr in hallway. I asked dr if he has seen his patient back he initiated on Butrans? Dr said he did not and was concerned it wouldn't be covered but has not heard back from patient so he figures it was cost wise. I showed dr some of the resources for Butrans and dr said he likes the pain assessment comfort guide and he liked it and may use to help him with his patient chart documentation. I explained intermezzo copay cards again and asked him to identify patients that meet the indication.
PPLPMDL0020000001	Beachwood	OH	44122	1/30/2013	Delivered Insight 1 message to Dr Yokiell. I asked what impact this has on his practice when it occurs. He said it takes a lot of his time. I asked what questions he asks & considerations he makes when choosing the long-acting opioid that is right for any particular patient. He said it really is all patient & situation-dependent. He said the thing is, patients who come to him have already been on so many different medications, it narrows down significantly what medications he can consider because the patient has typically already tried many options with no success. He went on to say that he has tried Butrans & he does like to use it when he can, but patients he sees are typically beyond the appropriate range. I agreed that he probably sees more patients who he may consider for OxyContin therapy. He agreed, saying that when they are on tramadol or a non-opioid, or even Vicodin, he may consider Butrans as the long-acting of choice, but if they are on Percocet multiple times per day, that would be an OxyContin candidate. I agreed. I explained to him the reason for me asking him about that was in effort to understand his practice & patients so that I can bring valuable information to them. He said what companies don't realize is that managed care & cost play more into a physician's decision than anything else.
PPLPMDL0020000001	Parma	OH	44129	1/31/2013	Reviewed managed care & savings programs. Also asked about his experience with Intermezzo. He said other than cost, he has had good experience with patients liking it. Delivered Insight 1 to Dr Moysaenko & asked what impact it has on his practice when this happens. He said it takes a lot of time when a patient's medication is rejected due to cost or coverage. He said he ends up just having to write whatever is covered for the patient. I asked if this is always the best clinical decision. He said at that point it does not matter. He said a medication can be clinically great but if it is very expensive or not well-covered, no one can get it. He said his hands are tied & he has to do what the insurance company wants him to do. I asked what about when there is more than one choice on the plan. He said then it depends on the patient & the case & it is all different for every person. I asked what I can do for OxyContin & Butrans in this regard. He said to keep bringing savings & grids. He asked if Medicare covers Butrans. Reviewed coverage & reminded him of OxyContin's broad formulary access. He said he would only use long-acting opioids for chronic conditions. He added that he would, however, only keep a patient on OxyContin short-term due to its abuse potential. I agreed that he should be cautious in prescribing, reminding him all opioids carry this liability. He said he would use Butrans if it was on Medicare because those are the only patients he is keeping on opioids. He sends all others to pain management. I asked him to start appropriate patients age 50-60 on Butrans before sending to pain management. He said he would. Gave Intermezzo info

	Independence	OH	44131	1/31/2013	Reminder Dr. Sundaram of our previous conversation and asked him what types of questions he asks his patients if they do discontinue their extended release opioid medication. He said it depends on why they stopped taking it. I asked what resources I could provide for Butrans & OxyContin that would help him. He said I do a good job of that. I told him maybe not good enough since he has not put the information into practice. Reviewed appropriate patient type for Butrans & discussed broad formulary access for OxyContin, including Medicare plans. He said he has some Medicare patients on OxyContin & added that coverage is never a problem for that medication. Reviewed new savings programs & walked him through both Butrans cards. I asked if he could teach that back to his next appropriate patient who He identifies as a Butrans candidate. He agreed.
PPLPMDL0020000001	Shaker Heights	OH	44122	1/31/2013	Delivered Insight 1 to Dr Agarwal & asked how this impacted his practice. He said he doesn't know. I asked if it takes time away from him & his staff. He said, "OK" & walked away. Spoke with MA Michele & reviewed Intermezzo. She said she hadn't heard of it & agreed to give information to Dr Agarwal. <font color=blue><b>CHUDAKOB added notes on 02/08/2013</b></font>You are bringing some really good value to the practice for her to say that. Nice work Cliff!
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	1/31/2013	Spoke to dr as she was walking in for the day. Dr. started by telling me that they are prescribing Butrans more often. I asked what prompted them to increase prescribing. Dr Azem told me that it has been my attention to their practice and they feel more comfortable with the product. I gave an abbreviated insight statement and told her about the new copay cards with an increased patient savings. Dr said she is looking forward to taking with me soon at my lunch.<font color=blue><b>CHUDAKOB added notes on 02/08/2013</b></font>You are bringing some really good value to the practice for her to say that. Nice work Cliff!
PPLPMDL0020000001	Parma	OH	44134	1/31/2013	Spoke with Connie, pharmacist, & gave her intermezzo pharmacy sell booklet. Reviewed key messages with her. She said she was aware of it but has not dispensed it. She added that it can be ordered & received next-day if they need to get it in. Gave her new savings cards for Butrans & OxyContin. She said they do stock Butrans & have a few customers on it.
PPLPMDL0020000001	Parma	OH	44129	1/31/2013	Quick call. Reminded Dr Jugulion of our previous conversations & gave him Partners Against Pain information. Also gave him intermezzo information & let him know about DTC marketing.
PPLPMDL0020000001	Cuyahoga falls	OH	44223	1/31/2013	Met Kim for first time as she is new to the office. she listened to the discussion surrounding the insight message with drs in a lunch. I explained all three products and key messages for all.
	Parma	OH	44129	1/31/2013	Quick window call. Delivered Insight 1 to Dr Paat & asked what kind of impact it has on his practice when this occurs. He just said, "OK" & walked away. Spoke with Shari & explained that I was interested in finding out more detail about things like that in effort to bring support materials & resources to help them & their patients. I asked Shari what role she plays when a patient calls bac regarding not wanting to stay on a new medicine or if their insurance doesn't cover it. She said she does prior authorizations, talks to the patients, & gives savings information when she remembers. Reviewed savings programs & asked her to give Dr Paat Intermezzo information. She agreed.<font color=blue><b>CHUDAKOB added notes on 02/06/2013</b></font>Nice job of finding out what Shari does. Perhaps finding out how she interacts with the physician may help as well. Is there another nurse for Dr. Paat? I don't remember.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	1/31/2013	dr not involved in insight discussion as he came in very late. I gave a recap of the discussion to him and he said that yes he has some discontinuation but said that he knows it is much lower than most. I asked him why and he said that he tries to have a very candid discussion with each of his patients outlining the medicine he is placing them on and why. I asked dr what he does when patients do atop taking their medicines? dr said most of the time is because they want to abuse a short acting medicine.I attempted to ask more questions but dr said he has to leave. I asked dr to continue prescribing Butrans for his patients failing on short acting medicines and handed him the new piece on initiation and titration of opioid naive and experienced patients.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	1/31/2013	Dr was involved in the discussion around the insight message. Dr said that when he has a patient discontinue their medicine he reevaluates them to decide if the patient has legitimate pain or is seeking. If he decides the patient is legitimate and the patient tells him there is still pain, he will typically move to another long acting product either ER morphine or something equivalent to the previous medicine as long as there is no adverse reaction that may be something another medicine will have as well. Dr said he does not have much problem with discontinuation because of the time he spends with the patient as an inpatient and an outpatient. Dr said that if he finds out the patient is abusing or is even suspected as abusing it is a violation of their pain contract and he discharges them. Dr Ali also said that he finds that switching a patient from oxycodone air to OxyContin can make a big difference from efficacy and adverse events for his patients that are legitimately in pain and with less pills. No other questions were able to be asked of this hcp due to the nature of the lunch with multiple drs and
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	1/31/2013	Caught dr in hallway and lead with the insight. I asked dr about his experience w/ discontinuation and what he does to reduce discontinuation rates. Dr said that it has been more and more difficult for him to prescribe extended release opioids because of managed care coverage. I asked him for an example. Dr said that he has tried to write an extended release opioid recently and was told he has to go to ER morphine or duragesic. Dr said that those products were not options he felt were best for the patient. Dr said he likes OxyContin but it is even become hard to get approved. I asked dr who does he reimbursement. Dr told me to speak to Lisa and she was out for the day sick.
PPLPMDL0020000001	Parma	OH	44134	1/31/2013	Spoke with Alicia, pharmacist, & reviewed Intermezzo pharmacy selling messages. She mentioned recent news regarding lower dosing of zolpidem for female patients & asked if that was also true of Intermezzo. I reviewed dosing with her, pointing out gender-specific doses. Also gave her new Butrans & OxyContin savings cards. She said they have a few patients on Butrans.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	1/31/2013	Sole to Patrick about Intermezzo and Butrans. Gave him all pharmacy selling messages and he said they don't have it in stock but knows about it. He said that intermezzo is timely because of all the changes to zolpidem.
PPLPMDL0020000001	Akron	OH	44312	1/31/2013	Patrick said he is still filling Butrans. I asked him which dose is most often dispensed. Patrick said that he has seen a shift from mostly 5mg to more and more 10mg and said that it is most appropriate for what he sees the doses being of e Vicodin. I showed him the approximate conversion chart and reviewed it with him.
PPLPMDL0020000001	Twinsburg	OH	44087	1/31/2013	Spoke to dr through window and led with insight. Dr immediately said it is a pain when he finds out patients stop taking their medicines. He said that he basically have to start over and ask the patient again all the questions he asked when he first prescribed the product. Dr said that most patients he has had that stop their medicine is because of cost or adverse events. Dr said he tries to use everything at his disposal to give to the patient when prescribing like copay cards, patient materials etc. I told dr I may have the answer when it comes to Butrans. I explained and introduced the Butrans experience program and told him that hopefully this can help to reduce his discontinuation rate because of the bond that may be strengthened between his patients and their medicine. Dr said it seems really cool and he will use them for sure. Dr said that he initiated a patient on Butrans last week who has anthem bc/b's and took the copay card to a cvs in Hartsville and was told he has to pay for the 28 days and ended up being too expensive after the copay card. I told dr I will go to the pharmacy and check it out.
PPLPMDL0020000001	Manchester	OH	45144	1/31/2013	Made a drop-in visit to speak w/ D.O.N.,Shawn McMahon. Spoke w/ receptionist, Marge Adams, introduced myself and purpose of visit, re: pain & pain management educational opportunities at no cost. She stated that Jody Smith in HR is now handling all education and she will be in on Monday 2/4. left BC
PPLPMDL0020000001	C. Falls	OH	44223	1/31/2013	I introduced myself and Butrans. He immediately thought of the Duragesic patch. I restated the Butrans indication . He thinks it is a good idea but he thinks his patients will want their pills. He also had concerns that he will start ring and no one will cover. He stated he does have some commercial patients that meet the indication.
PPLPMDL0020000001	C. Falls	OH	44223	1/31/2013	Discussed all products with Cindy and lead with intermezzo. I discussed the indication, limitations of use, doses, and patients appropriate. Pharmacy does not have it in stock but Cindy has heard about it. Explained trial offer and copay card. Butrans dosing and asked about dispensing. Cindy said that they still do not see many but have had more than normal from the pain management center. Cindy said they still dispense OxyContin and the doses 10, 20, and 40mg remain the most commonly filled.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	1/31/2013	Lad with the insight message. I asked dr how he deals with his patients discontinuing on their extended release pain medicines? Dr said he finds out if they want their short acting products back and why they stopped taking their extended release products. Dr said he sees discontinuation mostly because they want to abuse the short acting and the long acting didn't provide the high they are looking for. Dr said when the patient stops and they have legitimate pain, he will find out why they stopped first. He said most commonly it is an adverse event or efficacy. Dr said then he will possibly move them to another long acting product with either equal dosing or slightly higher if their pain has increased. I told dr that from a standpoint of Purdue products, there are many resources available which he already knows that can help hi and the patient feel more knowledgeable and comfortable with the product they are on. Dr said that he realizes that the pain center uses all Purdue materials for their patients and it makes him feel that much more comfortable using Purdue products. I introduced intermezzo and gave all key selling messages. I asked dr to continue using all products for his patients when they meet the indication.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	1/31/2013	Met awake for first time as he is new in the practice. Jake listened as I discussed the insight message and explained all three product key selling messages.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	1/31/2013	Met dr for the first time. Dr said he only had 30 seconds because he had a patient on the table. Dr said he wanted to know about intermezzo because he saw the commercial. I explained the indication, limitations of use, dosing. Dr said he likes it and will use. Dr said he likes OxyContin and uses often and wanted quick information on Butrans. I showed him the placebo patch and gave him all key selling messages. Dr said he has lots of Medicare and wanted coverage for my products next time I come in. Nothing else learned.
PPLPMDL0020000001	Beachwood	OH	44122	2/1/2013	Delivered Insight 1 to Dr Barrett. I asked how this impacts his practice. He said he does not allow patients to tell him what to do. He said as long as they afford a medication & don't have an adverse reaction to it, if he feels it is the right choice, that is what the patient will be on. He said he believes in using a comprehensive approach to pain management & he does not understand why the Clinic is so opposed to using opioids, especially long-acting ones. He said there is no singular opioid that is great for everyone, nor is treating patients with opioids only without other treatment measures. He added that he allows patients to take 3-4 short-acting opioids per day. I asked what happens after that. He said he puts them on a long-acting. He said he likes Butrans because it gives him a long-acting CII opioid & he has had good results with it. I asked what information I can provide, specific to Butrans & OxyContin to assist him in teaching appropriate patients about each medication. He said he wants me to bring him practical, usable information that he can apply when treating patients- ie adverse events, dosing, managed care etc. Discussed Butrans titration & dosing. Also discussed adhesion & taping edges with first aid tape or covering with Bioclusive or Tegaderm. He said this was good to know. He said he should start using more Butrans because he really does like it. Reviewed managed care. I asked him to write it today for a few appropriate patients. He agreed.
PPLPMDL0020000001	Beachwood	OH	44122	2/1/2013	Introduced myself & Purdue's products to Zhanhong (goes by "Helen"). She said she had not yet heard of Butrans. Delivered indication, dosing, application, rotation, disposal, managed care coverage, & savings. Spent time reviewing appropriate patient type/range. Helen said she is a new NP & this is her first time in pain management. She said she is still learning. Dr Barrett told her that the Clinic does not, as a rule, like opioids, especially long-acting options. He went on to tell her that he has had good success with Butrans. He said he starts most patients at 10mcg & has found that about 50% of patients will need to be titrated to 20mcg. He also told Helen it is very difficult when you are with a patient to tell him/her that they cannot have their short-acting opioid back when initiating Butrans or other long-acting opioids. He encouraged her to be stern, saying again that that is very difficult. After he talked to me, Dr Barrett told Helen that he will write it today so that she can see how to write/dose it & counsel patients.
PPLPMDL0020000001	Tallmadge	OH	44278	2/1/2013	Dr stopped in hallway and asked me what product I have. I told him Butrans and intermezzo. I showed him the placebo patch and gave him the indication, CII, 7 day transdermal system. Dr said he knows of it but has not used. Dr told me to make sure I schedule a lunch and we can discuss further. I handed him the intermezzo piece and gave him the indication. Nothing else learned
PPLPMDL0020000001	Cleveland	OH	44195	2/1/2013	Contacted site to notify PI and SC of a change in MSL coverage for the site. SC responded with an update on positive progress in study start-up documents and a near-term IRB submission. Offered additional assistance from Quintiles Start-up team, if needed.
PPLPMDL0020000001	Akron	OH	44312	2/1/2013	I followed up with dr about his patient that he explained to me that he prescribed Butrans and the patient went to fill it and get the 28 day trial offer. The patient told dr that he didn't get 28 days free and had to pay. The patient has Anthem bc/b's. I went to pharmacy and checked and ended up finding out that the patients copay must have been over \$75 and so the patient had to pay the difference. I explained it to the dr and he said he understands and that sometimes the fine print is not read or understood. Dr thanked me for the clarification and will ensure to communicate that to his patients going forward. Nothing else learned.
PPLPMDL0020000001	Mayfield Heights	OH	44124	2/1/2013	Placed a follow-up phone call and spoke w/ Staff Development Coord., MaryAnne. Introduced myself and purpose of my call. MaryAnne stated, I am in a crunch w/ staffing this morning d/t the bad weather. She took my name & phone number and said that she would get back w/ me.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/1/2013	Placed call to D.O.N. Deb Keller, to set up appt. to meet and discuss pain & pain management educational opportunities. N/A, left msg. 330-777-5002
PPLPMDL0020000001	Twinsburg	OH	44087	2/1/2013	1. Provide product updates 2. Discuss Managed Care updates 3. Re-discuss Pain PACT
PPLPMDL0020000001	Independence	OH	44131	2/1/2013	Quick call- Lisa asked about OxyContin savings while I was talking to Roman. Updated her on new savings program & eligibility requirements. She then said she had to go.
PPLPMDL0020000001	Solon	OH	44139	2/1/2013	Placed call to D.O.N. Judith Sawnter, to reschedule appt. to discuss pain & pain management educational opportunities at no cost. N/A, Left msg on her voice-mail



PPLPMDL0020000001	Macedonia	OH	44056	2/1/2013	Spoke with Rhemelia & gave her Intermezzo pharmacy information, reviewing key points with her. She said she has heard of Intermezzo & she thinks they have ordered it at some point but she was not sure if anyone is on it there. Also gave her new Butrans & OxyContin savings cards & reviewed with her eligibility requirements for usage. She agreed to share this information with pharmacy staff.
PPLPMDL0020000001	Richmond Heights	OH	44143	2/1/2013	Placed phone call to Wellness Director, Joan Southard, L.P.N. @ 216-289-9800 to set up appt. to meet & discuss educational opportunities on pain & Pain management. I was informed that Joan has not arrived yet d/t the bad weather. Left msg. on her voice-mail.
PPLPMDL0020000001	Beachwood	OH	44122	2/1/2013	Spent time South Pointe Pain Management nurses. I asked what role they play in the patients' visits/experiences at their facility. They said they give savings information, do prior authorizations, take call-backs from patients, & teach them about medications sometimes. Showed them initiation guide & walked them through application, disposal, rotation. Linda asked what to do if the edges loosen. I told her that they can tape the edges with first aid tape or cover with Bioclusive or Tegaderm covering. Also discussed titration & dosing & ability for patients to take supplemental analgesia with Butrans. Carol asked about insurance coverage, so I reviewed this with them & also gave new package of trial/savings cards. Showed each card & discussed how the patients use them if they are eligible. All the nurses agreed that Butrans would be a good option for many of the patients they see in their facility. I asked them to alert the physicians when they identify a patient that may be appropriate for Butrans therapy. They said some of the doctors there are more receptive than others to taking their suggestions. Discussed OxyContin as a q12h dosing form of oxycodone.
PPLPMDL0020000001	Stow	OH	44224	2/1/2013	I explained intermezzo indication, limitations of use, dosing, dosing adjustments, and patient savings. Pharmacy has not dispensed yet and told me they can get it next day. I provided the Butrans initiation and titration guide for opioid experienced and naive patients reviewing the appropriate starting doses, titration, and showed placebo patch.
PPLPMDL0020000001	Akron	OH	44312	2/1/2013	Spoke with Irena about Intermezzo and Butrans. I introduced intermezzo using the pharmacy piece and reviewed the three pharmacist points, dosing, limitations of use, and copay cards and 5 pills free. Irena said she has not filled it but sounds like it will have a niche. She asked about taking zolpidem with Butrans or other opioids. I read the safety information from the visad and told her that opioids are CNS depressants and so is zolpidem. The decision of dose is up to the doctor. I explained Butrans dosing, titration and appropriate starting dose. Pharmacy has filled Butrans but not much.
PPLPMDL0020000001	Akron	OH	44312	2/1/2013	Dr said he overheard me taking to Dr Manning about Butrans. Dr asked me what schedule it is and how long it works because he couldn't remember. I showed dr the initiation and titration guide and gave him all key selling messages again. I asked dr where he sees himself using it? Dr said that his problem is that it is not covered on Medicare. I told dr that it is and if the patient has coinsurance the cost can be very manageable. I told dr to focus on patients under 65 that meet the indication and asked him if he has patients like those? Dr said he does but not too many. I gave dr the patient case studies and asked him to review. Nothing else learned.
PPLPMDL0020000001	Uniontown	OH	44685	2/1/2013	Provided dr with the partners against pain web key and patient pain comfort questionnaire and handed him the new piece on dosing and titration for opioid or opioid naive patients. Dr said they may come in handy. I told dr that Purdue has many patient resources that they can get. I explained intermezzo indication, limitations of dosing, dosing and copay cards. I asked dr if he would use intermezzo? Dr said he will use it especially since it is such a low dose of zolpidem. I have him the intermezzo information.
PPLPMDL0020000001	Independence	OH	44131	2/1/2013	Delivered Insight 1 to Roman & asked him what impact it has on him & the practice when this happens. He said he doesn't understand why I'm telling/asking him about this. I told him I was interested in learning more in-depth facets of the practice & patients & was hoping to use this information to help me bring more pertinent information to him when I come in. He said that did not make sense & added that patients just want to save money. I updated him on OxyContin & Butrans savings programs. He said he wanted the OxyContin cards & wouldn't take the Butrans ones because he has not had good success with it. He requested Senokot-S samples then Good discussion around the insight and product discussion. Dr said he has seen the intermezzo commercial. I asked dr what steps he takes when a patient stops taking their extended release opioid? Dr said he finds out why they quit and that will determine what his next move is. I asked him if a patient stops because of an adverse event what does he do. Dr said that the answer is not simple because it can take time from him and his nurses to determine what to do. Do asked again about intermezzo. I explained the indication, limitations of use, dosing, and patient savings. I asked dr if intermezzo is a product that he wouldn't find himself prescribing? Dr said yes because he likes the low dose and has had patients complain about not being able to get back to sleep. I introduced the new OxyContin patient savings card with a potential \$90 savings per month. Dr said his patient do well on it and doesn't have many issues. I asked dr when he initiates OxyContin? After Vicodin, Percocet? Dr said he tries to get the extended release on as soon as he can. He says his patients like it better. Dr thanks me for the information but had to go to a meeting. Nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44106	2/1/2013	Introductory meeting at the PI Summit. Dr. Speicher indicated that the PI transition had gone smoothly and that Dr. Toltz remains a Sub-1 as he is expected to return to the site about 3 times per year.
PPLPMDL0020000001	Stow	OH	44224	2/1/2013	Good conversation with Greg(pharmacist) about new Intermezzo and Butrans. I introduced intermezzo with indication, dosing, limitations of use, and patient savings. Greg had heard of it but had not dispensed it. I asked him if he believed Summit Pain Medicine would prescribe it and he said possibly but didn't want to guess. I explained the new Butrans copay cards and explained the changes. Greg said he dispensed a lot and said that the 10mcg is the most common. He said he will hand out the cards as he always has. I asked if patients come to fill their script already with a copay card and he said about 50-60% of the time.
PPLPMDL0020000001	akron	OH	44333	2/4/2013	Recapped last call with insight and asked him to use the BPET kits and asked him to get them out after explaining the appropriate patient types. Dr agreed to use. Explained intermezzo and discussed new patient copay cards. Dr agreed to use. Short discussion on conversions from Percocet to OxyContin. Gave dr a resource with the pain comfort assessment tear sheet which he said he likes.
PPLPMDL0020000001	Parma	OH	44134	2/4/2013	Delivered Insight 1 to Dr George & asked what impact these discontinuations have on his practice & how he treats the patient. He said he doesn't know what to do about writing "anything" anymore. I asked him to clarify. He asked if I was aware of a FL law that allows only pain management specialists to prescribe narcotics. I told him I was not. He said he is afraid that will happen here too, adding that the system of medicine almost is designed now to scare physicians. He said 2 years ago, he was not afraid to write medications like Butrans or even OxyContin, but now he is concerned. I asked if he would agree that there are patients who's cases do warrant treatment with opioid medications. He said yes. I asked what he is doing with those patients. He said he is trying to refer a lot, but sometimes patients just get sent back to him for medication. I asked what, then is he doing with those patients. He said that is too hard to answer because each person is different & it just depends on too many factors, many of which are difficult to explain. I told him I am just asking him to consider Butrans as an option for appropriate patients who he is comfortable treating with opioids, even if that is a small section of his patient population. He asked me to review dosing. Discussed titration every 3 days. Discussed Intermezzo indication, dosing, & showed him how the prescription could be written.
PPLPMDL0020000001	Parma	OH	44134	2/4/2013	Lynda came back to breakfast, saying she wishes she could write the medications I carry because she would like to help me. I told her I was not the person to worry about & that my concern is only for the patients they treat. I told her I wanted to be sure they all (including staff) have the information necessary to help them in the event that an appropriate patient presents who may benefit from Butrans, OxyContin, or Intermezzo. Lynda said she has considered getting a DEA number so that she can prescribe if necessary, but just is afraid. I agreed she should be cautious in prescribing any scheduled medication, but reminded her that there are patients who can benefit from opioid medications as part of a comprehensive plan to treat their pain. I asked what information or tools I could provide that would help her with this comfort level. She said she wasn't sure. I gave her PAP information for HCP's. She said that would help.
PPLPMDL0020000001	Parma Heights	OH	44129	2/4/2013	Spoke with technician as pharmacist was with a customer. Gave her information for pharmacists on Intermezzo & delivered indication & dosing. Also discussed Butrans & OxyContin savings cards & gave her new cards. She agreed to give my information to Cathy when she became available.
PPLPMDL0020000001	Parma	OH	44129	2/4/2013	Dr Gigliotti said he really needs to write Butrans. I asked what tools/resources he thinks may be able to assist him in choosing patients who are appropriate for Butrans so that he can get the experience he needs with it. He said he doesn't know- he just has to "do it". I asked what he tells patients who he has started on Butrans when he initiates them to help them have the best experience possible with the medication. He said he just tells them how to use it. I told him that sounded like a good start. I reminded him of the value of the Butrans Patient Experience Program & suggested that may assist him in instructing patients & setting them up for success with Butrans. Reviewed contents & trial/savings program. I asked if he would simply identify a potential Butrans candidate & if appropriate, initiate therapy & give them a patient experience kit with their prescription. He said he is
PPLPMDL0020000001	Parma	OH	44134	2/4/2013	Dr Mandat said he had recently started a patient on Butrans but he was unsure if she got it because he thinks it might not have been covered by her insurance. I asked how it effects his ability to adequately manage a patient's pain when something like this happens. He said it doesn't even phase him anymore because that is a common occurrence with many prescription medications now with all the managed care restrictions out there. I agreed this can make it difficult & asked what types of information he would like to see from me that may assist with this happening in the future specifically for Butrans. He said nothing really. He said he evaluates a patient's situation/case & decides clinically what he thinks is best for the patient & writes that prescription. He added that he has his staff (Linda) do prior authorizations when applicable, but sometimes medications are just too expensive. I reviewed Butrans managed care & savings, reminding him that patients who use the savings cards will have a reduced out-of-pocket cost if eligible. Gave him Intermezzo packet & reviewed indication. He said he placed call to talk w/ D.O.N., Ovisli Piblad to schedule appt. to discuss Pain & Pain management opportunities for Nurses. 440-871-5181. N/A left msg.
PPLPMDL0020000001	Westlake	OH	44145	2/4/2013	Placed call to D.O.N., Sue Williams to set up appt. to meet to discuss Pain & Pain Management educational opportunities. She stated, Wednesdays are bad for me." Appt. scheduled for 2/14 @ 1pm.
PPLPMDL0020000001	Tallmadge	OH	44278	2/4/2013	Short discussion with dr about his outlook on using pain medicines in his practice. Dr said that Unity and Kent PCA does not use any scheduled medicines and will not use OxyContin or Butrans. Dr claimed to only prescribe narcotics in the event of acute pain. Dr said he may use intermezzo.
PPLPMDL0020000001	Fairlawn	OH	44333	2/4/2013	Spoke to sue and Jessica about all three products. Discussed intermezzo in regards to savings cards, minimum quantity to be prescribed for and confirmed that a canton order has a qty of 30. I asked about recent Butrans prescriptions and Jessica said she has not seen an increase of activity. I asked if she has seen a decrease in OxyContin recently and she said she has and more Percocet. Discussed updated savings cards for Butrans and Quick call-Dr. Taylor saw me at the window and said she has still been writing Butrans, so far with good results. She said she couldn't stay to talk and then went into a room. Spoke with Mary and reviewed Butrans managed-care information and reminded her about trial and savings cards along with eligibility requirements for usage.
PPLPMDL0020000001	Akron	OH	44313	2/4/2013	Made a drop-in visit to meet w/D.O.N., Dayna Krosta to discuss pain & pain management educational opportunities. I was informed by Receptionist, Nicole Greathouse that Dayna Krosta no longer works there. The new d.O.N. is Sarah Crawford @ ext 7228 and Richard Lynch is in charge of education.
PPLPMDL0020000001	Tallmadge	OH	44278	2/4/2013	Spoke to Jim about all products. I used the new Butrans doing and titration guide to discuss appropriate initial dosing, titration, patient types and copay cards. I introduced intermezzo to Jim by discussing indication, limitations of use, patients, and copay cards. Told Jim that patients over 80mg or morphine a day are not appropriate if or Butrans. Those patients are more of an OxyContin patient. Jim said that he did not know about the dosing differences in dose between men and women as well as other patient dose adjustments.
PPLPMDL0020000001	Parma	OH	44134	2/4/2013	Caught Dr Loyke between patients as he was too busy to come back for breakfast. He said he was just returning from a tour of duty in Afghanistan & didn't really want to think or talk about opioids. Shared Insight 1 with him, letting him know the reason I was giving him this information was in effort to better understand the impact these discontinuations can have on his practice so that I can bring tools for Butrans & OxyContin that could assist him & the staff. Also gave him information on intermezzo, alerting him to DTC marketing, so patients may be asking for it. He said I could tell him more about it next time I was in as he would have more time.
PPLPMDL0020000001	Parma	OH	44134	2/4/2013	Spoke with Steven, pharmacist, and gave him intermezzo pharmacy information. Reviewed key pharmacy selling messages with him. He said they do not have it in stock but thinks they can order it if someone brought in a prescription. Reviewed new Butrans and OxyContin savings programs and reminded him patients with any type of government insurance are not eligible for card utilization. He said they stock Butrans, but he cannot remember the last time he filled a prescription for it.
PPLPMDL0020000001	Cleveland	OH	44129	2/4/2013	Deb said she has a patient on Butrans 10mcg who is experiencing itching with Butrans at the application site. She said it occurs when she puts a patch of Butrans on & continues even after she removes the patch. Deb said that patient reports that she is getting such good pain relief that she doesn't want to stop Butrans, but the itching is becoming a problem. Deb asked me what to do about it. I told her we do not have specific recommendations regarding when/if a patient should be discontinued, but reviewed with her that if the adverse events a patient experiences are outweighing the analgesia they are receiving, she & the patient may decide that a different therapy should be chosen for that patient,

PPLPMDL0020000001	Cleveland	OH	44122	2/4/2013	Made a drop-in visit to speak w/ Staff Development Coordinator, Francine Young to discuss Pain & Pain Management Educational Opportunities. Francine was available, I introduced myself and purpose of visit. I asked her, what % of your residents experience pain? She responded, "a lot" I then asked, How does that impact your nursing staff? she responded, "quite a bit," We talked about assessment tools and I asked, if she finds the staff using them appropriately? She said, "I'm sure not always." I reviewed unbranded as well as branded materials with her. She showed great interest in Butrans and was going to speak with pharmacy about stocking it. I reviewed the current coverage as well. I confirmed the CPP- ORION in Twinsburg, the Medical Director, Jill Berry and the D.O.N., Connie Louis. I asked if they had NP's on staff, Francine replied yes, I mentioned that I would like to speak to them as well. The facility consists of 209 beds of which consists of a dementia unit, a skilled unit and LTC. She felt that the educational in-services would be a great benefit to the staff. In-services on pain/pain assessment were scheduled for March 6th @ 2 and 2:30 for the Nurses and STNA's. I left branded and unbranded materials along w/ my BC.
PPLPMDL0020000001	Parma	OH	44129	2/5/2013	Presented Insight 1 to Dr Kim & asked what impact these discontinuations have on his practice. He told me he is a radiation oncologist. I asked if he prescribes long-acting opioids. He said treating pain is a very big part of what he does. He said he prescribes OxyContin but forgot about Butrans. Reviewed key messages with him (ie indication, dosing, delivery system, appropriate patient type). Also gave managed care overview & savings information. He said he would use it & left the room.
PPLPMDL0020000001	Cleveland	OH	44130	2/5/2013	Reviewed broad formulary coverage for OxyContin & 7 tablet strengths, pointing out the 15mg tablet. Dr Diab said that was "good" & then walked away. Spoke with Barb & reviewed Butrans managed care as well as Intermezzo indication, showing trial/savings cards.
PPLPMDL0020000001	Independence	OH	44131	2/5/2013	Spoke with JT, pharmacist, & gave him Intermezzo pharmacy information sheet, pointing out 3 key points. He said he hasn't seen any prescriptions for it but said he will order it if he gets a script. Gave new Butrans & OxyContin savings cards & updated him on programs. Walked him through how cards should be activated/used & reminded him of eligibility requirements.
PPLPMDL0020000001	Parma	OH	44129	2/5/2013	Delivered Insight 1 to Dr Elcher. I asked how these discontinuations of long-acting opioids impact his practice & ability to manage a patient's pain. He said he doesn't have an issue with discontinuations. I asked what he attributes that to- does he do something when seeing the patient that he thinks helps patients stay on their medication. He said he doesn't know. I let him know I can provide resources for Butrans & OxyContin to help with patient education & savings, as well as tools for the practice like formulary information. He said he couldn't stay to talk & left the room.
PPLPMDL0020000001	Cleveland	OH	44130	2/5/2013	Quick call- Dr Fedorko said he wishes he had patients to put on Butrans for me. I told him from what he has told me, he does have patients on short-acting opioids who may be potential Butrans candidates. He just said he doesn't like those patients & went into a room.
PPLPMDL0020000001	Richmond Heights	OH	44143	2/5/2013	Placed a follow-up phone call, spoke to NE, Aldona Bur discussed pain & pain management education opportunities. She stated, I have a note to call me, but I have been trying to clean up a mess from her predecessor." She asked if CEU's were given for the presentations, I explained, that they were not. She stated, "I will call you at the end of this week."
PPLPMDL0020000001	Middleburg Heights	OH	44130	2/5/2013	Quick call- Shared information about updated Butrans trial/savings cards with Dr Ignat. He just walked into a room.
PPLPMDL0020000001	Twinsburg	OH	44087	2/5/2013	Placed call to Jody Smith to discuss pain & pain management educational opportunities. N/A, left msg. on her voice-mail.
PPLPMDL0020000001	Parma	OH	44129	2/5/2013	Placed a Follow-up phone call to ADOH, Jasvi Bar, to introduce the NE program and set up an appt. to discuss educational opportunities at no cost. N/A Left msg.
PPLPMDL0020000001	Cleveland	OH	44106	2/5/2013	Attempted to make drop-in visit to meet w/ D.O.N., but was unable to enter the facility d/t an accident at the entrance. Placed a phone call to Marcia Wiggins, N/A left msg.
PPLPMDL0020000001	Parma	OH	44129	2/5/2013	Delivered insight 1 to Dr Cowan & asked what impact these discontinuations have on his ability to adequately manage his patients' pain. He said writing opioids for pain is a big part of what he does, but he does not notice discontinuations occurring very often. I asked what processes he follows in effort to give the patient the best chance for success when starting them on a long-acting opioid. He said just basic patient education on how to take the medication & what it is for. Reviewed 7 tablet strengths of OxyContin & discussed savings program. He asked why patients on government plans like Medicare can't use the card. I told him they are not legally eligible. He asked how anyone would know if someone on Medicare used a savings card. I advised again that this is against the law & asked that he give them to eligible, commercially insured patients. He said he doesn't typically use the intermediate strengths of OxyContin because he is not used to writing them. I showed him how these strengths can be useful in titration to find each patient's appropriate dose. Dr Cowan said he likes to use long-acting opioids when he treats his patients for pain as he clinically finds more success with pain control. I asked him to continue to identify OxyContin patients & prescribe where appropriate & he agreed. Reviewed Butrans dosing, deliver system, & patient type. Also gave him Intermezzo indication & explained that DTC marketing now exists for this medication.
PPLPMDL0020000001	Parma	OH	44129	2/5/2013	Myra came out of a room asking if patients on BWC will have to pay anything for Butrans or if she would have to do some sort of prior authorization for it. I told her BWC patients typically do not require prior authorization, nor would they have to pay for their Butrans. She went back into the room to talk to the patient. Spoke with Dawn & reviewed coverage, dosing, & titration. Dawn said Myra has been writing a lot lately & has been giving Patient Experience Kits to patients when she initiates.
PPLPMDL0020000001	Cleveland	OH	44135	2/5/2013	Made a drop-in visit to speak w/ D.O.N. Dan Rivera to discuss pain and pain management educational opportunities at no cost. Spoke w/ Terry Kilpatrick from payroll who was at the recpt.desk, stated, "all our education is set up through corporate and done on-line." Dan Rivera was not available. left branded & unbranded handouts w/BC.
PPLPMDL0020000001	Cleveland	OH	44102	2/5/2013	Made a drop-in visit to speak w/ D.O.N., Colleen Wilson @ St. Augustine LTC facility to discuss pain & pain management educational opportunities. Security guard was stationed at the front desk who called Colleen Wilson's office, N/A Left branded & unbranded handouts w/ BC
PPLPMDL0020000001	Cleveland	OH	44130	2/5/2013	Spoke with Patty, pharmacist, & technician. Presented Intermezzo pharmacy key selling messages & gave information. Patty said she is familiar with Intermezzo. Updated them on Butrans & OxyContin savings programs & gave them new cards. Patty said she has never dispensed Butrans but would keep the cards.
PPLPMDL0020000001	Hudson	OH	44236	2/6/2013	Spoke with Bob about intermezzo and Butrans. I explained the indication, dosing, and libations of use. Bob said he has the 1.75 mg dose but does not recall dispensing it. Explained Butrans dosing, indication, titration and conversions. Bob has all three doses in stock and has about 4 patients that get it dispensed.
PPLPMDL0020000001	Akron	OH	44312	2/6/2013	Saw dr in hallway and told him to continue identifying patients for OxyContin and Butrans. Dr said he feels more comfortable with Butrans. I asked why and he said because he has great pain management drs next door in Lababidi and Fouad and if patients on Percocet need more he refers them. Dr said he will keep trying with Butrans. Left dr with initiation and titration guide.
PPLPMDL0020000001	Hudson	OH	44236	2/6/2013	Discussed all products to both Beth and Gallina. They both knew about each product. Explained dosing and appropriate patients for each product. Explained indication and limitations of use for intermezzo. They did not know if they had dispensed Butrans recently but have seen it from Bressi and Seiple. Discussed copy cards for each product.
PPLPMDL0020000001	Akron	OH	44320	2/6/2013	I provided a somewhat quick review of the Butrans case studies and asked dr if she can identify patients like these in your own practice? Dr said she thinks she has a couple of patients on Vicodin but is not sure about their insurance. I gave her an overview of the coverage status. I asked dr to also think about intermezzo when patients tell her that they have in the middle of the night awakenings.
PPLPMDL0020000001	Maple Heights	OH	44137	2/6/2013	Saw Dr Gene at the window. He said I had 20 seconds. Delivered first portion of Insight 1. He said he was expecting product information. I told him that me understanding how discontinuations like these impact his practice & how he treats patients can help me bring more valuable information to him & his staff. He said that was interesting & that we can talk more about it at lunch. Gave Intermezzo packet.
PPLPMDL0020000001	Tallmadge	OH	44278	2/6/2013	Quick talks with dr about my products. Dr said he can count his chronic pain patients on one hand. I asked him if he would use a CII product for moderate to severe pain that was a transdermal patch? Dr said possibly because he has a patient or two on duragesic. Dr said he will see me on Kent and we can discuss further. Handed dr an intermezzo dosing card.
PPLPMDL0020000001	Parma	OH	44129	2/6/2013	Spoke with MA Jocelyn & asked what her role in the office entails. She said she takes phone calls, talks to patients, takes messages, payment, & insurance information. I asked if who takes care of prior authorizations. She said it depends, but she does them sometimes. Reviewed managed care information for Butrans & discussed trial/savings cards. She said Dr Kalin does a lot of procedures but has been taking on a lot of new patients lately, so he has had less time. She scheduled some time for me to meet with Dr Kalin next week..
PPLPMDL0020000001	Westlake	OH	44145	2/6/2013	Met w/ Patty O'Shea, scheduled in-service for STNA's on March 27th @ 12:30
PPLPMDL0020000001	Maple Heights	OH	44137	2/6/2013	Spoke with Kim, pharmacist, & gave her Intermezzo pharmacy information, walking her through 3 key messages. She said she had heard of it but has not dispensed it. Also discussed trial/savings programs for Butrans, OxyContin, & Intermezzo. Reviewed eligibility requirements.
PPLPMDL0020000001	Akron	OH	44305	2/6/2013	Good discussion over lunch with dr Tosino. I led with insight with both drs and they both admitted that possibly some of e discontinuation is due to doctors not knowing enough about extended release opioids and how to appropriately use them and how to identify the right patient. I agreed and said that my job is to educate those doctors about the products and how to initiate them and titrate them. I reviewed Butrans and intermezzo products reviewing all key selling messages. Dr said that she really likes Butrans because of the administration mode and said she recommends it to anyone who is having issues with short acting opioids. Dr said it is also a product that she said is safe and effective. I reviewed the adverse events, application sites and skin prep. Explained all information about intermezzo and she said she sees herself using it.
PPLPMDL0020000001	Fairlwan	OH	44333	2/6/2013	Quick message in his hallway. Showed dr the new Butrans piece showing dosing and titration for opioid experienced and naive patients. Explained the new copy cards. Dr said he likes Butrans and has seen good results. I asked him to continue prescribing and he agreed.
PPLPMDL0020000001	Bedford	OH	44146	2/6/2013	Dr Moufawad said he doesn't feel like he has been seeing many new patients lately & has not started as many people on Butrans recently as he had in the months past. I asked if that is due to something specifically due to Butrans. He said there is nothing wrong with Butrans, it is just that many of the new patients he has seen lately have been on high doses of opioids, so he is not taking them as new patients because they are drug seeking. I asked if he was saying that patients on high doses of opioids when they are referred to him are viewed by him as drug seeking. He said not necessarily. He went on to explain that he will almost always see a patient at least once, but if they are on high doses of opioids & are unresponsive to the idea of attempting to decrease the doses, he likely will send them elsewhere once he determines that because to him that is drug-seeking behavior. I showed him the table displaying initiation doses/range of patients for Butrans & asked if he follows this chart as a gauge as to if someone is beyond the Butrans range & may be a candidate for another therapy such as OxyContin. Dr Moufawad said he does, adding that he has found more success than he would have thought with the 5mgc dose, although he does titrate when necessary. He said he gets patients on a long-acting option as soon as he can. I asked if he would continue to choose Butrans as a first long-acting opioid if they fall within the range & OxyContin for those beyond Butrans. He said he would.
PPLPMDL0020000001	Parma	OH	44129	2/6/2013	Quick call- Caught Elaine between patients & reviewed Butrans dosing with her, per Dawn's request. Reminded her that patients can be titrated after 3 days if necessary. She said she thinks she has it now & then went into another room. Reviewed initiation/titration guide with Dawn & gave her one to keep on hand.
PPLPMDL0020000001	Akron	OH	44310	2/6/2013	Some to for minute through window along with Char. I recapped our last discussion and told dr that I want to ensure he has the resources to make the bond between his patients and my products as strong as possible. Dr said he likes that advantage because his hope is to keep his patients on the medicine they need. I referenced the Butrans information guide and discussed intermezzo. I asked dr what his thoughts on intermezzo are? Dr said he does not like prescribing sleep aids but intermezzo because the dose is low and it is a different indication. I asked dr to try and identify a patient and to just try it. Dr agreed.
PPLPMDL0020000001	Maple Heights	OH	44137	2/6/2013	Spoke with technician as Jim was too busy. Gave her Intermezzo pharmacy information. She said she hadn't heard of it. She said if they do not have it in stock, they are willing to order medications for customers, so getting it in shouldn't be a problem. Discussed updated Butrans & OxyContin savings information. She agreed to give the information to Jim when he was available.
PPLPMDL0020000001	Copley	OH	44321	2/6/2013	Discussion with dr in his office about taking advantage of the resources available for him and his patients to aid him in managing pain. I asked dr to continue to identify his commercially insured patients on ultram or Vicodin that are failing. I explained the patient information guides and the help that it can give his patients and discussed the partners against pain webkey. I asked dr if he thinks these resources would be helpful and dr said yes. I asked if he has seen any of his recent Butrans starts back in the office or have called in and he said no which makes him happy!
PPLPMDL0020000001	North Olmsted	OH	44070	2/6/2013	Made a drop-in visit to speak w/ D.O.N., Erica Wood on scheduling educational in-services. Spoke w/ receptionist, Sandi Cost, she stated, "Erica is in a Medicare meeting until 11:00 ( 30 more minutes) Left my BC

	Parma	OH	44129	2/6/2013	Delivered Insight 1 to Dr Salama & asked what impact these type of discontinuations have on his practice & ability to manage his patients' pain. He said he finds that if a patient is in legitimate pain, switching from short-acting opioids to a long-acting option is not difficult at all. He said those who discontinue are typically people who may not be taking pain medication for the right reasons. He said when this happens, he sends the patient elsewhere for care because that is not the type of medicine he practices. I agreed that care & discretion should be used when prescribing any opioid medication, including Butrans & OxyContin. Dr Salama said Butrans is a wonderful medication & he has tried it in several patients. I told him it always seems like he really does like Butrans, but yet I don't get the sense that he is using very much of it since he has not been going through savings cards as much as he used to. He said the problem is that younger patients who come to see him are typically on higher doses of opioids, 8 Percocet per day, for example, & therefore are beyond the Butrans range. He said the patients who he would like to use it in are those who are older. Reviewed managed care & savings information. I asked if he would at least try to identify additional Butrans patients, perhaps in the 50-60 yr old range. He agreed. I asked if he would agree that OxyContin is a good medication. He said yes, but its stigma prevents him from using it. Gave Intermezzo information pack
PPLPMDL0020000001	Hudson	OH	44236	2/6/2013	Led with insight and dr said he does a pretty good job with it but when it happens with any product it sets him back. I asked him what he does then? Dr said he must reevaluate the patients pain and determines if he is going to treat or refer. Dr said that all patients are different and it does take time to determine those types of things. I told him that Purdue has tons of resources that can help his patients bond with our products stronger. I discussed all Butrans, OxyContin and intermezzo key selling messages. Dr said that he does not use much OxyContin anymore but feels comfortable w/ Butrans but said he has found it difficult trying to get patients to use it when they have taken a lot of IR opioids for many years. I told dr to initiate Butrans earlier in the treatment plan and it may help. Reviewed approximate conversions, adverse events, and applications sites. I showed him the patient information guides and their value to his patients. I asked dr if it makes sense to initiate when a patient is failing Ultram to initiate Butrans instead of going to another IR opioid? Dr said it does and said he will
PPLPMDL0020000001	Warrensville Heights	OH	44122	2/6/2013	Quick call- Reviewed with Dr Zivic 7 tablet strengths of Butrans, pointing out intermediate doses. He just waited, thanked me, & walked away. Reviewed broad managed care coverage for OxyContin with Michelle. She said she does not have a problem with OxyContin being covered.
	TWINSBURG	OH	44087	2/7/2013	Spoke with Amy, pharmacist, & gave her Intermezzo pharmacy information, pointing out 3 key points. She said they have a customer on it who is doing well. She added that the patient had tried other sleep aids in the past, but she did not like them, so she is very happy to have Intermezzo now. Also gave her Butrans & OxyContin updated savings cards. She said she doesn't see much movement of Butrans because Suboxone seems to be the preferred medication. I reviewed that Butrans is only for pain & is not equivalent to Suboxone. Amy said she did not realize this & was happy to know that. Reviewed appropriate patient type/range. She said that helped her understand who Butrans is for.
PPLPMDL0020000001	Akron	OH	44312	2/7/2013	Good discussion over lunch about all products. Janet knew about OxyContin but not Butrans or intermezzo. I discussed indication, dosing, appropriate patients and conversions from oxycodone to OxyContin. Gave full presentation on Butrans and intermezzo discussing all key selling messages. I asked Janet if she would see herself using Butrans for a patient uncontrolled on a IR opioid? Janet said she would and thinks it is a novel approach to pain management especially since it is a 7 day patch and a CII. I asked her if she would try it and she agreed. Janet said that she also thinks intermezzo is a good product and agreed to find patients to use it. Discussed all savings cards and left information for Dr Lonsdorf.
PPLPMDL0020000001	Twinsburg	OH	44087	2/7/2013	Spoke with pharmacist, Bob, & gave him intermezzo pharmacy information. Pointed out 3 key points. He said he was aware of intermezzo but they do not stock it due to lack of activity. He added that it can be ordered in next day if someone gets a prescription. He asked about savings for IR. I let him know it is part of Relay Health's e-voucher. Gave him new trial/savings cards for Butrans & OxyContin & explained how to use & eligibility
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/7/2013	Placed call to D.O.N. Deb Keller, to set up appt. to meet and discuss pain & pain management educational opportunities. N/A, left msg. 330-777-5002
PPLPMDL0020000001	Akron	OH	44313	2/7/2013	Made a drop-in visit to meet w/ Richard Lynch to discuss pain & pain management educational opportunities. I introduced myself and explained Purdue's NE Program. He stated that he is new to this position and does not have an office yet. He asked if we could set up something for next month, so he can get his feet on the ground. Appt was scheduled for March 5 @ 1:00
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	2/7/2013	Spoke to Amy about intermezzo. Amy said she had a prescription come through last week so she ordered the 1.75 dose. Discussed the indication, limitations of use, dosing and copy cards. Amy said she did not know about doses for men and women and also said she just thought it was a low dose Ambien. She thanked me for the clarification. Discussed Butrans/nin appropriate starting dose and how to titrate. She said she only has about 3
PPLPMDL0020000001	Stow	OH	44224	2/7/2013	Discussed drs ability to continue to be efficient with his prescribing of medicines and looking at patient type specifics. I recapped the last call saying that he likes Butrans but the Medicare coverage makes it tough. I told dr that I'm guessing that he has patients with commercial insurance that would be appropriate for Butrans. I reviewed the Scott case profile and made sure dr knew how to initiate Butrans starting dose at 10mcg for that patient. I asked dr if he has patients that fit that profile? Dr said he might and agreed to look for them. I provided intermezzo dosing, indication, limitations of use and asked him to prescribe. Dr asked what the price is for intermezzo? I told dr that I did not know and told him I was sure he could find it out.
PPLPMDL0020000001	Uniontown	OH	44685	2/7/2013	Quick introduction to intermezzo. Reviewed indication, limitations of use, dosing and copy cards. Left pharmacy flash card.
PPLPMDL0020000001	Parma	OH	44134	2/7/2013	Dr Hernandez said he couldn't talk today due to getting a late start & a long line of patients waiting. He said he has written both Butrans & OxyContin this week. I let him know I would return another day & told him I have been thinking about his practice & would want to get his thoughts on when to use short-acting opioids & when to use long-acting. He said that would be good. He said he was OK on savings information & hasn't had cost issues with Butrans since he saw me last.
PPLPMDL0020000001	Stow	OH	44224	2/7/2013	Continued discussion about Butrans and intermezzo along with dr and bailey. Recapped the insight with dr and told her that when using Purdue products she has options for resources to help in increase the bond between the patient and their medicine. Dr said she likes that. I reviewed the Scott profile for Butrans and asked her if she would feel comfortable using Butrans for a patient like Scott. Dr said the product makes sense but she needs to determine if the patient is treatable by her or she needs to refer out. Explained intermezzo dosing, indication, and limitations for use. I asked dr if she would try it and dr said ok.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/7/2013	Discussed new OxyContin copy cards with dr and Liz. I asked if there have been any new OxyContin prescriptions in the last week or two. Dr told me he is always prescribing. I asked if he has other extended release agents he goes to. Dr said he does not like Opana because it is not efficacious. Dr said he does like Nucynta because it works but is difficult to get approved. I reviewed the managed care with dr and asked for him to continue
	Tallmadge	OH	44278	2/7/2013	I asked dr what he does when he has a patient on Ultram who is not getting enough analgesia? Dr said that most of his patients on ultram are only taking 3-4 50mg doses a day and that the patients are therapeutically stable. I asked him if and when the patient on Ultram is NOT therapeutically stable if Butrans makes sense? Dr said maybe. I asked him if he has patients on Vicodin? Dr said yes. I reviewed the Vicodin patient profile and asked him if it makes sense to go to Butrans when the patient is not therapeutically stable? Dr said maybe and he does not want to treat chronic pain? I asked dr if he has a ceiling dose for either product before he makes the decision to move to another product? Dr said if he has a patient on a short acting for 3 months or longer he refers out. I asked him if he believes that he can manage a patients pain beyond ultram or Vicodin will he use Butrans? Dr said maybe. I asked dr if Butrans is in his e-scribe databases. Dr looked and said both Butrans and intermezzo are with all appropriate doses. Gave quick review of intermezzo with indication and dosing.
PPLPMDL0020000001	Fairlawn	OH	44333	2/7/2013	Met w/ Staff Development Coordinator, Michelle Williams, introduced myself and purpose of visit. Unbranded and Branded Materials were reviewed. When I asked Michelle, if she was familiar with Butrans, She stated, "yes we have used it on Hospice patients." She also was excited about intermezzo and felt that there could be a need for that as well. Upon reviewing the Laxative Line w/ her, she said, "The staff needs educated on constipation immediately, that seems that our staff has a big problem recognizing that with our residents." She then said that she was going to forward the branded information to their NP, Pat Long and their Medical Director, Dr. Robert Norman. I asked, if there was a possibility for me to meet w/ them. Michelle stated that Pat works on Tuesdays & Thursdays and Dr. Norman is there quite frequently. An in-service on constipation was scheduled for 3/5 @ 2:30, Michelle said that I could meet w/ Pat Long at that time. A 2nd in-service on Pain was scheduled for 3/20 @ 2:30, which I will plan on meeting Dr. Norman on that day. I confirmed # of beds as 81, including LTC, Skilled & Hospice. She explained that they were restructuring their facility as "households", meaning that all 3 floors will be independent of each other. They also have an Assisted Living as well as Independent Living facility on the same grounds. Michelle stated that only about 20% of their residents are currently taking some type of pain medication. She said, "I know, thats not alot."<font color=blue>cb>WOOLFKA added notes on 02/15/2013</font>Good documentation of call notes
PPLPMDL0020000001	Akron	OH	44305	2/7/2013	I led with the insight again and asked dr what he is doing when a patient either stops taking an extended release opioid or switches from one product to another. Dr said that he must start over to determine what is the best medicine to prescribe to the dr. Dr said he likes that option on the Butrans patch for patients that cannot or should not take short acting narcotics. I told him that I guess that it takes a considerable amount of time to make those decisions? Dr said it does and it is frustrating. I told dr that Butrans is an excellent option for those patients who fail a short acting and have a condition that an IR product may not be the best option. I told dr that I want to be a resource for him and provide him and his patients with the tools necessary to strengthen the bond between his patients and their medicines. Dr said he would very much like what I can provide. I gave him the pain assessment comfort guide and told him I want to discuss other resources for my products each time I come in. Dr agreed.
PPLPMDL0020000001	Independence	OH	44131	2/8/2013	Stopped Dr Jack between patients & told him I just had one direct, quick question for him. I asked him why not give Butrans a try for some appropriate patients in his practice today. He said he doesn't know. I reminded him that he has told me that he has a patient on it, who he has told me is doing well. He said that is correct. I asked why then not allow other patients who are appropriate to try it- especially if they have commercial insurance & are not currently getting adequate analgesia. Dr Jack said it makes sense to use a long-acting option when a patient's condition is chronic. I agreed & asked again why not allow some appropriate patients to try it to see if it benefits them. He said he guesses he has nothing to lose. I agreed. I asked if that meant he was going to write it & he said he would.
PPLPMDL0020000001	Akron	OH	44333	2/8/2013	Dr started out by asking me if all the doses of OxyContin have been reformulation. I handed him the field card and told him to read the card. I asked him why he asked? Dr said that he heard that the 10 and 15mg doses were not reformulated. I asked if he heard this or read this information. Dr said that he heard it. I told dr that he needs to rely on me for information about OxyContin. Dr agreed that he would going forward. Dr said that it is becoming more difficult to get Butrans approved. I asked where and he said he couldn't remember. I told dr that I will review the formulary with him on my next visit.
PPLPMDL0020000001	Akron	OH	44320	2/8/2013	Short discussion about the Nancy Vicodin profile and I asked her if it makes sense for her to identify a patient like her in the practice? Dr said she is working on it. Nothing else learned.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	2/8/2013	Placed follow-up phone call to ADDON, Debbie Lovette to discuss future in-service opportunities. AN in-service was scheduled on Constipation for 3/1 @ 2:45(15-18 will be in attendance)
PPLPMDL0020000001	Akron	OH	44320	2/8/2013	I asked dr if the office has a policy about how pain patients need to be treated before pain management specialists get involved? Dr said that Dr Bonyo is trying to set a 2 week treatment period and if the patient is not under control in that time period then the patients gets referred. I asked if a patient gets initiated on Butrans when would you see the patient back? Dr said in two weeks. I told dr that it may not be long enough for Butrans since it is a 7 day patch. Dr said possibly and I need to take it up with him. Reviewed the Nancy Vicodin profile and asked her to TRY it in a patient like her.
PPLPMDL0020000001	Parma	OH	44129	2/8/2013	Delivered insight 1 to Dr Roheny & asked how it impacts his practice when this occurs. He didn't respond. I told him I was asking because it is my true goal to partner with him as well as his staff to provide resources & tools that he can use in treating patients with our extended-release opioids like Butrans & OxyContin. Dr Roheny said he would like me to bring resources like a pain contract fo his practice. I let him know I would bring him any information I could find & reminded him about Purdue/CP.com & Partners Against Pain. Left Intermezzo information packet.
PPLPMDL0020000001	Parma	OH	44129	2/8/2013	Spoke with pharmacist, Beth, & gave her Intermezzo pharmacy information, pointing out 3 key points. She said they were auto-shipped Intermezzo, both strengths, & it has been sitting on her shelf ever since. Reviewed indication/patient type & discussed savings through e-voucher for eligible candidates. Also updated her Butrans & OxyContin savings programs & reviewed card usage. She said the OxyContin ones will be particularly helpful as she can think of at least one person with a co-pay that is well over \$100. Beth also said she does have Butrans in stock & has had some customers on it.
PPLPMDL0020000001	Richmond Heights	OH	44143	2/8/2013	Made a visit to Wellness Director, Joan Southard, L.P.N. @ 216-289-9800 to set up appt. to meet & discuss educational opportunities on pain & Pain management. Joan was not in the office today. Left BC
PPLPMDL0020000001	Akron	OH	44319	2/8/2013	I told dr that I have a solution for his patients that are either failing on Vicodin or those that he does not want to up titrate the Vicodin based on patients still in pain. I reviewed the case study on Vicodin and told dr that he should use Butrans for his Medco, Medical Mutual and Caresource patients and explained copy card. Dr said he understood it but is concerned that his patients won't want to take it. I told him he needs to educate his patients about Butrans and gave him a patient information guide. Dr said ok and he will give it a try.
PPLPMDL0020000001	Fairlawn	OH	44333	2/8/2013	Gave review of intermezzo and asked if they has seen any more prescriptions? Jessica said she has not filled anymore but has the 1.75mg dose in stock. I explained the difference in doses for men and women as well as those 65+ gave Jessica the initiation and titration guide for her reference and reminded her that titration can happen at 72 hours.
PPLPMDL0020000001					

	Independence	OH	44131	2/8/2013	Delivered Insight 1 to Dr Pai. He interrupted me, shaking his head "no" & said "not in my practice." Dr Pai said he finds that if these patients do discontinue, it is to switch to another long-acting option. He said patients in real pain like long-acting opioids in his experience. I agreed that he should be cautious in prescribing & asked what else he attributes a lower discontinuation rate to- what processes does he have in place during those first 35 days to ensure the patient has the best possible experience with the medication. He said he talks to the patient & explains why he is giving them a long-acting option. He went on to add that another big reason patients discontinue is because of managed care coverage changes. He said plans will cover something, then they change. He referenced an OxyContin patient on Caresource & one on Medicare D UHC. I asked what I, as the rep, can do to help him in his practice with initiating OxyContin or Butrans. He said nothing & that he doesn't use patient education & sometimes even forgets to bring savings. I let him know I could help Jill learn about savings as well so she can help him with that. Dr Pai said patients aged 50-60 who may be appropriate for Butrans tend to not have any insurance, which he added is unfortunate because that is where he would like to use it. I let him know I would continue to look for tools that may help him & his patients. Gave Intermezzo packet of information & delivered indication.
PPLPMDL0020000001	Akron	OH	44319	2/8/2013	Discussed Intermezzo dosing, indication and limitations for use. Showed the pharmacy card. Gave quick review of Butrans indication and appropriate starts dose. Nothing else learned.
PPLPMDL0020000001	Akron	OH	44312	2/8/2013	Good discussion with dr about his frustrations with treating his patients in pain. Dr said that it is very difficult too try and figure out how to get a patients pain under control. I dr talked about how his patients come to him on multiple short acting medicines and he feels he is in over his head and that he gets nervous on how hard the DEA and FDA is coming down on I restricting pain management. I told dr that Butrans is a product that is administered through a transdermal system and that if his patients are dissatisfied with their current therapy why would you not use a product he has not used before? Dr agreed. I explained Butrans indication, dosing, and how it is a CII/7 day transdermal patch. I told him to at least try it clinically in the right patient, which I explained, with the right formulary and to let the product speak for itself.
PPLPMDL0020000001	Akron	OH	44312	2/8/2013	Short talk over coffee about his recent Butrans patient. Dr started off by telling me that he has not heard back from the patient about cost, efficacy or adverse events so he is glad that all things are good. I asked when he has the patient coming back in and he said in a couple of weeks. I asked him if the efficacy meets or exceeds his or the patient expectations will you continue to use more Butrans? Dr said that he will for sure. I gave him the Intermezzo dosing card and reviewed the indication, dosing and limitations of use. I asked dr if he feels he could find a place for it? Dr said he does think he will use it. Nothing else learned.
PPLPMDL0020000001	Solon	OH	44139	2/11/2013	Spoke with Julie, nurse, (Dr Zaidi on vacation) & reviewed updates to OxyContin savings program. She said she has enough cards for now. Reviewed Butrans appropriate patient type. I asked what her role entails. She said she does a little of everything, acting as the office manager as well as dealing with patients. She said she takes messages from them regarding various issues & also speaks to patients in the office at times. She was unsure of any utilization of Butrans by Dr Zaidi but said it did sound like a good option. Asked her to give Dr Zaidi Intermezzo packet of information & she agreed, saying she had never heard of it. I delivered indication, dosing, & patient type
PPLPMDL0020000001	Richmond Heights Parma	OH OH	44143 44129	2/11/2013 2/11/2013	Placed a follow-up phone call to Aldona Bur, N/A left Msg. Spoke with Linda, MA, & reviewed Butrans & OxyContin savings, also giving an overview of managed care coverage for each. I asked what her role in the office involves. She said she schedules appointments, talks to patients, gives savings information on medications on occasion, & takes messages from patients. I asked if she is who they talk to if a medication either isn't working, is giving adverse events, or costs too much. She said she is. I asked if formulary grids & savings information is useful for her. She said sometimes. She agreed to give Dr Laluk Intermezzo packet of information. Linda said she has seen the advertisements on TV & knew the indication. Gave OTC
PPLPMDL0020000001	Beachwood	OH	44122	2/11/2013	Quick call- Dr Myton-Craig said she didn't have time today, adding that she will write Butrans when she sees a patient who meets the clinical criteria plus has commercial insurance or BWC. She then walked into a room. Spent time with Tammy & gave her Butrans information to keep at her desk as she couldn't find the others I have left her.
PPLPMDL0020000001	Shaker Heights	OH	44122	2/11/2013	Spoke with Doug, pharmacist, & presented Intermezzo pharmacy information. He said he has never heard of Intermezzo & was sure they do not stock it. Reviewed key points with him. Also let him know savings for Intermezzo is part of the e-voucher. Gave new Butrans & OxyContin savings cards & discussed updates.
PPLPMDL0020000001	Chagrin Falls	OH	44022	2/11/2013	Quick call- Saw Dr Rood at the window. Passed back information on savings card updates for Butrans & OxyContin along with Intermezzo packet. He just thanked me & walked away. Spoke with MA Sherry & reviewed savings information in more detail, also giving her OTC samples. Delivered Intermezzo indication & dosing information.
PPLPMDL0020000001	Akron	OH	44309	2/11/2013	1. Introduce myself to Frederick that include products and resources 2. Try to gain an appointment
PPLPMDL0020000001	Beachwood	OH	44122	2/11/2013	Quick call- Dr Warren said he didn't have time. Delivered first part of Insight 1 & let him know that my goal was to partner with him & his staff to help reduce discontinuations specifically for OxyContin & Butrans by providing them with all the tools & information possible, helping them help their patients. Also gave Intermezzo information packet.
PPLPMDL0020000001	Akron	OH	44333	2/11/2013	Doctor told me that he recently titrated a male patient with chronic low back pain from 10mcg to 20mcg. Patient told dr that he was not getting any pain relief even with the 20mcg. Patient had commercial insurance but cloaked cost was too high. Dr did not have any cost information. I discussed with dr that some patients may not have a positive experience and even though a vast majority of his patients experience has been positive, he will have patients that Butrans will not work well. Dr said despite a couple of experiences that have not been positive, he still believes in Butrans and will continue prescribing. I gave dr a quick review of the initiation and titration guide and asked him to continue to follow. Quick mention of Intermezzo dosing and indication.
PPLPMDL0020000001	Akron	OH	44303	2/11/2013	I introduced Intermezzo but Rod said he knew about it because he had seen the commercial and said he thought it sounds like a good medicine at is needed. I explained the indication, limitations of use and dosing differences. Rod said he didn't know there was a men's and women's dose. He asked about formulary coverage and told him I am still waiting on it which he thought was weird. I explained new OxyContin copay cards and he has he continues to fill it occasionally. He has not filled a Butrans prescription yet.
PPLPMDL0020000001	Akron	OH	44313	2/11/2013	Discussed Intermezzo indication, limitations of use and doses. Tom(pharmacist) said that he has filled one prescription. I asked him if he could give me any specific information about cost or plan and he said he was to busy to look for it. I explained the new Butrans copay card specifics. Tom said he has a few patients on Butrans and said that the patients have good response to it. Nooning else learned.
PPLPMDL0020000001	Akron	OH	44333	2/11/2013	I asked dr if he had implemented any of the resources we discussed on the last visit. Dr said he has not had time yet and to speak with Marsha about it. I told him that the Butrans experience kits are the most important resource he has to strengthen the bond between His patients and Butrans. Dr said he gave one out already. I asked if it was a new patient and he said yes. I reminded dr to use Butrans for his BWC and Caresource patients like we discussed when they meet the indication. I explained new Butrans copay cards to Marsha and the value to of the Butrans patient information guides and they are to be given to the patient at the time of the
PPLPMDL0020000001	Akron	OH	44333	2/11/2013	Speaking with Jen at window and dr walked up. I asked if patients are able to get OxyContin at a good price or if they have been having to due more PA's an normal. Dr and Jen both said that OxyContin goes pretty smoothly and do not have too many issues with coverage. I asked dr to continue to move his Percocet patients to the q12h OxyContin. Discussed Butrans formulary coverage based on their patients coverage. I explained the Aetna win and explained the Caresource win. Dr said he has not used Butrans for too many Caresource patients but he said that it certainly will make it easier to prescribe for that population. I asked dr to use his experience kits.
PPLPMDL0020000001	Parma Heights	OH	44130	2/11/2013	Left the Intermezzo dosing guide and explained to Jen. Jen said they have lots of copay cards in Canton.
PPLPMDL0020000001	Fairlawn	OH	44333	2/11/2013	Made a drop-in visit to speak w/ D.O.N., Katherine Myers to set up appt. to discuss educational opportunities and schedule in-service. Spoke w/ receptionist, Helen who said Katherine is in a "First Path" meeting. Left my BC w/ handouts.
PPLPMDL0020000001	Parma	OH	44129	2/11/2013	Good discussion, but a confusing one, surrounding insight. I asked dr about his experiences surrounding discontinuation rates in his practice with his patients on extended release opioids? Dr said that if patients of his stop taking their extended release opioid it is because they have felt they don't need it anymore because their pain has reduced. I asked dr if his patients are being placed on short acting opioids? Dr said not typically. Dr said that it he sees a patient on an opioid it is usually following a surgical procedure and the opioid has been prescribed initially by the surgeon. Dr said he will either continue the opioid or discontinue based on the patients pain level. I asked dr if he believes that a patient of his must understand why they are being placed on a certain medication and that the more a patient understands what and why they are taking it would make them feel more comfortable taking it? Dr said he agrees with that. I discussed the resources available for my products and discussed the partners against pain resources. Dr wanted the web key and Butrans information guides. Reviewed the OxyContin and Butrans patient types and importance of initiating appropriately for each. Dr agreed to continue prescribing and that he will look for the right patients we discussed.
PPLPMDL0020000001	Akron	OH	44309	2/11/2013	While on my way to making a drop-in visit, I rec'd a phone call from ADON, Jasvir Brar, inquiring about the NE program from my BC that I left from a previous visit. I explained that I was actually was on my way to her facility to see if I could meet with her. She told me to come ahead. Upon arrival, I introduced myself and the NE program. I reviewed unbranded and branded materials with her and explained the educational opportunities at no cost. 178 bed facility was confirmed and consists of skilled, LTC and Hospice. The CPP is Skilled Care out of Twinsburg. I asked if it would be possible to meet with the Medical Director, Thomas Mandat and Jasvir said that would not be a problem. When I asked if they had a NP on staff, she said, "yes, her name is Tammy Pasale. Jasvir suggested that I call to set up an appt. to meet w/ her. Jasvir said that she will talk w/ the staff Development Coordinator, Kim Barber and have her call me to set up an in-service on Pain for March. Our meeting was cut short d/t Jasvir being called to an emergency. Left BC and unbranded/branded Materials
PPLPMDL0020000001	Cleveland	OH	44130	2/12/2013	1.Learn about her role as new Clinical Educator Coordinator 2.Understand more about Case Management Department 3.Determine Needs for Education 4.Present Purdue Resources 4.Determine if they have a Member Newsletter for Pain Info
PPLPMDL0020000001	Cleveland	OH	44130	2/12/2013	Caught Dr Popa at the window- Positioned OxyContin, with broad formulary coverage for appropriate patients who are taking Percocet around-the-clock chronically as a q12h dosing option. Dr Popa just walked away. Spoke with Renee & asked what her role in the office involves. She said she talks to patients on the phone, takes messages, & checks patients in. I asked if she does anything with regard to medications. She said not really, adding that she gives those calls to nurses typically, but does take messages regarding medications at times. I asked if they give out savings information when they have it. She said they try but sometimes just get too busy to do it. I asked what I can do, as a rep, to make things easier for her or the other staff members. She said she can't think of anything.
PPLPMDL0020000001	Hudson	OH	44236	2/12/2013	Reviewed OxyContin broad formulary coverage from commercial to Part D plans, including the majority of AARP patients. Positioned Butrans once weekly for appropriate patients who have moderate to severe pain from a chronic condition. Dr Diab just thanked me & walked into a room.
PPLPMDL0020000001	Tallmadge	OH	44278	2/12/2013	Discussed drs it look on treating his patients pain. Dr said that the practice has adopted the philosophy that they do not treat anything but acute pain. I explained Butrans and Intermezzo. Discussed Butrans dosing, titration, appropriate starting dose, appropriate patients, and patient savings. Intermezzo dosing specifics, indication, limitations of use. Dr said he may use Butrans only in a situation where the patient must wait for 2 months to get into pain management and said that Intermezzo will be a product that he will use.
PPLPMDL0020000001	Uniontown	OH	44685	2/12/2013	Discussed drs it look on treating his patients pain. Dr said that the practice has adopted the philosophy that they do not treat anything but acute pain. I explained Butrans and Intermezzo. Discussed Butrans dosing, titration, appropriate starting dose, appropriate patients, and patient savings. Intermezzo dosing specifics, indication, limitations of use. Dr said he will not use ANY scheduled product for his patients but he does see the need for Intermezzo for those that are not already taking Ambien and have sleep maintenance problems. Dr said he likes that it is sublingual and prn.
PPLPMDL0020000001	Shaker Heights	OH	44122	2/12/2013	Discussed appropriate patients for OxyContin and Butrans. Dr told me that she is done prescribing CII products. I asked why and she said because CII's are for pain management. I asked her if Butrans is in the cards at all for her to prescribe? She said possibly but the patients she spoke to about it doing want patches. I told dr about the resources available to back up when she is speaking to her patients about Purdue products. I told me to leave information and she will ok it over. Nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44130	2/12/2013	Reminded Dr Agarwal of the information regarding extended-release opioid medication discontinuations & told him it was my goal to partner with him as well as his staff to provide resources & tools for OxyContin & Butrans in effort to give him & his patients the most success possible when starting these medication. He just waved & walked away.
PPLPMDL0020000001					Spoke with pharmacist, Lauren, & gave her Intermezzo pharmacy piece. Pointed out 3 key points. She said she has not dispensed any nor do they stock it. Updated her on Butrans & OxyContin savings cards & discussed eligibility requirements for usage. She said they do have some customers on Butrans & also carry OxyContin. She said the cards would help with the ever-rising co-pays that customers seem to have.

	Cleveland	OH	44130	2/12/2013	Dr Fedorko said he hasn't found anyone for Butrans yet. He added that "no one" wants to pay for medications anymore, so he always has to write what is cheap. I told him I understand it can appear that way sometimes & let him know I was there as a resource to provide tools to help him know what plans have favorable coverage specifically for my products, Butrans & OxyContin. I asked what I can provide him & his staff with that would help them ensure patients who he does decide to prescribe for have an opportunity to try the medications at the lowest out-of-pocket cost possible. He said it doesn't matter because they just deny the script anyway. <font color=blue><b>CHUDAKOB's query on 02/21/2013</b></font>-Ashleigh, instead of asking what you can provide, think about just providing him something based on your conversation. Usually asking physicians what we can provide leads them to tell you nothing or what Fedorko said, as they do not know what we have to provide. Make sense<font color=green><b>APSEGAS's response on 02/21/2013</b></font>-Yes. I plan to use the pain management kit for this.<font color=blue><b>CHUDAKOB added notes on 02/24/2013</b></font>-Ok. Thanks! I know you will do a great job with it.
PPLPMDL0020000001	Alakon	OH	44333	2/12/2013	I handed dr the OxyContin FPI and conversion guide. I told dr that indeed all 7 doses are the same and to read the FPI and conversion guide. Dr said he will review. Nothing else learned.
PPLPMDL0020000001	North Hampton	OH	45349	2/12/2013	Invitation drop off
PPLPMDL0020000001	North Olmsted	OH	44070	2/12/2013	Spoke w/ D.O.N., Erica Wood on setting up educational in-services. She stated that at this time she is not able to participate d/t low census. She cannot pay her nurses to attend any in-services and they do not have monthly staff meetings scheduled. She asked for me to contact her in April. 440-779-6900
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/12/2013	Short discussion about Butrans patient profiles with Scott and Nancy. Explained new patient savings cards with Butrans and asked him to continue identifying new patients. Dr said he continues to be impressed with it and asked when Medicare will pick it up? I told dr I didn't know but to continue focusing on the commercial patient who meets the indication.
PPLPMDL0020000001	Parma	OH	44129	2/12/2013	Dr Khoobball apologized, saying he hasn't had anyone to put on Butrans, but he thinks for the right type of patient it would be a good option. He showed me that he has his initiation guide I gave him in the event that a patient who he thinks is appropriate presents. Reviewed appropriate starting doses & titration ability after 3 days if necessary. I asked Dr Khoobball what processes he has in place when initiating a medication to ensure success for the patient. He said he spends time with his patients & talks to them about their medicines but that is it. I asked if resources such as patient education & pain assessment tools are helpful. He said he guesses but he just does not treat a lot of pain. I let him know I can provide resources like these for Butrans so that when he does decide to prescribe, he & his patient have the tools necessary to ensure the best possible experience with the medication. Gave him some patient information booklets.<font color=blue><b>CHUDAKOB added notes on 02/21/2013</b></font>-It will be interesting to see how he responds to insight #2. Look forward to reading that note
PPLPMDL0020000001	Munroe Falls	OH	44262	2/12/2013	Short discussion about her patient selection for Butrans and discussed resources. Dr said she looked over both case studies and said she would remember to continue looking for those types of patients. I asked her to initiate properly and to titrate when necessary every 72 hours. Dr said she likes the pain guides I gave her and said she will use. I asked her to continue using the information guides.
PPLPMDL0020000001	Tallmadge	OH	44278	2/12/2013	Spoke to pharmacist again about intermezzo and asked if she thinks the product has a market place? She said she thinks it does but asked about insurance coverage. I told her I don't have information yet but the coverage is getting better. I ensured that the intermezzo indication is different than any other zolpidem product. I explained Butrans dosing and titration and showed the placebo patch. Pharmacy is stocking the 10 and 20mcg doses.
PPLPMDL0020000001	Euclid	OH	44117	2/12/2013	Placed a call to speak w/ D.O.N., Kathy Nemeth to set up an appt. to discuss educational in-service opportunities. N/A Left Msg. on her voice-mail.
PPLPMDL0020000001	Strongsville	OH	44136	2/12/2013	Spoke with Megan, pharmacist, & gave her pharmacist information for Intermezzo, pointing out 3 key points. She said she has not seen any activity for Intermezzo, but was familiar with it. Reviewed updates for Butrans trial/savings cards & showed each one. She said they do have several customers who get Butrans. She said she is surprised it is not more popular given the patient type, adding that she supposes it is due to physicians being overly comfortable with writing hydrocodone chronically. She also said she read recently that that "they" are trying to make hydrocodone a CII instead of CIII in effort to cut back on utilization of it. Reminded her of abuse/addiction potential of all opioid medications, including Butrans & OxyContin. She said they have many cancer patients who get relief from OxyContin. Provided new savings cards & updated her on program.
PPLPMDL0020000001	Tallmadge	OH	44278	2/12/2013	Good discussion surrounding Butrans and intermezzo. Discussed all key selling points with each product. Dr said he may be more open than others in the practice in possibly using Butrans. Dr said that in the times where the patient can't get into pain management and are in severe pain, he might see the need to provide the initial prescription. Dr said he lied the transdermal application and that it is a CIII. Dr said he sees himself using intermezzo because he knows that many of his patients have complained of middle of the night awakening. I asked for his commitment and he agreed to give it a try.
PPLPMDL0020000001	Parma	OH	44129	2/13/2013	Dr Al-Abousi said she hasn't used Butrans. She said when a patient has chronic back pain, she refers to pain management because those tend to be the more difficult cases where patients have tried "everything" & "nothing" is working. She said she would think of Butrans if she has someone in severe pain. I showed her appropriate range of patients & pointed out that if the patient is on more than 80 mg morphine (40mg hydrocodone or oxycodone) per day, they are out of the appropriate range. Discussed possibility of Butrans for appropriate patients aged 50-60 who have pain from osteoarthritis. Discussed Butrans as a CII opioid with abuse & addiction potential. Explained that CII means she can call it in & write up to 5 refills in a 6 month period. Showed patient information booklet. I asked if she discussed possibility of titration up front with a patient when starting them on a medication. She said she always does. I told her this is a good thing to do. Also showed her pain management kit & pointed out pain assessment tools & pain agreement. She said these are good tools & said she would use some of them in her practice. Dr Al-Abousi said she uses OxyContin for severe or cancer pain or in some of her nursing home patients.
PPLPMDL0020000001	Parma	OH	44129	2/13/2013	I asked Dr Taylor what she thinks contributes to discontinuations of long-acting opioids most frequently. She said people know what medication they want when they come in & they will just discontinue anything that isn't that medication. She said she is paranoid about OH laws regarding pain management & chronic opioid therapy. I reminded her that there are patients in legitimate pain who can still benefit from opioid medications & our goal was to make her as comfortable treating those patients as possible. She said she recently started doing drug screening & I told her this was a great tool to use & should help give her the confidence to treat appropriate patients. She said Butrans is the only long-acting opioid she prescribes. I asked her to tell me about a patient type who she would try Butrans on. She said no one. She added that she is not starting any new patients on OxyContin either. She said she's taking no new patients at all & isn't switching anyone's medications at this time. Asked why keep patients on Vicodin around-the-clock chronically when they could be appropriate for medications like Butrans. She said it is difficult to take patients off or taper them down. Gave her pain assessment tools & sample pain agreement from the pain management kit & she said that would be very helpful in her being less paranoid & comfortable with treating these patients. I let her know I had many tools that could help her & would follow up on these tools.
PPLPMDL0020000001	Parma	OH	44134	2/13/2013	Dr Hernandez said he continues to have clinical success with Butrans & uses it "all the time". He said he recently had a patient tell him that a CVS or Walgreens told a patient that they are no longer going to order branded medication & will only carry generics. I told him I had not heard that from anywhere else. He added that he also had a patient who has Anthem insurance for prescription coverage & has a deductible on the plan. When she went to use the trial card, the pharmacy would not allow her to use it. I asked if it was a Medicare plan & he said it definitely was not. I let him know I would look into this at that CVS location. I reminded Dr Hernandez that he has told me many times of the success he has had with treating patients who were on Opana or OxyContin who are getting relief from Butrans 20mcg, but I wanted to talk more about patients on the other end of the spectrum, such as those taking hydrocodone 4-6 times a day. He said he just had a patient start on 5mcg Butrans who had been referred by a chiropractor who had multiple herniated discs. He said he just wrote it yesterday, so he will let me know how the patient does. Asked what the clinical benefit of keeping patients on hydrocodone around-the-clock chronically would be, since so many physicians seem to do that. He said there is none & that doctors only do that because they are lazy. Asked if his goal is to get patients on long-acting opioids as soon as possible. He said his goal is to get pts out of pain.
PPLPMDL0020000001	Solon	OH	44139	2/13/2013	Placed call to Staff Development Coordinator, Gretta Redus to discuss pain & pain management educational opportunities. I was informed that Gretta is on vacation until Thursday. I left msg. on her voice-mail.
PPLPMDL0020000001	Twinsburg	OH	44087	2/13/2013	Placed call to Jody Smith to discuss pain & pain management educational opportunities. N/A, left msg. on her voice-mail.
PPLPMDL0020000001	Cleveland	OH	44135	2/13/2013	Placed a call to the D.O.N., Dan Rivera, I introduced myself and the NE Program. He stated, "all our education is pre-arranged through our regional office and they set up all our education. I asked, if he was affiliated w/ the other ManorCare facilities in the area and he said, "yes." I did explain to him that I am currently working with them. He said that he would be meeting w/ Rebecca from their Regional Office this week and he will talk with her about this educational opportunity. He asked for me to call him back on 2/25 to discuss further.
PPLPMDL0020000001	Beachwood	OH	44122	2/13/2013	Placed follow-up phone call to DON, Stephanie Forsythe to discuss pain & pain management educational opportunities. N/A, left msg. 216-831-4303 ext. 2893
PPLPMDL0020000001	Solon	OH	44139	2/13/2013	Placed call to D.O.N. Judith Sawtner, to reschedule appt. from 1/29, to discuss pain & pain management educational opportunities at no cost. N/A, Left msg on her voice-mail
PPLPMDL0020000001	Alakon	OH	44333	2/13/2013	Discussed additional experience kits for Butrans with dr explaining it as a great resource to help strengthen the bond between his patients and their medicine. dr agreed and said he just started someone zoo day afternoon who came to see him asking about Butrans. Dr told me that the patient said she is highly allergic to many medicines and researched Butrans and said it sounds like it would be a good option for her. Dr said he initiated her on the 10mcg dose because she was taking 20mg of hydrocodone a day. Dr. asked about metabolism and elimination of Butrans since the patient asked. Dr said he looked it up but wanted confirmation. I discussed the appropriate sections in the FPI with him.
PPLPMDL0020000001	Richmond Heights	OH	44143	2/13/2013	Made a visit to Wellness Director, Joan Southard, L.P.N. @ 216-289-9800 to set up appt. to meet & discuss educational opportunities on pain & Pain management. Joan was not in the office today. Left BC & branded materials
PPLPMDL0020000001	Alakon	OH	44313	2/13/2013	Spoke to Tina and the doctor through the window about formulary coverage with OxyContin. I review plan coverage specific to their practice and asked if they have had any issues with coverage or unusual PA's? Dr said one of the reasons he uses OxyContin is because it is covered so well and he doesn't have to worry about an issues. Tina agreed and said she gets the call backs and does the approvals and has not had any for a while. I told dr that his top 4 prescription plans in his practice Medco, medical mutual, BWC and Caresource are all preferred. I explained the Caresource PA. Dr said he remembers me taking about it. I told dr to use Butrans when a patient falling on a short acting and he doesn't want to up titrate the short acting to move to Butrans. I asked dr if he will try it in his next Vicodin patient before he decide to titrate? Dr said he will.
PPLPMDL0020000001	Alakon	OH	44320	2/13/2013	I asked dr to walk me through a Vicodin patient and how he would initiate someone who was taking 20mg/day? Dr said he high he would start at the 10mcg as he was looking at the initiation and titration guide. I told dr he was right and that I was sure he had many patients that wild meet the indication. Dr said he agreed and asked bat cost. I asked dr if he knew which prescription plans were most important? Dr said I needed to speak to Rhonda or Wanda about coverage. Rhonda was off for the day.
PPLPMDL0020000001	Parma	OH	44129	2/13/2013	Dr Kalin said one of the patients he put on Butrans experienced tachycardia & anxiety. He said the patient had been on opioids around-the-clock for years prior to starting Butrans. Asked if he allows supplemental analgesia. He said usually not & asked if he should. Discussed that patients who are already on opioids between 15-40mg per day of hydrocodone or oxycodone would start at 10mcg & could take supplemental analgesia if necessary, especially during the early stages of Butrans therapy. He said that makes sense & added that this patient probably was showing signs of withdrawal. Dr Kalin said he likes Butrans & would use it for pts taking 4-6 hydrocodone or oxycodone per day. I asked what his philosophy on using short-acting opioids vs long-acting. He said if it is a acute condition, short-acting should be used, but if it was a chronic condition, long-acting would be appropriate. He said he feels most comfortable with Methadone because he has the most experience with it & it also works on receptors other than the mu opioid receptor, so he likes those qualities as well. He told me about a patient who he has who came to him on 20mg 3 times a day of OxyContin, well-controlled. He said he keeps him on this dose. I asked if he would consider titrating to 30mg q12h, pointing out that OxyContin should be dosed q12h, not 3 times a day. He said he knows that, but the patient is steady & he wouldn't feel comfortable dosing OxyContin higher, he would switch to Methadone.
PPLPMDL0020000001	Stow	OH	44224	2/13/2013	Discussed intermezzo indication, dosing specifics, and limitations of use. Explained the 5 free pills and \$45 off coupon. Pharmacist said they they have not filled any but can see the need for it. I explained the Butrans indication, dosing and patient types. The pharmacy tech Steve asked about dosing in relation to short acting products. I reviewed the approximate conversion chart and titration of Butrans. Pharmacy has the 5 mcg in stock.
PPLPMDL0020000001	Stow	OH	44224	2/13/2013	Introduced intermezzo with Corey explains indication, dosing and limitations of use. He said he has not filled any but had seen the commercials. He agreed that it is a necessary product. I reviewed Butrans and he said he knew it well. He continues to see some Butrans prescriptions but admitted that most go through Bressis pharmacy.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	2/13/2013	Led with the insight with both drs in practice over lunch. Dr said that she does not typically prescribe extended release opioids except for Butrans. Both drs said they don't think of Butrans of a true extended release opioid because it is a patch and is very low dose. The drs said that discontinuation is a problem and that is why they take the time with their patients explaining the product they are giving to their patient. I spoke about the resources available to help strengthen the bond between Butrans and their patients. Discussed patient information guide, Butrans experience program, assessment guides and new videos on meditation, qi gong and Tai Chi. Both drs tight it was a great idea for items to provide for their patients. I gave short introduction to intermezzo explaining the indication, dosing specifics and limitations of use. Dr Azem said that sleep disorders is one of their specialties And thought intermezzo is a great fit. I asked for continued business which they both granted because of great results.
PPLPMDL0020000001					



PPLPMDL0020000001	Parma	OH	44129	2/13/2013	Introduced pain assessment kit to Dr Gigliotti & showed pain assessment tools & pain contract example that he can implement in his practice. He asked for copies & said he would use those in his practice, adding he thought that was a good idea. I told him now, when he has a patient, he will have all the tools necessary to decide if he thinks they are a good candidate for opioid therapy. Discussed Butrans as a once weekly CII opioid with abuse & addiction potential. Explained that CII means that the prescription can be called in & patients can have up to 5 refills in a 6 month period. Reviewed patient experience kit contents. Dr Gigliotti said he would use the pain assessment information.
PPLPMDL0020000001	Richmond Heights	OH	44143	2/13/2013	Made a drop-in visit to speak w/ Aldona Bur, spoke w/ receptionist Darlene, Aldona was not available. While talking w/ Darlene, she stated that Susan LaDolce was no longer there and they have a new D.O.N., Kelly Rossnagel, who was currently in a meeting. left BC and handouts
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	2/13/2013	Led with the insight with both drs in practice over lunch. Dr said that she does not typically prescribe extended release opioids except for Butrans. Both drs said they don't think of Butrans of a true extended release opioid because it is a patch and is very low dose. The drs said that discontinuation is a problem and that is why they take the time with their patients explaining the product they are giving to their patient. I spoke about the resources available to help strengthen the bond between Butrans and their patients. Discussed patient information guide, Butrans experience program, assessment guides and new videos on meditation, qi gong and Tai Chi. Both drs tight it was a great idea for items to provide for their patients. I gave short introduction to intermezzo explaining the indication, dosing specifics and limitations of use. Dr said that sleep disorders is one of their specialties And thought intermezzo is a great fit. I asked for continued business which they both granted because of great results.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/14/2013	Hello at window and asked about him using Butrans. Dr said he used it for a patient that had been through NSAIDs, and Ultram and has chronic low back pain. Dr said he initiated on the 5mcg dose and said he hopes it goes well. I gave him the ultram and Vicodin patient profiles and asked him to continue to identify appropriate patients. I reminded him to titrate if necessary every 72 hours. Gave dr new formulary flash card.
PPLPMDL0020000001	Parma	OH	44129	2/14/2013	I showed Dr Roheny the pain management kit & walked him through the pain assessment tools & sample pain contract. He looked through the book & said he thought these were good resources. I asked if he would implement them in his practice & he said yes. I told him I wanted him to feel comfortable & confident in treating the appropriate patients in his practice with opioids when the time arises. I told him the more documentation & information about the patient he has, the more at ease he could feel in prescribing for appropriate patients. I asked if he finds that when he starts patients on short-acting opioids, he ends up continuing the patient month after month because their condition ends up being chronic. He said that happens often. I asked what the clinical benefit of keeping a patient like that on short-acting opioids around-the-clock is. He said there is none. I told him this is an example of a situation where he may find Butrans to be an appropriate option. He said his understanding is that coverage is not very good. I told him this is not necessarily the case & reviewed coverage. He looked at his schedule & said there was one patient who was on there who is taking tramadol chronically who has commercial insurance. Showed initiation guide & showed how to find the recommended starting dose of Butrans. Discussed ability to titrate after 3 days & recommended having the patient call after 3 days. Discussed ability to take supplemental analgesia. He said he would try it today
PPLPMDL0020000001	Parma	OH	44134	2/14/2013	Spoke with Dave, pharmacist, & gave him Intermezzo pharmacy self information. Discussed indication & patient type, & pointed out that there is no generic equivalent to Intermezzo. He said they don't stock it & he has seen a few prescriptions, but insurance is not covering it, so he does not end up dispensing it. Discussed coverage. I asked him about the patient who Dr Hernandez told me about with Anthem commercial coverage who this CVS location allegedly would not allow the patient to use the trial card. Dave said that is not their policy & unless the patient had Anthem Medicare coverage. Dave said this information upsets him because that is not the way they do business. He said he will be sure to enforce this with current staff to ensure it does not happen again.
PPLPMDL0020000001	Richmond Heights	OH	44143	2/14/2013	rec'd a phone call from NE, Aldona Bur to schedule in-service on Pain/Pain Assessment. In-Service scheduled for 2/25 @ 11am & 2:30PM for Nurses & STNA's. Between the two scheduled in-services, I will have a lunch meeting w. Aldona and discuss the NE Program & future in-service opportunities.
PPLPMDL0020000001	Westlake	OH	44145	2/14/2013	Met w/ D.O.N., Sue Williams, introduced myself & NE Program. I discuss pain & pain management education opportunities. unbranded/branded materials were reviewed. Current tool used to assess pain is Wong-Baker. Sue stated that the STNA's assess Residents pain routinely, and then report to the Nurses, upon assisting the Residents w/bathing. They currently use Vicodin to treat pain. The 130 bed facility is made up of Skilled and Hospice. I asked if it would be possible to meet w/ their Medical Director or NP. They have no NP on staff. She said, "I will pass the branded info. onto the Medical Director, he is not here that often and when he is, he is seeing residents." Sue felt this educational program would be of benefit to her staff. Sue said she would call me to schedule an in-service b/c she did not have her calendar present and she had a family meeting to get to.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	2/14/2013	Caught dr at window and dr asked me what my products are. I told him I was in analgesics and the products I had. Dr said he would be interested in talking to me about them in a lunch. Discussed product descriptions with Brittany(ma).
PPLPMDL0020000001	Akron	OH	44333	2/14/2013	Provided review of nap nancy and Scott Butrans profiles and asked her that after her gabapentin when the patient needs more will she initiate Butrans? Dr said she would go to Vicodin first then move to Butrans after they hit 3 pills/day. Agreed that it would be a good place to initiate Butrans and asked her to gain some clinical experience with it to know for herself. Dr agreed that she would. Explained intermezzo messages and asked her if it is applicable for her patients a. Dr said for sure and she has read up on it and likes that it is sublingual and prn.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/14/2013	Dr said he prescribed a Butrans the other day. I asked him about the patient and he said it was a patient taking 10mg/day of Percocet around the clock but was not getting enough pain relief. I asked him why Butrans and he said he didn't want to titrate the Percocet and the patient didn't mind the patch. Nothing else learned.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/14/2013	Spoke to Tiffany about intermezzo indication, limitations of use and dosing specifics. She has not filled any but said she sees a market for it. Explained Butrans dosing, indication, and titration.
PPLPMDL0020000001	Parma	OH	44129	2/14/2013	I asked Myra what typically triggers her to start a patient on Butrans. She said if the patient has long-lasting pain, or mentions having to wake up to take their pain medication at night, or just doesn't seem completely well-controlled on their short-acting medication, that is a Butrans candidate. She said she has had some people ask if they can put a new patch on before the 7 day period. She asked what to do. I asked if titration of Butrans would be an option for some of these patients. She said the one patient she is thinking of is on 10mcg, so she can increase them to 20mcg. Also reviewed ability to take supplemental analgesia with Butrans. Myra said there is a large psychological component. Discussed the importance of setting expectations with patients up-front that they will eventually decrease the amount of short-acting medication they take with Butrans, with the goal being for Butrans to provide the pain relief. Also discussed using acetaminophen or ibuprofen for supplemental analgesia. Spoke with Dawn & reviewed formulary information. She said they seem to be having problems with pharmacies with pharmacists telling patients that it is cheaper for them to take Vicodin, Ultram, or Methadone, trying to convince patients to change. Dawn agreed to keep a list of pharmacies that this is happening in so that I
PPLPMDL0020000001	cuyahoga falls	OH	44223	2/14/2013	Dr said he saw the information. Intermezzo that I left. Dr asked if it is low dose Ambien? I explained the indication, limitations of use and dosing specifics. I asked dr if he thought he would find a use for it? Dr said possibly.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/14/2013	Attempted to speak with Lisa about OxyContin formulary coverage but is no longer in the office. Dr said that they are still looking for another person to handle reimbursements. I told dr that OxyContin is extremely well covered on formulary and discussed coverages. Dr said he will continue to try to find patients for it. Nothing else learned.
PPLPMDL0020000001	C. Falls	OH	44223	2/14/2013	Discussed all products with Cindy. Introduced intermezzo as she did not have knowledge of the product. Explained indication, limitations of use, dosing specifics and copay cards. Cindy said she thinks it is a good product and there is a need for it. Cindy said it is important that I specify with pharmacists that intermezzo is NOT Ambien. Asked about prescriptions of Butrans or OxyContin? Cindy said for some reason the pain center is not sending patients to them of at least their initial prescription. Cindy said that their prices are considerably less expensive than other pharmacies especially for my products. I told her I will speak with th discharge nurses and doctors about why patients are not being sent to New Choice to fill their prescriptions. <font color=blue><b>CHUDAKOB's query on 02/21/2013</b></font>Cliff. Make sure you are not recommending pharmacies to physicians. If you ask them why they are not sending patients to that pharmacy that may give the implication that they should be. I would suggest staying away from discussing this with physicians. Make sense?<font color=green><b>REICHL's response on 02/22/2013</b></font>Yes<font color=blue><b>CHUDAKOB added notes on 02/24/2013</b></font>Ok. Thanks!
PPLPMDL0020000001	Westlake	OH	44145	2/14/2013	Made a drop-in visit to speak w/ D.O.N., Stephanie Finkenthal. Spoke w/ receptionist, Shirley Toth, introduced myself and purpose of visit. re; pain & pain management educational opportunities at no cost. Shirley stated, "an appt. is needed, but I will give her the message than you stopped by." Left BC and PAP handout
PPLPMDL0020000001	Westlake	OH	44145	2/14/2013	Made a drop-in visit to speak w/ D.O.N., Liz Williams, to reschedule in-service from December, spoke w/ receptionist, Casie who notified Liz. Casie said, "Liz is not able to meet w/ you right now." I left my BC and handouts
PPLPMDL0020000001	Parma	OH	44129	2/15/2013	Delivered Insight 1 to Dr Rakhit. He said he is disgusted with this country America & how it has created patients who are "literally like dirty dogs" on pain medications. He added that India, a poor country, does not have these issues with opioid abuse like we do here. I told Dr Rakhit that I understand his frustrations, but attempted to re-direct him to appropriate patients who can benefit from pain medications like opioids. I told him my goal was to help increase his comfort level in treating these appropriate patients. He said there aren't any. I offered the pain management kit resources & tools, letting him know these are designed for this purpose. He said he doesn't want to do it & that he hates these patients. I asked if he would agree that some patients legitimately need pain medications due to a chronically painful condition, reminding him that he has shared with me in the past that he has many patients on Percocet. I told him I was merely there to be a resource for my company's medications, OxyContin & Butrans. I explained that OxyContin is a q12h dose of the same medicine as patients get in Percocet, so if he has someone taking Percocet around-the-clock, they can take an equivalent dose of medication in q12h dosing. Showed conversion guide. I asked that if he has even one appropriate patient who fits the description, he try OxyContin for them. He said that did make sense he guesses.
PPLPMDL0020000001	Akron	OH	44319	2/15/2013	Explained intermezzo and Butrans dosing and indications. Technician Brandi said they were swamped and to leave information. Nothing else learned.
PPLPMDL0020000001	Fairlwan	OH	44333	2/15/2013	I asked dr if he has identified any additional patients for Butrans since his last one? Dr said he has started two or three patients but said he is confused on where to use it. I reviewed the new opioid experienced patient initiation guide and reviewed approximate conversions and patient types. Dr said he guesses he did understand because the patients he thought were candidates for Butrans are what I explained. I left dr with the patient profiles and told him I would follow up.
PPLPMDL0020000001	Cleveland	OH	44130	2/15/2013	Reminded Dr Kansal of or last conversation regarding discontinuations of extended-release opioids. He said patients don't like the long acting options because they like the feeling short-acting opioids offer. I asked what the clinical benefit of keeping a patient on short-acting opioids around-the-clock if their condition is chronic is. He said there isn't one, then said he had to go.
PPLPMDL0020000001	Akron	OH	44312	2/15/2013	Quick discussion in lab about her identifying patient for Butrans. Dr said he said she needs to get back t thinking what we discussed when it comes to finding patients. Dr said the tough thing is getting patients to agree with using a patch. I told her about using the information guides to back up what she tells the patient. Dr agreed.
PPLPMDL0020000001	Mayfield Heights	OH	44124	2/15/2013	Made drop-in visit to meet w/ Staff Development Coord., MaryAnne. Spoke w/ receptionist., Joan, she said, "She is not available, its best if you call and make an appt." left my BC w/ unbranded & branded handouts
PPLPMDL0020000001	Beachwood	OH	44122	2/15/2013	Dr Tabbaa said he couldn't stop to talk today, but asked that I come back another Friday at noon so that we could meet regarding OxyContin & Butrans. I told him I also had some general information regarding extended-release opioids & discontinuations & would want to discuss that further, also adding that I would introduce Intermezzo to him. Spoke with Allison & reviewed Intermezzo indication. She said Dr Tabbaa is getting a new nurse practitioner, Eileen Copola, so this will help free him up a bit.
PPLPMDL0020000001	Beachwood	OH	44122	2/15/2013	Made a drop-in visit. Spoke with receptionist, Shandana Holton, introduced self & purpose of visit. Re: Pain management educational opportunities at no cost. I asked to speak w/ the D.O.N., Phillis Tabbs, Shandana informed me that Phillis no longer worked there. The new D.O.N. is Susan LoDolce Previously @ Grande Pointe, Richmond Hts.) and she has only been here for 9 days. An appt. is recommended. Left BC and unbranded/branded
PPLPMDL0020000001	BEACHWOOD	OH	44122	2/15/2013	Spoke with Baltik, floater pharmacist, & gave him intermezzo pharmacy information, discussing 3 key points. He asked why someone would use it instead of other sleep aids. I reviewed indication again & asked if that was more clear. He said he understands now. Discussed updated Butrans & OxyContin savings cards & gave him new cards. Baltik said he has filled Butrans prescriptions at other locations.
PPLPMDL0020000001	Akron	OH	44310	2/15/2013	Dr said he saw the intermezzo commercial and wanted the scoop. I discussed e indication, limitations of use and specific dosing instructions. I asked dr if he would identify some patients? Dr said he would begin looking because he likes throw dosing. I asked dr if he wild AI's start to identify more patients for Butrans and to look for this w/ commercial insurance? Dr said he this Butrans works well but said he has tried it for Medicare patients and it was too expensive. I reviewed new formulary grid and asked him if those plans apply for prescription insurance in his practice? Dr said they do and will continue to look.
PPLPMDL0020000001	Parma	OH	44129	2/19/2013	Quick call. Followed-up on our recent conversation when Dr Roheny committed to writing Butrans for a female tramadol patient that day. He said unfortunately, this patient did not show up to the appointment, so he has not yet written Butrans. Reviewed appropriate patient type/range & showed formulary grid. I asked if he could find another patient this week & he said he would try.

	Independence	OH	44131	2/19/2013	I reminded Dr Sundaram of our previous conversation & let him know my goal is not to get him to write more pain medication, but rather to feel comfortable & confident in treating the right patients with opioids if he feels they are medically necessary for a patient. I showed him the pain management kit, letting him know I have multiple resources that, when implemented, can help with comfort level in treating pain in general. I showed patient history & pain contract sample. Dr Sundaram said he has implemented a few new things to assist him in appropriate patient selection, but wanted to see our tools to see if there was anything he could add. He was especially interested in the pain contract. He said he recently put one in place, but he was open to adding things or changing them. He said he really does hate treating pain. I told him I understand, but my goal is to advocate for the right patients, even if it is a small number in his practice. He said he thinks they are adding some pain management specialists at the office a few days a week, so he will be referring even more.
PPLPMDL0020000001	Uniontown	OH	44685	2/19/2013	I led with the insight with the doctor and he immediately told me that he does not have a history of prescribing extended release opioids and tried to avoid it. I asked why and he said that patients in chronic pain should be seeing a specialist. I asked him how he defines chronic? Dr said anyone in pain and taking an opioid for 3+ months. I asked if he considers Butrans as a product that fits that description? Dr said he can see himself using it for a patient that he feels he can manage and is on the up and up. I reviewed appropriate patients and initial dosing and titration. Dr said he will look for patients. Introduced intermezzo indication, limitations of use and dosing specifics. Dr said he has patients that meet the indication and will use it when the time comes,
PPLPMDL0020000001	Akron	OH	44313	2/19/2013	Led with insight with both drs and Dr Hershberger said that he does not have much discontinuation. Dr said the only discontinuation he has is when he changes a medicine from one to another. Good discussion about his practice and how he treats his patients in pain. Dr said he looked over my Butrans piece I left him last visit and said he is intrigued. I do, aimed all key selling messages and discussed appropriate patients with case studies. Dr said he can see himself using it for his patients that want more Vicodin. I explained appropriate starting dose. Dr said he tries to switch patients on IR oxycodone to OxyContin but said he is Leary at times using CII's because of the abuse potential. Dr said he likes that Butrans is a CII and is a 7 day patch. Dr said he would feel more comfortable using a patch instead of pills. Dr said he will try Butrans for a Vicodin patient. Explained intermezzo key selling messages.
PPLPMDL0020000001	Parma	OH	44134	2/19/2013	In-service on Pain/Pain Assessment was completed for the nursing Staff @ 2:15 & 3:15. Spoke w/ Linda Belford about future in-service opportunities. Scheduled an in-service on Key Terminology for 3/12 @ 2:15 & 3:15 and 3/19 & 3/21 @ 2:15 on Constipation
PPLPMDL0020000001	Uniontown	OH	44685	2/19/2013	Gave quick message about Butrans. I told her that on our last call we talked about the resources she can use for her patients she initiates on Butrans. I reviewed the information guide and the assessment guide as well as the new patient savings cards. Dr said she is trying to find patients. I led her with the case studies. Left intermezzo dosing and administration guide and OxyContin conversion guide.
PPLPMDL0020000001	Uniontown	OH	44685	2/19/2013	Spoke with Rosemary and Matt about intermezzo indication, limitations of use and dosing specifics. Neither pharmacist knew the dosing specifics based on sex and age. Pharmacy has the 1.75 mg dose. Matt said they just dispensed an intermezzo last week for the 1.75mg dose. Discussed the copy cards and 5 free pills. Explained Butrans dosing and titration and new copy cards. Rosemary said they have the 5 and 10mcg doses but have not filled any recently. I told pharmacists about the OxyContin dosing and they said they had all 7 doses in stock.
PPLPMDL0020000001	Parma	OH	44129	2/19/2013	Quick call- Dr Ortega said he just returned from a long trip to the Philippines so he has not started anyone new on Butrans or OxyContin to tell me about. I showed him the pain management kit & let him know I had these resources to share with him next time I come in that are designed to help him, his staff, & his patients with issues related to pain management. Dr Ortega said he wants to look at them but didn't have time today- he said to come back another time. Showed Cindy the kit & she said Dr Ortega would definitely be interested in tools like those even though they have several measures in place already. She added that they recently started urine drug screening. I told her this was a great way to help protect the practice. I asked if they used DARRS. Cindy said they do not as their computer connection is very slow. She said the pharmacists are usually pretty good about alerting them to problems. I encouraged her to have Dr Ortega look into signing up for it as a way for them to catch potential problems before even writing the prescription.
PPLPMDL0020000001	Akron	OH	44312	2/19/2013	Good discussion with dr on all products. I led with the insight and dr said he is trying to get patients down on opioids as much as possible but when a patient does discontinue a product it takes much more time to figure out the next course of action. I asked how it affects his staff? Dr said anytime a patients stops taking a medicine or is taking too much it slows his staff down. I told dr that Purdue products have many resources available for its products to help the patient become more educated about the medicine they are on. I discussed OxyContin dosing and conversions from oxycodone. Dr said he tries to get patients off of oxycodone and on hydrocodone. I asked why and he said because of the abuseability. I asked dr if it makes sense to move a patient that is failing. Oxycodone to the q12h oxycodone. Dr said he can understand the benefit of that. I reviewed case studies and asked for him to continue using. I explained all key selling messages for Butrans and explained product in detail. Dr said he can see the viability of Butrans for his tramadol patients who are in pain and want more. Dr said he will try Butrans in that setting. Explained intermezzo indication, limitations of use and dosing. Dr said he has patients that meeting he indication. Explained all copy cards.
PPLPMDL0020000001	Parma	OH	44129	2/19/2013	Made a drop-in visit to speak w/ ADON, Jasvir Brar and/or Staff Development Coordinator, Kim Barber to schedule unbranded in-service, neither were available to meet w/ me. Later, I called to speak w/ Jasvir, N/A left msg.
PPLPMDL0020000001	Uniontown	OH	44685	2/19/2013	Spoke to Barb out intermezzo discussing the indication, limitations of use and doing specifics. Barb said they have filled it once but only for about 10pills of the 1.75mg dose. Explained copy cards. Told Barb about Butrans and OxyContin and that comprehensive pain management is building a new office next to Giant Eagle and they may see an increase in prescriptions. I told Barb to ensure they had as many doses of Purdue products as they could. Especially OxyContin and Butrans.
PPLPMDL0020000001	Beachwood	OH	44122	2/20/2013	Quick call- Caught Roberta at the window. I passed back updated Butrans formulary grid & asked if she pays attention to that type of information before writing a prescription. She looked at the grid & asked about BWC, so I told her they are paying for it without prior authorization at this time. Reviewed appropriate patient type & asked her to recommend it to Dr Yokiel if she sees a patient who is appropriate for Butrans therapy.
PPLPMDL0020000001	Akron	OH	44320	2/20/2013	I asked all drs if they are telling me that the office has a policy to treat pain for two weeks then if the patient needs additional pain medicine that they refer to pain management is there room for Butrans? Dr Adams said she thinks there is because she would rather give a patient a 7 day patch for pain instead of a bunch of short acting pills. I told dr she must be very specific with her patient selection and reviewed patient types and managed care plans. Dr said she will continue to look for appropriate patients. I also asked if intermezzo will be used? Dr said she thinks so as well. I explained indication, limitations of use and dosing.
PPLPMDL0020000001	Parma	OH	44129	2/20/2013	Quick call- Showed Dr Chagin the pain management kit & reminded him that he has expressed interest in resources like this in the past. He said he didn't have time to review those today, but said I can come back to discuss them further because he does want this type of information. He also asked me if Butrans is on the hospital formulary. I told him that the pharmacist will order Butrans if requested.
PPLPMDL0020000001	Akron	OH	44310	2/20/2013	I told dr that he should continue looking for Butrans candidates that are his current patients taking up to 40 mg of Vicodin per day. Dr said that he knows he needs to keep looking and that Char usually tells him when he might have a Butrans candidate. Dr said he is going to implement the pain assessment comfort guide into his practice but will make a few changes. I explained the partners against pain web key to doctor and Char and reviewed the tools available on the website. They both thought it was pretty cool and will look at it. Char said that she will be the one reviewing the information and said she would.
PPLPMDL0020000001	N Royalton	OH	44133	2/20/2013	Spoke with Jeffery, pharmacist, & gave him intermezzo pharmacy information, going through 3 key points. He said he has ordered it before. Gave him new Butrans & OxyContin savings cards & updated him on savings programs. Also reviewed eligibility requirements.
PPLPMDL0020000001	Parma	OH	44129	2/20/2013	Elaine said she was too far behind to stop. I showed Butrans patient information booklet & encouraged her to give them to patients for whom she is initiating Butrans in effort to help the patient have the best experience possible with the medicine. She agreed. Spoke with Dawn who said she just got a Butrans prescription approved on Medicare D. She added that the pharmacist (at CVS on Madison in Cleveland) wanted to switch the patient to morphine, but she told him he cannot do that. I asked what she had to do to get it approved. She said she & Myra sat on the phone with the plan & argued with them until the plan relented. She said they gained approval for one year for that patient. Dawn said she doesn't have time to sit there & do that for every patient. I reminded her of favorable coverage for Butrans elsewhere, so she wouldn't likely end up in that position very frequently.
PPLPMDL0020000001	Beachwood	OH	44122	2/20/2013	I asked if she would do that on occasions when Myra or Elaine feels that Butrans is truly the best medication for that patient & she agreed.
PPLPMDL0020000001	Stow	OH	44224	2/20/2013	Quick call- I reminded Dr Yokiel that he had mentioned the importance of cost & coverage for medications & gave him updated formulary grids for Butrans & OxyContin. I asked if these would help him better keep track of coverage. He said he doesn't really have time to look up each medication on each person's plan. I suggested that spending this time up-front could help save his & his staff's time on the back end by helping to reduce call-backs due to non-coverage issues. He said that was a good point & walked away.
PPLPMDL0020000001	Copley	OH	44321	2/20/2013	Spoke to Carla(pharmacist) about intermezzo. Carla said she is familiar with it and has dispensed it a couple of times. I explained the indication, limitation of use and dosing specifics. Pharmacy has the 1.75 mg dose. I discussed Butrans doing and indication. Carla said that she has also filled Butrans a few times of the 5mcg dose and was thankful of the information.
PPLPMDL0020000001	Copley	OH	44321	2/20/2013	Discussed intermezzo with Kristen and explained the indication, limitations of use and dosing. Kristen asked how intermezzo is different than Ambien? I told her that intermezzo is for sleep maintenance middle of the night awakenings and Ambien is for sleep onset. I told her both should not be taken in the same night. They have the 3.5mg dose in stock and have dispensed a couple recently. I asked about the Relay Health patient savings for Butrans and OxyContin. Kristen said she didn't know about patient savings appearing in their system. She asked a technician and she told her they did have it and if the patient forgets to bring in their savings card the system will show the pharmacist the savings available. I explained the additional savings for Butrans and OxyContin.
PPLPMDL0020000001	Munroe Falls	OH	44262	2/20/2013	Continued discussion about insight and resources for Butrans. Dr said she has looked over the pain assessment guide and liked it and said she may use part of it. I asked if she has identified any new patients like Scott or nancy that we discussed last visits. Dr said no but she agrees with those patients. I introduced intermezzo and discussed indication, limitations of use and dosing specifics. Dr said she hears patients from time to time telling her that they have trouble getting back to sleep in the middle of the night and said he is interested in using it. I explained the copy cards which she said she will use.
PPLPMDL0020000001	Copley	OH	44321	2/20/2013	Discussed how Butrans is deal for patients failing on ultram and he doesn't want to titrate the dose who meet the indication. Dr reminded me he wrote a couple of prescriptions recently. I asked for him to give me some information on how the patients are doing? Dr said they are doing fine. I asked what fine means? Dr said he hasn't heard anything about them not being able to pay for it or calls about efficacy. I asked when the follow up appointment is scheduled after the initiation? Dr said one month. I reminded dr that Butrans is good for 28 days and it may be necessary to have a follow up before 30 days. Dr said thanks.
PPLPMDL0020000001	Akron	OH	44320	2/20/2013	Short discussion with doctor about his office policy on treating pain. Dr said he doesn't like treating because of the abuse potential and putting his practice at risk. I asked if there is room for Butrans? Dr said possibly but if it is not on Medicare it makes it difficult. I explained the patient type I'm looking for and formulary plans. Dr said he will try.
PPLPMDL0020000001	Akron	OH	44320	2/20/2013	Dr said she will not use OxyContin because of the office protocol and the abuseability. I discussed Butrans and intermezzo patient types and formulary plans. Discussed appropriate starting doses and patient types. Dr said she will look for patients.
PPLPMDL0020000001	Parma	OH	44134	2/20/2013	Dr Hernandez said he was very busy today so he didn't have much time. He said he is writing Butrans & OxyContin & hasn't had any problems in the last week. I let him know I visited the CVS pharmacy that he had had an issue with & asked him to keep me informed if he has any other problems with pharmacies & Butrans. He said he thinks pharmacists are telling patients that they aren't carrying branded drugs anymore. He added that Humana is sending letters to patients saying that they will no longer cover anything but generics. I gave him updated formulary grids & asked if references like these help him & Regina. He said he would keep them for reference. I encouraged him to use them to determine the likelihood of coverage of Butrans or OxyContin before patients even get to the pharmacy so that he can verify accuracy of claims of non-coverage. I reminded him, however, that each plan has many options for coverage, so he should not rely on the grids entirely.
PPLPMDL0020000001	Bedford	OH	44146	2/20/2013	I told Dr Moufawad that it seems his interest in Butrans has decreased somewhat & asked why he thinks this is. He said he does feel like he is using it & OxyContin more, it is just that recently (over the last couple of months) he has had an increase in the number of patients who are displaying drug seeking behaviors, so he has not been starting as many patients probably. He said he remembers awhile back when that seemed to be an issue, but then it decreased. However, now he is seeing more & more patients who are not in real pain, so he has to get rid of those patients. I agreed that he should only treat patients with legitimate pain & told him he is doing the right thing by screening so carefully. He said Opana is going generic, so he feels that OxyContin will have an even bigger role in the market. He said he is going to keep prescribing Butrans & OxyContin.
PPLPMDL0020000001	Bedford	OH	44146	2/20/2013	Spoke with technician as pharmacist was busy. Reviewed intermezzo indication & dosing. She said she hasn't heard of it. Discussed patient type. Also showed information sheets on Butrans & OxyContin savings programs. She agreed to share the information with the pharmacist as soon as he was available.
PPLPMDL0020000001	Akron	OH	44312	2/21/2013	Caught dr at window and asked him if he has any patients on Ultram or Vicodin who are failing with inadequate analgesia? Dr said he probably does but said Butrans is not covered on Medicare. I told dr that he is correct and asked him if he has patients with private prescription insurance? Dr said he does but mostly Medicare. Told dr to identify appropriate patients and handed him the profiles to review.

	Parma	OH	44134	2/21/2013	In-Service completed for the STNA's on Pain Management @ 2:15 & 3:15. total number in attendance was 22.<font color=blue><b>WOOLFKA's query on 03/12/2013</b></font>Did you use any unbranded materials or leave behind/pass out any of approved materials? Please clarify. Any information or feedback obtained during your in service?<font color=green><b>SCHULCY's response on 03/14/2013</b></font>Handed out and reviewed The Comfort Pain Assessment Guide & The Wong Baker Pain Scale w/ the STNA staff. Initiated interaction on the barriers that interfere w/ pain assessment/treatment in the elderly and on the consequences of unrelieved pain.The STNA's thought this in-service was very beneficial and a great review.<font color=blue><b>WOOLFKA added notes on 03/18/2013</b></font><b>Thank you
PPLPMDL0020000001	Parma	OH	44129	2/21/2013	I rec'd an e-mail from Staff Development Coordinator, Kim Barber who was given the information about our program from ADON, Jasvir Brar to follow-up. Kim was inquiring on length of presentation & available dates for March. Information e-mailed back to Kim.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/21/2013	Dr came to window and said that he had used Butrans. I asked him where and why he chose it? Dr said for a patient on ultram that he didn't want to titrate. I told him to please continue identifying patients like that. I showed him the information guide and asked him to hand them out for patients he initiates on Butrans. I gave him the dosing and titration piece and copy cards.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	2/21/2013	Spoke to dr through window and asked her if she has given out any of the videos from partners against pain? Dr said she has not yet but she will. Dr told me she had a patient she wanted to start on Butrans but the patient had SummaCare Med D plan and they would not approve it. SummaCare said the patient needed to fail on multiple other medicines before Butrans would be approved. I told dr that I will discuss it with Darlene and figure out the issue. Darlene said UHC commercial is also telling its patients to pay cash for their medicines and get reimbursed on the back end and it is making it difficult for her to get patients to take anything other than generics. I called Kendra (RAE) and explained the scenario. I will get back to Darlene to ask if it is an employer group or if the patient received a letter from UHC.<font color=blue><b>CHUDAKOB's query on 02/28/2013</b></font><b>Cliff, what videos are you speaking of from Partners against Pain?<font color=green><b>REICHCL's response on 03/02/2013</b></font>The videos we were auto shipped last year. They come in a tripack. Qui Gong, Tai Chi, and Meditation. As I look at them them, they are not partners against pain but they are a good resource and have found them useful.<font color=blue><b>CHUDAKOB's query on 03/02/2013</b></font><b>Those are no longer approved pieces and should not be handed out. I will forward the Marketing memo from September of last year stating this.<font color=green><b>REICHCL's response on 03/04/2013</b></font>No need to send the memo. I got it.<font color=blue><b>CHUDAKOB added notes on 03/09/2013</b></font><b>We discussed this on our work session and it was documented in the FCR.
PPLPMDL0020000001	Akron	OH	44312	2/21/2013	I recapped my last visit with dr discussing some of the resources available for him and his patients on Butrans. I showed him the information guide and asked him if he has used any of the BPEP kits? Dr said he has not had any new candidates and has not used any. I asked if he had any questions about the kits? Dr said no and said that he seeing them helping him and the patients. I asked dr to continue to identify those patients failing on IR
PPLPMDL0020000001	C. Falls	OH	44223	2/21/2013	Provided Cindy with new Butrans copy cards. Explained how the new cards are different with additional patient savings. She has not filled any in a while but said she expected to see ones for intermezzo. Explained the dosing, indication and limitations of use.
PPLPMDL0020000001	Parma	OH	44134	2/21/2013	Made a drop-in visit, spoke with the receptionist, Roseanne. Introduced myself & purpose of visit. Re: Pain & Pain Management Education. asked to speak w/ ADON, Cheryl Sigley. RoseAnne said, "it is a very busy day, its best if you call and make an appt." Left BC and PAP handouts.
PPLPMDL0020000001	Akron	OH	44310	2/22/2013	I reviewed each of the Butrans case studies and showed him the placebo patch. I asked dr if he understand the appropriate patient type and starting dose? Dr said yes. I asked if he will use Butrans for those patients who have private prescription insurance? Dr said he will try. I gave him an introduction to intermezzo and he said he knew about it. I explained the indication, limitations of use and dosing specifics. Dr said he thinks it is a good medicine and will try it. I told he to stick with private prescription insured patients.
PPLPMDL0020000001	Cleveland	OH	44122	2/22/2013	Conference call held with CareSource (OH) regarding their interest in Purdue's educational resources and live educational programs. CareSource was interested in holding a series of 3 "live" educational programs for their case managers. Dates were decided: March 8 (webinar only offering), April 19 (MSL to present from Dayton, webinar link for other sites), and May 10 (MSL present from Cleveland location, webinar link for other sites). Topics for the 3/8 program: Assessment and Is It Pain?, The Pain in the Elderly and Cognitive Impairment modules were selected for the April presentation. May topics TBD. Also reviewed the new Tele-Assessment toolkit. Care source expressed interest in reviewing the resource and requested copies be mailed to them.
PPLPMDL0020000001	Parma	OH	44129	2/22/2013	Rec'd a second e-mail from Kim Barber inquiring if there can be one in-service for the RN's & STNA's combined. Responded back to her e-mail today.
PPLPMDL0020000001	Westlake	OH	44145	2/22/2013	Placed a phone call to D.O.N., Sue Williams to follow-up from meeting on 2/14 to schedule in-service on Pain Management. I was informed by the receptionist that Sue was in a meeting, left msg. on her voicemail.
PPLPMDL0020000001	Cleveland	OH	44106	2/22/2013	Contacted the PI to inquire about any feedback regarding the recent PI Summit. He responded that he came away from the meeting feeling prepared to provide his staff with a "refresher" on the study. He also complimented the event noting, "I thought the summit was a great review of the current and future directions for pediatric pain research". Dr. Speicher gave permission for this statement to be used in OTR3001 study-related communications from Purdue to participating sites. He also noted disappointment that his pre-arranged travel itinerary required him to leave early and miss a portion of the panel discussion.Both observations were forwarded on to Clinical Operations for further consideration.
PPLPMDL0020000001	Uniontown	OH	44685	2/22/2013	Introduced intermezzo and explained the indication, limitations of use and dosing specifics. Brandi said they have not dispensed it but said it makes sense. I explained Butrans dosing, indication, titration and use of supplemental analgesia. Brandi said they have 1 person taking it and she said she thinks it is Dr Cain but was not sure.
PPLPMDL0020000001	Mogadore	OH	44260	2/22/2013	Asked to speak with dr up front and he came to the counter with the patient profiles I left. Dr asked me if I had any patient savings cards? I told dr I did and explained them. I asked dr why he is using Butrans? Dr said because he likes patches and likes that it is a CII. Dr thanked me for the cards and said he will continue using. I told him to review the profiles.
PPLPMDL0020000001	Akron	OH	44312	2/22/2013	Reviewed Nancy and Scott profiles for Butrans. Dr said she forgets about it but said its too expensive. Dr said she can't have her patients pay that much. I asked dr how she knows how much her patients are going to pay if she hasn't prescribed it? Dr said she looked up cash prices and its too expensive. I asked her if all her patients pay cash and doesn't she have any patients with commercial prescription plans? Dr said she does but someone is paying the difference. Dr said she will probably use Butrans but doesn't know when. I discussed intermezzo with doctor and she said she will probably not use it. I asked why and she said because she will prescribe a 5 mg zolpidem. I told her that the indication for intermezzo is for middle of the night awakenings and the patient must have 4 hours remaining of sleep.
PPLPMDL0020000001	Akron	OH	44319	2/22/2013	Some to Maria about intermezzo indication, limitations of use and dosing specifics. Pharmacy has 3 boxes of the 1.75 mg dose and they have dispensed. Maria said she has seen the commercials and had read up on the product. I reviewed Butrans dosing, CII, 7 day transdermal system. They have the 5 mcg in stock and do not have any current patients on Butrans.
PPLPMDL0020000001	Uniontown	OH	44685	2/22/2013	I told dr that his Ultram patients are good candidates for Butrans. I told him if those patients need more or are failing due to an adverse event, Butrans transdermal patch may be the answer if the patient meets the indication. Dr said ok and he has not fund any new recently. I asked him if he started a patient n intermezzo? Dr said no but will try.
PPLPMDL0020000001	Akron	OH	44305	2/22/2013	Spoke with dr about his BPEP resource and asked why he had not used any yet? Dr said that a lot of his patients have Medicare, Medicaid or cash. I told him that his top commercial plans are Medco and SummaCare prescription plans. I told dr to use the kits for those patients as the federally funded programs do not apply. Dr said ok and thanked me for the clarification.
PPLPMDL0020000001	Akron	OH	44319	2/22/2013	I asked dr if he had thought about candidates for Butrans? Dr said no but thinks it works well and dr said he would like to give his Vicodin patients another option instead of more pills. I told dr that a Butrans patient only has 4 patches in one month. I showed dr the placebo patch again and asked him to gain some clinical experience and allow Butrans to speak for itself. I told dr to use it for a commercially insured patient with good prescription insurance who meets the indication. I reminded him that Butrans is a CII.
PPLPMDL0020000001	Parma	OH	44134	2/25/2013	Quick call- Only got to see Dr Mandat briefly at the window. I passed back Butrans patient profile of Nancy & asked if this is a type of patient who he sees in his office. He said he didn't have time now & said he just doesn't have time for reps anymore. I told him my goal was to not waste his time, but rather to bring useful information for him, his staff, & his patients who are being treated for pain chronically, especially those on Butrans or OxyContin. He said to schedule lunch & then walked away.
PPLPMDL0020000001	Akron	OH	44333	2/25/2013	I asked dr if he has any current patients on Percocet who would be appropriate for the Q12h OxyContin? I showed him the profile of the oxycodone patient. Dr said he knows he has a lot and it can be really difficult to get them to move to OxyContin. I asked him what makes it difficult? Dr said his patients are resistant to change but he feels he does a pretty good job explaining the differences. I told him I have some things coming in the near future to help him with those patients. Dr said ok. I gave Jen the new OxyContin Med D formulary grid and Butrans patient profiles. I asked Jen if she hands out the product copy cards, etc? She said she does. I told her to ensure that new Butrans patients get the Butrans patient experience kits.
PPLPMDL0020000001	Parma	OH	44134	2/25/2013	Spoke with Tiffany & presented intermezzo pharmacy sell sheet, walking her through 3 key messages. She said she had read about intermezzo & had seen an ad on television. I let her know that because of DTC campaign, she may get more customer inquiries about intermezzo. Also discussed Butrans appropriate patient type & savings cards. Let her know Butrans & OxyContin monthly savings are part of relay health's e-voucher. She said that makes it easier for them.
PPLPMDL0020000001	Parma	OH	44129	2/25/2013	I presented the pain management kit & showed some of the pain assessment tools, the pain contract, & the patient history. Dr Ortega said it has been a long time since he updated his pain agreement & was interested to see ours to make changes & additions to his. He said he recently went to a conference where they had a law enforcement officer speaker. The speaker gave them various forms to reference & use in practice. Dr Ortega showed me the pain agreement they recommended- He asked what I thought. I told Dr Ortega he should look at the different versions & then decide what he thought was most necessary for his practice. He asked what other tools he should use. I stressed the importance of appropriate patient selection, telling him that documentation is necessary & key to protecting the practice. I asked if he uses OARRS. He said he doesn't & asked why use it. I told him this is another measure to protect the practice & gave him the information sheet, recommending that he sign up as soon as possible. He said he would do that. He asked how he should document Butrans patients vs those who are on. I asked why there would be a difference. He said patients who he puts on Butrans tend to get on it & then stay on it, doing well- not needing increases or extra meds. I told him to use his best judgement, reminding him that Butrans is still a CII opioid. Discussed OxyContin as a q12h dose of oxycodone. He asked if it was generic yet. I told him not at this time.
PPLPMDL0020000001	akron	OH	44333	2/25/2013	Quick message about the Nancy patient profile. I asked dr if he has seen any patients like nancy on Vicodin who is still in pain? Dr said he is seeing more and more patients since he went under UH and is hoping to find more candidates. Left dr with profile card and intermezzo dosing and administration card.
PPLPMDL0020000001	Akron	OH	44333	2/25/2013	Told dr at window to remember that Butrans is covered for his BWC patients and Caresource is covered with a PA. I explained the PA criteria with doctor and staff. I asked dr if he has used any of his Butrans experience kits? Dr said he is not sure and Marsha said no. I reminded dr what they are asked asked for new starts. Dr said ok and thanks for the workers compensation reminder.
PPLPMDL0020000001	Northfield Center	OH	44067	2/25/2013	Spoke with Katie & showed intermezzo pharmacy information. Discussed 3 key points with her. She said she does not remember ever dispensing any, but she had heard about it. Discussed Butrans & OxyContin updated savings cards & let her know they are automatically in their system through e-voucher.
PPLPMDL0020000001	Richmond Heights	OH	44143	2/25/2013	In-service completed on Pain Management for RN's & STNA's @ 11am & 2:30pm.
PPLPMDL0020000001	Cleveland	OH	44128	2/25/2013	Introduced myself & Purdue's products to Franklin, MA. Franklin said Dr Manning does not see reps. Explained that I have never spoken with Dr Manning about any of our products & it is possible no one has had the discussion although some of the products have not been out for very long. Franklin said he will not see reps even by appointment. I asked if I can leave clinical information, patient education, or savings information. He said Dr Manning will not accept any form of information of any kind from any reps.
PPLPMDL0020000001	Mayfield Heights	OH	44124	2/25/2013	Placed a follow-up phone call and spoke w/ Staff Development Coord., MaryAnne. Introduced myself and purpose of my call. MaryAnne stated, All ou education is usually done by corporate. I will talk w/my ADM. & D.O.N. and get back w/you. I explained that I have done in-services for other ManorCare facilities in the area. She took my name & phone number and said that she would get back w/ me.
PPLPMDL0020000001					

	Parma	OH	44129	2/25/2013	I followed-up with Dr Taylor & asked what results she is getting from using the pain assessment forms that we discussed last time. She said she has been sick & has not been in the office to use the forms yet. She added that she is still excited about using them & she will put them to use now. Dr Taylor went on to say that what she hopes she conveyed last time was that she really does not have a lot of patients for whom she is prescribing opioids, but she does want to use my products for those who are appropriate. I told her the goal of the assessment forms was to help her more thoroughly assess patients when they complain of pain as well as increase her comfort level for prescribing for those patients who are appropriate for opioids. Dr Taylor said there just aren't that many & she gets tired of playing "doc-cop". I told her I understand this frustration & my goal was just to assist her when possible by providing information & tools where applicable. She said again she plans to write Butrans as soon as she has someone for it.
PPLPMDL0020000001	Richmond Heights	OH	44143	2/25/2013	Made a visit to Wellness Director, Joan Southard, L.P.N. @ 216-289-9800 to set up appt. to meet & discuss educational opportunities on pain & Pain management. According to the receptionist, Joan was in a family meeting. Left BC & PAP materials.
	Fairlawn	OH	44333	2/25/2013	I asked Gilbert if he has dispensed any Intermezzo recently? Gilbert said he has been filling a 1 to over the last week or two. I asked who was prescribing and which dose. Gilbert said Dr Scott Higley at Falls Family practice has been sending patient to get Intermezzo. He said that both doses are being dispensed but more of the 3.5 mg dose. I asked him who orders the products when needed? He said him and Jessica do. I asked which dose is being utilized more? Gilbert said they dispense and order most of the 5mcg dose and said he can't understand why these doctors are not titrating their patients dose to 20mcg? I told him that I continue to work on that issue with my customers and told him that I think se are afraid to take their patients to the "max" dose. Gilbert said they dispense a lot of OxyContin and order most of 20, 40mg dose. I told him to use the copy cards for all the
PPLPMDL0020000001	Akron	OH	44333	2/25/2013	Introduced Intermezzo to Jim. I asked if he was familiar with it? Jim said he was and thought he remembered filling one a few weeks ago. He said it was the 1.75mg dose. I reviewed the indication, limitations of use and dosing. I asked if he has dispensed Butrans recently? He said no but maybe one of the other pharmacists may have. I reviewed dosing and appropriate starting dose. Explained copy cards and formulary flashcard.
PPLPMDL0020000001	Akron	OH	44311	2/25/2013	Discussed products with April who is the pharmacist. Explained indications for all products and key selling messages. April said that they fill a lot of medicines for Medicaid products. She wanted to know about coverage for my products. I explained coverage for products. April has not filled any Butrans but has had one Intermezzo. April said OxyContin is too expensive for many of their patients.
PPLPMDL0020000001	Cleveland	OH	44135	2/25/2013	Called to speak w/ D.O.N., Dan Rivera on educational opportunities. N/A left msg on his voice-mail
	Beachwood	OH	44122	2/25/2013	Quick call. Saw Dr Myton-Craig at the window. She said she wasn't seeing reps today & asked if I had any information I could just give/leave her. I showed pain management kit & told her this was a tool I would like to discuss with her when she has time to review a couple of the resources within which are designed to help her in assessing patients who have pain from a chronic condition. She said it would have to wait. I passed back updated Butrans & OxyContin formulary grids & let her know these are designed to help her determine up-front if Butrans or OxyContin are likely to be covered by a patient's insurance. She just walked away. Spoke with Tammy about the tools & she said to bring the pain management kit back because she does think Dr Myton-Craig would like them, it was just not a good time. I asked her to give her Intermezzo information & she agreed.
PPLPMDL0020000001	Independence	OH	44131	2/25/2013	Quick call- I showed Dr Trickett the pain management kit & pointed out pain assessment tools, also letting her know the kit contains other resources designed to assist physicians & their staff in obtaining as much information about the patient, their condition, & their pain as possible so the physician can make a more informed decision on who is appropriate for opioid therapy. Also reminded her of resources specific to Butrans & OxyContin, designed to give patients the best experience possible when initiating therapy. Dr Trickett said she uses OARRS & does have some forms in place, but would like to look at the book when she has more time. Spoke with Steve, who showed me their current paperwork for patients to fill out each time they come. He said he doesn't get involved in the forms & that Dr Trickett would be the one to determine what they could improve on.
	Beachwood	OH	44122	2/25/2013	Spoke with Shante', MA, who said Dr Warren was too busy today. She was unsure of any prescribing of Butrans or OxyContin. I reviewed managed care coverage with her & gave her grids. I asked who deals with managed care issues in the office, suggesting they see the grids as well. Shante' said she would give them to Donny, nurse, to keep at his desk. Shante' said she usually checks patients in & answers phones, but she fills in at other positions PRN. She said to check back another time to see Dr Warren.
PPLPMDL0020000001	Parma	OH	44129	2/26/2013	Dr Chagin said he really has been trying to find a patient for Butrans, he is just not treating much pain anymore. I asked if it is still true that he does keep some patients who are taking chronic pain medications. He said yes. I told him my goal was to help him be as comfortable as possible in treating those appropriate patients by providing resources & tools for his practice & patients. I told him I would help in knowing who the appropriate patient for Butrans & OxyContin are, so that when someone like that comes in, he will be ready to prescribe for them. Showed him pain management kit, pointing out some of the tools within. He looked over the pain contract & said it is very close to what he already has. Also showed assessment tools. I asked if he uses OARRS. He said he has the information for it, but he hasn't signed up yet. I told him this would be another tool he could use to protect the practice. I told him I realize he may not be treating as many patients for pain as he used to be, but I would imagine he has some who are appropriate for Butrans. Discussed appropriate patient type & managed care coverage, reminding him of the savings offers. I asked if he thinks he has one patients who he could try it on & he said he has a few. Discussed OxyContin as a q12h dosing option of oxycodone.
PPLPMDL0020000001	Cleveland	OH	44130	2/26/2013	Used core visual aid to point out that a patient who is taking Percocet 4 times per day chronically could get the same amount of medication in q12h dosing with OxyContin. Positioned Butrans for appropriate patients taking up to 80mg morphine equivalent per day.
PPLPMDL0020000001	Parma	OH	44129	2/26/2013	Positioned Butrans for appropriate patients taking up to 80mg oral morphine equivalent. Reviewed once weekly transdermal dosing. Dr Jugulion signed the Vermont compliance form stating that he does not ever practice in Vermont despite holding an active license there.
PPLPMDL0020000001	Cleveland	OH	44130	2/26/2013	Spoke with Allison & presented Intermezzo pharmacy sell sheet, discussing 3 key points. She said she thinks they have ordered it before & knows about it. Let her know it is part of Relay Health's e-voucher system. Reviewed Butrans & OxyContin savings programs & eligibility requirements for utilization.
PPLPMDL0020000001	Cleveland	OH	44130	2/26/2013	Another floater pharmacist was in- Introduced Intermezzo & showed pharmacy sell piece. Discussed 3 key messages & e-voucher. Also showed sell sheets for Butrans & OxyContin savings programs. Discussed eligibility requirements for all savings programs.
PPLPMDL0020000001	Akron	OH	44333	2/26/2013	I reviewed the OxyContin field card with dr and read the sections talking about when the reformulation took place and how the NEW 7 reformulated doses have the "OP" on them instead of the original "OC". I asked dr if he is comfortable with the fact that all 7 doses have been reformulated despite what he heard. Dr said he knows that know and thanked me for clarifying it. I showed dr the new dosing and titration card and asked how often he has had the need to titrate to the 20 mcg dose? Dr said not many and that most of his patients are on the 10mcg dose. I asked if those patients are also taking products for breakthrough pain? Dr said yes they are and that it is Vicodin for the most part that patients need to take. I asked if any have had to increase the quantity of supplemental analgesia? Dr said no. I told him that when he sees that he should titrate the dose. Dr agreed and said I asked Kim if she knew that the Lababidi group was moving into a new he office down the street? Kim said she did not but was happy to know it. I told her to ensure she has all doses of Butrans and OxyContin if they send patients to Ritzmans. Kim said they already have all Butrans and most of OxyContin except for 15 and 60mg. She said she will be sure to order some.
PPLPMDL0020000001	Akron	OH	44312	2/26/2013	Quick discussion with Dana Walker, Dr Jones and Dr Lababidi in Fairlawn. I asked all of them if they could identify patients like Scott or Nancy for Butrans and gave review of her profile. Dana said she will initiate Butrans for patients on Vicodin, Ultram, or even Percocet if dose is low enough. I asked what doses of IR she usually will make the switch to Butrans? She said it is different for each patients but most of the time it is 4 pills a day of IR opioids. I asked her to continue prescribing.
PPLPMDL0020000001	Parma	OH	44129	2/26/2013	Myra said she has been writing more & more Butrans. She said it seems to be working well & patients who really want to be helped & who understand why a long-acting option is good for them are the most successful with the transition. She said she has one patient who pay \$66 per patch because he likes the medication so much. Myra also told me again about the patient who has asked to put on a new patch prior to the 7 day dosing interval being up. I advised that she not allow the patient to put the new patch on sooner & asked her instead to consider titrating him to the next highest Butrans dose. She said this was a good idea & she plans to do it when she sees him next. I showed her the comfort assessment journal & walked her through the contents. She said this was an excellent tool & asked me for several more so she can give them to all the patients in effort to help them stay more tuned in to their treatment. I let her know I would order more.
PPLPMDL0020000001	Fairlawn	OH	44333	2/26/2013	Discussed nancy and Scott profiles with dr and asked him where he sees Butrans being utilized most in his practice? Dr said he finds it to work well when he starts a patient from Vicodin. Dr said if he doesn't want to titrate the Vicodin then Butrans is a good option. Dr said he likes the 7 day patch and his patients told him they like it. I asked dr to identify additional patients that are similar to the profiles we discussed. Dr said ok.
PPLPMDL0020000001	Mayfield Heights	OH	44124	2/26/2013	Spoke w Pharm D Christy. She told me about a recent call she had to make to Dr. Rebecca Cirino of Brecksville & how Dr. Cirino had written Intermezzo 3.5 mg for a female patient, and that she remembered that the last Purdue rep discussed gender specific dosing for the patients. I thanked her for catching the error & phoning the HCP AND requesting she change the Rx and write the correct 1.75. mg for her female patient, and the HCP appreciated the guidance. I left the Intermezzo Pharmacy Guide and FPI, which Christy said she will share w other Pharm D Steve. We also discussed Butrans and 5, 10 and 20 mcg/hr strengths available. She shared that they have a few concerpventions on Butrans. As for OxyContin, they keep OxyContin in a safe. I told her there are 7 doses avail for titration. They have all strengths of OxyContin. THEY ARE PART OF RELAY HEALTH NETWORK so patients will automatically get our product savings upon pick up of their Rx.
PPLPMDL0020000001	Mayfield Heights	OH	44124	2/26/2013	Spoke w pharmacist Giovanni Giardini. He says he has 2 boxes of Intermezzo 1.75 mg on shelf, but has not dispensed yet. He has 6 boxes of Butrans 5mcg/hr and two boxes Butrans 20 mcg/hr but has not dispensed recently. I showed him the Butrans patient guide and he put one on the shelf w the Butrans. He liked that resource for patients. Keeps OxyContin in a safe, and says they don't dispense that often. He has OxyContin 10, 15, 20, 40 and a little 60 mg left. I reminded him that OxyContin is available in 7 doses using the core visual aid. I also let him know we have savings cards available for all 3 products and that Butrans is now on preferred drug list for Aetna commercial lives.
PPLPMDL0020000001	Cleveland	OH	44130	2/26/2013	Dr Fedorko said he knows, Butrans. I showed him pain management kit & told him I actually wanted to show him something I thought would be helpful for him in his practice. I turned to pain contract sample & asked his thoughts on implementing something like this in his practice. He said he does have one, but he wanted to make a copy of ours because it looked "better" than what he is using. He said there is a big problem with opioids & told me about a former staff member who had been in trouble years ago for writing false prescriptions. He said he just doesn't have a lot of patients for Butrans & asked why he would write a more expensive medication for someone when they could just take Vicodin. I told him that I understand that he may not have a huge volume of patients for Butrans & added that my goal was to make him comfortable in treating the few who may benefit from his patient population. I pointed out favorable commercial coverage for Butrans & let him know if any of his patients do meet the criteria & have commercial insurance, they can try Butrans for little or no out-of-pocket cost. I asked if he thinks he has just one of those patients. He didn't answer, saying he had to go & then walked into a room. Spoke with Mindy & showed her pain contract. She made a copy.
PPLPMDL0020000001	Mayfield Village	OH	44143	2/26/2013	Very hectic day and one staff member quit (Sharon) and they have not replaced. Dr. Krishnan joined practice Feb. 1 and brought Melissa w him from old office. Found out he is only in Mondays in am; off Mon pm. he's in: Mon - Fri w no days off. Spent a good amount of time talking w Alex Tudini (ma). I let her know that I could not get a lunch appt until July, and could I say hello to Dr. Krishnan? He was too busy this afternoon, but I can stop back next week. Left a business card & product info w all 3 HCP's. Left Intermezzo flash cards w all 3 CNP's. Also left Butrans slim Jim w Dr. Krishnan. Alex asked if I would leave savings cards for each product, and she would place on each doctors' desk along w. my business card. Will stop back when less hectic. Went through all product info w Alex.
PPLPMDL0020000001	Akron	OH	44312	2/26/2013	Quick discussion in his office w the other HCP's present. I asked dr to continue identifying patients for OxyContin and to convert patients on IR oxycodone to q12h OxyContin. I reviewed Scott and nancy profiles and also asked him how his experience has been recently since he told me he has been using more of it? Dr said the results have been positive but has been difficult in getting patients to switch to a patch instead of a pill. I told dr about some of the patient resources available such as the information guide to help the patient understand the medicine better. Dr said he uses them because he knows Dana uses them a lot. Dr agreed to continue using Spoke w receptionists Carly & Beth. The office no longer schedules lunches. I asked to see Dr. Laham, and he brought me back into the office. He wanted to know what my background was prior to joining Purdue, and asked What's new? I shared w him the resources we have for patients w Butrans and he really liked the Butrans patient guides. I asked him if we could leave a few patient guides in each waiting room, and he said he would consider. He also asked if I would be leaving savings cards today. I left him savings cards for all 3 products. Dr. Laham said he'd be happy to meet me on site w one or two of his nursing staff for lunch. We were trying to coordinate a date this week, and when that didn't work, we settled on next Thursday March 7. He provided his cell phone and asked me to text him & remind him in am and he would let me know if we're meeting at Hillcrest office. I forgot to mention to him that we cannot text our customers per Purdue policy, so I will call rather, and leave him a message. He stated he would be in Beachwood area.
PPLPMDL0020000001					

PPLPMDL0020000001	Parma	OH	44129	2/26/2013	Shown core visual aid conversion from IR forms of oxycodone page & pointed out that patients taking Percocet 4 times per day can get an equivalent dose of medication in q12h OxyContin. Dr Moysaenko said he knows that & has patients on it, then walked away. Spoke with Susan & Shelley (MA's). Susan does most of the prior authorizations & Shelley does some as well. Susan also calls medications in to the pharmacy. Maria also helps with this. Gave formulary grids for Butrans & OxyContin. I asked if information like this helps them. They said the doctors just write what they want to & then they see if it is covered based on what the pharmacy or patient says. They said they do prior authorizations if necessary.
PPLPMDL0020000001	Parma	OH	44129	2/27/2013	I followed up with Dr Gigliotti & asked about his usage of the forms & tools we copied for him last time. He said he had forgotten about them & hasn't used them. He said he does not know where they are. He went on to say that he does want to start using them & thinks they are a good idea. I reviewed the pain management kit resources with him & made additional copies, giving them to Jaz, per his request. Positioned Butrans for appropriate patients who are on short-acting opioids who may be ready for a long-acting option. I asked what the clinical benefit of keeping them on short-acting is. Dr Gigliotti said he is going to prescribe it & just has to do it. He added that he still has many patients on OxyContin as well, although he has referred some of them that he did not want to take care of anymore.
PPLPMDL0020000001	Beachwood	OH	44122	2/27/2013	Reviewed Butrans dosing, indication, & appropriate patient type with Helen. She said she will be starting to see patients on her own on Monday. Spent time going over patient profiles to show examples of potential types of patients. Also discussed setting expectations up-front, titration, & ability to give supplemental analgesia with Butrans. She said she would be most likely to keep patients on only one opioid. I let her know ibuprofen or acetaminophen can be used for supplemental analgesia as well. I asked if she was comfortable enough with Butrans information to prescribe should an appropriate patient present. She said she would. Reviewed managed care & trial/savings information. Introduced Intermezzo- indication, dosing, patient type.
PPLPMDL0020000001	Broadview Heights	OH	44147	2/27/2013	Spoke with a new MA who said Dr Samuel could not see me today. Reviewed Butrans dosing & titration with her as well as appropriate patient type. Also discussed managed care & savings programs for Butrans & OxyContin. Also introduced Intermezzo- indication, dosing, patient type, & asked her to give Dr Samuel information. She agreed.
PPLPMDL0020000001	Broadview Heights	OH	44147	2/27/2013	Spoke with a new MA who said Dr Samuel could not see me today. Reviewed Butrans dosing & titration with her as well as appropriate patient type. Also discussed managed care & savings programs for Butrans & OxyContin. Also introduced Intermezzo- indication, dosing, patient type, & asked her to give Dr Samuel information. She agreed.
PPLPMDL0020000001	Akron	OH	44312	2/27/2013	Dr said he got positive feedback from his patient he initiated on Butrans. I asked dr to tell me about it. Dr said the patient has a herniated disc and has been in pain for a while. Patient came back and said that it is working very well and is pleased with it. Dr said that patient said how nice it is to not have to take tons of pills. I reminded dr to make sure to titrate when necessary and explained titration. I asked dr to continue to identify appropriate patients and he agreed.
PPLPMDL0020000001	Bedford	OH	44146	2/27/2013	I asked Dr Moufawad what he would say his biggest hurdle in prescribing Butrans is. He said currently, the biggest problem he is having is that the patients who are coming to him have been drug seekers who he kicks out of his practice. He said this has been a big problem recently. He added that primary care physicians get patients on a lot of medication, keep them on it too long, & then refer out when the patient becomes a problem. He said he does not want this type of patients in his practice. He said he would love to have more patients to put on Butrans, adding that his goal right now is to decrease the amount of short-acting opioids he is writing & increase the amount of long-acting since he is dealing with mostly chronic pain. I told Dr Moufawad he is doing the right thing by screening patients & that he should only prescribe Butrans or OxyContin for appropriate patients in true pain. I told Dr Moufawad I was trying to see if there was something I could provide that would help him with my products & with treating pain in general. He said the government has ruined pain management & then showed me a book from BWC about prescribing appropriately- he then added that BWC doesn't let him write anything. I reminded him that he can write Butrans for BWC. He said he just had a denial. I asked for paperwork. He said he will save the next one he gets & show them to me because he doesn't think it is covered. I let him know I would follow up with him on this.
PPLPMDL0020000001	Beachwood	OH	44122	2/27/2013	Introduced myself & Purdue's products to Dr Yap. He said he is familiar with the medications. Delivered insight 1 to him & asked how these discontinuations impact his practice. He said it just takes more time when this happens, although he finds that patients generally follow his instructions. He added that he takes time with his patients so they understand the importance of why he is choosing the treatment he has selected for them. I told him it sounds like he is doing the right thing, emphasizing the importance of appropriate patient selection & setting expectations, especially when starting patients on a medication they have never tried before. I told him I have various tools & resources to assist in this. Showed OxyContin conversion guide & pointed out 7 tablet strengths. Also discussed favorable managed care status. Dr Yap said managed care can be a big problem, adding that that seems to be his biggest problem in prescribing Butrans. Reviewed coverage with him, pointing out favorable commercial coverage. I asked him to try Butrans again for an appropriate patient & give them a trial/savings card. He agreed. Delivered Intermezzo indication, dosing, & appropriate patient type. He said he doesn't really write sleep medications.
PPLPMDL0020000001	Copley	OH	44321	2/27/2013	Reviewed nancy profile for Butrans and asked him if he would use Butrans for patients like her? Dr said he still doesn't feel completely comfortable using medicines for chronic pain. I asked him why he has used Butrans then? He said he will continue to be selective when to managed a patients pain. I told him to use Butrans when he selects those patients who meet the indication. Dr said ok and he will keep trying it.
PPLPMDL0020000001	Akron	OH	44307	2/27/2013	Spoke to Kyle and introduced Intermezzo. Kyle immediately asked if it is covered on Medicaid or Medicare? I asked why and he said because if it isn't they will not be able to fill it. I told him I didn't have the managed care information on it yet. I discussed how Butrans and OxyContin are very well covered and asked if patients coming to pharmacy get them filled? Kyle said they fill both without issues.
PPLPMDL0020000001	Richmond Heights	OH	44143	2/27/2013	Met w/ NE, Aldona Bur, Presented branded and unbranded education opportunities and discussed future educational needs for their facility. Aldona stated, "I need to get my calendar organized and in-services for this year scheduled." Confirmed 150 beds, including Skilled, Hospice & LTC. Current pain assessment algorithms were discussed with the nursing staff during the pain management In-Service. Assessment tool used is Wong-Baker Scale. CPP is Omnicare. According to Aldona, % of residents being treated for pain is a large amount. She stated they use a large amount of Percocet and some Oxycotin as well as Tramadol and little Vicodin. Four NP's are on staff, I asked if I could meet w/ them. She asked me to make folders for each of them with the branded materials and drop it off to her and she would see that they rec'd it. Aldona had to attend to an emergency and stated, "I will call you to schedule future in-services, when I work on my education calendar for the remainder of this year." It was agreed upon, to follow-up w/ her, if I don't hear from her by April.
PPLPMDL0020000001	Independence	OH	44131	2/27/2013	Shown pain management kit to Dr Jack, pointing out assessment tools & pain scales. He said he doesn't want to treat enough pain to necessitate the use of things like that. I asked if he is using OARRS, showing him the information fact sheet. He said he has to use it because it is mandated by law now. I told him this is an important tool to use. Dr Jack said he will write Butrans, he just has to think of it at the right time. I asked how I can help. He said just keep reminding him. Spoke with Maria who asked about OxyContin going generic. I told her I did not know any details at this time, she asked about the reformulation. Gave her a field card & stressed the 3 bullet points. She said she would give the information to Renee as soon as she was available.
PPLPMDL0020000001	Cleveland	OH	44130	2/27/2013	Spoke with a technician (Mary?) as Renee was taking care of a customer issue. Showed Intermezzo pharmacy information & reviewed dosing & indication. Also showed sell sheets for Butrans & OxyContin savings programs.
PPLPMDL0020000001	Richmond Heights	OH	44143	2/27/2013	Originally went to see Dr. Robert Corn, and he happened to be off today, and won't be back to this location until April. the receptionist Melina says I can catch him more often at Landerbrook location. I met then w Dr. Elisabeth Roter and her med asst Bridget Cordero, who I know from their Mentor office. I led w insight, and Dr. Roter says the only reason why her patients discontinue on extended release opioids is cost/ access issues, because the majority of her patients are Medicare Part D. I went over our Medicare Part D coverage for OxyContin and the increased savings for patients. Dr. Roter says e doesn't ave many patients on OxyContin, as she feels an ER Opioid is not appropriate for her elderly, fibromyalgia patients. I transitioned to Butrans 7-day patch for her elderly patients. She stated she had tried initiating Butrans in the past, and it was not preferred/and/or covered on her patients' commercial/employer plans. After discussing in further detail, she stated she may give Butrans another try. She is not interested. In our insomnia agent, as she tries to stick to her specialty and has her patients discuss insomnia w their primary care/ internist.
PPLPMDL0020000001	Beachwood	OH	44122	2/27/2013	Discussed the importance of setting reasonable expectations up front with patients for Butrans with the nurses at South Point Pain Management. I showed them assessment tools & pain management kit. They said they are currently using these types of materials for their patients. They also said the doctors each do a good job with that. Reviewed Butrans application, rotation, adverse events, dosing, & titration. Barb said Dr Barrett uses a lot of Butrans- probably more than the rest of the physicians. I asked why she thinks that is. She said he tends to be more adventurous in using different medications for different types of patients rather than having one or two "go-to" medications for everyone. The nurses said they educate patients when necessary & do the prior authorizations for medications. I asked what types of tools I can provide (savings cards, formulary grids, assessment tools, etc) that would be most useful for them & make their jobs easier. They said nothing, their main issue is just with insurance companies- it seems like they are always changing coverage. I let them know I would keep them updated with changes as they occur for our medications. Introduced Intermezzo- indication, dosing, patient type. They said their physicians do not write many sleep medications & really stick mostly to pain.
PPLPMDL0020000001	Akron	OH	44310	2/27/2013	Review of the pain management kit with doctor Cremer and Char. I reviewed the brief pain inventory form and the pain assessment tool and explained that last time I was in and gave the previous form that the one in the kit was more applicable to what he was looking for. Dr and Char both said they like it much better and that they may use it. I gave brief overview of Butrans initiation doses and titration. I asked Char is she has seen any new Butrans prescriptions come through and she said no. I asked her to look the for types of patients we discussed when she is rooming the patients. Char agreed.
PPLPMDL0020000001	Akron	OH	44310	2/27/2013	Spoke to Clinton about Intermezzo. Explained the indication, limitations of use and dosing specifics. Clinton asked how long it takes to work? I read section 12.3 in the FPI and discussed the average absorption time of 35 minutes to 75 minutes. I explained Butrans dosing and titration. Clinton said that they still have only 2 patients on Butrans and they stock the 10mcg currently.
PPLPMDL0020000001	Fairlawn	OH	44333	2/27/2013	Introduced Intermezzo to Gary. Explained the indication, limitations of use, and dosing specifics. Gary said he is not stocking any until he sees a prescription. Reviewed Butrans dosing, CII, 7 day transdermal patch. I reviewed the appropriate starting dose, and titration. Gary said he thinks Butrans makes sense but he hasn't seen much of it. Left him with the initiation and titration guide.
PPLPMDL0020000001	Akron	OH	44333	2/27/2013	Spoke to dr about his use of Butrans. Dr said he is continuing to use Butrans as often as possible for his patients that are naive to opioids and those experienced. Dr said he has found it to be a great product because of e delivery system, its clean, and patients are getting it covered by insurance. I discussed the appropriate starting dose and how to properly titrate. Reviewed both profiles and asked for continued business. I asked dr if he is using any OxyContin at all? Dr said he has been using more lately but admitted that a few have been refills but finds it to be useful in some patients who don't mind paying for it. Discussed patient types and managed care. Provided review of pain management kit and asked if he could use any of the resources? Dr said Dr. Mehta has all of it in place but agreed to review
PPLPMDL0020000001	Bedford	OH	44146	2/27/2013	Spoke with Ed & gave him Intermezzo pharmacy sell sheet. Discussed key selling messages. He said he has not seen it but they can order if necessary. Gave him information on Butrans & OxyContin savings cards.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	2/27/2013	Introduced Intermezzo with Robin the pharmacist. She was not familiar with the product so I explained the indication, limitations of use and dosing specifics. Robin said that they do not have any in stock. I reviewed Butrans dosing, approximate conversions, CII, and 7 day transdermal patch. She said they have all doses in stock. I explained OxyContin conversions from Percocet and dosing flexibility.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	2/28/2013	Spoke to pharmacist Kimase about Intermezzo indication, limitation of use and dosing specifics. Pharmacist asked if a patient can take a product to go to sleep then also take Intermezzo. I told pharmacist that the patient cannot do that. I explained Butrans indication, dosing and approximate conversions. I talked about appropriate patient type selection. Kimase asked about copay cards. I told her that I cannot leave any but explained them. I asked about their Relay Health program and they realized that it makes it easier anyway than a paper copay card.
PPLPMDL0020000001	Independence	OH	44131	2/28/2013	I asked Dr Sundaram given his practice, under what circumstances he would feel a long-acting opioid analgesic would be warranted. He didn't answer the question- he said it is just that abuse is such a problem, he really hates writing "those" medications. I asked if he would agree that all opioids carry abuse & addiction potential. He said that is true. I asked if he would also agree that some patients can benefit from opioid analgesics. He said yes. I told him I am simply asking him to consider Butrans or OxyContin when appropriate patients like that present. He said he would do his best.
PPLPMDL0020000001	Cleveland	OH	44122	2/28/2013	In anticipation of the webinar scheduled for 3/8/13, sent email to Care Source. Forwarded the proposed handout for the first non-accredited presentation (scheduled for 3/8/13). The topics will be: "Assessment: The Essentials" and "Is it Pain?". Webinar invitation will be sent separately. The second presentation in the series will be scheduled for April 19th. MSL will plan to be in person at the Dayton office, and will webcast the presentation to the other locations. The topics of interest for this presentation included &#8220;Pain in the Elderly&#8221; and &#8220;Assessing Pain in the Cognitively Impaired Patient&#8221;. MSL has identified a schedule conflict with the May date that was selected. Requested May 3rd as an alternative, with MSL presenting in person at the Cleveland location, and web cast to the other sites.
PPLPMDL0020000001	Northfield	OH	44067	2/28/2013	Spoke with Wendee (head technician) & gave her Intermezzo information sheet, pointing out 3 key messages. Reviewed indication & dosing. Also gave Butrans & OxyContin savings cards. Wendee said they have Butrans in stock & they have a few customers on it regularly. Discussed changes to the savings offer for both medications. She said she would share this information with the regular pharmacist when she returns.



PPLPMDL0020000001	Parma Heights	OH	44130	2/28/2013	Placed a follow-up phone call to D.O.N., Katherine Myers 440-888-5900 to set up appt. to discuss educational opportunities and schedule in-service. N/A, Left Msg. on her voice-mail. Make drop-in visit, if no response is rec'd from Katherine Myers by 2/7
PPLPMDL0020000001	Lyndhurst	OH	44124	2/28/2013	Placed a follow-up phone call to Linda Dabney in Staff Development @ 440-684-6622 to set up appt. to discuss Pain & Pain Management Educator/in-service opportunities. N/A, Left Msg.
PPLPMDL0020000001	Twinsburg	OH	44087	2/28/2013	Placed call to Jody Smith to discuss pain & pain management educational opportunities. N/A, left msg. on her voice-mail.
PPLPMDL0020000001	Independence	OH	44131	2/28/2013	Quick call- Dr Pai saw me at the window & said he "won" with the insurance company for his Butrans patient to get it approved for the next year. Reviewed managed care grid for Butrans & OxyContin, pointing out more favorable coverage on Medicare for OxyContin. Also spent time with Jill reviewing OxyContin savings cards & eligibility requirements.
PPLPMDL0020000001	Westlake	OH	44145	2/28/2013	Placed a phone call, spoke w/ D.O.N., Sue Williams to follow-up from meeting on 2/14 and to schedule educational in-service. She stated, "I have not had time to act on this opportunity yet, but I definitely want to have you come in. I will look at my calendar and we will talk and set up something."
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/28/2013	I reviewed the new Butrans initiation and titration piece and asked for his commitment in finding new candidates. Dr said he really likes Butrans and will continue using it.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	2/28/2013	Introduced intermezzo to Jeff and asked him is he is familiar with it? Jeff said he is familiar but after reviewing the indication, limitations of use, and dosing specifics Jeff said he didn't know a lot of the information. H said he has not seen any prescriptions and asked about copy cards. I explained patients savings information. Reviewed Butrans indication, dosing and titration. Jeff said he has seen one prescription.
PPLPMDL0020000001	Solon	OH	44139	2/28/2013	Delivered Insight 1 to Dr Zaidi & asked how these discontinuations impact his practice & ability to manage his patients' pain. He said it just gives him more work. I presented the OxyContin Patient Essentials Pack to him & showed him the contents of the kit. I asked if he thought a packet like this would help a patient who is new to OxyContin have the best chance possible for success with the medication. He said it depends on the patient. He went on to say that some patients care about things like that & others just care if the medication works. I showed the patient pain diary pages & asked if he thought that would help patients keep more thorough, detailed accounts of how their pain is doing as they start OxyContin, telling him again these are for patients who are new to the brand. He said it might help one or two. I asked if patients are always on a form of IR oxycodone prior to OxyContin. He said he has switched patients from a variety of medications to OxyContin & said again it depends on the patient. I asked if he thought he could find 5 patients who would be appropriate for OxyContin & give them the kits. He agreed. Dr Zaidi said he tried giving a patient Butrans but the patient said he wants his Vicodin back, so he is switching him back. I asked why the patient wanted to discontinue the Butrans. He said he only knows that the patient said they wanted their pills back. I asked why not titrate the patient upward on Butrans instead first. He said the pt didn't want to
PPLPMDL0020000001	Beachwood	OH	44122	2/28/2013	Placed a follow-up phone call to speak w/ D.O.N. is Susan LoDolce. I was informed that she "stepped out" left msg. on her voice-mail.
PPLPMDL0020000001	Euclid	OH	44117	2/28/2013	Placed a call to speak w/ D.O.N., Kathy Nemeth to set up an appt. to discuss educational in-service opportunities. N/A Left Msg. on her voice-mail.
PPLPMDL0020000001	Solon	OH	44139	2/28/2013	Spoke with Rebecca & presented Intermezzo pharmacist information, walking through 3 key messages. She said she has not dispensed any Intermezzo, but she recently saw an ad for it on TV. I told her with increased DTC marketing, she may be getting more questions about it from customers. Let her know savings is on e-voucher. Also showed information sheets for Butrans & OxyContin & updated her on upgrades to the programs. Also reviewed eligibility requirements.
PPLPMDL0020000001	Parma	OH	44134	2/28/2013	Dr Hernandez apologized, saying he was very busy & far behind today so he couldn't talk for long. He asked if I have uncovered anything at any pharmacies, especially CVS, regarding generic policies. I assured him that I have been speaking with pharmacies & they have not told me anything about this & have said they had not heard of a policy like that. I asked if he has still been hearing the same thing (CVS only carrying generics). He said he can't remember the last instance, but he is tired of pharmacists practicing medicine. Dr Hernandez said he just started a patient on Butrans & told me he has been writing more & more of it because it is such a good drug. I thanked him & asked him to continue with that as well as considering OxyContin when appropriate.
PPLPMDL0020000001	Akron	OH	44312	2/28/2013	Gave dr the Scott profile for Butrans and gave quick review at window. I asked him if he would identify patients like Scott? Dr said he will try but said he doesn't like using products for chronic pain management. I asked him what is dog currently for a patient who fails Ultram? Dr said he would consider going to Vicodin. I asked why he would go to another short acting agent and not an ER one? Dr said because he is labeled by patients as someone who treats chronic pain. Dr said we can talk more over a lunch.
PPLPMDL0020000001	Parma	OH	44129	2/28/2013	Quick call- Showed Dr Paat that patients taking Percocet 4 times per day could take OxyContin q12h with the same amount of medication. I asked what the benefit of keeping patients on short-acting opioids chronically is. He didn't answer- he just thanked me & walked away.
PPLPMDL0020000001	Macedonia	OH	44056	2/28/2013	Spoke with MA Linda & asked what happens when a prescription isn't covered by a patient's insurance- what is their process. She said either she or one of the nurses will do the prior authorization or sometimes the doctor will just change it to one of the preferred agents. I asked if information from representatives such as formulary grids or savings cards are utilized by staff. She said they do help. Gave her copies of Butrans & OxyContin grids. Also asked her to give the practitioners Intermezzo dosing information. Reviewed indication.
PPLPMDL0020000001	Beachwood	OH	44122	2/28/2013	Placed follow-up phone call to DON, Stephanie Forsythe to discuss pain & pain management educational opportunities. Spoke w/ Receptionist, Lindsey, I asked if there was some one other than the D.O.N. who handles their education, she informed me that Cheryl Grim is in charge of education. I asked if I could speak w/ her. N/A, left Msg. 216-831-4303
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/28/2013	Spoke with doctor about his use of OxyContin. I asked him when and where he uses it. Dr said that he uses it because it works and his patients can get it for the most part but said it is becoming harder and harder to get it approved. Dr said most managed care companies want to push ER morphine and other agents instead of branded. I told him I understand and gave him the Med D and commercial coverage for OxyContin. I asked him where he is using it? Dr said primarily for a patient on Percocet and he wants them on an extended release product. Dr said he uses many of them but said OxyContin has the lions share. I asked for continued use.
PPLPMDL0020000001	Richmond Hts	OH	44143	2/28/2013	Dr. Stanescu was running behind & had 4 people in waiting room. While waiting for Dr. Stanescu, scheduled a few lunches w receptionist Marjorie. Spoke briefly w Dr. Stanescu. Let him know I'm w Purdue now & what products I will be discussing with him. Told Dr. Stanescu I look forward to following up w him at lunch appt. Left dosing cards for OxyContin & Butrans & HCP packet for Intermezzo.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	2/28/2013	Good discussion on all products. I asked what his experience has been like with OxyContin? Dr said he uses it but sparingly. I asked why and he said because his practice is mostly geriatric and they need cheap alternatives to brand medicine. I asked if his patients have complained about the cost of OxyContin when he has used it? Dr said he can't remember because he doesn't use it or oxycodone much. Dr said he will typically refer to pain management when the patient fails Vicodin. Explained the Medicare coverage with OxyContin and showed him the Butrans placebo patch. I explained all key selling messages and dr said he likes that it is 7 days and is a CII. Dr said he likes fentanyl and wanted to know the difference. I explained that there are no head to head trial on the products and told him where Butrans fits with his patient type selection. Dr said he will consider using but the non Medicare coverage hurts. I explained that the patients with coinsurance along with Medicare are good candidates. Explained all other formulary coverages. Intermezzo indication and product explanation. Dr said he doesn't like prescribing sleep products but will look for patients for Butrans.
PPLPMDL0020000001	Westlake	OH	44145	2/28/2013	Placed Follow-up phone call to speak w/ D.O.N., Stephanie Finkenthal, 440-871-5900 Spoke w/ Recept., Jennifer, I asked to speak w/ their education director, she said that would be Jamie Adamo. I spoke w/ Jamie, introduced myself and the NE program. Jamie stated, "I will have to check with Genesis, we were just bought out by them and we are in the process of switching everything over and I am not sure what their rules/requirements are."
PPLPMDL0020000001	Westlake	OH	44145	2/28/2013	Jamie asked for my name & phone number and said that she would have to get back w/ me.
PPLPMDL0020000001	Westlake	OH	44145	2/28/2013	Placed a follow-up phone call, spoke w/ D.O.N., Liz Williams, to reschedule in-service from December, Liz stated, I am currently busy with post-survey "plan of correction," this should be over with by April, if you could call me back around the 3rd week of April, we should be able to set something up."
PPLPMDL0020000001	Sagamore Hills	OH	44067	3/1/2013	Quick call- Dr Lenox said he couldn't stay for lunch today & was running behind. Reviewed Butrans appropriate patient type, pointing out that it is the only CII long-acting option. Reminded him of favorable commercial coverage & asked if he thought he could find just one person who would be appropriate for it. He said he didn't know & left the room. Left Intermezzo packet for him.
PPLPMDL0020000001	Sagamore Hills	OH	44067	3/1/2013	I showed Dr Sevier the pain management kit & pointed out pain contract & pain assessment tool. He was interested in the contract, saying he wanted to make a copy of it for them to use. He said they have gradually started to adopt various measures to further protect the practice. I agreed that this was a good idea & let him know Purdue has a lot of tools for this purpose. Discussed importance of appropriate patient selection & documentation. Discussed OxyContin as a q12h dosing form of oxycodone. I asked if patients are typically on some form of IR oxycodone before he initiates OxyContin. He said it all depends. Showed 7 tablet strengths, pointing out flexibility for dosing & titration. Reviewed Butrans appropriate patient type & managed care information & asked if he thought he could find one patient to try it on. He said he would do his best. Updated him on savings programs for Butrans & OxyContin. Gave him Intermezzo packet & reviewed indication & dosing.
PPLPMDL0020000001	Akron	OH	44319	3/1/2013	Dr said he had not used Butrans yet. I asked him why and he said he had not found the right patient with commercial prescription insurance. I told dr that he needs to use it clinically for his patients with Medco, medical mutual and Caresource. I reviewed the appropriate patients, starting doses and titration. Dr said he will try it.
PPLPMDL0020000001	Sagamore Hills	OH	44067	3/1/2013	Showed Penny the pain management kit & its contents, spending time on the pain contract especially. She asked for a copy & said she has been wanting them to implement something like that for a long time, so she was glad to see it. I let her know Purdue has many resources designed to assist practitioners in treating appropriate patients for pain. Penny said it just makes sense to do things like that. She added that she feels "dumped on" from other practitioners because she tends to end up with their problem patients, many of whom are on pain medications. Penny said it is very unfortunate that there are "bad apples" who spoil it for everyone, adding that she takes various precautions in prescribing. I told her she is doing the right thing. Reviewed Butrans appropriate patient type & CII long-acting opioid. She said she still likes it, she just has not had patients appropriate for it as they are already coming on different medications. Penny said she thinks tramadol will become scheduled & hydrocodone will go to a CII. Discussed prescribing authority for CII's currently for mid-level practitioners. Also introduced Intermezzo & reviewed indication, dosing, patient type, & delivery system. Discussed managed care & savings offer.
PPLPMDL0020000001	Parma	OH	44129	3/1/2013	I followed up with Dr Roheny & asked him how implementing the forms we copied for pain management have helped his practice. He said he has the copies but has not implemented them. I asked what has prevented him from doing so. He said he needs to scan them & put them into his computer so they print out as part of the regular paper work. I asked how I can help with this as he kept telling me how busy he is. I offered to talk to Loraine about it. He said he would do that, assuring me he would put the forms to use. I asked if he still thinks measures like that will help him feel more secure in treating appropriate patients for pain. He said he really does think they will help. I also reminded him in his interest for Butrans for a particular patient. He asked if anyone is writing it. I told him various physicians have found a place for Butrans. Reviewed indication, patient type, & formulary coverage & asked if he thought he could find just one patient to give Butrans to before I come in next time for another follow-up. He said he would try.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	3/1/2013	Arrived @ 2:30 for an in-service scheduled at 2:45 on Constipation. Checked in w/ the receptionist, Linda. I explained the purpose of my visit and asked for the ADON. Deb Lovette. I briefly talked w/ the DON, Debbie Bouslogh, in her passing, and mentioned that I was there to in-services the nurses on constipation, she responded, "that's great", there meeting is still going on, you can present after the others are done." At 3:05 I checked in w/ the receptionist again. She said that she looked in the conference room and their staff meeting was still in progress, and she did not see Deb Lovette. She soon was informed that the ADON was off today and the DON had left for the day. She spoke with the admissions director Karen, who checked in on the meeting and was informed that they were going to be another 15-20 minutes and that the nurses then needed to get back on the floor. She apologized to me and asked if I could contact Deb Lovette to re-schedule the in-service.
PPLPMDL0020000001	Cleveland	OH	44122	3/1/2013	Email invitation sent for the webinar, scheduled for 3/8/13 (Friday). Attendees will include nurses and case managers with Care Source in Ohio. Feedback form and handout (slides, 3 per page, as PDF) were attached.
PPLPMDL0020000001	Sagamore Hills	OH	44067	3/1/2013	Dr Gemma said she couldn't stay as she was on her way out of the office. Reviewed Butrans patient type & long-acting CII. She said she would use it if she had anyone like that.
PPLPMDL0020000001	Parma	OH	44129	3/1/2013	Spoke with pharmacist, Rick, & gave him Intermezzo pharmacy information booklet. Walked through 3 key messages. Let him know savings for Intermezzo is on e-voucher. Showed information sheets on Butrans & OxyContin savings programs & updated him on the offers.
PPLPMDL0020000001	Northfield	OH	44067	3/1/2013	Spoke with floater pharmacist & introduced Intermezzo. Reviewed 3 key messages & asked about his knowledge of Intermezzo. He said he had heard of it but had not dispensed it. Went over indication & dosing. Showed information sheets on Butrans & OxyContin savings cards. He agreed to leave my information for the regular pharmacist.

	Richmond Heights	OH	44143	3/1/2013	Spoke w ma Marianne first, and let her know i'm new Cleve East rep. Although They will still primarily work w Ashleigh in their Bedford location, I told Marianne to please call me, if they need anything when in Richmond Hts. I went over new formulary grid and savings card for OxyContin w Marianne. I let her know we've increased patient savings to \$90 off toward monthly cost. I then went over new formulary grid for Butrans. And the Butrans savings program next. I also left Aetna flash card for Butrans and let Marianne know we are now preferred on Aetna. She then introduced to me to Dr. Moufawad and I presented savings cards for OxyContin and Butrans. Dr. Moufawad took them from me and started to remove shrink wrap, and I told him I need to document lot numbers first. He then showed me where he'd like them in his office, and made room on shelf. I shared our recent Aetna commercial win for Butrans. I also showed him the Butrans patient guide and asked him to please hand one out along w each Butrans savings card.
PPLPMDL0020000001	Euclid	OH	44119	3/1/2013	Met w RN, Clinical Nurse Mgr, Carla VanPelt, and presented savings cards for both OxyContin & Butrans. Showed Carla how the cards work, and let her know we've increased patient savings for both products. Made sure she's aware of Butrans preferred status w Aetna commercial. Carla informed me that both Dr. Pasha Saeed and Dr. Fady Nageeb, also practice at pain mgt at 2550 Som Ctr Rd. Willoughby Hills CC and to call RN Cary P, who can schedule lunch appts w Dr. Nageeb over in Willoughby. Left my card w Carla and asked her to call should she need any patient resources/savings cards moving forward.
PPLPMDL0020000001	Parma	OH	44129	3/1/2013	Quick call- Caught Dr Salama up front between patients as I was discussing Butrans savings cards with Deena & Mary Ann. He said he was glad I was bringing them because he saw that he needed more. He added that he has been trying to use it more lately.
PPLPMDL0020000001	Beachwood	OH	44122	3/1/2013	Introduced the OxyContin Patient Essentials Pack to Dr Yokieli. I told him they are to be used only for patients who are new to the medication, such as someone who he considering options for long-acting opioid therapy. Showed him kit contents, going through the pain journal with him. I reminded him of our previous conversation when we talked about discontinuations of extended-release opioids & asked how he thought these packs could help with that for patients who he initiates on OxyContin. He said some patients like to keep track of things like that, especially when first starting a new medication. He said he would be judicious, giving them only to patients who would put the time in to track their pain. I told him he was on the right track, pointing out that tools like this can help increase the communication between him & the patient in effort to give them the best chance for success with OxyContin. He said again it was a good idea & said he would be sure to give them out. Reviewed Butrans on BWC.
PPLPMDL0020000001	Stow	OH	44224	3/1/2013	Introduced Butrans and intermezzo to doctor for first times as she had no prior knowledge of products except for OxyContin. Gave all key selling messages for Butrans and asked her what questions she had? Dr said she thinks it is a great medicine and likes that the delivery is a patch. Dr said she can see herself using it for patients that complain of taking lots of pills in a day and having to get up in the middle of the night due to pain. Dr said she likes that it is a CIII. Intermezzo indication and limitations of use as well as dosing specifics. Dr said she really likes Butrans and will use it.
PPLPMDL0020000001	Akron	OH	44304	3/1/2013	Introduced intermezzo explaining indication, limitations of use and dosing. Technician Rebecca said they have not filled any prescriptions. I explained copy cards as well. Butrans dosing, indication, titration and 7 day transdermal system. Se said they have a couple of patients on the 5 mcg dose.
PPLPMDL0020000001	Akron	OH	44319	3/1/2013	Dr said he could give me 30 seconds so I told him my products. Dr said he is mostly refilling OxyContin for patients controlled and a few new he or there for patients needing The ER oxycodone from IR oxycodone. I told dr to continue using it. I introduced Butrans providing him with the placebo patch, indication,dosing, patient selection, titration, steady state, CIII. I asked dr if he would use it clinically to gain experience and if he had any questions. Dr said he really like that it is a week long patch and is a CIII. Dr said he will use it for sure.
PPLPMDL0020000001	Euclid	OH	44119	3/1/2013	Spoke first w tech Dana who transferred from Madison Rite Aid. She was very interested in Intermezzo as she saw tv commercial, Spoke w her about Butrans (indication/limitations) and OxyContin. I then spoke w pharmacist Kathleen Parise. Led w intermezzo. Left her Pharmacists Guide, FPI, and dosing card. I then asked about utilization of OxyContin, which she says continues to be steady & she has all 7 strengths in stock. We then discussed Butrans and she says she has not dispensed any. Went over indication/limitations and three strengths 5,10,20 mcg/hr. avail. for titration.
PPLPMDL0020000001	Stow	OH	44224	3/1/2013	Introduced Butrans to dr as he has never heard of it. Explained all key selling messages after talking about insight #1. Dr said the he agrees how high the discontinuation rate is and asked if that rate includes patients switching medications? I told him that I believe it did. Doctor said that he hates it when patients stop taking their medicines and dr tell him. I asked dr if he thinks this reduces his ability to treat effectively? Dr said for sure. Dr said he will use Butrans and likes that it is a CIII and 1 week patch.
PPLPMDL0020000001	Stow	OH	44224	3/1/2013	Led with the first insight and asked dr what he thinks about how that statistic fits into his own practice? Dr said he has patient medicine discontinuation but said it is not very high. I asked why and he said he is not sure but figures that he makes sure his patients fully bear stand why they are on what they are on. I told him that Purdue works hard to provide resources that can help his patients understand their pain and tool that can also help him and his staff. I asked what his recent experience has been with OxyContin? Dr said he uses it but not as much anymore. Dr said most of his chronic pain patients have been referred to pain management. Dr said he likes it and uses it when a patient needs to take less pills and needs more consistent control. I reviewed patient types and dr said he will continue using. Explained all key selling messages with Butrans and doctor said he likes it. I asked dr if he will use Butrans? Dr said he will as he has patients that fit the patient type. Intermezzo key messages. Explained managed care with all products and copy cards.
PPLPMDL0020000001	Cleveland	OH	44130	3/1/2013	Introduced pain management kit to Dr Kansal, showing the pain contract. I asked what measures he currently has in place for treating patients for pain. He said he is probably only keeping around 20-25 patients who are on pain medications. I asked if he would agree that the more measures he has in place, the more comfortable he can be in treating patients, when appropriate, with opioids. He didn't answer. He said I should be selling my medications to the ER physicians. I told him OxyContin & Butrans are for chronic use. He said he thinks patients should be started there because they get used to short-acting from the ER. He said his patients don't want to try long-acting options. I asked why he is allowing patients to make the decision of what medication they want to have, especially when it comes to opioids. He said he isn't.
PPLPMDL0020000001	Stow	OH	44224	3/1/2013	Discussed insight with all doctors. Dr Mayer agreed with dr Chase that it be ones difficult to deal with when patients take the liberty to just do whatever they want without consulting their doctor. I asked if cost is a factor sometimes? Dr said it is but not as much as you would think. I provided full review of Butrans key selling messages and asked her if she will use it? Dr said she know knows where she would use it and will try it since she has patients referred to her on Butrans. I asked her about the feedback those patients have had on Butrans? Dr said it has all been very positive. I reviewed intermezzo indication, limitation of use and dosing specifics. Dr said she has already used it for a patient taking a half of a 5 mg Ambien to get back to sleep and said she used intermezzo and the patient is happy with how it is working.
PPLPMDL0020000001	Akron	OH	44305	3/1/2013	Spoke to dr about Purdue resources for OxyContin and Butrans through Partners Against Alain. I reviewed the comfort assessment guide with dr as well as the USB key. I asked dr if he would use them and he agreed. Dr said he liked them both. I asked dr when he used OxyContin last? Dr said he prescribed three today. I asked why he used OxyContin and he said because he felt the patients needed a more extended opioid and has had good success with OxyContin. Dr walked me over to Cindy his RN and wanted me to review the information with her as well. I explained resources to candy and she said they are great because patients sometimes have a lot of questions they will ask the doctor. Se said the guide answered many of those questions. I discussed Butrans with candy and explained all key selling messages. Cindy said she would try to get dr to use Butrans.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/1/2013	Made a drop-in visit to speak w/D.O.N. Deb Keller, to reschedule appt. to discuss pain & pain management educational opportunities. Spoke w/the receptionist, Linda, who stated, " Surveyors are in the building and she is busy w/ them." Left BC
PPLPMDL0020000001	Akron	OH	44319	3/1/2013	I asked dr what he does when a patient he has on Vicodin tells him its not working well enough? Dr said he doesn't know...I asked him what? He said he didn't have time to talk. I handed him the Nancy profile and told him to use Butrans for his uncontrolled Vicodin patients. Nothing else learned.
PPLPMDL0020000001	Stow	OH	44224	3/4/2013	Led with insight and asked dr what his thoughts are. Dr said he tries to stay away from using medicines for chronic pain but really likes Butrans. I asked why and he said because it is a CIII and the delivery system. Dr said he likes the patch. I asked dr what he currently does for a patient failing on vicoden or even ultram? Dr said it depends on the patient but he refers out when patients want more than 4 pills a day of a short acting. I asked if he would use Butrans earlier on in the vicoden treatment if they are still in pain? Dr said he agrees he needs to use it more and will remember it. Discussed all key selling messages. Intermezzo key selling messages.
PPLPMDL0020000001	Hudson	OH	44236	3/4/2013	Led with in sight and told him about all the resources that are available to him and his patients n Butrans. Dr said he does have discontinuation and wild like some information but did admit that Unity has adopted the philosophy that patients should be send to pain management and they will not treat chronic pain. I asked dr why he used it then? Dr said he has the discretion to treat certain pain patients. Dr said the patients he used it on were early on in treatment. I explained the appropriate patient types and key selling messages. I asked dr to continue thinking about using it if an ultram patient is failing. Use Butrans before they get to Vicodin as long as the patient meets the indication. Explained all key messages for intermezzo.
PPLPMDL0020000001	Akron	OH	44333	3/4/2013	I asked dr if he prescribed any Butrans since we had out lunch last week? Dr said he did prescribe one. Dr said he was looking for more of e experience kits and he is out in Fairlawn. Dr ended up finding the copy cards and used one of those. Dr said we can discuss more on Wednesday. I asked dr to continue prescribing Butrans and he agreed to.
PPLPMDL0020000001	akron	OH	44333	3/4/2013	I reviewed the entire Nancy profile again with doctor and asked him if he sees patients like her and would he initiate Butrans before titrating the vicoden? Dr said he has a handful of patients that fit her profile but over 65years old. Dr said it makes a lot of sense and he has had good results clinically. Doctor asked about Med D coverage as well as Medicaid? I explained Caresource coverage and Medicare patients with co-insurance. I asked him if he had any Aetna, Medco or Medical Mutual? Dr said yes. I showed him the Aetna flashcard and discussed coverage with other plans. I asked dr to use the experience kits with those types of patients. Dr agreed to continue to find those patients.
PPLPMDL0020000001	Hudson	OH	44236	3/4/2013	Spoke with Bob again and asked him if he has had patients before telling him that they have middle of the night insomnia? Bob said maybe a couple of times and that that is more something they tell their doctor. I explained the intermezzo indication and dosing specifics. I reviewed Butrans dosing, titration and use of supplemental analgesia. Bob said he thinks it is a great alternative to short acting narcotics and wished it was used more.
PPLPMDL0020000001	Hudson	OH	44236	3/4/2013	Discussed intermezzo and Butrans with Galina. Galina said she has not filled a Butrans or intermezzo prescription and she sees business from the Bressi group. She said she is surprised she has not seen a Butrans from them? I asked what she sees most from that group and she said any and all IR opioids. I reminded her that at least 50% of their prescriptions are filled at their in-house pharmacy. I reviewed dosing, how to initiate and that Butrans can be used for patients meets the indication who are opioid experienced or naive. Explained titration and how to initiate correctly. She thanked me for informing her of things she did not know.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	3/4/2013	Sole with Pam e pharmacist about intermezzo indication, limitations of use and dosing specifics. Pam said they have the 1.75mg dose which expires in December. I asked if it was auto shipped or did they get a prescription? She said they auto shipped it and has not seen it come through. Pam said she has seen the commercials and has been trained on the product. I explained Butrans dosing and CIII and Pam said she has dispensed many of those either. Nothing else learned.
PPLPMDL0020000001	Hudson	OH	44236	3/4/2013	Discussed all three products. I led with the insight one with all doctors. Dr Tosino said that he tries to reduce his patients discontinuation when he moves from a more short acting product to a extended release product. Dr said he does this by being straight with the patient from the start as to why he is making the change and the benefit it will have to the patient. I asked dr if he uses any resources or materials to give to the patient. Dr said he does but most will not read it so he finds that he has to spend more time with the patient which he said was ok. I reviewed resources for OxyContin and Butrans. I reviewed the patient profiles for OxyContin and dr said when he uses it he uses OxyContin on patient he is moving from Percocet. Asked for continued business. I reviewed Butrans again and asked dr to think of Butrans as a product to be used early on in treatment before a patient even gets to Vicodin. Dr said he needs to train himself to think more like that because he hates dealing with patients on too much Vicodin. Reviewed all key selling messages. Intermezzo review and closed for business.
PPLPMDL0020000001	Parma	OH	44129	3/5/2013	Rec'd phone call from Staff Development Coordinator, Kim Barber, LPN. In-service on Pain Management was scheduled for 3/13 @ 2:00 & 3:30. 15-20 should be in attendance.Kim stated, she will not be there, but I can ask for Jasvir Brar.
PPLPMDL0020000001	Fairlawn	OH	44333	3/5/2013	Joe Hennessy & myself were greeted by Staff Development Coordinator, Michelle Williams upon entering the facility. She stated, "our NP, will not be able to meet w/ you today after the in-service d/t her assistance was needed at our Assisted Living building." In-Service on Constipation was completed for the nursing staff of RN's & STNA's. There were 13 in attendance. After the In-Service, I was also informed by Michelle that their Medical Director, Robert Norman will not be meeting w/ me on 3/20 b/c he recently passed away.Confirmed in-service on Pain Management for 3/20 @ 2:30 w/ Michelle.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	3/5/2013	Made drop-in visit to meet w/ ADON, Debbie Lovette to re-schedule in-service on constipation. According to the receptionist, Linda Bergman, "Debbie is not able to meet w/ you, b/c she is busy w/ a job fair."
PPLPMDL0020000001	Akron	OH	44333	3/5/2013	Made Drop-in visit to speak w/ D.O.N., Julia Bowens. Spoke with the receptionist, introduced myself and purpose of visit. I asked if I could speak w/who is in charge of education for their facility, she stated, " our D.O.N., Ramona Watson, but we are having a mach survey and she asked if you could call and schedule appt. to meet w/ her." Patience Swan is the Nurse manager. Left BC and PAP handouts.
PPLPMDL0020000001	Westlake	OH	44145	3/5/2013	1. Provide product information for the Pharmacists 2. Provide 2013 formulary updates for OxyContin and Butrans 3. Determine how programs are coordinated - whether from their office or Louisville office.

	Akron	OH	44313	3/5/2013	Met w/ Richard Lynch, Nurse Educator, accompanied by Joe Hennessy from Purdue Pharma. We introduced ourselves and Joe presented the NE program. We discussed pain & pain management educational opportunities as well as unbranded and branded materials. Richard explained that he is new to this position and working on establishing an educational calendar. He stated that they have a large psychiatric population as well as LTC, Hospice & Skilled residents totaling 160+ currently. 20 RN's on staff, the majority of nursing staff is LPN's. There is also a NP, Andrew Straub, who works w/ the physicians on staff. Pain assessment is completed Q shift. Wong Baker is the pain assessment tool used. When asked, what % of residents are currently being treated for pain, Richard stated, "more than I think, I believe it is under recognized." Currently using Vicodin, Tramadol, Oxycontin & a small amount of Fentanyl. Upon presenting Intermezzo, Richard stated, "we have very little hypnotic use, d/t high risk for falls." Richard stated, "our pain education needs is w/ the hospice residents. We currently work w/ local Hospice Companies (Crossroads, GreatLakes, Light House & VITAS). Confirmed CPP as Omnicare and Medical Director is Dr. Thomas Lehmer. Left BC and unbranded & branded materials. Richard requested Butrans Materials
PPLPMDL0020000001	Akron	OH	44320	3/6/2013	Dr told me she did not have time to discuss anything and asked me what I needed? I told her that I needed her to prescribe Butrans. Dr told me that she liked the direct approach and she will continue to look.
PPLPMDL0020000001	Akron	OH	44312	3/6/2013	Led with insight and told dr that Purdue has many resources that can help him strengthen the bond between the patient and their medicine., especially when it comes to Butrans. Explained the Butrans patient information guide and asked him to accompany one of those with the copy card for his commercial patient. I asked dr how his lone Butrans patient is doing. Dr said great. I asked dr to continue finding patients for Butrans and to start with a patient like the ascot profile. Reviewed the profile and discussed initiation and titration. I asked dr to continue using and asked him if he would write more Butrans? Dr said yes.
PPLPMDL0020000001	Akron	OH	44310	3/6/2013	Spoke to Char about their patients and the communication between them and the office staff and the doctor. Recapped some of the resources we have discussed and told her my objective is to increase Butrans prescriptions. Char said they are not seeing any new patients and that dr Cremer is trying to reduce the amount of pain patients he has and to begin tapering patients off their pain medicine. I told Char that I would speak to them more about it in the upcoming lunch.
PPLPMDL0020000001	Akron	OH	44320	3/6/2013	Discussed appropriate patients for OxyContin and Butrans. Dr said she will not start new on OxyContin or CII's for that matter and said she wanted to focus on Butrans. I discussed the Scott profile and asked her if she has any patients similar to Scott? Dr said maybe but would not commit to any patients appropriate for Butrans. I asked her to gain some clinical experience on at least one patient. Dr said ok and that she will try.
PPLPMDL0020000001	Maple Heights	OH	44137	3/6/2013	Delivered communication insight to Dr Dale & asked his thoughts on it. He said communication about pain can be a difficult thing, adding that it seems more difficult to extract information about anything from male patients than from females. He said the problem is that people will always rate their pain a 10 on a scale of 0-10. I showed him the pain management kit & tear-off pain assessment sheets. I told him he & his patients can use this to delve more into the issue of pain & told him it would give him more detailed information about the pain & how it effects the patient. He looked over the information & said it does look to be thorough but concise. I told him tools like this can be especially useful when a patient is being treated with a new medication such as Butrans or OxyContin or if they are having a change in therapy (ie dosing adjustment). Dr Dale said he will start using the assessments. He said he doesn't use as much OxyContin now but he is interested in getting more of his patients on Butrans. He said it makes sense since it is releasing medication over 7 days instead of the patient having to take it over & over each day. Reminded him of abuse/addiction potential. I asked him to identify one appropriate patient with commercial insurance & give them Butrans. He agreed. He also said Intermezzo is a good medication for a niche group of patients. He said he has 3 patients on it who are doing well.
PPLPMDL0020000001	Maple Heights	OH	44137	3/6/2013	Delivered communication insight to Dr Gene & asked his thoughts. He said he thinks it probably is a good idea for patients to keep track of their progress on pain medications, although he added that many of them simply won't take the time to do it. I agreed that not every patient would be ideal for it, but asked his thoughts on implementing tools from our pain management kit (showed him kit) to help him better assess his patients who he treats for pain. He said they looked like good forms. Also let him know we have various pain diaries that patients could keep for daily logging of their pain experience. I used the example of starting a new or changing a dose of a medication like Butrans or OxyContin. He said tracking tools would be especially useful for patients who are newer to a medication. Dr Gene said he probably needs to use more Butrans & he thinks if pain management was using it more, it would encourage primary care to do the same. I re-visited with him the appropriate patient type/range & asked if he understands why we spend a lot of time with primary care practices in addition to pain management. He said he does & added that he thinks he will position Butrans after tramadol, instead of going to Vicodin if he knows the patient will need something chronically. I showed "Scott" profile & told him this is a great place to use Butrans. Also discussed Intermezzo indication & dosing.
PPLPMDL0020000001	Akron	OH	44333	3/6/2013	Good discussion about his use of the Butrans patient experience kits and to continue use them as well as asking patients if they have completed the surveys. I recapped my last call when we discussed the resources available for him and his patients to help them communicate better. Dr said he will ask his patients about the surveys because he thinks that information should be useful. I spoke about the types of patients he has on Butrans which are his older patients over 65. I asked him what he is currently doing for his patients under 65? Doctor said he follows a treatment of non narcotic therapy such as physical therapy, injections etc. I asked if he has patients on tramadol around the clock? Dr said he does and said that he does and said that he will take a patient to 400 mg/day. I asked dr to use more Butrans in the appropriate patient like the tramadol patient.
PPLPMDL0020000001	Bedford	OH	44146	3/6/2013	Dr Moufawad said remembers he told me about how he has been seeing an increase in drug-seeking behaviors & he wanted to share some information with me. He said he recently went to a seminar with other pain physicians who said the same thing is happening to them. Dr Moufawad said physicians need screening tools. He then said he was looking over his practice metrics & of the 70 new patients he saw in the specified time period, he only kept 7 of them. He said that means that only 10% were legitimate patients. Dr Moufawad said he wants to move his practice more & more to long-acting instead of short-acting. I asked how long it takes to make that transition. He said it depends. He said the trigger for him, for example, to move a patient from Percocet to something like OxyContin is when the patient is no-longer controlled on 4 tablets per day. He said the patients typically want 5, while his strategy for them is to change to long-acting, while still giving 1-2 Percocet per day for breakthrough. He said most patients don't want to do this, so they don't come back. He said the legitimate ones don't object, so it really takes no time at all. He also said that he really likes using Butrans as well as OxyContin. I reminded him that I also now have Intermezzo & reviewed indication. He said he probably won't be
PPLPMDL0020000001	Akron	OH	44308	3/6/2013	Met with Cindy (NP) and met Mary and Tammy at the receptionist desk and discussed OxyContin and when it is appropriate to use. Provided initiation and conversion guide. Discussed co-directors of the pain center.
PPLPMDL0020000001	Akron	OH	44308	3/6/2013	Spoke with Cindy about OxyContin and its role in the burn unit at Akron General. Cindy expressed that many of the residents don't know as much as they should when it comes to treating pain and the products available. I discussed the OxyContin initiation and conversion guide and discussed where it is appropriate.
PPLPMDL0020000001	Akron	OH	44320	3/6/2013	Discussed with dr his treatment protocol for his pain patients and if there is room for a product like Butrans in his practice. Dr told me that we should discuss this together over breakfast on a Wednesday at the end of the month. Dr said he wants all doctors to participate in discussing how their office treats pain and suggestions I have with my products.
PPLPMDL0020000001	Maple Heights	OH	44137	3/6/2013	Spoke with Jim, pharmacist & gave him Intermezzo pharmacy information, pointing out 3 key messages. He said he is familiar with it but hasn't filled any prescriptions. Showed Butrans & OxyContin savings information sheets. He said he has plenty of cards. I let him know he can also print savings online if necessary.<font color=blue><b>CHUDAKOB added notes on 03/15/2013</b></font>Ashleigh, make sure you are changing your products presented to reflect what you discussed in what position. For example, in this call it appears Intermezzo should be in the first position based on your call notes.
PPLPMDL0020000001	Oakwood Village	OH	44146	3/6/2013	Made drop-in visit to meet w/ D.O.N. Donna Stats, Spoke w/receptionist, who informed me that the D.O.N. is Barb Straemple, but an appt. is needed.
PPLPMDL0020000001	Parma	OH	44134	3/6/2013	Delivered communication insight to Dr Hernandez. He said that was interesting & he would like to talk to me about that, but he had fallen very behind in seeing patients & asked if I could come back next week. He added that he just started a new patient on Butrans 20mcg & gave them a savings card.<font color=blue><b>CHUDAKOB's query on 03/15/2013</b></font>Did you explain to him again that the 20ug is not a starting dose and our recommendation is not to do that?<font color=green><b>APSEGA's response on 03/17/2013</b></font>Yes. I guess I should have included that in my call note. I apologize.<font color=blue><b>CHUDAKOB added notes on 03/17/2013</b></font>Thanks! You are correct about including it in your call notes.
PPLPMDL0020000001	Akron	OH	44312	3/6/2013	Led with the most recent insight and asked him how he communicates with his patients? Dr said that he discusses the pain scale and general discussion with the patient. I told him that Purdue has many resources available to strengthen the relationship between the patient and their medicine and hopefully the adherence to the product will increase. I explained the Butrans patient information guide and explained the Scott profile. I asked dr if he would prescribe Butrans for a patient like Scott? Dr said he will look for candidates.
PPLPMDL0020000001	Cleveland	OH	44128	3/6/2013	Made a drop-in visit, spoke w/ RoseAnne Howell, introduced Joe Hennessy. I discussed scheduling in-service for constipation, RoseAnne stated, "We have not had our survey yet, it should be by the end of the month, I will call
PPLPMDL0020000001	Parma	OH	44129	3/6/2013	Spoke with Georgia & gave her pharmacy information for Intermezzo. Discussed 3 key messages. Also discussed trial & savings programs for Butrans & OxyContin & let her know savings can always be printed online by them or the customer. Reviewed eligibility requirements.
PPLPMDL0020000001	Parma	OH	44129	3/6/2013	I stopped Elaine with the Butrans formulary grid between patients. She said she hasn't written much Butrans because it seems like when she does try it, it ends up getting denied. I reminded her of previous conversation when she told me it would be helpful to have a pocket reference. I told her she can have the grid & can use it when she chooses, keeping it in her pocket if she wants. She asked about BWC. I let her know it is being paid for as of now. She wrote it on the grid. I told her her best chance for success in getting it covered would be commercial insurance & BWC, asking her to stay away from Medicare. She wrote notes on the grid & said she would start keeping it in her pocket. She said she does want to use it more because she likes it clinically, which is why she has tried to write it. She said she just saw so many denials that she quit trying to get it for patients. Spoke with Dawn who said she does have to do quite a few prior authorizations for Caresource. She added that often times, these are not "easy", but rather take a lot of time & sometimes take a peer review to get approved. I asked what their denial reasons have been. She said usually length of therapy of tramadol or hydrocodone. She said she does not want the patients to have to be on the short-actings for a full 30 days because by then they are already in the mentality of taking pills around-the-clock. She said it takes time, but she gets the PAs approved for me.
PPLPMDL0020000001	Fairlawn	OH	44333	3/6/2013	Spoke to Gilbert the pharmacist and asked about intermezzo and OxyContin prescriptions in the area. Gilbert said that have a couple of patients on intermezzo and some on Butrans as well. Gilbert spoke about the necessity to ensure physicians are titrating their patients instead of discontinuing it. Explained OxyContin doses and how to convert from an oxycodone patient.
PPLPMDL0020000001	Cleveland	OH	44122	3/6/2013	Spoke w/ Staff Development Coordinator, Francine Young, stated, "I meant to call you earlier, but I need to cancel the in-service on Pain Management scheduled for today (3/6 @ 2:00 & 2:30). When I asked Francine for the reason for the cancellation, she stated, "d/t staffing challenges and I am busy w/ meetings today." I asked, if we could re-schedule, and she stated, "I don't have my calendar w/ me, I will call you."
PPLPMDL0020000001	Warrensville Heights	OH	44122	3/6/2013	Delivered communication insight to Dr Zivic & asked his thoughts. He said the problem with pain diaries is that patients are "always in pain" if they are being treated for pain by him, so he sees no point in having the patient document that. I told him I realize that keeping a pain diary isn't going to solve everyone's problems, but pointed out some of the pain assessment tools & diaries from our pain management kit. I pointed out that the tools do not simply ask if the patient is in pain or even just to rate the number. I asked if having more thorough information from the patient about their pain could help him better assess the patient's condition by possibly showing patterns or changes. He said that was a good point & said he would be willing to try them for some patients. He then said he had to go- gave him formulary updates. He said he needs a Butrans refresher when I come in next Dr Azar says he likes OxyContin and uses it all the time. As for Butrans, he does not know anything and says that he wants to know more. Went over indications/ limitations. I walked him through appropriate patient selection utilizing dosing slider. went through 5 mcg/hr for opioid naive patients, then possible titration to 10 mcg/hr and max dose of 20 mcg/hr. Told him I would follow up w him at lunch. as he was multitasking and not focusing as much as I would have liked.
PPLPMDL0020000001	Stow	OH	44224	3/7/2013	Led with insight and asked dr what resources or things that he uses to find out a patients current and past pain history? Dr said he uses the pain scales and talks with patients about how they are feeling. I told him that Purdue has many resources that can help him and his patients with Butrans. I explained the Scott profile and prescribing it for his working patients that have prescription insurance. Dr spoke about the cost of medicines and that copy cards do not make or break him in respect to prescribing a product. I asked him to gain some clinical experience with Butrans. Dr said he will try.
PPLPMDL0020000001	Mayfield Village	OH	44143	3/7/2013	Dr. price not in good mood and not very engaged. First visit w OxyContin & Butrans. Asked him how do my products fit into his practice? He says he uses OxyContin only for cancer patients. I then transitioned to Butrans. Asked him how familiar he is with Butrans and tried to go over dosing & appropriate patients but he was not engaged. Told him I'd follow up at lunch. left HCP Intermezzo packet. Irina (nurse) showed me where to leave OxyContin savings cards.
PPLPMDL0020000001	Akron	OH	44305	3/7/2013	Spoke with Matthew and Lisa about all products. Explained intermezzo indication, limitations of use, and dosing specifics. I asked how often they dispense OxyContin? Matthew said he sees it a lot. I asked if they are mostly refills or new prescriptions. Dr said many of the pain drs write for it and most are refills and some are titrating through the doses. I explained Butrans key selling messages and appropriate patients and initiation and titration.
PPLPMDL0020000001	Mayfield	OH	44143	3/7/2013	Spoke w pharmacist about Intermezzo. She was floating at this location. Just saw her last week in Richmond Hts. This is UH building. They don't have any of other products in stock. she states they only stock Percocet.

PPLPMDL0020000001	Stow	OH	44224	3/7/2013	I asked dr where she is currently using OxyContin? Dr said she is using it and has a patient with spinal stenosis. I asked dr to use OxyContin earlier on in treatment and to begin with the low doses. I told her that my hope is that she uses it before she would move to Percocet. Dr agreed. I explained Butrans and asked her if she would use it as well. Dr said she would. I explained a little of the insight and told her about some of the resources available. Dr said what would be valuable to her is brochures or resources that she can scan into her EMR system so she could get credit. I told her that it was a good suggestion and I would look into it.
PPLPMDL0020000001	Stow	OH	44224	3/7/2013	Discussed intermezzo with Holly the pharmacist. Explained the indication, limitations of use and dosing specifics. They do not stock it and have not dispensed for it. Explained Butrans dosing, CII, 7 day controlled release patch, dosing and titration. Holly said they have not filled for it for months.
PPLPMDL0020000001	Akron	OH	44305	3/7/2013	I told dr to be specific with his patient selection with Butrans. I explained the Scott profile and how to initiate the dose and how to properly titrate. I explained how he needs to focus on Medco for his working patients and to use the experience kits. I explained the Caresource population and the PA criteria. I asked dr if he likes writing IR opioids for patients? Dr said he does not. I told him that Butrans is an option for him when his patients meet the indication. Dr agreed and that he likes Butrans and that it works. I asked him for more business.
PPLPMDL0020000001	Mayfield Village	OH	44040	3/7/2013	Spoke w pharmacy tech. Pharmacist Steven Mitchell had several patients waiting & could not speak w us. She checked on Intermezzo, they have 3.5 mg in stock. She didn't have time to check Butrans or OxyContin. Left Steven Pharmacists Guide to Intermezzo, FPI, and Dosing card.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	3/7/2013	Discussed UHC situation about patients paying cash for prescriptions and then being reimbursed from the copay card company. I learned that this applied to mail order companies only. I spoke with her about having formulary or coverage issues with Butrans? Darlene said she has not had an issue with it. I discussed the commercial formulary coverage with Butrans and reviewed the managed care grid. I told her to reference that card when a prescription comes through. Darlene said she would use it and it would be helpful.
PPLPMDL0020000001	Lyndhurst	OH	44124	3/7/2013	First time I visited Dr Isakov as Purdue rep. Introduced my products. He said he's very cautious in using opioids due to abuse & diversion being such a problem. Thinks OxyContin does have a place for cancer patients. He shared w us that the office uses the OARRS program. He called over one of the nurses to talk w us & she says they call OARRS about 7x a day, and had patient file, and asked Dr. Isakov if she could call OARRS for that patient wanting more Tylenol 4. When I showed him Butrans dosing card, he says he has used Butrans & is aware of product. Shared w his head nurse Helen I was leaving her managed care grids for OxyContin & Butrans.
PPLPMDL0020000001	Mayfield Hts	OH	44124	3/7/2013	Introduced myself as being new w Purdue. Told him I'd like to partner w him in terms of helping him manage his patients pain. I can provide savings cards & resources for OxyContin & Butrans. He says he doesn't like to treat pain, but he does. Where do these products fit into his practice? He likes OxyContin and he has also used Butrans. He mentioned he uses OxyContin for his workers comp patients. I then stated Workers Comp will pay for Butrans & went over dosing for Butrans. Asked if he'd like savings cards for both and he said asked me to set up dosing cards for both & savings cards in his personal office. Dr. Kim asked if we ever use primary care speakers and we stated we would submit his name & he would need to correspond w Purdue after that. Spoke w head nurse Helen to make sure she's aware of my products. First lunch avail in June. Sched w Diane & asked her 2 call
PPLPMDL0020000001	Mayfield Hts	OH	44124	3/7/2013	Had lunch w Dr. Laham. He asked me to bring him more of the Butrans patient guides. He said the guides I left last week, were really helpful to he and his staff. He says he really likes Butrans as an option for certain patient types. He feels Butrans is a good niche product for nerve/neuropathic pain. He also likes for elderly. OxyContin he agrees is good product as well. He says he has several speaking engagements coming up over next few months all over the country for Purdue. He is willing to fly/drive to areas such as Cincinnati and Columbus. He let me know that CNP Debbie Bizjack leaving April 1 and practicing full time @ Cleveland Clinic Foundation downtown, in cardiothoracic medicine. I will make sure to mark as moved in Phoenix. Asked him if he has patients keep a pain journal to encourage open communication. He says he has certain protocols in place such as having patients bring back their "used" Butrans patches at follow up visits. He feels once he gets that extra data, for example, from a pain journal, what will he do w extra paperwork? Went through pain management kit w him. He liked the idea, but not the execution of it.
PPLPMDL0020000001	Mayfield Village	OH	44143	3/7/2013	Met w PA @ Dr David Mandels office. She is only HCP there on Thursdays. Asked her how our pain products fit into her practice. She says she has used both OxyContin and Butrans in limited amounts, but their practice is trying to get away from managing patients needing opioids for chronic pain. they are trying to stop from going beyond Tramadol. Why? because of the scrutiny on non pain mgt HCP's due to Ohio Bill 93. Does that bill include the rheumatology specialty? Yes. Went over the fact that 50% or more of their patients would have to be on opioids for at least 3 months or longer. They are still trying to refer more and more patients over to pain management that prefer oral pain pills. Made the suggestion of Butrans for chronic pain patients CII, for her commercial patients under age 65. As far as workers comp patients, she can think of only one in their practice.
PPLPMDL0020000001	Cleveland	OH	44130	3/8/2013	Quick call- Reviewed broad formulary coverage for OxyContin, including Medicare plans. Dr Pops shook her head & walked away. Spoke with Renee & reviewed Butrans appropriate patient type, showing range of patients from initiation guide. She agreed to give the information to Dr Pops.
PPLPMDL0020000001	Tallmadge	OH	44278	3/8/2013	Beth told me that she just read an article about Butrans in one of her journals. I asked her what specifically about? She said it was just about the product and said that the overall point was that it is a good option for low dose chronic pain management. I asked her if she had prescribed? She said no but this she may have a few patients. I asked where she would use it? Beth said for patients she wants to get off IR opioids like vicoden. I reviewed the Scott profile and asked if she had patients like him? She said she does and may try it there.
PPLPMDL0020000001	Fairwan	OH	44333	3/8/2013	Quick discussion in hallway about the Scott profile. I asked dr if he has patient on ultram that may need a change in therapy? Dr said he thinks he has some. I told dr to move a patient to Butrans when he is considering titrating ultram or moving to vicoden. Dr said ok and I showed him the starting doses and titration. I asked dr to gain more experience with Butrans and he said ok.
PPLPMDL0020000001	Cleveland	OH	44130	3/8/2013	Quick call- Dr Jetha said he wasn't staying to talk during lunch. I reviewed Butrans dosing & appropriate patient type as well as CII once weekly dosing & transdermal delivery. He just said OK & walked away.
PPLPMDL0020000001	Parma	OH	44129	3/8/2013	Delivered communication insight to Dr Khooball. He said he just doesn't even like to treat pain. I told him this is understandable, however, most physicians will admit that there are some, even if it is a small amount, of patients who they are willing to treat for pain. He said he guesses he has some. I told him one of my goals is to help increase the comfort with which he treats these patients & one of the ways we may accomplish that is by improving communication between him & the patient about the pain. I showed comfort assessment tear-offs & asked how something like this tool could increase that communication. He said he likes that it gives more detailed information than simply rating the pain. I added that this can simply be placed in the chart. He said he would be happy to use a form like this. I told him that way, if an appropriate patient presents, he has more comprehensive information regarding pain to assess if perhaps Butrans would be a good option for that patient. Reviewed once weekly dosing & patient type. He asked if I was going to have a program for Intermezzo. I told him I was not aware of any. Also spent time with Carla & reviewed the tear-offs. She said using that would be a lot better than their current patient information form.
PPLPMDL0020000001	Tallmadge	OH	44278	3/8/2013	Led with insight #3. Dr said he thinks Butrans is a good product and it makes sense however he said he doesn't want to communicate with his stints anymore than he has to! I explained the potential benefit from using certain resources in combination with Butrans. Dr said ok. I expressed how important how important it is to select the appropriate patient for Butrans and explained the Scott profile and his patients who are works with prescription insurance. Dr said brand names are too expensive and patients don't want to have to pay for them. I explained how he needs to find the appropriate patient first and to sell the product to the patient! Dr agreed and said he will try it when he finds the patient type.
PPLPMDL0020000001	Mogadore	OH	44260	3/8/2013	Spoke with Nicole about intermezzo indication, limitations of use and dosing. She said they don't stock it or have dispensed it. I explained Butrans dosing, appropriate patients and starting doses. Nicole said they have filled for Dr Cain.
PPLPMDL0020000001	Mogadore	OH	44260	3/8/2013	Discussed all key selling messages with doctor on Butrans and intermezzo. Dr said he has attempted to use Butrans but was too expensive for the patient. I asked where he has used it and he said he could not remember. I discussed the appropriate patient and plans where he can have the least resistance. Dr said he will use it again and was glad to learn where it is suited best. I reviewed intermezzo indication, limitations of use and dosing as well as copay cards for his patients.
PPLPMDL0020000001	Beachwood	OH	44122	3/8/2013	Quick call- Reviewed Butrans dosing & appropriate patient type with Helen. Gave her titration literature. She said she has been very busy seeing patients on her own, thanked me, & walked away.
PPLPMDL0020000001	Independence	OH	44131	3/8/2013	Roman said that he is frustrated with OxyContin. I asked him to elaborate. He said he just had a patient who got denied for OxyContin & they made him use fentanyl instead. He said he didn't want to use fentanyl for this patient & that it made no sense why they wouldn't just give this patient OxyContin. I asked what plan this was on. He said he thinks it was a Medicaid plan. I told him it is possible that this happened. I reminded him that we discussed managed care & how I had told him about the formulary grids. I have him both OxyContin grids- 2 copies of each- & explained to him what they mean & how to use them. He said he can't possibly check these out before writing a prescription. I told him I understand that can seem tedious, but reminded him that spending the time up-front may save him & his staff time on the back end. I encouraged him to share them with his girls so they can also use them when they are dealing with managed care. Roman said OxyContin is a good drug & he doesn't want to give up on it. He said patients are on it for about a month & then do well. I asked him to not give up on it if he has success clinically with it. He said it is the one he chooses most. He added that he doesn't like "my other drug". I asked if he meant Butrans. He said yes & he thought it seemed like a good one, but then patients found it to be too expensive or they didn't like it. I asked him to at least not rule it out, shared coverage information, & reviewed appropriate patient type.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	3/8/2013	E-Mailed ADON, Deb Lovette to re-schedule in-service on constipation.
PPLPMDL0020000001	Cleveland	OH	44122	3/8/2013	1. Participate in the 1st of a series of FACETS programs/webinars with the Case Managers.
PPLPMDL0020000001	Cleveland	OH	44122	3/8/2013	Webinar held for case managers with CareSource. Topics presented were "Assessment" and "Is It Pain" from the FACET modules. Attendees received a copy of the slides (handout format, PDF file) and a Feedback Form.
PPLPMDL0020000001	Cleveland	OH	44130	3/8/2013	Shared communication insight with Dr Diab & asked his thoughts. He asked if I needed something signed. I showed him the comfort assessment tear-offs & showed him how it can help him & his staff obtained more detailed information about a patient's pain. He still did not respond & just walked away. Spoke with MA's Hilda & Chilla. Showed them pain assessment tools & introduced Butrans to them. Also reviewed OxyContin formulary
PPLPMDL0020000001	Akron	OH	44312	3/8/2013	Gave explanation of the new OxyContin essentials kit to doctor and Lela. They both said that it seems like something they would use. Dr said he forgot that the copay card went up to \$90 off. Go to see dr at 8am in Fairlawn on Tuesdays.
PPLPMDL0020000001	Parma	OH	44129	3/8/2013	Spoke with Stephanie & showed Intermezzo pharmacist sheet. Reviewed 3 key messages. She said she hasn't seen any activity so far for Intermezzo, but was aware of it & what it was/who it was for. I showed her information sheets on Butrans & OxyContin savings programs. She said they stock all strengths of both medications.
PPLPMDL0020000001	Akron	OH	44312	3/8/2013	Spoke with Stephanie the pharmacist about intermezzo indication, limitations of use and dosing. She said they have not dispensed but sees the need for the product. She asked about formulary coverage so we discussed copay cards. Butrans indication, dosing, titration, 7 day transdermal system.
PPLPMDL0020000001	Parma	OH	44134	3/8/2013	Rec'd the following e-mail from Linda Belford in Staff Development confirming In-Services : Sorry this took so long to get to you&#61514; nurses March 19th at 2:15PM, STNA&#8217;s March 21st at 2:30PM on Constipation. Call me please with any questions.
PPLPMDL0020000001	Mogadore	OH	44260	3/8/2013	Led with insight and ask him about what he currently does to help increase communication? Dr said that it is the most difficult thing to do with a patient because they tell him what they want and will not accept anything else. I spoke but a few resources that may help him and he agreed to take. I asked him what he likes about Butrans? Dr said that it is moderately low dose for an opioid, it's a patch, and he wants to get his patients off their pills. Dr said the hard part is getting his patients to use a Butrans patch instead of their pills. I asked dr where he is using it. Dr said the vicoden patient. I asked if he has used Butrans for a patient on tramadol? Dr said no because Ethan a patient is on tramadol he doesn't know if they are chronic yet. I asked him if he has current patients who have been on tramadol for more than 3 months? Dr said yes. I asked why he isn't using Butrans before vicoden because if they have been on tramadol for more than three months they are probably chronic. Dr agreed and said he never thought of it that way. Dr agreed to use for the tramadol patient. Intermezzo indication, limitations of use, dosing and copay cards.
PPLPMDL0020000001	Beachwood	OH	44122	3/8/2013	Spoke with nurses Debbie, Carol, Barb, & Jenny & told them about the OxyContin Patient Essentials Packs that I wanted to give to Dr Barrett. I asked what they thought his interest level would be in them. They looked at the journals & said they thought it was a really nice tool for patients to keep. I shared the communication insight numbers with them & asked if they would agree that communication could be improved between patient & physician or nurse. They said they have good systems in place & try to obtain thorough information from patients. I asked if any of the physicians require patients to keep pain diaries. They said they do not. The nurses let me know that they will be getting a Dr LaSalle in the next few weeks. He is a new physician just out of his fellowship. He will help fill some of the scheduling spaces they have had. Gave Butrans savings cards.

PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/8/2013	Delivered the insight to dr and asked him what he is currently doing to improve communication with his patients? He said that he feels he does a good job by making sure he takes the time necessary to explain why he doing what he is doing. I told dr about some of the things that can make the communication even better with pain trackers, assessment tools etc.. Dr liked than and took a few. I asked dr where he is using OxyContin and he said he does not have many new starts and is mostly refilling. I asked him if he has Percocet patients that would be appropriate for the q12h? He said possibly. Sowed the profile and asked him to move patients over. Dr said he
PPLPMDL0020000001	Independence	OH	44131	3/8/2013	Spoke with Angela, who said they had a floater pharmacist in today & he was really busy. I gave her Intermezzo information for pharmacists & reviewed the 3 key points with her. Discussed patient type. She said she saw an ad on TV one night. Also discussed Butrans & OxyContin savings & gave her the information sheets for each. Angela said she would give me information to JT & Dave when they are back.
PPLPMDL0020000001	Mogadore	OH	44260	3/8/2013	Led with insight on all drs including Joe. He had nothing to say. Joe did say that he had nothing against using Butrans and thinks it is a good medicine. I explained all key selling messages and reviewed patient profiles. I asked if he will use it? He said maybe. Introduced intermezzo indication, limitations of use, dosing and copy cards.
PPLPMDL0020000001	Akron	OH	44310	3/8/2013	I asked what he is currently doing for his patients on tramadol who need more? Dr said it depends on the patient and the dose of tramadol. I asked him if he typically goes to 400 mg before he move to another medicine? He said most of the time? I asked him if it makes sense for a patient failing on tramadol to move to Butrans instead of vicoden? Dr said it does but patients need cheap medicine. I told dr to focus on patients who are working with prescription insurance and showed him the formulary grid. Dr said ok he will use it.
PPLPMDL0020000001	Cleveland	OH	44122	3/9/2013	Per their request, mailed one copy of the Tele-Assessment resource to Managers with the Case Management Department at CareSource.
PPLPMDL0020000001	Parma	OH	44134	3/11/2013	Quick call- Stopped Dr Mandat with Scott patient profile & asked him to try Butrans for an appropriate patient like this in his office. He said he would try. Recommended Senokot-S for opioid-induced constipation. He said he is always happy to take Senokot & Colace samples when available. I let him know I would bring him more.
PPLPMDL0020000001	Bath	OH	44210	3/11/2013	Introduced products to Bob. Discussed intermezzo indication, limitations of use and dosing. Introduced Butrans as well as he has not heard or filled either product yet. Butrans dosing, indication, titration, appropriate patients and starting doses. CIII. 7 day transdermal system. Bob said he is really glad I came in to inform him on the products. Explained I promoted OxyContin as well and showed doses. Bob said he dispenses but not as much as he used to because of drs changing they way they treat pain. Dr thought Butrans is a product that should be used often.
PPLPMDL0020000001	Parma	OH	44129	3/11/2013	Introduced myself & Purdue's products to Stephanie. Gave her Butrans initiation/titration guide & reviewed dosing, appropriate patient type, transdermal delivery, & CIII opioid with abuse/addiction potential. I told her this is the first long-acting CIII opioid analgesic available. I showed Scott patient profile as an example of a patient type that may present in her office. Also shared communication insight. She said Dr Kushnar establishes those practices, but she does know they use OARRS & pain contracts. She said they also urine drug screen there. I asked about communication about the actual pain. She said they ask a lot of questions & are guided by the EMR they use. Gave Intermezzo packet & explained indication.
PPLPMDL0020000001	Fairlawn	OH	44333	3/11/2013	Spoke to Chris about intermezzo and Butrans. Explained intermezzo indication, limitations of use, and dosing. Explained copy cards. Butrans key selling messages and appropriate patient types. He said that they do not have intermezzo but have the 5mg Butrans and couldn't remember when he filled it last but has filled it.
PPLPMDL0020000001	Fairlawn	OH	44333	3/11/2013	Discussed intermezzo with Sue and Jessica. I asked if they have had patients complaining of middle of the night awakenings. Jessica said they do occasionally. Left with pharmacy info and explained the copy cards again.
PPLPMDL0020000001	Parma	OH	44129	3/11/2013	Butrans dosing and appropriate patients. Reviewed the Scott profile and told her that is what I'm speaking to my customers again.
PPLPMDL0020000001	Fairlawn	OH	44333	3/11/2013	Dr Taylor said she has noticed that patients who she has put on Butrans really do like it & get good relief from it. I asked isn't this reason enough to identify a few more appropriate patients to start on Butrans. She said she is trying. I told her I thought I would inspire her with an example of a patient example- someone she probably sees frequently in her office. I gave her Scott profile. I pointed out this is a patient taking tramadol around-the-clock, still reporting a 6 out of 10 on the 11-point scale. She said she does see patients like this. I told her the next appropriate one who comes in who has commercial insurance or BWC is her next Butrans patient. She said she would do that. Dr Taylor added that she is trying to prescribe less OxyContin.<font color=blue><b>CHUDAKOB added notes on 03/22/2013</b></font>Don't forget Intermezzo in the third position.
PPLPMDL0020000001	Fairlawn	OH	44333	3/11/2013	Called and spoke w/ Education Training Director, Terri Gildone to discuss pain & pain management educational opportunities. She stated, " Hospice came in last week and did an in-service on pain," She reviewed her education calendar for the year and we discussed education topics that I could provide in-services on. She said, September is bowel and bladder month, and she asked for me to call her in August to schedule an in-service on Constipation for September.
PPLPMDL0020000001	Akron	OH	44333	3/11/2013	Place follow-up phone call to D.O.N., Ramona Watson to schedule appt. to discuss educational opportunities on pain management. I was informed that Ramona was not in the office today. Left msg. on her voice-mail.
PPLPMDL0020000001	Euclid	OH	44117	3/11/2013	Placed a call, spoke w/ D.O.N., Kathy Nemeth, introduced myself and purpose of call. Meeting set for 3/14 @ 3pm to discuss educational in-service opportunities.
PPLPMDL0020000001	Cleveland	OH	44122	3/11/2013	AS a follow up to the webinar on 3/8/13, emailed the Care Source managers with a list of the attendees for the webinar program. Also confirmed the plans for the next educational program, scheduled for 4/19/13 (in person in Dayton and via web to other locations).
PPLPMDL0020000001	Woodmere	OH	44122	3/11/2013	Spoke with Katie & presented Intermezzo pharmacy information booklet. Pointed out & reviewed 3 key messages. Also reviewed savings programs for Butrans & OxyContin. I let her know these were all part of Relay Health's e-voucher program, so having a card was not necessary. Reminded her that patients with any type of government insurance cannot use the cards.
PPLPMDL0020000001	Oakwood Village	OH	44146	3/11/2013	Made a follow-up phone and spoke w/ D.O.N. is Barb Straemple, introduced myself and NE Program. Appt. was made to meet w/ Barb on Thursday 3/28 @ 1:30 to discuss educational opportunities.
PPLPMDL0020000001	Richmond Heights	OH	44143	3/11/2013	Met with Dr. Gray's office manager Jarod Gray, and medical assistant Liz Adams. Showed them all the resources available to them in our Pain Management kit and left them with web keys to access this information. Showed them pain assessment train sheets along with laminated pain scales and Liz really liked both. Jarod will present all info to Dr. Gray, and was very interested in anything we might be able to add to their current pain contract for each patient. We asked them if they utilize OARRS, which they use on daily basis. Presented managed care info and savings cards flash cards. Went through trial/savings card info for Butrans. Showed Butrans patient guides.
PPLPMDL0020000001	Lyndhurst	OH	44124	3/11/2013	Also discussed increased savings for OxyContin in 2013. Able to schedule a few lunches.
PPLPMDL0020000001	Fairlawn	OH	44333	3/11/2013	Placed a follow-up phone call to Linda Dabney in Staff Development @ 440-684-6622 to set up appt. to discuss Pain & Pain Management Educator/in-service opportunities. N/A, Left Msg.
PPLPMDL0020000001	Akron	OH	44333	3/11/2013	Led with insight#3. I asked the dr what he is currently doing to track his patients pain? Dr said all he does is ask how they are doing with their pain. I asked when he does that? He said when they come back for their follow up appointment. I asked if he would help him to know how the patients pain is between the initial appointment and day 30 or follow up appointment. Dr said possibly but the patients would need to be hand picked for that information. Introduced the OxyContin essentials pack and asked if his patients would find it helpful as well as his ability to track pain? Dr said possibly but said again that it would only be a handful of patients. Discussed Butrans patient types and asked him to use for his tramadol patients who ask for more. Dr said ok and said he has 4 patients on it. I asked dr to continue to use early on in treatment of pain and he agreed.
PPLPMDL0020000001	Akron	OH	44308	3/11/2013	Spoke with dr at window and reminded him about the Scott and Nancy profile. I asked him to initiate more patients that meet that general description. Told dr again that BWC is paying for Butrans and Caresource PA criteria.
PPLPMDL0020000001	Akron	OH	44308	3/11/2013	Conference call held with Summacare (OH) to review the Purdue Pharma Educational Resources. Provided an overview (verbally and via the web) of the PERFORM on-line resource, the Tele-Assessment resource, and the Opioid Analgesic Utilization toolkit.
PPLPMDL0020000001	Parma	OH	44129	3/11/2013	Delivered communication insight to Dr Kushnar & asked her thoughts. She said she just hates treating pain patients & does it as infrequently as possible. I told her I understand, however there are patients who can benefit from opioid therapy due to legitimate painful conditions. She said this was true, it just does not seem like there are very many. I told her for the purposes of our discussion, we would focus on those patients, even if it was only a few out of her entire practice. I asked what measures she currently follows to communicate with patients. She said she asks a lot of questions about specifics of the types of pain they experience. I told her this sounds like a good start. She said she uses OARRS as well as a pain contract. I asked about pain journals. She said she was uninterested in implementing that. She said she has not found the right patient for Butrans. I told her it is possible that she has, but I haven't done a good job of helping her see who exactly that is. I showed Scott patient profile & asked if she has patients like this. She said she does have some. I told her this was a potential Butrans patient & reviewed dosing, titration, managed care, & trial/savings. I asked if she would try it on just one patient like that & she agreed. She asked about OxyContin Medicare coverage. I reviewed grid. She said she has had problems with Anthem Senior. I explained segments of the plan. Gave her Intermezzo packet of information.
PPLPMDL0020000001	Cleveland	OH	44143	3/11/2013	Dr. Balaji not in until after 10:30. Met receptionist Tamara. Tamara says Dr. B. has limited his access to talking w reps to lunch only. Asked to see if they have any nurses or med assts in today. She said that one MA was in. Asked if I could see her. Met w Laura at window. Let her know I have Butrans and OxyContin. Asked if they currently have savings cards for either product. Laura said they do for Butrans and not for OxyContin, and I would have to discuss OxyContin w Dr Balaji at lunch.
PPLPMDL0020000001	akron	OH	44333	3/11/2013	Led with insight #3. Dr said that he doesn't have enough patients to really worry about communication. Dr reminded me that he has a consierge service for his in home patients and that is communication and patient care. I discussed his patients that tell him they wake up in the middle of the night. Dr said he has a few and that he will consider.
PPLPMDL0020000001	Euclid	OH	44117	3/11/2013	Made a drop in visit to speak w/ D.O.N., Madeleine Moore, spoke w/ Mother M. Raphael, RN Administrator who stated Charlene Miller handles the education, but she was off today, her extention is 271 and the D.O.N. was off sick. left my BC & PAP materials
PPLPMDL0020000001	Beachwood	OH	44122	3/11/2013	Quick call- Saw Dr Myton-Craig at the window while speaking with Tammy (MA) about Butrans formulary coverage. She asked if Butrans is still on BWC. I told her they have been paying for it with no prior authorization required. I told her I'd like to show her an example of a patient type for Butrans, but she said she didn't have time & walked away. Shared "Scott" profile with Tammy.<font color=blue><b>CHUDAKOB added notes on 03/22/2013</b></font>intermezzo, even if you leave information with Tammy.
PPLPMDL0020000001	Akron	OH	44312	3/11/2013	Quick hello in office. Showed dr the patient profiles and asked him to move patients on IR oxycodone who could benefit from a q12h oxycodone. Dr said for sure and he will look over the information.
PPLPMDL0020000001	Akron	OH	44309	3/11/2013	1. MBK will join via webinar to present resources 2. Review Product updates 3. Determine Summa Care business updates 4. Determine status of Health Exchanges
PPLPMDL0020000001	Parma	OH	44129	3/11/2013	Spoke with Heath, pharmacist. Gave him intermezzo pharmacist information booklet & showed him 3 key messages. He said he saw that they had Intermezzo at one point, but did not think anyone had brought in a prescription yet. Reviewed dosing & patient type. Reviewed savings information sheets for Butrans & OxyContin & reminded him of eligibility requirements for savings utilization.<font color=blue><b>CHUDAKOB added notes on 03/22/2013</b></font>Don't forget to change intermezzo to the primary position on pharmacy calls.
PPLPMDL0020000001	Euclid	OH	44117	3/12/2013	Met medical receptionist Lola, who scheduled lunch for me. Also met Jodi, medical assistant who handles Doctors Workers Comp patients. Left formulary grids for OxyContin. Then met with Dr. Morley. Deals with all workers comp patients, and physical rehab. Will prescribe CII and CIII bit refers his patients to Dr Moulfawad for injections. When I asked Dr. Morley about Butrans, and if he has any hesitation about writing Butrans, his main concern is efficacy. Wants to know it works. Left him both Opioid Naive and Opioid Experience clinical study backgrounders for review.
PPLPMDL0020000001	Parma Heights	OH	44129	3/12/2013	Reviewed pharmacy information for Intermezzo with Cathy, pharmacist. She said she has dispensed it maybe once or twice, but it has been a long time. Reviewed dosing & appropriate patient type with her & reminded her of indication. Reviewed Butrans & OxyContin savings information & eligibility requirements for card utilization. She said they still have some, but requested additional OxyContin cards as hers were expiring. I pointed out patients could save more this year than in previous years.
PPLPMDL0020000001	Parma	OH	44129	3/12/2013	Quick call- Dr Roheny said he was running behind & didn't have time today. He said he is sorry to tell me that he has not written Butrans. I gave him the "Scott" profile & told him I would like him to look for one appropriate patient like this & try them on Butrans. He just said "OK" & walked away.
PPLPMDL0020000001	Stow	OH	44224	3/12/2013	Discussed Butrans and her use in the practice. Laura said that she has used it but not as often as others. I asked Laura why she doesn't prescribe it very often? She said she just likes to leave that up to the doctors but said she knows she should use it more herself. I gave review of Scott and nancy and asked her to identify patients like them who are appropriate for Butrans. Laura said she will try to prescribe more.
PPLPMDL0020000001	Cleveland	OH	44122	3/12/2013	Per request from CareSource, mailed a copy of the TeleAssessment resource to Misty Taylor.



PPLPMDL0020000001	Cleveland	OH	44130	3/12/2013	Quick call- I showed Dr Fedorko the Scott patient profile & pointed out that this patient is taking tramadol around-the-clock for his pain & is not achieving efficacy, according to his pain score. Dr Fedorko asked me how many patients I think he has on tramadol. I told him I do not know for sure, but maybe a few. He said no more than one or two. I asked him to choose one of them & try Butrans if appropriate. He told me he feels bad for me & told me to get a better drug, then walked into a room.
PPLPMDL0020000001	Uniontown	OH	44685	3/12/2013	Reviewed the Scott profile for Butrans with dr and asked her if she would use Butrans for a patient like Scott? Dr said she probably not use it because she doesn't treat chronic pain. I asked dr what she deems chronic? She said patients that need extended release opioids. I asked her if she has patients who have been on tramadol or vicoden for 3 months or longer? Dr said she will not prescribe extended release medicines. Nothing else
PPLPMDL0020000001	Uniontown	OH	44685	3/12/2013	Discussed her use of OxyContin and where? Dr told me she is not using CII's anymore. Doctor said that she will use a schedule 3 medicine like Butrans when she finds the right patient. I explained the Scott profile and how she identify patients like him. I told dr to accompany each patient selected w/ a information guide to help the patient learn more about their medicine and provide a copy card for the commercial insured patients. Dr said ok because cost is an issue she hears every day. I asked if she could identify one patient like we discussed with prescription insurance. Dr said she will try.
PPLPMDL0020000001	Parma	OH	44129	3/12/2013	Spoke with Edwin, pharmacist, & gave him pharmacy information for Intermezzo. He said he thinks he has seen one prescription for it, but it was when it first launched & it wasn't covered. Reviewed coverage with him. He asked if there was some sort of advantage to taking Intermezzo over other zolpidem products. I reviewed indication with him & dosing/delivery. He said that he can see now that it is for a different patient type. Reviewed Butrans & OxyContin savings programs with him & he confirmed that he has cards on hand. I reviewed usage requirements.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/12/2013	Placed call to D.O.N. Deb Keller, to set up appt. to meet and discuss pain & pain management educational opportunities. N/A, left msg. 330-777-5002
PPLPMDL0020000001	Beachwood	OH	44122	3/12/2013	Placed a phone call to Cheryl Grim, Nurse Educator to discuss NE Program and Pain Management educational opportunities. N/A left msg. on her voice-mail.
PPLPMDL0020000001	Parma	OH	44134	3/12/2013	Placed phone call to ADON Cheryl Sigley to set up appt. to meet and schedule educational in-services. 216-661-6800 ext 414 . Spoke w/ receptionist, who stated, Cheryl is not in today." Left msg. on her voice-mail.
PPLPMDL0020000001	Parma	OH	44129	3/12/2013	Spoke w/ Kim Barber, Change in date of In-Service on Pain Management to 3/22 @ 2 & 3:30
PPLPMDL0020000001	Highland Heights	OH	44143	3/12/2013	Met w medical secretary Mary. Asked to see Dr. Salama, since Im new rep. He does not see reps outside of lunch she says. Asked if they have head nurse or office manager, she said Dina. Asked if I could see Dina, but she was with a patient. Scheduled lunches. Left formulary grids for Butrans & OxyContin & savings card flash cards. Asked if they keep scheduled products savings cards in separate area/closet, and she says they do keep in special
PPLPMDL0020000001	Cleveland	OH	44122	3/12/2013	Placed phone call and spoke w/ Francine Young to re-schedule in-services on Pain management. Francine said, " I am wearing a few different hats at the moment, and won't be working on staff development until the end of March. I will make a note to call you then."
PPLPMDL0020000001	Stow	OH	44224	3/12/2013	Good discussion with dr about Butrans and his use in the practice. Doctor said he likes that Butrans is a schedule 3, its a patch, and it is for a week. Dr said that the earlier it can be used the better because he said he doesn't want to mess with the problems vicoden and Percocet bring with more and more pills. I asked dr if he has a threshold of IR before he moves to an ER medicine? Dr said he tries to keep it around 4 pills a day, sometimes 5. I explained the Scott and nancy profile and asked him if he will continue to use Butrans and continue to use it early on in treatment? Dr said he will and has no problem titrating to the 20mcg as well.
PPLPMDL0020000001	Stow	OH	44224	3/12/2013	Spoke to Abby about her use of Butrans and where and why she uses it. Abby said that she likes it a lot because it is low dose, a patch, and it works well. She said she uses it for patients on tramadol and vicoden and in patients on both or multiple meds when she wants to reduce their IR intake. I reviewed the patient profiles and she said that she uses it in those cases. Abby asked about titration. I reviewed the titration piece and discussed steady state. Abby said she will continue to use and will try to initiate Butrans earlier on in treatment.
PPLPMDL0020000001	Uniontown	OH	44685	3/12/2013	Dr said he has not had a new start on Butrans. I asked why and he said because he can't remember it. I told him to remember it by thinking of a specific patient who is appropriate. I reviewed the Scott profile and asked him if he had any patients like him? Dr said he is sure he has a few and understands why and where it should be used. I reviewed the appropriate starting dose as well as titration. I showed dr the information guide and copy card. Dr said he will try to remember and get a new start.
PPLPMDL0020000001	Stow	OH	44224	3/12/2013	Discussed Butrans key selling messages with Janet. I asked her about her experience with Butrans? She said she has used it a little and deals primarily w/ the BWC patients. I told her that its perfect then because BWC is paying for it. I explained where she can use Butrans and why by using the initiation and titration guide and Scott profile. Janet said she will try to use it more often.
PPLPMDL0020000001	Stow	OH	44224	3/12/2013	Spoke to Greg and Mike about Butrans and intermezzo. Greg told me that they continue to see Butrans and the 10mcg is filled most frequently. I explained the steady state, and titration. Itermezzo indication, limitations of use and dosing.
PPLPMDL0020000001	Stow	OH	44224	3/12/2013	Good discussion with doctor about Butrans and the role it plays in his office. Dr said he really likes it because he doesn't want to have to prescribe vicoden and Percocet but sometimes its a necessary evil because they are easy to prescribe and insurance will pay for it. Dr explained how he uses Butrans in patients who he believes the IR is not working based on their pain level and condition for treatment. I asked dr if he has a threshold that he sets for his patients on IR before he moves to an ER product? Dr said he doesn't like to do it because each patients case is different but mentioned again he doesn't like to prescribe the IR products. I asked him why Butrans doesn't any more of a role early on in treatment? Dr said it does but said it comes down to ease of prescribing and with 12k patients he needs to make good decisions. I told dr that a good decision is to use Butrans for a patient that fails tramadol or early on in the treatment with vicoden. Dr said he didn't disagree but coverage with Butrans could be better. I explained BWC, Caresource, and private prescription plans. Dr said they have not had too much trouble with coverage of Butrans and will try to use more.
PPLPMDL0020000001	Cleveland	OH	44124	3/12/2013	Met w Laurel med secretary. asked to schedule lunch, she says to leave my business card and she will have office manager Rinatta call me. Left commercial, Medicare formulary grid and savings card flash card. Was able to meet Dr. Cassellberry, as he was in waiting room. He perceives OxyContin to be a little expensive and we told him we've increased patient savings to \$90 off co pay each month.
PPLPMDL0020000001	Lyndhurst	OH	44124	3/12/2013	Spoke to pharmacist Eric Szymczak. He was not aware of Intermezzo and has not dispensed any. Left Pharmacist Guide for Intermezzo, FPI, and dosing card. Let him know 5 day trial for Intermezzo available but HCP must include 5 day script w trial offer. He has dispensed Butrans in past but none on shelf currently. Sees a lot of Dr. Franklin price customers. Says he doesn't fill scripts for Dr. Cassellberry but would not elaborate. Dispenses OxyContin, but says very little 80 mg is dispensed there.
PPLPMDL0020000001	Stow	OH	44224	3/12/2013	Quick introduction to dr as he was doing injections. I explained my products and dr said he may be willing to take more time with me when I'm in next for a lunch. Left him with patient profiles and dosing information
PPLPMDL0020000001	Parma	OH	44134	3/12/2013	Dr Hernandez said he just put someone on Butrans- he has been on it a few months & is happy with his results. He said the patient had been on Opana 30mg & reports that he feels much better on Butrans. I asked Dr Hernandez if he has a patient who is taking hydrocodone 4 times a day, getting month after month of refills, but reporting doing well on it if he is satisfied with that. He said it depends. He said he really doesn't worry so much about someone on hydrocodone as he does someone on the stronger opioids like Opana, taking that chronically. He said he tells the patient why it makes sense for them to try something like Butrans & usually that is what happens. Dr Hernandez said when patients get generics, like they would with hydrocodone or tramadol, they are not really getting a full amount of medication anyway, since generics don't have to have as much active ingredient in them as branded products. He said that is another reason he doesn't worry about patients taking those medications around-the-clock. Shared communication insight with him. He said he does not really like having patients use pain diaries because the ones who would be compliant with it are not patients he is worried about & the ones he would really want to do it wouldn't be compliant, so there is no need. I asked what about patients who he is trying on a new medication- wouldn't he like to see how they do in more detail. He said he just doesn't think it is necessary as he has good communication with pts
PPLPMDL0020000001	Mayfield Heights	OH	44124	3/12/2013	Placed a follow-up phone call to speak w/ Staff Development Coord., MaryAnne. Spoke w/ receptionist Theresa, who stated, " MaryAnne stated, " MaryAnne is not available." She said, MaryAnne does not have voice-mail. She took my name & phone number and said that she would give MaryAnne a msg.
PPLPMDL0020000001	Cleveland	OH	44135	3/12/2013	Called to speak w/ D.O.N., Dan Rivera to inquire if he was able to speak with Rebecca from the Regional office, to get approval to utilize our NE program. I was informed that he was on the phone. Left msg on his voice-mail.
PPLPMDL0020000001	Euclid	OH	44117	3/12/2013	Placed phone call to speak w/ Charlene Miller @ ext 271 to schedule appt. to discuss educational in-service opportunities. N/A from the main #
PPLPMDL0020000001	Parma	OH	44129	3/12/2013	Dr Ortega said he recently got a rejection for Butrans when BWC did a drug review for Butrans. He said the patient very much wants to stay on Butrans & said it is the only thing that controls his pain. I told him this is unusual for BWC & asked if a reason was given for the denial. He said he would try to find a copy for me. Dr Ortega said otherwise, his Butrans & OxyContin patients are doing well & he continues to have success in treating patients with each of the medications. Spoke with Cindy & asked about Dr Ortega signing up for OARRS. She said he was going to do this upon his return from Las Vegas (he is leaving Sunday & will return the following week.
PPLPMDL0020000001	Uniontown	OH	44685	3/12/2013	Spoke to Kim the pharmacist about all products. I let Kim know that Comprehensive Pain Management is moving in down the street and asked if they had all doses of products. Kim said she will ensure they have everything. Discussed intermezzo key messages and copy cards as well as Butrans copy cards. Explained OxyContin doses and patients appropriate for it.
PPLPMDL0020000001	Independence	OH	44131	3/12/2013	Dr Sundaram said he just fired a patient today whose drug screen came back positive for an illicit substance. I started to show Scott patient profile, pointing out the bullet points. He said he really didn't have time today. Gave him OxyContin formulary grid & recommended Senokot-S for opioid-induced constipation, giving samples.
PPLPMDL0020000001	Richmond Heights	OH	44143	3/12/2013	Called to speak w/ Wellness Director, Joan Southard. According to the receptionist, Joan was in an interview. Left msg. on her voicemail
PPLPMDL0020000001	Akron	OH	44320	3/13/2013	Spoke to Dr Adams about identifying patients on Butrans. I showed the Scott profile and reviewed it again specifying the patient on tramadol that presents in follow up appointments still in pain. I also discussed the opioid naive patients on Celebrex or any cox2's who are on around the clock and wanting more. Dr said she never thought of using Butrans there. I spoke to being specific to the managed care plans that are presented in the office. Told dr to look forward to breakfast with Bonyo on April 4th.
PPLPMDL0020000001	Parma	OH	44129	3/13/2013	Quick call- caught Dr Chagin at the window. Passed back Scott patient profile & reminded De Chagin that he has told me that he has a hard time remembering Butrans & has asked me for reminders. I suggested he identify an appropriate patient like Scott in his practice. He said he would try & walked away.
PPLPMDL0020000001	Akron	OH	44320	3/13/2013	Spoke to doctor about appropriate patients for Butrans and discussed the opioid naive patient on Celebrex as an example. Dr said she realizes that patients on Celebrex around the clock who need more typically go to a IR opioid and that an ER product may also work if the patient can afford it. I told dr that it is all about identifying the appropriate patient type from disease state, current medications, and formulary plan.
PPLPMDL0020000001	Beachwood	OH	44122	3/13/2013	Spoke with Tiffany & presented Intermezzo pharmacy information. She said she did not see Intermezzo on their shelf. Reviewed indication, dosing, & appropriate patient type. Also showed Butrans & OxyContin savings program information & reviewed usage of each one. Discussed eligibility requirements for utilization.
PPLPMDL0020000001	Copley	OH	44321	3/13/2013	Led with insight and asked dr what procedures or policies he has in place for the communication between him and his patients? Dr said he uses the pain scales to get an idea of where the patient is currently and discusses why they are in pain. I told dr about some of the resources available to aid in him and his patients communication efforts. I told dr about Butrans and asked him why he chose Butrans for his last patient? Dr said the patient was on vicoden for chronic back pain. Dr said he just saw patient back after taking patient from the 5mg to the 10mcg and patient came back after 2 weeks on the 10mcg and said it didn't work. Dr said he had no choice but to discontinue it and send patient to pain management. I discussed with dr why he didn't move to the 20mcg and stted the studies to back up use of the 20mcg patient. Dr said the patient is 70years old and didn't want to move to the 20mcg dose. I discussed the appropriate patient with dr and told him to identify patients on tramadol or vicoden who have private prescription insurance. Dr moved to cost and told me how his patients are paying way too much for their medicines even with copy cards and pharmacies won't take them. I explained the Butrans card and how it works and told him I would check with the Copley CVS.
PPLPMDL0020000001	Akron	OH	44313	3/13/2013	Spoke to valarie the pharmacist. I asked valarie what her familiarity is with intermezzo? She said she has not dispensed it and does not have it in stock. I discussed indication, limitations of use and dosing. I discussed the OxyContin dosing and appropriate patients. Valarie said they have all 7 doses in stock. I reviewed Butrans dosing, CII, 7 day transdermal patch. Valarie said they fill a lot of it. I asked if it is being filled for patients from pain management or other? Valarie said from pain management.
PPLPMDL0020000001	Solon	OH	44139	3/13/2013	Quick call-Delivered communication insight & followed up with Dr Zaidi on OxyContin Patient Essentials Pack that I gave him last time. Encouraged him to utilize the kits as a way to increase communication with his patients new to OxyContin. He said he would try & walked away. Spoke with nurse, Julie & reviewed Butrans & OxyContin formulary grids.
PPLPMDL0020000001	Akron	OH	44308	3/13/2013	MSL meeting with Dr. Frieibert and Lisa Dowling. Provided OTR study updates and discussed enrolled patient profiles. Dr. Frieibert provided feedback about patient recruitment efforts and challenges.

PPLPMDL0020000001	Parma	OH	44129	3/13/2013	Quick call- Caught Dr Al-Abousi between patients. Followed up on our discussion regarding documentation for patients in pain. She said she remembers but apologized, saying that she had to go see her patient. Handed her Butrans initiation guide before she walked off.
PPLPMDL0020000001	Akron	OH	44313	3/13/2013	Spoke with dr through window and mentioned both OxyContin and Butrans. Discussed with Tina(ma) about the partners against pain webkey and Butrans patient information guide. I asked Tina if she has run into any formulary issues with OxyContin recently? She said luckily they have not. I asked if dr is opposed to using a transdermal patch for pain? Tina said no because he uses fentanyl. I reviewed the dosing and patients appropriate for Butrans like patients on tramadol or vicoden. Tina said she will give information to doctor.
PPLPMDL0020000001	Akron	OH	44320	3/13/2013	Sort talk with dr because he got a call from the hospital Emergency room. I asked dr to continue to try and identify patients like Scott who are on tramadol or like Nancy who both come back for a follow up visit complaining of increased pain.
PPLPMDL0020000001	Broadview Heights	OH	44147	3/13/2013	Spoke with Megan, pharmacist, & introduced Intermezzo, giving her pharmacy information. Reviewed 3 key messages. Also discussed e-voucher participation & reviewed eligibility requirements for savings cards/programs. Gave her information sheets on Butrans & OxyContin savings programs. She agreed to share my information with the other pharmacy staff.
PPLPMDL0020000001	Broadview Heights	OH	44147	3/13/2013	Spoke with Megan, pharmacist, & introduced Intermezzo, giving her pharmacy information. Reviewed 3 key messages. Also discussed e-voucher participation & reviewed eligibility requirements for savings cards/programs. Gave her information sheets on Butrans & OxyContin savings programs. She agreed to share my information with the other pharmacy staff.
PPLPMDL0020000001	Copley	OH	44321	3/13/2013	Discussed intermezzo indication and dosing. I asked Kristen the pharmacist about patients on Butrans getting the credit for the copay card and their use of Relay Health. Kristen said that they just filled a prescription for Butrans about a half hour before I came in. She said that the patient after insurance and copay card redemption was \$171.00 for a month of the 10mcg. I had Kristen run the same prescription with a copay card to see for sure that the patient received credit. Kristen said the patient did get the \$50 off the prescription. And it was still \$171.00 which she said the patient paid for. Kristen said that the patient was not a new patient and had been titrated to the 10mcg. She said the patient was from Cleveland. Discussed with Kristen that the patient may have had co-insurance and may be reimbursed.
PPLPMDL0020000001	Beachwood	OH	44122	3/13/2013	Placed a phone call and asked to speak w/ who is in charge of education. I spoke w/ the ADON, Cathy Cigli, I introduced myself and the NE program. Educational in-service opportunities of unbranded and branded topics were discussed. Cathy, stated, "we have a new D.O.N. and we are currently trying to get adjusted to new rules at the present time." I would love to take advantage of your program, but I need to talk w/Susan, our D.O.N." The plan is to drop off some PAP materials along w/ my BC to Cathy and follow-up the end of April.
PPLPMDL0020000001	Parma	OH	44129	3/13/2013	Dr Gigliotti said he has been referring more to pain management. I reminded him that he has told me that he still has some patients who he maintains. Delivered communication insight information & suggested he utilize the Butrans Patient Experience Kits that I have given him in effort to enhance the communication between him & his patients who he thinks would be good for Butrans. He said he always forgets.
PPLPMDL0020000001	Munroe Falls	OH	44262	3/13/2013	Recapped the first insight with dr about discontinuation rates and how the doctor said she didn't ask too many in depth questions about why her patients stop taking medicines. I told her the third insight and tied it into improving communication with her patients. I discussed the new partners against pain Communication about pain pamphlets and the pain kit. I explained how each one of them can help improve the communication between her and her patients. Dr agreed by saying she knows it could be better. I spoke about Butrans and the patient type with Scott and Jessica. Dr said she prescribed Butrans yesterday for a patient on vicoden with private prescription insurance and had UHC commercial and went to the acme on Manchester rd in Akron. Doctor said the patient told her it would have cost him over \$300 for 28 days of Butrans 5mcg. Dr said she gave the patient the savings cards as well. I told dr I would look into it. I discussed intermezzo and dr told me she wrote for it yesterday for a patient who wakes up at 2am often and can't go back to sleep. Dr said she remembered me telling her about it and giving her copay cards. Dr said she provided patient with copay assistance cards and patients is happy.
PPLPMDL0020000001	Mayfield Heights	OH	44124	3/13/2013	Made a drop-in visit to speak w/ Staff Development Coord., MaryAnne. Spoke w/ receptionist, Theresa who pagged MaryAnne. She did not answer. I left my BC and PAP handouts.
PPLPMDL0020000001	Bedford	OH	44146	3/13/2013	Delivered communication insight to Dr Moufawad. He said he typically does not have patients do pain diaries, although he did in the past. He said in his experience, patients do not comply with them & just end up filling it out when they are waiting to see him. I asked what processes he follows to ensure productive communication with patients. He said he simply takes the time to talk to patients. He said he can find out more by talking to them than by having them write it down. Dr Moufawad added that he has been writing Butrans & OxyContin & said he feels like he is writing more since last week. He said in speaking with other physicians recently, he has found that everyone seems to be seeing an increase in drug-seeking behavior. He then had to go deal with a patient issue.
PPLPMDL0020000001	Euclid	OH	44117	3/13/2013	Called to speak w/ Charlene Miller in Staff Development.No one would answer the phone w/ the phone number that I recv'd from Mother M Raphael. Called the number on their website, 216-531-7426 and left msg. for Charlene Miller.
PPLPMDL0020000001	Beachwood	OH	44122	3/13/2013	Made a drop-in visit to speak w/ Cheryl Grim, Nurse Educator to discuss NE Program and Pain Management educational opportunities. She was not available, left BC
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/13/2013	Saw dr up front in agent office and he said he was too busy to talk. I introduced the OxyContin essentials pack to Lisa his ma. I explained their use and ability to communicate. I asked what doctor does to track his patients pain? She said he knows what their pain is like every 30 days or each visit whatever the time frame is he set for a follow up. I asked if she believes he will find value in the kits for 5 patients? Lisa said yes and she will explain them to him.
PPLPMDL0020000001	Akron	OH	44309	3/13/2013	1. Re-discuss 3 resources with Olivia 2. Determine next steps for scheduling our first program with Summacare
PPLPMDL0020000001	Akron	OH	44313	3/13/2013	Placed a phone call to speak w/ Richard Lynch, to follow-up on my visit and meeting w/ him on 3/5 and to see about scheduling an in-service on pain management. According to Receptionist, Nicole, Richard was not in today.
PPLPMDL0020000001	Akron	OH	44312	3/14/2013	Left msg. on his voice-mail.
PPLPMDL0020000001	Akron	OH	44312	3/14/2013	Led with insight #3 with both doctors and asked dr what he currently does to communicate with his patients about their pain. Dr said he has no problem communicating with his pain and uses pain score scale and asked about their pain in detail. I discussed how communication is important in finding out what path to take in treating patients pain. Led into Butrans discussion by asking dr how he is currently treating pain by way to his treatment protocol. Dr said he will go from NSAIDs to tramadol to vicoden to Percocet. I presented why a patient on an NSAID or tramadol around the clock for 3+ months would be moved to another IR narcotic? Doctor said he didn't really know other than this how he has been treating. I presented both case studies with Scott and nancy discussing the option of Butrans in the place of tramadol or vicoden. Dr said he believes it's a viable option and he will consider. I discussed the patch technology and explained how Butrans is a CIII 7 day strains dermal system. I asked dr if he would gain clinical experience in patients like Scott or nancy? Dr agreed.
PPLPMDL0020000001	Euclid	OH	44117	3/14/2013	Met w/ D.O.N., Kathy Nemeth, introduced myself and NE program. Unbranded (Pain Management, Constipation) and branded (Butrans, Oxycontin) in-service opportunities were presented. Confirmed 101 Beds of which 85 are presently occupied. ( Hospice, skilled & LTC) Kathy stated, " this program will be a big help to me, I do not have an ADON or Nurse Educator. I have to take care of everything." She said they use the Wong-Baker pain scale to measure pain, and do not have a specific pain assessment charting tool, they assess q-shift. They use tylenol, ibuprophen, ultram and percocet for pain. They are not currently using Oxycontin. Kathy stated, "it's whatever the doctor orders." Dr. Balaji is the Medical Director, and is at the facility on Wednesdays. They have no NP's on staff. In-services were scheduled for Pain Management on 4/2 @ 7am, 2:30pm, 3pm & 3:30pm and for Constipation on 5/6 @ 7am, 2:30pm, 3pm & 3:30pm.<font color=blue>b=WOOLFKA added notes on 03/25/2013</b></font>Great notes Denise using the WIN format!
PPLPMDL0020000001	Akron	OH	44308	3/14/2013	As a follow up to the conference call on 3/11/13, emailed the Medical Education Catalog flyer and the Telesessment flyer to Dr. Manasseh.
PPLPMDL0020000001	Akron	OH	44333	3/14/2013	Spoke with Jim the pharmacist about intermezzo and Butrans. Discussed intermezzo indication, limitations of use and dosing specifics. Jim said he knew about intermezzo and has both doses on the shelf because of an auto shipment. He has not dispensed any yet and did not know about dosing differences based on sex of the patient. Discussed Butrans dosing, titration, appropriate starting dose and patients appropriate for Butrans. Jim said he liked to learn more about where and why it sold be used. Discussed how Butrans is the only CIII, 7 day controlled released product on the market.
PPLPMDL0020000001	Akron	OH	44319	3/14/2013	Spoke to Andrew about the patient from dr Kolzanewskis office who went to fill Butrans on Tuesday with UHC commercial insurance. Andrew spoke to patient who did NOT present his copay card and UHC came back with a PA for his Butrans and patients cost was cash price around \$200. Andrew said that patient told him that doctor said if it costs too much that she will prescribe something else. Andrew said that the fax for the PA was not sent to doctor based on the patients request. I presented the copay card to Andrew and discussed how the cards work. Andrew said he had one copay card but did not present it to the patient.
PPLPMDL0020000001	Akron	OH	44313	3/14/2013	Led with insight #3 asked dr what he currently does to communicate with his patients about their pain. Dr said he has no problem communicating with his pain and uses pain score scale and asked about their pain in detail. I discussed how communication is important in finding out what path to take in treating patients pain. Led into Butrans discussion by asking dr how he is currently treating pain by way to his treatment protocol. Dr said he will go from NSAIDs to tramadol to vicoden to Percocet. I presented why a patient on an NSAID or tramadol around the clock for 3+ months would be moved to another IR narcotic? Doctor said he didn't really know other than this how he has been treating. I presented both case studies with Scott and nancy discussing the option of Butrans in the place of tramadol or vicoden. Dr said he believes it's a viable option and he will consider. I discussed the patch technology and explained how Butrans is a CIII 7 day strains dermal system. I asked dr if he would gain clinical experience in patients like Scott or nancy? Dr agreed.
PPLPMDL0020000001	Akron	OH	44312	3/14/2013	Spoke to doctor through the window and gave insight number 3. I told him to communicate to his patients about how the option of Butrans may be solution if they have failed tranadol and/or vicoden. Dr said he has yet to use it and knows that it is not covered on Medicare. I told him that those are not the patients who fit the profile best for Butrans. I told dr the private prescription patients are best suited. Nothing else learned.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/14/2013	I asked dr if he currently has patients on IR oxycodone who may be appropriate for the Q12h oxycodone? Dr said he does and he is trying to continue to progress those patients and he like OxyContin and has had good success. Dr said that for the most part OxyContin is covered better than the competition but he tries to use a little of those as well. I explained the Sam profile and asked him when patients have been on the IR oxycodone for 3+ months and are still in pain or not tolerating it to move them to OxyContin.
PPLPMDL0020000001	Akron	OH	44305	3/14/2013	Led with most recent insight and asked dr what he is currently doing to help him understand his patients pain? Dr said he uses pain scales and speaking to doctor about their pain and how they function throughout the day. I showed dr the Butrans patient experience kits and told him it is an excellent way to communicate with his patients and reviewed the program with him again. I asked how he determines what product or decision to make when a patient presents in pain on a current product? Dr said he will either add on a product or chose a different one? I asked dr how he decides on when to use an ER product? Dr said typically if a patients condition is chronic and their current medicine of vicoden is not enough he may go to an ER product. I presented to dr the idea of using a controlled release product like Butrans earlier on in his treatment of pain in patients he has deemed chronic. I explained that before Butrans came onto market there was not much choice after tramadol if the patient was failing but to go to vicoden but with Butrans, a solution can be made for patients who meet the indication and have failed tramadol. I reviewed Scott again to show how he would initiate on Butrans for the tramadol patient. Dr said he like the Option of Butrans and that he will continue to use it.
PPLPMDL0020000001	South Russell	OH	44022	3/15/2013	Quick call- Reviewed Butrans appropriate patient type/range & once weekly transdermal system in CIII class. Also discussed OxyContin as a q12h dosing option of oxycodone. Alerted Dr Lackermann to DTC marketing campaign for Intermezzo & gave her information packet.
PPLPMDL0020000001	Chagrin Falls	OH	44023	3/15/2013	Spoke with technician as Jeff was with a customer. Presented intermezzo pharmacy information & reviewed 3 key points. Discussed sublingual delivery system & patient usage PRN upon middle of the night awakening. Gave her information sheets on Butrans & OxyContin savings programs & reminded her that patients with any type of government insurance are not eligible to use the cards. She agreed to give all information to Jeff when he was
PPLPMDL0020000001	Chagrin Falls	OH	44023	3/15/2013	Spoke with Anita, pharmacist, & gave her pharmacy information booklet for Intermezzo. She said she has never seen or heard of it. Reviewed indication, dosing, patient type, & delivery system. Gave her information on Butrans & OxyContin savings programs & reviewed each one. She said she fills Butrans prescriptions occasionally & added that patients seem to like it. Discussed all 3 medications as part of the e-voucher system.
PPLPMDL0020000001	Chagrin Falls	OH	44022	3/15/2013	Quick call- Dr Hudson said she was on her way out of the office. Showed Scott patient profile, pointing out tramadol around-the-clock & asked her to consider Butrans for an appropriate commercially insured patient like this. Also reviewed OxyContin 7 tablet strengths & gave her intermezzo packet of information, delivering indication.
PPLPMDL0020000001	Cleveland	OH	44130	3/15/2013	Delivered communication insight to Dr Kansal. I asked what kind of a conversation he has had with patients who he has started on OxyContin or Butrans. He said it doesn't matter what he says, patients always do & get what they want. He then walked away. Dorothy said he was busy today & said I should come back another time for a better chance of him cooperating. Brought attention to DTC marketing for Intermezzo & gave her information packet for Dr Kansal.

PPLPMDL0020000001	Parma	OH	44129	3/15/2013	Quick call- Passed back OxyContin conversion guide, opened to oxycodone IR conversion page. Pointed out that OxyContin is a q12h dose of oxycodone, giving patients the same amount of medicaid in a q12h dosed form. Dr Rakhit just walked away. Spent time with Iryna, who said she is always getting calls from pharmacies about Percocet because the doctor isn't writing it properly, but she said she doesn't understand. I gave her her own conversion guide & showed her different examples of how it is dosed & explained that OxyContin is a q12h dose form of the same medicine, oxycodone, that is in Percocet. She said she did not know any of that before & now understands. She also said she was going to be sure to go over this information with Dr Rakhit. Also reviewed Butrans indication/patient type & gave Intermezzo information, alerting her to DTC marketing.
	Chagrin Falls	OH	44022	3/15/2013	Dr Rood said he probably doesn't have any more Butrans or OxyContin patients than he did when we spoke last. I told him my goal for today was more to discuss pain in general as well as communication between him & his patients regarding pain. Delivered communication insight & showed him initial pain inventory from the pain management kit, asking his thoughts on implementing something like this for the patients who come in for pain. He said he is glad I brought this information to him. He said they finally all got signed up for OARRS & run them frequently on patients. He said even as a practice who does not do a lot with pain, they need to have good practices in place for treating the patients they do have. He said he is so glad he started implementing these tools. I agreed he is taking the right steps to protecting his practice. I asked if he is currently using a pain agreement with patients. He said they are not, but he wants to. I showed him ours & he spent time reading it over. He said he would like a copy. Showed him Scott patient profile & asked him to consider Butrans as a possible treatment for patients like Scott. He asked if there is anything stating that tramadol is less potent than Vicodin, adding that he believes tramadol should be scheduled. I told him I didn't have information on that. Showed initiation guide for Butrans. Introduced Intermezzo-reviewed indication, usage. He said he finds pts with this problem are depressed & improve w treatment for depression
PPLPMDL0020000001	Stow	OH	44224	3/18/2013	Spoke to Zoe the pharmacist about intermezzo and Butrans. Zoe said she is familiar with intermezzo but doesn't remember filling it. Explained the indication, dosing, and limitations of use. I explained Butrans and Zoe said they fill a lot of it. I asked what a lot means? She said at least 2 prescriptions a day. I asked from where? Zoe said from pain management and internal medicine. I explained the appropriate starting dose, titration, steady state and appropriate patients. I asked if patients are using copay cards? She said they are and the savings automatically populate on the screen.
PPLPMDL0020000001	Parma	OH	44134	3/18/2013	Spoke with Rita, pharmacist, & presented Intermezzo pharmacist information booklet. Reviewed 3 key points & discussed appropriate patient type. She said she has seen some ads for it but has not seen it on any shelves. Discussed trial & savings opportunities. Also gave Butrans & OxyContin savings information. Rita asked if she can give savings to patients who have Medicare, since their co-pays tend to be highest. I told her no savings cards can be used for patients with any type of government insurance, including Medicare, Medicaid, BWC, & TriCare.
PPLPMDL0020000001	Parma	OH	44129	3/18/2013	Caught Dr Laluk at the window while I was talking to Linda. Passed back Butrans initiation/titration guide, reviewing appropriate patient type. Also passed back OxyContin formulary grid, pointing out broad coverage. Gave Intermezzo dosing card & Senokot-5 as well. Linda said she sees Intermezzo ads on TV "all the time". Dr Laluk just thanked me & started reading his mail.
PPLPMDL0020000001	Parma	OH	44129	3/18/2013	Dawn said Elaine is out of town for 2 weeks. She said she got a Butrans prescription approved for her last week for Caresource. I asked if she has had pharmacy issues with Butrans like she did in the past. She said it has not been an issue, but Caresource prior authorizations take time depending on the patient. Dawn agreed to continue to do the prior authorizations for appropriate patients because they believe it is a good medication & they would rather have patients on that than other medications, especially since it has helped many of their patients.
PPLPMDL0020000001	Fairlawn	OH	44333	3/18/2013	Spoke with Jessica about intermezzo patients they have filling it. Jessica said the patient was from a family doctor and dispensed the 1.75mg. Explained the indication and mechanism of action. Explained Butrans patient type selection and asked her if she would keep an eye on who is prescribing. I explained the OxyContin doses and patient type selection from oxycodone.
PPLPMDL0020000001	Cleveland	OH	44104	3/18/2013	MSL and Kristi Dover met with Dr. Henry and Alex, SC. Provided OTR study updates and discussed recruitment efforts and best practice suggestions for additional recruitment efforts. MSL to contact Dr. Appachi to review potential patient population and referral opportunities.
PPLPMDL0020000001	Parma	OH	44134	3/18/2013	Spoke with Erika, pharmacist, & gave her Intermezzo pharmacist information booklet. Reviewed key messages. She said she would not think there would be a generic substitution since Intermezzo is relatively new. Reviewed patient type & dosing. Gave information on Butrans & OxyContin savings programs. Let her know both programs as well as monthly Intermezzo savings are on e-voucher.
PPLPMDL0020000001	Parma	OH	44129	3/18/2013	Spoke w/ Kim Barber, In-Service on Pain Management scheduled for 3/22 @ 2 & 3:30 was changed to 4/8 @ 2 & 3:30. Approx. 15 nurses will be attending each in-service.
PPLPMDL0020000001	Independence	OH	44131	3/18/2013	Delivered communication insight to Dr Jack. He said it would take a lot of time to review pain diaries for patients but added that he does talk to patients about their pain & medication, although he is trying to treat less & less pain. He said he has to remember Butrans & he is sure he can use it, then walked away.
PPLPMDL0020000001	Hudson	OH	44236	3/18/2013	Asked Melissa at window and asked to see the doctor to invite him to my program on April 11th. I handed dr the invite and asked him to come to the Butrans window. Dr said he will block at his calendar. I recapped out last discussion and asked him what he currently does for a patient on tramadol who is uncontrolled? Dr said it depends on the patient and said that he has been thinking of Butrans more often. I told dr to use Butrans in the patient like nancy and gave brief overview of her case. I asked dr why he wouldn't initiate Butrans? Dr said he will consider more often.
PPLPMDL0020000001	Akron	OH	44333	3/18/2013	Showed dr and Wendy(ma) the Butrans formulary grid and reviewed coverage for the private prescription plans and spoke to BWC and Caresource PA criteria. Dr said he continues forgetting about workers compensation and will try to remember it. Wendy said she will help him remember it. I got off part of insight #3 and told him a great way to say in communication with his patients is to use the Butrans experience kits. Dr said he has used one. I asked if he has received any surveys yet and he said no. I handed dr the Scott profile and asked if I review it on next visit? Dr said ok if he has time. Left dr the intermezzo information folder.
PPLPMDL0020000001	Munroe Falls	OH	44262	3/18/2013	Follow up with dr from last week about the Butrans patient that had a cost of about \$300 for Butrans 5mcg. I explained to the doctor the discussion I had with Andrew the pharmacist. I told doctor that Andrew said that the patients employer group sent a PA for Butrans and the patient said no and that the doctor would prescribe something else. I also told her that the pharmacist said that the patient did not provide a copay card. I asked dr if she would be willing to complete the PA since the patient already failed vicodin? Dr said she will discuss it with the patient because she's not certain the patient is right for duragesic patch anyway. I asked her to get a copy of the PA and complete it. Doctor said she will let me know what happens.
PPLPMDL0020000001	Beachwood	OH	44122	3/18/2013	Made a drop-in visit to speak w/ Cheryl Grim, Nurse Educator to discuss NE Program and Pain Management educational opportunities. I spoke w/ the receptionist, Lucy, who paged Cheryl. She was not available, but said to leave my card and she would call me. left BC & PAP handouts.
PPLPMDL0020000001	Parma	OH	44129	3/18/2013	Dr Salama said his biggest problem with Butrans is coverage, adding that Caresource & BWC don't pay for it. I reviewed coverage with him, letting him know BWC pays for Butrans & reviewing Caresource prior authorization requirements. He said that was good to know & added that most patients come to him already on Percocet or Vicodin & he is looking to change their medication sooner rather than later. I showed Nancy profile & showed that this is the type of patient who could be appropriate for Butrans. Dr Salama said another thing is having coupons for Butrans since it can be expensive. Reviewed the details of the savings program. He said he thinks \$15-\$20 is reasonable as a monthly cost after savings. I asked Dr Salama to try Butrans for a patient like this & he agreed. I shared details of the communication insight with him & asked if he has patients use pain diaries. he said not usually, but sometimes it can be helpful for patients who are having their medication adjusted. He said he will occasionally have them just keep a written record of how they feel, but not as a firm protocol or anything. I let him know we have resources like this if he would be interested in making them a bigger part of the patient experience. He said he would be interested in seeing what we have. Reviewed broad OxyContin coverage & left Intermezzo information card with Mary.
PPLPMDL0020000001	Parma	OH	44129	3/18/2013	Quick call- Dr Taylor said she hasn't had any new patients to put on Butrans. I reminded her that these do not necessarily need to be "new" patients. Reviewed "Scott" patient profile, letting her know this could be an ideal place where she could use Butrans, especially since she has shared with me in the past that she does not necessarily like having patients on short-acting opioids around-the-clock. She said she likes Butrans & does want to use
PPLPMDL0020000001	Akron	OH	44333	3/18/2013	Spoke with dr about identifying patients for Butrans and OxyContin. I recapped our last discussion about treating patients under 65. I asked him what he does when a patient is still in pain while on 400mg of tramadol. I showed him the Scott profile and discussed how the patient is a good candidate for Butrans 10mcg. Dr agreed and said he wrote for two prescriptions last week and one of them was initiated on Butrans 10mcg for tramadol. Dr said the other was from oxycodone 30mg per day. Dr said he initiated Butrans 10mcg and oxycodone for breakthrough. Discussed nancy profile as well. I asked dr if he currently has patients on oxycodone for 3+ months? Dr said he does. I reviewed the Sam profile and asked him to initiate OxyContin for patients like him that meet the indication. Dr agreed and said he will. I explained the intermezzo indication, limitations of use and dosing specifics. Left dr with intermezzo packet. Dr said he is trying to remember it when talking with patients. I closed for patients discussed and dr said he is continuing to prescribe.
PPLPMDL0020000001	Akron	OH	44308	3/19/2013	Per request (forwarded to MSL from Purdue Regional Account Executive), emailed a copy of the handout (3 per page, PDF) for the FACET module "Pain Care in the Older Adult".
PPLPMDL0020000001	Parma	OH	44134	3/19/2013	Completed in-service on Constipation for RN's & LPN's, with 8 in attendance. The laxative protocol was handed out & reviewed w/ the nurses. Discussion & interaction on the risk factors, signs and symptoms, complications and treatment of constipation took place. Feedback rec'd from the nurses: They informed me that this in-service was filled with good information which will lead to better awareness and care for their residents.
PPLPMDL0020000001	Akron	OH	44310	3/19/2013	Led with insight #3 and asked dr what he thinks about that statistic? Dr said he agrees that communication isn't great because patients for the most part either don't tell the truth, lie or don't tell the whole truth. I asked dr about tracking pain experiences? Dr said he doesn't do anything between visits to know what patients are feeling. I asked if a pain journal would be helpful. Dr said maybe on select patients. I led into discussing Butrans by asking what his typical algorithm is when treating pain. Dr said NSAIDs, physical therapy, tramadol, vicodin then Percocet. I discussed the opioid experienced trial in combination with the patient profiles. I asked dr if there was a downside to using Butrans in the place of either tramadol or vicodin? Dr said he could not think of anything other than price. We discussed that he needs to use Butrans for his BWC patients and private prescription patients. Discussed pain management kit and dr said he will use some of the forms.
PPLPMDL0020000001	Parma	OH	44129	3/19/2013	Showed example report for Butrans Patient Experience Program per Myra & Dawn's request. Discussed using the program as a way to improve the communication between the patient & the office, referencing communication insight statistics. They both said they have not received a single report despite having patients tell them they enrolled in the program. I told them I would try to find out what is happening to them & let them know I have confirmed the address to make sure it is correct. Myra said she was behind but has been writing more & more Butrans. Dawn confirmed this statement.
PPLPMDL0020000001	Akron	OH	44312	3/19/2013	Saw dr at front counter and asked him if he turkey believes that the OxyContin patient essentials packs make sense for his patients? Dr said he thinks so but must be very selective in choosing the patients. I asked him to use them for new OxyContin patients to make them feel more in touch with their medication. Dr said that is a good idea. Nothing else learned.
PPLPMDL0020000001	Parma	OH	44134	3/19/2013	Made a drop-in visit to speak w/ ADON, Cheryl Sigley to discuss Pain Management educational opportunities. I spoke w/ the receptionist, who informed me that Cheryl was off today. Left BC
PPLPMDL0020000001	Parma	OH	44134	3/20/2013	I reminded Dr Hernandez of our previous Butrans conversation when he told me that he "doesn't worry about" patients taking hydrocodone 4 times per day & he leaves them on that medication. He said it is true- he doesn't worry about those patients. He added that typically, these patients are waiting for surgery scheduling & if they are steady on their dose of short-acting, he sees no reason to change it. He said his concern is more for patients taking high doses of opioids such as OxyContin & Opana. Asked how long patients typically wait for a surgery to be scheduled. He said 1-2 years due to paperwork & legal issues with BWC. He said this is one reason he does not want to work with as many BWC patients any more. He said they take up a lot of time & are very labor-intensive with paperwork. He said he likes self-pay or private insurance. Dr Hernandez said he likes Butrans, his patients like it, & that is why he will keep using it.
PPLPMDL0020000001	Beachwood	OH	44122	3/20/2013	Spoke with Maria, PharmD student working at the pharmacy today. Introduced Intermezzo using pharmacy information piece. Discussed indication, patient type, dosing, & no generic equivalent. Also introduced Butrans & OxyContin savings programs & reviewed Butrans appropriate patient type.
PPLPMDL0020000001	Beachwood	OH	44122	3/20/2013	Discussed Butrans as an option for patients taking tramadol around-the-clock as a once weekly transdermal option. I asked how common this is in her practice. She said usually patients on short-acting like tramadol or Vicodin stay at low doses & are steady at the dose they are on or take it PRN. She said those who are taking the higher doses of Vicodin tend to want to stay on pills & object to a long-acting option. I asked what information she discusses with patients who she is considering for Butrans. She said she discusses dosing, how to use it, & possible side effects. She said some patients don't want to try it because they go swimming & their pool has a policy against it. Discussed patients taping the edges with first aid tape or covering with Bioclusive or Tegaderm if necessary. Roberta said she has one male patient who was taking Butrans who showed her redness & blisters from one Butrans patch, but when she checked the one he was wearing at the time, there was no redness or reaction of any kind. The patient wished to discontinue. Positioned Butrans for appropriate patients taking short-acting opioids around-the-clock (up to 80mg total morphine equivalent per day) who are asking for a dosing adjustment. She asked about BWC coverage. Let her know they are paying for it with no restrictions at this time. Discussed Senokot-5 for opioid-induced constipation.

PPLPMDL0020000001	Akron	OH	44320	3/20/2013	Prepped dr for the breakfast meeting next week to discuss the offices policy on treating pain and how Butrans is going to fit. Dr said she plans on being there. I told dr until next week to identify at least one patient appropriate for Butrans. Reviewed formulary and Scott and nancy profiles.
PPLPMDL0020000001	Stow	OH	44224	3/20/2013	Confirmed from Regina that dr Bressi is no longer with the practice. Remove from call list
PPLPMDL0020000001	Mayfield Village	OH	44040	3/20/2013	Spoke for a moment with pharmacist Steven. When I asked him if he reviewed Intermezzo information I left him at last visit, and told him its Zolpidem tartrate, a sublingual tablet, he responded, " Oh great, another Zolpidem " product, and then said he can't talk and needed to get back to dispensing. He did have 3 customers while I was there. I told him I would follow up again soon.
PPLPMDL0020000001	Lyndhurst	OH	44124	3/20/2013	Made a drop-in visit to meet w/ Linda Dabney in Staff Development to discuss Pain & Pain Management Educator/in-service opportunities. I spoke w/ the receptionist, who tried calling her office, N/A, Left my BC
PPLPMDL0020000001	Beachwood	OH	44122	3/20/2013	Made drop-in visit to meet w/ Merri Bunge to discuss Pain Pack/confirm in-service scheduled for 5/7 & 5/8. She was unavailable
PPLPMDL0020000001	Lyndhurst	OH	44124	3/20/2013	Dr. tawney only HCP left in office. Put packets of info together for Dr. Tawney, Dr. Stanesco and Dr. Vilinsky. Introduced my products to Dr. Tawneys medical assistant Kim. Told Kim the doctors may want to keep my savings cards in their personal offices, since they are scheduled procedures. Left HCP Intermezzo kit for each doctor as well. dr Tawney was running behind and trying to leave. Not engaged. Could only get product mentions in. Nothing
PPLPMDL0020000001	Fairlawn	OH	44333	3/20/2013	Spoke w/ Michelle Williams, In-Service scheduled today on Pain Management was cancelled d/t the weather (snow storm). Michelle will call tomorrow to reschedule.
PPLPMDL0020000001	Akron	OH	44312	3/20/2013	Quick discussion in hallway and asked dr if he is taking his IR oxycodone patients to OxyContin? Dr said he is trying to no even use it anymore because of the headache it brings. I told him I can't understand how IR oxycodone doesn't bring that same thing or even worse? I showed dr the Sam profile and asked him to identify patients like him. Dr said he will try.<font color=blue><b>CHUDAKOB's query on 03/27/2013</b></font>Cliff, what did he say when you asked him about the same headaches with oxycodone IR?<font color=green><b>REICHL's response on 03/28/2013</b></font>Don't remember.<font color=blue><b>CHUDAKOB added notes on 03/28/2013</b></font>That's the kind of information to include in our call notes. If you ask him a question and he answers it, be sure to include that in the call notes. Thanks.
PPLPMDL0020000001	Akron	OH	44302	3/20/2013	Spoke with Ronda and dr Petrus about the OxyContin essentials pack. I asked if they have patients who they ask to track their pain experiences? Dr said they do have some patients where it is necessary especially with OxyContin. I explained the kit and the value that it can bring to the patients and to the office. Dr and Ronda both agreed that they have at least 5 patients that they can give them to. I asked when do they typically move to OxyContin? Ronda said they continue to use it a lot for patients with cancer and patients who need more pain control over vicoden. I asked both to use OxyContin in that exact place and showed Sam profile. Ronda said they use it for those patients but many need a PA. I asked why and she said many patients are required to go to MS Contin first but she said that they can usually get OxyContin approved and said they are using the copy cards I left recently. I left the nancy profile for Butrans.<font color=blue><b>CHUDAKOB's query on 03/27/2013</b></font>Look at your next call objective. What did you mean when you said titration to max dose?,<font color=green><b>REICHL's response on 03/28/2013</b></font>Do you titrate to the max dose of OxyContin if necessary?<font color=blue><b>CHUDAKOB added notes on 03/28/2013</b></font>I understand now. You meant to the 80mg. That would be the max strength. OxyContin does not have a max dose. It took me a while to figure that one out.
PPLPMDL0020000001	Akron	OH	44304	3/20/2013	Led with insight #3 and asked dr how he feels his patients communicate with him about their pain? Dr said that some are honest and others lie to get more medicine. Dr said that pain journals can be good but only in patients he believes are in legitimate pain. I asked him if pain journals would be useful for him? Dr said maybe. I told him about partners against pain information. I discussed OxyContin and his experience with it. Dr said he uses it more than he would like to admit. Dr said he has a suboxone clinic in Norton so he sees it a lot. I explained OxyContin patient profiles and asked him if he will use OxyContin instead or IR oxycodone. Dr agreed to use more. Introduced Butrans discussing all key selling messages including patient profiles of Scott and nancy. I asked dr of Butrans make sense if patients fall tramadol? Dr said it does make sense to have another option that is not an oral narcotic. I asked dr if he likes prescribing vicoden? Dr said absolutely not. I told dr that Butrans is a good option instead of vicoden when the patients meet the indication. Closed for Butrans by asking him to use it clinically for a patient like Scott. Intermezzo introduction with all messages.
PPLPMDL0020000001	Beachwood	OH	44122	3/20/2013	I asked Dr Yokiel what he likes about OxyContin. He said he likes that it works, he is comfortable with it, & patients only have to take it twice a day instead of more times. He added that he doesn't use it as much now as he used to due to abuse. I asked if he believes OxyContin is alone in that or if he has similar concerns with other opioid medications. He said there is a stigma with OxyContin that is not necessarily seen with other medications. He said patients will go to the pharmacy to get their OxyContin filled & they feel ashamed to be on it. Dr Yokiel added that he does like the idea of the reformulation. I told him he should be just as cautious in writing it now as before. He asked what Butrans is equivalent to with short-acting; for example, if he has a patient on Vicodin 4 times per day, can he put them on Butrans without fear of the patient withdrawing or Butrans not being enough for them. I showed him the range & showed that this patient would start at Butrans 10mcg & could be titrated after 3 days to 20mcg. Also reviewed use of supplemental analgesia if necessary. He asked about BWC coverage. I let him know BWC pays for Butrans currently with no restrictions. He said he has a patient who is he going to start on Butrans, adding that he didn't do it already because he figured it wasn't covered. Left Intermezzo dosing
PPLPMDL0020000001	Akron	OH	44307	3/20/2013	Spoke to Jeff the pharmacist about Intermezzo which he was not familiar with. Explained indication, dosing specifics and limitations of use. Jeff thought it was interesting about the dosing for sex and said he sees the need. I asked if he only fills prescriptions for hospital employees? Jeff said they fill for anyone who is affiliated with AGMC. Jeff said he sees prescriptions for Dr Shah. I reviewed the Scott profile for Butrans and explained appropriate starting doses. Explained patient selection for OxyContin.
PPLPMDL0020000001	Mayfield Village	OH	44143	3/20/2013	Chaos in office as usual. No best times! Asked to see Dr. Krishnan, he's running behind, no time. Asked to see Melissa his medical assistant, she's busy with patients. Left Dr. Krishnan packet of information on Butrans including formulary grids, flash card on Aetna and Butrans trial/ savings cards. Left one pack Butrans savings cards. ALSO left intermezzo HCP shrink wrap kit for Dr. Krishnan, Dr. Ashraf & Dr. Mukunda.
PPLPMDL0020000001	Bedford	OH	44146	3/20/2013	Dr Moufawad said he has been having issues recently with pharmacies & would like our help in educating them on proper use of Butrans. He added that he has been getting calls from Walgreen's pharmacists who are telling him that buprenorphine plus oxycodone (or other short-acting opioids) is a drug interaction. Dr Moufawad said he explains to them that Butrans can be taken with other opioids, per the full prescribing information. He asked if we can help them understand. I let him know we are unable to speak with Walgreens per their corporate policy. Dr Moufawad said he has written 46 Butrans prescriptions in the last 30 days (including new & refills). He showed that he had a data company print out the information, but did not show it per our request. I asked if a patient comes to him on tramadol at what point they would become a Butrans patient. He said they usually come on tramadol plus other pain medications or are already on high doses of opioids. He said he tries to get them on Butrans as soon as possible & if the patient doesn't agree, he doesn't see them back. He said most patients who he writes short-acting only for are those who take it PRN. He said if they are taking it every day, they should be on long-acting instead. He requested Butrans patient education tear-offs. I told him I would try to get them for
PPLPMDL0020000001	Fairlawn	OH	44333	3/20/2013	Spoke to Gilbert and Sue about their knowledge about dr Bressi leaving the practice. Gilbert and Sue did not know about his leaving. Gilbert said the last prescription he filled for him was earlier on in the year and noticed over the last year his prescription decreased. Gilbert told me to check at Kleins in the falls and speak with Patrick. Explained intermezzo again and Butrans patient selection.
PPLPMDL0020000001	Lyndhurst	OH	44124	3/20/2013	Asked to see Dr. Reed she was busy with patients., i then asked to see CNP Karen steffey & said i'd be willing to wait. I did meet with Karen(RN/CNP & office manager) at window. Introduced myself & my products. Asked Karen where Butrans would be appropriate for their migraine patients, she said when they are allergic to other agents, and can tolerate Buprenorphine. I let her know we have new dosing sliders available for them, and a trial offer and increased savings for monthly co pay for Butrans. I then transitioned to OxyContin. I let her know we've also increased monthly savings for OxyContin patients. Mentioned good Medicare Part D coverage for OxyContin. I did a quick Intermezzo reminder. I then mentioned my OTC products. I had a box of both Senokot S and Slow Mag on the counter. I asked Karen, how might Slow Mag help patients with migraines? She stated that adding supplements to therapy, including Magnesium, seems to help patients. She and medical secretary said their patients really like Senokot S as it works! I told Karen I look forward to following up with her soon and learning how I can assist their practice with tools and resources for pain management. Was able to schedule additional lunches today.
PPLPMDL0020000001	Akron	OH	44312	3/20/2013	I asked dr if he finds that the patient on tramadol who is failing a good candidate for Butrans? Dr said the one patient he had on Butrans had to be fired from the practice because she broke her agreement with the office. I asked if he will continue to look for patients that fit the profiles discussed and dr said he will try.
PPLPMDL0020000001	Stow	OH	44224	3/21/2013	I recapped our conversation from last visit about the communication insight. I asked dr what she meant about getting credit with her EMR system when it comes to patient handouts. Dr said all the EMR systems want doctors to use handouts from the system. Dr said she scans information in then prints it out from the system for her patients. I introduced the pain management kit from partners against pain and reviewed the tabs with her. I told her she can copy anything she wanted or go to partners against pain web site to get the information she needed. Dr said she really liked it and will use it. Dr thanked me for providing her something useful.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	3/21/2013	Discussed intermezzo with Andy the pharmacist and gave indication, dosing and limitation of use. Andy said they have one patient on it and have the 1.75mg in stock. Andy asked if insurance is giving edits in place for pill quantity limit. He said the one dispense he had it was not even 20 pills. Told him I would look into it. Some about dosing and appropriate starting dose with Butrans. Explained titration and steady state. Andy said they have a few patients on it and have the 5mcg in stock.
PPLPMDL0020000001	Hudson	OH	44236	3/21/2013	Spoke with joy about the intermezzo indication, dosing and limitations of use. She told me they have one patient on it. Discussed Butrans appropriate patients with use of initiation and titration guide. Explained CIII, 7 day transdermal system.
PPLPMDL0020000001	Akron	OH	44312	3/21/2013	Solid message to drs McRoberts and Hill about Butrans. Told both drs to think of Butrans as a good option for any patients that are on tramadol or vicoden and come in for an appointment complaining of pain. I reviewed the Nancy profile explaining the patient criteria and discussing the appropriate starting dose. I asked boths drs if they will use Butrans clinically for patients I described? Both drs agreed to try it. Gave each dr an invite to the April program.
PPLPMDL0020000001	Akron	OH	44312	3/21/2013	Message through window. Was only able to provide dr with the Nancy profile and ask for doctor to prescribe Butrans for patients on vicoden whom complain of increased pain.
PPLPMDL0020000001	Akron	OH	44312	3/21/2013	Solid message to drs McRoberts and Hill about Butrans. Told both drs to think of Butrans as a good option for any patients that are on tramadol or vicoden and come in for an appointment complaining of pain. I reviewed the Nancy profile explaining the patient criteria and discussing the appropriate starting dose. I asked boths drs if they will use Butrans clinically for patients I described? Both drs agreed to try it. Gave each dr an invite to the April program.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	3/21/2013	Handed dr the Medicare D formulary for OxyContin and asked him what his experience has been like with OxyContin? Dr said he has used it but not often at all. Dr said set up a lunch and we can talk about it. Nothing else
PPLPMDL0020000001	Mogadore	OH	44260	3/21/2013	Saw dr behind counter and told him to use Butrans for his patients on tramadol that are in continuous pain. Gave him the Scott profile. Dr said he tried to use it but insurance denied it. I told him to prescribe it for his private insured patients as the path of least resistance.
PPLPMDL0020000001	Fairlawn	OH	44333	3/21/2013	Placed a follow up phone call to Michelle Williams to re-schedule in-service on Pain management. N/A, Left msg on her voice-mail.
PPLPMDL0020000001	Parma	OH	44129	3/21/2013	Showed Dr Paat the Nancy patient profile & asked him what his next step for a patient like this (taking hydrocodone around-the-clock, still with a 6 on the pain scale), would be. He said it could be "any other type of a pain pill". Showed him that a patient like this could start at a 10mcg Butrans once weekly, with the ability to titrate after 3 days to 20mcg. He asked if they can take a shower while wearing a Butrans patch. I told him the patient would be able to take a shower, but should avoid applying direct heat to the patch. Discussed ability for patient to take supplemental analgesia. Reminded him that he has trial & savings cards. I asked him if he sees a patient like this this week, would he write Butrans for them. He said he would.
PPLPMDL0020000001	Akron	OH	44333	3/21/2013	Discussed with dr his prescribing for his patients under Medicare age. I showed him both Butrans profiles and asked him to prescribe Butrans with appropriate starting doses instead of titrating the IR product. Dr said he will focus on that about said a large majority of his patients are over 65. I asked him what he is doing for his patients who are on IR oxycodone and why he isn't using OxyContin? Dr said he is using OxyContin but most are refills. Dr said his patient failing oxycodone he moves to Exalgo because it works very well and only needs to be doses once a day. Dr said he has had many patients telling him how well it works. I asked for new Butrans prescriptions and to move oxycodone patients to OxyContin instead of changing molecules.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	3/21/2013	Saw dr as I was taking with Lori about managed care plans with Butrans. Dr said she tried to prescribe Butrans earlier on in the week and it was denied. I asked what plan it was and she said it was a Medicare patient. I thanked dr for thinking about Butrans and asked her for now to focus on patients with private prescription insurance. Dr said she knows but the patient was right for Butrans. I asked if the patient had a secondary insurance and dr said she didn't know. Darlene was out for the day who deals with insurance. Told dr to continue to think of Butrans opportunities in patients failing on tramadol or vicoden.
PPLPMDL0020000001					

PPLPMDL0020000001	Stow	OH	44224	3/21/2013	I recapped the last call and told dr that he said on my last visit that he said copay cards do not make him more inclined to use a particular product. I told dr that I agreed but didn't feel he is completely sold on Butrans yet and we should not be talking about cost. I told dr that Butrans is for a specific patient with private prescription insurance. I showed him the Scott profile and reviewed in detail. I told dr that my job is to make him feel more comfortable and confident about the product so he can use it. Dr agreed and said he will give it a try.
PPLPMDL0020000001	Parma	OH	44134	3/21/2013	Completed in-service on Constipation for STNA's, with 12 in attendance. The laxative protocol was handed out & reviewed w/ the STNA's. Discussion & interaction on the risk factors, signs and symptoms, complications and treatment of constipation took place. Feedback rec'd from the STNA's: They informed me that this in-service very informative and they learned the importance of documentation of residents BM's.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/21/2013	Short conversation in hallway and showed him the OxyContin profiles. I told dr to use the q12h oxycodone in OxyContin for his patients failing Percocet. Showed dr the Sam profile and asked him to move patients to OxyContin when they are still in pain on the IR. Gave dr the Nancy profile and asked him to review and I will review next visit.
PPLPMDL0020000001	Parma	OH	44129	3/21/2013	Myra said 2 patients this morning have complained about Butrans causing nausea. She said it is lasting the duration of their use with Butrans & this is causing them to discontinue. She said overall she has good success with Butrans. She said she does not write a medication unless she believes in it & the patient can afford it. She said she always teaches the patient about how to use it, where to put it, etc. & uses the patient education booklets or tear-off sheets. Introduced Intermezzo- Reviewed indication, dosing, delivery system. She asked if it is difficult for the patient to open. I told her it is designed to be taken while the patient is in bed, PRN when they experience a middle-of-the-night awakening. Reviewed insurance coverage & trial/savings program. Myra asked if there would be any programs for it. I told her I did not know of any but would keep her posted. She asked if a patient were to fall asleep, then wake up at midnight, take an Intermezzo, then wake up again at 4am (but wishing to sleep until at least 8), could they take another dose of Intermezzo. Told her it has not been studied like this & therefore would not be recommended. Also reviewed this information with Dawn.
PPLPMDL0020000001	Parma Heights	OH	44130	3/21/2013	Made a drop-in visit to speak w/ D.O.N., Katherine Myers to set up appt. to discuss educational opportunities and schedule in-service. Spoke w/ receptionist, Helen who said, "Katherine is on the phone." I waited approx. 10 minutes, but she was still busy on a phone call. I left my BC.
PPLPMDL0020000001	Akron	OH	44333	3/22/2013	Spoke to dr and his nurse Dana about Butrans for their patients on vicoden. I told dr that we have had discussions about his use of Butrans primarily in the elderly patients naive to opioids. I asked dr what he is doing for his vicoden patients who may be uncontrolled? Dr said he does use Butrans, Exalgo, or Percocet for those patients. Dr told me that he initiated recently a 40 yr old man on vicoden on Butrans and he is doing really well. I explained the nancy profile and asked for more business. I discussed the OxyContin profiles and asked him to use OxyContin for patients like these. Dr said he actually prescribes lots of OxyContin and it does work well. Dr said he will get patients to 3 pills a day of Percocet then if they need more he moves to OxyContin. Left the intermezzo dosing guide.
PPLPMDL0020000001	Akron	OH	44308	3/22/2013	As a follow up to the conference call on 3/11/13, emailed a copy of the PERFORM on line flyer to Dr. Manasseh.
PPLPMDL0020000001	Akron	OH	44312	3/22/2013	Dana told me about a patient she has in a room today on vicoden and she was considering what to do because she didn't want to increase the dose. Dana asked Dr Fouad what he thinks she should do. Dr Fouad looked at the chart and recommended to initiate Butrans 10mcg. Dana told me she is having good luck with Butrans and will continue to use it. Dana said she needed more of the information guides which I left. Left OxyContin dosing guide and intermezzo same.
PPLPMDL0020000001	Macedonia	OH	44056	3/22/2013	Spoke with technician (Raj?) & showed him intermezzo pharmacy booklet. He said he has not seen it on their shelf, but he was not sure if they had ever filled it. Reviewed indication & patient type as well as how the patient would take it if they experienced a middle-of-the-night awakening. Showed information sheets on Butrans & OxyContin savings programs. Let him know savings is built in to their computer system for eligible patients. He agreed to share the information with Eve & Nancy.
PPLPMDL0020000001	Akron	OH	44319	3/22/2013	I asked dr what the downside is to using Butrans is for a patient that is uncontrolled on tramadol or vicoden? Dr said it might be too expensive. I asked him how he knows if he hasn't prescribed it yet? Dr said it is a new branded product. I asked him if he has any Caresource, BWC or private prescription insurance? K dr said he does. I told him to write it for a patient on one of those plans and there are plenty to choose from. I left dosing guides for OxyContin and intermezzo.
PPLPMDL0020000001	Akron	OH	44319	3/22/2013	I asked why he is not giving me or Butrans a fair shake? Dr said he has used it. I told him why he is not continuing to use it and he told me it was too expensive. I asked where and he said for every plan. I asked him if he has tried to prescribe it under every plan? Dr said he may try it again. Left intermezzo dosing guide.
PPLPMDL0020000001	Parma	OH	44129	3/25/2013	Quick call- Dr Gigliotti said he was on his way out of the office. He added that he knows he has to "write my stuff". Positioned Butrans for one appropriate patient who he would otherwise be starting on a short-acting opioid around-the-clock if they meet the indication. He said he is going to do it. Reviewed OxyContin managed care grid for Medicare with Jaz & gave her information packet for Intermezzo to give to Dr Gigliotti.
PPLPMDL0020000001	Beachwood	OH	44122	3/25/2013	Stopped Dr Myton-Craig with Scott patient profile. I reminded her of her interest in Butrans & told her it seems that she is having a difficult time identifying an appropriate patient. I told her I brought Scott to help her see an example of how one might present. Walked her through key points of Scott's case. She agreed this is a reasonably accurate patient portrayal. Showed her how a patient like this can start at Butrans 10mcg with ability to titrate to 20mcg after 3 days if necessary. Also discussed ability to take supplemental analgesia with Butrans if necessary. She said cost is always an issue also. I reviewed Butrans coverage & stressed the importance of giving the patient a trial/savings card when she starts them on Butrans. She agreed to try this for the next person who she sees like this. Showed broad formulary coverage for OxyContin. Handed her Intermezzo packet & delivered indication. Discussed DTC marketing. She said she has seen the ads & doesn't see a need for something like Intermezzo. She then went into a room.
PPLPMDL0020000001	Stow	OH	44224	3/25/2013	Explained products to Jordan the pharmacist. Explained intermezzo indication, limitations or use and dosing. Jordan said he knew about it but has filled any and does not have it on the shelf. Explained Butrans indication, dosing and appropriate patients. OxyContin dosing and patient types.
PPLPMDL0020000001	Parma	OH	44134	3/25/2013	Spoke with Mike, pharmacist, & introduced Intermezzo, using pharmacy booklet. Showed & discussed 3 key messages. He said he has not dispensed it but has heard of it. Showed Butrans & OxyContin savings leavers & let him know all 3 medications' savings opportunities are automatic & are built into their computer system through e-voucher. He said he is familiar with that system.
PPLPMDL0020000001	Akron	OH	44313	3/25/2013	Told dr through window that the Scott patient type if the patient I want him to use on Butrans. I handed him the profile and asked him if he currently has patients on tramadol for at least 3+ months who are still in pain? Dr said he agrees the patient is a good candidate for Butrans. Dr said he will continue to look for the right patient. Gave dr OxyContin and intermezzo dosing information.
PPLPMDL0020000001	Solon	OH	44139	3/25/2013	Made a drop-in visit to meet w/ Staff Development Coordinator, Gretta Redus to discuss pain & pain Management Educational Opportunities. I spoke w/ receptionist Denise Zgorzelski, she paged Gretta x 3, and was informed by another staff member that Gretta had left for the day. I left my BC and PAP handouts.
PPLPMDL0020000001	Westlake	OH	44145	3/25/2013	Called Patty O'Shea to confirm in-service for this Wednesday 3/27 @ 12:30 for the STNA class. The receptionist said, Patty was teaching a class, left msg. on her voice-mail. Patty called back, confirming the in-service for Wednesday @ 12:30, 10 students will be in attendance.
PPLPMDL0020000001	Westlake	OH	44145	3/25/2013	Sent an e-mail (preferred communication) to D.O.N., Sue Williams on scheduling in-service on Pain Management.
PPLPMDL0020000001	Shaker Heights	OH	44122	3/25/2013	Spoke with James, pharmacist, & gave him Intermezzo pharmacy information piece. Discussed 3 key bullet points. He asked who is paying for it. Reviewed managed care & discussed automatic savings for Rite Aid customers via e-vouchers. Also showed information sheets on Butrans & OxyContin savings, letting him know savings for these medications is also in the e-voucher system. Reviewed Butrans patient type & 3 available doses.
PPLPMDL0020000001	Solon	OH	44139	3/25/2013	Made a drop-in visit to meet w/ D.O.N. Judith Sawtner, to reschedule appt. from 1/29, to discuss pain & pain management educational opportunities. Spoke w/ receptionist, Rashida, who called Judy. Appt. was scheduled for 3/27 @ 2pm.
PPLPMDL0020000001	Uniontown	OH	44685	3/25/2013	Discussed The insight #3 and how communication with his patients impacts his practice. Dr said that he doesn't feel he needs patients to give him more information but would like them to discuss what their expectations for treatment are. Dr said it makes it much easier when a patient does that. I discussed partners against pain materials and the comfort assessment journal. Dr said he will use them through his EMR system. Discussed Butrans patient types and appropriate stating doses. Dr agreed to gain at least two new patients to hand out the experience kits. Intermezzo and OxyContin dosing information and indications.
PPLPMDL0020000001	Parma	OH	44129	3/25/2013	Delivered communication insight to Dr Taylor & reminded her of some of the assessment tools we have discussed & copied in previous visits. Presented tear-off pads of patient comfort assessment sheets. I asked her thoughts on using these simple forms to enhance communication between her & her patients who she treats for pain. She spent time looking at the sheets & said these were exactly what she needed. She said she actually had a patient in the room & was going to ask her to fill one of the forms out. She returned to the patient room & asked the patient to fill it out. Dr Taylor came back out to thank me for the form, telling me how useful that was going to be for her when working with patients. She said she does have some patients on Butrans & will put more patients on it when they present. Showed Scott patient profile as an example of a patient who she may see who would be a candidate for Butrans. I asked her to write it if someone like this comes in & she said she would. Reviewed OxyContin broad managed care coverage & gave Intermezzo information packet.
PPLPMDL0020000001	Richmond Heights	OH	44143	3/25/2013	Called and spoke w/ Wellness Director, Joan Southard. I introduced myself and the NE program. A meeting was scheduled for April 11th @ 11am to discuss educational in-service opportunities.
PPLPMDL0020000001	Westlake	OH	44145	3/25/2013	Called to follow-up w/ ADON, Jamie Adamo to check on status of facility ownership and discuss education opportunities. I was informed by the receptionist that Jamie was in "morning meeting." I left a msg on her voice-mail. CPP of Wadsworth confirmed by Omnicare Pharmacy.
PPLPMDL0020000001	Akron	OH	44313	3/25/2013	Called to follow-up w/ Richard Lynch from our meeting on 3/5. I was informed that he was not in yet. Left msg on his voice-mail. CPP confirmed by Omnicare of Wadsworth,
PPLPMDL0020000001	akron	OH	44333	3/25/2013	Spoke to dr through window and gave him the Butrans program invite. Handed him the dosing and titration piece and reminded him the Caresource PA criteria and asked for Butrans prescriptions for his failing air opioid patients with private prescription insurance.
PPLPMDL0020000001	Independence	OH	44131	3/25/2013	Dr Trickett said she recently prescribed Butrans for a patient but added that she has not heard back from her yet. She said the patient had been on Butrans at some point, but then came off it (she did not remember why) & so she had the patient try it again. Showed Scott patient profile & walked Dr Trickett through the key points of the profile. She said "this is 50% of America- seriously". I told her this would be an ideal candidate to consider for Butrans & showed starting dose. Discussed ability to take supplemental analgesia & titration after 3 days if necessary. Dr Trickett said it makes sense to use Butrans in patients like this because it is before the patient gets too used to taking multiple pills per day, so the transition should be easier. I agreed that this is an ideal patient for Butrans & asked if she truly believes this is as common a scenario as she said it was. She said she sees these patients frequently. Reviewed managed care coverage, reminding her of trial/savings cards & asked if she would choose one of those patients to start on Butrans. Dr Trickett said she will see who comes in & will try. Reviewed broad OxyContin coverage & q12h dosing. Introduced Intermezzo, giving her information packet. Discussed delivery system, patient type, indication & limitations of use. She said she would read over the information. Followed up on discontinuation insight. Showed OxyContin conversion/titration guide, pointing out the intermediate strengths. I asked his thoughts on using the intermediate doses for individualization of dosing. He said that would be good & that he always forgets those. Reviewed broad managed care coverage & savings cards. Showed Scott patient profile & pointed out key bullet points, reading them to him. I asked what the next step would be for this patient if he was his physician. He said probably Vicodin. I reminded him of previous interest in Butrans & reviewed dosing, delivery system, titration, & ability to use supplemental analgesia. Showed that a patient like Scott could start at 10mcg Butrans. Dr Warren said he does think he could use Butrans for a patient like this. Reviewed managed care & trial/savings offer. I asked if it was reasonable to expect that a patient like this will present this week. He said it is likely. I asked if he would try Butrans for a patient like this, if appropriate. He said he thinks he can do that. Gave Intermezzo packet & reviewed indication. Let him know about DTC campaign. He said he has seen the ad on TV.
PPLPMDL0020000001	Richmond Heights	OH	44143	3/25/2013	Called to speak w/ Aldona Bur to schedule in-Service on Constipation. Spoke with the receptionist, Darlene who stated that Aldona was in a meeting. Left msg w/ Darlene. Confirmed CPP- Omnicare -Wadsworth
PPLPMDL0020000001	Twinsburg	OH	44087	3/25/2013	Made a drop-in visit to speak w/ Jody Smith in HR. Spoke w/ receptionist, Marge Adams, introduced myself and purpose of visit, re: pain & pain management educational opportunities at no cost. She stated, "Jody can't be bothered, she is busy w/ payroll and the D.O.N. Shawn McMahon is in a meeting. I will let him know that you stopped by. It is probably Shawn that you should talk to." I left my BC
PPLPMDL0020000001	Beachwood	OH	44122	3/25/2013	Called to speak w/ Nurse Educator, Merri Bunge to discuss time of in-services on 5/7 & 5/8 on pain management, she was not available. left msg on her voice-mail
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/25/2013	Called to speak w/ D.O.N., Debbie Keller, N/A, Left msg on her voice-mail. CPP location confirmed by PharMerica as Worthington.



PPLPMDL0020000001	Akron	OH	44313	3/25/2013	Spoke to Tom the pharmacist about intermezzo indication, limitations of use and dosing. Tom said he has not filled any. I asked what products he fills most for ER opioids? Tom said they fill a lot of MS Contin and ER morphine. Tom said many managed care companies are not covering branded ER opioids. He did say that he does fill OxyContin regularly. Explained the Scott profile for Butrans. Tom said he has a few patients on it.
	Independence	OH	44131	3/26/2013	Spoke with office manager Lisa who said Dr Sundaram is out of town all week. Reviewed the pain management kit with her & discussed the pages we made copies of on a previous visit. She said she does not think they have implemented any of them, but she said to check with Dr Sundaram when he returns. Reviewed Butrans & OxyContin managed care information & also gave Intermezzo packet. Discussed indication, dosing, delivery system, & appropriate patient type. Also gave her a managed care grid. She agreed to share this information with Dr Sundaram & the rest of the staff.
	Cleveland	OH	44130	3/26/2013	Positioned Butrans as a possible alternative for appropriate patients to the short-acting around-the-clock opioid regimen that Dr Fedorko has told me several times that he does not want to write anymore. I told him that it is merely a possible alternative for him to consider. Introduced Intermezzo & discussed indication, appropriate patient type, dosing, managed care landscape. He said he himself suffers from problems sleeping & he currently uses Edular, but he finds that it is too much for him to take because he feels groggy the next day. He said he thinks Intermezzo could be a possible solution for him & some of his patients as well. He said he had to go see his patient, but added that he would want to talk more about Intermezzo next time. I let him know I would leave him additional information for him to look over when he has more time.
PPLPMDL0020000001	Cleveland	OH	44130	3/26/2013	Spoke with Julie & reviewed Intermezzo pharmacy information key messages. She said she hasn't seen anything for it yet. Reviewed indication & patient type as well as delivery system & dosing. She took notes on dosing. She asked why there is a gender difference. I told her that in studies, females appeared to clear zolpidem at low rate than males, leading to higher concentration in the blood. Discussed managed care landscape & savings through e-voucher for Intermezzo, Butrans, & OxyContin. Reviewed Butrans appropriate patient type.
PPLPMDL0020000001	Parma	OH	44129	3/26/2013	Caught Dr Ortega at the window- he said he was in the middle of something & couldn't stay to talk. He added that he just started a new patient on Butrans. He said he would tell me more about it next time. Spent time with Cindy & reviewed Butrans & OxyContin dosing. Also gave her tear-off pads for patient assessment. She said they would be able to use those. I let her know they can be used to help increase communication between them & the patients they treat for pain. I introduced Intermezzo & gave her the information packet. Discussed indication, dosing, appropriate patient type, & dosing. She said Dr Ortega does not really write any sleep medications, but agreed to give him the information anyway.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	3/26/2013	Made drop-in visit to meet w/ ADON, Debbie Lovette to re-schedule in-service on constipation. According to the receptionist, Linda Bergman, "Debbie is not in her office, she must be on the unit. I will make sure she gets the message and have her call you." Left BC
PPLPMDL0020000001	Akron	OH	44333	3/26/2013	Made a drop-in visit to meet w/D.D.N., Ramona Watson to schedule appt. to discuss educational opportunities on pain management. I spoke w/ the receptionist, who informed me that Ramona was out at a job fair. Sent Ramona an e-mail requesting a meeting w/ her to discuss educational in-service opportunities @ Ramona.Watson@saberhealth.com left my BC
PPLPMDL0020000001	Middleburg Heights	OH	44130	3/26/2013	Quick call- caught Dr Ignat in the hallway. Showed Butrans dosing & started to review formulary information, but he said "no time" & walked into a room. Spoke with Barb, nurse/office manager & reviewed Butrans & Intermezzo formulary grids.
PPLPMDL0020000001	Uniontown	OH	44685	3/26/2013	Told dr to identify a patient like Scott who has been on tramadol for 3+ months and is complaining of being in pain. Reviewed profile again and dr said she may try to convince another patient. Left Intermezzo doing
	Cuyahoga Falls	OH	44223	3/26/2013	I told dr that I noticed he was out of OxyContin copy cards? I told dr that I restocked him and where is he using it most? Dr said for patients he needs to get off Percocet and knows that they would benefit from dosing it two times a day. Gave him the nancy profile and intermezzo dosing guide. Dr said he will send his patients to their primary doctor for intermezzo. Discussed the comfort assessment guides with Liz and Linda. Liz said she had two new patients today and will give them one.
PPLPMDL0020000001	Fairlawn	OH	44333	3/26/2013	Made a drop-in visit to meet w/ Michelle Williams to re-schedule in-service on Pain management. The receptionist paged Michelle. She was not able to meet w/ me, but said that she would call me tomorrow.
PPLPMDL0020000001	Akron	OH	44312	3/26/2013	Led with insight 3 with entire staff. Jenelle said that it is very difficult to come to an agreement in how their pain is going to be treated. I asked dr if a pain journal would be helpful for some patients? She said maybe but doesn't want her patients to focus on their pain too much. I told her that she needs to be very selective. Jenelle said she uses Butrans often and finds that it works great for the geriatric population. I asked why and she said because most younger patients want the high from oral IR medicines and know they won't get that from a patch. I explained patient selection with Scott and nancy. Jenelle said those patients are fine but are also usually on a host of different pain medicines and its not always that simple. I agreed and said I understood. I explained appropriate starting doses, titration, and copy cards. Jenelle said she knows that dr Lababidi is starting patients on Butrans at a younger age and is having success. Provided OxyContin dosing and copy card information along with intermezzo dosing.
PPLPMDL0020000001	Cleveland	OH	44130	3/26/2013	Reviewed 7 tablet strengths of OxyContin for individualization of dosing & showed Butrans titration piece, pointing out ability to titrate after 3 days. Left Intermezzo formulary grid on his desk.
PPLPMDL0020000001	Fairlawn	OH	44333	3/26/2013	Spoke with doctor about how he qualifies his patients for the medicines he prescribes after discussing insight. Doctor said that everybody but said he typically just talks with his patients about how they rate their pain, what medicines they currently are on and what condition they are in for? I asked dr whom he believes is appropriate for Butrans and if I could provide materials to help him and patients communicate would he be interested? Dr said yes. Dr said he has only used Butrans once or twice and he knows patients on ultram or vicoden are good patients to us it for. I discussed all key selling messages and reviewed patient profiles, titration, and use of supplemental analgesia. Discussed approximate conversion guide and asked dr if he will identify more patients for Butrans? Dr said he will try. Explained OxyContin patient types and intermezzo indication.
PPLPMDL0020000001	Akron	OH	44333	3/26/2013	Led with insight 3 for all hcps in attendance over lunch. Lisa said that it is a constant battle with trying to be on the same page as their patients because the patients are all over the place with what they want. Lisa said most patients expectations are not appropriate and a line has to be drawn on the best course of action for treatment. I explained some of the resources available for Butrans and partners against pain. Lisa said she really likes Butrans and is using it often. I asked where? She said for patients mostly that they want to get off oral narcotics. Vicoden and tramadol patients are being out on Butrans. Lisa said many patients who meet the criteria for the 5mcg and when it is initiated, the patient doesn't get enough relief and the dose is titrated to 10mcg. I discussed that the steady state is 72 hours and it be titrated at that point. I also discussed how soon she is tapering the dose of the IR products? She said sometimes right away. I explained the importance of keeping the IR on board at least until steady state is reached. Lisa said that she didn't remember that and it was a good point. I asked for more Butrans patients like nancy and Scott. Discussed OxyContin dosing and patient types and quick message about intermezzo.
PPLPMDL0020000001	Cleveland	OH	44130	3/26/2013	Spoke with pharmacist Colleen & presented Intermezzo pharmacy information booklet. She said she would not think that there would be a generic substitution for it since it is relatively new. She looked in her system & said there is nothing there to suggest that there would be a generic alternative. I asked her in general how she determines whether or not to offer a customer a generic alternative to a medication. She said the only thing they do is to suggest someone speak to their doctor if the patient says the original medication is too expensive. She added that they do not & should not, make any type of medication suggestions for substitutions. I asked if she runs the insurance through before quoting pricing. She said they always do this & only give the cash price if someone insists on it. Reviewed automatic savings for Intermezzo, Butrans, & OxyContin through e-voucher.
PPLPMDL0020000001	Parma	OH	44129	3/26/2013	Delivered communication insight to Myra. She said she has always felt that communication with patients is imperative. She said this is important with Butrans because patients are generally reluctant to try something long-acting, especially a patch. She added that when you take the time to explain usage & expectations, you can see a higher success rate. I told her it sounds like she is doing exactly what she should be & that perhaps this helps contribute to her success with Butrans. She said she continues to give out the kits despite still not receiving any reports. I asked that she also use the comfort assessment guides when she is out of the kits. Also reviewed trial/savings cards & Intermezzo indication, dosing, & managed care.
PPLPMDL0020000001	Akron	OH	44310	3/26/2013	Quick call in hallway and asked dr to begin identifying patient for Butrans that are failing tramadol who have private prescription insurance. Dr said he is trying and to give him time. Gave the OxyContin conversion guide and intermezzo dosing guide.
PPLPMDL0020000001	Akron	OH	44313	3/26/2013	Stopped by to speak w/ Richard Lynch, to follow-up on my visit and meeting w/ him on 3/5 and to see about scheduling an in-service on pain management. I spoke w/ Receptionist, Nicole who phoned Richard, he was not able to meet w/ me b/c he was busy with orientation today. I left my BC.
PPLPMDL0020000001	Munroe Falls	OH	44262	3/27/2013	I followed up on last call about communication resources she has used. Dr said she has not had the chance to use any but said she thinks they will be good to have when a patient could benefit from them. I asked her if the patient that did not get Butrans had come back in for a follow up and if there was another attempt to initiate butrans. Dr said the patient has not come back in but should in the next week or two. I reminded dr about appropriate patients are for Butrans and proper initiation. Gave dr invite to program and she said she might like to attend. Presented dr with intermezzo placebo pill and how to open.
PPLPMDL0020000001	Parma	OH	44134	3/27/2013	Dr Hernandez said that it seems like pharmacists just want to be the ones practicing medicine these days, but they don't the responsibilities that come from that. I asked if any of the recent problems he has been having have been with Butrans or OxyContin. He said not that he can think of, adding that he thinks he has taught them enough by now that he doesn't get questioned quite as much. He said he has started some patients recently on Butrans. I asked him to tell me about them. He said one patient came in who was not yet taking any pain medications. He said she fit the Butrans criteria, so he started her on 5mcg & so far he believes she is doing well. He said the other patient had been on higher doses of other pain medications, so he gave them Butrans as well.
PPLPMDL0020000001	Akron	OH	44320	3/27/2013	Discussed the communication insight with dr and asked her if any of her patients are using pain journals? Dr said she didn't think so. I showed her the comfort assessment journal and reviewed it with her. I asked her if it would make sense to give the appropriate patient and if it would benefit the patient? Dr said yes. I reminded dr about the meeting next Wednesday with dr Bonyo. Dr said she would be there. I asked her to come to my event for Butrans on April 11th. Dr said she will try to make it. I asked her if she had found candidates for intermezzo and she said no because she knows the coverage is very poor. Handed her the formulary grid and pointed
PPLPMDL0020000001	Maple Heights	OH	44137	3/27/2013	Spoke with Stephanie & presented Intermezzo pharmacy information booklet. Reviewed indication & appropriate patient type. Gave information sheets on Butrans & OxyContin savings programs & let her know that they have for all 3 medications is built into their computer system through e-voucher if an eligible customer presents.
PPLPMDL0020000001	Akron	OH	44319	3/27/2013	Discussed all products with Anne the pharmacist. Anne did not know about intermezzo or Butrans. Introduced both products giving indications, dosing, and appropriate patients. Left dosing guides for all products including OxyContin.
PPLPMDL0020000001	Akron	OH	44319	3/27/2013	Spoke to Beth the pharmacist about Intermezzo. Beth said she knew about it and has one patient she has filled one prescription. Explained indication, dosing, limitations of use. Explained Butrans dosing, indication, titration and appropriate patients using the approximate conversion guide. She said she has filled a couple of prescriptions for Butrans which the patient come back in to refill. I mentioned that it is a CIII and it can be refilled at the point of the first prescription.
PPLPMDL0020000001	Lyndhurst	OH	44124	3/27/2013	Detailed both Sarah and Dr Kim at same time but obtained more time with Sarah after Dr Kim went into room. she said she recently tried to write Butrans for she believes, a Medicare part d patient, and Butrans cash price quoted was over \$ 300 per month. she likes the idea of a weekly patch, and patients not having to remember to take a bunch of pills. She really liked dosing slider. Went over appropriate patient selection, and to keep in mind, 5,10 and 20mcg/hr equates to 5, 10 and 20 mg per week, so keep in mind some patients may need a cII such as OxyContin if Butrans does not relieve their moderate to severe chronic pain. She then asked if I had Butrans patch samples, I told her no, but I have a demonstration kit I can show her. Went through demo kit and patient guides. She thought the Butrans patient guides were a good resource for her pain patients. Also showed her pain assessment tear sheets for patient charts. It told her when I follow up next time, I will bring her our PAP (orange) web key, where she can print items from our pain management kit. She looks forward to receiving. I asked her not to give up on Butrans due to recent non coverage for her Medicare patient, and lets. Focus on where Butrans is covered, and that workers comp will pay for Butrans. And can I leave her Butrans savings cards, she responded absolutely, please do. I showed her our trial offer, and the savings for next 11 months. She set up cards and set patient guides where she could see them.
PPLPMDL0020000001	Mayfield Hts	OH	44124	3/27/2013	Met with Dr Kim and there PA Sarah, but got additional time, with Sarah after Dr Kim had to go in room. dr Prada am only on Wed. Reminded Dr Kim OxyContin is covered Medicare Part D, 33% of patients in our clinical studies were over age 65. Remember to hand out OxyContin savings cards for commercial or cash pay patients. Transitioned to Butrans. Went over appropriate patient selection. The sliding doser was very helpful to Sarah. She also asked if I had Butrans sample patches, and I said no, but I do have a demonstration patch & disposal unit. Went through demo with both of them. Sarah said she wrote Butrans recently for female patient, who is Medicare D, plan wouldn't cover, she was going to have to pay over \$300 per month. At this time the medical secretary, who takes call backs chimed in and said that is correct. I asked them not to give up on Butrans and try to focus on where Butrans is preferred, and keep in mind workers comp patients. Medicare part d will cover OxyContin. Went over 5,10,20 mcg /hr dosing, proper application, removal. Left Butrans e learning invites for all 3 HcP s. Quick mentions of Intermezzo. Left Intermezzo HCP kids & dosing flash card for all.
PPLPMDL0020000001					

PPLPMDL0020000001	Parma	OH	44134	3/27/2013	Delivered communication insight to Lynda & asked her thoughts. She said none of the doctors are treating pain there anymore. Showed pain management kit and told her of various resources we can provide. She took one of my cards and said she would call me if they needed anything like that. Introduced Intermezzo and gave information packet. She said she would look at it later & left the room.
	Cleveland	OH	44124	3/27/2013	Left information with nursing staff and also spoke with Lauren, the office health coach. Dr Casselberry, not in today, but Dr Todd Pesek is. He is there 3 days a week (mon Tues & thurs) with Dr Casselberry. I asked for Rinatta their office manager, but she's on vacation until April 2nd. stop in after April 2nd to try and schedule a meal in service with practice or meeting with Dr Casselberry. Rinatta in Tues through Thurs, off Mondays. Left intermezzo HCP kits for both doctors, Butrans e learning invites, Butrans dosing sliders.
PPLPMDL0020000001	Strongsville	OH	44136	3/27/2013	Spoke with Sue and presented Intermezzo pharmacy information. Reviewed key messages and discussed patient type and delivery system. Gave her information about Butrans and OxyContin savings program and alerted her to available savings for Intermezzo patients as well.
	Westlake	OH	44145	3/27/2013	Quick introduction while booking lunch. Told Dr. I am his Butrans OxyContin and Intermezzo representative and explained that intermezzo is indicated for middle of the night Awakening. Scheduled appointment for Wednesday and lunch for the following Monday With receptionist Janet and introduced myself to Kelly the other receptionist. Found that Vicky Correll, the nurse practitioner handles all of the callbacks for the pharmacy. Office has Butrans and OxyContin vouchers. Office hours in the afternoons after 3 PM only.<font color=blue><b>CHUDAKOB added notes on 04/04/2013</b></font>Very nice next call objective Marcia!
PPLPMDL0020000001	Cleveland	OH	44109	3/27/2013	Intro-Vendormate info. Registration
PPLPMDL0020000001	Cleveland	OH	44113	3/27/2013	Intro. Discussed Butrans, utilization,Dr. Nickels stated Deb's a supporter of Butrans and its delivery system. He also stated he doesn't prescribe OxyContin.
PPLPMDL0020000001	Westlake	OH	44145	3/27/2013	In-service completed on Pain Management for STNA's @ 12:30, 11 in attendance. Handouts given: Patient comfort assessment guide and the Wong Baker Pain Scale. During the in-service,discussion and interaction on Barriers that interfere w/ Pain Assessment & Treatment in the elderly and consequences of unrelieved pain took place. Positive feedback was rec'd from the STNA's on the in-service.After the in-serve,I asked to meet w/ the D.O.N., Ovilsi Pilblad, to discuss educational in-service opportunities for the nursing staff. I was informed by Patty that she was on vacation this week.
PPLPMDL0020000001	Cleveland	OH	44113	3/27/2013	Intro. Lynaye-MA Dr. Shen requested Butrans savings card. Call sensitive
PPLPMDL0020000001	Cleveland Solon	OH	44139	3/27/2013	Arrived to meet w/ D.O.N., Judith Sawtner for a 2:00 scheduled appt. Upon arriving, I was informed by the receptionist that Judi was in a meeting. I met w/ Judi @ 3pm. I introduced myself and the Nurse Educator Program, unbranded (Pain management, constipation) and branded (OTC, Butrans, Oxycontin & Intermezzo) indications and patient types were reviewed. Judi stated, " Pain is assessed Q-shift. Current pain assessment tool used is Wong-Baker or verbal." The facility consists of Skilled, LTC & Hospice. When I asked, her "what medications are you currently using to treat pain?" Judi responded,"several, it depends what the Dr. orders." Judi felt this program is something that the nurses could use.I confirmed the Medical Director as Dr. Privadharshini, Judi said that she is usually in and out about 3 days a week. They also have NP's on staff. The CPP is Remedi. Judi informed me that their staff meeting is usually the first Friday of each month and that would be the best time for the in-services. An in-service on Pain Management was scheduled for Friday June 7th @ 6am,7:30am,2pm & 4pm for Nurses and STNA's. (1st available!) left my BC and PAP handouts w/ Judi.<font color=blue><b>WOOLFKA added notes on 04/09/2013</b></font>Very Nice notes Cindy
PPLPMDL0020000001	Cleveland	OH	44113	3/27/2013	Introduced myself, Deb says she is a Butrans supporter, Dr Nickels commented on her strong support of the product. She requested Spanish Butrans material
PPLPMDL0020000001	Akron	OH	44312	3/27/2013	Recapped last discussion about communication between him and his patients. I asked him if the comfort assessment journal would be applicable for any of his patients and reviewed it? Dr said he will take a couple and that he has a few patient in mind. Dr said he has prescribed Butrans on two occasions since we spoke last. Dr said he prescribed it for an older man on tramadol under 300 mg a day and hated taking the pills. Dr said he initiated on the 5mcg dose and patient had it covered by his insurance and is doing well. Dr said he prescribed Butrans for another patient this week on vicoden who was a patient of dr Wells. Dr said the patient was taking 3 pills a day and initiated on Butrans. Discussed with dr the appropriate starting dose, titration and use of supplemental analgesia. Quickly discussed OxyContin dosing and patient types and intermezzo. Dr said he has prescribed it twice and will wait to hear back from patients for follow up.
PPLPMDL0020000001	Parma	OH	44129	3/27/2013	Dr Kalin said our last discussion about Butrans helped him a lot. he added that he has started quite a few patients on it since that talk. he said patients are doing well and he feels better about titration. Delivered communication insight and reminded him of the Butrans Patient Experience Kits he has. I suggested that those can be used to improve communication between him and his patients who are new to the medication. Dr Kalin said that was a great idea and added that he has 4 kits left at this time. He said he recently gave one to a patient. He said he still has a patient on OxyContin. I gave him Intermezzo packet & delivered indication. Dr Kalin said he doesn't prescribe sleep medications. I let him know we are doing DTC marketing, so I wanted him to have the information just in case he was asked about it.
PPLPMDL0020000001	Copley	OH	44321	3/27/2013	I recapped my last discussion with him about the patient he initiated on Butrans 5, titrated to 10mcg and the patient told him that the vicoden works better. I asked him why he didn't titrate to the 20mcg? Dr said the patient said the vicoden worked better. I asked what the dose of vicoden was ? He said 7.5/500 4 times a day. I told dr that he should have initiated on the 10mcg dose and then titrated to the 29mcg dose. I reviewed the opioid experienced trial pointing out titration and success of 20mcg efficacy. Dr said ok and will keep it in mind. Left with intermezzo dosing information.
PPLPMDL0020000001	Akron	OH	44313	3/27/2013	I told dr that he should use OxyContin for his patients failing on Percocet or those who tell. You they don't want to take all their pills. Told dr that dosing is q12h and recommended to take 8a and 8p. I asked dr if he initiated Butrans yet? Dr said no but told me he read the stuff I left him. I asked him what he thinks and if he has any questions? Dr said no and that he would try it. Left program invite and Butrans initiation scale.
PPLPMDL0020000001	Westlake	OH	44145	3/27/2013	Spoke with Lee the office manager who explained Dr. Celeste is not returning to the office until April after an extended absence. Gave indication of limitation of use for intermezzo and explained that I need to speak with the doctor. Lee explained that I can have full access to the doctors when I come but there are no doctors in the office on Wednesdays. Gathered times and days for Westlake office Detroit Avenue office in Pearl Road office.
PPLPMDL0020000001	Westlake	OH	44145	3/27/2013	Made a drop-in visit to speak w/ head of Education for the facility. Spoke w/ the receptionist Sue, I introduced myself and Purdue's NE program. She said, 'I'm not sure who you should speak with, but start by calling Janet Harst, LNHA for an appt. 440-871-0090 ext.2601. Placd a phone call to Janet Harst
PPLPMDL0020000001	Bedford	OH	44146	3/27/2013	Dr Moufawad said he is having good success with Butrans, specifically in patients who have had a history of illicit drug use. He said one female patient who he recently saw had used cocaine in years past, but she did have legitimate pain. Dr Moufawad said patients like this can be tricky because most people don't want to treat them, but he said he told her he would not give her pills & that Butrans at 5mcg was what he was willing to treat her with. He said the patient agreed to try it & reports feeling great pain relief. Dr Moufawad said he has decided to stay firm with patients & insist they try Butrans if he finds they are appropriate for it. He said he is keeping patients to a maximum of 100mg morphine equivalent per day total. He said this can be achieved with Butrans 20mcg plus 1-3 hydrocodone for supplemental analgesia. He said he does offer OxyContin to some patients but he has found that some patients say they do not want it if it is going to be the "new OxyContin". Dr Moufawad said this is a red flag. He added that he knows we can't say that it is less abusable. I agreed & told him there is no data to support that. He said there is evidence that he has seen in his own practice & through his own research. I asked him to be just as cautious as always. Offered Intermezzo formulary grid, reviewing indication & patient type. He said there was no need for that as he does not plan to ever use it.
PPLPMDL0020000001	Westlake	OH	44145	3/27/2013	Spoke with office manager asked her receptionist told me Dr. does not see reps. I explained to Judy the office manager that I had Butrans OxyContin and intermezzo and said I needed to see the doctor because intermezzo is a new drug. I gave the indication and limitation of use and dosing administration card for intz to Judy to forward to the doctor to schedule a lunch for a new product. Office did not need vouchers for Butrans or OxyContin and I said I would follow up on Wednesday to see if the doctor would like to schedule a lunch.<font color=blue><b>CHUDAKOB added notes on 04/04/2013</b></font>Marcia, I know we already discussed this, but just a reminder that after a product has been out for 6 months, it is not longer considered new and therefore we cannot use that terminology. None of our products would be considered "new"
PPLPMDL0020000001	Broadview Heights	OH	44147	3/27/2013	Quick call- caught Dr Samuel up front while going over Butrans & OxyContin savings information. He said he didn't have time today but he has a couple of patients on Butrans. Passed back Intermezzo packet & delivered indication, asking him to review it. He said he would, but added that he doesn't write sleep medications.
PPLPMDL0020000001	Broadview Heights	OH	44147	3/27/2013	Quick call- caught Dr Samuel up front while going over Butrans & OxyContin savings information. He said he didn't have time today but he has a couple of patients on Butrans. Passed back Intermezzo packet & delivered indication, asking him to review it. He said he would, but added that he doesn't write sleep medications.
PPLPMDL0020000001	Sagamore Hills	OH	44067	3/27/2013	Started to deliver communication insight to Dr Manual, but was interrupted by him telling me that he treats zero patients with any type of pain medication. He said that the Ohio Medical Board recommends this. I asked if he was referring to the House bill. He said he is referring to what the Ohio Medical Board sends them. Dr Manuel said he is referring all patients on any pain medication out. I asked if he ever finds that after sending a patient to pain management they return for him to manage their medications. He said he "doesn't do any of that." Discussed OARRS as a way he can monitor patients and their pain medication usage. He said there is no need because he doesn't write anything. I suggested that it could still be worthwhile to enroll as it would allow him to see even if the patient was getting the medication from other physicians. He asked what medications I had. I told him Butrans & OxyContin primarily, but I also wanted to share some information about intermezzo with him. Reviewed indication. He again cut me off and said that is another area where he is not prescribing anything. He said he refers patients who complain of sleep problems to psychiatry.
PPLPMDL0020000001	Akron	OH	44333	3/27/2013	Discussed with dr his patient type success with Butrans being his older patients with little to no opioid experience. I asked dr to put some focus on his patients from 50-65 years old with private prescription insurance. Discussed his patients with Medco and medical mutual insurance. Gave quick review of opioid experienced trial. Dr said he already reviewed the one I left a long time ago and thinks its a pretty sound study. Dr said he will continue to prescribe more Butrans. Asked dr to also continue to prescribe OxyContin for his Percocet failures. Left intermezzo dosing card.
PPLPMDL0020000001	Parma	OH	44134	3/28/2013	Quick call- Positioned Butrans for appropriate patients for whom he would otherwise be continuing on up to 80mg equivalent oral morphine per day for moderate to severe pain from a chronic condition. Dr Mandat said he has written Butrans recently. Delivered Intermezzo indication & dosing. He said he read the information I gave him last time regarding Intermezzo.
PPLPMDL0020000001	Independence	OH	44131	3/28/2013	I reminded Dr Jack that he has told me before that he hates writing Vicodin. He agreed that this is true. I asked him to help me understand then why he continues to do this for patients, refilling it for some month after month, when their condition is chronic. He said he knows it does not make sense. I asked him what benefit that serves. He said there is no benefit, it is just lazy & easier. I asked him if clinically he believes that is what is best for those patients. He said he probably should be writing Butrans for some of them. He said he thinks I finally got to him today. I told him I have heard that from him before, yet he continues to not try it. I reminded him that he even has a patient who is doing well on it. I asked why not allow other appropriate patients to try it. Dr Jack said he should be doing that. I asked how we can ensure that this will happen when appropriate going forward. He said he just has to think about doing it the next time he is getting his pen & pad out to write Vicodin or Ultram or Percocet. He said he likes that Butrans is CII, that BWC pays for it, & that it is a patch that lasts one week. Reviewed dosing & patient type. I asked him to try it this week as soon as a patient like this presents. He said he would. Reviewed OxyContin as a q12h dose of oxycodone, pointing out it is the same active ingredient in Percocet, which he writes. He said that was a good point. Gave Intermezzo formulary grid & indication.
PPLPMDL0020000001	Parma	OH	44129	3/28/2013	Quick call- Reviewed 7 tablet strengths of OxyContin for individualization of dosing. Dr Moysaenko just thanked me & walked away. Spoke with Corina & reviewed Butrans formulary information & appropriate patient type. She said Dr Moysaenko don't write very many pain medications. Gave Intermezzo formulary grid & discussed indication & DTC marketing. She agreed to give this information to Dr Moysaenko.
PPLPMDL0020000001	Independence	OH	44131	3/28/2013	Reviewed Butrans as the only long-acting CII opioid analgesic. Dr Rob just waved & walked away. Discussed Butrans once weekly, CII, appropriate patient type, & managed care/savings with Maria, office manager. Also discussed OxyContin formulary coverage. She said they don't write that anymore. Discussed Intermezzo indication & patient type. She said one of the doctors actually does have a patient on it who really likes it.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	3/28/2013	Good discussion over lunch about all products. I recapped the last discussion and how he explained a majority of his patients have Medicare and Butrans and intermezzo won't be too applicable for his patients. I explained OxyContin dosing and asked him more about his clinical experience. Dr said that OxyContin is his go to product for patients that need long term control of their pain. Dr said many of his patients have spinal stenosis and finds that OxyContin is a great product for those patients. Dr said he doesn't believe that any of his patients are taking more than 40mg12h. Dr said he figures he has about 20 patients currently on it. Dr said he move to OxyContin after he has moved through vicoden or Percocet. I explained the patient profiles and formulary coverage for his Medicare patients. Dr admitted that he does have patients with private prescription insurance. I reviewed Butrans key selling messages and reviewed case study patients. I stressed the importance of using Butrans early on in the treatment of pain when a patient is failing NSAIDs or tramadol. I asked dr if he would try it on an appropriate patient? Dr said that he will and remembers that it is a CII which said it will make it much easier on him. Explained intermezzo placebo pill and asked him to try it.
PPLPMDL0020000001					

PPLPMDL0020000001	C. Falls	OH	44223	3/28/2013	Spoke to Denise and Collice about all products. Denise said they have had a few Butrans prescriptions recently from the pain center in the hospital. One patient was a BWC patient and BWC paid for it. The other was a private plan and they just started Relay Health so they do not need the copy cards anymore. Denise said they also just had a patient started on OxyContin where fentanyl was declined by the insurance. Explained intermezzo placebo patch and indication.
PPLPMDL0020000001	Shaker Heights	OH	44122	3/28/2013	Showed broad formulary access for OxyContin on grid & reviewed Butrans once weekly transdermal dosing & CIII. Started to introduce Intermezzo, but he said he had to go. Gave Intermezzo information & Senokot-S samples to Stephanie.
PPLPMDL0020000001	Stow	OH	44224	3/28/2013	I told dr that I wanted to ensure he felt comfortable with the make up of Butrans and the mechanism of action. Used main visaid to show the patch technology, action at the mu receptor, and buprenorphine as active ingredient. I asked dr if he agrees with the Butrans product? Dr said he does and has no reservations in using it except for finding the right patient that can afford it. I told dr to focus on his working patients with private prescription insurance. Dr agreed. I showed dr the intermezzo placebo and explained the product.
PPLPMDL0020000001	Maple Heights	OH	44137	3/28/2013	Quick call- Stopped Dr Gene at the window. Reviewed Butrans dosing & gave Intermezzo formulary grid. He said he would do his best.
PPLPMDL0020000001	Parma	OH	44134	3/28/2013	Rec'd a phone call from Linda Belford to set up another in-service for April.
PPLPMDL0020000001	Maple Heights	OH	44137	3/28/2013	Spoke with floater pharmacist & introduced intermezzo, using pharmacy reference booklet. Discussed 3 key messages. She said she hasn't dispensed it yet. Discussed dosing & delivery system. Also gave information sheets on Butrans & OxyContin savings programs. I let her know that all 3 medications' savings programs are on e-voucher, so they will come up automatically if someone is eligible.
PPLPMDL0020000001	Oakwood Village	OH	44146	3/28/2013	Met w/ D.O.N., Barb Straemple, introduced myself and the Purdue NE Program. Unbranded (pain management, constipation) & branded (OTC, Butrans, Oxycotin) educational in-service opportunities were discussed. The facility has 90 occupied beds consisting of LTC including 15 vents, skilled, and hospice. Barb said pain is assessed Q-shift and Wong-Baker is the pain assessment tool used. The payor is primarily Medicaid and Medicare. Barb stated that approximately 50% of their residents are treated for pain. Pain medications used are Vicodin, Percocet & Oxycotin. She stated, "they use the fentanyl patch on the elderly residents b/c its easier to manage." CPP- is Remedi, formerly Cornerstone and Alan Fox is the pharmacist. The Medical Director is Dr. M. Zivic, his NP is Christopher. Barb informed me that they have a sister facility, Grande Pavilion, located behind their facility @ 24613 Broadway Ave. Oakwood Village 440-439-1448. The D.O.N. is Patience Chia, (Barb oversees her) and the Medical Director is Dr. H. Azem who also has a NP, MaryAnne who is there on Wednesdays. Barb informed me that their staff is always included in the meetings & in-services @ Grande Oaks. She could not recall how many beds were at the Grande Pavilion. She said that they have a "locked" dementia unit besides LTC, Skilled & Hospice. Barb stated, "This is a great program and wonderful that it is free." Left my BC & PAP handouts. In-service for Pain Mgmt was scheduled for 5/16 @ 7am, 10:30 & 2:30
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/28/2013	Spoke with doctor at window in Western Reserve Hospital. I asked dr where he is using Butrans most often? Dr said when he does not want to prescribe a short acting narcotic. I asked him how his success has been? Dr said it has performed well and that he plans on continuing to use it where necessary. Nothing else learned. Left intermezzo and OxyContin dosing cards.
PPLPMDL0020000001	Fairlawn	OH	44333	3/28/2013	Placed a phone call to Michelle Williams in Staff Development to re-schedule Pain Management in-service. N/A, left msg. on her voice-mail.
PPLPMDL0020000001	Akron	OH	44305	3/28/2013	I brought up the communication insight again and showed him the comfort assessment guide and explained it. I asked dr if he would find a patient or two that would find it beneficial? Dr said anything that makes it easier for the patient and him is good. I asked him to use his Butrans ex entails kits for his patients with private prescription insurance. Dr agreed to continue using. Left him with program invite and intermezzo dosing.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	3/28/2013	Saw dr as she was leaving the office. I told dr I wanted her to have a copy of the determining the appropriate dose of Butrans piece. Dr said she feels comfortable with it and I told her I was glad. I opened the piece and asked her how and when shad she been titrating? Dr said when the patient are her feel that more is necessary then she does titrate the dose. Dr said most of her patients have moved to the 10mcg. I asked her to use the copy cards and that I'm glad she is having success with Butrans.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/28/2013	Dr told me that he has been prescribing Butrans and has had one or two intermezzo. I asked dr to tell me where and why he used Butrans. Doctor said that both patients were on low dose Percocet and he didn't want to titrate. I asked him what does he initiated? Dr said he doesn't remember exactly but thinks they both started on the 10mcg. I explained to him the appropriate conversion chart and explained the Scott profile. I asked dr if he had patients on tramadol around the clock? Dr said his dose for sure. I asked him to initiate Butrans for those patients who are uncontrolled or can't tolerate the IR product. Dr agreed and said he should begin Butrans earlier because its very difficult starting Butrans for a patient on Percocet. I asked dr to attend the program on April 11th which he said he could not. Dr said he initiated an intermezzo and has not seen the patient back yet. Gave him the dosing card.
PPLPMDL0020000001	Tallmadge	OH	44278	3/28/2013	Dr said he will give me time on my next visit and he was too busy. Handed him the Butrans initiation and titration guide. Nothing else learned.
PPLPMDL0020000001	South Euclid	OH	44121	3/28/2013	Met with Dr.'s medical assistant Tracy. She apologized that Dr. Deloseph could not come out to speak with me, as she was running behind. I let Tracy know I'm with Purdue now, and introduced my products. I then mentioned I had savings cards for OxyContin, and trial/savings card for Butrans, and would she like me to leave, as Dr. Deloseph doesn't need to sign for. she said yes, Dr. Deloseph loves to hand out savings cards to her patients, they are very valuable to her. I then went over OTC line & left Senokot S/dosing tear sheets. I then left HCP Intermezzo kit, and went over Intermezzo indication with Tracy. Tracy says she remembers someone stopping by with Intermezzo info previously.
PPLPMDL0020000001	Cleveland	OH	44121	3/28/2013	Met with Dr. Flagg's medical assistant, Jenny Klabunde. Dr. Flagg unavailable, but I did get to schedule a few lunches when he's in Concord office, every other Thursday, (Kakish Kosnosky/time shares with them). Went through all my products with Jen. This is first time I've seen her as Purdue rep. Left HCP kit for intermezzo, and dosing flashcard/dosing card also for Jen for intermezzo. Left all formulary update sheets for her. Went over OTC products available. Left Butrans evite for Dr. Flagg, and dosing card. Jen will discuss Butrans with him & see if he seems interested. Showed Jenny my pain management kit, and told her we can review at lunch, and our orange web key has all available for their office to print out. Jen says I have a much better chance of talking with Dr. Flagg @ Concord location, as he's not as busy over there. He rarely talks to reps in S. Euclid, nor does he attend breakfasts/lunches @ S. Euclid. Found out from Jen Dr. on vacation last week May, entire Month of June, first week of July, back in office July 5.
PPLPMDL0020000001	BEACHWOOD	OH	44122	3/28/2013	Spoke with technician as pharmacist was busy dealing with a customer issue. Gave her information on intermezzo & reviewed 3 key messages for pharmacies. She said she had seen an ad on TV but doesn't think they carry it. Discussed savings/trial cards for Butrans & OxyContin savings program. Also let her know that e-voucher would allow for all 3 medications' savings to come off automatically at Giant Eagle locations. She agreed to give the pharmacist this information with my card.
PPLPMDL0020000001	South Euclid	OH	44121	3/28/2013	Spoke with Karla Ponsart, pharmacy mgr Mitchell in this afternoon. They're aware of intermezzo, have both 1.75 and 3.5 mg in stock. Can't remember who wrote, but they believe it was a few Cleve Clinic Foundation doctors. left pharmacist guide to intermezzo & dosing flash card. Indication, no AB rated generic equivalent. Told them I have savings cards on order, and will leave next time. Butrans they were not familiar with, none on shelf, none dispensed. Went over indication, application, rotation, doses available. Left patient guide. Told them patient trial/ savings available. OxyContin they dispense regularly. Reviewed 7 available doses. Savings card flash card. Increased savings for their customers. Left savings cards.
PPLPMDL0020000001	Tallmadge	OH	44278	3/28/2013	Spoke to pharmacist about intermezzo dosing, indication and limitations of use. I explained how intermezzo worked and copy card information. I told technician about Butrans dosing and indication. Discussed how a physician would approximate converting from an IR opioid. Left OxyContin dosing information.
PPLPMDL0020000001	TWINSBURG	OH	44087	3/29/2013	Spoke with pharmacy intern who said Amy was assisting a patient. Showed Intermezzo pharmacy information booklet & went over 3 key points. Discussed dosing & appropriate patient type. Also gave sheets on Butrans & OxyContin savings programs. Reviewed Butrans appropriate patient type, CIII, & delivery system. She agreed to share my information when Amy became available.
PPLPMDL0020000001	Beachwood	OH	44122	3/29/2013	Introduced myself & Purdue's products to Eileen, Dr Tabbaa's new nurse practitioner. She said she basically sees the follow-up patients & Dr Tabbaa sees the new patients. Eileen said she just saw her first Butrans patient today. Discussed appropriate patient type/range, dosing, delivery system, & warnings. Pointed out that Butrans is the only long-acting CIII opioid analgesic. Eileen said she didn't really think about that. She told me about a female patient who she recently saw who has abdominal pain due to a severe case of endometriosis.. Eileen said she recently saw this patient & was not sure how to treat her because she is a young (27 years old) woman & she did not want to start her on an oral opioid medication around-the-clock but the patient needed something more than non-narcotic therapies were offering. She said she started this patient on Vicodin, giving her only a small number of pills. Eileen said she thinks she will start the patient on Butrans when she returns for follow-up because this seems to make more sense to her for this patient. Discussed trial/savings cards & managed care coverage. Also discussed OxyContin savings & introduced intermezzo. Delivered indication & discussed appropriate patient type. Eileen said she has a lot of patients like this & she thinks intermezzo sounds like a good treatment to try them on. Eileen asked that I give CME opportunities & program invitations when available as she is eager to learn more about pain management.
PPLPMDL0020000001	Akron	OH	44312	3/29/2013	Discussed all products in depth. Butrans key selling messages and reviewed patient profiles along with opioid experienced trial. Explained OxyContin dosing and patients appropriate patients along with intermezzo key messages. Janet said she wants to prescribe Butrans and sees herself using instead of taking patient to vicoden.
PPLPMDL0020000001	Beachwood	OH	44122	3/29/2013	Dr Tabbaa said he forgot I was coming in & had to leave for another appointment, so his time was very limited. Delivered communication insight & showed him OxyContin Patient Essentials Pack. Showed him the contents of each pack & showed the pain tracker. I asked his thoughts on using those for patients who are new to OxyContin as a means to foster communication with these patients. He said that was a good idea. He agreed to give them to appropriate patients who he starts on OxyContin. Gave Butrans managed care grid & intermezzo leaver with MA. Spent time going over materials with Eileen Coppola, his new NP.
PPLPMDL0020000001	Cleveland	OH	44103	3/29/2013	Intro. Presented OxyContin Savings Cards
PPLPMDL0020000001	Parma	OH	44134	3/29/2013	Called Linda Belford, Future in-services were discussed. In-Service on "Defining Key Terms in Pain Management" was scheduled for 4/30 @ 2:15 for Nurses & STNA's. I also talked with her about meeting w/ the NP's and pharmacy consultant. Linda asked if I could do a luncheon for the NP's, D.O.N. and herself and present the Branded information: Butrans, Oxycotin, intermezzo. She will confirm the number of NP's at the facility w/ Medical records and get back w/ me.
PPLPMDL0020000001	Cleveland	OH	44130	3/29/2013	Spoke with Jim & introduced intermezzo, using pharmacy booklet. He said he has not dispensed it but was aware of it & knew what it was. Discussed dosing & sublingual delivery PRN. Showed sheets for Butrans & OxyContin savings programs. Let him know savings was built into their system through e-voucher for all 3 medications. He said this is very convenient for them & he rarely notices when those come up.
PPLPMDL0020000001	Hudson	OH	44236	3/29/2013	Spoke to Beth about intermezzo dosing, indication and patients appropriate. Beth said she has not filled a prescription yet but said she likes the product. I discussed Butrans patients who are appropriate, dosing and conversions. Left her OxyContin dosing information and conversion guide
PPLPMDL0020000001	Twinsburg	OH	44087	3/29/2013	Spoke with Heather, pharmacy technician, & introduced intermezzo. She asked if it was like Ambien. Reviewed indication, dosing, & patient type. Showed 3 key pharmacy messages. Showed information on Butrans & OxyContin savings cards. I let her know that customers of Giant Eagle who are eligible for the savings would get automatic savings (no card needed) because they have it built into their computer system. She agreed to give my information to Lou & Bob.
PPLPMDL0020000001	Akron	OH	44312	3/29/2013	Handed dr the Scott profile for Butrans through the window and asked him to identify patients fitting a similar description. Dr said he will try. Left intermezzo dosing information.
PPLPMDL0020000001	Mayfield Village	OH	44143	3/29/2013	Met with Dr Lubin in waiting area, as they were doing paperwork. He was very receptive & didn't seem to know that Purdue manufactures OxyContin. I told him we have savings cards available, and resources available for caregivers of cancer patients. I also introduced him to Butrans and e was interested in learning more. Left him e earning invite. Also left him information on intermezzo. I asked him of his office protocol, ie does he allow reps to visit? Does he schedule appointments and/or lunches, and he said yes, go ahead & schedule a lunch with Stevi his RN which I did. I should ave checked his data prior to walking up to their office, as he doesn't use branded OxyContin, and I'd like to find out why not? Will keep the one lunch, but probably won't schedule any beyond that.
PPLPMDL0020000001	Akron	OH	44312	3/29/2013	Handed dr the Scott Butrans profile through the window along with dr Hill. I asked them both to identify patients currently on tramadol who may require a dose adjustment. I asked dr manning if he has used any of the Butrans experience kits? Dr said he has not but plans to. Nothing else learned. Left intermezzo dosing information.

	Akron	OH	44319	3/29/2013	Skokie with Sara again about intermezzo and asked if she has dispensed any? Sara said she has and has filled 2 prescriptions. I discussed the copy cards and asked if the patients had them. She said they did. She asked if she could get some when and if they start getting more prescriptions? I told her I would get them some if they need it. Discussed Butrans and asked about prescriptions. Sara said they have not had too many but have a couple of patients on it. Left OxyContin dosing information.
PPLPMDL0020000001	Cleveland	OH	44103	3/29/2013	Intro. Butrans savings card. Discussed OxyContin Dr. Stated his confidence in prescribing, reminded of 7 tablet strengths
PPLPMDL0020000001	Parma	OH	44129	3/29/2013	Spoke with Renee', pharmacy technician. Introduced myself & Purdue's products. I asked to speak with Kevin but he was unavailable. I asked her to give him information on Butrans & OxyContin dosing/titration as well as Intermezzo packet & pharmacy information. She agreed to do this.
PPLPMDL0020000001	Akron	OH	44319	3/29/2013	Great conversation about Butrans. I asked dr if he likes prescribing vicoden? Dr said he does not but finds that he has to. I asked him what the down side is to prescribing Butrans for patients that either fail tramadol or vicoden? Dr said he's not sure but know he should use it. I explained both patient profiles discussing appropriate starting dose and titration. I also told him to use it for his patients with private prescription insurance like Medoc, medical mutual and Aetna. Dr said he will find a few patients. Left dr with intermezzo dosing information.
PPLPMDL0020000001	Mayfield Village	OH	44143	3/29/2013	While waiting for Dr Azar spoke with Myra & Jessie, they didn't realize I am with Purdue now. they need reminding of my products. Jessie says make sure you talk with Dr Price when he's in because he uses a lot of OxyContin I told her I have appts already scheduled. Showed Jessie Intermezzo demo dosing flashcard & left dosing card for nursing staff. also showed them where Butrans & OxyContin savings cards are in cabinet. I started with Nancy profile with Dr Azar. Can you think of any patients like Nancy, who are failing on oral pills. Would Butrans be an appropriate option? Yes, but is it once a day or once a week? I replied its 7 days of buprenorphine delivery. Went over CII, able to call in w refills, how to write, and dont dse beyond 20 mcg/hr due to risk of QT prolongation. He says he will consider. I left him e learning invite for Butrans and Nancy profile. I then told him you also have another option for pain treatment, and that is OxyContin, of which I left savings cards last time. quick mention of Intermezzo. Told him I would follow up next week.
PPLPMDL0020000001	Akron	OH	44312	3/29/2013	Doctor requested partners against pain resources and pain management kit as he wants to start providing to staff and patients. Explained pain management kit, purduehcp.com, and comfort assessment guides. Dr said he was impressed with resources and will use them including the pain cataract. Introduced Butrans as he had no prior knowledge. Discussed all key selling messages including CIII, 7 day transdermal patch, patient profiles, indication and conversion guide. I asked dr if he would use clinically and his thoughts? D said he is excited to have a schedule 3 ER transdermal patch available because using chip vicoden and Percocet is just a necessary evil. He said Butrans gives him another option. Discussed OxyContin dosing and Agilent type. Explained intermezzo indication, limitations of use and dosing.
PPLPMDL0020000001	Westlake	OH	44145	3/29/2013	Placed phone call to speak w/ Janet Harst, I was informed by the receptionist that she is off until 4/3.
PPLPMDL0020000001	Parma	OH	44129	3/29/2013	Dr Roheny said he is sorry that he has not really taken the time to implement the papers that we talked about for pain assessment. I asked why apologize to me for that. He said he feels bad because I have been so good about trying to help him with his practice & patients he treats for pain. Reviewed statistics from communication insight & told him I was trying to help foster better communication with the patients who he treats for pain to make things easier for him & his staff & also improved for his patients. I explained that when he does go to write Butrans &/or OxyContin, I want him to be comfortable with the tools that I can provide for treating those patients & they all start with documentation & pain assessment. He said he will try to start using them. Spoke with Lorraine, Terry, & Kathy about Intermezzo. They said they remember someone being in there before talking about it. Reviewed indication & patient type. Terry said she has seen an ad on TV about it. I let them know patients may ask about it after seeing DTC marketing as well.
PPLPMDL0020000001	Cleveland	OH	44114	3/29/2013	1. Understand Dr. Lehrer's territory 2. Learn about those who report to him 3. Determine need for Pain Initiatives 4. Present Purdue products 5. Present Purdue resources including Pain PACT.
PPLPMDL0020000001	Akron	OH	44319	3/29/2013	I showed dr the Scott profile and asked him what the downside to using Butrans at all for a tramadol failure? Dr said he's not sure but he said he has used it. I asked him if he was pleased on how it performed? Dr said yes. I asked him what is keeping him from using it more? Dr said it is expensive. I told dr to focus on patients like Scott who have private prescription insurance. Dr said ok.
PPLPMDL0020000001	Solon	OH	44139	4/1/2013	Spoke with Michael, pharmacist, & reviewed pharmacy messages for Intermezzo. He said he has heard of it & knew what it was. Reviewed dosing & patient type. Discussed Butrans & OxyContin savings programs. Reviewed eligibility requirements for card usage. He said he is surprised that a CII product can have a savings card. I reminded him that there are patients in legitimate pain & asked why someone like that would not deserve to save on their prescription for medication. He said that was a good point, agreeing that some patients do truly benefit from the pain relief that OxyContin offers.
PPLPMDL0020000001	Solon	OH	44139	4/1/2013	Caught Dr Zaidi at the window- Asked that he give an appropriate patient who he is starting new on OxyContin a Patient Essentials Pack. He just waved & thanked me. Spoke with Julie & asked about the office's awareness of Intermezzo. Julie said she has seen commercials for it but does not believe they have had a rep for it. Reviewed appropriate patient type. I showed her a comfort assessment journal & asked her thoughts on having patients use them is, reviewing statistics from communication insight. She said it might be helpful for some patients. She agreed to give Dr Zaidi Intermezzo packet & Butrans formulary grid.
PPLPMDL0020000001	Solon	OH	44139	4/1/2013	Spoke with Chris, pharmacist, & presented Intermezzo pharmacy information, reviewing 3 key messages. He said he has not seen a prescription in awhile, but they do have it on the shelf. Also discussed savings programs for Butrans & OxyContin. Showed each card & explained usage & eligibility.
PPLPMDL0020000001	Mayfield Heights	OH	44124	4/1/2013	Met with Giovanni, he was way behind, and no time to check stocking. Appreciated OxyContin savings cards I left. also left Butrans patient guide. Quick Intermezzo reminder. left RX PATROL pharmacy flashcard. <font color=blue><b>CHUDAKOB added notes on 04/14/2013</b></font>Jenny, be sure to ask pharmacist if they are on RelayHealth (E voucher program) a=because if they are, they will not need savings cards. The savings will automatically be deducted from the co-pay.
PPLPMDL0020000001	Parma	OH	44129	4/1/2013	Reviewed contents of Butrans Patient Experience Kits & told Dr Gigliotti these are a great way to bolster communication between him & the patients he treats for painful conditions with Butrans. He said he knows he "has to do it". Also showed patient assessment tear-offs & asked if he thinks these would be of use to him for patients who are complaining of some sort of pain, relaying communication insight statistics. He said he thinks they would be great. Dr Gigliotti said he used to have a rep that would come in sometimes to talk about Intermezzo & he even used it a few times. He said he got good success with it. Reviewed managed care grid & dosing & patient type information. He said he will use more.
PPLPMDL0020000001	Solon	OH	44139	4/1/2013	Placed call to Staff Development Coordinator, Gretta Redus, introduced myself and the NE program & briefly touched on educational in-service opportunities. She informed me that her calendar for this month is full, but asked if I could drop off some information on the program for her to discuss w/ the D.O.N. and contact her the end of April to set up something.
PPLPMDL0020000001	Parma	OH	44129	4/1/2013	Caught Dr Kushnar up front while talking to Natalie about Patient Assessment tear-offs. Reminded Dr Kushnar of our previous conversation about the importance of establishing good communication practices with patients who are treated for pain & let her know these tear-offs can be used as a way to facilitate that. She thanked me & walked away. Spoke further with Natalie & discussed Intermezzo indication, dosing, & patient type. She showed me their savings cards & agreed to give Dr Kushnar information regarding dosing instructions.
PPLPMDL0020000001	Parma	OH	44129	4/1/2013	Spoke with Deana, MA, & gave her information for OxyContin & Butrans savings programs. I showed each card & discussed how the patient would use each one. Deana said she knows they have given out the Butrans cards in the past, but she did not remember the OxyContin ones. She said Dr Lin is out of the country until next week, but agreed to give her the information when she returns. Gave her packet of Intermezzo information & discussed indication, dosing, & patient type. Deana said she did not know about it but was glad to have the information.
PPLPMDL0020000001	Twinsburg	OH	44087	4/1/2013	Placed a Follow-up phone call to D.O.N., Shawn McMahon, N/A left msg on his voice-mail.
PPLPMDL0020000001	Parma	OH	44129	4/1/2013	Quick call- Delivered communication insight to Dr Ortega. He said he knows it is important to talk to patients because he has good communication with them. He then said he didn't have anything new to tell me about Butrans & OxyContin & walked back to a room. Spoke with Cindy who said she saw an ad for Intermezzo recently. Reviewed patient type & dosing.
PPLPMDL0020000001	Mayfield Heights	OH	44124	4/1/2013	Met with pharmacist Maria. Lead with Intermezzo. she needed more info, as she wasn't that familiar with product. Also left her dosing card. No time to check stock, but does not have Intermezzo in stock. told we have trial cards for Intermezzo & Butrans & savings cards for all 3 branded products should we want to store in future. Left pharmacy Rx patrol flashcard.
PPLPMDL0020000001	Fairlawn	OH	44333	4/1/2013	Placed phone call to Michelle Williams to re-schedule in-service on Pain Management. I spoke w/ the receptionist, who stated she was not sure if Michelle was in yet. Left msg. on her voice-mail.
PPLPMDL0020000001	Cleveland	OH	44130	4/1/2013	Spoke with pharmacist, Renee' & gave her pharmacy information for Intermezzo. She said she hasn't needed to order that yet, but was aware of the product information. Reviewed 3 key messages. Also discussed Butrans & OxyContin savings. Renee' said she only has one customer who is on Butrans regularly, adding that the momentum for that the momentum for that seems to have decreased. I asked why she thinks that is. She was not sure. Let her know savings for all 3 medications is built into their system through e-voucher. <font color=blue><b>CHUDAKOB's query on 04/14/2013</b></font>Wondering why you didn't ask Renee your next call objective question on this call? <font color=green><b>APSEGAS's response on 04/15/2013</b></font>She was the only one manning the pharmacy at that time, so I wanted to be respectful of her time as well as of the customers who started to form a line behind me. <font color=blue><b>CHUDAKOB added notes on 04/16/2013</b></font>I am thinking that asking her a question would not show disrespect. She will tell you if she doesn't have time. Looks like you got in a good amount of information anyway. Don't make assumptions about how your customers will act. Give it a try!
PPLPMDL0020000001	University Heights	OH	44121	4/1/2013	Started with discontinuation insight # 1. The challenge is managed care companies pushing generic opioids and prior authorizations. I asked Dr Price how he feels about generic opioids? Do they work as well as branded opioids? He said no. I discussed with him which plans and patients to focus on for OxyContin & he stated again, that he uses OxyContin only for cancer patients. I then transitioned to Butrans using Nancy profile. I would like to suggest prior to titrating Vicodin, initiating Butrans at this point, for patient like Nancy. Does this sound reasonable, he replied yes, but is it covered? I showed Dr Price where Butrans is covered and told him workers comp will pay for Butrans. I also reminded him of savings cards, and he said where are they? I opened up cabinet above his desk and showed him where. I also went over Butrans patient guide. I also left Senokot S and dosing tear sheets. I asked if he has any pain contracts in place, he says he uses one from University Hospitals. I told the office staff about Purdue's pain management kit & resources & left hemi orange web key. Discussed Intermezzo next, and Dr Price concern was script/coverage. Reviewed 5 day trial with script & future savings(card) left Intermezzo dosing card. told him I have savings cards on order and will bring him some soon. Told the staff of Dr Price concern with access & prior authorizations, told them to please call me so we can try and resolve any issues together.
PPLPMDL0020000001	Parma	OH	44129	4/1/2013	Quick call- Caught Dr Taylor between patients. Reviewed titration ability after 3 days & ability for patients to use supplemental analgesia with Butrans. Spoke with Mary & asked about usage of the patient assessment guides I gave them last visit. She said she knows Dr Taylor has used them for a few patients & added that she really likes them.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	4/1/2013	Placed a phone call to ADON, Deb Lovette to re-schedule in-service on constipation. According to the receptionist, Linda, she was not in yet. Left msg. w/ the receptionist. (no voice-mail available) Recv'd a phone call from Debbie Lovette to re-schedule in-service on Constipation. Scheduled for Friday May 10th @ 2PM. I talked with Debbie on arranging a time to meet w/ their NP's. She said that they have only one NP, Charlene Sondra 330-926-9409 who is there on Mondays & Thursdays, she works with Dr. Rubin who sees the majority of their residents and Dr. Wagner sees the remaining residents. I placed a call to Charlene Sondra, NP, I was informed that she only stops in the office Q 2 weeks to pick up her paycheck. I was also told that her father past away on Saturday, so she probably is not working today. I was given her cell # 440-715-5291. I also confirmed their pharmacy consultant w/ Absolute Pharmacy, but Debbie was unsure of his/her name. she gave me their phone # - 800-858-7393. She said they come in just to change out the med carts. Placed a call to Absolute Pharmacy, to speak w/ the pharmacy consultant for the facility. I spoke w/ Becky Sommers who is in charge of the consultants. Tracy Penrose is the consultant for this facility. Becky asked for a copy of my unbranded presentations to review and approve for the facilities that they service. I will confirm w/ Joe Hennessy before sending. Future in-services schedule w/ the D.O.N. Deb Bouslough.
PPLPMDL0020000001	Mayfield Hts	OH	44124	4/1/2013	Originally stopped in to see if Dr Yoel Anouchi still practices there, he does NOT. Met with Chris, introduced myself & my products. Let her kniw I have paient education, resources & savings cards for all branded prducts. Asked if they schedule in service meal appointments, thy do not. left sliding doser, weekdays leave behind for Butrans and FPI. Chris says Dr Fumich will contact me if he'd like more information, resources, or savings cards fr patients. <font color=blue><b>CHUDAKOB's query on 04/12/2013</b></font>Remember that Butrans does not have a post op indication. Does this physician treat chronic pain? What are your thoughts on discussions around OxyContin with this physician? <font color=green><b>BALLIE's response on 04/13/2013</b></font>Thank you for reminding me that Butrans does not have indication for post op pain. This call was more of an "I'm in the building, I wanted to stop by & introduce myself. I'm leaving my business card & information, and please call if I can be of help to you." After looking through this doctors sales data, I saw that he had written just a few OxyContin, so he's not on my Top 20 or even Top 50 list. do agree OxyContin would be more appropriate presentation/ q12 hr dosing, 7 doses available. <font color=blue><b>CHUDAKOB added notes on 04/14/2013</b></font>Ok. Thanks. Make sure you are focusing on your cores first and foremost.

PPLPMDL0020000001	Parma Heights	OH	44130	4/1/2013	Placed a follow-up phone to D.O.N., Katherine Myers 440-888-5900 to set up appt. to discuss educational opportunities and schedule in-service. Spoke w/ Katherine, she apologized for not getting back w/ me, but said she has been really busy. She did voice interest in the NE program and stated that she does have my BC and she will call me when things settle down. It was agreed upon that I will check with her in June, unless she contacts me
PPLPMDL0020000001	Lyndhurst	OH	44124	4/1/2013	Placed a phone call to speak w/ Linda Dabney. I spoke w/ Diana in Staff Development, who informed me that Linda Dabney no longer works there and she is now in charge of the education. Diana stated, "I am in the middle of orientation and I will call you back, more likely tomorrow." I left her w/ my contact information.
PPLPMDL0020000001	Mayfield Heights	OH	44124	4/1/2013	Christy said she proactively mentioned Intermezzo as option for MOTN, and suggested they speak with their HCP about Intermezzo. Appreciated patient savings for OxyContin, happy to have savings cards. Left RX patrol flashcard.<font color=blue><b>CHUDAKOB's query on 04/14/2013</b></font>Jenny, this is a reminder that Rite Aid corporate has asked us NOT to leave savings cards in their pharmacies, even if they ask for them.<font color=green><b>BALLE's response on 04/15/2013</b></font>Thanks Barry, my mistake. I forgot about the Rite Aid request that Purdue reps NOT leave savings cards. Thank you for reminding me, as I do not want to negatively impact Purdue's working relationship with Rite Aid, in any way.<font color=blue><b>CHUDAKOB added notes on 04/16/2013</b></font>I know you don't. Thanks Jenny!
PPLPMDL0020000001	Mayfield Heights	OH	44124	4/1/2013	Originally there 11 to 11:55 am, I didn't come out to meet me yet, so I told Jody (reception) had to leave 2 added lunch for 12 n appointment, and I will come back after lunch. Asked about scheduling lunches, they are not allowed to have rep in service meals per CC foundation policy. She also said the doctors normally do not talk with reps. asked to see Dr Dewes, she's not in today. Asked who is in, she replied just Dr Yap. Also spoke with Katie. Since I'm new, asked Jody if I could meet Dr Yap and if he had just a few minutes for me. While I was in waiting room in the am, dr Yap female patient saw Senokot S in my bag. she said I love Senokot and "I lived on that for a while" she's had 4 spinal surgeries and her spine is fused. She went for 14 weeks without a bowel movement & it's very painful. She was happy to find relief over the course of her therapy with Senokot S. after outnudging myself, shared our increased savings & savings cards for his OxyContin patients. I told Dr Yap about this conversation, and told him I left samples & dosing tear sheets. I also left Dr Yap a Butrans dosing slider, demo patch. Read his body language and knew no more time.
PPLPMDL0020000001	Cleveland	OH	44127	4/2/2013	Intro. Discussed proper Butrans patient selection, dosing
PPLPMDL0020000001	Richmond Heights	OH	44143	4/2/2013	Met with staff as Dr Ashraf could not come to the front. Left Nancy patient profile & Tips for overcoming Challenges in Communicating with your Patients about Pain orange brochure. Asked for Dr Krishnan or Melissa, they were not there.
PPLPMDL0020000001	Euclid	OH	44117	4/2/2013	Four In-Services completed @ 7am, 2:30, 3:00 & 3:30 on Pain Management for the Nursing staff. 27 were in attendance. The Patient Comfort Assessment Guide and The Wong-Baker Pain Scale was handed out and reviewed with the staff. A discussion took place on the barriers that interfere with pain assessment/treatment in the elderly and consequences of unrelieved pain.
PPLPMDL0020000001	Cleveland	OH	44103	4/2/2013	Intro. Discussed Butrans utilization, OxyContin & Intermezzo. OxyContin savings cards
PPLPMDL0020000001	Lakewood	OH	44107	4/2/2013	Spoke with dr quickly while I was booking lunch introducing myself and Butrans OxyContin and Intermezzo. Scheduled lunches and got office hours.
PPLPMDL0020000001	Mayfield Hts	OH	44124	4/2/2013	Dr Laham called me in am and asked if I was in area, as the office just ran out of patient guides. He says they have been very helpful & save them time when counseling patients on Butrans. He is at their Mayfield location today. Told him I would stop by after lunch. Brought patient guides in and scheduled meeting with Dr Laham for Monday at 12:30. Reminder workers comp pays for Butrans.
PPLPMDL0020000001	Lakewood	OH	44107	4/2/2013	Spoke with Anna the pharm tech and the pharmacist and asked them about their volume of OxyContin Butrans and Intermezzo. They said they are a low volume store and they do not have anyone on OxyContin and they had 1 patient on Butrans but no longer have Butrans patients. Intermezzo is in stock but they said they switch patients because insurance will not cover. I explained that if there are a lot of Medicaid patients then Intermezzo is \$3.00 copy. She said she did not know that. I asked her not to switch these patients because there is no ab equal and the dosing time is different and patients may get confused. I asked her to let patients know the copy and let them know savings cards r available online.
PPLPMDL0020000001	Cleveland	OH	44106	4/2/2013	MSL meeting with Dr. David Speicher; Dr. Eduardo Rodenas joined by telephone. Discussed OTR3001 pre-screening efforts, patient population, and pediatric pain management practice in the institution. Dr. Speicher agreed to contact pediatric palliative care physician to discuss OTR.
PPLPMDL0020000001	Cleveland	OH	44106	4/2/2013	Intro. To dr. discussed office protocol
PPLPMDL0020000001	Lakewood	OH	44107	4/2/2013	In between patients dr came out while I was in the waiting room and I was not able to engage him but he sent amber to schedule a lunch for April 30 and let me know that he is having problems with patients being discharged from the hospital on OxyContin not being able to get it with their insurance. I asked what type of insurance and she said these are Medicare patients and Medicaid patients cannot get OxyContin either. I told her I will discuss this with him at lunch and make a visit to Lakewood hospital across the street to make sure I have the right information but OxyContin has good coverage on Medicare so he should not be having this problem.
PPLPMDL0020000001	LAKEWOOD	OH	44107	4/2/2013	Gave indication and limitation of use for Intz to Johan the floating pharmacy manager, because manager was on vacation. Also spoke with Cecelia the pharm tech. I explained that in the Lakewood area the prescribers of OxyContin say they cannot get OxyContin approved for their Medicare patients and I wanted to know if the pharmacy has seen any changes from insurance companies. Johan said that he has not done a prior authorization for OxyContin in a long time and he has not seen changes.
PPLPMDL0020000001	Cleveland	OH	44143	4/2/2013	Brief mention of Butrans at window to Dr Mandel. They are running 3 hours behind. Left Dr Mandel orange booklet on communicating with patients/pain mgt. Asked to speak with nurse or MA. Angela tried to break away, and came up & said hello, and apologized that she just didn't have time today. Told them I would stop back.
PPLPMDL0020000001	Lakewood	OH	44107	4/2/2013	Quick introduction to dr and explained that I was his new rep here to help his patients like Scott in pain failing on tramadol and providing an option before Percocet. I asked dr his thoughts on treating these patients with butrans and I could not understand his reply. I introduced Intermezzo giving indication and limitation of use. Dr was behind from hospital calls so he ad to get back to patients.
PPLPMDL0020000001	Lakewood	OH	44107	4/2/2013	Asked dr what can he tell me about his OxyContin patients and he said the coverage is now bad. I asked him what plans and he said workers comp and Medicare. I explained that he was correct about workers comp but OxyContin actually has good coverage for Medicare patients. He said that is not what he is seeing. I told him I will get information on the specific plans from Shannon but is the anything else that would stop him from writing OxyContin? Dr said what is the benefit to writing OxyContin which is more expensive verses writing a short acting 4 times a day. I explained that oxycodone is the same but if price is not an issue which would he recommend. The doctor smiled and laughed. I asked the dr if he would let me get to the bottom of this with Shannon and we can continue our conversation. Shannon was with patients. Gave brief introduction of butrans showing patient profile and gave indication and limitation of use and indication for Intermezzo.
PPLPMDL0020000001	Parma	OH	44134	4/3/2013	Dr Hernandez said he couldn't spend much time talking today. He added that he has been using Butrans frequently & that it "almost sells itself" because it is so effective. He said his patients just love it. He said he does still have some patients on OxyContin & will use it when the case warrants it. Discussed Intermezzo indication with Val. He said Dr Hernandez doesn't really treat sleep problems.
PPLPMDL0020000001	cuyahoga falls	OH	44223	4/3/2013	Led with insight and asked dr if he has had any struggles in communicating with his patients even though he is a new physician? Dr said he does have it and feels that patients have a hard time discussing things with their doctor and he feels like he needs to get better asking questions. I told dr about partners against pain resources and reviewed the website information and how it may help. I also discussed how he can use the patient brochures for his EMR system and print them off. Discussed Butrans patient information guide. Dr said he had a great candidate for Butrans who had been taking 20mg of Percocet a day but was cash pay and could not afford Butrans. I told dr thanks for thinking of Butrans and explained both Scott and nancy as ideal candidates for Butrans. Reviewed appropriate starting dose and titration to the 20mcg dose. Dr said he will continue looking. Discussed with staff and Steve a new lnp about Butrans. Explained appropriate patients and copay cards. Discussed with dr the OxyContin dosing and introduced intermezzo for first time explaining the indication, limitations
PPLPMDL0020000001	Macedonia	OH	44056	4/3/2013	Reviewed Butrans dosing, appropriate patient type/range, & once weekly transdermal CII medication. Positioned Butrans for appropriate patients who are going from taking short-acting opioids PRN to daily, asking why not get them on something long-acting at that point. She said that made sense. Reviewed managed care coverage & savings program. Discussed OxyContin as a q12h dose of oxycodone & reviewed 7 tablet strengths. Also introduced Intermezzo & went over dosing, patient type, delivery system, & limitations of use.
PPLPMDL0020000001	Macedonia	OH	44056	4/3/2013	Dr Pai said he has really been frustrated with pain management lately. He said he does not like that when he refers out, the pain management specialists just send patients back to them to manage medications. I asked what he does when that happens. He said he has just stopped referring to those physicians, but he is torn because most of them are within the physician group he belongs to. Positioned OxyContin for appropriate patients who have legitimate pain & who he is comfortable treating, who are taking Percocet daily. He said that is not very many of his patients. I told him that even one patient would be a start, asking what clinical benefit keeping them on short-acting oxycodone carries if they have a chronic condition. Positioned Butrans for appropriate patients who need to go from taking their short-acting opioid medication PRN to daily. Dr Pai said that made a lot of sense. Reviewed CIII & once weekly transdermal dosing. Reviewed managed care coverage & trial/savings program. I asked if he thought he could find one patient like this to try & he said he would. Reviewed Intermezzo indication & patient type. Also discussed limitations of use. He said one patient had asked about it, but she had been somehow confused about what it actually was & ended up not needing it.
PPLPMDL0020000001	Parma	OH	44134	4/3/2013	I rec'd an e-mail from Linda Belford from Staff Development, she spoke with the NP's and said that Tuesdays & Thursdays would be best to set up a time (lunch) to meet w/ them and present branded information on Butrans, Intermezzo & cocytin. I e-mailed Linda back asking if the D.O.N., Reta and herself would also be attending and for some dates as well.
PPLPMDL0020000001	Westlake	OH	44145	4/3/2013	Spoke with Laura and she explained that the calendar is full for the year and she put me on the cancellation list. The office was in need of vouchers.
PPLPMDL0020000001	Westlake	OH	44145	4/3/2013	As I was scheduling lunch with Sam, the dr came by the window and I introduced myself. Dr did not reply and I continued to schedule breakfast as he walked away. Office was in need of vouchers.
PPLPMDL0020000001	Lyndhurst	OH	44124	4/3/2013	Stopped in- to meet w/ Diana in Staff Development, I was informed that she was teaching an orientation class and was not available, I left my BC and PAP handouts.
PPLPMDL0020000001	Munroe Falls	OH	44262	4/3/2013	Reminded dr of program on 4/11 and asked her to attend. Dr said she is considering it but has to look at her schedule for next week first. Doctor asked me to come back and remind her next week. I asked her to identify patients that are uncontrolled on tramadol and vicoden. Left her w/ the cause studies and reviewed the intermezzo indication and dosing. Dr said she has a couple of patients for intermezzo.
PPLPMDL0020000001	Cleveland	OH	44113	4/3/2013	Discussed utilization and where he and especially Deb like to position Butrans (reinforced After Tramadol before around the clock Short acting ) Scott profile. Practice has a new CNP Rhonda Casey and will be opening up St.V's office on Thursday located next to wound clinic on the 1st floor
PPLPMDL0020000001	Akron	OH	44309	4/3/2013	1. Try to gain contact for ACO follow up 2. Uncover how Pharma and ACOs can partner for Pain Management resources
PPLPMDL0020000001	Parma	OH	44129	4/3/2013	Elaine said she was behind as she was still just returning from a few weeks off. Reviewed Butrans patient type & managed care. Also introduced Intermezzo with indication & patient type. She asked me to leave additional information about Intermezzo with Dawn & added that she was interested in it. Spoke with Dawn & gave her managed care information for Intermezzo.
PPLPMDL0020000001	Bedford	OH	44146	4/3/2013	Spoke with floater pharmacist & introduced Intermezzo, using pharmacy sell booklet. Reviewed 3 key messages. She said she has heard of it, but has never dispensed it. Also reviewed savings opportunities for Butrans & OxyContin & let her know that savings for all 3 medications are built into their e-voucher system on the computer.
PPLPMDL0020000001	Stow	OH	44224	4/3/2013	Spoke to Sara about Intermezzo explaining the indication, limitations of use and dosing specifics. She said they have not filled it to her knowledge and do not stock it. I reviewed the Butrans dosing, appropriate starting dose, titration and copay cards. She said they have seen prescriptions from Summit Pain for Butrans and do not see many OxyContin either. I asked if they fill any new and she said not many and that most are refills.
PPLPMDL0020000001	Akron	OH	44312	4/3/2013	Caught dr as she was headed out for the day. I asked her to identify private prescription patients uncontrolled on tramadol. Handed her the initiation and titration guide.
PPLPMDL0020000001	Bedford	OH	44146	4/3/2013	Showed Dr Moufawad the formulary grid for Butrans, pointing out that he can write Butrans on more plans than just BWC. Showed him how Butrans is well-covered on commercial insurance plans, many at tier 2 & reviewed trial/savings cards for eligible patients. Dr Moufawad kept the grid & said he sees that he can write it in other places, but he just really likes using it in his BWC population. He said he is really honing his skills in using Butrans. He said he discusses titration up front & lets patients know up front also that 20mcg is the maximum dose that would be allowed & if that doesn't work, they will be referred elsewhere as that is his limit on what he is willing to prescribe. Dr Moufawad said he does still write OxyContin though & has patients who do well on it. Gave Intermezzo grid in the event that one of his patients ask for it.
PPLPMDL0020000001	Cleveland	OH	44113	4/3/2013	Discussed Butrans experience, says she continues to have success with her new starts.Starts all her patients on 10Mcg/hr, doesn't have any opioid naive patients, will titrate up to get appropriate analgesic effect. Briefly discussed Scott profile



PPLPMDL0020000001	Akron	OH	44320	4/3/2013	Spoke to dr Adams and dr Bonyo about where Butrans fits in with the office policy regarding treating pain. Dr Adams said she wishes she did not treat any pain because of the frustration and deceit from her patients regarding their medicines. I explained partners against pain resources and how they might help. Dr Adams said the office does do OOHRS reports and drug screening but beaded on the doctor discretion. Dr said she likes the website I reviewed and may find it useful. Dr Adams said she does have a handful of patients she believes are good candidates for Butrans but needs to see if insurance will pay for it. Discussed coverage specific to the office prescription plans. Explained Caresource coverage and PA criteria. Dr Adams wants conversion scales and formulary grids in each exam room.
PPLPMDL0020000001	Akron	OH	44320	4/3/2013	Good discussion with doctor Bonyo and Adams about how Butrans can fit in with the office policy in treating pain. Dr Bonyo said he honestly does not want to treat pain because it is too troublesome and frustrating. Doctor Bonyo said that he has been lied to many many times and realizes that patients abuse the medicine or sell it. I asked dr if he believes Butrans has a place in his office? Dr said he thinks it does because it is a patch instead of a pill, it is controlled release, and patients can use IR medicines for breakthrough pain. Doctor Bonyo said cost is the issue. I explained first the patient candidates for Butrans. Explained that Butrans is a CIII, 7 day transdermal system and discussed the conversion guide. I reviewed their commercial plans and where Butrans falls including Caresource. Dr was skeptical about Caresource. I asked him to try it on a Caresource patient who meets the PA criteria that I explained. Dr said he wants conversion guides and formulary grids in each of his exam rooms.
PPLPMDL0020000001	Akron	OH	44308	4/3/2013	1. Determine how RFP for Medicaid has changed their business. 2. Determine any new initiatives for CMs. 3. Understand how Buckeye will pursue Demonstration Project & HealthExchanges 4. Discuss utilization of Purdue products. 5. Present new Purdue resources & discuss National Program initiative with Centene.
PPLPMDL0020000001	Cleveland	OH	44105	4/3/2013	Intro.intermezzo 5 day trial, first and only prescription sleep aid approved for dosing as needed for middle of the night awakenings. OxyContin savings cards
PPLPMDL0020000001	BEDFORD	OH	44146	4/3/2013	Spoke with Shonda (pharmacist) & introduced Intermezzo. Reviewed key messages. She said she had seen an article or ad about it but has not dispensed it. Reviewed patient type & limitations of use. Gave information on Butrans & OxyContin savings cards & let her know all 3 medications offer automatic savings through e-voucher.
PPLPMDL0020000001	Westlake	OH	44145	4/3/2013	Dr said I don't need to sell him on Butrans because he likes it and I asked him what he likes and he said it works. I asked him if the Scott patient profile was correct and he said he can switch most patients to Butrans and have success. He likes that patients are not thinking about the pill and the pain for 7 days. He said the most difficult thing is insurance and I reminded him of workers comp and most commercial insurance plans. He said he wants me to stop by the pharmacy and get butrans on formulary for pain management use. He said this will be helpful. He described a patient that showed how Butrans worked for him by drawing it on a napkin and I showed him the pk chart and he said yes it looked just like that. He asked to be a speaker because he said he could teach doctors how to use Butrans and which patients are candidates.
PPLPMDL0020000001	Mayfield Heights	OH	44124	4/3/2013	Made a drop-in visit to speak w/ Staff Development Coord., MaryAnne. Spoke w/receptionist, Theresa who stated, "MaryAnne is in morning meeting." Joan said, "along with your business card, I will give MaryAnne a msg that you stopped by."
PPLPMDL0020000001	Westlake	OH	44145	4/3/2013	Spoke with Wendy the pharmacist and jacqui the pharm tech. Wendy floats between here and medina. Asked about large opioid prescribers and they mentioned Duncan and kabarra here and kareti in medina. One Intermezzo patient and 1 Butrans patient. Asked if the is anything she thinks doctors should know about Butrans and she said savings cards. I explained that switching patients from Intermezzo will confuse patients who are instructed by their dr to take Intermezzo in th middle of the night and there is no ab equl. She mentioned that insurance is a problem and I mentioned Medco and caresource. Caresource copay is \$3
PPLPMDL0020000001	Akron	OH	44320	4/3/2013	Discussed intermezzo indication, limitations of use and dosing specifics. Spoke to Helene and Natasha about dr Machado telling me that patients he is sending to get Butrans can't get the patient savings. I discussed Butrans and the copy cards and patients eligible. Natasha said They have patient savings but don't use Relay Health. She wanted copy cards so they can use them for backup. Natasha said they just got a prescription from Bonyo today who had Medco part D and there was a PA and are waiting for it. Dr said they see patients from Machado, goswami, amatabu, and a few doctors in Fairlawn.
PPLPMDL0020000001	Stow	OH	44224	4/4/2013	Introduced Butrans and intermezzo to Kristen for the first time. I reviewed all key selling messages for Butrans including a review of the Scott profile. Kristen said she likes that it is a CIII and is good for 7 days. I asked her if there is an opportunity for her to use it. She said probably and asked about cost. I reviewed commercial plans and Caresource PA. Kristen said she will look into using it. Explained intermezzo indication, limitations of use
PPLPMDL0020000001	Parma	OH	44129	4/4/2013	Quick call- reviewed Butrans appropriate patient type & asked Dr Chagin to try Butrans for one appropriate patient who is going from taking short-acting opioid medications PRN to daily, reminding him Butrans is a once weekly CIII opioid medication. He said he would try it & then went into a room. Spoke with Debbie & reviewed managed care & savings information for OxyContin. She said he does not have near as many patients on it now as he used to, adding that they refer a lot more now. Also reviewed Intermezzo indication, patient type, & dosing.
PPLPMDL0020000001	Mayfield Hts	OH	44124	4/4/2013	Discussed Q 12 dosing with OxyContin & 7 doses available for titration. Dr Kim says he has never had problem getting OxyContin covered. then used Scott patient profile to reinforce appropriate patient selection for Butrans. Left him to write & dose, patient guide. asked me to leave savings cards, went over savings cards/trial/ patient guides & formulary coverage with his nurse Marina. Left Dr Kim invite to May 8 speaker program, and also left invite for PA, Sarah J. Dr Kim committed to initiating Butrans for patients like Scott.
PPLPMDL0020000001	Middleburg Heights	OH	44130	4/4/2013	Dr Vollweiler said she did not remember Butrans. Reviewed indication, dosing, titration, & ability for patients to take supplemental analgesia. Also discussed appropriate patient type/range & reviewed initiation/titration guide & went over table showing range of patients. Dr Vollweiler said this is something she can use as she has not had a long-acting opioid for this patient type before. She asked if you could give Butrans to a patient who takes only one Vicodin per day. I showed her range of patients again & told her Butrans can be used in patients who are opioid naive as well as those taking up to 80mg oral morphine equivalent per day. Discussed managed care & savings. Also discussed OxyContin 7 tablet strengths, q12h dosing, & managed care/savings. Reviewed eligibility requirements for card usage. Introduced Intermezzo & gave packet of information, letting her know
PPLPMDL0020000001	Middleburg Heights	OH	44130	4/4/2013	Dr Warren said he finds that some of the managed care companies stopped covering OxyContin Jan 1st. Showed him current managed care grids & discussed savings. He said it is impossible to keep straight who will pay for what & it is frustrating for the insurance companies to keep changing what is on formulary. I agreed that this can be challenging & asked if he pays attention to what plan a patient has prior to writing prescriptions. He said he does not, adding that he writes what he wants the patient to have, but then will sometimes have to change it depending on what the insurance says. He said OxyContin is generally covered OK so he will keep using it. Re-introduced Butrans & reviewed dosing, indication, & CIII. Also gave him initiation/titration guide & spent time discussing appropriate patient type. Dr Warren said he would try Butrans on some patients who he thinks would be good candidates. Reviewed managed care & savings. Introduced Intermezzo & reviewed indication, dosing, & delivery system. Also discussed limitations of use. He asked about insurance. Showed grid & discussed available savings. He said the information was good to have in case someone asked him about it.
PPLPMDL0020000001	Middleburg Heights	OH	44130	4/4/2013	Introduced myself & Purdue's product to Dr Zhu. Reviewed 7 tablet strengths of OxyContin for individualization of dose & q12h dosing. Also discussed managed care & savings program. Dr Zhu said he had heard of Butrans but did not remember about it. Reviewed indication, dosing, titration, & ability to use supplemental analgesia. Spent time over appropriate patient type. Discussed Butrans as the only once weekly CIII opioid analgesic. Dr Zhu said he thinks Butrans is something he could use as it fits a place where there normally was not a variety of options. Discussed managed care & trial/savings cards. He said he would try it on a few patients & would see how it works. Introduced Intermezzo & gave packet of information. Reviewed indication.
PPLPMDL0020000001	Westlake	OH	44145	4/4/2013	Dr said he is not prescribing new OxyContin and I asked him what doses of OxyContin he currently prescribes, showing the detail piece and he pointed to the 15 30 and 40. I asked him what doses of oxycodone ir and Percocet he prescribes, using the visual aid and he asked me what I meant. I explained that he currently uses oxycodone and the patients I wanted him to consider for OxyContin are the patients he already prescribes OxyCodone and they may want a different dosing regiment. Dr agreed that I am not looking for new starts but patients already on round the clock oxycodone. Shared butrans indication and abuse potential. Dr said he was familiar with Intermezzo and I asked him if he would consider his next ambien patient needing a refill if he has they have trouble getting asleep or staying asleep and if so then this may be an appropriate patient for intermezzo.<font color=blue><b>CHUDAKOB's query on 04/10/2013</b></font>Marcia, is a patient that has a hard time getting to sleep an Intermezzo patient? That is what is looks like you put in your call note.<font color=green><b>KENNOMA's response on 04/10/2013</b></font>The question I want the doctor to ask is if the patient has problems staying asleep. That patient may be an appropriate Intermezzo patient.<font color=blue><b>CHUDAKOB added notes on 04/10/2013</b></font>Thank you! I agree with that. Be cognizant of what you write in your call notes.
PPLPMDL0020000001	Akron	OH	44305	4/4/2013	Discussed intermezzo with pharmacist and the technician Tracy. Discussed indication, limitations of use and dosing specifics. Explained Butrans dosing, CIII, 7 day transdermal system. I used the Scott profile to explain appropriate patients. Showed the OxyContin Sam profile to discuss OxyContin patient types and dosing.
PPLPMDL0020000001	Independence	OH	44131	4/4/2013	Quick call- Positioned Butrans for appropriate patients who are going from taking short-acting opioids PRN to taking it daily, as a once weekly transdermal CIII. Positioned OxyContin for appropriate patients who may benefit from q12h dosing of oxycodone. Gave Intermezzo indication & reviewed indication. Left dosing information with Terri.
PPLPMDL0020000001	Stow	OH	44224	4/4/2013	I told dr that Butrans demands a specific patient type with as pacific formulary. I explained to dr that Butrans is covered on 2 of his top three plans. Medco and medical mutual are tier 2 and explained potential costs a patient will pay. I explained thescott profile again and asked him if he has patients that fit a similar profile that complain of being in pain? Dr said he's is sure he does and said he will prescribe but it will take time. Imaskedmf he will use it? Dr said yes. I reviewed the intermezzo indication and asked him to identify patients.
PPLPMDL0020000001	Cleveland	OH	44124	4/4/2013	First met with nurse Terry, and asked for office manager, Rinatta, met with Rinatta. she has worked for Dr C for 8 years, pain clinic only on Wed 9 to 5 and ask for his nurse Gail. they close at lunch from 12 to 1. laurel in Mon all day Thurs am. He does not schedule any appointments or in service meals.
PPLPMDL0020000001	Westlake	OH	44145	4/4/2013	Quich call. Spoke with vikki and gave her the vouchers she requested and discussed the steps I have taken to get butrans on the formulary for pain management. Discussed Scott and tramadol patient and she said there are more than just tramadol patients who could benefit from Butrans. Asked her if she would provide that information for me on Monday at our lunch.
PPLPMDL0020000001	Euclid	OH	44132	4/4/2013	Detailed both Tim & Anna on Intermezzo, they had heard of Intermezzo but knew nothing about product. Spoke with Tom & Anna about utilization of my products in building. Low volume pharmacy. No Intermezzo in stock, but had dispensed previously for one patient. a few OxyContin patients from Dr Casselberry & a few others. No Butrans utilization currently.
PPLPMDL0020000001	Parma	OH	44129	4/4/2013	Quick call- Myra said she is still writing Butrans & has recently been getting good results. She said she also wrote Intermezzo but was unsure if the prescription went through. Reviewed managed care. Spoke with Dawn to ensure she understood managed care & gave Intermezzo grids for each staff member. Dawn said the Intermezzo script did go through & was an "easy" prior authorization for a Medical Mutual patient. Dawn said she thinks that is a medication that both practitioners will end up using & added that Butrans has been going well also.
PPLPMDL0020000001	Akron	OH	44310	4/4/2013	Good discussion with doctor about why he has not used Butrans. I asked dr if he likes prescribing vicoden? Dr said no and that he hates it. Dr reminded me that he will not prescribe any CII narcotic and not many of the ER products. I reminded dr that Butrans is a CIII medication. Dr said he forgot that it is a CIII. I reviewed the Scott profile and asked him if it makes sense to use Butrans before moving to vicoden? Dr said it does and he sees how it could benefit the patient by providing 7 days of burpernorphine. Dr asked about coverage. I reviewed the matrix and discussed the Caresource PA. Dr said he forgot about Caresource and likes that. Dr agreed to try I asked dr if she has had the time to review or use any of the resources in the pain management kit? Dr said no she has not but agreed that she will. I reviewed the Sam profile with her and asked her if it makes sense? Dr said it does and said she will remember to move patients to OxyContin. Gave quick review of Scott and intermezzo dosing. Nothing else learned.
PPLPMDL0020000001	Lyndhurst	OH	44124	4/4/2013	Dr Isakov is adamant about sending the majority of patients to pain mgt. he called to his nursing staff, to confirm what he was saying on the rare occasions he does have a chance to treat pain patients, I suggested initiating Butrans. Left May 8 program invite. he checked his schedule & put in his day planner, he says he is attending. Also left invite for Sarah J. PA.
PPLPMDL0020000001	Parma	OH	44129	4/4/2013	Quick call- Gave Dr Kalin additional Butrans savings cards per his request. He said he is going to keep some at Parma & take a few to his other office where he is a few times per month. He said he is getting more & more comfortable with Butrans & is getting good results now, especially because he understands it a bit more. Spoke with Jocelyn & reviewed Intermezzo dosing & patient type. She said she has heard of it.
PPLPMDL0020000001	Westlake	OH	44145	4/4/2013	Made a drop-in visit to meet w/ Janet Harst, spoke w/ Sue who was filling in for the receptionist, Sue said, "Janet Harst is the Administrator, I'm not sure who handles education, but I will start by having you talk with our ADON, Brenda Amburgey." Sue tried calling Brenda's office, N/A. I left my BC and PAP handouts
PPLPMDL0020000001	Westlake	OH	44145	4/4/2013	Made a drop-in visit to meet w/ the D.O.N., Ovilsi Pilblad to introduce the NE program and discuss educational in-service opportunities. I spoke w/ the receptionist, MarieAnne, who said, " Ovilsi is in a "QA" meeting." I left my BC and PAP handouts. I also met w/ the STNA educator, Patty O'Shea, to get feedback from the in-service that I completed on 3/27. Patty stated, "It was great, they all learned a lot and I even learned a few things myself that I didn't know." She said her next class will start the third or fourth week in June. She asked me to contact her the second week of June to schedule another in-service on Pain-Management.

PPLPMDL0020000001	Westlake	OH	44145	4/4/2013	Stopped by to meet w/ D.O.N., Susan William to talk w/ her about scheduling an in-service on pain management. I spoke w/ the receptionist Debbie who paged Susan, she answered and said that she was "tied up" w/ a family, but that she would call me. I left my BC.
PPLPMDL0020000001	Cleveland	OH	44115	4/4/2013	Intro. Obtained hospital policies/credentialing Rep-Trax
PPLPMDL0020000001	Fairlawn	OH	44333	4/4/2013	Placed phone call to Michelle Williams to re-schedule in-service on Pain Management. Left msg. on her voice-mail.
PPLPMDL0020000001	Stow	OH	44224	4/4/2013	Gave introduction of intermezzo to Steve the technician. Explained the indication, limitations of use and dosing specifics. He said he has not seen any filled. Explained Butrans dosing, indication, appropriate starting dose and titration. Steve said they have the Smcg in stock but is coming due for expiration. I asked him about OxyContin and if they are filling any new prescriptions? He said he is not sure but the do fill it.
PPLPMDL0020000001	Euclid	OH	44117	4/4/2013	Got all info for practice hours at both Euclid & Painesville locations for Dr and his wife Dt Patel, MD. Left may 8 program invite for Dr Patel & conversion titration slim jim for Dr M Patel. asked to speak with office coordinator Marcy Owens. she did come up, introduced myself & products. She says dr Patel tried Butrans a few times, and had issues, but did not expand. he is interested in hearing any further info on Butrans.
PPLPMDL0020000001	Westlake	OH	44145	4/4/2013	Spoke with amber, a pharmacist in the hospital and she gave rachanna Patel, the pharmacy clinical manager, the butrans titration guide, my card and she wrote her a note stating the dr kabarra would like butrans on the hospital formulary for pain management use. She said I should email her and I explained I will send her our appointment template requesting an appointment but I need amber to let her know the purpose of my appointment is to discuss dr kabarra's formulary request because I will not be able to specifically state this in my email.
PPLPMDL0020000001	Lakewood	OH	44107	4/4/2013	Spoke with Cindy and told her I was the new rep in the area and I had some questions about insurance. I explained that dr Orra said he is having problems getting OxyContin approved for his Medicare patients. Cindy said there have not been any problems but sometimes people only hear that they cannot get their prescription without listening to the reason. She said some of the reason maybe that they are trying to get script filled early, over a quantity limit or other reasons and they leave and tell the doctor their script was denied. I asked her about Butrans and she said this is a problematic drug for approval because the first month is free and after that patients sometimes cannot afford the copay even with the savings card. She said make sure I explain to the doctor the patient should ask how much Butrans will cost after the savings card is applied. She said intermezzo is difficult to get covered. I explained that the Medicaid patient with a prior authorization and a failure of ambien will pay \$3. She said her best hours are after lunch
PPLPMDL0020000001	Akron	OH	44312	4/4/2013	Spoke to Chris the pharmacist about all products. I explained intermezzo indication, limitations of use and dosing specifics. Chris said that they just got a intermezzo yesterday and that there was a PA for it. I asked if it went through and he said yes but didn't remember the plan. I discussed Butrans dosing, CIII, 7 day transdermal patch and appropriate starting dose. Chris asked what is recommended to use if patch begins to peel off? I told him that first aid on the corners or tagadem is recommended. Chris said they fill a lot of OxyContin but most are refills. They have some new starts and they mostly come from pain management.
PPLPMDL0020000001	Cleveland	OH	44114	4/4/2013	Intro. Busy
PPLPMDL0020000001	Parma	OH	44134	4/4/2013	Spoke with Lilly & gave Intermezzo pharmacy information booklet. Reviewed 3 key messages & went over limitations of use, patient type, & dosing. She said she has not dispensed any but agreed to order it if someone brings in a prescription. Gave information self sheets on Butrans & OxyContin savings cards & let her know that monthly savings for all 3 medications is built in with the e-voucher.
PPLPMDL0020000001	Parma	OH	44129	4/4/2013	Spoke with Nicole, pharmacy technician, & introduced intermezzo, giving her pharmacy information booklet. She said she just saw an ad for it recently, so she remembered what it was. Reviewed dosing, patient type, & limitations of use. Also discussed Butrans, OxyContin, & intermezzo savings opportunities being available automatically at Giant Eagle with e-voucher system. She agreed to give the information to the pharmacists when they spoke with crystal who had a problem with OxyContin and we found out it was a Humana Medicaid d patient and there is no formulary coverage. She said she was able to get it approved but it took some time. Spoke with dr about his use of butrans and he said it was difficult to get approved. I explained that I just spoke with Cindy the cvs pharmacist and she explained that patients should ask what their copay will be after the free trial and using the savings card. I reminded him that he should think of the working patient with insurance or the workers comp patient. He has not tried intermezzo.
PPLPMDL0020000001	Lakewood	OH	44107	4/4/2013	I asked dr if he was interested in hearing a physician discuss Butrans at the event on 4/11? Dr said no because he doesn't get any CEU's and has not been to one in over 2 years. I asked him what he thoughts are on Butrans and what his clinical experience has been? Dr said he has used it a few times shortly after it came out and his patients said it didn't work. I asked him what that means? Dr said some patients were lying because they wanted their pills and others said it would not stay on. I explained where Butrans is appropriate and the conversions and asked him if he would give it another try? Dr said maybe but not likely. I asked why and he told me because most of his patients are too far beyond Butrans but he may try it again. I showed him the new OxyContin copay card and asked him to use it as his primary ER opioid medicine. Left intermezzo dosing card.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/4/2013	I asked dr if he had tried Butrans in the patients we discussed last visit? Dr said no but there is a chance he will write it. I asked where? Dr said Ultram or low dose vicoden patients. I showed him the Scott profile and asked him what he does next when a patient is failing ultram? Dr said he will usually go to vicoden. I asked him why he moves to another IR opioid? Dr said ultram is very weak and finds that vicoden is more potent. I asked dr why he wouldn't use Butrans for a patient failing ultram? Dr said he doesn't know but mostly because he has not remembered to do it yet and has nothing against using it but just isn't comfortable with it yet. I told dr the only way he will feel comfortable is to use it clinically. Dr agreed. I told him to look for patients with Medco or medical mutual which are two of his top commercial prescription plans. Dr said ok.
PPLPMDL0020000001	Parma	OH	44129	4/5/2013	Positioned Butrans for appropriate patients who are going from taking their hydrocodone PRN to daily. Reviewed once weekly transdermal dosing of CIII opioid analgesic. Also spoke with Carla & delivered intermezzo indication & gave dosing information. She said she saw a commercial for intermezzo but did not know much about it.
PPLPMDL0020000001	Cleveland	OH	44130	4/5/2013	Quick call- Reviewed OxyContin 7 tablet strengths for individualization of dosing & positioned Butrans for appropriate patients who may benefit from a once weekly CIII opioid analgesic delivered transdermally. Gave intermezzo formulary grid & reviewed dosing & indication. Spoke with Dorothy & Sharon & reviewed formulary & savings information for all 3 medications.
PPLPMDL0020000001	Parma	OH	44134	4/5/2013	Spoke with Judy, who said she had recently seen an intermezzo ad. Reviewed 3 key pharmacy messages & gave her pharmacy sell booklet. Also reviewed Butrans appropriate patient type/range & discussed proper application, rotation, & disposal. She said she knows they have a few customers who get Butrans regularly. She added that someone brought in a script recently but the insurance didn't cover it. I asked what plan it was. She did not recall, but said she thinks it was Medicare. Reviewed coverage. Discussed all 3 medications savings being part of automatic e-voucher at Rite Aid.
PPLPMDL0020000001	Hudson	OH	44236	4/5/2013	I asked joy where most of their pain medicine fills are coming from? She said they are from various places but do see prescriptions from summit pain, unity physicians, and dr McCallum. Is he said most are IR opioids. I gave the Butrans core messages and discussed intermezzo.
PPLPMDL0020000001	Akron	OH	44320	4/5/2013	Quick call about Butrans and the information in the exam rooms. I explained the Scott profile and private prescription insurance. I showed her the materials going in the exam rooms.
PPLPMDL0020000001	North Olmsted	OH	44070	4/5/2013	Made a drop-in visit, met w/ D.O.N., Erica Wood. I talked with her about scheduling in-services on Pain Management for the nursing staff. Erica said, "I am having my quarterly meeting next week, but I already have a full agenda b/c we are starting up a new computer system." Erica informed me that she has 2 nurse managers, Jo & Danette who hold monthly staff meetings. She asked for my contact info to forward to them., I gave her my BC. I also inquired about meeting w/ their NP, Terry Coyne. Erica informed me that she is at the facility M-F, and it's best to call and set up an appt. to meet w/ her.
PPLPMDL0020000001	Parma	OH	44134	4/5/2013	Spoke with Mary, technician, & introduced intermezzo, giving her the pharmacy sell sheet. Reviewed 3 key messages & discussed patient type & managed care landscape. Also gave information sheets on Butrans & OxyContin savings programs. Discussed Butrans once weekly dosing & application instructions. She agreed to share this information with the pharmacist.
PPLPMDL0020000001	Cleveland	OH	44113	4/5/2013	Intro. 7 day delivery schedule III, <font color=blue><b>CHUDAKOB's query on 06/19/2013</b></font>Mark, you show three products presented, but only one was referenced which appears to be Butrans. Can you please clarify?<font color=green><b>GUTKOMA's response on 06/24/2013</b></font>Brief hallway product reminders, indication and dosing. Also per our discussion, I try to be more detailed when products are presented, and noted for future call entry.<font color=blue><b>CHUDAKOB added notes on 06/24/2013</b></font>Thank you. remember, that if a product is not discussed, then it should not be recorded as such.
PPLPMDL0020000001	Cleveland	OH	44113	4/5/2013	Discussed patient selection protocol, Butrans experience
PPLPMDL0020000001	Cleveland	OH	44113	4/5/2013	Intro. Discussed Butrans experience. Starts most patients on 10Mg/hr. Scott profile and older patients is where she has had success. Intro. intermezzo indication, went over dosing, 5 day trial cards. Dr. Also commented on BWC difficulty of approval for Butrans
PPLPMDL0020000001	Uniontown	OH	44685	4/5/2013	I showed the patient type profile Scott through the window and asked him if he had identified any patient yet? Dr said no but said he is keeping it in mind and remembers where he should use it. I handed him the conversion scale and intermezzo dosing card.
PPLPMDL0020000001	Westlake	OH	44145	4/5/2013	Introduced myself to dr and asked him where he is currently using butrans and he said after tramadol for his fibromyalgia patients in pain. He said after lower doses of vicadin. I showed the patient profile Scott and he said yes that patient and asked for savings cards. Quick window call.
PPLPMDL0020000001	Akron	OH	44320	4/5/2013	Discussed with all doctors about request for placing a Butrans formulary grid, copay cards and initiation and titration piece in all 5 exam rooms. Drs all said that they would make sure that all pieces will be placed. Discussed with office manager Wanda about what is being done. Asked dr to attend the program again on 4/11. Dr said she does not want to hear more information about anything medical if she doesn't have to.
PPLPMDL0020000001	Akron	OH	44320	4/5/2013	Discussed with all doctors about request for placing a Butrans formulary grid, copay cards and initiation and titration piece in all 5 exam rooms. Drs all said that they would make sure that all pieces will be placed. Discussed with office manager Wanda about what is being done. Asked dr to attend the program again on 4/11. Dr said she does not want to hear more information about anything medical if she doesn't have to.<font color=blue><b>CHUDAKOB added notes on 04/14/2013</b></font>Cliff, please try to avoid copy and pasting call notes. As you can see you referred to Dr. Bonyo as a she!
PPLPMDL0020000001	Westlake	OH	44145	4/5/2013	Spoke to christin at lunch and she said the office prescribes very few opioids and refers to dr kabarra. The office uses opioids for acute pain and rarely treats chronic pain. She does not write any opioids for chronic pain. I discussed butrans titration for opioid naive patients but she was not engaged in the conversation. I discussed intermezzo indication, limitation of use and dosing. I showed the dosing titration for OxyContin.
PPLPMDL0020000001	Cleveland	OH	44113	4/5/2013	Intro. 7 day ,schedule 3 ,single entity opioid. Tramadol failures
PPLPMDL0020000001	Akron	OH	44333	4/5/2013	Formally invited dr to the Butrans program on 4/11. I explained the speakers credentials and asked for him to attend. Dr said that Canton is too far otherwise he might come. I gave dr more Butrans information guides and asked him to continue using them to educate them on the medicine. I asked for continued business as he agreed. I reminded dr of the good formulary coverage and highlighted BWC, Caresource, And Medco. Doctor asked Linda to fax to the home office and thanked me for updating him. Left OxyContin and intermezzo dosing information
PPLPMDL0020000001	Cleveland	OH	44113	4/5/2013	Intro. 7 day, schedule III, Tramadol failure
PPLPMDL0020000001	Independence	OH	44131	4/5/2013	Reviewed OxyContin Medicare formulary grid with Dr Pai. He said he has not recently had trouble with OxyContin coverage or cost & added that he recently wrote a prescription for it. He said he has a couple of patients on Butrans now & they are doing well. Introduced intermezzo & delivered indication, dosing, & patient type. Dr Pai asked about insurance coverage. Reviewed managed care grid with him. He said he has a friend in PA who is a sleep specialist who had told him about intermezzo & he was intrigued. I asked if this is something he can see himself using & he said if he can find someone with the right insurance coverage who meets the indication, he will
PPLPMDL0020000001	Parma	OH	44129	4/5/2013	Quick call- Reviewed OxyContin as a q12h dosing form of oxycodone, showing conversion guide opened to Percocet conversion page/ Dr Rakhit said he had to go see patients & had no time. Spoke with iryna & reviewed this information with her & also presented intermezzo indication & dosing information. She said she would talk to Dr Rakhit about it when he had more time.
PPLPMDL0020000001	Akron	OH	44333	4/5/2013	Some to doctor and Marsha about Butrans formulary coverage with Caresource and BWC paying for it. I asked dr to look for patients failing IR opioids that meet the indication. Dr and Marsha both thanked me for reminding them. Marsha said that the doctor forgets where it is covered. I asked Marsha to place formulary grids in the exam rooms and she agreed.
PPLPMDL0020000001	Westlake	OH	44145	4/5/2013	Dr said his Butrans experience is limited. I asked him when he would consider butrans and showed Scott profile. Dr said he does not prescribe for chronic pain and refers to dr kabarra. I asked when he thinks of butrans and he said dr gerace writes. Discussed driving study, indication of use and limitations of intermezzo. Discussed OxyContin patient types.
PPLPMDL0020000001	Westlake	OH	44145	4/5/2013	Good discussion about all products. Discussed Butrans appropriate patients like Scott and nancy. Discussed his move from family medicine to pain management. Discussed the program on 4/11 and he said he would attend.
PPLPMDL0020000001	Akron	OH	44333	4/8/2013	Discussed OxyContin use is the right patient. Explained intermezzo indication, limitations of use and dosing.

PPLPMDL0020000001	Akron	OH	44313	4/8/2013	Explained the Sam profile for OxyContin to doctor and asked him to use it for that patient type. Doctor said he will remember that. I showed dr the placebo Butrans patch and gave review of both Scott and nancy profiles. Dr said he has a patient he may consider Butrans for and is currently taking fentanyl and Percocet. I recommended that he does not initiate Butrans for that patient and OxyContin is a better option. Dr said the patient has state Medicaid and will try OxyContin.
PPLPMDL0020000001	Fairlawn	OH	44333	4/8/2013	Spoke to Jerry the pharmacist about intermezzo. Jerry said he just had a patient inquiring about intermezzo. I explained the indication, limitations of use and dosing. Introduced Butrans and explained dosing, appropriate patient like Scott, titration and approximate conversions. Showed placebo patch and explained application sites.
PPLPMDL0020000001	Akron	OH	44333	4/8/2013	Discussed all products with doctor. Dr Vucetic get initiated a new patient on Butrans as we entered the office who had Medicare primary and anthem Bc/bs secondary. I discussed patient types with dr and reviewed his patients with commercial insurance specific to his practice. Provided dr with a Butrans FPI. Explained Senokot S and how it can help his patients. Explained OxyContin patient types and how he can utilize it more. Dr said he is looking for opportunity to use intermezzo clinically to see how well it works and admitted how he asks his patients about their insurance to ensure it gets covered.
PPLPMDL0020000001	Garfield Heights	OH	44125	4/8/2013	Discussed with Denise(n.mgr) OxyContin savings card/ Butrans savings card. Office policy etc.
PPLPMDL0020000001	Cleveland	OH	44104	4/8/2013	Intro. Presented Butrans savings card
PPLPMDL0020000001	Parma	OH	44134	4/8/2013	I recv'd an e-mail from Linda Belford in Staff Development requesting May 14th @ 12 noon for me to present branded materials. (Butrans, Oxycontin & Intermezzo) materials at a lunch meeting w/ the NP's, D.O.N. and herself present.I confirmed the meeting via e-mail today.
PPLPMDL0020000001	Cleveland	OH	44125	4/8/2013	Discussed Intermezzo indication and dosing, Betsy J. RPH has seen RX recently, OxyContin strengths/savings card
PPLPMDL0020000001	Westlake	OH	44145	4/8/2013	Led with 1st insight and dr said that he has not experienced a discontinuation rate that high and 80% of his patients stay on long acting opioids and that is what he primarily prescribes. I asked him why his practice has such a high continuation rate. Dr said glad I asked and he said it is because he tells patients what they will get and does not let them ask him for specific medications. I asked was the key patient selection and he said no patient education. He said if the patient is on short acting for more than a few months they are candidates for long acting. I presented the patient information booklets and pain journals and asked if these types of materials would help his practice and his efforts to educate patients. The dr reviewed the materials and liked them. I asked the dr what should I tell other physicians about butrans. Dr drew a graph highlighting a theatrical therapeutic window and showed short acting opioids spiking and long acting staying longer in the window range and explained that he prefers Butrans because it stays in the therapeutic window. Dr asked my progress on formulary I provided him the name of the new clinical pharmacist. He said he would contact her and I agreed to do the same
PPLPMDL0020000001	Garfield Hts	OH	44125	4/8/2013	Presented/Discussed Butrans/OxyContin Savings card
PPLPMDL0020000001	Cleveland	OH	44104	4/8/2013	Intro. Discussed Butrans Savings card
PPLPMDL0020000001	Akron	OH	44312	4/8/2013	Quick call and had opportunity to show dr the placebo patch and told him we would discuss more over lunch next week.
PPLPMDL0020000001	Parma	OH	44129	4/8/2013	In-services @ 2pm & 3:30 for Nurses & STNA's on Pain management was completed. Handouts given: Patient comfort assessment guide and the Wong Baker Pain Scale. During the in-service,discussion and interaction on Barriers that interfere w/ Pain Assessment & Treatment in the elderly and consequences of unrelieved pain took place. The Nurses and STNA's felt the in-service was very beneficial and a great review. In-Service on Pain documentation for nurses was scheduled for July 15 & 29th @ 7:30,2 & 3:30kim stated that they changed their pharmacy from Parmed to Twinsburg and Madonna is the pharmacy consultant. She was not sure of her last name. I also asked to meet w/ the NP's at the facility.
PPLPMDL0020000001	Cleveland	OH	44195	4/8/2013	Discussed/presented savings card with Denise
PPLPMDL0020000001	Cleveland	OH	44104	4/8/2013	Intermezzo discussion indication/dosing- supporter (Rahjee)Discussed savings program
PPLPMDL0020000001	Fairlawn	OH	44333	4/8/2013	Spoke with Gilbert the pharmacist about intermezzo indication and dosing. I asked if he had seen any recently and he said none in the last week. I explained Butrans dosing and titrations and he said he continues to fill that. I asked if he had seen any Butrans from Lababidi? He said no. I asked any OxyContin and he said he has only seen 1 in the last month or so and he just saw 2 of his new patients and one of them was given OxyContin.
PPLPMDL0020000001	Westlake	OH	44145	4/8/2013	Spoke with rachanna about Butrans on the formulary and she asked for inpatient and why wouldn't dr kabarra just have the patient come to his outpatient practice if he wants them to have butrans. I explained how Butrans was titrated every 3 days. She asked if there was a rems program and I explained that I have information with me and she stopped me and said she would like to set up an appointment with her boss. She asked me to set an appointment up in the vendor system. We discussed the process I need to follow to be validated.
PPLPMDL0020000001	Akron	OH	44333	4/8/2013	Led with the insight on communication and explained the OxyContin essentials kit. Dr said he thinks that it will work for him to hand them out. I asked how his OxyContin patients are doing and doctor said he always has new patients. I asked him what his threshold is for Percocet before he moves to Butrans? Dr said about 3-4 pills then he finds the patient does better on the q12h product. I reviewed the patient types for Butrans and asked him to use it for an uncontrolled tramadol patient. Dr said he has found Butrans to work well for the patient on tramadol. I explained BWC and Carescre coverages and explained them. Dr said he liked to hear about the Caresource PA. I asked how I could see doctor in his north canton location as he will be there going forward. Leaving his Fairlawn location in two weeks.
PPLPMDL0020000001	akron	OH	44333	4/8/2013	I explained where doctor should be using Butrans. Discussed the Scott profile and asked him when he has a patient that is on Ultram around the clock who is ready for a dose adjustment or isn't tolerating it to move them to Butrans. I explained the Butrans patient experience kit and asked him to hand those to it to improve communication for his new Butrans patients only. I asked dr to write more Butrans and he agreed. Reminded of the program on Thursday.
PPLPMDL0020000001	Parma	OH	44134	4/8/2013	Made a drop-in visit to speak w/ ADON, Cheryl Sigley to discuss Pain Management educational opportunities. I spoke w/ the receptionist, who informed me that Cheryl was in a meeting and not available. Left BC
PPLPMDL0020000001	Fairlawn	OH	44333	4/8/2013	Placed phone call and spoke w/ Michelle Williams to re-schedule in-service on Pain Management for the Nursing staff. She apologized for not getting back w/ me. She said, "It has been crazy busy" and she has been working on putting together an STNA class. I also offered to present a pain management in-service for the class. Michelle stated, " we do not bring any speakers in from the outside for the STNA class, but I have your card and I definitely will call you to re-schedule the in-service on pain management for the nurses as soon as I am done with this class." It was agreed, if I did not hear from Michelle by the end of May, that I would contact her.
PPLPMDL0020000001	Independence	OH	44131	4/9/2013	Quick call- Reminded Dr Jack of our previous discussion & how he agreed to start appropriate patients on Butrans when he identifies them. He said he hasn't done that but he will. Gave Intermezzo savings cards & discussed them with Cameo (MA).
PPLPMDL0020000001	Parma	OH	44129	4/9/2013	Quick call- Positioned Butrans for appropriate patients who are going from taking short-acting opioids PRN to daily, reminding him Butrans is a CIII medication. Also showed broad Medicare coverage for OxyContin. Spoke with Lorraine & reviewed Intermezzo indication & managed care coverage.
PPLPMDL0020000001	Akron	OH	44333	4/9/2013	Handed tr the Nancy profile over the counter and asked for his continued business for patients like her. Dr said he is continuing to prescribe it. I told him I left all copy cards for all products in the new office.
PPLPMDL0020000001	Cleveland	OH	44115	4/9/2013	Intro. Intermezzo indication, Butrans/OxyContin. Hasn't seen any RX's. Will not stock OxyContin. Will take Intermezzo trial offer promo.
PPLPMDL0020000001	Cleveland	OH	44115	4/9/2013	Intro. No lunches/appts. Window call, Butrans indication, Intermezzo indication. Said he would take savings card and trial offers.
PPLPMDL0020000001	Akron	OH	44310	4/9/2013	Spoke with dr and Char through the window. I showed them the Scott and nancy profiles and reminded them to identify existing patients who are needing a dose adjustment on the IR. I gave the updated formulary grid and asked him to continue using. Dr agreed to. I showed the placebo intermezzo and asked him to use it as well. I told dr to use the resources in the pain management kit to his and his patients advantage. Doctor said she has been swamped but plans to use it.
PPLPMDL0020000001	Cleveland	OH	44113	4/9/2013	Intro. Talked w/ Nancy/ Audrey discussed office protocol
PPLPMDL0020000001	Cleveland	OH	44109	4/9/2013	Intro. OxyContin savings card requested
PPLPMDL0020000001	Cleveland	OH	44130	4/9/2013	Showed Percocet to OxyContin conversion & asked what the down side of trying OxyContin for a patient on this medication regimen would be. Dr Diab just said "OK" & walked into a room. Spoke with Barb & gave Butrans & Intermezzo managed care grids & discussed indications & patient types.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	4/9/2013	Spoke with dr Weeks in Edwin Shaw Rehab. Discussed product case studies and copy cards. Explained the nancy profile for Nancy. Introduced intermezzo.
PPLPMDL0020000001	Uniontown	OH	44685	4/9/2013	Spoke with Rosemary the pharmacist about comprehensive mgt moving in next door. I asked what doses of Butrans and OxyContin they have in stock? Ostmak said she only have the 20mcg and said she will order the other doses. She said she has all doses of OxyContin. Explained Intermezzo indication and showed placebo.
PPLPMDL0020000001	Middleburg Heights	OH	44130	4/9/2013	Quick call- Reviewed Butrans once weekly transdermal dosing of CIII opioid analgesic.
PPLPMDL0020000001	Akron	OH	44312	4/9/2013	Quick call with dr Lonendorf and his nurse Kathy. I asked dr to attend my Butrans event on 4/11. Dr said he would like to go but has plans that evening. I asked if he has moved forward with identifying patients for Butrans? Dr said he is in the process now of putting together the items he needs for his pain patients with the pain mgt kit and does think Butrans will be a good product for his patients.
PPLPMDL0020000001	Westlake	OH	44145	4/9/2013	Call ADON, Brenda Amburgey to set up an appt, to meet w/ her to introduce the NE program & discuss educational opportunities. N/A, left msg. on her voice-mail
PPLPMDL0020000001	Brooklyn	OH	44144	4/9/2013	Intro. Intermezzo indication, trial cards, hasn't seen any RX's yet.
PPLPMDL0020000001	Westlake	OH	44145	4/9/2013	E-mailed D.O.N., Susan William to follow up from our appt. and to schedule in-service on Pain management.
PPLPMDL0020000001	Akron	OH	44313	4/9/2013	Called to follow-up w/ Richard Lynch from our meeting on 3/5. I spoke w/ the receptionist, Nicole who stated that Richard was in a meeting. Left msg on his voice-mail.
PPLPMDL0020000001	Akron	OH	44312	4/9/2013	New green office on corporate woods. Dr came out and thanked me for the patient savings cards and told me that he is liking Butrans. I asked where he is using it and he said for his patients taking too much vicoden or Percocet. I told him to think of Butrans for his patients earlier on in their treatment of pain. I told him that his Percocet failures should be moved to OxyContin but his trama dol and vicoden patients may be more appropriate for Butrans. I handed him a initiation and titration guide. Dr said he will look it over.
PPLPMDL0020000001	Akron	OH	44333	4/9/2013	Place a follow-up phone call, spoke w/ D.O.N., Ramona Watson, I introduced myself and the purpose of my call. Re: educational in-service opportunities at no cost. Ramona stated, "this is possibly something that I would be interested in, but I am busy the next couple of weeks." I asked her if we could schedule an appt. to meet to discuss the NE program, Ramona said, " I am not in my office and I don't have access to my calendar, can you call me later in this week?"
PPLPMDL0020000001	Parma Heights	OH	44129	4/9/2013	Spoke with Rajesh (technician) & reviewed Intermezzo pharmacy information, focusing on 3 key messages. He said he doesn't think they carry it but is sure they could order it if they needed to. Reviewed patient type & limitations of use as well as dosing/administration. Discussed Butrans & OxyContin savings programs & reviewed eligibility requirements for savings. Let him know all 3 medications have automatic savings with e-voucher for Discount Drug Mart customers.
PPLPMDL0020000001	Cleveland	OH	44130	4/9/2013	Showed Scott Butrans patient profile as an example to Dr Fedorko of a possible patient type to consider for Butrans. He said he wishes he had more patients for me. I told him he probably has more Butrans candidates than he thinks & asked him to look for a patient like "Scott". He said he would try. Reviewed Intermezzo dosing & indication & reminded Dr Fedorko of his interest in Intermezzo. He showed me the other sleep aid product coupons, showing me that other offers give patients 30 days to try it or offer a 50 co-pay, focusing mainly on Edular. I asked Dr Fedorko if the indication was for middle of the night awakenings. He said it doesn't matter & that you could just break Edular in half. Reviewed Intermezzo dosing again. I also pointed out that with a trial of 5 tablets, a patient could try Intermezzo for 5 nights & then could decide on their own if they are willing to pay out of Dr Ortega told me the Butrans patient he had told me about for whom BWC had denied the claim got re-submitted & was accepted. He asked if we have any type of educational resources he could review. Gave him MERC information. He asked if we are accepting new speakers & added that he is interested in speaking for Purdue as he has always had an interest in pain & treatments for it. I let him know I would submit his name. Reviewed Intermezzo dosing & indication. He said he doesn't really write sleep aids but would review the information. I alerted him to DTC marketing, letting him know it is possible someone would ask about it from seeing an ad.
PPLPMDL0020000001	Parma	OH	44129	4/9/2013	

	Beachwood	OH	44122	4/9/2013	Made a drop-in visit to speak w/ Cheryl Grim, Nurse Educator, to discuss NE Program and Pain Management educational opportunities. I spoke w/ the receptionist, who paged Cheryl, she was finishing a webinar and asked me to wait 10 minutes and she would talk w/ me. I met w/ Cheryl and introduced myself and the Nurse Educator Program. Cheryl stated, "I have your business card and I am definitely interested in your program, but we are under new ownership, Genesis, and we are being in-serviced to death." Cheryl requested that I contact her the first of June.
PPLPMDL0020000001	Cleveland	OH	44128	4/9/2013	Made a drop-in visit to speak w/ RoseAnne Howell to set up in-service on constipation. I spoke w/ the receptionist, who said RoseAnne was in a Nurse managers meeting. Left my BC
PPLPMDL0020000001	Parma	OH	44129	4/9/2013	Spoke with pharmacist (Laurie) & gave pharmacy information booklet. Walked through 3 key messages & reviewed patient type & limitations of use. She said they do not stock it as they have seen no activity for it. Discussed DTC marketing, letting her know customers may ask her about it. Discussed savings programs of Intermezzo, Butrans, & OxyContin being part of e-voucher system with built-in savings.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	4/9/2013	I spoke with doctor any the patient profiles for Butrans. I explained both and asked him his thoughts. Dr said that mostly he prescribes post surgery and said he doesn't have much need for chronic pain medicines. I asked him if he has patients other than hospital patients? Dr said he does and is still building his practice. I told dr about the OxyContin dosing and his need for copay cards. Dr said he can use them when he provides scripts in office and admitted to using a little OxyContin for patients uncontrolled on Percocet. I introduced Intermezzo and exp, aimed indication, limitations of use and dosing. Dr said it is needed for sure and will use it when he has patients complaining of in the middle of the night insomnia.
PPLPMDL0020000001	Cleveland	OH	44122	4/9/2013	Made a drop-in visit to speak with Francine Young to reschedule in-service on pain management, I spoke with the receptionist, Roberta Herbert, who paged Francine. Francine was in the middle of an in-service. I left my BC and PAP handouts.
PPLPMDL0020000001	Independence	OH	44131	4/10/2013	Introduced myself & Purdue's products to Dr George. He said he is now practicing here & has left his other office, having joined St Vincent's medical group. He added that he is comfortable treating appropriate patients with opioids & wishes physicians would treat people in real pain because their abandonment of these patients when House Bill 93 came about has caused a lot of serious problems for legitimate patients. He said with the new group, they are forming a panel of a variety of specialties of physicians to evaluate & treat patients in pain. He said Dr Nickels is also in the group. He then had to go deal with a patient issue so he could leave for the evening but said to come back another time. Spoke with MA's & discussed Intermezzo indication & dosing. Also gave formulary grids for all 3 medications.
PPLPMDL0020000001	Parma	OH	44129	4/10/2013	Dr Gigliotti apologized, saying he should be writing "my stuff". Positioned Butrans for appropriate patients who are going from taking pain medication PRN to daily, asking why use short-acting medication for a chronic issue. He said he knows I am right, he just has to "do it". He said he still has patients on OxyContin, although he has sent some of them to Dr Salama. Reviewed broad formulary coverage for OxyContin. Reminded him of Intermezzo dosing & indication.
PPLPMDL0020000001	Barberton	OH	44203	4/10/2013	Discussed butrans appropriate patient type with Scott patient profile. Gave indication and limitation of use for Intermezzo. Discussed flexible dosing with OxyContin. Window call and brief introduction. Booked lunch.
PPLPMDL0020000001	Barberton	OH	44203	4/10/2013	Kim let me know that dr is head of anesthesia and does not see rep but he will be stepping down soon. She said he may need vouchers also. Dr is only at this location and does not take appointments.
PPLPMDL0020000001	Cleveland	OH	44109	4/10/2013	Into. Talked w/Ray. Intermezzo indication, he mentioned DTC, had a few RX's, 90% of scripts filled @ this location are Caresource. Butrans 7 day delivery system, PA are a challenge, Metro & PA is a huge issue. He stated since new formulation OxyContin RX's are null. Gave Savings/Trial cards will help if possible
PPLPMDL0020000001	Cleveland	OH	44109	4/10/2013	Intro.
PPLPMDL0020000001	Barberton	OH	44203	4/10/2013	Was told I need certification to get into office. Do not see doctor
PPLPMDL0020000001	Barberton	OH	44203	4/10/2013	Introduced myself and dr said he does not write the patch or do chronic pain and walked away
PPLPMDL0020000001	Norton	OH	44203	4/10/2013	Spoke with Linda and asked who were the large opioid writers in the area. She mentioned the office next door. I explained that I have a lunch booked on the 22nd and would like to find out their needs and I will let them know. I offered patient information brochures and she said they would be helpful because she has two 75 year olds that could benefit from a reminder with the booklet.
PPLPMDL0020000001	Bedford	OH	44146	4/10/2013	Dr Moufawad said he likes Butrans & his patients who are appropriate like the results they get once the right dose is found. Gave him tear-off sheets for Butrans patient instructions. Dr Moufawad said this is why he always sees me- because when he asks for something, I provide an answer for him. He said he is also using more OxyContin, reminding me that he is transitioning his practice from short-acting opioids to more long-acting options. Reviewed broad formulary coverage. Reminded him of DTC marketing for Intermezzo.
PPLPMDL0020000001	Euclid	OH	44117	4/10/2013	I made a drop-in visit and met w/ Staff Development Coordinator/Nursing Supv., Charlene Miller. I introduced myself and the NE program. Charlene stated, "OMG, you said the magic word PAIN, come lets talk." I asked Charlene, "What issues are you experiencing with Pain management?" Charlene stated, "the staff is not assessing or documenting properly at all, I can't get them to understand the importance." When I asked what tools they are currently using to assess pain, Charlene said, "their not." They are not measuring intensity of pain, they are just asking the resident if they are having pain, yes or no." No computer pain assessment guide is utilized. Charlene said, "we use care tracker to document ADL's, BM's & behaviors. Pain protocol is Q-shift, pain medications currently used are tramadol, tylenol, vicodin, percocet, oxycotin & the fentanyl patch. I confirmed 100 beds, consisting of skilled, LTC & Hospice, currently 97 are occupied. I presented educational in-service opportunities unbranded (pain management, key terms in pain mngmt, constipation) and branded (OTC Laxative line-Colace & Senokot, Butrans, Oxycotin & Intermezzo) I Confirmed the Medical Director as Wanita Castaneda- available on Tues & Thurs, and D.O.N.- Madeline Moore. NP's are also on staff. Charlene felt this is a great program that she will utilize. In-services were scheduled for Pain Management 4/18 & 4/29, Defining Key terms in Pain Management on 5/29, Pain Documentation on 5/9 & Constipation on 6/11 & 6/12.
PPLPMDL0020000001	Barberton	OH	44203	4/10/2013	Unable to see dr. Let literature
PPLPMDL0020000001	Barberton	OH	44203	4/10/2013	Booked lunch with Kim while she had dr Patel at the window and she told him I was the Purdue rep taking cliff's place. I asked how could I provide his service and he mentioned he needed saving cards and I said I look forward to discussing his Butrans patients in more detail at lunch
PPLPMDL0020000001	Barberton	OH	44203	4/10/2013	Not able to see doctor. Left lit
PPLPMDL0020000001	Barberton	OH	44203	4/10/2013	Spoke with Billy, the pharmacist, and discussed Intermezzo dosing, indication and no ab equal. Billy said they did not do a lot of opioid volume but when I asked what strengths he carried he said all. I explained the patient information booklet and reminded him with the patient profile the tramadol patient that is still in pain and asking dr to try Butrans before they move to Vicodin or Percocet. I discussed the managed care environment since he mentioned he had a workers comp denial for OxyContin.
PPLPMDL0020000001	Parma	OH	44129	4/10/2013	Spoke with Amanda & Roberta (MA's) & reviewed Butrans & OxyContin formulary grids. Also let them know BWC is paying for Butrans with no prior authorization & discussed Caresource prior authorization requirements.
PPLPMDL0020000001	Parma	OH	44129	4/10/2013	Reviewed Intermezzo dosing & patient type. They agreed to share this information with Dr Salama. Offered savings cards but they did not need any at this time.
PPLPMDL0020000001	Barberton	OH	44203	4/10/2013	Quick call- Showed broad commercial coverage for Butrans on grid, pointing out to Dr Taylor that she can write Butrans on more than just BWC. reminded her of favorable OxyContin coverage with Medicare plans. she said patients on Butrans are doing well and she is always looking for more patients. Reviewed Intermezzo indication/patient type with Mary.
PPLPMDL0020000001	Barberton	OH	44203	4/10/2013	Spoke with Kim about OxyContin Butrans and Intermezzo indications and booked lunch. Office is lunch only.
PPLPMDL0020000001	Cleveland	OH	44109	4/10/2013	Discussed his practice and patients. Prescribing less opioids nowadays along with not initiating new RX therapy for younger patients. Briefly touched on Scott profile and Butrans initiation/titration, he disclosed coverage
PPLPMDL0020000001	Euclid	OH	44117	4/10/2013	Made a drop-in visit to speak w/ Kathy Nemeth to get feedback from the Pain management in-services completed on 4/2. I spoke w/ receptionist Joe Nathan, who stated, "Kathy is in a meeting at the present time."
PPLPMDL0020000001	Cleveland	OH	44195	4/10/2013	MSL Meeting with Dr. Appachi and Sharon to discuss OTR pre-screening and patient populations. MSL discussed enrolled patient profiles; Dr. Appachi's patient population is limited to PICU, he plans to contact both hematology/oncology colleagues and orthopedic surgeons to increase study awareness. Sharon, RN, plans to begin reviewing inpatient pediatric admissions for OTR pre-screening. MSL shared PI Summit video with Ms.
PPLPMDL0020000001	Bedford	OH	44146	4/10/2013	Spoke with Oleg & reviewed Intermezzo key selling messages for pharmacists. He said he actually has someone on it regularly now, so he keeps it in stock. He went on to say that the patient had the trial card, used that, & now gets regular prescriptions. Discussed how the monthly savings for Butrans, Intermezzo, & OxyContin are all automatic through e-voucher. Oleg said that is very convenient. He said he actually has a few customers who get Butrans regularly now as well. He said one is on 5mcg & the other is on 20mcg, both from Dr Moufawad. He said one was a Caresource patient, but the prior authorization got completed, so there was no issue with the script getting covered. Oleg said more physicians should be using it. I asked him to educate physicians on it if/when given the opportunity & he agreed.
PPLPMDL0020000001	Barberton	OH	44203	4/10/2013	I spoke with Angie and she said their location does a lot of opioids because they are located so close to the hospital and pain management. Dr labidiba ( spelling) is large for them and he has offices in Akron and Lodi. Angie requested vouchers because she said she has patients in need of the trial cards because sometimes they do not leave the office with cards. She explained that most of the OxyContin patients are on Medicare and cannot use the cards. We discussed Intermezzo and she said she has a few patients. I reviewed the dosing of Intermezzo and the patient information booklet for Butrans. I mentioned patients should avoid exposure to the sun and the importance of site rotation.
PPLPMDL0020000001	Norton	OH	44203	4/10/2013	Spoke with Jessie and booked lunch. Jessie explained that dr kastcaras does not come back for lunch. Gave indication, limitation of use for Intermezzo. Gave indications for OxyContin and Butrans
PPLPMDL0020000001	Parma	OH	44129	4/10/2013	I rec'd an e-mail from Staff Development Coordinator, Kim Barber, LPN stating that after my in-services on 4/8 on pain management, she spoke to Tammy Pasesla her primary Nurse Practitioner who said that she is interested in speaking with me. Kim requested in an e-mail, a recap of the information that we talked about, so she could relay it to Tammy. In sending the e-mail, I relayed that it would be best for me to talk directly w/ Tammy Pasesla, NP and present the branded materials.
PPLPMDL0020000001	South Euclid	OH	44121	4/11/2013	Met at great length with part time nurse Krisann (Riita normally there/out today)& nursing manager, Ann Corson. Detailed all products, and OTC. left May 8 Invite, Ann said they will try & make program, as she knows Drs will want more info on Butrans. Left and went through appropriate patient selection and dosing slider & patient guide. that is when ANN asked how much is cash price for Butrans, as they only contract with Medicare. Cost not big issue though she says, as majority of 700 patients are affluent & \$ typically not an issue. Ann remembered someone came in previously with Intermezzo & pulled out her card file. I was able to help her to find the card, as she was flipping through because I saw Intermezzo written right on front of Marcia business card. Told her Marcia has been hired by Purdue direct & is managing our Cleve West territory. Moving forward I will be their rep. Ann says please call her & we can set up lunches, & Drs will give me their undivided attention. Outside of lunch in service they don't talk to reps. Left Intermezzo patient guides, dosing flashcard, updated FPI. Left OxyContin slim jim. Ann and Krisann, you can direct patients to Intermezzo.com for more info & savings. lunches any day but Tues, only 4 of them. Promised Ann I would visit their web page.
PPLPMDL0020000001	Parma	OH	44129	4/11/2013	Quick call- Reviewed 7 tablet strengths of OxyContin for individualization of dosing & positioned Butrans for appropriate patients like Nancy profile, that we discussed last time, who are taking hydrocodone chronically & not getting adequate relief. He said OK & walked away. Spoke with Shari & reviewed Intermezzo indication & dosing. She asked about coverage & cost. Reviewed formulary grid & savings program. She said she would talk to Dr Past about it.
PPLPMDL0020000001	Parma	OH	44129	4/11/2013	Delivered communication insight to Dr Moysaenko. He said he just hates treating pain. I showed him pain management kit & pointed out the pain contract. I asked if he thought implementing tools like this would help him be more comfortable treating the right patients, encouraging him to treat legitimate patients & turn those who are not away. He said although he hates to add more paperwork to his pile, he thinks that would be a great idea. He thanked me for bringing it & for providing these tools & asked me to have Corrine or Shelley make a copy of it. (I spoke with each of them & they made copies for Dr Moysaenko.) Reviewed OxyContin broad formulary coverage & 7 tablet strengths. Also discussed Butrans as a CII long-acting opioid analgesic option. Introduced Intermezzo. Dr Moysaenko said he has heard of it. Discussed indication, dosing, patient type, & administration PRN. He asked about insurance coverage. Reviewed formulary grid & savings. He said he can see using Intermezzo for patients who truly will only need it occasionally, such as during travel or another short duration. He agreed
PPLPMDL0020000001	Shaker Heights	OH	44122	4/11/2013	Showed broad formulary coverage for OxyContin, focusing Dr Agarwal on Medicare coverage, reminding him that this is the patient population where he has told me he is more likely to use OxyContin. Reviewed Butrans once weekly CII. He said he had to go & walked away. Reviewed Butrans patient type with Michelle & showed formulary grid for Intermezzo, reviewing indication.
PPLPMDL0020000001	BEACHWOOD	OH	44122	4/11/2013	Delivered to Kylie (pharmacist) OxyContin medication guides that she had requested. Reviewed Butrans dosing & patient type & gave Intermezzo overview- indication, dosing, administration, patient type. She said she would review the information later. She said to come back another time.

PPLPMDL0020000001	Cuyahoga Falls	OH	44221	4/11/2013	Talking to Carolyn about Butrans managed care when doctor came out of an exam room. Doctor said she recently started Butrans for a patient with Medicare. I asked what the patient was taking and she said vicoden and she initiated on the 10mcg. I asked if the patient had a secondary insurance and Carolyn said she did and it was not expensive. I asked dr to continue prescribing. Nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44113	4/11/2013	Dr. Has moved to Kaiser
PPLPMDL0020000001	Waterford	OH	45786	4/11/2013	I-introduced the products that I carry: OxyContin, Butrans and intermezzo. Went over indications for intermezzo and managed care coverage for Butrans and OxyContinW-said that she has used Butrans and has had good success, but needed more Butrans copy cards
PPLPMDL0020000001	Independence	OH	44131	4/11/2013	Spoke with JT (pharmacist) & reviewed Intermezzo information & key messages for pharmacies. He said he still hasn't seen any prescriptions for it & thinks it is largely due to lack of coverage & high cost for those for whom it is not covered. Reviewed savings available for all 3 medication & reminded him they can all be accessed online at their respective websites.
PPLPMDL0020000001	Parma	OH	44129	4/11/2013	Quick call- Dr Jugulion said he couldn't stay long for lunch. Delivered communication insight & showed pain management kit. Pointed out pain contract & let him know Dr Moysaenko requested copies. He said this was a good idea. Introduced intermezzo & gave him information.
PPLPMDL0020000001	Akron	OH	44333	4/11/2013	Short discussion about Butrans and where it is indicated and used. Gave doctor patient profiles and dr said he was interested in learning more about it at the program and about practicing pain management.
PPLPMDL0020000001	Akron	OH	44312	4/11/2013	Asked dr to attend the event at Gervais. Dr said he will not be attending. I asked dr what his patients on Butrans have been saying about their reduction of pain? Dr said he does not have pain scores but said that they are all doing well and like it a lot. I asked dr if he has had the opportunity to us any of the experience kits? Dr said he has not. I asked him what has been keeping him from using the a. Dr said he just has not. I reminded him that they are for new patients and showed him an example of the survey. Dr agreed to get them to his patients.
PPLPMDL0020000001	Waterford	OH	45786	4/11/2013	I- introduced myself and the products that I carry: INTZ, OxyContin and Butrans. W- familiar with products and has used Butrans
PPLPMDL0020000001	Parma	OH	44129	4/11/2013	Spoke with floater pharmacist & gave intermezzo pharmacy information. Discussed dosing & patient type. Gave information sheets on Butrans & OxyContin savings programs & reviewed eligibility requirements. She agreed to leave the information for the regular staff pharmacist.
PPLPMDL0020000001	Highland Heights	OH	44143	4/11/2013	Asked Mary to see Dr Salama, he was doing procedure. Then asked to see office. Mgr Dina, she was in with patient. Left May 8 invite and new Butrans tear sheets. Tore one off & asked Mary to make sure Dr Salama sees since its new. Also left one pack Butrans trial/savings cards, reminded Mary of first month trial available. Left Senokot's and dosing tear sheets. asked if they needed OxyContin savings cards, she checked with nursing, they are good. Left intermezzo patient brochures, reminded Mary of MOTN insomnia indication. Asked Mary if I can possibly get in with lunch before June, was able to Schedule lunch in May.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/11/2013	Spoke to Glenn Rech the internal clinical pharmacist for the pain management center along with Rick who is the hospital manager. Discussed Butrans clinical mechanism of action and both studies. Discussed the managed care placement of Butrans highlighting BWC and Caresource.
PPLPMDL0020000001	Cleveland	OH	44113	4/11/2013	Dr. Doesn't see reps, Barb Spirk (nurse) will handle info.
PPLPMDL0020000001	Waterford	OH	45786	4/11/2013	I- introduced myself and the products that I carry. Want over managed care and co pay cards for Butrans and OxyContin. Introduced indication for INTZ.W- linda mentioned that she had filled three scripts of Butrans today but were out of cards and was glad to have them
PPLPMDL0020000001	Beachwood	OH	44122	4/11/2013	Caught Dr Yokiel at the window- Reviewed broad managed care coverage for OxyContin & reminded him of Patient Essentials Packs for patients new to the medication. Also reviewed BWC coverage of Butrans. Spoke with Vicki & reviewed this information with her as well as intermezzo formulary information.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/11/2013	I asked dr about his experience with Butrans and explained the Nancy profile. Dr said he understands that it is a good candidate for Butrans and said that he really likes it because the older adults who don't want to take pills really like the patch. He said that the information guides are helpful that the nurses give the patients help it helps them remember the application sites. I asked dr how he has titrated Butrans and showed e titration schedule. Dr said most of his patients are on the 10mcg. Dr got called away for a procedure. Nothing else learned.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/11/2013	Short discussion about Butrans. Jake said he has used it and has used it for the older patients who don't want to take pills. I discussed the Scott and nancy profiles and asked him if he would prescribe for patients like those? Jake said he would. Provided the initiation and titration guide and explained the approximate conversions as well as the Butrans patient savings.
PPLPMDL0020000001	Lyndhurst	OH	44124	4/11/2013	Met with pharmacist Erin, and she says no Intermezzo and none dispensed yet. Quick detail of product, she was busy. Left pharmacists guide & updated FPI. Butrans indication, she has none on shelf, none dispensed yet. Left patient guide, for when they do get an Rx. OxyContin she was extremely negative. I had a conversion titration guide in my hand and she said "I don't need any, I don't want anything" I have like one patient on OxyContin. Left RX patrol flashcards. Here are some resources that you might take advantage of.
PPLPMDL0020000001	South Euclid	OH	44121	4/11/2013	Met with Tracy, asked to see Dr Deloseph, not possible because she's running one hour behind. Left invite May 8 with Tracy, Butrans dosing slider & patient guide. Left OxyConin conversion titration guide. Left intermezzo patient guides, dosing flashcard, updated FPI. reminded Tracy of MOTN insomnia indication, prn, 5-day free trial w Rx from dr and savings each month. Patients can go to intermezzo.com for more info & to print out savings.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/11/2013	Spoke to Shelbythe pharmacist about all products and gave indication, limitations of use and dosing for intermezzo. Shelby asked about patient savings cards. Discussed the cards and asked if she had any? She said she had 2 left and understands how they work. Explained Butrans key messages and asked about copy cards as well. She has those as well. Explained OxyContin patient types and titration.
PPLPMDL0020000001	Stow	OH	44224	4/11/2013	Caught dr walking into office and had short conversation about OxyContin and Butrans. Dr said he knows of Butrans but has not used it. I showed him the initiation and titration guide and explained all key selling messages. Dr said he will review and consider using. Nothing else learned.
PPLPMDL0020000001	South Euclid	OH	44121	4/11/2013	Met with part time nurse Krisann and nurse mrgt Ann Corson. Introduced myself & my products. Ann says Drs will give me their undivided attention at lunch in service, but do not talk to reps in between patients. I will work on her, as she's very nice. Hopefully I can talk with dr Tomm prior to lunch. They will do lunches any day but tues, as Drs have another commitment on Tuesdays. This is a concierge practice with about 700 affluent patients, so cost/ savings typically not an issue. They are used to completing prior auth's. they accept MEDICARE ONLY, and not on formulary with any other plans. Detailed all my branded products. They were very interested in Butrans. Asked a lot of questions, and what is cash price, I responded close to \$300 cash per month. oxyContin, we have 7 possible strengths that offer 25-50% titration between doses. Recommended q. 12 hour dosing, and \$90 off each month. intermezzo they remembered Marcia coming in, she showed me Marcia's card, which had Intermezzo printed right on front of card. I told her Marcia has joined Purdue in Cleve West territory & I am their Purdue rep moving forward. Left Intermezzo patient guides & dosing flashcards. They are anxious to learn more about my products. (they said Drs will accept savings cards & samples)
PPLPMDL0020000001	Hudson	OH	44236	4/11/2013	Spoke to Galina the pharmacist about intermezzo indication, limitations of use and dosing. I asked if they have dispensed any and she said no and don't have it in stock. She said she will order it when they see prescriptions. I explained Butrans and approximate conversions to discuss patient types. She said they have only one patient on it and currently do not stock any of the doses. I explained the copy cards and how they work.
PPLPMDL0020000001	South Euclid	OH	44121	4/11/2013	Ma Jen Klabunde left a bit early, so met with ma and medical receptionist Kathy. Asked Kathy if I could say hello to Dr Flagg, her reply: he just does not see reps at this location as He is too busy. She suggested I try him on the 2 Thursdays a month when he's in Concord. I told her I already scheduled lunches with Jen @ that location. Left May 8 invite. Left Butrans dosing slider & patient guide. Left Intermezzo patient guides, dosing flashcard &
PPLPMDL0020000001	Mayfield Heights	OH	44124	4/11/2013	Met with Pharm D Renee Sevastos, after speaking with tech Idalis. Renee was unfamiliar with intermezzo, none on shelf, have not dispensed. Went through detail, no AB rated generic equivalent, refer patients to website for savings, 5-day trial with script & savings. Need to speak with angie Jessie further. Left Pharmacists Guide & FPI for intermezzo. Butrans she knows of only 2 patients on, and they have 3 boxes of 5 mcg/hr on shelf. Went through patient education using patient guide. As for OxyContin, she seems nervous to dispense. She feels if a patient comes in & pays cash for OxyContin, they may divert, thats why she feels uncomfortable keeping OxyContin savings cards. I told her the savings cards are for commercial pay patients, but she still says discuss savings cards information with Jessie.
PPLPMDL0020000001	Parma	OH	44129	4/11/2013	Myra said she has been writing a lot more Butrans, but said that she has gotten a lot of rejections lately. She added that 4 of them have been between last week & this week & were from BWC. She & Dawn said there has been an increase in the number of rejections for various medication from BWC that they used to be paying for without problems. I told them I had not heard this before, but would keep an eye out for any information about it. Myra said sometimes the pharmacy won't even alert them to the prior authorization & will just tell the patient to get something cheaper, which is also very frustrating. She said she still has not received any reports from the BPEP surveys. She told me how she walks patients through all instructions on how to enroll in the program. I gave her more kits per her request. She said she plans to continue to write Butrans despite these issues. Reviewed Intermezzo indication, dosing, patient type & formulary coverage. Also gave savings cards. She said she will write that also.
PPLPMDL0020000001	Richmond Heights	OH	44143	4/11/2013	stopped in to speak with Aldona Bur on scheduling in-service on constipation. I spoke with the receptionist, Darlene, who paged Aldona. She responded to the page,but was busy helping with a resident and was not able to speak w/ me. left my BC.
PPLPMDL0020000001	Akron	OH	44312	4/11/2013	Discussion about his use of OxyContin and his thoughts on Butrans. Dr said he used to speak for OxyContin but does not use it anymore. I asked why and he didn't give me a good answer. I told him where and why to use it.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/11/2013	Dr said he is interested to learn more about Butrans from the speaker but understands buprenorphine in Butrans. I explained the molecule to treat pain and reviewed doses. Nothing else learned.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/11/2013	Good discussion with dr and Jake the PA about all products. I recapped it last discussion and talked about patient profiles and candidates appropriate for Butrans. Dr reminded me he likes to use it for his older patients that can't tolerate their IR medicine. Dr said he has also used it for opioid naive patients. Dr asked where else he should use Butrans. I discussed the Scott and a nancy profiles and asked him if he has patients on IR opioids around the clock who are still in pain? Dr said he does. Dr read over the profiles and told me that he will begin the use for those patients. Reviewed managed care and explained Caresource and BWC. Discussed OxyContin and his use of it. I explained the Sam profile. Dr said that he will take his patients to 30-40mg of Percocet a day then move them to OxyContin.m dr said he also uses OxyContin for patients that don't want to wake up in the night to take a pill. I asked dr if he would use the essential kit I left him in Kent? Dr said he wild but said he doesn't use pain scales or other things to track pain. Dr said his discussions with his patients is most effective. Dr said he does not prescribe sleep products and he leaves that up to Family docs.
PPLPMDL0020000001	Fairview Park	OH	44126	4/11/2013	Erica the ma told the dr who i was while i was at the window discussing Butrans. Office has a new policy that dr will not speak with reps but will sign in your view. Office has 2 patients on Butrans. I asked if she could give my card and allow me an appointment.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/11/2013	Good discussion about all products. Dr said he likes OxyContin and uses it often. I asked dr where and when he uses it. Dr said he likes to use OxyContin when a patient is not satisfied with Percocet or duragesic. Dr said that he uses most doses but likes to use the lowest dose he can to provide the relief he is seeking. I explained the doses and to dose it q12h for patients like Sam. Explained Sam. Explained Med D coverage and asked him to continue prescribing. Explained Butrans and doctor said he likes it for many reasons. Dr said he likes the patch as opposed to a pill, likes the doses available, has not had any issues with it being covered that he knows about, and mostly his patients love it. I reviewed nancy and asked him for more business. Gave dr the dosing card for intermezzo. Nothing else learned.
PPLPMDL0020000001	Akron	OH	44305	4/11/2013	I pulled out one of the Butrans patient experience kits and asked him if he has any reservations in handing them out? Dr said he doesn't. I asked him if he remembers when to use them? Dr said for new patients. I told him new Butrans patients that have private prescription insurance such as plans like Medco. I showed him the report that is generated when the patient fills it the survey. I told him to also use Butrans for those patients failing of tramadol who have Caresource, Tricare, or EI. Dr said he has been using it. I asked dr if he would commit to handing out the BPEP kits and dr agreed.
PPLPMDL0020000001	Richmond Heights	OH	44143	4/11/2013	I met w/ Wellness Director Joan Southard, I introduced myself and the NE program. This is an 80 bed Assisted Living facility w/ High Acuity (Private Pay) consisting of independent and Residents who need assistance as well as Hospice Patients. Joan stated, "we definitely could benefit from your program. We have 3 shift of nurses and 7 physicians who come here along w/ 1 hospice doctor."
PPLPMDL0020000001	Akron	OH	44319	4/12/2013	I asked dr how he would introduce Butrans to a patient who was failing vicoden? Dr said that it would be hard because they want their pills and getting the, off is the hard part. I told dr that he needs to express to the patient that if they are still in pain around the clock on the vicoden then an alternative is necessary. I explained how he should review the Butrans FPI, patient information guide and copy cards. I told dr he needs to provide a patient information guide with each prescription and to try it for a vicoden patient. Dr agreed he will try.
PPLPMDL0020000001	Mayfield Village	OH	44124	4/12/2013	Spoke with Penny at the window. Detailed Butrans. Indication, CIIi once a week buprenorphine pain patch. Appropriate patient section: Patients on 3-4 vicodin, tramadol,or Percoset daily, whose pain is still uncontrolled, consider Initiating Butrans 10 mcg/hr. Invited her to May 8 program, and asked she share information with the other nurse practitioners.



PPLPMDL0020000001	Akron	OH	44319	4/12/2013	Spoke to pharmacist about intermezzo indication and dosing. I discussed copy cards for all products and made sure they knew where to get them including on line.
	Akron	OH	44320	4/12/2013	I asked dr if she has made any progress with identifying Butrans patients after placing Butrans information in exam rooms? Dr said all materials for Butrans are in each exam room. Dr said she did prescribe Butrans twice since last week and that there is a PA for both but had not gotten to it yet. I asked which plans and she could not remember. I asked dr why she prescribed Butrans? Dr said one patient was on vicoden and e other on oxycodone plain. Dr should not remember doses but said that she initiated on the 10mcg dose for both patients. I told dr I will check back next week for find out more about the PAs. Dr said she will let me know.
PPLPMDL0020000001	Berea	OH	44017	4/12/2013	Spoke with Cora and she was very familiar with Intermezzo. Reviewed Tom and Scott profiles for OxyContin and Butrans. Explained the copy cards and vouchers. Delivered the managed care insight and asked her thoughts on the statistic but she did not seem to understand what I was saying.
PPLPMDL0020000001	Akron	OH	44313	4/12/2013	Pharmacy is still not stocking intermezzo. Pharmacist said that they will order it when they start seeing prescriptions. I explained the dosing and indication and left dosing card. Explained both Butrans and OxyContin dosing and patients appropriate for each.
PPLPMDL0020000001	Berea	OH	44017	4/12/2013	Spoke with dr, Shirley the prior authorization manager and the office manager about OxyContin patient type Tom and the office manager told me the office has a lot of workers comp. I asked if she mentioned that for a certain reason and she mentioned coverage as an issue. I described Butrans with the opioid naive patient study. The staff was not aware of Butrans but the dr was and I was asked to schedule an appointment. I asked Shirley where she stored opioid vouchers and she said she keeps them locked up.
PPLPMDL0020000001	Berea	OH	44017	4/12/2013	Tina, the ma, said doctor only sees reps and books appointments for new products. I said my products are not new but the dr may want more information. I left the opioid naive Butrans study and the intermezzo dosing guide with my card.
	Cleveland	OH	44127	4/12/2013	Presented Scott profile, I asked dr. If she has patients in her practice like him. She replied yes. I asked if Butrans' 7 day transdermal delivery system would be appropriate for patients like Scott, she agreed. Went over Initiation/Titration dosing, how to RX, supplement short acting and asked for 1 patient today/tomorrow that is appropriate. Went over OxyContin 7 dose strengths, asked for those patients that are on Oxycodone/Percoct Around the clock. OxyContin q12h. She will consider intermezzo, I discussed middle of the night awakening and indication. Discussed dosing. She stated she has that problem on occasion and suspect many of her patients do
PPLPMDL0020000001	Berea	OH	44017	4/12/2013	Spoke with jasmine and she explained that the dr signs for sample but does not do lunches or see reps. I left the OxyContin titration and Butrans titration guide.
PPLPMDL0020000001	Cleveland	OH	44105	4/12/2013	Discussed OxyContin and it's seven dose strengths reminded Dr. of Q 12 H dosing. appropriate switches are patients that are on Percocet around-the-clock, RX OxyContin where appropriate, he agreed. Briefly discussed Butrans seven days of buprenorphine delivery, schedule 3 Reinforced with Dr. The appropriate initiation dose and the titration process for Butrans. Intermezzo indication said he was interested in trying it himself gave savings
PPLPMDL0020000001	Mayfield Heights	OH	44124	4/12/2013	Spoke with both tech Wasan ( female) and pharmacist Rod Shipley. Left Intermezzo guide for pharmacists & dosing flashcard. Reviewed 5-day free trial with Rx, monthly savings, he can direct patients to Intermezzo.com to print out savings. No AB rated generic. None on shelf, none dispensed yet. No Butrans on shelf, doesn't recall any previous scripts. Went over Butrans indication & patient guide, three doses available for titration. Rod was hesitant to discuss OxyContin, does not recall dispensing, nor would he check stock. Left RX patrol flashcard.
PPLPMDL0020000001	Cleveland	OH	44127	4/12/2013	I asked if Dr. saw patients like Scott. He agreed I then asked if he would prescribe Butrans. He along with Dr. Agra said they would. He likes the 7 day transdermal delivery system. Went over OxyContin and the seven tablet strengths asked for patients that are currently on around-the-clock oxycodone that he could prescribe OxyContin to 12 H were appropriate, dr agreed. Intermezzo indication/ 5 day trial
PPLPMDL0020000001	Cleveland	OH	44106	4/12/2013	Intro. OxyContin/Butrans indication. Briefly discussed Dr. Amps patient types, she said they refer patients to Pain Mgmt. Will speak to dr. To relay info. And possibly set appt.-<font color=blue>cb>CHUDAKOB's query on 04/19/2013</font>Who did you speak with. On a non-MCP call be sure to place in the notes who you spoke with as well as their title. For example, you might say spoke with Mary, the MA, or talked to Sara, the nurse.-<font color=green>cb>GLUTKOMA's response on 04/20/2013</font>-Thanks for the clarification-<font color=blue>cb>CHUDAKOB added notes on 04/21/2013</font>-No problem. It is a learning experience for
PPLPMDL0020000001	Richmond Heights	OH	44143	4/12/2013	Asked to see Dr Ashraf, he was too busy to come up front. Left him May 8 invite. spoke with his medical assistant Heather. Reviewed Butrans indication, showed her how trial, savings work, then went through new Butrans patient tear sheets with Heather. she will pass along all to Dr Ashraf. Left one pack of Butrans cards. Detailed Intermezzo: reviewed MOTN, prn use/62% of nights in clinical trials, gender specific dosing, 5-day trial with Rx & savings with Heather. Went through Intermezzo patient guides and Told Heather that patients can visit Intermezzo.com to print out savings.
PPLPMDL0020000001	Akron	OH	44320	4/12/2013	I asked dr if she had any activity for Butrans since we last spoke? Dr said no but she noticed all the Butrans materials in the rooms. Dr said she is glad it is there to help remind her. I told her to focus on patients uncontrolled on tramadol or vicoden and showed case studies. Dr agreed to look.-<font color=blue>cb>CHUDAKOB's query on 04/19/2013</font>-Cliff, this is leading with product. Think about how you could have gotten to the same place by asking an impact questions such as "tell me about the frustrations you deal with when prescribing a branded product" This will allow you to lead to product.-<font color=green>cb>REICHL's response on
PPLPMDL0020000001	Mayfield Heights	OH	44124	4/12/2013	04/19/2013</font>-Agreed. I'll do that-<font color=blue>cb>CHUDAKOB added notes on 04/21/2013</font>-Thank you! I appreciate your open-mindedness!
PPLPMDL0020000001	Mayfield Hts	OH	44124	4/12/2013	Met with both tech Autumn & pharmacist Warren. They didn't have time to check stocking. Several customers in line & steady stream. They had heard of Intermezzo, but needed further information. Left pharmacists guide for intermezzo, doing flashcard & patient guide, updated FPI. After detailing intermezzo, told them they could direct patients to Intermezzo.com website to print out savings. No Intermezzo in stock. Left one pack savings cards for Butrans (proper application, disposal discussed) & OxyContin. Reviewed recommended q 12 hr dosing for OxyContin.
PPLPMDL0020000001	Mayfield Hts	OH	44124	4/12/2013	While waiting for Dr Laham, met with their prior auth/prescription coordinator/CPH Denise Giunto, and presented new Butrans tear sheets which she likes better than the patient guides. Left her 2 boxes of Butrans savings cards. Reviewed formulary grid, and where Butrans is preferred. Reinforced importance of patients leaving office with trial/savings card. OxyContin, reviewed formulary grid, \$90 savings each month and recommended q 12 hr dosing. Presented Pain mgt kit, which Denise thinks is a great resource & will be extremely helpful to the doctors and nurse practitioners. Denise says to come directly to her each time I visit, she provided me with her direct phone line. She will help me get in front of the doctors/ CNP's. she paged dr laham 2x for me, he finally came out to get me, and was in scrubs finishing up a procedure. We met in hallway. He just had a few minutes. I
PPLPMDL0020000001	Mayfield Heights	OH	44124	4/12/2013	presented/walked him through new Butrans tear sheets, which he liked. Does he feel they will be helpful to patients? Yes. Dr Laham, I will follow up with you next week.
PPLPMDL0020000001	Mayfield Heights	OH	44124	4/12/2013	Reviewed my products with medical assistant Zoya while I was waiting for Dr Poliakova. First time I've visited as Purdue rep. Detailed Butrans using patient profiles Scott & Nancy. for OxyContin, used patient vignettes visual aid.. After detailing both Butrans & OxyContin, Dr Poliakova says she is not comfortable writing scheduled pain meds at this time. She does however appreciate my presentation. extended invite for May 8 program, if shed like to learn more about Butrans. she will keep in mind. I asked, hoe about treating pain for patients that you trust, elderly, 2 She is still hesitant. After I presented Intermezzo, Dr was very favorable, she liked sublingual delivery. She asked several questions & said she will consider for MOTN insomnia agents. She is comfortable with writing insomnia agents. Directed her to Intermezzo.com for printing of patient savings.
PPLPMDL0020000001	Richmond Heights	OH	44143	4/12/2013	Continuation Note from 4/11 (computer error)An 80 bed Assisted Living facility, can accommodate up to 105 residents. At times they have a large amount of Hospice residents, 22-25. Payors consist of: Private pay, Kaiser and some commercial) Medicare & Medicare Part-D for pharmacy. CPP is Omnicare of Wadsworth and some residents use mail order. No Medical Director or NP's are on staff. A medical staff meeting is held the first Tuesday of every month @ 1:30. Joan stated, "Everyone forgets about "AL", but these residents suffer from pain daily too and need to be treated." Pain is assessed Q-shift and upon report of pain. A numeric pain scale is used. Joan
PPLPMDL0020000001					informed me that they currently use Percocet & Vicodin for Arthritis pain, Tramadol for Bone Pain and Morphine, Dilaudid, Duragesic and Oxycotin for LTC and Hospice residents. Several in-services were scheduled.
PPLPMDL0020000001	Akron	OH	44319	4/12/2013	I asked dr why he doesn't see Butrans as a good option for a patient failing an IR opioid? Dr said because it is too expensive. I told dr that I don't believe him and he said he's ok with that. Nothing else learned.
PPLPMDL0020000001	Akron	OH	44312	4/15/2013	Dr said that he has not seen the right patient for Butrans lately. I asked what is the appropriate patient? Dr said the patient on vicoden or Percocet who is not getting enough pain relief. I showed dr the s out profile and asked him if he has any patients uncontrolled on tramadol? Doctor said he does and understands that Butrans should be used before vicoden is prescribed. I reviewed the profile and asked him for his commitment. Doctor said he invests a lot of time dealing with patients pain. I told him he can simplify it by prescribing Butrans for patient that meet the indication. Reviewed the copy card and formulary. Quick discussion about intermezzo indication and asked him to identify patients.
PPLPMDL0020000001	North Hampton	OH	45349	4/15/2013	Dr. had forgotten the dose of Butrans. We discuss the three doses and focused in on patient types better on hydrocodone that could be switched over to Butrans. She's frustrated with pain management but feels that Butrans make sense for a few patients in your practice She said she would start people this week and I told her I'll follow up in three weeks at a lunch to review Her experience
PPLPMDL0020000001	Parma	OH	44129	4/15/2013	Called Kim Barber to clarify date of in-service for July 29th on pain documentation
PPLPMDL0020000001	Akron	OH	44333	4/15/2013	Dana told me that she prescribed 2 Butrans prescriptions today. Both on vicoden and she needed copy cards. Dana told me one patient had Humana Med D plan with Medical Mutual secondary and she was told that she could not use the copy card. I told her to check with the patient to ensure the prescription was ran through medical mutual.
PPLPMDL0020000001	Lakewood	OH	44107	4/15/2013	Introduced myself to dr and Shelley. Discussed how and when the dr prescribes OxyContin. Dr said he is not afraid and he prescribes the 10 20 and 40 and does not go higher. He said he uses after Percocet. I asked how long he uses an immediate release before prescribing OxyContin and he said he it depends. I asked about his Butrans experience and he said it is too difficult to titrate, not covered and every time he thinks of it he has a reason not to prescribe. I discussed Scott profile and said I will follow up next visit with a voucher discussion and proper titration. Introduced Intermezzo and he said he uses zolpidem and restoril. I asked him why and he said coverage and no hanger over effect. I explained explained the driving visit and said next visit I would like him to tell me more about his Butrans trials but to keep and open mind.
PPLPMDL0020000001	Akron	OH	44312	4/15/2013	Quick discussion about all products as dr was leaving office. I gave him e OxyContin dosing card, Butrans initiation and titration guide and intermezzo dosing. Dr said that he sees how Butrans could benefit a lot of his patients. I asked him to try if like patients like Scott. Gave dr the Scott profile. Nothing else learned.
PPLPMDL0020000001	Akron	OH	44312	4/15/2013	Followed up from program last week. Abby said she learned a lot and she thinks Butrans is a good alternative to patients failing IR opioids. She said dr is not in today and is swamped with patients. I handed her the Nancy profile and the initiation and titration guide. I told her I would stop back to get time with doctor Midian and review patient savings cards.
PPLPMDL0020000001	Lakewood	OH	44107	4/15/2013	Spoke with Cindy and asked her if there were any managed care changes with OxyContin because some of the Lakewood offices have claimed to have problems getting OxyContin approved. She said she has not seen or had any problems with approval but Butrans was a different story. I asked what she thought drs should be telling their patients about butrans and she said insurance coverage. I discussed the nancy patient profile and asked her if this patient would resonate with the dr and she said a little.
PPLPMDL0020000001	Lakewood	OH	44107	4/15/2013	Spoke with John and asked him what he feels is important for drs to know about OxyContin and Butrans. He said insurance for Butrans and OxyContin he could not think of anything. I introduced Intermezzo and discussed indication and limitation of use.
PPLPMDL0020000001	Lakewood	OH	44107	4/15/2013	Quick call due to busy office. Explained what products I have and discussed chronic pain.
PPLPMDL0020000001	Stow	OH	44224	4/15/2013	Provided overview and key selling messages for all products to Sue the pharmacist. Sue said that she has not filled any intermezzo yet but likes the product and sees the need. She told me that they have a few patients on Butrans 5mcg and are always refilling OxyContin.
PPLPMDL0020000001	Richmond Heights	OH	44143	4/15/2013	Called to speak w/ Aldona Bur to schedule in-service on Constipation, N/A left msg on her voice-mail
PPLPMDL0020000001	Lakewood	OH	44107	4/15/2013	Spoke with Kathleen and Mary who explained that the dr does not write OxyContin and does not see reps. I asked if it was okay to stop by in case the dr has a need in the future to write OxyContin and has questions. Kathleen I led of with the communication insight again and asked dr if trying to figure out how to treat takes up too much time? Doctor said it is difficult especially when treating pain because change is always happening. I told dr that the resources available for our products can help the patient and doctor communicate more effectively. Dr said he wants those resources. I discussed all profiles for OxyContin and asked him if he had patients like those. Dr said he does and they are not the ones he wants to deal with. Dr said there are so many hoops that he and the patient need to jump through when treating chronic pain. Dr said he does prescribe OxyContin and typically it is for patient on Percocet. I told dr to prescribe it q12h instead of bid. Showed dr the visaid for that and dosing flexibility. Explained Butrans in depth and provided all key selling messages. I discussed the Scott and nancy profile and asked if he will try Butrans clinically in the right patient to see for himself how it works? Dr said he will try it but can't guarantee it. I discussed copy cards and information kits. Intermezzo indication, limitations of use and dosing. Dr said he thinks it is a good medicine and may try it as well.
PPLPMDL0020000001	Akron	OH	44313	4/15/2013	

PPLPMDL0020000001	Akron	OH	44313	4/15/2013	Told the pharmacist the intermezzo indication, limitations of use and dosing. Pharmacist has seen a couple but with PA's. discussed formulary coverage. I was told by the technician that it probably won't be used much until coverage gets better. Discussed Butrans and OxyContin dosing and indications.
PPLPMDL0020000001	Akron	OH	44333	4/15/2013	Short discussion through window. I handed dr the nancy profile and asked him if there is a downside to prescribing Butrans for a patient like her that is complaining of pain on vicoden? Dr said no and that he does prescribe Butrans for that patient. I asked dr to also prescribe it for a tramadol failure. Nothing else learned. Discussed with staff the formulary coverage specific to the office and who is paying for Butrans. Left the Scott profile for doctor. Office doing ok on copay cards.
PPLPMDL0020000001	Akron	OH	44312	4/15/2013	Quick discussion with dr about identifying patients for OxyContin and prescribing q12h. I gave dr the Scott profile and asked him if he has any reservations using Butrans for a patient like Scott who is failing tramadol. Dr said no and said he knows he needs to try it. Gave intermezzo dosing card.
PPLPMDL0020000001	Lyndhurst	OH	44124	4/16/2013	Lunch & my first time meeting Dr. Reed. Asked what distinguishes a Butrans patient from an OxyContin patient in her practice? She says for patients that have issues with tylenol or GI issues, she will avoid OxyContin and use Butrans. Plus, Butrans as weekly pain patch, offers in her opinion, more steady, consistent pain relief vs. patients on oral pills, who will forget to take pills at certain times, or not follow exact schedule, leading to "peaks and troughs" & breakthrough pain. She really likes Butrans, but has had trouble in the past with coverage, and Medicare D coverage. We reviewed updated formulary coverage, and prior auth for Butrans after failing another agent for 30 days. I made sure to review updates with Diana who handles prior auth's. Also spoke with NEW nurse Katie Hudson (RN) while talking with Dr. Reed. Katie is pregnant, and has been waking up MOTN. She asked me if it's ok to take Intermezzo. T responded it's a Pregnancy Category C and walked her through FPI, reviewing pregnancy category C nursing mothers info. She was satisfied with the response, & says Benadryl has been providing some relief for loss of sleep. Dr. Reed, OxyContin 590 savings/month, Butrans tria/savings. Intermezzo 5-day trial w rx. Patients can print savings out @ intermezzo.com. Dr. Reed says Intermezzo has been working well for her patients, all positive outcomes. She also feels Intermezzo is good for menopausal/post-menopausal women, who complain of MOTN.
PPLPMDL0020000001	Northfield	OH	44067	4/16/2013	Spoke with Katie & introduced intermezzo using pharmacy booklet. Showed & discussed 3 key messages & discussed available savings & trial offer for 5 pills. Also reviewed Butrans appropriate patient type/range. She said she has filled prescriptions for Butrans in the past but does not recall seeing anything for it recently. Reviewed available savings for Butrans & OxyContin & let her know all 3 medications' savings are available online.
PPLPMDL0020000001	Northfield Center	OH	44067	4/16/2013	Spoke with floater pharmacist & introduced intermezzo, showing key pharmacy messages. She said she hasn't seen anything for it but had heard about it. Discussed Butrans as a once weekly CIII opioid analgesic & reviewed appropriate patient type. Let her know savings for Butrans, OxyContin, & Intermezzo is available online. She agreed to leave my information for regular staff.
PPLPMDL0020000001	Cleveland	OH	44130	4/16/2013	Reviewed OxyContin 7 tablet strengths for individualization of dosing & reviewed Butrans appropriate patient type/range, showing table in initiation guide. Pointed out Intermezzo trial/savings cards.
PPLPMDL0020000001	Cleveland	OH	44130	4/16/2013	Quick call- Dr Fedorko said he had no time today to talk about opioids, adding that "no one" is using narcotics correctly. Reviewed Butrans as a once weekly transdermal option in the CIII class. I told him it is merely an option should he identify an appropriate patient. Also reminded him of Intermezzo indication & trial/savings.
PPLPMDL0020000001	Parma	OH	44134	4/16/2013	Dr Hernandez said he would like me to submit him as a speaker for Butrans again. He went on to say that he recently seems to be educating more & more pharmacists on Butrans & buprenorphine in general. He said he asked one of his patients who is a pharmacist what she typically does when she sees that a particular physician commonly writes for Percocet at a large quantity month after month for a patient. He added that he suggested to the pharmacist that they discuss long-acting options with the physician. I reminded Dr Hernandez that he has in the past told me of his liking of OxyContin in appropriate patients. I asked what it was that he liked about it. He said it is effective for the right patient & he still does write it at low doses on occasion, he just does not like to have a patient on it for a long time. Dr Hernandez said it is a good medication for patients to use after a surgery while they are recovering. Reviewed q12h dosing & appropriate patient type. He said this is how he uses it. Discussed intermezzo DTC marketing & indication with Val.
PPLPMDL0020000001	Cleveland	OH	44135	4/16/2013	Joe Hennessy has a meeting scheduled w/ Manor Care to discuss NE Program/ Access into LTC Facilities.
PPLPMDL0020000001	Parma	OH	44129	4/16/2013	Quick call- Dr Ortega said he recently started a new patient on Butrans but has not heard back from the patient yet to know how they are doing. He added that he did not want the patient to be taking so much short-acting medication so he thought Butrans would be a good option for them. Reviewed OxyContin & Intermezzo managed care/savings information with Cindy.
PPLPMDL0020000001	Middleburg Heights	OH	44130	4/16/2013	Spoke with Angie, MA, & introduced myself & Purdue's products. She said that since all the physicians are out of the office most of the time, the best way to see them is to catch them before they leave the office. She said generally, this occurs before 9:30 & added that Tuesday mornings are their meeting mornings. She gave me information on each physician who practices there. She said all of them will take information, so I gave her product information to leave for each one. She said each physician is assigned an MA or nurse who travels to the patient's location with them.
PPLPMDL0020000001	Akron	OH	44312	4/16/2013	Dr notified to me that he prescribed Butrans for a patient and was unable to find the Butrans copay cards. I showed dr where they had been placed by someone in the office when I was there Wednesday this week. Dr informed me that they were put in the wrong location. An acordion file in the sample closet is reserved for all copay cards. Dr said he started Butrans 10mcg for a patient on vicoden and has good insurance.provided dr with additional copay cards
PPLPMDL0020000001	Lyndhurst	OH	44124	4/16/2013	Lunch, Karen let me know she cannot write CII, and has to have Dr. write scripts for her patients on OxyContin. However, she can write CIII (Butrans) She feels same as Dr. that Butrans is initiated when patients have GI issues/issues with tylenol. She also likes the fact that patients only have to think about a 1x week patch, and don't have to worry about taking pills. Went through dosing and max dose of 20 mcg/hr Butrans.Left patient guide, which she thinks helpful. Went over first aid tape, if patch loosens, and bclodiusse/tegaderm, if further issue with loosening. Then to OxyContin. Reminded her of 7 doses available for 25-50% titration. q12 hr recommended dosing. Intermezzo, reviewed MOTN, prn indication. Went through intermezzo patient guide & left patient education slim jims. Reminder 5-day free trial w rx, savings remaining 11 ms. savings. Direct patients to
PPLPMDL0020000001	Uniontown	OH	44685	4/16/2013	Quick discussion about Butrans and Intermezzo. Showed him the Nancy profile and asked him to gain clinical experiences with the product. Introduced intermezzo indication, limitations of use and dosing. Dr said he will do his best to use Butrans but can't promise anything.
PPLPMDL0020000001	Westlake	OH	44145	4/16/2013	Dr said he does not write opioids anymore. I asked what does he do for his existing patients in pain. The dr handed me a list he gave his patients with drs he referred them. I asked why he stopped and he mentioned the house bill and the Lakewood police coming to the practice September of last year. Dr is just coming back from medical leave. Dr said he had more than 50% of his was pain. He was investigated and not arrested but he will not prescribe. I discussed Intermezzo and he said he could see a need for Intermezzo in his practice. He remembered the information the former intermezzo rep told him. I reminded him if the indication, limitation if use and dosing. I asked why he had not written and he said insurance. I reminded him of caressoure and a failure on zolpidem with a prior auth. Dr said he would keep it in mind. I asked who helps him remember and he said Jennifer.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	4/16/2013	I let Jennifer know that when patient call in for refills of ambien to ask them about their insomnia. If patients have problems staying asleep then she needs to bring those patients to the attention if the doctor
PPLPMDL0020000001	Lyndhurst	OH	44121	4/16/2013	Called to speak w/ Staff Development Coord., Nancy Strauss 330-945-9797, to schedule educational in-service for nursing staff. N/A, Left Msg on her voice-mail.
PPLPMDL0020000001	Lyndhurst	OH	44121	4/16/2013	Met with pharmacy manager Mike Fusek. Mike has heard of Intermezzo, but they have none on shelf, & have not dispensed yet. Went through product detail, left Pharmacists guide, dosing flashcard. went through patient guide. He has not problem with breaking open box for 5-day trial. He will be sure to keep an eye on appropriate gender dosing. Told him patients can visit intermezzo.com to print coupons. Butrans, he has patients on from Dr. Laham. He's got 5 and 10 mcg/hr on shelf.left him patient guide. As for OxyContin, he says they don't dispense very often. He didn't have time to check stocking. He also states most rx come in as q12 hour, after I asked him if area HCP's follow our recommended dosing of q12 hr.
PPLPMDL0020000001	Lyndhurst	OH	44124	4/16/2013	Placed a phone call to speak w/ Diana in Staff Development,I spoke w/ Shelley in Staff Development who informed me that Diana just stepped out of the office. Shelley took my contact information and said she would have Diana contact me.
PPLPMDL0020000001	Uniontown	OH	44685	4/16/2013	Showed dr the OxyContin patient profiles and she claimed that she only has a couple of patients on it and is just refilling. Said she prescribes no new prescriptions. I asked dr what the downside is of providing a q12h oxycodone when a patient is failing the IR oxycodone. Dr didn't want to answer and said she is too busy for a discussion. Left her Butrans and intermezzo dosing information.
PPLPMDL0020000001	Munroe Falls	OH	44262	4/17/2013	I showed dr the opioid experienced trial and provided review of it. I stressed the importance of identifying appropriate patients and the ones in the study were force titrated to the 20mcg. Discussed the pain score reductions and how it can apply to her practice. Dr said she will red more in depth and we can discuss next time. I asked her to continue prescribe OxyContin for the patients discussed and gave her a placebo intermezzo packet.
PPLPMDL0020000001	Independence	OH	44131	4/17/2013	Dr Trickett said she is frustrated with what practice has become, adding that she is getting "a ton" of patients from primary care who are taking 240 Percocet per month for no apparent real reason. She said the House Bill has caused a huge increase in referrals to her, but many of the patients she does not feel are legitimately in enough pain to warrant so much short-acting medication, adding that if they have a chronic problem, they should be on something long-acting anyway. I asked her what type of patient she is currently using OxyContin in. She did not respond, but asked how Butrans is like Suboxone. I told her we do not have comparative data & added that Butrans is used for pain only & also reviewed dosing. She said she doesn't prescribe Suboxone but knew they contained the same molecule & had heard that there has been a problem with getting patients off of Suboxone. Dr Trickett said she has used more Butrans lately & plans to keep using more. She said she likes the idea of using it for patients who she is getting from primary care. Discussed importance of appropriate patient selection & setting appropriate expectations for patients. Also discussed using her Butrans Patient Experience kits as a way to teach patients about Butrans & enhance communication & their experience with the medication. Dr Trickett committed to discussing Butrans with more appropriate patients, giving the kits out, & having appropriate patients at least try Butrans. Intermezzo reminder-indication.
PPLPMDL0020000001	Akron	OH	44320	4/17/2013	Spoke to doctor about how he is going to implement Butrans into his practice. Dr said all the materials are in the exam rooms and he said he will begin using Butrans. I told dr to identify patients like Scott and nancy with private prescription insurance like shown in his exam rooms. Dr said he plans to follow the information I left.
PPLPMDL0020000001	Akron	OH	44313	4/17/2013	Short message at window about using OxyContin for his Medicare D patients who are failing Percocet. I also asked him if he has used Butrans clinically yet? Dr said no. I asked him if he had any reservations in using it? Dr said he doesn't. I told him I'm leaving copay cards to help his patients potentially get 28 days free and save \$50 off their monthly prescription.
PPLPMDL0020000001	Copley	OH	44321	4/17/2013	Spoke to Deana the pharmacist about all products. Introduced intermezzo indication, limitations of use and dosing. Pharmacy has not dispensed any yet. Discussed all key messages about Butrans. They have a couple of patients on the 10mcg doses. Gave dosing and patient type information for OxyContin.
PPLPMDL0020000001	Copley	OH	44321	4/17/2013	I gave dr the nancy profile again and asked if there is a downside to using Butrans for a patient failing vicoden? Dr said not other than cost. Dr claimed that Butrans is costing his patients too much money and he would rather keep them on the generic or refer out. I asked if the patients he is speaking about have commercial prescription insurance? Dr said he doesn't know and said that he prescribed intermezzo twice and in both situations his patients were upset because it cost them \$185. I asked if those patients had private prescription insurance? Dr said he didn't know. I asked him to look because that is extremely important to what a patient must pay and there can be a considerable price difference! Dr did not look up the insurance information.
PPLPMDL0020000001	Mayfield Heights	OH	44124	4/17/2013	Placed a follow-up phone call to speak w/ Staff Development Coord., MaryAnne. Spoke w/ receptionist Joan, who stated, " MaryAnne's phone line is busy." She said, MaryAnne does not have voice-mail. She took my name & phone number and said that she would give MaryAnne a msg.
PPLPMDL0020000001	Euclid	OH	44117	4/17/2013	Dr. Morley had just a few minutes. Left him invite for May 8 program, he may come because he refers 90% of his patients to Dr. Sami for their injections. Wed is good nite. Walked through Butrans patient guide, as he feels this will be helpful in educating his patients on proper application/disposal/rotation. Introduced him to Intermezzo, so if patients ask about product, they will be knowledgeable, and be able to answer questions. He was interested in learning more about Intermezzo. Also introduced our pain mgt kit and left orange web key. Dr. Morley, we have a lot of tools to assist you with pain management in your practice. You and your staff are welcome to print out any of our forms.. I will follow up with you next visit.<font color=blue><b>CHUDAKOB's query on 04/26/2013</b></font>Jenny, Intermezzo is third position call. What happened to OxyContin in the second position on this call??<font color=green><b>BALIE's response on 04/28/2013</b></font><b>My mistake, products delivered in wrong order. Planned on getting to OxyContin, but did not on this call.</font color=blue><b>CHUDAKOB added notes on 05/02/2013</b></font>OK. Thanks for the clarification!

	Euclid	OH	44132	4/17/2013	Met with Sue and Jane up front, and staff. There are 6 HCPs here: 4 doctors and 2 CNP's.. Sue says Dr. Paul Thomas (THUR only) has the highest volume of patientS, and that's who reps schedule lunches with/Thu fill up first. Left 6 copies of May 8 Butrans invite. Left 6 copies Butrans days of week promo brochure. Left 6 updated FPI and patient brochures for all. sue and jane say theyre in middle of office renovation right now, and taking no samples. If they really want my samples/savings cards, they will make exception. Best thing is to talk to drs at lunch. Sched lunch for THURS MAY 2 1:30 to 3:30, all the male Thomas drs will be there (3). First time at this office as Purdue rep.<font color=blue><b>CHUDAKOB's query on 04/26/2013</b></font>-Dr. Thomas appears to have little interest in prescribing any opioids based on his data. Wondering why you are calling on him?<font color=green><b>BALLJ's response on 04/28/2013</b></font>-There are more than one Dr Thomas in this practice. I stopped in to their Euclid location, because I was in the area. I scheduled a lunch when Dr Paul Thomas will be at Euclid practice. (Dr Paul Thomas is only in Euclid on Thursdays). He has the most potential of this group. They also have a Mentor location, where Dr Thomas practices every Mon, Tues, Wed and Friday,<font color=blue><b>CHUDAKOB added notes on 05/02/2013</b></font>I see. Thanks for clarifying Jenny.
PPLPMDL0020000001	Euclid	OH	44117	4/18/2013	In-Services were completed at 3PM & 5PM for the Nurses on Pain Management. 11 were in attendance.Discussion and interaction took place on Barriers in Pain Assessment/Management and Consequences of unrelieved Pain in the elderly. The Patient Comfort Assessment guide and The Wong Baker Pain Scale was handed out and reviewed. I was able to meet briefly with the Medical Director, Juanita Castaneda prior to beginning the first in-service. I introduced myself and Purdue's NE Program. D/T the small amount of time, I was only able to present the key points about Butrans: (The indication, the first 7 day trans-dermal patch for moderate to severe chronic pain, & a scheduled III and the appropriate patient type). I gave her handouts of both Butrans studies to review. I explained that a prior auth. would be needed. She was talking with the Nursing Supv.,Charlene Miller, identifying possible residents. Charlene introduced me to the Director of Nursing, Madeleine Moore, I presented Purdue's NE program to her. She asked me for a list of in-service topics. I informed her that I did not have a handout of in-service topics, but that I had already met w/ Charlene and the topics were reviewed and in-services were scheduled. She did request unbranded/branded materials/ handouts the next time I come to do an in-service. I confirmed that I would be doing another in-service on 4/29 and I would meet w/ her then, if she is available. Positive feedback was received from the DON on the NE Program.
PPLPMDL0020000001	Independence	OH	44131	4/18/2013	Positioned Butrans for appropriate patients who require an opioid analgesic for moderate to severe chronic pain. I asked Dr Sundaram what the down side of trying one appropriate patient would be. Reviewed CIII & once weekly dosing. He said he wishes he could find someone for me & will keep trying. Reviewed OxyContin broad formulary coverage & Intermezzo indication & dosing with June & Terry.<font color=blue><b>CHUDAKOB's query on 04/28/2013</b></font>Perhaps using our clinical trial data to prove the efficacy of our product will be of benefit. Usually when a physician does not try the product it is because he/she is not convinced of the efficacy.<font color=green><b>APSEGAS's response on 04/29/2013</b></font>-OK. I will try that again. Thank you.<font color=blue><b>CHUDAKOB added notes on 05/02/2013</b></font>-Thank you for taking the suggestion Dr Popa saw my OxyContin visual aid & said she "got rid" of all her patients on OxyContin & said she sent them "away". She added that she will not write CII medications & asked if she is correct that Percocet is CII. I told her this is true, as is OxyContin, both of which contain oxycodone. She said she doesn't write Percocet either. I told her this is one of the reasons I thought she might like to try Butrans for some patients, as it is a long-acting opioid option in the CIII class. I reminded her that it is still an opioid & therefore has abuse & addiction potential. I asked that she use just as much caution in prescribing Butrans as she does other CII medications. Showed her the Butrans initiation/titration guide table & discussed appropriate patient type/range. I asked her thoughts. She looked at the table & said she does have patients on Tylenol with Codeine & added that she will instead now try Butrans for some of those patients. Discussed titration & ability for patients to use supplemental analgesia if necessary. She asked to keep the initiation/titration guide to keep on hand. I introduced Intermezzo. She said she knows of it but it is too expensive when patients can just take generic Ambien. Reviewed indication & patient type.
PPLPMDL0020000001	Parma	OH	44129	4/18/2013	Quick call- Caught Dr Chagin at the window. Positioned Butrans for appropriate patients who may benefit from a once weekly transdermal system to treat their moderate to severe chronic pain. Dr Chagin just said he should use it & keeps forgetting & thanked me. Spoke with Debbie & reviewed Intermezzo indication, dosing, & patient type. She agreed to give Dr Chagin information on Butrans & Intermezzo.
PPLPMDL0020000001	Parma	OH	44129	4/18/2013	Quick call- Positioned Butrans for appropriate patients taking less than 80mg equivalent oral morphine per day & OxyContin q12h for those beyond that range. Dr Paat said he was very busy today, waved, & walked into a room. Started to go over details of Intermezzo with Shari, but she cut me off, telling me how busy they were today & asked that I just leave the information for them.
PPLPMDL0020000001	Tallmadge	OH	44278	4/18/2013	Greeted dr with Butrans and intermezzo placebo products. I gave quick intro to Bo products giving the indication and doses. Dr said he will look at the information and said we would discuss over lunch. Nothing else learned.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	4/18/2013	Quick standup call and asked dr where she is using oxycontin? Dr said she is using it only when necessary. I asked when that is? Dr said when she thinks a patient needs long term pain relief. I attempted to review the patient profiles and dr got a phone call. Left dr with the initiation and conversion guide.
	Parma	OH	44134	4/18/2013	Spoke with Kathy, pharmacist, giving Intermezzo pharmacy booklet & reviewing 3 key points. She said she would not make a generic substitution for Intermezzo & asked about cost. Discussed managed care landscape & let her know about trial & savings. Showed information sheets on Butrans & OxyContin savings programs. She said they have cards for both medications. I let her know if she runs out, they can be printed from their respective websites. Also reviewed eligibility requirements.
PPLPMDL0020000001	Parma	OH	44134	4/18/2013	Quick call- Positioned Butrans for appropriate commercially insured patients who are going from taking short-acting opioids PRN to daily due to moderate to severe pain from a chronic condition. Reviewed Intermezzo indication & dosing. Dr Mandat said Butrans is a good medication & he has not yet used Intermezzo. He asked me to continue to bring OTC samples before walking into a room. Spoke with Linda & reviewed Intermezzo.
PPLPMDL0020000001	Westlake	OH	44145	4/18/2013	I Made a drop-in visit, and met w/ the D.O.N., Ovlisi Pilibad. I introduced myself and Purdue's NE program. I presented educational in-service opportunities. (unbranded, Pain Management & branded, OTC Laxative Line-Colace, Senokot/Senokot-S, Butrans, Oxycontin & Intermezzo). Ovlisi, said, "I am not interested at this time." When I asked her why she did not want to consider this education opportunity at no cost, she said, "I'm just not interested at this time." I informed her that I was currently working with Patty O'Shea and presenting to her STNA Classes. Ovlisi said, "yes I know." I thanked her for taking the time to talk w/ me.
PPLPMDL0020000001	Parma	OH	44129	4/18/2013	Spoke with Kathy, Dr Tolentino's MA, & reviewed OxyContin's broad formulary coverage & discussed Butrans patient type. Also gave Intermezzo overview with indication, dosing, & patient type. Kathy said Dr Tolentino will be retiring at the end of the month, so she was not accepting any information for her. She was unsure what she herself would be doing after Dr Tolentino leaves. She said it is all happening very fast & a lot is up in the air now.
PPLPMDL0020000001	Hudson	OH	44236	4/18/2013	Discussed with dr the patient types appropriate for OxyContin and reviewed all profiles in the sales aid. Dr said he does for sure use OxyContin where appropriate and especially in patients that need an ER opioid. Dr said most of his OxyContin prescriptions are refilling existing patients but does use it when his Percocet patients reach 30-40mg. Discussed Butrans by detailing Bup 3015 and provided all points from trial. Dr said he wanted the copy to review on his own. I asked dr if he will write more? Dr said he will try and the trial helped him understand it more. Asked dr to use intermezzo for patients who meet the indication.
PPLPMDL0020000001	Hudson	OH	44236	4/18/2013	Dr told me that he had a patient recently where Butrans changed their life. Dr said the patient had a history of abusing oral opioids. Dr said the patient also had come off the the oral medicine but has severe chronic pain. Dr said that he told the patient that the only product he would put her on is Butrans because dr said he believes that it will be less likely to be abused. Dr said he initiated the patient on the 5mcg and since titrated to the 10mcg. Dr said the patient told him that it has been a life changer. Dr said the patient is able to do many daily activities now. I discussed the opioid experienced trial and dr said he liked to hear how the product performed in the clinical trials. I asked dr to continue prescribing due to the recent success and dr agreed he will continue writing and identifying patients. Explained intermezzo indication and dosing and asked him to identify patients.<font color=blue><b>CHUDAKOB's query on 04/28/2013</b></font>-Cliff, when a physician makes a comment that relates to abuse of our product it is our obligation to correct that and record it in your call notes. This is the only record we have that you did what is required.<font color=green><b>REICHL's response on 04/29/2013</b></font>-I did correct the customer and told him that Butrans is a schedule 3 opioid and has the potential to be abused as any other opioid.<font color=blue><b>CHUDAKOB added notes on 04/29/2013</b></font>-Thank you. Please be sure you include the correction in your call notes in the future.
PPLPMDL0020000001	Akron	OH	44313	4/18/2013	Spoke with Sara about whether she as filled any intermezzo or Butrans since my last visit? Sara said the do now have a patient on Butrans 5 mcg from dr Higley in Cuyahoga falls. I explained the dosing and approximate conversions as well as titration and conversions. I explained the intermezzo indication and dosing specifics. Showed them the sample packet and how to open it. I asked Sara to consider ordering the 10 and 20 mcg Butrans doses and getting intermezzo on the shelf. Pharmacy stocks all OxyContin doses and Sara said she hands out patient copy cards.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/18/2013	Short discussion in hallway. I asked dr if he sis continuing to prescribe oxycontin? Dr said that he is but only in the patients he feels are in more severe pain and other products don't do a good enough job. I showed dr the Sam profile and asked him to identify patients like him which dr agreed. Gave dr the Butrans initiation and titration guide again and asked for his commitment for clinical experience. Dr said he would try. Left him with the intermezzo dosing guide.
PPLPMDL0020000001	Akron	OH	44333	4/18/2013	Good discussion with dr about using Butrans for opioid experienced patients. Dr told me that he has a patient that dr vucetic initiated on 5mcg dose with the patient taking 30mg of Percocet and tramadol as well. Dr said the patient is complaining of pain and he is considering increasing the dose of tramadol and asked me what I thought. I showed dr the approximate conversion chart and told him the patient should be titrated to the 10mcg dose based on the conversions. I explained the opioid experienced trial and showed him how patients on 30-80 mg of morphine initiated on the 10mcg dose. Dr agreed and said it was a good idea. Dr said he learned a lot from the speaker last week for Butrans and plans on using it a lot.
PPLPMDL0020000001	Stow	OH	44224	4/18/2013	Gave dr the opioid experienced trial and discussed main points in detailer. Dr said he agrees that Butrans is a product that he should be using. I asked him to use it clinically in his patients failing tramadol or vicoden. Dr said he will. Nothing else learned
PPLPMDL0020000001	Cleveland	OH	44119	4/18/2013	I Made a drop-in visit to speak with the person who handles the education for the facility and introduce myself and Purdue's NE Program. I spoke with the receptionist, Tracey, who informed me that I would need to speak with the Administrator, Nancy Sugarman, but I was told that she was getting ready to go into a meeting. As we were speaking, the ADM. walked into her office, which is located close to the front desk. Tracey gave her my BC and explained the purpose of my visit and asked if she had a minute to see me. Tracey said that nancy would give me a call. I left PAP handouts
PPLPMDL0020000001	Parma	OH	44129	4/18/2013	Myra said she really is trying more & more patients on Butrans. I asked if a patient was taking 4 hydrocodone tablets per day chronically but doing OK on it if she would be satisfied with that. She said she would rather them be on Butrans but it isn't for everyone. I agreed that Butrans is not for everyone. Myra said she offers it to many patients, sometimes multiple times, since sometimes if they hear about it enough they are willing to try it. I reminded Myra that she is the practitioner & therefore should feel empowered to do this. Showed intermezzo sample packages that she had asked about in previous visits to show how it is packaged. Myra said she will try Intermezzo. Dawn said she has had some problems getting Butrans covered but was not specific about plans, even when I asked her. She added that it seems like starting on April 1, BWC made changes in their computer or something as she is now having trouble getting everything covered with them. Dawn also said that she doesn't think the Caresource prior authorization for Butrans is "easy" & added that she has spent a lot of time on the phone getting those approved. I told her I had not heard that elsewhere but would let her know if I uncover anything.
PPLPMDL0020000001	Tallmadge	OH	44278	4/18/2013	I gave review of the Bup 3015 trial focusing on the inclusion/exclusion criteria, pain score reductions and percentage of patients getting 30% pain reduction. I asked Beth if this helps her understand why and how Butrans should be used? Beth said it does help but she wants to take a closer look. Introduced intermezzo indication, limitations of use and dosing.
PPLPMDL0020000001	Tallmadge	OH	44278	4/18/2013	I reviewed the Bup 3015 trial discussing all main points of trial and asked him if he would be happy with his patients getting at least a 30% pain score reduction? Dr said yes he would. I asked him if he will initiate a patient uncontrolled on either tramadol or vicoden and feel good but doing it's. Dr said he has yet to use it but is not opposed in doing so. Dr said there is a chance he will use it. I showed dr the intermezzo placebo pack and how patients use it. Dr said he may use intermezzo because he had a patient tell him they had trouble getting back to sleep. I reviewed the indication and dosing.
PPLPMDL0020000001	Akron	OH	44308	4/18/2013	Based on request from Olivia Bitter with SummaCare, emailed a copy of the handouts for the following FACET modules:-FACETS of Pain Management- Primer on Addiction- Communicating to Enhance Collaboration and Outcomes/MS. Bitter and her colleagues will be reviewing the content of the programs. A follow up conference call will be scheduled to review SummaCare's plans for non-accredited educational program(s) for their case
PPLPMDL0020000001	Parma	OH	44129	4/18/2013	Re-enforced Intermezzo key messages with Heath, pharmacist. He checked his shelf & said they actually do have it now, but added that he has not filled any prescriptions for it personally. Discussed dosing & patient type. He said he thinks it is a good idea as some patients who have sleep problems don't necessarily just have problems with falling asleep. Also gave him information on Rx Patrol online resources which he was appreciative of.
PPLPMDL0020000001	Parma	OH	44129	4/19/2013	Discussed Butrans & OxyContin savings opportunities, letting him know savings is automatic if the patient is eligible through their e-voucher affiliation. I asked Dr Gigliotti what he thinks his biggest hurdle in prescribing Butrans is. He said he doesn't know, he just has to write it. Positioned Butrans for appropriate patients who are going from taking short-acting opioids PRN to around-the-clock & reviewed once weekly transdermal system & CII opioid. Reminded Dr Gigliotti of his patient experience kits & contents. He said he would try to find someone. Reminded him of broad formulary access for OxyContin & gave Intermezzo dosing information.
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PPLPMDL0020000001	Middleburg Heights	OH	44130	4/19/2013	Shown Dr Munjapara the OxyContin Tom patient profile. Dr Munjapara said he would use OxyContin for a patient like that. Discussed broad formulary access & savings cards/eligibility requirements. Reviewed Butrans dosing & appropriate patient type/range. He said it sounded like a good idea & that he could think of patients who might be good candidates for Butrans. Introduced Intermezzo indication, dosing, patient type & gave information.
PPLPMDL0020000001	Independence	OH	44131	4/19/2013	Reminded Dr Jack of his commitment to start appropriate patients on Butrans, a CII opioid analgesic dosed once weekly. Invited him to upcoming program. He said he probably would not go. Reviewed Intermezzo dosing & trial/savings cards.
PPLPMDL0020000001	Parma	OH	44129	4/19/2013	I gave Dr Roheny the Scott patient profile & asked him what is really holding him back, reminding him of several conversations where he has expressed desire to try Butrans in at least one appropriate patient. Reviewed key messages, including patient type, dosing, titration, supplemental analgesia, & managed care coverage. Also discussed Butrans as a once weekly/long-acting CII opioid analgesic. I told him this means it is still an opioid with abuse/addiction potential, but he can call it in & write refills. He said he didn't realize that. I asked if he saw a patient fitting this profile if he would just try Butrans for them, asking what he has to lose. He committed to do this. Reviewed OxyContin broad formulary coverage, including on Medicare. Showed Intermezzo visual & Dr Roheny immediately said he was just wondering where the Intermezzo rep was because he wanted to see if he could get samples for a patient to try. I gave him trial/savings cards, which he stood up on his desk. Discussed Caresource prior authorization requirements. Also started to review dosing, but Dr Roheny stopped me & recited the dosing to me. He agreed to give some appropriate patients the trial/savings cards & give it a fair trial.
PPLPMDL0020000001	Akron	OH	44319	4/19/2013	I asked dr where he is in getting a patient failing tramadol or vicoden initiated on Butrans? Dr said he has yet to do it. I asked him if he reviewed any of the formation we discussed about appropriate patients and how to initiate from the FPI? Dr said no but he knows he needs to find the fit patient. I told him again who are where to use Butrans based on his practice. Dr agreed to move forward.
PPLPMDL0020000001	Beachwood	OH	44122	4/19/2013	Introduced OxyContin Patient Essentials Packs to Dr Barrett. Showed contents & pointed out each item. He took the tracker out & looked through it. I explained that he could use these for patients who are new to OxyContin. He told me he liked the tracker because while some patients may not take the time or effort to fill it out, others would, especially if they are serious about taking steps to take control over their condition. Dr Barrett went on to say that the patients could fill out the tracker & then bring it to him on their visits so he could monitor their progress. I told him that is the idea of the program & that he has the right idea. I asked Dr Barrett if he thought this tool would be useful for him & his patients who are new to OxyContin. He said they will & agreed to give them out. He said to keep bringing them. Extended an invitation for Butrans dinner program. He said he writes a lot of Butrans & would write more if more managed care plans would allow it. Reviewed managed care information & savings.
PPLPMDL0020000001	Beachwood	OH	44122	4/19/2013	Spoke with Carol (nurse) & showed her OxyContin Patient Essentials Packs with Dr Barrett. Showed her the contents & explained that they are for patients new to the medication. She said she thought the patients would like them as a way to track pain. Reviewed savings programs for OxyContin & Butrans & discussed eligibility requirements for usage. She said she would share the information with the other nurses.
PPLPMDL0020000001	Beachwood	OH	44122	4/19/2013	Quick call- Gave Eileen an invitation to the upcoming Beachwood Butrans program, reminding her of our previous conversation. She said she would see if she could attend. She asked for more Butrans & OxyContin savings cards & asked that I give them to Ted. Spoke with nurse, Ted & introduced Intermezzo indication & alerted him to DTC marketing.
PPLPMDL0020000001	Westlake	OH	44145	4/19/2013	Quick window call while I asked the desk if they needed Senakot. I reminded dr of OxyContin strengths and managed care coverage for Medicare
PPLPMDL0020000001	Beachwood	OH	44122	4/19/2013	Extended a Butrans dinner invitation to Helen for May 8th event. I encouraged her to attend since she is newer to pain management & let her know various other practitioners would be in attendance for her to talk to. She said she would see. Reviewed Butrans patient type & CII transdermal system. Helen had come up when I was talking to Dr Barrett about OxyContin Patient Packs. He told her about the packs.
PPLPMDL0020000001	Middleburg Heights	OH	44130	4/19/2013	Dr Patel came to the lunch I did with Southwest Internal Medicine with Dr Munjapara. He said he just saw something about OxyContin in the news but couldn't recall details. He asked if there was a generic. I told him there is no generic. He looked up the article on his phone & asked about the reformulation. Reviewed bullet points from field card. Introduced Butrans key messages & showed patient type/range. He said he typically does not treat a lot of pain but rather tells patients who complain of pain to talk to their family doctor so that there are not multiple doctors involved in their treatment for the pain. Introduced Intermezzo indication, dosing, patient type.
PPLPMDL0020000001	Cleveland	OH	44130	4/19/2013	Spoke with Dawn, pharmacist, & introduced Intermezzo using pharmacy sell booklet. She said she can remember someone having it filled before but they do not get it regularly so she does not know if the patient still takes it. Dawn said she would order Intermezzo if necessary. Also discussed Butrans & OxyContin. Dawn said she still hasn't seen anything for Butrans & is somewhat surprised at that. She asked about insurance coverage. Discussed strong commercial access & savings cards. Let her know she can print savings for all 3 medications online.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/19/2013	Short discussion with dr in the Kent office about his patient type selection for OxyContin and Butrans using the patient profiles. Dr said he just saw a patient this morning that he will most likely initiate on Butrans. I asked about the patient and dr told me that the patient is on vicoden and he doesn't want to increase it because the patient is still in pain. I showed dr the approximate conversion chart and where to initiate dose.
PPLPMDL0020000001	Westlake	OH	44145	4/19/2013	Quick window call asking dr where he thinks he has the most success with Butrans and what is that patient like. Dr said lower back pain.
PPLPMDL0020000001	Akron	OH	44333	4/19/2013	Smith rd office. Office needed copy cards and dr told me he prescribed a couple of new patients Butrans this week. Dr said that both patients were failing vicoden and did not want to increase the dose. I asked him which doses he initiated on and he said he thinks they were both put on Smcg. I gave dr the Bup 3015 trial and dr said he did not have time to review. I asked dr to continue writing Butrans and OxyContin. Left OxyContin
PPLPMDL0020000001	Westlake	OH	44145	4/19/2013	Asked dr to describe the Butrans patient and he said it depends on the patient. He said he uses for both opioid naive and opioid experienced patients. He does the initial consult and the PA does the follow up but he starts most patients on 5 and titrates to 10. I asked what is the time frame for follow up appointments and he said about a month. Dr likes extended release better for patients on the immediate release or NSAID who still experience pain and are on round the clock. He does not have a time frame for moving to an extended release. I asked who he did not consider a Butrans patient and he said migraines and neuropathy patients. I asked if anything has limited his use and he said managed care has gotten better but insurance is always a problem. I asked the dr if he could tell me about a specific patient he stated on Butrans and why the next time I come so we could speak in detail and not as general. Asked about his OxyContin use and when he initiates therapy. Dr said he likes OxyContin but sometimes insurance makes him use something cheaper. I asked if this was true for his Medicare
PPLPMDL0020000001	Cleveland	OH	44130	4/19/2013	Dr Dohar asked if there is a generic OxyContin yet. I explained that there is only branded OxyContin. He asked if something changed or something as he thought he remembered hearing something recently about it. I explained the reformulation & showed field card. Went through the bullet points. He said that made sense. I asked him to be as cautious as always with OxyContin as it is still a CII opioid. Reviewed Butrans dosing & patient type. He asked how the potency compares with morphine. Showed the chart in the initiation guide & pointed out the morphine equivalents. He said this fits a patient type that he did not have a long-acting option for before this. Reviewed CII opioid & discussed starting doses & titration dose of 20mcg. Also discussed ability to take supplemental analgesia if necessary. Discussed managed care & savings offer. He agreed to use Butrans. Introduced Intermezzo- indication, dosing, patient type. He asked about cost. Reviewed managed care landscape.
PPLPMDL0020000001	Westlake	OH	44145	4/19/2013	I asked Brian how does he titrate patients. He said he sees them in 30 days. I explained that he can titrate after 3 days and I asked him what the script looks like and what he tells the patient. He said he only writes for one strength for a month. I asked what he does for break through pain when the 5 is not enough. He said he tells them to use there other analgesics. I asked if anyone very discontinues before they come back to see him and he said he has no problems. He said he likes long acting better than immediate release around the clock. I asked what his OxyContin patient looks like and if he initiates therapy. He said he lets the doctor initiate and he does the follow up. I asked if he makes recommendations for higher doses and he said sometimes.
PPLPMDL0020000001	Fairlwan	OH	44333	4/19/2013	Gave dr the new initiation and titration piece and asked him if he has had any recent success? Dr said he has only used it a couple of times. I told him to use Butrans for a chronic pain patient who may need a titration on their IR opioid. Dr said he will review the piece.
PPLPMDL0020000001	Akron	OH	44312	4/19/2013	Short conversation in hallway of stow office. I asked dr if he has used any of his OxyContin essentials kits yet? Dr said no and didn't remember them. I showed him where they are and to use them for new starts. Dr said he will and asked about getting them in his green office. I advised him for now to take a couple to the other office. Sowed dr the patient type selection for OxyContin and asked for more business. Showed him and dr Jones the Butrans initiation and titration guide and asked them to use it early on when patients fail their first IR opioid and who are deemed chronic.
PPLPMDL0020000001	Uniontown	OH	44685	4/19/2013	Handed dr the approximate conversion slide chart from the initiation and titration guide and I asked him if he would keep at least one in an exam room to help him remember to identify candidates for Butrans? Dr said he wild. I gave him 4 for each exam room. Left him with the intermezzo dosing guide.
PPLPMDL0020000001	Westlake	OH	44145	4/19/2013	Told pharm tech about Intermezzo dosing, limitation of use and explained how the patient should take. Explained no ab equal and asked what they do for out look backs and she had never heard of this even when I explained. She said they call the dr no matter what. She has seen scripts but insurance would not allow them.
PPLPMDL0020000001	Chagrin Falls	OH	44022	4/19/2013	Made a drop-in visit to speak w/ D.o.N., Janet Johnson. I spoke with Molly, Director of Activities, I introduced myself and Purdue's NE program. She informed me that Janet Johnson no longer worked there. The new D.O.N. is BeAnne Clipper. Molly informed me that BeAnne left early today d/t a family emergency. The Medical Director is no longer Lawrence Gray. The new Medical Director is Dr. Harigopal Bilaji. Molly did not know the name of their CPP. I left PAP handouts and my BC.
PPLPMDL0020000001	Mayfield Heights	OH	44124	4/19/2013	Made a drop-in visit to speak w/ Staff Development Coord., MaryAnne. Spoke w/receptionist, Joan who called "MaryAnne's office. Per Joan, MaryAnne said,"she will give you a call." I left my business card
PPLPMDL0020000001	Northfield	OH	44067	4/19/2013	Spoke with Debbie & introduced Intermezzo to her. She said she had heard of it before but didn't remember a lot of details. Reviewed key pharmacy selling messages. Also discussed savings programs for Intermezzo, Butrans, & OxyContin & let her know all 3 have savings available to print out from their respective websites or will come off automatically with their affiliation with the e-voucher system. She said they do not fill a lot of scripts for narcotics here.
PPLPMDL0020000001	Akron	OH	44320	4/22/2013	I asked dr what her frustrations are when prescribing a branded product? Dr said she doesn't have time for prior authorizations. I asked her what she does when a patient fails a generic medicines. Dr said it is much easier to gain approval from insurance companies when generic products are failed first. I told her about how well both OxyContin and Butrans are covered on formulary for branded products. I explained how identifying the appropriate patient types can help reduce the incidence of denials & pa's. I discussed the patient types for both OxyContin and Butrans and asked her to just TRY Butrans in the right patient on the right plan.
PPLPMDL0020000001	Garfield Heights	OH	44125	4/22/2013	Talked with Denise/Brittany discussed savings cards for OxyContin/Butrans. Obtained alternate location for procedures on Transportation Blvd on Weeks 2/4 on Mondays
PPLPMDL0020000001	Akron	OH	44320	4/22/2013	I asked dr if she did the PA's for the two patients she initiated on Butrans on my lat visit? Doctor said she has 88 pa's to do and she looked and could not find the Butrans patients because they are not listed by product in her computer. I asked what the patient does and would take for pain relief while waiting for the Pa? Dr said they are probably taking the medicine they were on originally. I asked how long until the pa's are completed and dr said in another week or two. Dr said she does not have anyone helping her do pa's anymore. Left the Bup 3015 for her to review.
PPLPMDL0020000001	Mayfield Heights	OH	44124	4/22/2013	Met with med secretaries Cathy and Laurie up front. Asked who would be better to talk to regarding my products, their office manager (Wendy Korzunowski) or head nurse? Laurie said their head nurse Darla Rush LPN. I then met with Darla and briefed her on all my products. She will talk with the 6 doctors and see if they'd like Butrans/OxyContin/Intermezzo savings cards in future. All drs in today, except for Dr. Nichols. Left a Scott profile, Butrans May 8 invite, Intermezzo updated FPI for all doctors; left information with Darla as well. This office is available for lunch, but none of the doctors are cores. If I see any product utilization in the future, I may schedule a few lunches. First time calling on them as Purdue rep. Since I was on same floor for lunch, stopped in. Also found out Wendy is office manager for this office, and for Dr. Freedman & Colleen Nawrocki as well.
PPLPMDL0020000001	Akron	OH	44333	4/22/2013	Placed a follow-up phone call to D.O.N., Ramona Watson to set up an appt. to discuss educational in-service opportunities. N/A. Left Msg. on her voice-mail.
PPLPMDL0020000001	Cleveland	OH	44143	4/22/2013	Although Dr. Mandel was at his Chardon location today, I was in the Mayfield office park so I dropped off May 8 Butrans invite, and updated Intermezzo FPI. Medical secretary said she would put on his desk for me.
PPLPMDL0020000001	Twinsburg	OH	44087	4/22/2013	Placed a Follow-up phone call to D.O.N., Shawn McMahon, to discuss educational in-service opportunities. N/A left msg on his voice-mail.
PPLPMDL0020000001	Mayfield Heights	OH	44143	4/22/2013	Met new medical secretaries Yana and Maja. they checked with nursing to see if they needed any savings cards for OxyContin or Butrans, and nursing said no. Girls did not know of Intermezzo. Left May 8 invites for Dr. Moyal, Papirova & Petroff. Also left Nancy profiles for all, and Intermezzo updated FPI- front color=blue<b>CHUDAKOB added notes on 05/03/2013</b>-</font>Medical secretaries are not considered non-HCP calls. An HCP is a Health care practitioner. They do not fall into this category.



	Fairlawn	OH	44333	4/22/2013	Discussed the patient types for OxyContin. Explained the patient profiles and dr said he sees all patients like the ones presented all the time and he does prescribe OxyContin for them. I read from the FPI about the geriatric patient and 33% over 65 and 9% of those over 75. Dr said he found it interesting and good to learn. Dr said he has patients in their 30's on OxyContin as well. Dr said he will continue to prescribe. I reviewed patient types for Butrans and asked him for some feedback on the patients he said he initiated. Dr said they are dosing well and did not give any specific information as to the results of Butrans. Dr said he has tried to initiate for others but the patient did not want to stop taking their pills. Dr said one of the patients was naive to opioids and is doing well. I exp,aimed the tramadol and viconden patient types. Intermezzo indication and dosing information left.
PPLPMDL0020000001	Garfield Hts Cleveland	OH	44125	4/22/2013	Brief introduction, Dr. Stated he has a patient on Butrans, no direct feedback from patient. Will follow up to discuss patient experience
PPLPMDL0020000001		OH	44143	4/22/2013	Found out from sign out front that no pharma reps permitted to visit MON or FRI. Went in and asked Sally at front desk if I could leave some information & invites, which she said I could. Told her I hadn't called on office in a while, and wanted updated on office protocol. She says that I need to come back in on a day when they allow reps, and if I want to schedule lunch, I NEED TO GET PERMISSION FROM DR SOLOMON, as all reps have to go through him to secure a lunch. DR OFF EVERY THURSDAY. Left May 8 invites for dr, Dr. Kendis and Dr. Sahiani. Also left Nancy profiles for all drs. Left Intermezzo FPI, patient guides. they only see reps Tues, Wed, Thur 10 to 11:30 am and 2:30 to 3:30 pm.
PPLPMDL0020000001	Fairlawn	OH	44333	4/22/2013	Spoke to Milad the pharmacist. I discussed intermezzo indication, limitations of use and dosing specifics. Milad said he is part time and has not heard of intermezzo or Butrans although the technicians have seen it and filled it. Introduced Butrans indication, dosing, titration, patient types and approximate conversions. Explained OxyContin doses and patient types. Milad said he has filled it and did one today for 20mg.
PPLPMDL0020000001	Norton	OH	44203	4/22/2013	Dr uses OxyContin for acute pain and refers chronic pain to pain management. Discussed Butrans and dr was interested in knowing more. I discussed nancy profile and showed titration guide. Dr asked about insurance and I me tend workers comp and commercial insurance. I asked if he had a specific patient in mind and he said yes. I explained that the med shoppe next door has all strengths in stock. I reminded him that if he starts with the 5 then he should have patient call for appointment in 1 week to ensure they are titrated correctly to the next doses if necessary. I said Intermezzo has gender specific dosing and discussed managed care after dr asked about coverage. I asked if he has written and he said yes but it coverage was difficult so he gave up. I asked dr to ask one more question of his insomnia patient.
PPLPMDL0020000001	Akron	OH	44305	4/22/2013	Caught dr coming into office after lunch. Dr gave me a minute to give the communication insight. I asked dr what that means to his business? Dr said his nurses do a good job ensuring the expectations are understood. Dr said he wrote an OxyContin prescription today for a new cancer patient. Sowed dr the comfort assessment journals and that I need to leave for for Kris. Dr said he thinks they have given a few out and he said she asked about getting more. Kris in Ravenna on Mondays. In tomorrow, Tuesday, Left the Butrans initiation and titration guide for his review.
PPLPMDL0020000001	University Heights	OH	44121	4/22/2013	Left 1 box Senokot S, as box I left previously was gone. Both Dr. Azar and Price said they really like Senokot S, and recommend to their patients, and they stated Dr. Park also recommends. Invited Dr. Price to May 8 program, he admitted he doesn't attend programs, but that he's sure Dr. Azar will attend. OxyContin, recommended q 12 hr dosing, 7 doses available for titration; and \$90 off monthly copay coupons in cabinet above where he sits. When OxyContin is not appropriate, Butrans as CIII 1x week pain patch option. Went through dosing slider, and left copy. Intermezzo, reviewed indication, MOTN, prn, gender specific dosing. Direct patients to Intermezzo.com to print out savings.
PPLPMDL0020000001	Akron	OH	44333	4/22/2013	Dr told me I didn't need to continue coming to speak about Butrans. I told dr that it is my job to discuss the product and to provide resources to help improve patient type selection and titration of the product. I gave review of Nancy and asked dr if he would prescribe more Butrans for patients like a nancy? I said he will and said he will review it on his own as well. I reminded dr about BWC and CareSource status with Butrans.
PPLPMDL0020000001	Akron	OH	44313	4/22/2013	Initiated discussion with technical about intermezzo indication, limitations of use and dosing. Technician has not seen any intermezzo come through. Discussed Butrans dosing, CIII, 7 day transdermal patch. Explained approximate conversions and patient types. Gave OxyContin dosing and switches from Percocet.
PPLPMDL0020000001	Akron	OH	44333	4/22/2013	Spoke to doctor through window. Dr told me he will only be in the Fairlawn office today and next Monday then the office is closing. Dr only in N. Canton office going forward. I asked dr for his continued OxyContin business when his patients on Percocet fail or reach their threshold of 30-40mg a day which dr stated in past discussions. Dr has not yet used an essentials kits. Handed dr the nancy profile for Butrans and asked for continued business. Gave dr the intermezzo demo packs and discussed doses and indication.
PPLPMDL0020000001	Mayfield Village	OH	44143	4/22/2013	Dr Azar normally not in on MON, but he happened to be in going over charts. Was able to review both Butrans and OxyContin as options for helping him manage his patients' pain. Reviewed Scott/Nancy profiles, and left profiles so these patients would remain top of mind, and so that he knows where I'd like him to initiate Butrans. He is concerned with coverage, so I reinforced where Butrans is preferred & CareSource PA. Reminded Dr. that right above Dr. Price in the cabinet are the Butrans trial/savings cards, OxyContin (CII option, q12 hr dosing) Intermezzo, he was interested in hearing more information, and asked if I had information I could leave him. Left him updated FPI, patient guides. Reviewed indication/MOTN, prn, gender specific dosing, highway driving study.
PPLPMDL0020000001	akron	OH	44333	4/22/2013	Discussed Bup 3015 with dr and reviewed all key point in the study detailer. I discussed primary outcomes and safety profile. Dr asked to look at the adverse events in the study. Reviewed it wi dr and asked him if anything is of concern? Dr said no and it looked good to him. I asked dr to continue identifying patients similar to the ones in the study. I asked dr to prescribe OxyContin for his patients failing or not tolerating Percocet. I asked for dr to use intermezzo after discussing indication and dosing. Dr agreed to look closer for Butrans patients.
PPLPMDL0020000001	Mayfield Village	OH	44143	4/22/2013	Dr. Krishnan running way behind, and was supposed to leave hours ago. He nor his medical assistant Melissa could come up front. Several people in waiting room. Left May 8 invite for Dr. Krishnan, Drs Mukunda & Ashraf, and invites for the 4 CNP's. Also left Nancy profiles for all Hcp for all.<font color=blue><b></b></font>CHUDAKOB's query on 05/03/2013</b></font>Jenny, this is not considered any type of enterable call. I am glad to see you inviting these physicians to your program, there was no product discussion with an HCP of any kind. A non-HCP call is only on an M.A., R.N., LPN, or office manager. Anyone else should not be entered as a call.<font color=green><b></b></font>BALLE's response on 05/11/2013</b></font>Ok.<font color=blue><b></b></font>CHUDAKOB added notes on 05/13/2013</b></font>Thank you!
PPLPMDL0020000001	North Olmsted	OH	44070	4/22/2013	Placed a call to speak with Nurse Managers, Jo & Danette to introduce Purdue's NE program and discuss educational in-service opportunities. I spoke with the receptionist, Sara who connected me with Jo @ ext. 4023. N/A
PPLPMDL0020000001	Beachwood	OH	44122	4/22/2013	left a msg. on her voice-mail.Danette's Ext. is 4022
PPLPMDL0020000001	Norton	OH	44203	4/22/2013	Called to speak w/Nurse Educator, Merri Bunge to discuss time of in-services on 5/7 & 5/8 on pain management, she was not available. left msg on her voice-mail
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/23/2013	Dr said he uses OxyContin for acute pain. I asked if he has patients like the Tom profile in his office and he said after 3 months he sends them to pain management. I asked who he refers to and he said Barberton Pain Management. Discussed Butrans patient type Nancy and he said he might see a place for Butrans in his practice. Dr said he tried to write Intermezzo but it was denied. I explained that most commercial insurance plans require a failure of generic zolpidem so he would have better success getting coverage if he concentrated Motrin patients that have tried ambien.
PPLPMDL0020000001					Spoke with Liz and dr abut the formulary coverage for OxyContin and how he can utilize it more often. Focused on his private prescription plans, Med D plans and dosing flexibility. I asked dr to initiate OxyContin when a patient fails on Percocet. Dr said he continues to prescribe. I asked if he has any new starts on OxyContin? Dr and Liz said most are refills or titrations however Liz said they are seeing more new patients due to Bressi gone. I asked for new starts. Asked dr to try Butrans again and discussed appropriate patient types. Dr said he has very few where Butrans would even be effective for. I asked why and he could not effectively provide an answer. Left intermezzo dosing cards.
PPLPMDL0020000001	Akron	OH	44333	4/23/2013	Spoke to Jen about getting intermezzo copy cards which she requested to have delivered to e north canton office. Explained indication and dosing and reviewed copy cards.
PPLPMDL0020000001	Akron	OH	44310	4/23/2013	I showed dr the inclusion criteria and exclusion criteria from Bup 3015 and read to dr that 65% of the patients in the study were taking hydrocodone combination products. I asked dr to identify his existing patients on hydrocodone combinations who are uncontrolled or needing a dose adjustment to initiate Butrans. Showed the approximate conversion chart and asked for his commitment. Dr said ok and he will try.
PPLPMDL0020000001	Barberton	OH	44203	4/23/2013	Introduced myself to staff and doctor. Dr said she could use vouchers for OxyContin but not Butrans. I asked what types of patients does she prescribe OxyContin for and she said patients in pain. I tried to clarify but I missed the opportunity. Booked lunch
PPLPMDL0020000001	Cleveland Hts	OH	44118	4/23/2013	Intro. Discussed Intermezzo indication, dosing,Trial/Savings cards. She suggested in seeing Dr. Harris
PPLPMDL0020000001	Cleveland	OH	44124	4/23/2013	Met with girls @ front desk, told them I may be back tomorrow, as I was thinking today was WED, and I planned on stopping in WED betw 9a and 5p, when Gail is there. Left Senokot S/dosing tearsheets. Left OxyContin conversion/titration guide and Butrans May 8 invite for dr. Left intermezzo updated FPI, patient guides/brochures.
PPLPMDL0020000001	Stow	OH	44224	4/23/2013	Good discussion surrounding Butrans. I asked dr if most of his days are spent with procedures or does he also have time to see patients for office visited. Dr said he saw 7 patients in the office yesterday for consults. Discussed Butrans in depth and reviewed indication, CIII, 7 day transdermal patch, patient types, appropriate starting dose, titration, and Bup 3015 trial review. Dr asked about using IR opioids for breakthrough along with Butrans? Discussed use of supplemental analgesia and supported by the studies. Doctor spoke about AE's with transdermal patches. Reviewed what was reported in Bup 3015 and dr said nothing stands out as an issue. Dr said he would treat a patient with a rash from a transdermal patch and would not discontinue it. I asked dr if a butrans seems like a medicine he would use more of and dr replied yes because he is trying to reduce the amount of narcotics his patients are taking and Butrans seems likes great option.<font color=blue><b></b></font>CHUDAKOB's query on 05/03/2013</b></font>Cliff, how does prescribing Butrans help the physicians reduce the amount of narcotics his patients take. If he wants to do that, why would he prescribe Butrans at all?<font color=green><b></b></font>REICHL's response on 05/13/2013</b></font>If I remember correctly he talked about reducing the amount or oral narcotics. I will specify going forward.<font color=blue><b></b></font>CHUDAKOB added notes on 05/13/2013</b></font>OK. Just be careful as it can appear that he believes Butrans is safer and that is why he is prescribing it. Be sure to clarify with the physician the fair balance.
PPLPMDL0020000001	Akron	OH	44305	4/23/2013	Spoke to Kris(RN) and dr Mubishir about the comfort assessment journals and gave them the communication insight and how the resources I have could help to strengthen the bond between the patient and their medicine. Dr and Kris both agreed that it can help them gather information the patient would not always communicate verbally. I discussed the Butrans dosing, titration, approximate conversions and ability to use IR opioids for breakthrough. Kris told me that they need to start using it for their viconden failures and agreed to give e journals. Short discussion about intermezzo and its indication.
PPLPMDL0020000001	Stow	OH	44224	4/23/2013	Detailed the Bup 3015 trial to Janet. Focused on the inclusion/exclusion criteria, study design, and outcomes. I asked Janet what her experience is with a butrans? Janet said that she has used it some but not a lot. I asked her what her reservations are with Butrans to not be using it more? Janet said she doesn't really have any but it is difficult to find patients that are not already past Butrans and on high doses of viconden and Percocet. I asked if her intention is to provide her patients with product(s) that will deliver ER opioids? Janet said that if she can redu e the number if pills a patient is taking then Butrans becomes a good option. I explained the approximate conversion chart and titration. Janet said she will use more Butrans. Explained intermezzo indication and dosing.
PPLPMDL0020000001	Stow	OH	44224	4/23/2013	Led with insight about communication to Abby. Abby said that it is a constant struggle to get patients to do what you ask of them. Abby told me she ends up becoming a shrink to help them understand that you are the to help them. I discussed some resources available for the office to aid in communication with patients. I proceeded to provide a detail of the Bup 3915 trial explaining all key points, inclusion/exclusion criteria, pain score reductions and percentages reaching at least 30-% pain reduction. I asked Abby if she would be happy if her patients got a 30% reduction in pain? Abby said for sure yes and was glad to see that the clinical trials show that. Abby asked about formulary coverage. Discussed BWC, CareSource, and private prescription plans with copy cards. Abby said she did NOT know about the CareSource PA and said it will make a big difference. Abby said they are seeing many new patients and suspects there will be more opportunity for Butrans.<font color=blue><b></b></font>CHUDAKOB's query on 05/03/2013</b></font>Just curious as to your thoughts on failing two (2) opioids (next call objective). Why 2?<font color=green><b></b></font>REICHL's response on 05/13/2013</b></font>This was back in April. I do not remember however I think we may have discussed how when they get patients referred in that they are already on 2+ opioids.<font color=blue><b></b></font>CHUDAKOB added notes on 05/15/2013</b></font>OK. I was just curious. Thanks for the explanation.
PPLPMDL0020000001	Akron	OH	44310	4/23/2013	I asked dr how he decides which pain medication to prescribe? Dr said it all depends in the patient and what is he treating them for. Dr said he typically will start with NSAIDs then tramadol or viconden. Dr said if a patient needs any more than 30-40mg of viconden he will refer to pain management. I asked him what the downside would be to initiating Butrans after tramadol or before a patient gets to 30-40mg of viconden? Dr said he didn't know but said it sounds like it could work. I exp,aimed the appropriate starting doses and asked if he would initiate Butrans on the next tramadol failure? Dr said ok.
PPLPMDL0020000001					



PPLPMDL0020000001	Akron	OH	44312	4/23/2013	Discussed Butrans with dr following program. Dr said he is still skeptical about Butrans. I asked him why and what is he skeptical about? Doctor said something about how patients are deviant and he's not sure how he is going to move forward with pain management. I tasked him what the downside is to using Butrans for a patient in chronic pain who is failing a IR opioid? Dr said he is going to a pain and addiction conference next week and it will give him a better idea on how to treat. I told dr that the patient type selection is critical to the success of a product, especially Butrans. I told dr I will follow up after next week to discuss the Butrans option for his moderate to severe pain patients.
PPLPMDL0020000001	Stow	OH	44224	4/23/2013	Spoke with Greg and Rick about Itermazzo and Butrans. Explained intermezzo indication, limitations of use and dosing. Greg said if it is not on Medicare or Medicaid it probably will not be used or ordered. Explained Butrans and asked if they are seeing more or less over the last months. Rick said about the same but they need more copy cards.
PPLPMDL0020000001	Stow	OH	44224	4/23/2013	Led with insight and shared some resources around patients and HCP communication. Detailed Bup 3015 in depth discussing inclusion/exclusion criteria, study design, and outcomes. I asked dr if he would be happy if his patients got a 30% reduction in pain with Butrans? Dr said he uses Butrans early and is impressed how well it works for patients that fit the profile. I asked him what he believes the profile is? Dr said i works great for patients that have failed one or two opioids if you get them early. Dr said he does not see it being a good fit for a patient already on a ER opioid like Opana or high doses of Percocet or a combination of multiple drugs. Dr said he is working hard to reduce the volume of pills and Butrans is a good alternative. I agreed with dr and acknowledged that Butrans should not be on board with other ER products. Gave formulary coverage for private prescription patients, CareSource, and BWC. Dr said he will continue to find the right patients. Explained intermezzo indication, limitations of use and dosing.
PPLPMDL0020000001	Cleveland	OH	44106	4/24/2013	Talked with Margie/Supervisor-Pharmacy discussed Intermezzo indication hasn't seen any scripts along with Butrans- likes the seven day transdermal delivery system. Discussed OxyContin in the Hospice/Palliative care setting, confirmed key clinician Dr. Weinstein and will continue make note of any other key prescribers.
PPLPMDL0020000001	Lakewood	OH	44107	4/24/2013	Spoke with Jamie and found that dr has less than 10 patients using commercial insurance and dr is beginning to refer more patients to dr grimm. Discussed with dr how i could be a resource for his practice and discussed constipation associated with opioids. Previously asked Jamie if dr prescribed anything for constipation when he wrote an opioid and she said no. I mentioned senakot and dr said it would be helpful to have samples. There was a patient waiting so i said i would follow up in 2 weeks to discuss his patients with moderate to severe pain.
PPLPMDL0020000001	Cleveland	OH	44121	4/24/2013	Met with medical assistant. Left information on all products. Expanded on Intermezzo with indication, proper dosing, trial/savings. Checked to see if any changes in office protocol. Dr still does not allow reps to conduct in service meals, no appts, no savings cards taken, no samples taken. Will accept savings cards, patient education. Also left may 8 invite.
PPLPMDL0020000001	Beachwood	OH	44122	4/24/2013	I received a phone call from Nurse Educator, Merri Bunge who informed that she is going to have to cancel the in-services scheduled for May 7th & 8th. She stated, " we are implementing a new I-VAC system among addit'l computer programs that have to be completed by the end of May and i'm not sure where i am going to get all the time needed to complete the training in one month." Merri also said that she will be on vacation the entire month of June, returning after the 4th of July. She said, "i am taking my daughter on a trip for graduation. She said that she would call me the beginning of July to re-schedule the in-service on Pain Management.
PPLPMDL0020000001	University Heights	OH	44121	4/24/2013	Met first with medical assistants. Let them know the savings cards for OxyContin in closet expired, as well as Butrans trial/savings cards. Both boxes were on right hand side of closet and not easily visible, basically hidden. I asked if i could place them in main closet, in alphabetical order, which they said was fine. I asked them if they could remind Dr Price to hand them out. Dr Price, remember recommended q12 hr dosing for OxyContin, and that you have 7 doses avail for titration. Again, he and staff say he only writes for cancer patients. Well, for your patients with chronic lower back pain, osteoarthritis, spinal issues, you have the option of CII 1 x week transdermal patch, with ability to titrate to our max dose of 20 mcg/hr. Used Nancy profile. I'm, asking you to try Butrans moving forward for patients like Nancy. Not too engaged, busy, and he doesn't like to be detailed outside of lunch. Left HCP packet for Intermezzo, updated FPI, patient guides & brochures, and reviewed product indication, dosing with medical assistants.
PPLPMDL0020000001	Akron	OH	44313	4/24/2013	I told dr that 33% of patient in the studies for OxyContin were 65 and over and of those patients 9% were 75 and over. I told dr that i am telling him this because the formulary coverage is very good for Medicare D plans. I asked dr what he thinks the average age of the patients he has on OxyContin? Dr said he didn't know but has all different ages of patients on it. I told dr to continue prescribing OxyContin for his patients on Percocet and to "try" Butrans for his patients failing tramadol or vicoden. Gave him the initiation and titration guide. Left intermezzo dosing card with Tiffany.
PPLPMDL0020000001	Akron	OH	44304	4/24/2013	Spoke to Steve about intermezzo indication, limitations of use and dosing specifics. He said that they have not seen any yet. Discussed Butrans dosing, appropriate starting dose, titration and copy card explanation.
PPLPMDL0020000001	Akron	OH	44333	4/24/2013	Provided OxyContin conversion and titration guide and asked if they stock all doses which he said they do and dispense often so they must have all doses in stock. Steve said they order the 20, 40, and 80 mg doses most. Dr told me that he just prescribed OxyContin this morning. I asked why he prescribed it and what w dose was. Dr said that the patient was already on it from the primary care doctor and he refilled it. The dose was 20mg and is doing well. I discussed the Butrans dosing with dr and asked him how he is feeling now titrating patients to the 20mcg dose? Gave brief detail of Bup 3015 and dr said he knows he has a couple of patients that should be titrated to the 20mcg. Dr said that he prescribed intermezzo a couple of times and was told that the patients need to fall Ambien first. I told dr that some insurance companies will ask for that step edit first. Dr said he thinks it is a great product and does discuss in the middle of the night insomnia with his patients.
PPLPMDL0020000001	Cleveland	OH	44106	4/24/2013	Discussed his experience with Butrans, doctor stated that he likes Buprenorphine and the delivery system is safer than oral products. I responded that Butrans has the same abuse/misuse similar to other Schedule III opioids. He agreed. Reminded of savings cards for Butrans/OxyContin and quick mention of intermezzo for the middle of the night awakening with at least 4 hours of bedtime remaining.
PPLPMDL0020000001	Akron	OH	44308	4/24/2013	Spoke to Heather(RN) about OxyContin. I asked for Cindy and heather told me that she left the burn center a few weeks ago for neurology. I spoke with heather about the materials and resources available for OxyContin including the conversion and titration guides and comfort assessment journals for patients. Heather said that the PA's and Residents are the hcps that see the burn patients and told me that they need a guide for OxyContin and said she will provide the guides to them. Left her with about 15 OxyContin conversion and titration guides and journals.
PPLPMDL0020000001	Akron	OH	44320	4/24/2013	I asked dr if he has discussed Butrans wi any patients since we provided the Butrans information in his exam rooms? Dr said he doesn't think so. I asked him what his reservations are with Butrans? Dr said he does not have any he is looking for the right patient. I asked him what the right patient is? Dr said patients on Ultram or vicoden. I told him he is right and showed him the approximate conversion chart and how to initiate and titrate. I asked dr if he will at least try it in the right patient. Dr agreed
PPLPMDL0020000001	University Heights	OH	44121	4/24/2013	Spoke w pharm d Stephanie Garber. Very pleasant. Intermezzo have dispensed, but just he 1.75 mg. reviewed all key info, dosing, showed demo/ dosing dialed tool. she has no problem breaking open a box for the 5-day trial. Direct patients to Intermezzo.com for savings. Butrans they have 2 patients on, that are Medicare patients. OxyContin, reviewed dosing, titration, q 12 hr recommended. A few patients on q 8, but majority q 12. Pregnancy cat B. savings cards for all branded products, trial for Butrans, intermezzo. Left a few Intermezzo patient guides, & a few Butrans patient guides.
PPLPMDL0020000001	Akron	OH	44313	4/24/2013	Some to Val the pharmacist and Megan the technician about all products. Val still has not seen intermezzo and does not stock it. I asked how often they dispense Butrans and Val said all the time and figures they have at least 10 patients that get it filled there. Val told me she sees patients from Dr Shah, dr Fouad, and dr Vucetic. Discussed dosing and titration of Butrans. I asked if the pharmacy has all 7 doses of OxyContin? Val said they have all 7 because they also have many patients that get it filled there. Val said they are seeing prescriptions from Lababidi, Vucetic, Oyakawa.
PPLPMDL0020000001	Akron	OH	44312	4/24/2013	Gave quick review of the Bup 3015 focusing on inclusion criteria, study design, forced titration, and endpoint discussion. Dr said he has had good luck with a butrans so far and his patients have told him that their pain had decreased with it. Dr said he wanted to look at the conversion guide again to refresh his memory. I explained approximate conversions and asked for continued business. Dr said he plans on continuing to look for candidates. Dr also said the information guides are a big help to back up what he tells the attention about the medication. Showed dr the demos for intermezzo. Dr said he also has had good luck with intermezzo and will continue to
PPLPMDL0020000001	Fairlawn	OH	44333	4/24/2013	Saw dr over the counter and handed him the OxyContin conversion guide and asked him to use OxyContin for his Percocet patients who he believes need 12 hour release of oxycodone. Dr said ok. I also handed him the Butrans initiation and titration guide and told him that Butrans is suited well for his patients failing on tramadol who need ER analgesia. Left the intermezzo dosing guide. Dr asked me to set up for a dinner to discuss further
PPLPMDL0020000001	Akron	OH	44304	4/24/2013	Great discussion around OxyContin and Butrans. I asked dr about how he treats his pain patients and what his algorithm is. Dr said he starts with NSAIDs them tramadol, vicoden, then Percocet. I asked dr why he said on the last visit why he told me he uses more OxyContin than he would like to admit? Dr said because he has gotten burned many times from patients he trusted and abused or sold their medicine. I asked dr if he prescribes oxycodone? Dr said he did. I asked why he doesn't prescribe the ER oxycodone? Dr said he didn't know. I reviewed the OxyContin case studies and asked him if he would convert patients to the ER oxycodone? Dr asked about conversions from IR oxycodone to OxyContin. I reviewed the conversion and titration guide and discussed the 1 to 1 conversion rate. Dr said the one tags he does not like about Percocet is the APAP and asked if patients get less with OxyContin? I exp,aimed that OxyContin is a single entity opioid. Dr said he does have many patients that he now will move to OxyContin. Explained Butrans dosing, CII, indication, patient profiles and approximate conversions. I asked dr to identify patients failing on tramadol and discussed the Scott profile. I asked dr if he believes it is a product he will use? Dr said he likes the CII and 7 day delivery of buprenorphine. Dr agreed to try. Discussed copy cards and information guides for patients. Intermezzo dosing and indication with dr and staff.
PPLPMDL0020000001	Akron	OH	44308	4/24/2013	1. Try to meet with Dr. Ron Charles to discuss Health exchanges. 2. Determine if he has any influence over the formulary or input regarding drugs.
PPLPMDL0020000001	Lakewood	OH	44107	4/24/2013	Reminded dr that OxyContin has good coverage for Medicare part D. Dr. said are you recommending i use this for all of my old people. I told Dr. i wanted him to think of seniors as having good coverage with OxyContin for their medical insurance. I pointed to the patient profile Tom and mentioned patients who were on round-the-clock opioids. Dr mentioned that patients would rather take twice a day. I told the doctor OxyContin has q12 h dosing. I discussed Butrans patient profile Scott. Dr said he just heard about Intermezzo recently because someone talked to him about it and then he realized it was me and i reviewed dosing and which managed care plan he should write for, caresource. I showed the demo and dr asked about the packaging. Asked dr about talking to Shannon about managed care and he said he make all decisions. I asked how he found time to do prior auth. Dr said he decides the medicine and the staff takes care of the patient but he does not know ahead of time their insurance.
PPLPMDL0020000001	Akron	OH	44302	4/24/2013	I asked dr and Ronda how many patients out of 10 that need to fail MS Contin before going to OxyContin fail? Dr said about half of them or just under. I asked if they then prescribe OxyContin all of those patients. Dr and Ronda both said yes. I asked if they would move patients on air oxycodone to OxyContin q12h? He said he typically does. I asked if they have handed out any of the OxyContin essentials packs? Ronda said she has given out 2 of them and got good feedback from the patients. I showed dr the Nancy profile for Butrans and asked if he has had any other new starter. Dr said no because both patients initiated failed. I told dr that if i remember the patients were on either moderate or high doses of Percocet. Dr said he thinks that is right. Dr said he had no more time but will look over the case study and understands that he he should initiate Butrans earlier like a vicoden patient. I told him i will follow up soon.
PPLPMDL0020000001	Akron	OH	44312	4/24/2013	I asked dr what the downside is to switching patients on Percocet to OxyContin q12h? Dr said because of the name for one and two it had been a cost issue in the past. I told dr how important it is to identify the right patient for OxyContin and it should not be a cost issue for many patients. I told dr that he needs to get over the "OxyContin name" first so he can appropriately identify patients who good candidates. I quickly showed him the nancy profile and asked him to just try Butrans in a patients like her. Intermezzo dosing and indication along with demo packs.
PPLPMDL0020000001	Akron	OH	44312	4/24/2013	Short discussion about his patient selection for Butrans. I told dr to select patient failing or can't tolerate tramadol or vicoden. Gave him each aren't profile and told him I put a patient information guide along with the copy card in the copy card file. Dr agreed it is a good idea so he doesn't forget to get one of each on a new start.
PPLPMDL0020000001	Cleveland	OH	44195	4/25/2013	Visited JNorth located Sabrina Spikes (Pharmacy liaison for epic system, left message
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	4/25/2013	Sowed dr the Sam profile and explained why OxyContin would be appropriate. Dr said she likes it and will continue to use it. I asked why and she said because it works. Nothing else learned.
PPLPMDL0020000001	Fairlawn	OH	44333	4/25/2013	Provided dr with the nancy profile for Butrans and asked dr to identify patients like her who are on vicoden around the clock who complain of being in pain. Dr said ok and he will review the profile. Left dr with the OxyContin and intermezzo dosing guides.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/25/2013	Jackie said she has not seen any intermezzo yet and said she does know about it. Gave her the indication and dosing specifics. Explained Butrans patient types and the initiation and titration. Jackie said they continue to try and stock most doses of OxyContin and do fill it fairly regularly. She said their business has gone down a little because of the construction.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	4/25/2013	Some to Amy about inermezzo and asked her if they have dispensed any? Amy said she thinks they did one but couldn't remember what happened but said she thinks there was a PA. I asked if she could look it up and she said she is too busy. Gave Amy the Butrans initiation and titration guide along with the OxyContin dosing guide.

PPLPMDL0020000001	Cleveland	OH	44115	4/25/2013	Talked w/Nickels discussed his new location and goals for the practice. Asked what strengths most commonly prescribed of Butrans for stocking in pharmacy purposes. Dr. Stated most patients start on 10mcg/hr and titrate up to 20mcg/hr. Told him we would relay that George in pharmacy
PPLPMDL0020000001	Cleveland	OH	44115	4/25/2013	Discussed w/George/Dave B Butrans indication/dosage strengths and initiation/titration. Will stock when scripts begin to be prescribed
	Cuyahoga Falls	OH	44221	4/25/2013	I told dr that patients ideally suited for Butrans are those that need a dose adjustment on products like tramadol or vicoden. I asked dr if she could look for patients like that in her practice. Doctor agreed and said that she has also used it for Percocet patients and it has works alright. I asked what dose of Percocet? Dr said she couldn't remember exactly but it wasn't much. I gave her the approximate conversion chart and asked for continued business. Left her with dosing guides for OxyContin and intermezzo.
PPLPMDL0020000001	Stow	OH	44224	4/25/2013	I told dr that I understand and respect that it may take time for him until he prescribes Butrans but can his patients? Dr said he sees what is trying to say. I told dr that I need to ensure that he understands how to initiate Butrans and the patient types appropriate for the product. I reviewed the Scott profile again and asked him to identify a patient like him. Dr said he will use Butrans but can't promise when. I asked him to swit h his Percocet patients to OxyContin and showed him the Sam profile. I showed dr the demo packet for intermezzo and reviewed the indication and limitations of use. Dr said he will keep it in mind.
PPLPMDL0020000001	Stow	OH	44224	4/25/2013	I told dr that I am guessing that she has existing patients on Percocet around the clock for help manage their pain? Dr said she has a few. I asked her what the downside is to switching those patients to OxyContin q12h? Dr said nothing except getting a patient to switch. I asked dr if she thinks her patients would complain about taking a medicine only 2 times a day? Dr said probably not. I showed her the Sam profile and asked her to do just that. Switch the Percocet patients to OxyContin and showed her the conversion chart. Dr agreed to look more at that. I asked her to initiate Butrans earlier on in treatment when her patients fail on tramadol or vicoden. Dr agreed. Gave dr the dosing guide for intermezzo.
PPLPMDL0020000001	Akron	OH	44312	4/25/2013	Dr came to window and I asked him if he had given out any of the essential packs for Butrans? Dr said he remembers one of them going out. I told dr to continue initiating Butrans for his patients failing either tramadol or vicoden. Nothing else learned. Left Scott and nancy profiles.
PPLPMDL0020000001	Cleveland	OH	44113	4/26/2013	Visited Ortho dept<font color=blue><b>CHUDAKOB's query on 05/03/2013</b></font>Mark, your call notes should contain more than visited a department. You should put who you spoke with and what was accomplished. In addition if you went to multiple departments, these should be included under one institution call as well. Does this make sense?<font color=green><b>GUTKOMA's response on 05/13/2013</b></font>Got it-Booked lunch appt. with Dr. Bohl and Berkovitz (Ortho 2nd floor)<font color=blue><b>CHUDAKOB added notes on 05/15/2013</b></font>OK. Thanks!
PPLPMDL0020000001	Cleveland	OH	44119	4/26/2013	Met with RN/clinical nurse mgr Carla. Dr Saeed normally is in Friday afternoon, but today he had to take CPR class. I asked her about visiting their pharmacy in basement, and she says they do not allow reps in hospital pharmacy. We then discussed latest protocol on meals. Their director is very clear that no service meals/snacks are permitted, no exceptions. Reviewed products with Carla, could see they were almost out of OxyContin cards. Reviewed Butrans indication, then how trial/savings cards should work. Next, reviewed intermezzo core messages. Left intermezzo FPI, patient guides/brochures for Carla's review. Directed her to have patients visit intermezzo.com to print out savings. She stated very best time to catch Dr Saeed is FRIDAYS BETWEEN 1PM AND 4 PM. She also provided their physician line, so I can call ahead when i'm in building. Phone line open 8a to 4p: Spoke with Nikki about butrans movement and she said she has not seen a script in a long time. Discussed intermezzo dosing and patient information guide.
PPLPMDL0020000001	Berea	OH	44017	4/26/2013	Address validation 4/26/2013
PPLPMDL0020000001	Fairlawn	OH	44333	4/26/2013	Noti Ed that dr only had 2 copy cards left for Butrans. I asked dr if she initiated patients on Butrans and used the cards? Dr said she has prescribed it three times. One patient she started was on Percocet and initiated the 10mcg dose. The second patient she started 2 weeks ago and did not show for her appointment today so she does know how the patient is doing. The third patient she initiated this week was on vicoden and started the 5mcg. I discussed how she can look at her tramadol patients as good candidates for Butrans and reviewed the profile. Dr said she will consider that. I gave her updated copy cards and explained intermezzo and OxyContin. Dr said she does not have any patients on it but may consider intermezzo.
PPLPMDL0020000001	Cleveland	OH	44113	4/26/2013	Quick call , invited to the upcoming Moufawad Butrans program<font color=blue><b>CHUDAKOB's query on 06/19/2013</b></font>This is another case of one product referenced in the call note and three recorded as being presented. Can you please clarify.<font color=green><b>GUTKOMA's response on 06/24/2013</b></font>Briefly introduced myself all 3 products indication/ dosing. Dr said he was very familiar with OxyContin/ Butrans and was running behind<font color=blue><b>CHUDAKOB added notes on 06/24/2013</b></font>Mark, again, your call notes need to be more specific. Just saying the name of the three products does not constitute a sales call. There has to be some product discussion. If you are unclear on this, please let me know. Thanks!
PPLPMDL0020000001	Cleveland	OH	44113	4/26/2013	Invited to Moufawad Butrans program, stated that she likes Butrans and its 24 delivery system, will continue to prescribe. Taking vacation the week of May 20-29th<font color=blue><b>CHUDAKOB's query on 05/03/2013</b></font>For your next call object, how will you build and expand utilization. You want to be more specific so you can use it on your next call.<font color=green><b>GUTKOMA's response on 05/13/2013</b></font>By building rapport, which will allow me mental access to prescribing habits/thoughts/ protocols in turn allows me to tailor my message(eg. Scott profile)into utilizing Butrans for the right patient more often.<font color=blue><b>CHUDAKOB added notes on 05/15/2013</b></font>Building rapport is something you are doing anyway. The next call objective is more about what you will do or say on the next call to move the call forward. If you want to gain "mental access", what does that look like in a call. Building rapport will probably not gain mental access. The insight is the first step to gaining mental access.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/26/2013	Spoke to Sam the technician about intermezzo indication, limitations of use and dosing specifics. He does not know of any that have been dispensed but said he likes the idea. I gave him the demo Butrans patch and explained the dosing, indication, titration and approximate conversion chart. Sam said the pharmacy has seen a few prescriptions for it on the 5 mcg. I gave him the copy card information on all products includig OxyContin.
PPLPMDL0020000001	Akron	OH	44312	4/26/2013	I introduced intermezzo to Chuck the pharmacist and explained the indication, limitations of use and dosing. Chuck said that he thinks the product is needed for sure and will discuss it with his patients. I explained Butrans and if he has filled any recently. Chuck said he has many patients taking it and just had one recently who has cancer get out on Butrans. Patient told him he is doing really well. Discussed dosing, titration and approximate conversion chart. Showed chuck the OxyContin doses and explained patient savings cards. Chuck said he stocks all doses.
PPLPMDL0020000001	Berea	OH	44017	4/26/2013	Dr said he has stopped initiating therapy for chronic pain. He sends patients out to pain management. When I asked who he referred to he told me to speak with Shirley. Shirley gave me the note she shares with patients which lists metro hospital, Cleveland clinic and Fairview hospital and 4 pain management specialists. He stopped writing march of 2012. Dr has written intermezzo and told me where he keeps the vouchers. Dr knew the old vouchers expired in march. I tried to present Scott and dr said he is trying to reduce the amount of tramadol he writes. Dr will continue treating patients coming to him on OxyContin from pain management but he will not
PPLPMDL0020000001	Akron	OH	44319	4/26/2013	Dr came to window and told that he read over the Butrans information I left for him after out last visit. I asked if it is a product he would initiate for a patient failing an IR opioid. Dr said he thinks it sounds like a good product and he will try it out. I asked him where he is finding success with OxyContin? Dr said he is not using much new mostly refill but he said he patients do well with it. I asked dr to use OxyContin when his patients on Percocet fail or can't tolerate it. Dr said ok. Nothing else learned. Left him the intermezzo doing guide and demo pack.
PPLPMDL0020000001	Euclid	OH	44119	4/26/2013	Left updated intermezzo FPI & a few patients guides. No Rx since my last visit. She's hoping for utilization & thinks needed niche product. Reviewed key messages, dosing, they ave no problem breaking box open for 5-day trial. Direct customers to intermezzo.com, to print savings. no Rx for Butrans since my last visit. Reviewed core Butrans messages, 3 doses avail, one patch worn for 4 weeks, patients get 4 patches/ 4 disposal units each month. OxyContin remains steady, majority f HCP's follow recommended q 12 hour dosing.
PPLPMDL0020000001	Akron	OH	44305	4/26/2013	I asked dr if his use of Butrans has been successful? Dr said it has and most have had good pain relief from it. I asked dr if his success inspires him to use it more often? Dr said he is trying and said that he knows how important it is to find the right patient. I agreed with dr and commended him for that. I asked if he has initiated patient on Butrans on tramadol? Dr said he thinks one and the rest were vicoden. I used the Scott profile to help him understand how Butrans is ideally suited for patients like Scott and asked r if he agrees. Dr said he knows he has patients that on are tramadol that would benefit from Butrans. I asked dr to initiate it in those patients and showed approximate conversion chart . Dr said he knows he needs to get the experience kits out and agreed to do that. I gave him the OxyContin dosing guide and asked him if he would consider switching his Percocet patients to OxyContin and showed him the conversions. Showed dr the demo packet for intermezzo and reviewed the indication and dosing.
PPLPMDL0020000001	Akron	OH	44319	4/26/2013	Office packed with patients today. I had a second and asked him what his goal is when he prescribes tramadol or vicoden? Dr said to help control their pain. I asked him how successful it is with his patients out of 10 patients? Dr said about half. I asked him to initiate Butrans for those patients that fail tramadol instead of moving to another IR opioid. Dr said ok. Left OxyContin and intermezzo dosing information.
PPLPMDL0020000001	Brooklyn	OH	44144	4/29/2013	Quick discussion on all products with Nancy, left savings cards along with Senokot samples. Nancy did say, dr. Will attend programs.
PPLPMDL0020000001	Cleveland	OH	44109	4/29/2013	Discussed Butrans 7 day transdermal system for the management of Moderate to severe chronic pain when the continuous around the clock opioid analgesic therapy is needed for extended period of time. Went over Scott profile, dr. Agreed he saw patients similar, asked for those appropriate patients, said he would consider. Briefly went over OxyContin & 7 dosage strengths. Discuss intermezzo indication for middle the night awakening doctor was intrigued by the dosage forms I'll left vouchers and savings cards for all products.
PPLPMDL0020000001	Cleveland	OH	44143	4/29/2013	Lead with discontinuation insight #1. Yes, he sees discontinuation in his practice, mostly due to AE's and/or efficacy, or hypersensitivity to ingredients in other opioids. Rviewed appropriate patient selection for OxyContin, patient vignettes, titration, conversion/titration guide used. Contraindications/warning/drug interactions/pregnancy cat B. He states he uses a lot of Ultram, tries to stay away from writing CII's on regular basis. He admits he writes a lot of Tramadol. Offered Butrans as option when OxyContin is not appropriate, Scott/Nancy profiles, does this make sense? Are there any other patients you feel would be appropriate to initiate Butrans? Yes, For patients that have GI issues, issues with aspirin, who needs consistent, extended release agent. Please try and attend my May 8 program, as this is good opportunity to learn more about Butrans. He will try. Insomnia. Dr, do you treat insomnia patients in your practice? He responded yes, I write a lot of insomnia agents. Presented intermezzo, MOTN, prn indication. Gender specific dosing. Sublingual, went through patient guide, highway driving study. He agreed to look over highway study more. Left patient brochures. discussed 5-day free trial with script. Direct patients to intermezzo.com for savings. He asked if I had any pain management contract forms he could use for pain management. Yes, I do, Glad you asked. Presented pain management kit, and forms he & staff can print out from orange web key.
PPLPMDL0020000001	Barberton	OH	44203	4/29/2013	Sole with tommy weekly and discussed intermezzo. He said he just had a denial and I asked which plan and he said Medco. I explained that Medco should be covered and he said the office needed a prior authorization which has not been sent into the pharmacy yet. Discussed OxyContin writers in the area and Butrans writers
PPLPMDL0020000001	Euclid	OH	44117	4/29/2013	In-Services were completed @ 2pm & 2:30pm on Pain Management for the SNA's. 13 were in attendance. The Patient Comfort Assessment Guide and The Wong-Baker Pain Scale was handed out and reviewed. A discussion w/ interaction between myself and the staff took place on the barriers that interfere with pain assessment/treatment in the elderly and consequences of unrelieved pain. The nursing assistants thoroughly enjoyed the in-
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/29/2013	Spoke with Beth(receptionist) about seeing dr Narouze. Beth said that he does procedures and sees patients in white pond as well. I asked about providing the office with Butrans and OxyContin patient materials along with patient savings cards. Beth said it makes sense to have that information here and in Hudson. Beth said to ask Glenn in Cuyahoga falls about providing the information in those offices.
PPLPMDL0020000001	Barberton	OH	44203	4/29/2013	Delivered managed care insight and told dr I will see him for lunch on wed to discuss his thoughts and how butrans can fit his two managed care groups
PPLPMDL0020000001	Cleveland	OH	44144	4/29/2013	Spoke with Carol, Intro, went over Product savings card
PPLPMDL0020000001	Fairlawn	OH	44333	4/29/2013	Told Jessica about intermezzo and asked if she has seen any more prescriptions? She said she has not seen any but maybe Gilbert had filled some. Gave the dosing guide for all products and discussed Butrans and OxyContin patient types.
PPLPMDL0020000001	Akron	OH	44313	4/29/2013	I asked dr if he currently has patients on Percocet around the clock? Dr said he does. I showed dr the conversion and titration guide for OxyContin and asked dr if he would consider switching Percocet patients to the q12h OxyContin? Dr said he can do that. I showed dr the Butrans slide conversion scale and asked him to identify existing patients on tramadol who may need a dose adjustment and initiate Butrans. Dr said he agrees that early in treatment if good for Butrans. Gave dr the intermezzo dosing guide and asked him to use it for patients that tell him they have in the middle of the night insomnia. Dr said he will.
PPLPMDL0020000001	Mayfield Hts	OH	44124	4/29/2013	Has been using OxyContin and likes the savings we provide patients. OxyContin works and patients doing well. Dosing discussion, titration every 1 to 2 days based on steady state. Dr. Kim have you had any clinical experience with Butrans yet? No, but I will keep in mind. He cannot attend May 8 program, as he has another meeting, but initially intended to go. Reinforced Butrans, CII, 1x week patch, indication, dosing, patient trial/savings.
PPLPMDL0020000001					intermezzo, please review this highway driving study, dosing card i'm leaving.

PPLPMDL0020000001	Fairlawn	OH	44333	4/29/2013	Caught dr at front counter and reminded dr to prescribe OxyContin for those patients over 65 who have Medicare ad coverage. Dr said he will. I handed dr the Butrans initiation and titration guide and asked him to prescribe it for his tramadol failures. Nothing else learned.
PPLPMDL0020000001	Akron	OH	44333	4/29/2013	I asked dr to continue prescribing OxyContin for his patients needing q12h analgesia. I asked dr to also continuing to prescribe Butrans when patients on tramadol or vicoden need a dose adjustment. Told him about good managed care coverage. Asked him for an intermezzo prescription. Today, 4/29/2013 is the doctors last day in the Fairlawn office.
PPLPMDL0020000001	Euclid	OH	44117	4/29/2013	I stopped by to speak w/ Kathy Nemeth to confirm the in-service scheduled for 5/6 @ 7am,2pm,3pm & 3:30pm on Constipation. I spoke w/ Receptionist, Joe Nathan, who informed me that Kathy was in a meeting. I left my
PPLPMDL0020000001	Mayfield Heights	OH	44124	4/29/2013	Met with tech Danielle, Pharmacy Mgr Nathan too busy to come over. Try stopping back another day. Reviewed all my products with Danielle. They have never dispensed Intermezzo, nor Butrans. Left a few Intermezzo patient guides & Butrans patient guides. Left pharmacists guide to Intermezzo for Nathan. Left Danielle know patients can visit Intermezzo.com for savings/5-day free trial with rx. She did not have time to check OxyContin
PPLPMDL0020000001	Fairlawn	OH	44333	4/29/2013	Spoke to Robin the pharmacist about intermezzo indication, dosing and limitations of use. Robin said that they have dispensed one script last week for a woman on the 1.75 mg dose. I discussed Butrans key messages and asked her about dispensing. Robin said they have not dispensed any in a long while and the doses on the shelf just expired. Gave Robin the OxyContin doses and indication. Robin said they do fill it and have all doses in stock. She said the 10 and 20mg dose most often.
PPLPMDL0020000001	Lyndhurst	OH	44124	4/29/2013	Sarah running behind, quick hallway detail. Butrans first, then OxyContin, then Intermezzo. She will try and make May 8 program, as she's interested in learning more about Butrans. Can she show up if she forgets to fax in RSVP? Yes, but we'd like to know how many are attending ahead of time.
PPLPMDL0020000001	Cleveland	OH	44109	4/29/2013	Explored various depts, Anes./Pain mgmt/ IM/ FP, PMR<font color=blue><b>CHUDAKOB's query on 05/10/2013</b></font>What happened in these departments that you explored. Did you meet anyone? Who did you speak with. What was learned. In a hospital call, all this information is important so you can use it on your next call.<font color=green><b>GUTKOMA's response on 05/14/2013</b></font>Located Anes./ Pain Mgmt 4th floor, main tower. Augusto Torres MD Resident program director. Grand Rounds Anes. Tues 7-8AM Scott Auditorium. Pete K. @ metro health coordinator of reps.Ortho 6th floor<font color=blue><b>CHUDAKOB added notes on 05/15/2013</b></font>Thanks! The next step is did you speak with any of them and if so, what was the discussion like?
PPLPMDL0020000001	Brooklyn	OH	44144	4/29/2013	Discuss Butrans seven-day transdermal system indicated for the management of moderate to severe chronic pain where around-the-clock opioid analgesic is needed for extended period of time discuss the Scott profile doctor agreed in from time to time that he sees patients similar to Scott asked the doctor the next time he saw a patient if he would prescribe Butrans said he will consider, briefly touched on OxyContin and the seven dose strengths. Intermezzo indication and how to prescribe.<font color=blue><b>CHUDAKOB's query on 05/10/2013</b></font>You don't have to write out the entire indication on every call. What is important to the doctor when prescribing an opioid analgesic?<font color=green><b>GUTKOMA's response on 05/13/2013</b></font>He said, he doesn't really prescribe or see a lot of pain patients, ease of use if I remember correctly was important to him when RX opioids. Referred to Dr. Detwiler for those patients. But will follow up to gain better understanding.<font color=blue><b>CHUDAKOB added notes on 05/15/2013</b></font>OK. He does prescribe a fair amount of Vicodin. Perhaps he doesn't prescribe Butrans because he doesn't understand it. This is where the clinical study data can come into play.
PPLPMDL0020000001	Barberton	OH	44203	4/29/2013	I asked the dr what helps her determine when to use a long acting versus a short acting and she said when they are taking the short acting around the clock. Dr mentioned she is have difficulty getting Medicare approval for OxyContin. Discussed using butrans after tramadol and before Vicodin and dr agreed to do that and agreed to bring any managed care issues to the forefront when I visit. Reviewed intermezzo dosing and limitation of use.
PPLPMDL0020000001	Cleveland	OH	44124	4/29/2013	Reviewed Butrans and OxyContin indication. She's not comfortable writing CII or CIII products. She's worried about abuse. Probably a losing battle with my lead products. She does prescribe insomnia agents. She liked the MOTH, PRN, sublingual option with intermezzo. She asked a lot of questions, concerned with how much, where covered. Responded with 5-day free trial with rx, savings, direct patients to Intermezzo.com to print savings. She will consider and review materials I left her.
PPLPMDL0020000001	Cleveland	OH	44130	4/30/2013	Positioned OxyContin, with q12h dosing & broad formulary coverage, for appropriate patients who may benefit from this dosing regimen. Positioned Butrans for those who take up to 40mg hydrocodone or oxycodone per day as an option dosed once weekly. Also handed Dr Diab the Intermezzo dosing guide & reviewed indication & dosing. He said he liked it better when Intermezzo had samples. I told him I understand, but now we have a 5 tablet trial offer for patients with appropriate insurance coverage, so they can still try it for 5 nights with no out-of-pocket, so it is a way for them to sample before getting a full prescription. Pointed out the cards to him in the
PPLPMDL0020000001	Akron	OH	44333	4/30/2013	Reviewed opioid experienced trial focusing on the inclusion criteria and end points. I asked her if she has seen success like the patients in the trial with Butrans? Jennell said that she has had good success but admitted to not using it enough. I reviewed the Scott and nancy profile and told her to focus on patients like those and asked her what the downside to using Butrans in patients like those? Kennel said she agreed it is a good choice. Nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44103	4/30/2013	Quick call with Nurse, Va/Receptionist booked a lunch appt. Intermezzo introduction
PPLPMDL0020000001	Fairlawn	OH	44333	4/30/2013	Quick discussion about Bup 3015. Hit main points of study and asked dr if his clinical results with Butrans have been similar to the clinical trial? Dr said he has had good success with Butrans and is always looking for ways to provide a different method of pain relief. Nothing else learned
PPLPMDL0020000001	Brooklyn	OH	44144	4/30/2013	Talked with Michelle/nurse, intro., presented products, Michelle said she could use Savings cards , practice as a whole doesn't treat a lot of pain in general.
PPLPMDL0020000001	Brooklyn	OH	44144	4/30/2013	Quick hit on Products, pharmacist requested Intermezzo trial/ savings cards
PPLPMDL0020000001	Parma	OH	44129	4/30/2013	Spoke with technician as pharmacist was unavailable to talk to me. Showed Intermezzo FPI & pointed out indication. Reviewed dosing & reviewed dosing PRN if the patient experiences a middle-of-the-night awakening. Discussed sublingual delivery system. Discussed savings availability for all 3 medications online at PurdueHCP.com or at their respective websites. She agreed to share the information with the pharmacist. I asked if they ever look up savings for medications online for customers. She said they do if they know about it, but they don't always remember because of time & being rushed. Discussed e-voucher.
PPLPMDL0020000001	Akron	OH	44333	4/30/2013	Quickly discussed Bup 3015 and hit main points. I asked Lisa if he clinical results have been similar to the ones in the trials. She said they have and most patients she has followed up with are very happy with Butrans. I reviewed the case studies with her and she finds them interesting and not realistic. I explained that patients "like these" are ones that are suited for Butrans. Lisa said she gets it and will continue to find candidates.
PPLPMDL0020000001	Akron	OH	44333	4/30/2013	Gave review of opioid experienced trial. Hit main points and asked dr if his experience clinically has proven to show around a 30% decrease in pain? Dr said many it has and some it has not. Dr said that for some patients it about them being able to do things throughout the day that they couldn't do before. Dr said that he finds that most of his patients will need to titrate to the 10mcg and have the pain relief they need. Dr said he has about 10% of his patients on the 20mcg and those are the more severe pain patients. I asked dr to continue prescribing with success. Explained OxyContin Sam profile and asked dr to switch patients failing Percocet. K dr said he typically moves patients to the ER when they still have pain with 30mg of the IR. discussed intermezzo indication, dosing and limitations of use. Explained free pills and copy cards.
PPLPMDL0020000001	Parma	OH	44129	4/30/2013	Myra said she was short on time but wanted to let me know she just wrote Butrans for a patient on Caresource & is reviewing the prior authorization. She added that the patient had been on tramadol & hydrocodone for years. I told her to my knowledge, this should satisfy the requirement. She said she hopes so because she really has been trying to get more patients on it. Myra said she starts them on Butrans with the hope/expectation to decrease the hydrocodone amount the patient takes. Spent time with Dawn who told me that it is a pain for her when Myra has a patient on Butrans & hydrocodone. She said it is just harder to keep track of how much the patient is taking & make sure they are being responsible with the hydrocodone. I asked about titration. Dawn said fortunately more & more patients are reaching a point with Butrans where they have found their ideal therapeutic dose, so they are more stable & can focus on gradually decreasing the hydrocodone. Reviewed Intermezzo dosing & patient type.
PPLPMDL0020000001	Stow	OH	44224	4/30/2013	Reviewed Bup 3015 and discussed main points of trial through background. I asked Angela if her clinically experience with Butrans has been similar to the trial? Angela said she likes Butrans and agreed that most of her patients tell her their pain is reduced. She said that most have gone down 2-4 points on the pain scale after 1-2 months of being on it. I asked if she has titrated patients? She said she has and most are on the 10mcg and said she gets the 20mcg when necessary. I asked for continued business like those failing tramadol.
PPLPMDL0020000001	Akron	OH	44312	4/30/2013	Provided a one minute overview of the Bup 3015 trail for Butrans. Discussed end points and focused on forced titration and outcomes. Dr said he will review further and likes Butrans. Nothing else learned.
PPLPMDL0020000001	Lakewood	OH	44107	4/30/2013	Gave insight number 1. Dr said his rate is better. Discussed opioid naive patients in studies with OxyContin. Discussed titration of butrans.
PPLPMDL0020000001	Parma	OH	44134	4/30/2013	In-Service completed on Defining Key Terms in Pain Management for Nurses & STNA's, 25 were in attendance. The handout of "Defining Key Terms in Pain Management" was given to all attending staff. Tolerance, Physical Dependence and addiction was discussed as well as defining the difference in Schedule I - V.
PPLPMDL0020000001	Lakewood	OH	44107	4/30/2013	Asked dr how he was writing OxyContin in the hospital and found out that he is writing "OxyContin IR" and "OxyContin ER". Explained that OxyContin is a brand name and is only ER. He said the hospital makes him check IR or ER. The staff said that they are having problems with having to fill out prior authorizations. I agreed to investigate further with drugmart. Discussed Butrans indication, application and initiation of therapy. Dr asked how to write Butrans, and we discussed managed care.
PPLPMDL0020000001	Akron	OH	44310	4/30/2013	I handed dr the Bup 3015 and told him that I want him to focus on two things from the trial. First is that 62% of the patients of the 1160 were on hydrocodone combinations. Second is that it was proven that 49% of patients on the 20mcg dose compared to 33% of the 5 mcg dose patients achieved at least a 30% reduction in pain. I asked dr if he thought 30% improvement was good? Dr agreed it was. I asked if it makes sense for him to know all information closer at his patients on hydrocodone medications as possible candidates for Butrans? Dr agreed. Dr said he needs to use it more often.Gave dr the dosing for OxyContin and asked for him to switch his Percocet patients to the q12h oxycodone. I asked him to also identify a patient appropriate for intermezzo and handed him a dosing guide.<font color=blue><b>CHUDAKOB added notes on 05/10/2013</b></font>This was really good! Nice job. I really like how you laid this out during the call. Keep up the good work!
PPLPMDL0020000001	Parma	OH	44134	4/30/2013	Spoke with pharmacist, Rita, & reviewed Intermezzo with indication, dosing, & patient type. I stressed that this is not to be taken at bedtime, only if the patient experiences a middle-of-the-night awakening with insomnia & has 4 or more hours left of sleep. I asked if a patient brings in a prescription & the physician writes the script "HS" if he would call them to clarify since it is not intended to be used this way. She agreed, saying she sees how Intermezzo is not like the other medications for sleep. Also gave information on Butrans & OxyContin savings availability online.
PPLPMDL0020000001	Lakewood	OH	44107	4/30/2013	Asked dr why he has not written butrans. Dr said he does not see why he should use it instead of Vicodin. I shared the clinical data from the opioid experienced trial. Discussed the number of patients, percent who tolerated and the outcome. Dr asked if Butrans was okay for the elderly and I highlighted the average age was 50. Told dr we will speak more about the efficacy of Butrans on future calls until he feels comfortable.
PPLPMDL0020000001	Cleveland	OH	44130	4/30/2013	Dr Fedorko saw me & said he wishes he could help me but with me selling Butrans & OxyContin, he just doesn't know if he can. I asked what he meant by that. He said he does not "push" that type of medication. I told him I am not asking him to prescribe something if someone is not appropriate or does not meet the indication. I told him even if he has one or two patients in his whole practice, it would be good for him to know all information about all the treatment options. He said it is too bad Intermezzo does not have samples because he has been loaded with Edular samples, so it is just better to give that to patients. I reviewed indication & dosing. He placed a dosing card in his station & one in the sample closet near the trial/savings cards. I reviewed again how the patient would take it & showed how the prescription can be written. He said he would try his best.
PPLPMDL0020000001	Parma	OH	44134	4/30/2013	Dr Hernandez asked what is new with Butrans. I told him I was thinking about his practice & was wondering if how he approaches treatment of pain now as compared with several years ago. He said it has changed a lot. I asked him to tell me about that. He said now he has Butrans, which is a great, effective, safe medication. He went on to say that many patients don't even realize there is something wrong with what they are being treated with until they try something else like Butrans. He said this is why talking to patients is so important. He said he spends the time talking to them, asking questions, & educating them on other options. He said he has also been educating pharmacists, who seem to have no problem filling script after script of 120-240 Percocet per month. He said Percocet is only to be used for 2 weeks after surgery, not chronically like many physicians do. He then was called away by Regina to deal with a patient issue.
PPLPMDL0020000001	Akron	OH	44312	4/30/2013	Very quick message about OxyContin and Butrans. I asked dr to continue prescribing OxyContin when his patients reach 30-50mg of Percocet a day as you stated previously. Dr agreed. I told dr to use Butrans when he has a patient fail vicoden or tramadol. Left dr with case studies for each.
PPLPMDL0020000001					

	Parma	OH	44129	4/30/2013	Passed back Butrans dinner program invitation to Dr Ortega on his way out. I asked if he thought he could attend. He said he would try & asked me to give it to Cindy as she keeps him on-schedule. Reviewed Intermezzo indication with Cindy. I asked if she has had any problems with BWC coverage lately for Butrans. She said she has not & that it has been going well. She said Dr Ortega has ordered it for a few patients that she can think of lately. She agreed to remind Dr Ortega about the speaker program.
PPLPMDL0020000001	Parma	OH	44134	4/30/2013	Made a drop-in visit to speak w/ ADDON, Cheryl Sigley to discuss Pain Management educational opportunities. I spoke w/ the receptionist, RoseAnne who paged Cheryl. Cheryl stated that she was swamped today. I left my BC and will call to set up an appt.
PPLPMDL0020000001	Parma	OH	44129	4/30/2013	made a drop-in visit to speak with NP, Tammy Pasesla. I spoke with the receptionist who informed me that Tammy was busy seeing residents. Branded handouts (Butrans & Intermezzo) was left for her along w/ my BC
PPLPMDL0020000001	Akron	OH	44312	4/30/2013	Spoke to Michele the pharmacist about intermezzo indication, dosing, and limitations of use. Michele said she has not seen any prescriptions for it but she does have the 1.75mg dose in stock. Discussed Butrans key messages and Michele said she has a few regular customers that get Butrans refilled. Michele said they have about all OxyContin doses in stock and fill it regularly.
PPLPMDL0020000001	Uniontown	OH	44685	4/30/2013	Spoke with barb the pharmacist about all products. Explained the intermezzo indication, limitations of use and dosing specifics. Barb said they did get a prescription recently and a PA was necessary. She didn't remember if it was approved or not. I asked about the criteria for the PA and barb said the patient needed to fail generic zolpidem. Barb said they have been seeing more Butrans since Fouad and Lababidi have moved in to uniontown. Barb also said they have been seeing an uptick of OxyContin as well. Nothing else learned.
PPLPMDL0020000001	Copley	OH	44321	5/1/2013	I told dr I needed to prove to him that Butrans works by use of the clinical trials. Dr said that he has already heard me tell him about the trials. I asked him if he believes Butrans works then? He said he knows it works but patients want their pills. I told him that it is his job to express to the patients how important it is for another option. Dr said ok. Nothing else learned.
PPLPMDL0020000001	Akron	OH	44320	5/1/2013	The doctor approached me and told me that she had two patients she initiated on Butrans recently. Dr said that one of them was declined due to not meeting the criteria and the other was a PA and met the criteria. I asked why she thought of Butrans for those patients? Dr said that the patients were both having pain with vicoden and she didn't want to give them anymore. I expressed importance of appropriate patient type selection and starting dose as well as titration. Dr said she will continue to try. Dr said its tough because of the amount of Medicaid and cash pay. I asked if those groups encompass ALL of her patients? Dr said no. I told her that those are the ones I want her to focus on along with Caresource. Showed her the Sam profile for OxyContin and asked for more business and to use intermezzo when patients complain of middle of true night insomnia.
PPLPMDL0020000001	Bedford	OH	44146	5/1/2013	Dr Moufawad said he has been getting more patients from primary care who are taking a lot of hydrocodone chronically. He said he wishes they would just start patients on Butrans at that level, but he will just continue to transition appropriate patients like this to Butrans. He added that he has been having success with this lately, telling me about 2 Caresource patients for whom he got it approved for & who are doing well- having been titrated from 5mg to 10mcg with success. I asked him to continue & he agreed. He also said he read that hydrocodone is now a CII. I told him I was not aware of that in this state. Dr Moufawad also said he saw that the FDA said no more original OxyContin could be made, which he was very happy to see. Reviewed Intermezzo patient type in the event a patient with this specific problem presents & has appropriate insurance coverage.
PPLPMDL0020000001	Warrensville Heights	OH	44122	5/1/2013	Reviewed OxyContin 7 tablet strengths of q12h dosing of oxycodone. Reminded Dr Zivic of our previous conversation when he told me he wanted a refresher on Butrans & let him know I came prepared to bring him up to speed on the medication. Reviewed appropriate patient type/range, dosing, delivery system, & CII opioid. He said it all sounds very good, but he asked ultimately, why would he use this- how is it better than other agents. I told him we do not have comparative data nor do make any comparative claims. I told him to look at it as merely another treatment option for patients like Scott & Nancy (showed profiles). Dr Zivic asked about coverage, so I reviewed formulary & discussed Caresource prior authorization requirements. He said I should review this information with his staff because they are the ones who have to deal with it primarily. I discussed the information with Megan & Michelle (MA's) & gave them Butrans information for dosing reference. Dr Zivic agreed to try Butrans.
PPLPMDL0020000001	Akron	OH	44313	5/1/2013	Told dr through the window to continue to us OxyContin and if he has patients complaining of pain on Percocet to switch them to OxyContin. Dr said ok. Nothing else learned.
PPLPMDL0020000001	Akron	OH	44333	5/1/2013	I Made a drop-in visit to meet w/ D.O.N., Ramona Watson to schedule an appt. to discuss educational opportunities on pain management. I spoke w/ the receptionist, Marcia, who paged Ramona, she did not answer her page. Marcia said, "It is best if you e-mail Ramona, she usually responds quicker." I sent Ramona an e-mail requesting a meeting w/ her to discuss educational in-service opportunities @ Ramona.Watson@saberhealth.com. I
PPLPMDL0020000001	Akron	OH	44320	5/1/2013	I showed dr the slide conversion scale and told him that I'm guessing he has many patients on tramadol? Dr agreed. I told him that I'm guessing that some of those patients on tramadol around the clock still are in pain? Dr said he knows some are. I asked if he will start those patients on Butrans? Dr said ok. I told him to also use intermezzo when patients complain of in the middle of the night insomnia.
PPLPMDL0020000001	Cleveland	OH	44122	5/1/2013	Series of emails to confirm details for presentation/webinar scheduled for May 3rd.
PPLPMDL0020000001	Garfield Hts	OH	44125	5/1/2013	Explored opportunities within depths. (Outpatient surgery center next to hospital and on Transportation Blvd- Large Ortho group-Lopresti etc)
PPLPMDL0020000001	Cleveland	OH	44195	5/1/2013	Attempted to track dr Sabrina Sparks-Pharmacy liaison, left message
PPLPMDL0020000001	Independence	OH	44131	5/1/2013	Quick call- Extended invitation for Butrans dinner program to Dr George & asked if he thought he could attend. He said he would like to as he feels Butrans is a good medication & he respects Dr Moufawad. He agreed to let me know if he would be able to attend. OxyContin broad formulary coverage message. Spoke with Danielle & Terry regarding DTC marketing, letting them know some patients may be calling about what they see. Reviewed indication & patient type.
PPLPMDL0020000001	Munroe Falls	OH	44262	5/1/2013	Asked dr to allow me to provide her with a one minute detail of Bup 3015. Provided the detail and asked her if she would be happy with a 30% reduction in pain? Dr said shed be happy with 20% reduction. Nothing else
PPLPMDL0020000001	Garfield Hts	OH	44125	5/1/2013	Brief discussion with Pharm. tech Linda, Intermezzo indication and will remind pharmacist of savings/ trial cards.
PPLPMDL0020000001	Barberton	OH	44203	5/1/2013	Discussed Intermezzo driving study with Billy and asked him his thoughts. He said he thought the information was useful. Asked about Butrans and OxyContin movement. Billy said no Butrans but the usual OxyContin movement which is small.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/1/2013	Met Pauline, RN clinical coordinator of the Hudson office for western reserve hospital pain management. Discussed Butrans and OxyContin and need for resources and patient savings information to be available, at each branch. Pauline said she thought it would be necessary to come over lunch hour on Mondays when dr Narouze is there to inform him of information being available at each branch.
PPLPMDL0020000001	Cleveland	OH	44115	5/1/2013	Spoke with George in pharmacy along with Dave B director, agreed to bring in Butrans
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/1/2013	Met with Glenn the hospital internal pharmacist about providing Butrans and OxyContin resources and patients savings cards in the Hudson and Fairlawn locations for the physicians that spend time in those locations? Glenn provided approval to leave product information and savings cards n those locations because he said its a good idea because when and if the hcps prescribe one of those products they will need savings for patients at time of prescription.
PPLPMDL0020000001	Barberton	OH	44203	5/1/2013	Asked dr if she remembered our OxyContin discussion and I reminded her that she would let me know if she ran into any Medicare d problems with OxyContin. She said she has not had an opportunity to write since my last call and I asked a out the patient with lower back pain on tramadol who still needs pain relief. She remember our conversation about Butrans but has not written. Gave Intermezzo dosing reminder.
PPLPMDL0020000001	Akron	OH	44320	5/1/2013	I asked dr if she got to the two Butrans prescriptions that where PA's? Dr said she did get to one of them approved and it was a state Medicaid patient and they patient met the state medicad criteria. Dr said that she was very pleased and initiated the patient on the 10mcg patch. I asked for titration to the 20mcg she believes the patient needed additional analgesia. I asked dr if she would move the next Butrans PA up and get to it first. Dr agreed she will do it soon. I asked dr to initiate patients on OxyContin for her patients on Percocet and intermezzo for patients that meet the indicatin as I stated along with the dosing information.
PPLPMDL0020000001	Parma	OH	44129	5/1/2013	Invited Dr Kalin to the upcoming dinner program & asked if he could attend. He said he was not 100% sure but he would like to. He agreed to contact me to let me know or register through one of the routes. He said he has been having good success with Butrans & actually recently titrated one of his patients to the 20mcg with success. He said other than that patient, he finds that the 10mcg is sufficient. I shared with him that even patients in opioid-naive studies with Butrans were titrated to the 20mcg. Showed background on opioid-naive study. He said he did not realize that but it was interesting. Gave additional savings cards & also asked that he give the patient information kits out as a means to improve communication with patients starting on Butrans. Dr Kalin agreed to continue to prescribe. Reviewed Intermezzo with Jocelyn with indication & patient type.
PPLPMDL0020000001	Akron	OH	44333	5/1/2013	Dr swamped with new patients today. Got a minute to go over the opioid experienced trial. I asked dr how he is feeling about titrating patients to the 20mcg if he believes a patient needs additional analgesia? Dr said he just titrated a patient to the 20mcg today and agreed to not be hesitant going forward if the criteria for titration is there. I asked him to continue using OxyContin and intermezzo. Dr said he is having problems getting intermezzo covered. Many patients are being required to fail generic zolpidem first.
PPLPMDL0020000001	Solon	OH	44139	5/1/2013	Conducted Intermezzo Inservice with Dr Zaidi on the iPad. Discussed indication, dosing, & limitations of use. Also showed demo & discussed PRN & sublingual delivery. Discussed how to instruct the patient to take Intermezzo. Went through 3 of the patient vignettes on the app & discussed them throughout the lunch. I asked his thoughts. He said he understands who Intermezzo is for & can see himself using it in patients. He added that it seems that he will need to add additional questions to his typical discussion with patients who he treats for sleep to see who meets the indication. I told him detailed discussions with patients about their sleep can really help in identifying appropriate Intermezzo patients. Discussed managed care landscape & trial/savings cards. He agreed to try it. He said he read something about OxyContin, adding that patients wish they could get the "OC" version. I explained that reformulated OxyContin is the only OxyContin available. He agreed to continue to prescribe where appropriate. Invited Dr Zaidi to upcoming Butrans dinner program. He asked if his staff can attend. I told him only MD, DO, RN, PA, & LPN practitioners may attend. He said he would try & said several of his staff members' credentialing status for their RN is pending.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	5/1/2013	Made a drop-in visit to speak w/ NP, Charlene Sondra. I spoke w/ the receptionist, Linda, who informed me that Linda was w/ a resident. I left my BC and Butrans, oxyctin and Intermezzo materials
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	5/1/2013	Discussed all three products of lunch. Doctor told me that she likes Butrans and uses it as much as she can but has always had issues with formulary and cost. I asked where and she said for her Medicare patients and SummaCare commercial and Medicare. I explained to her that she needs to focus on private prescription insured patients as well as Caresource. I asked her when she is initiating Butrans? Dr said for her vicoden or Percocet patients. I asked her how it is going to get patients to make the switch? Dr said it is very difficult because they want their pills. I asked dr how many patients come in to see her per week on tramadol? Dr said a lot. She figured about 10-12 just on tramadol per week. I showed her the Scott profile and discussed in length. I asked her if it makes sense and if it may be appropriate to start patients earlier? Dr agreed and she will do that. I told her to use OxyContin when her patients on Percocet need an ER product. Introduced intermezzo and explained in depth hitting all key selling points. Dr agreed to try it but is concerned about cost. I told her to stick with private insured patients. Dr admitted to not using any tools for uring screening or OAHRS reports and would like a pain management kit.
PPLPMDL0020000001	Beachwood	OH	44122	5/1/2013	Spoke with Debbie, Carol, & Barb (nurses) & invited them to upcoming Butrans dinner program. They said they would see if they could attend. I encouraged them to attend since they hold such an important role in the unit. Debbie said she thinks Helen is going to go to the program, so they would do their best. Carol said Dr Barrett uses Butrans the most out of the physicians there. Discussed patient education materials & pain diaries. Also reviewed OxyContin q12h dosing & 7 tablet strengths. Spoke with Jackie & reviewed Intermezzo DTC marketing.
PPLPMDL0020000001	Stow	OH	44224	5/1/2013	I asked Zoe the pharmacist if she would hand out the Butrans patient guides to patients? Sh said she would and has continued to fill more prescriptions. I reviewed the Scott profile and if it makes sense? She said it does and said patients like it. I provided OxyContin profile Sam and she agreed it makes sense to use OxyContin instead of Percocet every 4 or 6 hours. Intermezzo dosing and limitations of use.
PPLPMDL0020000001	Independence	OH	44131	5/1/2013	Spoke with David, pharmacist, who said he was very busy, asking me to talk to his tech, Angela with any information I had. Reviewed with Angela Butrans indication, dosing, & patient type. Also reviewed limitations of use. Let her know savings for all 3 medications can be found online at PurdueHCP.com or at each product's respective website.
PPLPMDL0020000001	Parma	OH	44129	5/1/2013	Dr Gigliotti said he just hasn't seen a lot of patients for pain recently, but if he does, he will try Butrans for them. He said it always sounds like a good medication, he just hasn't seen the patients, adding that he is sending a lot to Dr Salama, but he does still have some OxyContin patients. He said he wrote Intermezzo a long time ago once but doesn't remember much more. I reviewed patient type with him as well as indication & limitations of use. I asked him to spend some time with patients to discuss their sleep to be sure they meet the indication & then to spend time reviewing with the patient how to take Intermezzo since it is taken PRN in the middle of the night sublingually. Dr Gigliotti said he would find some people for Intermezzo. Reviewed trial/savings offer & showed each card. Also gave him pocket dosing card for review. Spoke with Jaz & discussed Intermezzo patient type, indication, managed care, & savings available.
PPLPMDL0020000001					

PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/1/2013	Made a drop-in visit to speak w/D.O.N. Deb Keller, to reschedule appt. to discuss pain & pain management educational opportunities. Spoke w/the receptionist, Linda, who stated, " she is currently in a meeting w/an employee." Left BC
	Barberton	OH	44203	5/1/2013	Dr remembered I was going to ask him something about managed care and we discussed the age of his patients. Kim told him most of his patients on OxyContin were elderly. Dr corrected her and said he has all types but OxyContin is expensive. I asked him if he is talking about his commercial patients or his Medicare patients. He said compared to Vicodin the cost is higher. I told him that was true but who does he think of when he thinks of OxyContin patients. Dr said patients he can trust not to abuse. I told him that is the right patient but in addition to that what is the patient like. Dr said he has mostly old people. I asked if he uses the higher doses and he said it depends on their pain and he discussed a patient in his 40's who has had several back surgeries and is in chronic pain. Dr said he uses 80 mg for this patient. Dr said he has no problems with Butrans. I discussed the patient profile scott for Butrans and Kim asked about Medicare or cash pay customers. I explained that the vouchers cannot be used for cash customers of government insurance customers.
PPLPMDL0020000001	Fairlawn	OH	44333	5/1/2013	I made a drop-in visit to speak w/ Michelle Williams to re-schedule the in-service on constipation. I spoke w/ the receptionist, Joyce who paged Michelle. She did not respond to her page. I left my BC
PPLPMDL0020000001	Bedford	OH	44146	5/1/2013	Spoke with Steve, Pharmacist, & reviewed key points of Intermezzo. He said they still haven't seen a prescription for it so they do not carry it. Discussed dosing for different patient types as well as sublingual delivery. I stressed that Intermezzo is to be taken PRN only if the patient experiences a middle-of-the-night awakening & has 4 or more hours left of planned sleep time. I asked if he does see a prescription written "HS" if he would alert the physician & fill it appropriately. Steve agreed to do this saying he can see that that would be a problem. Gave RxPatrol information & discussed available savings online for all 3 medications.
PPLPMDL0020000001	Akron	OH	44313	5/1/2013	I made a drop-in visit to speak w/ Richard Lynch, to follow-up on my visit and meeting w/ him on 3/5 and to see about scheduling an in-service on pain management. I spoke w/ Tammy Noland who phoned Richard, N/A, she informed that Richard was in "Care Conference" I left my BC.
	Akron	OH	44307	5/2/2013	I asked drs how the currently manage their patients who see them for pain? Dr said he doesn't like doing it much because of the lying and deception from the patients but said they take the necessary steps to protect themselves such as running reports, drug toxicity screens and pain contracts. I told him it was good to hear. I introduced Butrans explaining indication, dosing, titration, appropriate patient types, proper application, adverse events, and patch technology along with explaining its action at the mu receptors. Dr asked about it being seen in urine screens? I told him the values need to be lowered in order to pick it up because of the low doses. Dr asked about conversion to Butrans from fentanyl. I told him there are no head to head studies and there is no conversion. Told dr that patient type is not ideally suited for Butrans. Reviewed Scott and nancy and asked him if he will use? Dr agreed to try it. Exp,aimed OxyContin in which dr said he will not use but really liked how Butrans is a CIII. Introduced intermezzo indication, limitations of use and dosing. Dr said he has used and once and Discussed the third insight and how he is currently communicating with his patients now especially since he is in pain management? Dr said he has not seen too many patients yet but did say it is different than internal medicine. He said he sees how much more thorough he needs to be when dealing with pain. I discussed how Butrans should be a part of his practice and how he needs to properly identify appropriate patients for it. I reviewed the Scott profile and asked him if he will initiate Butrans for a patient like him? Dr said he will. Quick message on OxyContin by asking when he sees patients on Percocet who complain about being in pain and taking pills to initiate OxyContin q12h? Dr said ok. Showed dr the demo packs for intermezzo and asked for his business.
PPLPMDL0020000001	Akron	OH	44333	5/2/2013	Spoke to Tim the pharmacist about intermezzo and he told me that he has filled a couple of them. I explained Butrans and asked him if he has dispensed any? He said that he knows the pharmacy has dispensed some and have regular patients in to refill. I discussed OxyContin patient type selection and dosing information.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	5/2/2013	I asked dr if the patients she has on OxyContin are getting adequate pain relief? Dr said they are but she doesn't have too many. I asked how she evaluates her patients on Percocet to find out if they are getting adequate analgesia? Dr said she basically talks with them and family members and said she does use pain scales. I showed her the patient profiles and asked her to initiate more patients on OxyContin that fit the descriptions I gave her from the profiles. Reviewed Butrans doing and tramadol patient uncontrolled. Intermezzo dosing and indication.
PPLPMDL0020000001	Stow	OH	44224	5/2/2013	Quick call- Reviewed Butrans & Intermezzo trial & savings offer briefly with Dr Mandat. He was he was running behind, thanked me & walked into a room. Spoke with his nurse & introduced Intermezzo. Showed her trial/savings cards & discussed indication, dosing, patient type. Also discussed sublingual delivery & PRN. She made a new place for the Intermezzo cards & put a dosing card with it for their reference. She agreed to share the details of the information with Dr Mandat when he had more time.
PPLPMDL0020000001	Parma	OH	44134	5/2/2013	Spoke with Sharon T, pharmacist, who said she has actually filled a few prescriptions for Intermezzo. Reviewed information on patient type & patient counsel. I alerted her to PRN sublingual dosing & went through dosing for various patient types. Dr said she this information down & said she did not realize this. I asked if a patient brings in a prescription dosed HS if she would alert the physician to the mistake- she agreed, also telling me she would counsel the patient. Discussed how savings for all 3 medications is on e-voucher. She said she has noticed that with OxyContin on some of the patients & was really happy to see how automatic it is. I asked how that looks on her screen. She said it is in the notes & then also prints out for the patient medication information near the insurance information.
PPLPMDL0020000001	Parma	OH	44129	5/2/2013	In anticipation of an educational program for Summacare case managers, met with Olivia Bitter via conference call. Ms. Bitter requested copies of additional FACET modules to review (Is It Pain and Cognitive Impairment). Possible dates for a presentation were also discussed. Date for presentation will be finalized by Kendra Kormos (Purdue Regional Account Executive) and Olivia Bitter. The Tele-Assessment resource was discussed; at this time the resource is not of interest to Summacare.
PPLPMDL0020000001	Akron	OH	44308	5/2/2013	I asked Dr Rossi when she writes hydrocodone for a patient what that prescription typically looks like. She said it depends, but she will usually give them a month if they are a patient with something like terminal cancer or she would write for a week or two if it was something like low back pain. I asked what about patients with low back pain that is due to a chronic condition, such as spondylolysis or spondylolesthesis. She did not respond. I showed Butrans inclusion criteria for opioid-experienced trials & let her know this is the type of patient we studied Butrans in. Reviewed once weekly dosing & CIII opioid analgesic. I showed results from the study, pointing out pain score reduction. I asked if she felt these results were significant. She did not respond. She said she has tried recently to send a few of her patients to an inpatient drug rehab program but no one's insurance will pay for it, so these patients are left to fend for themselves. She said she typically uses OxyContin in hospice patients or in nursing homes. Showed 7 tablet strengths for individualization of dosing & titration. Introduced Intermezzo & shared indication, dosing, & limitations of use. Both Edlie, her nurse, & Sandy, her MA said they needed Intermezzo after I reviewed this information. Discussed how to instruct patients to take Intermezzo & reviewed patient type again. Showed how the prescription could be written. Also discussed managed care landscape & gave trial/savings cards.
PPLPMDL0020000001	Beachwood	OH	44122	5/2/2013	Roberta said she just saw an elderly female patient who had been on Butrans 5mcg for about a month. She said the patient was opioid-naïve at the time of initiation. The patient complained of headache after putting one of the patches on. The headache started on the day of the patch change & lasted approximately 3-4 days. The patient reported pain decrease from Butrans but wished to discontinue due to headache. Roberta said she was not sure if the headache was even as a result of Butrans- I let her know I would report it. Roberta said the patient had been on many therapies in the past, discontinuing each one due to lack of therapeutic effect or adverse events. She said prior to starting Butrans the patient rated her pain at an 8 & during Butrans rated it as a 4, but the patient said she did not think Butrans was working. Roberta said she thought this was strange because that seems like a good pain score reduction. I showed her study results for Butrans & pain reduction seen. Roberta said it seems consistent with what this patient saw. Shared Intermezzo patient vignette from iPad app & reviewed patient type & dosing. Gave dosing card for her reference.
PPLPMDL0020000001	Uniontown	OH	44685	5/2/2013	Asked dr what his experience is with managing patients that see him for pain relief? Dr said he sees many aliens for pain, more than he likes and they all want "their pills." Dr said that the practice does its best to have practices in place like OAHRS reports, drug screens and pain contracts. I asked if he has heard about Butrans? Dr said no. I told him it is a CIII, 7 day transdermal patch for moderate to severe chronic pain and explained the conditions treated in the clinical trials. I discussed dosing, titration, use of supplemental analgesia, its action at the mu receptors and appropriate starting dose and patient selection. Doctor asked about CNS depression and disposal of the patch. I read from the FPI about each of those questions. I explained Scott profile and asked if it made sense? Dr said yes. I asked if he currently has patient on tramadol around the clock who may need a dose adjustments. Dr said yes and he said he WILL use Butrans and told me he wanted to look over the FPI in detail. Explained the copy cards and information guides. Quick messages about OxyContin and intermezzo. Dr said he likes the idea of intermezzo and he may use it.
PPLPMDL0020000001	akron	OH	44307	5/2/2013	Full detail on al products. I first asked all the doctors how the are currently handling their pain patients and how they go about managing it? Dr said that he doesn't like messing with it much because of the deception on behalf of the patients. I asked if he likes prescribing opioids like vicoden? Dr said no. I explained Butrans key selling messages, reviewed Scott profile, approximate conversion, titration, steady state, and use of agonists for supplemental analgesia. Explained application sites and copy cards. I asked dr if Butrans is a product he would prescribe? Dr said he will strongly consider it? Explained OxyContin dosing and conversion from Percocet. I asked dr if he would switch patients on Percocet that would want a q12h product. Dr said probably but not often. Introduced intermezzo indication, limitation of use, dosing and showed demo packages.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/2/2013	Said hello to dr at window and saw the intermezzo. She said she has discussed it with other reps and mentioned Megan Farrar. I asked her if she has used it? Dr said its too expensive and that she is on the formulary board. I handed her a Butrans initiation and titration guide, gave her the indication. Dr said we can discuss over lunch. Gave ER the OxyContin conversion and titration guide as well.
PPLPMDL0020000001	Parma	OH	44129	5/2/2013	Quick call- Caught Dr Chagin at the window & passed back Butrans program invitation, reminding him of his previous interest in attending. I encouraged him to attend since he has expressed desire to use Butrans, letting him know this would be a good opportunity to discuss it with specialists & other physicians like him. He said he wasn't sure but he would try. Spoke with Debbie & reviewed Intermezzo indication, dosing, & limitations of use. Gave her dosing card for reference & let her know about DTC marketing. Reviewed managed care landscape, prior authorization requirements, & trial/savings offer. She agreed to share this information with Dr Chagin when he was done seeing patients.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	5/2/2013	Discussed all products with Ray in the pharmacy. Explained the intermezzo indication, limitations of use, and dosing specifics. Was told the pharmacy has not filled any intermezzo but has seen Butrans when I showed the dosing guide. Explained the indication and appropriate starting dose as well as copy cards. Talked about OxyContin dosing and where it is being used and proper patient selection.
PPLPMDL0020000001	Woodmere	OH	44122	5/2/2013	Spoke with technician who said pharmacist was unavailable. Showed Intermezzo FPI & reviewed indication & limitations of use. Also stressed that the patient would take Intermezzo sublingually PRN if they have a middle-of-the-night awakening & are unable to fall back asleep as long as they have at least 4 hours of planned sleep time remaining. Also alerted her to DTC marketing. Discussed that savings for Intermezzo, Butrans, & OxyContin can be found online at PurdueHCP.com or at each medication's website.
PPLPMDL0020000001	Tallmadge	OH	44278	5/2/2013	I asked dr what the hang up is with Butrans and what e downside is to using it for a patient failing an IR opioid or NSAIDs? Dr said he doesn't have enough patients to choose from. I asked him to only try it once in 1 patient.
PPLPMDL0020000001	Akron	OH	44309	5/2/2013	Dr said he will consider. Asked for OxyContin use in patients failing Percocet and intermezzo when patients tell him they can't get back to sleep. Nothing else learned.
PPLPMDL0020000001	Independence	OH	44131	5/2/2013	1. Join MBK for Conference Call to discuss needs assessment for program 2. Determine details for first program Extended a Butrans program invitation to Dr Sundaram & asked his thoughts on attending. He asked if he could bring his partner, Dr Pandit. I told him that would be fine. He said he would talk to him & would let me know if he will be able to attend. Dr Sundaram said he doesn't seem to treat as many patients for pain as he used to. He told me again that Dr Kim & Dr George are working out of that office also. He said it just makes more sense to refer & it is easier. He saw my Intermezzo FPI & said he remembers me telling him about it but does not recall specifics. I reviewed indication, dosing, limitations of use. He said he had just assumed it was "another" Ambien. Re-stated indication & reviewed patient type. Discussed sublingual delivery & taking PRN only when experiencing the middle-of-the-night awakening & difficulty returning to sleep. Dr Sundaram said he is surprised, but he actually sounds like a good medication to try. He asked about coverage. Reviewed managed care landscape & prior authorization general requirements. He said he would try it if someone had the right insurance for it.
PPLPMDL0020000001	Beachwood	OH	44122	5/2/2013	Started Intermezzo iPad app patient vignettes. Dr Yokiel said he does think Intermezzo is a good option he just hasn't written any new sleep medications or changed anyone's current sleep medications. I reviewed patient types using vignettes. Discussed gender specific dosing & limitations of use. He said it would come down to cost/coverage. Reviewed managed care landscape & discussed Caresource prior authorization requirements. He said that was good to know as they do not seem to be approving much anymore. Also reviewed Butrans prior authorization requirements on Caresource. He said that was also good to know. Gave additional OxyContin Patient Essentials Packs & asked him to give them to patients who he is starting new on OxyContin. He said he would do that & said again he would try Intermezzo. I let him know I would follow up with him to see about results.
PPLPMDL0020000001					Invited him to upcoming Butrans program & asked him to attend. He said he wasn't sure but would try.



PPLPMDL0020000001	Lyndhurst	OH	44124	5/3/2013	Left OxyContin slim jims. Left new Butrans tear sheets, reviewed with staff. Left highway driving study, FPI, dosing flashcards for Dr Reed, Karen Steffey, & Patricia Moran. left 2 boxes Slow Mag. Did have lunch scheduled initially today, but Dr Reed has cancelled all lunches this Sumer, & moving forward until further notice.
	Parma	OH	44129	5/3/2013	Dr Lin said she uses OxyContin all the time. I asked what generally causes her to initiate OxyContin. She said usually it is patients who are taking IR oxycodone every 4 hours, that is the point when she starts the long-acting. She added that she typically chooses OxyContin as her long-acting of choice & then gives IR oxycodone for breakthrough pain. She said she only prescribes morphine if the insurance company forces it, but that is not very often because she finds that OxyContin's coverage is very good. I agreed that OxyContin does have broad formulary access & reviewed savings cards & eligibility requirements for usage. Showed visual with 7 tablet strengths & discussed individualization of dosing. Showed Butrans appropriate patient range & reviewed 7 day transdermal delivery. After looking at the range, Dr Lin said she thinks most of her patients are beyond this range & are more in the "severe" pain category. I agreed that if a patient is taking more than 40mg oxycodone per day, they would be out of the appropriate range for Butrans & would be a candidate for consideration for OxyContin. Introduced Intermezzo with indication, dosing, limitations of use. Also discussed sublingual delivery & PRN dosing. Discussed managed care landscape & available savings. Dr Lin taught her staff about Intermezzo. I gave them a dosing card to keep by the phone for reference & alerted them to DTC marketing.
PPLPMDL0020000001	Cleveland	OH	44122	5/3/2013	1. Attend FACET's program with MBK
PPLPMDL0020000001	Hudson	OH	44236	5/3/2013	Spoke with Galiana the pharmacist about intermezzo and asked her since I visited last if they have dispensed its. She said no they have not and don't have it in stock. Reviewed the information. Explained Butrans dosing, appropriate starting dose and reviewed the Scott profile. Galiana said that they have a couple of people of it but only have the 5 mcg in stock. OxyContin dosing and reviewed the Sam profile.
PPLPMDL0020000001	Cleveland	OH	44130	5/3/2013	Quick call- Dr Kansal was on the way out of the office when I caught him. Reviewed OxyContin & Butrans patient savings offerings he has & asked him to look at what his patients are taking for their pain & evaluate if they might benefit from a different option. Spoke with Dorothy & gave her Intermezzo dosing card. I asked her to keep it by her phone in case patients call about it after seeing an ad. She said she would do that.
PPLPMDL0020000001	Parma	OH	44129	5/3/2013	Dr Roheny said one of his patients was seen at Metro ER & they put her on Butrans. I asked what he would say his biggest hurdle in prescribing Butrans is. He did not respond. He said it looks like other practitioners are using it. I told him many prescribers have found a place for Butrans in their practice & asked why he hasn't identified even one of his own. He said he doesn't know. Reviewed Intermezzo indication & dosing & asked what experience he has gained with it. He said he forgot & then recited the dosing to me. Reviewed managed care landscape & told him he has trial/savings cards to give out as well.
PPLPMDL0020000001	Akron	OH	44312	5/3/2013	I asked r if he has any patients on Percocet that would be appropriate for the ER oxycodone? Dr said he will try to switch a few that have been on it for a while. I asked dr to switch patients that have been on Percocet for 3+ months. Spoke to Nadia about OxyContin and when it's appropriate to switch patients off Percocet. I told her about the copy cards and how they work.
	Mayfield Heights	OH	44124	5/3/2013	Quick window call after meeting with office coordinator Denise. Left Butrans new tear sheet for Gina's review. Butrans doses, proper application, disposal. OxyContin, CII option. 7 doses available, q12 hr recommended dosing. Left conversion/titration guide. intermezzo, indication, patient guide, 5-day free trial with Rx. Left highway drive clinic for Gina's review. Went over Intermezzo coverage, Caresource PA with Denise. Reviewed new Butrans patient tear sheets, which she really likes. Left one box OxyContin& Butrans savings cards.
PPLPMDL0020000001	Hudson	OH	44236	5/3/2013	Spoke with Harvey about intermezzo indication, dosing and limitations of use. Harvey said he has read about it and seen commercials but does not have in stock or dispensed. Explained Butrans and OxyContin dosing, indications and patient types. Harvey said they have not seen any Butrans and they see some OxyContin but not much. Nothing else learned.
PPLPMDL0020000001	Beachwood	OH	44122	5/3/2013	Spoke with MA Jenny who said I had just missed Dr Barrett. Reviewed contents of OxyContin Patient Essentials Packs & asked if she has seen Dr Barrett give any out yet. She was not sure. Reviewed q12hr dosing. Also offered Butrans savings card. She said to give them to Dr Barrett when I see him again, suggesting I come back in a week or two. Gave her Intermezzo dosing information & alerted her to DTC marketing.
PPLPMDL0020000001	Cleveland	OH	44122	5/3/2013	Presented FACET modules "Primer on Addiction" and "Communication" to case managers with Care Source. MSM presented in person at the Cleveland office and via webinar to those attending remotely. This was the third presentation in a planned series for March-May. Attendees received a copy of the handout as a PDF file or paper copies for those attending in person. A feedback form was also provided.
PPLPMDL0020000001	Parma	OH	44129	5/3/2013	Dr Khooiball said he wishes he had more patients to give me for Butrans. I told him he could have some & just not realize it. Showed Nancy profile & asked if this looks like a familiar patient type. He said he has some people like that, but he has gotten rid of anyone who he suspects of not taking pain medications for legitimate reasons. I told him this is the right thing to do & told him I am speaking only of patients like Nancy, who have legitimate pain conditions who are taking medications responsibly. I asked that he simply try Butrans for one patient who is like this as an option for a once weekly transdermal system to treat his/her pain. He said he would. Reviewed Intermezzo indication, dosing, & limitations of use. He said he has heard that Ambien is not a good drug. I told him this is Intermezzo & reviewed the indication & patient type again. Reviewed dosing again. He asked about cost. I reviewed managed care coverage & prior authorization general requirements. He said there should be a dinner program for it. I told him I would let him know if we have them.
PPLPMDL0020000001	Mayfield Hts	OH	44124	5/3/2013	One of my Top 20 insomnia targets, so lead with Intermezzo patient vignette today. Dr Laham was engaged & followed along. He remembered all core product messages & correct dosing for this patient who is 42 & considered otherwise healthy. The patient is on CNS depressant & dr agreed he should consider adjusting CNS depressant when also on Intermezzo. He is concerned with intermezzo commercial coverage, he has difficulty getting it covered for his patients. I told him importance of trial & savings cards. He says leave savings cards with Denise, their office coordinator who takes in samples/ cards for all Drs in practice. I reviewed Ca resource. Coverage e & prior auth with him. Butrans, reviewed new tear sheets, which he really likes, and have be en helping patients with appropriate application. & disposal. OxyContin, CII option whe n Butrans not appropriate, q12 recommended dosing. Told Denise to direct patients to Intermezzo.com to print out savings& Caresource coverage with prior auth after failing none other Zolpidem product
PPLPMDL0020000001	Akron	OH	44305	5/3/2013	I asked r if he currently have patient on vicoden around the clock? Dr said he does about 50 of them. I asked dr what threshold he has with vicoden before he moves to another product? Dr said about 4-5 pills a day,29mg a day. I asked what he typically moves to after that? Dr said it depends because he will either to go OxyContin or Percocet. Dr said he goes to Percocet only if patients can get OxyContin approved. Dr said that about 50% of his patients he goes to initiate on OxyContin are told they need to fail ER morphine or MS Contin. Dr said if Medicare patients have a secondary insurance it isn't a problem but many do not and med D plans are not paying for it much anymore. I asked dr if he would consider Butrans for patients failing vicoden? Dr said he would especially when a patient does not like to take pills. I asked dr if he will try it again in a vicoden failure? Dr said yes.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/3/2013	Left him with intermezzo dosing and explained the medicine.
PPLPMDL0020000001	Parma	OH	44129	5/3/2013	In Hudson office. Discussed opportunity with Dr and Pauline the nurse manager to come in to do an in-service with drs and nursing staff over lunch for OxyContin and Butrans. Told dr to continue using OxyContin for his Percocet patients and Butrans for patients failing vicoden.
PPLPMDL0020000001					Spoke with pharmacist, Kelly, & introduced Intermezzo. Delivered dosing, indication, & limitations of use. Discussed counseling the patient on taking PRN sublingually in the middle of the night if they experience an awakening with difficulty returning to sleep if they have 4 or more hours left of planned sleep time. I asked her to notify a physician if they mistakenly write it HS. She agreed. Reviewed managed care landscape. Let her know savings for Intermezzo, Butrans, & OxyContin can be printed from PurdueHCP.com or each medication's respective website.
PPLPMDL0020000001	Hudson	OH	44236	5/3/2013	Showed dr the Sam profile for OxyContin through the window. I asked him if he would consider initiating OxyContin for a patient like Sam at 20mg q6h of oxycodone?Dr said that he would and reminded me that once a patient hits about 4-5 pills a day of Percocet 5mg he initiates OxyContin. I asked for continued business. Nothing else learned.
PPLPMDL0020000001	Mayfield Village	OH	44143	5/6/2013	Met with ma Denna. Left Butrans may 8 invite, how to determine appropriate dose for Butrans piece, OxyContin slim Jim, Intermezzo Dosing & Administration guide.
PPLPMDL0020000001	Beachwood	OH	44122	5/6/2013	Quick call- Extended Butrans program invitation to Dr Myton-Craig & asked if I could register as an attendee. She said she has a scheduling conflict & would be unable to attend. She then just walked away. Tammy (MA) said she does not understand why Dr Myton-Craig won't try Butrans. Reviewed appropriate patient type with Tammy & other MA, who agreed she could be using it. Discussed Butrans as a CIII long-acting (once weekly) transdermal opioid medication. Also alerted them to abuse/addiction potential. Reviewed managed care coverage & savings for Butrans & OxyContin. Also discussed Intermezzo DTC marketing, letting them know patients may see ads for it & ask them about it.
PPLPMDL0020000001	Euclid	OH	44117	5/6/2013	Made a drop-in visit, spoke with Charlene Miller to confirm the in-service for 5/9 on Pain Documentation for 3pm & 5pm.
PPLPMDL0020000001	Cleveland	OH	44143	5/6/2013	Couldn't meet with dr direct, met with office coordinator Rosie. Also asked if he might attend May 8 program, no, he is going out of town Wed & office closed Thu & Fri. Reviewed my products with Rosie, ( butrans, oxycontin, intermezzo) she saw Intermezzo tv commercial. Left her brochure. also left dr silverblatt HCP kit, dosing flashcard, updated FPI. told Rosie I will stop back next week to follow up on all. Main goal today, since I was in building, to exted dr invite to may 8 program.
PPLPMDL0020000001	Parma	OH	44129	5/6/2013	Quick call- Dr Taylor said her Butrans patients are doing fine & apologized that she probably isn't "doing very well" for me for OxyContin. She said she had to run & walked into her office. Spoke with Mary & asked about her role with medications & if there was anything I could provide to help with Butrans or OxyContin specifically. She said she does try to do prior authorizations sometimes if Dr Taylor requests it. She said she makes copies of the prescriptions for patients' charts before they leave the office & also does the scheduling & phone calls since she is the only staff member. Discussed Intermezzo DTC marketing & asked Mary if she has seen an ad- print or TV. She said she hasn't but would watch for it.
PPLPMDL0020000001	akron	OH	44333	5/6/2013	Spoke with dr about initiating Butrans for a patient like Scott. I discussed the Scott profile and asked him if it made sense using Butrans for a patient like him? Dr said it does for sure and he knows he has had some opportunities where he should have used Butrans. I showed him where a patient like Scott would be initiated and dr said he wants one of the sliding conversion scales to remind him. I asked dr to use the experience kits for his new starts. I asked dr to review the charts of his Percocet patients to see if OxyContin would be appropriate. I gave him a conversion and titration booklet. Dr said he would look over his charts. Discussed his use of Intermezzo instead of Ambien when patients meet the intermezzo indication. Dr agreed to start to review charts.
PPLPMDL0020000001	Mayfield	OH	44143	5/6/2013	Left Rx patrol flashcard, Pharmacists guide to Intermezzo. Reviewed patient guides. Butrans, CIII transdermal 1 x 1 week patch option for chronic pain patients. 3 doses for titration. oxyContin, CII oral option for chronic pain. 7 doses for titration, 60&80 mg for opioid tolerant patients only. Q12 hr recommended dosing. Nothing new learned since last visit.
PPLPMDL0020000001	Mayfield Village	OH	44040	5/6/2013	Met with Tom. Left Rx patrol flashcard, Intermezzo guide for pharmacists, 2 patient guides. He has yet to dispense. Full detail. Wanted to know how long it took patients to get back to sleep, responded with visual aid, in clinical sleep lab study, women 16 mts and men, 13 mts, 3.5 mg dose was used. Butrans, CIII 1x week transdermal pain option, 3 dosing strengths. OxyContin, 7 doses available for titration. Area HCPS do follow q12 hr dosing.
PPLPMDL0020000001	Parma	OH	44129	5/6/2013	Dr Ortega said he is coming to the Butrans program on Wednesday. He said he has had success with Butrans but can always learn more. I asked him to tell me about his experience in titrating Butrans. He said most of his patients do just fine on the 5mcg strength, with the exception of a few, who are on the 10mcg. He said he has never had to put anyone on the 20mcg. Dr Ortega went on to explain that he spends much time talking to the patients & educating them about their medication, so the patient is more prepared to have success with the medication. I told him it sounds like he is really doing the right thing. I asked what he thinks are some of the most important things to relay to patients. He said he tells them how to apply & rotate it, what they may feel, possible adverse events, lets them know it won't start working instantly due to being transdermal. I told him these are great messages to share with patients & are having positive impact on his experience. Reviewed resources available from Purdue for Butrans & OxyContin for talking to patients & saving them money when possible. Also reviewed Intermezzo DTC marketing. Dr Ortega & Cindy said they have not had anyone ask about it. Reviewed indication.
PPLPMDL0020000001	Akron	OH	44333	5/6/2013	I asked Lisa how she identifies and then explains the option of Butrans to her patients? Lisa said she finds Butrans useful for patients that she believes will benefit for more steady pain control and usually they are patients she either wants off oral medicines or ask for something else. Lisa said she uses the patient information guides useful after telling the patient why she wants them to take Butrans. I asked Lisa if she will consider using Butrans for patients early on in therapy like patients on tramadol? Lisa said she has done that and agreed. Left her with the OxyContin conversion and titration guide.
PPLPMDL0020000001	Richmond Heights	OH	44143	5/6/2013	Met with dr Ashraf ma and left him how to determine appropriate dose for Butras piece, invite for WED may 8, Intermezzo brochure, 1 box Senokot S. was able to say hello to dr Mukunda @ window. Left dr Mukunda & three CNPs the same items. Left one box Senokot's samples.
PPLPMDL0020000001	Akron	OH	44333	5/6/2013	I asked Jennell about her prescribing privileges about prescribing CIII products like Butrans. Jennell said since her and Dana are relatively new Np's their prescriptions for scheduled medicines need to be hand written and signed by one of the physicians. Jennell said every prescriber in the office does ecribe and in order for her and Dana to prescribe and sign their own CIII products they have to gain 6 CEU's to do that. Dr Lababidi joined in on the conversation and confirmed the situation. I asked Jennell to continue using Butrans.
PPLPMDL0020000001					

	Euclid	OH	44117	5/6/2013	In-service completed on Constipation for Nurses & STNA's. 25 were in attendance. The laxative protocol was handed out and reviewed with the staff. A discussion w/ interaction on the risk factors, disease state and complications of constipation. Positive feedback was received from the nursing staff.I met with D.O.N., Kathy Nemeth after the in-services were complete and future in-services were scheduled for June 18th on key terms in pain management and for July 18th on Pain Documentation.
PPLPMDL0020000001	Parma	OH	44134	5/6/2013	Spoke with pharmacist Nate & reviewed Intermezzo indication, dosing, & limitations of use. Also asked if a physician makes an error by writing Intermezzo "HS" would he call to correct the situation rather than fill as written. He agreed to this. Discussed managed care landscape & available savings for all 3 medications online at each one's website or at PurdueHCP.com.
PPLPMDL0020000001	Akron	OH	44312	5/6/2013	Conversation with dr about his NP's prescribing privileges. Dr said in order for any prescriber to ecribe a scheduled product the pharmacy board needs to update their systems to allow for it. Dr said there may be a way with finger print e prescriptions or using a VPN secure ID. I told dr to evaluate his current Percocet patient for them being appropriate for q12h OxyContin and to use Butrans for his vicoden failures. Dr said he continue to like Butrans and is using it. Nothing else learned.
PPLPMDL0020000001	Macedonia	OH	44056	5/6/2013	Quick call- Caught Dr Pai between patients while speaking with Katie, his MA, about OxyContin & Butrans managed care coverage & savings. Extended Butrans program invitation to him & asked if I could register him to attend. He said he has been sick for a few days so was not sure he would be feeling up to it. He said he would like to hear Dr Moufawad speak about Butrans because he respects him & thinks it is a good medication. He asked me to call him Wed morning to see if he would be able to go. Spoke further with MA & shared Intermezzo DTC marketing information with her, letting her know patients may ask about it.
PPLPMDL0020000001	University Heights	OH	44121	5/6/2013	Dr Price, you've told me that you only reserve OxyContin for your cancer patients. Yes he replied because the deal will come down on you otherwise. I responded are you sure you are not referring to Ohio House Bill 937? He then recited the key points in that bill. He's very Leary about any new OxyContin starts. For your non cancer pain patients, what do you prescribe? Dr responded gabapentin, lyrica, cymbalta in the non narcotic class, and Tramadol because its a CIII. during my last visit, I presented you with a CIII 1x week, transdermal patch. How does it work? Responded with key visual aid, buprenorphine is partial agonist at mu opioid receptors, an antagonist at kappa opioid receptors, an agonist at delta opioid receptors, and partial agonist at ORL-1 nociceptin receptors. It's clinical action results from binding to the opioid receptors and principal actions of buprenorphine are analgesia & sedation. Showed graphic on pg 4 of visual aid. He was satisfied with that response. How is access for my patients? Reviewed preferred coverage, and WCB will pay for. You have savings cards in your closet! Recommended Intermezzo for his MOTN insomnia patients. Reviewed all key messages, dosing, left him highway driving study to review.
PPLPMDL0020000001	Fairlawn	OH	44333	5/6/2013	Spoke to Sue and Gilbert and asked them if they have filled any Intermezzo since my last visit. Sue told me that Dr Scott Higley prescribed one last week and was filled. I reviewed the indication and they currently stock both strengths. Explained copay cards. Talked about Butrans patient types and reviewed patient information guides. Sue said they would hand them out to new patients and existing who have questions. Pharmacy continues to fill OxyContin regularly but was told they have seen issues getting approval on Med D plans. Discussed appropriate plans.
PPLPMDL0020000001	Shaker Heights	OH	44122	5/6/2013	Spoke with pharmacist, James, & reviewed Intermezzo information including dosing, indication, limitations of use. I asked if a patient brings in a prescription for Intermezzo written "HS" would he call the prescriber to alert them to this error. He agreed to do so. Also discussed Relay Health e-voucher for Intermezzo, Butrans, & OxyContin monthly savings automatically if the patient is eligible.
PPLPMDL0020000001	Beachwood	OH	44122	5/6/2013	Spoke with pharmacist & reviewed Intermezzo indication, dosing, & limitations of use. Discussed patient type & how they would take Intermezzo PRN sublingually only if they have a middle-of-the-night awakening & have difficulty falling back to sleep on their own. Also asked if she sees a prescription for it written HS if she would alert & call the prescriber & not fill it like that. She agreed saying she can see how that would be a problem.
PPLPMDL0020000001	Independence	OH	44131	5/6/2013	Discussed how savings can be printed from PurdueHCP.com or each medication's website for Intermezzo, Butrans, & OxyContin.
PPLPMDL0020000001	Parma	OH	44129	5/6/2013	Quick call- Handed Dr Jack Butrans program invitation & asked if he would attend given his expressed interest in Butrans. He started to answer but was interrupted by a patient who started to ask him questions & discuss some of her medical issues. Reviewed trial/savings cards for Intermezzo with MA & reviewed indication.
PPLPMDL0020000001	Akron	OH	44308	5/7/2013	Quick call- Elaine said she hasn't written Butrans in awhile, adding that it seems like she can never get it covered. She asked that I go over the specifics of plan details with Dawn as she was busy seeing patients. Spoke with Dawn to go over managed care for Butrans & Intermezzo. She said she has told Elaine all this several times & is not sure why she doesn't remember.
PPLPMDL0020000001	Oakwood Village	OH	44146	5/8/2013	As a follow up to the conference call held on 5/3/13, emailed copies of the handouts (as PDF files) for the FACET modules "Is It Pain?" and "Cognitive Impairment".
PPLPMDL0020000001	Cleveland	OH	44128	5/8/2013	Met w/ D.O.N., Barb Straemple the in-service on Pain management was re-scheduled from 5/116 to 6/1/13 @ 7:30am, 10:30am & 2:30pm. on Pain Management and 7/31 @ 7:30am, 10:30am & 2:30pm on Key terms in Pain management. Both In-Services are for Nurses and STNA's.
PPLPMDL0020000001	Cleveland	OH	44128	5/8/2013	I Made a drop-in visit and spoke w/ RoseAnne Howell to set up in-service on Pain Management for Nurses. She informed me that D.O.N., Donna Silisen no longer works there. The Administrator is leaving his position as well. They have acting D.O.N., Sherri Grafnitz from corporate who is filling in until a new Director of Nursing is hired. RoseAnne said that she would have to get approval for future in-services from Sherri. I spoke w/ Sherri Grafnitz and introduced myself and Purdue's NE program. She felt the NE program was a great opportunity to increase the knowledge of the nursing staff and welcomed the program. RoseAnne Howell scheduled a Pain Management in-service for the nurses for June 19th and June 24th @ 6am, 6:30am, 1:30pm, 2pm, 3:30pm & 4pm
PPLPMDL0020000001	Cleveland	OH	44122	5/8/2013	Made a drop-in visit to speak with Francine Young to reschedule in-service on pain management, I spoke with the receptionist, Roberta Herbert, who paged Francine, N/A. I left my BC Placed a phone call to Francine Young, left a message on her voice-mail.
PPLPMDL0020000001	Cleveland	OH	44130	5/9/2013	Delivered statistics of communication insight to Dr Diab & asked what processes he has in place to establish good communication regarding pain. He didn't respond. I asked about the use of pain diaries. He said he doesn't have patients do them. I asked why not. He didn't respond. Showed contents of OxyContin Patient Essentials Pack. He asked me to put them on his desk. Delivered Butrans appropriate patient type & Intermezzo dosing
PPLPMDL0020000001	Parma	OH	44129	5/9/2013	Showed broad national coverage page of visual aid to Dr Moysaenko & reviewed 7 tablet strengths for flexibility in dosing & titration. Positioned Butrans for appropriate patients taking less than 40mg total hydrocodone or oxycodone per day. Reviewed Intermezzo indication & DTC marketing. Dr Moysaenko thanked me & walked away.
PPLPMDL0020000001	Stow	OH	44224	5/9/2013	Spoke with Holly the pharmacist about all products. Holly said she still has not dispensed Intermezzo and does not stock it. I explained the indication again and dosing specifics. I explained the Scott profile for Butrans and asked if it makes sense to use Butrans in the position? Holly said it did for sure and said she was glad I reviewed that because it brought it together for her on Butrans. She said she has not seen many prescriptions and doesn't have it in stock. I asked her to order at least the 5 mcg dose which she said she will consider. I asked which doses of OxyContin they dispense most? She said the 10 and 20mg doses are dispensed most often and she said they don't stock the 80 because they rarely get scripts for it.
PPLPMDL0020000001	Beachwood	OH	44122	5/9/2013	I made a drop-in visit to meet w/ ADON, Cathy Cigli. I was informed by the receptionist, Shandana that today was a bad day d/t chart reviews and Nurses Week Activities. I left PAP handouts and my BC and I will place a follow-up phone call to Cathy next week.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/9/2013	Hello to dr at window and gave introduction to the Scott profile for Butrans. I asked her if there would be a downside to initiating Butrans for a patient like Scott? Dr said she can't think of one and she just has a hard time remembering Butrans. I asked her if she placed any initiation guides in her exam rooms as we discussed previously? Dr said she doesn't think so. I asked her if she would do that? Dr said she would. Nothing else learned.
PPLPMDL0020000001	Berea	OH	44017	5/9/2013	Asked office about doing a lunch for a patient vignette and they said no lunches but dr will sign for samples. Dr came to window and I gave a quick managed care insight and dr did not respond.
PPLPMDL0020000001	Cleveland	OH	44103	5/9/2013	Talked with Dr. Boyd discussed her patient population and she described to me things have changed within her practice and and the NE system. Anita Watson is the new medical director taking over for Walter Clark and is no longer allowed to RX opioids or treat pain! She is referring Her patients either to the clinic UH or Dr. Mikael over in Mentor or in Willoughby Hills. Dr. Watson is over at 4000 Payne Ave. 44103 she is a pediatrician. She did state that she had success with Butrans Unfortunately she will not be prescribing any pain medicines. Discussed Intermezzo, When over dosing and trial cards
PPLPMDL0020000001	Cleveland	OH	44103	5/9/2013	Talked w/Abdul no new starts, Savings cards across all brands AOK, CCF opioid policy discussion
PPLPMDL0020000001	Cleveland	OH	44130	5/9/2013	Spoke with Lauren & reviewed Intermezzo indication & dosing. She said they have at least one person on it but she has not had feedback from anyone. She did not recall if the person had a trial card. Reviewed patient type, delivery system, & PRN use. I asked if she notices a prescription written "HS" if she would alert the physician to the mistake. She agreed. Discussed managed care landscape & let her know savings for Intermezzo, Butrans, & OxyContin are automatically built into their system with e-voucher.
PPLPMDL0020000001	Berea	OH	44017	5/9/2013	Spoke with Cora about butrans opioid naive study and Intermezzo driving study. Asked what she thought of the information. She said it was useful.
PPLPMDL0020000001	Akron	OH	44305	5/9/2013	Spoke with Steve the pharmacist about Intermezzo dosing and indication. Steve said they have had one or two prescriptions for it. Reviewed the Scott profile for Butrans. Steve said he has seen a couple recently and one was from Vora. Explained patient types with the approximate conversion scale. OxyContin dosing and copay cards.
PPLPMDL0020000001	Olmsted Falls	OH	44138	5/9/2013	Spoke with the tech, nancy and asked how they process vouchers and savings cards. Nancy the patients bring them. I asked about butrans patients trial cards and she said they do trot have butrans patients and I explained the butrans opioid naive study.
PPLPMDL0020000001	Akron	OH	44310	5/9/2013	I showed dr the Scott profile for Butrans and asked him if he could initiate the CIII Butrans for a patient like Scott? Dr said it makes sense. I who we'd him where Scott is initiated on the 10mcg and told him to focus on patients with private prescription insurance and Caresource. I asked dr to gain more clinical experience in the right patients. Dr agreed and said ok. Left him with Intermezzo dosing guide.
PPLPMDL0020000001	Stow	OH	44224	5/9/2013	I asked dr if she feels comfortable using OxyContin? Dr said she does and said she doesn't have a lot of patients on it. I asked about the types of patients she has on it? Dr said she has a couple of cancer patients, and others with severe pain. I asked dr what she does when a patient she has on vicoden needs more? She said it depends in the condition being treated but she will usually go to OxyContin. Dr said it is usually her go to ER opioid. I showed dr the Tom profile and asked her to reevaluate her Percocet patients as candidates for OxyContin. I gave quick review of the Scott profile for Butrans and asked her if it makes sense for her to use in that position? Dr said it does and will consider it. Told her to remember Intermezzo and gave her a dosing card.
PPLPMDL0020000001	Lyndhurst	OH	44124	5/9/2013	I made a drop-in visit to meet w/ Diana in Staff Development to introduce myself and Purdue's Nurse Educator Program. I spoke w/ the receptionist who called her office. I was informed that Diana was out of the building and asked to call her tomorrow to set up an appt. to meet w/ her. 440-684-6622
PPLPMDL0020000001	Euclid	OH	44117	5/9/2013	In-Service @ 3pm was completed on Pain Documentation for the Nursing Staff. Four were in attendance. Discussion and interaction on Key Components of Documentation and Reassessment parameters took place. The Comfort Assessment Journal, a documentation tool, was shared with the Nursing Staff with a reminder that relieving pain requires a partnership between the Healthcare professional and the resident/patient. Charlene scheduled an in-service on 6/27 ( medication routes and delivery systems). The in-service for 5pm today was cancelled d/t no attendance.I also met with the Administrator, Sister Rahaael and introduced Purdue's Nurse Educator Program. She stated, "I am pleased to hear that the Nurses are able to be part of such a wonderful program."
PPLPMDL0020000001	Cleveland	OH	44130	5/9/2013	Caught Dr Popa at the window & passed back Butrans trial/savings cards, reminding her of the interest she expressed during our last lunch since Butrans is a CIII opioid dosed once weekly. She said she will try it, thanked me, & walked away. Spoke with MA Renee' & reviewed Intermezzo DTC marketing. Gave dosing card for her reference.
PPLPMDL0020000001	Cleveland	OH	44103	5/9/2013	Talked with Tec-quick reminder on all three products left card for pharmacist
PPLPMDL0020000001	Independence	OH	44131	5/9/2013	Reviewed details of communication insight with Dr Trickett & referenced her Butrans Patient Experience kits as a means to help increase & enhance communication with patients who she tries on Butrans for the first time. Also gave OxyContin Patient Essentials Packs & showed pain tracker. She said a lot of patients won't take the time to fill those out. I asked if patients who were truly committed to helping their pain would take that time. She said some will. I asked her to give one to appropriate OxyContin patients new to the medication. She said she would. Spoke with Steve & alerted him to DTC marketing for Intermezzo, reviewing indication/patient type.
PPLPMDL0020000001	Berea	OH	44017	5/9/2013	Followed up with Tina and explained that I have not received a call about a lunch and Tina explained that I will only get a call if the dr is interested. I shared information on start, butrans patient Maria and Intermezzo dosing

PPLPMDL0020000001	Cleveland	OH	44130	5/9/2013	Dr Fedorko said he still does not have any patients for me for Butrans. I told him he probably does but just doesn't realize it. Showed Scott patient profile. He said he doesn't believe anyone with back pain because it is too hard to trust or believe people. He said he has one patient with cancer who he has on OxyContin. Reviewed Intermezzo patient type & trial/savings offer. He asked me who has time to go to the pharmacy to get 5 tablets. I told him if they are someone who meets the indication who has difficulties with middle-of-the-night awakenings they might it to be worth the time spent to simply take the trial card & prescription for 5 tablets to a pharmacy location. He said it is just that Edular has samples that patients don't have to go anywhere to get. I reminded him that Intermezzo is the first & only medication with this specific indication. He said he would try to find some
PPLPMDL0020000001	Berea	OH	44017	5/9/2013	Discussed butrans opioid naive trials and I highlighted the supplemental analgesic used in the study. Dr said he does not write opioids anymore and is only treating with tramadol and is trying not to use that. Dr said he refers patients out to Cleveland clinic and Fairview. Asked dr if he had a patient on OxyContin and their pain was not relieved would he increase the dose? Dr said it depends. I reviewed the OxyContin start titration guide.
PPLPMDL0020000001	Akron	OH	44312	5/9/2013	I asked dr where she is finding success with Butrans? Dr said she has not seen any of the patients back for follow up appointment so she said she doesn't know but said she hasn't heard anything so she supposes its a good thing. Dr said the last patient was taking vicoden she thinks and initiated the 5 mcg but didn't give the copy card because of Medicare. I asked dr what she will do if a patients on Butrans calls or comes in for a follow up and says it isn't working as well as they had hoped? Dr said she will probably titrate depending on the situation. I told dr that is good and reminded of steady state. I showed dr the information guides and to use them. Dr said she has passed them out. Dr said she didn't know how many more she will prescribe. I asked why? She said she didn't know but finding the patients. I told her if she has clinical success with her current patients if it makes it easier to continue prescribing? Dr said it would. Explained OxyContin dosing and where to use and intermezzo which dr said she will not use because Ambien is so cheap. Explained the indication again and how it is different
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/9/2013	I asked dr Pitt if he would look over his Percocet patients to see if they would be appropriate for OxyContin? Dr said that many patients that he has done this to tell him it doesn't work as well and others have said the reformulated OxyContin doesn't work as well as the original. I asked if he believes that to be true? Dr said no he doesn't believe that. Dr said he takes his patients to 20mg /day of Percocet before he switches to an ER. I asked dr to switch those patients to OxyContin. Dr agreed. Butrans dosing and patient types. Dr said its not strong enough for his patients. I asked him if he ever titrated any patient to the 20mcg dose? Dr said he can't remember. I asked him if he did that he might find the efficacy he is looking for. Nothing else learned.
PPLPMDL0020000001	Stow	OH	44224	5/9/2013	I asked dr when he goes to use a product for the first time what is the most important thing? Dr said he wants to know its going to work and that the patient will tolerate it. I told dr that I felt I needed to prove the efficacy and safety of Butrans. I reviewed Bup 3015 and hit all key points. I asked dr if he would be satisfied with a patient getting at least a 30% reduction in pain score? Dr said for sure. I showed dr the adverse reactions from the study and asked him if anything stood out as alarming? Dr said no and was glad to see that it was tolerable. I asked if he now feels more comfortable using Butrans for a patient in pain on tramadol around the clock? Dr said he feels good about the product it's just a matter of identifying the first patient. I asked dr to do just that thing. Asked dr to reevaluate his Percocet patients as possible candidates for q12h OxyContin and dosing guide for intermezzo.<font color=blue><b><CHUDAKOB's query on 05/18/2013</b></font>Very nice call Cliff. Looks like a next call objective might be helping him identify the right patient since that is what he said. Keep up the good work.<font color=green><b><REICHCL's response on 05/20/2013</b></font>Thanks. I will remain persistent with him.<font color=blue><b><CHUDAKOB added notes on 05/27/2013</b></font>Thanks. I know you will
PPLPMDL0020000001	Cleveland	OH	44103	5/9/2013	Talked with Justin the pharmacist hasn't seen any Butrans scripts come through had one patient at the beginning of the year hasn't seen the patient back had one intermezzo script about a month ago Believes it was Wellpoint that not denied the RX. Reminded of Caresource. No voucher savings cards trial cards at this location, store policy. RX rate 2200
PPLPMDL0020000001	Cleveland	OH	44195	5/9/2013	Left info. And call product info-<font color=blue><b><CHUDAKOB's query on 05/17/2013</b></font>Who did you speak with in the Non- HCP Call. If you did not speak with an MA, RN, or office manager, then it cannot be recorded as a call on a physician. If this is in the hospital, then it is recorded under a hospital call. You will want to work on making our call notes more complete and specific. If you have questions on this, lets talk about it.<font color=green><b><GUTKOMA's response on 05/20/2013</b></font>The call was at the CCF Taussing Cancer Center. It was a MA not Dr. Davis' (Keisha)? That I spoke with & took my card, info etc. and told me she would get it to his nurse/ along with a requested appt.<font color=blue><b><CHUDAKOB added notes on 05/24/2013</b></font>It sounds like no product discussion occurred therefore probably should not be recorded as a call.
PPLPMDL0020000001	Cleveland	OH	44130	5/9/2013	Spoke with Allison & gave Intermezzo FPI, reviewing key messages, indication, & dosing. Also reviewed limitations of use & discussed patient type. I asked that if she see a prescription written HS if she would alert the prescriber to the error & she agreed. Also discussed sublingual delivery. Let her know savings for Intermezzo, Butrans, & OxyContin will automatically come off with their e-voucher system, but asked that they actually run the patient's insurance before quoting pricing. She agreed.
PPLPMDL0020000001	Parma	OH	44129	5/9/2013	Quick call- Myra said she couldn't stay to talk because they have just started a new EMR system & she was 6 patients behind still. She went on to say that "she knows...Butrans & Intermezzo," adding that she is trying. Spoke with Dawn & followed up on previous BWC conversations when she said there were multiple Butrans rejections from them in early April. Dawn said she has not had this problem since, so it must have been some sort of error with BWC. She said she would let me know if there were any further issues. I asked her to continue to enforce the Intermezzo message with Myra & for now to just choose appropriate Caresource patients as their prior authorization requirements were not as difficult to satisfy. She agreed to do this.
PPLPMDL0020000001	Akron	OH	44333	5/9/2013	I asked dr how he sees himself explaining Butrans to a new patient? Dr said he would tell the patient how important it is for them to be on a more controlled release product for their pain and that Butrans is a patch to be worn for 7 days. I asked dr if that is it? Dr said yea but knows he needs to tell them more. I showed him the patient information guide and showed him some other points to hit. I gave him the Scott profile again and asked for his business. OxyContin for his failing Percocet patients and intermezzo for his Caresource patients. Dr said they don't accept managed Medicaid. Office staff confirmed that western Reserve pain does not accept Caresource at any location. Intermezzo dosing and indication.
PPLPMDL0020000001	Bedford	OH	44146	5/9/2013	Dr Moufawad said he is still having good success with Butrans & patients who are committed to helping their pain condition are the best candidates. He said he fires other patients. He also said he just read about OxyContin & how it is now allowed to be called "abuse resistant". I told him that there will be an OxyContin label change & let him know I would review those details with him as soon as I am able to. I also stated that OxyContin is not abuse resistant & still must be prescribed with caution as he would any CII opioid. I asked Dr Moufawad if he thought he could try Intermezzo for an appropriate Caresource patient & reviewed prior authorization requirements. He said it just seems like a "fancy" medication for people who just need 2 extra hours of sleep. I clarified indication & limitations of use, reminding him it is PRN & if the patient has at least 4 hours of sleep time remaining. Reviewed sublingual delivery. Dr Moufawad committed to trying Intermezzo today for a Caresource patient who meets the indication.
PPLPMDL0020000001	Cleveland	OH	44103	5/9/2013	Talk with Dr. Robson discussed seven tablet strengths of OxyContin doctor said he doesn't have many new starts, refilling mostly, reminded of the q12 dosing/discussed NE center director Anita Watson MD replacing Walter Clark has sent down a directive to avoid treating pain in general. Dr. Robson less effected/Quickly went over Butrans and Scott profile, agreed he has patients similar.Intermezzo leave behind
PPLPMDL0020000001	Akron	OH	44305	5/9/2013	I asked dr when he is initiating a new patient on Butrans how he explains the product to the patient? Dr said that he tells them that they need a long term product for pain because the short acting isn't working. Dr said that he tells them its a patch that is worn for 7 days. I asked if there is anything else? Dr said it depends but that is mostly it. I asked if the patient information guide will help? Dr said he does give them out. I discussed proper skin preparation and disposal. I asked dr to be as thorough as possible. I asked dr to use OxyContin for his Percocet patients and intermezzo for his patients failing Ambien or have Caresource.
PPLPMDL0020000001	Beachwood	OH	44122	5/10/2013	Followed up with Helen on the Butrans program she attended two days ago. She said she thought the program was very good & had a lot of useful information. I asked what she found surprising or learned that she didn't know before. She said she understands where to use Butrans now/knows the right & wrong patient type. She said she also understands titration & supplemental analgesia usage. Helen said some of the physicians there are using Butrans, including their new physician, Dr LaSalle, who just had a patient this week started on it. I asked where she can see herself using Butrans. She said she sees both new & follow-up patients, so she would use it on those who are earlier on in opioid therapy, such as those taking Ultram or Vicodin. She said she probably would not use it on someone on Percocet. I showed her that if the patient falls within the range of 15-40mg oxycodone per day, they still may be a candidate for Butrans. She said she didn't realize that. Discussed the importance of teaching the patient how to use Butrans & letting them know about the possibility of titration up front so they don't abandon the medication. She said that was a good idea & agreed to do that. Gave her trial/savings cards & showed her each card & explained usage & eligibility requirements. I asked if she would use Butrans when she sees an appropriate patient next & she said she would. Gave Intermezzo indication & dosing information, alerting her to DTC marketing.
PPLPMDL0020000001	Parma	OH	44129	5/10/2013	I asked Dr Gigliotti if he thinks Butrans works. He said he's sure it does, he just has to write it. I told him that he has probably seen many patients over the last week who may be appropriate for once weekly transdermal dosing of their opioid analgesic medication. He said he doesn't like treating those patients, adding that he is writing less OxyContin even. Positioned Butrans for appropriate patients taking up to 40mg oxycodone or hydrocodone total per day. I asked if he would agree that this includes a lot of his patients. He did not respond. He said he is going to write Intermezzo for me before heading into a room.
PPLPMDL0020000001	Parma	OH	44129	5/10/2013	Quick call- Dr Roheny said he was running too far behind this afternoon to stop. He added that he hasn't found anyone since last week. I told him this is surprising considering he probably sees appropriate patients for Butrans, OxyContin, and Intermezzo every week in his office, maybe even every day. He said he will keep trying & walked into a patient room. Spoke with Terry & Kathy & asked if they know why Dr Roheny hasn't written Butrans or Intermezzo. They said they never understand what he does, so they were not sure. Reviewed appropriate patient types for both medications & they confirmed that they see both of these patient types frequently. They said they would try to help.
PPLPMDL0020000001	Garfield Hts	OH	44125	5/10/2013	Talked with Dr. about Butrans experience program got him to commit to finding the appropriate patients like Scott, Tramadol failures & Opiod naive patients. Reminded Dr. of titration also discussed with Deana titrating the appropriate patients. OxyContin dosing variations and a Intermezzo & Senokot 5 verbal
PPLPMDL0020000001	Akron	OH	44333	5/10/2013	E-Mailed Ramona Watson, requesting a meeting to discuss Purdue's NE program and educational in-service opportunities.
PPLPMDL0020000001	Garfield Hts	OH	44125	5/10/2013	Quick discussion in regards To Butrans, schedule 3 7day transdermal patch
PPLPMDL0020000001	Garfield Hts	OH	44125	5/10/2013	Visited hospital, talked with pharmacy Stacy- discussed centralized/uniform formulary
PPLPMDL0020000001	Cleveland	OH	44125	5/10/2013	Spoke with Linda- no new RX's or prescribers
PPLPMDL0020000001	Akron	OH	44333	5/10/2013	Gave Lisa a few reminders any Butrans. I told her to focus on patients either on tramadol or vicoden around the clock and complaining of pain to initiate Butrans. I also reminded her about the Caresource PA and BWC. Lisa said she just started a patient on it this week from vicoden and started on the 10mcg dose. Nothing else learned.
PPLPMDL0020000001	Akron	OH	44319	5/10/2013	Spoke with Sara the pharmacist and asked her if she knew who was prescribing the intermezzo? She said she remembers one of them being Scott Higley. She said she has not seen any others recently but has the doses in stock. Gave her the Butrans message about Scott and she said it makes sense and wished it was being used more because Sara said older patients like patches and are already on too many pills. OxyContin dosing guide and copy card explanation
PPLPMDL0020000001	Akron	OH	44319	5/10/2013	Spoke with Vicki the pharmacist about all products. She said she knew about intermezzo and may have filled it once or twice but said its been a while. Gave her the indication and dosing. Gave her doing guide for Butrans and asked about her experience with it? She said they have a small handful of patient on it that come back in to refill. I reminded her that Butrans is a CII and it can be written as refills on the prescriptions. I asked about OxyContin dispensing and if they are seeing any new starts on the product? She said maybe a one a month but most are refills and refill it a lot and have all doses in stock
PPLPMDL0020000001	Akron	OH	44319	5/10/2013	Quick call about him identifying candidates for Butrans. I asked him what the downside is to initiating Butrans for a patient on Ultram around the clock who is still in pain? Dr said he knows he needs to use it. I showed him the Scott profile again and asked him to review it in detail so he can gain clinical experience.
PPLPMDL0020000001	Beachwood	OH	44122	5/10/2013	Quick call- Delivered OxyContin broad formulary access message & reviewed prior authorization requirements for Butrans & Intermezzo on Caresource. Dr Yokiel thanked me & walked back to a room. Spoke with Laura & discussed Intermezzo DTC marketing. Let her know it is possible that patients would call & mention an ad or ask her about the medication. Gave her a dosing guide for reference.
PPLPMDL0020000001	Stow	OH	44224	5/10/2013	Quick message about Butrans. I told her that she sold be looking close at her tramadol patients who are on it around the clock and complaining of still being in pain. I asked her if a patient has a chronic condition if it makes sense to go from tramadol or vicoden. Another IR opioid? Angela said it doesn't and she said she can see why Butrans would be a good fit. Reminded of managed care coverage specific to their office and copy card

	Akron	OH	44333	5/10/2013	Discussed where he is finding success for Butrans. Dr said he continues to find success for the older patient who doesn't like all the pills and has a chronic condition. Dr said he is finding that a majority of his patients are controlled on the 10mcg dose. I asked dr what prompts him to titrate to the 20mcg? Dr said it depends on the diagnosis and pain level. Dr said if a patient asks for more break through medicine he will titrate to the 20 but its not often. I explained the Bup 3015 trial and focused on the forced titration. Dr said he realizes it will be more efficacious but if the patients doesn't need it he will not titrate just to do it. Discussed OxyContin doses and his use of it in specific patient types. Dr said the patient type range is broader with OxyContin than Butrans and tries to make the dose specific to the pain levels and not the age or sex of the patient. Discussed intermezzo dosing, indication and limitations of use. Discussed Caresource coverage.
PPLPMDL0020000001	Akron	OH	44312	5/10/2013	Dr told me that he just initiated a patient on Butrans 5mcg who is a 78 year old female. I asked why he used Butrans? Dr said that the patient has dimensia and has trouble remembering to take her medicine. I asked r rheat the patient was taking prior to Butrans and he said OxyContin 10mg q12h. I asked dr if he will titrate if the patient says she is still in pain? Dr said he would for sure. Dr said His OxyContin patients are doing well. I asked him if he is having new starts? Dr said he is each week anywhere from 1-4 patients coming from various IR opioids. I showed dr the dosing guide and reminded him he can titrate every 1-2 days. I asked him to continue to reevaluate his Percocet patients as good candidates for OxyContin. Introduced intermezzo and told him to look for Caresource patients. Dr said he liked the idea and will give it a shot.
PPLPMDL0020000001	Independence	OH	44131	5/10/2013	Quick call- Dr Pai said he just prescribed OxyContin. He added that he had to do a prior authorization, but it was approved. Reviewed 7 tablet strengths for flexibility in dosing & titration. He thanked me for the review & walked away. Spoke with MA Jill & reviewed contents of OxyContin Essentials Packs. Shared statistics from communication insight with her & showed her the pain tracker. She said she thought Dr Pai would really like them because they are so detailed. She agreed to make sure to give them to him rather than placing them in the normal location. Reviewed Caresource prior authorization requirements for Butrans. Also introduced Intermezzo & gave her a dosing guide. Discussed indication & limitations of use. Also reviewed delivery system & use PRN. I alerted her to DTC marketing & let her know she may have some patients who ask her about it when they call. Reviewed Caresource prior authorization requirements.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	5/10/2013	In-service completed at 2PM on constipation for nurses. 11 were in attendance. Discussion and interaction took place on the risk factors of constipation, signs and symptoms of constipation and diseases associated with constipation. The laxative protocol was handed out and reviewed with the nursing staff.
PPLPMDL0020000001	Beachwood	OH	44122	5/10/2013	Spoke with pharmacist, Ashley, & reviewed Intermezzo indication & limitations of use. Also discussed that Intermezzo should be taken PRN sublingually only when the patient experiences a middle-of-the-night awakening followed by difficulty returning to sleep. I asked her to notify physicians if she sees any prescriptions written for "HS" administration. She agreed. Discussed trial offer & savings program. Also reviewed details of Butrans & OxyContin savings programs. Reviewed Butrans application instructions.
PPLPMDL0020000001	Independence	OH	44131	5/10/2013	Roman saw me & said my product is "the worst". I asked him what he is talking about. He said "no one" can get OxyContin anymore & "no one" is paying for it. I told him I understand this can be frustrating, but added that OxyContin does have broad formulary coverage on a variety of lives. He said he doesn't care what I say, he knows it is always getting denied. He brought me back & introduced me to Christina, who does the prior authorizations. She confirmed that they get "almost half" denials of OxyContin. I asked her what plans. She said Caresource comes to mind, but was certain there were others. Another MA came out & asked Roman what quantity he is writing. He said 90. I told him that some insurance companies do have quantity limits at 60 since it is dosed q12h & only one month can be written at a time. He said he doesn't think that's it. I asked Christina to keep a list of denials she had & let her know I would return to follow up to get her list to see if there was anything I could do to shed some light on the topic. She agreed. Roman also told me that he just didn't have success with Butrans & he just realized it is the same molecule as Buprenex. He said he uses that for weaning patients off opioids. I told him Butrans is only for pain & reviewed indication, dosing, & patient type. Delivered intermezzo indication. He said they don't write sleep medications there.
PPLPMDL0020000001	Fairlawn	OH	44333	5/10/2013	I made a drop-in visit to speak w/ Michelle Williams to re-schedule the in-service on constipation. I spoke w/ the receptionist, Helen who paged Michelle. She did not respond to her page. I left my BC
PPLPMDL0020000001	Macedonia	OH	44056	5/10/2013	Spoke with technician & introduced Intermezzo. Showed indication & limitations of use. I asked if she is the one who takes savings cards & runs patients' insurance. She said she does sometimes. I asked that if she is quoting pricing to a patient that she run their insurance through prior to quoting pricing. She said they almost always do that. Discussed automatic savings for Wal-Mart customers with e-voucher for Intermezzo, Butrans, & OxyContin. She said they do dispense some OxyContin but has not seen Butrans. Reviewed patient type.
PPLPMDL0020000001	Akron	OH	44313	5/10/2013	I dropped by and spoke w/ Richard Lynch to follow up from our meeting in April. He informed me that he has my BC, but in not ready to schedule an in-service just yet. He said possibly in the summer. I reviewed in-service topics with him and agreed to follow up in July, if I do not hear from him before then. I asked about meeting w/ the Medical Director. Richard said, "he comes in on the weekend, I did give him the Butrans information, but I have not seen him to talk with him about it." I asked for his office address to follow up.
PPLPMDL0020000001	Beachwood	OH	44122	5/13/2013	Delivered communication insight to Dr Warren & positioned OxyContin Patient Essentials Packs as a way for him to enhance communication with his patients who he is starting on OxyContin. Showed pain tracker & asked his thoughts on how this might help him. He said he liked how detailed it was & said some patients will like keeping the tracker, adding that other will not do it. I asked him to give one to each new start up to OxyContin & to encourage patients to fill out the tracker to help him in pain assessment & therapy evaluation. He agreed. Showed Butrans trial/savings cards & positioned Butrans for appropriate patients taking up to 40mg hydrocodone or oxycodone per day if they meet the indication. Also reviewed Intermezzo with indication, dosing, & limitations of use.
PPLPMDL0020000001	Parma	OH	44134	5/13/2013	Placed a call to Linda Belford in Staff Development to confirm lunch for tomorrow 5/14 @ 12:00. N/A, left msg.
PPLPMDL0020000001	Garfield Hts	OH	44125	5/13/2013	Jay Kuhn- Hospital Pharmacy Mgr. (formerly of Metro)
PPLPMDL0020000001	Garfield Heights	OH	44125	5/13/2013	Visited large Ortho. Group Miniaci MD, Andrish MD, Dir. Of Sports Health Dr. schickendantz MD etc. talked with Karen Florjancic RN CTR clinical coordinator, discussed portfolio of products, CCF Deptt refers to Pain Mgmtm . SAmuel, Abraham, Daloud, Shen & Grimm
PPLPMDL0020000001	Cleveland	OH	44119	5/13/2013	Met with accounts payable representative. Dropped off rebate check. They informed me this is administrative office only, no patients on site. Patients on site at 300 E 185th St Euclid, right across from Euclid Hospital.Chamere Jefferson, Sr Accts Payable, Annette Dolan, accts payable coordinator.
PPLPMDL0020000001	Euclid	OH	44117	5/13/2013	Asked him how patients are doing on Butrans? He replied, I haven't been using Butrans very often. Why not? He responded, if patients' current meds are working, "if it ain't broke, don't fix it." I don't want to start messing around with changing meds, nor am I trying to grow my business. In fact, my goal is to scale back a bit. He just doesn't think of Butrans often. I told him that I'd like him to consider Butrans more often because BWC pays for Butrans. I should have asked him about his perception of Butrans. Does he perceive it is not to work? Do patients perceive it is to work? Need to dig deeper. OxyContin, please review section 9.2 in FPI. He says that's old news. Why are we presenting revised FPI now? The company has completed studies & that's what we're sharing in the revised FPI. Intermezzo, left him re-assessment guide. Reminder that Intermezzo available for MOTN, prn, sublingual tablet. Left 1 box Colace, 1 box Senokot-S. When I called prior to my visit, Dr. requested laxative samples.
PPLPMDL0020000001	Akron	OH	44320	5/13/2013	Spoke with Beth the receptionist as dr was leaving for the hospital. I explained why its necessary to have the materials and patient savings in the Fairlawn office as he does at the hospital. Dr Narouze agreed and thanked me for bringing them out. I asked dr to continue prescribing Butrans and OxyContin. Nothing else learned.
PPLPMDL0020000001	Akron	OH	44333	5/13/2013	I asked dr at the window what the most important thing is when prescribing an opioid for the first time? Dr said there are many. I asked him which is the MOST important? Dr said to make sure it works. I told him thanks and I will see him Friday for lunch. Left him the Scott profile.
PPLPMDL0020000001	Cleveland	OH	44106	5/13/2013	Visited Pain/Anes. Terrah will be contacting me in regards to appt/lunch. Chris A. (residency coordinator) assistant will get me info. Grand rounds , journal club etc. academic year is winding down will keep me posted
PPLPMDL0020000001	Bath	OH	44210	5/13/2013	Discussed intermezzo with Bob the pharmacist. Explained the indication, dosing and limitations of use. Bob said he hasn't seen any yet. I discussed the Butrans patient profile a nancy to show him what I'm speaking to hcp's about. Bob said that he dispensed one recently and tried to find it but could not. Bob told me that he has many patients refilling OxyContin and couldn't remember when he filled a new one. I explained that Oxycontin is an ER version of oxycodone. bob said he realizes that and is seeing an uptick of oxycodone plain because of the acetaminophen asked what he is dispensing most? Bob said vicoden, Percocet and Opana ER. I asked him why he thinks he fills more Opana? Bob said he can only believe that it is the new kid on the block. I asked if he has dispensed any Exalgo and he didn't even know what it was.
PPLPMDL0020000001	Garfield Hts	OH	44125	5/13/2013	Spoke with tech., info. Pharmacist to busy to talk this morning.
PPLPMDL0020000001	Beachwood	OH	44122	5/13/2013	Spoke with MA & reviewed Butrans patient type & once week transdermal delivery. Gave trial/savings cards & reviewed eligibility requirements. Discussed savings program for OxyContin savings information. Also introduced Intermezzo with indication, dosing, limitations of use, & patient type. Gave trial/savings cards. She agreed to give all information to Dr Eckstein.
PPLPMDL0020000001	Fairlawn	OH	44333	5/13/2013	Spoke with Jessica the pharmacist about intermezzo and she said she has not seen anymore prescriptions. Jessica said prescriptions came to the, but didn't go through because the patients have needed to fail 2 other products first. I told her I understood for some of the private prescription plans and told her about Caresource which she said was good to learn. I asked if she has seen an increase of any of the short or long acting opioids recently? Jessica said she has seen more Opana ER and plain oxycodone. She doesn't know why and most are coming from pain management. Explained OxyContin doses and copy cards. Explained the To, profile and she Discussed the option of OxyContin q12h when his patient have been on Percocet for 3+ months? Dr said he is really getting nervous with all the opioids he is prescribing for his patients and knows that many of them are addicted to them. I asked dr what his plan is then for treating his patients pain? Dr said he is not sure but reducing the amount of opioids is what he wants. I asked dr if he is prescribing ER and IR opioids? Dr said he is. I asked if he thinks he is prescribing more IR opioids than ER? Dr said more IR and he knows they have been on them too long. I explained the Tom profile and he said he gets it. I told dr that the is no direct to consumer advertising for Butrans like there is for Intermezzo. I told him that when patients hear about the option of Butrans is will most likely come from him. I asked how he would describe Butrans to a patient? Dr said that he would tell the patient it is a patch that is kept on for 7 days and is a more controlled release than the medicine they are on. I told dr that that is a good explanation and discussed the patient information guide and to give one with each copy card. I asked dr to try it. Link all and allow it to prove itself in the patient who is on ultram around the clock and is still in pain.
PPLPMDL0020000001	Akron	OH	44333	5/13/2013	Dr told me once he saw me that he thinks he finally found a candidate for intermezzo who will actually be able to get it. I told him about the Caresource coverage however they do not see Caresource patients. I asked dr if his patients are seeing adequate reduction in pain scores for Butrans? Dr said they are getting good relief. I reviewed the Bup 3015 trial results with pain score reductions. Dr said he is getting those type of results. Dr told me about a patient he is treating with Butrans 20mcg/day and 20mg of Percocet a day and is still in pain and wanted to know what he should do. I told him he is on the highest dose of Butrans and dr said he will not give any more and 4 Percocet 5mg a day. I told dr that he may want to consider OxyContin. I explained conversions from Percocet. Dr said he would go to Exalgo. Dr said the patient is on an AARP plan and has had trouble with OxyContin on Med D plans. I expressed that since the patient is already on oxycodone why he would switch molecules? Dr said its no big deal to that.
PPLPMDL0020000001	Akron	OH	44312	5/13/2013	Good discussion about Butrans as dr told me the last patient he initiated on a butrans from vicoden called him after day 1 telling him it wasn't working and she wanted her vicoden back. I asked dr if he told the patient to give it three days minimum before following up on how it is working. Dr said he did and told the patient give it a couple of weeks. I asked dr what he did and said that he discontinued the a butrans and told the patient she needs to get off the vicoden. Dr said he prescribed his last vicoden for the patient. I explained to doctor that he needs to evaluate his Ultram patients and the patient on Ultram around the clock who complain of pain, are ideal candidates. Dr agreed and said he will continue to prescribe. I discussed again how he needs to explain the information guide along with the copy card. Dr agreed. I asked dr to also evaluate his Percocet patients and look for candidates for the q12h option in OxyContin. Reminded dr of intermezzo indication and dosing.
PPLPMDL0020000001	Brooklyn	OH	44144	5/14/2013	Talked with Jessica. Discussed callbacks in regards to product failure suggested that Butrans for the appropriate patients can and will be a viable option for those patients
PPLPMDL0020000001	Lakewood	OH	44107	5/14/2013	Gave insight #1 and dr said he does not see this type of discontinuation rate. I asked dr what is keeping him from prescribing butrans now since he use to prescribe butrans in the past. Dr said he is having managed care issues. I explained that Butrans is for patients with good commercial insurance or on workers comp. I asked the dr if he could share with me how his patients felt on Butrans and he said he did not have any problems. I committed to working with the staff to determine appropriate patients. Dr said he does not do much OxyContin as much and asked what changed his mind. Dr said he is reducing opioid usage. Shared intermezzo dosing and screening card
PPLPMDL0020000001	Parma	OH	44134	5/14/2013	In-service cancelled upon arrival by Administrator, Isaac Lifschultz d/t State Inspectors arriving in the morning.
PPLPMDL0020000001	Cleveland	OH	44109	5/14/2013	Talked with Chrissy- discussed call backs , will follow up with Dr. C

PPLPMDL0020000001	Lakewood	OH	44107	5/14/2013	Asked dr if there was less confusion with OxyContin now at the Cleveland clinic and dr said there is still confusion but he is clear now. I asked dr if he had an opportunity to prescribe Butrans and reviewed the clinical trial data. Dr said he had a few patients in mind.
PPLPMDL0020000001	Lakewood	OH	44107	5/14/2013	Spoke with Mary and asked has dr written any Butrans and she said she was not aware of any being written but she could not say for sure. I asked about booking a lunch or breakfast and she said the book is at the other office. I share information on Butrans indication and dosing
PPLPMDL0020000001	Lakewood	OH	44107	5/14/2013	Crowded office but I asked dr about I asked dr how he doses OxyContin and he mentioned that he uses after Percocet or Vicodin. I asked how long are patients on the short acting before he prescribes long acting and dr said it varies. I asked about his definition of chronic pain. Dr had to attend to a patient
PPLPMDL0020000001	Parma Heights	OH	44130	5/14/2013	I was in the area and made a drop-in visit to meet w/D.O.N., Katherine Myers to introduce Purdue's Nurse Educator Program. I spoke w/ Helen who informed me that Katherine was in a meeting and not available.
PPLPMDL0020000001	Uniontown	OH	44685	5/14/2013	I spelled out the Butrans patch for a patient on tramadol around the clock who is still in pain or complains about the pills. Dr said that she does not treat any pain other than acute and will not prescribe an ER opioid. Nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44109	5/14/2013	Met with Sue T. Anes. Residency Program Coordinator, 21 residents, end of academia yr approaching 7 going 7 coming, Astley, Tabbah etc.- Pain mgmnt located mainly @ 150th locale. Sue will email schedule Grand Rounds schedule
PPLPMDL0020000001	Lakewood	OH	44107	5/14/2013	Asked dr to tell me how he positions Butrans and dr did not understand what I was saying. I asked if pain is not under control with nsaid's then what is the next drug he chooses. He said it depends on the patient but he sometimes uses tramadol. (I did not understand a lot of what the dr said) I reviewed patient profile for NSAID. Asked dr to consider butrans earlier in his present treatment regimen. Shared OxyContin formulary change
PPLPMDL0020000001	Parma	OH	44134	5/14/2013	I spoke w/ Cheryl Sigley, I introduced myself and Purdue's Nurse Educator Program. Educational in-service opportunities were discussed. She informed me that she did have my card as well as the PAP handouts, but at this time she does not have a need for our educational program. She explained that their NP's do a lot of the in-serving as well as Crossroad Hospice. Cheryl said, "once in a while I use NP's from Ever Care also". She will keep my BC on file and call me if she finds a need in the future.
PPLPMDL0020000001	Parma	OH	44129	5/14/2013	I made a drop-in visit to meet w/ NP, Tammy Pasela to introduce Purdue's NE program and discuss branded materials. (Butrans, Intermezzo & Oxycontin). I spoke w/ Kathy who informed me that Tammy is there on Monday, Wednesday's & Friday's after 3PM. I left my BC.
PPLPMDL0020000001	Lakewood	OH	44107	5/14/2013	Asked if the dr would see reps and they said no. I asked if she wrote any opioid and they said some. I asked when I leave information does the dr review it and they said not really but on occasional she will. I asked about her attendance to programs and they said not really.
PPLPMDL0020000001	Lyndhurst	OH	44124	5/14/2013	Presented Ernie patient vignette, Intermezzo in-service. Dr. liked the iPad visual & was correct in identifying the patient as appropriate for Intermezzo, and appropriate for 1.75 mg dose. His main concern was cost, suggested he focus on Caresource, with PA. He was satisfied with that. Wanted to know if we sample, no, but we've got 5-day trial with rx, further savings, Intermezzo.com. Butrans, told him he missed good program. He had to attend dinner with Dr. Loop from CC Main Campus, otherwise he would have come. Set up program with Dr. Laham as speaker, Monday July 8, 6:30 pm for his practice. For now, he can make it. No vacation that he is aware of, no other meetings on his calendar. Met with his office coordinator & she says Monday is good day for all of them to attend evening speaker program. He feels more comfortable initiating Butrans than OxyContin. Directed him to OxyContin revised section 9.2. He promises to read over. He says that reformulation of OxyContin is very good idea. He feels as a society, we are providing too many pills to patients, such as percocet and vicodin. He's disappointed in the multiple pills that pain management is providing patients with.
PPLPMDL0020000001	Lyndhurst	OH	44124	5/14/2013	Quick hallway call. Butrans opioid naive patient Maria. Please review. Initiate at 5 mcg/hr. Need a touch point back with patient to see if they need titration after 72 hrs/3 days. Please keep patient like Maria in mind, she will. OxyContin, please review section 9.2 which was revised recently, Medicare Part D coverage for OxyContin, q 12 hr recommended dosing. Intermezzo, reviewed indication, left her new patient insomnia re-assessment piece. She said she just wrote an Ambien. Again, reviewed MOTN, PRN, indication. Peak plasma, time back to sleep, gender specific dosing.
PPLPMDL0020000001	Cleveland	OH	44124	5/14/2013	Asked to see dr, he's busy, not possible. Met with medical assistant. Left one box Colace, one box Senokot S. Explained one with stimulant (senna)/Senokot, one without stimulant (Colace). Left OxyContin FPI and savings card flashcard. Let MA know that I'd like dr to review section 9.2 of OxyContin FPI, which has been revised recently. Butrans, left new male patient profile. Intermezzo, left new insomnia re-assessment piece.
PPLPMDL0020000001	Akron	OH	44310	5/14/2013	Good discussion regarding his identification of Butrans candidates. Discussed the nancy profile for his existing hydrocodone combination patients and asked him his thoughts? Dr said his biggest problem with hydrocodone is patients taking acetaminophen as treatment for breakthrough. Bo doctor and Char said that it is a constant struggle to tell patients not to take acetaminophen along with their hydrocodone combination. I asked dr if a single entity opioid like Butrans sound like a good solution because the patient can still take the NSAID for breakthrough pain? Dr and char agreed it sounds like a good solution and never tight about that. I asked dr to identify patients that are on hydrocodone combinations who need a dose adjustment to initiate Butrans. Dr agreed to. Discussed the new FPI updates for OxyContin. No questions from dr. Explained intermezzo patient types. Dr told me as I was leave the call his first attention after lunch fit the patient description we discussed and is going to initiate Butrans.
PPLPMDL0020000001	Mayfield Hts	OH	44124	5/14/2013	Quick hallway call. OxyContin, please review section 9.2 of revised FPI. He will. Recommended q 12 hr dosing which he follows. Butrans CII option. Sorry you couldn't attend program. I will have another soon & extend invite. Would like you to get some clinical experience with Butrans. Intermezzo, left new insomnia re-assessment piece. MOTN, prn, sublingual, gender specific dosing.
PPLPMDL0020000001	Uniontown	OH	44685	5/14/2013	Discussed OxyContin patient profiles and focused on Tom. I asked dr if she would evaluate her patients on Percocet and switch them to OxyContin if they meet the indication? Dr said she doesn't use much but said she will do that. I explained the specifics with the new OxyContin FPI. Dr had no questions. I asked dr if it makes sense to initiate Butrans for a patient on tramadol around the clock who needs a dose adjustment? Dr said she has not used it yet and said she didn't have a good reason. I asked what the downside would be to initiating Butrans in that situation? Dr said it is just difficult to get patients away from what they are used to taking and that change is difficult. I asked dr if she would use the info guide w/ a patient as a roadmap to discussion? Dr said yes. Left her with dosing and info for intermezzo.
PPLPMDL0020000001	Lakewood	OH	44107	5/14/2013	Asked dr how long he would keep a patient on short acting opioids and he said as long as their pain was controlled. Dr asked about the sleep drug and I gave him the dosing card and discussed his caresource patients that cannot sleep through the night even though they have tried ambien. Dr asked how to dose and I reviewed gender specific dosing for motna
PPLPMDL0020000001	Highland Heights	OH	44143	5/14/2013	Lunch. Inservice with all Medical Assistants. Marianne Lucas, MA, is in charge of savings cards/samples in office. Dr chose her to hand out/coordinate Butrans Patient Experience program. Dr. was concerned he'd be too busy to manage. He says he has no time. I explained it's the patients who will be communicating with HIM as to their progress on Butrans. Made it clear to Marianne that patient has to be NEW to Butrans. She asked if existing patients could participate, I responded no. Reviewed new patient tear sheets with Butrans with the MA's. Dr says it's difficult to get Butrans covered. told him & staff, concentrate on: BWC, Caresource, Med Mutual, Aetna, Express Scripts/Medco. For now, if they remember BWC & Caresource, that's great & I should have new formulary grids for them soon. Next made sure they were aware of revision to OxyContin, FPI, Section 9.2. Made Dr aware as well. He says he likes Butrans because he'd much rather prescribe CII than a CII like OxyContin. Stated they rarely have patients mention patch loosening up. Working well for patients. Intermezzo in 3rd position for all. Dr was interested in learning more, asked a lot of questions. Next concern, cost. Told him Caresource with PA. He was satisfied with that response.
PPLPMDL0020000001	Akron	OH	44320	5/15/2013	Doctor told me that she got the second Butrans PA approved and said she was surprised but happy. I explained where she needs to focus when it comes to patient type and formulary plans. Explained OxyContin information about FPI and section 9.2. Doctor told me she didn't know about it and was glad to find it out. Told her to prescribe intermezzo for her patients on Caresource who meet the indication.
PPLPMDL0020000001	Cleveland	OH	44113	5/15/2013	Discussed Butrans and delivery system, talked about the Opioid naive patient and asked what is important when prescribing. Dr. Stated that the pain adequately managed, ease of use and compliant. Not seeing or prescribing a lot of opioids anymore, not a lot of new patients to practice. Intermezzo dosing/ indication and savings card
PPLPMDL0020000001	Euclid	OH	44119	5/15/2013	Brought snack to pain mgt department, met dr Saeed for first time. He reviewed the OxyContin FPI revision to section 9.2. Liked the changes, reformulation, which he feels is a positive thing. OxyContin works well, he will continue writing. Butrans reviewed appropriate patient selection, opioid naive & opioid tolerant. He agrees Butrans has a place. Went over the new Butrans patient tear sheets I left, he and PA agree they will help improve communication with patients. BWC, Caresource, Aetna, Med Mutual, express scripts, medco where preferred. remember trial & savings. Went through new insomnia re assessment piece with dr & his PA. instructed them to focus on Caresource patients. Refer patients to Intermezzo.com to print out savings. Also left packet of information for RN Cathryn Mailer who attended May 8 Moufawad program, as follow up. Left same into for Cathryn that I
PPLPMDL0020000001	Parma	OH	44134	5/15/2013	I sent Linda Belford an e-mail in re: to re-scheduling the in-service that was cancelled on 5/14
PPLPMDL0020000001	Westlake	OH	44145	5/15/2013	Asked vikki what her thoughts were on initiating therapy for opioid naive patients? She said she does not really get a chance to do that because by the time the patients reach pain management they have already tried an opioid. She had to go but I reminded her that I have lunch coming up and I gave her the managed care insight and told her I would ask her about that at our lunch
PPLPMDL0020000001	Westlake	OH	44145	5/15/2013	Spoke with Laura again and delivered OxyContin reformulation. She said dr had no interest and would not see me.
PPLPMDL0020000001	Cleveland	OH	44119	5/15/2013	Had snack in service with hospital pain mgt on 3 rd floor. Carla van Pelt organized for me. Met with nursing, pa, dr Saeed, left info for RN Cathryn Mailer as follow up to her attendance at Moufawad May 8 program. They have ample savings cards for OxyContin, Butrans, OTC. Just need intermezzo cards when I get them. Requested their dept " save the date" for July 8 Laham program.
PPLPMDL0020000001	Euclid	OH	44119	5/15/2013	Snack with department. Paul has been with Nageeb/Saeed for 18 ms. He's there M-F, no days off. Introduced all my branded & OTC products. Provided same messages to Paul, as Dr Saeed. Then reviewed new Butrans patient tear sheets. Directed him to review OxyContin revisions to section 9.2 used new re assessment of insomnia piece to detail intermezzo.
PPLPMDL0020000001	Westlake	OH	44145	5/15/2013	No rep day but I was able to talk to ma about Butrans starts and OxyContin reformulation. Discussed patient experience kits.
PPLPMDL0020000001	Westlake	OH	44145	5/15/2013	Told dr that the pharmacy asked me why he wants Butrans on the formulary and seemed confused when it came to outpatient request or office practice request. Dr said he would like to initiate Butrans in the hospital. I told him I was not able to clearly explain why to the pharmacist and could he explain. He said that patients can follow up in his office but he would like to ability to start them on Butrans in the hospital instead of giving them a short acting they may not want to give up if he does not see them for 30 days
PPLPMDL0020000001	Cleveland	OH	44111	5/15/2013	Prospected for new writers and because dr specializes in geriatric medicine I discussed butrans and asked if she had commercial insurance patients and she said a large percent of her patients are commercial. Discussed 7 day delivery system and dr Sid she would like to hear more over lunch.
PPLPMDL0020000001	Cleveland	OH	44113	5/15/2013	Talked with Justin- discussed portfolio of products, hasn't filled any Butrans in over a year. Will keep a eye out. Intermezzo indication and dosing. Very informative to area mkt.
PPLPMDL0020000001	Cleveland	OH	44113	5/15/2013	Discussed with Dr. Patient population - Rounds at a few nursing homes (St. Augustine, Aristocrat West, Beres Alzheimer's etc. confident OxyContin prescriber. Likes Butrans , stated poor ins. coverage for patient populations, had a lot of denials. intermezzo indication and dosing
PPLPMDL0020000001	Westlake	OH	44145	5/15/2013	Quick call. Spoke with Christina about Butrans after tramadol and before Percocet or Vicodin and she replied that she refers all pain to pain management. Asked her to think about 7 day buprenorphine release for patients with chronic pain.
PPLPMDL0020000001	Westlake	OH	44145	5/15/2013	Spoke with Wendy about Intermezzo dosing and high prescribers. Asked about high prescribers of long acting and they mentioned dr Duncan. I asked what I should tell Butrans writers and they, the pharmacist and the tech said I should tell drs about insurance.
PPLPMDL0020000001	Westlake	OH	44145	5/15/2013	Spoke with ma about hours and best times and prescribing habits. She said not lunches or appointments at this time but I could stop back later
PPLPMDL0020000001	Westlake	OH	44145	5/15/2013	Spoke with ms Patel about her thoughts on Butrans and if he has had time to review the data I provided. She said she has reviewed the material but she is not sure why Butrans would have to be on the formulary and why patients could not see dr kabarra in his private practice. I told her I would review this with dr kabarra
PPLPMDL0020000001	Cleveland	OH	44113	5/15/2013	Went over Savings card , info. Obtained Barb's contact info , Nurse



	Richmond Heights	OH	44143	5/15/2013	Completed an in-service for the Nursing staff on Pain Management. 5 were in attendance. The pain comfort assessment guide and the pain scale tool was handed out and reviewed with the staff. Discussion and interaction took place on the barriers of Pain in the elderly and the consequences of unrelieved pain. Upon completion of the in-service, I spoke with Joan Southard who requested to continue in-services every other month. Wednesdays are preferred. An in-service on Pain Documentation was scheduled for July 10th @ 2:30
PPLPMDL0020000001	Akron	OH	44313	5/15/2013	Not able to see doctor to discuss OxyContin and new information about the FPI. Able to discuss with Tina who is his ma and explained the OxyContin information with her and advised her to read section 9.2. Tina told me she thought OxyContin was already generic and told me that its oxycodone. I had to explain the difference between IR and ER oxycodone. I asked if I can see dr next week to explain and she said she will try to make him available. Discussed Butrans dosing, titration and appropriate starting dose.
PPLPMDL0020000001	Cleveland	OH	44113	5/15/2013	Discussed Butrans and the Opioid Naive patient as well as the Tramadol failures. Discussed what's important to her when prescribing RX diff. Therapies for her patients. She stated efficacy and patient has access to product, she feels in regards to pain that majority of her patients or adequately managed on present meds. Will keep Butrans in mind for failures. She had to run, quick Intermezzo dosing/ indication
PPLPMDL0020000001	Richmond Heights	OH	44143	5/15/2013	Made a drop-in visit to speak with Aldona Bur to discuss and schedule future in-services. I spoke with the receptionist, Darlene informed me that a survey was in process and Aldona was not available. I left my BC
PPLPMDL0020000001	Akron	OH	44303	5/15/2013	Asked Rod the pharmacist if he has seen any intermezzo prescriptions and he said no. Explained indication and Caresource coverage. Explained the new information about OxyContin and explained about section 9.2 in the FPI. Rod had no questions. Explained the Butrans dosing and approximate dosing conversion scale.
PPLPMDL0020000001	Westlake	OH	44145	5/15/2013	Spoke with katlyn and explained FPI change for OxyContin and asked if I could see her to deliver the information. She said she would deliver but I could leave my card with the FPI and she would follow up of there were
PPLPMDL0020000001	Westlake	OH	44145	5/15/2013	Spoke with Megan About best hours, days and she said tues evenings in Lakewood but that is really busy or thurs/fri in west lake. Communicated OxyContin reformulation. Booked lunch and asked about drs prescribing habits which she said were positive in regards to Butrans. I asked what I needed to prepare for my lunch so that I could be a benefit to the office and she said insurance.
PPLPMDL0020000001	Akron	OH	44333	5/15/2013	Dr said he just wrote a new Butrans this morning for a patient on Tramadol. Dr said the patient was taking 300mg and considered moving him to the ER ultram. Dr said he remembered our discussion about initiating Butrans for the failing tramadol patient and did just that. Dr said he also gave out the patient experience kit as well. I asked for continued prescribing of Butrans. Explained the OxyContin information to doctor and advised dr to read section 9.2. Dr told me that Purdue needs to come out with a once a day OxyContin because he really likes Exalgo for that reason. Dr told me that he got an intermezzo to go through and will continue to look for patients.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	5/16/2013	I asked r if she would identify patients on around the clock tramadol who complain of being in pain? Dr said she is sure she does but most are on Medicare and she knows I that patients without a secondary insurance Butrans is too expensive. I told dr that she needs to be specific in her identification of the correct patient type. I gave her the Scott profile and asked for more business.
PPLPMDL0020000001	Cleveland	OH	44109	5/16/2013	Discussed with Carol, product portfolio, savings cards, obtained Dr's nurses contact info Sarah Trent
PPLPMDL0020000001	Cleveland	OH	44109	5/16/2013	Talked with Stephanie Discuss Butrans and OxyContin along with intermezzo's patient savings programs obtained phone number for Dr. Harris nurse Vanessa O'Malley left message in regards to setting up an appointment to introduce myself and discuss product portfolio.
PPLPMDL0020000001	Brooklyn	OH	44144	5/16/2013	Talked with Tech.(Beverly) obtained Butrans pricing for Dr. Hilton/Paul 5mcg-\$189.49, 10mcg \$284.09 & 20mcg \$502.69informed of Dr. Paul's interest in Intermezzo RX
PPLPMDL0020000001	Cleveland	OH	44109	5/16/2013	Visited PMR dept. talked with MA- Stephanie obtained Dr. Harris nurse contact info Vanessa
PPLPMDL0020000001	Cleveland	OH	44144	5/16/2013	Discussed with Dr. Paul all three products. I asked Dr. what is important to her for treating her pain patients she stated that the patient states that the medication works. I then asked Drs. thoughts on Butrans and if she thinks it works, she stated of course Butrans works & efficacious but the patients don't want it I asked why. she stated that there was ins. Coverage issues and habit of taking. RX PO. Briefly discussed on how she presents to patients, then went into Intermezzo indication and dosing, savings cards etc. Committed to finding some patients
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	5/16/2013	Quick message at window. I told dr that 33% of the patients in the clinical studies for OxyContin were 65 years and over and of that 33%, 9% were z75 and over. I asked dr if he would continue to prescribe OxyContin for his patients meeting the indication who have a Medicare D plans? Dr said that's good information and will try. Nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44102	5/16/2013	Obtained office info. While trying to locate Dr.Osario product savings card.<font color=blue>cb</font>CHUIDAKOB added notes on 05/27/2013</font>Who was the non-HCP you spoke with? Was it a nurse, MA or office manager? When you make a non-HCP call be sure to include the name of the person you spoke with and her title in the call notes. If it is a receptionist, then it not considered a call.
PPLPMDL0020000001	Brooklyn	OH	44144	5/16/2013	Discussed Butrans, OxyContin and Intermezzo,Spent a considerable amount of time with Dr. discussing health care and its costs,she feels that her biggest challenge when prescribing opioids or any medications is controlling the cost because they all work but its trying to tailor it to her patients needs. Went. Over OxyContin flexible dosing strengths, Butrans Initiation/Titration
PPLPMDL0020000001	Akron	OH	44333	5/16/2013	Dr started off conversation by telling me that he just titrated a patient from 5mcg to 10mcg for one of dr vucetics patients. Dr said the patient was own vicoden and was uncontrolled. Dr said the patient is still on vicoden 5/325 prn. I reviewed the Scott profile and asked him if it makes sense for him to initiate a patient like Scott on Butrans? Dr agreed and told me as his business picks up he's sure to use more. I explained the OxyContin new information and asked him to review section 9.2. I discussed intermezzo indication and doses.
PPLPMDL0020000001	C. Falls	OH	44223	5/16/2013	Explained new OxyContin information withCindy the pharmacist and staff. They all told me they were aware about the reformulation but not about the clinical trials. They said they would read. I asked about new prescription of OxyContin and Cindy said they continue to see new ones but refills dominate. Cindy said that dr Dmitri at the pain clinic just sent a patient in for a titration of Butrans from the 5 to the 10mcg. Cindy said business has been picking up since he cam on staff. Reviewed intermezzo information and was told they have not seen any yet.
PPLPMDL0020000001	Tallmadge	OH	44278	5/16/2013	Conducted intermezzo vignette along with dr Reed. Dr Bachtel said it sounds like a good product and said he knows dr reed has used it. Gave complete review of Butrans hitting all key selling messages. Discussed both Scott and nancy profiles and touched on inclusion criteria from Bug 3015 trial. I asked dr if Butrans sounds like a product he would use in his practice? Dr said he wishes he could put all his patient on ER opioids which he said will never happen but said he feels comfortable enough with Butrans now to prescribe it. I asked where? Dr said early in treatment. Reviewed OxyContin information and asked him to review section 9.2. Asked him to prescribe OxyContin for his patients on Percocet for the q12h oxycodone.
PPLPMDL0020000001	Tallmadge	OH	44278	5/16/2013	Met dr for first time. Discussed about his experience and his background. Discussed a butrans in depth explaining all key selling messages. Explained CII, 7 day transdermal patch, patient profiles and opioid experienced trail. Dr said he knows about it and seems like it would be a good fit in his practice. Reviewed OxyContin informations and new addition to the FPI. Dr heard some of the intermezzo vignette and he had to go to the hospital.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/16/2013	Some with Pat about intermezzo dosing, indication and limitations of use. Pat said he has not had any yet. I explained the new OxyContin information and explain reformulation and additions to the FPI. Pat said he continues to see it a lot. I asked what mix of new to refills there area. Pat said only about 60 are refills and he sees a good amount of new. Explained Butrans dosing and asked an dispensing. Pat said he continues to fill regularly.
PPLPMDL0020000001	Tallmadge	OH	44278	5/16/2013	Conducted intermezzo vignette and dr said he has used it twice and the patients really liked it. Dr said he will continue to find places for it. Introduced Butrans for the first time hitting all key selling messages. Reviewed both Scott and nancy profiles and asked dr if he feels like it is a product he will use? Dr said he would and said he's not sure why a patient would go to an ER Butrans after failing a IR opioid? Dr said it seems like Butrans is for patients failing another ER opioid. I explained it can be failure on either. Continued to explain the indication and patient types suited for Butrans. Dr said he can think of a few patients already who would be good candidates.
PPLPMDL0020000001	Hudson	OH	44236	5/17/2013	Explained the OxyContin information and asked him to review section 9.2. I asked him to prescribe OxyContin for his patients on the IR oxycodone. Dr agreed it makes sense. Call at window with dr and handed him the opioid experienced trial. I pointed out that the trial was successful in accomplishing their goal with was efficacy of the product in respect to the three doses and safety. I showed him the graph depicting significantly greater responder rates with the 20mcg vs the 5mcg with respect to pain score reductions. Dr said he continues to be happy with its efficacy and the side effect profile is good. Dr said he will continue to look for patients. Nothing else learned.
PPLPMDL0020000001	Westlake	OH	44145	5/17/2013	Discussed Butrans for patients currently on tramadol round the clock. He said he is sending patients on opioids to other pain management drs. Discussed Intermezzo for appropriate patients with motna and dr said he would try a few patients
PPLPMDL0020000001	Hudson	OH	44236	5/17/2013	Spoke with Galiana about intermezzo and discussed patients appropriate for it. She told me she has not seen any prescriptions yet. Explained the new OxyContin information and additions to the FPI in section 9.2. Galiana the pharmacist had no questions but said she is glad there no AB rated generic alternatives. Galiana said she has seen a couple of Butrans prescriptions recently but could not remember from whom. Discussed the doses and appropriate patient types.
PPLPMDL0020000001	Rocky River	OH	44116	5/17/2013	Spoke with Liz about drs hours and scheduled a tentative lunch June 18 or 20. Liz will call and confirm. Shared OxyContin reformulation, butrans demo and intermezzo dosing and administration.
PPLPMDL0020000001	Westlake	OH	44145	5/17/2013	Quick window call. I explained that I have a lunch coming up and I gave the dr the communication insight and told him I would follow up at our lunch
PPLPMDL0020000001	Hudson	OH	44236	5/17/2013	Spoke to Bonnie quickly about all products. Bobbie the pharmacist said she has not had any intermezzo prescriptions and knows all about it. Explained new OxyContin information and referred her to sec 9.2. Gave her Butrans dosing and patient type information.
PPLPMDL0020000001	Westlake	OH	44145	5/17/2013	Spoke with ma and communicated reformulation of OxyContin and tried to get feedback on dr interest in the Butrans experience program. Was told I will have to find out at lunch. Confirmed that the dr did not have vacation planned at time of lunch
PPLPMDL0020000001	Westlake	OH	44145	5/17/2013	Quick call, gave communication insight and told nurse I would talk to him in more detail next week.
PPLPMDL0020000001	Cleveland	OH	44113	5/17/2013	Discussed office protocol, intro all three products, savings card and booked appt
PPLPMDL0020000001	Cleveland	OH	44113	5/17/2013	Discussed with Justin all three products no savings card needed
PPLPMDL0020000001	Cleveland	OH	44102	5/17/2013	Obtained office protocol, intro All 3 products to Widalis, booked appt. with docs
PPLPMDL0020000001	Fairlawn	OH	44333	5/17/2013	Quick discussion about the new OxyContin FPI information. I pointed out section 9.2 and asked dr to review it. I told dr that OxyContin remains a CII opioid with 7 doses. I asked dr if he will use OxyContin for his patients on IR oxycodone? Dr said he will and is typically when he uses it.
PPLPMDL0020000001	Cleveland	OH	44113	5/17/2013	Discussed Butrans success and new location at St. Vincent
PPLPMDL0020000001	Cleveland	OH	44113	5/17/2013	Intro all 3 products, savings card
PPLPMDL0020000001	Fairlawn	OH	44333	5/17/2013	Discussed with dr the new OxyContin information and asked dr to read section 9.2. Dr said he is glad to hear that the FDA made a good decision. Dr said he will continue to prescribe OxyContin. I asked dr if he can identify a few patients for Butrans and gain dome more clinical experience? Dr said he will and the Scott profile makes sense.
PPLPMDL0020000001	Cleveland	OH	44113	5/17/2013	Discussed Butrans success, likes product and is a confident prescriber. Went over Butrans Patient experience program. Intermezzo Vignettes, indication dosing and how to prescribe. Senokot S
PPLPMDL0020000001	Uniontown	OH	44685	5/17/2013	I asked dr if he has had any patients recently that are on tramadol around the clock and still complaining of pain? Dr said that I know he doesn't have many patients with chronic pain and told me most of his patients he sees are for more acute pain. I asked him when he has a patient on tramadol around the clock to initiate Butrans after 3 months or more of tramadol.
PPLPMDL0020000001	Cleveland	OH	44113	5/17/2013	Quick hit on Butrans, continuing to find success with prescribing Butrans.
PPLPMDL0020000001	Rocky River	OH	44116	5/17/2013	Spoke briefly with Leigh Ann about Intermezzo and she has not seen any scripts. I asked about the Cleveland clinic office nearby and if there were any high sedative hypnotic writers or pain manage,ent prescribers and she said she was not sure. Shared the OxyContin start and reviewed Butrans titration
PPLPMDL0020000001	Rocky River	OH	44116	5/17/2013	This is a Clevelgnd clinic satellite office in the shopping mall and Cathy said they do not see reps at this location but I could leave information.

	Akron	OH	44333	5/17/2013	Lunch appointment today but was cut way short due to dr having to leave for a flight at 2pm today. I asked dr to prescribe more Butrans for his patients in pain on tramadol around the clock and patients on IR oxycodone who are appropriate for the q12h OxyContin. Dr told me that he attempted to switch a patient from Percocet to OxyContin and the patient told him it was too expensive to get OxyContin. I asked if he confirmed the cost and what the prescription plan was? Dr said he didn't do either. I told him that cost is relative and that for the vast majority of patients, cost is not a factor with OxyContin. Dr asked me if Medicare and Medicaid can use the copay cards..... I explained the copay card situation. I asked dr what the number one outcome he looks for when prescribing an opioid? Dr said efficacy. I asked dr where he would place a product like Butrans on that efficacy scale as an ER opioid? Dr said that would be too long of an answer and we can discuss next time.
PPLPMDL0020000001	Cleveland	OH	44127	5/20/2013	Discussed with Dr. About her 2 new starts on Butrans , stated she hasn't heard back from patients yet, did have difficulty with the insurance on 1 RX, but Josie handled it and got the PA to go thru. Asked her to continue to find the appropriate patients for Butrans. reminded her of OxyContin flexible dosing strengths and Intermezzo indication and appropriate dosing
PPLPMDL0020000001	Akron	OH	44333	5/20/2013	I asked Jennell how she goes about using Butrans and who is a good candidate? Jennell said she has used it for patients who she is looking to reduce their oral opioids and this that are having efficacy issues with short acting opioids like vicoden. I asked Jennell to think early on in treatment for Butrans and showed her the Scott profile. Jennell said she understands. Provided Jennell with updated OxyContin information and asked her to read section 9.2.
PPLPMDL0020000001	Cleveland	OH	44113	5/20/2013	Worked pain Mgmtm. Dept.. Dr. Shen will be on vacation for the next ten days
PPLPMDL0020000001	Cleveland	OH	44105	5/20/2013	Visited Metro Health Broadway Ctr. Talked with Rosalyn, suggested leaving info and savings card. Left message for Med Director. Dr. G Khoury request for product portfolio in- service
PPLPMDL0020000001	Cleveland	OH	44105	5/20/2013	Visited Metro Ctr. Talked with Rosalyn left product info and Butrans savings card. Left message for Dr. G Khoury medical director requesting a in- service for product portfolio.
PPLPMDL0020000001	Akron	OH	44313	5/20/2013	Spoke with dr as he was leaving the office for the day. Discussed the new OxyContin information and advised him to review section 9.2 in the FPI. Dr said he is glad to know things are good with OxyContin. I asked dr if he will continue prescribing? Dr agreed. Nothing else learned.
PPLPMDL0020000001	Fairlawn	OH	44333	5/20/2013	Quick message about Butrans and asked dr to continue prescribing Butrans early on in the treatment of pain and gave him the Scott profile. Dr agreed he likes it and it has been successful. Nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44105	5/20/2013	Visited Metro Ctr. Talked with Rosalyn suggested leaving info/ Savings cards and left message for Med. Director G. Khoury requesting a in-service for product portfolio Amy is on vacation until the 28th
PPLPMDL0020000001	Fairlawn	OH	44333	5/20/2013	Some to Gilbert and Sue about their dispensing intermezzo? Gilbert said they have had a few from Higley but said not too many others. Explained indication and dosing. Provided the new OxyContin information and asked Gilbert to read section 9.2 Gilbert is glad to know things are good and there is no generic alternative. Explained Butrans and asked about dispensing? Gilbert said he has multiple of each dose and 3 of the 20mcg. Gilbert said he has noticed that drs are titrating to the 20mcg more often in the last month. Explained titration with Butrans.
PPLPMDL0020000001	Akron	OH	44312	5/20/2013	Leila gave me a short window to discuss with Dr Lababidi the OxyContin information. Discussed all appropriate information regarding recent developments and advised dr to read section 9.2 and become familiar with the clinical data regarding reformulation and abuse deterrence. Dr said he was glad to hear that the FDA made a good decision. I asked dr to continue to write OxyContin.
PPLPMDL0020000001	Akron	OH	44333	5/20/2013	Spoke to Lisa about her use of Butrans and asked her what would be the downside to using Butrans for a patient of hers who has been on either tramadol or vicoden around the clock and still having pain? Lisa told me the only problem at times is getting the patient to agree to use a patch vs oral opioids. Lisa said she has had mostly good success. I explained the new OxyContin information and advised her to review section 9.2. Lisa had no quick call- Dr Fedorko said he has no time today. He added that he knows "Butrans". Reviewed appropriate patient type, reminding him Butrans is a once weekly CII opioid dosed transdermally. Intermezzo dosing review. He said he has a patient who he gave Intermezzo to & the patient didn't like any sleep aid other than Intermezzo. He said he will look for more patients like that.
PPLPMDL0020000001	Cleveland	OH	44130	5/21/2013	Spoke with Lori about introducing the pain management kit to the drs and staff based on their request. Lori said she already registered for the OAHRS reporting and said I can stop by after 3pm this Thursday.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	5/21/2013	Talked With Josh T. (pharmacist) discussed all three products, stocking all strengths. He suggested virtual samples/e-savings cards for Intermezzo& Butrans, verified Sabrina's S. contact info along with role in getting the "process" implemented. Called left message
PPLPMDL0020000001	Cleveland	OH	44195	5/21/2013	Visited CCF, Neurological Center for Pain C21. Left info and contact for K. Baugh PA-c and C. Dobrowski NP . And also CTR. For pain at the Walker bldg 14th floor Admin offices
PPLPMDL0020000001	Cleveland	OH	44195	5/21/2013	Met with Anne very helpful, discussed protocol/patient selection and thought on products. Follows a lot of Dr. Stanton-Hicks prescribing protocols, they haven't had a lot of experience with Butrans because of Suboxone prescribing. Discussed savings card. OxyContin flexible dosing and she is very confident in prescribing. Intermezzo indication along with dosing
PPLPMDL0020000001	Akron	OH	44310	5/21/2013	Followed up with dr about the patient he initiated on Butrans last time I was in for lunch. Dr said it was funny how the first patient he saw after out discussion fit the description of what we were talking about. Dr said he initiated Butrans and has not heard of anything since. I asked which dose and he said he thinks 5mcg. I gave dr the Butrans information guides and asked him to hand them out with his prescriptions. I asked dr to continue prescribing and he agreed to. Left OxyContin and intermezzo dosing guides.
PPLPMDL0020000001	Cleveland	OH	44130	5/21/2013	Showed Dr Diab OxyContin's 7 tablet strengths & asked which he uses most frequently. He just said, "OK, thank you," & started to walk away. Butrans once weekly dosing & Intermezzo reminder messages. He waved & walked into a room.
PPLPMDL0020000001	Parma	OH	44129	5/21/2013	Quick call- Myra said she was 3 hours behind due to their new computer system. She said she has been giving out the Butrans patient experience program kits & has been using a lot of Butrans lately. She said she still hasn't gotten any feedback from the program. Spoke with Dawn & updated her on OxyContin FPI. Gave her a copy for reference. Reminded her that the same caution should be used with OxyContin now as before the label update.
PPLPMDL0020000001	Lakewood	OH	44107	5/21/2013	Discussed Intermezzo patient type & Caresource prior authorization requirements. She loaded it into their new computer system which will allow the practitioners to prescribe it from their computer.
PPLPMDL0020000001	Parma	OH	44129	5/21/2013	Quick call- Asked dr his thoughts on the Maria profile and how would he treat someone like her. Dr said he would use butrans 10. I asked if he thought he had patients like Maria in his practice and he said sure. I asked if he would consider using Butrans sooner in his treatment regime and he said he would think about it.
PPLPMDL0020000001	Parma	OH	44129	5/21/2013	Quick call- Dr Ortega said he didn't have time today. He said he enjoyed the Butrans program & is still using Butrans. He said he has seen some of the patients who are on it this week & they are doing well. Gave OxyContin FPI & reviewed Intermezzo indication with Cindy. She said she would like to try it.
PPLPMDL0020000001	Uniontown	OH	44685	5/21/2013	Spoke with Kim quickly about intermezzo and new OxyContin information. I advised her to read sec. 9.2 in the FPI. Kim said she had not hear of anything and was glad that nothing has changed for the worse .
PPLPMDL0020000001	Sagamore Hills	OH	44067	5/21/2013	Quick call- Dr Sevier said he did not have time for lunch today. Gave new OxyContin FPI, alerting him to label update. Butrans patient type/range & Intermezzo dosing messages.
PPLPMDL0020000001	Cleveland	OH	44195	5/21/2013	Met with Anne(NP) discussed protocol/patient selection and that. Dr. Still prescribes a lot of suboxone thus very little experience with Butrans, patients don't seem to want patches. She feels they are adequately controlled. Said she will take some Savings cards and see what she can do. OxyContin 7 dose strengths reminder. Intermezzo indication and dosing
PPLPMDL0020000001	Independence	OH	44131	5/21/2013	Dr Sundaram said he feels guilty that he isn't writing Butrans. I told him I would imagine he will see patients before the end of the week who may be Butrans candidates. Showed Scott patient profile as an example. He said he would do his best. Gave new OxyContin FPI & updated Dr Sundaram on labeling. I asked that he be just as cautious as always when prescribing. He said it is a good medication for the right patients. Gave Intermezzo dosing card & reviewed indication, dosing, & patient type. Dr Sundaram said he actually could use Intermezzo himself as he suffers from this condition & has nothing to help him with it. Reviewed trial offer & savings card. He said he is going to have another physician write him a script for it.
PPLPMDL0020000001	Akron	OH	44312	5/21/2013	Dr covering for other drs in practice and gave me 30seconds. I told him that Butrans is ideal for patients on tramadol around the clock who still have pain. Showed him the Scott profile and asked for his business. Provided him with the updated OxyContin information and advised him to review section 9.2 in the FPI. Dr said he will read it.
PPLPMDL0020000001	Mogadore	OH	44260	5/21/2013	Discussed OxyContin with dr and reviewed patient profiles. Dr told me that she does use OxyContin and that the profiles make sense and she typically will go to it when patients on IR oxycodone need an ER product. Dr agreed with Sam profile and said she will continue to prescribe. I explained the new OxyContin FPI information and advised her to review section 9.2. Introduced Butrans discussing all key selling messages and reviewed both the Scott and nancy profile. I asked her if it makes sense to use Butrans for a patient like Scott? Dr said it does. I asked her if she will use it clinically? Dr said she will and wanted the initiation and titration guide. Intermezzo indication, dosing and limitations of use.
PPLPMDL0020000001	Mogadore	OH	44260	5/21/2013	Conducted intermezzo in-service and discussed patient types appropriate and not appropriate for intermezzo. Discussed Butrans patient types, titration, initiation doses and approximate conversions. Dr said they he is actively looking for patients for Butrans and has been using it. Dr said he has had trouble with Medicare plans covering it. I discussed the plans with the path of least resistance. I explained Caresource coverage for Butrans and dr said he just had problems with OxyContin and Caresource. Dr said the patient failed MS Contin and can't get the, to pay for OxyContin. I asked if Butrans would be an appropriate option? Dr said he didn't think about Butrans but said it makes sense and will try it because the patient meets the criteria. Explained the OxyContin new information and dr said he is glad because he likes it.
PPLPMDL0020000001	Lakewood	OH	44107	5/21/2013	Followed up with nurse to find out how the Butrans patient is doing and to find out if he had any questions about patient education, insurance coverage, titration and patient compliance. She said she will pass the information on and give me a call to follow up. I asked if there was a better time to follow up and she 10:00 am tomorrow.
PPLPMDL0020000001	Sagamore Hills	OH	44067	5/21/2013	Penny said pain is such a difficult disease state & she has had a hard time with it. She said she has already been "burnt" by some patients, so it makes it more difficult. She said she does, however, have a patient who she wanted to ask me about Butrans for. She said the patient has rheumatoid arthritis with pain constantly. She said the patient takes the maximum amount of tramadol every day and occasionally uses Percocet for breakthrough pain. Penny asked if Butrans would be an option for her. Showed range of patients for Butrans, adding that if the patient's total daily dose was beyond the Butrans range, OxyContin could be an option as well as a q12h dose of oxycodone. Penny looked at the information & said she thinks she will give this patient Butrans to see how she does, while still allowing supplemental analgesia. Discussed starting dose of 10mcg with the possibility to titrate after 3 days to 20mcg if necessary. Discussed setting patient expectations for titration early so the patient does not abandon the therapy. Updated her on OxyContin labeling & gave new FPI. Reviewed Intermezzo indication, dosing, patient type, managed care, & trial/savings cards.
PPLPMDL0020000001	Sagamore Hills	OH	44067	5/21/2013	Dr Maguire asked me to re-tell him about Butrans. He said he knows he used it a long time ago but has not recently. Reviewed indication, dosing, delivery system, & CII opioid with abuse/addiction potential. Showed range of patients & demo. Also reviewed managed care landscape & gave trial/savings cards. Discussed titration & supplemental analgesia. Used patient profile of Scott as an example patient & discussed how this type of patient could start Butrans. Dr Maguire said he would try Butrans again & remembers having a good degree of success. Gave new OxyContin FPI & updated Dr Maguire on labeling. Discussed 7 tablet strengths, CII opioid, & q12h dosing of oxycodone. He said it is a good medication for the right patients. Introduced intermezzo. Discussed dosing, indication, sublingual delivery & taking PRN. He said this is a common problem with patients & said he will definitely be prescribing it. Reviewed managed care landscape & showed trial/savings cards. He said again he would prescribe.
PPLPMDL0020000001	Mogadore	OH	44260	5/21/2013	Conducted intermezzo in-service and dr said he will look for patients meeting indication that have Caresource because he has many. Discussed Butrans dosing, initiation doses, titration, and patient types with Scott and nancy. I asked dr if the Scott profile for Butrans makes sense? Dr said he has been looking for patients and likes it. He agreed that the tramadol patient is a good fit for Butrans. I asked for him to write more of it. Explained the new OxyContin information and advised him to read sec 9.2.
PPLPMDL0020000001	Lakewood	OH	44107	5/21/2013	Spoke with dr about start titration with OxyContin and he asked about supplemental analgesia. I asked what he meant and he said he uses OxyContin by itself and does not supplement. I asked how his patients were doing on OxyContin and he said they are fine with mono therapy.
PPLPMDL0020000001	Parma	OH	44134	5/21/2013	Dr Hernandez said he is still using more Butrans, most recently using more lower doses for opioid-naive patients. Showed Maria patient profile & asked if this is the type of patient he is talking about. He said yes. I gave him a new OxyContin FPI & updated him on recent changes. I asked that he continue to use the same caution he always has with it as OxyContin is still a CII opioid with abuse & addiction potential. Dr Hernandez said OxyContin, like every medication, has its place & is a good medication when used appropriately.
PPLPMDL0020000001	Lakewood	OH	44107	5/21/2013	Reviewed start with dr and asked him how this compared with his writing habits and he said he would keep it in mind. I asked why he uses OxyContin and he said it works well. I asked him when he moves from a short acting to a long acting and he said when the patient needs more. He said sometimes that can be several months. He said he is still having problems with getting OxyContin approved.

	Lyndhurst	OH	44124	5/21/2013	Asked to see Karen Steffey as well (Butrans super core), she left early, wasn't in. Dr. Reed swamped, couldn't see her either. Met with nursing and asked they all review updates to section 9.2 OxyContin FPI. Left her new formulary piece for Oxycontin. Remember Butrans as CII option. Intermezzo for MOTN. Discussed Caresource PA. Also discussed with girl who handles pre-cert/prior authorizations. She says Caresource is difficult to deal with and she's having a lot of trouble with medicare part D plans. She was very frustrated. Left new Intermezzo HCP piece for re assessment of insomnia patients for Dr Reed, Karen and Patricia. Also left OxyContin FPI for all.
PPLPMDL0020000001	Cleveland	OH	44130	5/21/2013	Spoke with pharmacist Renee' who said she has both strengths of Intermezzo on the shelf, but has not dispensed any. Reviewed Intermezzo dosing & sublingual delivery. Also asked if she sees a script written "HS" that she call the physician to correct the prescription. She said she would do this. She also agreed to counsel patients on how to take Intermezzo PRN sublingually only when they experience a middle-of-the-night awakening with difficulty returning to sleep on their own. Discussed savings at PurdueHCP.com.
PPLPMDL0020000001	Cleveland	OH	44195	5/22/2013	Discussed with Dr. Thoughts on treating pain and managing pain between Primary Care and pain Mgmt. He will refer patients out if coming on high doses of narcotics. Positioned Butrans for appropriate patients [after Tramadol before Around the clock, Short acting] reviewed formulary coverage. Reviewed label change for OxyContin, reiterated same abuse potential as any Opioid. Spoke with Margaret and her role as educating patients about pain therapies before leaving office.
PPLPMDL0020000001	University Hts	OH	44118	5/22/2013	Discussed with Dr. Thought on managing pain in his practice, he is comfortable prescribing OxyContin for chronic pain. most of them are patients taking alot of percocet. Reviewed OxyContin PI changes and reiterated same abuse, misuse potential as any other opioid. Positioned Butrans for appropriate patients, Dr. Stated patients don't want a transdermal product, they are comfortable PO. Does see Caresource but only for Urgent Care side. Doesn't use pain contracts because he isn't a pain clinic. Also reviewed Intermezzo indication dosing and Savings Card
PPLPMDL0020000001	akron	OH	44333	5/22/2013	Short call in hallway about his lack of use with Butrans. I asked him if he has any reservations in using it? Dr said he does not and because of the influx of new patients he's sure go have more candidates available. Dr said right now he is trying to focus on getting his new patients up and running. I asked him if he would keep his mind on the uncontrolled tramadol patient? Dr said he would. Left the OxyContin and intermezzo dosing
PPLPMDL0020000001	Westlake	OH	44145	5/22/2013	Spoke with will about Butrans movement and he said there has been none. Reviewed Intermezzo patient information booklet and focused on dosing time and gender specific dosing. Shared new FPI for OxyContin and he said he was aware of this change.
PPLPMDL0020000001	Westlake	OH	44145	5/22/2013	Only able to give dr a reminder for Butrans which was a schedule 3, 7 day buprenorphine patch with 5 10 and 20 dosing.
PPLPMDL0020000001	Westlake	OH	44145	5/22/2013	Swinerton, the ma, informed me of an adverse advent which I reported in this call. We discussed managed care issues and patient information booklet information. Booked appointment to see dr
PPLPMDL0020000001	Garfield Hts	OH	44125	5/22/2013	Discussed all 3 products, requested OxyContin Savings card. No new prescribers
PPLPMDL0020000001	Akron	OH	44312	5/22/2013	Short call with dr and asked him to continue identifying patients for Butrans and to lean on the success he has had already with the product. Reviewed the Scott profile and asked him if it makes sense? Dr agreed. Explained the OxyContin information and asked him to review the FPI changes. Intermezzo dosing and indication. Asked for continued business.
PPLPMDL0020000001	Westlake	OH	44145	5/22/2013	Spoke with Kelly about OxyContin change and was the dr using the savings cards. Kelly said she gives them out occasionally. She said the only prior auths she writes for OxyContin is for WellCare buckeye and caresource. I asked what strengths the dr uses and she did not know off hand.
PPLPMDL0020000001	Cleveland Hts	OH	44118	5/22/2013	Discussed with pharmacist all three products. Hasn't seen any RX's
PPLPMDL0020000001	Akron	OH	44312	5/22/2013	I asked dr how his patients are doing on Butrans and if he has had any other limitations? Dr said his patients are doing really well and said the key to Butrans is starting them early on in treatment with the 7 day patch. Discussed the tramadol patient and why that patient is appropriate for Butrans. Discussed with dr how he needs to find more patients appropriate for Butrans.
PPLPMDL0020000001	Westlake	OH	44145	5/22/2013	Dr was running late and patients were waiting, so I quickly asked what he based his decision to use Butrans on. Dr said it depends and went back into the exam room.
PPLPMDL0020000001	Westlake	OH	44145	5/22/2013	Spoke with tech about Intermezzo prescribers and he said he has not seen any scripts for Intermezzo. Reviewed opioid naive study findings and asked him his thoughts. He said the information was fine. Shared the start section of OxyContin titration piece and he said he did not have many OxyContin patients
PPLPMDL0020000001	Westlake	OH	44145	5/22/2013	Dr was not familiar with Butrans so I gave indication, use, titration and warnings. Showed the OxyContin reformulation in section 9.2 and reviewed dosing and administration of Intermezzo.
PPLPMDL0020000001	Akron	OH	44313	5/22/2013	Presented new OxyContin information to dr through window. Explained additions to FPI and advised him to read it. I asked if he had any questions and he said no. I asked for his continued business. Nothing else learned.
PPLPMDL0020000001	Akron	OH	44304	5/22/2013	Spoke with Sara the pharmacist. Reviewed intermezzo indication, dosing and limitations of use. Sara said she has not seen any yet. Explained the OxyContin information and advised her to read section 9.2. I asked about her dispensing of Butrans. Sara said she had the 5 and 10mcg doses in stock and has a handful of patients on it.
PPLPMDL0020000001	North Hampton	OH	45349	5/22/2013	Full butrans presentation. She said that she wanted to upstart a patient this week but said she just wasn't sure. I told her that it is my responsibility to ensure that she is comfortable writing so we went through dosing, indication, drug inter, side effects, and safe initiation. She thanked me and said she feels more confident for the future.
PPLPMDL0020000001	Akron	OH	44304	5/22/2013	Short discussion with dr about continuing to evaluate his patients on Percocet to determine if they are appropriate for OxyContin. I explained the new information in the FPI and advised him to review section 9.2. Dr agreed.
PPLPMDL0020000001	Uniontown	OH	44685	5/22/2013	Good discussion with doctor Stetler with Barry Chadakoff about how he deals with his patients in pain. I asked dr what he does to decide how to treat patients in chronic pain? Dr said he has to be very selective in the patients he chooses to treat. Dr said he does not want to treat patients who need large amounts of opioids and will not take them into his practice. I explained to the dr about how Butrans if it is initiated early enough can provide a suitable option to effectively treat chronic pain. Dr agreed and thinks it is a product that can produce good results when used early on in treatment. Exaimed new OxyContin information and asked him to initiate
PPLPMDL0020000001	Akron	OH	44312	5/22/2013	Spoke about his philosophy in treating pain and getting him to open his eyes about the option of Butrans. Discussed the tramadol patient who is on it around the clock and still in pain. I asked dr what the downside is to initiating a 7 day transdermal patch instead of going to another q4-q6? Dr said that I'm breaking him down when it comes to Butrans. Discussed the appropriate starting dose for tramadol patient. I asked dr to gain clinical experience with Butrans so it can prove itself. Dr agreed. I explained the new OxyContin information and asked him to prescribe OxyContin when he has a patient on around the clock Percocet. Dr agreed. Explained the intermezzo indication, dosing and limitations of use.
PPLPMDL0020000001	Akron	OH	44333	5/22/2013	Discussed his recent prescriptions of Butrans from last week. Dr said that he started the same patient on both Butrans and intermezzo. Dr said the patient was on tramadol and having trouble staying asleep. I asked dr to continue looking for those patients on tramadol around the clock. Discussed OxyContin and asked him if he has a patient on IR oxycodone and an ER product was necessary wld he go against the grain and write Exalgo? Dr said in those cases he would prescribe OxyContin. I asked dr to continue prescribing all products and continue handing out copy cards and experience kits.
PPLPMDL0020000001	Tallmadge	OH	44278	5/23/2013	Discussed intermezzo indication, dosing and limitations of use to Ray the pharmacist. Ray said he has both doses in stock but has not dispensed any. Talked about copy cards. Discussed the OxyContin new information and advised him to read section 9.2. Pharmacist asked about more frequent dosing of OxyContin and told him that it has only been studied in q12h and that is our recommendation. Explained Butrans Scott profile and the approximate conversion chart.
PPLPMDL0020000001	Cleveland	OH	44113	5/23/2013	Discussed Butrans and success the practice(D. Torres) has had with prescribing for the appropriate patients.
PPLPMDL0020000001	Richmond Hts	OH	44143	5/23/2013	Had lunch with dr & staff today. Detailed Dr Stanescu on Butrans using Nancy profile. he states he will treat/manage pain in the office, and uses vicodin, ultram, fentanyl patch, for pain patients. reviewed appropriate patients for opioid naive, opioid tolerant dosing, using both dosing slider & decision tree piece. Also demo patch/ disposal unit. He says he likes the concept, & says its convenient because Butrans can be called into pharmacy with refills. ASKED me to leve savigs cards. Dr Stanescu says he can find a few patients to start trials for Butrans. Told him patients can try fr one month free, if copay is \$100! or less. Concern is coverage/cost. He does NOT welcome BWC patients, nor does he accept Caresource patients( he says his wife accepts Caresource at her practice) focus on Med Mutual, Aetna Express Scripts, Medco. I will bring you updated formulary grid in next few weeks. Presented updated FPI for OxyContin, directing him to updates, section 9.2. He does NOT write OxyContin, nor will he start. He would consider for nursing home/ hospice. intermezzo, was very interested in learning more, he does prescribe insomnia agents which his ma ABBEY & staff confirmed. Detailed all key messages, highway drive study, dosing. Where is it covered? Since he doesn't accept Caresource, afraid he may have issues. Told him to expect prior auth's. Direct patients to Intermezzo.com for savings. Free 5- day trial with script. He will definitely consider fr MOTN insomnia.
PPLPMDL0020000001	Mayfield Hts	OH	44124	5/23/2013	Brief hallway call, OxyContin when ER opioid needed ATC for mod to severe chronic pain. invited to Dr Laham July 8 th program, "i scheduled this program around your practice." Left invite also for PA-C Sarah J who's off every Thurs. Spoke to Helen ( there over 28 yrs) I thought she was an RN, she is MA. They have one RN in office, Marina, who may come to the program. They also have just one LPN. the rest of girls are medical assistants. Helen can't make program anyway, as she's on vacation week of July 8th. Left invite with office manager Ellen, who selected date for practice. Also left invite with Dr Prada, whom had already left for the day. Intermezzo dosing/ initiation guides left for all.
PPLPMDL0020000001	Richmond Heights	OH	44143	5/23/2013	Met with staff at front window. dr B is not in office, won't be back in Richmond Hts office til Mon June 3rd. Left July 8 Laham invite, Butrans FPI. OxyContin FPI, with request dr review updates to section 9.2. Intermezzo highway driving study, FPI. reminded them to call me with any lunch cancellations.
PPLPMDL0020000001	Cleveland	OH	44113	5/23/2013	Discussed Product portfolio, comfortable prescribing OxyContin post surgery short term also Dr. stated he refers chronic pain to Pain Managemment.
PPLPMDL0020000001	Cleveland	OH	44109	5/23/2013	Talked with Tech - Mary C. Discussed all 3 products requested OxyContin Savings card, Elena Fischer- RPH
PPLPMDL0020000001	Lyndhurst	OH	44124	5/23/2013	Spoke with nursing ( marina) & Helen ( ma) to sell Laham program for Mon July 8th. Left invite for dr with Butrans FPI. left OxyContin " their pain is as individual as they are " piece. Left Intermezzo initiation/ dosing guide.
PPLPMDL0020000001	Highland Heights	OH	44143	5/23/2013	Quick window call. Mary first, then Marianne. Reminded Marianne to and out Butrans BPE kits to all new Butrans patients. Left invite for July 8th. OxyContin FPI please review section 9.2 left new formulary piece for Oxycontin. Left Intermezzo patient guides & dosing brochure.
PPLPMDL0020000001	Westlake	OH	44145	5/23/2013	Window call while scheduling lunch. Shared an abbreviated managed care insight and told him I would like to continue our discussion at lunch.
PPLPMDL0020000001	Tallmadge	OH	44278	5/23/2013	Discussed the option of Butrans with dr for his patients uncontrolled on tramadol. Dr told me for him he has patients on vicoden around the clock. I asked him what the downside is to prescribing Butrans for that patient type? Dr said he is in a rut prescribing the same old medicine and its too much for him to explain to a patient. I told him that he needs to allow Butrans to prove itself to him. Dr said there is a possibility. I explained the nancy profile and asked him to give it a chance. Discussed OxyContin doses and intermezzo doses.
PPLPMDL0020000001	Cleveland	OH	44113	5/23/2013	Discussed Butrans and her confidence in prescribing and continued success. She stated she is having difficulty with Caresource PA, waited on hold for long time only to be denied.
PPLPMDL0020000001	Cleveland	OH	44114	5/23/2013	Met Elaine briefly discussed Butrans and product portfolio. Quick discussion on managed care
PPLPMDL0020000001	Waterford	OH	45786	5/23/2013	I- I left the Butrans initiation guide. W- Said that they are not seeing reps until the EMR is implemented in two weeks.
PPLPMDL0020000001	Lyndhurst	OH	44124	5/23/2013	Left Rx patrol flashcard & pharmacists guide to Intermezzo. Didn't have time to check stocking. intermezzo still not dispensed yet. Direct customers to Intermezzo.com for savings. Butrans not dispensed recently. Left patient guide. oxycontin, left FPI, request he review updates to section 9.2. Q12 recommended dosing with 7 doses available for titration.
PPLPMDL0020000001	Akron	OH	44305	5/23/2013	I asked dr how he is discussing Butrans for the first time to a patient? Dr said that he tells them that it is a 7 day patch and its a way to reduce their pills and provide pain relief. I told dr insight number 3 and discussed 71% of hcp's signed their patients would provide them more information about their pain experiences. I asked if he has provided the information guides with the prescriptions? Dr said he has. I told him that the more informed a patient is with their medication the more likely they will buy into it. I asked dr how his patients are doing on Butrans? Dr said he's about 50/50 with pain relief. I asked if he would titrate a patient on Butrans if he was told they we still in pain? Dr said he would titrate through the doses. I asked him to continue prescribing Butrans for his patients on around the clock tramadol. I asked dr to continue using the experiences kits and copy cards.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	5/23/2013	Explained to Lori at the front desk about the offces request to get more information about managing pain. Discussed the specifics with oarrs and how it can be useful for the practice to identify patients history with opioids. Introduced parts of the pain management kit with Lori focusing on the initial assessment form, drug screening tools, and sample pain contract. Lori said the have a pain agreement but do not use it. Lori said it would be necessary when in the Exam room with the ma, it could be implemented if the patient has a history of opioid use. Told Lori that I wanted the opportunity to discuss further with the doctors.
PPLPMDL0020000001					

	Cleveland	OH	44113	5/23/2013	Discussed product portfolio, He is comfortable positioning OxyContin . Dr. did state and report from a previous reported adverse advent about a skin reaction to Butrans, he did state he was comfortable with response received from Medical Svcs.<font color=blue><b>CHUDAKOB's query on 05/31/2013</b></font>Mark, you want your call notes to be more specific. You want to include the specifics of what what discussed, not just that you discussed the portfolio. You recorded that you discussed all three prescription products. What did you ask the physician? Did you lead with insight? Did you ask the physician to take action? What was it? How did they respond to our questions and requests? These are examples of what you want in each call note.<font color=green><b>GUTKOMA's response on 05/31/2013</b></font>Thanks for the feedback.<font color=blue><b>CHUDAKOB added notes on 06/04/2013</b></font>Thank you. I look forward to more detailed call notes.
PPLPMDL0020000001	Westlake	OH	44145	5/23/2013	Dr says his treatment algorithm is methadone, fentanyl mscontin and then OxyContin. Dr algorithm for butrans is patients who cannot tolerate Vicodin, gastro bypass patients and those who cannot swallow. Dr says patients on long acting need to be rotated every 6-9 months so they don't build up tolerance. Gave insight and he said the % was high. I asked what he did to keep a lower discontinuation rate and he said he starts at 10. I asked why and he said 5 is not enough and I agreed that 5 is for the opioid naive patient. He has some cancer pain patients on 20. I asked would he ever consider Butrans before Vicodin and he said sometimes if the patient comes from primary care on high doses and he needs to switch them. He said sometimes these patients are thought to be addicted but they are pseudo addicted and I asked what he meant and he said they seem addicted but they have built up tolerance. Megan said I writes when he is reminded. He puts OxyContin last in the rotation because of the image. Dr was not aware of the \$50 savings card which is good for a year. Dr said use short extended release and not long acting and immediate release and not short acting when speaking with primary care or internal med. Dr writes with refills and sees patients in 4 months.
PPLPMDL0020000001	Cleveland	OH	44114	5/23/2013	1. Confirm he received packets of Pain PACT 2. Determine if his leaders reviewed it 3. Discuss initiative to roll out Pain PACT to NPs
PPLPMDL0020000001	Maple Heights	OH	44137	5/24/2013	Showed Dr Dale Intermezzo app & patient vignettes. He asked about patients who are taking other sleep medications. He asked if they can take Intermezzo if they wake up in the middle of the night. I told him we have not studied Intermezzo this way & therefore it is not recommended. Reviewed contraindications. Showed dosing guide which he kept. He asked about insurance, adding that he thinks he has had problems with it in the past. Reviewed managed care landscape & gave trial/savings cards. Dr Dale said he has actually told some patients about it. He agreed to reassess appropriate patients' sleep medications & try Intermezzo for those who are appropriate. Reviewed OxyContin's 7 tablet strengths & showed Percocet to OxyContin conversion. Positioned Butrans for appropriate patients who could benefit from a once weekly transdermal dosing option for their moderate to severe chronic pain. He said he really does not like treating pain. I told him I can understand this, but reminded him that there are legitimate patients who can benefit from medications like this. He agreed & said he could find some patients for Butrans. He also said he is going to be joining the Cleveland Clinic & will be moving office locations when Dr Gene retires next month.
PPLPMDL0020000001	Parma	OH	44129	5/24/2013	Dr Roheny said he is sure he will be able to find a patient for Butrans at some point, adding that I should have given up on him by now. I told him he probably has seen many patients this week who he could have considered. He said he doesn't know why he's not writing it. I told him I wanted him to see that it really can work for appropriate patients. Showed pain score reductions & clinical trial results for opioid-experienced patient trials. I asked if this shows that Butrans does work. He said it seems like it would. Showed patient profile for Nancy as an example of a patient. He said his patients like that don't have the right insurance. Reviewed coverage & Caresource prior authorization requirements. Reviewed trial offer & asked what an appropriate patient has to lose by trying it. He said nothing & he knows that. He said he will write it for the next person who fits the criteria. Reviewed OxyContin 7 tablet strengths & q12h dosing. Dr Roheny said he gave Intermezzo to someone recently. He said he has not think she has needed to try it yet, but he did give her the prescription. I asked if he gave her the trial/savings offer. He said he forgot. Gave him package & reviewed usage details.
PPLPMDL0020000001	Beachwood	OH	44122	5/24/2013	Helen said she recently started a patient on Butrans (the 10mcg strength) following the program & our follow-up discussion. Discussed titration, reviewing ability to titrate after 3 days to the 20mcg. She said if the patient reports inadequate pain relief or taking too much supplemental analgesia she will titrate then & not discontinue them, even if they ask for their pills back. She said she would keep me posted. Reviewed savings program & managed care. Gave information to Jenny on Intermezzo & reviewed indication/patient type. She agreed to share the information with Helen.
PPLPMDL0020000001	Parma	OH	44129	5/24/2013	Reviewed Butrans appropriate patient type & shared pain score reductions for opioid-experienced trials. Dr Gigliotti said that was "good" & he has to find a patient. Showed Nancy as an example of a patient type we studied & he probably sees fairly regularly. Reminded him of Butrans Patient Experience Program & asked him to give the kits out to appropriate patients new to Butrans. He said he knows he hasn't helped me much with Butrans but he does still write OxyContin. He added that he wishes he could try Intermezzo for himself. I asked why he couldn't. He said he might have another physician write a prescription for him. Reviewed trial & savings offer & indication. He said he was going to try it.
PPLPMDL0020000001	Brooklyn	OH	44144	5/24/2013	Talked with Tiffany/Brittany about Butrans and appropriate patient selection.
PPLPMDL0020000001	Garfield Heights	OH	44125	5/24/2013	Spoke with Donna. Discussed Butrans indication and appropriate patient selection, Requested savings card. She also stated dr. doesn't attend programs
PPLPMDL0020000001	Independence	OH	44131	5/24/2013	Stopped Dr Jack between patients & reviewed Butrans appropriate patient type & CII long-acting opioid option. Reviewed Intermezzo indication/patient type & pointed out trial/savings cards for both medications.
PPLPMDL0020000001	Garfield Hts	OH	44125	5/24/2013	Discussed appropriate patients for Butrans. Dr. stated patients like PO delivery and seem adequately controlled. Stressed Initiation and Titration is essential for the best success when prescribing.
PPLPMDL0020000001	Maple Heights	OH	44137	5/24/2013	Showed some of the Intermezzo patient vignettes & reviewed information in the app. Dr Gene said he really thinks it seems like a good medication & added that he actually has tried to get Intermezzo for a few patients, but insurance keeps turning it down. Discussed managed care landscape & gave trial/savings cards. Also let him know more can be printed at PurdueHCP.com or the medication's website. I asked if he would continue to try to get it for patients who he identifies as appropriate. He agreed. Positioned Butrans for appropriate patients taking up to 40mg hydrocodone or oxycodone total per day. Showed pain score reductions & asked if he felt these results were significant. He said he does think Butrans is a good medication that does work when a patient is willing to try it. He said he would try to find more patients. Reviewed OxyContin's q12h dosing. Dr Gene said he will be retiring next month. June 27 is his planned last day.
PPLPMDL0020000001	Akron	OH	44320	5/24/2013	Quick talk about her patients she initiated on Butrans. I asked if they have been back in or called in about Butrans? Dr said she has not hear anything and she said she assumes all is good. Asked her to look into initiating the ER oxycodone for her Percocet patients and asked for her to identify intermezzo patients. Dr told me she is happy with Butrans so far and was impressed that she got the pa's to go through.
PPLPMDL0020000001	Brooklyn	OH	44144	5/24/2013	Quick discussion on Butrans, said he hasn't seen the "right" patient yet. Reminded of Savings Card and free trial offer. Invited to upcoming program
PPLPMDL0020000001	Akron	OH	44320	5/24/2013	Short discussion about her patients on IR oxycodone and how she needs to evaluate them to see if they are appropriate for ER oxycodone. Dr said she may look into it. Asked her to continue identifying Butrans patients especially those early on in IR opioid treatment like those on tramadol. Showed her the slide guide for conversions and dr said her patient is doing well. Intermezzo dosing guide left.
PPLPMDL0020000001	Westlake	OH	44145	5/24/2013	Spoke with Jennifer about intermezzo dosing and administration. Shared start for OxyContin and strengths. Shared Butrans savings cards.
PPLPMDL0020000001	Cleveland	OH	44113	5/24/2013	Left card with pharmacy
PPLPMDL0020000001	Copley	OH	44321	5/24/2013	I told dr about the Butrans mechanism of action and the patch make up. I asked if it makes sense to use a product like Butrans when a patient is either asking for a different medication for their pain or they are uncontrolled?
PPLPMDL0020000001	Brooklyn	OH	44144	5/24/2013	Dr agreed that it may work for some. I agreed and discussed the clinical trials success rate and patient types. Discussed OxyContin and intermezzo doses and asked for him to prescribe.
PPLPMDL0020000001	Parma	OH	44134	5/24/2013	Talked with pharmacy, no new RX from Dr. Paul. will keep an eye for any RX's for Intermezzo or Butrans
PPLPMDL0020000001	Uniontown	OH	44685	5/24/2013	Reviewed Intermezzo indication & dosing information. Also discussed importance of patient taking Intermezzo correctly. I asked if he sees a prescription for Intermezzo that is written incorrectly (ie "HS") will he call the prescriber to alert him/her to the mistake. He agreed. Also asked that he be sure that the patient understands that intermezzo is a sublingual tablet. He agreed to counsel them appropriately. Discussed savings opportunities for Purdue's medications at PurdueHCP.com.
PPLPMDL0020000001	Westlake	OH	44145	5/24/2013	Discussed all products with Brandi the pharmacist. I reviewed intermezzo with her and asked if they have dispensed any yet? She said they have not and said they do have the 1.75mg dose. Explained the OxyContin new information and advised the pharmacists and technicians to become familiar with section 9.2. Discussed the Butrans patient Scott and the approximate conversion scale.
PPLPMDL0020000001	Westlake	OH	44145	5/24/2013	Spoke with tech about intermezzo dosing and administration. Asked about Butrans doctors and Tina mentioned dr uh doctors. Discussed any OxyContin managed care changes I should be aware of and she said there were non. Reviewed Butrans vouchers and savings cards and asked how they process them and she said they come up automatically
PPLPMDL0020000001	Akron	OH	44319	5/24/2013	Quick all with pharmacist because he told me he was behind. Told him about the OxyContin FPI additions and asked if he had questions? Tom had no questions. Explained intermezzo dosing and indication along with Butrans initiation and titration guide.
PPLPMDL0020000001	Akron	OH	44320	5/24/2013	Dr told me he heard back from his Butrans patient and the patient told him that Butrans is working very well. I asked dr what dose he initiated on and what the patient was taking prior? Dr said he thinks he initiated on the 5mcg and that the patient was on vicodin. I asked dr if he would initiate a patient on tramadol? Dr said he will and it makes sense. Showed him the Scott profile and discussed where he should initiate. I asked dr if he will titrate through the three doses if a patient says more analgesia is needed? Dr said he will and feels better about it.
PPLPMDL0020000001	Westlake	OH	44145	5/24/2013	Dr said he has been using more since the last time I stopped by. I asked how his patients were doing and he said fine. I asked what does and he said the 10 because the 5 is for the opioid naive patients and I said I was glad to hear that and to remember there are some patients who may have to titrate to 20. I showed the titration piece and he said he has cancer patients that sometimes require 20. I gave the communication insight and discussed the pain journals and the booklets concerning how to talk to your physician about pain and how to talk to your patients about pain and he said his patients have too much to say now and he does not want to give anything else. He said he discusses it with them during their exam and puts the discussion in the chart. I discussed the side effect profile and if senakot would help his patients and he said he does not really see constipation on the 10 and they are usually on high doses of opioids when they experience constipation but patients always like samples. I told him he should be sure to give them a savings card and a sample of senakot. I reviewed the savings card and made sure he knew both the savings card and the vouchers were in the same booklet.
PPLPMDL0020000001	Beachwood	OH	44122	5/24/2013	Spoke with nurses in pain management & reviewed Butrans application/rotation instructions with them. Also discussed ability to tape edges of patch with first aid tape if it loosens or cover with Bioclusive or Tegaderm-like covering. Reviewed ability to titrate after 3 days & ability to take supplemental analgesia. I asked how frequently they see patients for follow-up. They said generally 4 weeks. Discussed Butrans as a CII opioid with abuse/addiction potential with ability to write refills & call in prescriptions. Reviewed OxyContin savings program & offered cards but they said they had enough. Also discussed Intermezzo indication & patient type.
PPLPMDL0020000001	Westlake	OH	44145	5/24/2013	Window call Spoke with ma and dr Carson about Butrans titration. Asked his thoughts on Butrans 7 day as an option. Dr said he thought it was a good option. Left nancy profile
PPLPMDL0020000001	Westlake	OH	44145	5/24/2013	Asked if he was more comfortable initiating patients at 10 and not 5 if they were not opioid naive. He said the dr usually initiates the prescription and he sees them on the follow up. I reviewed the opioid naive trial and stated that that over half the patients treated with butrans 10 or 20 had a greater than 30% reduction in pain and 53% of the patients on the open label portion titrated to a tolerable and effective dose. I asked if this sounded like a reasonable response rate and he said yes. I asked if this is the type of response rate he currently sees and he said he was not sure. I asked if he would let me know the pain scores of patients on butrans during my next lunch. Spoke with Daniel the pharmacist about intermezzo indication, dosing and limitations of use. Daniel said they dispensed a 1.75mg this week. Exp,aimed new OxyContin FPI additions. Daniel knew about original OxyContin patient expiring. Discussed Butrans dosing, titration, supplemental analgesia and patient types.
PPLPMDL0020000001	Akron	OH	44319	5/24/2013	Spoke with technician & reviewed Intermezzo indication, dosing, & patient type. Also discussed sublingual delivery & taking PRN only if the patient experiences a middle-of-the-night awakening with difficulty falling back to sleep. She said she has heard of Intermezzo & seen a commercial, but she doesn't think they have anyone who gets it filled there. Discussed managed care & let her know about savings & trial cards. Also showed info sheets on Butrans & OxyContin savings programs. She agreed to share this information with Jim.
PPLPMDL0020000001	Maple Heights	OH	44137	5/24/2013	Discussed his thoughts about evaluating his patients on Percocet to see if they would be appropriate for the q12h oxycontin? Dr said he will try to think about that more because he agrees many would benefit. I explained the OxyContin FPI additions and advised him to read section 9.2. I showed dr the Scott profile and asked him if it makes sense to initiate a 7 day patch for that type of patient? Dr said he would look it over. Nothing else
PPLPMDL0020000001	Akron	OH	44319	5/24/2013	Spoke to dr about his thoughts on Butrans? Dr said he remembers discussing with me and said he would follow the practice guidelines which is to refer when patients need ER opioids. I told him I understand and next him the dosing guide anyway. I discussed with him the intermezzo guide and indication with limitations of use. It sked if it is a product he would use? Dr said he would use it and asked about cost because Ambien is cheap. I explained the difference between the two medicines and talked about managed care coverage.
PPLPMDL0020000001	Tallmadge	OH	44278	5/24/2013	



PPLPMDL0020000001	Akron	OH	44319	5/24/2013	I asked dr if it makes sense to him to initiate Butrans for a patient on tramadol around the clock who complains of pain? Dr said he still has the Butrans materials on his desk. I asked if it makes sense? Dr asked if Butrans is like an ER hydrocodone? I told him no and that we need to take about 5-10 minutes to discuss more about what Butrans is and what the mechanism of action is. Dr said he would like that. I told him for the time being to identify patients on tramadol around the clock who tell him they need more. I discussed the q12h option of OxyContin and asked him to evaluate his Percocet patients.
PPLPMDL0020000001	Akron	OH	44319	5/24/2013	Again, I attempted to discuss Butrans with dr and began to explain the option of Butrans for his patients on IR opioids and needing more. Dr told me he didn't need to speak with me anymore. I asked dr why he wouldn't speak to me when he had not patients in his office? No comment from dr.
PPLPMDL0020000001	Akron	OH	44313	5/28/2013	Spoke to pharmacist about intermezzo indication, limitations of use and dosing specifics. No prescriptions yet. Gave new OxyContin information and advised to read section 9.2. Butrans initiation and titration guide as well as discussing the appropriate patient.
PPLPMDL0020000001	Cleveland	OH	44106	5/28/2013	Talked with Pharmacist (Ashleigh) Reviewed product portfolio,hasnt seen any Intermezzo at this location(did see a few when she worked at Parma) Requested vouchers. She hasnt seen any scripts for Butrans and OxyContin mainly from Palliative/Onc.
PPLPMDL0020000001	Akron	OH	44305	5/28/2013	Discussed products over lunch. I asked dr what things are most important that he needs to know when he prescribes a product for the first time? Dr said efficacy, cost and side effect profile. I used e opioid experienced trial to show efficacy and adverse events over 5%. I asked dr what his thoughts are? Dr said he sees a lot of constipation with IR opioids and is glad to know what the incidence with Butrans. I discussed how important patient selection is with Butrans and reviewed the Scott and nancy profiles. Dr said that a majority of patients are under 300 mg /day. Dr said he will plan on using Butrans more often. Spoke to dr about using it for his private prescription patients, copy cards and Caresource. Explained the OxyContin FPI additions and advised him to read the section 9.2. Intermezzo indication and dosing. Explained the Caresource plan.
PPLPMDL0020000001	Cleveland	OH	44112	5/28/2013	Briefly Discussed product portfolio with Michelle(nurse) and Charlotte, requested savings cards
PPLPMDL0020000001	Cleveland	OH	44195	5/28/2013	Visited JJ North,Followed up with Sabrina S. in regards to product portfolio on evoucher/CCF system. Confirming appt for June 5th
PPLPMDL0020000001	Akron	OH	44305	5/28/2013	Discussed intermezzo dosing and indication with Sara the pharmacist. Explained the new OxyContin FPI additions and asked about Butrans prescriptions. Sara said they have a few patients on the 5mcg.
PPLPMDL0020000001	Euclid	OH	44117	5/28/2013	Placed a call to Charlene Miller to confirm in-service for May 29th @ 3PM & 5PM.Received a phone call from Charlene, stating that she needed to cancel the in-service scheduled for Wednesday May 29th @ 3PM & 5PM d/t pre-planned activities for the residents that she was not aware of. Charlene explained that all the available conference rooms including the dining room will be occupied. She will re-schedule the in-service on "Defining Key Terms in Pain Management" on 6/11 when I complete the in-service on constipation.
PPLPMDL0020000001	East Cleveland	OH	44112	5/28/2013	Discussed product portfolio with LaToya- she Suggested Dr. Howard Smith-Rheumatologist-Wednesdays.Most of IM refer out to pain management .also Dr. Ganz-left the state
PPLPMDL0020000001	Fairlawn	OH	44333	5/28/2013	Placed a call to Michelle Williams in Staff Development to schedule in-service on constipation. N/A, left a msg. on her voice-mail.
PPLPMDL0020000001	Cleveland	OH	44122	5/28/2013	I called and spoke w/ Francine Young to reschedule in-service that was cancelled on 3/6. In-Service was rescheduled for June 17th @ 10:30 & 3:30 on pain management for Nurses & STNA's.
PPLPMDL0020000001	Akron	OH	44313	5/28/2013	I received a phone call from Richard Lynch requesting an in-service on Constipation in June. I placed a call to Richard and an in-service was scheduled for June 25th @ 5PM
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/28/2013	I asked dr to use OxyContin as his go to ER product. Dr said it basically is but is having trouble getting it covered. I explained its coverage and told him to focus on that. I explained how he should evaluate his Percocet patients for the possibility to move to OxyContin when they meet the indication.
PPLPMDL0020000001	Uniontown	OH	44685	5/28/2013	Quick hello at desk. Dr saw the Butrans slide guide and told me he continues to find good success with it and had a couple last week. I told him to make sure he titrated to the 20mcg when necessary to avoid a dose failure at the 10mcg. Dr said most of his patients are controlled on the 10mcg. Handed dr the new OxyContin FPI and asked him to read section 9.2.
PPLPMDL0020000001	Cleveland	OH	44103	5/28/2013	Brief Butrans discussion.Dr running behind, reminded of Initiation/Titration OxyContin flexible dosing.
PPLPMDL0020000001	Uniontown	OH	44685	5/28/2013	Spoke with Kathy the technician about all products. Introduced intermezzo discussing the indication, limitations of use and dosing specifics. Provided the new additions to the OxyContin FPI which she was unaware of. Discussed the s profile for Butrans and dosing review. Kathy said they use Butrans and have a handful or two of patients on it. She has not seen an intermezzo prescription yet.
PPLPMDL0020000001	Westlake	OH	44145	5/28/2013	I made a drop-in visit to speak w/ Patty O'Shea to schedule a pain management in-service to the June STNA class. I spoke w/ the receptionist, AnnMarie, who informed me that Patty was in the auditorium giving the state exam. She tried calling her office, but N/A. I left my BC.
PPLPMDL0020000001	Westlake	OH	44145	5/28/2013	I made a drop-in visit to speak w/ D.O.N., Sue William on scheduling an in-service on Pain Management. I spoke w/ Josh at the receptionist desk, who informed me that Sue was not in today. I left my BC.
PPLPMDL0020000001	Westlake	OH	44145	5/28/2013	I made a drop-in visit to speak w/ the ADDON, Janie Adamo to introduce Purdue's NE program. I spoke w/ the receptionist Shirley, who informed me that today was not a good day. I was advised to call her and set up an apt. 440-871-5900.I left my BC
PPLPMDL0020000001	Westlake	OH	44145	5/28/2013	I made a drop-in visit to speak w/ the D.O.N., Liz Williams to schedule an in-service on Pain management. I spoke w/ the receptionist, Casey who informed me that Liz left early today to attend a Dr.'s appt. w/ her husband. The facility is now under a new name called "The Orchards of Westlake."I left my BC
PPLPMDL0020000001	Stow	OH	44224	5/29/2013	Quick discussion in hallway about Butrans and OxyContin. I showed him the Scott and nancy profile and asked him to focus on those patients. Dr said he already does. I asked if he received the OxyContin FPI update and he said he didn't think so. I explained the FPI updates and provided him with an FPI for him to review section 9.2. Dr said he is glad the FDA made a good decision and said he is happy for Purdue. Dr agreed to continue to prescribe OxyContin.
PPLPMDL0020000001	Akron	OH	44333	5/29/2013	Spoke with Donna about intermezzo indication and dosing. Donna said they have not filled any and do not stock it. Gave Donna the pharmacist about the new additions to the OxyContin FPI and advised her to read section 9.2. Explained the Scott profile to Donna for Butrans. I asked her if it makes sense? She said it does and have not seen too many prescriptions for it. Nothing lose learned.
PPLPMDL0020000001	Akron	OH	44307	5/29/2013	Jeff the pharmacist said he dispensed one prescription of intermezzo in the last month. Jeff said he doesn't remember who it was from but it was an akron general physician. Explained the new OxyContin FPI information and advised him to read section 9.2. Butrans Scott profile discussion. Jeff said he has not dispensed any but agrees it makes sense.
PPLPMDL0020000001	Akron	OH	44333	5/29/2013	I spoke w/ D.O.N. Ramona Watson. I introduced Purdue's NE program. She requested that I e-mail her a list of in-service topics.
PPLPMDL0020000001	Cleveland	OH	44113	5/29/2013	Worked Premier office, along with 6thfloor General Surgery/Ortho/Rheumat. (Donley MD,K.Stearns, S.Joy,L.Bilfield) Hollie Recep. 4th floor Bruce Long MD, B Stulberg (Lynn) Leanna-schedule appt<font color=blue>-<b>CHUDAKOB's query on 06/07/2013</b></font>Did anything transpire when you worked the floor. I am sure you did more than just walk the floors? That is what we want to see in the notes.<font color=green>-<b>GUTKOMA's response on 06/09/2013</b></font>Noted for more detailed info. For future calls<font color=blue>-<b>CHUDAKOB added notes on 06/12/2013</b></font>Thank you. if I am unclear in what I am asking, please ask for clarification. the only way I know if you are understanding is what I see in the call notes. Thanks Mark.
PPLPMDL0020000001	Parma	OH	44134	5/29/2013	Spoke with pharmacist & asked what they usually do prior to quoting a prescription drug price to a customer. He said they run the patient's insurance prior to giving them pricing. I asked if they would also typically run any savings cards the patient may have for the medication before giving pricing details. He said they usually do. Discussed savings for all 3 medications & let him know the trial cards can be printed from online as e-voucher does not include the trials. He made a note of it.
PPLPMDL0020000001	Berea	OH	44017	5/29/2013	Spoke with Cora about intermezzo dosing. Discussed OxyContin FPI change. Discussed patient information booklets. Asked about large writers on the area.
PPLPMDL0020000001	Northfield Center	OH	44067	5/29/2013	Spoke with Kate, pharmacy manager & reviewed intermezzo dosing & indication. I told her about the patient with Medical Mutual that Karen from Cleveland Back & Pain told me about who reported that their pharmacist last night would not allow him to use his insurance plus savings card & would also not allow use of the trial card. Kate said she didn't know anything about it. I told her I understand that & asked if that scenario sounds possible to her. She said she doesn't know, adding that it depends on too many factors. She suggested the patient bring the script back in & she would run it. Discussed how to use the card, including the trial card. She said she would try.
PPLPMDL0020000001	Cleveland	OH	44113	5/29/2013	Discussed with Dr. product portfolio, Ease of use and insurance coverage important to him and his staff. Previously had difficulty with getting Butrans approved.Intermezzo indication and dosing<font color=blue>-<b>CHUDAKOB's query on 06/07/2013</b></font>Mark, ease of use could be a comparative statement. We have no data to show that Butrans is easy to use. Easy implies that it is easier than something else. This is the reason for more specific call notes. Exactly what happened on the call, as perhaps this was only your paraphrase. Does this make sense?<font color=green>-<b>GUTKOMA's response on 06/09/2013</b></font>Yes it makes sense...Ease of use was referring to Prior Authorization, call backs etc.<font color=blue>-<b>CHUDAKOB's query on 06/12/2013</b></font>Still not sure I understand. Are you saying that Butrans will provide fewer call backs?<font color=green>-<b>GUTKOMA's response on 06/13/2013</b></font>No, Dr./I were referring to getting prescribed products approved, Prior Authorizations,step edits,are all very time consuming for him and his staff. I should of probably typed ease of prescribing instead,<font color=blue>-<b>CHUDAKOB added notes on 06/16/2013</b></font>You want to be as specific as possible. All you have to say is Butrans has good managed care coverage. This does not mean that it will be easier for the patient to prescribe to the patient to get. Make sure to just stick with statements of facts.
PPLPMDL0020000001	Rocky River	OH	44116	5/29/2013	Spoke with pharmacist about intermezzo dosing. Discussed OxyContin FPI change. Asked a out Butrans writers I the area.
PPLPMDL0020000001	Berea	OH	44017	5/29/2013	Conducted intermezzo Inservice. Dr had patient on intermezzo and patient did not get refill and we discussed prn dosing and how long a 3 day script might last a patient with motna. Asked dr about his comment last time about referring patients out who had chronic pain. Dr said he sends patients out for referrals. Dr said he will prescribe er opioids if pain doc is consulted. Discussed start and told dr I wanted him to be aware of 15 and 30 mg so he has flexibility. Discussed going from tramadol to Butrans 4 patches a month if patient pain is not controlled. Dr agreed he was comfortable writing Butrans before Vicodin
PPLPMDL0020000001	Cleveland	OH	44113	5/29/2013	Briefly discussed portfolio. No new prescribers, taking inventory
PPLPMDL0020000001	Cleveland	OH	44113	5/29/2013	Discussed with Nurse(Wadilia) and staff product portfolio. Gained understanding of office protocol. Dr. sees alot of nursing home patients
PPLPMDL0020000001	Akron	OH	44302	5/29/2013	Short discussion with Dr Petrus and Ronda about the new OxyContin FPI information. I advised both of them to read section 9.2 in the FPI. Dr Petrus thanked me for the update and said he is glad to know the FDA made the right decision. I asked if he would evaluate his patients on long term use of IR oxycodone to see if OxyContin would be appropriate. Dr agreed. I explained to both dr Petrus and Ronda that they need to give Butrans a try again for patients like nancy and to use it early on in treatment? Ronda told me that she did not remember Butrans as a product to be used early and she understands now that they would have been more successful if they used it eatr on in treatment. Left the nancy profile and asked them to use it again.
PPLPMDL0020000001	Cleveland	OH	44102	5/29/2013	Brief discussion with Mike RPH, no new prescribersVicky-Pharm. Mgr<font color=blue>-<b>CHUDAKOB's query on 06/07/2013</b></font>What did you discuss with Mike? This is what should be in the call notes.<font color=green>-<b>GUTKOMA's response on 06/09/2013</b></font>Ok.<font color=blue>-<b>CHUDAKOB's query on 06/12/2013</b></font>What did you discuss with Mike?<font color=green>-<b>GUTKOMA's response on 06/13/2013</b></font>Any new prescribers? RX's (particularly Dr. Osorio) and other key prescribers in the area I should call on<font color=blue>-<b>CHUDAKOB added notes on 06/16/2013</b></font>Then this is what should go in the call notes. Something like "I spoke with Mike, the pharmacist. I asked him about prescribers of long-acting opioids in the area, and in particular of he has seen Butrans scripts. He had not."
PPLPMDL0020000001	Parma	OH	44129	5/29/2013	Reviewed Butrans Patient Experience kits with MA & discussed savings & trial offer. Also discussed OxyContin savings cards & eligibility requirements. Gave intermezzo trial/savings cards & went through how the patient would use them. Also reviewed intermezzo indication with her. She agreed to give this information to Dr Salama.
PPLPMDL0020000001	Akron	OH	44333	5/29/2013	Discussed with dr Vucetic about identifying working patients on tramadol or vicoden around the clock who are presenting in pain. Dr told me that he just initiated a patient on Butrans who is 45 years old and has chronic low back pain previously on vicoden. Dr said he initiated in the 10mcg dose. Dr Vucetic told me that he is really happy with the results of Butrans. I explained some of the clinical results of the opioid experienced trial and he said his clinical results are similar. Dr Vucetic said he will continue to prescribe. Dr said he does like OxyContin for his patients already on Percocet and need the q12h oxycodone. Discussed the intermezzo dosing and indication. Dr said that he continues to ask his patients if they have trouble staying asleep.



PPLPMDL0020000001	Parma	OH	44134	5/29/2013	Dr Hernandez said he has started more & more patients on Butrans. I asked him how often he finds that a patient who starts on 5mcg ultimately ends up on the 20mcg after proper titration. He said he definitely finds that he uses the 20mcg much more often than the other doses. He went on to say that if he gives them 20mcg & that is too strong for the patient, he has the patient cut the patch into smaller units (ie in half or in quarters) to titrate more exactly. I reminded him that we did not study nor do we recommend doing that. He said he knows, but he is the one with a medical license. He said this is what is effective for his patients, so he feels comfortable doing so. Reviewed OxyContin's q12h dosing interval & asked Dr Hernandez to adhere to this as well as to titrate patients when appropriate rather than increasing the dosing interval. He agreed.
	Bedford	OH	44146	5/29/2013	I asked Dr Moufawad how often he finds that he has to titrate a patient from 5mcg to 10 & then to 20mcg. He said it all depends, but it does happen. He said sometimes 5mcg is enough, while other times they do need the higher doses. Referenced opioid-naive trial in background, showing that these opioid-naïve patients were titrated all the way to 20mcg ultimately. Dr Moufawad said Butrans is a great medication & he likes OxyContin also, adding that he just wrote a script for it. Reviewed Intermezzo dosing. He said he will try it.
	Munroe Falls	OH	44262	5/29/2013	Quick minute to discuss the new OxyContin FPI information and advised her to read the FPI section 9.2. Dr said she has happy to hear that Purdue kept the reformulated version of OxyContin. Gave her the Butrans initiation and titration guide and asked for her continued prescribing. Dr said she likes intermezzo and did use it. Dr said she has yet to see the patient back but said she is sure the patient is happy.
	Akron	OH	44307	5/29/2013	Good discussion with Kyle the pharmacist and two technicians. Explained the intermezzo message about indication and dosing along with limitations of use. Kyle said that if its not covered on Medicare or Medicaid they most likely will never fill it. I explained the Caresource plan details. Discussed the OxyContin new FPI data and discussed IR oxycodone and OxyContin. Kyle said they are not filling OxyContin as much as they did in ore is years and their dispensing of Percocet has skyrocketed. I asked why and Kyle said that most physicians do not understand pain and the medicines they are prescribing month after month. Discussed Butrans dosing, titration and patient
PPLPMDL0020000001	Parma	OH	44129	5/29/2013	Quick call- Reviewed dosing for Butrans & patient type/range with Elaine. Also discussed ability to titrate after 3 days & maximum dose of 20mcg. Spoke with MA Karen, who said there was a patient of theirs who went to CVS in Northfield Center last night to get a new Butrans script filled. The patient reported that the pharmacist said he could only use the \$50 off card & that would bring his copay (Medical Mutual- commercial insurance through work) to \$345. I let Karen know that I would go to that location to try to resolve it. Karen said she would have the patient try again or get it filled somewhere else depending on what I found out.
	Solon	OH	44139	5/29/2013	Quick call- Saw Dr Zaldi at the window. I let him know OxyContin had a recent update to the FPI. He said he didn't have time to go over that & asked me to tell Julie about it. Gave Julie FPI & discussed update to FPI. I told her that Dr Zaldi should remain just as cautious as always when prescribing OxyContin as it still is a CII opioid with abuse & addiction potential. Gave her more savings cards & Intermezzo trial/savings cards. She said they did not need Butrans cards at this time.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	5/29/2013	I met w/ D.O.N., Debbie Bouslough on scheduling future in-services for the nursing staff. In-services were scheduled for Friday June 21st @ 2PM on Pain Management & Constipation for the STNA's and on July 19th @ 2PM on defining key terms in pain management & pain documentation for the Nurses. I briefly met with the NP, Charlene Sondra and presented an overview on Butrans. I left a Butrans pamphlet/FPI and scheduled a lunch with her on Wednesday June 26th @ 12:00 to discuss Butrans further and answer any questions that she may have.
PPLPMDL0020000001	Cleveland	OH	44130	5/29/2013	Quick call- Caught Dr Kansal at the window. Passed back new OxyContin FPI & updated him on changes. Pointed out that OxyContin is still a CII opioid with abuse & addiction potential, so he should be just as cautious as always with it. He said he would read it over & walked back to a patient room.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/29/2013	I made a drop-in visit to speak w/ D.O.N., Debbie Keller to reschedule a meeting to introduce Purdue's NE program. Upon entering the facility, there was construction taking place. I spoke w/ the receptionist who informed me that Debbie Keller was not available and busy with residents performing skin sweeps. I left my BC and will place a phone call to her.
PPLPMDL0020000001	Fairlawn	OH	44333	5/29/2013	I made a drop-in visit to speak w/ D.O.N. Deborah Shafer and introduce Purdue's Nurse Educator Program. I spoke w/ the receptionist who paged the D.O.N.; N/AI left my BC and rec'd Deborah's BC. I will e-mail her to set up an appt.
PPLPMDL0020000001	Cleveland	OH	44113	5/29/2013	Discussed product portfolio, thoughts on managing pain, Dr. iterated along with Dr. Marshall's practice policy of not treating pain. Refers out to Dr. Nickels or Shen. Intermezzo indication and dosing<font color=
PPLPMDL0020000001	Independence	OH	44131	5/29/2013	Quick call- updated Dr Trickett on OxyContin label change. I let her know she can review the FPI at her convenience & gave a copy. I asked that she remain just as cautious in prescribing as always as OxyContin is still a CII opioid medication with abuse/addiction potential. Dr Trickett said she is getting more patients started on Butrans.
PPLPMDL0020000001	Fairlawn	OH	44333	5/29/2013	I made a drop-in visit to speak w/ Michelle Williams in Staff Development to schedule an in-service on Pain Management. I spoke with the receptionist, Helen who tried calling Michelle's office, N/A. I left my BC
PPLPMDL0020000001	Cleveland Hts	OH	44118	5/30/2013	Discussed with Chi' Butrans and Intermezzo. She feels they could be a viable option in practice. Encouraged to talk with Dr about RXing for appropriate patients, She Scheduled me appt.
PPLPMDL0020000001	Fairlawn	OH	44333	5/30/2013	Good discussion about products. I led with insight number 3 and asked her how she communicates with her patients about their pain? Dr said it is difficult to get patients to do what you ask of them. Dr told me she has not used the Butrans patch yet but sad she needs to communicate with her patients about the Butrans option. I explained the patient profiles and discussed the importance of initiating for appropriate patients and how she can select patients. Spoke about starting doses and approximate conversions. Dr said she will give it a try. Talked about copay cards. Gave her the OxyContin update and advised her to read section 9.2. Quick message about intermezzo indication and patient selection.
PPLPMDL0020000001	Stow	OH	44224	5/30/2013	I asked Janet about her recent history with Butrans. Janet said she had initiated Butrans for a male patient and patient complained about dizziness, nausea and constipation. I told Janet I was going to report the AE. Discussed with Janet appropriate patient selection for Butrans and discussed Scott and nancy. I asked Janet if she will continue to look for patients who are on tramadol or vicoden around the clock and still in pain? Janet said she would. Discussed the Caresource PA, private prescription plan coverage and BWC. I discussed the intermezzo indication and dosing and asked her to try it.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/30/2013	Quick message at window about new OxyContin information and FPI update. I advised dr to read section 9.2 and dr said he will read it for sure and that he is happy the Purdue still owns the rights to OxyContin. I asked dr to continue to prescribe and he said he will.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	5/30/2013	Quick second with dr as she came in this morning. I explained the importance of the oars report and the pain contract sample in the pain management kit. Dr told me she appreciates the information. I told her to prescribe more Butrans for her patients on around the clock tramadol who are uncontrolled.
PPLPMDL0020000001	Cleveland	OH	44113	5/30/2013	Discussed with Judy product portfolio. She stated they refer alot of patients to Pain Mgmt for chronic pain. Positioned Butrans as moderate to severe. Booked appt. for Next available (Oct) Intermezzo indication and dosing
PPLPMDL0020000001	Cleveland	OH	44195	5/30/2013	MSL phone meeting with Sharon Kreischer to discuss Dr. Appachi's participation in BUP3031. Dr. Appachi is stepping down as PI, but site team is working with Dr. Spalding, Director of Research, to identify another physician to take over the study.
PPLPMDL0020000001	Cleveland	OH	44195	5/30/2013	Visited JNorth Booked appt with Sabrina S. for Next Wed. also visited Tausing Cancer ctr. M.Davis- Pam(Nurse) and T.Gutgsell, left info
PPLPMDL0020000001	Cleveland Hts	OH	44118	5/30/2013	Discussed product portfolio, Inquired about key prescribers, Sarah-said mainly Caresource/Medicaid. Alot of methadone from palliative/onc.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/30/2013	Went back to see dr about his use of OxyContin. Discussed the Medicare D coverage for Butrans and told him to prescribe OxyContin before another ER opioid for that subset of patients. Explained his need to prescribe Butrans for his patients in pain on IR medicines around the clock and asked dr if he will prescribed intermezzo when and if his patients complain of in the middle of the nit insomnia. Dr said he will keep intermezzo in mind.
PPLPMDL0020000001	Westlake	OH	44145	5/30/2013	Dr was heading into blocks and running late but I briefly explained the Butrans experience kit and he wanted to know more and I booked his next block on June 13. Spoke with Linda and she offered the senakat to go and she said that would be useful. I explained the kit to her and she told me to come at 11:30 to get more time with the doctor
PPLPMDL0020000001	Westlake	OH	44145	5/30/2013	Spoke with Wendy and Jacqui about the changes in the OxyContin FPI. Discussed Intermezzo stocking and no ab equal. I asked who they thought was a Butrans patient and reviewed the maria profile.
PPLPMDL0020000001	Cleveland Heights	OH	44118	5/30/2013	Discussed product portfolio, Inquired about HCP's,
PPLPMDL0020000001	Stow	OH	44224	5/30/2013	Short conversation about Butrans and intermezzo. I explained the Scott and nancy profiles and asked her if they make sense as good candidates for Butrans? Laura said it does make sense and admitted to not using it enough. I asked why she is not using it more? Laura said she wishes she had a good reason but she doesn't. She said its difficult getting a patient to change to a transdermal system and she guesses she needs to discuss it better. I discussed the important things to discuss with the patients and talked about insight #3. Told her about intermezzo indication and managed care coverage since she asked.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/30/2013	Spoke with Glenn about the new OxyContin FPI information. Explained the additions to section 9.2 and asked him if he would be the champion for the physicians at the hospital about this information. Glenn said he would disseminate the information. I asked if he had any question and he said no.
PPLPMDL0020000001	Westlake	OH	44145	5/30/2013	Window call and asked dr about vouchers for butrans 7 day patch for moderate to severe chronic pain. I also inquired about the side effects and the offices need for senakat s. provided senakat s samples
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	5/30/2013	I asked dr if she has patients on Percocet? Dr said she is sure she does. I asked her if she would evaluate her Percocet patients and see if ER oxycodone is appropriate? Dr said sure. I showed her the conversion and titration guide and explained the conversions from Percocet. I told her to prescribe Butrans for her patient on tramadol around the clock and present to her still in pain. Dr said ok.
PPLPMDL0020000001	Fairlawn	OH	44333	5/30/2013	Discussed the new OxyContin information and advised her to read section 9.2. I asked her what her experience is like with OxyContin. Dr said she used to prescribe it all the time until the problems arose with its abuseability and it went generic. I asked her if my presentation on the product made a difference in her outlook now? Dr said it heads made a remarkable difference and said she really would rather give an ER opioid than an IR opioid because of the success rate of the ER. I asked her to evaluate her patients on IR oxycodone to see if they are appropriate for oxycontin? Dr said she would. Discussed all key selling messages for Butrans and discussed appropriate initiation and titration. I asked dr if it makes sense enough to prescribe after I discussed the Scott and nancy profile? Dr said she really likes the option and thatnitris a schedule 3. Dr said she will try it out.
PPLPMDL0020000001	Westlake	OH	44145	5/30/2013	Explained the intermezzo information quickly.
PPLPMDL0020000001	Westlake	OH	44145	5/30/2013	Dr said he has brought back some of his pain patients even though he did not want to but business was so ban that he had to. He said these were the good patients. I said he should consider Butrans which is a schedule 3 and gives him an option after ultram and before Vicodin. He said that sounds like a good strategy and will allow him to not see the drug seeking patients. I asked if he was going to use any OxyContin or would he continue to refer out. He said he found out some of the pain physicians he was referring to did not have good things to say about him to his patients so he will keep his better patients but he is not sure about prescribing OxyContin again. We discussed the opportunity he had to help patients with motna and how Intermezzo fits into his practice. Dr said he will consider these options but right now his patient load is so low that he does not have an opportunity to
PPLPMDL0020000001	Westlake	OH	44145	5/30/2013	Asked dr why he was reluctant to write Butrans since it made sense to me that 4 patches a month of buprenorphine patch. Instead of giving Vicodin or Percocet was a logical thing to do. Dr said Purdue made a mess with OxyContin and its addiction and he does not trust what is being said. I asked him if I review the clinical trials that showed efficacy would he be inclined to write his first script. Dr said that would be fine and I reviewed the inclusion criteria for the opioid naive study and pain reduction scores. Dr said so far he is in agreement and had to see patients. I told him I would continue with our review and I welcome him to question anything that does not make sense to him.<font color=
PPLPMDL0020000001					06/08/2013<b></b><font>It was a very good lunch and I hope to make some headway with the studies.<font color=

	Stow	OH	44224	5/30/2013	Good discussion about Butrans and the types of medicines his patients are on. I asked dr what medicines his patients are on when they present to him in the office or before a procedure? Dr told me that many are on dilaudid, MS Contin, ER morphine, owned/ or many of the IR opioids. I asked dr what his thoughts are to have IR opioids for a chronic condition? Dr said the good things is at most work quite well but its a matter of taking the medicine throughout the day. Dr told me that unfortunately when he gets patients they are on an entire cocktail of opioids. Dr said he strongly believes the need for ER opioids for chronic pain but told me it is very difficult to get a patient to psychologically buy into a patch for their pain. I discussed with dr how Butrans should be presented to a patient and that opioids and non opioid analgesics can be used for breakthrough pain. I asked dr if he has any subset of patients who would like to have a transdermal system? Dr agreed there are some that would like it. I asked dr for that business? Dr said he would use it for those and I told him he should be discussing the option with all patients. Discussed intermezzo indication, dosing, and limitations of use.
PPLPMDL0020000001	Fairlawn	OH	44333	5/30/2013	Explained the new OxyContin information and advised to read section 9.2. I used insight 2 and 3 to open discussion about the practice. Dr told me that he really doesn't like using opioids for long term use but has used OxyContin and doesn't know about Butrans. Inexpensive, aimed all key selling messages for Butrans including both the Scott and nancy profiles along with patch description and proper application. Dr said that he thinks it is a good option to have and is happy to hear it is a schedule 3. I asked dr if he would use a product like Butrans for a patient like Scott? Dr said he will give it a shot. Quick explanation of intermezzo indication, dosing and First interaction with hcp. Discussed Butrans key selling messages and asked about her experience with it? Sandra said that she has used it a number of times but has found it hard to sell a patient who is on multiple medicines to use a transdermal system. Discussed for a while the keys to that discussion with patients and I asked her if she would look into patients who may find or ask for the need of an ER transdermal system? Sandra told me that she has found that female patients that take a transdermal birth control systems are more open to using a product like Butrans. I told her that make a lot of sense and asked her to consider patients like Scott and nancy as well. Intermezzo indication and dosing.
PPLPMDL0020000001	Stow	OH	44224	5/30/2013	Spoke with agree about intermezzo dosing, indication and limitations of use. Greg said he didn't think they would see any but agreed it sounds like a good medicine. Greg said he needed Butrans copy cards because they only have one left. Discussed the Scott profile and asked him if it makes sense? Greg said it does and they continue to see more and more of it.
PPLPMDL0020000001	Mayfield Heights	OH	44124	5/30/2013	Left REMS flashcard, OxyContin FPI, please review updates to section 9.2. Q12 hr dosing is followed. Patients are local. Most of Purdue products written by Hillcrest pain mgmt. She hasn't dispensed Butrans recently, as stocking getting ready to expire. Both doses Intermezzo on shelf, ready to expire. Hasn't dispensed any Intermezzo since product launch. Left Pharmacists guide to Intermezzo & patient guide.
PPLPMDL0020000001	Stow	OH	44224	5/30/2013	Discussed with dr how to identify patients for Butrans. Dr said he agrees with starting Butrans early because the success rate is high. Dr told me that he has had good success with his patients failing vicodin. I asked dr what his goal is when a patient is on two or more medicines for pain? Dr said his goal is to get them to an ER product. I asked how he does that? Dr said he has to have a long discussion about how the need for an ER product is necessary for their condition. Dr said it is the hardest part. Spoke to dr about insight #3 communication. Dr said he agrees that that he will continue looking at discussing Butrans more often. Spoke about intermezzo indication, dosing and limitations of use.
PPLPMDL0020000001	Mogadore	OH	44260	5/31/2013	I asked dr if he will continue identifying patients for Butrans who are on around the clock tramadol? Dr said he will and said he really likes it. Dr told me he needed more copy cards.
PPLPMDL0020000001	Lakewood	OH	44107	5/31/2013	Spoke with Beth about drs Butrans use and asked if the OxyContin confusion was resolved and she said she has not had to write a prior auth since my last visit.
PPLPMDL0020000001	Cleveland	OH	44105	5/31/2013	Quick call Abdul was backed up. No new info. Reminded tech of intermezzo dosing and indication
PPLPMDL0020000001	Hudson	OH	44236	5/31/2013	Gave technician Mary about intermezzo indicate and dosing. Explained the new OxyContin information and FPI updates. Explained the Scott profile and asked her to take the information kits and hand them out when they dispense Butrans. Mary told me that she filled a Butrans a week or two ago and said that patients like it.
PPLPMDL0020000001	Hudson	OH	44236	5/31/2013	Spoke with Beth the pharmacist about the new OxyContin information and FPI updates and intermezzo indication and dosing. Told her about the Scott patient type and asked if they have seen any more? Beth said they have not and find that it does work well from the patients they have on it. Intermezzo indication and dosing.
PPLPMDL0020000001	Lyndhurst	OH	44124	5/31/2013	Using Maria profile to support, suggested Butrans as first opioid for her opioid naive chronic pain patients. She immediately said, I really like Butrans & want to use it, but every time I try to write, it gets denied. I'm really struggling with this she says. I reminded her whe Butrans s preferred. She doesn't have any BWC patients but says I should talk to dr KIM next week, as he as a lot of BWC patients!! I told her I will. oxyContin, please review updates to section 9.2. another option for your chronic pain patients. intermezzo, please keep in mind for your MOTN insomnia patients. Reminded her of Mon July 8 dr Laham program, she says, I will put in my day planner
PPLPMDL0020000001	Cleveland	OH	44109	5/31/2013	Pain/Anes. Sue-Residency Coordinator, Visited Pharmacy(T.Robb) Pharmacy Dir. Jay Kuhn has left. Critical Care Pharm.N. Patel
PPLPMDL0020000001	Lakewood	OH	44107	5/31/2013	Dr was interested I'm talking about Butrans and wanted to know how it worked and why he should use it. I explained that butrans was buprenorphine in a patch and provides 7 days of pain analgesia or 4 patches a month and can be used as an option before he gets to Vicodin or Percocet. Dr asked about managed care and I stated it was covered on commercial plans and workers comp. dr said most of his patients are caresource and I said OxyContin has good coverage and he said it does not. I mentioned that he maybe thinking of workers comp where OxyContin is no longer covered and he said maybe. Discussed intermezzo and let him know that it is covered
PPLPMDL0020000001	Cleveland	OH	44109	5/31/2013	Presented product portfolio with Mana, Discussed Butrans Utilization. Dr. Duncan- Key prescriber. Intermezzo dosing/indication
PPLPMDL0020000001	Hudson	OH	44236	5/31/2013	Discussed his use of Butrans and how he needs to prescribe more based on his previous success. Dr told me that he does try to think about it as much as he can and is just picky with his patient selection. I asked what that was? Dr told me that he knows it needs to be used early in treatment but admitted that he doesn't see too many people fitting into the chronic pain description. I asked him to think of Butrans for patient on tramadol around the clock who are still in pain. I showed him the Scott profile. Dr said he would look into using it more and agreed that he would rather a patient being on an extended release patch instead of a IR opioid. Explained the OxyContin information and advised him to read section 9.2. Dr said he continues to find patients for intermezzo and really likes it and has heard good results from patients.
PPLPMDL0020000001	Mogadore	OH	44260	5/31/2013	Quick message at front desk and asked him to continue searching for patients appropriate for Butrans like the ones who are on tramadol around the clock. Dr said ok and thanked me for the copayment cards.
PPLPMDL0020000001	Akron	OH	44312	5/31/2013	Quick message about Butrans for his patients on around the clock tramadol who are still in pain. I told him that he knows why and where to use it he just needs to prescribe it more frequently. Dr agreed and said he just wants to ensure he is choosing the best patients. I told him that is a good thing and to prescribe for those patients.
PPLPMDL0020000001	Lakewood	OH	44107	5/31/2013	Dr was not aware there was OxyContin 15 and 30 available. I asked if he would consider moving patients to OxyContin sooner now that he knows there is a lower dose available. Dr said yes because he likes OxyContin and I asked him what he liked and he said OxyContin works. Reviewed Butrans titration and asked dr what he used if a patient was not controlled on ultram and he said Vicodin or Percocet but it depends. I asked was there a reason he would not consider a buprenorphine 7 day patch. He asked how to titrate and I showed the titration guide. I reviewed intermezzo and told him the managed care plans that worked best. Dr said he would keep in mind. I asked if he would screen for excessive sleepiness and he agreed.
PPLPMDL0020000001	Hudson	OH	44236	5/31/2013	Quick message over lunch while in with Unity about him looking into prescribing the q12h oxycodone instead of Percocet for long term pain analgesia. Dr agreed and said he tries as much as he can. Mentioned Butrans early on in treatment for patients on tramadol around the clock. Gave him an initiation and titration guide.
PPLPMDL0020000001	Cleveland	OH	44113	5/31/2013	Quick discussion on Butrans, Dr was at Nursing Home . left Initiation/Titration guide
PPLPMDL0020000001	Akron	OH	44312	5/31/2013	I told dr that I wanted him to prescribe OxyContin for patients not meeting their appropriate level of analgesia with Percocet. I handed him the conversion and titration scale. Dr said ok. I asked him if he selected any patients for Butrans and he said no. I gave him a initiation and titration guide and to put the slide conversion scale in his lab coat.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/31/2013	Short message in the hallway. I told dr the new information about oxycontin and asked him to read section 9.2. I told dr to evaluate his patients on Percocet and ask if the patient is appropriate for the q12h oxycodone? Dr agreed and thanked me for the updates.
PPLPMDL0020000001	Highland Heights	OH	44143	5/31/2013	Left REMS flashcard for pharmacist. No intermezzo dispensed, none on shelf. Left pharmacists guide to intermezzo & one patient guide. went over key messages, highway drive study. She asked about coupons, I told her to direct any new customers to intermezzo.com to print out savings. Reviewed how Caresource PA works for intermezzo. OxyContin, have just a few patients on, q12 or q 8 dosing, confirmed with her that our recommended dosing is q12 hr. Butrans, no customers on, none on shelf. CIII option, 1 x week transdermal patch.
PPLPMDL0020000001	Akron	OH	44312	5/31/2013	Dr told me she had some questions for me that a patient of hers on Butrans had. Dr asked if it is ok to shower with the Butrans patch on? I told her it is acceptable to shower with the Butrans system. Dr asked what happens if the edges peel off. I told her that in the FPI it is recommended to use first aid tape on the corners or tagaderm. I asked dr if her patient is have problems with Butrans? Dr said no but had questions as she is going it of the state. I told dr to provide the patient and all others with the information guide which will answer many of the questions. I asked dr if she will continue prescribing Butrans for the patient types we have discussed? Dr agreed. I gave her the dosing and indication information for OxyContin and intermezzo.
PPLPMDL0020000001	Cleveland	OH	44143	5/31/2013	Presented Two intermezzo patients vignettes, Lisa who was NOT appropriate for intermezzo, & Robert age 46 who WAS & dr Mandel chose appropriate dose of 3.5 mg for healthy male, I plunder age 65. I asked what % of his patients does he believe to be suffering from MOTN insomnia. He admitted he should be asking patients the 3 questions within our patient education brochures more often, to actually determine MOTN vs sleep onset. He says he will do a better job. Met with ma Angela who has worked with him for 13 yrs. She will make sure to ask patients moving forward. Told them to concentrate on PA with Caresource. dr Mandel did not want to discuss Butrans or OxyContin, and says, scheduled drugs are not part of our office landscape. I did leave two OxyContin FPI s and asked him to review updates to section 9.2.
PPLPMDL0020000001	Richmond Heights	OH	44143	5/31/2013	Dr Moufawad, for opioid naive patients, such as Maria, who has no known history of alcohol or substance abuse, and no history of psychiatric illness, and has been taking ibuprofen for her chronic pain, which is not currently controlling her pain, ( 7 on an 11 point scale), please consider initiating 5 mcg hr of Butrans as the first opioid, for patients like Maria, dr does this sound reasonable? He replied yes. OxyContin, please review section 9.2 for updates. I dont want to read, I'd rather have you tell me the updates, " i n nutshell" as I'm not going to read!!! dr Moufawad, I am not permitted to speak about the studies, but I can submit any questions you have to Purdue in the future. Intermezzo, please ask your patients 3 quick questions, contained in this patient brochure, do determine if they are suffering from MOTN insomnia. also, please concentrate on your Caresource patients, I will communicate this information to Tiffany as well, ( Tiffany travels with him to all his locations) he asked me to leave savings cards, I told him to direct patients to intermezzo.com to print out. He had several patients waiting & had to get into a room,
PPLPMDL0020000001	Stow	OH	44224	5/31/2013	Discussed all key selling messages about Butrans and asked him for more support with his ability to identify the patients appropriate for it. I discussed the tot and nancy profile and asked for more business. Dr said he will do that and has had good success. Explained the new OxyContin information and advised him to read section 9.2. I asked dr to evaluate his patients on Percocet and to put them on ER oxycodone if they have been on IR oxycodone for 3+ months. Intermezzo dosing and indication. Dr said he has used it up with good success but found patients need to fail zolpidem first.
PPLPMDL0020000001	Hudson	OH	44236	5/31/2013	Conducted the intermezzo inservice and asked him to prescribe. Dr said it is a cool way to gain interaction and he said he learned something. Explained the new OxyContin information and advised him to read section 9.2. I asked him if he had any questions and he did not. I asked dr to evaluate his Percocet patients to see if they would be appropriate for the q12h oxycodone. Dr said he would. I asked dr if he was going to prescribe Butrans? Dr said he would and knows he should. I explained the Scott profile and asked him to identify patients who are on around the clock tramadol and still in pain. Dr said he would use it more.
PPLPMDL0020000001	Akron	OH	44313	6/3/2013	Discussed intermezzo with Keith the pharmacist. Keith said he has dispensed one prescription and the patient did need to fail Ambien which the patient did previously. Explained the new OxyContin information and advised him to read section 9.2. I asked about Butrans fills and discussed dosing and conversions. Keith said he has a few patients on it and come back each month to get refills. I told Keith since its a schedule 3, the initial prescription can have refills on it.
PPLPMDL0020000001	akron	OH	44333	6/3/2013	Do some to doctor about all products and during discussion dr Bashor said he recently initiated a patient on Butrans in a nursing home whoever he had to discontinue it due the product costing the patient too much money. I asked about the plan information and he told me he thinks it was a Buckeye plan who he said allowed the first month for about \$20 then after would not pay for it. Dr Bashor said he then p.aced the patient on fentanyl. I asked for more activity for Butrans in the tramadol patient who is not adequately controlled. Dr agreed to continue looking. Updated dr on the OxyContin information and advised him to read section 9.2. Dr said he wanted copy cards since he still has patients on it and will look at his Percocet patients for switches. Reminded him of the intermezzo patients and how to identify them.
PPLPMDL0020000001	Akron	OH	44333	6/3/2013	I e-mailed Ramona Watson a list of in-service topics per her request.

PPLPMDL0020000001	Cleveland	OH	44106	6/3/2013	Discussed OxyContin and utilization within hospital depts. REMS program and Purdue resources for patients. (Ron C)-admin is Shirley) Carl
PPLPMDL0020000001	Parma	OH	44134	6/3/2013	I sent an e-mail to Linda Belford, requesting to reschedule the Butrans' luncheon w/ the NP's.
PPLPMDL0020000001	Mayfield Village	OH	44143	6/3/2013	Left pharmacist Joan ( Mon & Fri) only, REMS flashcard, Pharmacists guide to Intermezzo. Asked her to review updates to OxyContin FPI section 9.2. She made it very clear that she does not stock OxyContin, nor will she order. Her patients are over age 65 & do not use OxyContin. I then presented Intermezzo, which they don't have in stock either. Reviewed indication, key points, left one patient guide. Butrans presented as CII option for moderate to severe chronic pain, 1 x week transdermal patch, 7 days buprenorphine release.
	Cleveland	OH	44124	6/3/2013	Dr C not available. office didn't need anything in the way of savings cards. Spoke with office staff, left REMS flashcard. Left invite for Laham July 8 th program. Reviewed Butrans indication & pain option for patients with moderate to severe chronic pain, and option for opioid naive patients.<font color=blue><b>CHUDAKOB's query on 06/19/2013</b></font>Who is the "office staff" You will want to be more specific in your notes. For example, Spoke with Jane, the MA or talked with Sue, the nurse." Office staff is a pretty generic term.<font color=green><b>BALLIE's response on 06/19/2013</b></font>Will be more specific with future call notes on this office.<font color=blue><b>CHUDAKOB added notes on 06/20/2013</b></font>Thank you!
PPLPMDL0020000001	Cleveland	OH	44119	6/3/2013	I placed a call to the ADM., Nancy Sugarman to introduce myself and Purdue's Nurse Educator Program. She was in a meeting, I left a msg. on her voice-mail.
PPLPMDL0020000001	Parma Heights	OH	44130	6/3/2013	I placed a phone call to D.O.N., Katherine Myers to schedule a meeting to introduce Purdue's Nurse Educator program. N/A I left a msg. on her voice-mail.
PPLPMDL0020000001	Chagrin Falls	OH	44022	6/3/2013	I placed a phone call to D.O.N., BeAnne Clipper, I spoke to the operator, she did not answer her page. I was informed that she does not have voice-mail and was advised to e-mail her at beannec@hamletretirement.coml sent her an e-mail requesting an appt. to meet w/ her to introduce Purdue's NE program.
PPLPMDL0020000001	Fairlawn	OH	44333	6/3/2013	I e-mailed D.O.N., Deborah Shafer @ dshafer@orchardsoffidgewood.com requesting an appt. to introduce Purdue's Nurse Educator Program.
PPLPMDL0020000001	Cleveland	OH	44104	6/3/2013	Quick call thru window, Dr. said he is not prescribing OxyContin, but does use some Butrans, thanked for his support and will follow up at lunch on the 14th. Invited to upcoming program
PPLPMDL0020000001	Akron	OH	44333	6/3/2013	Handed tr the nancy profile and told him that patients like her on vicoden a prime candidates for Butrans if they meet the indication. Dr agreed and said he has many on Butrans from vicoden. I asked dr if he would evaluate each patient on vicoden that comes in for a follow up for a possible Butrans initiation? Dr said he does and will continue. I told him and his staff formulary reminders with Caresource ,BWC, and Medco.
PPLPMDL0020000001	Cleveland	OH	44104	6/3/2013	Talked with Hakeem, no Butrans being filled in this location (majority Caresource), does see OxyContin. Uses OxyContin Savings cards at all three pharmacies.
PPLPMDL0020000001	Cleveland	OH	44106	6/3/2013	Visited Pain/Anes. Terra was in meetings left info and message, Visited Seidman/Cancer ctr. left product info for Oncologist Dowlati/Campagnaro. Spoke with Margie in Bolwell inquired about Purdue resources (Ron C.
PPLPMDL0020000001	Tallmadge	OH	44278	6/3/2013	Inquired about patient info booklets/pamphlets
					Reviewed the Butrans patient profile, dosing, appropriate starting dose, titration, and application sites. I asked dr if it makes sense to initiate Butrans for a patient who presents in pain while on around the clock tramadol instead of initiating vicoden? Dr agreed and said he wishes he could initiate a patient on all his pain patients that have moderate to severe pain. I asked why he doesn't just get that done? Dr said cost, patient skepticism, patch difficulties etc....discussed all those patients and reviewed the AE's from the opioid experienced trial. Dr said he will try it and wanted to know insurance coverage. Explained the formulary coverage. I asked if it also makes sense to provide a patient q12h OxyContin where appropriate for his patients on IR oxycodone? Dr said he knows he should do that and agreed he would. Intermezzo dosing and indication.
PPLPMDL0020000001	Lyndhurst	OH	44124	6/3/2013	Left REMS flashcard, Pharmacists guide to Intermezzo. Met with both Adrienne pharmacy mgr & pharmacist Steve, as they were doing a shift change. Adrienne there in am til 2:30, Steve evenings. No changes in Intermezzo utilization, none on shelf. Reviewed PRN MOTN indication, left one patient guide. Asked them to review OxyContin updates to Section 9.2. reminder q12 hr. dosing recommended, can titrate up or down in one to 2 days, based on steady state. No changes in Butrans utilization, let them know Butrans is CII 1 x week transdermal patch option for chronic pain patients. Left one patient guide.
PPLPMDL0020000001	Tallmadge	OH	44278	6/3/2013	Discussed Butrans patient types, dosing, titration, and mechanism of action. Dr said he understands how it works and asked about patch applications and skin preparation. Discussed from FPI about hat topic. I asked dr if he will find a patient who is on an IR opioid that presents in pain? Dr said he will. Explained the OxyContin information and advised him to read the FPI. Intermezzo dosing and indication. I asked him to think of some patients who meet the indication.
PPLPMDL0020000001	Mayfield Hts	OH	44124	6/3/2013	Suggested forms from our pain management kit to help with communication & follow up with patients. Let him know they are being updated currently, & I will update him on any major changes. He is interested & wants to review what we have available in near future. OxyContin, revised START principles, titration & dosing, then, Let him know I spoke with PA Sarah J, & she stated he sees a lot of BWC patients, & BWC will pay for Butrans. He asked me to go over dosing with him, which I did, & utilized Butrans decision tree piece. He says he will use in future for BWC patients, when appropriate. Told him about Dr Laham July 8 program, & he will be in San Diego training for leaker opportunity. He's also speaking for A Jansen diabetic product, & just returned from weekend speaker training session in Texas. He does like CII transdermal option, just needs reminding. Intermezzo reminder, MOTN insomnia, gender dosing.
PPLPMDL0020000001	Akron	OH	44312	6/3/2013	I asked dr if he regularly uses the OxyContin and Butrans copay cards? Dr he does and the nurse or ma typically gives them to the patient. I reviewed the card for Butrans and the cards for Butrans and asked for him to continue using each. Dr said he needs more OxyContin cards. Gave him the Butrans initiation and titration guide and Intermezzo pamphlet.
PPLPMDL0020000001	University Heights	OH	44121	6/3/2013	Reminded him of our conversation at last lunch. Reminded him there's an update to OxyContin in section 9.2 & please review. Reviewed START principles, dosing & steady state. Dr Price, have you considered Butrans as option for pain management when OxyContin not appropriate? He says he Santa thought about. Well, I will continue to remind you of this option. Dr Price we also discussed Intermezzo, an agent for your MOTN insomnia patients. PRN, sublingual, gender specific dosing, medical assistants put both Intermezzo patient brochures & guides in waiting room.<font color=blue><b>CHUDAKOB's query on 06/19/2013</b></font>Jenny, if you already discussed the changes to the FPI, no need to do it again. What did you teach him so he can think of Butrans as that option. Did you discuss efficacy, or patient types, dosing or titration. These are the specifics that will help sell Butrans. What do you think?<font color=green><b>BALLIE's response on 06/19/2013</b></font>After reading over this call note, I concur this is a poor call note. I believe I used Nancy profile. I also discussed ability to titrate after 72 hrs. Also supplemental analgesia can be used, either IR opioid or non opioid such as ibuprofen.<font color=blue><b>CHUDAKOB added notes on 06/20/2013</b></font>Ok. thanks for the clarification. I know
PPLPMDL0020000001	Tallmadge	OH	44278	6/3/2013	Short discussion with valarie about each product. Gave Butrans indication, dosing, titration and patient type selection. Valarie said she knows about it but has not used. I asked her if th Scott profil makes sense? She said yes and that she will look at using it because she said she thinks it's a good product. Provided her the OxyContin information, dosing and FPI updates. I asked her to take a closer look at her IR oxycodone patients to see if they are appropriate for the q12h Oxycodone? Valarie said yes. Explained intermezzo indication, dosing and limitations of use.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	6/3/2013	Called to speak w/ Staff Development Coord., Nancy Strauss 330-945-9797, to schedule educational in-service for nursing staff. N/A, Left Msg on her voice-mail.
PPLPMDL0020000001	Richmond Heights	OH	44143	6/3/2013	Called to speak w/ Aldona Burt to schedule in-service on Constipation. I spoke w/ receptionist, Darlene who informed me that Aldona was not in today. I was informed that Aldona no longer has voice-mail. I left a msg. w/ the receptionist . F
PPLPMDL0020000001	Lyndhurst	OH	44124	6/3/2013	Followed up on call from last Friday May 31. Reviewed Maria profile. For patients first opioid, please consider Butrans 5 mcg hr. She confirmed as she did last week, she wants to use Butrans, but so far, her patients prescription coverage has not approved Butrans. Lets focus on Caresource, Aetna, Med Mutual, Medco, Express Scripts, and any new BWC patients. Does tht sound reasonable ? Sarah replied yes. Sarah, although you ve told me you're not comfortable writing OxyContin, & you've also stated today, that you don't like writing Percoset, should you have a future patient, whose pain is on more severe side, please consider q 12 OxyContin dosing, 2 pills. Day, vs potentially 3 or 4 or more pills daily. Reviewed START principles, half life, Black Box warning, etc. Intermezzo, we discussed last week, for your Caresource patients, who fail on one other Zolpidem product. She will consider.<font color=blue><b>CHUDAKOB's query on 06/19/2013</b></font>Jenny, This is a quote form your call notes."2 pills. Day, vs potentially 3 or 4 or more pills daily." Can you please clarify what you mean by making this comparison of pills?<font color=green><b>BALLIE's response on 06/19/2013</b></font>This is typo & incorrect sentence. It should just say, OxyContin q 12 h dosing, or 2 pills daily.<font color=blue><b>CHUDAKOB added notes on 06/20/2013</b></font>OK. Please be careful what you type in your call notes by reviewing them before submitting. As you are aware, we cannot make any comparisons to other products in any way as we do not have clinical data to support those comparisons. The term versus (vs) implies comparison. Thanks for the clarification.
PPLPMDL0020000001	Fairlawn	OH	44333	6/3/2013	Did not get the chance to provide update to OxyContin FPI however showed dr the Bup 3015 and asked him if he believes Butrans works? Dr said he did and said if he didn't he wouldn't use it. I asked him to read the trial which may help open up additional subsets of new candidates. Left hm the dosing information for OxyContin and intermezzo.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/3/2013	Called to speak w/ D.O.N., Debbie Keller, N/A, Left msg on her voice-mail.
PPLPMDL0020000001	Cleveland	OH	44124	6/3/2013	Lunch today with Isakov group, which dr p is part of. Referenced both Butrans & OxyContin as options for pain management. dr P still uncomfortable with CII & CIII products. She is comfortable & interested in discussing Intermezzo for her MOTN insomnia patients. For now, please concentrate on Caresource patients with Intermezzo. Asked about coupons, I don't have any, but patients can visit Intermezzo.com to print savings. Left dosing flashcard for dr & Amy as reminder. Invited dr to dr Laham July 8 program, a few others from practice are attending. She gave me a maybe, but didn't seem real positive about attending.<font color=blue><b>CHUDAKOB's query on 06/19/2013</b></font>Did you ask her what makes her uncomfortable and what she does with patient that gave me a CII opioid analgesic for pain control?<font color=green><b>BALLIE's response on 06/19/2013</b></font>That won't hurt to just ask her that question, I will be more direct with her next call, and take your suggestion above, with 2- part powerful questions.<font color=blue><b>CHUDAKOB added notes on 06/20/2013</b></font>Be curious on your calls. Don't take what they say at face value. It is many times the next question that gets the physician thinking and can create the constructive tension to move the sales forward.
PPLPMDL0020000001	Tallmadge	OH	44278	6/3/2013	Good discussion about the managed care insight. Dr told me that its too bad that he has to be dictated by insurance as to what he can prescribe for his patients. I asked how his insurance coverage if his patients are and if he has Medicare D plans? Dr said he has just about all plans n some way but has many Medicare D plans and various private plans. I discussed how Purdue products with OxyContin and Butrans have coverage that will hopefully lessen his frustration. I discussed Butrans Bup 3015 and provided full review. Dr asked about buprenorphine for pain vs addiction. I discussed the difference and focused on Butrans as the single entity opioid and used main visad to visually its action at the Mu. Showed patient profiles and asked him if it makes sense enough to initiate? Dr said he will and that he s not accepting new chronic pain patients but will look at it for his existing patients. Dr said he likes using fentanyl and asked about the difference. I explained how there are no head to head studies and focused on where Butrans should be placed in the algorithm. Dr said he understands and said it looks like he will use it for more of his moderate pain patients. Explained how he needs to evaluate his IR oxycodone patients for OxyContin and further explained his identification of intermezzo patients with use of
PPLPMDL0020000001	Cleveland	OH	44112	6/4/2013	Discussed product portfolio, Dr. stated her challenges in treating pain, positioned Scott profile, dosing and titration. Intermezzo indication and dosing
PPLPMDL0020000001	Cleveland	OH	44113	6/4/2013	Discussed Butrans and formulary coverage. Addressed prescribing issues. Positioned For appropriate patients
PPLPMDL0020000001	Akron	OH	44310	6/4/2013	Followed up with dr and Char about the initiations of Butrans recently of patients on hydrocodone and Tylenol as the breakthrough. Dr said one patient on hydrocodone initiated on Butrans is doing really well and have since moved the patient to 10mcg. Dr said the other patient started was a Percocet patient. Dr said he initiated on 5then moved to 10mcg and have since discontinued because the patient didn't want a patch. I asked dr why he discontinued? Dr said patient was not using it and he couldn't convince the patient to give it a better chance. I told dr to provide patients with the information guides. Asked dr to identify patients with in e middle of the night insomnia.
PPLPMDL0020000001	Stow	OH	44224	6/4/2013	Discussed with dr the new FPI additions and information about OxyContin. I asked dr if she would evaluate her patients on IR oxycodone and see if they would be appropriate for the ER oxycodone. Especially is the patient had been on IR oxycodone for 3+ months? Dr said it makes sense and admitted that its easier to just write the refill. Dr agreed to look into it. Provided reminder about initiating Butrans for patients on tramadol around the clock and are still in pain.
PPLPMDL0020000001	Cleveland	OH	44113	6/4/2013	Discussed product portfolio. Key area prescribers
PPLPMDL0020000001	East Cleveland	OH	44112	6/4/2013	Talked with LaToya obtained some key prescriber info. She stated that Brain(PA) calls for info

	Mayfield Heights	OH	44124	6/4/2013	Found out that office des not want reps just stopping in with samples, savings cards or literature. dr Stern practices within the Landerbrook Seidman Cancer Center. I need to schedule all visits & appointments with Fanice Maxwell. She prefers email communication, but I told her I am restricted from emailing customers, & product mentions, but I can use email for scheduling purposes. She will ask dr Stern if he will meet with me & if he needs any of our company resources. Sent her follow up email, awaiting her response. (center open 7 a to 4:30 Mon- Fri)
PPLPMDL0020000001	Cleveland	OH	44113	6/4/2013	Talked with Deb, discussed upcoming programs. Addressed Prior authorization issues, uncovered Solution with Melissa, asked if she would relay the information to Deb.
PPLPMDL0020000001	Cleveland	OH	44114	6/4/2013	Discussed Butrans and utilization
PPLPMDL0020000001	Euclid	OH	44119	6/4/2013	Spoke with tech to update all pharmacy info. They are still open 24 hrs. OxyContin, please remember our recommended q12 hr dosing, please review section 9.2 of OxyContin FPI which has been updated. No recent Butrans or Intermezzo utilization. Butrans is CII option for chronic pain, 4 transdermal patches per month. Intermezzo MOTN, prn, Caresource with PA. Direct customers to Intermezzo.com to print out savings. (staff rotates hours day/night weekly, so no set schedule for pharmacy manager) 4 pharmacists, including mgr Evan.
PPLPMDL0020000001	Euclid	OH	44117	6/4/2013	Dr Morley too busy to come up front. Left him Butrans Laham invite for Mon July 8, but his hours on Monday are normally 1 pm to 7 pm, so slim chance he can make it! Let staff know about Intermezzo Caresource PA with failure of just one other Zolpidem product. Left dr Intermezzo FPI & highway drive study.
PPLPMDL0020000001	Richmond Hts	OH	44143	6/5/2013	Found out that his wife Roxana has started there on Friday afternoons, and will be there 2 to 3 days after June 26, when DR KATHRYN TAWNEY RETIRES/MOVES TO INDIANA. Reminded Dr of our conversation at last lunch, and how I'd like him to get some clinical experience with Butrans, and at next lunch, I'd like to discuss Butrans Clinical trials and efficacy data. For OxyContin, left conversion/titration guide, q 12 hr dosing/2 tablets daily. For those patients failing on IR opioids, consider OxyContin, which he will consider, he says. For Intermezzo, left FPI, safety/highway drive study. Focus on Caresource patients for Intermezzo. Spoke with his ma, let her know Butrans is covered on Medco Medicare Part D ESI plan now. And Intermezzo, focus on Caresource patients. Scheduled a few lunches with practice in next 6 months. Scheduled on Fridays, when Dr Roxana and Dr. Gabriel, and Dr. Vilinsky Discussed with Dr. his patients that are continuing on opioid therapy or pain is not adequately controlled with current therapy. Dr. said he tends to challenge his patients, feels also he has to sell/convince patients to try Butrans. we positioned Butrans for the Tramadol failures and Workers Comp. patients for most success Patient Savings Card
PPLPMDL0020000001	Cleveland	OH	44109	6/5/2013	Fully discussed all products in depth. Taked about all key selling messages for Butrans including Bup 3015and patient profiles. Dr said she likes it and will continue to look for appropriate patients. Explained the OxyContin FPI update and asked her to read it. Intermezzo indication and dosing guide.
PPLPMDL0020000001	Stow	OH	44224	6/5/2013	Had meeting with Sabrina Spikes (Program Coordinator) discussed Virtual Sample Voucher/Copay Savings Card Guidelines She Submitted Product portfolio to pharmacy for approval to proceed.
PPLPMDL0020000001	Cleveland	OH	44195	6/5/2013	I discussed with dr the Bup 3015 trial and asked her if she feels comfortable enough with Butrans now to prescribe it more often than she is now? Dr said she continues to think about Butrans when she sees a patient on a short acting opioid but said not all patients fit the bill. Dr said she had found that the tramadol and vicoden patients are good for it. I asked her to think of the opioid naive patient who has a chronic condition. Dr said she will and it makes sense. Dr said cost is a factor as well but she has an open mind. Explained OxyContin FPI update again and asked her to consider switching patients on IR oxycodone to OxyContin who are uncontrolled. Dr agreed and said she will do that because its easy. Gave dr the Intermezzo FPI and dosing guide.
PPLPMDL0020000001	Stow	OH	44224	6/5/2013	Discussed the patient profile Scott and nancy. I asked dr if she will use Butrans in those instances? Dr said she will try to use it more often. Explained the OxyContin new FPI information and advised her to read section 9.2. Gave her the indication and doses of Intermezzo and asked her to identify patients.
PPLPMDL0020000001	Stow	OH	44224	6/5/2013	Explained all products and asked dr Barr if she will use Butrans for a patient like Scott? Dr said she tried it once for a vicoden patient and he's doing well. Dr said the patient has chronic low back pain. I asked dr why she has only used it once if she had success the first time? Dr said she doesn't know but said she doesn't have many pain patients. Discussed OxyContin FPI update and asked her to use it for her patients failing IR oxycodone. Intermezzo indication and dosing information.
PPLPMDL0020000001	Lakewood	OH	44107	6/5/2013	dr let me know that he is having some problems with Oxycontin approval and i verifies with mary that BCBS Anthem Access required the patient to fail MSContin and then morphine before they could get OxyContin. I told the dr I would let our managed care people know and find out if this is an error. Showed Butrans conversion and titration piece and discussed initiating therapy for patients that have not gotten to vicodin or percocet
PPLPMDL0020000001	Mayfield Hts	OH	44124	6/5/2013	He will forward my invite to July 8th program to with Gina Savoca CNP, and let me know if she wants me to sign her up to save her time. Butrans update on Medco Medicare Part D, which Dr. will keep in mind. OxyContin, Left FPI, asked Dr to review updates to section 9.2, which he will. Also left him conversion/titration guide, and we reviewed the START principles for OxyContin together, which he says he likes, and will follow moving forward.
PPLPMDL0020000001	Lyndhurst	OH	44124	6/5/2013	Intermezzo, reviewed safety/highway drive study. Told him to focus on Caresource PA with Intermezzo, which he responded he will.
PPLPMDL0020000001	Stow	OH	44224	6/5/2013	Asked to see Dr. Reed, she was unable to come up front. Spoke with nursing. Left OxyContin FPI, asked them to review, and pass along to Dr., for updates to section 9.2. Also left OxyContin conversion/titration guide, and went over START principles. For Butrans, Reviewed Medco Medicare Part D update for Butrans. Left dr invite for July 8 program. For Intermezzo, left FPI & safety/highway drive study, and reviewed with girls. Also requested they focus on Caresource patients for Intermezzo. Left one pack Intermezzo patient guides, and one box Slow Mag.
PPLPMDL0020000001	Lyndhurst	OH	44124	6/5/2013	I explained OxyContin indicatin, dosing conversion and titration guide as well as the patient profiles with Sam and Tom. I asked dr when he uses it shy he uses it? Dr said he doesn't use it much and is mostly refilling. I asked dr if he has IR oxycodone patients around the clocks. Dr said only a few and tries not to get involved with chronic pain management. Dr said he refers to Narouze and others at western reserve pain. I asked dr to switch his IR oxycodone to OxyContin. Quick hit on Butrans patient types and dosing along with same from Intermezzo.
PPLPMDL0020000001	Lyndhurst	OH	44124	6/5/2013	Asked to see Karen, she couldn't come up front either. Reviewed same information with nursing, as I did for Dr. Reed. Lead with Butrans, Medco Part D coverage. For OxyContin, left FPI, asked them to review section 9.2 updates, and request Karen look at as well. Left conversion/titration guide. For Intermezzo, left FPI & safety/highway drive study. Left one pack patient guides, one box Slow Mag.
PPLPMDL0020000001	Lyndhurst	OH	44124	6/5/2013	Dr Tawney is retiring as of June 26, and moving to Indiana. Reviewed Butrans as CII option. She liked the idea of transdermal system, as patients wouldn't have to worry about waking up to take an oral pill in middle of the night, she says. I stated patients wear 1 patch per week, which offers them 7 days of buprenorphine release, and 5, 10, 20 mcg hr dosing, with ability to titrate after 72 hours, which is product steady state. I then asked her to review OxyContin FPI for updates to section 9.2, and reviewed START principles for OxyContin. For Intermezzo, went over indication & gender dosing. Left for her review, dosing flashcard & safety/drive study.
PPLPMDL0020000001	Akron	OH	44320	6/5/2013	Quick message about her identifying the tramadol patient who is uncontrolled. I asked her to continue prescribing especially since she has had good success with the other patients. I reviewed OxyContin dosing and asked her to evaluate her IR oxycodone patients for potential q12h oxycodone. Intermezzo dosing and indication message
PPLPMDL0020000001	Akron	OH	44313	6/5/2013	Quick hit at window with Dr and Tina the ma. I told dr to evaluate his IR oxycodone patients who are on it around the clock for at least three months and asked him to see if the q12h oxycodone would be more appropriate? Dr said ok. I handed him the Scott profile and asked him if he felt comfortable prescribing Butrans for that patient? Dr said it makes sense. Nothing else learned. I asked him to prescribe Intermezzo for his patients with in the middle of tonight insomnia.
PPLPMDL0020000001	Cleveland	OH	44103	6/5/2013	Abdul on vacation, Talked with HooShang filling in, Pharmacist told me a RX from DR. Harris 80mg OxyContin, Most patients not commercially insured will use when appropriate. Proceeded to tell tell me about West Shore Rx organization and website WSRx.org
PPLPMDL0020000001	Akron	OH	44320	6/5/2013	Updated dr dupstadt a tut the OxyContin FPI additions and asked her if she would evaluate her IR oxycodone patients and see if they would be appropriate for the q12h oxycodone? Dr said she wishes she could and said her patients would benefit more on the ER oxycodone. Dr said the problem is that patients don't want to be known as a person who is on oxycodone. I told her to tell the patients the molecule is the same with Percocet and OxyContin. I told her she needs to educate her patients to the facts. Dr agreed and said she will do that. I told dr to continue to identify patients for Butrans and explained the Scott profile. Intermezzo dosing and patient identification.
PPLPMDL0020000001	Lyndhurst	OH	44121	6/5/2013	Left REMS flashcard. left Laham July 8 th invite. They like Flemings & at least one of the pharmacists will try & attend. Spoke with pharmacy mgr mike & staff pharmacist Akta Patel. Asked them to review section 9.2 of OxyContin FPI for updates. Let them know our recommended dosing is q12 hr, two tablets daily. Too busy to check any stocking. Intermezzo, no changes in utilization since my last visit. Left one patient kind. Went through indication proper application disposal in patch disposal unit. No recent Butrans scripts. oxyContin only consistent opioid filled there.
PPLPMDL0020000001	Stow	OH	44224	6/5/2013	Good discussion about OxyContin and his use of it. I discussed the new FPI update and asked him what he is doing currently for patients on IR oxycodone who have been on it for 3+ months? Dr said he is doing a lot of referring because he doesn't always want to be treating chronic pain. him to simply move them to q12h oxycodone. Dr agreed he can do that. Discussed all Butrans key selling messages and asked him if it makes sense for a patient like Scott? Dr agreed and said that he could see it.m dr asked if it can be used for post operative pain? I read the section in the FPI under limitations of use. Dr thanked me for the information.
PPLPMDL0020000001	Akron	OH	44312	6/5/2013	I discussed with dr the OxyContin FPI and advised him to read section 9.2. Dr said he was really glad things worked out for OxyContin. I asked him about thinking of the patients he has on the IR oxycodone and switching them to q12h oxycodone if they are not controlled or ask for something else. Dr said he knows he should be doing that and will do it. Reminded him of Butrans for his uncontrolled tramadol patients and Intermezzo for in the middle of the night insomnia.
PPLPMDL0020000001	Westlake	OH	44145	6/6/2013	asked dr about his patient load and he said it was very low and there were only a handful of patients in today. dr said he has brought back some of his pain patients. I reviewed OxyContin dosing. Reviewed Butrans strengths. discussed Intermezzo dosing and administration.
PPLPMDL0020000001	Cleveland	OH	44195	6/6/2013	MSL interaction with Sharon Kreischer during PREP forum, discussed study updates, patient population, and pre-screening.
PPLPMDL0020000001	Cleveland Hts	OH	44118	6/6/2013	Quick product discussion.S. Mistry RX mgr on vacation. Julie filling in.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	6/6/2013	Showed dr the Tom profile for OxyContin and explained it. I asked dr if she will take a patient like Tom and put them on oxycontin? Dr said she would and said she uses it. Nothing else learned.
PPLPMDL0020000001	Westlake	OH	44145	6/6/2013	quick window call reminding dr of our lunch discussion and told him i wanted to give him the butrans experienced patient study so he can review before our upcoming lunch. asked him to look at the hydrocodone inclusion data. reminded him of OxyContin flexible dosing.
PPLPMDL0020000001	Cleveland Hts	OH	44118	6/6/2013	Brief introduction of product portfolio.
PPLPMDL0020000001	Valley View	OH	44125	6/6/2013	Met with VP of Pharmacy Operations (Aaron Link) discussed utilization.Facility services at home/small dialysis ctrs , no nursing homes. Offered resources, Patient booklets etc
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	6/6/2013	Spoke to Jim the pharmacist about Intermezzo indication and dosing. Jim said they have dispensed one but that's it. I discussed specific dosing for gender. Discussed new OxyContin FPI update and advised him to read section 9.2. I asked Jim if he sees new prescriptions for OxyContin and what the doses have been? Jim said he sees new prescriptions and has noticed that patients are starting on either the 10 or 15mg doses. Discussed Butrans profile Scott and approximate conversions. Jim said they have a few patients on it.
PPLPMDL0020000001	Akron	OH	44312	6/6/2013	Message at window about Butrans patient types. I asked dr if he has initiated Butrans for patients on around the clock tramadol? Dr said h thinks so. I showed him e Scott profile and asked him to initiate Butrans for those patient still in pain instead of moving them to another IR opioid. Dr thanked me for the reminder. I asked him if he will continue to prescribe? Dr said yes.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	6/6/2013	Discussed Intermezzo indication and asked Pam the pharmacist about dispensing. Pam said they have both doses in stock but have not dispensed any. New OxyContin FPI update and advised her to read section 9.2. Explained Butrans profile of Scott and approximate conversions and starting doses.
PPLPMDL0020000001	Solon	OH	44139	6/6/2013	I placed a phone call to Judith Sawtner to confirm in-services on 6/7. N/A. I left a msg. on her voice-mail.At 5:30PM, I rec'd a return phone call from D.O.N., Judith Sawtner stating, that she need to cancel the in-services scheduled for tomorrow 6/7. Judith stated, " I am so glad you called. We had our meeting on May 31st in place of 6/7. We are going to be re-structuring our meetings to get better attendance. We want to make them in smaller groups and more frequent to get better interaction among the staff members. " Later this week, I will be meeting with our administrator to put together a plan. Judith asked if I could call her next Friday, 6/14 to

	Cuyahoga Falls	OH	44223	6/6/2013	Led with communication insight and asked dr what he currently does that is successful with his pain patients to make communication successful? Dr said that he tries to keep things simple because if he doesn't he gets in over his head in dealing with chronic pain. Is asked dr what he deems chronic? Dr said when patients need narcotics around the clock. I asked dr if he has patients taking more than 3-4 pills of tramadol a day? Dr said he has some. I explained the Scott profile and asked him if it makes sense to initiate Butrans for a patient like him? Dr said it does and wanted more information to help him remember. I gave him the initiation and titration guide, Scott profile, and information guides. Dr said he will give it a try. Discussed OxyContin information and advised him to read. Dr said he does not prescribe CII's because that's for the pain doctors. Asked him to identify patients for intermezzo and explained the indication and dosing.
PPLPMDL0020000001	Stow	OH	44224	6/6/2013	I asked dr what is holding him up with respect to initiating Butrans? Dr said he doesn't have any reservations or anything against Butrans. Dr said it just takes him a while to start. I asked why? Dr said he didn't know but said I'm doing a good job helping him remember to use it. I told him to initiate a tramadol patient around the clock who is in pain on tramadol. Told him about the starting doses and titration. Explained IR oxycodone and ER oxycodone and asked him to switch his IR oxycodone patients. Intermezzo dosing and patient type selection. Explained the Caresource coverage.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/6/2013	Good conversation over lunch. Dr told me he prescribed Butrans today for a patient on tramadol. Dr said he started on the 5 mcg patch and figures he will need to titrate. Discussed conversions and titration along with Bup 3015 results. Dr told me that about 1/3 or his patients do not like Butrans for one reason or another but most really like it. Dr said he does not prescribe vicoden or any other opioids. Dr said he likes Butrans because it's a CII and it's a patch. Dr said he had many patients on tramadol who he will initiate Butrans and does not want the patient to take any other opioids for breakthrough. Dr said he will give them NSAIDs. I explained that in Bup 3915 patients were permitted NSAIDs only. I asked dr to continue prescribing. Explained the new OxyContin update and advised him to read the FPI. Dr said intermezzo is tough to get approved because of having to fail 1 to 2
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/6/2013	I asked dr where he had initiated Butrans in the past? Dr said he can't remember but said he thinks it was vicoden patient. I showed him the Scott profile, reviewed it and asked him if it makes sense to initiate Butrans early on in the treatment of pain when the patient meets the criteria? Dr said certainly it does. Dr said he got it of the habit of using it and said he will start to write again. Left him information guides and initiation and titration
PPLPMDL0020000001	Stow	OH	44224	6/6/2013	Short discussion with Sam the pharmacist about intermezzo dosing and indication. He told me they do not stock it and to his knowledge they have not filled it. Gave him information on OxyContin FPI updates and asked about Butrans prescriptions after telling him about the initiation and titration as well as patient types. Sam said that he thinks they have a couple of patients but doesn't know for sure.
PPLPMDL0020000001	Akron	OH	44333	6/6/2013	Dr told me that he prescribed a new OxyContin yesterday. I asked dr to tell me about it and he said the patient had surgery for a severe back injury recently and was sent to him from the surgeon and dr initiated OxyContin 60mg q12h. Dr said the patient will most likely need e 80mg soon. I reminded him it is q12h and not bid. I asked dr to evaluate his patients on Percocet and switch them to OxyContin. Dr agreed and said he will do that. I asked dr what his patients are on most prior to Butrans? Dr said both tramadol and vicoden. I asked if he has had the need to titrate to the 20mcg dose and if he has any reservations? Dr said he doesn't think the 5mcg provides enough analgesia for many patients and finds the 10mcg is necessary. I asked dr if any of his patients need anything for breakthrough pain? Dr said he tries not to use anything because he's trying to get them off oral opioids. I told dr the opioid experienced trial patients were able to use non opioid analgesics for supplemental analgesia.m dr said he has some patients taking NSAIDs with Butrans and he will continue to prescribe.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	6/6/2013	Reminded him of intermezzo and asked him to continue identifying patients.
PPLPMDL0020000001				6/6/2013	Quick hello at window while speaking with Lori. I told dr to continue identifying patients for Butrans like ones who are in pain on around the clock Tramadol. Dr said she wrote a Butrans a few weeks ago for that type of patient. Nothing else learned.
PPLPMDL0020000001	Richmond Heights	OH	44143	6/6/2013	Lunch. Used OxyConin Tom patient vignette on iPad, to support message. Asked dr if he has ever thought about initiating OxyContin q12 hour, for his existing pain patients who are being refilled, month after month, IR opioids such as Percocet at first he says he has concern with addiction/abuse. Then he stated concern over coverage. Doesn't take any state workers comp. Just commercial. Reviewed OxyContin coverage & asked which girls are responsible in office for keeping track of plans? All MED assistants. found out that Laura has been working there for 8 years. Reminded him we have OxyContin savings cards where patients pay no more than \$25 per month copay. Would this help him if I left cards? He replied yes. When OxyContin not appropriate, Butras as CII option, and Intermezzo, focus on Caresource patient.
PPLPMDL0020000001	Cleveland Hts	OH	44118	6/6/2013	Discussed with Dr. his protocol for treating pain(starting w/NSAIDS,Tramadol,Short acting and then a confident prescriber of OxyContin when appropriate. He said typically he wont RX Percocet/Vicodin more than TID, sometimes QID. Reminded of OxyContin 7dosing strengths. Asked if he would add Butrans into his protocol, Dr. agreed. Workers COMP/Commercial.Went over Intermezzo Vignettes, dosing and trial offer
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/6/2013	Provided communication insight as it relates to pain. Dr said he hates prescribing narcotics but has many patients on tramadol. Dr said pain patients are some of the most difficult to talk to because they don't listen. I discussed all key selling messages with Butrans and took the time to review all aspects of Scott and nancy. Dr said he can really see how Butrans is a good option for a patient on tramadol who is in pain. I asked dr to prescribe and explain the copay cards. Dr wanted the cards to remind him to use it. Explained the OxyContin FPI update and advised him to read the FPI. Intermezzo indication and dosing and asked him to prescribe and
PPLPMDL0020000001	Garfield Heights	OH	44125	6/6/2013	Talked with Holly's discussed Intermezzo, asked if she would fill RX, said she hasnt seen any RX's but had no problem ordering and filling. Went over Savings cards for Butrans/OxyContin
PPLPMDL0020000001	Westlake	OH	44145	6/6/2013	spoken with megan and she told me dr would be doing blocks on the 13th and i would be able to catch him then. he had not arrived yet and since the waiting room was full he would not be able to see me. i asked if she thought the dr would like to know more about his patients in pain and gain more information on his butrans patients. i explained the butrans patient experience kit. shared OxyContin dosing
PPLPMDL0020000001	Euclid	OH	44119	6/6/2013	Spoke with Dr Saeed about considering Butrans for those patients failing on Tramadol. 4 patches per month. Had concerns with coverage. Asked him who is in charge of prior auth's and pre certifications, he responded Michellel Whitted.) Barry & i met with Michling August. As of August she directed us to Marcia Blake who will take over. Gave her my business card to save for Marcia, Promised Michelle to drop off new formulary grids. Does she see any scripts before patient leaves office? No, goes from Dr Saeed directly to patient, she knew exactly where our savings cards are located & says Drs DO remember to hand out.
PPLPMDL0020000001	Westlake	OH	44145	6/6/2013	dr had questions asked what happens if the butrans patient is having a reaction or overdose and i showed the graph that show the plasma levels when butrans is removed and we discussed the overdose section of the fpi. dr asked why the patient could not wear 2 patches at once and rotate them on different days and i explained that this was not how butrans was studied and also discussed qtc prolongation if 2 20's are worn. dr said he could use it for his patients that break and ankle since it is 7 day course of therapy and i explained that butrans is for moderate to severe chronic pain. i reviewed the bold warnings. I asked dr how many patients he had on percocet that have been on for more than 3 months and he said probably 10 and i reviewed the conversion guide for percocet and asked him what doeses he would be converting. dr said he was not sure and i showed him the flexible dosing. reviewed dosing, administration and indication of intermezzo.
PPLPMDL0020000001	Akron	OH	44312	6/7/2013	I asked dr what he thinks of initiating a patient on Butrans who is an an IR opioid and uncontrolled? Dr said he agrees that he would start a patient as long as he knows the patient will use Butrans correctly. I told him that he needs to first find those appropriate patients then explain and sell the patient on the product. I told him to provide them with the copay card and information guide. I asked him to evaluate the IR oxycodone patients and switch them to OxyContin and to identify patients for intermezzo.
PPLPMDL0020000001	Westlake	OH	44145	6/7/2013	window call and followed up on senokot samples. reviewed butrans vouchers that have been placed at the window. reviewed oxycontin dosing.
PPLPMDL0020000001	Westlake	OH	44145	6/7/2013	window call reviewing butrans vouchers. gave OxyContin fpi. reminded indication and dosing of intermezzo
PPLPMDL0020000001	Akron	OH	44333	6/7/2013	Short message about his Butrans patients. I asked dr if he is initiating early for patients on tramadol or low dose vicoden? Dr said he also is initiating for naive patients at the 5mcg dose. I asked dr how he sells Butrans to the patient? Dr said its easy to tell them what they are going to take going forward. Dr said he explains how their current medicine isn't working and they need extended pain control. Nothing else learned.
PPLPMDL0020000001	Westlake	OH	44145	6/7/2013	dr had to do a surgery and was not able to make our appointment. spoke with kellie about butrans patient experience program and if the dr liked that type of data he received
PPLPMDL0020000001	Cleveland	OH	44113	6/7/2013	Inroduction, Asked Dr. his thoughts/insight on treating pain? He said it very challenging, would like to not have to treat with Opiods. Brief discussion on Butrans-Scott profile, he said it was something to consider. Intermezzo indication/dosing. booked lunch apptAndres PA- on vacation
PPLPMDL0020000001	Lyndhurst	OH	44124	6/7/2013	I placed a phone call to Diana in the Staff Development Office to see about setting up an appt. to meet w/ her and introduce Purdue's Nurse Educator Program. N/A , I left a msg. on her voice-mail.
PPLPMDL0020000001	Cleveland Hts	OH	44118	6/7/2013	Brief introduction,Dr. stated its challenging nowadays to prescribe and treat pain,Asked what type of challenges? Patients/Ins. coverage, time etc. Dr. stated he would like to sit dn over lunch to further discuss
PPLPMDL0020000001	Akron	OH	44319	6/7/2013	I asked dr what treatment algorithm for treating pain? Dr said it varies on the patient but said typically will do NSAIDs, tramadol, vicoden, Percocet. I asked dr if he would place OxyContin after vicoden? Dr said he's not sure but isn't convinced his patients need it that early. I asked him to place OxyContin instead if Percocet because if the IR isn't working, the ER oxycodone may be more appropriate.
PPLPMDL0020000001	Westlake	OH	44145	6/7/2013	Placed a phone call to ADON, Brenda Amburgey to set up an appt, to meet w/ her to introduce the NE program & discuss educational opportunities. N/A , left msg. on her voice-mail
PPLPMDL0020000001	Cleveland	OH	44135	6/7/2013	I placed a phone call to D.O.N., Dan Rivera to discuss educational in-service opportunities and to see if he rec'd an approval to utilize our Nurse Educator Program from the regional office. I was informed that he was in a meeting. I left a msg.
PPLPMDL0020000001	Beachwood	OH	44122	6/7/2013	I placed a phone call to Nurse Educator, Cheryl Grim to schedule an appt. to introduce Purdue's NE program. N/A I left a msg on her voice-mail.
PPLPMDL0020000001	Cleveland	OH	44102	6/7/2013	Quick call on Pharmacy, no savings card needed and no new Intermezzo RX's have been filled
PPLPMDL0020000001	Cleveland Heights	OH	44118	6/7/2013	Quick discussion with OPE(pharm) informed her of Dr. Harris interest in Butrans/Intermezzo
PPLPMDL0020000001	Westlake	OH	44145	6/7/2013	spoke with ms patel and asked about the possibility of inservicing the pharmacy and she asked if i had my credentialed and i said i was still in the process. she said when that is complete we can talk
PPLPMDL0020000001	Akron	OH	44312	6/7/2013	I told dr that the last call i made on him where he hit the patient type for Butrans spot on was perfect. Dr said thanks and that I have done a good job providing him the information about Butrans. I told dr that since he has the product down he just needs to pull the trigger and prescribe it more often! Dr agreed and said that is the hard part. I told dr that I'm sure he has many patients on tramadol or vicoden who are good candidates. Dr agreed and said he would write more often. I asked dr to use OxyContin more often and find those patients on IR oxycodone who have been on it for 3+ months. I asked dr to identify patients for intermezzo and gave him
PPLPMDL0020000001	Akron	OH	44319	6/7/2013	I asked dr Wu if he has some time over lunch or at the end of the day to discuss more about Butrans? Dr said it not necessary. I told dr that I just want to ensure he has all the important information about the product so he feels more comfortable to prescribe. Dr said he has the information I have given him on his desk and he has been looking at it. Dr said he just needs to find patients for it. I asked who those patients look like? Dr said the patients I have told him about are the tramadol and vicoden patients. I told him to initiate and allow the product to sell itself.
PPLPMDL0020000001	Akron	OH	44310	6/7/2013	I asked dr what he currently does when a patient on tramadol around the clock needs a dose adjustments. Dr said he either will titrate or move to another short acting opioid. I showed him the Scott profile again and told him that patients is well suited for Butrans. Dr said he prescribed one for a tramadol patient recently and said he will see the patient back in about 2 weeks. I told glad to hear that and reminded him of titration and use of supplemental analgesia.
PPLPMDL0020000001	Copley	OH	44321	6/7/2013	Spoke with Jenna the pharmacist about intermezzo indication, dosing and limitations of use. Jenna said she has not dispensed any to her knowledge but said she thinks its a good product. I explained the OxyContin FPI update and advised her to read section 9.2. She had no questions about it. I showed her the Scott profile for Butrans and asked her if it makes sense? She said it dos and is impressed with the 7 day patch. Jenna said she has filled a couple but nothing recent.
PPLPMDL0020000001	North Olmsted	OH	44070	6/7/2013	Placed a call to speak with Nurse Managers, Jo & Danette to introduce Purdue's NE program and discuss educational in-service opportunities. I spoke with the receptionist, Sara who stated, that Jo & Danette are currently taking part in a webinar. She connected me with Jo @ ext. 4023. N/A left a msg.
PPLPMDL0020000001	Akron	OH	44305	6/7/2013	Explained the new oxycontin FPI information and advised him to read section 9.2. I asked dr if he had any questions and he said no. I asked dr if he has patients who have been on IR oxycodone for 3+ months? Dr said he does so I asked him if he would evaluate those patients to see if they may be suited for the q12h oxycodone? Dr said he tries to do that but it can be cost prohibitive. I asked him for the patients where cost is not a factor if he will do that? Dr said he will. I reviewed the Butrans patients type and profile for nancy and asked dr to use it once to allow it to prove itself in a patient like nancy. Dr said ok.
PPLPMDL0020000001	Akron	OH	44319	6/7/2013	Good conversation with Deanna about the OxyContin update to the FPI and advised her to read section 9.2. Deanna asked me about dosing OxyContin. She asked if TID dosing is appropriate? I told her that in the FPI it is recommended to be dosed q12h. I asked why she asked that and she told me that she has been seeing a lot of TID dosing of OxyContin from comprehensive Pain management physicians. I asked about Butrans and intermezzo dispensing and Deanna said she has a few patient on Butrans and none on intermezzo.
PPLPMDL0020000001					



PPLPMDL0020000001	Cleveland	OH	44102	6/10/2013	Introduction, Asked Dr.about pain protocols and thoughts on treatment. Typically refers out to Pain mgmnt., said its extremely challenging with her patient population. Presented Butrans/indication, dosing ,titration and appropriate patients. Intermezzo indication/dosing
PPLPMDL0020000001	akron	OH	44333	6/10/2013	Quick discussion about him identifying patients for Butrans and asked him to focus on the Ultram patient. I gave him another Scott profile and showed where it would be appropriate to initiate. Asked for more OxyContin business for his patients like Tom and intermezzo for his in the middle of the night insomnia patients.
PPLPMDL0020000001	Cleveland	OH	44195	6/10/2013	Visited Walker bldg invited residents/fellow to upcoming program, left info with Michaela and key clinicians.
PPLPMDL0020000001	Cleveland	OH	44102	6/10/2013	Talked with Natalia (NP) discussed product portfolio Indication/Dosing. Said typically practice is not treating pain, referring out
PPLPMDL0020000001	Lakewood	OH	44107	6/10/2013	Spoke with Cindy about dosing and administration and she said there have not been any scripts. Asked about high OxyContin writers and was given the name of supercore. Asked what information I should give drs about Butrans and she said insurance coverage.
PPLPMDL0020000001	Cleveland	OH	44102	6/10/2013	Talked with Dennis(Pharm mgr)Discussed Intermezzo indication/dosing, he saw a RX recently from Nickels. Went over Butrans/OxyContin hasnt seen any Butrans in a long time(maybe Nouraldin) Health Center next door doesnt RX many narcotics.CareSource and Molina
PPLPMDL0020000001	Stow	OH	44224	6/10/2013	Spoke to sue the pharmacist about intermezzo indication and dosing. She said they have not filled any yet. Explained new OxyContin fpi information and dosing. Discussed Butrans Scott profile and explained the approximation of dosing.
PPLPMDL0020000001	Lakewood	OH	44107	6/10/2013	Asked dr if he had Percocet patients that have been on Percocet more than serval months. Dr said his chronic pain patients are not on Percocet. Reviewed Butrans indication and dr said he remembered that Butrans was only for his patients with good insurance and I said he does have some patients with commercial insurance.
PPLPMDL0020000001	Fairlawn	OH	44333	6/10/2013	Spoke with Gilbert about intermezzo fills. He said he has not seen any recently but he knows they have filled them for Higley before. Expressed OxyContin information and asked him if he had read the FPI update? Gilbert said he did and found it interesting and a good read. Gilbert said they are continuing to fill Butrans for Shah and a few from Narouze.
PPLPMDL0020000001	Cleveland	OH	44102	6/10/2013	Visited center, Ed Carter is Pharm. Director, T.Franko Rph assistant. Left info and card. Requested appt. Kathleen Ondus CNP for facility
PPLPMDL0020000001	Lakewood	OH	44107	6/10/2013	Asked dr about Percocet patients that may have been on for several months and dr said he did not have many. I asked that the few that he has he should consider OxyContin because these are chronic pain patients. Reminded dr of Butrans dosing and dr said he has tried but insurance is not good. I explained the coverage. Reviewed Intermezzo dosing and administration.
PPLPMDL0020000001	Waterford	OH	45786	6/10/2013	I-managed-care information for Butrans. Dosing for intermezzo. Co-pay cards for OxyContin.W-can always use more co-pay cards and managed-care sheets.
PPLPMDL0020000001	Cleveland	OH	44102	6/10/2013	Brief intro as I was talking with Natalia, left info(Butrans initiation/titration, FPI and OxyContin Conversion guide.
PPLPMDL0020000001	Akron	OH	44333	6/10/2013	Explained the new OxyContin FPI update and advised her to read section 9.2. Discussed the patient profiles with her about both OxyContin and Butrans. Becky agreed that more patients need to move from Percocet around the clock to OxyContin and said that psychologically they are used to taking their pills and its hard for them to switch to even OxyContin. Explained Butrans key selling messages and reviewed both patient profiles. Discussed identifying patients on tramadol around the clock and using appropriate starting dose and titration. Discussed intermezzo indication and dosing.
PPLPMDL0020000001	Akron	OH	44333	6/10/2013	I showed dr the Scott profile and asked him if he would use Butrans more often for patients on tramadol around the clock and still in pain? Dr said he does already. I asked him to identify more often. Dr said he is using it and will look over the piece. I showed him the OxyContin conversion and titration guide and also asked him to us more of it for those on Percocet sound the clock.
PPLPMDL0020000001	Akron	OH	44305	6/10/2013	I asked dr what criteria he uses to determine when he titrated Butrans? Dr said he has a discussion with patients in the exam room and either the patient talks about how Butrans is working or he will ask. Dr said he just knows when to titrate. I asked dr how else he evaluates a patients pain level? Dr said he notices the patients functionality and visual signs. I asked dr to continue looking for Butrans candidates like the Scott profile. I reviewed the formulary coverage for prescription insurance and discussed Medco, medical mutual and Caresource. Reviewed Caresource pa and asked who is doing the pa's? Dr said Three does them but was not in yet to discuss Caresource. Asked dr to evaluate his Percocet patients for OxyContin and asked to identify candidates for intermezzo.
PPLPMDL0020000001	Waterford	OH	45786	6/10/2013	I-co-pay cards for Butrans, OxyContin and intermezzo. Managed care for all three products.W-uses a lot of co-pay cards. Cost is a major concern with branded products.
PPLPMDL0020000001	Lakewood	OH	44107	6/10/2013	Spoke with pharm tech, abut Intermezzo dosing and administration. Reviewed Butrans patient information guide. Reviewed OxyContin dosing strengths. Store was crowded and I said I would come back to speak with the pharmacist
PPLPMDL0020000001	Lakewood	OH	44107	6/10/2013	Quick call reminding dr about Butrans for his patients like Maria in pain. Reviewed Percocet conversion for OxyContin. Did not understand drs response but he shook his head yes while he answered. Gave Intermezzo indication and limitation of use.
PPLPMDL0020000001	Fairlawn	OH	44333	6/10/2013	Discussed all three products over lunch and asked dr if he currently sees patients who are on Percocet? Dr said he does. I asked him what percentage of them have been on it around the clock for 3+ months? Dr said he's not sure but knows he has them and said he will not switch them if they are controlled. I asked why he wouldn't give the q12h single entity oxycontin? Dr said he's not sure but said patients don't want to switch. I asked him what the downside if to q12 dosing of oxydone? Dr said none. I asked him to switch those patients. Discussed Butrans and asked him what percentage of his patients are on tramadol around the clock and are still in pain? Dr didn't answer so I asked him to switch those uncontrolled patients who may need a dose adjustment. Dr agreed. I asked dr if he will prescribe Butrans this week? Dr said he will write it. Reminded him to identify patients for intermezzo.
PPLPMDL0020000001	Uniontown	OH	44685	6/10/2013	Spoke with Kelly about recent prescriptions for Butrans. Kelly said she didn't know much about it but said that she did notice patients leaving with a Butrans prescription. I reviewed Butrans key selling messages with Kelly
PPLPMDL0020000001	Cleveland	OH	44113	6/11/2013	Quick reminder at the front desk on Butrans, reminded Ursula and Dr. Commercial INs and BWC. Dr/Ursula said he really doesnt treat chronic pain but agreed the practice has a fair amount of patients in pain.Reminded of appropriate patients and indication
PPLPMDL0020000001	Beachwood	OH	44122	6/11/2013	I made a drop-in visit to meet w/ ADON, Cathy Cigli. I was informed by the receptionist, Lisa that Cathy called off work today and the D.O.N., Susan is swamped.I left my BC
PPLPMDL0020000001	Parma	OH	44134	6/11/2013	Placed a call to Linda Belford in Staff Development, to re-schedule the Butrans Luncheon w/ the NP's and talk about scheduling future in-services for the nursing staff. N/A I left a msg.
PPLPMDL0020000001	Garfield Hts	OH	44125	6/11/2013	Visited surgery center, There are both Kaiser and CCF surgeons using center. Key clinicians (Lopresti,Levine,O'brien Gemma,Forcier, Elkhari Pantec, Peralta-CCF(Lichenberger,Rapuri,Sargento,Nowak, Love, Hauer=Kaiser surgeons) Left cards and info for Nursing Staff/Clinicians
PPLPMDL0020000001	Cleveland	OH	44113	6/11/2013	Visited Ortho/Rheumatology, Premier offices, Pain Management, Bohl/Ortho office, left product info and invites for upcoming Laham program
PPLPMDL0020000001	Cleveland	OH	44125	6/11/2013	Talked with Linda(Tech) no new prescribers. Suggested Surgery Ctr (Ortho.group) and Kaiser Doctors
PPLPMDL0020000001	Uniontown	OH	44685	6/11/2013	Quick message at front desk and asked him if he is continuing to evaluate his Percocet patients for the appropriateness of switching to ER oxycodone instead? Dr said he tries all the time but did say he is seeing success with Butrans for his viceden patients. Gave him a nancy profile and asked him to review. Dr thanked me for the OxyContin copay cards and said he tries to give them out as much as possible.
PPLPMDL0020000001	Uniontown	OH	44685	6/11/2013	I asked dr if she would use OxyContin for any of her patients on controlled on IR oxycodone? Dr said it depends on the patient and what the treatment is for. Dr said when it is necessary and she knows a patient needs to be on chronic opioid therapy she will use OxyContin. Dr had to go into an exam room. I left her Butrans and intermezzo dosing information.
PPLPMDL0020000001	Garfield Hts	OH	44125	6/11/2013	Quick call thru window,Butrans savings card and Senokot samples requested. Left info on Butrans/Oxycontin and Intermezzo. Requested any opportunity for lunch cancellation or appt. would be highly appreciated
PPLPMDL0020000001	Euclid	OH	44117	6/11/2013	Upon arriving for the 2:00 & 2:30 in-service on constipation for the STNA's, the secretary, was unable to locate Nurse Educator,Charlene Miller, After 15 minutes had past, a staff nurse greeted me and directed me to a conference room to set up for the in-service while Charlene was still trying to be located. At 2:20 Charlene met me and said, "I am totally sorry, I forgot about the in-service and I have it marked in my calendar." She asked, "can I re-schedule?" I had called to confirm on 6/10, but N/A, a voice-msg. was left on Charlene's phone. Charlene informed me that she had been gone all last week to a retreat and was also off yesterday and had not yet retrieved all her phone messages from when she was out. The in-service scheduled for 6/12 on constipation for the nurses, will be presented to the STNA's instead and an in-service on constipation was scheduled for the nurses on 6/20 @ 2:30 & 5PM. Per Charlene, the 5:00 in-service on 6/20 possibly could be cancelled pending RSVP's. I talked with Charlene about future in-service opportunities, dates & times were scheduled.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/11/2013	Explained the OxyContin FPI information and advised him to read section 9.2. Dr said he is happy the FDA did their job. I asked dr to identify new patients for OxyContin and it needs to start with his IR oxycodone patients. Dr said he tries all the time and formulary wont allow it all the time. Gave him the Butrans dosing guide and ask for him to try it again.
PPLPMDL0020000001	Garfield Hts	OH	44125	6/11/2013	Met with Dr. Asked what he does with those patients that are not adequately controlled on pain meds (ie Vicodin/Percocet/Tramadol)He said most of his patients on Vicodin/Percocet are doing good and controlled. Reminded him of the Scott profile and asked if he could find 1patient this week that is appropriate to prescribe, He said he will see what he can do.
PPLPMDL0020000001	Akron	OH	44310	6/11/2013	Good discussion over lunch about all products. I asked dr again to continue finding existing patients uncontrolled on their IR products for Butrans. Dr told me that last week he had a patient on 20mg of Percocet who he initiated on Butrans. Dr said the patient said it wasn't giving any pain relief so he titrated to 10mg. Patient said Butrans still wasn't giving enough relief. Dr said he believes the patient have a psychological problem and also doesn't want to give up his pills. I told dr he should not have initiated on 5 mcg for that patient and based on approximate conversions he should have initiated on 10mcg then titrated to 20mcg. Dr agreed but said the patient loves his pills too much and no matter what dose he was on it would not have worked based on the patients perception. I asked dr what he is saying about Butrans to a patient for thurst time? Dr said that it will give them more extended analgesia instead of short term. I asked if that's it? Dr said yea. I had discussion about how to discuss the product with a patient and to give them a information guide because the connection between the patient and their medicine may improve. Asked for additional business. Asked dr to please continue identifying patients for OxyContin. Especially the ones uncontrolled on Percocet. Went over the Tom profile. Closed with intermezzo and told him to look for patients meeting the indication.
PPLPMDL0020000001	Cleveland	OH	44125	6/11/2013	Spoke with Christine, Reviewed Butrans dosing/titration. Intermezzo indication and dosing. Hasnt seen any scripts for Butrans, does see alot of 10count OxyContin Scripts from the Ortho.group over at Marymount(Lopresti,Levine Etc
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/11/2013	Spoke with Teri the ma about Butrans and provided her all key selling messages. I asked if she believes dr would be interested? She said for sure. Left initiation and titration guide and signed up of lunch
PPLPMDL0020000001	Uniontown	OH	44685	6/11/2013	Spoke with Stephanie about intermezzo and explained the indication and dosing. Stephanie said she has not seen any go out. Explained the OxyContin FPI update and advised her to read section 9.2. Discussed Butrans key selling messages and asked about stocking. She said they fill many from Fouad and a couple from Lababidi recently.
PPLPMDL0020000001	Beachwood	OH	44122	6/11/2013	I made a drop-in visit to speak w/ Cheryl Grim, Nurse Educator, to discuss Purdue's NE Program and Pain Management educational opportunities. I spoke w/ the receptionist,who paged Cheryl, she did not answer. I left my BC and will call and leave a phone msg.I place a phone call to Cheryl Grim requesting an appt. to introduce Purdue's NE program and educational in-service opportunities, N/A - I left a msg. on her voice-mail.
PPLPMDL0020000001	Brooklyn	OH	44144	6/12/2013	Discussed Intermezzo indication/dosing He said their is a mkt for product but struggles with ins./pharmacy benefit coverage. Indicated Same for Butrans, discussed Scott profile as appropriate patients,expressed patients willingness to accept along with cost challenges for his elderly patient population. (Compared to a one dose antibiotic yrs ago that patients struggled with accepting) Asked if he would continue to seek appropriate patients for products and he agreed
PPLPMDL0020000001	Akron	OH	44320	6/12/2013	Dr said that dr Dupstadt had a patient of hers in an exam room who she put on Butrans 10mcg that she got pushed through a PA. I asked dr if the patient is doing well? Dr said she thinks so and to ask dr dupstadt when she comes out. I told her that in guessing she has patients on tramadol around the clock? Dr said she does. I asked her what the downside is to initiating Butrans for that patient once they have been on ultram for 3+ months or requiring a dose adjustment? Dr agreed and said she will do that. I reviewed the OxyContin FPI update and asked her if she has patients on IR oxycodone? Dr said she does.n I asked if she would switch those patients to OxyContin once they have been on the IR for an extended period of time? Dr said that makes sense but the name OxyContin scares people. I asked her if she tells her patients the facts about it? Dr said she does but gets tired of educating her patients all the time on that. I told her to ensure her patients have the facts about OxyContin. Intermezzo dosing and patient type selection.
PPLPMDL0020000001					

PPLPMDL0020000001	Euclid	OH	44117	6/12/2013	I made a drop-in visit , to remind D.O.N.Kathy Nemeth of the in-service on 6/18 @ 7am, 2:30 & 3pm on defining key terms in pain management
PPLPMDL0020000001	Cleveland	OH	44195	6/12/2013	MSL email communication with Ms. Kreischer to discuss OTR pre-screening and outreach to additional specialty departments. Site team is discussing recruitment plan internally and MSL to follow up week of 6/17.
PPLPMDL0020000001	Cleveland	OH	44119	6/12/2013	I made a drop-in visit to meet w/ ADM., Nancy Sugarmen to present Purdue's NE Program, I spoke w/ receptionist, Melissa who informed me that Nancy was not in today. I left my BC.
PPLPMDL0020000001	Oakwood Village	OH	44146	6/12/2013	I placed a phone call to Barb Straemple to confirm the in-service on Pain Management for 6/13 @ 7:30, 10:30 & 2:30 N/A left a msg.Barb returned my call and confirmed the in-services for 6/13. She stated that she will not be there d/t a D.O.N. meeting
PPLPMDL0020000001	Stow	OH	44224	6/12/2013	Quick message about Butrans while dr was in his office. I asked him where he is using Butrans? Dr said he has used if for patients on ultram, vicoden and said maybe a couple patients who were naive to opioids. I told him that those are all good candidates for Butrans and told him to dose appropriately while showing him the approximate conversion chart. Reminded dr to identify patients for intermezzo.
PPLPMDL0020000001	Berea	OH	44017	6/12/2013	Dr said he has not prescribed Intermezzo since my last visit. Asked dr about his tramadol patients still in pain. Dr said he refers out and I confirmed that he mentioned last time he refers but I wanted to discuss treating patients with Butrans before he refers out. Dr said he remembers but has not had an opportunity to prescribe. Reviewed Percocet to OxyContin conversion.
PPLPMDL0020000001	Copley	OH	44321	6/12/2013	I asked how many patients she has on Butrans? Dr said maybe three or four. I told dr that I presume they are doing well. Dr said they are. I asked what medicines they were on before Butrans? Dr said tramadol and vicoden. I asked if the success his patients on Butrans from tramadol have had inspires him to use it more frequently for that patient type? Dr said maybe. I asked why maybe? Dr said it's a pain to get it approved and convince the attention to use it instead of a pill. I told him I respectfully think those are his thoughts and maybe not reality. Dr disagreed but said he will use it again. I asked him to identify patients for both OxyContin and intermezzo and gave him doing guides.
PPLPMDL0020000001	Stow	OH	44224	6/12/2013	Good first discussion with new dr in CPM's practice. Dr asked me about Butrans. Discussed most key selling messages including dosing, indication, titration, steady state, 7 day transdermal patch. Dr said he has not prescribed it himself yet but has seen patients of the other drs who have been on Butrans. Dr asked a lot about the initial dosing and titration. Reviewed the initiation and titration guide. Dr said we will discuss more at lunch
PPLPMDL0020000001	Akron	OH	44312	6/12/2013	Discussed intermezzo doing and if they have dispensed any? Mark the technician said they have had one he believes from dr Cain. Gave OxyContin updated information and advised him to read section 9.2. Butrans dosing and titration. I explained the Scott profile.
PPLPMDL0020000001	Stow	OH	44224	6/12/2013	While speaking with the new physician in the group dr Balter about Butrans, dr Fouad began to speak about his experiences with Butrans. Dr Fouad spoke about how many good successes he has had with the product. Dr Balter asked me if the patch comes off in the shower? I asked dr Fouad if he has had patients tell him that? Dr Fouad said he has not even had one situation with that problem and said that the patient needs to stay out of the whirlpools and hot tubs. I asked dr Fouad if he is using it for his patients uncontrolled on tramadol or vicoden? Dr said he has used it for just about every IR medicine. I asked dr to continue prescribing OxyContin and to Met with Helen first, and also left Butrans & OxyContin formulary & savings flashcards with OM Ellen T. Discussed Butrans opioid naive clinical trials, doses available, steady state at 72 hrs for titration. Went through new formulary grid, Medco Med Part D status, OxyContin, START principles, which he liked. For those patients on IR opioids being refilled, please consider OxyContin q 12 h. he will consider. Asked him to review updates to section 9.2 OxyContin FPI. Could not meet with Dr Kim as he was in meeting with another HCP in his personal office.<font color=blue><b>CHUDAKOB's query on 06/21/2013</b></font>Jenny, this note is a little confusing. First you stated you met with Helen. Who is Helen? What does OM stand for? The you stated you discussed the clinical trials. With whom? It looks like Helen? Can you please clarify some of this for me?<font color=green><b>BALLIE's response on 06/23/2013</b></font>Ellen is office mgr for entire practice. Helen is Dr Isakov medical assistant. Discussed clinical trial with both Helen & Dr Isakov. (You've met Helen in office, she's worked with dr for over 29 years). This was a note to remind me all those people I talked to in office prior to getting into detail of what was discussed,<font color=blue><b>CHUDAKOB added notes on 06/26/2013</b></font>there is no problem with what you put in the note, just the clarity of it. thank for the clarification.
PPLPMDL0020000001	Lyndhurst	OH	44124	6/12/2013	Met with Diana & Ebonie. Went over new Butrans formulary grid & Medco Med Part D adding Butrans to national formulary. Then went over trial, savings card flashcard. transitioned to OxyContin. Please have nursing staff review updates to section 9.2 of OxyContin FPI went through managed care piece & where preferred currently. START principles, left Conversion titration guide for all, including Pat Moran CNP, who is only in Fridays. Left 1 box Senokot & 1 box Colace per their request.
PPLPMDL0020000001	Lyndhurst	OH	44124	6/12/2013	After meeting with prior auth coord Diana, and MA Ebonie, met with Karen @ front window. Reviewed Butrans new formulary grid with her, and addition of Butrans to Medco Med Part D nat'l formulary. Reminder trial, savings, left savings flashcard. OxyContin, please review updates to section 9.2, she will definitely review, also went through managed care piece. I'm leaving you conversion/ titration guide, please review START principles. She had to get in room with patient.<font color=blue><b>CHUDAKOB's query on 06/21/2013</b></font>Jenny, remember the first order of business is proving efficacy. Pick a point from the clinical trials such as pain reduction scores for example and sell her on this. Gain her agreement that this is significant. She will not prescribe Butrans if she doesn't believe it works first. What are your thoughts?<font color=green><b>BALLIE's response on 06/23/2013</b></font>I will make sure to discuss a point from Butrans trial next call. During this total office call, my main objective was to deliver Butrans Formulary updates, however, I do agree I should have discussed efficacy first with Karen.<font color=blue><b>CHUDAKOB added notes on 06/26/2013</b></font>This strategy will usually not work as a main strategy if she does not believe Butrans works. Managed care should be the icing on the cake. Dr told me that he just saw a patient in for a follow up Monday who he has on Butrans and intermezzo. Dr said the patients loves intermezzo and Butrans. I asked which dose of Butrans she is on? Dr told me 5mgc from tramadol under 300mg. Dr said he may need to titrate to the 10mgc on the next visit. I asked dr what his success rate is for Butrans when he explains it for the first time? Dr said close to 100%. Is asked him what he says to the patient when he is selling it to the patient? Dr told me his patients trust him and he tells them that he is going to place them on a controlled release patch for 7 days and you will only get 4 patches in one month. He gives them the experience kit and information guide and makes sure to review the patch locations. I asked for his continued support and reviewed new formulary card. I asked for more OxyContin business and intermezzo for his patients with in the middle of the night insomnia.
PPLPMDL0020000001	Berea	OH	44017	6/12/2013	Asked Cora about any new Butrans scripts and there were none. Gave indication and limitation of use for Intermezzo
PPLPMDL0020000001	Akron	OH	44320	6/12/2013	I showed dr the atom profile for OxyContin and asked her if there is a problem with patients for OxyContin in this type of situation? Dr said no problem. I asked her if she will prescribe more OxyContin in situations like Tom? Dr said she will. I asked her how the Butrans patient is doing she saw for dr Adams? Dr said the patient is doing well and controlled on 10mcg. I asked her to prescribe more herself for Butrans and to keep the tramadol or vicoden patients uncontrolled for Butrans? Dr said she will and believes in it that it works. I asked her for intermezzo patients and gave dosing card.
PPLPMDL0020000001	Olmsted	OH	44138	6/12/2013	Dr does not see reps. Lunch with office. Asked dr have they heard of Butrans and they said yes. None of the drs have prescribed Butrans. Dr said he does not treat chronic pain and they refer out to dr raslan. I asked if they refer to dr raslan for Percocet and Vicodin and they said no because they use those products for acute pain. I explained that Butrans is a buprenorphine 7 day patch that they want to consider before they use Percocet or Vicodin and they could defer sending patients to pain management. They asked about onset and I explained that steady state is reached in 3 days. I reviewed the conversion guide for Butrans and explained that in our clinical trials over 50% of the patients tolerated the 20. I explained that they should consider tramadol patients whose pain is not adequately controlled. I reviewed the pain reduction in the opioid experienced patient. Drs asked about managed care and I reviewed the vouchers and savings cards and commercial insurance patients. I reviewed how to write Butrans and left conversion guides. I reviewed the FPI change for OxyContin and reviewed the Percocet conversion and explained that patients may be in their practice who have been on Percocet for awhile and their pain may need to be reevaluated. I explained that these would not be new patients but existing patients in their practice they should consider as potential OxyContin patients. Reviewed Intermezzo dosing, administration. Showed demo and discussed sleep lab study.
PPLPMDL0020000001	Brooklyn	OH	44144	6/12/2013	Briefly discussed Intermezzo and willingness to fill and split box, Rhonda said Matt has no problem
PPLPMDL0020000001	Brooklyn	OH	44144	6/12/2013	Discussed treating pain and thoughts on Butrans. Dr. stated challenges in treating and adequately controlling the pain is biggest challenge, feels his patients are controlled. (has a older population and satisfied) Believes Butrans is a viable option, believes it works" and only obstacle is cost with his MED D population. Intermezzo indication and dosing Vignettes
PPLPMDL0020000001	Euclid	OH	44117	6/12/2013	An in-service on constipation was completed at 2:00 for the STNA's. 3 were in attendance. Discussion and interaction took place on the risk factors of constipation, signs and symptoms of constipation and diseases associated with constipation. The laxative protocol was handed out and reviewed with the STNA staff.The 2:30 in-service was cancelled d/t no shows
PPLPMDL0020000001	Akron	OH	44320	6/12/2013	Some tom John the pharmacist intern and Marie the tech about all products. Explained the intermezzo indication, dosing and limitations of use. Marie said they have both Helen & Dr Isakov. Discussed the Caresource coverage. Explained the OxyContin FPI updates. John said they fill a lot of OxyContin and it is very important for them to now and thanked me for the update because they need the facts. Explained the Butrans indication and dosing. Marie said that they have a few patients on it and two of them are from Bonyo. Left doing guides for Butrans and intermezzo.
PPLPMDL0020000001	Cleveland	OH	44106	6/12/2013	Ask Dr if he thinks Butrans works,Said he believes it works still struggles with finding patients to accept. Believes his patient population likes what they are currently prescribed.Thinks its a viable option I asked dr if he will start a couple new patients on Butrans today? agreed
PPLPMDL0020000001	Olmsted Falls	OH	44138	6/12/2013	Lunch discussion. Asked dr have they heard of Butrans and they said yes. None of the drs have prescribed Butrans. Dr said he does not treat chronic pain and they refer out to dr raslan. I asked if they refer to dr raslan for Percocet and Vicodin and they said no because they use those products for acute pain. I explained that Butrans is a buprenorphine 7 day patch that they want to consider before they use Percocet or Vicodin and they could defer sending patients to pain management. They asked about onset and I explained that steady state is reached in 3 days. I reviewed the conversion guide for Butrans and explained that in our clinical trials over 50% of the patients tolerated the 20. I explained that they should consider tramadol patients whose pain is not adequately controlled. I reviewed the pain reduction in the opioid experienced patient. Drs asked about managed care and I reviewed the vouchers and savings cards and commercial insurance patients. I reviewed how to write Butrans and left conversion guides. I reviewed the FPI change for OxyContin and reviewed the Percocet conversion and explained that patients may be in their practice who have been on Percocet for awhile and their pain may need to be reevaluated. I explained that these would not be new patients but existing patients in their practice they should consider as potential OxyContin patients. Reviewed Intermezzo dosing, administration. Showed demo and discussed sleep lab study.
PPLPMDL0020000001	Olmsted Falls	OH	44138	6/12/2013	Lunch discussion. Asked dr have they heard of Butrans and they said yes. None of the drs have prescribed Butrans. Dr said he does not treat chronic pain and they refer out to dr raslan. I asked if they refer to dr raslan for Percocet and Vicodin and they said no because they use those products for acute pain. I explained that Butrans is a buprenorphine 7 day patch that they want to consider before they use Percocet or Vicodin and they could defer sending patients to pain management. They asked about onset and I explained that steady state is reached in 3 days. I reviewed the conversion guide for Butrans and explained that in our clinical trials over 50% of the patients tolerated the 20. I explained that they should consider tramadol patients whose pain is not adequately controlled. I reviewed the pain reduction in the opioid experienced patient. Drs asked about managed care and I reviewed the vouchers and savings cards and commercial insurance patients. I reviewed how to write Butrans and left conversion guides. I reviewed the FPI change for OxyContin and reviewed the Percocet conversion and explained that patients may be in their practice who have been on Percocet for awhile and their pain may need to be reevaluated. I explained that these would not be new patients but existing patients in their practice they should consider as potential OxyContin patients. Reviewed Intermezzo dosing, administration. Showed demo and discussed sleep lab study.
PPLPMDL0020000001	Olmsted Falls	OH	44138	6/12/2013	Lunch discussion. Asked dr have they heard of Butrans and they said yes. None of the drs have prescribed Butrans. Dr said he does not treat chronic pain and they refer out to dr raslan. I asked if they refer to dr raslan for Percocet and Vicodin and they said no because they use those products for acute pain. I explained that Butrans is a buprenorphine 7 day patch that they want to consider before they use Percocet or Vicodin and they could defer sending patients to pain management. They asked about onset and I explained that steady state is reached in 3 days. I reviewed the conversion guide for Butrans and explained that in our clinical trials over 50% of the patients tolerated the 20. I explained that they should consider tramadol patients whose pain is not adequately controlled. I reviewed the pain reduction in the opioid experienced patient. Drs asked about managed care and I reviewed the vouchers and savings cards and commercial insurance patients. I reviewed how to write Butrans and left conversion guides. I reviewed the FPI change for OxyContin and reviewed the Percocet conversion and explained that patients may be in their practice who have been on Percocet for awhile and their pain may need to be reevaluated. I explained that these would not be new patients but existing patients in their practice they should consider as potential OxyContin patients. Reviewed Intermezzo dosing, administration. Showed demo and discussed sleep lab study.
PPLPMDL0020000001	Cleveland	OH	44115	6/13/2013	Discussed Butrans and his Success, Said he started a new patient this morning. Continues to find new patients, Said Deb is a true pro at prescribing for appropriate patients
PPLPMDL0020000001	Barberton	OH	44203	6/13/2013	Reminded dr if pain patient on Percocet around the clock and reviewed OxyContin conversion. Gave reminder for Butrans patients like Maria profile.

	Westlake	OH	44145	6/13/2013	Dr said his patient load has dwindled down and he has very few patients to consider for anything. Reminded him of Butrans OxyContin and Intermezzo.<font color=blue><b>CHUDAKOB's query on 06/21/2013</b></font>While I know we discussed this in person, and you informed me of the late entries for call notes I want you to be aware that this is a compliance issue as call should be entered no later than the end of the day they were made. Accuracy of call notes is very important and the best accuracy occurs when call notes are entered immediately after the call. You stated this would not happen again.<font color=green><b>KENNOMA's response on 06/21/2013</b></font>Yes, I understand.<font color=blue><b>CHUDAKOB added notes on 06/26/2013</b></font>OK. Thank you!
PPLPMDL0020000001					
PPLPMDL0020000001	Cleveland	OH	44115	6/13/2013	Quickly talked with Dave, no new RX's, said will keep a eye out
PPLPMDL0020000001	Cleveland	OH	44115	6/13/2013	Quick call thru window, Reminded of OxyContin 7 dosing strengths and Butrans 7 day Transdermal,indication and dosing. Left info on all three products
PPLPMDL0020000001	Barberton	OH	44203	6/13/2013	Spoke with pharm tech about any OxyContin changes in prescribing or insurance. Angie said no changes but she sees less OxyContin then she use to. Reviewed Intermezzo dosing and administration. Discussed Butrans clinical
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	6/13/2013	I asked dr to write more OxyContin for her patients who meet the indication and who also may already be taking the IR oxycodone. Dr said ok. Told her to TRY butrans. Nothing else learned
	Oakwood Village	OH	44146	6/13/2013	In-services @ 7:30am, 10:30pm and 2:30 were completed on Pain management for the RN's, LPN's and STNA's. There were 28 in attendance including the ADON. During the in-service,discussion and interaction on Barriers that interfere w/Pain Assessment & Treatment in the elderly (Cognitive & Dementia) and consequences of unrelieved pain took place.The patient comfort assessment guide and the Wong Baker Pain Scale were handed out and reviewed with the staff. The Nurses enjoyed the in-service and felt there was a lot of good information presented.
PPLPMDL0020000001	Lakewood	OH	44107	6/13/2013	Dr on vacation. Reviewed butrans savings card at lunch<font color=blue><b>CHUDAKOB's query on 06/21/2013</b></font>With who did you review the Butrans savings cards.<font color=green><b>KENNOMA's response on 06/21/2013</b></font>Crystal the ma for both drs Rojas and Khuri<font color=blue><b>CHUDAKOB's query on 06/26/2013</b></font>OK. Try to make the call note a little more specific. Was this the only thing you discussed at a lunch, even if the Dr. was not there?<font color=green><b>KENNOMA's response on 06/27/2013</b></font>Just a managed care review and the savings cards<font color=blue><b>CHUDAKOB added notes on 06/28/2013</b></font>OK.
PPLPMDL0020000001	Solon	OH	44139	6/13/2013	I made a drop-in visit to meet w/ Staff Development Coordinator, Gretta Redus to discuss pain & pain Management Educational Opportunities. I spoke w/ receptionist Denise Zgorzelski, she paged Gretta x 2 and tried calling her office as well, N/A. Denise stated, "Gretta is teaching an orientation class this week and today is the last day. I Left my BC and PAP handouts.
PPLPMDL0020000001	Twinsburg	OH	44087	6/13/2013	I placed a drop-in visit to talk w/ D.O.N., Shawn McMahon, to introduce Purdue's Nurse Educator program and discuss educational in-service opportunities. I spoke w/ receptionist, Carmella, who phoned Shawn McMahon. He informed her that he was going into the morning team meeting, but that he is always interested in education and asked that I leave him some information. I left PAP handouts along w/ my BC.
PPLPMDL0020000001	Barberton	OH	44203	6/13/2013	Spoke with billy about Intermezzo movement and he has not seen a script. Reviewed conversion chart for Butrans. Reviewed OxyContin conversion from Percocet
PPLPMDL0020000001	Lakewood	OH	44107	6/13/2013	Dr was running behind for lunch so she could not stay but I let her know that Butrans patients can be patients not receiving adequate pain relief with tramadol.<font color=blue><b>CHUDAKOB added notes on 06/21/2013</b></font>am referencing this call as being more than three days late as all calls on this date were submitted late. You brought this to my attention, and we discussed it.
PPLPMDL0020000001	Tallmadge	OH	44278	6/13/2013	I told dr that he still has 5 copy cards left for Butrans and I was hoping he would only have 4 left. Dr said he may use it but couldn't tell me when. I asked why and what's holding him up? Dr said he didn't know. Nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44115	6/13/2013	Talked with Pain Management Dept, Dr. Nickels, IN-patient pharmacy-George
PPLPMDL0020000001	Cleveland	OH	44115	6/13/2013	Talked with George (RPH) hasnt seen any scripts yet for Butrans, suggested Anthony George Pain mgmnt
PPLPMDL0020000001	Cleveland	OH	44109	6/13/2013	Ask Pharmacist if she has seen any Butrans/Intermezzo, hasnt seen any Intermezzo, occassionly from Nickels for Butrans. No new prescribers
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/13/2013	Spoke with Amy the technician. Discussed the intermezzo indication and dosing structure. I asked Amy if they have had any dispensing or have it in stock. Amy said they have the 1.75mg in stock but didn't think they have filled any. Gave her a Butrans initiation and titration guide. She said they have the 5 and 10mcg in stock and have a handful of patients on it. Left her with the OxyContin FPI.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/13/2013	Quick conversation with him between his procedures. I gave him a quick review of OxyContin and asked him to reevaluate his IR oxycodone patients for potential OxyContin switches. Dr said it makes sense and will try to do more. I asked him to use Butrans more often and to look into his patients failing their first opioid. Gave him a initiation and titration piece.
PPLPMDL0020000001	Akron	OH	44333	6/13/2013	Spoke to dr about his recent prescription of Butrans and asked why he decided Butrans as the best option? Dr said he actually titrated the patient from the 10mcg to the 20mcg without any breakthrough medication. Dr said he initiated Butrans because the patient was not doing well on vicoden. I told dr in the experienced clinical trial how patients were force titrated to the 20mcg and reviewed the trial. Dr agreed and said he really likes Butrans and when his patient load picks up he will be using it more often. I asked dr to use more OxyContin when his patients on Percocet fail or ask for a different therapy. Reviewed the intermezzo indication and asked him to select patients with in the middle of the night insomnia.
PPLPMDL0020000001	Akron	OH	44312	6/13/2013	I asked dr through window what he is currently doing for his patients who are on tramadol around the clock and are still in pain? Dr said it is on a case by case basis but he knows I have Butrans and agreed he should consider that. I told him yes he should and asked him to initiate for one patient to allow it to prove itself. Dr said ok. I handed him a initiation and titration guide along with a dosing card for intermezzo and OxyContin.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/13/2013	Good discussion over lunch about OxyContin and his use of Butrans. Provided mini inservice for nursing staff and doctors on OxyContin. Provided each attendee with conversion and titration guide along with FPI. Reviewed indication, limitations of use, contraindications, dose adjustments, titration, steady state,patient profiles, and new FPI update information. Jake said he uses it but has seen good success with Butrans. I asked him where and why? Jake said that he has found the dosing to be moderate which is good and works well for his older more sensitive patients. Jake said most patients will need titrated from the 5mcg to the 10mcg. Jake said that dr Narouze is not sold on titrating to the 20mcg. I asked why and he said he is worried about doubling the dose to the 20mcg. I explained,aimed the experience trial and forced titration and results on the 20mcg as well as AE information. Discussed conversions and titration and appropriate starting dose. Explained intermezzo indication and asked him for patient type identification.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	6/13/2013	Wile speaking to Darlene in the office who is the managed care manager, doctor Azem began speaking to me about Butrans. Dr explained to me that she had a perfect patient for Butrans yesterday but said her insurance would not cover it. I asked what insurance the patient has? Dr Azem checked with Darlene and Darlene said the patient has Caresource. I explained to dr Azem and Darlene about the Caresource PA. Darlene said patient previously failed gabapentin and vicoden. Darlene filled out PA form to send in. I asked dr if she would move patient back to Butrans if it gets approved? Dr said certainly she would and appreciated me being there to help.
PPLPMDL0020000001	Mayfield Heights	OH	44124	6/13/2013	Met first with front desk staff, Kathy & Laurie who are in charge of samples/OTC/ savings cards. Left OTC visual aid 1 box Senokat samples. Went through OTC samples& availability. Left Butrans dosing slider for nursing, Butrans updated formulary grid, savings card flashcard. Let nursing know this is CIII 1 x week pain patch, which can be called in with refills. Left Butrans patient guide. All HCP's will write an opioid or refill 1 x but refer to pain mgt for chronic patients. they will write insomnia agents, including dr bailey. Left OxyContin managed care piece, savings card flashcard, FPI. Asked staff to review updates to section 9.2 of OxyContin FPI. Left dr bailey Intermezzo dosing card. Told the girls just to focus on Caresource for now.
PPLPMDL0020000001	Chagrin Falls	OH	44022	6/13/2013	I made a drop-in visit to speak w/ the D.O.N., BeAnne Clipper to introduce Purdue's Nurse Educator Program and discuss educational opportunities. I spoke with the receptionist, Kellystated, "BeAnne just stepped out to go get something, b/c she is having a luncheon for the STNA's today." She gave me her e-mail and also the ADON's, Nancy Virginia and told me to cc her on the e-mail.I verified the Medical Director as Dr. Balaji and the CPP as Omnicare of Eastlake with Kelly. I left PAP handouts and my BC.
PPLPMDL0020000001	Solon	OH	44139	6/13/2013	I made a drop-in visit to speak w/ Judith Sawtner to re-schedule the in-service cancelled on 6/7. I was informed by the receptionist, that Judy just completed rounds and is currently in a managers meeting. I left my BC
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/13/2013	Good discussion with dr over lunch about all products. Dr told me he has been having great success with Butrans but is seeing more managed care issues. I asked if there are any particular plans and he said he didn't know but said that he wants me to review all the formulary coverages for the product and where it should not be used like Buckeye. I told dr it maybe better if Kendra would be better served providing a managed care inservice on all products. Dr told me its a good idea and to set it up because he feels there are many scripts lost because the staff is not informed enough on coverage. I asked dr for continued business and to prescribe OxyContin for his IR oxycodone patients. Dr said he would rather that've all his patients on ER medicines. Discussed intermezzo and asked him to identify patients with in the middle of the night insomnia.<font color=blue><b>CHUDAKOB added notes on 06/21/2013</b></font>Cliff, very nice job with this physician. You have forged a trusted relationship very quickly. Keep up the good work!
PPLPMDL0020000001	Cleveland	OH	44104	6/14/2013	Briefly discussed Intermezzo indication/dosing, asked how she is treating her moderate to severe chronic pain patients, she responded doesnt really see many, if she does then refers out or lets Dr. Pandit/Rosenfield handle those.With physician group- Covers alot of nursing homes (Cedarwood, ParkEast, Franklin plaza etc)Agreed with Dr. Rosenfield that Butrans fits into Hospice/Palliative care setting.
PPLPMDL0020000001	Mogadore	OH	44260	6/14/2013	Quick reminder about Butrans at front counter and told him to continue prescribing and to identify patients on tramadol or vicoden around the clock who complain of pain. Dr said thanks and told me he really likes it. Told him about the Medco Med D coverage.
PPLPMDL0020000001	Stow	OH	44224	6/14/2013	Asked to see dr at front desk. Angie said he just finished a procedure and will give me a second. I asked dr if he will try Butrans for a patient like Scott or nancy and gave him the profiles.? Dr said he will and asked any conversions. I showed him the slide scale and explained approximate conversions. Dr said he will keep it with him to remind himself. Nothing else learned
PPLPMDL0020000001	Akron	OH	44313	6/14/2013	Good discussion surrounding his use of OxyContin. I showed him all the OxyContin profiles and asked him where it seems to fit best for him? Dr said the Tom profile where the patient is on IR oxycodone. Discussed why it is important to consider switching IR oxycodone patients who are complaining of pain and have been on it for 3+ months. Dr said he will be trying to switch as many ad he can especially in his nursing homes. I explained the Scott and Nancy patient profiles and asked him to prescribe Butrans for the first time so it can prove itself. Dr. Said he would prescribe it when he finds that patient type we discussed. I told him that I'm guessing he had many patients on tramadol or vicoden who would be prime candidates when they meet the indication. Dr agreed and said he would prescribe. Explained the intermezzo indication and asked him to identify patients.
PPLPMDL0020000001	Akron	OH	44304	6/14/2013	Showed dr the OxyContin conversion chart at the front desk and asked him to continue converting patients from IR oxycodone to ER oxycodone. Dr said thanks. Nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44113	6/14/2013	Intro- Talked with Jessica/Amanda very familiar with all three products. Discussed Scott profile with Amanda, agreed Butrans would be appropriate for those uncontrolled pain patients and said Dr. prescribes alot of Tramadol.Intermezzo-asked if we still had trial offer cards, told to print<font color=blue><b>CHUDAKOB added notes on 06/19/2013</b></font>No OxyContin or OTC discussion.
PPLPMDL0020000001	Westlake	OH	44145	6/14/2013	Spoke with jacqui about any intermezzo prescriptions from dr Celeste and she said she has not seen any from him or any recently. Asked if there have been new Butrans scripts and she said yes from St. John. I told her I just spoke with Duncan and he said he has written some intermezzo and she said she has not seen any but she has seen OxyContin.
PPLPMDL0020000001	Cleveland	OH	44104	6/14/2013	Discussed Intermezzo Vignettes,indication,dosing, Dr, stated he sees alot of patients that meet this indication. Went over Butrans, initiation/dosing, Scott profile. Likes product and would find it utilized best in the nursing home/hospice setting. Asked if he prescribe for patients in his practice, and he said "The would try" patients like taking meds PO 3-4x a day<font color=blue><b>CHUDAKOB's query on 06/19/2013</b></font>Mark, look at your next call objective. How will this help you move the sales process forward? The next call objective should be about moving the process forward assuming you will see the physician.<font color=green><b>GUTKOWA's response on 06/20/2013</b></font>By finding out locations and times this will allow me access and a opportunity to move the sale process forward thru discussions. At his present office location the only way to see him is thru lunch, which are booked until Sept.<font color=blue><b>CHUDAKOB added notes on 06/20/2013</b></font>Thanks for your response. The next call objective relates specifically to what will happen on the sales call. Once you get in front of him again, what will you do?
PPLPMDL0020000001	Cleveland	OH	44104	6/14/2013	Briefly talked Hakeem, no new prescribers, suggested Dr. Barry in the bldg (Faith Medical Group) Requested OxyContin Savings card<font color=blue><b>CHUDAKOB added notes on 06/19/2013</b></font>I know we discussed this, but a reminder to only include the products discussed on the call. I do not see any reference to Butrans or Intermezzo.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	6/14/2013	Spoke with randy the pharmacist about the intermezzo doing and indication guide which he said they do not stock or dispensed. I discussed the OxyContin FPI and advised him to read section 9.2. I showed him the dosing and titration guide for Butrans and he said he has a few patients on it and all have said it works well for their pain. I explained the titration and use of supplemental analgesia if necessary.
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	Westlake	OH	44145	6/14/2013	Discussed OxyContin FPI change. Dr said he has a lot of chronic pain patients because pain management is not able to treat patients all the time and they end up sending his patients back to him still in pain. Dr said he has patients wanting OxyContin because they like the high. I asked the dr if that is what they are telling him and he said this is what he knows. He said he knows because the patients request OxyContin when he has prescribed something different. I asked if these patients may still be in pain and that is why they are asking for something. I reminded him that OxyContin can still be abused and patient selection is important. I reminded him that there may be patients I his practice who are being treated with Percocet around the clock and have been on Percocet for several months. Reviewed OxyContin conversion and titration guide. Discussed Butrans conversion guide and Butrans dosing and administration. Dr asked about efficacy data and I reviewed the opioid naive trials and he wanted data on opioid experienced patients and I reviewed pain reduction, open label screening and percent of 20 mcg tolerance patients. Warned the dr about respiratory depression with opioids and let him know he could use supplemental analgesia. Reviewed how to write and let him know he will have to educate patients on how to use Butrans. Reviewed dosing and administration of intermezzo
PPLPMDL0020000001	Cleveland	OH	44104	6/14/2013	Discussed product portfolio, Dr said he likes the BID dosing and the flexible dosing strengths OxyContin provides, doctor likes to use Butrans in nursing homes for elderly patients, discussed Scott profile, Tramadol failures, Initiation/Titration, said he will keep that in mind. Intermezzo vignettes, indication/ dosing Leaving the country for 17 days
PPLPMDL0020000001	Stow	OH	44224	6/14/2013	Spoke with Greg the pharmacist about any taints being initiated on intermezzo? Greg said none that he knows of. Greg asked if it is covered on Medicare or Medicaid? I explained the Caresource coverage and failing Ambien. I asked about his Butrans starts and he has most are on the 5 mcg and he is seeing titration to the 10mcg for most of those patients. I explained the conversion guide and discussed titration. Left him the OxyContin conversion guide. Greg reminded me he doesn't fill it.
PPLPMDL0020000001	Hudson	OH	44236	6/14/2013	I asked Galiana the pharmacist if she is seeing any prescriptions from Unity Health drs Tosino, Russ and Seiple? She said she sees most pain medicines from Seiple and 1 from Butrans. I asked if she is filling butrans often and where are they coming from. Galiana said that they see some prescriptions from Fouad and Lababidi but said she only has a couple of patients from them on Butrans. I asked if she is dispensing OxyContin? She said she is but just about all of them have been on it or a long while and they are refills. Galiana said they don't have many new at all.
PPLPMDL0020000001	Westlake	OH	44145	6/14/2013	Dr was eating while I was talking and was running behind. She did not answer my questions. I reviewed Butrans stating that Butrans allowed her to treat patients in pain with 4 patches a month. Reviewed pain reduction from opioid naive clinical trials. Asked dr what would keep her from prescribing Butrans and she said cost. I explained the savings card and vouchers. I asked if this clarified who should use Butrans and what other information she needed in order to prescribe. No answer. Reviewed FPI change for OxyContin. She said she knew about intermezzo. Dr excused herself and left.
PPLPMDL0020000001	Cleveland	OH	44102	6/14/2013	Talked with Ed, discussed key clinicians at the facility(Nouraldin, Degolio)believes Butrans is under utilized in facility, suggested non-branded in service.<font color=blue><b></b></font>CHUDAKOB's query on 06/19/2013</b></font>If he believes Butrans is underutilized don't you think an in-service by you on Butrans to his staff and his nursing staff would also be very beneficial. They can't increase usage if they do not know about the product or how to use it, don't you think?<font color=green><b></b></font>GUTKOMA's response on 06/24/2013</b></font>Totally agree and offered to do that, but he suggested to focus on visiting physicians(Nouraldin, Degolia etc. I am going to request again a Butrans in-service instead of a non-branded in service by Cindy.<font color=blue><b></b></font>CHUDAKOB added notes on 06/24/2013</b></font>OK. Let me know how this works. You can get a non-branded from Cindy, but let's get them to understand the product first. As an aside, notice the products presented and the call notes.
PPLPMDL0020000001	Cleveland	OH	44127	6/17/2013	Discussed Butrans, savings card, patient instruction booklet, caresource. Dr said she will continue to look for appropriate patients. Intermezzo, indication, dosing and 5 day trial cards. Invited to upcoming Laham program, and said she will attend
PPLPMDL0020000001	Cleveland	OH	44113	6/17/2013	Briefly discussed Butrans hospital formulary process. Justin referenced CCF main campus as a start. Pharmacy is owned by ExactCare Pharmacy.
PPLPMDL0020000001	Cleveland akron	OH	44333	6/17/2013	Quick discussion in hallway about Butrans And the tramadol patient. I also told him about the Medco Medicare part D pan addition to e formulary coverage. I told him to identify patients on tramadol and Medco medicare D. Nothing else learned.
PPLPMDL0020000001	Beachwood	OH	44122	6/17/2013	I made a drop-in visit to meet w/ ADON, Cathy Cigli to discuss Purdue's Nurse Educator Program. I spoke w/Chris who paged Cathy. I met w/ Cathy who informed me that it would be best and she would prefer that I talk w/ their "new" D.O.N. Susan LoDolce. Cathy said," she is very hands on. It would be best if you could wait until next month we are currently under the correction process with the state, nothing big, but I'm sure she won't have anytime until she gets that taken care of."
PPLPMDL0020000001	Lakewood	OH	44107	6/17/2013	Let pharmacist know there is no ab equal for Intermezzo. Asked about any insurance changes for OxyContin or Butrans. Shared formulary win for Butrans and asked if she was aware of any pain doctors I should let know this information. She said all the pain doctors should be aware of this because she has had patients get the free trial and then not have the right insurance to get Butrans filled.
PPLPMDL0020000001	Akron	OH	44312	6/17/2013	Dr closing up office for day but gave me a second. I asked dr if she has initiated Butrans for any of her patients on Ultram? Dr said she has but most recently used it for a vicoden patient. I asked her for more information but dr told me to come in last in the week because she needs to finish charts so she can leave for the day.
PPLPMDL0020000001	Cleveland	OH	44122	6/17/2013	I called Francine Young on 6/14 to remind her of the in-services scheduled for Monday 6/17 @ 10:30 & 3:30. She informed me that She forgot to post it and asked if we we could just do the 10:30 in-service and reschedule the 3:30. In-Service on pain management was completed @10:30 for the nursing staff, 9 were in attendance. A discussion and interaction took place on the The CPP and Medical director was confirmed
PPLPMDL0020000001	Akron	OH	44312	6/17/2013	Dr told me he wanted dosing and titration information for Butrans. I provided him with the initiation and titration diode and reviewed it quickly with him. I asked dr to initiate it early on in treatment for patients failing on tramadol or vicoden. Nothing else learned.
PPLPMDL0020000001	Lakewood	OH	44107	6/17/2013	Asked how butrans patient was doing and dr said the patient was doing good. I reviewed the titration guide and discussed supplemental analgesia opioid and non opioid. Discussed the START principle
PPLPMDL0020000001	Lakewood	OH	44107	6/17/2013	Spoke with Stephanie about OxyContin FPI change. She said the change happened awhile ago and I confirmed and let her know the FPI just changed to reflect the reformulation change. She said a lot of dr elgazzar patients come to this location because it is close to the office. She knew about intermezzo and had a doctor writing. She was only aware of one patient on Butrans. I reviewed the titration guide and asked her about high tramadol writers in the area. She said that is hard to say
PPLPMDL0020000001	Akron	OH	44333	6/17/2013	Quick hello at front desk. Dr asked me what's new and I told him about the Medco/ ESI Medco Medicare D plans and asked him to continue prescribing it early on in treatment. Dr told me to give it to Linda to fax to the home office. Dr said he is glad to finally hear about Medicare coverage. Left dr with an OxyContin conversion and titration guide.
PPLPMDL0020000001	Cleveland	OH	44113	6/17/2013	Discussed challenges in treating patients with chronic pain, Dr. stated her confidence in Butrans and feels its less abusable, I said that Butrans has the same misuse and abuse potential as any opioid. Went over Initiation/Titration. OxyContin flexible 7 dose forms
PPLPMDL0020000001	Lakewood	OH	44107	6/17/2013	Quick call. Just gave a reminder of for OxyContin with Percocet page of titration guide and asked dr to keep in mind patients already on oxycodone ir around the clock. Asked dr to think of butrans for patients not controlled on tramadol.
PPLPMDL0020000001	Fairlawn	OH	44333	6/17/2013	Some to Pam the technician. I explained intermezzo indication and dosing and the limitations of use. Pam said they have not filled it and do not stock it. I discussed the OxyContin FPI and section9.2 I asked if they have seen Butrans or if Pam knew about it? Pam said she was trained on it but forgot it is a schedule 3 and the 7 days. Pam said they have only filled it once or twice.
PPLPMDL0020000001	Cleveland	OH	44113	6/17/2013	Discussed Butrans and patient population. Gain understanding of Dale's scope of responsibility in practice. He sees mostly new patients, does alot of inpatient rounding. Stated Butrans non formulary status in Hospital(CCF) believes that does hinder prescribing habits. OxyContin 7dose strengths and comprehensive formulary coverage
PPLPMDL0020000001	Beachwood	OH	44122	6/17/2013	I made a drop-in visit to speak w/ Cheryl Grim and discuss Purdue's Nurse Educator Program. I spoke w/ the receptionist, Janet who informed me that Cheryl was not in today. I left my BC
PPLPMDL0020000001	Fairlawn	OH	44333	6/17/2013	Spoke with Kristen the pharmacist about intermezzo and discussed the indication, doses and limitations of use. She said she had heard of it but they do not stock it or have any filled to her knowledge. Discussed OxyContin FPI update and advised her to read section 9.2. Kristen said she forgot about the 15mg dose. Explained Butrans dosing and indication.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/18/2013	Told Tiffany abo intermezzo dosing and asked her if she has seen any since my last visit? Tiffany said no because it is too tough to get from an insurance perspective. I explained the Caresource coverage. Gave her the Scott profile for Butrans and explained appropriate patient types. Did the same with OxyContin and discussed Tom.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	6/18/2013	Follow up with Darlene about the Caresource PA she completed last week for Butrans. Darlene said that it did get approved today. I was also told that dr Azem looked back to another patient who has Caresource who wanted to give Butrans to and got it approved as well. Darlene said thatshenhad also approved two other Butrans prescriptions this week. One for anthem Bc/b's and the other for a medical mutual. I thanked Darlene for all her hard work getting Butrans approved.
PPLPMDL0020000001	Parma	OH	44134	6/18/2013	Placed a call to Linda Belford in Staff Development, to re-schedule the Butrans Luncheon w/ the NP's and talk with her about scheduling a in-service on Butran's for the nursing staff. N/A I left a msg.I recv'd a phone call back from Linda Belford. The Butrans lunch for the NP's was rescheduled for 7/2 @12 noon and a Butrans in-service was scheduled for 7/15 @ 2PM for the nurses.
PPLPMDL0020000001	Akron	OH	44310	6/18/2013	When dr saw me today he told me that he sees me just about every week now and told me that he just did a Harris survey online about how often he sees pharmaceutical sales reps. I asked dr if I am in front of him too often? Dr said no. I asked him if I provide him value each time I see him in which he agreed I do. I showed him the Butrans conversion scale and told him and Char to put on in their labcoat or pocket to help them remember Butrans. Dr said ok and will continue to write.
PPLPMDL0020000001	Cleveland	OH	44113	6/18/2013	Discussed Intermezzo vignettes, Dr. stated indication and dosing, has numerous patients that complain about Middle of the night awakening.Talked about Butrans and patients that are doing well on,still some insurance issues occasionally with Caresource but getting more PA's approved(Melissa is handling issues),asked dr if he will continue starting more patients on Butrans in thist- week? dr said yes he will. OxyContin 7 tablet strengths and flexibility. Dr stated not prescribing C2
PPLPMDL0020000001	Solon	OH	44139	6/18/2013	I placed a phone call to Judith Sawtner to re-schedule the in-service cancelled on 6/7. I recv'd her voice-mail, I left a msg.
PPLPMDL0020000001	Cleveland	OH	44128	6/18/2013	I placed a phone call to RoseAnne Howell to confirm the in-service on pain management for 7/19 starting at 6am. N/A, I left a message on her voice-mail. I recv'd a phone call from RoseAnne Howell confirming the in-services for 7/19 starting at 6am.
PPLPMDL0020000001	Cleveland	OH	44122	6/18/2013	Note Cont. from 6/17/2013 Discussion and interaction took place on the barriers of Pain in the elderly and the consequences of unrelieved pain. The Medical Staff was updated. The Medical Director is Jill BarryNP's Amy Koosliish & Maggie work w/ Dr. Rajesh Agarwalli MariAnne Barchanowitz, NP works w/ Dr.Ghasan Haddad
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/18/2013	Dr asked for more OxyContin copay cards but told me the is finding success with Butrans. I asked where and he told me in patients older who are not surgical candidates and have chronic pain. I asked what short acting medicine patients have been on previously? Dr said all over the board but a lot of tramadol and vicoden. I asked dr to titrate to 20 when necessary and to read the efficacy results in the clinical trail of opioid experienced patients. Dr said he would.
PPLPMDL0020000001	Cleveland	OH	44113	6/18/2013	Informed Rhonda of update to the State of OH NP prescribers list (Officially adding Butrans to formulary list) Intermezzo vignettes/indication and dosing. Rhonda agreed she sees patients that suffer MOTNA. Went over Butrans, Scott profile, Initiation and Titration. She agreed she sees patients like this everyday.Asked for those Lorlab/Norco patients that are not adequetly controlled. OxyContin flexible dosing and 7 tablet strengths.
PPLPMDL0020000001	Cleveland	OH	44105	6/18/2013	Briefly discussed all three products,dosing and the initiation/Titration of Butrans. Hasnt seen any new Butrans scripts
PPLPMDL0020000001	Akron	OH	44305	6/18/2013	Good discussion with Matt about all products. Matt said he saw a couple of intermezzo scripts a while ago but nothing recently because he knows many patients have a tough time getting it due to PA's. I asked about his dispensing of Butrans? Matt said he gets about 1 a week most from pain management. Matt said he had one last week where a patient was titrated from 10 to 20 mcg. Matt said he had to order the 20mcg. Explained the new Medicare D coverages and commercial matrix. I asked if he is seeing OxyContin prescriptions that are new? Matt said he mostly sees refills from Medicaid plans like Caresource and Buckeye. I asked if he is seeing PA's for Buckeye? Matt said he does but the drs get it pushed through. Explained the OxyContin savings cards.
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PPLPMDL0020000001	Cleveland	OH	44109	6/18/2013	Met with Sue in Anes/Pain Mgmt 4floor. Presented LELE program info with Marc Gonzalez, left his contact info for her to follow up with. She thought it was a great opportunity to present to their in coming Fellows/Residents and whole hospital staff. Left Butrans Initiation/Titration Guides along with FPI and PI's for Butrans/OxyContin Respectively
	Uniontown	OH	44685	6/18/2013	Dr started out by saying he thinks he prescribed Butrans to a patient recently but said he couldn't remember anything about it. I told him that I believe he did and dr said he can't remember what e patient was taking. I discussed with him the patient types ideal for Butrans, appropriate initiation dose, titration, clinical studies proving efficacy, proper skin prep, and application sites. I reminded dr Butrans is a schedule 3 opioid. Dr said that he does prescribe all types of opioids and he feels Butrans is a great option for his patients not tolerating or failing efficacy wi the short acting. I asked dr to initiate early in treatment.I asked dr to continue to prescribe and prescribe often. Dr said ok he will try. Discussed the OxyContin FDA findings and FPI update. I asked dr to evaluate his IR oxycodone patients for ER oxycodone and asked him if he agrees to that? Dr said he tries to get most of his patients on ER products when they need something for an extended period of time. I asked him to also identify patients for intermezzo.
PPLPMDL0020000001	Cleveland	OH	44114	6/18/2013	Intermezzo vignettes/indication and dosing, Elaine agreed she sees patients that suffer MOTNA. Went over Butrans,Scott profile, Initiation and Titration, She agreed she sees patients like this everyday.Asked for those Lortab/Norco patients that are not adequately controlled. OxyContin flexible dosing and 7 tablet strengths.
PPLPMDL0020000001	Tallmadge	OH	44278	6/18/2013	Quick hello at counter and told him I'm leaving a patient profile for Butrans that we had discussed last time at lunch. I told dr I'm trying to keep Butrans front of mind for his failing tramadol patients. Dr said ok and took the Scott profile.
	Euclid	OH	44117	6/18/2013	Upon arriving @ 7am to complete an In-Service on Defining Key Terms in Pain Management, I was informed by D.O.N., Kathy Nemeth that a State Survey was in process. She stated,"I'm so sorry, but we are going to have to cancel the 2PM and 3Pm in-services scheduled for today, I cannot afford to have anyone off the floor, but I will allow the 7AM in-service for night shift whose shift is ending." In-Service completed, 7 were in attendance.
PPLPMDL0020000001	Akron	OH	44307	6/18/2013	Handouts on Defining Key Terms in Pain Management and a brochure on How To Stop Drug Diversion & Protect Your Institution was reviewed w/ the staff. Led with communication insight and asked him how he deals with busting his patients provide him with all the information he needs to make his decision on treatment? Dr said it is difficult because patients withhold so much information. Dr said it takes time but usually finds out what he needs. I asked him about communicating about pain and how Butrans can fit. I explained how a transdermal administration can foster good discussion with his patients and explained how to discuss it with the patients. Reviewed all key selling messages and reviewed Bup 3015 hitting all efficacy messages. I discussed Scott and nancy profiles and asked if Butrans is a medicine he will use? Dr said he would like to have all of his patients on IR opioids on ER products and that he believes it works. I asked him then if he will prescribe it? Dr said yes. I explained the OxyContin FPI information and recent FDA decision. I asked dr to move his Percocet patients to ER oxycodone. Dr agreed and he would rather have them on more ER products again. Showed dr the intermezzo dosing guide and asked for his commitment to prescribe
PPLPMDL0020000001	Richmond Heights	OH	44143	6/18/2013	I made a drop-in visit to speak with Aldona Bur to talk about future in-service opportunities. I spoke w/ receptionist, Darlene who informed me that Aldona no longer is employed at Grande Pointe. Sheila Harris, RN is the new Education Liason. An appt. is recommended.
	Akron	OH	44305	6/18/2013	Showed dr the Scott profile for Butrans and asked him if it makes sense to him that the patient should be placed on Butrans? Dr said it does and he is trying to find patients that fit the profile. I asked him to continue to look for the signs from the patient that requires a change in therapy and asked him what they are? Dr said pain in walking or limited movement, and discussion about their pain level. I showed dr the Tom profile for OxyContin and asked him if it makes sense to initiate OxyContin. Dr agreed again and said he will do that because its an easy switch. Gave him th dosing guide for intermezzo and asked him to identify patients with in the middle of the
PPLPMDL0020000001	Richmond Heights	OH	44143	6/18/2013	I made a drop-in visit, to speak w/ Joan Southard to remind her of the in-service scheduled for July 10th @ 2:30 on pain documentation.I left my BC.
PPLPMDL0020000001	Cleveland	OH	44102	6/19/2013	Discussed his practice and protocol for treating pain.Dr said he has brought back some of his pain patients feels its his duty He said these were the good patients. I said he should consider Butrans which is a schedule 3 and gives him an option after ultram and before Vicodin. He said that sounds like a good strategy and will allow him to not see the drug seeking patients. I told him Butrans has the same abuse,misuse as any other schedule3, He said he understood. Referring any OxyContin patients out to Pain Specialty We discussed the opportunity he had to help patients with motna and how intermezzo fits into his practice. I asked Dr. if he will consider Butrans and Intermezzo for appropriate patients and he agreed.
PPLPMDL0020000001	Cleveland	OH	44109	6/19/2013	Quick reminder on OxyContin TTablet strengths and Butrans Workers Comp.patients. Dr. said he will see what he can do this week.
PPLPMDL0020000001	Westlake	OH	44145	6/19/2013	Quick window call follow up. Reminded dr that he wanted more information on Butrans and I provided him with opioid experienced clinical trials and OxyContin conversion guide. No new information gained.
PPLPMDL0020000001	Westlake	OH	44145	6/19/2013	Dr not available at window but spoke with ma about vouchers for butrans. Reviewed dosing of OxyContin.
	Akron	OH	44303	6/19/2013	Rod told me today that he got his first Butrans prescription last week. Rod told me that it was from dr Souzdanitski in Cuyahoga falls. Rod said that it took some effort from his office to get approval for it but got it completed and the patient will be picking up the month of 5mgc today. Told him about the new Medicare d coverage. Of told me he is still seeing OxyContin prescriptions but the majority are refills and from pain management except for Oyakawa. Discussed the savings cards. Gave him intermezzo information including dosing and administration. Rod said until it gets on Medicare or Medicaid he probably will not see any. Told him about Carsource with intermezzo.
PPLPMDL0020000001	Munroe Falls	OH	44262	6/19/2013	Caught dr while she was heading out the door and handed her the Butrans conversion slide guide and asked her to keep it with her to remind her about the patient types she needs to identify. Dr said thanks for the reminder and will keep it with her. Nothing else learned
PPLPMDL0020000001	Akron	OH	44333	6/19/2013	Becky asked me if Butrans is indicated for acute pain? I explained to her the indication and contraindications of use. I discussed with her the patient type selection for Butrans and appropriate staring dose, appropriate skin application and skin prep. I asked Becky to identify patients because she told me not all of her patients have acute pain. Asked her to not just refill the Percocet and to consider OxyContin for those patients. Discussed intermezzo card and dosing.
PPLPMDL0020000001	Cleveland	OH	44109	6/19/2013	Left invites to upcoming Butrans Laham program for Fellows in Anes./Pain Mgmt
PPLPMDL0020000001	Fairlawn	OH	44333	6/19/2013	Dr told me that he started a patient on Butrans last week. I asked for to provide information about the situation. Dr told me that he thinks the patient was on tramadol and initiated the 5mgc patch. I reviewed that conversion from tramadol and based on the patient being under 300mg of tramadol that he made the right decision. I asked dr for continued use of the product and discussed new Medicare D update. I asked dr to continue doing what he has been doing with OxyContin which is to switch patients on IR oxycodone. Quick mention of intermezzo dosing and patient identification.
PPLPMDL0020000001	Cleveland	OH	44106	6/19/2013	MSL attended PRA monitoring visit with CRA Bill Thornton. Met individually with Dr. Speicher and Sue Bargent, study coordinator. MSL provided study updates, discussed pre-screen history with PI, and discussed outreach to pediatric specialties, including palliative care, hematology/oncology, and others. MSL met briefly with research pharmacist and provided study update.
PPLPMDL0020000001	Westlake	OH	44145	6/19/2013	Spoke with Jacqui about intermezzo dosing and administration. Reviewed conversion table for butrans and discussed supplemental analgesia. Asked about Vicodin strengths. Discussed the start principles of OxyContin. She asked about OxyContin generics and I explained that there were none
PPLPMDL0020000001	Westlake	OH	44145	6/19/2013	Spoke with Lisa about intermezzo dosing and administration and no ab equal. Gave Butrans conversion from tramadol and explained that I am asking drs to consider Butrans before Vicodin or Percocet. Asked if the 15 mg OxyContin dose was prescribed. She said not much
PPLPMDL0020000001	Cleveland	OH	44128	6/19/2013	In-Services completed @ 6AM,6:30AM, 1:30PM, 2PM, 3:30PM & 4PM for nurses on Pain Management. 12 nurses were in attendance. Discussion/interaction on barriers in treating pain in the elderly and consequences of unrelieved pain took place. The Patient Comfort Assessment Guide and the Wong-Baker Pain Assessment tool was handed out and reviewed with the nurses.I talked with Roseanne Howell in Staff Development and an in-service on Pain Documentation was scheduled for 8/14. CPP was confirmed as Omnicare of Wadsworth and the medical staff information was also updated.
PPLPMDL0020000001	Westlake	OH	44145	6/19/2013	Quick window call. Asked dr to consider the efficacy of butrans in opioid experienced patients and showed the pain reduction. Showed the flexible dosing of OxyContin.
PPLPMDL0020000001	Akron	OH	44320	6/19/2013	Dr told me when she saw me that she started a patient on Butrans this morning. I asked for more information and she told me that the patient came from pain management after she was tapered off Percocet and is only taking it 1-2 times a day for chronic back pain. Dr said she initiated on the 10mgc dose and thought it was appropriate. I showed dr the appropriate starting doses from the approximate conversion scale. Dr said she referenced it and will adjust the dose as necessary. I asked for continued business. I gave quick review of the start principles for OxyContin. Dr said ok and needed to get back into the exam room. I left her the intermezzo
PPLPMDL0020000001	Akron	OH	44313	6/19/2013	I showed dr the OxyContin conversion guide and showed him the 1 to 1 ratio from IR oxycodone. I asked him to initiate patients on the 10mg dose and told him how 20mg of Percocet is 10mg of OxyContin q12h. Dr took the guide and looked at it. I handed him the Butrans conversion guide and asked him what he dose with a tramadol patient who needs a dose adjustment? Dr said he would push them to vicoden and said he can see how Butrans would be a good product to use. I told him about conversions and appropriate starting doses. Gave Tina the managed care card for OxyContin and Butrans.
PPLPMDL0020000001	Westlake	OH	44145	6/19/2013	Told dr I wanted to pick up where we left off with and that was providing him with clinical data showing efficacy and tolerance of Butrans so he feels confident prescribing. Reviewed opioid experienced study design, open label titration to 20, # of patients, pain reduction scores for 5 and 20, over 50% had improvement of 30% or better. Discussed Scott profile and said he had patients in his waiting room like Scott and he said no he did not because his patients are on Vicodin or Percocet and I redirected him to the study and showed him most of the patients in the study were on hydrocodone. He asked way they took for breakthrough and I said ibuprofen or acetaminophen. I said I have another patient type to discuss with him at our next lunch. I asked what else he needs to feel confident writing Butrans and he said information on Vicodin and Percocet patients. Dr said he does not go over 20 mg for OxyContin and I asked what he did for patients on Percocet around the clock for several months and he said he keeps them on Percocet. I asked why Percocet 1 or 2 as needed 4 times a day instead of oxycodone twice a day since he prescribes oxycodone anyway. He said OxyContin has a bad image. I asked if he ever reassesses his pain to see if patients can be reduced since there is a 10 and 15. He said once they get something they never want to go down and after 20 he tells them they have to get out of his practice. Gave Intermezzo indication and limitation of use.
PPLPMDL0020000001	Fairlawn	OH	44333	6/19/2013	I asked Robin if she knows where the one prescription of intermezzo came from? She said she didn't know and she didn't really have time to look into it. I gave her the dosing guide and asked her if she has seen any more Butrans since my last visit? Robin said she doesn't because she didn't dispense it. Left her with the OxyContin conversion and titration guide and made a point about 1 to 1 ratio from IR oxycodone to OxyContin. .
PPLPMDL0020000001	Fairlawn	OH	44333	6/19/2013	First opportunity to give full presentation on Butrans. Discussed all key selling messages including schedule 3 7 day transdermal system, dosing, titration, patch description, patient type section, application sites, efficacy, and safety. Dr asked about conversion from fentanyl. I explained that patient as a patient not necessarily for Butrans and discussed how there are no head to head studies. Explained how Butrans should be used early on in the treatment of pain and reviewed Scott profile. I asked dr what he is doing after tramadol and dr said typically moved to another IR opioid. Dr said he can see how Butrans would be a good fit and admitted to using it early on but hasn't used it since. Reviewed savings cards and formulary coverage. Dr said he will look for patients. Explained OxyContin patient types and when to use the product. Conversations and titration as well. I asked dr to identify patients for intermezzo and reviewed indication, dosing and limitations of use.
PPLPMDL0020000001	Akron	OH	44320	6/19/2013	I reviewed the patient types for Butrans and provided updated formulary information. Dr told me she has one prior authorization for Butrans that she prescribed last week. I asked about it and she said the patient is coming back from pain management where they tapered her off of most of her Percocet and she is taking about 20mg a day. Dr said the patient is a dual eligible with cvs Caremark and state Medicaid. Dr said she should be able to get it approved. I reminded her of the conversions scale and told her to prescribe OxyContin for her Percocet patients.I asked dr to identify patients for intermezzo.
PPLPMDL0020000001	Beachwood	OH	44122	6/19/2013	I made a drop-in visit to speak w/ Cheryl Grim and discuss Purdue's Nurse Educator Program. I spoke w/ the receptionist, Janet who informed me that Cheryl was in "morning meeting" and will not be out for another 25-30 minutes. I mentioned that I will stop back later today. Janet informed me that their Administrator has left and that Pam Hartman is acting ADM.I returned at 1PM to speak w/ Cheryl Grim, i spoke w/ the receptionist, Janet who phoned Cheryl. Cheryl stated, "I am not able to meet with her because i am getting reading to jump on a conference call." I left my BC
PPLPMDL0020000001	Westlake	OH	44145	6/19/2013	Window call. I reminded dr that he had questions about Butrans lasting 7 days based on the pharmacokinetics and I told him I was leaving the opioid naive study for him to look over and pointed out the pain reduction scores. Showed the flexible dosing of OxyContin. Gave Intermezzo dosing reminder.



PPLPMDL0020000001	Stow	OH	44224	6/20/2013	Dr told me that he referred a patient to dr Souzalnitski because of the history of opioids did not match the patients pain level. Dr said he saw the patient back after the referral and dr Souzalnitski initiated Butrans. Dr Russ said he was glad to know Butrans was initiated. I asked dr if he will prescribe it himself. Dr said he plans to more knowing pain management feels comfortable with it.m I explained all patient profiles. OxyContin dosing and conversions and intermezzo dosing guide and asked him to identify patients meeting the indication.
PPLPMDL0020000001	Stow	OH	44224	6/20/2013	I showed dr the Scott profile and told him that we have had many discussions regarding appropriate patients for Butrans. Dr agreed and said he remembers. I told him that on a few occasions that he had has said that its going to take time. Dr said yes. I asked him what are you waiting for? Dr didn't know quite what to say but agreed. I asked again what he's waiting for? Dr said its just going to take time and said he wanted the slide conversion guide I gave him to help remind him. Gave him the conversion guide for OxyContin and dosing guide for intermezzo.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/20/2013	Spoke to Teri e receptionist for dr Black. I asked to schedule a lunch to discuss products and she told he that all drs do appointments individually and for dr Black she said he has requested to leave a business card that has an email address. If dr wants to meet he will send an email to schedule and appointment. Left Butrans and intermezzo dosing information.
PPLPMDL0020000001	University Hts Westlake	OH	44118	6/20/2013	Window call, Reminded of upcoming Laham program and both Butrans and OxyContin new formulary grids. Said he doesnt prescribe alot of OxyContin anymore but will keep in mind
PPLPMDL0020000001	Westlake	OH	44145	6/20/2013	Dr said he is bringing back some of his patients that he considers good and he is thinking about Butrans for these patients. He thinks giving them Butrans before they get on Vicodin will help. He said he still has a few OxyContin patients but he does not want to get back to prescribing OxyContin due to the issues he has had I the past. Dr said he has a place for intermezzo in his practice but he does not have any patients yet.
PPLPMDL0020000001	Westlake	OH	44145	6/20/2013	Gave intermezzo dosing and administration. Asked pharm tech about Vicodin strengths and formulations. He said there is some confusion and they are calling offices back. I shared butrans conversion from hydrocodone.
PPLPMDL0020000001	Westlake	OH	44145	6/20/2013	Quick window call. Discussed if the office needed vouchers and left senakot samples. Booked lunch and reviewed dosing for OxyContin
PPLPMDL0020000001	Cleveland Hts	OH	44118	6/20/2013	Dr. stated he has started a few patients on Butrans, so far so good. Verified with Savings Card being distributed. Asked for his continued support, said he will do that. Invited to upcoming Laham program, he said he will try to make it. Reminded of OxyContin seven tablet strengths, flexible dosing.
PPLPMDL0020000001	Cleveland	OH	44119	6/20/2013	Met with staff @ hospice. Introductory call. Dr Dann Ganzorn had stepped out for lunch. Left PAP Caregiver Guides & Yellow hospice caregiver guides. Left OxyContin FPI. Asked them to review & forward updates to section 9.2 to dr Ganzorn, medical director, they will place my business card & all items left on his desk.
PPLPMDL0020000001	Euclid	OH	44119	6/20/2013	Met with LPN Jen @ front window. Left July 8 Laham invite. Left packet on all 3 branded products for dr. Indication, core message presented to Jen & medical staff up front. Scheduled lunches through remainder of 2013.
PPLPMDL0020000001	Cleveland Hts Euclid	OH	44118	6/20/2013	Brief Indication/dosing for both Butrans/intermezzo.
PPLPMDL0020000001	Euclid	OH	44119	6/20/2013	First time at office as Purdue rep. Found out Dr Polster retired, Dr Hoppes practicing in Columbus area ( Mt Gilead). Met with Jen & office coordinator. Left packets of information on all 3 products with medical staff. Left same for PA-C Judy, who's also their office mgr. Core messages all products. they set QUARTERLY lunches& SAMPLING appointments. Able to set up lunches through end of 2013. (New Doctor starting Sept 1)
PPLPMDL0020000001	Westlake	OH	44145	6/20/2013	Quick window call. Reminded christin of Butrans for patients not controlled on tramadol.
PPLPMDL0020000001	Westlake	OH	44145	6/20/2013	Meghan let me give dr information on Butrans conversion and I asked him to review the opioid experienced patient study. Shared the flexible OxyContin dosing.
PPLPMDL0020000001	Hudson	OH	44236	6/20/2013	Very short discussion about products. It asked for his continued use of Butrans and showed him the Scott profile. Gave him the OxyContin conversion guide and quickly explained the start principles which dr said was good to review. Indication and dosing for intermezzo.
PPLPMDL0020000001	Cleveland Hts	OH	44118	6/20/2013	Asked Bridgit if she has seen any Butrans or intermezzo RX's from Harris, She said not yet, Pharmacist Ole, said once she gets a script she will start stocking. Reiterated indication for both Butrans and Intermezzo
PPLPMDL0020000001	Fairlawn	OH	44333	6/20/2013	I placed a call to Michelle Williams in Staff Development to schedule an in-service on Pain Management. N/A, left a msg. on her voice-mail.
PPLPMDL0020000001	Cleveland	OH	44130	6/20/2013	I met with Melenie Petropoulos and Tom Roth to discuss FPI for Oxycontin, Butrans, and Intermezzo. discussed Oxycontin generic issue and new information and study results in FPI. reviewed the various savings cards. they do not have a specific pt monitoring program, but Melenie said the state uses the OARS program that would catch people attempting to use multiple pharmacies. we have an appointment with them at NACDS. they discussed a ROC that I then called in when I got to my car.
PPLPMDL0020000001	Cleveland	OH	44195	6/20/2013	Visited Walker-Anes/Pain mgmnt, left Butrans Initiation/Titration guide with Rosenquist- Samuel, King, Berenger and Michaela for residents and fellows
PPLPMDL0020000001	Westlake	OH	44145	6/20/2013	Spoke with floating pharmacist about intermezzo indication and limitation of use and no ab equal. Reviewed Butrans conversion guide from hydrocodone and tolerance data from clinical trials for opioid experienced patients.
PPLPMDL0020000001	Akron	OH	44313	6/20/2013	Reviewed OxyContin flexible dosing and titration every 1-2 days if necessary.
PPLPMDL0020000001	Euclid	OH	44119	6/20/2013	Spoke with Sara the pharmacist about intermezzo dosing, limitations of use and indication. Sara said she has not seen any come through yet and dos not stock it. I explained the OxyContin FDA information and FPI update. Sara told me she has had a few patients that have come in to ask if the is a generic version of OxyContin. Butrans indication and dosing and explained Scott profile. Sara said that they have one patient from dr Souzalnitski that is in Butrans 10mcg and its the only dose they have in stock. I discussed the dosing and conversions and requested her to stock the 5mcg dose.
PPLPMDL0020000001	Euclid	OH	44119	6/20/2013	Left REMS flashcard. Asked floating pharm Audrey & tech Paula, to review section 9.2 of OxyContin FPI & pass info along to both Kevin & Laurel. They checked a few existing scripts for me & both were written for a q 12 h dosing. They understand now that our recommended dosing is q 12 h. intermezzo, none on shelf, none dispensed. Detailed all key messages, left 2 patient guides& pharmacists guide. Butrans, none on shelf, not dispensing.
PPLPMDL0020000001	Euclid	OH	44119	6/20/2013	Key messages for Butrans, left 2 patient guides.
PPLPMDL0020000001	Euclid	OH	44117	6/20/2013	Met with nurse Joan. Found out doctors wife is office mgr. (dr has special interest in diabetes) limited hours. They DO accept CARESOURCE & BWC. Detailed core messages for all 3 products with Joan. Reviewed how savings & trials should work for my branded products. Joan remembered being detailed on Butrans a while back. Left Intermezzo patient guides. Stop back in & meet dr & his wife.
PPLPMDL0020000001	Euclid	OH	44117	6/20/2013	An In-Service was completed on Constipation for the nurses. 3 were in attendance. A discussion and interaction on risk factors of constipation, complications of chronic constipation as well as the signs and symptoms of constipation took place. The Senokot laxative protocol was handed out and reviewed. The SPM in-service was cancelled d/t no attendance.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/20/2013	I asked dr why he isn't using the 10, 15 or 20mg doses? Dr didn't really answer the question but said that he has a threshold of 30-49mg of Percocet before he moves to ER opioids. I showed him the conversion scale and told him that 40mg of IR oxycodone is 20mg of OxyContin q12. Dr said he knows and then said its tough to get through insurance. I explained the commercial insurance of OxyContin. Noting else learned.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/20/2013	I asked dr how he decides who is appropriate for OxyContin? Dr said it depends on what the patient is bing treated for. Dr said for patients with cancer it is good or for happiness with severe pain. I showed dr the conversion guide and asked him if he starts patient on 10mg if patient is less than severe because the indication is for moderate to severe? Dr said ok and looked at the conversions. Nothing else learned.
PPLPMDL0020000001	Stow	OH	44224	6/20/2013	Short discussion over lunch about his philosophy about treating pain. Dr said that he does treat pain but will not treat chronic pain. I asked dr how he classifies chronic pain? Dr said when a patient needs long term opioid therapy. I asked him if he has used Butrans? Dr said that he has used Butrans in the past and had good luck with it. I asked him why he isn't continuing to use it if he has such good results. Dr said he isn't making it a regular thing because he doesn't see many pain patients. Dr said he will refer to pain management when a patient has pain that requires injections or surgery and usually is a good judge of that. I explained Butrans and all key selling messages. I asked dr to continue using it. Discussed OxyContin briefly and where he should be using it. Quick hit on intermezzo and dr said he knows it well but has not used it. I asked dr to identify patients who tell him that have sleep maintenance issues.
PPLPMDL0020000001	Hudson	OH	44236	6/20/2013	Good discussion about oxycontin identification of patients using the patient profiles. Dr said he is more prone though to using Butrans because he feels more comfortable using it as it is a schedule 3 and transdermal patch. Dr explained to me how he does believe that the product is best used if it is initiated early because patients on too much vicoden or Percocet are less likely to be willing to move to a patch. I explained the Scott and nancy profiles and dr agreed to both and admitted he should be using it. Dr said he just needs to remember it. I asked for him to identify patients appropriate for intermezzo.
PPLPMDL0020000001	Akron	OH	44319	6/21/2013	Spoke to the pharmacist about intermezzo dosing and indication and showed placebo pill packs. He said that they have not filled any and probably won't because of poor coverage. I asked how he knew what the coverage was if he hasn't dispensed it? He said he heard how hard it was got get approved. I explained Caresource coverage and commercial grid. I told him about Butrans schedule 3 and 7 day transdermal system. He said he sees lots of vicoden and Percocet along with ultram. I explained patient types for Butrans. OxyContin dosing guide and intermezzo dosing.
PPLPMDL0020000001	Barberton	OH	44203	6/21/2013	Spoke with Angie about intermezzo not having an ab equal. Reviewed Butrans conversion from 15-40 mg of hydrocodone. Discussed OxyContin flexible dosing.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	6/21/2013	Made drop-in visit to Nancy Strausser, in Staff Development to talk w/ her about scheduling a date for an in-service on pain management. She was unavailable. I left my BCI placed a phone call to Nancy Strausser, N/A, I left a msg. that I would be in the area on 6/25 & 6/26 and would like to meet with her if possible.
PPLPMDL0020000001	Cleveland Akron	OH	44125	6/21/2013	Had tech follow up with Christine in regards to OxyContin Savings card, can be used for 10 day supply. No new Butrans prescribers
PPLPMDL0020000001	Barberton	OH	44203	6/21/2013	Dr was talking with his ma about a patient who is on vicoden and was in to get more after 20 days of the last prescription. Dr saw me and told me that he needs to make a switch to another medicine and what the conversion from vicoden is to Butrans. I discussed the nancy profile and showed him the approximate conversion chart. I also explained the new formulary updates and asked him to switch the patient to Butrans. Dr said he will discuss it with her when she gets into a room. Nothing else learned.
PPLPMDL0020000001	Barberton	OH	44203	6/21/2013	Spoke with dr about Percocet patients taking round the clock meds for several months and her thoughts on OxyContin for these patients. She said insurance and I communicated that oxycontin is covered in 90% of the plans. I asked if there was a reason she did not prescribe butrans and she said insurance. I communicated the formulary win for Medco part d. Gave intermezzo dosing and administration.
PPLPMDL0020000001	C. Falls	OH	44223	6/21/2013	Spoke with Cindy the pharmacist and Denise the tech about Butrans formulary coverage. Discussed Medicare D coverages and asked about dispensing. Cindy said they are filling them now for dr Natouze and dr Souzalnitski. Denise who does the PA's said her success with them is about 70-75% and said that Caresource is the easiest and Medicare is the toughest. Discussed intermezzo dosing and indication and OxyContin copy cards and formulary coverage. Denise said she just got an OxyContin approved on Buckeye.
PPLPMDL0020000001	Barberton	OH	44203	6/21/2013	Spoke with Melissa about dr Patel and butrans usage and she said he is using a little bit. Asked her to give the nancy patient profile to dr and explained that low dose hydrocodone patients needing a dose adjustment should be considered potential Butrans patients
PPLPMDL0020000001	Barberton	OH	44203	6/21/2013	Rescheduled lunch with Debbie and reviewed Butrans Scott patient profile.
PPLPMDL0020000001	Barberton	OH	44203	6/21/2013	Reviewed dosing and administration of intermezzo. Discussed Butrans conversion from hydrocodone and showed appropriate butrans doses. Asked about Vicodin and pharmacist said they are making office calls. Reviewed OxyContin and let him know about the lower doses.
PPLPMDL0020000001	Akron	OH	44313	6/21/2013	Stopped by to confirm Richard Lynch of In-service on Constipation - June 25th @PM-
PPLPMDL0020000001	Barberton	OH	44203	6/21/2013	Gave intermezzo dosing and administration. Gave pharmacist information on Butrans dosing with supplemental analgesia. Reviewed OxyContin flexible dosing and discussing titration 1-2 days 25-50%
PPLPMDL0020000001	Akron	OH	44312	6/21/2013	Discussed the opioid experienced trial with dr hitting all efficacy points, use of supplemental analgesia and titration. Dr told me that he has a patient who has Medicare that he is considering putting on Butrans. Dr said pt is currently on vicoden and wants more. Dr said it is a chronic low back condition. Dr asked about Medicare coverage. Discussed coverage with all insurance and told him to process. Gave him a slide conversion guide as a reminder for use. Explained OxyContin conversions and asked him to not forget about the 10mg dose. Left him with a intermezzo dosing guide.
PPLPMDL0020000001	Garfield Hts	OH	44125	6/21/2013	Presented Scott Profile again, asked if he had patients like him that are not adequately being controlled on Tramadol, he agreed and said that he sees more and more patients on higher doses of Tramadol and agreed that Butrans would be appropriate. He also has started a new patient on Butrans 10mcg/hr (she was taking percocet 3 times a day and wasnt controlled, he said it took some convincing to have patient try Butrans and so far hasnt heard back. Did give Savings Card and will follow up.Reminded of Titration. Went over Intermezzo indication/dosing Briefly Vignettes. Dr. stated cost and coverage will be the issue with his patients. OxyContin Flexible dosing and Quick hit on products at window. I told him how I thought our discussion last visit was a good one on Butrans. Dr said he did prescribe Butrans for a couple of patients since that time. I reminded him about titration and to not allow for a dose failure. Gave him dosing for intermezzo and OxyContin.
PPLPMDL0020000001	Uniontown	OH	44685	6/21/2013	

PPLPMDL0020000001	Akron	OH	44319	6/21/2013	Conducted the intermezzo in service with dr Wu. Dr said he already had been given all the information about the product. I asked him if he used it? Dr said no and I asked why? Dr said he needs samples of a product like intermezzo. I told him there are no longer samples. Dr asked me if a patient takes Ambien to go to sleep can they take intermezzo if they wake up. I read the action of the FPI for warnings and precautions. I asked dr if he has patients with sleep onset and maintenance issues? Dr said yes. I reminded him that patients need at least 4 hours of sleep remaining prior to taking intermezzo. Gave him quick info on Butrans patient types and asked for his business and left him with OxyContin conversion and titration guide.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	6/21/2013	Upon arriving at the front desk, I asked for my contact: D.O.N., Debbie Bouslough for the scheduled in-service @ 2PM on Pain Management & Constipation for the STNA's, I spoke w/ the Receptionist, Linda Bergman, who informed me that Debbie Bouslough has been out on Medical Leave x 2 weeks. I asked to speak w/ the ADON, Deb Lovette. Linda informed me that Deb Lovette was in a meeting and asked me to have a seat. At 2:15 Linda said, "I'm sorry, Deb Lovette will call you to re-schedule the in-service, she did not know anything about it."
PPLPMDL0020000001	Akron	OH	44333	6/21/2013	I made a drop-in visit to speak w/ Ramona Watson, I was informed that she was not available. I later placed a phone call to Ramona, I asked her if she has had time to review the list of education topics that I e-mailed her, per her request. Ramona said, "I have not had time." I told her that I would in the area next Tuesday, 6/25 and I asked to meet w/ her. She said, "I am only going to be in a 1/2 day." She asked that I call her the morning of the 25th to see how her day is going.
PPLPMDL0020000001	Fairlawn	OH	44333	6/21/2013	I made a drop-in visit to speak w/ D.O.N. Deborah Shafer and introduce myself and Purdue's Nurse Educator Program. I spoke w/ the receptionist, Dee who informed me that Deborah was off today. I left my BC & a PAP handout and placed an e-mail to her as well.
PPLPMDL0020000001	Akron	OH	44312	6/21/2013	Dr told me he had a patient last week he considered for Butrans but wasn't sure about coverage for Medicare and Medicaid so he didn't prescribe. I asked dr why he didn't consult with Nadia or myself to confirm coverage? Dr said he didn't know why. I discussed coverage and asked him not to let formulary rule his clinical decisions. Dr agreed and said he will continue to find patients on ultram or vicoden who are in pain. Discussed using OxyContin for his Percocet patients and why he continues to refill Percocet for a patient with pain for an extended period of time? Intermezzo for his patients with sleep maintenance issues.
PPLPMDL0020000001	Fairlawn	OH	44333	6/21/2013	I made a drop-in visit to speak w/ Michelle Williams in Staff Development to schedule an in-service on Pain Management. I spoke with the receptionist, Helen who tried calling Michelle's office, N/A. Helen stated, "Orientation is going on today." I left my BCI later placed a phone call to Michelle Williams, N/A, left a msg. that I will be in the area on 6/25 & 6/26 and would like to meet with her.
PPLPMDL0020000001	Akron	OH	44312	6/21/2013	Reviewed the opioid experienced trial and discussed all efficacy points. I asked dr if he would be happy with a 30% reduction in pain score? Dr said for sure and told me about 2 patients he identified for Butrans. Dr said one patient has T12 compression and can't take vicoden or Percocet and still in pain. Dr said he started on the 5 mcg dose and has not heard anything back yet. Dr said the other patient had either Medicare or Medicaid and he gave her Butrans and she called back in to say it was over \$400. I asked him for specifics and he told me to speak with Nadia. Didn't get to speak with Nadia but will follow up with her soon. I asked for his continued business with Butrans and reminded him of use of OxyContin and intermezzo.
PPLPMDL0020000001	Cleveland	OH	44102	6/24/2013	Quick discussion thru window, Dr. said he is looking for appropriate patients for Butrans and is confident he will find those patients. I asked if he will find 1 this week and he said he has a busier schedule over at Detroit Rd office and will start appropriate patients. Told him I will see him there
PPLPMDL0020000001	Cleveland	OH	44195	6/24/2013	Visited Criele/A-bldg, 4th floor- Ortho. Left info for Iannotti, Parker, Ballis, Schaffer, Evans, Krebs,Umeda, 5th floor- obtained floor protocol for CNP's=Jones,Paczos,Kirchner,Tuthill, Clark and MD=Long, Chatterjee, Calabrese, Burg, Abelson, Fellows-Azar, Chong, Clifford, Lenert, Lucke, Morales-Mena,Syed
PPLPMDL0020000001	Cleveland	OH	44103	6/24/2013	Followed up Justin, no new scripts of Butrans, most OxyContin coming from Tausing Cancer Ctr. asked anyone particular( Chatterjee,Davis)
PPLPMDL0020000001	Cleveland	OH	44109	6/24/2013	Talked with tech. asked if she has seen any Rx's from Carson nothing for Butrans or OxyContin, most scripts come from Metro.
PPLPMDL0020000001	Cleveland	OH	44128	6/24/2013	In-Service for today was cancelled d/t expecting a re-visit inspection from State
PPLPMDL0020000001	Cleveland	OH	44195	6/24/2013	Stopped in Pharmacy, Intro. Butrans/OxyContin- indication/dosing. Brian Doss is Pharmacy Mgr. Said they see alot of OxyContin from Ortho. Pharmacy was busy, stopped back at a better time
PPLPMDL0020000001	Cleveland	OH	44103	6/24/2013	Dr was running behind again, reminded of the 7 tablet strengths Of OxyContin, also patients taking q4-6 of the short acting an appropriate conversion.Reminded of those tramadol failures for Butrans. Dr. said getting anything approved is a challenge.
PPLPMDL0020000001	Cleveland	OH	44113	6/24/2013	Continuing to build on past Butrans success, asked for those LorTab/Norco failures. She said she will consider, relayed to her Melissa's success with getting CareSource approved. Intermezzo indication/dosing reminder.
PPLPMDL0020000001	Cleveland	OH	44115	6/25/2013	Reminded of Upcoming Laham program and future program in August
PPLPMDL0020000001	Cleveland	OH	44115	6/25/2013	Talked again with Dave, asked if he would distribute Butrans patient booklets for appropriate patients to take back to providers. He said they really dont fill narcotics,once a while percocet, doesnt stock OxyContin (Filled 400 total scripts yesterday) Said I could leave a few next visit
PPLPMDL0020000001	Cleveland	OH	44115	6/25/2013	Intro. obtained office protocol, Presented Butrans/OxyContin and Intermezzo indication/Dosing. Toya stated that Dr. does treat alot of pain and she has seen patients on Butrans and can help identifying the appropriate patients, she also stated it's a great product before the patient starts on short-acting. I went of dosing and titration along with Savings cards for OxyContin and Butrans
PPLPMDL0020000001	Euclid	OH	44117	6/25/2013	I recv'd a phone call from D.O.N., Kathy Nemeth requesting another in-service on Constipation ASAP. She explained that they just had a state inspection and was cited for not following their bowel protocol. Kathy would like to include an in-service on constipation as part of her corrective action plan.An in-service was scheduled for 7/3 @ 2:30 & 3PM
PPLPMDL0020000001	Lakewood	OH	44107	6/25/2013	Quick window detail asked dr if he had enough information to fill comfortable writing Butrans and he said not yet. I asked him to review the nancy profile and we can discuss at our next lunch. Reviewed OxyContin dosing and reminded him of lower doses.
PPLPMDL0020000001	Lakewood	OH	44107	6/25/2013	Asked dr how he was doing with evaluating patients on Percocet and if they are candidates for an extended release medication like OxyContin. Dr said he remembered. Gave brief reminder of nancy profile and asked him to consider patients like this for Butrans. Gave indication and reminder of Intermezzo. Asked if he needed more senakat samples. Dr had not used the samples yet.
PPLPMDL0020000001	Cleveland	OH	44119	6/25/2013	I placed a call to the ADM., Nancy Sugaman to introduce myself and Purdue's Nurse Educator Program. N/A, I left a msg. on her voice-mail.
PPLPMDL0020000001	Richmond Heights	OH	44143	6/25/2013	I placed a phone call to Nurse Educator, Sheila Harris, to introduce myself and Purdue's Nurse Educator Program. N/A, I left a msg.
PPLPMDL0020000001	Parma Heights	OH	44130	6/25/2013	I placed a phone call to D.O.N., Katherine Myers to schedule a meeting to introduce Purdue's Nurse Educator program. N/A, I left a msg. on her voice-mail.
PPLPMDL0020000001	Lakewood	OH	44107	6/25/2013	Window call asking dr if he has considered evaluating patients on Percocet for several months as OxyContin patients. Asked if he will keep Butrans in mind now that Medco Medicare part d has favorable formulary coverage. Gave indication for Intermezzo. Dr said he will keep in mind.
PPLPMDL0020000001	Parma	OH	44129	6/25/2013	I recv'd the following e-mail from Kim Barber in Staff Development. I have made several attempts to call her and have sent e-mails to re-schedule, but have recv'd no response.Cynthia,I am sorry to tell you that I have been asked to cancel these in-services.Thank you,Kimberly Barber LPNStaff Development Nursel placed a call to the ADON, Jasvir Brar to see about re-scheduling the in-services that were cancelled for 7/15 & 7/29. N/A, I left a msg. on her voice-mail.
PPLPMDL0020000001	Westlake	OH	44145	6/25/2013	I placed a phone call to Nurse Educator, Patty O'Shea to see if she was still interested in continuing in-services on Pain Management for the STNA Classes even though the D.O.N., Ovisli Pilblad is not interested in Purdue's Nurse Educator Program. N/A, I left a msg. on her voice-mail.
PPLPMDL0020000001	Westlake	OH	44145	6/25/2013	I placed a phone call, spoke w/ D.O.N., Sue Williams to follow-up from meeting on 2/14 and to schedule educational in-service. I spoke w/ the receptionist, Debbie who informed me that Sue was not in today. I left a msg. on her voice-mail
PPLPMDL0020000001	Cleveland	OH	44115	6/25/2013	Visited Spine and Ortho Institute along with George in Pharmacy - left Butrans/OxyContin info/cards for ORTHO Levy,Stickney,Blades MD along J. Reisman ONC.
PPLPMDL0020000001	Westlake	OH	44145	6/25/2013	I called to follow-up w/ ADON,Janie Adamo to check on status of facility ownership and discuss education opportunities. I spoke with Janie, she said, "we are still in the process of switching over, but I can tell you that I don't think your program is something that we will use. We have a Regional Nurse from Genesis that comes to our facility to complete our educational needs."
PPLPMDL0020000001	Uniontown	OH	44685	6/25/2013	Dr gave a quick hello at window and told me he started a couple of new patient on Butrans after I was in for our lunch last time. I told dr that's great and asked him what the patients were taking previously and why he thought about Butrans? Dr said he knows one patient was taking under 300mg of Ultram and could remember the other. Dr said the ultram patient has chronic back pain and had good insurance. I asked dr to continue prescribing and told him and Kelly his ma about Medco Medicare D coverage.
PPLPMDL0020000001	Stow	OH	44224	6/25/2013	Dr asked me how high the dose of Butrans can be pushed and what others are doing to push the dose for severe pain? I told dr that in the clinical studies with Butrans when patients had 2 20 mcg patches it prolonged the QTC interval by 9.2 msec over 13 assessments points. I told dr that is why it is not recommended to go above 20mcg. I asked why he asks? Dr said he has a patient with severe osteoarthritis of the spine and is in severe pain. Dr said the patient is also taking Percocet for breakthrough. I reminded dr again about the 20mcg dose. I showed dr the Scott profile and nancy and asked him to do his best to identify patients like those. Asked dr to look for intermezzo patients and reviewed the indication and dosing.
PPLPMDL0020000001	Stow	OH	44224	6/25/2013	Explained patient type profiles with Sandra and asked her what her thoughts are? Sandra said she just wrote ones last eek for a patient on Percocet 20mg. Sandra said the patient was asking for something different and that's what made her think of Butrans. I asked her what dose she initiated and she said 10mcg. I reminded her to titrate to 20mcg if necessary and backed it up with the opioid experienced trial forced titration. I asked her to continue prescribing and she agreed. I showed her the intermezzo dosing guide and asked her to identify patients.
PPLPMDL0020000001	Stow	OH	44224	6/25/2013	Abby discussed with me how a male patient of her cam in with Butrans to show her his blistering from Butrans patch and how many of his patches after being worn after a week had evidence of possible mold on them. Abby said she discontinued even though it worked very well for the patient. I told her she did the right thing and that I would report the information. I asked Abby if a patient had a rash if she would treat the rash instead of discontinuing? Abby said she would treat wit and has in the past with success. Reviewed patient profiles an formal updatres. Explained intermezzo and asked for her to use it. Abby said she does not believe in zolpidem because it is so habit forming and uses melatonin with good success.<font color=blue>-b>CHUDAKOB added notes on 07/18/2013</font>-Cliff, here is an instance of you recording three products presented, but call notes only suggest two were discussed. We discussed this on our recent work session, but I wanted to point this out.
PPLPMDL0020000001	Stow	OH	44224	6/25/2013	Had a good conversation over lunch with dr about Butrans and intermezzo. I focused on identifying the right patient for Butrans. I first discussed nancy profile because he said he has very few patients on just tramadol. Explained nancy profile in depth and asked him if it makes sense to use Butrans for a patient like her and to use it early on in the treatment of pain? Dr said it does make sense and said that his goal is to initiate ER opioids earlier on in treatment. I asked dr if he will initiate Butrans for patients like the ones we discussed? Dr agreed. Dr said that he spoke to his pcp last month about possibly initiating intermezzo because eye sometimes wakes up in the night and has trouble returning to sleep. Dr Geiger said his pcg didn't know about it but wrote a prescription. Dr Geiger took it to have it filled and it cost him \$300. Dr said he was really surprised because he has good insurance with UHC. I explained that he may not have met the criteria on many plans to fail Ambien first and possibly another sells agent. Dr said he has never tried anything and understands why it was so expensive
PPLPMDL0020000001	Cleveland	OH	44115	6/25/2013	Talked with George, hasn't seen any Butrans RX's, doesn't think Dr. Nickels is that busy yet, only 1 day a week for now. Said he sees some OxyContin from the Ortho Group Levy, Stickney, Blades. I said I will follow up
PPLPMDL0020000001	Stow	OH	44224	6/25/2013	Discussed products with Greg over e lunch hour. I asked him if he has filled an intermezzo? Greg said no not yet but thinks it's a good medicine. I asked him if they have had any issues approving Butrans or issues with the copy cards? Greg said it all has gone smoothly with Butrans and said he has noticed more prescribing since I began meeting with the doctors. Discussed the patient types ideal for Butrans and asked him to call me if he runs into anything out of the ordinary.
PPLPMDL0020000001	Fairlawn	OH	44333	6/25/2013	I made a drop-in visit to speak with Michelle Williams about scheduling an in-service on Pain management. The receptionist, Helen called her office, N/A.I called and left a msg. on her voice-mail.

PPLPMDL0020000001	Akron	OH	44313	6/25/2013	I completed an in-service on constipation for the nursing staff. 9 were in attendance. Discussion and Interaction on risk factors of constipation, s/s of chronic constipation, diseases associated with constipation and tx for constipation took place with the nurses. The Senokot laxative protocol was handed out and reviewed. The Nurses liked the protocol and talked about initiating it in their facility. Richard Lynch scheduled an in-service on constipation for the STNA's for July 22 @ 2pm
PPLPMDL0020000001	Akron	OH	44320	6/26/2013	Dr not felling well and not willing to talk much. I thanked dr for pushing through the PA for her last Butrans patient. I asked dr to continue identifying the right patients for Butrans and updated her on formulary coverage. I gave her an OxyContin dosing guide and asked her to switch Percocet patients. Gave her an intermezzo dosing guide and asked her to identify appropriate patients who meet the indication.
PPLPMDL0020000001	Stow	OH	44224	6/26/2013	Spoke with Holly about intermezzo and if she has dispensed any yet? Holly said she has not and won't order it until she sees a script. Explained the Scott profile with Butrans and spoke to her about appropriate patient selection, initial dose and titration. I explained the OxyContin dosing and conversion guide and made sure they have all doses available.
PPLPMDL0020000001	Fairlawn	OH	44333	6/26/2013	Spoke with Gilbert the pharmacist and his pharmacy student. I asked him about his intermezzo prescriptions and if he has had any patients inquiring about it. Gilbert said he hasn't filled any recently but will keep it in the shelf. Discussed Butrans patients types and my goal to teach the physicians about the mechanism of action, appropriate patients and titration. Gilbert said he has not iced more patients titrating over the last couple of months. Discussed steady state, titration, and how physicians are teaching their patients on the product. Explained OxyContin dosing and switching patients from Percocet to OxyContin.
PPLPMDL0020000001	Cleveland	OH	44106	6/26/2013	Talked with Margie, Presented the Medical Education Resource Catalog Online handout, which discussed Pharmacist Role in providing Medication Guides for Products with REMS per her request, Also presented handout for FACETS on education of Pain Mgmt. She thought it was useful.
PPLPMDL0020000001	Cleveland	OH	44103	6/26/2013	No new prescribers for Butrans, has filled some OxyContin from Metro. No Savings cards needed
PPLPMDL0020000001	Cleveland	OH	44195	6/26/2013	MSL phone call with Sharon, nurse coordinator, to discuss OTR and outreach to additional specialties. Site team is meeting internally to discuss recruitment plan week of July 1.
PPLPMDL0020000001	Akron	OH	44320	6/26/2013	Short discussion about OxyContin and Butrans. I showed her the Tom profile for OxyContin and asked her it it makes sense and to identify patients that meet that criteria. Dr said she would. I asked her how the Butrans patient she had in the exam room last week on Butrans? Dr said the hasn't heard anything from the patients once initiated and will have the patient back in in a couple of weeks for a follow up. Asked dr to continue looking for patients meeting the indication for intermezzo and explained the Caresource coverage.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	6/26/2013	I made drop-in visit to Nancy Strausser, in Staff Development to talk w/ her about scheduling a date for an in-service on pain management. Her office was locked and there was no one around to have her paged. I left my BCI placed a phone call to Nancy Strausser, N/A, I left a msg.
PPLPMDL0020000001	South Euclid	OH	44121	6/26/2013	Met with dr med asst Jen Klabunde. Dr can't attend Laham July 8 program because its his first day back from vacation. Reviewed indication for Butrans. Left Savings card flashcard, formulary grid. Reviewed OxyContin indication, update to section 9.2 FPI, please have dr review, left formulary grid, savings flashcard.
PPLPMDL0020000001	Akron	OH	44333	6/26/2013	Short discussion over lunch about his Butrans prescribing. I told dr to continue identifying patients for Butrans like the opioid naive patients and the patients on tramadol or vicoden around the clock and still in pain. I asked dr if he has had any issues with product recently which may be impacting his prescribing? Dr asked why I asked and I told him that I have noticed his numb of prescriptions has fell off. Dr said he has been having more issues getting it approved. I asked where and he told me his Medicare patients and Medicaid. Found out that he forgot about the Caresource PA and gave him the Medicare D coverage. I told dr that Leala will be sending over the formulary grid with updates to the home office. I told dr to prescribe more Butrans. I asked dr to continue prescribing OxyContin for his IR oxycodone patients and to identify intermezzo patients who have in the middle of a phone call to Javir Bar to see Why the in-services were cancelled for July and to discuss re-scheduling. N/A I left a msg. on her voice-mail.
PPLPMDL0020000001	Parma	OH	44129	6/26/2013	Met with Carroll. Dr does write pain meds, currently managing pain in office. Asked her to have dr review update on section 9.2 of OxyContin FPI. left updated formulary grid. Detailed Butrans, she feels dr would be very interested in learning more about Butrans. Left July 8 th Laham invite. Suggested I leave trial savings cards so dr could review. left one box, & showed her how trial, monthly savings for Butrans should work, left savings cards as soon as I receive my shipment. Butrans, had not heard of Butrans, says interesting concept, Really liked that Butrans was a CII. Asked if Butrans was indicated for acute pain? I responded no, it's indicated for chronic, moderate to severe pain& clinical study was conducted on patients with chronic low back pain. Presented Opioid naive trial data, Maria profile, as dr was leaving, he took a Butrans savings card out of holder, & said I want to present this to my next patient. I found out from RN Ann a few hours later, that it was a female patient, & he didn't end up writing for her. didn't get any further details. Intermezzo, he likes product, & will continue to write for MOTN insomnia. New Facebook page, where patients can print savings.
PPLPMDL0020000001	South Euclid	OH	44121	6/26/2013	He's following START Principles & q 12 h dosing for OxyContin, happy with efficacy for patients. Butrans, opioid experienced trial presented, pain reduction scores@ 12 weeks. He likes data. Please keep in mind Butrans for your BCW patients, which he says he will.
PPLPMDL0020000001	Mayfield Hts	OH	44124	6/26/2013	Lunch in-service completed on Butrans w/ Nurse Practitioner, Charlene Sonda. The Butrans initiation and titration guide was reviewed. Charlene was informed that a prior authorization would be required. Charlene said, "Prior authorization is a bad word." I informed her that we should do what is best for the patient or resident. I asked Charlene, "Can you think of a patient who would be a candidate for Butrans?" She replied, "yes, its not at this facility, but at Hickory, another place I work. I just started them on Tramadol." I informed her, if she had any questions to contact me and that I would follow-up w/ her in the next couple of weeks. Leave behinds: Butrans initiation & titration guide, my BCI also spoke w/ the ADON Deb Lovette about re-scheduling the in-service on Pain Management & Constipation for the STNA's from 6/21 which was cancelled. She informed me that I would need to speak with Lisa Adams in MDS who is "acting" DON. I had the receptionist, Linda Bergman page Lisa, N/A. She advised me to call before 9am or after 10:30 d/t morning meeting to reach her.
PPLPMDL0020000001	Cleveland	OH	44124	6/26/2013	Met with RN Gail Smith for first time back in her office. She stated when Purdue first re formulated OxyContin, the majority of the patients complained & stated it didn't work as well. a few patients had to be titrated up, and a few switched to another pain med. However, after "fussing" for a while, most patients stayed on re formulated OxyContin. Left her with OxyContin FPI, read section 9.2 please, she started reading as I sat in her office. Then detailed Butrans. She had no information as to why Dr doesn't write Butrans, I invited her to July 8 Laham program, did not commit to attending. Asked what other resources I could provide her with, she says patients really like the Senokot S samples, so I left 1 box. Told her I'd bring OxyContin savings cards as soon as I get them. Left her both formulary grids for OxyContin & Butrans, Savings flashcards, managed care piece for OxyContin.
PPLPMDL0020000001	Fairlawn	OH	44333	6/26/2013	Quick discussion about all products. Dr told me that he is really liking Butrans and is finding great success for patients earlier than later on in the treatment with IR opioids. Dr said the problem is that many family drs are giving short acting opioids and too many of them. Dr said its hard to get them to switch to Butrans but it is working. I asked dr if he is convinced Butrans worker. Dr said the proof is in the pudding because the patients really like it. Dr told me that he really doesn't like to give breakthrough medicines with it because it keeps them too attached to their pills. I explained the patient profiles and asked for his continued business. OxyContin conversion and titration guide and FDA decision and FPI. I gave him an intermezzo dosing guide.
PPLPMDL0020000001	South Euclid	OH	44121	6/26/2013	Lunch, first time meeting dr while waiting for Drs to come in, detailed both RNs on all products. Left them updated formulary grids for all 3 branded products, OTC visual aid. Dr very receptive to all product details. Went through core messages OxyContin& patient types, chronic pain, ATC, Reviewed steady state dosing START principles. Dr really liked START principles & picked up conversion titration guide after lunch, & placed in his office. Dcussed syeady state, opportunity to titrated up or down, with 7 doses. I promised to bring savings cards as soon as I receive shipment.. also asked dr to review section 9.2 of updated FPI. Likes that we re formulated product. Butrans, unfamiliar with, but interested in learning more, left Laham invite for July 8. Went through opioid naive trial, reduction pain scores, & Maria profile, dr says the positioning of Butrans makes sense for patient like Maria. Black Box Warning discussed, QTC prolongation, & why max dose is 1 patch per week, 20 mcg hr max dose. What if patch loosens says dr? Went through patient guide, solutions for first aid tape, bioclusive, Tegaderm. Intermezzo, patient guides Reviewed, indication, limitations of use, highway driving study. Gender dosing. Facebook page, patients can print out savings.
PPLPMDL0020000001	Akron	OH	44333	6/26/2013	Good conversation after her came back from his vacation last week. Dr told me that his patient who is on both Butrans 5mcg and intermezzo was in monday and said she is doing very well and is extremely happy with both medicines. Dr told me he prescribed another intermezzo the other day as well for a middle aged man who had previously failed 2 sedative hypnotics. I explained the dosing again and asked for continued business. I updated dr as well on new Butrans Medicare plan coverages and focused on Medco Med D plan. Dr told me that he also prescribed an OxyContin the other day for a young 27 yr old man who has severe disc herniations and was taking way too much Percocet. Dr said he placed the patient on 60mg of OxyContin q12h and Percocet for breakthrough. I discussed dosing options and steady state for up or down titration.
PPLPMDL0020000001	Stow	OH	44224	6/26/2013	Asked dr what his philosophy is about treating pain and when he introduces ER opioids? Dr told me that he strongly believes that the IR opioids should only be used for acute pain and post operative pain for short periods only. Dr said that he wants to initiate come type of ER opioid as soon as possible for patients who have a chronic pain condition. I asked what his thoughts are on OxyContin and Butrans? Dr said he didn't know I had OxyContin. Dr told me that he doesn't understand why so many people are taking IR oxycodone for so long. Dr said he tries to switch patients over as often as possible. I explained the FDA decision and advised him to read section 9.2. I told dr to continue doing what he is doing for OxyContin. I discussed all key selling messages for Butrans. Dr said the slide conversion chart is the most important piece and wanted them for his exam rooms. I introduced intermezzo and showed him the dosing guide. Dr said he will keep a look out.
PPLPMDL0020000001	akron	OH	44333	6/26/2013	Good discussion with dr about his ability to identify patients for Butrans. Dr told me that he will be looking at using Butrans more now that he added 2 nursing homes. Dr said that he saw a patient the other day at a nursing home who is an amputee and has chronic pain. Dr said the patient takes 5 mg Percocet 8 Times a day and sit not working. Dr said he hated the patient if he would consider using a patch like Butrans? The patient told him the adhesive in the patches don't agree with him but he may consider it. Dr said he is coming into the office next month and he will initiate as long as its covered. I discussed the formulary with Butrans highlighting the Medco Medicare D plan coverage. I asked him to also identify patients appropriate for OxyContin and intermezzo. Gave him dosing for each. Window call. Reminded of Butrans for the Tramadol failure before they get on those Short acting along with BWC patients that are appropriate. Also reminded of OxyContin Q12 dosing for those Percocet patients.
PPLPMDL0020000001	Cleveland	OH	44109	6/26/2013	Met with Medical assistant Michelle. Dr on vacation, back July 1 st. Detailed Butrans, left updated formulary grid, savings flash card, July 8 th invite to Laham program. Left one box savings cards. Discussed OxyContin indication, dosing, q 12 h, updates to section 9.2 of FPI. Left savings flashcard, formary grid FPI, OxyContin.
PPLPMDL0020000001	South Euclid	OH	44121	6/26/2013	Quick Butrans reminder, Positioned 7day transdermal for Tramadol failures, good managed care coverage. OxyContin flexible 7tablet strengths
PPLPMDL0020000001	Cleveland	OH	44113	6/26/2013	Maria profile & Butrans positioning as first Opiod. Dr says he likes Butrans, recently wrote for a Medicare Part D patient & patient called him back & couldn't afford, so he had to write for another pain med. Dr, if we take Medicare Part D out of the equation, Butrans has great coverage, & Medco Medicare Part D just added Butrans to their national formulary. I will meet with Helen & make sure she gets all formulary updates. I also met with practice manager, Ellen T, & Reviewed formulary updates for both OxyContin & Butrans with her. When Butrans not appropriate & patient more appropriate for CI, please consider OxyContin. Q 12 h.
PPLPMDL0020000001	Lyndhurst	OH	44124	6/26/2013	I made a drop-in visit to speak w/ D.O.N., Debbie Keller to reschedule a meeting to introduce Purdue's NE program. Upon entering the facility, there was construction taking place. I spoke w/ the receptionist who paged her, N/A. I left my BC and later placed a phone call to her, N/A, I left a msg.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/26/2013	Per Marge request..To present to Ron Cowen -In-Patient Pharmacy Mgr. Medical Education Resource Catalog Online handout, which discussed Pharmacist Role in providing Medication Guides for Products with REMS Also presented handout for FACETS on education of Pain Mgmt
PPLPMDL0020000001	Cleveland	OH	44106	6/27/2013	

PPLPMDL0020000001	East Cleveland	OH	44112	6/27/2013	Talked with Michelle-Tech went over Butrans indication and dosing along with OxyContin flexible dosing. Location doesn't fill a lot of OxyContin
PPLPMDL0020000001	Cleveland	OH	44127	6/27/2013	Reminded of Scott profile and those Tramadol failures as appropriate patients for Butrans, went of Dosing and titration. Intermezzo indication and dosing along with 5 day trial offer.
	Cuyahoga Falls	OH	44221	6/27/2013	Was speaking with Lori at the front desk and she asked me what the doses of Butrans are. I explained the doses and asked her why she asked. Lori said that Dr Azem has a patient that called in today and said her 10mcg Butrans should be increased to 20mcg. Lori said that the patient is also taking 2 tylenol 4 times a day. Dr Azem walked up confirmed the patient situation. I discussed with dr how the patient needs to be titrated to 20mcg as long as she can tolerate it. Dr said she plans on titrating and told me how much the patient really likes Butrans but has severe pain. I told dr to continue looking for appropriate patients. Nothing else learned.
PPLPMDL0020000001	Akron	OH	44308	6/27/2013	MSL meeting with PRA CRA Bill Thornton, Dr. Frieber, and Hillary Tonni, study coordinator. MSL provided OTR study updates of enrolled patients and pre-screening information. Discussed patient population, patient flow, and pediatric palliative care practice.
PPLPMDL0020000001	Cleveland	OH	44119	6/27/2013	I made a drop-in visit to meet w/ ADM., Nancy Sugarman to present Purdue's NE Program, I spoke w/ receptionist, Melissa who informed me that Nancy was in a meeting. I left my BC.
PPLPMDL0020000001	Cleveland	OH	45786	6/27/2013	I went over managed-care grids for all three products. Went over co-pay cards. W-they're still learning the EMR system. They have a lot of kickbacks with Butrans.
	Cleveland	OH	44106	6/27/2013	Per Marge request (Bowell Pharmacy Mgr) to present Ron Cowen -in patient pharmacy director the Medical Education Resource Catalog Online handout, which discussed Pharmacist Role in providing Medication Guides for Products along with the handout for FACETS on education of Pain Mgmt. Ron was on vacation, Shirley will follow thru- <b>font color=blue</b> <b>CHUDAKOB added notes on 07/07/2013</b></font>-Bowell pharmacy is an out-patient pharmacy and would not constitute a hospital call.
PPLPMDL0020000001	Waterford	OH	45786	6/27/2013	Was out of town on vacation until next week.
	Mogadore	OH	44260	6/27/2013	I had Pam ask dr Stenzel if he needed any more Butrans copay cards. Dr came up to window and said he just wrote a Butrans recently and it was for a patient on ultram. I told dr that an ultram patient is ideal as long as the pain is moderate to severe. Dr said the patient has chronic low back pain and just used the last copay card. I told dr to continue using Butrans and to remember to titrate if necessary. Left him with a intermezzo dosing card
	Cuyahoga Falls	OH	44223	6/27/2013	Good conversation with Kyle the pharmacist. I introduced intermezzo and Butrans. Kyle said he did not know about Butrans and wanted me to give him the information. Discussed all key selling messages and told him I was surprised he has not seen any because of the high number of scripts coming out of Cuyahoga Falls. Andy said New Choice is probably seeing most and Summit Spain has their own as well. Discussed the approximate conversion chart and candidates for the product. I gave him an OxyContin conversion and titration guide and asked him to identify patients on long term IR opioids. I told Kyle about copy cards for all products.
PPLPMDL0020000001	Cleveland	OH	44112	6/27/2013	Briefly went over intermezzo vignettes, dosing and indication. Went over Scott Profile and those Ultram/Tramadol failures as appropriate choice for Butrans. Dr. mentioned she had a patient in mind and I told her I will look forward to following up with her on that patient. Initiation and Titration reminder- <b>font color=blue</b> <b>CHUDAKOB's query on 07/07/2013</b></font>-Mark, I do not see an OxyContin discussion. Was there? OxyContin should not be third position call. Only first or second- <b>font color=green</b> <b>GUTKOMA's response on 07/08/2013</b></font>-Ok.....Also, I did briefly discuss OxyContin and its flexible dosing- <b>font color=blue</b> <b>CHUDAKOB added notes on 07/09/2013</b></font>-Ok
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	6/27/2013	I spoke to Andy the pharmacist about all products. I reviewed the intermezzo dosing fluid and asked him if he has dispensed any recently? Andy said he has for dr Higley. I told dr to keep both doses in stock. I told him about Butrans and discussed good candidates for the product. I asked if he is seeing a rise in prescriptions being filled? Andy said he is seeing more of it and most are coming from Summa Western Reserve Pain. I asked him which doses he has in stock? Andy said the 5 and 10mcg are in stock and he will order the 20 mcg when he starts seeing prescriptions. Gave him the conversion and titration guide for OxyContin and told him about all 7 doses and Quick hello at window and told him that Butrans can be a solution for his patients in moderate to severe pain who are on short acting opioids around the clock. I handed him the initiation and titration guide and asked him to find patients.
PPLPMDL0020000001	Akron	OH	44312	6/27/2013	Told dr at the front counter that I have the candidate that fits well for Butrans. Dr said ok. I told him instead of titrating ultram or moving to another short acting opioid when patients are on the IR opioid around the clock and still in pain. I told dr to review the profile and asked if he would switch patients to Butrans? Dr said he will look at it. Gave updated Butrans managed care to office manager.
PPLPMDL0020000001	Tallmadge	OH	44278	6/27/2013	I- Went over the managed-care grids, Medicare part D, co-pay cards and dosing for OxyContin. Went over intermezzo everything, administration and limitations of use. W-they will see reps again when Dr. Waters comes back from vacation after next week. They've been having trouble getting Butrans through and were interested in some of the Step edits that surround Medicare and Medicaid.
PPLPMDL0020000001	Waterford	OH	45786	6/27/2013	I asked dr at the window if he has had any bad experiences with Butrans? Dr said no and asked me why I asked? I told him that I noticed he has not prescribed Butrans in a long while and that I was just making sure he believes in the product. Dr said he does and that he has tried to write it a few times over the last month or two but patients have told him its too expensive. I asked if he knew the plans and he said he couldn't remember. I gave him a copy of the Bup 3015 and formulary grid. I told him about Medco Medicare D plan and Summa Care Med D coverage and reminded him about the copay cards. Nothing else learned.
PPLPMDL0020000001	Euclid	OH	44117	6/27/2013	An in-service on Medication Routes & Delivery Systems was completed for the nursing staff. 9 were in attendance. Routes of administration, Medication delivery responsibilities, safe consideration for medication administration and the different types of delivery systems were presented. Discussion and interaction among the staff took place. The PAP Medication Routes and Delivery System educational handout was shared w/ the nurses. Charlene Miller, requested that a 2nd in-service on constipation for the nurses take place. It was scheduled for August 28th @ 2:30.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	6/27/2013	Discussed all products over lunch appointment. I discussed with dr that I now know his practice is largely a geriatric practice. I explained how OxyContin and Butrans are two products that can fit his patient population because of their efficacy and formulary coverage. I Eco, wined OxyContin patient profiles and showed him how he can switch his IR oxycodone patients to OxyContin q12h and that it is a single entity opioid. I discussed formulary coverage focusing on Medicare D. I reviewed Butrans core messages and reviewed the Bup 3015 in its entirety. I explained to the dr that I need to ensure he knows it works and its safe before he uses it. Dr agreed and said that he remembers that it is a CII and he can call it in. Dr said that it is a huge selling point for him. I reviewed the approximate conversions and reviewed patient types. I finally told him that Butrans now has Medicare D coverage and reviewed Medco, SummaCare and ESI Med D coverages. Gave dr a intermezzo dosing guide.
PPLPMDL0020000001	Akron	OH	44308	6/27/2013	Email communication with Olivia Bitter regarding the upcoming non-accredited pain management webinar, scheduled for July 18, 2013. Ms. Bitter provided the requested topics (Pain Care in the Older Adult: Special Considerations and Primer on Addiction).
PPLPMDL0020000001	Brooklyn	OH	44144	6/28/2013	Briefly reminded dr. of Butrans for those Tramadol failures, dosing and titration. Presented intermezzo trial cards again, Dr. said he will see what he can do. Asked Tiffany for help with reminding Dr., said she will.
PPLPMDL0020000001	Brooklyn	OH	44144	6/28/2013	Talked with Beverly no new scripts. Went over Butrans and where to position (Tramadol failures) Intermezzo-MOTN and dosing along with Savings card
PPLPMDL0020000001	Cleveland	OH	44109	6/28/2013	Briefly Discussed all 3 products, indication/dosing with Bernie, Went over Scott profile/ Tramadol failure for Butrans- He said hasn't seen any. Does see intermezzo prescribed, had some denial thru ins. requested savings cards. and suggested Raheja as key prescriber. OxyContin flexible dosing
PPLPMDL0020000001	Lakewood	OH	44107	6/28/2013	Dr was not in, reviewed patient profile Scott with crystal
PPLPMDL0020000001	Akron	OH	44319	6/28/2013	I asked dr why he won't listen to me about how Butrans can help his patients? Dr asked if there are samples? I told him its a scheduled product and NO samples... Dr said there is nothing important for him to know about the product. I told him I'm sorry he has that outlook because I can teach him some things about treating pain. Dr said ok then. I gave him Butrans, OxyContin and intermezzo dosing guides.
PPLPMDL0020000001	Westlake	OH	44145	6/28/2013	Quick window call asking dr to keep butrans in mind for patients not getting pain relief from tramadol. Showed dr flexible dosing of OxyContin.
PPLPMDL0020000001	Hudson	OH	44236	6/28/2013	Told pharmacy technician about intermezzo and he didn't know about it. It asked him if he was stocking it and he said they have a box of each dose. I explained the Butrans doses and titration of the product. Discussed the patient type of Scott and reviewed the copay cards. Provided him an OxyContin conversion and titration guide.
PPLPMDL0020000001	Westlake	OH	44145	6/28/2013	Spoke with Jennifer about no ab equal for intermezzo. Reviewed patient pamphlet for Butrans and discussed disposal of the product. Discussed flexible dosing and the ability to titrate every 1-2 days for OxyContin.
PPLPMDL0020000001	Brooklyn	OH	44144	6/28/2013	Briefly discussed Butrans/Intermezzo with Michelle the nurse, booked lunch appt with guru to further discuss. Positioned Butrans for those Tramadol failures and intermezzo for the MONA/Dosing Titration. left info for all 4 docs and Savings Cards
PPLPMDL0020000001	Westlake	OH	44145	6/28/2013	Spoke with Tech about no ab equal for intermezzo. Reviewed patient profile nancy for Butrans and discussed conversion table. Discussed flexible dosing and the ability to titrate every 1-2 days for OxyContin.
PPLPMDL0020000001	Hudson	OH	44236	6/28/2013	I asked dr at window if he is identifying patients that we discussed over lunch who are taking tramadol around the clock and need a dose adjustment? Dr said he's trying. I told him that if he evaluates his pain patients like I figured he does, I'm sure he has many patients on short acting opioids who would be appropriate for Butrans. Dr said he agrees. Gave him a conversion slide guide, OxyContin conversation and titration guide and intermezzo
PPLPMDL0020000001	Akron	OH	44312	6/28/2013	Told dr at window that he needs to be switching his patients on IR opioids like Percocet to OxyContin. I showed him the conversions from the conversion and titration guide. Dr said he knows and is trying. I told him to begin with his Butrans prescribing for patients on ultram around the clock. Dr said he did write one recently but was too expensive for the patient. I asked which plan and he said to ask Nadia. Spoke with Nadia and she said the patient called in and said it would cost her about \$200 on SummaCare commercial. I explained the formulary grid and asked her to ensure they reference it prior to the patient leaving with the prescription.
PPLPMDL0020000001	Westlake	OH	44145	6/28/2013	Discussed no ab equal for intermezzo and asked pharm tech what they did when a patient presents a script that has a step edit. I asked her about the auto look back and she said they always call the office. I reminded her that sometimes they don't need to call the office because the information is in their system. Reviewed Butrans patient profile nancy. Reviewed OxyContin start principles. Pharmacist was busy
PPLPMDL0020000001	Westlake	OH	44145	6/28/2013	Spoke with Stephanie about patients in intermezzo were taking the drug as instructed which is middle of the night and any switch to a non ab equal may confuse the patient and they may take another zolpidem product in the middle of the night. She agreed that this would present a problem. I explained the Butrans conversion guide and explained that patients not doing well on tramadol should consider Butrans before increasing the dose or moving to Vicodin or Percocet. Discussed the start principle and what it means to the patient to move to an extended release before they get to the higher doses of OxyContin.
PPLPMDL0020000001	Cleveland	OH	44113	6/28/2013	Quick OxyContin reminder (7dose strengths, flexible dosing), Dr. stated he is comfortable using for the right patient, Positioned Butrans for the Tramadol failures, Also told him I'm trying to schedule a in-service over at St. Augustine per Ed(RPH)
PPLPMDL0020000001	Akron	OH	44302	6/28/2013	I asked dr what has been the toughest thing about prescribing OxyContin recently? Dr said he still uses a lot of it and it is his go to ER opioid but has been having difficulty getting it pushed through Medicaid and Medicare. Dr said that he is having to place patients on MS Contin or ER morphine instead or that they have to fail them first. I explained the formulary grid and focused on Medicare D plans. Dr said he will continue trying. I asked him to reconsider using Butrans but that it needs to be initiated earlier on in the treatment of pain. Gave him the Scott and nancy profile. Dr said he would look at them. Nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44113	6/28/2013	Intro to Dr. and staff. Went over intermezzo vignettes, Dr. is a confident prescriber of intermezzo. Went over dosing and trial/savings cards. Asked Dr. if he had some patients today and he agreed. Went over Butrans and Tramadol/Ultram failures- Dr. said he doesn't prescribe any narcotics, refers to Nickels.
PPLPMDL0020000001	Uniontown	OH	44685	6/28/2013	Spoke with Barb the pharmacist about the intermezzo indication and dosing. Barb said she has not seen any recently but has filled a couple of the last few months. Discussed with her the Butrans formulary grid and spoke about the Medco Medicare D preferred status. Barb said she was glad to hear about that and said she has been filling many more prescriptions from Fouad and Lababidi since they moved in down the street. I asked Barb if she has many patients that come in every month to refill their short acting opioids? Barb said there are too many to count. I asked her if she would be willing to provide a Butrans patient information guide for any of those patients? She said possibly but said she doesn't like recommending products but said if a patient asks she will recommend it.
PPLPMDL0020000001	Cleveland	OH	44109	7/1/2013	Positioned Butrans for those Tramadol failures, and patients not adequately controlled. Asked Amanda if should would distribute patient info booklet with vouchers, she agreed! Intermezzo indication/dosing along with Savings/Trial Cards. Invited to upcoming Laham program
PPLPMDL0020000001	Cleveland	OH	44113	7/1/2013	Reinforced Scott profile, asked for those Tramadol/Lortab failures, positioned Butrans for those patients not adequately controlled. They agreed Butrans is appropriate and will look for new starts. Intermezzo indication/dosing along with Savings/Trial Cards. Invited to upcoming Laham program



PPLPMDL0020000001	Akron	OH	44304	7/1/2013	Spoke to Rob the pharmacist about all products. Explained intermezzo indication, dosing and limitations of use. Rob said he has not seen any but is familiar with it. I asked him if he has seen any Butrans since I was in last? Rob said he didn't think so but looked it up and said he had a script from Christina Peters D.O. in Wadsworth in January for the 10mcg dose but the patient could not get it for some reason. I explained the dosing, 7 day transdermal system, appropriate patients and conversions. Rob thanked me for the information and said it was helpful. I told him I figured he fills OxyContin? Rob said he does but is filling most IR opioids like Percocet. Explained OxyContin q12h dosing and switching patients from Percocet. Rob said he agreed and wishes drs understood all of that and sees a lot of percocet from Summit pain. I gave him a conversion and titration guide and told him I'm working on them.
	Cleveland	OH	44195	7/1/2013	Got feedback/status of EVoucher program from Sabrina on Butrans,OxyContin and Intermezzo. Asked if we can have further clarification and requested appt. with pharmacy dept.<font color=blue><b>CHUDAKOB added notes on 07/01/2013</b></font>Mark, if someone else was reading this call note they would want to know what feedback you received on the E voucher program. This is what should be included in your call notes. For example, it might read "spoke with Sabrina in pharmacy about E-voucher program. Sabrina said that our products are in generic form according to the pharmacy and therefore not eligible for the E-Voucher program. I explained that I would like to set up an appt. with pharmacy and asked who the contact is."
PPLPMDL0020000001	Cleveland	OH	44113	7/1/2013	Left Butrans/OxyContin info/and requested appts with Premier office clinicians, along with 6thfloor General Surgery/Ortho/Rheumat. ,K.Stearns,Donley S. Joy, L.Bilfield) Hollie Recep. 4th floor Bruce Long MD, B Stulberg (Lynn- stated that dont treat much chronic pain. Refer out to pain management Shen/Daoud
PPLPMDL0020000001	Cleveland	OH	44109	7/1/2013	Talked with Ray, Asked for Butrans prescribers, said Raheja wrote both Intermezzo and Butrans, store doesn't hardly maybe 2-3 RX of OxyContin a week. A lot of percocet. Requested Butrans Savings card
PPLPMDL0020000001	Akron	OH	44333	7/1/2013	Quick hello to dr in his office and told him about the new OxyContin formulary grid. I told him it was going to be sent to Sue in the home office. I gave him the OxyContin and Butrans conversion guides and told him to continue business with the products. I told dr to keep the conversion slide guide in his exam rooms to help him keep Butrans front of mind. Dr said he would take a few. Nothing else learned
PPLPMDL0020000001	Akron	OH	44304	7/1/2013	I asked dr if he has a large number of Medicare patients in his practice? Dr said he does. I told him that 33% of patients in the clinical trials with OxyContin were over 65 years old. I showed him the Medicare D coverage and asked him if he is having success switching patients from IR oxycodone to OxyContin? Dr said he has has a few patients move to OxyContin and thanked me for the information. Nothing else learned.
PPLPMDL0020000001	Akron	OH	44333	7/1/2013	Said hello through window and told him to prescribe more Butrans. I gave him the nancy profile and asked him instead of refilling the vicoden to think Butrans instead. Dr said ok and thanks.
PPLPMDL0020000001	Akron	OH	44333	7/1/2013	Discussed him finding more opportunities for Butrans. Discussed the opioid experienced trial and used the inclusion criteria and told him to get three patients in three days this week for Butrans. Dr said he will try and said he prescribed a intermezzo prescription late last week. I showed dr the new intermezzo patient vignette brochure and asked him to continue finding patients. I discussed the new OxyContin commercial prescription formulary grid and asked him to continue switching his Percocet patients to OxyContin.
PPLPMDL0020000001	Uniontown	OH	44685	7/1/2013	Handed dr the Butrans opioid experienced trial and told him to review because he needs to know Butrans worked in the clinical trials. Dr said he knows it works clinically because he has had appointments with the other doctors patients on Butrans and has seen and heard first hand how well it works. I told him that's great and reminded him the 62% of patients were on hydrocodone combinations in the trial. Gave him the OxyContin conversion and titration guide and asked for his switches. Gave Lella the new OxyContin commercial formulary grid to send to Sue at the home office.
PPLPMDL0020000001	Fairlawn	OH	44333	7/1/2013	I reminded dr at counter to continue identifying patients appropriate for OxyContin such as those on IR oxycodone. Dr said ok and will continue to use it. I gave him the new commercial formulary grid. Handed him the Butrans initiation and titration guide and intermezzo dosing guide. Nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44113	7/1/2013	Reinforced Scott profile, asked for those Tramadol/Lortab failures, positioned Butrans for those patients not adequately controlled. They agreed Butrans is appropriate and will look for new starts. Intermezzo indication/dosing along with Savings/Trial Cards. Invited to upcoming Laham program. Also updated her on Butrans being officially approved On OH NP RX list
PPLPMDL0020000001	North Olmsted	OH	44070	7/1/2013	I made a drop-in visit to speak with Nurse Managers, Jo & Danette to introduce Purdue's NE program and discuss educational in-service opportunities. I spoke with the receptionist, Sandi who informed me that Dannette was not available. She called Jo's office, N/A. I left educational offering materials and my BC for both Nurse managers.
PPLPMDL0020000001	Westlake	OH	44145	7/1/2013	I made a drop-in visit to speak w/ Patty O'Shea to schedule a pain management in-service for the July STNA class. I spoke w/ Patty and we scheduled a pain management in-service for 7/17 @ 12:30 for her STNA class of 9 students. Patty stated, "Even though our D.O.N., Sue William on scheduling an in-service on Pain Management. I spoke w/ receptionist, Samantha, who informed me that Sue was not available. I left educational offering handouts and my BC.
PPLPMDL0020000001	Westlake	OH	44145	7/1/2013	I made a drop-in visit to speak w/ the D.O.N., Liz Williams to schedule an in-service on Pain management. I spoke w/ the receptionist, Casey who informed me that Liz is out of the building. I left my BC along w/ PPX043
PPLPMDL0020000001	Cleveland	OH	44114	7/1/2013	Reinforced Scott profile, asked for those Tramadol/Lortab failures, positioned Butrans for those patients not adequately controlled. They agreed Butrans is appropriate and will look for new starts. Intermezzo indication/dosing along with Savings/Trial Cards. Invited to upcoming Laham program
PPLPMDL0020000001	Cleveland	OH	44125	7/2/2013	Talked with Linda, no new prescribers per Betsy, for both Butrans and OxyContin. Reminded of Butrans 7day transdermal delivery system and OxyContin flexible dosing
PPLPMDL0020000001	Garfield Hts	OH	44125	7/2/2013	Quick call with Butrans reminder for those Tramadol failures, said he is always looking for the appropriate patients, Asked Deena if she would help reminding and agreed
PPLPMDL0020000001	Akron	OH	44310	7/2/2013	Reviewed the Butrans nancy profile with dr and asked him to identify more patients like her that should be placed on Butrans. Dr said he has in the past. I told him that he probably is refilling patients vicoden on a regular basis. I told dr to initiate Butrans for those patients. Dr agreed. Reviewed formulary insurance focusing on BWC and Caresource.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/2/2013	Asked to see dr Ali and he came to window. I reviewed the 7 doses of OxyContin and asked him to continue switching patients on IR oxycodone. Dr agreed and said he tries to do it as often as possible. I asked for more frequent switches. Showed dr the nancy profile and asked him if it makes sense? Dr said it does and the prescriptions he has had recently were for vicoden. Showed him the initiation and conversion guide and asked him to dose appropriately. Dr said he plans to use more of it for his moderate pain patients.
PPLPMDL0020000001	CLEVELAND	OH	44106	7/2/2013	Intro. Talked with Troy-Pharm Mgr. discussed OxyContin- flexible 7 dose strengths along with Butrans 7 Day Transdermal delivery system. Troy said sees alot of OxyContin all strenghts, mentioned Dr. Davis. and oncology/palliative Care team. He also feels Butrans with this location/Onclergy that its too far down the pain spectrum of treatment option. Requested savings cards for OxyContin
PPLPMDL0020000001	Parma Heights	OH	44130	7/2/2013	I made a drop-in visit to meet w/ D.O.N., Katherine Myers to introduce Purdue's Nurse Educator Program. I spoke w/ the receptionist, Sherry Majoris, informed me that to see Katherine, is by appointment only. I left educational offering handouts and my BC.Receptionist, Helen Sanka Retired.
PPLPMDL0020000001	Akron	OH	44305	7/2/2013	I asked dr that I figured its easy to refill the short acting opioids like ultram or vicoden? Dr agreed and said that it becomes habit. I told dr to break that habit because if it is not providing enough pain relief then another therapy must be implemented. Dr agreed. I reviewed both Scott and nancy and told him to identify patients like them instead of refilling the short acting. Dr said ok and he will do his best. I asked him to take his IR oxycodone patients and switch them to OxyContin. Intermezzo dosing guide and asked him to identify patients meeting the indication.
PPLPMDL0020000001	Parma	OH	44134	7/2/2013	I completed a lunch in-service on Butran's for 3 Nurse Practitioners and other available nursing staff. The Butrans Initiation and Titration Guide was reviewed. A demonstration of the Butrans disposal packaging system was handed out & completed. A sample of the Butrans patch was handed out to the nurses. This facility is currently using Butrans and have 5 residents on treatment. Two out of the three NP's had not heard of Butran's. I received very positive feedback from the NP's and observed excitement that Butrans is a scheduled III. They immediately had resident's in mind for Butrans. I reminded the staff that a Prior Authorization is required. A second Butrans in-service was scheduled for the remainder of the Nursing Staff for Monday July 15th @ 2PM.
PPLPMDL0020000001	Garfield Hts	OH	44125	7/2/2013	Left Butrans Initiation/Titration cards along with OxyContin pl/savings sheet for Levine,Gemma,Lopresti,Forcier and Kaiser docs
PPLPMDL0020000001	Cleveland	OH	44195	7/2/2013	Briefly went over Butrans- 7 day delivery system, patient information guide and dosing/titration. OxyContin 7 tablet strengths and flexible dosing.<font color=blue><b>CHUDAKOB's query on 07/11/2013</b></font>Who did you speak with? This is pretty vague.<font color=green><b>GUTKOMA's response on 07/11/2013</b></font>1st spoke w/Emily, who relayed info to Pam G, than Tomrit H.<font color=blue><b>CHUDAKOB added notes on 07/16/2013</b></font>Make sure you include who you spoke with and what they do in our call notes.
PPLPMDL0020000001	Parma	OH	44129	7/2/2013	Quick call while checking samples and vouchers. Shared butrans indication and titration
PPLPMDL0020000001	Parma	OH	44129	7/2/2013	I made a drop-in visit to see if Kim Barber in Staff Development or Tammy Pasela, NP was available. I spoke w/ the receptionist Carol, who informed me that Kim was busy w/ hourly in-servies today. She called her office, N/A. I left educational offering handouts along w/ my BC. I also left a Butrans Medication Titration Guide for the NP, Tammy Pasela along w/ my BC
PPLPMDL0020000001	Parma	OH	44129	7/2/2013	Spoke with Stephanie, floating pharmacist based in fair lawn. Discussed intermezzo dosing and indication and limitation of use. Shared OxyContin FPI change and let her know the changes are in section 9.2. Shared patient profile Maria and discussed titration every 3 days if necessary.
PPLPMDL0020000001	Stow	OH	44224	7/2/2013	Dr told me at the window he is writing more Butrans and needs more copy cards. I told dr to continue using it early on in treatment and to titrate to avoid dosing failures.
PPLPMDL0020000001	Parma	OH	44129	7/2/2013	Quick call. Spoke with dr and Anna while booking lunch and discussed OxyContin flexible dosing. Discussed Butrans positioning after tramadol. Gave intermezzo indication and limitation of use. Anna said best day is wed all day and then I can get more time.
PPLPMDL0020000001	Parma	OH	44129	7/2/2013	Introduced myself to Myra and she was glad someone was taking over the territory because she uses Butrans and needed vouchers. I asked about OxyContin and the staff said they do not prescribe OxyContin. There was little knowledge if intermezzo so I gave indication and limitation of use.
PPLPMDL0020000001	Parma	OH	44129	7/2/2013	Booked lunch with Nicole and spoke with dr briefly sharing broad coverage OxyContin with formulary Grid. Asked if he would be able to review the Maria profile I left for Butrans. Gave intermezzo indication and limitation of
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/2/2013	Spoke to dr and Liz about OxyContin formulary coverage for his commercial and Medicare and patients. I asked dr to use OxyContin more often for his patients failing Percocet and to not go against the molecule when patients fail that IR oxycodone. Dr agreed and said he is using more but insurance continues to be difficult.
PPLPMDL0020000001	Parma	OH	44129	7/2/2013	Asked dr what he doesn't like about the Butrans and he said there is nothing he does not like. I asked him why he is not prescribing and he said insurance. I said so that means you have written and run into a problem and he said no. I told him he could't say insurance was a problem unless he runs into a problem and how could it be a problem if patients with insurance get to trial butrans for free. He said what did I mean by free and I told him the trial card gives the patient 100 off the copay. He said he would like two of those coupons and I went to the voucher area and took 2 out the box and gave it to him. I reminded him he should think of patients taking tramadol around the clock and he has to move them to something. he is going to move them then move them to Butrans and referred to scott profile. Dr asked how long I have been with the company and I told him I helped launch intermezzo last year and recently added butrans and OxyContin to you bag. He said intermezzo was another problem with insurance and I told him not really. I told him to think of his caseload patients. He asked why and I said these patients will require a trial and failure of xolpidem and en they can get intermezzo. He asked about the other insurance and I mentioned that some of them are a 2 step edit and I don't want him to have an insurance excuse the next time wife speak. I mentioned flexible dosing of OxyContin.
PPLPMDL0020000001	Akron	OH	44320	7/3/2013	Quick call with dr about Butrans. I told dr that he needs to continue using Butrans and get more prescriptions under his belt. Dr said he has already prescribed a couple and said his patients love it. I told dr that his success with it needs to propel him into more Butrans opportunities and showed him the Scott profile. Dr said that vicoden patient is more realistic and I told him to look or this patients then for Butrans.
PPLPMDL0020000001	Beachwood	OH	44122	7/3/2013	Spoke with pharmacist float sandy about intermezzo driving study and she said she has not seen a script. Shared the butrans patient brochure and asked if information like this would help her patients. Shared start principle for OxyContin and asked if this location did a lot of OxyContin volume and she said a steady amount.
PPLPMDL0020000001	Stow	OH	44224	7/3/2013	Spoke to the pharmacy technician and discussed all products. Sam didn't know about intermezzo but said he has seen Butrans and knows about OxyContin. Gave him patients assistance info on all products.
PPLPMDL0020000001	North Hampton	OH	45349	7/3/2013	She said that she still hasn't found a butrans patient. I told her that she appears to not be convinced of the value that butrans can offer her patients yet so I want to set up one more appointment to run through all the data and patient profiles. She said she would like that and we put one on the books



PPLPMDL0020000001	Richmond Heights	OH	44143	7/3/2013	I made a drop-in visit and met w/ Nurse Educator, Sheila Harris. I introduced myself and Purdue's Nurse Educator Program. She expressed interest in our program and an appt. was set up for 7/18 to discuss their educational needs and educational in-service opportunities.
PPLPMDL0020000001	Cleveland	OH	44109	7/3/2013	Discussed with Dawn Butrans Indication/dosing along with OxyContin 7tablet strengths, requested appt., Stephanie requested to leave info and Savings card for Butrans
PPLPMDL0020000001	Cleveland	OH	44109	7/3/2013	Visited outPatient pavilion, identified and left info for Oncology/Hem. (Obrien,Snell, Crum, Hergenroder and Trey along with Fellows M.Treasure,T Gula, Leland Metheny) Oncology care pharmacy Center-Michelle. Also ID'd Ortho/Surgery dept. left info per Cheryl for Feighan,Bafus, Allain, Huyen, Liu, Nash and Patterson
PPLPMDL0020000001	Cleveland	OH	44109	7/3/2013	Quick Intro. Butrans 7 day transdermal, dosing/ indication along with OxyContin flexible dosing . She said they dispense a lot OxyContin, left info and contact info
PPLPMDL0020000001	Cleveland	OH	44109	7/3/2013	Discussed Butrans/OxyContin with Carol (Indication/dosing) 7Tablet strengths and 7Day transdermal delivery system, Dr./Nurses(Harrington) requested Savings Cards for both. Left info and card for appt
PPLPMDL0020000001	Richmond Heights	OH	44143	7/3/2013	I made a drop-in visit to meet w/ Joan Southard, the receptionist,informed me that she was meeting w/ a family. I left my BC
PPLPMDL0020000001	Beachwood	OH	44122	7/3/2013	Spoke with vikki about Percocet patients that may be candidates for OxyContin. I asked if she needed butrans vouchers and she shared with me some of her insurance issues and I gave her the formulary grid. She said she has not had luck with getting intermezzo approved. Scheduled breakfast.
PPLPMDL0020000001	Akron	OH	44320	7/3/2013	Spoke with dr about her patients on Butrans. I asked dr if any of her patients have needed to be titrated? Dr said ah doesn't think so but a couple have been back for follow up appointments and to get refills. I told dr that when her patients tell her that their pain may be increasing to ensure she titrates instead of discontinuing. Dr said she wouldn't discontinue anyway. I showed her the Scott profile and asked her to continue prescribing. Dr said she already knows it works so she just has to find patients like Scott. Told dr to continue switching patients from IR oxycodone to OxyContin and to remember intermezzo for her patients with in the middle of the night
PPLPMDL0020000001	Woodmere	OH	44122	7/3/2013	Spoke with pharm tech because she the regular pharmacist was not in. shared intermezzo indication and asked if she has seen any refills and and she said only dr zober. Shared the butrans titration and conversion. Shared flexible dosing of OxyContin.
PPLPMDL0020000001	Shaker Heights	OH	44122	7/3/2013	Spoke with floating pharmacist about intermezzo indication and explained that there is no ab equal. Shared the butrans titration and conversion and he said there are some pain management drs at south pointe that have written butrans. Shared flexible dosing of OxyContin.
PPLPMDL0020000001	Beachwood	OH	44122	7/3/2013	Spoke with float pharmacist about intermezzo dosing and she has not seen a script. Shared the butrans titration and conversion. Shared start principle for OxyContin and she asked about the titration every 1-2 days. I explained that they can if they need to titrate. She said she has not seen that but it was good information to know
PPLPMDL0020000001	Akron	OH	44333	7/3/2013	Good discussion with dr over lunch on all products. Dr told me that he continues to have most of his success with the Butrans 10mcg and not much luck with the 5 mcg because almost all patients need to be titrated. I explained how patients who are under 3 pills a day of vicoden 5 and under 300mg of tramadol really should be initiated on the 5 mcg but he should just use his best clinical judgement on starting doses. Dr said he will continue to prescribe Butrans. I asked dr to prescribe at least three a week and asked him if that's realistic? Dr said possibly and he will try. Dr said he has a couple of patients that he is trying to get approved for intermezzo and is fighting the pa criteria. Dr said both patients have failed 2 sedative hypnotics and should be approved but are not. I asked him to continue fighting and I appreciate it. I told him to make sure he tells me earlier so I can help him. Discussed OxyContin and told him to continue using it for his patients on IR oxycodone.
PPLPMDL0020000001	Euclid	OH	44117	7/3/2013	In-service repeated on Constipation for Nurses as part of a state corrective action plan. 10 nurses were in attendance. The laxative protocol was handed out and reviewed with the staff. A discussion w/ interaction on the risk factors, disease state, complications and the importance of documentation r/t constipation took place. Positive feedback was received from the nursing staff.
PPLPMDL0020000001	BEACHWOOD	OH	44122	7/3/2013	Spoke with floater pharmacist about intermezzo and she said her pharmacy had not seen a script. I explained that this location had intermezzo in stock and there were a few writers in the area. Shared start principle but the pharmacy was use and she had to attend to customers. I told about butrans quickly with the indication and limitation of use
PPLPMDL0020000001	Munroe Falls	OH	44262	7/3/2013	Quick discussion about Butrans and explained how she can identify patients for Butrans. Told dr that she needs to look and listen for cues that the patients current therapy isn't cutting it. I told her to use the pain scales, pain journals, and physical mobility changes. I asked her if those are what she does when she assesses a patient? Dr said she does all those things but admitted she doesn't do much with them and that she should use them to help determine pain therapy.
PPLPMDL0020000001	Copley	OH	44321	7/3/2013	Discussion with dr about the Scott profile and asked him if he wants his patients with spinal stenosis to be on short acting opioids for an extended period of time? Dr said no but patients continue to tell him that their pills like vicoden work better than the patch. I asked him if he believes that? Dr said he doesn't judge but said Butrans does work and he will try to write more. Nothing else learned.
PPLPMDL0020000001	Beachwood	OH	44122	7/3/2013	Quick window call. Spoke with dr about butrans patient profile Maria and set up lunch appointment. Discussed flexible dosing and asked her if she found any intermezzo patients and she said insurance was a problems. I told her I would discuss how to identify different patient types during our up coming lunch but in the meantime think about patients who she is considering changing their prescription of Ir opioids.
PPLPMDL0020000001	Valley View	OH	44125	7/5/2013	Met with Aaron, discussed Butrans and the 7 day transdermal delivery system, he said he sees it being used in the assisted living segment for appropriate patients, their exactpak propriety packaging has grown in that segment . I reiterated that Butrans has the same /misuse/abuse liability as other Schedule 3 opioids. Went over OxyContin flexible dosing and 7tablet strengths. They are moving across the street on the 15th to accommodate
PPLPMDL0020000001	Cleveland	OH	44125	7/5/2013	Had floater filling in for vacation, Left Butrans patient information guide and card to follow up with Christine
PPLPMDL0020000001	Garfield Heights	OH	44125	7/5/2013	Went over Butrans and discussed the Tramadol failure patients being the appropriate choice, Hasnt seen any recently, She said Bogar/Marocco alot of Short acting, told her I would follow up with that group. OxyContin flexible dosing and 7 Tablet strengths along with intermezzo indication dosing
PPLPMDL0020000001	Stow	OH	44224	7/5/2013	Used the OxyContin patient profiles to explain who I'm focusing on with physicians about OxyContin. I told Holly the pharmacist that in also asking to initiate OxyContin earlier and to use the lower doses instead of continuing to keep patients on IR oxycodone. Gave her doing guides for intermezzo and Butrans.
PPLPMDL0020000001	Akron	OH	44319	7/5/2013	Spoke with Sara the pharmacist about intermezzo patient savings program and reviewed the cards. I gave her the indication and dosing and asked her if she has filled any since May? Sara said she has not but said she thinks its a good medicine and said its not taking off because insurance is not paying for it. Reviewed the formulary grid. Discussed Butrans and OxyContin dosing and indications. Sara said she has not seen much Butrans but fills OxyContin often and most come from the cancer centers.
PPLPMDL0020000001	Hudson	OH	44236	7/5/2013	Told dr through window to continue using Butrans and to look for those patients on the short acting opioids around the clock and telling you they are still in pain. Dr said he is trying. Gave him the new formulary grid. Nothing else learned.
PPLPMDL0020000001	Akron	OH	44308	7/5/2013	E-invite sent for the webinar/conference call scheduled for 7/18/13. The attachments to the invitation included the handout for the presentation (PDF file, 3 slides per page) and a feedback form.
PPLPMDL0020000001	Beachwood	OH	44122	7/5/2013	Dr was by the desk while I was introducing myself the barb. I introduced myself shared indications of my products and left information for our lunch on the 15th
PPLPMDL0020000001	Warrensville	OH	44122	7/5/2013	Dr moved from Michigan and said he had a difficult time tying to get butrans approved. I explained the managed care environment with the formulary grid and pointed out which plans are large for notheast Ohio since he was not familiar with the plan names. Dr said he used Butrans after tramadol. He said once he uses 50 mg tid and once they need more he considers butrans. I asked him how he set the expectation for butrans for the patients and he said he likes to present it as something new. I reminded him that starting at the 5 may not provide enough relief for sme patients and I reviewed the titration guide. He said he did not write a lot of opioids in Michigan and here is finding he has to write more. I reviewed the flexible dosing. Dr was pulled away but I gave an intermezzo overview with indication and limitation of use and told him I will provide him more information on the 15th
PPLPMDL0020000001	Beachwood	OH	44122	7/5/2013	Spoke with barb and nursing staff about butrans titration. Asked about OxyContin usage and they said the physicians are using. They had questions about intermezzo and I provided dosing, indication and limitation of use information along with a leave behind. They introduced me to d welsh and Callahan
PPLPMDL0020000001	Akron	OH	44319	7/5/2013	Told dr about his assessment of his ultram and vicoden patients. I asked what he does when he has that type of patient in the office who is complaining of being in pain around the clock? Dr said it is difficult because the patient feels the medicine is working. I told dr that he needs to tell his patients what he wants them to do because if they're still in pain a change in therapy is necessary and to discuss Butrans. I showed him the nancy and Scott profiles and told him to identify patients criminal to them. Told dr about the intermezzo copy cards and trial offer. Dr said he wanted them and will try it out again. Gave dr the OxyContin conversion and titration guide and told him to switch his patients from IR oxycodone.
PPLPMDL0020000001	Bedford	OH	44146	7/5/2013	Spoke with Diane in purchasing who explained what I need to do to set up appointments. Shared butrans indication andnsHemasked how it compared to tramadol and I said there is no head to heard data. I shared the butrans conversion guide. Explained the start principle and intermezzo indication. She said if I wanted to schedule in services then Kevin is the person to speak to in admin.
PPLPMDL0020000001	Bedford	OH	44146	7/5/2013	Spoke with Kevin the nurse manager to schedule in services. We agreed that the lunch hour would be best because I would get more of the nursing staff and we our concentrating on the out patients, I reviewed butrans indication. Discussed that I would also review OxyContin and some of the pain management materials. I also gave the intermezzo indication and limitation of use
PPLPMDL0020000001	Bedford	OH	44146	7/5/2013	Spoke with Tracy in the pharmacy and explained that I wanted to speak the the pharm it's but she was on vacation. I gave tract the pharm tech butrans, intermezzo and OxyContin materials and explained the indication for each. She said she would put the information on the pharmacists desk for review
PPLPMDL0020000001	Cleveland Hts	OH	44118	7/5/2013	Quick Butrans reminder for those Tramadol failure/Scott Profile, Confirmed attendance for Monday's Laham program. OxyContin 7 tablet strenghts and efficacy of Q12h
PPLPMDL0020000001	Cleveland	OH	44113	7/8/2013	Quick reminder on Butrans/OxyContin(Tramadol failures/OxyContin flexible dosing strengths). No new prescribers, mentioned Robson on 55th street. Said Exactcare is moving across the street next week.
PPLPMDL0020000001	Akron	OH	44333	7/8/2013	I asked dr if he has the confidence that Butrans will work on the appropriate patients in his practice? Dr said yes. I told dr that he needs to identify more patients for Butrans like those on ultram or vicoden around the clock. Dr said he is doing that. I reminded dr that BWC is still paying for Butrans and Discussed the Carsource prior authorization.
PPLPMDL0020000001	Cleveland Heights	OH	44118	7/8/2013	Asked Opelia if she has seen any Butrans from Dr. Harris, she said not yet. Reminded of Tramadol failures as the appropriate patients. OxyContin flexible dosing and intermezzo indication and dosing
PPLPMDL0020000001	Akron	OH	44312	7/8/2013	Quick message in between patients. Told her that I wanted her to continue finding patients on IR opioids around the clock and initiate them on Butrans. I told her about the new Medicare D coverages and how it will just make it easier to get it pushed through for that population. Told her about Senokot S and gave her dosing information. Dr said her patients she has on Butrans really like it and said its working well.
PPLPMDL0020000001	Akron	OH	44333	7/8/2013	Spoke with dr in Fairlawn office. Dr told me he has been using more OxyContin and likes Butrans. I asked dr if he is using the 10mg dose? Dr said most are 20mcg dose and over. I showed him the conversion guide and how he can start earlier when he knows an ER product should be used. Dr agreed and thanked me for the reminder. Dr said he has used Butrans a handful of times and his patients like it. I asked dr to continue using early on in treatment like those on ultram or vicoden. Gave dr intermezzo dosing guide and to use it for patients with in the middle of the nit insomnia. Dr asked about Senokot S and what the dosing was. Explained dosing and asked him to provide it for patients with constipation due to medicine.
PPLPMDL0020000001	akron	OH	44333	7/8/2013	I told dr to continue looking for patient in his nursing home for Butrans and OxyContin. Dr said he has been using a lot of OxyContin in Manor nursing home because the drs at the hospital put the patients on IR opioids and when he put them on ER oxycodone the patients are much happier and said it works great. Dr asked me if I have seen an increase in OxyContin for him? I told him I haven't looked and asked when the patients get their scripts filled and he said most have their own pharmacy called the Hartland who maybe doesn't report. Told him to fill for intermezzo and explained how and when to give Senokot S samples out.
PPLPMDL0020000001	Bedford	OH	44146	7/8/2013	Followed up with Diane's request of butrans patient information brochure. Discussed the rotation of the patch. Discussed conversion of OxyContin with conversin guide. Gave Intermezzo indication and discussed the leave behind piece
PPLPMDL0020000001	Cleveland	OH	44113	7/8/2013	Called on Pain dept/ Dr. Shen/Daoud/Dale/Pam, reminded/confirmed attendance for Dr. Laham program tonight. Left Butrans Scott profile.
PPLPMDL0020000001	Cleveland Hts	OH	44118	7/8/2013	Attended Laham program, Reminded of OxyContin 7 tablet strengths
PPLPMDL0020000001	Cleveland	OH	44109	7/8/2013	Visited Anes/Pain dept to remind/confirm attendance to Dr. Laham program,Sue-Dept admin.confirmed. Left Butrans FPI's Had 2 new fellows attend program

	Bedford	OH	44146	7/8/2013	Discussed savings cards with tiffanay of butrans while I waited for dr. Dr will not be in office in two weeks. Dr said he know what he needs to know about butrans and oxycontin and I asked him if he was aware of the Medco formulary change for Butrans. He was not and I quickly reviewed. He said he just tried to get intermezzo approved again and it did not go through. I discussed the managed care environment for intermezzo. Reminded dr of flexible dosing of oxycontin. Tiffanay said dr has been using a lot of butrans vouchers and that he also has an office in the chagrin highland building now on tues.
PPLPMDL0020000001	Cleveland	OH	44113	7/8/2013	Attended Laham program, Reminded of OxyContin 7 dosing strenghts
PPLPMDL0020000001	Bedford	OH	44146	7/8/2013	Spoke with Ed about intermezzo dosing and administration and discussed patient profiles. Reviewed butrans titration and conversion guide and explained that there is still abuse potential with a schedule 3. Reviewed the titration of OxyContin and let him know you can titrate every 1-2 days if necessary
PPLPMDL0020000001	Cleveland	OH	44113	7/8/2013	Quick call thru window, Reminded of Butrans-Tramadol failures, dosing/titration. Intermezzo indication, dosing and savings card
PPLPMDL0020000001	Fairlawn	OH	44333	7/8/2013	Used the intermezzo patient profiles piece to explain patient types to intermezzo. Robin said she understands it but patients don't want it because its just still too expensive. Used the Butrans profiles to explain how patient type selection and the specification of them will improve the positive outcomes. Told robin to look for patients on IR oxycodone and provide them with an OxyContin covers on and titration guide. She took a few and said she spoke with Gilbert the pharmacist about all products. Gave him the patient profiles for intermezzo and asked him to listen for patients complaining about in the middle of the night insomnia. Gilbert said he would speak to patients about it. Discussed the new NSAID profile for Butrans and asked him if it made sense? Gilbert said yes and explained how earlier is better for ER products. OxyContin conversion and titration guide and asked him to continue stocking all doses.
PPLPMDL0020000001	Fairlawn	OH	44333	7/8/2013	Discussed Butrans in Fairlawn office at front counter. I asked dr if he feels comfortable with what Butrans brings for efficacy and the patient types appropriate for it? Dr said he does and said I did a good job explaining the product to him. Dr said I was thorough and he has no questions or apprehension about using it and that he just has to build up his patient base first. I said great and reminded him about insurance coverage and gave him a First visit to office. Presented my product line to Samantha. Found out that although there are 12 HCP s in their practice ( Family Behavioral Healthcare Services), dr Kontos is the only HCP in their practice that writes any type of prescriptions, scheduled or otherwise.
PPLPMDL0020000001	Akron	OH	44333	7/8/2013	Discussed OxyContin flexible 7 tablet strengths/Q12h dosing. Dr. said she is not Prescribing much anymore. Went over Butrans and Tramadol failures as appropriate patients, Initiation/Titration and Intermezzo MOTNA and dosing along with trial offer/savings cards. Her biggest concern is cost on all products, has alot of Medicare patients
PPLPMDL0020000001	Mayfield Village	OH	44143	7/8/2013	I-went over clinical trial for opioid na rve patients, managed care and co-pay cards for Butrans. Went over OxyContin FPI update. Went over OxyContin formulary grid. Went over intermezzo dosing.W-said he would look over the OxyContin FPI update and let me know if you have any questions. Said that his biggest concern with Butrans have been cost and prior Authorizations. He said with the changes to Medicare part D he has many appropriate patients that he can put Butrans on.
PPLPMDL0020000001	Brooklyn	OH	44144	7/9/2013	I-went over clinical trial, dosing, managed-care and co-pay cards for Butrans. Went over OxyContin formulary update. Went over Intermezzo dosingW-said that she has not been writing Butrans due to the fact that she cannot get it through managed-care. Said the information about caresource and Medco part D is extremely helpful for her patients
PPLPMDL0020000001	Waterford	OH	45786	7/9/2013	Discussed patient who could not get butrans approved. Discussed managed care. Discussed pa meetings.
PPLPMDL0020000001	Parma	OH	44129	7/9/2013	Asked dr how he uses butrans and what types of patients. He said he gets them off Vicodin or oxycontin and switches them to butrans. Asked how he tells the patient to use Butrans and if he gets any push back from patients using Butrans and he said yes but he explains mgg and mg for butrans. He said he us the medication as he sees fit and sometimes cuts the patch. Explained that cutting is not recommended and he said he knows.
PPLPMDL0020000001	Parma	OH	44134	7/9/2013	Spoke with Kathy who is Lonsdorfs head nurse about Butrans. Discussed his use of the product and patient types for the product. Kathy said that dr Lonsdorf does like and and said she thinks the patients are still doing well. I told Kathy to continue looking for patients I discussed on ultram or vicoden around the clock. Explained new formulary coverage and Medicare D plans. Kathy said she would talk with dr about new insurance coverages.
PPLPMDL0020000001	Akron	OH	44312	7/9/2013	I-went over managed care and co pay cards for Butrans and OxyContin. Went over dosing for intermezzo.W-sven she has not had much experience with Butrans.
PPLPMDL0020000001	Waterford	OH	45786	7/9/2013	Quick window call with dr. Asked him what he liked about butrans and he said he likes the patch. Shari his ma interrupted and said he had a patient. She informed me that dr is retiring in August
PPLPMDL0020000001	Parma	OH	44129	7/9/2013	spoke to tech about all products and gave Jim the dosing for all products. Jim said he didnt know about filling of Butrans but sees oxycontin often.
PPLPMDL0020000001	Uniontown	OH	44685	7/9/2013	Intro. to office protocol, Talked with nurse/Jackie. Discussed Butrans indication/7 day transdermal system and product position for Tramadol failures. Went over Intermezzo Indication and dosing. Jackie is familiar with . Left Initiation/Titration guide
PPLPMDL0020000001	Brooklyn	OH	44144	7/9/2013	Discussed Butrans for her Ultram failures and before they start on the short acting opioids, when over initiation/titration. Dr. said she likes Butrans for elderly but poor ins. coverage,and patients like taking PO. Intermezzo-indication/dosing/trial offer/savings card,she agreed to give it a try. OxyContin flexible 7 tablet strength
PPLPMDL0020000001	Cleveland	OH	44144	7/9/2013	Spoke with floating pharmacist from the east side. Shared intermezzo indication. Shared information on exposure to heat warning and proper skin application of Butrans. Shared flexible dosing of OxyContin and titration can be 1-2 days 25-50%.
PPLPMDL0020000001	Parma	OH	44129	7/9/2013	spoke with Rosemary about products/ gave her the dosing information about intermezzo and asked if she had filled any. pharmacist said no but she will keep it in mind when patients speak with her. Butrans dosing and patient type information and oxycontin dosing and conversion info.
PPLPMDL0020000001	Uniontown	OH	44685	7/9/2013	Intro. all 3 products to lgnal(floating pharmacist) Butrans-7day transdermal, for those Tramadol/Ultram failures, OxyContin-7 tablet/flexible dosing and Intermezzo MOTNA and dosing. Savings and Trial cards presented as well
PPLPMDL0020000001	Brooklyn	OH	44144	7/9/2013	Spoke with ma for other physician in the practice that dr Anthony is no longer part of the st Vincent practice and is not at this location. They did not communicate where he was now located
PPLPMDL0020000001	Independence	OH	44131	7/10/2013	Dr was not available to see. I was told to leave my card and the dr would get back to me. Gave indication for butrans and oxycontin
PPLPMDL0020000001	Independence	OH	44131	7/10/2013	Quick window call, said he prescribed Butrans-so far, so good" Reminded of Butrans Patient experience program. Intermezzo Indication/dosing and left Trial/Savings card
PPLPMDL0020000001	Cleveland	OH	44104	7/10/2013	Can only see drs at this location with a lunch or breakfast. Was told the doctors sometimes see reps at the sagamore location. Gave butrans and OxyContin indications
PPLPMDL0020000001	Parma	OH	44134	7/10/2013	Was told I could only see the dr with lunch. Gave indication for Butrans and OxyContin
PPLPMDL0020000001	Sagamore Hills	OH	44067	7/10/2013	Spoke to dr about using the Butrans experience kits and that he only had one left so I was providing him with 5 more. Dr said he uses them but his patients never do the surveys. Dr told me that he had one patient he put on Butrans this week who was on vicoden 20mg and initiated the 10mcg. I told dr that was a good starting dose. Explained approximate conversions and told him to use his best clinical decision on best starting dose. Dr told me he thinks he wrote at least 5 OxyContin prescriptions over the last week. I asked him why OxyContin and he told me that the patients were all on Percocet and needed an ER product and that OxyContin was the easiest switch. Dr said he is actually surprised because one of the patients he prescribed Exalgo originally and was too expensive so he went to OxyContin and was much less expensive. I told dr to continue initiating Butrans early on in pain treatment and OxyContin earlier so the 10 and 15mg can be used. Intermezzo indication and dosing and asked for more business.
PPLPMDL0020000001	Akron	OH	44333	7/10/2013	Cleveland clinic location. I wanted to make sure dr still had intermezzo vouchers. Staff said they had the ones I left last time. Gave butrans indication
PPLPMDL0020000001	Independence	OH	44131	7/10/2013	Dr saw me and told me that he is continuing to have problems getting Butrans covered. I asked him where and what plan or plans? Dr said for Buckeye and Medicare D plans. I explained to him the situation about Buckeye and reminded him about the Caresource PA. Told him about the Medco Medicare D coverage and SummaCare Medicare D. I asked dr if Sue at the home office works out the patients prescription coverage? Dr said he thinks do but to confirm with Leila. I spoke to her about coverage and made sure she sent all formulary information to the home office. I asked Leila to call me when and if they have coverage issues.told dr to continue using OxyContin for his patients on IR oxycodone.
PPLPMDL0020000001	Stow	OH	44224	7/10/2013	Quick hit thru window, Butrans-7day transdermal and Intermezzo- MOTNA and dosing along with Trial/Savings cards. Wanda asked about ins.coverage, discussed PA for Caresource. Left Butrans Initiation/Titration along with Intermezzo dosing guide
PPLPMDL0020000001	Cleveland	OH	44104	7/10/2013	Left Butrans Initiation/Titration guides along with FPI for Pain Mgmt dept . Fellows/residents,Left contact info for Mickeyla, to set up in service-font color=blue>b>CHUDAKOB's query on 07/18/2013</b></font>When you are in the Clinic, what other departments are you going around to in order to leave information, make contacts etc.<font color=green>b>GUTKOMA's response on 07/20/2013</b></font>That particular call/day was to the CCF Walker Bldg.Anes/Pain in previous calls Rheumatology, Ortho, Oncology, Neuro have been contacted and info left for clinicians<font color=blue>b>CHUDAKOB added notes on 07/21/2013</b></font>When you are in the Clinic you will probably want to plan to blanket all departments. The same with all the other hospitals you call on.
PPLPMDL0020000001	Cleveland	OH	44195	7/10/2013	Spoke with Brett the pharmacy intern about products. I asked about his familiarity with intermezzo explaining the indication, dosing and limitations of use. Brett said he was trained on it and thinks its a good medicine but has seen how difficult it is for patient to get it due to insurance. I showed him the formulary grid. Discussed Butrans which he was familiar with. Discussed dosing, titration and conversion chart. Brett said he has seen it come through. Discussed OxyContin dosing and asked about filling rates. Brett said they see it but they are almost all refills. Reviewed savings cards for all products.
PPLPMDL0020000001	Akron	OH	44313	7/10/2013	Discussed Butrans indication/dosing/titration for those Tramadol failures. She sees alot of elderly patients and sees it as a viable option in that setting.Went over intermezzo indication/dosing . Says she doesnt like to use Zolpidem in her patients due to past experiences.
PPLPMDL0020000001	Cleveland	OH	44106	7/10/2013	Discussed Butrans- Indication/Scott profile along with Initiation/Titration. Asked for those Tramadol failures, Dr. agreed she would look for some patients, said she hates managing pain patients, but likes transdermal system, I reiterated that it has the same abuse/misuse potential as other opioids. Went over intermezzo indication and dosing along with OxyContin 7tablet strenths and proven efficacy. Trial/Savings Cards<font color=blue>b>CHUDAKOB's query on 07/18/2013</b></font>Remember we discussed the S.T.A.R.T principles. Did you discuss these on this call. If you are going to increase OxyContin sales, you will need to sell more than just 7 tablet strengths. Agreed?<font color=green>b>GUTKOMA's response on 07/20/2013</b></font>Agreed-<font color=blue>b>CHUDAKOB added notes on 07/21/2013</b></font>OK. Thanks!
PPLPMDL0020000001	Fairlawn	OH	44333	7/10/2013	Discussed all key selling messages to dr Parisi over lunch. Explained Butrans dosing, titration, patient types, efficacy,safety, and how the product will fit into his practice. Dr said he can see the product fitting into his patients in the Copley Medical Center where most of the patients are older and have chronic pain. Dr said that his patients would like that they could put one patch on for a week and not worry about it. I spoke to him about the patient population makeup from the clinical trials and inclusion/exclusion criteria. Dr said he would like me to do an inservice for his patients at Copley Medical Center which I agreed to call the nurse manager to set it up. Discussed OxyContin and where he is using it. Dr said he used to use it a lot but it is very difficult to get approved. Dr said he uses IR oxycodone or MS Contin because they work and are cheap. I discussed the q12h dosing of OxyContin and flexibility of 7 doses. Explained the commercial and Medicare D coverage and asked him to use it more frequently. Intermezzo dosing and patient profiles.
PPLPMDL0020000001	Akron	OH	44312	7/10/2013	Dr Platts 86th birthday today. I told him to continue using OxyContin for his patients already on the IR oxycodone molecule. Dr agreed and said he will do more of that. I showed dr the initiation and titration guide for Butrans and reviewed the dosing and approximate conversions. Dr said he would discuss more on my next visit about Butrans.
PPLPMDL0020000001	Independence	OH	44131	7/10/2013	Spoke with dr about butrans for patients he does not want to have Vicodin and he reviewed the dosing and titration. He said he doesn't think of butrans and I told him I will help him remember the Butrans patient types like Scott. Reviewed flexible dosing of oxycontin and gave intermezzo indication reminder. He said he would keep these products in mind
PPLPMDL0020000001	Cleveland	OH	44104	7/10/2013	Talked w/Hakeem no vouchers needed for Butrans/Intermezzo or OxyContin. Said Clark pharmacy does use Intermezzo(Rahja) He Said Dr. Pandit has prescribed Butrans but had Ins.issues. Just had OxyContin script that got rejected, patient was on 30mg and Script was for 10mg,- not authorized- said patients pain was being controlled and titrating dn. Had to go thru another PA to get approved for 10mg dose

	Fairlawn	OH	44333	7/10/2013	I asked dr when he has a patient in one of his exam rooms who is taking an IR opioid how he assesses their pain and if he uses any tools to help him? Dr said he doesn't use any tools but just has a conversation with the patient to determine if they are better or worse than the last time he saw them. I showed him the Wong baker face scale and told him that with the scale it will help him at least for charting purposes where the patient rates their pain. Dr agreed and said it may be helpful with certain patients. I reviewed all key selling messages or Butrans and OxyContin along with intermezzo dosing and patient types. Dr said he likes the idea of Butrans and feels that it will be useful for some of his patients on tramadol or vicoden. Dr said he will try it out. Discussed OxyContin dosing and asked told him where and when to use which I did the same for intermezzo. Discussed savings cards for each product and talked about Caresource for Butrans.
PPLPMDL0020000001	Copley	OH	44321	7/10/2013	I asked dr what he tells or discusses with his patients when they tell him that their short acting products work when they come in telling him they need more? Dr said if he thinks his patients are lying and their drug screen also comes back negative then he usually discharges them from his practice. I told dr that it is important to qualify each and every patient he treats for pain for proper IR or ER analgesics. Dr agreed. I told dr to qualify his patients on tramadol for Butrans and showed him the Scott profile. Dr said ok and walked away. Nothing else learned.
PPLPMDL0020000001	Independence	OH	44131	7/10/2013	Tried to speak with dr but he would not engage. Left information with ma and spoke with other dr in the practice
PPLPMDL0020000001	Highland Heights	OH	44143	7/11/2013	Met first with Marianne & Michelle. Discussed appropriate patients or both Butrans, & OxyContin. Then discussed dosing for both & proper application of Butrans. Reminded Michelle to hand out BPE packets, which she still has. They stated they have intermezzo savings cards left as well. Went over new formulary grids with them, & OxyContin managed care piece which they said would be very helpful. Left 2 Senokot S, & they are placing tear sheets in each patient room. dr Salama came in, in between procedures. Dr Salama, I'd like to share a few key points on safety. & efficacy from the Butrans OPIOID experienced trial. Presented reduction upon pain scores. Remember our steady state is 72 hrs, so you should also counsel patients on supplemental analgesia. I do think Butrans is good product, but you just don't have good coverage, especially for Medicare patients, said Dr Salama. Shared with him Medco Medicare Part D win, Caresource PA, & BWC. I have new formulary grids for Marianne & Michelle & will continue to keep you updated. Lets concentrate on these plans. What patients will you place on Butrans? patients failing on Percocet & patients with GI issues or allergic to aspirin. I responded that's great. And for those patients with pain on more severe side, I hope you'll Keep OxyContin q12 h top of mind. OxyContin has excellent coverage, & I've left you \$90 monthly co pay cards. Please make sure to hand these out when patients leave the office. Intermezzo, left new mktg piece.
PPLPMDL0020000001	Mayfield Village	OH	44143	7/11/2013	Dr Azar, why are you not using any of the pain meds that I promote? Dr responded, I use oxycodone. & MS Contin. Those are short acting or immediate release meds@ I promote the long acting or extended release such as OxyContin & Butrans. Went through OxyContin indication, I said you have \$90 off monthly co pay cards right above where dr price is sitting. He said, I didn't know that, let me see one. I handed him the card, told him how it works & he kept at his work station. then Butrans quick detail. Reviewed pain reduction scores, opioid naive trial. Butrans is a good CII option, with 1 x week patch. He will keep in mind. Intermezzo, for MOTN insomnia. Please read this piece I'm leaving behind (FPI with indications check list on cover)
PPLPMDL0020000001	Tallmadge	OH	44278	7/11/2013	Saw dr at front counter and handed him the Butrans slide guide conversion guide. I asked him to keep that with him to help him remember to initiate patients uncontrolled on tramadol. Dr said ok. Nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44195	7/11/2013	MSL phone call to Ms. Kreischer to inquire about OTR activities and BUP study status. Ms. Kreischer is planning to meet with her manager to discuss both trials and possible OTR initiatives and outreach.
PPLPMDL0020000001	South Euclid	OH	44121	7/11/2013	Dr Flagg not available to come up front, met with med asst Jen. Reviewed OxyContin verbatim indication, START principles, q 12. H dosing, new formulary grid, managed care piece. Butrans & intermezzo indication, availability of trial & savings. Butrans formulary grid left.
PPLPMDL0020000001	Tallmadge	OH	44278	7/11/2013	Dr told me he prescribed Butrans last week for a patient taking 25mg of vicoden a day. Dr said that it was a Medicare patients and it was not covered. Dr said it went up as a PA and has not heard back yet. I asked which Medicare plan and he couldn't remember. I told dr that 4 or his five top commercial plans are covered on 2nd tier. Dr said that's good but isn't sure if hes going to try again. I told dr that he doesn't now yet if the PA will go through so there is hope. Gave dr the conversion slide guide and told him to keep it with him in his lab coat. Dr agreed.
PPLPMDL0020000001	Akron	OH	44305	7/11/2013	I asked r if he likes refilling tramadol or vicoden month after month? Dr said he does not but if patients pain level is not high and it works as well as being cost effective en he continues therapy. I asked him what pain level makes him think about an ER product being initiated? Dr said 6 and over mostly but its not an exact science. Dr said many factors go into reassessing a patient when they are in for follow up appointments. Dr said he likes Butrans and knows where and when to use it. Dr said his nursing home patients really like it. I asked him which ones he goes to and he told me Copley Health Center. I told dr about dr Paris asking me to do a Butrans inservice there and that Barb and the nursing staff would benefit from it. Dr agreed and said it would also help his patients because of the increased knowledge of the product from the nurses. Gave dr the OxyContin and I recv'd a phone call from Joan Southard asking to schedule the in-service on Pain Management for August. She stated that she had her staff meeting early for the month of July. In-Service scheduled for Tuesday August 13th @ 2:30.
PPLPMDL0020000001	Richmond Heights	OH	44143	7/11/2013	Left intermezzo pharmacy guide & savings card flashcard. Spoke with pharmacy tech & pharmacist briefly. Spent most time speaking with tech Patricia Olbanar. Detailed her on all 3 products. When I got to OxyContin, she mentioned July is a rough month for her, because in July 2010, her sister age 48, overdosed & died, as a result from injecting OxyContin. (adverse event report attached) at end of details, she also stated if we have any speaker programs in future, the pharmacists/ staff would be interested in attending.
PPLPMDL0020000001	Akron	OH	44312	7/11/2013	Attempted to speak with Leslie who does dr Mannings prior authorizations but she was busy. Provided information on new insurances coverages for Butrans with Donna. Discussed the SummaCare Medcjar D coverage along with the other Medicare D plans. I told Donna to pass along to Leslie to hopefully make her job easier. <font color=blue><b>CHUDAKOB's query on 07/21/2013</b></font>Cliff, Who is Donna?<font color=green><b>REICHCL's response on 07/22/2013</b></font>Receptionist-<font color=blue><b>CHUDAKOB added notes on 07/22/2013</b></font>You cannot enter a receptionist as a non-HCP call. Only the nurse, MA or office manager is considered a non-HCP call.
PPLPMDL0020000001	Akron	OH	44312	7/11/2013	Some with dr at window and asked him if he believes Butrans is a good option for his patients uncontrolled on tablet acting opioids? Dr said he does and believes it works but said the times he tried it the patients cost was very expensive. I asked if he remembers the plans? Dr said no but they have a lot of SummaCare. I told dr that SummaCare patients are covered but sometimes employer groups that have those plans can dictate the status of the product under the employees prescription plan. Dr said he understands. I handed him the formulary grid and asked him to please try again.
PPLPMDL0020000001	University Heights	OH	44121	7/11/2013	Dr Price in bad mood very hectic in office, asked for 60 seconds of his time, and presented OxyContin q 12 h dosing & START principles, which he doesn't have time to go through. Well, next time I visit, I'd like to review OxyContin start principles with you, as well as go over a few points in one of our Butrans trials. Intermezzo left re assess your insomnia patients piece, one box savings cards. Left one box Senokot S. met with medical assistants & nurse mgr Irena. Went through new formulary grids, how all trial/ savings should work, left Senokot dosing tear sheets. I suggested they place one in each patient room.
PPLPMDL0020000001	Tallmadge	OH	44278	7/11/2013	Spoke to Adelia a floater pharmacist about products. She said she knows about intermezzo and that patients can't get it because its not covered and patients have to fail too many meds first. I gave her the piece and discussed dosing and limitations of use. Pharmacist said she was familiar with Butrans and OxyContin and just had a patient get OxyContin filled but were not eligible for the copay card because it wasn't commercial. Gave her the dosing guides for each.
PPLPMDL0020000001	Cleveland	OH	44109	7/12/2013	Asked if he has seen any new scripts for Butrans, mainly sees Nickels/Raheja. No OxyContin Savings cards needed, Metro docs are still prescribing OxyContin. Intermezzo indication and dosing along with Trail. Savings cards
PPLPMDL0020000001	Akron	OH	44312	7/12/2013	Dr told me he is continuing to find patients for Butrans and is having success. I asked dr where he has used it and he said most recently for a patient taking vicoden. Dr said he started in the 5mcg but said the patient will most likely need to be put on the 10mcg dose. I discussed with dr the titration of Butrans and steady state. Discussed new NSAID patient profile and asked if he would find patients like her? Dr said he will and knows that Wells did it. Gave him the OxyContin dosing guide and asked for more business and to use the low doses earlier on in the treatment with IR oxycodone. Intermezzo dosing and asked for him to continue trying it on
PPLPMDL0020000001	Euclid	OH	44117	7/12/2013	Upon arrival to complete a Butrans in-service, I was greeted by Charlene Miller in Staff Development, who informed me that her role will no longer include staff development. She introduced me to the new Staff Development Coordinator, Ruth Rossi, RN. An in-service on Butrans was completed for the nursing staff. 4 were in attendance. The Butrans initiation & titration guide was handed out and reviewed with the nurses. Discussion/interaction took place and the appropriate patient type was identified. An example of the Butrans patch was presented along with a demonstration of the Butrans disposal system. A Butrans Clinical Reference Kit was left w/ Ruth Rossi in Staff Development. <font color=blue><b>WOOLFKA added notes on 07/22/2013</b></font>Great call notes utilizing the WIN format
PPLPMDL0020000001	Akron	OH	44312	7/12/2013	Dr told me that he started Butrans for a patient who was on NSAIDs around the clock and said he knew the patient would be in pain for an extended period of time so he went straight to Butrans 5mcg. I told dr that it is great he feels comfortable using Butrans early and told him to continue prescribing. Gave him the OxyContin conversion guide and asked him to use more for his patients on IR oxycodone. Intermezzo dosing and asked for some
PPLPMDL0020000001	Cleveland	OH	44105	7/12/2013	Talked with Hakim, Seeing some Intermezzo from Raheja, reminded of dosing. No new Butrans prescribers, (said to focus on Nickels, Torres, Elaine, Casey) Oxycontin RX's coming from Metro-Harris, he requested Savings/Trial cards for Intermezzo/OxyContin
PPLPMDL0020000001	Akron	OH	44310	7/12/2013	I told dr that he told me once that he avoids using schedule 2 opioids because they should be prescribed by pain management. I showed dr the Scott profile and told him that he can use a schedule 3 Butrans patch before he would move his patients from tramadol to vicoden. His nurse asked about insurance coverage. I showed them both the formulary grid and asked him why based on that he isn't writing? The nurse was impressed and so was dr Goswami. Dr said that he forgot Butrans was covered on Caresource and BWC. Dr said he will write Butrans before he moves to vicoden.
PPLPMDL0020000001	Akron	OH	44319	7/12/2013	Quick OxyContin message at window and asked him if he feels comfortable reevaluating his Percocet patients to see if they are suited for OxyContin Q12h? Dr said he is open to that and knows it makes sense for patients that need to be on an opioid for a long time. Gave dr the conversion and titration guide and told him to use it for reference. Dr said he has a couple that I have left before. Nothing else learned.
PPLPMDL0020000001	Parma	OH	44129	7/12/2013	spoke with both about the material I left earlier in the week. reviewed the indication and limitation of use of intermezzo. reviewed butrans titration. reviewed oxycontin flexible dosing.
PPLPMDL0020000001	Cleveland	OH	44127	7/12/2013	Quickly went over Butrans and Tramadol failures (Scott profile) asked for more new starts, Dr said OK, Referred to Josie as the one to get Caresource approved. OxyContin 7tablet strengths Q12h. and Intermezzo dosing and indication
PPLPMDL0020000001	Cleveland	OH	44113	7/12/2013	Discussed Butrans patient selection, Asked for those LorTab/Tramadol failures. Asked if she had anymore concerns with Butrans since the OH NP board just added Butrans, Nothing so far. Went over Intermezzo dosing and indication along with Trial/Savings Cards
PPLPMDL0020000001	C. Falls	OH	44223	7/12/2013	Good conversation with Denise in the pharmacy. Denise told me about all the PA's she has been doing for Butrans. She said her success has been good but had taken time and creativi to get the product pushed through. I asked which plans have needed approvals? Denise said a lot of Tricare, Medicare D plans and Humana which she said is owned by express scripts. I told her thank you for taking the time to do them. I asked her what the difference is between her and Glenn and she said she does most of the approvals then sends them to Glenn to be processed. I told her about the new Butrans coverages. Denise said she is seeing most from Narouze, sable, and dr Dmitri. Gave her the OxyContin formulary grid and asked about prescriptions for it. Denise said she is always getting prescriptions from all the doctors on a regular basis and typically has no problem except for Buckeye. Discussed intermezzo dosing and limitations of use along with formulary grid. Denise said she has not seen any prescriptions and that coverage is poor at best.
PPLPMDL0020000001	Cleveland	OH	44103	7/12/2013	Quickly reminded of OxyContin flexible 7tablet strengths, Q12h dosing. along with Butrans for those Ultram failures.
PPLPMDL0020000001	Chagrin Falls	OH	44023	7/12/2013	dr requested a visit because he did not receive the samples he signed for on our last visit. I explained that the samples were probably sent to his dea address which he said he had updated during our last visit. I explained that we no longer sample and provided him with vouchers. he asked about the managed care environment and I reviewed the managed care grid. he asked about my other products and discussed Butrans indication and OxyContin. He asked about Butrans for addiction and I explained the indication again and mg vs mcg/hr dosing difference. he asked how intermezzo compared to lunesta and I explained that it did not because intermezzo has an indication for motna/<font color=blue><b>CHUDAKOB added notes on 07/20/2013</b></font>Marcia, when a physicians asks about Butrans for addiction, all you need to do is discuss the indication and explain it is not for addiction. No need to compare mg to mg/hr.
PPLPMDL0020000001	Parma	OH	44129	7/12/2013	quick window call. spoke with dr while I was booking lunch and he said he is using some butrans and I said he probably has more patients that would prefer a patch 4 times a month. reminded him of flexible dosing for oxycontin. stated intermezzo indication and limitation of use

PPLPMDL0020000001	Akron	OH	44312	7/12/2013	Dr told me about two patients he prescribed Butrans for recently. Dr said one patient called in after being on the 5 mcg patch for a week saying that she had a bad rash and didn't want to use Butrans any longer. Dr said he discontinued and started Lyrica. I asked dr if he told her to come in so he could look at the rash and see if he could treat it? Dr said he did not. I asked him to do that next time and he agreed. Dr said another patient went to the Rite Aid in Tallmadge and get Butrans 5 mcg and that the pharmacist scared her from using it because he was taking about the bad side effects from Butrans. I told dr that I was in that pharmacy yesterday and spoke to a pharmacist. I asked dr if he will continue to identify Butrans patients and he said yes. Told dr to continue using OxyContin for his IR oxycodone patients and he agreed to do do. Gave him the intermezzo dosing guide.
PPLPMDL0020000001	Cleveland	OH	44113	7/12/2013	Discussed Butrans patient selection, Asked for those LorTab failures, she agreed started a new patient today, inquired about speaker program date that would work best for her and staff. Reminded of OxyContin 7tablet strengths and reiterated that she isnt prescribing. Went over Intermezzo dosing and indication along with Trial/Savings Cards
PPLPMDL0020000001	Hudson	OH	44236	7/12/2013	Good conversation with dr in his waiting room. I asked dr if he has been switching his IR oxycodone patients to OxyContin like we have discussed on a few occasions? Dr said he actually has and his patients are thanking him. I asked for him to start OxyContin sooner and utilize the 10mg dose. I showed him to one to one conversions in the guide. I showed dr the conversion side guide for Butrans and told him to keep it with him so he will use more Butrans. Dr said he has been thinking about it but needs to get using it. I told him to use early on in treatment like for NSAID or tramadol failures.
PPLPMDL0020000001	Beachwood	OH	44122	7/12/2013	dr said he likes Oxycontin but it has a bad reputation due to street value and I asked him if he thought it was different from other opioids and he said yes because the name is known. I asked him if he feels he needs to be more cautious with OxyContin than with other drugs and he said no. he said he writes OxyContin with the patient needs more than 4 pills a day of ir. I asked about Butrans and he said he wrote a script but the patient could not use the savings card and I asked was it a medicare patient and he said yes and explained that government patients do not qualify. he said he uses butrans for patients who always come up short at the end of the month or they prefer the patch. I asked him to consider the efficacy of Butrans also and discussed pain reduction in the clinical trials. dr said he has had difficulty with intermezzo and I explained that if he has a caesource patient with motna then consider them if they have already tried and failed zolpidem
PPLPMDL0020000001	Parma	OH	44134	7/15/2013	An in-service on Butrans was completed for the nursing staff.6 were in attendance. The Butrans initiation & titration guide was handed out and reviewed with the nurses. Discussion/interaction took place and the appropriate patient type was identified. An example of the Butrans patch was presented along with a demonstration of the Butrans disposal system. The Nurses stated that they were familiar w/ Butrans and are caring for patients in this facility who are currently being treated with Butrans. They voiced no current issues or concerns.I spoke w/ Linda Belford after the in-service about discussing future educational in-service opportunities. She was busy covering staffing and asked if I could e-mail her sometime in the next couple of weeks.
PPLPMDL0020000001	Solon	OH	44139	7/15/2013	Introduced myself to the office and dr was at the window but he did not have time to talk in detail. I booked a lunch explained that I would discuss the start principles of OxyContin and efficacy of butrans at our lunch
PPLPMDL0020000001	Cleveland	OH	44106	7/15/2013	Spoke with Marge, Went over Butrans and OxyContin and overall utilization in hospital. She said anes/pain dept. is slow to prescribe opioids in general unless its for cancer pain.
PPLPMDL0020000001	Warrensville	OH	44122	7/15/2013	Dr said he is using Butrans for some of his current patients. I asked if see were new starts and he said no. I asked dr where he uses butrans and he explained to dr ningeowsky that he uses it after tramadol because patients want something stronger. He said that a patch helps them take their mind off the pain. He said he did not know how to initiate a script at south pointe and carol explained that the staff does the prior authorizations at the office. He said at his other office he had to know what type of insurance patients had in advance. I reminded him that he could write for his BWC patients and he would know who they were by the charts. Reviewed OxyContin start and he said he is not writing OxyContin in this office. Reviewed intermezzo dosing and administration. Reviewed patient experience program for butrans
PPLPMDL0020000001	Cleveland	OH	44106	7/15/2013	Brief intro to Butrans (Schedule III 7day transdermal system & dosage strength)
PPLPMDL0020000001	Beachwood	OH	44122	7/15/2013	Spoke with Laura who said she has no lunches for this year but will put me on the cancellation list. While I was talking to her about next year openings and explaining butrans dr came to the desk because she had a note for him. I told him I was his butrans rep and what this thoughts were on a patch for moderate to severe pain. Dr said he did not have any and read his note and walked away as I tried to discuss OxyContin flexible dosing.
PPLPMDL0020000001	Parma Heights	OH	44130	7/15/2013	I placed a phone call to D.O.N., Katherine Myers to schedule a meeting to introduce Purdue's Nurse Educator program. N/A, I left a msg. on her voice-mail.
PPLPMDL0020000001	Fairlawn	OH	44333	7/15/2013	Quick call at front counter. I gave dr initiation and conversion guide for OxyContin and Butrans. I told dr to continue switching he Percocet patients and to get on board with Butrans early on in treatment. Dr said ok he will. Nothing else learned.
PPLPMDL0020000001	Parma	OH	44129	7/15/2013	I placed a phone call to Kim barber, LPN in Staff Development to get clarification on continuing to use Purdue's Nurse Educator program. N/A, I left a msg on her voice-mail.
PPLPMDL0020000001	Fairlawn	OH	44333	7/15/2013	Spoke to Gilbert and Sue about a patient that went to Rite Aid in Tallmadge and was told by the pharmacist that the adverse events were severe and the patient would not take Butrans. Gilbert said that it is ridiculous. The pharmacist is to simply instruct the patient on how to use or take the product, not to discourage use. Explained the adverse events in the opioid experienced trial over 5% and he told me that it is a big sell point for Butrans, not a discouragement. Discussed intermezzo and OxyContin dosing and prescriptions for the low doses.
PPLPMDL0020000001	Cleveland	OH	44106	7/15/2013	Visited Seidman Cancer ctr.intro. on butrans 7day transdermal system along with OxyContin 7tablet strengths. Left info with Andrea D (RN-OCN) along with Butrans Savings Card.
PPLPMDL0020000001	Beachwood	OH	44122	7/15/2013	Had conversation with Donnie the ma about butrans indication while dr warren stopped by to say hi about his patients. Donnie said the best day would be Fridays at 1:30. Told dr what product I have now.
PPLPMDL0020000001	Tallmadge	OH	44278	7/15/2013	I asked dr what his thoughts are when treating pain and his opinion on treating with ER opioids? Dr said he has no problem treating chronic pain as long as he feels the patients are being honest. Dr said he had used all opioids and thinks ER opioids are a good choice for patients with chronic back pain or spinal problems. I agreed and discussed patient profiles,dosing, titration and approximate conversions. Dr said he has used it but had a problem getting it covered. I explained formulary grid and asked him to continue trying but helped him streamline th product for success through patient identification and insurance. Dr agreed and said he will try again.
PPLPMDL0020000001	Tallmadge	OH	44278	7/15/2013	Discussed intermezzo and OxyContin dosing, indications and patient identification. I asked valarie what her clinical thoughts are on treating pain? Valarie said that she doesn't like treating pain and it should be done at pain management. I asked her at what point she refers? Valerie said that she will not go over 20mg of vicoden. A that point she refers. I asked her why she moves to vicoden from tramadol? She said because of efficacy. I asked her if she treats patients for chronic low back pain or spinal stenosis? Valeria said yes. I showed the Scott profile and asked her if Butrans bake sense for that patient? She said it does and began asking questions about the product including dosing, titration,initiation and copy cards. Explained all information and asked her to write the next time she is confronted with that situation with patient in pain on tramadol. Led paired intermezzo dosing, indication and limitations of use. OxyContin use for patients failing on Percocet. Dr said she does not have any patient on Percocet.
PPLPMDL0020000001	Beachwood	OH	44122	7/15/2013	Explained the butrans patient experience program with barb and carol. Discussed site rotation in patient hand book. Barb asked about supplemental analgesia and titration and I reviewed the detail piece and the need for supplemental analgesia the first 3 days until butrans reaches peak plasm levels. Reviewed the OxyContin start principles and they said they do not use OxyContin anymore. I reviewed intermezzo dosing and administration. They informed me that the hospital was not prescribing ambien anymore and I reviewed the driving study and asked their thoughts. They thought intermezzo was a better choice.
PPLPMDL0020000001	Cleveland	OH	44106	7/15/2013	Brief introduction,new fellow, went over Butrans indication/initiation/titration/ Tramadol failures. along with OxyContin flexible/7 tablet strengths
PPLPMDL0020000001	Copley	OH	44321	7/15/2013	Spoke with the RN manager Barb about doing a Butrans inservice w/ the clinical staff. Discussed how Dr Parisi suggested it be a good idea that the staff is informed on the product. Barb said she wanted to do two sessions of about 15 minutes on August 27th at 2pm. I gave barb a Butrans initiation and titration guide and gave brief explanation of the the product.
PPLPMDL0020000001	Solon	OH	44139	7/15/2013	Spoke with Chris the pharmacist and reviewed intermezzo indication and limitation of use. Reviewed butrans patient information booklet and formulary grid. Gave the OxyContin titration brochure and discussed flexible
PPLPMDL0020000001	Solon	OH	44139	7/15/2013	Spoke with pharmacist and reviewed intermezzo indication and limitation of use. Discussed driving study. Reviewed butrans titration and conversion guide. discussed flexible dosing of OxyContin
PPLPMDL0020000001	Bedford	OH	44146	7/15/2013	Asked dr about OxyContin patients and when does he consider a patient an OxyContin patients. He said he likes OxyContin because it works and said he has not had any problems with formulary. I reviewed the titration schedule in the start principle. Asked dr how he tells patients to use butrans and he had to get back to his patients. Reminded him of intermezzo indication and patient
PPLPMDL0020000001	Warrensville Heights	OH	44122	7/15/2013	Dr said he is comfortable with tramadol and extended releases but has not tried Butrans. He asked how does he dose it, what plans cover it, where should he use it. I reviewed the opioid experienced patient data and the pain reduction to explain why he should use Butrans. Reviewed the titration and conversion chart to show him what doses to use. Reviewed the Scott profile to show the types of patients to use butrans for and reviewed the formulary grid for butrans. Dr said he did not use OxyContin and will not use it at south pointe pain. I reviewed the start principle and explained that he may have patients that come in on OxyContin. Explained intermezzo indication and formulary grid and he asked about the step edits which I explained. Dr said he would keep Butrans in mind
PPLPMDL0020000001	Tallmadge	OH	44278	7/15/2013	I asked dr if he feels confident that Butrans works? Dr said that we have discussed the clinical trials and he finds them compelling. I showed dr the patient profiles and told him he has many options when he is in front of a patient in pain on tramadol around the clock. Titrate the tramadol, move to another IR opioid or choose a schedule 3 controlled release transdermal system. I told dr to choose Butrans for that patient when they meet the indication. Dr said he agrees its an option. I reviewed insurance, copy cards and asked him if he is ready to prescribe? Dr said maybe. I asked where his hesitation lies and he said identifying and patient. I told him that it is an important piece to the success of the product. Quick presentation of OxyContin and intermezzo reviewing dosing and indication.
PPLPMDL0020000001	Cleveland	OH	44106	7/15/2013	Intro. Went over Butrans Scott profile, Ultram failures, Dosing Initiation /Titration. Dr. said he familiar with transdermal system, hasnt prescribed it, I asked why? Feels most of his patients are adequetly controlled, has alot of Medicare patients but will keep in mind. OxyContin 7 tablet strengths/Flexible dosing. Intermezzo indication/dosing
PPLPMDL0020000001	Cleveland	OH	44106	7/15/2013	Visited Pain/Anes Dept. discussed OxyContin/Butrans along with depts. view on opioids. (very reserved in prescribing/managing pain) Left info along with Butrans Savings card with Goldner,Hayek,Al-Amin Khali, Shah,Mcintyre.
PPLPMDL0020000001	Tallmadge	OH	44278	7/15/2013	Visited Seidman Cancer Ctr.dr. Silverman along with clinical nurse Andrea D., left info and Butrans savings cards and OxyContin titration
PPLPMDL0020000001	Tallmadge	OH	44278	7/15/2013	Short discussion over lunch about his algorithm in treating pain. Dr said that he follows a pretty standard pattern of NSAIDs, tramadol, vicoden,ER products. I asked dr if he is typically prescribing his patients first pain medicine? Dr said not always but for some yes. I reviewed all key selling messages and patient profiles. Dr asked about Medicare D plans. Explained plans and asked him if he feels comfortable with the product and believes it works. Dr said I have discussed it w/ him a number of times already and he wants to prescribe it for patients that are older and don't want to take all the pills. Reviewed copy cards reviewed intermezzo and OxyContin dosing, indication, and patient type identification.
PPLPMDL0020000001	Cleveland	OH	44106	7/15/2013	Discussed w/Dr. OxyContin and where he likes to prescribe, he typically RX's for Cancer/palliative pain patient. Went over 7tablet strengths and Dr.said he is a very confident treater and believes OxyContin is a great product. Went over Butrans Once weekly transdermal system,Tramadol failures, Dr. stated the overall philosophy of UHHS-Case pain mgmnt dept. is to manage pain without the use of prescribed Opiods. Believes Butrans is less abusive, which I reiterated that Butrans has the same abuse/Misuse potential as other Schedule III
PPLPMDL0020000001	Westlake	OH	44145	7/15/2013	1. Determine who to provide Drug updates since the Pharmacia/PMG merger as Bob has been unresponsive 2. Determine who handles Prior Auths and would be interested in hearing about formulary changes for Butrans 3. Determine the Lead consultant RPh and share the role of RN educators.
PPLPMDL0020000001	Akron	OH	44313	7/15/2013	Discussion with Jason the pharmacist about products and asked him if he has seen any intermezzo? Jason said he hasn't and said he knows the coverage is poor. I reviewed the coverage And reviewed Butrans clinical results from Bug 3015 and reviewed the AE's for the trial. I asked him if anything stood out which would make him not recommend the product to a patient? Jason said no and said for a narcotic it is one of the cleanest. Jason said he has not seen any or dispensed recently. OxyContin dosing guide and told no I am recommending to drs that they switch their Percocet patients early to the q12h oxycodone.
PPLPMDL0020000001	Cleveland	OH	44113	7/16/2013	Discussed Butrans for those Tramadol/Ultram failures, Initiation/Titration Asked if he would consider starting a patient today and he said he would. Went over OxyContin and 7tablet strenths along Q12h dosing, Intermezzo MOTNA) dosing and Savings/Trial Cards
PPLPMDL0020000001	Cleveland	OH	44113	7/16/2013	Another quick reminder (Justin RPH) on Butrans for those Tramadol failures and OxyContin Q12h dosing for appropriate patients

	Mogadore	OH	44260	7/16/2013	Focused on two things with Butrans. Patient profiles and managed care. Discussed all three patient types NSAIDs, Tramadol and vicoden and showed profiles. I told dr to identify patients like those for Butrans especially when one of those types of patients confronts him in pain around the clock. Dr said that he has used it enough to feel comfortable with it and agrees with all those patient types. Dr agreed that using Butrans early on in treatment is best. Discussed new insurance coverages including Medicare D and Caresource. Dr said he uses OxyContin and likes it for stint on Percocet but said it is becoming difficult to get covered. Dr said that most insurances want patients to be on ER morphine or MS Contin prior. Discussed conversions and intermezzo patient identification.
PPLPMDL0020000001	Cleveland	OH	44113	7/16/2013	Visited Anes/Pain Shen/Daoud,Left Butrans/OxyContin info 6thfloor General Surgery/Ortho/Rheumat.S. Joy, L.Bilfield,J.Stearns,Donley Hollie Recept. 4th floor Bruce Long MD, B Stulberg. Pam said Daoud has Shen manage most of his pain patients, he does procedures
PPLPMDL0020000001	Cleveland	OH	44195	7/16/2013	MSL email communication with Ms. Kreischer for update on study status for OTR and BUP. The site research administrator is planning a meeting with Dr. Appachi and Director of Research, Dr. Spalding, to discuss both trials. Sharon will provide updates as available.
PPLPMDL0020000001	Akron	OH	44310	7/16/2013	Quick message though window and showed him the AE's in opioid experienced patients from the main visaid. I asked him if anything stands out as a reason why he would not prescribe it? Dr looked and said no. I asked dr to use Butrans for patients not tolerating IR opioids for some reason. I asked dr to do his own comparison between the products. I told dr the path of least resistance for insurance and Butrans is for BWC and Medco commercial. I asked dr to prescribe more. Dr said ok. Nothing else learned
PPLPMDL0020000001	Lyndhurst	OH	44124	7/16/2013	Dr Isakov, you missed a great program on July 8 th, I hope you'll be able to make a future program. My hope is that you'll become confident with initiating Butrans. I like Butrans but you just don't have the coverage for my Medicare patients, says dr. he continued: tried to write recently for a Medicare patient dr said, & they couldn't afford Butrans which was going to cost them \$300 per month.Dr Isakov, for your Medicare patients, please focus on Medco Medicare Part D , which just added Butrans as preferred product. Dr had to get into patient room, as he had medical student shadowing him.Note.: Sarah J on vacation this week, back next Monday.
PPLPMDL0020000001	Bedford	OH	44146	7/16/2013	made sure dr had butrans vouchers at his new location. asked if he could do a program aug 21st for the nickles office. he said he will and said there is a need because there are alot of drs who are not treating their patients pain because they do not want to prescribe schedule 2. he said butrans gives drs the opportunity not to use as much vicodin or percocet and still treat chronic pain. he said the caresource authorization just requires a phone call. I reminded dr of flexible dosing of oxycontin. I reminded dr that caresource patients can get approval for intermezzo the same way. dr on vacation next 2 weeks
PPLPMDL0020000001	Cleveland	OH	44113	7/16/2013	Quick discussion on Butrans/Intermezzo, Dr. said he is prescribing along with staff. Discussed possible upcoming program in Aug.
PPLPMDL0020000001	Cleveland	OH	44130	7/16/2013	spoke with staff about drs usage of butrans and oxycontin. they said she does not use that much oxycontin and refers to David Ryan in Pain Management at Metro. Reviewed indications of butrans and intermezzo. got best hours and booked lunch
PPLPMDL0020000001	Cleveland	OH	44102	7/16/2013	Talked with Mikel(pharmacist) no new prescribers for OxyContin,Butans and hasnt seen any intermezzo scripts. Most of his population is medicaid, thus really no need for Savings Cards. Suggested Franklin Plaza Nursing facility as a call point.
PPLPMDL0020000001	Independence	OH	44131	7/16/2013	dr running behind schedule so i only had an opportunity to introduce myself and let him know my products. booked breakfast and asked him to give me his thoughts on scott profile
PPLPMDL0020000001	Parma	OH	44129	7/16/2013	spoke with edwin the pharmacist and explained the coverage of intermezzo. he said coverage changes alot so he doesn't bother getting to know them. he just calls insurance. reminded him of no ab equal. he mentioned a writer of butrans that i was not familiar with and said he sees some but not alot of butrans. showed the flexible dosing of OxyContin and asked him if drs are writing the 15 and 30 mg. he said he has never seen a 15 and i explained the importance of that dose because it allow you to titrate at the recommended 25-50% every 1-2 days and pointed out the start principle in the conversion guide. he said the coupons he has cannot be used because they cannot be used for medicaid or medicaid. I agreed and said he will use them on commercial patients
PPLPMDL0020000001	Solon	OH	44139	7/16/2013	dr said he does not write the 15 because it is new for him and he has to get use to it. I explained that he writes 10 and moving to 15 will allow him to titrate the recommended 25-50%. he said he knows and i will see more 15 as he gets use to it. he said he has tried butrans in opioid naive and experienced patients and they complain that they want their pills and he does not like to prescribe several opioids like what is needed for break through. he said all patients on sleeping pills complain about not sleeping through the night. I said that intermezzo for motna gives him the option of handling their complaint. i mentioned the caresource patients and he said he is not taking caresource anymore. I also mentioned that he has a good amount to medco and showed him the formulary grid that depicts favorable coverage for intermezzo. asked dr to keep the percocet patients needing long acting in mind as potential oxycontin patients
PPLPMDL0020000001	Mogadore	OH	44260	7/16/2013	Spoke with Bob the pharmacist who said he was a floater. Gave bob all key pharmacy messages for products. Discussed indication and dosing for intermezzo. Butrans dosing, initiation, conversions, and titration with steady state. Provided him OxyContin dosing information and conversions from Percocet.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	7/16/2013	Spoke with pharmacy technician Steve about products. Explained intermezzo indication, dosing and limitations of use. He said he knew of it but didn't think they have dispensed any. Gave him Butrans initiation and titration guide and discussed all key selling messages. Steve said they have a handful of patients taking it. OxyContin conversion guide and discussed the conversations I'm having w/ drs about its use.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	7/16/2013	I called to speak w/ D.O.N.,Debbie Bouslough to confirm the in-service for Friday July 19th @ 2pm. I spoke w/ the receptionist, Linda Bergman who informed me that the D.O.N., Debbie Bouslough was still out on medical leave. I spoke w/ Lisa Adams who connected me to the Acting D.O.N., Christina Miterki. She was not aware of the in-service and requested that it be cancelled for this Friday, 7/19. She explained that it was not posted and feared a poor turnout. She informed me that a lot of changes are currently taking place and asked me to call back in 30 days.
PPLPMDL0020000001	Mogadore	OH	44260	7/16/2013	I asked dr what the philosophy is on treating pain? Dr said she wishes she didn't have to treat it all but finds that she has to to some degree. Dr said she does have patients on short acting opioids but said ER products are better suited for most who have chronic pain. I asked her if she feels comfortable using OxyContin? Dr said she does but said that many patients want the short acting so she will send them to pain management to help them get straightened out. I asked dr to use OxyContin for patients wanting more Percocet. Sowed her the conversions and asked for the business. Dr agreed. Spoke with dr about Butrans patient profiles from NSAIDs to vicoden and managed care. I explained all key selling messages and asked her if th three profiles I showed her made sense and if a 7 day schedule 3 transdermal system is something she would use? Dr said she does like the idea and will use it if her patients can afford it. I discussed all managed care plans and asked her if it has good enough coverage for her to feel comfortable using? Dr said yes and that she will try it. Explained copy cards and trial
PPLPMDL0020000001	Parma	OH	44129	7/16/2013	introduced myself to dr while booking lunch. he said he tries to stay away from chronic pain meds. dr mentioned the upcoming changes for prescribing opioids and i gave a copy of the med 80 letter stating that this pertains to patients taking over 80 mg equivalent of morphine and we can review at my next visit where butrans and other opioids fit in. debbie said he is not using oxycontin and is trying to use even less. i mentioned that dr might want to know more about intermezzo for motna and she said he was beginning to become interested in intermezzo
PPLPMDL0020000001	Woodmere	OH	44122	7/16/2013	spoke with taneaia the pharm tech and asked if she has seen any intermezzo prescriptions and she said not lately. i reviewed indication and limitation of use. reviewed flexible dosing of oxycontin. explained how the butrans patch should be applied and warned of exposure to heat.
PPLPMDL0020000001	Cleveland	OH	44130	7/16/2013	spoke with barb and dr. busy day but dr allowed me to introduce myself and i asked him how he was positioning butrans and he did not respond. i asked was he using after tramadol and before vicodin and percocet and he said yes. i asked about oxycontin usage and he said he uses it and he is aware of the dosing. reminded him of intermezzo with indication and limitation of use. told him i booked a lunch and i wanted him to tell me who he considers the butrans patient
PPLPMDL0020000001	Cleveland	OH	44122	7/16/2013	saw dr on his way leaving chagrin highlands and he asked how things were going with intermezzo. i told him i have other products do and have been trying to book a lunch with his office. told him butrans indication and gave an oxycontin reminder. i asked dr if he has written any intermezzo and he said he has not. I gave him the indication and limitation of use and told him to reaccess patients on ambien for motna
PPLPMDL0020000001	Parma	OH	44129	7/16/2013	spoke with jalyenne and discussed best hours and lunch. she said closer to the noon hour. asked them to check their vouchers for expiration and they pulled several from the shelf that were expired. dr walked up and i introduced myself between patients and explained that he shouldn't let the vouchers expire because they are worth \$50 a month and there is a savings card for 100 off the first trial. he said he uses alot of butrans and i explained that was even more of a reason to utolize the copy cards so the patients can get the savings. he said he thought they were only good for one use and i explained that the 100 off is a one time trial use but the savings card is like a debit card that the patients should put in their pocket because they will come 15 out of pocket and then the copy card the take 50 off their copy. reminded him of flexible dosing of OxyContin. quick intermezzo reminder. nurse said she has not seen anyone fail on butrans
PPLPMDL0020000001	Mayfield Hts	OH	44124	7/16/2013	Dr Kim please consider OxyContin q 12 h for your patients on IR opioids whose moderate to severe chronic pain is not controlled. When chronic pain is on more moderate spectrum of pain, Butrans may be appropriate. What could a 1 x week patch mean for your geriatric pain patients? Response: they only have 1 patch to remember. Medco Medicare Part D just added Butrabs to national formulary, so please keep that plan top of mind as well as BWCZ. Intermezzo, MOTN insomnia. PRN, gender dosing, trial, savings.
PPLPMDL0020000001	Mayfield Hts	OH	44124	7/16/2013	Lunch w dr today. Asked him if Mon or Tues of next week better for me ,& Barry to visit! He responded Tuesday around 12:15, 12:30. Also asked if he can introduce me to Gina Zavoca, as i haven't met her yet. She will NOT be in Mon 7/22, but she will be in Tues 7/23. We discussed him checking his schedule for Sept for next speaker program, he says 2nd week Sept best. Last 2 weeks Sept, he has friends coming in from out of country for a few weeks & very busy those last 2 weeks in September. Butrans patient selection discussed, patients failing on IR Tramadol? Please keep Butrans top of mind. Medco Medicare Part D just added Butrans. That's a good accomplishment responded Dr Laham, left more Butrans patient guides, 1 box savings cards. Updated formulary grid. OxyContin, when Butrans not appropriate, OxyContin q 12 h. OxyContin has broad formulary coverage, and over 15 yrs proven efficacy. Intermezzo, MOTN insomnia. Only insomnia agent with prn indication. Peak plasma, gender dosing. Left 1 box trial/ savings cards.
PPLPMDL0020000001	Cleveland	OH	44113	7/16/2013	Quick discussion thru window, Asked if she has had any Tramadol failures, said not recently and really not prescribing any narcotics, but will keep Butrans in mind. Reminded of Intermezzo(MOTNA) and dosing left Savings card. She said, she is leaving by the end of Aug. and going over to Luthern.
PPLPMDL0020000001	Mogadore	OH	44260	7/16/2013	Dr told me he is moving to Tennessee in August. Discussed all products and key selling messages. I explained Butrans in depth and reviewed all patient profiles. I asked dr if he will prescribe more Butrans prior to moving and he agreed to try. OxyContin and intermezzo dosing and patient type selection.. Butrans managed care and copy card and trial offer.
PPLPMDL0020000001	Cleveland	OH	44109	7/17/2013	Talked with Elaine RPH Went over Butrans Initiation/Titration,patient info booklet and savings card. OxyContin Savings card and Intermezzo (MOTNA) and dosing along with Trial/savings card. Had a Caresource for Butrans that needed PA and returned script to patient, didnt have time/remember to look up prescriber. Thinks it was Nickels office
PPLPMDL0020000001	Akron	OH	44313	7/17/2013	Discussed OxyContin and Butrans with Tina drs MA. Explained OxyContin dosing, transitioning from Percocet and Butrans dosing, appropriate patients and formulary. Discussed OxyContin formulary for commercial plans.
PPLPMDL0020000001	Akron	OH	44333	7/17/2013	Told dr about oxycontin conversion and titration guide and asked him to look at materials I left for him and his staff. Dr told me that he had two patients today that he prescribed OxyContin for. Dr said the patients were moved to OxyContin instead of Exalgo because OxyContin was cheaper for the Medicare patients. I asked dr to continue prescribing OxyContin for patients on IR oxycodone. Dr said his Butrans is going well and is finding that most patients need to be on 10mcg because the 5 mcg isn't enough. Dr said one patient is on 5 mcg Butrans and intermezzo 1.75mg and is doing great. Patient told him she is able to move much better at her job as a security guard because of Butrans and the intermezzo is working great.
PPLPMDL0020000001	Cleveland	OH	44113	7/17/2013	Visited Facility, spoke with Julie Thomas-Administrator, obtained info. in regards to Attending Physicians-Bhimani,Pandit,Rosenfield, N.Jethva,Kapoor, Golovan, Tessie Meridosres. and Janelle is Dir. of nursing. Skilled Care Pharmacy. Went over Butrans and OxyContin indication and dosing. left info for Janelle
PPLPMDL0020000001	Mayfield Village	OH	44143	7/17/2013	Asked to see dr. in between patients, he was unavailable. Met with medical assistant Heather, detailed all 3 products. Reviewed formulary coverage for all and left updated formulary grids. Left Intermezzo HCP packet for dr. Krishnan, 1 pack savings cards,1 pack patient guides. told them I'd try back later in the week or early next week.
PPLPMDL0020000001	Akron	OH	44304	7/17/2013	Discussed intermezzo with dr and showed him the dosing guide, dosing discussion and indication. Dr said he has prescribed it. I asked dr to prescribe more for patients with in the middle of the night insomnia. Dr asked what else I had and told him Butrans for moderate to severe chronic pain. Dr said he doesn't write for pain. Nothing else learned



PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/17/2013	Spokewithndr about using OxyContin for his patients on IR oxycodone and Percocet dosing. Dr talked about patients not wanting ER opioids and how they would want products for breakthrough pain. I asked dr if he prescribes ER opiates? Dr said yes and it is most of his business. I told him to use OxyContin as his go to as his ER opioid. Dr said he can't use it exclusively. I told him I didn't expect that but to use it more often than other
PPLPMDL0020000001	Westlake	OH	44145	7/17/2013	An In-Service was completed on Pain Management for the STNA students, 10 were in attendance. The Patient Comfort Assessment Guide and The Wong-Baker Pain Scale was handed out and reviewed with the students. A discussion w/ interaction took place on the barriers that interfere with pain assessment/treatment in the elderly and consequences of unrelieved pain. Patty informed me that she will be starting another class in September.
PPLPMDL0020000001	Bedford	OH	44146	7/17/2013	asked dr if she has had an opportunity to use butrans and she said she does not treat pain and refers out to pain management. asked what she does for patients who come to her on oxycotin. she said she does not do anything. I asked her if she has had an opportunity to prescribe intermezzo and she said no but wanted to sign for samples. I told her I did not have samples but vouchers should take care of her. dr had to go back to patients Dr Reed unable to meet with me. Met with med asst Ebonye. Went through OxyContin START principles, please forward information to Dr. Reed. Butrans, patient guide, 3 doses available, supplemental analgesia due to 72 hr steady state. Medco Medicare Part D for Butrans. Intermezzo, new Facebook page. Trial, savings. MOTN insomnia indication, only insomnia agent with PRN indication, patients used on 62% of evenings in outpatient study.
PPLPMDL0020000001	Cleveland	OH	44109	7/17/2013	Discussed OxyContin Q12h dosing along with 7 Tablet strengths for those percocet patients. Dr. agreed. Reminded of Butrans for those tramadol/ultram failures, when over initiation/titration. Dr. also revealed they have been informed the practice is closing dn at the end of the month.
PPLPMDL0020000001	Cleveland	OH	44102	7/17/2013	Quick call found out practice is closing at the end of the month. Dr. said he hopes to stay in the area. Reminded of Butrans for those Tramadol/Ultram failures. Dosing (Initiation/Titration)
PPLPMDL0020000001	Parma	OH	44129	7/17/2013	spoke to dr before he went in with a patient and briefly reviewed butrans efficacy. mentioned oxycotin titration and conversion from percocet. gave intermezzo indication and limitation of use.
PPLPMDL0020000001	Cleveland	OH	44109	7/17/2013	Visited Pain/Anes Dept. Met with Dr. A.Torres (Residency Program Dir.) discussed Butrans/OxyContin, left savings card/FPI's. Had Sue distribute Butrans Initiation/Titration guides to fellow/residents along with FPI's. Left Butrans info with PMR and Internal medicine
PPLPMDL0020000001	Cleveland	OH	44109	7/17/2013	Met with Dr. Torres (Anes. Residency Program Director.) discussed Butrans (indication, initiation/titration, Positioned for Tramadol/LorTab failures, reiterated that Butrans has the same misuse/abuse potential as other Schedule III opioids. Also went over OxyContin- 7tablet strengths, Q12h dosing. Left Butrans savings card.
PPLPMDL0020000001	Richmond Heights	OH	44143	7/17/2013	Met with medical assistant Heather. Dr. Ashraf not available in between patients. Reviewed my products, indications, limitations. Went over formulary grids, Medco Medicare Part D for Butrans. Left opioid naive Butrans trial for dr. ashraf. Left OTC samples for office, OTC visual aid.
PPLPMDL0020000001	akron	OH	44333	7/17/2013	Good discussion surrounding his patient in a Manor Care nursing home. Dr said that most of his patient there are on either vicoden or Percocet. I asked dr to take those patient on Percocet for an extended period of time and move them to OxyContin. Dr agreed. I discussed his use if zbutrans and he feels those patients are ideally suited for Butrans. I asked dr when he gains more experience with butrans in the nursing home he can transition his experience to his own practice. Dr said he plans to. I discussed tramadol and vicoden patients for Butrans and reviewed the conversion guide. Dr asked about formulary so I reviewed the formulary grid and Med D plans.
PPLPMDL0020000001	Lyndhurst	OH	44121	7/17/2013	No Rx have come in for intermezzo since last visit. Left intermezzo savings flashcard. New Facebook page. Went through patient guide with mgr Michael F. OxyContin, patients on just a few doses, 20 30. & 80 mg, that's it. They've never stocked the 15 mg. HCPS are following a 12 h dosing. Left OxyContin savings flashcard. Butrans, he said Dr Laham just pulled a patient off Butrans, 10 mcg hr, just switched to another pain med. do you know which med they were switched to or why? REMEMBER TO ASK DR LAHAM WHY HE DISCONTINUED BUTRANS FOR THIS PATIENT. WENT through Butrans patient guide with Michael, let him know about formulary win with Medco Medicare Part D which he wrote down.
PPLPMDL0020000001	Westlake	OH	44145	7/17/2013	I made a drop-in visit to speak w/ ADON, Brenda Amburgey and introduce myself and Purdue's NE program. I spoke w/ the receptionist, Sue who informed me that Brenda was in a meeting. I left educational offering materials along w/ my BC.
PPLPMDL0020000001	Cleveland	OH	44143	7/17/2013	Kept lunch previously scheduled, Mandel formerly listed as Butrans target. He reiterated again today at lunch, that he's staying away from writing scheduled pain meds, and refers out to pain management. He is however, willing to write insomnia agents, including intermezzo. I reminded him last time he viewed a patient vignette on the iPad. I showed him the new intermezzo marketing piece with the patient cases. Reviewed patient case, appropriate MOTN insomnia indication discussed, when patients have at least 4 hours sleep remaining. Covered core messaging, prn indication: in outpatient study, patients used intermezzo on 62% of nights. Sublingual, spearmint flavored. Must allow to dissolve, don't swallow whole. Highway drive study. Back to sleep time for men & women (from in lab polysomnography study). Trial, savings card. (left one pack) walked through patient guide with dr., which he likes & says will be helpful in counseling patients.
PPLPMDL0020000001	Bedford	OH	44146	7/17/2013	discussed susan profile on intermezzo vignette. dr said he know about intermezzo and i reminded him that he has plenty of caresource patients but he never asks them if they have motna. he said i was right and would try to start asking more sleep questions. reminded him of flexible dosing of oxycotin. gave butrans indicaton reminder.
PPLPMDL0020000001	Westlake	OH	44145	7/17/2013	I made a drop-in visit to speak w/ D.O.N., Sue William on scheduling an in-service on Pain Management. I spoke w/ receptionist, Debbie, who informed me that Sue was on a phone call, I waited 5 minutes, but she was still on the phone. I left educational offering handouts and my BC.
PPLPMDL0020000001	Parma	OH	44129	7/17/2013	staff responsible for prior authorizations were at the other office today but i reviewed butrans vouchers and patient had book during lunch. spoke with dr about butrans for patients not controlled on tramadol. dr said the coverage is poor. said he would write more if the coverage was better. i reviewed the formulary grid and reminded him that he has workers comp patients and caresource. he seemed surprised by this information and i asked what is it he specifically needed to know in order to write butrans and he mentioned the caresource prior authorization. i reminded him of the pain reduction in the clinical trials and he said he like butrans and would like to write more. i reminded dr of oxycotin flexible dosing. i asked how many of his patients complain about waking in the middle of the night. he said plenty and i asked him to think of the caresource patient when he thinks of intermezzo. i told dr next time we speak i will make sure he knows what the requirements are for caresource for butrans.
PPLPMDL0020000001	Richmond Hts	OH	44143	7/17/2013	Intended to speak with Dr. Gabriel Stanescu (OxyContin core), but he already left for day. His wife, Dr. Roxana, only dr left. the first thing she asked, is "do you have something for me to sign?" I stated no, but i want to introduce myself & my products to you(meeting her for first time) told her i've called on her husband for years. Asked her if she treats/manages chronic pain in her practice, yes she replied. She used to work in both nursing homes and hospice, so she's familiar with prescribing scheduled pain meds. So Dr. Stanescu, you are comfortable with prescribing opioids such as OxyContin q 12 h? Yes. Introduced her to Butrans as CIII 1x week option for chronic pain. Intermezzo, for MOTN insomnia, when patients have at least 4 hrs bedtime remaining. Zolpidem tartrate, sublingual tablet. Looked in OTC sample closet, that's where they put OxyContin, Butrans savings cards. They had intermezzo cards in there too, but pulled out and moved in open clear shelf outside sample closet door. Went to car & put together packet of info on each product for Dr. Roxana.
PPLPMDL0020000001	Lyndhurst	OH	44124	7/17/2013	Karen not available to speak with me directly. Diana checked sample closet to make sure they have enough savings cards for intermezzo, Butrans and OxyContin, which they did. She also checked OTC, good on SlowMag. Met with med asst Ebonye, asked her to please let Karen know Butrans added to national NP formulary. Also, Medco Medicare Part D now paying for Butrans. New formulary grids left. Importance of supplemental analgesia for Butrans discussed, while waiting for steady state, counsel patients on this information. Left new patient tear sheets. Intermezzo, new Facebook page. Patient guides to help counsel MOTN insomnia patients on intermezzo.
PPLPMDL0020000001	Westlake	OH	44145	7/17/2013	I made a drop-in visit to speak w/ the D.O.N., Liz Williams to re-schedule an in-service on Pain Management from December. I spoke w/ the receptionist, Casey who paged Liz, She was in a meeting w/ the Adm., Kelli Meadows. Liz asked if i could call her early next week. I left my BC
PPLPMDL0020000001	Olmsted Falls	OH	44138	7/17/2013	I made a drop-in visit to speak with the head of education and introduce Purdue's Nurse educator Program. I spoke w/ the receptionist, Rose who informed me that education is handled by the D.O.N., Pamela Riter, but she just entered a clinical meeting. I left my BC and PAP handouts.
PPLPMDL0020000001	Brooklyn	OH	44144	7/18/2013	Asked Rhonda if she has seen any Butrans/Intermezzo from Dr. Paul, she said not yet. Does see some OxyContin from Kushnar/across the street.
PPLPMDL0020000001	Akron	OH	44311	7/18/2013	Spoke with Matt the pharmacist about all products. Discussed intermezzo dosing, indication and limitations of use. Matt said he has not filled any. Explained Butrans indication, dosing, titration, conversions, and appropriate patients. Matt said he bows about it but has not dispensed any. OxyContin dosing and asked which doses he fills most. Matt said 20 and 40 mg doses are most often but also sees lots of fentanyl and ER morphine. Told him about the conversion for Percocet and told him what I'm telling drs when it comes to the 1 to 1 conversion
PPLPMDL0020000001	University Heights	OH	44121	7/18/2013	When I walked into lunchroom, Dr Price asked, so what are you going to tell us about Butrans & OxyContin today. Made me feel good he associates me with my 2 lead products! Dr Azar was there at same time. Reviewed appropriate patient selection for OxyContin, conversion titration guide, 7 doses available, START principles. not very excited about START principles. Butrans, when I brought up, he listened but not very engaged, and didn't ask a lot of questions, vs Dr. Azar who did. Intermezzo, reminder for MOTN insomnia, prn indication, gender dosing.
PPLPMDL0020000001	Akron	OH	44308	7/18/2013	MSL email communication with Dr. Friebert to provide study updates.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	7/18/2013	Spoke with Darelene about insurance plans for Medicare D plans. I reviewed the three Medicare D plans and asked about how often she sees them. She said they have a lot of ESI and SummaCare for Medicare and commercial. I explained the newness of the coverage for those plans. Reminded her about Caresource. Darelene said they refilled Butrans just today and had no issues.
PPLPMDL0020000001	Euclid	OH	44117	7/18/2013	In-Service @ 7am, 2:30pm & 3pm was completed on Pain Documentation for the Nursing staff. 19 were in attendance. Discussion and interaction on Key Components of Documentation and Reassessment parameters took place. The Comfort Assessment Journal, was shared with the Nursing Staff with a reminder that relieving pain requires a partnership between the healthcare professional and the resident/patient.
PPLPMDL0020000001	Beachwood	OH	44122	7/18/2013	spoke with diane who gave me the information for metro and booking appointments with Eileen. left brochures for butrans
PPLPMDL0020000001	Richmond Heights	OH	44143	7/18/2013	I met w/ Sheila Harris in Staff Development. I introduced myself and Purdue's Nurse Educator Program. I Confirmed 150 beds, including Skilled, Hospice & LTC. The pain assessment tool used is the Wong-Baker Scale. CPP is Omnicare. According to Sheila the % of residents being treated for pain is a large amount. She stated Percocet, Tramadol, Vicodin and a small amount of Oxycotin are used for pain management. There are 4 NP's on staff, Sheila is interested in scheduling an n-service on pain management, but needs approval from the D.O.N. prior to scheduling. The D.O.N. is currently on vacation. Sheila asked if i could call her next Wednesday, 7/18.
PPLPMDL0020000001	Akron	OH	44312	7/18/2013	Discussed with Sandy the office manager about Butrans and she told us that there was a patient who had been on Butrans and since July can't get it paid for. The plan was UHC commercial with a Optum Rx PBM. Looked up the info in Phoenix and confirmed that on July 1 that patients are now required to show history of a ultram ER or duragesic. Dr said she did place the patient on IR tramadol to see abut tolerability then move to ER if all was good. Discussed NSAID, tramadol and vicoden patient for Butrans and asked dr to place those patients on Butrans who meet the indication. Dr said she would continue to use Butrans because she has had good success.
PPLPMDL0020000001	Cleveland	OH	44144	7/18/2013	Quick call thru window, Dropped Butrans Patient info booklets, asked if she started any new patients yet, Dr. replied no but is searching. Told her to use the Butrans patient booklets to convince patients to accept
PPLPMDL0020000001	Akron	OH	44309	7/18/2013	1. MBK to present 2 FACETS programs for the Case managers.
PPLPMDL0020000001	Akron	OH	44305	7/18/2013	Spoke with dr Vora and Mrs Vora about Medicaid patients not being eligible for copay cards. Mrs Vora said they have a patient with Buckeye who needs a PA for Butrans as an initial script. I expressed Buckeye difficulties and Caresource coverage and PA requirement. Mrs Vora will still send in the PA because she said the patient has been on a high number of different of opioids in the past. I spoke with dr Vora about continuing to identify patients for Butrans like those on tramadol. Showed the Scott profile and asked him to continue searching. Dr told me that Butrans is a good product. Told dr that I will be in Copley health Center for a Butrans inservice at the end of Lunch with Dr. Azar. He recently attended a speaker program on pain management at Hillcrest hospital, where they discussed the benefits of buprenorphine. He stated that both Dr. Dan Leizman and Dr. Englok Yap spoke. He was interested in hearing more about Butrans from me. I told him he missed a good program on Mon July 8th and mentioned Dr. Laham. He said he'd rather hear about my products from someone whom is not paid by our company to speak. That's why he enjoyed the Hillcrest Pain Mgt talk. He had concerns with titrating. And stated, how can i titrate every 72 hrs, if needed, if you are telling me to only have patients put on one patch at a time. That would be expensive. I told him I can only discuss what's contained in Butrans FPI. If he does something different, that's up to him. I reviewed pain score reduction in opioid experienced trial. He was satisfied with pain scores. Went through MOA verbatim in FPI. Contraindications and Black Box Warning. Went over dosing, using dosing slider. Showed him patch demo. After going through dosing slider, he was more comfortable with dosing. I summarized what he said. He stated he can think of a lot of current patients that would benefit from Butrans. I told him I am holding him to that and will follow up next, and expect him to have a few patients initiated on Butrans. OxyContin also as an option for patients with chronic pain who need ATC analgesic for extended period of time. Looked at conversion/titration guide. Intermezzo MOTN ins
PPLPMDL0020000001	Mayfield Village	OH	44143	7/18/2013	

PPLPMDL0020000001	Parma	OH	44134	7/18/2013	Spoke with pharmacist and told them about caresource approval of Intermezzo and he was not aware. I told him no ab equal. Reviewed titration of butrans and discussed proper application sites and site preparation. Discussed the importance of accessing pain as the last part of the start principle.
PPLPMDL0020000001	Parma Heights	OH	44129	7/18/2013	Spoke with pharmacist about intermezzo indication and dosing with dosing card. Reviewed Butrans conversion from tramadol using titration guide. Asked how often she sees patients on short acting opioids for longer than 3 months and she said often. Discussed patient Scott profile for butrans. Discussed flexible dosing of OxyContin
PPLPMDL0020000001	Parma	OH	44129	7/18/2013	Reviewed dosing and administration of intermezzo with pharm tech. Spoke with pharmacist about butrans titration and conversion and peak plasma levels in 3 days. Reviewed flexible dosing of OxyContin and start principle. Pharmacist asked about coverage for butrans and I reviewed formulary grid
PPLPMDL0020000001	Akron	OH	44311	7/18/2013	Dr would not sit to discuss products. Gave abbreviated overview of Butrans. Discussed schedule 3, 7 day transdermal patch, dosing, titration, conversions and patient types. I asked dr if based on his experience with opioids if Butrans is a product he will use? Dr said it seems like it is because dr said it is easy and a transdermal patch. I ex, wined managed care which he asked about and made it specific to his business.
PPLPMDL0020000001	Cleveland	OH	44115	7/18/2013	Saw Dr. dr. dn at St.V.s, patient load has picked up at this location. quick reminder on Butrans for those LorTab failures, initiation/titration. Asked for some intermezzo RX where appropriate, Confirmed Aug 21 program date
PPLPMDL0020000001	Tallmadge	OH	44278	7/18/2013	Followed up from last appointment with dr about his prescription of Butrans and the PA that was required. Dr. said that the PA did go through and the patient will receive Butrans and he could not remember the dosing. I asked dr what signs he will look for to ensure the patient is doing well on the product? Dr said sometimes he uses the pain scale but most of the time he will talk to the patients and ask them how they are doing with their pain and if their activities of daily living are getting better. I told dr to ensure to titrate the dose if necessary and supplemental analgesia are used. I told dr to continue prescribing Butrans.
PPLPMDL0020000001	Beachwood	OH	44122	7/18/2013	asked diane what the procedures were for seeing the physicians and she gave me the information for the main campus and booking appointments to see the physicians. left butrans titration and conversion brochure
PPLPMDL0020000001	Cleveland	OH	44130	7/18/2013	Spoke with Renee about intermezzo indication and limitation of use. Discussed butrans titration and conversion with proper site preparation. Discussed flexible dosing of OxyContin.
PPLPMDL0020000001	Akron	OH	44311	7/18/2013	Discussed all products with Jenna. I asked about her experience with opioids and she said she uses short acting and long acting products however doesn't use much long acting products. I presented Butrans and hit all key selling messages. I explained patient types and asked her if it is a product she would prescribe? Jenna said it is but was interested in efficacy data. Explained efficacy data from Bup 3015, managed care, disposal of Butrans Discussed oxycontin for her patients on IR oxycodone and reviewed doses. Intermezzo indication, dosing, and ,initiations if use.
PPLPMDL0020000001	Akron	OH	44311	7/18/2013	Discussed all products with doctor. Explained Butrans key selling messages and reviewed patient types. I asked dr what the clinical advantage of keeping a patient on a short acting opioid is when they have a chronic pain condition? Dr didn't really answer but said he said he tries to initiate ER opioids earlier on in treatment. I told dr I liked to hear him say that because Butrans should be implemented early on in treatment. I explained Butrans clinical trial Bup 3015 and explained efficacy data and safety. I asked dr if he feels Butrans is a product he believes would fit in his treatment of pain? Dr said it does think its an east product to write because its a schedule 3 and the patch seems like it would fit many patients. Discussed managed care and asked him which commercial plan is most impactfull in his practice? Dr said medical mutual. Explained medical mutual plansamong all others including Caresource.
PPLPMDL0020000001	Brooklyn	OH	44144	7/18/2013	Reminded doc of Butrans for those Tramadol failures, OxyContin Q12h Dosing and Intermezzo for MOTNA/dosing. Said Thank you and will try to remember. Cost/ins. coverage is important to him
PPLPMDL0020000001	Parma	OH	44129	7/18/2013	conducted patient vignette for intermezzo patient profile susan. asked her if she knew the dose for men and she said 1.75. I told her 3.5 and she said she thought I was asking about the profile she just read. she said she is tried to write intermezzo and it was rejected by caresource and I told her that it had to say the patient tried and failed soledipem. I also communicated this to all the staff filling out prior authorization forms. discussed the patient that was having difficulty getting butrans and she said she made note that the patient was having gi problems which was documented in his chart. asked if they had patients on oxycontin and she said no. myra rounds at the nursing home on mon and fri and I asked about inservicing at the home and she said she would like that and would talk to them.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/18/2013	I asked dr what her philosophy about treating pain? Dr said that her philosophy is simple because she doesn't treat chronic pain. Dr said if she has an acute injury that needs a pain median e for a few weeks she's ok with but patients that need continued pain control for persistent pain she will refer to pain management. Dr said she will not even prescribe tramadol. I told dr I was going to explain Butrans anyway. I discussed all key selling messages and patient types. I told dr that she may have a patient come to her with a Butrans patch on and she needs to be familiar with it. Dr agreed.
PPLPMDL0020000001	Parma	OH	44129	7/18/2013	dr said he refers pain patients to dr demogone downstairs. I asked if he had patients on butrans and he siad dyes but he did not put them on it. I asked about oxycontin and he said he will not prescribe that because he has enough to deal with as a cardiologist. reviewed intermezzo indication and limitation of use.
PPLPMDL0020000001	Tallmadge	OH	44278	7/18/2013	Skokie to Ray the pharmacy manager about Butrans AE's and showed him them for opioid experienced patients and asked him if any of them sets off any red flags? Ray looked at them and said no because most are comparable to placebo. I told Ray that I'm asking him that because a patient cam in with a Butrans prescription and was told by the pharmacist that the adverse effects of the product and opioids in general would not be recommended by the pharmacist. ARay said that he knows it wasn't him and that it may have been a floater. Ray said that its unfortunate because he believes in butrans. Ray told Barry and I about the patient on OxyContin 30mg qid and was just refilled it. Barry and I asked about the physician and was told it is Matthew Jones in comprehensive pain management. We spoke to Ray about appropriate Q12h dosing and the inappropriateness of Q6 h dosing. We asked Ray not to fill Q6h scripts going forward.
PPLPMDL0020000001	Parma	OH	44129	7/18/2013	Dr asked me why I had my computer out and I said to discuss a patient, he said he has a patient in the room and he has a computer. We discussed james and went through the vignette for intermezzo. he said so intermezzo is for males with problems sleeping and insurance. I told him the dose for james is 3.5 and reviewed gender specific dosing and limitation of use along with savings cards. dr said he was just thinking of me and I asked if that was because he had a butrans patient he wanted to tell me about and he shook his head no. I asked was it about the flexible dosing of oxycontin and he forgot there was a 15 mg. he said no. I said he was probably thinking that I asked him to take 2 butrans savings cards and let me know the type of patient he gave them to and he knew I would be back to ask and he did not have an answer. he said yes. I told him i will keep coming back and the only thing he can do is give an appropriate patient the savings card and let me know the outcome. he said he will. I told him i will be back in 2 weeks and will be eager to hear who he gave a trial card to
PPLPMDL0020000001	Cleveland	OH	44115	7/18/2013	Met with George(RPH) discussed Butrans for those Tramadol failures along with OxyContin Q12h. Hasnt seen any Butrans from Nickels yet, thus hasnt ordered any in, Informed of Dr. A George has left St. V.s
PPLPMDL0020000001	Akron	OH	44308	7/18/2013	Per request from Summacare, provided a non-accredited educational program to case managers with Summacare. Attendees included case managers, and topics presented were "Pain Care in the Older Adult" and "Primer on Addiction". Handouts of the slides were provided.
PPLPMDL0020000001	Cleveland	OH	44114	7/18/2013	Reminded Elaine of Butrans for those LorTab/Norco failures, she said she will prescribe. Confirmed Aug 21st Moufawad MD program
PPLPMDL0020000001	Akron	OH	44312	7/19/2013	Dr spoke about not having the type of success with Butrans as he has like to have had. Dr said that there are a number of patients who either don't want to pay for it and those that say it just isn't what they want. I discussed efficacy data, selection of appropriate patient types, appropriate starting doses and formulary. I told dr to continue doing what he already knows which is to initiate early and to focus on patients on tramadol, or low dose vicoden. Dr said he will continue to try. Discussed the start principles with OxyContin and asked him what he thinks? Dr said he agrees with it for the most part and understands the product but said he doesn't like prescribing because it gets him too involved in pain management which he doesn't want to do. I asked dr to at least switch his Percocet patients to OxyContin. Reviewed intermezzo indication and doses and asked for Dr said he is not having the success with Butrans as he would have liked and reminded me about the pharmacist that scared the patient off of filling Butrans. I explained to dr wells and Taylor about speaking with Ray the pharmacy manager at Rite aid about the incident and was told it was a floater who may have had that discussion with the patient. Dr said the patient was not naive to opioids and should have understood the risks associated with any opioid. Explained efficacy, appropriate patient selection and starting doses and titration. Dr said he will continue to try and use it to find more success. Explained the start principles for OxyContin and asked for him to use it when patients are on Percocet around the clock. Intermezzo dosing and indication.
PPLPMDL0020000001	Akron	OH	44320	7/19/2013	I showed dr the Scott and nancy profiles. I told him that these are the two patient types where he will have the best chance of success with the product. I reminded him of insurance coverage specific to his practice and asked him to had out the information guides to the patients after he explains it to them.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	7/19/2013	I placed a phone call to Nancy Stauser in Staff Development to see about scheduling an in-service on Pain Management. N/A I left a msg.
PPLPMDL0020000001	Fairlawn	OH	44333	7/19/2013	I Placed a phone call to the D.O.N., Deborah Shaffer to check the status on the new change over and see if she is now able to schedule education. N/A I left her a msg. on her voice mail.
PPLPMDL0020000001	Uniontown	OH	44685	7/19/2013	Reviewed products with barb and asked her if she has seen any intermezzo or Butrans recently. A Barb said no but has been seeing more from CPM in uniontown. Exp,aimed patient types for OxyContin, Butrans and Dr said he needs both Butrans and OxyContin copy cards. I asked dr about where he is using Butrans and OxyContin? Dr said he is using OxyContin primarily for patients on Percocet and Butrans for tramadol, vicoden and low dose Percocet patients. I reminded dr about starting doses for each product.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/19/2013	I reminded dr about starting doses for each product.
PPLPMDL0020000001	Fairlawn	OH	44333	7/19/2013	I Placed a call to Michelle Williams in Staff Development to schedule an in-service on Pain Management. N/A, left a msg. on her voice-mail.
PPLPMDL0020000001	Akron	OH	44319	7/19/2013	Quick stand up call and asked dr to write Butrans. I asked him what is he waiting for? Dr said finding patients. I told him that he told me that he has lots of patients on vicoden. I told dr that he needs to be choosing those patients for Butrans and to dose appropriately. Told dr to begin using intermezzo again for patients with in the middle of the night insomnia.
PPLPMDL0020000001	University Hts	OH	44118	7/19/2013	Spoke with Yesheda(Nurse) Went over Butrans-Dosing/Initiation/Titration, for those Tramadol failures, OxyContin 7tablet strengths Q12h. Intermezzo MOTNA and dosing. along with Trial/Savings Card. Booked appt.
PPLPMDL0020000001	Copley	OH	44321	7/19/2013	Spoke to Sam the technician about intermezzo and Butrans. I reviewed the dosing, patient types and titration for Butrans and intermezzo.
PPLPMDL0020000001	Cleveland Hts	OH	44118	7/19/2013	Discussed with Rola(RPH) Butrans dosing/titration, OxyContin- Savings card along with Intermezzo MOTNA and dosing. Has seen some Butrans(Brietenbach).
PPLPMDL0020000001	Akron	OH	44320	7/19/2013	I told dr to continue prescribing OxyContin for her patients on Percocet and showed her the conversions in the conversion and titration guide. I showed her the nancy profile and asked her to use Butrans for patients she refills each month on vicoden. Dr said ok and she likes Butrans.
PPLPMDL0020000001	Cleveland Heights	OH	44118	7/19/2013	Spoke with Opelila(RPH) on all 3 products (Butrans-Initiation/Titration) OxyContin Q12h and Intermezzo-MOTNA/dosing. Hasnt seen any RX's for Butrans, told her Dr Harris is prescribing, will not stock until she gets RX
PPLPMDL0020000001	Akron	OH	44320	7/19/2013	Dr was filling out a pa form when I began speaking with her. Dr said that it is for a Medicare patient who has been on multiple pain medicines and she wanted to try Butrans 10mgc. Dr faxed the form in and will let me know next week the outcome. I asked dr if she has patients currently on vicoden or tramadol only? Dr said she has many. I told her that those patients are best suited to have success with Butrans and she needs to keep it simple. Dr agreed. Discussed the start principles for OxyContin and asked her for more business. Dr said thanks for the review especially dosing down.
PPLPMDL0020000001	Cleveland	OH	44127	7/19/2013	Reminded Dr. of opportunities to prescribe Butrans (Tramadol failures along with patients that are requiring around the clock pain relief. Intermezzo for MOTNA along with dosing. Dr. said OK
PPLPMDL0020000001	Cleveland Hts	OH	44118	7/19/2013	Brief discussion on Butrans 7day transdermal system, Tramadol failures along with intermezzo Trial/Savings card for MOTNA/Dosing. Dr. said OK/book appt. to further discuss
PPLPMDL0020000001	Cleveland Hts	OH	44118	7/19/2013	Briefly went over OxyContin Q12h, flexible dosing strengths, Butrans for those Tramadol failures and intermezzo for the MOTNA and dosing. Left Trial/Savings card and Dr.suggested a lunch appt. Talked with Renee/Pam was put on cancellation list
PPLPMDL0020000001	Hudson	OH	44236	7/19/2013	Quick OxyContin discussion and asked dr if he is still panning on using it? Dr said he does continue to use it and looked at the doses. Dr said he has success with the 20 and 40 mg and will continue to use. I asked dr to use the 10mg Q12h for patient on 20mg of Percocet a day
PPLPMDL0020000001	Mayfield Heights	OH	44124	7/19/2013	Made a drop-in visit to speak w/ Staff Development Coord., MaryAnne. Spoke w/receptionist, Joan who called "MaryAnne's office. Per Joan, MaryAnne said," is not in her office and I cannot page her." I left my business card
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/19/2013	I placed a phone call to speak w/ D.O.N., Debbie Keller, to introduce my self and Purdue's Nurse Educator Program. N/A, Left msg on her voice-mail.
PPLPMDL0020000001	Glendale	OH	45246	7/22/2013	Spoke with John. He was not familiar with Butrans. Briefly discussed indication and appropriate patients. He wasn't interested in knowing more. Discussed OxyContin and reviewed FPI. He said they don't see many scripts, some for lower doses
PPLPMDL0020000001	Cleveland	OH	44106	7/22/2013	Visited pain center , asked if he has prescribed Butrans yet, he said not yet but is still looking to prescribe in appropriate patients.Reminded for Tramadol failures

	Akron	OH	44313	7/22/2013	Spoke with Natalie the pharmacy technician about intermezzo indication and dosing. Natalie said she has not seen any come through but will keep her eyes open. I presented all of the Butrans patient profiles and told her about the patients types appropriate for the product. Natalie said they have the 5 and 10mg in stock and just filled one late last week for the 5mg. I asked who the physician was and she said she couldn't remember. Gave her the OxyContin conversion guide and reviewed the dosing and conversions.
PLPMDL0020000001	Fairlawn	OH	44333	7/22/2013	I placed a phone call to Training Director, Terri Gildone to schedule an in-service on Constipation for September. I was informed by the receptionist that she was doing an interview. I left a msg.
PLPMDL0020000001	Garfield Hts	Akron	44125	7/22/2013	Left info for Key clinicians-General Surgeons/Ortho(Lopresti,Levine,O'Brien Gemma,Forcier, ElKhari Pantec, Peralta-CCF(Lichenberger,Rapur,Sargento,Nowak, Love, Hauer-Kaiser surgeons) Left cards and info for Nursing Staff/Clinicians
PLPMDL0020000001	Waterford	OH	45786	7/22/2013	I-managed-care, clinical trials and Maria patient profile for Butrans. OxyContin managed-care coverage for West Virginia and Ohio. Intermezzo dosing and administration.W-having a lot of success with Butrans at both the nursing home and in the office. The Medicare part D coverage changes will be helpful.
PLPMDL0020000001	Tallmadge	OH	44278	7/22/2013	Discussed Butrans with dr and discussed all key messages. I reviewed patient profiles and asked him if he will prescribe it? Dr said probably not because his physician group led by Dr Rigby doesn't treat chronic pain and they refer to Western Reserve Pain. I told dr I understand. Nothing else learned.
PLPMDL0020000001	Fairlawn	OH	44333	7/22/2013	Handed dr the Butrans Scott profile and told him to open it up to see where at patient like Scott at 400mg of tramadol would be initiated on Butrans. Dr looked and said it makes sense and that is probably where he would start as well. I asked dr to take an extra minute with a patient like him and evaluate the possiblity of Butrans. Dr said ok and took the profile.
PLPMDL0020000001	Uniontown	OH	44685	7/22/2013	I asked dr what triggered him to begin using Butrans again? Dr said he just had a few patients who he knew he could continue treating them for their pain and asked for other options than pills. I told him that's great and hope they continue on the medicine and have good results. I asked dr to continue thinking about patients who are on ultram around the clock and are still in pain. Dr said he will and thanks.
PLPMDL0020000001	Akron	OH	44333	7/22/2013	Good front desk call. Asked dr if I could get a minute and he let me back. I presented all three patient type profiles for dr and asked him if they all made sense for Butrans? Dr said yes and said that as he told me before, he wants Butrans to be started sooner than later. Dr said tramadol patient will be the place he sees using it most. I reviewed the managed care coverage and asked for him to start using it more frequently. I gave brief overview of the OxyContin start principles and asked him if he agrees. Dr said he does but admitted to not doing down. Dr said rarely will patients want to be titrated down. I asked him for his Percocet patients. Dr said as he gets more and more patients he's sure he will have more opportunity.
PLPMDL0020000001	Akron	OH	44333	7/22/2013	I asked dr to prescribe more OxyContin for his patients he is about ready to refill their Percocet. I showed him the conversion and titration guide with the conversions. I gave him the Butrans slim Jim conversion guide and asked him to initiate Butrans early for his tramadol patients. Dr said he has had some success recently with Butrans for patients on tramadol. I asked him to continue because Butrans and OxyContin can provide solutions early and later on in the treatment of pain.
PLPMDL0020000001	Akron	OH	44333	7/22/2013	Showed dr the Scott profile for Butrans over the front counter. I asked him if he has used Butrans for patients on tramadol? Dr said yes all the time. I told dr that a patient like Scott on 490mg of tramadol should be started on the 10mg dose and asked him if he agreed? Dr said yes. I asked him to prescribe more patients Butrans who are on tramadol around the clock and complaining of pain. Gave Wendy the receptionist the OxyContin conversions and titration guide to hand to dr. Dr said now will look it over.
PLPMDL0020000001	Cleveland	OH	44106	7/22/2013	Visited Pain Center, left dept Butrans Initiation/Titration guides, asked Shah if he has prescribed , said not yet but is looking where appropriate
PLPMDL0020000001	Akron	OH	44333	7/22/2013	I made a drop-in visit to speak w/ Ramona Watson, and present Purdue's Nurse Educator Program. I was informed that she was not available. I left Purdue's educational offering handouts along w/ my BC. I placed a follow-up phone call to D.O.N.,Ramona Watson to set up an appt. to discuss educational in-service opportunities. N/A. Left Msg. on her voice-mail.
PLPMDL0020000001	Cleveland	OH	44106	7/22/2013	Went over OxyContin Q12h DOSING,Butrans for those Tramadol failures And intermezzo MOTNA/dosing. Marge said everything is status quo
PLPMDL0020000001	Munroe Falls	OH	44262	7/22/2013	I asked dr if she has had any experience with Butrans recently? Dr said she has not and any and doesn't know why? I showed dr all three patient profiles and explained each one. I asked dr where she believes she can see her using Butrans most? Dr said probably the tramadol patient because she knows it needs to be used early. I asked dr when she is ready to prescribe a refill for tramadol or to move to vicoden to take a second and ask if the patient is appropriate for the 7 day transdermal patch. Dr said she likes that and admitted that it is easy to just refill the short acting product. Reviewed the start OxyContin piece and asked her to use it more often and to remember the start program. Gave her a review of intermezzo indication and patient profiles. Dr said her patient on intermezzo said they are doing well with it.
PLPMDL0020000001	Waterford	OH	45786	7/22/2013	I-Butrans clinical trials, Maria patient profile, managed-care, dosing, indication, boxed warning and co-pay cards. OxyContin managed-care and co-pay cards for West Virginia and Ohio. Intermezzo dosing and managed care.W
PLPMDL0020000001	Akron	OH	44313	7/22/2013	said that they had trouble with patients who were on Medicare part D and getting Butrans approved in the past.
PLPMDL0020000001	Cleveland	OH	44113	7/23/2013	I completed a constipation in-service for STNA's, there were 7 in attendance. The Senokot laxative protocol was handed out & reviewed w/ the STNA's. Discussion & interaction on the risk factors, signs and symptoms, complications and treatment of constipation took place. Feedback rec'd from the STNA's: They informed me that this in-service was filled with good information and they learned a lot.
PLPMDL0020000001	Cuyahoga Falls	OH	44223	7/23/2013	Discussed Butrans along with thoughts on who it should be prescribed to, says she likes weekly transdermal delivery system, confident in its efficacy. Struggles with PA, reinforced Melissa's confidence in getting approvals thru. intermezzo MOTNA along with dosing
PLPMDL0020000001	Cuyahoga Falls	OH	44223	7/23/2013	I asked dr where he is prescribing most of his OxyContin? Dr said on floors 2-5 of Summa western reserve. I asked him when he is prescribing OxyContin? Dr said he sees the patients when they are already taking up to 6 pills a day of Percocet. He switches those patients to OxyContin. I discussed the conversions from Percocet and asked him to begin earlier if he can and utilize the 10and 15mg doses. I asked dr why he isn't using more Butrans? Dr said he didn't know but said he should be using it. Dr asked where and when he should use. I discussed appropriate patient types and approximate conversion chart. I asked him to evaluate those tramadol and vicoden patients who are on them around the clock for possible Butrans patients. Dr said he understands and will use more. He asked about insurance coverage. Discussed formulary grid and he was impressed with the coverage. I showed dr the intermezzo dosing guide and asked him to identify appropriate patients.
PLPMDL0020000001	Cuyahoga Falls	OH	44221	7/23/2013	Spoke with Krista a new pharmacist at this location. She came from the canton rd cvs. I asked her if she filled Butrans for Dr Cain? Krista said she did and said he really likes it. I discussed intermezzo indication, dosing and limitations of use. Butrans dosing, appropriate patients, titration, and conversions. Reviewed formulary grid with her. Asked her about OxyContin fill rates. Krista said Amy the head pharmacist does a good job of keeping all doses stocked because she sees a good amount from pain management.
PLPMDL0020000001	Cuyahoga falls	OH	44223	7/23/2013	I asked Kim about her prescribing ability and she said she can prescribe schedule 3 and up starting after 6 months of a probationary period of 6 months which should be in October. I discussed Butrans dosing, titration, conversions and appropriate patients. Kim agreed to begin Butrans early but said she has also seen it be effective for patients failing on low dose fentanyl. I discussed the tramadol and vicoden patients as appropriate and asked her to prescribe when the time is right. I discussed OxyContin dosing, titration and appropriate patients and how intermezzo can fit in for in the middle of the high insomnia patients.
PLPMDL0020000001	Cuyahoga Falls	OH	44221	7/23/2013	Caught dr as she was coming in for the morning. I asked dr if her Caresource patients are getting Butrans? Dr said they are and told me thanks for working with Darlene to ensure patients are able to get it. I told her to continue prescribing for those patients that may be ready for a dose adjustment on a short acting opioid. Dr said ok and thanks.
PLPMDL0020000001	Cuyahoga Falls	OH	44223	7/23/2013	Spoke to Patrick about products. I asked him if he has seen any intermezzo and discussed indication and dosing? Pat said he has not and said he knows its tough to get and expensive. I asked if he is continuing to see Butrans? Patrick said he is filling it at least once a week and has all doses in stock. Pat said he filled one for Souzandalis last week. I asked about OxyContin filling and reviewed the start principles. Patrick said they have all
PLPMDL0020000001	Olmsted Falls	OH	44138	7/23/2013	I placed a phone call to D.O.N., Pamela Rietra to introduce myself and Purdue's Nurse Educator Program. N/A. I left a message on her voice-mail.
PLPMDL0020000001	Cleveland	OH	44114	7/23/2013	Discussed Butrans and what she likes about it, said the once weekly transdermal system and feels it works well. I asked why she doesnt prescribe more, said she is a work in progress. Reminded of Intermezzo for
PLPMDL0020000001	Akron	OH	44313	7/23/2013	I placed a phone call to Richard Lynch to schedule another in-service on constipation per his request. N/A. I left a msg. on his voice-mail.
PLPMDL0020000001	Stow	OH	44224	7/23/2013	Spoke to the pharmacy technician Maria about intermezzo indication, dosing and patients appropriate. Gave her Butrans initiation and titration guide and reviewed dosing and titration. I asked if she sees cscripts from Summit Pain and she said she does from yang. I Eco.wined dosing and titration of OxyContin and explained the conversions from Percocet.
PLPMDL0020000001	Cuyahoga Falls	OH	44223	7/23/2013	I spoke to dr about the start principles in the OxyContin conversion and titration guide. Reviewed the START and asked dr what he thinks and if he agrees? Dr said he does and said he usually does not titrate down unfortunately. I asked why and he said because patients never want less. I asked dr to consider down titration if the patients pain is decreasing or following surgery and physical therapy has proven effective to reduce pain. Dr agreed and said it was good information. Gave him the initiation and titration grid for Butrans and told him to gain clinical experience for patients failing tramadol. Dr said ok. Nothing else learned.
PLPMDL0020000001	Cuyahoga Falls	OH	44223	7/23/2013	Sort discussion over lunch appointment. I asked dr how he feels about titrating patients from 10mg to 20mg? Dr said he will not maximize any pain medicine. Dr said he believes that if the 10mg doesn't work than why would the 20mg? I told dr about the opioid experienced trial and how patients were force titrated to the 20mg and discussed the efficacy data and AE's. dr said he still believes to not titrate to max dose. I asked dr if a large number of his patients are getting enough analgesia with the 10mcg? Dr said they are and side effects are minimal. Dr said that's why he lies it. I asked dr to continue prescribing which he agreed. I asked dr to evaluate his Percocet patients for OxyContin and showed him the conversion chart. Dr said he tries to and likes the q12h OxyContin.
PLPMDL0020000001	Cuyahoga Falls	OH	44223	7/23/2013	Discussion about products over lunch. I asked dr where he is finding most of his success? Jake said that it works well for patients earlier than later on in their treatment of pain. Jake said that the tramadol and vicoden patients respond well to Butrans and his older population like it because they can put a patch on for a week and forget about it. I asked Jake what he thinks about titrating to 20mcg? Jake said that he doesn't really have a issue with it but is a little leery about titrating to 29mg in his old frail patients. I told Jake that I understand and asked him what he is telling his taints about Butrans for the first time? Jake said that he tell them how it is more of a controlled release pain medicine and they only need 4 patches in a month. Jake said patients really like that and as a PA he can prescribe it. I asked him when he is able to prescribe schedule 2 medicines? Jake said he will in November. I told him to use OxyContin when patients on IR oxycodone around the clocks are appropriate for the q12h oxycodone.
PLPMDL0020000001	Cuyahoga Falls	OH	44223	7/23/2013	Quick conversation over lunch and asked him how his patients are doing with Butrans if there is anything I can help with or answer any questions? Dr said he patients are really doing well and finds that titrating to the 20mcg is necessary for his severe patients. I asked d r did the 20mcg is meeting expectations with efficacy? Dr said it is and he really likes how the side effects are low. I asked if application puritus is an issue? Dr said no and finds great success with the 20mcg. I asked dr not continue using Butrans and he agreed. I showed dr the OxyContin conversion and dosing guide and showed him the start principles. Dr said he uses it also with great success. I asked him to use it earlier on in treatment for those patients on 20mg of Percocet and up.
PLPMDL0020000001	Cuyahoga Falls	OH	44223	7/23/2013	Caught dr at window and gave her the Scott profile. I asked her if she would initiate Butrans for th next patient she has on tramadol around the clock and needs a dose adjustment. Dr said she knows and for some reason hasn't started a patient yet. I asked he if she has any questions about Butrans that may be making her pause? Dr said no and said she will use it. I gave her th formulary grid and told her about Medco and SummaCare Medicare D coverage.
PLPMDL0020000001	Cleveland	OH	44113	7/23/2013	Discussed Butrans for those Tramadol/LorTab failures, She agreed a good patient starting point. No issues in prescribing since OH NP has added to approved formulary. Intermezzo-MOTNA/Dosing
PLPMDL0020000001	Cleveland	OH	44105	7/23/2013	Discussed all three products,Butrans-Tramadol failures, OxyContin Q12h dosing and Intermezzo for MOTNA/dosing ] along with savings/trial cards. Will recommend when appropriate
PLPMDL0020000001	Cleveland	OH	44113	7/23/2013	Discussed OxyContin reformulation, Dr.reiterated he is no longer prescribing CII. Went over Butrans, for those Tramadol/LorTab failures, just participated in a mkt.research on Butrans mktg pieces. Intermezzo MOTNA and dosing<font color=blue>->CHUDAKOB's query on 07/31/2013</font>->f/b>f>

PPLPMDL0020000001	Cleveland	OH	44113	7/23/2013	Discussed the reformulation of OxyContin, Dale now has his C2 prescriptive authorization. He is seeing more of the Ortho. rehab patients. Reinforced Butrans position, agreed, said he started a patient last week. Intermezzo MOTNA/dosing reminder along with Trial/Savings cards<font color=blue><b>CHUDAKOB's query on 07/31/2013</b></font>Mark, can you clarify the specifics of your discussion of the reformulation of OxyContin?<font color=green><b>GUTKOMA's response on 08/02/2013</b></font>We discussed how they reformulated OxyContin tablets to be more difficult to manipulate for misuse or abuse(gel like substance) with the understanding that the OxyContin reformulation still a Schedule II that can be abused<font color=blue><b>CHUDAKOB added notes on 08/07/2013</b></font>ok. Thanks. I addressed this in another call not annotation.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/23/2013	Spoke with Glenn the pain management in house pharmacist about Butrans and OxyContin. I asked Glenn about Butrans prescriptions and if he has had any issues approving? Glenn said things have gone smoothly as of late and most PA's go through. I explained the new formulary grid focusing on SummaCare commercial and Medicare D, Medco Medicare D and Caresource and BWC. Discussed oxycontin prescriptions and Glenn said they are not using as much because they like Butrans so much. I discussed with him the appropriate placements of each product in the treatment of pain and how one cannot substitute for the other.
PPLPMDL0020000001	Cleveland	OH	44109	7/23/2013	Briefly went over OxyContin-Q12h dosing, along with Butrans for those Tramadol failures and Intermezzo for MOTNA/dosing. Savings/Trial cards. most patient at pharmacy are govt. sponsored
PPLPMDL0020000001	Akron	OH	44313	7/24/2013	I asked dr what he is doing for his patients on 20mg of Percocet and need a dose adjustment? Dr said he typically takes patients to about 30mg of Percocet before he moves to extended release. I asked why he waits til then? Dr said he wants to give the short acting a chance and most of the time it works well. I showed dr the conversion guide and asked him what the downside is to initiating earlier with ER oxycodone? Dr said nothing other than maybe cost. I explained how well coverage is with OxyContin and asked for the business earlier. Dr said ok. I gave dr the Scott profile for Butrans and asked dr to review and to start using Butrans.
PPLPMDL0020000001	Munroe Falls	OH	44262	7/24/2013	I told dr that after we spoke the other day I was wondering what triggers or things make you think about prescribing an ER opioid? Dr said usually it depends on the patients pain level, what the diagnosis is and if the other medicines aren't giving enough pain relief. I asked dr if she would ask herself these things when she sees her patients on tramadol or vicoden as possible candidates for Butrans? Dr said that is a good idea and knows she can be prescribing it more.
PPLPMDL0020000001	Hudson	OH	44236	7/24/2013	Jackie the office manager allow me to see dr Tosino and dr Seiple. I told dr Seiple that when he is in front of a patient on tramadol around the clock and may need a dose adjustment to initiate Butrans. I gave him the Scott profile and asked him if he will do that? Dr said he has already started a few patients on Butrans from tramadol. I told him about the new formulary grid.
PPLPMDL0020000001	Akron	OH	44313	7/24/2013	I made a drop-in visit to meet w/ Richard Lynch to schedule an in-service on constipation for his day shift nursing staff. I spoke w/ Richard, an in-service was scheduled for Monday August 12th @ 10am.
PPLPMDL0020000001	Akron	OH	44320	7/24/2013	Dr saw me and told me that the patient she put though last week that we spoke about got approved for Butrans! Dr was happy because she said that all three patients that she prescribed Butrans for that needed a PA got approved. Dr said that she started on the 10mcg dose and she will let me know how the patient does. I reminded dr that she can titrate to the 20mcg after 3 days if necessary. I asked dr to continue using Butrans. Gave her the OxyContin conversion guide and asked her to continue using it along with intermezzo and showed her the dosing guide.
PPLPMDL0020000001	Hudson	OH	44236	7/24/2013	Spoke with Mary the pharmacist about intermezzo dosing and limitations of use. Mary said she thinks she has seen one in a year. Gave her the formulary grid. Explained the Butrans dosing and initiation and titration guide.
PPLPMDL0020000001	Stow	OH	44224	7/24/2013	Told Mary about the new formulary grid for OxyContin Medicare D.
PPLPMDL0020000001	Hudson	OH	44236	7/24/2013	I discussed the OxyContin start principles and asked her what her thoughts are? Dr said she agrees with them and said she tries to find the lowest possible dose to produce analgesia and low side effects. I asked dr to use the low doses for patients on 20mg of Percocet and showed her the conversion guide. Dr said ok. Gave her the Butrans initiation and titration guide and asked her to initiate Butrans for a tramadol patient in pain instead of Jackie the office manager allowed me to get a word in with the doctor. I showed dr the start principles and briefly explained each. I asked dr if he agrees? Dr said he does and liked the reminder on the ability to titrate and adjust down in dose. I asked dr to prescribe more for his patients on IR oxycodone. Gave him the Butrans slide conversion guide and asked for business from his tramadol patients.
PPLPMDL0020000001	Fairlawn	OH	44333	7/24/2013	I made a drop-in visit to speak w/ Education Training Director, Terri Gildone. I introduced myself and Purdue's Nurse Educator program. We talked about the facilities educational needs and educational in-service opportunities were discussed, unbranded and branded. The facility is primarily short-term rehab, Terri also stated that they do not have a demelia unit. Terri was excited about Purdue's program. She also voiced interest in and asked if we offered an in-service/education on falls. Accompanied by Joe Hennessy, he explained to Terri that Purdue's primary focus is pain management. Terri understood and scheduled an in-service for Wednesday September 11th @ 2pm on "Pain; a team approach"
PPLPMDL0020000001	Hudson	OH	44236	7/24/2013	Spoke with Beth the pharmacist about products. Beth said she has not seen any intermezzo but said she had her first Butrans prescription come in last week. I asked who the physician was and I didn't recognize the doctor. She said the physician is in Parma. I showed Beth the Butrans AE profile from the opioid experienced trial and asked her if anything stands out that she would not expect? She said no but noticed the incidence of constipation is low. I explained the transdermal patch and how it works. Gave Beth the Medicare D formulary grid for OxyContin and showed her how well it's covered. Beth said they don't have too many issues getting it approved.
PPLPMDL0020000001	Stow	OH	44224	7/24/2013	Sat with dr in his office and discussed Butrans and OxyContin. I asked dr which medicines his patients are on most often when he decides to initiate Butrans and oxycontin? Dr said he has used Butrans for just about every patient type and medicine. Dr said many of them are naive to opioids or on tramadol. I asked dr to continue prescribing Butrans and to not forget his uncontrolled vicoden patients as well and showed him the slide conversion guide. Dr said most of his OxyContin prescriptions come from 40mg of vicoden and Percocet. I told dr that that sounds perfect and to initiate OxyContin early on the 10mg when he can. Dr said ok. Reminded him of the Butrans formulary grid and focused on Medicare D coverage.
PPLPMDL0020000001	Akron	OH	44313	7/24/2013	Allowed back into office by Teresa. I asked dr what the downside is to initiating OxyContin for patients already on IR oxycodone? Dr said he will use OxyContin for those patients needing continued use of an opioid and agrees that oxycodone at q12 may be better for patients needing extended use of the product. I showed dr the conversion chart and asked him to prescribe more often and switch those patients. Gave dr the Scott profile and asked him to review again and to use Butrans.
PPLPMDL0020000001	Copley	OH	44321	7/24/2013	I showed dr the adverse events from the opioid experienced trial and asked him if there is anything about it that would prevent him from using it when he looks at e AE's? Dr looked and said no and he likes treat the incidence of constipation is low. I asked him if he believes it works? Dr said yes on some patients. I told dr to use it for patients like Scott. Dr said ok and walked away.
PPLPMDL0020000001	Fairlawn	OH	44333	7/24/2013	I made a drop-in visit to speak w/ D.O.N. Deborah Shafer and introduce myself and Purdue's Nurse Educator Program. I spoke w/ the receptionist, Dee who informed me that Deborah was in a meeting. I left my BC and will follow up w/ her tomorrow 7/25
PPLPMDL0020000001	Akron	OH	44302	7/24/2013	Told dr at window to use OxyContin earlier in treatment to make use of the 10mcg dose. Dr said he tries to use all doses but has lots of issues getting it approved before MS Contin or ER morphine. I asked dr which plans and he told me to speak to Ronda. Ronda was out for the week.
PPLPMDL0020000001	Fairlawn	OH	44333	7/24/2013	I made a drop-in visit to speak with Michelle Williams to schedule an in-service on Pain management. I spoke w/ Michelle and she apologized for not getting back w/ me and informed me that she has been extremely busy w/teaching an STNA class. She requested that I call her next Wednesday July 31st, to discuss and schedule another in-service on constipation and pain.
PPLPMDL0020000001	Cleveland	OH	44195	7/25/2013	Visited the Walker Bldg, Anes/Pain left Butrans Opiod naive study for fellow along with Butrans Savings card. Also left card and info for Michaela for upcoming display opportunity
PPLPMDL0020000001	Cleveland Hts University Hts	OH	44118	7/25/2013	Went over all 3 products(OxyContin,Butrans, Intermezzo with Rola, no new info gathered. Informed of Dr. Brienbach interest in Butrans, she said will monitor
PPLPMDL0020000001	Cleveland	OH	44118	7/25/2013	Went over OxyContin Q12h,he is a confident treater/believer in OxyContin when appropriate. Butrans for those Tramadol/LorTab failures, he has a female patient that loves the product, I asked for more trial, he said he will try to find additional patient that meet both ins. requirements and want the product. Intermezzo for MOTNA/dosing, he said he has a patient in mind
PPLPMDL0020000001	Cleveland	OH	44195	7/25/2013	Quick reminder on OxyContin Q12h dosing and flexible dosing strengths along with Butrans for those Tramadol failures
PPLPMDL0020000001	Euclid	OH	44117	7/25/2013	Dr Morley on vacation, back Mon. Met with OM Tracy. She says Dr Morley instructs the staff that only she should be interacting with reps, he does not have a nurse or assistant, after some hesitation, his receptionist did get Tracy to come up & talk with me. left Tracy my business card & asked her to call me with any questions, detailed her on Butrans, left patient tear sheets, detailed on OxyContin, recommended dosing q 12 h, steady state 24 to 36 hrs. Intermezzo detailed on all key points, prn, sublingual steady state gender dosing MOTN when patient has at least 4 hrs sleep left. Discussed importance of patient guides, left one pack Intermezzo guides. Left HCP re assess your insomnia patients piece for dr Morley. Let her know Facebook site, Intermezzo.com. Tracy wants to know if BWC will pay for Intermezzo, I told her I'm not sure, but will find out. (Dr Morley targeted as iPad vignette presentation from corporate.)
PPLPMDL0020000001	Cleveland	OH	44113	7/25/2013	Reminded of Intermezzo/MOTNA/Dosing, said he likes product, wish we had samples, Reminded of Trial savings cards. And told him I would check into Speaker opportunities. Butrans for those Tramadol/LorTab failures, said OK, booked lunch appt.
PPLPMDL0020000001	Euclid	OH	44132	7/25/2013	Introduced Butrans to dr, he says he may use, needs to think about, as he refers all chronic pain patients to dr e Mikhail and dr Dave Demangone. He allowed me to detail him, not a lot of excitement. CIII 1 x a week transdermal system did peak his interest. did 10 mcg hr patch demo. dosing slider, patient tear sheets, opioid naive& experienced patient selection. Next, OxyContin, , quick detail on indication, black box warning, dosing, asked him to review updates to section 9.2 of FPI, he had no interest. I knew it was time to move on to Intermezzo. Intermezzo, he can't remember who detailed him, but was detailed 1 x before on Intermezzo. Told him I've prepared a packet on Intermezzo for his review. Went over all core messages for Intermezzo, dosing, prn, peak plasma, highway study data, in lab data, outpatient data. Took packet back up to his office upstairs, did not grab OxyContin or Butrans pieces.
PPLPMDL0020000001	Euclid	OH	44132	7/25/2013	Detailed dr office mgr Nelda as well as all medical assistants. After presenting full Butrans detail, pain reduction scores in 12 week efficacy & safety studies. Needed to submit medical inquiry, which he signed on iPad. Wanted to know if like Fentanyl, you cannot successfully use Butrans on " thin" people or those with low BMI. I told him that's first time I've heard that question, but I will submit medical inquiry, which he said he'd like faxed back to him. After presentation, asked if he would ever use Butrans in his practice, he said it would be RARE. He refers to pain management ( Thomas group typically refers to dr e Mikhail or dr Dave Demangone) next presented OxyContin, updates to section 9.2 of FPI, no interest at all in writing OxyContin, presented quick detail, indication, warnings, q 12 h dosing, steady state, 7 doses. Intermezzo complete detail, covered data from outpatient study, back to sleep data from in lab poly somnography studies, highway drive study. One of the ma's said a male patient called in with MOTN,last week, & they weren't sure what to give him,. I said this would be good option for that patient. Dr Paul says he'll keep Intermezzo in mind for MOTN. they DO ACCEPT CARESOURCE. went over PA CARESource info for both Butrans & Intermezzo. Direct patients to Facebook or Intermezzo.com to print out savings. Dr Paul asked how long can patients take Intermezzo? He says he only writes insomnia agents for one to two weeks, that's it.
PPLPMDL0020000001	Garfield Heights	OH	44125	7/26/2013	Went over OxyContin Q12h and reformulation. Butrans- For those Tramadol failures before they start on the Short acting and Intermezzo for MOTNA/dosing. Went over savings cards for all three products. Asked for any key clinicians they thought I should focus on and they said the biggest practice is the Topalsky/Bogar group over at Maymount
PPLPMDL0020000001	Brooklyn	OH	44144	7/26/2013	OxyContin Q12h dosing/proven efficacy. Ben-RPH(filling in for vacation) said since reformulation that RX volume has gone down. Reminded that Butrans has the same abuse/misuse of any CIII opioid. Went over Butrans Patient info guide, asked if he would hand out to potential appropriate patients, said yes. Intermezzo For MOTNA/dosing, has not seen any RX's at this store or Southland
PPLPMDL0020000001	Brooklyn	OH	44144	7/26/2013	Quick reminder of OxyContin-Q12h dosing along with Butrans for those Tramadol failures along with Intermezzo for the MOTNA. Dr. said thank you and was running behind.
PPLPMDL0020000001	Brooklyn	OH	44144	7/26/2013	Brief reminder as Dr. was leaving for the day. Butrans for those Tramadol failures and OxyContin Q12h dosing, Dr. said no doubt OxyContin works, I asked if he would give Butrans a start, and he reiterated doesnt seem to have patients that complain about present prescribed therapies
PPLPMDL0020000001	Parma	OH	44129	7/29/2013	Introduced myself to office and dr at the window reminding her of appropriate patients for butrans and said I would like to get her thoughts on the opioid naive trial next time. Explained proper titration of OxyContin. Gave indication and limitation of use for intermezzo
PPLPMDL0020000001	Parma	OH	44129	7/29/2013	Introduced myself to dr and he said he has no problems with butrans. He said he just wrote a scrip for butrans. I asked what prompted him to think of butrans and he said the patient did not want surgery. I asked what was the patient taking before and he said his prescribing habits are individual and it depends on the patient. I showed the Scott profile and asked him to keep in mind appropriate patients like Scott, with uncontrolled pain currently. Reviewed dosing of oxycontin
PPLPMDL0020000001	Beachwood	OH	44122	7/29/2013	Spoke with rina about intermezzo dosing and administration. Reviewed OxyContin start principle. Shared butrans Scott profile and asked what she thinks most doctors would prescribe next and she said another short acting.



	North Hampton	OH	45349	7/29/2013	She needed dosing reminders again about butrans. I asked her why she is having difficulty remembering and she said she just gets confused. I asked what I can do to help her remember and she said to continue to come in.
PPLPMDL0020000001					Oxycontin formulary and intermezzo formulary grids
PPLPMDL0020000001	Parma	OH	44134	7/29/2013	Spoke with Erica the pharmacist and gave her the dosing guide for intermezzo. Reviewed proper care of butrans patch on skin as described in patient brochure. Discussed start principle for OxyContin.
PPLPMDL0020000001	Richmond Heights	OH	44143	7/29/2013	I placed a phone call to follow-up w/ Staff Development Coordinator, Sheila Harris to see if she has talked w/ the D.O.N. to get approval to partake and schedule an educational in-service. N/A I left a msg. on her voice-mail.
PPLPMDL0020000001	Cleveland	OH	44113	7/29/2013	Spoke with Justin on Butrans 7day transdermal delivery, along with ExactCare pharmacy opportunity with Aaron RPH. Obtained In-Patient Pharmacy Mike Hoying-Director Located on 1st floor
PPLPMDL0020000001	Cleveland	OH	44113	7/29/2013	Obtained Pharm. Dir. info. Mike Hoying-Dir. and Asst. Dir. Jeff Klopp. Left info and contact
	Cleveland	OH	44109	7/29/2013	Went to Anes. dept. met with Sue the residency program coordinator, left OxyContin and Butrans info. Went to Neurology dept. doesn't see reps. Left Butrans and OxyContin info. Went to PMR left lit. Huang, Greenwood, and Harris. Appt. set up thru Vanessa-Harris and Jodi and Huang.
PPLPMDL0020000001	Cleveland	OH	44122	7/29/2013	I rec'd a phone call from Francine Young in Staff Development, who informed me that she needs to cancel the in-service on Constipation scheduled for tomorrow 7/30 b/c state inspectors arrived today and will be there for the next 2 days. I confirmed the in-service scheduled for 8/6 @ 2pm on Constipation and 8/20 @ 2pm on pain for STNA's.
PPLPMDL0020000001	Cleveland	OH	44113	7/29/2013	Visited Pain/Anes ctr. met with Dr. Shen, Dale PA. discussed OxyContin/Butrans. Went to Ortho offices left OxyContin/Butrans info for Stulberg, Long, Joy and Bilfeld booked lunch appt. Also visited Rheumatology dept. left Butrans/OxyContin FPI and dosing/Titration guides.
PPLPMDL0020000001	Cleveland	OH	44102	7/29/2013	Quick discussion, office is closing at the end of the month. Dr. very unhappy, new location/practice to be determined
PPLPMDL0020000001	Cleveland	OH	44113	7/29/2013	Went over OxyContin reformation, dosing strengths and q12h. He is working more with Ortho on the 5th floor. Discussed Butrans and its place in hospital setting, Dale gave suggestion on e-voucher
PPLPMDL0020000001	Parma	OH	44134	7/29/2013	Spoke with pharm tech Julie and gave indication, limitation of use and doing information. Asked if Butrans patients were aware of the need to keep the patch out of direct exposure to heat and she said no. I reviewed the patient brochure for butrans. Reviewed the start principle for patients on OxyContin.
PPLPMDL0020000001	Cleveland	OH	44113	7/29/2013	Discussed reformation of OxyContin q12h dosing. Dr. Stated her overall decline in prescribing opioids, Went over Butrans, Tramadol failures, said she uses in her older patients.
PPLPMDL0020000001	Independence	OH	44131	7/30/2013	Spoke with Steve the ma who allowed me to introduce myself to doctor where I communicate the formulary changes for Butrans and reviewed the formulary grid. She said she only had a few patients on OxyContin. I gave Intermezzo indication and limitation of use and she said I could book an appointment to discuss further.
	Euclid	OH	44119	7/30/2013	lunch w practice, she came in late, gave only a few mts, says she's running over 1 hr behind. Quick detail on all 3 products. She wasn't very interested in OxyContin, left reformation piece, with FPI, asked her to review updated to section 9.2 (but willing to listen re Butrans and Intermezzo). Butrans CII option for chronic pain. She says SHE REFERS OUT TO PAIN MGT FOR CHRONIC PAIN. Left her packet of information on all 3 products. She says she will review. Intermezzo, pm, MOTN, appropriate patient selection, must have at least 4 hrs bedtime remaining.
PPLPMDL0020000001	East Cleveland	OH	44112	7/30/2013	Went over Butrans-with Latoya(RPH), discussed Tramadol failures along Initiation Titration. She agreed to distribute Butrans Patient info guides to appropriate patients. OxyContin flexible dosing/Q12h along with Intermezzo for MOTNA/dosing. Identified Dr. Bateanu, Brown, Nana and Brain NP as key prescribers in the building
PPLPMDL0020000001	Euclid	OH	44117	7/30/2013	Snack for office, Barbara says mostly girls on staff, like chocolate! Dr. Morley says most patients are referred to him for therapy from Dr. Moufawad. What his patients are taking for pain is dictated by what Dr. Moufawad places them on, and he typically doesn't change what Dr. M has put them on. He simply hasn't been using a lot of Butrans, because Moufawad does not. More patients on OxyContin. has no issues with OxyContin efficacy or coverage. Told him to keep Butrans in mind for new patients, patients who can't swallow oral pills or perhaps patients with Caregivers, who can apply patch for them, if patient cannot apply themselves. He will keep in mind. Left OxyContin reformation piece for him, and he will review piece along with updates to section 9.2 of FPI. Intermezzo, he likes product, tried to write recently and Ohio BWC WILL NOT PAY FOR. Since his entire patient base is BWC, he cannot write Intermezzo for any of his patients. (left one pack 12 patient guides)
PPLPMDL0020000001	Solon	OH	44139	7/30/2013	Met with Denny and Chuck to update them on current promotions and to discuss 2014 promotions. For Marc's, do a comparison of accounts for generic vs Colace use. They compare their prices to Walmart. On MULO, they look at Mass and multi-outlet. We will discuss with Marc's on Senokot To Go for regular shelf. We will try to get Slow-Mag in as nutritional bars do well in their stores. We set up another promotion. Denny said DDM may discontinue skus doing less than 50 units per month. We talked about setting up another promotion. Walgreens is their main competition.
PPLPMDL0020000001	Parma	OH	44129	7/30/2013	Asked dr what he would like to know about Butrans in order to feel comfortable prescribing for patients like Scott. Dr said he has not found the right patient and walked away. I mentioned flexible dosing while he was walking away and the Intermezzo indication.
PPLPMDL0020000001	Cleveland	OH	44195	7/30/2013	MSL email communication and phone call to Ms. Kreischer and Ms. Casanno regarding OTR3001 study and scheduling in-person meeting.
PPLPMDL0020000001	Cleveland	OH	44195	7/30/2013	Visited Rheum.dept. left Butrans/OxyContin info for Dr. Calabrese, Chatterjee, Mazanec and fellows/nurses. Met with Pharmacy Dept/ Sabrina S. in regards to E-voucher program to get better clarification on criteria of acceptance of product on CCF site
PPLPMDL0020000001	Euclid	OH	44119	7/30/2013	First lunch with practice. Dr Eckstein says she refers patients with chronic pain over to pain mgt. Did detail her still on Butrans, then OxyContin. She will review all information I left on OxyContin & Butrans, can't promise she'll use either product. Very interested when I transitioned to Intermezzo. Asked for samples. Told her I don't carry samples, but patients can go to Intermezzo.com or Intermezzo Facebook page & print out savings. We have 5-day free trial with script, \$45 each monthly copay thereafter. Left her Intermezzo HCP packet.
PPLPMDL0020000001	Cleveland	OH	44119	7/30/2013	I spoke w/ ADM., Nancy Sugarman and introduced myself and Purdue's Nurse Educator Program. She informed me that they use Hospice of Western Reserve for pain in-services. I shared w/ her the unbranded/branded topics. A meeting date was scheduled for August 6th @ 10:00 w/ Nancy and the D.O.N., to discuss the program further
PPLPMDL0020000001	Parma	OH	44129	7/30/2013	Spoke with Jaylene and asked if the dr was using the butrans vouchers I left last time and she said she has been reminding him. Dr walked up and I reminded him that he has to provide patients taking butrans with vouchers so they can get 50 off their copay after they come out of pocket 15. I left the Scott profile and asked him consider patients like Scott for Butrans. Reminded him of flexible dosing of OxyContin and stated intermezzo indication
PPLPMDL0020000001	Euclid	OH	44119	7/30/2013	Met with his medical assistant Mary at lunch. All 3 products detailed. Dr. Lin does NOT eat lunch, but sometimes comes back. He did not come back today. After everyone back to lunch, was able to visit his office, he was not very engaged. Running way behind he says. told him I was hoping to go over clinical data for Butrans, our CII pain patch for chronic pain. I will leave info. I'm also leaving you doctor, information on OxyContin reformation, and would like you to review updates to section 9.2 of OxyContin FPI. Finally, leaving information regarding Intermezzo, a sublingual tablet for MOTN insomnia. Left complete HCP packet for Intermezzo.
PPLPMDL0020000001	Beachwood	OH	44122	7/30/2013	I placed a phone call to Nurse Educator, Cheryl Grim to schedule an appt. to introduce Purdue's NE program. N/A I left a msg on her voice-mail.
PPLPMDL0020000001	Independence	OH	44131	7/30/2013	Told dr I was interested in knowing how his butrans patients were doing and he said he did not have many so I asked him to review the Scott profile that looks at patients not controlled on tramadol. I asked him to think if butrans for patients like Scott. I told I will be back with senakot for his patients with opioid induced constipation. Reminded him of OxyContin 15 and 30. Told him I was leaving intermezzo information for motna
PPLPMDL0020000001	Euclid	OH	44119	7/30/2013	Lunch with Judy today. She stated she would use Butrans for back pain or acute pain. I told her Butrans not indicated for acute pain, but rather, is indicated for moderate to severe chronic pain. Our 2 studies included patients with chronic low back pain. Left her both studies. Went over pain reduction scores, opioid naive. Went over appropriate positioning of Butrans, as either first opioid, or for patients taking 3 to 4 ir opioids daily, and pain still not controlled. Left her dosing slider. Left her one pack savings cards, which she requested. Steady state and supplemental analgesia discussed. OxyContin, please review reformation piece, and updates to section 9.2 of FPI. q 12 h dosing, 7 doses available. Intermezzo, she had a lot of questions, very interested. Full detail, left HCP packet, dosing flashcard, one pack patient guides. Went over all data from studies. Told her direct patients to Intermezzo.com for further info and to print savings.
PPLPMDL0020000001	Valley View	OH	44125	7/30/2013	Spoke with Aaron RPH-VP of Pharm operations discussed OxyContin Q12h/dosing along with Butrans 7day transdermal, position for Tramadol failures.
PPLPMDL0020000001	Euclid	OH	44119	7/30/2013	Dr Katz not supposed to be in today, was there doing paperwork. Was able to detail her (didn't each lunch, as Kosher required). she remembers being detailed on Butrans downtown by Amy. Discussed reduction in pain scores opioid experienced trial. Core Butrans messages, steady state, supplemental analgesia, 3 doses, proper application. She wanted me to leave savings cards, (left 1 pack). OxyContin, dr katz please review this reformation piece, which includes OxyContin FPI, and updates to section 9.2. OxyContin is q 12 h dosing, steady state 24 to 36 hours, 7 doses to titrate up or down. Intermezzo, PRN, MOTN indication, peak plasma, time back to sleep for men & women, highway drive study: patients much have at least 4 hrs bedtime remaining after taking intermezzo, gender dosing (flashcard left), FPI left. Trial, savings, Caresource PA.
PPLPMDL0020000001	Euclid	OH	44119	7/30/2013	Met with pharmacist Kathleen P, asked her to review new OxyContin guide for pharmacists, and updates to section 9.2 of OxyContin FPI. she thinks the reformation is great idea. We Reviewed ready state, 7 doses to titrate up or down, she noted that she has about 3 bottles of 15 mg that will expire soon. HCPs just don't write ht dose. Butrans, no changes in utilization since my last visit. Reviewed indication, dosing. Intermezzo, no changes in utilization since last visit. Facebook or Intermezzo.com for Customer patient education & savings cards available to print out.
PPLPMDL0020000001	Beachwood	OH	44122	7/30/2013	Placed a phone call and spoke w/ D.O.N., Susan LoDolce. I introduced myself and Purdue's Nurse Educator Program. I was interrupted by Susan who informed me that today is her last day working there. She asked me to call back next week and speak w/ the interim D.O.N., Michelle.
PPLPMDL0020000001	Cleveland	OH	44112	7/30/2013	Briefly discussed Butrans with Lisa- 7day transdermal, Tramadol failures, she requested Savings card. Left card with Dr. asked if I could get appt, she will try, also said to email a request
PPLPMDL0020000001	Cleveland	OH	44195	7/30/2013	Talked with Brian(Rph-mgr) went over OxyContin,Q12h, flexible dosing and Savings Card, Butrans- 7Day transdermal, Tramadol failures, and Ins/Savings card, has 2 patients filling Butrans RX's , Intermezzo for MOTNA/dosing review, requested Trial/Savings Card
PPLPMDL0020000001	Parma	OH	44129	7/30/2013	Gave pain assessment questions. Discussed patients taking butrans and how the heat can effect the patch. Asked what the butrans patient looks like and she said that she likes butrans with Vicodin for breakthrough and she reduces the Vicodin. Still not interested in writing OxyContin. She likes butrans for patients having pain in the night. Gave Intermezzo indication and limitation of use. Asked her to mark calendar of August 21 program. She will be on vacation next week
PPLPMDL0020000001	Parma	OH	44134	7/30/2013	Reminded dr that last time we spoke he said he was moving away from workscorp and I asked if that has impacted patients ability to get Butrans. He confirmed he had given out several vouchers and he quoted the voucher and savings card value. I reviewed the formulary grid with him to let him know his patients should still be able to get butrans. I reminded him of OxyContin q12h dosing. I asked if he had patients with motna and then discussed indication and limitation of use of Intermezzo
PPLPMDL0020000001	Mayfield Heights	OH	44124	7/30/2013	I placed a phone call to speak w/ Staff Development Coord., MaryAnne. I spoke w/receptionist, Theresa who informed me that MaryAnne was in a meeting. No voice mail is available.
PPLPMDL0020000001	East Cleveland	OH	44112	7/30/2013	Intro. Went over Butrans with Brian(NP) discussed 7day transdermal delivery system , Tramadol failures, left Scott profile along with Savings Card per his and Lisa request. OxyContin Q12h dosing, flexible dosing strengths, Said he doesn't prescribe any CII's
PPLPMDL0020000001	Euclid	OH	44119	7/30/2013	met with dr medical assistant, who's also his OM. Kim Moore-Hobbs. Left reformation mktg piece for dr. winner. Reviewed OxyContin core messages, START principles, steady state 24 to 36 hrs, dosing, updated Medicare Part D coverage/grid. Explained to Kim How savings card works. Left one pack \$90 cards. Kim, please call me should you need anything else. Let me know how I can be a resource to your practice.
PPLPMDL0020000001	Cleveland	OH	44106	7/31/2013	Asked Marge where most of the OxyContin is prescribed, she said Seidman(Oncology/Palliative care) Silverman, Weinstein, Butrans for those Tramadol failures, she still hasn't seen any
PPLPMDL0020000001	Oakwood Village	OH	44146	7/31/2013	I arrived at 7:15 for a 7:30 in-service on "Key Terms in Pain Management" Upon arrival the D.O.N., Barb Straemple was not in yet. I was directed to the education room by the MDS nurse, who announced the in-service. After waiting 20 minutes and no attendance, I decided to see if the D.O.N. came in yet. I was approached by one of the ADON's Lynette, who said she just got off the phone w/ the D.O.N., Barb Straemple and she extended her apologies. She forgot to post the in-service and also cancelled the 10:30 & 2:30 in-services that were scheduled for later today. Lynette said, "Barb will call you to reschedule."*** I called to confirm the in-services on 7/29 and left a msg. on the D.O.N.'s voice-mail, which she apparently did not receive.
PPLPMDL0020000001	Cleveland	OH	44106	7/31/2013	MSL email communication with PI about recent OTR pre-screening activity and to follow up on request to meet with pediatric pain team. Dr. speicher plans to follow up with colleagues on the pain team regarding meeting



PPLPMDL0020000001	Cleveland	OH	44106	7/31/2013	Visited Seidman Cancer center Left OxyContin info for Silverman and Weinstein, Left card and Requested appt. Visited Pain/Anes. dept. left Butrans info for fellows, Sehgal and Hayek
PPLPMDL0020000001	Cleveland	OH	44106	7/31/2013	Dr. said he has a few patients on Butrans and doing well, went over Initiation and Titration, He likes delivery system. OxyContin flexible Q12h dosing along with Titration.
PPLPMDL0020000001	Cleveland	OH	44103	7/31/2013	Went over OxyContin Q12h, Savings Card for Butrans and Intermezzo. Hasnt seen any Butrans or Intermezzo, doesnt fill many Commercial ins. scripts
PPLPMDL0020000001	Cleveland	OH	44113	7/31/2013	Reminded of OxyContin flexible dosing Q12h and 7 tablet strengths, Dr. said he likes and is confident prescriber. Also Butrans for those Tramadol failures. Booked breakfast for next week
PPLPMDL0020000001	Cleveland	OH	44103	7/31/2013	Went over OxyContin reformulation, Bell Nurse said medical Dir. is really putting alot of pressure on clinicians to stop prescribing any Narcotics. Discussed Butrans for Tramadol/Ultram failures and Intermezzo for MOTNA/dosing along with Savings/Trial Cards
PPLPMDL0020000001	Bedford	OH	44146	7/31/2013	I made a drop-in visit to speak w/ the head of education. The receptionist was not in yet, but I spoke w/ another office employee. She informed me that the D.O.N. is Jackie Conner, but education is handled through Saber Healthcare's corporate office. I have tried on numerous occasions to contact, Wanda Shaeffer, the head of education at Saber Healthcare and have been unsuccessful.
PPLPMDL0020000001	Cleveland	OH	44115	8/1/2013	Visited with George, suggested Ortho. as a target for OxyContin appropriate prescribers, none from Nickels(pain Mgmt) He reiterated they dont fill from patients outside of hospital, Reminded of Butrans for those LorTab failures. Also not aware of any IM key prescribers
PPLPMDL0020000001	Stow	OH	44224	8/1/2013	Spoke to the pharmacist about all products. Explained Butrans and discussed key messages and patient types. Reviewed formulary insurance and asked him if he fills it? Raymond told me that he does but not much since summit pain added their own pharmacy. He used to see 2-4 a week from them but now only occasionally. Raymond said he has the 10and 20mcg in stock. I asked him if he will order the 5mcg dose and he said he might. Raymond said its tough for them because of summit pain pharmacy and not many people know they are in the medical building. I explained OxyContin dosing and conversions and asked him about intermezzo fills. He said he has not dispensed it and I explained the dosing card.
PPLPMDL0020000001	Cleveland	OH	44195	8/1/2013	MSL email communication with Ms. Kreischer, she will be taking another position and will not be supporting OTR or BUP after August 23. The replacement coordinator has yet to be assigned. PRA was also notified of this
PPLPMDL0020000001	Parma	OH	44134	8/1/2013	Spoke with Jason about proper use of butrans including site rotation. reviewed the start principles of oxycontin. reviewed dosing of intermezzo. asked jason what doctors use as supplemental analgesia and explained why they may want to use supplemental analgesia.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	8/1/2013	I asked dr where and when is she using OxyContin? Dr told me for when her patients need relief from severe pain either from a surgery or chronic pain. I asked if she has patients on IR oxycodone that she would switch to ER oxycodone? Dr said she does that when she knows the patient will need constant relief. Showed her the conversions and dosing and asked her to write it more. Nothing else learned
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/1/2013	I showed dr the start principles again for OxyContin and asked him how he feels anti adjusting the dose down in certain situations? Dr said he has and will try to keep that in mind as needed. I showed dr the conversions from Percocet to OxyContin and asked him if he will switch patients? Dr said he will because he would rather have more of his patients on ER opioids. I handed him the conversion guide and asked him to reference it when he is switching. Quick reminder of Butrans and its ability to be used in many different patients from NSAIDs to vicoden.
PPLPMDL0020000001	Stow	OH	44224	8/1/2013	Dr has a meeting and only had a coupe of minutes so I asked him to prescribe Butrans and asked him if he had any clinical experience yet? Dr said he has not used it and may not have the ability because he is doing mostly procedures. I told him that many Butrans can be used after he prescribes IR opioids following a procedure and it doesn't provide enough and the patient remains in chronic pain. Dr said that that is a good idea and he can see how that makes sense. I reviewed formulary and asked for business.
PPLPMDL0020000001	Parma	OH	44129	8/1/2013	Spoke with Jennifer about proper application of butrans patch and value of vouchers. asked about relay health and she was not aware of how the process worked but did note that usually evouchers are taken off the price without her doing anything. discussed start principle for oxycontin. discussed intermezzo dosing and administration.
PPLPMDL0020000001	Independence	OH	44131	8/1/2013	Dr remembered me from intermezzo and said he is writing and i said good i want to talk to him about his vicodin patients whose pain is not controlled and they need a change. he said he refers them to pain management. I asked dr what is keeping him from writing butrans and he said when he thinks of patches he thinks of duragesic. he then said he know butrans was schedule III. he said it is difficult for him to change his way of thinking.
PPLPMDL0020000001	Stow	OH	44224	8/1/2013	Spoke to Greg the pharmacist about Butrans and asked him how much he is seeing? Greg said a little more lately and said i must be getting through to them. Greg said he is filling a lot of 5 mcg patches and has plenty of vouchers and copy cards. I discussed the new managed care coverages and discussed Caresource and BWC as well as Med D plans. Greg said he is glad to know about Caresource because he sees a lot as well as BWC. Greg said the patients really seem to like it.
PPLPMDL0020000001	Independence	OH	44131	8/1/2013	dr said he does not write oxycontin anymore. told dr there is butrans to write and after low low dose vicodin. told dr that he can also use after nsaid or tramadol. asked dr how he treats the patients that are still on pain meds in his practice. he said he still treats them. discussed the managed care environment for butrans.
PPLPMDL0020000001	Stow	OH	44224	8/1/2013	Quick call during lunch. I asked her to take a second the next time she is in an exam room with a patient on IR opioids around the clock and is telling you they want more because they are still in pain and ask yourself if they are appropriate for Butrans? I reviewed all patient profiles and asked her to tell me the correct starting dose? Sandra answered them all correctly based on the profile information but said that with Nancy on vicoden she may initiate her on 5 mcg because of her age. I told her that is probably acceptable and told her to titrate as necessary to 20mcg if he necessary. I asked her to continue prescribing and reviewed insurance coverage. Gave her the intermezzo dosing guide and asked for her to gain clinical experience with it.
PPLPMDL0020000001	Stow	OH	44224	8/1/2013	Abby told me she used Butrans recently with good results. I asked her to tell me about it and she said that the patient was on 30mg of vicoden and didn't want to be on pills. Abby said that patient had good insurance and thought that most patients need to fail ER morphine or MS Contin prior to getting Butrans approved. I told her that is just not true. I told her about the insurance coverage and asked her many plans do not dictate a SE or PA. Abby said that she is really glad to know that and will use it more now. Abby said that the patient is doing really well on Butrans and is happy with decreased pain. I showed Abby the patient profiles and asked her to give me the correct starting doses which she knew. I told Abby to continue prescribing and to also remember intermezzo patient types and indication with dosing.
PPLPMDL0020000001	Cleveland	OH	44113	8/1/2013	Reminded of Aug 21st confirmed program with Dr. Moufawad. Butrans for those Tramadol/LorTab failures, she said that she is prescribing more often, and patients seem to like it" Intermezzo for MOTNA and dosing reminder
PPLPMDL0020000001	Cleveland	OH	44115	8/1/2013	Confirmed Aug 21st program with Dr. Moufawad. Said he is looking forward to attending. St. V's location is getting busier. asked if he has prescribed any Butrans here, not yet, doing alot of blocks at this office. Reminded that Butrans is for those Tramadol/LorTab failures, he agreed. Intermezzo for MOTNA
PPLPMDL0020000001	Cleveland	OH	44115	8/1/2013	Visited Pain Center, talked Dr. Nickels, discussed Butrans for those LorTab failures. Stopped in pharmacy asked George RPH, other depts i should be targeting, he suggested Ortho. most OxyContin RX's come from that group. Left OxyContin info with Ortho. Stanley,Perse, also card for appt.
PPLPMDL0020000001	Cleveland	OH	44115	8/1/2013	Visited pharmacy, quick discussion with Dave B Pharm.Dir. He agreed with George that most OxyContin within Institution is coming from Ortho. Butrans is positioned for those outpatient patients that have failed on Tramadol
PPLPMDL0020000001	Cleveland	OH	44113	8/1/2013	Confirmed with Deb Aug 21st program, with Dr. Moufawad, asked her to remind Elaine. She had a new Butrans start this morning, asked if it was a LorTab failure, she said not necessarily but a patient that was needing more pain control along the clock. Intermezzo reminder for MOTNA along with trial card utilization
PPLPMDL0020000001	Stow	OH	44224	8/1/2013	I asked dr what triggers he looks for when prescribing an ER opioid? Dr said that first of all he is trying to get as many of his patients on ER opioids sooner to they have more consistent control of their pain. Dr said that most of the time he assesses the patients pain level, gait, functional mobility and if he feels their pain is legitimate. Dr said once that happens he mostly finds a medicine he believes will provide ER control like Butrans, Opana ER,duragesic. Dr said that most of the time his decisions have to be made on cost. Dr said he doesn't have much trouble with Butrans. I asked him if he is typically the first one prescribing pain medicine? Dr said no and that 95% of the patients that see him are already on opioids. I told dr that he needs to streamline Butrans and use it early for ideal patient types. I reviewed all patient types and asked him where he would use it most? Dr said vicoden and tramadol. I asked dr to continue prescribing Butrans and reviewed insurance coverage. I asked dr to also identify patients for intermezzo and gave him a dosing card.
PPLPMDL0020000001	Garfield Hts	OH	44125	8/2/2013	Went over all 3 products. OxyContin- Q12h/flexible dosing , Butrans-only 7 day transdermal, Tramadol failures and intermezzo for MOTNA/dosing. Trial/Savings cards
PPLPMDL0020000001	Cleveland	OH	44130	8/2/2013	Quick call and introduction. Dr said he tried a few patients on butrans with mixed success. dr said he does not like to write opioids. Got office hours and booked lunch
PPLPMDL0020000001	Brooklyn	OH	44144	8/2/2013	Quick reminder on Butrans 7day transdermal delivery system and savings card for those commercially covered. Dr. said he will remember.
PPLPMDL0020000001	Uniontown	OH	44685	8/2/2013	Gave dr at window the OxyContin conversion guide and reviewed the start principles. I asked dr what his thoughts are and he told me he does follow them for the most part. Dr said not all his patients will need to reduce their dose but agrees how they need to be evaluated each time they come back.m I reviewed the Tom profile and asked him to continue prescribing. I also handed him the Scott profile and asked him to take those ultram patients in pain around the clock and put them on Butrans. Dr agreed and thanked me. Left him with the intermezzo patient profile piece.
PPLPMDL0020000001	Uniontown	OH	44685	8/2/2013	I asked dr how he is presenting the option of Butrans to his patients lately? Dr said he really tries to keep it simple and just tell them that they need more extended release pain medicine because the short acting isn't working. Dr said he tells the, that it a patch that they wear for 7 days and how's them the sites. I asked if he patients have boked at the idea? Dr said not really because he has found that patients are happy. I asked if he is handing out copy cards? Dr said one patient used it but the others were Medicare. Dr said he has not heard back from the patients to he assumes all is good. Gave dr the Scott profile and asked him to continue prescribing.
PPLPMDL0020000001	Garfield Hts	OH	44125	8/2/2013	Reminded of Butrans for those Ultram failures and before they start on the short acting opioids. Said he has 1 patient on Butrans and doing good so far. OxyContin Q12H dosing and intermezzo for MOTNA and dosing reminder
PPLPMDL0020000001	Middleburg Heights	OH	44130	8/2/2013	Dr said he does a lot of nursing homes and patients are using oxycontin. I asked about the patients in his practice and he said he does not like to use much OxyContin and he refers out to pain management. I asked does he refer out for Percocet and he said no. I showed the titration guide and pointed out the 5 mg Percocet equivalent to 2 10mg OxyContin. He said he knows but he does not like to write OxyContin. I asked why and he said the name. I asked if he believed it worked and he said yes but he has to be careful. I asked if they had Orns and he said no. Asked dr his thought on butrans and he said he refers out to pain management and he compared butrans to duragesic. I told him the products can not be compared. I discussed the patient Scott and the opioid naive study and asked where he would position butrans now. He said he understood. I asked him to remember burtrons after tramadol or low dose Vicodin or Percocet. I told him i will remind him of is again. Quick intermezzo indication and limitation of use discussion<font color=blue>-<b>CHUDAKOB added notes on 08/11/2013</font>-<font>Marcia. It looks like you created some good constructive tension here. Perhaps you got the Dr. to think a little. Nice work!
PPLPMDL0020000001	Akron	OH	44319	8/2/2013	I asked Sara the pharmacist about wether she has had any questions from patients about Butrans or intermezzo? Sara said she has not but maybe one of the other pharmacists has. I explained the Butrans dosing and how to approximate start dosing, and patient profiles. Gave her the conversion and titration guide for OxyContin and dosing structure. Discussed intermezzo indication, dosing and limitations of use.
PPLPMDL0020000001	Akron	OH	44319	8/2/2013	Spoke with Vicki the pharmacist about all three products. Discussed Butrans dosing, titration, Scott and nancy profiles and appropriate starting dosing based on IR daily dose. I asked her if she is seeing more Butrans? She said they are and most are from pain management. Discussed new formulary updates and she was impressed with Medco Medicare D coverage. Explained the OxyContin and conversion guide and conversions from IR oxycodone and Percocet. Vicki said she sees lots of TID dosing and said they are not approving them anymore. Vicki said that she recommends to them that they need to dose if q12 . Explained the intermezzo dosing and indication as well as limitations of use.
PPLPMDL0020000001	Brooklyn	OH	44144	8/2/2013	Another reminder of OxyContin flexible dosing strengths along with Q12h. Butrans for those Tramadol failures and Intermezzo 5 day trial offers along with savings card
PPLPMDL0020000001	Cleveland	OH	44130	8/2/2013	Asked dr what dose he usually starts with and he said 20 or 40. I reminded him that he has patients that have been on low dose Percocet for several months and would he consider OxyContin for them he nodded. I mention proper patient for Butrans and he said yes. I gave him indication and limitation of use for intermezzo.

	Akron	OH	44320	8/2/2013	Spoke with dr about using OxyContin for her patients on Percocet around the clock. Dr said there are too many problems getting patients to take less pills and change their routine. I asked dr if she believes ALL her patients fit that outlook? Dr said no not all but most. I told dr she needs to sell to her patients another form of therapy that may be more appropriate. Dr agreed and said she will try. Gave her the OxyContin conversion guide and told her to review it. I asked her to start more patients on Butrans who are on tramadol or vicoden around the clock. I gave dr the intermezzo patient profile guide and asked her to continue trying to identify.<font color=blue><b>CHUDAKOB's query on 08/11/2013</b></font>-Cliff, you may want to clarify with her that we are asking her to move patients who are NOT well controlled. We are not asking her to change the routine of her patients that are well controlled. This may be a case where thinks you are asking for ALL her patients, even if you are not.<font color=green><b>REICHCL's response on 08/12/2013</b></font>I agree, kinda. I typically tell customers to move patients who are appropriate for the q12h oxycodone. With Customer Duppsstadt, things are different. If I ask her to move patients who are uncontrolled on Percocet, it opens a discussion I would rather not get involved in, a vicious circle.<font color=blue><b>CHUDAKOB added notes on 08/13/2013</b></font>I agree kinda. Perhaps phrasing it different will help.
PPLPMDL0020000001	Cleveland	OH	44125	8/2/2013	Talked with Matt RPH, discussed OxyContin Q12h dosing and the reformulation to make less misuse and abuse. Butrans for those Tramadol failures and Intermezzo MOTNA/dosing. Overall he said they dont dispense a whole lot of Pain Meds but does see a ton of generic ambien
PPLPMDL0020000001	Uniontown	OH	44685	8/2/2013	Spoke to Amanda the pharmacy technician about products. Pharmacist was too busy. Explained all three product key selling messages and asked if he sees Butrans and OxyContin prescriptions coming in and who they are from? Amanda said that they see Butrans and OxyContin from Fouad and Lababidi and Jones. Discussed formulary for products and made sure they doses are stocked which they were.
PPLPMDL0020000001	Cleveland	OH	44130	8/2/2013	Quick introduction call. Reminded of flexible dosing for OxyContin. Shared Maria profile for butrans. Gave indication and limitation of use for intermezzo
PPLPMDL0020000001	Akron	OH	44305	8/2/2013	Good discussion on OxyContin and Butrans. I discussed in detail the OxyContin start principles and asked him about his thoughts. Dr said that about 1 in 10 patients he will need to reduce the dose of OxyContin. I asked dr what triggers he uses to determine the need for an ER opioid? Dr said he uses pain scales but relies mostly on his discussion with the patient to assess their functional mobility and pain level. Dr said he really likes OxyContin and has good results. I showed dr the conversion scales and asked him to switch his patients on Percocet and IR oxycodone to OxyContin for q12h dosing. Dr agreed. I asked dr if he believes there is a place for Butrans in his practice? Dr said maybe. I asked dr to think of OxyContin for severe pain and Butrans for more moderate pain. Followed that up with indications for each product. I told dr that a patients like Scott and nancy are candidates for Butrans because they are a little earlier on in their pain treatment. Dr took the nancy profile and studied and dosing and conversions then asked me to review dosing and steady state with him. Finished with formulary and asked for business. Dr said he will try it.
PPLPMDL0020000001	Garfield Hts	OH	44125	8/5/2013	Spoke with Ed,filling in, said OxyContin prescribers include pain group(Abraham, Samuel, some Ortho at Surgery center) Butrans for those Tramadol failures, and Intermezzo for MOTNA/dosing. Alot of generic ambien
PPLPMDL0020000001	Akron	OH	44333	8/5/2013	Quick call I between procedures. Told dr to continue identifying the right patients for Butrans and gave him review of Scott and nancy. Dr said he needed more oxycotin copy cards and said he has found it easy to switch patients from Percocet to OxyContin. I told him to continue to do the same and reminded of managed care with Medicare D. Intermezzo review of patient types. Dr said he is continuing to talk about intermezzo with his Left Info/Cards requested-General Surgeons/Ortho(Lopresti, Levine,O'brien Gemma,Forcier, Elkhari Pantec, Peralta-CCF(Lichenberger,Rapuri,Sergento,Nowak, Love, Hauer=Kaiser surgeons) Left cards and info for Nursing Staff/Clinicians
PPLPMDL0020000001	Garfield Hts	OH	44125	8/5/2013	I received a phone call from Maria Faraci, who was calling for Joan Southard, confirming the in-service on pain documentation for 8/13 @ 2:30
PPLPMDL0020000001	Richmond Heights	OH	44143	8/5/2013	I asked Donna the pharmacist if she has begun seeing more Butrans? Donna said they have a handful of patients on it and all say they are doing well. I told Donna about the dosing and titration as well as supplemental analgesia. I reviewed the formulary coverage for Butrans and Medicare D for OxyContin. Showed Donna the conversion and titration guide and asked her if she is moving the 10mg? Donna said they are filling the 10, 20 and 40 mg the most. Discussed intermezzo indication and asked if she has dispensed any? Donna said she has not but the other pharmacists may have.
PPLPMDL0020000001	Fairlawn	OH	44333	8/5/2013	Spoke with Jessica the pharmacist about the new piece on OxyContin reformulation clinical studies. Jessica said she was glad to get it and that she will review it. I asked her about her OxyContin and Butrans prescriptions and who is writing? Jessica said she sees many patient in for OxyContin refills and that she has been getting a to of refills. I asked about doses she sees the most and she said surprisingly the 10mg is frequent along with 20 and 30mg. Hjessica said she sees lots of prescriptions from pain management in Fairlawn and Cuyahoga falls for OxyContin and Butrans. Explained Butrans patient types and appropriate dosing and titration. Reviewed the intermezzo indication and patient types.
PPLPMDL0020000001	Stow	OH	44224	8/5/2013	Dr told me that he has had good success recently with Butrans. I asked him to tell me about it and he said that he started it for a patient that was taking vicoden and wanted more. Dr said the patient came in for a follow up and was raving about how well it was working. I asked for continued use and discussed all three patient profiles and asked dr based on the doses of the profiled patients which dose he should initiate? Dr knew all correct dosing. Explained steady state, titration and use of supplemental analgesia. Discussed the new OxyContin piece about abuse deterrent studies. I asked asked dr for continued use when patients are appropriate for q12h dosing. Discussed copy cards for OxyContin and Butrans. Intermezzo indication, patient profiles and limitations of use.
PPLPMDL0020000001	Hudson	OH	44236	8/5/2013	Good discussion surrounding appropriate candidates for Butrans. I presented all the case studies and quizzed him on starting doses based on daily doses of the patients current IR therapy. Dr knows where to initiate and said he has also had good success along with dr Russ with Butrans. I asked him where and why he used it. Dr said he uses it when he knows he is treating a chronic condition and the short acting isn't cutting it. Dr said he tells the patients they need a more controlled release medcine instead of taking pills all day. Dr said Butrans gets rarest reviews from the patients on it. I asked dr to use it more often. Discussed the new OxyContin piece on abuse deterrent studies. Dr read it over and liked what he saw and will review it. Dr said he doesn't really use OxyContin unless the patient is failing Percocet or asks for something more long acting. I showed dr the conversion guide and showed him the conversions and titration every 1-3 days. Intermezzo dosing and indication.
PPLPMDL0020000001	Akron	OH	44333	8/5/2013	Quick hello at window and told dr that he can initiate Butrans for any patient on tramadol or vicoden who needs a dose adjustment. I told dr to titrate to 20mcg if the patient needs additional efficacy. I handed him the new OxyContin abuse deterrent studies and told him to review after we discussed it a month ago. Dr said ok. Nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44127	8/5/2013	Reminded of Butrans for those Ultram/Tramadol failures, showed Scott profile. Dr. agreed. Intermezzo for MOTNA/dosing, reminded of Trial/Savings
PPLPMDL0020000001	Cleveland	OH	44125	8/5/2013	Went over OxyContin Q12h dosing, flexible dosing strengths and savings cards. Butrans for those Tramadol failures, before they start on short acting around the clock
PPLPMDL0020000001	Akron	OH	44313	8/5/2013	Quick hello at window and gave him the OxyContin and Butrans conversion guides. I told dr that he needs to be switching up his Percocet patients to OxyContin q12h and Butrans for his NSAID, tramadol and vicoden patients. Gave him OxyContin managed care cards. Dr said he knows he needs to start making some changes for his patients.
PPLPMDL0020000001	Mayfield Heights	OH	44124	8/5/2013	Made a drop-in visit to speak w/ Staff Development Coord., MaryAnne. Spoke w/receptionist, Theresa who said, " MaryAnne is here, but she is not available." I left Purdue educational offerings and my BC
PPLPMDL0020000001	Hudson	OH	44236	8/5/2013	Discussed with dr where he is using OxyContin and if it makes sense to him to have patients on Percocet to be on q12h oxycodone? Dr said he would rather have more of his patients on ER products but finds it difficult because his patients want IR opioids. I told dr that he should be explaining to his patients the differences between what they are taking and OxyContin. I reviewed the start principles and he said he agreed but does not adjust the dose down often. I asked for more business. I asked dr if he is going to prescribe Butrans and what's holding him up? Dr said he considers it but just hasn't written it. I told dr to pull the trigger and asked what the real reason is he hasn't prescribed? Dr pa said because he doesn't want to take the time to explain the product. I showed dr the patient information guide and told him to briefly explain the product then hand them the information guide and tell them to read it. That's it! Dr agreed and said he should be writing it because the short citing isn't good for most people for a long period of time. Explained profiles and asked him to prescribe. Intermezzo dosing and profile discussion and asked him to get some out to his patients who meet the indication.
PPLPMDL0020000001	Cleveland	OH	44113	8/6/2013	OxyContin Q12h dosing, Butrans for those tramadol failures and Intermezzo for MOTNA, Justin continues to be a resource
PPLPMDL0020000001	Cleveland	OH	44113	8/6/2013	Discussed OxyContin reformulation and its misuse/abuse properties, Dr. agreed and continues to prescribe less overall Opiods. Went over Butrans for those Tramadol failures, and reviewed dosing/titration, Asked for a new start, he continues to seek appropriate patients, struggles with PA, 75% of practice is managed medicalidntermezzo for MOTNA/dosing
PPLPMDL0020000001	Akron	OH	44310	8/6/2013	Spoke with Char with Phil Cremer about Butrans and OxyContin. I asked char about where the patients are coming from that they treat? Char said most come from within their own organization North Star Orthopedics. Discussed how their own existing patients can fit right well go Butrans. I asked which short acting medicines they see their patients on most and she said vicoden and Percocet. I asked if she sees patients on NSAIDs or tramadol? Char said yes but not as much as the others. I showed her the Butrans profiles and asked her opinion on correct starting doses. I told char that dr Cremer knows Butrans is right up his alley but he just needs to make it happen by identifying the appropriate patient types. Discussed using OxyContin for the Percocet patients instead of referring them to another pain management practice. Char said that dr Cremer does not feel comfortable prescribing OxyContin due to the area they are in an the abuse it may bring. Explained conversions form Percocet 20mg. I left char with patient profiles for drs review
PPLPMDL0020000001	Cleveland	OH	44129	8/6/2013	Spoke with Marko about Butrans proper application. Discussed OxyContin start principle. Shared intermezzo dosing and administration. Discussed relay health and vouchers. Discussed h managed care environment
PPLPMDL0020000001	Akron	OH	44320	8/6/2013	Led with partial insight for managed care and told dr that based on the us census bureau the approximate number of baby boomers will be turning 65 in the next 17 years and getting MedicareD coverage. I asked dr how she will adjust for that? Dr didn't know what to say so I told her that Purdue will be working very hard to ensure appropriate levels of Medicare D will have coverage.I discussed with her about the Butrans PA's she has been able to get pushed through and discussed Caresource coverage as well as BWC. Reviewed all three Butrans patient profiles and reviewed appropriate starting doses. I asked dr to take the time necessary to ensure the patient is on the right medicine and to use more Butrans. Asked dr to use the patient information guide to aid her in the patients knowledge of the product. I asked dr to use OxyContin for her Percocet patients
PPLPMDL0020000001	Akron	OH	44333	8/6/2013	I sent an e-mail to Ramona Watson requesting that she confirm that she recv'd the list of in-service topics, which she requested and to schedule an in-service.
PPLPMDL0020000001	Akron	OH	44320	8/6/2013	I told dr that the last time we spoke we discussed a prescription that he wrote and how it required a PA. I asked him if it got approved and dr said he can't remember. Dr said he refilled Butrans this week and asked him along with Phil Cremer what the patient was on prior to starting Butrans and dr again said he couldn't remember. I asked dr the next time he has a tramadol patient who is on it around the clock and needs a dose adjustment to stop and think about the other options available like Butrans. I asked dr since he had good success previously that it should inspire him to prescribe more often. Dr said it does. Nothing else learned.
PPLPMDL0020000001	Euclid	OH	44117	8/6/2013	I sent an e-mail to D.O.N., Kathy Nemeth requesting to present an in-service on Butran's to her nursing staff.
PPLPMDL0020000001	Parma	OH	44134	8/6/2013	I sent an e-mail to Linda Belford in Staff Development to request a follow-up meeting w/ the NP's on the Butran's in-service I completed on 7/2 A Butrans follow-up luncheon is scheduled w/ the NP's for 9/24 @12noon.
PPLPMDL0020000001	Cleveland	OH	44113	8/6/2013	Visited 5th floor Ortho floor attempting to set-up inservice with nurse staff, Left info/card for Carlos to book in-service
PPLPMDL0020000001	Cleveland	OH	44119	8/6/2013	I recv'd a call from ADM, Nancy Sugarman, Meeting cancelled for today and rescheduled for 8/20 @ 10am to introduce Purdue's NE program.
PPLPMDL0020000001	Chagrin Falls	OH	44022	8/6/2013	I sent an e-mail to ADON, Nancy Virginia requesting a meeting to introduce Purdue's Nurse Educator Program.
PPLPMDL0020000001	Independence	OH	44131	8/6/2013	Spoke with Linda about scheduling time with Roman. She said he is not available today but she would pass information forward. Extended invitation
PPLPMDL0020000001	Independence	OH	44131	8/6/2013	Extended invitation and spoke with Linda about lungc because dr is on vacation for the duration of the week
PPLPMDL0020000001	Westlake	OH	44145	8/6/2013	I Placed a phone call to ADON, Brenda Amburgey to set up an appt, to meet w/ her to introduce Purdue's Nurse Educator program & discuss educational opportunities. N/A , left msg. on her voice-mail
PPLPMDL0020000001	Cleveland	OH	44113	8/6/2013	Visited Pharm. left card and OxyContin/Butrans info
PPLPMDL0020000001	Twinsburg	OH	44087	8/6/2013	Placed a Follow-up phone call to D.O.N., Shawn McMahon, to discuss educational in-service opportunities. I recv'd his voice-mail. N/A, I left msg.
PPLPMDL0020000001	Cleveland	OH	44135	8/6/2013	I placed a phone call to D.O.N., Dan Rivera to discuss educational in-service opportunities and to see if he recv'd an approval to utilize our Nurse Educator Program from the regional office. I was informed by the receptionist that Dan was in a meeting.I left a message on his voice-mail.
PPLPMDL0020000001	Beachwood	OH	44122	8/6/2013	I placed a phone call to Nurse Educator, Merri Bunge to talk w/ her about re-scheduling the pain management in-service. I recv'd her voice-mail. I left a msg.
PPLPMDL0020000001	Fairlawn	OH	44333	8/6/2013	I Placed a phone call to the D.O.N., Deborah Shaffer to re-introduce Purdue's Nurse Educator Program and see if she is now able to schedule education. N/A, I left her a msg. on her voice mail.
PPLPMDL0020000001	Independence	OH	44131	8/6/2013	Spoke with Jill and she let me introduce myself to the doctor and extend an invite to the butrans program. Discussed flexible dosing of OxyContin

	Akron	OH	44312	8/6/2013	I told dr that there are two things I needed to talk with dr about and they are OxyContin and Butrans. Dr said he prescribed an OxyContin prescription today. Dr confirmed with his nurse Theresa that he prescribed today. I asked dr what the patient was on before he prescribed OxyContin. Dr said it was actually a refill for it today. I asked dr to continue identifying patients on Percocet for OxyContin. I told dr that he may very well have a tramadol patient in his next exam room who may be appropriate for Butrans. Dr agreed and said he will remember the product.
PPLPMDL0020000001	Solon	OH	44139	8/6/2013	I placed a phone call to Judith Sawtner to re-schedule the in-service on Pain cancelled on 6/7. I rec'd her voice-mail, I left a msg.
PPLPMDL0020000001	Independence	OH	44131	8/6/2013	Discussed butrans for patients on low dose Vicodin or Percocet and he said he would consider. Discussed flexible dosing of OxyContin only for this patients he feels comfortable treating. Reviewed Intermezzo dosing and administration.
PPLPMDL0020000001	Fairlawn	OH	44333	8/6/2013	I placed a phone call to Michelle Williams in Staff Development to schedule an in-service on Pain management for her nursing Staff. An in-service was scheduled for 9/25 @ 2PM
PPLPMDL0020000001	Beachwood	OH	44122	8/6/2013	Reviewed titration guide with pain management. Discussed the butrans experience program and vouchers. Reminded staff of Percocet patients that are appropriate for OxyContin. Discussed the start program for OxyContin. Shared intermezzo dosing and administration
PPLPMDL0020000001	Warrensville	OH	44122	8/6/2013	Discussed caesurose criteria for butrans. Reviewed flexible dosing of OxyContin. Shared intermezzo indication and limitation of use. Reviewed insurance plans with barb.
PPLPMDL0020000001	Cleveland	OH	44113	8/6/2013	Reminded of Butrans for those LorTab failures, she is finding new patients everyday, invited to upcoming Moufawad program and will be attending. Intermezzo for MOTNA and dosing
PPLPMDL0020000001	Akron	OH	44310	8/6/2013	Called on pharmacy with Phil Cremer. Attempted to speak with pharmacist but was told they were too busy. Spoke with technician Tiffany about all three products and explained what they were. Tiffany was yelled at by pharmacist while we were talking and said that he needs her back to work.
PPLPMDL0020000001	Independence	OH	44131	8/6/2013	Spoke with tech, Angela because pharm it's was busy. Discussed proper application of Butrans and vouchers. Reviewed flexible dosing of OxyContin. Discussed indication and limitation of use for Intermezzo
PPLPMDL0020000001	Lyndhurst	OH	44124	8/6/2013	I placed a call to the Staff Development Office to speak w/ the head of education to introduce purdue's Nurse Educator Program. N/A I left a msg.
PPLPMDL0020000001	North Olmsted	OH	44070	8/6/2013	I placed a call to speak with Nurse Managers, Jo & Danette and introduce Purdue's NE program and discuss educational in-service opportunities. I spoke with the receptionist, Sara who stated, that Jo & Danette are not in their office, she connected me with Jo @ ext. 4023. N/A, I left a msg.
PPLPMDL0020000001	Bedford	OH	44146	8/6/2013	Dr back from vacation and gave him a Butrans reminder for patients on low dose Vicodin or Percocet. Reminded him of OxyContin flexible dosing. Gave intermezzo indication and limitation of use.
PPLPMDL0020000001	Cleveland	OH	44113	8/6/2013	Discussed Butrans for those Tramadol failures, Dr. agreed, likes delivery system. Discussed Intermezzo for MOTNA and Trial cards.
PPLPMDL0020000001	Cleveland	OH	44113	8/6/2013	Reminded of Butrans for those Tramadol/Lortab failures. Dr. agreed, invited to upcoming Moufawad program. Intermezzo for MOTNA and dosing
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/6/2013	Good discussion with dr about Butrans and OxyContin. I asked dr about what triggers him to think Butrans? Dr said that he finds Butrans as a great medicine for his patients that need a controlled release moderate dose opioid. Dr said that uses it for his elderly population who wants to put a patch on and forget about it. Dr said that most of his patients start on the 5mgc and have good success with the 10mgc. Dr said he uses the 20mgc but its not needed very often. Discussed dr using Butrans for his patients on tramadol and discussed dosing. Dr thanked me for the Butrans and OxyContin in services and said his staff got a lot of information from them. Dr said he is looking forward to the managed care in-service. I asked to continue prescribing and he agreed.
PPLPMDL0020000001	Westlake	OH	44145	8/6/2013	I placed a phone call to speak w/ the D.O.N., Liz Williams to schedule an in-service on pain. I spoke with the receptionist Casey, who informed me that as of last Friday 8/2, Liz Williams no longer works there. Casey stated, " Rachel Kelly the ADON is in charge until the new D.O.N starts." Casey was not sure of the D.O.N's name. I left a voice-mail for the ADON, Rachel Kelly
PPLPMDL0020000001	Cleveland	OH	44113	8/6/2013	Reiterated Butrans position for those Tramadol/Lortab failures and Intermezzo for MOTNA/dosing. Deb says she continues to find Butrans patients and PA are getting better at times. Will be attending Moufawad program
PPLPMDL0020000001	Cleveland	OH	44114	8/6/2013	Reviewed Butrans for Tramadol failures, Initiation/dosing, invited to upcoming Moufawad program-she will attend. Intermezzo for MOTNA/dosing
PPLPMDL0020000001	Akron	OH	44333	8/6/2013	Discussion w/ dr about his use of Butrans and OxyContin. Dr said he has great success with the 10mgc dose of Butrans and finds that his population is mostly his elderly men and women. I used part of the managed care insight about baby boomers reaching age 65 that will be entering Medicare D. I told dr about the new Butrans Medicare D coverage and how he can focus on that patient population. Dr admitted to not using Butrans on too many younger patients but does believe it will work. I asked dr to use OxyContin for his patients on Percocet and that he needs to make the decision to use OxyContin instead of other ER opioids if there is a level playing field on formulary. Dr agreed to do that.
PPLPMDL0020000001	Bedford	OH	44146	8/6/2013	I placed a phone call to speak w/ the D.O.N., Jackie Conner and introduce Purdue's Nurse Educator Program. I was informed by the receptionist that Jackie was rounding. I left a msg. on her voice-mail.
PPLPMDL0020000001	Cleveland	OH	44122	8/6/2013	I received a phone call from Francine Young in Staff Development, stating she needed to cancel the in-service on constipation for today. She said, " we were cited for abuse and we only have until this Friday to complete a plan of correction in writing." The in-service was rescheduled for Tuesday 9/10 @2PM
PPLPMDL0020000001	Olmsted Falls	OH	44138	8/7/2013	Dr asked what was new? We discussed returning from training and what he knew of Purdue. Doctor said he knows very little about the company but said they treat pain. I asked his experience with writing butrans. Dr said very little. I asked him what type of patient came to minds when he just said that. Doctor said those pain patients. I said which pain patients do you have more then one kind? Dr. Shrugged shoulders. Reviewed That Butrans was indicated for the management of mod to sev chronic pain when a continuous around the clock opioid analgesic is needed for an extended period of time. I made mention of the naive FDA approved study. In terms of what they were taking prior to Butrans therapy (non opioids). I asked have you seen patients like that that just need a different course of action in pain relief. He said yes. I said Butrans is a schedule 3 option and it still comes with those warnings and precautions like abuse potential and respiratory depression. However, it's a 7 day transdermal option for those tramadol patients and would schedule a lunch to review the process of getting them into the app dose of Butrans. Dr was interested in intermezzo and wanted to know why managed care would allow intermezzo after a product w the same molecule failed. I said good point, and I would see if I could find out more. Dr said he has many patients that fit intermezzo indication but hasn't written it. Reviewed dosing and savings program. Did let doctor know about side effects. <font color=blue><b>CHUDAKOB added notes on 08/08/2013</b></font>-Lisa, remember that when you mark that you spoke of all three products, our call notes should reflect some information relating to what you discussed about all three product. OxyContin was missing from your call notes.<font color=green><b>BARTOLI's response on 08/08/2013</b></font>-Ok, I understand<font color=blue><b>CHUDAKOB added notes on 08/12/2013</b></font>-Thank you!
PPLPMDL0020000001	Cleveland	OH	44106	8/7/2013	OxyContin reminder, q12h dosing & flexible dosing strengths, Butrans for those Tramadol failures, said he has prescribed for a few patients & doing well. Invited to upcoming Dr. Moufawad program. Booked lunch with Terrah & dept
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/7/2013	I asked dr if she has patients on NSAIDs or tramadol? Dr said she does. I explained Butrans key selling messages focusing on appropriate patient types and dosing of Butrans. I told her that when a patient on tramadol needs a dose adjustment and had chronic pain, what clinical justification is there to titrate or go to another IR opioid? Dr said she can see whe Butrans fits and likes that its a schedule 3. Dr said she will find it useful for her older patients who don't want or can't remember to take their pills. Discussed OxyContin and the need for a q12h oxycodone and asked her to switch Percocet patients to OxyContin. Discussed intermezzo dosing, indication and limitations of use. Dr said she likes the idea but its hard to beat the clock of Ambien. I discussed the formulary and asked for clinical experience.
PPLPMDL0020000001	Akron	OH	44304	8/7/2013	Presented Butrans and OxyContin along with intermezzo. Gave all key selling messages for Butrans and he told me he has heard about it before. Dr said he probably won't use it but asked me if the specialists are using it? I asked him who he refers to and he told me narouzes' group. I told dr to call him and ask him about it. Gave dr OxyContin overview and abuse deterrent studies. Explained appropriate patient type for OxyContin. Discussed intermezzo indication, dosing, and limitations of use.
PPLPMDL0020000001	Cleveland	OH	44104	8/7/2013	Window call, Invited Dr. to upcoming Moufawad Butrans program, said she will check schedule, also she has a patient on Butrans that is doing well. Reminded of Intermezzo for MOTNA.
PPLPMDL0020000001	Valley View	OH	44125	8/7/2013	Followed up with Aaron in regards to key prescribers of OxyContin and Butrans, said he will try to run a list in the next week or so. Also if he/staff had any opportunities to suggest utilization, said at this point opportunity is not presenting itself. Will keep in mind
PPLPMDL0020000001	Parma	OH	44129	8/7/2013	Quick call on dr while I was talking to other physician. Described appropriate butrans patient profile nancy. Reviewed flexible dosing of OxyContin
PPLPMDL0020000001	Westlake	OH	44145	8/7/2013	I rec'd a return phone call from ADON, Brenda Amburgey, who voiced interest in Purdue's Nurse Educator Program. An appt. was set up w/ her for August 16th @ 10AM to discuss her facilities needs and the program further.
PPLPMDL0020000001	Akron	OH	44320	8/7/2013	Pharmacy was packed so I discussed products with the technician Sam. Discussed Butrans dosing, schedule, and patient types along with conversions. Sam said they have been filling it and patients have not told them anything bad about it. OxyContin dosing, indication, and conversions. Sam said he sees it but most are refills.
PPLPMDL0020000001	Cleveland	OH	44106	8/7/2013	Saw Dr. in hallway, said he still hasn't started anyone on Butrans but is looking, invited to upcoming Moufawad program on the 21st
PPLPMDL0020000001	Olmsted Falls	OH	44138	8/7/2013	Saw the nurse thru the window- introduced self and scheduled lunch. Brief discussion on Butrans- she never heard of it. I stated the indication and that it was a transdermal patch. rn talked to dr velez if he wanted any coupons which he said no.
PPLPMDL0020000001	Westlake	OH	44145	8/7/2013	Introduced Purdue to Dr and Val the (ma)- never heard of it before thought it was the chicken company. I explain my role, not as a sample dropper and someone to provide value as you find approp patients for our products. Dr. said- she has little experience writing butrans. I asked how she goes about treaing patients that have around the clock pain and she treats for an extended period of time chronically. Dr said she will manage pain patients like back pain but if she feels they are too severe they get refered out. We discussed her patients in office, dr. said back pain was a biggie. Reviewed with doctor the on the visual aid and asked if she identified with any of these doses that she might have written for her back pain patients. Dr. said yes. I reviewed the appropriate Butrans starting doses. Asked the doctor why she wouldn't choose Butrans 5mgc for the patients discussed. Dr. shook and shrugged shoulders. Revied how to apply/where to apply the patches and that application sight was a commonly reported a/e. Quick review on titration. Oxy didn't get much discussion- dr. said she referred "those patients out. Left leave behind information and will discuss at a lunch with more time. Quick review of intermezzo. Dr. said she heard of it and inquired on managed care. I gave a quick review of the savings program and the Pa's that are required on her plans. Dr was not aware of the use, nor the gender specific dosing, yet did recall it was sublingual. I mentioned that it was prego <font color=blue><b>CHUDAKOB added notes on 08/18/2013</b></font>-Lisa, this was a really good call note! I really felt like I was in the call. I think your next call objective on the efficacy data is right on as well. If she doesn't believe it will work, managed care doesn't Met Nurse (rita)- she said that the doctor doesn't write my products. I said "any" she said not much. I asked if she thought the doctor treated patients that have ongoing back pain or chronic osetoarthritis? She said he does treat that but I have to book a lunch to see him. Left oxycontin slim jim and Butrans patient information booklets for the doctor.<font color=blue><b>CHUDAKOB added notes on 08/18/2013</b></font>-Lisa, This would be considered a non-HCP call since you did not see the physician.
PPLPMDL0020000001	Westlake	OH	44145	8/7/2013	Quick introduction to dr and gave her Butrans titration guide and asked her to think of patients on low doses of Vicodin or Percocet that are in need of a dose adjustment. Explained oxycontin had flexible dosing. Gave intermezzo indication and limitation of use
PPLPMDL0020000001	Parma	OH	44129	8/7/2013	Short call with dr about Butrans. I asked him if it is a fair assumption that he has patients on NSAIDs or tramadol around the clock? Dr said he had both but not many. I showed him the profiles and asked him instead of titrating the IR opioid when a dose adjustment is needed to initiate Butrans. Explained the conversion scale to discuss appropriate starting dose and titration. I asked dr to just try Butrans. Dr said he will keep it in mind, met with Rita (one of the 2 pharmacists)- introduction to self and asked about stocking. They do not stock butrans at this location, but could be ordered she said. She has not seen any scripts come thru for Butrans. She stocks limited doses of Oxycontin, has seen some scripts but couldn't recall who. I provided butrans overview that it was a 7 day transdermal patch with the indication. She was aware. We reviewed when patients could titrate, she did not know when to titrate with Butrans. Also covered the a/e Risks with Butrans (Respiratory Depression and Abuse potential)- she was aware. Talked about education of patients moving from a non opioid analgesia to butrans. Gave pharma the initiation guide. Pharmacist just had a script come thru with CareMark which needed a pa, which got switched back to a 10mg of ambien. She said she faxed the request to the office and they faxed the confirmation to switch back to them. She didn't release the doctors name who wrote the script. We reviewed Id the mg of intermezzo men vs. women, she was unaware. Rita asked if it was the same as ambien. I stated that no head to head studies have been conducted therefore i could't state. However, it is the the first and only for its indication (state). Rita did not know the indication. Rita said intermezzo has horrible formulary coverage and she has yet to fill one script.
PPLPMDL0020000001	North Olmsted	OH	44070	8/7/2013	
PPLPMDL0020000001					

PPLPMDL0020000001	Olmsted Falls	OH	44138	8/7/2013	Spoke to ray (floating pharmacist today)- introduction of self and asked how familiar he was with Butrans. Pharmacist said he has not seen any scripts come thru in a while. When specified...he said months. I asked the pharmacist about who in the area did he see scripts coming from in terms of pain management. Pharmacists mentioned dr. Ludwig but couldn't think of any off hand. Reviewed with the pharmacist the indication of Butrans and showed via the detail aid where patients can apply the transdermal patch. I asked how often he sees patients being moved from a 5 mcg to the ten mcg in any of the regions he works. The pharmacist said he never noticed because he doesn't see much written. I reviewed with the pharmacist that Butrans is a 7 days transdermal and titration can occur by day 3 (72 hours). Also balanced on ae's and even those it is a schedule 3, it still has abuse potential and respiratory depression. OxyContin- pharmacist ray said they stocks very limited amounts of it. Pharmacist did not provided stocking details. When showed the avail mg's on my detail aid, pharmacist asked if OxyContin was going generic. I stated that oxycontin branded patient has been extended and their is no ab rated available. Reviewed the indication and portions of the limitations such as not for patients taking it prn or pain that is acute in nature. Intermezzo- not much time left for big discussion. I did go thru the dosage for men vs. women and its indication for use. Pharmacist nodded.<font color=blue><b>CHUDAKOB added notes on 08/08/2013></b></font>This looked like a very nice call Lisa. One point of clarification is that our branded patent has not been extended. The FDA ruled that any generics to a long-acting opioid have abuse-deterrent Met dr for first time and asked about his theory of prescribing medicine for pain? Dr said he doesn't have a problem with it and mostly prescribes them for his over 65 market who he believes are legitimate and won't abuse the medicine. Dr said he has used fentanyl before and asked me to compare them. I told them that there are no head to head studies but I can't however asked him where in treatment has he used fentanyl? Dr said mostly when patients fail 2 or more IR opioids. I explained where he should be putting Butrans in his treatment algorithm. Discuss patient profiles and conversions. I asked dr if he will use it? Dr said he might because he likes the low dosing and schedule 3 is nice. Discussed OxyContin dosing, indication, titration and formulary. Dr said he is not opposed to it but has to be very selective on who he prescribes it to. Intermezzo discussion, dosing and Discussed all products and asked her a few questions which she was not interested in answering about her prescribing of pain medicine. I explained all key selling messages for Butrans and reviewed all patient profiles. I asked her if Butrans is a product she would use? Dr said possibly but might refer patients needing it to pain management. I asked her if it is common for her to refer patients failing tramadol to pain mg? Dr said it depends. I told her to use it for her tramadol failures prior to a referral. Discussed OxyContin dosing, patient types, titration and managed care along with insurance for Butrans. I discussed Intermezzo and asked her opinion on it? Dr said that it is pretty hard to be generic zolpidem. I told her the indication and dosing is different and to give it another shot for patients with middle of the night awakenings.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/7/2013	Gave dr the new OxyContin piece about abuse deterrent studies at window. I asked him to review and to begin using the lower doses of OxyContin for patients on low dose vicoden or Percocet who need a dose adjustment. I handed him the conversion guide as well. I asked him if he has reviewed the Butrans information I have left him? Dr said its on his desk. I asked if he has any questions about the product or where it should be used? Dr said no. I told him to use it for his patients on tramadol around the clock and to gain some clinical experience with it. Dr said ok. Nothing else learned.
PPLPMDL0020000001	Stow	OH	44224	8/7/2013	I asked dr about his experience to this point with Butrans and his thoughts on the product. Dr said he likes it and said he probably will be prescribing more once he builds up his patient base. I told him about his tramadol patients being good candidates and showed him the conversion slim Jim. I told dr about the new OxyContin abuse deterrent study handout and asked for his continue use of the product for his Percocet patients.
PPLPMDL0020000001	Cleveland	OH	44106	8/7/2013	Talked with Marge discussed OxyContin patient essential kits, said she thinks its a great resource and will distribute to new patients. Butrans for those Tramadol failures before they start on short acting. Intermezzo for
PPLPMDL0020000001	Parma	OH	44134	8/7/2013	Spoke with Rita about butrans proper application from patient booklet. Reviewed start principle for OxyContin. Discussed indication and limitation of use for intermezzo.
PPLPMDL0020000001	Stow	OH	44224	8/7/2013	Short discussion about him using Butrans for his older adults and asked him how he is differentiating Butrans from OxyContin? Dr said that he uses Butrans for his opioid naive and those on low doses of short acting. Dr said he reserves OxyContin for those who have failed two or more opioids. I showed dr the conversion guide and asked him to consider using OxyContin for his patients over 40 mg of vicoden instead of Percocet. Dr said he has done that before but is tough to get through insurance. Nothing else learned.
PPLPMDL0020000001	Westlake	OH	44145	8/7/2013	Spoke to Kathy (Office Manager) briefly about meeting Christine the PA at the office. She informed me that I can see her via lunch and that she is in the office daily. I scheduled lunches and handed out invites to upcoming dinner program. She asked what samples I brought. I specified that my role is different that the reps that sample and because of the nature of my products it requires me to to stay on top of any concerns or questions that doctors have relating to them so figuring out a way to see the doctors would be helpful.
PPLPMDL0020000001	Stow	OH	44224	8/7/2013	I spoke with dr about the new OxyContin abuse deterrent study piece and told her to review it. I asked her if she has ever taken a patient on 30mg of vicoden for example and moved them straight to OxyContin? Dr said she would and has done it in the past. I showed her the conversion guide and explained the 1:1 ratio from Percocet or IR oxycodone to OxyContin. I asked dr to use more OxyContin instead of refilling Percocet. Dr agreed to do that. I told dr that Butrans is ideal for her patients on NSAIDs or tramadol around the clock who may need a dose adjustment. I told dr the c3 7 day transdermal patch can be used early on in treatment when she knows she is treating a chronic condition. I showed her the NSAID and tramadol case studies and asked her to try it. Dr said it makes sense and will do that.
PPLPMDL0020000001	Munroe Falls	OH	44262	8/7/2013	Gave overview of Butrans efficacy and explained the opioid experienced trial. I asked dr if she feels comfortable that Butrans works? Dr said she does because she has had patients do very well with it. I told her I hope that would inspire her to use it more frequently. I asked her to use OxyContin for her pr patients already on Percocet around the clock for q12h delivery. Discussed Intermezzo indication and showed her the patient type piece. Dr said she likes it but is hard to get covered. I told dr to focus on Caresource.
PPLPMDL0020000001	Parma	OH	44134	8/7/2013	Spoke with Tech about butrans proper application from patient booklet. Reviewed start principle for OxyContin. Discussed indication and limitation of use for intermezzo.
PPLPMDL0020000001	Fairlawn	OH	44333	8/7/2013	Dr came to front desk after I asked to speak with him about the inservice. I updated dr on the schedule date for the Copley health center Butrans inservice. Dr told me that Barbara told him already and it is all set up. I asked dr to gain clinical experience with it for those patients on tramadol and low dose vicoden. Dr said he will try to do that. I have him the slim Jim conversion scale.
PPLPMDL0020000001	Parma	OH	44129	8/7/2013	Spoke with Stephanie about proper butrans application and rotation of sites. Reviewed start principle for OxyContin. Discussed indication and limitation of use for intermezzo.
PPLPMDL0020000001	Akron	OH	44312	8/7/2013	I asked dr if his experience with Butrans has changed since we last spoke and if he has received any positive feedback? Dr said he still believes in Butrans and said he just thinks he needs to be even more selective with his patients. I told dr that his it look is spot on and to use it early on in treatment.
PPLPMDL0020000001	Cleveland	OH	44195	8/8/2013	Talked with Brian, asked if he was aware of the clinical RPH over at JNorth that is affiliated with E-voucher, he said not sure(he mentioned Sabrina)also Dr. Dews as a Butrans prescriber and oncology/palliative care for
PPLPMDL0020000001	Mayfield Village	OH	44143	8/8/2013	First time Ive met with dr. k this year, & since he's joined practice. He's comfortable using Butrans. Went through complete detail with him, CNP Jordan and CNP Bernadette at same time. Used new patient profile piece to share appropriate patient selection. Positioned Butrans as either a first opioid, or conversion from a short acting opioid such as Vicodin, Percocet, Tramadol, when pain has become chronic, and patients keep requesting refills. Presented pain reduction scores from opioid experienced trial. The CNPs very engaged, asked several questions. They only come into office about 1x per month, because they do all hospital visits for the practice. Since Dr. Mukkunda is in India until 8/19, and Dr. Ashraf not in today; they are there helping out. Both Jordan and Bernadette thought the Butrans dosing slider/patient guides to be very helpful. I asked dr is he could think of any patients appropriate for Butrans? He replied yes. I asked him if he'd remember to hand out the trial/savings card, he replied yes.left reformulation piece for dr Jordan and bernadette. they reviewed them while we spoke. I directed them to inside back cover as well, where they could find updated FPI. We also discussed the START principles and addition of 15, 30 and 60 mg doses a few years back. they will keep all doses in mind. they stated the conversion/titration guide, very helpful Intermezzo, prn, MOTN, sublingual, peak plasma, patients must have at least 4 hrs sleep left, Caresource Prior Authoriza
PPLPMDL0020000001	Cleveland	OH	44113	8/8/2013	Met with Dale, covering Ortho today, asked for his assistance in setting up OxyContin in-service with floor nurses, said he will meet and discuss with Carlos-Nurse mgr. Also said he/Shen started a new patient on Butrans and doing well.
PPLPMDL0020000001	Cleveland	OH	44195	8/8/2013	Left Butrans info/invite for upcoming Butrans Moufawad program CNP's=Jones,Paczos,Kirchner,Tuthill, Clark and OxyContin info for MD=Long, Chatterjee, Calabrese Moufawad program invite for Fellows-
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/8/2013	Spoke with Jamie the pharmacist and asked her if she has been filling Butrans? Jamie said they have been filling a lot from the western reserve spine and pain in the falls. Jamie said she filled a 5 mcg Butrans for Jake Sisko just this week and fills a lot for Dr Dmitri and Dr.Sable. I exp,aimed the schedule 3 7 day transdermal patch. Discussed OxyContin dosing and asked about prescriptions and Jamie said that they do fill them mostly for pain management. Jamie said that they filled a recent intermezzo for Daniel Laszlo and have both in stock.
PPLPMDL0020000001	Akron	OH	44312	8/8/2013	Spoke with chuck the pharmacist about all products. I asked him if he has been dispensing Butrans recently? Chuck said he has for a couple of drs. Dr Cain and a pain dr which he could not remember the name. I discussed the Butrans product and reviewed dosing, patients types and conversions. OxyContin dosing and indication along with managed care. Chuck said he has been seeing a lot of rejections and pa's from insurance companies on OxyContin. He said many are Med D plans. Intermezzo indication and dosing information. Chuck has not dispensed.
PPLPMDL0020000001	Akron	OH	44312	8/8/2013	Short call at the window for Butrans. I told dr that he can use Butrans for those patients on NSAIDs and gave him the Maria profile. I told him about the tramadol patients and asked him if he will prescribe again? Dr said he will because his patients are doing fine on it.
PPLPMDL0020000001	Cleveland	OH	44113	8/8/2013	Discussed with Holly/ OxyContin patient kits along with Butrans 7 day transdermal patch. Rescheduled appt with Bilfield/Stearns and Donley with be leaving in Sept
PPLPMDL0020000001	Olmsted Falls	OH	44138	8/8/2013	I met D.O.N., Pam Riter at the PharMerica Symposium on 8/7 and introduced myself and Purdue's NE program. She voiced interest in the educational opportunities that I presented to her. I gave her my BC. Today I dropped by to thank her for talking w/ me yesterday. I was informed that she was in a meeting. I left PAP handouts.
PPLPMDL0020000001	Lyndhurst	OH	44124	8/8/2013	Was able to speak with Karen in between patients. Butrans efficacy, pain reduction scores opioid experienced patients. Butrans added to NP national formulary, she says Diana and medical asst DID forward that info to her the last time I visited.. Also updated her on Butrans now preferred Medco Medicare Part D. Please hand out patient guides or tear sheets prior to patients leaving office. OxyContin, update to section 9.2 of FPI. She will review. Reformulation piece left. Very positive of reformulation and abuse deterrent studies.OxyContin has broad formulary coverage, including Medicare Part D, of which I'm leaving you updated formulary grid.
PPLPMDL0020000001	Cleveland	OH	44143	8/8/2013	Met Jordan for first time today at lunch. Detailed him at same time as Dr. Krishnan and Bernadette Knez. Very interested in all 3 products. Asked a lot of questions. He says he only gets to Mayfield office about 1x per month if that, as he and Bernadette do all hospital visits for their group. He also asked for a Butrans dosing slider and OxyContin conversion/titration guide. Went over efficacy/safety Butrans, complete detail, supplemental analgesia, steady state; OxyContin, reformulation piece, updates to section 9.2 of FPI, START principles, q 12 h recommended dosing, 7 doses available.Titration possible in 1-2 days, as steady state is 24 to 36 hrs. Intermezzo, zolpidem tartrate, sublingual, steady state, gender dosing, prn MOTN insomnia when patients have at least 4 hours bedtime remaining. He will keep all products in mind moving forward. Invited him to 8/21 Moufawad/Farenheit
PPLPMDL0020000001	Mayfield Village	OH	44143	8/8/2013	Detailed Bernadette, Jordan Becker and Dr. Krishnan at same time. Bernadette & Jordan state that they only come into the office in Mayfield about 1 x per month, as they visit the group's patients in hospital. They are in today because Dr. Mukkunda is in India, & Dr. Ashraf off. they were happy to get all information, and Bernadette says she can now write CII and CIII products. She asked for a copy of the Butrans dosing slider/OxyContin conversion/titration guide. she really liked START principles and OxyContin reformulation. She much prefers to use a CII over a CII. She is however, comfortable using both Butrans and OxyContin. Invited her to 8/21 Moufawad program/she'll check her schedule. Intermezzo, PRN, MOTN insomnia, sublingual, peak plasma, highway drive study and why patients must have at least 4 hrs. sleep remaining after taking LZ.
PPLPMDL0020000001	Mayfield Village	OH	44143	8/8/2013	Met with Kristy at lunch. She was very engaged, and allowed me to fully detail all three products. Started with OxyContin, reformulation piece, updates to section 9.2 of FPI. She was very pleased with reformulation. She is more comfortable now initiating OxyContin. Dr. Mukkunda would need to write CII for her. She can write CII and CIV on her own. Presented START principles, q 12 h recommended dosing, 7 doses available for 25-50% increase between doses, steady state: availability to titrate 1-2days based on 24-36 hrs. Butrans, CII 1x week pain patch option for patients with moderate to severe chronic pain, needing ATC analgesia. Opioid naive Ropiod tolerant patients discussed. What doses to start at, max dose 20 mcg hr. She thinks Butrans is good option, and comfortable with initiating. Butrans added to NP national formulary Kristy. Intermezzo:PRN, MOTN insomnia, can match to patient sleep pattern, sublingual, peak plasma, gender dosing. Trial/savings, she will look for in sample clock; keep top of mind for MOTN insomnia patients.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/8/2013	Janet at the forint desk allowed me to see dr Ali for a second in between patients. I asked dr if he will begin using more of the dosing flexibility for OxyContin and use the 10mg doses when patients fail vicoden moderate doses? Dr agreed and said he already tried to do that along with switching patients from Percocet to OxyContin in the hospital. I showed him the Scott profile for Butrans and asked him if he will commit to using it for that patient type? Dr said he knows he should be ding that and said he will.
PPLPMDL0020000001					



PPLPMDL0020000001	Cleveland	OH	44113	8/8/2013	Invited to upcoming Butrans Moufawad program, she doesnt usually attend many programs anymore, but will keep it in mind. Reiterated that she believes most of her patients are adequately controlled on present therapy and really doesnt treat many pain patients
PPLPMDL0020000001	Mayfield Village	OH	44124	8/8/2013	Brief product discussions; Indications/limitations for Butrans, OxyContin (reformulation/updates section 9.2 of FPI) and Intermezzo. Left 8/21 Moufawad/Fahrenheit invite.(Penny has injury so didn't eat lunch).
PPLPMDL0020000001	Lyndhurst	OH	44124	8/8/2013	Met with medical assistant at front window, left OxyContin patient essentials kit for dr reed importance of handing out to NEW OxyContin patients. START principles, q 12 h recommended dosing. Butrans, steady state 72 hrs, so supplemental analgesia recommended. Patient guides should be handed out to each Butrans patient. Intermezzo, new tear sheet savings, Facebook page, Intermezzo.com for education and printable savings on those sites
PPLPMDL0020000001	Highland Heights	OH	44143	8/8/2013	Spoke to Mary at front, and checked with Michelle if dr needed any OxyContin savings cards, Michelle said they have some left. Updated staff on Butrans Medco Medicare Part D preferred status, Caresource Prior Auth after failure of just one short acting opioid. Left IZ new tear sheet cards, 1 pack IZ patient guides.
PPLPMDL0020000001	Cleveland	OH	44102	8/8/2013	Met with Ed (Pharm Dir.) discussed OxyContin and his utilization in the hospice setting at his ceter. Stated his/staff confidence in dispensing. Went over Butrans dosing conversion guide, said he has alot of Fentanyl use on hospice side, likes once weekly transdermal delivery system. Has 1 patient over in assisted living ctr across street on Butrans 20mcg/hr (Contact-Rick S.nurse)Nouraldin, Sundrajam- key clinicians
PPLPMDL0020000001	Cleveland	OH	44119	8/9/2013	In service Cleveland Clinic, Euclid Hospital Pain Management, 3rd Floor. Dr. Saeed, Paul Gawry PA-C, nursing staff, head nurse Carla Van Pelt. OxyContin, Butrans, and Intermezzo. OTC products: Senokot, Senokot S.
PPLPMDL0020000001	Euclid	OH	44119	8/9/2013	IN service with nursing staff, Carla and Deborah, then Paul. Sat in Paul's office while waiting for Dr. Saeed to come out of a procedure. Detailed Paul first on OxyContin, and used reformulation piece. Next, used OxyContin conversion/titration guide. First discussed conversion from short acting opioids OxyContin q 12 h, then START principles. Paul says the START principles and overall guide will be very helpful to him. then Butrans, as option for more moderate, chronic pain. Reduction pain scores opioid experienced trial, steady state, supplemental analgesia. Patient guides. Intermezzo, can match sleep patterns for MOTN insomnia patients. 5 day trial with script, and \$45 off each month after. Patient guides left.
PPLPMDL0020000001	Euclid	OH	44119	8/9/2013	Dr please review OxyContin FPI updates to section 9.2, with addition of our abuse deterrent studies. I will leave this reformulation piece if you'd like further information. He said he will look over. Also, I'd like to present you with OxyContin START principles which were designed to help with titration and dosing. Also, this guide will help you when converting patients from short acting opioids to OxyContin q 12 h dosing. Butrans: right away he says where is Butrans covered on Medicare? I told him Medco Medicare Part D just added Butrans as preferred product. For the remainder of his Medicare patients, he will need to use OxyContin, as OxyContin has broad formulary coverage, and while showing Medicare pART d GRID for OxyContin, here's coverage and what your patients can expect to pay for OxyContin PRIOR to applying the \$90 off monthly savings. Dr. Ive left you and your staff additional OxyContin, Butrans and Intermezzo savings cards & patient education. Please keep in mind Intermezzo for your Caresource MOTN insomnia patients. I will see you soon & look forward to following up with you.
PPLPMDL0020000001	Westlake	OH	44145	8/12/2013	Saw dr thru window. Dr asked what I was selling. I said I certainly would not be selling opioid analgesia to anyone but that I was here to see what value I can bring to the office for patients appropriate for OxyContin or Butrans. Dr said he doesn't like my products and I wasn't going to change his mind. Left him the Butrans naive study and OxyCotin titration slim Jim.
PPLPMDL0020000001	Cleveland	OH	44102	8/12/2013	Spoke with Mike(RPh) Reviewed OxyContin Q12h flexible dosing along with Butrans for those Tramadol failures. Still hasn't seen any RX's, suggested assisted living centers
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	8/12/2013	I was in the area and stopped in to talk w/Christina Miterki to check status on the D.O.N. and scheduling. future in-services. I spoke w/ the receptionist Linda Bergman who informed me that Christina was not in. When I asked about the the D.O.N., she stated, " we are still not sure yet if Debbie Blouslough is returning." I left Purdue educational offerings along w/ my RBC.
PPLPMDL0020000001	Akron	OH	44333	8/12/2013	Dr asked me again about Butrans conversions. I asked why and he said because he had a patient this morning who he initiated on Butrans and couldn't remember the dose ranges. I gave him the conversions slim jim and told him to keep it with him. I told him to remember the 5 mg dosing and the rest is 10mcg. Dr said the patient was taking 30mg of vicoden. I told dr he should initiate on the 20mcg. Explained the patient profiles and managed care coverage. I asked for more business. Discussed OxyContin dosing and the start principles. Dr said he agrees with them and tries to get more and more patients on ER opioids including OxyContin. Gave intermezzo patient profiles and dosing.
PPLPMDL0020000001	Mayfield Village	OH	44143	8/12/2013	Left Joan w OxyContin pharmacists guide. Joan I know you stated you don't stock or dispense OxyContin, however, for your information, I am leaving this guide. I also promote Butrans which is a CIII 1 x week option for chronic pain, 5,10,20 mch hr dosing available. Intermezzo, MOTN insomnia patients, if customers inquire about Intermezzo, they can visit Intermezzo.com, and/or Facebook for further education & printable savings. Was in building at lunch appt, courtesy call.
PPLPMDL0020000001	Westlake	OH	44145	8/12/2013	Spoke to nurse-attempt to introduce Butrans. Nurse was far behind and told me she didn't much about the product and didn't think doctor wrote it. Left Butrans patient brochure behind w my card and scheduled a lunch.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	8/12/2013	I made drop-in visit and spoke w/ Nancy Straussner, in Staff Development. I talked w/ her about scheduling an in-service on pain management. Nancy stated, "I talked w/ the D.O.N. about Purdue's Nurse Educator Program and she was not interested, that's why I haven't called you. Now she no longer works here, so we are back to square one. I don't know what to tell you." It was agreed that I follow-up again the end of October.
PPLPMDL0020000001	Cleveland	OH	44109	8/12/2013	Visited Pain(Abuse. Dept. Sue) Invised residents and attendings to upcoming Moufawad program. Left Butrans Scott profile. Left message with Dr. Torres for possible fellows in-service
PPLPMDL0020000001	Fairlawn	OH	44333	8/12/2013	Spoke with Gilbert the pharmacist and Sue the technician about OxyContin and if they have been seeing any more. Gilbert said he can count the number of OxyContin prescriptions on one or two hands. Gilbert said there are no patients he has over 30mg. I asked who they see them from and he said various drs in pain management. I asked if he is seeing more prescriptions stopped by insurances? Gilbert said no because he doesn't have enough patients on it. Reviewed Butrans patient types and Sue said they continue to get prescriptions mostly for the 5 mcg but most patients move to the 10mcg. Discussed intermezzo but Gilbert said he hasn't filled any in a long
PPLPMDL0020000001	Fairlawn	OH	44333	8/12/2013	Dr saw my Butrans information over lunch and told me he prescribed it last week. I asked him for the details on what the patient was on prior and why he thought of Butrans? Dr said the patient was taking 15mg a day of Percocet and was not getting enough pain control. Dr said he started on the 10mcg and will titrate to the 20mg if necessary. I explained how he should be looking at starting Butrans earlier on in his treatment of pain and discussed all three patient profiles. Dr said he will keep it in mind and said he should be using more. Discussed using OxyContin 10mg and reviewed doses and the start principles. Discussed insurance coverage for both products and reminded dr about Med D, Caresource, and BWC for Butrans.
PPLPMDL0020000001	Uniontown	OH	44685	8/12/2013	I asked dr any his recent experience with OxyContin and Butrans? Dr said he still sticks with his 30mg of Percocet as when he initiates the q12h OxyContin. Dr said a big part of what he has to do is to clean up the mess that many GP's and internists do to treat their patients pain. I asked dr to explain and he said that many patients have been out on way too many different short acting narcotics. Dr said he uses OxyContin for many of the patients that have severe pain. I discussed doses and asked him if he would use the lower doses? Dr said he does but sees patients much high up in dosing of IR opioids. Discussed Butrans patient types, starting doses and titration. Explained patient types and how he can use it earlier in treatment. Dr said he has had good success with it for his vicoden patients. I discussed formulary and to use it more often. Intermezzo dosing and patient
PPLPMDL0020000001	Berea	OH	44017	8/12/2013	Spoke to Jill (dr Ludwig nurse and spoke to Christine dr powers nurse) regarding if they were familiar with the products. Dr Ludwig was on vacation this week. Brief over view of Butrans schedule 3 and fair balance on limitations (not prn or acute for pain). Jill said dr Ludwig wouldn't use the transdermal patch because he is not good with change. New dr in office dr powers, family practice. Left Fpi OxyCotin and titration guide leave behind for dr and the nurse said that dr has written some, but did not remember when or what mg. brief intermezzo discussion. Nurse Christine identified herself with the indication and said dr powers writes ambien. Left her the gender dosing card. Both nurses handle the prior authorizations.
PPLPMDL0020000001	Westlake	OH	44145	8/12/2013	Spoke to Allison (pharmacist)asked her if she was familiar with Butrans and she was not. Reviewed the limitations, titration and indication. Allison said she had no stock cause it's not written but would come in with in 24 hours. Allison the pharmacist does stock limited strengths of OxyCotin but didn't tell which and wouldn't think off hand which doctors she saw scripts come thru. Review of Intermezzo and the dosage for men/women, fair balance that it was a schedule 4 and any persons with hypersensitivity to Zolpidem should not take Intermezzo. Revised Patient Savings program for Butrans and Intermezzo.
PPLPMDL0020000001	Akron	OH	44333	8/12/2013	Told dr that he needs to be using more Butrans for those patients of his who are not getting enough pain relief or not tolerating tramadol. I attempted to show dr the Scott profile and he told me he knows everything about Butrans. I told him to use Butrans more for those patients instead of titrating the IR if the patient is in chronic pain. Gave dr the formulary grid and reminded him of the Caresource PA.
PPLPMDL0020000001	Lyndhurst	OH	44124	8/12/2013	Spoke with medical assistant at front window, wanted to follow up with Karen on OxyContin START principles, conversion titration guide & 7 doses available for titration. and : how Butrans is working for her patients and if she's titrating up to 20 mcg hr, went over 3 doses available currently, and importance of handing out patient education guides, and trial savings cards to every Butrans patient. Was able to say hello to Karen as she opened door to call patient back. She's running behind as well.
PPLPMDL0020000001	Akron	OH	44333	8/12/2013	Keith Stephanie for the first time as she is a new PA in the office of CPM. Stephanie has seen and heard of Butrans from the doctors in the practice but knows nothing about it. I reviewed all key selling messages and profile types, titration, and pharmacokinetics of Butrans along with patch design. Stephanie said it is a product she would use because it is a schedule 3 and said she likes the patch vs pill formulation. Explained OxyContin as she said she has used it before with success in patients with more severe pain that need a longer acting opioid. Discussed intermezzo indication and dosing.
PPLPMDL0020000001	Richmond Heights	OH	44143	8/12/2013	Left note for Dr Ashraf, stating I missed him at lunch last week, and I hope he enjoyed his vacation. Left info with medical assistant Heather for Dr. K. Newest Butrans piece, with patient profiles, Reviewed Butrans as first opioid or switch to Butrans from short acting opioid that is not controlling patients' chronic pain. OxyContin, left reformulation piece, ask Dr. K to please review section 9.2 of FPI for updates. Intermezzo, left newest HCP (match Intermezzo to patient sleep patterns) leave behind.
PPLPMDL0020000001	akron	OH	44333	8/12/2013	Short discussion on all products. Discussed Butrans patient type identification and showed him the Scott profile once again. I stressed that he needs to look for signs that a patient may be an ER opioid. Dr said that he knows when they get up to 4 pills of vicoden and Percocet to move them to an extended release product. I told dr to start Butrans earlier than that and he can use it for patients naive to opioids who meet the indication. Dr said he will continue to look. Discussed OxyContin and dr said he just put a patient on OxyContin from Percocet because the q12 seemed to make more sense. Discussed start principles and dr agreed. Intermezzo indication and dosing. Dr said he would try to find a patient to trial it on.
PPLPMDL0020000001	Mayfield Village	OH	44040	8/12/2013	Left OxyContin & Intermezzo pharmacists guides. Left savings flashcards, all 3 products. Met w pharmacist Tom Z. Reviewed update to section 9.2 of OxyContin FPI & inclusion of abuse deterrent studies. Tom says reformulation was a positive thing. Stressed importance of q 12 h dosing & we have START principles available for our HCPs. Butrans he says is a good option, and I asked him if he would recommend Butrans to patients who keep asking for refills of Tramadol, Vicodin, Percocet, would he recommend Butrans, yes I will, that's a great idea. Went over 3 doses available, OPIOD alive start dose do 5 mcg hr and opioid experienced of 10 mcg hr, max dose 20 mcg hr. why supplemental analgesia used in clinical studies, steady state 72 hrs, so Butrans analgesia may not kick in for 2-3 days. Intermezzo, he says we have in stock. I've got to tell you something, I don't want to be mean, but Intermezzo is a dog product. No one is writing. I went on to tell him core messages, & should patients inquire due to our Facebook page, his customers can access Intermezzo.com and/ or Facebook, for education & First time meeting Kristen (Pharm D), staff pharmacist. OxyContin, updates to FPI section 9.2, asked her to review, which she will. Also left her pharmacists guide/OxyContin. Asked her if area HCPs follow the recommended dosing guideline of q 12 h. She says some do, but she dispenses a lot of q 8 h. I repeated that our dosing guidelines, state q 12 h. Butrans, CIII 1x week transdermal pain patch. She hasn't had any new Butrans rx in a while. they previously had one patient on Butrans. Discussed steady state and recommended supplemental analgesia for patient initiated on Butrans. Left FPI. Intermezzo, MOTN insomnia agent, core messaging, Intermezzo.com/Facebook for patient education, printable savings. No Intermezzo scripts that she's aware of either.
PPLPMDL0020000001	Cleveland	OH	44113	8/12/2013	Discussed OxyContin Flexible Q12h dosing. Dr. likes efficacy of product. Went over Butrans for Tramadol/Ultram failures. Dr. said he likes product, but PA was denied, under staffed and extremely busy thus hasn't prescribed since. Asked who I should talk with in regards to PA, he suggested isa. Intermezzo for MOTNA/dosing along with Trial/Savings cards.
PPLPMDL0020000001	Fairlawn	OH	44333	8/12/2013	Gave the pharmacy technician all key selling messages on OxyContin, Butrans, and intermezzo. I told Steve the technician about some of the patients who are appropriate for Butrans. Steve said he has seen Butrans and OxyContin but has not seen any intermezzo and didn't know about the product.
PPLPMDL0020000001	Mayfield Village	OH	44143	8/12/2013	Followed up with staff from lunch. Let them know of my discussion with Dr. K at lunch, and that I told him I'd bring trial/savings cards. Brought 2 packs Butrans cards; one for sample closet, one for Dr. Krishnan's desk. reminder that first month trial available if copay less than \$100 (free), then \$50 off each month thereafter. Left with medical assistant Melissa. Product indication, limitations, patient guides. Left OxyContin reformulation piece, newest Butrans patient profiles piece, Intermezzo sleep pattern match HCP leave behind for CNP Penny O'Brien/Black, as well as 8.21 Moufawad/Fahrenheit invite.
PPLPMDL0020000001					



PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/12/2013	I made a drop-in visit to speak w/ D.O.N., Debbie Keller and follow-up from meeting her at the PharMerica Symposium on 8/7. At that time, I introduced myself and Purdue's Nurse Educator program. She stated that she had received the information that I left on previous visits along w/ the voicemails, but has been too busy to respond. She did inform me that she would give me a call. I stopped by today to talk w/ her about scheduling an in-service on pain. I spoke w/ the receptionist who informed me that The D.O.N. was not able to see me. I left my BC and Purdue educational offerings.
PPLPMDL0020000001	University Heights	OH	44121	8/12/2013	Lunch with Dr Price. OxyContin, dr price i have this piece i will leave with you, should you need any further information on OxyContin's reformulation. You've told me more than 1x that you only write OxyContin for cancer pain. Why is that? He responded, Because University Hospitals group is pressuring us to not write any scheduled drugs, and rather, refer those patients to pain management. So what if your patient is suffering from chronic pain? What do you write for them? He responded Tramadol, because its a CIV. I want to remind you that during our last lunch, I presented a CII pain patch option, Butrans. Walked through the newest Butrans piece with patient profiles. Went through all 3 profiles. His concern he then communicated was: Does Butrans fall off when the patient takes shower? I'm not aware of patches falling off in the shower, and I don't have any data to prove/disprove. However, we do have post marketing reports that Butrans has loosened around the edges, for some patients, which can be resolved by applying First Aid tape to edges or bicuslusive/tegaderm over entire patch. Have I answered your question satisfactorily? Yes, he replied. Intermezzo I started to detail. He said, that's that MOTN awakening drug right? Yes Dr. Price, Intermezzo is a sublingual tablet indicated for PRN use when a patient has MOTN insomnia, and has at least 4 hrs bedtime left. Left new HCP match Intermezzo to patients' sleep pattern piece. He will keep in mind for MOTN insomnia.
PPLPMDL0020000001	Lyndhurst	OH	44124	8/12/2013	Dr Roda just started last week, asked to meet her, she's behind today, not possible, met with medical assistant and explained what I was leaving for Dr Roda. First OxyContin, updates to section 9.2 of FPI and reformulation piece. They still have savings cards left. Butrans, 1 x week pain patch, steady state 2 hrs, supplemental analgesia recommended until Butrans takes effect. Have trial/ savings cards. Left 3 patient guides. Intermezzo, MOTN insomnia, Caresource, 5- day trial, monthly savings after. Left Dr HCP packet, with new sleep pattern hcp piece. Also left dr Aug 21 Fahrenheit invite. DR REED ON VACATION, BACK WED
PPLPMDL0020000001	Cleveland	OH	44104	8/12/2013	Hakim was on vacation, Spoke with Jonathan(RPH) Went over OxyContin flexible q12h dosing, Patient essential savings card. Butrans for those Tramadol failures along with Intermezzo for MOTNA
PPLPMDL0020000001	Mayfield Heights	OH	44124	8/12/2013	Hallway detail w Dr Stanescu. Very rushed, not engaged. Only was able to get out indication for all products. Reminded him at last lunch we discussed OxyContin START principles, 7 doses available for tiratOn of 25-50 % between doses. OxyContin has broad formulary coverage for Medicare Part D (showed formulary grid) In addition, I'm leaving you this piece so you can refer to it for further information regarding OxyContin's reformulation & abuse deterrent studies. Butrans CIII 1 x week pain patch option for chronic pain when ATC analgesia needed ATC. Intermezzo, MOTN insomnia agent. Left HCP match patients' sleeping pattern to Intermezzo. Spoke to medical assistant about savings cards, and she says she'll take 1 box OxyContin savings cards I left & place them on Dr. STANESCU's desk.
PPLPMDL0020000001	Akron	OH	44333	8/12/2013	Conversation with Dana after her maternity leave. Discussed Butrans and reviewed all key selling messages. Dana said she has a patient who is on Percocet 15mg/day who admitted to her this week that they are not working and wanted something more long acting. Dana said she explained the Butrans patch to the patient and the patient was interested in starting. Dana said she sees the attention back this week and will look to initiate. Explained the conversions and asked for more business early on in treatment. Discussed OxyContin key selling messages and abuse deterrent studies. Introduced Intermezzo and discussed the indication, dosing and limitations of use. Dana said it sounds like a good product and will look to use. Discussed formulary for all products and asked for continued business.
PPLPMDL0020000001	Akron	OH	44313	8/12/2013	Upon arrival, I spoke w/ the receptionist Nicole, who informed me that the Nurse Educator, Richard Lynch was off sick today, but I was to proceed w/ the in-service. I completed an in-service on constipation for the day shift STNA's. 5 were in attendance. The Senokot laxative protocol was handed out & reviewed w/ the STNA's. Discussion & interaction on the risk factors, signs and symptoms, complications and treatment of constipation took
PPLPMDL0020000001	Westlake	OH	44145	8/13/2013	Spoke to Kim (ma and receptionist)- she was unfamiliar with Butrans. Very brief recap of indication, patch technology and warnings of abuse potential. Introduced OxyContin to her and the dosages available to her. Left Butrans invite and ma said he never goes to them, maybe the ma Brian. Left Butrans naive study for dr to read.
PPLPMDL0020000001	Parma	OH	44129	8/13/2013	Dr said his go to pain relief medication is tramadol and sometimes patients come to him on Vicodin. We discussed butrans voucher usage and the importance of using them. Dr said he starts with 10 but rarely goes to 20. He said he uses supplemental analgesia for first 3 days. Asked dr to think of appropriate patients in pain and asked what he see the most of and he said back pain and that is what he said he will look for. Reviewed flexible dosing for OxyContin. Discussed dosing, administration and limitation of use for intermezzo including the managed care environment. Invited to program. Discussed use of senakot
PPLPMDL0020000001	Parma	OH	44129	8/13/2013	Extended invitation. Reviewed Scott profile for butrans and asked dr if he used the vouchers on his desk since our last visit and he said no. I asked why not and he said he has not seen an appropriate patient. Asked if he prescribed any pain meds since our last visit and he said yes. I reminded him of the appropriate patient. Reviewed titration of OxyContin. Asked about patients with motna and he said he forgot and brought up managed care again. Reviewed the managed care environment
PPLPMDL0020000001	Westlake	OH	44145	8/13/2013	Met with Kelly (nurse) while discussing Butrans doctor call to window. Dr said she was unfamiliar with Butrans but knew it was for pain. I gave her the op naeve study- opened it and reviewed the highlights. Indication, scheduling, warnings (abuse potential) and that it was the only 7 days extended release transdermal option for appropriate patients. Dr and rn asked about coverage. I showed them the savings program and went back to the section in study (pg 8) shows which mcg to start a new to opioid patient onto the Butrans system. Invited the dr to the Butrans program but she said she has small children and does not attend programs. She is opening her lunch books September 1st. Quick OxyCotin- she was familiar with this product and said she didn't write a lot of it. Gave her titration leave behind. Left Intermezzo driving study behind for her to review.
PPLPMDL0020000001	Parma	OH	44129	8/13/2013	Window call. Extended invitation to butrans program. Gave oxycontin flexible dosing reminder.
PPLPMDL0020000001	Akron	OH	44305	8/13/2013	Spoke to Matt the pharmacist about all three products. I discussed Butrans dosing and patient types. Matt said he has not seen any prescriptions lately. I discussed the new managed care coverage and Medicare D plans. Matt was glad that there is now med D plan coverage. I explained OxyContin doses and Matt said he continues to see many prescriptions which many come from dr Petrus. I asked who else and he said many of the pain drs in akron. Intermezzo indication and dosing and asked if he has filled any and he said no.
PPLPMDL0020000001	Richmond Heights	OH	44143	8/13/2013	I made a drop-in visit to follow-up w/ Staff Development Coordinator, Sheila Harris to see if she has talked w/ the D.O.N. to get approval to partake and schedule an educational in-service. I was informed by the receptionist Darlene, "today is not a good day, we are having a state inspection." I left my BC and Purdue educational information and will follow-up.
PPLPMDL0020000001	Parma	OH	44129	8/13/2013	Extended invitation. Dr said he refers to dr demagon and I recommended that he attend the program to understand more about butrans. I said he can come with dr demagon. Reviewed OxyContin dosing. Gave indication for Intermezzo
PPLPMDL0020000001	Euclid	OH	44117	8/13/2013	I made a drop-in visit to follow-up on w/ Ruth Rossi on the Butrans in-service. I spoke w/ the receptionist, Lynn who called for Ruth and was told that she was not in the office. I left my BC and Purdue educational offerings.
PPLPMDL0020000001	Lakewood	OH	44107	8/13/2013	Spoke to ma and she stated the drs family is in town this week and to return next week. I left the invite for Butrans program and a Butrans naive study for review. The ma did recognize Butrans and OxyCotin but didn't have time to discuss my products because they had a rep still in the office finishing from lunch.
PPLPMDL0020000001	Parma	OH	44129	8/13/2013	Dr should be retiring at the end of the month. Extended invitation to program and Shari said he probably will not attend butrans program. Reviewed flexible dosing of OxyContin.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/13/2013	I asked dr if he is still using OxyContin as his go to ER opioid? Dr said he uses many different products. I asked him if he will use OxyContin for his patients uncontrolled on Percocet? Dr said he will try. I reviewed the commercial and Medicare D coverage.
PPLPMDL0020000001	Cleveland	OH	44128	8/13/2013	I placed a phone call to RoseAnne Howell to confirm the in-service on Pain Documentation for 8/14 @ 6am, 6:30am & 2pm. I left a msg. on her voice-mail. I rec'd a phone call back from RoseAnne, who said, "I am going to have to cancel the in-services for tomorrow. I forgot about them and a lot has been going on. You will have to call the acting D.O.N., Sherry to see if she wants to reschedule." RoseAnne informed me that her position is being eliminated due to financial reasons and she will no longer have a job after 2 weeks.
PPLPMDL0020000001	Akron	OH	44313	8/13/2013	I rec'd a phone call from Richard Lynch, thanking me for the constipation in-service for the STNA's earlier this week. He stated that he rec'd a lot of great positive feedback from the in-service. He will look at his education calendar and call me when he will be educating on Pain.A copy of the sign in sheet was scanned to his e-mail address : rlynch@chs-corp.com
PPLPMDL0020000001	Akron	OH	44310	8/13/2013	Good discussion with dr about Butrans and OxyContin. I told dr that I wanted to reinforce the use of Butrans for his patients that are uncontrolled on tramadol or vicodin. I showed him the patient profiles and asked for his existing patients needing a dose adjustment on one of these medicines. Dr said he just prescribed Butrans the other day for a patient taking 3 Percocet a day at 15mg a day. I asked dr why he chose Butrans? Dr said the patient didn't want to continue waking up in the night to take a pill because he is in pain at night. Dr said he started on the 5mcg but figures the patient will need the 10mcg after the first month because he is in severe pain. I reminded him about steady state and titration. Asked for continued business. I reviewed the OxyContin dosing and patient types that he should move to OxyContin.
PPLPMDL0020000001	Lakewood	OH	44107	8/13/2013	Spoke to pharmacist and tech Kristen regarding Butrans and Intermezzo today. Both familiar with Butrans. I discussed titration, steady state for Butrans. And what this means for a patient new to opioid therapy getting started. They were not aware the patients could use supplemental analgesia and why. Review of the appropriate Butrans patient and discussed most common side effects including application site rash. They did not check stocking for me cause they said they were swamped. Left them Butrans study for reference and also highlighted the Intermezzo information on indication, dosage for men n women and gave them the driving study to review.
PPLPMDL0020000001	Lakewood	OH	44107	8/13/2013	Spoke to dr- introduction. Dr said he doesn't write much Butrans because of the confusing titration and he does write for OxyContin. I asked the doctor what doses were working for his patients and he said 10,20,30's. I asked him what he thought of the q12h dosing and dr said that's why he picks it. On Butrans- I asked how is Butrans confusing. Dr said how long you have to wait to titration. When asked how long he waits, he couldn't remember. Reviewed the steady state of the product and that titration is after 3 days(72 hours) review of the insight with discontinuation. And asked the doctor why he though the discontinuation was so high. And dr said Butrans takes too long to work. I brought out the naive study and showed him during the open label that patients were able to supplement and re enforced that a patient should have appropriate analgesia on hand until steady-state is reached in case of break through. Doctor agreed. Dr said he uses a fair amount of Tramadol. And I said I hope that helps the patient, but if it doesn't what's plan b? Dr did not comment. Dr asked about managed care cash paying next and said he has an older population of patients. I said so is cost a deciding factor for you? He said its important. So I showed him the Butrans patient saving program. Told the doctor for his commercial insured patients this was a way for them to get month to month savings and asked if his patients would benefit from this and he said yes. Fair balance on abuse potential.
PPLPMDL0020000001	Parma	OH	44129	8/13/2013	Myra just came back from vacation and was running behind. I extended an invitation and reminded her of butrans for patients needing a dose adjustment of pain med. told her I was leaving OxyContin titration guide. Gave indication and limit of use for Intermezzo. Let h know that senokot can be used for opioid induced constipation
PPLPMDL0020000001	Parma	OH	44129	8/13/2013	Gave indication and limitation of use for Intermezzo. Reviewed proper application of butrans and disposal. Discussed titration guide for butrans. Discussed start principles for OxyContin.
PPLPMDL0020000001	Euclid	OH	44117	8/13/2013	I made a drop-in visit to speak w/ Kathy Nemeth to schedule an in-service on Butran's. I spoke w/ the receptionist Joe Nathan, who paged Kathy, She did not respond to her page. I left my BC and called and left a msg. on her voice-mail.
PPLPMDL0020000001	Westlake	OH	44145	8/13/2013	Spoke to ma Kim briefly about office procedures. Brian the np is in beechwood on Tuesdays. Discussed Butrans- what it is and who it is not for (limitations). She thought Brian may go to programs but it depended so I left the Butrans invite for him along with the naive study for his reference.
PPLPMDL0020000001	Parma	OH	44134	8/13/2013	Extended invitation. Discussed flexible dosing of OxyContin. Asked if the vouchers were useful for his butrans patients. Dr said he is having success with butrans but is not sure about vouchers but no news may be good news. Gave i indication and limitation of use for Intermezzo
PPLPMDL0020000001	Uniontown	OH	44685	8/13/2013	Told dr about the OxyContin abuse deterrent studies and asked her if she would use OxyContin for patients not responding to Percocet? Dr said she has and doesn't have a problem with it. I showed her the conversions and reviewed the 1:1 conversion. I asked dr about Butrans usage. Dr said she had not used it because she has not found a patient yet. I asked her what that patient would look like? Dr said someone in chronic pain who doesn't want pills. I told dr that it also is ideal for patient on tramadol who need a dose adjustment and meet the indication. Reviewed the conversions and asked her to not wait. Dr said she will try it but said its not an easy sell to the patient. Discussed proper explanation of the product to the patient.<font color=blue><b>CHUDAKOB's query on 09/02/2013</b></font>Perhaps discussing how to sell this to her patients might help!<font color=green><b>REICHL's response on 09/03/2013</b></font>Agreed. I did that before a while ago and she didn't like me telling her what to do. Most of my customers want that but she didn't!<font color=blue><b></b></font>CHUDAKOB added notes on 09/05/2013<b></b></font>OK. I guess she has to be sold first on the efficacy before she will sell it to her patients.

PPLPMDL0020000001	Parma	OH	44129	8/13/2013	Spoke with Edwin about butrans physicians in the area. He mentioned some of the patients in Parma hospital. Reviewed proper application of butrans patch. Reviewed start principles. Explained proper dosing of intermezzo including indication and limitation of use
	Hudson	OH	44236	8/13/2013	Saw dr at window and asked him if he would switch patients uncontrolled on Percocet to OxyContin q12h? Dr said he had done that but said he doesn't write a lot of schedule 2 medicines. Dr said he wants to leave that up to the socialists. I told dr that he can use the schedule 3 Butrans early on in treatment for pain. Showed him the Maria and Scott profiles and asked if he would use it? Dr said he probably will but will wait for the right patient.<font color=blue><b>CHUDAKOB's query on 09/02/2013</b></font>Re-read your call note. The Dr. wants to leave it up to the socialists?<font color=green><b>REICHCL's response on 09/03/2013</b></font>Ha. Autocorrect is going to get people in trouble which is wrong. I have taken the autocorrect off and made more mistakes. Re-reading is a must I guess but lack of time makes it difficult.<font color=blue><b>CHUDAKOB added notes on 09/05/2013</b></font>Still important to do. Thanks!
	Richmond Heights	OH	44143	8/13/2013	I completed an in-service on Pain Documentation for the nursing staff. 10 were in attendance. The importance of documentation r/t continuity of care, reimbursement, and patient safety was discussed. The parameters of reassessment and documentation were also reviewed with the nursing staff. The Comfort assessment journal was also presented.
	Parma	OH	44129	8/14/2013	Extended invitation. Quickly reviewed butrans appropriate patient profile Scott. Asked about OxyContin experience and she said she has not prescribed at this office since she has been here over the last month. Reviewed intermezzo indication and limitation of use
	Parma	OH	44129	8/14/2013	Dr said he has forgotten about butrans and he should use more. I asked what is stopping him and he said he forgets. I asked if he believed Butrans was a good option for pain relief for appropriate patients and he said yes. I reviewed Scott and nancy and explained that these were appropriate patient types. He said he uses OxyContin but not much and I asked if it made sense to prescribe oxycodone 1-2 pills every 4-6 hours. He said not it really did not make much sense for longterm use. I reviewed the start principle for OxyContin. Gave indication and limitation of use for intermezzo
	Cleveland	OH	44103	8/14/2013	Discussed with Amy (RPH) Butrans for those Tramadol/Ultram failures, said its hard to get patients to change current therapies, believes Butrans is a great option, asked her if she would give Butrans patient info booklets to appropriate patients, she agreed. Expressed PA issue with a patient, couldn't remember the details. Reviewed OxyContin Q12h flexible dosing. Along with intermezzo for MOTNA. Majority of RX for patients are managed
	Akron	OH	44320	8/14/2013	Short discussion about Butrans and OxyContin. I asked dr if he will do a prior authorization if he has one for either product? Dr said he will but it depends on the plan and situation. I told dr that dr Adams has done a number of them for Butrans and got all of them approved. I reviewed the patient types appropriate and the insurance plans that are less likely to provide issues. Dr said he will continue to prescribe. I showed dr the conversions for OxyContin from IR oxycodone and asked him if he can think of any patients that are appropriate for OxyContin? Dr said he does. I asked him to switch the patients.
	CLEVELAND	OH	44106	8/14/2013	Spoke with Troy, inquired about OxyContin utilization and Savings Card. Said that most co-pays for patients are under \$25. Once again mentioned Davis/Gutsgell as key clinicians within institution, said that email or leave card for appts. Asked where/if he sees Butrans being utilized? Does not feel in this setting Butrans is appropriate, but will keep in mind when discussing with clinicians as a option
	Cleveland	OH	44195	8/14/2013	Visited both the Dept of Hospice(T. Guttsell) and Palliative/Oncology Medicine. M.Davis) Spoke with Patricia-Front admin.Email for appt.(T.Howard) Invited to upcoming Moufawad program. Pam-nurse.. Left OxyContin/Butrans info along with OxyContin Savings cards
	Cleveland	OH	44195	8/14/2013	MSL email communication with Ms. Kreischer, new coordinator will be taking over OTR and BUP responsibilities and will be trained over the next week. MSL to follow up once training is complete.
	Parma Heights	OH	44130	8/14/2013	I placed a phone call to D.O.N., Katherine Myers to schedule a meeting to introduce Purdue's Nurse Educator program. N/A, I left a msg. on her voice-mail.
	Akron	OH	44333	8/14/2013	Short discussion with dr in between patients. I told him to use more Butrans for patients he sees who are on tramadol around the clock and need a dose adjustment. Dr said he is still building his patient base and will continue to find the right patients. Told dr to use OxyContin as well and told him to use it for his aliens uncontrolled on Percocet.
	Cleveland	OH	44130	8/14/2013	Spoke with Kelly who explained that the drs are only in wed after 5:30. Was told I could leave information and that dr would be interested in vouchers. Reviewed butrans indication and proper use.
	Akron	OH	44312	8/14/2013	I told dr that the other drs in the office told me that he had an issue with Butrans. Dr told me the only issue was that for some reason the patient couldn't understand how to use it correctly. Dr said the patient had some psychological issues and couldn't understand the concept so he kept the patient on vicoden. Dr did say that it had start a new Butrans this week for a patient on tramadol 300mg and he started on the 5mch because the patient was older. I told dr to continue using Butrans early on in treatment and that is where most of the success will come from. Reviewed the Scott profile. Told dr to continue looking to switch uncontrolled Percocet patients to OxyContin and intermezzo for those who meet the indication.
	Cleveland	OH	44130	8/14/2013	Extended invitation but dr said she will be on vacation until the 23rd. Asked her thoughts on Butrans and she said she has had managed care issues. I reviewed formulary grid and asked her to think of butrans for patients needing a dose adjustment of tramadol. Reviewed flexible dosing of OxyContin. Explained that senakot is used for opioid induced constipation.
	Akron	OH	44320	8/14/2013	I asked dr how she decides a patient needs an ER opioid? Dr said she knows when the patients pain isn't being controlled with short acting and they have been on it for more than three months and they are in to complain of their pain. I asked dr to identify those patients that need a dose adjustment in their IR opioid such as tramadol or vicoden. I asked dr to use Butrans earlier on in treatment and reviewed the insurance coverage. Dr said it is always on her mind because I am in every week! I showed dr the OxyContin conversion and titration guide and asked her if she has patient that she refills Percocet for each month? Dr said yes many patients fit that profile. I asked her if she will re-evaluate those patients to see if they are appropriate for the ER oxycodone. Dr said ok. Gave her the dosing guide for intermezzo and to identify patients.
	Copley	OH	44321	8/14/2013	I asked dr how many patients he has continuing on Butrans? Dr said three or four. I asked dr what markers he uses to determine if a patient needs to be titrated? Dr said he didn't understand the question and if a patient tells him they have 10 out of 10 pain he will believe them and make the adjustment. I asked him if that's all he goes on? Dr said yes. Nothing else learned.
	Cleveland	OH	44103	8/14/2013	Went over OxyContin Q12h flexible dosing. Dr. said he is a confident prescriber,Even know medical director/system is putting pressure to stop prescribing. Reviewed Butrans for Tramadol failures along with dosing/titration. PA's are a challenge to practice. Intermezzo for MOTNA
	Parma	OH	44129	8/14/2013	Spoke with Marianne and Jackie about the butrans tear sheets. Gave dr caresource criteria for butrans approval. Told him I was leaving OxyContin titration guide.
	Cleveland	OH	44127	8/14/2013	Reminded of Butrans for those Tramadol failures along with intermezzo for MOTNA/dosing.
	Parma	OH	44129	8/14/2013	Dr said she had a patient that did not like butrans and I asked her if she tried butrans on a patient and had success and she said yes. I explained that she might want to consider patients in need of a dose change on tramadol. She said she will keep it in mind. She also mentioned having insurance problems and I reviewed the formulary grid. Reviewed flexible dosing of OxyContin. Shared intermezzo dosing and limitation of use. Reviewed senakot s for opioid induced constipation. Extended invitation to program
	Cuyahoga Falls	OH	44223	8/14/2013	I led with the managed care insight and asked her how she will adapt to the large influx of patients over 65? Dr didn't know but said she will need to ensure the medicines she uses are covered by Medicare and plans. Told dr that Butrans and OxyContin are two medicines that have that covered. Discussed all key selling messages for Butrans and asked her to pull the trigger and use it for those patients I discussed from the patient profiles. I asked dr if she has any reservations with Butrans and she said no and that she just needs to remember it. I told her to pause before refilling an IR opioid and evaluate if they would be appropriate for Butrans. Explained OxyContin dosing and abuse deterrent properties. I asked dr to switch uncontrolled patients on Percocet to OxyContin and to use intermezzo when a patient complains about in the middle of the night insomnia.
	Cleveland	OH	44103	8/14/2013	Discussed Intermezzo for MOTNA/dosing. Val/Lauren said Dr.Boyd has alot of patients complaining of waking up in the middle of the night" Although they are understaffed for PA's will consider. Said she is not treating/prescribing pain meds. Reviewed Butrans for those Tramadol/Ultram failures, likes delivery system, reiterated to Val that Butrans has the same misuse/abuse potential as any other CIII opioid
	cuyahoga falls	OH	44223	8/14/2013	Good discussion over lunch on all products. Led with managed care insight and asked him how he sees himself adapting? Dr said he has to be more aware that chronic pain will increase as people get older. I agreed and told him that Purdue products will be needed for patients meeting the criteria. Discussed Butrans key selling messages and asked him what his treatment protocol is for treating pain. Dr said he follows standard procedures such as NSAIDs, tramadol, vicoden and Percocet and maybe ER opioids. I told dr that Butrans can be thought of as the schedule 3 controlled release opioid option early on in treatment when he has a patient with a chronic condition. I asked dr if he sometimes just refills a IR opioid because its easy? Dr agreed he has done that. I told dr to pause at that point before refilling and ask yourself if another option my produce analgesia over an extended period? Dr agreed that he has patients that are appropriate for Butrans and will prescribe it. I reviewed patient types and application sites. OxyContin dosing and told him where and when to use in his patient base. Reviewed intermezzo option for patients with in the middle of the night insomnia.
	Solon	OH	44139	8/14/2013	I Placed a phone call to Staff Development Coordinator, Gretta Redus, introduced myself and the NE program & briefly touched on educational in-service opportunities. She informed me that she was busy this week w/ orientation and stated that she would call me the first of next week to get an in-service on the books.
	Copley	OH	44321	8/14/2013	I asked dr if he is familiar with Butrans? D said he is not. I discussed all key selling messages, schedule 3, conversions,patch description and patient types. I asked dr what his experience is in treating pain? Dr said he had not had much but said that Butrans seems like a product that makes sense. I asked dr if he will use it for patient failing their IR opioids? Dr said he will consider it. Left him with insurance grid.
	Akron	OH	44320	8/14/2013	Spoke with Helene the pharmacist abut who is prescribing Butrans and OxyContin. I asked if she has seen prescriptions from Bonyo and Adams? Helene said no but has seen them from summit pain Sandra Sadid and dr Yang. Explained key selling messages and conversions as well as insurance coverage. I asked about oxycontin prescribers. Helene said they see many from Petrus and Fouad. I asked if she has filled any intermezzo and she said no. Discussed indication, dosing and limitations of use and reviewed copay cards.
	Akron	OH	44312	8/14/2013	Dr told me that he prescribed another Butrans for a patient taking vicoden. I asked him for the specifics and he said he couldn't remember the dose but the patient didn't want to have to take so many pills a day. Dr said he has not heard back from the patient and had commercial insurance. I asked if he gave the patient a copay card and he said yes. I asked dr to continue identifying similar patients who may need dose adjustments on their short acting product. I told him to continue switching his patients on Percocet who are uncontrolled or are appropriate for q12h oxycodone. Handed dr the intermezzo dosing and asked for his support.
	Akron	OH	44312	8/14/2013	Dr told me he would keep Butrans in mind. I asked him what that means and he told me that it is always on his mind and is trying to use it more. Dr said again that he is looking for his first great success with Butrans. I reminded the dr that he needed to use it early on in treatment and maybe he needs to speak with one of his pain management drs he refers to to get an idea of her they are using. Dr agreed and said he would maybe do that.
	Solon	OH	44139	8/15/2013	Window call. Asked dr about his butrans usage and he said the office is moving and he will not sign for anything until after the move and he walked away. Mentioned I had OxyContin vouchers also
	Beachwood	OH	44122	8/15/2013	Spoke with barb about butrans tear sheet for patients. Discussed OxyContin titration for low dose Percocet. Discussed senakot s for opioid induced constipation. Reviewed intermezzo indication and limitation of use. Was informed that dr can only be seen by appointment during the lunch hour. Also informed that pain management is moving in nov and I will have to get a badge
	Solon	OH	44139	8/15/2013	Quick window call. Gave reminder for OxyContin dosing. Asked dr to consider butrans for appropriate patients
	Bedford	OH	44146	8/15/2013	Told Trina at the window what products I had and she pointed out the doctor. Extended an invitation to butrans program and briefly gave indication, appropriate patient and managed care environment. Mentioned flexible dosing of OxyContin
	Brooklyn	OH	44144	8/15/2013	Window call. Invited to Moufawad program,will check schedule to see if he can attend. confirmed lunch for Sept. Left Butrans Scott profile<font color=blue><b>CHUDAKOB's query on 08/21/2013</b></font>Mark, this call was entered more than 3 days after the call was made. Entering calls this late is a compliance issue as the accuracy of the calls comes into question. Please make sure that all calls are entered no later than the end of the day on which the call was made. They also must be synced on that day as well if they are entered into the laptop.<font color=green><b>GUTKOMA's response on 08/22/2013</b></font>Understood<font color=blue><b>CHUDAKOB added notes on 08/25/2013</b></font>Thank you!
	South Euclid	OH	44121	8/15/2013	Window call. Asked dr what her experience has been with Intermezzo? Patients love it, but its just a matter of getting it covered. She & medical assistant Tracy said Caresource is going away when I mentioned Caresource Pa for IZ. Dr asked for more IZ savings cards,I eft pack of 10 new tear sheet cards. Butrans think of your Tramadol patients not controlled, like Scott patient profile, she has Butrans savings/ trial cards. Tracy says they use OARRS dr is very selective as to whom she writes opioids for. New MA is Caitlyn, went over Butrans formulary grid, she took notes, their 2 biggest commercial plans: med mutual & anthem. Pointed those out. OxyContin,controlled release, for your geriatric patients, broad Medicare Part D coverage, handed dr med d formulary grid. She says I do use OxyContin.
PPLPMDL0020000001					

PPLPMDL0020000001	Cuyahoga Falls	OH	44221	8/15/2013	I told dr to take a minutes before refilling vicoden and Percocet and look to see if the patient would be appropriate for OxyContin. I showed her the conversions again and asked her if she will switch patients? Dr said ok. I handed her the Butrans slide guide conversion chart and asked her to gain some clinical experience.
PPLPMDL0020000001	Cleveland	OH	44109	8/15/2013	Visited PMR-Greenwood, Harris-invited to upcoming Moufawad program, left info, requested appt. Visited Family Med.(Mougais) invited to program left Butrans.OxyContin info. IM dept Harrington-invite, info Oncology-Obrien-invite along with info
PPLPMDL0020000001	Cleveland	OH	44109	8/15/2013	Visited IM/Geriatric Dept. Left info for all Clinicians (Campbell,Dziwis,Mary Jo Slattery etc. Invited to upcoming Moufawad program. Email for appts
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	8/15/2013	Spoke with Kimase the pharmacist about all products. I asked her if she has been filling more Butrans recently? Kimase said she has three or four patients on it and she has all three doses in stock. I showed her the nancy and Scott profile and explained conversions and proper starting dose based on patient types. I reviewed insurance coverage with her. Kimase was happy to hear about Medicare D plans. Discussed OxyContin and asked her about dispensing. Kimase said that she is doing a lot of refilling of the 10, 20 40 and 60 mg doses most from pain management. I asked her if she has filled any intermezzo and she said no. Discussed indication and dosing.
PPLPMDL0020000001	Akron	OH	44305	8/15/2013	I told dr to look for those patients he is refilling on their IR opioid like tramadol. I showed him the patient profile and asked him to pause before refilling tramadol and asking himself if Butrans is a good option for the patient. Dr said he does have a lot of patients on tramadol. Dr asked about cost for a patient on Medicare and Medicaid plans. I told dr that the copy cards I just left him are for patient with commercial insurance only and do not include any federally funded program. I told him about Caresource again and the PA for it as well as the med D plans. Dr said he will continue to try and find patients for it because he has seen good results. I asked dr to take his patients uncontrolled on Percocet and put them on OxyContin and to try intermezzo for his Caresource patients who meet the indication.
PPLPMDL0020000001	Beachwood	OH	44122	8/15/2013	Presented butrans tear sheets for patient information and Roberta said she had OxyContin denied by Caresource. Vikki asked for vouchers. I reviewed requirements for butrans and OxyContin for caresource. Roberta thought the patient may do better on Butrans because they are currently on mscotin and the dr wants the patient on an extended release. Discussed senakot s for opioid induced constipation. Gave intermezzo indication and limitation of use<font color=blue><b>CHUDAKOB's query on 08/22/2013</b></font>If the patient was on MS Contin, then they already were on an extended-release. Do you know the daily dose of MS Contin the patient was on? They would only be appropriate for Butrans if they were on 80mg of morphine/day or less per the Butrans FPI.<font color=green><b>KKNOMA's response on 08/22/2013</b></font>I do not know the answer to these questions. I will ask more questions on next visit.<font color=blue><b>CHUDAKOB added notes on 08/25/2013</b></font>Ok. I only ask because it sounds like they are either wanting to titrate down or are going to prescribe a dose of Butrans that will not work.
PPLPMDL0020000001	Solon	OH	44139	8/15/2013	Reviewed start principle for OxyContin. Reviewed proper application of butrans using patient brochure. Gave intermezzo indication and limitation of use. She asked about vouchers and I referred her to butrans.com and my intermezzo.com
PPLPMDL0020000001	BEDFORD	OH	44146	8/15/2013	Spoke with float pharmacist. Sherry said she was aware of butrans but did not have many patients on butrans. I used the titration guide to to explain indication and abuse potential. Explained conversion from other pain medications. Reviewed the start principle for OxyContin highlighting the 15 and 30's when titrating 25-50%. Gave intermezzo indication and limitation of use.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	8/15/2013	Short conversation with dr while speaking with Darlene in the office. I told her that she should evaluate her patients continually taking IR opioids like tramadol and instead of titrating it to consider Butrans. Dr said she has had much better results lately and said she is glad it is working well. I asked her for more prescriptions and reviewed new insurance coverage.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/15/2013	I asked dr how things have been with titrating Butrans and if patients are responding? Dr said they are and that he recently moved a patient from 5 to 10mcg. Dr said he feels that most patients will need the 10mcg dose at some point. I reminded dr that steady state is 72 hrs and he can titrate then if necessary. I showed dr the new insurance grid for Butrans and focused on Medicare D coverage. Dr said he is glad to see more insurances picking it up. I asked dr if he has had any new starts with intermezzo and he said no. He said he attempted twice in the last month and it was too expensive for both patients. I asked dr patients on Caresource and explained the PA.
PPLPMDL0020000001	Bedford	OH	44146	8/15/2013	Spoke dr who directed me to his wife. She asked if my products were on workers comp and I presented butrans I indication and titration guide. Mentioned OxyContin and intermezzo and left information. She said she will have him review the information and let me know.<font color=blue><b>CHUDAKOB's query on 08/22/2013</b></font>I'm a little confused here. She asked a question about coverage and you presented the indication. Did I miss something? It also looks like this should have been a non-HCP call?<font color=green><b>KKNOMA's response on 08/22/2013</b></font>Agreed, this is not a well written call note. I went in the wrong door which is their back office door because this is the door I use to go in years ago. I surprised the doctor and told him who I currently worked for and what products I had. he remembered me and gave me the okay to present information to his wife because he had a room full of patients. She asked about workers comp and I said yes as I showed the titration guide and explained what butrans was.<font color=blue><b>CHUDAKOB added notes on 08/25/2013</b></font>Ok. I am now thinking that unless his wife was a nurse, MA or office manager, this probably should not have been a call. If she was a nurse, AM, or office manager, then this should have been a non-Reminded of Butrans for those Tramadol failures, invited to Moufawad program, said she will attend. OxyContin Q12h dosing along with Intermezzo for MOTNA/dosing<font color=blue><b>CHUDAKOB's query on 08/21/2013</b></font>Mark, did you show her any sales pieces? Did you help her identify specific patients for Butrans? Does she know the starting doses? These are just three questions I can think of. It is hard to know what happened on this call from our call notes. Remember we discussed being more specific about the conversation of the call.<font color=green><b>GUTKOMA's response on 08/22/2013</b></font>On that particular call, Jose told me to come on back with a total disregard for a rep.doing a lunch and another waiting in the hallway. Very chaotic, but under the circumstances I did identify a specific patient (Tramadol failure)for her. We discussed how to RX as she has prescribed in the past and PA concerns.When appropriate,I will continue to work on being more specific.Thanks<font color=blue><b>CHUDAKOB added notes on 08/25/2013</b></font>If that happens again, I might just tell her you will come back at a later time. It might be more productive.
PPLPMDL0020000001	Cleveland	OH	44109	8/15/2013	Butrans for those Tramadol failures before they start on short-acting. Asked to relay to Ray along with other RPH. Left Butrans info booklets for distribution
PPLPMDL0020000001	Cleveland	OH	44109	8/15/2013	OxyContin Q12h, Elaine said hardly fills any OxyContin since reformulation, Butrans for those Tramadol failures, she agreed to pass out Butrans info booklets. Intermezzo for MOTNA/dosing- ins. challenging at this location
PPLPMDL0020000001	Lyndhurst	OH	44124	8/15/2013	Met w pharmacist Steve Greene. OxyContin, left pharmacists guide. Q 12 h dosing, which he says HCP s are following. Butrans he has a few customers on, he has 5&10 mcg hr in stock. Left him one pack cards, one patient guide to show him what we provide for his customers. Asked Steve if he's familiar w IZ, he said he read about it in journal ad. Indication, limitations, trial/ savings flashcard left. One patient guide.
PPLPMDL0020000001	Tallmadge	OH	44278	8/15/2013	Spoke with Jo-Ann who was the floater pharmacist today. I asked her if she was familiar w Butrans and she said yes. I reviewed the dosing, schedule 3, 7 day transdermal patch and conversions. She said they had none in stock. I discussed the doses of OxyContin and conversions from IR oxycodone and Percocet. Se said she tight they had all doses in stock and fill it regularly. Introduced intermezzo indication, dosing and limitations of use due to her not being familiar with it.
PPLPMDL0020000001	Mayfield Hts	OH	44124	8/15/2013	Met w office mgr Ellen Tyransky. Both dr Isakov & Kim out. Left her with invite to Moufawad 8/21 program, she will try to get someone there but unlikely. Left newest Butrans patient profile piece for Drs Kim & Isakov & PA-C Sarah j. Left OxyContin reformulation piece, and Ellen says she will Review updates to section 9.2 of FPI which includes our abuse deterrent studies. She says Diane handles prior authorizations. When Barry & I went over to talk with Diane, she says she's ever completed a prior auth for scheduled medications. The doctors nurses will do that. Left OxyContin medicare d formulary piece and
PPLPMDL0020000001	Bedford	OH	44146	8/15/2013	Discussed opioid induced constipation and senakot s. dr asked if Medicare patients can get senakot s freeif he writes a script. I told him I will check a a pharmacy because I did not know. Asked dr if he would be able to invite some of the offices in chagrin highland to program next week and he said they do not go to programs but I should invite some of the people at Bedford hospital. Reviewed flex dosing of OxyContin and we discussed scheduling of butrans, tramadol and Vicodin.reviewed intermezzo indication and limitation of use
PPLPMDL0020000001	Cleveland	OH	44105	8/15/2013	Quick reminder Butrans for those Tramadol failures, he said he remembers" OxyContin Q12h for those Percocet patients taking Q4-6h. Intermezzo for MOTNA and dosing. Invited to upcoming Moufawad Program<font color=blue><b>CHUDAKOB's query on 08/21/2013</b></font>How do you feel this call progressed?<font color=green><b>GUTKOMA's response on 08/22/2013</b></font>On that particular call, Jose told me to come on back with a total disregard for a rep.doing a lunch and another waiting in the hallway. Very chaotic, I was talking with Dr. Lolita Agra when Dr. Rahkit walked into the room/discussion, hence I was able to give some quick reminders and invite to program. In regards to progress made, probably not very much, but under the circumstances presented that particular day, I will take it. I did learn that he is slowly taking over Dr. Agra's practice. Thnx<font color=blue><b>CHUDAKOB added notes on 08/25/2013</b></font>OK. It would probably be more productive if you spent more time selling him on the primary product and a secondary if you can, rather than giving him three reminders.
PPLPMDL0020000001	Tallmadge	OH	44278	8/15/2013	Quick message at counter and told dr to use Butrans for his patients failing or not tolerating tramadol. I handed him the Scott profile and asked him to review for starting doses. Nothing else learned.
PPLPMDL0020000001	Highland Heights	OH	44143	8/15/2013	Met with Marianne & Amanda first, the medical assistants that complete prior authorizations for dr Salama. When we told them that BWC will pay for Butrans, most of the time, Marianne says she's been having trouble with BWC. When BWC patients visit pharmacy, pharmacy tells patient they need prior auth but then BWC says they are covered without prior auth, so there's a disconnect somewhere between pharmacies & BWC. we told them other offices in having area having good luck consistently with BWC. Also updated on Medco Medicare Part d and Caresource PA. Left. Butrans & OxyContin formulary grids. Dr Salama, have you considered Butrans for your BWC patients, he responded he didn't know they paid for. Is it without PA ? Yes we responded, most should not need PA, except maybe an employer group that may require. Also Caresource with PA, & explained to dr how that would work. Transition to OxyContin, dr said don't talk to me about OxyContin, I know all about the reformulation, I will not start any new patients on OxyContin, I responded I respect that and doctor know you do have a CII option with broad Medicare Part D coverage. Intermezzo, dr asked for samples. We don't have, but have savings cards. Patient s can visit Facebook page or Intermezzo.com for printable savings. Gave Marianne HCP piece & showed 3 questions they should be asking patients. To distinguish between MOTN insomnia & sleep onset insomnia. Caresource pa is failure of one other product containing Zolpidem, Marianne
PPLPMDL0020000001	Beachwood	OH	44122	8/16/2013	Spoke with Donnie about butrans vouchers and discussed appropriate patients with dr. Reviewed OxyContin titration and flexible dosing. Asked dr if he had thoughts about the motna patient and intermezzo. He said he remembered intermezzo but has not prescribed
PPLPMDL0020000001	Warrensville Heights	OH	44122	8/16/2013	Extended invitation for butrans and left titration guide. Followed up on lunch and still no openings
PPLPMDL0020000001	Cleveland	OH	44109	8/16/2013	Talked with Tech. Rph was on phone Went over Butrans for those Tramadol failures, hasn't seen many RX/s. Asked if OxyContin savings cards were needed and went over Intermezzo for MOTNA and dosing, will relay info to
PPLPMDL0020000001	Brooklyn	OH	44144	8/16/2013	Went over OxyContin Q12h dosing along with Butrans for those LorTab/Tramadol failures. No new area prescribers, mentioned Kushnar across the street Med Ctr. INtermezzo for MOTNA/dosing
PPLPMDL0020000001	Beachwood	OH	44122	8/16/2013	Extended invitation to program. Quick window call reviewing Butrans appropriate patient profile Scott. Discussed OxyContin flexible dosing. Confirmed lunch for next week. Dr asked about intermezzo samples and I explained that we no longer sample but she can use the vouchers.
PPLPMDL0020000001	Westlake	OH	44145	8/16/2013	Met with Reggie the nurse today about office practice information and they informed me that dr Adams left and that dr below doesn't use any "of my products". I asked her if she ever heard of Butrans and she said no and that the doctors don't treat pain. They would not schedule me a Lunch cause I wasn't on the list of products commonly used in the office. I left dr below a short note to see if I could come for lunch and gave him fpi and other Butrans and OxyCotin sales materials to be reviewed.
PPLPMDL0020000001	Copley	OH	44321	8/16/2013	I asked Sue the technician what IR opioid they fell the most? She said about all of them but see a lot of vicoden. I asked if they have many patients coming in each month for their refill? She said yes they do and many have been on it for a long time. I told her about Butrans and OxyContin and the patients appropriate for each. Discussed intermezzo and gave her dosing and indication.
PPLPMDL0020000001	Brooklyn	OH	44144	8/16/2013	Invited to upcoming Butrans Moufawad program, Confirmed lunch appt. and reminded of Intermezzo for MOTNA/dosing
PPLPMDL0020000001	Akron	OH	44312	8/16/2013	I discussed with dr the Maria and Scott patient types for Butrans. Dr told me that she had a patient that could not tolerate Butrans last week and has to discontinue it. I asked what the specifics were and she said the patient had too much nausea and couldn't continue. I asked dr if she will continue prescribing and she said yes. Gave her the new insurance grid. Nothing else learned
PPLPMDL0020000001	Akron	OH	44312	8/16/2013	Saw dr in hallway and told him I want to discuss Butrans with him to see how things have been going. Dr said he's really behind and can't talk but said his patients are doing well on it. Nothing else learned
PPLPMDL0020000001	Westlake	OH	44145	8/16/2013	I met w/ ADON, Brenda Amburgey. I introduced myself and Purdue's Nurse Educator program. Unbranded and Branded in-service topics were disc
PPLPMDL0020000001	Westlake	OH	44145	8/16/2013	I made a drop-in visit to meet w/ D.O.N., Susan William to see if she is still interested in Purdue's Nurse Educator Program. I spoke w/ the receptionist, who informed me that Sue was in a meeting w/ a family and not available at this time. I left Purdue educational offerings and my BC.

PPLPMDL0020000001	Beachwood	OH	44122	8/16/2013	Asked Laura if she heard anything from dr yokel about his attendance at the program and she said he would not be able to attend. Dr came by desk while I was talking to Laura and vikki and confirmed he would not be able to attend Butrans program. I reminded him about OxyContin conversion from Percocet.
	Westlake	OH	44145	8/16/2013	Spoke with Kyle the pharmacist (Rosie and Stacy the techs) we discussed Butrans. She said a dr Nicholas just wrote a Butrans 10mcg for a patient and used a coupon. We reviewed titration, dosing and supplemental pain medicines if need be based on the naive studying was reviewing. Did review schedule 3 opioid and that it still had abuse potential. Also discussed how to remove and discard Butrans if the patient needed titration. Intermezzo-pharmacist seemed knowledgeable- went over the dosage for men and women and the indication. She said she saw a script come thru on that too from a doctor she couldn't remember his name. And she mentioned a patient that came in on Tramadol that she thought could have been a Butrans patient. When I pulled out the David proffier piece she pointed to 400 MSG of Tramadol. I told her the tampering back to the 300 mcg then start on the 10mcg is what's in our fpi. I also pointed out that perhaps that patient would be more a candidate for OxyCotin. And she said oh no not that. When I asked why she said I don't no. I told her that OxyCotin is a q 12h opioid single entity product and with the 7 diff doses available maybe that would manage her pain? Pharmacist said true. Left her savings card leave behind material. And a Butrans naive study.
PPLPMDL0020000001	Orange Village	OH	44122	8/16/2013	Extended invitation for butrans and left titration guide. Followed up on lunch and still no openings
PPLPMDL0020000001	Beachwood	OH	44122	8/16/2013	Extended invitation for butrans and left titration guide. Followed up on lunch and still no openings
PPLPMDL0020000001	Cleveland	OH	44113	8/16/2013	Confirmed her attendance to Moufawad program, asked for those Tramadol/Lortab failures, she had a new start yesterday. Intermezzo for MOTNA/dosing
PPLPMDL0020000001	Woodmere	OH	44122	8/16/2013	Spoke with tenashia about Butrans prescriptions and she said she has not seen any. I discussed the patients tear sheet and appropriate application of Butrans and preparation of application site. Reviewed dosing of OxyContin. Gave Intermezzo dosing, indication and limitation of use
PPLPMDL0020000001	Brooklyn	OH	44144	8/16/2013	Invited to upcoming Butrans Moufawad program, doesnt normally have time for programs, but will check schedule. Reminded of Butrans for those Tramadol failures
	Berea	OH	44017	8/16/2013	Spoke to Shirley the nurse regarding what she thought the doctor thought of OxyCotin and Butrans. Shirley has been with doctor for years, shared with me that he doesn't write Butrans and very little OxyCotin. I asked if he treated patients with the kind of pain that requires around the clock pain relief and she said of course. I have her the Butrans indication and asked if dr ever used patch technology and she's aid hardly ever. I asked how receptive she thought he was to trying something new. She said he does a lot of reading on new products but is very price concerned so if its expensive he won't do it. I asked if she thought 15 to 25 dollars sounded expensive and she said not really-depends. Quick review of savings programs for Butrans. Left invite for doctor along with a study.
PPLPMDL0020000001	Akron	OH	44319	8/16/2013	Saw dr at window as he came in for the day. I showed him the oxycontin conversion guide and asked him if he has patients on IR oxycodone around the clock for 3+ months? Dr said he probably does. I asked him if it made sense to switch them to a q12h oxycodone? Dr said that is when he will usually switch them to the extended release. I asked for his continued business and told him about the copay cards. Showed dr the Butrans placebo patch and asked him to use it for his NSAID or tramadol failures. Dr said ok. Nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44113	8/16/2013	Confirmed attendance to Upcoming Butrans Moufawad program. Asked for those LorTab failures, he said Deb/Rhonda are confident prescribers. Reminded of Intermezzo for MOTNA/dosing
PPLPMDL0020000001	Cleveland	OH	44113	8/16/2013	Went over Intermezzo, MOTNA/dosing. Dr. said he is prescribing. Went over Butrans, Dr. Is not prescribing narcotics. Requested to be speaker
PPLPMDL0020000001	Beachwood	OH	44122	8/16/2013	Spoke with pharm tech about butrans appropriate site application preparation. Discussed doses of OxyContin. Reviewed indication and limitation of use of Intermezzo
PPLPMDL0020000001	Cleveland	OH	44113	8/16/2013	Confirmed attendance to upcoming Butrans Moufawad program. Said she is looking forward to hearing Dr. speak. Reminded of Intermezzo for MOTNA/dosing
PPLPMDL0020000001	Cleveland	OH	44125	8/19/2013	Asked to recommend Butrans for those appropriate patients (Tramadol Q4-6 or short-acting) Tech would pass along Butrans patient info booklets to distribute. OxyContin Q12h along with no savings cards needed.
PPLPMDL0020000001	Cleveland Hts	OH	44118	8/19/2013	Asked Rph/tech if they would distribute/Recommend Butrans (patient info) to appropriate patients. They agreed. Reminded of Dr. Harris new starts. They said, havent seen any RX's yet, but hope to see soon
PPLPMDL0020000001	Cleveland	OH	44195	8/19/2013	MSL introductory email and phone call to Ms. Donna Lach, new study coordinator taking over responsibilities for OTR3001. Requested in-person meeting with Ms. Lach and Dr. Appachi.
PPLPMDL0020000001	Cleveland	OH	44195	8/19/2013	MSL email communication to Cleveland Clinic Team regarding Pain Awareness Month flyer and to request in-person meeting with site champion to discuss OTR3001. Response pending as of 8/23/13.
PPLPMDL0020000001	Richmond Heights	OH	44143	8/19/2013	I met w/ Sheila Harris, an in-service on constipation was scheduled for Sept. 13th @ 2PM
	Mayfield Heights	OH	44124	8/19/2013	No HCP s available to come to window says Denise. Note: Gina Savoca has been out due to illness. Reviewed core messages OxyContin Butrans. Left one pack Butrans cards. 2 Senokot S which Denise ( OTC, narcotic, branded drugs) coordinator. Denise asked for Senokot S coupons, as she says HCP s like Senokot S but its so expensive for their patients. Gave her HCP order card & told her id bring 2 mre boxes Senokot S next visit. Reviewed formulary updates for OxyContin & Butrans. Left grids with Denise. Left OxyContin reformulation piece for dr yap, dr Laham, dr Dews and CNP Gina s. ( next time include dr Leizman) the group closes promptly at 4!!
PPLPMDL0020000001	Garfield Hts	OH	44125	8/19/2013	Left OxyContin info conversion/titration guides for surgeons Email/leave info/cards suggested for appts or in-services
	Beachwood	OH	44122	8/19/2013	Spoke with staff about butrans titration and supplemental analgesia. Reviewed OxyContin flexible dosing and start principle. Staff said there is not a huge need for sedative hypnotics but I reviewed dosing and administration and reminded them that this is a small segment of the population.
PPLPMDL0020000001	Fairlawn	OH	44333	8/19/2013	Spoke with Gary about all products. Discussed the patient profile Scott and discussed proper initiation dose and titration. Gary said he has seen a couple come through since I was there last. He said he believes the patients started on the 5mcg dose and has the 5 and 10mcg in stock. Discussed the abuse deterrent studies for OxyContin and reviewed dosing. Intermezzo indication and dosing. Gary has not filled any.
	Cleveland Hts	OH	44118	8/19/2013	Dr. opened up with PA's concerns, Said not a easy process' has done about 5-6 in the last 30days, a couple of rejections that he has to resubmit, Thanked him for his persistence. Still waiting for feedback from patients. Reminded of Titration. OxyContin Q12h and Intermezzo for those MOTNA/dosing<font color=blue>-cb>CHUDAKOB's query on 09/02/2013</font>-Mark, did you delve any more into the plans that got rejected? This may have shown him that you are interested in ensuring this doesn't continue.<font color=green>-cb>GUTKOMA's response on 09/03/2013</font>-He said, he figured out what was causing the rejections, so i didnt further pursue. But, i will follow up on next visit. Thanks<font color=blue>-cb>CHUDAKOB added notes on 09/05/2013</font>-OK. That is good news. It appears you are making nice progress with him. Keep up the good work
PPLPMDL0020000001	Akron	OH	44303	8/19/2013	Spoke with rod on all products and asked him if he has had any more Butrans prescriptions since th first one? Rod said that dr Dmitri's patient came back for a refill of Butrans and is still on the 5mcg dose. I asked if the patient gave any feedback and he said the patient did tell him that it is working well. Reviewed the Scott profile and discussed appropriate starting dose, initiation and titration and conversions. Spoke with him about the OxyContin abuse deterrent studies and discussed how much he is filling. Rod said that he typically gets the same patient in each month for their refills and many come from Lababidi. Intermezzo dosing and indication and rod said he has not filled any and if its not on Medicare or Medicaid he probably will not see any. Told him about Caresource PA.
PPLPMDL0020000001	Fairlawn	OH	44333	8/19/2013	Caught dr at front counter and showed him the Butrans initiation and titration guide and told dr that he should use Butrans for his patients failing or not tolerating the IR opioids. Dr said he remembers Butrans but hasn't used it. Dr said he will review the guide. Nothing else learned.
PPLPMDL0020000001	Parma	OH	44129	8/19/2013	Quick window call with dr about flexible dosing of OxyContin and the need to titrate 25-50%. Asked dr to think if butrans for patients like nancy.
PPLPMDL0020000001	Garfield Hts	OH	44125	8/19/2013	Discussed Scott profile, agreed he has patients like profile. Asked for those Tramadol/Ultram failures, went over Initiation/Titration. Said he has a patient in mind that he will try. OxyContin Q12h for those Percocet patients that are Q4-6h. and Intermezzo for MOTNA/dosing
PPLPMDL0020000001	University Hts	OH	44118	8/19/2013	Window call, invited to upcoming Butrans Moufawad program, said he doesnt go to many programs, but will keep it in mind. Asked for those Tramadol/Ultram failures, said present Butrans patient doing well.
PPLPMDL0020000001	Warrensville	OH	44122	8/19/2013	Asked dr about his comfort level with prescribing Butrans since he started with south point. He said he is getting more familiar with the plans but he has not prescribed yet. I extended an invitation to him but he was unsure if he would attend. Reviewed start principle. Asked if he thinks of motna of motna as a treatable problem
PPLPMDL0020000001	Cleveland Hts	OH	44118	8/19/2013	Discussed OxyContin Q12h with Dave RPH. Along with Butrans for those Tramadol failures, saw an RX recently from Dr. Harris and Intermezzo for MOTNA/dosing. Requested Trial/Savings CardsGina-Tech, Shantee-tech
PPLPMDL0020000001	Cleveland Hts	OH	44118	8/19/2013	Quick Butrans reminder (Tramadol/Ultram failures). Dosing. Dr. said to book appt. to further discuss. Secured appt for Nov 21st. Left Butrans/Intermezzo
PPLPMDL0020000001	Akron	OH	44310	8/19/2013	I asked dr what he is typically doing for his patients that need more than what tramadol can offer? Dr said he will either go to vicoden or Butrans. I asked him how he decides on which to prescribe? Dr said. A lot depends on cost. I showed dr the commercial, Caresource and Medicare D plans. I told r rot choose Butrans for those patients and dr said ok and that he forgets how well it covered.
PPLPMDL0020000001	Parma	OH	44129	8/19/2013	Reviewed flexible dosing and start principle of OxyContin. Discussed proper application of butrans and application site preparation. Reviewed motna dosing and limitation of use
PPLPMDL0020000001	Brooklyn	OH	44144	8/19/2013	Talked with nurse Carol, Went over Butrans, Tramadol failures, 7 day transdermal. Intermezzo for MOTNA/Dosing. Invited Dr. To Butrans Moufawad program. Left info
PPLPMDL0020000001	Cleveland Hts	OH	44118	8/19/2013	Butrans reminder for those Tramadol/Ultram failures, along with OxyContin Q12h
	Westlake	OH	44145	8/19/2013	Charting Continued from 8/16/1 met w/ ADON, Brenda Amburgey along w/ the DON, Nancy Hodges. I introduced myself and Purdue's Nurse educator program. Nancy and Brenda were excited to hear about Purdue's program. Nancy said, "pain is part of their advance in excellence goal and explained that the facility quality measures are climbing."This 166 bed facility is made up of LTC,skilled and 15% Hospice. The D.O.N informed me that 26 of their beds were sold." Point Click computer system is used for documenting Pain Assessment every shift. The Wong baker pain scale is used.80% of residents are currently being treated for pain. No standard pain medications are used. Dr. James Wang is the Medical Director and they have NP's on staff as well.The CPP is ICP (institution Care Pharmacy)in Tiffin.In-Services were scheduled for 9/20 on pain, 9/27 on MDS and a Butrans luncheon for NP's
PPLPMDL0020000001	Fairlawn	OH	44333	8/19/2013	Handed dr the OxyContin abuse deterrent information and told him to review. I asked dr if he is having success taking patients uncontrolled on Percocet and moving them to OxyContin? Dr said OxyContin works well for his patients. I showed him the conversions and asked him to continue using the q12h oxycodone.
PPLPMDL0020000001	Akron	OH	44304	8/19/2013	Short discussion at counter about the new abuse deterrent studies for OxyContin and told him to review. I showed him the OxyContin start principles and quickly reviewed. I asked him to continue switching patients from Percocet to OxyContin when they meet the indication. Butrans Scott profile.
PPLPMDL0020000001	Mayfield Heights	OH	44124	8/19/2013	Met w pharmacy mgr Sirisha. First presented OxyContin pharmacists guide. Went over 7 doses available & recommended dosing of q12 h. Most area HCP s are following q 12. Butrans no utilization.she had Butrans on shelf in past, it expired. She's surprised Hillcrest pain management is not writing Butrans. I responded the group with Dr Dews, Yap & Laham, do use Butrans and their patients must not be customers of your pharmacy. Should patients inquire, here's a patient guide & savings flashcard for your information. Intermezzo, she was force shipped a box of each strength when product launched, about ready to expire. Left patient guide, savings flashcard.
PPLPMDL0020000001	Richmond Heights	OH	44143	8/19/2013	I made a drop-in visit to speak w/ Joan Southard and schedule an in-service on Constipation. I spoke with the receptionist, who informed me that she was waiting for an important phone call. I left my BC
PPLPMDL0020000001	Cleveland	OH	44106	8/20/2013	Talked with Marge, followed up with OxyContin patient essential sats, none distributed yet. Told her about discussion in Pain ctr. in regards to Butrans being utilized more, will stock when she sees RX's
PPLPMDL0020000001	East Cleveland	OH	44112	8/20/2013	Intro. Went over Butrans for those Tramadol/Ultram failures. Dr. said not prescribing any narcotics. Intermezzo for the MOTNA/Dosing. Said she will consider, has many patients complaining of MOTNA and sleeping problems
	Parma	OH	44129	8/20/2013	Myra said she is thinking of coming to the program with another pa on vermillion. She said she is having success with butrans and i checked with the staff and they said they do not have any issues in need of resolution. I asked what prompted her to use butrans for her last patient and she said the amount of ir they were using. I confirmed her use in appropriate patients and asked her to think of patients having gi issues on NSAIDs also. She said she will not write OxyContin and I said i understand but i wanted her to know about OxyContin because she will surely see patients in her practice on OxyContin. Myra is having success in both the nursing home and the office with intermezzo but when i confirmed with the office they said they have not seen a script of intermezzo in awhile.
PPLPMDL0020000001	Cleveland	OH	44106	8/20/2013	Fellow Intro- Discussed OxyContin Q12h- he reiterated the strong confidence in efficacy. Went over Butrans for those Tramadol/Ultram failures before they start on short acting, reiterated Dr. Hayek's overall thoughts on narcotics. Believes pain still needs to addressed, asked if he would find appropriate patients, he agreed
PPLPMDL0020000001	Akron	OH	44308	8/20/2013	MSL email communication with Dr. Friebert and Ms. Tonni regarding pain awareness month flyer. Order submitted to PPLP for flyers.
PPLPMDL0020000001	Parma	OH	44129	8/20/2013	Delivered invitation. Office has been in training for a week and says they will note be seeing reps for awhile. Left invitation guide for Butrans
	Parma	OH	44134	8/20/2013	Dr said he would attend program. Dr said he has seen Butrans change people's lives because they are not in pain and they are not thinking about their pain every time they take a pill. Dr said his OxyContin patients are doing well and reminded him of the dosing. He expressed an interest in trying intermezzo but he has to find the right patient type. Dr would like more senakot so his patients will know what to buy at the store.
PPLPMDL0020000001					



PPLPMDL0020000001	Parma	OH	44129	8/20/2013	Confirmed that dr will remain at this location. Cancer center not allowing samples per change in policy. Left OxyContin literature
PPLPMDL0020000001	Westlake	OH	44145	8/20/2013	Spoke with Lisa ma. Dr Ravi schedules lunches at Ohio medical. Is in westlake 2x a week and middleberg. Left Butrans naive study behind for doctor to read, brief recap with Lisa.
PPLPMDL0020000001	Westlake	OH	44145	8/20/2013	Dr could not see me today, spoke to the ma about office protocols. They said, "I'm sorry, but I need to cancel the in-service scheduled for today, State and Corporate are back in the building again." I will reschedule when you come for the constipation is-service on 9/10.
PPLPMDL0020000001	Westlake	OH	44145	8/20/2013	The ma Pam and Megan said the doctor doesn't come into the center often.
PPLPMDL0020000001	Cleveland	OH	44106	8/20/2013	Had apt. with Anes/Pain dept. Fellows/Attendings (Hayek,Sahgal,Drummond,Zaky,ChanDiscussed OxyContin/Butrans along with Fellow Journal opportunity
PPLPMDL0020000001	Cleveland	OH	44122	8/20/2013	I rec'd a phone call from Francine Young in Staff Development. She said, "I'm sorry, but I need to cancel the in-service scheduled for today, State and Corporate are back in the building again." I will reschedule when you come for the constipation is-service on 9/10.
PPLPMDL0020000001	Westlake	OH	44145	8/20/2013	Saw Christy the office manager- she informed me that October dr yonan will change his hours. Send back christy with a transdermal demo patch and asked her to see if the doctor knew what it was. She tried but dr was in w a patient for a long time and we decided to try again another day.
PPLPMDL0020000001	Cleveland	OH	44106	8/20/2013	Discussed OxyContin Q12h- Dr. said he likes OxyContin for those patients he can trust, prescribes alot less narcotics overall. Likes Butrans, I reiterated that it can be misused/abused similar to other CII's. Went over importance of titration after 72hrs, said he will keep that in mind
PPLPMDL0020000001	Cleveland	OH	44106	8/20/2013	Discussed Butrans for those Tramadol failures, Initiation/Titration along with supplementing prn with short acting. Dr. likes delivery system, reiterated Butrans has the same misuse/abuse as other CII's. OxyContin Q12h
PPLPMDL0020000001	Stow	OH	44224	8/20/2013	Spoke with Christina the pharmacy manager about all products. Christina said that they have many patients on Butrans and she has all doses in stock. She said they have seen more scripts for the 10mcg than any other. I asked about how long it takes to get a dose in if they are out? Christina said if they get the prescription in by 8pm that day they will have it next day for a schedule 3. Christina said that the schedule 2 medicines take about 48 hours and will need to receive the prescription by Wednesday at 8pm to get it in by Friday. I discussed OxyContin dosing he told her about the conversions and how I educate patients on appropriate dosing and titration. Christina said that is good because she sees many patients getting their Percocet refilled and increased all the time. Discussed copy cards and insurance. Intermezzo dosing and indication which Christina said she had not
PPLPMDL0020000001	Cleveland	OH	44106	8/20/2013	Discussed Butrans for those Tramadol/Ultram failures, He has some experience at Emory. Went over Initiation/Titration said he will look to start some new patients as he becomes more active in treating patients. OxyContin Q12hFellows journal club monthly/mondays
PPLPMDL0020000001	Cleveland	OH	44106	8/20/2013	Discussed OxyContin Q12h, Dr. reiterated his confidence in prescribing OxyContin for those Oncology/palliative care patients. Went over Butrans Initiation/Titration and importance of that 72hr titration period, Dr. said he agrees that he still prescribes alot of Vicodin/Percocet even know long term use of narcotics provides no clinical benefit. He speaks around the world on that topic. Asked him for another evaluation of Butrans and he agreed he would consider looking for more patients because the delivery system does provide benefits. I reiterated Butrans is similar to other CII's and has the same misuse/abuse potential
PPLPMDL0020000001	Westlake	OH	44145	8/20/2013	Met with office manager, she helped me schedule few apcs. doctor is here everyday till 4ish. Does do detail para and lunches. She new little on Butrans. Explained its indication and showed the titration booklet to show how to start if they were on something else.<font color=blue><b>CHUDAKOB's query on 09/02/2013</b></font>-Lisa, this sentence "Does do detail para and lunches" was in your call note. What does it mean?<font color=green><b>BARTOLI's response on 09/02/2013</b></font>Does do detail appointments and lunches. She knew little on Butrans.<font color=blue><b>CHUDAKOB added notes on 09/03/2013</b></font>-Ok. I didn't understand what that meant. Thanks.
PPLPMDL0020000001	Munroe Falls	OH	44262	8/20/2013	I asked dr if she has had success with Butrans when she used it back in May? Dr said she did have success and the patients are happy. I asked her why she stopped using it? Dr said she doesn't know why and she guesses she just forgot about it. I told dr to focus on two patients. Tramadol or vicodin patients around the clock that are not getting enough pain relief or not tolerating them to use Butrans as the solution. Explained the patient profiles and dr said she will get back into using it. Reviewed the OxyContin start principles discussed them and asked her opinion. Dr said she didn't think about titrating down and agrees with all of it. Dr wanted a copy of it so kept the conversion and titration guide. I asked for her Percocet business.
PPLPMDL0020000001	Parma	OH	44129	8/20/2013	Discussed start principle and dr said that it was not right and she was trained to not do anything for 3 days because that is how long it takes to know the effects. I mentioned the 25-50% titration and she said that was wrong because it depends on how the patient is doing with their current dose. She said she knows more about palliative care than other doctors because of her training in Canada. She her patients are beyond butrans and she verified that by looking at the titration guide. She liked that concept of intermezzo and will keep it in mind. She liked the fact that I provided h with Senokot samples and she said she hates when the pharmacy switches to laxatives or stool softener. She said she will keep using lots of OxyContin because it works and she hates Percocet or ir because patients don't need 2 opioids.
PPLPMDL0020000001	Uniontown	OH	44685	8/20/2013	I told dr to think of herself in an exam room with a patient on tramadol around the clock and the patient needs a dose adjustment. I told her that she has a decision to make which is to titrate tramadol, prescribe another IR opioid or to look at Butrans as a solution. I told dr that when the patient has a condition that is chronic in nature, Butrans is the solution she needs to choose for week long release of burprenorphine. Dr said ok. I told dr to allow Butrans to prove itself clinically. Dr said ok. I gave her the conversion guide for OxyContin and showed her the conversion from IR oxycodone.
PPLPMDL0020000001	Euclid	OH	44117	8/20/2013	I made a drop-in visit to meet w/ Ruth Rossini Education, and schedule an in-service on Oxycontin. I spoke w/ the receptionist, Hilde. Ruth was not available. I left the Oxycontin titration Guide and my BC
PPLPMDL0020000001	Westlake	OH	44145	8/20/2013	Scheduled breakfast. Ma told me that the hrs between westlake and Lakewood vary and to call first. Asked if she knew Butrans and she did, reviewed how to start a patient from under 300 Tramadol to 5mcg of Butrans. Used 7 day titration visual aid and left it behind.
PPLPMDL0020000001	Westlake	OH	44145	8/20/2013	Met the pharmacist- review of Butrans. He didn't know much about it, and said he hasn't seen a script in a while. Pointed out starting dose for op naive patient referencing Butrans study, titration a min of 72hours/3days, steady state...and pointed out the graph in the study that shows the percentage of patients in open label that had pain reduction. Referenced the higher mgs on the morphine equiv chart and bridged to OxyContin. Does stock limited doses, but didn't tell me which. Reviewed the q12h and that it was not bid dosing, nor prn dosing, nor for acute pain. Discussed the savings program for both products.<font color=blue><b>CHUDAKOB's query on 09/02/2013</b></font>-Lisa, just a reminder to please not use abbreviations excepts for approved abbreviations like MOTN or Dr. and q12h. Most other things should be written out.Thanks Lisa!<font color=green><b>BARTOLI's response on 09/02/2013</b></font>-Ok<font color=blue><b>CHUDAKOB added notes on 09/03/2013</b></font>-Thank you.
PPLPMDL0020000001	Westlake	OH	44145	8/20/2013	Spoke to Megan nurse- review on Butrans. How to start and titrate along with showed a sample patch demo no real medicine.
PPLPMDL0020000001	Cleveland	OH	44112	8/20/2013	Went over OxyContin Q12h, Dr. is not prescribing much of anything anymore, semi-retired, Dr.Mariene has taken over practice. Butrans for those Tramadol failures and Intermezzo for MOTNA/dosing.
PPLPMDL0020000001	Euclid	OH	44117	8/20/2013	I made a drop-in visit to speak w/ Kathy Nemeth to schedule an in-service on Butran's. I spoke w/ the receptionist Joe Nathan, who paged Kathy, She did not respond to her page. He said, " I think she is in a meeting." I left my BC and Butran's Material
PPLPMDL0020000001	Parma	OH	44129	8/20/2013	Window call, asked dr if he would be able to attend the program and stressed this would be a good opportunity to learn from a peer and I cited some of the speakers highlights. Dr said probably not and I asked Debbie if she had an opportunity to review the med 80 information she asked about last time. She had briefly reviewed. Reminded her of intermezzo dosing and administration
PPLPMDL0020000001	Westlake	OH	44145	8/20/2013	Dr. Duncan at a funeral out of town this week. Spoke to kathy and rita the rn. They told me to return to schedule a lunch, too busy. Asked if they knew anything of Butrans the transdermal patch, and she said she heard of it but not much. showed her a sample of the non medication patch- she thought it was very thin. Told her the mcg and apro patient types. Rita asked what happened to Intermezzo and managed Care. I asked if they had a problem recently and what? She said that the doctors stopped writing it cause they can't get it thru. I explained the savings program for commercial insured patients- RN did not know if the patient was caresource. Second- focused on the indication and 3t status on their plans which means usually if they fail generic ambien then intermezzo with the appropriate middle of the night awoken with 4 hours of sleep remaining patient.
PPLPMDL0020000001	Westlake	OH	44145	8/20/2013	Introduction to dr. He asked what's my problem today, I said my problem is that I'm new and I haven't met you. He laughed. He said Purdue, reading name badge. He was unfamiliar with the company. I told him we specialize in treatment options to help patients manage their pain. I held up a Butrans 10mcg demo patch and asked him if he knew what it was. He said ummmm a fentanyl patch? I said doctor I can see I need to spend more time here. I explained what Butrans is and indication which he said he treats those types of patients. I also explained that butrans is not drugesic and there were no head to head studies. He said he never write it cause no one covers it. I said if that was your reason before he should start writing it because...explained the commercial savings program. I told him when he has Tramadol patients that are not being controlled this was a schedule 3 extended release option for their chronic pain that will require analgesia for an extended period of time. Left the opioid study. OxyCotin was quick- but he did know more about it than Butrans.
PPLPMDL0020000001	Cleveland	OH	44119	8/20/2013	I met w/ the Administrator, Nancy Sugarman and D.O.N., Tracy Orsic. I introduced myself and Purdue's Nurse Educator program. Unbranded and branded educational in-service topics were presented. This 100 bed facility is comprised of LTC, Skilled and hospice. The also have assisted and independent living. Tracy said, "we have a fair amount of residents that we treat for pain. Tracy said, we do not use a lot of Oxycontin." When asked what do they use?, she said, "its whatever the Doctor orders." They currently have no computerized system in place for pain documentation. Pain scale used is numeric and wong baker. The medical director is Joseph Karimipil. NP's are also used. CPP is Accuscripts formerly Pharmed Corp. Nancy said, "they just changed 2 wks ago, but the office is the same." Nancy informed me that they work closely w/ hospice of the Western Reserve and also use them for pain management referrals. She did show interest in Purdue's NE program. Nancy and Tracy will talk it over and get back in touch w/ me.PAP handouts and my BC were left w/ them.I stopped by Dr. Karimipil's Office, he would not be in until the afternoon. The recept. informed me that they had info on Butrans from a Rep, who no longer works for Purdue from a long time ago. I left Butrans information and my BC.
PPLPMDL0020000001	Uniontown	OH	44685	8/20/2013	I asked dr if she prescribe IR opioids like tramadol or vicoden? Dr said she does but told me that she told me before that they are only prescribed for acute pain and she will not prescribe ER opioids. I reminded dr that Butrans is a schedule, 7 day controlled release product. Intermezzo indication, dosing and limitations to use. I have her the patient profile packet and asked her to prescribe.
PPLPMDL0020000001	Bedford	OH	44146	8/20/2013	Updated dr on program attendees. Provided Butrans patient tear sheets to other office location and discussed their use. Asked dr if he thinks there are patients on Percocet who might be ready for ER oxycodone. Dr said sure. Reminded him of indication and limitation of use of Intermezzo. Discussed senakot for opioid induced constipation
PPLPMDL0020000001	Parma	OH	44129	8/20/2013	Dr had people in his office and was busy but staff said he would be around wed afternoon even though they don't usually work wed. I asked dr if he would be able to attend the program and he said no. I told him I will follow up tomorrow to find out more about his latest butrans patient
PPLPMDL0020000001	East Cleveland	OH	44112	8/20/2013	Invited Latoya to upcoming Butrans Moufawad program, Hasnt had the opportunity to recommend/distribute any Butrans patient info booklets. OxyContin Q12h- Mentioned Dr. Smith as Key prescriber
PPLPMDL0020000001	Cleveland	OH	44113	8/21/2013	Discussed Butrans in the Assisted Living/elderly setting, likes delivery system along with Ed RPH-St. Augustine but cost/ins. coverage is the major issue. Went over Initiation/Titration. Dr. stated their is a huge treatment gap in treating pain. Asked if he would consider Butrans in filling that gap? and he would consider. OxyContin Q12h, confident treater
PPLPMDL0020000001	Parma	OH	44129	8/21/2013	Asked dr what is keeping him from prescribing butrans and he said he has does not remember. I reminded him that there are patients with gi issues or are on round the clock ir that need a dose adjustment and these are butrans patients. Dr said he knows and will try harder. Reminded him that he has Percocet patients that are not managed and they are candidates for OxyContin. Reviewed dosing options and appropriate patients for intermezzo-<font color=blue><b>CHUDAKOB's query on 09/02/2013</b></font>-Marcia, to focus on patients with GI issues will certainly greatly narrow the patient selection for Butrans. Stay focused on the patient profiles, mostly the tramadol patients but the data should help you determine that. Does he believe the product works? That is the first step.<font color=green><b>KENNOMA's response on 09/03/2013</b></font>-Ok!y I will give him the clinical data and ask about the inclusion criteria<font color=blue><b>CHUDAKOB added notes on 09/05/2013</b></font>-Just trying to not narrow your patient focus. While GI issues are a place for Butrans, we don't want the physician focusing on only those patients.
PPLPMDL0020000001	Akron	OH	44333	8/21/2013	Quick call in Fairlawn. Reviewed patient types they need to look for when it comes to Butrans and asked his opinion about promoting Butrans to orthopedic surgeons like Scott Miller? Dr said that following surgery ORS drs will prescribe 4-6 weeks of an IR opioid and then the patient will come to see a pain dr like him for follow up therapy. Dr said he will not use Butrans because ORS drs are trying to get away from chronic pain therapy because of their speciality and because of 58 93. Dr said OxyContin is more applicable. I asked dr to continue preaching all products including intermezzo and reviewed dosing and indication.
PPLPMDL0020000001					



	Solon	OH	44139	8/21/2013	Extended an invite to dr for butrans program and he said he would not be able to attend. Discussed OxyContin broad formulary coverage with formulary grid and reviewed lower dose conversion of Percocet patients to OxyContin. Provided Butrans reminder with nancy profile piece
PPLPMDL0020000001					Quick hallway call. Asked if dr would be attending the butran program and she said no. Asked her to review the OxyContin dosing and conversion for her Percocet patients.
PPLPMDL0020000001	Parma	OH	44129	8/21/2013	Confirmed Linda attendance at the program. She said she is not familiar with butrans and the practice does not write OxyContin. I reviewed Intermezzo dosing and administration.
PPLPMDL0020000001	Parma	OH	44129	8/21/2013	Caught dr in hallway and showed him the Scott profile for Butrans and the label update for OxyContin. I asked dr to continue prescribing Butrans and to initiate early like in patients like Scott. Dr said he likes and wants to get his patients on long acting opioids as soon as possible. Dr said he will review the label update. I asked him if it makes sense for him to prescribe OxyContin for his patients on Percocet? Dr said yes for sure and said he did two of them this morning.
PPLPMDL0020000001	Cleveland	OH	44113	8/21/2013	Visited Anes/Pain, Ortho 5th floor -attempted to follow up with Dale/Carlos in regards to in-service on floor. Dale was unavailable. left Butrans/OxyContin info for Daoud/Shen. Visited in-patient pharmacy-Left card for Jeff
PPLPMDL0020000001	Cleveland	OH	44195	8/21/2013	Visited CCF W.O Walker bldg. Pain/Anes dept. left OxyContin/Butrans info. for Anne Crawford, Stanton-Hicks, Leizman. Neuro C-25- Left Butrans info Dr.Bamford/Left Butrans FPI's with Michaela- for fellows. Confirmed Dr. Chang's attendance to program
PPLPMDL0020000001	Valley View	OH	44125	8/21/2013	Talked with Aaron in regards to upcoming Butrans Moufawad program, he hopes to attend
PPLPMDL0020000001	Cleveland	OH	44102	8/21/2013	Attended Butrans/Moufawad program
PPLPMDL0020000001	Stow	OH	44224	8/21/2013	Gave dr the Scott profile in the hallway for Butrans and asked him to prescribe more Butrans for patients like Scott. Dr said he had a lot more vicoden patients as referrals and asked about dosing for those patients. I showed him the nancy profile and explained the starting doses and conversions. Dr said thanks and will continue prescribing.
PPLPMDL0020000001	Cleveland	OH	44113	8/21/2013	Visited Pharm. Left card/Butrans/OxyContin info for Jeff,RPH. Mike is mainly at Fairview-does see reps at that location on occasion
PPLPMDL0020000001	Cleveland	OH	44113	8/21/2013	Left info and Card for appt with Jeff/Mike. Tech suggested emailing appt. request. Doesnt really meet with reps unless something is set-up, does look at info
PPLPMDL0020000001	Cleveland	OH	44113	8/21/2013	Attended Butrans/Moufawad program
PPLPMDL0020000001	Cleveland	OH	44109	8/21/2013	Attended Butrans/Moufawad Program
PPLPMDL0020000001	Akron	OH	44320	8/21/2013	I asked dr if she could identify a few patients that she is continuing to refill on tramadol or vicoden and evaluate if they would be candidates for Butrans? Dr said she will and does continue to keep Butrans in mind for patients on short acting pain killers. I reminded her about steady state, titration and conversions. OxyContin new labeling information and asked her to review. Asked dr to continue considering OxyContin for those Percocet patients who are failing or can't tolerate it. Reviewed intermezzo dosing and indication.
PPLPMDL0020000001	Akron	OH	44320	8/21/2013	Reviewed OxyContin labeling change and asked her to review and prescribe OxyContin for patients of hers needing a dose adjustment on Percocet or not tolerating it. Discussed conversions and titration. I asked her to use Butrans for patients needing a dose adjustment on tramadol or low dose vicoden and reminded her of the conversions and copy cards. Dr said ok and she will look for more patients.
PPLPMDL0020000001	Parma	OH	44134	8/21/2013	Spoke with Erica about butrans titration guide and the use of supplemental analgesia. Reviewed the start principles of OxyContin. She had to get back to patients so I was not able to discuss Intermezzo
PPLPMDL0020000001	Parma	OH	44134	8/21/2013	Spoke with pharm tech about butrans prescriptions and Lisa said they had a few but not that many. Reviewed proper disposal of butrans. Discussed titration of OxyContin and start principle. Asked if they filled a lot of sedative hypnotics and she said yes. Discussed Intermezzo indication and limitation of use.
PPLPMDL0020000001	Independence	OH	44131	8/21/2013	Dr recited intermezzo dosing and I told him that was correct and if he had written for a patient with motna and he said they could not get it approved. I told him OxyContin had broad coverage and his Percocet patients needing a dose adjustment could switch to OxyContin if they are now in need of an ER. Asked dr what is keeping him from prescribing butrans and he said memory. I told him the dose titration guide can serve as a reminder and try to remember one patient this week
PPLPMDL0020000001	Independence	OH	44131	8/21/2013	Quick meeting with dr reviewing OxyContin dosing and titration and butrans patient profile nancy. Dr had to go.
PPLPMDL0020000001	Cleveland	OH	44102	8/21/2013	Attended Butrans program. Also discussed OxyContin q12h, tablet strengths
PPLPMDL0020000001	Cleveland	OH	44113	8/21/2013	Reminded of Butrans for those Ultram/Tramadol failures along with dosing. Overall her patients are adequately controlled. Intermezzo for MOTNA/Dosing, requested Trial Cards and said she will consider.
PPLPMDL0020000001	Cleveland	OH	44113	8/21/2013	Discussed Butrans, Tramadol/Ultram failures- she likes delivery system, but feels most patients are adequately controlled, no complaints from patients, but will keep in mind. Intermezzo for MOTNA/dosing.
PPLPMDL0020000001	Chagrin Falls	OH	44022	8/21/2013	I recv'd a phone call from ADON, Nancy Virginia requesting to change the meeting from today to introduce Purdue's Nurse Educator Program at another time. She is busy w/ orientation.
PPLPMDL0020000001	Parma	OH	44129	8/21/2013	Reminded dr that he said he would not be able to attend the program because he had already attended and that he would write a script instead. Dr said he remembered and is writing. Gave dr quick dosing reminder of oxycontin. Shared sleep calendar for intermezzo and reminded him this was for the caresource patient
PPLPMDL0020000001	Cleveland	OH	44113	8/22/2013	Visited Ortho 6th floor (Bliffeld,Joy,Stearns) discussed OxyContin/Butrans. Met with Pain/Anes. Dale N. PA) discussed how Butrans can be utilized for appropriate patients. Visited 1E floor offices Spine/Surgery obtained clinic days, left card and info.
PPLPMDL0020000001	Cleveland	OH	44113	8/22/2013	Discussed OxyContin Q12h, dosing strengths. Dr./Debbie RN said they dont like to prescribe OxyContin, challenged them about Percocet/Vicodin utilization, agreed and would consider. Intro. Butrans, Indication, Initiation/Titration and agreed they see chronic pain patients and like the option but dont want to get into medically managing pain. Agreed to ask Dale N (PA) for assistance. Asked and they agreed to Handout Butrans Patient info booklets to appropriate patients
PPLPMDL0020000001	Cleveland	OH	44114	8/22/2013	Talked with Casey/John, Discussed Butrans indication, dosing, Scott profile. They agreed Butrans is effective/next step when Tramadol/Ultram are not adequately controlling pain. Dr./practice likes coverage w/BWC, because they see alot of those patients. Intermezzo for MOTNA/dosing. Requested Savings/Trial cards for both products. Dr.Celeste/Carson expected to join practice??? TBD
PPLPMDL0020000001	Euclid	OH	44117	8/22/2013	I recv'd a call from D.O.N., Kathy Nemeth to schedule a Butran's in-service for the nursing staff for October 2 @ 7am, 2:30pm & 3:30pm. I also talked t6o her about aranging a Butran's luncheon for her NP. Kathy will talk w/ her and get back w/ me.
PPLPMDL0020000001	Cleveland	OH	44113	8/22/2013	Attended Butrans Moufawad program
PPLPMDL0020000001	Cleveland	OH	44195	8/22/2013	CCF Fellow Attended Butrans program
PPLPMDL0020000001	Cleveland	OH	44130	8/22/2013	Quick window call. Asked dr if he has thought about our lunch conversation where he was going to think about his Percocet patients needing a dose change. I asked him to think about OxyContin for these patients if they have been on ir for more than 3 months. As he walked away I asked him to remember the butrans pain patch.
PPLPMDL0020000001	Lyndhurst	OH	44124	8/22/2013	I made a drop-in visit to meet w/ Diana Howard in Staff Development to introduce myself and Purdue's Nurse Educator Program. I spoke w/ the receptionist who called her office. I was informed that without an appt., Diana is not available. I left Purdue educational offerings and my BC.
PPLPMDL0020000001	Cleveland	OH	44113	8/22/2013	Visited Pharm. talked with tech/ Justin on conf.call. Left Butrans patient info booklet
PPLPMDL0020000001	Cleveland	OH	44109	8/22/2013	Attended Butrans Moufawad program
PPLPMDL0020000001	Fairlawn	OH	44333	8/22/2013	I placed a phone call to the Receptionist Helen to get the name of the new Medical Director. The Medical Director is a father/Son team: Dan Cannone and Sean Cannone
PPLPMDL0020000001	Beachwood	OH	44122	8/22/2013	Was informed that this was doctors last day in the office until after Labor Day. Asked dr if he would think of OxyContin and Butrans patients today.
PPLPMDL0020000001	Cleveland	OH	44113	8/22/2013	Quick Butrans reminder, for those Tramadol/Ultram failures, left info along with OxyContin dosing/Titration guide. Aurora said most pain patients are referred out to Shen-Pain mgmnt
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	8/22/2013	I asked dr if it is fair to assume that most of analgesics her patients are on around the clock are NSAIDs and tramadol? Dr said she will agree with that. I showed her the Butrans decision tree to show her proper initiation and titration for both naive and experienced patients with opioids. Dr said she liked the piece. I told her when her patients need a dose adjustment on either a non opioid analgesic or opioid to use Butrans instead of titrating or moving to another IR opioid. Dr said ok and that she has been having good success. I told her to remember the Caresource coverage and explained the PA. Dr thanked me for the information.
PPLPMDL0020000001	Mogadore	OH	44260	8/22/2013	Discussion about all products over lunch. I asked dr to provide me specific information about his success with Butrans recently. Dr Cain told me that he likes it because it is a low dose, schedule 3, 7 day patch that gives good efficacy and it is tolerable. Dr told me that his patients really like and have had an improvement in their quality of life. I showed dr the Butrans decision tree and asked him how he decides on when to titrate and if he uses pain scales? Dr said pain scales are useless because they are widely exaggerated by the patient as to how much pain they are in. Dr said he has a conversation with the patient and asks them questions about activities of daily living better, same or worse. I asked for his continued business. OxyContin new label information and asked him to continue prescribing. Intermezzo patient identification and asked for more business.
PPLPMDL0020000001	Akron	OH	44312	8/22/2013	Spoke with Chris the pharmacy manager about all products. I asked Chris how much Butrans he has been seeing lately? Chris said more than the last time I visited which was in June. I asked him who is prescribing and he said more pain management offices than internal medicine except dr Cain who he has filled a few for recently. Chris said he has patients from Summit Pain, western Reserve Hospital pain among others. Chris said he refilled a Butrans 10mcg for a patient who was on 25mg of fentanyl who wasn't getting any relief from it. Chris said the patient told him the Butrans is working much better. Discussed proper initiation and titration and using Butrans for opioid naive patients. Discussed OxyContin label update and abuse deterrent studies which he said he will review. I asked if he has filled any more intermezzo and he said he didn't think so. Gave him copy card
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/22/2013	Quick minute with dr and asked him how his patients are responding to the Butrans? Dr said most have done really well with it. Dr said that because his patients are mostly on tramadol and lower doses of vicoden when he starts Butrans may have something to do with them responding well to it. I agreed with him and asked him to also consider using Butrans for his opioid naive patients. Discussed the initiation and titration piece and Maria profile. Dr said he will continue to prescribe
PPLPMDL0020000001	Cleveland	OH	44130	8/22/2013	Quick call, asked dr if he could get feed back from his patients on butrans would he be interested. He said he did not have time right now to discuss this and I said I would review the butrans patient experience kit on our next visit and oxycontin titration
PPLPMDL0020000001	Mayfield Hts	OH	44124	8/22/2013	At lunch, Dr told me he wrote for Butrans 15 mcg/hr, and it wasn't available yet at pharmacy. I asked, how did you find out about that dose? We haven't announced it yet? He got something for training, since he's a speaker. I told him the FDA just approved this dose and it should be available & start shipping to pharmacies in October. He thinks this dose is good option for titration and will start using immediately post launch. Discussed Medco Med D preferred status/other preferred plans. With OxyContin, please consider those patients you have on short acting oxycodone or percocet,he interrupted, and said, they'd be on same molecule, yes, same molecule, just different delivery, a 12 h dosing. Ok, I will consider he said. And dr. Jaham, we have broad commercial formulary coverage and favorable Medicare Part D coverage for OxyContin controlled release. Intermezzo, he said, I've written it, patients like it, and when I mention it to them again, they state my insurance wouldn't pay for Intermezzo, so he has to write something else. The generics are so much cheaper as well. Went over prn, and patients 30 day script may last longer, as only used on 62% of nights in our outpatient study. I will follow up with you when I get back from Stamford after Sept 2.
PPLPMDL0020000001	Beachwood	OH	44122	8/22/2013	Asked to make an appointment with the dir of nursing and was told her name is Cathy. Spoke with a nurse who walked into the office and explained that that I had butrans, OxyContin and intermezzo and I would like to provide an Inservice. I reviewed the butrans titration guide and asked if she heard of butrans. She was not aware and thought an Inservice would be a good idea and I gave her my card. I showed OxyContin dosing. Described intermezzo indication and limitation of use. She said Intermezzo might not be a good use in the nursing home because they don't want patients waking in the middle of the night.
PPLPMDL0020000001	Tallmadge	OH	44278	8/22/2013	Saw dr in Tallmadge office and had short discussion about OxyContin and Butrans. I showed dr the conversion and titration guide and explained the conversions from IR oxycodone and Percocet. I asked dr if he had any issue with assessing his Percocet patients for OxyContin? Dr said he does and will try to look more often. Told dr about Butrans and gave selling messages. Dr said he can see how it is a good option. I asked for him to try it and let it prove itself.
PPLPMDL0020000001					

PPLPMDL0020000001	Cleveland	OH	44130	8/22/2013	Introduced myself to pharmacist and asked about butrans usage. Dawn said she has not seen any usage. Reviewed titration guide for butrans. Discussed start principle of OxyContin. Asked about intermezzo scripts and she said she has not seen any in awhile.
PPLPMDL0020000001	Cleveland	OH	44113	8/22/2013	Discussed OxyContin Q12h/7 tablets strengths, Dr. said he only prescribes for short period time in-hospital and slowly takes them on the pain med. spectrum. Intro. Butrans Indication/Initiation/dosing/Titration. Dr. stated he does not treat much chronic pain but will consider when appropriate. Inquired about in-hospital formulary and stated with indication, it would be tough to add.
PPLPMDL0020000001	Bedford	OH	44146	8/22/2013	Discussed proper disposal of butrans. Asked what they felt was the greatest issue patients have using Butrans. Tiffany said patch application and I asked what that meant. She said that patients sometimes put the patch in the wrong place. I told her the dr requested butrans tear sheet that I think will help with this and hopefully reduce the calls she may get. Discussed titration every 1-2 days if necessary and they said the dr does not adjust doses until he sees patients again. Reviewed intermezzo dosing and administration with sleep calendar.
PPLPMDL0020000001	Akron	OH	44305	8/22/2013	I asked dr when he has a patient who is failing their IR opioid and has chronic pain, what reasons do you have to titrate it instead of moving to an ER product? Dr said its usually cost. I asked if that was the only reason? Dr said there are others such as acute pain but mostly its cost. I told dr that if cost is really one of just a few reasons, to use Butrans when cost is NOT a factor and the patients meets the indication. Dr said ok and agreed. I spoke with El the receptionist and discussed Butrans and the insurance coverage since she completes the prior authorizations. Discussed copy cards with her and dr and Caresource PA. I gave dr the oxycontin conversions guide and discussed the conversions from IR oxycodone and Percocet. I asked dr for more OxyContin prescriptions for those patients who are failing or not tolerating Percocet. Dr agreed. Gave him the dosing guide for this type of titration and most go from the 10 straight to the 20. Reviewed intermezzo dosing and administration.
PPLPMDL0020000001	Bedford	OH	44146	8/22/2013	Spoke with floater pharmacist and asked about butrans stocking. He said they had all strengths. Reviewed titration guide and morphine equivalent dosing. Reviewed start principle of OxyContin and he said he has not seen this type of titration and most go from the 10 straight to the 20. Reviewed intermezzo dosing and administration.
PPLPMDL0020000001	Cleveland	OH	44130	8/22/2013	Asked dr how he re-assess pain once patients are put on long acting opioids to determine if the dose is correct. Dr said yes and walked away. As he was walking away I asked him to write OxyContin for Percocet patients needing a change in medication that were appropriate and think of patients with GI issues from their pain meds and candidates for butrans.
PPLPMDL0020000001	Lyndhurst	OH	44121	8/22/2013	Left OxyContin pharmacists guide, savings flashcards all 3 products, with Akta Patel, OxyContin, q 12 h recommended dosing, reformulation, updates to section 9.2 of FPI discussed. Butrans they get an Rx in every few months, not as steady as OxyContin. 3 doses core messaging, cIII 1 x patch, steady state & supplemental analgesia all discussed. Intermezzo, Akta has never heard of product. Detailed indications limitations, peak plasma gender dosing, prn, sublingual all included in message.
PPLPMDL0020000001	Beachwood	OH	44122	8/22/2013	I made a drop-in visit to meet w/ Nurse Educator, Merri Bunge to talk w/ her about re-scheduling the pain management in-service. I spoke w/ the receptionist April, who informed me that Merri was busy w/ teaching. I left Purdue educational offerings along w/ my BC.
PPLPMDL0020000001	Bedford	OH	44146	8/22/2013	Spoke with dr about the program and asked him if he was not leading a speaker program how would he have answered the question why butrans. Dr said he thinks patients don't think about their pain so much when they are not constantly reminded of it when they take a pill. I asked him how that relates to OxyContin and he said twice a day is still a difference from IR. I asked the dr to think of his Percocet patients in need of a dose change. Also reminded him that he has not written any intermezzo and he said he keeps forgetting it is covered by caresource.
PPLPMDL0020000001	Cleveland	OH	44113	8/22/2013	Met with Dale, Reviewed discussion with Ortho-Efflor Bilfeld/Stearns. Went over OxyContin Q12h and 7 Tablet strengths. Agreed to assist when appropriate. Also Asked if he felt Butrans was an option for some of these chronic pain patients that require around the clock therapy (Ortho patients) and agreed to discuss/consider with Dr. Shen
PPLPMDL0020000001	Cleveland	OH	44145	8/22/2013	1. Determine changes to their business since our contract terminated 2. Determine how health exchanges will impact their business 3. Present OxyContin and Butrans updates
PPLPMDL0020000001	Tallmadge	OH	44278	8/22/2013	Spoke with Brittany the pharmacy technician about all products. Explained Butrans schedule 3, 7 day transdermal system, dosing, conversions and patient types. I asked Brittany who they are seeing prescription from? She said they filled one for Dr Sellers and Vora recently and have also filled for Hodakievic and Dmitri in pain management. I discussed OxyContin new label information and reviewed doses. Brittany said they have a full stock of all OxyContin doses as well as many of the Butrans since they are seeing more. Gave her intermezzo indication and dosing and Brittany said she doesn't believe they have filled.
PPLPMDL0020000001	Cleveland	OH	44102	8/22/2013	Discussed with Ed in regards to Butrans utilization in the assisted living setting. Likes delivery system, only concern along with Dr. Nouraldin Medicare Part D coverage. Does have RPH staff at times do PA's and will consider with Butrans.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/22/2013	Spoke to Glenn the pain management staff pharmacist about Butrans and OxyContin. I asked him how smoothly things have been going with getting Butrans pushed through? Glenn said they have not had many issues at all. I reviewed the product and new formulary coverages. Spoke to him about the new label update and abuse deterrent studies for OxyContin and asked him to review.
PPLPMDL0020000001	Tallmadge	OH	44278	8/22/2013	Spoke with dr wells at same time as dr Shanfelt. I showed dr the OxyContin conversion guide and explained the conversions. I asked him to pause before refilling moderate doses of vicoden or Percocet and check if the patient is appropriate for Q12h dosing of OxyContin. Dr said he tries to do that but said some patients he has tried have told him they didn't want OxyContin and would not take it. I gave him the abuse deterrent studies and asked him to review. I reminded him that Percocet and OxyContin are the same except for dosing and ER vs IR. Discussed Butrans key messages and asked if it made sense to him and if he would try it? Dr said he would consider to use earlier than fentanyl and asked about conversions. Discussed conversions from IR opioids. Dr said he would try. Talked about insurance and copy cards.
PPLPMDL0020000001	Westlake	OH	44145	8/23/2013	left butrans materials behind for the doctor. discussed what butrans is and the appropriate patients.
PPLPMDL0020000001	Westlake	OH	44145	8/23/2013	Dr. said:he doesn't treat patients that need continuous narcotics. I said what types of patients w/pain do you treat? He said treats alot of comorbid depression, diabetic pain, fibermelagia. He said he doesn't like to treat Osteoarthritis and he treats mostly short term pain. I said how long is short term, he said if they are on pain medications over a year he will refer them out. I asked how his patients were doing pain were doing on the Butrans. he said fine. I told him that I wasn't looking for him to place every pain patient on Butrans. We spoke about the appropriate patient type according to the naive study (and the limitations), dr was shaking his head in the no direction. I said so when patients are taking nsais or non opioids for their pain that is for an extended period of time and chronically...if they fail what do you do? He said that's when he will use an extended release product like Butrans because he doesn't want to give them pills to prn self medicate. I re-enforced the decision, reviewed the initiation of butrans onto the lowest dose of 5mcg waiting 72 hours (steady state) to titrate them to 10mcg. Dr. asked coverage and asked about high deductual plans. And that patients won't pay for Butrans if it was too expensive. I said true. But how do you keep track of everyone's pbn? He said "I don't". I said so do you still write for your first choice? He said yes. I re-enforced his decision. Bridge to OxyCotin- dosing review.
PPLPMDL0020000001	Westlake	OH	44145	8/23/2013	Started off talking with drs nurse about Butrans- showed the patch, explained what it was for, patient types. She asked about Medicaid patients. I reviewed the commercial savings program to her- dr. said hello to me thru the window. I introduced myself to him and said I was just showing your nurse what this pain medication is and does. He said what is it, I said its called Butrans ever hear of it. He said NO. I went thru the approp patient types and the indication- not for acute or prn. I said have you ever tried a non Opioid for chronic pain? He said yes? I said what if its not working? He said he will move to a schedule 4 or tramadol. I said ok, makes sense. And Dr. if Tramadol ends up not being enough pain relief you have an option of using Butrans 5mcg for that appropriate patients.
PPLPMDL0020000001	Stow	OH	44224	8/23/2013	I asked Abby to come to window to discuss Butrans. I showed Abby the Scott profile and reviewed how she needs to initiate Butrans early in treatment. I asked her if she has any patients that she is currently refilling tramadol or even vicoden each month? She said she has many of them. I asked her to take and extra minute to assess if they would be appropriate for Butrans. Abby said she will do that. I reminded her about the Caresource coverage and PA, BWC, and Medicare D plans.
PPLPMDL0020000001	Cleveland	OH	44114	8/23/2013	Spoke with Office Mgr. Dr. Carson is supposed to join practice soon. Check back in Sept.
PPLPMDL0020000001	Cleveland	OH	44103	8/23/2013	No new prescribers, Most RX filled are managed medicaid, no need for OxyContin/Butrans/Intermezzo savings cards.
PPLPMDL0020000001	Cleveland	OH	44113	8/23/2013	Quick follow up from Butrans program. She thanked me for planning and always enjoys Dr. Moufawad. Asked for any key takeaways.. said it was good Butrans refresher, thanked for her support and asked for a new start today dr did not stay for lunch today, was taking the afternoon off. Asked about butrans experience. He didn't have any patients on the product, I said why not? He said not the right patient yet. I wanted to get into more, but he was walking out the door.
PPLPMDL0020000001	Westlake	OH	44145	8/23/2013	Didn't get to see the doctor, lunches are full on waiting list. Asked how the doctor can find out about a new product. she said I can leave items, asked for time...not today she said. Left Butrans study and OxyCotin titration
PPLPMDL0020000001	Westlake	OH	44145	8/23/2013	Review of Butrans- pointed out the naive study with the pain reduction of the open label phase. Also discussed titration 3 days with butrans. OxyCotin review of the 7 dosages & titration guide booklet
PPLPMDL0020000001	Westlake	OH	44145	8/23/2013	Asked if he knew much about Butrans- shared some key points regarding the naive study (open label:reduction in pain scores). Left Initiation and titration leave behinds on Butrans and OxyCotin.
PPLPMDL0020000001	Westlake	OH	44145	8/23/2013	Didn't see dr. spoke to Ma about what is the best way to communicate a new product with the doctor. MA said he doesn't read the material, but I left a Butrans study and OxyCotin titration guide behind anyway
PPLPMDL0020000001	Hudson	OH	44236	8/23/2013	I handed dr the Butrans slide guide conversion guide and told dr to keep it with him to help remind him about using Butrans when a patient needs a dose adjustment on their IR opioid. I told him about the scale and told him steady state is 72 hrs and titration at that point. Dr told me that he tries to keep it in mind and the slide guide will help.
PPLPMDL0020000001	Cleveland	OH	44115	8/23/2013	Visited Medical offices Levy,Stickney,Blades MD along J. Reisman ONC. Ortho-Perse and Stanley. Left OxyContin Dosing/Titration guide. Left Butrans patient info guides with Pain Ctr. for Dr. Nickels.
PPLPMDL0020000001	Westlake	OH	44145	8/23/2013	saw doctor, on her way home for the day. Left her the OxyCotin titration guide and a butrans maria patient profile for her to read.
PPLPMDL0020000001	Cleveland	OH	44112	8/23/2013	Butrans reminder for those Ultram/Tramadol failures. Asked Dr. what she does when those are not adequately controlling pain. Said in today's world..not much..not prescribing many opioids/narcotics anymore. Sometimes pain mgmt..but her patients dont follow thru. Intermezzo for MOTNA/dosing along with trial savings cards
PPLPMDL0020000001	Cleveland	OH	44113	8/23/2013	Follow up from Butrans program, enjoyed and found Dr. Moufawad informative. Liked discussion on Helen profile. Asked her to continue to find new patients to start on Butrans- she agreed.. Reminded of all those LorTab failures that are requiring around the clock therapy
PPLPMDL0020000001	Beachwood	OH	44122	8/23/2013	Spoke with pharm tech about butrans movement. She said she was not sure but know what butrans is. Reviewed proper application and tear sheets for butrans. Reviewed start principle for OxyContin. Asked if she knew what intermezzo was and she said no and when I explained then she remembered it was zolpidem. I gave indication and limitation of use of intermezzo
PPLPMDL0020000001	Cleveland	OH	44195	8/23/2013	MSL phone call and email to Ms. Lach, Ms. Cassano, and Dr. Appachi to request OTR3001 meeting with Ms. Lach and Dr. Appachi to discuss additional sub-investigators and potential patient populations. As of 8/28, no response from site.
PPLPMDL0020000001	Olmsted Falls	OH	44138	8/23/2013	Spoke to Mary the floating pharmacist about how to stock the other mcg of Butrans and she said it was by demand. They had a 10mcg on the shelf for a certain customer that get refilled of it every month. Reviewed the naive study and steady state and pain reduction scores in the open label. OxyCotin was the variety of doses, asked about stocking and she said they don't stock many opioids at this store but the Avon commons stores carries
PPLPMDL0020000001	BEACHWOOD	OH	44122	8/23/2013	Spoke with Judy the pharm tech because the pharmacist was busy. She said she has not seen butrans but I would need to speak with the pharmacist. I reviewed start principal of OxyContin. Asked about intermezzo and she said she is only aware of the one script that she worked on a long time ago. Reviewed indication
PPLPMDL0020000001	Westlake	OH	44145	8/23/2013	introduction to NP. Discussed patient types for Butrans and she said he really works with Dr. gerace about which products to select for patients with pain cause she doesn't treat much. I said what do you consider to be an extended period of time? She didn't know...longer than 3 or 6 months she said. We talked about how every patients explains a different level of pain, that no pain is the same. I pulled out the pain scale ruler and said you may score a 5 with a pain and another an 8. So when you run into a situation where a patient isn't getting the pain algesia like you feel they should and they need something for around the clock- for an extended period of time chronically they may be a candidate for Butrans 5mcg. explained the patch design, showed it to her (demo) and how it's supplied. Also reviewed the limitations of NOT for PRN and NOT for acute pain patients. Intermezzo- dosing, indication highlighted but didn't get into time for more on this product since she was trying to work over her lunch with papers.
PPLPMDL0020000001	Cleveland	OH	44115	8/23/2013	Quick call with George RPH, OxyContin Q12H and no new Butrans from Nickels (Pain Ctr.)
PPLPMDL0020000001	Cleveland	OH	44114	8/23/2013	Quick Butrans reminder, Tramadol/LorTab failures. asked her for a new start today, said she will consider

PPLPMDL0020000001	Olmsted Falls	OH	44138	8/26/2013	Met dr. Hr told me that he doesn't treat much pain patients that require around the clock therapy and that he treats mostly prn or acute. We discussed the naive study the patients involved and the pain reduction during open label. And discussed the starting dose. Dr identified with using Tramadol for his pain patients, he was not aware the Butrans was schedule 3 nor that it was for 7 days. We discussed stray state and he asked about site irritation, which we reviewed together as 7 percent. He asked managed care- and asked if patients could go on line and print off coupons. Reviewed the information.
	Olmsted Falls	OH	44138	8/26/2013	Lunch. Dr said he uses Butrans after a short acting (Vicodin) failure. Dr treats some pain in house but will refer others out if patients pain can not be clearly identified. Dr uses lower doses of Tramadol. Dr said he doesn't like to dose with short acting opioids because of the drug plasma levels taper off too fast. Dr asked about Butrans- I showed plasma levels - used the graph. Also reviewed the steady state of the product. Dr w not aware the Butrans was a schedule 3 and the only extended release schedule 3 on the opioid market. Dr asked about savings program in detail. Identifying the patient type was helpful- pain secondary to a known pathology (indication...). Dr said that he would not write Butrans after a NSAID failure. But he might write Butrans after Tramadol failure- which is where we asked him to use the product. Also discussed OxyContin and the variety. Of strengths available. Told dr I would be back to check to see if he has tried Butrans in an appropriate patient type. Left him reading Materials.
PPLPMDL0020000001	Berea	OH	44017	8/26/2013	Asked dr if he knew what the demo patch of Butrans was...and dr said it was a transdermal pain patch but he didn't have time today to discuss anything further. I have a Lunch coming along with the new dr. Powers. Left behind product materials for review.
PPLPMDL0020000001	Westlake	OH	44145	8/26/2013	I placed a call to see if a new D.O.N. has been placed. I was informed by the receptionist, that they do have a D.o.N. and her name is Kelly Rosnagel. Kelly was in a meeting and not available. I left a msg. on her voice-mail.
PPLPMDL0020000001	Bedford	OH	44146	8/26/2013	I placed a phone call to the D.O.N., Jackie Conner. I introduced myself and Purdue's Nurse Educator Program. An appt. was scheduled for Tuesday Sept.10th @ 11:30 to discuss in more detail.
PPLPMDL0020000001	Olmsted Falls	OH	44138	8/26/2013	Met at the pharmacist- discussed stocking the 15mcg of Butrans. He said they usually wait for more scripts but might order the 15mcg cause its new. Discussed Butrans starting dosages and when to titrate and 7 day transdermal patch.
	Akron	OH	44333	8/26/2013	Spoke with dr about prescription plans that will be the path of least resistance for his patients. Discussed BWC , Caremark, medical mutual, and ESI. Explained the average copy's for each and to focus on those pans for success. Discussed his dosing of Butrans. Dr said he is still finding that the 5mcg is not quite enough, titrates to the 10mcg and gets good results however the 20mcg tends to be too much for his older population. I expressed the proper titration period and that patients on Butrans can also take IR opioids for breakthrough if necessary. Dr agreed and said some of his patients on 10mcg need breakthrough. I asked for continued business. Dr told me how much OxyContin he has been using lately. I asked dr where he is using it and whey more now? Dr said that I tell him all the time to use it for his Percocet patients needing more of an ER product and said it has good insurance coverage. I asked for his continued business. Asked dr for intermezzo business and to use it for his Caresource patients.
PPLPMDL0020000001	Akron	OH	44313	8/26/2013	I asked to prescribe OxyContin for his patients on Percocet around the clock who are still in pain or can't tolerate it. I asked him if he would take a second before his refills Percocet and evaluate them for q12h OxyContin. Dr said he would do that. I asked dr if he has prescribed Butrans yet? Dr said no. I asked him why he has not? Dr said he just hasn't found the right patient. I asked dr what that right patient looks like? Dr said the patients on vicoden who are uncontrolled. I showed him the Scott profile and asked him to back it up one medicine to Ultram. Dr said it makes sense. I asked him to use Butrans as early as the uncontrolled NSAID patient.
PPLPMDL0020000001	Akron	OH	44333	8/26/2013	Spoke to Scott one of the staff pharmacy technicians. Found out that they deliver prescriptions for mostly MR/DD homes and facilities and will not deliver Scheduled medicines. Discussed Butrans which he did not know about and hit all key selling messages. I asked who they get most of their prescriptions from? Scott said most facilities have their own staff physicians but other patients just use their own family doctor or specialist.
PPLPMDL0020000001	Fairlawn	OH	44333	8/26/2013	Spoke with dr at counter and asked him what triggers him to move for percocet to ER product? Dr said he will put patients on OxyContin if the patient tells him its not working or they can't tolerate it. I asked him if he always moves to OxyContin from Percocet? Dr said he tries to as long as their insurance covered it. I showed dr the conversion guide and asked him to use OxyContin earlier in treatment with Percocet and spoke to him about the conversion to the 10mg dose. Handed dr the Butrans decision tree piece and asked for him to use it early on in treatment such as patients failing tramadol.
PPLPMDL0020000001	Fairlawn	OH	44333	8/26/2013	Spoke to Cara who is the Rite Aid floater Sue and the student Inna. I asked Cara about her thoughts on Butrans, how often she sees it, conversions and patients types. Cara didn't have too much knowledge in the product so I brought her up to speed with all Butrans key selling messages. Cara said she has seen on a couple of occasions patients coming in to fill Butrans and e rite aid didn't stock it and the patients went somewhere else. I expressed the importance of stocking especially in rite aid pharmacies that see it more regularly. Explained the dosing and conversions. I asked her if she would order it in other pharmacies. Cara said ok. Discussed OxyContin dosing and conversions and asked about fill rates. Cara said that she sees refills it fairly often and sees lots of 10, 20and 40mg doses.
PPLPMDL0020000001	Fairlawn	OH	44333	8/26/2013	Spoke with Dave the pharmacist who is a floater and is typically in the Warren Wal-mart. I asked dr if he is familiar with Butrans? Dave said he is and has filled it at his other stores. I discussed Butrans as the schedule 3, 7 day transdermal patch. Discussed dosing, conversions and patient types. I told Dave about OxyContin dosing, conversions from Percocet and formulary coverage. I introduced intermezzo discussing indication, dosing, and limitations of use. Dave said he knows about it but has not dispensed.
PPLPMDL0020000001	Uniontown	OH	44685	8/27/2013	Spoke with Matt the pharmacist about all products. I told Matt any Butrans dosing and new insurance coverages. I asked Matt how often they have dispensed it and he said he filled one from Dr Everly in Green last week and has filled them for Dr Fouad recently. I spoke about OxyContin dosing and conversions from Percocet. Matt said they have Butrans 5 and 10mcg in stock and all of OxyContin. I discussed intermezzo dosing and indication. Matt said they have not filled.
PPLPMDL0020000001	Oakwood Village	OH	44146	8/27/2013	I placed a phone call to D.O.N., Barb Staemple to reschedule in-service cancelled on 7/31. I recv'd her voice-mail. I left a msg.
PPLPMDL0020000001	Euclid	OH	44117	8/27/2013	I placed a phone call to Ruth Rossi 216-531-7426 to confirm an in-service scheduled for tomorrow 8/28 @ 2:30 PM. I left a msg. on her voice-mail.
PPLPMDL0020000001	C. Falls	OH	44223	8/27/2013	Spoke with Catherine the pharmacist and Denise the tech. I asked about fill rates and stocking of Butrans and OxyContin. Catherine said that the continue to fill Butrans but not as much lately. Denise said they are stocking all doses and have 2 of the 10mcg. Discussed new formulary coverage for Butrans and OxyContin patient types.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/27/2013	Showed dr the conversions from Percocet to OxyContin and asked for more of his business when he prescribes ER opioids. Dr said he likes OxyContin. I asked him to re-evaluate his it opioid patients for OxyContin therapy.
	Uniontown	OH	44685	8/27/2013	Spoke with Kim the pharmacist about Butrans and OxyContin. Discussed Butrans dosing and patient types and asked her if she is continuing to fill? Kim said they have patients on all doses. I asked if she is stocking all doses? She looked and said that the have all doses but the 5mcg. I asked her if she will order the 5 mcg dose? Kim said she will order it when they get a script. I asked her why she will wait if they are filling it? Kim said she will ask about ordering it. OxyContin dosing and patient types. Kim said they have all doses in stock.
PPLPMDL0020000001	Solon	OH	44139	8/27/2013	I placed a phone call to Judith Sawtner to re-schedule the in-service on Pain cancelled on 6/7. I was informed by the receptionist that Judith was in a meeting. I recv'd her voice-mail, I left a msg.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/27/2013	Short talk with dr about Butrans and OxyContin. Dr said he is continuing to find great success with Butrans and is wishing there would be a 30mg dose. I asked why and he said because 2 20 mcg patches showed QTC prolongation but said a 30mg probably expound not. I told dr I don't know of any doses coming over the 20mcg patch. I asked to continue prescribing and gave him a formulary update. I asked to continue using OxyContin and discussed patient types.<font color=blue><b>CHUDAKOB added notes on 09/16/2013</b></font>-Cliff, please take an extra minute to review your call notes. There are words in the notes that don't make sense and mg where there should be mcg. Please don't answer yes to "did you review your call notes" until you review your call notes. Thanks Cliff.
PPLPMDL0020000001	Cleveland	OH	44128	8/27/2013	I placed a phone call to acting D.O.N., Sherri Grafnitz from the corporate office to talk w// her about rescheduling the in-service on pain documentation that RoseAnne Howell cancelled on 8/14. I spoke w/ the receptionist, Dominique, who informed me that Sherry was not in the building today. I left a msg. on her voice-mail.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/27/2013	Discussed Butrans dosing, titration and patient types. I asked Jake about his recent success and if the is anything he needs to tell me about his patients on e product? Jake said that he has seen good success with Butrans and feels very comfortable with it. He said he has many patients that are having trouble getting Butrans. I asked for him to explain and he said he patients are not able to find their dose at the pharmacy and don't want to wait a day for it. Jake said that others have said they have been told they need to wait for up to 3 days to get it. I discussed how that may be true if they take it up late in the day on a Thursday but otherwise that shouldn't happen. I asked Jake for pharmacy information and I will check it out. Discussed the highlights of the opioid experienced trial and asked him to titrate to the 20mcg dose. Discussed oxytocin dosing, titration, new labeling information and asked him about his use. Jake said he likes it and it works well and most of his patients can get it without an issue.<font color=blue><b>CHUDAKOB's query on 09/16/2013</b></font>"Discussed oxytocin dosing" Oxytocin is a completely different medication than OxyContin. See what I mean about reviewing your call notes?<font color=green><b>REICHCL's response on 09/17/2013</b></font>Sure<font color=blue><b>CHUDAKOB added notes on 09/19/2013</b></font>-Thanks Cliff.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/27/2013	Dr told me he has been prescribing Butrans more recently and his patients are doing well. Dr also said that he had one patient that did not get covered on Caresource and asked for fentanyl first. I asked dr if he's sure it wasn't a Buckeye patient? Dr said he's not sure. Discussed formulary covarge and new Medicare D plans. Discussed the patient types for Butrans and asked him where he is using it? Dr said for his tramadol and vicoden patients. I told dr the earlier the better with Butrans when they meet the indication. Dr asked if he could use OxyContin for acute pain? I read dr the limitations of use from the FPI and told him no that it is NOT indicated for acute pain. Dr said he is using OxyContin a lot for his hospital patients and uses it for many different patients. I asked to do evaluate his Percocet patients to see if they are appropriate for OxyContin.<font color=blue><b>CHUDAKOB's query on 09/16/2013</b></font>-Cliff, read what you wrote " I told dr the earlier the better with Butrans when they meet the indication." Why is earlier better? Do we have data to support that statement?<font color=green><b>REICHCL's response on 09/17/2013</b></font>-We do not have that.<font color=blue><b>CHUDAKOB added notes on 09/19/2013</b></font>-Ok. Be careful saying something that is comparative that we do not have data to support. Thanks!
PPLPMDL0020000001	Olmsted Falls	OH	44138	8/27/2013	Lunch with dr. Review of Butrans naive study with doctor. Asked dr what were this thoughts on the pain reduction information and the dr said it was good, also shared the graph that demonstrated the 53 percent of patients has a 30 percent reduction of pain. Again dr said that was a good number. Discussed his patients he treats with pain- he said after a NSAID failed he will turn to Vicodin or low Mgs of oxycodone. Discussed how to start patients on the 5mcg of Butrans also the 4 location sites where to apply. -Dr asked about Medicaid coverage (Barry mentioned the Caresource pa information) I covered commercial insured Butrans patients. Asked dr if he would ever write Butrans after an NSAID failure and he said yes. Dr wanted clarification that the patch was for 7 days- reviewed. Dr said that he typically gets the pain patients he refers to pain management back after the pain doctors gives the patient 4 pain injection blocks. Barry reviewed OxyCotin strengths and Percocet molecule conversion.
PPLPMDL0020000001	Cuyahoga falls	OH	44223	8/27/2013	I asked Kim about her experience with Butrans and where she has used it? Kim said that she has prescribed it a couple of times for drs Sable and Ali. Kim said that the patients have been on vicoden or Percocet and has seen good success with Butrans for those patient types. I asked if she sees patients on tramadol a. Kim said she does but a very limited number. Kim said most are farther along in pain therapy and are on vicoden or Percocet but only taking 20mg or so per day. I asked if most doses initiated are the 10mcg and akin said yes. I asked her to continue prescribing. Discussed OxyContin and new label information and asked Kim to read over the clinical trials for the reformulation. I asked her when her license enables her to prescribe schedule 2's to use OxyContin for patients who are being refilled month after month on Percocet.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/27/2013	Provided review of Bup 3015 with all doctors in attendance at lunch. Discussed all aspects of the clinical trial and asked dr Narouze his thoughts. Dr said he understands what the clinical trial says and will continue to believe that the 20mcg will not provide additional efficacy over the 10mcg. I asked what percentage of his patients attain the analgesia he and the patient desire? Dr said most of them do well enough on the 10 and don't need the 20mcg. Dr said at times he is fearful of his old and frail patients being on the 20mcg dose. I told dr as long as his success rate is high at the 10mcg his patients are having good experiences with Butrans. Dr agreed. Discussed formulary coverage for Butrans and OxyContin. Dr told me that he has been having a hard time getting OxyContin covered for his Medicare D patients. Dr said that many of them are being required to fail MS Contin or ER morphine. I discussed conversions and asked him to use OxyContin when his patients fail Percocet.
PPLPMDL0020000001	Olmsted Falls	OH	44138	8/27/2013	I placed a call to speak w/ head of education and introduce Purdue's Nurse educator program. I spoke w/ the receptionist barb, who connected me to the D.O.N., Robert Albu.N/A. I left a msg. on his voice-mail.
PPLPMDL0020000001	Olmsted Falls	OH	44138	8/27/2013	I placed a phone call to follow up w/ D.O.N., Pam Riter, after speaking w/ her at the PharMerica Symposium on 8/7 and introducing myself and Purdue's NE program. I recv'd her voice-mail, N/A. I left a msg.
PPLPMDL0020000001	Richmond Heights	OH	44143	8/27/2013	I placed a phone call to speak w/ Joan Southard and schedule an in-service on Constipation. I spoke with the receptionist, who informed me that Joan has not arrived yet. I left a msg. on her voice-mail.

PPLPMDL0020000001	Akron	OH	44313	8/28/2013	Spoke with Natalie the pharmacy technician about products. I asked her how much Butrans they have been seeing in the month of August? Natalie said she just filled one for dr Sable and the patient had a Medicare D plan which needed a PA. Natalie has her stacks of pa forms and this one for sable was approved fairly quickly and the patient got the 5 mcg dose. Natalie said other times she had had Butrans prescriptions with oa's that had not been completed and approved for 2-3 weeks. Natalie said she will typically call the doctor and ask about the prior auth. I asked about their current stocking and told her about the copy cards for commercial plans. I told her about Butrans.com if the patient does not have a copy card. Discussed OxyContin and intermezzo dosing and patient types selection.
PPLPMDL0020000001	Akron	OH	44308	8/28/2013	MSL email communication with Dr. Friebert to discuss preparations for her presentation to PPLP team on September 10. Dr. Friebert is updating bio for introduction, teleconference technology has been checked and is in place for presentation.
PPLPMDL0020000001	Uniontown	OH	44685	8/28/2013	Dr told me that he just refilled Butrans on three patient this morning. I asked him if he knows what the stints were on prior to Butrans? Dr said he knew one was taking vicoden and the other of the three was taking Percocet. Dr said he couldn't remember the third. I reviewed the patient profiles and asked him how often he sees patients on tramadol? Dr said he knows there are some in the practice and agrees with using Butrans there. Discussed his use of OxyContin and discussed conversions and patient types. Dr said he likes OxyContin because its and easy transition from Percocet. Dr agreed to continue to prescribe. Left dr the intermezzo dosing guide.
PPLPMDL0020000001	akron	OH	44333	8/28/2013	Told dr in hallway about how he needs to identify his tramadol patients who are in need of a dose adjustment or can't tolerate it. Dr said he continues to look and asked about Medicare D coverage. I explained the Medicare D plans and he was glad I reminded him about Medco and SummaCare because he has lots of those prescription plans. Nothing else learned.
PPLPMDL0020000001	Akron	OH	44310	8/28/2013	I showed dr the opioid experienced trial and showed him the inclusion criteria. I told dr about the percentage of patients on hydrocodone medications in the trial. I asked dr to take a closer look at his hydrocodone patients. Dr looked at it and told me most of his patients come in on vicoden. I told him that Butrans is a good option for those patients who are uncontrolled. Dr agreed. Nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44135	8/28/2013	I cannot get the D.O.N., Dan Rivera to respond to my phone calls or visits.
PPLPMDL0020000001	Akron	OH	44313	8/28/2013	Quick conversation with Natalie the pharmacist about products. I discussed the Scott profile with her and told her that Butrans sold be sued early on in treatment for good results. Discussed insurance coverage and Medicare d plans. I asked about their stocking and future stocking of doses they are out of. Valarie said they can get it next day and I told her that some patients will go somewhere else to get it the same day. Valarie didn't seem to care. Discussed OxyContin and intermezzo indications and dosing. Valarie said she still has not filled any intermezzo. Discussed the Caresource coverage.
PPLPMDL0020000001	Copley	OH	44321	8/28/2013	Conducted Butrans in-service with nursing staff. Reviewed initiation and titration guide, titration, conversions, patch description, copy cards and formulary. Also discussed OxyContin and conversions from IR oxycodone.
PPLPMDL0020000001	Akron	OH	44333	8/28/2013	I asked dr how his patients have been doing on Butrans? Dr said they are all doing well and continues to find a lot of success with his older population who don't want the large number of pills. I asked him about his experience with titration in his Butrans patients? Dr said he likes to also use Butrans for his opioid naive patients and that he typically starts on the 5mcg and then most still need to go on the 10mcg. I asked him what percentage of his Sncg patients need to move to 10mcg? Dr said about 50%. I asked him if he has patients on the 20mcg and he NSAID maybe one or two. Dr said almost all of his patients get e ough with the 10mcg dose. I explained the new insurance coverages and focused on Medicare D since his patients on Butrans are typically over 65 years. I asked him for mor and continued business. I asked him if he is still finding success with OxyContin and he said he uses all doses but continue to find some difficulty with insurance. I asked him to explain and he said that most p, and are now requiring the patient fail MS Contin or ER morphine first. Dr said its commercial and Medicare D plans. Reviewed plans and told him I will check with the staff to figure out where the difficulty is.
PPLPMDL0020000001	Fairlawn	OH	44333	8/28/2013	Followed up with dr after Copley health center Butrans in-service. I told dr that it went very well and barb was pleased. I told dr that Barb wants him to use Butrans because it seems like a great product. Dr thanked me for the in-service and said he is glad it went well. Dr said he still plans on using Butrans but has not yet. I gave him another initiation and titration guide and asked for him to initiate Butrans when his tramadol patients need a dose adjustment or can't tolerate it. I gave him the OxyContin conversion guide and Medicare D insurance grid he requested.
PPLPMDL0020000001	Akron	OH	44313	8/28/2013	Showed dr the OxyContin conversion guide and the Scott profile for Butrans. I asked dr if he has patients on Percocet 20mg a day? Dr said yes. I showed him the conversion to OxyContin and asked him to switch those patients to OxyContin q12h. Dr said ok. I told him he needed to use Butrans because it is a solution for his tramadol patients who continue to be in around the clock pain. Dr looked at the conversion guide and said he has the vicoden patient information on his desk. I told him that BWC is paying for it and the Caresource PA.
PPLPMDL0020000001	Akron	OH	44320	8/28/2013	I asked dr if she has any reservations in using OxyContin? Dr said no other than the name OxyContin. I asked why and she said it has suck a long history of abuse that it carries a stigma. I asked her if that's how her patients feel? Dr said she doesn't want to know widely that she prescribes it. I told her to not be Leary of the name because a lot has changed since those old days. Discussed reformulation and asked her to read the label update. I asked her if it makes sense to prescribe OxyContin for patients failing Percocet? Dr said sometimes...I showed her the Scott patient for tramadol and asked her again to use it more frequently.
PPLPMDL0020000001	Fairlawn	OH	44333	8/28/2013	Quick discussion about Butrans and OxyContin. I asked dr to provide me some patient feedback on Butrans. Dr told me that the patients he has on it really are liking it and many of them have told him that they are sleeping much better! Dr asked me if he can use breakthrough medicines with Butrans? I told him yes he can because it is a partial MU agonist and read him section about the FPI. I asked why he asked? Dr told me about how patients can overdose on buprenorphine. I told him that that is not possible if the dose is kept within what it is indicated as. Dr began taking about buprenex and how those patients can overdose. I explained to him the significant dosing differences between the two. Dr told me he was confused and that he wants to look over the FPI. Asked dr to continue prescribing OxyContin for those patients appropriate for a q12 h oxycodone and handed him a conversion guide.
PPLPMDL0020000001	Euclid	OH	44117	8/28/2013	I Arrived to complete an in-service on Constipation, I spoke w/ Ruth Rossi, in staff development. She said, "I am trying to round up some nurses, but we are extremely busy and no one is able to come. Can we reschedule?"The constipation in-service was rescheduled for 9/23 @ 2:30
PPLPMDL0020000001	Westlake	OH	44145	8/28/2013	1. Understand more about their business since merger with Pharmacia 2. Determine Pain Management Program needs 3. Present Purdue programs & product updates
PPLPMDL0020000001	Akron	OH	44333	8/28/2013	Continued the introduction to Butrans explained the conversions, patient types and copy cards with formulary discussion. I asked Stephanie is she sees Butrans as a product she will eventually use? Stephanie said she will because its a schedule 3 and is low dose to be used early because if she can get a patient on an ER opioid earlier the patients success may be higher. I reviewed the opioid experienced trial and focused on inclusion criteria and efficacy data. Discussed OxyContin and conversions Ali with discussion about intermezzo and how she can identify patients.
PPLPMDL0020000001	Cleveland	OH	44111	8/29/2013	attempt to see the doctor at this metro location, they would not let me back, not even with a vendormate approval. I was able to leave behind some oxycotin coupons and literature. In speaking with the ma upfront she said the doctor is only in on tuesdays for now and might be going main campus full time. I left my card as i shared some butrans information on what it is and appropriate patient types for it. She said if the doctor is interested they can call me for to come in.<font color=blue><b>CHUDAKOB's query on 09/17/2013</b></font>Sounds like this physician should be marked as non-call file. Am I correct?<font color=green><b>BARTOLI's response on 09/19/2013</b></font>Yes! I will make sure it's marked as such.<font color=blue><b>CHUDAKOB closed the query on 09/19/2013</b></font>
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/29/2013	Spoke with Jackie the pharmacist about all products and asked her how familiar she is with Butrans? She said that ER have discussed it before and has not filled any prescriptions for it. I discussed schedule 3, 7 day transdermal patch, conversions and patient types. I told her about copy cards and formulary coverage. The pharmacy does not sure toy stock Butrans and it would need to be in by 8pm to get it in the next business day. Asked about OxyContin and stocking. She said they have all doses and fill it regularly. She asked about copy cards and wanted some because she had a patient that was just diagnosed with cancer and needed OxyContin but it cost a lot of \$. I told her about the cards and potential savings.
PPLPMDL0020000001	Stow	OH	44224	8/29/2013	I told dr that he has two different solutions available to him for his patients in moderate to severe pain. I explained the Butrans tramadol patient and asked him to pause before refilling tramadol or moving to vicoden and to ask himself if the patient is appropriate for a schedule 3 controlled release patch. I told him his vicoden patients may be appropriate go Butrans or OxyContin and asked him if he has a dose threshold on vicoden before he makes the decision on what's not and the dr said no. I showed him the conversion scale for Butrans and then showed him the conversions from Percocet to OxyContin and asked him to use each in their own specific place. I showed him the intermezzo dosing and read him the indication. Dr said h has not used but said it would like he would use it. I asked for his business.
PPLPMDL0020000001	Westlake	OH	44145	8/29/2013	spoke with ma she said that galvin is at westlake full time. metrobuilding- left various marketing pieces and coupons.
PPLPMDL0020000001	Berea	OH	44017	8/29/2013	Told the Dr. I was presenting the naive study and asked his thoughts on a few areas of the study. Dr off the bat told me he, doesn't treat chronic pain so he doesn't write Butrans. I said...what's chronic mean to you? He said the cancer patients or severe pain that will need an extended release for. I said dr. i think you might be thinking of a different product because those aren't the patients i was going to discuss with you. We looked at the inclusion criteria of the study- i said do you see these patients. He said yes. I said ok...how do you treat them? He said with Vikodin or Percocet, i said so you let them prn their own pain control? He said sort of but they will never switch to Butrans. I said how about after Tramadol then? He said maybe. He asked if the patch falls off. I said i didn't have a percentage, but showed him the discontinuation rate of the naiveive study.Discussed OxyCotin...I said dr. for those severe patients you are treating with Percocet- have you ever considered writing OxyCotin its a single entity q12h product. He told me i drank the Purdue Cool-aid already with a smile. Left the Butrans 3024 study behind and a OxyCotin
PPLPMDL0020000001	cleveland	OH	44135	8/29/2013	spoke to violet regarding location updates for drs and he is full time at this location. They told me i had to register thru vendormate. We tried to look up Purdue...but nothing came up. Left various information pieces behind for the doctor. Titration guide, 3024 butrans study.
PPLPMDL0020000001	fairview park	OH	44111	8/29/2013	Review of Butrans (captain) Louis Massaad pharmacy manager told me he would stock the 15mcg and asked for the ording information. To get from manager and will return. Reviewed the starting doses and the titration doses. Louis thought the 15mcg would do well as they see a lot of pain patients with the Moll Center down the street and Fairview Hospital. Discussed steady state and titration with Butrans. Also Discussed OxyCotin- the variety of (7) doses offered and the conversion from Percocet to OxyCotin. Discussed the abuse potential for both product.<font color=blue><b>CHUDAKOB's query on 09/17/2013</b></font>Lisa, what does the word in parentheses mean. Also i wanted to point out that the product is OxyCotin, not OxyCotin. Don't forget the "n" in the product name.<font color=green><b>BARTOLI's response on 09/19/2013</b></font>That is his name, which is on his name badge. And thank you for the spelling, I didn't catch the autocorrect.<font color=blue><b>CHUDAKOB added notes on 09/19/2013</b></font>Ohh I see...I think!
PPLPMDL0020000001	Stow	OH	44224	8/29/2013	I told dr that i have two solutions for her patients in moderate to severe pain. I asked her at what point does she make the decision to move her patients to an ER opioid? Dr said if differs for each patient but typically when they are in constant pain around the clock. I showed dr the Tom profile go OxyContin and asked her to choose OxyContin when a patient fits a similar description as Tom. Dr agreed. I told her about how she can use Butrans early on in treatment of pain for her tramadol patients and asked her if she has any? Dr said she does. I told her to pause before refilling it or titrating and think about Butrans as the schedule 3 7 day transdermal patch. Dr said she thinks it a good product and wants to use it but can't remember it. I showed her the slide guide conversion guide and told her to keep it on her station to remind her of Butrans. Dr agreed. I asked if she will use it and she said she would. Left her with the intermezzo dosing guide.
PPLPMDL0020000001	Fairview Park	OH	44126	8/29/2013	spoke to ma upfront and she said dr would only schedule lunch if something new or new product. I told her about the 15mcg and she is checking if that qualifies for a lunch. ma told me that dr uses butrans and oxycotin- i reviewed the commercial savings program with her. We discussed the OxyCotin conversion piece that shows the percocet and the OxyCotin. discussed that OxyCotin was a single entity q 12 hr product that might have a place with drs more moderate to severe pain patients that need around the clock analgesia. left various reading materials, butrans fpi, 3024 Butrans study and OxyCotin titration material
PPLPMDL0020000001	Stow	OH	44224	8/29/2013	I asked dr if he used Butrans because i thought i saw a prescription filled at the pharmacy? Dr said he refilled a prescription for a patient on the 5 mcg. I asked him to use it himself for a patient on tramadol that needs a dose adjustment. Gave him the initiation and titration guide and asked for him to use it. Dr said he is not opposed to it because he told me he could use a schedule 3 ER opioid for his short acting failures. I told him to continue using OxyCotin for his patients that need another ER opioid later on in the treatment of pain. Gave him the conversion and titration guide.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	8/29/2013	I asked dr what factors influence her decision on how to treat a patient when their IR opioid fails? Dr told me that usually it comes down to cost. Dr said many of her patients don't have much money and they need a treatment that works for little money. I told dr i understand but what about stints where money is not a factor? Dr said she likes to use Butrans as her first opioid because of the low dosing and being a week long patch. I agreed and showed her the formulary grid and explained the coverage. Dr said she forgot about the Medicare D coverage and will remember it.
PPLPMDL0020000001					

PPLPMDL0020000001	Berea	OH	44017	8/29/2013	spoke to jasmín the nurse today about OxyCotin and Butrans. We discussed the various dose strengths of oxycotin and that it was q12h single entity. nurse was hesitant taking the savings cards, but took them for the doc. Showed the scott profile, went over the tramadol patient not controlled with their pain and the pain is around the clock. Described/showed the demo patch and "scott" could be treated with just 4 patches a month. She asked about managed care. I covered commercial savings program. She said she would take the information to the doctor and call me if I can have an apt to see him.
PPLPMDL0020000001	Stow	OH	44224	8/29/2013	I asked Holly the pharmacist if she has seen any Butrans come thigh since my last visit? Holly said she has not and is surprised since Fouad, Lababidi, Jones and a alter are across the street. I discussed with her how they have 5 offices and patients come from all over. I asked her if she has any doses in stock and she said no. I asked if a patient comes in to fill it how long until she gets it in? Holly said 24 hours but if its after 7pm on Thursday, it won't come in until the next Monday. Holly said she will order in the 5mcg dose for me! I asked about OxyContin dispensing and she said they have all doses except the 60 and 80mg. I asked what she sees most from the doctors across the street and holly said a lot of Percocet and some OxyContin. I asked if she has dispensed intermezzo and she said no. Gave her the dosing card.
PPLPMDL0020000001	Cleveland	OH	44126	8/29/2013	spoke to the pharmacist about stocking butrans and they said maybe. Review of Butrans current dosages, that it was not a/b/rated and the only 7 day transdermal schedule 3 pain patch. OxyCotin, he asked if that was still promoted and I said yes. Talked about the different strengths and that it was a single entity opioid he said he had a patient cancer patient that comes in on very high doses and is doing well on it. Reminded that it doesn't have a ceiling/max dose yet it still has the abuse potential.
PPLPMDL0020000001	Tallmadge	OH	44278	8/29/2013	Quick call in lab and asked him to continue identifying patients for Butrans and if he had any patient feedback? Dr said the one that has had a follow up said it is working well with no issues. I reminded dr to use Butrans early for NSAID and tramadol failures. Told dr to not forget his patients with in the middle of the night insomnia and to use intermezzo.
PPLPMDL0020000001	Cleveland	OH	44111	8/29/2013	ma said that the doctor is at this office daily. I left some coupons that they share i'm told. I tried to see the doctor but she told me i could not go past the desk. I asked about vendor mate and she said her location doesn't do that. I showed her the butrans scott profile and asked if i could speak to drs nurse. answer no.
PPLPMDL0020000001	Cleveland	OH	44111	8/29/2013	spoke to the nurse- i have to call my company about being on vendermate w metro. Left various selling materials behind for the doctor- including butrans coupons.
PPLPMDL0020000001	Berea	OH	44017	8/29/2013	Spoke to nurse trying to get an apt with the doctors for Butrans. The nurse new nothing about the product other than it was a scheduled product which she said the doctors don't write schedule drugs. When I asked if all they wrote was tramadol, she paused. Discussed the patient types for Butrans and its place after tramadol fails. Nurse would not get me an apt to see the doctor, i left various education pieces for the drs with my card.
PPLPMDL0020000001	Berea	OH	44017	8/29/2013	I spoke to nurse to try and get face time with doctors about Butrans. However, the nurse said the drs don't write scheduled products and send out to pain management. I said so dr. troy doesn't treat patients with pain-secondary to a known pathology that needs an opioid around the clock? She said no. I said so they only write tramadol and no short acting schedule 3's? She was unsure. I explained That butrans was a 7 day extended release option for her pain patients that meet the criteria. That ideally- if the Tramadol wasn't working for the patient that Butrans might be an option next for that patient. She was going to pass the Butrans information onto the doctor and i gave them my card incase they want me to come discuss with the doctors
PPLPMDL0020000001	Stow	OH	44224	8/30/2013	Asked dr at window if he has found any additional patients for Butrans since we last spoke? Dr said he has refilled a couple of them. I told him to continue searching for those patients needing a dose adjustment on NSAIDs or ultram. Handed him the slide conversion guide.
PPLPMDL0020000001	Hudson	OH	44236	8/30/2013	I asked dr at window if he has patient on NSAIDs around the clock? Dr said he's sure he does. I asked him if he thinks all of them have their pain controlled? Dr said maybe not all and he knows that he can start Butrans for those non responders. I told him that is correct and showed him the Maria profile. Dr said he will look.
PPLPMDL0020000001	Akron	OH	44312	8/30/2013	Dr saw me and said Butrans! I asked him if he has used it anymore? Dr said no. I asked why and he said because it hasn't proved to be effective for his patients. I told him that one or two patients can to prove that it doesn't work. I told him that he needs to carefully identify patients and those need to be early on in treatment for good success that are on ultram around the clock and want more. I told him that low dose vicoden patients are good candidates as well. Dr said ok and he will keep trying. OxyContin conversions and asked for more business.
PPLPMDL0020000001	Akron	OH	44312	8/30/2013	Dr told me that he spoke to dr Midian about getting time for him and Butrans. Dr Midian said that he is still getting settled in his office and told dr Wells that he will get me in for Butrans. I asked dr to continue using Butrans and to get patients early on in treatment. Gave formulary updates.
PPLPMDL0020000001	Uniontown	OH	44685	8/30/2013	I asked dr at window how his patients are doing on Butrans as of late? Dr said he hasn't heard anything back from them so he said he assumes all is good. I reviewed the conversion guide and told him to ensure he titrates when necessary and steady state is 72 hours. Dr said ok and I asked him to continue prescribing.
PPLPMDL0020000001	Akron	OH	44319	8/30/2013	I asked dr Wu if he is ready to initiate Butrans for his patients in pain on around the clock tramadol or vicoden? Dr Wu said he's not sure and that it comes down to cost. I told him that we have discussed the excellent coverage for his patients and showed him the coverage go Aetna, medical mutual, Medco, and Caresource with PA. I told him that Butrans is a solution that his patients will be happy to have. I showed him again how to initiate and titrate th product and stressed that its a schedule 3, 7 day transdermal patch. Dr said ok.
PPLPMDL0020000001	Hudson	OH	44236	8/30/2013	Attempted to speak with Bonnie and she said she was super busy so make it snappy. Gave her the indications and doses for all products and asked about stocking. She said they have almost all the OxyContin and the 5mcg of Butrans. No intermezzo.
PPLPMDL0020000001	Berea	OH	44017	8/30/2013	Note- rewrote the call, twice. didn't save. Spoke to dr. about butrans. he had experience with the 20mcg and he said patients were doing fine. When asked which patient did he select for butrans it was one that failed a few short acting schedule 3 products. We reviewed the naiveive study..asked if he would ever think butrans after a nsaid failure? He did't answer. I said how about after a tramadol failure? He said yes. Went into the study..pain levels, patient types and outcome of the study. Pointed out these were patients never on an opioid before. Dr. agreed to writing butrans after Tramadol. dr. said he won't write oxycotin. I asked why? he said too many doctors getting in trouble for writing it. We did talk about the reformulation and also covered it was still had abuse potential. He said he was aware. I asked him if he was going to stop writing percocet too? He said no. reviewed the conversion, the single entity of OxyCotin and the q 12h. Dr said he still wasn't going to write it.
PPLPMDL0020000001	Munroe Falls	OH	44262	8/30/2013	I told dr that I needed to give her some formulary updates with Butrans and OxyContin. I focused in on her commercial, Caresource and BWC for Butrans and Medicare D for OxyContin. Dr said she is surprised there are so many plans cover aging Butrans and th copay card make a big difference. I asked her to continue prescribing for her tramadol failures. OxyContin Med D plans and asked her to continue switching her Percocet patients. I asked her to please continue to consider intermezzo for patients meeting the indication.
PPLPMDL0020000001	Akron	OH	44333	8/30/2013	Quick message at front counter and asked him if he is still trying to get more of his Percocet patients on the q12h OxyContin? Dr said he is always trying to get his patients on an extended release product. Dr said its been tough getting OxyContin to go through without ER morphine or fentanyl. I asked which plans and he said lots but mostly Med D. I told him I would look into it. I reminded him to us Butrans early on in treatment expecially for his tramadol and low dose vicoden patients. Dr said he is trying. Nothin else learned.
PPLPMDL0020000001	Akron	OH	44319	8/30/2013	Quick message about OxyContin and Butrans at the window. I told him that OxyContin and Butrans can satisfy his patients early on in treatment of pain and later on. I told him that OxyContin is a product that his patients on Percocet around the clock for q12h control and Butrans for his NSAID and tramadol patients who need a dose adjustment and are being treated for chronic pain. Dr said he uses OxyContin and really likes it and has not used Butrans. Dr asked about coverage and I showed him the formulary grid and expressed specific plan coverage to his patients.
PPLPMDL0020000001	Hudson	OH	44236	8/30/2013	I showed dr the Tom profile and asked him to please introduce the ER option of oxycodone when his Percocet patients are failing or can't tolerate it. Dr agreed to do more. I told dr that he needs another ER option for his patients earlier on in treatment like Butrans. I told him to put it in p,ace of vicoden when his patients fail tramadol. Dr said ok and he will try to remember.
PPLPMDL0020000001	Cleveland	OH	44127	9/3/2013	Intro. to Dr., Discussed Butrans 7day transdermal system, along with Scott profile(Tramadol failures). She usually refers out to pain management if they fail(very few patients anymore) She agreed to consider for appropriate patients, 99% managed medicaid- she does PA herself. Reviewed dosing/titration along with Patient info booklet. Also, Intermezzo for MOTNA along with dosing
PPLPMDL0020000001	Solon	OH	44139	9/3/2013	Spoke with pharm tech about butrans clinical trials. Asked who was responsible for ordering product and she indicated the pharmacist Michele. I asked about butrans 20 writers and she said there were a few pain drs I the area but she was it sure which ones. I asked if the turn around for all orders was 24 hours or if it was longer for opioids and she said it was the same. Reviewed dosing and administration of Intermezzo.
PPLPMDL0020000001	Cleveland	OH	44105	9/3/2013	Talked again with Rosalina, requested appt. with staff, left message with Dr. G. El-Khoury- Medical Dir. all requests are directed to him. OxyContin conversion guide along with Butrans Scott profile info
PPLPMDL0020000001	Solon	OH	44139	9/3/2013	Hallway call introducing butrans with clinical trial non opioid experienced patient. Discussed inclusion criteria, open label, 12 double blind and outcomes. Discussed titration tolerance of 53% discussed pain reduction scores from the open label study. Asked her thoughts and she asked me to leave information. Reviewed oxycontin dosing. Gave intermezzo indication and limitation of use.
PPLPMDL0020000001	Cleveland	OH	44127	9/3/2013	Intro/obtained office protocol. OxyContin 7 flexible dosing strengths along with Q12h. for those appropriate percocet Q4-6h patients. Dr. agreed. Discussed Butrans 7 day transdermal system for those tramadol/ultram failures, showed Scott profile, agreed he has some patients like that. Initiation/titration guide.
PPLPMDL0020000001	Cleveland	OH	44109	9/3/2013	Visited Oncology dept. Left OxyContin dosing/titration info. with Michele, forVi (Obrien,Crum, Hergenroder,Snell and Trey along with Fellows M.Treasure,T Gula, Leland Metheny) Ortho/Surgery dept. left info per Cheryl for Feighan,Bafus, Allain, Hoyer, Liu, Nash and Patterson. Requested to leave card for appt.
PPLPMDL0020000001	Cleveland	OH	44127	9/3/2013	Intro. office protocol learned-Talked with Renee- Discussed Butrans for those Tramadol failures, said Dr. RX's alot of Ultram/Tramadol. Dosing/Titration conversion. Intermezzo for MOTNA/dosing
PPLPMDL0020000001	Solon	OH	44139	9/3/2013	Quick window call. Quick reminder of OxyContin dosing. Asked dr to give me his thoughts on the butrans clinical non opioid trials the next time I can see him. Clarified intermezzo indication and limitation if use. Explained that there was a formulary win for Medco part d for butrans. Tried to communicate Medco insight but dr looked confused.
PPLPMDL0020000001	Cleveland	OH	44114	9/3/2013	Dr. has officially relocated here. I asked for those Tramadol failures, he will consider.Review BWC coverage along with OxyContin Q12h flexible dosing strengths. Best days to see is Thurs. Muenster,Bernie and Carson overlap for now
PPLPMDL0020000001	Cleveland	OH	44113	9/3/2013	Quick reminder on Butrans for those Tramadol/Lortab failures, she agreed along with intermezzo for MOTNA/dosing
PPLPMDL0020000001	Cleveland	OH	44105	9/3/2013	Reminded of OxyContin Q12h dosing, they see RX's written all different way. along with Butrans for those Tramadol/Ultram around the clock patients. Intermezzo for MOTNA/dosing.
PPLPMDL0020000001	Akron	OH	44310	9/3/2013	Spoke with dr about his Butrans prescribing. I discussed his last patient he placed on Butrans from Percocet. I showed him the nancy profile and showed him how his vicoden patients and the daily dose they are on converts to specific doses. I told dr that for a patient on three pills a day of vicoden and Percocet a day approximately converts to the 10mcg dose however he has the discretion to initiate as he sees fit. Dr said he usually will follow the scale but he felt this particular patient should start on the 5mcg. I told dr that 62% of patients in the opioid experienced trial were on hydrocodone combinations. I asked for his continued support and showed him and char the new Medco/ESI Medicare D flyer. I asked him to take his Percocet patients that are refilling month after month to be placed on the q12h oxycodone and gave conversion chart. Intermezzo dosing and patient
PPLPMDL0020000001	Solon	OH	44139	9/3/2013	Spoke with Karen the floater about butrans 20 usage and she said in her experience she sees more 20 than 5. I reviewed the clinical trials and she thought the pain score reduction in the open label portion of e study was interesting. She thought this part of the study would be useful for doctors to know. Reviewed start principle 25-50% increase in the dose of OxyContin every 1-2 days. Reviewed intermezzo indication and limitation of use.
PPLPMDL0020000001	Cleveland	OH	44109	9/3/2013	Very busy post holiday weekend, no new info gained. Reminded of Butrans for those Tramadol/Lortab failures taking around the clock. Intermezzo for MOTNA/dosing.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	9/3/2013	Spoke with bob the pharmacist and Carla the technician about products. I asked about fill rates for Butrans and discussed dosing, conversions and patient selection. Bob said they have one of the 10mcg in stock because they have a regular customer on it. I asked if he would order in the other starting dose at 5mcg? Bob said once they see a prescription they will order it. I told him how many patients want it the day they bring in the prescription and if the pharmacy doesn't. Have it the customer will go somewhere else. Bob said he can't keep it on the shelf if its not moving. I asked about OxyContin doses and he said they have all doses and fill it regularly. Showed conversions and discussed managed care for all products. Intermezzo dosing, limitations of use and Carla said they have not dispensed.



	Cuyahoga Falls	OH	44221	9/3/2013	Spoke with Katie the pharmacy manager and pharmacist. I asked her any her familiarity with Butrans? Katie said she has filled it before but it has been a while. I discussed the dosing, conversions and nancy patient profile. I asked about stocking and she said they will order it when they get a script and it is 24 hours if it is in by 8pm the day before. Discussed OxyContin dosing and which they dispense most. Martinet said she fills mostly the 15, 30, 40, and 60mg doses but has all in stock. I asked about dispense rates and she said they do most fills for tramadol 120 pill count, then Percocet then vicoden. I showed katie the OxyContin conversions and discussed Percocet to OxyContin. Intermezzo dosing and patient profiles and limitations of use. Katie said they have not filled it.
PPLPMDL0020000001					
PPLPMDL0020000001	Cleveland	OH	44113	9/3/2013	Quick Butrans reminder for those LorTab failures along with Intermezzo for MOTNA/dosing
PPLPMDL0020000001	Cleveland	OH	44102	9/4/2013	Talked with Mike/Alyce-tech, discussed OxyContin Q12h, requested savings card. Mike-Agreed to distribute Butrans patient info booklets to appropriate patients, Intermezzo for MOTNA/dosing
	Parma	OH	44129	9/4/2013	Window call reminding dr of using OxyContin 15 and 30 strengths. Asked dr if he would review the butrans opioid naive study findings so we can review them at our upcoming lunch. Reviewed managed care wins with staff.-b>FROM LAPTOP(WFB2VWP1):</b>-b>window call and dr asked be about new developments with butrans. I told the dr that I have some managed care wins and communicated cigna and medco part d wins. I told the dr that I had new information I learned in training about the clinical trials and he had to leave but I told him I will leave the trials with him an I wanted to specifically discuss his thoughts on what improvement in pain does he consider clinically important. reviewed doses of oxycontin. asked dr if he remembered intermezzo and said that is the first step.
PPLPMDL0020000001					
PPLPMDL0020000001	Cleveland	OH	44195	9/4/2013	Left Butrans Patient info booklets for Pharmacy to distribute to appropriate patients
PPLPMDL0020000001	Akron	OH	44313	9/4/2013	Told dr that he needs to use OxyContin for his patients uncontrolled on Percocet or need a dose adjustment. Dr said he is trying to use more ER opioids instead of the short acting. I reminded him about the conversions from Percocet and managed care coverage with OxyContin. I asked if he will take a minute to consider OxyContin before refilling Percocet? Dr said ok.
PPLPMDL0020000001	Uniontown	OH	44685	9/4/2013	I asked dr a alter if it makes sense to use Butrans for a patient that needed a dose adjustment? Dr said it does and reminded me that he tries to get his stints on ER products as soon as possible. I asked him if he would use Butrans today and for those patients uncontrolled on their IR opioid? Dr said he has lots of patients today so he will do his best. Reminded him to use Butrans for his patients that have Caresource and told him about the OA.
	Akron	OH	44320	9/4/2013	Short discussion with dr about her Percocet patients and what she typically does when a patient on Percocet needs more? Dr said it depends on the dose but said that Dr Bonyo said that they will refer to pain management once a patient reaches 40mg of IR opioids. I asked about patients on 20mg of IR oxycodone and showed her the conversion from the guide? Dr said she gets it but that Bonyo doesn't wasn't to prescribe it. I asked her what her thoughts are on that? Dr said its on a case by case basis. I told her to use Butrans early on in treatment and showed the Scott profile. I asked her to continue prescribing especially since she has had good success.
PPLPMDL0020000001					
PPLPMDL0020000001	Parma	OH	44129	9/4/2013	Spoke with Nicole about butrans clinical trials and explained what I am currently telling doctors. She asked about what patients should do if the patch falls off and said she told them tegaderm and I said first aid tape around the edge is the first preference. Reviewed OxyContin dosing and start principles. Gave intermezzo indication and showed the demo.
PPLPMDL0020000001					
PPLPMDL0020000001	Parma	OH	44129	9/4/2013	Window call. Let dr know answer to his caresource question and also told him I was leaving information on the clinical trials for non opioid patients and I would like to review the findings of the study next time. I asked would he consider a 30% reduction in pain clinically important. Dr said he would look at the information.
PPLPMDL0020000001	Parma	OH	44129	9/4/2013	Asked Elaine her thoughts on butrans and she said she did not know why someone would use with an opioid. I clarified if she was asking because of buprenorphine and she said yes. I explained the difference in mcg/hr vs mg using FPI table 5. She asked about receptor binding and I explained partial agonist at the mu receptor similar to a half full glass of water, in that it leaves room for other activity. Discussed appropriate dose and use with ir for breakthrough pain. Asked if this made sense and she said this did help clarify. She said she does not write OxyContin. Reminded her of the intermezzo patient in need of help with motna
PPLPMDL0020000001					
PPLPMDL0020000001	Parma	OH	44129	9/4/2013	Dr said he wrote a script of butrans and I asked him what did the patient present with that prompted him to write and he said he did not remember. I reminded him of the patient type and showed him the inclusion criteria in the non opioid clinical trials. I asked if he had patients like these and he said he has osteoarthritis and said those patients are everywhere. I reminded him that he has been in practice 17 years and would he agree at some of his patients have grown older under his care and he does not send them out to pain management. He agreed and I asked him to write butrans instead of tramadol for patients like these with chronic pain. He said he would continue. I reminded him of flexible dosing of OxyContin. Reviewed dosing of intermezzo.
PPLPMDL0020000001					
PPLPMDL0020000001	Parma	OH	44129	9/4/2013	Spoke with his nurse about the changes in the office and she confirmed the dr is still with the practice after the UH buyout and I will be allowed to have my October lunch. Reviewed the titration guide for OxyContin and asked if she would pass the information to the doctor in advance of our meeting in October
PPLPMDL0020000001	Akron	OH	44320	9/4/2013	Primary message with Butrans was managed care today. I told dr about the Butrans coverage on commercial prescription plans and how her top 5 plans have Butrans on either 2nd or 3rd tier. I asked her if she has commercial prescription patients on IR opioids? Dr said she dos for sure. I asked her that those patients are the path of least resistance for Butrans and reviewed copy cards and information guides. I asked her if she will use Butrans for that patient population? Dr agreed to start looking. I showed her the conversion and titration scale for OxyContin and asked for more business on those uncontrolled Percocet patients.
PPLPMDL0020000001	Cleveland	OH	44195	9/4/2013	Visited CCF Walker bldg Pain/Anes.Michaeyla had to reschedule fellows appt. Left info Initiation/Titration guide with fellows. Talked with Anne-Butrans and OxyContin Q12h flexible dosing. Left Opioid-Experienced trial along with Initiation/Titration guide for Stanton-Hicks/Leizman. Left Butrans initiation/titration guide with NEURO-C-25 Bamford
PPLPMDL0020000001	Cleveland	OH	44195	9/4/2013	Reminded of OxyContin Q12h flexible dosing along with excellent formulary coverage. (For those percocet patients taking around the clock. She will keep in mind.Reviewed Butrans for those Tramadol failures, said she will keep reminding Dr.'s as well. Left her with Butrans dosing/titration guides to make available to staff
PPLPMDL0020000001	Akron	OH	44313	9/4/2013	Spoke with the technician about Butrans dispensing and stocking. Was told that they have one box of 5 and 10mcg in stock and do have patients on both doses. I discussed the doses and titration with conversions.
PPLPMDL0020000001	Cleveland	OH	44113	9/4/2013	OxyContin doses, conversions and titration. Pharmacy has all doses in stock. I asked about intermezzo dispensing and stocking. Was told they have not filled Andy and have the 1.75mg in stock.
PPLPMDL0020000001	Fairlawn	OH	44333	9/4/2013	Left Card and OxyContin/Butrans Titration/Conversion guides for Jeff
PPLPMDL0020000001					
PPLPMDL0020000001	Fairlawn	OH	44333	9/4/2013	Discussed Butrans dosing, titration, conversions, patients types and copy cards? I asked dr to explain to me how he treats pain and he told me he prescribed Butrans about three weeks ago but the patient could not afford it. I pressed him on the patient information and he told me the patient was cash paying and had no insurance. I spoke to him about focusing on patients with private insurance, Caresource and BWC. Dr said they do not take BWC but said he's impressed about Caresource with the pa. I asked for him to continue using for patients like Scott with private insurance. OxyContin dosing, conversions and patient types.
PPLPMDL0020000001					
PPLPMDL0020000001	Fairlawn	OH	44333	9/4/2013	I asked dr if he is continuing to use oxycontin for his patients uncontrolled on Percocet? Dr said he is trying but many patients are required to use MS Contin first. I asked him if that is for Medicare or Medicaid patients IR which patient population is that for? Dr said he can't remember but he thought that they have been Medicare D patients. I explained commercial coverage and Medicare D coverage and asked for his continued business after explaining the Tom profile. Discussed Butrans patients types, titration, and copy cards. I asked dr to use it more often for his tramadol failures. Dr said ok.
PPLPMDL0020000001					
PPLPMDL0020000001	Parma	OH	44129	9/4/2013	Short talk with Gilbert the pharmacist about products. I talked about stocking all products and doses and Butrans and OxyContin titration. Talked about Butrans Medco/ESI Medicare D coverage. Gilbert said he has all doses of each in stock along with intermezzo doses. Gilbert said he has filled intermezzo for Higley.
PPLPMDL0020000001					
PPLPMDL0020000001	Parma	OH	44129	9/4/2013	Window call while talking to mary. Asked dr how she treats chronic pain. Dr said she likes butrans but has not been using much lately because she has not been in the office. She said she will be out of town again next week. I left the OxyContin titration guide and asked her to think of it as a reminder of flexible dosing. Quickly reviewed intermezzo indication and limitation of use.
PPLPMDL0020000001					
PPLPMDL0020000001	Parma Heights	OH	44129	9/4/2013	Quick call, asked dr to review the clinical trial pain score improvements for butrans and let me know her thoughts next time I see her. Reminded her of OxyContin dosing and administration. Sowed her intermezzo demo pack and gave indication and limitation of use.
PPLPMDL0020000001					
PPLPMDL0020000001	Fairlawn	OH	44333	9/4/2013	Spoke with Rajesh the tech about movement of OxyContin and butrans. He said he is seeing more butrans and I asked about strengths. He said he mostly sees the 10. Reviewed what I tell doctors for the butrans opioid naive trials. Discussed the oxycontin start principle. Showed the Intermezzo demo and explained how it to administer-<font color=blue><b>CHUDAKOB's query on 09/19/2013</b></font>-Marcia, this call note is three days late. We discussed this and you stated that your iPad was giving you trouble. Your laptop is a backup for the iPad and the SAFE system is a backup for the laptop. Call notes should never be entered three day late. We have too many backups to ensure this doesn't happen. Please reply to ensure you understand this.<font color=green><b>KENNOMA's response on 09/19/2013</b></font>-I understand the requirement and the backup options.<font color=blue><b>CHUDAKOB added notes on 09/30/2013</b></font>-Thank you!
PPLPMDL0020000001					
PPLPMDL0020000001	Westlake	OH	44145	9/4/2013	Discussed products with dr in office along with dr Balter. Dr told me that he will see about 40 patients today and needed to go. I told him that I'm convinced he will see many of those patients who are appropriate for Butrans. I told him to start it as early as possible in the treatment of pain and told him about the tramadol patient. Dr agreed he likes it and said he knows he could use more. I reminded him about the Caresource coverage and the PA criteria. Dr said he forgot about that and was impressed and said he should be using it a lot more. I asked for him to use it more! Gave him the OxyContin conversion guide and told him to start using the 10mg q12h dose for the 20mg Percocet patients .
PPLPMDL0020000001					
PPLPMDL0020000001	Cleveland	OH	44113	9/4/2013	Introduction. Dr told me he loves Butrans. I asked what doses have been working for you patients he said 20mcg and he has a patient doing a 5 and 10. I said why don't u just write the 15mcg. He said , there's a 15! He told me about a patient that went from an immediate release product to Butrans and its working so well. We discussed plasma levels of Butrans and the doctor said that was the pain reason he writes it. He wants to get it on formulary at St. John west shore and he said he would help however he can. I said woulda write a letter and he said yes. Also discussed OxyCotin, he said he was very familiar with the product. Reviewed the conversion from Percocet and managed care for both products.
PPLPMDL0020000001					
PPLPMDL0020000001	Cleveland	OH	44113	9/4/2013	Discussed treating pain, and Dr. has discontinued all opioids, refers out to Pain Mgmtm. went over Butrans for those Tramadol/Ultram failures that will be referred to Pain mgmtm, said she would consider. Intermezzo for MOTNA/gender dosing. Trial offer, has alot of patients that complain of MOTNA, will consider
PPLPMDL0020000001	Cleveland	OH	44113	9/4/2013	Dr. Has moved and joined the CCF Lutheran. Hospital. Quick Butrans reminder(Tramadol failures) and Intermezzo for those patients suffering MOTNA . Said she ok, will consider. Stop Back in a week or so to book lunch appt.
PPLPMDL0020000001	Cleveland	OH	44125	9/5/2013	No new prescribers, OK with savings cards
PPLPMDL0020000001	Richmond Heights	OH	44143	9/5/2013	Dr Ashraf What % of patient base is Medicare part d? over 30-40% yes. id say 50% or greater. Managed care insight. says OxyContin too expensive, starting writing oxycodone. Thats shocking & first time ive heard that from an HCP. Discussed commercial & med d coverage left grid & how our \$90 savings card with first \$25 out of pocket can give his patients preferred tier access. He says that sounds reasonable & he will start using cards. Great! Butrans hrs not familiar with.Wants efficacy data & how does Butrans compare to efficacy of Fentanyl which he IS familiar with. Purdue doesn't have any head to head studies with Fentanyl, but I can share with you data from 2 twelve week efficacy & safety trials (I focused on opioid experienced) & appropriate patient selection, dosing, titration, steady state, supplemental analgesia. Left opioid experienced trial. You might want to ask a pain management dr over at Hillcrest for further info & maybe they can help answer a few of your questions. That's a good idea he responded. Intermezzo for MOTN awakening insomnia patients, indicated as needed for MOTN insomnia when patient has at least 4 hours bedtime remaining. Gender dosing, sublingual, spearmint flavor.
PPLPMDL0020000001					
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	9/5/2013	I asked dr to continue using OxyContin for his patients on Percocet who need a dose adjustment or the patients ask for a change. Dr said he continues to write OxyContin because it works and is well covered. I follow up with him from our last conversation when he told me that a patient on Caresource was rejected on Butrans even though the patient had a history of vicoden. I told dr that I checked with anew choice pharmacy and they got the prescription. The patient had Buckeye and not Caresource and that's why it was not paid for. Dr said that its good to know because he hasn't found issues with Caresource because he somehow remembers Caresource for Butrans. I told him to continue thinking that especially for patients uncontrolled on tramadol. Dr agreed and thanked me for following up.
PPLPMDL0020000001					
PPLPMDL0020000001	Garfield Hts	OH	44125	9/5/2013	Spoke with Deena, Dr. running late. Asked if he has started any new patients on Butrans? She said not sure, thinks he has 1 patient.
PPLPMDL0020000001	Mayfield Village	OH	44143	9/5/2013	Spoke with techs & female pharmacist. while I realize you don't dispense scheduled pain meds such as my 1 x week CII pain patch Butrans, or CII controlled release OxyContin, I wanted to stop by & leave this brochure, because Sept is national pain awareness month. That way if patients or caregivers of patients with pain need educational resources, you can direct them to appropriate website.
PPLPMDL0020000001					
PPLPMDL0020000001	Beachwood	OH	44122	9/5/2013	Spoke with hoosheng the pharmacist who asked about Purdue sponsoring a pharmacist association. I told him to get me more information and I would see. Asked who orders the opioids and he said Dan the head pharmacist. Reviewed clinical trials of butrans non opioid patients. Discussed the start principle for OxyContin. Reviewed dosing and administration of intermezzo. Pharmacy requested vouchers.

PPLPMDL0020000001	Cleveland	OH	44195	9/5/2013	Visited Rheum/Ortho of Atrium bldg Left materials, obtained Dr. NP-A50- L. Calabrese Vice Chair, his nurse is Betsy Kirchner NP, A.Khasnis MD, A.Kontzas MD, Elaine Husni MD-Director Arthritis/Muscul. Ctr Dir. Of Outcome. B.Mandell MD, Scott Burg MD. B. Long MD, NP&#8217;s;Katherine Tuthill , Tiffany Clark, Deshawn Jones NP, Matthew Bunyard MD- Dir. Clinical OperationsFound out- Abby Abelson MD- Chair Dept- Education program &#8211; info /request apptAssoc. Fellow Dir. S.Chatterjee Fellows- A. Morales-Mena MD, Niofar Syed MD, Aleksander Lenert MD, Michael Lucke MD, Lam Azar MD, Christopher Chong MD,
	AKRON	OH	44319	9/5/2013	Spoke with Barry the pharmacist and asked him if he is familiar with Butrans? Barry said he is and has filled it in other stores. I asked him if he is a floater or is this his store? Barry said its his store and said that Marc's is not a store that will fill Butrans because it is too expensive for their customers. I asked why and he said because 75% of their business is Medicare D and the other 25% is Medicaid. I told him that Butrans is not too expensive for those patients. I explained the Medicare D plan coverage and asked him if he sees Caresource patients? Barry said yes. I explained the Caresource PA and then copy card. Barry said the coverage I discussed is new to him and thanked me for the info.
PPLPMDL0020000001	Garfield Heights	OH	44125	9/5/2013	Reviewed Butrans/OxyContin savings card, Mostly caresource at this location, no new prescribers in the area
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	9/5/2013	Showed dr the patient profiles for OxyContin and asked her if it makes sense to initiate OxyContin for those patient types? Dr said it does. I asked her if she has patients like them in her practice? Dr said for sure. I asked her to switch those patients and to use the q12h OxyContin instead of refilling Percocet.
PPLPMDL0020000001	Akron	OH	44308	9/5/2013	Spoke with Jess and Kristen the nurse manager about a possible OxyContin inservice for the fellows and residents. Kristen said there is a possibility but it will be hard to get them all together. I claimed the new label update for OxyContin and gave her a conversion and titration guide along with an updated FPI. Kristen said she will speak with the director about the inservice.<font color=blue><b>CHUDAKOB added notes on 09/16/2013</b></font>Nice work. Stay on top of this one. It could lead to something big.
PPLPMDL0020000001	Mayfield Village	OH	44143	9/5/2013	Dr Azar you have a large Med D population, and I'm sure some of those patients have chronic pain yes? Well, I don't have as many pain patients as Dr Price, he responded well that's fine, Butrans for those with moderate to severe chronic pain, with conditions such as : ( used patient profiles in new titration guide, Butrans the only CIII opioid option on market. How could this 1 x week pain patch benefit your Medicare d patients? No answer. Well think about it, and, Butrans is now preferred on 2 large national med d plans, Medco & Cigna. So your med d patients have access to a 1 x week pain patch for their moderate to severe chronic pain. Dr asked so you can't use for acute pain? No, according to Butrans indication. Currently there are 3 doses & you can titrate as needed, what do you mean hen asked? Steady state is 72 hrs so if patients need more analgesia, you can titrate from 5 to 10 or 10 to 20 within 72 hrs. Ok. ( he was looking at how to write) on back cover. And for those patients with more severe pain, you have OxyContin controlled release as CII option. You have OxyContin? Yes I replied Purdue specializes in pain management, and we also have Intermezzo for your patients suffering from MOTN insomnia. In addition, Purdue manufactures OTC laxatives & a magnesium supplement, Slow Mag. Why don't you leave us samples then? I will, all you have to do is ask. Left 1 box of Senokot S, Colace & Slow Mag. Explained to office staff why I was leaving (OTC products TOP SHELF)
	Cuyahoga Falls	OH	44223	9/5/2013	I asked dr if he has any patients that he refills Percocet for each month? Dr said he has a few. I showed him the conversion guide and asked him if it makes sense instead of refilling the IR if a patient is in pain around the clock to start the ER Oxycontin? Dr said he tries but cost is come times an issue for Medicaid or cash patients. I told dr to focus on the Medicare D and commercial patients. I gave dr the Butrans initiation and titration guide and asked him to use it early on his tramadol nonresponders. Dr said he remembers it but has not used it. I told him that it is a good option for patients failing on NSAIDs or tramadol.
PPLPMDL0020000001	Stow	OH	44224	9/5/2013	Spoke with Holly again about ordering the Butrans 5mg patch. Holly said she will order it today. I explained the doses and steady state at 72 hours for titration and new managed care updates.
PPLPMDL0020000001	Stow	OH	44224	9/5/2013	Dr told me she didn't have time but I told her to use more OxyContin for a patient who had moderate to severe pain and gave her a OxyContin conversion and titration guide. Nothing else learned.
PPLPMDL0020000001	Akron	OH	44312	9/5/2013	I asked dr if she has had the need to titrate any of her patients through the three doses of Butrans? Dr said she has titrated to the 10mg but none on the 20mg. I showed dr the Butrans decision tree and asked her if her patients needed more than the 10mg if she would feel comfortable titrating to the 20mg? Dr said she would but it would depend on the patient. I asked her to not take a limited response to the 10mg as a product failure and to titrate to the 20mg. Dr said she would. I asked her about the UHC patient on Butrans that needed to be on ER tramadol first and if the patient has had a follow up appointment? Dr said thanks for reminding her and the patient has not had a follow up but is due for one. I told her about the new ESI/Medco Medicare D coverage as well as SummaCare and Cigna. Dr said she is glad to know it is being picked up by more plans. I asked for continued use of Butrans for her tramadol patients needing a dose adjustment or can't tolerate it. Dr said ok.
	Cuyahoga Falls	OH	44223	9/5/2013	Caught dr in hallway of his office and showed him the Butrans initiation and titration guide. I asked him if he is still prescribing it and if not, why? Dr said he likes Butrans and said he will try to remember it. I told him to take the guide to help. Dr did so.
PPLPMDL0020000001	Mayfield Village	OH	44143	9/5/2013	Lunch meeting. Kristy writes under Dr Mukunda. If a patient needs a CII & is chronic pain patient, they worry about abuse & refer to Hillcrest pain management. OxyContin presented, q12h dosing resented, 7 doses. Presented START principles which she liked, she now knows steady state is 24/36 hrs, hence titration in 1-2 days possible. Eff conversion/ titration guide. Left reformulation information. She wanted to review section 9.2, of FPI. she may write a refil. But won't initiate new OxyContin Rx. Butrans is new to her. Full detail. Patient selection, Patient profiles used in newest piece. How to write, titration possible after 72 hrs. Why supplemental analgesia used in our 2 clinical. Trials on safety efficacy of Butrans. Pregnancy category C. She can think of a few female patients who'd be appropriate. Next time I'd like to go over pain reduction scores in our clinical trials.
PPLPMDL0020000001	Brooklyn	OH	44144	9/5/2013	Quick reminder on OxyContin,Q12h flexible dosing strengths. Asked for those Tramadol/ Ultram failures that are needing around the clock pain therapy. Intermezzo for MOTNA/dosing. He said thank you and will keep in mind.
PPLPMDL0020000001	Brooklyn	OH	44144	9/5/2013	Discussed OxyContin Q12h flexible dosing strengths, Dr. was not aware of all strengths and new formulation. Discussed Butrans and her pain patients that fail on Tramadol,said she would consider, but most of her pain patients are cash payors and couldn't afford Butrans, followed up with, Do you have at least 1 commercial insured patient or Express Script patient that she is treating for pain? Said she will see what she can do/Intermezzo for Dr Krishnan, since a large part of your patient base is Medicare Part D I'm sure it's difficult for your patients 65+ to get access to branded medications ? Yes. What % of your patient population would you say is Med D age? He replied 30-40%. And the other, a mix of age 30-50's ? Yes, a mix he replied. For those 30-40% that may have chronic pain, how do you manage their pain? I will write scheduled meds Butrans its rare. I will refer out because of the volume & complex nature of each patient, I'm too busy to focus on pain management. who do you refer out to? Hillcrest Pain Management. Dr Saeed, Dr Laham etc. getting back to Med D patients, 2 large Med D plans, Medco/ express Rx & Cigna, now cover Butrans at preferred tiered copay. Think about what this could mean for your Med D patients with moderate to severe chronic pain. You have a CIII option, that you can call in with refills. I want to think about patients on IR Tramadol. And they keep getting refilled month after month. Marketing studies show patients will stay on IR products for over 262 days. So when does a long acting product come into play? After 3 months, after 6 months, after 10 months? I'd just like you to consider a long acting agent, such as Butrans, that patients wear for 7 days. Just 4 patches per month. What do you think ? Sounds good. We've discussed OxyContin in the past. Will you write OxyContin? No. Why not? again, I don't want to manage pain on that scale. If its complicated case, I will refer out.
PPLPMDL0020000001	Mayfield Village	OH	44143	9/5/2013	Dr Mukunda this is the 1 st time I've seen you at lunch since I joined Purdue. Purdue specializes in pain management & my products are controlled release OxyContin, a CII, Butrans a CIII 1 x per week pain patch & Intermezzo, CIV insomnia agent indicated as needed for MOTN akening when patient has at least 4 hrs sleep left. OxyContin is indicated for moderate to severe pain wen an opioid analgesic is needed Around the Clock . Are you familiar with updates to section 9.2 of our FPI? No he responded. Abuse deterrent studies added, here's a piece I can leave you. I've tried to write OxyContin & its not been covered on many plans & too expensive so I've stopped writing, that shocking to me, because we have broad formulary coverage or both your commercial & Med D patients. I will leave you a formulary grid. If we can put that aside, we have savings cards in sample clock. Patient pays first \$25 out of pocket, and up to a total of \$90 off each months co pay. Ok that sounds reasonable, I will try & remember savings cards. Great! For Butrans, you have a CIII 1 x week pain patch indicated for moderate to severe chronic pain when opioid analgesic needed ATC.How does the efficacy compare to Fentanyl, as I'm only familiar w Fentanyl. Do you have any data? No, we have no head to head studies. Here's our dosing guide, went through OPIOID naive & experienced patients, then OPIOID experienced pain reduction data, I would call a peer in pain mgt & they may be able to help.Steady state, supple<font color=blue><b>CHUDAKOB's query on 09/19/2013</b></font>jenny, this was a call that falls into what we discussed on our work session. You have to sell efficacy first. Section 9.2 should be an end of the call discussion, not the beginning. Looks like you had a very captive audience. When you walked out of the call, did you feel he would prescribe your product? Which product was your primary focus?<font color=green><b>BALLIE's response on 09/19/2013</b></font>Butrans would be more likely to be written by Dr Mukunda. I apologize, I got this note mixed up with dr Ashraf response regarding trying to write OxyContin, & it not being covered, etc. this should not have been contained under dr Mukunda notes. Dr Mukunda much more conservative when it comes to pain management. I focused majority of my presentation on Butrans, as dr Mukunda would be more likely to write Butrans over OxyContin. He does not want to write CII for his patients.<font color=blue><b>CHUDAKOB added notes on 09/19/2013</b></font>-Ok. A any rate, the point about section 9.2 still applies. Thank you!
PPLPMDL0020000001	Cleveland	OH	44144	9/5/2013	Discussed Butrans for those Tramadol/ Ultram failures, feels most of her patients are adequately controlled, but will keep in mind. OxyContin Q12h flexible dosing strengths and Intermezzo for MOTNA/dosing - likes molecule and has a few patients that complain of MOTNA- will consider
PPLPMDL0020000001	Lyndhurst	OH	44124	9/5/2013	Met w office coordinator. Begged her to see Dr Reed. Told her the last time I was able to speak with her was April 16 th - which is almost 6 ms! Can she just come up to front window for 60 seconds? She stated I'm sorry, just impossible today. Not a good day. Informed staff of Medco & Cigna wins for Butrans. OxyContin Med D coverage, grids left. She will ask dr reed for permission to display my pain awareness month brochures. LEFT one for each HCP & 1 pack. Forget about new Dr Roda!! BE SURE TO ASK TO MEET HER next time.
PPLPMDL0020000001	Lyndhurst	OH	44124	9/5/2013	Karen was flying by front desk drinking coffee. Was able to get out Butrans now preferred Cigna Med D & Medco Express Rx med d. She had to catch up on several phone calls. Met with Diana. Left orange PAP web k for Karen, Butrans med d flashcard, OxyContin med d grid. Diana September is national pain Arlene's month, can u DISPAY these non branded brochures.? I will ask dr Reed. I forgot about dr Roda. Don't worry says Diana, I will make sure she sees all.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	9/5/2013	Spoke with Glenn the staff pharmacist in the hospital. I gave him the formulary updates with Butrans and asked him if there have been any issues about getting it covered recently? Glenn said none that he knows about and that things are going pretty well. I reminded Glenn about the OxyContin label update and abuse deterrent studies. Glenn said things are also going well with OxyContin but many patients on Medicare d p, and still need to fail MS Contin prior to OxyContin. I asked him which p, and he couldn't remember. I asked him to keep those plans in mind when there are issues so I can help figure them out.
PPLPMDL0020000001	Cleveland	OH	44106	9/6/2013	Quick Butrans reminder, patient info booklet, no new prescribers said she was swamped Ashleigh-RPH tech called off.
PPLPMDL0020000001	Cleveland	OH	44103	9/6/2013	Went over OxyContin Q12h, Butrans for those Tramadol failures, agreed he would hand out Butrans patient info to appropriate patients. Intermezzo for MOTNA
PPLPMDL0020000001	Cleveland	OH	44195	9/6/2013	Multiple MSI emails with Dr. Henry, Dr. Appachi, Ms. Cassano, and Ms. Lach to plan meetings on 9/9/13.
PPLPMDL0020000001	Akron	OH	44310	9/6/2013	I showed dr the tramadol patient type Scott and reviewed the profile. I asked dr if he will initiate Butrans instead of starting another IR opioid? Dr said he will as long as it doesn't cost too much. I told dr that the odds are with him and not against him when prescribing Butrans for most commercial plans, Caresource, BWC, and discussed Medicare D plans. Dr said he is impressed with the Medicare D plans and will use it.
PPLPMDL0020000001	Parma	OH	44129	9/6/2013	Window call. Asked dr about to remember some of the lower doses for her patients whose pain may not be as severe but it is still chronic. She said she writes OxyContin and would like some more senakot.
PPLPMDL0020000001	Brooklyn	OH	44144	9/6/2013	Went over All three products, no new Butrans or Intermezzo scripts
PPLPMDL0020000001	Cleveland	OH	44113	9/6/2013	Intermezzo reminder, Dosing/MOTNA. Dr. said he is prescribing. Quick Butrans reminder for those Tramadol patients who he sends to Pain mgmnt
PPLPMDL0020000001	Parma	OH	44129	9/6/2013	Asked dr to describe his last butrans patients and what made him think of butrans. Dr said he used the vouchers I put on this desk at my last visit and that reminded him. I asked what did the patients present with and he said he wasn't sure but he needed to change their medication. I reviewed the formulary win for Medco. Reminded dr of OxyContin dosing flexibility. Showed him where his intermezzo vouchers were located and reviewed dosing. Showed the patches and dr said he has not used butrans like he should. I asked if he knew who the butrans patient was and I should the inclusion criteria and open label pain reduction scores. He said he will keep in mind but he has written intermezzo. Dr had to get back to patients but I gave him OxyContin flexible dosing reminder.
PPLPMDL0020000001	Independence	OH	44131	9/6/2013	Told dr that he can use Butrans for his patients that are opioid naive. Dr said he knows and probably won't use it of those patients. I asked why and he told me that he wants to try an opioid like tramadol first to see how they respond. I told him I understand but if a NSAID patient is in enough pain and has a chronic condition, he can use Butrans as an option. Dr agreed. Gave him and Kelly his ma new managed care information.
PPLPMDL0020000001	Uniontown	OH	44685	9/6/2013	

PPLPMDL0020000001	Hudson	OH	44236	9/6/2013	Reviewed patient types for OxyContin and asked him to grow his business when he has patients that are continuing on their IR opioid such as Percocet. Dr said he doesn't have many on Percocet but will continue to think more about using. I explained the copy cards and dr said he doesn't remember seeing them. I placed them in his sample closet based on his recommendation. I asked dr why he isn't using Butrans? Dr said he doesn't know but has a hard time remembering. I told him he continues to tell me that and he should just use it clinically and allow it to prove itself. Discussed NSAID and tramadol patients and conversions.
	Sagamore Hills	OH	44067	9/6/2013	Dr said he does not and will not prescribe scheduled products. I reviewed the studies and asked about osteoarthritis patients and he said he will not prescribe for them either because he has his license from Florida and there his training was that only pain management drs should prescribe. He said he is close to retirement and will not change. I confirmed that this was his feeling about butrans and OxyContin. I reviewed intermezzo and he said he sent these types of patients to psychiatry. I thanked him for his honesty and asked if a patient came from pain management on these drug what would he do and he said he would turn them away.
PPLPMDL0020000001	Hudson	OH	44236	9/6/2013	Dr told me that he prescribed Butrans this morning and OxyContin yesterday. I asked dr for more info and he told me that he has a patient on vicoden and actually told him that he wanted something different. Dr said that he now has gotten to the point where he discusses the Butrans option earlier on in treatment when a patient on IR opioids needs more. Dr said he moved a stint from Percocet to OxyContin and was on high doses of Percocet. Dr said that he started on 40mg of OxyContin q12. I discussed patient types with dr and explained in detail the Maria NSAID profile and Scott. I told him to continue using it early on in treatment. Dr told me that he has found it much easier to convince a patient to use Butrans earlier in treatment. Discussed the formulary coverage and med D plans. Dr was impressed with Medicare D plans especially Medco/ESI. Intermezzo dosing and indication and asked him to prescribe.
	Cleveland	OH	44195	9/6/2013	Left OxyContin/Butrans Initiation/Titration guides info for Davis/Gutgsell
PPLPMDL0020000001	Hudson	OH	44236	9/6/2013	Spoke with Mary the pharmacy technician. I discussed Butrans dosing, titration, steady state, patch description. Mary said they have a couple of patients on Butrans and stock the 5 mcg. Discussed the copy cards and how they work. Discussed OxyContin dosing, titration and conversions. Mary said that they dispense a fair amount of OxyContin and the 20, 49 and 60mg doses are most common.
	Hudson	OH	44236	9/6/2013	Spoke with Galiana the pharmacist about products. Galiana said that she had a patient in recently on Butrans and was complaining about the side effects he was experiencing. I asked the pharmacist about the dose, physician prescribing and any other additional information. Galiana said that he is a patient of Myra Gold, a PA from Parma and was on the 20mcg patch. I asked if the patient had titrated though the doses? Galiana said she doesn't think so unless the patient got other doses filled at other pharmacies. I asked Galiana if the patient comes back in if she would discuss Butrans with him and ask him questions about his previous Butrans use? Galiana said she would and may call the PA. Reviewed Medicare D coverage and Scott profile. OxyContin doses and use in patients on Percocet and intermezzo dosing and filling? Galiana said she had not seen any intermezzo scripts.
PPLPMDL0020000001	Independence	OH	44131	9/6/2013	Met with diedra to discuss arranging a meeting with roman. She let me know that lunches have been cancelled for the remainder of the year due to policy change. She let me know that I can try and see roman after lunch every day but tues. Reviewed OxyContin start principles and discussed butrans titration.
	Cleveland	OH	44113	9/6/2013	Booked Lunch appt. Presented Express Scripts/Medco Butrans Preferred formulary win along with Dosing/Titration guide. Asked if he had a patient in mind.Said he will consider.OxyContin Q12h flexible dosing
PPLPMDL0020000001	Independence	OH	44131	9/6/2013	Told steve that I knew dr was in need of vouchers and I provided them and wanted the dr to know about the butrans managed care win on Medco. I asked he could take a minute to review the clinical trials of butrans and Pass the information to her so I can get her thoughts on the findings and the significance to the pain reduction. I left the oxycontin start principles titration guide.
	Cleveland	OH	44114	9/6/2013	Reviewed Butrans for those Tramadol/LorTab failures, dosing/titration, said she likes Butrans and will keep in mind. Intermezzo for those MOTNA/Dosing
PPLPMDL0020000001	Cleveland	OH	44103	9/6/2013	OxyContin Q12h, not seeing much OxyContin. No Butrans or Intermezzo. Butrans for those Tramadol failures. No savings card needed-majority managed medicaid
	Akron	OH	44305	9/6/2013	Short conversation about his OxyContin patients. I asked dr about the most common dose he prescribes? Dr said typically it is the 20, 40 and has some cancer patients on 80 mg. I showed him the conversions and explained the Percocet 20mg a day to OxyContin 10mg q12h. Dr said he understands and hopes it is covered better. Discussed coverage and asked for starts earlier in treatment. I asked dr to use Butrans for his patients that fit the moderate to severe pain indication and want a change in therapy from tramadol or vicoden.
PPLPMDL0020000001	Stow	OH	44224	9/6/2013	Dr had a student with him today which worked well because I initiated an introductory discussion on Butrans. Discussed the patch design, schedule three 7 day transdermal patch for moderate to severe pain. Discussed conversions and patient types. Dr Russ said that he completely agrees that the best way to start Butrans is earlier on in treatment than letter because it makes it tougher on him to convince a patient to use it. Dr said he really likes Butrans and the patients he had on it has changed their life. Dr said the efficacy is great and is very tolerable. I asked dr to continue prescribing and to use OxyContin of his patients higher up on the pain scale and if Percocet is not working. Intermezzo indication and dosing and asked for more business.
	Parma	OH	44134	9/6/2013	Reviewed butrans trials and dr had questions about allergic reaction with the elderly and I reviewed the adverse reactions from the open label study. Dr had questions about scheduling and I reviewed scheduling of butrans while he looked up the scheduling of Vicodin, tramadol and Percocet. I asked if he was comfortable with the information is was presenting and he said he will consider trying butrans. Dr said he will not initiate OxyContin but I reviewed low dose conversion. Dr said he liked intermezzo and I reviewed dosing. Asked dr to consider patients who were appropriate for butrans.
PPLPMDL0020000001	Cleveland	OH	44113	9/6/2013	Reminded Deb of Butrans for those Tramadol/LorTab failures, said she likes Butrans and continues to RX/find patients. Intermezzo for MOTNA/dosing
	Olmsted Falls	OH	44138	9/9/2013	Follow up with dr. If he had a chance to try Butrans for patients who are not controlled on either the NSAID or Tramadol. Dr. said no...I asked if it was because he was not convinced the product would work? He said no just didn't see anyone. I reminded him of who we talked about last visit. Patients with pain, secondary to a known Pathology who you feel would do well on an extended release opioid. start 5mcg, re-assess at your follow up visit.<font color=blue><b>CHUDAKOB's query on 09/19/2013</b></font>-Lisa, when looking at you next call objective, you may want to try to be a little more specific. What do you mean by appropriate patient type?<font color=green><b>BARTOU's response on 09/19/2013</b></font>-The opioid naive or Tramadol failure patients<font color=blue><b>CHUDAKOB added notes on 09/19/2013</b></font>-Let's discuss this tomorrow. I may be able to provide some guidance here.
PPLPMDL0020000001	Cleveland Hts	OH	44118	9/9/2013	No new prescribers of OxyContin- Reminded Q12h flexible dosing. Butrans hasn't seen, told him Harris has been prescribing and patients are doing well. Said he will look for RX's.
	Akron	OH	44313	9/9/2013	Spoke with Jason the pharmacist about all products. I told him about how I am stressing the importance of appropriate patient types for Butrans and discussed the Scott profile. Jason agreed that it needs to be started early. I reviewed new insurance coverages and Jason said he noticed that Medicare D plans are picking it up. Jason said he has three prescriptions for Butrans 5 mg from Dr Shah. 2 refills and 1 new. I discussed how importance titration is so the hcp doesn't think the patient is experiencing a product failure. OxyContin dosing and stocking which they have all doses. Conversions and start principles. Intermezzo indication, dosing and limitations of use. Mason has not filled any.
PPLPMDL0020000001	Cleveland	OH	44106	9/9/2013	Reviewed OxyContin Q12h flexible dosing along with Butrans for those Tramadol failures. Agreed to recommend Butrans and handout patient info booklets to appropriate patients, but feel her patient population like taking PO and refer to Pain mgmnt. but will see what she can do
	Akron	OH	44333	9/9/2013	Handed dr another copy of the Butrans exercised trial and asked him if he would b happy if his patients got at least a 30% reduction in pain score? Dr said yes he thinks so. I told him that that is what was seen in experienced trial and that 75% of patients were able to make it to the double blind phase of the trial. I told dr to use Butrans more frequently for those patients on tramadol. Reminded him of the copy cards and BWC coverage.
PPLPMDL0020000001	akron	OH	44333	9/9/2013	Dr said he only had a quick minute so I told him to pause the next time he is about to refill tramadol and consider Butrans as a solution. I gave him a copy of the Scott profile then reminded him of new Medicare D coverage. Nothing else learned.
	Berea	OH	44017	9/9/2013	Spoke to Jasmine the RN about Butrans. Jasmine said the doctor may not write a patch for pain. I explained that Butrans was a schedule 3- refill opioid that is extended release. 4 patches a month (28 days). Left various promotional pieces behind for butrans and oxycotin.
PPLPMDL0020000001	Cleveland	OH	44195	9/9/2013	MSL and Dr. Rodenas meeting with John Petrich, OTR study pharmacist. Reviewed enrolled patient profiles and pre-screen data and discussed role of pharmacist in patient identification and pre-screening. Mr. Petrich is willing to assist site team in review of opioid prescribing and will work with study coordinator.
	Akron	OH	44304	9/9/2013	Pharmacy packed today and was only able to get a minute with technician. I asked her if she is familiar with Butrans? She said she was and said they have a couple of patients on it from dr Amanabu and Sarah Adams. I spoke to her about the conversions and patient types as well as copy cards. She said she has seen patients bring them in.
PPLPMDL0020000001	Cleveland	OH	44130	9/9/2013	Showed dr Percocet to OxyContin conversion and explained they were the same. Asked the dr to think of patients currently taking Percocet in need of a dose adjustment. Dr nodded and I mentioned butrans for his patients requiring round the clock medication as he walked away.
	Olmsted Falls	OH	44138	9/9/2013	SAW al the pharmacist. Review of Butran and the 15mcg coming soon. Also about where the patch is positioned. Discussed pain awareness month. And how this could mean re-assessment in many offices of their current pain medications. Left some materials behind for review.
PPLPMDL0020000001	Cleveland	OH	44130	9/9/2013	Dr said he does not write opioids and I asked how he treated pain in patients with other chronic conditions. Dr said he does not like to prescribe my drugs. I asked about intermezzo and he said his patients like sublingual.
	Cleveland	OH	44130	9/9/2013	Gave dr information of flexible dosing of OxyContin
PPLPMDL0020000001	Akron	OH	44333	9/9/2013	Laura the pharmacist said she will not order product in and stated she had one patient on butrans and has a box of the 5 she will have to probably return. I asked prior to that who orders opioids. Reviewed start principle. Gave intermezzo dosing and administration. Told her I will let her know which doctors are writing butrans. Started to discuss rx patrol but she was not interested
	Cleveland	OH	44106	9/9/2013	Saw dr in Fairlawn and he told me he went for an OxyContin copy card and they are out. I told him I will give him more and to continue prescribing OxyContin for those patients on short acting oxycodone around the clock especially the Medicare D patients. Dr said he is doing as much as he can.
PPLPMDL0020000001	Cleveland	OH	44106	9/9/2013	Obtained Rheumatology Dept. Info. (Barb)-Nurse. Alteis-Admin. Left Butrans FPI
	Cleveland	OH	44106	9/9/2013	Visited Anes./Pain Butrans info to fellows, again requested appt. with Fellows and Dr. Hayek/Sahgal thru Admin. Terrah. Visited Rheumatology/IM- Warren/Medof MD's Nurses Donnie and Barb. Admin Altes. Family Med. no lunch inservices. Tom-Resident Coordinator
PPLPMDL0020000001	Akron	OH	44333	9/9/2013	Quick hello in office as she was moving to her next patient. I told her to continue prescribing Butrans for those patients on tramadol who are uncontrolled or can't tolerate it. Dana said she is trying to use it as much as she can. I told her to think Butrans before she refills the IR opioid. She said ok. Left new Medco/ESI 'medicare D flyer.
	Cleveland	OH	44112	9/9/2013	Reviewed Scott profile. Asked Dr. if she has similar patients? said some, doesnt prescribe more than 300mg/day 50mg Q4-6h. Asked for those Tramadol failures, said she will consider. Also review Initiation/Titration guide.
PPLPMDL0020000001	Cleveland	OH	44130	9/9/2013	OxyContin Q12h flexible dosing strengths. Intermezzo for MOTNA/dosing- had a patient in mind
	Cleveland Hts	OH	44118	9/9/2013	Pharmacist Dave, was the only one on duty and there were no techs so Dave asked if I could come back. I told him when I return I will discuss butrans titration and ordering practice, OxyContin rx patrol and intermezzo.
PPLPMDL0020000001	Akron	OH	44304	9/9/2013	Reviewed Preferred Status of Butrans on Express Scripts/Medco Medicare Part D plans, said that was good to hear. Reminded of Titration, had a patient in today and was doing fine on the 10mcg, but will keep in mind.
	Akron	OH	44304	9/9/2013	OxyContin Q12h flexible dosing strengths
PPLPMDL0020000001					Discussed OxyContin and start principles. Started by reviewing indication, dosing and patient type discussion. Reviewed start principles and asked him his thoughts. Dr said he pretty much follows that and reassesses his patients and does not use pain scales. Dr said he basically has the conversation with his patients about their pain level, activities of daily living. I discussed how he can use the Wong Baker pain scale and how to use it. Dr said he wanted some because it can help get a baseline understanding of pain. I explained the conversion and titration guide and asked him to prescribe OxyContin for his patients requiring an ER opioid for moderate to severe pain and to focus first on his patients uncontrolled or intolerance to IR oxycodone. Dr agreed. Discussed Butrans key selling points and focused on the opioid naive trial. Reviewed key highlights of trial and then reviewed results. Dr said he remembers Butrans and asked about opioid exposed patients. Discussed the experienced trial. Reviewed conversion scale, patch location and description and insurance and copy cards. Dr said he will try Butrans early after tramadol.

PPLPMDL0020000001	Cleveland	OH	44130	9/9/2013	Rescheduled wed lunch and dr was walking in the door. I mentioned I wanted to discuss pain management with her and she did not have time. I said I would leave her information but I wanted I know her thoughts on 30% pain reduction and if she thought 2 points was clinically important. She said yes and she will talk to me at lunch. Left trials and OxyContin start principle titration guide.
	Fairlawn	OH	44333	9/9/2013	Spoke To to Jerry the pharmacist and mostly discussed products to his technicians. I asked if she was familiar with Butrans? She said she is and has had patients on it. I asked if she currently had any and she said that the last patient was on Butrans 5 mcg from dr shah and has not refilled. I talked with her ant appropriate starting dose and importance of titration. Conversions and copy cards. She didn't know about them do I explained them and she said she will get it on line if needed because currently they do not stock any doses. Discussed OxyContin dosing, titration and copy cards as well as intermezzo key selling messages.
PPLPMDL0020000001	Akron	OH	44333	9/9/2013	Quick hello in Fairlawn office. Told Stephanie to continue to consider Butrans anytime a patient tells her they need more short acting opioid. I gave her the conversion scale and told her she can titrate every 7302 hours. Left her with the new Medco/ESI piece.
PPLPMDL0020000001	Cleveland	OH	44104	9/9/2013	MSL and Dr. Eduardo Rodenas met with Dr. Henry, reviewed study updates, enrolled patient profiles, and prescreen data. Dr. Henry's potential patient population is significantly limited, and he is willing to consider turning the study over to the main Cleveland Clinic Children's hospital for a larger potential population. MSL and Dr. Rodenas to follow up with site study team to identify additional investigators.
PPLPMDL0020000001	Cleveland	OH	44195	9/9/2013	MSL brief phone call and email communication with Dr. Appachi, who was not available to meet in person. Dr. Appachi has a very limited potential patient population and may not be participating in the study much longer.
PPLPMDL0020000001	Cleveland	OH	44195	9/9/2013	Dr. Appachi committed to call MSL on 9/10/13 to discuss in further detail.
PPLPMDL0020000001	Cleveland	OH	44195	9/9/2013	MSL and Dr. Rodenas met with Ms. Cassano and Ms. Lach to discuss OTR3001. Reviewed enrolled patient profiles, pre-screen data, and patient identification strategies, including partnership with pharmacy and review of inpatient admissions for opioid use. Site study team plans to work with Dr. Dell, Research Director, to identify additional investigators for OTR, and will review patient population with study pharmacist.
PPLPMDL0020000001	Berea	OH	44017	9/9/2013	Spoke to pharmacist about Butrans- he hasn't seen much and knew little. I explained the patch technology, where it goes and where we are positioning it with drs in the area. Highlighted the 15mcg and how we could get it ordered. Have to return to talk to the pharmacist manager. Left various selling pieces also gave the pain awareness brochures out- time to Re-asses.
PPLPMDL0020000001	Cleveland Hts	OH	44118	9/9/2013	Caught Dr.as she was leaving for the day. Reminded of Butrans for those Ultram/Tramadol failures, said she likes Transdermal delivery systems. Intermezzo for MOTNA/dosing
PPLPMDL0020000001	Middleburg Heights	OH	44130	9/9/2013	Saw dr while waiting in the hall for dr diab. Aske dr if he gave more thought to allowing his oxycodone patients to taking their medication twice a day. He said he prescribes q6 and told him I was referring to OxyContin and he said he did not prescribe much and I told him they were both oxycodone. He shook his head yes. As he walked away I reminded him of butrans 7 day patch for pain and schedule 3.
PPLPMDL0020000001	Berea	OH	44017	9/9/2013	lunch with dr. ludwig and dr v. powers. Dr- remembered Butrans but said he hasn't found the right patient yet. I said that's why i'm here. I started with his current patients he see's, that have pain, pain- secondary to a known pathology. Dr. said yes he has them. Then I said how many of them are on NSAIDs for an extended period of time...or Tramadol. He said not as much Tramadol but NSAIDs. Dr. Powers also said her too. I told the doctors that id like them to think of Butrans after a NSAID failure yet before a PRN schedule 3 product and this is why. Pulled out the naive study. Efficacy and safely study- dr. liked the open table information of the study but when it came to the end point of the study and the reduction of pain scores, dr. said he felt the data was weak. After explaining Baseline ocf- dr seemed ok with the information.I asked how he felt about getting over 50% of his patients to have a 30% pain reduction score? He was not sure he thought the 30% was still low. Dr. Powers- asked about how the drug was excreted (bowels), how long the patch stays on...if it falls off and the discontinuatiun rate due to rash. Dr. ludwig said that he wasn't convinced his patients even those on tramadol would be open for the patch technology. I said how do you know- you never even offered it to them not to mention there hasn't been a schedule three extended release option before. He agreed. I asked them how many patients are you comfortable starting next week. He said 2.
PPLPMDL0020000001	Cleveland	OH	44130	9/9/2013	Spoke with Lawrence the pharmacist and he said the pharmacy just got in some booklets which he showed me. The pharmacy received a shipment of patient brochures for butrans. Asked about OxyContin quantity limits and he had not heard of any and he is a floater. I discussed rx patrol and left the twitter brochure. There were not intermezzo scripts but gave indication and limitation of use
PPLPMDL0020000001	Brooklyn	OH	44144	9/9/2013	Quick Butrans reminder for those Ultram/Tramadol failures along with OxyContin Q12h flexible dosing strengths. Said Thank You
PPLPMDL0020000001	Berea	OH	44017	9/9/2013	Dr was not familiar with Butrans. Explained the product and she said it might have a spot after her. NSAID failures. Dr. said she did not like writing PRN opioids of any kind. She said she liked the fact it was extended release and it was for 7 days. She said it was a long time. We discussed 4 patches gives patients 28 days of therapy. We reviewed pain levels...and she asked questions about where to place the patch, what happens if it falls of. We reviewed the steady state and when move patients from a tramadol to Butrans where to start (mcg). Her patients were about 50mg 3x a day.She said she does not go higher than this because she feels it increases the side effects and the product should be changed. Review of intermezzo- dr. said she would not write a product because of the managed care position.
PPLPMDL0020000001	Cleveland Heights	OH	44118	9/9/2013	No Butrans from Harris yet, reminded for Tramadol failures, OxyContin-Q12h flexible dosing strengths and Intermezzo for MOTNA.
PPLPMDL0020000001	Akron	OH	44305	9/9/2013	Gave quick review of opioid experienced trial explaining patient types with the inclusion and exclusion data, efficacy and safety, and patient types. Dr said he knows it is a good product because he has seen how well it works clinically. I asked if he would like more of his patients getting at least a 30% reduction in pain score? Dr said for sure. I asked him to prescribe it more often for his tramadol patients. Dr agreed. OxyContin start principles and patients types. Intermezzo patient types, doses and limitations of use. Reminded dr of Butrans Caresource coverage and PA.
PPLPMDL0020000001	Akron	OH	44308	9/10/2013	MSL meeting with Dr. Frieber, who provided pediatric palliative care presentation via video to PPLP study team.
PPLPMDL0020000001	Cleveland	OH	44122	9/10/2013	Upon arriving to complete an in-service on Constipation, I was informed by Francine Young that she was going to have to cancel for the third time. She said, " I'm so sorry, nobody knows what I'm going through." Francine rescheduled two in-services for 10/8 @ 2pm on Pain for the STNA's and on 10/15 at 1:30 & 2pm on constipation for the Nurses and the STNA's.
PPLPMDL0020000001	Oakwood Village	OH	44146	9/10/2013	I made a drop-in visit to meet w/ D.O.N., Barb Staemple to reschedule in-service cancelled on 7/31. I spoke w/ the receptionist, Sarah who called barb's office, she was busy w/ writing a corrective action, but told Sarah to schedule for the first week in October. I then talked w/ the ADON who was passing by and informed her of the rescheduling of the in-service. She scheduled an in-service onPain Documentation for October 1 @ 7:30, 10:30 & 2:30 as said that she would let Barb Know.
PPLPMDL0020000001	Bedford	OH	44146	9/10/2013	Upon arrival to meet w/D.O.N., Jackie Conner to introduce Purdue's Nurse Educator Program, I was informed by the receptionist that Jackie was held up w/ an issue and asked me to call her next Monday to re-schedule.
PPLPMDL0020000001	Westlake	OH	44145	9/11/2013	I made a drop-in visit to meet D.O.N., Kelly Rosnagel, I was informed by the receptionist, that Kelly went into a meeting @ 2:00 and is not available. I left PAP materials , September Pain Month Pamphlets and my BC.
PPLPMDL0020000001	Fairlawn	OH	44333	9/11/2013	Will driving to complete an in -service on pain, I recv'd a phone call from Terri Gildone cancelling the in-service for 2PM today, after I previously confirmed. She said, "I am busy w/ orientation on Wednesdays, I nwill call you tomorrow morning to re-schedule."
PPLPMDL0020000001	Westlake	OH	44145	9/11/2013	I dropped-in to speak w/ ADON, Brenda Amburgey to remind her of the Pain in-service on 9/20. She was not available. I left September Pain month pamphlets and my BC.
PPLPMDL0020000001	Westlake	OH	44145	9/11/2013	I made a drop-in visit to speak w/ Patty O'Shea to schedule a pain management in-service for the October STNA class. I spoke w/ the receptionist, who informed me that Patty was in class, I left September Pain Month Pamphlets and my BC.
PPLPMDL0020000001	Westlake	OH	44145	9/11/2013	I dropped-in to speak w/ D.O.N., Sue William about scheduling an in-service on pain management. I was informed by the receptionist that she was not able to meet w/me. I left "September Pain Month" pamphlets and my BC.
PPLPMDL0020000001	Cleveland Hts	OH	44118	9/12/2013	Informed pharm. Butrans 15mcg presentation coming in Oct., OxyContin Q12h flexible dosing along with Intermezzo for MOTNA/dosing
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	9/12/2013	Spoke with Barry the pharmacist about all products. I showed him the Scott profile and explained to him what I am speaking to physicians about and initiating Butrans early on in treatment. Barry told me that it makes sense to start early and that he continues to see Butrans and have all three doses in stock. I introduced the new 15mcg dose to be at wholesalers on Oct 1. Barry said he's not sure if McKesson will drop ship it but they will order it. I asked Barry what time a patient will need to be in the pharmacy get a med filled they need to order for next day and he said 7pm. Barry told me that their store has shipments come in on Saturdays as well. He said if a patient is there by 2pm on Friday, they will have it on Saturday. I told him that that is great information and glad to know they stock all doses. Discussed oxycontin doses, conversions, and appropriate patients. Barry said they also have all the doses and fill it frequently. Intermezzo dosing and indication. Barry said he remembers filling a couple of them and have the 1.75mg in stock.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	9/12/2013	Hello through window and asked her to continue starting patients on Butrans when they need a dose adjustment on their current IR opioid or are not tolerating it. I told her that in the opioid naive trial, 53% of patients achieved at least a 30% pain score reduction and that she can also experience that in her practice. Dr said she had had good results from Butrans and really likes it. I told her to continue prescribing and to remember the Caresource coverage and PA.
PPLPMDL0020000001	Cleveland	OH	44115	9/12/2013	Informed of Butrans 15mcg/hr presentation, hasnt seen any RX's, Reminded of intermezzo for MOTNA/dosing
PPLPMDL0020000001	Euclid	OH	44119	9/12/2013	Spoke with Sam, the tech. In one day/week (Thursday). Discussed the 15ug with her while waiting for pharmacist. She is a patient advocate and important here. She gave me name of Dr. Karimipil, Morley, and Bertsch and Archaki as physicians who prescribe opioids in the area. Spoke with Kevin the pharmacist. Gained a commitment to stock the 15 ug when available.
PPLPMDL0020000001	C. Falls	OH	44223	9/12/2013	Spoke with Cindy the pharmacist and technicians about the new Butrans 15mcg dose available to wholesalers on October 2. Explained the dose and asked her if she thinks she will get a drop shipment? Cindy said that they use Cardinal and she signed up as part of First Script which means that she will get a shipment of new doses of medics or new medicine when it becomes available and will be able to ship back within 6 months for a full refund if it doesn't move. I asked if all pharmacies heave that and she said she thinks so but they call it come thing else depending on the wholesaler. Cindy said she knows the 15mcg will move at the pharmacy because of pain management clinic in the hospital. Discussed OxyContin and intermezzo quickly as they had a meeting to attend. Left dosing and conversion pieces.
PPLPMDL0020000001	Tallmadge	OH	44278	9/12/2013	Quick hello to dr in hallway. I told him if he has a patient he needs to get into pain management and its going to be a while, he can prescribe Butrans for that patient to avoid prescribing more IR opioids. Dr said its a good thought but his patients typically don't wait long at Western Reserve Pain who he refers all his patients to. Reviewed the intermezzo dosing and specifics of how to dose. Dr said he will keep it in mind.
PPLPMDL0020000001	Euclid	OH	44119	9/12/2013	Met with tech Dana- first, then new pharmacist Natalia Kuchik, will move to Mayfield Rite Aid starting 9/14. Pharmacist Dave committed to ordering a box of 15 mcg Butrans when available.
PPLPMDL0020000001	Westlake	OH	44145	9/12/2013	SAW dr thru the window- told him that tomorrow I was going to discuss pain reduction scales for a very interesting pain product called Butrans. Ever hear of it? he said yes. I said excellent. I'm leaving you a study, review it and lets talk tomorrow.
PPLPMDL0020000001	Bedford	OH	44146	9/12/2013	Quick window call discussing Medco and express scripts formulary win And asked his thoughts on the clinical importance of a 2 point reduction in pain or 30%. Dr did not seem to pay attention. Passed oxycontin titration through the window.
PPLPMDL0020000001	University Heights	OH	44121	9/12/2013	Dr Price what % of your patients are cancer pain patients? About 20%. For those patients you've agreed you will continue to use controlled release OxyContin? Yes he replied. UH doesn't want us to write any opioids. Did you get anything in writing from UH ? No he replied. START principles to help with titration presented. When do you follow up with pain patients? 30 days. If they have breakthrough pain & call & ask for more medication, what happens then? I tell them to wait he responded. Another option Butrans. What do you think? I can see how it would be good in nursing homes. How about patients in your practice? I will consider he responded.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	9/12/2013	Spoke with Jeff the pharmacist about all products. Discussed the Scott profile and stressed importance of appropriate starting dose and initiating early in a patient like Scott. I introduced the new 15mcg dose to be available in October and asked him his thoughts? Jeff said that they have seen Butrans prescriptions from western reserve pain and has the 5 and 10mcg in stock and said he thinks the 15mcg will move. I asked him if he will order it and said he won't until he sees a prescription. Discussed OxyContin doses and conversions. I asked him which doses of the 7 he dispenses most and he said the 10 and 15mg doses. He said he stocks them all because they move. Intermezzo dosing, indication and limitations of use. Jeff said he doesn't stock and hasn't dispensed any.
PPLPMDL0020000001	Mayfield Village	OH	44143	9/12/2013	Dr Azar asked if he does write Butrans, will it be stocked at CVS for example? I replied pharmacists have told us they can have Butrans in 1 business day. He asked if weight affects efficacy of Butrans. Explain that was not part of the inclusion or exclusion criteria.. Had a lot of questions on application, disposal of used patch. Cost also a concern. When asked how many people he sees daily suffering from pain, he replied about 5 patients daily. Positioned Butrans after Tramadol. Importance of trial & savings cards to patients before they leave office. \$ 15-20 per month for Butrans is reasonable dr Azar stated. OxyContin, controlled release in practice & nursing home, broad formulary coverage. START principles discussed.
PPLPMDL0020000001	University Hts	OH	44118	9/12/2013	Updated Dr./staff on Butrans ESI/Medco 2nd tier formulary status, Butrans for those Tramadol failures. Dr. said OK, booked appt. for more time to discuss.OxyContin Q12h flexible dosing strengths



PPLPMDL0020000001	North Olmsted	OH	44070	9/12/2013	Discussed Butrans. Appropriate patient type- pain score reduction- indication. Explained no a/b rated. Talked about re-assessing patients at patients monthly visits. Discrbed how the 15mcg could be used and when. Asked if they would stock, said no, asked if they could order just one box since it was new and its better to have one then none. Pharmacist wasn't convinced it would move off shelf. discussed OxyCotin...the molecule and asked if he ever say a oxycodone script come thru for q12h? Pharmacist didn't think so. Explained the OxyCotin was branded, not generic. showed the conversion from percocet to OxyCotin. Review on Intermexzo dosing for men and Kathy helped me get an early brunch tomorrow with the doctors. When speaking with the doctor thru the window- discussed the patch technology and pain reduction scores from then naive study. Told the doctor i would be in tomorrow to talk more on the subject. Left him the naive study and some oxycontin literature for review until our meeting
PPLPMDL0020000001	Westlake	OH	44145	9/12/2013	Intro. Discussed Butrans, he likes molecule along with delivery system, Positioned for Tramadol/Ultram failures. Cost is an issue with his patients, Went over Medco/ESI formulary status. Dosing and Morphine conversions.
PPLPMDL0020000001	Cleveland	OH	44195	9/12/2013	OxyContin for Q12h flexible dosing
PPLPMDL0020000001	Akron	OH	44333	9/12/2013	Discussion with dr on all products. I asked dr what most of his patients are taking from a IR opioid standpoint when they come to see him? Dr said many things but mostly Ultram, and Percocet. I told him that Butrans and OxyContin will fit his needs. I discussed with him the Scott profile and told him that he must initiate Butrans early on in treatment for good success. Dr said that he had a patient in that exact position recently and he started Butrans but that patients cost was too high because he was on state Medicaid. I first asked for him to prescribe more Butrans for patients like Scott than reviewed formulary. Dr agreed to look more at his tramadol patients who need a dose adjustment. I showed dr the OxyContin conversion scale and asked him if he knew that Percocet and OxyContin are the same molecule oxycodone? Dr said he thinks so but was very interested in hearing about the conversion and dose regimen. I told him that when a patient is on Percocet and wants more and it is justified to move to OxyContin especially when he knows the patient will need it for an extended period of time. Reminded dr that OxyContin is not for prn pain, acute, or intermittent pain. Dr agreed and said I taught him something because he is scared of OxyContin and now he feels more comfortable with it. Intermexzo indication and
PPLPMDL0020000001	Cleveland	OH	44113	9/12/2013	Discussed Butrans new 15mcg/hr strength , OxyContin Q12h flexible dosing along with Intermexzo for MOTNA/dosing
PPLPMDL0020000001	Bedford	OH	44146	9/12/2013	Asked dr what he thought about a 30% reduction in pain. Dr said a 7.2 is different for different individuals. He said some have a 7.2 and are okay while others are in real pain. I asked if he agreed that a 2 point reduction is is clinically important. And he agreed. Reviewed the start principle in the new visual aid and dr named the doses. Reviewed indication and limitation of use of Intermexzo
PPLPMDL0020000001	Cleveland	OH	44113	9/12/2013	Butrans for those Tramadol failures and OxyContin Q 12h dosing and 7 tablet strengths
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	9/12/2013	I told dr to prescribe OxyContin today for patients that have been on Percocet for more than three months and need a dose adjustment. I told him that with the choices he has for ER opioids, that he needs to choose OxyContin when has excellent formulary coverage and dosing flexibility he and his patients need. Dr agreed and said he is trying. I told him that he needs to get back to starting patients on tramadol or vicoden that also are in need of a dose adjustment and he is treating a condition that warrants an ER opioid. Nothing else learned.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	9/12/2013	Spoke with Kimase the pharmacist about all products. Introduced the new 15mcg dose coming in October to wholesalers. I asked if she would order when e time comes if it is not auto shipped? She said it depends how much she fills but will consider it. I discussed the Scott and nancy profiles and told her what I'm talking to physicians about. She said she understands how it is a good option for patients not wanting oral medication. Explained the managed care coverage for Butrans. Discussed OxyContin dosing and conversions. Kimase said she continues to refill them along with Percocet. I told her how my goal is to get patients on Percocet who are uncontrolled switched to the q12h oxycodone. Kimase said its a tough battle but agrees more patients need moved to ER opioids. Intermexzo dosing and limitations of use. I handed Kimase a Butrans patient information guide and asked if she would give it to a patient that has come back in for a number of months to refill their tramadol? She took it and said she would. Tried to see Dr. He was busy. Spoke with M.A. Left him opioid experienced trial, 1 pain awareness brochure, new orange web key pain mgt kit. Left Marianne & Amanda updated Butrans & OxyContin formulary med d grids. Reminded M.A BWC will pay for Butrans.
PPLPMDL0020000001	Highland Heights	OH	44143	9/12/2013	Visited Anes/Pain Ctr. Nickels Butrans for those LorTab failures, Dr. agreed. Getting referrals from NEOCOM ctrs
PPLPMDL0020000001	Cleveland	OH	44115	9/12/2013	Met dr for first time and introduced an abbreviated version of Butrans. Talked to her about Butrans as a schedule 3, 7 day controlled release patch for moderate to severe pain. Discussed conversion scale and appropriate patients. I asked dr her thoughts? Dr said she has heard about it but never talked to about it. Dr said she doesn't have much issue with treating pain especially a schedule 3 and likes the idea. Dr said we can talk more at a lunch. Left initiation and titration guide.
PPLPMDL0020000001	Fairlawn	OH	44333	9/13/2013	Told dr according to published medical literature in chronic pain, a reduction of pain of 2 points on the 11 point scale was deemed clinically important. That is a 30% reduction in pain. What does that mean for your patients. The dr said a reduction like that would mean his patients would be pleased. I asked to show him some clinical data and showed the opioid naive data. Dr said his patients are on more than NSAIDs once he sees them and I said I understand but he still uses a good amount of tramadol. I asked his thoughts on trying butrans in place of tramadol for the appropriate patients. He asked if he could do this with his BWC patients because he thought they had to fail morphine and MS Contin. I said he was probably confused with an OxyContin plan. I asked if he would try butrans for the tramadol patient. Dr asked if buprenorphine induced withdrawal. I asked if he was asking this because of the addiction medication and he said yes. I explained the conversion using the FPI that 10 mcg/hr for a week was equal to a 10 mg for a week. I explained that the withdrawal may be seen for patients who stop their meds for the first 3 days because butrans takes 3 days to reach study state. Dr asked about the adhesive and I showed him the demo. He said he does not hear of problems with the adhesive. Discussed start principle and noted that he has a lot of Percocet patients. I asked if he could think of patients this week that he prescribed another dose increase instead of a long acting
PPLPMDL0020000001	Euclid	OH	44117	9/13/2013	I made a drop-in visit to see D.O.N., Kathy Nemeth, I spoke w/ Receptionist Joe Nathan who informed me that Kathy had left for the day. I left September Pain Month pamphlets along w/ my BC.
PPLPMDL0020000001	Cleveland	OH	44113	9/13/2013	Visited Anes/Pain Ctr. Nickels Butrans for those LorTab failures, Dr. agreed. Getting referrals from NEOCOM ctrs
PPLPMDL0020000001	Akron	OH	44313	9/13/2013	Reviewed Maggie profile and asked him through each point what total daily dose of Percocet the patient was on. When I finished I asked him what dose of OxyContin the patient should initiate on and he admitted he didn't know. I needed to reintroduce the conversion from IR oxycodone to OxyContin. I asked dr what his thoughts are on the case study and he told me that the patient should not have had 5x in the first place. I asked why and he said that it seems like it caused more persistent pain. I asked dr if he would have introduced OxyContin earlier and he said it makes sense after the fall and pain was increased. I asked dr to use OxyContin in this place and if he would do it? Dr said he will. Discussed Butrans and he said he prescribed his first today for a male patient on multiple short acting medicines and asked for a change in therapy. Dr said the patient called back and said he couldn't find a pharmacy with the 5 mcg in stock. I called rite aid in Fairlawn who has the 5 mcg in stock. Patient was going there to fill it and use his copay card.
PPLPMDL0020000001	Cleveland	OH	44113	9/13/2013	Showed Dr. OxyContin favorable formulary grids, Reminded of Butrans ESI/Medco status and left Butrans patient info guides
PPLPMDL0020000001	Akron	OH	44312	9/13/2013	Saw dr through front window and told him to prescribe Butrans for those patients needing a dose adjustment of tramadol or vicoden. Dr said he is trying and knows those are good candidates for Butrans. I told dr that there are Medicare D plans cover aging Butrans now and reviewed pans and asked for continued business. Gave dr doing guides for OxyContin and Intermexzo.
PPLPMDL0020000001	Beachwood	OH	44122	9/13/2013	Spoke with Karen who has 2 patients on butrans. She said dr mandat is the prescriber at the home and none of her other patiens are on. Current patient on 20 so no need to stock 15 until ordered. She suggested I contact Tom the head pharmacist in the afternoon. Discussed OxyContin start. Left Intermexzo
PPLPMDL0020000001	Akron	OH	44312	9/13/2013	Saw dr as I was coming out of lunch. Spoke with him about using OxyContin for his patients needing a dose adjustment on Percocet. Dr said ok and he will try to do that. I asked him when the last time as he prescribed it and not refilled it? Dr said he didn't know but most are refills. I asked him to take another look at his Percocet patients as candidates for OxyContin. Gave him a Butrans brochure and Intermexzo dosing guide.
PPLPMDL0020000001	Westlake	OH	44145	9/13/2013	Spoke to ma, they needed to reschedule and apt I made. Spoke briefly on Butrans- review of commercial insured coupons.
PPLPMDL0020000001	Tallmadge	OH	44278	9/13/2013	Good conversation on all products. I told dr that in the Butrans opioid naive trial, 53% of patients experienced at last a 39% pain score reduction. I asked him if he would be happy getting even close to those results? Dr said he would. I told him if his patients he initiated have found similar results? Dr said he doesn't use pain scales but said one patient that had a follow up is very happy and pain reduction is significant. I showed him the Scott profile again and told him to initiate early with Butrans and reviewed the conversion scale. Dr said its hard to think about using Butrans for a opioid naive patient but admitted that the study shows it works well for the right patient so he will consider it. Told him to switch uncontrolled Percocet patients and Intermexzo for patients meeting the indication and reviewed doses.<font color=
PPLPMDL0020000001	Stow	OH	44224	9/13/2013	09/27/2013</b></font>Cliff, wondering where you came up with the 39% figure?<font color=green><b>REICHL's response on 10/03/2013</b></font>The 9 is right next to the 0 on the keypad. Sorry<font color=blue><b>CHUDAKOB added notes on 10/04/2013</b></font>I figured you might say that and that is what I thought as well. Thanks for the clarification.
PPLPMDL0020000001	Stow	OH	44224	9/13/2013	Spoke with Greg the pharmacist about the new 15mcg dose for Butrans. Explained that it will be at wholesalers on October 2nd and asked him if he will order? Greg said the fill more 10mcg dose than any other and don't see too much 20mcg dose so he feels that the 15mcg dose will be utilized. Greg said he will order it when it becomes available. I reviewed the approximate conversion chart and asked if he needed any more copay cards? Greg says he has plenty but most patients have Caresource or BWC who can't use it.
PPLPMDL0020000001	Beachwood	OH	44122	9/13/2013	Spoke with Donnie about clinical trials of butrans. Quick call when dr came out of the room reminding him of butrans reduction in pain scores in clinical trials. Also reminded him of OxyContin dosing.
PPLPMDL0020000001	Stow	OH	44224	9/13/2013	Told Stephanie that patients on Butrans experienced at least a 30% reduction in pain score in the opioid naive trial. I asked her if she would be happy with a 30% reduction in pain score? Stephanie said she would be very happy with that! She said she wanted a pain scale to use either her patients. Nothing else learned.
PPLPMDL0020000001	Olmsted Falls	OH	44138	9/13/2013	spoke to Ma regarding Butrans- tried to see the doctor but she blocked me and said he was with patients. left him and dr. shemsiah and dr. kelly various marketing pieces for their review.
PPLPMDL0020000001	Westlake	OH	44145	9/13/2013	Left Butrans initiation guide and reviewed it was a 7day transdermal patch. Left dr various marketing pieces.
PPLPMDL0020000001	Stow	OH	44224	9/13/2013	Spoke with Corey and chuck the pharmacist about all products. Introduced the new 15mcg dose of Butrans to come to wholesalers on Oct 2. Explained the products again and reviewed the conversion guide and titration. Corey said they see patients from summit pain and have a couple of handful of patients on it and have the 10 and 20 in stock. Discussed OxyContin dosing and conversions. Corey said they don't see much and only have a few doses in stock. Corey said he will order in the new Butrans dose when its available. Intermexzo dosing, indication and limitations of use.
PPLPMDL0020000001	Westlake	OH	44145	9/13/2013	Late lunch. Met with dr. he told me he liked butrans but has managed care issues getting it through. I said what plan didn't go thru. he said medicaid. I said yes, it would continue to be a problem, discussed managed care for commercially insured patients and the program. Discussed the patch, dr said he could see the 15mcg being helpful for prim that any care, but he has not problems going from 10 to 20mcg. Dr said the patch was 3 days...I corrected him on the 7 days also the titration. He said I would wait a month before titration. I said why? He said that's when he see's them back. I said that's fine. but known a min of 3 days you can titrate incase you need to do it before the 30 days. Dr told me he was using butrans after vikodin failures. I said...do you ever see tramadolde patients he said yes.//I said how about after that fails but before vikodin. he said maybe but he felt it was better suited for after he tries them all. Dr said the product was good and that he liked it- asked him to write it for one patient next week after tramadol and see if the patient does well. He said yes maybe. Review of the patients with pain ATC that call in the middle at the end of the month o ut of their pills and why they are calling. Drug seekers dr. said. I said lets imagine that these are patients you believe enough to write an opiod and you write it PRN every 4 to 6 hours. If they are taking the medication every 4hrs... wouldn't they mathematically run out of pills by the end of the month. I would point out that these patients might be a candiate for an extended release product. Dr said true. Discussed Butrans 7 day patch technology and steady state. I asked the doctor with steady state at 3 days, how soon should a patient notice the pain analgesia. Dr. said a month. I said I think earlier than that...you can titrate a min of 3 days if you needed to. Dr. asked if patients could use a marker and write the date. I wasn't sure. Dr knew about OxyCotin, although he says he doesn't write much of it. I said how are your patients on it? He said fine. I said what made you think of OxyCotin if you don't write much? He said it was Extended release. I said oh so you value an extended release option. I said why would you PRN Percocet for ATC therapy when you hve extended release options? He said good point but we do. I said that's interesting to me how patients managed their own pain with an opioid, are they pretty compliant taking them 4x a day or is it 6x a day? Dr said they remember to take their pain medication better then antibiotics.
PPLPMDL0020000001	Westlake	OH	44145	9/13/2013	



	Westlake	OH	44145	9/13/2013	NP said he liked butrans because it was a second line product to Vikodin failures. I said why wouldn't you consider it after NSAIDs or After Tramadol failures? He said...he would but that's not what he does. I showed him the naive study and explained why i wanted him to use Butrans before he got to Vikodin. NP though butrans was not covered on the majority of plans. I reviewed this with him and the office manager. CNSDr asked if a pain patient who has LUPIS can use Butrans. I said it was not contraindicated and to explain. He said he has a patient on Tramadol, not controlled taking a variety of medications already of which are tramadol PRN. I explained that Butrans is not a combination product, the pathway it takes and the excretion thru the bowels. I asked how long the patient was on pain medications for ATC pain and he said years. We looked at the graph with the dosing conversion and 5mcg was the starting but reviewed steady state and when to titrate (a min of 3 days). Reviewed the titration options (of the 15mcg up to 20Mcg).Dr said when he see's that patient back next month he would
PPLPMDL0020000001	Olmsted Falls	OH	44138	9/13/2013	Follow up from last visit. Dr. said he thinks that Butrans has a fit before going to Vikodin, i agreed. I asked how comfortable was he at this point to write it next week for that patient we discussed. he said, he felt comfortable. I mentioned the information that doctors want information fr the om reps and studies. Dr. agreed. Touched on patient type and pain reduction scores. We discussed why we PRN opioids for ATC treatment for pain. dr. said because doctors aren't educated enough on how to treat it. We discussed how the extended release butrans works- 7 day delivery system, 4 patches a month. Also discussed the possibility of titration from 5 to 10mcg...a min of 3 days for titration. Discussed Oxycotin during the butrans talk, about extended release products. Dr.said he will be writing more extended release products like oxycotin and butrans more- often because of the pressure primary care is under to cut down the number of schedule pills they are writing. Review the molecule of oxycodone. Dr thought that intermezzo had a good nitch, but that he can't get it thru managed care. We discussed to think intermezzo per the indication- when a patient is failing ambien generic. Review of the savings program.
PPLPMDL0020000001	Olmsted Falls	OH	44138	9/13/2013	Left dr a note if i could see him based on my promise at the last meeting that i could follow up with him to see if he has any questions regarding titration. Dr. came to window...he said he hasn't started anyone yet. I reminded him of the after tramadol failure...showed the dose gui phase/initiation. Told him that Butrans showed in the open label phase of their FDA approved study a pain reduction of 7.2 to 2.6 and these patients were previously on NSAIDs. Therefore, quite acceptable that if a patient requires ATC opioid therapy that they may qualify for Butrans 5mcg. He said very good and walked away.
PPLPMDL0020000001	Beachwood	OH	44122	9/13/2013	Dr was walking by as i was speaking with Donnie the rn and i told him about the 7 day transdermal patch and he said he was aware. Left him information if OxyContin.
PPLPMDL0020000001	Parma	OH	44134	9/13/2013	Clarified misconception that Butrans was not approved on BWC. Lynda was under the impression that patients on butrans had to fail mscontin and morphine. Spoken with vikki who thought this was the case. Told lynda and vikki to write butrans and have the patient present the script to the pharmacist and let me know what happens. Vikki took my card incase there is a problem. Reviewed start principle. Reviewed intermezzo indication and limitation of use
PPLPMDL0020000001	Cleveland	OH	44113	9/13/2013	Reviewed Butrans for those LorTab/Tramadol failures, agreed and continue to find new patients, Intermezzo for MOTNA/dosing. Booked appt
PPLPMDL0020000001	Westlake	OH	44145	9/13/2013	Floating pharmacist- discussed butrans and the 15mcg product. Discussed what happens if a patient needs it and has to wait over the weekend...that they may go someplace else.
PPLPMDL0020000001	Cleveland	OH	44113	9/13/2013	Quick Butrans reminder, Tramadol/Ultram failures. Intermezzo for MOTNA/dosing. Dr. said OK
PPLPMDL0020000001	Richmond Heights	OH	44143	9/13/2013	I completed an in-service on Constipation. 7 nurses were in attendance. The laxative protocol was handed out and reviewed with the staff. A discussion w/ interaction on the risk factors, disease state, complications and the importance of documentation r/ constipation took place. Positive feedback was received from the nursing staff. I spoke w/ Nurse Educator, Sheila Harris after the in-service, she voiced interest in an in-service on Pain and asked me to contact it in a couple of weeks to schedule.
PPLPMDL0020000001	Euclid	OH	44117	9/13/2013	I made a drop-in visit to speak w/ Ruth Rossi to confirm an in-service scheduled for 9/23 @ 2:30 PM. I spoke w/ the receptionist, Hilde, who informed me that Ruth was busy with orientation. I left September pain month pamphlets along w/ my BC.
PPLPMDL0020000001	Westlake	OH	44145	9/13/2013	saw dr- discussed her pain patients that she currently treats (not new patients) that have pain, secondary to known pathology. I asked them how many were on NSAIDs currently? she said alot...i said for a while? She said months or more. I said if a patient were not controlled with their current Nsaid, this is where Butrans 5mcg comes into the picture and where i'd ask you to write it. She asked what schedule it was and i said 3. I showed her the naive study. And told her safety/efficacy data and reviewed the inclusion criteria. Discussed her patient types and that pain reduction during open label. This extended release transdermal pain patch is the only extended release option on the market this is schedule 3. If a patient is calling you up with in a month...running out of their NSAID pills or even TRAMADOL...perhaps an extended release product might work for that patient. Dr is going to think more on Butrans. Intermezzo- dr thought it had a spot...but thought Ambien was still a good product that her patients don't complain it doesn't work. Reviewed dosing and managed care briefly
PPLPMDL0020000001	Westlake	OH	44145	9/13/2013	Met dr. Discussed butrans, which dr is unfamiliar with. Review inclusion criteria for naive study- showed the pain reduction of open label and asked him if he had any doubts that this product would be effective for treating ATC pain. he said no, but how potent is it compared to fentanyl. I stated that nod a head to heads. We talked about re- assessing patients that have ATC pain and he said he see's them back once a month but some less. He said he is too busy to treat pain so he will refer them out to pain management. I said at what point do you call it quits and refer out. He said if they end up needing chronic pain control. Review of Butrans naive study. Told him where i wanted him to think butrans and why. Asked him how he felt about starting a patient like discussed today with Butrans. Then he asked about where to place the patch and managed care. Discussed OxyCotin
PPLPMDL0020000001	Cleveland	OH	44113	9/13/2013	inbetween butrans, the focus was the molecule, single entity...Brief talk on Intermezzo,dose specific for men /women.
PPLPMDL0020000001	CLEVELAND	OH	44109	9/13/2013	Reviewed Butrans for those LorTab/Tramadol failures, agreed and continues to find new patients, Intermezzo for MOTNA/dosing. Booked appt
PPLPMDL0020000001	Richmond Heights	OH	44143	9/13/2013	Went over Butrans- Tramadol failures, 7-day Transdermal, hasn't seen any yet. 15mcg presentation. OxyContin Q12h dosing and Intermezzo for MOTNA/Dosing. Raheja key prescriber in the area.
PPLPMDL0020000001	Akron	OH	44312	9/13/2013	I made a drop-in visit to speak w/ Joan Southard and schedule an in-service on Constipation. I spoke with the receptionist, who informed me that she was not available. I left. September Pain Month pamphlets and my BC
PPLPMDL0020000001	Beachwood	OH	44122	9/13/2013	I told dr that the only way He is going to see success with Butrans is to continue using it in patients like Scott or nancy that are in need of a dose adjustment on their IR opioid or those asking for another alternative for pain. Dr said Cohen is trying but hard to find the patients we have spoken about. I asked why and he said he is realizing that maybe he needs to taper some of his patients down off their IR opioid first. I told him its a good idea to do that anyway especially if its a short acting that has been refilled numbers of times.
PPLPMDL0020000001	Rocky River	OH	44116	9/16/2013	Clarified misconception that Butrans was not approved on BWC. Lynda was under the impression that patients on butrans had to fail mscontin and morphine. Spoken with vikki who thought this was the case. Told lynda and vikki to write butrans and have the patient present the script to the pharmacist and let me know what happens. Vikki took my card incase there is a problem. Reviewed start principle. Reviewed intermezzo indication and limitation of use
PPLPMDL0020000001	Berea	OH	44017	9/16/2013	Lunch. Dr told me that she doesn't write much opioids for chronic pain patients. I asked her who manages her diabetes or osteoarthritis patients and she said she treats that. I said do you treat them for pain with anything currently. She said NSAIDs. I introduced the naive study...and we discussed her current options in schedule 3 opioids. Dr. Said she would think about Butrans.
PPLPMDL0020000001	Berea	OH	44017	9/16/2013	Follow up based on last visit- confirmed with him that the patches do have the mcg information on each patch and that the patient could write the date in the patch. Dr said oh good, that's good for his older patients. He asked how my presentation went, we discussed highlights of the naive study and I learned that on average a 30percent pain reduction represents a clinically important improvement according to published medical literature in chronic pain patients. Dr said the number seems low. Left the Scott profile for him to remind him that we discussed finding the uncontrolled Tramadol patient to try Butrans 5mcg or 10mcg. He said yeah yeah...I no.<font color=blue><b>CHUDAKOB added notes on 09/30/2013</b></font>When he said this seems low, a follow up questions might be "what type of pain reduction do you look for? Or you can rephrase to ask "If your patients pain went from a 7 to a 4.9 (30% reduction) would you be satisfied with that initially?" Sometimes asking the same question in a different way helps to clarify.
PPLPMDL0020000001	akron	OH	44333	9/16/2013	Follow from last visit. Left her Maria profile- highlighted starting butrans 5mcg for a patients not controlled on NSAIDs. 7 day patch technology, single entity buprenorphine. Asked what concerns does she have going to. Butrans from NSAID. She said none.<font color=blue><b>CHUDAKOB's query on 09/30/2013</b></font>Have you worked on efficacy? If so, is she convinced it will work for her patients? Remember, they won't prescribe if they don't believe it works first.<font color=green><b>BARTOLI's response on 09/30/2013</b></font>understood and agree.<font color=blue><b>CHUDAKOB added notes on 09/30/2013</b></font>Great. I know you will
PPLPMDL0020000001	Cleveland	OH	44195	9/16/2013	Office under construction and dr only gave me stand up time. Handed him the opioid naive trial and hit key points while focusing on him identifying patients that are opioid naive who's pain is severe enough for Butrans. Dr said he is trying to use more and told me we could talk more next time. Nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44195	9/16/2013	MSL telephone conference with Dr. Eduardo Rodenas, Dr. Spalding, Dr. Dell, and June Cassano to discuss BUP3031. Dr. Spalding has agreed to take over as PI and study start-up procedures will begin again. MSL provided update to PPLP and Quintiles teams.
PPLPMDL0020000001	Cleveland	OH	44195	9/16/2013	Visited Pain/Anes/ Dept. Left Fellows info. Spoke with D.Leizman MD, Visited C25 Neuro Dept. Left info form Bamford, obtained admin.contact info
PPLPMDL0020000001	Lakewood	OH	44107	9/16/2013	Discussed Butrans 15mcg- pharmacist would not stock the 15mcg. Left patient brochure and will return another time to discuss butrans
PPLPMDL0020000001	Cleveland	OH	44114	9/16/2013	Rph. backed up with administering Flu shots, Left Butrans info.
PPLPMDL0020000001	Chagrin Falls	OH	44023	9/16/2013	Spoke with Maria the tech and Ben the pharmacist who told me Mondays were terrible for their store. Reviewed the butrans formulary grid and 15 pharmacy piece. Ben said he had to get back to customers but I spoke with Maria about bringing in the 15. She passed the information on. I reviewed the dosing of OxyContin
PPLPMDL0020000001	Parma	OH	44129	9/16/2013	Spoke with Keith the pharmacist who agreed to bring in the 15 based on the clinical trials data and their current use of the 10 and 20. Reviewed the start principle for butrans. Gained his commitment to not substitute Intermezzo when he sees a script.
PPLPMDL0020000001	Cleveland	OH	44195	9/16/2013	Went over Butrans dosing initiation, requested additional info.. Dr. Ilkes Buprenorphine
PPLPMDL0020000001	Chagrin Falls	OH	44022	9/16/2013	Spoke with ma to about clinical trials for Butrans and formulary coverage. Discussed flexible dosing of OxyContin. Booked lunch
PPLPMDL0020000001	Fairlawn	OH	44333	9/16/2013	Met dr for the first time and discussed both intermezzo and Butrans. Dr started off by saying he doesn't prescribe intermezzo because it is too expensive and he can just have his patients cut the Ambien pill to get the same diapered effect. I asked dr how he knows it is too expensive if he hasn't prescribed it? Dr said he has heard how expensive it is and figures that it isn't covered on insurance. I told dr that the only way he can state fact about a product is from practical experience and he has none. Dr said he will not use . I asked about his use of Butrans and he said he doesn't prescribe pain medicine. I asked if he refills tramadol or vicoden for his patients and he said he refers out immediately however mentioned that he has a suboxone clinic!?!? Dr said he will not prescribe Butrans either.
PPLPMDL0020000001	Cleveland	OH	44104	9/16/2013	Presented new 15mcg/hr Butrans dose, discussed formulary coverage/PA challenges, OxyContin/Intermezzo savings cards
PPLPMDL0020000001	Lakewood	OH	44107	9/16/2013	Saw dr. used the 30% pain reduction insight and asked how he felt that compared with is practice. Dr. said 30% was rather low. Told him about naive study- pain reduction during open label...and the patient not controlled on thir NSAID or tramadol to offer Butrans 5mcg. Dr as ked coverage of medicaid. I addressed, and focused on commercial savings program. Asked him if he would find one patient this week during re-assessment to try Butrans for? dr said...we'll see.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	9/16/2013	Spoke with Bridgett about al products and introduced the new Butrans dose of 15mcg after discussing key points to the product. Bridgett said she does not see patients to fill it and does not have any in stock. Pharmacist said that she knows western reserve pain uses it but their patients do not go to acme to fill it. I discussed OxyContin dosing, titration and patients appropriate. Bridgett said that she does fill it and has most doses in stock. Intermezzo dosing, and indication and left her with a dosing guide.
PPLPMDL0020000001	Akron	OH	44333	9/16/2013	Spoke with Katie the technician and Donna the pharmacist about all products. Discussed new dose for Butrans and reviewed new pharmacy piece. I asked Donna if she would order Butrans 15mcg when available. Katie looked at current stocking and they have all three doses and Donna said she will need to look at dispensing of Butrans. I told her that patients want their medicine today, not tomorrow. Discussed OxyContin dosing, titration, patient types for the product. Katie said they fill it regularly. Intermezzo discussion around indication and patient types.

PPLPMDL0020000001	Parma	OH	44129	9/16/2013	Delivered 30% pain reduction and asked what that would mean for her patients. She said less break through meds. Discussed trials 7.2-2.6 in open label. Discussed break through meds used in study. Shared over 50% got atleast 30% reduction. She said she has written some since the program. I asked what they were on and she said Vicodin. I asked if this information would make her think about more patients. Asked if she has patients on OxyContin and she said yes but she will not write schedule 2 because it is the rule in the practice so I reviewed the 7 strengths so she knows there are lower strengths. Reviewed intermezzo dosing and she said she has a patient on that pays cash. I reviewed caresource. Discussed managed care with Susan and zoni since they get the calls for refills. Discussed supplemental angelsia with Butrans and the potential for withdrawal during the first 3 days and how to initiate using the titration guide.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	9/16/2013	Discussed all key selling messages for Butrans with all drs in attendance. Reviewed both opioid naive and opioid experienced trials focusing on responder rates achieving at least a 30% pain score reduction. I asked dr Higley about his expertise with Butrans and where he has been implementing it into his treatment of pain? Dr said that he is very conservative in treating pain and dos not like prescribing short citing opioids. Dr said that he has used Butrans for patients unresponsive to Ultram and viconden. Dr said that most of his patients respond to it very well from an efficacy and safety standpoint. Dr said that he likes the patch instead of the pill and that it lasts for a week. I asked dr if he has ever used supplemental analgesics with Butrans? Dr said he has and would rather use the NSAIDs for breakthrough. I reviewed all the case studies and examined how to titrate and to do so when patients need more pain relief instead of discontinuing Butrans. Dr agreed and said he has patients on the 20mcg dose and has worked well. Intermezzo discussion and dr said he likes it but it is too expensive and Spoke with candy about the opioid naive trials and was reviewing the strengths when dr came to get patient. He was running behind and said I could see him at other office. I told him I wanted to get his thoughts on an article I read that said a 30% reduction in pain was clinically important, he said he will speak with me later. Left OxyContin titration guide and butrans naive study.
PPLPMDL0020000001	Parma	OH	44129	9/16/2013	Lunch. Dr asked if OxyCotin was generic. I said what do you think, he said I think it is. I said when you write oxycodone, are u thinking ur patient is getting OxyCotin. He said yes. Review of the facts. Review of the molecule of OxyCotin and the different delivery system q12h. Dr said there is a ot of concern with tylenol usage. Dr gave me his thoughts on the damage Tylenol can have on a patient. I reminded him that OxyCotin was a single entity opioid and if that might work better for his patients where he has Tylenol concern and he said yes. We discussed it was still can be abused, has abuse potential or can cause possible respiration depression. Dr said he has many patients that come in every month for their follow up visits regardless if ts a schedule 2 or 3. I asked him how many patients he sees in a week for the atc pain care and he said he will see 6 this week. I asked how he re-asses them at their visit. He says he asks their pain is under control and most say yes to get their script and get out. We discussed Butrans. He asked what's the generic name. He asked about dosages and we talked about the steady state. In regards to his re-assessment I asked him to ask his patients if they were waking up in pain. Dr said I'm sure they are. I said doctor they are a perfect candidate for the extended release Butrans. He said I was right. Then he asked about Medicare part d coverage.<font color=blue><b>CHUDAKOB's query on 09/30/2013</b></font>Lisa, please read the following sentence in your call notes. What data do we have to show OxyContin might work better for his patients?"I reminded him that OxyCotin was a single entity opioid and if that might work better for his patients where he has Tylenol concern and he said yes."In addition, you want to avoid words like "perfect candidate" Is there really a "perfect candidate" for any medication? You might have asked "Do you see where Butrans might be an option?"<font color=green><b>BARTOLI's response on 09/30/2013</b></font>No Study or data to support OxyCotin Works better. DR. Expressed concern with combination Opiod products - I will rework my wording.<font color=blue><b>CHUDAKOB added notes on 09/30/2013</b></font>I know what you are trying to do and being new it can be challenging. Hang in there.
PPLPMDL0020000001	Lakewood	OH	44107	9/16/2013	Spoke to ma trying to speak to doctor. Discussed Butrans, transdermal technology. Left Scott profile behind for dr to read.
PPLPMDL0020000001	Chagrin Falls	OH	44023	9/16/2013	Spoke with Cassie, pharm tech and Jim the store pharmacist about stocking and they said they would pass the information onto Chris bios, the pharmacist in charge. He asked why there was not a 15 before this because he has doctors that don't go to the 20 because they feel it is too big a jump. I gave a clinical trial over view and discussed pain reduction. Reviewed the start principle for OxyContin. Gave indication and limitation of use for
PPLPMDL0020000001	Lakewood	OH	44107	9/16/2013	Discussed the -re-assess start principal with office manager. she said the patients come back monthly for their refills. I asked what questions were asked regarding pain relief? She didn't know. I suggested to ask if they awake up in pain or not. Discussed extended release Butrans and OxyCotin q12h.
PPLPMDL0020000001	Rocky river	OH	44116	9/16/2013	lunch. Met the doctor- she was unfamiliar with Butrans. Discussed the overview of the 7 days opioid schedule 3 pain patch. Discussed Abuse potential and possible Respiratory Depression. She Asked about Rash- and I sighted the AE section of the main visual aid. Review of Opioid naive study and asked her if she ever thought about Using a Schedule 3 opioid that is extended release after a NSAID failure. She said no. When asked why... she said she never knew about Butrans before today. Discussed OxyContin, and she was familiar with that product and so was Dr. Blitz. She asked about managed care...when I asked if she had a patient in mind, she said the older patients and nursing home patients. Did give her dosage adjustment for the elderly with OxyContin (1/3 reduction). Covered the savings program.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	9/16/2013	Good discussion about Butrans and intermezzo. Discussed all key selling messages for Butrans and focused on the case studies. Reviewed each spaces study and asked dr if he has opioid naive or tramadol patients taking them around the clock? Dr said he has many of both. I told dr that he needs to pause before he refills the short acting opioid or NSAID and ask if the patient is appropriate for a schedule 3, 7 day transdermal patch? Dr said that he knows he should be using it but has been forgetting about it. I gave dr the slide guide for convensions and told him to keep it with him and discussed copy cards. Dr said he wants the cards and will get them from Higley who handles all cards. Dr said he will use it. Intermezzo indication, dosing and limitations of use. Dr said he can't get it covered but wants to use it. I told him to focus on Caresource. Dr said he has lots of buckeye.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	9/16/2013	Told him it may be difficult but worth a try if the patient had failed zolpidem. Short discussion about Butrans and dr did not recall discussing it in the past with me. Provided all key selling points about Butrans and asked dr if he has patients on tramadol around the clock? D said he does. Discussed the Scott profile and asked him to use Butrans for those patients needing a dose adjustment or can't tolerate it. Dr asked about cost and discussed new insurance grid. I asked dr if he will prescribe after showing placebo patch? Dr said he will and agrees that a schedule 3 is nice and likes the administration route.
PPLPMDL0020000001	Cleveland	OH	44102	9/16/2013	Discussed Butrans for those Tramadol failures, dosing and opportunity to do in-service for nurses
PPLPMDL0020000001	Cleveland	OH	44114	9/17/2013	Presented Butrans 15mcg/hr dose,Reviewed Butrans for those Tramadol failures, RPH Kristin hasnt seen any Butrans or much OxyContin. Intermezzo for MOTNA/dosing.
PPLPMDL0020000001	Cleveland	OH	44113	9/17/2013	Talked with Debbie (RN) discussed Butrans for those Tramadol failures, she agreed its an option for appropriate patients. Ortho/Pain mgmnt is developing an protocol for referring patients to pain mgmnt. Left Butrans Initiation/Titration guides for Dr.
PPLPMDL0020000001	cuyahoga falls	OH	44223	9/17/2013	Told dr at window that he should take an extra minute before adjusting a dose of a tramadol or viconden patient and ask yourself if Butrans is an appropriate option for those in around the clock pain. I handed him the nancy profile. Dr said he doesn't have many patients on viconden but knows he needs to review it with those that need more than the short acting. Dr said because of his sports medicine background he really tries to make sure sus his patients to through physical therapy prior to him implementing any LA opioids. I told dr I understand however if the patient is still in pain during physical therapy he might need to move to An LA opioid? Dr agreed and thanked me for the information.
PPLPMDL0020000001	Cleveland	OH	44109	9/17/2013	Talked with Floater(George)RPH. Presented Butrans 15mcg/hr..Learned that Mary-tech. does all stocking/ordering. Will order in next month
PPLPMDL0020000001	Northfield	OH	44067	9/17/2013	Spoke with see about ordering in a box of the 15. She said she orders a box every other month but did have all the strengths in stock. She said if she orders on a mon she will get on her thurs shipment and was wondering would she get the product in time if she orders now. I told her physician promotion will begin oct so having the product on had will allow me to tell physicians one of three pharmacies they can get the 15. Reviewed clinical trial data. I asked if she stocked all the OxyContin strengths and she said she thought so but she was unaware of the 15. Reviewed intermezzo indication and told her there was no ab equal.
PPLPMDL0020000001	Parma	OH	44129	9/17/2013	Quick through the window reminder of butrans managed care formulary win on part d. Reminded dr of flexible dosing for OxyContin.
PPLPMDL0020000001	Parma	OH	44129	9/17/2013	Dr reminded he refers out to dr demagone but was happy to listen to what I had to say. I told him I just wanted to give him some information on pain reductions and delivered the pain reduction insight and he said it would not impact his practice because he refers out. No further information gained.
PPLPMDL0020000001	Parma	OH	44129	9/17/2013	Asked Edwin to bring in a box of the 15 since he has some writers of the 10 and 20 in this area. He asked if there would be an automatic shipment to the store and I said I did not think so. He asked me to find out and get back to him because he did not want to get in a box when one was automatically coming. Reviewed dosing flexibility of OxyContin. Reviewed intermezzo dosing and administration.
PPLPMDL0020000001	Cleveland	OH	44109	9/17/2013	Talked with RPH, presented Butrans 15mcg/hr. She Has only 1 patient on Butrans. and OxyContin is rarely filled at this location, Main Campus only
PPLPMDL0020000001	Parma	OH	44129	9/17/2013	Dr could not stay and talk for lunch so I gave him the pain reduction insight and asked how he that would impact his patients. Dr said he does not like to write long acting narcotics and left for the hospital. I told him I would leave him some interesting information on the butrans clinical trials.
PPLPMDL0020000001	Northfield	OH	44067	9/17/2013	Spoke with Maggie the ma who gave me office hours and said dr is having success with the patch. Reviewed managed care grid to let her know butrans is covered on more that workers comp. asked about drs oxycotin usage and she said very little but occasionally. I reviewed the conversion from Percocet to OxyContin and she was not aware that they were the same.
PPLPMDL0020000001	Cleveland	OH	44102	9/17/2013	I recv'd an email from Cleveland District Sales Manager, Barry Chudakoff, requesting that I contact sales rep, Mark Gutkowski in regards to coordinating and completing a pain in-service to coincide w/ his Butrans in-service. A phone call was placed to Mark to discuss. 216-310-5700
PPLPMDL0020000001	Parma	OH	44129	9/17/2013	Linda needed more butrans tear sheets and she said she wrote one yesterday after I left. I asked what did the patient present with and she said low back pain. A reminded her to prescribe supplemental analgesia. Reminded her of intermezzo dosing and administration and caresource
PPLPMDL0020000001	Akron	OH	44310	9/17/2013	Started off using the insight about number of patients turning 65 and into Medicare age. I told him that he will need more and more options that are available for patients pain. Dr agreed and said that it is becoming more difficult to find options that are not generic for pain. Dr said he really likes Butrans and wanted to know the Medicare D plan coverage. I told him about the Medicare D plan coverage and asked him if it makes a difference for his patient population? Dr said it does make a difference. I asked dr if he would like to see at least a 30% reduction in pain score from a pain medicine? Dr said his patient would very much like that. I told him about the clinical studies focusing on the clinical results and safety for Butrans. I asked dr what triggers him to titrate Butrans? Dr said patients fill it a pain rating each time they come back for follow up but he said he flies on functionality and improved lifestyle as signs on what to do next. I asked dr if he has titrated Butrans to 20mcg? Dr said he has and has had good results. Dr said that patients either get really good results from Butrans or they don't like it at all. I told him to focus on the patients with good results and try to find others with similar profiles. Dr agreed and said that's a good point. I asked dr to continue prescribing and he agreed.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	9/17/2013	Spoke to Elizabeth about Butrans dosing, patient types like nancy, titration and conversions. Elizabeth said they have a couple of patients on it. I introduced the 15mcg dose and explained When it will become available. She said that they will probably get it from their wholesaler. Elizabeth said that she was filling viconden for a patient and Butrans came up in the system as a product that may be appropriate for the patient. Elizabeth said that the system does that for them which helps. I asked if she ever recommended it or told a patient filling Vicodin? She said she has not but she may.discussed OxyContin and intermezzo dosing and titration with OxyContin. Elizabeth said they fill OxyContin fairly often but have not seen intermezzo.
PPLPMDL0020000001	Parma	OH	44134	9/17/2013	Discussed drs reduced hours and asked where he is the rest of the week and he said he does various things the rest of the week. I asked him how he access pain and he said experience. He said patients tell him how their meds are working. He just had a patient that was on 30 bid of OxyContin and wanted more. Dr said he would not increase the dose and told the patient you can't trust generics. I reminded him that there is no generic for OxyContin. He asked about pharmacy switches to oxycodone and I told him that if the patient was given an immediate release twice a day he would probably not get pain relief. Reviewed the 7 strengths of OxyContin and the start principle. I stated he was reaccessing pain. Reviewed the titration of butrans. Reviewed intermezzo indication.<font color=blue><b>CHUDAKOB's query on 09/27/2013</b></font>Marcia, you really cannot make the statement that if a patient was given an immediate-release twice-a-day he would probably not get pain relief. you do not know that to be the case, nor do we have any data to support this.<font color=green><b>KENNOMA's response on 09/27/2013</b></font><font color=blue><b>CHUDAKOB added notes on 09/30/2013</b></font>Thank you. If you have questions on this, please let me know.
PPLPMDL0020000001	Cleveland	OH	44109	9/17/2013	Visited Anes/Pain Dept. Spoke with Sue-Resident Program coordinator (21 Residents) Left Butrans dosing and Titration guides for residents. Obtained contact in regards to entire Metro Health System educational coordinator (Marcie Becker)

PPLPMDL0020000001	Parma	OH	44129	9/17/2013	Gave pain reduction insight and asked dr his thoughts on how this might impact his practice. Dr said he put a patient on butrans and she is doing well. I asked what prompted him to write and he said he always liked the product but coverage was an issue I asked if he has written in the past and he said no. I reviewed the formulary grid and told him about the recent formulary wins on med d. I reviewed the clinical trial pain reduction data and he said he will write again. I confirmed that he wanted to write in the past but formulary was stopping him. I asked if the additional data confirming his experience would encourage him to write for more patients. I asked dr if he was familiar with the 7 dosing strengths and he named all but the 15. I reminded him if the 15 and the titration of 25-50%. He asked about coverage because the hospital only gives generic as an option. I told him there was no generic and he called Parma general hospital pharmacy on speaker phone and they verified that they only have oxycodone ER generic. I told him I would go to the pharmacy to investigate because their ems system must have incorrect information. Reminded dr of intermezzo and dr said he has tried to write before and was not able to get it approved. I showed him the savings cards and he said he will try again.
	Cuyahoga Falls	OH	44221	9/17/2013	Spoke to Kristen the pharmacist about all products. Discussed Butrans as the only schedule 3 7 day transdermal patch. Introduced the 15 mcg dose and about shipping across the country. Kristen said she just filled a Butrans 10mcg and are receiving the 5 mcg this morning. Kristen said she would order the 15mcg because they are seeing enough to warrant it especially since they are coming from pain management. I asked who orders and she said usually her technicians order it which I never heard of. Discussed OxyContin dosing and conversions from Percocet and she said it makes sense and she sees way too much Percocet being filled along with vicoden and patients should be on long acting products. Intermezzo dosing and limitations of use which Kristen said she has not filled yet.
PPLPMDL0020000001	Parma	OH	44129	9/17/2013	Gave pain reduction insight and dr said he does not use pain scale. Said he asks the spouse how the patient is doing. Asked his thoughts on pain reduction and he said he does not believe in long term use of narcotics and I discussed the inclusion criteria, all of which he said there was surgery for. Asked if he would prescribe for patient with a known pathology, who he trusts to write for and he said no. I asked if he did not want to write or if he truly did not believe in the use of narcotics. He said both and he will leave to pain management but the best doctors know how to get rid of the pain with surgery. I reviewed intermezzo indication and limitation of use and he said this would be perfect for his group home patients who need MRI. I told him this was not a proper use because the patient needed atleast 4 hours of sleep and an MRI is about an hour. He said it would be cheaper and I said again that intermezzo was not studied for that use and that is an improper use of this sedative hypnotic. I asked him to review the intermezzo dosing guide.
PPLPMDL0020000001	Parma	OH	44129	9/17/2013	Spoke with justyna the tech and told her drs in the area have informed me that the hospital ems system has an oxycodone ER generic selection and I was confused because there is no OxyContin generic. She said the pharmacist was in a meeting but she would give my card and have her call me. I reviewed the Percocet conversion and explained that my concern that drs in the area are not sure what patients are getting.
PPLPMDL0020000001	Akron	OH	44333	9/18/2013	Saw dr in hallway in stow office and reviewed the appropriate patients for Butrans and told her about a patient like Scott. Stephanie said she is seeing a lot of it in the office and most are doing very well. I told her to prescribe it for the patient we just discussed. Stephanie said ok. Nothing else learned
PPLPMDL0020000001	Parma	OH	44129	9/18/2013	discussed new script and that she needs to wait 3 days to see how the patient is responding. I refreshed her memory on using supplemental analgesia with butrans. linda discussed another patient she is monitoring to see how they respond to the 20.
PPLPMDL0020000001	Stow	OH	44224	9/18/2013	Quick message in hallway about Butrans and asked him to continue prescribing it for his patients not responding or tolerating IR opioids. Left him with the Scott profile. Nothing else learned.
PPLPMDL0020000001	Stow	OH	44224	9/18/2013	I told dr about the insight about hydrocodone /APAP. And asked what his thoughts are about the statistics? Dr said he agrees that it has gotten about of control. I asked dr if he sees the need to initiate ER opioids before a patient reaches the 90 days? Dr said there are many factors that play into that but said he tries to do it as early as he can. I told dr that I want him using more Butrans for his patients needing a continued dose adjustment of their tramadol and OxyContin when patients have continued to refill their Percocet month after month. Dr said thanks. Nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44113	9/18/2013	you have come up with a good next question. If you can get him to realize the success he has had and the patient type he had it on, you will increase his business. Good thinking!
PPLPMDL0020000001	Brooklyn	OH	44144	9/18/2013	Spoke with Justin, no new info learned has seen some RX's of OxyContin this week, nothing on the Butrans front
PPLPMDL0020000001	Parma	OH	44129	9/18/2013	Floater filling in, no time to discuss, stop back later in the week. Left Butrans 15mcg/hr info
PPLPMDL0020000001	Parma	OH	44129	9/18/2013	spoke with pharmacist about dr was under the impression that patients were getting generic oxycontin. pharmacist clarified that the emr system has a pull down menu that says oxycodone ER but assured me that the patient is getting the branded product because that is all that is in stock
PPLPMDL0020000001	Parma	OH	44129	9/18/2013	communicated with dr the coverage for bwc. dr asked if it was covered now and office staff said no and provided a copy of the denial.
PPLPMDL0020000001	Cleveland	OH	44106	9/18/2013	Visited and booked appt with Terrah for Anes/Pain dept. Left OxyContin Info for Silverman and Oncology
PPLPMDL0020000001	Akron	OH	44333	9/18/2013	Conversation with dr about using Butrans for his patient patients under and over 65. Discussed the opioid experienced study and reviewed the inclusion and exclusion criteria. Dr said he has some patients on Butrans in their 30's and 40's but most are over at least 50. Dr said he will find some more patients for Butrans and knows how well it is covered on Medicare D plans. I discussed OxyContin and reviewed the insight about oxycodone. Dr said he really is liking OxyContin more especially for his patients on Percocet. Dr said its a necessary and easy switch. I told dr to continue handing out copy cards and to use intermezzo more. Dr reminded me how he can't get insurance to pay for it.
PPLPMDL0020000001	Copley	OH	44321	9/18/2013	Told dr Machado and his father Dr Grenville Machado about a patient coming back in for a follow up appointment for their pain on tramadol. I reviewed the Scott profile and told him that he has a decision to make when the patient has had Tramadol refilled for at least 3 months and complains of pain. He can either titrate the Tramadol, or consider what the patient is being treated for like osteoarthritis or low back pain; take a minute to assess the appropriateness of Butrans for that patient. I reviewed the conversions for Butrans and asked him his thoughts? Dr said he sees my point and will consider it because he likes that its an ER opioid that is a schedule 3. I asked him to gain clinical experience. OxyContin dosing schedule and asked him his experience with it. Dr said he has had little to none since he is so new but said he will mostly reserve that for his specialists. Showed him the conversion guide with Percocet and asked him to use the 10mgq12h. Intermezzo indication, dosing and limitations of use.
PPLPMDL0020000001	Cleveland	OH	44113	9/18/2013	Quick Butrans reminder for those Tramadol failures, left dosing/titration guide
PPLPMDL0020000001	Cleveland	OH	44130	9/18/2013	reviewed butrans 15 with ben the pharmacist, discussed the start principle for oxycontin. reviewed intermezzo indication and limitation of use
PPLPMDL0020000001	Copley	OH	44321	9/18/2013	Spoke to dr about the Scott profile and told him to take the extra minute before he refills or titrates tramadol and see if a product like Butrans would be appropriate. I reviewed the case study and asked him if he will do that more frequently? Dr said he already has patients on Butrans who are doing well from tramadol and vicoden. I told dr to evaluate more patients like them for Butrans going forward. Nothing else learned.
PPLPMDL0020000001	Akron	OH	44313	9/18/2013	I told dr that I'm guessing that he has cm,racial prescription insured patients taking 4 5 /325 Percocet a day? Dr said he has some. I showed him the OxyContin conversion scale and told him that if those patients are on it for more than 90 days, a ER opioid may be appropriate and a patient would convert to 10mg OxyContin q12h. Dr looked at it and said many patients on Percocet over 90 days have to because of cost. I told him I want to focus on his patients where cost is not as much of an issue. Dr said ok and he understands. I gave him another Scott profile and told him to reassess his tramadol patients for Butrans. Dr said ok and took the information.
PPLPMDL0020000001	Cleveland	OH	44113	9/18/2013	color=blue>cb>CHUDAKOB's query on 09/30/2013</b></font>What is a "cm,racial prescription"?<font color=green>cb>REICHCL's response on 10/03/2013</b></font>Commercial. Stinking iPad.....<font color=blue>cb>CHUDAKOB added notes on 10/04/2013</b></font>Thanks for the clarification. Please take the time to review. Your notes before submitting them. That will avoid this extra clarification... Thanks Cliff.
PPLPMDL0020000001	Cleveland	OH	44113	9/18/2013	Quick OxyContin reminder Q12h flexible dosing strengths. Left Formulary grid
PPLPMDL0020000001	Cleveland	OH	44106	9/18/2013	Discussed Butrans 15mcg/hr strength, will order if she sees RX's. OxyContin strenths, she believes most DR's are aware of flexible dosing
PPLPMDL0020000001	Stow	OH	44224	9/18/2013	Had enough time to speak with pharmacy technician about Butrans. She said that they see a good amount of it and have all doses in stock. I reminded her it is a schedule 3 and is a 7 day transdermal patch. I introduced the 15 mcg dose and asked if they will stock? She said that the pharmacy manager Krista would know that information and was told she was way to busy to talk. I asked her to tell Krista about the new dose and that it will be available on October 2.
PPLPMDL0020000001	Copley	OH	44321	9/18/2013	Spoke to Matthew the technician about all products. I introduced the new 15mcg dose of Butrans and reviewed all key selling points. Matthew said they filled one a couple of weeks ago for dr Machado. I asked the dose and they said 5mcg. I asked who does the ordering and he said Jenna the pharmacist typically does it. I asked if he thinks she would order the 15mcg dose as long as they continue to see prescriptions. OxyContin discussion with Matthew about doing and patients appropriate for it as well as reviewing the conversions from Percocet. Asked him if he has seen any intermezzo and he said no. Left dosing card for Jenna.
PPLPMDL0020000001	Brooklyn	OH	44144	9/18/2013	Reviewed Butrans for those Tramadol failures, Asked Dr. if a 30% reduction in pain scores was relevant to his patients he is treating for pain? Dr. agreed it was relevant. He believes most patients are adequately controlled with cheaper alternatives, doesn't like to do PA's. Brought to his attention that ESI/Medco have moved Butrans to 2nd tier. He thought that was helpful and would consider in prescribing. OxyContin Q12h flexible dosing strengths along with intermezzo for MOTNA/dosing
PPLPMDL0020000001	Westlake	OH	44145	9/18/2013	Lunch. Discussed where he has been using Butrans and he said in his patients that have failed NSAIDs. He and dr Walsh and np christen said they try not to use hydrocodone for anything longer than acute (4 weeks max) usage and they don't like to pick any opioid that is to an extended release. Initially I started talking about Scott profile,he said he would never go from Tramadol to Butrans. That if lyrica or didn't work then he would use Butrans. Discussed getting Butrans into patients hands. Drs said they rarely remember to use the coupons. We discussed how the program works or the patient can go to Butrans.com and get their own savings print out. Dr said they use very little OxyCotin. I said I don't ne'er stand why not cause you said you R looking for extended release products. He started mentioning the very complicated patient type he doesn't treat. I said what's the purpose of having 7 strengths? He said I no everyone is different. I said I said that not me. But yes. OxyCotin is a single entity product and might help a very sever patient. But who's to say another dose like 10mg wouldn't work for someone else? Everyone's pain is different. Discussed intermezzo. Dr said if he has to pa then it's too much of a hassle. Dr did see the value in gender dosing and he thought the indication was nitched. However dr said he wouldn't be writing it if every time he writes it he has to prior auth it.
PPLPMDL0020000001	Parma	OH	44129	9/18/2013	gave 30% reduction in pain insight. dr said he does not use a scale and he goes by how people say they feel. he could not remember patient he wrote for in the past. dr agreed that he would prefer to write butrans in place for vicodin or percocet and instead of tramadol. dr said the reduction in pain really does not mean anything because it is subjective. we agreed that he would widen his patients for butrans to not include the elderly and when nsaid is not working. he asked about oxycontin and we replied that it is not generic and mentioned all seven doses are branded only.
PPLPMDL0020000001	Akron	OH	44303	9/18/2013	Spoke to Rod the pharmacist about stocking of the new 15mcg dose for Butrans. Told him that he needs to at least stock the 5mcg dose for new patients initiating. Rod said he will stock the 5mcg and will probably order the 15mcg at a later date. Discussed stints appropriate for Butrans and OxyContin. Rod said he's ok on copy cards. Asked about intermezzo prescriptions and rod said he has seen one and said its very expensive. Spoke to him about falling ambien and Caresource.
PPLPMDL0020000001	Westlake	OH	44145	9/18/2013	Spoke to Robyn. Office changed policy to not do luncnes or any product presentations from reps due to sunshine act. Lorain office closed. Most doctors rotate between Lakewood, westlake and Avon offices. Told me to speak to Jessica his office manager regarding any information to be passed to the doctors. Lisa is his office manager to pass information. He is in westlake and Lakewood full time.
PPLPMDL0020000001	Munroe Falls	OH	44262	9/18/2013	Spoke with dr about the hydrocodone/APAP insight and asked her what she thinks about the statistics? Dr said she can't believe its that high but she's not really that surprised. Dr said she knows she needs to get more patients off IR opioids but it is difficult because patients don't want to give them up. I discussed how if she initiates Butrans, patients can still take their IR opioids for supplemental analgesia. Dr said that's a good point and she knows she needs to use it more often. I told her to use it for patients like Scott and nancy. I told her to not forget about OxyContin for her patients uncontrolled on Percocet. Intermezzo use for her patients complaining of in the middle of the night insomnia.
PPLPMDL0020000001					

	Westlake	OH	44145	9/18/2013	Spoke w Claudia and dr thru window about Butrans and OxyCotin. Discussed OxyCotin he said he writes a little. We discussed the variety of doses and what that could mean to a patient? Butrans- dr was unaware of the product. I opened a demo patch and reviewed the study of the naive. Told him who I'd like him to think of Butrans. And pulled out Maria profile and said here an example...went over her case study and then asked have you ever thought about writing an extended release schedule 3 after a NSAID failure? He said maybe Tramadol. I said do you write Tramadol in this example? He said yes. I said that's fine. Opened the initiation guide and asked him where he usually falls and he said under 100, so I reviewed where to start Butrans. Also reviewed placement of the patch. Dr asked if it compared to fentanyl. I stated no head to head and that it was a schedule 2, not a 3 like Butrans. As far as pain scores go, recapped the naive study of the open label. I asked he has any concern this product wouldn't work for his patients. He said no and that he would try it. I said let's just fine one in the next week. He said he will read the materials sent behind. Claudia said he reads alot and if he is interested in the topic he will read the study.
PPLPMDL0020000001	Brooklyn	OH	44144	9/18/2013	Quick Butrans reminder, Tramadol failures, asked for 1 of those commercial insured patients. Informed of formulary with MedCo/ESI. He said that was good to hear, majority of patients, Med D. Still feels patients are doing good on present therapy. Also, OxyContin Q12h flexible dosing strengths and excellent formulary status. Dr. Said OK, will keep in mind!
PPLPMDL0020000001	Cleveland	OH	44113	9/18/2013	Discussed Butrans for those Tramadol and patients requiring around the clock pain therapy. He agreed, talked with him in regards to Debbie, he said he will continue to review. Reminded of OxyContin Q12h flexible dosing
PPLPMDL0020000001	Westlake	OH	44145	9/18/2013	Lunch. Discussed where he has been using Butrans and he said in his patients that have failed NSAIDs. He and dr Walsh and dr christen said they try not to use hydrocodone for anything longer than acute (4 weeks max) usage and they don't like to pick any opioid that is to an extended release. Initially I started talking about Scott profile, he said he would never go from Tramadol to Butrans. That if lyrica or didn't work then he would use Butrans. Discussed getting Butrans into patients hands. Drs said they rarely remember to use the coupons. We discussed how the program works or the patient can go to Butrans.com and get their own savings print out. Dr said they use very little OxyCotin. I said I don't ne'er stand why not cause you said you R looking for extended release products. He started mentioning the very complicated patient type he doesn't treat. I said what's the purpose of having 7 strengths? He said I no everyone is different. I said I said that not me. But yes. OxyCotin is a single entity product and might help a very severe patient. But who's to say another dose like 10mg wouldn't work for someone else? Everyone's pain is different. Discussed intermezzo. Dr said if he has to pa then it's too much of a hassle. Dr did see the value in gender dosing and he thought the indication was nitched. However dr said he wouldn't be writing it if every time he writes it he has to prior auth it.
PPLPMDL0020000001	Cleveland	OH	44103	9/18/2013	Presented Butrans formulary status with ESI/Medco, Dr. said OK, Asked for those Tramadol failures, said he will consider. Reminded of OxyContin Q12h flexible dosing strengths
PPLPMDL0020000001	Cleveland	OH	44130	9/18/2013	Introduced myself to patty the pharmacist and reviewed the clinical trial data. discussed other departments in the hospital. reviewed the start principle, gave indication and limitation of use
PPLPMDL0020000001	Westlake	OH	44145	9/18/2013	Lunch. Discussed where he has been using Butrans and he said in his patients that have failed NSAIDs. He and dr Walsh and dr christen said they try not to use hydrocodone for anything longer than acute (4 weeks max) usage and they don't like to pick any opioid that is to an extended release. Initially I started talking about Scott profile, he said he would never go from Tramadol to Butrans. That if lyrica or didn't work then he would use Butrans. Discussed getting Butrans into patients hands. Drs said they rarely remember to use the coupons. We discussed how the program works or the patient can go to Butrans.com and get their own savings print out. Dr said they use very little OxyCotin. I said I don't ne'er stand why not cause you said you R looking for extended release products. He started mentioning the very complicated patient type he doesn't treat. I said what's the purpose of having 7 strengths? He said I no everyone is different. I said I said that not me. But yes. OxyCotin is a single entity product and might help a very severe patient. But who's to say another dose like 10mg wouldn't work for someone else? Everyone's pain is different. Discussed intermezzo. Dr said if he has to pa then it's too much of a hassle. Dr did see the value in gender dosing and he thought the indication was nitched. However dr said he wouldn't be writing it if every time he writes it he has to prior auth it.
PPLPMDL0020000001	Westlake	OH	44145	9/19/2013	wouldn't be writing it if every time he writes it he has to prior auth it. Spoke to dr (his wife, a doctor that works in the office) and his daughter (in med school) and the ma staff regarding Butrans. Dr said he was going to write it last week but couldn't remember the dosages, so wrote vikodin instead. I asked him to describe for me who he feels is the appropriate patient type for Butrans. He said chronic patients that fail vikodin. I said why wouldn't u use it after NSAID failed? He said oh no never. He said he will write a month or 2 of vikodin but if the pain is still present he will switch them to Butrans. I said what's e chance patients treated around the clock on pm schedule 3 products that they wake up in pain? He said good chance. I said wouldn't it make sense to give them an extended release option like Butrans instead of vikodin. He said maybe. Discussed start principal of re-assessment. And asked him what questions do you ask the patients? He says he asks if they are in pain and most say their pain is controlled, grab their script and leave. I said...if most are controlled, I'm fine with you writing Butrans for some, doesn't have to be all of them. He switch subject to OxyCotin. Said it was an old drug...I said you must be pretty familiar with the molecule. He said oh yes. I said in the day and age with all the concern with combination products why wouldn't ppl choose single entity products? He said everyone is different. Reviewed the molecule of OxyContin, that it was q12h and that there were 7 diff doses to tailor the product patient.
PPLPMDL0020000001	Stow	OH	44224	9/19/2013	Led with insight about 41% of patients on hydrocodone/APAP combinations. I asked dr if he agrees with the statistic and secondly if he would do anything about helping to change it? Dr said he agrees that too many patients are on the IR opioids for too long. Dr said that he's not crazy about prescribing opioids anyway. I asked him if he agrees that for a patient with around the clock pain for 3+ months a ER opioid may be a good option? Dr agreed but for the right patient. I told him about how Butrans needs to be used and discussed the Scott and nancy profiles. Dr said he gets it and will use it in time. OxyContin discussion around conversions from Percocet and asked for him to use intermezzo.
PPLPMDL0020000001	Westlake	OH	44145	9/19/2013	Saw the office manager and receptionist. Asked to schedule a lunch but are booked for a while and left my card to be out on a cancellation list. Dr doesn't see reps with out an apt. I did leave various reading materials on Butrans and OxyContin (opioid naive, initiation guide, and conversion slim jim for OxyContin).
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	9/19/2013	Spoke to Lisa the technician about the new 15mcg dose for Butrans. Lisa said they see a lot of butrans from western reserve pain management. I asked if those patients are coming in with copy cards? Lisa said many of them are not and its too expensive. I explained the copy cards and told her I will get some to her because she requested it. I asked based on their usage if they would order the 15mcg dose? She said once they see a Rx because its too expensive. I asked her if they are signed up to get new doses or medicines and if it doesn't move in 6 months they get their \$\$ back? Lisa didn't know but said she will check with pharmacist. Gave her OxyContin and intermezzo dosing guides and she said they fill OxyContin but didn't know about intermezzo.
PPLPMDL0020000001	Akron	OH	44305	9/19/2013	Spoke to Michele and Steve the floater pharmacist. Explained all products and introduced the new 15mcg dose for Butrans. Steve looked to see what they has in stock already and have non. Steve said he saw it come through the other day so he said maybe they had it and was dispensed. Discussed OxyContin and intermezzo dosing and explained copy cards for all products.
PPLPMDL0020000001	Westlake	OH	44145	9/19/2013	Spoke to tech n pharmacist regarding Butrans. Pharmacist has dispensed the ten mcg I asked if she knew who was writing and she wasn't specific. Talked about the 15mcg and stocking it. she said maybe, but wouldn't say yes.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	9/19/2013	Says dr while talking to Darlene (ma) that handles pt rooming and all insurance issues for patients including PA's. Updated Darlene on all insurance coverage with Butrans and focused on Caresource and Medicare D plans. Dr Hegde overheard me and said she has had good success recently and didn't know so many Med D pans are covering Butrans. I told her that the more prescriptions that are written typically make it easier to insurance complaints to pay for it. I asked her if she could focus on those tramadol patients who need a dose adjustment. Dr said she usually sees more viconden. I told her those are good candidates as well. Nothing else learned.
PPLPMDL0020000001	Bedford	OH	44146	9/19/2013	asked dr how long he keeps a person on a short acting before he moves them to a long acting, he said it depends and patients can be on short acting for 10 years. gave 41% hydrocodone insight and dr said yes. he said if they take 3 some days and 5 some days he will not move. if they are on more than 3 a day consistently then he switches to long acting, he gives short acting to most of his long acting patients.
PPLPMDL0020000001	Westlake	OH	44145	9/19/2013	Updated doctors address. Schedule a lunch.
PPLPMDL0020000001	Westlake	OH	44145	9/19/2013	Spoke to ma (used to work at dr wendts). Dr was n with patients however she told me that the dr wrote both products. We discussed Butrans, showed her the demo and reviewed the savings program for both OxyContin and Butrans.
PPLPMDL0020000001	Westlake	OH	44145	9/19/2013	Spoke to office manager, she told me that the dr does not right my products and I could leave materials behind but he won't read any of it. I said I would take my chances and hope that he does get comfortable with this product out for 3 years now. I left various product materials and the naive study for his review.
PPLPMDL0020000001	Olmsted Falls	OH	44138	9/19/2013	Dr didn't have time today. So I spoke w office manager. Review of Butrans saving program and left various materials on Butrans and OxyContin for the doctors.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	9/19/2013	Saw dr while talking to Darlene about Butrans insurance coverage. I asked her what pain medicine most of her patients are on when she sees them? Dr said she sees all sorts of stuff. Dr said mostly viconden and tramadol and gabapentin. I told her if that is the case, Butrans is an ideal product for those patients who need a dose adjustment on their IR product. Dr agreed and said she is also trying to remember the Caresource coverage. I told her not only Caresource but gave overview of the Medicare D plans. Dr said she is happy to know that. I asked her if she will keep prescribing and dr said yes.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	9/19/2013	Saw dr at hospital in between patients and showed him the 10mcg patch through the window. Dr said he uses a lot of the 10mcg and things are going well. I asked him if things are going smoothly with insurance coverage and if there is anything he needs? Dr said no and that Glenn and Alissa handle any other the insurance issues. I asked dr to continue prescribing.
PPLPMDL0020000001	Stow	OH	44224	9/19/2013	Discussion with dr about Butrans and reviewed all key selling messages. Reviewed case studies, titration and if he will use it and if it makes sense for patients failing their IR opioids? Dr said he does and will try it. Nothin else learned.
PPLPMDL0020000001	Stow	OH	44224	9/19/2013	Dr started out saying that he remembers me discussing Butrans last time. I asked him if he has used it and he said he has a few weeks after I was there last and it was rejected my the patients Medicare D pan. I explained how far the product coverage since my last visit and reviewed plans. I reviewed all case studies, conversions, appropriate starting dose, titration and patch description. Dr said he's not sure about using it because he refers to Dr Narouze. I told him to call Dr Narouze and ask him about his clinical experience with Butrans. Dr said he may do that. Discussed OxyContin case studies that are new and dr said its makes sense to use if a patient has been on Percocet for 3+ months. Intermezzo dosing and limitations of use.
PPLPMDL0020000001	Beachwood	OH	44122	9/19/2013	dr asked how can butrans compete with duragesic. I told her both are opioids and showed her the titration guide to explain they morphine equivalent for the different strengths of butrans. I reviewed the maria patient profile and she said she likes to use Tylenol with codeine. I explained the titration process and the use of supplemental analgesia. she asked about coverage and I reviewed the savings cards and vouchers and formulary grids. I asked what would keep her from prescribing and she said prior authorizations. reviewed clinical trials. I said if she uses the formulary grid she will have a better idea of what may be required but I understand that there are some carve outs that may need a prior auth. dr said she does not initiate oxycotin except for cancer patients and I reviewed the percocet conversion of the detail piece. discussed intermezzo indication and limitation of use.
PPLPMDL0020000001	Beachwood	OH	44122	9/19/2013	dr asked how can butrans compete with duragesic. I told her both are opioids and showed her the titration guide to explain they morphine equivalent for the different strengths of butrans. I reviewed the maria patient profile and she said she likes to use Tylenol with codeine. I explained the titration process and the use of supplemental analgesia. she asked about coverage and I reviewed the savings cards and vouchers and formulary grids. I asked what would keep her from prescribing and she said prior authorizations. reviewed clinical trials. I said if she uses the formulary grid she will have a better idea of what may be required but I understand that there are some carve outs that may need a prior auth. dr said she does not initiate oxycotin except for cancer patients and I reviewed the percocet conversion of the detail piece. discussed intermezzo indication and limitation of use.
PPLPMDL0020000001	Akron	OH	44313	9/19/2013	Was told be the pharmacist and technician that they only has a couple of seconds because they are so busy. I told tech about the 15mcg dose for Butrans. Left info and gave OxyContin and intermezzo dosing information.
PPLPMDL0020000001	Lakewood	OH	44107	9/19/2013	Spoke to ma. Last week so done was murdered in their parking lot during the day and made the news. Tried to inform ma regarding Butrans and the savings program, however due to the number of patients in the waiting room she did not want engage in discussion this day.
PPLPMDL0020000001	Fairview Park	OH	44126	9/19/2013	Spike w rn and asked her if I could get a lunch to discuss new FDA dosing with Butrans. She checked w dr and he said no and that he would read it n his own. Left being the fpi and a variety of selling materials. Reviewed with the rn the Butrans and what it means for patients to have more options for their analgesia. She agreed. Reviewed the commercial savings program with her, she said they still have coupons and don't need any more. Left OxyContin and intermezzo approved materials for dr to review.
PPLPMDL0020000001	Hudson	OH	44236	9/19/2013	Daw dr in Hudson and he came to window. I told him that he needs to be switching his Percocet patients who are suffering needlessly to OxyContin q12h. Dr said he does that but doesn't have many Percocet patients. Dr told me that he refilled a Butrans prescription and the patient is doing well. I told dr that he again, needs to start his own patients on in who are in pain on a IR opioid like tramadol. Dr said he understands where to use it and will try. Nothing. Else learned.
PPLPMDL0020000001					

PPLPMDL0020000001	Stow	OH	44224	9/19/2013	Discussion over lunch about all products. Discussed all key selling points to Butrans and talked about the insights. Dr said that she would like to have all her patients on ER opioids who have chronic pain but its hard and she refers many if them out. I explained why Butrans is a product she can prescribe as a schedule 3 controlled release opioid and reviewed the dosing. Dr said she likes that its a schedule 3 and the dosing is low. Dr asked about adverse events do I reviewed them and asked her her thoughts. Dr said it is surprisingly clean and will use it. OxyContin review of doses, conversions, and patient type discussion. Intermezzo indication, dosing, and limitations of use. Dr has not used but hears that's its expensive. Discussed managed care.
	Westlake	OH	44145	9/19/2013	Saw the doctor thru window, reviewed Butrans. Discussed what other schedule 3 opioid that could provide a months worth of analgesia with 4 doses? Dr just smiled. We talked about what patient types in her current practice, that she sees month another month coming in for their refills might need an extended release option instead of prn. Quick review of opioid naive study open label pain reduction scores and commercially insured savings program. The nurses asked more questions after dr left e window like where the patches goes on the body (gave patient brochure leave behinds) and asked about constipation vs other opioids. I said I couldn't state cause o head to heads...and showed her the percentage on the adverse reaction of the naive study from core visual aid. Discussed OxyCotin with ma's. tailor of the start principal. 7 doses. Left reading materials for doctor.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	9/20/2013	Spoke to Lisa in the pharmacy who requested Butrans copy cards. Lisa said she has filled three prescriptions this week. Reminded about ordering the 15mcg Butrans.
	Hudson	OH	44236	9/20/2013	Spoke with Galiana the pharmacist about all products. I introduced the new 15 mcg dose and asked her what she currently has in stock? She said none because they don't see enough. I asked her if she would at least order the 5mcg dose to which she agreed. Gave her the ordering information to the 15mcg. Asked her about OxyContin and she said they do not fill much of it at all. I asked how many patient she fills for and Galiana said maybe 4 patients. She said she only stocks the 10, 20 and 40 mg doses. Asked about intermezzo to which she has filled none.
PPLPMDL0020000001	Westlake	OH	44145	9/20/2013	I completed in-service on Pain Management for the nursing Staff. The Patient Comfort Assessment Guide and The Wong-Baker Pain Scale was handed out and reviewed with the staff. Discussion and interaction took place on the barriers that interfere with pain assessment/treatment in the elderly and consequences of unrelieved pain. 6 were in attendance
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	9/20/2013	I told dr to prescribe OxyContin as his first choice when patients need a ER opioid especially patients currently on Percocet who may need a on adjustment in dose. Dr said he has to use them all to some degree but said he does like OxyContin. I asked him to use OxyContin 10mg for patients on Percocet 20mg who complain of pain. Nothing else learned.
PPLPMDL0020000001	Uniontown	OH	44685	9/20/2013	I asked dr if he is continuing to find places for Butrans? Dr said he had a few patients a month or so that he found Butrans worked well for. Dr said he is trying to continue to use it. I reminded him to use it for his NSAID and tramadol patients and showed him the conversion guide and told him an opioid naive patient should always be started on the 5 mcg dose.
PPLPMDL0020000001	Akron	OH	44305	9/20/2013	Quick discussion with dr about how he can use Butrans in different populations. I reviewed the inclusion criteria and focused on patients included in the trial. I asked dr to keep the Medicare D patient population in mind who meet the indication and who are uncontrolled on their current IR opioid. Dr said he continues to find p,aces for it and will keep using.
PPLPMDL0020000001	Akron	OH	44319	9/20/2013	I told dr he is missing multiple opportunities to start patients on Butrans who are on tramadol or vicoden around the clock and still in pain. I showed dr the nancy profile and reviewed it. Dr told me that vicoden isn't as cheap as people think and he knows he needs to start changing patients medicine. Dr said he will prescribe and asked about cost. I reviewed the Butrans formulary grid focusing on his plans which include Caresource, Medco, medical mutual, Aetna. Dr said he will write it.
PPLPMDL0020000001	Hudson	OH	44236	9/20/2013	Dr told me that he thinks he may have a patient good for Butrans. I asked him to tell me about it and he said that the patient asked him if the is anything else he can take for pain. Dr said the patient is on vicoden for low back pain and has been for at least 6 months. Dr said the patient works and can't take his pills all day. Dr said that he told the patient over the phone he may have something else. Dr said he sees the patient in the next week or two. I told dr that great and I hope it works out. I reviewed the OxyContin conversion guide with him and asked for more prescriptions for his uncontrolled Percocet patients.
PPLPMDL0020000001	Uniontown	OH	44685	9/20/2013	I told dr I wanted to review the main points of the opioid naive trial since his experience with Butrans has involved those patient types. I told dr I wanted to get his opinion on the trial. Dr said he will review it and we can discuss next time. I told him to continue prescribing Butrans and more frequently for those IR opioid patients needing a dose adjustment. Gave him the OxyContin conversion and titration guide.
PPLPMDL0020000001	BEACHWOOD	OH	44122	9/20/2013	spoke with pharm tech about stocking butrans and she said she will have to ask the pharmacist who was busy at the time. I discussed the 15 and asked about oxycontin stocking and she said they do some but not alot.
PPLPMDL0020000001	Stow	OH	44224	9/20/2013	reviewed dosing titration, gave indication and limitation of use for intermezzo.
PPLPMDL0020000001	Beachwood	OH	44122	9/20/2013	Spoke with Christine the pharmacy technician about all products. She said they are swamped with flu shots and pharmacist will not have time. Told Christine about Butrans which she was not familiar with. Discussed all key selling points. Introduced the 15mcg dose and left initiation and titration guide. Gave her dosing guides for OxyContin and intermezzo.
PPLPMDL0020000001	Mogadore	OH	44260	9/20/2013	spoke with rina about butrans 15 and asked about stocking. she said they don't do much volume of butrans. I asked when the customer comes in how long will it take them to get butrans and she said it usually in 24-48 hours. I reviewed titration of butrans on the 15. discussed the flexible dosing of oxycontin. reviewed dosing and administration of intermezzo and she said she has not seen any scripts for intermezzo.
PPLPMDL0020000001	Uniontown	OH	44685	9/20/2013	Dr came to front desk after being asked if she wants Senokat 5 samples. Dr said she knows of it but hasn't seen it for a long time. I showed her the information on the product. Dr said she would like some. I asked her if she has patients on Percocet around the clock who may be appropriate for q12h dosing? Dr said she probably does. I showed her the conversion for Percocet and talked about Percocet 20mg/day converted to OxyContin 10mg q 12. Dr asked if she could have the conversion guide? I told her yes and to use more OxyContin in that position. Dr agreed and also wanted copy cards of Butrans. I told her that Butrans is ideal for a patient on tramadol who needs a dose adjustment and intermezzo for her patients complaining of in the middle of the night insomnia.
PPLPMDL0020000001	Akron	OH	44319	9/20/2013	Message for OxyContin over front counter. I told him that with OxyContin's dosing it leaves him with lots of options to use it from 10mg to 80 mg. dr agreed and said he uses it a lot but admitted to not using many 10mg dose. I asked why and he said by the time he gets them they are on more than what would be needed above the 10mg. I told him ok but to take the conversion guide. Nothing else learned.
PPLPMDL0020000001	Westlake	OH	44145	9/20/2013	Told dr through window that if he has a patient on Percocet 20mg a day and they are not controlled, he can switch to OxyContin 10mg q12 and showed him the conversion guide. Dr looked at the guide and said thanks he is trying his best to do that. I handed him the nancy profile and told him I'm guessing he has patient on vicoden and tramadol around the clock? Dr said he does. I told him when that patient comes in for a check up and complains of pain on the IR opioid around the clock, the solution may be Butrans and showed him the conversions. Dr said it makes sense and he will try it.
PPLPMDL0020000001	Westlake	OH	44145	9/20/2013	I made a drop-in visit to speak w/ Patty O'Shea to schedule a pain management in-service for the October STNA class. I spoke w/ the receptionist, who informed me that Patty was not available, I left my BC.
PPLPMDL0020000001	Solon	OH	44139	9/20/2013	I dropped-in to speak w/ D.O.N., Sue William about scheduling an in-service on pain management. I was informed by the receptionist that she was on a call and not available. I left my BC.
PPLPMDL0020000001	Beachwood	OH	44122	9/20/2013	spoke with janice and explained that the I was unable to provide the office with vouchers prior to their office move. I reviewed how to use the savings card and vouchers and asked to speak with the person who gives out the vouchers. she said she was not able to do that and the office does not do lunches.
PPLPMDL0020000001	Westlake	OH	44145	9/23/2013	spoke with vikki about bwc coverage and told her not to avoid bwc because there is alot of bwc being approved but she may run into some denials every now and then from some of the carve outs. discussed oxycontin and she said things are progressing well with oxycontin coverage. I asked her to let me know if she runs into a problem with bwc.
PPLPMDL0020000001	Westlake	OH	44145	9/23/2013	Lunch. Discussed what the doctor thought about the single entity opioids such as OxyCotin. Dr. said it was a good product and he writes it. We reviewed a case senerio of a patient who might be currently prescribed a prn schedule 2 opioid for ongoing ATC pain therapy. And what to do if that patient said they were waking up in pain? Dr. Dr said adjust the dose. I said true. But what if the patient just needed a different delivery system, extended release. Dr. said true. Review of the the molecule/dosing q12h and dose options for a tailored approach. Asked dr about where he positions Butrans. Dr. said he loves Butrans because its an extended release option with out the peaks and valley his patients gets with the immediate release products. Dr. Thought that Butrans has very little Urphoria compared to the PRN products. Dr. Called those side effects of the Immediate release Opioids. We reviewed the graph where it shows the 3 applications and the plasma levels. I asked the doctor if he could give me any suggestions to pass along to primary care doctors about how to get their patients to take a patch. Dr said there is nothing, they just do it or they get nothing. If a patient complains about taking a patch the doctor tells the patients the benefits of the extended release and its only 4 patches. We discussed location site were to put the patches based on this is where they've been studied. Dr. asked about managed care, in nparticular medical aid and getting it onto fomulary.<font color=blue><b>CHUDAKOB's query on 10/05/2013</b></font>Lisa, peaks and valleys are a touchy subject. While I know the Dr. said this, we have no data to support better pain control or outcomes due to fewer peaks and valleys. He is implying this by saying Butrans has not fewer peaks and valleys. When a physician discusses peaks and valleys, we should let inform him/her that we have no data relating to peaks, valleys or pain control. I hope this makes sense. If not, please call me and we can discuss it further.<font color=green><b>BARTOLI's response on 10/07/2013</b></font>Yes understood.<font color=blue><b>CHUDAKOB added notes on 10/07/2013</b></font>Thank you Lisa. I appreciate it. Spoke to Kathy and Rosie regarding Butrans, asked to see drs. But they were in with patients and dr. Duncan was about to leave for the day. left information on profile pieces (david) for Dr. Duncan.<font color=blue><b>CHUDAKOB's query on 10/05/2013</b></font>Lisa, your next call objective says access and frequency. this is certainly an objective, but not necessarily a call objective. the next call objective should relate to what you want to accomplish on the call should you get to see the Dr. Plan like you are going to see him. this way you are prepared if you do. Make sense?<font color=green><b>BARTOLI's response on 10/07/2013</b></font>Yes. Therefore- to clarify the appropriate patient type using the inclusion criteria and tie that into the open label section of the naive study showing pain reduction scores.<font color=blue><b>CHUDAKOB added notes on 10/07/2013</b></font>Now that is what I call a next call objective. Now if you just change that to an OxyContin next call objective you would be right on target as he is an
PPLPMDL0020000001	Westlake	OH	44145	9/23/2013	Quick window call with dr and told him that he needs to be prescribing Butrans for his patients needing dose adjustments on their IR opioids like tramadol. Dr said he knows and he will try to find some patients for it. Nothing else learned.
PPLPMDL0020000001	Westlake	OH	44145	9/23/2013	Spoke to Danielle Ma regarding seeing the doctor, she said no. Discussed Butrans, she was a little familiar with it. Discussed 7 day transdermal, schedule 3, it was extended release- discussed managed care.
PPLPMDL0020000001	Stow	OH	44224	9/23/2013	Discussed all products with dr in front of his medical students. Dr said he wishes he could put all his patients on short acting opioids on Butrans because he said he has had great results. I asked him to put the patients uncontrolled on NSAIDs, tramadol and vicoden on it and reviewed case studies. Dr spoke very highly of Butrans to his patients. I told dr about the start principles for OxyContin and dr said he agrees with them and does his best to get his patients off IR opioids. Dr said he also likes intermezzo and tries to find patients who can afford it. Discussed insurance and patient types.
PPLPMDL0020000001	Akron	OH	44333	9/23/2013	Gave brief word on the opioid experienced trial and discussed with him the inclusion and exclusion criteria. I told dr that he needs to assess his patients on hydrocodone combinations for appropriateness for Butrans instead of refilling it. Dr said he knows and has been using it more frequently. I asked where and he said for his vicoden patients. Nothing else learned,
PPLPMDL0020000001	Westlake	OH	44145	9/23/2013	Met NP= discussed Butrans. She said she was worried some of her heavy men sweat alot and was afraid the patch would fall off. We discussed the first aid tape, the percentage of patients in the naive study who failed due to application error. She said it was a small percentage. We spoke regarding managed care, the savings programs. yet more detail was spent on the delivery system of butrans and the 4 patches a month. NP was not familiar writing OxyCotin, but she said she has been getting more experience with schedule 2 products. Review of single entity and the conversion page of OxyCotin with Perkocet. We talked about how long patients can be on products like Tramadol. She said patients can be on that for years. I said controlled? She said sometimes but sometimes doctors will suppliment tramadol with NSAIDS when really they need a different medication. We talked about waiting to long before changing their medications. She said most primary care doctors are treating the other areas and their focus isn't pain.Review of START Principals...tailor and Re-assessing patients in particular. NP agreed to identify one patient this week that would be a butrans candidate and to give out the coupon with a script for the commercially insured patient.<font color=blue><b>CHUDAKOB added notes on 10/05/2013</b></font>Lisa, this looked like a good call. Nice job!
PPLPMDL0020000001	Stow	OH	44224	9/23/2013	Ip in stow office to see dr Seiple to set up inservice for his students and residents. Dr Lefever asked about Butrans and wanted an overview of the product. Gave dr the initiation and titration guide and discussed all key selling points. Dr asked about Butrans compared to fentanyl. I told dr there are no head to head studies so I cannot compare. Focused on telling dr that Butrans is the only schedule 3 controlled release opioid on the market. Discussed the initiation of Butrans and explained the placebo patch. Dr asked about cost. Reviewed the insurance coverage.
PPLPMDL0020000001	Akron	OH	44320	9/23/2013	Quick message about OxyContin with the new patient profile Maria. Dr said she would like to write more but said she needs to be very choosy when using OxyContin. I asked her to explain and she just said the patients in the practice are very difficult to treat. I asked her if the profile makes sense and she said yes. I asked her if she does urine screens and she said yes. Butrans Nancy profile and asked her to prescribe more.
PPLPMDL0020000001	Richmond Heights	OH	44143	9/23/2013	I dropped in to speak w/ Sheila Harris to schedule an in-service on pain as she requested. I was informed by the receptionist, Darlene that Sheila was in a meeting.



PPLPMDL0020000001	Stow	OH	44224	9/23/2013	Met dr for first time and gave short description of Butrans and her key selling messages. Dr said he wants me to do a Butrans inservice for him, his residents and students on Oct 2.
	Euclid	OH	44117	9/23/2013	I completed a second in-service on Constipation for Nurses. 3 nurses were in attendance. The Senokot laxative protocol was handed out and reviewed with the staff. A discussion w/ interaction on the risk factors, disease state, complications and the importance of documentation r/t constipation took place. Positive feedback was rec'd from the nursing staff. I spoke w/ Ruth Rossi in education and she requested an in-service on Pain Documentation. In-Services were scheduled for October 22 & 24th @ 3:30 & 4. She is hoping for better attendance.
PPLPMDL0020000001	Fairlawn	OH	44333	9/23/2013	Spoke to Sue and a floater pharmacist from a store in Rittman. Discussed products with him and reviewed new 15mg dose of Butrans. Pharmacist said that he has seen it in his location and patients seem to really like it. Hit all key selling points and sue said she would make sure they order it. Discussed OxyContin with him and he said he fills it often and looked at conversions from Percocet. Intermezzo dosing and indication and he said he heard about it but never filled. Both doses in stock.
PPLPMDL0020000001	Fairview Park	OH	44126	9/23/2013	Spoke to ma regarding seeing the doctor, but she said no. I passed along a note for the dr to call me if he has any questions regarding the information passed thru the window.<font color=blue><b>CHUDAKOB added notes on 10/05/2013</b></font>-Lisa, we should discuss the passing of notes as this is something we do not condone. Please call me next week.
PPLPMDL0020000001	Richmond Heights	OH	44143	9/23/2013	I was in the area and made a drop-in visit to speak w/ Joan Southard and schedule an in-service on Constipation. I spoke with the receptionist, who informed me that she was not available. I left my BC
PPLPMDL0020000001	Westlake	OH	44145	9/23/2013	Reviewed Butrans with the staff and ma's. She asked questions such as where to place thepatch and asked about managed care. addressed those areas (4 locations- showed via the core visual aid)- reviewed managed care.
PPLPMDL0020000001	Cleveland	OH	44125	9/24/2013	Introduced Butrans 15mcg/hr strength, hasn't filled any Butrans, but will keep in mind. Reviewed Butrans for those Tramadol failures before Short-acting, agreed that would be appropriate position. OxyContin Q12h flexible dosing strengths
PPLPMDL0020000001	Waterford	OH	45786	9/24/2013	I-Butrans dosing. OxyContin dosing. Intermezzo indication.W-interested in Butrans for appropriate patients.
PPLPMDL0020000001	Berea	OH	44017	9/24/2013	Spoke to jasmirn r. I gave her a note to pass to the dr asking for time, but she said dr was busy. I told her about Butrans- key points for. The study (appropriate patient, dose ages, pain reduction scores). Left naive study for dr review
PPLPMDL0020000001	Parma	OH	44134	9/24/2013	I completed a follow-up Butrans luncheon with the nurse practitioners and nurses managers , there were eight in attendance. Talking with the nurse practitioners , they currently have one patient on Butrans. Bonnie Behm, NP, informed me that she put a patient on Butrans and the the insurance Medicaid rejected it . So she put them back on a Fentanyl patch. Bonnie said, " this resident always complains w/ chronic pain constantly, once he was on the Butrans patch, I never heard from him." I reminded her along w/ everyone present that a prior auth is needed. I will follow up in one month.I talked w. staff development coordinator, Linda Belford, she requested another in-service on pain.It was scheduled for 10/17 @ 2:30.
PPLPMDL0020000001	Waterford	OH	45786	9/24/2013	I- Went over Butrans co-pay cards. Went over OxyContin dosing. Went over intermezzo.W-said that she was interested in prescribing Butrans for Medicare part D and needed to know what plans had it on formulary
PPLPMDL0020000001	Parma Heights	OH	44130	9/24/2013	I made a drop-in visit to meet w/ D.O.N., Katherine Myers to introduce Purdue's Nurse Educator Program. I spoke w/ the receptionist, Sherry Majoris, who informed me that to see Katherine, is by appointment only. I left my
PPLPMDL0020000001	Parma	OH	44134	9/24/2013	Asked dr how he feel he has potential to write more Butrans and he said yes based on the new indication. asked him what new indication and he said the indication for acute pain. corrected the doctor and told him the correct patient has moderate to severe chronic pain, not acute. no new information gained.
PPLPMDL0020000001	Cleveland	OH	44109	9/24/2013	Followed up with Marcie. review/decision process is in progress. Left Butrans/OxyContin info with PMR/Oncology
PPLPMDL0020000001	Cleveland	OH	44109	9/24/2013	Visited Ctr Left Butrans FPI for Baker, Campbell,Dhillon, Dzwis, Geho, Gemechu and Mary Jo Slattery. Left contact info for inservice with K. Gallagher for appt.Pain Mgmt Wad
PPLPMDL0020000001	Stow	OH	44224	9/24/2013	Quick message for Butrans in hallway during lunch. Sandra said she is doing well with Butrans and her patients like it. Sandra said some patients are not able to get it which make it tough. It asked her which plans and she said meeting the criteria with Caresource and some commercial plans. I told her there should not be an issue with Caresource and reviewed the criteria. Sandra Asia's she would keep using. Nothing else learned.
PPLPMDL0020000001	Waterford	OH	45786	9/24/2013	I-Butrans managed-care and co-pay cards. OxyContin dosing. Intermezzo indication.W-will use the Butrans co-pay cards.
PPLPMDL0020000001	Stow	OH	44224	9/24/2013	Great conversation with dr about discussing insight #9. Dr said he agrees that patients are kept on IR opioids way too long before an ER opioid is initiated. Dr spoke about the difficulty of just fretting a patient to agree to reduce their pill count by one pill. Dr talked about the psychological aspect to pain management and how patients get upset if he even talks to them about seeing someone for the physiological aspect of pain. I told dr to focus on patients that have been on tramadol or vicoden for 3+ months and are being treated for a chronic pain condition to use Butrans then. Dr agreed and said that he will continue prescribing.
PPLPMDL0020000001	Parma	OH	44129	9/24/2013	asked myra how she identifies a Butrans patient. she said if a patient needs continuous coverage because they are having break through pain then she prescribes Butrans. Myra said she believes the pain and pain relief is sometimes psychological. discussed the clinical trials and and pain reduction and recommended that she share this information with the patient.
PPLPMDL0020000001	Akron	OH	44313	9/24/2013	Spoke with the technician Sam about all products. Sam said the pharmacist was too busy to talk. Told Sam about Butrans key selling points, new 15mcg dose, and titration. Sam said they have the 5mcg dose in stock and have a few patient on it. Discussed OxyContin conversions and dosing from the conversion and titration guide. Intermezzo discussion and Sam did not now about it. Reviewed indication, dosing and limitations of use.
PPLPMDL0020000001	Brooklyn	OH	44144	9/24/2013	Dr. said he familiar with Butrans but hasn't used, struggles with any Branded PA approval process.Presented recent Butrans MedCo/ESI formulary win. Dr. said that will help. Positioned Butrans for those Tramadol/Ultram failures, feels most patients are adequetly controlled, but will consider. Went over Initiation/Titration. OxyContin Q12h flexible dosing
PPLPMDL0020000001	Berea	OH	44017	9/24/2013	Breakfast. Dr was comfortable writing OxyCotin, we reviewed the q12h extended release properties of the product. Also discussed the types of patients that he might consider OxyCotin. We discussed re-assessment when the patient says they are waking up for pain or waking up n pain. I asked the doctor to keep this question in mind during re-assessment because the patient might be appropriate for a different delivery system. Dr agreed. Talked about single entity products, I asked him if he has used Butrans yet, he said no. I said what was his hesitation? He said managed care and remembering. Reviewed dosing, titration, 4 doses a month and managed care. Dr agreement to write Butrans.
PPLPMDL0020000001	Uniontown	OH	44685	9/24/2013	Saw dr behind counter and told him to think of OxyCotin for his patients uncontrolled on Percocet and Butrans for his patients needing a dose adjustment on tramadol. I asked dr if he has patients on tramadol? Dr said he does. I told him instead of titrating the short acting to use Butrans as the ER solution as long as the patients meet the indication. Dr said alright and that he used it and it worked well.
PPLPMDL0020000001	Stow	OH	44224	9/24/2013	Discussed insight 9 with Janet and asked her option. Janet said that she believes it and there is a problem. She said she wants to prescribe more ER optics but it is very difficult because patients often refuse. I asked her if Butrans may be a solution for that ER opioid that is a schedule 3 if it is used in patients on tramadol or low dose vicoden? Janet said most likely and that is whe she has used it. I reviewed the dosing, titration, conversions and patient case studies. Janet said she would keep it all in mind. Nothing else learned.<font color=blue><b>CHUDAKOB's query on 10/05/2013</b></font>-What is insight 9?<font color=green><b>REICHCL's response on 10/07/2013</b></font>-Do I need to write the entire insight in the call note? The insights we received were numbered.....<font color=blue><b>CHUDAKOB added notes on 10/07/2013</b></font>-No, but you need to identify them by more than their number such as "the 30% discontinuation insight" or the hydrocodone insight etc. They were identified by number to help you discern them, not be used as identifiers in call notes. Thanks Cliff!
PPLPMDL0020000001	Garfield Hts	OH	44125	9/24/2013	Informed Dr. of recent preferred formulary status of Butrans on MedCo and ESI. He said that was good news. He said he likes product. Reminded him for those Tramadol/Ultram failures along with Initiation/Titration. Said he will keep in mind. OxyContin Q12h flexible dosing and Intermezzo for MOTNA/dosing
PPLPMDL0020000001	Stow	OH	44224	9/24/2013	Spoke with Greg the pharmacist and Mike the technician about new Butrans 15mcg dose. I asked to make sure they would order it and Greg said he would order. I explained how the dosing flexibility of Butrans with the 15mcg dose and titration. Nothing else learned.
PPLPMDL0020000001	Stow	OH	44224	9/24/2013	Abby told me that she has been trying to use Butrans more frequently but has had issues with insurance companies denying it. I asked her where and what plans. She told me Caresource and UHC. I discussed Caresource pa and she told me along with Marci in the pharmacy that the criteria is failure on an IR opioid for 90 days instead of 30days. I told Marie to get something in writing from Caresource explaining the criteria which she said she would do. Abby said she knows its covered on BWC and medical mutual so she will prescribe it for those plans only. I told Abby to not do that to other patients that will be covered on Butrans and reviewed the plans. Abby said to continue to check with Marci regularly so she can keep the accurate info to her. I asked for continued prescribing for patients on tramadol or vicoden to which she agreed.
PPLPMDL0020000001	Cleveland	OH	44125	9/24/2013	Talked with Linda, introduced Butrans 15mcg/hr strength. Discussed Dr. Sadowski interest in prescribing, will order. OxyContin Savings card along with Q12h flexible dosing strengths
PPLPMDL0020000001	Stow	OH	44224	9/24/2013	Spoke with dr about insight number 9 and asked him for his thoughts as it relates to when he thinks an ER opioid need to be implemented. Dr said that his philosophy is to get patients moving towards an ER opioid after 3-6 months of IR opioids. Dr spoke about how difficult it is to get patients to reduce their IR opioids because they are most of the time becoming physically dependent after 6 months. I asked dr how he can get a patient to understand how an ER opioid may be a better option for them. Dr said he understands how patients like short acting opioids because after they take a pill they feel better in a short time and can't fault them for that. Dr said he job is to try and get them to understand how ER opioids work and may provide them more steady state control of pain. I asked if he thinks Butrans is a good option for that patient wanting a dose adjustment on tramadol or vicoden? Dr said for sure and has not used but may not because he is always doing injections. I told to use Butrans if a patient continues to be in pain around the clock. Dr agreed.<font color=blue><b>CHUDAKOB's query on 10/05/2013</b></font>-Cliff, read what you wrote. "I asked Dr how he can get a patient to understand how an ER opioid may be a better option for them" What data is there to support that any ER opioid might be a better option than an IR opioid?<font color=green><b>REICHCL's response on 10/07/2013</b></font>-There is none. The key word is might. I did not mention any specific product.<font color=blue><b>CHUDAKOB added notes on 10/07/2013</b></font>-I see. In any event, I would stay away from words like better as they imply superiority. Instead you can say may be a different option or another option.
PPLPMDL0020000001	Brooklyn	OH	44144	9/24/2013	Introduced Butrans 15mcg/hr to RPH-Brittany, said they have 1 patient on Butrans, will stock the 15mcg. Reviewed savings card and Butrans message for those Tramadol failures. Reminded of OxyContin Q12h flexible dosing. Intermezzo for those MOTNA/ along with dosing
PPLPMDL0020000001	Parma	OH	44129	9/24/2013	asked dr about the patient he wrote for and he said she was 26 taking 50 mg Q6 of tramadol so it was 200 mg a day and he said yes. Let him know that was the correct starting dose and told him there are more patients like that. told him parma hospital is dispensing OxyContin and there is no generic so he can be assured that patients are getting OxyContin.
PPLPMDL0020000001	Cleveland	OH	44120	9/25/2013	Left Butrans 15mcg/hr info, stop back at a better time
PPLPMDL0020000001	Cleveland	OH	44103	9/25/2013	Spoke with Hakim Informed of new Butrans 15mcg strength and OxyContin Q12h flexible dosing. Still not seeing any Butrans
PPLPMDL0020000001	Cleveland	OH	44106	9/25/2013	Informed Rona/Ashleigh of new Butrans 15mcg strength and OxyContin Q12h flexible dosing and intermezzo for MOTNA/dosing
PPLPMDL0020000001	Parma	OH	44129	9/25/2013	passed savings cards through the window and discussed the clinical trial pain reduction and asked him if he thinks this mirrors what he sees in his practice. dr said he like butrans and patients do get relief. dr had to leave but i left him with the clinical trials to review prior to our lunch
PPLPMDL0020000001	Cleveland	OH	44104	9/25/2013	Informed Nikki(Nurse) of Butrans MedCo/ESI formulary status, OxyContin flexible dosing strengths
PPLPMDL0020000001	Cleveland	OH	44195	9/25/2013	Inserviced Pain Fellows (Dr Maheshwari-Chief, Yanosik and Sandhu) Left info for Pain Dept along with Neuro-C21
PPLPMDL0020000001	Lyndhurst	OH	44124	9/25/2013	Met w pharmacist Lauren, rushed. Asked her to pre order 1 box Butrans 15 mcg hr, no, because she can get in 1 business day. What if patient gets Rx on Friday, can they get on Sat. No, so patient as to wait until Monday? Yes she replied. OxyContin pharmacists guide left, sept pain awareness brochures left.
PPLPMDL0020000001	South Euclid	OH	44121	9/25/2013	Phar mgr Jill W not in today, floater pharmacist Cheryl in. Spoke with Cheryl about pre ordering a box of Butrans 15 mcg hr. She will leave. NDC brochure for Jill. Also sept pain awareness brochures left, online resources, left OxyContin pharmacists guide & RX patrol brochure.
PPLPMDL0020000001	Westlake	OH	44145	9/25/2013	Spoke to the office manager about seeing Brian but missed him by 20 minutes. She said she had a patient call for an apt to get her Butrans increased from 5mcg. I left some Butrans I formation behind for the doctor.
PPLPMDL0020000001	Parma	OH	44129	9/25/2013	dr said he pain is subjective but he will use butrans. discussed his treatment algorithm and he said it depends. dr could not dec-scribe his last patient. i asked if there was a reason he couldn't prescribe butrans after tramadol more than he is and he said not really
PPLPMDL0020000001	Cleveland	OH	44130	9/25/2013	spoke with dr about flexible dosing of oxycontin and told him i will discuss with him the butrans patient with him next week and left the profile.scheduled lunch

PPLPMDL0020000001	Parma	OH	44129	9/25/2013	Spoke with Katie about OxyContin managed care coverage and gave formulary grid. Reviewed vouchers and savings cards. Asked about any managed care issues that needed to be resolved.
PPLPMDL0020000001	Westlake	OH	44145	9/25/2013	Spoke to Claudia the office manager about seeing the doctor, she went back to ask but the doctor was in a meeting with the np. Discussed the 30 percent insight with her, showed her the naive study and the open label pain reduction results. Left the study behind for the doctor to read.
	Cleveland	OH	44124	9/25/2013	Dr Prada left early, met dr Basil Waldbaum's wife who uses dr Prada office a few times a month on Wednesdays. Mrs Waldbaum also an MD. Met with med asst Amy, discussed Butransvas CIII option for their pain patients. Discussed & left patient guides, 1 box trial, savings cards, how they work. Updated Amy on Butrans med d wins & commercial status. The controlled release OxyContin as CII option. Left Butrans sliding doser & patient initiation guide & Butrans 3024 study for dr Prada.
PPLPMDL0020000001	Westlake Fairlawn	OH	44145	9/25/2013	Tried to get a lunch, books open up dec 1. Left various Butrans materials behind for dr to read.
PPLPMDL0020000001		OH	44333	9/25/2013	I completed a Pain management in-service for the nursing staff. The Patient Comfort Assessment Guide and The Wong-Baker Pain Scale was handed out and reviewed with the staff. Discussion and interaction took place on the barriers that interfere with pain assessment/treatment in the elderly and consequences of unrelieved pain. 9 were in attendance. I talked with Michelle Williams in staff development about scheduling another in-service. She informed me that it will have to be in January sometime. She has CPR training among other in-services to complete before year end and they are currently in their state window.
PPLPMDL0020000001	Parma	OH	44129	9/25/2013	gave 30% reduction insight and dr said that would be good if his patients can achieve. reviewed clinical trials and asked dr about his treatment algorithm. dr moves nsaid, tramadol, vicodin. i told him butrans can be used after nsaid or tramadol. he asked about the indication and i recited. he asked if there was a specific disease state and i told him no put pointed out the inclusion criteria. reviewed how to dose and when to titrate and use supplemental analgesia. reviewed oxycontin conversion from percocet. discussed intermezzo indication.
		OH	44195	9/25/2013	Intro. Reviewed Butrans indication, positioned for Tramadol failures, Initiation/Titration, 30% pain reduction in Opioid Naive trial. Likes delivery system. Review Savings cards and Medco/ESI formulary status. OxyContin Q12h flexible dosing strengths
PPLPMDL0020000001	Cleveland	OH	44112	9/25/2013	Quick Butrans reminder for those Tramadol failures, said she will keep in mind
PPLPMDL0020000001	Cleveland	OH	44124	9/25/2013	Met with ma Gail, asked to see dr c, not in today. Then Nurse Gail, able to quickly say hello in hallway, OxyContin med d & commercial updates communicated & left grids. . Also sept pain rawness month, can we ask to dr to place in waiting room? she will ask him. Left 1 pack brochures, 1 in dr c mailbox. ( one box Senokot S left)
PPLPMDL0020000001	Cleveland	OH	44195	9/25/2013	Quick reminder on OxyContin Q12h flexible dosing and Butrans Medco/ESI formulary status. Thanked and will keep in mind
PPLPMDL0020000001	Cleveland	OH	44103	9/25/2013	Informed of new Butrans 15mcg strength and OxyContin Q12h flexible dosing strengths. Brad RPH Not seeing any Butrans and minimal OxyContin at this location
PPLPMDL0020000001	Lyndhurst	OH	44124	9/25/2013	Dr is opt out. He says he & Sarah have been using Butrans on a few patients. He was most concerned with Med D population & coverage. Addressed his concern with med d preferred on Cigna, Medco/ Express Rx med d. Showed & left formulary grids. Next shared pain reduction insight, tied into Butrans opioid naive study. Set up & Reviewed study, did not get to AE profile, pain reduction 7.2 to 2.6 was very impactful to him. 4.6 reduction score was impactful. He promised to look over study further. OxyContin mention, indication q 12 h dosing, commercial & formulary grids sept pain awareness month, went over online resources left 1 box brochures. PA-C Sarah I had baby girl 9/29/13, back in November. Met with CNP student Mary Jo Wolinski. Email her @ mwolinski@yahoo.com, next time we have Butrans program in Beachwood area.
PPLPMDL0020000001	Lyndhurst	OH	44124	9/25/2013	OxyContin START principles, q 12 h dosing, showed all 7 doses, back of detailer, savings, updated & left Med d & commercial grids. Suggest cancer pain, would like to go over loan profile next visit. Pain reduction insight, tied into Butrans opioid naive clinical trial. The 4.6 pain reduction was impressive to him. Remember to use for our BWC patients! As well as Medco/ express scripts & Cigna med d patients. Left new grids. Left opioid naive trial for his review. He will read over. Will keep Butrans in mind for types of patients we discussed in inclusion criteria of study. Sept pain awareness month, online resources discussed.
		OH	44195	9/25/2013	Intro. Reviewed Butrans indication, positioned for Tramadol failures, Initiation/Titration, 30% pain reduction in Opioid Naive trial. Dr. likes transdermal delivery system. OxyContin Q12h flexible dosing strengths
PPLPMDL0020000001	Cleveland	OH	44121	9/25/2013	2 Roter pharmacists in today, spoke with one: Greg Carroll, he cannot authorize a pre order. Plus they only have 1 patient on Butras 10 mcg hr. left NDC brochure for pharm mgr. Also sept pain Arlene's brochures discussed, & OxyContin START principles, q12 h dosing. OxyContin pharmacists guide
PPLPMDL0020000001	Bedford	OH	44146	9/25/2013	followed up on discussion of 90 day insight and i asked what percent of his immediate release opioid patients eventually move to extended release and he said it varies and is difficult to quantify. we discussed the butrans patient and the profile for scott. discussed flexible dosing of oxycontin. gave intermezzo indication and limitation of use.
PPLPMDL0020000001	Cleveland	OH	44104	9/25/2013	Discussed significance of 30% pain reduction, Dr thought that was significant, positioned Butrans for those Tramadol failures, Dr. said he has struggled with PA's in the past, glad to hear Medco/ESI formulary status. OxyContin for Q12h flexible dosing strengths
PPLPMDL0020000001	Parma	OH	44129	9/25/2013	spoke with monica about butrans 15 coming available in oct. i said there are some butrans writers in the area and i wanted to make sure she was aware of the product. she said she will not order it in but liked the heads up that it was coming out soon. reviewed flexible dosing of oxycontin. gave indication and limitation of use of intermezzo
PPLPMDL0020000001	Cleveland	OH	44104	9/25/2013	Discussed significance of 30% pain reduction, Dr thought that was significant, positioned Butrans for those Tramadol failures, Dr. said he is glad to hear Medco/ESI formulary status. Likes delivery system. OxyContin for Q12h flexible dosing strengths. Prescribes a fair amt. in palliative care setting
PPLPMDL0020000001	Akron	OH	44313	9/25/2013	I made a drop-in visit to speak w/ Richard Lynch about scheduling an in-service on Pain. I was informed by the receptionist, Nicole that Richard no longer is the nurse educator, he now works night shift. The new nurse educator is Kim Kirsky. Nicole phoned Kim and she agreed to meet w/ me briefly. I introduced myself and Purdue's Nurse Educator Program. She said, "I remember you from the constipation in-service." Kim said that she would love to schedule a pain management in-service for October sometime. She will look at her calendar and call me. The CPP was confirmed as Omnicare and staff physicians were also reviewed.
PPLPMDL0020000001	Cleveland	OH	44195	9/25/2013	Intro. Reviewed Butrans indication, positioned for Tramadol failures, Initiation/Titration, 30% pain reduction in Opioid Naive trial. Dr. said he will consider, likes delivery system and a CIII. OxyContin Q12h flexible dosing
PPLPMDL0020000001	Cleveland	OH	44127	9/26/2013	Quick Butrans reminder for those patients that are not being adequately controlled on present therapy. Dr. said OK
PPLPMDL0020000001	Cleveland	OH	44130	9/26/2013	Gave 90 day insight and dr said yes. Showed dr flexible dosing of OxyContin. Told dr about butrans pain reduction. Left clinical trial data for butrans
PPLPMDL0020000001	Cleveland	OH	44130	9/26/2013	Quick call reminding dr of butrans pain reduction 7.2-2.6. Reviewed flexible dosing of OxyContin. No new information learned
PPLPMDL0020000001	Garfield Hts	OH	44125	9/26/2013	Booked lunch appt. and left Butrans formulary grid. Dr. said he will remember
PPLPMDL0020000001	Cleveland	OH	44102	9/26/2013	Coordinating date with Ed for in-service with Cindy Schulte (Purdue).
PPLPMDL0020000001	Solon	OH	44139	9/26/2013	Quick point with OxyContin start principle of titration and conversion at the lower doses. Told him butrans after tramadol. Scheduled lunch
PPLPMDL0020000001	Cleveland	OH	44104	9/26/2013	Quick reminder thru window, Butrans for those Tramadol/Ultam failures. Dr. said OK , booked lunch appt. with Wanda. Left Initiation/Titration guide
PPLPMDL0020000001	Garfield Hts	OH	44125	9/26/2013	Visited outpatient surgery center, left OxyContin and Butrans Initiation/Titration guides
PPLPMDL0020000001	Parma	OH	44129	9/26/2013	Followed up with patient brochures based on our last call. Reminded Myra of appropriate starting doses for butrans using the titration guide
PPLPMDL0020000001	Cleveland	OH	44127	9/26/2013	Presented Scott profile, Dr. agreed she has patients similar, discussed initiation/Titration, left dosing slide card, Reviewed formulary coverage Dr./Renée struggle with PA's but will consider.
PPLPMDL0020000001	Cleveland	OH	44114	9/26/2013	1. Determine next steps for Pain PACT program 2. Present Butrans 15mcg/hr dose 3. Determine if want BU conversion/titration guides for program 4. Determine who CMO for Evercare is and evaluate feedback for Butrans push-up
PPLPMDL0020000001	Cleveland	OH	44127	9/26/2013	Presented Scott profile, Dr. agreed she has patients similar. Reviewed initiation dosing, asked her to keep dosing tool handy, Dr. said OK. Asked Josie about PA's said she can figure" them out. OxyContin Q12h flexible dosing
PPLPMDL0020000001	Cleveland	OH	44114	9/26/2013	Discussed 30% pain reduction and its significance, Dr. said that was important, most patients seem adequately controlled on present therapy. I asked for that 1 patient that isn't or failing on Tramadol/Ultram, he agreed and will consider. Reviewed formulary status of Butrans and Preferred status on MedCo/ESI. Cigna. OxyContin Q12h/flexible dosing strengths. And Intermezzo for MOTNA/dosing
PPLPMDL0020000001	Cleveland	OH	44125	9/26/2013	Reviewed the new Butrans 15mcg/hr dose with Chris(RPH), positioned for (Tramadol failures). Requested OxyContin savings cards
PPLPMDL0020000001	Bedford	OH	44146	9/26/2013	Asked dr what percent of short acting patients move to long acting. He said it depends and some never move to long acting. He said he tries to keep patients off the long acting until it becomes necessary. Discussed if this was different for butrans and he said no. Asked dr to consider the OxyContin patient conversion at lower doses. Reviewed intermezzo indication and limitation of use
PPLPMDL0020000001	Cleveland	OH	44114	9/26/2013	Discussed 30% pain reduction, Dr. said that was significant, Prescribes Butrans in Nursing home/palliative care. I asked for that 1 patient failing on Tramadol/Ultram, he agreed and will consider. Reviewed formulary status of Butrans and Preferred status on MedCo/ESI. Cigna. OxyContin Q12h/flexible dosing strengths. And Intermezzo for MOTNA/dosing
		OH	44122	9/26/2013	Window reminder while I spoke with vikki. Asked dr to remember butrans when he needs to move someone off of tramadol. Asked dr not to forget the 30 mg dose when converting from Percocet. <font color=blue>-<b>CHUDAKOB's query on 10/05/2013</b>-<b>Marcia, Isn't this an OxyContin Super Core? If so, then the next call objective should relate to OxyContin. You can include Butrans as well, but remember, your goal is to increase his OxyContin business first.</font> color=green>-<b>KENNOMA's response on 10/05/2013</b>-<b>font>You are correct in this statement. I lost focus on Yoki as an OxyContin core. My next objective should be to get Yoki to realize how much hydrocodone he has in his practice that has been refilled over 90 days without him realizing.</font color=blue>-<b>CHUDAKOB added notes on 10/07/2013</b>-<b>font>Ok. Thank you!
PPLPMDL0020000001	Cleveland	OH	44127	9/26/2013	While I was visiting Dr. Mobasser, Quick Butrans reminder for those Tramadol failures, said she is not treating pain anymore. Verified data, will no longer visit
PPLPMDL0020000001	Cleveland	OH	44113	9/27/2013	Reviewed with Isa Butrans Medco/ESI Formulary status, Left Scott profile for along with Initiation/Titration guide. Booked appt.
PPLPMDL0020000001	Cleveland	OH	44103	9/27/2013	Introduced Butrans 15mcg/hr dose, Amalia(RPH) hasn't seen any Butrans, Positioned for those Tramadol failures. OxyContin Q12h flexible dosing strengths
PPLPMDL0020000001	Beachwood	OH	44122	9/27/2013	Asked dr if she has found any appropriate patients for butrans since our lunch and reminded her if the pain reduction. We said she remembered but has not prescribed. I asked her if she could identify the right patient and she said after tramadol. I reviewed flexible dosing of OxyContin.
PPLPMDL0020000001	Cleveland	OH	44113	9/27/2013	OxyContin reminder Q12h flexible dosing strengths, broad formulary coverage. He along with Dr. Shen like using long acting products instead of IR products for those appropriate patients. Discussed Butrans for those Traamaol failures, agreed and continues to look for appropriate patients. Went over formulary status with MedCo/ESI
PPLPMDL0020000001	Cleveland	OH	44113	9/27/2013	Visited Pain/Ortho Dept. Left info (Billfield, Stearns, Kim
PPLPMDL0020000001	Beachwood	OH	44122	9/27/2013	Spoke with pharmacist about bringing the 15 Butrans in stock and hoehsing agreed that it would be beneficial. Discussed OxyContin start principle. Asked about intermezzo movement and he said there was non and he did not have it in stock
PPLPMDL0020000001	Cleveland	OH	44195	9/27/2013	MSL email communication with Ms. Cassano regarding next steps to identify a new PI for OTR3001. Ms. Cassano requested MSL to meet with Dr. Dell, research director to discuss. MSL offered meeting dates, confirmation pending.
PPLPMDL0020000001	Cleveland	OH	44102	9/27/2013	Talked w/ Mark Gutkowski, and an in-service was scheduled for 10/16 @ 12:00. He will arrange the luncheon.
PPLPMDL0020000001	Westlake	OH	44145	9/27/2013	I was in the area and made a drop-in visit to meet D.O.N., Kelly Rosnagel, I was informed by the receptionist, that Kelly went into a meeting and is not available. I left my BC and the Purdue NE pamphlet
PPLPMDL0020000001	Norton	OH	44203	9/27/2013	Missed t he dr but scheduled a lunch. Spoke to Lisa, Lynn the ma and office manager regarding Butrans. They were unfamiliar w Butrans. Reviewed the naive study.
PPLPMDL0020000001	Cleveland	OH	44113	9/27/2013	Quick desk call, Reviewed Butrans Medco/ESI formulary status, Dr./Aurora-Nurse said that was good to hear. Booked lunch appt. , Left Initiation/Titration guide
PPLPMDL0020000001	Cleveland	OH	44113	9/27/2013	Reviewed MedCo/ESI formulary status of Butrans, Dr. said that was good to hear. Asked for those Tramadol failures, she said that Butrans continues to be utilized in her practice. Went over Initiation/titration guide.
PPLPMDL0020000001	Cleveland	OH	44113	9/27/2013	OxyContin Q12h flexible dosing strengths
PPLPMDL0020000001	Cleveland	OH	44113	9/27/2013	Reminded of Butrans formulary status with Medco/ESI, also for those Tramadol/LorTab failures, agreed will keep in mind. Said really likes product, I asked her to continue to find new patients

PPLPMDL0020000001	Cleveland	OH	44113	9/27/2013	Quick Butrans reminder for those Tramadol failures along with Intermezzo for MOTNA/dosing. MeCo/ESI formulary status.Dr. said Ok will keep in mind
PPLPMDL0020000001	Westlake	OH	44145	9/27/2013	I completed a lunch in-service for the MDS nurses, D.O.N. and nurse managers on F309 challenges, the slide deck was reviewed. 8 were in attendance. The expressed frustration in that they find it difficult to interpret the MDS form and the rationale behind the questions. They feel that there are too many variables and in-consistencies of pain responses w/ their residents. They are curious to know what factors decide the formulary star rating.
PPLPMDL0020000001	Cleveland	OH	44113	9/27/2013	Quick OxyContin reminder Q12h flexible dosing strengths, broad formulary coverage. Said his schedule varies at St. Augustine, informed of Butrans in-service for nursing staff, said that will be helpful
PPLPMDL0020000001	Independence	OH	44131	9/27/2013	To,d r i have lunch with him Monday and we are going to discuss what a 30% improvement in pain would mean to him and his patients. Let the butrans clinical trials. Left OxyContin conversion guide
PPLPMDL0020000001	Cleveland	OH	44113	9/27/2013	Quick Butrans reminder for those LorTab failures, said she really likes Butrans.Intermezzo for MOTNA/dosing, she said OK, was running behind. Booked Lunch appt.
PPLPMDL0020000001	Cleveland	OH	44113	9/30/2013	Quick Butrans reminder for those Ultram/Tramadol failures, Dr. stated not prescribing any Opioids. Follow up again with those he sends to Pain Mgmt, will consider. Intermezzo for those MOTNA/dosing, said he continues to prescribe. Requested more vouchers/trial cards
PPLPMDL0020000001	Independence	OH	44131	9/30/2013	I asked Dr. is there something that is keeping him from writing Butrans. Doctors that is a good product and ISN where does he think it fits it is practice. Dr. hesitated and didn't answer I asked him if he thought it was a good fit after tramadol or even instead of tramadol. I asked Dr. what were his thoughts on Vicodin and Percocet. Dr. said he would rather put patients on Butrans and Vicodin and Percocet. I asked him why and he said it's hard to get them off after the start. I asked him if this is true how come he doesn't use more Butrans. He said I have a good point and I reviewed the clinical trial and a 30% reduction insight and asked him if he thought that is something He would like to see. Dr. said hi is going to start using Butrans and he's going to use it where I said it's fits. Dr. said he Likes OxyContin but a pain management doctor wrote him a letter and said he would not accept his patient into his practice because he was on OxyContin. I asked Dr. to think about patients are on Percocet around-the-clock and maybe been on for Six months to a year. I asked if he thought that was too long of a time. To be on the short acting and he said yes but he wasn't comfortable putting those patients on OxyContin. Reviewed intermezzo indication appropriate patient type with middle the night awakenings and dosing
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	9/30/2013	Led with insight about hydrocodone/APAP and asked him about his opinion on the statistic? Dr said that he prescribed Butrans since I was in last. I asked for more information and he told me he started the patient on the 10mcg because the patient was on fentanyl, had spinal surgery, and was stepping down off fentanyl because pain was decreasing. Dr said he started on the 10mcg and patient called back in and said it was \$400. I asked dr for insurance information or more specific info and he couldn't remember but to maybe talk to Jessica the office manager. I reviewed Butrans dosing, titration, appropriate patients and insurance. Dr said he will continue to find patients. Intermezzo dosing, indication and asked if he will prescribe? Dr said no because its too expensive when he tried the first time. Discussed cost and appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44106	9/30/2013	Reviewed new Butrans 15mcg/hr dose. Asked for Butrans patient info booklets to be distributed for appropriate patients. OxyContin Q12h dosing
PPLPMDL0020000001	Akron	OH	44313	9/30/2013	I told dr that he needs to start using the 10mg OxyContin for this patients uncontrolled on Percocet 20mg. I asked dr if he has patients on Percocet 20mg? Dr said yes. I gave him the conversion guide and asked him to review. I told dr he also needs to find a place for Butrans in his practice. I told him that I'm guessing he has patients that he controls his refills on tramadol. Dr said yes. I told him that Butrans is a product that is suited for those patients that are uncontrolled and explained why. Dr said ok. Nothing else learned.
PPLPMDL0020000001	Westlake	OH	44145	9/30/2013	Gave her the number 9 insight....Why do prescribers wait so long? She said most primary care doctors aren't up to speed on how to treat pain and they end up referring pain management. I said why After a nSAD isn't working wouldn't you use Butrans as their first opioid? She said unless they don't want to use a patch. I said if they seemed unsure of the patch technology, what counseling would you give them? She said she would go to something else. I pointed out the pain reduction scores during the open label of patients making Butrans their first opioid. If your patients heard the pain reduction scores, do you think they would be more open to trying it? She said maybe. I said well, this week when you are re-assessing those patients you see monthly for ATC pain....think about Butrans 5mcg or 10mcg.
PPLPMDL0020000001	Oakwood Village	OH	44146	9/30/2013	I rec'd a phone call from D.O.N., Barb Straemple requesting to cancel the in-services on Pain Documentation scheduled for tomorrow October 1 @ 7:30, 10:30 & 2:30. Barb stated, "I just came back from vacation and I didn't post it and I want a good turnout." She re-scheduled for October 29th same times.
PPLPMDL0020000001	Munroe Falls	OH	44262	9/30/2013	I told dr that I'm guessing she has patients that she refills tramadol or vicoden for each month? Dr said she does and knows she's guilty of doing that instead of looking at other products that may be better. I reviewed profiles along with insurance pan coverage that suit her practice. Dr said she knows she should be using it more because the patients she has on it are doing well. I told her that the studies show at least a 30% pain score reduction and if she would be happy with that? Dr said for sure. OxyContin and intermezzo dosing and asked for additional use.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	9/30/2013	Short discussion about dr identifying patients for Butrans. Dr said he has not used it yet. I asked him if he has patients on tramadol or vicoden around the clock who he refills for each monthZ. Dr said yes, too many of them. I told him instead of refilling or adjusting dose, to use Butrans for those patients especially those uncontrolled. Dr said he knows he needs to use and will try. Dr said he still has the Butrans conversion guide on his desk along with copy cards.
PPLPMDL0020000001	Berea	OH	44017	9/30/2013	Dr said he still had I found the right patient for Butrans yet. I asked him what that patient I looked liked and he said a pain patient walked away.
PPLPMDL0020000001	Westlake	OH	44145	9/30/2013	I rec'd an e-mail from Nurse Educator, Brenda Amburgey, canceling the Butran's Luncheon scheduled for this Friday, October 4th, due to a scheduling conflict. I e-mailed Brenda to reschedule.
PPLPMDL0020000001	Cleveland	OH	44113	9/30/2013	Quick Butrans reminder, MeCo/ESI formulary status. Confirmed lunch for tomorrow
PPLPMDL0020000001	Parma	OH	44129	9/30/2013	Told Dr. he has more patients that fit the criteria of Scott then he thinks and that the tramadol patient in need of a dose increase or a change in medication is similar to the patient that he just prescribed Butrans for.
PPLPMDL0020000001					Reviewed Percocet OxyContin conversion a reminder Dr. the patient around-the-clock Percocet for several months might be candidates for OxyContin. Gave intermezzo reminder and Dr. asked about the coverage. I told Dr. that his commercial patient can use the vouchers the similar to his Butrans and OxyContin patients can use vouchers.
PPLPMDL0020000001	Cleveland	OH	44106	9/30/2013	Dr. Salim Hayek- Program Director. Terrah Northern-Admin
PPLPMDL0020000001	Cleveland	OH	44106	9/30/2013	Obtained and contacted Donna Bentley Dept admin in regards to in-service, Dr. Kikano- Dept Chair approves requests if any. Obtained Dr. Kikano admin. Patti at PXW158@case.edu
PPLPMDL0020000001	Cleveland	OH	44106	9/30/2013	Dr. P. Silverman MD assoc. program dir., left info for appt. request, along with Andrea Dracon RN, Silverman's nurse requesting appt. Dr. J. Bokar- Residency/Fellows Program director
PPLPMDL0020000001	Cleveland	OH	44106	9/30/2013	Visited Anes/Pain dept. had appt with Hayek,Shah,Zaky, fellows. Visited Family Practice obtained admin. info for in-service. Seidman Onc
PPLPMDL0020000001	Parma	OH	44129	9/30/2013	Ask doctor to consider Butrans for patients that are in need of a dose change from Tramadol. Gave 30% reduction in pain insight and told her about upcoming lunch. Told Dr. she probably has patients in her practice that are similar to the inclusion criteria of the clinical trials. Dr. said yes after I mention osteoarthritis and spinal stenosis. Reminded Dr. Of start principle of titration for OxyContin.
PPLPMDL0020000001	Cleveland	OH	44104	9/30/2013	Quick Butrans Titration reminder, gave Dr., Butrans dosing tool. She said OK and asked to book appt. OxyContin Q12h flexible dosing strengths. Booked lunch appt. for Oct 15th
PPLPMDL0020000001	Cleveland Hts	OH	44118	9/30/2013	Reminded of OxyContin Q12h flexible dosing strengths along with broad formulary coverage. Dr. agreed. He said Butrans is going well, reviewed MeCo/ESI formulary status, along with Titration reminder.
PPLPMDL0020000001	Parma	OH	44129	9/30/2013	Spoke to find tech about ordering Butrans 15 And she looked interystem and said that she doesn't do a lot of the tens or the 20s or the fives. Gave insight and quickly reviewed clinical trials of Butrans with the pain reduction from 7.2 to 2.6. Reviewed start principal for OxyContin concentrating on titration. Gave indication limitation of use and dosing of intermezzo.
PPLPMDL0020000001	Independence	OH	44131	9/30/2013	Window call. Discussed OxyContin start principles.Discuss titration portion of start principal. Discuss formulary when I'm Butrans and gave 30% reduction in pain insight. Handed managed-care formulary win through the window. Reminded Dr. to consider tramadol patients in need of a dose change for initiating Butrans.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	9/30/2013	Discussed intermezzo and Butrans with dr over lunch appointment. I reviewed the dosing selling piece and discussed the indication and limitations of use. Dr said he has used it and for the coup,e of patients he had on it like it. Dr wanted to know where its covered as his patients pay a fair amount out of pocket. Discussed insurance grid and copy cards with 5 free pills. Dr said ok and he will continue to assess patients for the product.
PPLPMDL0020000001	Cleveland	OH	44106	9/30/2013	Introduced Butrans to dr discussing indication, dosing, titration, conversions and Scott profile. Dr said it sounds limea good product and asked about side effects. Reviewed the adverse events and asked him his thoughts which he said looks good. I asked him to find. Patient like Scott for the product.
PPLPMDL0020000001	Cleveland	OH	44106	9/30/2013	Reviewed OxyContin Q12h flexible dosing strengths along with broad formulary coverage. Discussed 30% pain intensity reduction and the significance in Butrans Opioid naive trial, Dr.stated not much experience with Buprenorphine but will consider
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	9/30/2013	OxyContin Q12h flexible dosing strengths along with broad formulary coverage. Dr. reiterated his confidence in prescribing OxyContin for those Oncology/palliative care patients. Discussed Butrans Opioid Naive trial and importance of 30% in pain reduction, thought that any reduction in pain is important, but does not believe in any long term use of any narcotics, but will keep in mind
PPLPMDL0020000001	Westlake	OH	44145	9/30/2013	Short conversation with dr about Butrans and intermezzo. Dr asked if intermezzo insurance coverage is better? I reviewed it with him and he said it is not any better. Dr said he really likes it and it works well but cost has been slowing him down.m I asked him to continue prescribing for patients failing Ambien. Dr said he is and it is too much for patients to pay. Dr said that he continues to see great things for patients that can tolerate it. I asked him what he means and he said some patients can't tolerate the nausea, dizziness and tiredness. Dr said more patients than not do very well with it. I reviewed insurance plan coverage, copy cards and patient type selection. Dr said he will continue prescribing.
PPLPMDL0020000001	Euclid	OH	44117	9/30/2013	saw dr- 30 percent pain reduction insight- what do you think about that kind of result? Dr said it was was just ok. I said what results are you looking for? He said at least 40% improvement. I said I was going to leave him with one reason today why to continue to write Butrans...It has been studied and it works. Patients in open label portion of our study where patients never been on an opioid before...went from a 7.2 to a 2.6 pain reduction in 4 weeks. If that isn't a reason to remember Butrans today what is? He smile, said he loves Butrans. Left him the Naive Butrans study.
PPLPMDL0020000001	Parma	OH	44129	9/30/2013	Pain reduction insight, tied into Butrans 3024 & 3015 clinicals, with 4.6 and 3.6 reduction in pain scores. Left both clinicals for dr Morley, asked him to review & then I'd like to follow up on efficacy & safety data next visit. Left dosing slider. Again, he says he just does refills for what dr Moufawad already has patients on that come into his office for therapy. Suggested I talk to dr Moufawad. I responded I know dr Moufawad. & he's in the territory a few days a week, & that I'd be seeing him this week. For controlled release OxyContin, suggested converting patients uncontrolled on IR oxycodone or Percocet, same molecule, different delivery system.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	9/30/2013	Window call asked Dr. his thoughts on a 30% reduction in pain on the pain intensity scale. Dr. was busy so I told them I would leave the clinical trials for us to discuss during lunch and he could give me his thoughts on what he considers clinically important. Asked Dr. to think of patients who were on round-the-clock Percocet for several months and consider them for OxyContin. Left intermezzo dosing card
PPLPMDL0020000001	Cleveland	OH	44106	9/30/2013	As I was discussing an insight and reviewing Butrans dr told me he prescribed it before. I asked him to talk to be about how the patients are doing? Dr said he had two patients still on it and are doing quite well. I asked dr if he has prescribed it and patients have had success and are still taking it, what reasons are there for not prescribing more? Dr said cost. I asked which plans and he didn't have any specific plans. I went over cost and discussed pans that are specific to his practice. I asked dr if he cleared up any confusion about Butrans being too expensive? Dr said it did. I asked if he is convinced it works clinically by reviewing the studies on the last visit? Dr said he believes in it. I reviewed the Scott and nancy profiles and asked him if he has patients like them? Dr said he does. I asked him to prescribe again. Intermezzo indication, dosing, and insurance coverage. Dr said he has not prescribed and will just cut the dose of Ambien. I told him the indications are far different and read intermezzo indication again. Dr said he understands.
PPLPMDL0020000001	Independence	OH	44131	9/30/2013	OxyContin Q12h flexible dosing strengths, Butrans for those Tramadol failures that are requiring around the clock pain control, he said he doesnt treat much chronic pain. Intermezzo for MOTNA/dosing.Dr. is leaving UH- moving to Columbus in Dec
PPLPMDL0020000001					Asked dr what is keeping him from writing butrans since he sys he knows about the product. I delivered 30% reduction insight and he said that was favorable but he can't remember. I asked him if I could describe the types of patients that might be appropriate for Butrans. Discussed inclusion criteria, use after tramadol when he needs to make a dose adjustment and low-dose Vicodin and Percocet patients. He said this will help him. Reviewed the clinical trials pain scores and Dr. said that was good information. Asked Dr. if he will see a patient like the ones we discussed this week and he said probably. I asked him would he initiate Butrans and he said he would consider it But managed-care is a problem. I reviewed the formulary grid and the Medco express script changes. Asked Dr. how long are patients on Percocet. Gave short acting insight and asked what he thought about the number of days. Dr. said that's not a problem he has people that take a couple of Percocet a day for years. I told Dr. to think about the patient who has chronic pain And needs round-the-clock medication. I told him to consider the Percocet conversions based on the detail piece. Dr. said he does not like to write OxyContin and I asked if he can't write it in the cases We discussed. Discussed intermezzo indication limitation of use and gender specific

PPLPMDL0020000001	Parma	OH	44129	9/30/2013	Spoke with pharmacist about stocking Butrans 15. Pharmacist said they will order Butrans when they see a script. Quickly reviewed clinical trial highlighting pain reduction from 7.2 a 2.6. Reviewed start principal For OxyContin And Also stressed flexible dosing. Gave indication of limitation of use of intermezzo
	Akron	OH	44312	9/30/2013	Quick discussion in hallway about him using more OxyContin and trying Butrans again. Dr told me that his OxyContin use will be limited because he is trying to reserve it for the specialists. I told him I understand and asked him if he's ok switching patients to OxyContin from Percocet when they are still in pain? Dr said its easier to do it that way and will try. Dr said he has not given up on Butrans but will continue to look for patients needing a change on tramadol. I agreed that that is a good candidate for Butrans. Nothing else learned.
PPLPMDL0020000001	Akron	OH	44333	9/30/2013	I gave dr the insight about hydrocodone/APAP combinations and asked him about the statistic. Dr said it actually seems low at 41%. Dr said that he knows that primary care doctors keep their patients on IR opioids way too long and he has to clean up the mess. Dr said he is glad to have so many good ER options for patients needing more steady state control. Dr said he likes the Butrans option and most of his patients really like it. I asked for continued and more business. Discussed his need to prescribe more OxyContin for those patients he sees on Percocet and need a dose adjustment or uncontrolled. Dr agreed to do it. Dr said that he is trying to use more intermezzo but its tough because of cost. Nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44106	9/30/2013	Reviewed OxyContin Q12h flexible dosing strengths and broad formulary coverage. Discussed Butrans Opioid Naive trial and the 30% in pain intensity, said that was significant and will consider, not initiating any prescriptions presently.
PPLPMDL0020000001	Cleveland	OH	44102	10/1/2013	Introduced Butrans 15mcg/hr dose presentation along with OxyContin Q12h flexible dosing and savings cards to Littlejohn RPH. Intermezzo for MOTNA/dosing. He will let Dennis know up the addition of dose strength
PPLPMDL0020000001	Parma	OH	44129	10/1/2013	Ask Dr. is there a reason why she hasn't prescribed Butrans. She said she has in the past but the patient couldn't afford it. I have to she's tried Butrans on a commercial patient because they're probably a lot of patients and her practice that are on Tramadol that she moves directly to Vicodin. Dr. said yes but she finds that Butrans is it covered and she did have a patient that experience nausea. I reviewed adverse reactions from the open label trials and explained that these are the common adverse reaction. I asked if she thought nausea was expected for patient new to an opioid and she said yes. I asked if she thought that I trial of More than two would be a more fair trial. She said yes and that she would consider trying Butrans again. And what her thoughts were on OxyContin and she said she uses it for her cancer patients and elderly. I asked her thoughts on that patient selection and she said that's what she's comfortable with. I asked if a patient has a Known pathology and has documentation is that enough to make her comfortable writing OxyContin. Gave indication of intermezzo reviewed appropriate patient type with middle of the night insomnia
PPLPMDL0020000001	Parma	OH	44129	10/1/2013	Spoke with Anaya about the 15 and she said that when she tried to order it it said it was not available from the manufacturer. I told her I would get back to her to see what that meant and reviewed OxyContin start principles. Gave intermezzo indication limitation of use an appropriate patient type with middle the night awakenings
PPLPMDL0020000001	Parma	OH	44129	10/1/2013	Myra said she had a patient wi With pain but she was uncomfortable prescribing Butrans because the patient had no documentation. I asked Myra what did she do and she said she ordered Ladson MRIs because the patient didn't have them and after that she'll consider the proper medication. I reviewed appropriate starting dose for the opioid experience patient was 10 and the opioid na rive patient was five. Spoke with Dawn and she said she saw Butrans on The bwc website yesterday and that it was released as approved but today she didn't see anything on their website. I told her I would check in the meantime could you check again for me. Smile if there's ever a time when she would renew a OxyContin prescription or initiate OxyContin and she said no. Gave indication and limitation of use and describe the appropriate patient with middle the night awakening for intermezzo
PPLPMDL0020000001	Cleveland	OH	44103	10/1/2013	Reviewed intermezzo for MOTNA/dosing. Dr will consider even know PA's are a challenge" Discussed Butrans.Said she is not treating/prescribing pain meds per medical director/practice policy. Will discuss with director
PPLPMDL0020000001	Euclid	OH	44117	10/1/2013	I called , DON, Kathy Nemeth to confirm the Butrans in-service scheduled for tomorrow 10/2. n/A, I left a message on her voice-mail.
PPLPMDL0020000001	Parma	OH	44129	10/1/2013	Told Dr. At lunch I didn't get to review much OxyContin and I wanted him to consider the Percocet patient Who has been on around-the-clock therapy for a while is in need of a long-acting. Handed Dr. Butrans tear off sheets to help him explain to his new Butrans patients how they should use the patch appropriately. Left dosing card for intermezzo
PPLPMDL0020000001	Parma	OH	44129	10/1/2013	Spoke with ma and explained that Dr. uses the trial cards for Butrans And I wanted to make sure that he had some. reviewed how to use them. What plans Butrans is on. And pain reduction scores from clinical trials
PPLPMDL0020000001	Cleveland	OH	44114	10/1/2013	Introduced Butrans 15mcg/hr dose presentation along with MedCo/ESI formulary status, she said that will be helpful for patients" as she continues to find new candidates to prescribe. Intermezzo for MOTNA/dosing
PPLPMDL0020000001	Bedford	OH	44146	10/1/2013	I received a phone call from D.O.N., Jackie Conner, stating that corporate was requesting that she set up an educational in-service on employee satisfaction. She came across my business card and called me to see if I could in-service her staff on that topic. I informed her that our primary focus is pain management. I talked with her about completing an in-service for her nurses on pain. She felt that that was also a need of the facility and Jackie said she will call me later this month to schedule.
PPLPMDL0020000001	Cleveland	OH	44103	10/1/2013	Review OxyContin Q12h with flexible dosing options and broad formulary coverage.Discussed Butrans for those Tramadol failures and patients requiring around the clock therapy. Showed Opioid Naive trial and the 30% reduction in pain intensity, said that was significant and will consider.
PPLPMDL0020000001	Cleveland	OH	44113	10/1/2013	Reviewed OxyContin Q12h flexible dosing strengths, broad formulary coverage.Introduced Butrans 15mcg/hr dose presentation along with MedCo/ESI formulary status. She said that was good news, adds another dose to titrate with.Discussed PA issues, had Melissa verify success in getting thru. Said that was good to know. Intermezzo for MOTNA/dosing
PPLPMDL0020000001	Cleveland	OH	44113	10/1/2013	Introduced Butrans 15mcg/hr dose presentation along with MedCo/ESI formulary status. Discussed those LorTab/Tramadol failures, likes once a week transdermal system said she will consider. Intermezzo for MOTNA/dosing
PPLPMDL0020000001	Cleveland	OH	44195	10/1/2013	Introduced Butrans 15mcg/hr dose presentation along with MedCo/ESI formulary status, to Roxan Rph mgr. Has 1 patient, Reviewed OxyContin Q12h flexible dosing strengths along with intermezzo for MOTNA/dosing
PPLPMDL0020000001	Cleveland	OH	44195	10/1/2013	Left info and request for appt.Dr. Davis/Gutsgill. Spoke with Troy in pharmacy and said he will relay additional Butrans strength when he speaks with Dr. Davis
PPLPMDL0020000001	Parma	OH	44129	10/1/2013	Dr. start out by saying he just spoke with Dr. Salama is next door and Dr. Salama does not write any OxyContin. I told the doctor I don't know everything that Dr. Salama writes but what are his thoughts on OxyContin. Dr. said that doesn't make sense because he writes Percocet. I told the Dr. how come he hasn't considered converting some of his patients out of been on Percocet around-the-clock for extended periods of time. Dr. said I was right and that he needs to consider that. I reviewed the conversion in the visual aid from Percocet OxyContin. Dr. said he needs to write more Butrans and he keeps forgetting. I told Dr. you've written a couple of times in the recent past what made him think of it then And he said I was just in. I told the doctor I see him weekly so that means he should be thinking about Butrans at least once a week. Dr. said that is true so I said let's just concentrate on the tramadol patient like Scott. Reviewed savings cards for intermezzo and gave indication, dosing administration And limitation of use
PPLPMDL0020000001	Parma	OH	44134	10/1/2013	Told Dr. he has some Percocet patients who have probably been on for longer than three months and are candidates to be can Converted to OxyContin. Dr. said that is probably true but a lot of them complain because they're getting the generic OxyContin And it doesn't work as well. I explained to the doctor that there is not a generic of OxyContin and what the patient is getting from the pharmacy is the branded drug. I asked Dr. if he was sure that the patient was getting OxyContin which is extended release or if they were getting the immediate release oxycodone. Dr. said he doesn't think they're getting an immediate release. Dr. said He likes Butrans because patients don't think about their pain. I asked Dr. about his Butrans potential and he said he thinks he has a lot of potential.
PPLPMDL0020000001	Cleveland	OH	44113	10/1/2013	Reviewed OxyContin Q12h flexible dosing. Dr. said Ok. Introduced Butrans 15mcg/hr dose presentation along with MedCo/ESI formulary status. Dr said he was glad to hear of new dose strength and continues to find new patients. Intermezzo for MOTNA/dosing
PPLPMDL0020000001	Norton	OH	44203	10/1/2013	met the doctor. Introduced self and the products sold. Dr thought OxyContin was Generic and asked questions regarding abuse deterrent. Highlighted the information and gave him the abuse deterrent leave behind to review. Dr said he chooses his medication based on safety data, especially for Opioids. Provided the insight on OxyCodone and when I asked why anyone would not convert sooner, he said drs trying to treat with short acting products. Reviewed the conversion slim jim- showed him the q12h of OxyContin. Dr. asked about Medicaid coverage.Dr said he does send patients out for drug screening and Lisa their RN does the patient education as well as handles the prior auths in the office. Discussed the 7 doses, even asked him if he could name them all. He was close. He didn't know that OxyContin started at 10mg. Bridged to Butrans Discussion- Dr. never heard of Butrans. Discussed the 7 day transdermal, the schedule 3 of opioids. DR. asked if Butrans could be abused and discussed abuse potential. Dr said he liked that the patch was a 7 day transdermal patch and that he would try it. I discussed the Naive study- open label pain reduction scored. I asked him to think of Butrans after a Cox 2 failure/NSAID. Dr asked if he could add supplemental to Butrans- reviewed the information. Dr. asked if it was not intended for after an Opioid failure. Clarification of the indication...and the variety of studys conducted. Dr. said he would try it in a patient.
PPLPMDL0020000001	Euclid	OH	44117	10/2/2013	I completed 3 in-services @ 7am, 2:30 & 3:30 on Butrans for the nursing staff. The Butrans slide deck was presented, along with a discussion and interaction on the appropriate patient types. A sample patch was presented to the nurses along with a demonstration of the disposal system. 10 nurses were in attendance, including the DON, Kathy Nemeth.Staff physicians and the CPP were updated.
PPLPMDL0020000001	Akron	OH	44313	10/2/2013	Caught dr going to lunch. I gave him yet another OxyContin conversions guide and told him that he needs to use OxyContin for his patients on 20mg of Percocet when they are ready for a dose adjustment or have been on it for 3+ months. Dr said ok. I asked him again if he has patients on tramadol that he refills each month? Dr said yes. I told him that Butrans may be appropriate for those patients and reminded him its a schedule 3. Nothing else learned
PPLPMDL0020000001	Cleveland	OH	44113	10/2/2013	Had appt. with Ortho dept. Dr.Stearns/Bilfield, Reviewed OxyContin/Butrans
PPLPMDL0020000001	Cleveland	OH	44130	10/2/2013	Quick call with hydrocodone insight. As Dr. his thoughts and how long patients are usually on hydrocodone and he said it depends. Discuss use of OxyContin for patients currently on Percocet. Quick reminder the Butrans after tramadol.
PPLPMDL0020000001	Cleveland	OH	44130	10/2/2013	Quick window call reviewed Percocet conversions for OxyContin using start principles in detail piece. Affect her to remember patients on round-the-clock Percocet Who might be candidates for OxyContin. Told Dr. I have lunch scheduled with them and want to get his thoughts on 30% reduction in pain insight. Left leave behind to discuss next week
PPLPMDL0020000001	Cleveland	OH	44130	10/2/2013	Window call, gave 30% reduction in pain insight And ask Dr. her thoughts on Butrans. Discuss Percocet conversions to OxyContin. Left intermezzo dosing card
PPLPMDL0020000001	Akron	OH	44309	10/2/2013	1. Confirm Frederic is still with Summacare since his emails are returning as undeliverable 2. Present Butrans 15mcg/hr launch details & try to re-send PDF
PPLPMDL0020000001	Stow	OH	44224	10/2/2013	Short conversation in stow office. I led with insight and asked her if she has used any ER opioids recently? Stephanie said she uses them every day. I asked if Butrans has been one of them and she said no. She said that she was going to use it the other day but her patient wanted to stay on fentanyl even though he was having a tough time tolerating it. I told her that a fentanyl patient may not be the best candidate for Butrans. I explained the inclusion/exclusion criteria from trials and showed her the conversion scale. I asked her if she has patients on tramadol or vicoden? She said yes but by the time she sees the, they are pretty far into their IR opioid. I told her that those patients may be better candidates for OxyContin and showed her the profiles for the new piece. Stephanie said thanks for the information and it helped her identify the right patients.
PPLPMDL0020000001	Cleveland	OH	44113	10/2/2013	Reviewed OxyContin Q12h flexible dosing strengths along with broad formulary coverage. Discussed Butrans for those patients needing around the clock pain control. Dr. said he will keep in mind, referring patients out
PPLPMDL0020000001	Stow	OH	44224	10/2/2013	I gave dr the insight about hydrocodone /APAP combinations and asked his thoughts? Dr said he gets it and said he knows the numbers are too high of patients being on IR opioids. Dr said he tries every day to start OxyContin but said its really difficult because patients done want to switch and say the branded products are too expensive. I told dr that he needs to start Butrans for those opioid naive patients that he has had success with in the past and those needing an ER opioid on tramadol or vicoden. Dr agreed. Nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44113	10/2/2013	Reviewed OxyContin Q12h flexible dosing strengths along with broad formulary coverage. Discussed Butrans for those patients needing around the clock pain control. Dr. said he will keep in mind, tends to refer most patients to pain mgmnt. Asked for that 1 patient, said he will consider
PPLPMDL0020000001	Stow	OH	44224	10/2/2013	Dr said that he wanted to use Butrans for a patient today on vicoden however the urine screen came back showing cocaine. I asked dr what the protocol is for that and he said its an automatic discharge from the practice. I asked dr what his ideal patient for Butrans is and he said one that need an ER opioid before they are titrated up on the IR analgesic. Dr said when he has patients failing vicoden and they are not too high up on it dose wise he will move to Butrans. Dr said if they are over 5 pills a day he will either go to Percocet or OxyContin. I told him that he can use his own clinical judgement but a patient peaking 5 vicoden a day can take Butrans. Dr said he wants more and more patients on ER opioids and he's glad I have two good ones for him. I asked for more business.
PPLPMDL0020000001					



PPLPMDL0020000001	Olmsted Falls	OH	44138	10/2/2013	Discussed Butrans. Follow up from last time introduction, identifying a patient with atc pain uncontrolled and transitioning from NSAID to Butrans 5mcg. Dr said he started a patient on the 5mcg a few weeks ago. I said great how soon are you seeing him back. Dr. said in a month. Pointed out...wait a min of 3 days before titration to the 10mcg. They are allowed supplemental analgesia per our studies. Also...showed the 4 approved sights the patients can place their patch and waiting that 21 days before going back to the same spot. Dr. Asked about managed care. commercially insured patients use the coupon. Discussed caesourse, prior auth and the medco part d information. Review Intermezzo- dosing gender specific.
PPLPMDL0020000001	Alkron	OH	44333	10/2/2013	Dr told me he prescribed three Butrans last week and one this morning. I asked dr to give me specifics on what the patients were taking previously and what dose he initiated? Dr told me that the three last week were two new for older ladies that he was taking off their prn vicoden and started on the 5mcg. Dr said the one this morning was on patient who actually requested a different option because dr said he told him he didn't want to take his vicoden anymore. Dr said he stated on 10mcg dose and figures he will need to titrate all patients. I asked for OxyContin prescriptions for his patients failing Percocet or need a dose adjustment and to start as early as 10mg dose. Dr agreed. Dr asked if the intermezzo insurance has improved because he continues to ask his patients but its just too expensive. I asked for him to find patients failing Ambien who have commercial insurance.
PPLPMDL0020000001	Cleveland	OH	44114	10/2/2013	OxyContin Q12h flexible dosing strengths with broad formulary coverage, Reviewed Butrans MedCo/ESI formulary status for those patients needing around the clock pain control
PPLPMDL0020000001	CLEVELAND	OH	44106	10/2/2013	Discussed OxyContin utilization with Troy, utilizing mostly 60mg/80mg. Reviewed Butrans along with new 15mcg/hr dose, said Davis and Gutsgeil are main prescribers, said he will inform Dr's of new dose.
PPLPMDL0020000001	Fairlwan	OH	44333	10/2/2013	Quick call in hallway and told him that Butrans is a product I want him to use for his patients needing more than what tramadol can offer. I showed him the conversion guide and asked him to start is when patients need that dose adjustments on tramadol. Dr said ok. I told him I wanted him to use OxyContin 10mg for his patients needing a dose adjustment on 20mg of Percocet. Dr said ok. Nothing else learned.<font color=blue><b>CHUDAKOB's query on 10/13/2013</b></font>Cliff, what did you mean you want him to use Butrans "for his patients needing more than tramadol can offer"?<font color=green><b>REICHCL's response on 10/16/2013</b></font>I don't remember. I think dr said something about using Butrans if tramadol doesn't offer enough pain relief.<font color=blue><b>CHUDAKOB's query on 10/17/2013</b></font>I was more concerned about the wording "more than tramadol can offer" This can misinterpreted as a comparative statement. We can certainly say Butrans offers another option, but we cannot say "more than tramadol can offer" Does this make sense?<font color=green><b>REICHCL's response on 10/18/2013</b></font>Got it<font color=blue><b>CHUDAKOB added notes on 10/21/2013</b></font>Think you!
PPLPMDL0020000001	Parma	OH	44129	10/2/2013	Shared with Dr. Butrans clinical trials and asked his thoughts on pain reduction Of 30%. Dr. said he sees more than that sometimes and likes Butrans. I asked his thoughts on using Butrans after NSAIDs And he said he likes to use it after tramadol and not instead of. I asked Dr. if he ever thinks of Butrans with his low-dose Vicodin or Percocet patient and he said he doesn't use very much Percocet and patient come in on Percocet but he doesn't initiate. Asked Dr. what he thinks primary care would need to know about Butrans to help them understand where to use Butrans. Dr. said He see no consistency in how primary care Prescribed opioids. Dr. asked about the 15 and I told him it's not available yet But he will be able to prescribe by the end of the month when pharmacies are completely stock. I reviewed OxyContin conversion and ask Dr. his thoughts on OxyContin and he said he does not initiate any therapy on OxyContin and he only has one cancer patient and he uses methadone instead. I asked why he does not prescribe and he said he is concerned about the addiction potential and that's why he uses methadone. Reviewed indication the limitation of use of intermezzo for patients suffering from middle the night insomnia.
PPLPMDL0020000001	Berea	OH	44017	10/2/2013	Saw dr. he said I still haven't written it yet before I said a word. I said written what? He said Butrans. I said Its ok...you may not have a ton of patients with ATC Pain on a nSAID not working...but when you do Butrans 5mcg. He said I'll keep it in mind and walked down the hall.
PPLPMDL0020000001	Alkron	OH	44309	10/2/2013	1. Determine if there's an issue with her email address because of undeliverable messages 2. Discuss feedback from last July program and thoughts for another program 3. Determine topics of interest for next program and timeline
PPLPMDL0020000001	Olmsted Falls	OH	44138	10/2/2013	Spoke to the office manager about seeing the doctor, but she said no. Reviewed Butrans with the initiation slim jim- what it was (7 day transdermal pain patch) and it was a schedule 3 opioid, which means u it still can be abused however refills can be called in for ituntile OxyContin, which is a schedule 2 q12h product.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	10/3/2013	Good discussion about the insight 9 and his tights on the statistic? Dr said he understands it as most come from PCPs or internal medicine physicians and he gets how they continue to prescribe the IR opioids. Dr said that their knowledge of ER opioids is low and they don't feel comfortable prescribing because of that and pressure from the government. Dr said that its his job to adjust medicines that may be more appropriate for each individual patient. Dr said that he is continuing to switch patients to OxyContin because he finds great success with it and patients would like to be on and ER opioid even though they might not admit it. I reviewed case study and dr agreed. Dr said he is prescribing more Butrans recently and is really liking the results. Dr said he patients are responding to it from both tramadol and vicoden. I discussed case study profiles and dr said that's good information to know about how he can use it for multiple patient types. Reviewed copy cards and insurance.
PPLPMDL0020000001	Stow	OH	44224	10/3/2013	Led with insight 9 and asked him his thoughts. Dr said he agrees with the statistic mostly but said the 41% is a bit high for his own practice. I told him that I understand not all his hydrocodone/APAP patients are not appropriate for an ER opioid but that he may be missing some opportunities for some to be on an ER opioid. Dr agreed but has a small proportion of patients fitting that profile. Mi told him I will take that small percentage that have commercial insurance. Dr agreed that he can look at that small proportion of patients for ER opioids like Butrans or OxyContin. Reviewed profiles for each product and asked him to prescribe Butrans and OxyContin. Intermezzo indication and dosing.
PPLPMDL0020000001	Cleveland	OH	44195	10/3/2013	Left OxyContin info for Dr Parker-Chair, Ricchetti, Umeda.
PPLPMDL0020000001	Cleveland	OH	44195	10/3/2013	Visited main campus Ortho/Rheum dept<font color=blue><b>CHUDAKOB's query on 10/09/2013</b></font>What happened on this visit. It says you didn't leave any reprints. If all you did was show up and try to see someone, then this should not be recorded as a call. Make sense?<font color=green><b>GUTKOMA's response on 10/10/2013</b></font>FYI-Call notes are under CCF-Ortho/Rheum dept. heading , we can further discuss for more precise call recording. Thanks<font color=blue><b>CHUDAKOB added notes on 10/14/2013</b></font>Yep. You are correct here. My bad. In the main hospital call note, just put a notation as well to see individual
PPLPMDL0020000001	Barberton	OH	44203	10/3/2013	Spoke to Anne the f/o ma and she didn't know anything about Butrans. Went over the initiation guide and gave her the butrans managed care had out for the doctor and self to review. Discussed the commercial insured patients and the inclusion criteria of the naive study.<font color=blue><b>CHUDAKOB's query on 10/12/2013</b></font>What is an f/o ma? Please do not use abbreviations in call notes as some people who will read them will not know what the abbreviations mean.<font color=green><b>BARTOLI's response on 10/14/2013</b></font>Front office ma (medical assistant)<font color=blue><b>CHUDAKOB added notes on 10/15/2013</b></font>Thanks for the clarification. I guess that is why we don't use abbreviations.
PPLPMDL0020000001	Stow	OH	44224	10/3/2013	Reviewed case study for OxyContin in new approved piece and asked if she thought this was appropriate course of change of therapy and if she would do anything different? Dr said that she might actually start OxyContin sooner. I asked why and she said because there is no reason to keep the patient on Percocet for that long. I told dr I was glad to hear that and asked her to do that with any patients she currently had on Percocet that have been on it for 90 days or longer and still in pain. Dr agreed and said ok. I discussed the Scott profile for Butrans and asked her if she had any patients on tramadol around the clock for pain? Dr said a handful. I told her to reassess those patients for ER therapy with Butrans.
PPLPMDL0020000001	Independence	OH	44131	10/3/2013	gave dr the percocet conversion for oxycontin. dr said he uses oxycontin but would consider patients in need of a dose change on percocet. reviewed butrans clinical trial
PPLPMDL0020000001	Independence	OH	44131	10/3/2013	reminded dr of our lurch on monday and his commitment to consider butrans after tramadol. dr said he remembered but appreciated the reminder. showed dr the percocet to oxycontin conversion in the detail aid.
PPLPMDL0020000001	Independence	OH	44131	10/3/2013	gaved dr a reminder of butrans after tramadol and gave hydrocodone insight. dr said some patients are fine on hydrocodone for long periods, reminded the dr of intermezzo for motna
PPLPMDL0020000001	Mayfield Village	OH	44143	10/3/2013	Lunch, pain reduction insight,then BUP 3024, went over each page of trial, kristy says the 4.6 reduction is " big" went over dosing, titration, dosing slider. After data presented today, on efficacy& safety of Butrans, does that increase your comfort level with Butrans, yes, she replied. Next visit I'd like to review in depth this cancer pain profile, Joan. Notice her recommended start dose for controlled release OxyContin is 15 mg. that's 30 mg in 24 hour period. When you use our START principles & titrate there's a 25-50% increase in doses. Ok, sounds good.<font color=blue><b>CHUDAKOB's query on 10/12/2013</b></font>Why the cancer profile. Is she an oncologist nurse practitioner?<font color=green><b>BALLIE's response on 10/13/2013</b></font>She is not an oncologist nurse practitioner, yet the majority of her patients are geriatric. After presenting Joan profile, I planned on finding out if she refills OxyContin for cancer pain. Should the Joan profile be reserved only when detailing oncologists?<font color=blue><b>CHUDAKOB added notes on 10/14/2013</b></font>No, but I am guessing she is probably not treating a lot of cancer. If her patients are elderly, then most probably have osteoarthritis. You may want to ask about cancer patients they treat before spending a lot of time on this disease state.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	10/3/2013	Short conversation about insight 9 and asked him what his thoughts are? Dr said he knows patients are left on their IR opioids too long and said its the job of the specialist to ensure patients are on th best medicine for their pain. Dr said that he continues to see patients come to him on too high a dose of vicoden and Percocet. I asked what is too high? Dr said it depends on the patients and what they are being treated for. I asked where Butrans and OxyContin fit in? Dr said I know he uses OxyContin and Butrans and likes the both. I discussed the Butrans decision tree and asked what he does after the 10mcg Butrans if he won't titrate to the Butrans 20 mcg. Dr said it depends but will move to another ER opioid like OxyContin. I told him I'm fine with that. Nothing else learned.
PPLPMDL0020000001	Mayfield Village	OH	44143	10/3/2013	Lunch, pain insight, BUP 3024, went through trial, each page, pain reduction of 4.6 he says was good reduction.introduced new 15 mcg hr dose, making it clear the 15 & 20 mcg hr are TITRATION doses & not initiation doses. New dose should be available in a few weeks, started shipping out to wholesalers yesterday, dr, after presenting this safety & efficacy data, does this increase your comfort level with initiating Butrans for pain associated with conditions we discussed? Yes. How to titrate & dose using slider, for patients taking 80 mg more morphine or equivalent, that's your OxyContin patient. Next visit I'd like to discuss Joan cancer pain profile. Notice her suggested OxyContin dose is 15 mg q 12 h. Showed 7 doses on visual aid, START principles to assist you with conversion & titration. Remember the \$90 savings cards for your patients covered on commercial plans.
PPLPMDL0020000001	Cleveland	OH	44118	10/3/2013	Reviewed Butrans for those Tramadol failures requiring around the clock pain therapy with Michael, and Intermezzo for MOTNA/dosing, said he will review with Dr. Left Dosing titration guide
PPLPMDL0020000001	Independence	OH	44131	10/3/2013	showed roman the percot conversion page in the detail piece. passed through the window the butrans titration guide. he said the butrans coverage was bad and he had to leave.
PPLPMDL0020000001	Mayfield Village	OH	44143	10/3/2013	Lunch, pain reduction insight, then BUP 3024 4.6 pain reduction, went through each page clinical trial, focusing on inclusion criteria, and what conditions that may cause their pain. , yes, i've got a few patients on Butrans. That's great, a new 15 mcg hr dose was recently approved by FDA offering greater dosing flexibility. Started shipping to warehouses yesterday, should be available in a few weeks. Please note that the 15 mcg & 20 mcg hr are TITRATION doses, not initiation doses. For patients on greater than 80 mg morphine equivalent, Butrans not appropriate, that would be your controlled release OxyContin patient. Next visit I'd like to go over this cancer pain profile, Joan, & notice based on what she was taking previously, she would be initiated at 15 mg q 12 h. Ok, sounds good.
PPLPMDL0020000001	Lyndhurst	OH	44124	10/3/2013	Met with 2 med assts & office coordinator, let them know what I was leaving for Dr Reed, our START principles for controlled release OxyContin, and new piece for 1 x week pain patch, Butrans. Also new 15 mcg hr dose should be available in a few weeks. Left packet for dr Michelle Roda also: OxyContin formulary grids & PBM piece, conversion, titration guide, new Butrans piece with all 4 doses.<font color=blue><b>CHUDAKOB's query on 10/12/2013</b></font>Jenny, This call was made in quarter 4. Did you ask about reinstating lunches on this call since I already was quarter 4? Remember, asking about reinstating lunches is not a next call objective. A next call objective should be what you want to accomplish should you get in front of the physician.<font color=green><b>BALLIE's response on 10/13/2013</b></font>(you are correct, the first sentence of my next call objective was a reminder to ask about lunches & is not the appropriate next call objective). However, the next sentence states I want to discuss START principles, then pain reduction insight, Butrans with Dr Reed.<font color=blue><b>CHUDAKOB closed the query on 10/15/2013</b></font>
PPLPMDL0020000001	Tallmadge	OH	44278	10/3/2013	Spoke with the pharmacist about all products. Introduced the 15cg dose of Butrans, provided pharmacy fact sheet and NDC number for ordering. I asked him if he will order ad he said he will order it when he sees a prescription. Discussed appropriate starting dose and titration with steady state. OxyContin dosing, titration,and dosing flexibility. Ray said he has not seen any prescriptions recently with anything other than q12h.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	10/3/2013	Intermezzo indication and dosing. Ray has not seen any prescriptions.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	10/3/2013	Led with insight 9 and asked him his thoughts? Dr said he understands how patients remain on IR opioids because of cost,the family dr continuing to prescribe them, or being scared to take a medicine like OxyContin. I asked him to continue to prescribe Butrans and OxyContin as his go to ER opioids and to continue to expand their use. I reviewed the new Butrans hydrocodone combination case study and OxyContin case study. Dr said he agrees with them but would have started the Percocet patient on OxyContin much earlier. Reviewed dosing and titration and asked for his continued commitment. Dr agreed.



	Lyndhurst	OH	44124	10/3/2013	Quick window call, Butrans pain reduction opioid naive, 4.6. Dosing, titration, new 15 mcg hr titration dose available, in a few weeks, the 15 & 20 mcg hr are TITRATION doses only. She was walking out of office to have dinner to celebrate her birthday which is Fri 10/4. Left packet for Patrica Moran, CNP, Intermezzo reassessment brochure, Butrans new piece.<font color=blue><b>CHUDAKOB's query on 10/12/2013</b></font>Jenny, your call notes cannot be just words. They should be complete sentences that tell us what happened on the call. They should include words such as "I said" and the Dr. said". Putting things such as she is celebrating her birthday is not part of the sales call. These types of statements are really not necessary in the call notes.<font color=green><b>BALLU's response on 10/13/2013</b></font>I will try to be more complete on future call notes. As far as the birthday mention, while I realize it's not a necessary element of the call note, it's for my knowledge, so I can insert into my calendar, as I keep track of my customers' birthdays.<font color=blue><b>CHUDAKOB added notes on 10/14/2013</b></font>Ok. Thanks. That is a good idea, but still probably should not be included in the call note. The call note should relate to the call. Just put the birthday right in our calendar in the car.
PPLPMDL0020000001	Mayfield Village	OH	44143	10/3/2013	Reminded dr of previous visits & conversation. Pain reduction insight BUP 3024 trial, 4.6 reduction pain. He stated good pain reduction. I have a patient on Butrans said dr. In the nursing home, I asked? Dr A replied. Yes, Butrans in nursing home. how is patient doing? so far so good dr says, i will see them soon. well that's great, but i also want to address patients outside of the nursing home. i will have to think about that says dr azar. left copy both clinical studies, sliding doser. lets further discuss safety & efficacy next visit. (says patient told by nursing home, that they can only be on Butrans temporarily & patient will have to start paying for Butrans & its too expensive) then transitioned to OxyContin. He again, mentioned oxycodone. He says I'm already using oxycodone. That's same molecule as OxyContin However it is not my product, its short acting. I promote branded, controlled release OxyContin q 12 h dosing, showed him 7 doses on visual aid. Next visit I'd like to discuss Joan, cancer pain patient, who is appropriate candidate for OxyContin 15 mg.
PPLPMDL0020000001	University Hts	OH	44118	10/3/2013	Discussed Butrans and the Scott profile, Dr. agreed he sees patients like this and will consider. Reviewed Medco/ESI formulary status . OxyContin Q12h flexible dosing strengths and Intermezzo for MOTNA/dosing
PPLPMDL0020000001	Cleveland	OH	44195	10/3/2013	Visited Dept. spoke with Renee, left Butrans/OxyContin info for Chatterjee,Calabrese,Deal, fellows and nurse education room. Katherine Tuthill CNP, Tiffany Clark, Betsy Kirchner
PPLPMDL0020000001	Parma	OH	44134	10/3/2013	asked rita to order butrans 15 and she said they do not do much volume but she will order when she gets a script. reviewed clinical trials. reviewed oxycontin start principle. discussed intermezzo indicatin and limitation of use
PPLPMDL0020000001	Cleveland Hts	OH	44118	10/3/2013	Reviewed Butrans 15mcg/hr dose with Floater Jenifer, OxyContin Q12h flexible dosing strethens . Intermezzo for MOTNA/Dosing
PPLPMDL0020000001	Mayfield Village	OH	44040	10/3/2013	First met with tech Patricia, then Pharm Steven. Introduced new 15 mcg hr dose. Left NDC PPI booklet, & Butrans pharmacist guide. Steven said he got a new Butrans from dr Laham, too busy to look up dose. They will NOT pre order a box, they will wait until they get their first Rx.
PPLPMDL0020000001	Cleveland Hts	OH	44118	10/3/2013	Review Butrans Medco/ESI formulary status for those Tramadol failures requiring around the clock pain management
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	10/3/2013	Reintroduced Butrans and asked him what his thoughts are on prescribing a schedule 3 ER opioid? Dr said he remembers Butrans and has not used it. I asked him if he has patient on tramadol around the clock? Dr said he has a few. Reviewed the Scott profile and asked him if it makes sense to use it in a patient like Scott's. dr said it does he just needs to find the patient. I asked him to do that and allow the product speak for itself. I told him that next time I will review some of the efficacy and safety if Butrans.
PPLPMDL0020000001	Cleveland Hts	OH	44118	10/3/2013	Quick OxyContin Q12h flexible dosing strengths with broad formulary coverage. Butrans preferred Cigna formulary status for those Tramadol failures requiring around the clock pain control
PPLPMDL0020000001	Akron	OH	44333	10/3/2013	Dr told me that he is having probers finding patients for Butrans and is having no issues with finding ones for OxyContin. I asked who he believes is appropriate for Butrans? Dr said he's not sure and said he thinks patients talking too much vicođen. I showed dr the Scott and nancy profiles. I explained that when he has a patient on tramadol around the clock who is still in pain and needs a dose adjustment, Butrans would be suitable. I asked if he understands and he said yes. I reviewed the new profile on vicođen and showed how a patient on 20mg of vicođen would approximately initiate on the 10mcg patch. Dr said he understands now. Dr said he has been moving patients from Percocet to OxyContin and patients are happy. intermezzo dosing and indication and asked for him to look for patients.
PPLPMDL0020000001	Barberton	OH	44203	10/3/2013	Spoke to the doctor today Dr cussed OxyContin first: She said oh yes, I've use it. When she asked if there was anything new about it...I showed her the 7 different strengths and stressed the re-assessment and Tailoring aspect of the start principles from the core aid. Dr. shook head. Asked her about her experience with Butrans so far and she said she had not found the right patient yet. I asked who she thought that might be and she replied with a patient needing chronic pain relief after a short acting opioid has failed. I asked her if she would ever consider using the Butrans 5mcg after a NSAID patient failed? She said she never thought about that. I went over the Naive study...used the pain reduction scale as a visual and the open label segment of the study. Discussed the 30% pain reduction insight and she said she was impressed that Butrans was that high. When we discussed the inclusion criteria the doctor said she see's many patients like this. Reviewed- how long to wear the patch, managed care and the Nurse (michelle) asked about rash a/e/s which I opened the core visual aid and showed it to her and she said thats not bad. Nurse asked about Managed Care and went over both oxycontin and Butrans Savings program.
PPLPMDL0020000001	Mayfield Village	OH	44143	10/3/2013	Lunch, pain reduction insight, BUP 3024, went through each page, he thought 4.6 pain reduction was impressive. Only CIII opioid with transdermal delivery system, greater dosing flexibility now with new 15 mcg hr dose, which started shipping to wholesaler's yesterday, & should be available in a few weeks. Left him Maria patient profile, after presenting as opioid naive patient. Then, patient profile Joan. After going through profile, I'd like you to consider for a cancer patient like Joan. Her recommended start dose is 15 mg, and since q 12 h dosing, that would mean 30 mg in 24 hour period. Ok, I will consider, showed all 7 doses on visual aid, then START principles.
PPLPMDL0020000001	Barberton	OH	44203	10/3/2013	Spoke to the office manager today about seeing the Dr. but he was not available. Scheduled a lunch and discussed Butrans. She knew nothing about the product, she also handles the prior auths for the office (of Appl). I reviewed the managed care plan for Butrans and OxyContin. Discussed that Butrans is a 7 days transdermal patch system of buprenorphine. 4 patches for the month. Reviewed it was a product that could be faxed in or hand delivered because it was schedule 3 and could do refills. Discussed abuse potential. Gave David profile to give to dr. Patel and also the conversion guide of OxyContin.<font color=blue><b>CHUDAKOB's query on 10/12/2013</b></font>Your next call objective says "Find out more about practice." What more would you like to find out about the practice that will help you move sales in this office?<font color=green><b>BARTOLI's response on 10/14/2013</b></font>Find out what he does at is practice vs at the hospital. Find out what type of his pain patients he sees in his practice. Find out why he picks Butrans and for which types of patients.<font color=blue><b>CHUDAKOB added notes on 10/15/2013</b></font>I see. That is certainly a little more specific. Thank you!
PPLPMDL0020000001	University Heights	OH	44121	10/3/2013	Dr price says I'm really busy today, understood I will be quick. My main purpose today is to talk about cancer pain, a specific patient profile, Joan, this cancer pain patient should be started on OxyContin 15 mg, & remember, that's 30 mg in 24 hr period. Please individualize the dose for each patient, and consider starting on lower doses. Ok, he responded. For my 1 x week CIII pain patch Butrans, new 15 mcg hr Dose, for further dosing flexibility, should be available at pharmacies in next few weeks. Left dosing slider. He then walked into patient room.
PPLPMDL0020000001	Cleveland Hts	OH	44118	10/3/2013	Reviewed new Butrans 15mcg/hr dose with RPh, saw a RX last week from Dr. Harris PA, OxyContin Q12h and Intermezzof for MOTNA/dosing
PPLPMDL0020000001	Cleveland	OH	44143	10/3/2013	Met with medical assistant, let them know that new 15 mcg hr dose of Butrans started shipping to wholesaler's yesterday, & should be available at pharmacies in a few weeks. Left Dr S new piece & told his staff to have dr call me if he'd like me to come in for an in service on Butrans. Also let them know I have branded, controlled release OxyContin with q 12 h dosing, 7 doses available.
PPLPMDL0020000001	Beachwood	OH	44122	10/3/2013	reviewed oxycontin conversion of percocet in detail piece using the start principle. gave 30% decrease insight and she said that sounds like the kind of results she sees. gave indication and limitation of use for patients with
PPLPMDL0020000001	Beachwood	OH	44122	10/3/2013	dr said he is using oxycontin when he is able to write. he asked has anything changed for managed care and i said no. dr asked about butrans and it's approval on workers comp and i explained that i had a conversation with vicki but the crux of it is there are several workers comp plans and butrans is approved on a lot of the plans but i can not say all of the plans are approved. gave indication and limitation of use for intermezzo
PPLPMDL0020000001	Akron	OH	44305	10/4/2013	Spoke to bob the floater pharmacist about products. Introduced Butrans 15mcg dose and how to initiate and titrate the product. Bob said he had seen a few prescriptions and will order the 15mcg. OxyContin dosing and titration and reviewed appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44113	10/4/2013	Reviewed OxyContin Q12h flexible dosing with Justin, Butrans 15mcg/hr strength, Will recommend if appropriate patient presents
PPLPMDL0020000001	Cleveland	OH	44113	10/4/2013	Reviewed OxyContin Q12h flexible dosing strengths along with Broad formulary coverage, Also Butrans for those patient requiring around the clock pain therapy. Said OK and will keep finding new appropriate patients
PPLPMDL0020000001	Cleveland	OH	44195	10/4/2013	MSL and Dr. Eduardo Rodenas met with Dr. Dell and Ms. Riley to discuss OTR3001. Dr. Dell agreed to meet with potential OTR PIs in pediatric surgery, anesthesia, and hematology/oncology by the end of the year. Site is proceeding with BUP PI change to Dr. Steven Spalding.
PPLPMDL0020000001	Cleveland	OH	44109	10/4/2013	Visited Anes./Pain dept. Sue-Fellows coordinator, left Butrans/OxyContin info for fellows.
PPLPMDL0020000001	Cleveland	OH	44109	10/4/2013	Visited Anes./Pain Dept Sue-Fellows OxyContin/Butrans info
PPLPMDL0020000001	Akron	OH	44312	10/4/2013	Spsr to,d me he is way behind and had time for one point on Butrans. I told dr to start a patient today on it who you see on any IR opioid like tramadol or vicođen who is on it around the clock who need a dose adjustment. I showed him the Scott profile and told him to use it to find the right patient. Dr said ok. I told him to use the copy cards for the commercial patients only. Dr said he will try to use more.
PPLPMDL0020000001	Olmsted Falls	OH	44138	10/4/2013	I made a drop in visit and met with , DON, Pam Riter,I introduced myself and Purdie's nurse educator program. Pam stated ,yes I remember talking with you at the PharMerica conference. " She was not able to sit down with me today ,an appointment was set for Friday, October 11 at 1 PM to discuss educational opportunities
PPLPMDL0020000001	Cleveland	OH	44113	10/4/2013	Presented Scott profile,Dr. agreed he had similar patients, Reviewed Butrans Initiation/Titration guide, MedCo/ESI formulary status. Dr.along with Judy said he will consider. OxyContin Q12h flexible dosing strengths with broad formulary coverage. Intermezzo For MOTNA/dosing
PPLPMDL0020000001	Akron	OH	44312	10/4/2013	Good conversation gate leading with insight 9. Dr said that he agrees that patients are kept on their IR opioids too long. I asked what he thinks needs to be done? Dr said he isn't sure other than stop prescribing IR opioids like vicođen for patients that don't have acute pain. Dr said that he tries to not keep patients on their IR opioid longer than three months. Dr said he will then either refer to pain management or start an ER opioid. I explained,aimed how Butrans can be a solution for his patients that are not acute in nature and are ready for a dose adjustment on their IR opioid. Dr agreed and said he will give it a try. Reviewed all key selling messages.
PPLPMDL0020000001	Akron	OH	44312	10/4/2013	OxyContin dosing, titration and conversions from Percocet. Insurance and copy cards for all products. Intermezzo dosing, indications and asked if he will prescribe? Dr said he will look into using it.
PPLPMDL0020000001	Akron	OH	44312	10/4/2013	Of with insight number 9 and asked dr his thoughts? Dr said there are many different subsets of patients and he said that the acute pain or occasional use of IR opioids is a different situation. Dr said that those patients with chronic conditions are left on their IR opioids way too long and he knows that he is guilty of that. I reviewed all key selling messages for Butrans, patient profiles and initiation and titration guide and asked him if he will prescribe again? Dr said after I told him about Caresource pa that he has already thought of a few patients for Butrans. I told him good and to make sure the Pa form is filled out and faxed. OxyContin disingenuous titration, insurance, conversions and asked for him to convert patients on Percocet needing dose adjustment. Intermezzo indication and dosing.
PPLPMDL0020000001	Akron	OH	44312	10/4/2013	Led with insight 9 and asked his opinion. Dr said that he understands how patios are left on their ir opioid and most is cost. I explained how Butrans may be an option that can be cost effective for patients with commercial insurance and discussed all key selling messages. Dr said he sees how it can fit in his practice and will give it a shot. OxyContin dosing, titration and conversions. Intermezzo indication, dosing and limitations of use.
PPLPMDL0020000001	Mayfield Heights	OH	44124	10/4/2013	Controlled release OxyContin,q 12 h dosing, START principles, conversion titration guide. Lunch, dr couldn't figure out what pain threshold Butrans treats. Used dosing slider. Then BUP 3024, pain reduction insight, patient like Maria. I think he's a little more clear. Butrans he was rushed today, & I know there's something holding him back. Also concerned with coverage. Updated him on Med D preferred plans, Med ass t KIM has the commercial formulary grid. Ok he said, started walking out of room.
PPLPMDL0020000001	Richmond Hts	OH	44143	10/4/2013	Lunch. I had mentioned Butrans briefly 1 x before & today she asked if Butrans is new product? I told dr it came out in 2010. Pain reduction insight, BUP 3024, went through each page of trial. She was concerned with cost, & asked if covered on Medicaid. It may require prior auth. is this narcotic? Yes it's controlled CII opioid which can be called in with up to 5 refills. Concern about skin irritation & another patch she used in the patch. We don't have head to head study comparing Butrans to any other patches, so I can only provide you with skin reaction data in our clinical trials. After showing data, she wasn't very concerned about skin irritation. Did share Medicare Part D updates, left flashcard.( next time bring dosing slider) CIII , can be called in with refills. She says she will try. Let her know trial, savings cards in sample cabinet. For controlled real ease OxyContin she uses in nursing home. Showed her START principles & conversion & titration guide. She says, oh, I need this! The conversion from IR oxycodone & Percocet would very helpful to her she says.
PPLPMDL0020000001	Akron	OH	44312	10/4/2013	Took a few minutes to review the new patient Maggie and asked him what his thoughts? Dr said it makes sense to titrate the per cost but said he would have either stated OxyContin or referred to pain management when she reached 40mg of Percocet. I agreed that he should start OxyContin earlier and it would be appropriate. Asked dr to continue using which he agreed. I asked dr if he has anyone he is seeing today that is taking vicođen around the clock? Dr said probably. I asked him before he refills or adjusts the dose to consider Butrans and initiate according to the conversion chart. Dr said ok.
PPLPMDL0020000001					

	Mayfield Heights	OH	44124	10/4/2013	Pain reduction insight, Butrans opioid naive trial, went brought each page, Butrans interrupted me & asked, is it covered. Yes, I will bring you & Kim formulary grids, & your Medco/ express scripts & Cigna Medicare D patients, can access Butrans at preferred tier. Ok, continued. Maria profile, for those patients like Maria & who have conditions causing them pain as discussed in our inclusion criteria, will you consider initiating Butrans? Yes, I've used other transdermal patches previously. Great. Remember the 15 & 20 mcg hr are titration doses, not initiation doses. For patients on 80 mg of morphine or equivalent, that's your controlled release OxyContin patient. What has your experience been with branded OxyContin. I have a few patients on OxyContin. So you're comfortable initiating? Yes, I'd like you to consider for cancer pain patients like Joan here. START principles to assist you with conversion & titration. Please note updates to FPI section 9.2, inclusion of abuse deterrent studies. Had to get back to patients. Went over all the above with medical assistant Kim, told her I'd bring in trial, savings cards. Left her with managed care grid (med d) Butrans need to BRING in COMMERCIAL FORMULARY GRID) also detailed Intermezzo. They have only a handful or less of CARESOURCE patients, so Intermezzo not accessible to majority of Lunch, dr v never comes back, asked her ma if she would ask dr to stop back & she did! Controlled release OxyContin, CII branded with q 12 h dosing, showed her all 7 doses. Consider using in cancer pain patients. She will consider. Butrans is new to her. Pain reduction insight, BUP 3024. Went through each page of study, the 4.6 pain reduction score was impressive to her. Discussed proper patient selection, titration & dosing. Used dosing slider. 15 mcg her new dose should be avail at pharmacies in a few weeks. I'd like you to consider for a patient like Maria. She says she will look over my info & will consider. Next time, I'd like to share efficacy & safety data from our opioid experienced trial. She thanked me for info& had to get back to patients.
PPLPMDL0020000001	Mayfield Heights	OH	44124	10/4/2013	Dr told me that he went to prescribe Butrans the other day but couldn't find a copy card. I told him I know where they are and showed him. Dr said he kept the patient on vicoden but decreased the amount of pills per day. Dr said patient will be coming back for follow up appointment in a couple of weeks and will start Butrans. I reviewed the dosing, titration, insurance and patient type profiles. Reviewed the inclusion and exclusion criteria for Butrans and dr said he will continue to find the right patients.
PPLPMDL0020000001	Lyndhurst	OH	44121	10/4/2013	Spoke with tech first, then pharmacists Lisa & Megan. New 15 mcg. Hr dose of Butrans. They have only a few patients on Butrans so Lisa says they'll wait. Stop back in, talk to pharm mgr Mike. Left Butrans pharmacists guide, NDC & FPI brochure. OxyContin, left pharmacists guide, q 12 h recommend dosing, 7 doses.
PPLPMDL0020000001	Cleveland	OH	44113	10/4/2013	Reviewed Butrans MedCo/ESI formulary status for those Tramadol failures requiring around the clock pain therapy, Dr. said he will consider. OxyContin Q12h flexible dosing strengths along with broad formulary coverage. Confirmed appt
PPLPMDL0020000001	Cleveland	OH	44113	10/4/2013	Reviewed OxyContin Q12h flexible dosing strengths along with Broad formulary coverage, Also Butrans Medco/ESI formulary status for those patient requiring around the clock pain therapy. Said OK
PPLPMDL0020000001	Cleveland	OH	44113	10/4/2013	Talked with Dr. VanAukens nurse (Barb) review OxyContin Q12h flexible dosing strengths along with Butrans MedCo/ESI formulary status, said she will relay info and to stop back next week for more time
PPLPMDL0020000001	Fairview Park	OH	44126	10/7/2013	Informed the office manager about the Butrans 7 day transdermal patch and gave her the managed care updates for bithoxycontin and Butrans. Left my card and the opioid naive study behind for the dr to review.
PPLPMDL0020000001	Berea	OH	44017	10/7/2013	One thing to point out today (opener). Showed the Maria patient profile- when I identify a NSAID patient w/ a pain needing a change of medication. This is how you start them...5mcg and u have to wait a min of 3 days before titration to the 10mcg. Asked if he had any questions. answer no. How many butrans savings cards will u be needing this week? Dr said he didn't know and to leave them in the cabinet.
PPLPMDL0020000001	Berea	OH	44017	10/7/2013	Saw dr. One point reminder- with in your current patients...those with atc pain on NSAIDs that need something different for their control, you have Butrans 5mcg. Gave him Maria profiler and said this was a good example of a patient type, and it shows you how they start on the 5mcg. Does this sound reasonable? Reminded him he said he would find 2 patients to get Butrans experience. Dr said got it.
PPLPMDL0020000001	akron	OH	44333	10/7/2013	Told dr that he needs to start using more Butrans, even if they are in Manor Care. Dr said he probably will start using them first. I asked why and he told me that those patients tend to be more chronic and thinks a patch for 1 week would be something they would like. I told dr that he must have patients meeting the Butrans indication in his practice on tramadol around the clock and to trial it there as well. Dr said ok.
PPLPMDL0020000001	Cleveland	OH	44195	10/7/2013	Visited Dept. obtained tentative program date with fellows (Ankit/Kathy) Verified new NP Carrie Knaus. Info for fellows and requested appt. with staff clinicians
PPLPMDL0020000001	Cleveland	OH	44195	10/7/2013	Visited Anes./Pain dept
PPLPMDL0020000001	Fairlawn	OH	44333	10/7/2013	Spoke to pharmacists Gilbert and Jessica about McKesson getting Butrans 15mcg in their warehouse? Gilbert looked at their stocking and said they have received qty 20 of the Butrans 15mcg. I asked if he is ordering it to have in stock and he said he went until he sees a Rx and will have it next day. I told him that there will be a demand for it in his area and to order. Gilbert said he is going to wait.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	10/7/2013	Spoke with Glenn the staff pharmacist for the pain center and discussed the Butrans 15mcg dose. Glenn said he knows they will use it. I told him I have gone to almost all the pharmacies in the area to discuss it with them as well. I asked Glenn about getting Butrans on formulary in the hospital and how I can get that done. Glenn said because it's an ER opioid it wouldn't make sense to have on formulary. Glenn said drs will Rx short acting opioids for in patients. Glenn said that if a dr needs to Rx it for the patient in the hospital they can get it at New Choice pharmacy.
PPLPMDL0020000001	Akron	OH	44308	10/7/2013	Per request from Summacare (and submitted via the Regional Account Executive), emailed a copy of the FACETS modules "Science and Nature of Pain" and "Communicating ..." for review and comment. If approved, MSL will present as a non-accredited program for case managers.
PPLPMDL0020000001	Akron	OH	44308	10/7/2013	Per request from Regional Account Executive, emailed a copy of the Tele-Assessment flyer to Olivia Bitter at Summacare.
PPLPMDL0020000001	Cleveland	OH	44195	10/7/2013	Butrans overview, 7 day transdermal, for around the clock therapy. Co-chief with Ankit- Obtained Nov 12th for program date
PPLPMDL0020000001	Akron	OH	44333	10/7/2013	Quick message over front counter and told her to continue writing Butrans for her patients needing a dose adjustment on tramadol. I asked her if she has patients on tramadol around the clock she refills for? She said yes.
PPLPMDL0020000001	Mayfield Heights	OH	44124	10/7/2013	Lots of them. I told her to consider Butrans where appropriate.
PPLPMDL0020000001	Mayfield Heights	OH	44124	10/7/2013	Short staffed, couldn't check stocking. Spoke with tech & pharm mgr Shirisha in today. Introduced Butrans 15 mcg hr to them, left Butrans pharmacy guide & NDC FPI brochure.
PPLPMDL0020000001	Cleveland	OH	44122	10/7/2013	I placed a call to staff Development/Cordinator, Francine Young to confirm the pain in service scheduled for the STNA's tomorrow 10/08 at 2 PM. There was no answer, I left a message on her voicemail.
PPLPMDL0020000001	Akron	OH	44333	10/7/2013	Dr asked me if there are oxy on tin copay cards? I told him there are and i have reviewed them with him in the past. Gave dr the cards and reviewed again. I asked him where he is primarily using OxyContin? Dr told me that his goal is to get as many patients on ER products sooner. Dr said he likes ocycontin because it works, hasn't had too many issues with insurance and likes the q12. I showed him the conversions and requested him to use it for patients on lower doses of Percocet. Dr agreed. Butrans review of patient types and titration.
PPLPMDL0020000001	South Euclid	OH	44121	10/7/2013	Met with med asst Tracy. Dr too behind to come up front. Left Intermezzo patient profiles, with Intermezzo you can match MOTN insomnia sleep patterns due to As needed dosing indication. Butrans, 1 x week CIII pain patch, can be called in with refills. New 15 mcg hr titration dose available soon in pharmacy. Left BUP 3024, pain reduction score, would like dr to look over so I can discuss w her next visit. OxyContin, left conversion titration guide.
PPLPMDL0020000001	South Euclid	OH	44121	10/7/2013	Met with Kathy first, went over info I was leaving, all 3 product indications. Dr Flagg too busy to cone up to window. Met next with med asst Jen K. Updated OxyContin med d & commercial access. Conversion/ titration guide, START principles. Butrans, 1 x week CIII pain patch. New titration dose of 15 mcg hr will be avail soon in pharmacies. Will update them when I see them at lunch in Concord. Left dosing slider. Intermezzo, for MOTN insomnia patients, can match sleep patterns due to As needed dosing indication. Left patient profiles piece.
PPLPMDL0020000001	Olmsted Falls	OH	44138	10/7/2013	Follow up from last time- said last time I was in We spoke about those uncontrolled NSAID patients, making Butrans their first opioid w atc pain. Have u had any opportunities to give out the coupons? He said he wrote Butrans...I said how's the patient? He said he will see them in a month. Review the titration and savings program.
PPLPMDL0020000001	University Heights	OH	44121	10/7/2013	Lunch, OxyContin cancer pain patient profile, Joan, focused on Joan being initiated on OxyContin 15 mg q 12 h, consider START principles for cancer pain & non cancer pain patients. Went over START principles & all 7 doses. From FPI Reviewed that average dose of controlled release OxyContin in cancer pain is 105 mg. Consider this. For example dr price if you hypothetically started a cancer pain patient pain at 60 mg, q 12 h, that's 120 mg in a 24 hour period. So you may want to look at lower doses, and as START principles say, continue to re assess & individualize the dose, with a titration possible every 1-2 days based on steady state. I'd like to transition & share some data from recently published medical literature: pain reduction insight. I'm sharing thx because it relates to pain reduction scores I'm going to Share for Butrans. Went over BUP 3024.shared each page of study. Dr agreed the 4.6 reduction was important. After reviewing this data, is there anything holding you back from writing? No. Went over how to write, 1 x week patch ( he didn't remember Butrans is worn for 7 days) 4 patches a month. He says he will initiate in the nursing home, he says patients want their pills. A patch is a hard sell. Well dr price, you must be confident & you must control the patients therapy. Nursing home great place to start, also consider for patients who have trouble swallowing pills or allergic to aspirin, ok, he responded.
PPLPMDL0020000001	South Euclid	OH	44121	10/7/2013	Spoke with both nurses Ann & Rita. Able to match MOTN insomnia patient sleep patterns with Intermezzo. Left newest patient profile booklets for both Drs Tomm & Locke. Let nurses know Butrans has new 15 mcg hr titration dose, which will ship soon to area pharmacist. Left new dosing sliders & initiation titration guide for each dr. OxyContin controlled release, CII, START principles, left conversion titration guide both Drs.
PPLPMDL0020000001	Mayfield Heights	OH	44124	10/7/2013	Met with pharm mgr PharmD Jessica Brick. Introduced new Butrans 15 mcg hr. They only have a few customers on Butrans, she cannot justify pre ordering even 1 box. left Butrans pharmacists guide, NDC & FPI. I responded, well when you get your first 15 mcg hr Rx, now you have NDC code readily avail. Left OxyContinpharmacists guide, discussed resources avail such as RX patrol. Q 12 h dosing, 7 doses with 25-50 % increase between doses. Intermezzo, left pharmacists guide. Sublingual tablet, As needed dosing indication, for MOTN awakening insomnia patients.
PPLPMDL0020000001	Cleveland	OH	44195	10/7/2013	Reviewed OxyContin Q12h flexible dosing strengths along with broad ins. coverage, Butrans for those patients requiring around the clock analgesic. Recvd date from Kathy- Co-chief for dinner program. Ankit will finishing up Fellowship in Dec
PPLPMDL0020000001	Rocky River	OH	44116	10/7/2013	Discussed Butrans and the stocking of the 15mcg. Discussed 7 day transdermal patch and abuse potential and dosages. Discussed w the tech where to place patch and how to discard the patch.
PPLPMDL0020000001	Garfield Hts	OH	44125	10/7/2013	Confirmed upcoming appt. Intro. new Butrans 15mcg/hr dose, Reminded of MedCo/ESI formulary status and OxyContin Q12h dosing with Broad Formulary coverage
PPLPMDL0020000001	Garfield Hts	OH	44125	10/7/2013	Reviewed OxyContin Q12h flexible dosing with broad formulary coverage. Butrans- 7 day transdermal, when continuous around the clock opioid analgesic is needed. Dr. said he will consider
PPLPMDL0020000001	Akron	OH	44333	10/7/2013	I asked dr if I can have a minute with him to discuss new information about Butrans. Dr said not really and that he is needing to cancel my lunch scheduled with him this Friday because he will be out of town. I told him I need a minute then since he cancelled my lunch. Dr said he doesn't have time but I told him anyway that he needs to be using more Butrans for those patients he is continuing to refill on tramadol and vicoden when they need a dose adjustment. Dr said he is doing that. I told him there has to be more opportunity! Dr said ok and he promises he will speak with me two weeks from today.
PPLPMDL0020000001	East Cleveland	OH	44112	10/7/2013	Review with Latoya-OxyContin Q12h flexible dosing strengths along with Butrans for those patients requiring around the clock analgesia. said Brain-NP on vacation this week, but will see if I can get appt with him
PPLPMDL0020000001	Mayfield Heights	OH	44124	10/7/2013	Denise Guinto, nurse, office coordinator asked dr yap if he could speak with me, he apologized, he had 2 patients waiting, Mon not good day. Left OxyContin PBM piece & formulary grids. Left new Butrans piece, all 4 doses, new sliding doser. Left same for Dr Dewis ( in Mondays) dr Laham ( day off Mon) dr Leizman, CNP Gina Savoca (WED Sa-12n). Went over Butrans updates Medicare D with Denise. Made her aware of new 15 mcg hr Butrans dose, avail pharmacies soon, a week or so, Denise stated: that's great, that dose is needed. She says also, NO SAMPLING POLICY due to Cleve Clinic, Dr Laham is only HCP in practice that takes OTC samples. Denise says TUES or WED best days to see HCP.
PPLPMDL0020000001	Westlake	OH	44145	10/8/2013	Spoke to rn about Butrans. Review of efficacy data from the naive study and reviewed the 30 percent t I sight asked if she felt that sounded like good results? She said yes. Discussed appropriate patient types like Maria. And how to start and where to apply the patch. Rn asked about coverage. Discussed both products OxyContin and Butrans coverage.
PPLPMDL0020000001	Uniontown	OH	44685	10/8/2013	Spoke with Rachel the receptionist. Found out the dr is now part of the VPA which is visiting physicians association. Dr has no office hours. Left OxyContin and Butrans information.
PPLPMDL0020000001	Uniontown	OH	44685	10/8/2013	Dr is part of the visiting physicians association. Left information with Rachel the receptionist for OxyContin and Butrans.
PPLPMDL0020000001	Westlake	OH	44145	10/8/2013	Hallway discussion. One take away- 30 percent insight. Butrans has shown 7.2 to 2.6 pain reduction. So why wouldn't you use Butrans? He smiled and walked away.
PPLPMDL0020000001	Uniontown	OH	44685	10/8/2013	Quick call with dr because she said she was already behind. Told her about patients appropriate for OxyContin. Reviewed Maggie quickly and asked her if it makes sense? Dr said yes. Reviewed Butrans patient types and how she may have patients appropriate for the product. Dr said ok. Nothing else learned.
PPLPMDL0020000001	Westlake	OH	44145	10/8/2013	Spoke to Claudia about Butrans. She remembered some of my talking points from last time...reviewed w her the 7 day patch and it was opioid schedule 3 that could be refilled. Left managed care cards behind.

PPLPMDL0020000001	Beachwood	OH	44122	10/8/2013	I made a drop-in visit to meet w/ Nurse Educator, Merri Bunge to talk w/ her about re-scheduling the pain management in-service. I spoke w/ the receptionist, Caroli, who informed me that an appointment is needed. I left Purdue Nurse educator pamphlet along w/ my BC.
PPLPMDL0020000001	Cleveland	OH	44109	10/8/2013	Visited PMR and Internal Med. Left info and requested appt
	Uniontown	OH	44685	10/8/2013	Spoke with Kim the pharmacist about all products. Introduced the new 15mcg dose and asked her if she would find out if her wholesaler has it in stock. Kim said that they now use Cardinal Health and they do have it. I asked if she would order it and she said no. She said she will wait to see a Rx because they now only have two patients and they are both on the 10mcg. Discussed the OxyContin dosing and asked her how much they see. She said they don't dispense much but she knows that Davies does in north canton. Kim told me about the new OAHRS update where it will show them how much total daily dose of morphing equivalent the patient is taking so prior to filling a narcotic they already how much narcotic the patient is taking. Intermezzo dosing and indication. Kim said she has not seen any.
PPLPMDL0020000001	Independence	OH	44131	10/8/2013	Gave Dr. hallway detail and reminders Butrans after tramadol. Reminder Dr. of OxyContin conversion from Percocet. Discussed patient with middle the night awakenings and Intermezzo.
PPLPMDL0020000001	Westlake	OH	44145	10/8/2013	Spoke to rn about Butrans. Asked her if she new what Butrans was and she said no. Reviewed indication, scheduled and starting dose and asked her if the dr ever writes tramadol? She said yes. I explained that Tramadol is an opioid and can be taken prn for patients that may require atc pain therapy. I said Butrans is schedule 3, refill opioid that is a different delivery system than the other schedule 3's and I explained the 4 patches a month single entity. She asked managed care, and I told her about the commercial savings program.
PPLPMDL0020000001	Westlake	OH	44145	10/8/2013	Spike to the ma and she said dr writes very little opioid for chronic pain. I asked how he treats his osteoarthritis patients? She did not no the answer. Left her Maria profile to review and give to the doctor
PPLPMDL0020000001	Akron	OH	44312	10/8/2013	Good conversation with dr about all products. Led with the insight about hydrocodone and asked him his thoughts on the 41%? Dr said that he doesn't see too much in his practice with that because he said he moves to ER opioids after his patients need more than 2-3 IR opioids. Dr said he can understand though how it happens because its easier to refill the IR and cost is much cheaper. Hit all key selling messages for Butrans and OxyContin. I asked dr to tell me about his patients on Butrans. Dr never gave me any specifics but said that the patients he has used it on Butrans is working great. Dr asked about the incidence of constipation because dr said he hears a lot about that coming from the short acting opioids. I showed him the AE profile from the main visaid and allowed him to read it. Dr said it answered his questions. I asked dr if he will use it more for his tramadol and vicoden patients needing a dose adjustment? Dr agreed he would. Reviewed copy cards and insurance for Butrans and OxyContin. Reviewed OxyContin conversion and titration guide. Intermezzo dosing and indication.
PPLPMDL0020000001	Cleveland	OH	44109	10/8/2013	Visited PMR- Requested appt with Vanessa- Harris-Admin, New doc A. Morton and NP Angela Douglas. Left Butrans Kathy profile, Dosing/Titration
PPLPMDL0020000001	Highland Heights	OH	44143	10/8/2013	Met with office coordinator first. Updated her on MedicareD preferred status for Butrans. Then we went over med & commercial grid for OxyContin. Reminded her commercial pay patients will pay first \$25 out of pocket, with savings card for branded, controlled release OxyContin. Dr Salama, I had to detail across window to hallway: 2 quick things: Start principles in OxyContin conversion titration guide to assist you; Butrans now preferred Medicare Part D Medco, Express Scripts, Cigna. We dose out in a few weeks. He then waved good bye & entered next room.<font color=blue><b>CHUDAKOB's query on 10/17/2013</b></font>jenny, why is he an OxyContin core?<font color=green><b>BALJIE's response on 10/18/2013</b></font>He should not be an OxyContin core. Thanks for pointing that out. Since I share him with Marcia & she already had him marked as a Butrans core, I was trying to fit him in to call list. I swapped him with another HCP, and for now he's marked as Butrans super core. Bottom line is, he doesn't want to discuss OxyContin & has stated he's not starting any new patients on OxyContin, and I'm going o respect his wishes, and focus majority of detailing on Butrans.<font color=blue><b>CHUDAKOB added notes on 10/21/2013</b></font>Good idea.
PPLPMDL0020000001	Cleveland	OH	44114	10/8/2013	Butrans reminder for those patients requiring around the clock analgesia. Initiatory/Titration
PPLPMDL0020000001	Akron	OH	44320	10/8/2013	Some with dr about prescribing Butrans for those patients of hers like nancy who need a dose adjustment with vicoden. I asked dr if she has patients that she refills on vicoden each month? Dr said she does. I asked her to find more opportunities like Nancy's where Butrans would be appropriate? Dr said she will. Discussed OxyContin dosing and conversions from Percocet. I asked her to switch those patients that would be appropriate for the q12h. Intermezzo indication and dosing and asked her to find one patient. T trial on that meets e indication. Spoke about Senokots and reviewed the active ingredients.
PPLPMDL0020000001	Beachwood	OH	44122	10/8/2013	I made a drop in visit to speak with director of nursing Susan LoDolce. I was informed by the receptionist, Lisa that Susan no longer work there. They currently have an acting DON, Michelle from corporate. I left the Purdue nurse educator pamphlet along with my business card
PPLPMDL0020000001	Parma	OH	44129	10/8/2013	Dr. said he knew about OxyContin and he prescribes the generic oxycodone all the time. I explained to him that there wasn't a generic and he said he uses the immediate release and I asked if he meant with Acetaminophen and he said no plain. I told him I understood what he was talking about but that's immediate release oxycodone and that I'm promoting OxyContin for extended release which his patients that are chronic would probably use. Dr. said he uses it Duragesic patch for his chronic patients because he he likes the ease-of-use. I showed the doctor the Butrans demo and asked him if he was familiar with Butrans for his chronic pain patients. He was not familiar and I reviewed the clinical trials the 30% reduction inside the 7.22 2.6 pain reduction in the open label trials and the overall improvement. I explained to him the positioning of Butrans for his opioid experience patients starting at the 10. I discussed using after tramadol and before Vicodin or Percocet or for his low-dose Vicodin or Percocet patients. Dr. was interested and I explained the vouchers and savings cards to he and his staff. Reviewed intermezzo indication and limitation of use and dosing administration.
PPLPMDL0020000001	Parma	OH	44129	10/8/2013	Gave Dr. hydrocodone insight and told Him I did not know his treatment algorithm and he said he has to start people from scratch on pain meds because by the time he sees them they're never on the right treatment. He said he does not use short acting that his patients need long-acting and he uses OxyContin. I review the savings cards for OxyContin also flexible dosing an asset was he aware that there is a 15 and a 30 and he said he thought there was. Dr. expressed interest in Butrans and I reviewed the clinical trials along with how to apply Butrans and the savings cards. Dr. said he could see a place in his practice for Butrans and I Asked him about the pain reduction from the clinical trials and he said that would be a good achievement. Review the intermezzo patient including indication limitation of use and dosing administration.<font color=blue><b>CHUDAKOB added notes on 10/17/2013</b></font>Looks like some progress was made here. Nice job!
PPLPMDL0020000001	Westlake	OH	44145	10/8/2013	Discussed stocking 15mcg. pharmacist was too busy for a full discussion. Gave him the naive study and pointed out some key points such as dosages used and pain scores
PPLPMDL0020000001	Parma	OH	44129	10/8/2013	Spoke with Nadia and she checked the system again and said this time she could order Butrans and she committed to order in one box of the 15. Reviewed with Keith OxyContin flexible dosing. Spoke with the other pharmacist about intermezzo indication limitation of use and dosing administration.
PPLPMDL0020000001	Parma	OH	44134	10/8/2013	Dr. Asked was there a generic for OxyContin and I reminded him again that there is not and he said that was good. I asked was there a particular reason he's asking about a generic for OxyContin. He said that he heard that there was a change and I reviewed the abuse deterrent studies pointing out section 9.2 specifically and handed him the folder. I clarified if this is what he was referring to and he said yes. I reminded Dr. the Butrans patient Profile of Nancy And Dr. said he uses Butrans for all different patients he said he doesn't go above 40 mg of OxyContin and if he needs to go about that then he immediately switches them to Butrans because he feels they Might not be trustworthy. He said he gives Butrans to any of his patients that he thinks might not be Trustworthy.<font color=blue><b>CHUDAKOB's query on 10/17/2013</b></font>Marcia, why do you think he is giving Butrans to patients he feels are not trustworthy?<font color=green><b>KENNOMA's response on 10/18/2013</b></font>He believes Butrans is more difficult to abuse.<font color=blue><b>CHUDAKOB's query on 10/21/2013</b></font>That is what I think as well. This is where you have to clarify with the physician on the abuse potential of Butrans. If he feels it is less abuseable we must correct this every time. Make sense?<font color=green><b>KENNOMA's response on 10/21/2013</b></font>This makes sense and I will clarify next time.<font color=blue><b>CHUDAKOB added notes on 10/28/2013</b></font>Ok. Thanks Marcia!
PPLPMDL0020000001	Parma	OH	44129	10/8/2013	Gave Dr. hydrocodone insight and told Him I did not know his treatment algorithm and he said he has to start people from scratch on pain meds because by the time he sees them they're never on the right treatment. He said he does not use short acting that his patients need long-acting and he uses OxyContin. I review the savings cards for OxyContin also flexible dosing an asset was he aware that there is a 15 and a 30 and he said he thought there was. Dr. expressed interest in Butrans and I reviewed the clinical trials along with how to apply Butrans and the savings cards. Dr. said he could see a place in his practice for Butrans and I Asked him about the pain reduction from the clinical trials and he said that would be a good achievement. Review the intermezzo patient including indication limitation of use and dosing administration.<font color=blue><b>CHUDAKOB's query on 10/17/2013</b></font>Marcia, was your conversation with Dr. Hines EXACTLY the same as Dr. Cowan? please do not cut and paste, but make sure each physician has their own call note. I realize he may have been in on the same conversation, but something must have been different to individualize it?<font color=green><b>KENNOMA's response on 10/18/2013</b></font>This was a large lunch and people were interrupting. I do not make a habit up duplicating call notes but with them being in the room at the same time and me covering the same information I thought it was acceptable. My call note would say that the doctors agreed with each others point because Hines only nodded.<font color=blue><b>CHUDAKOB closed the query on 10/28/2013</b></font>
PPLPMDL0020000001	Cleveland	OH	44113	10/8/2013	Discussed Butrans and the 30% reduction in pain intensity. Dr. said it was significant/meaningful will consider. Asked for that 1 patient requiring around the clock analgesia. OxyContin Q12h with flexible dosing strengths.
PPLPMDL0020000001	Lyndhurst	OH	44124	10/8/2013	Intermezzo for MOTNA/dosing.
PPLPMDL0020000001	Mayfield Heights	OH	44124	10/8/2013	I made a drop in visit to speak with Diana Howard in staff development. I spoke with the receptionist who called her office , there was no answer. I left a Purdue nurse educator pamphlet along with my business card... I asked if there were any nurse practitioners on staff that might be available to speak with me, the receptionist informed me that an appointment is necessary.
PPLPMDL0020000001	Akron	OH	44312	10/8/2013	I made a drop in visit to speak with Marianne in staff development. I was informed by the receptionist , Teresa that Marianne no longer is employed there . when I asked who is handling education ? Theresa replied , "I have no idea , I can leave information for our director of nursing Sandra Brown . " A Purdue nurse educator pamphlet and my business card was left behind.
PPLPMDL0020000001	Cleveland	OH	44113	10/8/2013	Good conversation about Butrans and OxyContin. Led with insight about hydrocodone and asked him about the statistic. Dr said he knows that drs must decide earlier who the patients are that need an ER opioid and those that do not. Dr said he decides pretty early on usually after 2-4 pills that they might need an ER opioid. Gave all key selling messages about Butrans and OxyContin. Dr said he will find a patient for Butrans and said he will not prescribe much if any schedule 2 me finches because he believes they are reserved for the specialists.
PPLPMDL0020000001	Cleveland	OH	44113	10/8/2013	Quick Butrans reminder for those Tramadol failures requiring around the clock therapy, and Intermezzo for MOTNA/dosing
PPLPMDL0020000001	Beachwood	OH	44122	10/8/2013	Dr. said he changes hours and he is moving into a new office location In the same building. Dr. is doing a program for Butrans in Cincinnati and I asked Him what does he feels the most important thing he's going to say to get doctors to understand when and how to use Butrans. Dr. mention the clinical trials and we discuss the pain improvement scores. Reviewed flexible dosing of OxyContin and conversion from Percocet OxyContin
PPLPMDL0020000001	Cleveland	OH	44113	10/8/2013	Quick OxyContin reminder, Q12h, flexible dosing along with broad formulary coverage.
PPLPMDL0020000001	Beachwood	OH	44122	10/8/2013	I made a drop in visit to speak with nurse educator, Cheryl Grim, to see about scheduling an in-service on pain management. I spoke with the receptionist, Michelle W. who informed me that Cheryl was not available, but advised me to call tomorrow to try to set up an appointment. I left a Purdue nurse educator pamphlet along with my business card
PPLPMDL0020000001	Cleveland	OH	44109	10/8/2013	Discussed Butrans 15mcg/hr dose presentation, Mana-RPh will stock-mainly forced shipment. OxyContin Q12h and Intermezzo for MOTNA-Dosing, said he sees Rx's from Raheja/Torres
PPLPMDL0020000001	Parma	OH	44129	10/8/2013	Spoke with Dr. about patients like Scott better on tramadol and reminded him that his last patient was a tramadol patient that he needed to change the dose. He said he remembered and I also reiterated that the managed-care situation is improved over what he first thought. Dr. agreed and he also asked about intermezzo managed-care Which I reviewed. Discussed OxyContin flexible dosing and conversion from Percocet to OxyContin
PPLPMDL0020000001	Akron	OH	44312	10/8/2013	Led with insight about hydrocodone and asked her opinion. Janet told me that she doesn't prescribe for too many opioids as a PA but sees how its become a problem getting patients to ER opioids sooner and recognizing patients appropriate for them. Gave all key selling messages for Butrans and OxyContin. I asked Janet if she has patients like Scott for Butrans? She said she does and will look into using it.
PPLPMDL0020000001	Cleveland	OH	44122	10/8/2013	I received a Phone call from Francine Young okaying the pain in-service for today. She stated, "I am not in that position anymore, Heather Gordon is the new staff development coordinator."An in-service on pain management was completed for the STN A's. 9 were in attendance. the barriers of pain assessment and the consequences of unrelieved pain were discussed as well as the STNA role in pain management : the team approach.A tremendous amount of positive feedback was received after the in-service.After the in- service , I was able to speak with Heather and introduce Purdue's Nurse educator program thoroughly. She was excited about about the program and utilizing it for future education. I also talked with her about setting up a Butrans luncheon with the NP's. She agreed to arrange .The constipation in-service for nurses and STN A's was confirmed for next Tuesday, October 15 at 1:30 and 2 PM With Heather.

PPLPMDL0020000001	Akron	OH	44313	10/9/2013	Dr asked me for more information on Butrans? I asked what he needed and he said he knows he needs to use it and wanted the conversion chart I discussed with him before. I showed him the guide from the main visaid and discussed appropriate patient types. Dr asked if patients can abuse it? I told him its an opioid and it can be misused and abused because it is an opioid. Dr asked to see the patch so I showed hi e demo patch and explained its design. Dr said ok and. That he is going to use. I told him that BWC is paying for it and about the Caresource pa. Reviewed insurance with Tina. I asked dr if he will continue finding how to use OxyContin earlier and take advantage of the dosing flexibility? Dr said he will review the conversion and titration guide.
	Parma	OH	44129	10/9/2013	Gave Dr. reminder of Butrans after tramadol since he thinks he needs more reminders. Reminded Dr. of pain reduction in opioid na rive trials from 7.2 to 2.6. Show Dr. the Percocet conversions to OxyContin and reiterated that these are appropriate patients that have been on for three months or longer and have chronic pain. Gave Dr. intermezzo indication and limitation of use and ask him if he thought of patients for intermezzo and he said no. Dr. said he will try to remember Butrans for the next time I come in
PPLPMDL0020000001	Parma	OH	44129	10/9/2013	Quick call while leaving Dr. Giugliano's office reminded Dr. of use of Butrans after tramadol and the good coverage that we have on Butrans and conversion from Percocet OxyContin
PPLPMDL0020000001	Beachwood	OH	44122	10/9/2013	I placed a follow-up phone call to acting DON, Michelle, to introduce Purdue's NE program and discuss educational opportunities. N/A I left a msg. on her voice mail
PPLPMDL0020000001	Euclid	OH	44117	10/9/2013	I placed a call to NP, Lizeal Malbairan at 440-709-6028, I rec'd a generic voice mail. I emailed DON, Kathy Nemenst to confirm
PPLPMDL0020000001	Cleveland	OH	44195	10/9/2013	MSL phone meeting with Donna Lach to provide update after on-site meeting last week with Dr. Dell. MSL informed Mrs. Lach that Dr. Dell will work with various pediatric specialty physicians to identify a PI for OTR3001.
PPLPMDL0020000001	Euclid	OH	44119	10/9/2013	Cardinal Health, has Butrans 15 mcg hr. I told Aaron (floating pharmacist) Kevin committed to pre ordering 1 box. Kevin out or a while, so, I asked Aaron to check availability at Cardinal. aaron ordered box 15 mcg hr while I was there as cardinal says in stock. They will get in 1 day. Kevin out temporarily, so I left Butrans pharmacist guide for Laurel ( pharmacist)
PPLPMDL0020000001	Cleveland	OH	44130	10/9/2013	Gave 30% reduction insight and stress reduction from 7.2 to 2.6 and asked Dr. to think about the clinical trials when he has patients that Need a dose adjustment for their tramadol. Discuss flexible dosing of OxyContin
PPLPMDL0020000001	Parma Heights	OH	44130	10/9/2013	I placed a phone call to D.O.N., Katherine Myers to schedule a meeting to introduce Purdue's Nurse Educator program. N/A I left a msg. on her voice-mail.
PPLPMDL0020000001	Lyndhurst	OH	44124	10/9/2013	I placed a phone call to Diana in the Staff Development to see about setting up an appt. to meet w/ her and introduce Purdue's Nurse Educator Program. N/A , I left a msg. on her voice-mail.
	Munroe Falls	OH	44262	10/9/2013	I asked dr if she would take a closer look at her patients on tramadol and viconden to see if they would be a candidate for Butrans? Dr said she would and knows she should be using it more because she does have many patients that she's sure Butrans could be a good choice. I told dr to do that peace. Told her to also take the extra minute before she refills a Percocet and see if they would be a candidate for oxycontin? Dr said she will. Reminded her about intermezzo dosing and indication.
PPLPMDL0020000001	Mayfield Heights	OH	44124	10/9/2013	I placed a call to director of nursing, Sandra Brown at 440-473-0090 to introduce Purdue's nurse educator program and discuss educational in-service opportunities. There was N/A, I left a msg. w/ the recpt. Theresa
	Beachwood	OH	44122	10/9/2013	I placed a phone call to Nurse Educator, Merri Bunge to talk w/ her about re-scheduling the pain management in-service. Meeri stated, " I have all outside in-services on hold until next year. We have taken on a project with 2 large Cleveland Hospitals (UH & CCF) and I have no time available. I asked her for the NP's information; Merri informed me that they have only 1 NP, David Bloch and to call back through the main phone number to be connected to him. I called the facilities main # and spoke w/ the recpt., Carol. she informed me that the NP does not have an office or direct line. She connected me to the medical secretary's office. N/A
PPLPMDL0020000001	Barberton	OH	44203	10/9/2013	Met dr briefly at lunch. Review of Butrans naive study, criteria, open label pain reduction. Scores and dosing. Also reviewed 7 day transdermal schedule 3 pain patch. Dr left to run errands
PPLPMDL0020000001	Fairlawn	OH	44333	10/9/2013	Dr waved to me as he was going into a room. He asked me what's going on with Butrans and I asked him to tell me! Dr said he has not prescribed but heard the in-service at Copley health center went well. I told him it did and we need more time to talk about how he's going to implement Butrans into his practice. I also told him to continue using OxyContin for his patients needing a dose adjustment on Percocet. Dr said ok.
PPLPMDL0020000001	Beachwood	OH	44122	10/9/2013	I placed a phone call to Cheryl Grim to talk w/ her about Purdue's Nurse Educator Program and educational in-service opportunities. N/A, I left a msg. on her voice mail
PPLPMDL0020000001	Euclid	OH	44119	10/9/2013	Met with Dana first. They use McKesson, asked her to check if McKesson has Butrans new 15 mcg hr dose, YES it's available. Pharmacist Dave says new Butrans 5 mcg hr patient in September. Dave will order a box of the 15 mcg hr left Dave pharmacists guide, NDC FPI brochure.
PPLPMDL0020000001	Akron	OH	44320	10/9/2013	Spoke to Jessica about Butrans 15mcg dose and asked if Cardinal has it in stock. She looked and said that it was not. Jessica said they should have it next week and that they just filled a 5mcg dose today. Left OxyContin information and dosing card.
PPLPMDL0020000001	Cleveland	OH	44115	10/9/2013	Visited Neuro Dept. Obtained Dr. Richardson info. Left OxyContin and Butrans Info. main office over at Warrensville
PPLPMDL0020000001	Cleveland	OH	44115	10/9/2013	Visited Spine/Ortho 6th floor ( Dr.Grubb, Collis,Shall, Kim, Blades) Physicians have various office sites, Broadview Hts.Akron. Inquired about appt./inservice opportunity
PPLPMDL0020000001	Cleveland	OH	44115	10/9/2013	Visited Neuro and Spine/Ortho floors, obtained info
PPLPMDL0020000001	Barberton	OH	44203	10/9/2013	Saw the the nurse today, introduced Butrans, she said she heard of it. Showed her the demo patch and reviewed placement with her and the indications. Left the nave study behind for the doctor to review.
PPLPMDL0020000001	Cleveland	OH	44106	10/9/2013	Quick Butrans reminder for those patients requiring around the clock analgesia. MedCo/ESI formulary status
PPLPMDL0020000001	Parma	OH	44129	10/9/2013	Quick window call rescheduling lunch and ask doctor about using Butrans after tramadol and before Vicodin Or Percocet. Rected 30% reduction in pain insight and reinforced pain reduction from clinical na rive trials from 7.2- 2.6. Cited the start principle specifically 25 to 50% increase over 1 to 2 days. Dr. said she initiated some new Butrans patients And I asked what did they present with and she said lower back pain.
	Cleveland	OH	44130	10/9/2013	Dr. said she will not write Percocet Vicodin or OxyContin. When I asked why she said that these are addicting drugs she won't be responsible for the patient and tell them to go see pain management. I reviewed Butrans and the clinical trials with the inclusion criteria And the pain reduction and asked her her thoughts. She said Butrans made sense but it's probably too expensive and I explained the saving cards. I reviewed intermezzo for patients suffering from middle of the night awakening and she said this is much too expensive and she will not write intermezzo. I asked which he uses instead for peace patients with sleep problems and she said Ambien was just fine. When I reviewed the indication and limitation of use she still said she saw no need for intermezzo and her practice. I said doctor what you're to what I hear you saying is that Butrans is the only product that I carry that you can see yourself writing And she said yes. I asked what type of patient with that be in she said a little old lady and I said the osteoarthritis patient or an patient that you know has a known pathology and You are comfortable treating you would initiate Butrans therapy for their chronic pain? She said yes and I said I would follow up to check on her osteoarthritis or spinal stenosis world really patient that might be falling on their around-the-clock location and I told her I just wanted to confirm again. Linda said she is tried to write a prescription of intermezzo And I reviewed the care source criteria for her.
PPLPMDL0020000001	Parma	OH	44129	10/9/2013	Spoke with Linda about Butrans initiation and titration and review the tramadol patient. Linda asked about the Vicodin and Percocet patient and I showed the Nancy profile. Linda said that no OxyContin is written in this location and I told her I just wanted to confirm again. Linda said she is tried to write a prescription of intermezzo And I reviewed the care source criteria for her.
PPLPMDL0020000001	Barberton	OH	44203	10/9/2013	Lunch. Dr had no experience w Butrans and was not familiar with it. Discussed naive study and safety and efficacy data, dr said he can see this being used in the nursing home patients and asked me about coverage. Reviewed the coverage. Dr said he typically uses Tramadol after NSAID failure because he feels its less abusable than other opioids. Review schedule 3 information and if he would be open to writing Butrans after tramadol? Dr said he would try it and we reviewed dosing and dr asked about steady state, which I addressed as 3 days. And also reviewed titration a min if 3 days. Dr asked about irritation of the patch and we viewed the chart if visual aid, dr said it wasn't bad. Dr also asked about where to place e patch, reviewed the 4 spots. Discussed OxyContin, dr said he doesn't write it when asked if he writes Percocet and he said yes, I asked what point would they be an extended release candidate. Dr said he usually sleeps them prn and will supplement for break thru with NSAIDs. Reviewed the conversion. Discussed intermezzo, dr does not write it. Dr saw a fit for the indication but he said he was concerned that his patie ts wouldn't meet the criteria to get it and that managed care would be Coe a problem. Discussed commercial savings program.
PPLPMDL0020000001	Parma	OH	44129	10/9/2013	Window call reminder of Butrans savings cards. Discuss flexible dosing of OxyContin on the titration card
PPLPMDL0020000001	Copley	OH	44321	10/9/2013	I asked dr that I'm guessing he has already seen patients coming in on tramadol or viconden around the clock? Dr said yes he already has and figures many more to come. I told dr that when a dose adjustment is necessary that he needs to consider Butrans. I explained the dosing, titration, conversions and patient profiles. Dr asked about the schedule and I told him its a schedule 3 which he said was good. Dr asked how long the patient keeps on and I told him its the only schedule 3 ER opioid transdermal system on the market. Dr said he will find a patient for it.
PPLPMDL0020000001	Cleveland	OH	44106	10/9/2013	Reviewed OxyContin START principles, (Q12h flexible dosing and formulary coverage) Went over Butrans Initiation/Titration along with Medco/ESI formulary status-<b>color=blue><b>CHUDAKOB's query on 10/17/2013</b></font>Mark, your call note gives a brief description of what you did on the call. Was there a discussion that took place? If so what was it? Did you learn anything on the call? If so what was it? These ate the type of information that should be in a call note in addition to what you presented.<font color=green><b>GUTKOMA's response on 10/19/2013</b></font><b></b></font>Ok.<font color=blue><b>CHUDAKOB's query on 10/21/2013</b></font>Ok.<font color=blue><b>CHUDAKOB added notes on 10/22/2013</b></font>Ok. Thanks
PPLPMDL0020000001	Cleveland	OH	44106	10/9/2013	Reviewed OxyContin Q12h flexible dosing strengths and Butrans 15mcg/hr, will stock when RX is prescribed
PPLPMDL0020000001	Cleveland	OH	44130	10/9/2013	Asked about the stocking of the 15 for Butrans and pharmacist said they will order when it comes then I asked if the text could check the inventory status or if it was available for them to order and they said they would do it a little later and to check back because they were too busy now. Quickly reviewed start principles of OxyContin flexible dosing. Gave intermezzo reminder for patients with middle the night awakenings and ask them to pay attention to dosing administration for gender specific dosing.
PPLPMDL0020000001	Cleveland	OH	44127	10/9/2013	Quick Butrans reminder for those Tramadol failures requiring around the clock analgesia, Said she will consider<font color=blue><b>CHUDAKOB's query on 10/17/2013</b></font>is this Dr. really an OBG?<font color=green><b>GUTKOMA's response on 10/19/2013</b></font><b></b></font>I believe she was trained as a OB/GYN but presently practices a Family practice clinic<font color=blue><b>CHUDAKOB's query on 10/21/2013</b></font>Ok.<font color=blue><b>CHUDAKOB added notes on 10/22/2013</b></font>Ok. Thanks
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	10/9/2013	Liz in the office told me that Dr wanted to prescribe OxyContin 20mg for a new patient today who apparently had Aetna Medicare D prescription coverage however the patient was told that she couldn't get it. The patient was told and confirmed by Liz that Aetna would not cover OxyContin and was told that she had to fail 4 other opioids prior to being approved for OxyContin. Liz called Aetna and worked it out that the patient could get OxyContin through 2014 after only having history of 2 of the 4 medicines required. Spoke with dr about it and he was pleased because he did not want to have to prescribe ER morphine. Gave dr and Liz current insurance coverage grids for Medicare D and commercial for OxyContin.
	Barberton	OH	44203	10/9/2013	Discussed oxycontin, dr said he does write that product any more. I asked if he wrote any schedule 2s and dr said yes percocet mostly in his nursing home patients. I said when a patient starts taking say 3 or 4 a day would u then move to a product like OxyContin?. Dr said he may refer out at that point. Dr said he wrote Butrans recently for a patient, I asked what mcg and he said he did not know nor did he remember what doses were available. It was for a nursing home patient he said that failed various opioids and we on Medicare part d. Dr cook asked dr what he thought of it and dr plus koto said its the oky thing that has worked for the patient. He as said the staff was happy about it because it was ny 4patches a day and was easily for the caregivers to give to the patients. Dr cook said that was a great idea and then dr asked me to review the mcg doses. We discussed why does he not write extended release products for patients that need at pain control. And the dr said he didn't have a good answer. We spoke about the Maria patient and I asked him if he saw that...and he said yes. I said how comfortable are u at this point using Butrans here. He said he was. I asked why not be their first opioid for atc pain control? Dr said he had no reason not to use it first, but it was more out of habit that he doesn't we reviewed the Spoke with dr as she was coming into the office for the day. Dr told me that she is having success with Butrans however said she is having itching with some patients while on Butrans. I asked dr if she has discontinued Butrans for those patients and she said no. I asked her what she plans to do and she said she would probably provide something to help manage the itching. I told her to continue focusing on the tramadol and viconden patients who need dose adjustments or ask for an alternative form of analgesia. I reminded dr of the insurance coverage and Caresource pa. Dr said thanks.
PPLPMDL0020000001	Cleveland	OH	44130	10/10/2013	Asked dr his thoughts on the hydrocodone insight and he said yes. Reviewed Butrans reduction in pain from 7.2 to 2.6 and he said yes. Left dr with conversion brochures for OxyContin.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	10/10/2013	I talked about the insight about hydrocodone which led into a short discussion about the start principles. Dr said he remembers them from before and agrees with it. I asked him if he has patients on Percocet around the clock and have been on it for 3+ months? Dr said he probably does. I showed him the conversion guide in the main visaid and told him to switch those patients. Left him with Butrans information.



	Cuyahoga Falls	OH	44223	10/10/2013	Spoke with Melissa one of the pharmacist about all products. I introduced the new Butrans 15mcg dose and asked if she Wu,d check with her wholesaler McKesson if they have it in stock? She leered and said they have a qty of 4 on hand. She said that they have patients on the 5 and 10mcg doses and they all seem to like it. Told her about the OxyContin dosing and asked if she is seeing filling of new prescriptions? She said yes but maybe on 5% of the fills are new. Rest are refills and sees a lot of the 10, 20 and 40mg doses. Told her about intermezzo and asked if she has filled any recently? She said none recently but has filled them for Higley in the past.
PPLPMDL0020000001	Parma	OH	44129	10/10/2013	Spoke with Myra about adverse event reported below.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	10/10/2013	Dr came to window and I told her about how Butrans would be appropriate for those patients of hers that need a dose adjustment on tramadol. I asked her if she has any patients having that description? Dr said she is sure she does and things have been very good with it lately. I asked dr to continue prescribing. Nothing else learned.
PPLPMDL0020000001	Westlake	OH	44145	10/10/2013	Met we the ma, dr is on medical leave until further notice. Dr Debora's is taking over her patients until she returns. Added dr into system to be verified. Dr is in the office twice a week on mon and we'd full days. Also goes to fair hill on the east side she said. Dr is out of office u Tim the 21st of October on vacation.
PPLPMDL0020000001	Beachwood	OH	44122	10/10/2013	Reviewed OxyContin conversion from from Percocet. Discussed Butrans after tramadol leading with insight of 30% reduction in pain. Spoke with vikki about Bwc and she said she has my called me because she has not run a Butrans bwc script. Reviewed vouchers and savings cards
PPLPMDL0020000001	Westlake	OH	44145	10/10/2013	During conversation with her 2 ma's regarding Butrans the doctor stepped into the conversation. At first the nurse said the dr just doesn't see patients with that kind of pain to write Butrans enough. I said u said a few good points....the right patient and the number of patients she treats for pain so let me address. I said she doesn't know much about Butrans really right. Ma said yes. I said so perhaps there is a misperception going on about who is the right patient and ma said maybe. I said does she treat patients with back problems due to another illness (disease state), she said yes. I said like what....she named a few. Osteoarthritis,she said diabetes, she said disc disease. I said she probably treats them with a NSAID right? Ma said yes. I said now what if the disease progresses and the NSAID isn't controlling the pain....that's when an Opioid of some kind might be added to the current therapy or switched to an opioid right. Ma said she was t sure...but the dr stepped in and said yes that's what I would do. I said understood. But Saftey is important in your opioid choice at that point right. She said yes. And so is pain control right. She said yes. I told her I'd like her to try Butrans 5mcg for the atc patient because...had the naive study in hand. Showed her Saftey and efficacy was conducted. It's a 7 day transdermal schedule 3. What that means to your patients is 4 doses a month with refills. And as far as efficacy- reviewed open label of study.
PPLPMDL0020000001	Garfield Hts	OH	44125	10/10/2013	Discussed Butrans and the Kathy profile with Dr.and Deena, They agreed they have patients like her, went over Initiation/Titration along with MedCo/ESI formulary status. Said he has patient in mind. OxyContin Q12h flexible dosing strengths
PPLPMDL0020000001	Westlake	OH	44145	10/10/2013	Discussed Butrans, she said she knew about it. Discussed 7 day transdermal opioid pain patch, scheduled 3. Showed her the Maria profile, mentioned why stocking the 15mcg may be important. Discussed the starting dose- and the titration can occur a min of 3 days.
PPLPMDL0020000001	Akron	OH	44319	10/10/2013	Lunch appointment went well and reviewed all key selling messages for all products. Reviewed new profiles for OxyContin, start principles, dosing,titration. Dr said he typically goes to the ER oxycodone when patients reach the 4 pill a day mark. Dr said he agrees with the start principles and will continue to prescribe and switch his patients from Percocet. Detailed Butrans in depth speaking about dosing, titration, conversions, patient profiles and asked him if he has patients on tramadol or vicodin that may need a dose adjustment? Dr said he does and said he really likes that Butrans is a schedule 3 and lasts 7 days. I asked dr if he will try it and he agreed.
PPLPMDL0020000001	Akron	OH	44305	10/10/2013	Reviewed insurance and copy cards. Intermezzo introduction with dosing, indication, and limitations of use. I asked dr to use and he said he might but doesn't prescribe much for sleep. I asked for dr to provide me some specific information about how his patients are doing on Butrans? Dr said that most are doing well and he thinks it's a great product. I asked about his patients pain scores or what he has seen? Dr said that he has a few patients that continue to tell him how much they like Butrans and that they are thankful for it. I asked him to continue prescribing for those needing dose adjustments on tramadol around the clock. Dr said ok. Left him with the OxyContin conversion and titration guide and asked for him to use it more frequently for those who he feels need an ER opioid while on Percocet.
PPLPMDL0020000001	Cleveland	OH	44127	10/10/2013	Reviewed OxyContin Q12h,flexible dosing. Dr. not prescribing much of the long acting anymore, Ask what 30% pain reduction means do her patients, said that is significant and will keep in mind. Jose will help if PA is needed
PPLPMDL0020000001	Cleveland	OH	44130	10/10/2013	Asked pharmacist to order in 15 and he said he does not have see a lot of butrans. Reviewed pain reduction from clinical trials. Reviewed start principle. Gave indication and limitation of use for intermezzo.
PPLPMDL0020000001	Westlake	OH	44145	10/10/2013	Saw dr. He told me just wrote oxycodone for a patient today. I said dr....are u trying to make me smile or frown? He said what do you mean....I said I promote OxyContin for patients that have atc pain....are u saying the patient had atc pain? Dr said he takes Percocet 3 x a day. Showed him the core visual aid page showing Percocet to OxyContin. Reviewed the 7 doses and went over the tailor aspect of the start principal. Said one thing to keep in mind for the next patient you are about to write Percocet for....review the q12h aspect and its single entity still covered many many commercial plans. Dr said ok and walked into a room.
PPLPMDL0020000001	Valley View	OH	44125	10/10/2013	Discussed OxyContin Q12h flexible dosing strengths and broad formulary coverage along with Butrans 15mcg/hr dose presentation
PPLPMDL0020000001	Westlake	OH	44145	10/10/2013	Saw dr. He told me that dr blazek from north olmsted joining the practice soon. Asked him if he tried Butrans for a NSAID failure like we discussed last time and he said no.he said the patient that is on Butrans is going well on it. Left him naive study.
PPLPMDL0020000001	Cleveland	OH	44130	10/10/2013	Dr said he will not put new patients on OxyContin anymore. And when I asked why he said pain management can handle them better because there is too much short acting being used. He said I did not get the correlation and after a lengthy discussion he said he does not see a ocase fr oxycotin in his practice and he does not believe in chronic pain. I show him butrans and he said he has no place because everyone is on a short acting and they get it from the emergency room and getting a short acting and then they don't want to take a long acting. I asked if he had patients in his practice that do not go to the emergency room and he is their primary physician. He finally agreed that he would rather put a patient on Butrans than Vicodin or Percocet and I he agreed
PPLPMDL0020000001	Akron	OH	44333	10/10/2013	Quick call I between his appointments. I showed dr the Maggie profile for Butrans and the new one on IR oxycodone for OxyContin. Dr said it was good for him to see the difference in patient types. Dr said he has been having trouble getting OxyContin approved on insurance. I asked him where and he didn't know. He told me to talk to his staff to figure it out. I told him to prescribe more Butrans for those patients I described.
PPLPMDL0020000001	Westlake	OH	44145	10/10/2013	Tuesday to dr thru the window and Megan the ma (office manager)- discussed what he does at this location and he said Wednesdays he does injections and will see his patients for follow up at either locations- lakewood on Tuesdays and Thursdays Westlake. I asked about his experience thus far w Butrans and he said he likes it. I asked what made you choose Butrans? He said that the patient he gave it to is his older patients. I asked why? He said that most are not candidates for surgery and have atc pain....and it is easier for them to remember. I asked how he felt about it being someone's first opioid for atc pain? Dr said it depends on the patient but most likely not because he would supplement with short acting opioids first. I said....understood. But if patients were taking pain medications 3 or 4 x a day atc....would that be a Butrans candidate. Dr said maybe. I thanked the dr for his time, told him when I return in a few weeks for lunch. I will review this Tramadol to Butrans profile you. He said very good. Walked away.
PPLPMDL0020000001	Westlake	OH	44145	10/10/2013	Spoke to dr about Butrans. Review what it is, it's indication, managed care. Asked dr how she treats patient t's who are on NSAIDs it controlled and need a Change of medication? Dr said she will write Tramadol along w supplementing w NSAID. I said an opioid w supplemental. I suggested Butrans...and also mentioned based on the naive study, you could use NSAIDs for breakthrough pain. Talked about the age of her patients that she would transition to opioid? She said her older patients, usually and that Tramadol was cheap. She looked it up on her computer and told me it was ten bucks at Walmart compared to 30 dollars at cvs for a 50mg of 180 tabs. Which comes out to be about 6 pills a day. Which means its dosed every 4 to 6 hours. Dr said that was right. When writing an opioid of any kind, what is your biggest reasons for choosing it? Dr said cost. I said not efficacy or Saftey that price was our concern. She said yes those 2 but if her patient can't afford it they want something cheap. I said....when come back for lunch next week we r gonna talk Abu t the Butrans commercial savings plan along with the safety efficacy data of patients never been on Butrans before and the results they had for pain management. She said ok. Spoke to Val about intermezzo....she said the doctor likesit and wrote before. Val remembered all the key points of the product and I asked her if she would be willing to prior auth in order to get the product approved. She rolled her eyes and said like I have time
PPLPMDL0020000001	North Olmsted	OH	44070	10/11/2013	I made a drop in visit to meet with nurse practitioner , Teresa (Terry) Coyne. I spoke with Debi Rodriguez, admissions coordinator, who informed me that Terry left early today. She advised me to call her at 440-779-4037. I left Butrans information along with my business card
PPLPMDL0020000001	Beachwood	OH	44122	10/11/2013	Followed up on Butrans discussion from lunch and asked Dr. if she's had a chance to prescribe. Reminded Dr. of the Scott profile for Butrans after tramadol. Dr. said she hadn't seen any tramadol patients this week and I asked her how many did she typically see in a week and she said not many. I asked her if she had seen the patient she was considering Butrans and she said she might consider it if they needed a dose adjustment. Reviewed OxyContin conversion from Percocet and flexible dosing. Review dosing administration of intermezzo and middle the night awakenings Dr. said she is not sure about intermezzo and I inquired what was puzzling and she said she just thinks that Ambien is cheaper and does the same thing. I explain the dosing in indication to doctor and she said she still thinks it's the same
PPLPMDL0020000001	Barberton	OH	44203	10/11/2013	Asked dr his experience w Butrans and he said he has been using it since it came out and he liked it. I said why did u select it over her other opioid choices and he said because it was easy 4 patches and it was extended release. We went to Butrans.com and watched the video on pharmacokinetics. When finished I asked if he thought it was helpful and he said yes, he asked if it was covered on workers comp. did cover managed care and commercial savings program. I asked the dr when he is treating someone for chronic atc pain what type of medications are they on? He couldn't answer specifically...he said he usually supplements with NSAIDs with short acting or extended release with NSAIDs. I asked if he was aware he could supplement with Butrans and dr said yes. Discussed OxyContin. Dr said he was very familiar w this product and that he writes it. Reviewed the 7 doses and the conversion with Percocet. I asked if after this video and information he felt more confident I writing Butrans 10mcg this week. And he said it was good I formation.
PPLPMDL0020000001	Cleveland	OH	44102	10/11/2013	Confirmed Wed. Inservice with ED and staff
PPLPMDL0020000001	Stow	OH	44224	10/11/2013	Spoke with Greg the pharmacist about talk with dr yang about ordering the Butrans 15mcg and gave him the Butrans pharmacy piece with NDC numbers. Greg said he will not order it until he sees that first prescription and he will talk with dr yang about it.
PPLPMDL0020000001	Olmsted Falls	OH	44138	10/11/2013	Upon arriving for a 1 o'clock meeting to introduce Purdue's Nurse Educator program and discuss educational in-service opportunities with director of nursing, Pam Ritter, I was asked by her, if we could reschedule the 1 o'clock meeting for today. She informed me that she needed to be in attendance at another meeting that was to begin at noon which was running behind and has not began as of yet. She sincerely apologized and another meeting was scheduled for Monday, November 4 at 11 AM.
PPLPMDL0020000001	Stow	OH	44224	10/11/2013	In Joyce's office setting up lunch appointments and dr yang came in. Dr said he spoke with Greg the other day and he told him about the 15mcg Butrans dose. I told dr its available in most pharmacies by now. Dr told me to check with Greg at the summit pain pharmacy to see if he ordered it. I asked dr if he will use it as he titrates? Dr said he plans to.
PPLPMDL0020000001	Cleveland	OH	44113	10/11/2013	Reviewed Butrans for those Lortab failures requiring around the clock analgesia, along with intermezzo for those MOTNA patients. Reminded of dosing. Said OK and will continue to find new patients
PPLPMDL0020000001	Beachwood	OH	44122	10/11/2013	Asked Dr. Warren to consider converting Percocet patient who is been on for more than three months to OxyContin. Gave titration and conversion guide. Dr. said he considers OxyContin and uses it when necessary. Reviewed Butrans dosing administration and reminded Dr. of clinical trial pain reduction of 7.2 to 2.6. Dr. said leave information with Donnie and I discussed the titration of Butrans with Donnie.
PPLPMDL0020000001	Beachwood	OH	44122	10/11/2013	Reviewed 15 Butrans and asked pharmacy if they would bring in a box and they said yes. I discussed the 30% reduction in sight. Review flexible dosing of OxyContin stressing the 15 and 30 mg tablets. Gave indication limitation abuse and dosing and administration of intermezzo. Reviewed managed-care environment for all three products
PPLPMDL0020000001	Garfield Hts	OH	44125	10/11/2013	Talked with Denise. Discussed Butrans for those Tramadol failures requiring around the clock analgesia. Initiation/Titration and Medco/ESI formulary status
PPLPMDL0020000001	Cleveland	OH	44113	10/11/2013	Reviewed Butrans for those Lortab failures requiring around the clock analgesia, along with intermezzo for those MOTNA patients. Said OK, he and staff will continue to find new patients. OxyContin Q12h with broad formulary coverage
PPLPMDL0020000001	Cleveland	OH	44113	10/11/2013	Discussed OxyContin dosing strengths along with Q12h, reviewed Butrans for those patients requiring around the clock analgesia. He along with Dr. Shen will continue to find new patient starts
PPLPMDL0020000001	Beachwood	OH	44122	10/11/2013	Reviewed 15 Butrans and asked pharmacy if they would bring in a box and they said they don't do enough Fiamm to bring in a box and I discussed the 30% reduction in sight. Review flexible dosing of OxyContin stressing the 15 and 30 mg tablets. Gave indication limitation abuse and dosing and administration of intermezzo. Reviewed managed-care environment for all three products



PPLPMDL0020000001	Olmsted Falls	OH	44138	10/11/2013	I made a drop in visit to speak with head of education I was informed by the receptionist, Barb Larsen that Michelle Stepek in staff development handles education for the facility. She called her office, N/A I confirmed the director of nursing as Robert Album, He also was not available. I left a Purdue nurse educator pamphlet along with my business card
PPLPMDL0020000001	Cleveland	OH	44113	10/11/2013	Discussed OxyContin dosing strengths along with Q12h, reviewed Butrans for those patients requiring around the clock analgesia. She likes product and will continue to find new patient starts. Reminded of Medco/ESI formulary status
PPLPMDL0020000001	Cleveland	OH	44113	10/11/2013	Reminded of OxyContin Q12h flexible dosing along with broad formulary coverage Reviewed Butrans for those Lortab failures requiring around the clock analgesia, along with Intermezzo for those MOTNA patients. dosing. Said OK and will continue to find new patients
PPLPMDL0020000001	Hudson	OH	44236	10/11/2013	Gave dr review of the Maggie profile for OxyContin. I asked him what he thinks about the treatment? Dr said he can't believe the patient was taken all the way to 80mg of Percocet. I asked him what he would change and he told me he would start the ER oxycodone earlier. I died when and he said probably would have looked at starting at 30-40mg. I told dr to do that more in his practice. Dr agreed. Handed him the nancy profile for Butrans and asked him to use it.
PPLPMDL0020000001	Westlake	OH	44145	10/14/2013	Saw thru winDow, discussed the appropriate type for Butrans based a lunch dis suasion we had 2 weeks. The np said she didn't remember the mcg of Butrans or how long the patch is to stay on the patie t. Review the naive study, showed appropriate patient type, starting dose and where to apply patches. No said she would try it.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	10/14/2013	Led with insight about hydrocodone and asked him his thoughts. Dr said that he doesn't really see that in his practice because he said he switches he's patients to the ER opioids much sooner. I discussed the start principles and then discussed appropriate patients for OxyContin and reviewed the per octet patient needing a dose adjustment. I died for OxyContin for those patients and he said its the one he goes to. Butrans indication,dosing,titration, application sites,schedule 3,7 day transdermal system. I reviewed the AE's, efficacy from opioid experience trial and patient types. Dr said he will give it a try because he likes the idea. Reviewed managed care and Medicare D coverage. Dr said he will use it. Spoke with Brittany in depth about the practice specifics.
PPLPMDL0020000001	Akron	OH	44313	10/14/2013	Followed up with dr about his Butrans prescription the last time I was there at lunch. I asked dr if his patient got Butrans filled after he had a hard time finding the 5mcg dose? Dr said he didn't know for sure but has not heard from the patient. I showed dr the new dose of Butrans and explained the dosing and conversions. I reviewed the nancy profile in that same piece and asked for his continued business. Dr agreed.
PPLPMDL0020000001	Westlake	OH	44145	10/14/2013	Spoke to pharmacist regarding stocking 15mcg. Also discussed placement of the patch
PPLPMDL0020000001	Richmond Heights	OH	44143	10/14/2013	I placed a call to nurse educator, Sheila Harris to discuss the next educational in-service opportunity .I spoke with the receptionist, Darlene who informed me that Sheila was in a clinical meeting , she took a message
PPLPMDL0020000001	Westlake	OH	44145	10/14/2013	Saw dr we discussed the patient he to,d me about that he writes a 10 and 5 mcg to make 15 and told him the 15mcg was now available. I also asked if he was willing to send a fax on his script pad requesting the had any stock the 15 and dr said he would do that. Dr said he writes mostly ten mcg.. I said that was great and asked if he changed their medication. When they came to him or if they were on it before? Dr said he switched and asked why...he said he has good luck w Butrans. <font color=blue><b>-b>-CHUDAKOB's query on 10/25/2013</b></font>-Lia, when a physician tells you that he prescribes a product that is not in line with our FPI we have an obligation to correct him and record that in our call notes. In this call, you should have told him that we have no recommendations for applying two patches on a patient before you explained about the 15ug. Does this make sense?<font color=green><b>-b>-BARTOLI's response on 10/28/2013</b></font>Yes. Will do.<font color=blue><b>-b>-CHUDAKOB added notes on 10/28/2013</b></font>-Thank you!
PPLPMDL0020000001	Berea	OH	44017	10/14/2013	Saw dr talked about who he might feel comfortable giving Butrans? He's aid he just hasn't seen anyone yet. I said maybe is week u will find a NSAID patient not currently controlled that would benefit from a atc extended release patch technology.
PPLPMDL0020000001	Westlake	OH	44145	10/14/2013	Spoke to ma, she said that dr never writes OxyContin and doubts she would. I asked if the dr ever wrote Percocet? She said very rare, I explained the delivery system. And the variety of doses. Gave her to give leave behinds for the dr.
PPLPMDL0020000001	Olmsted Falls	OH	44138	10/14/2013	I placed a phone call to Michelle Stepek in staff development, to follow-up from a visit on Friday 10/11. I spoke with Michelle, she informed me that she was not in charge of education for the facility. Michelle forwarded me to the director of nursing, Robert Albu. I left the message on his voicemail requesting an appointment to talk to him about educational in-service opportunities
PPLPMDL0020000001	Olmsted Falls	OH	44138	10/14/2013	Spike to office manager, they are preparing to get bought out so lunches are frozen for a while. Mentioned Butrans and she remembered, I gave her the highlight, such as the 7 day transdermal patch and the indication.
PPLPMDL0020000001	Akron	OH	44333	10/14/2013	Introduced the 15mcg Butrans dose today and when to use it. Dr said he thinks he prescribed one today. Discussed the need for it when patients need a little more than 10 and maybe not double the dose. Discussed locations in the area that have it in stock or at wholesaler. I asked dr for continued prescribing and said that the protocol for Butrans is working well so far. Dr said that all prescribers in his practice will need to trial Butrans after 3-4 prn medications. He will have a new NP starting at the end of the month.
PPLPMDL0020000001	Fairlawn	OH	44333	10/14/2013	Spoke with Kay the pharmacist technician about Butrans 15mcg. I asked if she could look into the system to see if McKesson has it in stock? Kay said the pharmacist is too busy and said they don't fill it much but they do have the 10mcg dose in stock. Kay said if they see a prescription for it they will order it. I told her about the OxyContin dosing, titration and conversions. Kay said they fill it regularly and the 20 and 40mg doses are most common.
PPLPMDL0020000001	Akron	OH	44333	10/14/2013	I showed her the dosing card for intermezzo and asked if she has seen any? She said no. Nothing else learned. I asked dr if there is a scenario where he would have a patient on low dose Percocet like 20mg and a dose adjustment is necessary to go to OxyContin 10mg q12h? Dr said yes but there aren't many because he takes them up to around 40mg before he switches. I asked him why his threshold is 40mg? Dr said that's just his limit. I told him based on the pathology of the patient there may be a situation where the ER oxycodone may be appropriate? Dr said there is but said he has to balance the medicines prescribed and cost. Dr said many patients will not pay a branded price for pain medicines. I told him to be selective with patients of course and to focus on commercial and Medicare D plans. Dr said ok. Gave him the new Butrans 15mcg dose and asked him if he has experience with the 10mcg dose? Dr said he thinks so. I told him he has another dose to titrate through and to continue prescribing for his patients failing vicoden. Dr said thanks
PPLPMDL0020000001	Garfield Hts	OH	44125	10/14/2013	Reviewed Butrans dosing/titration guide along with reminder of 15mcg/hr dose, OxyContin- Q12h/flexible dosing strengths along with broad formulary coverage
PPLPMDL0020000001	Akron	OH	44333	10/14/2013	I introduced the Butrans 15mcg to Dana. I told her that I'm guessing that she has experience titrating through the Butrans doses? Dana said she does have and has patients on each dose. I asked her if the 15mcg dose would be a good way to continue titrating through the doses? She said yes and is glad to know that they made a step therapy between the 10 and 20mcg dose. I asked where she has been using Butrans? Dana said they have been getting a lot of patients from other pain offices recently who are way up on their total opioid dose. She said that because of that, it has been taking more time until a patient is ready for Butrans follow a reduction of total opioid dose. I told her to continue to look for the patients needing a dose adjustment on tramadol or vicoden. Dana said that's when she uses it most. I asked for continued prescribing. Sowed her the OxyContin conversions from the conversion and titration guide and asked her to converts patients on Percocet who need a dose adjustment. Dana said the doctors have to do that. She doesn't prescribe schedule 2 medicines.
PPLPMDL0020000001	University Hts	OH	44118	10/14/2013	Quick Butrans reminder for those Tramadol failures requiring around the clock analgesia. Left MedCo/ESI formulary status
PPLPMDL0020000001	Westlake	OH	44145	10/14/2013	Dr Duncan's nurse came to the window because dr was too busy today. Discussed OxyContin, the savings program as well as Butrans. She was not fami,air with Butrans, gave her a brief overview however she thought it was an opioid that dr Duncan wouldn't use. When I asked why she said he doesn't treat much w opioids. Left behind the fpi and the Maria profile for review.
PPLPMDL0020000001	Westlake	OH	44145	10/14/2013	Spoke np and he said it was a great second line product when a short acting opioid doesn't work.
PPLPMDL0020000001	Cleveland Hts	OH	44118	10/14/2013	Introduced Butrans 15mcg/hr dose presentation, Reviewed MedCo/ESI formulary status, Dr. said he is continuing to find new patients, did have a RX rejection last week, continues to work on PA's. OxyContin Q12h flexible dosing along with broad formulary coverage
PPLPMDL0020000001	Berea	OH	44017	10/14/2013	Hallway- gave dr an updated Butrans fpi. Discussed trying Butrans after Tramadol failure...and reminded him that it was a 7 day transdermal extended release options (refills) for patients with atc pain. Asked him to just try one patient this week to gain some experience with it.
PPLPMDL0020000001	Solon	OH	44139	10/14/2013	I made a drop in visit to speak with Greta Redus . I spoke with Minnie from central supply, at the reception area . She called Greta's office , I was informed that Greta was in a meeting I left a Purdue nurse educator brochure along with my business card
PPLPMDL0020000001	Twinsburg	OH	44087	10/14/2013	I made a drop in visit to speak with director of nursing , Shawn McMahon to introduce Purdue's Nurse Educator program and discuss educational in-service opportunities. The receptionist informed that he was in a clinical meeting. I left Purdue's Nurse Educator brochure along with my business card
PPLPMDL0020000001	Berea	OH	44017	10/14/2013	Spoke to dr regarding patients she currently treats that have pain secondary to a known pathology. She said she has very few and I told her that was fine to focus on those few. She doesn't like to use opioids she said. I asked what happens after NSAID aren't doing e job at c troll their pain. She said short acting opioids for a short period of time. She said a few Tramadol or Vicodin a day supplemental for a month. I asked what happens at that monthly appointment. If the patient still is in pain, she refers them out or continue. I said what was the downside to giving Butrans 5mcg instead of the per opioids she mentioned. If the patients were controlled at the monthly visit they continue therapy. Gave abuse potential information and also reminded it was schedule 3 refill class.
PPLPMDL0020000001	Cleveland Heights	OH	44118	10/14/2013	Reviewed Butrans 15mcg/hr presentation, Along with MedCo/ESI formulary status, believes Dr. Harris in. rejection is resolved. OxyContin q12h flexible dosing strengths along with broad formulary coverage
PPLPMDL0020000001	Solon	OH	44139	10/14/2013	I Made a visit to speak with Dir. of Nursing , Judith Sawnter to reschedule educational in-service on pain management. I was informed by the receptionist that Judith retired and is no longer with the facility. The new director of nursing is Denise Ubienski , she also informed me that they have a new administrator, Vivian Springer. The director of nursing was not available. I spoke with Vivian and introduced myself and Purdue's Nurse Educator Program. Vivian said "I will pass this information along to our director of nursing, if she is interested she will call you"
PPLPMDL0020000001	Solon	OH	44139	10/15/2013	Quick call, Discussed with dr the OxyContin conversion from Percocet and the oxyplain insight. Dr said he uses OxyContin. Dr had to attend to patiens but I reminded him to think about Butrans for patients needing a dose change from tramadol.
PPLPMDL0020000001	Parma	OH	44134	10/15/2013	Gave Dr. the pain reduction insight and he said he doesn't really go by that because he doesn't use the pain intensity rating scale. I asked Dr. about converting patient from Percocet to OxyContin and he said that he likes OxyContin because it works better than the generic and we had another discussion about OxyContin not being Generic.
PPLPMDL0020000001	Cleveland	OH	44102	10/15/2013	I recv'd a phone call from Mark Gutkowski, confirming an in-service for 10/16 @ 12:00, 5th floor education room.
PPLPMDL0020000001	Cleveland	OH	44104	10/15/2013	Reviewed Butrans 15mcg/hr with tech, and OxyContin vouchers. Will review with Hakim
PPLPMDL0020000001	Cleveland	OH	44106	10/15/2013	Obtained Ortho and Infectious Disease depts. left info and contact info
PPLPMDL0020000001	Cleveland	OH	44122	10/15/2013	Upon arrival for a 1:30 in service on constipation, I was greeted by, staff development coordinator, Heather Gordon , she informed me that she forgot to post the in-service for today because a last-minute orientation was scheduled. She asked if we could reschedule the in-service. Heather stated "I'm so sorry but I'm still trying to get used to this new role" The constipation in-service was rescheduled for November 14 at 1:30 and 2 PM for nurses and STNA's. I also talked with Heather again about scheduling a Butrans luncheon for the nurse practitioner. She informed me that there are five on staff and she will get in contact with them to set something up. She will keep me informed. I asked Heather for her email address, she will call and leave it on my voicemail.
PPLPMDL0020000001	Cleveland	OH	44106	10/15/2013	Obtained info, Left OxyContin/Butrans Initiation/Titrations guides. Dr. Gripshower is Medical Dir. Residency Fellowship Dir. Dr. Salata
PPLPMDL0020000001	Cleveland	OH	44106	10/15/2013	Obtained Ortho Dept. info, (Program dir. Dr. P.Getty - Ellen-Admin. Left OxyContin initiation/Titration guides
PPLPMDL0020000001	Cleveland	OH	44104	10/15/2013	Quick Butrans reminder for those Tramadol failures requiring around the clock pain control. OxyContin Q12h with broad formulary coverage with multiple dose strengths
PPLPMDL0020000001	Cleveland	OH	44104	10/15/2013	Reviewed OxyContin Q12h flexible dosing strengths. Presented 30% pain intensity reduction, Dr. said that was significant. Had a PA Caresource rejection yesterday for existing prior patient, Said they are working thru it.
PPLPMDL0020000001					Reviewed MedCo/ESI formulary status. Introduced Butrans 15mcg/hr dose. Intermezzo for MOTNA/dosing and savings card

PPLPMDL0020000001	Cleveland	OH	44119	10/15/2013	I made a drop in visit to speak with administrator , Nancy Sugarman To follow up from our meeting on August 20. I spoke with the receptionist, Erica who informed me that Nancy was currently in a meeting. I left a Purdue Pharma Nurse Educator brochure along with my business card.
PPLPMDL0020000001	Cleveland	OH	44104	10/15/2013	Quick Butrans reminder for those Tramadol failures patients requiring around the clock analgesia, OxyContin Q12h broad formulary coverage
PPLPMDL0020000001	Parma	OH	44129	10/15/2013	Quick call following up on last weeks discussion about tramadol patients like Scott and Dr. said he will keep that in mind. Shoot Dr. the start principles in the detail piece and highlighted the conversion from Percocet to OxyContin. Show Dr. the vouchers for intermezzo and asked him if he's been able to use any for patients suffering from middle of the night awakenings and he said no.
PPLPMDL0020000001	Cleveland	OH	44128	10/15/2013	I made a drop in visit to speak w/ acting D.O.N., Sherri Grafnitz to talk w/ her about rescheduling the in-service on pain documentation that RoseAnne Howell cancelled on 8/14. I spoke w/ the receptionist, Lisa H. who informed me that Sherry just went into a meeting in the chapel. I also confirmed that Roseann Howell was no longer with the facility. I left a Purdue Pharma nurse educator brochure along with my business card.
PPLPMDL0020000001	Westlake	OH	44145	10/16/2013	Saw the doctor thru window, discussed the q12h delivery system and the number of doses available to give patients an option. The appropriate patient type for Butrans using Maria profile. 7 day patch, 4 patches a month. Commercial insured coupons.,
PPLPMDL0020000001	Akron	OH	44320	10/16/2013	I asked dr if it was fair to say that most of her Butrans prescriptions come from patients on vicoden and Percocet? Dr said yes because we have had that discussion. I asked her if it is also fair to say that she has patients on tramadol around the clock? Dr said she does have many of them. I told her that when patients are on that more than 90 days, she may need to consider other options for analgesia. I showed her the Scott profile and reviewed it. I asked her if she would use Butrans for those patients when a dose adjustment is necessary? Dr said it makes sense and will. Introduced new 15mcg dose. OxyContin Maggie discussion and dr said she would have started OxyContin much sooner. Nothing else learned.
PPLPMDL0020000001	Akron	OH	44320	10/16/2013	Sort discussion at counter and told him that Butrans is a product he should be prescribing much more often because he can use the schedule 3 transdermal system for those patients wanting a dose adjustment on products like vicoden. I showed him the nancy profile and introduced the new 15mcg dose. Dr said he agrees with me and that I was right. Dr took the conversion chart and said he was going to keep it with him.
PPLPMDL0020000001	Cleveland	OH	44113	10/16/2013	Visited Ortho (Stearns/Bilfield) left OxyContin/Butrans info. Inquired from (Debbie RN) protocol, Referring patients to 2E floor
PPLPMDL0020000001	Rocky River	OH	44116	10/16/2013	Discussed Butrans stocking, they have the ten I. Stock but not the 15mcg. Discussed placement of the patch. Review of the pain scores from the naive study. Review of OxyContin the delivery system and dosages. Intermezzo, dose specific
PPLPMDL0020000001	Parma	OH	44129	10/16/2013	Discussed conversion from Percocet to OxyContin for those patients who have been on more than 3 months and asked if could think of patients like that in his practice. He said he has a few patients that fit this criteria. I asked why he has not moved them to OxyContin in the past and the dr did not have an answer. Dr said he will try to remember. Reviewed efficacy of Butrans opioid naive trials and 7.2 to 2.6 pain reduction. Dr said he has to remember. I asked the dr to prescribe after tramadol.
PPLPMDL0020000001	Westlake	OH	44145	10/16/2013	Spoke to Megan, left behind the the opioid experienced study and reviewed. The inclusion criteria and the end point of the study. Showed her the demo patch covered managed care.
PPLPMDL0020000001	Fairlawn	OH	44333	10/16/2013	Sue the technician told me today that she had a patient come in of dr Fouads who had a prescription for the Butrans 15mcg. Sue said they didn't have it in the store so the patient went somewhere else to get it because he didn't want to wait a day. I spoke with Gilbert who did not know this. I told him that this was a case that I have been trying to tell him about. Patients do not want to wait a day for their pain medicines! Other disease states maybe but patients need their analgesics! Gilbert agreed and said he was going to order it today.
PPLPMDL0020000001	Cleveland	OH	44102	10/16/2013	I completed a pain management in-service for the nursing staff, 13 were in attendance. Sales Representative, Mark Gutkowski presented Butrans after completion of the pain management in-service. I was introduced to pharmacy consultant, Ed Carter. Director of nursing was confirmed As Colleen Wilson. Mark did inform me that he has this facility on his target list.
PPLPMDL0020000001	Westlake	OH	44145	10/16/2013	Spoke to ma, dropped off the naive study gave her two things to keep in mind: pain score reduction and the patients never been on an opioid but have atc pain.
PPLPMDL0020000001	Cleveland	OH	44102	10/16/2013	Provided In-service for Pharmacy staff and Nursing staff (Cindy Schulte- Purdue RN nurse educator)
PPLPMDL0020000001	Parma	OH	44129	10/16/2013	Asked Dr. if she is doing refills for her Butrans patients. She said she was for some of them and I asked if she has any new patients. I reviewed the Scott profile with tramadol. I reviewed flexible dosing of OxyContin
PPLPMDL0020000001	Westlake	OH	44145	10/16/2013	Spoke to the ma regarding Butrans, reminded about the 7 day patch option. Refills and the commercial saving plan. When saw the doctor, I here was going to leave her two easy reads on why to write Butrans. Pain scores in patients never been on opioids before with the FDA approval study, and a Maria patient profile....that we can talk about And might be a fit for here w ur patients.
PPLPMDL0020000001	Parma	OH	44129	10/16/2013	Spoke with nurse about the patient information tear sheets and if the dr had approached her with any questions about Butrans. She said she would ask and dr walked by us. He joked and said he did remember from our lunch last week but he has not written since I just saw him last. I cited the pain reduction for. I sited the pain reduction from the opioid naive trials 7.2-2.6 and left a titration guide. I also told him I would leave the OxyContin titration guide and showed him the Percocet conversion.
PPLPMDL0020000001	Parma	OH	44129	10/16/2013	Quick window call. Let dr know that Butrans 15 is available and he said he still can not understand why there was never a 15 to start with. I asked if he had patients in mind that he would be prescribing the 15 for and he said a few. I reminded him of proper titration from the 10 to the 15 for opioid experienced patients. Told dr I was leaving the OxyContin start principle titration guide.
PPLPMDL0020000001	Parma	OH	44129	10/16/2013	Told Linda know the 15 was available and she said she had a patient in mind. I asked how long the patient had been on the 5 and she told me they were on the 20 and she wanted to titrate them down. I said I did not have information on how to do this but what was she thinking of doing. I also reviewed proper initiation dose of Butrans for opioid experience patients. Told her I would leave the OxyContin titration guide for her review and she said don't bother because this office has a policy not write OxyContin. Reminded Linda of her care source patients with motna and reviewed intermezzo dosing and administration and limitation of use.
PPLPMDL0020000001	akron	OH	44333	10/16/2013	Dr told me that dr Dahlen in Cuyahoga falls, left the practice with Ross Black and is starting up with UH. Dr said that he will be getting 3,000 new patients of his until he starts back up. I told dr that he will have lots of opportunity to use Butrans. I reviewed patients types like Scott and nancy, reminded of conversions and titration through the 20mg and to use the 15mcg. Dr said he understands and will be on the lookout.
PPLPMDL0020000001	Cleveland	OH	44102	10/16/2013	Attended pain inervice with Cindy, Reviewed Butrans Initiation/Titration guide, Requested OxyContin administering info. sent request to medical services- <font 10="" 2013&lt;="" 25="" 28="" a="" an="" and="" are="" augustine="" b&gt;&lt;="" be="" call="" calls.="" carter="" clarification.&lt;font="" closed="" color="blue&gt;&lt;b&gt;CHUDAKOB" considered="" discussed="" ed="" font&gt;-thanks="" font&gt;<="" font&gt;mark,="" for="" him.&lt;font="" in="" institution="" is="" mcp="" not="" note,="" on="" pharmacist="" put="" query="" response="" st.="" td="" that="" the="" these="" this="" what="" where="" with="" would="" you=""></font>
PPLPMDL0020000001	Cleveland	OH	44113	10/16/2013	Visited Ortho.(Bilfield/Stearns) Left OxyContin/Butrans Initiation/Titration guides
PPLPMDL0020000001	Parma	OH	44129	10/16/2013	Window call reminding dr about using Butrans for the Scott profile patient. Gave titration guide for OxyContin and discussed conversion from Percocet
PPLPMDL0020000001	Parma	OH	44129	10/16/2013	I confirmed with pharm tech that Butrans 15 was now in stock. Reviewed intermezzo indication and limitation of use. Reviewed start principle for OxyContin, stressing titration every 1-2 days, 25-50%.
PPLPMDL0020000001	Cleveland	OH	44102	10/16/2013	Attended pain inervice with Cindy, Reviewed Butrans Initiation/Titration guide, Requested OxyContin administering info. sent request to medical services
PPLPMDL0020000001	Cleveland	OH	44113	10/16/2013	Quick reminder of Butrans for those Tramadol failures requiring around the clock analgesia, Informed of pain in-service conducted at St. Augustine, said thank you and will consider. OxyContin Q12h Initiation/Titration guide<font color=blue><b>CHUDAKOB's query on 10/25/2013</b></font>Mark, if he is an OxyContin Core then this should be the emphasis on the call. It looks like Butrans was the emphasis here.<font color=green><b>GUTKOMMA's response on 10/28/2013</b></font>-Ok<font color=blue><b>CHUDAKOB added notes on 10/28/2013</b></font>-Thanks. Be sure you are placing the product emphasis based on your designation
PPLPMDL0020000001	Cleveland	OH	44103	10/16/2013	Reviewed OxyContin Q12h flexible dosing strengths along with broad formulary coverage. Dr. said OK and is still thinking about Butrans as well. Left Initiation/Titration guide
PPLPMDL0020000001	Independence	OH	44131	10/16/2013	Reminded dr of his decision to consider Butrans after tramadol and he said he had forgotten. I reminded him the the pain reduction from 7.2 to 2.6 and gave him the titration guide. Showed dr the Percocet to OxyContin conversion in the detail piece. Dr asked about intermezzo savings cards and I told him he has some in stock but I would gladly provide him with more.
PPLPMDL0020000001	Akron	OH	44313	10/16/2013	I showed dr the Tom profile for OxyContin and asked him when he knows its time to move to an ER opioid like OxyContin? Dr said usually depends on the patients pain level and how they function throughout the day. I asked if he has threshold of pills to move to an ER opioid? Dr said again it depends on the patient but usually around 4 pills of Percocet. I told dr that is great and that if a patient is taking 20mg of Percocet a day it would convert to 10mg of OxyContin q12. Dr said ok. Dr asked if there are savings cards for Butrans? I told him yes and showed him the card and reviewed it and to, d him they are only good for the commercial patients. I asked dr if he is going to write it and he said he plans to.
PPLPMDL0020000001	Westlake	OH	44145	10/16/2013	OxyContin, talked about when he would use this typically? He said his nursing home patients. Same as Butrans he said. Dis used the delivery system of both products. Dr said less pills is why he writes OxyContin and he said he tried to write Butrans twice but it for rejected. I said Medicaid? He said no Medicare part d. Discussed there we so many plans under that umbrella and discussed not to stop trying and the plans we were covered under also reviewed the com Erica, savings plan. The dr said he thought of Butrans because its less doses a month and less work for the staff. I said that's great, but also discussed naive study....pain scores, how they could supplement w NSAID and he could use it elsewhere. Showed Maria. The age, her illness, and the NSAID she was talking.....why shouldn't Butrans be her first opioid? Dr said he was sold, he just needs to find someone on a commercial plan. I said sounds great. Dr told me he was having a few med students in the office at 2 for lunch. I offered to bring lunch and had a Butrans video that would be s identification for them to learn from. Dr agreed.
PPLPMDL0020000001	Cleveland	OH	44113	10/16/2013	Quick reminder on Butrans, for those Tramadol failures requiring around the clock analgesia. Intermezzo for MOTNA/dosing , Said she will keep in mind.
PPLPMDL0020000001	Richmond Heights	OH	44143	10/16/2013	I dropped in to speak w/ Sheila Harris to schedule an in-service on pain as she requested. I was informed by the receptionist, Darlene that Sheila was not available. I left my business card and followed up with a phone call, N/A, I left a message on her voicemail
PPLPMDL0020000001	Westlake	OH	44145	10/16/2013	Discussed Butrans. Dr was not familiar with this product. In depth over view using 30 percent pain reduction insight, naive study and Maria profile. Dr said for atc pain after NSAID would use Tramadol. I asked why she said it has less abuse potential and less side effects. Reviewed Butrans, discussed abuse potential and not to apply direct heat such as so asking in a tub for example with the patch on. Showed the demo patch and discussed placement. Also showed her the adverse relations from the core visual aid. Told her I had no comparison between other products and Butrans but she could review it. Dr said nothing seemed too high. She asked about dosing, she thought it was a 3 day patch. Discussed 7 day patch, therefore 4 applications a month. Dr started to name a few patients to her ma that might use Butrans. I asked why they came to mind first. And she said one of the patients hates taking pills and this could be an option for him. Dr asked about oxycontin a reformulation and asked if the product was different now. I said it was still oxycodone single entity. Gave her the reformulation leave behind and discussed a few areas. Discussed it still had abuse potential. Review of cost, also about commercial insured patients. Dr said she wrote intermezzo before, but didn't remember why she wrote it. Discussed indication and dosages. Also worked with Val the ma who handles the pa since she would be the point person on e calls. Val was very familiar with intermezzo. And the dr writ
PPLPMDL0020000001	Richmond Heights	OH	44143	10/16/2013	I made a drop in visit to speak with Joan Southard to see about scheduling a future in-service. I was informed by the receptionist, Cheryl that Joan was in a family meeting I left my business card along with Purdue Pharma's nurse educator brochure.
PPLPMDL0020000001	Akron	OH	44333	10/17/2013	Discussion over lunch about all products. I asked Stephanie about her patients and what she is seeing most? She said that she typically doesn't see patients other than those who are already on ER opioids. I asked her if she sees any on IR at all? She said yes, some but the majority are already on OxyContin or Butrans. I asked her if she has had the opportunity to discuss the patients success or failure on Butrans or OxyContin? She said yes and she knows that most are doing fine but leaves the titration up to the doctors. I discussed how she can assess patients that are appropriate for Butrans or OxyContin correct? She said she does and then discusses it with the doctors. I reviewed Butrans dosing, titration, appropriate patients and steady state as well as insurance and copy cards. OxyContin dosing, titration, steady state and tailoring the dose. Finished with intermezzo and asked her to listen for patients tell her that they have trouble getting back to sleep after waking up.
PPLPMDL0020000001	Parma Heights	OH	44130	10/17/2013	I was in the area and made a drop-in visit to meet w/ D.O.N., Katherine Myers to introduce Purdue's Nurse Educator Program. I spoke w/ the receptionist, Sherry Majoris, who informed me that Katherine, was in a meeting. I left my BC and later called to follow up, but I received her voicemail. I left a message that I would like to set up an appointment with her to discuss educational in-service opportunities..

PPLPMDL0020000001	Cuyahoga Falls	OH	44223	10/17/2013	Spoke with pat the pharmacist about new Butrans 15mcg. I told him that Barry told me a few weeks ago he would get it in stock. Pat said he doesn't see it in yet but will order for sure. I asked him how much of each dose he has been ordering. Pat said the overwhelming dose ordered is the 20mcg. 10mcg dose next then 5mcg. Pat said he knows the 5mcg will move based on those numbers. Reviewed patient types for Butrans and OxyContin and asked about his stock of copy cards for Butrans and OxyContin? Pat had no OxyContin cards left and outdated ones for Butrans. Reviewed new cards and to make sure he gives them out for commercial patients if they don't have one already.
PPLPMDL0020000001	Akron	OH	44333	10/17/2013	I asked dr what he is currently doing for patients that come in on tramadol or vicoden and complain of pain? Dr said he would like to think about morphing them to an ER opioid. I asked him if there is any hang up with doing so? Dr said a couple which are convincing the patient they need an ER opioid and cost. I told dr that he should tell the patient which therapy may be best suitable for the patient and say with conviction! I told dr that he is the specialist and that he should provide sound reasoning as to why an ER opioid is best. I told dr to think more Butrans when patients are needing a dose adjustment on tramadol and vicoden and OxyContin for patients needing an adjustment on Percocet or not taking the IR oxycodone as he has prescribed. Dr agreed and said he will think more Butrans and said he wanted a review of insurance the next time I visit.
PPLPMDL0020000001	Mayfield	OH	44143	10/17/2013	Intermezzo reminder, savings cards, trial cards. Dr Mandel, while I realize you've told me it would be rare for you to initiate Butrans, I would like you to review this opioid naive trial & discuss further next visit. He says "I don't want to jump into Butrans" right now but I'm happy to look over your info". Fair enough I said. He then asked for my business card. He says he just returned from the annual Rheumatology conference. Their group needs support as well as information about new products. Perhaps Purdue can get involved in some way with exchange of information for fall of 2014 conference. He will have a committee member contact me, then we can connect Purdue with appropriate planning person. E says thus committee was involved in Ohio house Bill 93. Ok dr Mandel sounds good, I will look forward to hearing from you.
PPLPMDL0020000001	Cleveland	OH	44115	10/17/2013	Intro. Butrans 15mcg. George hasn't seen any yet. Reviewed OxyContin dosing strengths
PPLPMDL0020000001	Parma	OH	44129	10/17/2013	Followed up the availability of Butrans 15 and asked if she had some patients she was considering. She said there was a patient who she was considering but he developed a rash. I asked was this the patient she previously mentioned to me that I entered an adverse event for and she said yes. I reviewed Intermezzo indication and she said it is being used in the nursing home. Left OxyContin titration guide said that even though she does not prescribe it there are patients that come to her already on OxyContin and I wanted her to under.
PPLPMDL0020000001	Uniontown	OH	44685	10/17/2013	Good discussion on all products over lunch. I led off with the insight on hydrocodone and asked him his thoughts. Dr told me that it doesn't apply because he said he does whatever he can do to get his patients on extended release opioids as soon as possible. Dr said he doesn't want to mess will the things that are involved in keeping patients on short acting opioids. I asked dr how soon on average does he convert patients to ER opioids from hydrocodone? Dr said he will allow the patient to have no more than 20mg a day of any opioid and if they have been on it for more than 6 months he converts them anyway. I asked dr which ones he moves to? Dr said he has been using a lot of OxyContin and finds it works well and is covered on insurance. I discussed the dosing options and titration. Dr said he likes Butrans a lot but early on had issues with insurance coverage but said over the last month things have gotten better. I discussed dosing and patient type selection. Dr said he wishes more of his patients could use it because it does work well. I asked him why he can't prescribe it more? Dr said he plans to and asked about insurance coverage with BWC and Medicaid. I discussed BWC is still paying for it and discussed the Caresource PA. Dr said he didn't know about BWC and that he will use it more for those two patient populations. Intermezzo indication, dosing and limitations of use.
PPLPMDL0020000001	Cleveland	OH	44113	10/17/2013	Reviewed OxyContin Tablet strengths along with formulary coverage, said he is a confident treater. Referring most chronic/long term patients to PM Discussed 30% pain reduction, 2 point pain reduction, said it was significant, went over Butrans initiation/titration, 15mcg/hr and formulary coverage.
PPLPMDL0020000001	Cleveland	OH	44113	10/17/2013	Reviewed OxyContin Tablet strengths along with formulary coverage, said he is a confident treater. Discussed 30% pain reduction, 2 point pain reduction, said it was significant, went over Butrans initiation/titration, 15mcg/hr and formulary coverage. Concerns with BWC this week.
PPLPMDL0020000001	Cleveland	OH	44114	10/17/2013	Reviewed Butrans for those Tramadol failures for patients requiring around the clock analgesia. OxyContin Q12h, titration and broad formulary coverage
PPLPMDL0020000001	South Euclid	OH	44121	10/17/2013	Lunch. IR oxycodone insight. he will consider converting patients earlier to controlled release OxyContin. dr Flagg says he uses OxyContin on regular basis, likes efficacy of product has no issues with coverage or cost. We review the START principles, they offer you assistance with conversion, titration& act as a reminder to continually re assess your patients. We went through each of the 7 doses, we discussed steady state & ability to titrate every 1-2 days if needed. He will continue to write OxyContin. Let him know of \$90 savings cards he says he hates having to remember savings cards, concern with them expiring. I stated how about asking you ma Jen to and out, he says he doesn't want her to have to worry about them either. I let him know I will speak to Jen about med d & commercial coverage & leave grids @ his primary office. Butrans, used pain reduction insight. Then went through opioid. Naive BUP 3024 page by page. He was impressed by 4.6 reduction in pain score. In the middle of detailing, he asked how much is Butrans for a cash paying patient? I replied its over \$300 per month, so that's why it's critical for patients to have access to trial, savings cards. I told him I leave at pharmacies& many pharmacies use Relay Health, a point of sale savings program. I told him if any patient needs a card, & it is not available at pharmacy, to have Jen call me, give me pharmacy name, & I will drop off @ pharmacy for patient to pick up. He replied, ok, just make sure cards there
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	10/17/2013	I reviewed the opioid naive trial with dr hitting on inclusion/exclusion criteria, efficacy, titration and safety. I asked dr what he is currently doing when patients on NSAIDs need an adjustment? Dr said he is usually moving them to a short acting opioid. I discussed how Butrans may be a good option for patients that may not be suitable for a short acting opioid. I told dr about conversions, patient types and site applications. Dr said he knows he has room for it but will be very choosy. I told dr that it is a good idea to be choosy about patients appropriate. Showed him the demo patch and asked for his commitment to try it. Dr said ok.
PPLPMDL0020000001	Independence	OH	44131	10/17/2013	Dr was unavailable to speak with me and so was his pa. Reviewed flexible dosing and left OxyContin titration guide. Reviewed opioid naive study with Judy his ma.
PPLPMDL0020000001	Parma	OH	44129	10/17/2013	Dr said she uses 25% of the daily dose of oxycodone for breakthrough pain and she uses OxyContin because she believes morphine is constipating. She was not aware of the flexible dosing and said she will use the titration guide as a reference. She was not aware of the 15 and 80 mg. she said Butrans does not provide her patients with the pain relief they need and I asked who she tried it on in the past. Dr gave Butrans to a younger patient and experienced insurance coverage problems. I reviewed the titration guide.
PPLPMDL0020000001	Cleveland	OH	44113	10/17/2013	Discussed Butrans for those LorTab failures requiring around the clock analgesia. Reviewed 15mcg/hr dosing/Initiation/Titration. Said as always he will keep in mind. OxyContin flexible dosing strengths, Initiation/Titration
PPLPMDL0020000001	Cleveland	OH	44115	10/17/2013	visited Pain mgmnt ctr. Reviewed OxyContin and Butrans Initiation/Titration guides
PPLPMDL0020000001	Stow	OH	44224	10/17/2013	I told dr that I am guessing that he prescribes tramadol and vicoden? Dr said he does. I asked him what the prescription look like when he writes it? Dr said he will write it either 1-2 pills q4 or q6. I asked dr how often he believes his patients follow the plan that he sets for his patients. Dr laughed and said he patients either take the medicine too often or not enough. Dr said he has to take additional time with patients when they come in for follow up appointments because of them not doing what he has said. I asked dr what impact on him and his patients a 7 day transdermal system might have in patients following his plan for analgesia? Dr said that he never thought of it that way and that I made him think which is good. Dr said that he will keep Butrans in mind. I told dr to keep Butrans in mind when he goes to refill a IR opioid. Dr said ok.
PPLPMDL0020000001	Parma	OH	44134	10/17/2013	I completed a pain management in-service for nursing students from Honduras College, who are doing clinical's at this LTC facility. 10 were in attendance. The pain comfort assessment guide was handed out and reviewed with the students. Discussion and interaction took place. Several different types of pain along with barriers that interfere with assessing and managing pain and consequences of unrelieved pain were presented. The nursing instructor, Janine Messer was impressed with the presentation and inquired about other presentations available for her students. She inform me that they will be at this facility for the next 10 weeks and was interested in me presenting an in-service on constipation. I emailed the staff development Coordinator of the facility, Linda Belford and she will arrange the in-service. I also had the opportunity to speak with nurse practitioner, Kathryn Zaback on residence currently being treated with Butrans. Kathryn said "right now I think we have one resident on Butrans but I can't recall the diagnosis"
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	10/17/2013	Spoke with pharmacist about ordering Butrans 15mcg and was checking back to see if Cardinal had it in stock in their system? Pharmacist said that they do now show the 15mcg and have a qty of 17 in hand. She asked me if she thinks she will get prescriptions for it and I told her for sure they will 100%. She said she will speak with the pharmacy manager to see if they can order it.
PPLPMDL0020000001	Cleveland	OH	44113	10/17/2013	Quick Butrans reminder for those Tramadol failures requiring around the clock analgesia, MedCo/ESI formulary status. Said OK will consider
PPLPMDL0020000001	Akron	OH	44310	10/17/2013	I led off by asking dr when he has a patient on a short acting opioid like vicoden what the prescription looks like? Dr said it depends on the patient. I asked if he usually prescribes q6? Dr said yes, he will never prescribe more than 4 times a day for a short acting. I asked him how often those patients follow he guidelines and prescribing of that q6 regimen? Dr said not very often and stopped me and said he has a few patients on Butrans. I told dr its good he already knows I have Butrans and asked him what it would mean to his patients to only have to administer one patch a week for a month? Dr said it would make a big difference for many patients. I asked him the next time he goes to fill or refill a patient on their short acting to consider Butrans? Dr said he will.
PPLPMDL0020000001	Stow	OH	44224	10/17/2013	Reviewed the OxyContin Maggie profile for OxyContin and asked her opinion of the therapy. Dr said the patient did need to be put on OxyContin but said she would not have let the patient get to 80mg of Percocet. I agreed and she said she would have put the patient on 20mg of OxyContin q12. I asked her to take patients on 20mg of Percocet who need a dose adjustment and use OxyContin 10q12h. Dr agreed. I showed her the vicoden profile for Butrans and asked her to gain clinical experience when those stints need a dose adjustment.
PPLPMDL0020000001	Cleveland	OH	44114	10/17/2013	Reviewed OxyContin Q12h flexible dosing strength and broad formulary coverage. Butrans 15mcg/hr intro along with MedCo/ESI formulary coverage. Dr said he will keep in mind
PPLPMDL0020000001	Akron	OH	44319	10/18/2013	Followed up with dr from recent lunch and asked him where he is using OxyContin most often and what he is treating. Dr said he usually will not allow a patient to have more than 3 or 4 Percocet a day. Dr said if they get to that level he will convert them to OxyContin. I asked him to also consider the other end of the spectrum in treatment and what he does with his patients on tramadol who need an adjustment? Dr said knows know that Butrans can be used there. I agreed and said I'm glad he remembers our discussion. I told him to use Butrans and gain some clinical experience in that place. Dr said he plans to.
PPLPMDL0020000001	Cleveland	OH	44124	10/18/2013	Receptionist met assed Mary, looked at info I wanted to leave & freaked out when she saw OxyContin materials. Mary then went back to dr Guyuron RN Janine and also to another RN Terri. she says Terri does not want to talk with me at all. They have a total of 8 plastic surgeons there at the surgery Ctr. & the nurses said NONE of the doctors use OxyContin I also left information on Butrans & Intermezzo. I waited 20 mts to talk with RN & they said Wed & Fri are very hectic days. Best to stop other days. Dr is also chairman & professor of department of plastic surgery, case western reserve, Butrans mark g checked & dr g is full time in my territory.
PPLPMDL0020000001	Cleveland	OH	44109	10/18/2013	Followed up with Marcial(hospital nurse educator). Info was forwarded to PMR and IM depts.
PPLPMDL0020000001	Hudson	OH	44236	10/18/2013	Quick hello though window and asked dr if he knew about the 15mcg dose of Butrans? Dr said no and asked for the information. I gave him the piece and asked him if he will use it? Dr said for sure he will and said he knows of a couple patients now that he may need to move to the 15mcg and was hesitant to move them to the 20mcg. Dr said thanks. Nothing else learned.
PPLPMDL0020000001	Tallmadge	OH	44278	10/18/2013	I led off with the insight about hydrocodone and asked him what he sees in his practice? Dr said he doesn't prescribe many vicoden for patients but said he can understand why patients are kept on it. I asked why and he said its because of either cost or it works well. I told him that may be true but to focus on patients with commercial insurance and Caresource. I asked him if he thinks its ok if his patients are on short acting opioids for long periods of time? Dr said no but there is nothing he can do about it. I told him there is which is to prescribe long acting opioids where appropriate. Dr said ok. Gave him OxyContin dosing, conversions and asked for more business. Intermezzo indication and dosing and asked him to identify a few patients and to try it.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	10/18/2013	Followed up with dr about the PA he had w/ the UHC community plan. I explained to dr that the p an is a Medicaid plan and this is their PA criteria. I asked if he did a peer to peer and if he would do it in the future to try to they the medication his wishes to prescribe go through? Dr said thanks for researching however he got it covered. I asked how and he said the practice has a plan in place to get PA's pushed through. I told dr that is great and to continue prescribing to which he agreed and said he loves Butrans. I told him to also continue prescribing OxyContin and to utilize all 7 doses and reviewed the tailoring part of the start principles. Dr said ok.
PPLPMDL0020000001	Beachwood	OH	44122	10/18/2013	Spoke with Roberta recent Butrans patient and what did they present with. She said that was not a patient she initiated but a follow up of dr yokels. I asked if she initiates and she said sometimes and I reviewed the opioid naive study for Butrans. She said she did it off see patients that were opioid naive. Reviewed flexible dosing of OxyContin.
PPLPMDL0020000001	Beachwood	OH	44122	10/18/2013	Discussed Butrans patient Maria and asked dr if she had patients in need of a long acting medication. She said she sends those patients to dr Chang and I asked about her osteoarthritis patients and she said I had a point. I asked her to review the Percocet conversion guide in the titration booklet for OxyContin
PPLPMDL0020000001	Cleveland	OH	44113	10/18/2013	Reviewed Butrans Ohio BWC formulary status with Dr. and Aurora, dr said thanks for the clarification. Also reminded of dosing and titration

	Mayfield Hts	OH	44124	10/18/2013	Since he was out first part of week at conference, he hasn't had chance to write the new 15 mcg titration dose, Butrans he's excited about new dose & will write soon for patients who need further analgesia after the 10 mcg hr. we discussed efficacy & safety of BUP 3024, after pain reduction insight. We also discussed pain reduction for opioid naive patients in BUP 3015. Reminded him he's speaking for me next Wed 10/23. For controlled release OxyContin, for patients taking 80 mg or more of morphine or equivalent, OxyContin is option. START principles to assist you with conversion titration, please remember 7 doses available & you can titrate in 1-2 days as needed, do to steady state of 24-36 hours.
PPLPMDL0020000001	Beachwood	OH	44122	10/18/2013	Tried to book lunch or see nursing staff but calendar was full and not allowed to speak with staff. Left OxyContin and Butrans titration guide.<font color=blue><b>CHUDAKOB added notes on 11/01/2013/</b></font>Marcia, did you see an RN, LPN, MA, or Office Manager. If not then this should not have been recorded as a call. From you call note, it doesn't look like you saw anyone.
PPLPMDL0020000001	BEACHWOOD	OH	44122	10/18/2013	Discussed Butrans 15 strength and how patients should be titrated. Reviewed start principle for OxyContin. Gave indication and limitation of use of intermezzo
PPLPMDL0020000001	Beachwood	OH	44122	10/18/2013	Tried to book a lunch with new doctor but the office said they are full for the year and have not opened the book yet. Gave my card for cancellations and asked to speak with nursing staff and was told no. Left OxyContin and Butrans titration guides
PPLPMDL0020000001	Lyndhurst	OH	44124	10/18/2013	Spoke to ma at front, they were on lunch break. Discussed OxyContin & purpose of START principles, (contained in our conversion titration guide) to assist the HCPS with conversion & titration. left 1 box cards. reminded office of new 15 mcg hr titration dose for Butrans, which is now available @ pharmacies. Left patient access guide for Butrans for dr roda. also Left Intermezzo HCP re assess brochure & 1 pack savings cards.
PPLPMDL0020000001	Mayfield Heights	OH	44124	10/18/2013	Met with office coordinator Denise. Waited for almost 30 mts for Gina, she was running late & behind for her first patient, she apologized she couldn't meet with me this afternoon, & scheduled me for appt 1:45 Mon 10/21. & said she would talk with me then. Reviewed Butrans Med D preferred status with Denise. Left a few new butrans FPI & 2 sliding dosers, reflecting new 15 mcg hr titration dose. Let Denise know I will drop her off new patient guides as soon as I receive.
PPLPMDL0020000001	Uniontown	OH	44685	10/18/2013	Dr came to window and I introduced the new Butrans 15mcg dose. I asked him with his last few prescriptions what e need has been to titrate the dose? Dr said that if he remembers correctly most of them he started on the 10mcg patch and doesn't remember moving them from that. I asked him if the need arises for additional analgesia to titrate to the 15mcg dose? Dr said he would because he's not keen on movie to the 20mcg. I asked dr if he will continue to find patients needing a dose adjustment on tramadol or vicoden? Dr agreed and said he would.
PPLPMDL0020000001	Akron	OH	44305	10/18/2013	I led off conversation by asking dr if he currently is prescribing and /or has patients on short acting opioids? Dr said he does. I asked him what the prescription looks like and he told me q6 for vicoden for example. I asked him how often his patients follow the plan he sets when he prescribes vicoden q6? Dr paused and said he guesses that's another reason why he should be using Butrans. I asked him what one patch a week might do for his patients in this situation? Dr agreed and said he likes it and will continue to prescribe. I showed him the OxyContin conversion and titration guide and asked him to continue finding patients needing dose adjustments on Percocet. Intermezzo dosing and indication and asked for him to identify patients.
PPLPMDL0020000001	Beachwood	OH	44122	10/18/2013	Quick call stressing OxyContin conversion from Percocet at the lower doses using the OxyContin titration guide. Left Butrans titration guide.
PPLPMDL0020000001	Cleveland	OH	44112	10/18/2013	Discussed Butrans for those Tramadol failures requiring around the clock analgesia.along with the new 15mcg/hr dose. said she will keep in mind. Also reminded of OxyContin Q12h flexible and 7 tablet strengths
PPLPMDL0020000001	Beachwood	OH	44122	10/18/2013	Reviewed the Butrans 15 with pharm tech and she said they were discussing ordering in a box. Reviewed the flexible dosing of OxyContin. Gave indication and limitation of use for intermezzo.
PPLPMDL0020000001	Brooklyn	OH	44144	10/18/2013	Quick Butrans reminder on MedCo/ESI formulary status, said that was good to hear, asked if that would help him remember to prescribe? said possibly. Also, reminded of OxyContin broad formulary coverage and Q12h flexible dosing strengths.
PPLPMDL0020000001	Brooklyn	OH	44144	10/18/2013	Window call. Reviewed Butrans MedCo/ESI formulary status along with OxyContin Q12h flexible dosing strengths and broad formulary coverage, said OK and will keep in mind
PPLPMDL0020000001	Munroe Falls	OH	44262	10/18/2013	I asked dr when she prescribes a short acting opioid for pain what it looks like? Dr said she will write it q4 or q6. I told her when she prescribes fir something it is basically a pan for care. Dr agreed. I asked her how often she believes her patients follow that care plan when it comes to pain? Dr laughed and said she knows they don't follow it that well and they either take too much or not enough. I asked her what one patch in a week could me to her and her patients when it comes to pain? Dr agreed and said that its a good way to look at it because she said it can get frustrating when they want their pain medicines too early. Dr said she can see herself using more Butrans and in that way. I asked for her to continue looking at her patients on Percocet and switch them to OxyContin when they are not to their pain goal. I asked her to identify more patients for intermezzo and went over a patient type who is appropriate from the approved piece.
PPLPMDL0020000001	Cleveland	OH	44113	10/18/2013	Reminded of the Butrans 15mcg/hr new dose with Justin, Also OxyContin Q12h along with Intermezzo for MOTNA/dosing
PPLPMDL0020000001	Cleveland	OH	44109	10/18/2013	Reviewed Butrans 15mcg/hr with tech. hasn't seen a RX yet. OxyContin Q12h dosing and Intermezzo for MOTNA/dosing. Filled a RX yesterday.
PPLPMDL0020000001	Akron	OH	44319	10/18/2013	I showed dr the Butrans conversion chart and pointed to hydrocodone. I asked him when he prescribes it what it looks like? Dr said 1-2 pills q4 or q6. I asked him how often he believes that plan of care and dosing regimen is followed? Dr said he knows that it makes sense to use Butrans and he just needs to find the right patient. I told him he have found many appropriate types of patients to which he agrees he has in his practice. Dr said ok and he will do it.
PPLPMDL0020000001	Akron	OH	44312	10/21/2013	Handed dr the doing guides for OxyContin and Butrans and told him that he needs to reassess some of his artists on IR opioids as possible candidates for OxyContin or Butrans. I told him the appropriate patient for each. Dr said he refills OxyContin and has not used Butrans yet but said he p, and to. I told dr to prescribe it and allow it to speak for itself.
PPLPMDL0020000001	Parma	OH	44129	10/21/2013	Followed u on lunch last week and discussed appropriate patients by using titration guide concentrating or hydrocodone doses and Susan profile. She said she like Butrans and is getting more use to prescribing since she attended the program with dr Moufawald. Reviewed titration of OxyContin. Discussed initiation therapy of intermezzo for patients suffering from motna
PPLPMDL0020000001	Akron	OH	44333	10/21/2013	Good discussion over lunch on all products. Discussed new 15mcg dose with her and explained all dosing, titration, appropriate patient types, initiation doses,patch description. I asked her if she has patients that are a fit for Butrans? Becky said that she mostly sees acute pain but occasionally sees patients with more chronic conditions. She said she will always to to dr Oyakawa to confirm her assessment of the patient but can see how she would use it for those patients. Discussed OxyContin dosing, conversions, use from Percocet and titration. Asked her if she has identified any patients for intermezzo and she said no but admitted that she has not been paying close enough attention to patients complaining of sleep awakening.
PPLPMDL0020000001	Akron	OH	44312	10/21/2013	I asked dr about his patients on Percocet and how often they might be following the dosing plan he sets for them. Dr said he doesn't know. I told him that there must be stints that either take the product too often or not enough. Dr agreed there may be some. I asked him if patients would follow a q12h plan for analgesia? Dr said sure. I asked him to continue to think about that and use more. Butrans dosing and 15mcg dose. Reviewed the appropriate patients and insurance plans. Intermezzo dosing and indication and asked him to identify a patient to trial it on.
PPLPMDL0020000001	cleveland	OH	44135	10/21/2013	Spoke to office manager and they request vendor pass sign up. However I did share the information on OxyContin and Butrans. Left reading materials for the dr.
PPLPMDL0020000001	Cleveland	OH	44109	10/21/2013	Quick Butrans review MedCo/ESI formulary status, said she that will help with coverage, Has a few patients they are filling
PPLPMDL0020000001	Cleveland	OH	44109	10/21/2013	Visited Senior Ctr/PMR floors, Left OxyContin/Butrans info.
PPLPMDL0020000001	Parma	OH	44129	10/21/2013	Gave 30% reduction insight and reviewed opioid naive trials. Dr nodded and we agreed to discuss at next lunch since last week was reschedule. Discussed conversion from Percocet to OxyContin. Asked dr to consider patients in need to pain relief a what a 30% reduction in pain would mean for them.
PPLPMDL0020000001	Westlake	OH	44145	10/21/2013	Spoke to Megan, discussed Butrans being a 7 day transdermal patch and having that coups where he will find it easier.
PPLPMDL0020000001	Fairlawn	OH	44333	10/21/2013	Spoke with sue and Gilbert about all products. I asked Gilbert if he ordered the Butrans 15mcg and he said he did. Gilbert said that he got a denial for OxyContin yesterday for a patient that had his commercial insurance changed to SummaCare and they would not cover the patients OxyContin. Gilbert checked with office and they were going to complete the PA. I discussed intermezzo indication and their stocking which they have both doses
PPLPMDL0020000001	Cleveland	OH	44114	10/21/2013	Discussed 30%, 2 point pain intensity reduction, Dr. thought that was significant, tied in Butran Opiod Naive trial, MedCo/ESI formulary status along with BWC. Said he has struggled with ins.coverage/cost for some patients but will continue to seek approval. Went over OxyContin Q12h, flexible dosing strengths/titration. Intermezzo for MOTNA/Dosing and trial cards
PPLPMDL0020000001	Mayfield Heights	OH	44124	10/21/2013	Met briefly with Gina, as she said office added 4 more patients to her schedule today, pain reduction insight BUP 3024, would like to go over trial in more detail next call. Focus was on 4.6 pain reduction , which she felt was good. Discussed steady state of 72 hours, when titration is possible. New 15 mcg hr titration dose to help tailor the analgesia for your Butrans patients who are appropriate for titration. Left new Butrans FPI. Reviewed Medicare D preferred status on Medco Express Scripts & Cigna. Reminded her that commercial pay patients should leave office with Butrans trial, savings card in hand. Controlled release OxyContin q 12 h when pain is more severe, & after Butrans 20 mcg hr, when patient needs further analgesia, Around the Clock , for extended period of time.
PPLPMDL0020000001	Akron	OH	44333	10/21/2013	Quick hello in hallway and handed him the Maggie profile. I asked him to review and get back to me. Dr said he will look at it now and said the therapy looks appropriate but said he would have started OxyContin when she got to 40mg of IR oxycodone. I agreed and confirmed where his limit is? Dr said it is but its not set in stone, every attention is different. I told dr to again start on patients who may be under the 40 mg of Percocet. Dr said ok.
PPLPMDL0020000001	Westlake	OH	44145	10/21/2013	Discussed Butrans patch and the reminder of the new dose, 15mcg. Explained it was a titration dose and explained where the patches are placed. Discussed coupons available from doctors and what the savings progrAm means for commercial insured patients.
PPLPMDL0020000001	Cleveland	OH	44109	10/21/2013	Visited Ortho Dept. Left OxyContin/Butrans Initiation/Titration guides for Dr. Feighan,Wilber,Patterson, Sontich, Steinmetz, Thompson
PPLPMDL0020000001	Cleveland	OH	44109	10/21/2013	Visited PMR- 2nd floor Dr. Wilson,Forster-Pausen-NP, Mejia, Nemanatis, Cui, and Gantner. Wed.. Left OxyContin/Butrans info (Initiation/Titration
PPLPMDL0020000001	Cleveland	OH	44109	10/21/2013	Visited Ortho/PMR/IM depts. Left OxyContin/Butrans info (Initiation/titration
PPLPMDL0020000001	Fairview Park	OH	44126	10/21/2013	Discussed the fpi dosage update w the 15 and asked if he has at patients currently on 10mcg. He said a few. talked about during their assesment visit....Titration a min of 3 days. Also spoke on toleration based on the naive study....how patients were forced titrated from 5mcg to 10 or 20 with in the first week. And the conclusion of the study showed that 53 percent of patients had at least a 30 percent pain reduction. Dr said and u and returned to his patients.
PPLPMDL0020000001	Westlake	OH	44145	10/21/2013	Came in to see if I can get a unch Wednesday, maybe they are booked right now. Gave the ma the updated fpi and a few updated marketing pieces with the 15mcg on it. Discussed new FDA approved dose and what Butrans is. Ma said to dr there is a new dosage for Butrans. Dr said asked what. Discussed always start a patient on the 5 or perhaps the 10mcg. But titration dose of 15mch. Easy to remember our dosages now....5, 10,15,20. Told her I was trying to get a lunch soon to discuss how the 7 day Butrans patch works.
PPLPMDL0020000001	Westlake	OH	44145	10/21/2013	Asked what he does when patients can fall asleep but have trouble with middle of the night awakening? He said he tries non medications and sleep aids. Discussed his lackof experience with intermezzo. Dr said he would think about it. Talked Butrans, 7 day transdermal patch. Dr doesn't write pain medications.
PPLPMDL0020000001	Fairlawn	OH	44333	10/21/2013	Led off with dr about discussion about patients following a dosing regimen for short acting opioids. Dr said she has had such limited experience that she doesn't know but figures that its a se-saw battle with patients to make sure they are taking their medicines correctly. Followed with insight about hydrocodone and asked her her thoughts? Dr said she thought the 41% is really high but said she still has not had expertise with ER opioids yet. I introduced Butrans and OxyContin. Covered all key selling messages for each and asked her opinion on Butrans? Dr said that she likes that its a patch and a schedule 3. I reviewed the copy cards, efficacy with opioid naive and experienced, safety profile and insurance. Dr said she likes the copy cards and will look to implementing. Dr said she isn't keen on OxyContin but knows that it a good medicine for the right patient. Introduced intermezzo doing, indication and limitations of use. Dr said she will review the information.
PPLPMDL0020000001	akron	OH	44333	10/21/2013	Dr told me that he has a patient in his nursing home he wants to out on Butrans and asked which dose he should start on. Dr said patient is on vicoden 5/325 TID and said he is not sure if he should start on 5 or 10mcg. I told dr the approximate conversion says 10mcg and told him that its up to him to determine which dose to start on. Dr said he thought he should start on the 20 mcg and has Caresource. I explained Caresource PA and dr said he will start.
PPLPMDL0020000001					

PPLPMDL0020000001	Akron	OH	44333	10/21/2013	I made a Phone call to speak w/ Ramona Watson, and present Purdue's Nurse Educator Program. I was informed that she was not available. I left a Msg. on her voice-mail.
PPLPMDL0020000001	Cleveland	OH	44113	10/21/2013	Quick call saw Dr. in Hospital. Reminded of Butrans for those Tramadol failures that are requiring around the clock analgesia. OxyContin 7tablet strengths. Said he will consider
PPLPMDL0020000001	Cleveland	OH	44113	10/21/2013	Quick OxyContin reminder Q12h, 7 tablet strengths along with broad formulary coverage. Butrans- for those patients requiring around the analgesia. Dr. said he referring patients to Dr. Jerry 2A
	Westlake	OH	44145	10/21/2013	Lunch, in w dr Seikel. Discussed OxyContin, she said she was amazed it wasn't generic. We talked about if she felt the product worked to control pain pretty well and she said yes we talked a out the product bing single entity and why would someone write Percocet 3 or more times a day when they could write OxyContin. She said cost Nd habit. Discussed commercial savings plan and remind her that OxyContin was not to be used in a acute pain patients. Dr never heard of Butrans. Discussed the deliver system, and about the abuse potential. Discussed commercial insured saving plan. Showed dr Seikel and dr cheriyan the Butrans vinyettes, they picked the Tramadol lady and plugged in that it was 5 percent of their patients. Drs also asked about patch location, reminded not to return to the same sight u Tim 21 days, showed the adverse reaction chart and the percent of rash. They asked about how many patients patch fell off and I reviewed the naive study and said 10 percent failed due to application error, he said that was high. I said over 53 percent finished the study though, and she said that's a good point. Discussed if she saw a fit for some patients and they both said yes. Detailed intermezzo, dosage and indication.
PPLPMDL0020000001	Cleveland	OH	44109	10/21/2013	Went over OxyContin Q12h, savings card, with Floater, Butrans 15mcg/hr dose, will order in when RX is presented, next day delivery. Will remind Mary.. Intermezzo for MOTNA/Dosing-Trial cards
PPLPMDL0020000001	Brooklyn	OH	44144	10/21/2013	Quick OxyContin/Butrans window call, reminded of MedCo/ESI Butrans coverage for those Tramadol failures requiring around the clock analgesia along with OxyContin broad formulary coverage. Dr.said thank you and will keep in mind
	Westlake	OH	44145	10/21/2013	Saw dr, reminded him of last weeks OxyContin reminder for patients being reassess this week if they were being doses 3x a day or more on Percocet to move them to OxyContin q12h. Also gave him initiation guide. I said here ya go, keep this cheat sheet buy sou will no when to start patients n 5mcg or the ten mcg of Butrans and do forget u have 2 coupons on ur desk to start someone this week. He said ok.....
PPLPMDL0020000001	Euclid	OH	44117	10/21/2013	I placed a call to staff development coordinator, Ruth Rossi to confirm in-service on pain documentation for tomorrow 10/22. I was informed by the receptionist that Ruth was in orientation she took a message to have Ruth call me back.I received a call from Ruth stating that she will have to cancel the in-service for tomorrow because she failed to put in on her calendar. I reminded her about the in-service on pain documentation for this Thursday October 24 as well . she stated, "I will have to get back with you about the in-service scheduled for this Thursday."
PPLPMDL0020000001	Fairlawn	OH	44333	10/21/2013	Led off with discussion about patients following his dosing regimen of q4-6 of hydrocodone. Followed up with insight on hydrocodone. Dr said that he knows that patients are left on their short acting products. Dr said if a patient is doing well, not complaining and not needing another Rx early then he doesn't have an issue with it. I asked dr what those patients would think of a q12 dosing or a once last week transdermal system? Dr said he understands that he has patients he should probably switch to ER opioids but he thinks that if its not broken, don't fix it. I asked him how he knows if its not broken? I told dr that there is no way his patients tell him everything he needs to know about their pain. Dr agreed and said he needs to get better at asking the right questions. I told him to focus on that and to take an extra second before refilling Percocet or tramadol. Discussed all key selling messages for each and asked him for more business. Reviewed intermezzo key messages.
PPLPMDL0020000001	Westlake	OH	44145	10/21/2013	Lunch. Dr said he hasn't written it because he didn't no anything about it yet. Discussed it was a 7 day patch, buprenorphine, schedule 3 opioid. Discussed his current patients on NSAIDs and what happens when their pain is no longer controlled. Dr said he will use a short acting opioid. I said, this is wherein like u to consider Butrans. Asked how he felt about using an extended release product for a patient like Mary (profile). He said he wasn't opposed. He said it was a lot less pills. I said it was 4 patches a month, each worn for 7 days. We discussed patch placement, not going back to same site for 21 days. I asked if he could think of anyone off hand that he could try the patch to gain experience and showed him the Butrans vignette options to pick. He said he might try at the nursing home first. I reviewed Medco part d coverage and discussed savings plans for all products. Discussed pain score reduction and asked if this information was valuable to k ow and the dr said not really that he would rather hear about Saftey and cost. Discussed abuse potential for all 3 products. Discussed adverse reactions observed in naive study, dr said seemed in line w other opioids. Asked about dosing, starting patients and asked about the elderly. Used the fpi and showed him section 8.5 and pointed out how many patients were 65 and older in the naive tudy, which he thought was low. Discussed avoiding direct heat to the patch and used section 5.13dr said he would write it.
PPLPMDL0020000001	Akron	OH	44312	10/21/2013	Spoke with dr over coffee and asked him to think about the patients he has on short acting opioids who don't follow the dosing plan set for them. Dr said he has many that don't do what he tells them. I asked him if his patients would follow a plan of one patch in a week? Dr said he understands that he knows he should use more Butrans and agrees that the one patch a week is big. I told him that even though he has not seen the results from Butrans he is seeking yet, to stay the course and continue to identify the right patients for the product. I discussed the tramadol and viconden patients. I asked him to continue thinking about using OxyContin for those patients who can't follow e,p an set for Percocet. Intermezzo Caresource coverage and asked him to look for patients to which he agreed.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	10/22/2013	Spoke to Carrie the pharmacy technician about offering of the 15mcg dose. She said that they do not have it on the shelf but can order it in next day. She said they have patients on the 5 and 10mcg doses and asked about copay cards. Reviewed copay cards and she said one of the patients could use it. I discussed how drs should be providing them to the patients. Discussed OxyContin and how much they see. She said it is steady and most are refills. I asked about patients titrating doses and she said she doesn't see much. Intermezzo dosing, and indication. Carrie said they have not seen any prescriptions.
PPLPMDL0020000001	cleveland	OH	44135	10/22/2013	Spoke to office manager left coupons and discussed new mcg for Butrans, and how Butrans is dosed and paced.
PPLPMDL0020000001	Euclid	OH	44117	10/22/2013	I placed a call to NP, Lizeel Malibiran at 440-709-6028, I rec'd a non-personalized voice mail. I left a MSG Place a call to NP, Lizeel Mailbiran to set up an appt. to present Butrans
PPLPMDL0020000001	Cleveland	OH	44195	10/22/2013	Visited Anes/Pain dept left Butrans/OxyContin info for Stanton-Hicks,Leizman, Cheng, Crawford,Knaus,Vrooman
PPLPMDL0020000001	Cleveland	OH	44195	10/22/2013	Visited Neuro-C-21 dept. left Butrans/OxyContin info for Bamford,Dobrowski,Baugh. Left message for Kay-Bamford admin
PPLPMDL0020000001	Cleveland	OH	44195	10/22/2013	Visited Anes/Pain and Neuro depts. Left OxyContin and Butrans info
PPLPMDL0020000001	Westlake	OH	44145	10/22/2013	Spoke to office manager, they aren't taking lunches for January until December. Husband and wife team. Building 3 at hospital.
PPLPMDL0020000001	Mayfield Heights	OH	44124	10/22/2013	I made a drop in visit to meet with director of nursing, Saundra Brown and Introduce Purdue's nurse educator program and discuss educational in-service opportunities. I spoke with the receptionist, Teresa who said Saundra was not available. Later, I Placed a call to director of nursing, Saundra Brown at 440-473-0090 and left a message on her voicemail.
PPLPMDL0020000001	Akron	OH	44312	10/22/2013	Told dr in hallway to use Butrans for those patients of his needing a dose adjustment on tramadol. I asked him how many tramadol prescriptions he is refilling each month? Dr said he doesn't know but said its a lot. I told him to think about why he is refilling and about the ER option of Butrans for those patients meeting the indication. Dr said ok.
PPLPMDL0020000001	Lakewood	OH	44107	10/22/2013	Spoke to manager regarding Butrans and the patch technology with the extended release delivery system. Left her various marketing pieces to give to the dr.
PPLPMDL0020000001	Cleveland	OH	44106	10/22/2013	MSL meeting with Dr. Speicher to discuss status of OTR3001. Dr. Speicher noted that it has been impossible to identify a subject for the study and he would like to discontinue participation. Dr. Speicher is interested in future studies with PPLP.
PPLPMDL0020000001	Cleveland	OH	44111	10/22/2013	Spoke w office manager. Tried to see dr but they requested a vendor pass. I informed her of the new Butrans mcg and gave her various information to pass to the dr. I asked if she heard of Butrans and she said yes. Talked about pain score reductions based off the naive study.
PPLPMDL0020000001	Akron	OH	44312	10/22/2013	Discussed the 15mcg dose and asked her if she sees it fitting in as a titratable dose? Dr said she just prescribed a 10mcg Butrans the other day and said she has the feeling the patient will need more based on the chronic low back pain e patient has. Dr said she will go to the 15mcg for sure and then asked about cost. I asked her which plans? She said cash? I asked her if she has a lot of cash patients she is looking to start on Butrans? She said no but wants to know the retail price. I told her to have sandy call pharmacies her patients go to most often to get exact pricing. I told her cash patients can use the copay card to get up to \$50 off. Told her to use OxyContin for those patients on Percocet and want more. Intermezzo indication and dosing and asked her to identify patients. Dr said she probably won't use it.
PPLPMDL0020000001	Akron	OH	44310	10/22/2013	Led by asking dr about his patients on IR opioids and how often he believes his patients follow the pan he sets for them? Dr said they are typically dosed either q4-6 1-2 pills a day and that about 89% of his patients follow his plan. I asked if any of those patients need their prescription early? Dr said not much. I asked him to focus on that 20% that do not follow the plan and asked him what he thinks about the 7 day transdermal patch for those patients? Dr said that is when he has been using it recently. I asked dr to continue to focus on those viconden patients needing a dose adjustment as well. Reviewed OxyContin dosing and titration and asked him how often he needs to titrate? Dr said he does but not often and agrees with the start principles I reviewed. Reminded dr about looking for patients complaining of in the middle of the night insomnia.
PPLPMDL0020000001	Cleveland	OH	44195	10/22/2013	Visited CCF pain/anes. Dept. Left Butrans Initiation/Titration info.with Sue(nurse) along with card to set-up appt with Carrie
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	10/22/2013	Didn't have much time over lunch for discussion as she was way behind for the morning. I spoke with her about identifying patients not following the plan she sets for patients on IR opioids. Dr agreed she has plenty of those! I asked her about her thoughts of a 7 day transdermal option for those patients? Dr said she knows that a week long patch goes a long way with some patients and she really likes Butrans. Dr said she will continue to use it for the tramadol and viconden failures. Told her to think oxycontin for those patients and dr agreed. Reviewed the intermezzo indication, dosing and asked her to think of it when the trigger words are said by patients about waking up and having a hard time returning to sleep.
PPLPMDL0020000001	Lakewood	OH	44107	10/22/2013	Left materials behind when speaking with the ma, she wasn't familiar w Butrans as I explained what it was she asked about rash and about managed care coverage. I provided her with the information .
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	10/22/2013	Some with dr about all products and led off conversation with insight about hydrocodone and managed care. Dr admitted that it is easier to just refill the short acting medicines and believes the statistic. Dr said that she really tries to move patients to ER opioids but said that she really doesn't want to treat too much chronic pain. Dr said she has a patient with lupus who she is considering using Butrans for. Dr said she just will need to be careful and explain Butrans in detail about application sites and incidence of itching. I asked her to use Butrans for those patients needing a dose adjustment on tramadol or viconden and reviewed patient profiles. Discussed OxyContin conversions, patient types and insurance. Intermezzo indication, dosing and asked her if she would identify a patient? Dr said she would and asked about insurance. Discussed insurance and she said its not good.
PPLPMDL0020000001	Rocky River	OH	44116	10/22/2013	Spoke to office manager, dr is part time in this office and no longer goes to the Lorain office. Left various Butrans and OxyContin selling materials.
PPLPMDL0020000001	Lakewood	OH	44107	10/22/2013	Checked with the office manager on policy and access. Gave her limited information on Butrans because she was too busy she said to discuss the product. Se told me to return on a day they were not so busy to schedule a
PPLPMDL0020000001	Stow	OH	44224	10/23/2013	Spoke with dr on all products. Reviewed Butrans and hit all key selling messages. I spoke about identifying the appropriate patient for the appropriate medicine. Reviewed opioid naive trial, Scott and nancy profiles. Dr said he sees how it is a good option but said that he is always concerned about prescribing scheduled medicines. I asked dr if he is sold on the efficacy and safety and where to use it? Dr agreed and said that he may have a nit he for it. Reviewed OxyContin disingenuous titration, patient types. Dr said he will not prescribe for it unless he is refilling or already on Percocet. I told dr that that is a good place to use it. Intermezzo indication, dosing and Discussed all products with dr. Reviewed Butrans key selling messages and application sites, appropriate patients, titration and opioid naive trial. I asked dr if she understands the efficacy and safety as well as who is appropriate for Butrans? Dr said she does understand and said she needs to be careful who she starts on it and said she agrees its right for a tramadol or viconden patient. Discussed OxyContin indication, dosing and titration. Discussed conversions and asked her if she has experience with it? Dr said she does but most recently have been refills. Intermezzo indication, dosing and patient types.
PPLPMDL0020000001	Westlake	OH	44145	10/23/2013	Saw dr thru window. He said need a signature. I said no, I wanted to know what his thoughts are on extended release opioids in the primary care setting. He said ohhhh I refer those patients out and left.
PPLPMDL0020000001	Copley	OH	44321	10/23/2013	Led with hydrocodone insight and asked dr his thoughts? Dr said its because of cost plain and simple. I agreed that maybe cost is one of the reasons but probably a small one. Dr disagreed with me and said that Butrans is just too expensive for some patients. I agreed that is can be expensive for some patients and told him to focus on patients with private prescription insurance. Dr said ok. I handed him the OxyContin conversion guide and told him to review. David ok. I reviewed the intermezzo indication and asked if he has found any additional patients meeting the indication? Dr said no and its also too expensive.
PPLPMDL0020000001	Independence	OH	44131	10/23/2013	dr not located at this location
PPLPMDL0020000001	Cleveland	OH	44115	10/23/2013	Quick window call, Reminded of OxyContin 7tablet strengths, broad formulary coverage along with Butrans for those Tramadol failures requiring around the clock analgesia. Said he will consider. Left Initiation/Titration guides



	Westlake	OH	44145	10/23/2013	Spoke to dr about Butrans thru the window. he said he never heard of it. Asked he if ever treats patients atc w NSAIDs. He said yes....I said when their pain isn't controlled any long with currents treatment option then Butrans becomes an option for a patients with atc pain that an extended release delivery system may help. I explained it was a schedule 3 opioid, Wear it for 7 days, that's 4 applications a month and they can still supplement butans w their NSAID. These NSAID patients would start on 5 mcg and then can be titrated up aft 3 days....to 10, 15, 20. 20 being the max dose. Left him materials to review, naive study and fpi.
PPLPMDL0020000001	Parma	OH	44129	10/23/2013	dr not available until next week. left butrans titration guide and discussed oxycotin conversion from percocet
PPLPMDL0020000001	Akron	OH	44333	10/23/2013	Spoke with dr on all products. I asked him about his patients following the plan he sets for them on IR medications. Dr said he tries not to prescribe for the first time or refill IR opioids if he doesn't have to because a majority of his patients are chronic and the others are more acute or prn. I told him to keep Butrans in mind and died him what a 7 day transdermal patch could mean to those who don't stick to the plan. Dr agreed and said he continues to find new places for Butrans and said he will be looking to titrate a few patients to the 15mcg. I reviewed the inversions of his Percocet patients to Butrans and to remember intermezzo. Dr said he will continue switching Percocet patients to OxyContin instead of other ER opioids. Dr said he likes intermezzo but his patients can't get it covered by insurance and he wants to write more of it. I asked dr to continue trying.
PPLPMDL0020000001	Cleveland	OH	44113	10/23/2013	Reminded of Butrans for those LorTab failures requiring around the clock analgesia, Medco/ESI formulary status. Butrans 15mcg/hr. She said they are always looking to start new patients. Reviewed intermezzo for MOTNA/dosing, and Senokot
PPLPMDL0020000001	Cleveland	OH	44115	10/23/2013	Quick OxyContin inquiry in regards to savings cards, Ron said he is dispensing very little if any narcotics. Reviewed Butrans for those Tramadol failures along with 15mcg/hr dose presentation
PPLPMDL0020000001	Stow	OH	44224	10/23/2013	Reviewed new patient profiles for OxyContin and asked him his opinion on when to move to a product like oxycotin? Dr said he agreed with the profiles but would have wither started OxyContin earlier if he knew it was warranted or refer to pain management. Discussed Butrans and reviewed all key selling messages. I reviewed opioid naive trial and patient profiles. I asked dr if he feels there is a possibility to prescribing it? Dr said for sure but said he is going to be very selective. I told dr that is good to hear because its important. intermezzo dosing and indication and asked for a patient or two.
PPLPMDL0020000001	Copley	OH	44321	10/23/2013	I reviewed the s it and nancy profiles and asked dr what he thinks of the product? Dr said he likes that its a schedule 3, and lasts for 7 days. Dr asked what the cash price is of Butrans? I told dr I didn't know and asked why he wants to know cash price? Dr said it gives him a baseline idea if cost before insurance and copay cards come into play. I told him to have an office person to call the pharmacies his patients go to to get cash prices. Nothing else learned.
PPLPMDL0020000001	Euclid	OH	44117	10/23/2013	I placed a phone call to Ruth Rossi to confirm the in-service on pain documentation for tomorrow at 3:30 and 4. She informed me that she is extremely busy and asked if we could change the time to 2 o'clock and 330, times were agreed upon.
PPLPMDL0020000001	Cleveland	OH	44113	10/23/2013	Reviewed intermezzo for MOTNA/dosing, Trial/Savings cards, Dr said OK, will remember. Reminded of Butrans referrals for those Tramadol failures requiring around the clock analgesia
PPLPMDL0020000001	Stow	OH	44224	10/23/2013	Quick talk about Butrans after reviewing efficacy, safety and patient profiles. Dr said she knows that she should prescribe it but said its a habit for her and many doctors to refill or keep patients on their IR opioids. I told her that she and others may be missing opportunities to get patients on ER opioids that may be more appropriate. Dr agreed and said she will give it a try when she finds the patients I discussed.
PPLPMDL0020000001	Cleveland	OH	44113	10/23/2013	Reminded of Butrans for those LorTab failures requiring around the clock analgesia, Medco/ESI formulary status.15mcg/hr. Said OK, she is always looking to start a new patient.Left patient info booklets
PPLPMDL0020000001	Cleveland	OH	44114	10/23/2013	Reminded of Butrans for those Tramadol failures requiring around the clock analgesia, Medco/ESI formulary status. Said OK, she is always looking to start a new patient.
PPLPMDL0020000001	Bedford	OH	44146	10/24/2013	Spoke with crystal the ma and she told me the office does not do lunches but sometimes the other drs will allow me to bring a lunch but not dr azeem but azeem will sign for samples. I spoke with dr while he waited to sign and had the demo in my hand explained that he did have to sign for samples but i did have vouchers for my product. he said he was familiar with the duragesic patch and did not need vouchers. I explained what butrans was, giving the indication, explaining the matrix transdermal system and 7 day use. he raised an eyebrow. i explained positioning after tramadol and before vicodin while he returned to his office. I told him i would leave some oxycotin conversion from percocet information with crystal
PPLPMDL0020000001	Tallmadge	OH	44278	10/24/2013	I asked dr if he has had any opportunities identifying any patients for Butrans? Dr said he doesn't think so. I showed him the Scott profile and told him about the patients and asked him if he has patients like him? Dr said he probably does and took the piece. Nothing else learned.
PPLPMDL0020000001	Bedford	OH	44146	10/24/2013	spoke with tracj in the pharmacy and told her about the butrans 15. i explained that dr moufawald would be prescribing. I asked if they would bring in a box and she said she would pass my information to the head
PPLPMDL0020000001	Garfield Hts	OH	44125	10/24/2013	Left info for -General Surgeions/Ortho(Lopresti,Levine,O'brien Gemma,Forcier, Elkharl Pantec, Peralta-CCF(Lichenberger,Rapur),Sargento,Nowak, Love, Hauer=Kaiser surgeons) Left cards and info for Nursing Staff/Clinicians.
PPLPMDL0020000001	Bedford	OH	44146	10/24/2013	Dr's dont see reps unless requested
PPLPMDL0020000001	Bedford	OH	44146	10/24/2013	spoke with ed about the butrans 15 and asked about stocking. he said he will order when he gets a prescription. reviewed the decision tree for the butrans doses and reminded him that opioid experienced patients should be started on 10. reviewed the oxycotin start principles. left the intermezzo dosing and administration guide.
PPLPMDL0020000001	Waterford	OH	45786	10/24/2013	I-Butrans dosing, managed-care, Maria patient profile and co-pay cards. Butrans box warning. OxyContin dosing and managed-care. intermezzo indication.W-stated that she continues to need managed-care information for Butrans and OxyContin.
PPLPMDL0020000001	Richmond Heights	OH	44143	10/24/2013	I placed a call to Nurse educator, Sheila Harris to discuss scheduling in-service on pain management, there was no answer, I left a message on her voicemail.
PPLPMDL0020000001	Akron	OH	44333	10/24/2013	I told dr today that he needed to get started on prescribing Butrans. Dr said he knows and said that he met with Karen Hodakievic today and told me how much she was talking up Butrans. I asked dr what his hang up is with it? Dr said he just needs to look for the right patients. I showed him the Maria profile and explained it. Dr said ok and that he will start looking a little more closely. Reminded him about OxyContin dosing and where to use that
PPLPMDL0020000001	Waterford	OH	45786	10/24/2013	I-Butrans dosing, clinical trials and managed-care. OxyContin dosing and managed-care. intermezzo indication.W-stated that she has had a patient on Butrans recently and they did well.
PPLPMDL0020000001	Bedford	OH	44146	10/24/2013	spoke with dr about butrans for patients needing 7 day therapy and he said he always keeps butrans in mind. reminded dr of oxycotin flexible dosing. asked about patients suffering from motna.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	10/24/2013	Discussed with Liz And dr Pitt about using OxyContin for his patients going from Percocet. Dr said that's where he always uses it however he does use other long acting opioids. I told dr that i understand and that OxyContin isn't appropriate for everyone but when a patients is already in the oxydone family to not go outside that for a ER opioid. Dr agreed.
	Westlake	OH	44145	10/24/2013	Apt w dr. Discussed Butrans and his experience. Dr said he thinks it works if they will take a patch. I asked what were they on prior to Butrans. They said all sorts. I said do u every use Butrans earlier in their treatment for Atc pain. He said most his patient come to him that have tried a variety of there things. Reviewed the experienced study and the pain results. Discussed OxyContin....he said he uses it, and we reviewed the dosing along with the molecule and delivery system
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	10/24/2013	Spoke with Glenn about morphine equivalent for Butrans today based on new oarrs system. Giles's said he didn't know and its not that important. Glenn mentioned that he is getting a lot of rejections for Butrans and it is making it difficult on him and the drs because they really like it. I asked which plans and he didn't know but said various plans. I told him to please keep as many pa's as he could so I can help him and the RAE's can look into it or even go to the provider. Glenn said he will contact me once he gets some.
PPLPMDL0020000001	Richmond Heights	OH	44143	10/24/2013	I placed a phone call to Joan Southard to discuss future educational in-service opportunities. Joan said, "I haven't called you because we are under a remodel, and I have no place to set up for in servicing or meetings of any kind." Joan informed me that she has my business card on her desk and she will give me a call as soon as that remodel is completed, hopefully end of November or sometime in December.
PPLPMDL0020000001	Bedford	OH	44146	10/24/2013	introduced myself to dr and asked him how he treats pain. he said it depends and he saw that i had oxycotin. he started to end our discussion so i mentioned that i had butrans, a transdermal patch for pain the was a schedul 3 and used for 7 days. dr listed to the titration message and i gave 30% reduction in pain insight. let him know that i was not looking for new oxycotin patients but patients who have been on percocet for several months. I showed the conversion guide
PPLPMDL0020000001	Euclid	OH	44117	10/24/2013	I received a phone call this morning from Ruth Rossi Confirming the in-service for today due to bad winter weather conditions. I informed her that I would be there around 1:45 for the 2 PM in service.An in-service on pain documentation was completed with six nurses in attendance. The importance of documentation was discussed including continuity of care patient, patient safety and reimbursement. Documentation of a pain assessment and reassessment was also covered.I asked to speak with the medical director, Juanita Castaneda to introduce the 15 $\frac{1}{4}$ g Butrans patch. Ruth informed me that she was busy with a resident and not able to talk with me. I left a Butrans initiation and titration guide introducing the 15 $\frac{1}{4}$ g along with my business card.Ruth informed me that there is a hospice resident that would be a good candidate for the Butrans patch. She will consult with the physician on tx. I explained that I would check back with her in approx. two weeks. I offered to present Butrans to the nurses who will be caring for that patient once treatment has been approved and initiated by the
PPLPMDL0020000001	Cleveland	OH	44103	10/24/2013	Reviewed OxyContin Q12h, flexible dosing strengths,, Butrans for those Tramadol failures. Initiation/Titration
PPLPMDL0020000001	Bedford	OH	44146	10/24/2013	reviewed dosing strengths of butrans and explained the titration. spoke about the patient scott and asked if she had patients like scott who were in need of a dose adjustment or change in medication. she said butrans makes sense but the coverage is probably a problem and she refers chronic pain to the pain management dept. I reviewed oxycotin and flexible dosing. explained intermezzo indication and limitation of use
PPLPMDL0020000001	Euclid	OH	44117	10/24/2013	I made a drop in visit to speak with director of nursing, Kathy Nemeth to follow up from the Butrans in-service and see if they have had the opportunity to identify any patients for Butrans. Kathy stated that they have not yet started anyone on the Butrans patch. She asked me if I could do an in-service on intermezzo. The in-service was scheduled for Tuesday, November 19 at 7:30 AM 23:0 and 3:30 PM. I also met with the nurse practitioner, Liezela. A luncheon was scheduled to discuss Butrans for next Thursday, October 31 at 12 noon
PPLPMDL0020000001	Mogadore	OH	44260	10/24/2013	I asked to speak with dr ant Butrans and he came to the front desk. I told him that there is now a 15mcg Butrans dose. Dr said he saw it advertised in one of his medical journals and saw the stuff I left for it. I asked dr if he thinks there is an opportunity for it in his practice and he said he knows some of his patients on 10mcg could use the 15mcg. I told dr great and to continue using Butrans for those patients needing dose adjustments on tramadol. Dr said ok.
PPLPMDL0020000001	BEDFORD	OH	44146	10/24/2013	spoke with cheryl the pharm tech since the pharmacist was busy. asked if she has seen any butrans movement and she said no. i introduced the butrans 15 and asked about stocking. she said she would have to discuss with the pharmacist. i gave her the pharmacy guide for the pharmacist and reviewed the oxycotin conversion from butrans. gave intermezzo indication and limitation of use
PPLPMDL0020000001	Cleveland	OH	44114	10/24/2013	Quick Butrans reminder for those Tramadol failures requiring around the clock analgesia
PPLPMDL0020000001	Stow	OH	44224	10/24/2013	Dr dr at front counter that I wanted him to use the lower doses of OxyContin and showed him the conversion from Percocet 20mg to OxyContin 10mg q12. Dr said ok. I reminded him that I am waiting for his first Butrans prescription for his tramadol patients needing a dose adjustment. Nothing else learned.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	10/25/2013	Dr said he wanted a refresher because its been a while since he first heard about it. Discussed all key selling messages including efficacy, safety, and insurance coverage. I reminded dr that Butrans is a schedule 3 transdermal patch and discussed appropriate patients. Dr asked about insurance coverage and said he has a lot of medical mutual patients. I discussed tier status of Butrans and reviewed the trial card and copy card. Dr said he had a patient yesterday that he could of used it on in which the patient was on tramadol. I asked dr to gain clinical experience with it and he said he will use it. Discussed intermezzo indication, dosing and, limitations of use. Dr said he likes the idea but knows its tough to get covered. I reviewed the insurance plans.
PPLPMDL0020000001	Akron	OH	44320	10/25/2013	Checked in with dr about her use of Butrans for her patients on tramadol. I showed her th Scott profile and asked her if she has seen or will see patients today on tramadol? Dr said yes to both. I asked dr if he has had or will have patients on tramadol who need a dose adjustment? Dr said she may have one later today and will keep Butrans in mind. I left her with the dosing guide.
PPLPMDL0020000001	Chagrin Falls	OH	44022	10/25/2013	dr came back to get sandwich and said she has tried to prescribe butrans but she cannot get it covered for her medicare patients. i explained that this must not have been recently because butrans is on more formularies than before and cited cigna, express scrips, commercial plans and some workers comp. I reviewed the vouchers and she said she does not like vouchers because they expire after use and i explained the difference between the voucher and trial savings card. she said she would try again and i reviewed the clinical trials. told her i would leave the oxycotin conversion chart and pointed to conversion from percocet.
PPLPMDL0020000001	Bedford	OH	44146	10/25/2013	dr not located in this building.
PPLPMDL0020000001	Cleveland	OH	44102	10/25/2013	Quick Butrans/OxyContin reminders,OxyContin broad formulary coverage and Butrans Medco/ESI formulary status, Dr. was running over to the hospital, said he is usually over at St. Augustine on Thurs. mornings,

	Barberton	OH	44203	10/25/2013	Saw dr thru window. Last time we spoke we discussed the Butrans delivery system 7 days of buprenorphine...4 doses a month. Do u see this as a disadvantage or advantage for for uncontrolled NSAID patients needing the atc pain care. Dr said, he liked Butrans and walked away. Left the naive study and a variety of literature.
PPLPMDL0020000001	Barberton	OH	44203	10/25/2013	Spoke to ma upfront left her information on Butrans and she we discussed finding a way to see the doctor outside of lunch. Left a variety of leave behinds
PPLPMDL0020000001	Olmsted Falls	OH	44138	10/25/2013	I spoke with director of nursing, Pam Ritter. The meeting that was scheduled for November 4 at 11 AM to discuss educational in-service opportunities was changed to November 18 at 11 AM.
	Stow	OH	44224	10/25/2013	I asked dr Yang when he prescribes a IR opioid like vicoden what it looks like? Dr said it depends but typically its 4 to 6 times a day 5 or 10mg. I asked him how often his patients on this dosing regimen follow it? Dr said that some do and some don't. I asked him for those that don't what a 7 day transdermal system would mean to them? Dr said that he does like Butrans and tries to prescribe it more but insurance doesn't always pay for it. I asked dr which plan or plans and he didn't have any specific plans. I asked if he would make a copy of a PA form next time and show it to me. Dr said ok. I asked him to prescribe more Butrans for his vicoden patients.
PPLPMDL0020000001	Beachwood	OH	44122	10/25/2013	spoke with vicki about formulary coverage of oxycontin. shared with dr flexible dosing and conversion from percocet. asked about butrans patients and he said they are doing well and had to return to patients. left the conversion guide for his review
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	10/25/2013	Dr stopped down for a minute to grab something to eat and go to a meeting. I asked dr to continue identifying the right patients for Butrans and reviewed the dosing and 15mcg dose as one to titrate to if patients need more than the 10mcg. Dr said he continues to have good luck with it and will continue to write. Nothing else learned.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	10/25/2013	Dr told me when he saw me that my annoying persistence has paid off because he has prescribed it twice. I told dr that I'm glad he prescribed and asked him what the patients were taking previously? Dr said both were on tramadol and one was taking it 8 times a day. Dr said that both patients have called in to his office saying how great Butrans is and is working very well. Dr said both patients have commercial insurance and used the copay cards. Dr said he need more Butrans copay cards. I told dr to continue identifying the right patients and he told me he started both patients on the 10mcg dose. I discussed titration, steady state, and possible need for the 15mcg dose. Reminded of intermezzo dosing and indication and asked for him to also find patients appropriate.
PPLPMDL0020000001	Cleveland	OH	44113	10/25/2013	Quick OxyContin reminder Q12h broad formulary coverage along with Butrans for those patients requiring around the clock analgesia, Said ok and will keep in mind
PPLPMDL0020000001	Hudson	OH	44236	10/25/2013	Spoke to Beth the pharmacist about all products. I introduced the 15mcg dose and she said she has the NDC for it and cardinal has it in stock. I asked her about any prescriptions and she said she has not ever filled one. Reviewed the dosing, conversions and titration. Asked about OxyContin dispensing and she said they only have a few patients on it. Reviewed dosing and conversions. Intermezzo dosing, indication and asked her to recommend it to patients she hears meet the indication. Beth agreed.
PPLPMDL0020000001	Chagrin Falls	OH	44022	10/25/2013	office was not accessible but i spoke with ma about appointments and discussed oxycontin flexible dosing and reviewed butrans titration. no appointments or lunches but i can leave literature
PPLPMDL0020000001	South Russell	OH	44022	10/25/2013	reviewed clinical trials for opioid naive patients and titration guide. discussed flexible dosing of oxycontin. discussed indication, limitation of use and dosing of intermezzo for patients suffering from motna
PPLPMDL0020000001	Chagrin Falls	OH	44022	10/25/2013	no access but i spoke with the ma about future appointments. reviewed butrans titration guide. gave percocet conversion guide.
	C. Falls	OH	44223	10/25/2013	Spoke to Catherine the pharmacist about all products. I asked her if they ordered the 15mcg dose and she said they do have it all on the shelf. I asked if they have seen a prescription for it and she said she doesn't think so. Explained the conversion chart and titration. I asked about OxyContin dispensing and she told me that they continue to fill it and even get most of the pa's pushed through. I asked about any dispensing of intermezzo and Catherine said she has not.
PPLPMDL0020000001	Chagrin Falls	OH	44022	10/25/2013	gave 30% reduction insight and presented opioid naive clinical trial. dr has patient with "difficult to treat pain" and that patient now feels that 20 is maybe too much but dr did not want to drop to the 10. i introduced the 15. dr asked how to titrate down and i explained that i do not have a recommendation and there are no studies to support a recommendation. i asked if he has what he considers his most difficult patient on butrans and she is seeing results then how come he has not tried some less challenging appropriate patients on butrans since he said he likes to avoid vicoden and percocet. dr said he struggles on what patients to put on a long acting. i reviewed the inclusion criteria and asked him if he thought these patients were appropriate for a long acting and he said yes. i said in a patient like scott who is currently taking tramadol and has been for several months and has a known pathology would he consider scott an appropriate patient. he said yes and i asked him to consider butrans when he needs to make a decision on changing a tramadol patients medication. reviewed percocet to oxycontin conversion. reviewed intermezzo dosing, administration, indication.
PPLPMDL0020000001	Garfield Hts	OH	44125	10/25/2013	Reminded of Butrans for those patients requiring around the clock analgesia, MedCo and ESI formulary status. Initiation/Titration. Said he will keep in mind
PPLPMDL0020000001	Euclid	OH	44119	10/25/2013	No Drs in today. (Note: RN Cheryl out on medical leave) spoke with med asst Donna, made her aware of OxyContin convsion/ titration guide, left for Dr Saeed, Dr Nageeb. let her know of new 15 mcg hr titration dose for Butrans. Left Butrans marketing piece for Drs Saeed, Dr Nageeb & Dr Hsia.
PPLPMDL0020000001	Cleveland	OH	44106	10/25/2013	Left Butrans/OxyContin/Initiation/Titration guides for Dept. Requested appt. with Terrah-Dr. Hayek coordinator
PPLPMDL0020000001	Cleveland	OH	44106	10/25/2013	Visited Anes./Pain dept. Left Butrans/OxyContin Initiation/Titration guides. Confirming lunch appt. with Dept. with Terrah
	Akron	OH	44320	10/25/2013	Quick call in hallway and asked dr if she is going to see any patients on tramadol or vicoden today? Dr said he probably will. I asked him what he is currently doing of those whom still complain of pain on those agents around the clock. Dr said it depends on the patient but said he needs to keep the clock down. I asked him if he sees any commercial or Caresource patients. Dr said yes to both. Explained the insurance for both and copay cards and trial offer for commercial. Dr said ok and he will find the patients.
PPLPMDL0020000001	Chagrin Falls	OH	44023	10/25/2013	spoke with the pharm tech jim and asked if the 15 of butrans was in stock. he said he did not have one in the system or on the shelf. i reviewed oxycontin start principle and asked about oxycontin writers in the area. he said he has some scripts but they are not from doctors that are located near by. reviewed intermezzo indication and limitation of use. he thought intermezzo was the same as ambien and i stressed the indication again, prn, sublingual and for motna when patients have 4 hours before their planned awakening
PPLPMDL0020000001	Chagrin Falls	OH	44023	10/25/2013	spoke with ben about the 14 of butrans and his commitment to bring in a box. he said he would order. i reviewed the pharmacy guide for butrans. reviewed flexible dosing of oxycontin. discussed intermezzo indication and limitation of use
PPLPMDL0020000001	Cleveland	OH	44125	10/25/2013	Reviewed OxyContin Q12h, flexible dosing strengths and savings cards. 15mcg/hr Butrans dose along with Intermezzo for MOTNA/dosing. No savings cards needed
PPLPMDL0020000001	Garfield Hts	OH	44125	10/25/2013	Quick Butrans discussion for those Tramadol failures requiring around the clock analgesia. Said OK and secured a lunch appt with Lisa
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	10/25/2013	Dr said that he continues to see me about Butrans and said he Ned's to write it. I asked him why he hasn't? Dr said that he just forgets about it somehow and asked for me to give a quick review. Discussed all key selling messages, patient types and insurance. Dr said he will use it. I asked him if he has any patients like Scott? Dr said he does and that's why he knows he will use it. Reminded him of intermezzo and asked him to find patients.
PPLPMDL0020000001	Olmsted Falls	OH	44138	10/28/2013	Spoke to office manager. She said the drs just are not writing those kinds of products much and referring out. I explained what Butrans is...and that it was the only extended release option in schedule 3. Office manager liked it was 4 patches a month. I gave her to read and pass over to dr veleze the naive study and the fpi. I explained it covers appropriate patients like the NSAID patients never on opioids before. How well they tolerated the product and the pain reduction scores they got for taking Butrans duri g the study. I explained it was FDA approved and in our fpi.
PPLPMDL0020000001	Akron	OH	44333	10/28/2013	I asked dr if he has any patients on the 15mcg Butrans yet? Dr said he does not but said he will soon. I discussed the managed care med D plans and told him to continue finding patients over 65 which he has had success with in the past. Discussed OxyContin dosing and patient types. Asked him to continue converting from Percocet. Asked dr to continue identifying patients for intermezzo.
PPLPMDL0020000001	Parma	OH	44134	10/28/2013	I received an email from Hondros college nursing instructor, Janine Messer requesting an in-service on constipation for her nursing students either November 20 or 21st While performing clinicals at Broadview Multi-Care. I spoke with Staff development coordinator, Linda Belford to get approval. An in-service was scheduled for November 20 at 2 PM.
PPLPMDL0020000001	North Olmsted	OH	44070	10/28/2013	Spoke on the new mcg of Butrans. Tried to get stocking commitment. Educated on patch placement and even talked about the open label segment of the naive study. Review of the savings program for all products. Review the intermezzo indication and dosing
PPLPMDL0020000001	Oakwood Village	OH	44146	10/28/2013	I placed a call to Director of Nursing, Barb Straemple to confirm the in-service for October 29 on pain documentation at 7:30 1030 and 2:30 PM. There was N/A, i left a message on her voicemail. I called and spoke with director of nursing, Barb Strumpell and informed her that i needed to cancel the in-service is scheduled for tomorrow I informed her that our program would not be moving forward at this time and I had great pleasure in working with her and her nursing staff.
PPLPMDL0020000001	Fairlawn	OH	44333	10/28/2013	I asked Stacey up front to see the dr and he was in twoen patients a d came to front desk. I asked dr when is he typically moving patients to ER opioids? Dr said usually when patients are taking more than 4 pills a day. I told him that's good to know and to make OxyContin his go to. ER opioid. Dr laughed and said he uses it fairly often. I reminded him to also use Butrans for this patients needing a dose adjustment of ultram. Dr said ok. Nothing else learned
PPLPMDL0020000001	Berea	OH	44017	10/28/2013	Lunch. Dr wrote Butrans in a patient with osteoarthritis who was previously on Percocet with break thru pain. She gave Butrans and the patient is doing great and the woman is over 65 and Medco d covered the script. We talked about the Maria and Scott profiles. Starting sooner, discussed the extended release insight. Dr said she was not surprised. We reviewed pain scores of the open label, she thought the scores were good. Dr said she thinks the dosing of 4 x a month is an advantage and will work for many of her older patients. She said that it we,d make sense starting a extended release sooner for patien t who. Need the atc pain care. We talked aug OxyContin the molecule and the delivery system. Dr said she just does t write it because of its reputation. Discussed intermezzo and the dr said she has many patients that would fit the indication.
PPLPMDL0020000001	Cleveland	OH	44109	10/28/2013	Visited Ctr. left Butrans Initiation/Titration guides for clinicians, requested appt with Mary
PPLPMDL0020000001	Akron	OH	44333	10/28/2013	Introduced to Elise by dr Vucetic. Quick introduction to Butrans dosing, indication, titration and patient types. Left her with conversion and titration guide and patient profiles.
PPLPMDL0020000001	Brooklyn	OH	44144	10/28/2013	Reviewed OxyContin Tablet strengths along with Butrans for those Tramadol failures and patients requiring around the clock analgesia. Said OK, will consider. Booked appt.
PPLPMDL0020000001	Cleveland	OH	44127	10/28/2013	Reminded of OxyContin Q12h flexible dosing strengths and broad formulary coverage, along with Butrans for those Tramadol failures requiring around the clock analgesia. Dr. said he didnt have further time to discuss but will consider, said to stop back next week
PPLPMDL0020000001	Olmsted Falls	OH	44138	10/28/2013	Spoke to dr about his patient on Butrans and he said he is still doing well. We discussed the delivery system of the product and the placement of the patch. I asked why he would ever consider a atc before Butrans which is extended release. Dr said it was habit and that he doesn't like writing any short acting opioids. We discussed abuse potential for all three products and asked if he ever writes Percocet, dr said hardly ever unless at the nursing home. Touched on his thoughts with the intermezzo indication and the dr thought it was a good nitch yet hard to get thru insurance. Gave dr various insurance grids and literature for dr to read on Butrans.
PPLPMDL0020000001	Westlake	OH	44145	10/28/2013	Spike to Kelly about Butrans. Discussed what she knew about and she new it was a transdermal patch for pain. I asked if she had any problems with pa or managed care and she said she hasnt had many calls on it. Left her approved literature on all products for the dr to read.
PPLPMDL0020000001	Berea	OH	44017	10/28/2013	Reminded dr about Butrans, 7 day transdermal patched. And asked if has try it yet. Dr said no not yet. I said so u have written intermezzo that came out at 3 years ago too. He said yes he tried it. Reviewed the bid action and the dosing. Dr said ok thank u and walked away.
PPLPMDL0020000001	Berea	OH	44017	10/28/2013	Lunch. Dr said he hasn't seen patients that would benefit for. Butrans cause he does t see patients with atc or chronic pain. We discussed the delivery system of Butrans. The schedule, and the pain s ores from the Ave study. Told him he may only have one patient a month but that's ok and Suggested that he should get experience. Dr said he will keep a look ur for the right patient. Discussed OxyContin, dr said the reformulation helped. I asked if he uses OxyContin. Over Percocet for patients t with atc pain. He said he likes to give prn cause most of his patients don't take their meds daily. Talked intermezzo. Dr said his patients don't fail ambien or generic ambien. Dr did like the indication And understood the dosing.
PPLPMDL0020000001					

PPLPMDL0020000001	Brooklyn	OH	44144	10/28/2013	Quick Butrans reminder for those Tramadol failures requiring around the clock analgesia, said OK, and is still looking for that patient, I asked who that patient is and he said the 1 that can afford it! Reminded of Medco/ESI preferred formulary status and savings card.<font color=blue><b>CHUDAKOB added notes on 11/06/2013</b></font>-Mark, this call note is beginning to show improvement. I can get some idea of what happened on the call. Keep working to capture the conversation. Thanks!
PPLPMDL0020000001	Akron	OH	44304	10/28/2013	Short discussion at front counter and asked dr if he is switching patients from Percocet that he believes are appropriate for q12h OxyContin? Dr said he has done it a couple of times but that some patients can't afford OxyContin. I asked him which ones and he said a Medicare and Medicaid patient couldn't afford it. I told him about insurance coverages and copay cards for commercial patients. Reminded about Butrans dosing and patient type Scott. Told him to keep intermezzo in mind when patients complain about in the middle of the night awakening.
PPLPMDL0020000001	Garfield Hts	OH	44125	10/28/2013	Quick OxyContin reminder, Q12h, flexible dosing strengths. Said he really doesn't treat chronic panic conditions but will keep in mind
PPLPMDL0020000001	Cleveland	OH	44104	10/28/2013	OxyContin Savings cards not needed, Reviewed Butrans 15mcg/hr dose, hasn't seen any new RX's, Dr. Bennett/Pandit had PA issue, believes it was resolved
PPLPMDL0020000001	Cleveland	OH	44113	10/29/2013	Discussed Butrans for those LorTab/Ultam failures that are requiring around the clock analgesia. She agreed that those are appropriate patients for Butrans and will continue to find new patients. Reviewed Initiation/Titration along with 15mcg/hr Reminded of Intermezzo for MOTNA/dosing
PPLPMDL0020000001	Akron	OH	44310	10/29/2013	Quick message at window and handed him the Butrans conversion scale. I told him that on our last visit we discussed the approximately 20% of his patients that don't follow his dosing regimen for IR opioids. Dr said yes. I told dr to keep Butrans in mind as an option for those patients. Dr said ok and he will continue to use.
PPLPMDL0020000001	Parma	OH	44129	10/29/2013	Gave Hydrocodone insight and asked dr if she thought this might pertain to some of her new patients. She said she has patients that come to her after being on for years. I asked her thoughts on stopping this and she said she tries to use Butrans were appropriate. Reminded her of intermezzo patient and she said if patient wakes due to pain she prescribes Butrans. I agreed.
PPLPMDL0020000001	Akron	OH	44310	10/29/2013	Followed up on last conversation and asked dr what would be the downside to prescribing Butrans for patient that meets the indication like one whom he has on tramadol? Dr said clinically not much but said cost is a big difference. I asked him if he thought Butrans is expensive? Dr said it could be for Medicare patients and said he sees a lot. I told him again that Butrans has good Medicare D coverage and reviewed it with him. I asked if he has private prescription patients whom are on pain medicine? Dr said yes. I told him that those patients can pay as little as \$15 for a month supply with the copay card. Dr said ok. Nothing else learned.
PPLPMDL0020000001	Barberton	OH	44203	10/29/2013	Spoke to ma and asked to see the doctor, he had left for the day. Discussed Butrans, she heard of it and gave her naive study and initiation slim Jim to pass to the doctor. I showed her the demo patch and she thought it was very thin like a bandaid. Also discussed managed care coverage.
PPLPMDL0020000001	Barberton	OH	44203	10/29/2013	Thru window. Asked dr if he saw uncontrolled pain patients that he could try Butrans on today. He said not yet. I re indexed min to start dosing and gave initiation leave behinds.
PPLPMDL0020000001	Cleveland	OH	44125	10/29/2013	Left OxyContin info with RN Gay P, Initiation/Titration guide, Ortho surgeons don't typically meet with reps. Leave card and info
PPLPMDL0020000001	Barberton	OH	44203	10/29/2013	Dr said she is cutting back the number of opioids she writes and she said, she thought the state was going to move all narcotics to schedule 2. Dr was aware of the details of OxyContin such as q12h, single entity and the q12h dosing. When I asked when she uses OxyContin she said her severe patients with chronic pain. I mentioned it didn't have a Chronic pain indication and she was aware but said after her Vicodin fails she will write OxyContin but less these days with the new Ohio laws. Dr said she was glad for the reformulation of the product. Discussed Butrans. Se never used it. We reviews the Maria and Scott profile. She said she would move Butrans before tramadol because what if the patient only needs a few pills a day. I asked if she had at hesitations using Butrans after a Tramadol failure she said no. We discussed titration, pain results and also abuse potential. Dr is convinced that Tramadol is not a narcotic and not an opioid. She said she doesn't take many Medicaid or nursing home patients most have commercial insurance. Reviewed the savings program and the dr though the coverage was good and not a reason not to use Butrans. We talked intermezzo and she said too many prior auths and she was not going to waste her time for the office time trying to get it approved when there are other choices.
PPLPMDL0020000001	Uniontown	OH	44685	10/29/2013	Discussed the indication and dosing. Led by reviewing the start principles a d asked for his input. Dr said he agrees with them. I asked about his titration of the product in using the 7 doses. Dr said that he uses most but his threshold of Percocet is any 40mg. I asked why 40mg and he said that he likes to titrate through to ensure its providing the effect he needs. I asked why he couldn't just provide the patient with the q12 hydrocodone earlier? Dr said he has and. Old do that more often. Discussed Butrans key selling messages and asked about his experiences. Dr said he has prescribed it three or four times and said he had had mixed reviews. Dr said a couple of patients just didn't like it and the others are doing ok. I discussed patient types and choosing the right patient for Butrans. Introduced the 15mcg dose and asked for more prescribing to which he said he would and said he is not discouraged by the few that didn't like it because dr said it won't b for everyone. Discussed intermezzo indication, dosing and limitations of use. Dr said he really likes the idea and wanted copay cards.
PPLPMDL0020000001	Uniontown	OH	44685	10/29/2013	Short discussion over lunch about all products. Led with start principles and conversions. I asked dr to start with OxyContin sooner when patients are failing Percocet. Discussed Butrans dosing, indication, patient types, conversions. Discussed intermezzo key selling messages. Dr said he doesn't write much OxyContin anymore but said that he understands that he should for his Percocet patients on it for 6 months or longer. Dr said he likes the check 3 Butrans and will use.
PPLPMDL0020000001	Parma	OH	44134	10/29/2013	Reminded dr that 15 for Butrans was available. Asked dr if he thought new patients to his practice were appropriate for Butrans and he said he puts new or old on Butrans based on what he thinks. He said he likes Butrans for patients he is not comfortable with. I told him Butrans is still a schedule 3 with the same abuse potential as other opioids. Reminded him that OxyContin 7 strengths were not generic
PPLPMDL0020000001	Cleveland	OH	44113	10/29/2013	Discussed Butrans for those LorTab/Ultam failures that are requiring around the clock analgesia. Dr. agreed, said he has started 2 new older patients yesterday. Reminded of Intermezzo for MOTNA/dosing
PPLPMDL0020000001	akron	OH	44307	10/29/2013	Discussion on all products. Led with insight about hydrocodone and asked about how he prescribes hydrocodone? Dr said that he believes the stats and said that he doesn't write much hydrocodone but it would be q6. I asked him how often his taints follow his plan for the pain medicine? Dr said he knows not everyone is going to take it the way he prescribed it. I asked him what a week long patch would mean for this patients? Dr said it would probably be something they might like. I discussed all key selling messages, patient types with Scott and nancy, conversions. Dr said he likes the idea of Butrans and will look to use. OxyContin dosing, conversions and reviewed the start principles. Introduced intermezzo indication, dosing and limitations of use. Dr said he likes the idea and asked about insurance coverage. Discussed copay cards and coverage.
PPLPMDL0020000001	Uniontown	OH	44685	10/29/2013	Met heather for first time and learned that she came from dr Petrus' office. She told me that she couldn't take working in pain management anymore. Introduced Butrans and discussed all key selling messages. Discussed patient types and she said that she has prescribed it before but does not want to prescribe pain medicine anymore. Discussed OxyContin however she said she will never write it. Introduced intermezzo indication, dosing and limitations of use and she said that she is interested in it. She said she wanted copay cards and that she could find some patients for it.
PPLPMDL0020000001	Cleveland	OH	44113	10/29/2013	Discussed Butrans for those LorTab/Ultam failures that are requiring around the clock analgesia. She agreed that for Butrans patients, they she needs to start them early before they are on multiple doses of Short acting opioids. OxyContin Q12h also Reminded of Intermezzo for MOTNA/dosing
PPLPMDL0020000001	Cleveland	OH	44114	10/29/2013	Discussed Butrans for those LorTab/Ultam failures that are requiring around the clock analgesia. Elaine said she is always looing for new patients to try Butrans Reminded of Intermezzo for MOTNA/dosing
PPLPMDL0020000001	Akron	OH	44320	10/30/2013	Told dr that she needs to prescribe Butrans today for patients needing a dose adjustment on Ultram or vicoden. Dr said to me that she does see many of them each day. I asked how many she adjusts the dose for? She said it depends on the day. I told her if the patient is in prn pain or acute pain Butrans is not the product for them but the patients meeting the indication as I read it are the right candidates. Dr said ok. Nothing else learned.
PPLPMDL0020000001	Stow	OH	44224	10/30/2013	Quick message in his office about Butrans. I told him that Butrans produced at least a 30% pain score reduction in the opioid experienced trial. I asked him if he would like his patients to get a 30% reduction in pain score? Dr said yes he would and likes Butrans. Dr said he would like to use it more and will keep it in mind.
PPLPMDL0020000001	Euclid	OH	44117	10/30/2013	Placed a call to nurse practitioner, Leizel to cancel Butrans lunch scheduled for 10/31 at 12 noon.
PPLPMDL0020000001	Cleveland	OH	44109	10/30/2013	Inquired about Butrans 15mcg/hr- hasn't seen any RX's yet, will order when RX is presented
PPLPMDL0020000001	Akron	OH	44313	10/30/2013	I asked dr what he is typically treating for OxyContin? Dr said most low back pain and spinal stenosis. I told dr that those are ideal candidates for OxyContin and handed him the Maria profile. Dr said he will review it.
PPLPMDL0020000001	South Euclid	OH	44121	10/30/2013	Handed him the Butrans conversion scale and told him to reassess his IR opioid patients for the possible Butrans solution. Dr said ok.
PPLPMDL0020000001	Garfield Hts	OH	44125	10/30/2013	Met with tech & floating pharmacist. They were only 2 back in pharmacy. No time to check stocking. Cheryl is floating pharmacist. Made her aware of Butrans new 15 mcg hr titration dose. Left Butrans pharmacist's guide & FPI NDC Code brochure. They will pass along to pharm mgr.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	10/30/2013	Discussed Butrans for those Tramadol failures requiring around the clock analgesia, Dosing-Initiation/Titration, MedCo/ESI formulary status. OxyContin Q12h flexible dosing strengths- Said she doesn't RX many pain meds but will keep in mind. Intermezzo for MOTNA/dosing
PPLPMDL0020000001	South Euclid	OH	44121	10/30/2013	Discussed all key messages for all products. Dr said she likes that Butrans is a schedule 3 and might find a patient or two but will have a hard time remembering the Butrans patch. I showed her the slide conversion guide and asked her to keep it with her. OxyContin indication, dosing, and titration as well as conversions. Dr said she will not prescribe it. Intermezzo discussion and dr said she likes the idea but said it is costly. Discussed cost and insurance and asked her to try it.
PPLPMDL0020000001	Akron	OH	44320	10/30/2013	Dr DeJoseph said I have a few seconds. Understood. asked what her most recent experience with Intermezzo as been? she says I use it all the time, I really like it. says she's continuing to write Intermezzo as her patients are happy with efficacy. I had one pack Intermezzo of trial, cards on shelf to leave her; she has zero left, & asked if I could leave. 2 nd pack which I did. Left her reassessment slim Jim and her and med assts dosing guides. Let her know of new 15 mcg hr titration dose & stated next visit I'd like to discuss efficacy trial for naive patients. She says she rarely manages pain, Butrans she'll look at info I left.
PPLPMDL0020000001	Akron	OH	44320	10/30/2013	Good conversation on all products. Discussed OxyContin patient profile Maria and asked her what her thoughts are? Dr said she would have either referred the patient to pain management or started OxyContin much earlier. I told dr I was glad to hear the latter. I told dr that starting OxyContin earlier would be a good option for that patient. Dr said they have a lot of a users in the practice and they are working really hard getting them out. I told her patient selection is extremely important. Discussed Butrans patient types and titration. Explained conversions and asked her to please continue to identify the right patients. Dr agreed and said she needs to remember it more. I told her to keep the conversion scale in her lab coat.
PPLPMDL0020000001	Stow	OH	44224	10/30/2013	Reviewed the Maria profile for OxyContin and discussed dosing, titration and start principles. Dr said he really likes OxyContin and said that he continue to prescribe but said he still has some insurance issues. I asked him where and he said he can't remember. I reviewed plans and told him to try and remember a specific plan. Reviewed the Scott and nancy profiles for Butrans asked asked for prescribing for those patients. Nothing else
PPLPMDL0020000001	Lyndhurst	OH	44124	10/30/2013	Dr Isakov says he's tried to write Butrans a few times, not covered. Where not covered? A few Med d patients & another patient can't remember plan. His ma Helen left early, couldn't obtain further details. Dr., Since my last visit, Butrans Med D coverage has improved. In addition to being preferred on Medco /express Scripts med d, Butrans is also preferred on Cigna Med D. And your commercially insured patients can take advantage of Butrans 28-day trial, then \$50 off monthly co pay cards! Also Updated practice mgr Ellen T on Butrans access for patients. In addition, new 15 mcg hr titration dose now available. Next time I visit I want to share efficacy for Butrans in a 12 week clinical trial. I will leave you with the opioid naive trial, & hopefully you will look over before my next call.
PPLPMDL0020000001	Lyndhurst	OH	44124	10/30/2013	Dr Kim id like to Talk with you about a specific group of patients, your Percocet patients IR oxycodone/ apap insight. Dr Kim agreed 265 days is a long time to keep a patient on a short acting to treat a long term pain issue. I would like you to consider converting these patients that are been taking Percocet 90 days & longer, to controlled release OxyContin sooner, does that sound reasonable.? Yes replied dr Kim. I also want to share with you our new 15 mcg hr titration dose for 1 x week pain patch Butrans. Updated practice mgr Ellen T. on Med D preferred status for Butrans.
PPLPMDL0020000001	Garfield Hts	OH	44125	10/30/2013	Discussed Butrans for those Tramadol failures requiring around the clock analgesia. 7day transdermal, Initiation/Titration, MedCo/ESI. Has a patient in mind this afternoon to start. Reviewed OxyContin Q12h flexible dosing strengths along with Intermezzo for MOTNA/dosing
PPLPMDL0020000001	Garfield Hts	OH	44125	10/30/2013	Discussed Butrans, 7day transdermal, for those Tramadol failures requiring around the clock analgesia, Initiation/Titration, MedCo/ESI formulary coverage Dr. said he has a few patients in mind. OxyContin-Q12h flexible dosing strengths. Intermezzo for MOTNA/dosing.

PPLPMDL0020000001	Cuyahoga Falls	OH	44223	10/30/2013	Led off conversation about hydrocodone and 41%patients. I asked dr her thoughts and she told me she believes it and that's why she doesn't prescribe too many narcotics. Dr told me that she prides herself on the fact that she doesn't accept BWC or Medicaid and always tries to do the right things by her patients. I asked her if she has patients currently on tramadol or vicoden and she said yes. I discussed how the option of Butrans may be suitable for these patients. Heat all key selling messages be dr said she may have use for it in a patient or two. Discussed OxyContin dosing, titration, patient types. Dr said she will not prescribe it. Finished with intermezzo discussion and dr said its too expensive.
PPLPMDL0020000001	Garfield Hts.	OH	44125	10/30/2013	Discussed Butrans for those Tramadol failures requiring around the clock analgesia, Dosing-Initiation/Titration. MedCo/ESI formulary status. OxyContin Q12h flexible dosing strengths- Said she doesn't RX many pain meds but will keep in mind. Intermezzo for MOTNA/dosing, OTC
PPLPMDL0020000001	South Euclid	OH	44121	10/30/2013	Both dr Tomm & Locke already gone for day. Met with RN Ann. ( note: LUNCH BOOK FOR 2014 NOW OPEN) left Ann a few intermezzo dosing guides. Reviewed Intermezzo indication & showed re assess Intermezzo piece. Let her know of new 15 mcg hr titration dose for Butrans, our 1 x week pain patch. Left new mktg piece for Butrans with both Drs.
PPLPMDL0020000001	Uniontown	OH	44685	10/30/2013	Told dr that he should look over the conversions for OxyContin and reassess some patient that have been on Percocet for 3+ months as possible candidates for OxyContin. Dr said he will do that and really likes OxyContin. I told him to not forget about Butrans coverage on BWC and the Caresource PA.
PPLPMDL0020000001	Cleveland	OH	44113	10/30/2013	Discussed Butrans for those Tramadol failures requiring around the clock analgesia. (7day transdermal/4 patches a week) Savings cards/MedCo/ESI and 15mcg/hr dose. OxyContin Q12h flexible dosing strengths.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	10/30/2013	Led off conversation by asking him if he prescribes tramadol and vicoden? Dr said he does. I asked him what the prescription looks like ? Dr said one pill 4 or 6 Tim's a day. I asked him if he has patients that don't follow the dosing regimen? Dr said most will take too often. I asked him what patients might think of a once a week patch? Dr said he would expect their adherence to the dosing schedule. I discussed all key selling messages, showed patch and application sites. Dr said he can see where he could use it. Dr asked about insurance and I reviewed plans more important to him. Discussed OxyContin and asked him if he would prescribe it and he said very sparingly. Intermezzo dosing, indication and limitations of use.
PPLPMDL0020000001	Stow	OH	44224	10/30/2013	Stephanie told me that she prescribed Butrans for the first time last week. I asked her to tell me about it and she said that the patient was on 2 vicoden a day and when she basked about the pain the patient said it is all day pain. Stephanie said the patient had Caresource and is he remembers me speaking about the Caresource PA. Stephanie said later after checking the patients file that the patient said Butrans would cost her \$180 and dr Balter put the patient on fentanyl. I told Stephanie that there is no way that the PA for was processed and she should look into that because the patient met the criteria.
PPLPMDL0020000001	Stow	OH	44224	10/31/2013	Spoke with Holly about all products. Holly said she dispensed 5mcg Butrans the other day from CPM and Stephanie Whitting. I told her I knew about it and had a discussion with Stephanie about it. Holly said the PA took some doing but needed up being covered for 6 months. Holly was glad she dispensed Butrans only weeks after ordering it for the first time. Discussed dosing, and patient types with conversions. Told her about OxyContin dosing and titration with start principles. Reminded her about intermezzo along with appropriate patients. Holly said she is getting another shipment of Butrans today and is considering ordering the 10mcg.
PPLPMDL0020000001	Akron	OH	44312	10/31/2013	Quick message in hallway of his office about using oxycontin for those patients of his who are already on IR oxycodone. I asked him to switch those patients who he feels are appropriate for the q12 dosing. I also mentioned Butrans for those patients needing a dose adjustment on tramadol. Dr said he hasn't had luck with Butrans yet but will keep trying. I reminded dr to select appropriate patients. Left him. With the intermezzo dosing guide.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	10/31/2013	Dr asked me how long it takes Butrans to work? I asked him why he asks and he told me that he remembers me talking about some of that stuff and wanted it again. I gave him a FPI and reviewed section 12.3. Dr said ok and he will look at it himself. I told him to continue prescribing Butrans for tramadol patients needing a dose adjustment.
PPLPMDL0020000001	Euclid	OH	44117	10/31/2013	I sent an email to director of nursing, Kathy Nemeth to inform her that Purdue's nurse educator program will not be moving forward. I thanked her for her support and utilizing the program I also canceled the Butrans lunch in service with the NP, Lizeel for today at noon
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	10/31/2013	I told dr that she should be prescribing OxyContin for those patients of hers on Percocet and showed her the conversion guide. I asked her if she has prescribed the 7 day transdermal patch yet for those patients she has on tramadol and need a dose adjustment? Dr said she didn't think so. I told her to do it! Nothing else learned.
PPLPMDL0020000001	Parma	OH	44129	10/31/2013	Told ma that Butrans is now available in a 15. She said she still had the vouchers from before. Asked if dr needed vouchers for OxyContin and she said no. I asked about sharing information with him in person and she said now is not a good time due to emr transition.
PPLPMDL0020000001	Richmond Heights	OH	44143	10/31/2013	I placed a call to nurse educator, Sheila Harris to inform her that the Purdue nurse educator program will not be moving forward and thanked her for her past support.
PPLPMDL0020000001	Stow	OH	44224	10/31/2013	Showed dr the Carl profile and reviewed it with her. I asked her if it makes sense to prescribe OxyContin for that patient? Dr said it does. I asked her if the patient is taking 60mg/day of IR oxycodone what dose would she convert to OxyContin? Dr said 30mg and she tries to convert patients as much as she can if they can afford it. Showed dr the insurance grids and then reviewed the conversion guide for Butrans and told her to reassess her tramadol patients as potential candidates. Dr said ok. Nothing else learned.
PPLPMDL0020000001	Euclid	OH	44119	10/31/2013	Dr did not come back to lunch. Met with her med asst. Discussed all 3 products. Indications, warnings, precautions, black box for OxyContin. & Butrans.
PPLPMDL0020000001	Euclid	OH	44117	10/31/2013	I placed a phone call to Nurse Educator, Ruth Rossi, informing her that the Purdue Nurse Educator program will not be moving forward at this time. I thanked her for supporting and utilizing the program
PPLPMDL0020000001	Olmsted Falls	OH	44138	10/31/2013	I placed a phone call to DON, Pam Ritter to cancel our meeting scheduled for November 4 at 11 AM To present Purdue's nurse educator program. Pam was not available, I left a message on her voicemailReason: Purdue's nurse educator program not moving forward at this time
PPLPMDL0020000001	Fairlawn	OH	44333	10/31/2013	I placed a call to staff development Coordinator, Michelle Williams to inform her that Purdue's nurse educator program will not be moving forward at this time and to thank her for her past support and utilizing the program.
PPLPMDL0020000001	Akron	OH	44305	10/31/2013	Spoke with the secretary L. About any patients she has seen come through for Butrans that may have required a PA. L said that she had one just yesterday that he prescribed Butrans for that had buckeye and is was declined so dr prescribed something else. L said that the patient just switched to Caresource and said she remembered that's its covered with a PA and was going to have dr look at it again for Butrans. Discussed the situation with dr and he said he will most likely prescribe it again for the patient. I made sure to review the PA criteria for Caresource again. Told him to continue prescribing OxyContin for his Percocet patients like carol profile. Dr said ok.
PPLPMDL0020000001	Richmond Heights	OH	44143	10/31/2013	Reminded of intermezzo dosing and indication.
PPLPMDL0020000001	Cleveland	OH	44114	10/31/2013	I sent an email to LPN Joan Southard informing her that Purdue's nurse educator program will not be moving forward at this time. I thanked her for her support and utilizing the program.
PPLPMDL0020000001	Euclid	OH	44119	10/31/2013	Discussed Butrans for those Tramadol failures requiring around the clock analgesia. Initiation/Titration. MedCo/ESI/ BWC coverage. OxyContin Q12h along with formulary
PPLPMDL0020000001	Euclid	OH	44119	10/31/2013	Dr e is opposed to writing scheduled meds, however she will consider Butrans as option for OPIOID naive, or after Tramadol. Pain reduction insight BUP 3024. Focused on inclusion criteria, patients walking in from pain caused by those conditions. She was impressed with 4.6 pain reduction. Showed her how to write. She asked how does she take someone off Butrans, responded with half life information, that's up to her discretion. Black box warning, precautions, contraindications discussed. Left new marketing piece, discussed new 15 mcg hr titration dose. Left dosing slider. Fr more severe pain, controlled release OxyContin q 12 h may be more appropriate. For your MOTN awakening patients, I have Intermezzo, Zolpidem tartrate sublingual tablets.
PPLPMDL0020000001	Euclid	OH	44119	10/31/2013	OxyContin, START principles discussed. \$90 savings cards discussed. also left conversion titration guide for Paul & head nurse Carla, showed conversion s from ir oxycodone & Percocet. then Butrans for moderate to severe pain discussed. Paul asked about patient access, savings for Butrans. He Did not recall that we have trial, savings cards. Opened a card to show him how both should work. He stated cards will be very helpful to him in future. Discussed 15 mcg hr titration dose. Updated on Med D preferred plans. Intermezzo, for MOTN awakening insomnia patients. Trial, savings discussed. Left re assess insomnia piece, dosing card.
PPLPMDL0020000001	Cleveland	OH	44115	10/31/2013	Discussed Butrans for those Tramadol failures requiring around the clock analgesia. Reviewed MedCo/ESI/BWC coverage. 15mcg/hr- Initiation/TitrationBrief reminder of OxyContin Q12h.
PPLPMDL0020000001	Cleveland	OH	44119	10/31/2013	Met with med asst: all Drs leave by 4 typically, none in right now. asked to see pharmacist, staff pharmacist gone as well. Introduced myself, my branded products, and Otc samples, (laxatives, slow mag) Left OxyContin conversion titration guide, PBM brochure, Reformulation piece. Left Intermezzo re assess your insomnia patients piece.
PPLPMDL0020000001	Westlake	OH	44145	10/31/2013	Lunch. Discussed Butrans. Dr asked how it was different from fentanyl. I said no head to head studies. Reviewed it was a 7 day transdermal patch and that it was a matrix system. She was curious how many hours before the patient has pain control. I didn't have the answer. But reviewed steady state and when titration could occur. Dr was not interested in sending an emefr to the company. She asked if it was detected in most urine screens, suggested she check to make sure it was looking for buprenorphine. She said she doesn't like to treat chronic pain, but does with vikodin, Percocet or Tramadol. I asked at what point would she consider an extended release and she said she never new the details of Butrans before now but could see her using it. We talked about if she would ever write OxyContin 10mg after an NSAID failure. She said u can't do that. I said u absolutely can do that but sounds like u wouldn't why. She said the name of OxyContin scares patients. I said would the name Butrans scare people? She said no. Dr and I reviewed the conversion chart...she felt like most of her patients would be starting Butrans at 5mcg. I asked her if Butrans dosing seemed complicated. She said no. I said do u think u may be able to have a good handle managing patients atc pain with Butrans vs prn medications and she said yes. Dr doesn't have nursing home patients, little cash patients and little Medicaid. She was most interested I med part d. Viewed intermezzo And OxyContin.
PPLPMDL0020000001	Euclid	OH	44119	10/31/2013	Lunch. Dr Adamich refers pain patients out if they require C II s. Pain reduction insight, BUP 3024. Focused on inclusion criteria, & types of conditions that her patients are suffering from, causing them chronic pain. She felt 4.6 reduction in pain to be clinically important. The adverse reaction profile was what she would expect, pleasantly surprised constipation not higher. Went over dosing, patient selection, back box, contraindications, how to write, she has a female patient in mind, who as expressed she's tired of pain pills; doesn't want surgery; wants to try something different. Judy feels Butrans good option for patient. Caresource PA discussed, Med D preferred plans, her concern is many people with commercial insurance have really high deductibles; often preventing then from using branded meds. Told her I look forward to following up on that patient next time I visit.
PPLPMDL0020000001	North Olmsted	OH	44070	10/31/2013	Discussed Butrans with the pharmacist floater and the tech today. Review of Butrans and the dosing, also the placement of where to put the patch, rotate the patch so u do t return to the same sight before 21 days and how to discard of the patch after worn. She asked if the cvs had the 15 at the warehouse and said it did stock all mcg doses. Review OxyCotin, the molecule and q12h dosing. She hasn't seen a script of intermezzo in a long time.
PPLPMDL0020000001	Euclid	OH	44119	10/31/2013	Review the indication and that it wasn't ab rated. Left literature.
PPLPMDL0020000001	Euclid	OH	44119	10/31/2013	Lunch. Met with med asst first, discussed indications for all products. found out dr RETIRING, last day Dec 27 th. The practice is actively looking for his replacement. ( mark in Phoenix retire as of 12/27/13. Showed dr new Butrans marketing piece with new 15 mcg hr dose of Butrans. Wanted to touch on a few points in BUP 3024, he didn't have time. Dr for severe pain, I have controlled release OxyContin q 12 h; ad for your MOTN awakening insomnia patients I have Intermezzo.
PPLPMDL0020000001	Parma	OH	44134	10/31/2013	Introduced myself to dr mandat staff and reviewed butrans and greater than 30% reduction in pain. Staff said they only know of one patient on Butrans but thought that was a patient in the nursing home. Reviewed flexible dosing of OxyContin. Gave intermezzo indication and limitation of use
PPLPMDL0020000001	Akron	OH	44312	10/31/2013	Spoke to dr along with his NP student Michelle. I discussed the key points of efficacy and safety on the opioid expericed trial and asked him if he would like his patients to have at least a 30% reduction in pain score? Dr said he would and doesn't even get close to that now with products like tramadol or vicoden. I told him then he needs to write more Butrans and to sell it to his patients that may be reluctant to using a patch. Dr agreed that it is important to explain the concept of a patch correctly. I told him that he should also be using OxyContin for those patients who are on or onset for 3+ months and dr agreed. Reminded him Of using intermezzo for patients meeting the indication.
PPLPMDL0020000001	Euclid	OH	44119	10/31/2013	Dr very opposed to managing scheduled meds, however may write insomnia agents. Discussed OxyContin, controlled release, q 12 h dosing. he commented on what a challenge & how complicated the process to manage opioids, use the Ohio OARRS system ; the new AMA, FDA 80 mg trigger guidelines. Discussed Butrans as option for opioid naive, BUP 3024, pain reduction scores, left BUP 3024 for his review. Black box warning, precautions, contraindications. Also left new marketing piece reflecting all 4 doses. Despite data presented he is not comfortable writing a schedule three either. Concerned with opioid abuse, his wife is pharmacist. Intermezzo, Zolpidem tartrate, sublingual tablet, for MOTN awakening insomnia patients. He will review my information. Then OTC line. Asked if I could leave samples of Slow Mag, none in car, promised next visit.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	10/31/2013	Saw dr at hospital and told him that Butrans in the clinical studies showed at least a 30%pain score reduction and asked him to prescribe it for those patients in p,ace for a dose adjustment on tramadol or vicoden. Jake said he is continuing to write it and its going well. I told him to keep OxyContin in mind for his patients on Percocet over 3 months who are appropriate for the q12 oxycodone.
PPLPMDL0020000001					

PPLPMDL0020000001	Cleveland	OH	44113	11/1/2013	Visited Dept. Spoke with Dale(PA) in regards to OxyContin-Q12h flexible dosing strengths along with Butrans for those Tramadol failures requiring around the clock analgesia. Said he likes both products and will continue to find new appropriate patients
PPLPMDL0020000001	C. Falls	OH	44223	11/1/2013	Spoke with Denise about all products. Denise said she filled a Butrans and OxyContin for dr Ali is week. I asked if they have moved any 15mcg Butrans and she said they have not. I checked copay cards and they were out of OxyContin copay cards. Denise asked if I still have intermezzo and I asked why? She said because they have it on the shelf and have never seen a prescription for it. Denise asked about insurance coverage. I reviewed
PPLPMDL0020000001	Akron	OH	44312	11/1/2013	Spoke with Michele the office manager about my products. Michele said that the office typically refers out for pain patients but said he may be interested in Butrans since its a schedule 3. Explained the product key points. Michele. Said he does 15 minute appointments on Tuesdays and she will ask him if he would like a product review then will contact me.
PPLPMDL0020000001	Cleveland	OH	44130	11/1/2013	Spoke with Doris and she said dr has not used any Butrans since our lunch. Gave dr the hydrocodone insight with 41% using more than 90 days and he said he does not think they should be using a pain medication that long and he would not put a patient on a long acting. He said he would refer anyone like that to pain management. A asked about the Butrans patient and he said he has not seen a need.
PPLPMDL0020000001	Norton Parma	OH	44203 44134	11/1/2013 11/1/2013	Spoke to nurse, discussed managed care and show to apply patch Spoke with pharmacist about Butrans 15 and positioning after tramadol and before hydrocodone. Used pharmacist detail aid. Showed pharmacist OxyContin flexible dosing. Gave intermezzo indication and asked about high sedative hypnotic writs in the area.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	11/1/2013	Spoke with dr and again one of his nurses about a patient with an insurance plan called Catamaran which is the PBM for the patients supermen PPO plan. Gail told me about how the patient was prefixed Butrans and took the prescription to a Walgreen on Canton rd in mogadore. The patient was told by the pharmacist could not run the I'd numbers for Butrans because the system would not allow them to because of a PA. Discussed the specifics w/ dr and staff and will follow up after sending specific information to the DM.
PPLPMDL0020000001	akron	OH	44333	11/1/2013	Discussion about all products. Led with insight about hydrocodone and asked him about patients he prescribes IR opioids for. I told him about the patients he needs to identify for Butrans. Explained Butrans mechanism of action, steady state, titration and conversions. I asked dr to prescribe. Dr said he needed more OxyContin copay cards. We discussed patient profiles and how to properly individualize the dose and start principles. Left him with information about intermezzo.
PPLPMDL0020000001	Cleveland	OH	44113	11/1/2013	Visited Ortho Dept. (Stearns/Bilfield) OxyContin Initiation/Titration guides
PPLPMDL0020000001	Cleveland	OH	44113	11/1/2013	Visited Ortho, Stearns/Bilfield, Left OxyContin Initiation/Titration guides
PPLPMDL0020000001	Hudson	OH	44236	11/1/2013	Quick hello with dr and discussed OxyContin and showed him the conversion and titration guide and the Tom profile. Dr said he writes it occasionally. I asked dr to use OxyContin for those patients on Percocet for 3 + months. Dr agreed and said he could do that.
PPLPMDL0020000001	Akron	OH	44305	11/1/2013	Good discussion about the carol patient profile. I read it with dr and he agreed that the patient is a good candidate for OxyContin. We discussed proper initiation doses, titration and start principles. I asked dr how often he finds he needs to titrate OxyContin? Dr said there are inpatients that he has titrated within the first week on a dose and outpatient is usually two weeks to a month as necessary. I asked dr to use OxyContin as his go to schedule 2 ER opioid. Reviewed Maria profile for Butrans and discussed conversions and titration.
PPLPMDL0020000001	Cleveland	OH	44130	11/1/2013	Asked dr how long he thinks patients are on short acting before he treats them and gave the hydrocodone insight of 41%. Dr did not reply but nodded his head and made a motion for a signature. I told him I did not have samples and he walked past me towards the patients rooms. I mentioned butrans 7 day transdermal system. Spoke with his ma and she said dr is cutting down on his OxyContin because he does not want to appear on a report. I asked which report and she said pharmacy report.
PPLPMDL0020000001	Parma	OH	44129	11/1/2013	Confirmed with anyla that the 15 is available and has been ordered by doctors in the area. She said she keeps Butrans in stock because it moves. Reviewed flexible dosing of OxyContin and gave 41% over 90 days hydrocodone insight. Reviewed intermezzo indication and limitation of use.
PPLPMDL0020000001	Parma	OH	44134	11/1/2013	Spoke with Cathy about the Butrans 15 being available and the non opioid clinical trial pain reduction from 7.2 to 2.6. Reviewed the start principle for OxyContin. Gave indication and limitation of use for intermezzo. Cathy asked about drs in the area that are writing and I said there are various doctors and there would be more as I give more of them information.
PPLPMDL0020000001	Cleveland	OH	44113	11/1/2013	Discussed Intermezzo for MOTNA/dosing. Dr said he likes the molecule and will continue to prescribe. Reminded of Butrans for those Tramadol failures that he refers out, Said OK, but doesnt RX any narcotics
PPLPMDL0020000001	Cleveland	OH	44102	11/1/2013	Talked with Mike, discussed Butrans 15mcg/hr dose, said he hasnt seen any, but will order in when RXed. OxyContin q12h flexible dosing strengths and Intermezzo for MOTNA/Dosing
PPLPMDL0020000001	Cleveland	OH	44113	11/1/2013	Quick Butrans reminder for those Tramadol failures, said OK and is always looking for possible Butrans patients
PPLPMDL0020000001	Cleveland	OH	44114	11/1/2013	Quick Butrans reminder for those Tramadol failures requiring around the clock analgesia. Said OK and as always will keep in mind. Intermezzo for MOTNA/dosing
PPLPMDL0020000001	Akron	OH	44333	11/4/2013	D spoke with me about the practice brining in a new physician in early December, dr Goldner. Dr Vucetic said that t trained under him. I asked dr Vucetic about his philosophy in treating pain. Dr said that he does primarily interventions and does not have strong beliefs in treating pain with opioids however dr Vucetic said that dr Goldner knows he will need to change his philosophy in their practice. I asked dr Vucetic about using his Butrans copay cards and told him I noticed that he isn't moving the cards. Dr said a large majority of his prescriptions come from Medicare patients. Discussed his use of Butrans, patient types and patient types for OxyContin. Dr said he has been using more OxyContin and likes it because it is covered more than other schedule 2 options. Discussed intermezzo patient types and clinical studies.
PPLPMDL0020000001	Akron	OH	44333	11/4/2013	Some with Jim the pharmacist about all products. Discussed the Kathy profile for Butrans and asked him if it makes sense? Jim said he thinks its a good product but they have not filled many. Jim said they currently have none on the shelf. I asked why and he said they filled a couple and the others went out of date and sent back. I asked about OxyContin dispensing and showed doses? He said they see a fair amount but its the same patients for many years. Gave him intermezzo dosing info and showed him the demo packets.
PPLPMDL0020000001	Westlake	OH	44145	11/4/2013	Discussed Butrans. Brief overview on what Butrans is... 7 day transdermal opioid schedule 3.
PPLPMDL0020000001	Westlake	OH	44145	11/4/2013	Dr has been writing Butrans for his nursing home patients. He has tried Butrans after Vicodin for his patients who pain and meet the indication,he said his patients are doing great and it is a nice product for the patients cause its delivery system and not having to take medications daily. We discussed trying it in a younger commercially insured patient, dr said he has tried to write it but some managed care plans said too expensive. When tried to find out what plans he couldn't remember. Showed the visual aid. Butrans naive study...reviewed pain scores and 30percent pain reduction.
PPLPMDL0020000001	Westlake	OH	44145	11/4/2013	Spoke to Lisa ma upfront about what Butrans is and trying to schedule apt.
PPLPMDL0020000001	Mayfield Village	OH	44143	11/4/2013	Spoke with medical assistant Heather. Dr has no time to come up front. Let her know I represent Butrans as option for moderate to severe chronic pain, in 1 x week transdermal patch. There are now 4 strengths available. Left mkt piece for dr & med asst Melissa.
PPLPMDL0020000001	Garfield Hts	OH	44125	11/4/2013	Spoke with Linda(Tech) reminded of Butrans 15mcg/hr, hasnt seen any RX's yet, will stock when they see 1, OxyContin savings cards along with Intermezzo for MOTNA/dosing and trial cards
PPLPMDL0020000001	Westlake	OH	44145	11/4/2013	Spoke to Paula the ma up front. Other than lunches, she said the dr doesn't see reps. Left a variety of materials. Dis used Butranswith ma.
PPLPMDL0020000001	Westlake	OH	44145	11/4/2013	Adverse reaction reported today. Lunch. Discussed pain scores and insight, dr did not think the results were very high nor did he use The 11 point scale to measure results. Discussed the. Not controlled Tramadol patient and asked him To use Butrans in the chronic pain patient that is not controlled on Tramadol.
PPLPMDL0020000001	Cleveland	OH	44143	11/4/2013	Dr Silverblatt is not a fan of any scheduled products, his practice leaning more & more toward holistic, natural remedies. Discussed Butrans & OxyContin indication, then Intermezzo indication. He's just not willing to write scheduled meds & refers patients out to specialty doctors.
PPLPMDL0020000001	Mayfield Hts	OH	44124	11/4/2013	Dr Laham say she has offered a few Butrans patients the option to titrate to the 15 mcg hr, and those patients stated their pain was controlled on the 10 mcg hr. discussed patient access & Caresource prior auth details. He was happy to have Caresource info. For your Percocet patients, dr Laham, I would suggest conversion to a long acting sooner. Let me tell you why: oxycodone APAP insight. Dr responded, something to think about. Caresource, you've used in past, & liked efficacy, Butrans its not covered anywhere, its a hassle getting it for my patients& hassle for staff with prior auth's needed. I have a solution for access in Caresource, after falling any other agent with Zolpidem, the Caresource patient can get Intermezzo. That's good to know. Please put this dosing card in your pocket to remind you of Caresource for our MOTN awakening insomnia patients. Dr put in his pocket, wrote himself reminder on dosing card.
PPLPMDL0020000001	Akron	OH	44333	11/4/2013	I handed dr the new Butrans titration guide and asked him what his thoughts are on the 15mcg dose use in his practice? Dr said he knows about the 15mcg dose and said he feels much more comfortable using the 15mcg for patients on the 10mcg dose than taking them to the 20mcg. I told dr that's good to hear and asked him to reassess his patients on 10mcg to see if 15mcg is appropriate? Dr said he will. I told him that he should also move his patients on Percocet for more than 3 months to q12 OxyContin.
PPLPMDL0020000001	Westlake	OH	44145	11/4/2013	Thanked the dr for trying Butrans like she said she would, asked how the patient was doing. She said the one just died from cancer (adverse report filled out) and the other patient is doing great. Dr said she is starting to rethink all her vikoden chronic patients and she also liked the fact patients don't know the name Butrans. Reviewed commercially insured coupons and encouraged her to continue to write Butrans where she currently is trying it. Left titration guide.
PPLPMDL0020000001	Garfield Hts	OH	44125	11/4/2013	Visited Pain/Anes. Dept. Abraham/Samuel/Lohesnamdah. OxyContin/Butrans initiation/titration
PPLPMDL0020000001	Cleveland Hts	OH	44118	11/4/2013	Reminded of OxyContin Q12 flexible dosing strengths/titration. Discussed Butrans for those Tramadol failures requiring around the clock analgesia, agreed, said he likes Butrans, and is finding new patients every week,
PPLPMDL0020000001	Garfield Hts	OH	44125	11/4/2013	Reviewed Dosing/Titration
PPLPMDL0020000001	Garfield Hts	OH	44125	11/4/2013	Quick Butrans reminder for those Tramadol failures requiring around the clock analgesia, Said he has a patient in mind. Reviewed Initiation/Titration and told him i'm looking forward to discussing further. OxyContin Q12h flexible dosing strengths
PPLPMDL0020000001	Fairlawn	OH	44333	11/4/2013	Saw dr at counter and asked him when he sees patients in his office that are on Percocet to assess them as possible candidates for q12 OxyContin. Dr said ok. I gave him the titration and conversion guide. Gave him the Kathy profile and told him to review so he can accurately identify patients for Butrans. Dr said ok. Nothing else learned.
PPLPMDL0020000001	University Hts	OH	44118	11/4/2013	Window call Quick Butrans reminder for those Tramadol failures requiring around the clock analgesia/MedCO/ESI formulary status, said OK stop back later in week to book appt
PPLPMDL0020000001	Mayfield Heights	OH	44124	11/4/2013	Met with Genice, Autumn, Warren. Discussed new 15 mcg hr dose for Butrans. Left pharmacist guide, NDC code / FPI brochure. Since Butrans not on Cleveland Clinic formulary, savings cards are helpful. OxyContin, is branded, controlled release, comes in 7 doses and q12 h recommended dosing. Left OxyContin \$90 cards & OxyContin pharmacist guide. Left RX patrol flashcard, resources discussed. Intermezzo, zolpidem tartrate, is MOTN awakening insomnia agnt. left pharmacists guide, trial, savings cards.
PPLPMDL0020000001	University Heights	OH	44121	11/4/2013	IR oxycodone APAP insight, dr i want to talk with you today about your Percocet patients, who are being refilled much after month. is it possible some of these patients are appropriate to convert to a long acting sooner? What would be the downfall of converting to OxyContin q 12 h? UH doesn't want me writing OxyContin, & I only write new OxyContin for cancer pain. Fair enough doctor, I'd like to make another suggestion, we've talked about Butrans,as an option for moderate to severe pain after Tramadol. When you have patient taking 3-4 or 300-400 mg daily, & pain not controlled please consider a 7- day Butrans patch. As you know, we have 4 doses now available for patients. ( used new Mktg ( now w 4 strengths, Butrans offers greater dosing flexibility) dr says ok, he will consider. Quick MOTN awakening insomnia mention. For your Caresource patients with MOTN insomnia, Intermezzo, Zolpidem tartrate is an option.
PPLPMDL0020000001	Lyndhurst	OH	44124	11/4/2013	All HCPs doing injections, unable to come up front. Spoke with office coordinator, indications all products. Updates OxyContin commercial, med d status. Left Butrans patient access brochures, reminder 4 strengths now available. Intermezzo, left dosing cards, all HCPs, Intermezzo core messaging, left 1 pack trial, savings cards. Dr deed as NOT reinstated lunches/ appointments yet, keep asking.



PPLPMDL0020000001	Mayfield Heights	OH	44124	11/4/2013	Met w RN Chris. Presented al 3 products. She says dr hasn't written OxyContin for about 15 years, and he's moved away from writing long actings. Let her know I have branded, controlled release OxyContin with q 12 h recommended dosing. Dr would never write that now says Chris. Butrans, although. Long acting, is a 7-day pain patch option for moderate to severe chronic pain, with 4 strengths available. Chris says dr has never written Butrans, she did take my information & say head look over, and took savings cards as well. Left patient access brochure & med d flashcard. Does dr treat any insomnia? No, he sticks to his specialt says Chris, concentrating on interventional management & focuses on the SPINE. Discussed Intermezzo indication briefly. (for MTN awakening insomnia)
PPLPMDL0020000001	Garfield Hts	OH	44125	11/4/2013	Quick discussion on Butrans for those patients that are not adequately controlled on Tramadol, requiring around the clock analgesia, said OK and is considering. Reminded of OxyContin Q12h flexible dosing strengths. Confirmed appt
PPLPMDL0020000001	Cleveland	OH	44109	11/5/2013	Visited Pharm. Left Butrans info to be distributed to appropriate patients. OxyContin savings cards
PPLPMDL0020000001	Olmsted Falls	OH	44138	11/5/2013	Spoke to dr, he tried Butrans 5 on an older patient who said it made her feel loopy. He also discussed trying Butrans in the patient Who is over 65 that has been taking Percocet. I showed him the initiation guide to make sure the starting dose is 5 or 10 depending what total dose the patient t was on, dr couldn't remember, but I did review who might not be appropriate for Butrans. We discussed the elderly. He asked about dosing them, reviewed no dose adjustments but caution start low and warned against respiratory depression or if they have severe bronchial asthma. Left the initiation guide and the Scott profile behind. Asked the doctor if he felt Butrans would help their patients manage their own pain better. He said yes. Dr said he will continue to find a spot for butans.
PPLPMDL0020000001	Berea	OH	44017	11/5/2013	Breakfast. Discussed using Butrans after Tramadol, dr said he would try it. But didn't see many chronic patients but did agree to be seeing more since he picked up a other doctors practice. Dr was told how to dose and how many patches a month to write. We discussed patients managing their pain with extended release, dr didn't say much. Left dr literature on intermezzo.
PPLPMDL0020000001	Cleveland	OH	44109	11/5/2013	Visited Senior Health Ctr PMR
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	11/5/2013	Spoke to dr about conversions to OxyContin from Percocet and asked dr to choose OxyContin as his go to ER opioid. Dr looked at conversion guide and said he uses many ER opioids but OxyContin is probably the one he goes to first. I asked him why and he said that he knows it works and makes sense going from Percocet. I told dr I agreed and to continue prescribing.
PPLPMDL0020000001	Berea	OH	44017	11/5/2013	Spoke to dr, she said she just got done trying to get a patient on Butrans but the patient did want a patch. I repeated pain scores from naive study....and asked her if she thought the pain scores were good, maybe she could tell a patient for a reason for taking the patch. She said the pain dr told her she should refer out after 3 months of being on Butrans, Barry gave the med 80 information. Discussed how patients managed their own pain when taking around the clock or 4 or more times a day. Dr said they do good at it. I asked if 4 patches a month with an extended release delivery system would help make managing their pain easier? Dr said yes. Asked her to keep what she was doing.
PPLPMDL0020000001	Stow	OH	44224	11/5/2013	I told dr I was there to help him keep OxyContin and Butrans in front of his mind when he goes to prescribe an ER opioid. Dr said thanks and said he will keep Butrans in mind. Nothing else learned.
PPLPMDL0020000001	Akron	OH	44305	11/5/2013	Followed up with ma L. And dr about the patient last week that he saw whom he attempted to prescribe Butrans for who was on buckeye and got denied. I asked dr since that patient switched to Caresource prior to him seeing her last week if the patient was still a candidate for Butrans and if he prescribed it? L. Said she couldn't remember but dr said he thinks he did write Butrans again and started on the 5mcg. Dr said he's not sure is the PA was done yet. I asked L. To complete the PA and call me if she has questions. Reviewed the criteria again and she said the patient did meet the criteria.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	11/5/2013	I asked Cassie the pharmacy tech if she has seen any Butrans 15mcg dispensers? She said she didn't think so but checked their stock and they ordered in the 15mcg dose and have one box on th chf. I discussed the dosing, conversions, and patient type nancy. I asked about OxyContin stocking and they have all 7 doses in stock. I discussed titration and conversions. Finished with intermezzo indication and dosing discussion.
PPLPMDL0020000001	Cleveland	OH	44109	11/5/2013	Left Butrans/OxyContin initiation/Titration guides for both products requested appts
PPLPMDL0020000001	Cleveland	OH	44144	11/5/2013	Discussed Butrans for those Tramadol failures requiring around the clock analgesia, Reviewed Opoid Naive trial and at least a 30% decrease in pain intensity. Dr. thought that was significant and important to her patients. Said she has a patient in mind and believes they have MedCo ins. Reminded of Initiation/Titration. OxyContin Q12h flexible dosing strengths
PPLPMDL0020000001	Akron	OH	44310	11/5/2013	Good discussion on all products. Dr spoke about a patient he started on Butrans 10mcg who was previously on Percocet 20mg/day. Dr said the patient came back in after a on the for follow up and complained about the patching giving a rash and the patients didn't want to continue the product. I discussed with dr if he has ever made the decision to treat the rash or puritus before discontinuing it? Dr said he typically would and has but in this situation the patient no longer wanted the Butrans patch. Dr asked what type of adhesive is used with butrans? I told dr I didn't know but I will find it out. I asked why and he wondered if it was latex? I followed up on the last conversation we had about Butrans and patients following his dosing regimen on IR opioids. I reminded dr that he said only about 20% of his patients don't follow his plan. I told dr that we need to discuss the 20% and find out how those patients may be appropriate for Butrans. Dr said he already does that for those patients. I asked dr why for the patient on Percocet if he considered OxyContin? Dr said he doesn't want to mess with OxyContin and the trouble it could bring. I told dr I respect his decision then Discussed patients that may be appropriate. Finished with intermezzo indication, dosing, and patient types.
PPLPMDL0020000001	Brooklyn	OH	44144	11/5/2013	Reviewed OxyContin Q12h flexible dosing strengths, formulary coverage. Discussed Butrans for those Tramadol failures requiring around the clock analgesia. Asked if 30% of pain intensity was significant to her and patients, said it was, feels most pathways are controlled and cant afford branded products. Reviewed MedCo/ESI formulary coverage. Said she will keep it mind, while she is still practicing. Retiring in Dec 2013
PPLPMDL0020000001	Akron	OH	44312	11/5/2013	Discussed all products in a hallway conversation. I told dr I wanted to isolate the patients she is continuing on IR tramadol or hydrocodone. I asked her how she assesses those patients for analgesia when they come in for a follow up appointment? Dr said if those patients on tramadol are doing ok and not complaining of pain, she leaves them alone. I gave her the hydrocodone insight and told her that I don't want her missing potential opportunities for Butrans. Dr said she knows there are a few where Butrans may work. I told her to earmark their charts to. Evaluate them for Butrans. Dr agreed. Dr told me she doesn't believe in writing too much OxyContin but said there are a few that need it because she does have a few cancer patients. I told her that would be a good candidate to OxyContin. Left her with intermezzo indication and dosing no asked her to also listen of patients complaining of in the middle of the night insomnia.
PPLPMDL0020000001	Akron	OH	44320	11/6/2013	Caught dr in his personal office and discussed how Butrans is a really good option for many of his patients on IR opioids for more than 6 months. Dr agreed and said he knows he needs to use more. I showed him the nancy profile again and asked if he will take extra second before refilling vicoden and assess the patient for Butrans. Dr said ok.
PPLPMDL0020000001	Westlake	OH	44145	11/6/2013	Left variat off formation spoke to candy about what Butrans is and how's it's placed.
PPLPMDL0020000001	Westlake	OH	44145	11/6/2013	Spoke to office manager About Butrans and seeing the doctor but today was not a good day. Asked which days were better and she couldn't say.
PPLPMDL0020000001	Copley	OH	44321	11/6/2013	Led off discussion with hydrocodone insight. I showed him the nancy profile and told him about it. I asked him if a patient he continues to refill hydrocodone for if he would take that extra second to assess if the patient would be appropriate for a 7 day controlled release patch? Dr said in that situation it would. I asked if he has patients in that situation and he said if he doesn't now he will soon. I asked him to use Butrans as a possible
PPLPMDL0020000001	Copley	OH	44321	11/6/2013	I asked dr if his use of Butrans at this point has been successful? Dr said mostly yes. I asked if he has had good success why are you not prescribing more of it for other patients? Dr said many cant afford it. I asked him how he knows? Dr said he has a lot of Medicaid and self pay. I told dr that he needs to focus on commercial patients, Caresource and select Medicare D plans. Dr said ok. Nothing else learned.
PPLPMDL0020000001	Westlake	OH	44145	11/6/2013	Spike to ma, discussed Butrans dosing and placement. Review savings cards.
PPLPMDL0020000001	Akron	OH	44304	11/6/2013	Saw dr Weeks on the patient floor. Dr said he really didn't have time so I updated him on the Butrans 15mcg and gave him the nancy profile. Dr said he's better reached in his office on mon and tues afternoon. Nothing else learned
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	11/6/2013	Saw dr Weeks on the patient floor. Dr said he really didn't have time so I updated him on the Butrans 15mcg and gave him the nancy profile. Dr said he's better reached in his office on mon and tues afternoon. Nothing else learned
PPLPMDL0020000001	Fairlawn	OH	44333	11/6/2013	Waved hello to dr and he came to front counter and said he may have found a patient for Butrans. I told him that's great and asked about the situation. Dr said the patient is on vicoden and has chronic back pain. I showed him the conversion scale and showed him where the appropriate starting doses would be. I told dr that it sounds like a good candidate for Butrans. Asked dr to continue prescribing OxyContin for patients already on IR oxycodone. Dr said k.
PPLPMDL0020000001	Cleveland	OH	44195	11/6/2013	Visited Dept. Spoke with nurse (Kathy) reviewed OxyContin/Butrans Initiation/Titration guides, requested appts. Distributed info for nurses/fellows lounge. She Said they as whole/dept do not RX many pain meds/ refer to Walker bldg<font color=blue><b>CHUDAKOB added notes on 11/14/2013</b></font>Mark, this is where you have to narrow her down to specific patient types. "Much" is a relative term. they probably do not prescribe "much", but they do prescribe. Help her see where?
PPLPMDL0020000001	Cleveland	OH	44195	11/6/2013	Visited dept. left OxyContin Initiation/Titration guides, requested appts
PPLPMDL0020000001	Cleveland	OH	44195	11/6/2013	Visited Ctr. Requested appts with Davis. Gutsell, Black. Left Butrans/OxyContin Initiation/Titration guides
PPLPMDL0020000001	Cleveland	OH	44195	11/6/2013	Visited Ortho/Rheum depts. info and Butrans savings card distributed along with OxyContin initiation/Titration
PPLPMDL0020000001	Akron	OH	44303	11/6/2013	Rod the pharmacist told me that he has had two more prescriptions for Butrans since I was in last. Rod said one was a 10mcg dose for dr Dmitri and the other was a new 5mcg start for dr Ali. Rod told me it is a Caresource patient but had some sort of Caremark carv out. I explained the Caresource PA. Told rod the insight about hydrocodone and asked him if he refills hydrocodone often? Rod said there are two many to count. I asked him if he would provide patients refilling vicoden a Butrans initiation and titration guide? Rod said he would and that's its a good idea to start talking about hydrocodone now before its rebranded in January. Talked about copy cards for Butrans and OxyContin as well as reminding him about intermezzo.
PPLPMDL0020000001	Munroe Falls	OH	44262	11/6/2013	Judy the receptionist said dr is extremely busy. Dr saw me taking to her and told me she would give me a minute. I showed her the Butrans profile nancy and told her she needs to use Butrans more frequently for patients on vicoden. Dr agreed and said dr knows she needs to do a better job at asking patients the right questions. I showed her the OxyContin conversion and titration guide. I showed her conversions from IR oxycodone 20mg to OxyContin 10q12h. I told dr that OxyContin is the single entity oxycodone. Dr said she is really glad I gave her the information on OxyContin because she has a few patients she will look to convert. Left her with a reminder on intermezzo dosing and patient types.
PPLPMDL0020000001	Cleveland	OH	44112	11/6/2013	Quick OxyContin reminder Q12h flexible dosing strengths along with Butrans for those Tramadol failures requiring around the clock analgesia. Said Ok will keep in mind
PPLPMDL0020000001	Westlake	OH	44145	11/6/2013	Spoke to the dr about his usage of OxyContin and Percocet. Asked if patients were taking Percocet and were uncontrolled at what point would he consider OxyContin? He said he writes OxyContin, he said it was a good pain med, that he would use Percocet before OxyContin typically. I asked about his atc patients if he would think OxyContin before Percocet in those patients and dr said it depends. Reviewed managed care. Dr said he has written Butrans and they really like it. I asked hi if he ever thought about Butrans after Tramadol? He said no, he think of it after vikodin. I showed Scott profile, and discussed if patient was taking Tramadol q6... And needed that atc coverage, wouldn't Butrans make sense here? He said maybe....cause he usually will supremes vikodin with Tramadol before he gets to q6 Tramadol. I asked if it made any sense to him using Butrans after Tramadol. He said yes....I asked hi. To try be patient in the next week....he said k. Dr said he doesn't have sleep patients and he didn't see himself writing intermezzo or any of them.
PPLPMDL0020000001	CLEVELAND	OH	44195	11/6/2013	Spoke with RPH, no new info learned. OxyContin Q12h, flexible dosing strengths, although they see mainly 60-80mg prescribed. Butrans for those patients requiring around the analgesia
PPLPMDL0020000001	Westlake	OH	44145	11/6/2013	Spoke to the pharmacist about the savings coupons or if they had any problems with getting Butrans thru. She did not recall any problems. Discussed the patch and the scheduling, placement of the patch and how to discard.

	Westlake	OH	44145	11/6/2013	Np said he is finds butrans helpful and writes it. I asked him if he writes it after Tramadol failures. He said yes sometimes. I asked where he prefers to position it...he said its a second line product for him. What does that mean I asked. He said he will try other options before going to Butrans. Usually prn Vicodin along with tramadol...and after Tramadol 3 times a day, a then add with vikodin 2 or three times a day...he will try Butrans. I said regarding pain relief...how to u feel about Butrans. He said he thinks does well... I said if u believe it to work, why wait so long? He said he was hoping that the short acting opioids would do the trick but he ends up adjusting anyway. I said if u feel after Tramadol that the patient would be needing atc pain relief...why not go for Butrans early? Asked him to position Butrans earlier after Tramadol failures for patients w chronic atc pain. Dr said he never sees patie ts with sleep issues. Still gave him intermezzo message. He also hasn't writing much OxyContin because if his license he said. But I filled him in on assessing patients, the q12h and savings coupons.<font color=blue><b>CHUDAKOB's query on 11/14/2013</b></font>-Lisa, after tramadol is a pretty broad and generic next call objective. It looks like the call went well. The next call objective should be the specifics of how you want the call to progress. For example, an objective might be, "gain agreement from Brian that a patient on 3-4 tramadol a day is probably a candidate for Butrans. Use Scott profile as a means to show patient type" Does this make sense?<font color=green><b>BARTOLI's response on 11/15/2013</b></font>-Yes. A more specific objective such as u are suggesting. ok.<font color=blue><b>CHUDAKOB closed the query on 11/15/2013</b></font>
PPLPMDL0020000001	Cleveland	OH	44115	11/7/2013	Reviewed Butrans/OxyContin appropriate patients, along with Butrans 15mcg/hr dose
PPLPMDL0020000001	Cleveland	OH	44114	11/7/2013	Reviewed Butrans for those Tramadol failures requiring around the clock analgesia, said Ok and will continue to prescribe for those appropriate patients. OxyContin Q12h flexible dosing strengths along with Intermezzo for MOTNA/dosing
	Westlake	OH	44145	11/7/2013	Spoke to dr regarding where he thinks Butrans fits with in his pain patients. Dr said those that can't take pills or prefer a patch. I asked what dose does he typically start a patient on Butrans and he said ten. I showed the initiation chart. I asked if he ever sees Tramadol patients, I asked if he wouldn't start a Butrans for atc pain rather than a vikodin prn? He said no reason, some prefer pills. Insaid how dou cousin a patient about taking a new med? He said he just tells them to take it, u said that's what's should do w Butrans. Discussed hesitations in selecting OxyContin over another opioid for patients that could use extended release. He said no. Asked him to Reviewed Butrans/OxyContin appropriate patients, along with Butrans 15mcg/hr dose along with MedCo/ESI formulary status said he will continue to prescribe for those appropriate patients. OxyContin Q12h flexible dosing strengths along with Intermezzo for MOTNA/dosing
PPLPMDL0020000001	Cleveland	OH	44114	11/7/2013	Reviewed Butrans for those Tramadol failures requiring around the clock analgesia, 15mcg/hr dose along with MedCo/ESI formulary status said he will continue to prescribe for those appropriate patients. OxyContin Q12h flexible dosing strengths along with Intermezzo for MOTNA/dosing
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	11/7/2013	Led with insight about hydrocodone and reviewed the nancy and Scott profiles. Jake said that's where he uses it and said that it works. I reviewed the inclusion and exclusion criteria in e opioid experienced trial. Dr said he will continue to write. OxyContin conversion guide and start principle discussion. Jake said that he follows them pretty much. Nothing else learned
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	11/7/2013	Spoke to dr as she came into the office for the day. I reminded her to take an extra second when ready to refill tramadol or vicoden for their likelihood of being a Butrans candidate. Dr said she tries to do it as much as she can. Dr said its not easy to get patients to buy into a patch and cost can be a factor. I told dr to provide e patients w/ product information and to stick to commercial p, and and Caresource as well as state BWC plans. Dr said ok and thanked me for the information.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	11/7/2013	Dr told me through the window that she wrote for Butrans last week. I told her that's great and asked her to tell me about it. Dr said the patient was taking vicoden and was already at 20mg/ day and was complaining of pain. I asked her which dose she started the patient on and she told me 10mcg. I told dr to continue to prescribe Butrans for patients like that and reminded her of the Caresource PA.
PPLPMDL0020000001	Akron	OH	44312	11/7/2013	Saw dr at window and gave quick overview of Butrans. Told him to write it for those patients of his that need a dose adjustment on the IR opioids. I reminded him that it is a schedule 3, 7 day transdermal system and showed him the 5mcg patch. Dr said he remembers it and hasn't found a patient yet. I told him to gain expletive by trying it. Dr said ok.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	11/7/2013	Spoke with dr about mechanism of action and pharmacokinetics. I told dr I wanted his opinion on using supplemental analgesia with Butrans and using the Butrans 15mcg dose. Dr started by telling me that if patients need more than a 50mg morphine equivalent there is something else wrong and the pathology needs to be revisited. Dr said that he still will not go over 10 mcg dose. I asked him if patients needs more analgesia if he uses it opioids? Dr said he has and said it has helped. Dr said he really likes Butrans and will keep using it. Dr said that the mechanism of action for Butrans is understood and asked where in the FPI it says patients can use supplemental analgesia. I read him the section from the FPI and dr said he's satisfied. I quickly told him to continue prescribing OxyContin where appropriate and asked if he switches patients from IR oxycodone to oxycontin? Dr said that's primarily where he uses it because it makes sense.
PPLPMDL0020000001	Mayfield Village	OH	44143	11/7/2013	Dr in bad mood, yelling etc knew I had just a few seconds. Consider OxyContin for Percocet or Vicodin patients whose pain not controlled on short acting opioids; for Butrans, right after Tramadol, showed him conversion information in sales aid. These patients you can initiate on 10 mcg/hr butrans.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	11/7/2013	Dr said he cannot stay for lunch and told me that he is continuing to have success with Butrans despite the large number of insurance issues with the product. I told dr that I realize what the situation is and that I appreciate the hard work everyone does in his office to get it approved. Dr thanked me and said that I have helped as well to make sure they have copy cards and to discuss the product and insurance updates. I asked dr to continue prescribing. I showed dr the OxyContin profiles and reviewed one quickly. Dr said he likes OxyContin as well has success.
PPLPMDL0020000001	Cleveland	OH	44195	11/7/2013	Discussed Butrans initiation/titration, 15mcg/hr dose, MedCo/ESI. Dr said he will consider, doesn't treat long term, but likes molecule and transdermal system. Reviewd OxyContin Q12h flexible dosing strengths, broad formulary coverage
PPLPMDL0020000001	Highland Heights	OH	44143	11/7/2013	Dr had several patients in waiting room. I knew I'd have less than 30 seconds. Using new Butrans piece reflecting 15 mcg/hr dose: dr Salama, please consider Butrans after Tramadol& remember BWC will pay for Butrans. He walked into another patient room.
PPLPMDL0020000001	Mayfield Heights	OH	44124	11/7/2013	Met dr c for first time. She has experience with OxyContin, aware of efficacy, no issues with coverage. Told her I'd like to discuss some data next visit, & in meantime I'm leaving her our conversion titration guide, START principles to assist her when converting patients on short acting opioids to Branded, controlled release OxyContin. Butrans, is another option for patients with moderate to severe pain, needing opioid analgesic Around the Clock for extended period of time. She asked I'd that 1 x per week. I replied yes, patients wear system for 7 days. Showed her patch demo, with disposal units. What are doses ? I replied 5 mcg and 10 mcg are initiation doses, 15 and 20 mcg/hr are titration doses, 20 mcg/hr being maximum dose. Intermezzo, she was unaware of. She immediately stated she liked sublingual delivery system & would be good for her elderly patients. Left her Intermezzo packet of info, dosing card. Asked her to consider Intermezzo for Caresource patients with failure of any other Zolpidem product, should cost under \$5 per month. ( scheduled breakfast Wed 11/20/13)
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	11/7/2013	Asked to see dr Higley and he came to reception window. I gave him the updated Butrans formulary grid and asked if he has any Caresource patients? Dr said he doesn't have many. Dr said he mostly has buckeye and said he knows he can't write Butrans for those patients! I told him that is correct and to stick with commercial, select Medica D plans and the little Caresource he has. I asked dr to continue prescribing and to titrate through the doses using the 15mcg.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	11/7/2013	Quic, message in hallway about Butrans and told him to take the extra second before refilling a tramadol and vicoden to see if. They would be appropriate for a 7 day transdermal patch. Dr said he agrees he just tends to refill and knows that thee may be something else that may be better. I handed dr the initiation and titration guide and asked him to do that and allow the product to speak for itself.
PPLPMDL0020000001	Cleveland	OH	44127	11/7/2013	Reviewed Butrans for those Tramadol failures requiring around the clock analgesia, said Ok and will consider for appropriate paient, depends on Josie for PA's OxyContin Q12h flexible dosing strengths along with Intermezzo for MOTNA/dosing
PPLPMDL0020000001	Mayfield Village	OH	44143	11/7/2013	Dr Azar concern with Butrans due to coverage for his high geriatric population with Medicare Part D. I reinstated Butrans preferred coverage on Express Scripts, Medco, Cigna Med D. He says he's using in nursing homes, none of that data shows in Phoenix, he asked how does Butrans compare to Fentanyl patch? I cannot provide a comparison, as we have no head to head studies. Consider after Tramadol. I dont us Tramadol, i dont like it. why not? I asked. Its not efficient & risk of seizures. ok, showed dosing slider, after patients have tried Percocet, Vicodin or Codeine (30-80 morphine equivalent) you can initiate on 10 mcg/hr. Went over Butrans 4 doses. Showed how to write. He said Butrans not covered at area nursing homes such as Altercare in Mayfield Village & Wickliffe Country Place, or their Pharmacy. who is pharmacy? Absolute he responded, im trying to get them to add it. if they would like me to provide in service for nursing homes staff, just let me know. Another option for moderate to severe pain, branded controlled release OxyContin.
PPLPMDL0020000001	Cleveland	OH	44114	11/7/2013	Reviewed Butrans for those Tramadol failures with Nurse-Lauren, 15mcg/hr, MedCo/ESI, BWC formulary status. Said Ok and will remind Dr.
PPLPMDL0020000001	South Euclid	OH	44121	11/7/2013	Hydrocodone APAP insight, 41% of Hydrocodone APAP scripts are associated with length of therapy lasting 90 days or longer. Of those scripts lasting 90 days, average number of days until patient was converted to an extended release opioid was 287. Would you agree that is a long time? Yes he replied. I'm suggesting you re assess those patients & convert sooner to a long acting, since their pain is now long term I'm suggesting controlled release OxyContin. He replied, I guess I would consider, & I would then follow up with patients every 3 months. Well, that's a good place to start. Thank you for considering converting to OxyContin. I also shared last time, another option for moderate to severe pain, a 1 x week transdermal system we Discussed efficacy & pain reduction. We've discussed Butrans after Tramadol. Here's a patch demo. Patients will get 4 patches, 4 disposal units monthly. Ok I gotta run, this is my busiest day ever in Concord.
PPLPMDL0020000001	Cleveland	OH	44115	11/7/2013	Reminded of Butrans for those Tramadol/Lortab failures requiring around the clock analgesia, Said Ok and thinks Butrans is a great product
PPLPMDL0020000001	Cleveland	OH	44115	11/7/2013	Visited Pain ctr. Discussed appropriate Butrans patients with Dr. Nickels, OxyContin Q12h flexible dosing
PPLPMDL0020000001	Lakewood	OH	44107	11/8/2013	G888888
PPLPMDL0020000001	Akron	OH	44310	11/8/2013	Dr said he didn't have time to talk because he was so behind but said I can make one point. I told him to reassess his patients that he is about to refill their tramadol and write Butrans for them! Dr said ok and he does like the schedule 3 aspect of the drug. Told dr to focus on patients with commercial insurance.
PPLPMDL0020000001	Akron	OH	44313	11/8/2013	Dr told me that he saw his first Butrans patient back and said that the patient is happy with it. I asked he to give me more specific information. Dr said that the patient is on 5 mcg and dosing well and was on vicoden. Discussed the Butrans mechanism of action with dr to make sure he understands it and discussed supplemental analgesia. I reviewed patient types and talked about how he needs to identify more patients. Discussed OxyContin dosing, indication, Maggie patient type and start principles. Dr agreed with all and said he will continue to keep them in mind. Closed with intermezzo indication and dosing and asked him if he could also identify patients with in the middle of the night insomnia.
PPLPMDL0020000001	Akron	OH	44312	11/8/2013	Dr was behind front counter when I approached. Dr said hello and said his Butrans patients are doing well. I told him that's good to hear and to review the nancy profile who is a patient uncontrolled on hydrocodone. Dr said he will and thanked me for stopping by.
PPLPMDL0020000001	Uniontown	OH	44685	11/8/2013	I asked dr if he has any patients that don't follow the dosing regimen he sets for them on products like tramadol or vicoden? Dr said yes he does. I asked him what a 7 day patch would mean to those patients? Dr said it could mean a lot if they are open to taking a patch. I agreed and said that he needs to sell the idea to the patient. Dr said he thinks he does a pretty good job of that but some people can't give up their oral medicines. I told dr to continue searching for the right patient as we discussed.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	11/8/2013	Spoke with Glenn about the procedures he and his staff go through to get Butrans covered. Glenn said that about 75% of the Butrans scripts that get written need some sort of documentation or prior authorization. I told him I am amazed at that number and asked what percentage of those they get approved? Glenn said he didn't know but a good number of them get approved. I asked Glenn to continue to think of sending me one that he comes across that he can't get approved and I will look into it. Reviewed insurance pans with him.
PPLPMDL0020000001	Cleveland	OH	44113	11/8/2013	Visited Pain/Anes/ Dept. Discussed Butrans/OxyContin Initiation/Titration
PPLPMDL0020000001	Akron	OH	44312	11/8/2013	Discussed the Maggie profile for OxyContin and asked him if it makes sense to start OxyContin for the patients. Dr said it does and wondered why OxyContin wasn't started sooner? I told him he is right and the patient should be started sooner. Reviewed start principles and discussed titration and conversions. I showed dr the Butrans 5mcg demo patch and told him. That he needs to start a patient on it because he is probably missing opportunities for patients he continues to refill their short acting opioid. Dr said he will keep it in mind... Finished with intermezzo discussion and hit key points.
PPLPMDL0020000001	Cleveland	OH	44113	11/8/2013	Reminded of Butrans for those Tramadol/Lor/Tab failures requiring around the clock analgesia, MedCo/ESI formulary status, Butrans 15mcg/hr Said Ok and is always looking for new starts
PPLPMDL0020000001	Cleveland	OH	44113	11/8/2013	Visited Dept. Novak/Shen discussed Butrans for those Tramadol failures requiring around the clock analgesia, OxyContin Q12h flexible dosing

PPLPMDL0020000001	Cleveland Uniontown	OH OH	44113 44685	11/8/2013 11/8/2013	Reviewed Butrans for those Tramadol failures requiring around the clock analgesia, agreed its appropriate for those patients and he/Dr. Shen will continue to find new patients. OxyContin Q12h flexible dosing strengths
PPLPMDL0020000001					Dr allowed me to back into his office in between patients. I asked him how he tailors the doses of OxyContin to the patients that need the product? Dr said that he just converts whatever short acting opioid the patient is on to OxyContin. He said sometimes he increases the dose of OxyContin pretty early if he knows they will need more but dr said he usually will start a little lower just to be safe. I told dr that its good to underestimate when its started for the first time in an opioid experienced patient. Dr agreed. I reminded him of Butrans and discussed the difference in patient types from OxyContin. Dr said he will still try it.
PPLPMDL0020000001	Lakewood Garfield Hts	OH OH	44107 44125	11/8/2013 11/8/2013	Saw dr thru the window. Introduced myself and he asked what product I had. I told him and he said he knows them well. I asked him what makes him select OxyContin. He said he knows it well. Remind on q12h
PPLPMDL0020000001					Quick Butrans reminder for those Tramadol failures requiring around the clock analgesia, along with OxyContin Q12h flexible dosing strengths and broad formulary coverage. Dr/Deena said Ok and rescheduled lunch for Mon. to further discuss
PPLPMDL0020000001	Cleveland Akron	OH OH	44113 44319	11/8/2013 11/8/2013	Reminded of Butrans for those Tramadol/LorTab failures requiring around the clock analgesia, MedCo/ESI formulary status, Said Ok and is always looking for new starts
PPLPMDL0020000001					Good conversation with dr. I told dr that I'm guessing that he has patients that have the hard time following the dosing plan he sets for them on tramadol or vicoden? Dr said he has many. I told dr that if he is going to use it, the best way to try it is in the patient that's asks for a different option for analgesia. I asked dr if he agrees and he said yes but said he is concerned about cost. I told him that will not be an issue if he sticks with commercially insured patients and Caresource. I told him about the trial offer and copay card and explained the Caresource PA. I told dr he only needs to use it once in the right patient and allow the product to prove itself clinically to him. I asked if he will find a patient like the ones we have discussed? Dr said he will.
PPLPMDL0020000001	Cleveland Cleveland	OH OH	44125 44114	11/11/2013 11/11/2013	Talked with Karen-Rph Reviewed OxyContin-Q12h, Butrans for those Tramadol failures requiring around the clock analgesia and Intermezzo for MOTNA/dosing. No savings cards needed
PPLPMDL0020000001	Stow	OH	44224	11/11/2013	Quick Butrans reminder for those Tramadol failures requiring around the clock analgesia, said he had a new start last week, asked him for 1 today, said he will consider appropriate patients, Reminded of BWC/MedCo/ESI.
PPLPMDL0020000001	akron	OH	44333	11/11/2013	OxyContin Q12h flexible dosing strengths
PPLPMDL0020000001	Akron	OH	44333	11/11/2013	Told dr that Butrans is the only schedule 3, 7 day transdermal system on the market and he can use it for any patient uncontrolled on their IR opioid. Dr said he knows and really likes that its a schedule 3. Dr said his patients are doing well on it. I reminded dr of the Caresource PA and Medicare D coverages. Dr said thanks and will continue to use.
PPLPMDL0020000001	Uniontown	OH	44685	11/11/2013	Followed up from appointment from last week. I reviewed the proper patients for Butrans including profiles of Scott and nancy. I asked dr to take an extra second when reassessing patients who are on IR opioids. Dr said he will look more frequently for the correct patients. I also spoke to him about tailoring patients appropriately for OxyContin and discussed the start principles again. Intermezzo review with patient types and dosing.
PPLPMDL0020000001					I told dr that he needs to use Butrans more frequently for his patients that he continues to refill on their IR opioids. Dr said he knows and most of his patients on short acting opioids are controlled. I asked what it might mean for them to only have to apply a patch once a week? Dr said ok...nothing else learned.
PPLPMDL0020000001					I asked dr what he is primarily treating with OxyContin? Dr said lots of things including back pain, cervical and lumbar chronic pain, and stenosis. I showed dr Maggie profile and asked him that he can titrate every one to two days when necessary. Dr said he knows and that he usually will titrate as early as 2 weeks if he thinks they need a follow up that soon. Dr said that he really likes it because it works. I told dr to continue prescribing.
PPLPMDL0020000001	Garfield Hts Uniontown	OH OH	44125 44685	11/11/2013 11/11/2013	color=blue><b>CHUDAKOB's query on 12/02/2013</b></font>Cliff, your presentations say OxyContin in first position and Butrans in the second, yet I only see a call note for OxyContin. Did you present Butrans and if so, what was discussed on the call?</font> color=green><b>REICHEL's response on 12/02/2013</b></font>I don't recall but I'm sure I did. Looks like I missed that part of the call note. This must be a first for me.</font> color=blue><b>CHUDAKOB added notes on 12/02/2013</b></font>Perhaps, Please make sure to include all products presented in the call note. Thanks.
PPLPMDL0020000001					Visited Ortho. Left OxyContin initiation/titration guide for Forcier-Shroyer and Hardacre
PPLPMDL0020000001	Garfield Hts	OH	44125	11/11/2013	Introduced Butrans to Todd the pharmacist. Todd said he thinks he filled one prescription and has one box of 5mcg on the shelf. I discussed Butrans indication, dosing, new 15mcg dose, titration and initiation,application sites and candidates for Butrans. Discussed OxyContin indication and dosing as well as conversions. Todd said he has a number of patients taking OxyContin. Introduced intermezzo discussing indication, dosing and limitations of use. He said he has none in stock and has not filled it.
PPLPMDL0020000001	Garfield Heights	OH	44125	11/11/2013	Discussed Butrans Opiod Naive trial, 30% pain reduction, Dr believes that is clinically significant had patient start on Butrans 10mcg/hr and felt it didn't work, Reviewed dosing/initiation/titration. Will keep in mind, He feels that the small mnr of adequately treated for chronic pain are adequately controlled.OxyContin Q12h flexible dosing strengths and broad formulary coverage. Starting on the 14th Dr will be on medical leave until the end of the
PPLPMDL0020000001	Cleveland Cleveland Hts	OH OH	44125 44118	11/11/2013 11/11/2013	Quick reminder on OxyContin Q12h flexible dosing, formulary coverage and Savings cards with Denise Nurse Mgr/Brittany. Also Butrans for those Tramadol failures requiring around the clock analgesia. Said Ok, will relay the info, said to call later in the week in regards to setting up an appt. with Dalbir PA
PPLPMDL0020000001	Cleveland Hts	OH	44118	11/11/2013	Reviewed Butrans for those Tramadol failures along with OxyContin Q12h, flexible dosing strengths, Requested OxyContin Savings cards. Intermezzo for MOTNA/dosing
PPLPMDL0020000001	Uniontown	OH	44685	11/11/2013	Quick Butrans reminder for those Tramadol failures that are requiring around the clock analgesia, said OK, confirmed appt for the 21st
PPLPMDL0020000001					Reviewed OxyContin Q12h flexible dosing strengths, broad formulary coverage, savings cards. Discussed Butrans for those Tramadol failures requiring around the clock analgesia. Dr. said he continues to find new starts, patients seem to do well on Butrans. Also reminded of MedCo/ESI formulary coverage
PPLPMDL0020000001	Lyndhurst	OH	44124	11/12/2013	Started conversation with insight about hydrocodone and 41% of patients on therapy 90 days or longer. Dr said he can certainly believe it. I asked him what a prescription looks like for hydrocodone? Dr said usually q6 prn or just 1 pill q6. I asked him if he has patients that follow the pan he sets for them? Dr laughed and said yes, way too often. I asked him what it would mean to him and his patients if they would initiate Butrans? Dr said he understands that for some it would be a game changer and they would accept it well. Dr said others are hard to convince of change. Dr said the Medicare patients are the hardest to change from their current therapy even if it isn't working. I told dr how far the Medicare coverage has come on Butrans and explained plans. Dr said he is impressed and he knows he needs to use it more often. Discussed OxyContin and good candidates are those who have been on oxydnone for more than 90 days. Dr agreed but said he likes the schedule 3 of Butrans but doesn't feel comfortable writing schedule 2 medications. Finished with reminder of intermezzo indication, Hallway. First call since back from maternity leave. Reminded her of our last conversation regarding appropriate patient selection, she replied, you know I've tried to use & can't get covered. There is now better access to Butrans on a major plan for you: Medco & Express Scripts, Butrans preferred both commercial plans & med d. And Butrans preferred on Cigna Med d. That's good to know, replied Sarah. Remember also BWC will pay for Butrans. I can think of a workers comp patient right new who has neck & back pain. That's great - why don't you consider a trial on him? You would initiate on 10 mcg hr since he's opioid experienced. You can titrate after 72 hrs. We also have new 15 mcg hr titration dose. 20 mcg hr is still our maximum dose. She was concerned with patch placement, opened page to show her 4 possible sites, & when you flip to other side of body, 8 total sites. Ok she responded, I'm gonna give this a try.
PPLPMDL0020000001	Westlake	OH	44145	11/12/2013	Discussed patients hes writing short acting opioids, with As needed dosing, and asked how likely are those patients to follow the plan you've written out for them? I don't know responded doctor. Just something to think about. Perhaps a long acting might be appropriate for some of those patients who are waking up in middle of night, or waking up in am with pain. Please consider controlled release OxyContin for appropriate patients. For Butrans, we've discussed as first opioid ( initiate on 5 mcg hr) or after Tramadol. That patient taking 3-4 Tramadol daily whose pain not controlled. As reminder 4 strengths now, newest dose is 15 mcg hr titration dose, he asked if he could keep dosing slider, yes of course I replied, he placed in his pocket & entered patient room.
PPLPMDL0020000001	Akron	OH	44310	11/12/2013	Dr said she doesn't write much NSAIDs for her paties and that most of her patients would take schedule 3 opioids for acute reasons. I did tell her that both OxyContin and Butrans were not for acute or prn uses. Dr was aware. Note- calid did not save and retyped.
PPLPMDL0020000001	Westlake	OH	44145	11/12/2013	Talked with dr about his vicoden patients that need dose adjustments. I showed him the point ps of the nancy profile and asked him to follow the appropriate starting doses and conversions. Dr said he will focus more on vicoden patients going forward. I reminded dr of the Caresource PA. Told him to write OxyContin for his Percocet patients and intermezzo for those that meet the indication.
PPLPMDL0020000001	LAKEWOOD	OH	44107	11/12/2013	Saw dr today. Dr said he still hasn't tried Butrans In Someone not in a nursing home. We talked about that it was working nicely for the two patient he has on Butrans. Discussed Scott profile. Dr said he thinks of Butrans after vikodin. When I asked why...he said, he just does. Talked about his usage of OxyContin. Dr said he was very familiar with the product.
PPLPMDL0020000001	Westlake	OH	44145	11/12/2013	Discussed Butrans and stocking. No 15 mcg on stock. Talked about where to place the patch.
PPLPMDL0020000001	Lakewood	OH	44107	11/12/2013	Left a variety of materials for dr. Spoke to nurse she said she would pass the information about the savings programs to the dr,
PPLPMDL0020000001	Cleveland	OH	44124	11/12/2013	Spoke to Shami the ma and asked if she thought Butrans was writes by the docs in the office and she said she thought so. Discussed what butrans is, she was fami,air with the basics of Butrans. Also review OxyContin....she said she would give the docs the information.
PPLPMDL0020000001	Westlake	OH	44145	11/12/2013	Hallway. Let dr know we were across hallway, wanted to stop & say hello. Discussed Butrans for opioid naive or after Tramadol. She responded, I don't have patients on Tramadol, it causes seizures. As far as any scheduled opioids I will not write she says. I refer any pain patients directly to pain management.
PPLPMDL0020000001	Lakewood	OH	44107	11/12/2013	Lunch, dr talked about who was the typeof patient to start on Butrans. We discusses his algorithms of what products he uses first, second and third. He tires vikodin after Tramadol. He also said he doesn't stop the Tramadol and continues to add short acting.
PPLPMDL0020000001	Cleveland	OH	44104	11/12/2013	Spoke to office manager. She said as of this month the dr is having more of an admin role and is getting away from treating pain patients. He will not see reps, I can mail the literature though she said. Dr goes between Lakewood and fairview hospital. Is out patients he sees in suite 4b of the Lakewood hospital. I left a variety of information on all products for the doctor.
PPLPMDL0020000001	Cleveland	OH	44106	11/12/2013	Quick Butrans and OxyContin discussion, no savings cards needed, no new RX's
PPLPMDL0020000001	Cleveland	OH	44104	11/12/2013	Called on Anes/Pain. Left info for dept. Confirming appt with Terrah-Hayek-Admin
PPLPMDL0020000001					Discussed OxyContin Q12h flexible dosing strengths, Titration,conversion and formulary coverage, Dr. said she will consider. Introduced Butrans for those Tramadol failures requiring around the clock analgesia, 30%pain intensity reduction, Dr. thought that was significant, she likes transdermal delivery systems, reiterated Butrans has the same abuse/misuse potential as any other CIII. Said she has a few patients in mind, I asked to follow up in 2weeks, said she is quite busy but I can try and catch her.
PPLPMDL0020000001	Cleveland Lyndhurst	OH OH	44104 44124	11/12/2013 11/12/2013	Window call, reminded of Butrans 15mcg/hr and titration, asked if the PA issues have been resolved, Dr said yes, also reviewed OxyContin Q12h flexible dosing strengths and broad formulary coverage
PPLPMDL0020000001					Hallway call. After asking Dr Isakov what his recent experience has been with Butrans, he immediately said, I can't get it covered. Lets discuss some patient types & plans where we can get access. Your BWC patients - I don't have many, dr Kim has the most in our practice. I responded, thank you, I just discussed BWC with dr Kim. You've mentioned trouble with Medicare D, lets concentrate on one of the largest plans in your practice, Medco/ Express Scripts where Butrans IS preferred, as well as Cigna Med D. Showed him initiation, titration guide, for patients opioid naive, initiate @ 5 mcg hr, for your patients on 3-4 Tramadol daily, with pain not being controlled, consider initiating on 10 mcg hr, our opioid experienced dose. He had to see patient, went into room.
PPLPMDL0020000001	Cleveland Akron	OH OH	44120 44305	11/12/2013 11/12/2013	Left Butrans Initiation/Titration guide along with card requesting appt
PPLPMDL0020000001					Reviewed opioid experienced trial with dr and discussed inclusion criteria, forced titration, responder rates, pain score reductions. Dr said he does titrate Butrans and has used all doses except for the 15mcg. Dr said he put a patient on Butrans with Caresource and they approved it for three months. Dr said they need to submit another PA justifying the use of Butrans. I asked if that's a problem and dr said no because its an easy thing to do. I asked to think about the points in the trial when considering a patient for Butrans. Dr agreed.
PPLPMDL0020000001	Lakewood	OH	44107	11/12/2013	Spoke to Shami dr ma about seeing the doctor, she said he was too busy today. Discussed Butrans, she heard of it. Discussed where to place the patch and who is the appropriate type of patient for Butrans. I left a variety of leave behinds on OxyContin and Butrans for dr to review.

	Cuyahoga Falls	OH	44221	11/12/2013	Spoke with Milad the pharmacist who said he is typically in the Fairlawn store is floating on Howe ave today. Discussed key selling messages with butrans and Milad said they are filling the 5 and 10mcg. Introduced the 15mcg dose to him and he said the pharmacy has not filled any yet. Reviewed nancy profile and steady state with conversions. OxyContin dosing, conversions, and student type selections. Intermezzo review and dosing with limitations of use. Reviewed copy cards for all products.
PPLPMDL0020000001	Cleveland	OH	44120	11/12/2013	Quick Butrans intro for those Tramadol failures requiring around the clock analgesia, Dr. said she is familiar with Butrans, struggles with PA's, particular at Metro Buckeye Ctr and is retiring in mid Dec.
PPLPMDL0020000001	Tallmadge	OH	44278	11/12/2013	Dr asked me if there are any patient coupons for intermezzo? I told dr they are and showed him one and explained the trial off and month to month savings. I asked dr about his use of it and said he has had a few patients that had recently told him about in the middle of the night insomnia and said he prescribed it. I old him to continue and reviewed dosing and limitations of use. Showed him the Butrans doing and conversion guide and asked him to focus on patients he is currently refilling on tramadol. Left him the Scott profile. Told him to use OxyContin for his patients already on IR oxycodone.
PPLPMDL0020000001	Lakewood	OH	44107	11/13/2013	Spoke to the staff regarding Butrans. At first staff said dr wouldn't write Butrans cause its expensive and its a patch. After talking about what Butrans is, the pain results of the naive study, the ma staff seemed more open to talking about it. They r n tested in managed care, they dnt take Medicaid or workers comp but they do take caresource patients. Hardly any cash paying patient. They drug test often and they will discharge patients if they feel they are drug seekers. Talked about abuse potential for all my products. And warned about patients taking opioids if they take benzodiazims or cns depressant products. The ma didn't not now that OxyContin was re formulated , left information behind for the doctor and them to read. They said the doctor writes sleep aids. I told them the indication and the dosing.
PPLPMDL0020000001	Cleveland	OH	44113	11/13/2013	Reviewed Butrans for those Tramadol failures requiring around the clock analgesia, Dr. agrees and is always looking for new appropriate patients
PPLPMDL0020000001	Akron	OH	44312	11/13/2013	Good discussion with Barry about appropriate patient types for Butrans. Discussed the tramadol and vicoden patient that comes in to see him who is continuing to complain about pain on a daily basis. Dr said that he has many of them but they are typically on multiple opioids or moderate to high doses of vicoden. Barry and I continued to discuss that those are not the patients best suited for Butrans and to use Butrans earlier on in treatment before they get up high on short acting opioids. Dr said ok and he will continue to look but said the nit he in his practice is small. We told him that its ok and to just start with one patient and move on from there.
PPLPMDL0020000001	Stow	OH	44224	11/13/2013	Spoke with Jamie the new pharmacist at this location. She came from the state road cvs. I asked her about Butrans dispensing and said she has seen two 5 mcg starts this week and one 15 mcg dose. Dr said she has seen prescriptions from Narouze, Ali, and Souzdalinski. Jamie said that the 15mcg start was go from Karen Hodakievic. I asked what she is seeing from OxyContin and she said just about all doses but sees mostly the 20 and 40mg doses.
PPLPMDL0020000001	Solon	OH	44139	11/13/2013	met with Denny and Chuck to review business and plan for 2014. Gave them 2014 plans for Slow-Mag and Laxatives. Denny will ask Ron about adding Senokot To Go to trial/travel section at DDM.
PPLPMDL0020000001	Lakewood	OH	44107	11/13/2013	Nurse said dr is hard to catch in this office. I left literature.
PPLPMDL0020000001	Berea	OH	44017	11/13/2013	Hallway. Dr said your back again. I said yep hoping u know why. He said I have tried yet. I said well I'm pretty pleased u remembered Butrans....and ur reminder is to look for that uncontrolled Tramadol patient that needs atc help. Butrans 5mcg if they are under 309 mcg daily of Tramadol. Said can u do this. He said he will try.
PPLPMDL0020000001	Akron	OH	44312	11/13/2013	Quick hallway call with dr and I told him that Butrans is all about proper patient selection. I told him that he needs to find patients that are on tramadol or vicoden who need dose adjustments. Dr said its been difficult finding patients that meet that criteria because so many of them are already on moderate doses of vicoden. I told dr to head than off at the pass and prescribe Butrans before the vicoden dose increases. Dr said ok.
PPLPMDL0020000001	Olmsted Falls	OH	44138	11/13/2013	Dr said he was fasting today. He asked what was new....I said have u heard of Butrans before. He said its a patch for pain. I went over what it was, its scheduling and pain score highlights from the naive study. I said is the reason I haven't tried it because u don't ow much about it? He said yes and that he doesn't treat chronic pain. I said understood. I explained he may on y have one patient this month that qualifies but they still does ever that shot. I explained the tramdol patient type, how to start Butrans at the 5mcg starting dose cause it was under 300 mg daily of Tramadol and explained how often they need to ate their medication. Dr said he thought it was a 3 day patch. I said are u thinking something else. I explained that Butrans is a sing e entity buprenohrine extend release option for those patient w atc pain and that may be able to manage the patch technology taken once a week. Dr asked if they could shower. I said yes. Explained about heat and the patch and explained if the patch technology starts to lift off they could use first aid tape on the edges. I said what Sony think? He said it sounds interesting. I said for his commitment to try it and he said he will see and thanked me.
PPLPMDL0020000001	Olmsted Falls	OH	44138	11/13/2013	Lunch. Dr said he hasn't seen the right patient for Butrans. We discussed how often he sees the patients for refills on pain meds and the dr said some every month some every 3 months. Dr will see scheduled 3 pain patie ts every 3 months. We discussed the tramdole Patient who has uncontrolled pain atc. Dr said he does see these types of patients and. Asked for Butrans business, dr said he would keep it in mind. Discussed OxyContin, dr said he does use this for some patients.reviewed the tailor of the start principle. And reminded him of the 7 doses. Dr said he has written ambien but was not familiar with intermezzo. Review of indication and dosing.
PPLPMDL0020000001	Akron	OH	44333	11/13/2013	Some with dr about how the protocol for Butrans is going with three prn medications and trailing Butrans at that point? Dr said its going really well and said they are cranking it for Butrans because of it. I told dr to get out his Butrans patient experience kits. Dr said most of his patients are over 65 so he doesn't use them much. I told dr then he needs to get Butrans prescribed for his patients under 65. Dr told me not to talk with him about OxyContin because he likes it. I told dr to continue prescribing.
PPLPMDL0020000001	Cleveland	OH	44113	11/13/2013	Window call. Reminded of preferred formulary status (MedCo/ESI/BWC) Initiation/titration. Said OK
PPLPMDL0020000001	Bath	OH	44210	11/13/2013	Spoke with bob the pharmacist about Butrans and OxyContin. Bob said he filled a prescription recently for Butrans 20mcg and ordered more for refills. Dr was out of my territory. I explained the patch technology as I showed him the patch which he had never seen. I discussed the conversions and titration as well as discussing copy cards. I showed him the OxyContin conversions from Percocet and bob said he understands that its crazy how long patients are kept on IR opioids. I told bob I would bring by copy cards on next visit.
PPLPMDL0020000001	Brooklyn	OH	44144	11/13/2013	Quick OxyContin reminder, Q12h-Titration, flexible dosing strengths, broad formulary coverage. Along with Butrans MedCo/ESI formulary status, said thank you and will keep in mind
PPLPMDL0020000001	Brooklyn	OH	44144	11/13/2013	Quick Butrans intro (discussed for Tramadol failures requiring around the clock analgesia) Initiation/Titration. Dr. said OK said to stop back when she has more time to discuss
PPLPMDL0020000001	Cleveland	OH	44109	11/13/2013	Visited IM/Geriatric Dept. Left Butrans/OxyContin Initiation/Titration guides for all Clinicians (Campbell,Dziwis,Mary Jo Slattery etc/.) Requested appt. email
PPLPMDL0020000001	Brooklyn	OH	44144	11/13/2013	Intro. to Butrans and the significance of a 30% decrease in pain intensity. Dr. thought that was significant, reviewed initiation/titration, formulary coverage Said she will consider. Reminded of OxyContin Q12h flexible dosing strengths
PPLPMDL0020000001	Berea	OH	44017	11/13/2013	Discussed how her patient on Butrans was doing and she said great. I said did u find anyone new, she said not yet but she was going be using Butrans more. I reminded her about titration if she has to move for 5 to 10 to wait a min of 3 days. She was aware. I told her I would get her an Invite to an upcoming mg program in a few weeks.
PPLPMDL0020000001	Akron	OH	44313	11/13/2013	Caught dr at front desk and he saw me and said he was thinking about Butrans recently. I asked him why he was thinking abut it and he said he just knows he needs to use it. I showed him the vicoden profile and showed him how to initiate Butrans with the appropriate starting dose and steady state at 72 hrs. I also gave dr e OxyContin initiation and conversion guide and asked him to look at converting his oxycodone patients to ER oxycodone. Dr
PPLPMDL0020000001	Lakewood	OH	44107	11/13/2013	Dr asked me about the med 80 law. I gave him the company approved letter. Dr said he likes OxyContin cause its q 12h and most insurance pays for it. I asked if he was fam,air with the reformulation and he said yes. I gave him the OxyContin fpi and the leave behind piece. I asked him if he felt more comfortable writing OxyContin with these steps in place and the dr said yes. We reviewed abuse potential with all the products promoted. Dr has not written Butrans because he feels his patients won't take a patch and that he doesn't see the right patient. The nurses asked many questions abut managed care coverage with Medicaid. I addressed the question focused more on caresource and commercial patients. Dr said he does regular drug screenings and asked if Butrans was picked up. I told him he would have to check that buprenorphine was on the list. Dr said he hates refilling vikodin. I told hi. To try so ethng different like Butrans before u get to vikodin. Dr said maybe he should. We discussed intermezzo, dr was unfamiliar but does write generic ambien. Talked dosing and indication
PPLPMDL0020000001	Olmsted	OH	44138	11/13/2013	Saw dr briefly at u ch. staff said he does t normally come back and that he works thru unch. Dr said what is Butrans. I explained what it was, how dosed and why he would want to consider it for patientsWith chronic atc pain. He asked the cost, I said expensive if cash or Medicaid, to focus it on caresource or commercially insured plans. And explained we had many Medicare pt d plans covered but not all. He thanked me and left
PPLPMDL0020000001	Westlake	OH	44145	11/13/2013	Lunch. Discussed Butrans, dr has no experience. Review what it is and where to position Butrans. Dr said he doesn't treat chronic pain and he will refer out. We discussed the steps he takes when a patient moves from NSAID to x for pain. Dr said he will either move to Tramadol or short acting opioids a few times a day. I asked how he writes the script and he said 1 to 2 pills every 4 to 6 hours as needed. I said so how do u know they took once pill every 6 hours and not 2 pills every 4 hours. Dr said he trusts his patients to tell him the truth. We talked about how well his patients are managing their pain. Dr said its hard to say. I asked him if he thought 4 patches a month sounded hard or easy for his patients to manage. Dr asked about the half life of the product. We reviewed the fpi section. I asked him what he was thinking. Dr said it was a long half life, I said its a 7 day patch and its extended release. I asked the dr to try Butrans in a patient where he feels they will be able manage wearing a patch and after Tramadol...before vikodin. Dr said he would think about it. Discussed during the presentation OxyContin. Dr said he writes very little OxyContin. I said dou write any schedule 2 products. Dr said it for chronic. I said dr OxyContin doesn't have chronic pain in its indicatin. And stated the indication....and reviewed the q12h delivery system. Reviewed indication and dosing of intmezzo.
PPLPMDL0020000001	Olmsted Falls	OH	44138	11/13/2013	Lunch. Discussed Butrans Nd the dr said he does not treat chronic pain but after talking with the doctor the doctor say she does treat some but prefers not to. Review of what Butrans is and how it could fit with in his existing patients currently treated for pain with either NSAIDs and Tramadol. Dr said he writes these products. We reviewed the initiation guide and the doctor said he was under 300 mcg daily dose of tramadol, which indicated in the chart he would start a patient on the lowest Butrans dose of 5mcg. We reviewed side effect profile from the naive study and the pain scores. Dr said he does believe the product works for pain. I asked why would he not pick Butrans after Tramadol. He said no reason, just habit. I to,d the doctor to try it after Tramadol failiure for commercial patient. Discussed the savings coupons and encouraged him to get more familiar with the product so meh can better determin if the product is a fit or not. Dr agreed. In between discussin we talked about OxyContin and the reformulation which he was fam,air with. We discussed abuse potential with any opioid. Dr asked about the dosing of OxyContin. Used visual aid and asked if was thinking of so be specifically. Dr said no, soi over back to Butrans close. Dr said he didn't know about intermezzo. Reviewed indication and managed care wAlong
PPLPMDL0020000001	Cleveland	OH	44113	11/14/2013	Quick Butrans reminder for those LorTab failures requiring around the clock analgesia, OxyContin Q12h flexible dosing and Intermezzo for those MOTNA/dosing. Said as always, he will continue to find appropriate patients
PPLPMDL0020000001	Cleveland	OH	44195	11/14/2013	Requested AM breakfast appt. w/fellows, invited to upcoming Desphande program. OxyContin formulary info and Butrans Kathy profile
PPLPMDL0020000001	Lakewood	OH	44107	11/14/2013	Spoke to staff and tried to see dr but they said no. Discusses what Butrans is and managed care...
PPLPMDL0020000001	Cleveland	OH	44195	11/14/2013	Visited CCF- Walker bldg Pain/Anes. Left OxyContin/Butrans Kathy Profile along with OxyContin formulary grids. Invited to upcoming dinner program
PPLPMDL0020000001	LAKEWOOD	OH	44107	11/14/2013	I asked the pharmacist if he ever sees oxycodone re what he would do. Pharmacist said he would fill oxycontin or call the office to make sure he wanted that or something else. Talked about OxyContin having 7 doses and how it was dosed, he was aware. We talked about Butrans being an extended release option in Schdule 3 and asked how he felt about it beig the only one. Pharmacist was in different. Reviewed Butrans, how long they wear the patch and waiting 21 days before going back to the site. Where to lace the patch and how to discard the patch. No 15mcg Butrans in stock yet.
PPLPMDL0020000001	Lakewood	OH	44107	11/14/2013	Left materials behind for ma and dr o review. Discussed managed care today.
PPLPMDL0020000001	Lakewood	OH	44107	11/14/2013	Discussed Butrans with the dr and she said cost was the reason she hasn't tried it because it is a new product. I explained that the product has been out for 3 years and we discussed managed care. We reviewed what Butrans is and what type of patient I was goi g to focus I. Today, the Tramadol Scott profile. We discussed that Butrans was a 7 day transdermal patch of buprenohrine and therefore 4 applications a month. I asked if she thought this might be a fit in her practice and she said yes. She said patients like taking their pills. I said understood. Yet discussed how she felt patients were doing managing their own pain with short acting prn medications for atc pain? She said some do if fine. We talked about the pain s ores of the naive study....and the incision c rite rita and asked her the pain scores was something her patients would be interested in knowing. She said maybe not...I said well those pain score results are important to some patients. We discussed OxyContin in between Butrans. Dr said she likes that OxyContin was a single entity and that it is easier to get thru managed care. I asked dr to try Butrans out in a few patients and see if its a fit for their practice. She said shed try it.
PPLPMDL0020000001					

PPLPMDL0020000001	Fairview Park	OH	44126	11/14/2013	Spoke to nurse regarding Butrans, she didn't need any savings cards. Asked I could see the doctor, answe was no. Asked what was the best time to catch the doctor, she said he doesn't see reps. I left dr a variety of approved literature and the nurse said she would give it to him.
PPLPMDL0020000001	Lakewood	OH	44107	11/14/2013	Dr said he doesn't treat chronic pain. I said I understand u dont treat a lot or maybe even want to refill opioid scripts every month or two right, he said yes. Butrans is an extended release option to ur patients schedule 3. It is 4 doses a month, changed every 7 days and covered under many commercially insured plans. If patients are uncontrolled on tramadol....what's the down side to trying Butrans. He said he will think about it.
PPLPMDL0020000001	Euclid	OH	44117	11/14/2013	Dr DeMiccio is taking over Morleys Euclid practice. Dr Morley in Mon & Thu 1-7& at his other business in Manhattan, Bodylgicmd.com remainder of week. Dr DeMiccio still works @ CC ER on Saturdays as well. Provided pain reduction insight BUP 3024 to dr, then linked to 4.6 point overall pain reduction for naive patients. Discussed new 15 mcg hr titration dose. Was concerned with coverage for Med D & BWC patients. Told him BWC will pay for Butrans & Med D status updated. We then discussed controlled release, branded OxyContin, q 12 h dosing, for Percocet patients, he asked why BWC is NOT covering OxyContin? I'm unsure I stated, I will research & get back to you. Left conversion titration guide, told him next time I'd like to share information designed to help him with conversion from short acting opioids & titration.
PPLPMDL0020000001	Cleveland	OH	44195	11/14/2013	Brief discussion on Butrans Initiation/Titration, Recvd info, informed Deshpande MD Program
PPLPMDL0020000001	Cleveland	OH	44114	11/14/2013	Quick Butrans reminder for those Tramadol failures, BWC patients and invited to upcoming Deshpande program, Said he will try and make it
PPLPMDL0020000001	Lakewood	OH	44107	11/14/2013	Saw dr....reminded him that the holiday is here and not to be surprised if he sees more pain patient ts that normal the next two months due to the holiday stress. When u re-asses.....think about how many pills they are taking
PPLPMDL0020000001	Lakewood	OH	44107	11/14/2013	I. A day and see if maybe OxyContin. Q 12h would be a wise option for them....and if its a Tramadol patient uncontrolled....u can use Butrans. He said okok thank u.
PPLPMDL0020000001	Cleveland	OH	44103	11/14/2013	Lunch. Discussed his thoughts on writing OxyContin and Butrans. Dr said the reason he doesn't write Butrans is that he can't get it thru managed care Nd he does not like to deal w prior auths. I said so u pick medications based on their managed care? Dr said n but if the product he gets rejected or causes too much time to be taken he won't write it. Spent time reviewing managed care. We discussed his reassessing patients. Dr said he doesn't d pill cunts or contracts like some doctors do but he isn't treating over 80mg morphine equi. I asked if he was referring to med 80 and he said yes. I gave him the company letter to review. We talked about how patients are managing their own pain. Dr said not very well. We reviewed the delivery system of Butrans, I said that. Butrans is the only schedule 3 extended release opioid. Dr said he didn't realize that. Reviewed that Butrans could be refilled, dr says he sees his patients on opioids every 3 months for an assessment. What questions do u ask? He said how's ur pain usually. We discussed asking when they wake up if they are in pain, or how soon after they wake up do they take something...or if they wake up in the middle of the night from win and how many times a week. If a patient has atc pain and would be willing to try Butrans....I asked him wouldn't it make sense. Dr said yes and that he would write it but his ingest hesitation is managed care coverage and it of pocket cost for patients. Discussed OxyContin q 12hand Interme
PPLPMDL0020000001	Cleveland	OH	44103	11/14/2013	Reviewed OxyContin. Q12h, flexible dosing, Butrans for those Tramadol failures and Intermezzo for MOTNA/dosing. No savings cards needed or requested. Said Transdermal system is favorable to prescribers/Dispensers- said they have the same abuse/misuse potential as PO delivery<font color=blue><b>CHUDAKOB added notes on 11/21/2013</b></font>-Mark, as a reminder, we cannot provide savings cards to Rite-Aid pharmacies per their corporate directive.
PPLPMDL0020000001	Cleveland	OH	44103	11/14/2013	Reviewed OxyContin Q12h flexible dosing strengths, broad formulary status. Reminded of Butrans for those Tramadol failures requiring around the clock analgesia, said he is "thinking of prescribing" but hasn't yet, asked what is holding him back, said not really sure. but will keep in mind.
PPLPMDL0020000001	Cleveland	OH	44113	11/15/2013	Butrans reminder for those LorTab failures requiring around the clock analgesia, said she likes Butrans and like always will keep in mind for those appropriate patients, Intermezzo for MOTNA/dosing
PPLPMDL0020000001	Cleveland	OH	44113	11/15/2013	Quick Butrans reminder for those LorTab failures requiring around the clock analgesia, said she likes Butrans and like always will keep in mind for those appropriate patients
PPLPMDL0020000001	Akron	OH	44308	11/15/2013	MSL phone meeting with Dr.Friebert to discuss PK waiver and site enrollment potential. Dr. Friebert is hoping to enroll one more patient in QTR3001 by January 2014.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	11/15/2013	Saw dr at Summa Western Reserve Hospital coming from pharmacy. Dr said he's sorry he couldn't get more time with me when I saw him last. Dr said that he is having really good success with OxyContin in the inpatients at the hospital and Butrans is going really well. I asked dr if he is using more Butrans for outpatients? Dr said he is when he is seeing patients at the locations. Dr said he is using for his vicoden patients that want more pills. I told dr to continue searching for patients even on tramadol before they move to vicoden. Dr agreed but said he sees a lot more vicoden patients. I asked dr to continue prescribing OxyContin and Butrans.
PPLPMDL0020000001	Barberton	OH	44203	11/15/2013	Spoke to Jen the ma and asked if I could do a follow up with dr regarding Butrans. She said no and directed me to a unch for an apt to see the doctor. Left variety of materials for all the doctors to review.
PPLPMDL0020000001	Barberton	OH	44203	11/15/2013	Dr was not in the office, gone for the day. Left a variety of I for action for the office manager to pass thru to the doctor.
PPLPMDL0020000001	Akron	OH	44320	11/15/2013	Dr asked me if Butrans is covered for a commercial SummaCare patient. I told him it is and asked why? Dr said he has a Paris coming Monday that he wants to put on Butrans. I asked why and he said because the parit is on 4mg of Dilaudid and said he needs to get the patient off of. I told dr that he needs to do the morphine equivalent for that to determine the starting dose and that most likely the patient will need to start on the 10mcg. I told dr that he may need to titrate the patient if the patient needs additional analgesia and discussed the 15-20mcg. Dr said ok and he will let me know. I told dr to give the patient the copy card and trial offer.
PPLPMDL0020000001	Cleveland	OH	44113	11/15/2013	Visited Anes./Pain along with Ortho dept Left OxyContin formulary grids and Butrans Initiation/Titration guides
PPLPMDL0020000001	Akron	OH	44320	11/15/2013	While introducing Butrans and oxycontin to one of the medical students dr came up to listen. I reviewed OxyContin indication, dosing and titration with patient types. Discussed Butrans patch description,doing,titration, conversions and patient types. Dr said that she should be using more Butrans and I agreed! I asked her to continue looking for patients on Percocet who would be appropriate for q12 oxycodone.
PPLPMDL0020000001	Akron	OH	44320	11/15/2013	Spoke to dr about all products. I discussed what she is currently doing for her patients who need a dose adjustment on products like tramadol? Dr said its difficult to take every parit in that situation and start Butrans because e of so many other factors. I asked her then what makes for a good Butrans candidate? Dr said one who needs more of an ER product due to a chronic condition and willing to make a change and one who's cost isn't a factor. I asked dr if she has those patient. Dr said she had some. I told her to start there. Dr agreed. I discussed how to choose good candidates for OxyContin and discussed conversions. Intermezzo dosing and limitations of use.
PPLPMDL0020000001	Cleveland	OH	44113	11/15/2013	Reviewed Butrans for those Tramadol failures requiring around the clock analgesia, Presented Opioid Naive trial and what a 30% reduction in pain intensity means to his patients, said he thought it was significant, but also believes patients like PO dosed products. But, he will consider. Discussed OxyContin Q12h flexible dosing strengths and broad formulary coverage. Intermezzo for MOTNA/dosing and Trial cards
PPLPMDL0020000001	Akron	OH	44312	11/15/2013	I asked dr behind front reception desk if he is continuing to have success with Butrans? Dr said he is and said that as we discussed last time, dr said he is being very selective of the patients he is putting on it. I asked him if he has started patients who have failed tramadol? Dr said he has and said that even those patients he is making sure they are ok with a patch and will use it properly. I told dr that's good to hear and to continue prescribing. Dr
PPLPMDL0020000001	Cleveland	OH	44113	11/15/2013	Spoke with Justin, Butrans- no new info learned. OxyContin Q12h flexible dosing strengths
PPLPMDL0020000001	Barberton	OH	44203	11/15/2013	Dr said she likes OxyContin of all the Schdule 2 products because of the reformulation. Dr said Purdue was the ny company to do this and more should follow. We dis used abuse potential with opioids. Including OxyContin. We discussed Butrans the dr said she is treating less chronic pain. But she thought Butrans might have a fit for those patients who might like to try a patch. Dr said she would try Butrans given the right patient. Discussed Intermezzo. Dr said she stays away from writing sleep meds. Dr said she would not ever write it, nor any zolpidem product.<font color=blue><b>CHUDAKOB added notes on 10/2/2013</b></font>-Sounds like her mind set might have changed a little. Keep working at it. You are making impact...slow but sure. Nice work!
PPLPMDL0020000001	C. Falls	OH	44223	11/15/2013	Cindy the pharmacist ordered the Butrans 15 mcg dose and ordered two cases which would give her a \$66 discount. She showed me the form to fill out and asked if today is indeed the last day and I told her it is. She said she would fax it in. She said that the have been seeing more Butrans and OxyContin. I asked from who and she said a couple of OxyContin and one or two Butrans from Dr Ali. She said that dr Ali is prescribing more Butrans. I told her to continue filling them and to let me know about any problems getting it through. Finished with reminding them of intermezzo indication and dosing.
PPLPMDL0020000001	Barberton	OH	44203	11/15/2013	Spike to his daughter for a while, who is the office manager of this location and the location at the hospital. She said there was not her pain guy at the hospital location that might learn about Butrans. I was u fami,air with his nArme. We talked about what Butrans is and she to apply. The patch, dr said he has been writing it, he said the patie stare doing fine but he was wondering what other med part d plans were covered cause its expensive. Discussed managed care. Focused in on commercially insured patients using the coupon. I asked him if he liked the extended coverage (control release) over 7 days. He said so far IT was working. Reminded him of OxyContin, another extended release single entity q 12h oxycodone molecule. She said oh yes, been around a long time.
PPLPMDL0020000001	Hudson	OH	44236	11/15/2013	Quick hello to dr in Hudson office. I asked to see him at the window and I told him that an ideal candidate is one who needs a dose adjustment on tramadol and I asked him if he has patients like the one in the Scott profile?
PPLPMDL0020000001	Cleveland	OH	44114	11/15/2013	Dr said he has had success with Butrans from tramadol and vicoden. Dr said he will continue to look for patients. I told dr thank you and to cotact me with any questions he may have.
PPLPMDL0020000001	Berea	OH	44017	11/18/2013	Quick Butrans reminder for those Tramadol/LorTab failures requiring around the clock analgesia, 15mcg/hr. and MedCo/ESI formulary status. Said OK, she will continue to find new patients
PPLPMDL0020000001	Cleveland	OH	44113	11/18/2013	Dr continues to tell me has not seen any uncontrolled pain patients.<font color=blue><b>CHUDAKOB's query on 01/13/2014</b></font>-Lisa, can you please clarify this call note. You have a very limited call note and yet you put down you presented three product presentations?<font color=green><b>BARTOLI's response on 01/13/2014</b></font>-Primary discussion was Butrans. Reviewed the Scott profile, dr said he has not seen anyone who might be appropriate for Butrans yet. OxyContin- dr said he doesn't write much OxyContin, that he was aware it was a q12h and he said I would have better luck getting him to write Butrans over OxyContin. Dr told me to leave coupons of intermezzo.<font color=blue><b>CHUDAKOB added notes on 01/14/2014</b></font>-Lisa, thank you for the clarification. It is very important that accurate call notes are recorded on every product you present. If you did not discuss the product, please do not put it down as presented. If you did discuss a product, then be sure it is recorded in the call notes. Thanks Lisa. If you have further questions on this, please let me know.
PPLPMDL0020000001	Cleveland	OH	44113	11/18/2013	Confirmed Appt with Dr.Shen/Novak, invited to upcoming program
PPLPMDL0020000001	akron	OH	44333	11/18/2013	I gave dr the Scott profile for Butrans and asked him if he thinks he will see a patient similar to him this week? Dr said he probably will. I told dr to make this week a Butrans week by starting Butrans on a patient like Scott. I also showed him the Maria profile for OxyContin and asked for him to continue to use OxyContin instead of refilling IR oxycodone. Finished by telling dr to also look for the criteria that patient meet the intermezzo indication
PPLPMDL0020000001	Westlake	OH	44145	11/18/2013	No lunches anymore she said hospital rules. Talked on Butrans if she found a spot for it and she said not yet. Pulled Scott profile.
PPLPMDL0020000001	Westlake	OH	44145	11/18/2013	Spoke to nurse about any lunch cancellations, left literature for doctors.
PPLPMDL0020000001	Mayfield Village	OH	44143	11/18/2013	Met with med asst Heather. Discussed Butrans as 1 x week transdermal option for moderate to severe chronic pain. Left 12/11 invite for both Drs Krishnan & Ashraf.
PPLPMDL0020000001	Westlake	OH	44145	11/18/2013	Dr out of country visiting his family until after thanksgiving. Nurse said I can catch I'm at window...sometimes does lunches. Left a variety of materials for him to review.
PPLPMDL0020000001	Stow	OH	44224	11/18/2013	Some with Greg the pharmacist and Mike the tech about all products. Greg said they are continuing to fill Butrans and have had good luck recently with getting them through insurance. I told them about the new dose and asked them to order it. OxyContin dosing and conversions and intermezzo indication and what a candidate looks like.
PPLPMDL0020000001	Stow	OH	44224	11/18/2013	Led discussion with insight about hydrocodone and then follow it up with the Kathy profile. I introduced the Butrans 15mcg dose. Dr said that he is happy with the 15mcg and will use it. I asked for continued prescribing early on in the treatment of chronic pain. Dr agreed and said he was double booked and needed to leave.
PPLPMDL0020000001	Akron	OH	44333	11/18/2013	Saw dr up front in Fairlawn office and told him that when he has patients that he is ready to refill their Percocet for to assess them for the q12 oxycodone. Dr said ok and he is trying to do it more and more because he hates refilling Percocet. I told dr to also assess patients that are on tramadol for Butrans. Dr said ok. Nothing else learned.
PPLPMDL0020000001	Stow	OH	44224	11/18/2013	Short conversation with Abby over lunch. I led with the hydrocodone insight and she said she admits that she probably leaves patients on their mediate release opioids too long. I asked her why she thinks that happens? She said she's not quite sure but said that patients want their pills and don't want change and that she said she needs to reevaluate them for an ER opioid sooner. I told her to think of Butrans at that point and explained the dosing and patient profiles. Abby said she knows she also has some Butrans patients that should probably be titrated. I reviewed steady state and titration of doses. Abby said she is finding great success with Butrans for her medical mutual patients. I told her about all the commercial plans covered including Caresource PA which she said she didn't know.... I told her we have discussed it many times before and reviewed the criteria. She said she is glad to know about the plans and will use it for Caresource.
PPLPMDL0020000001	Cleveland	OH	44113	11/18/2013	Visited Dept/ Left OxyContin/Butrans Initiation/Titration guides for Stearns/Bilfield



PPLPMDL0020000001	Akron	OH	44304	11/18/2013	Spoke with pharmacy technician today about all products. I asked her how familiar she is with Butrans? She said that she is and they have the 5 and 10mcg in stock. I asked her if they have copay cards and she said they do have them and have been using it for a few patients recently. I reviewed th dosing, introduced the 15mcg patch and discussed conversions. I discussed OxyContin dosing, titration and conversions. She said they use too much of it. I asked what she means by that and she said some patients are on very high doses. I discussed tailoring the dose and start principles. Intermezzo doing, indication and patient types.
PPLPMDL0020000001	Mayfield	OH	44143	11/18/2013	Met with med asst Terri. Left 12/11 program invite, she will make sure dr & their 2 RNs get invite. Left dr new Butrans dosing slider, discussed indication & new 15 mcg hr titration dose with Terri. Discussed trial, savings for Intermezzo.
PPLPMDL0020000001	Akron	OH	44304	11/18/2013	I discussed the patient that is already on the oxycodone molecule and is in need of a dose adjustment. I showed the. Inversion guide and asked him what the clinical advantage of continuing and/or titrating IR oxycodone? Dr said some patients it works really well on and is low cost. I asked if the 12h oxycodone would be any different? Dr said he has many patients that like to take a pill every 4 or 6 hours. I asked if he has some that would be open to the ER oxycodone? Dr said probably. I told him to start there and move on into the 7 dose flexibility. I gave him he Butrans initiation and titration guide and asked for continued success by looking for patients like Scott and Kathy left him the parent profile guide for intermezzo.
PPLPMDL0020000001	Berea	OH	44017	11/18/2013	Saw dr. Discussed titration of Butrans for the patient she just started on Butrans. Dr said she would have no trouble doing this if patients pain was not controlled. we also talked about breakthrough pain and supplemental use along with their Butrans therapy. Asked dr to keep an eye out today, this week for patients coming to refill their Tramadol. If their pain is progressing to another level- to write Butrans is week and see how well they do managing their pain with 4 patches a month. Reviewed intermezzo....dr wanted to know the difference between Ambien and intermezzo. Instated no head to head. That intermezzo is a sublingual prn medication with middle of the night awakenings within 4 hours of sleep remaining. Dosed differently for men than woman n elderly. Gave her the savings cards that 5 free along with a script.
PPLPMDL0020000001	Mayfield Village	OH	44143	11/18/2013	Dr price is concerned with state of Ohio 80 mg trigger letter, as he has cancer patients who have, chronic, non terminal pain, who are on over 80 mg morphine equivalent. I handed him our OxyContin. Conversion, titration guide, which will assist him with titrating down from 80 mg morphine equivalent or greater. Titration, up. Or down, possible every 1-2 days. He will. Continue using OxyContin in cancer patients. Dr price, we've discussed Butrans many times for opioid naive, & opioid experienced patients, we've discussed safety & efficacy of Butrans, and pain reduction scores in both naive & experienced patients. I've asked that your. patients not controlled on 3-4 Tramadol daily, be converted to 10 mcg hr Butrans. What is holding you back? Cost. You have trial, savings cards for Butrans & Butrans preferred Medco. express scripts, Cigna med d. So can we concentrate on those Tramadol patients with commercial coverage or Med D we just discussed? Yes, replied Dr Price.
PPLPMDL0020000001	Highland Heights	OH	44143	11/18/2013	Met with medical assistant, discussed Butrans, 1 x transdermal patch option for moderate to severe chronic pain. dr has expressed concern regarding patient access/coverage. Reminder BWC will pay, and preferred status Medicare Part D, Med o, Cigna Express Scripts. Left new dosing slider with 15 mcg hr titration dose. Left 12/11 invite.
PPLPMDL0020000001	Cleveland	OH	44113	11/18/2013	Quick OxyContin Q12h flexible dosing strengths reminder, and Butrans for those Tramadol failures requiring around the clock analgesia. Said Ok
PPLPMDL0020000001	Mayfield Village	OH	44040	11/18/2013	Spoke with tech first, then pharm mgr Steven. He has a few patients on Butrans, no 15 mcg hr has come through yet. Discussed our 72 hr steady state & why patients may be on non opioid or short acting opioids for break through pain, & while waiting for Butrans to kick in. When should the patient come off short actings or supp analgesia, after a week? Asked Steven, I replied that's up to their physician. This is a transdermal system worn for 7 days, then another patch is applied to different application site. Patient gets 4 patches per month. Steven had phone call then.
PPLPMDL0020000001	Cleveland	OH	44113	11/18/2013	Quick window call, Butrans reminder for those Tramadol failures requiring around the clock analgesia and OxyContin Q12h flexible dosing strengths. Said Ok, talk to Eissa next for PA's concerns
PPLPMDL0020000001	Cleveland	OH	44113	11/18/2013	Quick Butrans reminder for those Tramadol failures. Said ok, but feels patients are adequately controlled on present therapy. I not refers to pain mgmt, but will keep in mind
PPLPMDL0020000001	Stow	OH	44224	11/18/2013	Started off conversation with dr using the hydrocodone insight. Dr said he agrees that patients are on their short acting narcotics way too long. Dr said they are trying to get their patients to stop their oxycodone. I asked how his practice thinks the but approach to do that is? Dr said they are not sure but are confronted with it each and every day. Dr admitted that their patient population is on way too many short acting products and they just try and streamline them. I told him that they have many ER options available and Butrans is one of them. Dr said that they have had good success with Butrans and are trying to implement it sooner on in prescribing of opioids. I told dr that that is exactly what should be focused on. I spoke to him about th tramadol and viconden patient. Dr agreed and said he will continue to try and start ER opioids sooner when warranted.
PPLPMDL0020000001	Westlake	OH	44145	11/18/2013	Kelly said d n more lunches or any type of food, per the hospital rules. She canceled all lunches on books for all reps. She did not know the reasoning. Saw dr, we spoke about the lunch cancellations. Talked n Butrans. Asked him how come ts not a first line product for him? He said his patients are more severe. We talked about supplementing on Butrans and the pain scores for the Butrans experienced patient type. Dr said he liked the product.
PPLPMDL0020000001	Garfield Heights	OH	44125	11/18/2013	Discussed OxyContin, q12h....also spoke intermezzo. He doesn't treat sleep issues he said.
PPLPMDL0020000001	Cleveland	OH	44102	11/18/2013	Reviewed OxyContin/Butrans savings card program, discussed Butrans with Tech for those Tramadol failures requiring around the clock analgesia. Also reviewed Intermezzo for MOTNA/dosing and Trial/savings card
PPLPMDL0020000001	Cleveland	OH	44102	11/18/2013	Reminded of OxyContin Q12h, flexible dosing strengths, broad formulary coverage, said Ok, Reviewed Butrans for those Tramadol failures requiring around the clock analgesia, said he will keep in mind. Asked about opportunity to meet over at St. Augustine, said he doesn't have a set schedule, but I can try.
PPLPMDL0020000001	Stow	OH	44224	11/18/2013	Led with discussion about insight about hydrocodone. Sandra agreed the numbers are staggering. I asked her when she writes a hydrocodone prescription what it looks like? She said its usually q6 1-2 pills a day. I asked her how often do you believe those patients are following the plan she sets for them. Sandra laughed and said lots of them and the usually take too much. I asked her what a 7 day patch would mean to those patients? Sandra said that I must understand that psychologically and physically many of her patients need to take a pill. She told me that she cannot force another form of therapy on those patients. I told her I understand and asked if ALL of her patients fit that description? She said no. I told her to then focus on the patients more open to change and to at least be willing to try a patch. I adapted her to at least get patients to get on the Butrans trial which could be free for many for 28days. Sandra agreed to do that.
PPLPMDL0020000001	Lakewood	OH	44107	11/19/2013	Oxycontin, dr said he has many patients doing well on the product. we discussed the molecule and the dr said he liked it was twice a day. I did say it was a q12h product. he said agreed. Lunch. Dr said he wrote once for Butrans which was started by dr kabbarra the pain specialist in Westlake. I said what do u know about Butrans. Dr said not much. Reviewed the molecule, how long to wear the patch and how many patches a month. Reviewed initiation doses....he looked at the chart and said mostly he can see his patie ts starting at 5mcg. He asked if he should stop their current medication and then start Butrans. I discussed the steady state of the product being 72 hours and told him that per the studies such that Butrans could be supplement with NSAIDs And suggested that if the patients are currently on an opioids not to abruptly discontinue their medication until Butrans has a chance to work. Dr asked about cost. Dr said he has caressource. Discussed it would most likely need a prior auth and couldn't use the coupon. However reviewed commercial plans....and the coupon. Dr said he would try to
PPLPMDL0020000001	Hudson	OH	44236	11/19/2013	Dr told me that he had a patient recently that was being tapered of Percocet and viconden form pain management and was still in around the clock pain. Dr said he wanted to start Butrans 10mcg and got approval from the patients pain management dr. Dr Seiple said that a few weeks after the patient called and said they could not tolerate it. I asked what the tolerability issues were and he said he's not sure and mentioned maybe nausea. Dr said the patients was discontinued on Butrans. I told dr that it will not work for every patient and asked him to continue finding the appropriate patients and reviewed profiles. Discussed start principles for OxyContin and dosing. Discussed intermezzo patient profiles.
PPLPMDL0020000001	Lakewood	OH	44107	11/19/2013	Spoke to office manager, booked a lunch and she let me talk to dr for a few minutes on Butrans. Dr said he doesn't see many chronic patients. I focused n n the Tramadol patient he refills every month or so. I asked him to pause the next time he goes to write the script to make sure a different delivery system for atc treatment would make more sense. Showing the initiation guide dr said he is usually under 300 total daily dose of Tramadol, therefore we talked on starting at the lowest dose which is 5mcg. I told hi. T try it out this week for a commercially insured patient and get sme experience under his belt with the product. He said ok.
PPLPMDL0020000001	Cleveland	OH	44111	11/19/2013	Spoke to pharmacist, discussed Butrans placement, coupons and placement.
PPLPMDL0020000001	Fairview Park	OH	44126	11/19/2013	Spoke to nurses about Butrans savings cards and intermezzo free trial of the savings cards.
PPLPMDL0020000001	Lakewood	OH	44107	11/19/2013	No see try to get information to the dr but the office manager said today was not a good day. Reviewed savings coupons for Butrans.
PPLPMDL0020000001	Akron	OH	44333	11/19/2013	Discussed OxyContin and Butrans patient types and how and why he decides at what point to prescribe each one. Dr reminded me that he has to set dosing thresholds for IR opioids which he said make all the difference and justification to prescribe ER opioids. I asked what those are? Dr said Ophir oxycodone of about three pills before he prescribes OxyContin. Butrans dr said that he uses it for patients on tramadol and viconden. Dr said viconden patients sometimes go to Percocet if they are under 3 pills and some he move to Butrans based on their diagnosis. Dr said many patients with chronic low back pain, osteoarthritis, and others with most types of chronic pain except for cancer pain are good candidates for Butrans. I told dr that he just explained many patients in the opioid experienced trial. Dr said he likes it and will continue prescribing. I asked dr to continue prescribing OxyContin and explained conversions and start principles. Dr said ok and greed with the information. Finished with intermezzo discussion and asked him to identify patient types meeting the indication.
PPLPMDL0020000001	Cleveland	OH	44112	11/19/2013	OxyContin Reminder- Q12h flexible dosing strengths, formulary coverage. Butrans for those Tramadol failures which require around the clock analgesia, Said she will consider, reviewed initiation/Titration doses.
PPLPMDL0020000001	Cleveland	OH	44127	11/19/2013	Reviewed OxyContin START principles, Q12h flexible dosing strengths. Butrans for those Tramadol failures requiring around the clock analgesia, Dr said OK will consider, but feels patients are adequately controlled and prefer PO delivery. Asked how often he increases dose/frequency, agreed it occurs.
PPLPMDL0020000001	Fairwan	OH	44333	11/19/2013	Good conversation about OxyContin and I asked him what signals or criteria does he use when prescribing OxyContin? Dr said that he typically takes patients til about 40mg of IR oxycodone before he moves to OxyContin. I asked him why he waits until 40mg to make the switch? Dr did to know what to say but said that each patient is different. I showed him the conversions from hydrocodone 20mg to OxyContin 10mg q12. I asked dr if he would find patients for OxyContin 10mg? Dr said maybe. I asked dr to continue prescribing OxyContin dosing and gave quick review of start principles. I asked dr about Butrans doing, titration and patient identification. I asked him who he feels is a good candidate? Dr said he only has a few patient on it and really like it. Dr said some were on viconden and others on percocet. I asked him if he has patients on tramadol or 20mg of hydrocodone? Dr said he probably does. I discussed the Scott and Kathy profiles and asked for more business. Finished with identification of intermezzo patient types.
PPLPMDL0020000001	Stow	OH	44224	11/19/2013	Old discussion on all products with Angela. Angela told me that she is seeing most of the success with Butrans in the elderly population. I asked her why she thinks that is and she said she doesn't know for sure but has had some patients over 65 that have said they really like it because they don't have to remember to take a pill. I told her that's good to hear. Angela said that the patients she sees on it are raving about it and don't want to stop taking it. Discussed doses including the 15mcg, titration, patient types with Scott and Kathy and conversions. Discussed OxyContin and Angela said she does her best to move patients on Percocet to OxyContin because she said it just makes sense. She said she uses most doses and finds that sometimes for patients over 40mg of viconden that prescribing OxyContin works for most patients. I told her that's great to hear and to continue what she's doing. Reviewed intermezzo dosing, limitations of use.
PPLPMDL0020000001	Hudson	OH	44236	11/19/2013	Spoke with dr about all products. Discussed start principles for OxyContin and asked him where he is using it. Dr said the prices are general guidelines and he said he follows them and tries to tailor the dose according to the patients pain level and functional mobility. I reviewed dosing and asked him to titrate when his patients meet his criteria. I asked him what's holding him back from prescribing Butrans? Dr said he doesn't know. I asked him if he currently has patients on tramadol around the clock? Dr said he probably dos and knows he should look to see if they are appropriate for Butrans. I told him he is right and to just do it for one patient and allow product to prove itself in the right patient. Dr agreed. Reviewed copay card and trial offer. Showed dr intermezzo patient profiles and discussed him looking for patients meeting the indication.
PPLPMDL0020000001	Akron	OH	44310	11/19/2013	Followed up with dr after lunch last week concerning his question if Butrans patch contained latex. I was advised by compliance that I am able to discuss that Butrans patch does not contain latex. I spoke with dr about Butrans not containing latex. Dr said thanks for getting back with him. I told dr that after our conversation about Butrans patient types last visit that it important to know that 62% of patients in the opioid experienced trial were taking hydrocodone combinations and then reviewed the Kathy profile. Dr said he will look more at his viconden patients. Dr said he just saw a patient in this morning on Butrans and it is working very well however the patient is getting a rash at the application sites. Dr said the patient is doing very well on the 10mcg patch so the patient wanted to continue it. I asked how long it is taking for the rash to dissipate and dr said about 7-10days. Dr said the patient has been on Butrans for approximately 6 weeks. Dr agreed to continue prescribing.
PPLPMDL0020000001	Brooklyn	OH	44144	11/19/2013	Window call, invited to Desphande program along with Butrans reminder for those Tramadol failures requiring around the clock analgesia. Said Ok, Audrey said she will remind Dr. As program date approaches to confirm attendance

PPLPMDL0020000001	Brooklyn	OH	44144	11/19/2013	Reviewed OxyContin Q12h, flexible dosing strengths, formulary coverage. Said Ok and OxyContin is his go to ER opioid. Asked what is holding him back from prescribing Butrans, said cost/affordability to his predominately elderly patient population is his challenge, also feels most patient are adequately controlled. I reviewed MedCo/ESI formulary status, said he will certainly keep in mind. Invited to upcoming program, Said Wed. nights are good for him and will try to attend. Intermezzo for MOTNA/dosing, savings/trial cards
PPLPMDL0020000001	Lakewood	OH	44107	11/19/2013	Discussed OxyContin, when he selects the q12h? He says it's a good product for pain. I said so when u treat patients that have pain throughout the day n night u think OxyContin only? He said no...he starts with Percocet first. I said why not OxyContin first? We discussed Butrans....4 patches a month and pain control via the naive study.
PPLPMDL0020000001	Lakewood	OH	44107	11/19/2013	Spoke to the dr, told him dr orrs said hello. I asked if he had a chance to try Butrans 5mg out yet. He said no. We discussed who he is to look out for, the Scott profile type of Tramadol failure. Discussed its 4 patches a month, and where the patient can place it. Also reminded hi that it was a prior auth with caresource but covered.
PPLPMDL0020000001	Brooklyn	OH	44144	11/19/2013	Quick OxyContin window call, Q12h flexible dosing strengths, Butrans for those Tramadol failures and invited to upcoming Dr. Desphande program
PPLPMDL0020000001	Brooklyn	OH	44144	11/19/2013	Reviewed OxyContin Q12h, Butrans for those Tramadol failures and Intermezzo for MOTNA/dosing. No Trial/Savings cards needed. No new RX's hence no stocking updates
PPLPMDL0020000001	Lakewood	OH	44107	11/19/2013	No see today. Spoke to staff about abuse potential with Butrans and OxyContin. Discussed the patients coming for reassessments on Tramadol...and sticking Butrans materials and savings cards on their file. Also discussed caresource.
PPLPMDL0020000001	Cleveland	OH	44127	11/20/2013	Reviewed Butrans and Kathy profile with Dr. and Josie, they agreed, she sees patients like that, said they want PO delivery, but will continue to consider for appropriate patients. Reminded of OxyContin Q12h flexible dosing strengths and Intermezzo for MOTNA/dosing and trial cards. Invited to upcoming Desphande program and will try to make it
PPLPMDL0020000001	Cleveland	OH	44127	11/20/2013	Reviewed Butrans and Kathy profile with Dr. and Josie, they agreed, she sees patients like that, said they want PO delivery, but will continue to consider for appropriate patients. Reminded of OxyContin Q12h flexible dosing strengths and Intermezzo for MOTNA/dosing and trial cards. Invited to upcoming Desphande program and will try to make it
PPLPMDL0020000001	Akron	OH	44308	11/20/2013	MSL provided OTR holiday e-greeting to Dr. Friebert and Ms. Tonni.
PPLPMDL0020000001	Cleveland	OH	44113	11/20/2013	Visited had lunch appt with Anes/Pain Dept
PPLPMDL0020000001	Akron	OH	44312	11/20/2013	Some with Gary the pharmacist about all products. Gary said he just filled a Butrans prescription before I cam in for dr Ali. Gary said the patient has ESI prescription insurance And paid \$0 for a months supply. I discussed the importance of the copy cards and asked him if the patient presented a copy card? Gary said no. I explained the trial offer and copy card. Gary said he wanted some to hand out if they do not present them and have commercial insurance. Introduced the new 15mcg dose and conversions from IR opioids. Discussed OxyContin dispensing and dosing. Gary said they fill it regularly and the 10, 20, and 49 are the most common filled. Told him about intermezzo dosing, patient types and indication.
PPLPMDL0020000001	Westlake	OH	44145	11/20/2013	Worked with Kathy and the nurses to get a cancellation for this Friday! The nurses told me the doctors haven't tried it yet but did try Intermezzo.
PPLPMDL0020000001	Mayfield Heights	OH	44124	11/20/2013	Breakfast. Pain reduction insight, linked to BUP 3024. Says she will try Butrans. Shopped how to write, demo patch, disposal unit. Discussed trial, savings.
PPLPMDL0020000001	Westlake	OH	44145	11/20/2013	Saw dr in hallway. He said he was writing more. I thanked him and asked how they were doing. He said good.
PPLPMDL0020000001	Fairlawn	OH	44333	11/20/2013	Spoke to dr Parisi but his philosophy on treating pain. Dr told me that he will usually treat acute pain but said he really doesn't like treating chronic pain. I asked him what his definition of chronic pain is and he said any type of pain where he needs to consider a ER product. I asked him what he does then for those patients? Dr said he refers out to pain management. Dr said he usually sends them to Bina Mehta or dr Vucetic. I told him that I understand his position and asked him if he would ever consider referring a patient on a product like Butrans instead of IR opioids? Dr said its a possibility and would make sense. I gave him the OxyContin conversions guid and asked him to at last switch patients over from IR oxycodone to OxyContin. Dr said ok.
PPLPMDL0020000001	Mayfield Heights	OH	44124	11/20/2013	Hallway call. Reminded Gina of 15 mcg hr dose, you haven't used yet right? No I haven't Gina replied. Since we lost our NP, ive had to follow up with all the other HCP s patients. I haven't had clinic in over 8 ms, so that's why I haven't written Butrans. I want to. It won't be til 2014. New PA-C starting 2014, right out of school. Frank Sorjan ( nip lookup) and Josie Puskus CNP, ( nip lookup) hired to work in procedure room. FAX DEC 11 Invite, She may attend, suggested I send invite to Frank & Josie.
PPLPMDL0020000001	Akron	OH	44333	11/20/2013	Dr told me that he prescribed three new OxyContin today. I asked him to tell me about them and he said one patient was taking 6, 5/325 Percocet a day and dr out the patient on 15mg OxyContin q12 and Percocet for breakthrough. Dr said that the 30mg of Percocet wasn't providing enough relief. Dr said he also has a couple of patients for Butrans this week that he knows will be a good product for them. I told dr to also continue searching for intermezzo patients.
PPLPMDL0020000001	Mogadore	OH	44260	11/20/2013	Quick hello at front counter. Dr told me that he just started a new patient on Butrans coming off of vicoden. I asked him the dose and he said 5mcg because the patient was only taking 2-3 a day. Dr said he thinks he will need to move them to the 10mcg before the he the appointment. I asked him to not forget the 15mcg dose and to titrate patients every 72 hours if necessary. Dr said ok.
PPLPMDL0020000001	Mayfield Heights	OH	44124	11/20/2013	Breakfast. Pain reduction insight, asked what % of pain reduction would you expect? dr said shed expect 30-50% pain reduction, let me share with you data BUP 3024, reduction 4.6 in opioid naive. Dr asked many questions, showed patch demo & disposal unit. Discussed supplemental analgesia. Can I give a Tramadol when titration Butrans ? Yes? Can I call in refill? Yes, it's a CIII. Showed application sites. Discussed proper disposal. Cost a concern. Updated Medicare D preferred coverage, commercial & access with trial & savings cards.
PPLPMDL0020000001	Cleveland	OH	44109	11/20/2013	Visited Dept. Distributed Butrans/OxyContin Initiation/Titration guides, formulary grids and invited to fellows and attendings to upcoming Desphande MD program
PPLPMDL0020000001	Cleveland	OH	44109	11/20/2013	Visited Anes/Pain Dept, OxyContin/Butrans Initiation/Titration guides along with invite to upcoming Desphande program to Fellows/Attendings
PPLPMDL0020000001	Cleveland	OH	44113	11/20/2013	Reviewed Butrans Initiation/Titration, formulary coverage and savings cards. Said he along with Dr. Shen like Butrans and continue to utilize. Invited to Desphande program, said he will attend. Discussed OxyContin Q12h, ER opioid mkt and likes the flexible dosing strengths. Reminded of Patient essential kits/Savings cards and Formulary coverage
PPLPMDL0020000001	Cleveland	OH	44113	11/20/2013	Reviewed Butrans Initiation/Titration, efficacy message, formulary coverage. Dr. said she is always looking for new patients, likes transdermal delivery and will continue to utilize. Reminded of OxyContin Q12h, savings card
PPLPMDL0020000001	Cleveland	OH	44113	11/20/2013	Quick Butrans reminder for those Tramadol failures, requiring around the clock analgesia said Ok, Invited to upcoming Desphande program, said to remind him as the date gets closer.
PPLPMDL0020000001	Cleveland	OH	44113	11/20/2013	Had Lunch appt with Dale and Dr. Shen, discussed OxyContin Q12h and Butrans for those Tramadol failures requiring around the clock analgesia
PPLPMDL0020000001	Cleveland	OH	44102	11/20/2013	Saw Dr. in hospital, Reminded of OxyContin Q12h, said he still hasn't spoken with Ed-RPH yet. Reminded of Butrans for those Tramadol failures, said Ok, but still sees biggest obstacle is Ins. coverage, especially over at St. Augustine, asked for patients that he sees in office and said he will keep in mind
PPLPMDL0020000001	Westlake	OH	44145	11/20/2013	Tried to bring in a snack/coffee break today. Dr. said no thank you today is too busy. Left materials for review.
PPLPMDL0020000001	Stow	OH	44224	11/21/2013	Spoke with Holly and staff on all products. Holly said she just got another prescription for Butrans 5mcg this week. Holly the pharmacist said that it was from dr Yang. Holly said the patient had SummaCare commercial insurance with MedImpact and it was \$90. The patient didn't want to pay so holly said the patient was going to try and get it pushed though BWC. I asked holly if the patient used the copy card or trial offer and she said she didn't know. I asked if he would call the patient and ask. Holly said she would. OxyContin use for her patients on Percocet around the clock and discussed conversions and dosing. Intermezzo indication and dosing and
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	11/21/2013	Saw dr as she came in for the day and told her that 62% of patients in the opioid experienced trial were taking hydro one combinations and asked if she has any of those types of patients that may be appropriate for Butrans? Dr said maybe and thanked me for the reminder. Nothing else learned.
PPLPMDL0020000001	Westlake	OH	44145	11/21/2013	Saw dr. Asked if he ever thought about Butrans after Tramadol. He said yes yes he likes Butrans. Asked him to consider if it makes sense during assessments with uncontrolled Tramadol patients to move to Butrans.
PPLPMDL0020000001	Westlake	OH	44145	11/21/2013	Waved to dr in hallway...I said did u use the coupon? He walked over and said which one. I went over the savings program and highlighted the uncontrolled Tramadol patient t that needs atc pain therapy.
PPLPMDL0020000001	Westlake	OH	44145	11/21/2013	Saw dr in hallway. Showed the Butrans patch and reviewed what it is.
PPLPMDL0020000001	Stow	OH	44224	11/21/2013	Dr said she is double booked most of the day and only needed to hear one point. I told dr to take patients on vicoden and Percocet who have been on them for 3+ months and are complaining of pain to start OxyContin. Dr said ok and that was good. Nothing else learned,
PPLPMDL0020000001	Akron	OH	44312	11/21/2013	Dr said she only has a second so I showed her the adverse event incidences from the opioid exercised trial. I asked her if there is anything that would make her have second thoughts about writing Butrans? Dr said no and said she is impressed with the incidence of constipation because she said it is high with patients on vicoden. I asked her what Butrans night mean to those patients? Dr said she will look into that more and thanked me.
PPLPMDL0020000001	Akron	OH	44312	11/21/2013	Dr came to the front window and I asked him if he has had any recent success in finding patients on tramadol who need dose adjustments? Dr said he had one patient last week but had an insurance that would not cover Butrans. I asked if he knew what it was and he said he didn't know but the patient works and dr said he figures it's his company plan. I told dr manning to continue finding the right patient and showed him the appropriate
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	11/21/2013	Dr and Liz told me that they are out of OxyContin copy cards and needed more. I told dr that when he is in a situation when he knows the patient needs an ER opioid to prescribe OxyContin. Especially those patients on Percocet. Dr said he uses them all but makes sense to write OxyContin for patients already on oxycodone.
PPLPMDL0020000001	Westlake	OH	44145	11/21/2013	Saw Megan and dr at window...n. Discussed Butrans savings cards. Saw dr and we reviewed the savings cards along with the inclusion criteria of the naive study.
PPLPMDL0020000001	Lyndhurst	OH	44124	11/21/2013	Met with medical assistant Shannon. Left 12/11 invites for drs reed & road; CNP s Karen Steffey & Patricia Moran. Discussed OxyContin & Butrans as options for patients. No one is available this afternoon, as they are short 2 staff today. I asked Shannon is just Patricia in tomorrow? She replied Karen, Drs Reed & Roda will all be in after 9. I asked if I could bring them breakfast, she replied yes!! They did NOT open lunches for 2014, I will have to inquire w Dr Reed on that.
PPLPMDL0020000001	Cleveland	OH	44115	11/21/2013	Visited Pain Mgmt dept. Invited to upcoming Desphande program
PPLPMDL0020000001	Mayfield Village	OH	44143	11/21/2013	Lunch. Dr Azar you've told me you are comfortable initiating Butrans in nursing home, my objective today is to get you more comfortable in initiating right here in the office. I want to focus on a patient like Scott, age 54. This could be male or female, pain caused from osteoarthritis. After we're done discussing appropriate access, we will discuss access for a commercially covered patient under age 65. What about Medicare? Butrans is preferred, I will get to that later. Discussed after Tramadol, and supplemental analgesia either non opioid or 1-2 short acting opioids ok for break through pain. Got into formulary coverage after. Im confident that What will make you even more comfortable with Butrans, is if you attend our program on Wed 12/11. I have to be in Brookpark that afternoon. That's perfect only about 20 mts away from the venue. He will try his best to attend.
PPLPMDL0020000001	University Heights	OH	44121	11/21/2013	Discussed using START principles to help guide him with conversion & titration of OxyContin, Showed him conversions from ir oxycodone& Percocet. Discussed starting at 10 mg and titration available every 1-2 days if necessary. Then used Scott profile to position Butrans as 1 x weekly transdermal option for patients complaining of conditions causing them pain like osteoarthritis with Scott profile. Also reminded him of inclusion criteria we discussed preciously in BUP 3024.
PPLPMDL0020000001	Cleveland Hts	OH	44118	11/21/2013	Reviewed OxyContin Q12h flexible dosing, broad formulary coverage, Savings card along with Butrans for those Tramadol failures. Said he is prescribing PAs are going thru, patients are somewhat reluctant of Transdermal delivery system but asks them to try it. reminded of Titration dose of 15mcg/hr available. Invited to program but will be out of town, keep him mind for future programs
PPLPMDL0020000001	Stow	OH	44224	11/21/2013	I told dr that I'm not convinced that he's convinced Butrans works. Dr said why? I said because he hasn't used it yet and I just want to make sure he knows it works. I gave quick review of Bup 3015 and hit all main selling points. I asked dr if he had any questions and he said no. I asked if I made him more compelled to find a patient to try it on? Dr said maybe. I told dr I'll take it! Dr said he will try and look for the right patients.
PPLPMDL0020000001	Cleveland	OH	44103	11/21/2013	Reviewed OxyContin Q12h Flexible dosing strengths, Conversion/Titration. Said OK and is prescribing. Reminded of Butrans for those Tramadol failures and patients requiring around the clock analgesia, Said he will keep in mind, Booked lunch appt. Reviewed OTC-Senokot

	Akron	OH	44305	11/21/2013	I asked dr if he has many parents on Butrans with private prescription insurance? Dr said he has a few. I told dr that he has 4 copy cards left and they will expire soon. I asked dr to get them out to patients with insurance who need a dose adjustment on tramadol like Scott. I reviewed the Scott profile again and asked if he would start a few more patients on Butrans that are similar to Scott? Dr said he would and he really likes it. I told him about the OxyContin start principles and reviewed the tailor and titration of the product.
PLPMDL0020000001	Cleveland	OH	44103	11/21/2013	Reviewed Butrans for those Tramadol failures requiring around the clock analgesia, Dr. once again agreed it was a viable option but Med. Dir. has put restrictions on Prescribing any new Opioids.
PLPMDL0020000001	Cuyahoga Falls	OH	44221	11/21/2013	Dr told me that she wrote for OxyContin this week a couple of times. I told her to give me more information and she told me that both were taking Percocet for a long time and she thought it made sense to give them OxyContin. I told dr that's great to hear. I asked about conversions and she said both went on 20mg q12. I told her to continue using it and discussed the conversions again. Dr said she will keep using. I gave her the Butrans conversion guide and asked her to start the controlled release transdermal system for patients failing tramadol or vicodin. Dr said ok.
PLPMDL0020000001	Cleveland Hts	OH	44118	11/21/2013	Reviewed Butrans for those Tramadol failures requiring around the clock analgesia, 30% pain reduction, Dr said that was impactful and will consider. OxyContin Q12h flexible dosing strengths,said she rarely prescribes Oxycodone molecule. Intermezzo for MOTNA/dosing and Trial/Savings Cards
PLPMDL0020000001	Cleveland Hts	OH	44118	11/21/2013	Reviewed Butrans for those Tramadol failures requiring around the clock analgesia, discussed 30% pain intensity reduction, said he thought it was significant but not sure patients want Transdermal delivery, but will consider!
PLPMDL0020000001	Cleveland Heights	OH	44118	11/21/2013	Reminded of OxyContin Q12h flexible dosing strengths and formulary coverage
PLPMDL0020000001	Uniontown	OH	44685	11/22/2013	Reviewed Butrans selling message,no new info learned
PLPMDL0020000001	Uniontown	OH	44685	11/22/2013	I asked dr if he has had any patients who he has seen recently who needed a dose adjustment on Percocet? Dr said he has some that are on Percocet but are doing well. I told dr that some of those patients may be appropriate for OxyContin. Dr said that's true and he will keep an eye on them. Nothing else learned.
PLPMDL0020000001	Uniontown	OH	44685	11/22/2013	Told dr that with OxyContin he can tailor the dose specific to his patients needs. I showed him the dosing guide and said I wanted it to continue to be his go to ER opioid. Dr said is basically is and that he really likes it. Nothing else learned.
PLPMDL0020000001	Westlake Akron	OH	44145	11/22/2013	Lunch. Dr had to run to hospital. He told me he likes my products ad left.
PLPMDL0020000001	Westlake Akron	OH	44319	11/22/2013	Handed dr the OxyContin conversions guide to dr through window and asked him if he will continue to switch Percocet patients to OxyContin? Dr said I don't need to remind him about OxyContin because he likes it and uses it often. Dr said I need to remind him about Butrans. I asked him if he has had any clinical experience e with it since I introduced it to him over lunch? Dr said he has not. I told him to reassess his tramadol patients to see if they need a dose adjustment. I told him if they do to consider Butrans if they meet the indication. Dr said ok and thanks for the information.
PLPMDL0020000001	Westlake	OH	44145	11/22/2013	Saw Claudia spoke on managed care and trying to find a time to see the dr.
PLPMDL0020000001	Westlake	OH	44145	11/22/2013	Lunch. Review Butrans. Dr said she doesn't treat chronic pain. I asked her if she has Tramadol patients that come in for refills. She said yes. I asked her to focus in on those for now. We discussed patie ts with uncontrolled pain. I asked where does she go next she said she will bump the dose of tramadol e or add short acting. I said sou would continue the tramdol e, she said yes. I asked her to keep an open mind about choosing Butrans after the Patient needed a change. She asked if she could supplement with Tramadol. I said yes, referred to the naive study. I said, I think pain control is the bigger picture here right. We went thru the naive study, inclusion criteria...pain results of both the open label Nd conclusion of the study. We discussed the pain reduction insight. I asked her if she would be happy with these results. She said yes. I did fairbalance that the results were done in a study and that I couldn't say she would get those exact results. We talked about what measures she goes thru to assess their pain progress. She said she relies on the patient to inform her of their pain. I asked her to pause next time she refills the Tramadol in case they are a candidate for an atc extended release product like Butrans. Dr asked about price, managed care. Dis used intermezzo and OxyContin.
PLPMDL0020000001	Uniontown	OH	44685	11/22/2013	Followed up with dr after the lunch and asked him if what we discussed about Butrans patient types? Dr said he has out some thought into it but said that he just doesn't have a lot of candidates that fit for Butrans. I told dr I understand and reviewed the fact that opioid naive patients can initiate Butrans. Dr said he knows and thanks for the reminders.
PLPMDL0020000001	Cleveland Akron	OH	44106	11/22/2013	Visited Anes/Pain dept. Invited to upcoming Desphande program
PLPMDL0020000001	Cleveland Akron	OH	44312	11/22/2013	Dr told me that he thinks he might have another patient for Butrans. Dr said that the patient has come off Percocet and now on vicodin. The patient had back surgery but is still in pain every day. Dr said he thinks Butrans will be a good option because he said the patient told him he doesn't like taking all the pills. I told dr to remember to initiate on the appropriate dose and reviewed the conversion chart with him. Dr said he will let me know what happens.
PLPMDL0020000001	Green	OH	44232	11/22/2013	New pharmacy in territory. Spoke with Lisa the pharmacist and her tech. Lisa said she came from the cvs in Jackson and she has filled Butrans and OxyContin but has not filled intermezzo. I told her about Butrans dosing, indication,titration, conversions and showed her the demp patch. Lisa said she has never seen it and has only the 10mcg on the shelf. I told her about the copy cards for all products and Lisa said she wanted some. Discussed OxyContin doses and titration and conversions. Introduced intermezzo discussing indication and dosing specifics. Lisa said that she needs copy cards in the Jackson cvs.
PLPMDL0020000001	Lyndhurst	OH	44124	11/22/2013	Late Breakfast. Met with RN Katie. Dr Roda had new patient, I waited 90 mts to meet her. Staff said she apologizes, just can't stop to talk. Nurse Katie feels Butrans and OxyContin should be the very last resort for their migraine patients. She wants patients to try the migraine meds and others preventative meds such as Topamax and anti seizure meds like Depakote. Patients have to have a minimum of 15 migraines every month prior to treatment with prescription meds. Sone symptoms of migraines: slurred speech, numbness in hands. menstrual migraines can be severe. Asked Katie how can her patients might benefit from a 1 x week pain patch? She agreed a 1 x week pain patch may prevent patients from having to get up in MOTN or help with pain upon awakening. Then discussed OxyContin q 12 h. Katie how could your patients benefit from a long acting opioid like controlled release OxyContin. ? Since migraine pain is often long term, could a long acting be more appropriate than a short acting? She says she knows my products work, but her goal is to have as few patients on " Narcotics " as possible. Left 12/11 invite for dr Roda, OxyContin conversion titration guide & Butrans initiation guide. Mentioned 15 mcg hr as newest dose.
PLPMDL0020000001	Cleveland	OH	44106	11/22/2013	Visited Dept. Distributed OxyContin/Butrans Initiation/Titration guides for fellows, invited to Desphande program, Contacted Terrah N. for confirmation of lunch appt date for Dept.
PLPMDL0020000001	Cleveland	OH	44106	11/22/2013	Reviewed OxyContin Q12h, flexible dosing strengths and Butrans for those Tramadol failures, Said they havent seen any new RX's recently, and most OxyContin RX's are coming out of Seidman
PLPMDL0020000001	Cleveland	OH	44114	11/22/2013	Quick Butrans reminder for those Tramadol failures requiring around the clock analgesia, Said Ok, will consider.Also reviewed OxyContin Q12h flexible dosing strengths
PLPMDL0020000001	Cleveland	OH	44113	11/22/2013	Reviewed Butrans for those Tramadol failures requiring around the clock analgesia, 15mcg/hr dose said OK and agreed to find appropriate new patients to try Butrans, Invited to Desphande program. Intermezzo for Breakfast. Told dr reed I'd like to discuss her patients on a few Vicodin or Percocet daily, who are still experiencing breakthrough pain. What would be the downside of converting a few of those patients to a q12 h dosed medication like OxyContin, when a long acting opioid I'd needed around the clock. She tries to use. OxyContin more, but due to bad stigma over past several years patients are terrified to try it. She responds to her patients that OxyContin is just long acting Percocet. A few patients have been more comfortable when she presents it that way. Dr reed feels short acting opioids give the patients " up and down" pain relief & they are sure to experience breakthrough pain. She then told me her concern with Butrans. Adverse event has been reported below. Also had her sign hard copy request to be mailed into medical education dept. Dr says she likes efficacy Butrans provides but more & more patients are complaining lately of skin irritation, redness, burning, cracking, etc. She's instructed patients to " prep " site with corticosteroid and many patients have been applying neosporin to application site after patch removal. Dr reed wants to know if Purdue is planning on improving the adhesive for Butrans, so that patients won't have to incur skin reactions. Further, she says that Butrans causes worse irritation as compared to other Transdermal systems including Flector Patch, Lidoderm & Fentanyl. I responded by having dr sign a medical request form,
PLPMDL0020000001	Lyndhurst	OH	44124	11/22/2013	Breakfast. Karen immediately said, I'm sorry I have only a few seconds. I asked her where Butrans fits into her migraine treatment ladder. She says "middle of the road." She wants her patients to try the migraine agents first, and some patients request Botox injections. If they fail one of those she will introduce Butrans prior to prescribing vicodin or percocet. reminded her of Butrans greater dosing flexibility with the launch of the 15 mcg hr dose. Also Karen for patients on a few oxycodone or Percocet daily, you have the option to convert to a long acting such as OxyContin with q 12 h dosing. Ok thanks have to get back to patients said Karen.
PLPMDL0020000001	Westlake	OH	44145	11/22/2013	Lunch. Dr works with the residents, will try and get them and him to a Butrans dinner program. Did knew of Butrans but didn't know the details. We reviewed the Scott profile. Dr said he does have Tramadol patients. I asked him when they come into the office for an assessment if he would pause and asses them to see if the delivery system they are currently, ones working for them. We reviewed Butrans scheduling and abuse potential. Dr agreed that an extended release might work for some of his patients. He asked about managed care, we reviewed dosing. Dr said he would try it out on a reassessment Tramadol patients as long as the patient is appropriate for Butrans. Discussed the intermezzo, dr was unaware of the product.
PLPMDL0020000001	Cleveland	OH	44113	11/22/2013	Reviewed Butrans for those LorTab failures requiring around the clock analgesia, agreed and continues to find new patients to try Butrans, PA's are getting easier Reminded of 15mcg/hr Invited to Desphande program.OxyContin Q12h and intermezzo for MOTNA/dosing
PLPMDL0020000001	Cleveland	OH	44114	11/22/2013	Reviewed Butrans for those Tramadol failures requiring around the clock analgesia, agreed and continues to find new patients to try Butrans, PA's are getting easier but stressed it takes time. Thanked her for persistence., Invited to Desphande program. Intermezzo for MOTNA/dosing
PLPMDL0020000001	Berea	OH	44017	11/25/2013	Dr said he tried Butrans on someone and so far no phone calls. I brought up the Scott profile and the dr said he did not use it after a tramadol failure he used it for someone who thought vikodin was not controlling their pain and who needed atc pain therapy. Told the doctor about savings coupons for all products. Dr said he used the Butrans coupon for the recent patient.
PLPMDL0020000001	Cleveland	OH	44114	11/25/2013	Reminded of Butrans for those Tramadol failures requiring around the clock analgesia, reviewed formulary coverage, said OK, will continue to find appropriate patients. Invited to upcoming Desphande program,
PLPMDL0020000001	Berea	OH	44017	11/25/2013	Dr waved to me across the hall and told me she hasn't forgotten, that she will use Butrans.
PLPMDL0020000001	Olmsted Falls	OH	44138	11/25/2013	Dr said he wrote intermezzo and the free 5 was an option on his drop down menu so it was easy to find. We discussed Medco managed care coverage and the indication along with the dosing for men and women. Told him I'd be back to discuss Butrans and how to start a patient who has never been on an opioid to Butrans 5mcg.
PLPMDL0020000001	Munroe Falls	OH	44262	11/25/2013	I asked dr if its fair to say she has patients taking tramadol around the clock? Dr said she does. I asked her what she is currently doing for those patients when they tell her they are still in pain? Dr said it depends on the patient but she said she usually adjusts the dose or gives them something else. I asked her what the downside is to prescribing Butrans for that patient? Dr said she can't think of one. I told her that the next time she is faced wi that scenario to prescribe Butrans and reviewed the appropriate starting dose. Discussed OxyContin and when she needs to use it as well by discussing Tom case profile. Closed with intermezzo and asked her to find more patients complaining of in the middle of the night insomnia.
PLPMDL0020000001	Akron	OH	44333	11/25/2013	I told dr that To continue thinking of OxyContin as a good product for those patients already on oxycodone but short acting and asked him to use it for those needing a dose adjustment. Dr said thanks. Left him and Judy with formulary information.
PLPMDL0020000001	Berea	OH	44017	11/25/2013	Dr said he hasn't found the right patient for Butrans yet cause he doesn't see much chronic pain. I told the dr even if he sees one patient a month that I wanted them to have a chance to get Butrans if they are appropriate and with in indication. Also discussed managed care...intermezzo and Butrans discussed.
PLPMDL0020000001	Mayfield	OH	44143	11/25/2013	Quick window call. Dr. You've agreed you will consider learning more about Butrans, we are having a program next month, I hope you will consider attending. I'm leaving this clinical for you that like to discuss next visit. BUP 3024. Ok dr responded.

PPLPMDL0020000001	akron	OH	44333	11/25/2013	Good discussion about Butrans and OxyContin. I reviewed the Scott profile and told dr I'm guessing that he has many patients on 2-4 pills a day? Dr said he does have a few of them. I asked him what the clinical advantage is to titrate or move the patient to another IR opioid if they are complaining of pain around the clock? Dr said he doesn't know but said not all tramadol patients are candidates for Butrans. I agreed with dr and told him to focus on the profile we discussed. Dr said ok and will look more. I spoke about OxyContin for those patients also needing a dose adjustment on Percocet. Dr said ok. Discussed copay cards and insurance coverage on both products and closed with intermezzo indication and patient types.<font color=blue><b>CHUDAKOB's query on 12/18/2013</b></font>Cliff, you are getting into that pill discussion and that is one we want to stay away from. Any time we discuss number of pills, there is an implication that we cannot backup. Does this make sense?<font color=green><b>REICHL's response on 12/19/2013</b></font>I was discussing the pill count when reviewing the Butrans conversions. I understand that I he'd to stay with the total daily dose of IR opioids.<font color=blue><b>CHUDAKOB added notes on 12/19/2013</b></font>OK. I am not sure what you said in the last sentence, Spoke with Cindy- Butrans Initiation/Titration guide along with Desphande Invite for Pharm D'<font color=blue><b>CHUDAKOB's query on 12/09/2013</b></font>Who is Cindy? when you speak with someone, please be sure to put their title as well. We do not know if Cindy is a pharmacist or pharmacy tech.<font color=green><b>GUTKOMA's response on 12/13/2013</b></font>Tech<font color=blue><b>CHUDAKOB added notes on 12/18/2013</b></font>OK. In that case perhaps the Initiation/Titration Guide is more for the pharmacist. You might ask the tech about what her specific job is so you can talk in her language.
	Cleveland	OH	44109	11/25/2013	Visited Dept. Left Butrans/OxyContin Initiation/Titration guides along with Formulary grids for Clinicians(Campbell,Dzowis,Baker, Dhillon,Geho, Gemechu
PPLPMDL0020000001	Cleveland	OH	44109	11/25/2013	Spoke to Jessica and Sue about products. Sue said that they just ordered in more Butrans and out one out this morning for dr shah. I explained the dosing and titration as well as copay cards which Jessica said they give out all the time. Asked about OxyContin stocking and Jessica said that Friday last week was a big day for OxyContin. She said they filled for Oyakawa,shah, and Amanabu. Jessica said they continue to have all doses in stock. I reviewed the conversions and titrations. They still had intermezzo on the shelf but Jessica said they have not moved any.<font color=blue><b>CHUDAKOB added notes on 12/18/2013</b></font>Cliff, remember that we cannot leave co-pay cards with Rite Aid pharmacies per their corporate directive.
PPLPMDL0020000001	Akron	OH	44333	11/25/2013	I told dr to assess his patients on vicoden this week who need a dose adjustment for Butrans. Dr said ok. I told him to titrate to the 15mcg and asked what he thinks of it? Dr said he is ok with using the 15mcg dose. I told him he can titrate to it 72 hours after the last dose was started if necessary. Dr said ok and told me he just prescribed Butrans to a new patient this morning. I told dr that's great to hear and asked if he needed more copay cards? Dr told me to ask Marsha. Marsha Fox said they only have one more left.
PPLPMDL0020000001	Akron	OH	44320	11/25/2013	I asked dr if the patient he told me he was going to start Butrans for has come in yet? Dr said the patient has not but he believes is scheduled for tomorrow. I reviewed the initiation guide and conversions. Dr said he will have someone call me if he has any questions. I reviewed the nancy profile and asked for more business.
PPLPMDL0020000001	Brooklyn	OH	44144	11/25/2013	Discussed Butrans for those Tramadol failures requiring around the clock analgesia,Reviewed Opioid Naive Trial, asked what 30% pain reduction would mean to his patients, said it was significant, feels his patients are adequately controlled on present therapy but will consider. Reviewed OxyContin Q12h flexible dosing strengths and intermezzo for MOTNA/dosing and Trial/Savings cards
PPLPMDL0020000001	Fairlawn	OH	44333	11/25/2013	Asked dr how he assesses his patients for ER opioids if they are already on short acting opioids? Dr said each patient is different but said that if he knows the patient will need long term pain management he will go to an extended release product. I asked him how he decides which product to go to? Dr said it depends on the short acting. Dr said if the patient is on Percocet he will most likely go to OxyContin. I asked him when that is and he said when the patient needs more than 3-4 pills a day is when he switches them. I showed him the conversion guide and showed him the 20mg Percocet to OxyContin 10mg q12. I told dr to remember Butrans when his tramadol patients need dose adjustments and intermezzo for those patients who complain of middle of the night awakenings.
PPLPMDL0020000001	Brooklyn	OH	44144	11/25/2013	Discussed Butrans for those Tramadol failures requiring around the clock analgesia,Reviewed Opioid Naive Trial, asked what 30% pain reduction would mean to his patients, said he rarely treats pain, feels his patients are adequately controlled on present therapy but will consider if appropriate. Reviewed OxyContin Q12h flexible dosing strengths and intermezzo for MOTNA/dosing and Trial/Savings cards. Invited to Desphande program,
PPLPMDL0020000001	Cleveland	OH	44114	11/26/2013	Butrans reminder for those Tramadol failures,along with Senokot request. Reminded of the upcoming Desphande program, said OK and fax in his confirmation this week
PPLPMDL0020000001	Stow	OH	44224	11/26/2013	Quick hello in stow office and told him to please continue to tailor the dose for his OxyContin patients and to continue switching his IR oxycodone patients needing a dose adjustment. I handed him the 15mcg Initiation and titration guide and told him to evaluate his Butrans patients for titration to the 15mcg dose. Dr said ok and he really likes Butrans.
PPLPMDL0020000001	Fairlawn	OH	44333	11/26/2013	Short discussion about Butrans patch description, dosing, titration, and all other key selling messages. I asked dr what his philosophy is in treating patient pain? Dr said he doesn't like to do it because its for the specialists. Dr said he mostly treats acute pain and will only give 2-3 months of short acting opioids. Dr said he thinks Butrans is a good product and likes that its a schedule 3 and lasts for 4 days. I asked dr if he will try it out? Dr said maybe if he finds a patient that he is willing to treat past 2-3 months.
PPLPMDL0020000001	East Cleveland	OH	44112	11/26/2013	Reviewed OxyContin/Butrans Initiation/Titration, with Michelle, Asked for LoTaya's recommendations for Butrans
PPLPMDL0020000001	Cleveland	OH	44106	11/26/2013	Left OxyContin/Butrans Initiation/Titration guides Weinstein, Silverman program dir.,Bokar left info requesting appt. Residency/Fellows Program director
PPLPMDL0020000001	Cleveland	OH	44114	11/26/2013	Quick Butrans reminder for those Tramadol failures,formulary reminder, invited to upcoming Desphande program, Senokot request . Said OK and will let me know if he can attend
PPLPMDL0020000001	Cleveland	OH	44113	11/26/2013	Reminded of Butrans for those LorTab failures requiring around the clock analgesia and OxyContin Q12h flexible dosing strengths. Reminded of Desphande program
PPLPMDL0020000001	Fairlawn	OH	44333	11/26/2013	Dr wanted to start talking about Butrans and asked to hear more information about th mechanism of action. I asked why and he said he feels like he needs to know more about how it works. Discussed the Moa from the main visaid and explained tho ages about the mu reception and partial agonist response to it. Discussed. Patient types and discussed scenarios where he would consider Butrans. Dr said he feels like referring for pain patients is much better for him because they are the specialists. I agreed and asked him if he sees patios on tramadol who have been on it for 3+ months and need a dose adjustment? Dr said he does have a few but not many. I explained how Butrans would be a good option. Dr said ok. Discussed OxyContin start principles which he mostly agreed with and said he doesn't use it anymore because it causes too many problems. Dr did not want to discuss. Discussed intermezzo and why it is a. Product he should find patios for. Explained patit types and dosing.
PPLPMDL0020000001	Fairlawn	OH	44333	11/26/2013	Discussed all products over lunch with dr Parisi. Discussed his treatment of pain and dr said that he typically will treat acute or prn pain because he fount like treating chronic pain because that's not his job. Dr said he will refer out like dr Parisi after patients hit 3 months of treatment. I asked dr if he would prescribe an ER opioid prior to referring a patient? Dr said he would usually not. Explained Butrans and where it should be used.
PPLPMDL0020000001	Akron	OH	44333	11/26/2013	Discussed all key selling points and asked for him to just try it. Discussed OxyContin dosing, conversions and asked him to write it for his patients already on IR oxycodone. Intermezzo reminders and patient selection. Stephanie said that the patient she got approved for Butrans told her she would not take it. I asked her why and what the patient said and Stephanie said that the patient told her she was concerned taking it because she has COPD and taking Butrans with it concerned her. Stephanie said she told the patient she was already taking an opioid anyway so Butrans is not different. I told Stephanie to keep trying to continue looking for good candidates and ones that are motivated to use a transdermal patch.
PPLPMDL0020000001	Barberton	OH	44203	11/27/2013	Lunch. Dr asked about managed care, steady state of the product. Reviewed the Scott profile and the dr said he didn't see a lot if these types of patients that require opioids for atc treatment. However, he agrees to try Butrans in the appropriate patient type. Discussed the Scott profile. Review of OxyContin, dr said he doesn't have any on schedule 2 products. Reviewed the molecule and delivery system of OxyContin, discussed intermezzo, and managed care.
PPLPMDL0020000001	Cleveland	OH	44113	11/27/2013	Quick Butrans reminder for those Tramadol failures, Said Ok and will try and find the appropriate patient, asked who he thinks is that" patient and he said, hel will consider
PPLPMDL0020000001	Akron	OH	44320	11/27/2013	Spoke. Dr about how she identifies patients that need a change in pain therapy. Dr said its not easy and she doesn't like prescribing ER opioids but said she likes Butrans. Dr said that she has a couple of patients that she is thinking of starting Butrans who are both on vicoden. I told dr that vicoden patients are good candidates and explained the profiles. Discussed with dr to write OxyContin for those patients already on IR oxycodone who need a dose adjustment and explained dosing flexibility and conversions.
PPLPMDL0020000001	Akron	OH	44313	11/27/2013	R came to window and said that he thinks he has a patient for Butrans. I asked him to tell me about it and dr said that the patient is on vicoden and wants more. I asked him what the current dose is and he said he thinks the patient is at 30mg/day. I asked dr if the patient is in chronic pain and dr said yes. I told dr it sounds like a good candidate and that in the clinical trial of experienced patients wi opioids 62% of them were on hydrocodone combinations. I showed him the conversions scale and told him the patient needs to be started on the 10mcg dose. Dr said ok and asked about insurance. Reviewed the formulary grid with him. Discussed OxyContin and asked him to continue prescribing it for his Percocet patients needing a dose adjustment.
PPLPMDL0020000001	Cleveland	OH	44113	11/27/2013	Visited Anes/Pain Dept
PPLPMDL0020000001	Valley View	OH	44125	11/27/2013	OxyContin/Butrans reminder, Butrans 15mcg/hr dosing presentation. Invited to upcoming Desphande program, Said he will check schedule
PPLPMDL0020000001	Barberton	OH	44203	11/27/2013	Saw dr...asked her what her perception of Butrans pain control is. She said its an opioid, so it must be ok. I reviewed the open lable of the pain results of the naive study.
PPLPMDL0020000001	Barberton	OH	44203	11/27/2013	Saw dr thru the window. Dr asked if I could go to this other location inside the hospital and make sure they have coupons of Butrans.
PPLPMDL0020000001	Cleveland	OH	44113	11/27/2013	Quick Butrand reminder, 15mcg/hr, formulary coverage, said Ok
PPLPMDL0020000001	Akron	OH	44312	11/27/2013	Dr said he may have a patient for Butrans. I asked dr for more information and he said he thinks the patient is taking about 30mg of vicoden a day and he doesn't want to give the patient anymore. I showed dr the conversions chart and told him to start the patient. I told him that he can also provide an IR opioid or non opioid analgesic for supplemental analgesia. Dr said he will let me know how it goes. Discussed OxyContin doses and patient types. I asked him to keep writing. Nothing else learned.
PPLPMDL0020000001	Mogadore	OH	44260	11/27/2013	Quick discussion about Butrans as he was behind with patients. Dr said h continue to find good success with Butrans and said he didn't know about the 15mcg dose. I told him we have discussed it and have left literature on it. Dr said he vaguely remembers and is happy with the 15mcg addition because he said a couple of patients may need it. Discussed steady state, decision tree and patient types. Dr said he will continue to prescribe.
PPLPMDL0020000001	Akron	OH	44333	11/27/2013	Dr Vucetic asked me if there have been report of vomiting while on Butrans if a patient has alcohol while on it? I told dr there is nothing in the full prescribing information about that and read to him the section on CNS depressants and alcohol consumption. Dr said a 87 yr old male on 10mcg of Butrans had an alcoholic beverage and had severe vomiting. Dr said the patient removed Butrans and recovered. I asked if this is specific to the 20jcg dose and if it happened on the 5mcg dose. Dr said the patient claims he has never had any alcohol with Butrans prior to this incident. I old dr I was going to report it and he said its a good idea. I told dr to find patients needing 15mcg dose and to titrate accordingly. Asked dr to find patients under 65yrs old who may be candidates and discussed copay cards. Dr said the protocol of Butrans continues to be in place and his new pa Elise is following it and is a fan of Butrans. Dr said he will continue to prescribe OxyContin but said he really like Exalgo because its QD. I explained to dr to use OxyContin for those patients already on oxycodone.
PPLPMDL0020000001	Mogadore	OH	44260	11/27/2013	First time meeting new NP in the practice with dr Cain. Theresa said that dr Cain has been telling her about Butrans and she was going to use it the other day but said she didn't know enough about it to write it. I discussed a all key selling principles for Butrans along with patient types, patch description, application sites, safety, clinical trial inclusion and exclusion data nd conversions. Theresa said that she feels much better about it and will start writing for it when those patients we discussed need an adjustment in analgesia. Talked about OxyContin briefly along with patient types and conversions. Closed with intermezzo indication, dosing and limitations if use.
PPLPMDL0020000001	Barberton	OH	44203	11/27/2013	Reviewed dosing of Butrans and patch placement. No 15mcg of Butrans stocked oxycontin is stocked but limited doses. Reviewed the delivery system and dosing q12h.
PPLPMDL0020000001	Cleveland	OH	44113	11/27/2013	Quick OxyContin reminder, Q12h, flexible dosing strengths, said he is an confident prescriber and also likes Butrans for that Tramadol failure requiring around the clock analgesia
PPLPMDL0020000001	Barberton	OH	44203	11/27/2013	Lunch. Dr didn't want to participate, she said anything new. I said not if I don't know the appropriate person to write Butrans for...she said its a patch right. I said, it a sing,e entity buprenorphine transdermal pain patch schedule 3....which means you can write for refills. She asked when it came out. I told her. Told her the ideal patient is the Scott profile. Dr said she doesn't treat Chronic pain. I said understood. However even if u see one this month I feel they deserve a shot at Butrans, if appropriate. I gave her initiation and Scott profile to review.
PPLPMDL0020000001					

	Barberton	OH	44203	11/27/2013	Lunch. Dr said he was having luck with Butrans in his older patients in the nursing homes that have atc chronic pain. I asked him if he has initiated Butrans from the office and he said no. I said why not. He said he doesn't remember to write it but said he should try harder. We talked about the delivery system of Butrans and the 4 patches a month. Dr said that was Butrans biggest feature. I said I would think it would be the pain control. Dr talked about abuse potential with Butrans and is formed him Butrans still could be abused and tee forced the schedule 3. Dr said he would usually go to Tramadol before Butrans or another schedule 3 product. I said I fun believed the paint is having atc pain for an extended period time what would be the Down side to starting Butrans, dr said nothing but he was inthenhabito going to schedule 3 products after Tramadol. We talked about the Scott profile, reviewed initiation of Butrans and the dr said he would use Butrans when appropriate. Reviewed managed care, coupons. Dr said he writes OxyContin but not as much. I said OxyContin is a single entity oxycodone molecule dosed every q12h. I asked if he was aware we had 7 different strengths. We reviewed the George profile of OxyContin visual aid. Dr said he is less likely to write OxyContin in this patient and he could see himself writing Butrans. We reviewed the initiation guide. Also discussed intermezzo, dosing and indication.
PPLPMDL0020000001	Westlake	OH	44145	12/2/2013	Lunch.discussed all three products. Dr said he wrote Butrans for a patient in the office recently and it went thru insurance fine. Discussed the coupons for all products,dr said he has to remember the coupons. Reviewed the Scott profile and the dr said he will keep it in mind for the appropriate patient.
PPLPMDL0020000001	Westlake	OH	44145	12/2/2013	Dr said what's new? I handed him a sample of the Butrans patch and we discussed how long Butrans has been in the market and I wanted to giving him the appropriate patient type for Butrans. We discussed the Scott profile. How to dose, where to apply the patch. Dr said...ok he will then abut it and walked away.
PPLPMDL0020000001	Cleveland Hts	OH	44118	12/2/2013	Reminded of OxyContin Q12h flexible dosing strengths, showed formulary coverage, said he continues to prescribe accordingly. Reviewed Butrans 15mcg/hr dose presentation, said patients like PO, short acting but will continue to find appropriate patients to try Butrans.
PPLPMDL0020000001	cleveland	OH	44135	12/2/2013	Gave coupons to the nurse to give to the dr. Nurse said access will be hard unless the dr wants to see me directly regarding product.
PPLPMDL0020000001	Cleveland	OH	44195	12/2/2013	Secured appt with Dr. T. Gutsell, Left Butrans/OxyContin with Michelle
PPLPMDL0020000001	CLEVELAND	OH	44195	12/2/2013	Responded back from Email requesting appt. to discuss Butrans/OxyContin Spoke with Michelle Wells (Nurse-Admin) confirmed appt for Dec.11th.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	12/2/2013	Short discussion about Butrans patient types and what he's seeing in his practice. Dr said he sees Butrans as a no brainer for patients who need more than a short acting opioid. Dr said that he talks to patients of his about Butrans when he doesn't want to give them any more short acting and have a chronic condition. Dr said his patients really like it and said that his patients have proven that it works. I discussed the Kathy profile and asked him to continue identifying the right patients. Discussed intermezzo and dr said that he has written it at least 100times but it's not covered and patients don't want to pay for it. I asked him to continue to look for private
PPLPMDL0020000001	Westlake	OH	44145	12/2/2013	Saw dr thru window...I asked if he had a chance to pass out any Butrans coupons. Dr said nt yet and walked away. Spoke to ma and she said dr hasn't written any Butrans yet.
PPLPMDL0020000001	Westlake	OH	44145	12/2/2013	Spoke to Megan the ma and discussed if dr has tried Butrans yet. She said she didn't now and we talked about managed care. Saw dr thru window, said hello and told him I was here checking on how his Butrans patient are
PPLPMDL0020000001	Akron	OH	44333	12/2/2013	I handed dr the formulary grids for Butrans and OxyContin. I told dr to please remember both Caresource and BWC for Butrans and Medicare D and private prescription insurance for OxyContin. I reminded dr about the Caresource PA. Dr said thanks and I need to keep telling him and Marsha about Caresource. Nothing else learned.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	12/2/2013	Dr asked me for a review of Butrans again. I first asked dr what he's currently doing for his patients needing a dose adjustment on tramadol? Dr said that he isn't seeing many yet but said he remembers me talking about Butrans as an option for those patients. I told him that's true and discussed Scott profile, dosing, titration, conversions, and indication. Dr said he likes that's its a schedule 3 and for 7 days. I asked dr if he sees himself using it? Dr said for sure and said he's glad its out there because drs need more ER options and schedule 2 medicines. I asked for him to try it and reviewed insurance and copy cards. Introduced intermezzo, showed him the demo packs, copy cards and patient identification. He said it sounds like a great drug but knows its hard for patients to get. I showed dr the formulary grid and copy cards with 5 free pills.
PPLPMDL0020000001	Akron	OH	44313	12/2/2013	Dr said he refilled his patient on Butrans last week and said the patient is doing well and really likes it. I told dr to take a second to evaluate more patients on IR opioids for the option of Butrans. I showed him the conversions scale and discussed proper starting dose and titration. Dr said he understands and will look. I told him to continue prescribing OxyContin for those patients failing Percocet. Dr said ok.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	12/2/2013	Good discussion with dr over lunch about Butrans and intermezzo. I discussed the hydrocodone insight and asked him what he's currently doing for patients that are ongoing on hydrocodone? Dr said many don't have good insurance or Medicaid and so sometimes he has no choice but to continue their hydrocodone. Especially if it's working. I told dr I agree if they are controlled and don't need an adjustment to maybe maintain the course. I asked dr what he thinks the price is for his private insured patients? Dr said he didn't know but for that population it will be more reasonable. I told dr that's correct and discussed the insurance coverage, trial offer and copy cards. I also asked him if he has Caresource? He said he does but not much. I discussed the Caresource PA. Dr said he's impressed and will start thinking about Caresource patients. I also reviewed Medicare D coverage. I asked dr to continue writing for the appropriate parity and to titrate and use supplemental analgesia if necessary. Discussed intermezzo indication and dosing and reviewed the patient profile book. Dr said he will keep his
PPLPMDL0020000001	Cleveland	OH	44109	12/2/2013	Visited Dept. Invited Harris,Huang and Malamaki to Desphande program. Dist. Butrans Kathy profile along with OxyContin Initiation/Titration guides. Left message for Vanessa in regards to appt. opportunities
PPLPMDL0020000001	Cleveland	OH	44109	12/2/2013	Visited Metro Depts. PMR,IM and Oncology. Butrans/OxyContin Initiation/Titration guides and invited appropriate HCP's to upcoming Desphande program
PPLPMDL0020000001	Cleveland	OH	44109	12/2/2013	Visited Dept. Invited Dr. Gelehrter, Harrington, Jones and Lindheim to Dr. Desphande program. Dist. Butrans Kathy profile and OxyContin Initiation/Titration guide
PPLPMDL0020000001	Cleveland	OH	44109	12/2/2013	Visited Dept. Invited Obrien and Crum to Desphande program, Dist. OxyContin Initiation/Titration guides
PPLPMDL0020000001	Fairlawn	OH	44333	12/2/2013	Gilbert said that he had a patient in f of Fouads this morning on Butrans 10mcg and said that she thinks she needs more pain control. Gilbert said he recommended that she titrate to the 15mcg dose and called dr Fouads office to get approval. Dr Fouad called in the 15mcg dose and patient walked out this morning with a Butrans 15mcg dose. I told Gilbert that I sincerely appreciate taking the extra step and making this happen. I discussed the Kathy profile with him and the importance of reevaluating hydrocodone patients for Butrans. Gilbert said its an easy sell and he really likes Butrans. Discussed OxyContin and dosing which they have all doses of. Intermezzo indication and dosing. Gilbert said they have both doses but have not dispensed any recently.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	12/2/2013	Dr told me that I convinced him the last time we spoke to prescribe Butrans. I told dr that its great to hear and asked him for more information. Dr said he has prescribed it 3 times for patients on vicoden. I asked him if the patients complained or he introduced it? Dr said that he brought it up to the patients because vicoden wasn't working well enough and said all three patients had been on it for too long. Dr said that his patients really like it and all have private insurance and used the copy cards and trial offer. I told dr that's great and showed him the Kathy profile and discussed conversions and titrations. Dr said he will continue prescribing. Discussed intermezzo dosing, indication, and patient identification.
PPLPMDL0020000001	Westlake	OH	44145	12/2/2013	Follow up, dr said she just write Butrans 5 united healthcare patient. It needed a prior authorization but went through. The dr asked about patch placement, I reviewed the 4 approved locations and also to wait 21 days before going ba k to the same site. Disk used titration after a min of 3 days. She said the patie t has been on it over a week so far and she will see back in a m th but so far no calls from the patient.
PPLPMDL0020000001	Cleveland Hts	OH	44118	12/2/2013	Quick Butrans reminder for those Tramadol failures requiring around the clock analgesia and OxyContin Q12h flexible dosing strenths, Said OK will keep in mind
PPLPMDL0020000001	Akron	OH	44312	12/2/2013	Quick hello at front counter and told him when he's confronted with a patient on Percocet and needs a refill to take a minute to determine if they would be appropriate for q12 OxyContin. Dr said ok and sounds good. I also told him to take that extra second with a patient on tramadol to determine if they are suited for the 7 day Butrans patch. Dr said he knows he needs to use it. I told dr to use it and allow it to speak for itself.
PPLPMDL0020000001	Akron	OH	44310	12/3/2013	Told dr to focus on the patients we discussed the last couple of times which is patients currently on hydrocodone combinations and need a dose adjustment. I asked him why in e last has he chosen Butrans for those patients? Dr said because the patients he felt would be ok with a patch instead of a pill and he didn't want to give any more short acting for a chronic pain. I told dr to please continue looking for similar patient criteria he did in the past and had success. Dr said ok he will.
PPLPMDL0020000001	CLEVELAND	OH	44195	12/3/2013	Discussed OxyContin dosing strengths along with Butrans for those patients requiring around the clock analgesia. Troy RPH said they are seeing an increase utilization of the 40mg and 60mg of OxyContin and will continue to remind clinicians of Butrans
PPLPMDL0020000001	Cleveland	OH	44195	12/3/2013	Visited Dept. Verified with Dr. Maheshwari, fellows attendance to upcoming Desphande program. (Guirguis,Dadabayev,Said,Sandhu,Travnicek and Namiranian)
PPLPMDL0020000001	Cleveland	OH	44195	12/3/2013	Visited both Anes/Pain and Tausig cancer center. OxyContin and Butrans info and confirmation of fellows to upcoming Desphande program
PPLPMDL0020000001	Westlake	OH	44145	12/3/2013	Victoria said a discount drug mart pharmacist called and said that the 15mcg didn't exists. she couldn't remember which pharmacist or which location. But i did verify the 15mcg is currently available. Reviewed all the current dosages.
PPLPMDL0020000001	Waterford	OH	45786	12/3/2013	I-Butrans dosing, managed-care and co-pay cards. OxyContin dosing and managed-care. Intermezzo indication. W-said that she has a lot of success with Butrans. Said that the formulary coverage becomes her biggest obstacle.
PPLPMDL0020000001	Westlake	OH	44145	12/3/2013	Reviewed the mcg available with will the pharmacist. He said he has never seen a script of Butrans come thru so he wouldn't stock any. Reviewed the indication and patch placement. Discussed OxyContin and intermezzo. Will said he never heard of intermezzo, we reviewed the dosing for men and women and the indication.
PPLPMDL0020000001	Westlake	OH	44145	12/3/2013	Saw dr. he said you are back again. I said I wanted to make sure your Lakewood office is well stocked with Butrans information and savings cards for your patients. He said thank you.
PPLPMDL0020000001	Lakewood	OH	44107	12/3/2013	Spoke to the katie, she said they havne't tried butrans since my last lunch. We reviewed the savings cards.
PPLPMDL0020000001	Westlake	OH	44145	12/3/2013	Spoke to office manager and tried to schedule an apt to talk with the dr but she said I would have to come back. Told her what products products I promoted and gave her approved materials for the dr to review.
PPLPMDL0020000001	Waterford	OH	45786	12/3/2013	I-Butrans dosing, managed-care and co-pay cards. OxyContin dosing and indication. Intermezzo indication and administration. W-said she will look over the information.
PPLPMDL0020000001	Lakewood	OH	44107	12/3/2013	Saw dr in hallway. I said hello, he said he was just talking about me a few mins ago. I said hope that's a good thing. He said the girls were inside prior authing a butrans script right now. Dr said he was heading out for a late supper but will return in an hour. Dr told me to schedule a lunch.
PPLPMDL0020000001	Lakewood	OH	44107	12/3/2013	Spoke to ma upfront, I said I hear he wrote a scrip. she said she did the p. authorization. I said what plan, she said Caresource but it was easy and it took no time at all. I said that's great to hear and thanked her for taking the time to do that. she said the patient had been on many short acting products prior to Butrans and is scheduled to see the doctor in 30 days. I left Dr. Orra many approved butrans pieces (such as the scott profile/initiation guide)/and managed care grids).
PPLPMDL0020000001	Cleveland	OH	44124	12/3/2013	Spoke with staff & found out dr c also has new west side office where he's at 1-2 days per week. They are moving to a new space (in 2014, after January get address & forward to appropriate rep to add into Phoenix), Spoke with Rinatta. Left conversion titration guide, a tool to assist with conversion from short actings. Left 12/11 invite for dr c. Left urine panel flashcard & OARRS flashcard. Discussed addition of Butrans 15 mcg hr dose, allowing greater flexibility with 4 strengths.
PPLPMDL0020000001	Cleveland	OH	44195	12/3/2013	Visited Tausig Center. Confirmed appt with Gutsell, invited to upcoming Desphande program. Left OxyContin/Butrans initiation/Titration guides and invites to upcoming program for Davis also
PPLPMDL0020000001	Mayfield Heights	OH	44124	12/3/2013	Jesse states hasn't dispensed OxyContin since the re formulation. When product was OC he had several scripts. After re formulation, scripts took a " nose dive." I responded I'm surprised you don't have any customers from pain mgt HCPs over @ Hillcrest. He says I'm surprised as well. I let him know efficacy was not compromised when OxyContin was reformulated. Should you have any future scripts, I will leave you with this these tools to assist you with customer education; left pharmacists guide & Conversion titration guide. Next discussed Butrans now available in four strengths. Left him NDC brochure & FPI. Discussed Butrans pharmacy guide, and tools available to assist patients with proper application & disposal ( med guide) Intermezzo - Facebook & website for patient education. No Intermezzo dispensed. Asked him if they are part of RELAY HEALTH, offering point of sale savings to customers, YES, he responded.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	12/3/2013	Asked dr to tell me about how some of his patients are finding success with OxyContin. Dr said that its become more and more difficult to get it covered but said that he does use it and asked if I've noticed how he has been using more recently? I told him I know he uses it and I said I hope he is finding success and reminded him to titrate every one to two days if necessary. Reviewed managed care with Liz and asked dr for continued



	South Euclid	OH	44121	12/3/2013	Met with both nurses (RN) Ann & Rita. They were off thurs & fri, so could only given me a few minutes. asked to see either dr, not possible, they are both in physicals. Asked if they need any resources for MOTN insomnia awakening patients. Rita checked sample area, they had a few Intermezzo samples that expired, asked for trial, savings cards. Left re assess your patients brochure for each dr, showed RN s questions drs can ask patients to distinguish MOTN from sleep onset. OxyContin, left conversion, titration guides. Also OARRS resource flashcard. Butrans, left new 4 strengths dosing flexibility brochure. Reminded nurses of Butrans indication, asked if he are aware of drs initiating for pain patients? None that they are aware of. Well we are having speaker come in from Columbus& this program would be a great opportunity to learn more about this transdermal system. I will stop back soon to follow up with the doctors.
PPLPMDL0020000001	Cleveland	OH	44103	12/3/2013	Discussed Butrans for those Tramadol failures requiring around the clock analgesia. Reviewed Kathy Profile, agreed she has patients similar but reiterated she is not prescribing any new RX's per Med. Dir. of Clinic. Reviewed Intermezzo for MOTNA/dosing and Savings card
PPLPMDL0020000001	Cleveland	OH	44195	12/3/2013	Spoke with Roxanne RPH about OxyContin Q12h flexible dosing strengths and Butrans 15mcg/hr dose presentation. Said thank you and will watch for any new utilization of products
PPLPMDL0020000001	Lakewood	OH	44107	12/3/2013	wrote an adverse report- both the ma and the doctor asked if Butrans causes kidney failure. I gave them an fpi to review and told them i write the information to the company. Discussed patch placement, doctor asked if a patient could put it at a site of pain. I explained according to our studies it is only approved in the 4 location as shown on the visual aid. Dr said he understood. Dr asked if someone could take an nsaid along with Butrans. I referred back to the naive study for reference to this. Dr asked what was the max dose. Reviewed all the dosages and reviewed the initiation section of the core visual aid. Dr asked about the tramadol patient not controlled moving to butrans (showed the initiation guide). Dr asked how Butrans compared to Fentanyl. I said no head to head. Reminded the schedule 3 of Butrans also referred back to the initiation guide. Dr said he uses OxyContin only on occasion. Reviewed the indication of Oxycontin and the limitations of OxyContin. Dr was unaware of the reformulation so this information was shared and the approved literature pieces was left bedhead for him as reference. Discussed the managed care with the staff. They asked about workers comp. I didn't know the answer, told them i would return with the answer. discussed intermezzo. dr said he never uses anything like the product. But did review indication and dosing.<font color=blue><b>CHUDAKOB added notes on 12/18/2013</b></font>-Lisa, when you hear an AE please include it in the call note as well. Remember that Butrans can be given ti patient with any type renal issues as it is not eliminated through the kidneys
PPLPMDL0020000001	Olmsted Falls	OH	44138	12/3/2013	Discussed the 15mcg of Butrans. Pharmacist was aware it was available but they are not stocking it but can get it in with in 24hours. Discussed patch placement, per the fpi. Reviewed oxycontin q12h and the 7 doses. Also touched on the dosage for men/women/elderly for Intermezzo along with the indication.
PPLPMDL0020000001	Lyndhurst	OH	44124	12/3/2013	Dr Isakov we've Discussed initiating Butrans after Tramadol. I've provided you with efficacy data & pain reduction scores. You've mentioned you've tried to get Butrans through a few times, but nt covered on patients plan. If we can put access aside, do you feel Butrans is a good option for pain? Yes he replied. This week I'd like you to think about a few patients on Medicare D Express Scripts. Medco or Cigna where Butrans has preferred status. Is that fair? Dr replied yes. I handed him the OARRS flashcard & he says they've been using OARRS for years, he believes they were one of frat office s to use. They use on daily basis. He pulled MA Diane aside & asked her how many OARRS do we pull a day? Diane responded I've pulled 5 so far today. Great,you're doing the right thing. I then presented OxyContin as an option after a patient has been on immediate release Vicodin or Percocet. What triggers you to convert to an extended release? How many pills? Do you have a limit you set for patients? I treat each case differently, if they need extended release for extended time, that's when I refer over to dr salama. That's great I responded. I'd like to discuss next visit what specific opioids your patients are on when you refer out to dr salama. Sound good? Yes replied dr. I then asked which OTC laxative he prefers & mentioned all we have in our OTC portfolio. He says he has younger patients take Metamucil daily, nursing home patients Colace100 mg, others he just started using RX Linzess.
PPLPMDL0020000001	Lyndhurst	OH	44124	12/3/2013	Quick hallway detail. Reminded her of previous conversations. Went over efficacy & pain reduction scores & asked her to initiate as first opioid or after 3-4 Tramadol. Reminded her of her concern for her Med D patients having access to Butrans, Butrans is preferred Medco Express Scripts & Cigna Med D. The next visit, I'd like to share commercial coverage details & show you how Trial, savings works, and patch demo. Sound good? She replied yes. Thanks for the info.
PPLPMDL0020000001	Lyndhurst	OH	44124	12/3/2013	Quick hallway call. Dr Kim we discussed patents on short acting opioids who you write a q 6 h script for. I asked you how likely it is that those patients are following a q 6 h plan. I'm not talking about them taking 4 times a day, I'm talking about them following a q6 h plan, as they would have to set an alarm overnight to take their Percocet or Vicodin, right? Possibly dr Kim replied. And howoften are these same patients waking up with pain & taking a pill right when they wake up? good question he responded. Can you see how an extended release product could benefit his type of patient? The patient. Would take one OxyContin around 8 am and one OxyContin around 8 pm. No need to to set an alarm. I just want you to challenge you to re assess your patients and make a change when necessary. The next time I visit, I'd like to continue this discussion. For your BWC patients, keep Butrans too of mind. For your MOTN awakening insomnia agents, we have Intermezzo, with as needed indication. Ok thank you, he walked into next patient room. ( unlikely he will attend 12/11 program, as he was just @ Lola LAST WED)
PPLPMDL0020000001	Akron	OH	44312	12/3/2013	Dr Isakov can't make 12/11 as he has board mtg
PPLPMDL0020000001					While speaking to Karla, one of dr Lonsdorfs nurses dr came up because he said he heard Butrans. Dr asked me about the QTC prolongation with Butrans and asked me to explain it. I showed dr the FPI and told him that in a clinical trial the QTC was prolonged when 2- 20mcg patches were applied at the same time and that is recommended to not exceed one 20mcg patch. I also told dr it is not recommended to apply more than one patch at a time. I asked dr if he has a patient he's concerned with? Dr said no but said he came across it while looking over some information. I told dr to take the copy of the FPI to refer to and that his question is a valid one. I asked dr to continue writing and he said he is continuing to be very selective but likes Butrans.
PPLPMDL0020000001	Cleveland	OH	44195	12/3/2013	Confirmed CCF Fellows to Desphande program (Dr.Guirguis, Dadabayev, Said, Sandhu, Travnick and Namiranian MD's) Discussed Butrans for those Tramadol failures requiring around the clock analgesia and OxyContin Q12h flexible dosing strengths. Said will keep in mind, he has completed his fellowship and will be leaving CCF and will be leaving CCF and will be leaving practicing over at the VA
PPLPMDL0020000001	Cleveland	OH	44103	12/3/2013	Discussed Butrans and the Kathy profile again, agreed he has patients similar and feels that Butrans would be appropriate to try but feels he doesn't have the time to do PA,or change medications. Asked if Val or Laura could help and he said they cant, but will consider. Reviewed OxyContin Q12h flexible dosing strengths.
PPLPMDL0020000001	Westlake	OH	44145	12/4/2013	Lunch. Dr said after NSAID failure to treat pain he will turn to a cox 2 product , after which he will turn to Tramadol but not that often more likely to use vixen for shorter periods of time. We discussed limitations if Butrans. And reviewed the inclusion criteria and the naive study. Discussed OxyContin,he doesn't wrte much schedule 2 opioids. Dr said he might try intermezzo after review of the materials.
PPLPMDL0020000001	North Olmsted	OH	44070	12/4/2013	Lunch. Discussed Butrans what it is, the strengths, indication. Dr asked if it was a 3 day. Reviewed it was a 7 day patch. Discussed the inclusion criteria and the pain results of the naive study. Dr said he doesn't treat much pain patients but will keep it in mind for the appropriate patient. Dr was familiar w OxyContin and the reformulation. Reviewed intermezzo indication and dosing.
PPLPMDL0020000001	Westlake	OH	44145	12/4/2013	Lunch. Dr said he will consider Butrans after NSAID for appropriate atc pain patients need ing opioid therapy. Reviewed naive study and dosing. OxyContin....q12h dosing and the appropriate patients according the man visual aid. Review of intmezzo.
PPLPMDL0020000001	Westlake	OH	44145	12/4/2013	Left intermezzo approved materials behind. Reminded on dosing for gender.
PPLPMDL0020000001	Cleveland	OH	44125	12/4/2013	Quick Butrans/OxyContin review with Linda/Tech, no savings cards needed
PPLPMDL0020000001	North Olmsted	OH	44070	12/4/2013	Reviewed mcg dosing. Not stocking Butrans 15mcg. Reviewed patch placement and how discard Butrans after use, according the fpi.
PPLPMDL0020000001	Westlake	OH	44145	12/4/2013	Saw dr thru window. Reminded him of the assessment patients with uncontrolled atc pain with Butrans.
PPLPMDL0020000001	Westlake	OH	44145	12/4/2013	Spoke to dr about the 15 mcg. Left him information
PPLPMDL0020000001	Copley	OH	44321	12/4/2013	Quick follow up from out last discussion about patients on hydrocodone combinations. I showed him the Kathy profile and reviewed it. Dr said I already discussed it with him. I told him that it bears repeating because patients similar to the profile he has in his practice and asked him what would be the downside to writing Butrans for those types of patients? Dr said he doesn't know but he will continue to try and find a good patient. I reminded him of the formulary coverage and copay cards.
PPLPMDL0020000001	Westlake	OH	44145	12/4/2013	Spoke to Jen about Butrans, she took my information and we discussed managed care.
PPLPMDL0020000001	Cleveland	OH	44113	12/4/2013	Quick Butrans/OxyContin reminder, confirmed attendance to Dr. Desphande Program. S
PPLPMDL0020000001	Akron	OH	44313	12/4/2013	Dr saw me at the window and asked me how the coverage is for Butrans? I asked dr which plans are most important to him? Dr said he has a lot of Medicaid. I asked if many of them have Caresource and he said yes. I explained the Caresource PA and dr said he's impressed. I showed him the Kathy profile and told him to look for patients similar to her and reviewed the criteria. I asked dr if he will start writing now and he said he will. I gave him the OxyContin conversion and titration guide as well and asked him if he also has patients on Percocet? Dr said yes. I told him it should be appropriate for many of those patients in his practice to be switched to the ER oxycodone if they need a dose adjustment. Dr said ok. Nothing else learned.
PPLPMDL0020000001	Garfield Hts	OH	44125	12/4/2013	Visited Ortho/Surgery/Pain Mgmtm Depts. OxyContin/Butrans Initiation/Titration guides. Invited to upcoming Desphande Program
PPLPMDL0020000001	Cleveland	OH	44113	12/4/2013	Reviewed Butrans formulary status with Eissa, Positioned Butrans for that Tramadol failure, who is requiring around the clock analgesia, Said Ok, will relay info to Dr.
PPLPMDL0020000001	Westlake	OH	44145	12/4/2013	Saw dr he said he will use Butrans when he has an NSAID patient that is uncontrolled and needs atc opioid. He said he doesn't use Tramadol after NSAID that it will either be a short acting vikodin for a few days or an extended release option for patients who are chronic. Discussed OxyContin. Q12h, asked if he would ever s sider oxy to after NSAID and he said n never. When. Asked why, he said perception that its too strong and ts scheduling but he wouldn't. Reviewed the single entity and dosing strengths available. Discussed intermezzo. Dosing and indication.
PPLPMDL0020000001	Stow	OH	44224	12/4/2013	Conducted Butrans inservice for drs and residents in the stow location. Discussed all key selling messages for Butrans, patch description, FPI review,mechanism of action, pharmacokinetics, clinical trials, and insurance and copy information.
PPLPMDL0020000001	Hudson	OH	44236	12/4/2013	Conducted Butrans inservice for drs and residents in the stow location. Discussed all key selling messages for Butrans, patch description, FPI review,mechanism of action, pharmacokinetics, clinical trials, and insurance and copy information.
PPLPMDL0020000001	Hudson	OH	44236	12/4/2013	Conducted Butrans inservice for drs and residents in the stow location. Discussed all key selling messages for Butrans, patch description, FPI review,mechanism of action, pharmacokinetics, clinical trials, and insurance and copy information.
PPLPMDL0020000001	Cleveland	OH	44102	12/4/2013	Reviewed OxyContin Q12h flexible dosing strengths with Ed (RPH), Butrans for those patients requiring around the clock analgesia.Said Ok and is still trying to work with Prescribers. Invited to upcoming Desphande program
PPLPMDL0020000001	Mayfield Village	OH	44143	12/5/2013	Lunch. First time meeting dr sayheg. She just started 3 days ago ( mon dec 2) quick introduction of 3 branded products. Asked her to read BUP 3024 for Butrans so we can discuss next lunch. Left OxyContin slim Jim Butrans mktg piece invite 12/11 program. Intermezzo re assess your insomnia patients brochure. Dr agreed to read over clinical & info left.
PPLPMDL0020000001	Westlake	OH	44145	12/5/2013	Breakfast. Discussed where she currently uses OxyContin. Dr said he only uses it for her more severe chronic pain patients. So must believe it works then, she said its been out a long time. I said great. I asked since she feels its works so well why she wouldn't try a different dose for a moderate pain patient that still requires atc pain q12h. She said she might. Reviewed dosing and delivery system of OxyContin. Wheni asked what her pain algorithm was she said she turns to Tramadol after NSAIDs do the trick. We discussed the appropriate patient type for Butrans using the naive study inclusion criteria and matching it with the Scott profile. Dr said she could see why Butrans would be written by primary care doctors. When I asked her to explain she said Butrans nitch was that its not a pill and its not as abuseable as vikodin. I made sure to tell her Butrans still had abuse potential, it was a schedule 3 opioid. Dr understood. I said what I like to point Out is the pain scores with patients never on a opioid from our study and my goal was that eventually she will feel confident to try and see results for her patients. We talked about the managed care, she asked about med d. Also discussed intermezzo. Reviewed coupons.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	12/5/2013	Spoke with Cindy and asked her if she sent in her rebate for ordering the 15mcg dose? Cindy said she did send it in in time but hasn't gotten her rebate back yet. I asked how much they have been seeing and she said not much recently and have not moved the 15mcg dose yet. I reviewed formulary coverage and copay cards for all products. I told her to continue stocking all OxyContin doses and reminded about appropriate patients. I also told her an intermezzo dosing and indication. Cindy said she just recently sent back the packs she had.
PPLPMDL0020000001					

PPLPMDL0020000001	Cuyahoga Falls	OH	44223	12/5/2013	Saw dr in Cuyahoga falls office and handed him and Jake Sisko the pice on determining the appropriate patient for Butrans piece. I started by telling him the inclusion criteria for opioid experienced patients. D All said he is seeing good success w it and his patients are telling him they love it. I old him that's great to hear and discussed how to decide when to titrate through all 4 doses of Butrans. Dr said he will continue wot write and asked me to remind him of the Caresource coverage which I did. I reviewed the dosing of OxyContin and told him to continue using it for his patients are already on the IR oxycodone molecule. Dr said ok.
	Westlake	OH	44145	12/5/2013	Discussed OxyContin and Butrans delivery system and scheduling. Dr said he liked the twice a day dosing. I clarified it was q12h for OxyContin. I asked why he wouldn't pick OxyContin after an NSAID failure. He said he reserves OxyContin for more sever patients. I said u must believe it really works huh. He said oh yes, it is the best for pain. I asked he was aware it had 7 doses. He said yes...we reviewed the tailoring aspect of the start principal. He said he would go Tramadol before a scheduled product. I asked why. He said safer. We we t over the naive study, pain results and safety. I asked him after all presented what he thought of Butrans so far. He said he is going to use it. I said who is coming to mind. He said his Tramadol patients cause he hates to write vikodin. We reviewed abuse potential for Butrans. We also talked about how patients manage their pain currently. He said they are non compliant. I said are u saying they don't take their medication like u tell them but they still expect the product to work. He said yes. We talked about how medications can work if they don't take it. Dr laughed And said he deals with those issues daily. I referred to Butrans being dosed once a week. 4x a month. I said how would a product like Butrans would fit into his practice for those around the clock pain patients? He said he thinks it will be a fit and agreed to write it this week or upon his next pain assessment patient given the appropriate patient type. Reviewed intermezzo.
PPLPMDL0020000001	Westlake	OH	44145	12/5/2013	Breakfast. Invited to Butrans dinner program. Discussed Butrans aftertramadol and the dr said he would tryt there for the appropriate patient. Discussed the Scott profile and used the naive study to back up pain results. Did seemed ok with the materials presented and was untested in a usability and side affect profile. Discussed both points. Talked abut the abuse potential, Butrans schedule 3 opioid ranking. Also discussed adverse reactions from the naive study. Talked about invitation. He asked how to start a patient from hydrocodone to butrans. Showed the chart. Dr said it made sense. Asked if he could use Butrans in the patient type we discussed and he said yes. Also talked on OxyContin and intermezzo. Intermezzo was more on indicatin and dosing.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	12/5/2013	Saw dr as she was coming in this morning. I asked her if she would look for patients on tramadol or hydrocodone today who need dose adjustments and to think of Butrans as the solution? Dr said she likes Butrans and that's where she typically uses it. I reminded her of Caresource PA. Nothing else learned.
PPLPMDL0020000001	Lakewood	OH	44107	12/5/2013	Spoke to Lori the pharma its and bill the tech. They stock the Butrans but didn't tell me which strengths. Re,inded her about the latest 15mcg dose for Butrans. Educated in how to apply and discard. Also informed about the coupons available. Talked about OxyContin...she said theris a lot of percocets written in the area and dosed often, the pharmacist told me it makes nonsense why they wouldn't be on OxyContin. We touched on intermezzo, dosing and indication.
PPLPMDL0020000001	Uniontown	OH	44685	12/5/2013	I led off the conversation with 2 insights. The first was the hydrococone insight and 41% statistic. The other was about the start principles. I asked him what he thinks about the percentage of patients on therapy of 90 days and the 287 days until an ER opioid was introduced. D said he belies it and knows it happens for many reasons. Dr said one that on average IR opioids are cheaper, they can be easier to write and refill and many patients present a lot of pushback moving to ER opioids because they want the " high" of IR opioids. I asked dr when he typically moves to ER opioids? Dr said after 90 days if the patient is being treated for a chronic pain condition, he will move to ER opioids. Dr said its easy to move to Butrans off of tramadol and hydrocodone and typically uses OxyContin for those already on oxycodone. I told dr I completely agree with his assessment and reviewed start principles for OxyContin and conversions. Discussed Kathy profile for Butrans and conversions and appropriate starting doses. Finished with copy card discussion and intermezzo indication and patient identification.
PPLPMDL0020000001	Lakewood	OH	44107	12/5/2013	Lunch. Dr said he wrote 3 scripts of Butrans in the last few weeks after our discussion. One of the patients uses Walgreens. He asked about the conversion from vikodin to Butrans...showed the core visual aid for dosing recommendations. Dr said he would write more Butrans. When leaving he wrote a script for a patient n care-source and Angie was working on the authorization. Also discusses OxyContin...reviewed dosing and strengths.
PPLPMDL0020000001	Lyndhurst	OH	44124	12/5/2013	Quick hello to dr neel @ window. Dr I want to remind you of our discussion @ last breakfast. We discussed patients you have on Percocet who need additional analgesia, around the clock, and converting those patients to OxyContin. You've been supportive of the brand & I want to thank you for supporting OxyContin & agreeing to continue prescribing moving forward. Spoke to RN Katie Hudson @ window invited her to 12/11 program.
PPLPMDL0020000001	Stow	OH	44224	12/5/2013	Dr saw me at the window and told me he's out of Butrans savings cards. I told him I would leave them and told him to continue to use it for patients on tramadol or hydrocodone. I handed him the formulary grid and reminded him of BWC and Caresource coverage. Dr said thanks.
PPLPMDL0020000001	Mayfield Village	OH	44143	12/5/2013	Lunch. All HCPs 2 hrs behind. Quick discussion of each pain product (with Kristy) for moderate to severe pain,OxyContin after 2-4 Percocet or Vicodin being refilled month after month, Butrans after Tramadol. Opioid resources including OARRS, urine screen cd. Intermezzo, zolpidem tartrate sublingual tablet, prn for MOTN awakening insomnia.
PPLPMDL0020000001	Mayfield Village	OH	44143	12/5/2013	Reminded dr ashr of our last few calls & our OxyContin discussions. Reminded him he stated 50% or more of his patients are over 65 (Medicare). You had concerns at that time with patient access. Lets look at the med d preferred status for OxyContin, then commercial. He stated there is more than one plan where they aren't covering OxyContin at all. I asked him to let me know of any specific plans next visit so I can research. I will leave you some \$90 off co pay savings cards today. I asked him how long does he keep patients on ir percocet or vicodin? about 4-6 weeks, 8 weeks tops. he then considers extending release@ that time. We then went over dosing. He was unaware of the 15 mg dose. I told him we added 3 doses including the 15 mg a few years ago. We also have this tool ( conversion titration guide) to help you w converting from ir opioids. Ok great, I will use the 15 mg in future. On to Butrans. Dr admits he hasn't written yet, but he takes care of patients who've been placed on Butrans by pain mgt. How are those patients doing on Butrans, he responded, they are doing well, no complaints. showed patch demo. 4 strengths. Is Butrans something you may consider for moderate to severe pain caused from osteoarthritis? I will consider. Then intermezzo, option for MOTN insomnia patients. Prn sublingual tablet. You can match patient sleep patterns. Ok, thank you. Back to patients.
PPLPMDL0020000001	Akron	OH	44305	12/5/2013	Spoke with Matt the pharmacist about Butrans, OxyContin and intermezzo. I reviewed the Kathy profile and told him why the hydrocodone patient is such a good candidate for Butrans. Introduced him to the 15mcg doses and titration and conversions. I asked him if he has any patient savings cards and he did not. I reviewed the card and trial offer. Matt said he wanted some to put on the shelf. I discussed OxyContin with him and the Percocet patient who continues to get refilled. The product. Discussed conversions and titration. Discussed copy cards as well which he had a couple of. Intermezzo dosing and indication.
PPLPMDL0020000001	Mayfield Village	OH	44143	12/5/2013	Spoke with his ma Melissa. Discussed Butrans indication, patient selection, position after Tramadol. she says dr only writes ir opioids for short period of time. When patient needs titrated or needs long acting, he has pain mgt initiate & manage the long acting. Dr 2 hrs behind & on way to hospital. Had a second to say hello. Left him BUP 3015 & asked him to read, so we can discuss next lunch. Ok he responded. Also met new nurse Denise Famagelitto. Introduced all 3 branded products & OTC line. Discussed product indications, she's never heard of Butrans, is it new she asked? No, product launched 2010. Discussed opioid resources & she asked to keep urine screen flashcard.she thanked me more mre info on Butrans.
PPLPMDL0020000001	Mayfield Village	OH	44143	12/5/2013	I asked dr mukunda if he writes any ir opioids such as Percocet or Vicodin. Yes he replied. What des a typical script look like? 2-4 pills daily. Would any be q6 h? Yes he replied. For a patient to follow a q 6 h dosing plan, they would have to wake up at 2 am & set an alarm for that. What are your thoughts. If a patient needs an increase in pills I don't titrate up, I let pain mgt know what I think is best for that patient & have pain mgt manage any long acting opioids. Ok well thank you for sharing that. Do you refill any extended release? No I have pain mgt do that. If in the future you have any trusted patients you may consider placing on an extended release, we've discussed OxyContin & Butrans as options. We also have several resources to help you such as conversion & titration guides. Went through both for OxyContin & Butrans. Showed him OARRS flashcard & Urine screen flashcard. Last, Intermezzo for your MOTN insomnia patients. Prn sublingual tablet, zolpidem tartrate, here's a piece that includes questions to ask your patients to help determine MOTN from sleep onset. Ok, thank you
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	12/5/2013	Told jake I wanted him to look at the piece about determining with appropriate dose with Butrans. I started by telling him and dr Ali about the inclusion and exclusion criteria from the opioid experienced trial. I reviewed when to titrate and maintain doses. I asked him how he feels about titrating through the 15mcg to the 20mcg if necessary. Jake said that he doesn't have an issue with it and said he not sure if he has anyone on Butrans 20 mcg mostly because they don't need it. I asked him to use the tool we have discussed in the past about how he determines dose increases which are functional mobility, pain scores, and MRIs if necessary. Reviewed oxycontin dosing and titration.
PPLPMDL0020000001	Uniontown	OH	44685	12/5/2013	Used two different insights on this appointment. Started off with the hydrocodone insights and 287 days until a ER opioid is introduced and the insight using the start principles. I asked dr what he thinks about the hydrocodone statistic and when he introduces an ER opioid. Dr said he doesn't really use a time frame but uses his discussion with patient, what he's treating them for and if he thinks they have legitimate around the clock pain. Dr said if they do,he will start and ER opioid. Dr said he really likes OxyContin and has no problem using it but does get pushback even from patients already on IR oxycodone. I asked why and he said that he has leaned in many cases to not say OxyContin. Dr said that if freaks some patients out even though he said he explains they are already on oxycodone. Dr said he tells them he wants them to switch to an extended form of Percocet. Used the start principles and discussed. Reviewed the Kathy profile for Butrans and asked him to use it more often for not only hydrocodone but for tramadol. Finished with intermezzo indication and patient identification.
PPLPMDL0020000001	Lakewood	OH	44107	12/6/2013	Saw dr talked about the appropriate patient for butrans, dr said he will try it to write Butrans. discussed OxyContin and the q12h delivery system. Spoke to the nurses about managed care Nd savings coupons.
PPLPMDL0020000001	Akron	OH	44320	12/6/2013	Showed dr the opioid exercised trial and told her that there are a few things in the trial that will be compelling to her in order for her to write more Butrans. I reviewed the inclusion criteria, told her about the pain intensity, reduction scores, and side effect profile. I told her that her patient selection for Butrans is vital. I explained the hydrocodone patient and told her to write more. I showed her the OxyContin dosing and conversions and asked to conversions for Percocet. Reminded her about intermezzo.
PPLPMDL0020000001	Akron	OH	44305	12/6/2013	Only had a quick minute to talk as he was leaving early today. I reviewed the patient types for OxyContin and the OxyContin cancer patient profile. I told dr to use it as his go to ER opioid. Dr said ok. I told him that maybe Butrans is an option for him before he would consider OxyContin and the patient has around the clock pain. Dr said he will try it.
PPLPMDL0020000001	Euclid	OH	44119	12/6/2013	Spoke with pharm Kathleen P, let her know what I'm taking to area drs about & what tools & resources are available to HCP s & patients. Discussed RX Patrol as resource for pharmacy. Kathleen says they only have 1 or 2 patients on Butrans. OxyContin a bit more steady than Butrans, no utilization of intermezzo.
PPLPMDL0020000001	Uniontown	OH	44685	12/6/2013	I told dr that in order for him to get back to using Butrans he should review the opioid experience trial. I handed him the trial and reminded him that 62% of the patients in the trial see on hydrocodone medications. Dr said ok and the patients her has on it are doing well. I told him to keep using it and I will follow up next time.
PPLPMDL0020000001	Akron	OH	44312	12/6/2013	Dr told me that he started a Butrans patient this week and he thinks it is a great candidate for it. Dr said that the patient actually told the dr that he didn't want to take 4-5 pills a day for his spinal stenosis. Dr told me that he discussed Butrans with him and the patient was excited for a wee long patch. Dr said he started on the 10mcg dose and the patient has private insurance so he gave him the trial offer and copy card. I told dr it sounds like he has finally chosen a good candidate! Dr said it has not been easy and understands that he needs to start using Butrans more so he doesn't have to keep increasing and refilling short acting products. I told him to continue trying. I told him to also take a look at his patients on Percocet and to start them on OxyContin instead at least the patients he has continued to refill on Percocet. Closed with telling him that he Ned's to use intermezzo for those patients complaining of in the middle of the night insomnia.
PPLPMDL0020000001	Cleveland	OH	44114	12/6/2013	Review Butrans for those Patients requiring around the clock analgesia, reminded of Desphande program, said Ok will continue to find new patients , intermezzo for MOTNA/dosing
PPLPMDL0020000001	Akron	OH	44312	12/6/2013	Dr told me that he started a patient on Butrans this week. I told dr to tell me about it and dr said that the patient was on Norco and only taking 3 a day and said there was still pain. I told dr he did the right thing it wounds like and asked what the patient condition is that's causing the pain and he said he thinks its osteoarthritis. I told dr that those patients were some of the diseases of patients in the clinical trials and asked if he started on the 5 or 10mcg? Dr said he did the 10mcg because the patient s pain was increasing. I asked dr to continue and to take another look at his Percocet patients and switch them to OxyContin when they need a dose adjustment. Closed with asking him to evaluate patients for intermezzo and hit key selling points.
PPLPMDL0020000001	Akron	OH	44320	12/6/2013	Dr told me that she write a Butrans prescription this week and asked me what the coverage is on buckeye? I told dr its going to be difficult and explained what I have seen as their criteria on the PA. I told her that I believe dr Adams has got one or two punched through and to ask her. I asked dr to tell me what the patient was on prior to starting Butrans and she told me 40mg of Percocet. I asked her which dose she started on and she told me 5mcg. I showed her the conversion chart and told her that she should have initiated on the 10mcg dose. I told her if it gets approved she will need to titrate and the patient may need breakthrough medicines. I told her to use OxyContin for her patients on Percocet and showed her the conversions chart. I asked if she would do this and she said ok. Closed for Butrans and OxyContin and reminded her of intermezzo patients candidates.

	Euclid	OH	44119	12/6/2013	Met wit nursing first, left OxyContin conversion & titration guide & Butrans initiation, titration guide. Dr Saeed I'd like to talk with you about re assessing your Percocet patients. What does a typical Percocet prescription look like? Dr says typically q 6 h. Discussed every 6 hrs, patients need to set alarm. For patients waking up in pain, calling back for early refill or breakthrough pain, please consider converting to OxyContin. Ok sounds good he responded. For Butrans, we've discussed after patient fails on 3-4 Tramadol daily. Dr says I've had issues with coverage recently. I asked commercial plans or Med D.? Commercial. He says its ( Butrans) very expensive. Reviewed current commercial coverage, told him I will update he & nursing staff in 2014. In the meantime, remember you have trial, savings cards to bring down to Tier 2 cost. Ok It's a good product, I must know its covered. Intermezzo, PRN MOTN awakening insomnia option.
PPLPMDL0020000001					
PPLPMDL0020000001	Cleveland	OH	44113	12/6/2013	OxyContin Quick reminder, Q12h flexible dosing strengths and broad formulary coverage, Butrans for those patients requiring around the clock analgesia
PPLPMDL0020000001	Cleveland	OH	44113	12/6/2013	Reviewed Butrans for those LorTab failures requiring around the clock analgesia, and Intermezzo for MOTNA/dosing, said Ok and hopes to attend Desphande program
PPLPMDL0020000001	Cleveland	OH	44113	12/6/2013	Reviewed OxyContin Q12h flexible dosing strengths and Butrans for those patients requiring around the clock analgesia, Dr. agreed and will continue to support utilization
PPLPMDL0020000001	Cleveland	OH	44113	12/6/2013	Visited Billfield/Stearns office, reviewed OxyContin Q12h flexible dosing strengths and Butrans for those patients requiring around the clock analgesia
PPLPMDL0020000001	Cleveland	OH	44113	12/6/2013	Visited Ortho/Pain Mgmt depts. Reviewed Q12h flexible dosing with Dr. Billfield/Stearns and Shen. Butrans for those Tramadol failures requiring around the clock analgesia
	Euclid	OH	44119	12/6/2013	Same detail as dr Saeed: Paul my goal today is to get you a mire often, re assess any Percocet patients on a q 6 h plan. How likely are they to follow every 6 hr plan & set alarm @ 2 am. Good point, something to consider said Paul. Butrans after patient, who's been on 3-4 Tramadol daily, yet needs more analgesia for extended period of time. Coverage is sometimes an issue says Paul. I will keep he & nursing staff updated on preferred status. Left pain kit web key, discussed resources available to him & his patients. He will continue to write both OxyContin & Butrans moving forward.
PPLPMDL0020000001					
PPLPMDL0020000001	Cleveland	OH	44102	12/6/2013	Reviewed OxyContin Q12h flexible dosing strengths and Butrans for those patients requiring around the clock analgesia,Said Ok. Invited again to upcoming Desphande program, said will consider
PPLPMDL0020000001	Cleveland	OH	44102	12/6/2013	Reviewed Butrans w/Mike Rph -Tramadol failures requiring around the clock analgesia, OxyContin Q12h flexible dosing and Intermezzo for MOTNA/dosing. No Savings/Trial cards needed
	Tallmadge	OH	44278	12/6/2013	I asked dr if he believes Butrans works? Dr said sure. I told him I'm not convinced he is. Dr said why and I told him that if he truly did believe it worked then he would be using it more.dr said he doesn't have many patients on short acting opioids but would try to find a few more candidates. I told him that's all I'm asking and told him to try and replicate the same patient types he already has on it.
PPLPMDL0020000001	Fairview Park	OH	44126	12/6/2013	Spoke to office manager, she said she would pass information across to the dr. Gave her a Scott profile and a recap of what Butrans is and where it's appropriate along with the limitations. Left leave behinds that are company approved.n
PPLPMDL0020000001					
PPLPMDL0020000001	Cleveland	OH	44113	12/6/2013	Reviewed OxyContin Q12h flexible dosing strengths and Butrans for those patients requiring around the clock analgesia, Dr. agreed and will continue to support utilization
	Norton	OH	44203	12/6/2013	Second time putting call note in, didn't save first time it froze. Dr and discussed extended release opioid use for atc pain patients. Dr said he just started using Butrans for patients that met the indication yet weren't satisfied with their vikodin pain control. Reviewed abuse potential and the pai. Results of the opioid experience patient. Dr said he uses OxyContin for his more severe pain patie ts that started off on Percocet and who become chronic pain patients needing more pain coverage but he likes the q12h because he said it helps with compliance.
PPLPMDL0020000001					
PPLPMDL0020000001	Cleveland	OH	44109	12/9/2013	Reviewed OxyContin,Butrans and Intermezzo with Mana RPH, no new info learned, seeing some 15mcg/hr from Torres, Intermezzo from Raheja.
	akron	OH	44333	12/9/2013	Discussed all products with doctor today. I told him that we need to be specific with are discussion about Butrans. I told him to focus on his Caresource patients already on an IR opioid. I explained the Caresource PA and the Scott patient. Dr said he Medicaid population is a good population to look at for Butrans because dr said most have chronic pain conditions and it would fit. I told him that's great to hear and use it! Told him to also be specific with OxyContin use and to focus on his patients already on IR oxycodone who need an adjustment or when he is ready to refill a third or fourth prescription. Dr agreed and said he will do it. Told him to also write intermezzo for those patients meeting the indication.
PPLPMDL0020000001					
PPLPMDL0020000001	Akron	OH	44313	12/9/2013	Caught dr as he was walking in for the day. I told dr to make it an OxyContin and Butrans week each with a specific patient type. I told dr to use OxyContin for his patients already on the oxycodone molecule and Butrans for this needing an adjustment on tramadol or vicoden. Dr said ok.
PPLPMDL0020000001					
PPLPMDL0020000001	Akron	OH	44333	12/9/2013	Dr came up to me in fairlawn office and asked me what's new. I told dr that I was hoping he was continuing to find patients already on IR oxycodone and moving them to OxyContin. Dr said he is and said he is writing it for patients that have insurance and Medicare. I told him those are two very good places to focus and gave him the formulary grids.
PPLPMDL0020000001					
PPLPMDL0020000001	Garfield Hts	OH	44125	12/9/2013	Quick Window Butrans reminder for those Patients requiring around the clock analgesia, Said OK, Invited to upcoming Desphande program along with NP's Gwen,Denise etc
	Fairlawn	OH	44333	12/9/2013	Quick hello as dr was coming up front to check a patients chart. I asked dr if he would make these next two weeks devoted to switching Percocet patients to OxyContin and tramadol to Butrans? Dr said thanks for the reminder and said she will look.
PPLPMDL0020000001					
PPLPMDL0020000001	Akron	OH	44304	12/9/2013	Met dr at front counter and told hi that OxyContin is a good option for patients continuing to get refills on IR oxycodone and asked him to reevaluate those patients. I asked hi what his experience has been with Butrans? Dr said he doesn't think he has written for it yet. I told him to continue looking at patients that may need an adjustment on tramadol or vicoden. Dr said he remembers now and will look.
PPLPMDL0020000001					
PPLPMDL0020000001	Cleveland	OH	44109	12/9/2013	Left Butrans/OxyContin info for Nancy profile and Initiation/Titration guide,(Campbell,Dhillon,Gemachu,Dziwis,Mary Jo etc Requested apmt with dept
	Akron	OH	44313	12/9/2013	Spoke with Mark the pharmacist about all products. I asked him how familiar he is with Butrans? Mark said that they have a couple of patients on it and order it in for refills. I discussed Butrans as the only schedule 3 indicated for 7 days of burprenorphine release. Discussed the Kathy profile,conversions, use of supplemental analgesia and patch description. Mark asked if patients only exposed to opioids can use it? I told him about both clinical studies and the dose naive patients should initiate on at 5mcg. Discussed OxyContin dosing, conversions and copy cards. Intermezzo dosing, limitations of use and indication.
PPLPMDL0020000001					
PPLPMDL0020000001	Cleveland	OH	44127	12/9/2013	Reminded of the upcoming Butrans/Dr Desphande program, reviewed Kathy profile, said Ok and hopes to attend. OxyContin Q12h flexible dosing strengths and Intermezzo for MOTNA/dosing
	Uniontown	OH	44685	12/9/2013	Asked dr when and who is he finding most success with OxyContin? Dr said that as he has told me many times before, he wants to get patients on ER opioids as soon as possible when he knows the are chronic. Dr said that he doesn't understand how patients could and should take a pill 5-6 times a day and it just doesn't make sense. I told dr I'm glad to hear his thoughts and to continue writing. I reminded him about when to write Butrans which is when he knows even patients on tramadol are chronic in nature. Dr agreed and said he can be writing more especially his Caresource patients. I reviewed the PA and asked for continued business.
PPLPMDL0020000001					
PPLPMDL0020000001	Akron	OH	44313	12/9/2013	Spoke with Mark the pharmacy tech and discussed all products as he said the pharmacist was too busy to talk. I asked him how familiar he was with Butrans and he told me he knows about it. Discussed key selling messages to him and discussed conversions and patient types. I told him about copy cards and he said they have seen a couple of patients in the last month for prescriptions for it. Discussed OxyContin dosing and indication as well as parents already on IR oxycodone. Intermezzo dosing and indication and well as limitations of use. Mark said he hasn't seen anything come through for it.
PPLPMDL0020000001					
PPLPMDL0020000001	Cleveland	OH	44113	12/9/2013	Reviewed Butrans for those LorTab failures requiring around the clock analgesia, said OK and is utilizing the 15mcg/hr dose, likes dose option. Also reminded of Intermezzo for MOTNA/dosing
	Barberton	OH	44203	12/10/2013	Lunch. Discussed OxyContin and the appropriate use. Reviewed the q12h and its molecule. Dr said that Medicare was giving her trouble getting it approved and they want her to write Percocet. I asked if this was something new, and she felt it was. Dr said she feels the pharmacists in the area give her a hard time for not writing generic and that she gets letters often asking her to not write branded products. Dr said this was frustrating and takes up time. Dr said she refers out the younger patients with back pain. I asked why. She said if wont take new patients with pain and they happen to be younger. When talking about Butrans we discussed her current Patients and those specifically she believes their pain is real. Used the naive study to support the examples of some patie t types. We reviewed the dosing, steady state and patch placement. I asked her why she was so hesitant to try it for the appropriate patient. She said she hasn't seen the right patient yet. Talked intermezzo. Dr said managed care is too hard and she won't write it.
PPLPMDL0020000001					
	Akron	OH	44310	12/10/2013	Good discussion about all products. Dr told me that after our discussion last time about identifying patients on hydrocodone combinations he has switched three patients to Butrans. Dr said all patients seemed to be very happy about a different option. Discussed with dr about thinking Butrans for his tramadol patients as well. Talked about the Scott profile and asked him what he's doing currently after tramadol? Dr said he doesn't have many patients on tramadol around the clock but he typically moves them to vicoden. I asked what he goes from one IR opioid to another for a chronic pain patient? Dr said he doesn't know other than that's what he's always done. I continued to talk about the tramadol patient and convinced him to try it. Discussed OxyContin and also identifying the appropriate patient for OxyContin as well. Reviewed case studies and dr agreed that he could switch a few patients. Reminded dr of intermezzo patient identification. Dr told me as I was leaving that he has a patient in the waiting room taking 8 tramadol a day and will discuss Butrans with the patient!
PPLPMDL0020000001					
PPLPMDL0020000001	Cleveland	OH	44104	12/10/2013	Reminded of the upcoming program with Desphande MD, Confirmed lunch appt for Thurs and Reviewed Butrans for those patients requiring around the clock analgesia, Said she will keep in mind and hopes to attend
PPLPMDL0020000001	Barberton	OH	44203	12/10/2013	Asked Jen if she thought dr cook tried Butrans yet and she said no. Reviewed some key areas like how many patched in a month and how long they wear the patches.
	Cuyahoga Falls	OH	44223	12/10/2013	Spoke to Linda the pharmacy tech about all products. Asked about their stocking of Butrans and copy cards. Linda said they have all 4 doses ins tick and dispense it regularly. Linda also said they have been having great success with patients getting it on med D plans and Medicaid. I asked if it has been Caresource and she said it is. Explained the PA and other managed care coverages. Discussed OxyContin doses and conversions and she said they also have all doses in stock. Asked her if they have been dispensing intermezzo and she said no but have the 1.75mg on the shelf.
PPLPMDL0020000001					
PPLPMDL0020000001	Cleveland	OH	44114	12/10/2013	Butrans reminder for those Tramadol failures requiring around the clock analgesia, OxyContin Q12h flexible dosing strengths. Reminded of Desphande program. Said Ok and will continue to find new Butrans prescribers
PPLPMDL0020000001	Cleveland	OH	44114	12/10/2013	Quick Butrans reminder for those Tramadol failures requiring around the clock analgesia. Desphande program, Said OK Was running behind schedule but will keep in mind. OxyContin Q12h flexible dosing strengths
	Euclid	OH	44117	12/10/2013	Let dr know I didn't receive wam welcome @ their Painesville location. He will call gatekeeper Teresa & Office mgr Paul to let them know I. He welcomes my visits 2. Will see me & I can leave literature, savings cards etc Today left OARRS flashcard, urine screen flashcard & reminder for 12/11 program. Asked him now that dr Morley in NYC 90% of time, is he willing to initiate & refill opioids like OxyContin & Butrans. Yes he will, he says he's slowly starting to do that. Met their other partner, dr mike (dc) who is addiction specialist. We Discussed OxyContin after Percocet & Butrans after Tramadol. BWC will pay discussion.
PPLPMDL0020000001					
PPLPMDL0020000001	Cleveland	OH	44195	12/10/2013	Quick Butrans reminder for those patients requiring around the clock analgesia, said OK will continue to consider, Confirmed attendance to Desphande program. OxyContin Q12h flexible dosing strengths and broad formulary coverage
PPLPMDL0020000001					
PPLPMDL0020000001	Cleveland	OH	44113	12/10/2013	Quick Butrans reminder for those LorTab failures requiring around the clock analgesia, Reminded of Desphande program, said OK and like his staff always looking for Butrans patients. Intermezzo for MONTNA/dosing and Savings/Trial Cards
PPLPMDL0020000001					
PPLPMDL0020000001	Cleveland	OH	44104	12/10/2013	Talked with Hassan RPH, Discussed OxyContin Q12h Flexible dosing strengths and Butrans for those Tramadol failures requiring around the clock analgesia. Filled RX from Pandit recently. Intermezzo for those MOTNA/dosing,Hassan said they will be opening a 4th location on Puritas. Requested Savings cards
PPLPMDL0020000001					
	Akron	OH	44305	12/10/2013	Dr saw my OxyContin piece and told me that he just saw in an article on line about how OxyContin is the most highly abused narcotic in history. I asked dr the source and he told me aol.com. I asked him if he knows it was reformulated in 2010? Dr said for sure he does and he said it will not stop him from using it because it Erik's great for the right patient. I continued to explain the reformulation of OxyContin and told him I agreed with the correct identification of candidates for it. I discussed the right patients from the profiles and asked for continued business. I told him that Butrans also demands the correct identification of patients. I explained the Scott profile and asked him if he will put more emphasis on using Butrans for those patients needing dose adjustments. Dr agreed. I reviewed copy cards, BWC and Caresource coverages. Reminded him to also look at candidates for intermezzo and discussed doses and limitations of use.
PPLPMDL0020000001					
	Norton	OH	44203	12/10/2013	Spoke to dr about OxyContin and why for atc pain wouldn't u choose OxyContin q12h. Dr said it was a good pick for the right patient type. We discussed all those doses available and the molecule. Also talked about Butrans. He wrote Butrans for his caresource patients and seem to be doing fine. He said he picked Butrans because it was a patch and not a pill. We discussed abuse potential also reviewed managed care. Talked with Lisa the rn about intermezzo.
PPLPMDL0020000001					
PPLPMDL0020000001	CLEVELAND	OH	44195	12/11/2013	Discussed Butrans for those patients requiring around the clock analgesia, Initiation/Titration, formulary coverage,Med D, and Savings cards. Dr. said he likes delivery system and option when managing his patients pain,(elderly), Reinforced Butrans has the same abuse/misuse risk as other opioids.Said he will look to initiate for appropriate patients. Reviewed OxyContin Q12h flexible dosing strengths and broad formulary coverage

PPLPMDL0020000001	Cleveland	OH	44195	12/11/2013	Invited Dr. Bamford to Dr Desphande program
PPLPMDL0020000001	Cleveland	OH	44195	12/11/2013	Met with Dr. Gutsgeil, discussed Butrans and OxyContin
	Westlake	OH	44145	12/11/2013	Asked him if he was attending the program and dr said the weather is getting bad so he told me to get him an invite next time that he is interested in learning about Butrans. Left him Scott profile for butans. Also gave him OxyContin managed care updates.
PPLPMDL0020000001	Munroe Falls	OH	44262	12/11/2013	Quick discussion in her sample room about all products. I told her to start focusing on reevaluating her patients on tramadol and vicoden for Butrans. I told her about the patient types and asked for more business. Dr agreed she will look. I told her to also look at patients that are already on IR oxycodone and switch them to OxyContin. Asked her to remember intermezzo for patients that have in the middle of the night insomnia and left her with information.
PPLPMDL0020000001	Akron	OH	44313	12/11/2013	Quick messages at front window and told him I wanted to know at what point he finds it necessary to titrate OxyContin? Dr said that would take too long and to ask that question next time because he was too busy. I told him he can titrate every one to two days and to use Butrans in his patients needing an adjustment on vicoden. Dr said ok.
	Akron	OH	44333	12/11/2013	Discussed with dr about the Maggie profile for OxyContin and asked him to review it and tell me his thoughts and if he would change anything? Dr read the profile and said he would have done intervention and injections and maintain OxyContin but said it's ridiculous that the patient was taken to 80mg of IR oxycodone. Dr said he would have given her 30mg of OxyContin and 2x 5mg a day of Percocet. I asked dr if and when he titrates OxyContin? Dr said for many patients, even when the dose is increased up and up on ER opioids the pain may still be there. I asked dr when he knows its time to titrate then? Dr said that's a great question and said he's not sure but it's all based on the patients individual needs. I asked him to continue to use OxyContin for those patients needing dose adjustments on IR oxycodone. Asked for more Butrans prescriptions when his parity on tramadol or vicoden need dose adjustments. Showed him the doses and morphine equivalents on approximate conversions guide. Asked dr to also identify patients who have in the middle of the night insomnia and use intermezzo.
PPLPMDL0020000001	Uniontown	OH	44685	12/11/2013	Good discussion with dr on all products. Discussed Maggie profile and asked hi his thoughts. Dr said that he has a real hard time with parents being left on IR opioids for chronic pain. Dr said he can understand in some situations the cost thing and used an analogy that he discusses with his patients. Dr said IR opioids and ER opioids are like filling up your car with gas. Dr Balter said when your car needs gas do you only fill it up to a quarter tank or fill it up to full? Dr said when the tank is filled up all the way, it's like an ER opioid; good for the long trip. Dr said IR opioids are like only filling it up a quarter of the way and it just doesn't make sense. I told dr that's a good analogy and to continue using OxyContin and Butrans. I discussed dosing, Patient types and his success with it even when patients are skeptical. Dr said that sometimes patients just don't want to use a patch. I told him that's what the trial offer is for. I explained it for his private prescription insured patients and use it do patients don't have to spend money in the first month if their copay is under \$100. Closed with intermezzo and asked for his business when patients meet the indication.
PPLPMDL0020000001	Cleveland	OH	44113	12/11/2013	Attended Butrans program,discussed 15mcg/hr dose, OxyContin Q12h, and Intermezzo for MOTNA/dosing
PPLPMDL0020000001	Cleveland	OH	44195	12/11/2013	Discussed OxyContin Q12h flexible dosing strengths and Butrans for those patients requiring around the clock analgesia along with Initiation and Titration with Dr. Gutsgeil
	Cleveland	OH	44195	12/11/2013	Attended program, Reviewed Butrans for those Tramadol failures requiring around the clock analgesia, Initiation/Titration, Formulary coverage and Savings Cards. Reminded of OxyContin Q12h flexible dosing strengths and formulary coverage. Said he will consider
PPLPMDL0020000001	Cleveland	OH	44113	12/11/2013	Attended Butrans Program, Initiation/Titration, OxyContin Q12h flexible dosing strengths
PPLPMDL0020000001	Fairlawn	OH	44333	12/11/2013	Dr saw me and said he thinks he may have a patient for Butrans. I told him to tell me about it and he said its a patient on vicoden who is complaining of pain and doesn't want pills anymore. Dr said he will see him next week. I told dr to use the conversion guide to approximate the starting dose. Told him about the titration and doses and ability to use supplemental analgesia. Told dr to also use OxyContin for those patients needing an adjustment on IR oxycodone.
PPLPMDL0020000001	Cleveland	OH	44195	12/11/2013	Visited Dept,Invited to Desphande program left Butrans/OxyContin info for Chatterjee,Calabrese,Deal, fellows and nurse education room. Katherine Tuthill CNP, Tiffany Clark, Betsy Kirchner
	Stow	OH	44224	12/11/2013	First time meeting Daii and introduced products as she said she only knows about them through the other practitioners in the office. Provided her with all key selling messages with Butrans. Discussed conversions, patient types, and discussed her experience in pain management at CCU. Daii wanted copies of the conversions scales and FPI. Discussed OxyContin doses, conversions and patient type discussion. Daii said she has experience with OxyContin and uses it without an issue. She said she is very interested in Butrans because she is intrigued by it being a schedule 3, 7 day patch. Discussed intermezzo dosing, patient types.
PPLPMDL0020000001	Cleveland	OH	44195	12/11/2013	MSL email communication with Dr. Dell in response to her request to withdraw from BUP3031 startup due to limited patient population. Requested phone meeting with Dr. Rodenas to discuss the protocol.
PPLPMDL0020000001	Valley View	OH	44125	12/11/2013	Attended Butrans program, Reviewed OxyContin Q12h and Butrans for those patients requiring around the clock analgesia
	Cleveland	OH	44114	12/11/2013	Attended Butrans program- <b>font color=blue&gt;&lt;b&gt;CHUDAKOB's</b> query on 02/11/2014<b><b>f>ont>Mark, can you please elaborate on what actually occurred on this call? Thanks!<font color=green><b>GUTKOMA's response on 02/15/2014<b><b>f>ont>John attended the Butrans dinner program, Dr. Desphande did not show, hence I discussed Butrans for those Tramadol failures requiring around the clock analgesia, along with dosing.<font color=blue><b>CHUDAKOB added notes on 02/18/2014<b><b>f>ont>Ok. Thanks for clarifying. You do not need to enter a call on an HCP that attends a dinner program.
PPLPMDL0020000001	Akron	OH	44333	12/11/2013	Stephanie said she was going to call me because she has a patient she is considering for Butrans and the patients has an AARP plan. I asked her to tell me about the patient and she said now she is only taking 2 tramadol a day but has either had a reaction to many different opioids including fentanyl. I asked her why Butrans and she said she doesn't have anywhere else to turn. I told her that first the plan the patient has looks like its not covered. Second, Butrans may not be the best medicine because the patient had been on so many medicines before and either have not worked or had a reaction to. Stephanie said Butrans was prescribed about a year ago and the copay was about \$95 and couldn't be afforded. I asked her to look for patients earlier on in their therapy such as ones like Scott and Kathy and discussed me both. Reminded her about OxyContin and the Maggie profile and she said she sees many patients in for follow up appointments on OxyContin. Asked her to remember intermezzo and to identify patients meeting the indication.
PPLPMDL0020000001	Akron	OH	44312	12/12/2013	Good discussion of lunch about all products. Dr Feltrup was in attendance and didn't know much about it so I provided entire overview of the product and hit all key selling points. Discussed appropriate patients and reviewed case studies, conversions, titration, FPI indication and limitations of use, application sites, adverse events review and formulary and copay cards. Dr asked if the goal is by using Butrans to get patients completely off short acting opioids. I told dr how some of his patients would feel not to have to take pills every day? I told dr that some patients may require breakthrough medication and discussed mechanism of action. Dr said he is very specific in who he is choosing and the profiles fit the description as to who he is choosing. I asked for continued business. I asked dr to think of OxyContin as a product he can provide to his patients who are already on the oxycodone combination. Discussed conversions and profiles. Discussed intermezzo including indication, dosing and limitations of use. Dr said he already remembered about the 4 hours before waking up and likes that it is
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	12/12/2013	I asked dr to prescribe Butrans for two patients a week until the new year and if that is acceptable? Dr laughed and said I know he writes it. I told him I just wanted him to continue using it for patients needing adjustments on short acting opioids. Dr said ok. Nothing else learned.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	12/12/2013	Talked to Darlene about recent Butrans that have come through her desk and she told me dr just write it today. While talking with her about it dr came up to tell me about the prescription. Dr said the patient has been on tramadol and vicoden without pain relief. Dr said she will probably start the patient on 5mcg because the patient is old and frail. Dr said she gave the patient an information guide on Butrans and its a Medicaid patient on the UHC Community plan. I told her it will be a PA. Darlene said she will take care of it.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	12/12/2013	I asked dr what the clinical advantage is to refill an IR opioid for a patient who is in pain around the clock? Dr said it is just easier sometimes to refill it. I said but hat if the patient is still in pain month after month on the pills you refill? Dr said he would send to the specialist. I asked why he would do that if he could manage himself with another option like Butrans? Dr said there are some that it may work on for him. I told him to just try it in a patient on tramadol around the clock and he is considering a dose adjustment. Dr said ok and he will try.
PPLPMDL0020000001	Lakewood	OH	44107	12/12/2013	Spoke to nurse about managed care and how to pace the patch.
	Akron	OH	44312	12/12/2013	I told dr that choosing a patient specific for Butrans is extremely important. I showed dr the Kathy patient profile on hydrocodone combination who is still in pain. Reviewed profile and asked dr if he could identify patients similar? Dr said he has some. I told dr that 62% of patients in the opioid exercised trial were previously on hydrocodone combinations. I asked dr to also focus on patients already on IR oxycodone and to switch them to OxyContin. Left him with intermezzo msg and asked for him to keep his ears open to patients complaining of in the middle of the night insomnia.
PPLPMDL0020000001	Akron	OH	44312	12/12/2013	Saw dr through window and told him that he needs to identify patients for Butrans that need a dose adjustment on tramadol or vicoden. I asked if he has those a oriants that get refilled each month and have around the clock pain? Dr said he's sure he does he just Ned's to find them. I told him to take an extra second before he refills the IR opioid and consider Butrans. Dr said ok he will.
PPLPMDL0020000001	Waterford	OH	45786	12/12/2013	I-Butrans dosing, clinical trials managed-care and boxed warning. OxyContin start principles. Intermezzo dosing.W-has written Butrans recently and has had good success.
	Westlake	OH	44145	12/12/2013	Tried to see dr. But didn't work, left approved materials behind.<font color=blue><b>CHUDAKOB's query on 12/18/2013<b><b>f>ont>Who did you see on this call?<font color=green><b>BARTOLI's response on 12/19/2013<b><b>f>ont>Christy, the office manager. Her and I have been working to get an apt with e doctor this day to discuss Butrans.<font color=blue><b>CHUDAKOB added notes on 12/19/2013<b><b>f>ont>OK. Please include the name of the person you spoke with and their title on all non-HCP calls. Thanks Lisa!
PPLPMDL0020000001	Highland Heights	OH	44143	12/12/2013	Met w med asst @ front window. Asked to see dr for 30-60 seconds @ front window. Told her I'm willing to wait. Did not see her ask, but one of the med assts stated dr cannot come up front. Discussed Butrans application, dosing, with 4 strengths now. OxyContin Q 12 h dosing, strengths. Discussed OARRS usage for all opioid patients, asking for Butrans for urine screen ( left flashcard) left Butrans sliding doser for dr.
PPLPMDL0020000001	Mayfield Village	OH	44143	12/12/2013	Lunch. Dr tried to write Butrans @ nursing home @ it's not on their formulary/ in pharmacy. Lets discuss patients outside of nursing home, those patients who walk in daily with pain. Detailed dr price @ same time, they both have concern with Butrans equivalent to morphine. Discussed Butrans initiation, titration guide. Once they write, they will be able to get morphine equivalent once OARRS is run. Importance of running OARRS on every opioid patient. UH lab does not detect Buprenorphine, so they need to ask for that on screen. Left opioid urine screen flashcard. Asked dr Azar to commit to a few Butrans trials in office, he will consider, and I told him there has to be a few patients in his entire practice, who can benefit from Butrans trial. Pulled out trial, savings card & propped it in front where he answers his phone, & said here's your reminder!
PPLPMDL0020000001	Cleveland	OH	44195	12/12/2013	Visited Anes/Pain, Rheum, Neuro Depts,Oncology, Left OxyContin and Butrans formulary and Initiation/Titration guides
	Mayfield Heights	OH	44124	12/12/2013	My regular contact Denise not I today. Spoke with one of the medical assistants. Discussed Butrans as pain option, induction, 4 strengths, left Butrans sliding doser for dr Dews. Discussed trial & savings. She stated savings cards very go helpful to them, especially for patients on OxyContin with no insurance, since its so expensive. Left conversion/ titration guide for dr. Formulary grids, PBM brochure left as well.
PPLPMDL0020000001	Cleveland	OH	44195	12/12/2013	Attended Butrans program, Discussed Butrans for those Tramadol failures requiring around the clock analgesia, Initiation/Titration and Formulary coverage, Said he will consider as he becomes more engaged in prescribing.
PPLPMDL0020000001	Cleveland	OH	44195	12/12/2013	Reviewed OxyContin Q12h flexible dosing strengths
PPLPMDL0020000001	Lakewood	OH	44107	12/12/2013	Attended Butrans program, Discussed Butrans for those Tramadol failures requiring around the clock analgesia, Initiation/Titration and formulary coverage. Said he will consider. Reviewed OxyContin Q12h flexible dosing
					Dr asked about intimating a patient from 80 mg OxyContin to Butrans. I reviewed the initiation guide with the dr and told him it Butrans would not be appropriate for this patient.ndr asked if he could use Butrans as supplemental to OxyContin and other short acting products. I reviewed the naive study of the open label phase where they supplemented with NSAIDs,mi told him that I could not make a recommendation. Dr asked about managed care and cash cost covered this area. Dr was hard to understand due to his accent and I had to ask his nurse a few times what he said. Dr was interested in how soon patients could titrate Butrans. I covered this information, dr asked if the patient should stop current medication before going onto Butrans. I referred back tomfpinwhere it states not to abruptly discontinue. We reviewed steady state of the product. Oxycontin was discussed, q 12h and the Mgs available. Asked him if he feels comfortable titrating his patients who have uncontrolled pain and who are appropriate for OxyContin. Dr said he try's not to write over 40mg of OxyContin. Dr Said he would add Percocet prn 1 to 3 pills a day. We reviewed strengths.<font color=blue><b>CHUDAKOB's query on 12/18/2013<b><b>f>ont>Lisa, what does your next call objective say?<font color=green><b>BARTOLI's response on 12/19/2013<b><b>f>ont>To ensure the doctor understands who the approved ( appropriate )patients Butrans are according to the fpi. And how to Initiate patients onto Butrans using the approved visual aids.<font color=blue><b>CHUDAKOB added notes on 12/19/2013<b><b>f>ont>Thank you for clarifying!
PPLPMDL0020000001					



PPLPMDL0020000001	University Heights	OH	44121	12/12/2013	Lunch. Dr main concern, being with UH, is my products morphine equivalent. If your concerned with that for your OxyContin patients, you have 7 doses to titrate up or down. Don't use the 80 mg if you're uncomfortable, there are 6 other doses to choose from. Another great option, dosed in micrograms is Butrans. Once you write your first Butrans, you will see the morphine equivalent on OARRS, and should then be able to figure all morphine equiv for all 4 strengths. Went through initiation titration guide again, asked him for a few trials for conditions. (Inclusion criteria in trials) causing pain, requiring opioid analgesic around the clock for extended period of time. Reminded him trial savings cards right above his desk. I checked OxyContin cards, & he is remembering to and a few out.
	Mayfield Heights	OH	44124	12/12/2013	Met CNP Josie for first time, she came over from procedure side to talk for a few minutes. Introduced myself, what branded & OTC products Purdue manufacturers & resources available to help her with pain management. Discussed OxyContin indication, doses, conversion/ titration guide.\$ 90 off cards. Discussed Butrans indication, 4 strengths, initiation, titration guide. Discussed Intermezzo core messages, gender dosing. Left urine screen resource flashcard, letting her know depending on lab, she may need to request Buprenorphine on screen. Left pain mgt web key. She thanked me for all. Very responsive & engaged.
PPLPMDL0020000001	Cleveland	OH	44195	12/12/2013	Attended Butrans program, Discussed Butrans for those Tramadol failures requiring around the clock analgesia, Initiation/Titration, Savings Cards. Reviewed OxyContin Q12h flexible dosing strengths
PPLPMDL0020000001	Cleveland	OH	44135	12/12/2013	Left materials behind-front color-blue->b<-CHUDAKOB's query on 12/18/2013->b></font>-Who did you speak with?-front color-green->b>BARTOLI's response on 12/19/2013->b></font>-I don't remember her name she was at the front desk of the metro building in the pain management department. She wouldn't let me back, but I did talk to her about Butrans and left approved materials. I spoke to her about what it is, how many patches per month, scheduling and patch placement.-front color-blue->b<-CHUDAKOB added notes on 12/19/2013->b></font>-But she was not a nurse, office manager or MA, therefore no call should be entered.
PPLPMDL0020000001	Cleveland	OH	44104	12/12/2013	Reviewed Butrans for those Tramadol failures requiring around the clock analgesia and OxyContin Q12h flexible dosing strengths. Said OK and will consider
PPLPMDL0020000001	Cleveland	OH	44104	12/12/2013	Reviewed Butrans for that Tramadol failure requiring around the clock analgesia Formulary coverage/PA and OxyContin Q12h flexible dosing strengths. Said she will consider, struggled in the past with PA
PPLPMDL0020000001	CLEVELAND	OH	44195	12/12/2013	Reviewed Butrans, stocking and Savings Cards along with OxyContin Q12h and dosing strengths and Savings Cards
PPLPMDL0020000001	Cleveland	OH	44195	12/12/2013	Fellows attended Butrans program, Dr Said,Cheng etc) Discussed Butrans for those patients requiring around the clock analgesia and OxyContin Q12h flexible dosing strengths
PPLPMDL0020000001	North Olmsted	OH	44070	12/12/2013	Spoke to bill and Rita the pharmacist. They said they had been filling Butrans lately, the 5 and ten mcg. We talked about patch placement and steady state. He wanted to attend the program but I said I would have to check if a pharmacist could attend the Butrans program. We talked about the 15mcg. They said it would automatically show up in their system all the strengths. Talked intermezzo, he was not familiar with this product. Reviewed indication, dosing.
PPLPMDL0020000001	Akron	OH	44312	12/12/2013	Dr in for lunch Today and wanted to hear about Butrans. Dr said he has some exposure to it from dr Lonsdorf. Discussed all key selling messages for Butrans including patient profiles, dosing, conversions, application sites, patch description, adverse events, efficacy results from clinical trials and insurance. Dr said it seems like a great product and will try to find patients. Discussed OxyContin and asked him if he has patients on IR oxycodone? Dr said he does. Explained conversions and to reevaluate his patients who may need an adjustment on Percocet to go to ER oxycodone. Finished with intermezzo and discussed indication, dosing and limitations of use. Dr asked about what it is and I told him zolpidem. Dr said a sublingual zolpidem for prn use is great and will use it.
PPLPMDL0020000001	Akron	OH	44312	12/12/2013	Discussed all key points for all products. Explained Butrans patient types, conversions, application sites, adverse events and insurance. Dr asked about using Butrans for post operative pain. Discussed from the FPI the limitations of use and dr said he's happy with that. I asked dr if he will write it? Dr said maybe but is retiring soon. Discussed OxyContin for his patients already on oxycodone. Discussed conversions and patient profiles.
PPLPMDL0020000001	Waterford	OH	45786	12/12/2013	Intermezzo discussion about identifying patient types. I-Butrans dosing, administration, co-pay cards, managed-care, boxed warning, warnings and precautions and limitations of use. OxyContin dosing and managed-care. Intermezzo dosing indication.W-she asked about Butrans and diversion and abuse. I replied that Butrans is a schedule III opioid and has a boxed warning with abuse potential, respiratory depression and accidental exposure. I also went over the warnings and precautions. I explained to her that there is risk for abuse with Butrans.
PPLPMDL0020000001	Cleveland	OH	44104	12/12/2013	Reviewed OxyContin Q12h flexible dosing and Butrans for those Tramadol failures requiring around the clock analgesia. Formulary coverage
PPLPMDL0020000001	Cleveland	OH	44104	12/12/2013	Discussed Butrans for that Tramadol failure requiring around the clock analgesia, dosing and Formulary coverage with Reese. Will relay info.
PPLPMDL0020000001	Akron	OH	44312	12/12/2013	Discussed all products over lunch with doctors in the office. Discussed Butrans key selling messages including patient profiles, adverse events, efficacy results from opioid experienced,formulary can copy cards. Janet really didn't offer much so I asked her if she has seen some patients like the ones I discussed? She said she does but usually sees follow up appointments. I told her if that means she doesn't prescribe? She says she does. I asked her to write Butrans for patients appropriate. OxyContin for her Percocet patients and intermezzo for her patients in the middle of the night insomnia.
PPLPMDL0020000001	Hudson	OH	44236	12/12/2013	Caught dr leaving the office and told him I wanted him to use more OxyContin for those patients who are already on IR oxycodone. Dr said he tries to as much as he can but still likes to limit his prescribing on scheduled medicines. I asked dr what he does and he said refers to western reserve pain. I told him to remember the schedule 3 Butrans for his around the clock tramadol patients.
PPLPMDL0020000001	Cleveland	OH	44111	12/12/2013	Left approved materials behind for drs.-front color-blue->b<-CHUDAKOB's query on 12/18/2013->b></font>-Who did you speak with? In order to record a call as a non-HCP you would have had to have a call on a non-HCP. If you did, then you should record who you spoke with and what happened on the call. If you only left material with a receptionist, this should not be recorded as a call.-front color-green->b>BARTOLI's response on 12/19/2013->b></font>-Ok, then this should not have been recorded as a non hcp. I put it down cause they are metro doctors with no see policy and I wanted someone to know I was here.-front color-blue->b<-CHUDAKOB added notes on 12/19/2013->b></font>-Unfortunately, there is no way to record this. I trust you are doing the right thing. It should only be a non-HCP call if you had a product discussion of some sort with a nurse, MA or office manager. Any other non-physician interaction should not be recorded as a call. If you have questions on this, please let me know.
PPLPMDL0020000001	Cleveland	OH	44113	12/13/2013	Reviewed Butrans dosing Initiation/Titration, formulary coverage , said she will continue to find new starts for Butrans, asked for those appropriate patients that fail LorTab and require around the clock analgesia
PPLPMDL0020000001	Akron	OH	44312	12/13/2013	Told dr that over the next couple of weeks until 2014 to focus on patient identification for Butrans. I asked her instead of refilling tramadol patients prescriptions to consider Butrans as an option. Dr said she will try. I asked if her current patients on Butrans are doing well? Dr said they are and I told her than to continue prescribing. I reminded dr to also use OxyContin for those patients already on IR oxycodone and asked if she has anyone? Dr said she has a few. Told dr that she should be assessing patients for intermezzo.
PPLPMDL0020000001	Uniontown	OH	44685	12/13/2013	Said he to dr at front window and told him to keep an eye on patients who come to see him on tramadol. Dr said ok. I told him that instead of refilling it to evaluate for Butrans and they only have to use 4 patches in one month. Dr said ok.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	12/13/2013	Spoke with Glenn the pain management pharmacist about Butrans and OxyContin insurance covorgae. Told him about the discussion with dr Souzdanitski today and him telling me how expensive it is for his Medicare patients. Discussed the Medicare plans that are covering it. He said they have become more streamlined in getting the prior authorizations and gaining coverage on medicines by having experienced ma's and other staff to spend the time that it takes. I told dr that's great and reviewed the commercial and Medicare coverage for OxyContin
PPLPMDL0020000001	Akron	OH	44333	12/13/2013	Lunch appointment and discussed all products. Gilbert said he takes a lot of pride in ensuring his patients are well taken care in the pharmacy and really likes it when I'm in because I provide valuable information which he can pass along to his patrons. Discussed Butrans stocking,patient types,appropriate starting dose and titration and copy cards. Discussed OxyContin dosing, how many he is seeing each week which he says that it varies per week. Gilbert said he still has intermezzo on the shelf but hasn't moved it.
PPLPMDL0020000001	Fairlawn	OH	44333	12/13/2013	Lunch appointment and discussed all products. Gilbert said he takes a lot of pride in ensuring his patients are well taken care in the pharmacy and really likes it when I'm in because I provide valuable information which he can pass along to his patrons. Discussed Butrans stocking,patient types,appropriate starting dose and titration and copy cards. Discussed OxyContin dosing, how many he is seeing each week which he says that it varies per week. Gilbert said he still has intermezzo on the shelf but hasn't moved it.
PPLPMDL0020000001	Cleveland	OH	44113	12/13/2013	Reviewed Butrans dosing Initiation/Titration, formulary coverage along with OxyContin Q12h flexible dosing strengths, said she will continue to find new starts for Butrans
PPLPMDL0020000001	Cleveland	OH	44106	12/13/2013	Visited Anes/Pain dept left OxyContin Q12h Initiation/Titration guides along with Butrans Patient info sheets. Left Terrah message seeking dept appt
PPLPMDL0020000001	Akron	OH	44308	12/13/2013	Spoke to one of the burn center nurses and asked to see Kristen. Jessica said that she is off today. Spoke with Jessica about what I'm trying to accomplish by having an inservice with the fellows and residents about OxyContin and its background as well as conversions. Jessica said she knows they used to do these fairly often but haven't done them in a while. She said she would speak to the nurse manager about it and would give her my card.
PPLPMDL0020000001	Cleveland	OH	44113	12/13/2013	Quick Butrans reminder for those patients requiring around the clock analgesia and OxyContin Q12h flexible dosing strengths, Said OK and will keep in mind
PPLPMDL0020000001	Cleveland	OH	44106	12/13/2013	Reviewed Butrans and OxyContin selling messages with Marge RPH, no new info learned
PPLPMDL0020000001	Stow	OH	44224	12/13/2013	Quickly told dr in between patients that she needs to be using more OxyContin not only for her patients already on oxycodone but those that have moderate to severe pain and need an ER opioid which is single entity oxycodone. Dr said ok and said she really doesn't get or have many patients who would need a product like OxyContin. I showed her the conversions and told her that even a patient on 20mg of Percocet may be appropriate for OxyContin. Told her it would only be 10mg q12.
PPLPMDL0020000001	Cleveland	OH	44113	12/13/2013	Quick Butrand reminder for those Tramadol failures requiring around the clock analgesia and OxyContin Q12h flexible dosing and broad formulary coverage, Said OK and running behind
PPLPMDL0020000001	Cleveland	OH	44113	12/13/2013	Reviewed Butrans Barb(Nurse)for those Tramadol failures requiring around the clock analgesia. Reminded OxyContin Q12h flexible dosing strengths, agreed she will relay info to Dr. and consider. Asked for staff in-service, will consider for Jan
PPLPMDL0020000001	Akron	OH	44310	12/16/2013	Spoke with Clinton the pharmacist about all products. I asked him if the Butrans dispensing has picked up any and he said it has. I asked hi from who and he said mostly pain management practices in Cuyahoga falls and akron. I reviewed dosing, new 15mcg dose and conversions. I talked to him about OxyContin dosing and conversions as well and discussed patients already on IR oxycodone. 1:1 ratio conversions. Asked him if he has dispensed any intermezzo? Clinton said none that he has done. Reviewed appropriate patients and dosing.
PPLPMDL0020000001	Cleveland Hts Barberton	OH	44118 44203	12/16/2013 12/16/2013	Reviewed OxyContin Q12h,7 dosing strengths along with Butrans for those patients requiring around the clock analgesia who have failed on Tramadol. Said OK and will continue to find new appropriate patients Follow up. Dr said it has been a busy month. We talked about his practice and they types of patients he has been seeing. I asked if he converted any Tramadol patient to Butrans this month. Dr said no, but said he will. Left Scott profile and appropriate patients.
PPLPMDL0020000001	Stow	OH	44224	12/16/2013	Email invitation for conference call sent to Al Barber.
PPLPMDL0020000001	Norton	OH	44203	12/16/2013	Spoke to Jennifer , introduced Butrans to her discussed managed care and patch placement.
PPLPMDL0020000001	Cleveland	OH	44109	12/16/2013	Visited Anes./Pain dept. Sue-Fellows coordinator, left Butrans/OxyContin info for fellows.
PPLPMDL0020000001	Cleveland	OH	44109	12/16/2013	Visited Anes./Pain and Ortho Depts. Left OxyContin/Butrans initiation guides with Dept Admin and requested appts
PPLPMDL0020000001	Akron	OH	44333	12/16/2013	Dr saw me and said he needs more Butrans patient savings cards. I asked him why? Dr said because he has been using it more and have had patients that qualify for them. I told dr that so great to hear and to continue using it for his parishes on tramadol or vicoden who need a dose adjustment. I told dr to also identify patients already on IR oxycodone who need an adjustment and to switch to OxyContin. Dr said ok he will.
PPLPMDL0020000001	Akron	OH	44333	12/16/2013	Dr said he needs more Butrans copy cards in his Wadsworth and medina locations. I told him I will give me to Judy the office manager so she can transport them to the appropriate locations. I told him to continue prescribing and titrating every 72 hours if necessary to ensure e right dose. I also told him to continue prescribing OxyContin and handed him the conversions and titration guide. Dr said ok and thanks. I asked him if his patients are getting the trial offer as well and he said he thinks so yes.
PPLPMDL0020000001	Cleveland	OH	44109	12/16/2013	Visited Dept.Requested appt. Left OxyContin/Butrans Initiation/Titration guides for Dr. Feighan,Wilber,Patterson, Sontich, Steinmetz, Thompson
PPLPMDL0020000001	Hudson	OH	44236	12/16/2013	Got a quick second with dr and asked him what his residents thought of the Butrans inservice? Dr said he thought it was great and really informative for them. He said he thought they also asked some really good questions. I reminded dr to focus on his patients already on IR opioids and he is looking to titrate them. I told him that's a great time to start Butrans. Dr said ok and thanked me for the inservice.



PPLPMDL0020000001	Cleveland	OH	44112	12/16/2013	Reviewed OxyContin Q12, 7 tablet strengths along with Butrans for those patients requiring around the clock analgesia who have failed on Tramadol. Said Ok and will keep it in mind
PPLPMDL0020000001	Brooklyn	OH	44144	12/16/2013	Reminded of OxyContin Q12, 7 tablet strengths along with Butrans for those patients requiring around the clock analgesia that have failed on Tramadol, Said Ok and thank you for the reminder
PPLPMDL0020000001	Cleveland Hts	OH	44118	12/16/2013	Quick Butrans reminder for those Tramadol failures requiring around the clock analgesia and OxyContin Q12h, 7 tablet strengths. Said Ok
PPLPMDL0020000001	Brooklyn	OH	44144	12/16/2013	Reminded of OxyContin Q12h, flexible dosing strengths and Butrans for those Tramadol failures. Dr. Said thank you and will be retiring this week.
	Uniontown	OH	44685	12/16/2013	I told dr to be very specific in his patient type selection for typo ducts he uses and asked if he agrees? Dr said yes he does agree. I asked him if there are situations where he prescribes OxyContin for patients failing vicoden? Dr said sometimes but usually goes to Percocet. I asked why he doesn't go straight to an ER opioid? Dr said because that's just what he does. I said ok and to focus then on oerocet patients for OxyContin and vicoden patients needing an adjustment on hydrocodone combinations. Dr said ok. Nothing else learned.
PPLPMDL0020000001	Fairlawn	OH	44333	12/16/2013	Saw dr up front while I was signing up for lunch. I told dr that he needs to focus on more patients for OxyContin. I told him to use it earlier for patients already on percocet. I asked him if he would write OxyContin for patients on 20mg of Percocet if they need a dose adjustment? Dr said its patient specific and if he knows they will be chronic he would write it. I asked him to do it and it would be 10mg q12. Dr said ok.
PPLPMDL0020000001	Westlake	OH	44145	12/17/2013	Spoke to kandy the office manager and asked about managed care concerns with Butrans and discussed patch placement. She didn't have any concerns or questions. S I left a variety of approved materials.
PPLPMDL0020000001	Cleveland	OH	44114	12/17/2013	Reviewed Butrans for those patients requiring around the clock analgesia who are not adequately controlled on Lortab/Tramadol. Said she will continue to find appropriate patients
PPLPMDL0020000001	Cleveland	OH	44135	12/17/2013	Left literature at this metro location. Spoke to office manager, she said the drs might attend a dinner program for Butrans and to leave invite.
	Akron	OH	44310	12/17/2013	Told dr that we have spoken a number of times about Butrans and where and who he can use it for in his practice. I showed him the Bup 3015 and reviewed the inclusion and exclusion criteria. I asked him what he is currently doing for a patient on vicoden and showed him the Kathy profile who is taking 20mg a day? Dr said at that point he refers to pain management. I asked him if all his patients are referred once they need more than 20mg a day? Dr said he doesn't want to treat pain at all and it is a pain treating pain. Dr said just by giving them more doesn't mean they will be in less pain. Dr asked what schedule Butrans is and I told him its a schedule 3. Dr asked if its going to be moved to a schedule 2 be next year like vicoden will be? I told dr I didn't know of any changes. Dr said ok and he just doesn't like treating pain. I asked him if he sees any benefit to implementing a ER opioid instead of moving from on IR to another? Dr said he's not sure. Nothing else learned.
PPLPMDL0020000001	Lakewood	OH	44107	12/17/2013	Saw dr reviewed Butrans Initiation chart.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	12/17/2013	I was holding a piece for OxyContin and one for Butrans. Dr saw the Butrans piece and asked me about it. I showed him to Kathy profile and it makes sense to use Butrans for a patient on vicoden? Dr said it does but he can't get his patients to use patches. I asked why and he said he didn't really know. I asked him if he has tried lately and he said no. I told dr to write more OxyContin in his practice and he agreed to.
PPLPMDL0020000001	Akron	OH	44312	12/17/2013	Told dr that I wanted him to reevaluate his patients on IR opioids like Percocet and to take an extra minute in the exam room to decide if the patient is appropriate for ER oxycodone. I told him to focus on his patients that have been on IR oxycodone for at least 6 months. I asked dr when he typically moves to an ER opioid and he said around then. I asked if what I described makes sense and if he would do that more? Dr said ok. I reviewed the Butrans dosing and patient types that he sees in his office like the tramadol patient. I asked him if he prescribes tramadol? Dr said he does. I asked him if it makes sense to move a patient to Butrans if they meet the indication? Dr said it does and said he will try because it seems to be the right thing to do. Finished with a reminder about intermezzo dosing and indication.
PPLPMDL0020000001	Fairview Park	OH	44126	12/17/2013	Spoke to the nurse, she would not let me see the doctor today. Discussed Butrans, she was fami air with the product. Left approved materials behind for the doctor to review.
PPLPMDL0020000001	Lakewood	OH	44107	12/17/2013	Saw the dr. Reviewed Butrans....steady state and titration. Also discussed OxyContin...q12h and identifying the patient that would be appropriate for OxyCotin.
PPLPMDL0020000001	Cleveland	OH	44195	12/17/2013	Visited Anes/Pain/Neuro Depts. Left OxyContin/Butrans initiation/Titration guides, requested appt with fellows
PPLPMDL0020000001	Akron	OH	44310	12/17/2013	Dr told me he didn't need to hear another message about Butrans. I told him ok that I won't tell him about the schedule 3, 7 day transdermal patch Butrans! Dr laughed and said very good. I told him to focus more on outpatients that would be appropriate for OxyContin. Dr said he knows that he should start it in patients on Percocet. I told him exactly. Told him to also not forget about intermezzo for in the middle of the night awakenings.
PPLPMDL0020000001	Lakewood	OH	44107	12/17/2013	Spoke to the nurses about Butrans and the Scott profile. The nurses said that dr writes the product....I asked if they had any calls or stumbles from prior auths that I might address for them and they said no. They see a great deal of care-source and Medicaid. So I reviewed the plans were wer are covered.
PPLPMDL0020000001	Cleveland	OH	44113	12/17/2013	Reminded of Butrans for those patients requiring around the clock analgesia and OxyContin Q12h and 7 tablet strengths. Formulary coverage. Said he will continue to find appropriate new starts
PPLPMDL0020000001	Cleveland	OH	44113	12/17/2013	Reminded of Butrans for those patients requiring around the clock analgesia that have failed on LorTab/Tramadol. Said Ok, always looking for appropriate new starts. OxyContin Q12h, 7 tablet strengths
PPLPMDL0020000001	Olmsted Falls	OH	44138	12/18/2013	Saw dr and discussed Butrans Initiation and Scott profile.
PPLPMDL0020000001	Westlake	OH	44145	12/18/2013	Left a variety of materials approved to the doctor. Spoke to Kelly, they aren't doing lunches so seeing the doctor is harder. Discussed so managed vcare for both products.
PPLPMDL0020000001	Akron	OH	44312	12/18/2013	Asked dr if he started that patient he told me about on Butrans? Dr said he did and hasn't heard anything back so he said he suspects all is good. I told dr I needed to make sure he has a full understanding of the appropriate patient types for Butrans and reviewed the inclusion an exclusion criteria and asked him if he can focus more on those types of patients? Dr said he is trying and will do his best to find the right patient.
PPLPMDL0020000001	Akron	OH	44320	12/18/2013	Reviewed the Butrans inclusion and exclusion criteria and told her its important because it helps to find the most suitable patients for the product. Dr said she agrees that it is very patient specific. I asked dr where she has used it and she said mostly for patients on Percocet. I told dr that's ok because the were a decent amount of those patients studied and told her to focus more on the 62% of the patients on hydrocodone combinations. I told dr that when that patient type presents with pain and she is considering adjusting to start Butrans. Dr agreed and said ok. Discussed patient selection for OxyContin as well and reviewed dosing. Discussed the Maggie profile. Reminded her to search for patients that fit the intermezzo indication.
PPLPMDL0020000001	Akron	OH	44320	12/18/2013	Followed up with dr about the patient he was looking to start on Butrans from my last visit. Dr said he didn't because she is now in the hospital. Dr said she should be released soon. I told him that he needs to start evaluating his patients on vicoden who need a dose adjustment for initiating Butrans. Dr said ok.
PPLPMDL0020000001	CLEVELAND	OH	44195	12/18/2013	Quick OxyContin/Butrans follow up with Troy, no new info learned
PPLPMDL0020000001	Cleveland	OH	44107	12/18/2013	Spoke about the Butrans patch placement, managed care. Asked if he has seen any 15mcg and he said no.
PPLPMDL0020000001	Westlake	OH	44145	12/18/2013	Spoke to Kelly office manager about Butrans. Talked talked about patch placement. And review dosing of Butrans.
PPLPMDL0020000001	Berea	OH	44017	12/18/2013	Spoke to dr about e atc pain patients who are uncontrolled on their current therapy. Asked the doctor to consider Butrans for the patient coming in for their Tramadol refills and assess them if their pain is atc....if so, gave him Scott profile to think about. Dr said he would keep it in mind.
PPLPMDL0020000001	Munroe Falls	OH	44262	12/18/2013	Provided review of Butrans and OxyContin patient types. I told dr that she has told me previously that she does have patients that are on tramadol and those that are on Percocet. I told her each patient has a possible solution. Tramadol for Butrans and Percocet for OxyContin. Dr agreed and said she just needs to get out of the rut of refilling them. I told her that's right she does and that I'm guessing its just easier to do. I told her to focus on what may be a possible solution to every day pain.
PPLPMDL0020000001	Lyndhurst	OH	44124	12/18/2013	Discussed Butrans after Tramadol ( used Scott profile) se has a male patient with chronic low back pain, whom she might consider Butrans for. When I was sitting in Dr Isakov office, she came in a few times when we were talking & just pulled an OARRS on this male patient. She's going to research what plan he's on & if its BWC, consider initiating Butrans. Told her I'd look forward to following up in 2014 on that patient. She & dr Isakov looked @ Butrans initiation & titration guide to determine what recommended max dose of Tramadol is. Sarah echoed dr Isakov concern regarding Medicare patients being unable to afford Butrans. Reminded Sarah of med d plans Butrans preferred on, & asked her to consider for her few BWC patients and commercial patients who can use trial, savings card to get best available price.
PPLPMDL0020000001	Lyndhurst	OH	44124	12/18/2013	Left Butrans sliding doser, dr & Sarah forgot what max dose was for Tramadol. had male patient on Tramadol for low back pain, were going to check insurance & see if Butrans 10 mcg hr is covered. They ran OARRS and patient has seen dr Morley in past BWC. Reminded them BWC will pay ( ask about that patient next time) after discussing Butrans after Tramadol, or as first opioid, dr says I need to repeat that the Medicare patients whom really need Butrans cannot afford. Reminded him where Butrans preferred on Medicare part d& will update him in 2014.
PPLPMDL0020000001	Cleveland	OH	44195	12/18/2013	Followed up with Gutsell, OxyContin Savings cards, Left Butrans Initiation/Titration for Davis
PPLPMDL0020000001	CLEVELAND	OH	44195	12/18/2013	Quick OxyContin reminder Q12h, 7 tablet strengths along with Butrans for those patients requiring around the clock analgesia. OxyContin Savings cards
PPLPMDL0020000001	Lyndhurst	OH	44124	12/18/2013	Summarized last conversation regarding Percocet patients actually following a q6 h dosing plan, once again I'm going to ask you to re assess those patients & see if they would be more likely to follow a q 12 h dosing plan for atc pain, that's expected to last for extended period of time. Dr responded he will keep in mind. Butrans, now with greater dosing flexibility, 4 strengths to help individualize the dose. Please consider after 3-4 Tramadol daily, conversion to Butrans 10 mcg hr. Ok, sound good? Dr responded yes, had to get to next patient.
PPLPMDL0020000001	Cleveland	OH	44103	12/18/2013	Quick OxyContin reminder Q12h, 7 tablet strengths, said OK, Nothing new learned
PPLPMDL0020000001	Akron	OH	44333	12/18/2013	Dr told me that he just write OxyContin today for a patient taking 4 7.5/325 Percocet a day. I asked what dose he started and dr said he started a little lower than what he otherwise would have because he's giving breakthrough meds as well. Dr said he started on the 20mg OxyContin q12. Dr also said he continues to have great success with Butrans for his elderly population coming off of vicoden and lower dose Percocet. Dr said that he latest success was a lady that presented at a pain rating of 7 and after a month she rated herself at a 1 on the pain scale. I told dr that's amazing and that he needs to report those successes to me more often! I asked dr to continue prescribing and to not forget those on vicoden and reviewed the Kathy profile. I reminded him to also identify patients appropriate for intermezzo.
PPLPMDL0020000001	Akron	OH	44312	12/19/2013	Message to dr about using Butrans for his patients who need that dose adjustment on tramadol and to effectively describe Butrans to the patient as a 7 day controlled release patch for moderate to severe pain. Dr said he has written a couple in the last month and will continue to write.
PPLPMDL0020000001	Akron	OH	44312	12/19/2013	I told dr that patient specificity when starting a pain medicine is very important and asked him if he agreed. Dr said it is important. I told him that with OxyContin, he should be identifying patients who are in pain around the clock and already on the oxycodone molecule. I showed him the initiation and conversions guide and asked him if he would start to reevaluate some patients for OxyContin? Dr said its not easy but said my point is
PPLPMDL0020000001	Akron	OH	44312	12/19/2013	The technician said Gary was too busy to talk so I took the opportunity to discuss all products. Discussed all key messages about Butrans and same for OxyContin. The technician said that they do see Butrans but much more OxyContin. I asked if the Butrans were from dr Cain and he looked and said they have had them from Cain and Buis most recently. I reviewed intermezzo indication and dosing.
PPLPMDL0020000001	Tallmadge	OH	44278	12/19/2013	Saw dr at front counter and asked him if he would consider using the schedule 3,7 day transdermal patch Butrans for a patient that needed an adjustment on tramadol or vicoden? Dr said maybe. I gave him the initiation and titration guide and told him to review because those patients fit the indication and then told him the indication. I showed him an OxyContin copy card and asked him if he knows about them for his private insured patients? Dr said yes he does. I told him that he should use OxyContin when patients are already on oxycodone. Dr said ok. Told him I'm leaving more intermezzo copy cards and to continue his use.
PPLPMDL0020000001	Tallmadge	OH	44278	12/19/2013	I asked dr if he sees patients in with chronic pain conditions who gets refills on IR opioids? Dr said there are many patients presenting with that who gets a referral to pain management. I told dr I understand and asked him if there are those on tramadol who need an adjustment in dose? Dr sad sure. I showed him the initiation and titration guide and asked him if he would prescribe Butrans? Dr said he remembers discussing it and thanked me for the reminder. Dr then went into an exam room and nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44195	12/19/2013	MSL and Dr. Rodenas conducted telephone meeting with Dr. Dell to discuss BUP3031 participation and identification of principal investigator. Dr. Rodenas asked Dr. Dell to postpone decision regarding BUP3031 participation until January, she agreed and will wait to review upcoming amendment.
PPLPMDL0020000001					

	Cuyahoga Falls	OH	44223	12/19/2013	Dr and I spoke about how patients on Percocet are not able to get approved for OxyContin easily. I told dr I didn't understand how that's possible and dr told me that most patients on Percocet need a PA for p. to get approved for OxyContin and even when they do its too expensive for him and is about \$90. Dr said a copy card to cover that would help a lot. I told dr I can't believe he didn't remember about the \$90 OxyContin copy card for private prescription patients. Dr said ohh and said that helps. I told him that we have discussed these cards on many occasions. I asked if all ER opioids are difficult to get approved from IR opioids? Dr said yes they all are. Told dr then if they are all on a level playing field then to write OxyContin. Dr said he does and will continue to try. I asked him and Liz to ensure all private prescription patients get the copy card.
PPLPMDL0020000001	Alkron	OH	44312	12/19/2013	Walked into office to speak with drs Taylor and month with and dr wells cam up to me and told me he just had a follow up appointment with a patient on Butrans. Dr said the patient is in her second week of Butrans and is really liking it. Dr said the patient was taking 4 Percocet a day and he started her on the 10mcg patch. Dr said that the patient in the first week was taking 2 Percocet for breakthrough and now is only needing one Percocet. I told dr that it is great to hear. I told dr to try and identify patients like that one for more Butrans. I told dr to look into hydrocodone patients as really good candidates. Dr said he will.
PPLPMDL0020000001	Norton	OH	44203	12/19/2013	Talked about Butrans and it is managed with a patch once a week and discussed the Scott profile type patient. The doctor said most his patient prefer a pill to a patch. I asked the doctor what percentage of his atc pain patients have u offered Butrans to? Dr said he was referring to patch technology in general. I said if his patient are satisfied on their current therapy that was great. But during assessments u find they are appropriate for Butrans and they aren't satisfied with their current treatment, maybe if u made the recommendation they would take it. He said maybe they would. We talked about abuse potential with Butrans and OxyContin also the limitations. I gave him the Scott profile and told him to look at it sometime. I started to go into the pain results of the naive study...but he cut me off and said he had a patient waiting for him.
PPLPMDL0020000001	Cleveland	OH	44113	12/20/2013	Reviewed Butrans for those patients requiring around the clock analgesia along with OxyContin Q12h, 7tablet strengths. Said Ok and is always looking for new appropriate patients
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	12/20/2013	Followed up with Darlene about the patient dr Azem started on Butrans when I was in last. I asked what the status of the Community Plan in covering Butrans. Darlene said that she was so impressed because the insurance plan covered it without any issues and the patient even picked up the Butrans from the pharmacy the same day. I told Darlene that is really good to hear and Darlene said that dr Azem was very impressed and will keep
PPLPMDL0020000001	Mogadore	OH	44260	12/20/2013	Dr Buis came up while talking to dr Cain. Dr Buis said she used Butrans as well for a vicoden patient. Talked with her and dr Cain about titration and conversions. I told d Buis to use OxyContin for those patients of hers already on the oxycodone molecule like Percocet. I have her a conversion and titration guide. Nothing else learned.
PPLPMDL0020000001	Mogadore	OH	44260	12/20/2013	I asked to see dr up front and saw him around the corner. Dr came to me and said he prescribed Butrans this week. I told him that's great to hear and asked him to tell me about it. D said the patient was taking vicoden and it wasn't working so he started the patient in 5mcg. I asked what dose of vicoden a he said 2-3 pills a day. I handed him the Butrans decision tree and told him to make sure to titrate if necessary and he can after 72 hours. Dr said thanks and also gave the patient a copy card.
PPLPMDL0020000001	Cleveland	OH	44113	12/20/2013	Visited Pain/Anes. Dept Dr. Shen/Dale reviewed OxyContin Q12h 7tablet strenths along with Butrans for those patients requiring around the clock analgesia
PPLPMDL0020000001	Cleveland	OH	44113	12/20/2013	Reviewed with Justin RPH OxyContin Q12h, 7 tablet strengths and Butrans for those patients requiring around the clock analgesia, Said Ok,nothing new learned
PPLPMDL0020000001	Cleveland	OH	44102	12/20/2013	Quick OxyContin reminder Q12h, 7tablet strengths along with Butrans for those patients requiring around the clock analgesia. Said Ok, nothing new learned
PPLPMDL0020000001	Cleveland	OH	44113	12/20/2013	Reminded of Butrans for those patients requiring around the clock analgesia along with OxyContin Q12h and 7tablet strengths
PPLPMDL0020000001	Garfield Hts	OH	44125	12/20/2013	Dr. is back from Medical Leave, Reviewed Butrans for those patients requiring around the clock analgesia along with OxyContin Q12h, 7tablet strengths. Said Ok and will continue to look for appropriate Butrans patients
PPLPMDL0020000001	Akron	OH	44319	12/20/2013	I told dr that I want his first experience with Butrans to be a good one. I told dr that one way to increase the likelihood of that is to listen for key words from patients while in an exam room that may lead him to believe they might want or need another option for analgesia. I asked dr if he has heard these requests from his patients? Dr said yes, all the time. I told him that those patients that are on tramadol or vicoden and meet the indication for Butrans are good candidates. I asked dr if he will do that for next year? Dr said he can do that.
PPLPMDL0020000001	Hudson	OH	44236	12/23/2013	Saw dr Russ in the office with dr Tosino. Told dr Russ that over the next week or so he will probably see patients coming in on products like tramadol and Percocet. I told dr that when he has a patient on tramadol who needs a dose adjustment to start Butrans. I reviewed conversions and appropriate starting doses. I asked him if he will continue to write and he said yes. I told him to take a closer look at patients on Percocet to see if they are appropriate for OxyContin. I told him the conversion is a 1:1 ratio and asked if it makes sense? Dr said if he does just doesn't want to write a lot of it. I told him if he's already got patients on Percocet there really isn't much difference other than ER and IR oxycodone. Dr said ok. Nothing else learned.
PPLPMDL0020000001	Akron	OH	44333	12/23/2013	I asked dr when he knows a patient needs to be switched to an ER opioid? Dr said when they are taking too much short acting. I said how much is too much? Dr said it depends on the patient and what he is treating them for. I said I understand and said what if you are treating a patient for spinal stenosis who is on vicoden and they need a dose adjustment? Dr said he uses Butrans and knows when to use it. I told him to just use Butrans more often instead of refilling the short acting. Dr laughed and said ok.
PPLPMDL0020000001	Hudson	OH	44236	12/23/2013	Asked Jackie the office manager to see dr Tosino quickly. Got to see dr in his office with dr Russ. Told both of them that over the next week they will most likely see patients already either on IR oxycodone or tramadol and need a therapeutic change. I told dr Tosino to start OxyContin for those patients he said he sees already on oxycodone and those needing a dose adjustment on tramadol to start Butrans. I asked dr if it makes sense to try Butrans at that point? Dr said sure. Nothing else learned.
PPLPMDL0020000001	Akron	OH	44304	12/23/2013	I gave dr the hydrocodone insight and asked him how he will reduce or eliminate that statistic in his office? Dr said it will always be a problem because the struggle between the dr and patient with what the dr wants and what the patient expects. I told him I understand and said that he should be switching to ER opioids when he first realizes the patient is in around the clock pain. Dr said that's the problem though because many parishes don't want to switch off their generic pain medicine. I told dr that OxyContin is very well covered on many insurance plans including Medicare. I asked him to take patients already on oxycodone and move them to OxyContin.
PPLPMDL0020000001	Fairlawn	OH	44333	12/23/2013	I gave dr the Butrans initiation and titration guide and told him it is a good opinion for his tramadol patients needing a dose adjustment. Dr said ok and took the information.
PPLPMDL0020000001	Akron	OH	44305	12/24/2013	Spoke with Sue about Butrans dosing and conversions. I told Sue to keep an eye on patients continuing to get refills on tramadol and vicoden as they are good candidates for Butrans. Sue told me that those are typically the types of patients that move to Butrans. Sue also said that they see a lot of Percocet patients moving to Butrans. I told her that its ok but sometimes those could also be good candidates for OxyContin. Reminded her of intermezzo dosing and limitations of use. Sue said they still have it on the shelf but will need to send it back she thought by March next year.
PPLPMDL0020000001	Akron	OH	44305	12/24/2013	I asked dr what he typically treats with IR opioids? Dr said that he does see patients with acute pain and will use it for that and said that sometimes cost will prohibit patients from moving off of drugs like vicoden. I told dr I understand and to look at patients with private prescription insurance and Caresource with the pa. I told dr how little these patients can pay with the trial offer and copy card. Dr said ok and will continue to use Butrans.
PPLPMDL0020000001	Garfield Hts	OH	44125	1/2/2014	Reminded him when and where to use OxyContin and intermezzo.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	1/2/2014	Visited Ortho/Surgery Ctr. Requested appt. to discuss OxyContin/Butrans said to email appt physicans
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	1/2/2014	Spoke to Steve about products and he told me he only had a minute. I asked him how familiar he is with Butrans and he said fairly because they have a couple of patients on it. I reviewed the dosing, indication, conversions and patient types. Steve asked about patient savings. I reviewed the trial offer and copy card. Discussed OxyContin dosing, conversions and insurance coverage along with copy cards. Steve said he has some of each card.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	1/2/2014	Spoke with Dr Hegde while meeting with Darlene who said they are out of Butrans copy cards. Dr Hegde said she is having better success with Butrans recently. I asked why she thinks she is having better success and dr said that she knows more about it now and is choosing her patients a little closer. I asked what type of patients and dr said patients with insurance or BWC who are on vicoden and need a refill. I told her that's great to hear and to also use Butrans for patients on tramadol in the same situation. Dr said ok but said she sees many more patients on vicoden. I told her to continue prescribing.
PPLPMDL0020000001	Hudson	OH	44236	1/2/2014	Asked dr if it made sense to use OxyContin for patients of his who already are on Percocet and need a dose adjustment? Dr said it does and he likes the pain specialists to make that decision. I asked what if the patient went to pain management and is back to see him as his pcp? Dr said he sends them back for their pain. I told dr I understand and asked if he would use Butrans as a schedule 3 controlled release opioid? Dr said its more likely.
PPLPMDL0020000001	Cleveland	OH	44113	1/2/2014	Nothing else learned.
PPLPMDL0020000001	Stow	OH	44224	1/2/2014	Reminded of Butrans for those LorTab failures along with OxyContin Q12h and its 7tablet strengths
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	1/2/2014	I told dr that Purdue has a couple of ER opioid options for her patients who may need dose adjustments on their short acting opioids. I asked dr how comfortable she is in using OxyContin? Dr said she's comfortable and uses her best judgement on who gets it. I asked who those patients usually are and she said patients typically already on oxycodone like percocet. I told her that is a great place and time to move to OxyContin. I showed her the conversions and asked for more business. I told her the other option is usually before she would move to OxyContin and its for patients needing dose adjustments on products like tramadol and vicoden. I reviewed the Kathy profile, showed her how to initiate and asked her if she will try it for a patient like Kathy? Dr asked how well its covered and I said very well and reviewed some of the plans. Dr said she is surprised. I told her Butrans has been out for 3 years! Dr said she will keep it mind. I asked her to just try it and allow Butrans to speak for itself. Dr said ok.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	1/2/2014	Met Lauren the pharmacist for the first time. Discussed all products and Butrans key selling messages including patient types and conversions. Told her about the new 15 mcg dose. Explained the copy card and trial offer which she looked at closely. She checked and said she have 5 of them as well as plenty of OxyContin and intermezzo cards. I discussed OxyContin patient types and conversions from oxycodone and dosing flexibility. She said they fill a good amount of it. Told Lauren about intermezzo indication, dosing and limitations of use. Lauren said she didn't know if they have dispensed it.
PPLPMDL0020000001	Cleveland	OH	44115	1/2/2014	Reviewed OxyContin Q12h flexible dosing strengths and Butrans for those LorTab failures requiring around the clock analgesia. Said Ok and rarely prescribes any CII's
PPLPMDL0020000001	Garfield Hts	OH	44125	1/2/2014	Quick OxyContin reminder Q12h, 7tablet strengths along with Butrans for those tramadol failures requiring around the clock analgesia
PPLPMDL0020000001	Cleveland	OH	44113	1/2/2014	Reviewed Butrans for those NorCo/LorTab patients requiring around the clock analgesia, also OxyContin Q12h and 7tablet strengths, Said Ok and is always looking for new Butrans patients, and will not RX any CII's
PPLPMDL0020000001	Akron	OH	44305	1/2/2014	Asked dr if he had patients that are taking NSAIDs around the clock? Dr said he has many of them. I asked when he makes the decision to move to another product? Dr said when the patient says its not working well enough. I told dr what the down side would be to using Butrans 5mcg dose for those types of patients with chronic pain? Dr said he really likes Butrans and doesn't remember using it for a patient not already on a short acting product. I showed him to how initiate a non opioid experienced patient. Dr said it makes sense. I told him about OxyContin dosing flexibility, when to start it and how to convert for a Percocet patient and asked him to use more often. I asked dr to use the copy cards for both products as the expire soon.
PPLPMDL0020000001	Akron	OH	44312	1/3/2014	Dr asked me if I have been seeing his Butrans prescriptions? I told dr that I'm really happy that he has found the right patients for the product. Dr said the last couple of patients really are doing well on Butrans and very happy. I told dr to continue to use it for those patients on vicoden who need a dose adjustment and to use the copy cards and trial cards for those private prescription patients. Dr said he's happy with the fact that he has found success with it. I reviewed with dr how he needs to prescribe OxyContin for those patients already on Percocet. Dr said it makes sense and will do it.
PPLPMDL0020000001	Cleveland	OH	44113	1/3/2014	Reviewed Butrans Patient experience program. Asked for those appropriate patients requiring around the clock ER analgesia. Said Ok and will continue to find new starts
PPLPMDL0020000001	Cleveland	OH	44113	1/3/2014	Quick OxyContin reminder (7 tablet strengths, Q12h, Savings Cards along with Butrans for those patients requiring around the clock analgesia, Said Ok will consider for appropriate patients<font color=blue><b>CHUDAKOB's query on 01/08/2014</b></font>She said OK for OxyContin as well<font color=green><b>GUTKOMA's response on 01/09/2014</b></font>Yes<font color=blue><b>CHUDAKOB added notes on 01/09/2014</b></font>That is interesting. I thought she would never prescribe OxyContin.
PPLPMDL0020000001	Uniontown	OH	44685	1/3/2014	Dr saw me up front and said that he went to give out a Butrans copy card this morning and said there is only one left. I told dr that's great to hear and dr said that the patient had been taking 4-5 vicoden a day and said that Butrans sounded good to the patient. I asked which dose he started on and dr said 10mcg. I told dr that that's great and to also continue using OxyContin for those patients already on IR oxycodone. Dr said he likes it because Percocet being used for an extended period of time just doesn't make sense. I told dr that I'm glad to know he has that philosophy.
PPLPMDL0020000001	Cleveland	OH	44113	1/3/2014	Reviewed OxyContin and Butrans with Justin-RPH, no new info learned
PPLPMDL0020000001	Uniontown	OH	44685	1/3/2014	Quick hello in lunch room as he had a cancellation. Dr said his patients on Butrans are doing well and he saw one last week after Christmas. I asked him what dose the patient is on and he said he thinks he started on 5mcg then titrated to 20mcg which he thinks is the best dose. Dr said the patient doesn't need to take any more breakthrough medicines. I asked dr if he would continue to identify similar oatient types for future starts and he said

PPLPMDL0020000001	Cleveland	OH	44113	1/3/2014	Reviewed OxyContin Q12h, 7tablet strengths and savings cards with Shen/Dale. Also reminded of Butrans for those patients requiring around the clock analgesia
PPLPMDL0020000001	Cleveland	OH	44113	1/3/2014	Visited Pain/Anes Dept. Reviewed OxyContin Q12h, 7tablet strengths and Savings cards, along with Butrans for those patients requiring around the clock analgesia. with Dale and Shen.
	Akron	OH	44319	1/3/2014	Dr came into office after rounding at hospital and I told dr that I was there to keep OxyContin and Butrans in the front of his mind. I asked him if he would reevaluate his patients already on IR oxycodone for possible conversion to OxyContin? Dr said he has no issue using it and that usually when he writes it. I told him that he wanted me to remind him of Butrans and showed him the Kathy profile. I asked him if it made sense to start Butrans for a patient like her and dr said it does he just need to remember it. I told dr to prescribe it and allow Butrans to speak for himself clinically. Dr said ok.
PPLPMDL0020000001	Cleveland	OH	44113	1/3/2014	Reviewed OxyContin Q12h, 7tablet strengths and Savings Cards, along with Butrans for those patients requiring around the clock analgesia, Said Ok and is prescribing on the Ortho floor, Also Working with Daoud patients post Injection
PPLPMDL0020000001	Cleveland	OH	44113	1/3/2014	Reviewed Butrans for those LorTab failures requiring around the clock analgesia, said Ok. Booked lunch appt
PPLPMDL0020000001	Akron	OH	44312	1/6/2014	Dr was telling me about his most recent patient his started on Butrans who was taking about 4-5 Percocet a day. Dr said the patient in on her 4th week of Butrans and is doing great. I asked dr if he ever bought of OxyContin for that patient? Dr said no because she didn't like how Percocet was making her feel. I told him I get it and asked him if it makes sense if the patient tolerates IR oxycodone to switch to OxyContin if a dose adjustment is necessary? Dr said it does. I showed him the profile and conversions. I discussed with dr the appropriate patient identification with Butrans and asked for his ultram and vicoden business when those patients need an adjustment. Dr said he just refilled a 10mcg Butrans for a patient this morning who came from vicoden. Closed for both products and asked for his intermezzo business.
PPLPMDL0020000001	Stow	OH	44224	1/6/2014	Spoke to Judy the office manager and Dr Balter about the patient not getting approval from Aetna Med D for his OxyContin that he was on prior to getting Aetna coverage. I had him and Judy explain the situation and I gave them the Aetna piece for commercial which has phone numbers to authorization. I told them the coverage and persuaded them to call Aetna. Dr said the home office is aware and is working on it because the patient dr said OxyContin is providing good relief for the patient and doesn't want to have to switch medicines. I told dr I would help relay information from the pharmacy and even have them call him to help. Dr said thanks and it would
PPLPMDL0020000001	Fairlawn	OH	44333	1/6/2014	Quick hello to dr in hallway and told him to continue prescribing OxyContin for his patients especially for his patients already on oxycodone. Dr said yes he does use a lot of it and said he has had some issues already is year getting it covered. I asked him which plans and he said he doesn't remember but said he thinks one was anthem. I asked commercial or med d and he said he couldn't remember. I told him I would check with Linda the office manager. I told dr to also continue identifying patients needing dose adjustments on Ultram and vicoden and use Butrans for those patients. Dr said he likes Butrans. Nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44195	1/6/2014	Requested appt. to discuss Butrans/OxyContin, Dr. said she only had 1 patient on Butrans, and have discontinued along with all opioids.<font color=blue><b>CHUDAKOB's query on 01/15/2014</b></font>Discontinued all opioids for the patient or taking all patients off opioids:<font color=green><b>GUTKOMA's response on 01/15/2014</b></font>"She will probably discontinue Butrans patient and Rarely uses opioid<font color=blue><b>CHUDAKOB's query on 01/16/2014</b></font>What is she going to do with her pain patients?<font color=green><b>GUTKOMA's response on 01/16/2014</b></font>Refer to pain management, in addition, Recent Data supports her decline in prescribing opioids<font color=blue><b>CHUDAKOB added notes on 01/19/2014</b></font>That makes sense. Thanks!
PPLPMDL0020000001	Cleveland	OH	44195	1/6/2014	Visited Anes/Pain, Neuro depts. C-25, Requested appt. with Anne and Dr. Bamford, Reviewed OxyContin/Butrans along with OxyContin savings card for Pain mgmnt. Requested Fellows in-service, Butrans Initiation/Titration
PPLPMDL0020000001	Cleveland	OH	44195	1/6/2014	Visited Anes/Pain, Neuro depts. C-25, C-21 Requested appt. with Anne and Dr. Bamford, Reviewed OxyContin/Butrans along with OxyContin savings card for Pain mgmnt. Requested Fellows in-service, Butrans Initiation/Titration guides
PPLPMDL0020000001	Akron	OH	44312	1/6/2014	R came in late to lunch as he just got back from rounding at akron city. Dr. said that the last patient he started on Butrans was back in for follow up last week and is doing great. Dr said the patient is really liking the pain relief Butrans is providing and wants to stay with Butrans. I told dr that's great and told him to make sure to titrate if necessary and the steady state is 72 hours. I asked dr to think of more patient like this one who may be in a similar place with their current pain medicine. Dr said he will and is happy to see positive results.
PPLPMDL0020000001	Akron	OH	44312	1/6/2014	Reviewed Maggie profile with dr and asked him his thoughts. Dr said he thinks he would have started another product soon. I asked if it makes sense to place the patient on OxyContin and dr said it does. I asked him if he has patient similar to Maggie and dr said he's sure he does. I asked him to find those patients and reviewed conversions and titration with dose flexibility review. Dr said he will keep it in mind. I asked him for another crack at Butrans and if he has patients who hit the profile for moderate to severe chronic pain? Dr said again he probably does and knows he needs to get them sooner than later. I told dr the ultram patient is ideal who needs a dose adjustment. Dr agreed and said he will try. Discussed intermezzo dosing, limitations of use and if he would try it out and he said ok.
PPLPMDL0020000001	akron	OH	44333	1/6/2014	Discussion through front window and dr asked me what's new. I told him about the hydrocodone insight and that he's to help to change that statistic and use more Butrans for patients failing on ultram or vicoden. I told him when he's ready to refill those short acting medicines, take a minute and evaluate if the patient is right for Butrans? Dr said he knows he can use it more and said he will in 2014. I also told him that the path of least resistance with OxyContin is for patients already on Percocet and its a 1:1 conversion. Dr said that's a good reminder. Nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44195	1/6/2014	Reminded of OxyContin Q12h, 7tablet strengths along with Butrans for those patients requiring around the clock analgesia, Reviewed OxyContin Patient Essential kits, Said she will share with other clinicians
PPLPMDL0020000001	Cleveland Hts	OH	44118	1/6/2014	Reviewed OxyContin Q12h, 7tablet strengths and savings cards, along with Butrans for those Tramadol failures requiring around the clock analgesia. Said Ok, nothing new learned
PPLPMDL0020000001	Cleveland	OH	44195	1/6/2014	Quick reminder, OxyContin Q12h, 7tablet strengths. Butrans for those patients requiring around the clock analgesia. Said Ok, will consider
PPLPMDL0020000001	Fairlawn	OH	44333	1/6/2014	Spoke to sue about her dispensing of Butrans and OxyContin. Sue said she just filled a Butrans 10mcg for dr Froud which was a refill and has a OxyContin prescription for a patient of dr Balters who just switched to Aetna Medicare D on January 1 and she will not approve it. Sue said the office is working on it and any help I can provide would be great. I looked and told her that Aetna commercial is covered tier 2 but not seeing coverage on Aetna Medicare. Sue said the issue is that the patients has been on OxyContin for a while and had no problems with the old plan. I told Sue I would look into it.
PPLPMDL0020000001	Akron	OH	44333	1/6/2014	Dana told me that she wrote a Butrans last week for a patient in pain on vicoden. I asked why Butrans and she told me that she didn't want to give more vicoden or move to Percocet and the patient was willing to try a patch. I told her that's great to hear and not to forget about patients also on tramadol that need a dose adjustment. I told her to keep OxyContin in mind as well for those patients already on Percocet. Dana said ok and thanks.
PPLPMDL0020000001	Cleveland	OH	44113	1/7/2014	Reviewed Butrans for those patients requiring around the clock analgesia and OxyContin Q12h, 7 tablet strengths. Said she is always presenting Butrans to her patients, struggles with acceptance but will continue to educate appropriate patients
PPLPMDL0020000001	Cleveland	OH	44113	1/7/2014	Reviewed Butrans for those patients requiring around the clock analgesia, who are failing on LorTab/Tramadol, She agreed and said is always looking for appropriate patients. OxyContin Q12h 7tablet strengths and Savings
PPLPMDL0020000001	Cleveland	OH	44113	1/7/2014	Quick OxyContin reminder, Q12h, 7 tablet strengths, savings cards, along with Butrans for those patients requiring around the clock analgesia, Said OK will consider, nothing learned
PPLPMDL0020000001	Cleveland	OH	44113	1/7/2014	Reviewed Butrans for those patients requiring around the clock analgesia who are not adequately controlled on LorTab, said Ok and is always looking for appropriate Butrans starts. OxyContin Q12h, 7tablet strengths, said he will keep in mind but rarely prescribes any CII's
PPLPMDL0020000001	Stow	OH	44224	1/7/2014	Dr had two medical students with him today and I discussed all products with all of them. I spoke with dr about his past experience with Butrans and where he has placed it mostly. Dr said he has had really good experience with it and most of his patients were on vicoden and Percocet. I asked dr if he has patients on tramadol and if he usually moves from ultram to vicoden then to Percocet? Dr said most of the time yes. I asked it makes sense to use after tramadol and what the clinical benefit is from going from one IR to another IR opioid if the patient is most likely in chronic pain? Dr said it makes sense to use for the tramadol patient and dr said that he had found it challenging to get vicoden and Percocet patients to buy into using a patch. I told dr I'm glad to hear that and reviewed the Scott patient type. Discussed OxyContin patient identification and Percocet. Conversions and copy cards. Also discussed intermezzo patient types, insurance plans and limitations of use. Dr said he really likes it but is too expensive so he ends up having to go with options that he believes are not as good for sleep maintenance. I told dr to keep trying.
PPLPMDL0020000001	Stow	OH	44224	1/7/2014	Dr started off by asking about intermezzo. Dr asked if insurance coverage has gotten any better because he likes the product but his patients can't get it covered. I asked him what he likes about it? Dr said its the only medicine for sleep maintenance and Ambien doesn't do the job but said that's what his patients want because its cheap. I explained that Caresource will be an area of least resistance and if he has any? Dr said he does have some and that's good to know. Dr asked if there are still samples and I said no but patios can get 5 free pills plus \$45 savings with copy card. Dr said ok. I discussed OxyContin and attempted to discuss his patients already on IR oxycodone. I asked him if he has any his refills each month? Dr said maybe a few. I told dr to focus on the few who are and may end an adjustment. Discussed conversions and dosing for OxyContin and ER vs IR oxycodone. Dr said it makes sense and will look into it. Discussed patient types for Butrans and specificity for identifying the right patient. I asked dr if he writes tramadol? Dr said he does. I asked him if he has ever adjusted the dose of it or been refilling it for a long time? Dr said yes. I explained the Scott profile and the possible solution with Butrans for those patients. Explained schedule 3, 7 day transdermal patch, efficacy, safety and proper initiation. Dr said he likes the sound of it and said he has refilled one form another dr. I told him he needs to gain his own clinic
PPLPMDL0020000001	Hudson	OH	44236	1/7/2014	Spoke to dr over lunch about OxyContin and asked him if it makes sense to take a patient already on IR oxycodone who is uncontrolled or needs a dose adjustment and place them on q12 oxycodone? Dr said it does. I asked him if he has patients that meet that description? Dr said he does and is trying to not write too many opioids. Dr said the existing patients he has he will look to use more OxyContin if they are not candidates for surgery or referral to pain management. Discussed Butrans and asked him why he hasn't used it? Dr said he doesn't know. I told him to take his Percocet and vicoden patients out of the equation to start and focus on Ultram. Discussed Scott profile and told him to identify a patient and just try it. Dr said ok.
PPLPMDL0020000001	Westlake	OH	44145	1/8/2014	Talked about those patients of his that are currently being treated with short acting oxycodone. Asked if they were come back for a reassessment and meet the OxyContin criteria if he would convert them to OxyContin. Dr said yes, that he doesn't see to many Percocet patients....we discussed but he had some, dr said yes. Reminded him about butrans that It was a 7 day transdermal patch schedule 3.
PPLPMDL0020000001	Lakewood	OH	44107	1/8/2014	Dr left. Spoke to the nurse and office manager. She said she has worked on a few prior auths for butans on caresource and the patient was started on the ten mcg over the holiday. I asked if anyone in the office hands out the coupons and she said they do and that the dr tends to forget. I reviewed the coupons and managed care.
PPLPMDL0020000001	Westlake	OH	44145	1/8/2014	Follow up- mentioned she hasn't tried Butrans yet and asked her what is her hesitation for writing the product? She said she hasn't seen the right typenand mentioned that dr kabbarra is writing it. I gave her the Scott profile. I asked her if she has Tramadol profile, she said some. Reviewed Scott profile. She asked about dosing...reviewed the titration guide and abuse potential. I asked her what would be her biggest concern writing this product and she said managed care. we reviewed coverage. And I went back to how to dose it and the reported side effects from the naive study. I asked her where she felt comfortable trying Butrans for the appropriate patient type. She thought maybe after vikodin. Told her I would follow up next week. Quick OxyContin review on delivery system.
PPLPMDL0020000001	Akron	OH	44320	1/8/2014	I told dr that we were going to discuss weeding out seta in patients who would not be candidates for Butrans. I asked her which IR opioids she sees most in her practice? Dr said about the same amount of vicoden and Percocet. I asked her if she sees patients on fentanyl? Dr said not many. I told her per the opioid experienced trial those patients were part of the exclusion criteria. I told her patients with prn pain, intermittent pain are not good candidates. I told her that her vicoden patients are better suited for Butrans than Percocet because patients already on oxycodone may be better suited for OxyContin than Butrans. I told her to focus on those hydrocodone patients for Butrans who need a dose adjustment or complain about their current therapy. Dr agreed that it makes sense. I told her it seems like there is a lot of opportunity for her to write more Butrans. Dr agreed that she would try. Dr asked about any new insurance coverages. I told her about Aetna commercial, and reviewed plans specific to her practice.
PPLPMDL0020000001	Akron	OH	44313	1/8/2014	Dr told me that he wrote his first Butrans prescription but the patient could not tolerate it. I asked what happened and dr said the patient had bad skin irritation which caused him to discontinue it. I told dr that there is an incidence of it because its a transdermal patch. I told dr how important it is for patients to have proper skin prep. I told dr that the skin needs to just be clean and dr and not to use soaps, lotions or oils and even rubbing alcohol prior to application. I also told him about patients clipping hair on application sites instead of shaving it. Dr said he will keep trying. I asked dr what the patient was on and he said he not sure but thinks it was vicoden. I told dr that ultram and vicoden patients are good candidates. I asked dr to continue using OxyContin for patients already on IR oxycodone and if it makes sense if they need a dose adjustment? Dr said yes and he
PPLPMDL0020000001	Cleveland	OH	44106	1/8/2014	Reviewed OxyContin/Butrans with Marge, nothing new learned

PPLPMDL0020000001	Westlake	OH	44145	1/8/2014	Spoke to the nurses about both products. The nurses asked about how long to wear the patch and 7 days was the answer. Also reviewed patch placement and the managed care and coupons. Dr was not available to meet with today.
	Akron	OH	44320	1/8/2014	Spoke with dr about her history with OxyContin and where she has used it. Dr said she tris not to use it much anymore but when she has its been when patients complain about taking all the pills. I asked her if that is Percocet? Dr said yes. I asked her if she still refills or writes new Percocet? Dr said yes. I told her she is already writing the oxycodone molecule but in a different delivery system than OxyContin but both are oxycodone molecules. Dr said she knows but she tries to follow what the office policy is. I asked her what it is and dr never really told me but said she will try to use it. I asked her if it makes sense? She said it does. I told her I would follow up on that discussion. I reviewed the Butrans dosing and Schudle three discussion. I told her to focus on patients on vicoden and tramadol and reviewed profiles. I asked her if she uses ultram and vicoden which she said she did. I told her that those patients are good candidates for Butrans if they are in pain around the clock and need a dose adjustment. Dr said ok and will try harder.
PPLPMDL0020000001	Rocky river	OH	44116	1/8/2014	Window, discussed what Butrans is and it is a schedule 3. Handed her the Scott profile to look at and asked her if her the patients are uncontrolled with their pain and for the criteria to consider Butrans.
PPLPMDL0020000001	Westlake	OH	44145	1/8/2014	Asked dr to review his current Percocet patients, if they were appropriate for OxyContin and met the criteria to convert them. Left Butrans Scott profile, asked him take a look at the information and I'd review next time with him why butrans might be an option.
	Westlake	OH	44145	1/8/2014	Spoke to dr about assessment appointments and those currently on a short acting OxyCodone molecule. I asked her if it made sense that those patients Currently being dosed atc for an extended period of time to be converted to an extended release delivery system like OxyContin as an option. S e said yes. I asked if she had tried anyone on Butrans lately, she said not. She said she was tired of writing vikoden and would be willing to switch them to Butrans if patients were not satisfied with their current vikodin therapy and met the criteria to be on Butrans. Left her Scott profile and David profile.
PPLPMDL0020000001	Akron	OH	44303	1/8/2014	Spoke to Rod the pharmacist about Butrans and OxyContin. Rod said he has not seen any new Butrans but is keeping the ones he has and is refilling them. I asked him if he if familiar with the insurance coverage? Rod said no so I reviewed all formulary status plans and copay and trial cards. Rod asked about cash patients using cards. I told him they cannot use the trial card but can use the copay card for up to \$50 off. Rod said that's a good thing. Discussed OxyContin dosing and titrations through doses and asked him if he would recommend OxyContin for patients continuing to get Percocet refilled? Rod said he can do that.
	Akron	OH	44320	1/8/2014	I asked dr if he currently has patients on vicoden? Dr said he dos and I asked him what he is currently doing for those patients who need a dose adjustment? Dr said it depends but usually he will titrate them but doesn't like writing it. I told him if he doesn't like writing it then write the schedule 3, 7 day transdermal patch Butrans. I told dr that his patient selection needs to be very specific and when a hydrocodone patients needs an adjustment to start Butrans. Dr said ok he will. I told him to also initiate OxyContin for those patients he continues to refill Percocet for. Dr said ok but will try harder with Butrans.
PPLPMDL0020000001	Garfield Hts	OH	44125	1/8/2014	Quick Butrans reminder for those patients requiring around the clock analgesia,Savings cards, said he has 1 patient on, had to increase dose and waiting to hear back for results. Reviewed OxyContin 7tablet strengths, Q12h
PPLPMDL0020000001	Cleveland	OH	44106	1/8/2014	Visited Anes/Pain and Oncology depts, Left Butrans Initiation/Titration guides along with OxyContin PI, Requested Lunch Anes/Pain appt with Terrah
PPLPMDL0020000001	Cleveland	OH	44104	1/8/2014	Quick OxyContin reminder Q12h, 7 tablet strengths,Dr. said ok will discuss further at confirmed lunch
	Akron	OH	44333	1/8/2014	Spoke with dr Vucetic and Elise Leanne about Butrans and OxyContin. Dr said they tried to prescribe Butrans a number of times today. I asked why he just said that there were three patients and one patient just had too many piou on board and needed to be tapered down before Butrans would be appropriate. Dr said despite his best efforts, the other two patients just didn't want to wear a patch. I told dr he's usually very good at discussing Butrans effectively with his patients and get them to try it. Dr said these two patients were both in their 40's and didn't want to wear a patch at work. I asked him if he was going to use OxyContin for his patients already on Percocet and he said he has been using more of it lately. I asked for continued support.
PPLPMDL0020000001	Cleveland	OH	44104	1/9/2014	Saw Dr. in hallway, reminded of Butrans for those patients requiring around the clock analgesia, Said Ok and will continue to look for new appropriate patients
PPLPMDL0020000001	Cleveland	OH	44104	1/9/2014	Reviewed OxyContin Q12h, 7tablet strengths along with Butrans for those Tramadol failures requiring around the clock, Dr. agreed those are appropriate patients, once they are on the Short Acting to hard to convince to start on Butrans, Dr said she will continue to find appropriate patients
	Cleveland	OH	44104	1/9/2014	Reviewed OxyContin Q12h, 7tablet strengths along with Butrans for those Tramadol failures requiring around the clock, Dr. agreed those are appropriate patients, but practicing Interventional Cardiology she rarely treats pain long term, but will consider if appropriate
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	1/9/2014	I reviewed the opioid experienced trial with dr. Discussed all key points and asked him his thoughts. Dr said he agrees and its good to hear about patients included in the trial and those excluded. Dr said that he doesn't use fentanyl but has many patients on hydrocodone and ultram. Dr said he has seen good pain score reduction and for the most part his patients are happy with it. Discussed more about patient type selection and reviewed Scott and nancy. Dr said he will continue to prescribe new Butrans and refill as long as patients see results. Nothing else learned.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	1/9/2014	Followed up with dr about using OxyContin as his go to ER opioid choice. I explained the dosing flexibility and the reformation by using the approved piece. Told dr about the potential \$90 savings and asked him to use hem more often. Dr said he tries but had lots of patients that aren't eligible. I reminded him about thinking of Butrans as hi schedule 3 ER opioid option for one on vicoden who need a dose adjustment. Dr said he still probably won't use it. I attempted to explain the product to him discussing parity types.
	Akron	OH	44312	1/9/2014	Donna called me this morning to ask about a patient taking a copay card to the pharmacy and the pharmacy not accepting it. I asked her if it was private prescription insurance patient. Donna said it is a Caresource patient. I told Donna about how no federally funded programs like Caresource accept cards. I explained the PA to Donna and she said they would work on it. Went to office and saw Donna and dr McRoberts who prescribed Butrans. Dr said they got it approved and I was very helpful in making sure the patient got the medicine. I asked dr about the patient and why he thought Butrans? Dr said the patient had been on vicoden for a long time and thought it would work well. Dr said he thinks he started the 10mcg. I reminded dr about titration and to make sure to not immediately is notice vicoden. Dr said he's not but will begin to taper the vicoden down. I asked dr for continued support.<font color=blue><b>CHUDAKOB added notes on 01/16/2014</b></font>Nice job Cliff!
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	1/9/2014	Short conversation as he said he had lots of charts to complete before he starts his afternoon. I told dr that when using Butrans, the patient type selection is vitally important. I reviewed the inclusion and exclusion criteria for Butrans and told him that leaves mostly patients on ultram, hydrocodone and Percocet. Dr said he doesn't have many patients on Percocet. I told dr that's fine and to focus on oatiens needing an adjustment on ultram and hydrocodone. Reviewed appropriate starting doses, titration and insurance overage. Dr said he has had good success and will try to write more because he thinks its a good product.
PPLPMDL0020000001	Euclid	OH	44117	1/9/2014	Dr M not in, Dr Demico already left. Spoke with Jennifer. Discussed & left urine screen panel; when drs write Butrans, depending on lab: they must ask for Buprenorphine results. Left OTC visual aid, Senokot. Left packet of info for dr d & Butrans doser, as he misplaced previous one I gave him. D in FRI 9a-12n. Jennifer says don't leave savings cards for either product as drs don't remember to hand out.
PPLPMDL0020000001	Cleveland	OH	44104	1/9/2014	Discussed OxyContin Q12h, 7 tablet strengths along with Butrans for those Tramadol failures who require around the clock analgesia. Said he will consider
PPLPMDL0020000001	Norton	OH	44203	1/10/2014	Scheduled a lunch, need to find out why they don't write Butrans and what they think of OxyContin. Spoke to Pam the office manager today. They got a new doctor, will enter him into computer today.
PPLPMDL0020000001	Cleveland	OH	44104	1/10/2014	Reviewed OxyContin/Butrans, with Hakeem, opening up another pharmacy on Payne avenue, no new info learned
PPLPMDL0020000001	Cleveland	OH	44127	1/10/2014	Reviewed OxyContin Q12h, 7tablet strengths along with Butrans for those Tramadol failures requiring around the clock, Dr. agreed those are appropriate patients and will keep in mind
PPLPMDL0020000001	Barberton	OH	44203	1/10/2014	I said be reminder today...focused in the Scott profile. Asked for appropriate patients to cover them to Butrans. I asked if he had any problems doing this and he said no. L
PPLPMDL0020000001	Akron	OH	44308	1/10/2014	MSL email communication with Ms. Tonni to provide study updates and inquire about options for next MSL visit. PRA visit pending in February, MSL may join.
PPLPMDL0020000001	Norton	OH	44203	1/10/2014	Spoke to Rebecca and Julie about Butrans. Left patient profile for np who changed her name when she got married.<font color=blue><b>CHUDAKOB's query on 01/15/2014</b></font>Who are Rebecca and Julie and what did you discuss with them about Butrans?<font color=green><b>BARTOLI's response on 01/15/2014</b></font>They are the nurses that I met. And yes I scheduled a lunch and discuss Butrans with them.<font color=blue><b>CHUDAKOB added notes on 01/16/2014</b></font>OK. Thanks! Your call notes should include not just that you did discuss, but what you discussed on the call.
PPLPMDL0020000001	Norton	OH	44203	1/10/2014	Spoke to Pam the office manager and she told me there is a new dr I lodi. Left Butrans information and coupons.<font color=blue><b>CHUDAKOB's query on 01/15/2014</b></font>Lisa, was there a product discussion? It only looks like you left information, and in the product presented section it says OxyContin? Can you please clarify?<font color=green><b>BARTOLI's response on 01/15/2014</b></font>Yes, I spoke the office manager regarding OxyContin. I got out the product name, dosage and I wanted to talk to the dr about the molecule and ts delivery system. The manager did not want to hear anything further about the product because she said she has no involvement on product decisions and the product discussion stopped.<font color=blue><b>CHUDAKOB added notes on 01/16/2014</b></font>OK. That is at least a better call note. I now know what you discussed and what happened on the call. Thank you!
PPLPMDL0020000001	Akron	OH	44312	1/10/2014	Caught dr in a office meeting and dr told me that she is still thinking of Butrans and may have a patient next week. I told her that she needs to think about it for those patients coming in on tramadol and need a dose adjustment. Dr said ok and to come back on Thursday next week to discuss more in depth.
PPLPMDL0020000001	Akron	OH	44312	1/10/2014	Hello at window and asked him if he has patients that are currently on Percocet? Dr said he dos but not many. I asked him if he has any of those patients that have had multiple refills and still in pain around the clock? Dr said he knows about using OxyContin. Dr asked me about conversions. I told him that Percocet to OxyContin is a 1:1 conversions and showed him the profiles. Dr said ok and will try. Told dr to continue using Butrans for those Patients on ultram who need a dose adjustment.
PPLPMDL0020000001	Tallmadge	OH	44278	1/10/2014	Spoke with Aubrey the pharmacist about Butrans and OxyContin. I told Aubrey about patients who are good candidates for Butrans and asked her if she has seen any of them being switches to Butrans? Aubrey said that they have been filling more Butrans recently and from what she remembers many of them were coming from vicoden or Norco. I told Aubrey that's great and explained the patch make up and application sites. Discussed copay cards and trial offer. I asked her if they are still filling OxyContin? She said they are and have all doses in stock. I reviewed copay cards.
PPLPMDL0020000001	Cleveland	OH	44109	1/10/2014	Reviewed OxyContin/Butrans with Mana RPH, still seeing some Butrans from Torres and Nickels, nothing else learned
PPLPMDL0020000001	Munroe Falls	OH	44262	1/10/2014	Switched dr this quarter to an OxyContin core. I spoke to what we have spoken about as a district about using more of a scientific approach to OxyContin. I discussed OxyContin and IR oxycodone and the delivery systems. Spoke about how OxyContin is a single entity opioid. Discussed OxyContin half life and steady state and the significance of it with titration every 1-2 days. Dr said she was happy for the science lesson and was a good refresher. I asked her to take patients already on IR oxycodone who need an adjustment and move them to the q12 oxycodone. Dr said She will. Reviewed Butrans dosing and patient profiles and told her to use it for her patients who need dose adjustments on ultram.
PPLPMDL0020000001	Cleveland	OH	44109	1/10/2014	Visited PMR/IM depts left Butrans Initiation/Titration guide along with OxyContin PI
PPLPMDL0020000001	Cleveland	OH	44127	1/10/2014	Reviewed Butrans for those patients who have failed on Tramadol and are requiring around the clock analgesia along with OxyContin Q12h and 7tablet strengths, said Ok will consider, Asked Josie for assistance in PA process
PPLPMDL0020000001	Brooklyn	OH	44144	1/10/2014	Quick OxyContin reminder Q12h, 7tablet strengths along with Butrans for those patients requiring around the clock analgesia, Said Ok will consider. Booked lunch appt
	Akron	OH	44310	1/10/2014	Short conversation in his lab and followed up from the last call. I told dr he seemed a little frustrated when it comes to treating patients for pain. Dr said he wasn't frustrated at me for dosing my job and said that he understands, where Butrans should be used. Dr said he just needs to decide who he's keeping and who he is referring. I told dr we need to speak about it and he told me he's way behind and will next time. Nothing else
PPLPMDL0020000001	Brooklyn	OH	44144	1/10/2014	Quick review of OxyContin Q12h, 7tablet strengths along with Butrans for those Tramadol failures who require around the clock analgesia, said Ok but really doesnt treat chronic pain, especially at this location (Urgent Care)
PPLPMDL0020000001	Cleveland	OH	44144	1/10/2014	Reviewed OxyContin Q12h, 7tablet strengths along with Butrans for those Tramadol failures requiring around the clock, Dr. agreed and will consider
PPLPMDL0020000001	Barberton	OH	44203	1/10/2014	Dr wasn't available to speak with. Spoke to nurse about butrans and reviewed the initiation guide. She said she doesn't do any education and that she would pass the information to the doctor. She does not handle the p. authorizations.

	Tallmadge	OH	44278	1/10/2014	I led off conversation with the hydrocodone insight. I asked his thoughts and he said he believes it. I asked him why he thinks that is and he said mostly because its easier to refill a short acting medication. I asked r what he's going to do to help change that statistic? Dr said he had used Butrans and not everyone needs a ER opioid. I told him I completely agree and asked him which ones in his opinion do? Dr said the ones who have a chronic pain condition and have severe pain every day. I told him that's why he needs to use Butrans for those patients and outlined the viconden patient profile. Dr said he gets it and will try to use more in 2014. I told him its in his computer and reminded of copy cards. Told dr to also not forget about OxyContin for those patients of his already on oxycodone who need a dose adjustment. Dr said ok.
PPLPMDL0020000001	Lakewood	OH	44107	1/13/2014	Saw dr thru window, handed him profiler with initiation information. Also reviewed what schedule it was and how long they were the transdermal Butrans patch. Dr asked about cost, which was reviewed.
PPLPMDL0020000001	Lakewood	OH	44107	1/13/2014	Review David profile. Dr agreed it made sense and said he would write it for the appropriate patients. Dr also agreed that writing OxyContin after Percocet made sense for the appropriate patient type.
	Stow	OH	44224	1/13/2014	Caught Abby in back hallway and gave her a Butrans message. I showed her the Scott profile and asked her if she has any patients already on tramadol? Abby said she does but most are on viconden and Percocet. I told her that's ok because she can use Butrans for patients on tramadol or viconden who need a dose adjustment. Abby said thanks for the message and asked about any new insurance coverages. I told her Aetna is now coverages
PPLPMDL0020000001					2nd tier for commercial and told her not remember Caresource and BWC coverage.
PPLPMDL0020000001	LAKEWOOD	OH	44107	1/13/2014	Giant eagle said they are ordering hydrocodone any longer. Discussed OxyContin, they don't have schedule 2 products on shelves. Patients can get Butrans.
PPLPMDL0020000001	Lakewood	OH	44107	1/13/2014	Stand up. I asked dr when he reasses his Percocet patients if they were appropriate for a different delivery system. Asked him if my request to convert those patients on short acting oxycodone to OxyContin if appropriate made any sense to him. He said yes and that's what he already does.
	Lakewood	OH	44107	1/13/2014	Lunch. Dr said she writes most of her oxycontin in the nursing home setting for more severe chronic patients. Dr said she doesn't write much schedule 2 products unless they are severe pain. We reviewed the profiles of the core visual aid. I said George comes to mind them, she said yes. I said that was great and supported the profile if appropriate and showed her the maggie profile. I said if a patient were appropriate why not keep OxyContin as a consideration? She said maybe. I said if someone were already on the oxycodone molecule, short acting like Percocet and them needed atc continuous pain would ten OxyContin make sense. She said yes. Discussed Butrans, she said she hasn't gotten comfortable with the product yet. Basic review of Butrans. Did did not commit to trying the product.
PPLPMDL0020000001	Lakewood	OH	44107	1/13/2014	Discussed OxyContin and Butrans basic indication for Kelly he nurse.
PPLPMDL0020000001	Lakewood	OH	44115	1/13/2014	Quick Butrans/OxyContin inquiry, George Rph was running behind couldnt talk, said to stop back
PPLPMDL0020000001	Cleveland	OH	44224	1/13/2014	Spoke to rick the pharmacy technician about Butrans and asked hi. How much he's seeing? Rick said they continue to see about 3-5 a week. I told him that's great and if they have had any issues with insurance coverage?
PPLPMDL0020000001					Rick said he doesn't know but doesn't think they have had any issues.
PPLPMDL0020000001	Lakewood	OH	44107	1/13/2014	Dr didn't have much time- for those patients on a short acting oxycodone not controlled, would you consider converting them to OxyContin if they need atc continuous pain relief and were appropriate? Dr said yes but it depends. Dr said he doesn't like to treat chronic and that he is not using as much schedule 2's. I asked if he was writing any opioids, he said yes but less and less.
PPLPMDL0020000001	Uniontown	OH	44685	1/13/2014	I told dr to continue prescribing OxyContin and asked him if he has any issues lately that I can help with or an successes? Dr said everything is going pretty smoothly except for a few patients changing insurances who are having trouble getting their medicine. I told dr that there was a patient that switched Medicare D plans in the new year and needed a pa on he new plan to continue OxyContin. Dr said he's glad the patient was able to still take it. Dr said its a very difficult to keep up with the plans and coverages. I told dr I supply his home office with all managed care information when they need to refer to something. Dr said thanks
PPLPMDL0020000001	Fairlawn	OH	44333	1/13/2014	Good discussion surrounding OxyContin and Butrans. Talked about OxyContin pharmacokinetics, patient toys and insurance along with conversions. Dr said she typically goes through the short actings first but likes to get patients on ER opioids once she knows the patient is chronic. I asked when that is and she said anywhere from 3-6 months. I asked her to evaluate her patients for it when they need a dose adjustment on Percocet. Butrans schedule 3,7 day patch for moderate to severe pain. Discussed patient profiles, conversions and initiation with titration. Dr said it sounds like a great product and will look to use it.
PPLPMDL0020000001	Cleveland	OH	44195	1/13/2014	Visited Ortho Dept. Left OxyContin PI along with Butrans Initiation/Titration guides requested appt with Dr. Joyce,Krebs,Rosneck, Sferna and Schneider
PPLPMDL0020000001	Cleveland	OH	44195	1/13/2014	Visited Dept. Left OxyContin PI and Butrans Initiation/Titrations guides requested appts with Targeted clinicians
PPLPMDL0020000001	Cleveland	OH	44195	1/13/2014	Visited Tausig ONC dept. Left OxyContin PI and Butrans Initiation/Titration guides for Dr. Sobechs,Rini,Pelley, Moore,Jersan,Guttsel,Davis,Garcia, Fowler, Faiman. Estfan,Budd and Advani
PPLPMDL0020000001	Cleveland	OH	44195	1/13/2014	Visited Rheum. Dept. Left OxyContin PI and Butrans Initiation/Titration guides requested appt with Dr. Deal,Calabrese and Chatterjee
PPLPMDL0020000001	Cleveland	OH	44195	1/13/2014	Visited Rheum/Ortho Depts Left Butrans Initiation/Titration guide and OxyContin PI and requested appts with Targeted clinicians
PPLPMDL0020000001	Akron	OH	44333	1/13/2014	Becky participated in lunch discussion. Becky said that she is completing her masters degree in nursing and until then she will not see patients for pain or write medicines. I discussed with her the OxyContin pharmacokinetics and mechanism of action. Discussed patient profiles and insurance information. Discussed Butrans dosing, conversions, titration, patient profiles and insurance information. Becky said she has the
PPLPMDL0020000001	Mayfield Village	OH	44143	1/13/2014	Lunch. Discussed OxyContin half life of 4.5 hours. Steady state, ability to titrate every 24-36 hrs if needed. OxyContin is PH independent, & what that means for his patients. Please consider for non cancer pain, if patient on oxycodone or Percocet. & may benefit from an extended or controlled release product as OxyContin. Showed q 12h dosing schedule in visual, no well controlled. Studies existing regarding dosing outside of the recommendation, since most of his patients are geriatric, discussed broad Medicare coverage.dr as you know, Butrans, is another option for pain, we discussed last year. What are your concerns, if any? I'm concerned about cost for my Medicare patients. Discussed coverage & moved on to safety & efficacy. Dosing for naive & experienced he had me go through the dosing slider with him 2x. He states he's getting more comfortable with consideration of a few Butrans trials. Showed Patch & disposal unit demo. He promises to start a few patients on Butrans.
PPLPMDL0020000001	Akron	OH	44320	1/13/2014	Saw dr as she came up front to discharge a patient. She asked me if she needed to sign for samples. I told her no because I have OxyContin and Butrans. Dr asked me if I had anything she can look at for Butrans. I gave her a initiation and titration guide. Dr said she will review and to set up a lunch. Nothing else learned.
PPLPMDL0020000001	CLEVELAND	OH	44195	1/13/2014	Visited Pharm. Spoke with tech. Stacy, Troy was busy, No OxyContin savings cards needed, no new info
PPLPMDL0020000001	Lakewood	OH	44107	1/13/2014	Saw dr. Dis uses OxyContin and his patients that might be appropriate for a continuous atc pain option that q12. Dr said he feels that oxycontin is a good product in the right patient. Discussed his intest in trying Butrans for those moderate pain patients needing atc pain relief. We talked about the patient who is currently in vikodin not controlled and needing a new option. Dr said giant eagle today said they are not carrying any hydrocodone products. And that it was going schedule 2 as of Tuesday. Dr asked if I knew, which I did not but called my manager and he was going to look into it. Dr also said that he got the letter to fill out from medical affairs, he said the patient wasn't returning their calls to collect the information.
PPLPMDL0020000001	Euclid	OH	44117	1/13/2014	Met with Helen & med asst Lori. Asked them if all. Payment s are through BWC OHIO. They responded no, some commercial/ cash/ private. Explained how Butrans & OxyContin cards should work. They also stated they DO NOT hand out OTC samples @ this location.( Chiropractor uses same check in desk, as pain/ rehab patients ) dr said he tried to write a Butrans for a patient on 4 Percocet daily (Male Moufawad patent) patient still in pain, Moufawad would not increase Percocet, patient came to dr d to discuss. Dr d gave him Butrans script but Pharmacist would or fill. Pharmacist says patient must be weaned down on Percocet prior to adding Butrans, I responded to dr d that that is correct. Patient should be on 30-80 mg morphine equivalent when starting Butrans dr stated when patient comes back next month, he will try again & let patient know e can have 1 - 2 Percocet daily only with Butrans. Another option for this patient convert to OxyContin q 12 h. Dr behind, needed to get back into patient room, told him I'd follow up next week in Euclid at lunch.
PPLPMDL0020000001	Lakewood	OH	44107	1/13/2014	Saw dr. Asked him what information I could bring about OxyContin today that would be helpful. He asked about managed care which I covered and also covered Butrans. I brought up the start principal of OxyContin of assessing and tailoring. I asked dr when a patient is currently n a short acting oxycodone yet not controlled, wouldn't it make sense to stick with the same molecule, perhaps tailor the dose and q12h with the extended release delivery system for those appropriate with OxyContin. Dr agreed.
PPLPMDL0020000001	Akron	OH	44313	1/13/2014	Allowed to go back and speak with dr in his lab. I used the patient profile Maggie for OxyContin and asked him if he also has patients that are already on oxycodone and may need a dose adjustment? Dr said he does but said that that not all are going to be good of OxyContin. I told dr I totally agree that an ER opioid is not for everyone. I asked him if he has patients that he has refilled 6 times or more for a IR oxycodone? Dr said he probably does. I told dr that's where he needs to focus. Dr said ok. I talked about conversions for OxyContin and Butrans. I reminded dr that he should focus on his patients on tramadol for Butrans initiation.
PPLPMDL0020000001	Fairlawn	OH	44333	1/13/2014	Good discussion surrounding the OxyContin pharmacokinetics. Steady state, half life and delivery system. I asked dr what he thinks about that information and what the significance of it is. Dr said that OxyContin is an ER opioid because of how it releases oxycodone and said he thinks there are layers in the pill that release over time. I told dr that is exactly correct. I asked dr what his algorithm is for treating pain? Dr said he starts with NSAIDs, then ultram, viconden and Percocet. I asked dr why he goes from one IR opioid to another all the way up to Percocet? Dr said not all patients go through that treatment. I asked him what he does after Percocet? Dr said he will go to OxyContin. I asked dr to evaluate patients for OxyContin sooner while already on IR oxycodone. Discussed Butrans and asked him if he has any issues with the medicine or how it works? Dr said no. Dr said he just forgets about it and its expensive. I asked dr where its expensive? Dr said he thinks Caresource and Medicare. I asked dr how he knows that? Dr said he figures it is. I told dr he perception of insurance coverage for Butrans is off. I asked dr which plans are most important and he said Medco and medical mutual. I discussed coverage along with Caresource PA and reviewed trial off and copy cards. I told dr I'm in here almost each month so he doesn't forget about it and will focus on it with him.<font color=blue><b>CHUDAKOB's query on 02/03/2014</b></font>-Cliff, where did you get the information about our delivery system having layers and releasing over time. I am wondering where you saw this?<font color=green><b>REICHCL's response on 02/06/2014</b></font><b>Don't know. I was just going off what the physician said. I guess I should have told him I don't know.</font><font color=blue><b>CHUDAKOB added notes on 02/10/2014</b></font><b>Please be careful in what you say. We do not have any data to explain what our delivery system looks like or how it releases oxycodone. Perhaps another opportunity for an eMERF if the physicians was that curious.
PPLPMDL0020000001	Garfield Hts	OH	44125	1/13/2014	Quick OxyContin reminder Q12h, Tablet strengths, Savings cards along with Butrans for those Tramadol failures requiring around the clock analgesia, Said Ok, was way behind today, booked lunch appt for next week
PPLPMDL0020000001	Akron	OH	44333	1/13/2014	Dr said he is way behind and didn't have time to talk. I told him we need to speak about OxyContin. He asked me what about OxyContin? I told him I wanted to talk with him about what ha doing with his patients on IR oxycodone and when he sees the need to switch to OxyContin? Dr said that conversation will take some time. I told him to switch those patients to OxyContin when they need a dose adjustment. Dr said ok. I told him to continue finding candidates for Butrans especially patients on ultram and viconden also needing a dose adjustment. Dr said ok and to check copy cards which the didn't need.
PPLPMDL0020000001	Mayfield Heights	OH	44124	1/14/2014	Dr C left early. Spoke with med asst Tesla Left OxyContin slim jim, and Butrans marketing piece for both Dr. C and Dr. E. Discussed both options: one in oral, controlled release tablet; the other, a 1 x week transdermal patch.
PPLPMDL0020000001	Mayfield Heights	OH	44124	1/14/2014	Was able to schedule breakfasts in Feb/March.
PPLPMDL0020000001	Mayfield Heights	OH	44124	1/14/2014	Gina across street at Hillcrest. Left packet of info with Butrans dosing slider. OxyContin slim jim. Met with office coordinator, let her know as soon as new Butrans med guides are printed I will drop off, as dr salama & his med assts requested. Discussed Purdue pain mgt kit & left web key for all HCPs. NOTE DR ENGLUK YAP. LEFT PRACTICE. didn't let anyone know where he was going; don't know if he's still in Ohio either.
PPLPMDL0020000001	Cleveland	OH	44113	1/14/2014	Reminded of Butrans for those LorTab failures, reviewed Butrans experience program again, Said she is working on introducing Butrans to all appropriate patients
PPLPMDL0020000001	Cleveland	OH	44113	1/14/2014	Quick reminder on Butrans for those LorTab failures requiring around the clock analgesia, said she is introducing Butrans to the appropriate patients on every visit. Also, OxyContin Q12h
PPLPMDL0020000001	Mayfield Heights	OH	44124	1/14/2014	Spoke with Autumn, as Warren was on phone. Discussed how the Butrans trial/savings and the \$90 off monthly copay for OxyContin are designed to work. Reminded of 4 Butrans strengths. They don't need any savings cards at this time. Nothing new to report since last visit.
PPLPMDL0020000001	Cleveland	OH	44195	1/14/2014	Requested Appt. for OxyContin in-service. Dr. stated he does not prescribe/treat pain
PPLPMDL0020000001	Stow	OH	44224	1/14/2014	Spoke with Mike the pharmacist. I asked him how familiar he is with Butrans? Mike said they see a good amount of it from Western Reserve Pain. I told Mike that's great to hear. I told him about patient types, conversions and copy Cards. I asked him about OxyContin and if they dispense it? Mike said they do not have it in stock. I asked why and he said they don't see prescriptions for it. I asked him if they dispense any schedule 2 medicines and he said not really. Nothing else learned.
PPLPMDL0020000001					



PPLPMDL0020000001	Lyndhurst	OH	44124	1/14/2014	Dr Isakov recently started a BWC patient on Butrans 10 mcg hr. He wanted to know if BWC always requires a prior auth. I told him it would depend on the company the employee is working for. Typically it should not. Discussed ability to titrate after 72 hrs if necessary, also discussed supplemental analgesia (non opioid or short acting opioids) for break through pain, especially the first 72 hours. Dr had 2 medical students. Spent time discussing both products with the students. Another option for pain dr is controlled release OxyContin, which is dosed @ 12 h. Showed detail aid, 8am and 8 pm. Seven doses available, Steady state achieved in 24-35 hours, so titration possible every 1-2 days, dr repeated that he's more likely to use Butrans.
	Mayfield Hts	OH	44124	1/14/2014	Dr Laham asked again about Butrans patient guides to distribute. I told him I'd follow up with Purdue & get back to him. He also wanted to know if I left savings cards, let him know I did. Discussed 15 mcg hr titration dose ( insight) greater dosing flexibility with Butrans. He just hasn't had to titrate to 15 mcg hr yet. OxyContin, ir Percocet insight. If patients actually follow q 6 h dosing schedule, they will have to set alarm @ 2 am each night & take their pain med. A q 12 h controlled release medication, such as OxyContin would be dosed 8 am and 8 pm. So dr, please consider re assessing your Percocet patients & see if they might benefit from conversion to controlled release, long acting product. So moving forward, remember Butrans after 4 Tramadol, when patient needs more analgesia and branded OxyContin controlled release, when short acting or immediate release agent is no longer working.<font color=blue><b>CHUDAKOB's query on 01/31/2014</b></font>Jenny, if a patient is on Percocet, there is no guarantee that they will have to set an alarm at 2AM, or that they wouldn't want to. In addition, 8AM and 8PM dosing of OxyContin is only a suggestion. You have to be very careful that you are not implying that our dosing schedule is "better" in any way shape or form. I know you didn't say better, but the implication is there. Does this make sense?<font color=green><b>BALLIE's response on 02/03/2014</b></font>Got it, makes sense.<font color=blue><b>CHUDAKOB added notes on 02/03/2014</b></font>Thank you Jenny! This is important so please be careful on what you say.
PPLPMDL0020000001	Akron	OH	44312	1/14/2014	Good discussion over lunch about the doctor's experience with Butrans. Dr said that his experience has been positive and said that the patients he has put on it follow exactly what I have been talking about. Dr said he has a number of patients he started on Butrans who were not getting adequate control with tramadol and said that the other have been on vicoden. Dr said that some patients need something for breakthrough and others don't need anything. I reviewed the conversions, titration, and inclusion and exclusion criteria from clinical trials. Asked dr for continued prescriptions of Butrans. Discussed OxyContin indication, dosing, conversions, steady state, titration, and elimination half-life. Discussed Delivery system of OxyContin and asked for his business from patients already on IR oxycodone who need a dose adjustment. I asked dr if he feels comfortable writing OxyContin and he said he has no problem and does when necessary. I asked for more support of the product in the right patients.
PPLPMDL0020000001	Cleveland	OH	44109	1/14/2014	Visited Ctr. Dept. Left OxyContin PI and Butrans Initiation/Titration guides for Dr.'s Baker,Campbell,P.Campbell,Dhillon, Dietz,Corrigan,Geho,Gemechu,Leake Westfall and Zabak
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	1/14/2014	Dr didn't have much time to talk today and I asked him for more OxyContin prescriptions in those patients already on it oxycodone. I discussed steady state, titration and half life. Dr said we will discuss more next time. Told him not to give up on the option of Butrans for patients on vicoden who need a dose adjustment.
PPLPMDL0020000001	Uniontown	OH	44685	1/14/2014	Spoke with Kim the pharmacist and asked if she is seeing any new patients on Butrans? She said maybe one since the new year but said patients are being titrated that have been on it. I told her that's great to hear and discussed steady state and titration along with appropriate starting dose. I reminded her of the trial offer and copy card. Asked about OxyContin and if patients are also being titrated. Kim said those patients tend to be more steady on a particular dose. Discussed patient profiles and dosing structure. I asked if there are any pending pa's for either product and she said no.
PPLPMDL0020000001	Highland Heights	OH	44143	1/14/2014	Lunch. Pain insight. Pain reduction cores, BUP 3015. Went through dosing for opioid naive & experienced. Discussed Morphine equivalency. Ability to titrate in 72 hrs. Supplemental analgesia Discussed. Dr says he tells patients Butrans analgesia should take effect in 3 days. Dr forgot that we have a 15 mcg hr dose, reminded him max dose still 20 mcg hr. we went through sliding doser, ich he says is very helpful. Asked when savings card expire, I responded I have new ones that don't expire til 3/31/2015. He asked for 2 packs. Transitioned to OxyContin. He has about 5 existing patients on OxyContin; which he will continue. However, he will not write any new. This was in response to me telling him about OxyContin essentials kit.
PPLPMDL0020000001	Akron	OH	44312	1/14/2014	Discussed Butrans with Janet and dr Jonsdorf as well as OxyContin. Discussed Butrans dosing, indication, titration, appropriate starting dose and patient profiles. Reviewed copy cards and insurance coverages. Janet said she has not had any patients for it yet but said she plans to start using this year. Janet said that she sees herself using it for parints on vicoden who are still in pain. I told her that's great and reviewed Scott profile.
PPLPMDL0020000001	Cleveland	OH	44114	1/14/2014	Reviewed Butrans for those Tramadol failures requiring around the clock analgesia, along with OxyContin Q12h, 7tablet strengths, Said he had a recent Butrans success, patient was very pleased with the results, said he is always looking for new appropriate Butrans starts.
PPLPMDL0020000001	Akron	OH	44310	1/14/2014	I asked dr if he has had any new Butrans patients in 2014? Dr said he has not but said he went to a pain conference in Columbus recently where the speaking was speaking on opioids and Butrans being one of them. Dr said most information was very positive but said that its too difficult to find a specific morphine equivalent for OARRS. I asked dr if he's concerned with that and he said not really. I told dr to focus on his patients already on vicoden who need a dose adjustment and showed him the Kathy profile. Dr said ok and may have a patient this week.
PPLPMDL0020000001	Richmond Heights	OH	44143	1/14/2014	Too busy to check stocking. Staff pharmacist Mel says they do have Butrans ( no 15 mcg hr dispensed yet); they dispense OxyContin ( no 60, 80 mg ). Discussed product indications, trial & savings both products. Left OxyContin pharmacists guide. Left Butrans NDC code / FPI booklet. Discussed resources available from Purdue including RX patrol.
PPLPMDL0020000001	Brooklyn	OH	44144	1/14/2014	Saw Dr. in hallway. Quick OxyContin reminder, Q12h along with encouraged to use those Savings cards for commercial ins. patients. Said he will keep it in mind
PPLPMDL0020000001	Lyndhurst	OH	44124	1/14/2014	Goal of call was to encourage Dr Kim to utilize OxyContin patient essentials kit. Went through each piece of kit with him. Focused on patient education, and how kit encourages patient to track pain experience and will have specific info written down to share with dr and his nurse. This can save him and his staff time; while also helping the patient. He says he will try to remember to hand them out. Dr can I place these on your desk, so you don't forget? Yes, dr replied. Ok, great, and one more thing. A reminder, you have another option for pain, 1 x week Butrans transdermal system. We've discussed previously that your BWC patients can access Butrans. Ok, I will keep that in mind, dr responded.<font color=blue><b>CHUDAKOB's query on 01/31/2014</b></font>Jenny, Very nice! I really like how you started with the goal. Your next call objective might be a good place to write the "Goal" for the next call. It can be the same goal. For example! GOAL: gain commitment from Dr. to hand out one kit to a patient like Maggie, which we will discuss on the call. One step at a time and you took the first step. I like how you asked to place on his desk. Keep working at it.<font color=green><b>BALLIE's response on 02/03/2014</b></font>Thanks for the advice Barry! I will keep at it!<font color=blue><b>CHUDAKOB closed the query
PPLPMDL0020000001	Cleveland	OH	44144	1/14/2014	Reviewed OxyContin Q12h, 7tablet strengths, Savings cards along with Butrans for those Tramadol failures requiring around the clock analgesia, Said she is treating /seeing more pain patients due to Dr.Hilton's recent retirement, Will consider, struggles with PA's but will keep in mind.
PPLPMDL0020000001	Berea	OH	44017	1/15/2014	Spoke to jasmín the nurse. Reviewed OxyContin and Butrans delivery systems and dosing, she said she would pass the n formation over to the doctor.
PPLPMDL0020000001	Berea	OH	44017	1/15/2014	Saw dr. Asked him what patient type comes to mind when you choose OxyContin? He said usually the older patients that require an extended release product. I said its a q12h remember and that's great. For those patient currently on a short acting OxyCodone molecule that you think it's time to convert them to an extended release option. I'd like to remind you that OxyContin is the same molecule just inthadifferent delivery system. Is this thing that makes sense to you? He said sure. Left him Butrans profile and reminded hi not the strengths available for his new start patients on Butrans.
PPLPMDL0020000001	Cleveland	OH	44112	1/15/2014	Reviewed OxyContin 7Tablet strengths, able to Titrate in 1-2days, Q12h. Also reminded of Butrans for those patients requiring around the clock analgesia, Said She is not treating any new patients, frustrated with pain mgmnt. but will consider for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44109	1/15/2014	Presented OxyContin Q12h, 7tablet strengths along with Butrans for those patients requiring around the clock analgesia, Said in present position (Stroke rehab etc.PMR) not treating chronic pain, but will keep in mind for future appropriate patients
PPLPMDL0020000001	Stow	OH	44224	1/15/2014	Quick hello in stow office. I told dr to continue prescribing OxyContin for his patients already on IR oxycodone and where most of his OxyContin prescriptions are coming from? Dr said many different places and he is usually treating chronic pain like spinal stenosis. I told dr that's good to know and thanks. I reminded dr that he can use OxyContin 10mg for patients on 20mg Percocet who need a dose adjustment. Dr said ok and thanks.
PPLPMDL0020000001	Akron	OH	44320	1/15/2014	Recapped last conversation about patients types for Butrans. I told her that she told me that most of her patients in pain are one one of two products which are vicoden or Percocet. I reviewed the vicoden profile of Butrans and told her to take that extra minute with those types of patients who may need a dose adjustment and write Butrans. I told her that Percocet patients may be more appropriate for OxyContin. I asked her if she has any issues writing OxyContin? Dr said not really but doesn't like to. I asked her if she writes or refills OxyContin? She said yes. I told her that OxyContin is OxyContin in an ER delivery system for 13 hours. I also told her that OxyContin is a single entity opioid. I asked her if that information makes her feel any better about prescribing it? She said she's getting there. I told her I will continue trying with her.
PPLPMDL0020000001	Akron	OH	44320	1/15/2014	Quick messages for Butrans and OxyContin. I told dr that he needs to gain more clinical experience with Butrans and I know there is a lot of opportunity in his practice. Dr said ok and he will try. I told him to focus on vicoden patients with private insurance, Caesource or BWC. Told him that OxyContin can also be a solution for his patients continuing to be refilled on Percocet and still in pain.
PPLPMDL0020000001	Fairlawn	OH	44333	1/15/2014	Spoke to sue and Gilbert about dr Balters patient on a hold for OxyContin due to insurance change in 2014. Gilbert told me that the patient was approved to get OxyContin after the prior authorization was put though for the second time. Gilbert said most patients will gain approval after switching insurances as long as it was proven to work prior to the change. Told him that's great to hear and asked him if he has seen any new Butrans? Sue to told me she just filled a referral for Butrans for dr Fouad.
PPLPMDL0020000001	Cleveland	OH	44106	1/15/2014	Visited Dept. requested in-service with fellows and attendings. Left OxyContin PI's and Butrans Patient info Booklets
PPLPMDL0020000001	Akron	OH	44308	1/15/2014	Spoke with Mary a nurse in the Akron Burn Center. I asked to speak to the nurse manager Chrisadise and was told she was in a meeting. I left my card and told Mary about doing an OxyContin inservice for residents. Mary said it would be like a good idea and said the residents would appreciate it. I told her to tell her nurse manager about it.
PPLPMDL0020000001	Cleveland	OH	44195	1/15/2014	Requested OxyContin Q12h discussion/appt. Dr. declined
PPLPMDL0020000001	Cleveland	OH	44195	1/15/2014	Requested appt to discuss OxyContin Q12h, Butrans. Dr. declined further discussion
PPLPMDL0020000001	Stow	OH	44224	1/15/2014	Dr told me that him and dr Spittler wanted some intermezzo patient savings cards and wanted samples. I told him that we now have 5 free pills with the copy cards. Dr said that makes sense. Dr said there are some patient who they will be placing on it. I told dr that's great and gave him the cards. Told dr to not forget about OxyContin and Butrans and to identify patients on IR opioids who need dose adjustments. Dr said he has my information on his desk. I told him to gain clinical experience.
PPLPMDL0020000001	Cleveland	OH	44195	1/15/2014	Reviewed OxyContin Q12h, 7tablet strengths along with Butrans for those patients requiring around the clock analgesia, said to book appt. to further discuss
PPLPMDL0020000001	Cleveland	OH	44195	1/15/2014	Contacted Dr. in regards to OxyContin Q12h, 7tablet strengths and savings cards. Dr. is the Palliative Care specialist, refers most prescribing decisions to Dr. Gforth
PPLPMDL0020000001	Akron	OH	44333	1/15/2014	I asked dr when patients come to see him how many prns have they been on? Dr said usually about 3 prns and they are ready for long acting opioids. I told him that's good to hear and the last time we spoke he had a couple of patients that day that did not want Butrans. I asked dr what he does to overcome that and what he gives instead? Dr said he loves Exalgo because its once a day. I asked him if that is usually goes to that and why not. OxyContin? Dr said he will usually go to OxyContin if they are already on oxycodone. I told dr that's good to hear. I told him that OxyContin is ph independent and asked what that means to him? Dr asked if that means it can be dosed once a day and said he was joking. I explained what it means for OxyContin to be ph independent and asked him if that changes anything for him? Dr said not really and he likes OxyContin but does wish it was a QD drug. I asked for more Butrans prescriptions and to choose OxyContin as another ER option.
PPLPMDL0020000001	Westlake	OH	44145	1/16/2014	Saw dr. Asked him who he is the appropriate patient for OxyContin.. He said older and those that need extended release. I said if those were on oxycodone ir and needed more pain control would you convert them to OxyContin. If they were appropriate. Dr said maybe.

PPLPMDL0020000001	Westlake	OH	44145	1/16/2014	Saw dr thru window, said I was just wondering what appropriate patient Coe s to. Nd when you think of OxyContin, he said his chronic patients. We reviewed the molecule and dosing, I asked if it made any sense to convert Percocet to OxyContin if appropriate. Dr said maybe.<font color=blue><b>CHUDAKOB's query on 02/07/2014</b></font>What are you trying to say here? "I was just wondering what appropriate patient Coe s to. Nd when you think of OxyContin<font color=green><b>BARTOLI's response on 02/10/2014</b></font>Comes to mind when you think of<font color=blue><b>CHUDAKOB added notes on 02/13/2014</b></font>Wow. You are good. I never would have guessed that. Thanks!
PPLPMDL0020000001	Lakewood	OH	44107	1/16/2014	Dr orra had a medical student in the office today.i had him rate how well his patients manage their pain. Dr said very poor. I asked why so low, he said they are never satisfied and they a,ways call the office for more medications. I brought the delivery system of bithoxycontin a d Butrans. Sowed core visual aid and asked if it made sense to move to OxyContin after Percocet. Dr said yes. I asked why? He said cause it was the same molecule but long acting. We talked about the delivery system. I asked hi if appropriate patients, which we discussed and reviewed the I initiation guide could manage 4 patches a month? Dr said yes, he thought a 7 day transdermal patch might work for some of his patients. We reviewed the naive study.<font color=blue><b>CHUDAKOB's query on 02/07/2014</b></font>Lisa, a couple of things here: 1) What does this mean "I brought the delivery system of bithoxycontin a d Butrans." 2) You said you talked about the delivery system. What did you discuss regarding the delivery system?<font color=green><b>BARTOLI's response on 02/11/2014</b></font>I brought up the delivery systems of OxyContin And Butrans. That both the opioid products were extended release products for patients currently needing continuous and around the clock pain relief. Showed the OxyContin visual aid asking the doctor if it made sense to convert a Percocet patient to OxyContin if appropriate. Dr agreed that moving from an OxyCodone ir to OxyContin made sense if they met the indication and it was appropriate.<font color=blue><b>CHUDAKOB added notes on 02/13/2014</b></font>I understand perfectly now, Thanks for the clarification.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	1/16/2014	Dr told me as she was coming into the office today that she has had a lot of Butrans luck recently. I told her I'm glad to hear it and asked her what some of the patients were on prior to starting? Dr said various but said the last one was vicoden about 5 times a day. I asked her to continue prescribing. Nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44195	1/16/2014	Visited Anes/Pain along with Neuro Depts (See CCF depts notes) OxyContin PI's and Butrans Savings cards
PPLPMDL0020000001	Lakewood	OH	44107	1/16/2014	The nurses asked me about t coverage and dosing, so I addressed it.<font color=blue><b>CHUDAKOB's query on 02/07/2014</b></font>Who were the nurses and what did you address with them? These should be included in your call notes.<font color=green><b>BARTOLI's response on 02/11/2014</b></font>I brought up the delivery systems of OxyContin And Butrans. That both the opioid products were extended release products for patients currently needing continuous and around the clock pain relief. Showed the OxyContin visual aid asking the doctor if it made sense to convert a Percocet patient to OxyContin if appropriate. Dr agreed that moving from an OxyCodone ir to OxyContin made sense if they met the indication and it was appropriate.<font color=blue><b>CHUDAKOB added notes on 02/13/2014</b></font>OK. In the future please include the specifics of what you discussed relating to dosing. This is important to know so you can formulate a better plan for the next call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	1/16/2014	Dr said he didn't have any interest in talking about OxyContin after I asked him if he has any patients on IR oxycodone and showed him the OxyContin doses. I told dr if he already has patients on Percocet he would be interested in hearing about the other oxycodone delivery system. Dr did not respond.
PPLPMDL0020000001	Lyndhurst	OH	44124	1/16/2014	First time meeting Dr Roda. Discussion @ nurses station. Introduced my products and asked her how they fit into her treatment ladder. She likes to use "traditional" medications first, and doesn't like prescribing Percocet or Tramadol. (Concern with additions) we responded that all opioids have abuse potential. Discussed OxyContin conversion after Percocet. Discussed recommended dosing: q 12 h. Also discussed steady state & ability to titrate up or down every 1-2 days. 7 doses available. She doesn't like narcotics, but based on the practice she's in, she admits she will have to write opioids when required for headaches/migraines. Introduced Butrans as transdermal option. Reviewed opioid naiv & experienced dosing, application sites, disposal. Left dosing slider.
PPLPMDL0020000001	Cleveland	OH	44195	1/16/2014	Reviewed OxyContin Q12h, 7tablet strengths along with Savings Cards, said she has a IR Oxycodone q4-6hr patient in mind depending on ins. coverage. Discussed Butrans for those patients requiring around the clock analgesia, said as a neuro, specializing in headache, she has very few patients that she treats long term but will consider.
PPLPMDL0020000001	Cleveland	OH	44106	1/16/2014	Quick OxyContin reminder Q12h, 7 Tablet strengths along with Butrans Initiation/Titration, said OK and to book lunch in-service. Booked in-service with Terrah for Feb
PPLPMDL0020000001	Cleveland	OH	44195	1/16/2014	Visited dept reviewed OxyContin Q12h, tablet strengths/ Butrans initiation titration guides and set up appt with chief Pain fellow Dr. K.Travineck, and Grieshaber MD
PPLPMDL0020000001	Cleveland	OH	44195	1/16/2014	Visited dept discussed OxyContin Q12h, 7 tablet strengths, Savings cards along with Butrans for those patients requiring around the clock analgesia with Dr. Mays and Bamford. Left Butrans Initiaion/Titration guides for Dr.Tegger and Stewart Tegper MD
PPLPMDL0020000001	Akron	OH	44319	1/16/2014	Very constructive conversation with dr over lunch about OxyContin and Butrans. I told dr in order for me to give an effective message with OxyContin I need to learn more about his patients. I asked dr of all the IR opioids what is he seeing most? Dr said probably tramadol then vicoden. I asked him when he decides to titrate those patients or switch therapies? Dr talked about his signs of tolerability or efficacy. I asked about Percocet? Dr said he is typically taking patients getting to 4-5 pills a day and moving to OxyContin. I reviewed a patient profile Tom, conversions, titration and pharmacokinetics. Dr said all that is good to know and said most his patients are taking OxyContin 40 and 80mg. I asked why he isn't using 10 or 20mg? Dr said he said he should be switching patients earlier because of the q12 and will do it. Butrans discussion and review of patient profiles Scott and nancy, conversions, titration, dosing, schedule 3, application sites. Dr said he likes the slide guide and wanted one to keep on his desk. Dr said the tramadol patient makes a lot of sense and will use it.
PPLPMDL0020000001	Cleveland	OH	44109	1/16/2014	Visited PMR- 2nd floor Dr. Wilson,Forster-Pausen-NP, Mejia, Nemunatis, Cui, and Gantner. Left OxyContin/Butrans info (Initiation/Titration. Requested appts
PPLPMDL0020000001	Tallmadge	OH	44278	1/16/2014	Good discussion with dr in his lab. I showed dr the Butrans initiation and titration slide guide and told him I want him to use it. Dr said he doesn't remember it. I reviewed schedule 3, 7 day transdermal patch, patient types, conversions. Dr said he didn't remember its a 7 day patch. I told him its the only schedule 3, 7 day patch on the market. Dr asked about insurance coverage. I reviewed commercial,Caresource which he said he has many of and Medicare D coverage. Dr said he's impressed with coverage. I asked dr if he has patients in around the clock pain on tramadol who may need a dose adjustment? Dr said he's sure he does. I asked him to take the extra minute to determine if they are a good candidate for Butrans. Dr said he will.
PPLPMDL0020000001	Cleveland	OH	44106	1/16/2014	Visited Dept. left OxyContin PI and Butrans Initiation/Titration guides for nurses, requested appt. with Dr. Acheson, said she refers all in-service requests to D. Hulizs Pharm D
PPLPMDL0020000001	Cleveland	OH	44106	1/16/2014	Visited Anes./Pain booked lunch appt with Dr. Hayek and Dept. Visited FP dept left OxyContin PI and Butrans Initiation/Titration guides
PPLPMDL0020000001	Akron	OH	44305	1/16/2014	I told dr that in order to tailor a Butrans message to him more effectively and be more precise, I need to learn more about the patients he sees to help them manage their pain. Dr agreed and I asked him if tramadol is one of his most common IR opioids he sees in his office? Dr said yes he has a lot of them. I asked him if he figures there are those that have been on it for an extended period of time? Dr said unfortunately yes but many of those patients are low income and can't afford Butrans. I told him its more affordable than he may think. I told him to out all his focus on his existing tramadol patients who need a dose adjustment. Dr said ok and knows its low cost for a branded medicine. I reviewed the OxyContin dosing, titration, and conversions and to reevaluate his Percocet patients.
PPLPMDL0020000001	Westlake	OH	44145	1/16/2014	Window. I was telling the nurses Kelly and Julie about Butrans dosing and the dr said what's the max dose.I said why do you we'd to titrate someone? She said no, but she wanted to know. I told her. i also said well what you should know is you is the ideal patient and how to start them. I highlighted the Scott profile, showed the initiation guide. And then mentioned OxyContin , q12h and its doses.<font color=blue><b>CHUDAKOB's query on 02/07/2014</b></font>Scott is not the "ideal" patient, he is one type of patient. Ideal is a comparative term. Ideal compared to what?<font color=green><b>BARTOLI's response on 02/10/2014</b></font>Understood. I meant the Scott profile was one I wanted her to focus on...<font color=blue><b>CHUDAKOB added notes on 02/13/2014</b></font>That sounds much better. Thank you!
PPLPMDL0020000001	Cleveland	OH	44106	1/16/2014	Requested appt. to speak with Dr. About Butrans/OxyContin. Dr. Said she doesn't meet with reps, referred me to D.Hulizs UHHS Pharm D
PPLPMDL0020000001	Tallmadge	OH	44278	1/16/2014	Said hello to dr at front counter and asked him if he had a quick second. Dr said not really but what is it I need? I told dr to focus on patients already on oxycodone and when they need a dose adjustment to give them oxycodone in 12 hour dosing. Dr said he uses OxyContin and has no issues in using it. Told dr that's great to hear. Dr left. Nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44103	1/16/2014	Reminded of Butrans for those Tramadol failures along with OxyContin 7 tablet strengths, Q12h, Said she is not starting any new patients on Opioids, likes Butrans and transdermal system
PPLPMDL0020000001	Stow	OH	44224	1/16/2014	Spoke with holly the pharmacist about Butranss and OxyContin. I asked about any recent activity on Butrans or OxyContin. Holly said they have 2 or 3 patients on Butrans and about 10 on OxyContin. I reviewed the nancy profile for OxyContin and the Tom profile for OxyContin. Discuss dosing, conversions, and insurance and. Okay card information. Holly said OxyContin is by far the most dispensed controlled opioid. Holly said they have one person on Exalgo and two on Opana. I told her to call me if she eve has any questions.
PPLPMDL0020000001	South Euclid	OH	44121	1/16/2014	Dr Flagg over 1 hr behind, so med asst Jen came to window. I quickly summarized my goals for what I hoped to discuss with Dr Flagg today. I showed Jenny how conversion would work from both oxycodone & Percocet, how it's an easy transition; same molecule, different delivery system. For patients with more moderate pain, we've Discussed 1x week Butrans, now with 4 strengths. Dr had a concern last time re Med D patient access to Butrans. I told Jen, Butrans is preferred on 2 major Med D Plans: Express Scripts & Medco. Butrans also preferred Cigna Med D. I will drop off new formulary grids as soon as I get. Also I will call you tomorrow or next week for a date for lunch @ Concord. ( she must get dr Flagg's permission first )
PPLPMDL0020000001	Cleveland	OH	44195	1/16/2014	Quick Butrans reminder for those Tramadol patients requiring around the clock analgesia along with OxyContin 7tablet strengths, Q12h. Left butrans savings cards
PPLPMDL0020000001	Akron	OH	44312	1/16/2014	I told dr that I have to products for 2 different places in the treatment of pain. I asked her if she would agree that when dealing with the management of pain, patient specificity it very important? Dr said she agrees. I reviewed the Scott profile and asked her what her thought are on her current patients on tramadol? Dr said she has started Butrans on patients just like Scott. I asked her if she has had good experience with it in those patients? Dr said she had had good success.mmi asked her to take an extra minute with patients on tramadol to determine if they are appropriate for Butrans? Dr said she will. Dr saw my OxyContin piece and said she will not write it. I asked if she writes Percocet? Dr said she has a few patients on it but said she feels they don't even need that. Dr said she will expand on her thoughts next time. Nothing else learned.
PPLPMDL0020000001	Mayfield	OH	44143	1/16/2014	Lunch. Dr Mandel discussed his membership in a Rheumatology Association, that has annual meeting in Columbus on weekend of Sept 6th. His group would be open to a LELE: Law Enforcement Liaison Education program. He was very candid and stated that based on state of Ohio regulations on prescribing of opioids, he does not want the extra responsibility of managing opioids. He discussed getting rid of patients who want more than a few short acting pills daily; and refers out to about 7 area pain mgt drs including Dr. Dews, Dr. Demangone, Dr Chauhan, ( dr lee, no retired)....
PPLPMDL0020000001	Westlake	OH	44145	1/16/2014	Saw dr thru window, dr said what dou need to know. I said first of all why would even write Butrans? Dr said those that don't like a patch.I said why give them an option if its something you want them to have. I went over the limitations and pointed out the Scott profile. Dr said ok and thank you.<font color=blue><b>CHUDAKOB's query on 02/07/2014</b></font>Lisa, please re-read your call note. I am having a hard time understanding what it says.<font color=green><b>BARTOLI's response on 02/10/2014</b></font>Dr said what do I need to know. I said first of all why would you write Butrans? Dr said for those who like a patch. I said why do you give them an option? Pointed out Scott profile and limitations. Dr said thank you.<font color=blue><b>CHUDAKOB added notes on 02/13/2014</b></font>Thanks for the clarification.
PPLPMDL0020000001	Cleveland	OH	44103	1/16/2014	Reviewed OxyContin 7 tablet strengths along with Butrans for those patients requiring around the clock analgesia and are failing on current therapy, Said OK, nothing new learned
PPLPMDL0020000001	Westlake	OH	44145	1/16/2014	Spoke to Kelly the office manager and ma. I asked if she has gotten any call backa for OxyContin or Butrans and she said no. She said what's Butrans again. I explained what it was and how it was dosed. She asked if you could cal, in refills, and I said heritage was s heddle 3 opioid. I explained oxycontin was schedule 2 but its an extended release optic so dosed q12. Left information behind.<font color=blue><b>CHUDAKOB's query on 02/07/2014</b></font>Lisa, what does this mean "I said heritage was s heddle 3" Please review your call notes for spelling and to ensure that someone who reads them will be able to understand them.<font color=green><b>BARTOLI's response on 02/10/2014</b></font>She asked if you could call in refills and I said to her that I would be able to understand them.<font color=blue><b>CHUDAKOB added notes on 02/13/2014</b></font>Thank
PPLPMDL0020000001	Cleveland	OH	44195	1/16/2014	Reviewed Butrans for Those Tramadol failures requiring around the clock analgesia with Susan-RN, left Butrans savings cards and confirmed appt
PPLPMDL0020000001	Cleveland	OH	44113	1/17/2014	Reminded of Butrans for those Patients requiring around the clock analgesia along with OxyContin Q12h and flexible dosing strengths. Said Ok and is always looking for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44113	1/17/2014	Reviewed OxyContin Q12h, flexible dosing, 7 tablet strengths. Said he is prescribing on post-op floor & on discharge. Reminded of Butrans for those patients requiring around the clock analgesia. Said Ok and will continue to encourage new starts for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44105	1/17/2014	Reviewed OxyContin Savings cards along with Butrans with Hakim, no new info
PPLPMDL0020000001	Cleveland	OH	44125	1/17/2014	Reviewed OxyContin and Butrans Savings cards with Linda, no cards needed

PPLPMDL0020000001	Akron	OH	44312	1/17/2014	Dr came to window and asked me if he needed to sign for samples. I told him that I promote scheduled medicines and have OxyContin. Dr said he didn't know ere were roes for OxyContin. I told him there has always been someone in his area. I asked him what his thoughts are on OxyContin? Dr said he has some patients on it but is mostly just refilling. I asked him if he has patients on IR oxycodone? Dr said to set up a lunch to discuss that. Nothing else learned.
PPLPMDL0020000001	Garfield Hts Barberton	OH OH	44125 44203	1/17/2014 1/17/2014	Quick reminder on OxyContin flexible dosing strengths, along with Butrans for those patients requiring around the clock analgesia.. Said Butrans patient is doing well so far, will follow on our lunch appt in Feb Reviewed the scheduling for both OxyContin and Butrans. I asked the doctor when choosing someone's pain treatment how relevant is the schedule to you? Dr said not very. Focus on intimidation guide. Under 40 mg total daily dose of hydrocodone molecule is appropriate for Butrans. However over 40mg total daily dose would not be appropriate and if that's a patient who is in need of An atc extended release opioid, could OxyContin be an appropriate choice for a patient and the dr said yes.
PPLPMDL0020000001	Akron	OH	44312	1/17/2014	Quick hello at office window and asked him in the months of January and February to focus on patients already on IR oxycodone for OxyContin and those already on tramadol who need a dose adjustment for Butrans. Dr said ok and thanks.
PPLPMDL0020000001	Barberton	OH	44203	1/17/2014	Dr walked out a patient. On his return in to the office I said excuse me, u asked me to remind you about Butrans last visit cause you said it had a fit with some of your patients, so here I am...coming to remind you. He took my Scott profile and said ok thanks and walked back in behind the door.
PPLPMDL0020000001	Akron	OH	44319	1/17/2014	Spoke with Andy the pharmacist about both products. I asked him how much activity he has had with it recently? He said that starting a round August last year they started to see more but said he hasn't filled a new one since October. He said they have the 5 and 10mcg in stock and have once copy card. I discussed the tramadol patient and how to start dosing, titration, and insurance coverage. I asked about OxyContin dispensing and Andy said they see their regular customers but not many new. Reviewed the dosing, titration and conversions from IR oxycodone. Andy said he sees lots of Percocet and knows they should be on the ER OxyContin. I agreed and asked him if he would mention it for the patient to ask their dr and he said he can do that.
PPLPMDL0020000001	Stow	OH	44224	1/17/2014	I followed up with dr about the inservice I did for the residents in stow. Dr said that he said there was a very positive response on Butrans and how I presented it. I told dr that I want him to continue writing Butrans in the right patient types. I asked him if he currently has any ultram patients that may be ready for a dose adjustment? Dr said he has a good amount of experience with Butrans in that patient type. Dr said most have done really well and he has titrated some of them. Dr said thanks for the visit but said he was too busy to engage in a long conversation. I reminded dr of the Caresource PA and Cigna coverage for commercial. Dr said he sees lots of Caresource patients and liked the reminder.
PPLPMDL0020000001	Stow	OH	44224	1/17/2014	Dr came out to see me in stow to ask me for intermezzo copy cards. Dr said after out last discussion he has a couple of patients he's going to start on intermezzo and wants to get them the 5 free pills. I told him I will get them to him next week as I don't have any with me. Dr said to leave them in Hudson. I told him to please concentrate on patients seeing him already on IR oxycodone and use OxyContin. Handed him the Butrans slide titration guide and asked him to just try it. Dr said ok.
PPLPMDL0020000001	Akron	OH	44319	1/17/2014	Quick message on OxyContin by asking him what the downside is to prescribing a 12hour oxycodone instead of a 4-6 hour one? Dr said he agrees that many of his patients may find it to be good. Dr said that Percocet is cheaper and that's what his patients want. I asked him what he wants for his patients? I asked him if cost is his number one influencer over what he prescribes? Dr said no but his patients won't pay for something that's even \$5-10 cheaper. I told him fine and reviewed insurance plans. I told him its time to prescribe Butrans. Dr said he knows. I told him he just needs to try it in a very specific patient type like Tom. Reviewed profile and discussed starting dose, titration and application sites.
PPLPMDL0020000001	Cleveland Barberton	OH OH	44113 44203	1/17/2014 1/17/2014	Reviewed Butrans for those LorTab failures requiring around the clock analgesia, said Ok, nothing new learned Spoke to dr about the molecule of oxycodone. Discussed the patient currently n Percocet and she felt they were a candidate for atc therapy if OxyContin made any sense for those type of patients, if appropriate and she said yes. Dr said she doesn't have much chronic patients but those that are already on Percocet she wouldn't have a problem converting them to OxyContin if they were appropriate. Discussed Butrans, schedule 3 and 4 patches a
PPLPMDL0020000001	Cleveland	OH	44102	1/17/2014	Reminded of OxyContin flexible dosing strengths along with Butrans for those patients requiring around the clock analgesia, who have failed on present therapy. Said Ok,
PPLPMDL0020000001	Akron	OH	44319	1/17/2014	Dr told me he hasn't see me in a long time. I told him that's right because he wouldn't listen to me! I told him to take an extra minute with a patient on Percocet and assess them for the q12 Oxycodone. Dr said his patients are good with what they are on. I asked hi if all of them are? Dr said yes. I said ok then and to use Butrans for his tramadol patients not controlled. Dr said ok. Nothing else learned.
PPLPMDL0020000001	Norton	OH	44203	1/17/2014	Spoke with Lisa the m Nd educator and the doctor, we discussed how his patients were doing on OxyContin currently. He said ok. We reviewed the molecule and q12h dosing and also the single entity molecule of Butrans. Review of Initiation guide and discussed weekly dosing with Butrans.
PPLPMDL0020000001	Berea	OH	44017	1/20/2014	I asked the doctor if it made any sense to convert a patient from the short acting OxyCodone molecule to OxyContin if the right person need the extended release delivery system for an extended period of time? He said yes. I asked how his patients on Butrans were doing he said fine. I said that was great, reminded him of the titration doses and how many patches a month they get and how long each patch is worn.
PPLPMDL0020000001	Berea	OH	44017	1/20/2014	I asked the doctor what appropriate patient comes to mind when he thinks about writing Butrans. Dr said a pain patient. I pulled the Initiation guide and reviewed the indication. I asked if he has patients n these types of products that refill their medications month after month. Dr said some. I said let's focus on just one today. We reviewed starting dose, managed care and how long they were the patch.
PPLPMDL0020000001	Cleveland	OH	44104	1/20/2014	Reviewed OxyContin Q12h, 7 Tablet strengths, 1-2 day titration. Said Ok doesnt treat alot of pain in office, does some in Nursing Home, Kindred etc. Reminded of Butrans for those Tramadol failures requiring around the clock analgesia, will keep in mind for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44104	1/20/2014	Reviewed OxyContin Q12h, 7 Tablet strengths along with savings cards, Said Ok, will keep in mind. Ins and cost are constant struggles with her patients. Discussed Butrans for those Tramadol failures requiring around the clock analgesia, Said she has 1 patient that she convinced to use and is doing good, asked to expand utilization for appropriate patients, Will consider
PPLPMDL0020000001	Olmsted Falls	OH	44138	1/20/2014	Discussed the appropriate patient with dr about Butrans. Reviewed steady state and also looked at the naive study of pain results. I asked if a product like this has a role in their practice and he said yes but he doesn't treat much chronic pain. I said just start with one patient t to try Butrans if they are appropriate. Dr said ok. During the conversation we talked about OxyContin being single entity and extended release...I asked the doctor what would be the hold up from converting someone from Percocet to OxyContin. If they we appropriate? Dr said nothing just habit.
PPLPMDL0020000001	Berea	OH	44017	1/20/2014	I spoke with jasmín the nurse, she told me that the doctor did not want to meet with me at is time to talk about OxyContin nor Butrans. I gave her the naive study for Butrans reviewed the highlights and asked her to leave it for the doctor. I also pointed out the 7 different strengths of OxyContin and reviewed the coupons available for both products.
PPLPMDL0020000001	Westlake	OH	44145	1/20/2014	I asked the dr if he thought 4 patches a month was a good option for those patients with atc pain? He said yes. Left him Initiation guide.
PPLPMDL0020000001	Berea	OH	44017	1/20/2014	Spoke about oxycontin dosing and delivery system. And talked about Butrans patch placement and indication.
PPLPMDL0020000001	Lakewood	OH	44107	1/20/2014	Discussed OxyContin and its delivery system, reviewed core visual aid on start principals. Talked about tailoring and the doses available with OxyContin. Butrans was reviewed on indication and Scott profile. Patch location and coupons discussed.
PPLPMDL0020000001	Cleveland Hts	OH	44118	1/20/2014	Reviewed OxyContin/Butrans Savings cards with RPH, no new info learned.
PPLPMDL0020000001	Garfield Hts	OH	44125	1/20/2014	Left OxyContin PI and Butrans Initiation/Titration info for -General Surgeons/Ortho(Lopresti,Levine,O'brien Gemma,Forcier, ElKhari Pantec, Peralta-CCF(Lichenberger,Rapuri,Sargento,Nowak, Love, Hauer=Kaiser surgeons) Left cards and info for Nursing Staff/Clinicians. Dr's dont see reps unless appt.requested
PPLPMDL0020000001	Cleveland	OH	44104	1/20/2014	Reviewed OxyContin Q12h, 7Tablet strengths, along with savings cards. Discussed Butrans for those Tramadol failures requiring around the clock analgesia.Said her patients that she inherited are maintaining on present therapy, if not she refers to pain management, Asked her if Butrans could be considered, that was a possibility.
PPLPMDL0020000001	Lakewood	OH	44107	1/20/2014	Dr said he started to refer more severe pain patient out this year. I asked what his goal was for treating pain patient this year and he said treat less of them. I said why would you keep a patient on Percocet atc? Why wouldn't you convert them to OxyContin? Doesn't it make sense. Dr said yes. I. Said dr you still haven't gotten on board with Butrans...4 patches a month for those that are appropriate for a schedule 3 atc opioid. Reviewed Initiation guide and asked hi. To find one of those Tramadol patients or vikodin patients that are appropriate for Butrans. Jamie the nurse told me to keep coming back cause he will forget about Butrans because he is not used to writing
PPLPMDL0020000001	Cleveland Hts	OH	44118	1/20/2014	Quick Butrans reminder for those Tramadol failures requiring around the clock analgesia, Said Ok will keep in mind, Also reminded of Savings cards in sample closet
PPLPMDL0020000001	Cleveland	OH	44104	1/20/2014	Reviewed OxyContin 7 tablet strengths, Q12h and Savings cards,said Ok, Cost is an challenge with his patient population as all branded products. Also discussed Butrans for those Tramadol failures requiring around the clock analgesia, has 2 older patients on Butrans, doing well,, reminded of 15mcg/hr dose, Said he will keep in mind
PPLPMDL0020000001	Berea	OH	44017	1/20/2014	Spoke to the dr about extended release products treating atc refill type patients. The doctor said she likes the concept of Butrans being 4 patches a month. We reviewed Initiation guide also reviewed steady state and half life.
PPLPMDL0020000001	Rocky River	OH	44116	1/21/2014	Dr said she is referring many oxycodone patients out to pain management. I saidwhat is the breaking point for when u decide to refer a patient out. dr said if they are chronic. dr agreed that she still will treat a few appropriate patients in house with a oxycodone molecule. she agreed that coverting someone from Percocet to oxycotin made sense in the appropriate patient. Discussed appropriate patient type for Butrans. And half life of the product. He asked about if this would be a product for his elderly patients with osteoarthritis. We discussed the naive study...the excreting thru the bowels not the urine and no dose adjustment for renal, hepatic nor the elderly. We discussed respiratory depression possibility especially in the elderly. I asked the doctor to try Butrans for the appropriate patient type before they get to vikodin and used Scott profile as an example. Review patch placement. Also reviewed manage care with patients.<font color=blue><b>CHUDAKOB's query on 02/08/2014</b></font>=<b>Lisa, re-read the Butrans FPI on what is says regarding patients with hepatic disease. What does it say?<font color=green><b>BARTOLI's response on 02/10/2014</b></font>=<b>No dose adjustment for patients with renal impairment or mild or moderate hepatic impairment. For patients with severe hepatic impairment consider the use of an alternate analgesic.<font color=blue><b>CHUDAKOB added notes on 02/13/2014</b></font>=<b>Correct. Please make sure when you discuss hepatic disease, you clarify what is says about severe hepatic impairment. This is important. Thank you!
PPLPMDL0020000001	Rocky river	OH	44116	1/21/2014	Dr asked about patch placement of Butrans, I showed core visual aid. We touched on the inclusion criteria and pain results of Butrans. She said she has patients like these, we reviewed the results of the study. I asked her why wouldn't a product like Butrans be chosen if the patient was appropriate? She couldn't answer and said managed care. I covered it and asked her to focus on the Tramadol patient who is coming in to get their refill. If they aren't controlled and appropriate try Butrans. Sowed initiation guide and she said ok.
PPLPMDL0020000001	Westlake	OH	44145	1/21/2014	Julie the office manager told me about Victoria's new hours, basically she goes to the hospital and then back to the office around 4pm. No more lunches or food, but she got me an apt at 4pm in a few weeks. Highlighted some Butrans reminders, managed care and appropriate patient types.
PPLPMDL0020000001	Euclid	OH	44119	1/21/2014	Met dr, wife Susan, for first time. Also met with med asst Ericka. Detailed dr in his office. After presenting OxyContin, indication, dosing, steady state, titration, appropriate patient type; detailed Butrans, as first opioid or after Tramadol, indication, strengths, appropriate patients (inclusion criteria) BUP 3024. I asked him if either of my products might have a place in his practice? He stated he does not write long acting opioids & refers out to pain mgmt. who do you normally refer out to? Dr responded: Euclid. Do you mean Dr Saeed & Dr Nageeb? Yes responded dr Can I leave you this Butrans brochure to review? Yes dr replied.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	1/21/2014	Caught dr coming into work today. I told her I'm glad she has been having good success with Butrans lately. Dr said she has and especially with insurance coverage. Dr said it makes her that much more comfortable with Butrans when its easy with insurance. I told her that's great and asked her to focus on patients already on ultram who need a dose adjustment. Dr said ok. Nothing else learned.
PPLPMDL0020000001	Euclid	OH	44119	1/21/2014	Spoke with pharm Joel, techs Marian & Paula. Techs both appreciated product information: indication dosing, application, disposal for Butrans, pregnancy category; both products. RX patrol resources discussed. Left OxyContin & Butrans pharmacy guide & Butrans NDC code/ FPI brochure.

PPLPMDL0020000001	Westlake	OH	44145	1/21/2014	Window. I was just curious...for patients requiring continuous atc pain treatment....at what point do you pull the trigger from a short acting OxyCodone to OxyContin? He said it depends. I said with the molecules of Percocet and oxycontin being the same doesn't make any sense to convert the short acting product if the patient was appropriate? He said yes. I said I'll leave a Butrans study...it demonstrates the pain results from patients never on opioids before converted to Butrans. He said ok.
	Euclid	OH	44117	1/21/2014	Lunch. Found out dr Morley only in ONLY MON 10 a - 6 p. in Manhattan @ other business remainder of week. Total office call, med assts & physical therapists. Discussed indications, warnings precautions for both products. Patient access, trial, savings.<font color=blue><b>CHUDAKOB's query on 02/08/2014</b></font>I thought you told me this a while ago about his office days. Wondering why a lunch? He should be a non-call file.<font color=green><b>BALLJ's response on 02/09/2014</b></font>When I went back in recently, I found out from dr DeMicco & his med assts, that dr Morley changed his schedule, again, to Mon & Tues. When I say lunch with Dr Morley group, it will typically be with Dr DeMicco, his partner. The practice & signage states: Tim Morley.<font color=blue><b>CHUDAKOB added notes on 02/13/2014</b></font>Since your call is under the other Dr., if you are going to say you provided lunch, you can just use the name of the physician you did the lunch for.
PPLPMDL0020000001	Rocky River	OH	44116	1/21/2014	Katie the ma said managed care was 1 portent. Reviewed Butrans with her and managed care. Dr said the state wants him to refer out more and more. I said what's your breaking point when you will do that, he said it all depends. Dr said his older patients are the hardest to treat because they are always in pain. He said he sees all his pain patients once a month regardless of what product they are taking. Dr said OxyContin makes sense cause they don't have to take pills atc. We reviewed q12h dosing and all the doses available. I bridged to Butrans and the initiation guide. Focused on the under 40mg of hydrocodone and under 400 mg total daily dose of Tramadol with atc pain. Dr said he had many patients that were in these levels. Dr said Butrans made sense for his non complaint patients. We reviewed the naive study, pain results, inclusion criteria and also the supplemental segments. Dr said he has a patient in mind and we reviewed the Initiation guide and discussed titration a min of 3 days. Dr said he would try to remember and told me to leave information behind for him to remember.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	1/21/2014	Appointment to meet with dr for Butrans as he was a target in q4 2013 when appointment was set. Discussed Butrans history of his and dr said he can't remember why he used it or what the patients were on previously. I reviewed Scott profile, dosing, titration, appropriate starting doses and managed care. Dr asked what schedule Butrans is and I told him its a schedule 3, the only schedule 3,7 day transdermal system. I asked dr if he will write it again? Dr said he will. I closed by telling him that it's known that many patients in chronic pain are continued to be treated with short acting opioids. I asked him if he feels the same? Dr said he certainly does and agreed that Butrans is a good option.
PPLPMDL0020000001	Akron	OH	44310	1/21/2014	During lunch appointment dr said last week was a big week for Butrans in his office and was confirmed by Char. I asked dr to tell me about it and he said he had two new starts and two refills. Dr said that both patients were on Percocet. Dr said one patient on Percocet was put on Butrans because the patient complained of being on too many pills. Dr said the other was ready for a dose adjustment and he felt Butrans would be a good option. I told dr that's great to hear and he said most of his patients really like it and are doing much better than staying on their IR opioids. Discussed dosing and titration and using the 15mcg dose. Discussed the Scott and nancy profiles and asked for continued business. Discussed how dr can use OxyContin instead of titrating Percocet or going to another ER opioid. Discussed the steady state, elimination half life significance and conversions. Dr said he knows all that but the name OxyContin continues to carry a stigma of a bad name. I told dr he's going to have to get over that and to tell patients he's going to give them an ER oxycodone instead of adjusting their IR oxycodone. Dr said that's a good idea and will try that.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	1/21/2014	Spoke with Krista the pharmacist about Butrans and OxyContin. I reviewed the doses of Butrans and the Scott profile. I asked her if she has been dispensing more recently? Krista said she has not been and has refilled for a couple of patients but doesn't know about new patients. I asked her if she has noticed any patients being titrated on Butrans? She said no and that one patient is on 5mcg because she is elderly. I explained that even elderly patients that may be taking over 15mg of vicoden may need to start at 10mcg and there is no dose adjustment necessary. Krista asked about side effects so I reviewed them from the main visaid. Discussed copy cards and trial offer. OxyContin doses and if they fill regularly. Krista said they do and have all doses in stock. Discussed patients types already on IR oxycodone and conversions.
PPLPMDL0020000001	Westlake	OH	44145	1/21/2014	I asked if they were going to stock scheduled products. They said yes. I asked if they stocked the 15mcg of Butrans and he said no. We talked about dosing, the starting doses and the titration dose. We talked more about OxyContin q12h dosing not a bid product. We also talked about the many strengths and single entity.
PPLPMDL0020000001	Cleveland	OH	44109	1/21/2014	Visited FM/IM depts left OxyContin Pl and Butrans Initiation/Titration guides for NG,Magouli,Ricanti and requested appts for in-service
PPLPMDL0020000001	Cleveland	OH	44103	1/21/2014	Quick Reminder of OxyContin Q12h, 7 Tablet strengths along with Butrans for those patients requiring around the clock analgesia. Said she will keep in mind, but reiterated medical facility dir. position on opioids
PPLPMDL0020000001	Euclid	OH	44117	1/21/2014	Lunch. Discussed patients he has on Percocet & oxycodone. Typical q 6 h plan; how likely are the. To follow that dosing plan? not likely, he responded. Conversion to OxyContin discussed. START principles discussed. Asked Dr if he gets any pushback when suggesting OxyContin to patients, yes he replied, due to the stigma: after your re formulation you should have changed the name of the product, he stated. We discussed black box warning, precautions, Pregnancy Category B which he did not remember, chief hazard all opioids is respiratory depression. Perhaps you can let your Percocet patients know they are on short acting Oxycodone[ same molecule as OxyContin ] and tylenol. that's a good idea e responded.The patients already on OxyContin whom he has inherited from other HCPs do well, even on 10 mg he says. No issues with efficacy. He wishes OxyContin was covered by BWC, as he would use a lot more. BWC is recommending / requiring, methadone. Butrans focus on BWC. Full Butrans detail, large visual aid, page by page, lastly showed him ow to write. He liked availability to call Butrans in w refills. How about Caresource asked dr? Filled him in on Caresource PA, which he will keep in mind now. I hope I have increased your comfort level today with. Butrans? Yes he replied. He as a lot of Medicare patients he'd like to put on Butrans. Discussed Butrans preferred plans for med d asked for business end, yes he will write both.
PPLPMDL0020000001	Euclid	OH	44119	1/21/2014	Quick hallway. When you go to refill your next Tramadol script, consider converting patient to Butrans. Remember 15 mcg strength now available. When you go to refill your next oxycodone or Percocet script, please consider conversion to controlled release OxyContin q 12 h.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	1/21/2014	Dr told me she has been using more Butrans recently and her patients are liking it. I asked dr what the patients have been on prior and she told me the last one she wrote she believes the patient had been on vicoden. I told her I'm glad she has found success with it and keep using for those types of patients already on hydrocodone combinations. Dr said she should be using it more and I told her I agree! Spoke with Darlene about newer Aetna commercial coverage. Darlene said that's good and will make her life easier. I reminded her of all tier 3 commercial coverages. Darlene said that th most difficult plans to gain approval from are anthem BC/BS and Humana. I asked about copy cards and they only had 3 left. Reviewed cards and trial offer.
PPLPMDL0020000001	Cleveland	OH	44113	1/21/2014	OxyContin reminder Q12h, flexible dosing strengths along with Butrans for those patients requiring around the clock analgesia that have failed on present therapy. Said he feels most patients are doing well, but will consider for some of those who are not. Asked if he will see any this week and said perhaps.
PPLPMDL0020000001	Cleveland	OH	44103	1/21/2014	Quick OxyContin Reminder Q12, Flexible 7 Tablet strengths, Said Ok Also, reviewed Butrans for those patients requiring around the clock analgesia who have failed on Tramadol. Said he thinks about prescribing but hasn't yet,
PPLPMDL0020000001	Garfield Hts	OH	44125	1/21/2014	Spoke with Deena, Dr. canceled lunch/office hrs today, will reschedule. Asked Deena to remind Dr. of OxyContin Q12h,flexible 7 Tablet strengths along with Butrans for those patients requiring around the clock analgesia, Said Ok, will do
PPLPMDL0020000001	Euclid	OH	44119	1/21/2014	Dr we Discussed last visit your Percocet patients; I'd like to add oxycodone patients to discussion today. The next time you initiate or go to refill an oxycodone or Percocet script I'd like you to consider controlled release OxyContin with q 12 h dosing plan. The only reason I am not writing more OxyContin is cost, Medicare, Medicaid patients. Dr I am getting formulary updates by the end of this month. As soon as I get, you will be one of the first people I visit. We then discussed OxyContin essentials kit, and the added value for he, his patients, & pain mgt nurses. Butrans BPE kit left. Again dr says many Medicare patients can't afford Butrans. advised dr of Butrans preferred Med D status; reminder, 4 strengths available now, including 15 mcg hr.
PPLPMDL0020000001	Rocky River	OH	44116	1/21/2014	Dr said she didn't know about Butrans. Reviewed: class, how many patches worn, and the indication. Dr asked about managed care and we discussed it. I asked if this seemed like something she would use if appropriate and she said yes. She said she didn't have many pain patients. I told her its not about 100 patients on Butrans, its about finding the right one. Dr agreed. She agreed that during the next Tramadol assesment she would keep Butrans in mind if the patient were appropriate. Discussed OxyContin she said she uses very little oxycodone. I asked her about the Percocet patients and if she had one of them that might be appropriate for OxyContin q12h. She said maybe. I asked her what is the best way to see her outside of lunch and she said she doesn't take apts.I told her that would be following up with her and to call me if she has questions.
PPLPMDL0020000001	Cleveland	OH	44113	1/21/2014	Quick Butrans reminder for those LorTab failures along with OxyContin flexible dosing strengths, Said patients are doing well, requested more Butrans Patient booklets
PPLPMDL0020000001	Westlake	OH	44145	1/22/2014	Thru window. I asked the doctor if she had someone with atc pain...why wouldn't you choose an extended delivery system? She said if they Are chronic she does. I reminded her if she has a patient currenly on Percocet and you feel they might need control atc for an extended period of time could it make sense to convert them to OxyContin? She said yes. I told her I would schedule a lunch to go over Butrans.
PPLPMDL0020000001	Cleveland	OH	44195	1/22/2014	Discussed OxyContin utilization within dept along with Butrans for those appropriate patients. Troy-Pharm. Dir.said most pain protocols are initiated with Palliative/Hospice care team(Goforth,Patel, Legrand, Perala)
PPLPMDL0020000001	Westlake	OH	44145	1/22/2014	Dr said he hardly sees anyone to be ur n an opioid. I told him that I understood and that was fine. Focus was that uncontrolled Tramadol Scott profile...we talked about Butrans being an option for the appropriate patient type and reviewed dosing. Dr said he likes that Butrans is extended release product for patients with chronic pain.
PPLPMDL0020000001	Westlake	OH	44145	1/22/2014	Dr came to window. I asked who he thinks about these days for e appropriate OxyContin patient. The dr said one that needs twice a day pain relief. I re,inded him it was q12h.I asked how he writes a typical script of OxyContin and he said sometime q8, but most times q12. I reminded him of the indication and dosing. I bridged to Butrans with then titanic. Guide. Showing over 40mg of hydrocodone isn't appropriate for Butrans and asked if he has patients under the 40mg of vikodin. He said some. I asked for his Butrans consideration for the appropriate patient type if their current medication isn't working for them.
PPLPMDL0020000001	Cleveland	OH	44113	1/22/2014	Reviewed Butrans for those LorTab failures requiring around the clock analgesia. Along with OxyContin Q12h, flexible dosing strengths. Said Ok, will consider for appropriate patients
PPLPMDL0020000001	Akron	OH	44313	1/22/2014	Quick hello at front window and told him that I'm guessing he has many patients that are candidates for OxyContin who are already on oxycodone. Dr said ok. I told him that he should be reevaluating his oxycodone patients for possible OxyContin conversions. Dr said he does his best with that and cost for Medicaid makes it difficult. I told him I understand and asked if he has commercial or Medicare D patients on Percocet? Dr said he does. I asked him if he would focus on those patients because its a path of least resistance. Reminded dr about Butrans patient candidates like Scott and Maria.
PPLPMDL0020000001	CLEVELAND	OH	44195	1/22/2014	Discussed with Troy Pharmacy mgr OxyContin and Butrans utilization within bldg
PPLPMDL0020000001	Cleveland	OH	44195	1/22/2014	Discussed With Roxanne RPH dir. OxyContin utilization mainly 10/20mg along with Savings card and Butrans for those patients requiring around the clock analgesia
PPLPMDL0020000001	Cleveland	OH	44195	1/22/2014	MSL provided BUP3031 amendment 6 protocol synopsis to Dr. Dell via Accellion, follow up planned in 1-2 weeks.
PPLPMDL0020000001	Akron	OH	44320	1/22/2014	Quick discussion as she was going into an exam room. I asked her if it makes sense for her to consider a patient for OxyContin if there are a couple of criteria the patient meets such as: patient already on IR oxycodone and needs a dose adjustment covered by insurance and is willing to switch. Dr said she would but most likely the patient won't meet all three. I told dr how will she know if she doesn't ask? Dr said good point.
PPLPMDL0020000001	Stow	OH	44224	1/22/2014	Dr talked about how business is way down even after the new year. Dr said his procedures are down as well and he needs to make adjustments to make things work especially as the dr Geiger legal process is getting worked out. Dr said he is setting a protocol for the office that no patient will be on any more than one IR or one ER opioid at a time. I told him that's a perfect opportunity for Butrans. Dr agreed but said anytime a branded medicine is written over a generic one, there are many hoops to jump through and is much more difficult to get in the hands of the patient for a good price. I asked dr but what if you know the IR opioid isn't working and the only option is a branded medicine like Butrans, wouldn't you be willing to do what's necessary? Dr said yes, at times. I asked dr what is the clinical reasoning to continue to treat chronic pain patients with IR opioids? Dr said we can discuss later because its a great question but he has to get on a conference call. I told dr will continue next time.
PPLPMDL0020000001	Akron	OH	44313	1/22/2014	Spoke to Jason the pharmacist about Butrans dosing and introduced the 15mcg dose. Jason said that's a good addition so patients don't have to double to dose. Jason said he has about 4 patients that continue to get refilled on Butrans and has not seen any new. I discussed the hydrocodone patient profile and copy cards and trial offer. Jason said all his patients are either Medicaid or Medicare. Discussed OxyContin copy cards as well, dosing and conversions. Jason said he fills OxyContin but mostly refills.
PPLPMDL0020000001	Cleveland	OH	44106	1/22/2014	Visited Bolwell Pharm. (Marge Rph-director) obtained KOL's for Seidman ctr.(Demshar,Little,and Alin) Left OxyContin/Butrans info, requested appts.

	Stow	OH	44224	1/22/2014	Good discussion about patient and insurance plan specificity for Butrans. Reviewed hydrocodone patient profile and told him there has got to be many opportunities missed for Butrans based on how many patients he has told me in the past he has on hydrocodone for chronic pain. Dr agreed and said he can write more but isn't always that easy because patients won't use a patch and insurance is difficult. I told him about the plans most important to him and told him to run them through and Marcy who does all the insurance and pA's will get them pushed through. Reviewed opioid experienced trial discussing inclusion criteria, patients products used in trial and efficacy results. Dr said he will use more.
PPLPMDL0020000001					
PPLPMDL0020000001	Cleveland	OH	44106	1/22/2014	Reviewed OxyContin Q12h, key prescribers at institution, requested Savings card along with Butrans for those Tramadol failures. Marge Rph gave info on key prescribers
PPLPMDL0020000001	Olmsted Falls	OH	44138	1/22/2014	Talked about Butrans savings cards, dosing and initiation guide. Also OxyContin q12h dosing.
PPLPMDL0020000001	Cleveland Hts	OH	44118	1/22/2014	Reviewed OxyContin Q12h, flexible dosing strengths along with Butrans for those Tramadol failures, requiring around the clock analgesia. Said he considers OxyContin for those patients that have exhausted all pain therapy
	Stow	OH	44224	1/22/2014	Good conversation about patient specificity when using Butrans. Reviewed opioid experienced trial, inclusion criteria, efficacy and safety data and discussed her clinical use. Sandra said that she has not had any issues with insurance and has seen good efficacy. Said she was surprised that 21% of patients were on oxycodone medications. I discussed conversions from oxycodone and how those patients fit the profile. I asked her to switch patients like that and hydrocodone who need a dose adjustment or she has continued to refill time after time and the patient is continuing to complain of pain. Reviewed insurance plans specific to her practice and she said she forgot about Caresource PA and BWC. She said she found value in this info and will remember but suggested to give formulary info to Marcy who is the insurance head in the pharmacy. Sandra said she goes to her for
PPLPMDL0020000001	Akron	OH	44333	1/22/2014	Dr said that he has been consistently writing Butrans each week and is seeing good success. Dr said surprisingly the Medicare D patients are able to get it at a fair price. Dr said that his patients continue to refill Butrans which to him means they are doing well. I reminded him about the specificity of the patient type along with insurance plan coverage. Dr said that he is having trouble getting patients approved on Aultcare because many patients of family practices are referring their patients to him. Dr said a patient with Aultcare with a copy card still had an out of pocket cost of \$330. I told dr there is no way that the pharmacy ran the insurance. Dr said they did and Opana was \$50 out of pocket. I told dr I would look into it and asked for pharmacy information.
PPLPMDL0020000001					
PPLPMDL0020000001	Cleveland	OH	44118	1/22/2014	Intro. Reviewed OxyContin Q12h, flexible dosing strengths along with Butrans for those Tramadol failures, requiring around the clock analgesia. Said Ok will follow up at lunch appt
	Westlake	OH	44145	1/22/2014	I asked her if she had any patients currently on OxyContin. She said yes. I reminded her about the q12h dosing and asked her if she could keep that in mind for the next patient on the short acting oxycodone molecule for the appropriate type of patient. She said ok, she was still getting used to Butrans. We reviewed Initiation guide.
PPLPMDL0020000001	Cleveland	OH	44113	1/23/2014	Visited Anes/Pain Dept. discussed OxyContin/Butrans with Dale PA, Said he is prescribing OxyContin inside hospital and on Ortho floors,(Spine-Orr MD, Bohl MD ) Reminded of Butrans for those appropriate patients requiring around the clock analgesia
PPLPMDL0020000001	Norton	OH	44203	1/23/2014	Spoke to dr about converting short acting oxycodone to OxyContin if patient was appropriate for atc pain relief. Dr said it made sense and told me about some new product like Percocet but long acting. I said u mean OxyContin?we reviewed the molecule and the delivery system of OxyContin. We dis uses Butrans and how to find an appropriate patient. Dr said he was willing to try butrans one appropriate patient type. We,Ed with the Lisa the nurse about managed care and patch positioning.
PPLPMDL0020000001	Cleveland	OH	44114	1/23/2014	Reviewed Butrans for those Tramadol failures requiring around the clock analgesia, 15mcg dose. Dr. said he struggles with treating any pain patients,Does treat for cancer patients. typically refers to Pain mgmnt, but will consider for appropriate patients. Also briefly discussed OxyContin Q12h, 7 tablet strengths
PPLPMDL0020000001	Uniontown	OH	44685	1/23/2014	Quick hello in green as her was getting ready to leave to do procedures. I asked him if he will continue to take patients on Percocet and consider them for the a her oxycodone? Dr said yes and always tries to get patients in chronic pain on ER products. I told him that's great and to make Butrans one of those ER opioids as well but for patients on tramadol or vicoden who need a dose adjustment. Dr said ok and heard I'm coming in for lunch which I am and confirmed.
PPLPMDL0020000001					
PPLPMDL0020000001	Cleveland	OH	44106	1/23/2014	Visited Onc. Dept. left OxyContin Saving card/PI's for NP's Alin/Smith, Weinstein, requested appt
	Cuyahoga Falls	OH	44223	1/23/2014	Reviewed opioid experienced trial with dr in depth. Dr asked about patients over 80mg or morphine and if those patients are candidates for Butrans? I told dr that it states that those patients may not be adequate for Butrans. Dr asked if the 5 and 10mcg doses are the only starting doses and I told him yes. Dr said he write a 15mcg dose and the pharmacy didn't have it. I told him that if they don't have it at the time the prescription is presented they would get it next day. I asked dr for continued prescribing and to titrate beyond the 10mcg. Reviewed all key selling points for OxyContin and asked for switches for patients needing an adjustment on
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	1/23/2014	Led with dr by asking him where he is writing most of his OxyContin in the hospital inpatient side or outpatient side? Dr said the inpatients for sure. Dr said that many of them are put on Percocet by their pcg and he finds out they have been on it for a while. Dr said he puts most of his patients on OxyContin because it just makes more sense to have the 12 hr oxycodone on board. I discussedSteady state, half life and titration as well as conversions. Dr said he hates the IR opioids and not many stay on them and he said he gives his patients no choice. Discussed Butrans opioid experienced trial hitting all key points. Dr said he is really liking it and asked if patients should use a IR opioid with it. I pointed out from the FPI that patients can use opioid analgesics and non opioid analgesics for supplemental analgesia if necessary. Dr said he would rather patient were not taking any IR opioids. I pointed out that patients in 3015 were only permitted to only take APAP or ibuprofen. Dr said that's good info to know.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	1/23/2014	Reviewed Butrans 3015 clinical trial hitting all key selling points. Jake said that he is finding success with Butrans on patients coming off of all the medicines including tramadol which were in the clinical trial inclusion criteria. Jake said most of his patients are on hydrocodone and said he did have one patient that had been on Butrans for at least 6 months and then this month presented with itching and rash at the application sites. Jake said the patient is continuing Butrans because he likes it so much. Reviewed patient profiles and titration. OxyContin dosing, conversions, titration, patient types and insurance for both products with copy cards.
PPLPMDL0020000001	Cleveland	OH	44114	1/23/2014	Discussed Butrans for those Tramadol failures required around the clock analgesia, dosing,BWC coverage. Said Ok will keep in mind. Quick OxyContin reminder Q12h, 7 tablet strengths
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	1/23/2014	I asked dr what she likes about OxyContin and what she is typically treating when she writes it? Dr said she uses it when patients are in severe pain and short acting narcotics aren't working. Dr said she uses it because it works and is generally covered by insurances. I told her that's good to hear and asked her if she is willing to put some time into evaluating her patients on IR oxycodone for OxyContin. I told her if those patients already on oxycodone need a dose adjustment to give them oxycodone for 12 hours. Dr said that's a good way to look at it. I reminded dr to take patients also needing dose adjustments but on tramadol or vicoden and provide them with a possible schedule 3,7 day transdermal patch. Dr said she knows about it but just needs to use it. Is agreed and asked for her to pull the trigger!
PPLPMDL0020000001	Stow	OH	44224	1/23/2014	Short call with dr Holmer because she said she was already an hour behind. I told her that she should be using more OxyContin for those patients needing 12 hour opioid. I told her those patients typically needing an ER opioid are ones who continue to complain about being in pain on their IR opioid and need a dose adjustment. Dr said she understands. I asked for more OxyContin business and reviewed Butrans Scott profile in discussion.
PPLPMDL0020000001	Cuyahoga falls	OH	44223	1/23/2014	Kim said that he has used Butrans a few times and has had great success. Kim said that her patients have come off of vicoden and oxycodone. Kim said that the efficacy has been good and really likes the side effect profile. Kim said she also has used it in a patient who was complaining of constipation with vicoden. Kim said the patient is doing great and is happy. Discussed 3015 trial hitting all key selling points. I asked for continued prescribing and to keep OxyContin in mind for her patients already on moderate doses of oxycodone. Kim said she reserves OxyContin for one patients over 30 mg of oxycodone.
PPLPMDL0020000001	Cleveland	OH	44115	1/23/2014	Discussed OxyContin Q12h, 7 tablet strengths with Kristie RPH and how we can be a resource to the facility along with Fairhill location. Said we can coordinate an in-service with Carol-St. V's and Sabina-Fairhill
PPLPMDL0020000001	Cleveland	OH	44113	1/23/2014	Discussed OxyContin Q12h, flexible dosing strengths, Savings cards along with Butrans for those patients requiring around the clock analgesia. Said He is working with Dr. Daoud more along with Ortho floors, will keep in mind
	Cuyahoga Falls	OH	44223	1/23/2014	Discussed opioid experienced trial in depth with all physicians in attendance. Dr said that its interesting that 62% of patients were taking hydrocodone combinations and 21% on oxycodone. Dr said that's good to know because those are the patients he is starting on Butrans. Dr said that the outcomes he is seeing in his practice are pretty close to the pain score reductions in the trial. Reviewed formulary coverage and fielded many questions about denials and prior authorizations for Butrans. Discussed OxyContin dosing, start state, elimination half life and patients over 65 yrs from FPI. I asked dr to continue to use it for those who are failing IR
PPLPMDL0020000001	Cleveland	OH	44195	1/24/2014	Reviewed Butrans for those Tramadol failures requiring around the clock analgesia, Initiation/Titration along with Savings card, Said Ok and will discuss with attendings. Reminded of OxyContin Q12h and 7 tablet strengths, will consider for appropriate patients,
PPLPMDL0020000001	Cleveland	OH	44113	1/24/2014	Quick Butrans Reminder for those patients requiring around the clock analgesia, 15mcg/hr dose along with OxyContin Q12h, 7 Tablet strengths, Said Ok and will consider for appropriate patients
PPLPMDL0020000001	Barberton	OH	44203	1/24/2014	Spoke to Julie the ma and she said that dr didn't have time to talk today. So I gave her a brief overview of OxyContin and its managed care status.
PPLPMDL0020000001	Barberton	OH	44203	1/24/2014	Dr said he didn't have time to talk and asked what products I promoted. I told him and the dr said he stays away from those. I said for many maybe you should, but I ly wanted to focus the patient being prescribed short acting oxycodone atc to see if just one would be appropriate for OxyContin. He said maybe and walked away.
PPLPMDL0020000001	Uniontown	OH	44685	1/24/2014	Dr said he was 2 hours behind on procedures today and only had a minute. I told dr that's ok because all I want to know is that his OxyContin patients are doing well and that he commits to continued prescribing. Dr said he uses it a lot and his patients do well with it because he likes to switch almost all patients from Percocet to OxyContin once they reach 4 pills a day of Percocet. I asked him if there is a scenario where he will converts a patient to OxyContin when they are on 20mg of Percocet a day? Dr said at times but want to allow Percocet to work a little longer. I told dr to use more Butrans for this who continue to get refills of tramadol or vicoden and showed him the conversion scale. Dr said ok.
PPLPMDL0020000001	Barberton	OH	44203	1/24/2014	Dr. Said she was not going to write any new prescriptions of OxyContin, I asked what if a patient was already on Percocet and was taking it atc or 4 x a day, would that be a reason to convert them to OxyContin if they were appropriate? She said maybe. I reminded her that Butrans is dosed with 4 patches a month schedule 3 for those appropriate Atc patients. I asked her if she had one patient to try it on like the David profile if appropriate. She said maybe.
PPLPMDL0020000001	Uniontown	OH	44685	1/24/2014	Told dr though window that he should look to identify more patients existing in his practice that he has in the past that have been continued to be refilled on tramadol or vicoden. Dr said he knows but it's not as easy as it seems because there are so many other factors in them getting an ER opioid. I told him I get it but to revisit the criteria the past patients have had when he started Butrans. Dr said ok. Nothing else learned.
PPLPMDL0020000001	Akron	OH	44312	1/24/2014	Dr headed into doing a physical so only gave me a second to ask him for his conversions from IR oxycodone to OxyContin. Dr said he is trying and is also said he may have someone for Butrans. I asked him why and he said too much vicoden. I told him hydrocodone candidates are good ones.
PPLPMDL0020000001	Cleveland	OH	44113	1/24/2014	Discussed Butrans for those patients requiring around the clock analgesia, Initiation/Titration along with OxyContin Q12h, flexible 7 Tablet strengths. Said he really doesnt prescribe many opioids, refers to Dr. Shen and Dale, but will consider
PPLPMDL0020000001	Akron	OH	44333	1/24/2014	Discussed patient selection specificity for OxyContin and Butrans. Reviewed patient profiles for each. Dr said he agrees totally that its all about patient selection and he agrees with the profiles. Dr said that he sees OxyContin and Butrans to be very effective for the elderly. Dr said they are most able to adapt to change and be compliant. Dr said that his issue in the past has been Medicare willing to pay for OxyContin and Butrans. I told him they have come along way in coverage and explained Medicare D for both products. Reviewed OxyContin steady state, titration, Ph independence and relevance and half life. Dr said its good information to review and really likes both products. Dr said he's been writing more OxyContin because it has great efficacy and dosing flexibility.
PPLPMDL0020000001	Akron	OH	44319	1/24/2014	I recapped something dr said last time at lunch and told him that he said he waits until patients reach 4-5 pills of Percocet then switches them to Percocet. Dr said yes. I asked him why he waits so long? Dr said if the patient is controlled then he doesn't switch. I told him to think about the times that he adjusts or titrates the Percocet dose. I asked him why he can't start for patients at 30mg of oerco et and use the OxyContin 10mg q12? Dr said he remembers discussing that and he is not opposed to using more of the lower OxyContin doses. I told him that's good to hear and to start dosing that for existing patients at or over 20mg. Dr said ok. I reminded him to also use Butrans for patients needing an adjustment on tramadol and showed him the conversion. Dr said he will use it. Nothing else learned.
PPLPMDL0020000001	Akron	OH	44312	1/24/2014	Dr said that he write another Rx for Butrans last week for a patient on vicoden. Dr said that his patients are continuing to see good results with Butrans and said that he is feeling more and more comfortable with it. I
PPLPMDL0020000001					
PPLPMDL0020000001	Cleveland	OH	44115	1/24/2014	Reminded dr to ensure that his patients are titrated and use of IR opioids or non opioids for supplemental. Dr said he will keep writing. Told him to use OxyContin for those existing patients on IR oxycodone and discussed Visited Pain Ctr/Spine along with Kindred Floor, Left OxyContin/Butrans Initiation Titration guide. Requested appt with Kindred Staff CAROI)



	Uniontown	OH	44685	1/24/2014	Good discussion about OxyContin and Butrans. Dr said that his clinical experience with OxyContin has been very good. Dr told me that he really likes OxyContin especially since it was reformulated. Dr said that it can be tough with some patients because they are still scared of the name because either a friend or family member had issues with it before it was reformulated. Dr asked for studies relating to its reformulation. I provided him with the approved studies in the approved piece. Dr said he really didn't understand them and wasn't satisfied with how they were conducted. Dr wanted additional information so I submitted a medical request and obtained a signature so it could be sent via email. Dr said he continues to use it a lot. Discussed Butrans patient type selection and conversions with proper application site preparation and exposure to external heat sources. Dr said he likes it because some patients can't tolerate IR opioids but have proven to tolerate Butrans much better. Reviewed AE's from Bup 3015 and reviewed key points from study.
PPLPMDL0020000001	Cleveland	OH	44113	1/24/2014	Visited Anes/Pain Dr. Shen/Daoud- Discussed OxyContin Q12h flexible dosing and Butrans for those patients requiring around the clock analgesia
PPLPMDL0020000001	Cleveland	OH	44113	1/24/2014	Quick OxyContin reminder, Q12h, 7 tablet strengths and savings cards, Said OK, doesn't usually prescribe, book lunch appt with Issa to further discuss
	Munroe Falls	OH	44262	1/24/2014	Followed up from last call about specific patient selection for Butrans and OxyContin. I reviewed what a good candidate is for each product by reviewing profiles and speaking about her patients in her practice. Dr said she has the right patients for Butrans and OxyContin but just needs to identify them to make sure they are taking the best medicine for them. I told her to look for patients similar to the ones I reviewed and she said she would. Finished with managed care coverage.
PPLPMDL0020000001	Cleveland	OH	44195	1/24/2014	Quick reminder on Butrans for those patients requiring around the clock analgesia, savings cards along with OxyContin Q12h and 7 tablets strengths. Said he will consider and to remind him of any upcoming programs
PPLPMDL0020000001	Cleveland	OH	44113	1/24/2014	Reminded of Butrans for those patients requiring around the clock analgesia, 15mcg/hr and Savings cards along with OxyContin Q12h, 7 tablet strengths
	Akron	OH	44333	1/24/2014	Dana talked about how much she likes Butrans and how she uses it for patients she wants off pills that are not working or because they couldn't tolerate the short acting opioids. Dana asked about the AE incidences for Butrans. Reviewed them from Bup 3015 and reviewed major points from trial. Discussed patient specific candidates for trial while reviewing tramadol and vicoden patient types. Dana said she will continue to prescribe. Discussed OxyContin dosing, steady state, half life, and patient profiles. Dana said she likes it and tries to get most patients on some form of a long acting opioid if they have been on a short acting for more than 4 months. Stephanie said she put a patient on Butrans about a month ago from low dose Percocet and is doing really well. Stephanie said that the patient asked for something other than her pills and is said to really like Butrans and doesn't even need any more IR opioid. Discussed with her how important it is to recognize the signs of a patient who is suited for Butrans. Reviewed profiles and hit all major points in the opioid experienced trial. Discussed all key selling points to OxyContin including pharmacokinetics.
PPLPMDL0020000001	Norton	OH	44203	1/24/2014	Lisa the rn called me and wanted me to stop by the office. Lisa, the dr and myself discussed OxyContin. She said that medical mutual wasn't approving OxyContin and asked if Butrans was appropriate for patient. We reviewed the Initiation guide and the patient was at 20mg of oxycodone ir and met the Indication for Butrans 10mcg. She asked if she could place two patches on the arm at the same time and I said no because it was not approved for that type of use. The doctor asked if Butrans would be started at 20mcg if a patient was tapering down from a higher dose of morphine equivalent product. I told him the product is only recommended to initiate at either 5 or 10mcg. I told him I would return in a few weeks to see how his patient s are doing on Butrans.
PPLPMDL0020000001	Mayfield Village	OH	44143	1/31/2014	Lunch. Dr s never comes back to rep lunches. Met with her medical assistant, detailed both Butrans & OxyContin. Discussed dosing guides for both products. Appropriate patient selection. Discussed patient education available from Purdue including pain journals and Butrans patient guides.
PPLPMDL0020000001	Mayfield Village	OH	44143	1/31/2014	Lunch. Goal: consider OxyContin for a patient like George (patient profile); patient like Goerge would be initiated on 10 mg OxyContin. Discussed q 12 h dosing, patient will take 8 am/ 8 pm (used graph, visual aid); START principles, re assessing patients after a week, to make sure patient has appropriate analgesia, or, if they need titrated to 15 mg dose, you can titrate in 1-2 days. START principles, monitor patients (especially elderly, for respiratory depression first, 24-72 hrs. Does starting a patient like George on OxyContin, something you would consider,? Yes responded dr k, I would do that. Dr you have another transdermal option, 1x week Butrans! you've used Butrans! in the past, did those patients. do well? Yes replied dr. Is there any reason why you would not write Butrans for appropriate patients like Scott? No, I just haven't found the right patient. So you don't have any patients on Tramadol? Dr had to go.
PPLPMDL0020000001	Cleveland	OH	44102	1/31/2014	Reviewed OxyContin Q12 dosing, 7 tablet strengths, Broad formulary coverage, Said he prescribing for appropriate patients, Reminded of Butrans for those Tramadol failures requiring around the clock analgesia, dosing reminder. Said Ok will consider
PPLPMDL0020000001	Mayfield Village	OH	44143	1/31/2014	Lunch. Summarized last call. Discussed Goerge profile, consider initiating OxyContin 10 mg for opioid naive patient like George. He will not initiate or refill long acting opioids. Dr we've also discussed an option for patients with pain on more moderate side, 1 weekly Butrans. Dr says some of his patients were placed on Butrans from their pain mgmt drs. Dr in case you need to refill or titrate a Butrans, I will pride you with the tools to do so. Discussed educational aspect of Butrans patient guides, strengths, steady state after 3 days, proper application & disposal.
PPLPMDL0020000001	Cleveland	OH	44127	1/31/2014	Reviewed Butrans/Scott profile, and OxyContin Q12h along with 7 tablet strengths, Said Ok will consider. Asked Josie for assistance-font color=blue><b>CHUDAKOB's query on 02/09/2014</b></font>-Mark, what did you review? What questions did you ask her? How did she respond? This sounds like it was more of a detail than a sales call. Your thoughts?<font color=green><b>GUTKOMA's response on 02/11/2014</b></font>-I agree, Under the circumstances, it was a quick detail, I asked her if she had patients like Scott? She said yes, will consider. I reminded of OxyContin and she referred to her MA(Josie). Future thoughts is to book appt to engage in more robust thought provoking sales call! Thanks-font color=blue><b>CHUDAKOB added notes on 02/13/2014</b></font>-Even in quick calls, asking good questions can get you more time. Once you ask her if she sees patients like Scott (which is a good question) you might follow it with another question like what is. Your next step when the patient is asking for a dose adjustment? This is just an example. Because most of your calls are quick, it is important to make them as productive as possible.
PPLPMDL0020000001	Mayfield Village	OH	44143	1/31/2014	Lunch. Dr not coming in until 1:30/2 pm; I had to leave for orthopedic appt. met with dr med asst & left info for dr. Let his med asst know of his concern with cost of OxyContin for patients. Reviewed savings card with her, Conversion from oxycodone & Percocet; pain journal for patients to track their pain experience. Discussed Butrans as first opioid & conversion for patient like Scott taking 400 mg Tramadol daily. 1 patch per week; 4 patches per month. Trial, savings discussed.
PPLPMDL0020000001	Cleveland	OH	44113	1/31/2014	Butrans Reminder for those Tramadol failures that require around the clock analgesia along with OxyContin Q12h, 7 tablets strengths.. Said Ok, nothing new learned
PPLPMDL0020000001	Cleveland	OH	44113	1/31/2014	Reminded of OxyContin Q12h, 7 tablet strengths, formulary coverage. Dr. said he will consider. Reviewed Butrans for those patients requiring around the clock analgesia, Said Ok, Debbie will review and remind
PPLPMDL0020000001	University Hts	OH	44118	1/31/2014	Quick OxyContin window reminder, Q12h, 7 tablet strengths, Said he will keep in mind. Also reviewed Butrans for those Tramadol failures requiring around the clock analgesia. Jeff MA said he will continue to remind
PPLPMDL0020000001	Cleveland	OH	44113	1/31/2014	Visited Ortho. Floor Bliffled/Steams, Reviewed OxyContin Q12h/ 7 tablet strengths along with Butrans for those patients requiring around the clock analgesia
PPLPMDL0020000001	Cleveland Hts	OH	44118	2/3/2014	OxyContin Q12h reminder, 7 Tablet strengths, asked why not instead of Short acting, he said sometimes cost but will consider. Also reviewed Butrans for those appropriate patients requiring around the clock analgesia
	Westlake	OH	44145	2/3/2014	Dr came to window and said he thinks Butrans when his patients could get it works great. He said he likes that its easy for his patients to remember to use and that it controls their pain. Dr said his biggest concern is managed care and prior authorizations. When I asked what plans was his stumping block, the doctor couldn't think of a specific one. I reviewed caesource coverage. Also discussed the experienced Butrans program with him and he said his patients would like that.
PPLPMDL0020000001	Westlake	OH	44145	2/3/2014	Spoke to Vickie and Jeanette the ma. Talked to Vicki about the appropriate patient type Scott profile and reviewed Initiation guide. She said that the patch is so small and thin, we reviewed the 4 layers and the matrix system. Vickie said her concern was getting managed care approved, so we reviewed caesource and also the Tramadol patient to Butrans. She also asked about the patch falling off and we reviewed first aid tape could be used along all sides if the patch was lifting off, she was aware. We talked about the appropriate patient not putting lotions on the patch, reviewed the naive studynd the ten percent of patient that had application error.
PPLPMDL0020000001	Cleveland	OH	44195	2/3/2014	Reviewed OxyContin Q12h, 7 dosing strengths, OxyContin Savings Cards. Said she will keep in mind when starting those patients on the lower dose IR. Discussed Butrans for those patients requiring around the clock analgesia, said at Taussig Cancer ctr believes OxyContin is better suited but will consider for those appropriate patients,
	Berea	OH	44017	2/3/2014	Talked about the Scott profile. Dr said he though along he might have a few appropriate patients he didn't think they would take a patch. I asked how does he know if he has never once offered it. We talked about what an assessment session looks like. Dr said he will see a patient started on a new opioid with in 2 weeks to a month. I asked what questions he typically asked the patient...he said it varies. I asked if he thought his patients could manage their 4 patches a month. Dr said yes. We talked about OxyContin dr said he saves that for his cancer patients. I said why just your severe patients...he said cause of the dosing and it was single entity. We discussed the 7 doses, the delivery system. We discussed when he goes from Percocet to something else. He said he will usually go to OxyContin next. He said his biggest obstacle is managed care and said Percocet is cheaper.
PPLPMDL0020000001	Cleveland	OH	44195	2/3/2014	Quick Butrans reminder for those patients requiring around the clock analgesia along with OxyContin Q12h, 7 tablet strengths, Said Ok, hasn't seen any appropriate patients recently but will consider
PPLPMDL0020000001	Akron	OH	44308	2/3/2014	MSL email communication with Ms. Tonni regarding upcoming PRA visits and scheduling meeting with Dr. Frieber.
PPLPMDL0020000001	CLEVELAND	OH	44195	2/3/2014	Quick OxyContin review and savings card check with Troy, nothing new learned
PPLPMDL0020000001	Cleveland	OH	44195	2/3/2014	MSL email communication with Dr. Dell regarding BUP3031 Amendment 6, Dr. Dell plans to review the amendment with the research team this week and will follow up by February 10.
PPLPMDL0020000001	Cleveland	OH	44017	2/3/2014	Discussed scheduling and patch placement. Reviewed OxyContin dosage and indication
PPLPMDL0020000001	Olmsted Falls	OH	44138	2/3/2014	Discusses the schedule 3 status, it was a 7 day transdermal patch. And highlighted managed care. Also. Asked. Bout OxyContin and the doses available.
	Westlake	OH	44145	2/3/2014	Spoke to Jenny the ma and Megan the rn about OxyContin and Butrans. Offered to schedule a ten minute Inservice to the nurses regarding OxyContin and Butrans. She said no. She took my information do passed it to the doctor. Reviewed Butrans David profiled the initiation segment. Discussed OxyContin dosing.
PPLPMDL0020000001	Cleveland	OH	44195	2/3/2014	Met with Beth F. NP Oncology, discussed OxyContin Q12h and 7 tablet strengths, Savings cards along with Butrans for those patients requiring around the clock analgesia.
PPLPMDL0020000001	Cleveland Hts	OH	44118	2/3/2014	Quick Butrans reminder in hallway/Tramadol failures requiring around the clock analgesia along with OxyContin Q12h. Said Ok
PPLPMDL0020000001	Cleveland	OH	44195	2/3/2014	Reminded of OxyContin Q12h, 7 tablet strengths along with Butrans for those patients requiring around the clock analgesia. Said he will continue to discuss with fellows
	Berea	OH	44017	2/3/2014	Dr said she wrote 4 patients for Butrans. We reviewed the initiation guide and she said her patients fall in the 5 mcg starting dose since they were under 15 of hydrocodone. Dr asked about cResource coverGe and she pulled up the I formation on her computer. She said a patient has to fail Tramadol Nd then can get Butrans. We reviewed managed care coupons. We discussed OxyContin and its dosing also the Percocet to OxyContin detail page.
PPLPMDL0020000001	Westlake	OH	44145	2/3/2014	Spoke to Lisa the ma. She told me the doctor works part time in this office. She said they are mostly Medicaid and caesource. I discussed Butrans managed care on caesource wither and explained what the product Butrans is, how dosed its scheduling. Also reviewed OxyContin tins strengths and q12h dosing.
PPLPMDL0020000001	Cleveland Heights	OH	44118	2/3/2014	Reviewed OxyContin Q12h, savings cards along with Butrans for those Tramadol failures with RPH, nothing new learned
	Cleveland	OH	44112	2/4/2014	Reviewed OxyContin Q12h, 7 tablet strengths, Savings Cards, Dr. acknowledged she prescribes IR products in the short term but refers out to PM, but will consider for appropriate patients. Reminded of Butrans for those Tramadol failures requiring around the clock analgesia, wall poster, Savings cards. Said she will keep in mind.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/4/2014	Talked to Lisa and Susan about Butrans and OxyContin. Lisa said that they are seeing OxyContin from dr Pitt and some from Western Reserve Pain management. Lisa said they have all doses of OxyContin and have copy cards. I asked which doses they have of Butrans and Lisa said all of them. She said they have 4- 5 mcg, 2-10mcg and one 15mcg and 20mcg doses and plenty of copy cards. Lisa said she also sees lots of dr Rx's from Higley

	Euclid	OH	44119	2/4/2014	Spoke with tech Dana first, then pharmacist Dave, regarding Dr Emad Mikhail patient, age: 50's, Medical Mutual, came into pharmacy, asked them to help with phone # for Butrans patient experience program, after patient called. Patient couldn't get anyone live; was told someone would call him back to complete a survey first, before he could activate card & get his rx. Dave also tried to call BPE toll free # 4-5 times, never got through to live person, was told to leave his phone # and so end would get back to him. Patient wanted his medication that day, couldn't wait, is he had Dave call dr Mikhail, & dr switched patient to Fentanyl. Dave wanted her to drop Butrans trial/savings cards; I told both him & Dana Rite Aid corporate prohibits us from doing that. In addition, when Dave tried running script through Rite Aid Relay Health point of sale, patient script was going to run \$ 34 per month, patient stated that was too expensive; he only expected to pay first \$15 out of pocket like card said. Followed up with RN Nancy & dr to update them on situation. Told Dave & Dana we gave savings for OxyContin as well, \$90 off co pay each month, \$70 off for pay each month starting April 1.
PPLPMDL0020000001	Cleveland	OH	44195	2/4/2014	Reviewed OxyContin Q12h, Tablet strengths, PI along with Butrans Initiation/Titration Guide, And PI. Dr. said Ok and due to personal reasons not able to schedule appt at this time
PPLPMDL0020000001	Cleveland	OH	44195	2/4/2014	Visited Pain/Mgmt OxyContin/Butrans Initiation/Titration guides, requested fellows appt
PPLPMDL0020000001	Euclid	OH	44117	2/4/2014	Discussed conversion from ir oxycodone and Percocet; START principles. Discussed re assessing patients prior to 30 days, because, if titration is needed, you can titrate every 1-2 days, based on OxyContin half life of 4.5 hours. He asked again about Ohio BWC covering OxyContin in 2104. I told him I should have an update on status in a few weeks. He stated BWC patients who are referred to him, already on OxyContin, and he's trying to figure out how those patients are getting it covered. Butrans he had a concern with withdrawal symptoms if patients on other opioids prior to Butrans. I explained ir pioids were allowed for break through pain in our clinical study. He was satisfied with that response. We went through opioid naive start dose, opioid experienced start dose; titration possible after 72 hours. CIII, can call in with refills. Asked if I had any patient education for Butrans, left/showed Butrans patient guides. Told him it's important he hand out with savings card before patient leaves office.
PPLPMDL0020000001	Brooklyn	OH	44144	2/4/2014	Reminded of OxyContin Q12h, 7 tablet strengths, Savings cards along with Butrans for those patients requiring around the clock analgesia. Said Ok will keep it mind
PPLPMDL0020000001	Cleveland	OH	44144	2/4/2014	Window call, Reviewed Butrans, Asked for that 1 Tramadol failure that is requiring around the clock analgesia along with OxyContin Q12h, 7 tablet strengths, Said Ok is overwhelmed taking over for Dr. Hilton's departure
PPLPMDL0020000001	E Cleveland	OH	44112	2/4/2014	Discussed with Marcia Nurse, Butrans for those Tramadol failures requiring around the clock analgesia along with OxyContin Q12h. Said she relay the info and will schedule appt when Dr. gets back in town
PPLPMDL0020000001	Rocky river	OH	44116	2/5/2014	Dr said she did a thesis on transdermal patches in college and she didn't care for it. After review she referenced the reservoir system type patches. We discussed the patch technology. We also discussed appropriate patient types Nd indication for Butrans. Reviewed the Tramadol patient who is uncontrolled and appropriate for Butrans. Reviewed OxyContin dosages and dosing.
PPLPMDL0020000001	Westlake	OH	44145	2/5/2014	Dr never heard of Purdue. Reviewed the company and the medications promoted. Reviewed Butrans dosing, indication and appropriate patient type. Review OxyContin dosing and indication
PPLPMDL0020000001	Westlake	OH	44145	2/5/2014	Discussed dosing of OxyContin and the conversion of Percocet to OxyContin if appropriate. Reviewed Butrans which the dr never heard of. Discussed dosing, indication, scheduling and appropriate patient types.
PPLPMDL0020000001	Lakewood	OH	44107	2/5/2014	Dr said he doesn't treat much pain but was aware if OxyContin not Butrans. Reviews the OxyContin strengths and how to dose. Review Butrans I dictation, dosing and appropriate patient type.
PPLPMDL0020000001	Garfield Hts	OH	44125	2/5/2014	Reviewed Butrans for those Tramadol failures requiring around the clock analgesia along with OxyContin Q12h, 7 Tablet strengths and Savings cards. Said he feels his patients are adequately controlled under current therapy but will consider for appropriate patients
PPLPMDL0020000001	Westlake	OH	44145	2/5/2014	No said he writes very little OxyContin, we discussed the Percocet dr to OxyContin conversion I n the appropriate patient type, discussed Butrans. Dosages and after the tramdole patient that has failed and needs a different product to treat pain, per the Butrans indication.
PPLPMDL0020000001	Westlake	OH	44145	2/5/2014	Discussed dose ages of OxyContin and dosing q12h. Reviewed Butrans matrix transdermal patch design, schedule 3, dosing. Dr said he doesn't see much pain patients, discussed focusing on a small appropriate patient size.
PPLPMDL0020000001	Westlake	OH	44011	2/5/2014	Discussed OxyContin dosing, strengths available. Reviewed Butrans, discussed dosing and the indication. Dr stated he didn't have many patient patients, therefore we focused on a small percentage of patients that might be appropriate.
PPLPMDL0020000001	Cleveland	OH	44195	2/5/2014	MSL email communication with Dr. Dell regarding BUP3031 participation. The pediatric oncologists are not interested due to prohibited medications, but Dr. Dell is approaching pediatric surgeons and orthopedic surgeons to assess interest. Follow up planned week of 2/10.
PPLPMDL0020000001	Munroe Falls	OH	44262	2/5/2014	I asked dr what her treatment algorithm is for treating pain? Dr said typically its NSAIDs, then tramadol, then hydrocodone combos, Percocet then ER opioids. I told her that not all patients are appropriate for ER opioids but products like Butrans and OxyContin have specific places in that treatment algorithm. I told her about the Scott profile on tramadol and asked her to use it there and to use OxyContin for patients already on IR oxycodone who need a dose adjustment. Dr said she agrees. I asked her if there is anything else preventing her from using Butrans? Dr said no but she just needs to remember it. I told her that's why I come in to help her keep it front
PPLPMDL0020000001	Garfield Heights	OH	44125	2/5/2014	Reviewed Butrans/OxyContin Savings Cards with Rph-floater, no new info learned
PPLPMDL0020000001	Westlake	OH	44145	2/5/2014	Discussed OxyContin dosing nd indication, also reviewed Percocet conversion to OxyContin. Reviewed Butrans. Indication, dosing, patch technology.
PPLPMDL0020000001	Akron	OH	44333	2/5/2014	Dr that he and Elise Elaine had a patient in earlier today on 15mg of Percocet a day and had UHC Community plan. They wanted to know about coverage. I told them Butrans is covered and with a PA. Dr said he continues to have good luck with getting Butrans approved. I asked him to continue using Butrans for his patients that have historically had the most success. Dr agreed. I discussed using OxyContin for one patients needing an adjustment with Percocet and he said he continues to use it more often because it works.
PPLPMDL0020000001	Stow	OH	44224	2/5/2014	I told Stephanie to continue to reevaluate patients on hydrocodone combos and ultram for possible Butrans patients. Reviewed Maria profile. Stephanie said she still doesn't see too many patients first visits and that most and follow ups. I told her that's a great time to reevaluate and she agreed. Asked her to keep a place for OxyContin in those patients already on IR oxycodone. She said ok.
PPLPMDL0020000001	Stow	OH	44224	2/5/2014	Told dr to continue prescribing OxyContin for those patients on IR opioids like Percocet who need a dose adjustment or ask for a long acting opioid. Dr said he has patients asking for ER products and he said more often than not he goes to OxyContin. Dr said however, he is still seeing issues getting patients covered on it. I asked who and where and dr said its mostly patients with Medicare plans. Dr said they are being asked to either go on ER morphine or fentanyl. I asked dr to keep trying and to let me know of any specific plans denying it or plans that once covered it and now are not and I will investigate. Dr said he will and thanked me for also educating pharmacists. Reminded dr of the Butrans product to be used for his tramadol and viconden patients on it 3+ months and need a dose adjustment. Dr said he likes it and will keep using.
PPLPMDL0020000001	Akron	OH	44313	2/5/2014	Quick hello at window and told him that if a oat it is on 20mg of Percocet and they need a dose adjustment, the patient can be converted to 10mg of OxyContin q12. Dr said he knows and will try to remember the lower doses. Gave him the OxyContin titration and conversion guide and the initiation and titration guide for Butrans.
PPLPMDL0020000001	Garfield Hts	OH	44125	2/5/2014	Visited Ortho/Surgery Ctr. Requested appt. to discuss OxyContin/Butrans, left Initiation/Titration guides
PPLPMDL0020000001	Akron	OH	44333	2/5/2014	Elise asked about Butrans coverage on UHC community plan. Discussed coverages and PA. Elise said she didn't put the patient on it because the patient would not move from his Percocet. I explained how she should discuss he option of Butrans. Elise said she needs to be more direct with her patients and said she come times allows them to tell her what they will take. I told her that she's the medical professional and they are not. Discussed Butrans doing and titration and OxyContin patient type selection.
PPLPMDL0020000001	Fairlawn	OH	44333	2/5/2014	Spoke to Gilbert and Sue about OxyContin conversions, titration and dosing flexibility. Sue said they currently don't have any 20mg tablets and had three patients in today for refills. Sue said 2 of the patients are waiting til tomorrow but the third went somewhere else. Gilbert said they have not seen any patients wit denials or prior authorizations and most patients do very well with it. They have all doses of Butrans on the shelf and Gilbert said he has been dispensing most of the 5mcg and is now seeing just as many 15mcg as 20mcg. Gilbert said I'm doing a good job marketing the 15mcg.
PPLPMDL0020000001	Garfield Hts.	OH	44125	2/5/2014	Reviewed Butrans for those Tramadol failures requiring around the clock analgesia, Initiation/Titration and Savings Cards. OxyContin Q12h, 7 tablet strengths Said she will consider
	Akron	OH	44333	2/5/2014	Followed up with dr Balter about his emerif request for further abuse deterrent studies for OxyContin. Dr said that he did receive information from Puurdue via email and said he found it extremely helpful. Dr said he feels better than ever about OxyContin and how it was reformulated to be more abuse deterrent. I told dr that's great to know and dr said that he sent Puurdue an email back telling them how helpful the information was and how they responded very quickly. I asked to continue prescribing.
PPLPMDL0020000001	Garfield Hts	OH	44125	2/5/2014	Reviewed Butrans for those Tramadol failures requiring around the clock analgesia, Said patient is doing well on Butrans, Asked for expanded appropriate use, said he will, likes Butrans. Reminded of OxyContin Q12h, 7 tablet strengths along with Savings cards, Said he will keep in mind the Q12h dosing
PPLPMDL0020000001	Westlake	OH	44145	2/5/2014	Spoke to dr about OxyContin and the mole u,e and delivery system. Dr asked if OxyContin was generic and also asked how to write he product. We discussed it was a single entity oxycodone, that he can write OxyContin and it was dosed q 12h. We talked about the patient types he thinks about for OxyContin and he mentioned cancer patients. Discussed the doses and the indication of moderate or severe patient types. Dr said he doesn't treat much pain patients. Focused in on the Percocet patient that might need an extended release option that meet indication. Talked about Butrans. Dr was unfamiliar, air with the product. Reviewed dosing, scheduling and how to start Butrans. Focused on the uncontrolled tramdole patient and asked if he would think of butrNs as an option if appropriate.
PPLPMDL0020000001	Garfield Hts	OH	44125	2/5/2014	Reviewed Butrans for those Tramadol Failures requiring around the clock analgesia, along with OxyContin Q12h, 7 tablet strength and Savings Cards. Said he will consider, has attempted to refer those patients to pain mgmnt. but resulting in patients coming back, Cost is an issue with his patients but will keep in mind.
PPLPMDL0020000001	Norton	OH	44203	2/6/2014	Reviewed Butrans, scheduling, dosing, patch location. Reviewed Maria profile and specifically spoke about the Tramadol patient who is uncontrolled and met the indication. Most of her patients are under 300 mg of Tramadol and we reviewed the Initiation guide. Discussed OxyContin, dosing and her usage of the product in appropriate patient tules but she does not write schedule 2 products and she said she only writes schedule 3.
PPLPMDL0020000001	Cleveland	OH	44106	2/6/2014	Reviewed OxyContin Q12h Flexible dosing strengths along with Butrans for those Tramadol failures requiring around the clock analgesia, Reviewed Initiation/Titration, dosing strengths. Savings Cards, Said her focus in mainly on Anes. blocks but will consider for appropriate patients
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	2/6/2014	Dr saw me at the window and came up. She told me how much success she continues to have with Butrans from both a product sand insurance standpoint. I told her that's great to hear. Dr said she just had a parity come in for a follow up today who she started last month. Dr said the patient is doing great and that she is impressed on how quickly the patient got Butrans. I reminded dr to continue to identify patients on ultram who need a dose adjustment and I'm happy she's having success. Nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44106	2/6/2014	Presented OxyContin and Butrans PI's requested appt. Dr. Responded not at this time
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/6/2014	Spoke to Holly the pharmacist about products. Holly said they have a handful of patient on Butrans and get it refilled each month. She said they have all doses in stock but was not aware of he 15mcg. She said she would order it. I explained the conversions and patient types. I reviewed the trial and copay card. I asked her which doses of OxyContin they have in stock and she looked and said they have all the doses. Holly said the pain clinics need them to have all the doses in stock. Discussed the OxyContin copay cards.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/6/2014	Dr came to window and asked what's new. I gave him the tramadol insight and asked him if his experience with Butrans have involved patients on tramadol? Dr said its good info I have him and that many of his patients on Butrans cam from either tramadol or viconden since he doesn't use schedule 2 medicines. Dr said its his go to controlled release product and it works well. Nothing else learned.
PPLPMDL0020000001	Stow	OH	44224	2/6/2014	Short conversation in hallway and asked her how comfortable she really is evaluating patients on Percocet for OxyContin? Dr said she doesn't have any issues with OxyContin and said that she just Ned's to make sure the patient is right for it. I asked her who is right for it? Dr said many patients on Percocet who are taking it too often. I asked her to reevaluate more Percocet patients for OxyContin. Dr said ok. Nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44106	2/6/2014	Presented OxyContin and Butrans PI's, requested appt. Dr denied request
PPLPMDL0020000001	Cleveland	OH	44115	2/6/2014	Visited Pain Ctr. , Discussed Butrans/OxyContin with Dr. Nickels, presented Butrans Posters. Dr.said it was great educational resource

PPLPMDL0020000001	Mogadore	OH	44260	2/6/2014	Used two different insights in this call over lunch. Used insight 13 for OxyContin about the number of patients on ER opioids and family practice. I asked dr when he decides to move to an ER opioid? Dr said he just knows by evaluating the patient and discussing their pain level and reason for pain. Dr said he had no issues using OxyContin and usually uses it for those patients on Percocet. I discussed patient specificity and using OxyContin for patients needing lower doses like the 10mg. Discussed ocycontin pharmacokinetics, half life and 12 hour delivery system. I asked dr to write more. Discussed Butrans parietal specificity and tramadol insight. Dr said he has seen Butrans as a product to use much earlier than OxyContin of course. I told dr to focus on his patients on tramadol and vicoden. Dr said he will continue and uses the copy cards.
PPLPMDL0020000001	Cleveland	OH	44106	2/6/2014	Reviewed OxyContin Q12h Flexible dosing strengths along with Butrans for those Tramadol failures requiring around the clock analgesia, Reviewed Initiation/Titration, dosing strengths. Savings Cards, Said he has a few patients in mind
PPLPMDL0020000001	Cleveland	OH	44106	2/6/2014	Reviewed OxyContin Q12h Flexible dosing strengths along with Butrans for those Tramadol failures requiring around the clock analgesia, Reviewed Initiation/Titration, dosing strengths. Savings Cards, Said he has a few patients in mind
PPLPMDL0020000001	Cleveland	OH	44113	2/6/2014	Reviewed OxyContin Q12h Flexible dosing strengths along with Butrans for those Tramadol failures requiring around the clock analgesia, Reviewed Initiation/Titration, dosing strengths. Savings Cards, Said he has a few patients in mind. Presented Butrans Posters, Said it was a great educational resource
PPLPMDL0020000001	Cleveland	OH	44106	2/6/2014	Reviewed OxyContin Q12h Flexible dosing strengths along with Butrans for those Tramadol failures requiring around the clock analgesia, Reviewed Initiation/Titration, dosing strengths. Savings Cards, Said he has a few patients in mind
PPLPMDL0020000001	Mogadore	OH	44260	2/6/2014	Discussed OxyContin patient types and insight 13 about the number of prescriptions coming from family practice. Dr said she doesn't have an issues using OxyContin but said she takes a lot of time evaluating the patient prior to prescribing. I asked her what she does for her evaluations. Dr said there are so many patients looking to abuse products and don't have conditions that warrant OxyContin. Dr said the reports have to show consistency and the radio graphic evidence must show a condition that typically is proven to have pain. I told dr about the Percocet patients and the conversions. Dr agreed she will write it for that type of patient. Spoke about Butrans patient specificity and the Scott profile. Dr said she likes it and needs to use it more. I asked her to for that patient.
PPLPMDL0020000001	Barberton	OH	44203	2/6/2014	Discussed Butrans. Dosing, patch placement, showed him the a/e section of the detail pieces. Also reviewed no dose adjustment for Renal impairment patients and how the product is excreted. Reviewed steady state, dr asked about supplemental which we covered. Discussed OxyContin, doses and its molecule and delivery system. Dr said he would try it, but his concern was price and writing it and having it not approved or too expensive.
PPLPMDL0020000001	Akron	OH	44312	2/6/2014	Reviewed savings coupon. Dr told me that she is glad I came in because she just prescribed Butrans for her last patient. I told her that's great and asked what he patient was on prior? Dr said vicoden. Dr said she is too busy to talk about it in length but said insurance covered it. I told dr to continue to think of patients like Scott on tramadol. Dr said ok.
PPLPMDL0020000001	Cleveland	OH	44106	2/6/2014	Visited Pain Aines Dept Hayek, Sharma, Reviewed OxyContin Q12h, 7 flexible dosing strengths along with Butrans for those patients requiring around the clock analgesia
PPLPMDL0020000001	Berea	OH	44017	2/7/2014	Discussed OxyContin, dr said he writes it and thinks it's a good product for the right patient. We talked about if the Percocet patient might ever turn into a OxyContin candidate? He said yes...we talked about when he moves from short acting to an extended release. Dr said managed care and cost to the patient is the driving reason behind his timing. Dr said Percocet is more affordable so it's easier for him to think of Percocet. However he said when the number of Percocet ets get to many in a day he will convert the. To OxyContin. Dr said he converted a nor I patient to Butrans and started him on 10 mcg. He said the patient is doing fine. We reviewed the initiation guide and also the moderate type of pain patients needing an extended release delivery system and appropriate for Butrans. Review of managed care and coupons. Dr also asked me about intermezzo, he has written for the product and he said it had a good niche for the middle of the night awakening.
PPLPMDL0020000001	Cleveland	OH	44113	2/7/2014	Reviewed Butrans for those LorTab failures, Dosing and Posters, along with OxyContin Q12h, Said she continues to find new appropriate patients
PPLPMDL0020000001	Tallmadge	OH	44278	2/7/2014	Asked dr if he is aware that OxyContin had patient assistance copy cards for private prescription patients? Dr said he is and got them when I left them last time. I told dr that's great and if patients he places on OxyContin have private insurance? Dr said he doesn't know and just uses it. I asked why he uses it? Dr said because it works. Nothing else learned.
PPLPMDL0020000001	Akron	OH	44320	2/7/2014	Dr told me that she recently started a patient on OxyContin and said the pairing came in and told the dr she got physically sick. Dr said she's pretty sure it was the OxyContin but was never confirmed. Dr said she switched from OxyContin to Percocet and the patient is not getting sick anymore. I asked if this has happened before and she said not for her patients. I reviewed when she needs to look at prescribing OxyContin and reviewed dosing. Dr said it is difficult getting patients approved on it especially Medicaid patients. I discussed with her to stick to commercial or Medicare D plans. Dr said ok. Reviewed patient types with Butrans and told her I think she has a great practice for Butrans as well due to many of her patios taking either tramadol or vicoden around the clock. Dr agreed and said she will try to use it.
PPLPMDL0020000001	Uniontown	OH	44685	2/7/2014	Confirmed lunch for next week and dr came to window. I handed him the initiation and conversion guide for OxyContin and asked him to continue reevaluating patients on Percocet for OxyContin. Dr said ok because that's what he does. I told him that's great to know and to also be specific to the patients he chooses for Butrans. I told him to reevaluate his patients on tramadol and vicoden for their appropriateness for Butrans. Dr said ok.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/7/2014	I asked dr to continue to focus on the patients that he continues to have the cost success with Butrans. I told dr those are the patients on tramadol or vicoden who have either been on it for too long and suffering from a pathology that gives chronic pain. Dr said hinges are going well and wants more insurance help. I told him again that he must provide me with specific plan/pharmacy information that is giving him issues that it's hard to help without it. Dr said ok. I asked dr to continue writing.
PPLPMDL0020000001	Akron	OH	44319	2/7/2014	Met pharmacist Michael for the first time. Asked him is he's familiar with Butrans? He said he was. I discussed Butrans key selling points. Michael said that's good information to know and asked about copy cards. Discussed them and trial offer. He said they may have one patient on it. Discussed OxyContin doses, titration and patient types already on oxycodone.
PPLPMDL0020000001	Cleveland	OH	44113	2/7/2014	Quick window call reminded of Butrans for those Tramadol failures along with OxyContin Q12h, 7 tablet strengths, Said Ok and to book lunch appt with LeAnna
PPLPMDL0020000001	Cleveland	OH	44113	2/7/2014	Visited Dept (Bilifield, Stearns, Joy, Long, Paczos) OxyContin/Butrans Initiation/Titration guides, Booked appt
PPLPMDL0020000001	Cleveland	OH	44113	2/7/2014	Visited Ortho dept (Bilifield, Stearns, Long, Paczos) left OxyContin Initiation/Titration guides along with Butrans Initiation guides. Booked appt
PPLPMDL0020000001	Akron	OH	44320	2/7/2014	I asked dr why she stopped writing Butrans? Dr said she knows she should be writing it but said the office policy is becoming very stick in kicking patients out of the office. I asked her what a patient does to get them kicked out? Dr said if they do a UDDS and cocaine or marajuana comes back they are kicked out. Dr said the patients they see on IR opioids are either abusing and they get kicked out or are only taking them once or twice a day PRN. I asked dr if she has any patients at all that continued to get refilled on their tramadol or vicoden and you have confirmed that the patient continues to be in pain? Dr said she does. I told her those are the patients she needs to focus on for Butrans. Dr said ok she will and asked about coverage. I asked her what plans she sees most of? She said Medicaid like Caresource, BWC, and Medicare D tend to be plans that she has most trouble with. I explained coverages and told her she needs to be laser focused on the right patients w/ the right plans. Dr agreed and will write it more. Discussed OxyContin parity types and asked her to transition patients still in pain on
PPLPMDL0020000001	Cleveland	OH	44113	2/7/2014	Quick OxyContin reminder thru window, Q12h, 7 tablet strengths along with Butrans for those tramadol failures, Said Ok will consider
PPLPMDL0020000001	Cleveland	OH	44102	2/7/2014	Quick review of OxyContin Q12h, 7 Tablet strengths also Reminded of Butrans for those Tramadol failures requiring around the clock analgesia, Said Ok will consider
PPLPMDL0020000001	Cleveland	OH	44113	2/7/2014	Reviewed Butrans for those Tramadol failures, requiring around the clock analgesia. Along with OxyContin q12h, 7 tablet strengths. Said she is continuing to find appropriate new starts- CHUDAKOB's query on 02/14/2014- Mark, thank for recognizing an AE and recording it. This is something you should also record in your call notes as well, so we can see what the adverse event was. GUTKOMA's response on 02/15/2014- Thanks, Patient experienced skin reaction to Butrans(concentrated in the center matrix area of the patch)- CHUDAKOB added notes on 02/18/2014- OK.
PPLPMDL0020000001	Akron	OH	44319	2/7/2014	Thanks for clarifying that. The more information you can gather on an AE, the better. Thanks again! I asked dr what he does with his patients that continue to be refilled on Percocet and still complain of being in pain? Dr said it depends but generics are cheap. I asked him if cheap is always going to be the best method of treatment? Dr said no but he has lots of patients on Medicaid and cash only. I told him I understand but what about taking people on Percocet and switching them to a q12 oxycodone? Dr said he understands it makes sense but not always for his practice. I said that's fine and let's focus on patients that are appropriate and have insurance. Dr said for the most part those aren't the patients who are the problem. I asked him to write OxyContin for patients with insurance or Medicare D. Reminded him to start patients on Butrans who need an adjustment in their tramadol.
PPLPMDL0020000001	Brooklyn	OH	44144	2/10/2014	Talked with Bev-Tech, Discussed Butrans/OxyContin Savings cards, no new info learned
PPLPMDL0020000001	Cleveland	OH	44104	2/10/2014	Reviewed OxyContin Q12h, 7 tablet strengths along with Butrans for those Tramadol failures requiring around the clock analgesia, said she will consider, asked if she had a patient this afternoon, said not today but will this week- CHUDAKOB added notes on 02/23/2014- Looks like a good powerful request on this call. Nice job Mark. These type of specific closes are an important step to increasing sales.
PPLPMDL0020000001	Cleveland	OH	44104	2/10/2014	Reviewed OxyContin Q12h, 7 tablet strengths and Savings cards, Also reminded of Butrans for those Tramadol failures requiring around the clock analgesia, Said he will consider, had some success with Butrans but struggled with PA approvals.
PPLPMDL0020000001	Stow	OH	44224	2/10/2014	Short conversation over lunch. Used new visit to detail from GP/family practice for Butrans. Dr said he really likes that it works and is finding its covered on a lot of plans. Discussed Bup 3015 efficacy and safety. Used the inclusion/exclusion criteria to talk about appropriate patients. Dr said he will continue to prescribe. Discussed OxyContin dosing, titration, conversions and asked him about patients he might have in his practice that would be appropriate. Dr said there are a few and said he only uses it when patients he trusts need long acting oxycodone. Dr said typically he will get a patient til about 20-30mg of oxycodone then he'll switch. Discussed using the 10 mg and the conversions and q12 delivery system.
PPLPMDL0020000001	Akron	OH	44313	2/10/2014	Quick hello at the window. I asked him what's stopping him from using OxyContin for a patient that either can't tolerate IR oxycodone or still in pain on it? Dr said he doesn't know but most of his Percocet patients are doing fine. I asked him to just reevaluate them to assess their pain further. Dr said ok.
PPLPMDL0020000001	Akron	OH	44304	2/10/2014	PDF came to front counter. Showed him the Tom patient type and asked him if he had patients like him? Dr said he does. I told him to use OxyContin for those patients on IR oxycodone. Told him OxyContin is a 1:1 ratio with IR oxycodone and its also a single entity opioid. Dr said ok. Nothing else learned.
PPLPMDL0020000001	akron	OH	44333	2/10/2014	Asked dr if he is seeing more patients while he continues with being a UH dr that come in on IR opioids? Dr said he is getting more and more every day. I asked him why he hasn't found more room for Butrans in those patients? Dr said he doesn't know. Dr said he guesses he just forgets to use it. I gave him the Butrans conversion slide guide and asked him to keep it in his main exam room. Dr said he will. Told dr that he also needs to identify patients for OxyContin. Reviewed dosing and conversions and patients already on Percocet.
PPLPMDL0020000001	Cleveland	OH	44104	2/10/2014	Reviewed OxyContin Q12h flexible dosing strengths Savings cards, Along With Butrans for those Tramadol failures requiring around the clock analgesia. Said he will consider, has used in nursing homes/Assisted living facility with success, asked him to take those successes into his daily practice. Said Ok
PPLPMDL0020000001	Cleveland	OH	44104	2/10/2014	Talked with Hakim Rph, Discussed OxyContin Savings cards along with Butrans formulary/PA concerns, No new info learned
PPLPMDL0020000001	Hudson	OH	44236	2/10/2014	Spoke to dr about specificity of patient type selection for OxyContin and Butrans. Dr said he will use OxyContin if he knows the patient is in legitimate pain and not a surgical candidate. Dr said that he will think more about it.
PPLPMDL0020000001	Cleveland	OH	44114	2/11/2014	Asked dr if he has patients on tramadol whom continue to take it and are still in pain? Dr said he has plenty. I told him the option of Butrans is real and should be considered. Dr said he will try to use it.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/11/2014	Reviewed Butrans for those Tramadol failures requiring around the clock analgesia, BWC coverage along with OxyContin Q12h, 7 tablet strengths. Said he will consider, Asked John to remind him, agreed
PPLPMDL0020000001					Saw dr as I was talking to Glenn this morning. I asked dr if he has had the opportunity to prescribe more OxyContin for his outpatients recently as we discussed on our last visit? Dr said he is trying and said that Butrans is much better suited for many of those patients? I asked why and he said OxyContin is great for inpatients because he is mostly converting from Percocet. Butrans is great for patients that aren't always surgical candidates and seems to work quite well. I told him that's good to know. Nothing else learned.

PPLPMDL0020000001	Cleveland	OH	44195	2/11/2014	MSL email communication with Ms. Riley and Ms. Cassano regarding Master Clinical Trial Agreement. Ms. Riley is now the primary contact for the research office. The Cleveland Clinic legal representative is in contact with vendor INC regarding the agreement. Update provided to PPLP team.
PPLPMDL0020000001	Cleveland	OH	44195	2/11/2014	MSL email communication with Dr. Dell for BUP3031 participation. Both the pediatric surgeons and orthopedic surgeons are interested in the trial, Dr. Dell plans to work with both to identify a PI in the next 1-2 weeks and will notify MSL to begin startup procedures.
PPLPMDL0020000001	Waterford	OH	45786	2/11/2014	I-Butrans dosing, clinical trials and managed-care. OxyContin start principles.W-said that she would use Butrans more if she understood where she could write it for managed-care. Went over all of managed-care including Medicaid.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	2/11/2014	I asked dr if she has patients who are over 65 and Medicare age who suffer from pain around the clock? Dr said she has many of them. I asked her if she treats this subset of oarients differently from others when it comes to pain? Dr said not really other than dose adjustments on the low end.m I said that's good and if OxyContin has a place for those patients who suffer from moderate to severe pain?m dr said she has prescribed it for them and has no issue with that. I asked her to confirm what the pathology is in those patients and see if it deems necessary for an ER opioid especially those already on IR oxycodone. Dr said ok. I reminded her of Butrans indication, dosing and tramadol patient profile.
PPLPMDL0020000001	Stow	OH	44224	2/11/2014	I lld with the ERO insight and asked her what her protocol is for when a patient needs to be on an ER opioid? Dr said she doesn't have a set plan for that. Dr said during her discussion with the patient she said she gets a good idea where the pain is coming from and its severity. I told her that patient specificity is vital when prescribing OxyContin. I reviewed page 4 and 5 of the main visaid to point out pain conditions, indication, and specific patients appropriate for OxyContin. Dr said its good to see that and she likes OxyContin because it works and is fairly well priced. I asked dr to reevaluate patients who may have conditions and pain levels like we discussed and use OxyContin. Dr said ok. I discussed e copy cards and how important they are for commercial patients. Dr said to leave them with Paula and she will find a place for them. Asked dr to also use Butrans for patients she has on tramadol or vicoden. Discussed Scott profile and asked her if it made sense to use Butrans for a patient like Scott? Dr said it does and she just needs to remember its an option.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/11/2014	Told dr that OxyContin has 7 doses that he can individualize the dose with. I showed him the doses and asked which dose he finds used most in his practice? Dr said probably 60mg and then 80 and does use then40 as well. I asked when the last time he used a 10mg? Dr said he uses it. Asked him to give Butrans another shot in patients like Kathy. Nothing else learned.
PPLPMDL0020000001	Akron	OH	44310	2/11/2014	Dr asked me for more of the Butrans low back spine posters. Discussed wi them and said that dr Tharp really liked them and he wanted some for his exam rooms also. I asked him how his patients have been doing on Butrans? Dr said he has a patient in for a follow up this week and is doing really well. D r said the patient was titrated to the 10mcg and said he thinks its the best dose for the patient who has spinal stenosis. I told him to continue prescribing. Showed him the OxyContin initiation and conversion guide and asked for him to consider OxyContin for his patients on Percocet.
PPLPMDL0020000001	Valley View	OH	44125	2/11/2014	Reviewed OxyContin Q12h, 7tablet strengths, Savings cards along with Butrans for those Patients requiring around the clock analgesia, Initiation/Titration. Said he will relay info to staff and with Clinicians when opportunity presents.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	2/11/2014	Quick call at window. I reminded her to to use butrans in patients like Scott. Showed her the profile and outlined it. Dr said she has used Butrans for patients like Scott and likes it a lot. I told her that's great and asked her if she has needed to titrate though the doses? She said she has used the 10mcg and maybe one or two 20mcg titrations. Told her about OxyContin doses and indication as well as disease states.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/11/2014	Spoke to Pat the pharmacist about both products. Pat said they continue to see new prescriptions from pain management for OxyContin and Butrans. Pat also said he has seen a number from GP as well. I asked which doses of Butrans are moving most and he said 20, 40, and 60mg. Checked copy cards and asked him to keep all doses in stock. Reviewed Butrans information on dosing and titration. Talked to him about all the patients he sees getting refill after refill of IR opioids. Pat said he is going to start talking to patients about the options available. I told him that's great and to continue to stock all doses.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/11/2014	Spoke to dr staff and Sandy one of the nurses at the office about OxyContin and if there is a policy about writing scheduled medicines? Sandy said that they do sprite some but specifically for dr Saunders, she knows he has some patients on OxyContin that they refill for but doesn't think he is writing new ones. Asked dr in hallway who he feels is an appropriate candidate for OxyContin? Dr said he leaves that up to the specialists. I asked him if he treats pain at all anymore? Dr said he does but mostly its acute pain and will prescribe up to 60 days of a pain medicine. I told him that OxyContin isn't for everyone and the patients it is appropriate for have moderate to severe pain and need a 12 hour opioid to help control it. Dr agreed but said he is still not comfortable using it. I asked him if he's comfortable using a product like Butrans which is a schedule 3 controlled release opioid for 7 days? Dr said possibly. Gave him the initiation and titration guide and asked him to try it in a patient who is failing tramadol? Dr said ok. Nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44115	2/11/2014	Window Call, reminded of Butrans for those Tramadol failures requiring around the clock analgesia along with OxyContin Q12h, Savings Cards, Said Ok, nothing new learned.
PPLPMDL0020000001	Akron	OH	44333	2/11/2014	Dr saw me and said he needed more OxyContin copy cards. Dr said he went to grab one today and they are all gone. I provided him the cards and asked him what his most recent prescription was for? DR said he was taking a patient he acquired from another practice who was on way too many opioids and was condensing. The patient was taking IR oxycodone and was placing the patient on 30mg OxyContin. I told him that's good to hear and provided him cards. Told dr not to forget about Butrans for those patients on tramadol or vicoden who need fose adjustment. Dr said ok.
PPLPMDL0020000001	Cleveland	OH	44102	2/11/2014	Reviewed OxyContin Q12h, 7tablet strengths, Savings Cards,along with Butrans for those patients requiring around the clock analgesia. Ed Pharm Dir. Said he will continue to discuss when available with Facility clinicians. Dr. Nouraldin has a new NP (Nancy Capito)
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/11/2014	Spoke to Glenn about the confirmation as a vendor at the pain seminar in the 21st. Glenn said he got the information from Purdue and payment. I told Glenn that I need specific examples of insurance issues with Butrans. I told him that my RAE is back from maternity leave and she can help research any insurance problems for Butrans. Glenn said ok and he will pull a couple of examples. Asked him to also pull some for OxyContin if there have
PPLPMDL0020000001	Cleveland Hts	OH	44118	2/12/2014	Discussed OxyContin Q12h and 7 tablet strengths,Reviewed Butrans for those Tramadol failures requiring around the clock analgesia, Said he will consider as long as the patient can afford/tolerate it, he will continue to prescribe for appropriate patients. Reviewed Savings Cards
PPLPMDL0020000001	Cleveland	OH	44118	2/12/2014	Discussed OxyContin Q12h and 7 tablet strengths,Reviewed Butrans for those Tramadol failures requiring around the clock analgesia, Said Ok. As a NP doesnt prescribe CII's but will consider Butrans for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44127	2/12/2014	Quick Review of OxyContin Q12h along with Butrans for those Tramadol failures requiring around the clock analgesia, Said Ok, nothing new learned
PPLPMDL0020000001	Cleveland Hts	OH	44118	2/12/2014	Reviewed Butrans And OxyContin Savings cards with Bob RPH, no new info learned
PPLPMDL0020000001	Cleveland Hts	OH	44118	2/12/2014	Discussed OxyContin/Butrans savings cards, Said he sees Butrans from Harris, nothing else learned
PPLPMDL0020000001	Mayfield Hts	OH	44124	2/12/2014	Quick hallway. Discussed Butrans patient guides; I will deliver next week. Discussed Butrans 4 strengths for greater dosing flexibility. Discussed new Butrans trial, savings and exp date of 3/31/15.
PPLPMDL0020000001	Uniontown	OH	44685	2/12/2014	Heather can in for the second half of the day as I was packing up from lunch. Short conversation about OxyContin and Butrans. Heather said she will not write OxyContin anymore because of her history in pain management but does think Butrans has a place. Heather said she would use it if she thinks a patient is not responding to oral medication and said that she feels it would be better suited for older patients. I told her about the number of patients in the trials over 65 and that Medicare coverage is pretty good. I asked her to use Butrans for patients on tramadol or vicoden who need dose adjustments.
PPLPMDL0020000001	Uniontown	OH	44685	2/12/2014	Discussed much of the FPI information for OxyContin and Butrans to all drs and heather. Reviewed indication, doses, black box warnings, contraindications, and use in special populations. I asked dr when he typically uses OxyContin and how he figures the initiation dose? Dr said he does conversions and like that its a 1:1 conversion from Percocet. I used pages 4 and 5 of the visaid and asked what he thinks about using OxyContin for patients whom are opioid naive? Dr said he has never done it. I asked why and he told me that there are many other products to use before an ER opioid. Dr said as a GP limitations are coming for the ability to treat pain patients anyway. Dr said he uses OxyContin and will continue to. I told him to use it for oar its with Osteoarthritis, low back pain and cancer pain. Dr said ok. Discussed Butrans patient type selection specificity. Discussed tramadol Scott profile and Kathy. Asked dr if he ou,d take the extra minute to assess what the pathology is that is being treated. If its a condition that causes pain around the clock to use Butrans.
PPLPMDL0020000001	Akron	OH	44313	2/12/2014	I told dr I had two points for OxyContin and one for Butrans. I told dr about the % of patients in e studies over 65 and how coverage for Medicare coverage is good. I asked dr if he has patients that fit this classification? Dr said he does and uses it for that group of patients. I also told him that he should start using the OxyContin 10mg and its a conversion from Percocet 20mg. Dr said he knows and has used it. I asked him if he would use it more instead of continuing to titrate through Percocet? Dr said he sees my point and will do that. Gave dr the Butrans conversions guide and told him to focus on the tramadol patient who needs a dose adjustment.
PPLPMDL0020000001	Akron	OH	44313	2/12/2014	Spoke with pharmacist about both products. Discussed Butrans doses, titration and initiation of the product. I told her about a tramadol or vicoden patient starting on Butrans. I asked her if they have patients on it? She said they do and see a new one about each month or two. Discussed ocycontin doses and conversions from IR oxycodone.
PPLPMDL0020000001	Akron	OH	44302	2/12/2014	Went to give OxyContin copy cards. Caught dr at window and asked him if he needs any OxyContin patient copy cards? Dr said the staff just organized the office and he saw some. I asked him when he knows to titrate OxyContin? Dr said it different for everyone but usually he discusses it with the patient during the assessment. Dr said he also looks for the patients mobility. I thanked him for the information and asked of continued OxyContin business. Left him the Butrans initiation and titration guide.
PPLPMDL0020000001	Mayfield Heights	OH	44124	2/12/2014	Discussed Butrans patient selection. Opioid naive like Maria patient profile. Start 5 mcg hr, ability to titrate after 72 hours, 4 strengths for greater dosing flexibility. Formulary status for commercial, med d discussed. Gina will keep opioid naive patients in mind for Butrans. Discussed opioid naive dose for OxyContin of 10 mg. George profile. Gina would be comfortable writing for a patient like George, yet lately she's been getting a lot of denials for OxyContin. Gina states that she recently had 2 patients she tried to place on OxyContin & they were denied. I had her look up the plans. 1. Cleveland Clinic employee, female patient with cancer, on "Mutual Health" which is CC plan. Patient probably also on her husband's insurance says Gina. Her plan will not allow Gina to write an OxyContin 10 or 20 mg. They want her to write a 60 mg and a 20 mg; and give the patient 80 mg. They won't approve smaller doses. The second patient: Another patient on Anthem Medicare Part D and OxyContin denied by HER plan. Using my iPad I let Gina know that OxyContin is not covered on that particular Med D plan, informed her of other Med D plans in area where OxyContin is preferred.
PPLPMDL0020000001	Cleveland	OH	44106	2/12/2014	Visited Anes/Pain Ctr. followed up with Atit Fellow on Butrans patient info booklets along with OxyContin Initiation/Titration guide
PPLPMDL0020000001	University Hts	OH	44118	2/12/2014	Quick OxyContin Q12h, 7Tablet strength reminder along with Butrans for those Tramadol failures, Said he will consider, Nothing new learned, Booked appt
PPLPMDL0020000001	Uniontown	OH	44685	2/12/2014	Reviewed FPI information with OxyContin. Discussed patient type selection and conversions from IR oxycodone and Percocet. I used the insight with ERO use and asked him when he decides to use an ER opioid. Dr said its usually individual decisions but said he moves to an ER opioid when a patient gets to 4 IR opioids in a day. Dr said when a patient needs more than 4 prns a day he said he needs to look more into what is causing the pain and typically will move to an extended release opioid. Reviewed doses and told him that sounds like a good time to move to OxyContin. Dr said he likes it cause it works. Discussed Butrans patient type selection, doses, conversions and limitations of use, use in special populations. Dr said he likes it and should use more.
PPLPMDL0020000001	Stow	OH	44224	2/12/2014	Caught dr in stow who said again that he was out of OxyContin copy cards. Provided cards and asked him what percentage of his patients on OxyContin have private prescription insurance? Dr said he doesn't know exactly but guessed that its probably about 40-50%. I said that's really a high number and I'm glad the cards are useful. I asked dr to continue using OxyContin for patients on Percocet who need dose adjustments and also asked for continued Butrans business for those on tramadol or vicoden who he believes need an ER opioid.
PPLPMDL0020000001	Akron	OH	44333	2/12/2014	Spoke to Elise about Butrans use in special populations and reviewed information in main visaid. Elise said that's good to know because she just finished with a patient who is on Butrans and has renal impairment. She said its mild but had wondered and said she's glad I discussed it. She said she had a patient that she wanted to put on Butrans the other day but the secondary insurance would not pick up what he Medicare did not. She said the patients secondary was a medical mutual plan. I told her it should have picked it up and to send a request for approval. She said she would. I asked her her thoughts on OxyContin and she said she had no issues using it and typically will such patients from oxycodone or Percocet. I asked her what dose she usually goes to and she said it depends on the patient but she is sticking with the 4 prns a day. I told her that's great and to reevaluate her IR oxycodone patients regularly for the q12 oxycodone.
PPLPMDL0020000001	Cleveland Hts	OH	44118	2/12/2014	Intro.Shanon/Jenifer-Nurse Reviewed OxyContin Q12h, flexible 7 tablet strengths, Butrans for those patients requiring around the clock analgesia, said Ok asked to schedule appt with Jenifer

	Akron	OH	44333	2/12/2014	Reviewed main visad section for PS and renal and hepatic sections. Dr said that's good information to know. I told him its important because he uses Butrans for many of his patients over 65 who tend to have either renal or hepatic impairment. Dr agreed and is glad he doesn't have to worry much. Dr asked about QTc prolongation and if patients require an ECG prior to using Butrans. I reviewed the section in the FPI about electrophysiology and class antiarrhythmics. Dr said he's ok with that and just didn't know. I told dr I am going to be talking more in depth about OxyContin in the coming months. Dr said he hasn't been using much of any CII opioids recently. I asked why and he said that they like to get patients to 4 prn meds then switch them to ER opioids and just hasn't had patients hitting that mark recently. I told him he should be using the low doses of OxyContin like the 10 and 15mg. I showed him the conversions and asked for more business. Dr said ok.
PPLPMDL0020000001	Cleveland	OH	44113	2/13/2014	Reminded of Butrans for those LorTab failures requiring around the clock analgesia along with OxyContin Q12h, flexible dosing strengths. Said Ok will continue to find new appropriate patients for Butrans
PPLPMDL0020000001	Cleveland	OH	44113	2/13/2014	Reminded of Butrans for those LorTab failures requiring around the clock analgesia along with OxyContin Q12h, flexible dosing strengths. Said Ok will continue to find new appropriate patients for Butrans
PPLPMDL0020000001	Cleveland	OH	44113	2/13/2014	Reminded of Butrans for those LorTab failures requiring around the clock analgesia along with OxyContin Q12h, flexible dosing strengths. Said Ok will continue to find new appropriate patients for Butrans
PPLPMDL0020000001	Akron	OH	44308	2/13/2014	MSL email communication with Dr. Friebert with OTR study updates, and inquiry about recruitment efforts and outreach to pharmacy. Dr. Friebert and Ms. Tonni continue to review patient census for potential OTR subjects.
PPLPMDL0020000001	Mayfield Village	OH	44143	2/13/2014	Bad day, first week new EMR system. Pain reduction insight, pain scores BUP 3015. Dr thinks pain reduction is decent. Responded that in most clinical trials on pain, 30% or greater reduction is seen as clinically important. 10 mcg hr start for opioid experienced discussed. Another option in oral form, OxyContin, with 10 mg start dose. Please keep these products in mind when entering next script fir pain in your new EMR system.
PPLPMDL0020000001	Richmond Heights	OH	44143	2/13/2014	Quick window. Focused on opioid naive doses, options for both products.
PPLPMDL0020000001	Cleveland	OH	44113	2/13/2014	Reviewed OxyContin/Butrans savings cards with Justin. No new info learned
PPLPMDL0020000001	Richmond Heights	OH	44143	2/13/2014	Discussed with med asst, Butrans & OxyContin indications. Formulary access. Trial/savings cards for Butrans, patient guides. OxyContin savings. ( set few lunches; dr balaji & dr natesan in opposite days)
PPLPMDL0020000001	University Heights	OH	44121	2/13/2014	Not good day. First week new EMR system. Discussed OxyContin 10 mg opioid naive dose for patients with non cancer pain, showed George profile. Next lunch I'd like to dive deeper into this patient profile. Butrans also available for opioid naive; 5 mcg hr start dose. My goal next call is to get you so comfortable with Butrans that you put pen to paper.
PPLPMDL0020000001	Highland Heights	OH	44143	2/13/2014	Lunch. Goal: get dr to write more Butrans for any opioid naive patients. He gets about 20-25 new patients every week. All doses Butrans discussed, 15 mcg hr insight. Formulary coverage BWC discussed. He appreciates savings card that don't expire until 2015. Goal: get him to consider writing 10 mg OxyContin for opioid naive patients, after summarizing our discussion last visit where he was firm on not initiating any new OxyContin starts. By focusing on patient who failed on NSAIDs, concentrating on diagnosis of osteoarthritis & hip pain, stated this could be a good candidate for 10 mg OxyContin, which dr agreed to! He liked educational aspect of OxyContin essential kits very much. Cost/ patient access key factor in 2014 affecting what long actings he will write.
PPLPMDL0020000001	Akron	OH	44307	2/13/2014	I asked dr how many patients he has that are currently on IR oxycodone and could use a dose adjustment? Dr said a few. I asked him when the time comes to adjust a dose, why wouldn't OxyContin be a possible solution? Dr said it is and he likes it because it works. I reviewed the doses and conversions. I asked him to start with the 10mg q12 for a patient on Percocet 20mg a day and can titrate every one to two days. Dr said ok. Reminded about continuing to use Butrans for those patients needing that adjustment on tramadol. Dr said he really likes it and the patch patients love. I asked for continued use .
PPLPMDL0020000001	Cleveland	OH	44109	2/13/2014	Left OxyContin/Butrans initiation/titration guides for Campbell,Dzwis,Baker,Gelho and Gemechu
PPLPMDL0020000001	Lyndhurst	OH	44124	2/13/2014	Goal: find out age of most patients to tailor formulary coverage/ access @ end of call. Dr says majority patients age:20-50. She sees only a few elderly. Discussed opioid naive dose of 10 mg for OxyContin, which dr is now comfortable with. Ability to titrate to 15 mg if necessary in 1-2 days. Butrans opioid naive dose of 5 mcg hr discussed. Dr said female patient recently came to her on 300 mg Tramadol. Which dose of Butrans is appropriate for that patient? Responded with 10. Mcg/hr; if necessary can titrate after 72 hours. Discussed avoiding external heat sources. She was concerned, if patient. Is in heat all day, even though Butrans is covered with shirt, will patient be at risk? Responded with we have no clinical studies on that specific scenario. She was satisfied with response. Discussed black box warning, both products, respiratory depression.
PPLPMDL0020000001	Euclid	OH	44132	2/13/2014	Met with med asst, scheduled lunches, very appreciative of patient education in OxyContin essential kits. Promised to drop off Butrans patient guides next visit. Left urine screen flashcard, OARRS flashcard. Dosage strengths, indication, scheduling for each product discussed.
PPLPMDL0020000001	Akron	OH	44310	2/13/2014	I asked ER what criteria does he use to determine if he is going to treat a patient for pain or refer them out? Dr said he doesn't want to treat pain in anyone unless its a one time acute pain condition. Dr said it is becoming too difficult to prescribe narcotics to patients anyway with the laws and restrictions. I asked dr if he would keep a patient in the practice if they are on tramadol and need a dose adjustment that is confirmed a verified by you? Dr said maybe but doesn't want to beas then they just need more and more. I told dr what happens if you refer a patient to PM and it takes them 3 months to get in? Dr said the patient can take what they have been taking. Gave dr the Butrans Scott profile and OxyContin conversion guide.
PPLPMDL0020000001	Cleveland	OH	44114	2/13/2014	Reviewed OxyContin Q12h, 7 tablet strengths along with Butrans for those Tramadol failures requiring around the clock analgesia. He likes Butrans and its once weekly transdermal delivery system, reiterated that it has the same abuse potential as other CII opioids, Dr. just came back from medical leave and will be seeing patients on Wed/Thurs at this location
PPLPMDL0020000001	Tallmadge	OH	44278	2/13/2014	Dr came to window and said he doesn't have time to talk. I told him I need to speak with him about how he manages pain. Dr said he is trying not to do much but does know about Butrans after seeing my piece. I asked if he has used it and he said no but would rather prescribe a patch than a pill. I told him that's great to hear and told him its the only schedule 3, 7 day transdermal system on he market for moderate to severe pain. Gave dr the OxyContin conversions guide and the Kathy profile for Butrans. Dr took info and left.
PPLPMDL0020000001	Cleveland	OH	44109	2/13/2014	Intro. briefly discussed OxyContin q12h, 7 tablet strengths along with Butrans for those patients requiring around the clock analgesia, said that They have an Ortho. Dr. Pan agouti that also consults on treating pain. Will review info and consider. Lori- Nurse will call to schedule appt
PPLPMDL0020000001	Cleveland	OH	44103	2/14/2014	Reminded of OxyContin Q12h, 7 tablet strengths along with Butrans for those Tramadol failures, Said he continues to prescribe for appropriate patients and will keep Butrans in mind
PPLPMDL0020000001	Stow	OH	44224	2/14/2014	I told dr that he should think if Butrans as a product as his go to every time. Aliens is in pain around the clock and is failing tramadol. Dr said ok but he won't prescribe it to everyone who fails tramadol. I asked him what a patient looks like that he wouldn't prescribe it to? Dr said probably a patient who was still in acute pain after a month or two. I asked him then what he considers chronic? Dr said usually anywhere from 3-6 months. I asked him if he would consider Butrans at 3-6 months? Dr said he would and has. I asked for continued business for that patient type. Reminded him of OxyContin dosages and titration and told him to review the conversion and
PPLPMDL0020000001	Akron	OH	44312	2/14/2014	Quick hello in the hallway and asked him to continue finding good candidates like Scott, and showed him the profile, for Butrans. I also showed him the conversion and titration guide for OxyContin and asked him if it makes sense to convert a patient needing a dose adjustment on Percocet to OxyContin. Dr said he is continuing to look for good patients for Butrans and likes to refer patients failing Percocet to pain management because usually they need injuction or surgery.
PPLPMDL0020000001	Akron	OH	44319	2/14/2014	Led with the ERO insight and asked dr what criteria he uses to determine who is appropriate for an ER opioid? Dr said that for OxyContin, the patient has to be in severe pain like cancer pain. Dr said for Butrans, he is trying to decide who he is going to trial it on. I asked for ER opioids in general what does he look for? Dr said those who are failing their short acting product. I explained to dr that I understand what his criteria is and explained OxyContin q12 delivery, single entity opioid and showed him the conversion and titration guide and the conversions from Percocet. Dr asked what the doses are. Explained the doses, and titration. I asked dr if he will use oxycodone for those failing a 20mg Percocet? Dr said ok. I told him he can use it for any patient with moderate to every pain when a patient needs an opioid analgesic for an extended period of time. Reviewed Butrans Kathy profile and told him to use it for his tramadol and vicoden failures or before he goes to just write another refill. Dr said ok.
PPLPMDL0020000001	Akron	OH	44319	2/14/2014	Handed dr the OxyContin conversion and titration guide and Butrans initiation and titration guide and told him he needs to make sure his patients are on the most appropriate medicine. Dr said surer walked away. Nothing else learned.
PPLPMDL0020000001	Akron	OH	44320	2/14/2014	I asked dr what the downside is to using Butrans for her patients failing tramadol or vicoden? Dr said some things can get in the way like cost, side effects and patients not wanting a patch. I told her that she needs to be specific with her patient type selection. Reviewed cost issues, reviewed adverse events in opioid experienced patients and asked her what stands out? Dr said nothing really other than constipation incidence is low.k. I discussed again how important it is to be specific with insurance plans and patient type selection.k. Dr said ok. Discussed OxyContin doses, specific patient selection and conversions.
PPLPMDL0020000001	Cleveland	OH	44113	2/14/2014	Window call, reminded of Butrans for those Tramadol failures requiring around the clock analgesia along with OxyContin Q12h 7 tablet strengths. Said ok will consider
PPLPMDL0020000001	Cleveland	OH	44113	2/14/2014	Visited Anes/Pain Dept reviewed OxyContin Q12h, 7 tablet strengths along with/Butrans for those patients requiring around the clock analgesai with Dale PA
PPLPMDL0020000001	Cleveland	OH	44113	2/14/2014	Quick Reminder of OxyContin Q12h, 7 tablet strengths along with Butrans for those Tramadol failures, Said Ok referred to Shen/Dale
PPLPMDL0020000001	Fairlawn	OH	44333	2/14/2014	Told the technician about OxyContin and Butrans and she told me they are way too busy to talk. I left materials for Butrans and OxyContin and told the pharmacist Dave if he could look over the information and familiarize himself with it. He took it and said he would when he has a minute.
PPLPMDL0020000001	Akron	OH	44312	2/14/2014	Speaking to receptionist about getting time with dr to discuss OxyContin and Butrans. She told me he only sees reps with new products and had not seen Butrans. I asked if he will see me about it then dr walked up. I asked him if I can get a minute to discuss a few oxycotin and Butrans? Dr said he will look over Butrans and the staff will call me. Nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44113	2/14/2014	Reminded of OxyContin Q12h, 7 tablet strengths along with Butrans for those Tramadol failures, Said Ok Will help in reminding Daoud/Shen
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/14/2014	Dr told me that he is traveling to Las Vegas Saturday for a pain conference. Dr said he'll be back for their own conference for Friday. I asked dr if he has patients on Butrans that have hepatic or renal impairment? Dr said he does. I told him that I want to make sure he understands the information on these patients. Read the information from the section in the visad about special populations. Dr said and said it certainly doesn't stop him because its one of the only opioids he writes! I told him I appreciate it and to continue. Dr said his patients love it and do very well and dr said its safe for an opioid. I reminded him it can still be abused and misused like any other opioid. I told dr about using OxyContin for his Percocet patients and reviewed conversions. Dr said he doesnt use much but agreed that it works well for the right patient.
PPLPMDL0020000001	Uniontown	OH	44685	2/14/2014	Dr came to window and asked me if patients need ekg's with Butrans? I asked why he asks? Dr said he has a patient who has had some heart trouble and thinks he may be a candidate. I read from the FPI about the electrophysiology and QTc prolongation. I told him that he should error on the side of caution in patients with heart trouble or arrhythmias. Dr said ok. I asked him for continued use of the product and figure that he has a lot of opportunity in his practice to use it more often. Dr said he probably does. Nothing else learned.
PPLPMDL0020000001	Akron	OH	44312	2/14/2014	I asked dr when and why has he used OxyContin recently? Dr said he uses it when he knows a patient is already either already on oxycodone and is taking too many pills or for severe pain like cancer pain. I asked him how many pills it too many? Dr said it depends on the patient and what he's treating them for but usually around 4-5 pills a day. I asked why that many and he said he didn't know and that's just what he does. I showed him the conversion from Percocet 10mg to OxyContin 10mg q12. Dr said he understands and will try. I asked him to think more about his patients failing opioids before they get to Percocet like tramadol or vicoden. Reviewed dosing, conversions and Scott profile. Dr said he will try again. I spoke about how important patient specificity is important with previous medicine, pain conditions, and insurance.
PPLPMDL0020000001	Cleveland	OH	44114	2/18/2014	Reminded John MA, Butrans for those patients requiring around the clock analgesia, BWC and OxyContin Q12h for those appropriate patients, Savings cards, Said Ok Dr. will be back on the 24th
PPLPMDL0020000001	Cleveland	OH	44114	2/18/2014	Dr. is no longer practicing in OH, moving to Indiana. OxyContin/Butrans Core removal
PPLPMDL0020000001	Garfield Hts	OH	44125	2/18/2014	Visited Pain along with Ortho Dept. Left OxyContin/Butrans initiation guides along with Invite to HCP's for upcoming Dr. Laham program
PPLPMDL0020000001	Akron	OH	44312	2/18/2014	Dr said all his patients cancelled and has time to talk. I told dr that if I can stress anything about his patients is that I figure that he has many of them are on IR opioids for around the clock pain. Dr said he does for sure. I showed him the Scott and Kathy profiles and told him that these two patients types are good candidates for the product. Explained that when he knows the patients pain is secondary to a known pathology which is chronic, Butrans is a good option. Dr agreed and said he should be using it. Dr asked about cost. Discussed the plans most important to him like Caresource, medical mutual, SummaCare and coverage. I asked dr to start using and he said ok. Gave him the OxyContin conversion guide and explained the patient type profile.



PPLPMDL0020000001	Akron	OH	44312	2/18/2014	Quick messages to dr through window in between his patients. I told him to focus on patients who need a dose adjustment on IR oxycodone and are in around the clock pain. Showed him the conversion from Percocet.
	Tallmadge	OH	44278	2/18/2014	Shown him the Scott profile and told him the tramadol patient is a good candidaisis for Butrans who needs a dose adjustment. Dr said ok and has had some good luck with Butrans. Dr said he likes it and asked for copay
PPLPMDL0020000001	Akron	OH	44310	2/18/2014	Used the hydrocodone insight to start the call. I asked dr what he is doing when it comes to hydro one and what a normal prescription looks like? Dr said that its usually either one to two pills a day for more acute pain or intermittent pain or 4-5 a day for patients who require analgesia for more chronic pain. Dr said these patients are typically the older adults. Dr said he doesn't like treating chronic pain and will usually refer. Dr said he's usually too lazy to write ER opioids and wants the specialists to do it. I reviewed the Kathy profile and asked him if he would use Butrans like he has in the past. Dr said he will.
PPLPMDL0020000001	Akron	OH	44312	2/18/2014	D asked about a patient he had in complaining about his Butrans coming off in the pool during his hydrotherapy. I asked dr if he's used tagaderm or waterproof medical tape on the edges? Dr said he has not but said the patient is in the room now and said tagaderm is a good idea and gave them to him. Discussed his existing patients using Butrans and when. I told him that in the past he has told me that he is using it for his patients on Percocet who need more. I told him that many of those patients are good candidates but may be better suited for OxyContin. I showed him the Scott and Kathy profiles and discussed looking for triggers prove as good candidates for ER opioids. Discussed his thoughts on titrating and specificity of use. Dr said he will continue writing for those patients and still isn't convinced to use OxyContin because of its tight binding activity.
PPLPMDL0020000001	Akron	OH	44312	2/18/2014	Spoke to Elizabeth the Pharmacist. I told her I just cam from McRoberts office and I know they are using the product. I asked if they have patient on it? She said they have patients on the 5mcg and 10mcg. Reviewed dosing, patient type selection Scott and Kathy and conversions. Elizabeth said that that's good information to know. Reviewed the indication as well. Discussed OxyContin dosing, conversions from IR oxycodone and titration. She said they have all doses in stock and go through it regularly. She said that she tries to also tell patients about the long acting oxycodone and to ask their dr about it. I told her thank you and talked about copay cards for both
	Akron	OH	44312	2/18/2014	Spoke with dr at window about his patients he has recently placed on Butrans. Dr said that he just had a patient in yesterday that he started on Butrans 5 mcg a month ago who said he was doing well but needed more. Dr said he titrated to 10mcg. I reminded dr about steady state and dosing flexibility. I told dr about how important patient specificity is and reviewed Scott and Kathy. Dr said he like to start Butrans if a patient needs more than viconden. Dr said if they don't like Butrans he refers them to pain management. I asked what he has been told by his patients as to why they don't like it? Dr said the cases he has had are that the patients are abusers and he refers them to pain management. I reminded dr that Butrans can be misused and abused. Dr said he knows that but said he feels better about a patch for those patients. Dr said he ended more coupons for Butrans which I left. Gave him to OxyContin conversion and titration guide and asked him to us it for patients needing an adjustment on Percocet.
PPLPMDL0020000001	Akron	OH	44305	2/18/2014	Short lunch appointment due to him getting slammed with patients in the am. Discussed Butrans patient types and what triggers him to prescribe a ER opioid? Dr said that he will discuss the current therapy with the patient, abnormal function and exam, pain scale, MRI, and past use of narcotics. Dr said if the patient is getting inadequate control with the IR opioid and pain is consistent all day and they need more short acting, he said he will write an ER opioid. I asked dr to continue to think about patients on tramadol or viconden that need a dose adjustment. Discussed initiation, titration, use of Butrans in special populations and inclusion and exclusion criteria. I asked dr to continue prescribing. Discussed the use of OxyContin for his Percocet patients and reviewed when he sees the need to use a schedule 2. Dr said most of those patients get referred but will write it for the right patient that may not be a surgical candidate. I asked for his specificity of patient selection in patients like Tom.
PPLPMDL0020000001	Cleveland	OH	44125	2/18/2014	Quick Review of OxyContin Q12h, 7 tablet strengths along with Butrans for those Tramadol failures requiring around the clock analgesia, Said Ok will consider,
PPLPMDL0020000001	Garfield Hts	OH	44125	2/18/2014	Reinforced Butrans for those Tramadol failures requiring around the clock analgesia along with OxyContin Q12h, said Ok and will continue to look for appropriate new patients.
PPLPMDL0020000001	Tallmadge	OH	44278	2/18/2014	I asked dr that in most therapeutic classes and especially in the management of pain, using the lowest therapeutic dose is what is strived for. Dr said he would agree. I asked him when he writes a product like hydrocodone what it looks like? Dr said he has a couple of options for 5, 7.5 and 10/325. Dr said he also has options of 30, 60, or 120 pills wither q4 or q6. I asked him what that does to meet the objective of the lowest therapeutic dose? Dr said well it really doesn't. I showed him the Butrans Kathy profile and reviewed it. Reminded him its a schedule 3, 7 day transdermal patch and if he has some patients he can try it on? Dr said he does and has some patients that he could get off pills. Dr asked about the indication and I read it from the materials. Dr said it really sounds like a product he should use and asked about insurance. Discussed commercial, Medicare D and adequately controlled with present therapy. Asked Deena to assist
PPLPMDL0020000001	Garfield Hts	OH	44125	2/18/2014	Reviewed OxyContin Q12h flexible dosing strengths along with Savings cards, Also reminded of Butrans for those patients requiring around the clock analgesia, said he will consider, once again, feels most patients are
PPLPMDL0020000001	Barberton	OH	44203	2/19/2014	Spoke to Anita his daughter and office manager regarding both products and managed care and savings cards. Reviewed the Percocet to OxyContin conversion chart for visual aid. Dr said hello, Anita asked hi if he write Butrans yet and the dr said yes. I said do u have tramadol patients he said yes. I said those that are ready for a change in medications will I think of Butrans this week if they are appropriate? He said sure. Left Initiation n guide behind for him and showed Anita the starting dose for Butrans.
PPLPMDL0020000001	Cleveland	OH	44113	2/19/2014	Desk call reminded of OxyContin Q12h, 7 tablet strengths along with Butrans for those patients requiring around the clock analgesia.Said Ok will consider. Booked lunch appt.Asked Aurora Nurse to help reminding Dr.
PPLPMDL0020000001	Cleveland	OH	44113	2/19/2014	Saw Dr. as he was leaving. Reminded of OxyContin Q12h, 7 tablet strengths along with Butrans for those Tramadol failures requiring around the clock analgesia, Said Ok, referred to Issa again on PA's process
PPLPMDL0020000001	Cleveland	OH	44102	2/19/2014	Reviewed OxyContin Q12h, Butrans for those Tramadol failures requiring around the clock analgesia, along with Savings Cards, said OK, Nothing new learned
PPLPMDL0020000001	Cleveland	OH	44113	2/19/2014	Quick Window call, Reviewed OxyContin Q12h, 7 tablet strengths along with Butrans for those Tramadol failures requiring around the clock analgesia, Said Ok, possibly book appt for next Month to further discuss
	Akron	OH	44313	2/19/2014	I asked what triggers him to move to an ER opioid? Dr said when he knows the patient has no other options and the short acting didn't work. I asked him when that typically is and dr said its different based on the patient but usually if a patient needs more than 4 pills a day. I asked him if he follows the lowest therapeutic dose philosophy in treating pain? Dr said he does. I asked him how allowing a patient to take 4 pills a day does that? Dr said that's a good question. Dr said that he sees OxyContin as a product for severe pain like cancer pain. I told him it is indicated for severe pain but also moderate pain. I showed him the conversions from Percocet and how starting with a 10mg dose may be suitable to meet the lowest therapeutic dose philosophy. Told dr to use Butrans for those tramadol patients to also provide an ER option for them as well.
PPLPMDL0020000001	Fairlwan	OH	44333	2/19/2014	Gave quick review of the Maggie profile and asked dr if he would have done anything differently? Dr said he agrees w dr Balter to try and get patients on ER opioids ASAP if they are in severe pain which he said this patient seems to be. Dr said he would either start on 10 or 20mg of OxyContin with maybe a breakthrough medicine to start. I told dr that sounds like a reasonable place to start and that usually the lowest therapeutic dose is usually the method that works best. Dr agreed and said he is always trying to do that with his patients but they always want more. Dr said we can talk more next time.
PPLPMDL0020000001	Barberton	OH	44203	2/19/2014	Spoke to mrs. Kim the office manager and dr Kim's nurse bethanie. I asked about their largest managed care plans and they said Medco and express scripts, also workers comp they see. When I saw the doctor i reenforced Medco being their largest plan and decided to talk about coverage for Butrans and OxyContin for those patients with the savings cards. I asked the doctor if he tried Butrans ever and he said no. I did a quick overview of the product and asked him if he had Tramadol patients. He said some. I said find just one this week who is Not satisfied with their pain control and that you feel meets indication. We reviewed how to dose. As for OxyContin...I said does it make sense since the molecules of Percocet and OxyContin are the same that if your Percocet patient needs atc pain relief for an extended period of time you give them OxyContin? He said yes. Left reading materials such as naive study on Butrans and conversion guide for OxyContin.
PPLPMDL0020000001	Cleveland	OH	44120	2/19/2014	Requested appt with Sabina to conduct OxyContin/Butrans in-service
PPLPMDL0020000001	Norton	OH	44203	2/19/2014	Spoke to Pam the office coordinator. Explained about Butrans and asked if I could get a few minutes to explain the product to the doctor but they said no. I explained the molecule of Butrans and that it was a transdermal patch schedule 3. Left materials for the doctor.
PPLPMDL0020000001	Barberton	OH	44203	2/19/2014	Spoke to Andrea his nurse about the products and getting FaceTime, left my number for the doctor to call me if he wants to learn more about the products. Full review if Butrans to Andrea. Discussed indication, patch dosing, scheduling, where to leave patch, managed care and imitation. Also talked about OxyContin dosing and the start principals "tailoring the dose" . Andrea said she would pass the information over to the doctor. I asked for a breakfast or a 39 second interaction with the doctor. She said she will ask the doctor and call me if he changes his mind.
PPLPMDL0020000001	Akron	OH	44333	2/19/2014	Dr asked me about the conversions in the initiation and titration guide from viconden to Butrans. Dr said its confusing and asked why there is a 30-80mg of morphine range for Butrans 10mcg. I reminded that Butrans is a 7 day controlled release patch. Told dr that it is an approximate conversion and the 5 and 10mcg doses are the only initiation doses anyway. I asked dr if he still feels the same about not seeing much efficacy with the 5mcg? Dr said he doesn't get much analgesia from e 5mcg in most patients. I asked dr what his issue is because he can only start on the 10mcg anyway so the approximate conversion doesn't have much credence in his practice anyway. Dr said ok he gets it after looking more at it. Dr said he still doesn't like to write ER opioids because it's so hard to get them off. I asked him what his other option is for chronic moderate to severe patients is? Dr said that's the problem. There aren't any other options other than spinal implants or surgery. I told him the patients must be held accountable to do whatever they need to do above and beyond pharmaceuticals such as physical therapy etc... Dr agreed and said he will continue prescribing Butrans and OxyContin.
PPLPMDL0020000001	Stow	OH	44224	2/19/2014	Showed dr Bakter and Jones the Maggie profile for OxyContin. Gave abbreviate review of her case and the changes in prescriptions over the timeline. I asked dr Balter what he might do differently? Dr said he has told me numerous times that he tries to get patients on ER opioids as quickly as possible and in this case it didn't happen. Dr said he would of started the patient on probably 20mg of OxyContin q12 much earlier. I told dr i'm glad to continue hearing that and asked for continued business with oxycontin and Butrans for his patients on tramadol or viconden.
PPLPMDL0020000001	Stow	OH	44224	2/19/2014	Jamie said they are continuing to see both Butrans and OxyContin and she has seen titration down and then back up again on Butrans for a number of patients and doesn't really know why. She said the doctors may be trying to taper the patient down and then the patient complains about being in pain. Discussed steady state with Butrans and use of supplemental analgesia. I asked her about OxyContin and said she continues to do refills and some new prescriptions. Jamie said that she has been seeing a. Lot of 20mg OxyContin from a pain dr in Akron. She said she couldn't remember the doctors name. Provided copay cards.
PPLPMDL0020000001	Norton	OH	44203	2/19/2014	Saw Wanda and her nurse at window. I asked her if she had an opportunity to try Butrans after a Tramadol failure yet? She said no. I asked her what concerns did she have initiating Butrans after Tramadol if appropriate, she said none. Reminded her the 5 mcg starting dose, 4 patches a month, it was schedule three w refills and they could supplement. I asked her to keep an eye out during the next few days of assesment visits. She said ok. Left naive study and OxyContin. Materials for dr Stokes and other doctors.
PPLPMDL0020000001	Barberton	OH	44203	2/19/2014	Asked if he was familiar with the molecules in Percocet and OxyContin and he said yes. After review of delivery system we talked about stocking and he said they have limited amounts of OxyContin. We reviewed savings card for both oxycontin and Butrans. Pharmacist knew of Butrans. Discussed patch location and scheduling.
PPLPMDL0020000001	Akron	OH	44333	2/19/2014	Dr said that she has a patient this week on Butrans for about a month that complained about experiencing nausea on about day 5 with the Butrans patch. Dr said the patient said its working really well until about day 5 and said she thinks its wearing off. Dr also said that the patient stated that once the next new patch is applied the nausea goes away. I asked if the patient could be having withdrawal and I told her its unlikely. Dr said the patient is taking the 5 mcg patch and it does provide a lot of relief. I asked dr if the patient is going to continue and she said she is because it works. I discussed patient specific initiation and discussed Scott and Kathy profiles. Discussed OxyContin and reviewed Maggie profile.
PPLPMDL0020000001	Barberton	OH	44203	2/19/2014	Gave stokes nurse (Jennifer, to double check her name) the naive study for Butrans and patient brochures. Also gave her to pass OxyContin conversion slim Jim for doctor to review. I explained the naive study...patients never on opioid therapy yet with a pain condition lasting at least 3 months. Reviewed the starting dose of 5 mcg. Explained the patches are to be worn for a week, 4 patches a month. Reviewed scheduling and supplementation with Butrans.
PPLPMDL0020000001	Cleveland	OH	44103	2/20/2014	Discussed Butrans/OxyContin for appropriate patients, reiterated her Medical facility's directive, will continue to consider.
PPLPMDL0020000001	Cleveland	OH	44103	2/20/2014	Reminded of OxyContin Q12h, 7 tablet strengths along with Savings Cards along with Butrans for those Tramadol failures requiring around the clock analgesia, Said Ok, believes his patients are adequately controlled on present therapy but will consider for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44112	2/20/2014	Reminded of OxyContin Q12h, flexible dosing strengths along with Butrans for those Tramadol failures requiring around the clock analgesia, Asked her why not Butrans for those patients she sends to PM? Said no reason but will consider

PPLPMDL0020000001	Cleveland University Hts	OH	44103	2/20/2014	Reviewed w/tech RPH Allen floater OxyContin Q12h and Butrans for those Tramadol failures, hasnt seen any Butrans, nothing new learned
PPLPMDL0020000001		OH	44118	2/20/2014	Reviewed Butrans for those Tramadol failures requiring around the clock analgesia,Savings Cards, BWC said he has some patients to consider, Reminded of OxyContin 7 tablet strengths, Q12h, formulary coverage along with Savings cards, Said Ok believes patients are doing well on present therapy but will consider for appropriate patients
PPLPMDL0020000001	Euclid	OH	44117	2/20/2014	Discussed Tanisia's experience with BWC access for OxyContin patients. She states she's had continued success getting OxyContin through easily on BWC. Butrans, she has no recent experience with BWC patients.
PPLPMDL0020000001	Cleveland Cuyahoga Falls	OH	44109	2/20/2014	Reviewed OxyContin/Butrans Pl, Dr. Said thank you but is leaving Metro, no other info learned
PPLPMDL0020000001		OH	44221	2/20/2014	Dr told me she wants to start a patient on Butrans who is very sensitive to opioids and has tolerability issues. Dr said the patient has been through most opioids without getting enough analgesia. Dr said the patient suffers from chronic constipation and nausea. Discussed Butrans AE profile and retold her about the incidence of constipation and nausea. Dr said to check with Lori about insurance coverage. Lori provided me with everything and past history of opioids. Patient has med D UHC aarp and anthem secondary. Told dr i will look into it and follow up. Left her w/ OxyContin conversion and titration guide
PPLPMDL0020000001	Cleveland Uniontown	OH	44115	2/20/2014	Visited Pharmacy requested appt with Sabina- Fairhill location, Left OxyContin/Butrans Initiation/Titration guides
PPLPMDL0020000001		OH	44685	2/20/2014	Spoke with Todd again and discussed The pharmacy dispensing of Butrans and OxyContin. Todd said that he did order the 10mcg because he got a new patient started on the 10mcg. I asked him if he knew who prescribed it and he said he didn't and didn't seem like he wanted to look. I reminded him of the dosing and titration as well as conversions. Todd said they dispense OxyContin and have kept it mostly to the 10, 20,40 mg doses. He said they don't get scripts for the high doses for come reason. I reviewed dosing and patient types appropriate for he product.
PPLPMDL0020000001	Stow	OH	44224	2/20/2014	Quick hello in hallway while I was meeting with the office manager. Sandra said she sees some good results with Butrans lately and is impressed its getting covered on insurance. I asked her why she's so surprised because coverage is really good. Sandra said she started come one recently from vicoden and was taking about 4-5 pills a day and used the Butrans 10mcg. I told her that's a good starting dose and reminded her about titration through the 15 and 20mcg. Sandra said she forgot about the 15mcg dose. I asked for mor prescribing.
PPLPMDL0020000001	Cleveland Uniontown	OH	44106	2/20/2014	Visited Bolwell Pharm. And Seidman. Left OxyContin/Butrans Initiation/Titration guides, Requested appts
PPLPMDL0020000001		OH	44685	2/20/2014	Saw Abby in uniontown and discussed products at front counter. Abby said she was just discussing Butrans with dr Fouad and the conversions. I asked Abby if she has any questions? Abby asked about morphine equivalents for Butrans. I showed her the conversion slide scale and reviewed it. Abby said ok and that dr Fouad talked about where he is finding most success and its with his elderly population. I asked Abby what she thinks and she said it makes sense because they don't like change much and would like the 7 day patch. I told her that there are many populations that are appropriate for Butrans as long as they meet the indication. I asked if she has discussed OxyContin with any other providers in the office yet? She said a little and said we can discuss at a lunch.
PPLPMDL0020000001	Cleveland Euclid	OH	44106	2/20/2014	Reviewed OxyContin Q12h along with Butrans for those Patients requiring around the clock analgesia, Marge said Ok, recommended Seidman as a focus along with Hayek
PPLPMDL0020000001		OH	44119	2/20/2014	Addressed Paul's concerns regarding patient selection and morphine equivalent dosing for Butrans. Placement after Tramadol, starting patients on 10 mcg hr makes sense to him; he has several patients that he can think of immediately, and will initiate a few patients tomorrow (Friday 2/21/14) Discussed supplemental analgesia and steady state of 72 hours. Opioid naive dose of 10 mg for OxyContin discussed. BWC access for both Butrans and OxyContin. Introduced and left PAP journals.
PPLPMDL0020000001	Akron	OH	44312	2/20/2014	Dr said the patient was taking about 20 mg of vicoden and was still complaining of pain. Dr said she started on the Butrans 10mcg and the patient just was back in for a follow up this week. I asked how the patient is doing and she said very well and it was covered on the patients insurance. I showed her the Scott profile and asked her to continue reassessing her patients on tramadol for Butrans. I asked her if she has patient like Scott and she said a few. I asked her if she has patients on Percocet? Dr said a few why? I asked if it makes sense to keep a patient on oxycodone but use a q12 oxycodone? Dr said she doesn't want to write schedule 2 medicines. Dr told me we can discuss next time and that she may be closing her practice the end of March.
PPLPMDL0020000001	Stow	OH	44224	2/20/2014	I asked dr what type of patient he would treat for moderate to severe pain instead of referring? Dr said he will use products for pain above and beyond acute pain when he knows the patient is not a candidate for surgery and has already had injections. I asked him if he has any of those? Dr said he does and he is currently refilling OxyContin for a few of them. I asked dr to reassess patients already on IR oxycodone and meet his requirements. Dr said ok. I also asked him to continue assessing patients for Butrans like ones on tramadol or vicoden. Reminded him Butrans is a schedule 3,7 day patch.
PPLPMDL0020000001	Barberton	OH	44203	2/21/2014	Dropped off the posted and asked about the George profile for OxyContin. Dr said he sees these types of patients I referenced the Initiation guide of Butrans and asked hi. What made more sense Butrans or OxyContin for appropriate patients he said most his patients are under 40mg of hydrocodone,,I talked how to start the, on Butrans if appropriate.
PPLPMDL0020000001	Cleveland	OH	44113	2/21/2014	Discussed Butrans for those Tramadol failures requiring around the clock analgesia, said he likes Butrans for those appropriate patients Reviewed OxyContin Q12h and 7 tablet strengths, said Ok. sending patients to PM, Asked if would initiate Butrans or OxyContin for appropriate patients when referring to PM, said he will consider
PPLPMDL0020000001	Norton	OH	44203	2/21/2014	Asked the doctor if there were any changes not letti them write scheduled products and the doctor said no. We talked about trigger signs of when he turns to extended release products and the doctor could. I state anything. Focused in the Maggie profile for oxycontin and the dosing, asked hip. if the conversion from Percocet to OxyContin makes sence if they met indication and he said. Dr knew nothing of Butrans reviewed the product and the tramadol Scott profile dr said he would try to write Butrans in appropriate patients.
PPLPMDL0020000001	Norton	OH	44203	2/21/2014	Dr knew nothing of Butrans. Reviewed scheduling, patch placement and initiation guide. Dr said he would try it if he found an appropriate patient. Focused on the Scott profile. Reviews OxyContin dosing and Maggie profile.
PPLPMDL0020000001	Cleveland	OH	44127	2/21/2014	Reviewed OxyContin Q12h and 7 tablet strengths, said Ok. will consider for appropriate patients that are taking IR around the clock Reminded of Butrans for those Tramadol failures requiring around the clock analgesia, Said he will consider
PPLPMDL0020000001	Cleveland Lyndhurst	OH	44113	2/21/2014	Visited Ortho Dept. Bohl, Reviewed OxyContin flexible dosing along with Butrans for those patients requiring around the clock analgesia
PPLPMDL0020000001		OH	44124	2/21/2014	Goal: Present patient profile, encourage Dr Kim to consider OxyContin 10 mg initiation for patient like George; ask him to hand out savings card to a patient like George BEFORE he or she leaves the office. Is this a reasonable request? yes replied dr. Transition to another option for opioid naive patients like Maria: Butrans, 5 mcg hr. 1 patch week, 4 patches a month. A good option for BWC patients.Can call in with refills. non branded PAP pain journals presented and left. He will hand out when appropriate, could be of value.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/21/2014	Jake told me about a female patient of his who was on Butrans and was complaining of severe headaches. Jake said that he's not convinced that it was Butrans that was causing the headaches because the patient was also on other medicines that were being delivered systemically. Jake asked about the incidence of headache. I showed him the AE's from the opioid experienced trial and he said the incidence is lower than he expected. I asked how many patients he has seen with headache on Butrans and he said this was the only one. Discussed OxyContin doses, patient profiles and jake said he really likes it for the right patient like Maggie discussed but tries to go to ER opioids ASAP.
PPLPMDL0020000001	Mayfield Heights	OH	44124	2/21/2014	Goal: meet with office coordinator Denise, find out if practice has weekly/monthly staff meetings, where I can present information to "no see" HCP such as Dr. Dews. They have 1x month staff meeting, and have NOT had Feb meeting yet. She will present my information @ staff meeting including: PAP web keys, OARRS, Medical Board, urine screen flashcards. OxyContin conversion/titration guides; Butrans initiation/titration guides. Left packet for Dr. Dews, (as well as CNPs: Gina and Josie, and new PA-C Frank).
PPLPMDL0020000001	Cleveland Lyndhurst	OH	44102	2/21/2014	Quick Review of Butrans for those Tramadol failures requiring around the clock analgesia along with OxyContin Q12h, 7tablet strengths, Said she will consider , left Initiation/Titration guides
PPLPMDL0020000001		OH	44124	2/21/2014	First lunch with Patricia. 1x day with American Migraine center, tues - fri: VA. Used George profile, opioid naive dose of 10 mg Q12 h. Patricia states she does not write any CII's. I then presented Butrans, a CIII option. Can be called in with refills. She asked about a few patients currently on 6 Vicodin daily, either 5 mg or 7.5 mg, q 6h. What would be conversion dose to Butrans? I showed her Butrans initiation & titration guide for starting dose of 10 mcg hr, or, if patient on 30 mg or less of morphine equivalent, she should initiate 5 mcg hr butrans. Ability to titrate in 72 hours. Showed how to write, discussed proper application and disposal, Trial, savings. She will try Butrans on a few patients and let me know how they tolerate.<font color=blue><b>CHUDAKOB's query on 02/26/2014</b></font>Jenny, have you designated Patricia as non-call file?<font color=green><b>BALLIE's response on 02/27/2014</b></font>Yes, just this evening, thanks for reminding me!!<font color=blue><b>CHUDAKOB added notes on 03/02/2014</b></font>She is certainly not someone we want to do a lunch with in the future. I think you would agree?
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/21/2014	Dr looked at the Butrans poster of the lumbar spine and said he wanted me to bring some to the hospital. Dr said he sees the 15mcg dose but said he will not titrate more than a 10mcg dose. I asked him if he titrates any other medicines for pain? Dr said he does but only to specific levels. I reminded him of the opioid exercised trial and the forced titration and tolerability. Showed dr the OxyContin conversion guide and discussed his use of it in his patients already on IR oxycodone.
PPLPMDL0020000001	Lyndhurst	OH	44124	2/21/2014	Lunch. Followed up on patient types for OxyContin and 10 mg opioid naive dose. Steady state, and titration in 1-2 days if needed. Detailed CNP Patricia Moran at same time. Patricia says she does not write any CII's. Transitioned to CIII option, 1x week Butrans. Pain reduction insight, Butrans pain score reduction BUP 3024. Satisfied with pain reduction. Questions regarding side effect profile were addressed and answered to satisfaction. Review of Butrans initiation/titration guide, 5 mcg hr start dose for opioid naive and 10 mcg hr for opioid experienced. Showed how to write, can call in with refills.Updated formulary coverage, Medicaid coverage with prior authorization for both. note: very few Medicaid patients. ALSO; DR DEB REED OUT FEB 24-28. ** for marketing: will Purdue ever have available, a pain diary for Migraine patients?<font color=blue><b>CHUDAKOB's query on 02/26/2014</b></font>Jenny, this looks like you entered a call on Patricia Moran under Dr. Roda. It is very difficult to determine who this call was to and who said what to whom? Can you please clarify?<font color=green><b>BALLIE's response on 02/27/2014</b></font>I'm sorry for confusion. This call was for dr Roda; yet a reminder that I detailed them at same time; and had to tailor parts of my call to to needs of two different HCPs. Dr Roda was the HCP that should have been highlighted in this call note. She was the HCP who also asked if Purdue is planning on offering a PAP journal geared toward migraine patients.<font color=blue><b>CHUDAKOB added notes on 03/02/2014</b></font>OK. Thanks for the clarification
PPLPMDL0020000001	Stow	OH	44224	2/21/2014	Dr spike to be about using NSAIDs and how he proceeds through treatment. Dr said that he believes strongly in trying to use just NSAIDs or tramadol for treatment and for most of his patients they work great along with physical therapy and lifestyle adjustment. Dr said that he finds that Butrans is a great product to go for when patients either don't get a ouch pain relief with non narcotics or can't tolerate them. I asked why he has found this with Butrans. Dr said he believes Butrans is more for moderate pain patients and that the patch delivery makes it more appealing to him and his patients. I told dr that Butrans is also he only schedule 3 , 7 day transdermal system. Dr said the schedule 3 makes it great as well. Dr took the OxyContin conversion and titration guide as well.
PPLPMDL0020000001	Cleveland	OH	44127	2/21/2014	Reminded of Butrans for those Tramadol failures requiring around the clock analgesia, Asked her when patients fail on present therapy what does she do? Said she feels patients are adequately controlled but will consider. Reviewed OxyContin Q12h and 7 tablet strengths, said Ok. Asked again for Josie's help with Butrans PA's
PPLPMDL0020000001	Akron	OH	44310	2/21/2014	Dr spoke to me about how he is trying hard to get patients off OxyContin and other scheduled opioids. I asked what and to explain. Dr said he does use OxyContin for post operative pain and will not go higher than 20mg because patients don't need more than that. Dr said he will write 30 pills of OxyContin and sometimes 60pills then will take them down to Norco to make sure they aren't getting more than they need if an ER opioid. I reminded him of the dosing flexibility of OxyContin and that Butrans transdermal patch which is a schedule 3,7 day transdermal patch. Dr took the information and said he would look it over.
PPLPMDL0020000001	South Euclid	OH	44121	2/21/2014	Dr Flagg still with a few patients that had 2-30 appts. Not a good day. Asked Jen when the best day/time would be for chance to talk with dr. WED just before lunch. Discussed OxyContin as controlled release option, dosed q 12 h, after patient is no longer prn on Percocet or oxycodone.
PPLPMDL0020000001	Lyndhurst	OH	44124	2/21/2014	Hallway. Spoke with med ast Helen. Dr took vacation day, will be back MON 2/24. Discussed Butrans as CIII option, can be called in with refills.1x week patch, 4 patches monthly. Left Butrans patient guides. OxyContin, CII option, q 12 h dosing recommendation.

	Lyndhurst	OH	44124	2/21/2014	Hallway. Sarah had PA student (Edie) shadowing her; should be there another 2 months. Insight # 14, (37% of patients who visit primary care are initiated on long acting opioid as first opioid) This is something Sara would not do. Patient would typically initiated on a few short actings after nsaid, ibuprofen. That's great place to start Butrans. You have two options: opioid naive at 5 mcg hr, or opioid experienced, after Tramadol patient is no longer prn, and needs analgesia around the clock. Discussed her previous comments with Butrans being affordable in Med D population, updated Med D plans. BWC patients another good group for consideration. OxyContin also has opioid naive dose, 10 mg q 12 h. I'd like to discuss this (George) patient profile next visit.
PPLPMDL0020000001	Mayfield Hts	OH	44124	2/21/2014	Discussed Managed Care insight. (10,000 baby boomers will turn 65 over daily, and will continue over next 20 years) Butrans as option for these Med D patients, focusing on Med D plans in his area where Butrans is preferred. Reminder of Butrans after Tramadol prn, when patient needs around the clock, long acting product like Butans. Discussed new Butrans patient guides and left supply had been waiting on. Transitioned to OxyContin. George profile, where should we go next with this patient? Dr responded an opioid trial. Yes, and will you consider OxyContin 10 mg q h for patient who walks into your office like George. Dr responded yes, that makes sense.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/21/2014	Followed up on Mark Gutkowski's (Thurs 3/20/14) Laham speaker program. Dr looked over materials at the pain seminar and spoke about using Butrans for a majority of his patients who ask for something different for their pain. Dr told me that he has used the 15mg dose a few times and thinks it was a good addition to the doses. I asked him when he is typically going to Butrans? Dr said it is his go to ER opioid because he believes it works well, tolerated well and has good do coverage. I told him that's great to know and to continue using.
PPLPMDL0020000001	Stow	OH	44224	2/21/2014	Dr said that he is using more Butrans recently. I told him that's great to know and asked where he has been using it in his treatment plan? Dr said he is only using it when patients are not surgical candidates, he knows they are legitimately in pain and its chronic. Dr said that he has yet to see his recent patients back but is expecting good things. I asked dr to continue prescribing and to continue taking patients already on IR oxycodone and putting them on OxyContin. Dr said that's where he has found results but said that he lets the people at Western Reserve pain deal with the schedule 2 opioids. Dr said they don't even do much and said he knows how much they like Butrans. I asked for continued prescribing.
PPLPMDL0020000001	Lakewood	OH	44107	2/24/2014	Dr said I had been coming too often and that he has told his pa Hanna about Butrans and perhaps she will find someone to start the product on. Dr didn't want to go over the details of Butrans because he felt he remembered from last time. I used words like understood. Dr apologized for being short then explained he had 30 ppl in the hospital and was on call over the weekend. Dr said no one wants to write opioids any more I asked if he has been told he couldn't write schedule 2's. He said no. I said how can I help you today? He said he just needs to wine down cause thus was his only break. I said of course, understood. Gave him OxyContin slim Jim to
PPLPMDL0020000001	Cleveland	OH	44125	2/24/2014	Reviewed OxyContin along with Butrans Savings cards program with Angie-Rph, NO new info learned
PPLPMDL0020000001	Cleveland	OH	44113	2/24/2014	Reviewed OxyContin Q12h and Butrans for those Tramadol failures requiring around the clock analgesia, No new info learned
PPLPMDL0020000001	Cleveland	OH	44113	2/24/2014	Reviewed OxyContin Q12h, 7 tablet strengths along with formulary coverage, Said Ok will consider, Presently seeing alot of Orhto Patients. Asked for his help with Dr. Shen and Butrans-reminded for those patients requiring around the clock analgesia, said he will keep reminding
PPLPMDL0020000001	Akron	OH	44333	2/24/2014	Used the oxycodone/APAP insight and 35% of patients 90 days or longer. I asked dr when does he decide that a patient is appropriate for ER oxycodone? Dr said he tries to get patients on something ER as soon as he can but he has a lot of Medicaid patients and Medicare patients who's insurance won't cover many of the ER products. I asked if he has commercially insured patients? Dr said yes. I told dr that he should focus on those patients already on IR oxycodone or Percocet who have been on it for 90+ days and still in pain. I told dr those are the patients that are appropriate for OxyContin and have the best shot at a fair or low price. Dr said ok. I asked dr if I can come in next time and discuss it more? Dr said he doesn't know when he has time. I told him I will continue to try each week to get just a minute or two to discuss OxyContin appropriate patients and those who are also suited for Butrans as a solution. Left him with dosing and conversion guide to OxyContin and Butrans.
PPLPMDL0020000001	Cleveland	OH	44113	2/24/2014	Quick Call in hallway, Reminded of Butrans for those patients requiring around the clock analgesia, Said Ok, likes Butrans, asked Dale for help in reminding her to prescribe for appropriate patients. Inquired about formulary grids for both OxyContin and Butrans
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/24/2014	Followed up with dr Ali from the pain seminar on Friday of last week. Dr said he really liked the Butrans posters and wants some for the inside of the door for his exam rooms. Dr said he wanted at least three but said that other doctors in the practice might want them so he said he will let me know if he needs more. I asked dr besides the hospital, when does he think patients is ready to be put on OxyContin? Dr said his decision doesn't depend on it being an inpatient or outpatient. He will start an ER opioid like OxyContin if they have been on an IR for more than 90 days. Dr said it doesn't make sense to keep them on the IR opioid. D said IR opioids are for short term use only like for post op or acute pain. I told dr that's good to hear and he said OxyContin is his go to and I know that. I told dr thanks for the business and I'm glad he has had so much success. Reviewed patients appropriate for Butrans also and handed him the Kathy profile. I asked him to initiate Butrans for his hydrocodone patients not to goal instead of moving to oxycodone. Dr said ok.
PPLPMDL0020000001	Lakewood	OH	44107	2/24/2014	An extended release opioid isn't for everyone one. For example...showed Initiation guide patients over 40 mg total dose of oxycodone would not be appropriate for Butrans. However....if you had someone on that was on a short acting oxycodone like Percocet and you thought they would be appropriate for an extended release product could you then consider OxyContin?
PPLPMDL0020000001	Fairlawn	OH	44333	2/24/2014	Asked dr what he typically does for patients in pain around the clock that are on Percocet 20mg/day who tell him they are still in pain? Dr said he likes to give Percocet a good enough chance and will usually go to anywhere from 20/49mg of Percocet a day. I told him then that's about right to move a patient to ER oxycodone. Dr said he uses OxyContin and likes it. I told him that's great but that I don't want him to miss any opportunities to get the right patient on the right medicine. Dr said ok. I told dr that the last time we spoke he said that his perception of Butrans was that it wasn't covered well on insurance. I told him the first thing he needs to do is identify the right patient. I told him the ultram patient is a good candidate who needs a dose adjustment. Showed him the conversion scale and asked him to just use it.
PPLPMDL0020000001	Fairlawn	OH	44333	2/24/2014	Spoke with Gilbert and Sue about OxyContin doses in stock and reminded Gilbert that he said last time that they needed to place an order of the 20mg because they had patients needing it. Gilbert said they got them in the next day and have all doses in stock. Gilbert spoke about making sure patients prescriptions are checked and OARRS is used as well as checking IDs for all narcotic prescriptions. Gilbert talked about how in some cases he needs to verify and discrepancies wit the patient first then contacting the office I asked him who he is seeing OxyContin coming from most recently? Gilbert said he is seeing more recently from dr Petrus and just got a new Rx for OxyContin today from him. Discussed Butrans dosing and conversions and importance of patient specificity.
PPLPMDL0020000001	Lakewood	OH	44107	2/24/2014	He said what can u do for u. I said I was here for his patients with osteoarthritis that are requiring an atc extended release opioid...say OxyContin or Butrans. He asked managed care...discussed coverage and coupons. Showed demo patch of Butrans...talked about osteoarthritis from NSAID to Butrans 5mcg. Discussed patch placement and 4 a month. Dr said he would try it.<font color=blue><b>CHUDAKOB added notes on 03/10/2014</b></font>-Lisa, just as a reminder, remember to use pronouns in your call notes so we know who said what. "I showed the demo patch. I discussed patch placement.... You did this in most instances. Just a
PPLPMDL0020000001	Tallmadge	OH	44278	2/24/2014	Continued conversation from last week about Butrans and patients appropriate for it. I told dr that he said last week that he said he knows he has patients where the Butrans patch might work well because they can't tolerate pills or they are not working. Dr said he will be trying it out on a few patients. Discussed the profiles, conversions, how to initiate and titrate and asked for the business. Dr said he will keep me up to date and to let me know if he has questions. Discussed OxyContin and asked about his experience with it? Dr said he has no problem using it as long as its the right patient. I asked what that means to him and dr said after OARRS, a UDS and determining that he patient needs more pain relief he will prescribe it. I asked him if he has ever considered the OxyContin 10mg for a patient uncontrolled on Percocet who meets his other criteria? Dr said for sure as long as its cost effective. I asked him to start using OxyContin for those patients on low dose Percocet who he thinks need an ER opioid.
PPLPMDL0020000001	Highland Heights	OH	44143	2/24/2014	Met wit med assistant @ front window. Left how to protect your practice brochure. Discussed Butrans as option for BWC patients and those patients who are no longer prn on Tramadol. Left dr Butrans initiation titration
PPLPMDL0020000001	Tallmadge	OH	44278	2/24/2014	Led with OxyContin and insight about oxycodone and 35% and 90 days. Explained OxyContin indication, doses, conversions and titrations. Quick review if Maggie profile. Valerie said she needed to get to a meeting and said that she will say that she will write OxyContin for the right patient like I described. Discussed Butrans dosing, indication, conversions and patient types. Valerie was that she has tried it but it got denied by insurance. I asked which plan and she said she thought it was a Medicare patient. Reviewed Caresource PA and other plan coverage. I asked her to just give it a shot in a patient like Scott or Kathy. Valerie said she would give it another shot.
PPLPMDL0020000001	Lakewood	OH	44107	2/24/2014	Gave the extended release insight as to why I was here today. Discussed tailoring with OxyContin...reminded him of the 7 strengths and that if the Percocet patient was doing prn around the clock would it it mke sense to convert them to OxyContin with same oxycodone molecule and savings cards. He said yes. I said another extended release product which is Schedule 3 called Butrans showed him the demo, he said it needed to be titrated. I said what do you mean? He said you have to push the dose often. I focused in on the Tramadol, patient, he agreed he see these types of patients. If they are uncontrolled and you felt they would be appropriate for an extended release product you would start them on 5mcg. Showing the initiation guide. If they needed more pain relief you could increase the dose...but wouldn't you titrate any opioid that was at the lowest strength if pain control was not yet achieved? He said yes. I encouraged a trial this week of the uncontrolled Tramadol patient to Butrans. Left the naive study for his review.
PPLPMDL0020000001	Tallmadge	OH	44278	2/24/2014	Led conversation with drs Bachtel and other drs at table by using the oxycodone insight and 35% on 90 days or longer. I asked dr why he thinks that is and what has led to this problem? Dr said cost is for sure one, unwillingness of the GP to use an ER opioid like OxyContin, and patients not wanting them. Dr said he believes the statistic and said it sounds a little low. Dr said he likes to go to an ER option like OxyContin once the patient had hit the 90 days. Dr said he likes OxyContin because it works but said its just not covered well and that sometimes limits him from using it more. I asked where he has been having trouble and he said for his Medicaid population. I asked him if he has commercially insured patients? Dr said he does. I asked if he has Medicare patients? Dr said he does. I asked him to focus on those two patient populations for best managed care and cost success. Reviewed conversions, single entity opioid and asked if it makes sense to take patients already on oxycodone and convert them to OxyContin? Dr said it does and admitted he should do it more. I asked for more business. Reviewed Butrans key selling messages and patient profiles as well as conversions. I asked him to try it and allow it to prove itself clinically. Dr said he will try.
PPLPMDL0020000001	Cleveland	OH	44114	2/24/2014	Reviewed Butrans for those Tramadol failures requiring around the clock analgesia, Said he will consider, Reminded Of BWC, said ok.
PPLPMDL0020000001	Lakewood	OH	44107	2/24/2014	Discussed the last he w write OxyContin 10mg q12h? Dr said he doesn't use much of the tens. I asked if it was nice to have the option of 7 strengths for a tailored approach. He said yes. I asked if he had any questions regarding Butrans and his patients over 55? I said I'd be back tomorrow to discuss it. He said ok.
PPLPMDL0020000001	Tallmadge	OH	44278	2/24/2014	Led discussion with oxycodone insight and engaged in discussion about when is the right time to start an ER opioid. Dr said that he tries to start them after 90 days has been met but lots of resistance is given in doing so. Dr said he has no issues with OxyContin but said once they are at a point of maybe being right for it, he would rather the specialist handle it. I asked dr if he has taken a patient to Percocet from hydrocodone? Dr said yes a few? I asked why? Dr said its typically the next step. I asked him if he thinks some of those patients would be appropriate for an ER opioid based on the pathology of the patient and what they are being treated for? Dr said it does depend on what is he treating them for. Dr said he will start a patient on an ER opioid if he knows he feels comfortable treating the pain. I asked dr for OxyContin prescriptions in the right patients like we discussed
PPLPMDL0020000001	Akron	OH	44333	2/24/2014	and reviewed conversions and dosing. His key selling messages for Butrans along with patient types and conversions. I asked for him to just try it again. Quickly read over a Maggie profile with dr in hallway and asked him if he would do anything different? Dr said yes, many things. Dr said the one thing he will say today is that he would have started OxyContin earlier. I asked why and dr said because its obvious the patient needs more than what has a short acting product can provide. Dr said he likes OxyContin and will continue to use it. I reminded him to also use Butrans for those patients who are failing their ultram or vicoden and handed him the conversion guide. Nothing else learned.
PPLPMDL0020000001	Cleveland Hts	OH	44118	2/24/2014	Reviewed OxyContin Q12h, 7 tablet strengths along with Butrans for those Tramadol failures requiring around the clock analgesia, Said Ok. not prescribing. Ask if he would prescribe Butrans for those he sends to pain mgmnt, Said Ok...nothing else learned
PPLPMDL0020000001	Akron	OH	44312	2/24/2014	I asked dr what the downside is to placing a patient. on ER oxycodone from IR oxycodone when the patient is in pain around the clock? Dr said there really isn't one and he likes OxyContin. I asked him where and when he primarily uses it? Dr said by looking at the conversions I showed him he uses it as shown, from Percocet. I asked him if he would use it when a patient is failing 20mg oxycodone and use the OxyContin 19mg q12? D said yes. I asked for more business and then told him that the other option for patients failing their short acting opioid is Butrans. Showed him the Scott profile and asked if he has patients like him? Dr said he has a few. I asked for him to just try it. Dr said ok.
PPLPMDL0020000001					

	Lakewood	OH	44107	2/24/2014	<p>Tramadol insight. Dr didn't have much to say but she listened. Bridged the conversation about extended release opioid products. Dr said she doesn't have a problem writing extended release opioids if they are appropriate. We discussed the Percocet patient and when she would convert a patient. Dr didn't want to talk. I asked her if it made sense to convert them to OxyContin if appropriate for an atc extended release product. She nodded. I asked what patient type came to mind when I said OxyContin? She didn't want to comment. I said a patient like George or Maggie? Showed visual aid. She said George. I talked about why it was appropriate for oxycontin...also reminded the 7 strengths and mentioned the 10 mg for the opioid naive patient. She said true. Bridged to Butrans. Showed her the demo. Focused on the Tramadol patient uncontrolled that would be appropriate for Butrans. Also touched on the Initiation guide to demonstrate where to start Butrans. I asked if she had any questions thus far,,but the dr didn't want to talk.</p>
PPLPMDL0020000001	Fairview Park	OH	44126	2/24/2014	<p>Spoke to Katrina the ma and she said she didn't know anything about Butrans and knew of OxyContin. I asked to set up an opioid Inservice on the two products and try an address any concerns, she said she would ask the doctor. I left the naive study of Butrans along with savings cards for each product. I highlighted what Butrans is: opioid, schedule 3, indication and gave her a Scott profiler to look and then give to the doctor for him to review. I asked if they have had any denials on OxyContin last week or the week before, she said no.</p>
PPLPMDL0020000001	Lakewood	OH	44107	2/25/2014	<p>Dr thru window said hello. I said Friday doctor we are gonna focus on two things....extended release opioids in your market place and what tools you need in 2014 to help sort out the appropriate patients from the others. Dr said ok. Left Butrans study and OxyContin conversion guide.</p>
PPLPMDL0020000001	Garfield Hts	OH	44125	2/25/2014	<p>Reviewed OxyContin Q12h, flexible dosing along with Butrans for those patients requiring around the clock analgesia,reviewed Initiation/Titration doses, Said Ok will consider. Booked lunch appt</p>
PPLPMDL0020000001	Brooklyn	OH	44144	2/25/2014	<p>Reviewed OxyContin Q12h, 7 tablet strengths,savings cards along with Butrans for those patients requiring around the clock analgesia, Said Ok but overcoming cost with his patient base is a challenge,</p>
PPLPMDL0020000001	Cleveland	OH	44113	2/25/2014	<p>Reminded of Butrans for those Tramadol/LorTab failures,Butrans patient info guides, Initiation/Titration also reviewed Opioid Naive trial and the 30%pain reduction said she will consider expanded use for appropriate patients</p>
PPLPMDL0020000001	Cleveland	OH	44113	2/25/2014	<p>Reviewed Butrans Opioid Naive Trial and the 30% reduction in pain scores,reviewed Initiation/Titration section along with Patient info guides along with formulary coverage. Said she will continue to prescribe new starts for appropriate patients</p>
PPLPMDL0020000001	Cleveland	OH	44113	2/25/2014	<p>Reminded of Butrans for those LorTab failures requiring around the clock analgesia, said Ok, is always looking to start new appropriate patients. Reviewed and distributed Butrans Patient info booklets</p>
PPLPMDL0020000001	Akron	OH	44308	2/25/2014	<p>MSL email communication with PI regarding upcoming poster and symposium presentations at the Society For Pediatric Anesthesia and American Pain Society meetings. Dr. Friebert is not planning to attend either meeting.</p>
PPLPMDL0020000001	Mogadore	OH	44260	2/25/2014	<p>I asked leane up front if dr Buis needs any OxyContin r Butrans copay cards. Dr came up to the counter and said she needed both. Dr said she hasn't seen OxyContin copay cards in a while and asked me to e plain. I reviewed how the card works and for which patients. Reviewed the Butrans trial card and copay card as well. I asked dr where she is using OxyContin and she said for patients in severe pain and said it works well for the right patient. Discussed who is the right patient with dr and then asked for more business. Asked dr to also identify patients for Butrans like those on ultram or vicoden who need a dose adjustment. Dr said ok.</p>
PPLPMDL0020000001	Lakewood	OH	44107	2/25/2014	<p>Dr said he is referring his opioid patients out and he clarified by saying all of the patients needing opioids for longer than 3 months, I asked who is telling u to do this...he said pain management is telling them And he said they too are not writing opioids they are doing shots. I asked what medical benefit are shots. He said its more profitable. I said so what happens when Their insurance doesn't cover the shots any more will you treat them when they come back and he said no. I reminded him of the med 80 that he asked me about and the piece I gave him to review. He remember. I said it was a guideline not a law. I mentioned the molecule of oxycodone, he was aware it was Percocet. I said I wasn't asking him to write anything new, just change the delivery system for those appropriate patients. He asked about Medicaid and caresource. He wouldn't take my coupons for OxyContin. We talked about Butrans, he said that is the only product that has a chance in his office this year. He reviewed caresource coverAge And dosing. Told him we would have an opioid review at our lunch next month.</p>
PPLPMDL0020000001	Akron	OH	44305	2/25/2014	<p>Showed dr the Butrans poster and asked him if he would find it helpful in an exam room when explaining the low back and the conditions that are associated with it? Dr said he really liked and and so did mrs Vora. Dr said he wanted a few for his rooms. I asked dr this week to identify patients on IR opioids wi private prescription plans who need a dose adjustment and to use Butrans. Dr said ok. Reminded him to continue to also identify Percocet patients who need dose adjustments as well and use OxyContin.</p>
PPLPMDL0020000001	Lakewood	OH	44107	2/25/2014	<p>Asked the doctor when was the last time he wrote for OxyContin he said it's been awhile,but his nurse reminded him that he just write it a few days ago for a post operative patient. I reminded him of the limitations of post op indication, dr was aware. Dr said he writes mostly acute Percocet and he told me has had trouble getting norco filled in the area. I assured the doctor that acute patients definitely are not appropriate for OxyContin. I referenced section. 12.3 and talked about the molecule OxyCodone and its half like and oxycontin's half life. Dr said he did have patients on short acting OxyCodone. I said what would happen if the patient on the short acting product was not improving and their pain was continuous for an extended period of time. Dr said he would probably keep them on Percocet and increase the dose and frequency. I asked what would be the downside to offering the. OxyContin at that point. He said nothing but cost really. Covered coupons. Talked about Butrans. Dr asked about steady state and dosing and how often to. Hanged the patches. I covered everything using visual aids and dr said it was helpful and that he learned something. I asked him what patient profile is coming to mind right now, he said the elderly. I asked why...he said cause its less for them to remember. We talked about abuse potential,insurance coverage. And I asked him if you offered it to a Scott patient type....could you feel he was appropriate for Butrans. He said maybe.</p>
PPLPMDL0020000001	Lakewood	OH	44107	2/25/2014	<p>Dr said OxyContin rep again...I said didn't you call me wanting me to review q12h dosing? He Said no. today I wanted to give you a Butrans invite to a dinner proGram at red in march. Dr said he doesn't have time to attend. I said it was worth a shot.</p>
PPLPMDL0020000001	Lakewood	OH	44107	2/25/2014	<p>Spoke to Karen the ma and the doctor today about changes in opioids to his practice from last year. He said he is referring most out. I said which ones get referred out. He said anything that is chronic. I said pain patients must take up a lot of your time huh. He said yes Nd even the ones he believed have turned out to be trouble. I said you mean thru drug tests...he said yes And behavior. I told him I did not promote any products that patients can prn themselves and I only promote two extended release products that is dosed once a week for Butrans and q12h for OxyContin . Dr said OxyContin. Dr said he is trying to write less. I said I'm actually asking you to write less short acting oxycodone like Percocet for those that are appropriate for. Different delivery system. I asked if he could see see my lodgic for the request. Dr said yes but he doesn't want to treat chronic. I said understood and the. You won't be writing much OxyContin. However....that one patient that comes in your office appropriate you would convert them to oxycontin right. He said yes. Dr knew very little of Butrans. Reviewed the. A resource Tramadol Scott profile. Reviewed Initiation guide. Dr said he would read the study. I told him I was not doing him a service my giving him such a high over of a product he knows almost nothing about. I encouraged to grant me an apt to talk more. He said he would have Karen ck his schedule and call me.</p>
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/25/2014	<p>Asked dr and Liz which dose of OxyContin is most often used? Dr said he's not sure but uses a lot of 40's and 60's. I looked into his data prior to the call and noticed he uses most of the 40mg then 80,then 60mg dose. I asked dr when he uses the 80 mg dose and to treat what? Dr said he uses the higher doses to obviously treat severe pain. Dr said that he doesn't use too many of the lower doses because Percocet usually does the job. I attempted to explain how he can utilize the lower doses for his patients on low doses of Percocet who need a dose adjustment. Dr said he knows all the doses but they don't fit his patients. I asked him to remember Butrans for those patients who can't tolerate oral medicines for pain and discussed he doses and conversions.</p>
PPLPMDL0020000001	Cleveland	OH	44113	2/26/2014	<p>Quick OxyContin Q12h, 7 tablet strengths along with Butrans for those appropriate patients requiring around the clock analgesia, Said Ok, will further discuss at lunch appt</p>
PPLPMDL0020000001	Cleveland	OH	44106	2/26/2014	<p>Visited Anes/Pain dept. Sahgal review of OxyContin/Butrans for appropriate patients. Requested appt with Terrah for dept</p>
PPLPMDL0020000001	Cleveland	OH	44106	2/26/2014	<p>Reviewed Butrans dose strengths (Initiation/Titration) and formulary opportunities along with OxyContin Q12h and 7 tablet strengths. Said he will consider for appropriate patients</p>
PPLPMDL0020000001	Akron	OH	44333	2/26/2014	<p>Stephanie said she only had a couple of minutes over lunch because she is way behind on charts. She said that she still feels good about OxyContin and Butrans but is usually seeing patients for follow ups who are already on it. Stephanie said that she understands where to use each product after I told her we needed to take a minute to discuss candidates for each product. Discussed special populations for OxyContin and Butrans.</p>
PPLPMDL0020000001	Akron	OH	44313	2/26/2014	<p>Asked dr at window if he is starting OxyContin when he knows a patient is not tolerating an IR opioid? Dr said sometimes he has and said that all opioids have similar side effects anyway. I asked him if he would use the lowest effective dose to minimize any tolerability issues? Dr said he tries. I asked for more OxyContin 10mg dose. Reminded him of the Butrans patch for his patients who are on tramadol or vicoden who need a dose adjustment. Dr said ok.</p>
PPLPMDL0020000001	Stow	OH	44224	2/26/2014	<p>Spoke with Lee the pharmacist. I asked her if they have dispensed Butrans or OxyContin recently and where they are coming from? Lee looked in the computer and said the last Butrans they filled was for Karen Hodakievic for the 10mcg and have had not other fills this year. Lee said they have 2 x 5mcg and 2 x 10mcg in stock. Explained the conversions guide and the trial and copay cards. Lee said they see some OxyContin from comprehensive pain mgt in stow but not much. Lee said they typically fill the 10, 20 and 40 mg doses.</p>
PPLPMDL0020000001	South Euclid	OH	44121	2/26/2014	<p>Quick products mention at window. Discussed Butrans after Tramadol, start 10 mcg hr. 1 patch worn every 7 days, 4 patches monthly. OxyContin opioid naive dose of 10 mg discussed. Left 4/30/14 program invite for both drs.</p>
PPLPMDL0020000001	Berea	OH	44017	2/26/2014	<p>Left and discussed OARRS flashcard, state guidelines for responsible opioid prescribing. Explained that Intermezzo savings cards exp next month 3/14.</p>
PPLPMDL0020000001	South Euclid	OH	44121	2/26/2014	<p>I gave dr two things to remember...if Tramadol isn't working for some pains pain and they need an extended release remember butrNs 5mg for those appropriate. also if the Percocet patient is needing an extended release product think OxyContin it's the sAme molecule yet different delivery system and there are coupons for both. He said ok and walk away.</p>
PPLPMDL0020000001	South Euclid	OH	44121	2/26/2014	<p>Quick window call. Discussed Butrans as option for patients like Scott, initiate with 10 mcg hr. 1 patch weekly, 4 patches each month. OxyContin, 10 mg opioid naive dose discussed. Met with nurses, shared OARRS and state guidelines, responsible opioid prescribing. Intermezzo savings cards left, explained they expire 3/31/14.</p>
PPLPMDL0020000001	Olmsted Falls	OH	44138	2/26/2014	<p>Dr walked a patient to the window. I asked the doctor if I could address the starting dose conversion from a product like Tramadaol to Butrans or from Percocet to OxyContin if appropriate for an extended release opioid. He said no he was all set and walked away. Left naive study and oxycontin conversion guide</p>
PPLPMDL0020000001	Stow	OH	44224	2/26/2014	<p>Good discussion on OxyContin and Butrans discussion over lunch. Dr Balter first said that he is having many insurance issues with OxyContin since the beginning of the year and can't understand it. I discussed with him that the new year bring patients with new plans, employer groups changing covered meds, patients deductibles are not met so copay may be higher. Dr said that makes sense and said those are good points. Spoke to dr about not thinking of a denied PA as the last step in getting patients what they need. Spoke to him about the appeal process. Discussed his use of OxyContin and the doses he uses and why. Dr told me that he continues to try and get patients on ER opioids ASAP and will titrate through the doses instead of doing the same with IR opioids. I discussed use of OxyContin in special populations,dose adjustments, start principles and patient profiles. Discussed Butrans for specific populations like Scott and Kathy. Reviewed conversions and titrations.</p>
PPLPMDL0020000001	Cleveland	OH	44195	2/26/2014	<p>Visited Pain mgmnt dept, Reviewed OxyContin/Butrans with Crawford, Left Initiation/Titration guides</p>
PPLPMDL0020000001	Cleveland	OH	44195	2/26/2014	<p>Quick OxyContin Q12h, flexible dose reminder, Said ok, nothing new learned. Left Initiation/Titration guide</p>
PPLPMDL0020000001	Akron	OH	44320	2/26/2014	<p>I showed dr the OxyContin conversion and titration guide and asked her what the downside is to prescribing OxyContin q12 for patients already on IR oxycodone who are still in pain? Dr said she likes OxyContin but patients don't want it and its too difficult for patients to get it though insurance, Medicare and Medicaid. I asked her if she knows this because patients have told her they don't want OxyContin? Dr said yes, they want the immediate release. I told her that she needs to tell her patients that she's the doctor and not the patient. Dr said there comes a point where arguing with patients and trying to reason with them becomes too draining. I asked her to just take the time, if she's not already to explain the product to them and why she wants them to take it instead of the opioid. Dr said she does. Reminded her where to use Butrans. Dr said she has a patient on it and said its working well. I told her that I'm sure she has many other patients with a similar profile that she should also be prescribing it for. Dr said she knows and will try.</p>
PPLPMDL0020000001	Stow	OH	44224	2/26/2014	<p>Dr told me that he is seeing a lot of success with OxyContin and is using it as early as possible when he knows patients will be in pain for a long time. Dr said that he uses mostly 10-40mg and rarely goes above it. Dr said he now has a few patients he is trying to taper down from 80mg because its not the dose he wants them on. Dr said they got a lot of patients from other practices that have either gone under or closed from either retirement or moved. Dr said many of them were taking way too much opioids and he's trying to clean them up. Dr told me that he just has a patient who has been taking Butrans for over a year and has Humana. Dr said that starting in January they decided to not cover it. I explained to dr why he needs to fight these situations especially when a patient is doing so well. I explained how he can appeal the PA denial. Dr said he did to know he could do that and will try. I asked dr for a copy of the denial letter and he said he would get it. Reviewed OxyContin FPI sections on use in special populations and titration. Dr said he will continue to write both products cause they work!</p>
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	Lyndhurst	OH	44124	2/26/2014	Recruited for thu 3/20 and wed 4/30 Butrans programs. He will be out of country during both those weeks. 30 % pain reduction insight. Doctor feels pain reduction is good. He thinks Butrans is a good product. His only concern has been coverage. He hasn't had great success in past getting covered, especially for Medicare D patients. He's thinking of placing a male patient, Medicare D, Anthem Senior, on Butrans 5 mcg/hr; opioid naive patient. Communicated to doctor he may be able to get covered with a prior auth. Need to follow up on this patient, and see if Butrans was covered. OxyContin, opioid naive dose of 10 mg. Next time I'd like to discuss this patient profile, George and get your feedback regarding a trial of OxyContin for a patient like George. Discussed and left OARRS flashcard, buprenorphine flashcard, cd/urine screen flashcard. ^^ Get dr another Butrans
PPLPMDL0020000001	Munroe Falls Akron	OH	44262	2/26/2014	Quick discussion and told her that she needs to focus on existing patients already on ultram for Butrans and those already on Percocet for OxyContin. I gave her the conversion and titration guides for each.
PPLPMDL0020000001		OH	44333	2/26/2014	Good discussion around Butrans and OxyContin. I discussed use of Butrans in special populations again and discussed his use of the 15mcg. Dr said that Elise had a patient needing more than the 15mcg dose just yesterday and I need to speak with her about it. Dr said that most of his patient are doing well on 10mcg or on the 20mcg dose. I asked what he thinks of the lowest therapeutic dose and if the 15mcg dose was possibly more appropriate for some patients on 10 or 20mcg? Dr said there may be a patient or two that he could move down to the 15mcg dose and may try it in one patient. Discussed the fact that he should be using more OxyContin for those already on oxycodone. Dr said he gets it and said that he feels that many of them may need Percocet for breakthrough. I told him maybe but he should titrate OxyContin until appropriate analgesia is reached. Dr agreed and said ok that he will try to convert more patients.
PPLPMDL0020000001	Berea	OH	44017	2/26/2014	Jasmin the rn said the dr doesn't want to write that any more opioids. I asked how he will treat pain in 2014 and she said just a few weeks of hydrocodone then refers out. She wouldn't take coupons. I gave her the naive study to pass to the doctor, she said he read the information I left time. I said what questions does he have. She didn't know and she wouldn't ask the doctor. I reviewed the moderate pain patient under 300mg of tramadol and not controlled with their pain...the Scott profile. Rn said she would tell the doctor the information.
PPLPMDL0020000001	Stow	OH	44224	2/26/2014	Good conversation about both products. Dial said she wanted to know more about Butrans conversions, patients good for it and how to apply patch. I explained all key selling messages, proper application of the patch, conversions and patient profiles. Dial said it helped and feels good about it and usually is seeing patients on follow ups on it and most really like it. Discussed OxyContin doses, conversions and patient types. Dial said she had patients that either really like it and those that want Percocet instead. Discussed conversions and profiles.
PPLPMDL0020000001	Lyndhurst	OH	44124	2/26/2014	Met with pharmacy mgr Adrienne. She was unaware of OxyContin changes to section 9.2 of FPI and wanted more information on studies. I responded that I cannot speak to studies but I can leave her FPI, reformulation brochure to look over. She was satisfied with response. She is only aware of one patient on Butrans. Discussed geriatric patients studied, adverse events in that population, pharmacokinetics, 5 mcg opioid naive, start dose. Black box warning discussed. OxyContin, 10 mg start dose, q 12 h dosing, 7 strengths available. Discussed and left RX patrol flashcard. ( a few of dr Dean Pahr patients are customers here)
PPLPMDL0020000001	South Euclid	OH	44121	2/26/2014	Met with dr med assistant Tracy. Discussed Butrans after Tramadol, C11 x 1 week pain patch, 4 patches monthly. Trial, savings explained. Tracy says dr loves savings cards and will always remember to give to patients as she keeps them in her exam rooms. OxyContin opioid naive 10 mg dose discussed. Controlled release product, q 12 h dosing schedule, 7 strengths available. Percocet, oxycodone conversions discussed. Let Tracy know I'd be back with savings cards.
PPLPMDL0020000001	South Euclid	OH	44121	2/26/2014	(Left 4/30 Butrans program invite). Met at front window with med asst Jen. Doctor may prohibit lunch appointments after May of this year. She will meet with him to ask if he'd consider one more lunch appointment with me over in Concord. He no longer attends the group lunch for doctors on his floor (basement level 065) Discussed OxyContin for patients not controlled on prn oxycodone or Percocet. Start dose 10 mg, 7 strengths available, dosed q 12 h. Butrans as a transdermal option. 1 patch worn every 7 days, 4 patches per month. 4 strengths available. Discussed and left OARRS flashcard, how to protect your practice brochure.
PPLPMDL0020000001	Olmsted Falls	OH	44138	2/26/2014	Spoke to dr about Butrans and OxyContin delivery system. I asked him how he felt his patient could manage 4 patches a month? He thought pretty good. Talked about the Tramadol Scott patient and the moderate atc pain that would be appropriate for Butrans s. Discussed patch placement and savings cards. I agreed that the doctor has very limited Percocet patients. However that aside....dose it make any sense to convert a patient for an atc short acting product to an extended delivery system like OxyContin. He said yes but it would depend on price.
PPLPMDL0020000001	Berea	OH	44017	2/26/2014	We discussed how he was managing pain patient in 2014 and he said he is not Afraid to prescribe opioids if its appropriate. He does refer to dr Astley and dr tabbaa out of metro. We talked about why a doctor would prescribe OxyCodone short acting products like Percocet around the clock instead if changing the delivery system to an extended release product such as OxyContin. Dr said it must be price. I reviewed the savings cards for the commercially insured. Dr thought Butrans has a good fit in primary care and he told me he was going to try and write more of it this year instead of hydrocodone products. I said how do you know who is a Candidate for Butrans? Dr said if they fall hydrocodone or they don't want to take a pill and need a around the clock opioid. Reviewed the indication and reviewed the initiation guide for the starting dose based on the doses he spoke about. We talked about abuse potential. Reviewed patch placement. I asked the doctor what does the patient have to do after they place the Butrans patch on the approved site. The doctor said nothing. I asked if the dosing schedule of Butrans was something he thought the patients could do. Doctor said yes. Reviewed caresourc aNd workers comp....also reviewed the commercially insured patients and the savings cards. Dr said he might attend the march program for Butrans On The 20th.
PPLPMDL0020000001	Mayfield Hts	OH	44124	2/26/2014	Lunch. Asked doctor what recent experience with Butrans has been and is there any reason that he would not continue to write Butrans moving forward? He responded that his only concern is coverage/cost. He asked if our Med D coverage has improved for Butrans and I responded with Med D plans Butrans is currently preferred on. For commercial: I asked him to remember Butrans is preferred on his 2 largest plans: Med Mutual and Express Scripts. We also discussed Medicaid aprrior auth. I told him I'd drop off formulary grids as soon as I get shipment, so he has hard copy to refer to. He says he cannot remember which plans and needs something in writing. I asked him the same questions regarding OxyContin. How are patients doing? Any issues or concerns? He responded all is well. I asked him for business this week for both Butrans and OxyContin in the patient types we've been discussing. After prn Tramadol is not controlling patients' persistent pain; and for OxyContin, in patients that have been on prn oxycodone or Percocet, consider conversion to controlled release OxyContin, when pain needs around the clock attention. He says he will do so.
PPLPMDL0020000001	Copley	OH	44321	2/26/2014	Used the tramadol insight and asked dr to tell me about what he's currently doing when a patient on tramadol needs a dose adjustment? Dr didn't really give me a direct answer but said that he hopes patient either changes lifestyle like physical therapy or go to see a specialist. I asked him for a tramadol failure? Dr said does write vicon but only when he has do based on pain intensity. I explained to him that a tramadol failure is a good candidate for Butrans and he needs to give it more of a try. Dr said ok. Showed him the OxyContin doing and conversions guide and spoke about when to use it based on patients already being on oxycodone. Dr said ok and went into a room. Nothing else learned.
PPLPMDL0020000001	Berea	OH	44017	2/26/2014	She waved from ten feet away, and I asked if she had any questions about converting a Tramadol to Butrans if they were appropriate of course she said no. I told her I was gonna leave some OxyContin conversion from Percocet and some Tramadol to Butrans for those appropriate patients. She said thank you.
PPLPMDL0020000001	Westlake	OH	44145	2/26/2014	Asked the doctor if he thought Butrans had a fit into his practice and where? Dr said those that like patches. I said do u find patient are liking the patch that you have written so far, dr said yes. I said I'm glad it's a good experience so far. I asked if he has tried Butrans after a Tramadol failure yet? He said no. I gave him the initiation guide and asked him to think about that transition if appropriate this week. Left him the OxyContin conversion guide and said I'll save this for next time because he didn't have any more time.
PPLPMDL0020000001	Cleveland	OH	44115	2/27/2014	Reviewed with Dave Rph OxyContin Q12h along with Butrans for those Tramadol failures requiring around the clock analgesia, Said Ok, nothing new learned
PPLPMDL0020000001	Brooklyn	OH	44144	2/27/2014	Window call, Reminded of Butrans for those patients requiring around the clock analgesia along with OxyContin Q12h Tablet strengths, said OK will consider, booked appt to further discuss
PPLPMDL0020000001	Cleveland	OH	44115	2/27/2014	Visited Anes/Pain depr, Discussed OxyContin/Butrans with Dr. Nickels and staff, Dr said he will continue to support for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44115	2/27/2014	Reviewed Butrans for those LorTab failures requiring around the clock analgesia, discussed his success with appropriate patients. Reminded of OxyContin Q12h and 7 dose strengths. Said he continues find appropriate
PPLPMDL0020000001	Cleveland	OH	44115	2/27/2014	Reviewed OxyContin Q12h and Butrans for those Tramadol failures with George Rph, said OK, will support for appropriate patients
PPLPMDL0020000001	Westlake	OH	44145	2/27/2014	I said I just wanted to remind you two things about the extended release opioids Butrans and OxyContin...if patient are taking too many short acting atc pain pills and aren't getting the control they need consider the delivery system change to Butrans or OxyContin. After Tramadol for Butrans and after Percocet for OxyContin...if appropriate of course.
PPLPMDL0020000001	Euclid	OH	44119	2/27/2014	Quick detail, here's Butrans trial, savings cards as promised. Quick point: no restrictions for Butrans. with mild to moderate hepatic impaired patients and no restrictions with renal impaired patients.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/27/2014	Showed dr the Butrans conversion guide as well as Butrans and OxyContin copy cards. I gave dr the ultram insight and he said there is plenty of business to be had for Butrans for ultram and viconden patients but said however it's not always a slam dunk. I asked why and he said because the prohibitors are usually cost, not wanting to wear a patch, and can take a while to get it approved. I asked dr when he knows that a medicine is the best option for the patient, isn't it worth it to jump through a few hoops if necessary? Dr said it is and said he is writing but has many that he want to start but aren't able to get it. I asked dr for examples of denied PA s so I can work on it for him. Dr said he will do that. Left him with the OxyContin conversion guide and dr said he won't write it.
PPLPMDL0020000001	Fairlawn	OH	44333	2/27/2014	Quick hello at front counter and asked him if he finds patients on Percocet as candidates of OxyContin if they need an adjustment? Dr said it makes sense to switch them to the long acting oxycodone but said that he still wants to leave that up to the specialists. I asked why and he said he doesn't want his patients to know that he's the one they see for the schedule 2 opioids. I told dr I understand and asked if he would write it as he referred so they go to pain management already on the ER opioid? Dr said maybe for some patients but said it won't be the rule. Told dr to use Butrans as the schedule 3 opioid for ultram and viconden patients not controlled. Dr said Met with nurses on pain management floor. Discussed OxyContin and Butrans indications, dosing strengths, titration, opioid naive and opioid experienced start doses. Scheduling, Black Box warning, respiratory depression discussed. Savings card for OxyContin, Trial, savings for Butrans discussed. Non branded resources discussed including PAP journals.
PPLPMDL0020000001	Akron	OH	44333	2/27/2014	Met dr for the first time in the akron office. I told dr that I manage Butrans and OxyContin in the akron territory. Dr said he has used Butrans a few times and said he's still not sure where to use it. I explained Butrans patient types, conversions, starting doses, proper initiation doses and titration. Dr said that's good to know and wanted the initiation and titration guide. Reviewed OxyContin doses and patient profiles. Dr had to go into a patient Spoke to Robert the pharmacist and asked him how much Butrans he has seen in the month of Feb? Robert said he didn't know but sees enough to keep certain doses in stock. I asked him if he has the 15mcg dose and he said no. Robert said he will not order it until he sees a script because it costs them too much money if it doesn't get dispensed. Robert said he noticed there is a back order until the beginning of March. Spoke about OxyContin and doses as well as titration.
PPLPMDL0020000001	Cleveland	OH	44109	2/27/2014	Visited IM/PM depts Left OxyContin/Butrans PI's and Initiation/Titration guides for Dr. Ricanati, Maguoulias, NG, Falik-Yuttes and NP's. Requested appts obtained another contact Michelle
PPLPMDL0020000001	Cleveland	OH	44109	2/27/2014	Dr. reviewed OxyContin and Butrans PI's, Initiation/Titration guides, said he will contact me if he has any further questions
PPLPMDL0020000001	Akron	OH	44310	2/27/2014	I asked dr if he has patients that he refills each month on Percocet? Dr said yes. I asked him what the downside would be to switch these patients to the long acting oxycodone? Dr said he's not sure. I showed him the conversion guid from the visad from Percocet and explained what OxyContin is, how it's dosed, conversions from Percocet and if he would switch patients who need dose adjustment? Dr said he won't switch just a switch but if he thinks they need a more steady release of oxycodone he will prescribe it. I ask dr when a Percocet patient comes in for a follow up to reevaluate them for q12 OxyContin. Dr said ok. Gave him the Butrans initiation and titration guide and asked for him to suit more for those failing ultram.
PPLPMDL0020000001	Westlake	OH	44145	2/27/2014	I asked her how she felt about Butrans being a moderate pain product not to be given to patients who are over 80mg morphine equivalent. She said they see all kinds of pain patients. I said even Tramadol patients, she said yes. I asked what if you were to convert someone from Tramadol to Butrans if they were appropriate, how would your patient respond? She hasn't written it for a while and said as long as they don't mind a patch. I said after your patient places the patch on one of the 4 appropriate sights...whAt does the patient have to do next? She said nothing. I said exactly. In 7 days they change their patch, remove the old one fold n flush. I asked if this sounded complicated for the patients or for you to explain. She said no. I gave her the OxyContin. Conversion guide.
PPLPMDL0020000001	Westlake	OH	44145	2/27/2014	I asked the doctor what's weighs more in his prescribing patterns with choosing opioids safety first or efficacy first? Dr said safety. I said all opioids have abuse potential, but I'd like you to think about why someone would prescribe a short acting product atc like Percocet when they can be offered an extended release product like OxyContin? He said he doesn't know. I asked him to think about that next his Percocet patient is in for his office visit. If they are appropriate to think about OxyContin. Told him I was going to leave a safety and efficacy study for Butrans to think about how 4 patches a month might be an option for the right patient.
PPLPMDL0020000001					



PPLPMDL0020000001	Cleveland	OH	44109	2/27/2014	Discussed OxyContin Q12h along with Butrans for those patients requiring around the clock analgesia with Janice, recvd Michelle-MA- contact info for appt requests
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/27/2014	Dr said he ended more Butrans copy cards. Reviewed the trial card as well and asked if he has started a patient on Butrans who was failing on tramadol? Dr said his patients have been on vicoden so far. Reviewed the Scott profile and asked him if he has patients like him? Dr said he can think of a few. I asked Dr to try it in the tramadol patient and reviewed conversions. Left him with OxyContin conversion guide.
	Norton	OH	44203	2/27/2014	Discussed the molecule of OxyContin and of Percocet. Dr was aware. I asked him if he has concerns dosing prn opioid medication etc. Dr said yes and described the steps has in place to do urine screens and pill counts for patients. Dr said he doesn't have any problem with writing opioids as long as the patient is appropriate and willing to sign his contracts. Dr said Medicaid doesn't cover OxyContin, there for he will switch them to something the patient can afford that's long acting. I asked why he prescribes OxyContin and the dr said he believes it works patients can still get it. I asked him if the reformulation was of any value. He said not really. He said its good to know, but he feels his patients won't abuse. Talked about abuse potential and gave him the leave behind piece to reference if he had questions. Dr said he likes Butrans but he has been giving it to patients coming in for an increase in their hydrocodone. I said why there and not after Tramadol? Dr said its never good to give a patient too many pills, so if they need an extended release he converts to Butrans and supplements with hydrocodone. We reviewed the initiation guide, dr confirmed he was starting at 10mcg of Butrans. Dr asked me if I knew about the hydrocodone x product that was on TV today. I said I didn't know anything about it.
PPLPMDL0020000001	Westlake	OH	44145	2/28/2014	I asked the np what she has to tell her patients to do after the patient puts the patch on for the first time. She said what? I said nothing for a week until they change the patch. I asked if this would be valuable to her patient. She said maybe.
PPLPMDL0020000001	Cleveland	OH	44113	2/28/2014	Reviewed Butrans for those patients requiring around the clock analgesia, Opioid naive trial- Dr. said 30% pain reduction was significant and important to his patients, Initiation/Titration, Also reminded of OxyContin Q12h, 7 tablets strengths, said he will consider but doesn't like to struggle with PA's had pharm. ins. switch patient to MSCContin recently
PPLPMDL0020000001	Cleveland	OH	44109	2/28/2014	Reviewed OxyContin/Butrans Initiation/Titration guide, with tech, no new info learned
PPLPMDL0020000001	Cleveland Hts	OH	44118	2/28/2014	Reviewed OxyContin Q12h, flexible dosing strengths along with Butrans for those Tramadol failures, requiring around the clock analgesia, Said will continue to find new appropriate patients, follow up with Formulary grids for both products
PPLPMDL0020000001	Richmond Heights	OH	44143	2/28/2014	Dr C and Med asst/nurse Carol not in. OxyContin Savings card, information drop only. Left OxyContin reformulation guide, OARRS flashcard, how to protect your practice brochure. Note: next 2 weeks, dr out on vacation.
PPLPMDL0020000001	Hudson	OH	44236	2/28/2014	I asked dr if he has any patients currently past the three months on an IR opioid like tramadol or vicoden who would be good candidates for 7 day Butrans? Dr said he has a few people that he might try Butrans on that are past 3 months. I told dr that's great and to just discuss the option of Butrans for those patient. Dr said ok. Reminded dr of OxyContin and told him he has 7 doses to use to individualize the dose. Dr said ok.
PPLPMDL0020000001	Westlake	OH	44145	2/28/2014	Spoke to dr about patients on Percocet atc if it made sense to move them to a different er delivery system. Dr said yes. She said she tried to write it yesterday but it was too expensive some she said it was part d patient and it was gonna cost over 100 dollars. Discussed savings cards for commercially insured patients. Discussed Butrans and she said she will try to write it again. Reviewed the Tramadol patient being reassessed and appropriate for Spoke to Joni(Dmitri's nurse) and Glenn about where they are with getting Butrans approved? Joni said that she has seen more issues with getting approval for PA's. Joni said they are having more denials from UHC community plan and they don't know why. I told Glenn that the PA should go through as long as there is a history of IR opioid use or tolerability issues. Glenn said he didn't have time to talk because he has a meeting and said to come back next week.
PPLPMDL0020000001	Cleveland	OH	44109	2/28/2014	Reviewed OxyContin/Butrans Savings cards with Bernie RPH, said he sees Butrans RX's from Nickels group (Torres, Tryon)
PPLPMDL0020000001	Akron	OH	44312	2/28/2014	Dr told me that he started a patient on Butrans on Tuesday this week. I told dr that's good news and asked why Butrans? Dr said that it is a female patient with good insurance who has failed tramadol and vicoden. Dr said the patient has real bad low back pain and said he didn't want her to continue to increase the number of pills every day. I told dr it sounds like an excellent candidate for Butrans. Dr said he started on the 5mcg patch, gave her the information guide and Carla his nurse gave her a copy card. I reminded him of OxyContin for those patients already on oxycodone short acting. Dr said he knows and is trying to streamline his pain patients.
PPLPMDL0020000001	Lakewood	OH	44107	2/28/2014	Reviewed why patients need an extended release opioid in the first place and the doctor agreed that they should be converted sooner than the insight that I shared with him. Reviewed Percocet dosing to OxyContin conversion using detail aid. I said is there any reason why this doesn't make sense and he said no. Covered managed care. Showed the doctor the leave behind poster on the spine for Butrans. Dr said that very helpful visual aid. I said what are some obvious reasons if a patient came in with back pain that wasn't going away and getting worse...dr said he would have to rule out it wasn't cancer in the lower back bones. I said an increase in opioids isn't always the answer and only thru a good reevaluation can you find these things out. Dr agreed. We spoke about dosing Butrans, where to place the patch and if his patient could supplement. I showed him the visual aid where it answered that question. He said his patient wouldn't want to come off Tramadol...I reminded him that Butrans would be the primary pain product and the NSAID or short acting opioid for supplemental. I asked him how his patient would feel about once a week dosing. The doctor said his patient would like that...I asked would his patients be taking other medications during the week? And he said probably yes. I reminded him of respiratory depression, other cns medications along with Butrans is a warning. Dr asked how many refills, and I reminded him of the schedule three multiple refills with Butrans.
PPLPMDL0020000001	Mayfield Village	OH	44143	2/28/2014	Dr took vacation day. Lunch with practice. Met with his med asst. we discussed both products, patient selection, opioid naive & experience start doses. Titration & steady state for both. His savings cards should work for OxyContin, how trial, savings should work for Butrans. Left & showed how to protect your practice brochure & OARRS flashcard. Left invite 4/30 program. Discussed 3 largest plans Med D access preferred OxyContin, Butrans.
PPLPMDL0020000001	Mogadore	OH	44260	2/28/2014	Led with the new ER opioid start and asked him what needs to happen in order of him to start an ER opioid? Dr said its all on a case by case basis and dr said it doesn't have a set criteria for starting an ER opioid. I asked him who he thinks is right for OxyContin? Dr said he thinks a good patient is one that has been on a number of IR opioids and is treatable over a long term. Dr said he will use it at the lowest dose then titrate up. I reviewed the start principles and dr said it makes sense. Reviewed patient profile Maggie and dr said good patient but started too late. Dr said he will try to switch some more patients over to the ER oxycodone because it just makes sense for some. Reviewed Butrans key selling messages, patient profiles and asked for him to write more. Dr said ok. Nothing else learned.
PPLPMDL0020000001	Hudson	OH	44236	2/28/2014	Spoke to Beth the pharmacist about Butrans and OxyContin. Beth said a floater had a prescription come through last week and it was written apply one patch daily. Beth said that the pharmacist called the office and discussed the dosing frequency. The prescription was changed to the correct dosing frequency as one patch a week. Beth said she doesn't know which doctor it was. I discussed application of the patch because she asked what a patient does it if it peels or comes off. Reviewed the patient information guide and gave her a few. I told her to hand those out with the copy card if necessary. Beth said they continue to see OxyContin and see most of the 10, 20 and 40mg doses. Beth said that she just sent back 80 mg doses because they expired. I reviewed the doses and titration with start principle.
PPLPMDL0020000001	Mayfield Village	OH	44143	2/28/2014	Lunch. Reminded him of his agreement to initiate 10 mg OxyContin for patients like George. Steady state, titration, dosing discussed. Also discussed black box warning, watch for respiratory depression in elderly, debilitated, cachectic patients. Butrans, another option for opioid naive. 1 x week transdermal patch. He needed to get back to patients: I told him next time I'd like to discuss the right patient type to start Butrans, as last visit he stated " he hasn't found right patient".
PPLPMDL0020000001	Cleveland	OH	44113	2/28/2014	Introduced Butrans, 7 day Transdermal, Tramadol failures requiring around the clock dosing, Initiation/Titration, Reviewed OxyContin Q12h, flexible 7 dosing strengths Said she will consider, Dr.K is managing most pain patients but will consult/recommend accordingly
PPLPMDL0020000001	Mayfield Village	OH	44143	2/28/2014	Lunch. Summarized last call. Should you ever need to refill OxyContin or Butrans, I'd like you to have knowledge of products, dosing & titration. Reviewed opioid naive & experienced starting doses both products, strengths available, savings available to commercially insured patients. Discussed Purdue's non branded items for responsible prescribing of opioids. Showed how to protect your practice brochure, OARRS flashcard. Asked about wed 4/30 program. No way he can make wed night. He took WED. as day off preciously, but due to patient needs, he's working all day again Wed.
PPLPMDL0020000001	Hudson	OH	44236	2/28/2014	Saw dr at window and gave him the oxycodone insight. Dr didn't say much so I told him that he needs to ensure his patients are on the most appropriate medicine for managing their pain. Handed him the conversion and titration guide and asked for him to use the 10mg. Reminded him to also get some Butrans experience under his belt! Showed him the Scott profile and told him that he said he said before he has patient taking tramadol around the clock. Dr said ok he will find a patient.
PPLPMDL0020000001	Euclid	OH	44132	2/28/2014	Met with med asst @ front desk, dr won't be in until after 1:30 today. Discussed the 2 options I have for patients with pain around the clock. Discussed OxyContin opioid naive dose of 10 mg, or in patient dosed q 6 h on oxycodone or Percocet who's no longer prn. Explained how savings cards work off patients co pay. Butrans, transdermal option, buprenorphine system worn 1 x week, 4 patches monthly, 4 strengths. Opioid naive dose 5 mcg hr. Left 4/30 invite, how to protect your practice brochure.
PPLPMDL0020000001	Mogadore	OH	44260	2/28/2014	Discussed the oxycodone ER insight and asked her about it. Dr said she can actually count the number of patients she has on OxyContin. Dr said that they recently started doing urine drug screens and she has been amazed with what has come back on on patients she thought she knew and trusted. Dr said that she will write OxyContin of the right patient and that patient is one that isn't a surgical candidate and has shows steps in the right direction with lifestyle modification, physical therapy etc... I showed her the conversions from Percocet and asked her if she currently has patients that have been on Percocet for more than 6 months? Dr said she does. I asked shy she is keeping them on Percocet for that long? David its a cost thing because dr said from her experience the patients that need OxyContin are usually poor and don't work. I asked her if she has any patients on it opioids that have commercial insurance? Dr said some. I asked her to focus there for OxyContin and asked if it makes sense to convert them when either tolerance or efficacy issues are presented? Dr said it dos make sense.
PPLPMDL0020000001	Euclid	OH	44117	2/28/2014	Quick review of Butrans key selling messages and asked of business in patients like Scott and Kathy.
PPLPMDL0020000001					Dr d took vacation day, just med assts & PT staff in. Met with Tenesia @ front window. Discussed OxyContin, start dose, 7 strengths, q12 h dosing schedule. Let her know how savings cards should work. Butrans. Cill 1x week transdermal option. Can call in w refills. Discussed 4/30 program, left invites for both drs.
PPLPMDL0020000001	Westlake	OH	44145	2/28/2014	Spoke to dr and gave him a wall posted of spine. Asked him to think about those patients who are taking Percocet atc if they might be ready for OxyContin q12h.
PPLPMDL0020000001	LAKEWOOD	OH	44107	2/28/2014	Asked what steps were in place this year about stocking opioids? He said limited amounts of hydrocodone. Discussed OxyContin, he stocks some not all doses but he said they can get them with in 24hrs usually. I asked him if he has heard of Butrans...he said yes. I said were you aware it was schedule 3 and the transdermal patch is worn for 7 days. He said yes. I spoke about the locations the patients could place the patch and how to discard after the 7 days.
PPLPMDL0020000001	Euclid	OH	44119	2/28/2014	Dave off today. Pharmacist Arjeet filling in. Spoke with tech first. Left OxyContin reformulation guide, discussed OxyContin Start dose, q12 h dose schedule. Discussed Butrans indication, 1x week, 4 patches month. Patients may come in using non opioid or a few short acting opioid in conjunction with Butrans. Trial, savings discussed. Left RX Patrol flashcard. Arjeet says he sees a lot of q8 h OxyContin scripts written. What does the state say on that? I cannot speak to what the state would say, I can only speak to our FPI, in that our recommending dosing is q 12h, two OxyContin in 24 hr period, typically taken at 8 am and 8 pm. He was satisfied with response.
PPLPMDL0020000001	Cleveland	OH	44118	2/28/2014	Reviewed OxyContin Q12h, flexible dosing strengths along with Butrans for those Tramadol failures, requiring around the clock analgesia, said she will consider, follow up with Formulary grids for both products
PPLPMDL0020000001	Rocky River	OH	44116	3/3/2014	I asked the doctor if she had any concerns writing OxyContin for appropriate patients this year? Dr said well and paused. I said you do, how can I help. She said she didn't want to write chronic pain meds any more. I told her I understood. And to consider one thing...I'd like to only focus on current patient, already being treated with Percocet with monthly refills and zero new patients. When that one patient started using their prn medication atc, please consider a different delivery system. Scheduled q12h. She said ok. Left her some Butrans Patient starts for review and to be distributed
PPLPMDL0020000001	Garfield Hts	OH	44125	3/3/2014	Reviewed OxyContin Q12h, 7 tablet strengths, savings cards/Formulary along with Butrans for those patients requiring around the clock analgesia, Said he will continue to look for appropriate patients that can afford options
PPLPMDL0020000001	Olmsted Falls	OH	44138	3/3/2014	Discussed his thoughts using a transdermal schedule 3 patch dosed 4x a month...dr asked about dosing and I reviewed the indication for appropriate use. Asked him his hesitations for writing OxyContin, the doctor said besides OxyContin having a bad name it was schedule 2.
PPLPMDL0020000001	Berea	OH	44017	3/3/2014	Left dr some Butrans patient brochures and I reminded him of this resource along with the coupons for both the products. I asked if he was anything else I could help with and he said no.
PPLPMDL0020000001	Garfield Hts	OH	44125	3/3/2014	Quick Butrans reminder Initiation/Titration, along with formulary status, Also reviewed OxyContin Q12h and 7 tablet strengths, Said Ok, will continue to find appropriate new patients

	Berea	OH	44017	3/3/2014	Dr said she does not have her Schedule 2 license is why she doesn't write OxyContin. We discussed the molecules of Butrans and OxyContin and discussed extended release opioids and the rationale behind it. Dr said prescribers don't want to be associated with treating chronic opioids. I said what exactly is the difference between having patients on short acting products month after month after month vs. the word chronic? She said "I guess nothing". Dr said its a mindset that has to change and I agreed. I asked what is the clinical benefit for a patient taking a short acting product 3 or more times a day then an extended release product taken twice a day scheduled. She shrugged her shoulders and said she wasn't sure. I asked how do you know what dose they take daily either, she said good point. Dr said she wishes there was better education for patients on the expectations of pain medications. We reviewed the initiation guide of Butrans and she also told me she was never over 80 mg morphine equivalent. And showed me the dose level appropriate for a 5mcg starting dose with Butrans.
PPLPMDL0020000001	Cleveland	OH	44125	3/3/2014	Reviewed partners in pain as a possible resource for her.
PPLPMDL0020000001	Fairlawn	OH	44333	3/3/2014	Reviewed OxyContin/Butrans Savings cards along with dosing and appropriate patients, Matt Rph said he hasnt see any new Butrans RX's a few OxyContin
PPLPMDL0020000001	Berea	OH	44017	3/3/2014	Good discussion after using insight about ERO opioids. Dr said that even though she is new as a doctor, in residency she saw the worst of the worst when it comes to pain patients. Dr said that most patients want that phycosocial response to taking a pill every 4 or 6 hours and even though the dr knows it may not be the best therapy at least the patient is adhering to their medicine. Discussed OxyContin conversions and patient types for it. Used Kathy profile to discuss the appropriate patient type for Butrans. Reviewed the profile, discussed initiation titration and use of supplemental analgesia and conversions. Dr brought up QT prolongation. Discussed what is in the FPI about 2x 20 mcg patch studies and said it is not required to get a EKG. Discussed specific populations for renal and hepatic impairment. Dr said that's good stuff to know. Asked for her to try to try it in a patient
PPLPMDL0020000001	Akron	OH	44333	3/3/2014	Dr asked me about proposed new hydrocodone product coming out. I told him I didn't know much and asked his thoughts. Dr said it doesn't have abuse technology and he was surprised FDA approved it. I asked how much does this technology weigh in your decisions to write extended release products. He said it doesn't really. I asked him if he believed any of the med 80 statistics that came out last October, showed it to him. He said yes he does believe opioids are being sold and misused. I reenforced that even with the reformulation of OxyContin or the patch of Butrans it can be abused and offered to give him the study carrier leave behind. DR looked at cover and gave it back. Dr said a little better is better than not doing anything at all. I said I hope you remember that when there is an appropriate patient for OxyContin. I asked the dr why would he hesitate to write a schedule 2 over a schedule 3....both extended release. Dr said he gets too many hassles with managed care with schedule 2's Nd he said it was too expensive. I asked when's the last time he gave a savings card to a commercially insured patient. He said it's been a while. I reminded him that both Butrans and OxyContin coupons are in his closet. Dr said Butrans has a fit with patients cause its only 4 patches a month. I asked if he would find an appropriate patient this week to convert to Butrans. He said he will try it if he finds one.
PPLPMDL0020000001	Euclid	OH	44117	3/3/2014	Spoke to Becky about Butrans and OxyContin. Becky said until she gets her masters she can't prescribe any narcotic Without physician. Discussed that she still sees mostly acute pain but does see patients on pain medicines for around the clock pain. Discussed use of OxyContin for a patient she had years back that was switched to OxyContin from Percocet based on severe pain. I asked her to still use her judgement when with a patient that showed promise for an ER opioid. Butrans for patients on around the clock ultram or vicoden use.
PPLPMDL0020000001	akron	OH	44333	3/3/2014	Dr Morley stuck in NYC due to weather, won't be in this week. Spoke with medical asst Tenesia. She checked savings cards, have for both products. Reminder opioid naive dose for OxyContin is 10 mg, opioid naive dose Butrans 5 mcg hr.
PPLPMDL0020000001	Garfield Hts	OH	44125	3/3/2014	I asked dr when he writes an IR opioid what he's writing them for? Dr said for both acute pain and around the clock pain. I asked dr when he's writing a IR opioid for around the clock pain and if his goal is to use the lowest therapeutic dose, how it writing an IR opioid helping him meet that goal? Dr said he knows and said that he just wrote the Butrans 15mcg for a patient that was on vicoden HP 40mg a day. I told that's thats great and to make sure the patient is titrated if necessary. I reminded dr to use OxyContin for the patients already on Percocet.
PPLPMDL0020000001	Cleveland	OH	44125	3/3/2014	Visited surgery center, Left OxyContin/Butrans Initiation/Titration guides for Key clinicians (Lopresti,Levine,O'brien Gemma,Forcier, ElKhari Pantec, Peralta-CCF(Lichenberger,Rapuri,Sargento,Nowak, Love, Hauer-Healthspan surgeons) Left cards and info for Nursing Staff/Clinician
PPLPMDL0020000001	Fairlawn	OH	44333	3/3/2014	Visited surgery center, Left OxyContin/Butrans Initiation/Titration guides for Key clinicians (Lopresti,Levine,O'brien Gemma,Forcier, ElKhari Pantec, Peralta-CCF(Lichenberger,Rapuri,Sargento,Nowak, Love, Hauer, HealthSpan surgeons) Left cards and info for Nursing Staff/Clinician
PPLPMDL0020000001	Fairlawn	OH	44333	3/3/2014	Met Heather for the first time from the north canton store. I asked her about what she thought a good candidate for OxyContin would look like? Heather said a patient who suffered from moderate to severe pain. I told her that moderate to sever is right and read her the indication. I explained the dosing, 8a and 8p dosing regimen and conversions from Percocet. Heather said they don't have anything over 40 mg in her canton store. I asked her how familiar she is with Butrans and she said they have the starting doses in her store. She said they get some prescriptions for both products. Explained patient types for Butrans and conversions and titration.
PPLPMDL0020000001	Fairlawn	OH	44333	3/3/2014	Used insight for first time ERO opioid use for opioid naive patients. Dr said that he is unlikely to use OxyContin as a first line opioid. Dr said that he will use IR opioids because if he goes to an ER opioid that makes him feel that he's committed to it forever. Dr said its also the patients own feeling of need to take a pill every 4 or 6 hours to control pain. Barry asked if he feels its riskier to use OxyContin than Percocet? Dr said no its not and reiterated that its his belief that using an ER opioid makes him and the patient committed. Discussed conversions and use of the product in he right patient. Butrans for the vicoden patient and dr said that he could use Butrans for that vicoden failure.
PPLPMDL0020000001	Akron	OH	44333	3/3/2014	Spoke to dr about a patient he has on Butrans who's analgesia runs out at day 5. Dr said he got her insurance plan to approve two additional Butrans patches for the month and in the new year they are not approving it. Discuss reasons for this based on insurance plan changes. Dr said he's going to do another peer to peer discussion to gain approval. Asked how the protocol is going for Butrans and he said its running smooth. Dr discussed a patient taking OxyContin and not being able to get it approved in the new year as well. Dr said he needs to fail MS Contin in which he said most patients. Asked for continued Butrans and OxyContin prescriptions.
PPLPMDL0020000001	Cleveland Hts	OH	44118	3/4/2014	Reviewed OxyContin Q12h, flexible dosing strengths said he continues to find appropriate patients. Discussed Butrans for those patients requiring around the clock analgesia, said he will consider, Inquired about a updated formulary card.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/4/2014	Quick call in hallway of hospital. I told him how great the pain seminar was and thanked him for so welcoming me and Purdue. I told him to continue supporting Butrans for the right patients. Nothing else learned.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	3/4/2014	Discussed with dr the patient she spoke to me about on my last visit. I told her that I noticed that the patient had been on Butrans previously and on the 5mcg dose. I told dr that she told me she was considering Butrans because the patient has had so many tolerability issues in the past and as considering Butrans. Dr said she wondered why the patient was not moved to the 10mcg. Dr said after she noticed the who the patient was she said the patient had never been on Butrans previously. Dr said maybe it was prescribed but never filled. Discussed the situation with Darlene and told her that the patient can get Butrans with the current insurance but with a PA. Darlene said she will keep it and initiate the pa once it is prescribed.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/4/2014	Spoke with Liz the office manager about the doctors use of OxyContin. I asked why he isn't using the OxyContin copay cards? Liz asked how the help patients. Discussed the cards and asked for her to tell him to use them for commercial patients. I asked Liz to let me know when she gets denials for OxyContin and let me know what dose he is prescribing the most of. Spoke to Liz about looking for patients that are already on IR oxycodone and reassessing them for OxyContin. Nothing else learned.
PPLPMDL0020000001	Cleveland Hts	OH	44118	3/4/2014	Reviewed OxyContin and Butrans savings card with RPH, no new info learned.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/4/2014	Spoke to Glenn about Butrans prior authorizations and denials. I told him that the only way I can help him figure out situations of denials for Butrans is to be provided some sort of data to support this. I asked him if he would identify a plan or two that have been difficult for him with Butrans. Glenn said he would do that and I told him I want hard copies to give to our RAE to research.
PPLPMDL0020000001	Akron	OH	44305	3/4/2014	I told dr that from my understanding when patients are taking more than two pills of an IR opioid per day they are considered to taking them around the clock. Dr said he agrees. I showed him the Scott profile for Butrans and said when he has an existing patient in on tramadol and they are taking it more than twice a day to switch them to Butrans. Dr said that every time he has a tramadol patient in he thinks of Butrans. I told him that's good to know. I showed him the Percocet to OxyContin conversions from the main visaid and asked him to also think OxyContin when a patient is taking Percocet around the clock. Dr said he's always trying to make his patients more efficient with their medicines.
PPLPMDL0020000001	University Hts	OH	44118	3/4/2014	Window call, Reminded of OxyContin Q12h along with savings cards for Butrans as well. In addition to those Tramadol failures requiring around the clock analgesia. Said Ok, will consider. Nothing new learned. Invited to Butrans program
PPLPMDL0020000001	Akron	OH	44305	3/4/2014	Met Nicole the pharmacist who is new and fresh out of school. Introduced Butrans for the first time hitting all new key selling messages. Discussed dosing, conversions, patient types and dosing. She said they had one 5mcg on the shelf. Discussed copay cards as well. Showed her the OxyContin conversions from main visaid and asked her what they are saying in school about OxyContin? She said they are not saying good things about all narcotics and saying the use is trying to be curbed and it's not just OxyContin. Showed her the conversions and discussed its the right medicine for the right patient.
PPLPMDL0020000001	Cleveland	OH	44127	3/4/2014	Reviewed OxyContin Q12h, flexible dosing strengths, Savings cards, said Ok but doesnt prescribe CII's, reminded of Butrans CII, for those Tramadol failures requiring around the clock analgesia, Said he will consider, has alot of Caresource/managed medical
PPLPMDL0020000001	Cleveland Hts	OH	44118	3/4/2014	Reminded of Butrans for those Tramadol failures requiring around the clock analgesia, said he hasnt used it yet, but will consider, Also reviewed OxyContin Q12h,
PPLPMDL0020000001	Cleveland	OH	44118	3/4/2014	Reviewed OxyContin Q12h and flexible dosing strengths along with Butrans for those Tramadol failures requiring around the clock analgesia. Said Ok, likes Q12h dosing along with 7 day transdermal delivery system, Reiterated that Butrans has the same abuse/misuse potential as other opioids.
PPLPMDL0020000001	Cleveland	OH	44114	3/5/2014	Reviewed Butrans for those Tramadol/Norco failures requiring around the clock analgesia,15mcg/hr dose, formulary-BWC. Said Ok will continue to remind Marshall,Bernie and Muenster. Also expressed. Invited to upcoming program
PPLPMDL0020000001	Cleveland	OH	44113	3/5/2014	Quick Butrans reminder, Patient info booklets along with Invite to upcoming March 20th program. Said she continues to find appropriate patients along with educating them about Butrans.
PPLPMDL0020000001	Cleveland	OH	44113	3/5/2014	Reviewed Butrans for those Tramadol failures requiring around the clock analgesia, also discussed multiple doses of IR products around the clock, Said she will continue to find appropriate patients, says she use patient info booklets to help educate and set expectation of subsequent visits/invited to upcoming program
PPLPMDL0020000001	Cleveland	OH	44114	3/5/2014	Reviewed Butrans for those Tramadol/Norco failures requiring around the clock analgesia,15mcg/hr dose, formulary-BWC. Said Ok will continue to find appropriate patients. Invited to upcoming program
PPLPMDL0020000001	Akron	OH	44320	3/5/2014	Discussed with dr using the lost effective dose. Dr said she agrees with it. Discussed escalating doses of short acting opioids and using them for patients with around the clock pain. Dr said that she agrees its not a good approach and that sometimes she doesn't feel like getting into an argument with her patients about use of ER opioids vs IR opioids. I asked dr if she just tells patients what she is going to give them for pain instead of the patient deciding how to Medicare for pain by giving such a wide dosing range on a prn basis? Dr said shed like to do that more but patients leave the practice when they don't get what they want. I asked her if that's bad and she said sometimes yes because that's revenue. Discussed how she can fit in products like Butrans and OxyContin.
PPLPMDL0020000001	Lakewood	OH	44107	3/5/2014	I asked if she was still stocking my products she said yes. I reviewed she saw. Ole use of oxycontin's d asked if she knew about the reformulation, she said yes. I asked her how much he thought that was important, and she said extremely.
PPLPMDL0020000001	Akron	OH	44320	3/5/2014	Spoke to dr along with dr Adams about using the lowest therapeutic dose. Dr said she wants to but that's not what the patients want. I asked her how she thinks the patients got to that point? Dr said because they always want more. I told her that someone is giving them more though and that has to come to a point where if a patient is taking an IR opioid around the clock they should be moved to an ER opioid or referred. Dr said that's when they refer. I told her she may not have to refer as much if they initiate ER opioids sooner. Dr agreed and said they try not to do that. Discussed where Butrans and OxyContin fit into that philosophy with patient profile use.
PPLPMDL0020000001	Cleveland	OH	44109	3/5/2014	Visited PMR Dept. invited (Harris,NP's to upcoming program, Left Butrans/OxyContin info
PPLPMDL0020000001	Westlake	OH	44145	3/5/2014	Spoke about changes to opioids Nd she said there were none set in place. I asked her how I can see the dr outside a lunch and she said his schedule changes so much they could barely keep track of where he is. Reviewed Butrans dosing and patch placement along with managed care.

PPLPMDL0020000001	Lakewood	OH	44107	3/5/2014	Invited to march 20th Butrans program, dr said he was t sure he could come. I said extended release opioids are big in discussion....and asked if I could answer why I'm here today. Dr said to sell more opioids. I said no. To suggest a reduction of atc short acting opioids for the extended release consideration, Such as OxyContin for those appropriate. Dr didn't have much to say and walk away to see a patient. It was a window call.
	Akron	OH	44333	3/5/2014	Good discussion over lunch about finding the lowest therapeutic dose. Discussed escalating doses of IR opioid to treat around the clock pain. Elise said most patients that come to their practice come on moderate to high doses of vicoden. Elise said it would be nice if FP and IM would do more to evaluate the patients pain but understands it may be out of their scope. Elise said Butrans has been a product great for more moderate pain patients who may not be surgical candidates. Discussed appropriate parts for both Butrans and OxyContin. Elise said there may be cases where OxyContin would be prescribed after NSAIDs. She said that OxyContin is a great product for patients in severe pain who need an ER opioid. Reviewed profiles for each product and discussed titrations for each.
PPLPMDL0020000001	Akron	OH	44333	3/5/2014	Good appointment over lunch. Discussed Butrans and OxyContin and where each one fits in his practice. Dr said his nit he for Butrans is for older adults who have chronic pain like spinal stenosis or arthritis. Dr said that patient type likes that they can put it on and not change it for a week. Dr said he has many others younger than 65 on it in which it works well but the older population loves it. Discussed use in older populations from visaid. Discussed OxyContin use, doses, patient profiles, titration and need for supplemental analgesia. Dr said many of his patients need breakthrough medicine. I asked him if he has titrated the dose instead? Dr said yes but it doesn't always do the trick. Discussed how patient type selection impacts that finding and what dose patients are started on based on pain intensity.
PPLPMDL0020000001	Akron	OH	44313	3/5/2014	Caught dr in between appointments and asked him when the last time he write a new prescription go OxyContin? Dr said he writes the a lot. I asked new prescriptions or refills? Dr r said both. I asked if he could tell me when he writes a new OxyContin who he's writing it for? Dr said usually for a patient that is taking Percocet and doesn't have an issue paying for it. I told him that's good to know. I asked to think of OxyContin for that 20mg a day Percocet patient who you know has pain around the clock. Dr said ok. Reminded him to use Butrans more often of those failing on tramadol or vicoden.
	Westlake	OH	44145	3/5/2014	Spoke to the ma (I can't spell her name) - I said its common practice to try and write the lowest effect dose of most pharmaceuticals right? She said right. I said would u ever really write the highest dose to start? She said no. I said then answer me this...if opioids have such abuse potential....what is the clinical benefit of writing a short acting product several times a day given 1 to 2 a day? She said she didn't know. I reminded her that my goal was not to increase his opioid volume but to rethink the delivery system for those approaches for an extended release product like Butrans or OxyContin. She said she would tell the dr what I said.
PPLPMDL0020000001	Lakewood	OH	44107	3/5/2014	Invited to Butrans program which he is not certain he can attend. I told him I was aware of his worries and hesitations regarding writing opioids and OxyContin. I reminded him that next week at our lunch we would talk about the myths and the facts of OxyContin along with my thoughts about choosing products with the lowest effective dose and concentrating On The safety aspect of selecting products. Dr said he was looking forward to it.
	Akron	OH	44303	3/5/2014	Told Rod about what I'm talking to physicians about recently and told him I thought I would be important to let the pharmacists know in the area. Discussed speaking to drs about using the lowest therapeutic dose, drs continuing to treat around the clock pain with IR opioids, drs saying its easier to just write refills. Rod said it sounds like a discussion that needs to be had with doctors because he agrees that too many patients are left on IR opioids which tends to cause more abuse problems. Discussed Butrans and OxyContin and where they fit in by heading the escalating doses of IR opioids off at the pass by prescribing ER opioids sooner and recognizing chronic pain.<font color=blue><b>CHUDAKOB's query on 03/18/2014</b></font>Cliff, when he said that IR opioids cause abuse problems, it is incumbent upon us to let him know that so do extended-release opioids like Butrans and OxyContin, even if he knows it. If you did do that, then it can be in your call notes. This is the fair balance of the presentation. Does this make sense?<font color=green><b>REICHL's response on 03/20/2014</b></font>Agreed. I'm confident I discussed that with him. Did not note it.<font color=blue><b>CHUDAKOB added notes on 03/21/2014</b></font>OK. I believe you did. Please make sure to note it as well. Invited him to Mondays lunch. I set it up with talking about the 2014 opioid myths about OxyContin any concerns that he will have....and that I have the medical affairs number on speed dial. I reminded him that he has yet to fully understand the value Butrans could potentially bring to a patient and urged his participation. He said he will see.
PPLPMDL0020000001	Lakewood	OH	44107	3/5/2014	I asked dr when the last time was he prescribed a new OxyContin prescription? Dr said he wasn't sure but does write it. I asked him when is he typically writing it and for what type of patient? Dr said his patients on OxyContin were on too high of doses of short acting so he converted them. I told dr that he can write OxyContin as low as 10mg q12 and that would be for a patient either who is opioid naive to a patient taking 20mg of Percocet. Dr said ok. I asked him to write more OxyContin and then Butrans for those who are failing tramadol or vicoden.
PPLPMDL0020000001	Cleveland	OH	44102	3/5/2014	Discussed OxyContin Q12h along with flexible dosing strengths. Quick reminder on Butrans for those patients requiring around the clock analgesia. Asked for assistance on gaining access to Nancy NP-(Dr. Nouraldin). Invited to upcoming program
PPLPMDL0020000001	Barberton	OH	44203	3/6/2014	I asked the doctor is she was aware of the reformulation of OxyContin back in 2010. She said oh yes. I asked if there was any information I could provide her on the Percocet conversion to OxyContin, for appropriate patients she said no she knew. Left a study on Butrans for her to review the pain scores and the dosing.<font color=blue><b>CHUDAKOB's query on 03/18/2014</b></font>Lisa, I am guessing that the vast majority of the time, when we ask a physician if there is any information we can provide them, the answer will be no. I think your next call objective is a good start. What insight will you use? How will you engage her in conversation after the insight. Try to be a little more specific on the next call objective. It will pay off.<font color=green><b>BARTOLI's response on 03/20/2014</b></font>I would use the primary care insight next time. I did back off because of her body language and eye glare at this visit.<font color=blue><b>CHUDAKOB closed the query on 03/21/2014</b></font>
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/6/2014	Spoke to Kyle the pharmacist about Butrans and OxyContin. I asked him how familiar he is with Butrans and showed him the initiation and titration guide? Kyle said he knows about it but they haven't filled it in along while. Kyle said he didn't know it was a schedule 3 and asked if I have spoke with falls family doctors because they would jump on it. I told him I do meet with them about Butrans. Explained the dosing, conversions and titration along with appropriate patient types. He has none on the shelf and said he would speak with the staff about it and wanted the slide conversion guide. Discussed OxyContin dosing, appropriate use, titration and how much he dispenses. Kylie said he dispenses some but not a lot.
PPLPMDL0020000001	Barberton	OH	44203	3/6/2014	Susan the ma said that there were no lunches and the dr won't see me. I've been leaving literature. I discussed the product am scheduling and the goal of identify current patients on short acting opioids of converting g them to a different delivery system if appropriate. Susan said she would pass the information to the dr but I could t see him.
PPLPMDL0020000001	Uniontown	OH	44685	3/6/2014	Discussion in hallway of green office. I asked dr if he has been finding new opportunities for OxyContin 10mg of those patients on lower doses of Percocet? Dr said he is trying all the time. I told him that the dosing flexibility allows him to make the dosing as specific. To the patient as possible. Told him that the same hold true with Butrans and that the 4 doses allows him to also make the dosing adjustments necessary to each patient.
PPLPMDL0020000001	Lyndhurst	OH	44124	3/6/2014	Dr just returned from 2 weeks out of office, behind, next week better to talk. Met with Ebony (med assjat front window. Discussed indications, dosing, scheduling for OxyContin & Butrans. Discussed trial, savings cards. Left protect your practice tri fold & 4/30 invite for Dr Roda & Patricia Moran as well.
PPLPMDL0020000001	Stow	OH	44224	3/6/2014	Spoke to Sandra about the goal of an hcp to use e lowest effective dose. Sandra greed and stated the new office policy about moving patients down on their total daily dose of opioids. I talked about when the realization is to initiate an ER opioid like Butrans or OxyContin. I spoke to her about the right medicine for the right patient at the right time. Discussed when and patient types for buy tarns and OxyContin. Sandra said she agrees and said she will see the need for more Butrans because of what they are doing with their patients. Sandra said that she will use Butrans once patients are down to 3 or 4 pills and have been proven to still be in pain every day. Discussed dosing and asked for her to also use the patient information guides.
PPLPMDL0020000001	Lyndhurst	OH	44124	3/6/2014	Quick window call reminded her of last conversation where she agreed to consider Butrans after migraine meds, Botox, and before Vicodin or Percocet. Discussed 4/30 program. OxyContin after prn oxycodone & Percocet.
PPLPMDL0020000001	Stow	OH	44224	3/6/2014	Short conversation about using the lowest therapeutic dose. Laura said that the practice is taking the stance now where they have a policy about opioid amounts and total morphine equivalent per day. Laura said they are trying to weine all patients down on their total opioid amount per day and that she thinks Butrans use is going to pick up. I asked why and she said because Butrans is first a week long patch, dosing is somewhat low, and its a schedule 3. Laura said she really likes it and is going to try and use more going forward.
PPLPMDL0020000001	Stow	OH	44224	3/6/2014	Spoke with dr Holmes along with dr bailey. Asked the question about lowest therapeutic dose. Dr said she agrees and will usually use the comments from the patient, level of pain intensity of the patient, and radiographic evidence to determine what the course of action will be. I spoke about how many patients continue to go through escalating doses of IR opioids to treat around the clock pain and asked her why that is? Dr said dr bailey that the hope is that they won't use the high range of the IR opioid prn use and said if they do she will make the decision to start an ER opioid like OxyContin or Butrans. I discussed the options of OxyContin and Butrans by talking about patient specific use and proper initiation and titration.
PPLPMDL0020000001	Uniontown	OH	44685	3/6/2014	Re-introduction to dr from the time she was with the spine and pain institute. Dr said she still has the Butrans information I gave her at the old office. Dr asked about conversions from vicoden. Reviewed conversion scale from main visaid and used the Kathy profile to discuss patient specific utilization. Dr said ok and we will talk more in an appointment. Told her I have OxyContin as well and would like to discuss that as well. Gave her a conversion and titration guide.
PPLPMDL0020000001	Stow	OH	44224	3/6/2014	Spoke with dr bailey and holder at the same time. Led with asking with no matter what disease state they are writing for is it the goal to write the lowest therapeutic dose? Dr bailey said it is. I asked him when a IR opioid is written what it looks like? Dr said usually the lowest he can write which is 1-2 pills a day prn. I asked if he has patients taking more than that per days. Dr said he does but said that the hope is that patients pain isn't chronic. I asked how he determines when. A patient is chronic. Dr said all patients are different and sometimes radiographic evidence doesn't always correlate with a patients pain. I asked why patients are being treated with IR opioids for around the clock pain? Dr said again is that the hope is that its not chronic. Dr said there are some that take 3 or more pills every day. I told dr that's when he needs to use products like Butrans or OxyContin and showed him the dosing guides. Dr said he knows and will keep them in mind.
PPLPMDL0020000001	Uniontown	OH	44685	3/6/2014	Spoke with Abby and new physician Marisa Wynne in their office in green. Short discussion with both about Butrans and OxyContin. I asked Abby that she is now in a practice that prescribes OxyContin and has good success with it what her thoughts are on it? Abby said that she's not sure yet and because it's been so long that she needs a refresher which she has had from the other providers in the office already. She asked if I was coming in for a lunch to talk more and I told her it do soon. Reminded her to continue prescribing Butrans for those failing IR opioids especially those on tramadol and low dose vicoden. Abby said she will continue to prescribe.
PPLPMDL0020000001	Cleveland	OH	44103	3/6/2014	Reviewed OxyContin Q12h, along with Butrans for those Tramadol failures requiring around the clock analgesia. Reiterated her position along with the Chief Medical Dir. Referring most patients to Pain mgmt. Invited to upcoming program
PPLPMDL0020000001	Barberton	OH	44203	3/6/2014	Dr mentioned he heard hydrocodone was going schedule 2. I asked him how he felt about schedule 2 product opioids vs. schedule 3 and he said he felt schedule 2 products are harder to deal with cause of step edits with insurance companies. I reviewed OxyContin and the managed care. And the review of Butrans. Discussed the patient on short acting products. And asked if he had 2 patients that were on them dosed several times a day and he said a few. I asked the clinical be it of dosing that way vs. an extended release delivery system like OxyContin? He said the name was his hurdle.
PPLPMDL0020000001	Stow	OH	44224	3/6/2014	Good conversation about the state of Summit Pain. Dr told me that they hire a new CEO and business manager, their patients are steady and seeing more referrals. Dr talked about how the new philosophy is to reduce the total opioid amounts for every patient and weine opioids down for those on high doses. I spoke to him about how Butrans would fit perfectly into that new philosophy. Spoke about Butrans down, indication, patient types and starting it sooner than later in the algorithm for treating pain.
PPLPMDL0020000001	Cleveland	OH	44195	3/6/2014	Discussed OxyContin Q12h, Savings Cards along with Butrans for those patients requiring around the clock analgesia. Said he will consider along with discussing with Fellows (Travineek etc)
PPLPMDL0020000001	Akron	OH	44312	3/6/2014	Discussion in back hallway about Butrans. Dr said at he has tried it a couple of times since we last spoke and had some insurance issues and patients didn't start it. I asked if he or someone in the office knew the plans? Dr said he can't remember by audit was mid month of Feb. I asked dr to continue to find candidates and reviewed Scott profile and conversions. Dr said he will try to get plan info for me on my next visit. Dr also said its not going to stop him from trying it in his practice. Told dr not to forget about those patients needing a dose adjustment on Percocet that are in pain around the clock. Dr said it makes sense and will continue to help those in
PPLPMDL0020000001					

	Barberton	OH	44203	3/6/2014	Set up the objective for why I was in the office today with the extended release insight. I asked him if he was me, wouldn't you select some primary care offices to consult. He said probably so. I brought up something he said last time, he said he sees a great deal of patient in pain on Percocet and short acting products and that most of his extended release patients are in the nursing homes. And the goal today, was not for him to increase his volume of opioids. But in fact to be open to the possibility that some patient currently being treated with short acting products may be appropriate for a. Extended release delivery system. I asked him if this sounded fair and reasonable. He said yes. Dr said he has written Butrans in the nursing home, discussed the Initiation guide for Butrans and reviewed the morphine equivalent doses not appropriate for Butrans. Discussed the patient he thinks of for OxyContin and he said the older more severe. Then he said it was because when it first came out that's where it was positioned. We reviewed all the dosages and the 12.3 section comparing oxycodone half life to OxyContin. Dr said he never realized the half life, as I referred to OxyContin and a short acting product with an extended release delivery system. Dr agreed it made no logical sense to keep someone on Percocet if they are being dosed several times a day and he said he will change the. To OxyContin if appropriate. And agreed to look at Butrans after Tramadol for appropriate patients. <font color=blue><b>CHUDAKOB added notes on 03/18/2014</b></font>This looked like a really good call. I liked how you checked in with him. You also provided him with good clinical data. Keep selling him on what he agreed to. Don't veer off course. Nice call Lisa!
PPLPMDL0020000001	Akron	OH	44312	3/6/2014	Quick message in hallway about OxyContin and Butrans. I asked dr to please reassess his existing patients on Percocet for OxyContin? Dr said he is doing his best to keep the amount of opioids his patients are taking. I told dr that's good and OxyContin can help with that because its a fixed dose, single entity opioid with doses as low as 10mg q12. Dr said those are good points and he will try. I asked him to get back into Butrans. I told him that I don't want him to be missing opportunities for Butrans use in those that are stuck in tramadol or vicoden and still in pain around the clock. Dr said he will try.
PPLPMDL0020000001	Akron	OH	44312	3/6/2014	Failed to enter call on call date of 3/6/14. Discussed with dr the opioid experienced trial focusing on inclusion and exclusion criteria, age range of patients involved in study, clinical results and asked him if his results have been similar? Dr said they have. Dr said all his patients on it really like it and get good pain relief. I asked dr to focus on Butrans for his tramadol and vicoden failures or in-tolerability. Dr said he will. Discussed the option of OxyContin for his patients already on IR oxycodone. I told dr that I'm pretty sure he had those types of patients. Dr agreed and said its hard to get them to switch. I asked him to try.
PPLPMDL0020000001	Cleveland	OH	44113	3/7/2014	Visited Pain/Anes dept. Reviewed OxyContin/Butrans with Dr. Shen and Dale, Discussed appropriate patients and Savings Cards
PPLPMDL0020000001	Cleveland	OH	44195	3/7/2014	Quick OxyContin reminder , Q12h, flexible dosing strengths, savings card along with Butrans for those patients requiring around the clock analgesia. Invited to Butrans program . Said she will consider and continue to find appropriate patients
PPLPMDL0020000001	Cleveland	OH	44195	3/7/2014	Intro. Discussed OxyContin Q12h, 7 tablet strengths, patients taking IR products around the clock, Dr.said he will continue to prescribe for appropriate patients. We also reviewed Butrans for those patients requiring around the clock analgesia, He along with Mel Davis MD are proponents of Butrans, does prescribe on the floors and will continue to explore new patient starts, Reviewed Butrans and OxyContin Savings card programs
PPLPMDL0020000001	Cleveland	OH	44113	3/7/2014	Reviewed OxyContin Q12h, flexible dosing. Discussed IR products utilized around the clock along with Butrans for those patients requiring around the clock that are not adequately controlled on present therapy. Said he will consider to prescribe and influence appropriate patients
PPLPMDL0020000001	Cleveland	OH	44113	3/7/2014	Reviewed OxyContin Q12h, flexible dosing. Discussed IR products utilization around the clock, agreed, said it was a PC problem. Also, reviewed Butrans for those patients requiring around the clock that are not adequately controlled on present therapy. Said she will consider for appropriate patients<font color=blue><b>CHUDAKOB's query on 03/17/2014</b></font>-Mark, what is a PC problem?<font color=green><b>GUTKOMA's response on 03/17/2014</b></font>-Primary Care Physicians are responsible for the IR around the clock prescribing habit.<font color=blue><b>CHUDAKOB added notes on 03/18/2014</b></font>-Please write out everything. This way there is no confusion with anyone reading the notes. Thanks Mark!
PPLPMDL0020000001	CLEVELAND	OH	44195	3/7/2014	Reviewed w/Troy OxyContin/Butrans Savings card info along with utilization, no new info learned
PPLPMDL0020000001	Cleveland	OH	44113	3/7/2014	Reviewed with Justin Rph OxyContin/Butrans patient types asked for referrals, invited to upcoming Butrans program. No new info learned
PPLPMDL0020000001	Akron	OH	44312	3/7/2014	I asked dr if he has patients taking IR opioids for pain who may be of Medicare age who may have hepatic or renal impairment which may limit you in your treatment of their pain? Dr said he does have a few that he has to be careful with and asked why? I told him about the use of Butrans in special populations and discussed renal and hepatic impairment. Dr said that's good to know and will help him find more people. I asked him to please continue thinking of Butrans for those on NSAIDs or tramadol who need a dose adjustment. Dr said ok. I handed him the OxyContin conversion guide and told him to start it in patients already taking Percocet.
PPLPMDL0020000001	Cleveland	OH	44195	3/7/2014	Visited Onc/Dept met with Goforth, Faïman, Bassan, Reviewed OxyContin and Butrans Initiation/Titration guides, Savings Cards along with upcoming program invite
PPLPMDL0020000001	Akron	OH	44319	3/7/2014	Dr came to window and asked if I'm there to remind him about Butrans? I said yes but I'm there to talk to him about OxyContin. Dr said he just refilled a few this week and had one new start. I told him that's great and asked him what the patient was on prior to starting? Dr said it was a patient who was taking up to three Percocet a day and needed more. Dr said he stated on 10mg because its an older patient. I reminded dr that he can titrate every one to 2 days and the next dose up would be the 15mg. Dr said thanks. Gave him a conversion guide and then reminded him to start a patient on Butrans who needs an adjustment on tramadol. Dr said that's where he will probably use it first. Dr asked about vicoden conversions. I showed him the conversion guide and explained it. I asked for business and he said he will write it sooner than later.
PPLPMDL0020000001	Akron	OH	44305	3/7/2014	Good conversation about OxyContin and Butrans. I asked dr to explain to me the difference between a patient he will write Percocet for vs one for OxyContin? Dr said he will write Percocet for a patient who has acute pain. I asked dr to give me an example in his practice and he said for patient who has just presented with lung cancer who is in severe pain. Dr said he will write Percocet up to 2 pills a day. I asked when the switch to OxyContin happens? Dr said once the patient needs more than two pills he will write OxyContin. Dr said sometimes the nurses from the hospital will call him and say that the patient needs more Percocet. Dr said he always has to educate the nurses about OxyContin and Percocet and will always write OxyContin for those patients in the hospital. I showed dr the conversions and asked him to continue to reassess his Percocet patients for OxyContin. Dr said ok. Quick detail on Butrans and asked him if he writes fentanyl? Dr said he does and patches work for some patients who can't tolerate oral narcotics. I explained the patch and dosing schedule with conversions and titrations along with the vicoden profile. Dr said he will keep it in mind for more moderate pain.
PPLPMDL0020000001	Akron	OH	44307	3/7/2014	Spoke with Eric about OxyContin and Butrans. Spoke to him about how too many patients are not being switched to ER opioids at the point where a patient is experiencing pain around the clock. Eric said he totally agrees and that he sees it all the time in the pharmacy where the same patients continue to increase doses of vicoden and Percocet. I asked if they see most of their padri options from FP and IM? H said for sure but they get their fair share of pain specialists that do it to. I discussed OxyContin patient specific candidates and fixed dose single entity ER oxycodone. Discussed Butrans indication, doses and conversions. Eric said they see a lot of Medicaid and they don't usually use the copay cards because patients don't qualify.
PPLPMDL0020000001	Akron	OH	44307	3/7/2014	Spoke with Eric about OxyContin and Butrans. Spoke to him about how too many patients are not being switched to ER opioids at the point where a patient is experiencing pain around the clock. Eric said he totally agrees and that he sees it all the time in the pharmacy where the same patients continue to increase doses of vicoden and Percocet. I asked if they see most of their padri options from FP and IM? H said for sure but they get their fair share of pain specialists that do it to. I discussed OxyContin patient specific candidates and fixed dose single entity ER oxycodone. Discussed Butrans indication, doses and conversions. Eric said they see a lot of Medicaid and they don't usually use the copay cards because patients don't qualify.
PPLPMDL0020000001	Uniontown	OH	44685	3/7/2014	Saw heather along with dr Orgel. I asked her if she thought OxyContin would be a product she would find useful in her practice? Heather said it will not be part of her prescribing. I asked if Butrans seems like it would be an option for her patients failing tramadol or vicoden? Heather said possibly. I gave her an initiation and titration guide and asked her to just try it. Heather said ok.
PPLPMDL0020000001	Cleveland	OH	44195	3/7/2014	MSL email communication with Dr. Dell to provide responses to questions regarding BUP3031 protocol and potential surgical population. Dr. Dell continues to work with pediatric surgeons and orthopedic surgeons to assess interest in BUP3031.
PPLPMDL0020000001	Cleveland	OH	44195	3/7/2014	Quick call in hallway, Reviewed OxyContin Q12h along with Butrans- 7 Day transdermal for those patients requiring around the clock analgesia. Said he will consider and to book appt. with admin. Pat
PPLPMDL0020000001	Akron	OH	44312	3/7/2014	Short conversation as dr was packing up to leave for the day. I asked her if she had seen back her last patient started on Butrans from vicoden for a follow up? Dr said she just saw the patient yesterday and is liking Butrans. Dr said the patient is getting good pain relief and wants to continue it. I told her that's great to hear and asked her to build on that success for even more candidates. Reminded her to use OxyContin for those patients of hers who she has refilled Percocet for more than 2 times. Dr said she probably won't do that because she doesn't want to commit to long term pain. I asked her how different it is by treating the same pain every 4 or 6 hours? Dr said we can discuss next time.
PPLPMDL0020000001	Uniontown	OH	44685	3/7/2014	Signing up for lunch and dr and saw dr walking by. Stopped dr and told him if he would reassess his patients on Percocet for OxyContin? Dr said he is trying. I reminded him that OxyContin is a fixed dose, single entity ER opioid with 7 doses. Dr said ok. Told him to not forget about Butrans for those patients needing a dose adjustment on tramadol.
PPLPMDL0020000001	Cleveland	OH	44195	3/7/2014	Reviewed OxyContin Q12h, 7 tablet strengths along with Butrans for those Tramadol failures requiring the clock analgesia. Said she will consider, invited to upcoming Butrans program
PPLPMDL0020000001	Uniontown	OH	44685	3/7/2014	I asked dr why he isn't seeing reps anymore unless they have a new product? Dr said he's been too busy to do it. I asked him if a lunch is even out of the question for Butrans? Dr said he hasn't been even doing lunches but said if I want to come in for a lunch I can. I told dr I appreciate it and until then to get some more Butrans use for those needing an adjustment on tramadol. Dr said ok. I handed him the OxyContin conversion guide and told him I know he doesn't write schedule 2 medicines but it may be suitable for him to write it in a patient who already are on Percocet. Dr said he probably won't but ok.
PPLPMDL0020000001	Westlake	OH	44145	3/10/2014	Spoke to Kathy and Rosie the rn regarding Butrans and patch placement and managed for both products.
PPLPMDL0020000001	Brooklyn	OH	44144	3/10/2014	Reviewed OxyContin Q12h, 7 tablet strengths, Savings Card. Discussed Q4-6h IR dosing schedule, Said he agrees and will consider for appropriate patients that can afford option. Reminded of Butrans for those Tramadol failures requiring around the clock analgesia, Will consider for appropriate patients that can access Butrans, Overall feels patients are adequately controlled. Invited to program
PPLPMDL0020000001	Lakewood	OH	44107	3/10/2014	Discussed reviewing current opioid patients and reevaluating those that may be appropriate for an extended release delivery system. Dr said yes when I asked if it was his goal to treat patients with the lowest most effective dose. Dr agree. Discussed when Patient comes in on a short acting opioid or Tramadol on 2 not controlled and wanting another dose...I asked if he could pause and reassess if the patient would be appropriate for Butrans or OxyContin. Dr said he was trying not to write OxyContin. When asked why he stated "they" don't want patient treated with chronic pain meds. When clarified who, he said the ccf main office. Dr said he was interested in Butrans and asked a few times it was schedule 3. Discussed Initiation. dr said most of his patients were under 300 mg, reviewed the 5mcg of Butrans. Also touched on steady state and managed care for both products. Reviewed the Percocet patient not controlled, discussed appropriate patient type for OxyContin. And reviewed indication for both Butrans and OxyContin.
PPLPMDL0020000001	Brooklyn	OH	44144	3/10/2014	Reviewed OxyContin Q12h, 7 tablet strengths, discussed q4-6h IR protocol , Dr.said he will consider for appropriate patients, Reminded of Butans for those patients failing on Tramadol requiring around the clock analgesia, Savings Cards and formulary status. Invited to program
PPLPMDL0020000001	Cleveland	OH	44195	3/10/2014	MSL email communication with Dr. Dell to inquire about BUP3031 and to request contact information for adult clinical trials.
PPLPMDL0020000001	Lyndhurst	OH	44124	3/10/2014	Quick window. Introduction. Discussed Butrans after prn Tramadol, OxyContin after prn oxycodone, Percocet. Left 4/30 Butrans invite, 8x11 FPI, Dosing slider. Left OxyContin reformulation folder. ( no breakfasts, lunches yet, only there 30 days) savings cards both products, PAP orange web key,
PPLPMDL0020000001	Akron	OH	44319	3/10/2014	Walked in to discuss the OxyContin copay card specifics along with staff and dr came to window. I showed him the conversions from Percocet to OxyContin and said that we have discussed in the past about using more of the low doses of OxyContin and if he could start more patients from 20mg Percocet a day to OxyContin 10mg? Dr said he agrees he needs to do that more. Told him that patient specificity for Butrans is also important and explained the Kathy profile. Dr said he's going to do it and he just needs to find the right patient. I told him to look over the Kathy profile because he probably has someone like her to start Butrans on. Dr said ok.
PPLPMDL0020000001	Cleveland	OH	44109	3/10/2014	Discussed w/tech OxyContin/Butrans Savings Card info, Invited Pharm D to Butrans program. No new info learned
PPLPMDL0020000001	Mayfield Heights	OH	44124	3/10/2014	Met with new MA Theresa. Discussed OxyContin indications, dosing, opioid naive dose. Discussed Butrans indication, strengths, opioid naive dose. Left new 7-day marketing piece for dr Roxana. Left OARRS flashcard, protect your practice brochure. Left 3/20 invite Butrans. Left one Butrans patient guide. (Note: can schedule lunch after May 1, with office mgr Mary, for just their side).
PPLPMDL0020000001	Lyndhurst	OH	44124	3/10/2014	Quick window. Butrans as first opioid or after prn Tramadol, OxyContin after prn oxycodone or Percocet discussed.

	Akron	OH	44319	3/10/2014	I told dr that with any product he prescribes for all the disease stats he has to treat as a family doctor, I'm guessing that he has to prescribe the right medicine for he right patient. Dr agreed. I told dr that with OxyContin and Butrans is very much the case. I told dr to put it simply, OxyContin is a product that should be prescribed when an existing patient of his who needs more Percocet and has pain around the clock. I should him the conversions from the main visaid and asked him if he can do that the next time he's in that situation? Dr said its not that easy because patients would rather take 4 pills a day than 2. Dr said its a big psychological barrier to overcome with patients and it takes time. I agreed its going to take time but told him its a perfect opportunity to adopt change for a patient that needs more Percocet a day to discuss the option of OxyContin. Dr said ok. I showed him the Kathy profile for Butrans and told him that he can't continue to miss opportunities for patients taking hydrocodone around the clock to start Butrans. I explained the conversions and asked him what the downside is to using Butrans in patients like Kathy? Dr said he doesn't know. Dr said he will try.
PPLPMDL0020000001	Cleveland	OH	44109	3/10/2014	Visited Ctr. Left OxyContin/Butrans Initiation/Titration/Kathy profile along with invite to upcoming Butrans Program.(Campbell,Dziwiz,Dhillon,Slattery,Ng,Zabak,Fox, Geho, Gemechu)
PPLPMDL0020000001	Cleveland	OH	44109	3/10/2014	Dr.Reviewed OxyContin/Butrans PI and Initiation/Titration info. Said she is referring patients to PM, will consider if appropriate. No further contact requested
	Akron	OH	44319	3/10/2014	Spoke with the pharmacy technician Elise. She was receiving new medicines and didn't have time to talk much. She said that she knows of Butrans and looked into the system and said she didn't have any filled in the last 6 months. I have her the Kathy profile and just explained the hydrocodone combo candidate. Reviewed OxyContin dosing, conversions and showed her the conversion and titration guide. Elise said she fills it and the 40 mg if most commonly filled.
PPLPMDL0020000001	Highland Heights	OH	44143	3/10/2014	Lunch. Discussed titration & maintenance of therapy on pages 20&21 of core visual aid, discussed hepatic & renal impaired data. Dr appreciated information. Reminded him how to write, 4 strengths including 15 mcg hr, and what plans to write for. Discussed section 8.5 geriatric data. Dr states he would write Butrans more in med d over age 65 but Butrans challenging to find Med D plan that covers. Told him to focus on Caremark. We also discussed BWC & managed Medicaid. Dr also stated, doesn't it take 3 days for Butrans to work? I responded with steady state information, discussed use of non opioids & shirt acting opioids when initiating Butrans as per clinical trial data. Dr asked how long it takes for Butrans to get out of patients blood once Butrans is removed, followed up with answer from FPI. , Caresource PA. OxyContin, discussed starting, opioid naive dose. Geriatric patients studied. 7 strengths, lowest effective dose, side effect profile.<font color=blue><b>CHUDAKOB's query on 03/27/2014</b></font>Jenny, what specific information did you follow-up with him in the FPI when he said"Dr asked how long it takes for Butrans to get out of patients blood once Butrans is removed, followed up with answer from FPI."<font color=green><b>BALLUE's response on 03/28/2014</b></font>Section 12.3 Pharmacokinetics: ...after removal of Butrans, mean buprenorphine concentrations decrease approx 50% within 10-24 hrs, followed by decline with apparent half-left of approx 26 hrs.<font color=blue><b>CHUDAKOB added notes on 04/03/2014</b></font><b>Great. Nice work! Thank you!
PPLPMDL0020000001	Akron	OH	44333	3/10/2014	Asked Wendy to see if I could speak to the doctor for a quick second since he has decided not to do lunches anymore. Wendy said she can ask him but that I need to make it quick because he behind. Dr came to front counter. I gave him the OxyContin conversion and titration guide opened to the Percocet to OxyContin conversions. I asked him with Percocet what he considers as pain around the clock? Dr said it depends. I asked what it depends on? Dr said its usually around 2 or 3 pills a day. I asked him what he does when a patient reaches more than 2-3 pills a day? Dr said he tries to use a long acting opioid and said he likes Butrans. I told him I'm talking about OxyContin for his existing Percocet patients taking 3 or more a day and to convert them to OxyContin especially the patients failing Percocet or have a tolerability issue. Dr said ok. Told him he should have plenty of Butrans patient cards. Dr said to leave OxyContin cards.
PPLPMDL0020000001	Westlake	OH	44145	3/10/2014	No Dr was walking out to head to hospital. Asked if she wanted a posted of the spine and she said yes. I asked her if she was he's sister writing Butrans again since her last experience. She told me , she now sees the patients for the doctor at the hospital and writes under him or follows his direction what to write. We discussed the Tramadol failure patient and the potential appropriate use of Butrans. Reviewed starting dose.
PPLPMDL0020000001	Mayfield Village	OH	44040	3/10/2014	Met w tech Patricia first, female pharmacist floater in. Discussed RX patrol resources & left how to protect your pharmacy trifold brochure. Butrans, discussed scheduling, strengths, indication & patient guide. Left 1 Butrans guide & Discussed educational aspects of guide. Pharmacist asked if I could leave just a few savings cards; I responded we are not able to "break" packs of 5. OxyContin, they have a recent 10 mg prescription. Discussed OxyContin scheduling, recommended q 12 h dosing, 7 strengths.
PPLPMDL0020000001	Waterford	OH	45786	3/10/2014	I-Butrans dosing, clinical trials, administration, limitations of use and managed-care. OxyContin start principles and patient vignette.W-said that she has patients that Butrans would be appropriate for who are on Tramadol and not controlled. Said that she has had concerns of Butrans due to cost.
PPLPMDL0020000001	Akron	OH	44313	3/10/2014	I asked dr if it makes sense to him that if a patient has complained of pain around the clock for 3 or more months and taking short acting opioids for analgesia that I change probably needs to be made? Dr said usually it does. I asked him if it also makes sense that if a patient has been on Percocet for 3+ months and still in pain to give the patient the q12 h oxycodone? Dr said it seems simple enough. I asked dr to do it more often and to reassess those Percocet patients. Reminded him that Butrans continues to be a product suitable for patients failing tramadol or vicoden and its a schedule 3. Dr said he will try to find more patients.
PPLPMDL0020000001	Westlake	OH	44145	3/10/2014	Discussed managed care concerns that the doctor brought up from last time. Reviewed plans. Focused on caresource patients and the prior authorization, also covered commercial plans. Dr said he would write more Butrans if the managed would be affordable. Reviewed savings plans. Also discussed oxycodone short acting patient who is taking it atc to think about OxyContin if appropriate.
PPLPMDL0020000001	Brooklyn	OH	44144	3/10/2014	Quick Butrans review for those Tramadol failures requiring around the clock analgesia along with OxyContin Q12h, Said OK will consider, Invited to upcoming program
PPLPMDL0020000001	Brooklyn	OH	44144	3/10/2014	Reviewed Butrans for those Tramadol failures requiring around the clock analgesia along with OxyContin Q12h. Dr. Reiterated that she along with her colleagues at this location are not prescribing pain meds. Jackie/Kendra said they will keep info and contact if practice policy changes
PPLPMDL0020000001	Lakewood	OH	44107	3/10/2014	Reviewed with nurses the scheduling of both products and managed care coupons. Discussed patch placement, how to discard, initiation of Butrans from a hydrocodone or Tramadol product to Butrans. Nurse asked if they were out of a short acting product would caresource patient allow a few short acting pills along with Butrans until steady state is reached. I didn't have e answer. Nurses said the doctor was trying to decrease his schedule 2 products for chronic.
PPLPMDL0020000001	Akron	OH	44304	3/10/2014	Saw dr at counter where he discharges patients and asked him if he feels its appropriate to convert a patient on Percocet around the clock and still in pain to OxyContin? Dr said yes it does. Dr said he's told me before that he really doesn't like writing OxyContin because he's not a pain management specialist. I told him I understand but said I'm just asking why he might treat pain around the clock with a q4 or q6 product like Percocet? Dr said he sees my point and has been trying to evaluate those patients. I told him that's all I'm asking. Reviewed Butrans again as a product he can use for his patients failing tramadol with a 7 day schedule 3 transdermal system.
PPLPMDL0020000001	University Heights	OH	44121	3/10/2014	Found out from staff dr can no longer write CII meds or CII meds. He does write CIV meds and insists Tramadol, in state of Ohio, is schedule CIV. Discussed OxyContin indication, q 12 h dosing, lowest effective dose, initiating/ maintenance of therapy for cancer patients, dr says I no longer write OxyContin. Then reminded him of the many times we've discussed Butrans, 1 x week transdermal option. CII can be called in with refills. Consider as first opioid or after patient fails on prn Tramadol. He will most likely not write he says.
PPLPMDL0020000001	Lyndhurst	OH	44124	3/10/2014	(Meg with office mgr front window. Confirmed dr reed will be in @ my next FRI lunch. Show up by 11:45; as Karen Steffey leaves at 12 n that day) discussed OxyContin q12 h, start dose 10 mg, also opioid naive dose. Butrans, as first opioid ( start 5 mcg hr) or after prn Tramadol, start 10 mcg hr.
PPLPMDL0020000001	Cleveland	OH	44103	3/10/2014	Reminded of OxyContin Q12h, flexible dosing strengths along with Butrans for those Tramadol failures requiring around the clock analgesia,Senokot 5 request Said Ok, no new info learned
PPLPMDL0020000001	Richmond Hts	OH	44143	3/10/2014	Discussed OxyContin, indication, opioid naive /start dose of 10 mg, 7 strengths, lowest effective dose. Dr says he's not a fan of long acting opioids. He doesn't want responsibility of writing. Let him know I have resources available regarding more responsible prescribing of opioids that I will leave him. Reminded him of our previous discussions regarding Butrans. Suggested he give Butrans more thought after patients fail on prn Tramadol. He will consider, asked me to place packet on his desk. Left Butrans dosing slider, invite for 3/20 program,
PPLPMDL0020000001	Mayfield Heights	OH	44124	3/10/2014	Courtesy call, as I came in to speak with dr Roxana. Discussed OxyContin as q 12 h dosed option for pain, dr quickly responded, I don't write that, and I don't write long actings. Presented Butrans as option, in 1 x week transdermal system. I have a few patients on the patch ( George is confusing Butrans with Fentanyl) asked him to read over my information, so we can discuss further next time. Left Butrans 8x11 FPI, new 7 days marketing
PPLPMDL0020000001	Waterford	OH	45786	3/10/2014	I- Butrans dosing, limitations of use, boxed warning, administration, managed-care and co-pay cards. OxyContin start principles.W-said that managed-care has always limited his use of OxyContin and Butrans. He said that the co-pay cards would be helpful.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	3/11/2014	Discussed Butrans clinical trials explaining all parts of study and focusing on patient types appropriate for Butrans. Reviewed Scott and Kathy and asked dr about any recent experience with Butrans. Dr said she knows she has not used Butrans in a long while. I asked her why not? Dr said she is trying to get her patients to do more for themselves other than just taking analgesics and its working. I asked like what? D r said physical therapy, Aqua therapy and lifestyle modifications. I told her that there will still be some patients that require opioids and Butrans is a good fit for her practice since she does have existing patients on tramadol or vicoden. Dr said she does and will keep her eyes open. Explained the Butrans posters which she said she wanted and dr Azem will want them as well.
PPLPMDL0020000001	Cleveland	OH	44114	3/11/2014	Reminded of Butrans for those patients requiring around the clock analgesia, Reviewed Initiation/Titration and BWC. Invited to program. Said he continues to find new appropriate patients. Quick OxyContin reminder, Q12h
PPLPMDL0020000001	Cleveland	OH	44195	3/11/2014	Discussed Butrans for those patients requiring around the clock analgesia, Initiation/Titration along with Savings Cards, OxyContin Q12h flexible dosing strengths, . Said she will continue to identify appropriate patients. Confirmed attendance to March 20th program
PPLPMDL0020000001	Cleveland	OH	44127	3/11/2014	Discussed Butrans and Kathy profile, agreed she sees patients similar, feels patients are doing okay, relies on Josie for PA, but will consider. Reviewed OxyContin Q12h, Initiation/Conversion guide, discussed Q4-6h dosing of IR products, Said she prescribes very conservatively Q8h 20-30 max quantity. But will consider for appropriate patients. Invited to program
PPLPMDL0020000001	Cleveland	OH	44127	3/11/2014	Reviewed OxyContin Q12h, Initiation/Conversion guide, discussed Q4-6h dosing of IR products, Said he prescribes very conservatively Q8h 20-30 max quantity. But will consider for appropriate patients. Discussed Butrans for those patients requiring around the clock analgesia, said he has 2 patients in mind. Reviewed dosing. Invited to upcoming program
PPLPMDL0020000001	Euclid	OH	44132	3/11/2014	Front window. Discussed Medicaid prior auth for both Oxycontin and Butrans. Left 4/30 Butrans invite and how to protect your practice brochure.
PPLPMDL0020000001	Euclid	OH	44117	3/11/2014	Lunch. Discussed using OxyContin more often after prn oxycodone and Percocet. Dr states they typically keep patients on what Dr. Moufawad has patient on; as that's who they refer to. Discussed lowest effective dose, starting dose and opioid naive dose: 10 mg. Butrans discussed as first opioid or after prn Tramadol. Discussed supplemental analgesia, non opioid and opioid, as used in clinical studies. Dr says he tried to write Butrans 3 different times recently and all 3 plans would not cover Butrans. He can't remember which plan patients on, as in Painesville, they do have some self pay/commercial patients; each patient stated Butrans was going to run over \$150 monthly. Told dr I'd follow up at Painesville location and find out why. Note: in Euclid EVERY patient on BWC. Dr also states he has tried to get through on BWC, and recently, Prior Authorizations needed. He says if Butrans keeps getting denied, he has no choice but to write something else that's covered/more cost effective. I asked him not to give up on Butrans, since it's working well for patients, will work with him to update him on access. He is 90% sure he WILL attend 4/30 program. Note: he finishes at 5 in Euclid on WED.
PPLPMDL0020000001	Valley View	OH	44125	3/11/2014	Reviewed OxyContin along with Butrans for those patients requiring around the clock analgesia, Aaron said he has increased fill rate and will be attending upcoming Butrans program
PPLPMDL0020000001	Euclid	OH	44119	3/11/2014	Quick Hallway. Nurse mgr Carla Van Pelt appreciated me bringing more PAP journals as promised. Caresource PA for Butrans discussed, Carla asked if same exact PA would work for OxyContin. I told her I'd contact Purdue and get back to her. Put call in to Kendra, waiting for reply. Note: Carla says their new supervisor, wants all pharma reps to check in @ front window with Kathy now, prior to coming back to nurses station. Discussed with Paul, Caresource PA for Butrans and using as first opioid or after prn Tramadol. For OxyContin, use more often when prn oxycodone/Percocet not controlling patients' pain.
PPLPMDL0020000001	Barberton	OH	44203	3/11/2014	Discussed dosing with OxyContin and managed care. Also mentioned Butrans 4 patches and Tramadol under 300 mg starting dose would be 5mcg.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/11/2014	I asked dr if he is going to use the rest of his OxyContin copay cards before the end of the month because that's when they will expire? Dr said he's trying to but then continued to discuss how much OxyContin costs even before the copay cards. I asked him an example of a plan and he could not think of one. Spoke with Liz and she said patients are not having any issues paying for it and its not that expensive. I reminded dr that Butrans may be an option for some of his patients on Vicodin.
PPLPMDL0020000001					



	Euclid	OH	44119	3/11/2014	Quick Halfway. Discussed OxyContin start, opioid naive dose 10 mg. Discussed Butrans as first opioid or after prn Tramadol. Nurse mgr Carla Van Pelt asked if Cleveland Clinic employees could use savings cards? I replied yes. Shes been asking for some PAP tear sheets or hand outs we used to have (purple??) I'm not sure what she's referring to??? Note: make sure to check in with Kathy at front desk BEFORE heading back to nurses station.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	3/11/2014	Requirement enforced by new supervisor.
					Discussed with dr the. Link all trials for Butrans. Reviewed each one discussion study design, results and AE profiles. Discussed the fact that patients in trials had low back pain or osteoarthritis and its right up her alley.
PPLPMDL0020000001					Discussed inclusion and exclusion criteria and discussed how patios in the experienced trial were only given non opioid analgesics for supplemental analgesia and explained the products and doses. Dr said she really likes Butrans and will continue using. Reviewed the new Butrans poster which she said she really liked and wanted them for her exam rooms. Dr said that the patient we discussed last week is coming in tomorrow and she will start Butrans. Discussed that another option for severe pain and those already on IR oxycodone is OxyContin. Reviewed doses, titration and patient types.
PPLPMDL0020000001	Cleveland	OH	44127	3/11/2014	Reviewed Butrans for those Tramadol failures requiring around the clock analgesia, Janet said she will relay info to Dr., she will be back in the office next week. Will invite to upcoming Butrans program
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/11/2014	Caught dr in hallway of hospital. Dr said he's been using more OxyContin in the hospital recently. I told dr that's great and if he's more or less switching over patients on Percocet? Dr said yes and in his practice. Dr said that he just finds that it just makes sense to switch patients and most like it better. Discussed doses and told him he can titrate every 1-2 days. Reminded dr to also use Butrans in his practice for those in pain around the clock on tramadol or vicoden. Dr said he sees more vicoden and is using it for those patients.
PPLPMDL0020000001					Visited Walker, OxyContin/Butrans Initiation/Titration guides, invited Fellows to upcoming program, Confirmed Attendance Wu,Travicheck,jiang
PPLPMDL0020000001	Cleveland Akron	OH	44195 44310	3/11/2014 3/11/2014	I asked dr about the patient on Butrans who is taking hydrotherapy and was having issues with the patch staying on. Dr said he did as I suggested to use tagaderm and patient said its working well and had had no issues. Dr was writing a prescription for Butrans as I spoke with him. Dr said the patient is currently on vicoden and wasn't getting and enough pain relief. Dr said he is staring Butrans 5mcg. Reviewed dosing and asked him to titrate if necessary every 72 hours. I reminded him that OxyContin continues to be an option for those Percocet patients who are in pain around the clock. Dr said he knows but isn't convinced he will use it. Nothing else learned.
PPLPMDL0020000001	Cleveland C. Falls	OH	44195	3/11/2014	Quick OxyContin Q12h, reminder along with Butrans for those patients requiring around the clock analgesia. Said Ok Will consider, nothing new learned
PPLPMDL0020000001					Spoke to Denise about OxyContin and Butrans. I told Denise about what I'm talking to drs about when it comes to OxyContin. Discussed conversions, cringe entry opioid, and q12 dosing. Denise said she sees them from pain management in the hospital and dr Chonko. Denise said she also sees a lot of Lyrica and a few other schedule 2 medicines but said she sees more OxyContin than anything. She said she needed updated OxyContin copay cards by he end of the month. Discussed the Kathy profile for Butrans and asked her if it makes sense? Denise said it does and that Glenn has been sending more prescriptions for it through their pharmacy.
PPLPMDL0020000001	Euclid	OH	44119	3/11/2014	Met with tech Dana & Pharmacist Kathleen. Discussed OxyContin opioid naive, starting dose 10 mg, q 12 h. Discussed topics contained in Butrans patient guides, including proper application, disposal, pharmacist will place on shelf with product. Left how to protect your pharmacy brochure.
PPLPMDL0020000001	Westlake	OH	44145	3/12/2014	Reviewed Tramadol insight. Dr agreed he sees Tramadol patients a few short acting products a day. I asked him if that patient may ever be increased to three a day or four a day would that be justifiable for an extended release product, he said probably. Reviewed Initiation guide of Butrans along with the indication. Dr asked what schedule it was and I answered 3. Dr asked about managed care. I replied with the commercial coverage and the caresource. Dr said they have many caresource patients. Reviewed OxyContin the q12h dosing. Dr said he writes very little OxyContin. I asked who he thought was an appropriate patient for OxyContin and the dr said elderly.
PPLPMDL0020000001	Cleveland Rocky river	OH	44195 44116	3/12/2014 3/12/2014	Reviewed OxyContin Q12h flexible dosing along with Butrans for those patients who need around the clock analgesia. No new info learned from Roxanne Rph. Discussed the patch of Butrans and the molecule buprenorphine. Dr said she was familiar with the molecule in other forms. We discussed no dose adjustment for mild to moderate renal or hepatic patients. Also discussed scheduled 3 product. I asked her why is it ok to dose someone prn 3 or 4 times a day with an opioid but not part to offer the appropriate patient an extended release product like Butrans or OxyContin. Dr said patients like the high feeling they get from a short acting product. I said that can't be a good thing, she said its easier to give what they want. I asked if it made sense to offer Butrans before they got to a hydrocodone product in the fist place....if they were appropriate for atc opioid and met criteria. Dr said maybe so. Covered managed care. Discussed where she saw a fit for OxyContin, she said her chronic older patient or cancer patients? I said do you ever think of OxyContin for moderate pain? She said no. Reviewed dosing and dosages available.
PPLPMDL0020000001	Richmond Heights	OH	44143	3/12/2014	Met w med asst @ front window. (Last name pronounced Na Tay zen) discussed OxyContin & Butrans, scheduling, appropriate patients, opioid naive & start doses, savings available for both. Left 4/30 Butrans invite. Left OARRS flashcard, protect your practice brochure, Butrans 7 days initiation, maintenance piece.
PPLPMDL0020000001	Garfield Hts	OH	44125	3/12/2014	Discussed OxyContin Q12h, Tablet strengths, formulary status, Savings Card also agreed O4-6h prn on any product is questionable, Will consider for appropriate patients along with Butrans for those patients requiring around the clock analgesia. Will be joining CCF on Monday
PPLPMDL0020000001	Cleveland	OH	44106	3/12/2014	Quick OxyContin review Q12h, flexible dosing strengths along with Butrans for those patients requiring around the clock analgesia, Invited to upcoming Butrans program, Said he will consider for appropriate patients and will be out of town for program
PPLPMDL0020000001	Westlake	OH	44145	3/12/2014	Spoke to Kathy, reviewed Scott profile and showed Rosie the rn where to place the patch and how to use the savings cards.
PPLPMDL0020000001	Westlake	OH	44145	3/12/2014	Handed him a Butrans poster of the spine, he said he was going to hang it in the patient room. I reminded him of our last conversation of the caresource patient needing an atc opioid if appropriate. Explained the prior authorization. Also reminded him of the savings cards for commercially insured patients.
PPLPMDL0020000001	Westlake	OH	44145	3/12/2014	Discussed how he treats patients with moderate somatic pain in the office. He said he uses Tramadol or a few short acting products. I pulled the Scott profile and asked for him to picture the patient on Tramadol taking a few daily for the last 90 days. Reviewed the pain being uncontrolled and either switching medications or adding to the Tramadol. I said if you are doctoring any product several times a day why would you consider an extended release product. He said he would consider the different delivery system at that point. After review if Butrans dosing and initiation guide the dosing said he would try it as long as managed care was good. Discussed OxyContin dosing and delivery system.
PPLPMDL0020000001	Akron	OH	44320	3/12/2014	Dr told me that he prescribed Butrans a few weeks ago. I told him that's great and asked him to tell me about it. Dr said the patients was taking too much vicoden so he started Butrans. I asked him what the dose of vicoden was a what dose of Butrans he started? Dr said he's not for sure but said he thinks the patient was taking it about 4 times a day and had a lot of constipation. Dr said he thinks he started 10mcg dose. I told dr that's a good place to start. I reminded him that he can titrate every 72 hours if necessary and to continue to reassess his hydrocodone patients. I also told him that OxyContin is a good option for those already taking Percocet and need a dose adjustment. Dr said he feels more comfortable starting Butrans. I told him that's ok but to keep the conversions in mind and gave him the Butrans slide guide.
PPLPMDL0020000001	Akron	OH	44320	3/12/2014	Dr said she has a question for me regarding OxyContin. Dr asked what the abuse preventative parts to OxyContin are. I gave her the approved piece for OxyContin abuse deterrent properties and told her when the reformulation occurred. Dr asked if all doses are abuse deterrent? I told her they are and asked why she wanted to know? Dr said that when we talked about OxyContin last she thought she remembered about how it was reformulated but wasn't sure. I asked her if there is anything else she needed and dr said no. Discussed OxyContin dose and titration. Reviewed the Kathy profile for Butrans and told her that before she refills a vicoden prescription today to think Butrans. Dr said ok.
PPLPMDL0020000001	Cleveland akron	OH	44106 44333	3/12/2014 3/12/2014	Reviewed w/Janet OxyContin Q12h, along with Butrans for those Patients requiring around the clock analgesia. Said she will pass along Initiation/Titration guides along with Program invite to Tara
PPLPMDL0020000001					Followed up with dr from last week about his most recent patient he started on Butrans. Dr said he started Butrans and has but has cut his vicoden amount in half. I told dr he may need to titrate to Butrans 20mcg based on how patient is doing and to b careful with respiratory depression which Butrans and high doses of vicoden for breakthrough. Dr said thanks for the reminder. Dr said he also has a nursing home patient he is going to start on Butrans and will let me know when he does. I reminded him of conversions and asked him for continued business said to not forget OxyContin in those patients already on IR oxycodone.
PPLPMDL0020000001	Cleveland Garfield Hts.	OH	44106 44125	3/12/2014 3/12/2014	Reviewed OxyCotin/Butrans Initiation/Titration, formulary review, invited Margie to program, Nothing new learned
PPLPMDL0020000001					Discussed Butrans CII for those Tramadol failures requiring around the clock analgesia, 7 day transdermal, Initiation/Titration along with OxyContin Q12h, 7 tablet strengths, Said she will consider but under past practice protocol, Dr.'s see pain patients, Check back after April 1st under new CCF practice
PPLPMDL0020000001	Munroe Falls	OH	44262	3/12/2014	Dr told me she had a patient started on OxyContin this week when she saw my conversion guide. I asked her to tell me about it and dr said she got a new patient in who was taking Percocet and said she just started OxyContin because the patient said the pills per day were too confusing. Dr said she started on 20mg q12 and the patient seemed happy. I told her that's great and to remember to titrate every 1-2 days when needed. Dr said she isn't giving the patient anything for breakthrough and see what happens. I reviewed the Butrans Kathy profile and asked her if she has patients like her? Dr said she does and that she will do her best to write it again.
PPLPMDL0020000001	Garfield Hts.	OH	44125	3/12/2014	Reviewed Butrans for those Tramadol failures requiring around the clock analgesia, Initiation/Titration, Said she will consider. Reviewed OxyContin Q12h, said she has Dr. Topalsky RX pain patients, She along with Dr.T will be joining UH 4/1/14
PPLPMDL0020000001	Cleveland Akron	OH	44106 44333	3/12/2014 3/12/2014	Visited Anews/Pain, Seidman., Left OxyContin/Butrans info Initiation/Titration, Progam invites, Requested apppt.
PPLPMDL0020000001					Dr told me that he write two new Butrans prescriptions this morning. I asked him to tell me about them and he said both patients were taking tramadol with one patient taking it 6 Tim's a day and the other about 5. Dr said he didn't mess with starting the 5 mcg and started both patients on the 10mcg dose. I told dr that for both patients he should have started on the 10mcg anyway. Reminded to titrate through the doses. Told dr that he can be using OxyContin as well and per his use age of it only for patios seeing him already on an IR oxycodone. Dr said that's when it makes the most sense for him.
PPLPMDL0020000001	Cleveland Akron	OH	44109 44313	3/12/2014 3/12/2014	Reviewed OxyContin and Butrans P's along with Initiation/Titration guides. Said she will contact me if further info is needed
PPLPMDL0020000001					I showed dr the Percocet to OxyContin conversions and pointed to the 20mg of Percocet to 10mg q12 of OxyContin. I asked him if he has patients on that dose of Percocet? Dr said probably. I asked him if when patients fail it either because of analgesia or tolerability to switch the to OxyContin? Dr said that he tries to use it as much as he can and said thanks for the dosing reminder. Gave him the life conversion guide and told him I wanted to make sure he's not missing opportunities for Butrans. Dr said ok.
PPLPMDL0020000001	Richmond Heights	OH	44143	3/12/2014	Brief call in lunch room. Insight #11, could there have been a missed opportunity in re assessing patients to see if they actually need an extended release? Dr says, do you mean schedule 2 drugs? Yes, and OxyContin is actually controlled release, q12 h dosing. Start dose 10 mg, dr stats he's more comfortable writing short actings. I let him know I'd like to ge him more comfortable with OxyContin, and have clinical data & resources I can share, including \$70 cards. I then discussed Butrans indication, scheduling. Dr forgot Butrans is CII. We discussed positioning of Butrans: as first opioid after patient has failed on non opioids like NSAIDS; and after Prn Tramadol. Invited him to Wed Butrans 4/30 program, which he should be able to make if he's done early on Wed. (Begged med asst Toni to get 30-60 seconds w dr in between patients; she states he NEV gR sees outside of lunch, asked her to ask anyone: After waiting until he finished his last patient of the day, Toni asked him & got approval to meet with me)
PPLPMDL0020000001	Westlake	OH	44145	3/12/2014	Gave Vickie the np Butrans spine posted and reviewed inclusion criteria of Butrans using the poster as reference. Discussed caresource patient and Tramadol failures who are in need of atc pain control for an extended period of time not acute use. Shared managed care coupons for commercially insured and highlighted someof the plans they have in the office and how Butrans and OxyContin are covered. Vicky said she doesn't write schedule 2 products. Quick review of the dosing and strengths available for OxyContin.
PPLPMDL0020000001	Westlake Akron	OH	44145 44320	3/12/2014 3/12/2014	Kyle said she was busy today so I pointed out where to place the patch and how to discard. Reviews the dosing of OxyContin.
PPLPMDL0020000001					Dr told me that she didn't have much time because she is backed up. I showed her the Maggie profile and told her that this is a situation where the practitioner may have waited too long to initiate OxyContin. Dr said ok. I asked her if she agreed and she said maybe. I asked her what she would have done and she said she can't say because she doesn't have the patients total history. I told her I understand and that I am trying to tell her to switch patients to OxyContin earlier in the treatment with Percocet when lack of analgesia or tolerability is first seen. Dr said that makes sense. Told her that Butrans is yet another option when her patients on tramadol or Discussed OxyContin Q12h, Tablet strengths, formulary status, Savings Card also agreed O4-6h prn on any product is questionable. Reminded of Butrans for those patients requiring around the clock analgesia, said he has 2 patients on Butrans and doing well. Will be joining CCF on 3/17/14
PPLPMDL0020000001	Garfield Hts	OH	44125	3/12/2014	

PPLPMDL0020000001	Westlake	OH	44145	3/12/2014	Asked him if he has ever written OxyContin since its reformulation. Dr said he writes very little Chronic pain medications. Discussed prn medications dosed several times a day and discusses the Tramadol insight. Dr said he was surprised it was that high and that ppl stay on Tramadol, so long. I asked the doctor why after seeing this type of statistics I would be in the primary care office. He said yes. Discussed moderate pain and Butrans indication, reviewed inclusion criteria of naive study and the pain scores. I asked what he knew about Butrans and if he ever heard the media talk about it. He said no. Invited to Butrans dinner program. Dr has limited people on OxyContin but has not started a new person on it in a while.
PPLPMDL0020000001	Akron	OH	44333	3/12/2014	Elise told me that she went to prescribe OxyContin today for a patient taking Percocet about 4-5 times and the patient checked with their insurance and it cost them over \$200. I asked her the plan and she said it was a dual eligible. I told her that it sounds right but I can't be sure and will check into it. Elise said she gave the patient MS Contin and said he will probably fail. I told her to keep me updated and I will check with my RAE. I reviewed Butrans patient type and insurance plan coverage. Reminded her to continue using OxyContin and to please contact me with any insurance issues.
PPLPMDL0020000001	Copley	OH	44321	3/12/2014	Ld off discussion with dr about the tramadol insight. I told dr that there is a problem when it takes patients on tramadol almost a year to be converted to ER opioids. I showed dr the Scott profile and outlined it for him. I told him that when he ready to refill a tramadol patient and they are taking it more than 3 times a day to start Butrans. I also told him that his best bet is to start w patients who have private insurance. Dr said ok. I discussed OxyContin as a product that he can write for those already on oxycodone but in the short acting delivery system. Dr had no comment.
PPLPMDL0020000001	Westlake	OH	44145	3/12/2014	I said when you see a Tramadol patient this week Nd they are moving from 2 pills uncontrolled before you add a third or 4th prn Tramadol couldn't be possible that an extended release delivery system might be an option. He said yes. Reviewed Butrans, he said he was under the 300 mg daily dose of Tramadol, therefore I showed him the Initiation guide referencing the starting dose of 5mcg reviewed the 7 day transdermal patch and dosing. Showed him where it states Butrans would not be appropriate to Initiation a patient and discussed OxyContin q12h dosing.
PPLPMDL0020000001	Norton	OH	44203	3/12/2014	Reviewed section 12.3 of the fpi and disu. Es the half life of the short acting oxycodone and OxyContin a half life. Asked him what the clinical rationAle is for dosing a short acting opioid at vs. an extended release product like OxyContin q12h. Dr said it was habit. But he agreed to write OxyContin for appropriTe patients. Dr asked About managed care for butrNs.
PPLPMDL0020000001	Cleveland	OH	44112	3/13/2014	Quick Review of OxyContin Q12h, 7 Tablet strengths along with Butrans for those Tramadol failures requiring around the clock analgesia, Said she hasnt had a taker yet" no time to further discuss, but will consider
PPLPMDL0020000001	Brooklyn	OH	44144	3/13/2014	Discussed OxyContin Q12h, 7 tablet strengths, Savings Cards said he will continue find appropriate patients that can afford product. Reviewed Butrans for those Tramadol failures requiring around the clock analgesia, Initiation/Titration, Savings card, formulary coverage, Said most of his patients cost and coverage are issues but will consider for appropriate patients, Asked for 1 patient said he would.
PPLPMDL0020000001	Cleveland	OH	44113	3/13/2014	Reviewed OxyContin Q12h along with Butrans for those patients requiring around the clock analgesia, Said he along with his NP's are always looking for appropriate patients. Also said he will be attending program
PPLPMDL0020000001	Cleveland	OH	44195	3/13/2014	Visited Dept. distributed OxyContin/Butrans Initiation/Titraaion along with confirmed attendance to upcoming program (Travineck, Chang, Greishaber, Deoree, Yanosi, Wu, Xu and Kanu
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/13/2014	Spoke with Robert about the new OxyContin copy cards and provided them to him. Robert said they have been going through them and said they will wait until the last day of the month until they use the new ones. Robert said he has no issues with it and is filling it on a regular basis. Discussed Butrans copy cards, dosing, and patient types. Robert asked about conversions from vicoden so it viewed the conversions and morphine equivalents.
PPLPMDL0020000001	C. Falls	OH	44223	3/13/2014	Spoke with Cindy the pharmacist and Denise the technician about the new copy cards for both products. Cindy said that she had a patient with a Medco Medicare D plan who was prescribed 60 pills of OxyContin. Cindy said there was no PA and was approved but the cost was \$70. The patient could not afford it so the patient was switched to ER Morphine. I discussed the Medicare D plans and Cindy said it was a former Goodyear employee who no longer has the company insurance. Discussed Butrans copy cards and patient types with conversions.
PPLPMDL0020000001	Akron	OH	44310	3/13/2014	I asked dr since my last visit if he had any parings in for follow up on Percocet? Dr said he doesn't remember. I reviewed the last discussion and told him that when a patient comes in on Percocet and complains of pain all day long, to switch the patient to OxyContin. Dr said ok. Gave him e conversions guide. Reminded him about a tramadol patient needing a dose adjustment to use Butrans and asked him if it makes sense? Dr said it does. Nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44115	3/13/2014	Reviewed OxyContin and Butrans for those patients requiring around the clock analgesia, George Rph said he hasnt filled any. Said Dr. Nickels is mainly doing blocks and Rxing NSAIDs to follow
PPLPMDL0020000001	Stow	OH	44224	3/13/2014	Dr told me that he wrote a OxyContin 10mg prescription his week. Dr said a patient came to him with stage 3 cancer and was taking nothing for pain. Dr said he asked the patient what he wanted and the patient said he took OxyContin in he past and it worked well. Dr said he wrote the prescription and said he is sure he will need to titrate up. I reminded dr of the titration every 1-2 days and all 7 doses. I discussed Butrans patient types Scott and nancy after talking about the tramadol and hydrocodone insights. Dr said he agrees with that data and said that he tries to go to ER opioids at the first sign of chronic pain. Dr said his time frame is usually 3 months when a patient is considered chronic. Dr said that he doesn't see too many patients with IR opioids and dr Seiple is the one who gets most of them. I told dr to use more Butrans when the patient profiles I discussed need dose adjustments. Dr said ok- <font 03="" 04="" 2014&lt;="" 3="" 30="" a="" added="" agree="" agree.="" already="" an="" another="" anything="" are="" at="" b&gt;&lt;="" be="" been="" before="" by="" chance="" color="blue&gt;&lt;b&gt;CHUDAKOB" come="" consider="" could="" doctor.="" er="" feel="" font&gt;-cliff,="" font&gt;i="" font&gt;totally="" for="" give="" goes="" guess="" has="" he="" however="" i="" in="" in.="" including="" initiates="" ir="" is="" it="" least="" long="" longer="" longer.="" many="" maybe="" might="" months="" months.="" months.if="" my="" need="" notes="" nsaids?="" of="" on="" opioid,="" opioid.&lt;font="" or="" pain="" patient="" philosophy="" physician="" physicians="" query="" response="" russ="" saw="" six="" taking="" td="" than="" thanks!<="" that="" the="" then="" they="" thought="" thoughts?&lt;font="" three="" time="" to="" too="" until="" up="" usually="" waits="" wasn't="" we="" what="" where="" while="" with="" would="" your=""></font>
PPLPMDL0020000001	Hudson	OH	44236	3/13/2014	Spoke with dr about OxyContin and Butrans. Reviewed start principles for OxyContin, q12dosing, conversions and asked her how she feels about OxyContin? Dr said that she doesn't have an issue using it but really wants to reserve it for the specialists as she is not. I told her I understand and asked her if at least it makes sense to convert a Percocet patient to OxyContin if they are failing it and have intolerance to Percocet? Dr said she agrees. Explained all key selling messages for Butrans and asked her if she would try it in a patient like Scott and if she has patient like him? She said she has some and said she has prescribed it about a year or so ago for a patient failing vicoden. I reviewed the Kathy profile and asked for more business.
PPLPMDL0020000001	Tallmadge	OH	44278	3/13/2014	Quick message in hallway. I told him to take the extra second with a patient on IR oxycodone to see if they would be a candidate for q12 oxycodone. Dr said ok and said he uses OxyContin. I told dr I know and to continue using the single entity, fixed dose OxyContin. Reminded dr to think of Butrans when he had a patient failing tramadol.
PPLPMDL0020000001	Cleveland	OH	44124	3/13/2014	Met with. Med asst front desk. Discussed OxyContin opioid naive/starting dose, q12 h dosing, suggested 8am and 8 pm dosing schedule. Left dr Butrans 4/30 invite, Moufawad resume, Butrans FPI. left new 7 days initiation, maintenance piece.
PPLPMDL0020000001	Cleveland	OH	44115	3/13/2014	Reviewed with April OxyContin Q12h, flexible dosing strengths, along with Butrans for those Tramadol failures requiring around the clock, said she would relay info. Invited Dr. to upcoming program normally doesnt attend any outside programs
PPLPMDL0020000001	Barberton	OH	44203	3/13/2014	Discussed OxyContin 12.3 half life Aldo q12h dosing. Reviewed Butrans patch placement
PPLPMDL0020000001	Cleveland	OH	44144	3/13/2014	Quick OxyContin reminder Q12h, flexible dosing strengths along with Butrans for those patients requiring around the clock analgesia, Said Ok, has been behind due to Dr. Hilton's retirement. Will keep in mind
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/13/2014	Quick hello in hallway and told him that OxyContin and Butrans are ER opioid options for those patients he knows he can treat and have failed their IR opioid. Dr said ok. I told him that OxyContin is a single entity fixed dose opioid to be dosed q12. I told him Butrans is the schedule 3, 7 day patch for patient failing tramadol. Dr said ok again. Nothing else learned.
PPLPMDL0020000001	Hudson	OH	44236	3/13/2014	Led with insights on tramadol and hydrocodone. I asked dr what he thinks about those statistics? Dr said he agrees there are too many patients who have pain every day taking short acting opioids for the pain. Dr said he does his best to get his patients on some type of ER analgesic once he has determined the patient is chronic. Asked dr when he knows a patient is chronic? Dr said usually beyond three months of constant pain. Dr said that he really likes Butrans and is always thinking of ways to use it in his practice. I reviewed the Scott and Kathy profiles and asked dr to focus on these two profiles. Dr said he has lots of patients that he needs to change paths with for their pain relief. Reviewed OxyContin dosing, single entity, fixed dose q12 oxycodone. Discussed conversions from Percocet and asked for the business. dr said ok.
PPLPMDL0020000001	Cleveland	OH	44115	3/13/2014	Visited Pain dept. Reviewed with Dr. Nickels, OxyContin Q12h, flexible dosing strengths along with Butrans for those patients requiring around the clock analgesia
PPLPMDL0020000001	Mayfield Village	OH	44124	3/14/2014	Lunch. Total office call. Penny came in late, went directly to patients, did not come into lunch room. Discussed indication, appropriate patients & dosing for OxyContin & Butrans. Left 4/30 invite for Penny, OxyContin reformulation folder, Butrans new mktg piece.
PPLPMDL0020000001	Cleveland	OH	44102	3/14/2014	Reminded of OxyContin Q12h, 7 tablet strengths, and Savings Cards said OK will continue to prescribe for appropriate patients. Reviewed Butrans for those Tramadol failures that are requiring around the clock analgesia, Said he will consider
PPLPMDL0020000001	Stow	OH	44224	3/14/2014	Discussed tramadol insight and asked her if she agrees that it is taking way too long to convert patients to ER opioids? Dr agreed but said that she also thinks that opioids aren't always the answer. Dr said that patients need to do physical therapy, lifestyle changes and things like that to aid in the change of the pain cycle. I agreed and said the patients need to also take responsibility. I asked her if it also makes sense to use Butrans when pain becomes to be around the clock? Dr said it does and said she will try but just doesn't have many patients she sees for pain. Discussed e option of OxyContin and when to use it like in Maggie.
PPLPMDL0020000001	Mayfield Village	OH	44143	3/14/2014	Revisited indications, scheduling for OxyContin & Butrans. Courtesy detail as dr part of Atrium Medical group. Continue to keep him updated & share non branded information such as how to protect your practice brochure. Next Indian HCP conference will be Nov 2014 downtown will be much larger & include residents & fellows. Asked him to add an analgesia, pain topic & it's more likely I cam exhibit. Since conference @ Lake West hospital doesn't include pain/ analgesia, it doesn't make good business sense for me to attend, he will see what he can do about adding session on pain mgt.
PPLPMDL0020000001	Akron	OH	44312	3/14/2014	Told dr that I wanted to ensure he had updated patient savings cards for OxyContin and Butrans. Dr said he continues to have his handful of patients doing well on OxyContin. I told dr that's great but I want you to use it more often in those patients already on Percocet. I asked him if he has patients on Percocet? Dr said yes and most are doing well with it. I told him even if patients are doing well but have been taking it for months and months, what's the dosing to giving them the same product but in a q13 delivery system? Dr laughed and said it's not that easy. Discussed Butrans dosing and conversions.
PPLPMDL0020000001	Mayfield Village	OH	44143	3/14/2014	Lunch. Fri dr comes on after 1:30. Discussed OxyContin cost first, and UHC has \$40 charge in 2014 across board for all long acting opioids. Reminder it use \$30/70 cards in closet for best price, commercial patients. Discussed section 8.8 gender differences, opioid naive females demonstrate up to 25% higher average plasma concentrations & greater frequency of typical opioid AEs than males, even after adjustment for body weight, no female/ male difference detected for efficacy or AEs in clinical trials, dr did not know this, we discussed 10 mg opioid naive dose & ability to titrate in 1-2 days to 15 mg. Special populations (Elderly over age 65) discussed, plasma concentrations of oxycodone 15% higher in elderly vs young subjects (21-45) dr did not know this either, appreciated info. We also discussed Geniatric use, section 8.5 with reduction of starting dose to 1/3 to 1/2 the usual dosage in debilitated, non opioid tolerant patients. He did not remember this info either. Revisited Butrans data, after PRN Tramadol, indication, dosing, can be called in with refills. ( he says talk to dr tamaskar, as he's president of Indian HCP organization, ask him to add, pain/analgesia topic to November 2014 downtown)
PPLPMDL0020000001	Stow	OH	44224	3/14/2014	Spoke with dr about Butrans and OxyContin. Led with insights on tramadol and hydrocodone patients and time it took each to be converted to ER opioids per IMS. Dr agreed and said it's ridiculous that patients stay on IR opioids. Dr said there are many patients that start out chronic and then work their way into acute. Dr admitted that physicians are part of the problem why there is so much abuse of products like vicoden. I discussed Butrans doses, titration, conversions, opioid experienced trial, and profiles. I asked dr if she has patients like Scott and Kathy that it would make sense to start Butrans? Dr said she can think of a good sized handful of patients that would fit the bill. Dr said she is going to try it. Discussed OxyContin dosing, titration. Conversions and Maggie profile. Dr said she is going to leave that up to the specialists and doesn't even have patients on Percocet.
PPLPMDL0020000001	Cleveland	OH	44113	3/14/2014	Quick OxyContin Q12h reminder along with Butrans for those patients requiring around the clock analgesia, Initiation/Titration and invited to upcoming program. Said OK, he will consider
PPLPMDL0020000001	Cleveland	OH	44113	3/14/2014	Visited ortho dept. left OxyContin/Butrans Initiation/Titration (Stearns, Bilfield, Osorio) and invites to upcoming Butrans program
PPLPMDL0020000001	Green	OH	44232	3/14/2014	Met Jenna the pharmacist and discussed the Kathy profile go Butrans, dosing, titration and conversions. Jenna said they have a patient on 5 and 10mcg doses and have both on the shelf. I discussed the copy cards and discussed OxyContin dosing conversions from Percocet. Jenna said they haven't seen too much of it but the 10 and 20 mg are the most commonly dispensed.

PPLPMDL0020000001	Stow	OH	44224	3/14/2014	Dr back from nursing home run and only had a minute over lunch appointment. I quickly reviewed th OxyContin dosing, conversions and titration information. I asked him if he currently had patients on Percocet? Dr said he has a few. I asked him to reassess them for OxyContin q12 and reviewed conversions again. I told him hat he may be missing opportunities for Butrans when patients fail IR opioids for any reason. Dr agreed and said he should try it. Discussed doing, conversions, patient types like Scott and Kathy.
	Tallmadge	OH	44278	3/14/2014	I asked what it might mean to a patient who wants something other than tramadol for their pain relief to discuss the option of Butrans with them? Dr said it depends on the patient but said that he likes Butrans so far. Dr said he titrated a patient from Butrans 5mcg to 10mcg recently. I remindd dr that he can titrate as soon as 72 hours once it reaches steady state. I showed him the Kathy profile and said that the hydro one patient is also a good candidate for Butrans if failing efficacy or tolerability. Dr agreed and said ok. I reminded dr that he should stick to commercial plans like medical mutual, ESI and anthem for the path of least resistance. I told dr that he should also consider OxyContin for his patient failing Percocet.
PPLPMDL0020000001	Cleveland	OH	44113	3/14/2014	Reviewed Butrans for those LorTab failures requiring around the clock analgesia, asked what happens when patient fails on present therapy, said she switches or increases dose, asked why not Butrans, feels patients want PO delivery and not covered on ins, but will consider Butrans. Also reviewed Butrans coverage with Melissa
PPLPMDL0020000001	Akron	OH	44319	3/14/2014	Dr said he didn't have time but asked me what the dosing is of OxyContin. I handed him a conversion and titration guide and described the 7 doses, titration and conversions from Percocet. Told him to use more of it and to use Butrans for his patients failing tramadol.
PPLPMDL0020000001	Cleveland	OH	44113	3/14/2014	Quick call reviewed Butrans for those Tramadol failures-along with OxyContin q12. Said he will consider. Nothing new learnedBooked lunch appt
PPLPMDL0020000001	Mogadore	OH	44260	3/14/2014	I told dr that the patient copay cards she has for OxyContin and Butrans will be expiring the end of the month and when she goes to use one, I don't want it to be expired. Reviewed cards and asked her to continue writing OxyContin and Butrans. Dr said she will. I reminded her to remember when reassessing patients on Percocet as candidates for the q12 OxyContin. Dr said she will and thanks.
PPLPMDL0020000001	Stow	OH	44224	3/14/2014	Led with tramadol and vicoden insights. Dr agreed with the statistics. I reviewed all key selling messages for Butrans and OxyContin. Dr didn't have much to say. I asked for his thoughts on using Butrans for patios like Scott and Kathy. Dr said he may try it. I asked what's holding him back and he said he doesn't want to treat pain. I asked him if he uses NSAIDs or tramadol? Dr said yes. I asked why its Doo easy to write IR opioids but not ER opioids.p? Dr said he just doesn't like to use ER opioids.
PPLPMDL0020000001	Barberton	OH	44203	3/14/2014	Spoke to Pam the office manager, left dr Butrans poster and explained the indication and managed care.<font color=blue><b>CHUDAKOB's query on 03/30/2014</b></font>Did you gain any information about her role in the office? How does she interact with the physician? the rest of the office? the patients? When you speak with the office manager, making the call about her will show her the importance you place on her and her position. Does this make sense?<font color=green><b>BARTOLI's response on 04/02/2014</b></font>Noted. I will make more attempt to engage office managers and learn about their roles in the office.<font color=blue><b>CHUDAKOB closed the query on 04/03/2014</b></font>
PPLPMDL0020000001	Cleveland	OH	44113	3/14/2014	Quick OxyContin Q12h, 7 tablet strengths along with Butrans for those Tramadol failures requiring around the clock analgesia, Savings Cards, Said Ok, will consider, nothing new learned
PPLPMDL0020000001	Barberton	OH	44203	3/14/2014	Jeff the pharmacist said they will continue to stock OxyContin in limited amounts. I asked if he had seen any q12 dosing or q8 being written? He said he fills it q12h. Reviewed Butrans, indication and dosing.
PPLPMDL0020000001	Fairwan	OH	44333	3/14/2014	Discussion in hallway about him using OxyContin. I asked him if he is seeing efficacy with q12 dosing when converted from q4 or q6 dosing of Percocet? Dr said he tries as hard as he can to use OxyContin or any ER opioid as a soon as he can. Dr said it doesn't make sense to use an IR opioid for chronic pain and that what he treats most. I told him I can't agree more! I asked for continued business and to remember Butrans as that ER opioid for patients not responding to tramadol or vicoden. Dr said ok.
PPLPMDL0020000001	Barberton	OH	44203	3/14/2014	Discussed if he has Percocet patient s taking 3 or more a day. Dr said yes. Reviewed the conversion to OxyContin. Also reviewed single entity, savings coupons and dosing q12h. Dr was unfamiliar with Butrans. Showed demo and asked him why he wouldn't write it for someone after Tramadol that was appropriate (I did review indication). Dr said habit. Reviewed starting dose and supplemental according to fpi. Dr said he would think about it.
PPLPMDL0020000001	Mayfield Village	OH	44143	3/14/2014	Lunch. Revisited data shared on last call, George profile, his agreement to consider writing starting dose, (opioid naive dose) of 10 mg, q 12 h of OxyContin. Dr admits he doesn't want the responsibility of writing, managing long acting opioids; he'd prefer to send to pain mgt. Reiterate the fact I'm just asking for a few trials on trusted patients. Butrans indication, scheduling, dosing, opioid naive, start dose of 5 mcg hr. Dr repeated that he just hadn't found the right patient. The patient I'd like you to think about dr is a patient who cannot tolerate NSAIDs or Tylenol, or whom those non opioids did not diminish continual pain. Also that prn Tramadol patient that has been refilled month after month. Ir Tramadol insight. Discussed missed opportunities to re assess patients around the 10 ms to see if patient requires around the clock analgesia, for extended period of time. Again, just asking for a few trials in trusted patients. Will keep working on, doesn't seem like dr will budge regarding long actings. (Atrium medical, syed asraf group)
PPLPMDL0020000001	Barberton	OH	44203	3/14/2014	Dr was talking about Saftey profile in the reformulation of OxyContin. I gave him the leave behind piece to review. I asked him if it was saftey the driving force being selecting your extended release opioids or is it cost? Dr said Saftey. Discussed lowest dose of Butrans and OxyContin for opioid naive patients. Explained both indications, extended release and dosing for Butrans and OxyContin.<font color=blue><b>CHUDAKOB's query on 03/30/2014</b></font>Lisa, I am wondering why your next call objective is a repeat of the same question. He answered the question by saying saftey. Can you build off of that on your next call?<font color=green><b>BARTOLI's response on 04/02/2014</b></font>Yes.<font color=blue><b>CHUDAKOB's query on 04/03/2014</b></font>Great. What would that next call objective look like?<font color=green><b>BARTOLI's response on 04/07/2014</b></font>Review oxycodone and perhaps TrAmadol insight. Asked what the driving force and or trigger signal for him to convert patients to an extended release product. Does he have patients currently on act short acting products that he may consider converting this week to Butrans or OxyContin if they were appropriate?<font color=blue><b>CHUDAKOB added notes on 04/14/2014</b></font>Perhaps you can review saftey again by showing him our saftey profile. If you already did that, I don't see it in the notes. You can discuss its use in the elderly as an example of saftey.
PPLPMDL0020000001	Cleveland	OH	44102	3/14/2014	Reviewed with Mike Rph OxyContin Q12h along with Butrans for those Tramadol failures requiring around the clock analgesia, no new info learned
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/14/2014	Dr told me that he has written a lot of Butrans this week. I asked dr to give me an example of one. Dr said that he had one patient on 30mg a day of hydrocodone and wanted more. Dr said he started Butrans 10mcg and figures he will need to go to the 15mcg. I told him it would be like a good plan. I asked why Butrans? Dr said its one of the only ER opioids he writes because he likes that its a patch, it lasts 7 days and patients seem to like it. I asked what he typically does for a patient Percocet? Dr said it depends on the dose but said he uses Butrans for most of those patients also. I asked if he uses OxyContin for any patient failing Percocet? Dr said he does but he really likes Butrans. I asked dr to keep OxyContin in mind for patients not suitable for Butrans. Dr said ok.
PPLPMDL0020000001	Cleveland	OH	44195	3/17/2014	Quick Review of OxyContin q12h along with Butrans for those Tramadol failures requiring around the clock analgesia, invited to program, Said she will not be able to make it, has a lot of experience with both OxyContin and Butrans in S.C, will continue to prescribe for appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44124	3/17/2014	Met with Jessica first, then Susan. Asked to see office coordinator, Renetta. She was unable to come up front. Dr C only comes in on Fridays now. He is phasing the other 4 days of the week to holistic practice, and just purchased another practice where he will NOT treat any pain patients. Left box OxyContin savings cards; left OxyContin and Butrans formulary grids for Dr and Rinatta.
PPLPMDL0020000001	CLEVELAND	OH	44195	3/17/2014	Reviewed OxyContin/Butrans Savings Card along with invited Troy to upcoming Program, No new info learned
PPLPMDL0020000001	Cleveland	OH	44195	3/17/2014	MSI email communication with Dr. Dell in response to adult trial contacts, MSI shared contact information with PLPL colleagues and thanked Dr. Dell and team for their assistance.
PPLPMDL0020000001	Lyndhurst	OH	44124	3/17/2014	Met with pharmacist Giovanni.
PPLPMDL0020000001	Waterford	OH	45786	3/17/2014	I-Butrans dosing and managed care. OxyContin co-pay cards and managed care.W-said that she has several patients on Butrans and the managed-care information is helpful.
PPLPMDL0020000001	Waterford	OH	45786	3/17/2014	I-Butrans dosing and managed care. OxyContin managed-care.W-said that managed-care grids are helpful.
PPLPMDL0020000001	Cleveland	OH	44195	3/17/2014	Reviewed OxyContin Q12h, 7 Tablet strengths, Savings Card/Patient Kits also, Butrans Initiation/Titration info. Invite to upcoming program (Davis, Advani, Gutsell, Andresen, Dobbs, Gilligan, Jorge, Lagman, Estafan, and
PPLPMDL0020000001	Cleveland	OH	44195	3/17/2014	Quick OxyContin review Q12h, 7 tablet strengths along with Butrans, 7 day transdermal for those Tramadol failures, Said Ok and to email appt request. Left Butrans/OxyContin initiation/ Titration guides
PPLPMDL0020000001	Cleveland	OH	44195	3/17/2014	Quick OxyContin reminder Q12h, flexible dosing strengths along with Butrans for those Tramadol failures requiring around the clock analgesia, Invited to upcoming program, Said Ok will consider, nothing new learned
PPLPMDL0020000001	Cleveland	OH	44113	3/17/2014	Quick OxyContin reminder Q12h, flexible dosing strengths along with Butrans for those Tramadol failures requiring around the clock analgesia, Said Ok, refers most patients to Dr. Shen/Dale but will consider
PPLPMDL0020000001	Cleveland	OH	44195	3/17/2014	Reviewed OxyContin Q12h, 7 tablet strengths, patient essential kits along with Butrans for those Tramadol failures requiring around the clock analgesia. Said he is no longer practicing Hospice/Palliative care, entire focus is Oncology, but is still confidently prescribing OxyContin. Reviewed savings card and formulary grid
PPLPMDL0020000001	CLEVELAND	OH	44195	3/17/2014	Quick OxyContin review Q12h, 7 tablet strengths along with Savings card, Said Ok , refers to Harry Goforth MD
PPLPMDL0020000001	Barberton	OH	44203	3/17/2014	Invited to the Butrans program on the 20th, asked him if he had tried butrans yet. He said no. I told him two things to focus on...showed him the Initiation guide. Under 40mg of hydrocodone Butrans appropriate. Over 40mg hydrocodone OxyContin appropriate, per fpi and indication. Next time you see a Tramadol patient not controlled and already on 3 short acting a day...does Butrans make sense here for that extended release delivery system. He said yes. After 72 hours steady state is reached. They change the patch every 7 days. He said ok he understood.
PPLPMDL0020000001	Lyndhurst	OH	44124	3/17/2014	Hallway call. Discussed Butrans as first opioid and after prn Tramadol. Convert to 10 mcg hr Butrans. Is there a patient you can think of today who might benefit from Butrans trial? Sarah said yes; showed us patient chart, male patient, who she feels is on too many & multiple pills, including morphine, that may be good for Butrans trial. OxyContin 10 mg opioid naive, starting dose discussed. Lowest effective dose, q12 h dosing. Sarah agrees she won't rule out OxyContin completely.
PPLPMDL0020000001	Lyndhurst	OH	44124	3/17/2014	Hallway. Discussed insight #14, to get dr thinking about changing his writing habits; and converting patients on immediate release to controlled release OxyContin q12h sooner. Butrans after prn Tramadol,BWC discussed.
PPLPMDL0020000001	Mayfield Heights	OH	44124	3/17/2014	Quick product mention at window. Gina too busy to come up front. Met with office coordinator Denise Guinto. Left savings cards, Butrans, OxyContin. (Note: Dr. Laham will be in tomorrow, Tues 3/18.)
PPLPMDL0020000001	Norton	OH	44203	3/17/2014	Discussed the clinical benefits of dosing short acting opioids etc. He said there was no clinical rational and he said practitioners need to transition to extended release products sooner. I said how would you recommend me communicating this to other family practice doctors like yourself. He said i have to break their habits and its going to be hard. I asked him how important is saftey using an opioids. He said a usability of a product is his number one concern with choosing an opioid. Reviewed a Scott profile. I asked him what would prevent him from choosing Butrans after Tramadol or OxyContin after Percocet if they met the need for an extended release opioid. He told me managed care would be the only reason. Covered carcouse coverage with Butrans and commercial plans with OxyContin . Dr said he would remember to write it this week if he saw so wine appropriate.
PPLPMDL0020000001	Mayfield Heights	OH	44124	3/18/2014	Dr was undecided on going to Butrans program on the 20th. Breakfast. Used Insight #14. Goal: get Dr. to consider writing OxyContin as first opioid, using lowest effective dose. Dr admitted she's increasing use of extended release/long acting opioids and using OxyContin in opioid naive is reasonable. Discussed conversion from ir to OxyContin. Butrans as first opioid, and after prn Tramadol discussed. Dr asked if supplemental analgesia can be used with Butrans. Responded with data from clinical trials, discussed NSAIDs/Tylenol as supplemental analgesia, or, a 1-2 ir opioids at her discretion.
PPLPMDL0020000001	Cleveland	OH	44113	3/18/2014	Reviewed Butrans for those LorTab failures requiring around the clock analgesia, Said Ok she will continue to find appropriate patients. Nothing new learned
PPLPMDL0020000001	Cleveland	OH	44144	3/18/2014	Reviewed OxyContin Q12h, Multiple dose forms along with formulary grids, Along with Butrans for those Tramadol failures that are requiring around the clock analgesia. Asked for 1 appropriate patients for both products said she has a few patients that she will try.
PPLPMDL0020000001	Cleveland	OH	44109	3/18/2014	Reviewed w/tech OxyContin Q12h, Butrans for those tramadol patients requiring around the clock analgesia, no savings cards needed.
PPLPMDL0020000001	Mayfield Heights	OH	44124	3/18/2014	Breakfast. Insight #14 shared to see what doctor anna's feelings are regarding this statistic. She is open to initiating low dose OxyContin in opioid naive. Discussed opioid naive/start dose of 10 mg q 12h. also discussed Butrans as opioid naive option or after prn Tramadol, start Butrans 10 mcg hr. Doctor inquired about supplemental analgesia with Butrans, responded with non opioids used in BUP 3024 trial.

	Mayfield Hts	OH	44124	3/18/2014	Sit down appointment. Insight # 14. Doctor stated this scenario sounds reasonable, with 37% of patients who were prescribed extended release opioid were opioid naive defined as those patients who were not on any opioids within past 3 months. Doctor states he does not like short acting, unless pain is acute. Discussed Butrans Med D formulary wins beginning 4/1/14. Formulary grids discussed, confirmed Denise Guinto keeps track of all updates for him. Discussed Butrans for BWC patients, the 2nd largest plan in his practice. (Note: he may attend Thr 3/20 program, follow up, make reservation for him if needed) Asked dr if we can start fresh with OxyContin, as dr stated he stopped writing OxyContin due to former stigma of product. He is slowly warming up to using OxyContin in his practice. Discussed lowest effective dose and starting with 10mg q 12 h. Doctor was open minded to re assessing Percocet, oxycodone patients, to see if patients would benefit from conversion to an around the clock, controlled release product with q 12 h dosing schedule.
PPLPMDL0020000001					Quick OxyContin Q12h reminder along with Butrans for those patients requiring around the clock analgesia, Will be attending Butrans program with Anne to further discuss
PPLPMDL0020000001	Cleveland	OH	44195	3/18/2014	Reviewed Butrans for those LorTab/Norco failures that require around the clock analgesia, Quick OxyContin Q12h reminder, Said she will continue to find appropriate Butrans patients, Using the patient info booklets to
PPLPMDL0020000001	Cleveland	OH	44113	3/18/2014	Discussed the Tramadol insight and i asked her if she can see this happening in primary care. Dr said yes. Reviewed care source and commercial plans for coverage. Discussed the initiation guide for patients guide uncontrolled on Tramadol under 300 mg to 5mcg Butrans. I asked her if she had a schedule license. She said yes. Pointed out that if a patient was over the 40mg of oxycodone short acting uncontrolled reviewed OxyContin as an appropriate option for patients needing an extended release opioid.
PPLPMDL0020000001	Westlake	OH	44145	3/19/2014	I invited the doctor to the Butrans dinner program on the 20th of March. Reminded him both Butrans and OxyContin are extended release options for his appropriate pain patients.
PPLPMDL0020000001	Westlake	OH	44145	3/19/2014	Shared the extended release insight with the np and asked him how close to his writing style this is for his practice? NP said it seems high. NP Brian said he doesn't see as much pain patients as the other doctors in the group. I reminded him that this was good information to chew on..if and when he see's the appropriate patient today or next month. Invited to Butrans Dinner program- he said no
PPLPMDL0020000001	Cleveland	OH	44114	3/19/2014	Reviewed Butrans for those Tramadol failures, Initiation/Titration, Said he will continue to find appropriate patients
PPLPMDL0020000001	Westlake	OH	44145	3/19/2014	Invited to Butrans dinner program, but she can not attend. We reviewed the Oxycontin molecule, the half life and delivery system. When I asked her if it made any sense to convert someone uncontrolled on 3 percocets around the clock to a delivery system like Oxycontin- the doctor said yes. Dr said she has no problem writing Oxycontin for the appropriate patient type. Reviewed the initiation of Butrans from tramadol and from a Hydrocodone product. Left slim jim behind for her review of Butrans.
PPLPMDL0020000001	Westland	OH	44145	3/19/2014	Spoke to Mary the MA and she said i could only see the doctor with a lunch. I left invite to the Butrans program along with some initiation guide for Butrans. Explained to mary What Butrans was and how it was dosed.
PPLPMDL0020000001	Valley View	OH	44125	3/19/2014	Reviewed OxyContin/Butrans Brand Messages. No new info learned,Confirmed invites to program
PPLPMDL0020000001	Westlake	OH	44145	3/19/2014	Spoke to Lisa the MA, checking in about rspv for the butrans program for dr Partial or Dr. Kale. Left her another invite with a butrans initiation slim jim. discussed dosing and managed care with Lisa. Lisa said Caresource was large in their practice. reviewed Butrans Coverage.
PPLPMDL0020000001	Cleveland	OH	44102	3/19/2014	Reviewed OxyContin/Butrans Brand Message, Confirmed attendance to Butrans program (Ed Rph Dir and Tom Rph)
PPLPMDL0020000001	Akron	OH	44308	3/19/2014	MSL and PRA CRA Bill Thornton met with Dr. Frieibert and Hilary Tonni to discuss OTR3001. MSL provided study updates, enroled patient summary, and update on PK and safety analysis. Dr. Frieibert is committed to enrolling one more patient on the study.
PPLPMDL0020000001	Akron	OH	44308	3/19/2014	MSL accompanied PRA CRA Bill Thornton and coordinator Hilary Tonni to meet with Karen Hughes, investigational pharmacist for MSL. MSL provided introduction to Ms. Hughes with brief study updates.
PPLPMDL0020000001	Cleveland	OH	44113	3/19/2014	Quick OxyContin reminder, Q12h, 7 tablet strengths along with Butrans for those Norco failures requiring around the clock analgesia. Said Ok, will consider.
PPLPMDL0020000001	Westlake	OH	44145	3/19/2014	Reviewed the 15mcg of Butrans, Kyle the pharmacist was aware. Discussed how i can get it stocked and she said demand. Reviewed starting the product for the first time and making sure they have something for pain on board for the first three days until steady state is reached. Also reviewed how to discard the patch and rotation. I asked if they were still stocking oxycotin and she said yes in limited doses. reviewed the q12h dosing. Dr asked me how OxyContin compares to the new Hydrocodone Extended Release product. I said, you don't even write OxyContin right now, what would make you even interested in a new Schedule 2 product. Dr. said he only wanted to know its difference. I told him i didn't have the information to give him. Dr said he heard it could be crushed. I said, every time in your office you talk to me about picking the safest medications for your patients. Dr said yes. I said what you know of Oxycontin is that its been on the market for years and it has been reformulated many years ago. I pointed out that my goal is to get primary care doctors to release there could be an opportunity to convert someone from 3 or 4 prn percocets a day...month after month to a product Like OxyContin. Same molecule, different delivery system. I asked if there was a significant benefit to dosing short acting products so many times during the day? Dr. said no and that he will write Oxycontin or Butrans. He said he gets push back when he writes Oxycontin. I said when was the last time you wrote it? Dr couldn't even remember. I said so its been a while, he said yes. Reviewed managed care. I reminded him of the butrans managed care and the initiation for the moderate patients on tramadol or hydrocodone or might be appropriate for Butrans. Dr said he was too busy to attend the Butrans dinner program on the 20th.
PPLPMDL0020000001	Cleveland	OH	44113	3/19/2014	Quick OxyContin Q12h, 7 tablet strengths along with Butrans for those Tramadol failures requiring around the clock analgesia. Said Ok, refers to Pain Mngmt. But will consider
PPLPMDL0020000001	Cleveland	OH	44113	3/19/2014	Window Call reviewed Butrans for those Tramadol failures requiring around the clock analgesia and OxyContin Q12h, 7 tablet strengths, Said Ok and to book appt to further discuss
PPLPMDL0020000001	Cleveland	OH	44195	3/19/2014	Reminded of OxyContin Q12h, 7tablet strengths along with Butrans for those Tramadol failures requiring around the clock analgesia, Said Ok, Confirmed attendance to Butrans program
PPLPMDL0020000001	Garfield Hts	OH	44125	3/19/2014	Quick Butrans review 7 day transdermal for those Tramadol failures requiring around the clock analgesia along with OxyContin Q12h, 7 tablet strengths, Said Ok will set up appt. after the transition settles and practice policy is established
PPLPMDL0020000001	Lakewood	OH	44107	3/20/2014	Asked dr why he writes Butrans? Dr said he hasn't write it for a while cause he hasn't seen the right patient. Gave him the Tramadol insight, i asked if they were converted to an extended release product cause maybe they got to a specialist like himself? He said maybe. Reviewed Initiation guide. And also reminded him of OxyContin and the 7 strengths.<font color=blue><b><b>CHUDAKOB's query on 04/13/2014/<b><b>Lisa, I am reading this call note and trying to understand where you were going with him? Can you help?<font color=green><b><b>BARTOLI's response on 04/14/2014/<b><b>Fontoli reviewed the Scott profile with the dr as an example of an appropriate patient type. And reviewed the Tramadol insight with the doctor. I asked him, if a new patient comes to his office on Tramadol but not controlled what does he usually do? I was trying to find out if he keeps patients that are new and on short acting pain medications atc, if he converts them to an extended release opioid or what does he do.<font color=blue><b><b>CHUDAKOB added notes on 04/16/2014/<b><b>FontoliThank you for the clarification. I reviewed OxyContin Q12H, 7 tablet strengths along with Butrans for those patients requiring around the clock analgesia, he agreed to distribute to appropriate patients she is sending to Pain Mgmt.
PPLPMDL0020000001	Cleveland	OH	44103	3/20/2014	Reviewed OxyContin Q12H, 7 tablet strengths along with Butrans for those patients requiring around the clock analgesia, Said Ok, will consider
PPLPMDL0020000001	LAKEWOOD	OH	44107	3/20/2014	Reviewed Butrans patch placement and reviewed supplementation. Reviewed OxyContin dosing
PPLPMDL0020000001	Westlake	OH	44145	3/20/2014	Dr said he was trying to write less chronic medications. I asked him if that included his existing patients or new patients with chronic pain. He said new patients. I said I might have an option for you. Keep in mind the patient that are only taking a few short acting opicoids. When that patient comes back uncontrolled before you change them to 3 or 4 a day. Wouldn't an extended release product like OxyContin be an option? He said maybe. I said have you ever thought about what patient would be appropriate for Butrans. He said he doesn't think of Butrans. And said he had to go.
PPLPMDL0020000001	Lakewood	OH	44107	3/20/2014	We talked about the goal of treating patient with the lowest most effective dose the dr agreed. The doctor said the patients will always take the highest. I said so why do prescribers give them the option of doing it when it comes to opioids and opioids taken atc. Dr said habit. I suggested that the first step needs to start with the prescriber, dr agreed. Reviewed the half life of OxyContin compared to oxycodone for. The last section in 12.3. I re sighted the extended release insight. And said do you think there's so e missed opportunities with these types of patients and the dr said yes. Reviewed dosing of both OxyContin and butNs. Discussed the moderate pain patients on Tramadol or hydrocodone for Butrans. Reviewed the patients on the same molecule oxycodone for OxyContin. If the patient was appropriate. Discussed caresource.
PPLPMDL0020000001	Cleveland	OH	44114	3/20/2014	Reviewed Butrans for those patients requiring around the clock analgesia, Initiation/Titration, Savings Cards along with a OxyContin Q12h reminder. Said Ok
PPLPMDL0020000001	Cleveland	OH	44195	3/20/2014	Reviewed OxyContin Q12h, 7 tablet strengths along with Butrans for those patients requiring around the clock analgesia, Initiation/Titration, Savings cards, Said she has patients to consider,
PPLPMDL0020000001	Westlake	OH	44145	3/20/2014	One thing to think about today. The extended release delivery system like OxyContin, right. He said ok, I said next time I'll talk to you about Butrans. He said oh yes Butrans. And walked away.
PPLPMDL0020000001	Cleveland	OH	44113	3/20/2014	Reviewed Butrans for those LorTab failures requiring around the clock analgesia, Said Ok will continue to find appropriate new starts. Reminded of OxyContin Q12h & tablet strengths, Formulary grids
PPLPMDL0020000001	Cleveland	OH	44195	3/21/2014	Reviewed OxyContin Q12h, 7 tablet strengths, , formulary coverage, Along with Butrans for those Tramadol failures requiring around the clock analgesia. Said he will consider for appropriate patients, requested Savings
PPLPMDL0020000001	Cleveland	OH	44195	3/21/2014	Reviewed OxyContin Q12h, 7 tablet strengths along with Butrans for those patients requiring around the clock analgesia, Savings Cards, Said Ok will consider for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44113	3/21/2014	Reminded of OxyContin Q12h for those appropriate patients that are presently treated every 4-6hr. Said Ok will consider. Also reviewed Butrans for those Tramadol failures requiring around the clock analgesia
PPLPMDL0020000001	Cleveland	OH	44113	3/21/2014	Reviewed OxyContin Q12h Flexible dosing along with Butrans for those patients requiring around the clock analgesia. Said Ok, will continue to find appropriate patients
PPLPMDL0020000001	Cleveland	OH	44195	3/21/2014	Reviewed OxyContin Q12h, 7 tablet strengths along with Butrans for those Tramadol failures requiring around the clock analgesia, Said Ok will consider for appropriate patients,
PPLPMDL0020000001	Akron	OH	44308	3/21/2014	Attend FACETS program coordinated by Ashley (Centene Trainer) in St. Louis.
PPLPMDL0020000001	CLEVELAND	OH	44195	3/21/2014	Reviewed OxyContin and Butrans savings card info. with Troy. No new info learned
PPLPMDL0020000001	Cleveland	OH	44195	3/21/2014	MSL email communication with Dr. Dell and Ms. Riley in follow up to interest in BUP3031. MSL inquired about site readiness to resume startup with new PI in orthopedic surgery. Response pending.
PPLPMDL0020000001	Cleveland	OH	44113	3/21/2014	Reviewed OxyContin and Butrans w/ Justin No savings card needed. No new info learned
PPLPMDL0020000001	Cleveland	OH	44195	3/21/2014	Visited Dept. left OxyContin initiation/Titration info for Goforth, Gutsell and Faiman)
PPLPMDL0020000001	Cleveland	OH	44195	3/21/2014	Reviewed OxyContin and Butrans PI info along with Initiation/Titration guides, Dr said she well informed of products, and will continue to prescribe appropriately.
PPLPMDL0020000001	Cleveland	OH	44103	3/21/2014	Reminded of OxyContin Q12h, formulary grids, savings cards along with Butrans for those patients requiring around the clock analgesia that are failing on present therapy. Said Ok, will consider.
PPLPMDL0020000001	Cleveland	OH	44104	3/21/2014	Reminded of Butrans initiation/Titration doses, along with OxyContin Q12h and 7 tablet strengths, Said Ok will consider for appropriate patients
PPLPMDL0020000001	Cleveland Hts	OH	44118	3/24/2014	Reviewed OxyContin Q12h, flexible dosing strengths along with Butrans for those Tramadol failures requiring around the clock analgesia. Said OK will continue to prescribe for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44118	3/24/2014	Reviewed OxyContin q12h, 7 tablet strengths along with Butrans for those Tramadol failures requiring around the clock analgesia. Said Ok will continue to initiate appropriate patients
PPLPMDL0020000001	Lyndhurst	OH	44124	3/24/2014	Dr came up to window to get office supply; had less than 10 seconds. Dr please consider controlled release OxyContin when refilling prn Percocet or oxycodone, and Butrans after prn Tramadol. Met with Ebony and office coordinator. Left and discussed PAP patient assessment train sheets. Left and discussed formulary grids both products. (Note: lunches Tue, Wed or Thu ONLY now per HCP's).
PPLPMDL0020000001	Lyndhurst	OH	44124	3/24/2014	Caught at front window while scheduling a lunch; 10 seconds. Discussed Butrans after prn codeine and Tramadol, when patient needs ER opioid and IR opioid is not controlling their pain.
PPLPMDL0020000001	Lyndhurst	OH	44124	3/24/2014	Met with medical assistant. Left OxyContin FPI. Showed gender dosing data, females have 25% higher concentration even after weight adjustment. Left PAP assessment guide for Dr. Roda. Discussed Butrans 1 x week buprenorphine transdermal. 4 patches monthly. Discussed, left both OxyContin and Butrans formulary grids.
PPLPMDL0020000001	Lyndhurst	OH	44124	3/24/2014	Dr Goldner apologized he did not have more time, computer repair rep there, system is messed up. Found out from dr that he is in Lyndhurst every Mon, Tues and every other WED or FRI. He rotates Lyndhurst on WED and FRI with Broadview Hts. In Broadview Hts about 2x month. Is only in Akron Thursdays. Provided gender dosing from OxyContin FPI regarding females having 25% greater concentration. Dr says he will take that into consideration in future when initiating OxyContin on female patient. OxyContin lowest effective dose, and opioid naive/start dose of 10 mg, dosed q 12 h discussed. Butrans as first opioid or after prn Tramadol discussed. When asked dr about meals, he says I'm welcome to bring snack in the next few months and when he's more settled he will start scheduling lunches. Left OxyContin conversion/titration guide and PAP patient assessment train sheets. Discussed and left new formulary grids, both OxyContin and Butrans.
PPLPMDL0020000001					



PPLPMDL0020000001	Berea	OH	44017	3/24/2014	Spoke to rn jasmine, I asked her if the dr was interested in learning about a pain medication that can be dosed once a week. She said maybe. I highlighted the dosing, the Tramadol failure patient and the steady state of the product. Explained the opioid naive patient appropriate for an extended release opioid may be appropriate for 10mg of OxyContin. Jasmin said dr doesn't write OxyContin.
PPLPMDL0020000001	University Hts	OH	44118	3/24/2014	Window call, OxyContin reminder Q12h, flexible dosing strengths along with Butrans for those Tramadol failures requiring around the clock analgesia, Said Ok will consider.
PPLPMDL0020000001	Cleveland	OH	44104	3/24/2014	Reviewed OxyContin Q12h, 7 tablet strengths along with Butrans for those Tramadol failures requiring around the clock analgesia. Said he will consider
PPLPMDL0020000001	Cleveland Heights	OH	44118	3/24/2014	Reviewed with OpeitRph OxyContin Q12h and Butrans for those Tramadol failures requiring around the clock analgesia, Said Ok no new prescribers
PPLPMDL0020000001	Mayfield Hts	OH	44124	3/25/2014	Lunch. Used Pain Specialist page in Butrans core Visual Aid to discuss renally impaired and mild to moderate hepatic impaired patients. Discussed greater dosing flexibility with 4 strengths. Asked Dr. if he learned anything new from 3/20 program, he stated no. He then said he's been getting a lot of push back from managed care, both commercial and med d, after I probed him "from where" and as a result he says he's turning more to OxyContin. He says he's slowly using more OxyContin as he's pleased with recent efficacy and it's easier to get covered for his patients. Used OxyContin FPI to point out some areas he may have forgotten about or didn't know, including pharmacokinetic studies, geriatric dosing and gender (female) differences.
PPLPMDL0020000001	Highland Heights	OH	44143	3/25/2014	Front window. Asked Mary to present packet of info to dr. Discussed, left new formulary grids, both OxyContin and Butrans. Left PAP assessment tear sheets let Mary know these would be for patient charts.
PPLPMDL0020000001	University Heights	OH	44121	3/25/2014	Quick hallway. Dr very upset about new EMR system. Says it's slowed him down tremendously. Told him I want to help him and his staff save time and call backs with the resources I can provide him such as formulary grids, product trial, savings cards. When I mentioned OxyContin, dr stated I use your product. I responded that's great, I'd like you to continue and I'd like you to think about using OxyContin outside of cancer pain. I'd like to discuss this profile next visit (George) This is patient case where this patient has pain due to osteoarthritis and not a candidate for surgery. Suggested dose is 10 mg, q 12 h. Left conversion/titration guide. OxyContin reformulation folder. Butrans I'd like you to think about after prn codeine or tramadol. 1 x week buprenorphine transdermal - can be called in with refills, which would save you and your staff time.
PPLPMDL0020000001	Cleveland	OH	44127	3/25/2014	Reviewed Butrans/OxyContin Formulary grids along with Initiation/Titration guides, said most of her patients require PA for any branded products, I will review with Josie, said ok she will consider
PPLPMDL0020000001	Cleveland	OH	44127	3/25/2014	Reviewed Butrans/OxyContin Formulary grids along with Initiation/Titration guides, said most of his patients require PA for any branded products, Said he has a patient in mind, told him I will review with Josie, said ok he will consider. Reminded of OxyContin Q12h, 7 tablet strengths
PPLPMDL0020000001	Cleveland	OH	44195	3/25/2014	Visited Dept left Butrans/OxyContin Initiation/Titration Chatterjee, Calabrese, Deal, fellows and nurse education room. Katherine Tuthill CNP, Tiffany Clark, Betsy Kirchner. Renee Recept.
PPLPMDL0020000001	Berea	OH	44017	3/25/2014	Discussed what are his trigger signals for converting someone from short acting opioids to extended release. Dr said it varies. But it's usually dose levels v. quantity of pills per day. I asked if he thought that was what other prescribers thought he said yes. Discussed OxyContin's doses it's dose flexibility and titration. Dr agreed that OxyContin made sense in patients from OxyCodone to OxyContin if they needed atc pain control and appropriate.
PPLPMDL0020000001	Mayfield Village	OH	44143	3/25/2014	Reviewed initiation guide for Butrans. Shared the Tramadol insight. First call to dr as Purdue rep. Detailed OxyContin core messages including indication, q 12 h dosing, 7 strengths, opioid naive and start dose 10 mg. Discussed Butrans as first opioid or after prn codeine or Tramadol for example, used Butrans initiation titration guide. Showed opioid naive dose of 5 mcg hr, and opioid experienced dose of 10 mcg hr. Shared PAP resources available including PAP patient assessment tear sheets. Left 4/30 invite, dr says there's no way he could make a program on Wed eve; he just doesn't attend programs. Dr states he tries to stay away from long acting opioids and he might write a few a year. <font color=blue><b>CHUDAKOB's query on 04/15/2014</b></font>Here is another physician who is not on your tiered selection list. Why are you selling to him as opposed to trying to get into the high decile physician offices on your list. He has no potential.<font color=green><b>BALLIE's response on 04/15/2014</b></font>This was prior to E2E changes, and this practice has been removed from my core/tiered target list.<font color=blue><b>CHUDAKOB added notes on 04/16/2014</b></font>Another mistake on my part. Sorry
PPLPMDL0020000001	East Cleveland	OH	44112	3/25/2014	Reviewed w/Latoya OxyContin/Butrans Initiation/Titration along with Savings Cards.No new info learned
PPLPMDL0020000001	Cleveland	OH	44113	3/25/2014	Reviewed OxyContin Q12h, Initiation/Titration along with Butrans for those Tramadol failures requiring around the clock analgesia, Said Ok, no time, referred to Barb for info.- in service
PPLPMDL0020000001	Mayfield Village	OH	44143	3/25/2014	Quick window. Met with med asst at front. Left packet of information. Let her know I'm leaving marketing piece on my 1x week buprenorphine pain patch; and controlled release OxyContin, q 12 h dosing schedule. Left OxyContin conversion guide/Butrans initiation guide. Left PAP patient assessment tear sheets. (Left same packet of info for Drs. Mukunda/Krishnan as well.<font color=blue><b>CHUDAKOB's query on 04/15/2014</b></font>Yes, my mistake!<font color=blue><b>CHUDAKOB added notes on 04/15/2014</b></font>This looks like it should have been a non-HCP call. Am I correct?<font color=green><b>BALLIE's response on 04/15/2014</b></font>Yes, my mistake!<font color=blue><b>CHUDAKOB added notes on 04/15/2014</b></font>He has no potential.<font color=green><b>BALLIE's response on 04/15/2014</b></font>This was made before E2E changes and is therefore no longer on your call list. Try to spend your time with physicians on your list as these are who will increase your sales.<font color=green><b>BALLIE's response on 04/15/2014</b></font>Noted. This call was made before E2E changes and Dr Price was removed from Core list starting 4/1/14.<font color=blue><b>CHUDAKOB added notes on 04/16/2014</b></font>Sorry. You are correct.
PPLPMDL0020000001	Mayfield Village	OH	44143	3/25/2014	Discussed my continued goal of getting him more comfortable using OxyContin and outside nursing home setting. Discussed efficacy data in FPI and opioid naive, start dose of 10 mg, dosed q 12 h schedule. Let him know typical time patients take OxyContin is: 1 oral pill at 8 am, 1 oral pill at 8 pm. Discussed what q 12 h dosing schedule could mean for elderly patients who are waking up in pain, or having to wake in MOTN to take their IR opioid. Showed other doses available after 10 mg. Left reformulation folder/FPI for his review. Butrans I've been discussing with you for over one year, and again, it's my goal to get you comfortable using this 1x week transdermal pain patch. 4 strengths for flexible dosing. He allowed me to tape my Butrans 4/30 invite to his mirror inside his office and asked me to keep reminding him about program.
PPLPMDL0020000001	Cleveland	OH	44195	3/25/2014	Visited Rheumatology Dept. spoke with Renee, left Butrans/OxyContin info for Chatterjee, Calabrese, Deal, fellows and nurse education room. Katherine Tuthill CNP, Tiffany Clark, Betsy Kirchner
PPLPMDL0020000001	Cleveland	OH	44127	3/25/2014	Reviewed OxyContin Q12h along with Butrans for those Tramadol failures that require around the clock analgesia, Said Ok feels patients are adequately controlled by present therapy
PPLPMDL0020000001	Cleveland	OH	44143	3/25/2014	Dr Kendis off on Tuesdays, but he was in office completing paper work. He was kind enough to come out and talk with me. Detailed him on controlled release OxyContin core messaging, q 12 h dosing. Left reformulation folder for his review. Detailed Butrans core messaging, 1 x week patch, 4 strengths, can be called in with refills. Detailed OTC products. Also discussed PAP resources Purdue has available and showed him PAP patient assessment tear sheets. He was very upfront and stated he's not interested in writing any long acting opioids. He refers all pain patients to pain mgt.
PPLPMDL0020000001	University Heights	OH	44121	3/25/2014	Met with med asst Jen. Discussed OxyContin conversion after prn oxycodone or percocet. Start dose 10 mg. Discussed Butrans after prn Tramadol, Codeine. Even though dr price can no longer write scheduled meds pr UH; wanted to make staff aware of positioning of my products for all HCPs in practice.<font color=blue><b>CHUDAKOB's query on 04/15/2014</b></font>Jenny, Dr. price is no longer a tiered physician and is therefore no longer on your call list. Try to spend your time with physicians on your list as these are who will increase your sales.<font color=green><b>BALLIE's response on 04/15/2014</b></font>Noted. This call was made before E2E changes and Dr Price was removed from Core list starting 4/1/14.<font color=blue><b>CHUDAKOB added notes on 04/16/2014</b></font>Sorry. You are correct.
PPLPMDL0020000001	Mayfield Village	OH	44143	3/25/2014	Dr Solomon still approves all lunches and appointments for their group. First time visiting him as Purdue rep. Discussed OxyContin indication, q 12 h dosing, 7 strengths, opioid naive starting dose of 10 mg. Discussed Butrans 1x week buprenorphine patch, 4 strengths now. Can be called in with refills. Dr was very candid with me and says he will not write any long acting opioids and if he did it would be few and far between. Discussed PAP resources including patient assessment tear sheets. He thanked me for the information. Left him packet of information, conversion guide for OxyContin, Butrans initiation guide. 4/30 Butrans invite. He stated he'd call me if he needs anything further.<font color=blue><b>CHUDAKOB's query on 04/15/2014</b></font>He was not a candidate to begin with, was he?<font color=green><b>BALLIE's response on 04/15/2014</b></font>This was before E2E direction.<font color=blue><b>CHUDAKOB added notes on 04/16/2014</b></font>Sorry. Thanks
PPLPMDL0020000001	E Cleveland	OH	44112	3/25/2014	Quick Butrans intro 7 day transdermal for those Tramadol failures along with OxyContin Q12h, flexible dosing strengths, Said Ok Requested to book appt. Marcia asked to stop back to schedule
PPLPMDL0020000001	Cleveland	OH	44195	3/26/2014	Reminded of OxyContin Q12h/Savings Cards along with Butrans for those patients requiring around the clock analgesia, Said he will continue to prescribe and recommend for appropriate patients, Has not had the opportunity to further discuss with Dr. Davis, but will!
PPLPMDL0020000001	Cleveland	OH	44195	3/26/2014	Reviewed Butrans for those patients requiring around the clock analgesia, Said She is looking to convert some patients, reviewed Initiation/Titration along with OxyContin Q12h.
PPLPMDL0020000001	Cleveland	OH	44195	3/26/2014	Reviewed OxyContin/Butrans PI's/Initiation/Titration guides, requested appt. Betsy stated patients requiring long-term maintenance narcotic pain relief are referred to Pain Mngmnt. Said she will keep contact info for future reference
PPLPMDL0020000001	Cleveland	OH	44195	3/26/2014	Reviewed OxyContin/Butrans Initiation/Titration guides/PI's, Said he will be transitioning from VC of education and Internal Medicine Residency Dir. no further info needed at this time. Will keep my contact info for further reference
PPLPMDL0020000001	Westlake	OH	44145	3/26/2014	Asked dr what is the clinical benefit of dosing a short acting product atc? She said there was non and it causes more problems doing it that way. She also said that managed care forces doctors tow rite products they wouldn't normally write cause of cost to the patient or edit processes in place. Dr said she would keep a look out for Oxycodone patients that may be appropriate for a product like OxyContin. Reviewed managed care. Also talked about the partners in pain web site. Dr said she likes the concept of Butrans so we reviewed the details of dosing, Initiation guided, steady state. Dr said she had a few patients that may actually be a candidate for Butrans. Also reviewed Tramadol insight.
PPLPMDL0020000001	Cleveland	OH	44195	3/26/2014	Reviewed Butrans for those Tramadol failures, Said she will look to prescribe for those patients requiring around the clock analgesia. Reminded of OxyContin Q12h and 7 tablet strengths, Will be moving to Wisconsin after finishing up Residency this spring
PPLPMDL0020000001	Cleveland	OH	44113	3/27/2014	Quick review of OxyContin Q12h, 7 tablet strengths along with Butrans for those patients requiring around the clock analgesia, Initiation/Titration, Said Ok will consider for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44114	3/27/2014	Reviewed Butrans Program key takeaway, Said he will continue to find appropriate patients to manage around the clock analgesia, Went over Butrans experience program along with OxyContin Q12h and 7 tablet strengths
PPLPMDL0020000001	Olmsted Falls	OH	44138	3/27/2014	Spoke to dr regarding dosing of butrans and tramadol insight. Dr said he has tramadol patients but rarely will move to an chronic medications after tramadol. I said if they weren't controlled...what would you do.He said he would only give him one or two at max short acting opioid. Reviewed q12h dosing with oxycontin, he said he will give it to appropriate patients who are more severe.
PPLPMDL0020000001	Cleveland	OH	44113	3/27/2014	Reviewed OxyContin Q12h, 7 tablet strengths, formulary coverage along with Butrans for those patients requiring around the clock analgesia, Said He along with Linda will keep it in mind for appropriate patients
PPLPMDL0020000001	Lynchhurst	OH	44124	3/27/2014	Dr Kim off today. Met with medical assistant. Discussed low doses of OxyContin, starting dose, opioid naive dose of 10 mg. Discussed \$70 savings card, preferred formulary status. Discussed Butrans as first opioid or after prn Tramadol, codeine. Can be called in with refills. 4 strengths, opioid naive and opioid experienced dose discussed. Was able to leave my info on Dr. Kim's personal desk prior to leaving.
PPLPMDL0020000001	South Euclid	OH	44121	3/27/2014	Met with med asst Jen. Let her know I'd like dr to review OxyContin FPI Gender Dosing, female data. Discussed opioid naive females dosing consideration.She will discuss with him when he's free. Left OxyContin savings flashcard, formulary grid.Discussed Butrans as first opioid or after prn Tramadol. Left Scott profile for doctor's review.
PPLPMDL0020000001	Westlake	OH	44145	3/27/2014	Asked her when was the last time she saw a tramadol patient for their refill? Focused on that type of patient with atc pain...reviewed caresource and savings coupons. Also reminded her that oxycontin 10mg could be giving for an opioid naive patient if they were appropriate.
PPLPMDL0020000001	Richmond Heights	OH	44143	3/27/2014	Lunch. First time meeting dr anand. He practices with dr balaji every THURS. He's in Hudson 1 day per week & Shaker Heights 1 day per week. He stated he was more involved with dermatology previously; now he is focused on Internal Medicine. (Purdue has speciality as Dermatology; should be IM) lead with Percocet insight; dr agrees 264 days a long time for patient to remain on Percocet. I asked him, when he goes to refill his next Prn Percocet script, that he re assess the patient, to see if pain remains persistent & exists around the clock. If so, wouldn't an ER opioid like OxyContin be more suited to that patient? He will consider. Discussed q 12 h recommended dosing, opioid naive ,START dose is 10 mg. focused on lowest effective dose. Butrans discussed. 1 x week transdermal, 4 patches monthly. Left & showed Butrans initiation & titration guide. Invited him to 4/30
PPLPMDL0020000001	Cleveland	OH	44114	3/27/2014	Reminded of Butrans for those Tramadol Failures who require around the clock analgesia, Reviewed Patient Savings program and BWC



	Richmond Heights	OH	44143	3/27/2014	Insight #11 Percocet, 35% on 90 days, takes until day 264 to convert to ER opioid. Dr seems not to trust his patients, as he says I dont believe many of my patients when they say they " need Percocet & it makes them feel better." Told dr the reason I shared this insight is to get him to take a look at how many short actings he's continuing to refill, month after month, for what may be continuous around the clock pain. Would it be fair to say that pain could benefit from an ER opioid like OxyContin? Dr says it's difficult to get patients to change what they're taking. Using OxyContin core visual I pointed to Percocet and oxycodone conversions & stated I'm not asking you to change what you have your patients on, I'm just asking you to change the method of delivery. Is that fair? He then wanted to know what is morphine equivalent for each dose of OxyContin. I replied with it will come up on patients OARRS report. Dr then states he's worried about cost. OxyContin has been on market for over 18 yrs, gas broad commercial & med d coverage; with savings card, patients get \$70 off co pay & pay first \$30 out of pocket. He will consider. Butrans discussed as first opioid or after Tramadol. Went through initiation guide. Showed approx morphine equivalents for conversion from IR opioids. I'd like you to be more comfortable with Butrans. Shared 30% pain reduction, efficacy safety data, 4,6 pain reduction for opioid naive. Tolerability & ability to titrate after 3 days. Please attend 4/30
PPLPMDL0020000001	Cleveland	OH	44113	3/27/2014	Reviewed OxyContin Q12h, 7 tablet strengths, Initiation/Titration, Savings cards along with Butrans for those patients requiring around the clock analgesiaDebbie is retiring
PPLPMDL0020000001	Cleveland	OH	44113	3/27/2014	Reviewed OxyContin/Butrans Initiation/Titration with Stearns,Joy, Bilfield, Savings cards
PPLPMDL0020000001	Cleveland	OH	44113	3/27/2014	Visited Ortho dept. reviewed OxyContin/Butrans initiation/Titration along with Savings cards (Bilfield,Stearns and Joy)
	Lyndhurst	OH	44124	3/27/2014	Tramadol insight. Asked Dr to consider for just a few patients, if there may have been missed opportunities over many months, for earlier conversion to ER opioid such as Butrans and what could that mean for his patients, with around the clock pain. I want you to use Butrans before you convert patient to Vicodin. Transermal patch may be tough sell to patient after they've been on oral pills. Butrans call be called in with refills, which is convenient for you, your staff and patient as well. Left initiation/titration guide. OxyContin, my goal is for you to warm up to OxyContin for a few patients as well. For patients on Percocet or oxycodone who are not controlled on prn opioid, and need around the clock analgesia. Shared non branded and PAP patient assessment tear sheet. Asked him to read over and let me know if of value and if he wants more copies.
PPLPMDL0020000001	Westlake	OH	44145	3/27/2014	dr asked me if oxycontin went generic. I said no its still a branded Opioid and we discussed the 10mg appropriate for opioid naive patient. I asked the doctor if he every wrote the 10mg q12h of Oxycontin in a while? He said no. I asked what he dosed...and he replied with his patients are more complicated. Dr said he doesn't have many patients that require chronic pain medications.<font color=blue><b>CHUDAKOB's query on 04/16/2014</b></font>Lisa, you indicated you presented OxyContin and Butrans, but your call notes only show you discussed OxyContin. Can you please clarify?<font color=green><b>BARTOLI's response on 04/18/2014</b></font>There was not a lot of detail in the Butrans presentation other than a mention or two.<font color=blue><b>CHUDAKOB added notes on 04/22/2014</b></font>If you talk about Butrans at all, then it MSL email communication with Dr. Dell and Ms. Algeri regarding BUP3031 participation under Dr. Anthony DeRoss. Ms. Algeri noted that she is the primary contact to proceed, Dr. Dell responded with additional protocol questions that were forwarded to the PPLP medical team for review.
PPLPMDL0020000001	Westlake	OH	44145	3/27/2014	Reviewed commercially insured coverage and coupons with dr for both Butrans and OxyContin. discussed dosing q12 for those patients appropriate instead of dosing the short acting products atc. Asked if OxyContin sounded reasonable for the patients like those? Dr. didn't have an answer and walked into a room.
PPLPMDL0020000001	Lyndhurst	OH	44124	3/27/2014	Lead with Percocet insight. Discussed missed opportunities for re assessing patient who may need ER opioid around the clock. Discussed lowest effective dose, Opioid haive dose, reduce dose by 1/3 to 1/2 for debilitated non opioid tolerant patients. Discussed gender differences, opioid naive females have 25% higher plasma concentrations, greater frequency of typical opioid AE's than males, even after weight adjustment. Shared pharmacodynamic study data, section 12.2 FPI. Showed and discussed percocet, oxycodone conversions to OxyContin, START principles. Sareh says this guide will be very helpful, she's warming up to low dose OxyContin. Butrans after Tramadol or codine discussed. Can be called in with refills, which can save you and your staff time. Shared PAP resources including PAP assessment tear sheets, which she really liked and will start using
PPLPMDL0020000001	South Euclid	OH	44121	3/27/2014	Met with pharmacist. Discussed OxyContin new \$70 card, left savings flashcard. Q 12 h dosing, controlled release. Discussed Butrans, 1 x week transdermal, now 4 strengths. Left NDC/FPI brochure for Butrans. They have just one patient, of Dr. Shaid Butt, who's on Butrans 20 mcg/hr. OxyContin dispensed regulary. She states they have some type of point of sale savings for patients, not sure what its called. Left protect your pharmacy brochure, and one Butrans patient guide.
PPLPMDL0020000001	Cleveland	OH	44114	3/27/2014	Reviewed Butrans for those Tramadol failures requiring around the clock analgesia, Butrans Patient experience program along with BWC. Said Ok will consider, Reminded of OxyContin Q12h and 7tablet strengths
PPLPMDL0020000001	Westlake	OH	44145	3/27/2014	Mrs. Seikel the office manager said the doctor is very busy and doesn't see reps outside of a lunch. I Reviewed managed care for oxycontin and butrans.
PPLPMDL0020000001	Westlake	OH	44145	3/27/2014	the ma (can't remember her name), but she told me the doctor was not available to speak with today. I showed her some Butrans intation guide and talked about moderate pain for butrans and also discussed Oxycontin 10mg for the appropriate opioid naive patient.
PPLPMDL0020000001	Lakewood	OH	44107	3/28/2014	Spoke to Beth the office manager about any managed care hurdles I could assist her with regarding OxyContin or Butrans. She said things were still going ok and nothing special to report. Reminded her about the managed care coverage and coupons for both products.
PPLPMDL0020000001	Westlake	OH	44145	3/28/2014	Reviewed dosing of OxyContin and Butrans and reminded of patch placement.
PPLPMDL0020000001	Westlake	OH	44145	3/28/2014	Discussed Butrans 15mcg reminder and the doses of Butrans. Asked if they have seen scripts recently and if patient have any common questions. Kyle the pharmacist said no. Reviewed dosing of OxyContin and asked if they knew the opioid naive dose and how it was written. Kyle said it was the lowest at 12qh.
PPLPMDL0020000001	Lakewood	OH	44107	3/28/2014	Asked the dr to take a look out next week for that one patient who needs the dose adjustment because their pain medication like Tramadol is not controlling their pain and they are already at two or three pills a day. Consider a different delivery system like Butrans or OxyContin. OxyContin q12h schedule 2. 7 day transdermal patch schedule 3.
PPLPMDL0020000001	Lakewood	OH	44107	3/28/2014	Spoke to lisa the ma and asked her about any troubles getting my products though managed care. She said one patient on Medco part d said it would cost a few hundred dollars so they wrote something else. Reviewed commercial plans and savings cards for both products.
PPLPMDL0020000001	Westlake	OH	44145	3/28/2014	Left dr a Butrans posted and thanked her for her time this week at lunch. Asked her if she saw the patients she talked about yet Nd she said no, but she was going to reevaluate their current medications to see if they are appropriate for Butrans. Also reminded her about the Percocet patients if any of them may benefit for a q12h if appropriate.
PPLPMDL0020000001	akron	OH	44333	3/31/2014	Dr told me that that the patient he wrote Butrans for who was. Vicoden HP was denied go Butrans. Dr said that he couldn't remember if the patient had Buckeye or Caresource. I asked dr what the option was instead of Butrans and he said fentanyl. Dr said its ridiculous to go to fentanyl. I told him the patient most likely on buckeye because Caresource most likely would have covered it. Dr said he's trying to get his patients off their multiple pills for pain and said that he did start another patient on Butrans cho didn't want to take all the pills and it was covered. I asked dr for continued use of Butrans for patients like Kathy and reviewed her profile. Discussed OxyContin and told him to use it when patients on Percocet need a dose adjustment. Reviewed the conversions.
PPLPMDL0020000001	Euclid	OH	44119	3/31/2014	Discussed 30% pain insight and linked to Butrans BUP 3024, discussed inclusion criteria such as osteoarthritis and spinal stenosis which Paul mentioned. Discussed tolerability and ability to tirate in opioid naive. Paul asked what is the end point with Butrans? After further probing, discovered Paul wanted information on weaning patients off Butrans if needed. Responded we have no data on weaning patients off Butrans, added clinical data from FPI, and reviewed removal of Butrans and half life. Reinforced Butrans in more moderate pain patients. Paul concluded that he will use his discretion on length of therapy with Butrans. Discussed OxyContin as option after all doses of Butans have been exhausted. Discussed and showed in FPI: dosing for debilitated, elderly and females. Showed section 12.2, discussed efficacy results of study in 182 patients comparing OxyContin 10, 20 and 30 mg doses. Reminder that OxyContin is not scored and cannot be cut/broken in 1/2. Note: Paul states he rarely changes what Drs. Nageeb and Saeed place patients on initially: he does follow up and maintenance for patients. Short call in akron office and asked her how the office protocol is going with trailing Butrans after 2-3 prn medications? Elise said its going well. I asked her if she is seeing more tramadol, vicoden or Percocet when she sees patients? Elise said she didn't know for sure but would say more vicoden. I told her that's a product when a patient needs that dose adjustment to use Butrans. Showed her the Kathy profile and asked if she has any patient like her? She said she does. Nothing else learned.
PPLPMDL0020000001	Fairlawn	OH	44333	3/31/2014	Spoke with Jessica the pharmacist. She was off for three months on maternity leave and said she's just getting back into the swing of things. I reviewed the patient types for OxyContin Tom and Kathy for Butrans. Jessica said she feels like they are seeing a lot of oatients on hydrocodone recently and agrees that Butrans is a good option for those patients. Jessica said she's not seeing as much OxyContin but is seeing more from Petrus recently. I told her that's great and said that Gilbert said the same thing a few weeks ago. Discussed managed care for each product.
PPLPMDL0020000001	Cleveland	OH	44104	3/31/2014	Reviewed OxyContin/ Butrans Savings Card, with Hakeem
PPLPMDL0020000001	Uniontown	OH	44685	3/31/2014	Dr said she really didn't have time to talk today. I told her that the Kathy profile is something that she should review when it comes to Butrans. Dr said me about conversions from vicoden. I showed her the conversion guide in the profile and discussed it. I asked her if she has a patient in mind? She said not really but she was just curious. Nothing else learned.
PPLPMDL0020000001	Euclid	OH	44119	3/31/2014	Resident working with Dr. Norton Winer. Met for first time in Euclid Avenue. Used hydrocodone/apap insight. 287 days before patients were converted to ER opioid. What are his thoughts. He agreed with Dr. Winer that that is a long time to keep patients on ir opioid, if pain is actually around the clock. Discussed low dose OxyContin as an option for patients failing on ir vicodin, oxycodone or percocet. Dr. says he will typically prescribe OxyContin with a few ir oxycodone for break through pain. Introduced Butrans as first opioid when non opioids not controlling pain and before vicodin or oxycontin. Transdermal option, 1 x week, buprenorphine, 4 patches monthly.
PPLPMDL0020000001	Cleveland	OH	44104	3/31/2014	Quick Review of Butrans for those Tramadol failures requiring around the clock analgesia, Initiation/Titration along with OxyContin Q12h and 7 tablet strengths. Said Ok, will keep in mind and had to leave do to illness
PPLPMDL0020000001	Garfield Hts	OH	44125	3/31/2014	Visited Pain Mgmt (Lokesh, Abraham, Dalbir) OxyContin/Butrans initiation/Titration guides
PPLPMDL0020000001	Cleveland	OH	44120	3/31/2014	Reviewed Butrans/OxyContin Savings Cards with Sue-Tech, Left Butrans Initiation/Titration guides, No new info learned
PPLPMDL0020000001	Cleveland	OH	44104	3/31/2014	Reviewed Butrans for those patients requiring around the clock analgesia, Initiation/Titration, Savings Cards, Said he has 3-4 patients at nursing home that are doing well on Butrans, Reminded of OxyContin Q12h, and 7 tablet strengths. Also discussed IR products that are prescribed around the clock for extended period of time, believes clinicians start with the thought of short term fix and then find them treating long term chronically, patients are adequately controlled and satisfied, thus no change in prescribing habit.Admitted Not necessary proper clinical practice, but reality.
PPLPMDL0020000001	Cleveland	OH	44104	3/31/2014	Quick Butrans for those Tramadol failures requiring around the clock analgesia along with OxyContin Q12h, flexible dosing strengths.Said she will keep in mind but is referring to pain mgmnt now.
PPLPMDL0020000001	Cleveland	OH	44104	3/31/2014	Reviewed OxyContin Q12h, 7 tablet strengths along with Butrans for those patients requiring around the clock analgesia, Said Ok, refers to Dr. Rosenfield
PPLPMDL0020000001	Garfield Hts	OH	44125	3/31/2014	Reminded of OxyContin Q12h, Formulary status along with Butrans for those patients requiring around the clock analgesia, Said Ok will keep in mind
PPLPMDL0020000001	Akron	OH	44333	3/31/2014	Spoke to Dana at counter. I told her about the hydrocodone insight and asked her if it sounds about right based on her experience? She said it does and knows it's a problem. Dana said that she tries to get her patients on ER opioids as soon as possible because it just doesn't make sense to keep someone on short acting products for a long period of time. I told her that's good to hear and showed her the Kathy hydrocodone profile. She said this is exactly what they all see in the practice. She said thanks for the reminder. I asked her if OxyContin is a product she also feels good about? Dana said that OxyContin works and is covered pretty well. I reminded her to use it when a patients already on IR oxycodone need a dose adjustment. She said alright.
PPLPMDL0020000001	Cleveland	OH	44103	4/1/2014	Reviewed OxyContin Q12h, flexible dosing strengths along with Butrans for those Tramadol failures requiring around the clock analgesia , said Ok, will continue to look for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44109	4/1/2014	Reviewed OxyContin/Butrans savings cards with E. Tech, R's are coming from Nickels, Torres and Casey, no new info learned
PPLPMDL0020000001	Cleveland	OH	44113	4/1/2014	Reviewed OxyContin Q12h, 7 Tablet strengths along with Butrans for those Norco failures requiring around the clock analgesia, Said Ok will continue to prescribe for appropriate patients. Discussed IR around the clock prescribing protocol, feels patients are adequately controlled-<font color=blue><b>CHUDAKOB's query on 04/17/2014</b></font>Isn't Dr. Nickels a Butrans Primary call?<font color=green><b>GUTKOMA's response on 04/18/2014</b></font>Yes-<font color=blue><b>CHUDAKOB's query on 04/22/2014</b></font>Then why OxyContin in the first position?<font color=green><b>GUTKOMA's response on 04/22/2014</b></font>Dr. N. led the conversation off discussing OxyContin, CII's and ER opioids.<font color=blue><b>CHUDAKOB added notes on 04/23/2014</b></font>Wow. That is unusual? Thanks for the clarification.
PPLPMDL0020000001	Cleveland	OH	44113	4/1/2014	Reviewed Butrans for those Norco Failures requiring around the clock analgesia along with OxyContin Q12h, 7 tablet strengths, formulary grids. Said Ok will continue to prescribe for appropriate patients, nothing new learned

PPLPMDL0020000001	Cleveland	OH	44113	4/1/2014	Reviewed OxyContin Q12h, 7 tablet strengths, Formulary, Said she doesn't RX CII's, Reminded of Butrans for those Norco failures, agreed those are the patients she tends to use Butrans, asked for expanded use for appropriate patients, said she will consider. Recommended OTC
	Akron	OH	44310	4/1/2014	Good quick discussion through window. I showed dr the Kathy profile and asked him if he is continuing to look for more patients with a similar profile? Dr said is finding more and more patients that either are in pain on vicoden or he just feels they need a change. I told dr that's good to hear and to continue thinking about how he can expand his use. Dr said he is still finding that even patients on Percocet find good results from Butrans. I told dr that since he has the beliefs he has against using OxyContin that it very acceptable.
PPLPMDL0020000001	Stow	OH	44224	4/1/2014	Quick call thigh window and told him that I have one question and one comment. I asked dr when he has used Butrans recently where he has used it? Dr said the last patient was on vicoden and wanted more and also had asked in the past about other options for pain. I told dr that the profile like Kathy is a good candidate for Butrans like he just described but tramadol patients are also good candidates. Dr agreed and said he likes it because its low dose and its a schedule 3. Nothing else learned.
PPLPMDL0020000001	Fairlawn	OH	44333	4/1/2014	Short discussion its dr about Butrans. Discussed the lowest therapeutic dose and how the vicoden prescriptions help her meet that goal. Dr agreed wits wrong but many parents will only take IR opioids due to cost. I asked dr if she has patients with private insurance? She said sh does. I asked if she has patients in legitimate pain. Dr said she does. I asked if she has nay of those also on tramadol or vicoden? Dr said she does. I asked what the downside would be to start Butrans for that patient instead of titrating the IR? Dr said I have a compelling point. I asked dr to try Butrans which she agreed to. Finished with insurance coverage.
PPLPMDL0020000001	Cleveland	OH	44103	4/1/2014	Reviewed OxyContin Q12h, 7 tablet strengths along with Butrans for those Tramadol failures requiring around the clock analgesia she sending to Pain Mgmt, Said Ok, nothing new learned. Sending to St. Vincent Charity
PPLPMDL0020000001	Fairlawn	OH	44333	4/1/2014	Good discussion about OxyContin and Butrans. Of off with insight about IR oxycodone which of into a discussion about identifying patients on Percocet who need a dose adjustment. I asked dr if its riskier to maintain a patient on IR oxycodone or convert them to OxyContin? Dr said I have a good point and said cost will dictate many prescriptions. I told dr to focus on those that are motivated to change and have good insurance. Discussed Butrans and using the lost effective dose. Dr agreed he tries to. Asked him how he would write a vicoden prescription? Dr said 1-2 pills every 6 hours. I asked dr how that helps him reach his goal of using the lowest effective dose? Dr said again I have a good point because it doesn't. Discussed Butrans dosing, conversions, initiation, patient profiles. Dr said he refers a lot to Vucetic and said he has seen many back on Butrans and really like it. I told dr to focus on patients needing a dose adjustment on tramadol or vicoden who are motivated to change and are legitimate. Dr agreed and said he will use it.
PPLPMDL0020000001	Fairlawn	OH	44333	4/1/2014	Discussed Butrans and OxyContin. Discussed Butrans dosing, schedule 3, 7 day transdermal patch, indication, conversions and patient profiles. Dr asked about abuseability and incidence of AE's. I discussed that Butrans contains buorenorphine which is an opioid and it can be abused and miss used like any other opioid. I also reviewed the AE profile from the main visad and asked him if anything stood out? Dr said no. Dr asked what the cash price is. I asked him if he is interested in starting a cash paying patient on Butrans? Dr said no but it would be nice to know the cash price. I told him I didn't know. Reviewed private prescription plans and Medicare coverage. I asked dr to try it in a patient like Scott or Kathy and reviewed each. Dr said he is intrigued enough to try it.
PPLPMDL0020000001	Barberton	OH	44203	4/2/2014	Spoke with Helen the nurse and dr kadekia the head resident of the internal medicine group for dr Edward. Invited the residents to Jenny's Butrans program on the 30th and gave the review of Butrans. Dr did not know anything about Butrans, yet when I started giving dosing and discussing appropriate patient types according to the naive study, the resident said he could identify with those types of patients. Resident said he would review the fpi and patient profile with the doctor and other residents. I told him I'd be back to follow up on the program and other questions he may have. Reviewed OxyContin dosing.
PPLPMDL0020000001	Cleveland	OH	44106	4/2/2014	Reviewed with Rob OxyContin Q12h along with Butrans for those Tramadol failures requiring around the clock analgesia. Said Ok nothing new learned
PPLPMDL0020000001	Cleveland	OH	44106	4/2/2014	Quick review of OxyContin Q12, 7 tablet strengths along with Butrans for those Tramadol failures requiring around the clock analgesia. Said Ok will continue to consider for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44106	4/2/2014	Reviewed OxyContin Q12h, 7 tablet strengths along with Butrans for those Tramadol failures requiring around the clock analgesia. Said Ok, will consider for appropriate patients.
PPLPMDL0020000001	Uniontown	OH	44685	4/2/2014	Quick hello in hallway about OxyContin and Butrans. I told dr I had one question and comment. I asked him if OxyContin is continuing to provide the efficacy results he expects? Dr said it is but wishes he didn't have to mess around with insurance companies as much to get it approved. I asked him if its just OxyContin or any ER opioid? Dr said that I'm right, it is many of the ER opioids and that the insurance companies font want to approve it and would rather patients be on ER morphine or something like that. I told dr that I would like him to give me some examples next time I'm in of plans that have been difficult to get OxyContin approved. Dr said ok. Reminded dr to continue to think of Butrans as that option for his patients on tramadol or vicoden that need a dose adjustment. Dr said he like Butrans. Nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44106	4/2/2014	Reviewed w/Marge OxyContin/Butrans savings cards along with info on key prescribers, (HIV-Infectious Disease, Hem/Onc)
PPLPMDL0020000001	Akron	OH	44320	4/2/2014	Dr told me dr Bonoy is out of the country and she only has a second so I told her that Butrans can provide a very good solution for her patients who need dose adjustments on products like tramadol and vicoden. Dr said she has used it a few times. I told her if I'm not mistaken, she has had pretty good success! Dr agreed. I asked her why then is she not finding more candidates for it? Dr said patients can't afford it. I told her that I'm sure she has some patients with private prescription insurance where cost sit an issue. Dr said she probably does. Reminded her to also use OxyContin for those patients needing that dose adjustment on Percocet. Nothing else learned.
PPLPMDL0020000001	Barberton	OH	44203	4/2/2014	Emergency medicine. Spoke to the front office coordinator.
PPLPMDL0020000001	Westlake	OH	44145	4/2/2014	Saw dr and the np today. We discussed how he was addressing opioids in his office in 2014. Dr said they try not to write for chronic pain meds. I said so what happens after they have been on NSAIDs for like 90 days and their pain gets worse. He said he may consider Butrans, doesn't want to start writing Tramadol and won't write many short acting products either. I asked who he referred too, he said kabbarra and some other names. Then the dr and np said their patients don't get in right away. I asked if they give them pain medications until they do get into see the doctor and the answer was it depends. Reminded dr about Butrans dosing, managed care coverage.
PPLPMDL0020000001	Barberton	OH	44203	4/2/2014	Also highlighted caesource. Dr said he rarely sees a chronic pain patient but he will remember Butrans if appropriate.
PPLPMDL0020000001	Barberton	OH	44203	4/2/2014	Spoke to Helen the ma about seeing the doctor. I provided her with dosing on both products, she was not familiar with Butrans. She gave me the name of the head resident to talk with about product.
PPLPMDL0020000001	Akron	OH	44333	4/2/2014	Discussed with Kim the rn Butrans and OxyContin dosing. She was familiar with Butrans and I asked her if the new doctor to the group would be interested in learning about Butrans, she said yes and booked a lunch. Dr Patel and Sykes are both in on Wednesdays. Left her fpi for the dr to review and a patient profile.
PPLPMDL0020000001	Akron	OH	44313	4/2/2014	Good discussion about Butrans and OxyContin and introduced the new patient handout tearpad. Dr said he won't use them and doesn't use the patient information guides as well. I asked why and he said that most of his patients he starts on Butrans are Medicare D and they can't use the copay cards anyway. I told dr that even though they don't qualify for the cards they can still find benefit from the patch location descriptions, disposal and proper skin prep. Dr said he reviews all that with the in person. I asked dr if he is getting the Butrans patient experience program surveys in the mail? Dr said he is. I asked what his patients think about them and he said most like them. I asked for continued business with Butrans and to focus more on patients under Medicare age. Reminded about OxyContin use for those patients coming in to see him already on IR oxycodone.
PPLPMDL0020000001	Akron	OH	44333	4/2/2014	I asked dr if he currently has patient that are currently taking 20mg of Percocet a day? Dr said yes. I have him the OxyContin conversion and titration guide and asked him if it makes sense to convert them to IR oxycodone 10mg q12? Dr said it does and said he knows he should be using more of the lower doses. I asked him what the downside its for the conversion? Dr said none as long as the patient can afford it. I told dr to focus on private prescription and Medicare D patients. I gave him the Kathy profile for Butrans and told him to gain more clinical experience with it in a patient like Kathy.
PPLPMDL0020000001	Akron	OH	44320	4/2/2014	Discussed with Elise the doses she finds most useful to her in her practice. Elise said she sees some values in the 5mg dose which she uses for patients on low dose IR opioids and those that are elderly and frail. Elise said that she likes the 10mcg but said she has found great value in the 15mcg dose. I asked why and she said because when patients need more than the 10mcg she and her patients feel better about titrating in smaller increments. I told her that's good to know and told her and dr Vucetic that the 15mcg is again on back order. I told her that I'm sorry and that I will find out chick pharmacists have it in stock to help in patients refilling good opportunity. Discussed OxyContin and showed her the conversion and titration guide. I asked her if it makes sense for a patient needing a dose adjustment on Percocet to convert them to OxyContin in a 1:1 ratio? Elise said it does and she likes it because it works!
PPLPMDL0020000001	Cleveland	OH	44109	4/2/2014	Visited and Left Butrans/OxyContin Initiation/Titration, Kathy profile (Campbell, Dhillon, Dietz, Geho, Gemechu, Slattery, Corrigan, And Baker)
PPLPMDL0020000001	Akron	OH	44320	4/2/2014	Pharmacist told me she's too busy and discussed products with intern Sara. Explained Butrans and asked her what her knowledge is on Butrans? She said a little. Reviewed initiation and conversion guide, Scott profile and conversions. Reviewed copay trial card and copay cards. Discussed oxycotin conversion and titration guide, doses and conversions. Sara said she sees it being filled pretty often. I asked her if it makes sense that when a patient who continues to be refilled on Percocet and wanting more to convert them to the q12 oxycodone? She said she does and they do make recommendations to the patients to discuss things like that with their doctors.
PPLPMDL0020000001	Cleveland	OH	44106	4/2/2014	Visited Dept. Discussed OxyContin/Butrans Initiation/Titration (Sahgal/Hayek)
PPLPMDL0020000001	Cleveland	OH	44106	4/2/2014	Visited Dept. Requested Appt with Armitage, Bobak, Ligaris, And Rodriguez) Left OxyContin/Butrans Initiation/Titration
PPLPMDL0020000001	Cleveland	OH	44106	4/2/2014	Visited Dept. Requested Appt with (Alin, Silverman, Dowlat, Savvides, Conney, Nayak, Little, Sharma, and William) OxyContin/Butrans Initiation/Titration guides
PPLPMDL0020000001	Cleveland	OH	44106	4/2/2014	Visited Pain Mgmt (Hayek, Sahgal) reviewed OxyContin/Butrans Initiation/Titration,
PPLPMDL0020000001	Cleveland	OH	44106	4/2/2014	Reviewed OxyContin/Butrans PI along with Initiation/Titration guides, Said Ok, no info or further contact requested
PPLPMDL0020000001	Akron	OH	44320	4/2/2014	I told dr that I feel like we made some headway in the last two calls with OxyContin and Butrans. Dr said why? I told her that our discussion about using the lowest effective dose and her prescribing IR opioids that give a wide range of total daily dose doesn't lend itself to her goal. Dr said she remembers and admitted it got her to think differently about writing for pain. I told her with products like OxyContin and Butrans, patient selection is vital. I told her that she needs to weed out patients that she knows branded medicines will be cost prohibitive and those she just doesn't believe they are good candidates based on the indication. I told dr she needs to find that subset of patients for OxyContin, especially those already on oxycodone, who are motivated to get their pain under control. Reviewed Kay profile for Butrans and Maggie for OxyContin. Dr said she will try harder to think of oatiens for each.
PPLPMDL0020000001	Westlake	OH	44145	4/2/2014	Reviewed extended release opioid Butrans and OxyContin dosing. Q12h for OxyContin and 7 day transdermal patch. Reminded them on section 12.3 of OxyContin showing the 10mg starting dose for opioid naive patients who are appropriate. Discussed patch placement
PPLPMDL0020000001	Euclid	OH	44117	4/2/2014	Percocet insight. Asked Dr to consider that for patients on IR Percocet for several months, perhaps there were a few missed opportunities for conversion to controlled release delivery system. Steady state, half life data shared from FPL. Also discussed access for patients @ Painesville location: who are cash pay or commercially insured: \$70 cards can be used every 14 days. Dr states many plans continue to require patients to try morphine first. Discussed male Moufawad patient who's been on Percocet 10 mg 4x daily; Dr DeMicco recently placed patient on Butrans 10 mcg hr; allowed patient to keep Percocet as supplemental analgesia. Patient is laborer, who must stay alert for job daily. Patient did not want to increase Percocet dose. Upon follow up, patient says Butrans making a difference and he actually had 5-6 Percocet left. Typically, patient says, he runs out of Percocet at end of month. Walgreen's female pharmacist (Univ Hts location/Cedar & Warrenville Hts) gave patient a hard time. Pharmacist tried to change both Dr. Moufawad/Dr. DeMicco recommendation for patient initially. Discussed and left Butrans patient tear sheets. Also learned Dr. Pizsel OM is meeting with their practice next week. Dr. Pizsel has asked Dr to take over, 500+ BWC patients. Most would see Dr DeMicco in Painesville, as that's closest in proximity to Geneva. Dr will continue to follow up regarding this conversion of Pizsel patients prior to Aug. 1.
PPLPMDL0020000001	Berea	OH	44017	4/2/2014	Thanked dr for the time last week, I stated my goal is pretty simple. Identify those patients in your practice not controlled that are on short acting products that may be in need and appropriate for an extended release agent. like the Tramadol patient to Butrans or the Percocet patient to OxyContin if appropriate. Dr said ok and walked into a room.
PPLPMDL0020000001	Barberton	OH	44203	4/2/2014	Nurse told me to return at another day cause they were busy. I left Butrans fpi and David profile gave her the indication and dosing.
PPLPMDL0020000001	Cleveland	OH	44112	4/3/2014	Discussed OxyContin Q12h, 7 tablet strengths, IR around the clock, Dr. agreed and will consider for appropriate patients. Reviewed Butrans for those Tramadol failures requiring around the clock analgesia, Said Ok
PPLPMDL0020000001	Cleveland	OH	44113	4/3/2014	Reviewed Butrans for those Tramadol/Norco failures requiring around the clock analgesia, Patient info booklets. Said Ok will continue to prescribe to appropriate patients

	Cuyahoga Falls	OH	44223	4/3/2014	Short discussion as he still has two procedures to complete. I told him about the oxycodone insight and the hydrocodone insight. Dr agreed that they see too many patients on way too much opioid on board. I told him my challenge is to educate the primary care physicians and internists to use the products properly and find out why and when they refer to PM. Dr said that's a great idea to teach them how to use OxyContin because Dr said he sees too many patients on way too much Percocet or OxyContin. I asked for continued business Dr said he is really liking Butrans. I asked why and he said for patients on vicoden or Norco it works great and patients like that its a week long. I told him great and to use it even for patients on tramadol. Dr said if his patients are on tramadol its been added to vicoden or Percocet.
PPLPMDL0020000001	Cleveland	OH	44124	4/3/2014	Met w same med asst from last time. Left packet of info for Dr. including updated OxyContin formulary grid, protect your practice brochure, PAP patient tear sheets.
	Mayfield Heights	OH	44124	4/3/2014	Window call w med asst Carrie. Laham off today, will be in tomorrow Fri 4/4. Gina Savoca @ Hillcrest hospital. Dr Dewes only one doing office visits. Discussed OxyContin formulary updates, opioid naive dose of 10 mg. Discussed, left Butrans patient tear sheets. Left OTC Senokot, Senokot S, tear sheets for Laham. Discussed, left savings cards, both products.
	Highland Heights	OH	44143	4/3/2014	Met with Kristen. Shared protect your pharmacy brochure, discussed other Purdue RX Patrol resources. Discussed low dose OxyContin. She recently ordered OxyContin 15 mg for a patient. Discussed gender, geriatric data from FPI. Section 12.2 data on results from 182 patients in clinical trial, comparing, 10,20 & 30 mg OxyContin to placebo. Still no Butrans dispensed, ever. Discussed & left 1 patient guide. Reminder 4 strengths with newest strength being 15 mcg hr.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	4/3/2014	Quick hello through window and told her I have one question and one comment. I told her about the hydrocodone insight and asked her how in her practice she avoids treating around the clock pain with IR opioids? Dr said sometimes you have no choice because they just won't take anything. Than the cheap alternative but she said she tries to get patients on longer acting products sooner. I told her that's great to hear and that patients on hydrocodone are good candidates for Butrans. Gave her the Kathy profile and reminded her how to dose. Closed with OxyContin as the product for patients already on IR oxycodone.
	Akron	OH	44312	4/3/2014	Talked to dr through window about Butrans and told him I had one question and one comment. I asked dr if he feels that patients on tramadol who need a dose adjustment would be appropriate for Butrans? Dr said it depends on the pain level and reason for pain. I asked him if he had patients like Scott and showed him the profile and reviewed the specifics. Dr said in that case it makes sense. I asked dr if he has patients that fit a similar profile as Scott? Dr said he does and has started Butrans for some of them. I told him great and to continue please. Discussed new Butrans managed care grid with Donna the office manager.
	C. Falls	OH	44223	4/3/2014	Spoke with Cindy and Denise about splitting Butrans boxes. Cindy said it doesn't make economical sense because many insurance plans will not allow patients to pay for just one or two patches. The entire box will be billed out so it doesn't make sense. I told her I understand and its that I spoke about it with one of the providers in pain mane meant. Denise said she had the same discussion with the provider. Discussed OxyContin dosing and patient types. I asked about stocking of the 15mcg and she said they have all the doses.
	Cuyahoga Falls	OH	44223	4/3/2014	Led with insight about oxycodone and percentage of patients on the medicine for 90 days or longer. I told dr that the problem is that patients as a whole at being left on products like Percocet or even hydrocodone was to long. I asked dr if he agrees with this statistic and what he sees in his practice from the referrals he gets? Dr said he agrees that patients are not being placed on proper medicines or even the right doses. Dr said many of the patients com see him on Percocet and vicoden or Norco. Dr said it gives him more work. I asked if he would rather have patients coming in on the lowest effective dose and on products like Butrans or OxyContin? Dr said for sure. I told dr that specific patient selection is vital. Discussed Scott and Kathy, titration, and managed care. Dr said he really likes Butrans because its a product that works, safe and patients like it. I told him that there are AE's with Butrans and discussed them from the opioid experienced trial. Dr agreed and asked about contraindications. Read them from the visaid and asked why he asked? Dr said he was just wondering. I asked him for continued business and to use OxyContin in a place where the patients are already on IR oxycodone. Dr said ok.
PPLPMDL0020000001	Cleveland	OH	44106	4/3/2014	Quick review of OxyContin Q12h, Savings cards along with Butrans for those patients requiring around the clock analgesia, Initiation/Titration. Said Ok would like to further discuss. Scheduling appt with Terrah
	Cuyahoga Falls	OH	44223	4/3/2014	Good discussion around insight about hydrocodone and % of patients on them for 90 days or longer. Jake agreed and said that its a concern for him and other pain specialists because it makes more work for them when they get patients taking way too much IR opioids. Jake told me he had a patient of dr Granthams who was taking 700 mg of Morphine equivalent. I agreed and told him he's right and its a big challenge. Jake told me that they should be either referring out sooner or dose correctly. Discussed Butrans use in patient types like Scott and Kathy, titration, and that in the Bup 3915 trial the only supplemental analgesics used were NSAIDs. Jake said that's good to know. Asked for continued business. Discussed Maggie profile for OxyContin, conversions, when to initiate with OxyContin and to convert Percocet patients.
	Cuyahoga Falls	OH	44221	4/3/2014	Told dr about insight about hydrocodone. I told her the reason I told her this is the problem that's happening is too many patients are being treated with IR opioids for around the clock pain and it concerning to me. I asked her what he thighs are on that topic? Dr said she agrees its a problem but insurance companies aren't helping either. I told her I agreed and told her I realize not all her patients are appropriate for ER opioids like Butrans or OxyContin but one patient I wanted her to use Butrans on are the ones like Kathy. Dr agreed and said she will continue to write Butrans.
	Cleveland	OH	44103	4/3/2014	Responded to Dr. request - Reviewed Butrans Patient info booklets, along with OxyContin Q12h, 7 tablet strengths, formulary grids. Dr. said Ok, reviewed new NEON Center policy
	Cuyahoga Falls	OH	44221	4/3/2014	Used the oxycodone insight about percentage of patients continuing on oxycodone. I told dr that the reason I'm telling her this is because there may be some opportunities she is missing when it comes to converting those patients to OxyContin. Dr said she uses OxyContin as had no issues using it. I asked here she is primarily using it and she said for her moderate to sever pain patients. I told her I'm glad she said moderate because of the indication. I told her to reevaluate patients she refills on oxycodone and consider converting them to oxycotin. Dr said ok. I told her I'm still waiting for her to wrote a Butrans prescription. Dr liked and said she knows. I asked her what is it about Butrans that makes her hesitate? Dr said she didn't know. Reviewed all key selling messages and asked her to try it.
	Cuyahoga falls	OH	44223	4/3/2014	Good conversation about the OxyContin insight and % of patients still on IR oxycodone for 90 days or more. I told him that the reason I'm telling her this is because there is a problem right now with IR opioids being used to treat around the clock pain. I told her that she gets it because from what she has told me in the past, she tries to get patients medicines streamlined into ER opioids ASAP. Kim agreed and said she realizes there's a problem when she sees referral patients on way too much IR opioids and they still are in pain but believe the pills still work. Kim said that with Butrans, it a product that many older patients really take to because its a patch and they are already taking pills for other issues and don't want another. Discussed lowest therapeutic dose and patients types for Butrans and OxyContin. Kim said she had no problem using OxyContin and finds that its easiest to start on a patient who is taking Percocet. I asked if she gets any pushback? She said yes. I asked if she has ever told a patient she is giving them the 12 hour version of the medicine they have been taking? She said she has not and its a great idea and will use it. I asked for more a business on both products and explained the copay cards.
PPLPMDL0020000001	Cleveland	OH	44127	4/3/2014	Reviewed OxyContin Q12h, 7 tablet strengths along with Butrans for those Tramadol failures requiring around the clock analgesia. Said she has a patient in mind that she will consider
PPLPMDL0020000001	Barberton	OH	44203	4/3/2014	Dr thought converting patients to extended release product made sense for those on 3 or more short acting products for longer than two weeks he said. De said he liked the. turbans patch technology. Dr said managed care was his biggest concern. Reviewed managed care- workers comp and care-source were mentioned by the dr. Reviewed OxyContin dosing schedule. Doctor said he was aware of the reformulation of OxyContin. When asked why people write hydrocodone products atc dr said he was not sure, yet he guessed it was because most people hope the patients will only need it for a few weeks at first, then it increases when the patient is not controlled.
	Cleveland	OH	44103	4/3/2014	Reviewed with Sheila Tech. Butrans- 7 day Transdermal, dose forms along with OxyContin Q12h and 7 tablet strengths
	Highland Heights	OH	44143	4/3/2014	Communication insight #3, 71% of HCPs feel patients do not share enough info with them regarding their expectations for treatment. Also discussed with med assistants. They feel that patients share more than enough info; are very demanding and sometimes scare the staff because "they want their pills." Dr feels he receives adequate info from patients. Med staff also stated dr is VERY cautious as to what/which opioids he writes. Their perception is that he only has a few patients on OxyContin. This lead me to bring up section 12.2 of OxyContin fpi, dr will keep that information in mind. We discussed the ability to titrate in 24-36 hrs if needed, to next dose of 15 mg, dosed q 12 h. Does using OxyContin in lower doses for appropriate patients make sense? dr replied yes. Transitioned to opioid naive patients for Butrans. Also discussed opioid experienced and initiating Butrans after Tramadol or codeine. Dr. states I use a lot of Butrans, my patients do well. Reminded him of 4 strengths now, greater dosing flexibility. showed him new tear sheets: does he prefer tear sheets or booklets? He likes the tear sheets. Updated him on MED D wins with Butrans, he was very happy to hear of additional Med D plans as that's a good chunk of his business. Also updated on OxyContin commercial/Med D status. OTC: Dr prefers Senokot S.
	Cuyahoga Falls	OH	44223	4/3/2014	Discussion with Glenn the pain management pharmacist at lunch with physicians. Discussed Butrans and OxyContin formulary status, current scenario with pa's for Butrans and Glenn said there is not one particular plan that gives them a problem or continually gives them denials. Glenn asked about buckeye and Caresource and couldn't remember status for Butrans. Discuss Caresource PA and buckeye status. Glenn said they may be using it more in the hospital for inpatient use when IR fails and will get it from New Choice. OxyContin status and patient profiles.
	Lakewood	OH	44107	4/4/2014	Dr asked about managed care, reviewed commercial insurance for both product ts. Asked if he has tried to write Butrans in caresource patients. He said not yet.
	Cleveland	OH	44195	4/4/2014	Reviewed OxyContin Q12h, along with Butrans for those patients requiring around the clock analgesia, Initiation/Titration, Said Ok will consider for appropriate patients. Asked to follow up with appt. Times and availability
	Cleveland	OH	44102	4/4/2014	Reminded of OxyContin Q12h, Formulary grid along with Butrans for those Tramadol failures requiring around the clock analgesia. Said ok, will consider for appropriate patients
	Lakewood	OH	44107	4/4/2014	Discussed lowest effective dose and asked hi. How he knew what that was for patients taking short acting products atc for an extended period of time. He said he doesn't really know. The dr also said that they will always take more. I asked why do you treat patient in pain with opioids at in the first place? Dr said habit. Dr said he would use more Butrans in the appropriate patients. He said his concern was that patients on vikoden won't want to be switched to a patch technology.
PPLPMDL0020000001	Uniontown	OH	44685	4/4/2014	Good discussion over lunch about Butrans and OxyContin. Led of with two insights on tramadol and hydrocodone. I discussed with dr that there are simply too many patients being treated with IR opioids for around the clock pain. Dr agreed and said he knows he does it and can think of about 4-5 patients he has in that scenario. Discussed wi dr the conversation he needs to have with those patients about taking a different path especially is they continue to complain about being in pain. Dr agreed and said its just something that he feels if he starts an ER opioid that he's committing him and his patients to long term opioid use but said he knows he's already doing it but with a IR opioid. I told him. I. Glad he realizes that now and asked him if his goal is to write the lowest effective dose when he writes any medicine? Dr said it is. I asked him when he writes a IR opioid 4-5 times a day for a patient how that's helping him reach his goal? Dr said its not. I asked dr to choose patients that are motivated to change and he's knows they are legitimate patients. Dr said he Ned's to have those types of discussions with his patients and he will start Butrans. I asked if he has anyone on Percocet? Dr said he has one or two. I discussed converting those patients to the single entity OxyContin.
PPLPMDL0020000001	Cleveland	OH	44113	4/4/2014	Window call Reviewed OxyContin/Butrans Formulary grids, asked to leave Savings Cards, Maria- Said Mondays are better days, leave card and info to be contacted for appt
	Mogadore	OH	44260	4/4/2014	Dr walked by front desk as I was up front. Dr said he write a Butrans today. I told him that's great to hear and asked him what the patient was on prior and he said vicoden. I asked him which dose and he said 10mcg because he said he thought the patient was taking 30mg a day or so. I told him he initiated correctly. In asked for continued use and when he will follow up with the patient. Dr said he thought in 2 weeks. I asked for more OxyContin for those already on IR oxycodone. I told dr the are too many patients today being treated with Percocet for every day pain. Dr said he knows and wishes OxyContin was cheaper. I told him that for a branded medicine is is very affordable for many. Dr said ok. Nothing else learned.
PPLPMDL0020000001	Lakewood	OH	44107	4/4/2014	Asked the doctor if it made any sense to give someone an extended release products instead of dosing short acting products atc? He said yes. I said keep those Percocet patients in mind for OxyContin and perhaps the Tramadol patients in mind for Butrans if they are appropriate.
	Lakewood	OH	44107	4/4/2014	Asked Karen the rn about any managed care rejections on my products she said no. Reviewed caresource coverage for Butrans and commercial insurance.
	Cleveland	OH	44113	4/4/2014	Quick Butrans and OxyContin reminder, Formulary grid review along with savings card utilization, Said Ok, nothing new learned.
	Stow	OH	44224	4/4/2014	Spoke with Greg the pharmacist and discussed Butrans copay cards. Discussed the current cards he has are expired and provided him new ones. I asked if the Butrans scripts have picked up recently? He said it has a bit and asked him if he has the 15mcg dose? Greg said he does not. Discussed the back order situation. Nothing else learned.
	Cleveland	OH	44113	4/4/2014	Visited Pain Dept. (Shen) Reviewed OxyContin/Butrans Initiation/Titration, Formulary grids
	Cleveland	OH	44113	4/4/2014	Visited Pain Mgmt Dept(Shen), Ortho Dept (Stulberg) OxyContin/Butrans Initiation/Titration along with Formulary grids
	Cleveland	OH	44195	4/4/2014	Visited Anes/Pain Dept/ Raymond/Travinek, OxyContin/Butrans Initiation/Titration

PPLPMDL0020000001	Tallmadge	OH	44278	4/4/2014	Spoke with Rosemary the pharmacist who once was at giant eagle in uniontown. Discussed Butrans and fills in her pharmacy. She said she hasn't been there long enough to know but said she thinks they have a couple of patients on it. I discussed doses and titration along with patient types. They do not have the 15mcg dose. OxyContin dosing, conversion and titration guide. Rosemary said they have almost all doses because she looked the
PPLPMDL0020000001	Akron	OH	44310	4/4/2014	Led with the oxycodone insight and told dr that I'm telling him this because too many patients are being treated for around the clock pain with IR opioids. Dr agreed and said he may have one handful of patients he refills on OxyContin but said I should know he doesn't write any new prescriptions. I asked him if he has patients on Percocet? Dr said not many. I told him even if he has one that has been on it for 3-6 months that they would be a candidate for q12 oxycodone. Dr said ok. Reminded that Butrans should be initiated when patients need a dose adjustment on vicoden and reviewed the initiation and titration guide.
PPLPMDL0020000001	Akron	OH	44307	4/4/2014	Good discussion with dr about OxyContin and Butrans. I asked dr that in the wound center what types of patients he seeing and if its only acute pain or its chronic pain? Dr said he sees mostly patients in constant pain from diabetes, bed sores, post operative pain and acute pain that has manifested into chronic pain. I asked dr if he is using OxyContin? Dr said he is for may of his patients. Dr said that the 12 hour OxyContin works very well and doesn't want to treat every day pain with short acting oxycodone. I told dr that's go great to hear. I showed dr how he needs to be initiating and titrating OxyContin. Dr asked about copy cards and I told him I will get them to him. I asked which doses he's using most and he said 10-40 mg q12. I told him I'm glad he's using the lower doses as well. I asked about Butrans and he asked about using it and OxyContin for post operative pain. I explained from both visads under the limitations of use about post operative pain. Dr said that's good to know and said the he's thinking he should be using more Butrans for some of his patients. Explained the dosing, titration and patient type. Raid he has some patients that would fit for Butrans.
PPLPMDL0020000001	Akron	OH	44307	4/4/2014	Spoke with dr Ray Leone in the wound center within the hospital. Discussed his uses for OxyContin and the types of patients he sees in the hospital. Discussed how OxyContin can be used for post operative care however did specifically discuss limitations of use from visad. Discussed Butrans use and patient types.
PPLPMDL0020000001	Cleveland	OH	44113	4/4/2014	Window Call, Reviewed Butrans for those Tramadol failures requiring around the clock analgesia along with OxyContin Q12h and formulary grids, Said Ok, booked appt
PPLPMDL0020000001	Lakewood	OH	44107	4/4/2014	Some to lisa the nurse about any managed care problems happening with Butrans or OxyContin. She asked about part d coverage for OxyContin. Reviewed the Information.
PPLPMDL0020000001	Akron	OH	44312	4/4/2014	Short call as I was speaking to him about coffee on a monday of next week. Discussed oxycodone insight and told him the reason why I'm telling him this is because there are way too many patients being treated with products like Percocet for around the clock pain. Dr said he agreed. I asked him when he uses OxyContin where he's using it? Dr said for those on Percocet. I began to discuss more however dr got a call from the hospital and was behind. Dr said to pic up conversation next week.
PPLPMDL0020000001	Cleveland	OH	44195	4/4/2014	Reviewed OxyContin Q12h, 7 tablet strengths along with Butrans for those patients requiring around the clock analgesia, Requested address' of departing Pain Fellows
PPLPMDL0020000001	Stow	OH	44224	4/4/2014	Asked to see dr yang and he came to window. I asked him if he has been using to copy cards for Butrans in his private insurance patients? Dr said he is. I told him the ones he currently has are expired and I'm giving him new ones. Dr said thanks. I asked dr to please focus on patients failing on tramadol or vicoden. Dr said ok. Nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44125	4/7/2014	Reviewed OxyContin/Butrans, Angle/Tech no savings cards needed,
PPLPMDL0020000001	Garfield Hts	OH	44125	4/7/2014	Reviewed OxyContin Q12h, 7 tablet strengths along with Butrans for those Patients requiring around the clock analgesia, Said Ok, will keep in mind for appropriate patients.
PPLPMDL0020000001	Garfield Hts	OH	44125	4/7/2014	Reminded of OxyContin Q12h, flexible 7 dosing strengths along with Butrans for those Tramadol failures requiring around the clock analgesia, Said he will consider for appropriate patients, feels patients are doing Ok.
PPLPMDL0020000001	Cleveland	OH	44125	4/7/2014	Visited Surgery Dept. Eleene K. Clinical nurse mgr, OxyContin/ Butrans PI product review, all appts Requests be emailed
PPLPMDL0020000001	Olmsted Falls	OH	44138	4/7/2014	Discussed Butrans 7 day once weekly dosing and reviewed the Scott profile. I asked the dr why he hasn't written Butrans for a while and he said he wasn't sure about it. I asked if it was the dosing or the patch technology? He said a little of both. I said are you comfortable writing schedule 2's. He said only in the more severe pain patient.
PPLPMDL0020000001	Akron	OH	44333	4/7/2014	Spoke with dr about his use of Butrans and the patient types he is finding success. Dr said his little old ladies are still the patients he is finding the most success. I asked him about his patients under Medicare age that could be candidates for Butrans. Dr talked about patients 30 and 40 who really don't have the pathology to write IR opioids. Dr said patients must have pain resulting from a physical pathology that has required surgery or other intervention. I asked him if patients in their 50's would be candidates? Dr said if they meet his criteria than yes. I asked for continued business and discussed the back order of the 15mcg dose. Told him about pharmacist that currently stock it. Discusses his use of OxyContin for those already on the oxycodone molecule. Dr said he has been having some issues for Exalgo so there is more opportunity for OxyContin. Dr said he knows he writes a good amount of it because it works!
PPLPMDL0020000001	Garfield Hts	OH	44125	4/7/2014	Visited Surgery Dept.(Eleene Kempe-Clinical Mgr)Reviewed OxyContin/Butrans, Initiation/Titration, Request appt directly with surgeons
PPLPMDL0020000001	Cleveland	OH	44106	4/7/2014	Reviewed OxyContin and Butrans PI's along with Initiation/Titration guides and asked for no further contact. Said she has my contact info and will call if she has any questions.
PPLPMDL0020000001	Akron	OH	44333	4/7/2014	Short discussion as I was taking with dr Vucetic. Discussed Butrans dosing with 5 and 10mcg, titration and who is Butrans being used for? Else said she does use the 5 mcg dose and finds success with it. Noting else learned.
PPLPMDL0020000001	Fairlawn	OH	44333	4/7/2014	Spoke with Gilbert and Sue about OxyContin and Butrans. Gilbert told me that he just filled an 80 mg OxyContin for dr Petrus. Gilbert said that the patient had bone cancer and needed a strong opioid. Discussed dosing and titration and conversions of OxyContin and the pharmacy protocol for checks and balances for opioid dispensing. Butrans discussion and about patients being treated for around the clock pain on IR opioids. Gilbert said its an excellent option for patients on tramadol and vicoden and discussed 15mcg dose. Gilbert checked the stocking of the 15mcg and the back order. Gilbert said he has all doses in stock and said his wholesaler does not have any. Discussed Kathy profile and vicoden patients similar to her profile as good candidates.
PPLPMDL0020000001	Akron	OH	44312	4/7/2014	Discussed patients he currently has on Butrans coming from Norco and Percocet. Dr talked about a 40 year old female patient on Butrans 10mg who was experiencing a mild rash due to Butrans. Dr said he probably would not have brought it up but felt inclined. Discussed patient toys for Butrans, Kathy and Scott profiles and insight about tramadol. I asked when he has a handful of patients that he knows are motivated and legitimate to initiate Butrans when they are faced with a decision to make for the patient to titrate the IR, move to another IR, or use another option like Butrans. Dr agreed and said ok.
PPLPMDL0020000001	akron	OH	44333	4/7/2014	Discussed his use of Butrans and his most recent patient he started on Butrans who had buckeye and was denied. I told dr that I know he tried it again for a Caresource patient and what the deal is. Dr said he can't remember but is seeing more Molina managed Medicaid. I discussed specific patient type selection and discussed how he needs to properly identify patients for Butrans and OxyContin. I told him he needs to identify motivated patients who he trusts and thinks they are in legitimate pain. Dr agreed and said that's its tough because he said that he is trying to not write a lot of opioids because he's not a pain mane meant dr. I agreed and said maybe when he knows he's going to refer to pain management to write Butrans or OxyContin as the discharge product. Dr said its a good idea. I told him to focus on patients meeting his criteria for opioids and also already on IR oxycodone.
PPLPMDL0020000001	Garfield Hts	OH	44125	4/7/2014	Quick OxyContin reminder, Q12h, 7 tablet strengths and formulary grid, Said Ok, nothing new learned
PPLPMDL0020000001	Brooklyn	OH	44144	4/7/2014	Reviewed OxyContin Q12h, 7 tablet strengths along with Butrans for those Tramadol failures requiring around the clock analgesia, Said Ok, will consider.
PPLPMDL0020000001	Brooklyn	OH	44144	4/7/2014	Quick review of OxyContin Q12h, 7 tablet strengths along with Butrans for those patients requiring around the clock analgesia, Said Ok and rarely prescribes any narcotics
PPLPMDL0020000001	Akron	OH	44312	4/7/2014	Discussion about his existing patients who are currently on tramadol or hydrocodone who have continued to be refilled on them month after month. Reviewed Butrans 7 day schedule 3 opioid that is suited for those patients needing a dose adjustment. Discussed Kathy profile and asked him if it makes sense to use it and if he has any reservations in using it? Dr said he does not and them reviewed the AE profile from the opioid experience trial. I asked dr if there is anything that stands out that would prevent him from using it? Dr said nothing that he wouldn't expect from an opioid. I asked dr to try it first in the right patients and gain some clinical experience. Dr
PPLPMDL0020000001	Akron	OH	44312	4/7/2014	Discussed OxyContin but led with insight on oxycodone. I told dr that the reason I'm telling him this is because there is a big problem with patients being treated for around the clock pain on IR opioids and I want him to take patients who are still in pain on Percocet and convert them to OxyContin. Showed him he conversion scale from the MVA and dr said that most of his orients are addicted and will not switch because its the stigma about OxyContin that prevents him from using it. I asked him if its his stigma or his patients? Dr said its his. I told him he's going to need to get over that and asked him if he has any patients that he can treat that are motivated to get their pain under control? Dr said maybe a handful. I told dr lets start there and move from there. Dr said ok. Discussed Butrans dosing and patients types along w when patients may be appropriate.
PPLPMDL0020000001	Westlake	OH	44145	4/10/2014	Discussed who is the appropriate patient using the Pam and Scott profile. After reviewed I asked where he thought he would like to try Butrans this week? Dr said depends on managed care and if he will even see a patient like Pam or Scott. I asked if he had any concerns with Butrans in these patients and he said no. Reviewed dosing, also covered OxyContin and its dosing. Focused on the core visual aid where it demonstrates the Percocet and OxyContin dosing, dr said he felt more comfortable writing schedule 3 like Butrans over OxyContin. I asked why. He said the name OxyContin. I asked when the last person asked for OxyContin. By name. He said nothing.
PPLPMDL0020000001	Westlake	OH	44145	4/10/2014	Reviewed the visual aid regarding abuse deterrent.
PPLPMDL0020000001	Westlake	OH	44145	4/10/2014	Asked the doctor when was the last time he converted some from Percocet to OxyContin? He said it's been a while. I said if you had someone being dosed on 2 or three a day for an extended period of time. at what point do you think about a different delivery system with the same molecule. He said he doesn't have many chronic pain patients.
PPLPMDL0020000001	Westlake	OH	44145	4/10/2014	Dr said he thinks Butrans should be used more by primary care drs. We reviewed Pam he said he doesn't have many chronic pain patients. Reviewed the primary care insight....and went to the OxyContin page showing the conversion.
PPLPMDL0020000001	Westlake	OH	44145	4/10/2014	Reviewed the FDA snit number 16 and showed the main core visual aid header where it states the information. Told him that I only wanted to focus on the patients currently being treated with an opioid and those that are dosed twice a day with short acting opioids. Dr said right away he has them, I said it was not appropriate for the products I promoted to be used prn or acutely! reviewing the limitations. But the question is at what point does the patient coming back ask for more medication ...wanted to move from 2 pills a day to 3 pills a day. Why couldn't a different delivery system be then presented to the patient at that point. Dr said it could. Reviewed how to start Butrans, also worked in OxyContin and reviewed the scheduling of each products. I asked the doctor if his patients on med d maybe in the nursing home, might be a place to try Butrans if appropriate. He said maybe.
PPLPMDL0020000001	Uniontown	OH	44685	4/10/2014	Reviewed Safety data like renal,hepatic,elderly populations. Also covered supplementation. Dr said they refer to dr, kabbarra and that they want to deal with less pain patients. We talked about those patients he is referring. Dr said the problem is the patients want to come back to him and be treated. Dr said dr kabbarra mentioned Butrans to him before. I asked why he hasn't tried it. He said he wasn't sure about it cause he doesn't have experience with it. Reviewed managed care last.
PPLPMDL0020000001	Valley View	OH	44125	4/10/2014	I asked dr what IR opioids she sees most of in the practice? Dr said probably Percocet. I asked her what she does when her patients on Percocet want more? Dr said she is a minimalist when it comes to opioid prescribing. I told her there is nothing wrong with that and wither Butrans IR OxyContin can be great for her philosophy. I asked her what she does when a patient on any IR opioid comes in for a follow up and says they need more IR opioid? Dr said she doesn't want to give it to them because its too many pills. I asked her if the lowest effective dose is something she believes in? She said it is. I asked her how multiple pills of an IR opioid for treating around the clock pain is helpful? Dr said some of the pain she sees is acute. I told her to take out acute and prn pain and focus on patients with around the clock pain. Dr said ok and that makes sense. I explained Scott and Kathy profiles and asked her if she had patients like those? Dr said she doesn't have her own patients yet so she needs to speak to the patients dr before she changes medicines. I asked her if she does that currently and she said yes. I asked her if Butrans makes sense for what we discussed and she said it does now and thanks. Reviewed OxyContin information and dosing guide with conversions. I asked her to use OxyContin for those Percocet
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/10/2014	Discussed OxyContin/Butrans utilization by clinicians, dosing and opportunity to recommend to prescribers. Aaron said he will continue to recommend/advise for appropriate patients
PPLPMDL0020000001	Westlake	OH	44011	4/10/2014	Spoke with Lisa e pharmacy tech about the situation with Higley and Sassano. Lisa looked up cash price and said even if the insurance wasn't ran it he only dose that would have been over \$400 would be the 20mcg which is \$500. Lisa asked about copy cards and I gave her new cards. Discussed he appropriate patients with Scott and Kathy. Lisa said they have all doses and told her about the 15mcg back order. Discussed OxyContin dosing and Percocet conversions and copy description.
PPLPMDL0020000001	CLEVELAND	OH	44195	4/10/2014	Open with Insight regarding the FDA. Dr said he doesn't write chronic pain medications due to his speciality of being a cardiologist. Reviewed some of the safety details from the fpi. Reviewed dosing of both products and reminded on formulary.
PPLPMDL0020000001	Cleveland	OH	44195	4/10/2014	Reviewed OxyContin savings cards with Tech, Troy was on vacation, Learned they have a PA team (2) that handle PA's for patients.Nothing else learned
PPLPMDL0020000001	Cleveland	OH	44195	4/10/2014	Visited CCF Taussig, Left OxyContin/Butrans Formulary grid info for Dr's(Budd,Pelley,Gutgsell,Garcia,Faiman, Estfan,Advani, Sobeks, Moore)



PPLPMDL0020000001	Cleveland	OH	44195	4/10/2014	Visited Oncology/ CCF Taussig, Left OxyContin/Butrans Formulary grid info for Dr's(Budd,Pelley,Guttsell,Garcia,Faiman, Estfan,Advani, Sobecks, Moore)
PPLPMDL0020000001	Westlake	OH	44145	4/10/2014	Asked if he ever calls the dr and suggest a medication change to question how a script is written? He said yes but not often. Reviewed the dosing of OxyContin and Butrans. Showed the conversion chart of OxyContin and the starting dose of Butrans. Reviewed FDA insight and pharmacist said they are good about checking the new patients who come in to their store.
PPLPMDL0020000001	Parma	OH	44129	4/10/2014	I spoke with Myra regarding the Butrans Patient Experience Kit. The territory is currently vacant. I went over. The kits with her and explained the purpose was to help her gain information about her patients pain experience in-between visits. Explained the program to Dawn the office manager as. Well as staff. Also went over updates to the program. Myra said patients want to keep their pills. We discussed initiating Butrans after tramadol. She agreed. I left her a kit and 2 packs of savings cards
PPLPMDL0020000001	Westlake	OH	44145	4/10/2014	Gave the FDA insight thru the window and asked hi. If thought this technology in OxyContin will be important to primary care doctors. He said it should but he doesn't think so. I told him that I was trying for the primary care to understand that by dosing short acting products several times a day they could be using an extended release delivery system. I asked him why this concept was so hard to adapt to. He said habits don't break easily. I asked how ling it took him to try Butrans. Dr said not very long. I said why did you try it right away....but others are won't. He said they don't see the value in changing their habit.
PPLPMDL0020000001	Westlake	OH	44145	4/10/2014	Spoke to Daniele the rn. Reviewed FDA insight and asked if I could meet with the doctor to provide her with some information. I left her some OxyContin and Butrans literature and my card.
PPLPMDL0020000001	Akron	OH	44310	4/10/2014	I asked dr when he decides to move to an ER opioid? Dr said it depends on the patient? I asked him to give me an example of when he would? Dr said when he knows the pain is chronic. I told him that's when he needs to use a product like OxyContin. Dr said ok. I asked him if he has existing patients on Percocet and dr said some. I asked him what the downside is to converting those patients to OxyContin when they need a dose adjustment? Dr said it makes sense. I told him that's good to hear and I need him to make the decision to take a patient on Percocet to the q13 oxycodone. Dr said ok. I reminded him about Butrans and it use for patients already on tramadol or vicoden who also may need dose adjustments. Nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44113	4/10/2014	Butrans reminder, no new information learned.
PPLPMDL0020000001	Akron	OH	44333	4/10/2014	Led with insights on tramadol and Hydrocodone. I asked dr what she sees the most of from IR opioids in the practice? Dana said she sees a, it of vicoden and Percocet. Dana said that she wrote for Butrans twice last week and one was a UHC Community plan which was denuded. I told her it should not have been because that plan requires a PA and not denied. Dana said she does remember seeing a PA she thinks and will put the pa through. I told her about the PurdueHCP.com website to check formulary. I asked wdana where most of her patients on Butrans are coming from; Medicare or non Medicare? Dana said she doesn't think her Medicare patients are good for Butrans because they don't like change. I told her about the age range of patients in the opioids experienced trial and told her that many of them might appreciate a once a week patch. Dana said it makes sense. I asked her for continued business and to write it for some Medicare patients. Dana said ok. Discussed OxyContin for her Percocet patients who need dose adjustments and reviewed the Maggie profile. Dana said she does write OxyContin and that it does work for that paring type. Nothing else learned
PPLPMDL0020000001	Westlake	OH	44145	4/10/2014	Dr said his fellow doctors don't want to write opioids any more and they are told to write only for a few weeks and refer out to dr kabbarra. I asked who is telling him this. Dr said the people that make the laws. Reviewed the med 80 guideline, also discussed new FDA insight 16. Talked about treating Butrans and OxyContin with patients you already have on opioids not new patients and the patients dr believes. Dr talked about his wife and her chronic back pain. He asked about taking Butrans with heart conditions and we reviewed the section of the package insert. Asked him to think Butrans for the Pam profile using new usual aid and asked him if he thought this might be an option. He said maybe. We reviewed dosing, supplemental, coupons with Butrans and OxyContin. Asked about med d plans, covered that topic.
PPLPMDL0020000001	Fair/wn	OH	44333	4/10/2014	Short OxyContin call ever lunch. Dr said he's two hours behind and said he has seen a difference in the last month with his ability to get OxyContin covered. I told him I'm glad to hear that and asked why? Dr said he's not sure but has not had patient call back. I reviewed a few things from the main visaid including OxyContin 10mg page and conversions. Dr said I sold know that he tries to get his patients on IR opioids as soon as possible and finds that OxyContin is ideal for that purpose. I asked him when he gets new patients which IR opioid he sees most? Dr said Percocet and that's why it makes sense to use OxyContin. Told dr I'm glad it provides the efficacy he is looking for. Reviewed the adverse events including respiratory depression. I asked dr for continued use and reviewed managed care. I asked if he has patients on Hydrocodone who complain of being in pain? Dr said a few. I reviewed the Kathy profile and asked him if it makes sense to use Butrans before going to another IR opioid or titrating hydrocodone? Dr said he likes Butrans and tries to use it as much as he can.
PPLPMDL0020000001	Mayfield Heights	OH	44124	4/10/2014	Both dr Chteingardt & dr Anna left office already. Spoke with med ast at window. Discussed & showed OxyContin savings sell sheet; she states they have been handing out cards. Med ast wanted to be sure patients pay no more than \$30 out of pocket. I stated they pay first \$30 and get \$70 off total co pay, for any of the 7 strengths. She was satisfied with response. Discussed opioid naive dose 10 mg; first ER opioid to include abuse deterrent properties in FPI. Discussed Butrans as transdermal option for around the clock pain. Left protect your practice brochure.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/10/2014	Dr Higley told me that he has had three patients in the last month who he gave a Butrans prescription for and was told that the price was \$400 or over. I asked dr if the patients were on federally funded program or commercial insurance? Dr said commercial insurance. I told dr that's very atypical and the possibility is that the patient either may not have met their ductatable or the insurance was never processed at the pharmacy. Dr said that's possible and makes sense. I gave dr new copy cards and maybe the cards they had were expired and not processed. I asked dr where he is using Butrans and he said for tramadol, vicoden and even Percocet failures. I asked dr if he would convert a Percocet patient to OxyContin? Dr said no. Dr said he will never write more than 90 pills of Percocet and if they ask for it he sends them to pain management. I asked if all the current patients he had on Percocet are doing well and not asking for more? Dr said they are doing well and are legit. I told dr that 21% of patients in Bup 3015 Butrans trial were taking oxycodone combinations. Dr said good to know because he's already using Butrans for those patients. I asked for continued use despite the few patients with large copays.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/10/2014	Discussed drs use of OxyContin for his patients already on IR oxycodone. I showed dr the conversion chart from Percocet and asked him what signals him to convert to OxyContin? Dr said he tries to do it as often as he can but insurance gets in the way. I asked him when and which plans get in the way? Dr said most of them. I asked him which products are they tending to ask to be written instead? Dr said it depends on the plan and said it can be MS Contin, methadone, ER Morohine. I asked if and when those fail does he write OxyContin? Dr said he does. I showed dr Pitt, Liz and Lida the PurdueHCP.com website and how it can help them find to formulary coverage, product information and printing copy cards. Liz and Lida thought it was great and said they will use it. I told dr Pitt that he may be missing opportunities for Butrans and explained the Kathy profile on hydrocodone. Dr said he understands it but probably won't use it.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/10/2014	Dr overheard my conversation with Higley and said that he wrote a Butrans recently for a patient failing vicoden and that patients also said it was going to be \$400 for Butrans. I explained to dr that must be a one off situation because its not typical. Explained insurance coverage, profiles and patients suited for Butrans. Dr said he will keep trying and thanked for updated cards. Nothing else learned.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/10/2014	Hallway call and told dr that OxyContin is oxycodone in a 12 hour delivery system and asked dr if he would us OxyContin of those patios of his already on oxycodone short acting? Dr said he does like writing for opioids. I asked what he does then? Dr sad he either doesn't take them or refers to pain management. I asked when he decides to refer and dr said he tris not to write either short or long acting opioids. Dr walked away. Nothing else
PPLPMDL0020000001	Berea	OH	44017	4/11/2014	Spoke to the dr regarding why she doesn't write schedule 2 products. She said she doesn't have the license to write them. Reviewed the FDA Insights and OxyContin detail aid page on the tiers. She said it was very important to her that companies try to do this. She said she has 1 writte. Any new Butrans. We reviewed the Pam profile and I asked her what was the down side to try it here if appropriate and if they were covered in med d plans with preferred coverage. She said no reason. Left her literature to review.
PPLPMDL0020000001	Westlake	OH	44145	4/11/2014	Spoke to Megan and Pam for a while on the changes to their office hours and locTions. We reviewed Butrans and the office staff said they would help me see the doctor if they can. They said the doctor hasn't written it in a while cause he does a lot of blocks and doesn't write as much opioids, I said not even for break through and she said yes some. I asked when was the last managed care problem with OxyContin....they couldn't think of one. We reviewed the FDA insight and managed care coverage.
PPLPMDL0020000001	Westlake	OH	44145	4/11/2014	I talked to the dr about what the FDA is talking about using the insight, I left it with I hope when it comes to treating appropriate patients with an extended release product this information comes to mind. And when I come back, we will talk about using Butrans in appropriate patients with med d coverage.
PPLPMDL0020000001	Cleveland	OH	44113	4/11/2014	Quick review of OxyContin every 12 hours, flexible dosing strengths along with Butrans for those patients requiring around the clock analgesia, Said Ok will consider for appropriate patients, Judy said she also review with Dr.
PPLPMDL0020000001	Cleveland	OH	44113	4/11/2014	Reviewed OxyContin every 12hr, 7 tablet strengths, savings cards along with Butrans for those patients requiring around the clock analgesia, Dr agreed and will consider for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44113	4/11/2014	Reviewed OxyContin every 12 hrs, savings cards along with Butrans for those patients requiring around the clock analgesia, Said Ok will continue to find appropriate patients
PPLPMDL0020000001	Cleveland	OH	44104	4/11/2014	Reviewed OxyContin every 12h, 7 tablet strengths said Ok will consider for appropriate patients, asked for that 1 patient with favorable formulary status (ie Med. Mutual) said he will consider. Also reminded of Butrans for those Tramadol failures requiring around the clock analgesia.
PPLPMDL0020000001	Cleveland	OH	44103	4/11/2014	Quick OxyContin reminder, every 12 hours, dosing strengths along with Butrans for those patients requiring around the clock analgesia, said Ok will continue to find appropriate patients
PPLPMDL0020000001	Westlake	OH	44145	4/11/2014	Dr was not in. Reviewed Butrans and OxyContin extended release options to the nurse.
PPLPMDL0020000001	Uniontown	OH	44685	4/11/2014	Quick hallway call and told him I had one question and one comment. I asked dr when it comes to his Percocet patients, when does he decide to move to an ER opioid? Dr said it depends on what he's treating them for and what the pain level is. Dr said he likes to go to OxyContin for those already on oxycodone and that it just makes sense unless the patient says no to OxyContin. I asked him if he gets many patients telling him no to OxyContin? DR said not many but some do even though he explains Percocet and OxyContin are the same thing but one is IR and one is ER. I told dr to pls focus on the IR oxycodone or Percocet for OxyContin and its. 1:1 ratio. Dr agreed and said ok. I told dr that Butrans is another ER opioid suited for those not to goal on their IR opioid like tramadol or vicoden. Dr said alright. Nothing else learned.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/11/2014	Discussing most recent formulary updates for Medicare D for Butrans with Terri and Gail and dr said things are continuing to go well with Butrans. I discussed new formulary update for Butrans with dr and he said he's glad to know coverage is getting better. I asked him if he is getting denials for it more than before? Dr said no because Glenn and his staff do a good job getting it approved. I asked him for continued use and asked if he is using it for patients that are Medicare D? Dr said he is along with patients much younger. I spoke to him about the average age of patients in the clinical trials. Nothing else learned. Discussed with Gail and Terri about using Purduehpc.com to print copy cards, check formulary coverage and access product information.
PPLPMDL0020000001	Akron	OH	44312	4/11/2014	Told dr that I haven't seen him in way too long and I need just a second in between patients to talk OxyContin and Butrans. Told him about insights on oxycodone and tramadol. I told him that with OxyContin, he should be using it for those patients already on oxycodone who need a dose adjustment. I showed dr the visaid page about reassessing and asked if he does that? Dr said kind of but depends on time how thorough he is. I stressed the importance of it and asked him to initiate on 10mg and to titrate every 1-2 days if necessary. Told him that the ability to titrate with Butrans is every 3 days and to take out patient types like acute and prn pain and to focus on every day pain patients like Scott and reviewed the profile. I asked if he would reassess those tramadol patients for Butrans? DR said he will. I reviewed insurance coverage and new Medicare plan coverage. Dr said that's good because that's where he has ran into trouble.
PPLPMDL0020000001	Akron	OH	44319	4/11/2014	Led with the oxycontin insight and asked him when he decides to move to an ER opioid for patients on Percocet? Dr said it depends on the patient. I reviewed the Maggie profile and asked him if it makes sense to start OxyContin? Dr said it does and he knows he needs to convert come patients. I told him I know there is a, lot of opportunity to write OxyContin for those patients when they need a dose adjustment or complain of being in pain. Dr said ok. I told him to identify those patients and told him he needs to be stern with patients that continue to want their IR opioid for around the clock pain. Reminded him about Butrans patient types and why and when to initiate and titrate. Dr said ok. Gerard dr may be retiring in June?
PPLPMDL0020000001	Cleveland	OH	44113	4/11/2014	Reviewed with Aurora OxyContin every 12 hours along with Butrans for those patients requiring around the clock analgesia that are failing on present therapy. Said Ok will remind Dr.
PPLPMDL0020000001	Cleveland	OH	44113	4/11/2014	Visited Pain mgmnt and Ortho dept Reviewed OxyContin every 12h along with Butrans for those patients requiring around the clock analgesia
PPLPMDL0020000001	Lyndhurst	OH	44124	4/11/2014	Met with Rhonda at front. Dr in doing injections. Impossible to get him up front. Discussed Butrans patient guide tear sheets; hand out before each Butrans patient leaves office. Discussed, left updated formulary grid, Med D updates as of 4/11/14. OxyContin, patients understand "clock time" better, a recent survey tells us, take every 12 hours would be better for patients to understand. Updated on OxyContin recent formulary status, left new grid. Left 4 spine posters; med staff really liked. Does NOT take OTC samples. NO LUNCHES yet approved by doctor.
PPLPMDL0020000001					



PPLPMDL0020000001	Cleveland	OH	44113	4/11/2014	Reviewed with Justin OxyContin Q12h along with Butrans for those patients requiring around the clock analgesia who are failing on present therapy. Pharmacy will be closing and CCF will be taking over
PPLPMDL0020000001	Lyndhurst	OH	44124	4/11/2014	Dr Reed on vacation. Met with office mgr at front window. Discussed writing OxyContin every 12 hrs vs q 12 h, because a recent study suggested that "clock time" is easier for patients to understand. Discussed savings card for OxyContin and how it can be used every 14 days with 14-day RX. Discussed Butrans formulary coverage, and Med D wins as of 4/1/14. Secured another lunch in June on Monday when Dr. Reed will be in.
PPLPMDL0020000001	Westlake	OH	44145	4/11/2014	Discussed the FDA insight and asked if he was aware about OxyContin and referred to visual aid. He told me they were busy to come back. So I warped it up and handed them a Pam profile on Butrans to review.
PPLPMDL0020000001	Lyndhurst	OH	44124	4/11/2014	While waiting for Dr Roda; found out she's only HCP in today. Dr Reed on vacation. Spoke with office mgr at front; she's been on hold with Express Scripts for over 48 mts for prior auth. Says ever since Medco merged with Express Scripts she's having really difficult time. Empathized with her and responded I hear that in all my offices. While on hold she was able to confirm my May lunch and schedule me for Monday June 9th. At window, quick: OxyContin write every 12 hours on rx, which we found out is easier for patients to understand in recent study; Butrans 3 recent Med D wins as of 4/1/14.
PPLPMDL0020000001	Cleveland	OH	44113	4/11/2014	Quick OxyContin every 12 hours dosing reminder, Butrans for those patients requiring around the clock. Said Ok nothing new learned
PPLPMDL0020000001	Akron	OH	44312	4/11/2014	Dr asked why I was back so soon? I told him that I felt it was important to discuss the stigma thing he brought up on the last call. I asked him if he really has a problem with the name OxyContin? Dr said he does. I asked why and if its the oxy or the Contin he has a problem with? Dr said that was a good explanation of it. Dr said he just doesn't want to be known as one who prescribes lots of OxyContin. I asked him how its different to refill and prescribe Percocet? Dr said its not other than the name. I told him to focus on that handful of patients we discussed that are motivated to change or convert to OxyContin. Dr said ok. Reviewed Butrans patient types and asked him to identify patients.<font color=blue><b>CHUDAKOB's query on 05/06/2015</b></font>Cliff the above call notes makes reference to "if it's the Oxy or the Contin?" Please make sure to not use this language in your promotion as all promotional messaging has to come from the home office and be approved through legal. In a separate E-Mail I will be sending you a memo that references this. Please acknowledge in your response to this query that you have read and understand the memo.<font color=green><b>REICHCL's response on 05/07/2015</b></font><b>E-Mail I will be sending you a memo that references this. Please acknowledge in your response to this query that you have read and understand the memo.</b>Our ability to use the above language as it pertains to Oxycontin is not approved.<font color=blue><b>CHUDAKOB added notes on 05/22/2015</b></font>Thank you Cliff.
PPLPMDL0020000001	Brooklyn	OH	44144	4/14/2014	Reviewed OxyContin and Butrans savings cards with Rhonda Tech. Will relay info to Julie Rph
PPLPMDL0020000001	Lyndhurst	OH	44124	4/14/2014	Lunch. Percocet insight # 11. 35% of IR oxycodone scripts including Percocet, associated with length of therapy lasting 90 days or longer. Of those, average # of days until patient converted to ER opioid was 264. Is is fair to say you are guilty of this as well and may have missed a few opportunities to touch back with patient and discuss conversion to ER opioid such as OxyContin. Yes, that's fair, so when you go to fill your next Percocet; consider OxyContin every 12 hours discussed. Opioid naive dose, and steady state discussed. Butrans Tramadol insight #12. 39% if tramadol associated with therapy 90 days or longer; of those average # of days until conversion to ER opioid was day 242. Missed opportunities discussed, conversion to Butrans 10 mcg hr discussed. Dr says Butrans requires a lot of prior auths. Discussed different plans require different measures including prior auths. Also discussed as of 4/1/14 Med D wins for Butrans. He says just keep reminding him; quick reminder BWC will pay for Butrans.
PPLPMDL0020000001	Westlake	OH	44145	4/14/2014	Spoke to the two nurses regarding the FDA insight and highlighted the core visual aid of that section. Reviewed the updated managed care grid and asked them what they were doing different to treat pain this year. They said dr was referring more chronic patients out. I said why, she said she doesn't want to treat them anymore be she is concerned about the dea. The dr said she had a patient that tested negative on a drug screen and that was the turning point. Dr agreed that she is not referring all her pain patients out. I talked about the Scott patient and how she was treating this type of patient under 300 mg of Tramadol Nd the patient then states they aren't controlled any longer she said she will treat a patient like this. Discussed managed care ressource and other commercially covered plans that Butrans has coverage. Discussed changing up the delivery system to give them atc pain control, with 4 patches a month. I asked to follow up th her a few weeks, she said yes. So the nurses told me what day would be a good day to return with a follow up.
PPLPMDL0020000001	Brooklyn	OH	44144	4/14/2014	Reminded of OxyContin 7 tablet strengths, every 12 hours dosing along with Butrans for those patients requiring around the clock analgesia that are failing on Tramadol. Said ok will consider for appropriate patients,nothing else learned
PPLPMDL0020000001	Lyndhurst	OH	44124	4/14/2014	Sara on vacation. Lunch. Total office call. Asked group if there's 1 or 2 MAs that work with Sara on regular basis; answer is no; whoever is available to help with assist her. Discussed my products, indications, appropriate patients for each. Opioid naive dose for Butrans of 5 mcg hr, 4 strengths, 20 mcg hr max dose. Discussed OxyContin starting/opioid naive dose 10 mg every 12 hours. Suggested schedule 8 am and 8 pm. Pills are not scored, cannot be split; discussed elderly, debilitated, females using FPI for dosing recommendations and 15% higher concentration in elderly for oxycodone and 25% higher concentration of oxycodone in females. Steady state of OxyContin discussed; section 12.2 comparing 10, 20, 30 mg OxyContin to placebo discussed. Left 3 PAP spine posters for all 3 HCPs BACK IN OFFICE 4/15/15.
PPLPMDL0020000001	Cleveland	OH	44144	4/14/2014	Reminded of OxyContin every 12 hours, 7 tablet strengths along with Butrans for those Patients requiring around the clock analgesia. said Ok will consider for appropriate patients. Also reminded of formulary status
PPLPMDL0020000001	Westlake	OH	44145	4/14/2014	Spoke to Laura the ma about Butrans and OxyContin. Discussed updated managed care and description of what Butrans is, left her the Scott profile. She didn't have time to talk much, but scheduled me a lunch.
PPLPMDL0020000001	Westlake	OH	44145	4/14/2014	Discussed the pharmacy article and asked him what was important to tell the patients when dispensing opioid. He said they check Ors. We reviewed dosing of OxyContin and Butrans. Also the FDA insight and showed our core visual aid.
PPLPMDL0020000001	Westlake	OH	44145	4/14/2014	Spoke the the nurse, reviewed Butrans and OxyContin indication and dosing. Dr came to window and said hello, introduced myself and attempted a Tramadol insight. She cut me off and said I should make apt to discuss it with her.
PPLPMDL0020000001	Mayfield Heights	OH	44124	4/14/2014	Met with med asst at front window. Discussed my ER opioid products for patients who need around the clock analgesia for extended period of time. She states dr rarely writes either of my products. She states he is more interventional medicine, physical therapy, etc. She will however leave him information on both. ** Visit him in suite 214 ONLY from now on
PPLPMDL0020000001	Westlake	OH	44145	4/14/2014	Dr was not in today, but usually is. Spoke to Pam his nurse. And reviewed managed care for OxyContin and Butrans. Gave her the FDA insight and reminded her of our labeling showed the OxyContin detail aid. Reviewed. Reviewed Butrans managed care with ressource and med d plans. Also discussed the Butrans experienced program. Discussed dosing and strength.
PPLPMDL0020000001	Mayfield Heights	OH	44124	4/14/2014	Quick hallway. Updated Butrans Med D wins as of 4/1/14. Updated OxyContin \$70 card; patients can use every 14 days with 14-day script. Reminder 4/30/14 Moufawad program.
PPLPMDL0020000001	Westlake	OH	44145	4/14/2014	Spike to mrs. Seikel the office manager regarding managed care for Butrans and OxyContin. She said she doesn't make any of the decisions on the products. I asked her what she does, she said she takes calls from patients and the insurance companies and they all work on prior authorizations. I asked if it took up a lot of her day and she said yes, she is always on the phone. Talked about out med d coverage on Butrans.
PPLPMDL0020000001	Cleveland	OH	44195	4/14/2014	Visited Ortho. Dr.Rosneck,Evans,Anderson, Fowler left OxyContin and Butrans Initiation/Titration info, Requested appts
PPLPMDL0020000001	Akron	OH	44313	4/14/2014	Spoke with technician Amy. I reviewed Butrans and OxyContin dosing,scheduling, patient types and titration. I asked her if they have Butrans 15mcg stocked? Amy looked and said that they currently on have the 10mcg dose but usually have the 5mcg as well. She said she would order it. I told her about the back order of the 15mcg dose. Amy said she has all doses of OxyContin and tend to dispense more of the 10,20 and 40mg.
PPLPMDL0020000001	Fairlawn	OH	44333	4/14/2014	Caught dr in hallway and dr remembered me from years back when I called on the office. I told dr I'm back in akron with Purdue and in pain management. Dr said OxyContin? I said that's correct along with Butrans. Dr said he isn't familiar with it. Gave him initiation and titration guide and gave him a quick rundown of the product with key selling messages. I asked if he's writing OxyContin and when? Dr said not much but said he's interested in taking to me and to set up a lunch. Lunch scheduled for June as earliest availability.<font color=blue><b>CHUDAKOB added notes on 04/30/2014</b></font>Nice job going into this office. Looks like it might pay off.
PPLPMDL0020000001	Euclid	OH	44117	4/14/2014	Discussed low dose OxyContin, and considering in opioid naive. Discussed section 12.2 of FPI; presented data comparing OxyContin 10, 20 and 30 mg compared to placebo. Dr wasn't aware of this data, was surprised. Discussed starting opioid naive dose for debilitated non opioid tolerant, elderly & opioid naive females & linking to data I shared. OxyContin pills are not scored, suggested starting dose for debilitated elderly is 1/2 to 1/3 starting dose; that's where 10 mg comes in. Ability to titrate if needed to next dose of 15 mg in 1-2 days. Discussed ability for commercial, cash patients @ their Painesville location to use \$70 card every 14 days with 14-day script. Butrans after Tramadol. BWC reminder.
PPLPMDL0020000001	Akron	OH	44333	4/14/2014	Quick hello in the hallway of his office while talking to Marsha Fox about purduehcp.com and how its a great resource for her and her patients. Dr walked up and said it wounds like something they could use. I told him they can print out copy cards for Butrans and OxyContin and check formulary status. I asked dr what he does when a patient needs more analgesia beyond the Butrans 10mcg? Dr said everyone's different. I asked him if he would ever titrate beyond the 10mcg? Dr said sometimes. I told him about titration in Bup 3015 and use of NSAIDs for breakthrough pain. Dr said ok. I reminded him to use OxyContin for patients needing dose adjustments on Percocet and showed him the conversions.
PPLPMDL0020000001	Brooklyn	OH	44144	4/14/2014	Quick OxyContin reminder as he was leaving 7 tablet strengths every 12hours along with Butrans for those Tramadol failures. Said Ok
PPLPMDL0020000001	Westlake	OH	44145	4/14/2014	Reviewed the baby boomer insight with the dr and he made a comment about the number being large. Discussed the Profile Pam and dr said he sees many over 65 and in the nursing homes. I asked if he thought Butrans or OxyContin might be Appropriate for some those patient in chronic pain and currently being dosed atc with short acting products. Dr said maybe, he asked about managed care. Which I reviewed. Also discussed abuse potential for both products. Reviewed dosing of both product.
PPLPMDL0020000001	Lyndhurst	OH	44124	4/14/2014	Lunch. Revisited Tramadol insight #12. 39% of IR Tramadol scripts associated with therapy 90 days or longer; of those scripts lasting 90 days/longer; average # of days patient converted to ER opioid was day 242. Dr says thats a product that's affordable for patients and is good option for elderly. I shared with dr 4/1/14 Med D wins. He stated now that's what i needed from you - better Med D coverage. He will keep those 3 plans in mind from now on. Discussed re assessing patients,steady state and 72 hour steady state. Discussed supplemental analgesia used in Butrans trials. OxyContin, discussed low dose for a few trusted patients. Discussed 10 mg opioid naive dose, steady state, START principles. Also discussed START principles with his ma Helen who's been with him over 28 yrs.
PPLPMDL0020000001	Brooklyn	OH	44144	4/14/2014	Window call. Reminded of OxyContin every 12hours, 7 tablet strengths along with Butrans for those Patients who require around the analgesia, Said Ok, nothing new learned.
PPLPMDL0020000001	Mayfield Hts	OH	44124	4/14/2014	Asked dr not to abandon Butrans, as he increases his OxyContin use. Reminded him why he likes Butrans: efficacy, 4 strengths, ability to call in with refills, trial, savings cards, patient education with guides/tear sheets. OxyContin, opioid naive/start dose of 10 mg every 12 hours discussed. Reminder savings card and ability for patients to use every 14 days with 14-day script. He admits he forgot about cards and asked for pack right there. He directed medical asst where to place cards so he can remember location.
PPLPMDL0020000001	Westlake	OH	44145	4/14/2014	Gave dr the FDA Insight and showed him the OxyContin visual aid on the label change. I asked if the I formation was reason enough to write OxyContin for those needing every 12hour dosing for an extended period time. He's said he has been trying to write less chronic opioid medications. I said ok but is the information you just heard important to you? He said yes. I said great. I told him I was leaving him with a patient profile named Pam, next time I'm back we can talk about your experiences using butrNs in the med d patients who are appropriate for Butrans. Dr said he can tell me right. Now the answer is zero. I said zero patients that are over 65? He said no he has lots of those, he meant on Butrans. I asked what was is hesitation in this population. He said nothing. I said I don't understand why you would dose someone with a short acting products atc in the first place. He said cause the patients might not take it atc. I said do you know that for a fact? He said no, and I said that just left the door open for Butrans you realize. I reviewed Butrans dosing and I asked how the dr felt about managing his patients dosing on Butrans. Dr said aren't they weekly patches. I said yes.
PPLPMDL0020000001	Fairlawn	OH	44333	4/14/2014	Asked to see Amanda. Oyakawa's nurse. I discussed the fact that I needed to speak with her and dr about a few important items. Amanda took me back into his office and I discussed the oxycodone insight and told them how bad the problem is with patients treating themselves for around the clock pain with IR opioids. I told dr the reason why I was telling them this is because he can help reverse it by converting patients on Percocet to q12 OxyContin. Dr said he understands and he's doing everything he can. I told dr that his belief that he is committing himself and his patients to long term opioid therapy by writing an ER opioid but said that when IR opioids are being refilled month after month its the same thing! Dr said he knows and said he does try to get patients on ER opioids. I asked for continued use of OxyContin and that Butrans is suited for those continuing to be refilled on tramadol or vicoden. Discussed the use of purduehcp.com to Amanda.<font color=blue><b>CHUDAKOB's query on 04/30/2014</b></font>Cliff, it may sound picky, but, but the word bad is a comparative word. I appreciate your passion for this, be we must be very careful on what we say.<font color=green><b>REICHCL's response on 05/08/2014</b></font>Ok<font color=blue><b>CHUDAKOB closed the query on 05/14/2014</b></font>

PPLPMDL0020000001	Cleveland	OH	44124	4/14/2014	Lunch. Non core, attended my core lunch. Tramadol insight. Dr was surprised at this statistic, however she doesn't want responsibility of managing pain patients; and long acting opioids. Asked her to consider Butrans after prn Tramadol or as first opioid, when patient needs around the clock analgesia. Discussed low dose OxyContin. Opioid naive dose of 10 mg. Discussed, using OxyContin FPI for support: elderly, elderly debilitated and females. Steady state discussed. START principles, using core Vis Aid. Insight # 17: questionnaire completed by 299 patients, outpatient pain mgt clinic, found large proportion of patients don't comprehend commonly used RX instructions. In this study, more patients understood RX instruction every 12 hours vs. bid or twice a day. So with OxyContin, product would be written OxyContin every 12 hours.
PPLPMDL0020000001	Cleveland	OH	44125	4/14/2014	Reviewed OxyContin 7 tablet strengths every 12 hour dosing along with Butrans for those patients requiring around the clock analgesia, Refers to pain mgmnt, asked for those referred to PM, Why not Butrans? Nothing new learned
PPLPMDL0020000001	Stow	OH	44224	4/14/2014	Good discussion over lunch about Butrans and OxyContin. I asked Sandra since we lost spoke how its going getting patients off their IR opioids and using all long acting. Sandra said things are going ok and there is some pushback from patients but she said they expected that of course. I asked Sandra what the limit is on prn or IR opioids? Sandra said 3 or more they will be tapering them off and going with long acting. I asked her how she decides on which ER opioid to use? She said it depends on the patient because most of them have tried and failed multiple ER opioids in the past. I told her that Butrans is right up her alley now more than ever because of how they are streamlining their patients medicines. Sandra said she agrees but cost may prevent her from using it more. She said that she has had a couple of denials recently on commercial plans that she didn't expect and she couldn't remember what they were. She asked me to speak with Marci which I did and she said she will need to pull up the info and come back later this week. I told Sandra about patients types Scott and Kathy and reviewed Bup 3015. I asked her if her patients need anything. For breakthrough pain and she said most do. I emphasized that fact that in that trial patients were only given APAP IR ibuprofen and explained the percentage of patients that completed the 12 weeks. Sandra said that that's big and will remember. Reviewed new Medicare coverage and asked about now thinking OxyContin?
PPLPMDL0020000001	Akron	OH	44333	4/14/2014	Reintroduced myself to dr and dr explained to me he is retiring in two weeks. Dr said that they couldn't even get a doctor to replace him even with multiple candidates. No one wanted it. Dr said they are bringing in. A nurse practitioner to fill his spot. Dr asked what I was talking to him about and discussed OxyContin and Butrans at the window. Dr said he has used OxyContin in the last but never had the patients for it. Dr asked if I discuss my products with the pain specialists? I told him I do and often. Dr said good because he knows OxyContin is a product at works well in the right patient. I asked him what that is for him and he said all day pain up to cancer pain. I told him that's good to hear and reviewed moderate to severe pain. Introduced Butrans and hit key selling messages. Dr said to set up a lunch with the others to introduce Butrans.
PPLPMDL0020000001	Akron	OH	44320	4/14/2014	Met Casey the drs medical assistant. I asked her how familiar she is with Butrans and OxyContin. She admitted she has not seen Butrans but knows a little about OxyContin. I introduced Butrans to her reviewing all key selling points. Discussed on OxyContin and asked her to please provide the doctor with information.
PPLPMDL0020000001	Stow	OH	44224	4/14/2014	Discussed insight about tramadol and hydrocodone and told him the reason why I'm saying that is because the practice he is in is taking a great stand concerning the welfare of their patients by reducing all the IR opioids and looking to convert to ER opioids. Dr said they are on a good path and said its been difficult because there has been a lot of pushback and patients have already failed so many ER opioids in the past. I asked him how he is tapering a patient for example of Norco 5/325 6 times a day? Dr said he will reduce by 25% every 5 days and after the first week or two will add the ER opioid. I asked him how he decides and he said trial and error. I told him Butrans is right up his alley and explained the hydrocodone patient profile and asked him if he will write more Butrans? Dr said he agrees and will try. Discussed new Medicare plans and Bup 3015 inclusion and exclusion criteria. Discussed the opportunity for OxyContin with the new office policy. Dr said its not out of the question. I asked if it makes sense to convert patients already on IR oxycodone or Percocet who need a dose adjustment? Dr said it does and he would rather go to OxyContin than Opana because of the abuse deterrent properties. I gave him the information on it and told him to review.<font color=blue><b>CHUDAKOB's query on 04/30/2014</b></font>Cliff, telling the Dr. That he is taking a great stand concerning the welfare of his patients by converting to ER opioids is not a proven statement, and in fact may not be true given the limitations of use section in the new FPI. Please make sure you are refraining from these type of statements, as they cannot be proven.<font color=green><b>REICHL's response on 05/08/2014</b></font>Ok<font color=blue><b>CHUDAKOB
PPLPMDL0020000001	University Hts	OH	44118	4/15/2014	Window call Reviewed OxyContin 7 tablet strengths every 12 hours dosing along with Butrans for those patients requiring around the clock analgesia, Said Ok will consider for appropriate patients, Said to stop back later in week to book lunch apt<b>FROM IPAD</b><b>Reviewed OxyContin 7 tablet strengths every 12 hours along with Butrans for those patients who require around the clock analgesia. said Ok will consider for appropriate patients , no new info learned. Asked to stop back to book apt
PPLPMDL0020000001	Cleveland Hts	OH	44118	4/15/2014	Reviewed OxyContin/Butrans patient info and position with Tech, no new info learned
PPLPMDL0020000001	Barberton	OH	44203	4/15/2014	Gave dr the Butrans spine chart and the dr mentioned some of the common back pain patients he sees that the chart could be helpful. I reminded him at patients never on opioid therapy entered into our Butrans study and they had many of these identifiable back pain (mentioned a few). So it sounds like if they needed atc pain relief for an extended period of time that Butrans might be appropriate right. Dr said yes and said he liked the Butrans. Reminded on OxyContin schedule 2 extended release delivery system dosed every 12 hours.
PPLPMDL0020000001	Uniontown	OH	44685	4/15/2014	Short conversation with dr about his use of OxyContin and Butrans. I told him about the insights on oxycodone and hydrocodone. Dr said that's why he tries to start the extended release opioid sooner. I reviewed the pages of the main visad on appropriate patients like low back pain and osteoarthritis pain. I asked him if he has patients she treats for those types of pain? Dr said of course. Reviewed the 10mg page and emphasized the 20mg dose and conversions. Dr said he is trying to write more and more but said insurance for it is really tough. I asked for specific plans but he didn't reveal any he could remember. I told him that his nurse or ma needs to contact me about those and I may be able to help. Dr said ok and that would help. I asked for continued business. Reviewed the Scott and Kathy profiles for Butrans, conversions, and titration. Asked for more business and if it makes sense to use Butrans for he patients I described? Dr said it does. I told him I just didn't want him to miss opportunities for Butrans when OxyContin isn't appropriate. Dr said he understands.
PPLPMDL0020000001	Cleveland Hts	OH	44118	4/15/2014	Reviewed OxyContin every 12hours, 7 tablet strengths along with Butrans for those patients requiring around the clock analgesia. Savings cards. Said ok will consider for appropriate patients<font color=blue><b>CHUDAKOB's query on 04/24/2014</b></font>Did you lead this call with insight #16? If so, I do not see it in the call notes? What was his response?<font color=green><b>GUTKOMA's response on 04/27/2014</b></font>Not appropriate to lead with insight at this time will attempt if appropriate on next opportunity<font color=blue><b>CHUDAKOB closed the query on 04/30/2014</b></font>
PPLPMDL0020000001	Garfield Hts	OH	44125	4/15/2014	Reviewed OxyContin 7 tablet strengths every 12hrs along with Butrans for those patients requiring around the clock analgesia, Said Ok will consider for appropriate patients, Asked for 1 patient<font color=blue><b>CHUDAKOB's query on 04/24/2014</b></font>Did you lead this call with insight #16? If so, I do not see it in the call notes? What was his response?<font color=green><b>GUTKOMA's response on 04/27/2014</b></font>Not appropriate to lead with insight at this time, will attempt if appropriate on next opportunity.<font color=blue><b>CHUDAKOB's query on 04/30/2014</b></font>You answered this the same way on three calls this day. Were mine of them "appropriate"? If not why?<font color=green><b>GUTKOMA's response on 04/30/2014</b></font>My understanding is that insights are used to open up dialogue that leads to a product discussion. Although I didn't lead with verbatim insight we did have a robust discussion about OxyContin,every 12 hours and the FDA approved Tier 1/3 labeling that describes abuse deterrent characteristics, In the end I did identify 1 appropriate patient for OxyContin and will note insight #16 for next visit. Thanks<font color=blue><b>CHUDAKOB added notes on 05/01/2014</b></font>I am glad to hear that. Your call note does not
PPLPMDL0020000001	Garfield Hts	OH	44125	4/15/2014	Window call, Reminded of Butrans for those patients requiring around the clock analgesia who are failing on present therapy, Said Ok will consider for appropriate patients, referred to Christina NP and Gwne Np
PPLPMDL0020000001	Cleveland	OH	44118	4/15/2014	Reviewed Butrans for those Tramadol failures requiring around the clock analgesia, along with OxyContin every 12hours, 7 Tablet strengths, Savings cards. Said Ok will consider for appropriate patients, Invited to upcoming program<font color=blue><b>CHUDAKOB's query on 04/24/2014</b></font>Did you lead this call with insight #16? If so, I do not see it in the call notes? What was her response?<font color=green><b>GUTKOMA's response on 04/27/2014</b></font>Not appropriate to lead with insight, will attempt if appropriate on next opportunity<font color=blue><b>CHUDAKOB added notes on 04/30/2014</b></font>You wrote this on another query. Why is is not appropriate?
PPLPMDL0020000001	Stow	OH	44224	4/15/2014	Dial didn't participate much in the discussion any OxyContin and Butrans. I did ask her if she finds oxycontin as a product that makes sense to her and when and where to use it? She said that e providers in the office use so much of it that she is exposed to it quite often. She said she agrees with when and where to use it and it does make sense to convert a patient to OxyContin when they have been in pain for an extended period of time. I told her that's good to know and dial said that she really likes Butrans and didn't know she could write it for an opioid naive patient. She said they don't have many but it proves to her that it has a wide range of use. Reviewed the trial for 3024 and inclusion and exclusion criteria.
PPLPMDL0020000001	Barberton	OH	44203	4/15/2014	Spoke with Tessa the office manager regarding the delivery system of both my products. Asked her if she had any meetings to dis yes pain, she said no that they don't treat pain that much. Discussed Butrans, it's scheduling, the Scott profile was reviewed. Gave her Butrans invite to give the dr.
PPLPMDL0020000001	Barberton	OH	44203	4/15/2014	Dr was interested in managed care coverage for Butrans and OxyContin along with scheduling. Reviewed dosing with Butrans and OxyContin. Invited to Butrans dinner program on the 30th.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/15/2014	Provided review if the Maggie profile for OxyContin and asked him what he would change? Dr said not much other than starting the ER opioid earlier. I told dr that makes sense and asked him if that's what he tries to do? Dr said he tries but insurance doesn't allow him. I asked him what percentage of his practice is pain management and suboxone? Dr said its about 50/50. Dr said he is trying to see more pain patients and is seeing how much short acting is being used and he tries to start ER opioids. I asked him why and he said because it just makes sense if the patient is in pain all the time. I reviewed the OxyContin copy cards and reviewed the Kathy profile for Butrans and asked him to just try it. Dr said ok.
PPLPMDL0020000001	Barberton	OH	44203	4/15/2014	Spoke the the ma thru the window. I asked how I could see the doctors but she couldn't provide me with any direction other than the lunches. Reviewed with her Butrans and OxyContin delivery systems and dosing. Left invite to Butrans dinner program for all docs.
PPLPMDL0020000001	Euclid	OH	44119	4/15/2014	Had to discuss another Dr Emad Mikhail patient with pharmacy mgr Dave. Dave states he has never NOT accepted or allowed patient to use Butrans/Trial card presented to him from Doctor's office. He states that majority of patients assume first month is free and freak out when it's not. He also states that patients don't read the fine print carefully, nor do they activate card when they come into pharmacy. He welcomes DR Mikhail or medical staff to call him at any time.
PPLPMDL0020000001	Norton	OH	44203	4/15/2014	Spoke to Christy the office manager. Scheduled a lunch and reminded her about Butrans being schedule 3 and OxyContin schedule two.
PPLPMDL0020000001	Barberton	OH	44203	4/15/2014	Discussed with the ma vinclette Butrans dosing managed care and reviewed OxyContin. Delivery system. Invited dr to Butrans dinner program.
PPLPMDL0020000001	Uniontown	OH	44685	4/15/2014	Abby said she learned I have OxyContin from dr Balter. She asked me why I never mentioned it and I told her I did after she left summit pain because of he hatred for it in that practice. Abby agreed and said that they saw it as the devil and then told me she never quite understood it because they write plenty of Percocet.....I told her that is strange asked her what her thoughts on oxycontin are now? She said she already has written a lot of it and finds that its perfect for patients already on oxycodone. I reviewed all key selling messages and she said she has the conversion and titration guide I left her a few weeks ago which really helped. Discussed Butrans patient types, conversions and titrations. I asked her if she has any questions and she told me she has discussed Butrans with dr Fouad and wants to know about conversions or equivalencies. I told her there is no equivalency for Butrans but approximate conversions. Discussed started doses and titratable doses and when with stare any state. Abby said she is trying to see patients back every two weeks when she knows they will need to be
PPLPMDL0020000001	Garfield Hts	OH	44125	4/15/2014	Visited Pain mgmnt dept, (Singh, Abraham, Samuel, Lokesh) OxyContin/Butrans Initiation/Titration and Formulary grids
PPLPMDL0020000001	Uniontown	OH	44685	4/15/2014	Spoke with Kelli one of the pharmacy technicians. I told her that I am checking on which pharmacies in the area have the Butrans 15mcg and asked her if she is familiar with it with I showed her the conversion guide. She said she knows about it. Reviewed all key selling messages. Kelli looked and said they have all doses but the 15mcg. I told her it is currently on back order. Discussed OxyContin dosing, conversions titration and patient types already on oxycodone. Kelli said they don't fill too much but enough to ensure they have all the doses in stock.
PPLPMDL0020000001	Akron	OH	44333	4/15/2014	Dana told me that after our last visit she has written Butrans and OxyContin. I asked her for the give me information and she said e OxyContin was for a Percocet patient and Butrans was vicoden. I told her that's spot on for patient identification on each. Dana said that she sated the patient on 10of OxyContin and 10mcg of Butrans for the other. Dana said she knows each will need to be titrated and will intend on doing that before the first month. I reviewed patient type selection for oxycontin and Butrans with Kathy. Dana said she will continue to write both. Reviewed new Medicare plan coverages for Butrans.
PPLPMDL0020000001					

PPLPMDL0020000001	Akron	OH	44310	4/15/2014	Dr told me that he wrote a Butrans 15mcg for a patient who lives near Massillon late last week and told me that he cannot find it. I told dr and Char about the Butrans 25mcg back order. I told them about the pharmacies around their area that have it. DR said the patient won't drive all the way up for it. Dr said he will maintain the 10mcg dose because he doesn't want to move to the 20mcg yet. I told him I understand and reviewed steady state and asked if he has ever asked to see patients back in two weeks instead of a month to ensure the dose is correct? Dr said he does and is doing it tie this patient being discussed. I asked for continued business and to also use more OxyContin for some existing patients already on IR oxycodone. Dr said alright but it won't be much.
	Barberton	OH	44203	4/15/2014	Spoke to Julie the office manager regarding setting up an Inservice for the doctors. She said they don't do that but scheduled me a lunch. I asked dr if he would like to attend the Butrans dinner program, he is going to ck his schedule. I asked he question why is it such a risky proposition to write an extended release opioid vs using a short acting opioid atc? He said the abuseability of an extended release product. I said so are you saying hydrocodone can't be abused? He said products like ms cotin can be more abused. I reviewed the abuse potential of all my products and gave him the FDA insight. And showed him the OxyContin headline page of the detail aid. I asked if he realized this and he said yes, that's why he will pick OxyContin for he chronic patient over another extended release delivery system. I said what about Butrans after Tramadol if the patient needed act pain therapy for an extended period of time. Why not choose Butrans that's dosed once a week. He said he isn't sold on it yet. I said fair enough. And reinforced my scheduled lunch to review our products and reminded him
PPLPMDL0020000001	Garfield Hts	OH	44125	4/15/2014	Reviewed OxyContin 7 tablet strengths every 12 hours along with Butrans for those patients requiring around the clock analgesia, Said Ok will consider for appropriate pateints, Savings Cards, Going to be following CCF<font color=blue><b>CHUDAKOB's query on 04/24/2014</b></font>Did you lead this with insight #16? If so, I do not see it in the call notes? What was his response?<font color=green><b>GUTKOMA's response on 04/27/2014</b></font>Not appropriate lead approach at present time, will attempt if appropriate on next opportunity.<font color=blue><b>CHUDAKOB added notes on 04/30/2014</b></font>Our direction is to lead with this insight the first time around.
PPLPMDL0020000001	Garfield Heights	OH	44125	4/15/2014	Window call, Reviewed Butrans for those Tramadol failures who require around the clock analgesia along with OxyContin every 12 hours and 7 Tablet strengths, Said Ok, left invite to program
PPLPMDL0020000001	Uniontown	OH	44685	4/15/2014	Dr said she had a patient on Monday who she started on OxyContin from Percocet. I told dr that's great to hear and asked her when she has patients like that that are ready for a dose adjustment to continue to convert them to OxyContin? Dr said it does and will try to do more of it. Dr said also that after our discussion last time about Butrans and UHC Community plan that she has a patient in last that day with the plan who was failing vicoden. Dr said she actually write Percocet because of cost for the patient but she said the patient called back today saying Percocet isn't working or wanting more. Dr said she just knows the patient wants come thing else. Dr said she's going to write Butrans. I told her good to hear and to continue identifying those types of patients.
PPLPMDL0020000001	Norton	OH	44203	4/15/2014	I asked the dr why its a riskier proposition to write Butrans or OxyContin over dosing someone atc with short acting opioids. Dr said he would never dose someone more than 2 pills a day, he would convert to OxyContin or Butrans. So why would ppl though. He said for cost cause he thought percent was cheap or managed care tell g them they have to write ms cotin before Butrans. I said what plan made u do that. He said caesoreure. We reviewed managed care and I asked for a copy of the denial. Then he said Uhc. I said yes....that plan is a challenge and then refused to the larger plans in his office with coverage. I asked him why he selects Butrans. Dr said because it's less medication for his patient to take and its schedule 3. I reviewed the FDA insight. Dr said the zxyhd repo was in yesterday. I said after heading the insight on the FDA....what are you going to do. He said he won't write it cause it's asking for trouble. We reviewed nth page of the OxyContin where it reviewed the information also I reinforced it was still abusable.
PPLPMDL0020000001	Cleveland	OH	44109	4/16/2014	Reviewed OxyContin and Butrans initiation Titration, no new info learned from Ray Rph
PPLPMDL0020000001	Munroe Falls	OH	44262	4/16/2014	Reviewed our last discussion about using the lowest effective dose. I told her that when a prescription for vicoden is written that says take 1-4 pills a day that is giving a patient a 400% range of medicine to treat how they feel is appropriate. Dr said she agrees and it's not right. I told dr that I'm guessing when that range is given patients most likely will lean more towards taking more than not enough. Dr agreed. I told her that when she knows its time to start a ER opioid she has two great options, oxcycontin and Butrans. Discussed oxcycontin as the product ideal for patients already on IR oxycodone and the patient tells her they are still in pain and to just convert them to a 12 hour oxycodone. Dr said it makes sense, I told her from the MVA about the examples of pain conditions from page 5. Discussed the Scott profile for her patients needing a dose adjustment on tramadol and reviewed the profile. I asked her to just take a patient on tramadol and Percocet and start the appropriate ER opioids we discussed. Dr agreed. Discussed the new Medicare plans for Butrans.
PPLPMDL0020000001	Akron	OH	44320	4/16/2014	Dr said he remembered Barry as the OxyContin guy. Reminded dr that OxyContin has been available for 18years. Told dr that he has an opportunity to also use a product like Butrans and showed him the dosing. I told him that he needs to use it for patients that he continues to refill on tramadol or vicoden and are in pain around the clock. Reminded dr that Butrans is a schedule 3 7 day transdermal system. Reviewed copy cards. Dr asked a patient getting blood work what insurance she has and she showed him his card and it was UHC commercial. Dr asked if its covered and I showed him the formulary grid. Showed him that's its third tier. Dr said she will write it again and I told him about the new Medicare wins with UHC aarp and Caremark silverscript. Dr said ok and went into a room. Dr opened the door shortly after and asked me to come over. Dr asked me if patients on Percocet can also use Butrans? I told dr that Percocet can be used for breakthrough pain. Dr said ok and asked for a copy card and trial offer. Gave the dr the card and patient walked out with a Butrans prescription.
PPLPMDL0020000001	Akron	OH	44333	4/16/2014	I asked Elise about her use of OxyContin and Butrans. Elise said she continues to have no issues with oxcycontin and has found out how well it works in patients already on oxycodone. I told her that's great to hear and asked where she usually starts? Elise said depends on the dose of Percocet et but she knows its a 1:1 ratio and its easy. I asked her about Butrans and if she has had any activity with it recently? She said no because she hasn't been seeing as many patients because Karen Hodakievic is back. I asked her about Butrans and what she says to a patient who gives pushback about Butrans? She said she doesn't get much and just tells them that the Butrans will be a good option. Elise said that she doesn't have any issues with patients not using it and said it is truly a great option. I asked for continued use of both products.
PPLPMDL0020000001	Akron	OH	44304	4/16/2014	Asked dr if he had a minute to discuss a few things and he said no. I looked for Butrans and OxyContin copy cards and spoke with Jess who said that she gives them to the doctor and he keeps them.
PPLPMDL0020000001	Akron	OH	44333	4/16/2014	Good discussion with dr about using Butrans in his patients who are aged 50-64. Used the clinical trial to help prove patient selection and age range for Butrans. Dr said he is continuing to use Butrans and will try to expand its use. Discussed 15mcg doses stocked in pharmacies.
PPLPMDL0020000001	Hudson	OH	44236	4/16/2014	Good discussion over lunch about Butrans and OxyContin. Discussed in losing dosing, titration conversions and patient profiles. Also discussed both tramadol and vicoden insights and told her there is a problem with IR opioids being used to treat around the clock pain. Dr said that she just started on November and is still building her practice so she is just now starting to see more and more pain patients. Dr said she doesn't like writing IR opioids and attempts to identify he source of pain and treat accordingly. I discussed patient types Scott and Kathy for Butrans and asked her to just try it. Dr agreed she will. Discussed oxcycontin for patients on oxcodone already and the one to one ratio.
PPLPMDL0020000001	Cleveland	OH	44109	4/16/2014	Visited PMR/IM depts (Harris,Morton,Sheffler,Vargo,Harrington,Ricanati,Magoulas, Falcik-Ytter) Left OxyContin/Butrans initiation/titration guides along with appt requests
PPLPMDL0020000001	Akron	OH	44320	4/16/2014	Discussed Butrans and OxyContin and identifying patients for each. Recapped last call about dr agreeing that one of her goals is to use the lowest effective dose. Dr said yes that is a goal. Dr said she has been thinking more about Butrans. I asked her why? Dr said she knows that its a good option for patients that are failing NSAIDs or tramadol and need a long acting product. Dr said she likes that its low dose and is a schedule 3. I asked her to identify patients on tramadol or vicoden that need a dose adjustment and she knows the source of their pain. Dr agreed and said she will do that. I asked dr to think about OxyContin and identify the patients that are currently being refilled on Percocet. Dr said she agrees but doesn't like to open the can of worms with OxyContin and doesn't want to be known as a physician who writes it. I asked her if she writes Percocet and she said yes.
PPLPMDL0020000001	Stow	OH	44224	4/16/2014	I asked her to explain OxyContin as the 12 hour oxycodone and she said she has done that and it has worked. I asked her to keep doing it. Dr said ok. Spoke to Jamie about stocking and back order of Butrans 15mcg dose. Jamie looked and said they have 2 boxes of the 15mcg dose. Jamie also looked and said there are 12 available from cardinal to order. Discussed back order and scripts of it. Jamie said they have a patient that goes from 20 one week,to 15mcg then to 10mcg and back up. I asked who the physician is and she said Dr Ali. I asked about OxyContin fills and she said she has all doses and has about 4 bottles of every dose and sees mostly the 10, 20 and 40 mg doses. I asked if she sees it written as q12h and she said yes but if its different she will change it. I asked if she runs OARRS and she said yes. I asked if a red flag comes up with it what the procedure is. She said she will call the doctor and said that a couple of times they have discharged the patient.
PPLPMDL0020000001	Cleveland	OH	44109	4/16/2014	Quick OxyContin reminder, every 12 hours, 7 tablet strengths, said Ok no new info learned
PPLPMDL0020000001	Cleveland Hts	OH	44118	4/16/2014	Reviewed OxyContin every 12 hours, 7 tablet strengths along with Butrans for those patients requiring around the clock analgesia said ok now new info learned
PPLPMDL0020000001	Cleveland	OH	44109	4/16/2014	Quick review of OxyContin every 12 hours, 7 tablet strengths along with Butrans for those patients requiring around the clock analgesia, said Ok, book appt thru email
PPLPMDL0020000001	Cleveland	OH	44109	4/16/2014	Quick review of OxyContin every 12hours, 7 tablet strengths along with Butrans for those Patients requiring around the clock analgesia, said Ok
PPLPMDL0020000001	Cleveland	OH	44109	4/16/2014	Reviewed OxyContin every 12 hours, 7 tablet strengths along with Butrans for those Tramadol failures, Malek Said Ok will relay info nothing new learned
PPLPMDL0020000001	Hudson	OH	44236	4/16/2014	Discussed OxyContin as a product he should be using for his patients on Percocet. Barry used the logic about patients having a dose range that allows patients to basically treat themselves however they want. Dr admitted that he is contributing to the problem of patients being on IR opioids way too long. Dr said it easier to refill he IR than start another product. I asked for more OxyContin business. Discussed Butrans in depth discussing all key selling messages and using patient profiles Scott and Kathy do show specific patient selection for the product. Dr said it is a good option and he should be using it. Discussed new copy cards and managed care.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	4/17/2014	Dr Hegde was listening to the conversation I was having with dr Azem about Butrans and said that she thinks she has a patient that would be good for Butrans but want sure. I asked her to tell me about it and she said the patient is on vicoden and not getting enough relief. I told her it sounds like a good candidate for Butrans and told her to initiate. I asked about the patients dose of vicode and she couldn't remember but asked me about conversions. I reviewed conversions and titration. Told dr I would follow up and to also use oxcycontin for those patients continuing on Percocet. Dr said ok.
PPLPMDL0020000001	Euclid	OH	44132	4/17/2014	Lunch. Busy practice, everyone talks at eachother during lunch; they never stop moving, talking, typing on laptops etc. Will be a challenge. Discussed OxyContin lowest effective dose, appropriate patient selection, indication, insight around patients understanding "every 12 hours" language best. Would he use in opioid naive? yes? Adverse event profile discussed, dr has no issues. Discussed OxyContin is first FDA aooroved Tier 1 and 3 labeling regarding abuse deterrent studies. Dr was unaware of reformulation in 2010. Let him know he can review data in section 9.2 of FPI. Discussed single entity opioid should patients not be able to tolerate APAP or NSAIDs. After patients on PRN oxycodone/Percocet/conversion shown. Also discussed START principles using Core Vis Aid. Discussed broad commercial/med d access for patients. Asked age of patients? He states it's a mix of younger/geriatric. Discussed \$30 out of pocket with savings card; that will cover any of 7 strengths. Asked dr what he knows about Butrans? Not much he replied. Let him know next lunch I'd like to discuss both our clinical trials. Discussed indication. Dr asked what schedule? I replied CII and can be called in with refills. Discussed as first opioid or after Tramadol/Codeine. Opioid naive and experienced dosing discussed, showed and left Butrans titration guide. He will review. He has 9 patient rooms, yet med assts say he only uses 4. Left 4 PAP spine posters; he really liked them and that they were not branded.
PPLPMDL0020000001	Cleveland	OH	44114	4/17/2014	Reviewed OxyContin every 12 hours, 7 tablet strengths along with Butrans for those patients requiring around the clock analgesia, Said Ok will consider for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44113	4/17/2014	Reviewed Butrans Patient experience program, along with OxyContin every 12 hours, 7 tablet strengths and formulary grids. Said Ok will continue to find appropriate patients
PPLPMDL0020000001	Cleveland	OH	44103	4/17/2014	Reviewed OxyContin every 12 hours along with Butrans Savings cards, Hakeem said he hasnt seen any Butrans will discuss for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44195	4/17/2014	Reviewed OxyContin Labeling changes (Tier 1 & 3). Every 12 hours dosing, 7 tablet strengths, Savings cards along with Butrans for those patients requiring around the clock analgesia, Said Ok will consider for appropriate
PPLPMDL0020000001	Cleveland	OH	44113	4/17/2014	Reviewed Butrans Patient experience program, along with OxyContin every 12 hours, 7 tablet strengths and formulary grids. Said Ok will continue to find appropriate patients
PPLPMDL0020000001	Euclid	OH	44119	4/17/2014	Brand New HCP, in M-F. Discussed with med asst at front my product indications and scheduling. Left Dr OxyContin reformulation folder, Butrans 4 strengths brochure I had in my bag. Left how to protect your practice
PPLPMDL0020000001	Euclid	OH	44119	4/17/2014	Met with med asst @ front. Note: new HCP: Rebekah M. Chapnick, MD = add to Phoenix. Discussed OxyContin indication, scheduling. Discussed Butrans indication, scheduling. Left 7 days brochure for all HCPs in practice and reformulation folder.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/17/2014	Spoke to Mike the pharmacist about Butrans 15mcg and asked him if they have it in stock? Mike looked and said that he has all doses except the 15mcg. Mike looked at McKesson and said they have none in stock but said it says that they will be shipped on 4/9 and said that obviously didn't happen. Discussed physicians in the area such as summit pain and western reserve pain. Mike said that many of the patients from summit pain get their prescriptions filled there and said he's not sure how many go to their in house pharmacy. Discussed his procedures for narcotics fills. Discussed the pharmacies checks and balances to protect them and the patients and Mike said he will call the office if there is an issue. Mike said they do fill OxyContin and it is the number one ER opioid filled and do fill others but said the numbers have gone down for OxyContin.

PPLPMDL0020000001	Cleveland	OH	44106	4/17/2014	Visited Onc/Hem, FP depts. left OxyContin/Butrans Initiation/Titrations , requested appts. No new info learned
	Cuyahoga Falls	OH	44221	4/17/2014	Spoke with Darlene and dr Azem about a denial on Butrans yesterday. Dr said the patient has failed Mobic, tramadol, vicoden 5/500, Norco and IR oxycodone. Darlene said the patient has an indigent plan through Akron general indigent plan through Buckeye. I discussed the reality about buckeye which Darlene said she knows they make it tough. Dr said they are going to appeal and will let me know. I told Darlene that I have seen buckeye patients approved on Buckeye so its not out of the question. Discussed new Med D plans and dr said that is great news. I asked dr to continue trying to prescribe it and I'm glad that a majority of them are approved without quick hallway. Nageeb on vacation, he's only HCP in. OxyContin is first ER opioid with FDA approved Tier 1 and Tier 3 labeling that describes abuse deterrent characteristics discussed; BPE kits discussed. Win Win for him and patient. He gets info on patient's therapy/progress; patient gets nice perk when filling out the 5 therapy questionnaires.
PPLPMDL0020000001	Euclid	OH	44119	4/17/2014	Quick review of OxyContin every 12 hours, 7 tablet strengths, savings card, said ok no new info learned
PPLPMDL0020000001	Cleveland	OH	44195	4/17/2014	Met with tech Dana. Reviewed previous discussion w pharmacist Dave. They are going to work with me in making sure to tell patients to READ the fine print on Butrans savings/trial cards; and make sure to ACTIVATE prior to coming to pick up RX. Discussed and left Pharmacy piece with buprenorphine prescribing laws. OxyContin Tier 1, Tier 3 FDA abuse deterrent labeling discussed.
PPLPMDL0020000001	Euclid	OH	44119	4/17/2014	Used the insight about tramadol and told him that I'm telling him this because there is a big problem in our society today with patients continuing to be prescribed and refilled on IR opioids to treat their around the clock pain. I asked dr if he agrees? Dr said he does and its a shame. I told him that he can make a difference by knowing when the right time is to move to an ER opioid like Butrans or OxyContin. I told dr that his specific patient identification is important with each product and I asked him to focus on the tramadol and vicoden patients for Butrans and Percocet or oxycodone plain for Q12h OxyContin while showing him the visads for each product. Dr said its good to know those products are available when he needs to use a long acting opioid. I asked him if he will use more Butrans for the patients we discussed? Dr said he will and said he knows he need to convert more patients to OxyContin. Nothing else learned. Discussed new Butrans Medicare coverage with Mrs Vora who is the office mgr.
PPLPMDL0020000001	Garfield Hts	OH	44125	4/18/2014	Reviewed OxyContin 7 tablet strengths every 12hours along with Butrans for those patients requiring around the clock analgesia. Said Ok will consider for appropriate patients.Will be following CCF policy
PPLPMDL0020000001	Cleveland	OH	44102	4/18/2014	Reviewed OxyContin 7 tablet strengths every 12 hours along with Butrans for those Patients who are not adequately controlled on present therapy. Said Ok will consider for appropriate patients. Requested appt. to further
PPLPMDL0020000001	Tallmadge	OH	44278	4/18/2014	I asked dr if he had a quick second to discuss something. Dr said no because he's way behind. I asked him anyway how he decides who is appropriate for OxyContin? Dr said he dos use it and usually for patients either in cancer pain or one that he knows a long acting opioid is necessary. Dr started to walk away and I told him to initiate a patient on e 7 day patch Butrans. Noting else learned.
	Akron	OH	44319	4/18/2014	I asked dr at what point does he died to move to OxyContin? Dr said it depends but usually once they reach 3 or 4 short acting medicines. I asked him why he waits till then because if he has a patient already on IR oxycodone and a dose adjustment is necessary. The patient should be converted to OxyContin. Showed dr the conversions and asked him to start patients on 10mg of OxyContin for patients needing more than 20mg of Percocet. Dr said it makes sense. I showed hi. The Scott profile and told him that another option for ER opioid is Butrans for a patient on tramadol who needs a dose adjustment. I asked if it makes sense to move to ER opioids sooner when pain becomes around the clock? Dr said it does and said thanks for the information.
PPLPMDL0020000001	Akron	OH	44312	4/18/2014	Quick hallway call and reviewed the Scott profile for Butrans and asked him if he has any recent starts? Dr said he has had a few over the last month. I told him that I know he has a good number of patients that are of Medicare age and told him that its now easier to get it approved without restriction on 91% of his Medicare patients. Dr said that's a good number and its nice to know. Dr said to make sure I tell Karen next week when she's in the office. Reminded dr about the other ER opioid OxyContin for his patients needing a dose adjustment on Percocet. Dr said ok.
PPLPMDL0020000001	Akron	OH	44319	4/18/2014	Quickly told him about the oxycodone insight and told him that he can help to change the statistic by converting more patients on Percocet to OxyContin. Dr said its too expensive. I asked for whom? Dr said most of his patients. I told him that means some that would be appropriate. Dr said sure. Reminded him of the Butrans doses and to be used for patients on tramadol. Dr didn't respond. Nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44113	4/18/2014	Visited Ortho Dept. (Stearns,Bilfield,Bohl,Berkowitz) OxyContin/Butrans Initiation/Titration, Savings cards
PPLPMDL0020000001	Akron	OH	44305	4/18/2014	Spoke with Matt the pharmacist about OxyContin and Butrans. I discussed sporophyte patients for each and then told him about the Butrans 15mcg back order. Matt looked and said he currently has two boxes of 5mcg and sees that there are 12 available from cardinal but said he doubts that if he goes to order it it won't be available. Discussed dose titration and proper administration.
PPLPMDL0020000001	Cleveland	OH	44113	4/18/2014	Reviewed Oxycontin 7 tablet strengths every 12 hours dosing along with Butrans for those patients requiring around the clock analgesia, Said Ok, referred to Mary RN, Savings card
PPLPMDL0020000001	Cleveland	OH	44113	4/18/2014	Quick window call reviewed OxyContin 7 tablet strengths every 12 hours along with Butrans for those Tramadol failures who require around the clock analgesia, Said Ok prescribing less, nothing new learned
PPLPMDL0020000001	Cleveland	OH	44125	4/18/2014	Reviewed OxyContin every 12 hour dosing along with Butrans for those patients requiring around the clock analgesia, Said Ok will relay to staff Rph
PPLPMDL0020000001	Cleveland	OH	44105	4/18/2014	Quick review of Oxycontin 7 tablet strengths every 12 hours along with Butrans for those patients requiring around the clock analgesia, Said Ok, no time now, stop by office next week
PPLPMDL0020000001	Tallmadge	OH	44278	4/18/2014	Quick message to dr at front counter. I used the FDA draft guidance letter insight and told him about the tier 1 and 3 with OxyContin. Dr said he remembers it being reformulated but didn't know about the tiers. I asked him to use OxyContin when a patient comes in on Percocet and needs a dose adjustment. Showed him the conversations and asked him what his thoughts are? Dr said it makes sense and asked me when it should be dosed. I told him its basically q12 oxycodone and its recommended to be doses at 8a and 8p. Dr said ok. I showed him the Butrans slide guide conversion chart and asked for him to identify one patient like someone on tramadol who needs a dose adjustment and the pain is around the clock. Dr said ok.
PPLPMDL0020000001	Akron	OH	44319	4/18/2014	I told dr again about the oxycodone insight and told him I'm telling him this because we have an epidemic on out hands with patients being treated too often with IR opioids for around the clock pain. I told him he needs to start making a difference with his prescribing habits. Dr agreed there is a problem. Dr said the problem with converting patients to ER opioids like OxyContin is the psychological aspect of no longer taking a pill every 4 or 6 hours for their pain. I told him its not going to happen overnight and that he needs to set that expectation with his patients earlier as to how their pain therapy is going to be. Dr said ok. I showed him the conversions from Percocet to OxyContin and asked him to identify just one patient at a time. DR agreed. I showed him where to use Butrans and the conversions. I asked him if he will start one patient for each product as he adjusts his patients medications? Dr said ok and asked how often oxycontin is dosed. I told him its q12 ER oxycodone and to be dosed 8am and 8 pm.
PPLPMDL0020000001	Cleveland	OH	44195	4/21/2014	Revised OxyContin every 12 hours, formulary grid. Went over Butrans Experience kits per request, Said she will review with clinicians and will look to start appropriate patients<font color=blue><b>CHUDAKOB's query on 04/30/2014</b></font>What happened to the FDA draft Guidance insight we were supposed to lead with?<font color=green><b>GUTKOMA's response on 04/30/2014</b></font>Discussed FDA draft guidance on previous call 4/17.In addition, Also on this call I was following up from the previous request for the Butrans experience program kits.<font color=blue><b>CHUDAKOB added notes on 05/01/2014</b></font>Ok. I see where you discussed the tiers, but it doesn't say you led with the insight. At any rate, thanks for clarifying
PPLPMDL0020000001	Cleveland	OH	44195	4/21/2014	Quick OxyContin Review every 12 hours, 7 tablet strengths along with Butrans for those patients requiring around the clock analgesia, Said Ok will consider for appropriate patients, Said to make appt for office
PPLPMDL0020000001	Cleveland	OH	44195	4/21/2014	Reminded of OxyContin every 12 hours, 7 tablet strengths, Butrans for those Tramadol failures requiring around the clock analgesia, said Ok will consider for appropriate patients, Asked Anne to review Butrans Experience
PPLPMDL0020000001	Mogadore	OH	44260	4/21/2014	I told dr that every time we talk about Butrans he tells me two things. First is that he really likes it and it works. The second is that he wished it was covered on more insurances and have it be lower cost. Dr laughed and said he does do that. I told him that his wishes have come true because there have been two big wins with Butrans Medicare patients. Told him about Caremark and UHC aarp. Dr said that is good to know and to make sure I tell his prior auth girl when I'm in next because she's the one who needs to know. Asked dr to please continue to discuss the option of OxyContin with his patients needing a dose adjustment on Percocet or IR oxycodone.
PPLPMDL0020000001	Fairlawn	OH	44333	4/21/2014	Discussed the Butrans 15mcg with Sue and Gilbert. Sue told me that it got shipped to their wholesaler on 4/18 and have about 22 boxes available. Sue told me that she had a patient on dr Fouads today who came in to fill the 10mcg of Butrans and were currently out of it. Sue said she just ordered 6 boxes from the wholesaler. Sue said the patient was very upset and did won't want to wait the 24 hours. Sue said the patient was going to go to other pharmacists to find it. Discussed OxyContin stocking and Gilbert said they have at least 3 bottles of each dose.
PPLPMDL0020000001	Waterford	OH	45786	4/21/2014	I-Butrans dosing and titration. OxyContn pages 14 and 15, limitations of use, boxed warning and dosing.W-said that she likes Butrans but had trouble with managed-care. Went over managed-care information for Butrans.
PPLPMDL0020000001	Uniontown	OH	44685	4/21/2014	Discussed all key selling messages for OxyContin and Butrans. Reviewed the new label update for the abuse deterrent properties to OxyContin and used the FDA draft guidance insight. Dr said he did not know about it and said that's really good news. Dr said he has written for OxyContin and currently has a handful of patients on it from cancer pain to spinal stenosis. Discussed specific patient types,titration and dosing individualization. Dr did not know about Butrans. Discussed dosing,titration,conversions,AE's,clinical studies and managed care. Dr said it sounds like a product he would use and said it makes sense to use for tramadol and vicoden patients.
PPLPMDL0020000001	Cleveland	OH	44195	4/21/2014	Visited Dept. (Crawford,Leizman, Raymond,Knaus) Oxycontin Initiation/Titration, Butrans experience program, Butrans formulary grids
PPLPMDL0020000001	Uniontown	OH	44685	4/21/2014	Led with FDA draft guidance insight and told him that I'm telling him this because of the Tiers and how OxyContin has 1 and 3. Dr said he didn't know anything about that and said he had always felt comfortable using OxyContin and said he will go to it when a patient reaches 20mg of Percocet or IR oxycodone. Told dr that's good to know and he said he will start on the 10mg OxyContin and will titrate until he believes they need a specialist. Discussed individualization of the dose, titration and specific candidate selection. Discussed Butrans and told him about the tramadol and vicoden insights. Dr said its crazy because he doesn't know why do many patients stay on IR opioids because he said Butrans is also a schedule 3 opioid that dr said is easy to prescribe and said he likes the patch vs the pill option. I told dr about the Bup 3015 and using it for his NSAID and tramadol patients. Dr said he will continue using. Closed with new insurance coverage for Medicare. Dr said he just writes it and to give the new Medicare coverage info to Tiffany who deals with pa's.
PPLPMDL0020000001	Akron	OH	44319	4/21/2014	Drs medical assistant Dawn gave me one minute to discuss Butrans and OxyContin. Dane said she didn't know about Butrans. Quickly told her that I'm guessing that the dr writes and refills short acting opioids or NSAIDs for pain. Dawn said she does. I told her about Butrans indication, dosing, conversions,titration, application sites and schedule 3,7 day transdermal system for patients who need dose adjustments on short acting opioids or NSAIDs. Dawn said it sounds like a good option for the doctor and will make sure she discusses it with the doctor. Left her with OxyContin information.
PPLPMDL0020000001	Uniontown	OH	44685	4/21/2014	Led conversation with FDA draft letter insight and told him that I'm telling him this because of oxycontin's reformulation in 2010 and the tier levels 1&3 for OxyContin. Dr readover the information from the visaid and said he had heard about the new long acting hydrocodone and said he knows its not abuse deterrent. I told him it sounds like its important to him when writing an ER opioid. Dr said of course it is! Dr said he really likes OxyContin because its been around forever and it works. I reviewed specific patient type selection and when he moves to it. Dr said its becoming more difficult to write it because of the pressure the state is putting on PCPs using it. Dr said he will use it when he knows it must be done for the right patient. Discussed Butrans core selling messages,patient type discussion, titration and use of 15mcg dose. Dr said he will continue to use it and finds that most really like it. Nothing else learned.
PPLPMDL0020000001	Akron	OH	44333	4/21/2014	Asked Carrie the ma to see dr about OxyContin. Carrie said he doesn't use much of it at all. I asked what he does use for pain? Carrie said he uses short acting products for post operative pain and long acting doesn't make sense. I told her to please give dr materials on OxyContn on the label update on abuse deterrent properties.
PPLPMDL0020000001	Garfield Hts.	OH	44125	4/21/2014	Reviewed OxyContin every 12 hours, tablet strengths along with Butrans for those patients requiring around the clock analgesia, Said Ok, for appropriate patients
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/21/2014	Quick hello while on the floor at Robinson. Dr said he got his letter from Purdue verifying his request to speak. I told him that's great to hear. I asked dr if he's finding places to out OxyContin as he stated before when he has patients on IR oxycodone to convert them over. Dr said he is but is finding more opportunity for Butrans because of the volume of hydrocodone he sees. I asked him to continue prescribing Butrans but to also continue to convert patients to OxyContin when those patients need dose adjustments. Dr said ok. Spoke to Terri about copay cards and they are doing ok on them.
PPLPMDL0020000001	Cleveland	OH	44105	4/22/2014	Reviewed with Hakim OxyContin and Butrans savings cards, said ok nothing new learned
PPLPMDL0020000001	Cleveland	OH	44113	4/22/2014	Reviewed Butrans Experience kits, Initiation/Titration, Formulary grid along with OxyContin 7 tablet strengths every 12 hours, 1st ER opioid Tier 1 and 3 labeling that describes deterrent characteristics. Said Ok will continue to find appropriate patients for Butrans and no change in practice on CII's
PPLPMDL0020000001	Cleveland	OH	44113	4/22/2014	Reviewed Butrans Experience kits, Formulary grid along with OxyContin 7 tablet strengths every 12 hours, 1st ER opioid Tier 1 and 3 labeling that describes deterrent characteristics. Said Ok will continue to find appropriate patients for Butrans and no change in practice on CII's



PPLPMDL0020000001	Westlake	OH	44145	4/22/2014	Hallway discussion regarding OxyContin FDA insight and Butrans. Dr said he hasn't tried butrans yet. Reviewed Initiation guide and what plans were of greatest interest to him and he said caresource and part d plans. Reviewed coverage and I asked him was he surprised to see this much coverage, he said yes.
PPLPMDL0020000001	Westlake	OH	44145	4/22/2014	Daniele the nurse wouldn't take a poster for the doctor. Reviewed Butrans and OxyContin cousins. Attempted to talk about the experienced kits, but she cut me off.
PPLPMDL0020000001	Westlake	OH	44145	4/22/2014	Managed care review of both products, talked them I to scheduling me an early meeting with dr Duncan on Thursday to follow up with our last discussion.
PPLPMDL0020000001	Westlake	OH	44145	4/22/2014	Discussed managed care part d plans with office manager regarding Butrans and OxyContin.
PPLPMDL0020000001	Olmsted Falls	OH	44138	4/22/2014	Spoke to ma, reviewed Butrans and dosing. Also covered managed care like part d plans with coverage.
PPLPMDL0020000001	Cleveland	OH	44109	4/22/2014	Visited PMR/IM dept, (Harris,Harrington, Gelehrter) OxyContin and Butrans formulary grids, Initiation/Titration and requested appt
PPLPMDL0020000001	Cleveland	OH	44195	4/22/2014	Reviewed OxyContin PI, and initiation/Titration guide, Dr said no further contact needed at this point, will keep contact info
PPLPMDL0020000001	Euclid	OH	44132	4/22/2014	Met with med asst at window. Dr B already gone for day. Reminded her I was there last week for lunch; discussed OxyContin indication and dosing. Discussed Butrans indication; left Pam profile, asking Dr B to read. Discussed my upcoming speaker program on Wed 4/30. Let her know if any of the HCPs want to attend; just call me and I can register them.
PPLPMDL0020000001	Euclid	OH	44117	4/22/2014	Lunch. Dr had several questions regarding abuse deterrent products around OxyContin, so I left him polybagged studies and told him there's \$5.46 value that will appear on Sunshine Act Reporting. Discussed OxyContin as first ER with Tier 1 and Tier 3 abuse deterrent FDA labeling. He wrote a prior auth for patient recently for OxyContin; hasn't heard anything for a few days. Patient was on 40 mg oxycodone; he converted to 20 mg OxyContin, he says, because it simplifies things for patient, and patient taking less pills, he says. I told him I'd follow up on that particular Prior Auth; some take longer than others. Discussed Butrans Med D wins; the girl who handles prior auth's wrote plans down. Discussed ability to call/fax Butrans in with refills, which could help save her and med assts time. Left 4 PAP spine posters; he will place in PT room and each patient room.
PPLPMDL0020000001	Olmsted Falls	OH	44138	4/22/2014	Reviewed the FDA insight and talked about his thoughts on products with this technology vs not. Hal the pharmacist said it help to have it. Talked about OxyContin reformulation, he was aware. Also covered it was dosed every 12 hours. I asked Would he call if he saw it written every 6 or 8 hours dosed. He said maybe. Reviewed Butrans dosing,patch placement.
PPLPMDL0020000001	Westlake	OH	44145	4/22/2014	Nurse Illada, brought me back to see the doctor and introduce butrans. Discussed FDA insight and asked him how important this technology was to his prescribing considerations. Dr said he really forgot about it cause he doesn't write extended release products for chronic pain. Highlighted the current patients being treated for pain. Dr agreed he has patients on short acting products and tramadol. I asked him why he wouldn't consider an atc extended release after a patient comes in already on three pills a day looking for more pain coverage. Dr said after a certain dose and duration of a short acting he will refer a patient out. Dr wouldn't comment on specifics. Dr said he can see if someone was being on 4 short acting opioids for a chronic length of time how they could be moved to an extended release. I tied short acting oxycodone to OxyContin in the same manner. Dr said scheduled 2 products are harder to write. I asked why? He said no one wants them to write chronic medications any more. I asked if maybe better assessments should be taken when the first opioid is written. He told me that he doesn't have time to see patients back every month for an evaluation and a refill for schedule two products. He was very aware that schedule 3 products could have multiple refills and he said he will see them back in 4 months for chronic patients. We reviewed dosing, patch location, plasma curve via the detail aid. Dr had me schedule a lunch to review this information around the clock analgesia. Said OK we behind schedule, book appt
PPLPMDL0020000001	Cleveland	OH	44113	4/22/2014	Quick window call reminded of OxyContin every 12hours, 7 tablet strengths along with Butrans for those Tramadol failures requiring around the clock analgesia. Said OK we behind schedule, book appt
PPLPMDL0020000001	Euclid	OH	44132	4/22/2014	Quick window. Reminder I met her last week @ lunch. OxyContin opioid naive/start dose 10 mg every 12 hrs discussed. Promoted and left invite for 4/30 program. Left Pam patient profile for her review, Butrans initiation guide: Butrans as first opioid or after prn Tramadol/Codine discussed. 8x10 Butrans FP left. (Also left invite for Cara McHugh, CNP, who does NOT have DEA license yet).
PPLPMDL0020000001	Westlake	OH	44145	4/22/2014	Reviewed FDA insight, tied into core visual aid. Dr said he forgot about OxyContin's reformulation. I asked how important is choosing these products with these steps taken that the FDA is providing opioid manufacturers and he said safety is very key. He said that he writes OxyContin yet he writes it for cancer patients. I said why wait for the severe pain patient why not the 10 mg for an opioid naive patient if they require an opioid atc? Dr paused and couldn't think of an answer. I asked him why is a riskier proposition to offer an extended release product like OxyContin or Butrans over a short acting product dosed atc? Again. Dr said nothin. Reviewed the Percocet to OxyContin conversion page. Drs aid he writes Butrans and he likes it. I asked him what patient type does he think of when writing Butrans, dr said cancer pain patients or patients currently on vikodin. Dr compared Said it was like fentanyl but safer. I made sure to tell him about abuse potential for Butrans and OxyContin. Said there was no head to head study's and reviewed Initiation guide. After review doctor said he was surprised and he asked if someone is over 40 mg what to do. I told him Butrans was not appropriate to start therapy if someone is over 40 mg of hydrocodone. I told him OxyContin may be a choice if you were looking for a single entity extended release product for the atc every 12 hours. Reviewed managed care, experience program and caresource and med d plans.
PPLPMDL0020000001	Cleveland	OH	44113	4/22/2014	Reviewed Butrans for those Norco failures who are requiring around the clock analgesia, Said OK, continues to find new starts. Also reminded of OxyContin every 12 hours, Tier 1 and 3 Abuse deterrence, Said position on CII's hasn't changed
PPLPMDL0020000001	Cleveland	OH	44114	4/22/2014	1. Determine if want to move forward w/ Pain PACT program 2. Share Butrans formulary win w/ AARP
PPLPMDL0020000001	Barberton	OH	44203	4/23/2014	Met office manager dawn. Dr not in on Wednesdays. Dawn said they only do workers comp. reviewed managed care coverage. Dawn said dr. doesn't write schedule 2 products but he will write schedule 3. Dawn said they write Celebrex a lot. Discussed how Butrans and OxyContin can be dosed after an NSAID if the patient required atc extended release product. Dr doesn't do lunches however dawn said he may see me cause my product is new.
PPLPMDL0020000001	Akron	OH	44333	4/23/2014	Good discussion over lunch about Butrans opportunities and patient type selection. Discussed profiles, conversions and discussions with patients about the product. Reviewed new Medicare plan wins and told her how important those two plans are to her business. Elise said that she just had a patient not approved for OxyContin. I asked her if she has the denial? She showed it to me and said that it was a UHC community plan Medicaid. Elise told me that they are recommending Exalgo and others that were tier 3. I told her that OxyContin is a PA and she needs to try that first. She said Caci already changed the script. I told her to tell me prior next time. I asked for continued business and discussed the FDA draft guidance letter. Elise said its good to know and gives her piece of mind.
PPLPMDL0020000001	Cleveland	OH	44195	4/23/2014	Reminded Roxan of OxyContin every 12hours along with Butrans Savings Cards, Said ok, no new info learned
PPLPMDL0020000001	Cleveland	OH	44195	4/23/2014	Quick review of OxyContin 7 tablet strengths/Saving cards along with Butrans for those patients requiring around the clock analgesia , Said he will continue to prescribe for appropriate patients, nothing else learned
PPLPMDL0020000001	Barberton	OH	44203	4/23/2014	Spoke to sarah the office manager. Discussed Butrans pain patch, dosing and managed care. Gave invite for Butrans. Discussed OxyContin and the appropriate patient. Gave initiation guide and a Butrans study
PPLPMDL0020000001	Akron	OH	44313	4/23/2014	Dr came over to window and spoke to me about OxyContin. Dr asked for a conversion guide for OxyContin that shows vicon to OxyContin. I told him that we cannot provide it because they are only estimates. I told him he can very easily find it online. I asked if he typically goes to OxyContin from vicon? Dr said sometimes and this patient needs OxyContin for chronic low back pain. I reminded dr of the 10mg dose and to start there and titrate every 1-2 days. Dr said he wanted a conversion chart for Butrans as well. I reviewed it with him and asked him if affordable cost for his Medicare patients is important? Dr said yes. I told him about the two new wins and told him that 70% of his Medicare patients are covered unrestricted for Butrans. Dr said that's good to know and to tell Tina and Kim. Discussed coverage with them and discussed appropriate patient types and
PPLPMDL0020000001	Cleveland	OH	44105	4/23/2014	Discussed OxyContin as the first ER opioid with FDA approved Tier 1 and Tier 3 labeling that describes abuse deterrent characteristics, also reiterated OxyContin CII that can be still be abused, Said OK, will consider for appropriate patients. Reviewed Butrans for those Tramadol failures requiring around the clock analgesia, Said he has a few patients in mind, reviewed Savings cards and Initiation/Titration
PPLPMDL0020000001	Cleveland	OH	44127	4/23/2014	Discussed OxyContin as the first ER opioid with FDA approved Tier 1 and Tier 3 labeling that describes abuse deterrent characteristics, also reiterated OxyContin CII that can be still be abused,Reviewed Butrans for those patients requiring around the clock analgesia, Said he will consider for appropriate patients, but again stressed PA's challenges,Reminded of Med. Mutual 2nd tier and Silverscript/Caremark Part D 2T
PPLPMDL0020000001	Cleveland	OH	44114	4/23/2014	Reviewed Butrans for those patients requiring around the clock analgesia along with OxyContin as the first ER opioid with FDA approved Tier 1 and Tier 3 labeling that describes abuse deterrent characteristics, also reiterated OxyContin CII that can be still be abused, Said he will consider for appropriate patients, continues to find new starts for Butrans.
PPLPMDL0020000001	Akron	OH	44320	4/23/2014	Led with FDA draft insight and reviewed the appropriate MVA pages. I told her she is missing opportunities I write a product that has 18 years of clinical use behind it. Dr said she knows but doesn't want to get involved in being knows for giving it out. I asked her to find specific patients that are motivated for change. Discussed opportunities for Butrans and asked her what percentage of patients should she be happy with when prescribing a branded medicine? Dr said it must be high. I asked her how 70% sounds unrestricted? Dr said that's very good. Discussed new plans for Medicare. Dr said she will work on it.
PPLPMDL0020000001	Barberton	OH	44203	4/23/2014	Breakfast. Discussed FDA insight and discussed her thought and she said she knew about it. Dr shared some stories about current patient are opioid therapy. Most of her patients are on short acting products. She will convert someone from Percocet to OxyContin if they need an extended release products and if managed care is covered. She talked about Medicare part d and the cost to these seniors. We discussed managed care coverage for Butrans. Dr said she hasn't found new patients. I described the Tramadol patient who is taking 2 pills a day and the. Needing more coverage...do you think 3 or 4 a day is appropriate for an extended release. Dr knodded. Dr described who was a OxyContin patient in her practice. She said spinal stenosis or an older patient who needs chronic pain medications, she mentioned on of her patients who was in her 90's.
PPLPMDL0020000001	Barberton	OH	44203	4/23/2014	Discussed Pam profile, dr agreed he has these patients. Dr sid he would not go from an NSAID to an extended release product is aid what if she needed the atc coverage, he said maybe . Reviewed med d coverage with AARP and silver script. Dr Patel is a med d target for silver scripts and aarp. Dr said he has patients on OxyContin and will use it when appropriate. Reviewed managed care. Also showed the per cost conversion to OxyContin page on the detail aid.
PPLPMDL0020000001	Norton	OH	44203	4/23/2014	Asked about his norco patients. Asked if they come in on three pills a day what do you switch them to? He said Butrans or OxyContin. He said OxyContin isn't covered on caresource so if its that patient he will write Butrans.
PPLPMDL0020000001	Akron	OH	44333	4/23/2014	Asked about how he writes Percocet. He's aid he usually doesn't start a patient on it unless they are allergic to norco or have break thru pain dr thought the molecule of Butrans was morphine, I corrected him that it was Good discussion over lunch and discussed patients he has on Butrans and his practice makeup with insurances. Dr said that his practice is 80% private insurance and 20% Medicare and Medicaid. Dr said that the private insurance patients are under 65 and most do not need ER opioids and that they are more candidates for injections or spinal cord stimulators. Dr said its the Medicare and Medicaid patients that he finds need the ER opioids like Butrans. I asked him what % of Medicare coverage he would find is acceptable to continue prescribing Butrans? Dr said at least 50-60%. I told him that just aarp and Caremark alone make up at least 50% of his Medicare business. Dr said that's great news and will make it much easier because he hates when patients tell him its too expensive. I asked for continued business. OxyContin dada draft letter and MVA discussion. Dr said FDA is taking out of both sides of their mouths by letting Zohydro to be released without abuse deterrent properties. I agreed sits strange. I discussed the fact that an 18year old product with abuse deterrent properties in 2010 should give him piece of mind. Dr agreed that it does and will write more.
PPLPMDL0020000001	Akron	OH	44320	4/23/2014	Dr asked me where the Butrans patient savings cards are? I took dr into thedrug sample room and showed him. I reminded him that the copy cards are only for commercially insured patients Medicare or Medicaid don't qualify. Dr said he didn't know that. I asked dr about the patients he started last week and if they were Medicare or Medicaid? Dr said one was Medicaid. I told dr that no products that have copy cards are able to make them for federally funded programs. I asked what the patients were taking prior to Butrans and he said he thinks Percocet. Discussed the new Medicare wins with Butrans and expressed the excellent coverage it now brings him I reminded him about conversions and appropriate starting doses. I told dr he also needs to be converting Percocet patients to OxyContin and showed him the new conversion and titration guide.
PPLPMDL0020000001	Cleveland	OH	44195	4/23/2014	Visited Tausig, (Goforth,Falman) reviewed OxyContin every 12 hours along with Butrans for those patients requiring around the clock analgesia. Initiation/Titration.
PPLPMDL0020000001	Akron	OH	44304	4/23/2014	Spoke to pharmacist along with Lisa the technician about Butrans dosing, conversions, patient types and asked about the 15mcg back order. Lisa said McKesson has 12 available to order. I asked the pharmacist to order and he said they only dispense the 5 and 10mcg doses and just dispensed their last 10mcg yesterday. I asked if he reorders right away and he said he will get around to it. I asked Lisa to order. Discussed OxyContin doses,titration and conversions from IR oxycodone and Percocet. Reviewed copy cards for each product.
PPLPMDL0020000001	Munroe Falls	OH	44262	4/23/2014	Short call in hallway as dr was going into an exam room. I told her there is a new OxyContin conversions and titration guide and showed it to her. I asked for continued business and to convert more patients from patients. I showed her the Kathy profile and asked her to please just try it again and to not miss out on opportunities.
PPLPMDL0020000001					



	Barberton	OH	44203	4/23/2014	Met the doctor. Discussed FDA insight. Dr was aware of OxyContin's reformulation. Dr said he writes both OxyContin and Butrans. Dr said he likes that Butrans is dosed with 4 patches a month. Dr said he will turn to an extended release after vikodin for Butrans or after short acting oxycodone product being dosed three or more times a day. Dr said he doesn't see patients a lot that are appropriate for Butrans. Because he feels his patients are dosed at higher mg and won't convert to Butrans. We reviewed Initiation guide. He said most of his patients fall in the 10mcg starting dose, however he usually starts them all on 5mcg and will titrate. Reviewed the opioid naive study results, and went over the pain reduction insight.
PPLPMDL0020000001	Stow	OH	44224	4/23/2014	Quick call at front counter and told her about the FDA draft guidance letter and showed her the tier 1&3 for OxyContin. I told I'm telling her this because abuse deterrent studies are very important to the FDA and OxyContin had them in 2010. Stephanie said its good to know and she has no issues using it. I asked her to conversion from IR oxycodone or Percocet when a dose adjustment is required. She said ok. I asked her to also continue to identify patients on tramadol and vicoden as good candidates for Butrans. Left her the new OxyContin conversion and titration guide.
PPLPMDL0020000001	Cleveland	OH	44195	4/23/2014	Reviewed OxyContin 7 tablet strengths every 12 hours along with Butrans for those patients requiring around the clock analgesia, Said she will consider, nothing new learned
PPLPMDL0020000001	Stow	OH	44224	4/23/2014	Asked Jamie the office manager to see the doctor. Fouad was an hour behind and he came out to discharge a patient. I asked him for a minute. I told him about the FDA go draft guidance letter and showed him the pages in the MVA. Dr said that's good to know but already said he cill continues to feel comfortable using it. I told him I hope it gives him piece of mind when reviewing the tiers OxyContin has. Dr said it does. I told him that he also tells me tow things almost every time we talk over lunch about Butrans. First that it works and the patients like it. Second, that he wishes it would be covered on more insurance plans. I explained the two new Medicare plans and told him that UHC and Caremark account for about 45% of his total Medicare business and about 75% of his Medicare business is covered without restriction. Dr said that's good to know and to make sure I have Jamie send a copy to the home office.
PPLPMDL0020000001	Cleveland	OH	44127	4/23/2014	Reviewed Butrans for those Tramadol failures requiring around the clock analgesia, Formulary and Savings card review, Also reminded of OxyContin 7 tablet strengths every 12 hours. Said Ok and will have Renee work on getting PA's
PPLPMDL0020000001	Akron	OH	44304	4/23/2014	Asked dr for a quick second about OxyContin and Butrans? Dr said he'll give me 30 seconds. I told him about the FDA draft letter and showed him the tier selection 1&3. I told him I was telling him this because abuse deterrent properties in opioids are extremely important and OxyContin change its formulation to meet this need in 2010. I asked to plead keep thinking about oxycontin's ability to take conversions from IR oxycodone or Percocet and its a 1:1 ratio. Dr said ok. I told him to please continue looking for candidates for Butrans who are on tramadol or vicoden.
PPLPMDL0020000001	Cleveland	OH	44127	4/24/2014	Reviewed OxyContin as the first ER opioid with FDA approved Tier 1/3 labeling that describes abuse deterrent characteristics, Said he will consider for appropriate patients, Reminded of Butrans for those Tramadol failures requiring around the clock analgesia
PPLPMDL0020000001	C. Falls	OH	44223	4/24/2014	Spoke with Cindy and Denise about OxyContin dispensing from physicians in the area. Denise said the most they see is from pain management which isn't much. None from falls family practice or other family in the area. Cindy said she sees some from Pitt. Discussed Butrans dispensing, 15mcg back order. Denise said the back order is up and they have it to order. Denise said they have 2 on the shelf. Denise spoke to me about how in May the FDA is looking to make vicoden and schedule 2 medicine.
PPLPMDL0020000001	Cleveland Heights	OH	44118	4/24/2014	Reviewed OxyContin Initiation/Titration, 7 tablet strengths every 12 hours along with Butrans for those Tramadol failures requiring around the clock analgesia, Said Ok will consider for appropriate patients,
PPLPMDL0020000001	Cleveland	OH	44127	4/24/2014	Discussed Butrans Experience program, reviewed for those Tramadol failures requiring around the clock analgesia, along with OxyContin 7 tablet strengths every 12 hours Said Ok will consider for appropriate patients.
PPLPMDL0020000001	Cleveland Hts	OH	44118	4/24/2014	Reviewed OxyContin 7 tablet strengths every 12 hours, Savings Cards along with Butrans patient experience program, Said Ok will consider for appropriate patients, Asked to book appt to further discuss with Sherisse NP
PPLPMDL0020000001	Cleveland	OH	44118	4/24/2014	Reviewed OxyContin 7 tablet strengths every 12 hours, Savings Cards along with Butrans patient experience program, Said Ok will consider for appropriate patients,
PPLPMDL0020000001	North Olmsted	OH	44070	4/24/2014	Spoke to Nadia the head tech, Rita and Paula the pharmacists were on vacation. They had a floater that was too behind to talk. Gave her the reprint to distribute, e said she has seen Butrans come thru and I asked if she does anything for the patients she said no and her biggest interest is in managed care because she handles all the managed care scripts processed.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	4/24/2014	Quick hello to dr in hallway. She said she isn't have time so I asked her to convert more of her Percocet patients to OxyContin and tramadol to Butrans. Nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44118	4/24/2014	Remove from OxyContin target list. Not at this location. Located at 18901 LakeShore Blvd Euclid OH 44119 - 216-682-7500
	Cuyahoga Falls	OH	44223	4/24/2014	I told dr that after our last discussion I was thinking about him saying that he would ask his oriens if they have met their deductible then decide to prescribe Butrans or not. I told him to not do that and discussed insurance coverage. I told him that the few patients with high copay was a small proportion of patients who pay a fair price for a branded medicine. Dr agreed. I told him about Caremark and UHC aarp coverage and how it affects his Medicare business. Dr said that's great to know and it will definitely help. I asked him to continue starting Butrans after NSAIDs or tramadol. I told him that his Percocet 20mg patients are still candidates for OxyContin 10mg and it is before his cutoff of 3 pills a day. Dr said he knows but doesn't want that in his practice. Nothing else learned.
PPLPMDL0020000001	Westlake	OH	44145	4/24/2014	Rachael the nurse. Spoke to dr hohn about how she treats patient in pain and she said she refers them out to pain management for most her patients cause she said the Ohio laws don't want prescribers writing opioids. I introduced her to Butrans, she said it was an option to keep in mind.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/24/2014	Good discussion about OxyContin and Butrans. I first asked him how often his patients ask him for OxyContin that aren't already on it? Dr said they usually don't but they ask for Percocet. I told him that's interesting because I told him I'm guessing his patients on Percocet have been on it for an extended period of time. I asked why he won't switch some of those patients to OxyContin? Dr said he is trying to do that and then spoke about insurance difficulties. I asked him for more conversions to OxyContin from IR oxycodone. Discussed insurance coverage with Liz. I asked him to use Butrans clinically again and use it in the right patient like Kathy. Dr said he has used it and may consider it again.
PPLPMDL0020000001	Westlake	OH	44145	4/24/2014	Window. Something to think about today, your Percocet dr patients taking their medication around the clock, if they require an extended release products and are appropriate, please remember OxyContin. She said yes she needs to remember to use it more. She told me she wrote a Butrans script like she said she would for the patient type we discussed previous call. SHE said she has 4 more she wants to convert to Butrans here soon on their next visit. Reminded her of the coupons, she said she handed them out to the patient and she is awaiting their feed back soon.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/24/2014	Spoke to Glenn and Tara about the new Medicare coverage for Butrans. I told him that I know the Medicare side of business for all the doctors in the practice is extremely important. I told Glenn about Caremark and UHC AARP coverage and that with dr Sable alone those two plans account for about 40% of his entire Medicare population. Glenn said that's great to know and he wrote the information down. I asked Glenn if he has any denial forms for me on Butrans and he said no and things have been much better recently. Glenn said they just got two Caresource PA's go through and some commercial plans are covering it now that didn't before and said he can't remember which ones they were. Tara said she will let Jake Sisko know about it.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/24/2014	I asked dr what he is currently doing for his patients who are not to goal on wire vicoden or Percocet? Dr said he will titrate up to about 3-4 pills a day then usually refer out. I asked him why he titrates up on a product like Percocet? Dr said its just what he does. I showed him OxyContin dosing and conversions and asked him if it makes sense to convert a patient to the q12 oxycodone instead of continuing to titrate and refill? Dr said he knows but doesn't like to prescribe narcotics anyway. I told him he's already doing it though. Dr said he knows. I asked him why it's ok to prescribe and fill Percocet but not to write OxyContin? Dr said that's a good question. I told him to please convert just one patient and see what happens. Dr said ok. I quickly reviewed the Butrans conversion and titration guide and asked him to also just give it a shot so he will know clinically.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/24/2014	Confirmed drs location at 3033 state road. Dr has been at unity for approx 3 years. Spoke to his ma Mary about OxyContin and Butrans. Mary didn't know about Butrans so I discussed all key selling messages. I asked her if she thinks drs would be interested? She said he doesn't write much for pain but to give it a try. Office closed for reps at 3:30pm. Left with OxyContin conversions and titration guide and Mary said he may have one patient on
PPLPMDL0020000001	Cleveland Hts	OH	44118	4/24/2014	Reviewed OxyContin and Butrans Initiation/Titration guides - nothing new learned
PPLPMDL0020000001	Westlake	OH	44145	4/24/2014	Discussed Percocet patient who is taking 2 short acting opioids a day. Dr said he has these types of patients but said he has patients on 4 or 5 a day of norco or oxycodone. I asked him why he would give them an extended release product. Dr said it depends on if the patients want to take it or not. He said they like their pills. We discussed how many other products to do you write 4 or 5 a day for...he said very few. We reviewed molecule of OxyContin and highlighted a different delivery system option for his patients he is already treating for chronic pain. Provided him with FDA insight...dr didn't have much to say about this. Asked who he is writing OxyContin for currently and he said his old timers. Highlighted the ten mg and reviewed it was an opioid naive dose. Also talked about tailor the dose to a patients need starting with the lowest most effective dose. Dr agreed. Managed care reviewed. Bridged talking about his over 65 year old patients. After review of his practice dr said he has a great deal of Silverscript and AARP. Covered Butrans. Talked about the Pam patient. Yet he said his patients are already on higher doses then in the patient profiler. Reviewed both studies and pain reduction scores, shared pain reduction insight. Dr was more interested in the opioid experienced study. Talked about his Tramadol patients but dr didn't think he had many on Tramadol and said he saw more norco patients. Discussed Butrans experienced kits and dr said he would give them out.
PPLPMDL0020000001	Stow	OH	44224	4/24/2014	Led discussion about the FDA draft guidance and read the bullet at the top of the page about the tiers for OxyContin. I told her that I hope it gives her even more piece of mind when it comes to prescribing OxyContin. I told her that she should be using it for those already on oxycodone and discussed the 10mg page and conversions. Dr said that's good information and she wants to use it more but runs into insurance issues on her Medicare patients. I asked her if she knows of the plan or plans and she said no. I told her I hope it may be necessary to complete the PA at times. Dr said those patients must first fail methadone, ER Morohine or fentanyl first. I told her I understand and reviewed the plans without restriction. Reviewed the Kathy profile for butrans and asked for her to just try it clinically.
PPLPMDL0020000001	Stow	OH	44224	4/24/2014	Met drs new ma Laura while talking to dr about Butrans and OxyContin. I told him about the hydrocodone issue and that we have a big problem on our hands w/ IR opioids being used for around the clock pain. Dr agreed and said that's why he doesn't write much for pain but said he has found a place for Butrans. I asked him where and he said tramadol and vicoden when he knows he can control their pain and they are not candidates for referral to specialists. I told him I'm glad for that and reviewed the Scott profile. Discussed the patient information guide and new Medicare plan coverage with Caremark and AARP. Dr said that's big. I told him it is and to look more at that segment of his patient population as good candidates when they meet the indication. Reminded him to use OxyContin when patients need more Percocet and to dose it q12. Reviewed key selling principles to Laura as she didn't know about it.
PPLPMDL0020000001	Cleveland	OH	44109	4/25/2014	Reviewed OxyContin every 12 hours along with Butrans for those patients requiring around the clock analgesia, Myrna said ok, Nickels, Torres
PPLPMDL0020000001	Brooklyn	OH	44144	4/25/2014	Quick review of OxyContin 7 tablet strengths every 12 hours along with Butrans for those Tramadol failures requiring around the clock analgesia, Said Ok will prescribe for appropriate patients that can afford branded products
PPLPMDL0020000001	Cleveland	OH	44113	4/25/2014	Reviewed OxyContin And Butrans initiation guides, FPI's Said no further info requested at this time said he refers to PMR,
PPLPMDL0020000001	Akron	OH	44312	4/25/2014	Discussed BEP with Karen who is dr Lonsdorf's head RN. Explained the kit and to be used for new starts on Butrans only. Karen said she thought it sounds like a great program and will explain to the patient. Left Butrans and OxyContin formulary grids and told her about the oxycontin and conversion guide.
PPLPMDL0020000001	Euclid	OH	44123	4/25/2014	Met w pharmacist Jeff after Dr Tamaskars office called me & stated they can't find Butrans savings cards. I offered to drop Butrans savings card off for 61 yr old female patient; whom dr wrote Butrans right after I left him at lunch. Jeff had to order Butrans for patient. I asked him to call patient & let her know she must ACTIVATE card to get trial, savings PRIOR to her picking up RX. Explained & showed Jeff how cards designed to work. Discussed & left patient guides. He is leaving at 3, pharmacist Mary is next shift. He will let Mary know. Also spoke with tech Shawna, discussed, left Butrans NDC brochure/FPI. Left OxyContin reformulation folder, left protect your pharmacy brochure. Jeff states he's getting less OxyContin scripts recently. Asked him why he thinks that is; he replied not sure.
PPLPMDL0020000001	Cleveland	OH	44113	4/25/2014	Visited Pain Dept. (Shen, Novak, Daoud) OxyContin/Butrans Initiation/Titration guides
PPLPMDL0020000001	Cleveland	OH	44113	4/25/2014	Reviewed OxyContin/Butrans Initiation/Titration guides, FPI, said no further contact is needed at this time, will keep info for future reference

PPLPMDL0020000001	Stow	OH	44224	4/25/2014	Discussion with Sandra following up from last call. I reviewed the new Medicare plans with coverage for Butrans and asked her how she is doing getting patients down on their IR opioids? Sandra said she is pretty direct and said that she tells patients that it is the office policy and are following the state recommendations for opioid use. I asked her to use more Butrans while tapering down patients from IR opioids especially tramadol and vicoden patients and showed her the Kathy profile. Sandra said she is trying and the Medicare plans will help because cost is really an issue for many of her patients. I asked if OxyContin is a product she would use when tapering down patients from IR oxycodone? She said she is considering it. I gave her the OxyContin conversion and titration guide and told her about the 1:1 conversion and dosing.
PPLPMDL0020000001	Stow	OH	44224	4/25/2014	Spoke to Greg the pharmacist if he has been seeing more Butrans as the office continues to taper patients down off IR opioids? Gregg said he has not. Greg said he may see some more and said he thinks their decision is a good one but they are losing patients and employees. I asked him about stocking of Butrans and asked him to please keep all doses in stock. Greg said they move mostly 5 and 10mcg and some 20mcg but have not seen the 15mcg. OxyContin conversion and titration guide to Greg and he said he only dispenses Percocet and oxycodone plan. I asked him if oxycontin makes sense for those patients? Greg said he understands but said I probably won't see any from their office.
PPLPMDL0020000001	Akron	OH	44313	4/25/2014	I asked nancy dr Hershberger's nurse if he has outpatients that have been taking Percocet for at least 6 months? Nancy said she thinks he does. I discussed with her the option of OxyContin for those patients especially those who need dose adjustments. Nancy said I should ask him those questions. I told her I have and nothing has come of it. Nancy said he's a creature of habit. I told dr the oxycodone insight and asked him if he thinks it's a problem? Dr said in most cases it is and said he knows he should be converting some folks. I asked him what he's waiting for? Dr said he doesn't know and will try. I once again told dr that he used Butrans a couple of times and he has told me it's been successful. I asked him what's holding him back from that? Dr said he will try to find more patients. Left him with the Scott profile.
PPLPMDL0020000001	Cleveland	OH	44113	4/25/2014	Reviewed OxyContin 7 tablet strengths every 12 hours along with Butrans for those Tramadol failures who require around the clock analgesia. Said Ok, very rarely prescribes opioids in her outpatient clinic but will consider
PPLPMDL0020000001	Brooklyn	OH	44144	4/25/2014	Reviewed OxyContin 7 tablet strengths every 12 hours along with Butrans for those patients requiring around the clock analgesia who are not adequately controlled on present therapy, Said Ok, will consider, not treating or seeing many patients anymore
PPLPMDL0020000001	Cleveland	OH	44144	4/25/2014	Quick Review of OxyContin 7 tablet strengths every 12 hours along with Butrans for those Tramadol failures requiring around the clock analgesia, Said she will consider, treating more pain due to her picking up Dr. Hilton's patients, Book lunch appt to discuss further
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/25/2014	Good discussion with dr Souzalinitski and staff including new RN Mel. Discussed Butrans opioid experience trial, use in special populations, and new managed care coverage for Medicare. Mel asked many questions about Butrans starting doses, conversions, AE's and application sites. Dr said Butrans has been a blessing for him and his patients because he doesn't want anyone in pain around the clock on IR opioids. Dr asked about additional doses because he wants more than the 20mcg dose. I told dr I am not aware of it and when that may happen. Discussed FDA draft guidance insight and discussed tiers for OxyContin. Dr said he will use it but said he would rather use Butrans for his Percocet patients. Dr said most patients he starts are on either 5 or 10mcg dose and a few on 15mcg but said they have been hard to find. I discussed e back order and that it is available to order from pharmacies now at worst case scenario would be 24 hours before patient can get it.
PPLPMDL0020000001	Stow	OH	44224	4/25/2014	Asked Sandra as I saw her behind the front counter for a minute. Was talking with her and dr Yang walked up. I asked dr Yang how the tapering down of IR opioids to ER opioids is doing? Dr said it's going ok. I told him that Butrans and OxyContin are perfect ER opioids as the process progresses. Dr said he doesn't see himself using OxyContin but will use Butrans when patients get under 30mg of morphine daily dose. I told him I'm glad he sees a place for Butrans and asked him why not OxyContin especially the patients already on oxycodone? Dr said he doesn't have time to discuss it but he understands my point. Nothing else learned.
PPLPMDL0020000001	Barberton	OH	44203	4/28/2014	Spoke to dr and his office manager/nurse sarah regarding FDA insight and his thoughts on it. He said he isn't concerned cause he doesn't write much opioids. We talked about the scheduling of OxyContin and Butrans and we talked about the last time he wrote OxyContin. Dr said he doesn't write much extended release products. Reviewed the ten mg option dosed every 12 hours. I asked at what point would he change the delivery system from short acting to extended release. He said not too often. I asked him to explain. He said he will write two to three every 6 hours and after that he refers out. I asked what's the point of adding a third pill a day? He said for better pain control, I said when? He said through out the day. I said so you are trying to give them enough pills so they can have coverage though out the day? Dr said yes. I said isn't that what an extended release product does? He said yes. Dr said he doesn't like to titrate cause treating pain is subjective and hard to get right. Reviewed Butrans. How to start, when he can titrate and max dose. Dr said he isn't sold yet on Butrans yet. He wanted comparisons to other products, saboxone was mentioned. I stated there are no comparisons. Discussed half life of Butrans. The transdermal patch dosing, placement. And reviewed the naive study, dr said the pain results seemed impressive. I asked if it was impressive enough to try and write Butrans Nd the dr said he still needs time to think about it. I asked for a follow up.
PPLPMDL0020000001	Barberton	OH	44203	4/28/2014	Asked the doctor the last time he write for an extended release opioid? Dr said he writes OxyContin. Reviewed the ten mg starting dose fp every 12 hours and asked him if he would consider the option after Percocet if they were appropriate. Dr asked about managed care. Highlighted Butrans for caresource patient. Dreview of dosing.
PPLPMDL0020000001	Cleveland Hts	OH	44118	4/28/2014	Led with Insight #16, Discussed OxyContin as the first ER Opioid with FDA approved Tier 1 and # labeling that describes abuse Deterrent Characteristics, Said Ok Reviewed Butrans for those patients not controlled on present therapy who require around the clock analgesia. Discussed Butrans Experience program, Said he will consider for appropriate patients that can tolerate.
PPLPMDL0020000001	Akron	OH	44333	4/28/2014	Spoke to Missy the ma and Jenny the RN about the doctors and how they treat pain. Jenny said that dr Bermuda and dr maybe both treat patients above acute pain but once patients need more than Percocet they refer to pain management. I asked if dr Bermuda has ever used a patch for pain? Jenny said they both like the option of a patch. I explained Butrans dosing, indication, conversions and patient types. Jenny said it might be a good product for them because they have used patches. Missy said that the office will be getting a new NP and MD in May and Lunches on Tues/Thurs will begin in June.
PPLPMDL0020000001	Akron	OH	44333	4/28/2014	Discussed FDA draft guidance insight and tiers for OxyContin. Discussed Maggie profile for OxyContin and Kathy for Butrans. Becky said that she knows and the doctors know that there are many patients that should be converted to ER opioids but it just doesn't happen as much as it should. Becky told me that she is the one that sees patients in for follow ups for dr Oyakawa and is the one who does his refills. I asked Becky why she is not reassessing them as possibly OxyContin or Butrans candidates? She said she doesn't know why but said that overestimate next 6 months she will do that and discuss those patients with dr Oyakawa to convert to long acting. I told her that's great and I will follow up.
PPLPMDL0020000001	Fairlawn	OH	44333	4/28/2014	Spoke with Sue and Jessica about stocking and ordering of Butrans 15mcg. Jessica said they have one 15 on the shelf and may not order until they dispense the one on the shelf. She said she thinks its been on the shelf for a while. Discussed new Medicare D wins and reviewed OxyContin dosing, and conversions. I asked her if they see a good amount of IR oxycodone or Percocet? Jessica said they see way too much and said she wishes patients would be converted to OxyContin. She said these patients are always saying how much pain they are in. She wished me luck getting these doctors to convert.
PPLPMDL0020000001	Norton	OH	44203	4/28/2014	Asked if she was able to write schedule 2 products like OxyContin and she said no. Reviewed FDA insight and she said she is trying not to write any opioids that require chronic treatment. I asked her how long does she treat someone for osteoarthritis arthritis? She said ongoing. I asked if she has a preferred product for their pain, she said Tramadol or a little norco. She also stated she didn't have a lot of elderly patients in her practice. She said most of her patients are under 65. Reviewed dosing with Butrans and the Tramadol insight. Wanda the np could not see Butrans fitting in her practice nor OxyContin, per Wanda.
PPLPMDL0020000001	Fairlawn	OH	44333	4/28/2014	Spoke with dr Meli's nurse at lunch and asked to get 60 seconds with him about OxyContin and Butrans. Kathy walked me to his office. I asked dr when he is currently converting patients to OxyContin from Percocet or oxycodone plain? Dr said he doesn't have many patients on oxycodone but said that he has no problem starting OxyContin. I showed dr the conversions and told him he can start even an opioid naive patient on OxyContin 10mg q12 or those at 20mg Percocet. I asked dr if he has patients like that. Dr said maybe one or two. I asked if he would assess them for OxyContin? Dr said ok. Reviewed Scott profile for Butrans and asked if he has patients like him? Dr said yes. Dr asked about conversions. Discussed conversions and showed patch application sites. Reviewed schedule 3,7 day transdermal system.
PPLPMDL0020000001	Norton	OH	44203	4/28/2014	Asked the pharmacist if he has seen any Butrans come thru and he said yes but didn't say who. Reviewed the patch placement and titration. Also talked about the FDA insight and OxyContin page 15 of visual aid. <font color=blue><b>CHUDAKOB's query on 04/28/2014</b></font>You placed OxyContin in the first position, yet led with Butrans. With the majority of your calls on OxyContin, why lead with Butrans in the pharmacy?<font color=green><b>BARTOLI's response on 04/29/2014</b></font>Valid point. OxyContin should be the lead. The drop down should reflect Butrans and then OxyContin. Shall I leave it or change it?<font color=blue><b>CHUDAKOB added notes on 04/30/2014</b></font>You have to leave it at it was already communicated.
PPLPMDL0020000001	Fairlawn	OH	44333	4/28/2014	Discussed FDA draft guidance insight and tiers for OxyContin. Discussed oxycodone I sit as well and asked dr to review the Maggie profile and tell me if she would do anything different? Dr said she doesn't have a ought experience with OxyContin yet but said it makes sense to start OxyContin sooner on in treatment than the profile shows. Reviewed conversions and titration. Discussed Kathy profile for Butrans and asked her to identify patients with similar profile. She said it makes sense and will try it out.
PPLPMDL0020000001	akron	OH	44333	4/28/2014	Told dr that he needs to be reassessing his patients who are currently taking more than 3 pills a day for pain. I asked dr if 3 pills is a reasonable number that a typically considered pain around the clock? Dr said usually yes. I showed him the Scott profile and reviewed it. I asked him if he would do anything different than prescribe Butrans? Dr said he has to remind himself about using Butrans at that point because he forgets. Dr asked about insurance coverage and where he should focus. I discussed the plans that he deals with in his office and discussed the new Medicare and wins. Dr said those plans UHC aarp and Caremark are big for him. I asked him to focus on tramadol patients who he's ready to refill or titrate as Butrans candidates. Reviewed OxyContin dosing and Maggie profile. Dr said he will try to use it more and convert patients.
PPLPMDL0020000001	Cleveland	OH	44195	4/28/2014	Visited Pain dept.(Fellows) OxyContin/Butrans initiation/Titration, program invite
PPLPMDL0020000001	Euclid	OH	44117	4/28/2014	Met with med asst Lori up front first. Left 4 spine posters, how to protect your practice, Butrans patient guides. Explained how trial, savings works for commercial cash pay patients for Butrans and how \$70 OxyContin card works for commercial/cash patient population. Discussed how OxyContin savings cards work with 14-day rx. Discussed writing "every 12 hour script" for OxyContin with Dr D.
PPLPMDL0020000001	Highland Heights	OH	44143	4/28/2014	Discussed 10 mg start dose, START principles and left conversion titration guide. Discussed Butrans after Tramadol, 4 strengths for dosing flexibility.
PPLPMDL0020000001	Akron	OH	44333	4/28/2014	Met with med asst in hallway. Left 3 PAP posters, reminder of Butrans Med D wins. Reminded dr of Med D population, 2 large plans are UHC AARP and Caremark, Silverscripts Med D - please keep those plans in mind. OxyContin; opioid naive dose of 10 mg discussed, left Conversion/Titration guide.
PPLPMDL0020000001	Akron	OH	44333	4/28/2014	I asked dr at the window at what point does he convert Percocet patients to OxyContin? Dr said it depends and told me he uses OxyContin. I told him that's great but I feel like you may be missing opportunities for conversions when a patient has either been on IR oxycodone for 3+ months or ready for a dose adjustment. Dr said again that he uses it. I told him to use it more and handed him a conversion and titration guide. I also told him about using Butrans now for more of his Medicare D patients due to UHC aarp and Caremark silverscript coverage. Dr said ok. I spoke to Marsha about new Butrans coverage.
PPLPMDL0020000001	University Hts	OH	44118	4/28/2014	Window call Led with Insight #16, Discussed OxyContin as the first ER Opioid with FDA approved Tier 1 and # labeling that describes abuse Deterrent Characteristics, Said Ok Reviewed Butrans for those patients not controlled on present therapy who require around the clock analgesia, Said he will consider, booked lunch appt to further discuss
PPLPMDL0020000001	Cleveland Hts	OH	44118	4/28/2014	Reviewed OxyContin every 12 hours, Butrans for those Tramadol failures requiring around the clock analgesia, Will relay to RPh, See some from Dr. Harris, no further info learned
PPLPMDL0020000001	Norton	OH	44203	4/28/2014	Spoke to Pam and Christy the office manager and coordinator today about OxyContin and Butrans. Is used managed care coverage in their med part d segment of patients. Talked about every 12 hour dosing with OxyContin and weekly dosing with Butrans.
PPLPMDL0020000001	Akron	OH	44333	4/28/2014	Caught dr at front counter and asked him if he's having success converting patients on IR oxycodone to q12 OxyContin? Dr said he's doing his best. I showed him the conversions from the main visad and asked him before he goes to refill the IR to consider the appropriateness of OxyContin. Dr said ok. I asked him if he's had any experience with Butrans recently? Dr said he has used it. I asked him if he would also reevaluate his vicoden patients for possible Butrans candidates. Dr said ok. Noting else learned.
PPLPMDL0020000001	Cleveland	OH	44195	4/28/2014	Quick OxyContin reminder 7 tablet strengths every 12 hours, in addition Butrans 7 day transdermal for those patients requiring around the clock analgesia, Said no time to talk, email appt request, Will review info and contact if further info needed

	Fairlawn	OH	44333	4/28/2014	Led off discussion with the FDA draft guidance insight and follow it up by discussing tiers for OxyContin. Dr had no comment. Discussed Maggie profile for OxyContin and asked him if he would have treated the patient differently? Dr said once the patient gets to 40mg of oxycodone would send to pain management. I asked if he allows patients to get to that amount of IR? Dr said no and specific to her profile he would have stated OxyContin at either 5mg q6 or 10mg q6. I told dr that's good to hear and to find patients are are currently in a similar profile. Dr said he will and knows he's trying. Discussed Kathy profile for Butrans and asked for him to find patient similar to Kathy. Dr said he recently write a Butrans for a patient on vicoden. I asked for future prescriptions when he comes upon patients on tramadol or vicoden.
PPLPMDL0020000001	Cleveland	OH	44195	4/28/2014	Led with Insight #16, Discussed OxyContin as the first ER opioid with FDA approved Tier 1 and # labeling that describes abuse Deterrent Characteristics, Said Ok Reviewed Butrans for those patients not controlled on present therapy who require around the clock analgesia, Said she will consider, will be leaving for Wisconsin this coming month
PPLPMDL0020000001	Cleveland	OH	44118	4/28/2014	Led with Insight #16, Discussed OxyContin as the first ER opioid with FDA approved Tier 1 and # labeling that describes abuse Deterrent Characteristics, Said Ok Reviewed Butrans for those patients not controlled on present therapy who require around the clock analgesia, Said she will consider, Reviewed Butrans experience program
PPLPMDL0020000001	Norton	OH	44203	4/28/2014	Quick reminder on OxyContin dosed every 12 hours for appropriTe patients and managed care highlights. Caresource reminder for Butrans. Also discussed commercial patients can use the experienced kits. Reviewed dosing, starting dose.
	Westlake	OH	44145	4/29/2014	Asked her about the last time she used the ten mg of OxyContin. She said she doesn't write for many chronic opioids. I said OxyContin's indication doesn't state he word chronic. But definitely it's not to used prn or in Acute cases. She agreed. I asked her to think about her Tramadol patients and when they need coverage atc for an extended period of time she has two options. Butrans 5mcg or OxyContin 10mg. Both starting doses. With coupons available for the commercially insured.
PPLPMDL0020000001	Valley View	OH	44125	4/29/2014	Reviewed OxyContin 7 Tablet strengths, every 12hours, 1st ER opioid with FDA approved Tier 1&3 labeling that describes abuse-deterrent characteristics,Savings Cards along with Butrans CIII, 7 day Transdermal,Initiation/Titration, around the clock opioid therapy
	Cleveland	OH	44127	4/29/2014	Reviewed Butrans experience program, Initiation/Titration said he will consider for appropriate patients asked for Geneva(OM) for assistance. Discussed Insight 16,in addition to OxyContin as the first ER opioid with approved Tier 1/3 labeling that describes abuse-deterrent characteristics. Said he will consider
PPLPMDL0020000001		OH	44195	4/29/2014	Quick OxyContin reminder 7 tablet strengths every 12 hours, formulary grid along with Butrans for those patients requiring around the clock analgesia, Said she will consider for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44195	4/29/2014	Reviewed OxyContin 7 tablet strengths every 12 hours along with being the first ER opioid approved Tier 1 & 3 labeling that describes abuse-deterrent characteristics. Also reminded of Butrans for those patients requiring around the clock analgesia, Said Ok will consider for appropriate patients,
PPLPMDL0020000001	Akron	OH	44310	4/29/2014	I asked dr if Butrans was covered 100% for all his insurance plans how that would affect his prescribing of the product? Dr said obviously he would be able to use it more. I told him that Butrans is now covered on about 90% without restriction on his patients insurance plans and that for Medicare, UHC aarp and Caremark silverscript accounts for about 41% of all his Medicare business and they are now covered. Dr said that is a significant difference for Medicare and Shar said that AARP is big in their office along with BWC and Caresource. I explained the Medicare wins and asked for him to reevaluate those patients for Butrans. Dr said with all the opioid options he has, Butrans is at the top. Dr said OxyContin is different for him but said it does work. I asked him for continued business in his Medicare population.
PPLPMDL0020000001	Lakewood	OH	44107	4/29/2014	Discussed FDA insight. Dr said he will still write for OxyContin but not very often. Discussed dosing and why would someone write a short acting produc atc instead of a different delivery system. Dr said he agrees it's done and said habit. Talked about Butrans, scheduling and managed care med d and caresource patients. Reviewed dosing of Butrans. And dosing of OxyContin.
	Westlake	OH	44145	4/29/2014	I asked if he every thought about writing OxyContin 10mg after a Percocet patient for the atc pain. He told me he writes OxyContin. I said at what point would you move from a short acting to a control release product. Dr said it all depends. Something to think about today...showed hi. The Percocet conversion page in detail aid. And asked if it made sense. He said for some patients. Invited to Butrans dinner program. He said no, although he aid Wednesdays are good days for them. I asked what he needed to understand Butrans. He didn't really provide answer so I left him a Pam profile.
PPLPMDL0020000001	Mayfield Hts	OH	44124	4/29/2014	Quick hallway. Butrans now preferred UHC AARP Med D and Caremark Silverscripts Med D. Consider for patients who cannot tolerate oral pills.
PPLPMDL0020000001	Westlake	OH	44145	4/29/2014	Follow up with virginia he ma about the experience kits. Also touched on managed care for both Butrans and OxyContin. She doesn't think dr raslan will be attending the dinner program for Butrans on Wednesday.
PPLPMDL0020000001	Mayfield Heights	OH	44124	4/29/2014	Met with narcotic products coordinator Denise. Discussed items left for Frank, who's not in this after noon. She placed all on his desk. Let practice know I will be out of field until next Tues, to call tomorrow if they need anything further. Discussed OxyContin savings program, Butrans savings program & Butrans MED D wins.
	Westlake	OH	44145	4/29/2014	Spoke to Laura the office manager and Kristin the ma regarding their role in the office. They said dr only sees aprox ten ppl a day booked in half hour segments. They both said he refers out their pain patients but the doctor does write Percocet. I asked what they knew about OxyContin over the last few years. They were not aware of the reformulation. We talked about med d plans. Laura says she is the person to help the doctor remember to give out the coupons.<font color=blue><b><CHUDAKOB's query on 05/23/2014</b></font>-Lisa, you put down Butrans as a second position call, but nothing in the call notes.<font color=green><b><BARTOLI's response on 05/27/2014</b></font>-Butrans was discussed. Specially the scheduling and the dosing. We talked about the coupons for both products and the ma and office manager said they play a role in helping to remind the doctor to give them out.<font color=blue><b><CHUDAKOB added notes on 06/03/2014</b></font>-Ok. Thank you!. Please be sure to remember to include both product discussions in your call notes.
PPLPMDL0020000001	Valley View	OH	44125	4/29/2014	Reviewed OxyContin 7 Tablet strengths, every 12hours, 1st ER opioid with FDA approved Tier 1&3 labeling that describes abuse-deterrent characteristics,Savings Cards along with Butrans CIII, 7 day Transdermal,Initiation/Titration, around the clock opioid therapy
PPLPMDL0020000001	Cleveland	OH	44109	4/29/2014	Visited PMR/IM/Onc Depts(Harris,Olson, Angie,Gelehrter) OxyContin/Butrans Initiation/Titration guides and FPI's
PPLPMDL0020000001	Mayfield Heights	OH	44124	4/29/2014	Hallway. Josie in between injections/ procedures. OxyContin Tier 1, Tier 3 FDA approved labeling presented. START principles presented using OxyContin conversion, titration guide. Josie states she will read through later & this tool will be helpful to her. As a practice, they are trying to stay away from CII s. Discussed opioid naive dose, 10 mg, every 12 hrs, lowest effective dose. She will not use higher doses anyway she says. Discussed Butrans Pam profile briefly. Asked her to read. Presented Med D wins for Butrans. Josie reminded me that she cannot initiate Butrans or OxyContin, but she will refill scripts & she likes idea of our savings cards for patients. Left OxyContin savings flashcard, discussed fact that patients given 14-day script can use savings card every 14 days.
PPLPMDL0020000001	Lyndhurst	OH	44124	4/29/2014	Office mgr strates hectic day, none of the HCPs will be able to speak with me. Left packets of information for all HCPs including OxyContin conversion/titration guides, Butrans initiation guides. Also discussed Butrans Med D wins as of 4/1/14.
PPLPMDL0020000001	Westlake	OH	44145	4/29/2014	Reminded he about the 12 hour dosing with OxyContin and asked dr about the program Wednesday for Butrans. He thinks he may attend but needs to register.
PPLPMDL0020000001	Cleveland	OH	44109	4/29/2014	Quick Review of OxyContin 7 tablet strengths every 12 hours along with Butrans for those patients requiring around the clock analgesia, Said Ok, no time to talk, email appt request
PPLPMDL0020000001	Lyndhurst	OH	44124	4/29/2014	Met with med asst Julie at front window. Left and discussed Butrans initiation guide. Tried to sell BPE kits, Julie states he won't use them. He focuses on interventional therapy, injections, etc and doesn't manage many meds. She states he is not good at remembering to hand out savings cards of any kind. Discussed Butrans 4/1/14 Med D wins. Left OxyContin conversion guide; showed where START principles are; piece designed to help with conversion from Percocet/oxycodone to OxyContin. Left another invite for tomorrow's Moufawad program.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/29/2014	Spoke with Jake and his nurse Tara about BEP kits. Reviewed the program including identifying the right patients. Jake said he will certainly use them and thanked me for choosing him. I told dr that this is to be used for new patients. Jake said he's really likes Butrans and will use them up. He asked me once he's used all 5 if he can get more? I told him he can for sure and to have Tara just contact me. I asked him for continued business for Butrans and to identify patients referred to him on Percocet or oxycodone plain who might be candidate to be converted to q13 OxyContin. Jake said ok.<font color=blue><b><CHUDAKOB's query on 05/23/2014</b></font>-Cliff, I didn't know OxyContin was dosed every 13 hours?<font color=green><b><REICHCL's response on 05/27/2014</b></font>-Me neither. 12 hours.<font color=blue><b><CHUDAKOB added notes on 06/03/2014</b></font>-Thanks for the clarification.
PPLPMDL0020000001	Cleveland	OH	44109	4/29/2014	Quick OxyContin review, 7 tablet strengths every 12 hours along with Butrans, 7 day transdermal, Said Ok no further info needed or learned
PPLPMDL0020000001	Mayfield Heights	OH	44124	4/29/2014	Met with tech first then male pharmacist ( new, forgot to write name down, get next visit) thus is Walmart closest to Hillcrest Pain Mgt. It's surprising that they have zero Butrans in stock, and have yet to dispense. Left Butrans NDC code brochure, 1 patient guide & new pharmacy brochure on buprenorphine prescribing laws. They do dispense OxyContin. Discussed OxyContin controlled release, every 12 hour dosing; 7 strengths. Discussed & left protect your pharmacy brochure.
PPLPMDL0020000001	Olmsted Falls	OH	44138	4/29/2014	Reviewed managed care work both products and went over which schedule OxyContin and Butrans was listed under.<font color=blue><b><CHUDAKOB's query on 05/15/2014</b></font>-Who did you speak with on this non-HCP call? If you get access are you going to discuss access as you next call objective states?<font color=green><b><BARTOLI's response on 05/16/2014</b></font>-Tracey...the office manager. I'm trying to get back to see the doctor so that I can follow up with previous discussions and talk about hesitations regarding Butrans. Dr said that although he doesn't treat a lot of chronic pain, he does have a few and that Butrans may be an option. I'd like to remind on Initiation guide.<font color=blue><b><CHUDAKOB added notes on 05/19/2014</b></font>-That is a much better next call objective than access. Thank you!
PPLPMDL0020000001	Cleveland	OH	44112	4/30/2014	Led with Insight 16, briefly discussed abuse deterrent characteristics and the FDA approved Tier 1 and 3 labeling. Dr. said she wants to discontinue prescribing everything, but will consider for appropriate patients. Reminded of Butrans for those patients requiring around the clock analgesia. Nothing new learned
PPLPMDL0020000001	Lakewood	OH	44107	4/30/2014	Spoke to Jamie the ma regarding managed care coverage. She said they still treat a lot of pain patients but dr has referred many out. Highlighted commercial plan coverage. Saw the doctor, I said...something to think about tomorrow when you see that patient that is complaining that their current pain medication isn't controlling their pain. If appropriate, OxyContin dosed every 12 hours. Dr...Butrans when c-3 dosed weekly. 5mcg is the lowest dose of Butrans as the ten is the lowest dose of OxyContin.
PPLPMDL0020000001	Cleveland	OH	44106	4/30/2014	Reviewed Insight 16 and discussed OxyContin as a FDA approved Tier 1/3 with Abuse deterrent characteristics, Reminded of 7 tablet strengths every 12hours, Said he will continue to find appropriate patients, in addition reviewed Butrans for those patients requiring around the clock analgesia, Savings Cards and Initiation/Titration, Diane agree to help in reminding Dr.
PPLPMDL0020000001	Berea	OH	44017	4/30/2014	I asked her about her schedule 2 license. She said she doesn't have it so she cane write it. Gave her the FDA insight and reminded on OxyContin being the first to have it in labeling per page 15 of detail aid. I asked why is it so out of the question to ask an appropriate patient to take an opioid every 12 hours? She laughed and said schedule two are thought to be more addicting. Reviewed the Percocet to OxyContin of visual aid. And she said she would think about it. As for Butrans, talked about med d and caresource coverage.
PPLPMDL0020000001	cleveland	OH	44135	4/30/2014	Left OxyContin coupons, Butrans program invite and spoke to the scheduling person regarding access and food policy. She said no food.n
PPLPMDL0020000001	Stow	OH	44224	4/30/2014	I asked dr if he has a threshold of vicoden and Percocet to indicate when he moves to the ER opioid? Dr said not really and said he just wants to try and get his patients on ER opioids and get them off short acting because it just doesn't make sense. I told dr that both OxyContin and Butrans are options that meet that need and asked dr if he will continue to find patients to on very to OxyContin and those for Butrans would be ones who are on either tramadol or vicoden. Dr said ok. I told him about the Butrans UHC aarp and Caremark coverages. Dr said that is great news and said it makes him feel more comfortable with using it for his older patients.
PPLPMDL0020000001	Cleveland	OH	44135	4/30/2014	Spoke to the medical person up front and left a variety of coupons and literature for the doctors.m
PPLPMDL0020000001	Fairlawn	OH	44333	4/30/2014	Quick hello over the counter and I asked him to please tell me about a patient he has recently converted to OxyContin from Percocet. Dr said he tries as much as he can to convert patients and said many of them are leary at first but said most quickly realize it works. I told dr that's great and I asked him what works means? Dr said they get pain relief. I asked dr for more OxyContin business and to also use Butrans when patients on tramadol or vicoden don't meet expectations.
PPLPMDL0020000001	Cleveland	OH	44106	4/30/2014	Dr. Reviewed OxyContin and Butrans PI's along with Initiation/Titration guides, no further info requested at this time, will keep contact info for future reference. His main focus is in academia drug development

PPLPMDL0020000001	Richmond Heights	OH	44143	4/30/2014	Met with med asst at front window. Asked her to check savings cards for expiration dates. Found that Dr Moufawad's Butrans and OxyContin cards had expired. Let 1 pack Butrans cards, formulary grids for both products, OxyContin savings card flashcard, Butrans initiation titration guide. Med Asst confirmed Dr. is at Richmond Hts. EVERY Friday.
PPLPMDL0020000001	Cleveland	OH	44106	4/30/2014	Visited Seidman Onc/Pain (Sahgal, Hayek, Alin, Dowlati) OxyContin/Butrans savings Cards, Initiation/Titration guides. Appt requests
PPLPMDL0020000001	Cleveland	OH	44106	4/30/2014	Quick review of OxyContin 7 tablet strengths every 12 hours, Savings Cards along with Butrans for those patients requiring around the clock analgesia, Said Ok, couldn't talk, said to email next month appt requests,
PPLPMDL0020000001	Cleveland	OH	44106	4/30/2014	Reviewed w/ Marge OxyContin every 12 hours along with Butrans for those Tramadol failures requiring around the clock analgesia, Said she will recommend if appropriate, Nothing new learned
PPLPMDL0020000001	fairview park	OH	44111	4/30/2014	Discussed stocking and many but not all strengths of both OxyContin and Butrans were available and could get it. We talked about dosing OxyContin every 12 hours and coupons available to patients that are commercially insured. Talked about Butrans and where to place the patch. I asked about competitor pricing, but he wouldn't tell me. Highlighted steady state, dosing and supplementation.
PPLPMDL0020000001	Cleveland	OH	44106	4/30/2014	Talked with Terrah, reminded of OxyContin 7 tablet strengths every 12 hours along with Butrans for those patients requiring around the clock analgesia. Asked for appt. Will discuss with Dr. who is now conducting blocks 1 day a week at Ahuja
PPLPMDL0020000001	Lakewood	OH	44107	4/30/2014	Dr was not in office, ran to hospital. Discussed managed care and if she remembered any problem insurance plans I should no about. She said no. Talked with office manager about Butrans dinner program for dr orra but she said he could attend today. She asked me about Butrans managed care and dosing. So it was addressed and OxyContin's every 12 hour dosing. When I asked why she asked, she said she hear it was dosed every 8 hours for OxyContin. So I repeated the dosing schedule, reminded her it was an extended release not immediate release product. Let formulary grids behind.
PPLPMDL0020000001	Cleveland	OH	44195	4/30/2014	Quick OxyContin reminder 7 tablet strengths every 12 hours along with Butrans for those patients requiring around the clock analgesia, Said Ok no further contact needed at this point, refers to Dr. Goforth Hospic/Palliative Care Team
PPLPMDL0020000001	Fairview Park	OH	44126	4/30/2014	Brought in coffee to the office and got to discuss Butrans and Oxycontin with the staff and the doctor. Erica is the office manager and head ma. I asked her about the managed care she sees the most, she aid they have mostly commercial and some caresource. I asked her if she does any handing out of coupons, educating the patients on anything. She said not really that the doctor does all of that. I covered managed care with the staff of ma's while waiting for the doctor, they said they refer pain patients out. When the doctor came in, I invited to a Butrans program but he said he doesn't attend. I asked what was holding him back lately from writing it for patients. He said managed care and not treating chronic patients. I said understood. I asked him why it was a riskier proposition to consider an extended release products dosed every 12 hours over a short acting product dosed every 6 hours or atc. Dr said schedule two products are more dangerous. We talked about abuse potential for Butrans and OxyContin. But also talked about the patients he trusts and that are in pain and treating them in house if possible. I said if you could manage their pain would you? He said yes. I asked for him to think about the patient on a Tramadol that is on a few pills taken a few times a day and are still not controlled would you consider adding more Tramadol, he said maybe. I said would you at that point consider an extended release delivery system like Butrans or OxyContin if appropriate.
PPLPMDL0020000001	Stow	OH	44224	4/30/2014	Quick call with Greg about dr yang and the BEP kits. Explained the kits to him and Greg said he knows that's what some of dr yangs patients need. Greg said he has had an increase in a few new prescriptions from him. I reviewed the Kathy profile and told him that's one of my messages and asked if it makes sense that I speak to him about IT? Greg said there is more vicothen than any other IR opioid that gets dispensed and it's a good
PPLPMDL0020000001	Stow	OH	44224	4/30/2014	Joyce the office manager was able to give me a minute to discuss the BEP program with dr yang. I told dr that the current situation he is in with his patients by getting them off IR opioids and use ER opioids where necessary is right up he alley of Butrans and there is some real opportunity. I explained the opportunity to track select patients who are new to Butrans who he believes would find value in completing surveys on their progress with Butrans. Spoke to dr about the monetary incentive his patients have in an Amex gift cards. Dr said he likes it and thank me for selecting him. I asked for new Butrans prescriptions and told him I hope OxyContin will find a place in his office for the patients already on oxycodone. Dr said ok.
PPLPMDL0020000001	Cleveland	OH	44103	5/1/2014	Led with Insight 16 followed by reviewing OxyContin as the first FDA approved Tier 1 and 3 labeling that describes abuse deterrent characteristics, along with Butrans for those patients requiring around the clock analgesia, Said Ok will continue to prescribe for appropriate patients, not seeing many new patients, nothing new learned. Appts are being booked thru Shawn-Main office admin
PPLPMDL0020000001	Westlake	OH	44145	5/1/2014	Reviews managed care with nurses and reminded them about coupons for oxycontin and Butrans. Talked to the doctor about the pa. Profile and med d silver scripts and aarp. Also highlighted OxyContin every 12 hour dosing as another option if a patient was over 40 mg of oxycodone already because that would not be an appropriate patient to start on Butrans. Dr agreed. Dr said she was referring more out. I said its about e patients you decided to treat for their recurrent pain month after month and giving them an option. Asked her to keep Butrans and OxyContin in mind this week when her patients return and are not satisfied with current treatment.
PPLPMDL0020000001	Westlake	OH	44145	5/1/2014	I asked the new doctor if she had hesitations writing OxyContin that is a schedule 2 dosed every 12 hours for appropriate patients. She said she will not usually write opioids. I asked how she treats patiens with pain, she said she will do non opioids or give them to dr dsilva. I asked if she had her license to write scheduled medications. She said no. Reviewed schedule 3, like Butrans with multiple refills yet still an opioid. And OxyContin, an opioid with monthly refills. She said she isn't comfortable writing them.
PPLPMDL0020000001	Akron	OH	44308	5/1/2014	MSL email communication with Ms. Tonni and Dr. Friebert to provide OTR enrollment updates and obtain update on pre-screening activity.
PPLPMDL0020000001	Westlake	OH	44145	5/1/2014	Spoke to Danielle, again said no access but I gave her some OxyContin managed care and highlighted coupon program for both products.
PPLPMDL0020000001	Westlake	OH	44145	5/1/2014	Dr wasn't in but spoke to Virginia and Jen the office managers and nurses regarding the experience program. Dr said last visit these ppl were in charge of remembering to hand it out so I reviewed managed care coverage and OxyContin coverage. Left Pam profile of Butrans and savings card leave behind for doctor.
PPLPMDL0020000001	Westlake	OH	44145	5/1/2014	Dr said he doesn't write much opioids and he feels they are so additive that he prefer not to get them started. Showed Butrans plasma page...I asked if this meant anything to him. He said yes...for those few patients that need an extended release product he will pick Butrans. I asked how he handles supplemental or titration. Dr said he will tell them they can supplement with NSAID. I said true. You also have options to titrate up to 20mcg. You can write as little as 2 weeks or as much as a month and refills are 5 times with in a 6 month period of time. Dr said he would see them back every few months. Dr believes his patients are compliant because he educated them on how to take their medications. I said are you satisfied with the tools you are using or are you looking to change things up? He said he doesn't have anything written down but has the questions in his head. I asked why he doesn't write OxyContin? He said schedule 2 products are being looked at by dea. I said why just schedule 2's. He said they Re more dangerous which is why he will stick with schedule 3. Touched on coupons and managed care.
PPLPMDL0020000001	Cleveland	OH	44195	5/1/2014	Visited Onc. Dept. (Estfan, Goforth, Faiman, Advani) Reviewed OxyContin savings cards along with Butrans Initiation/Titration guides. Requested appt. with Faiman and Goforth
PPLPMDL0020000001	Waterford	OH	45786	5/1/2014	I-Butrans dosing, titration and managed care. OxyContin boxed warning, dosing and titration W has been using the 15 4 g patch.
PPLPMDL0020000001	Cleveland	OH	44115	5/1/2014	Visited Pain dept. (Nickels) reviewed Butrans and OxyContin initiation/Titration
PPLPMDL0020000001	Waterford	OH	45786	5/1/2014	I-Butrans dosing and titration. OxyContin pages 14 and 15, box warning and limitations of use. W is happy that Butrans is now on silver script.
PPLPMDL0020000001	Cleveland	OH	44103	5/1/2014	Led with Insight 16 followed by reviewing OxyContin as the first FDA approved Tier 1 and 3 labeling that describes abuse deterrent characteristics, along with Butrans for those patients requiring around the clock analgesia, Said Ok will consider Butrans when sending to Pain Mgmt in addition Med. Dir. hasnt changed position on ER opioids, referred to Shawn for future appts. No additional Butrans info needed at this time.
PPLPMDL0020000001	Westlake	OH	44145	5/1/2014	Just highlighted every 12 hour dosing for OxyContin or on e a week doing for Butrans, I said there are options and we offer savings cards to reduce the copays for commercially insured.
PPLPMDL0020000001	Cleveland	OH	44195	5/1/2014	Quick review of OxyContin every 12 hours, 7 tablet strengths along with Butrans for those patients requiring around the clock analgesia, Said he will consider, refers to Dr. Harry G. No savings card needed, no further info
PPLPMDL0020000001	Westlake	OH	44145	5/1/2014	Spoke to dr kabbarra. I asked if it was mAnaged care holding him back from finding more Butrans patients. He said yes. I highlighted the too plans in his office and reviewed Butrans coverage. Also covered caresource, workers comp and part d. I offered him the experience program w Butrans and told him I had no problems with not giving it to hi. If he isn't going to use it. Dr said he would use it. I told him it will arrive next week and asked him to set aside that objection for a few months. Dr told me he "loves Butrans". I said quite frankly dr kabbarra, someone like you has the potential to write twice what your writing. I told him I thNk something else is holding him back and I don't think it's managed care. Dr tried to tell me all the reasons why I was wrong. Gave him a Butrans poster and said it says Butrans but it could earlier say OxyContin cause those lower pack pain pathologies are a candidrE for either Butrans or OxyContin if they needed an opioid for an extended period of time. He said of course.
PPLPMDL0020000001	Cleveland	OH	44113	5/1/2014	Reviewed Butrans for those LorTab failures who require around the clock analgesia, Said he always looking for appropriate new starts, Also discussed Insight 16 and OxyContin as the first ER with FDA approved Tier 1/3 labeling that discusses abuse deterrent characteristics, Said he remains cautious in prescribing CII's but will keep in mind
PPLPMDL0020000001	Cleveland	OH	44103	5/1/2014	Reviewed with Amy Rph OxyContin every 12 hours along with Butrans for those patients requiring around the clock analgesia, Said they see some from Robson. No new info learned
PPLPMDL0020000001	Westlake	OH	44145	5/1/2014	Talked about OxyContin being dosed every 12 hours and butrans dosed every week and asked how he thought about those options for patients. He said its fine. I said why would someone dose a short acting 4 times a day? He said he wasn't sure I asked if norco was that cheaper? He said it was cheap, but wouldn't look it up. Reviewed the coupons with him but he didn't want to take any.
PPLPMDL0020000001	Westlake	OH	44145	5/1/2014	Attended lunch with dr. Pandnt, resident also worked under dr. Kabbarra and he is going into anesthesiology, discusses FDA Insight. Also reviews OxyContin dosing of every 12 hours and scheduling. Talked Butrans. He asked about steady state and supplemental. Dr asked about formulary coverage.
PPLPMDL0020000001	Westland	OH	44145	5/5/2014	Reviewe FDA insight and talked about OxyContin's dosing. I asked how he usually will dose a short acting product and he said a few pills a day. I said but when? He said bid. I said have you ever gone to three a day? He said of course. I asked hi. Why wouldn't an extended release product be considered at that point? Dr said he doesn't like to write schedule two products because they are being looked at more. We talked about tailor the dose of OxyContin and coupons avail le, discussed Butrans, scheduling. Dr said he was familiar with Butrans but he thought managed care was not very good. We discuss the coverage for Butransthen he said it must have gotten better. We talked about limitations and fair balance. Covered dosing.
PPLPMDL0020000001	Westlake	OH	44145	5/5/2014	Discussed OxyContin dosing, scheduling and the starting dose of 10mg of OxyContin. Reviewed opioid. Alive study, dosing and patch location. Fair balance discussed. <font color=blue>cb>CHUDAKOB's query on 05/23/2014</font>What is the "Alive study"?<font color=green>cb>BARTOLI's response on 05/27/2014</font>Opioid naive study for Butrans.<font color=blue>cb>CHUDAKOB added notes on 06/03/2014</font>Thanks for the clarification. Please be sure to review your notes for accuracy before submitting them.
PPLPMDL0020000001	Westlake	OH	44145	5/5/2014	Some to Kyle the pharmacist about OxyContin dosing, asked about scripts come through and she said yes. Talked about Butrans patch placement and coupons.
PPLPMDL0020000001	Westlake	OH	44145	5/5/2014	Left formulary grids And told the doctor about the Butrans med d coverGe and cResource. I asked dr if a patient on Tramadol came into the office if that person would be a likely candidate for Butrans in his opioid. He said yes and told me how much he likes Butrans. I told him that I wish he could find an appropriate place for it more often.
PPLPMDL0020000001	Westlake	OH	44145	5/5/2014	Left formulary grids and highlighted the coupon program for both products.
PPLPMDL0020000001	Westlake	OH	44145	5/5/2014	Reviewed OxyContin dosing and starting dose. Reviewed tailor approach he to start principals. Introduces Butrans to the dr, explained the scheduling, refills, managed care and patch location. Reviewed titration and discussed fair balance.
PPLPMDL0020000001	Westlake	OH	44145	5/5/2014	Introduced self to the doctor, he was in the large group practice. He participated in the conversation of many doctors around the table. However his specialty is no tone that is indicated for our products. This limitation and indication was provided, as was fair balance.

	Westlake	OH	44145	5/5/2014	Reviewed dosing atc with opioids. Dr said he will write most short acting opioids. two pills every 8 hours. I asked if he thought that patient had pain throughout the day and he said maybe. Dr asked why should I write OxyContin every 12 hours when I can write a cheaper medication every 8 hours. I said there are no studies to compare one way vs another. I asked him how often he sees patient back and he said every three months. Dr said he would write OxyContin if appropriate but he thought most of his patients didn't have chronic pain and he refers severe pain out. I said dr let's talk about the starting dose of OxyContin, reviewed the dosing. We talked about tailoring the dose with OxyContin, managed care coverAge. Dr said he doesn't want to see patient back every month cause he doesn't have that time. We talked about Butrans. Other than what I told him last time, dr didn't know much about the product. Dr talked about caresource. I mentioned managed care, also told him that to not write Butrans because of a misperception that the product won't be covered would be doing a disservice. I asked him why he would write Butrans. Dr thought for a minute...he said because it's dosed weekly and schedule 3. I said there was no write or wrong answer, that I was curious. I said....I was hoping to hear because it works for up patients, but since you have no experience you don't have the confidence what it can do. we reviewed the opioid naive patient. Dr said he would consider it.
PPLPMDL0020000001	North Olmstead	OH	44070	5/5/2014	Discussed FDA insight, and dosing for OxyContin. Reviewed Butrans, Initiation guide, covered the naive study and dosing and patch placement. Dr was mostly interested in the number of refills that could be given to both my products. He also asked about managed care. Fair balance was given for limitations and abuse potential
PPLPMDL0020000001	Westlake	OH	44145	5/5/2014	Discussed OxyContin and Butrans with the dr. Her first day at wsp westlake office. She participated in the conversation w dr gotis. Discussed OxyContin. Dosing every 12 hours and the FDA insight. Asked about single entity and the starting dose of ten mg. also talked about another extended release option called Butrans. Highlighted the molecule and dosing. Managed care and patch placement.
PPLPMDL0020000001	Norton	OH	44203	5/6/2014	Discussed moving to OxyContin every 12 hour dosing for appropriate patients. Reviewed managed care and coupons. Discussed Butrans dosing and titration. Highlighted experienced program
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/6/2014	Dr told me today that he was having issues with his first prescription of Zohydro. Dr said he wrote a 15mg and the patient cannot find it anywhere. Dr said he write it because the patient had tolerability issues with all other meds and was coming off of oxycodone. I asked why he didn't write oxycodone. Dr said he did and said it did to work for the patient. Dr said he's already done with Zohydro because no one stocks it and wholesalers don't even have it. I asked dr to please write more OxyContin and to take advantage of all 7 doses. Dr said that he finds he needs to convince his patients on IR oxycodone to switch to OxyContin. Dr said he had a patient last week that he put on OxyContin recently and the patient asked him why he wasn't on it a long time ago. I told dr I wanted him to try Butrans again. Dr said we will discuss next time. Nothing else learned.
PPLPMDL0020000001	Akron	OH	44310	5/6/2014	Quick hello and dr said that he started on the grant information he was provided for the cancer bike ride. I told him that's great to know and I hope it works out. Dr said he had a patient in this morning on Butrans who he titrated from 5mcg to 10mcg. Dr said that the patient came off of vicoden 2 pills a day but has spinal stenosis and still in pain. I asked dr to keep me posted on he patients progress and asked for continued business from tramadol and vicoden. I reminded dr that he has OxyContin as a good option for his patients who need an adjustment on Percocet.
PPLPMDL0020000001	Akron	OH	44305	5/6/2014	Dr asked me if I had anything new and I told him I did with Butrans. I asked him if insurance coverage is a factor in what medicine he recommends for his patients? Dr said its really important because if he prescribes a branded medicine that is \$40 and a generic is only \$4, the patient either isn't going to take the branded or tell him in his office they can't afford it. I told dr that the Medicare coverage for Butrans just got a lot better. I told him that his top two plans for Medicare and AARP and Caremark silverscript. Dr said they are important. I explained the coverages and asked him if it will open up more opportunity to write more Butrans for that segment of his patient population? Dr said yes or course and told me to tell the new girl up front Melissa. I asked him if he has patients currently taking oxycodone? Dr said he does. I showed him the conversion and titration guide and asked if it makes sense to convert patients to q12 oxycodone especially for patients that have been on the IR oxycodone for 6+ months? Dr said it does and has a few patients in mind.
PPLPMDL0020000001	Tallmadge	OH	44278	5/6/2014	Spoke to Ray about OxyContin and Butrans and spoke about patient types specific to each. I asked Ray if he sees Percocet or oxycodone plain being refilled month after month? Ray said he dispenses a lot of Percocet. I showed him the conversion guide and asked him if he would ever speak with a patient about the opinion of a q12 oxycodone? Ray said he can do that. I asked about Butrans and if he is seeing more prescriptions for it? Ray said he has a few more since I was in last. Ray said most from pain management. I reviewed new insurance coverages with Medicare and Scott profile. Ray said he has all 4 doses on the shelf.
PPLPMDL0020000001	Cleveland	OH	44112	5/7/2014	OxyContin Reminder, 7 tablet strengths every 12 hours along with Butrans for those patients requiring around the clock analgesia, Said ok, no time to discuss today, nothing new learned. Initiation/Titration guide along with Butrans formulary grid
PPLPMDL0020000001	Cleveland	OH	44113	5/7/2014	Reviewed OxyContin 7 tablet strengths every 12 hours, abuse deterrent characteristics along with Butrans for those patients requiring around the clock analgesia, Said Ok but not prescribing any new ER opioids, referring to pain mgmnt or 2E. Confirmed with Aurora,
PPLPMDL0020000001	E Cleveland	OH	44112	5/7/2014	Intro. with insight 16, followed by a review of the OxyContin label as the 1st Tier 1/3 that describes abuse deterrent characteristics, Said he's not treating pain but will consider for appropriate patients, Also introduced Butrans, 7 day transdermal, for those patients requiring around the clock analgesia. Savings Cards, said he was interested, no time, book appt. Will be leaving the country next week until June (Ghanna-Hospital)
PPLPMDL0020000001	Cleveland	OH	44113	5/7/2014	Quick Butrans Initiation/Titration reminder, Formulary grids along with OxyContin every 12 hours for appropriate patients, Savings cards, Said Ok nothing new learned
PPLPMDL0020000001	Cleveland	OH	44102	5/7/2014	Led with Insight 16, reviewed OxyContin as the 1st FDA approved ER opioid Tier 1/3 that has abuse deterrent characteristics, Said Ok, continues to find appropriate patients, Also reviewed Butrans for those patients requiring around the clock analgesia, Said ok, nothing new learned
PPLPMDL0020000001	Akron	OH	44320	5/7/2014	I asked dr if the two patients a few weeks ago got their Butrans filled? Dr said he thinks they did because they didn't call back or come back to see him. I asked dr to please consider patients like Kathy and reviewed profile. I asked dr if he has patients like her and he said he did. I asked for continued business. Dr said he thinks Butrans is a good option.
PPLPMDL0020000001	Waterford	OH	45786	5/7/2014	I- Butrans managed care. OxyContin managed care W- issues with issues
PPLPMDL0020000001	Akron	OH	44312	5/7/2014	Discussion in hallway about OxyContin and asked him if he has any issues with using OxyContin for a patient uncontrolled on Percocet? Dr said he tries not to write OxyContin. I asked him if he is writing Percocet though? Dr said yes. I asked him why he will write the IR oxycodone but not the ER oxycodone? Dr avoided the question and started talking about how a patient was trying to scam him for testosterone. I asked him to just think about it. Dr said he discussed the option of Butrans with a patient taking 4- 5 mg Percocet a day and was complaining of pain. Dr said the patient didn't want to take a patch. I asked dr why he didn't just tell the patient that a change was necessary because of the pain level? Dr said he should have been more direct with the patient. I asked dr to use Butrans in the tramadol and vicoden patients and leave IR oxycodone patients who are uncontrolled as OxyContin candidates. Dr said ok.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/7/2014	Led off conversation with dr about how he decides which product to use when he has a patient on 20mg of oxycodone? Dr said it depends on a lot of circumstances but said his use of OxyContin is typically reserved for patients already on IR oxycodone but said that he does use Butrans for patients on 1-2 Percocet a day as well. Dr told me that he finds Butrans as a very versatile product and finds that it works for so many different patients from those on tramadol all the way to Percocet. I asked for continued business and discussed the BEP program and discussed the new Medicare insurance wins for Butrans. Dr said he will use the kits and continues to see very positive results with both Butrans and OxyContin.
PPLPMDL0020000001	Mayfield Village	OH	44143	5/7/2014	Quick front window. Discussed OxyContin is first ER opioid to have FDA Tier 1 and Tier 3 labeling; Consider Butrans our 1 x week transdermal patch after PRN Tramadol. Left OxyContin conversion/titration guide; Butrans 4 strengths brochure. Left Med 80 guidelines.
PPLPMDL0020000001	Cleveland	OH	44124	5/7/2014	Met with med asst Terry at front desk. Dr C and RN Gail in Fridays now, pain clinic. Discussed OxyContin opioid naive dose 10 mg every 12 hrs. Left OxyContin conversion titration guides (2). Left & discussed OxyContin savings sell sheet. Terry says return Fri to see if they need savings cards, etc.
PPLPMDL0020000001	Cleveland	OH	44113	5/7/2014	Visited Ortho (Bohl, Berkowitz, IM-Nouraldin) Reviewed OxyContin and Butrans Initiation Titration, formulary status
PPLPMDL0020000001	Fairlawn	OH	44333	5/7/2014	Spoke to the pharmacy tech and Mary the pharmacist about their level of knowledge of Butrans. Mary said they have a few orients on it. I discussed the Scott profile and conversions titration and patient selection. She said she has the 5mcg only in stock. Reviewed insurance and copy cards. I showed her the OxyContin conversion guide and discussed conversions, 7 doses and q12 dosing. She said they fill it and thinks they have all 7 in stock.
PPLPMDL0020000001	East Cleveland	OH	44112	5/7/2014	Quick Review of Butrans for those Tramadol failures requiring around the clock analgesia along with OxyContin every 12 hours, 7 tablet strengths, Dr said Ok but will be retiring next month, His replacement should be in place by July.
PPLPMDL0020000001	Akron	OH	44320	5/7/2014	I asked dr if she has written Percocet recently? Dr said yes. I asked dr why its easier to write and refill Percocet than to write q12 oxycontin? Dr said its all the same. I asked dr what she means by that and she said she has to do what the boss says and it's not not use ER oxycodone. Dr said she had to go and left the conversation. Nothing else learned.
PPLPMDL0020000001	Mayfield Village	OH	44143	5/7/2014	Met with med asst at front window. Discussed the Indications for Butrans, and using Butrans as first opioid or after PRN Tramadol/codeine with 5 mcg/hr start dose; discussed OxyContin as first opioid with 10 mg, every 12 hours start dose. Left OxyContin conversion guide, Butrans 4 strengths brochure, Med 80 Guidelines.
PPLPMDL0020000001	East Cleveland	OH	44112	5/7/2014	Reviewed with LaToya RPh OxyContin Tier 1/3 FDA labeling along with Butrans for those Tramadol failures requiring around the clock analgesia, Savings Cards and formulary status, Said at this CCF location very little pain is prescribed (H. Smith, Brown, Brateanu) Will recommend to clinicians if appropriate
PPLPMDL0020000001	Akron	OH	44333	5/7/2014	Discussed with dr his patient selection for Butrans. I asked dr how many patients need ER or IR opioids after a procedure? Dr said none of them. Dr said if patients need more than what the injections provide he schedules them with ascot Miller the surgeon. I told dr that I am trying to expand his use of Butrans to the 45-65 age patient range. Dr said those patients typically are not appropriate for long term opioid therapy but said there may. Be a few that would fit his criteria for ER opioid management. Dr said he continues to use OxyContin and asked him if he still Ned's prn medicines for breakthrough? Dr said he does. I asked if he needs it with all other ER opioids? Dr said some yes but does not for Exalgo because it is a QD medicines. I asked for continued use of both. Dr said he spoke to his other two colleagues about using Butrans for the BWC patients and discussed state I- Butrans dosing and clinical trials. OxyContin managed care W- having trouble with managed care cost
PPLPMDL0020000001	Waterford	OH	45786	5/7/2014	Dr told Barry and I that a patient that had been on Butrans for a few months recently presented with itching and irritation from the patch. Patient wanted to discontinue. Discussed with dr about not allowing one AE inhibit future prescribing. Dr said it won't and realizes that some patients it may not work well for. I discussed using Butrans earlier on in treatment and use in a patient like Scott. Dr said ok and said it makes sense. Asked dr to continue thinking about OxyContin and asked him to use it in patients who are already on oxycodone.
PPLPMDL0020000001	Akron	OH	44312	5/7/2014	Reviewed OxyContin every 12hours, 7 tablet strengths, FDA approved Tier 1/3 labeling that describes abuse deterrent characteristics, Said Ok will consider for appropriate patients. Also reviewed Butrans for those patients requiring around the clock analgesia, Initiation/Titration. Formulary coverage and savings cards, Said he has a patient this afternoon in mind
PPLPMDL0020000001	University Hts	OH	44118	5/8/2014	Reviewed Butrans for those LorTab failures who require around the clock analgesia, Said he continues to find appropriate patient. Also discussed OxyContin FDA approved Tier 1/3 labeling and abuse deterrent characteristics, Said he continues to follow practice of not prescribing CII's
PPLPMDL0020000001	Cleveland	OH	44115	5/8/2014	Reviewed OxyContin every 12hours, FDA approved Tier 1/3 labeling that describes abuse deterrent characteristics, Formulary coverage along with Butrans for those patients requiring around the clock analgesia, Said Ok he will continue to find appropriate patients
PPLPMDL0020000001	Garfield Hts	OH	44125	5/8/2014	Chuck and I met with Carrie at Marc's to present 2014 program. She asked to have Marc's added on the where to buy section of the Colace website. See notes on Marc's call.
PPLPMDL0020000001	Solon	OH	44139	5/8/2014	Dr said she needed my advice for a starting dose for a patient taking 4- 50mg tramadol a day and wants more. I showed dr the conversion guide and told her its recommended that the any patient taking under 300mg a day a tramadol should be started on the 5 mcg. I told dr its still up to her but the only two starting doses are the 5 mcg and 20mcg. Dr said ok. Dr said its a commercial patient and is sure it will go through fine. I told dr that's great she is identifying more patients appropriate for Butrans. Reminded her that OxyContin is a product suited for patients already on oxycodone and need a dose adjustment.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	5/8/2014	I asked holly about recent dispensing of OxyContin or Butrans. Holly said they have not had any new patients on OxyContin but did say she is seeing prescriptions from dr Wynne and Abby Barr recently. I asked what for and she said vicoden and Percocet. I told her I'm working hard on them to use the ER options OxyContin and Butrans for those patients who need dose adjustments. Holly said they have all OxyContin on the shelf and the 5 and 10mcg for Butrans and it expires at the end of the year. I reminded holly of the patients appropriate for OxyContin and Butrans.
PPLPMDL0020000001	Stow	OH	44224	5/8/2014	



	Akron	OH	44312	5/8/2014	Hello at window and gave him a quick oxycodone insight. I told him the reason I gave him this statistic is because Im guessing he also has patients on Percocet for 3 months or longer. Dr said a few. I showed him the conversion guide and told him that those patients over three months who continue to complain of being in pain are appropriate for he same molecule but in a 1/ hour delivery system. Dr said ok. I asked dr if he would try converting one patient. Dr said he will look into it. Reviewed Butrans conversions with Scott profile and asked him to just identify one patient like Scott.
PPLPMDL0020000001	Berea	OH	44017	5/8/2014	I asked the doctor if there was one thing you liked about OxyContin what would it be. Dr said the reformation. I left him with something to keep in mind tomorrow....about dosing and scheduling of products.
PPLPMDL0020000001	Cleveland	OH	44130	5/8/2014	Chuck Calalesina (Acosta) and I met with Carrie. They just put in the Colace 100mg 60's and Senokot-5 30's. Will be returning the Senokot-5 10's. Reviewed promotional program and discussed upcoming promotions. Also mail-rebate availability. They want Senokot samples for the Fest, a church program where they have a tent set up.
PPLPMDL0020000001	Tallmadge	OH	44278	5/8/2014	Dr came up to reception window and asked me my products. I told him OxyContin and Butrans. Dr said he's used OxyContin but not much and didn't know about Butrans. I told him I would like a minute to discuss and he told me to schedule a lunch. Nothing else learned.
PPLPMDL0020000001	Tallmadge	OH	44278	5/8/2014	I asked dr if Medicare D plans are important to his business? Dr said yes. I asked him what percentage of coverage for Medicare would be good enough to write a branded medicine? Dr said he couldn't even guess. I told him that his Medicare business is very large part of his business and Caremark Silverscript and aarp are now covered. Dr said that's good and said that of the 5 prescriptions he has 4 if them are the same patient and that patient has silverscript. I asked if a lower cost to the patient is a good thing? Dr said of course! I asked for continued and expanded business in patients like Scott and Kathy and asked him if he would be willing to convert a IR oxycodone patient to OxyContin when a dose adjustment is necessary? Dr said possibly but he would probably refer. Nothing else learned.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	5/8/2014	Dr was behind front counter when I approached. Gave him the oxycodone insight and asked him to just identify one patient that already is on IR oxycodone who has refilled 3 or more times and to convert them to ER oxycodone. Dr said ok and hopes that it would be covered as good as Percocet is. I told him branded will rarely if ever be as cheap as generic but coverage is very good. Told dr that the coverage for Butrans for Medicare has gotten very good recently. Told him about aarp and Caremark and hoped it would give him more opportunity w/ his patient base? Dr said maybe and thanked me for the info.
PPLPMDL0020000001	Garfield Hts	OH	44125	5/8/2014	Visited Anes/Pain Dept.(Dalbir,Abraham,) OxyContin/Butrans Initiation/Titration guides, Formulary Grids
PPLPMDL0020000001	Cleveland Hts	OH	44118	5/8/2014	Reviewed w/Floater Jenifer M RPh, OxyContin every 12hours,Savings cards along with Butrans for those patients requiring around the clock analgesia, Savings Cards,
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/8/2014	Dr told me that he has had to switch 3 patients from Butrans because the patients have called in after trying to use the copay cards. Dr said the patients said that they were told the cards were not valid. I told dr that I just gave him new cards a few weeks ago and don't expire until next year. Dr showed me the cards and are I told dr they are valid. I asked dr if the patients may have been Medicare or Medicaid? Dr said he doesn't write Butrans for that patient group because there are too many PA's and its a pain in the butt. I told dr the cards he has are valid and asked which pharmacies they went to? Dr said he doesn't know. I introduced the BEP kit and dr said he didn't want it. Dr said its too much work on his end. Dr said he just needs to know its working and its tolerable. I reminded dr of the efficacy and safety profiles. I asked dr for continued business and to consider OxyContin for his Percocet patients. Dr said he won't write it. Nothing Else learned.
PPLPMDL0020000001	Cleveland	OH	44125	5/8/2014	Quick OxyContin review every 12hours, 7 tablet strengths along with Butrans 7 day transdermal, Tramadol failures requiring around the clock analgesia,Said ok will consider, no time to talk,
PPLPMDL0020000001	Garfield Hts	OH	44125	5/8/2014	Quick discussion on OxyContin as the 1st FDA approved Tier 1/3 labeling that describes abuse deterrent characteristics along with Butrans for those patients requiring around the clock analgesia, Said He will consider, has 1 patient doing well on Butrans, nothing new learned
PPLPMDL0020000001	Cleveland	OH	44130	5/8/2014	Showed ADF slides and FPI updates.No compliance officer, but that Melenie and Tom handle any issues related to the pharmacy concerns. Marc&#8217;s headquarters sends an updated OARS report weekly to their stores for them to be able to know if the patient is getting medications from multiple sources. Their pharmacists are required to check this with each prescription. They do not have any other formal policies regarding opioid dispensing. Tom and Melenie stated that it has been difficult working with McKesson, their primary wholesaler, on exceeding opioid thresholds. McKesson sends them a very long form to fill out and after filling it out providing good reasons why a particular pharmacy is dispensing more opioid than normal in a particular month, McKesson has not been making any exceptions. Melenie said this is very frustrating, as it causes access problems for patients who need the product. She said she is currently dealing with a situation where a store can&#8217;t fill a morphine script for a chronic cancer pain due to the store hitting the monthly threshold. Melenie also stated that the tablets ordered numbers McKesson is using are totally different than the numbers they have, so stores are getting shut off for the rest of the month when they are actually a couple percent below their normal quantities of use.Marc&#8217;s uses ANDA as their back-up wholesaler and Tom said they will usually go to them for their needs if a store is unable to get any more product for the month from McKesson
PPLPMDL0020000001	Berea	OH	44017	5/8/2014	Spoke to dr about dosing OxyContin every 12 hours and Butrans dosed once a week. I asked her if she had a preference between the two options. She said she likes Butrans because its schedule three and it's not a pill.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/8/2014	Reviewed a use potential,
PPLPMDL0020000001	Brooklyn	OH	44144	5/9/2014	I asked dr if he has refilled a Percocet prescription in the last month? Dr said probably but doesn't have many. I asked him if the patient has been on it for 3+ months? Dr said he didn't know. I told hi. That if a Percocet patient has been on it for 3+months the patient may be appropriate for the q12 oxycodone. Dr said ok. I asked him if it makes sense to change the delivery system of a product he's already writing? Dr said he understands what I'm saying b but said he can't commit himself and his patient to long term opioid therapy. I told dr it seems like he's already doing that but just in a short acting opioid. Dr had no response. Reminded dr of the option of the Schdule 3 7 day Butrans for those failing tramadol. Dr said ok and walked away.
PPLPMDL0020000001	Cleveland	OH	44104	5/9/2014	Reviewed OxyContin as the 1st ER opioid with FDA approved Tier 1/3 labeling that describes abuse deterrent characteristics, every 12 hours, savings cards along with Butrans for those patients requiring around the clock analgesia,formulary grids/status,Said he will consider for appropriate patients along with Med Mutual patients
PPLPMDL0020000001	Brooklyn	OH	44144	5/9/2014	Reviewed OxyContin as the 1st ER opioid with FDA approved Tier 1/3 labeling that describes abuse deterrent characteristics, every 12 hours, savings cards along with Butrans for those tramadol failures requiring around the clock analgesia,formulary grids/status,Said she he will keep it in mind for appropriate patients, Reminded of Initiation/Titration, nothing new learned
PPLPMDL0020000001	Brooklyn	OH	44144	5/9/2014	Quick OxyContin 7 tablet strengths every 12hours, Formulary status along with Butrans for those patients requiring around the clock analgesia, Said Ok will consider for appropriate patients (Med D Silverscripts)
PPLPMDL0020000001	Akron	OH	44319	5/9/2014	Reviewed OxyContin as the 1st ER opioid with FDA approved Tier 1/3 labeling that describes abuse deterrent characteristics, every 12 hours, savings cards along with Butrans for those tramadol failures requiring around the clock analgesia,formulary grids/status,Said he will consider for appropriate patients, not seeing many patients,nothing new learned
PPLPMDL0020000001	Brooklyn	OH	44144	5/9/2014	I asked dr what around the clock pain means to him? Dr said its usually when a patient is taking more than 3 pills a day or at least something every day of the week for pain. I asked if he has any patients like that who are currently taking IR opioids? Dr said of course. I asked dr for those who are taking them around the clock to evaluate them for an ER opioid and asked him if it makes sense to convert patients from Percocet 20mg to OxyContin 10mg when a dose adjustment is necessary? Dr said ok. Told dr that he needs to get some Butrans clinical experience under his belt and asked him for tramadol conversions.
PPLPMDL0020000001	Akron	OH	44305	5/9/2014	Reviewed OxyContin and Butrans savings cards with Tech. Relayed Dr.Detweiler interest in Butrans/OxyContin, said she will relay to Rph
PPLPMDL0020000001	Hudson	OH	44236	5/9/2014	Spoke with dr and Cindy about OxyContin FDA draft guidance . Spoke about tiers for OxyContin and explained them. Dr said he likes OxyContin and said he's glad the FDA is starting to look more into helping to make more abuse deterrent opioids. I asked dr for continued OxyContin prescriptions for those patients he has on Percocet around the clock. Gave new copay cards and asked dr if he would identify patients for Butrans and reviewed both Scott and Kathy profiles. Dr said he will try. Nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44109	5/9/2014	Spoke with Beth the pharmacist about OxyContin prescriptions. Beth said she has not seen much recently and is seeing a lot more Percocet. Beth said there are patients who continue to be titrated on Percocet. I explained conversions and Beth said I have a hard job to do because no one wants to write oxycotin and the insurance companies don't want to pay for it. Beth said she is seeing more PA's for it recently and most must go on MS Contin or methadone first. Discussed Butrans and conversions. Beth said they have not filled any in a long while and had to send back the boxes they had on the shelf.
PPLPMDL0020000001	Cleveland	OH	44115	5/9/2014	Visited Ctr.Left OxyContin/Butrans Initiation /Titration FPI for Baker, Campbell,Dhillon, Dziwils, Geho, Gemechu and Mary Jo Slattery. Left contact info for inservice with K. Gallagher for appt. Pain Mgmnt Wed
PPLPMDL0020000001	Akron	OH	44312	5/9/2014	Visited Pain Mgmt (Nickels) OxyContin/Butrans Initiation/Titration
PPLPMDL0020000001	Akron	OH	44319	5/9/2014	Quick hello in his office. I showed dr the conversion and titration guide for OxyContin and asked him if he has patients on Percocet for 3+ moths? Dr said sure. I asked him what it means to him to be in pain around the clock? Dr said when patients take more than three pills a day. Dr said he knows he could switch a few patients to OxyContin but said he's already told me he doesn't feel comfortable doing it. Dr said he's not ore ring few if any new Percocet et prescriptions. I asked dr to take the existing patients who are still in pain and convert them. Dr said ok. Reviewed Kathy profile and asked him to just try it again. Dr said ok.
PPLPMDL0020000001	Hudson	OH	44236	5/9/2014	I showed dr the OxyContin conversion and titration guide and pointed out the conversions from Percocet to OxyContin. I asked dr why he thinks its ok to refill and prescribe Percocet and not so easy to prescribe q12 OxyContin? Dr said its like he told me last time, patients would rather take multiple pills in the day. Dr said its the psychological component. I asked dr if he's ok with that? Dr said not rawly but its too hard to get them converted. I told dr I understand but told him he needs to set the expectations with his patients about what he believes are the options for the patients for ER opioids. Dr agreed. I reminded dr to use Butrans for those existing Norco patients that need a dose adjustment or refill and reviewed the Kathy profile.
PPLPMDL0020000001	Stow	OH	44224	5/9/2014	Dr came to window and told him that the next time he is ready to refill Percocet to take a minute to see if they would be appropriate for the same molecule in a 12 hour delivery system? Dr said he knows about it and will try. I told him about the new Medicare coverage for Butrans and asked for him to just TRY IT!
PPLPMDL0020000001	Westlake	OH	44145	5/12/2014	Followed up with dr on the BEP program kits and asked him if he has any questions? Dr asked if he can give them to anyone. I told him yes as long as its a new patient. Told him its only for private commercial patients. Dr asked me to review the new Medicare plans again. Reviewed Caremark and AARP plans and status. I asked for continued use of Butrans and the kits. Asked him to please keep OxyContin in mind when patients are falling Opened with the oxycodone insight and asked what he thought about it. NP said he doesn't write much chronic pain and that he wouldn't know but he thought that number was pretty high. I asked him if had any hesitations to write Oxycontin if appropriate. He said no, but said it wasn't his first choice. I asked what was? NP talked about LYrica and other nSAIDS that he uses for neuropathic pain first. I reminded him that Opioids are intended for Somatic Pain. Gave fair balance. np said he write more butrans than oxycotin because its less dosages and its schedule 3. covered initation guide.
PPLPMDL0020000001	Westlake	OH	44145	5/12/2014	Dr said his biggest hesitation with writing Butran is getting it thru managed care. I highlighted a few plans like caresource, med d plans with coverage.Also talked about Oxycontin dosing and incorporated the managed care discussion between both products.
PPLPMDL0020000001	Garfield Heights	OH	44125	5/12/2014	Reviewed OxyContin and Butrans with Margie Tech. No savings cards needed, will relay info to staff Rph
PPLPMDL0020000001	Olmsted Falls	OH	44138	5/12/2014	Discussed what he believes to be atc pain. Drs said by three pills a day it could be atc. I asked what was his hesitation for writing an extended release product at that point like OxyContin or Butrans if the patient was appropriate. Dr said he doesn't write OxyContin. When I asked why he said it was schedule two and if they need to be seen monthly he prefers them to be seeing by a pain specialist. Reviewed initiation of Butrans and schedule 3. Dr said he only writes a few months at a time for a scheduled narcotic. Talked about dosing, steady state, and fair balance. Gave coupons and highlighted managed care, although dr said he doesn't pay attention to what his patients have. Dr said he doesn't have a lot of patients, appropriate for Butrans. I said do you have ten. He said....I said 5? He said maybe. I said just start with one appropriate patient, get experience with Butrans Talked about dosing OxyContin and highlighted dosing. I asked if he ever sees OxyContin written differently and what would he do if he did. Pharmacist said nothing. I asked if he ever dispensed Butrans, he said no. Reviewed the dosing and initiation guide, gave fair balance for both products. Reviewed the strengths of Butrans.
PPLPMDL0020000001	Olmsted Falls	OH	44138	5/12/2014	The doctor said he has a few patients on Oxycontin. I asked about how they were doing and what lead to the oxycotin choice. Dr saihey are controlled, they are older with non surgery option for their chronic pain. I asked when was the last time he initiation an oxycotin script. dr said its been a while and that he usually refills what is already prescribed. We talked about the 7 doses and the 10mgs strenth. Dr said his biggest hesitation is that oxycotin is a schedule 2 and he tried to avoid starting schedule 2 products. Talked about butrans, he never heard of it before. Discussed the molecule, dosin g and intation guide. Covered fair balanced. Dr asked about rash. I showed him the core visual aid adverse reaction page and kept quiet. When he was done we talked about the naive study. Dr said he never uses assesment tools because he refers most of the chonc pain patients out. I gave the tramadol insight. I said do you see some a year? He said oh yes. Went thru the scott profile. Covered the coupons and talked med d coverage. Dr said even though he sees very little pain bpatients he would keep it in
PPLPMDL0020000001					

PPLPMDL0020000001	Westlake Fairlawn	OH	44145	5/12/2014	I asked the doctor if it made sense to convert someoent from percocet to oxycontin if they met the indication. she said yes. I asked her to keep that in mind this week. Highlighted the butrans starting dose and dosing.
		OH	44333	5/12/2014	Quick hello at counter and told him about the oxycodone insight. Dr said its obvious that many physicians don't use ER opioids and keep them on products like Percocet. I told dr that OxyContin is a product he can continue to use when a Percocet patient is in around the clock pain. I asked dr what around the clock means to him? Dr said usually when a patient has spinal stenosis, OA or chronic low back pain. I told dr I'm glad to hear him say that. Dr said he continue to find uses for OxyContin because it works. I told dr to please continue and to use Butrans because it also works. I told dr that in the clinical trials it showed at least a 30% reduction in pain score. Dr said he knows it works and likes it. I asked for continued use.
PPLPMDL0020000001	Cleveland Cleveland	OH	44195	5/12/2014	Reviewed OxyContin 7 tablet strengths every 12 hours along with Butrans 7 day transdermal, for patients requiring around the clock analgesia, Said Ok not familiar with Butrans, email appt request to further discuss
PPLPMDL0020000001		OH	44125	5/12/2014	Reviewed OxyContin every 12hours, 7 tablet strengths along with Butrans for those patients requiring around the clock analgesia, Initiation/Titration guides, Said he refers out to Pain Mngmnt, No further info requested at this point
PPLPMDL0020000001	Stow	OH	44224	5/12/2014	First time meeting Sabrina. Provided full detail of Butrans covering all key selling messages. Sabrina said she thinks Butrans sounds like a good option and asked about contraindications. Reviewed them from the MVA and she then asked about AE's reviewed them from Bup 3015 as well as a trial overview. I asked her if she has any reservations using? She said none at all and said she knows she will have plenty of opportunity. I reviewed Scott and Kathy profiles. Discussed the option of OxyContin and reviewed dosing, titration, and conversions.<font color=blue>cb>CHUDAKOB added notes on 06/05/2014</b></font>Very interesting next call objective. Will be interested to hear her response.
		OH	44113	5/12/2014	Reminded of OxyContin 7 tablet strengths every 12 hours along with Butrans for those patients requiring around the clock analgesia, said he is referring patients 2 E , not having success with pain Mgmnt. Said to talk with Mary RN Thurs. booked lunch appt, Left Initiation/Titration, formulary grids
PPLPMDL0020000001	Cleveland Fairlawn	OH	44113	5/12/2014	Visited Ortho (Bilfield,Stearns,Mary, Pain, Shen, Daoud) OxyContin/Butrans Initiation/Titration along with savings cards
PPLPMDL0020000001		OH	44333	5/12/2014	Jessica the pharmacist said a patient was in last week and said his Butrans 10mcg would not stick to him? Jessica said she got approval through the patients insurance for another 10mcg patch and said the patch was sticking fine. Jessica said that she is going to get the lot number from the patient when he comes back in. I discussed proper skin prep for Butrans and disposal. Jessica said she reviewed that with the patient. Reviewed new managed care coverage for Medicare and dosing and titration. I reviewed OxyContin dosing and titration and asked her if she is having any issues getting it covered? Jessica said she's not seen any but she said typically the office gets the PA approved. She said she does have many patients that will need to trial MS Contin or ER morphine first.
PPLPMDL0020000001	Stow	OH	44224	5/12/2014	Quick conversation as Sandra had to go to a meeting. Reviewed Bup 3015 and focused on inclusion and exclusion criteria. I asked Sandra to please reassess her patients on IR opioids for 90+ days and to use Butrans for those that meet the indication. Sandra said she is trying and will look for more. I reviewed the OxyContin conversion and titration guide. Sandra said she won't write it and either will others because of past history. I asked her if she uses other schedule 2 ER opioids? She said they do. I asked her why those and not OxyContin? She said she just knows they won't write it. Nothing else learned.
PPLPMDL0020000001	Olmsted Falls	OH	44138	5/12/2014	Discussed fda insight. Dr said he was happy to hear the fda is helping. We talked about atc pain and reviewed initiation for oxycontin and butrans. Dr said atc to him means 3 or 4 pills a day and every day. He said that is what he considers chronic. We talked about his hesitations for starting someone on oxycontin or butrans at that point. Dr said he doesn't like those types of products. I said what did he mean. he said schedule two is just to difficult to write anymore. I said has someone told you not to write them? he said d ohio gov doesn't want primary care treating chronic pain. I we spent a little time going over what he doesn't like about schedule 2 products. Dr said he didn't like the restrictions for seeing npatients back every month and he said they are a pain to treat. I said but isn't your schedule 3 pain patient similar he said no cause he doesn't see them every month. I said so is it the product or the scheduling. he said the scheduling of the pproduct. We talked about Butrans and he forgot it was schedule 3. Dr said his patients like taking pills. I said you haven't written butrans yet, how do you know they won't like Butrans. He said true. Focused on the naive study, results and the initiation guide. Dr said he has tramadol and norco opiatents that meet the criteria per our indication and fit the initiation starting dose. dr said 5mcg was where most his patients fell. Covered fair balance and titration. dr said he would think about it more.
PPLPMDL0020000001	Westlake Akron	OH	44145	5/12/2014	Highlighted two extended release options oxycontin and butrans. mentioned one thing to think about this week....if someone is already on oxycodone, percocet and they are not controlled oxycontin dosed every 12 hours if appropriate could be a good options.
PPLPMDL0020000001		OH	44333	5/12/2014	Caught dr at front counter and asked him if he has patients on Percocet? Dr said yes. I showed him the conversion Gide for OxyContin and told him if he has patients on Percocet for more than 3 months and need a dose adjustment, th conversion to OxyContin may be appropriate. Dr said he tries to but cost and prior authorizations make it hard. I told him I understand and asked him if there is a insurance koan that gives him trouble? D said all of them do. I reviewed the formulary grid and told him I didn't want him to miss opportunities for convert to OxyContin. Dr said he needs more Butrans copy cards. I asked him to reevaluate his patients on tramadol and Norco for Butrans opportunities. Dr said ok.
PPLPMDL0020000001	Cleveland Akron	OH	44113	5/12/2014	Reminded of Butrans for those patients requiring around the clock analgesia,Formulary status, savings cards along with OxyContin 7 tablet strengths every 12hours, Said Ok . Asked to set up appt , said maybe next time I can see if Dr. will set up time
PPLPMDL0020000001		OH	44333	5/12/2014	Told Stephanie at counter about hydrocodone insight. I asked her when she thinks its a time to move a patient to an ER opioid? Stephanie said she is not starting too many patients because she is usually doing follow up appointments. I asked her why even in a follow up appointment why she wouldn't find the opportunity to initiate an ER opioid when a patients is failing IR opioids? She said that the doctors want to start the ER opioids. She said she does most of the refills. I asked for Butrans and OxyContin? She said some but most is short acting. I asked if she believes that if a patient is on Percocet and failing if it makes sense of start an ER opioid like OxyContin? She said it does. Nothing else learned.
PPLPMDL0020000001	Stow	OH	44224	5/12/2014	Dr said that he's been having much more success getting Butrans approved since I was in last for lunch. I asked dr which plans and he just said both Medicare and private insurance. I reviewed the Bup 3015 trial and focused dr on hydrocodone and oxycodone patients selected for the trial. I asked dr at what point he is convert patients to ER opioids? Dr said he tries to when they reach 40mg a day. I asked dr why he waits so long? Dr said he's not. I asked him how long his patients are on IR opioids before they get to 40mg because I told him I'm sure they've been on them for a minimum of 6 months. Sad said that's about right and he tries but its really hard and patients refuse to switch. I told dr he needs to set expectations earlier on in treatment about pain around the clock and the options available. Dr said ok and didn't want to continue conversation. I reminded him about his Percocet patients can also be kept on the same molecule but in a 12 hour delivery.
PPLPMDL0020000001	Westlake Rocky River	OH	44145	5/13/2014	I asked the doctor if he had a chance to think about our discussion last week regarding the place for extended release products appropriate for butrans or/and oxycontin. Dr said he treats some pain and he will think about it. Left him reprint of naive study for butrans and conversion guide for oxycontin.
PPLPMDL0020000001		OH	44116	5/13/2014	Mentioned to the nurse about oxycontin and butrans...dosing and appropriate patient type. Talked about coupons.
PPLPMDL0020000001	Rocky River	OH	44116	5/13/2014	Dr walked into the office and I was the only person in the waiting room. I introduced myself and asked him if he considers oxycontin dosed every 12 hours to be a part of products of choice for his appropriate pain patients.
PPLPMDL0020000001					Dr said he doesn't have many chronic pain patients but has patients on it in the past.
PPLPMDL0020000001	Cleveland	OH	44103	5/13/2014	OxyContin reminder every 12 hours, 7 tablet strengths, formulary grids, along with Butrans for those patients requiring around the clock analgesia, Said ok no time to discuss Butrans with patients but will continue to find appropriate patients for OxyContin
PPLPMDL0020000001		OH	44107	5/13/2014	Pharmacist chuck said they were cutting his hours and he was short staffed. Discussed OxyContin dosing and the coupons. I highlighted a few sections of the reprint letter for Butrans and also discussed patch placement, rotation and the coupons. Pharmacist said he doesn't see many come thru these days.
PPLPMDL0020000001	Cleveland Lakewood	OH	44109	5/13/2014	Left OxyContin/Butrans info for Rph, Requested appt
PPLPMDL0020000001		OH	44107	5/13/2014	Discussed OxyCodone insight and asked him why would someone want to move someone to an extended release product. Dr didn't respond. Reminded on Butrans dosing and managed care.
PPLPMDL0020000001	Lakewood	OH	44107	5/13/2014	Discussed the naive study during open label and pain results. The dr said he doesn't remember how to write Butrans. Reviewed Initiation guide focusing on the conversion from Tramadol and hydrocodone. Highlighted schedule 3, refills and offered fair balance. Discussed OxyContin dosing and the half life of OxyContin and delivery system. Hi lighted managed care for both products.
PPLPMDL0020000001		OH	44107	5/13/2014	Attempted to open with insight today regarding the oxycodone insight. The doctor said she didn't have time to talk today. Gave her oxycontin and Butrans literatuere. asked her to check out butrans studies and the overall pain results demonstrated.
PPLPMDL0020000001	Westlake Akron	OH	44145	5/13/2014	Highlighted the extended release deliver system of both oxycontin and butrans and highlighted the discount cards for each product
PPLPMDL0020000001		OH	44310	5/13/2014	Dr said he completed the grant information online for his cancer bike ride in July. Dr asked about Med 80 Guidelines. Dr said he was sent something on his email about it. I showed him the approved piece on Med 80 and dr said he's good with it. Char and dr said their patients on Butrans are doing really well. Dr said he just titrated a patient from Butrans 10mcg to 20mcg. I asked about why he didn't move to the 15mcg and he said he didn't want to mess with the paring finding it in the pharmacy. I told him the wholesalers cardinal and McKesson have it in stock so the most a patient would wait would be 24 hours. Dr said he understands but said he has no issues moving to 20mcg. I asked dr to please keep OxyContin in mind when he has a patient on Percocet who is complaining of being in pain.
PPLPMDL0020000001	Cleveland Cleveland	OH	44109	5/13/2014	Visited Ortho Dept. Left OxyContin/Butrans Initiation/Titration guides for Dr. (Malone,Hoyen,Sontich etc) requested appts.
PPLPMDL0020000001		OH	44103	5/13/2014	Quick reminder of OxyContin label status Tier 1/3 FDA abuse deterrent properties along with Butrans for those Tramadol patient that fail and are requiring around the clock analgesia, Said Ok, will consider Butrans when sending to Pain mgmnt, no change on CI
PPLPMDL0020000001	Lakewood	OH	44107	5/13/2014	Discussed dosing of OxyContin and Butrans. Michelle the pharmacist said they care both at limited doses. Discussed Butrans dosing and supplementation. Highlighted coupons for both products.
PPLPMDL0020000001		OH	44109	5/13/2014	Reviewed OxyContin 7 tablet strengths every 12 hours along with Butrans for those patients requiring around the clock analgesia, Said ok, he is referring patients to pain mgmnt 150th location, will keep info for reference
PPLPMDL0020000001	Cleveland Cleveland	OH	44109	5/13/2014	Reviewed OxyContin 7 tablet strengths every 12hours along with Butrans for those patients requiring around the clock analgesia, referring patients to pain mgmnt at 150th location, no further info learned
PPLPMDL0020000001		OH	44195	5/13/2014	Reviewed OxyContin every 12hours along with Butrans for those patients requiring around the clock analgesia, Said Ok, Will be moving to Wisconsin
PPLPMDL0020000001	Lakewood Lakewood	OH	44107	5/14/2014	Dr didn't have much time for lunch today. Thanked me for time and I provided him with the dosing of both products and the scheduling options. Fair balance provided
PPLPMDL0020000001		OH	44107	5/14/2014	Talked about what he believes to be atc dosing. Dr said at least 3x a day or more. Dr said he would not wait till someone was on 4x a day dosing of Percocet before moving to a long acting product. Dr said after 2 Percocet if they need more coverage he will write OxyContin. Discussed dosing and fair balance. The dr said he is trying to write under 80mg of morphine equivalent and anything over he will send to pain management. I asked why...he said the ccf has been sending them letters not to treat patients who are on those several. I asked for a copy but he couldn't come up with it. Talked about the opioid naive dose and the variety of doses that OxyContin has available as options. Covered managed care. As for Butrans, I works with the nurses and she told me the majority of their pain patients were on care-source. Therefore, I started with that plan. tramadol patient. Reviewed opioid naive study. Discussed fair balance. Dr said he would start using Butrans more. I told him I was going to follow up and asked what's the best thing I can remind him about. He said managed care.
PPLPMDL0020000001	Cleveland	OH	44104	5/14/2014	Reviewed OxyContin 7 tablet strengths every 12 hours, Core vis. ad discussing Tier 1/3 labeling along with Butrans for those Tramadol failures requiring around the clock analgesia, Said Ok will consider for appropriate patients, no new info learned
PPLPMDL0020000001		OH	44127	5/14/2014	Reviewed OxyContin 7 tablet strengths every 12hours, Formulary grids, FDA labeling in regards to Tier 1/3 discussing abuse deterrent properties, Said He will consider for appropriate patients that have coverage, Asked for that 1 patient said he will try, also reviewed Butrans for those patients requiring around the clock analgesia said OK
PPLPMDL0020000001	Westlake	OH	44145	5/14/2014	Asked the doctor what hesitations did he have writing OxyContin doses every 12 hours for appropriate patients? He said nothing but the name. I asked if he knew anything about the reformulation he said he did. I asked if he doubted it would work, he said no. Gave him coupons for both products and highlighted Butrans dosing. Gave initiation guide for review.
PPLPMDL0020000001					

PPLPMDL0020000001	Cleveland	OH	44104	5/14/2014	Reviewed OxyContin 7 tablet strengths, every 12 hours, Core Visual age Tier 1/3 FDA labeling describing abuse deterrent properties, Also reminded of Butrans for those patients requiring around the clock analgesia, Said he has a few patients in nursing home on Butrans and doing well. Will continue to consider for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44104	5/14/2014	Reviewed Butrans for those patients requiring around the clock analgesia, Also discussed OxyContin Core Vis. aid page Tier 1/3 abuse deterrent properties, Said Ok will continue to consider for appropriate patients, Nothing new learned
PPLPMDL0020000001	Akron	OH	44320	5/14/2014	I asked dr how many times a day she thinks she is refilling products like Norco and Percocet? Dr said all day long! I asked her why then she isn't taking advantage of the ER opioid products like OxyContin and Butrans for those patients who aren't getting enough analgesia or having tolerability issues? Dr said she's not going to change a medicine just because! I told her that's not what I'm asking. I asked her to use OxyContin or Butrans for those patients who have pain around the clock. I asked her what that means to her and she said anyone taking 90 pills or more. I told her then to identify those patients as candidates for OxyContin or Butrans. OxyContin for patients uncontrolled on Percocet and Butrans for those on tramadol or vicoden. Dr said she is thinking about it all the time but almost all of those patients are on Medicaid! I told her about Caresource PA with Butrans and she said she forgot about it.
PPLPMDL0020000001	akron	OH	44333	5/14/2014	I asked dr if he likes to write and or refill hydrocodone products like Norco? Dr said of course not. He hates doing it. I told him then he must use Butrans for those patients on hydrocodone products that either can't tolerate it or have a lack of efficacy and they meet the indication for Butrans. Dr said he knows he should be doing it and said he just had a patient that called in that wanted her vicoden refilled and is taking 20mg a day for a long time. Dr said he thinks that's a good candidate. I reviewed the Kathy profile and the conversions from hydrocodone. Dr said he's going to call the patient back and to come in to discuss Butrans. I reviewed insurance coverage and new Medicare plans. I also told him that the same goes for OxyContin. I asked him to write it when he's ready to refill Percocet and patient wants more. Dr said ok.
PPLPMDL0020000001	Westlake	OH	44145	5/14/2014	Saw Daniele and dropped of literature and discussed managed care information
PPLPMDL0020000001	Fairview Park	OH	44126	5/14/2014	Spoke to Erica the office manager about seeing the doctor today but she said they were closing early cause he was leaving for vacation and won't be back till next week. I told her I would follow up next week and bring some yogurt for the doctor. Erica's aid that that would be great. Highlighted Butrans savings vs cards today and focused in weekly dosing.
PPLPMDL0020000001	Westlake	OH	44145	5/14/2014	Discussed what he defines to be at dosing with an opioid. Dr said at least three doses a day regularly. Dr said he doesn't use much OxyContin. I had him explain why, he said his patients don't have severe pain. We talked about somatic pain that he treats in the office. Osteoarthritis was his biggest he said. I asked how he treats them currently with pain medications. Dr said he uses Tramadol and mentioned a few cox 2 products. I focused on the Scott profile...since the doctor earlier already said atc pain was at three or more pills. I created a spot for Butrans after tramadol and at the point that atc opioid is needed per indication. We reviewed the inclusion criteria of naive study. And reviewed the results of the study as reason why Butrans could be an option. Dr said the results were impressive. Gave the Tramadol insight. I asked the doctor to think about Butrans being a fit someplace in His practice. Dr said he can see Butrans being used and that he would hve to think about the pAtients he has that may be appropriate. Covered fair balance and managed care. Reviewed Initiation guide. Dr said I could return for a follow up. And I worked with Linda his nurse to remind her that he said it. Also discussed product with Linda the ma.
PPLPMDL0020000001	Akron	OH	44313	5/14/2014	Told dr at window that he should be using the OxyContin 10mg for his patients not tolerating or have lack of efficacy on Percocet 20mg. I asked him if he could identify just one patient that fit a this criteria? Dr said ok and said he doesn't use much lower doses. I asked why and he said they need to be started on higher doses. I asked why he's titrating IR opioids then moving to ER? Dr said he does switch them to ER when he knows the time is right. Told him to please try Butrans again and to identify a tramadol patient who has pain around the clock. Nothing else learned.
PPLPMDL0020000001	Akron	OH	44333	5/14/2014	Discussed OxyContin FDA draft letter insight and tiers for OxyContin. Dr said he wanted to review them and ready over All 4 tiers. Dr said he is really liking OxyContin and is finding it very successful in the right patient. I asked dr what the right patient is and he would not be specific. I asked him if a patient is taking 30 mg of Norco is not getting enough analgesia what he does? Dr said he would start on OxyContin 10mg q12. I asked him how he decides this? Dr said its just patient specific. Dr said he uses Butrans for his patients that only need low to moderate doses of an opioid and pain isn't severe. I told dr what the indication is and he said that just where he is using it now. I told him about the approximate conversions. I asked dr if he's ok titrating a patient to Butrans 20mcg? Dr said he has no issues with it. I asked for continued business on each product.
PPLPMDL0020000001	Cleveland	OH	44127	5/14/2014	Reviewed Butrans for those Tramadol failures requiring around the clock analgesia, Initiation/Titration, Savings cards along with OxyContin every 12 hours, 7 tablet strengths, Said she will consider with the help of Renee (PA's), overall considering not to prescribe/treat any pain.
PPLPMDL0020000001	Akron	OH	44333	5/14/2014	Dr told me that he has written 3 OxyContin this week. I asked him to give me the specifics and he told me one was a new start for a patient already taking 4 Percocet a day. Dr said he started on 10mg and said he will probably titrate. I told him he can titrate every 1-2 days. Dr said that the others were refills but had also titrated both. I asked him to continue using OxyContin where appropriate. Discussed Butrans 10mcg as his primary starting dose as he told me he moves through doses pretty quick and finds that the 15mcg works really well and the few patients he has moved to it love it.
PPLPMDL0020000001	Uniontown	OH	44685	5/14/2014	Dr said she was 5 patients behind today and didn't have much time to talk. I discussed with her the need to use Butrans for a patient like Scott and Kathy. I asked her if she thinks its a good option and asked her what's holding her back? Dr said she's just now building up her practice and it will come. I asked her if she has any reservations in using it or questions? Dr said no. I asked for more business. OxyContin conversions and titrations.
PPLPMDL0020000001	Akron	OH	44320	5/14/2014	I told dr I wanted to follow up on the conversation we has last week regarding her using of opioids. Especially OxyContin. I told her I understand and and empathize with her situation in the office about using opioids. Dr said she appreciates it and said she has patient in just today who she sent to pain management and patient said he didn't want to go because he thinks "they are all zombies." I asked her what she thinks and she said the patient wants surgery for his back but said he needed something for the pain in the mean time. I asked her what she gave him and she said he had been on Percocet before so she gave him a Rx for it. I told her that if the patient has been in pain for an extended period of time which is sounds why she didn't prescribe the same thing but in a 12 hour delivery system that's a single entity opioid? She said it doesn't matter. I told her it does matter! Asked her to at least write Butrans for those failing or can't tolerate tramadol or Norco.
PPLPMDL0020000001	Cleveland	OH	44105	5/14/2014	Quick OxyContin review, 7 tablet strengths every 12hours, Core Visual aid page Tier 1/3 FDA labeling discussing abuse deterrent properties along with Butrans 7 day transdermal for those patients requiring around the clock analgesia, Said she will consider, no time discuss, email request (Gaby Elkhoury-Med. Dir handles appt requests usually
PPLPMDL0020000001	Akron	OH	44303	5/14/2014	Rod told me he has sold 2 oxycontin and 1 Butrans this week already. Rod said that he filled the Butrans for dr Vucetic and OxyContin came from Petrus. Rod said he needed more OxyContin copy cards and is good on Butrans. I asked which doses he stocks and he said all OxyContin and 5 and 20mcg for Butrans.
PPLPMDL0020000001	Munroe Falls	OH	44262	5/14/2014	I asked dr what it might mean to a patient who is on Percocet and is complaining about being in pain or can't tolerate it to be given the same molecule but in a 12 hour delivery system? Dr said it could mean a lot. I asked her what around the clock pain means to her? She said more than 3 pills. I showed her the conversions from Percocet and asked her to identify those that meet the criteria we discussed. Dr said it makes sense. Discussed the same scenario for a tramadol patient and showed her the conversions and asked her to identify just one patient to start. Dr said ok. Discussed copy cards for each.
PPLPMDL0020000001	Cleveland	OH	44104	5/14/2014	Discussed with RPH, OxyContn every 12 hours along with Butrans 7 day transdermal, Said he sees some form Bennett and Pandit. Will help if appropriate- <font 05="" 06="" 2014&lt;="" and="" b&gt;&lt;="" bennett="" closed="" color="blue&gt;&lt;b&gt;CHUDAKOB" font&gt;<="" font&gt;butrans="" font&gt;sees="" from="" on="" oxycontin&lt;font="" pandit?&lt;font="" query="" response="" some="" td="" the="" what=""></font>
PPLPMDL0020000001	Cleveland	OH	44120	5/15/2014	Discussed w/Ebony Phar Mgr. OxyContin every 12 hours, Tier 1/3 labelling that describes abuse deterrent properties, along with Butrans for those patients requiring around the clock analgesia, Said Ok, has staff on occasion to recommend switching IR to ER OxyCodone
PPLPMDL0020000001	Cleveland	OH	44113	5/15/2014	Reviewed Butrans formulary status, along with Savings cards, Said she continues to find success prescribing to appropriate patients, Reminded of Senokot S, No new info learned
PPLPMDL0020000001	Cleveland	OH	44120	5/15/2014	Quick Review of OxyContin 7 Tablet strengths every 12hours along with Tier 1/3 FDA labeling describing abuse deterrent properties, Along with Butrans for those patients failing on present therapy requiring around the clock analgesia.Said she will consider Butrans for those appropriate patients,
PPLPMDL0020000001	Cleveland	OH	44113	5/15/2014	Reviewed Butrans for those Norco failures who require around the clock analgesia, also discussed OxyContin every 12hours, 7 tablet strengths, Said she will continue to find appropriate patients for Butrans and no change on position of CII's. OTC reminder
PPLPMDL0020000001	Cleveland	OH	44113	5/15/2014	Reviewed OxyContin Q12h, 7 tablet strengths and Tier 1/3 FDA labeling which discusses abuse deterrent properties, In addition Butrans for those patients requiring around the clock analgesia who are failing on present therapy, Said Ok will consider for appropriate patients, deferred to Barb RN,Discussed having a policy to enter into pain contracts etc. Elva Thompson NP
PPLPMDL0020000001	Akron	OH	44308	5/15/2014	MSL email communication to Ms. Tonni and Dr. Frieber to provide OTR enrollment update and offer support.
PPLPMDL0020000001	Barberton	OH	44203	5/15/2014	Spoke to office manager dawn and gave her the letter and also highlighted the products promoted with leave behinds for the doctor. Focused on dosing and scheduling for both products. Office only does Workers comp.
PPLPMDL0020000001	Cuyahoga falls	OH	44223	5/15/2014	Quick hello at window and asked her where she is finding OxyContin most useful? Kim said she is usually either refilling it or adjusting doses. Kim said that she likes OxyContin and her patients like only having to take it twice a day. I reminded her to continue to use Butrans for those needing dose adjustments on tramadol or vicoden.
PPLPMDL0020000001	Norton	OH	44203	5/15/2014	Spoke to Pam regarding the oxydcontin patient esses kits and the dosing and scheduling of the product. highlighted butrans initiation guide and focused in on dosing with butrans and s cheduling. She said she would pass the information along to the doctors.
PPLPMDL0020000001	Richmond Hts	OH	44143	5/15/2014	Quick window. Had packet of info together, with marketing pieces, conversion guides, both products. Marjorie placed on counter. I mentioned OxyContin and Butrans as options for pain severe enough to require daily, ATC, opioid and Dr Staneskus states he has no interest in long acting opioids, and stated he doesn't want any of the info I was leaving him. He will not write in future.
PPLPMDL0020000001	Mayfield Heights	OH	44124	5/15/2014	(In same building as husband Gabriel Stanescu, so went down and dropped out packet of info.) For future, found out from med asst Denise, they do lunches on Mon & Thurs when all 3 doctors in. Quick window, asked Dr. to review info on both ER opioids, OxyContin and Butrans.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/15/2014	Spoke with dr Narouze and Kim Kainerc is the hospital. Discussed OxyContin and Butrans.
PPLPMDL0020000001	Richmond Heights	OH	44143	5/15/2014	(same building as Gabriel Stanescu) Left information with Denise. Lunches for pharma reps are Mon and Thur when all 3 hcpis in (including Sara Eapen, Pediatrics and Internal Medicine) Left packet of information - let Denise know I have ER opioids, one oral OxyContin and one patch - Butrans.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/15/2014	I asked dr which IR opioid he sees the most when patients are referred to his practice? Dr said either hydrocodone or oxycodone. I told him about the hydrocodone insight and asked him if he finds those patient types good candidates for Butrans? dr said it depends on the patient. I showed him the Kathy profile and reviewed. Dr said he likes Butrans and will keep using it. Reviewed the oxycontin conversion and titration guide and asked for OxyContin when patients are uncontrolled on Percocet and they are candidates for an ER opioid. Nothing else learned.
PPLPMDL0020000001	Highland Heights	OH	44143	5/15/2014	Lunch. Total office call. Any med assts that handle prior auth's - reminder of OxyContin broad commercial/Med D coverage. Butrans, Aetna preferred status, UHC AARP and Caremark/Silverscripts Med D. Proactively discussed July 1 change for prior auth with UHC commercial, also shared all with Dr. Salama. Discussed OxyContin FDA dried labeling with Dr. Salama. Also discussed lowest effective dose and 10 mg starting dose "every 12 hours." He listened yet, I could tell he was not engaged. He stated he does not want to use OxyContin moving forward. I responded I respect that, let's move on to Butrans. (He and med assts shared with me he's also being using laser technique for pain, especially arthritis of joints: elbow, knee, back, etc.) He will continue to use Butrans when appropriate, as his patients continue to do well on Butrans. Asked him to keep Med D patients in mind for Butrans this week, due to better Med D coverage. He agreed he would do that. Discussed renal and hepatic impaired patients in FPI for Butrans, remember 4 strengths available.
PPLPMDL0020000001	Cleveland	OH	44113	5/15/2014	Visited Ortho/Neuro (Orr,Osorio,Halabi) OxyContin/Butrans Initiation/Titration guides

	Barberton	OH	44203	5/15/2014	I asked the doctor what were his hesitations for writing oxycontin these days? The doctor said he doesn't write that product because he feels it gets people addicted. Gave fair balance on abuse potential and covered the limitations. Talked about dosing Oxycontin every 12 hours for the appropriate patient. Asked him why wouldn't he convert a patient from short acting oxycodone (like percocet) to Oxycontin being the same molecule if the patient needed the coverage etc? Dr said he tends not to write it. Asked how he doses tramadol currently: Dr said sometimes three sometimes four. I asked if an extended release product could be an option for some of those patients that were appropriate per our indication and the doctor said yes. In working with the staff prior to the dr coming back they verified that a large number of their patients were caresource (I also noticed a billboard on the road across from their office advertising caresource). They also have a silver script and aarp and many other med d plans. I focused on caresource patients, the coverage with butrans. Dr has written the patch technology of duragesic in the past he said. I said so you are comfortable with writing patches for patches? He said yes. Reviewed the initiation guide and the dosing. Dr said most of his patients for tramadol fall under the 300mgs a day, therefore we focused on the starting dose of 5mcg. Covered titrating and offered fair balance. Dr said he will look for a patient to try butran
PPLPMDL0020000001	Norton	OH	44203	5/15/2014	I asked the doctor if he will start focusing in on the percocet patient needing atc coverage to convert them to Oxycontin. Reviewed dosing and strengths. Dr said he has no problem doing that. Focus on Butrans was converting tramadol patients or norco patients to Butrans before they are on the short acting products several times a day. Dr asked about managed care. I asked what issues he is having with rejections. Dr said he was getting some but didn't know who or what plan. Lisa the previous nurse who handled the pa and such are no longer at the office and their is a new rn jen doing the paperwork now. I reminded him about the commercial insured patients and the experience program for butrans. Caresour.ce/pa. Dr said he likes butrans because of the dosing. I said you should also like it cause of the pain relief results in the naive study was at least a 30Percent pain reduction. Dr said 30 percent seems low. I said at least 30 percent. I said do you except 90 or 100% pain relief when you gave our your last opioid? He said not really. Dr said he only measures the success if the patients don't complain needing more increases cause he doesn't like to titrate. I told him id return in a few week and asked him to collect any rejection letters.
PPLPMDL0020000001	Richmond Heights	OH	44143	5/15/2014	Quick hallway. Asked Dr Balaji to consider 2 ER option for patients suffering from pain: OxyContin with opioid naive/starting dose of 10 mg dosed "every 12 hours" or Butrans transdermal patch with 5 mcg hr opioid naive/starting dose, worn every 7 days. Asked to review info I left, which includes Butrans Aetna flashcard and OxyContin savings sell sheet.
	Barberton	OH	44203	5/15/2014	Saw dr thru window. I asked him if he has given any more thought to trying oxycontin dosed every 12 hours or butrans dosed weekly for those appropriate pain patients. Dr said he doesn't write much for pain, but hasn't seen the right patient type. I said I can understand that, focused on the somatic pain patient under 300mg of tramadol for example you can start at 5mcg of butrans dosed weekly or if you had someone already on percocet you could convert to every 12 hour dosing if they were needing atc pain coverage. He said he will think about it.
PPLPMDL0020000001	Barberton	OH	44203	5/15/2014	Reminded the doctor about the extended release options for that person who required pain coverage at regular intervals throughout the day/night atc. Oxycontin every 12 hours schedule 3 and butrans schedule 3 dosed weekly. Dr said ok.
PPLPMDL0020000001	Cleveland	OH	44113	5/15/2014	Quick reminder of OxyContin 7 tablet strengths every 12 hours, along with Butrans for those patients requiring around the clock analgesia, Said Ok, nothing new learned
PPLPMDL0020000001	Barberton	OH	44203	5/15/2014	Reminded the doctor about the dosing of butrans and his aarp/silver script coverage for med d patients. Highlighted that oxycontin dosed every 12 hours as another option for schedule 3 with many doses available for a patients treatment.
PPLPMDL0020000001	Cleveland	OH	44120	5/15/2014	Reviewed OxyContin 7 tablet strengths every 12 hours, Approved Tier 1/3 labeling describing abuse-deterrent characteristics, Said ok, not prescribing CII's, Reviewed Butrans for those patients requiring around the clock analgesia who are failing on present therapy, likes delivery system, reiterated that Butrans has the same abuse potential as other opioids, Asked for that 1 patient
PPLPMDL0020000001	Garfield Hts	OH	44125	5/16/2014	Reviewed OxyContin/Butrans with Tech, will relay info to Rgn, no further info learned
PPLPMDL0020000001	Cleveland	OH	44105	5/16/2014	Reviewed OxyContin as the first ER opioid with FDA approved Tier 1/3 labeling that describes abuse deterrent characteristics, 7 tablet strengths every 12 hours, Said he will consider, but not staffed to do PA's along with treating pain. In addition reviewed Butrans 7 day transdermal for those patients requiring around the clock analgesia, Said he will consider.
PPLPMDL0020000001	Garfield Hts	OH	44125	5/16/2014	Quick OxyContin reminder 7 tablet strengths every 12 hours along with Butrans for those Patients requiring around the clock analgesia, Said Ok, will consider for appropriate patients that have coverage,
PPLPMDL0020000001	Cleveland	OH	44125	5/16/2014	Reviewed OxyContin 7 tablet strengths every 12 hours, along with Butrans for those patients requiring around the clock analgesia, Said Ok, refers to Pain Mgmt, but will consider for appropriate patients, schedule in-service thru Sherry
PPLPMDL0020000001	Berea	OH	44017	5/16/2014	Reviewed the dosing of Oxycontin and the 7 doses available to patients. Highlighted the Butrans experience program, dr said he will give it out with an explanation to the patients. I told him I'd follow up.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/16/2014	I asked dr if he liked writing and refilling tramadol and vicoden? Dr said no and said he truly thinks its the worst part of his day. I gave him the Nancy profile and reviewed it with him. I told him he's missing opportunities for Butrans. I asked him what his definition of around the clock pain is? Dr said 90 pills or more a month. I asked him to identify patients that fit that criteria and when they need a dose adjustment or tell you they can't tolerate it to give them Butrans. Dr said ok. Dr said he knows he needs to be using more and will. Discussed copay cards and new Medicare wins.
PPLPMDL0020000001	Berea	OH	44017	5/16/2014	Dr said he would write OxyContin if appropriate. Talked about dosing and coupons. I asked why he hasn't written Butrans yet. He said the cost. I said what do you mean and he said why would he write a branded price when a patient can get their medication for cents on hydrocodone. I said are you telling me you only write generics. He said most of the time he does. Reviewed managed care coupons and he said it was costing the nation a lot of money to write branded especially for caresource and med d patients.
PPLPMDL0020000001	Berea	OH	44017	5/16/2014	Dr aside doesn't write schedule two products. Talked about experience kit and told her that her last few patients completed their survey and got their card. She said it was great to hear. I reminded her that it helps to tell them it's there and the information is showed the card, showed her a visual. Reviewed dosing.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/16/2014	Quick call over lunch and discussed dr refilling his products like tramadol and hydrocodone. Dr admitted to refilling and writing these each week. Discussed with him two profiles Scott and nancy and told him that he is missing opportunities for Butrans. Discussed how he can use Butrans which is the same schedule as vicoden and provide refills. Discussed formulary and asked dr for more clinical use. Dr said he will do it to be use because the patients he has on it do well..
PPLPMDL0020000001	Akron	OH	44312	5/16/2014	I asked dr why he has put a stigma on OxyContin? Dr said he really hasn't but he agrees with dr month in that he doesn't like writing schedule 2 opioids and those are meant for the specialists. I asked him if he's writing or refilling Percocet? Dr said yes. I explained the delivery system of OxyContin and asked him to convert patients who are already on oxycodone but still in pain around the clock. Dr said ok. Discussed Butrans patient type selections and reviewed Kathy profile. I asked dr if he has a few patients that meet her criteria. Dr said he does and said he will continue to look and try to get back into using Butrans. Dr said last time insurance was an issue. I reviewed commercial plans and medicare.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/16/2014	Quick hello while I was speaking to Janet. Dr said he's out of Butrans copay cards and almost out of OxyContin. I went back to the office, left cards and asked dr if he's using OxyContin 10mg for patients? Dr said he uses most of it in the hospital and finds it easy to convert patients in rooms who are already on Percocet. Dr said he doesn't think he uses more of one dose than another. I asked for continued business. I also told him to continue identifying patients for Butrans like those on tramadol or vicoden. Dr said he really likes Butrans and those are the patients he is using it on. Gave him the new Medicare coverage for Butrans.
PPLPMDL0020000001	Akron	OH	44312	5/16/2014	I told dr simply put, I am guessing he continues to have patients every day who get their IR opioids refilled and may be appropriate for Butrans. DR agreed and said he wrote it recently for a Norco patient and the patient said they are very happy. I asked for continued business and told him about the new Medicare coverage. Reviewed OxyContin conversions and titration guide and told him it works! Dr agreed.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/16/2014	provided overview of Butrans and asked him if he writes tramadol or vicoden. Dr said all day! I asked him why he does it? Dr said that its just something that he and many others do even though they don't want to. I told him Butrans may be a solution for him and his patients. Explained Kathy and Scott profiles. Dr asked if its abuseable? I told him that Butrans is an opioid and can be abused or misused like any other opioid. Dr said he likes the dosing structure and said he can see how it would be a good option. Dr asked about conversions so I reviewed the conversion scale. Discussed use of meds for breakthrough and titration. Reviewed copay cards and insurance. Dr said he will find a few patients.
PPLPMDL0020000001	Cleveland	OH	44127	5/16/2014	Reviewed Butrans for those Tramadol failures requiring around the clock analgesia, along with OxyContin every 12 hours, Said Ok, PA's are a challenge, Dr. Ruben has a patient waiting for approval/ is out on medical leave
PPLPMDL0020000001	Euclid	OH	44117	5/16/2014	Met with med asst Lori. Went over formulary grids for OxyContin and Butrans. Left both grids, discussed Aetna flashcard, BWC, Med D update for Butrans. Left Butrans initiation guide for Dr. D. He changed hours in Painesville. In MON 10-6, THUR 1-6. Met next with OM Norma Krauss. Shared non branded items with her including OARRS flashcard and urine screen CD flashcard. Secured lunch June 23.
PPLPMDL0020000001	Akron	OH	44312	5/16/2014	Good discussion with dr month in and Taylor in their office. Discussed OxyContin use in the patients in his practice. Dr talked about how he has maybe one or two patients but tries not to use schedule 2 opioids. I asked when he thinks OxyContin would be appropriate? Dr said for severe pain. I showed him the visaid and discussed patient types and disease states. Dr said he understands and said he has a much better feeling of Butrans. Discussed use of Butrans and asked him to just identify more patients for it. Dr said he's getting busier so there will be more opportunity. Discussed conversions and AE profile.
PPLPMDL0020000001	Uniontown	OH	44685	5/16/2014	Saw heather at front counter and I asked her despite her previous experience with OxyContin in a pain office if she believes it has a specific purpose? Heather said it does and patient selection is very important when its written. I asked her who she believes is a good candidate then? Heather said cancer pain and when a patient has tried other medicines are were not providing relief or tolerated. I asked if she sees patients on Percocet who are still in pain? She said not many. I told her if and when she does to convert to OxyContin. Heather said ok. I told her to also use Butrans as an option when patients fail tramadol or Norco. Heather said she's more apt to use it than OxyContin. I told her that's fine because both products have very good efficacy and AE profiles.
PPLPMDL0020000001	Brooklyn	OH	44144	5/19/2014	Quick OxyContin reminder, every 12 hours, 1st ER FDA Tier 1/3 labeling that describes abuse deterrent properties along with Butrans for those patient not adequately controlled on present med. Requiring around the clock analgesia. Said, sending most patients to pain Mgmt but will consider if appropriate.
PPLPMDL0020000001	Brooklyn	OH	44144	5/19/2014	Reviewed OxyContin every 12 hours, Formulary coverage along with Butrans for those patients around the clock analgesia. Said ok, and will continue to present for appropriate patients
PPLPMDL0020000001	Lyndhurst	OH	44124	5/19/2014	Lunch w practice; she was too busy to take lunch break, so went upstairs for hallway call. Discussed Butrans appropriate patients - opioid naive. or after pm Tramadol or Codeine; when patients need ATC opioid for long term therapy. Reviewed previous discussion where she's comfortable writing Butrans in her Med D population; yet she could never get approved. Updated her on Butrans UHC AARP & Caremark Silverscripts Med D. Let her know I'd keep Diane & Susie updated on formulary changes. Met with Susie who handles BWC claims.
PPLPMDL0020000001	Cleveland	OH	44144	5/19/2014	Reviewed OxyContin first ER opioid with FDA approved Tier 1/3 labeling that describes abuse deterrent properties, formulary grids, 7 tablet strengths every 12 hours, along with Butrans for those patients requiring around the clock analgesia. Said she will consider for appropriate patients, Asked for 1 of Dr. Hilton's patient conversion said he will keep it in mind
PPLPMDL0020000001	Cleveland	OH	44109	5/19/2014	Reviewed OxyContin/Butrans with Tech, Savings Cards, Floater Rph. Said all Medicaid No further info learned
PPLPMDL0020000001	Lyndhurst	OH	44124	5/19/2014	Hallway. Hand delivered Purdue letter. Asked dr what type of pain reduction he expects from opioids? He replied depends on etiology of pain, but he expects about 50% reduction. Shared Butrans BUP 3024. Pain reduction data. He says 4.6 is good reduction in study. Discussed BWC - he did not realize BWC pays for Butrans. Discussed Caresource Prior Auth, UHC AARP & Caremark Silverscripts Med D for Butrans. Left & discussed updated indication for OxyContin & all ER opioids per FDA.
PPLPMDL0020000001	Lyndhurst	OH	44124	5/19/2014	Save
PPLPMDL0020000001	Akron	OH	44319	5/19/2014	Meeting dr for the first time and realized she is a pediatric physician and OxyContin and Butrans do not apply. I asked dr if she sees any adults and she said no. Nothing else learned.
PPLPMDL0020000001	Fairlawn	OH	44333	5/19/2014	Quick hello at front counter and told him to please continue to use OxyContin especially for those already on oxycodone who need a dose adjustment. Dr said ok. I asked him if he would use 10mcg for those patients on Percocet 20mg and he may be ready to write that next pill. Dr said ok. I asked him if he will also write more Butrans for those Norco patients ready for a dose adjustment? Dr said he's trying and may have one he's going to see this afternoon. I reminded her about copay cards and to ensure to use them.
PPLPMDL0020000001	Cleveland	OH	44124	5/19/2014	Lunch. Dr Prada attended lunch with my other 3 tiered HCPs at this location. Asked if she visits nursing homes? She responded no. It was my intent to find out if she'd consider an ER opioid outside of her practice/urgent care setting. Discussed OxyContin & Butrans as ER opioids for pain, of which she has no interest. She always refers to pain specialty.

PPLPMDL0020000001	Lyndhurst	OH	44124	5/19/2014	Dr Reed sick, so asked to see Dr Roda. Met with RN Katie & office mgr at window. Dr Roda behind, as she's seeing Dr Reed patients as well. Discussed OxyContin FPI update, left 3 FPIs. Discussed Butrans updated indication. Updated on Aetna, UHC AARP MED & Caremark Silverscripts MED D , left Butrans access brochure for all HCPCS.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/19/2014	Dr called and said he only had one Butrans copay card left. Discussed his use of the cards and BEP kits. Dr said he will be using the kits for sure. I asked for continued business and reminded him of the new Medicare plan coverage. I also told him that OxyContin should also continue to be a product he can use when his patients on Percocet ask for more. Nothing else learned.
PPLPMDL0020000001	Akron	OH	44313	5/19/2014	I asked dr to tell me about a couple of examples of the types of patients who present in pain to his office? Dr said he treats a lot of acute pain and some chronic pain. I told dr that when we talk about the two opioids I have like OxyContin and Butrans, we need to focus on patients who have around the clock pain. I asked dr if he has patients who complain of pain all day long? Dr said yes. I showed him the page in the OxyContin visaid the type of pain like OA, cancer pain and low back pain. I asked if he treats those conditions? Dr said yes. I showed him the 10mg OxyContin page and asked him for business for those already on oxycodone for the disease states we discussed. Dr said ok. Showed him the conversions and asked him if he will convert more patients? Dr said ok. Told him the patient type selection is also important with Butrans. Discussed Scott profile and discussed in depth. I asked for patients like Scott for Butrans.
PPLPMDL0020000001	Cleveland	OH	44109	5/19/2014	Reviewed OxyContin every 12hours, Tier 1/3 labeling that describes abuse deterrent characteristics,Savings Cards, said she is very comfortable with OxyContin along with colleagues, Discussed Butrans, 7 day transdermal, Initiation/Titration, Patient info booklets along with Savings cards, said ok will consider, likes delivery system, reiterated Butrans has the same abuse potential as other opioids. Rotates between research and clinic
PPLPMDL0020000001	Fairlawn	OH	44333	5/19/2014	Spoke with the pharmacist Gary about OxyContin and showed him the conversion and titration guide. I asked him if he dispenses it and if he has a lot of patients coming in to refill their Percocet? Gary said he dispenses it but sees many more Percocet. Gary said the 12 hour oxycodone makes more sense for many people. I showed him from the conversions where it would be appropriate and like Gary said to convert patients when they are in pain around the clock. Gary said they dispense most of 10, 20 and 50 mg tabs and have it all in stock. Discussed Butrans dosing, conversions and Kathy profile. Gary said he forgot it is a schedule 3 and the patch is good for a week. I asked him if it makes sense and he said it does and they have one patient on 10mcg and its the only dose they stock.
PPLPMDL0020000001	Akron	OH	44319	5/19/2014	Spoke with dawn the doctors nurse about OxyContin and Butrans. Dawn said she spoke to dr about our conversation and said she is interested in Butrans. I reviewed both the Scott and Kathy profiles and asked if the dr knows where to use it? Dawn said she will make sure to discuss the profiles with her. I gave dean the OxyContin conversion and titration guide and showed her how a patient on Percocet can be converted to q12 OxyContin. Left copay cards.
PPLPMDL0020000001	Cleveland	OH	44109	5/19/2014	Visited Onc. Dept (Trey,Brell, Obrien) reviewed OxyContin/ Butrans Initiation/Titration, Savings cards
PPLPMDL0020000001	Lyndhurst	OH	44124	5/19/2014	Met w pharmacist Steve Greene. Discussed OxyContin updated indication, dosing schedule "every 12 hours.". Butrans discussed updated indication, reminder 4 strengths, left NDC brochure. Discussed educational aspect of Butrans patient guide (left 2) left & discussed how to protect your pharmacy brochure.
PPLPMDL0020000001	Lyndhurst	OH	44124	5/19/2014	Lunch. Total office call. Asked dr what he considers long term pain to be? He responded AROUND THE CLOCK pain. I asked him how many IR opioid tablets would a patient be on for him to consider converting to ER opioid? Dr responded after 2 Percocet. Discussed OxyContin dosed every 12 hours for those patients who need ATC opioid. Discussed Butrans after Tramadol. Showed core vis aid with 10 mcg hr dose as appropriate for Tramadol conversion. Asked him to consider Butrans fir BWC - and followed up with Rosie (suite 104) as she handles large % of BWC & prior auths for practice. Reminded him about Butrans trial offer.
PPLPMDL0020000001	Akron	OH	44319	5/19/2014	Led conversation with FDA draft guidance insight and followed it up with the tiers for OxyContin. Dr said he feels comfortable with OxyContin and said it has a specific place. I asked him what that place is? Dr said when his patients on Percocet or oxycodone plain want more for increasing pain. I told dr that when we talked last time. He admitted he needs to use more of the lower doses of OxyContin. I showed him the 10mg page from the MVA and the. Showed him the conversations. I also told him that the last time we spoke that he said around the clock pain to hi is a patient needing 90 pills a month or more. I told him that when a patient is on 20mg of Percocet that's about 120 pills a month and that patient is a good candidate for OxyContin. Dr agreed and said he will convert sooner. Discussed Butrans and told him he needs to have specific patient identification for it just like OxyContin. Discussed e Scott and Kathy profiles. Dr said he used Butrans last week. I asked him to tell me about it. Dr said the patient was on Percocet and didn't want OxyContin. Dr said he started on 10mcg Butrans and the patient has UHC community plan. I told him its a PA and he said its getting done as we speak and should be approved. I asked for continued use and told him that roughly 70% of his Medicare plans are from UHC aarp and Caremark silverscript. Dr said he likes that a lot and will get him to use more.
PPLPMDL0020000001	Brooklyn	OH	44144	5/19/2014	Reminded of OxyContin every 12hours, formulary status along with Butrans for those patients requiring around the clock analgesia, Said he hasnt forgotten, just not seeing many patients
PPLPMDL0020000001	Cleveland	OH	44109	5/19/2014	Quick Review of OxyContin 7 tablet every 12 hours,Savings Cards along with Butrans for those patients requiring around the clock analgesia, Said Ok leave info, will contact if appt needed
PPLPMDL0020000001	Mayfield Heights	OH	44124	5/19/2014	Hallway. Dr shared he started 2 new patients recently on Butrans. I asked him for what type of pain (left out conditions)? he responded back "chronic pain" - asked how patients are doing? Dr stated good so far. He stated his son is a pediatric oncologist, and Dr Vilinsky shared info on this "miracle drug" for his patients - (Butrans) responded with indication : Butrans is not indicated for pediatrics or patients under age 18. Reminded dr of trial, savings cards in closet for Butrans commercial/ cash patients; updated on Butrans preferred Med D status. Left Butrans formulary grids, Aetna flashcard w his main med Asst Keanna.
PPLPMDL0020000001	Cleveland Hts	OH	44118	5/20/2014	Discussed OxyContin as the 1st ER Opioid FDA approved Tier 1/3 labeling that describes abuse deterrent characteristics,Every 12hours, Said Ok, not prescribing many ER Opioids, sends to pain mgmnt, asked out of those 10 are any of those appropriate for OxyContin or Butrans? Said he will consider. Reviewed Butrans initiation/Titration, Savings cards, Formulary, OTC
PPLPMDL0020000001	Cleveland Hts	OH	44118	5/20/2014	Reviewed OxyContin formulary status For Med D (UHC,AARP, and Silverscripts) along with Butrans for those patients requiring around the clock analgesia. Said Ok will consider for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44118	5/20/2014	Reviewed OxyContin formulary status For Med D (UHC,AARP, and Silverscripts) along with Butrans for those patients requiring around the clock analgesia. Said Ok will consider for appropriate patients and will help reminding Dr. Harris
PPLPMDL0020000001	University Hts	OH	44118	5/20/2014	Reminded of OxyContin every 12hours, formulary coverage, savings cards along with Butrans for those patients requiring around the clock analgesia, failing on present therapy, said he will continue to look for appropriate patients,nothing new learned
PPLPMDL0020000001	Mayfield Heights	OH	44124	5/20/2014	Asked Dr Chteingart to consider OxyContin, at lowest effective dose after Tramadol. Showed conversion in core vis aid. She asked if she can give Tramadol with OxyContin, as her patients always require "rescue IR med". Suggested she provide oxycodone as same molecule. Dr states she will keep in mind OxyContin every 12 hours conversion. Left conversion guide. ( 1 for Dr Egresshvil) who just left. Showed Scott profile & asked her to consider Butrans after Tramadol for appropriate patients. Showed 10 mcg hr start for opioid experienced patients. Dr stated she's worried about Butrans Med D coverage. Followed up with Butrans preferred status on UHC AARP MED D & Caremark Silverscripts Med D.
PPLPMDL0020000001	Solon	OH	44139	5/20/2014	Denny and I met to plan for our call with Ron Wheeler at DDM and then we made the call together. We filled out the information for the upcoming August promotion. Discussed 2014 promotions with Ron
PPLPMDL0020000001	Tallmadge	OH	44278	5/20/2014	I asked dr how he decides who he is going to convert to OxyContin? Dr said patients who he is willing to treat who need a long acting opioid? I asked him if he is typically converting from Percocet? Dr said mostly yes. I asked him to use OxyContin for his patients who need a dose adjustment on Percocet and are in pain around the clock. Dr said that's usually what he does. Reviewed Kathy profile and asked him to use Butrans clinically.
PPLPMDL0020000001	Euclid	OH	44132	5/20/2014	Met w med asst front window. Dr is ONLY HCP in untill Friday-it's best to stop back Fri. Left laminated pain scales. Med asst said they are so helpful, asked me to leave a few extra. Left dr Pam profile for Butrans, initiation guide. Left OxyContin conversion guide & savings sell sheet.
PPLPMDL0020000001	Westlake	OH	44145	5/20/2014	Spoke to Lori about butrans experience program, she said she would remind Brian the NP of the information. Dr came to window. Quick hello and told him i was back again to give his pain patients more extended release options if appropriate. Gave him the leave behind information.<font color=blue><b>CHUDAKOB's query on 06/05/2014</b></font>-Lisa, it doesn't look like there was a product mention of either product to the physician. Am I correct on this? Leaving behind info, doesn't constitute a product discussion unless it followed some product discussion.<font color=green><b>BARTOLI's response on 06/06/2014</b></font>> highlighted the extended release products and said by name the product. Didn't get into a deep conversation because the doctor came to the window to drop off a chart and was heading back into a room. Dr told me to make sure had cousins. I reminded him they were right in front of him on the ck out counter.<font color=blue><b>CHUDAKOB added notes on 06/08/2014</b></font>-OK. Be sure you are capturing what was said about the products, even if it was
PPLPMDL0020000001	Tallmadge	OH	44278	5/20/2014	Quick hello at counter and asked him if he has any patient taking tramadol for 3+ months? Dr said probably. I showed him the Scott profile and asked him if he classifies pain around the clock as a patient taking a medicine for 3+ months? Dr said typically yes. I reviewed his profile and asked hi. If it makes sense to use Butrans? Dr said he has grid a couple of times and it was denied. I asked where and he couldn't remember. I asked hi if it was flat out denied or a PA was necessary? Dr said he doesn't remember. I asked him to use Butrans again. Reminded him about where and when to use OxyContin by use of the conversion guide.
PPLPMDL0020000001	Mayfield Heights	OH	44124	5/20/2014	Pharm Mgr Warren states all his Butrans stock expired - Hillcrest Pain Mgt stopped writing all of a sudden. Left Butrans pharmacist guide. Left 1 Butrans patient guide. Found out that pharmacies had to file WEEKLY OARRS report, now they have to file DAILY. Let him know of non. Branded items I discuss & leave w my customers such as OARRS flashcard.
PPLPMDL0020000001	Mayfield Heights	OH	44124	5/20/2014	Met with med asst Catherine at front window. Discussed OxyContin START principles, left conversion guide. Discussed Butrans indication, left Pam profile, left initiation guide. We will discuss w Dr Leizman.
PPLPMDL0020000001	Akron	OH	44305	5/20/2014	I showed dr the Scott profile and told him I wanted him to use Butrans for patients like Scott who have aarp or Caremark Silverscript. I explained plan coverages and told him that the Medicare population needs branded products are are priced lower. Dr agreed. I asked him if he would write it for 55% of his medicare population which these two plans encompass? Dr said ok. Reviewed OxyContin conversions and asked him to convert Percocet patients who need dose adjustments.
PPLPMDL0020000001	Akron	OH	44305	5/20/2014	Spoke with Matt the pharmacist about conversions from Percocet to OxyContin and what I'm discussing with my customers. I asked Matt if he would even tell patients who have continued to get refills on Percocet or titrated doses to ask their Doctor about ER oxycodone. Matt said he will. Matt said he's out of copay cards. Discussed the Kathy profile and copay cards. Discussed the new Caremark and AARP Medicare coverages. Matt said they see a lot of silverscript. I asked if he would make a not as to how much the patient paid for Butrans. Matt said he will and said it should help Butrans a lot with better Medicare coverage.
PPLPMDL0020000001	Cleveland Hts	OH	44118	5/20/2014	Reviewed Butrans for those Tramadol failures requiring around the clock analgesia, Initiation/Titration, Formulary status, Savings cards, said she has a few patients in mind that are not controlled on present therapy,
PPLPMDL0020000001	Tallmadge	OH	44278	5/20/2014	Quick message at front counter and asked him if he has patients currently on IR oxycodone who after 3 months might be appropriate for ER oxycodone? Dr said sure a few of them. I asked him how he decides and he said on a case by case basis. Have him the conversion and titration guide. Nothing else learned.
PPLPMDL0020000001	Akron	OH	44320	5/20/2014	Led with insight about tramadol and discussed 41% on hydrocodone medications. I asked dr what she typically does for her patients when 90 days on a IR opioid confront her in her exam room? Dr said every patient is different and said she does what she can to treat pain but doesn't have an issue using ER opioids where appropriate. I reviewed Butrans and dr said she is using it in her nursing home patients. Dr said she uses it for her patients who have dementia but need something for pain. Dr said the 5mgc works really well. I outlined the Scott and Kathy profiles. Dr said most of the patients are coming off those medications and the patients really like it. Dr said she is having a hard time getting it covered on Medicare and Medicaid. Discussed Medicare coverage with new plans and Care resource PA for Medicaid. Dr said those help a lot. I told her about using opioids and non opioid analgesics for breakthrough pain and used the Bup 3015 inclusion and exclusion criteria and use of supplemental analgesia. I asked dr to use it in her own practice for patients in pain around the clock on IR opioids. Dr agreed to use in her practice. Explained use of OxyContin in patients on Percocet and reviewed doses and titration. Dr Wallace said she uses it sparingly because she will send her patients to pain management for OxyContin. Window call Reviewed OxyContin Q12h/7 tablet strengths along with Butrans 7day transdermal for those Tramadol failures requiring around the clock analgesia, Said OK will keep it in mind, leave Savings card, Reviewed with Michael- Front recep. Reviewed savings cards info,
PPLPMDL0020000001	Cleveland	OH	44118	5/20/2014	Percocet insight. Asked dr to re assess his Percocet patients to see if they may be more appropriate for an ATC product like OxyContin, at lowest effective dose. Discussed him trying the 10 mg & 15 mg, before directly going to 20 mg. dr stateshe wants to use OxyContin but he's had trouble getting patients. In addition, many plans want him to try morphine first. We discussed on patient case who triedmorphine, for 2 weeks, it didn't work & dr will try a prior auth. Discussed BWC for OxyContin. Left conversion guide, discussed Percocet conversion. Butrans discussed after prn Tramadol. Discussed BWC -left formulary grid.
PPLPMDL0020000001	Euclid	OH	44117	5/20/2014	



PPLPMDL0020000001	Lakewood	OH	44107	5/20/2014	Discussed Oxycontin and Butrans and the dosing of each. Dr said he will begin to write butrans and we talked about the caresource patients. Dr said he didn't have hesitations to write butrans, he said he forgets what the doses are. Dr said he has been cutting down on the amount of Oxycontin. I said why? Dr said he is trying to write less. I said if someone was appropriate and needed an atc pain medication, why wouldn't you consider the 10mg of Oxycontin. Drn said he has very few patients on the lower doses, I asked why not? he said he thinks of Oxycontin for the more severe patient types. We discussed the various patient types that the producy may be appropriate for according to the core visual aid. Covered fair balance.<font color=blue><b>CHUDAKOB added notes on 06/05/2014</b></font>Looks like you are making some progress with lower dose OxyContin. Keep reinforcing the point of low dose OxyContin for around-the-clock pain. Looks like you created some good constructive tension.
	Westlake	OH	44145	5/20/2014	Spoke to Lisa Drs nurse. Lisa told me the doctor doesn't do lunches but she will give the information I told her about regarding oxycontin and butrans. Mentioned the savings program for both product and the dosing of Butrans. Lisa said theyhave many patients like we discussed today and she thought Butrans might have a fit in their appropriate patietns per our indications. Gave fiar balance.<font color=blue><b>CHUDAKOB's query on 06/05/2014</b></font>Lisa. Did you speak with the physician? If not, this should have been a non-HCP call.<font color=green><b>BARTOL's response on 06/06/2014</b></font>No I did not, I thought I selected non hcp. I spoke to his nurse. My mistake.<font color=blue><b>CHUDAKOB added notes on 06/08/2014</b></font>OK. Thanks for the clarification. Please double check before you hit submit. Thanks!
PPLPMDL0020000001	Akron	OH	44320	5/20/2014	Explained all key selling messages about Butrans and OxyContin. Dr said she didn't wish to discuss products today. I asked why and she didn't discuss. Nothing else learned.
	Cuyahoga Falls	OH	44223	5/20/2014	I asked dr what he is doing with his patients that are on Percocet or oxycodone plain who he thinks are not appropriate for OxyContin? Dr said he doesn't have too many. I asked him then if that's the case, are most moved to OxyContin? D said many of the, do go on OxyContin or another ER opioid. I asked him to convert patients on IR oxycodone to OxyContin and use the same molecule and just a different delivery system. I asked dr if he has any continuing patients on Norco? Dr said not many. I told him I want him to make room for Butrans. Dr said his patients are beyond Butrans. I asked him what the average dose his patients on IR opioids are on? Dr said when patients come to him they are usually on at least 40mg of oxycodone or even high doses of methadone. I asked about looking to those who he believes are not appropriate for OxyContin. Dr said probably not.
PPLPMDL0020000001	Mayfield Heights	OH	44124	5/20/2014	Met w Denise @ front window. (Dr Laham on vacation until after Labor Day) Gina is across street @ Hillcrest Hospital.left Butrans patient guides & initiation guides for all HCPs. Gina says to stop back later in week - call 1st to make sure Gina is in. Left OxyContin savings sell sheet for all. Discussed trial! savings cards for both products- practice has ample cards.
PPLPMDL0020000001	Cleveland Heights	OH	44118	5/20/2014	Reviewed with Ope RPH, OxyContin every 12 hours, FDA approved Tier 1/3 labeling, abuse deterrent properties, Along with Butrans for those patients requiring around the clock analgesia, Said Ok, not seeing much of either products but will keep an eye,Said not many docs left in bldg
PPLPMDL0020000001	Cleveland	OH	44114	5/21/2014	Reviewed Butrans for those Tramadol failures requiring around the clock analgesia, Said Ok will continue to find appropriate patients, Formulary coverage
PPLPMDL0020000001	Cleveland	OH	44195	5/21/2014	Reminded of OxyContin 7 tablets every 12hours along with Butrans for those Tramadol failures requiring around the clock analgesia, Said she has that 1 patient in mind, continues to find appropriate patients for OxyContin
PPLPMDL0020000001	Cleveland	OH	44114	5/21/2014	Discussed Butrans for those Tramadol failures requiring around the clock analgesia, dosing, savings cards, BWC/TriCare coverage. Said Ok will continue to find appropriate patients
PPLPMDL0020000001	Cleveland	OH	44195	5/21/2014	Quick review of OxyContin every 12hours, 7 tablet strengths along with Butrans for those patients requiring around the clock analgesia, Said she will consider for appropriate patients
PPLPMDL0020000001	Westlake	OH	44145	5/21/2014	Reviewed the FDA insight. Dr said he was aware that oxycontin had been reformulated. Asked him if he could see how one would convert from percocet to oxycontin given they met the indication. Dr said yes. Talked about the 7 doses and the 10mg which is for opioid naive patients. Gave the doctor an opioid experience study. Highlighted pain results and reviewed dosing. Covered fair balance on both products.
PPLPMDL0020000001	Akron	OH	44303	5/21/2014	Spoke with Rod the pharmacist about the patient of dr Pitts who is coming in to get OxyContin. Discussed with him that the patient has an outdated copy card but will be honored. Discussed as the card will be honored at the new \$70 and \$30 copay. Rod said he has the new cards and will just use his. Discussed doses of Butrans and asked him if he's dispensing more? Dr said he is and its coming mostly from pain management.
	Westlake	OH	44145	5/21/2014	Spoke to Sue the RN and Jeaneatte the ma and the office manager Julie a while upfront. They were informing me of the changes to the office and I was filling them in on the managed care coverage of both our products. Dr came to the window, started talking managed care coverage. I highlighted the med d coverage, caresource coverage and commercial coverage. I said take managed care out of the picture right now. How do you educate a resident who is making a round with you about Butrans and here it might be a fit for patients. Dr said for those who don't want to take pills or those who are hydrocodone atc already. We talked about the number of residents that come thru his office and how little training they get on pain management. I brought up the summer butrans program that I'm trying to organize and asked him if he would recommend to his residents to come.
PPLPMDL0020000001	Westlake	OH	44145	5/21/2014	left butrans study and oxycontin commercial insurance leave behinds behind for the doctor. I left a office poster. Daniel the nurse said I was back again. she told me that the doctor still hasn't put up the last poster. I told her this posted was different and it was more detailed- showed her.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/21/2014	Spoke with Glenn about new Medicare coverage with Butrans and current Medicare coverage with OxyContin. Glenn said he's seen a few of the aarp and there were no issues with it going through. I reminded him about OxyContin coverage with commercial and asked which plans are most important? Glenn said none and really more important than others but they do see a lot of SummaCare. I explained coverage with both products and asked him to please send me any denial letters if he gets any.
PPLPMDL0020000001	Hudson	OH	44236	5/21/2014	I began discussing OxyContin and dr told me he feels much more comfortable using a product like Butrans. I asked him how he knows because he hasn't used it yet! Dr said he thinks because its a schedule 3 that its more likely.. I asked him what he's waiting for because he should have used it by now. Dr said he needs to find the right patient. Asked him what that is and he told me probably vicoden. I reviewed conversions and asked for him for business and the best way to know how well it works is to use it.
PPLPMDL0020000001	Akron	OH	44313	5/21/2014	Showed dr the OxyContin 10mg page and told him that I bet he has some patients currently on Percocet 20mg who would be appropriate for OxyContin q12. Dr said ok and thanks. I asked him if he would convert some patients. Dr asked me if I still have Butrans. Dr said he started a patient this morning on Butrans 10mcg. Dr said the patient is on Norco 30mg. I told dr he started appropriately and told him he can titrate every 72 hours and use IR products for breakthrough pain. Dr said ok. Nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44195	5/21/2014	Reviewed OxyContin/Butrans with Carol (Initiation/Titration) Savings Cards
PPLPMDL0020000001	Cleveland	OH	44195	5/21/2014	Visited Rheumatology dept, (Calabrese,Tuthill,Kirchner,Clark NP)Left OxyContin and Butrans Initiation/Titration, Formulary grids
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/21/2014	First time meeting dr and discussed OxyContin and Butrans. I reviewed pages from MVA and asked dr about his clinical experience. Dr said he only has one or two people on it and said it works. I discussed him using it for patients already on oxycodone and discussed conversions and titrations. Dr said thanks for the information. Introduced Butrans which he had not previously seen or heard of. Discussed all key selling points and conversions and use of supplemental analgesia. Dr asked about using it in place of his patients on tramadol. Dr said it sounds like a great product. Discussed efficacy and safety. Dr said he will look to use it. Dr asked about insurance coverage. Reviewed formulary grid.
PPLPMDL0020000001	Akron	OH	44333	5/21/2014	Dr said he has a patient coming in later in the week who he will be trying to treat for cancer. Dr said its a young female about 40 yrs old. Dr said she is currently on vicoden and can't tolerate it. Dr said the patient is very sensitive to pain medicines and said he's going to try Butrans 5mcg patch to see if she will tolerate it. I told dr if so, she will most likely need to titrate up. Dr agreed and said he will keep me posted. I asked dr to continue finding patients for OxyContin and reviewed the Maggie profile. Dr said he would of started OxyContin sooner but also would have done more intervention and physical therapy. Asked for continued business.
PPLPMDL0020000001	Akron	OH	44320	5/21/2014	I asked dr why it's ok to write and refill Percocet but its difficult for her to write oxycontin? Dr said its the name OxyContin. Dr said she knows patients may be good candidates for it but said she wants pain management to do that. I asked her when she refers to pain management? Dr said it depends but usually when she knows she can't treat them anymore or they are high potential for abuse. I asked her to continue to think about ways she can incorporate it lie, those like Maggie and reviewed profile. I told her I needed to address her issues in writing Butrans because most if her patients are medicad and won't pay for it. I reviewed Caresource and UHC community plan PA's. I asked her if she has aarp and Caremark silverscript patients? Dr said yes many of them. I reviewed plans and asked her if those coverages would be enough to get her to write Butrans? Dr said she didn't know of those coverages. Dr said she actually write a Butrans Monday for a community pain patient and is waiting on the PA to go through. I asked for her continued business.
PPLPMDL0020000001	Westlake	OH	44145	5/21/2014	Bonni the office manager and I were talking about butrans dosing and managed care coverage. Doctor came into her office where I was to sayhello. I asked him if he found any appropriate patients this week to start oxycontin or butrans? he said no. I reminded him of the dosing with oxycontin every 12 hours and butmas once a week. He said ok thank you and walked away.
PPLPMDL0020000001	Cleveland	OH	44113	5/21/2014	Discussed Butrans for those patients requiring around the clock analgesia, Savings cards,utilization with in dept. along with OxyContin 7tablets every 12hours, savings cards
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/21/2014	Dr needed new OxyContin copy cards. Dr said he had a patient he is starting on it today and his cards are expired. Discussed new cards and changes to dr and Liz. I asked dr what he is converting from and he said Percocet. Dr said he is starting on 20mg. I reminded him to write it q12h.
PPLPMDL0020000001	Westlake	OH	44145	5/21/2014	Christy the office manager had a waiting room filled with people. We talked about the savings cards for both products and the trial with butrans. She told me to call the Iorain office to see if I can get an apt at the westlake office and to tell them she said to call.
PPLPMDL0020000001	Norton	OH	44203	5/22/2014	New Doctor. His Wife is a Geriatric Doctor not in my territory. Dr said Oxycontin make sence but he doesn't write schedule 2 products because he doesn't see severe pain patients who are chronic. I reviewed the indication and limiations of use with the doctor. Dr said he would keep it in mind. Longer discussion on Butrans. Focused on the med d patient types and the doctor said he has a lot of these patinets. Opened the fpi and we reviewed areas 12.3 and the elderly, renal patient types. The doctor took pictures of the Butrans leave behind withthe name on it and sent it to his wife while I was there and said she needs to know about this product. I don't call on that territory but will find out who does so they can follow up with this doctor. Dr said he will definitely use Butrans when he finds the right patient type. Asked the doctor for a follow up and the dr said I could but had to talk to christy. I spoke to christy and she said she would see what she could do.
PPLPMDL0020000001	Norton	OH	44203	5/22/2014	Fda insight and reviewed some areas of page 15 of the core oxycontin visual aid. Talked about dosing and his thoughts on writing it for appropriate patients. Dr said if it was appropriate he would write it for his patients. I asked if he writing anything latley. Dr said no. I asked when the last time he wrote Oxycontin was...he said he couldn't remember. I gave the Oxycodone insight and the dr said he couldn't relate. Dr said those percentages seemed high. We discussed ATC pain, dr agreed that atc pain should be treated with a long acting medications. I asked if he ever has patients like this...he said seldom. Dr said he will refer out if the patient needs an extended release options. I asked him what if it was a schedule 3 extended release options. Dr said said there is none. I brought up Butrans. Gave fair balance. Highlighted the initiation guide and dosing of butrans. Dr asked about the molecule. Covered this and the delivery system. Highlighted a few area of the fpi...elderly, renal and hepatic patients with Butrans. Dr asked me if patients could supplement with this product and I referred to the Opioid naive study and showed him the exact working from the marketing piece. I asked the doctor if he felt some of his patient could use this product as an appropriate option. He said maybe. Reminded him of coupons and asked for a follow up apt which he polited to Chrsy his head nurse. Discussed getting back sooner than three month and she said she would try when I came.
PPLPMDL0020000001	Norton	OH	44203	5/22/2014	Spoke to the doctor about Butrans dosing and appropriate patient types. Covered dosing, scheduling and reviewed initiation guide. Highlighted Oxycontin dosing and covered coupons of both products.
PPLPMDL0020000001	Euclid	OH	44132	5/22/2014	Lunch. (waited 2 hours) Delivered Percocet insight. Dr Brobbey states that would be a long time to leave patient on Short acting; yet he is leary of writing ER opioids due to the responsibility such as pain contracts, running OARRS, etc. He would be more comfortable writing OxyContin in nursing home. Discussed lowest effective dose in appropriate patients. Discussed START principles, 10, 15, 20 mg/lower doses and "every 12 hours" dosing schedule. Butrans is still fairly new concept for Dr. Brobbey. Discussed Butrans after Tramadol. Discussed BUP 3024, adverse events, QTC prolongation and avoiding external heat sources. Showed Dr how to write, discussed scheduling & opportunity to fax/call in Butrans with refill. Dr will keep in mind after Tramadol moving forward. Asked for a few trusted patients for each product. Left updated FPIs both products. left laminated pain scale

	Euclid	OH	44119	5/22/2014	Waited for Paul to finish up for day, he stated he could talk with me on way down to vehicle, which he did. Percocet insight discussed, asked Paul to re assess patients and consider OxyContin in appropriate patients tomorrow and next week after the holiday. Discussed the importance of handing out savings to each commercially insured patient. Discussed Butrans after Tramadol. Before he writes his next refill for Tramadol, if patient is taking 3-4 Tramadol daily, please re assess and consider an ER opioid, such as Butrans transdermal, for daily, ATC pain. He will keep in mind.<font color=blue><b>CHUDAKOB's query on 06/05/2014</b></font>Jenny, please re-read this call. This is an example of a detail. You provided all the information. It appears to have been a one-way conversation. It is great to see you led off with the insight. Keep this up! When you discussed the oxycodone/APAP insight, what did you ask him as an impact question? How did he respond? It is the interaction that the insight creates that can help move your sales forward. Do you see what I am talking about?<font color=green><b>BALLE's response on 06/06/2014</b></font>Yes -<font color=blue><b>CHUDAKOB added notes on 06/08/2014</b></font>Great. Once you can start having two sided conversations, you will have taken the first step to increasing sales. Keep working at it Jenny.
PPLPMDL0020000001	Cleveland	OH	44113	5/22/2014	Reviewed Butrans for those patients requiring around the clock analgesia, that are failing on present Norco therapy. Dr. Said he will consider for appropriate patients. OxyContin reminder Q12h, Said he hasn't changed position on CII?
	Euclid	OH	44119	5/22/2014	Called ahead to OM Kim to ask if I can bring snack, she approved. Note: however, when I asked Dr Winder to sign sheet, he stated he doesn't want donut/bottled water & will not sign(girls in office did partake) Met with OM Kim & she states in future, she will confirm snack items with Dr. Re visited last discussion and reinforced request for conversion to OxyContin, after oxycodone or Percocet, in appropriate patients with "every 12 hours" dosing schedule (recited indication verbatim). Dr remembered the 2 clinical studies we discussed last time, comparing OxyContin to placebo, and that 10 mg is reasonable start dose for opioid naive, debilitated elderly, and opioid naive females. Then discussed Butrans as transdermal option, after Tramadol. Asked for business next week when he returns from long weekend. He will keep in mind. Total office call, met with med asst Stacey to discuss products, non branded PAP items such as Protect your meds @ home brochures & checked supply of savings cards for both products.<font color=blue><b>CHUDAKOB added notes on 06/05/2014</b></font>You could have saved two line of writing by leaving out the first two sentences. They do not pertain to the call, although it was good to see you doing this to get into the office.
	Norton	OH	44203	5/22/2014	Asked him if he had hesitations to write an extended release opioid dosed every 12 hours. He said no. I asked him if he could do it then for the appropriate patient types. he said sure. Covered fair balance and talked about butrand dosing and reminded him of the caresource coverage. Dr said "got it".
	Cuyahoga Falls	OH	44221	5/22/2014	Saw dr walking in to office to do charting before she sees her patients. I showed her the OxyContin conversion guide and asked her when a patient on Percocet needs a dose adjustment to convert to OxyContin. I asked her if she has any reservations doing that? Dr said not really and said she knows she can be doing that more because it makes sense. I told her I'm Glad it makes sense and to start with just one patient. I reviewed the slide guide Butrans and told her to focus on patients on tramadol. Nothing else learned.
PPLPMDL0020000001	CLEVELAND	OH	44195	5/22/2014	Discussed OxyContin utilization.Savings Obtained Key clinicians (Davis,Patel,Goforth,Pam Gamier, Krisa Dobbs,Tracy Lucas Armida Parala, Mary Ellen Mauk,Carol Pickens, Amy Heal, Meredith Shelly,Also, discussed Butrans for those patients requiring around the clock analgesia
	Euclid	OH	44119	5/22/2014	Call on pain management floor. Met with Carla, head nurse. Discussed OxyContin and Butrans as ER opioid options for their patients with pain severe enough to require a daily, ATC opioid, long term opioid, such as OxyContin or Butrans. Reminded her of savings available. Discussed PAP non branded items for patients including PAP journals, which she really likes. Left protect your meds at home brochures, Cornerstone Caregiver Guides and a few laminated pain scales.
	Euclid	OH	44119	5/22/2014	Met with med asst @ front desk. New protocol for new bldg/suite: 1x month "sample" appointment: 1x QTR LUNCH appt. For now, Med Asst Angie handling savings cards, samples. Dr. Katz (and Dr. Shenk) NOT accepting samples, cards. Discussed my 2 options for patients whose pain severe enough to require daily, ATC, opioid therapy for long term. (left packets of info for all hcps including PA-C Judy Adamich) Left Kathy patient profile Butrans, OxyContin conversion guides.
PPLPMDL0020000001	Cleveland	OH	44195	5/22/2014	Visited Hospice/Palliative dept. (Goforth, Davis) left OxyContin/Butrans Initiation/Titration guides,
	Cuyahoga Falls	OH	44221	5/22/2014	Quick hello at window and asked her to continue using Butrans for those patients on IR opioids either over 3 months or are ready for a titration. I reminded her about the new Medicare coverages aarp and Caremark. Darlene said those plans will make it much easier on her when approving Butrans on Medicare. Dr said she has started a few new patients recently and are doing well. Reminded her to also consider OxyContin for those patients already on oxycodone. Dr said she feels good about Butrans. Nothing else learned.
	Cuyahoga Falls	OH	44223	5/22/2014	Kim asked if there is anything. New with OxyContin or Butrans. I told her about the FDA draft guidance insight and tiers for it. Kim said she has no issues in using it and finds its easy to convert patients for percocet. I asked her at what point she tends to convert. Kim said as early as possibly and tries even at 20mg but said most patients coming into seeing her are above that amount so the process tends to be longer. Discussed dr conversions, titration and insurance leverage. Discussed new insurance plans for Butrans. Kim said the Medicare plans are a big win for us because the practice has a lot of those patients along with Medicaid and BWC.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/22/2014	Reviewed patient profiles and asked for continued business.
	Cuyahoga Falls	OH	44223	5/22/2014	Lunch with the Center for Pain Management in Cuyahoga Falls. Discussed OxyContin FDA draft guidance, OxyContin patient types, conversions, 10mg page from MVA and insurance. Dr said he likes to use it but is having a hard time getting it covered. Dr said he converted a patient today on Percocet he converted to OxyContin but the patient has the UHC community plan and had to pay \$80 for it. Dr said the patient paid it because it works so well. Discussed Butrans Bup 3015, patient types, new Medicare insurance coverages, and discussion of efficacy results from clinical use. Dr said his patient really like it and continue to get great results. Dr said most will start on 5mcg then will titrate until desired effect is reached.
	Cuyahoga Falls	OH	44223	5/22/2014	Reviewed the BEP program again to Jake and asked him how he truly feels about using them? Jake said it makes sense because he has patients that need a little more Han holding and that he wants to keep a closer track of. Jake said he has been having much more success getting it approved because of Tara who does all the PAs and insurance issues. Jake said it works very well clinically and has no issues titrating up to the 20mcg patch.
PPLPMDL0020000001	Cleveland	OH	44115	5/22/2014	Reviewed patient types and Bup 3015. Discussed FDA draft guidance letter and oxucitmin tiers. Conversions and patient type Maggie. Jake said he uses but feels better with Butrans. Nothing else learned.
	Cuyahoga Falls	OH	44223	5/22/2014	Visited Pain Mgmt Dept. (Nickels) Reviewed OxyContin/Butrans Left Initiation/Titration for Internal Med. (Wardaga, Ravakhah, Palaparty, Eghobamien) Began talking about OxyContin use in his patients not only in the hospital but those in his clinic. Dr said he is currently rotating opioids and has found Butrans to be very effective in his patients failing all IR opioids including Percocet. Dr said OxyContin is great for patients over 20mg of Percocet but 20mg and under he has found great efficacy and tolerability of Butrans. I discussed Bup 3015 and asked him if his patients on Butrans need something for breakthrough pain? Dr said he doesn't give them the option. Dr said if a patient has to have something he will recommend Tylenol. Reviewed new insurance plans with Medicare, BWC and Caresource PA and UHC Community plan PA. Dr said he will continue to use both products.
	Cuyahoga Falls	OH	44221	5/22/2014	Saw dr as she was walking in for the day. Dr said she is having good luck with Butrans in the last few weeks. I asked her to tell me about one of them. Dr said the most recent was a Medicare patient who was taking vicoden for a long time and it just wasn't working well enough. Dr said she thought Butrans would be a good choice since the patient was in chronic pain. I told her that's great news and to continue using and to not forget the tramadol patient. I reminded her that OxyContin is also a good option for those on Percocet who need a dose adjustment. Dr said ok. Discussed plans with Darlene for Medicare.
	Cuyahoga Falls	OH	44221	5/22/2014	Spike with Amy the pharmacist and discussed OxyContin and asked her if she sees patients refilling products like Percocet? Amy said all the time including vicoden and Norco. I showed her the OxyContin conversion guide and discussed dosing. I reviewed the Kathy profile and asked her if she ever tells patients to speak with their dr about other methods of pain relief? Amy said she does but does not mention specific products.
PPLPMDL0020000001	Euclid	OH	44123	5/22/2014	Met with pharmacist Kyle. Discussed OxyContin Tier 1, 3 labeling. Dosing should be "every 12 hours." Left OxyContin pharmacist guide. Discussed Butrans as transdermal option for customers. Kyle says they do have a few patients on Butrans currently. Discussed educational aspect of Butrans patient guide (left 2) & asked Kyle to place on shelf with product, which he will do.
PPLPMDL0020000001	Barberton	OH	44203	5/22/2014	A window reminder of two extended release options to treat your atc pain...oxycontin dosed every 12 hours and Butrans schedule 3 dosed weekly.
	Cuyahoga Falls	OH	44223	5/22/2014	Dr asked me about insurance coverage additions for Butrans because he has had patients paying upward of \$60 for it. I asked dr about the patients and plans. Dr said he's not sure but said a couple had anthem Bc/bb and it was denied. Dr said he got it approved but was too expensive. I discussed the trial offer and copay cards and told him to ensure his patients get them. Reviewed patient types, new insurance plans and asked for continued business. Dr said he really likes it. Discussed FDA draft guidance with oxycontin, conversions and asked if he would use it for a patient failing or has tolerability issues on Percocet? Dr said he'd use Butrans if he could because he likes it so much.
PPLPMDL0020000001	Stow	OH	44224	5/22/2014	I told dr if he has a patient taking tramadol around the clock and is still in pain, he should move to Butrans as long as the patient meets e indication. I asked if he would classify around the clock pain as 3 or more pills a day? Dr said that sounds about right and said he is finding out that Butrans is a good option for the tramadol patient. Dr said the problem is that he doesn't have many patients that see him on opioids. I told dr that's ok because its all about specific patient type selection. Reminded dr about his use of OxyContin for those already on oxycodone. Nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44102	5/23/2014	Reviewed OxyContin formulary Med D (Silver Srips, UHC/AARP along with Butrans for those patients requiring around the clock analgesia. BWC coverage. Said Ok will consider for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44125	5/23/2014	Reviewed OxyContin/Butrans Savings Card with Linda(tech) No new info learned
	Unlontown	OH	44685	5/23/2014	I asked dr how he feels about converting his Percocet patients who tell him they are still in pain? Dr said he doesn't have any issues with using OxyContin but said that he needs to be very selective with those patients. I told dr I agree that he OxyContin is for patients who meet the indication. I asked dr for business and told him his tramadol and vicoden patients are good candidates for Butrans and handed him the Scott profile. Dr said ok.
	Akron	OH	44312	5/23/2014	Carla took me to see dr to discuss the BEP program again. I showed dr and Carla the Scott profile and asked if it makes saner to start Butrans? Dr said it dos and he has started Butrans on a couple of patients on ultram. I reviewed the BEP kits with both of them and asked for his commitment to get them out. Dr said the \$50 for the patient will certainly help.
	Lakewood	OH	44107	5/23/2014	Dr said he would hang up the butrans poster that I gave him. We talked about the somatic pain patients can have which can lead to a chronic condition and meeting the indication for both Oxycontin and Butrans. Dr. agreed.
PPLPMDL0020000001	Akron	OH	44310	5/23/2014	Reminded him of the caresource coverage with Butrans and the converting those percocet patients to Oxycontin if they were atc and appropriate for the product. I asked dr what clinical reasoning is there for maintaining a patient on an IR opioid like Percocet who is in pain around the clock? I told dr that typically around the clock pain is when patients are taking at least 3 pills a day and still in pain. Dr said he agreed. Dr said that he's not big on ER opioids. I asked why he's not at least giving his patients the option when their currently therapy isn't working? Dr said OxyContin isn't really a product he likes to use. I told him Percocet and OxyContin both have oxycodone and its the delivery system and single entity opioid of OxyContin that may be appropriate for some. Dr said ok and took the conversion guide. I also gave him the Butrans slide guide and asked for him to use it.
PPLPMDL0020000001	Olmsted Falls	OH	44138	5/23/2014	Talked to Tracy the office manager regarding going to partners in pain and using resources at that sight for their office/doctors. Reminded her what my products are indicated for and the dosing along with its scheduling.
	Garfield Hts.	OH	44125	5/23/2014	Window call. Quick OxyContin review 7 tablet strengths every 12hours, Savings cards along with Butrans 7 day transdermal for patients requiring around the clock analgesia, Said Ok will keep it in mind, call if need further info,
PPLPMDL0020000001	Garfield Hts	OH	44125	5/23/2014	Discussed with Michelle every 12 hour dosing, said she will remind
	Green	OH	44232	5/23/2014	Visited Ortho/Pain mmngt depts. (Abraham, Samuel, Dalbir, Feighan) OxyContin and Butrans Initiation/Titration guides, Savings cards
	Green	OH	44232	5/23/2014	Spoke with Jenna the pharmacist and told her it was important for her to know the types of patients who are suited for OxyContin and Butrans. Quickly reviewed the Tom profile for OxyContin. Jenna said they are seeing lots of patients who are having their vicoden and Percocet refilled every month and many of them are being titrated up as well. I discussed the Kathy profile for Butrans and asked her if it makes sense for that type of patient to be appropriate for Butrans. Jenna said it does and thanked me for discussing certain types of patients. Jenna said she just filled a Butrans script this morning. I asked her from who and she said she can't remember but it was from a family practice. Reviewed OxyContin and Butrans copay cards.
PPLPMDL0020000001	Cleveland	OH	44113	5/23/2014	Quick OxyContin reminder, 7 tablet strengths every 12hrs along with Butrans for those patients requiring around the clock analgesia who are failing on present therapy. Said Ok, questioned ins. coverage, PA, Reviewed formulary grid and MED D coverage
PPLPMDL0020000001					

	Mogadore	OH	44260	5/23/2014	Dr asked me why he can't get OxyContin covered anymore? I asked for what plan(s)? Dr said mostly Medicare. I told him after 18years its still pretty well covered and asked if they are being denied or PA? Dr said its all the same because it causes him more work. I told him I'm sorry and if he believes its the right medication, the PA should be completed. Dr said ok. I told dr I needed a couple of minutes to discuss the BEP kits. Dr said he didn't have time and to wait until out lunch next month. I told dr that fine but to please write Butrans for patients who are taking 3 or more IR opioids a day and tell you they are still in pain. Dr laughed and said ok but it's not that easy. I asked why and he said many patients don't want to take a patch. I asked him what he does then if the IR isn't working? Dr said everyone is different. I told him I agree but why are they all still getting IR opioids? Dr said we will discuss next time.
PPLPMDL0020000001	Garfield Hts	OH	44125	5/23/2014	Quick OxyContin every 12hours, 7 tablet strengths along with Butrans for those patients requiring around the clock analgesia said he will keep in mind, would like to refer pain mgmnt, asked how that is going? said patients typically end back with him.
PPLPMDL0020000001	Garfield Heights	OH	44125	5/23/2014	Revived OxyContin as 1st ER opioid FDA approved Tier 1/3 that describes abuse deterrent properties, Q12h, 7 dosing strengths, along with Butrans for those patients requiring around the clock analgesia, Formulary coverage
PPLPMDL0020000001	Akron	OH	44319	5/23/2014	Said he will consider, asked to discuss with physicians, said he will.Asked if he had a patient in mind today, said he'll with check schedule
PPLPMDL0020000001	Westlake	OH	44145	5/27/2014	Quick hello at window and told him he needs to provide analgesic options for his patients who are in pain on IR opioids like Oxycontin or Butrans. Dr said they are both branded and too expensive. I asked dr how he knows since he doesn't use them? Dr said they are branded. I told him he's assuming too much and limiting his patients from options that could be the analgesic solution for them.
PPLPMDL0020000001	Akron	OH	44310	5/27/2014	Spoke to Pam the MA regarding managed care for Butrand and Oxycontin. Discussed dosing and asked if she knew about any recent scrips he has written and she said she doesnt know. She said they all rotate taking calls for prior authorizations. Left Oxycontin and Butrans marketing pieces behind for the doctor to review.
PPLPMDL0020000001					Quick hello at front counter. Introduced myself and asked dr where he is using OxyContin? Dr said he doesn't use it much because after a procedure, he typically only gives out 2-4 weeks of IR opioids like vicoden or Percocet. Dr said he only wants to give patients enough until they get to their family dr or specialist. I asked when he finds it appropriate for prescribe ocycontin? Dr said he would only prescribe it when a patient comes back for another procedure and the pain lasts longer. I reminded dr about the conversions and oxycontin reformation. I asked dr if his use of Butrans has been positive? Dr said he's only written a couple of times and once for another dr as a refill. I gave dr all key selling messages and asked if it may be appropriate? Dr said maybe. Nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44195	5/27/2014	Reviewed OxyContin Q12h,7 tablet strengths along with Butrans for those patients requiring around the clock analgesia,Said she will continue to find appropriate patients, said to book appt with Kristie Admin. for June appt to further discuss
PPLPMDL0020000001	Cleveland	OH	44195	5/27/2014	Reviewed OxyContin Q12h, formulary grids along with Butrans for those patients requiring around the clock analgesia, Said she will continue to prescribe to appropriate patients, has extensive experience with both products, no further info learned
PPLPMDL0020000001	Highland Heights	OH	44143	5/27/2014	Quick hallway, caught dr as I was leaving their resroom. Asked dr for 2 patient types - prn percocet patients for conversion to oxycontin; and Butrans after Tramadol. Updated Med Asst on Butrans Med D wins.
PPLPMDL0020000001	Richmond Heights	OH	44143	5/27/2014	Dr. Balaji not in today. Left information on both OxyContin and Butrans with med assts. Left OxyContin conversion guide. Updated on Butrans preferred Med D status.
PPLPMDL0020000001	Westlake	OH	44145	5/27/2014	Discussed the FDA INSIGHT. The doctor said it was a good idea to do it. I asked her if she ever treats someone for Chronic pain. she said no. Dr is a gastroenterologist. We talked about Butrans moledule and transdermal system. Dr said that would be better for her patients but she still doesn't treat chronic pain. Reviewed the indication and gave fair balance.
PPLPMDL0020000001	Westlake	OH	44145	5/27/2014	Reminded the doctor about two extended release options- Butrans and Oxycontin. Dr asked if Oxycontin was generic. I clarified. Reminded him of his med part d coverage for Butrans and covered dosing and starting doss using the initiation guide.
PPLPMDL0020000001	Stow	OH	44224	5/27/2014	Followed up from last conversation in hallway. I told her about the Percocet insight and asked her if she has Percocet who may be ready for a dose adjustment? Dr said maybe. I told her the reason I asked this is because patients that are in pain around the clock which is usually those taking 90 pills or more a month are classified as patients in pain around the clock. Dr agreed. Showed the conversions and asked if she would use OxyContin in those situations? Dr said ok. I told her that last time she said she wanted to write more however Medicare isn't paying for it. I showed her h formulary grid and said her top 2 commercial plans are medical mutual and anthem. Told her about coverage. Told her about her top 2 Medicare plans and explained the coverage. I asked dr when a patient is denied or has a PA to please let me know and I will research it for her. Dr said ok.
PPLPMDL0020000001	Akron	OH	44312	5/27/2014	Reviewed Butrans profile Scott quickly and asked for business. Led appointment with dr hill discussing oxycodone insight and FDA draft guidance. Dr said he just doesn't feel comfortable using it and said he may not have patients for it anyway. I discussed patients he may currently have on Percocet or oxycodone plain who may be taking 3 or more a day. Used MVA and conversions for discussion and drilling down a patient type. Dr said he's been have some success with Butrans and likes that its a week long patch which is a schedule 3 opioid. Dr asked about AE's with Butrans. I showed him the AE's from Bup 3015 over 5%. Dr said the reason he's used it is because his patients on IR opioids complain of constipation and said the ones he put on Butrans don't complain about it anymore. Dr said everything else looks pretty typical of an opioid. I reviewed the importance of specific patient type selection and reviewed both Scott and Kathy. Finished with insurance coverage for both products and copy cards.<font color=blue><b>CHUDAKOB's query on 06/12/2014</b></font>Cliff, This call note says Dr. Hill but it is on Dr. McRoberts.<font color=green><b>REICHCL's response on 06/17/2014</b></font>had both of them together at a lunch appointment. Error on my part. This call note is on dr McRoberts, NOT dr Hill.<font color=blue><b>CHUDAKOB added notes on 06/17/2014</b></font>Ok.
PPLPMDL0020000001					Thanks for the clarification.
PPLPMDL0020000001	Westlake	OH	44145	5/27/2014	Spoke to Kelly the MA regarding Oxycontin dosing and Butrans dosing. They have caresource and med d patients so i focused on those plans with coverage.
PPLPMDL0020000001	Richmond Heights	OH	44143	5/27/2014	Lunch. Percocet insight. Doctor stated that's a long time, what is that, like 8 or 9 months? I replied - more like 10 ms. Is is fair to say some patients may have long term pain and need re assessed? Yes stated doctor. Discussed types of pain conditions he could use OxyContin for such as osteoarthritis. Is is reasonable for me to request you re assess your Percocet patients and consider conversion to OxyContin is patient's pain requires daily, atc, opioid? Dr asked how he should write? If he writes OxyContin - will pharmacy switch over to oxycodone? I responded they should not because no generic OxyContin. Also presented pg 15 of core vis aid regarding FDA Tier 1 & 3 labeling. Butrans presented next as 7 day transdermal option. Dr. is familiar with Fentanyl he states. Responded with verbatim indication for Butrans. Discussed patient such as Pam for Butrans. Then presented Butrans Med D formulary status. Asked Dr. to concentrate on patients on those plans for Butrans conversion after PRN Tramadol. summarized call and asked for business this week. Dr agreed he would keep in mind for specific patients discussed. Left 2014 FPI for both products.
PPLPMDL0020000001	Cleveland	OH	44195	5/27/2014	Visited Tausig (Faiman,Dobbs, Gutsell etc) OxyContin/Butrans Initiation/Titration along with appt request.
PPLPMDL0020000001	Akron	OH	44310	5/27/2014	Quick hello at window and told him I wanted to follow up on the most recent patient he titrated from 10 to 20mg Butrans? Dr said the patient is a bigger guy and figured he needed the 20mcg and he was also in more pain than he thought 15mcg would offer. I told dr its his clinical decision and asked him to focus on existing patients who may need a dose adjustment on their IR opioid. Dr said ok. Asked dr to continue to think of patients who may be appropriate for Butrans and showed chi the Scott profile.
PPLPMDL0020000001	Waterford	OH	45786	5/27/2014	I-Butrans dosing and titration. OxyContin dosing and titration.W has had good success with Butrans in the past few weeks.
PPLPMDL0020000001	Akron	OH	44312	5/27/2014	Led off with oxycodone insight and asked dr if he has any patients who have been on Percocet for 3+ months? Dr said he's sure he has a few. I used the MVA and went through pages 4-12. Told him about the FDA draft guidance and asked him if it makes sense to reassess his patients who have been on oxycodone for 3+ months? Dr said he will try and said he knows it doesn't make sense but its just easier to refill the short acting products. I asked dr what pain around the clock means to him? Dr said 90-100 pills a month. I asked him he has any of those patients? Dr said yes. I asked why its ok to refill IR oxycodone but so hard to write ER oxycodone? Dr said its explaining it to the patients and the issue of change. His patients Don't like change. I told him to at least give his patients the option of 12hour oxycodone. Dr said ok. Reviewed Butrans indication, dosing, patients types, titration and Bup 3015. I asked dr if he would find just one or two patients to start? Dr said he will try.<font color=blue><b>CHUDAKOB's query on 06/12/2014</b></font>Sounds like this is a doctor issue that he is making a patient issue. What do you think?<font color=green><b>REICHCL's response on 06/17/2014</b></font>Agreed.<font color=blue><b>CHUDAKOB closed the query on 06/17/2014</b></font>
PPLPMDL0020000001	Westlake	OH	44145	5/27/2014	Reviewed FDA insight and Oxycontin lable information on page 15 of core visual aid. Talked about who he thought was appropriate p atients. Doctor said he feels his patients are compliant, yet he did say he could see Butrans being used in the older patient population because of the dosing schedule. I went into the opioid naive study. Dr thought the patients were going to do well because they were opioid naive. He also said the higher you dose a product a patient was sure to get pain relief. Dr thought the pain results of the study was average. Dr asked why Butrans can be dose for a week with other pain patches can only be dosed a few days. I told him i couldnt not compare cause we had no head to head studies. However, I pointed out the molecule and its half life and steady state. Talked about titration-using the opioid naive study visual aid. covered managed care. Dr said he hasn't seen a patient yet. I asked him about his percocet patients. he said he had some. I asked him if it makes sense if they needed atc pain coverage to convert them to oxycontin and he said yes. Gave fair balance.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/27/2014	Spoke with Cassie the pharmacy tech about OxyContin and Butrans. I asked Cassie if she sees patients coming in month after month to refill Percocet or oxycodone plain? Cassie said they do and its way too often. I showed her the conversions from Percocet and asked her if she would be ok telling patients to ask their dr about a ER oxycodone? Cassie said she does that already and said patients want to take pills all day because its th psychological effect. I told her I understand and asked her if she has any questions about OxyContin? Cassie said no and they have all doses in stock. I showed her the Kathy Butrans profile and reviewed it. I asked her if the patient selection makes sense and she said yes. Cassie said they have all doses except for the 15mcg. Reviewed copy cards for both products.
PPLPMDL0020000001	CLEVELAND	OH	44195	5/27/2014	Quick OxyContin review Q12h, formulary grids along with Butrans for those patients requiring around the clock analgesia, Said Ok, Most directed towards Palliative/Hopscite team,(Goforth,Davis,Dobbs etc.
PPLPMDL0020000001	Garfield Hts	OH	44125	5/27/2014	Reminded Of OxyContin Q12h/Formulary along with Butrans for those patients requiring around the clock analgesia. Said Ok, no new info learned
PPLPMDL0020000001	Westlake	OH	44145	5/27/2014	Reviewed dosing of oxycontinand butrans. Dr said she doesn't have a problem writing butrans if the patient is appropriate. Reviewed the caresource coverage with Butrans.
PPLPMDL0020000001	Garfield Hts	OH	44125	5/27/2014	Reminded of OxyContin every 12hrs, formulary status along with Butrans for those patients requiring around the clock analgesia, Said Ok will consider, contact Kelly for lunch opportunity
PPLPMDL0020000001	Cleveland	OH	44112	5/28/2014	Reminded of OxyContin Q12h,7 tablet strengths along with Butrans for those Tramadol failures who are requiring around the clock analgesia,said Ok no time to discuss, Booked lunch appt
PPLPMDL0020000001	Cleveland	OH	44195	5/28/2014	Discussed OxyContin 7 tablet strengths,formulary grids along with Butrans for those patients requiring around the clock analgesia, Said she will continue to prescribe for appropriate patients. Confirmed Palliative Care Team (Dobbie,Goforth, Gutsell, & LeGrand
PPLPMDL0020000001	Cleveland	OH	44195	5/28/2014	Quick OxyContin reminder Q12h/7tablet strengths,Savings cards along with Butrans for those patients requiring around the clock analgesia, Said Ok will continue to prescribe for appropriate patients, Said to request appt for further info.
PPLPMDL0020000001	Cleveland	OH	44195	5/28/2014	Reviewed OxyContin and Butrans for appropriate patients, Savings Cards and Initiation/Titration. Said Ok said to schedule appt for further discussion
PPLPMDL0020000001	Akron	OH	44307	5/28/2014	Spoke with dr leone about OxyContin conversions from Percocet and identifying patients currently on tramadol or vicoden as candidates for Butrans.
PPLPMDL0020000001	Westlake	OH	44145	5/28/2014	Spoke to Candy, dRs wife and r of the office. Reminded them about what Butrans is and the dosing. Candy said she didn't get involved with the products that are selected for the patients, nor does she hand out coupons.
PPLPMDL0020000001	Munroe Falls	OH	44262	5/28/2014	I asked the doctor if she can remember the last time a patient asked for OxyContin? Dr said she can't remember. I asked her what her patients ask for? Dr said Percocet? I asked her if patients ever complain to her about not tolerating IR opioids? Dr said she has and it was just last week! I asked her to tell me about it. Dr said a patient came in last week complaining of constipation on vicoden. Dr said she thought of Butrans because its a patch and doesn't go through the gut. Dr said she started on the 5mcg patch and can't wait to hear from the patient for feedback. I reviewed the Bup 3015 clinical results/efficacy showing at least 30% pain score reduction. I asked if she would like to see that clinically? Dr said for sure. Dr said she will continue to ask patients how they are tolerating their Percocet as possibilities for OxyContin. Reviewed AE's for each product and asked for more
PPLPMDL0020000001	Akron	OH	44304	5/28/2014	Spoke to dr briefly at front counter and asked him if he would reassess his patients continuing on Percocet for tolerable conversion to OxyContin? Dr said he is doing that for the most part and said that some just don't want to change no matter what. I told him I understand and asked him to maybe focus on patients that express their interest for another form of delivery of oxycodone. Dr said ok. Reminded dr of the Butrans patient type Scott and asked him if he has patients continuing on tramadol? Dr said he does and will try to find someone.
PPLPMDL0020000001					

PPLPMDL0020000001	Cleveland	OH	44195	5/28/2014	Visited Pain mgmnt OxyContin/Butrans Initiation Titration guides, formulary grids
PPLPMDL0020000001	Cleveland	OH	44195	5/28/2014	Quick OxyContin review Q12h along with Butrans for those patients requiring around the clock analgesia, Said Ok leave info/savings card and will contact if further info needed
PPLPMDL0020000001	CLEVELAND	OH	44195	5/28/2014	Reviewed OxyContin/Butrans with Troy, Initiation/Titration, savings cards now new info learned
PPLPMDL0020000001	Westlake	OH	44145	5/28/2014	Talked about dosing extended release Oxycontin every 12 hours for the appropriate patient. And Butrans dosing weekly- according to FPI. Gave Fair Balance. Asked how she see's scripts written and the pharmacist kyle said usually every 12 hours for oxycontin. Talked about titration with oxycontin and Butrans- gave fair balance.
PPLPMDL0020000001	Akron	OH	44333	5/28/2014	Quick hello in hallway and asked him how and when he feels titration up or down on OxyContin is appropriate? Dr said its all patient specific. I asked him to pick a patient and tell me. Dr said he does titrate down when he has confirmed a patients pain level has reduced. Dr said he has no issues titrating up and does so when patients complain of increased pain and intervention hasn't worked. I told him thanks for the information and to continue finding places for OxyContin. Reviewed Butrans Medicare D an coverage and told him since he finds Butrans to be effective in his older patients the new Medicare D plans will help him. Dr agreed.
PPLPMDL0020000001	Akron	OH	44307	5/28/2014	I asked Elise how her patients are doing on OxyContin and if she feels ok titrating up or down? Elise said she had a patient today on 30mg of OxyContin and 4 Percocet a day. Elise said that the patient feels they are not working and suggested to taper off opioids all together. Elise said she is going to try it and said she thinks the patient will quickly notice that the medicine is helping a lot. I told Elise that if the patient feels he needs to go back on opioids than maybe Butrans is an option. Elise agreed but said the patient is currently on high doses of opioids and Butrans may not work. I told her it may if he tapers off the oxycodone. Nothing else learned.
PPLPMDL0020000001	Akron	OH	44333	5/28/2014	Quick discussion in hallway. I asked dr if he is feeling more comfortable prescribing OxyContin to patients who need a dose adjustment on their Percocet? Dr said he is and said he would rather his patients be on the 12 hour oxycodone as long as they are not in acute pain. Showed dr the conversion guide and asked for continued use. Told dr to please assess patients for the appropriateness of Butrans when they need an adjustment on tramadol or vicoden and meet the indication. Left him with the initiation and titration guide.
PPLPMDL0020000001	Akron	OH	44333	5/28/2014	Dr said that before I walked in he converted a patient from 40mg to OxyContin 20bid. I told him to please write it as q12h to clear up any confusion and told him to tell his patients that the recommended dose times are 8 am and 8 pm for full 12 hour use. Dr agreed and said its not his first opioid of choice but it serves its purpose for patients failing Percocet. I reviewed conversions and managed care and asked for continued business. Discussed Butrans and asked him to continue to try to expand his use t patients younger than Medicare age.
PPLPMDL0020000001	Westlake	OH	44145	5/28/2014	The office manager Christy told me the doctor is too busy to speak to me regarding my products. Gave her Butrans posters and highlighted some of the somatic lower back pain as shown on the spine poster. Talked about these types of identifiable pain in our Butrans studies. I reminded her on dosing of Butrans and covered a few managed care wins with Butrans and Oxycontin.
PPLPMDL0020000001	Lakewood	OH	44107	5/29/2014	Dr came to window and asked me what was new. I said I was wonder why he hasn't written and new oxycontin or butrans for appropriate patients and I was beginning to get concerned that there was a problem that I needed to uncover and address. He said no no just coverage is the problem. I highlighted a few major plans for each product. Gave fair balance of products and reviewed dosing for each. I asked him how comfortable is he titrating butrans. Dr repeated the dosing options back to me.<font color=blue><b>CHUDAKOB's query on 06/12/2014</b></font>Lisa, when your conversation centers around why he has not written a product, this makes 4 about you. Make the conversation about them and their patients. Provide them a reason through a key product attribute. This is key to moving sales.<font color=green><b>BARTOLI's response on 06/16/2014</b></font><b>Understood. Will try it differently next time.<font color=blue><b>CHUDAKOB added notes on 06/17/2014</b></font>Thanks Lisa.
PPLPMDL0020000001	Valley View	OH	44125	5/29/2014	Reviewed OxyContin and Butrans FPI Initiation/Titration along with formulary grids
PPLPMDL0020000001	Berea	OH	44017	5/29/2014	Said there are a few single entity extended release options to think about today. Oxycontin dosed every 12 hours or Butrans dosed weekly schedule 3. Fair balance. Dr said ok thank you.
PPLPMDL0020000001	Cleveland	OH	44115	5/29/2014	Quick OxyContin review Q12h, 7 tablet strengths along with Butrans for those Tramadol failures requiring around the clock analgesia. Said Ok confirmed appt for further discussion
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	5/29/2014	I told dr that because she write OxyContin and Percocet she should feel comfortable converting appropriate patients to OxyContin. I asked her if there is any hesitation in doing so? Dr said not really but said some patients don't require an ER opioid like OxyContin. I asked her to give me an example and she said if a patient needs something for a short period of time due to acute pain. I told dr I agree and reviewed OxyContin indication. I asked dr to reassess patients for possible OxyContin candidates. Dr said ok. Asked dr to just TRY Butrans. I showed her the Scott profile and asked her if it makes sense to use Butrans? Dr said it does and said she knows she needs to just use it. I asked her to just pull the trigger and use it!
PPLPMDL0020000001	Uniontown	OH	44685	5/29/2014	I asked dr if she's had any activity with Butrans recently? Dr said not much but is writing and refilling a lot of OxyContin for dr Balter. I asked if she's writing new prescriptions? Dr said a few yes. I asked what IR opioids the patients had been on prior and she said usually its Percocet. I asked her to continue using for the appropriate patients. I asked her to use more Butrans when those on Norco ask for more or can't tolerate it. Dr said ok. Nothing else learned.
PPLPMDL0020000001	Lakewood	OH	44107	5/29/2014	Saw dr thru window and he said hello to me by name. He asked what was knew and I covered the butrans med part d wins and highlighted the coverage since last time he focus on my products getting rejected. I asked him if his patients had any problems with the weekly dosing? He laughed and said no. I said what was funny. He said how hard can it be to change a patch every week. I said how hard then is it to remember to write more butrans? He said he would try to remember more often to write it. I reminded him of the oxycontin savings cards and that the dosing every 12hours might be an option for the appropriate patient type. He agreed.<font color=blue><b>CHUDAKOB's query on 06/12/2014</b></font>When he said "what's new?", this was a perfect opportunity to lead with an insight. This may have taken your conversation in a more productive manner. What do you think?<font color=green><b>BARTOLI's response on 06/16/2014</b></font>I can try it next time.<font color=blue><b>CHUDAKOB added notes on 06/17/2014</b></font>Insights are a great way to tell an HCP something new when they say "what's new?"
PPLPMDL0020000001	Cleveland	OH	44195	5/29/2014	Reviewed OxyContin Q12h along with Butrans for those patients requiring around the clock analgesia said ok will consider for appropriate patients, no further info learned
PPLPMDL0020000001	Cleveland	OH	44103	5/29/2014	Reminded of OxyContin formulary status, every 12hours, 7 day transdermal, Tramadol failures that require around the clock analgesia, Said he continues to prescribe OxyContin for appropriate patients, no new info learned
PPLPMDL0020000001	Lakewood	OH	44107	5/29/2014	The nurses upfront told me they didnt know Dr. Horwoods schedule in lakewood because it changes. I spoke to KIM his MA and she said that he is mostly in Westlake, but does go to lakewood. I left a variety of marking materials and reviewed our savings program for both products and covered dosing. The nurse said the doctor writes oxycontin but not Butrans. I covered the dosing and schedule 3 and refills of Butrans with her- she told me she would pass the information over to the doctor.
PPLPMDL0020000001	Rocky River	OH	44116	5/29/2014	Dr said she doesn't like to write OxyContin. I said why? She said its schedule 2 and she doesn't have time for that. I asked what does she do if someone needed an extended release product, she said refer out. I asked if she ever doses short acting schedule three products atc. She said she has. I highlighted Butrans and the dosing, scheduling of Butrans. She asked about patch placement, which we discussed along with fair balance.<font color=blue><b>CHUDAKOB's query on 06/12/2014</b></font>What kind of extra time does she perceive it takes to write and follow-up a CII as opposed to a CIII?<font color=green><b>BARTOLI's response on 06/16/2014</b></font>I see her tomorrow so I will continue our conversation.<font color=blue><b>CHUDAKOB added notes on 06/17/2014</b></font>That will be an interesting conversation.
PPLPMDL0020000001	Berea	OH	44017	5/29/2014	highlighted the deliver system of OxyContin and Butrans and dosing. Reminded about the butrans coupons.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/29/2014	Spoke with Glenn about Butrans new plans again for Medicare D. He told me that Sable today had one he wrote for that had Caremark silverscript. He said there was no issues or PA to go through for it. I asked him if he knows the price and he said he didn't because the patient filled it in a retail pharmacy off campus. Discussed OxyContin plan coverages and doses.
PPLPMDL0020000001	Mayfield Heights	OH	44124	5/29/2014	Dr Roxana not in today. Met with her regular med asst Theresa. Discussed both products and verbatim indication. Discussed OxyContin scheduling, dosing, types of patients with conditions causing pain such as osteoarthritis and dosing every 12 hours. Left OxyContin conversion guide.Discussed Butrans verbatim indication, scheduling, 4 strengths. Discussed and showed Butrans initiation/titration guide. Also showed patient tear sheets which are in sample closet with trial/savings. Left laminated PAP pain scales, Left 4 strengths brochure for Dr. Roxana. Theresa says the practice has many Russian patients. The scales will help with communication.
PPLPMDL0020000001	Uniontown	OH	44685	5/29/2014	Caught dr while setting up lunch with Judy. I asked him if he's still getting efficacy from OxyContin as he expects? Dr said he is and said to usually his go to Long acting opioid. I told dr I'm glad to hear it and asked him to please reassess his patients already on oxycodone like Percocet patients who might be appropriate for OxyContin. Dr said he tries to do that as much as he can. I told him that Butrans should be right up his alley when patients on vicoden or Norco tell him they need more or something else. Gave him the conversion guide. Dr said he forgets about it and said thanks for the info.
PPLPMDL0020000001	Rocky River	OH	44116	5/29/2014	Discussed OxyContin dosing, dr said he wrote OxyContin and asked about if it was generic yet. I said no. I asked him who wasn't appropriate OxyContin patient typeof his pain patients and he described the older patient types. When I asked why not the over 18 patient types he said he just doesn't think a younger patient is appropriate. Talked about Butrans and dosing. Covered managed care with bet he ma and office manager and the doctor.
PPLPMDL0020000001	Cleveland	OH	44103	5/29/2014	Reviewed OxyContin Q12h, FDA approved Tier 1/3 labeling that describes abuse deterrent properties, along with Butrans for those patients requiring around the clock analgesia, Said Ok, no new info learned
PPLPMDL0020000001	Berea	OH	44017	5/29/2014	Talked about ATC and what he felt that means. Then we covered dosing of both OxyContin and Butrans. The pharmacist said he see's scripts of oxycontin but didn't tell me from who but did say it was written every 12 hours q12h. He didn't know what they were converted from just they were regulars every month. Gave fair balance. Talked about Butrans, patch locations and savings coupons.
PPLPMDL0020000001	Cuyahoga falls	OH	44223	5/29/2014	Saw Kim while I was speaking with Glenn. Kim said she heard me talking about the Caremark silverscript plan and had forgotten about it. I asked her if she has a lot of patients w/ that Medicare plan? Kim said she has many including those on various other Medicare plans. I asked her to continue writing Butrans for those who are appropriate for a 7 day transdermal patch. Reminded her to continue to also think OxyContin when patients present in pain on Percocet.
PPLPMDL0020000001	Cleveland	OH	44195	5/29/2014	Quick OxyContin review Q12h along with Butrans for those patients requiring around the clock analgesia, said ok , no furhter info learned
PPLPMDL0020000001	Lakewood	OH	44107	5/29/2014	discussed The meaning of ATC. Dr said it was at lea st three or more pills a day scheduled. I asked him if it was reasonable to write butrans, per our indication after the tramadol patient type that meets this appropriate usage. Dr said yes. I asked what hesitations he had for not writing Oxycontin, he said he doesn't like to write the schedule 2 because they are more dangerous and abuseable. Provided fair balance. I asked the doctor if he checked ors. Dr said yes and he explained what he looked for. Asked him how much scheduled 2 products would he write for in a given month of Oxycontin and he said very little maybe 60 but not even this much. We covered the Percocet patient that meets the ATC patient type we defined earlier and asked him why it was a risky proposition to have Oxycontin as an option [schedule 2]when he is dosing ATC percocet that is also schedule 2? Dr said Oxycontin made sense and then he brought up coverage with managed care. We reviewed caresources and butrans coverage and med d coverage. Highlighted a few Oxycontin Commercial plans.Reviewed every 12 hour dosing with Oxycontin and Butrans dosing. Dr asked me about the half life and about supplemental during the first few days of steady state which I addressed. Reviewed the pain results from the opioid naieve patient study. Dr said he would give it a try again [butrans] and he would think about Oxycontin.<font color=blue><b>CHUDAKOB's query on 06/12/2014</b></font>Lisa, it looks like you tried to logic him into OxyContin, but did not provide him a product attribute. For example "Dr. OxyContin is a q12h medication. It is an extended-release delivery system of the same molecule you are prescribing. Why does a patient have to earn an extended-release delivery of the same molecule you are already prescribing?" Does this make sense?<font color=green><b>BARTOLI's response on 06/16/2014</b></font>Yes it does, will make sure those areas are tied into presentations.<font color=blue><b>CHUDAKOB added notes on 06/17/2014</b></font>The key product attributes are the value an HCP is looking for to prescribe a product.

	Mayfield Heights	OH	44124	5/29/2014	While waiting for Dr Vilinsky, spoke with ass Keanna and Theresa. Discussed my products, their verbatim indications, scheduling, doses, black box warning. Discussed commercial/med d plans where both Butrans/OxyContin preferred. Dr. Vilinsky reported one male patient, over age 65, experience leg swelling while on Butrans. He asked me not to report, as patient has other conditions that may be causing/adding to leg swelling. I opened up and left him Butrans 2104 FPI. Recited from section 6.1 under Table 4, that 3% of patients treated with Butrans did experience peripheral edema. Dr says he will keep an eye on patient and let me know his progress. Patient is getting pain relief. Discussed 4 strengths, Butrans avoiding first pass liver metabolism since product enters systemic circulation. Discussed patient guides which are on shelf with savings in sample closet. Also discussed OxyContin as an oral option for his patients with daily, ATC pain. Left conversion guide. Left PAP laminated pain scales. Theresa (med asst) states that Dr. Vilinsky has a lot of Russian patients, so the scales will help w communication. <font color=blue><b>CHUDAKOB's query on 06/12/2014/<b><font>Did you explain that we track these and why? I don't see in the note where you did. Probably not fair to not address his concern, particularly if he gets a call from the home office.<font color=green><b>BALLIE's response on 06/16/2014/<b><font>Yes, I let him know Purdue tracks all Adverse Events reported, even if the AE is contained in the Full Prescribing Information.<font color=blue><b>CHUDAKOB added notes on 06/18/2014/<b><font>Great!
PPLPMDL0020000001					Reminded of OxyContin every 12hours, Med D formulary along with Butrans for those patients requiring around the clock analgesia, Said he will consider for appropriate patients, Booked appt
PPLPMDL0020000001	Cleveland	OH	44113	5/30/2014	Reviewed with Mike Rph OxyContin Q12h/Butrans for those patients requiring around the clock analgesia
PPLPMDL0020000001	Cleveland	OH	44102	5/30/2014	Lunch conversation and told dr I was going to get to the main points, ask for business and then be done! I led off with oxycodone insight and showed him the conversions from Percocet. I told dr that he told me in the past that when he thinks of ER opioids he is committing himself and the patient on long term opioid treatment. I asked dr what the difference is from that and continuing to refill Percocet month after month for a long period of time? Dr said he agrees with me but dr said he guesses it just is the psychological things with him. I showed him the 10mg page and asked him to initiate early. Discussed the nancy profile on hydrocodone and read through it with him. I discussed the 4 reasons from this piece for converting an appropriate patient to Butrans. Dr said he will look into the AE profile of his patients on vicoden as candidates. I asked dr to do that and I will follow up.
PPLPMDL0020000001	Fairlawn	OH	44333	5/30/2014	Discussed Butrans dosing and patient type. Dr said he thinks of Butrans for patients that complain their. Or I isn't working. Dr said atc is three or more short acting products scheduled. I asked if he was comfortable writing Butrans or OxyContin for those appropriate patients that meet our indication. Dr said yes. Talked about the Tramadol insight. Reviewed pain results of naive study and covered fairbalance for both products. Talked about OxyContin being dosed every 12 hours, dr said he will convert from Percocet if the patient needed chronic pain medication and appropriate.
PPLPMDL0020000001	Barberton	OH	44203	5/30/2014	Dr told me that she got the Butrans patient PA approved. I told dr that's great and asked her to continue looking for similar candidates along with those who have commercial insurance. Showed her a trial and copy card and told her to use them. Dr said she just can't find the patients when feels comfortable starting on OxyContin. I asked why Percocet is ok but OxyContin isn't?. She said she doesn't know but can't write it much because Bonyo doesn't want to have anyone in the office write it. I told her I understand and to please pass it by him when he knows a patient is right for the product.
PPLPMDL0020000001	Barberton	OH	44203	5/30/2014	Dr was done with patients doing paper work. Discussed dosing with both OxyContin and Butrans, gave fair balance and reminded on coupons
PPLPMDL0020000001	Fairlawn	OH	44333	5/30/2014	Spoke with Sue about anything new from Butrans or OxyContin. Sue said they dispensed both an OxyContin and Butrans today. I asked from which drs and she said the OxyContin was Petrus and the Butrans was from Found.
PPLPMDL0020000001	Akron	OH	44319	5/30/2014	I told her thanks for the information and checked stocking. Nothing. Else learned.
PPLPMDL0020000001					I asked dr when he is going to retire? Dr said in one month. I told him that this is the time to start a patient on OxyContin or Butrans and to convert patients you know are in pain around the clock on an ER opioid. Dr said that drs like him are really being looked at by the government and doesn't want to use high powered opioids. I told him I don't know what he means by high powered and asked him why he continues to write and refill vicoden and Percocet but won't write OxyContin or Butrans? Dr said he might use Butrans and asked about dosing, conversions and insurance. I explained dosing and conversions with the Kathy profile and asked him what's holding him back? Reviewed insurance and dr said he will remember it and will use it and to give him 2 weeks.
PPLPMDL0020000001	Cleveland	OH	44195	5/30/2014	Reminded of OxyContin formulary status along with Butrans, Initiation/Titration, said ok, nothing new learned
PPLPMDL0020000001					Window call and asked dr what he thinks he will do when a patient on Percocet meets the 90 pills a month? Dr said he will either think OxyContin main or Butrans. I told dr I'm glad that's the way he's thinking and told him that he said he would try to use OxyContin earlier and use the 10mg dose. I told dr not to wait until the patient gets up to higher doses or Percocet before he decides to convert. Dr agreed and said ok. I showed hi. The Kathy profile and asked him to use his first clinically and asked him when his first patient comes back for follow up? Dr said in about 2 weeks. I told him to titrate if necessary and can use opioid and non opioid analgesics for Reviewed OxyContin every 12hours, 7 tablet strengths along with Butrans initiation/titration guides said ok will schedule appt to further discuss
PPLPMDL0020000001	Cleveland	OH	44195	5/30/2014	Led off discussion about oxycodone insight and asked dr about her true feelings about patients opioid use. Dr said that she will not give more than 1-2 pills a day of any IR opioid. Dr said if they need more she sends them to pain management. Asked her if she knows she can use both OxyContin and Butrans as a first time opioid if NSAIDs are failed? Dr said she does but will not prescribe ER opioids and not much IR either. Dr said most of her patients are 20-30years old and do have pain but must be acute. Dr said she has a couple of older patients and may find the need for Butrans. Discussed nancy profile and reasons for converting patients to Butrans when
PPLPMDL0020000001	Fairlawn	OH	44333	5/30/2014	Quick hello at check out desk. I told him that OxyContin is a very good product for the right patient and gave him the indication. I asked him where and when he is using it primarily? Dr said as often as he can because he said he has too many patients with chronic pain on short acting products like Percocet. Dr said it's a good conversions and a smooth one. I told dr that's great to hear and to keep wiring. I told hi. That Butrans is he also a product that it an ER product that can be used for the patient wanting more tramadol or vicoden and he needs a ER product that's a transdermal patch. Dr agreed and said thanks.
PPLPMDL0020000001					Quick review of OxyContin Q12h, 7 tablet strengths along with Butrans for those Tramadol failures who require around the clock analgesia that she is sending to Pain mgmt. Said OK, not prescribing Clis
PPLPMDL0020000001	Cleveland	OH	44195	5/30/2014	Reminded of OxyContin Q12h 7 tablet strengths, Formulary grids along with Butrans for those patients requiring around the clock analgesia,Said she will keep in mind, requested appt with Dr.Xiang, said she will remind him
PPLPMDL0020000001	Cleveland	OH	44109	6/2/2014	Reviewed w/Tech OxyContin/Butrans savings cards along with Butrans patient info booklets, will relay info to RPh, no new info learned
PPLPMDL0020000001	Westlake	OH	44145	6/2/2014	Spoke to Jeanette the ma. Dr didn't see me today. I asked her about recent rejections on managed care plans. She couldn't think of any. We discussed Butrans and caresource patients. Also highlighted the savings cards for commercial patients for both Butrans and OxyContin.
PPLPMDL0020000001	Garfield Hts	OH	44125	6/2/2014	Reviewed OxyContin Q12h, formulary status along with Butrans for those patients requiring around the clock analgesia who are failing on present therapy. Formulary status, Initiation/Titration, Said he will consider for appropriate patients, reminded me that he is not treating many patients anymore. Asked for 1 that he is treating said he will keep it in mind
PPLPMDL0020000001	Cleveland	OH	44109	6/2/2014	Reviewed OxyContin and Butrans PIs/Initiation/Titration guides, will consider for appropriate patients, email request for appt on Thurs. at main campus, Debbie is nurse at Chagrin office.
PPLPMDL0020000001	Westlake	OH	44145	6/2/2014	The drs ma Daniele is starting to recognize me and my products with out me having to tell her what I have. I tried to see if she remembered my name but she didn't. I left some literature as I highlighted the dosing and delivery system of both products.
PPLPMDL0020000001	akron	OH	44333	6/2/2014	Saw dr at front counter. Handed him the OxyContin conversion guide and Butrans nancy profile. I told him to convert Percocet patients to OxyContin and vicoden and Norco patients to Butrans when they present in pain on those medicines and meet the indications. Dr said ok. Reminded him about the med D wins for Butrans.
PPLPMDL0020000001	South Euclid	OH	44121	6/2/2014	Note: (Landa replaced Tracy who's going to nursing school - Tracy no longer w practice) Discussed my product indications, scheduling and dosing strengths to Landa. First OxyContin, then Butrans. Also updated on trial/savings cards available for their patients (commercial) and updated Landa on Med D status for both products. Left Kathy patient profile, FPI's both products for Dr. DeJoseph.
PPLPMDL0020000001	Fairlawn	OH	44333	6/2/2014	I asked dr how he decides which patient is right for which ER opioid? Dr said he can tell me that most of his patients go on OxyContin because they are coming from Percocet and its an easy switch. I showed hi. The conversion guide and asked him to make that decision to convert once a patient reaches 3 months of he IR. Dr said he tries but its tough because of cost and some patients just don't want to change medicines or take OxyContin. I told him I understand and to continue finding placement for it. Reviewed Kathy profile quickly for Butrans and asked him if it makes sense? Dr said it does and then I told him about Mediciare D wins with aarp
PPLPMDL0020000001	South Euclid	OH	44124	6/2/2014	Met with med asst at front window. Courtesy call; Mark Gutkowski customer - in Monday all day in S. Euclid. (Was already in building). Left 5 Butrans patient guides. Left Butrans and OxyContin FPI. Left Butrans initiation guide; OxyContin conversion guide.
PPLPMDL0020000001	South Euclid	OH	44121	6/2/2014	Met w RN at front window. Asked to see Dr Tomm. She states there's no way I will be able to talk w either HCP on a Monday. Discussed updates to formulary status for OxyContin, left FPI. Discussed updates to Butrans formulary status, left FPI. Left Kathy patient profile for both HCP's.
PPLPMDL0020000001	Akron	OH	44333	6/2/2014	Spoke to Dana in office with office manager. Reviewed Kathy profile and told her to reassess patients for IR opioids like hydrocodone for 3 months or more for an ER opioid like Butrans. Dana said that's usually when she converts. I asked her if she has any tramadol patients that would fit a similar criteria? She said she does and is trying. Reminded her about when to convert a patient to OxyContin and showed her the conversion guide. Dana said she leaves most OxyContin up to the physicians. Nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44127	6/2/2014	Reviewed Butrans for those Tramadol failures requiring around the clock analgesia, Initiation/Titration along with OxyContin every 12hours and the FDA labeling on Tier 1/3 that describes abuse deterrent properties, Said she will consider Butrans, no Clis and is prescribing very little pain meds.
PPLPMDL0020000001	Akron	OH	44333	6/2/2014	Spoke with Jim the pharmacist about OxyContin and showed him the conversion and titration guide. I asked him if when patients are on Percocet for 90 plus days and still complaining of pain, if it makes sense to convert to OxyContin? Jim said it does and said he sees a lot of patients refilling their short acting products month after month. I asked him if he would be willing to ask the patient to speak with their dr about another ER option? Jim said he already does. He said he fills OxyContin but not much. I asked him about Butrans and if he has dispensed any recently. Jim said the last time was in March and it was for 5mgc and he has it on the shelf. He said maybe 5 times since the beginning of the year. I showed him the nancy profile and then explained the conversions. I asked if he wanted any copy cards? He said no. I told him his patients with private insurance should have a card but if they don't they can go to Bonyo's.
PPLPMDL0020000001					Confirmed lunch for tomorrow with dr the OxyContin conversion and titration guide and told him to look it over before our conversation on OxyContin and Butrans tomorrow. I told dr if it makes sense to convert a IR oxycodone patient in pain and meets the indication to OxyContin? Dr said it does and will discuss tomorrow.
PPLPMDL0020000001	Cleveland	OH	44109	6/2/2014	Visited IM/PMR depts OxyContin/Butrans Initiation/Titration guides along with appts requests
PPLPMDL0020000001	Cleveland	OH	44109	6/2/2014	Visited Ctr. OxyContin/Butrans Initiation/Titration guides (Dhillon, Campbell,Dziwis, Slattery,NP, Gemmecu et al) Appt. requests
PPLPMDL0020000001	Fairlawn	OH	44333	6/2/2014	Signed up for Dinner this month and saw dr behind counter. Told dr to look over conversion and titration guide to help identify patients to convert to OxyContin. I gave him the nancy profile and said if he's not going to write it for patients falling Norco than to refer to pain management like he told me last time. Dr said there are a few patients he thinks may be good for it. Told him about UHC aarp and Caremark silverscript wins.
PPLPMDL0020000001	Euclid	OH	44117	6/2/2014	Front window. While waiting for Dr. D, met with med asst s Lori and Helen. Discussed OxyContin Essentials kit: for new patients, commercial/cash pay (they try to avoid cash pay patients) and OxyContin preferred formulary, Medicaid with prior auth, BWC status. Discussed Butrans preferred formulary, Medicaid w prior auth, BWC and Med D formulary status. Reminded Dr DeMicco he agreed to re assess Percocet patients who may need a daily, atc, long term opioid - discussed earlier to conversion to OxyContin -every 12 hours. Asked him to keep in mind this week; and Butrans transdermal option, which bypasses first pass liver metabolism.
PPLPMDL0020000001	Cleveland	OH	44109	6/2/2014	Quick intro. reviewed OxyContin Q12h along with Butrans 7 day transdermal for those patients requiring around the clock analgesia, said ok, left savings cards and email request to further discuss
PPLPMDL0020000001	South Euclid	OH	44121	6/2/2014	Met w med asst at front window. Dr Flagg unavailable.Discussed updates to OxyContin FPI including addition of neonatal opioid withdrawal syndrome to black box warning. Updated on commercial/med d status, left OxyContin and FPI and formulary grid. Discussed updates to Butrans FPI, including the addition to black box warning of neo natal opioid withdrawal syndrome. Updated formulary/Med D status. Left FPI and Kathy Butrans
PPLPMDL0020000001	Akron	OH	44312	6/2/2014	I gave dr the oxycodone insight and asked him based on out last discussion why it's ok for him to write and refill IR opioids and have patients be on them for an extended period of time but OxyContin is off limits? What's the difference? Dr said I have a good point and said he just needs to think of OxyContin differently. I agreed and told him to just use it where appropriate. Told dr that Butrans can also be an option for those patients who are in pain on tramadol or vicoden and need a dose adjustment. I asked dr to just take a second to assess the patients pathology of pain and use Butrans if he believes they are in pain around the clock. Dr said ok.
PPLPMDL0020000001					



PPLPMDL0020000001	Akron	OH	44312	6/2/2014	Quick discussion in hallway. I asked dr to think of OxyContin as a product he can convert patients already on oxycodone to a 12 hour delivery system. Dr said ok and he's trying. Dr said he wrote for another Butrans prescription and feels pretty good about it. I asked why and he said because he's finally seeing positive results and good words from his patients on it. I told him to keep writing and to find similar patients.
PPLPMDL0020000001	Cleveland	OH	44114	6/3/2014	Reviewed Butrans for those Patients requiring around the clock analgesia that have failed on present therapy along with OxyContin Q12h, 7 tablet strengths, Said Ok is always looking to prescribe Butrans for appropriate
PPLPMDL0020000001	Cleveland	OH	44114	6/3/2014	Reviewed with Tech OxyContin/Butrans Initiation/Titration along with Butrans patient info booklet, Will relay to Rph-Joe,
	Mayfield Hts	OH	44124	6/3/2014	Lunch. Discussed updates to verbatim indication for Butrans and addition of neo natal opioid withdrawal syndrome to Black Box Warning. Discussed Section 2.2 Titration & Maintenance of Therapy, ability for him to use 2 5 mcg/hr patches or 2 10 mcg/hr patches; however, two 15 or 20 mcg hr patches CANNOT be used, because they will exceed the max daily dose of 20 mcg/hr. He was happy to hear this information and that he can speak to that when delivery educational programs on Butrans. Left Butrans FPI. Oxycontin dr states he had been writing more OxyContin because it has been easier to titrate; we discussed conversion/titration guide/START and another conversion from percocet and oxycodone earlier in appropriate patients with daily, atc, long term pain. (verbatim indication presented) Discussed no change in dosing required for renal or mild or moderate hepatically impaired patients. Asked for business moving forward, both products. reminder 15 mcg hr is option, 4 strengths, dosing flexibility.
PPLPMDL0020000001	Akron	OH	44310	6/3/2014	Spoke with the technician Sara about OxyContin dosing, conversions from Percocet and reviewed conversion and titration guide. Sara said she sometimes sees it written as TID but for only the patients that have continued on that dosing regimen. I told her its only to be dosed q12. Discussed Butrans dosing, conversions and nancy profile. Sara said they have patients on the 5mcg dose. I told her about appropriate patient selection and Schedule 3.
PPLPMDL0020000001	Cleveland	OH	44195	6/3/2014	Reviewed OxyContin every 12hours, 7 tablet strengths, formulary status, along with Butrans, 7 day transdermal, Initiation/Titration, formulary status along with Savings cards, Inquired about CCF formulary, Said she will consider for appropriate patients, CCF PAL MED team is using alot of IV Buprenorphine in hospital
	Uniontown	OH	44685	6/3/2014	Quick message over counter and asked her if she has had any Butrans activity recently? Abby said nothing recent. I asked why and she said she will be but she is still getting to know the patients and gaining her own patient base. She said its tough to change medicines when the patient is one of another provider in the practice. I told her I understand and told her to use it for patients like nancy who are on hydrocodone and still in pain. I told her about the new Medicare coverage plans and she said that's great to know. She wanted me to remind her of all the coverages for Medicare and Medicaid. I asked her to also convert patients from Percocet to OxyContin when they may need a dose adjustment. Abby said she has no issues doing that.
PPLPMDL0020000001	Rocky River	OH	44116	6/3/2014	Waved to dr across hall. He said "you are back". I reminded him of the products being promoted along with the coupons available for his extended release pain patients.
PPLPMDL0020000001	Lakewood	OH	44107	6/3/2014	Talked about the dosing and the savings program for both OxyContin and Butrans. Highlighted his caresource patients for Butrans.
	Akron	OH	44313	6/3/2014	Led off with oxycodone insight and asked dr if he currently has patients that meet this statistic? Dr said a few but wants to review Butrans. I told dr that I need him to think OxyContin as well and showed him the conversions from Percocet. Dr said he will try. Discussed nancy profile, conversions, appropriate starting dose and criteria for Butrans patients. I asked dr if he has patients like nancy? Dr said too many. I told him to pull the trigger and use Butrans for those patients who need a dose adjustment or can't tolerate it. Dr said he has some patients who don't want more pills and said they would be good for it as well. Dr asked about the patch coming off or peeling at corners. I told dr about proper skin prep and to apply it to a nearly hairless site which is clean and dry. Dr said ok. I asked him if he is going to start new patients and he said he will. Reviewed new Medicare plans and others. Told him that aarp and Caremark med D plans account for almost 85% of his Medicare business and he needs to write it for those patients. Dr agreed they are good candidates.
PPLPMDL0020000001	Akron	OH	44312	6/3/2014	short discussion over lunch and told him youse OxyContin for the right patient and reviewed Maggie profile and showed him the conversions. Dr said ok and he just needs to remember using it. Discussed Butrans and nancy profile and asked him if he has patients currently on tramadol or hydrocodone that are in around the clock pain? Dr said all doctors do including himself. I are viewed the profile and conversions. Dr said he thinks its a great option and will remember to sue it when he's about to refill hydrocodone.
PPLPMDL0020000001	Cleveland	OH	44114	6/3/2014	Quick Review of OxyContin every 12 hours, 7 tablet strengths along with Butrans for those Tramadol failures requiring around the clock analgesia. Savings Cards Said Ok, no time to talk, leave info with Receptionist.
PPLPMDL0020000001	Cleveland	OH	44114	6/3/2014	Reviewed w/Horace RPH OxyContin every 12hours, 7 tablet strengths along with Butrans 7 day transdermal, Initiation/Titration and patient info booklet, Said he will keep it in mind, only been open for 4 months, Worked at Dave's next door, Will being fillin Metro- patients RX's upstairs
PPLPMDL0020000001	Cleveland	OH	44195	6/3/2014	Visited Walker Bldg (Neuro.Dr. Mays Pain dept) OxyContin/Butrans Initiation/Titration guides
PPLPMDL0020000001	Mayfield Village	OH	44143	6/3/2014	Met with med asst at front window. Let her know I'm leaving OxyContin, Butrans FPI's which have been upated recently. Left conversion titration guide for both products. Left Kathy patient profile.
PPLPMDL0020000001	Lakewood	OH	44107	6/3/2014	Asked the doctor if a patient was on an oxycodone short acting if they needed atc opioid if he would convert them to OxyContin. Dr said no because OxyContin is still too expensive for most patients. We reviewed his commercial plans and using the coupons for his patients. Reviewed fair balance and limitations of use. Talked about Butrans dosing, titration and coupons available to commercial insured patients.
	Cuyahoga Falls	OH	44223	6/3/2014	Good discussion about OxyContin today. Placed the conversion and titration guide in front of him and asked him to convert more patients that are on Percocet and are candidates for q12 dosing. Dr said he usually does that but finds that when converting from Percocet he needs to increase the dose of OxyContin because patients get analgesia from the Tylenol. I asked him to explain. Dr said if he's will have to go up one dose. If the patient is taking 40mg of Percocet, he might need to go to 60mg of OxyContin to make up for the lack of Tylenol. I told dr I understand but whatever dose he goes with he needs to dose it q12. Dr said ok.
PPLPMDL0020000001	Mayfield Village	OH	44143	6/3/2014	As dr walked past front desk area, told him I'm leaving OxyContin and Butrans FPIs for his review, changes to Black Box Warning. Also left FPIs and savings cards - which I told her should be given to all patients commercially insured or cash pay.
PPLPMDL0020000001	Tallmadge	OH	44278	6/3/2014	Attempted to discuss the OxyContin FDA draft guidance insight and dr told me he didn't have time for a discussion. Dr asked if I had one thing to tell him. I told him to convert patients from Percocet who need a dose adjustment to q12 OxyContin. Dr said ok. Nothing else learned.
PPLPMDL0020000001	Westlake	OH	44145	6/3/2014	Spoke to the dr about OxyContin every 12 hour dosing and asked what kind of a 12 hour dosing for atc pain fits i to his practice. Dr said he doesn't write much opioids. He said it even the pain doctors are writing OxyContin any more. I asked why. He said they want to do injection blocks. Reviewed the savings program mentioned Butrans schedule 3 option for atc pain dosed weekly.
PPLPMDL0020000001	Cleveland	OH	44127	6/3/2014	Reminded of OxyContin every 12 hours, 7 tablet strengths, formulary coverage along with Butrans for those patients requiring around the clock analgesia, Said Ok nothing new learned
PPLPMDL0020000001	Cleveland	OH	44195	6/3/2014	Reminded of OxyContin every 12 hours along with Butrans for those patients requiring around the clock analgesia, Said Ok, no new info learned- font color=blue<b>CHUDAKOB added notes on 06/12/2014</b>- font=Mark, I am not sure who this is, but it sound like you made a new contact. Now, your challenge will be to provide her with the key product attributes that make her question why treating pain in 4-6 hr increments has another option.
PPLPMDL0020000001	Westlake	OH	44145	6/4/2014	Reminder messages on your calls (based on your call notes) will most likely not produce sales growth.
PPLPMDL0020000001	Westlake	OH	44145	6/4/2014	Was speaking with Bonnie the office manager about Butrans and the experience kitten the doctor came into her office to day hello. Quick reminder of the delivery system and dosing schedule of both OxyContin and Butrans. Highlighted a few med d plans for Butrans.
PPLPMDL0020000001	Cleveland	OH	44104	6/4/2014	Quick OxyContin reminder Every 12hours along with formulary status and savings cards, Also reviewed Butrans for those patients requiring around the clock analgesia, Said It will keep it in mind no further info learned
PPLPMDL0020000001	Akron	OH	44312	6/4/2014	Told dr in hallway about using OxyContin and asked him if he finds himself in a situation with patients on Percocet who have been on it for at least 3 months? Dr said maybe two or three. I asked him to think of using OxyContin for those patients who present in pain or can't tolerate Percocet. Reviewed Kathy profile with dr and asked him if he would at least provide the option and overview of Butrans for appropriate patient? Dr said he
PPLPMDL0020000001	Cleveland	OH	44105	6/4/2014	Reviewed OxyContin every 12hours, Titration, 7 tablet strengths, Savings cards along with Butrans for those patients requiring around the clock analgesia. Said he will consider for appropriate patients,
PPLPMDL0020000001	Cleveland	OH	44115	6/4/2014	Reviewed OxyContin every 12hours, FDA approved Tier 1/3 labeling that describes abuse deterrent properties, Savings Cards, formulary status along with Butrans for those patients requiring around the clock analgesia, Initiation/Titration, formulary status, Savings cards Said ok will consider for appropriate patients, Asked for 1 patient, said he has 1 in mind,
PPLPMDL0020000001	Westlake	OH	44145	6/4/2014	Discussed the FDA insight. Reviewed any hesitations writing an oxycodone molecule for the appropriate patient. He said no, he said that dr buckek will start schedule two patients and he will continue their medication, change it, etc. the np will review medication changes together before Initiation in most cases he told me. His biggest problem is managed care he said with my products. We reviewed. We talked about the limitations of use for both products. It asked if he treats patients who are none acute with a short acting medication for atc pain. The doctor said hardly ever that he will convert someone to an extended release product. He said managed care dictates what he can or can not write usually. I told him what was going on with his new start Butrans patients and that I was concerned that something has changed from preventing him from writing Butrans I the appropriate patient. He said just managed care. He said he likes Butrans and think its right for the appropriate patient type. We talked the conversion. Guide, touched on opioid naive pain scores and reviewed fair balance. We talked about Butrans being schedule 3, I asked him if having a schedule 3 extended release option has made a difference in his practice. Dr said since he imitations with schedule 3 products him self and not schedule 2 products as a np, he said has found it a good option. Reviewed the experience program with him and all staff members. Worked with Lori the office manager on managed care.
PPLPMDL0020000001	Cleveland	OH	44106	6/4/2014	Reminded of OxyContin every 12hours, formulary status and savings cards along with Butrans for those patients requiring around the clock analgesia, Said ok will continue to find appropriate patients, Asked Diane for
PPLPMDL0020000001	Akron	OH	44333	6/4/2014	I asked Elise about her patient we discussed last time that was coming off oxycodone? Elise said the patient is doing fine and said the patient is dedicated to get off medicine. Elise said she done find good success with OxyContin and Butrans and like them both. Reviewed Kathy profile for Butrans, Maggie for oxycodan And asked her to find patient with similar profiles.
PPLPMDL0020000001	Akron	OH	44304	6/4/2014	I asked dr what is the primary type of pain he treats? Dr said he didn't have time to discuss right now. I told him that's ok and I understand. Told him to use OxyContin for patients already on oxycodone who need a dose adjustment and those on tramadol in the same situation for Butrans. Dr said ok.
PPLPMDL0020000001	Cleveland	OH	44115	6/4/2014	Visited pharm. requested George RPH- not able to talk, inquired about formulary. Dave B in patient pharmacy. OxyContin/Butrans utilization if any comes from Nickels
PPLPMDL0020000001	Westlake	OH	44145	6/4/2014	Asked dr what he was doing with his osteoarthritis pain patient. Dr said he uses most non opioid. Dr said he does not like to write hydrocodone. Dr said Butrans makes a fit for patient. I reminded in fair balance and talked about dosing and titration. Hi lighted managed care. Dr did not want to talk about schedule two products. I did bring up the 12 hour dosing option of OxyContin but doctor changed the subject.
PPLPMDL0020000001	Westlake	OH	44145	6/4/2014	Spoke to the dr about atc pain. Dr agreed that Butrans and OxyContin are appropriate choices chronic pain patients who meet indication. Dr said that he will convert from Percocet to OxyContin if the patient needs atc pain. Dr said Butrans makes sense but was confused in managed care coverage. We talked about caresource, me do, IANs and a few commercial plans for Butrans. Focused on commercial plans for OxyContin. Reviewed intac guide of Butrans, dr said he was familiar with Butrans. We talked about titration and supplemental using the core visual aid as back up reference. Highlighted the oxycotin fpi in section 12.3 on the comparison of oxycodone to OxyContin. Dr was aware. Dr said he usually leaves the pits visits to Brian the np. Dr will Initiation patients. Reviewed the experience program. Gave fair balance. Talked about the warnings of respiratory depression and dose adjustments for elderly with OxyContin.
PPLPMDL0020000001	Akron	OH	44304	6/4/2014	Spoke to Lisa about ordering of OxyContin doses and explained them from the conversion and titration guide. I asked her if they see Percocet being refilled month after month? Lisa said yes all the time. She said that they have many patients on all types of short acting narcotics who just continue to have it refilled. I showed her the conversions for OxyContin and Butrans and told her its my biggest challenge. She said that I need to get to the family physicians because they are the ones who just tend to refill all the time.
PPLPMDL0020000001	Lyndhurst	OH	44124	6/4/2014	Quick hallway. Asked dr to consider Butrans for the male patient he just checked out who was sent home with a Tramadol script. When someone comes in, like this patient, and complains of daily, atc, pain - I hope you will consider if Butrans might be a more appropriate option with 7 days of buprenorphine release. 4 strengths to individualize dose. Updated on FPI including info contained in Black Box Warning on Neo Natal opioid withdrawal syndrome and section 2.2 - discussed titration and maintenance and ability to use two patches of 5 or 10 mcg/hr now; not to exceed max dose of 20 mcg/hr. That's great stated Dr. Then discussed Med D plans - when I stated avoid Humana and Wellpoint Med D - he says not to worry he has very few patients on either of those plans. Asked for business moving forward. He will keep in mind- font color=blue<b>CHUDAKOB's query on 06/17/2014</b>- font=Jenny, read this statement "I hope you will consider if Butrans might be a more appropriate option". Why would Butrans be a more appropriate option? Again, we cannot combine a Sug and 10ug patch. We have no indication for that - font color=green<b>BALLIE's response on 06/20/2014</b>- font=My error, I should have been more clear and not write in "short hand" - I reviewed and read last paragraph, section 2.2 with doctor and showed him options when titrating Butrans - all within our FPI - I have never discussed anything NOT contained within the Butrans FPI. - font color=blue<b>CHUDAKOB added notes on
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PPLPMDL0020000001	Lyndhurst	OH	44124	6/4/2014	Quick hallway. Reminded Sarah of Butrans efficacy and pain reduction discussed last visit. Also shared "great news" - Section 2.2 of Butrans FPI regarding the ability to use two 5 mcg/hr or two 10 mcg/hr patches during titration/maintenance. Sarah was pleased with this information. Discussed her Med D patient population and Butrans preferred Med D status. Discussed avoiding Humana and Wellpoint Med D as neither of my products on formulary. Discussed update to Butrans FPI in Black Box Warning, neo natal opioid withdrawal syndrome/updated on same Black Box Info for OxyContin. OxyContin discussed when she has a Percocet or oxycodone patient with daily, atc, pain, who are not controlled on IR opioid - consider converting to OxyContin which provides 12 hours of oxycodone release in each tablet.<font color=blue><b>CHUDAKOB's query on 06/17/2014</b></font>jenny, words like more appropriate are comparative and we cannot make comparisons. What do we have to suggest that Butrans is a more appropriate option because it is every 7 day dosing?<font color=green><b>BALLIE's response on 06/20/2014</b></font>-did not intend my call to sound like Butrans was "more appropriate" due to dosing schedule; however, I did discuss flexible dosing, with 4 strengths, and 1 patch worn every 7 days/4 patches per month. Again my "short hand" call notes need to be tweaked to be more reflective of accurate account of what was discussed; I will work on this moving forward.<font color=blue><b>CHUDAKOB added notes on 06/21/2014</b></font>Thank you. The key words are "accurate account"
PPLPMDL0020000001	Copley	OH	44321	6/4/2014	I showed dr the nancy profile for Butrans and reviewed it. I asked him if it makes answer for that patient to initiate Butrans? Dr said yes. I asked dr if he has patients with a similar profile? Dr said he does but it will cost them too much money to get Butrans. I asked him how he knows that and what is too much? Dr said its expensive and will consider it for his private insurance patients. I told him that's fine then and to use it there. Showed him the OxyContin conversion and titration guide and told him the only place I want him to use it is for patients already on oxycodone and need a dose adjustment and complaining of being in pain. Dr said ok. Nothing else
PPLPMDL0020000001	Cleveland	OH	44115	6/4/2014	Visited IM dept.(Dr. Kev.) OxyContin/Butrans Initiation/Titration guides along with formulary status
PPLPMDL0020000001	Akron	OH	44313	6/4/2014	I told dr about the oxycodone insight and asked him if he could identify just one patient already on IR oxycodone plain or Percocet who may be appropriate for q12 OxyContin? Dr said he will try. Dr said he has a Butrans patient he started who has a PA. I asked dr which plan and he couldn't remember. I asked him if the PA was approved, denied or pending? Dr said it is pending. I reviewed BWC, Caresource PA, UH Community plan, and new Medicare plans. I told him that almost 70% of his Medicare business comes from UHC aarp and Caremark Silverscript. Dr said that's good and said he didn't know about Caresource. I said that I have told him a number of times and to make a note of it.
PPLPMDL0020000001	Westlake	OH	44145	6/4/2014	The orth surgeon and discussed when he might use an extended release opioid and he said seldom. We talked about when a patients pain turned into a long term condition and they might be a candidate per our indication. Highlighted the Percocet patient and the option of OxyContin. Being dosed every 12 hours. Reviewed Butrans dosing and Initiation guide. Highlighted the coupons and a few selected managed care plans like medical mural and Caremark.
PPLPMDL0020000001	Cleveland	OH	44115	6/4/2014	Saw Dr.in hospital Quick OxyContin reminder (every 12hours, formulary status along with Butrans for those patients requiring around the clock analgesia that are failing on present therapy, Said Ok, Asked if I could make appt.
PPLPMDL0020000001	Lyndhurst	OH	44124	6/4/2014	Said he doesnt but stop in office
PPLPMDL0020000001	Akron	OH	44333	6/4/2014	Quick hallway. Discussed patients who have been on IR Percocet and are at 2-3 IR pills daily, not controlled, and whom are now experiencing around the clock pain. Would 12 hours of oxycodone release be appropriate for these patients? This can be achieved by conversion to OxyContin. And, BWC, Medicaid with prior auth, Preferred status on most major Medicare D plans expect Humana and Wellpoint = so improved access for patients. Asked for business this week for both products for patients with daily, atc pain.
PPLPMDL0020000001				6/4/2014	Dr told me that he write two Butrans prescriptions today and one OxyContin. I asked him if they were refills or new patients? Dr said all new patients. Dr said both Butrans parents were taking hydrocodone and complaining of being in pain and not surgical candidates. Dr said the OxyContin patient was a new patient and wants more Percocet. Dr said that he finds that he needs to start the dose higher than what the normal conversion is. Dr said if the patient needs a 10mg OxyContin he will automatically start on 20mg so he won't have to give Percocet for breakthrough and get the full 12 hours. I told dr I understand and he said he doesn't use any 15 or 30mg doses. He will typically use 10, 20 and 40mg. I discussed the Maggie profile and the nancy profile for OxyContin and Butrans respectfully.
PPLPMDL0020000001	Westlake	OH	44145	6/4/2014	Christy the office manager had a booked waiting room, standing room Only and said for me to come back. I highlighted the delivery system of both products and the savings coupons
PPLPMDL0020000001	Norton	OH	44203	6/5/2014	Reviewed oxycodone insight and asked him how long he usually has patients in short acting products before turning to an extended release option. Dr said all depends on the patient. I asked him if a patient needed atc pain therapy if he thought OxyContin or Butrans were appropriate options. Dr said short acting products are cheaper for the patient. I highlighted a few areas of managed care and talked about the coupons for both products.
PPLPMDL0020000001	Cleveland	OH	44125	6/5/2014	Reviewed w/Joshua Rph OxyContin every 12hours along with Butrans for those Tramadol failures requiring around the clock analgesia,Said Ok requested OxyContin Savings card
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/5/2014	Showed dr the nancy profile and the reasons for converting appropriate patients to Butrans. I asked dr to please continue finding patient appropriate. Dr said he is hearing good things from his patients on it. Dr said he is always trying to find ways to get his patients off multiple pills and said the week long patch is a good option.
PPLPMDL0020000001	Cleveland	OH	44113	6/5/2014	Reviewed Butrans for those patients requiring around the clock analgesia that are not controlled on present therapy,Said Ok as always continuing to find appropriate patients, Said she has had a few PA issues, but couldnt recall particulars, asked to make a note for future reference
PPLPMDL0020000001	Cleveland	OH	44113	6/5/2014	Discussed OxyContin and Tier 1/3 FDA labeling that discusses abuse deterrent properties, every 12hours for appropriate patients along with Butrans Initiation/Titration, savings cards, Said she will continue to prescribe for appropriate patients, No change from Dr. Nicklels on CII's.
PPLPMDL0020000001	Euclid	OH	44117	6/5/2014	Dr DeMicco leaves by 12 n on Thursdays now to go to Painesville office. Met with med asst at front desk. Updated her on changes to OxyContin and Butrans FPI, including addition to black box warning. Discussed appropriate patients for either product would be those with daily, around the clock pain, long term. Left FPIs, she will review w dr DeMicco in am, and have him call me w any questions.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/5/2014	I asked dr if he has a patient on 20mg of Percocet if they would be a good candidate for OxyContin? Dr said we discussed this the other day and said he does think they are good for OxyContin and said he's just doing opioid rotation. Dr said sometimes its good to mix it up and use different opioids because they all tend to work just a little differently. Dr said he has been getting good results with Butrans and is using it for his patients even on Percocet. I asked hi to just continue doing what he's doing and reminded him of the med D plans for Butrans.
PPLPMDL0020000001	Euclid	OH	44119	6/5/2014	Met with head nurse on Pain Management Floor (Carla). Updated on both OxyContin and Butrans: revised FPI's, managed care status, savings cards; non branded items such as PAP journals.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/5/2014	Discussed the new OxyContin copay cards with Pat. Told him the old cards are valid for now but honored at the new up to \$70 off. Patrick said they fill a fair amount and most comes from pain management. Reviewed Butrans copay cards, and patient type nancy review. Pat discussed a PA that came through for it yesterday and was filled out and approved. I asked for who and he said dr Azem in the falls.
PPLPMDL0020000001	Euclid	OH	44119	6/5/2014	Hallway. Met with nurse mgr Carla, left packet of information for Dr. Saeed. She will communicate all with Dr. Saeed and leave packet on his desk. Left a few PAP pain journals, left a few Butrans patient guides. Discussed both OxyContin and Butrans FPI's and new updates, including revised indication, addition to Black Box Warning; and section 2.2 for Butrans. Discussed BWC Ohio, Medicaid with prior auth, commercial formulary status for both OxyContin and Butrans. Discussed Paul Gawry issue with pharmacies not accepting Butrans trial/savings. Asked Carla to keep track and call me with any similar issues; so I can research and help them resolve.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/5/2014	Spoke with Glenn and dr Ali in the office today. I asked Glenn how things are going with OxyContin and Butrans with prior authorizations? Glenn said they haven't had any issues and have had a few patients get covered for Butrans on silverscript. I asked him if he knows how much the patient paid? Glenn said he doesn't but just knows there were no issues. Reminded him of plan coverages.
PPLPMDL0020000001	Euclid	OH	44132	6/5/2014	Lunch. Reviewed specific patient types for OxyContin. Patients with osteoarthritis back pain, who he determines have a daily, atc, need for ER opioid. Select 1 or 2 trusted patients for a trial, before referring to pain specialist. Initiating OxyContin for 14 days is also an option; commercial/cash pay can redeem savings every 14 days with 14-day script. Same molecule, ER delivery system. Does this sound reasonable? Yes, replied Dr. Butrans, also available for patients you determine have daily, atc pain. Asked Dr to think about patient like Scott who's on 4 Tramadol daily, pain not well controlled. This is the type of patient for whom I'd like you to trial Butrans.
PPLPMDL0020000001	Cleveland	OH	44113	6/5/2014	Discussed updates to both product FPI's, scheduling, dosing. Asked for business the rest of this week and next week; regarding the patient types we discussed.
PPLPMDL0020000001	Cleveland	OH	44113	6/5/2014	Reviewed OxyContin every 12hours, 7tablet strengths, formulary status along with Butrans for those patients requiring around the clock analgesia, Said Ok, will consider, feels patients are adequately controlled, referred to
PPLPMDL0020000001	Euclid	OH	44119	6/5/2014	Visited Ortho Dept (Billfield,Stearns,Joy) OxyContin/Butrans initiation/titration along with formulary info
PPLPMDL0020000001				6/5/2014	Hallway. Repeated Percocet insight. Summarized our last call; and asked again, when he finds a percocet patient on 3-4 tablets daily, whose pain still uncontrolled, consider conversion to OxyContin, which will provide his patients with 12 hours of oxycodone delivery. Reminder of savings cards for cash/commercial patients. Butrans, Paul states he has had "push back" lately from more than one pharmacy NOT accepting the Butrans trial/savings card. I asked what pharmacy, he couldn't remember. I told him, in the future, call me right away and I will do some research and try to help resolve the issue. I told him I'd discuss w nurse mgr Carla and ask she call me as similar situations arise. Discussed updates to FPI, including black box warning, section 2.2 titration and maintenance. Asked for business today, remainder of week and next week - when patient (s) need daily, atc, ER opioid.
PPLPMDL0020000001	Euclid	OH	44132	6/5/2014	Lunch. Although Cara doesn't have DEA license and has no interest in managing pain patients in near future. she likes to be presented updates on my products. Reviewed OxyContin, then Butrans verbatim indications, appropriate patients, opioid naive dose of 10 mg every 12 hours. Butrans, updated on verbatim indication, scheduling, strengths, and Section 2.2. in FPI on titration and maintenance. Discussed formulary access and savings for Lunch. PA-C Liz does NOT have her DEA license yet. She's unsure if she wants to manage pain meds in future. Updated on indication, scheduling, strengths, doses and opioid naive dose of 10 mg every 12 hours release of oxycodone. Discussed formulary status and savings for OxyContin. Discussed Butrans indication, scheduling, strengths, section 2.2 of FPI regarding titration and maintenance. Updated on formulary status, trial and savings.
PPLPMDL0020000001	Tallmadge	OH	44278	6/5/2014	Told dr about the oxycodone insight and told him he needs an option for those patients who complain about being in pain. Gave him the OxyContin confession and titration guide and asked if it makes sense in that situation to prescribe q12 OxyContin? Dr said ok. Nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44106	6/5/2014	Reviewed OxyContin/Butrans PI's, Initiation/Titration, no further info requested at this time, will keep contact info for future reference.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	6/5/2014	Lori the receptionist for dr Azems office told me she thinks they have another patient for Butrans. Lori said the patient has failed vicoden and then was placed on ER morphine and cam in earlier in the week complaining about not being able to tolerate it. Lori said that she gave the patient a Butrans patient information guide and spoke with dr about it. Dr said the patient seems like a good candidate. Dr came up to window and said she heard us talking about it and said she was impressed with Lori being proactive in thinking about Butrans. Dr said she agrees the patient is a good candidate. Lori said the patient has Medicare D and anthem secondary. I told dr I will follow up and reminded her about OxyContin as a good option for those on oxycodone who are either failing due to intolerability or efficacy.
PPLPMDL0020000001	Tallmadge	OH	44278	6/5/2014	Led off discussion with dr about the oxycodone insight and identifying patients appropriate for the q12 oxycodone. I asked dr if he currently has patients who are on products like Percocet who have been on it for more than three months and taking at least 3 pills a day? Dr said many. I asked him what makes him diced to move to OxyContin? Dr said he will usually give patients the choice of moving up a dose of the IR or ER oxycodone. I asked him why he even gives them the option? Dr said he usually won't go more than 4-5 pills of any opioid but will sometimes go from 5mg Percocet to 7.5mg. I asked why not just convert to oxycodone? Dr said he probably should be doing more tof that. I asked why a patient in around the clock pain is kept on a 4-6 hour opioid? Dr said the q12 seems like its the right medicine. Dr said he sometimes doesn't do a 1:1 conversion from Percocet because if the patient is taking 20mg of Percocet and its not working he may start OxyContin at 15mg or 20mg instead of 10mg. Reviewed Butrans nancy profile and asked him if it makes sense to use Butrans at that point. Dr said it does and he has the conversion guide I gave him. Dr said he tries to remember but just can't. I asked dr to just remember the criteria for when a patient may be appropriate. Dr said ok.
PPLPMDL0020000001	Tallmadge	OH	44278	6/5/2014	Led off with discussion about insights oxycodone and hydrocodone. I asked dr when he has a patient uncontrolled on oxycodone like Percocet or they can't tolerate it what does he do? Dr said he usually won't go over 4 pills a day. I asked him how he decides when to move to an ER option or refer. Dr said the same thing as dr Bachtel and said if its a patient he trusts and knows he will treat with an ER opioid. Otherwise he will refer out. I showed hi. The conversions from the MVA and told him the only difference is the delivery system of oxycodone. Dr told me it makes sense and will think about it more because he knows it has abuse deterrent characteristics. Reviewed the nancy profile and told him about patients appropriate for Butrans. I asked dr why he hasn't used it and if it makes sense? Dr said it does he just forgets about it. I gave him the conversion Slide guide and asked if he would keep it with him. Dr said ok.
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PPLPMDL0020000001	Tallmadge	OH	44278	6/5/2014	Short discussion about criteria for using OxyContin and Butrans. Reviewed Maggie profile and asked him if it makes sense to use OxyContin? Dr said it does and said he would have even used it earlier and started around 20-30mg dose. I told dr that's good to hear and showed conversion. I asked him if he can think of a few patients that would also be appropriate for the q12 oxycodone? Dr said he will try to find some. Discussed Butrans nancy profile and asked him what limitations does he see in using it more for patients with a similar profile to nancy? D said he will try to find a place because he does like patches. I asked him to remember tramadol and hydrocodone patients who he is considering a dose adjustment. Dr said ok. Discussed copay cards for both products and insurance coverage.
PPLPMDL0020000001	Euclid	OH	44119	6/5/2014	(Tech Dana moved to FL) met with tech Julie. Left & discussed updates to black box warning OxyContin & Butrans FPLs. Discussed verbatim indication, focusing on "severe" pain. Discussed scheduling & every 12 hours release of oxycodone. Butrans verbatim indication & updates discussed. Discussed section 2.2 to let she & Pharmacist Kathleen know patients may be instructed by their HCP to wear 2 Butrans 5 mcg or two Butrans 10 mcg hr ; but not to exceed 20 mcg hr which is max dose.
PPLPMDL0020000001	Garfield Hts	OH	44125	6/5/2014	Reviewed OxyContin formulary status, every 12hours along with Butrans for those Tramadol failures, Reminded about that 1 patient he had in mind, said he will consider.
PPLPMDL0020000001	Cleveland	OH	44113	6/5/2014	Reviewed OxyContin every 12hours along with Butrans for those patients requiring around the clock analgesia, Said he will keep in mind, has a 2-3 week protocol on IR products and then sends to pain mgmnt if needed
PPLPMDL0020000001	Cleveland	OH	44112	6/6/2014	Quick review of OxyContin every 12hours, savings cards along with Butrans for those patients requiring around the clock analgesia, Said Ok, was behind, Booked appt for next week
PPLPMDL0020000001	Cleveland	OH	44113	6/6/2014	Confirmed CII non Rx, said he will not RX any narcotics , Reminded of OxyContin along with Butrans for those patients requiring around the clock analgesia , Said ok will consider for appropriate patients
PPLPMDL0020000001	Akron	OH	44305	6/6/2014	Quick discussion in his office today. I asked dr if he has patients that are continuing on products like Percocet of hydrocodone? Dr said a few yes. I asked if they are taking them for acute or intermittent pain? Dr said no. They are all chronic. I asked why then are they being continued on short acting products? Dr said some are cost related and others have refused to go on ER products. I told dr that if cost is not a factor,he should set the expectation to the patients about the necessity to be on some type of ER opioid like OxyContin as long as they meet the indication. Dr agreed. I asked for more prescribing and to look for patients needing a dose adjustment on products like hydrocodone and to use Butrans. Reviewed conversions and asked him if he is at all apprehensive in using it? Dr said no. I asked then for him to write in the appropriate patient.
PPLPMDL0020000001	Akron	OH	44319	6/6/2014	I told dr since he is retiring at the end of the month next week is the last opportunity he has to convert patients to OxyContin or Butrans. Dr asked why. I told him he won't have an opportunity to follow up with the patient after next week. Dr said ok. Reviewed conversions of OxyContin and asked why he can't find at least one patient that meets the criteria we have discussed? Dr said he will. I showed him the nancy profile and read over the reasons for appropriate patients to be converted to Butrans. Dr asked about dosing again and asked about cost to Medicare patients? I reviewed the new file card and dr said he's impressed. I asked dr if there is any reason why he won't start a Butrans patient? Dr said he will remember to do it.
PPLPMDL0020000001	Cleveland	OH	44114	6/6/2014	Reviewed Butrans for those Tramadol failures requiring around the clock analgesia, Formulary review, Initiation/Titration along with OxyContin every 12hours, Said he continues to find appropriate patients for Butrans, doesn't RX many CII's but will keep in mind.
PPLPMDL0020000001	Cleveland	OH	44113	6/6/2014	Quick OxyContin reminder every 12hours along with Butrans for those patients requiring around the clock analgesia. Said Ok will consider for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44102	6/6/2014	Reminded of OxyContin Q12 every 12, 7 tablet along with Butrans for those patients requiring around the clock analgesia. Said Ok will consider for appropriate patients
PPLPMDL0020000001	Akron	OH	44319	6/6/2014	Dr said he only had a second. I showed him the OxyContin 10mg page and asked him to identify patients on lower doses of Percocet who are in pain or can't tolerate it and convert them to OxyContin. Dr said ok. Asked him if he knows if the Butrans prescription he wrote recently was pushed through based on a PA needed? Dr said he thinks so but is not sure. Dr told me to check with the office manager. Office manager was in a meeting.
PPLPMDL0020000001	Uniontown	OH	44685	6/6/2014	Told dr to stay focused on patients who tell him they want more IR opioids because of increasing pain. Have him the Butrans nancy profile and asked him to review. Dr said ok nothing else learned.
PPLPMDL0020000001	Stow	OH	44224	6/6/2014	I asked dr if he has used any of his BEP kits? Dr said he doesn't remember what they are. I showed him one of the kits and reminded him. Dr said he has not used them yet. I reminded dr about them and who they are intended for and the up to 550 Amex card. Dr said ok. Asked dr to identify patients who asked for more IR opioid and are still in pain.. Dr said ok.
PPLPMDL0020000001	Akron	OH	44319	6/6/2014	Told dr he needs to be converting patients in pain around the clock taking an IR opioid like Percocet to OxyContin. I showed him the conversions and he told me that again its too expensive. I told him its too bad that cost is such a big issue for him. D said it is. I told him he must not have ANY patients with private prescription insurance. No comment from dr. Reminded him to use more Butrans for tramadol patients needing a dose adjustment.
PPLPMDL0020000001	Barberton	OH	44203	6/6/2014	Discussed act dosing and the doctor said he has patients taking short acting products act that meet the indication for both Butrans and OxyContin. I asked what his hesitation was writing an extended del release product. Dr said managed care and that OxyContin was schedule two. I said what about schedule, he said its more abuseable. I went thru limitations of use and fair balance of abuse potential and respiratory depression. Talked about every 12 hour dosing and the 7 strengths. Dr said he was not yet comfortable writing Butrans. We talked about the opioid. Is e patient. Dosing titration. Covered managed care. Dr said he promise dr o write it but he still needs to get comfortable with the dosing and the managed care coverage. Dr said patients won't take medications that are more ten ten dollars. I focused on commercial plans and our savings cards.
PPLPMDL0020000001	Norton	OH	44203	6/6/2014	No said she doesn't have any interest in writing g OxyContin. I asked why. She said she hunk's those drugs are dangerous. I said what drugs opioids? She said yes. Said so you don't write any hydrocodone or oxycodone products. She said she write them but seldom. She said that dr stokes will start a patient and she may do the refills. We talked about the fair balance of abuse potential and limitations of use. Talked about Butrans dosing and limitation guide. Talked about the molecule being single entity, talked about no dose reduction for elderly or renal impaired patients. Np would not commit to writing Butrans or OxyContin.
PPLPMDL0020000001	Cleveland	OH	44114	6/6/2014	Reviewed OxyContin every 12hours, 7 tablet strengths along with Butrans for those patients requiring around the clock analgesia, Said He continues to see dr.'s patients do well on Butrans.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	6/6/2014	Began discussion with asking dr if he currently has patients coninuing on short acting products that are refilled each month for pain? Dr said he does. I asked him if any of those patients are in pain around the clock pain and how would you explain what around the clock pain is? Dr said around the clock pain is when the patient wakes up at night in pain and the pain firsts activities of daily living. I asked dr if he would ever put a total daily dose of opioid on what around the clock pain is? Dr said he would not. I told dr for us to focus on those patients he just described. Dr said he would classify them as chronic. Examined that he has two viable options for ER opioids when a patient as he explained asks for more opioids due to increasing pain and they are OxyContin and Butrans. Showed dr the conversions of Percocet to OxyContin and told him that OxyContin is oxycodone in a 12 hour delivery system and its a single entity opioid. Dr agreed and said he will try to convert more patients. Described Butrans for patients naive to opioids, need more tramadol or hydrocodone. Discussed nancy profile in depth and explained new MediCare coverage. Dr said he thinks its a great option and said he had a patient yesterday that wanted more tramadol and gave the patient tramadol ER because he didn't want to give more pills and said it would have been a good Butrans candidate. I agreed and just asked him to use it clinically in similar situations.
PPLPMDL0020000001	Cleveland	OH	44109	6/9/2014	Reviewed with Jag Rph) OxyContin Q12h along with Butrans for those appropriate patients requiring around the clock analgesia, Said Ok also left Butrans Patient info booklets to distribute appropriately, Said he will.
PPLPMDL0020000001	Cleveland	OH	44105	6/9/2014	Reviewed OxyContin and Butrans with Hakin RPh, no new info learned
PPLPMDL0020000001	akron	OH	44333	6/9/2014	Reviewed both reasons for conversion to Butrans and OxyContin. Used the nancy profile to discuss the reason to initiate Butrans for an appropriate patient. Focused dr on lack of efficacy of current product, tolerability of current product, patients with difficulty swallowing, and once a week dosing. Dr said he really liked those points and will remember. Discussed nancy profile and asked for business. Discussed that 75% of his Medicare business comes from UHC aarp and silverscript. Reviewed plans from new file card. Discussed Caresource PA as he stated he's seeing more. Discussed his ability to reevaluate patients continuing on Percocet and the appropriateness to converting them in a 1:1 ratio.
PPLPMDL0020000001	Berea	OH	44017	6/9/2014	Asked doctor how he thought about OxyContin as an opti for those appropriate patients. Dr said he thinks for the right patient is a good choice. I highlighted the managed care and coupons. Talked about the experience program for Butrans and highlighted the dosing.
PPLPMDL0020000001	Akron	OH	44313	6/9/2014	Spoke with Tom Lamb and discussed OxyContin doses and appropriate patients. Explained new copay cards and difference with old ones. Tom said they continue to see prescriptions and most patients they see are Medicare. Discussed Medicare plan coverage. I told Tom that the last time I spoke with Jason he said they have about 4-6 patients on Butrans. Tom said that's about right. I showed him the new Medicare flashcard and explained coverages. Tom said hopefully that will increase prescriptions in that population due to lower costs.
PPLPMDL0020000001	Cleveland	OH	44113	6/9/2014	Reviewed OxyContin 7 tablet strengths every 12hours along with Butrans formulary grid and Initiation/Titration, Said Ok will continue to find appropriate patients for Butrans, reiterated no change on CII's.
PPLPMDL0020000001	Westlake	OH	44145	6/9/2014	Talked about dosing every 12 hours with OxyContin for appropriate patient types. And touched on weekly dosing and med d coverage with Butrans"
PPLPMDL0020000001	Berea	OH	44017	6/9/2014	Dr said she will not write schedule products but does like Butrans. Reviewed dosing and coupons.
PPLPMDL0020000001	Fairlawn	OH	44333	6/9/2014	Amanda drs MA got me to see dr at front counter. I told dr that I wanted him to focus on reevaluating his patients continuing on Percocet for possible OxyContin conversion. Dr said ok. I told him that I wanted to stress the Butrans Medicare D coverage and discussed plans. I asked hi. If that will make an impact on his ability to prescribe? Dr said it should. Nothing else learned.
PPLPMDL0020000001	Akron	OH	44333	6/9/2014	I showed dr the OxyContin conversion guide and told him to reassess patients already on oxycodone like Percocet and convert them when they need a dose adjustment. Dr said ok. I asked hi. If he's doing that? Dr said he is. Spoke with Marsha and she told me he has many patients continuing on Percocet who she thinks may be good for OxyContin. I asked her to please impress that on him and reviewed conversions with her. Gave him the nancy profile for Butrans and told him to also convert those patients on hydrocodone who are still in pain and convert them to Butrans. Nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44113	6/9/2014	Discussed Butrans for those patients failing on present therapy requiring around the clock analgesia, Said Ok, Will be leaving practice, last day is Thurs. Will be going back to homecare
PPLPMDL0020000001	Cleveland	OH	44195	6/9/2014	Reviewed OxyContin every 12hours, Savings cards along with Butrans for those patients requiring around the clock analgesia, Reviewed Formulary grid (AARP/Silverscripts) Said she will share info with clinicians. No new info learned
PPLPMDL0020000001	Uniontown	OH	44685	6/9/2014	Told dr at window that I would like him to continue to reevaluate each of his Percocet patients for their appropriateness for q12 oxycodone. I showed him the conversions from Percocet and asked if he will continue? Dr said he will and said that they now have a pain management group affiliated with AGMC. I told him I hard about it. Dr said he's going to try and refer more chronic pain patients to the pain management group. I asked if he feels comfortable enough converting Percocet patients to OxyContin? Dr said it depends on the patient but will do some. I reminded dr about using Butrans for those that fail tramadol and Hydrocodone due to efficacy or safety.
PPLPMDL0020000001	Cleveland Heights	OH	44118	6/9/2014	Window call OxyContin every 12hours, 7 tablet strengths along with Butrans for those patients requiring around the clock analgesia, Said Ok, refers to pain mgmnt, Will keep contact info, no further contact requested at this Quick review of OxyContin formulary grids along with Butrans for those patients requiring around the clock analgesia, Said he continues to prescribe OxyContin for appropriate patients but hasnt prescribed Butrans, asked why? said not sure, no time, No further info learned
PPLPMDL0020000001	Cleveland	OH	44112	6/10/2014	Discussed OxyContin every 12 hours with FDA labelling Tier 1/3 that discusses abuse deterrent properties, for appropriate patients, Along with Butrans for those Tramadol failures requiring around the clock analgesia. Formulary grids, Initiation/Titration. Said she will consider because she is not having success in sending patients to pain mgmnt. Reiterated both products have the same abuse potential as other CII's and CIII's. Asked if she had a patient in mind this afternoon, she responded that maybe not today but later in the week.
PPLPMDL0020000001	Akron	OH	44310	6/10/2014	Last minute lunch appointment and discussed drs current patients on Butrans, Scott profile and reasons for conversion for appropriate patients to Butrans. Medicare D insurance coverage, and patient information sheets. Dr said his patients are doing very well with Butrans and said he has recently titrated a patient from 5mcg to 10mcg. Shar said that she likes the new patient information sheets and was just looking of them yesterday. Dr said that he tends to forget about patients who can't tolerate their current short acting narcotic and will remember that. I asked dr for continued use of Butrans. Discussed OxyContin FDA draft guidance insight and tiers for OxyContin. Dr said he has patients continuing on it and is glad to know the FDA is working hard to help companies make abuse deterrent products. I asked dr to look for patients already on Percocet who may be appropriate for the q12 dosing of oxycodone.
PPLPMDL0020000001	Westlake	OH	44145	6/10/2014	Saw dr at window. Told the doctor I was looking to out a Butrans program together for the westlake area on a Wednesday and I would remind when once I've solidified the details. I asked if he had any hesitations writing a every 12 hour extended release opioid this month. Dr said no. I reenforced his choices to use OxyContin for the appropriate patient type and reminded him to use the coupons. Bonnie he office manager asked about details of managed care. I highlighted a few and discussed coupons of experience program in more detail. She said the dr does hand out the coupons. I asked if the front check out ever double checks when they leave and she said no.

PPLPMDL0020000001	Westlake	OH	44145	6/10/2014	Nurse got me back to see the doctor in the hallway. Discussed the importance of identifying that appropriate pain patient for OxyContin and/or Butrans, highlighted Initiation dosing. And abuse potential. He asked about managed care and if you could supplement with short acting products along with Butrans. I confirmed that answer for both products. Dr said he would keep the information in mind. I suggested he come to a future program, he said it would depend on the day of the week.
PPLPMDL0020000001	Cleveland	OH	44106	6/10/2014	Reviewed OxyContin every 12hours along with Butrans for those Tramadol failures requiring around the clock analgesia. Savings cards, Part D formulary status, said he has a few patients doing well, and will continue to find appropriate patients. Said to book appt to further discuss. Terrah will be back on Mon.
PPLPMDL0020000001	Lakewood	OH	44107	6/10/2014	Discussed dosing of OxyContin and if anything was holding him back from writing it this month in his appropriate patients and asked if there was anything I could do to address any issues or concerns. Dr said he has patients on OxyContin but nominee new in a while. I asked how is he treating patients that need a longer delivery system? Dr said he has been referring out. I highlighted two extended release options and dosing for both OxyContin and Butrans. Dr said hasn't found the right person for Butrans yet. Reviewed the Scott profile and I highlighted the caresource managed care coverage. Dr left for the hospital and didn't stay. Highlighted med d coverage such as aarp and silver scripts.
PPLPMDL0020000001	Akron	OH	44305	6/10/2014	Told dr the insight about tramadol and reviewed the Scott profile. Discussed the reasons for converting an appropriate patient to Butrans from the Scott profile. I asked dr what the preference for once a week dosing might mean to a patient of his in pain on tramadol? Dr said he understands why Butrans would be a good option. I reminded dr again of the new Medicare plan coverage for Butrans and then reviewed it along with Caresource PA criteria with his new secretary Melissa and mrs Vora. I asked dr to also take another look at his patients he is refilling on Percocet and the patients that may be available for q12 dosing.
PPLPMDL0020000001	Cleveland	OH	44107	6/10/2014	Ccf location that does not allow reps to see the doctor and will only take coup s and literature for the doctor. Spoke to the ma at the window and highlighted the product am their scheduling and dosing schedule.
PPLPMDL0020000001	Cleveland	OH	44106	6/10/2014	Reviewed OxyContin/Butrans info/PI's no further info requested, Will keep contact info
PPLPMDL0020000001	Cleveland	OH	44106	6/10/2014	Reviewed with Marge Rph OxyContin and Butrans, no new info learned
PPLPMDL0020000001	Mayfield Heights	OH	44124	6/10/2014	Met w office coordinator Gina, who completes all prior auths for practice. She asked for more OxyContin cards, as she had patient last week that Gina inherited from Dr. Dewes. He lives in Garfield Hts. His Pharmacy: Giant Eagle. Let her know that's not in my territory; but I'm happy to drop off in Garfield Hts.. She stated she would mail card to male patient. She had to complete prior auth for this patient who is covered on CVS Caremark. Told her in future, I don't mind dropping cards off to specific pharmacy. Presented packet of info, including Butrans, OxyContin cards for Dr. Dewes, FPIs, Butrans Med D grid, etc. Left Butrans Med D grid/FPI for all HCP's in practice. Denise really likes the OxyContin patient essentials kits, so I left with Dr. Laham. She will keep a few in her drawer for OxyContin new starts. We went through all 3 items in essentials kit. She was appreciative of Butrans Med D grid, states a grid like this is very helpful to her.
PPLPMDL0020000001	Westlake	OH	44145	6/10/2014	Candy drs wife and rn was upfront. After small talk I highlighted Butrans as scheduling and dosing.
PPLPMDL0020000001	Westlake	OH	44145	6/10/2014	Saw Daniel. Highlighted managed care with both products and dosing. Reviewed coupons
PPLPMDL0020000001	Eucldid	OH	44132	6/10/2014	Spoke with Tracy one of staff pharmacists. Introductory call. Discussed my products, scheduling, patient access. Have call/email intro into PIC = Pharmacist in Charge: George Muhvic. ADDED this account in Phoenix today.
PPLPMDL0020000001	Tallmadge	OH	44278	6/10/2014	Told dr that I want him to keep a few things in mind about Butrans when he's in a room with a patient complaining of being in pain around the clock. Reviewed the Scott profile and the 4 reasons why a patient may be appropriate for conversion to Butrans. Dr said he will think about those things and said he had a patient die last week and said he thought they may have been on Butrans. Dr looked it up on his computer and said the patient was NOT on Butrans. Asked dr for continued use of the product and look for the right criteria for an appropriate candidate. Told dr since he has told me previously that he has patients continuing on Percocet. I asked for conversion to OxyContin where appropriate.
PPLPMDL0020000001	Cleveland	OH	44106	6/10/2014	Reviewed OxyContin and Butrans PI/ Initiation/Titration guides. Dr. said he will keep info and contact if further info requested
PPLPMDL0020000001	Cleveland	OH	44106	6/10/2014	Visited Pain/PMR/ONC depts/OxyContin/Butrans Initiation/Titration guides along with formulary grids, no new info learned
PPLPMDL0020000001	Mayfield Village	OH	44143	6/10/2014	Met with med asst at front desk. Discussed both my products as options for daily, atc, pain. Discussed OxyContin scheduling and every 12 hr dosing. Discussed formulary status & patient savings. Discussed Butrans scheduling, 4 strengths, trial, savings card and. 1x week or 4x month transdermal delivery.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	6/10/2014	Spoke with dr Azem and Darlene about the patient who just received Butrans last week after failing two products. Dr said the patient was able to get Butrans the same day and had no issues with cost or PA. Dr said she has been very pleased with how easily her patients are able to get Butrans. I reviewed the new aarp and Caremark silverscript plans with flashcard and Darlene it will make her job much easier knowing that these plans are now preferred. Reminded dr that OxyContin is a good choice for patients already on oxycodone who need a dose adjustment. Dr said ok but doesn't have many patients on Percocet.
PPLPMDL0020000001	Olmsted Falls	OH	44138	6/10/2014	Discussed dosing options with both OxyContin and Butrans. Highlighted the scheduling and abuse potential risks. Asked what happens if a patient tries to fill an OxyContin or Butrans and has insurance card. He said he might have the. Return the next day to check Ors if they are a new patient. Discussed patch placement of Butrans.
PPLPMDL0020000001	Lakewood	OH	44107	6/10/2014	Dr said no one wants to be given OxyContin because of the name stigma. Dr said it was still a very good pain medication and dr asked me how it was re formulated. I gave him the reformulation and updated label marketing piece. We talked mostly about what it means to have atc pain. Dr agreed that he should consider Butrans as a first line opioid for atc pain. I talked fair balance abuse potential. And talked about the dose reductions for the elderly and renal impaired patient via the OxyContin fpi. Talked about single entity and what types of patients he has that would use an opioid that was single entity. We talked about Butrans caresource coverage and dosing.dr said he will refer to dr douaud at the ccf and dr chan at ccf. Dr said he will keep our products in mind.
PPLPMDL0020000001	Stow	OH	44224	6/10/2014	Dr told me she wanted the 10 second version. I told her to write more OxyContin for her continuing Percocet patients who may need a dose adjustment and Butrans for those who are failing tramadol or Norco due to efficacy or tolerability. I showed her the placebo Butrans patch and asked for her to try it. Dr said ok and well done.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/10/2014	I began conversation by giving him the oxycodone insight. I then asked him if he can remember when the last time a patient asked him for OxyContin? Dr said he can't remember. I asked him what his patients do ask for when it comes to pain. Dr said he doesn't see too many patients for chronic pain but he hears about vicoden and Percocet. I asked him why it's ok for patients to get Percocet but not OxyContin? Dr said it's probably the name for him and his patients. Reviewed tiers for OxyContin and FDA draft guidance insight. I asked him to consider just one patient to convert from Percocet. Dr said ok. Told him to not forget about Butrans the schedule 3 7 day transdermal patch. Dr said he will. Nothing else learned.
PPLPMDL0020000001	Mayfield Village	OH	44143	6/10/2014	Quick 10 seconds as dr krishnan leaving for day. I want to leave you with this question and will follow up next time: how to you define around the clock pain? and does Butrans make sense when you determine a patient is presenting with ATC pain? Ok says dr.
PPLPMDL0020000001	Mayfield Hts	OH	44124	6/10/2014	Quick hallway. Med D Baby Boomers insight. Wow, that's a lot of people replied Dr. Laham. Exactly, and your patients will need access to certain branded products; especially ER opioids. Showed Butrans Med D grid: great information stated Dr.Laham. Asked Dr today and through the week, keep Butrans top of mind with 65 and over population - before Tramadol or after Tramadol. Discussed OxyContin for patients who can't tolerate a transdermal, you've got OxyContin which is every 12 hour release of Oxycodone; same Med D access as Butrans. Avoid: Wellpoint, Humana, Coventry/Advantra Rx. Dr states it's important to him to know where we aren't covered as well. Makes things easier for him.
PPLPMDL0020000001	C. Falls	OH	44223	6/10/2014	Spoke with Denise and Catherine about OxyContin prescriptions they are seeing from the hospital and outside of pain management. Catherine said they stock all 7 doses and tend to see most from dr Ali and sable. I discussed conversions and patients appropriate for the q12 dosing of oxycodone. Denise said that she is continuing To see Butrans from Chonko. I askd if they are new and she said she filled a new one last week. I discussed the new Medicare coverage for Butrans and the Cathy profile. Catherine said they have all doses of Butrans and are seeing more prescriptions recently.
PPLPMDL0020000001	Highland Heights	OH	44143	6/10/2014	Lunch. Total office call. Discussed Percocet patients on 2-4 Percocet prn. Asked dr to re assess those patients, and consider OxyContin delivery of oxycodone every 12 hrs. If patients want to add aap - they can do so. One of his med assts asked for OxyContin cards, as they were all out, make patient coming back in to pick up. Told them next time they can call me & I'd be happy to drop at patients pharmacy. Updated on Medicaid, BWC, Commercial, Med D. Dr will keep in mind & agreed to keep closer eye on Percocet refills. Butrans, discussed Scott profile. Dr brought up AE at this time, told him I would need to report. Several patients complaining of skin irritation, rash at Butrans sites. Discussed since every patient is different, for those patients that tolerate Butrans, will he today & this week, continue to use Butrans after Tramadol? Yes responded dr - I love Butrans he stated. Updated med assts on Butrans formulary status. Left Butrans Med D Grid. Made med assts aware of July UHC prior auth requirement for all oral opioids.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/10/2014	Spoke with Glenn in the pain management center and discussed the OxyContin prescriptions from Ali and sable. Glenn said they are the two along with Kim kaineck who are using it the most. I asked if he is doing as many PAs for it as Butrans? Glenn said they do a fair amount because insurance doesn't want to pay for branded ER opioids. Glenn said the get most through insurance and that Tara helps him a lot with that. I asked if he has had any denials for Butrans recently and if he has any for me? Glenn said they have had good success recently and doesn't nizo he has any because Tara is able to get most through. I discussed the new Medicare coverage for Butrans and Glenn said they are seeing a few go through without a problem.
PPLPMDL0020000001	Akron	OH	44312	6/11/2014	Discussion in his office about taking the extra second while in an exam room to identify a patient for OxyContin and Butrans. I asked dr if he knows what to look for from a patient that would make them suitable for either OxyContin or Butrans? Dr said he knows. I asked him what they are? Dr said OxyContin for Percocet patients needing a long acting opioid, Butrans for patients taking or wanting more than 3 pills a day. I told dr to focus on patients like Scott and reviewed the profile. Dr said he will do it.
PPLPMDL0020000001	Cleveland	OH	44195	6/11/2014	Quick OxyContin reminder 7 tablet strengths, savings cards, Said ok will continue to prescribe for appropriate patients, no further info learned
PPLPMDL0020000001	Cleveland	OH	44195	6/11/2014	Reviewed OxyContin and Butrans for those patients requiring around the clock analgesia,Formulary grids, Said Ok will continue for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44195	6/11/2014	Reviewed OxyContin 7 tablet strengths,Savings cards and formulary grids along with Butrans for those patients requiring around the clock analgesia, Initiation/Titration and savings cards. Said she will continue to prescribe for appropriate patients, Will be speaking in Las Vegas in Sept on Buprenorphine, Inquired about Butrans CCF formulary status
PPLPMDL0020000001	Cleveland	OH	44195	6/11/2014	Reviewed OxyContin every 12hours, 7 tablet strengths, Formulary/Savings cards along with Butrans for those patients requiring around the clock analgesia, Said he will continue to support for appropriate patients, He will be leaving Tausig Palliative Med Team and be heading the Ctr of Neurological Ctr of Pain. Asked to follow up with appt request when transitioned
PPLPMDL0020000001	Cleveland	OH	44118	6/11/2014	Reminded of OxyContin every 12hours along with Butrans for those patients requiring around the clock analgesia, Savings Cards and Formulary grids, Said ok will consider for appropriate patients
PPLPMDL0020000001	Akron	OH	44320	6/11/2014	Dr told me she didn't have time to talk so I asked her to just please write an OxyContin prescription and to remember to start Butrans when she knows the patient is in pain around the clock and told her we have discussed what that means to her. Nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44195	6/11/2014	Reviewed OxyContin and Butrans with Dept. (Goforth, Peralia, Faiman, Savings Cards and Formulary grids
PPLPMDL0020000001	Westlake	OH	44145	6/11/2014	spoke to virgina the RN in charge for Dr. Raslan. She said its hard to see the doctor, so wouldn't let me. we talked about butrans and its scheduling, also talked about the oxycodone molecule and delivery system of Oxycontin. She told me to see if maybe when he is in lakewood once a month that i can come in the morning to bring a snack of some sort.
PPLPMDL0020000001	Westlake	OH	44145	6/11/2014	Reminded on that percocet patient who is currently on short acting but needs the option for atc pain coverage and meets the indication for Oxycontin. Discussed using the coupons for commercial insured. Reminded of the caresource coverage for Butrans and the dosing.
PPLPMDL0020000001	Lakewood	OH	44107	6/11/2014	Talked about the molecule of Oxycontin and asked him if a patient were on percocet but needed an extended release product if Oxycontin was the next choice. Dr said yes yet he said managed care wants them to write other things before Oxycontin. Highlighted commercial plans for both Oxycontin and Butrans. I asked why he was so hesitant to write butrans. He said he just doesn't want to write another new opioid. I said I understood and that its really about the right patient and the right option for them. I said to keep in mind- Butrans is schedule 3 and dosed weekly started at 5mg or 10mcg depending what they were on before. he said ok and walked away.



PPLPMDL0020000001	Akron	OH	44312	6/11/2014	Told dr that I want him to take an extra second with his parents complaining of pain around the clock to find out if OxyContin or Butrans would be a variable option. Dr said he's trying and knows he needs to nick of Butrans for his patients on ultram and OxyContin for those he's not willing to refer to pain management. I told him to focus on patients whom are already on an IR opioid like Percocet. Dr said ok. I gave him the Scott profile and the OxyContin conversion guide.
	Mayfield Heights	OH	44124	6/11/2014	Breakfast. Although Dr. is cardiovascular dr, he states he writes for pain once in a while. He asked if he can still write on his own or if he needs to refer patient to pain specialist. I replied as long as he continues with his DEA license to write scheduled products, he's ok. There are other things he must incorporate such as OARRS, urine screens, etc. I left and discussed Med 80 guidelines and OARRS flashcard. Also discussed around the clock pain, lowest effective dose and OxyContin every 12 hours dosing and Butrans, buprenorphine, 1x week transdermal, 7 days of buprenorphine release. CIII. 8 application sites, 20 mcg hr max dose. Black box warning discussed both products. Dr thanked me for information and stated very helpful to him moving forward.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	6/11/2014	Spoke with Dale the pharmacist and Sean the tech. Discussed Butrans and the Scott profile. I asked dale about his knowledge and dispensing of the product. Sean told me that they had a prescription in on Monday who needed to have the 10mcg filled and they didn't have it in stock. Sean said the ordered it and got 4 boxes of the 10mcg in yesterday. I asked if the patient has picked it up yet and dale said he has not. I explained the conversion guide for Butrans and appropriate starting dose and titration. Dale asked about using opioids for breakthrough. I explained the use of opioids and non opioid analgesics for breakthrough pain. Discussed OxyContin doses and asked about dispensing. Dale said most are from pain management but do not see many new prescriptions. Finished by reviewing copy cards for both products.
PPLPMDL0020000001	CLEVELAND	OH	44195	6/11/2014	Reminded John RPH of OxyContin/Butrans, Initiation/Titration, formulary grids and savings Cards, no new info learned
PPLPMDL0020000001	Mayfield Heights	OH	44124	6/11/2014	Breakfast. Asked Dr what her definition of ATC pain is? She replied when patients continue to complain and request refills at each visit? Discussed re assessing those patients on IR opioids such as Percocet, who keep complaining. If we provided an ER opioid such as OxyContin every 12 hours, earlier, might that help prevent continued complaining from patients? Does this make sense? Yes, I see what your'e saying stated doctor. Discussed START principles. If patients request an IR opioid or non opioid for "breakthrough" pain, that's at your discretion. Showed how to write, when she titrates in order - dose increase is 25-50%. Reminded of \$70 cards. She asked about Medicaid? Medicaid with prior auth discussed. Also BWC, Med D, Commercial. Butrans - discussed Pam profile as a patient who would be appropriate for 5 mcg hr Butrans or 10 mg OxyContin. Discussed clinical trials for elderly both products. Dr asked: what do I screen for? I responded buprenorphine and left her urine screen flashcard. Showed Butrans demo patch. She appreciated information. Kept checking in, does this make sense? Dr asked about skin irritation, replied with data from clinical trials for Butrans. She was satisfied with data. Showed section 2.2 of Butrans FPI, can call/fax into patients. this could save you and staff time. Dr agreed. Left urine screen card, OARRS flashcard and Med D updates with Debbie who completes 90% of the practice prior auths.
PPLPMDL0020000001	Mayfield Heights	OH	44124	6/11/2014	Breakfast. (note: Dr leaving 6/24 for about 1 month out of country) Found out that her definition of ATC is same as dr Chteingardt. It's not based on Number of IR opioids a patient is taking; it's the constant complaining and asking for refills. To help resolve this, asked her to consider conversion to different delivery system, same molecule, just dosed every 12 hours with OxyContin. this made sense to her she says. Discussed START principles and Pam profile. This is patient who could be started on OxyContin 10 mg or Butrans which we will discuss next. Discussed clinical studies for Med D or patients over age 65. Transitioned to Butrans. Pam is someone who is opioid naive and would be started at 5 mcg hr. Patients like Pam in our clinical trials, were able to tolerate, and be titrated on Butrans if necessary. Discussed renal and hepatic dosing per FPI. Discussed screening for buprenorphine. Updated on Med D status. Discussed UHC Commercial prior auth requirement starting July 1 with Debbie, who handles 90% of the prior auth s for their practice. Asked Dr to keep both my products in mind for patients with ATC pain. She will keep in mind.
PPLPMDL0020000001	Lakewood	OH	44107	6/11/2014	Discussed the patient type currently on Percocet and the conversion to Oxycontin every 12 hours. Gave fair balance of abuse potential. highlighted the coupons for Oxycontin and Butrans. Talked about dosing Butrans and using coupons.
PPLPMDL0020000001	Westlake	OH	44145	6/11/2014	Discussed how they handle opioids being dispensed at their location. Pharmacist said they usually will check on a new patient but not if its a refill patient. Hilighted abuse potential of Oxycontin and Butrans. Reviewed dosing and scheduling.
PPLPMDL0020000001	Westlake	OH	44145	6/11/2014	reminded of the 12 hour dosing with Oxycontin, but if he felt they would do better and were appropriate for a product dosed weekly he has the option of Butrans and both products have coupons for commercial insured
PPLPMDL0020000001	Stow	OH	44224	6/11/2014	Spoke with both dr Fouad and Dr Wynne in stow about UHC PA effective July for all ER opioids. Dr Fouad said its already difficult and this just makes it more frustrating. I told him that I'm telling him so he can tell his patients so they are not surprised when the time comes. I asked dr to continue to identify the patients who are appropriate for conversion to OxyContin like those who are already on oxycodone. I asked him to not g against the grain with another molecule for a schedule 2 opioid. Dr said he really likes what OxyContin offers. I asked him to tell me a couple of things that he likes? Dr said it works, its tolerable, its abuse deterrent and likes the dosing. I told hi. That's great to hear. Reminded him to also continue identifying the patients on tramadol or Norco who need a dose adjustment and give them Butrans.
PPLPMDL0020000001	Akron	OH	44333	6/11/2014	Quick call and asked dr identify patients under Medicare age for Butrans who come to him continuing on Norco who plain about being in pain around the clock and who are NOT candidates for injection or another type of intervention. Dr said he has one on Monday who was 55 and failing Norco. Dr said he started on Butrans 10mcg. Asked dr to also continue using OxyContin for those already on the molecule and would be appropriate for the q12 dosing.
PPLPMDL0020000001	Uniontown	OH	44685	6/11/2014	Told dr about the UHC pa coming in July for all ER opioids. Dr said that stinks and hopes that many of their patients don't have to go through that. Dr said that the stow office doses all their own prior authorizations now and its going to make things even more difficult. I told her I understand and told her to reach out if she has questions. Reminded her to identify the right patients for OxyContin and Butrans. Dr said she has had to take on many of dr Balters patients and is writing a lot of OxyContin. Dr said she needs to keep Butrans in mind. Told her to look for Norco patients who complain of pain and gave her the Medicare D formulary grid.
PPLPMDL0020000001	Cleveland	OH	44127	6/12/2014	Reviewed OxyContin every 12hours, 7 tablet strengths, FDA approved Tier 1/3 labeling that describes abuse deterrent characteristics, along with Butrans for those patients requiring around the clock analgesia, Said he just had Geneva handle the PA for a patient, reminded of Initiation/Titration, and will continue to look for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44113	6/12/2014	Reviewed OxyContin every 12hours, 7tablet strengths along with Butrans Formulary grids, said he will continue to prescribe for appropriate patients, no new info learned
PPLPMDL0020000001	Cleveland	OH	44115	6/12/2014	Quick reminder.saw dr. in hospital. OxyContin every 12hours along with Butrans for those patients requiring around the clock analgesia, Said he will look for appropriate patients, will be out of the country for the next couple of weeks
PPLPMDL0020000001	Westlake	OH	44145	6/12/2014	discussed updated managed care grids with daniel. i asked her if she uses these items, she said not but will pass to the doctor. Highlighted the scheduling of each product and dosing.
PPLPMDL0020000001	North Olmsted	OH	44070	6/12/2014	Talked about ATC dosing and asked the pharmacist why prescribers dose a short acting product ATC instead of going to an extended release product? she didn't know. Reviewed dosing and delivery system of both products. and went over butrans patch placement.
PPLPMDL0020000001	Westlake	OH	44145	6/12/2014	Missed the doctor, but the nurses were still there. We talked about oxycontin and butrans managed care and i reminded them about the experience kits for butrans.
PPLPMDL0020000001	Olmsted	OH	44138	6/12/2014	Tracey the office manager and i discussed the savings cards for my products and reviewed the dosing and scheduling. Gave fair balance.
PPLPMDL0020000001	Cleveland	OH	44195	6/12/2014	Reviewed OxyContin/Butrans PI's and Initiation/Titration guides, no further info requested at this time, will keep contact info, email request for appts<font color=blue><b>CHUDAKOB's query on 06/19/2014</b></font>was this one of your appointment requests that responded yes?<font color=green><b>GUTKOMA's response on 06/21/2014</b></font>No,not this time, This response was a result of leaving product info and requesting appt thru admin(Teresa).<font color=blue><b>CHUDAKOB added notes on 06/23/2014</b></font>Great. It looks like all avenues are paying some dividends!
PPLPMDL0020000001	Cleveland	OH	44115	6/12/2014	Visited Pain dept(Nickels)OxyContin/Butrans Initiation Titration along with Formulary grids
PPLPMDL0020000001	Cleveland	OH	44127	6/12/2014	Review with Geneva OxyContin every 12hours along with Butrans for those patients requiring around the clock analgesia, Said She will remind Dr. and continue to assist on PA
PPLPMDL0020000001	Westlake	OH	44145	6/12/2014	I asked the doctor if he tried any oxycontin or butrans this month? He said no new patients. I asked him what was the biggest hurdle for writing the products this month? Dr said he hasn't seen the right patient. We talked about the limitations and abuse potential. And covered the indication and dosing with delivery system. highlighted the opiod naive trial and the inclusion criteria and focused on tramadol and norco and when the patient needs ATC pain relief to think of Butrans as an options schedule 3. Dr said ok
PPLPMDL0020000001	Westlake	OH	44145	6/12/2014	Reminded the doctor of the managed care advantages and asked him if managed care was not a concern would you write butrans more. Dr said yes. with the coverage i have, i would think you would write it more often. Reviewed the dosing and scheduling. I asked if he could keep Butrans in mind this month for his patients with ATC that need a different option. Dr said sure.
PPLPMDL0020000001	Cleveland	OH	44102	6/13/2014	Reviewed OxyContin every 12hours, savings cards along with Butrans for those patients requiring around the clock analgesia said he will consider for appropriate patients. Also reviewed Butrans Formulary grid
PPLPMDL0020000001	Cleveland	OH	44113	6/13/2014	Reviewed Butrans for those patients requiring around the clock analgesia, along with OxyContin every 12hours, said he will consider for appropriate patients and talk with clinicians.
PPLPMDL0020000001	Cleveland	OH	44113	6/13/2014	Discussed OxyContin every 12hours, recognized by the FDA as having abuse deterrent Characteristics, 7 tablet strengths, Along with Butrans for those patients requiring around the clock analgesia, Formulary coverage and Savings cards. Said she will consider for appropriate patients, said she likes Butrans, Asked why she isn't prescribing more, said not really sure, trying to prescribe less of everything, but will keep in mind especially with recent formulary wins.
PPLPMDL0020000001	Berea	OH	44017	6/13/2014	Talked about dosing Nd scheduling and using the coupons
PPLPMDL0020000001	Cleveland	OH	44113	6/13/2014	Visited Pain mgmnt dept (Shen,Novak) reviewed OxyContin/Butrans
PPLPMDL0020000001	Cleveland	OH	44113	6/13/2014	Visited New CCF Pharmacy on 2nd floor (left OxyContin/Butrans info for Jeff/Mike)R
PPLPMDL0020000001	Fairview Park	OH	44126	6/13/2014	Basic discussion on dosing of products and managed care and coupons. Spoke to head nurse.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/13/2014	Spoke with Glenn the staff pharmacist and Tara about the UHC PA effective July 1. Discussed why UHC is requiring it and it excludes Butrans. Explained Optum Rx as PBM and they can get the pa form there. Glenn said they use cover my meds and they can get it there. Glenn said its good that it excludes Butrans and asked why? I told him I didn't know and he said they will switch there patients to Butrans. He laughed and Tara said thanks for letting them know especially for OxyContin. I told them its for ALL ER/LA opioids and they will only need to complete it once for a year.
PPLPMDL0020000001	Cleveland	OH	44113	6/13/2014	Quick review of Butrans for those patients requiring around the clock analgesia along with OxyContin every 12hours, Said ok now new info learned, Asked Judy RN for lunch appt cancellations,
PPLPMDL0020000001	Cleveland	OH	44113	6/13/2014	Quick OxyContin reminder, every 12hours, 7 tablet strengths along with Butrans for those patients requiring around the clock analgesia said Ok, asked to talk with Essa on PA and formulary info,
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/13/2014	Caught dr in hallway after speaking with Glenn. I told him I just want to make sure he is continuing to have success with finding candidates for Butrans and OxyContin? Dr said he likes Butrans and doesn't use much OxyContin. I asked dr to please look for patients needing a dose adjustment on Norco for Butrans and an adjustment on Percocet for OxyContin. Dr said ok.
PPLPMDL0020000001	Hudson	OH	44236	6/13/2014	Spoke with dr about using OxyContin just once for a patient already on oxycodone. I told dr about the oxycodone insight and asked if he could identify just one patient whom he wouldn't refer to pain management and would meet the indication for q12 dosing? Dr said he will try. I asked dr to at least try Butrans because he said he would and that was a month ago. Dr said ok and said he will try it.
PPLPMDL0020000001	akron	OH	44333	6/16/2014	I showed dr the Scott profile for Butrans and told him to remember 2 things about appropriate patient selection. One is to use Butrans when efficacy with their current medications like tramadol and Percocet provide insufficient analgesia and two for those same patients who can't tolerate those medicines. I told dr if he sticks to those two things it will help him identify the right patients. I asked him to also not hesitate to use OxyContin for those already on oxycodone like Percocet. Dr said ok and thanked me for the reminders.
PPLPMDL0020000001	Brooklyn	OH	44144	6/16/2014	Reminded of OxyContin every 12hours,formulary grids along with Butrans for those patients requiring around the clock analgesia, UHC/AARP and Silverscripts formulary status, Said Ok, Asked for that 1 appropriate patient. Said he will consider, nothing new learned
PPLPMDL0020000001	Cleveland Hts	OH	44118	6/16/2014	Discussed Butrans for those Tramadol failures requiring around the clock analgesia, Med D formulary update along with OxyContin every 12hours, Said he will continue to find appropriate patients, Book appt w/Chi to further discuss



	Akron	OH	44312	6/16/2014	Led off discussion about the OxyContin insight and asked him if he has any of those patients in his practice? Dr said he does and set up a hypothetical patient in to see him wanting OxyContin. I asked dr when the last time he had a patient asking for OxyContin? Dr said he's not sure. I told him I'm guessing its been a long time. Dr agreed. I asked him why it's ok to write and refill IR oxycodone but not the ER oxycodone? Dr said because when he writes ER products all it does is crate problems. I asked if he has problems with patients continuing to get IR products? Dr said some yes. I told dr he's going to have to get over IR vs ER and he has to at least provide the ER oxycodone option for patients needing dose adjustment on the IR oxycodone. Dr said ok. Discussed Butrans appropriate patient types, Scott profile along with Kathy profile. I asked dr what his hang up is with Butrans? Dr said he doesn't have one. I asked him why he's not writing it because he admitted having patients like Scott and Kathy? Dr said ok and he will try. Discussed new Medicare and coverage and how important the Medicare business is to his practice.
PPLPMDL0020000001					
PPLPMDL0020000001	Westlake	OH	44145	6/16/2014	Spoke to office manager and dr took vacation week. Talked about Butrans and OxyContin. Reviewed in detail atc therapy dosing and managed care.
PPLPMDL0020000001	Brooklyn	OH	44144	6/16/2014	Reviewed with Beverly OxyContin/Butrans savings cards and Med D formulary updates, Said she will relay to Rph's
	Akron	OH	44333	6/16/2014	Quick hello in hallway while talking with Linda about UHC PA. Dana said she write a Butrans prescription recently and said the patient was happy to hear about a pain medicine that's not a pill. Dana said that it was an older patient that didn't want more pills and had bad low back. I told Dana that's good news and I'm glad she chose Butrans. I asked for continued prescribing and asked her to also remember to use OxyContin when a patient is in pain on Percocet. Dana said thanks and she will.
PPLPMDL0020000001					
PPLPMDL0020000001	Cleveland	OH	44195	6/16/2014	Visited Dept. ( Uncovered Dr. M.Kalaycio is Chair of the Tausig Ctr.) Left OxyContin/Butrans initiation/Titration guides and requested appt
PPLPMDL0020000001	Cleveland	OH	44195	6/16/2014	Visited CCF IM dept (Mehta,Mayer,Hull) OxyContin/Butrans initiation/Titration guides along with formulary grid.
	Fairlawn	OH	44333	6/16/2014	I asked Kathy who is dr Mell's secretary to speak with dr for a second. Kathy said he has a minute before his next patient. I handed dr the OxyContin conversion and titration guide and asked him what his thoughts are on who is appropriate for OxyContin. Dr said while looking at the conversions from Percocet that it makes the most sense to start there. I told him I'm glad to hear that and asked him if he can think of any patients on his schedule this week that may not b controlled or can't tolerate the Percocet? Dr said possibly and he will look. I handed him the Scott profile for Butrans and told him that to a product that may be appropriate for patients like Scott and reviewed profile. Dr said he has used it once. I asked if the patient is still on it? Dr said he thinks so. I asked him if he will write more for patients like Scott? Dr said he will keep it on his desk to help him remember it.<font color=blue><b>CHUDAKOB added notes on 07/04/2014</b></font>You can't see him if you don't ask! You did! Nice job!!!
PPLPMDL0020000001					
PPLPMDL0020000001	Cleveland	OH	44195	6/16/2014	Reviewed OxyContin/Butrans P's and Initiation/Titration guides, no further contact requested, Will keep contact info for future reference
	Akron	OH	44312	6/16/2014	Led off discussion with dr about the oxycodone insight and asked him if he's concerned with that statistic? Dr said he is concerned because he sees it in his practice. Dr said he had a patient just this morning demand IV dialuadid and said its right to be given what she desires. Dr said he told her no way and the patient said she will go somewhere else. Dr said he hoed she did because he doesn't like treating chronic pain because the patients are crazy. I told him to initiate ER opioids sooner in patients that are appropriate. Told dr they are appropriate when they meets the indication and are failing their current therapy and been non it for at least three months. Dr said he agrees and said OxyContin is off the table for him but will work hard to write more Butrans. Discussed Butrans patient types, dosing,when to initiate and why,titration and use of products for breakthrough pain. Dr said he will try to look for a few ultram patients and has a couple in mind that we motivated and on the starlight and narrow and trusts them, Quick hit thru window, reminded of OxyContin every 12hours, Butrans formulary Part D update along with Patient info booklets, Said Ok will keep it in mind. Left appt request with Audrey to further discuss
PPLPMDL0020000001	Brooklyn	OH	44144	6/16/2014	I told dr that I wanted to follow up quickly from our discussion over lunch last week. I asked him if he has patients on OxyContin currently? Dr said he does. I asked him if their pain is controlled? Dr said they are but some use Percocet for breakthrough. I asked if the patients know to dose it at 8am and 8pm? Dr sad he thinks so. I asked him if he would identify just one patient this week on Percocet who would meet the indication for OxyContin? Dr said ok. Told dr to keep two things in mind for Butrans. Lack of efficacy on products like tramadol or Norco and intolerance on those products. Dr asked if he can use Butrans for his Percocet failures? I told him he can and showed him the conversions but asked why he wouldn't just convert those to OxyContin? Dr said he just wants the option.
PPLPMDL0020000001	Brooklyn	OH	44144	6/16/2014	Discussed OxyContin every 12hours along with Butrans for those patients failing on present therapy requiring around the clock analgesia, Said he is sending patients to Pain mgmnt if ER are needed, Practice is declining but will keep in mind
PPLPMDL0020000001	Akron	OH	44312	6/16/2014	Led off discussion with oxycodone insight and asked him if it concerns him? Dr said it does. Asked him to please set expectations with his patients on how the management of their pain is going to be early on as a patient. I told dr that if he doesn't at least offer an ER option and make them understand how it might be appropriate than he will continue to have the same complaints about his patients in chronic pain which is they are a pain! Dr agreed he needs to do that and some do complain of cost and it may not be an option. I agreed that it may not fit everyone's financial needs. Dr said he has had varying success with OxyContin and Butrans. Dr said he feels more comfortable using Butrans because its a patch and the dosing is low. Dr said he knows its tough to get a patient into pain management and it make take up to 3-4 months. Dr said he will try to look for patients like Scott and Kathy ore often and try to convert patients on Percocet to OxyContin not in if necessary due to efficacy or pill count. I asked dr to continue prescribing.
PPLPMDL0020000001					
PPLPMDL0020000001	Cleveland	OH	44125	6/17/2014	Reviewed with Emily RPH OxyContin every 12hours along with Butrans for those patients requiring around the clock analgesia, Said ok, Requested OxyContin savings cards
	Akron	OH	44310	6/17/2014	Spoke with dr about continuing to identify patients for Butrans like Scott and Kathy. Reviewed profiles with him. Dr said its crazy in some cases to get branded opioids approved through insurance and said he had a patient on Exalgo for about a year and insurance said they won't approve it anymore and wanted him to give the patient dialuadid. Discussed the UHC commercial plan PA with Shar and dr and that it excluded Butrans. Dr said its ok because he just tends to refill a few patients on OxyContin and doesn't write new. I asked him to convert the appropriate patients to OxyContin from IR oxycodone.
PPLPMDL0020000001	Westlake	OH	44145	6/17/2014	Gave the doctor the EX primary care insight. Dr said she just doesn't see much chronic pain. I said i bet those doctors thought the same thing huh, she smiled. I said doctor i bet i could come up with ten doctors this year that would be appropriate for either oxycotin or butrans. But i really just want you to focus on one. The right one. Dr said she tried to write butrans a while back on med d plans but they got rejected and she got discouraged and stopped trying to write it. I said that can be frustrating. I said but how many times a day do you write for something that gets rejected. She said often. I said you can't let one or two times of writing something stop you from writing it all together. I said you wrote for what purpose. The doctor said she wanted to give someone weekly dosing. I said ok you like the dosing of Butrans and you thought that you patient might too. So try it again. Provided a high overview of the aarp and silver scripts coverage, caresource and the coupons for commercial patients. covered dosing and starting dose. Reminded of the oupons for commercial insured.<font color=blue><b>CHUDAKOB's query on 07/08/2014</b></font>is this what you really said? "I said doctor i bet i could come up with ten doctors this year that would be appropriate for either oxycotin or butrans"<font color=green><b>BARTOLI's response on 07/09/2014</b></font> did not mean that I was wagering. I meant I wanted her to try for one appropriate patient type like we discussed and to not let one managed care rejection stop her from writing the products for future appropriate patients that may be appropriate for the product.<font color=blue><b>CHUDAKOB closed the query on 07/10/2014</b></font>
PPLPMDL0020000001					
PPLPMDL0020000001	Cleveland	OH	44114	6/17/2014	Reviewed Butrans for those patients failing on present therapy requiring around the clock analgesia along with OxyContin every 12hours. Said Ok will continue to prescribe for appropriate patients
	Rocky River	OH	44116	6/17/2014	Using the George Oxycontin profile discussed the type of patient he thinks of Oxycontin? Dr said the patients that need a twice a day medication dosed every 12 hours. I said thats great. I asked him if he has patients on the opioid naive dose 10mg and he said he does. He also Told me he has utilized many of the different doses and he find the product to work very well. We discussed the molecule and the delivery system. Dr said he hasn't written a new script in a long time because he doesn't have any chronic pain patients any more. I said i bet we could come up with a few appropriate patient types today, dr said what do you mean. I said lets talk what you consider to be atc dosing a day. Dr said at least three pills a day. I said whats the purpose of dosing at three different increments during thay instead of taking all three at one time. Dr said the short acting products don't last very long but they need the pain relif during the day. I said what about the night? He said of course. I said if you dose 3 x a day and schedule it, aren't you missing 12hours? He said yes. I said wouldn't an extended release product like Butrans or OxyContin be appropriate in this case, as long as its not an acute situation and the pain is severe enough to require an opioid in the first place. Discussed Butrans dosing and conversion guide. Gave fair balance to
PPLPMDL0020000001					
PPLPMDL0020000001	University Hts	OH	44118	6/17/2014	Reviewed OxyContin every 12hours along with Butrans for those patients requiring around the clock analgesia that are failing on present therapy, Said he will continue to consider for appropriate patients, Quick review of Med D formulary, booked lunch to further discuss
PPLPMDL0020000001	Garfield Hts	OH	44125	6/17/2014	Quick OxyContin review every 12hours along with Butrans for those patients requiring around the clock analgesia who are failing on current therapy, Savings cards and formulary Med D update. Said ok will continue to prescribe for appropriate patients
PPLPMDL0020000001	Garfield Hts	OH	44125	6/17/2014	Visited Pain mgmnt (Abraham, Dalbir) OxyContin/Butrans Initiation guides, Along with IM(Kohler,Bogar,Morocco etc)
PPLPMDL0020000001	Rocky River	OH	44116	6/17/2014	Floater today. I asked pricing information on generic percocet and asked if they saw many scripts for the product. they said not too many but wouldn't tell me who. they also didn't tell me exact price but said it was cheap around ten dollars or so. Talked about the molecule and talked about OxyContin and the dosing and single entity. Also highlighted where to place the butrans patch and the coupons.
PPLPMDL0020000001	Rocky River	OH	44116	6/17/2014	Spoke to Carol the nurse and she told me that the doctor don't write much of my types of products and she doubts the doctor will have time to see me, ever. I highlighted the dosing and delivery system of both oxycotin and butrans. I even ponted out butrans schedule 3. the nurse told me to leave information and the dr would call if they wanted to know more about it.
	Cuyahoga Falls	OH	44223	6/17/2014	Spoke to dr about his use of OxyContin and discussed his patients currently taking it and continuing on IR oxycodone. Dr told me that his patients on IR oxycodone will usually be ok on it and he sees no reason to convert them because it won't be covered and will cost too much and they will need IR oxycodone for breakthrough anyway. I attempted to discuss the facts with him and he refused to agree with anything I had to say. I asked dr to continue to open his mind to the option of Butrans for his Norco patients who are in pain around the clock.
PPLPMDL0020000001					
PPLPMDL0020000001	Westlake	OH	44145	6/17/2014	spoke to pam and megan the nurses gave them updated managed care grids for butrans. Highlighted the dosing of butrans and patch placement. Also reviewed oxycotin dosing.They didn't let me see the doctor today. I tried to get an impropudte breakfast- they are going to ask the doctor for me coming next week with something to get a minute of his time.
PPLPMDL0020000001					
PPLPMDL0020000001	Westlake	OH	44145	6/17/2014	Spoke to office manager for a short while on oxycotin managed care and butrans managed care. Drs in the group are all on vacation except for this doctor and the office manager said she won't see me this week.
	Stow	OH	44224	6/17/2014	Spoke with dr about the patients he had been starting on Butrans. Dr said he is trying to start it on many more but a lot of them don't want a patch. I asked him what he's doing instead? Dr said he's trying other ER opioids. I told him the importance of setting the expectations early with the patient and telling them what is going to be done to help them manage their pain. Dr agreed and said if he writes the Rx and they don't want it they won't ever fill it. Dr said he's trying and getting better at discussing Butrans with his patients. I told him maybe the patient information guide will help and his BEP kits. Dr still has not used any. Discussed Butrans and managed care coverage with Laura who is now in charge of insurance since the pharmacy was closed down. Discussed commercial,BWC, Caresource and Medicare D coverage. Discussed the UHC PA coming in July. Gave him a poster for his new office of Butrans. I asked him if he ever writes oxycotin for pain? He said not really. Dr doesn't what to get into chronic medications he said. I said but your osteoarthritis patients are in pain...month after month right. He said yes. I said so why treat them with a short acting medication every 6 hours when you can give them another option of dosing every 12 hours or even weekly with Butrans. The doctor said he doesn't like schedule 2 products because they are not as safe. We reviewed abuse potential. I did tell him all opioids are a risk benefit thought process when you are giving them out monthly plus atc right, he said yes. I said do you think your patients would have problems with weekly dosing? he said no. I said well how come you think they will with a 12hour dosing and not with a every 6 hour dosing. Dr smiled and said...he just doesn't like to write oxycotin. I said ahhhh, so its the name? He said his patients won't be happy to get it. I said maybe...or maybe not. how do you know if you don't even offer it as an option. I gave the doctor the opioid experince study and reviewed some key information like inclusion criteria. Dr asked about using it for fibermagia. I said opioids work best on somatic pain and i said i couldn't make a recommendation to him. I highlighted the somatic pain that the patients had in the study. Reviewed the pain resuls and covered iniation guide and titration and supplemental with Butrans.<font color=blue><b>CHUDAKOB's query on 07/06/2014</b></font>Lisa, when a physician asks about treating a disease state, the best answer is a re-stating of the indication, where there is no disease state mention. I don't think we have data to prove your statement that opioids work best on somatic pain.<font color=green><b>BARTOLI's response on 07/08/2014</b></font>Understood will do that next time.<font color=blue><b>CHUDAKOB added notes on 07/10/2014</b></font>Thank you!
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	Lyndhurst	OH	44121	6/17/2014	Spoke w Hilary & Lisa. Discussed updates to OxyContin & Butrans Black Box - neo natal opioid withdrawal syndrome. Also discussed & left buprenorphine prescribing laws pharmacist piece. Discussed Section 2.2 Butrans FPI, patients may be instructed to wear two 5 or two 10 mcg hr transdermal patches, during titration, maintenance. Updated Butrans Med D status. Discussed prior auth requirement for all UHC customers, for all ER opioids, excluding transmderals & Butrans. Asked Hilary if she would recommend Butrans for any UHC customers that need an ER opioid, she responded yes. Asked if they would share info will all pharmacists.
PPLPMDL0020000001	Cleveland	OH	44195	6/17/2014	Reviewed OxyContin/Butrans PI's, Initiation/Titration guides along with Formulary grids, Said no further info requested at this time. Spoke with Laurie Admin. said due to his Chair role (Head of Hematologic Oncology and Blood disorder Tausssj Ctr) Said she will keep contact info for future reference
	Lyndhurst	OH	44124	6/17/2014	Dr left shortly after lunch. Met with med asst, OM Julie. Discussed both verbatim indications for my products, that they both are appropriate for patients with atc pain. Discussed updates to both OxyContin, Butrans FPI's including addition to Black Box Warning of neo natal opioid withdrawal syndrome. Discussed and left Kathy profile. Left Butrans Med D grid. Asked Julie if she puts on his desk will he read? She replied, honestly, it will sit there, he may glance at it. She states its best to leave those type of updates with her. He WILL be back in tomorrow, WED, but double booked. They are good on savings cards for both.
PPLPMDL0020000001	Berea	OH	44017	6/17/2014	Impromptu breakfast: Gave the EX release insight on primary care. Dr said oh that's interesting- highlighted two extended release options oxycontin and butrans and their dosing. Asked him next time a percocet patients is in need of pain therapy ATC- can you remember Oxycontin? He said sure. Reminded him of the experience coupons for Butrans but the dr said he hasn't written it in a while. I said why? He said he just hasn't seen a chronic patient for it. Reviewed the inclusion criteria of the product from the naive study for Butrans. Asked the doctor how many times a day is ATC? Dr said sometimes three or four. I said so when someone is taking tramadol or norco two times a day and then need more pills scheduled like q8, then you are telling me that's a butrans patient? He said no- when a patient is already three a day. I corrected him that earlier he told me that ATC pain meant taking a medication three or 4x times a day (q6 or q8), the Dr paused and said huh he never really thought about it like that for an opioid. I asked if it make sense to treat butrans in a patient with ATC pain? He said yes. I said they have recurrent pain everyb month right? He said yes. I said so you can't use butrans acutly or for PRN. He said right. I said then you might find a few more spots for butrans tomorrow. Dr said maybe so.<font color=blue><b>CHUDAKOB's query on 07/08/2014</b></font>What is EX release?<font color=green><b>BARTOL's response on 07/09/2014</b></font>Extended release- insight number 14. I will try and remember not to use abbreviations<font color=blue><b>CHUDAKOB added notes on 07/10/2014</b></font>Than you!
PPLPMDL0020000001	Rocky River	OH	44116	6/17/2014	Lunch. opened with the primary care insight asked her what she felt about the number of pcps's starting and extended release opioid product? Dr said it sounded reasonable, yet she said she doesn't treat chronic pain. I said how come and where do they go? Dr said she doesn't have time to treat them every month because they are a "pain to deal with". I said so you don't like writing schedule 2 products because they require monthly visits? She said yes. She said she works part time and she doesn't want her time invested in pain patients. I said so do you write scheduled 3 product then? she said yes. I started talking about the pain patient taking nsids ATC. I said have you ever done that? she said yes often. I said you probably have written a ultram/tramadol product at some time too then. she said yes. I said so say you have this tramadol patient taking two different times of the day, is that possible. she said yes. I said how do you determin when that patient needs ATC therapy? she said will increase the dose or possibly increase how many times a day they take it. I said aren't you making the short acting product work like an extended release product at that point, why not just write butrans? We reviewed starting doses and the guide. Also reviewed why she would move to increasing short acting products instead of another option like extended release butrans that schedule 3. Reviewed initiation guide,patch placement and managed care.
PPLPMDL0020000001	Cleveland Hts	OH	44118	6/17/2014	Quick Reminder of OxyContin every 12hours along with Butrans for those patients requiring around the clock analgesia,Asked if he saw any of those 10 patients? not yet will keep it in mind, nothing new learned
PPLPMDL0020000001	Lyndhurst	OH	44124	6/17/2014	Met with OM front window. Discussed improved formulary coverage for both OxyContin and Butrans. She stated she just had to complete a prior auth for female patient, for Butrans 10 mcg hr, for UHC patient, with prescription coverage on: Optima RX plan. Asked if it went through? She hasn't heard back yet.<font color=blue><b>CHUDAKOB's query on 07/06/2014</b></font>What can you do on the next call let her know you looked into the coverage for a UHC patient with Optum RX PBM? Maybe you already have, but if not, might show her you did some research.<font color=green><b>BALLIE's response on 07/08/2014</b></font>Ok that's good idea as far as doing additional research on that plan and informing her of what I've found. Thank you.<font color=blue><b>CHUDAKOB closed the query on 07/10/2014</b></font>
PPLPMDL0020000001	Lyndhurst	OH	44124	6/17/2014	Quick window. Asked when she goes to refill her next Percocet, please consider if patient has daily, atc pain, would they benefit from product dosed every 12 hours like OxyContin? that's a thought replied Dr. Roda. Also, improved Med D coverage for Butrans.
PPLPMDL0020000001	Akron	OH	44305	6/17/2014	I asked dr how he determines who is a candidate for an ER opioid? Dr told me when they can't tolerate the short acting or its not working? I asked dr what about patients who ask for more short acting? How much is too much? Dr said he tries not to go over 4 pills a day. I asked why 4 pills? Dr said that's just what he does. I told him to think more about his patients taking a 4-6 hr product for around the clock pain. I showed him the Butrans conversion guide and asked him to think more Butrans. Dr said ok. I told dr to also think OxyContin when his patients need a longer delivery system for oxycodone.
PPLPMDL0020000001	Barberton	OH	44203	6/18/2014	discussed his thoughts on what atc dosing means and the word chronic. The doctor said if someone is taking at least three or more pills a day it's atc. Dr said acute was 2 weeks aprox. I made reference to our butrans inclusion criteria that our pateints had pain for at least three months. Dr said that even though some patients may need three pills a day they aren't always a candidate for an extended release proeduct. I said why? He said maybe they won't need to take the third dose. We focused on the appropriate patient types per our indication for OxyContin and Butrans. (I asked about how many patients are under 40mg total daily dose of hydrocodone or oxycodone. The dr said all of them. DR said at least half require atc long term pain treatment. I said you realize you just said that almost all your ATC patients are candidates for Butrans. He said I guess they are. I said so I guess its pretty reasonable to ask you to focus on using Butrans more. He said yes, it makes sense as long as managed care is there. We discussed managed care. gave him the experinec kit for butrans and reviewed it. Talked also about Oxycontin and the dosing every 12 hours. I asked him if it was hard for his patients to take their medication every 12 hours instead of every 4 to 6 hours? He said not really. I said what hesitations do you have for choosing Oxycontin for the appropriate patient types. He said just coverage- reviewed this information
PPLPMDL0020000001	Barberton	OH	44203	6/18/2014	Dr said he has at least half of his patients are under 40mg hydrocodone or oxycodone. When I asked him how many of those need atc medications he said 20 percent. We focused in on those patients currently on hydrocodone or those that are on tramadol for Butrans. Reviewed iniation guide and titration. Reviewed oxycontin dosing, the FDA insight and the patients he feels is appropriate for Oxycontin. Dr said he has no problems writing oxycontin for appropriate patients but he doesn't see them. I asked him how he treats atC pain if not with Oxycontin over the last few months? Dr said Fentanyl and methadone. Dr said he would write my products for the appropriate patient type next time he see's one.
PPLPMDL0020000001	Akron	OH	44320	6/18/2014	Dr said she would like to place a couple of patients on OxyContin and will check with dr Bonyo when he gets back about starting them. Dr said both patients have been taking escalating doses of Percocet and said it just makes sense to give them the ER oxycodone. I agreed and made sure she discusses with dr Bonyo that its the same molecule oxycodone in both products and OxyContin is a single entity ER oxycodone. Dr said she knows and will let me know. Asked dr for more Butrans patient identification and reviewed the Scott and nancy profile.
PPLPMDL0020000001	Akron	OH	44307	6/18/2014	Spoke with Dr Leone about OxyContin use and converting patients. Dr told me that he converted a Percocet patient earlier on in he week to OxyContin. Discussed Butrans with dr and a couple of residents explaining specific patient identification, dosing, conversions and patch description.
PPLPMDL0020000001	Akron	OH	44313	6/18/2014	Told dr that he needs to begin converting patients to OxyContin when they meet the indication and are on as low a dose as 20mg of Percocet a day. Dr said he's trying but cost is making it difficult. I told him to use the patient copy cards for commercial patients and focus on commercial coverage. I asked dr and Tina who does the prior authorizations about the pending g pa for Butrans from last visit. Tina looked it up and called at the point as I was there. Tina said it is a buckeye patients and its been denied and gave criteria to be met first. She told me how backwards the criteria and dr will not do it. I agreed he shouldn't. I told dr to focus on Caresource and UHC community plan and told dr about the Caresource pa and they need to be completed and it should not be difficult.
PPLPMDL0020000001	Mogadore	OH	44260	6/18/2014	Discussed Butrans patient types and when to look for candidates and why. I reviewed the opioid experienced trial and focused on inclusion and exclusion criteria. Dr said he really likes Butrans but just about every time he goes to write it there is a PA necessary. I asked him for an example and he said he just had one with UHC. I asked him if he completed the pa and he said no because it takes too much time. I told him if he cares about what his patients are getting for pain then he MUST get the PA done! Reviewed new Medicare coverage and dr said that is really going to help his practice and was very happy. I introduced the BEP program to him and he said he didn't want them because he already had the copy cards and that's all he needed. I attempted to convince hi. But he refused to take the kits. Closed with OxyContin and asked hi. To simply convert a patient to OxyContin from Percocet when it is appropriate and they meet the indication.
PPLPMDL0020000001	Akron	OH	44320	6/18/2014	Dr just came in for the day and caught her before her first patient and asked her to use Butrans and or OxyContin this week for patients she is about to refill their short acting opioid on. I told her to focus on specific patients that complain of being in pain every day and ask for more or want the same dose even though its not controlling their pain. Dr said that she will try and said she refilled a Butrans onMonday and the patient is happy with it. I asked about the dose and she said she has moved to 10mcg and it seems to fit we'll.I asked for continued prescribing on both Butrans and OxyContin.
PPLPMDL0020000001	Akron	OH	44307	6/18/2014	Good discussion at AGMC with dr and two residents. Dr Leone said that he converted a Percocet patient earlier this week to OxyContin. I asked about the dose and he said the patient was taking 40mg a day or Percocet he started on 40 of OxyContin and hopes he can even reduce the dose in the future. I discussed how he can take more patients from Percocet or oxycodone plain and convert them when he knows they are taking the IR every day for pain. Discussed his opportunity for Butrans and explained to him and the residents that it may be more suitable for some patients with lower extremity pain to use Butrans because of its application on the upper torso. Described the schedule 3,7 day patch and indication. Discussed the conversions and patch description along with patient types.
PPLPMDL0020000001	Barberton	OH	44203	6/18/2014	Spoke to the nurse upfront on butrans and oxycontin dosing and updated managed care information. I asked her to pass the information back to the doctor which she agreed to.
PPLPMDL0020000001	Akron	OH	44333	6/18/2014	I asked Elise ant patients she has seen this week and if she had any patients continuing on IR opioids like Percocet? Elise said she had one this week that she did move to OxyContin because it was chronic low back pain. I told her that's excellent and to continue looking for that patient type. Discussed Butrans patient types and told her to focus on Norco patients who need a dose adjustment. Use Butrans and discussed starting doses and titration.
PPLPMDL0020000001	Cleveland	OH	44109	6/18/2014	Visited Ctr.Dept. Left OxyContin and Butrans Initiation/Titration guides for Dr.'s Baker,Campbell,P.Campbell,Dhillon, Dietz,Corrigan,Geho,Gemachu,Leake Westfall and Zabak. Butrans Savings cards, Met with Katie A. Dept Admin. Coordinator, requested her assistance in regards to in-service.
PPLPMDL0020000001	Cleveland	OH	44195	6/18/2014	Reviewed OxyContin/Butrans Initiation/Titration,Savings Cards said Ok, she will take info with her to new practice in Wisconsin.
PPLPMDL0020000001	Cleveland	OH	44109	6/18/2014	Quick Butrans review 7 Day transdermal, for those patients requiring around the clock analgesia along with OxyContin every 12hours, Said Ok, referred to Katie Admin for appt. Inservice request
PPLPMDL0020000001	Barberton	OH	44203	6/18/2014	pharmacist said she does see scripts come thru for oxycontin and butrans. I asked if patients on Butrans ask questions on how to use it. She said no. I highlighted the patch placement and how to discard butrans. Reviewed dosing of oxycontin and the appropriate patient type.
PPLPMDL0020000001	Cleveland	OH	44109	6/18/2014	Quick OxyContin review every 12hours.Savings Cards along with Butrans for those patients requiring around the clock analgesia (Med D coverage)Savings cards Said Ok will consider, nothing new learned
PPLPMDL0020000001	Mogadore	OH	44260	6/18/2014	I asked Theresa what her philosophy is on treating pain as an NP? She told me that she will not use a patch like Butrans or fentanyl because of the abuse potential. I told her it wounds like she is saying that a patch is a patch and I told her that's not the way to think. I asked her how much she remembers about Butrans that we have discussed? Theresa said she won't use a patch. I asked her if she writes or refills one or more of the following short acting opioids...tramadol, hydrocodone or Percocet? She said she does. I asked her if she thinks any of those have abuse potential? She said yes but they are for short term. I asked if she has had patients on any of those for more than 3 months? She said probably. I asked her to explain short term then. Theresa said maybe she needs to learn more about Butrans. I told her that's why I was there. She said she will read up on it on her own. I told her to read up on Butrans from the information I have to provide to ensure she gets the appropriate information. Have her the Scott profile along with the FPI included and the conversion guide. Reminded her OxyContin information is important to read up on.
PPLPMDL0020000001	Barberton	OH	44203	6/18/2014	The family practice office does not see reps. I spoke to the nurse and she said the drs were to busy but I could tell her my informaitoin. I highlighted oxycontin and butrans delivery system, scheduling and dosing. Gave her to pass to the doctors the naive study for Butrans along with the conversion guide for oxycontin.
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PPLPMDL0020000001	Mogadore	OH	44260	6/18/2014	Ld off conversation with oxycodone insight and asked him his thoughts. Joe said that he can understand why patient continue on IR opioids. I asked why and he said that IR opioids are generic and cheaper than branded as well as patients just wanting what they get from the short acting analgesics. I asked him if he has patients continuing to take products like Percocet or Norco.? Joe said he did. I asked him why his patients who may be in around the clock pain are treated in 4-6 hour increments? Joe said he really doesn't have many. I discussed OxyContin and Butrans key selling messages along with managed care and asked him where to place each product. Joe said Butrans makes sense and may try it out.
PPLPMDL0020000001	Cleveland	OH	44109	6/18/2014	Met with Malak Pharm. Mgr., discussed OxyContin every 12hours, FDA labeling discussing Abuse deterrent properties along with Butrans for those patients requiring around the clock analgesia, Med D coverage, Said he will relay info to prescribers when appropriate
PPLPMDL0020000001	Barberton	OH	44203	6/18/2014	Gave her the primary care insight. Dr just smiled. I asked her to think about treating atc pain in the approparie patient type with a product option like Butrans dosed weekly or Oxycontin dosed every 12 hours. Dr said she doesn't see chronic pain patients anymore. I said ok...but ya never know what tomorrow brings.
PPLPMDL0020000001	Cleveland	OH	44113	6/18/2014	Reminded of OxyContin every 12hours, savings carda and formulary status, Said Ok, treats very little pain, Nothing new learned
PPLPMDL0020000001	Cleveland	OH	44195	6/18/2014	Reviewed OxyContin every 12hours, savings cards along with Butrans for those patients requiring around the clock analgesia, Said she will consider, asked about in-service opportunity, Said to check with Anne/Michaela
PPLPMDL0020000001	Akron	OH	44307	6/18/2014	Spoke with Kyle the pharmacist and asked him about patients he currently has on products like Norco and Percocet. Kyle said that he probably sees more short acting narcotics than anyone in the area because he sees so many Medicaid and Medicare patients. I explained my job to speak with the internists and family practitioners about using q4 or q6 short acting products for around the clock pain. I showed him the information on specific patient type identification for each product. I asked if he is seeing or filling Butrans since the addition of new Medicare plans and explained them? Kyle said he sees them in the Copley store but none at his location. Kyle said there are too many doctors that will not complete prior authorizations for their patients when trying to prescribe branded medicines like Butrans and OxyContin. I asked him to please tell the patients to speak with their doctors about ER options for pain. Kyle said he does a lot.
PPLPMDL0020000001	Akron	OH	44333	6/18/2014	Dr Vucetic told me that he recently converted a patient from IR oxycodone 40mg to OxyContin 40mg q12. Dr said the print wanted longer control and when the patient went on OxyContin he experienced severe constipation which he did not have on Percocet. Dr said he switched the patient back and he is fine with no constipation. I told dr that's strange but constipation is a AE of OxyContin. I asked him if that has ever happened before and he told me that's a rare case. I asked for continued conversions where appropriate. Discussed Butrans patient selection and to write more. Dr told me as the finalization of AGMC in July takes place they will be accepting many more managed care plans. Dr said he needs a better idea of where it is covered and not covered. I told him about Medicare plans again and asked him to focus on that segment of his practice along with those 50-64yrs that meet the indication.
PPLPMDL0020000001	Cleveland	OH	44127	6/19/2014	Reviewed Butrans for those patients requiring around the clock analgesia along with OxyContin every 12 hours for appropriate patients, Said she will consider, Will continue to with Gen.assistance.
PPLPMDL0020000001	Cleveland	OH	44113	6/19/2014	Reviewed Butrans for those patients failing on Norco requiring around the clock analgesia, Said Ok will consider for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44113	6/19/2014	Reviewed OxyContin for those patients requiring around the clock analgesia, savings cards along with Butrans for those Norco failures, Said ok will consider for appropriate patients, OTC
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	6/19/2014	Spoke with Derek a new pharmacist about Butrans and OxyContin. I asked him how familiar he is with Butrans and he said they have a couple of handfuls of patients on it. I asked which doses he dispenses the most and derek said the 10and 20mcg. Derek said most of the prescriptions come from pain management. Derek said they also have 5mcg on the shelf. I reviewed the conversions, appropriate starting doses. Derek said he's had some patients asking about patches staying on and disposal. I reviewed information from FPI and proper skin prep. Derek said he looked up the FPI and told the patients about those things but said he didn't know about the disposal units. Discussed OxyContin and he said they fill that too and have all doses in stock. Derek said he will continue to fill and usually they are the same patients each month.
PPLPMDL0020000001	Akron	OH	44310	6/19/2014	Caught dr in hallway and asked her when she typically decides to prescribe a long acting opioid for pain? Dr said she doesn't do enough to really give a good opinion but said when her patients need more control for long term pain. I asked her what an example of long term pain is and she said taking something every day for pain. I asked her when a patient is on a product like Percocet and has long term pain would it make sense to convert to OxyContin? Dr said sometimes unless cost is an issue. Dr said we can pick up next time. I reminded her about Butrans schedule 3, 7 day patch for moderate to severe pain.
PPLPMDL0020000001	Cleveland Hts	OH	44118	6/19/2014	Reviewed OxyContin/Butrans savings card info along with formulary grid, said she will review with Rph. nothing new learned
PPLPMDL0020000001	Cuyahoga falls	OH	44223	6/19/2014	Caught Kim and her nurse in the hallway of the office and told him to please continue looking at patients she can convert to he ER oxycodone from the IR oxycodone and if she has any difficulties with it? Kim said everything is going well but sometimes she has to convince the patient that they need to take less pills or a patch as an option. I reminded her about Percocet to OxyContin and tramadol and Norco to Butrans when they meet the indications. I reminded her about the new Medicare coverage for Butrans.
PPLPMDL0020000001	Highland Heights	OH	44143	6/19/2014	Spoke with Marianne who completes most of their prior auths. Discussed UHC commercial prior auth details (start 7/1/14) - she stated she did her first one yesterday. Let her know transdermals, including Butrans, are not included in Prior Auth. Quick hello to Dr. Salama. Please consider Butrans today, tomorrow, for patients like Scott, taking 3-4 Tramadol daily. 4 strengths for dosing flexibility. Ok stated dr - (note: when offered OTC samples, Marianne states he doesn't hand them out).
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	6/19/2014	Spoke with Dr Azem and Lori about the most recent Butrans prescription. Dr said the patient came back after 4-5 days and said Butrans is not working well enough. Dr said she out the patient back in his Percocet and knew I wouldn't be happy. I told dr that I'm not happy because she didn't give the patient enough time to experience Butrans and its fullest potential. I also asked why she didn't titrate? Dr said the patient was in severe pain and just started him back on his Percocet. I told dr I wished she would have told the patient to take more time than 4-5 days before judging its efficacy. Dr agreed and said ok. Told dr to please keep that in mind next time and to also titrate OxyContin and use all 7 doses available if necessary.
PPLPMDL0020000001	Euclid	OH	44117	6/19/2014	Total office call: spoke with med assts Lori and ? (young, dark brown hair) and OM Norma. Discussed OxyContin conversion from oxycodone and Percocet. Discussed fact that patients already on oxycodone molecule, just a different delivery system. Left 1 conversion/titration guide, discussed lowest effective dose; left updated Ppi. Butrans, for opioid naive or after Tramadol. Left Scott profile. Left initiation/titration guide, updated FPI. Let med assts and Norma know, all transdermals, including Butrans; excluded from UHC new prior auth requirement. Norma can;t stand prior auths and she keeps having to complete more and more!! Quick hello to Dr DeMicco - when you go to write your next OxyCodone or Percocet - please think - is that patient more appropriate on an ER opioid when they present with daily, atc, long term pain. That's a good point responded Dr. will follow up next week
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	6/19/2014	Quick hello at front counter and told her that I wanted her to begin identifying patients that she has continued to refill Percocet for and convert them to OxyContin if they meet the indication. Dr said ok but said that she wants to do more but patients won't switch. I told her she needs to set the expectation earlier on in treatment about your goals for their treatment if it should be for an extended period of time. Dr said ok. Handed her the Butrans initiation and titration guide and asked her to get on board with Butrans and identify patients who are failing products Mike Norco from efficacy or tolerability.
PPLPMDL0020000001	Cleveland	OH	44106	6/19/2014	Reviewed OxyContin/Butrans info, Initiation/Titration guides, no further info requested, will keep contact info for further info.
PPLPMDL0020000001	Cleveland	OH	44106	6/19/2014	Visited Seidman, Requested appts, OxyContin/Butrans Initiation/Titration
PPLPMDL0020000001	Tallmadge	OH	44278	6/19/2014	I asked dr how he decides who he is going to treat with an ER opioid like OxyContin and who he refers to pain management? Dr said if the patient isn't a surgical candidate or he has had the patient in his practice for many years he will treat with opioids. Dr said if he's skeptical about the patients abuse potential or has a condition that is deserving of a specialist he will refer. I asked dr when he knows he's going to treat with an ER opioid, oxycontin and Butrans are two very good options. Gave him a piece on each and asked him for continued prescribing. Nothing else learned.
PPLPMDL0020000001	University Hts	OH	44118	6/19/2014	Discussed OxyContin every 12hours, formulary,savings cards, along with Butrans for those patients are failing on present therapy. Med D formulary.OTC Said he has a few patients in mind, Discussed with OM Maria, formulary, savings card, said she will help in reminding Dr.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/19/2014	I told dr that I know he had told me a few times before that he only uses Butrans for patients with private insurance because he doesn't have time for prior authorizations and insurance issues in general. I showed him the new Medicare D grid and told him that for the plans listed the risk of anything causing him to take more time is very very low. I told him average costs for aarp and silverscript and asked him if that's acceptable? Dr said he thinks so. He said he might try it but don't bank on it! I told him I have faith in him that he will and told him to stick with the plans on the grid for the path of least resistance.
PPLPMDL0020000001	Cleveland	OH	44104	6/20/2014	Reviewed with Hakeem Rph, OxyContin and Butrans Med D formulary status,Savings cards, Said Ok,will relay info to clinicians if appropriate, no new info learned
PPLPMDL0020000001	Cleveland Stow	OH	44224	6/20/2014	Spoke with dr about her properly identifying patients for Butrans and OxyContin. I asked her how often she is confronted with a situation of a patient wanting higher doses IR a refill on the same dose of tramadol or Norco? Dial laughed and said multiple times a day. I told her about the tramadol insight and told her she must make the determination to treat with an ER opioid like Butrans when she knows the patient is in around the clock pain. Dial said she knows and should be writing it more because she likes that its a schedule 3 and its a patch. Dial said she wants to have another option other than another pill. I told her to move to Butrans and reviewed the Scott profile discussing appropriate starting dose, titration and patch application and skin prep. Dial asked about AE's. Discussed the opioid exercised trial and reviewed AE's from trial. I asked if anything. Stood out and she said nothing at all and said she will be using it more. I discussed OxyContin and why she would move to it for a patient already on IR oxycodone. Dial said there is already a lot of it going out. I told her that's good if the patients are appropriate for it and explained what that means.
PPLPMDL0020000001	Cleveland	OH	44104	6/20/2014	Window call, reminded of OxyContin every 12hours, 7 tablet strengths along with Butrans for those patients requiring around the clock analgesia, Said she will keep in mind for appropriate patients,
PPLPMDL0020000001	Cleveland	OH	44113	6/20/2014	Reviewed OxyContin every 12hours, FDA labeling that describes abuse deterrent characteristics,Savings cards, along with Butrans for those patients requiring around the clock analgesia, said Ok, feels most patients are adequately controlled but will consider for appropriate patients. Med D Formulary status
PPLPMDL0020000001	Cleveland	OH	44113	6/20/2014	Reviewed Butrans for those Norco failures requiring around the clock analgesia, along with OxyContin every 12hours, Said Ok, will continue to find appropriate patients for Butrans
PPLPMDL0020000001	Cleveland Stow	OH	44224	6/20/2014	Kelsey said that I came on a good week because she said its been narcotic week! I asked what they have filled most and she said Percocet and Norco along with some OxyContin and Butrans sprinkled in for good measure. Kelsey said patients from summit pain who used to get their prescriptions at the offices pharmacy are coming in trying to get their prescriptions early. Kelsey said the providers are writing them new prescriptions knowing they shouldn't get them filled yet. I spoke about OxyContin and Butrans as options available for those patients continuing to get their IR filled and are still in pain.
PPLPMDL0020000001	Lyndhurst	OH	44124	6/20/2014	Lunch. Baby Boomer Med D age insight. Asked dr what % of his practice is over age 65, covered on Medicare D. He responded at least 60%. You will write branded meds when appropriate, Yes? Yes he responded. And how to you define around the clock pain? When patients have pain 24/7. Discussed conditions that may be causing those patients pain as they age including osteoarthritis etc Discussed using lowest effective dose of either OxyContin or Butrans in those patients, like Pam here. Im showing you this profile because she is over age 65, covered on Medicare, and needs access to branded medications. when this type of patient walks in today or next week, I'd like you to consider either of my ER opioids - as they both have improved Med D access, best available co-pay. Both with dosing flexibility. Does this sound reasonable? yes? Reminder BWC should go through smoothly for Dr two and a half hours behind as usual and only had a couple of minutes. I have dr the oxycodone insight and told him not to contribute to the situation and convert patients to OxyContin from oxycodone when they are on it for 3 months or longer. Dr said he is doing that as much as he can but its tough to get covered. Dr could remember plans or specifics. I asked dr if he is finding that he can individualize the dose with OxyContin 7 srtrengths and if he's titrating every 1-2 days when necessary? Dr said he is and with the 15, 30 and 60mg doses it makes it much better to do so with small increases in dose. Discussed Butrans and dr said he write it this week for a 75 yr old woman who's insurance denied. Dr couldn't remember plan or specifics. I spoke with Jamie the office manager and she did not know of any denial for Butrans and said it must have happened in Fairwan or Green and to check in those offices.

	Lyndhurst	OH	44124	6/20/2014	Lunch. (Dr states he doesn't need any info on formulary/med d status, as he doesn't care. He will write drug he feels is best for patient, if it's not covered, he will switch). Tramadol insight. Dr states now he has to use DEA to write Tramadol in the fall. When you're reviewing possible scheduled products for your patients, consider Butrans. Discussed clinical data in over age 65, which is large part of his patient base - 70% or so he says. Butrans was tolerated in elderly, and titration also tolerated in those who needed to be titrated to one of 3 doses at time of study. Reminder: now 4 strengths, max dose 20 mcg/hr/ Pain reduction scores, are those important? dr stated of course. Summarized call, Attributes of butrans including no dose adjustment needed for renal mild or moderate hepatic impaired. Discuss around the clock pain which he defines as all day/all night. You have Butrans and also OxyContin dosed every 12 hours. I'm providing you with two choices when making that decision for trusted patients. Asked for business today and next week, when patients present with daily, atc, pain - Butrans before or after Tramadol; OxyContin after Percocet or oxycodone.
PPLPMDL0020000001	Cleveland	OH	44124	6/20/2014	Goal: opened with Baby Boomer over age 65 insight. Dr states that's a lot of people turning 65. Asked dr if some of those patients over age 65, would be expected to be placed on branded product? He responded yes. Lead to Pam profile, and stated this patient, covered under Medicare D would be appropriate for either OxyContin 10 mg start or Butrans 5 mcg/hr start. We have improved Med D status for both products. Ok great responded Dr. Met with LPN Jean. Presented both product verbatim indications, discussed daily, atc, pain and both are options for patients with atc pain. Discussed formulary status for both products. Left Med D grid for Butrans, FPI both products, Pam profile, 2 Butrans patient guides.
PPLPMDL0020000001	Cleveland	OH	44113	6/20/2014	Quick OxyContin reminder every 12hours, along with Butrans for those patients requiring around the clock analgesia, Said Ok, no new info learned, Asked Dale for assistance, said he will remind
PPLPMDL0020000001	South Euclid	OH	44121	6/20/2014	Met with med asst at front window. Dr Deloseph on vacation, back MON 6/24. Discussed both products, verbatim indication, scheduling, Black Box Warning, single entity opioids, flexible dosing, improved Medicare D access.
PPLPMDL0020000001	South Euclid	OH	44121	6/20/2014	Met with both med asst and Dr. Flagg. Dr Flagg is not starting any new patients on IR or ER opioids. He is referring all patients to Dr. Patrick McIntyre Pain Specialist, at Ahuja Medical, Beachwood, Oh. Jen reported an AE event with product containing oxycodone. Patient died at ER - was on several meds, one of them being Percocet (oxycodone 7.5 mg, Acetaminophen 3.25) 120 tablets given every 30 days by Dr. Flagg. Female, age 42, died at ER in hospital on Tuesday 6/17/14. Let Jen know I will report AE, as we track all. Also Jen had to complete prior auth, which she had never had to do before, for a female patient, who has been on the following therapy for years: female, age 63, Anthem BCBS coverage: OxyContin 40 mg TID. I stated that's off label. OxyContin dosing schedule is q12h or every 12 hours. In addition, patient given two tablets of 5 mg oxycodone, so 10 mg daily x 4= 40 mg or oxycodone. I instructed Jen (Dr not with us now) to speak with Dr Flagg about this patient and the "off label" dosing. Discussed lowest effective dose for OxyContin. Dr. Flagg will continue to manage pain med s for
PPLPMDL0020000001	Lyndhurst	OH	44124	6/20/2014	EXISTING patients only. Reviewed OxyContin strengths, dosing every 12 hours, savings card and Black Box Warning in FPI. Butrans is a "new" agent for him, so Butrans will not be initiated by doctor in future. Left Butrans FPI, Lunch. Tramadol insight. Why not just go to Butrans first? Because Tramadol is easier to get through and cheaper she responded. I would like to quickly address your cost concern and then get to attributes of both my products. Discussed access for commercial/cash pay quickly, Med D. OxyContin savings card; Butrans trial/savings. Let's put cost aside. Discussed Butrans clinical data, proven efficacy safety - at least 30% reduction in pain. OxyContin proven safety/efficacy. Both products offer dosing flexibility. Different delivery systems discussed. Both improved Med D status. Addressed her ongoing concern for access for her age 65 & over patients. when she determines a trusted patient has daily, atc pain: she has two choices. One oral product, one transdermal product, both with improved Med D coverage. Today and next week, consider Butrans before or after Tramadol; and consider OxyContin after Percocet/oxycodone - you already know patients can tolerate oxycodone molecule/just changing delivery system. Sound reasonable ? Yes.
PPLPMDL0020000001	Cleveland	OH	44124	6/20/2014	Lunch. Baby boomer med d insight. used Pam profile. Pam, age 71, would be an appropriate candidate to start at 10 mg OxyContin, or 5 mcg/hr of Butrans. I'm sure you have patients like Pam walking into your practice every day, right? Yes replied dr. some of them you will decide that a branded products is best choice, right? Yes responded doctor. The two products I have to offer your patients with daily, atc pain; now have improved Medicare D coverage. I'm just asking you to try. Discussed geriatric patients studied in OxyContin FPI and Geriatric patients studied in Butrans (visual aid/clinical) For patients like Pam, please consider today and next week, when you determine that 1. they have atc pain, long term 2. trusted patient 3. flexible dosing with my products 4. improved Medicare D access for them. Sound good? Yes I will consider replied dr.
PPLPMDL0020000001	Cleveland	OH	44105	6/20/2014	Reminded of OxyContin every 12hours. FDA labeling discussing abuse deterrent characteristics, along with Butrans for those patients requiring around the clock analgesia, Said ok, nothing new learned
PPLPMDL0020000001	Akron	OH	44333	6/20/2014	Wanted to follow up with conversation last time and asked dr other than converting patients from IR oxycodone to OxyContin what about hydrocodone patients that may be around 40mg a day? Dr said its a tougher conversion compared to oxycodone because typically patients on that much hydrocodone wither need to be tapered down or are candidates for intervention. I asked dr if he happens to have a patient that is justifying a certain level or opioid based on pathology and are not a candidate for intervention? Dr said a few possibly. I asked for him to convert. Asked dr to write more Butrans for patients that have been on 3-4 prn meds a day. Dr Said hello to the nurses, smalled talked. Asked about their job and how they handle coupons. Nurses said the doctor does all of this, i asked who checks the expired coupons and reminded her to check the coupons. Talked about butrans savings cards- that it was a transdermal patch and the scheduling, the staff said they knew of oxycontin--highlighted managed care and dosing. Briefly asked them why would someone dose a person every 4 to 6 hours month after month and not give them an extended release product? They couldn't answer.
PPLPMDL0020000001	Cleveland	OH	44109	6/23/2014	Quick OxyContin every 12hours for appropriate patients, savings cards, Said Ok will keep in mind as she enters into clinical practice, no further info learned
PPLPMDL0020000001	Cleveland	OH	44195	6/23/2014	Discussed OxyContin every 12hours, 7 tablet strengths,Recognized by the FDA as having Abuse-deterrent properties along with Butrans 7 day matrix transdermal delivery system, said ok for OxyContin but on the Butrans feels patients like and are adequately controlled on present therapy, but will consider for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44195	6/23/2014	Reminded of OxyContin every 12hours, FDA labeling of abuse deterrent characteristics, along with Butrans for those patients requiring around the clock analgesia, Said he will consider for appropriate patients, Followed up on request to do inservice next month.Said he will research
PPLPMDL0020000001	Stow	OH	44224	6/23/2014	Asked to see Sabrina up front and she walked by. Got a second to review the Kathy profile for Butrans and told her about the hydrocodone insight. Sabrina told me that she does think its a good option and she started seeing patients a couple of weeks ago after training. I asked her if she would look for patients that fit a similar profile? She said she would. Nothing else learned.
PPLPMDL0020000001	Westlake	OH	44145	6/23/2014	primary care insight. Dr asked me to repeat the percentages. Dr said he doesn't treat chronic pain like those primary care. I asked if he treats any pain. he said yes but acute. I said id like to talk about your patient that might be taking a few opioids a day and refills every month. Do you have those? He said yes some. I said like how many...he said maybe ten. I said what happens when that patient needs more pain control do u increase their hydrocodone or oxycodone? He said sometimes. I said that sometimes patient is a candidate for oxycontin. If you feel your patient needs an opiod atc and long term then its a schedule 2 options isn't it. He said maybe. I said or you can try writing butrans with weekly dosing. He said butrans what is that. I highlighted the molecule delivery and dosing.
PPLPMDL0020000001	Akron	OH	44319	6/23/2014	Told dr at window about the oxycodone insight and told him I don't want him adding to the statistic and to use low dose OxyContin when he is confronted by a patient complaining of pain around the clock on Percocet. Dr said he knows and is trying to start OxyContin sooner. Gave him the nancy profile and asked him to continue to look for patients in pain on products like tramadol or Norco who meet the indication.
PPLPMDL0020000001	Lakewood	OH	44107	6/23/2014	window. I said something to think about this week- is that tramadol patient uncontrolled on 2 doses a day and is back for another option. Can you make that option butrans if appropriate. He said sure.
PPLPMDL0020000001	Akron	OH	44333	6/23/2014	Elise told me ther patients are doing well on Butrans and said she had a patient come in for a follow up today on Butrans for a month and said he loves it. Elise said the patient doesn't have to take any pills any more. I asked the patients age and reason for treatment. Elise said he has chronic low back pain and some stenosis. She said she started him on 10mcg and doesn't think she will need to titrate. Discussed titration and conversions and reminded her to convert patients on IR oxycodone to OxyContin.
PPLPMDL0020000001	Lakewood	OH	44107	6/23/2014	primary care insight. Asked him how many specialists he thought were starting atc pain patients on an extended release product? He said probably more than primary care. Discussed the types of patients that may require a long term pain treatment for his kinds of patients. Dr said those patients would usually require an extended release choice. I asked him if he selects oxycontin or Butrans for those types of patients. He said it depends but usually oxycontin. We talked about the the dosing of every 12 hour and i asked him how he or his patients like weekly dosing for patients like butrans? Dr said the patient who are on butrans like it and thepatients on oxycontin like that too. I said i guess your recommendations play a big role huh. He said yes. We talked about managed care- which dawn brought up (the manager)- we reviewed this.
PPLPMDL0020000001	Cleveland	OH	44195	6/23/2014	Visited Walker Bldg, Pain mgmnt (Crawford,Leizman,Knaus,Raymond ) Initiation/Titration guides, savings cards and formulary grids, Requested appts and inservice for dept
PPLPMDL0020000001	Rocky River	OH	44116	6/23/2014	Talked about dosing of both oxycontin and butrans. highlighted titration and coupon availability. Talked about atc dosing and why someone would dose a patient several times a day and not offer an extened release product at some point. No response given. reviewed refills with butrans.
PPLPMDL0020000001	Uniontown	OH	44685	6/23/2014	Spoke with Mike the pharmacist and asked him if he's familiar with all 7 doses of OxyContin? Mike said he is and they fill a good amount of it. I asked him which doses tend to be dispensed the most and he said 10, 20,40 and said they have had more 80mg dispensing in last last month. I asked if most is. Moving from pain management and Mike said it is. Showed him The conversions and titration. Discussed Butrans dosing, conversions and reviewed nancy profile.
PPLPMDL0020000001	Munroe Falls	OH	44262	6/23/2014	Told dr the OxyContin oxycodone insight and then asked her if she finds patients in her practice could possibly be taking IR opioids like Percocet and be in daily pain and not tell her about it? Dr said that's a good question. Dr said she would like to think her patients are being honest with her and said she supposes that there may be some who don't want to ruffle feathers even though their short acting may not be working very well. I asked her if she would offer the q12 delivery if oxycodone to her patients if they meet the indication? Dr said she would. I told her its been about 3 weeks since she told me that she started a patient on Butrans 5 mcg and i wanted to follow up and see how things were going for the patient? Dr said the patient is doing well and she gave the patient a refill on the Butrans 5mcg. I told dr that's great and to make sure the patient is titrated if there is ever a need for more analgesia. I asked her to continue to identify patients similar to this recent one. Dr said ok.
PPLPMDL0020000001	Cleveland	OH	44109	6/23/2014	Visited (OncID, PMR) OxyContin/Butrans Initiation/Titration guides along with appt requests
PPLPMDL0020000001	Akron	OH	44304	6/23/2014	Had out the OxyContin 10mg page and asked him to identify patients that he feels would be appropriate for low dose q12 OxyContin. Dr said ok. Left him the conversion and titration guide. Told him I'm leaving a profile for a patient on hydrocodone who is still in pain around the clock and be appropriate for Butrans. Nothing else learned.
PPLPMDL0020000001	Akron	OH	44333	6/23/2014	Dr told me that he had a patient in this morning who was taking 40mg or Norco and 2, 5 mg Percocet a day and was not a candidate for intervention. Dr said he out the patient on OxyContin 30mg and said it should do the job but said the patient might need IR oxycodone for breakthrough. I told dr that's great news and breakthrough medicines might be necessary but told dr to titrate the dose if pain persists as well. Dr said he may need to go to 40mg OxyContin but doesn't want to go over that daily amount. I reviewed dosing and told him he can titrate every 1-2 days. Told dr to continue identifying patients on ultram or NSAIDs who meet the indication for Butrans. Nothing. Else learned.
PPLPMDL0020000001	Rocky River	OH	44116	6/23/2014	He waved thru window. I said someone appropriate with ATC pain might be interested in the every 12 hour dosing of oxycontin or even weekly dosing with Butrans. SAID OK THANK YOU AND WALKED AWAY.
PPLPMDL0020000001	Lakewood	OH	44107	6/23/2014	Talked about dosing with oxycontin and butrans. highlighted supplemental with both products. gave fair balance regarding possible respiratory depression and potential abuse. Showed the demo of the butrans patch and how to discard the patch.
PPLPMDL0020000001	Euclid	OH	44117	6/23/2014	Lunch. Dr DeMicco says Dr Morley is down to every other Mon now. He's not in today in Euclid, in fact. Dr states that Lori fought really hard for a BWC patient recently for OxyContin. After patient failed morphine step edit, BWC still wouldn't approve. Lori/BWC went back and forth, and finally Lori got approved. I thanked her for her efforts, she states she doesn't mind as long as patient is appreciative. Dr DeMicco says they only write scheduled opioids during time that patient is on Physical Therapy. Since he is not board certified in pain management personally, he's concerned about writing & having "more than 50%" of his patients on ER opioids. So upon completion of PT, he refers patients out to pain specialty for long term opioid therapy. He states Euclid accepts ZERO commercial insurance. they are trying to limit Medicaid acceptance. We discussed re assessing patients in his care, who he determines have daily, atc pain; and for whom an ER opioid such as OxyContin or Butrans would be appropriate. Asked for business today and this week for OxyContin after percocet, oxycodone, discussed "every 12 hour dosing" and Butrans after 3-4 Tramadol daily, in patients like Scott.
PPLPMDL0020000001	Cleveland	OH	44195	6/23/2014	Quick OxyContin reminder for Mei, every 12hours, savings cards and formulary status, Said she will keep in mind, nothing learned, Asked Anne about a NP in-service, will follow up

	Lakewood	OH	44107	6/26/2014	Gave the primary care insight. The pa said she sees most of the patients post hospital stays at the office or in the hospital rooms. She said that the doctor usually orders OxyContin in the hospital for appropriate pain patients needing therapy and she will managed there progress at visits. She said she doesn't write schedule 2 products but will write schedule 3 products. However she said she makes her recommendation to the dr before any scripts are written. We discussed the atc pain patient and what that may look like in her option or the drs. Pa said she did't see any problem with dosing a short acting products atc because its cheaper. I said what if you were able to use a savings card that knocked the price Down quite a bit and also allowed for weekly dosing instead of every 6 hour dosing with the immediate release products? She said vikodin is cheap but maybe for the right patient. I said who is that? She wasn't sure. We reviewed dosing for Butrans and the inclusion criteria of nave study. Highlighted the no first pass and the no dose adjustment for renal impaired patients. Covered managed care.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	6/26/2014	Lunch with dr and discussed most recent patient coming from vicoden 7.5/325 to Butrans and the patient coming back after 4-5 days complaining of Butrans not working and requesting his vicoden back. Dr told me that the patient has severe gout and is morbidly obese and came to her on no pain medicine. Dr said she started on ER morphine and the patient couldn't tolerate it. Patient came back and was given hydrocodone. I asked why she didn't think of Butrans then? Dr said she can't remember but said because of the gout and skin issues she didn't think the patch was most appropriate. Dr said she didn't think the patient came back after only 5 days and said she thinks it was longer. Dr said she started on 10mcg and said the patient was adamant about not keeping the patch. Dr said she would have titrated to 15mcg if the patient wants so against it. Discussed when to titrate and reviewed BP 3015. Discussed new indication and asked for continued identification of patients in around the clock daily pain. Dr said she has a couple of patients who can't get Butrans on buckeye. Discussed process with managed Medicaid and new Medicare coverage. Asked for her to think OxyContin for those patients already on the oxycodone molecule and showed her the conversions.
PPLPMDL0020000001	Cleveland	OH	44113	6/26/2014	Reviewed OxyContin every 12hours, savings cards along with Butrans for those patients requiring around the clock analgesia, Said Ok will keep it in mind, Mary has been reminding him
PPLPMDL0020000001	C. Falls	OH	44223	6/26/2014	Spoke with Cindy,Denise and Jenn about new indications and what goes of patients they are seeing for pain. Denise said they continue to get patients taking IR opioids for long periods of time and get refilled month after month. I reviewed the OxyContin conversions and how treating long term pain in 4-6 hr increments. Cindy said that is exactly what doctors so because its easy and many don't want to write ER medicines. Discussed Butrans indication, conversions and continuing to identify the right patients for Butrans who meet the indication but arr on IR opioids.
PPLPMDL0020000001	Cleveland	OH	44144	6/26/2014	Reviewed OxyContin every 12hours,savings cards,formulary along with Butrans for those patients requiring around the clock analgesia, said she will consider for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44103	6/26/2014	Reviewed OxyContin Q12h, savings cards, along with Butrans for those patients requiring around the clock analgesia, Savings cards, Said he will continue to prescribe for appropriate patients, no new info learned
PPLPMDL0020000001	Lakewood	OH	44107	6/26/2014	Dr said oh yes OxyContin, he mentioned he likes the product but sees more acute cases. I highlighted the patients that turn from acute to long term pain patients, dr said he would use OxyContin for them. I mentioned Butrans weekly dosing.
PPLPMDL0020000001	North Hampton	OH	45349	6/26/2014	Staff was at office but HCP was not in. Left info on Oxycontin and Butrans. HCP will be out until July 7th.
PPLPMDL0020000001	Lakewood	OH	44107	6/26/2014	Spoke to Angela the ma about Butrans and the caresource coverage. I asked if she knew why the dr wasn't writing Butrans latley, she didn't know. Talked about the Butrans experience kit. Reminded her I had OxyContin. Left marketing matials behind.
PPLPMDL0020000001	Akron	OH	44310	6/26/2014	I asked dr what he typically doses when hydrocodone doesn't meet the needs of the patient because of efficacy or tolerability? Dr said he might use Percocet or something else to help with pain. I asked what he expecting to get out of Percocet that vicoden isn't? Dr said more pain relief. I asked if it works? Dr said most of the time. I told dr then there are some who don't get additional analgesia. Dr said yes. I asked why he wouldn't use an ER option like OxyContin or Butrans prior to moving to another IR opioid if the patient is continually in pain? Dr said he understands my point and does use OxyContin. I told dr he should be using it more often and before he adjusts the dose or IR medicines. Dr said ok. Showed dr the Butrans placebo patch and asked him to use it more frequently for those on tramadol who ask for more. Dr said ok.
PPLPMDL0020000001	Fairview Park	OH	44126	6/26/2014	Spoke to ma and gave her the updates on Butrans such as dosing and where it might be appropriate, discussed schedule three product.
PPLPMDL0020000001	Akron	OH	44305	6/26/2014	Told dr that he needs to know about the new indications for ER opioids like OxyContin and Butrans. Read him the old indication for Butrans and then the new. I asked dr his thoughts. Dr said he thinks the indication makes more sense and like the part about pain severe enough. I told dr that I want him to think about patients that are currently on tramadol who meet this new indication who are in pain severe enough to require daily, around the clock, long term opioid. I asked him if he would identify one patient a week that meets this indication and are currently taking a IR opioid? Dr said he will and asked if I knew tramadol is moving to a schedule 4? I told dr I did and asked him his opinion and he said it should have happened a long time ago. I told him to identify some of those tramadol patients for Butrans and Percocet patients for OxyContin and showed him the conversions.<font color=
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/26/2014	Discussed new indications for OxyContin and Butrans with Kylie the pharmacist. I showed him the old indication and he said it makes more sense to have it as the new one. Kyle said there are way too many patients that are continuing to take short acting narcotics for around the clock pain. I told him I agreed and told him About the hydrocodone insight. I showed him the conversions from Percocet to OxyContin and asked him if he fills Percocet regularly? Kyle said he does along with Norco and tramadol. I discussed the 7 doses, titration,and patient types. Discussed he same with Butrans and Kyle said he thinks they have 4 patients on it and have all doses on shelf. Discussed new Medicare plans for Butrans.
PPLPMDL0020000001	Cleveland	OH	44113	6/26/2014	Visited Ortho Dept. (Bliffeld, Stulberg,Stearns) OxyContin/Butrans Savings cards, Initiation/Titration
PPLPMDL0020000001	Tallmadge	OH	44278	6/26/2014	Introduction to dr for first time. I asked dr what his philosophy is in treating patients with pain? Dr said he has no issues treating acute pain but said that he doesn't want to treat chronic long term pain and said he refers to pain management. I asked dr how he defines long term treatment? Dr said when a patient needs an ER opioid. I asked dr when that is and he said he just doesn't treat pain. I asked him if he treats with products like tramadol or vicoden? Dr said sometimes but doesn't make a habit out of it. I told him he needs to choose products like OxyContin and Butrans that can provide an extended release of opioids. Dr said he didn't know about Butrans and I explained all key selling principles. Dr said we will discuss next time because he said he's interested in learning more but didn't have time.
PPLPMDL0020000001	Cleveland	OH	44103	6/26/2014	Reviewed OxyContin Q12h, FDA labeling describing abuse deterrent characteristics, along with Butrans for those patients requiring around the clock analgesia, Said Ok will keep in mind, no new info learned
PPLPMDL0020000001	Lakewood	OH	44107	6/26/2014	Discussed atc pain. Dr described atc pain being sometimes three pills a day or more. Dr said he has been doing evaluations on his over 65 patients and he has been tampering them down in strength or taking one pill off their schedule during the day. I asked how many pills they take, he said 4 some times 5 a day. I said why would you dose that way? Dr said habit. Dr said in light of the Ohio changes he is trying to write less pills prn patient. We talked about the atc patient and dosing OxyContin every 12 hours. Dr said he has no problem writing it. We talked about the strengths and tailoring the dose to the right patient by being able to adjust the dose every 1 to 2 days. Also highlighted the molecule of OxyContin. Was the same as Percocet yet with a different delivery system. Dr said Butrans managed care was his hesitation. Covered and introduced experience kits. Talked about the once a week dosing. I asked him if this dosing was so ethng patients could get used to instead of dosing every 6 hours atc. Dr said he thinks they can. Focused on how to start Butrans. Covered abuse potential.
PPLPMDL0020000001	Garfield Heights	OH	44125	6/26/2014	Reviewed with Tiffany Rph OxyContin Q12hours,savings cards along with Butrans for those Tramadol failures,savings cards, Said she sees very little IR or ER products being dispensed
PPLPMDL0020000001	Lakewood	OH	44107	6/26/2014	Dr have you ever thought about why prescribers dose opioids in 4 to 6 hour increments when they could go for a every 12 hour option like OxyContin or weekly dosing like Butrans? Dr said its an option and asked about managed care. Highlighted broad coverage reminded of coupons.
PPLPMDL0020000001	Cleveland	OH	44113	6/26/2014	Reviewed OxyContin every 12hours, FDA labeling describing abuse deterrent characteristics, said his position on treating pain hasn't changed, Discussed Butrans for those Tramadol failures you are sending to Pain Mgmt. said he will consider
PPLPMDL0020000001	Lakewood	OH	44107	6/26/2014	Gave the primary care insight. Dr said she doesn't select extended release opioids after NSAID. She said she always tried either Tramadol or hydrocodone first just to see if the pain can me covered acutely first and prn a few times a day. We talked about when that prn patient needs a scheduled product three times a days. I asked if that was atc to her and she said yes. I said an opportunity to think about is an extended release product like OxyContin or Butrans for a long term patient needing atc therapy. Reviewed dosing of OxyContin and also highlighted how long the product OxyContin has been on the market treating long term pain patients. Talked about Butrans being Schedule three. She said it didn't make a difference if it was two or three. Dr said she sees them back every month the patients on long term opioids. We talked about dosing, how ling to wear the patch and steady state. Reviewed managed care, she asked about caresource. Gave fair balance. The possibility of abuse potential with my products.
PPLPMDL0020000001	Hudson	OH	44236	6/26/2014	Quick hello at window in Hudson. I told him that I wanted him in the next couple of days to identify a patient for OxyContin like someone who is in pain on Percocet and then one who needs a dose adjustment on tramadol and is taking it every day to control pain. Dr said he's had success with Butrans recently but tries not to use much OxyContin and doesn't have many patients on Percocet. I asked him then to determine why Butrans is working on patients he has on it and mimic that criteria with other patients. Dr said ok. Left info.
PPLPMDL0020000001	westlake	OH	44145	6/27/2014	Np said she does not have experience writing oxycontin. Reviewed the dosing and the scheduline and asked her if she writes percocet, she said no. Gave her the fpi and we sat and discussed the section 12.3 of the molecule oxycodone and the half life of oxycodone and oxycontin half life. I asked her is somatic pain pain. She said yes. I reviewed updated indication and i asked how it differs from other opioids she writes. She said it didn't by much. I asked so why doesn't she want to a dose an appropriate pain patient who needs atc therapy with an every 12 hour single entity product instead of dosing it every 4 hours like the short acting products. She didn't have an answer but told me she will consult with the dcotrs before writing a schedule two product usually. NP told me she writes butrans for her neuropathic pain patients. I hilighted that opioids work best on somatic pain but she was the expert. NP said after lyric fails she will write butrans because they have chronic pain and she the patients don't have to take their medication every day just once a week. I said what other patients do you have that may like the 7 day treatment option for act pain. She said she hasn't used much other places. We talked about the med d patients overy 65 years of age. I highlighted our coverage and asked if the dosing schedule was an option for her or the caregivers helping them. She said she never thought about that population. We reviewed the no dose adjustment for the elderly.
PPLPMDL0020000001	Cleveland	OH	44125	6/27/2014	Reviewed OxyContin every 12hours along with Butrans for those patients requiring around the clock analgesia message, Savings cards and formulary grid, Said he will recommend for appropriate patients
PPLPMDL0020000001	Garfield Hts	OH	44125	6/27/2014	Reviewed OxyContin every 12hours along with Butrans for those patients requiring around the clock analgesia, Said he will consider for appropriate patients, no update on appt requests yet
PPLPMDL0020000001	Uniontown	OH	44685	6/27/2014	Walked in office as dr was walking out for the day and he asked me what's new. I told him about the OxyContin and Butrans indications and said I wanted to know his thoughts and then give him something to think about. Dr said the indications make sense and said it should be up to the physician to decide if the pain is severe enough. I told him thanks for the info and asked him to think about patients that require daily, around the clock opioid treatment who are currently taking IR opioids that are inadequate. I told him I hope OxyContin and Butrans are the options he considers first. Dr said he will and said he continues to want to move more and more patients to ER opioids anyway.
PPLPMDL0020000001	Akron	OH	44319	6/27/2014	Final call on office before retirement and asked him if he has initiated anyone on OxyContin or Butrans as we have discussed for almost 2 years? Dr said he has not. I told him I'm sorry his patients that may have been appropriate weren't even given the option.
PPLPMDL0020000001	Garfield Hts	OH	44125	6/27/2014	Visited Pain Mgmt (Abraham,Dalbir) IM(Kohler,Bogar,Morocco) OxyContin/Butrans Initiation/Titration
PPLPMDL0020000001	Berea	OH	44017	6/27/2014	Dr didn't have a lot of time today but we talked about the every 12 hour dosing and being about the tailor the dose with the no ceiling and 7 different doses. Highlighted the starting doses of Butrans and weekly dosing. Reminded of the experience kits.



	westlake	OH	44145	6/27/2014	Dr said he felt comfortable writing oxycontin for patients with ATC pain, he said he thought it still was a good choice for some patients. We reviewed the single entity, 7 doses and I asked if this would be helpful to make a tailored option for some patients. he said yes. Dr said he starts each patient on the 5mcg of Butrans. Reviewed the initiation guide but the doctor said he will treat them always with the lowest dose first. Talked about titration and steady state. Dr asked about supplementation with other nsaid or immediate release products. Reviewed various areas of FPI and reviewed the opioid naive study. Dr said it was a buprenorphine molecule and was unsure as to why he would add these products when you can't with naloxone. I offered to have the company provide him with more insight on that answer but dr said no. I asked the doctor if he every would consider using butrans after Tramadol with a patient that has atc pain. he said no. I asked why. Dr said because his not a full opioid and that maybe bid of a immediate release product would work for patient before going to an extended release product. We talked about Butrans and Oxycontin managed care coverage. The office has a great deal of carcasure, workers comp med d and commercial. Highlighted the experience kits. Spoke to the lady who does the sample tracking and handing out. She hands out the samples that the doctors request. I highlighted the experience coupons to grab first for butrans.
PPLPMDL0020000001	westlake	OH	44011	6/27/2014	Gave the FDA insight- dr said too many opioids are witting in the usa. Discussed all opioids can be abused and referred him to the fpi for specific detail. Dr said he has used Oxycontin for years. I asked him what was the medical rational for dosing someone in 4 to 6 increments around the clock and not giving someone the option for an every 12 hour opioid product. Dr said there isnt much, but he did say some patients may not always need that much opioid in their system. I said how do you know if someone needs every 12 hour dosing like Oxycontin to a patient you just mentioned. Dr said certain disorders, dr named it but I didn't understand what he said. I said so that's not all of them. he said no. Dr said he will write oxycontin either after hydrocodone or percocet when the patient is taking 4 or 5 a day. I said 4 or 5 a day of a short acting product? He said yes. I said let me give you a few options to consider today that are extended release and dosed either weekly or every 12 hours. I asked the doctor is it was out of the question to think about oxycontin as their first atc opioid? Dr said no it wasn't. I reviewed the doses for a tailoring the dose to the patients need. highlighted the 12.3 section of the fpi where talked about oxycondone and oxycontin molecule, along with single entity. Dr said Butrans has little experience with after tramadol for atc pain. Dr asked if it was dosed every 5 days. I told him every 7 days. Reviewed titration doses and supplemental
PPLPMDL0020000001	Cleveland	OH	44113	6/27/2014	Reviewed Butrans Med D formulary grid, Initiation/Titration, along with OxyContin Q12h for those patients requiring around the clock analgesia, Said ok, had a few Butrans patients this week, doing good, nothing new learned
PPLPMDL0020000001	Westlake	OH	44145	6/27/2014	Reviewed FDA insight. Discussed atc. Dr said he agrees OxyContin makes sense after Percocet. Talked about titration every 1 to 2 days. Talked about the range of strengths available. Dr said he has little experience with Butrans. But has used it after hydrocodone. Asked him what the last patient was removed from before going on Butrans and how many times. He said 4 times a day of hydrocodone. I asked how the patients experience was and he said it was a fight to get the patients to wear a patch. I suggested making Butrans the patients first atc option after Tramadol or hydrocodone. Dr said he will move from Tramadol to hydrocodone before he thinks about Butrans. Talked about no first pass and the dosing of Butrans. Asked him to think if he had just one patient that might like the option. Covered managed care
PPLPMDL0020000001	Garfield Hts	OH	44125	6/27/2014	Quick review of OxyContin every 12hours along with Butrans for those patients requiring around the clock analgesia, Said Ok will consider, no new info learned
PPLPMDL0020000001	Akron	OH	44312	6/27/2014	Speaking with Karla the RN in office about new indication for Butrans and dr said he heard my voice. I discussed the new indication with him and asked him what he thinks? Dr said it sounds good and doesn't think it will change much. Dr said that his butrans patients are doing well and he is continuing to look for new patients. I told dr that's good to hear. Nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44113	6/27/2014	Reviewed OxyContin Q12, along with for those patients requiring around the clock analgesia, Said he continues to support on the floor in hospital and will remind Dr. Shen as well
PPLPMDL0020000001	Fairlawn	OH	44333	6/27/2014	Spoke to Sue and Jessica about the new indications for OxyContin and Butrans. I read them the indication for OxyContin and asked her what she thought. Jessica said she thinks its much better and might allow for the doctor to make a better decision who is best for an ER opioid. I told Jessica I agreed and told her about how the indications for OxyContin and Butrans fit into the discussion about treating around the clock pain in 4-6 hour increments. Jessica said they see way too many patients continuing on short acting narcotics and have pain every day that may never go away.
PPLPMDL0020000001	Olmsted Falls	OH	44138	6/27/2014	Spoke to Tracey the office manager. Discussed Butrans and updated savings plans and coupons. Attempted to see the dr but they were too busy.
PPLPMDL0020000001	Akron	OH	44319	6/27/2014	I asked dr if he believes that OxyContin works? Dr said it does but can't use it because its either too expensive or its not even covered on insurance. I told dr it wounds like he has patients with insurance? Dr said its too expensive for them as well. I told dr he needs to be less concerned with cost and more concerned on what's best for his patients. Dr said he's done talking to me today. Told him I'm leaving a conversion chart for Butrans on
PPLPMDL0020000001	Garfield Hts	OH	44125	6/30/2014	Reviewed OxyContin every 12hours along with Butrans for those patients requiring around the clock analgesia, said he will continue to find appropriate patients. No change on apt policy
PPLPMDL0020000001	Mayfield Heights	OH	44124	6/30/2014	Met with med asst Abby who works with both Drs. Stanescu. Left packet of info for Dr. Roxana. Left and discussed Pam profile as being appropriate patient for both OxyContin and Butrans. Med D preferred status discussed both products.
PPLPMDL0020000001	Cleveland	OH	44104	6/30/2014	Quick review of OxyContin every 12hours along with Butrans for those patients requiring around the clock analgesia, Said Ok will consider for appropriate patients, No further info learned
PPLPMDL0020000001	Cleveland Hts	OH	44118	6/30/2014	Reviewed OxyContin Q12hours, along with Butrans for those patients requiring around the clock analgesia, Said He will continue to find appropriate patients, Reviewed formulary grids
PPLPMDL0020000001	Fairlawn	OH	44333	6/30/2014	Led with the OxyContin insight and told him that there is a new indication and I wanted to get his thoughts. Read the indication and dr said it sounds good and said he would feel much more comfortable using the patch. I asked him which patch? And he took the initiation and conversion guide and said Butrans patch. I told him that's great but why not OxyContin? Dr said he feels more comfortable using a schedule 3 product that's not an oral medicine. I told him then to look for patients needing a dose adjustment on tramadol or Norco. Dr said ok. Nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44109	6/30/2014	Reviewed w/ Malak, OxyContin/Butrans for those patients requiring around the clock analgesia, Savings Cards, Said Ok, nothing new learned
PPLPMDL0020000001	Cleveland Hts	OH	44118	6/30/2014	Reviewed with Opey RPH OxyContin/Butrans for those patients requiring around the clock analgesia, Said ok
PPLPMDL0020000001	Akron	OH	44333	6/30/2014	Told dr new OxyContin indication and asked him how he defines around the clock pain. Dr said when patients need medicine every day. I told him I assume he has patients on IR opioids who need multiple pills every day. I told him if he's treating around the clock pain in 4-6 increments he needs to use ER opioids like OxyContin or Butrans. Dr said ok and we can finish next time. Nothing else learned.
PPLPMDL0020000001	Mayfield Heights	OH	44124	6/30/2014	Front window w Denise (savings cards/prior auths/patient guides). Left Butrans FPI and new patient tear sheets. Showed Denise where changes are within patient guides, should Dr Dews or any of HCP's have questions.
PPLPMDL0020000001	Mayfield Heights	OH	44124	6/30/2014	Discussed OxyContin improved Med D access; then Butrans improved Med D access. Left initiation/titration guide (Butrans) for Dr. Dews. Denise states Frank NOW has his DEA so he's writing his own RX now. (need to add to tier target list) He's working w Dr Dews today (Gina F, CNP, at Hospital this week) Quick hello at window, introduction as rep for two ER opioids - OxyContin dosed every 12 hours, Butrans - 1x week buprenorphine patch. Left OxyContin reformulation folder, FPI. Left Butrans initiation titration guide, FPI, patient tear sheets. Non Branded: left OARS flashcard, Med 80 guidelines.
PPLPMDL0020000001	Richmond Hts	OH	44143	6/30/2014	Hallway. Pam profile. Discussed patient profile, discussed as option for OxyContin and in this case, since opioid naive, start 10 mg every 12 hours. Can titrate in 1-2 days to 15 mg if needed. Improved Med D access discussed. Then discussed Pam as also appropriate for Butrans 1 x week patch. A patient like Pam who failed on aspirin and has bleeding ulcer. Discussed no first pass liver metabolism, no dosing adjustment necessary for renal and mild or moderate hepatic impaired. He asked what's name of product again? I replied butrans. I will stop back next week to follow up. Please review Pam profile, FPI. Dr stated ok.
PPLPMDL0020000001	Cleveland Hts	OH	44118	6/30/2014	Reviewed OxyContin every 12hours along with Butrans for those patients requiring around the clock analgesia, Said he feels patients are controlled on present therapy, challenged on those patients that he does send to pain mgmnt, said he will consider
PPLPMDL0020000001	Mayfield Hts	OH	44124	6/30/2014	Lunch. Baby Boomer insight presented. Then Pam profile. Dr states he has several patients on 1-3 Tramadol daily who are doing fine. Why should he switch them to patch? Responded that I'm not asking for those patients, I'm asking for the patients who are failing on Tramadol, who are at 3-4 Tramadol daily. Went through Pam profile. Focused on bleeding ulcer due to continued aspirin therapy. Dr perceives OxyContin to having better Med D coverage than Butrans. In addition, he can't keep track of all plans, he just writes what he thinks is appropriate and hope it is covered. Discussed improved Med D coverage for his patients, and that means best available co pay for Med D patients. Also discussed Pam profile, as someone also a good candidate for OxyContin - lowest effective dose, start at 10 mg every 12 hours in opioid naive. Asked For Pam patient, today or this week; consider both of my ER products for daily atc long term pain. Ok, he will.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/30/2014	Led off with oxycondone insight and told him that the reason I'm telling him this is because there are too many patients being treated with around the clock pain in 4-6 hour increments. Dr agreed and said he has both types of patients though. I asked dr to explain and he said he does have patients continuing on Norco and Percocet and then those that are moved to ER opioids quickly. Dr said the patients on IR opioids are either in intermittent pain or are difficult patients who are never happy and have tried ER opioids and refuse to stay on them. I told him as long as he reassesses those continuing IR patients for ER opioids I'm ok with that. Dr said he does and said some patients who he will take to 3 IR opioids are never happy anyway and won't go over 3 maybe 4 pills. I reviewed new indication for oxycontin and Butrans. Dr said he likes it and actually remembered the old indications. Dr said the way the new indications read is exactly how he treats. I told him to continue writing Butrans an OxyContin and reviewed the Medicare coverage with Butrans. Dr said things are going well with Butrans.
PPLPMDL0020000001	Tallmadge	OH	44278	6/30/2014	Told dr about the oxycondone insight. Asked dr if it makes sense to him to treat pain around the clock in 4-6 hour increments? Dr said it depends who the patient is and what he's treating them for and said their practice refers to western reserve pain at the hospital for any one needing medicine every day to treat chronic pain. I told him I understand and asked him to look for patients currently taking products like Percocet and needing more than 3 pills to convert to OxyContin q12 as the same molecule just a different delivery system. Dr said he knows and just doesn't want to write it. I asked him if Butrans is an option and its a schedule 3 7 day patch? Dr said possibly and remembers talking to me about it before. Took the initiation and conversions guide.
PPLPMDL0020000001	Mayfield Heights	OH	44124	6/30/2014	First met with med asst Theresa. Reviewed patient tear sheets and asked her to make sure to give to every Butrans patient when leaving office. Also left her FPI and Formulary Grid. Discussed improved Med D status & specific plans. Was allowed back to Dr Vilinsky office. Med D Baby Boomer insight. Dr was surprised at US Census Bureau data. Discussed what this means to his practice, an influx of age 65 who need access to branded meds.
PPLPMDL0020000001	Mayfield Heights	OH	44124	6/30/2014	Discussed Pam profile and access to Butrans, butrans dosing, showed patch/disposal unit demo. Discussed Pam as also appropriate for 10 mg every 12 hours OxyContin start. Asked for patients like Pam today, this week. Dr Met with pharmacist Shirisha. (spelling?) Discussed changes to both OxyContin, then Butrans FPIs. Discussed scheduling, dosing for both products. Discussed addition of neo natal opioid withdrawal syndrome to both product black box warnings. Discussed Butrans patient guide and changes within.
PPLPMDL0020000001	Cleveland	OH	44113	7/1/2014	Reviewed Butrans for those patients requiring around the clock analgesia, Titration, Med D formulary status along with OxyContin every 12hours, 7 tablet strengths that are not controlled on present therapy, Said she will continue to advocate and prescribe for appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44127	7/1/2014	Reviewed OxyContin every 12hours, FDA labeling that discusses abuse deterrent characteristics along with Butrans for those patients requiring around the clock analgesia, Said he feels patients are controlled on present therapy, Asked why treat around the clock pain in 4-6 increments, patients are doing well but will consider for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44113	7/1/2014	Reviewed OxyContin every 12hours, FDA labeling that describes abuse deterrent characteristics, along with Butrans for those Norco patients failing on present therapy requiring around the clock analgesia. Said he will consider to find appropriate patients Reminded of OTC
PPLPMDL0020000001	Cleveland	OH	44109	7/1/2014	Reviewed w/Raj RPH OxyContin/Butrans for those patients requiring around the clock analgesia, See Butrans from Nickels, Torres, No new info learned
PPLPMDL0020000001	Westlake	OH	44145	7/1/2014	Spoke to the pharm d at the hospital and asked what the protocol was for getting Butrans on formulary. She told me to contact dr Patel or the medical pharmacy director mike. Pharmacist told me there is a non formulary form and that dr Patel could tell me the rest of the information.
PPLPMDL0020000001	Westlake	OH	44145	7/1/2014	Discussed how he uses OxyContin and the doctor said he rarely uses opioids. Talked about the patient that might need at opioid treatment, dr said he uses Percocet sometimes. We discussed OxyContin dosing and the 12.3 fpi where it states the molecule, half life. Also reviewed the 7 doses. Dr said he treats mainly over 60 years of age and not just osteoarthritis. Talked about Butrans. He has a patient on Tramadol uncontrolled that can't tolerate NSAIDs and he asked about writing Butrans. The patient has carcasure, reviewed the I formation. Talked about what start up patient looks like. Reviewed half life and supplemental for break through. Reviewed
PPLPMDL0020000001	Cleveland	OH	44113	7/1/2014	Visited Ortho/IM (Bhimani, Osorio, Stearns) OxyContin/Butrans Initiation/Titration guides, apt requests
PPLPMDL0020000001	Cleveland	OH	44113	7/1/2014	Quick call reviewed OxyContin every 12hours along with Butrans for those patients requiring around the clock analgesia, said he will consider, but is sending most patients to Pain mgmnt, nothing new learned

PPLPMDL0020000001	Akron	OH	44310	7/1/2014	Told dr about new indications for Butrans and OxyContin. Dr said it won't make a difference on how he prescribes because he isn't happy treating around the clock pain with short acting products. I told dr that's good to hear and asked him to continue using Butrans for those patients who he gets as referrals who are in pain around the clock and are inadequate. Asked for those on Percocet to convert to OxyContin and use the indication to determine who is most appropriate.
PPLPMDL0020000001	Westlake	OH	44145	7/1/2014	Talked about the patient taking two or more doses a day and when does he think the medication is atc. Said at least three doses. Is aid you have patients likes these don't you he said yes. I said have you considered moving to OxyContin sooner when the pain is atc. Drs aid he should try to remember that more often. Reviewed the dosing of every 12 hours and not bid the dr was aware. Reviewe Butrans experience kit.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/1/2014	I asked dr if he believes that patients being treated in 4-6 hour increments who have pain around the clock may not be the best method of treatment? Dr said he agrees that patients who require something for pain as a narcotic multiple times daily should be moved to an ER opioid. I told him about the OxyContin indication and asked him to please reevaluate his patients continuing on IR opioids for conversion to OxyContin as long as they meet the indication. Dr said we have discussed it before and tries to get most of his patients on ER opioids but cost and approval for ER opioids limits his ability. I told him I understand and told him I'm sure not ALL of those patients on IR opioids fit that description. Dr said ok and went into a room.
PPLPMDL0020000001	Akron	OH	44320	7/2/2014	I asked dr how she would define around the clock pain? Dr said when a patient is taking multiple pills per day. I asked what multiple pills per day means and dr said 3 or more a day. I read the OxyContin indication to her and asked her if patients taking 3 pills a day based on her response meet the indication of OxyContin or Butrans? Dr said she understands and said that she likes the new indication and its worded well. Dr said that she still may have issue writing OxyContin based on the office protocol but will look for Butrans patients.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/2/2014	Dr came to lunch for a few short minutes. Reviewed all key attributes and new indication for Butrans with dr. Dr said he uses Butrans for cancer pain. I asked him how its working and he said very well. I asked him the dose and he said he titrates to 20mcg and has the patients taking medicines for breakthrough with it. I asked dr what around the clock pain means to him? Dr said when patients want more pills than he's willing to give. I asked him specifically what that means and he said more than 3-4 pills a day or 90 a month. I told him those patients may be Butrans candidates and they don't have to be for cancer pain. I reviewed the in lesion criteria from Bup 3015 and asked him for more business from the patients on IR opioids. Dr asked if SummaCare is covering Butrans and I told him yes including aarp, and Silverscript. Dr said he's sold then and will use it more!
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/2/2014	Spoke with tech Amanda about OxyContin and Butrans key attributes and asked her if she knows about the new indications? Explained the key selling attributes for OxyContin and Butrans and she said that they have seen more recently and 15mcg dose needed to be ordered. I told her that's great and discussed appropriate patient types. Reviewed Butrans dosing and titration and okay cards. Pharmacy has all does in stock and dispenses most
PPLPMDL0020000001	Cleveland	OH	44103	7/2/2014	Reviewed w/Ebony OxyContin and Butrans message of treating pain around the clock pain, Said she will relay info to RPH, no savings cards needed
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/2/2014	Led with the tramadol insight and told dr about the new Butrans indication. Dr said he remembers Butrans and hasn't used it yet. I asked dr why not? Dr said that he has just forgotten about it and he's not opposed to using it. I started from the beginning and discussed all Butrans key attributes. I asked dr what arms the clock pain means to him? Dr said when patients need to take multiple pills a day to get pain relief. I asked if that means three or more? Dr said yes. I told him that I'm guessing that he has patient continuing on IR opioids like tramadol who are taking it 3 or more times a day and being refilled on it? Dr said I'm probably right. I told dr those patients may be appropriate for Butrans if they meet the indication or can't tolerate the IR or not getting adequate analgesia. Dr said he understands. I asked dr if he will use it for patients currently 3 or more IR opioids a day and meet the indication? Dr said he will then reviewed insurance coverage and copy cards.
PPLPMDL0020000001	Akron	OH	44333	7/2/2014	Discussed new indication for OxyContin and Butrans and she said it won't make a difference with how she prescribes. I told her that's good to hear but asked her to focus on patients who are in pain around the clock. Elise said she agrees and said anyone who needs more than 3-4 prns a day she will think Butrans or OxyContin and reserves OxyContin for those who are already on IR oxycodone. Elise said she does and will continue. Nothing else
PPLPMDL0020000001	Akron	OH	44313	7/2/2014	Dr asked me what's new and I told hi a new indication for OxyContin and Butrans. I handed him the OxyContin conversion and titration guide and read it to him. Dr said ok. I told him I want him to please determine what daily around the clock pain means this week and write OxyContin IR Butrans for patients that meet the indication. Dr said ok. Told him I want him to think of what it means to him and to keep patients already on oxycodone for conversion to OxyContin and tramadol and Norco for Butrans. Discussed indication to Tina the drs main MA and responsible for PAS. Nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44195	7/2/2014	Visited Tausig (OxyContin/Butrans initiation/Titration guides, appt requests
PPLPMDL0020000001	Waterford	OH	45786	7/2/2014	I-Butrans dosing and titration. OxyContin dosing, titration and managed care.W-excited about Butrans' new formulary coverage
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/2/2014	Led with tramadol insight and went into new Butrans indication. I asked dr to break it down for me and tell me what around the clock means to him relating to pain? Dr said when patients need multiple pills per day to control pain. I told dr that the problem is that I'm guessing many patients continuing on IR opioids like tramadol in reality meet the indication for Butrans and ER opioids in general. Dr said he agrees and said he tends to forget an Butrans and knows he has many more patients that he choice start on Butrans. Dr asked if BWC is paying for it and I told him they are. Dr said that makes a difference and said he will use it more. I reviewed dosing, titration and multiple patch use as well as copy cards. I asked him for more business from Medicare and BWC.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/2/2014	Led off with tramadol insight and went into indication for Butrans. I asked dr what pain around the clock means to him and he said the same as Laszlo which is multiple pills a day to get analgesia. Dr said he likes the indication and said he was glad I was there because he has forgotten about Butrans. I told him I know he's had success in the past and why that is not propelling him to use it more frequently? Dr said he doesn't know other than that he's been very busy. I reviewed patient type selection, dosing, titration, multiple patches and managed care. Dr said he will get back to using it and said the new Medicare coverage will help significantly.
PPLPMDL0020000001	Waterford	OH	45786	7/2/2014	I - OxyContin dosing, titration and managed care. Butrans indication, dosing, titration, managed care and co-pay cards.W-he said he tried to write Butrans for two patients today and that it was too expensive.
PPLPMDL0020000001	Cleveland	OH	44113	7/2/2014	Desk call, Reviewed OxyContin every 12hours along with Butrans for those patients requiring around the clock analgesia, Said Ok will consider, Once again Aurora confirmed he is not prescribing any new Opioids
PPLPMDL0020000001	Cleveland	OH	44113	7/2/2014	Desk call,Reviewed OxyContin every 12hours along with Butrans for those patients requiring around the clock analgesia, Said he will consider, nothing new learned
PPLPMDL0020000001	Cleveland	OH	44112	7/2/2014	Reviewed OxyContin every 12hours along with Butrans for those patients requiring around the clock analgesia, Said she will consider, hasnt had much success in sending those patients to PMgmt
PPLPMDL0020000001	Norton	OH	44203	7/2/2014	Asked why someone would dose someone in 4 to 6 hour increments several times a day when they could go for an extended release option of either every 12 hour dosing with OxyContin or weekly dosing of Butrans.<font color=blue><b>CHUDAKOB's query on 07/13/2014/</b></font>Again, good question, but I'm sure there much have been some discussion, right?<font color=green><b>BARTOLI's response on 07/14/2014/</b></font>Actually, not. The pharmacist shook his head and said it was the doctors call. I didn't get much more information or conversation further cause there was patients and he asked me to come back.<font color=blue><b>CHUDAKOB added notes on 07/14/2014/</b></font>My suggestion might be to not lead with a question as this can seem like they are being grilled, especially when they are very busy.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/2/2014	Led off discussion with dr about the tramadol insight and then went right into the new indication for Butrans. Dr said he thinks its well written and agrees with it and it will not change how he prescribes ER opioids especially Butrans. I told him I wanted to break the indication down and asked him what pain around the clock means to him? Dr said he won't write more than three(3) pills a day of any IR opioid and said he really only writes tramadol anyway. Dr said once a patient needs more than three pills he likes to go to Butrans. Dr said the only problem is that many patients don't do well with a patch or refuse to wear it. Dr Higley did say though that he will continue to use it when patients need more than 3 tramadol a day and try it in as many patients as he can. Discussed use of multiple patches and asked dr for continued support.
PPLPMDL0020000001	Barberton	OH	44203	7/2/2014	Dr said he doesn't treat with much oxycontin. I said why not. Dr said he doesn't have patients that need long term treatment of pain medications. I said dr have you ever written an oxycodone product. he said yes. I said that molecule is the same molecule of oxycontin expect oxycontin is sinlge entiry and has a control release delivery system over 12 hours. If you have a patient on an oxycodone product say taking more than 2 doses a day and they are not controlled...if you feel they need an atc opioid think oxycontin- review of burrans dosing andmanged care.
PPLPMDL0020000001	Barberton	OH	44203	7/2/2014	Opened with the opioid naive insight. Talked about that one patient that might be appropriate for an extended release option and a dosing scheduled either weekly like Butrans or every 12 hours like Oxycontin. I said why dose someone in 4 to 6 hour increments atc-with an immediate release opioid when they have the option of dosing it with 2 pills a day every 12 hour or in weekly dosing. Dr said she doesn't have many pain patients any more.
PPLPMDL0020000001	Cleveland	OH	44113	7/2/2014	Quick OxyContin review every 12hours along with Butrans for those patients requiring around the clock analgesia, Said Ok nothing new learned
PPLPMDL0020000001	Barberton	OH	44203	7/2/2014	Spoke to dr regarding how he treats patients with ATC therapy with extended release products. I said think about your immediate release patient taking more than 3 doses a day. I said is this isn't person considered ATC, he said yes. I said think about either Butrans weekly dosing as their ATC option after their immediate release product isn't providing adequet analgesia. I asked if this sounded reasonable. He said yes. I talked about Butrans weekly dosing and the experience kits left behind. Reminded him of the patient similarly already on an oxycodone molecule and not being treated adequetly and turning to Oxycontin as an option of dosing every 12 hours. I reviewed it was the same molecule, different delivery system and single entity.
PPLPMDL0020000001	Akron	OH	44333	7/2/2014	The told me that he heard of the new indications for ER opioids. I discussed the Butrans and OxyContin indications and asked him if it will change the way he prescribes? Dr said it will not. Dr said he recently had to discontinue Butrans in a patient who had a rash with Butrans who had been on it for some time. I asked dr if this is happening more often in the last couple of months and dr said yes it is. I asked dr if he believes its the patch or the sensitivity of the patients skin? Dr said he's not sure but maybe a little of both. I asked dr to please consider Butrans for his patients where Norco is inadequate and OxyContin for when Percocet is inadequate. Dr said does this sounds reasonable- for your patients not adequately controlled on more than 2 doses a day of immediate release opioids. Before reaching for a third dose...if you believe them to be an ATC patient think about dosing them Oxycontin every 12 hours or even butrans weekly dosing option.<font color=blue><b>CHUDAKOB's query on 07/13/2014/</b></font>Lisa, this is a question you asked, but I do not see a response. Did you just walk in and ask this question and leave?<font color=green><b>BARTOLI's response on 07/14/2014/</b></font>Dr said he doesn't like to write too many immediate release doses for chronic pain patients.<font color=blue><b>CHUDAKOB closed the query on 07/16/2014/</b></font>
PPLPMDL0020000001	Stow	OH	44224	7/3/2014	Discussed new Butrans indication with dr and asked him what his thoughts are? Dr said he guesses its ok but it won't make him write more or less narcotics. Dr said he has used Butrans on a few occasions with good success. Dr said its a great alternative to pills and likes that it a schedule 3 and lasts for 7 days. I told dr to take similar profiled patients to the ones on Butrans already and start new ones. I reviewed patient types, conversions and titration. Dr said he will continue writing and will look for new patients. Discussed the option of OxyContin and how the indication can also help him identify appropriate patients requiring daily, around the clock opioid
PPLPMDL0020000001	Cleveland	OH	44195	7/3/2014	Reviewed OxyContin every 12hours along with Butrans for those patients requiring around the clock analgesia, Said she will continue to prescribe for appropriate patients, Will follow up with formulary request after returning on the 15th
PPLPMDL0020000001	Cleveland	OH	44113	7/3/2014	Reviewed Butrans for those patients failing on present therapy requiring around the clock analgesia, Said she will continue to prescribe for appropriate patients requiring around the clock analgesia, Said Ok, nothing new learned
PPLPMDL0020000001	Hudson	OH	44236	7/3/2014	Spoke with glaiana the Pharmacist about Butrans and OxyContin and asked her if she has noticed an influx of patients filling prescriptions from summit pain? Dr said he would write OxyContin if appropriate. But was still hesitant of Butrans because its a newer drug. Discussed patients under 40 Mgs total daily dose of hydrocodone or under Tramadol, dr said he has these. I said if they were being treated with a few doses a day and were not satisfied with their pain relief would you change up their treatment. He said yes. I said is more than three doses of an opioid atc, he said yes. I said they are appropriate for Butrans, not acute patients. Highlighted the naive pain results and the dosing. Reviewed the discontinuation rate. I said how do these numbers sound to you? He said fine. I reminded him of managed care and asked him if that was taken out of the picture would he still write it. Dr said maybe.
PPLPMDL0020000001	Cleveland	OH	44125	7/3/2014	Highlighted one patient to try it on that might appreciate the weekly dosing. Highlighted managed care. Reminded him of OxyContin dosing and the molecule w delivery system.
PPLPMDL0020000001	Lakewood	OH	44107	7/3/2014	

	Hudson	OH	44236	7/3/2014	Discussed the oxycodone insight and hydrocodone insight. I asked dr what around the clock pain mans and she said her first patient is in 5 minutes and said that she will not write OxyContin because she will not write any schedule 2 narcotics but said she has a patient she is considering for Butrans. Dr said the patient is taking 5/325 Norco q6 and continues to be in pain and said she doesn't want to give more pills. I explained to her about initiating on the 10mcg dose and discussed titration and discussion of Butrans key attributes she can convey with the patient. Dr said ok and will let me know.
PPLPMDL0020000001	Garfield Hts	OH	44125	7/3/2014	Visited Pain/dept. (Abraham,Samuel,Dalbir) OxyContin/Butrans Initiation/Titration guides
PPLPMDL0020000001	Stow	OH	44224	7/3/2014	Speaking with Laura who works with Barb on prior authorizations about the new Butrans indication spoke with dr Geiger about the indication. Dr said he really likes it and hope it will help to justify ER opioid use. I told dr that's good to hear and asked him to identify patients who need to take opioids on a daily basis and around the clock. Dr agreed and said he wanted a copy of. Butrans initiation and titration guide. Nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44111	7/3/2014	Talked about OxyContin dosing and titration. Reviewed Butrans dosing and patch placement.
PPLPMDL0020000001	Hudson	OH	44236	7/3/2014	Led off conversation with dr the tramadol and hydrocodone insight and asked him if he thinks treating daily, around the clock pain in 4-6 hour increments make sense? Dr said it doesn't and said but there are many things that get in the way of converting patients to ER opioids. Dr said there aren't many patients that are motivated to change or ask to change to ER opioids because they like the way IR opioids make them feel. Drs also said that patients use the cost excuse as to why they want to start on their IR opioid because ER costs too much. Dr said the discussion in the exam room is far different than I think the way it is. Dr said its a consistent struggle to get parings on the most appropriate medicines. I talked to dr an setting the expectation early on in treatment with narcotics and your koan for their treatment in the future. Dr agreed. I discussed Butrans indication and told him to focus on patients requiring daily, around the clock pain. Dr said around the clock is 3 or more pills a day. I told dr to identify who those patients are and assess them for the appropriateness for Butrans or OxyContin.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	7/3/2014	Reviewed dosing and titration of both products.
PPLPMDL0020000001	Lakewood	OH	44107	7/3/2014	Dr back from vacation and asked what's new at window. I asked to come back to also speak with Darlene I discuss new Butrans and OxyContin indications. Read the Indications and asked dr what she thinks? Dr said it sounds good and said she has used a little more Butrans and is having been results. I told her to focus on patients that meet the specifics of the indication which is dally, around the clock. Dr said ok. Told her to not forget OxyContin as well and use it for those who Percocet is inadequate.
PPLPMDL0020000001	Lakewood	OH	44107	7/3/2014	Think about for a moment your patient taking more than 2 doses of an immediate release opioid and not controlled. If you decided to change their treatment option- OxyContin every 12 hour dosing if your patients are on oxycodone. Or Butrans weekly dosing for patients under 40 mg of hydrocodone. Would you have any hesitations doing this? Dr said what is managed care like...I asked what plan? He said in general. I reviewed managed care.
PPLPMDL0020000001	Lakewood	OH	44107	7/3/2014	Why dose someone at in 4 to 6 hr increments when they have the option of OxyContin very 12 hours or Butrans every week? Dr said he will remember.
PPLPMDL0020000001	Fairview Park	OH	44126	7/3/2014	Talked about the pain insight and the Butrans naive study results. Talked about patiens Nader 80 mg morphine equivalent appropriate to start Butrans. Weekly dosing , patch rotation and managed care. Dr said more than 2 doses a day is atc. I asked if it was reasonable to ask that her oxycodone patients that are appropriate like discussed who are not well controlled if they could be given the option of OxyContin 10mg. She said if appropriate. Reviewed doses.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/3/2014	I want to point out an option for your atc pain patients who are currently taken 2 or more doses a day and are their. Medication needs to be adjusted. One option is OxyContin which is dosed every 12 hours- and our lowest starting dose is 10mg. Another is Butrans, a pain patch dosed weekly and initiated on patients under 80 mg morphine equivalent at either 5mcg or 10mcg. Dr said ok he will think about it and walked away.
PPLPMDL0020000001	Garfield Hts	OH	44125	7/3/2014	Discussed new indications for Butrans and Oxycontin. Glenn said he likes how it worded and said it may help with prior authorizations. I told Glenn if he thinks so that's great to hear. Glenn said he continue to get prior authorizations for Butrans. I asked him if its just Butrans and Glenn said no. Every ER opioid theses days requires one Glenn said. I asked if he's getting the, approved and he said most yes. I asked him if the same problem occurs with OxyContin? Glenn said yes more than ever. Nothing else learned.
PPLPMDL0020000001	Hudson	OH	44236	7/3/2014	Reviewed OxyContin every 12hours along with Butrans for those patients requiring around the clock analgesia. Said Ok. Asked Gwen for assistance, said she mainly deals with Diabetes, but will assist when appropriate. Discussed the oxycodone and hydrocodone insights and told him that too many apricots are being treated for around the clock pain in 4-6 hour increments. Dr agreed and said that doctors including himself are to blame for that. I told dr I'm surprised to hear that coming from him but I agree! I told him that the expectation for the treatment of pain must be set to the patient early on in treatment. Dr said he agrees and said its just not that easy. Dr said patients are stubborn and manipulative and said he doesn't want to even treat any pain other than acute. I told him that with products like OxyContin and Butrans the specific patient selection is vital. I told him that each requires patients that are motivated to change from IR opioids, can be trusted,and meet the indication. I told him about the new OxyContin and Butrans indications. Dr said ok but said he still won't write OxyContin much and said he will try to start someone on Butrans. I asked him if he has patients that are taking more than three prn pills a day for pain? Dr said lots of them. I asked him what's keeping him from converting them to ER opioids? Dr said he just doesn't want to use them. I told dr he's already treating them for around the clock pain but just in IR opioid form and I don't get it. Dr said he can't explain it but will try for Butrans.
PPLPMDL0020000001	Cleveland	OH	44114	7/7/2014	Reviewed OxyContin every 12hours along with Butrans for those patients requiring around the clock analgesia, Savings Cards, formulary grid, Said Ok will consider for appropriate patients, Asked John for assistance in reminding Dr. Said he will.
PPLPMDL0020000001	Westlake	OH	44145	7/7/2014	Talked to the nurse illada regarding her day and job duties. She told me that the office has changed alot and they all rotate spots each day. Jackie is Drs usually nurse and she handles all his authorization. She said the doctor requests the coupons usually and the nurses usually don't give out coupons just the doctors. I talked about oxycontin control release opioid for appropriate patietns with long term pain. showed her the types of pain from the visual aid that oxycontin may be appropriate for...lower back pain, cancer pain. Talked about the patient needing an adjustment in their treatment and oxycontin dosed every 12 hours and butrans dosed weekly. Left fpi's and gave initiation guides for the doctors.
PPLPMDL0020000001	Cleveland	OH	44127	7/7/2014	Reviewed OxyContin every 12hours along with Butrans for those patients requiring around the clock analgesia that are failing on present therapy, Said she will consider for appropriate, Reviewed Formulary status, savings cards, Initiation/Titration, Said she had 1 patient in mind, asked for Renee help on reminding and follow up on utilization
PPLPMDL0020000001	Westlake	OH	44145	7/7/2014	Said hello to the doctor- told him to keep an eye out for those appropriate patients what need a control release opioid option like butrans or oxycontin. Highlighted the coupons.
PPLPMDL0020000001	Cleveland	OH	44114	7/7/2014	Reviewed OxyContin every 12hours, formulary status, along with Butrans for those patients requiring around the clock analgesia, Initiation/Titration, Said he continues to find appropriate patients, no new info learned
PPLPMDL0020000001	Akron	OH	44313	7/7/2014	I told dr the oxycodone insight and told him about the new indication. I asked dr to identify patients who he continues to refill their IR opioids for and to ask himself what pain around the clock means and to write OxyContin for those patients. I asked him to write more Butrans and to ask the same things for Butrans and to keep the indication in mind when deciding to refill he short acting. Dr said he knows he should be using more ER opioids but said he just doesn't think its for him to decide. Dr said we will resume next time.
PPLPMDL0020000001	Berea	OH	44017	7/7/2014	Opened with primary care insight. dr said he thinks extended release products are good when used appropriately by the primary care doctors. Dr said he tends to write more generic products. I asked what generic extended release product does he use...any oxycodone? Dr said seldomly. I talked about the oxycodone molecule referencing section 12.3 of the fpi. Dr said he was aware it was the same molecule. We reviewed single entity and control release. Highlighted the 7 doses, showed the visual aid as reference. I said if you find your patient needing a change in therapy and they need an atc opioid product. Oxycontin- reviewed coupons and Butrans weekly option with saving card options for patients.
PPLPMDL0020000001	Fairlawn	OH	44333	7/7/2014	I told dr I have something new and its the indications for ER opioids. I read him the OxyContin indication and asked him what he thinks of it? Dr said it makes sense and said he likes how it says pain severe enough. I told him that's good to know and asked him what pain around the clock means? Dr said we talked about this already and he said when. A patient is taking multiple pills a day. I asked him for a number and he said three to four. I told him to assess patients who meet that criteria and convert them to an ER opioid like OxyContin or Butrans. Dr said ok.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/7/2014	I told dr that I'm guessing he treats pain in some fashion. Dr said he does. I asked him if he treats patients who have pain around the clock? Dr said he's not sure what that means. I told dr that typically pain around the clock means that patients require analgesics on a daily basis and have pain for an extended period of time. Dr said he does. I asked him if he currently has patients on Percocet or tramadol. Dr said he does. I told him when those patients analgesics do not provide adequate analgesia or can't tolerate them to move to an ER opioid like OxyContin or Butrans. Dr said ok. I asked dr if he would convert a patient to OxyContin if a patient on Percocet met any of those criteria? Dr said he would fell more comfortable with Butrans. I asked why and he said because its a schedule 3 and its a patch. I told him that's good to know but why not OxyContin if they are already on oxycodone? Dr said he doesn't know and said he had to get to his last patient.
PPLPMDL0020000001	Akron	OH	44333	7/7/2014	At front counter discussing new OxyContin and Butrans indications with Marsha Fox and dr came up to the window and asked what's new. I read hi. The OxyContin indication and asked him what around the clock means to him? Dr said a patient that needs something every day for pain. I asked him if he could put a number of times a day on it? Dr said he's not sure and we can discuss next time. I told him to think about that term for OxyContin and Butrans and when it would make him move to an ER opioid. Dr said ok.
PPLPMDL0020000001	Akron	OH	44333	7/7/2014	Spoke with nancy the lead technician about OxyContin and Butrans. She said she didn't know much any Butrans but said they do fill OxyContin. I asked her how frequently she sees new prescription of OxyContin and if she dispenses Percocet? Nancy said they have a new OxyContin every now and again and said most are refills. She said they see most short acting opioids than anything else. I explained the conversions and titration of OxyContin and then discussed the Butrans key attributes. Nancy said Butrans sounds like a great product. Discussed copay cards.
PPLPMDL0020000001	Westlake	OH	44145	7/7/2014	klye the pharmacist said she was aware of the dosing of both oxycontin and butrans . Talked about the titration options with both products. Reviewed butrans and the patch location sights. Talked about not returning to the original application sight for 21 days per the studies. Also talked about what patients can use for break thru medications.
PPLPMDL0020000001	Cleveland	OH	44109	7/7/2014	Visited PMR,JM,FP depts, OxyContin/Butrans Initiation/Titration guides, formulary grids, Appt requests
PPLPMDL0020000001	Fairlawn	OH	44333	7/7/2014	Dr said he remembers that I have OxyContin and Butrans and said that he does not like to write for ER opioids especially in Ohio. Dr said that he refers out to pain management for most patients. I asked dr at what point that is? Dr said he will continue treatment for his long standing patients who he knows and trusts . I asked dr if any of those patients are on IR opioids? Dr said some. I asked if they have acute or prn pain and dr said no. I asked why he isn't converting them to ER opioids if they don't have acute or prn pain? Dr said I have a good point and asked me to give him more information on Butrans. Reviewed key attributes, specific patient selection,conversions, and dr asked about Medicare coverage. Reviewed med D grid and dr said he's impressed. I asked dr if he will use it and he said he would and wanted to keep the conversion and titration guide.
PPLPMDL0020000001	Westlake	OH	44145	7/7/2014	Talked to laura the ma about oxycontin and butrans appropriate types of patients who may need a control release medication either once a week dosing (like butrans patch) or every 12 hour dosing like OxyContin. Left managed care grids and fpi's.
PPLPMDL0020000001	Westlake	OH	44145	7/7/2014	Gave the extended release insight. Reviewed if he has patients already on an oxycodone molecule and require a dose adjustment to more than 2 a day couldn't that patient be a candidate for an atc product like oxycontin? He said maybe. Its the same molecule, yet oxycontin is single entity and is dosed every 12 hours instead of every 4 to 6 hours. If patients prefer less medication than every 12 hours like Oxycontin for the ATc, patients may also be a candidate for Butrans dosed weekly if they are appropriate and are under 80mg morphine equivalent. Starting off at either 5mcg or 10mcg depending on the what they were on previously. Highlighted the experience kit with LORI and h himself.
PPLPMDL0020000001	Akron	OH	44333	7/7/2014	Met dr for first time and asked he about her experience. Dr said she trained at akron general and went through a pain management rotation. I led things off by talking about he tramadol and hydrocodone insights and asked her her thoughts. Dr said she was trained in school to convert to ER opioids when the pain isn't acute or prn. Dr said she can't understand why doctors don't do it. Dr said that she figures IR opioids are cheaper and its easier for them to write refills instead of branded ER opioids. Talked about the solutions with OxyContin and Butrans for ER options, product attributes for each and specific patient type selection for OxyContin and Butrans. Dr said she understands OxyContin and said the Butrans information was very helpful. I asked her to use it on the right patient at the right time and allow the product to speak for itself. Dr agreed she would try. Discussed managed care for oxycontin and Butrans and copay cards.
PPLPMDL0020000001					

	Westlake	OH	44145	7/7/2014	Saw dr thru window. I asked the doctor if he doubts the managed care coverage with Butrans? He said no, but he does have problems once and a while. I said if managed care were thrown out the window and you could get anything you wanted would you write more Butrans for patients under 80mg morphine equivalent? He said yes. I said well...reviewed the major plans, caresource and med d plans big to his office. I said are most of the patients you are converting to Butrans coming from tramadol or a hydrocodone product. he said hydrocodone. I said here's something to think about- if you have a patient taking 2 or more immediate release products and they still aren't controlled...why add more immediate release product dosed every 4 to 6 hours when you can offer the butrans patch at weekly control release dosing...even oxycotin is dosed every 12 hours. Dr said yes he thinks that is a good spot for Butrans. Spoke to Kelly the office manager and Jeanette about prior authorizations and their role in the office. They handle some of this and the RN in the back (name forgot) handles alot. I asked to see her but she was busy with the doctor.
PPLPMDL0020000001	Cleveland	OH	44120	7/7/2014	Reviewed with Tech Cindy OxyContin every 12hours along with Butrans 7 day transdermal for those patients requiring around the clock analgesia, Said she will relay info to Ebony RPH
PPLPMDL0020000001	Berea	OH	44017	7/7/2014	Opened with primary Care insight- I asked the doctors when a patient needs a change in therapy and are on more than two immediate release products- what is your hesitation for writing an atc product like OxyContin dosed every 12 hours or Butrans dosed weekly? Dr. Ludwig said price and Dr. Powers said she doesn't write schedule 2 products. Dr powers said she just started someone on 5mcg of Butrans and used the Experience kit. I asked what product did they fail that they needed a change in therapy. Dr. powers said they were taking hydrocodone 3 times a day. Reviewed the strenths availalbe and reminded her of the patch rotation not going to the same sight for 21days.
PPLPMDL0020000001	Westlake	OH	44145	7/7/2014	I wanted to see how you think a control release product dosed either weekly like butrans or every 12 hours like oxycotin might be an option for patients requiring atc pain therapy. Do you think you have one patient that may prefer a dosing scheduled like this rather than being dosed in 4 to 6 hour increments several times during the day? Dr said maybe a few. I said great. If you are going to make a change anyway for them...consider Butrans 5 or 10mcg starting dose or Oxycontin's lowest dose is 10mg every 12 hours.
PPLPMDL0020000001	Westlake	OH	44145	7/7/2014	Waved thru the window. Dr said Butrans right. I said actually I was going to remind you that if your patients are not currently controlled and you decide to make a change for them...if they are taking oxycodone more than twice a day- why not consider a control release product like Oxycontin dosed every 12 hours or even butrans dosed weekly if they are appropriate. He said ok thank you and walked away.
PPLPMDL0020000001	Cleveland	OH	44127	7/7/2014	Quick review of Butrans for those patients failing on present therapy requiring around the clock analgesia, Said Ok no new info learned
PPLPMDL0020000001	Garfield Hts	OH	44125	7/8/2014	Reviewed with Cindy Tech, OxyContin/Butrans savings cards,
PPLPMDL0020000001	Olmsted Falls	OH	44138	7/8/2014	Spoke to Tracey, she told me that today wasn't a good day for the doctor and i asked if she could pass any information over to the doctor she said dhe would. Reviewed the oxycontin dosing with 7 strenths, lowest dose is 10mg dosed every 12 hours. also talked about Butrans- for the patient needind daily atc opioid pain medication dosed weekly. reviewed experience program.
PPLPMDL0020000001	Garfield Hts	OH	44125	7/8/2014	Reviewed OxyContin every 12hours,Formulary status, Savings cards along with Butrans for those patients requiring around the clock analgesia, Said he will continue to support for appropriate patients
PPLPMDL0020000001	Tallmadge	OH	44278	7/8/2014	Said hello to dr and told him I needed a quick second t tell him something new. Dr said quickly so I told him about the new indications for OxyContin and Butrans. Told him how they differ from the old ones and asked him to please identify patients that meet the indications and convert them to either OxyContin or Butrans. Dr said ok. Nothing else learned.
PPLPMDL0020000001	Akron	OH	44305	7/8/2014	Spoke with pharmacist Nikki who said she remembers talking with me back in March. Nikki said she hasn't seen Butrans prescriptions in a while and said they dispense more Percocet than anything else. I asked her if she is getting prescriptions from pain management? Nikki said yes and that who is writing most of the immediate release products. I spoke with her about conversions from Percocet to OxyContin and reviewed the new indication. Nikki said she likes how it sounds and fits ER products well and said as long as doctors write appropriately. I told her I agree and reviewed Butrans key attributes. Nikki said they only have the 5 mcg in stock. She said they do have one copy card on the shelf with the 5mcg.
PPLPMDL0020000001	Tallmadge	OH	44278	7/8/2014	I asked dr what's stopping him from converting patients taking Percocet daily and around the clock to OxyContin? Dr said his patients won't take it. I asked why and dr said its got too much baggage and he knows he should be trying with his patients harder but its too difficult. I asked for him to find just one patient who is motivated to change and dr said he would. I showed dr the Butrans MVA page with the doses and new indication. I read him the indication and asked him to focus on a patient who needs a dose adjustment on tramadol or can't tolerate it. Dr said ok. I asked dr what his hesitation is with writing Butrans? Dr said mainly cost. I asked him if he knows what Butrans costs? Dr said its a branded medicine so its definitely more expensive than a generic. I told him not necessarily. Told him about the plan coverages, copy cards and average copays. I asked him if that's competitive with a generic? Dr said it wounds good and he will consider it.
PPLPMDL0020000001	Euclid	OH	44119	7/8/2014	Left packet of info at nurses station. Since Carla RN not available (training new nurses) - could not access Dr. Saeed. Left packet of info including for Dr Saeed including OxyContin FPI and conversion guide/Butrans FPI, initiation guide, Butrans tear sheets. Left pack of Butrans patient guides for RN Carla too.
PPLPMDL0020000001	Berea	OH	44017	7/8/2014	spoke to the nurse and she said it was very hard to see the doctor. Reviewed oxycotin and butrans dosing and savings program.
PPLPMDL0020000001	Akron	OH	44305	7/8/2014	I told dr that he has told me before that he has patients on tramadol who are taking 3 or more of them a day. Dr said he does. I asked if they are currently being treated for acute or prn pain? Dr said some but not all. I asked why he's not converting them to Butrans then? Dr said he doesn't know but said he should be considering it. Dr asked about Medicare and Medicaid coverage. Discussed plans and Caresource PA. I reviewed the indication and told him to look for patients on tramadol who meet it and write Butrans. Dr said ok. I reviewed OxyContin dosing and conversions.
PPLPMDL0020000001	Euclid	OH	44132	7/8/2014	Lunch. Baby Boomer Med D insight. Dr & CNP Cara surprised at # of patients turning 65 in USA. Lead to Pam profile, Discussed Pam as opioid naive patient, covered on Medicare D. Discussed types of pain such as osteoarthritis that may cause patients to present with daily, act, long term pain. First option is CII OxyContin, single entity, can titrate up OR down in 1-2 days. Discussed adverse events and that they were similar in both elderly and younger subjects in clinical trials. Discussed cut dose to 1/3 to 1/2 for elderly debilitated. Med Asst came into lunch room asking Dr. Brobbey to sign RX. I stated, I hope that's for OxyContin or Butrans. He told me that it was OxyContin 10 mg start. I asked him to tell me about the patient: he responded: for 80 yr old female, multiple myeloma - spinal fractures - I thanked him for confidence in OxyContin and we discussed clinical data in OxyContin FPI. If patient needs to be titrated, he can do so in 1-2 days and titrate to 15 mg every 12 hours. Transitioned to Pam profile, and possible Butrans start. Discussed opioid naive like Pam or patient on 2-3-4 Tramadol daily. Before writing your next Tramadol refill this week, consider Butrans CIII 1x week patch. I asked Dr. if he has any issues with buprenorphine molecule? He does not - he "just hasn't found the right patient yet." He asked where Butrans is covered? I replied with commercial/Med D status. He was satisfied with response. Asked him to write both OxyContin, Butrans for patients
PPLPMDL0020000001	Garfield Hts	OH	44125	7/8/2014	Window call Reviewed OxyContin every 12hours,7 tablet strengths, Savings cards along with Butrans for those patients requiring around the clock analgesia, Said Ok will consider, referred to Colleen RN,said she will assist in reminding Dr and requesting appt.
PPLPMDL0020000001	Cleveland	OH	44125	7/8/2014	Brief intro. Reviewed OxyContin every 12hours 7 tablet strengths along with Butrans for those patients requiring around the clock analgesia. Said Ok, requested appt. Schedule with Antoinette when she returns.
PPLPMDL0020000001	Garfield Hts	OH	44125	7/8/2014	Visited IM/Ortho depts OxyContin/Butrans Initiation/Titration guides and requested appts
PPLPMDL0020000001	Euclid	OH	44117	7/8/2014	Med asst gave dr demico my business card. Dr DeMiccio came out and asked me to sit in his office he was going into patient room and he'd be right in. We discussed attributes of OxyContin including signal entity opioid, every 12 hour dosing, side effects similar for elderly & younger subjects in clinical trials. Using FPI discussing dosing for special populations including renal, hepatic, females, elderly debilitated at 1/3 to 1/2 normal dose. Ability to titrate up or down in 1-2 days. Butrans, CIII, 1x week burprenorphine patch, no first pass liver metabolism, 4 strenths for dosing flexibility, 8 application sites, titrate every 72 hours; then discussed and paged through Butrans patient tear sheets. Asked him to hand out to all new Butrans starts. Asked med asst/OM who normally would hand out patient education/they responded Dr DeMiccio. They don't have any system set up at check out up front. Asked for business this week, for both OxyContin/Butrans when patients present with daily, act, long term pain. Dr agreed he would write.
PPLPMDL0020000001	Euclid	OH	44119	7/8/2014	Quick hallway call. Med D Baby Boomer insight. Paul was surprised at the data. Then discussed patient like Pam, who's covered on Med D. She could be appropriated OxyContin or Butrans patient at start dose of either product. OxyContin, CII, single entity opioid, titration up or down possible in 1-2 days. Improved Med D coverage. Butrans, CIII, 1x patch, no first pass liver metabolism, 8 possible application sites, 4 strenths for dosing flexibility. Improved Med D access. Please keep patients like Pam in mind this week, for either OxyContin or Butrans. Left Butrans updated tear sheets. (left packet of info for Dr. Nageeb) Carla Van Pelt RN, not available, as she's training 2 new nurses on floor.
PPLPMDL0020000001	Cleveland	OH	44125	7/8/2014	Reviewed w/Lorraine OxyContin /Butrans for those patients requiring around the clock analgesia. , Initiation/Titration guides. Dr. is only at Marymount on Wed. Half day
PPLPMDL0020000001	Cleveland	OH	44125	7/8/2014	Quick review of OxyContin every 12hours,along with Butrans for those patients requiring around the clock analgesia,Formulary grid, Said he is referring to pain mgmnt, no further info learned, Talked with Maria, no appts accepted...yet
PPLPMDL0020000001	Garfield Heights	OH	44125	7/8/2014	NP not at this location. last known address..593 Eddy St. Providence RI 02903 401-444-5545 and 2Dudley Street suite 470 Providence RI 02905<font color=blue><b>CHUDAKOB's query on 07/22/2014</b></font>-Mark, this would not go down as a call at all as no product discussion occurred.<font color=green><b>GUTKOMA's response on 07/22/2014</b></font>-Ok<font color=blue><b>CHUDAKOB added notes on 07/27/2014</b></font>-Thank
PPLPMDL0020000001	Cleveland	OH	44125	7/8/2014	Quick review/intro OxyContin every 12hours, 7 tablets strengths along with Butrans 7 day transdermal for those patients requiring around the clock analgesia, Said Ok requested appt
PPLPMDL0020000001	Akron	OH	44320	7/9/2014	Very short conversation in hallway about OxyContin and Butrans. I told him he needs to be assessing patients on Percocet and ask himself if the patients is using it around the clock on a daily basis and those using tramadol or Norco the same way for Butrans. Dr said its difficult to get patients to change their medicines. I told him its not easy but it all starts with the continued assessment of their pain control. Dr agreed said ok. Nothing else
PPLPMDL0020000001	Garfield Hts	OH	44125	7/9/2014	Quick review of OxyContin every 12hours along with Butrans, 7 day transdermal for those patient requiring around the clock analgesia,Said ok , booked lunch appt with Kelly to further discussion
PPLPMDL0020000001	Cleveland	OH	44195	7/9/2014	Quick Butrans review for those patients requiring around the clock analgesia,along with OxyContin, said ok will continue to find appropriate patients,
PPLPMDL0020000001	Mayfield Village	OH	44040	7/9/2014	Spoke with pharmacist Tom. Discussed OxyContin FDA draft guidance. Discussed every 12 hour dosing and ability to titrate up or down in 1-2 days. Discussed appropriate patient as: having daily, act, long term pain. Left OxyContin FPI. Discussed updates to Black Box warning & indication, then for Butrans: update to black box, indication, patch worn 1x week. 4 strenths, 8 application sites. Asked tom if he is comfortable dispensing my products. Yes, he replied. He has Butrans on shelf, hasn't dispensed recently. Asked how savings for both products going @ point of sale. No problems he replied. Showed him non branded items I discuss with HCP's including red, protect your practice brochure.
PPLPMDL0020000001	Cleveland	OH	44106	7/9/2014	Reviewed OxyContin every 12hours, Savings Cards along with Butrans for those patients requiring around the clock analgesia, Initiation/Titration guides, Said ok will continue to find appropriate patients, no further info learned, Requested lunch appt. with Terra
PPLPMDL0020000001	Cleveland	OH	44195	7/9/2014	Reviewed OxyContin every 12hours along with Butrans for those patients failing on present therapy requesting around the clock analgesia, Said she will keep working on finding appropriate patients, Asked again for inservice opportunity, she is still working on obtaining
PPLPMDL0020000001	Rocky River	OH	44116	7/9/2014	Window. Waved, said I have some interesting things about OxyContin to share with you. HE Said he didnt have time today.
PPLPMDL0020000001	Mogadore	OH	44260	7/9/2014	Told dr I needed to talk to him about something new and important with Butrans. Dr said he only for a second and I told him about the new Butrans indication and how important it is to his prescribing of opioids. I told dr to focus on the words daily around the clock treatment. Dr said he does like that wording and said it won't change the way he prescribes opioids. I told him I hope it gets him to think more about patients that are being treated around the clock with IR opioids and to move to Butrans or OxyContin.
PPLPMDL0020000001	Westlake	OH	44145	7/9/2014	Talked about the dosing of both oxycontin d Butrans with Laura the ma upfront.
PPLPMDL0020000001	Akron	OH	44312	7/9/2014	Spoke with Gary about new indications for OxyContin and Butrans. Reviewed them with him and asked him his thoughts. Gary said it sounds good and said he likes the term around the clock. I asked him what he thinks it means and he said someone who needs something all day. I told him that's good to hear and gave him the hydrocodone insight. Gary said its disturbing and that they fill a lot of short acting prescriptions. Discussed OxyContin conversions and dosing as well as copy cards. Butrans dosing, conversions and patient types. Gary said they do see some prescriptions from dr Cain and some from dr Buis but that's about it.
PPLPMDL0020000001	Cleveland	OH	44106	7/9/2014	Referred to by Dr. Acheson as contact within FP dept for product discussions

PPLPMDL0020000001	Westlake	OH	44145	7/9/2014	Spoke the ma about Butrans and OxyContin savings cards and the updated managed care grids.
PPLPMDL0020000001	North Olmsted	OH	44070	7/9/2014	Talked about FDA insight and dosing of both OxyContin and Butrans. Talked about Butrans patch locations and how to discard of the patch.
PPLPMDL0020000001	Cleveland	OH	44106	7/9/2014	Reviewed w/Margie OxyContin/Butrans savings cards, Initiation/Titration No new info
PPLPMDL0020000001	Cleveland	OH	44195	7/9/2014	Visited Walker Bld Pain Dept (Crawford,Raymond,Minzter) OxyContin/Butrans Initiation/Titration
PPLPMDL0020000001	Mayfield Village	OH	44143	7/9/2014	Left and discussed items left for Dr. Krishnan with med asst: OxyContin FPI, conversion guide, savings sell sheet & Butrans FPI, titration guide. 2 options for your patients with daily, atc, long term pain.
PPLPMDL0020000001	Mayfield Heights	OH	44143	7/9/2014	Met with med asst front window. Left packet of info for Dr. Moyal including OxyContin FPI, conversion guide, savings sell sheet. Left Butrans FPI, titration guide. Left same for dr papirowa. MUST CALL TUES WED OR FRI NEXT WEEK, OM, PEG, TO SCHEDULE LUNCH.
	Mayfield Village	OH	44040	7/9/2014	Hallway call. Baby Boomer insight, dr surprised at data. discussed increase in 65+ age group who will need branded meds. Discussed daily, atc, long term pain. discussed OxyContin first and product attributes including: Il doses every 12 hours, pH independent, single entity, proven efficacy since Jan 1996, ability to titrate 1-2 days, START principles to assist him when converting from oxycodone or Percocet. Left savings sell sheet, FPI, conversion guide. Butrans also option for long term pain. Cill 1x week patch, no first pass metabolism, 4 strengths, 8 application sites. Can call/fax in changes/refills. Asked for business moving forward for patients taking 2-4 Percocet daily when he thinks about refilling another percocet this week consider OxyContin. Before he refills another Tramadol this week, consider Butrans. Asked dr do either of my products have a place in your practice moving forward
PPLPMDL0020000001	Lyndhurst	OH	44124	7/9/2014	Met with OM and med asst up front. Dr. Roda left early. Dr. Reed & Karen Steffey both called in sick. maybe wait until FRI to stop back. Presented both products as ER opioids for patients with daily, atc, long term pain. Left packets with OM for all HCP's including Dr. Roda. Left OxyContin FPI, conversion guide/left Butrans FPI, titration guide.
PPLPMDL0020000001	Westlake	OH	44145	7/9/2014	Opened with insight 14. Dr said she has done before. I asked her if she considered more than 2 doses a day to be an atc candidate. She said maybe. I said something to think about for your atc patients that may want a different delivery system. Oxycontin is dosed every 12 hours and Butrans dosed weekly. Dr said she started someone on Butrans. She said she started the, on 5mcg. I talked about titration and doses available.
PPLPMDL0020000001	Akron	OH	44333	7/9/2014	Spoke with dr about identifying patients that are not candidates for intervention and patients that meet the clinical protocol of being on 3-4 prns a day. I explained the patients he needs to be treating with Butrans and to ensure he titrates to the maximum dose and his ability now in using multiple patches and used MVA to review this. Dr said he knows and does titrate to max dose and rarely uses the 5 mcg and finds the 15mcg works very well. I told dr I noticed he is out of OxyContin copy cards. Dr looked and said he does remember using the last ones recently. I asked where and he said for patients that he converted from oxycodone. I told him to continue converting due to inadequate analgesia or tolerability. Dr agreed.
PPLPMDL0020000001	Cleveland	OH	44106	7/9/2014	Spoke with Alexa, reviewed OxyContin Initiation/Titration guides, Savings cards, said she will relay info,Regan Demshar is NP on vacation
PPLPMDL0020000001	Mayfield Village	OH	44143	7/9/2014	Yelled out to Dr as he was walking past front window. For your patients with daily, atc pain, I have 2 options: OxyContin dosed every 12 hours and Butrans patch, worn every 7 days. Ok replied dr. walked back into patient room. Left with med asst, Butrans FPI Initiation guide/OxyContin FPI conversion guide, OxyContin savings card sell sheet. (left same for Penny O'Brien CNP; she's not in yet, may be in within an hour)
PPLPMDL0020000001	Westlake	OH	44145	7/9/2014	Window. Two things to think about for your pain patients....they aren't controlled on their current therapy and taking 2 or more doses a day...if they require a change in therapy OxyContin dosed every 12 hours and Butrans dosed weekly.
PPLPMDL0020000001	Cleveland	OH	44195	7/9/2014	Reviewed OxyContin every 12hours, 7tablets along with butrans for those patients requiring around the clock analgesia, said ok, is very familiar and would like to further discuss, Scheduled appt
PPLPMDL0020000001	Akron	OH	44312	7/9/2014	Told dr I needed to discuss the new indication for OxyContin and Butrans with him. Reviewed indication and told him to focus on the words daily and around the clock pain. Dr said ok and likes the way it's worded. I told him that I know he has patients who are currently being treated with around the clock pain on a daily basis and that those patients are meeting the indication for ER opioids like OxyContin or Butrans. Dr agreed and said that he is going to try and speak with a few patients who he knows should be on an extended release product. I asked him to focus on patients already on oxycodone for OxyContin and Norco for Butrans. Dr said ok.
PPLPMDL0020000001	Mayfield Village	OH	44143	7/9/2014	Caught Dr. Petroff @ front window. Let him know I have 2 products for daily, atc, long term pain: OxyContin, Butrans. Asked him to read info & hope to follow up soon at lunch. Met with med asst at front. Asked to schedule lunch. She stated I must speak with Peg, who's on vacation until NEXT Tues. She will be in Tues, Wed and Fri of NEXT WEEK. CALL AND SCHEDULE.
PPLPMDL0020000001	Westlake	OH	44145	7/9/2014	Gave insight 14. Asked the doctor what was the last time he prescribed like that? Dr said he can't remember ever doing something like that. I said if someone was being treated with a NSAID several times a day and the patient needed a change in therapy...why couldn't you give them an option like OxyContin dosed every 12 hours or Butrans dosed weekly. He said you could but its not done like that. I said ok. But u recognize it could be done that way and he said yes. I said so tell me what you would do next for a patient like that. He said he would give them Tramadol or maybe an immediate release product. I said but how many times a day with this atc pain patient. He said two or three times a day as needed. I said how do they know when to take the pills and spread them out with those kids of products. He said they figure it out. So when this patient comes back and isn't well controlled on more than 2 doses of an immediate release product, can you write either OxyContin dosed every 12 hours or Butrans dosed weekly? He said maybe. I talked about the 12.3 section of the fpi and the oxycodone molecule and comparison. I also highlighted and showed the visual of the 7 strengths of OxyContin. Talked about Butrans indication and appropriate for those under 80 mg morphine equivalent. Asked dr how many pain patients are under this and he said all of them. Reviewed opioid naive pain scores and managed care
PPLPMDL0020000001	Akron	OH	44312	7/9/2014	Spoke with dr in his office and asked him it it makes sense for patients to be treated with short acting opioids for daily around the clock pain? Dr said it doesn't but said it always going to be that way because of how patients and dr relationships are. Dr said there is only do much a physician can do for a patient who continues to argue about their analgesics. I asked dr why it's the patients decision on what they get? Dr said its really not but a compromise has to be made. Dr said he will continue to use OxyContin and will try to use more when converting from Percocet. Dr said as far as Butrans goes he said he believes it works and its covered pretty well but said he just can't remember to use it. I told him to remember this conversation and think of tramadol and Norco patients.
PPLPMDL0020000001	Akron	OH	44312	7/9/2014	Short discussion in doctors office about the new indications for OxyContin and Butrans. I told dr that he needs to take a stand against his patients that continue to ask for IR opioids and take them around the clock on a daily basis and to do it earlier not later. Dr said he is trying with Butrans and is just finding that patients really like the analgesia but for some reason don't continue it after a month or two. I asked dr why that is and dr wells said he suspects they like the way the pills make them feel compared to the patch. I told dr that he should not be giving their pills back if they meet the indication for an ER opioid. Dr said ok and he will continue to try and get patients converted earlier.
PPLPMDL0020000001	Westlake	OH	44145	7/9/2014	Dr said hello, I said if you have a patient this afternoon looking for a different pain option and they are appropriate for atc long term treatment....oxycontin is does every 12 hours and Butrans weekly. She said ok and walked
PPLPMDL0020000001	Garfield Hts	OH	44125	7/10/2014	Discussed OxyContin every 12hours, FDA labeling that discusses abuse deterrent characteristics, Savings cards, why treat patients in around the clock pain in 4-6 hour increments, along with Butrans for those patients requiring around the clock analgesia, 7 day transdermal, Initiation/Titration Said Ok will consider, usually sends patients to pain mgmnt. not having success, will consider for appropriate patients
PPLPMDL0020000001	Olmsted Falls	OH	44138	7/10/2014	Opened with insight 14 and asked the doctor when was the last time he did something like these prescribers. Dr said never. I asked why. Dr the. Clarified that the patients were atc appropriate for an extended release product. Dr said then he could do that but doesn't. Dr said he does try to write extended release products when patients are appropriate. I asked him how many doses is at in his opioids. Dr said 3 or more doses a day. We talked about the patient on 2 doses and uncontrolled and the dr has to make a change to the patients pain medication. Dr agreed that oxycontin would be a good option. Dr said he hasn't writte. Much OxyContin.i asked why. He said he doesn't have many patients chronic pain. Reviewed the fpi 12.3 section where it compares OxyContin to oxycodone. Dr said he wasn't aware it was the same. Showed the visual aid section and the doctor shook his head yes. Talked about the lowest dose of 10mg dosed every 12 hours. Talked about weekly dosing of Butrans and its scheduling. Talked about med d plans coverage and talked about the Initiation guide. Highlighted attributes such as no first pass and the excretion thru the bowels and highlighted the no dose adjustment for the elderly. Dr said he will write the products if he sees an appropriate patients.
PPLPMDL0020000001	Westlake	OH	44145	7/10/2014	Talked to Lori the office manager about the savings program Nd experience program
PPLPMDL0020000001	Waterford	OH	45786	7/10/2014	I- Butrans clinical trials. OxyContin patient profiles. W- put a patient on Butrans this week.
PPLPMDL0020000001	Westlake	OH	44145	7/10/2014	Spoke to Lisa the ma for the dr. Review the savings cards for both products and left literature for the dr.
PPLPMDL0020000001	Westlake	OH	44145	7/10/2014	Taked to Daniel the ma and highlighted the products that I had and updated formulary grids.
PPLPMDL0020000001	Olmsted Falls	OH	44138	7/10/2014	Discussed insight 14. Dr said he doesn't like opioids. We talked about existing established patients he has already been treating for months. I highlighted the visual aid of the types of pain from the OxyContin visual aid. Dr said he does see a lot of lower back pain like stenosis. I asked him if a patient were uncontrolled and already on 2 or more immediate release products would you still treat you existing patient? He said yes. I asked him to consider among his choice a product at can be dosed every 12 hours like OxyContin or even weekly dosing like Butrans. We reviewed OxyContin 7 strengths and titration can be done every 1 to 2 days. Talked about Butrans dosing and Initiation guide. Reviewed scheduling and med d coverage.
PPLPMDL0020000001	Richmond Heights	OH	44143	7/10/2014	Met with med asst at front window. Left packet of info for Dr. Natesan (off today) that includes OxyContin savings sell sheet, FPI, conversion guide and Butrans FPI, titration guide, patient tear sheet. Discussed my products as ER scheduled opioids to treat patients that present with daily, atc, long term pain.
PPLPMDL0020000001	Cleveland	OH	44195	7/10/2014	Dr. reviewed OxyContin/Butrans PI's and Initiation/Titration guides, said in present role Chairman of Pain dept . No further info requested, but will keep contact info for further reference.
PPLPMDL0020000001	Cleveland	OH	44195	7/10/2014	Reviewed OxyContin/Butrans PI's along with Initiation Titration guides, No further info requested
PPLPMDL0020000001	Highland Heights	OH	44143	7/10/2014	Lunch. Total office call. Met with all medical assistants, including Carrie (new/training). Discussed both my products, scheduling, dosing, strengths. Showed both Butrans initiation guide, updates to Skin Sites and maintenance. Left pack of Butrans tear sheets in check out room. showed, left OxyContin conversion guide, discussed 10 mg as being appropriate start dose for opioid naive, ability to titrate in 1-2 days to 15 mg if needed. Discussed counseling patients to take one tablet at 8 am, 1 at 8 pm. Baby Boomer insight, what this means for your practice even more over age 65 patients to treat. More patients covered on Med D, needing access to branded meds. Discussed ER opioids for daily, atc, long term pain. Dr says he really likes Butrans and writes, but often still not covered on many plans. I let him know I will continue to update med assts on formulary status. I then transitioned to OxyContin. Before I could speak, dr said I know all about the reformulation,etc. I stated that's not what I want to discuss. I went into product attributes, lowest effective dose for trusted patients. One of the med assts (Amanda) said to dr. you don't want to write because OxyContin has street value, right? Yes replied dr. I asked dr and amanda, when was the last time you had patient come in and ask for RX of OxyContin. Dr. says I can't think of a time. Reviewed product attributes: efficacy since 1996, half life 4.5 hours, can titrate in 1-2 days, pH independent, single entity, etc.
PPLPMDL0020000001	Cleveland	OH	44115	7/10/2014	Reviewed OxyContin/Butrans Initiation/Titration guides along with PI's. No new info learned
PPLPMDL0020000001	Garfield Hts	OH	44125	7/10/2014	Discussed OxyContin every 12hours, FDA labeling that discusses abuse deterrent characteristics, Savings cards, why treat patients in around the clock pain in 4-6 hour increments, along with Butrans for those patients requiring around the clock analgesia, 7 day transdermal, Initiation/Titration Said Ok will consider, feels patients for the most part are controlled, Asked for those patients that are not, said he will consider.
PPLPMDL0020000001	Waterford	OH	45786	7/10/2014	I- Butrans clinical trials. OxyContin dosing and titration. W- having success with Butrans this week.
PPLPMDL0020000001	Richmond Heights	OH	44143	7/10/2014	Quick hallway. I asked dr to think about a patient like Pam, opioid naive, covered on Medicare D. She would be appropriate at starting dose of either OxyContin 10 mg ever 12 hours start OR 5 mcg hr start of Butrans patch, worn every 7 days. Please consider based on efficacy, safety and tolerability we have discussed on previous calls. Ok I will consider replied Dr.
PPLPMDL0020000001	Olmsted Falls	OH	44138	7/10/2014	Pharmacist was busy. Highlighted the dosing of OxyContin and pointed out the opioid naive dose of 10mg dosed every 12 hours. Reviewed Butrans patch placements Initiation guide.
PPLPMDL0020000001	Olmsted	OH	44138	7/10/2014	Dr came back to say hello and get coffee. I told him about insight 14...dr said he doesn't treat chronic pain so that number didn't apply to him. I said here's 2 things to think about for your existing pain patients uncontrolled in their current medication . If they are appropriate for a control release product we have two options to consider OxyContin. Dosed every 12 hours with 7 different doses to choose from and also a schedule 3 weekly dosing product called Butrans. Dr said thank you and walked away with his coffee.
PPLPMDL0020000001	Cleveland	OH	44113	7/10/2014	Reviewed OxyContin every 12hours along with Butrans for those patients requiring around the clock analgesia.said ok no new info learned



	Olmsted Falls	OH	44138	7/10/2014	Opened with insight 14. I asked the doctor what was the last time he started someone like that. Dr replied never and that he never would. I asked why not. Dr said he will never go from NSAID to OxyContin. I said are u saying because its schedule 2 or its oxycontin? Dr said because It's an extended release product. Dr said he has been referring out any patient requiring atc treatment with opioids. Dr sized he agrees tha a patient may be appropriate for an extended release product like OxyContin but he said he doesn't want to prescribe those products any more. After reviewing what his idea of atc pain is, dr said he treats with immediate release products. I reviewed the 12.3 section of the fpi where out compares oxycodone to OxyContin 10mg dosed every 12 hours, I showed him the visual aid. I said why dose someone in 4 to 6 increments for atc pain when you have the option of OxyContin. I highlighted the 10mg dose for the opioid naive dose. We talked about the over 65 patient population in chronic pain. I showed him from the fpi how many elderly patients were studied and the doses available. I bridged to Butrans elderly profile highlighted the med coverage. Specifically aarp and carmark. Covered careourse too. Dr said he was impressed by the coverage. Discussed ano dose adjustment for the elderly and reviewed Initiation.
PPLPMDL0020000001	Brooklyn	OH	44144	7/11/2014	Reviewed w/Brittany OxyContin/Butrans, savings cards, Initiation/Titration said ok new info learned
PPLPMDL0020000001	Cleveland	OH	44113	7/11/2014	Reviewed OxyContin every 12hours, savings cards along with Butrans for those patients requiring around the clock analgesia, Said Ok, will continue to prescribe for appropriate patients, Reviewed with Mary RN as well
PPLPMDL0020000001	Cleveland	OH	44113	7/11/2014	Reviewed Butrans for those Norco failures requiring around the clock analgesia, Formulary status, savings cards, Said Ok will continue to find appropriate patients
PPLPMDL0020000001	Cleveland	OH	44113	7/11/2014	Reviewed Butrans for those Norco failures requiring around the clock analgesia, Formulary status, savings cards along with OxyContin every 12hours, abuse deterrent characteristics Said Ok will continue to find appropriate
PPLPMDL0020000001	Cleveland	OH	44113	7/11/2014	Visited Ortho dept (Billfield,Stearns and Bohl) OxyContin/Butrans Initiation/Titration, Savings cards
PPLPMDL0020000001	Brooklyn	OH	44144	7/11/2014	Reviewed OxyContin every 12hours, 7 tablet strengths, Savings cards along with Butrans for those Tramadol failures requiring around the clock analgesia, Said Ok, will consider
PPLPMDL0020000001	Brooklyn	OH	44144	7/11/2014	Reviewed OxyContin every 12hours, abuse deterrent characteristics recognized by the FDA along Butrans for those Norco/Tramadol failures requiring around the clock analgesia, Formulary status, savings cards, Said Ok will consider, Looks to retire by end of the year
PPLPMDL0020000001	Cleveland	OH	44103	7/14/2014	Reviewed with Hakim OxyContin/Butrans Initiation/Titration, Savings cards, said he hasnt filled at this location in a few months, Does see Dr. Nickels Butrans RX's over at Clark store
PPLPMDL0020000001	Cleveland	OH	44118	7/14/2014	Reviewed with Michael, Butrans 7 day transdermal, CII for those patients requiring around the clock analgesia, Formulary grids, savings cards said Ok will relay info
PPLPMDL0020000001	Cleveland Hts	OH	44118	7/14/2014	Reviewed with Opey Rph OxyContin/Butrans savings cards and patient info booklets, Said Ok, no new info learned
PPLPMDL0020000001	Garfield Hts	OH	44125	7/14/2014	Reviewed/Discussed Butrans for those patients failing on present therapy requiring around the clock analgesia along with OxyContin every 12hours, said she will consider, but most of the pain patients are seen by Dr. Topalsky or Arrabi, Said she will help reminding them
PPLPMDL0020000001	Cleveland	OH	44106	7/14/2014	Visited Pain mgmnt dept (Saghal,Hayek, Terrah) OxyContin/Butrans Initiation/Titration guides, Requested appt
PPLPMDL0020000001	Cleveland	OH	44118	7/14/2014	Reviewed OxyContin formulary grids, every 12hours, abuse deterrent characteristics along with Butrans for those patients requiring around the clock analgesia that are failing on present therapy, Reviewed formulary grids, Said she will help reminding Dr.Also discussed Initiation/Titration and Patient info booklets.
PPLPMDL0020000001	University Hts	OH	44118	7/14/2014	Window call. Reviewed OxyContin every 12hours, single entity, formulary coverage along with Butrans for those patients requiring around the clock analgesia. Said ok, asked if he has seen that 1 patient he previously discussed would be appropriate for Butrans, said he has prescribed, no feedback yet.
PPLPMDL0020000001	Cleveland Hts	OH	44118	7/14/2014	Reviewed OxyContin formulary grids, every 12hours, abuse deterrent characteristics along with Butrans for those patients requiring around the clock analgesia that are failing on present therapy, Reviewed formulary grids, Said he will consider, was glad to hear Med D status, Said he had a patient in mind coming in this afternoon
PPLPMDL0020000001	Westlake	OH	44145	7/15/2014	Spoke to ma in the main office terra and she said she didn't know the doctors schedule today cause tuesdays are hard to catch him. I went to the surgery center as well as his main office but didn't catch him there either. I ended up leaving a message for the nurses to see when is the best time this week to catch the doctor. Left oxycontin and butrans fpi and covered managed care with terra.
PPLPMDL0020000001	Cleveland	OH	44195	7/15/2014	Reviewed OxyContin, Savings cards, formulary grid along with Butrans for those Patients requiring around the clock analgesia, Said She will continue to prescribe for appropriate patients, refers to Palliative Med team
PPLPMDL0020000001	Rocky River	OH	44116	7/15/2014	Dr came in and asked he just wrote a script for OxyContin. The dr explained the patient was on 20mg for a while and was ready to be tapered down, so he put him on the 10mg of oxycontin. I said that's great to hear. The 10mg was something i was going to highlight today and i asked whim why he chose the 10mg and not the 15mg as i showed him the 7 doses from the core visual aid. The doctor stopped and said he totally forgot about the 15mg otherwise he probably would have done that. I showed the visual aid with the actual size and the dr asked about the reformulation, which i covered and used the core visual aid to demonstrate. I also included the fda insight. I went over some aspects of the 10mg such as why it is an option for opioid naive patient- showed the 12.3 section of the fpi where it states the comparison of oxycodone and oxycontin. The doctor says he uses oxycodone for break thru medications along with Oxycontin. I focused on the reassessment if a patient were in need of titration and when it can be done according to our labeling (every 1 to 2 days). Touched on Managed Care and the types of appropriate patient types Oxycontin may be appropriate for...highlighted the single entry attribute. I highlighted butrans scheduling and managed care, the doctor said today was a busy day and to come back. I scheduled a follow up apt for Thursday to discuss butrans.
PPLPMDL0020000001	Cleveland	OH	44103	7/15/2014	Reviewed OxyContin, abuse deterrent characteristics, every 12hours, formulary along with Butrans for those patients requiring around the clock analgesia, Said Ok and will continue to prescribe to appropriate patients
PPLPMDL0020000001	CLEVELAND	OH	44195	7/15/2014	Reviewed with Brittany OxyContin/Butrans savings cards, Troy was in a mtg. will relay info.
PPLPMDL0020000001	Rocky River	OH	44116	7/15/2014	went to premier building office, this doctor is not in rocky river. the ma said they do seldom lunches per the doctors approval. I told her about oxycontin and butrans and gave her some information. she said they will review and call me if they want to do a lunch.
PPLPMDL0020000001	Cleveland	OH	44195	7/15/2014	Reviewed OxyContin Savings cards, along with Butrans for those patients requiring around the clock analgesia, Followed on Fellows Friday Conf. Said no date has been confirmed but will keep me posted,
PPLPMDL0020000001	Lyndhurst	OH	44124	7/15/2014	Met with med asst at front window. Had packet of info for both Dr.Reed (and CNP Karen Steffey) Let her know, i'm leaving updated info for OxyContin and Butrans, both for daily, atc, long term pain. Left Oxycontin conversion guides, Butrans initiation guides, 2 Butrans patient guides. Let staff know change to page 7, figure B.
PPLPMDL0020000001	Lyndhurst	OH	44124	7/15/2014	Quick window, when migraine meds aren't enough for pain, i hope you will consider OxyContin or Butrans, depending on needs of patient, first line opioid therapy. Left packet of info for Dr. Roda to read: Butrans initiation guide, 1 Butrans patient guide, OxyContin conversion guide.
PPLPMDL0020000001	Fairview Park	OH	44126	7/15/2014	Spoke to erica the office manager and nurse, she said the doctor took the day off today but will be back later in the week. We talked about my coffee breaks in the morning and i asked her if he has enjoyed that, she said yes. She said they don't do lunches so its a nice break. I asked her if she thought oxycontin or Butrans was a product she thought he would rely on for his patients if need be. she said he doesn't write much pain medications unless its for a few days. I covered managed care for both products.
PPLPMDL0020000001	Cleveland	OH	44195	7/15/2014	Visited dept.(Faiman,Perala) OxyContin/Butrans Initiation/Titration, Savings cards along with confirmation of Fellows Monthly conf.
PPLPMDL0020000001	Euclid	OH	44117	7/15/2014	Lunch. Since this office is 100% BWC pay, med assts and PT wanted to know if our company offers any assistance with prior auth's, as they are not happy about the number/frequency of prior auths. I responded that no we do not at this time. Percocet insight. Dr D says it's whether or not his staff gets prior auth through, and many patients, stay on what dr. morley originally placed them on. Discussed product attributes for OxyContin including single entity opioid, steady state 24-36 hour, half life 4.5 hours, titration up or down in 1-2 days. then transitioned to butrans product attributes: buprenorphine release every 7 days, patients only have to remember 1x week, 4 strengths, 8 possible application sites. Went through each page of patient guide w dr d. Told him it's very important to hand out to all new starts. He will keep in his office & try to remember to hand out. I asked him to "fight" for my products if he feels OxyContin, Butrans are best, and instruct his staff to complete prior auth, even if they're complaining about doing so!
PPLPMDL0020000001	Lyndhurst	OH	44124	7/15/2014	Quick window. Patient reduction pain score BUP 3024, opioid naive tolerated, able to be titrated up to max dose of 20 mcg hr in just a few weeks. Left new patient guide, initiation guide. OxyContin, also for atc, daily, long term pain. Discussed attributes including: single entity opioid, proven efficacy since 1996, steady state 24-36 hr, can titrate up or down in 1-2 days, Asked his med ast Julie and Dr. together, what age group does he see most or is it mix? Both he & Julie agree a mix. This way I know to update on Medicaid, Medicare and commercial plans. Improved Medicare D access mentioned, both products, prior auth with Medicaid. Dr says all is well, is there any reason he would NOT select either Butrans or OxyContin for his patients? No, he will continue for the right patient.
PPLPMDL0020000001	Cleveland	OH	44103	7/15/2014	Reviewed OxyContin abuse deterrent characteristics along with Butrans for those patients requiring around the clock analgesia, Reiterated Med.Ctr position, but will consider , asked for those patients she still is treating around the clock pain in 4-6h increments, OxyContin Q12h, said ok
PPLPMDL0020000001	Euclid	OH	44132	7/15/2014	Met with med asst and PA-C Liz at front desk. Asked to see dr brobhey, he's signing some papers then leaving for hospital, not a good day to come up front. Discussed OxyContin, then Butrans, as ER options daily, atc, long term pain. OxyContin is every 12 hrs release of oxycodone, 1 tablet at 8 am, 1 tablet 8 pm: Butrans is pain patch worn every 7 days, patients get 4 patches every month. Left new patient guide for both Dr. and Liz PA-C to review, Pam profile and Butrans initiation guide for Dr. Brobhey.
PPLPMDL0020000001	Westlake	OH	44145	7/15/2014	Waved thru the window, he asked if he could sign something. I said actually i like you to instead think about your uncontrolled non acute painpatients. if they need a change to an atc opioid therapy oxycontin is dosed every 12 hours and butrans dosed weekly. He said ok thanks and walked away. Laura the nurse scheduled me an apt to see the doctor for a lunch and told me he does read the literature i leave behind. I talked about Butrans and its scheduling. I told her i was afraid the information he had time tohear today isn't enough to get him started on writing butrans. she said she will tell him to review the dosing again.
PPLPMDL0020000001	Westlake	OH	44145	7/15/2014	opened with the extended release insight and asked him when is the last time he did something like this. the doctor said he doesnt like to write opioids. I said dr i hope you don't have to, but if the pain is severe enough and all other options prove to be inadequate and you need an atc daily long term option....then your probably would wouldn't you. he said yes. I said what if your current pain patient is no longer actue pain and requires a dose adjustment....could oxycontin be given an opportunity then? He said maybe. I gave a few attributews such as 7 doses and that the 10mg of oxycontin is an opioid naive dose...dosed every 12 hours instead of every 4 to 6 hours like those immediate release opioids. Dr said he will think about it.
PPLPMDL0020000001	Westlake	OH	44145	7/15/2014	Nurse took me back to his station- dr asked if anything was new and i said yes. I gave him the extendeded release insight and asked him if this is something he too feels comfortable doing. The doctor said he usually will not turn to an chronic medication after nsaid. I said if someone was taking several immediate release opioid doses a day at what point makes them ready for a control release? He said it depends how long they have been on the previous medication. I said lets say at least three months on an immediate release product and they are not controlled and they need a dose adjustment of some kind for their non acute pain. Dr said then he would consider a control release product. I said i have two options for you to think about today for those uncontrolled patients. First oxycontin that can be dosed every 12 hours and we have an opioid naive dose of 10mg. Another options Butrans, its a weekly dosing option. schedule 3 and our starting dose is 5mcg for opioid naive patients. I asked how these sounded to him? He said good. I said when i come back i'll go over some pain results for butrans- he Dr didn't take a break for lunch, but stopped to say hello. I told her id like her to think about two patient types today. A. her existing pain patients with uncontrolled pain. And B. those patients taking 2 or more immediate release opioids. I told when the opportunity presents itself to make a change in therapy for these types of patients...instead of dosing atc with an immediate release opioid. You have another option of Oxycontin dosed every 12 hours or Butrans c3 dosed weekly. Dr said thank you and apologized for not taking more time at lunch.
PPLPMDL0020000001	Cleveland	OH	44109	7/16/2014	Malak RPH was available, left OxyContin/Butrans formulary grids, nothing new learned
PPLPMDL0020000001	Cleveland	OH	44113	7/16/2014	Reviewed Butrans for those Tramadol failures requiring around the clock analgesia, Said Ok,but reiterated refers to Pain mgmnt. but will consider
PPLPMDL0020000001	Cleveland	OH	44113	7/16/2014	Intro/reviewed OxyContin every 12hours, abuse deterrent characteristics along with Butrans for those patients requiring around the clock analgesia, 7day transdermal. Said ok will consider for appropriate patients, Dr. Orr sends patients to Pain mgmnt.

PPLPMDL0020000001	Mayfield Village	OH	44143	7/16/2014	Lunch. Med Asst Sara, says all the girls up at check in/check out also do prior auths, and share with med assts that room patients with HCPs. There are so many, they have to complete first thing in am when phones are shut off, and last thing in evening when phones turned off or they would never get done. Due to increased volume of patients, practice has added 2 new med assts: Holly and Michelle. Reminded Dr Ashraf, he comminicated to me that 60-70% of patient base is over 65. Baby Boomer insight. This means over 65 population will keep growing = more patients on Medicare D. First let's discuss patient type: Pam profile. Discussed that patient like Pam is appropriate for start dose of 5 mcg hr for Butrans OR 10 mg OxyContin. Discussed product attributes for each product including dosing flexibility. Dr Ashraf, says for past few months, no issues he can think of with OxyContin not being covered. Asked for patient like Pam, today or this week, who has daily, atc, long term pain; please write OxyContin or Butrans, and if you feel either of my products are the best choice for your patient, please ask your med assts to complete prior auth. Is that reasonable? Yes, replied Dr. Ashraf.
PPLPMDL0020000001	Barberton	OH	44203	7/16/2014	Spoke to Sarah the head nurse and office manager about Butrans and OxyContin. Reviewed Butrans starting dose. Showed her the Initiation guide tool to give to the dr. Highlighted the patch location and rotation. Talked about OxyContin dosing and gave coupons for both products and managed care.
PPLPMDL0020000001	Mayfield Village	OH	44143	7/16/2014	Lunch. Discussed "atc" pain, that means 24/7 to dr krishnan. Baby Boomer Med D insight, then Pam profile. Asked for a few trusted patients like Pam, to trial Butrans & OxyContin. Discussed conditions for the majority of his patients over 65. Lower back pain, osteoarthritis. Rather than provide an ir opioid with q4-6h dosing and discharge patients on prn rx, Provide an ER option for your patients. Discussed product attributes for Butrans including no first pass liver metabolism and opioid naive dose of 5 mcg hr. Discussed product attributes for OxyContin such as first ER opioid to have FDA approved Tier 1, 3 abuse deterrent properties labeling, steady state 24-36 hours, can titrate up or down if needed in 1-2days. Asked for a few trusted patients, to treat here in office, for both products, does that sound reasonable? Yes replied Dr. For those patients that you will send for pain specialty referral, if you place on either product while your patient waits to get in for appt, you will refer on products pain specialty is using and familiar with. Showed patient guide/Butrans. Discussed proper application disposal. Discussed improved Medicare D status.
PPLPMDL0020000001	Cleveland	OH	44109	7/16/2014	Reviewed Butrans 7 day transdermal, CII, Initiation/Titration along with Formulary status(Med D), Said she will relay info and request appt with Dept
PPLPMDL0020000001	Cleveland	OH	44106	7/16/2014	Reviewed OxyContin/Butrans PI and Initiation/Titration guides said no further contact needed at this time. He is the clinical Pharm D for the UH Dept Family Medicine and Community Health
PPLPMDL0020000001	Cleveland	OH	44109	7/16/2014	Visited Ctr.Dept.OxyContin and Butrans Initiation/Titration guides for Dr.'s Baker,Campbell,P.Campbell,Dhillon, Dietz,Corrigan,Geho,Gemachu,Leake Westfall and Zabak. Butrans Savings cards, Followed up with Katie in regards to inservice, requested email request and will coordinate with NP's/PA's
PPLPMDL0020000001	Mayfield Village	OH	44143	7/16/2014	Lunch. Asked dr mukunda to consider writing OxyContin or Butrans before he refers patient out to pain management. Even if he writes for a few weeks, or 30-day RX for Butrans, at least patient will have some relief while waiting to get into pain specialty. Reviewed product attributes each product, Pam profile. Left Butrans FPI, titration guide/FPI and 1 patient guide. Left OxyContin FPI.
PPLPMDL0020000001	Mayfield Village	OH	44040	7/16/2014	Hallway detail. Percocet insight. Dr. says majority of his patients can't afford branded meds. Discussed savings/access for both OxyContin and Butrans. OxyContin savings can be redeemed by cash/commercially covered patients and \$30 co pay for any of our 7 strengths. Also discussed improved Med D access. Got back to product efficacy, attributes. OxyContin: proven efficacy since 1996, 24-36 hour steady state, ability to titrate dose up or down in 1-2days. Butrans, CII, buprenorphine, patients only have to worry about changing their patch 1x a week. Butrans efficacious/tolerated in opioid naive, BUP 3024 clinical study. 4 strengths, 8 possible application sites.
PPLPMDL0020000001	Mayfield Village	OH	44143	7/16/2014	Asked for business today and remainder of this week, for patients presenting with persistent pain. sound reasonable? yes replied Dr. Park. Lunch. Baby Boomer insight. What this means is that you will be increasing your 65+ patient base over next several years. Pam profile. This patient appropriate for 10 mg start dose of OxyContin. Discussed OxyContin product attributes including half like 4-5 hours, steady state 24-36 hrs, so you can titrate in 1-2 days to next strength of 15 mg, and patient doesn't have to wait 30 days for titration. 7 strengths to individualize dose. Improved Medicare D access. Butrans, Patient like Pam appropriate for 5 mcg hr start dose of Butrans. CII, 1x week buprenorphine patch, matrix delivery technology. 4 strengths. Elderly able to tolerate & be titrated to max dose in clinical trials (BUP 3024) No first pass liver metabolism (systemic circulation), no dose adjustment necessary for renal, mild & moderate hepatic impaired, 8 possible application sites, showed how to write. Can call/fax in with refills. Asked for patient like Pam, this week, consider a trial of either OxyContin or butrans, for atc pain. Sound reasonable? Yes Kristy replied.
PPLPMDL0020000001	Cleveland	OH	44113	7/16/2014	Quick review of OxyContin every 12hours, abuse deterrent characteristics along with Butrans for those patients requiring around the clock analgesia, said Ok will consider, asked for appt to further discussion on main campus,Will follow up with Friday AM appt.
PPLPMDL0020000001	Cleveland	OH	44113	7/16/2014	Reviewed OxyContin every 12hours, abuse deterrent characteristics along with Butrans for those patients requiring around the clock analgesia that are failing on present therapy, Said he refers to Pain mgmnt for chronic conditions. Met Dave his PA as well. no new info learned
PPLPMDL0020000001	Mayfield Village	OH	44143	7/16/2014	Met with OM Peggy Jakob. She came out into waiting room to talk with me. She states theyve recently transitioned to EMR & it's slowed all HCP's down. They are all really frustrated, not enough hours in the day, she is no longer scheduling lunches as the HCPs just don't have time to come over to conference room. she says try back 04 (October) and maybe things will have improved. Left Peggy OxyContin and Butrans FPI, Butrans patient guide. She asked about both products and asked me to keep in touch. I presented verbatim product indications, dosing, scheduling. Left info for Dr. Petroff: butrans initiation guide, OxyContin savings sell sheet. (left same for Drs.
PPLPMDL0020000001	Norton	OH	44203	7/16/2014	Dr said after two doses of a short acting tablet it would be appropriate per indication to use an extended release opioid. Dr said he would use OxyContin for an extended release opioid. Dr. Said he had trouble getting Butrans covered on caresource, I said I would work with sarah the ma to confirm what was happening. I confirmed w her that it was not caresource that there patients did not have a problem. Getting the Butrans thru it was Uhc with Butrans. Sarah said she would talk to the doctor about the correction to his misperception if coverage. Review managed care with office staff and doctors.
PPLPMDL0020000001	Berea	OH	44017	7/17/2014	I asked the dr to think about something this week...asked him to think about that norco patient on 2 or more doses not acute with pain and if they need a change in therapy cause they are not controlled to think about OxyContin.the dr said Butrans right. I told him I was actually trying to highlight OxyContin. Today and the dr said he already knows about OxyContin but hasn't used Butrans yet. I said why not....he said he hasn't found the patient to want it. And walked away.
PPLPMDL0020000001	Olmsted Falls	OH	44138	7/17/2014	I said to the dr...we already reviewed Butrans weekly dosing and the coupons but I want to review who the appropriate patient type is. Dr said he is trying to get a script for a patient approved right now. He reviewed its a female Medicare part d with health partners. It needs a pa.I was unfamiliar with this but told him I'd try to find so sing out. Reviewed what they were in previously and the dr said 7.5 4 times a day of hydrocodone. I showed him the Initiation grid. Reviewed patch rotation and steady state of the product.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	7/17/2014	Quick hello at window and told her I have one statement for Butrans and OxyContin to make. I told her that patients had at least a 30% reduction in pain score for Butrans in the clinical trials and the conversion from Percocet to OxyContin is a 1:1 conversions and I would like her to reassess those Percocet patients as candidates for OxyContin. Dr said ok and thanks for the information. Nothing else learned.
PPLPMDL0020000001	Berea	OH	44017	7/17/2014	Dr was on his way into the office but not there yet. Spoke to Shirley reminded her of the coupons. And gave her the updated managed care grids.
PPLPMDL0020000001	Euclid	OH	44119	7/17/2014	Quick hallway, I missed Carla Van Pelt again, but spoke with one of the other nurses at check in desk. Left updated Butrans patient guides for pain floor,green how to protect your meds brochures. Had Pam profile out, showed Paul, this is type of patient I want you to think about the remainder of this week - opioid naive, over age 65, osteoarthritis, did not tolerate aspirin or NSAIDs,meets indication for Butrans. If Butrans not appropriate, you could try 10 mg of OxyContin to start. Paul had to run after that.
PPLPMDL0020000001	Stow	OH	44224	7/17/2014	Spoke with Zoe the pharmacist about Butrans and OxyContin. Zoe said she is very familiar with both and said they dispense a lot and have all doses in stock. I reviewed the dosing,indication, titration and specific patient type selection. Zoe said her patients seem to really like it and said she had no questions about it. Spoke to her about patient selection for OxyContin and discussed the Percocet patient and the conversions when it is deemed inadequate due to efficacy or tolerability.
PPLPMDL0020000001	Akron	OH	44310	7/17/2014	I asked dr what his thoughts are on patients whom are being treated in 4-6 hour increments for pain around the clock? Dr said that's a long answer but did say that pain patients can be very difficult to treat because pain is so subjective. Dr said that he doesn't like writing any pain medicines because that's not his speciality. I asked dr if he has patients continuing on Percocet on a daily around the clock basis? Dr said he does have some yes. I asked him if those patients are being treated for acute or prn pain? Dr said a few are but most take it on a daily basis. I told dr to to do focus on patients in pain around the clock and meet the indication and reviewed it. I showed him the conversions and asked for business and if it makes senses. Dr said it does and will try. Gave him the Butrans initiation and titration guide and told him to focus on tramadol and Hydrocodone patients who are not having their analgesia or tolerability needs met.
PPLPMDL0020000001	Tallmadge	OH	44278	7/17/2014	Dr started off conversation and said that of the few patients he has on Butrans he is actually impressed on how well it works and tolerated. I told dr that's great to hear and to tell me more about what product the patients were moved from? Dr said he knows one patient was hydrocodone. Dr said it just wasn't managing the patients pain well enough and mentioned it to the patient and got it started. Dr said patients are a little apprehensive at first and then find out how well it works. I told him I agree and gave quick review of BUP 3015. Dr agreed and said he will try to find more patients. Discussed the OxyContin indication and asked for him to just convert those patients when he's ready to either titrate or refer out. Dr said ok.
PPLPMDL0020000001	Cleveland	OH	44113	7/17/2014	Discussed OxyContin abuse deterrent characteristics,every 12hours,savings cards along with Butrans 7 day transdermal,initiation/titration,savings cards, formulary grids, said she will relay to physicians, asked for inservice, said she will pursue (Tues.12-1)
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/17/2014	Quick hello in hospital hallway of Summa Western Reserve. Dr said his patients are doing well on OxyContin and is trying to use Butrans more. I quickly told him to evaluate more on where his existing patients are doing on Percocet and review the history to see if they are candidates for the q12 oxycodone. Dr said he does it all the time. Dr said he is using Butrans more often and isn't having issues getting it covered anymore. I told dr that's great and to please look into those patients where tramadol or Norco are inadequate.
PPLPMDL0020000001	Cleveland	OH	44115	7/17/2014	Window call. Reviewed OxyContin abuse deterrent characteristics,Savings cards,along with Butrans 7 day transdermal for those tramadol failures, Said Ok, nothing new learned
PPLPMDL0020000001	Brooklyn	OH	44144	7/17/2014	Window call, reviewed OxyContin every 12hours, abuse deterrent characteristics along with Butrans for those patients requiring around the clock analgesia, said ok, said to schedule lunch w/Audrey to further discuss
PPLPMDL0020000001	Valley View	OH	44125	7/17/2014	Met with Aaron, researched Butrans Med D ins. rejection, Reviewed OxyContin every 12hours, abuse deterrent characteristics
PPLPMDL0020000001	Cleveland	OH	44113	7/17/2014	Reviewed with Barb RN/Eva NP OxyContin, abuse deterrent characteristics, every 12hours, savings cards along with Butrans for those patients requiring around the clock analgesia that are not controlled on present therapy, Said they will relay info to prescribers and request appt with clinicians.
PPLPMDL0020000001	Cleveland	OH	44113	7/17/2014	Reviewed w/Shella OxyContin every 12hours, abuse deterrent characteristics along with Butrans for those patients requiring around the clock analgesia, Said she will remind Dr. He will be taking over as Medical Dir. and moving over to Ridge Rd location 4 days a week. Sharon Allen NP will be taking over at Tremont location
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/17/2014	Dr and Liz said that they only have one OxyContin copy card left. Liz said they won't be in the office til Monday the 28 so bring them then. I asked dr about his use of them recently? Dr said she just writes it and to ask Liz. I told him I would and asked him for continued use and to use more for patients taking Percocet around the clock on a daily basis and out them on the q12 OxyContin. Dr said ok. Lisa is she gave a few cards out for patients who recently started on OxyContin. Liz said they have had a few of Geigers patients come to their practice. Reviewed dosing and patient type selection for Butrans.
PPLPMDL0020000001	Cleveland	OH	44113	7/17/2014	Quick review of OxyContin abuse deterrent characteristics, every 12hours along with Butrans for those patients requiring around the analgesia, Said Ok, walked away and continue to talk with Eva NP, Requested inservice
PPLPMDL0020000001	Hudson	OH	44236	7/18/2014	Quick call in the hallway of his office and showed him the conversions from Percocet to OxyContin. I asked him what's so difficult in converting appropriate patients to OxyContin? Dr said he told me before that either patients refuse to take a product called OxyContin or are taking Percocet on a prn basis. I told dr I understand and what's him to qualify patients that are taking Percocet on a daily around the clock basis. Dr said ok. I also showed him the conversions from tramadol to Butrans. I told him he is missing a lot of opportunities for patients taking tramadol around the clock for a solution which may be more appropriate. Dr said he knows and just needs to take the time to do it. I told him he must because it will prove itself clinically in the right patient.
PPLPMDL0020000001	Cleveland	OH	44124	7/18/2014	Quick hallway. Caught dr coming out to waiting room to get next patient. Told him I'm leaving patient profile, for his review, an opioid naive patient, covered by Medicare D, and appropriate for starting dose of either OxyContin or Butrans. Ok replied dr and walked into patient room. Left Oxycontin conversion guide, Butrans titration guide for RN Gail. Left same, & Pam profile for Dr Casselberry.

PPLPMDL0020000001	Barberton	OH	44203	7/18/2014	Asked him to think about those over 65 year old patients and they need a change of pain medication. If they need an atc options OxyContin. Is dosed every 12 hours. There is no dose adjustment and the 10 mg is the approved opioid naive dose. Also highlighted the med plans for Butrans and caresource coverage for Butrans.
PPLPMDL0020000001	Stow	OH	44224	7/18/2014	Saw Sandra while speaking with Joyce about lunch next week. I told dr I have new information for her which we will discuss next week but for now I told her to focus on patients taking the IR opioids on a daily around the clock basis who are possibly meeting the indication for Butrans. Reminded her about UHC and aarp coverage for Butrans. Sandra said ok and thanks fe the info.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/18/2014	Quick hello in hospital hallway. I told dr I have lunch next week in the hospital and that until then I would like him to focus on patients he sees that are continuing on Percocet or IR oxycodone who may need a dose adjustment or can't tolerate it and convert to OxyContin. I asked if he can just take an extra second with those patients and reevaluate them? Dr said ok but doesn't have too many continuing. I told him that he must have them and asked if most would be for acute or prn pain and dr said maybe a few. Asked for conversions in those appropriate patients. Told him to expand his use of Butrans in the elderly Medicare population with addition of aarp and Caremark coverage. Dr said to talk to his staff about insurance. Nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44195	7/18/2014	Discussed OxyContin every 12hours, 7 tablet strengths along with Butrans, 7 day transdermal, Initiation/Titration, Savings cards and formulary coverage, Said ok will continue to find appropriate patients for OxyContin and will look to identify appropriate patients for Butrans
PPLPMDL0020000001	Hudson	OH	44236	7/18/2014	Met Brandon the pharmacist for the first time. Discussed OxyContin and Butrans indications. Asked Brandon about how often he's seeing patients on Percocet being converted to OxyContin? Brandon said he knows a few here and there but said it needs to happen much more often. Brandon said it doesn't make sense for a patient to take a pill 6 times a day when they would take OxyContin q12. I told him that's great to hear. Discussed Butrans and Brandon said they just dispensed one today for a pain clinic in akron. I asked about the dose and he said 10mcg. Reviewed the conversions and appropriate patient selection. Discussed the copy card and trial offer. Brandon said he didn't know about the trial card.
PPLPMDL0020000001	Cleveland	OH	44113	7/18/2014	Quick review of Butrans for those patients requiring around the clock analgesia, that are failing on present therapy, Said Ok , will consider for appropriate patients.
PPLPMDL0020000001	Barberton	OH	44203	7/18/2014	Spoke to ma and gave her managed care grids for both products.
PPLPMDL0020000001	Barberton	OH	44203	7/18/2014	I asked the dr to think about a patient type next week. Those on I. Educate release hydrocodone and not controlled on their current pain medication. If they need a change to atc pain medication...two options OxyContin and Butrans. I asked her if this was reasonable for her to do. She said ok but she doesn't have many pain patient.
PPLPMDL0020000001	Barberton	OH	44203	7/18/2014	I asked him to think about his over 65 age pain patients for a moment. If you decided they could use an atc pain medication Butrans is preferred on aarp and silver scripts unrestricted that happen to be your biggest med d plans. I said would it make sense to write Butrans in that patient population. He said yes. I said can u remember next week, he said sure.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/18/2014	Spoke with dr sable about OxyContin conversions from Percocet and reevaluation of those patients continuing on it for possible conversion to OxyContin. Discussed Butrans in the elderly and aarp and Caremark coverage.
PPLPMDL0020000001	Akron	OH	44113	7/18/2014	Visited Pain/Ortho depts Reviewed OxyContin/Butrans Initiation/Titration along with saving cards
PPLPMDL0020000001	Akron	OH	44320	7/18/2014	I told dr that she really needs to begin using OxyContin and Butrans. I asked her why she isn't taking advantage of each of them? Dr said she doesn't know why and said she's just tired. I asked her what that means and she said tired of arguing with patients about their pain and then requesting Norco and Percocet. I asked her why she is an argument because she needs to just tell her patients what she will be writing and what they should be taking it. Dr said she knows but must deal with patients who pay cash and are on Medicaid. I asked her if she has patients with commercial insurance or Caresource? Dr said she has some and knows she should be doing things different. Dr told me that she is leaving the practice in September and will be moving to a Columbus suburb.
PPLPMDL0020000001	Cleveland	OH	44113	7/18/2014	Reviewed OxyContin abuse deterrent characteristics, every 12hours, along with Butrans for those patients requiring around the clock analgesia that are not adequately controlled on present therapy. Formulary grids, Said ok, has a patient in mind this afternoon
PPLPMDL0020000001	Akron	OH	44320	7/18/2014	I told dr that I want him to use a medicine for pain that he truly believes is most appropriate for his patients and when it comes to patients being treated for daily around the clock pain, he must consider ER products like OxyContin or Butrans. I showed him the conversions for each product and asked him his thoughts? Dr said he will try and has had good luck with it recently. I asked for business for each product. Nothing else learned.
PPLPMDL0020000001	Akron	OH	44320	7/18/2014	I told dr I would like her to find opportunities for Butrans and OxyContin. I told her that I'm guessing she has plenty of opportunity in her practice for Butrans in those who's tramadol or Norco is inadequate and OxyContin is a good solution for those who's Percocet is inadequate. Dr said she would like to more but she can't get branded medicines approved. I asked where and she said for all her patients. I asked if she has private insurance, Medicare or Caresource? Dr said some. I told her that's where her opportunities lie and to use them there. Dr said ok.
PPLPMDL0020000001	Lyndhurst	OH	44124	7/18/2014	Quick hallway. Waited an hour to speak with Dr. Isakov. (he had over 50 patients on his schedule today) Baby Boomer insight. Using Pam profile, told dr. for this opioid naive patient, covered on Medicare D., she would be appropriate for start dose of either OxyContin or Butrans. Asked him to review profile and told him I look forward to discussing more next week.
PPLPMDL0020000001	Lyndhurst	OH	44124	7/18/2014	Quick hallway. Baby Boomer insight. Asked Sarah what % of her patient base does she believe is over age 65? She replied at least 50%. For that patient base, I want you to think about a patient like Pam here, age 71, who has failed on NSAID and aspirin, and has daily, atc, long term pain now and who is appropriate for starting dose of either Butrans at 5 mcg hr or OxyContin 10 mg (every 12 hours). After going through profile, asked Sarah if a patient like Pam walks in this afternoon or next week, before writing Tramadol for this patient, think of starting that patient on Butrans. If Butrans not appropriate, consider 10 mg of OxyContin. Does that sound reasonable?
PPLPMDL0020000001	Lyndhurst	OH	44124	7/18/2014	Quick hallway. Baby Boomer insight, Pam profile. Why is Pam appropriate for OxyContin start? Went through patient profile, patient meets indication and start dose of 10 mg, every 12 hours. When OxyContin is not appropriate, discussed option of Butrans start dose of 5 mcg hr. Dr. Do these 2 options for patient like Pam make sense? Is this therapy something you'd be comfortable initiating for an opioid naive patient like Pam? yes, replied Dr. Kim. Closed with access to my products for those patients over age 65, Medicare D. Preferred status Cigna, UHC AARP and Caremark Silverscripts Med D. He asked me to place items I was showing him on his desk, so he reviewed OxyContin every 12hours, abuse deterrent characteristics, savings cards along with Butrans for those patients requiring around the clock analgesia, Said Ok, no further info obtained, book lunch to discuss
PPLPMDL0020000001	Cleveland	OH	44113	7/18/2014	Reviewed OxyContin every 12hours, 7 tablet strengths along with Butrans for those patients requiring around the clock analgesia that are failing on present therapy. In addition, reviewed Formulary grids/Med D opportunities, Said ok, will assist on reminding Dr. When appropriate.
PPLPMDL0020000001	Stow	OH	44224	7/21/2014	Spoke with chuck about Butrans specific candidates, conversions, dosing, titration and copy cards. Reviewed the Butrans indication. Chuck said they have a handful of patients from summit pain and said they should be writing much more. I asked why he thinks so and he said there are many patients that have been taking IR opioids like vicoden for years and knows they should be on an extended release opioid. I told chuck thanks fe the information. Discussed OxyContin and appropriate patients along with doing and conversions. Shuck said they don't see much because summit pain doesn't use it.
PPLPMDL0020000001	Lakewood	OH	44107	7/21/2014	Asked the doctor if he ever considered the ten mg of OxyContin after someone is taking the Percocet or oxycodone molecule. Dr said sometimes but he said he doesn't have many chronic pain patients. I mentioned it was about one appropriate patient. Talked about the patient that turns into an appropriate patient and why dose in 4 to 6 hour increments with immediate release opioids when you have an option to dose every 12 hours for OxyContin or weekly with Butrans. He said it was a good point and could keep it in mind. Spoke to Beth about managed care and asked if anything has come up to be aware of and she said no.
PPLPMDL0020000001	Cleveland	OH	44195	7/21/2014	Reviewed OxyContin formulary grids, every 12hours along with Butrans for those Tramadol failures requiring around the clock analgesia, Formulary grids Said Ok will continue to prescribe for appropriate patients. nothing new learned. Savings Cards
PPLPMDL0020000001	Stow	OH	44224	7/21/2014	Short discussion over lunch. Dr said that he does see a need in their practice as they continue to reduce total morphine equivalents down. I asked what their goal is an he said he would like to get under 120mg. I asked why so high and he said they just did such a horrible job over the years in not titrating doses of IR opioids. Dr said he said Butrans seems like a product they can move patients to and asked about morphine equivalencies. I told him I can show him approximate conversions from Morphine. Dr said ok and that looks good and said he understands. Discussed patient types, conversions, titration and new indication. I asked dr to use it more frequently because I know he's missing opportunities. Dr said I'm right and said she will write more.
PPLPMDL0020000001	Akron	OH	44333	7/21/2014	Discussion with Becky at front counter. Told her about the new Butrans indication and asked her about her decision to discuss with her patients whom are taking IR opioids around the clock about the option of Butrans and to discuss with dr Oyakawa? Becky said she hasn't done it much but did have a scenario where the patient asked for more more Norco and she took it to Oyakawa and asked about Butrans. Becky said she don't know what the doctor did in that situation. I asked Becky to continue looking for patients who's IR opioids like tramadol or Norco are inadequate. Discussed Butrans attributes, doing, titration and schedule 3, 7 day transdermal patch. I said dr I just want to help you identify the right patient type for Butrans today. Dr said ok. Reviewed the atc patient in need of a change in therapy that is already in need of a chronic opioid...talked about dosing and initiation. Reviewed OxyContin every 12 hour dosing as another option.
PPLPMDL0020000001	Westlake	OH	44145	7/21/2014	Discussed atc dosing and she said at least 2 or more. She said Butrans may be a fit in her appropriate patients, reviewed caresource and the scheduling and refills. Talked about OxyContin dosing and she said she does write schedule two products but will write refill after the the has first write. It. Review of the reformulation of OxyContin.
PPLPMDL0020000001	Cleveland	OH	44114	7/21/2014	Reviewed OxyContin every 12hours, abuse deterrent characteristics, Formulary grid along with Butrans for those patients requiring around the clock analgesia, Asked why treat around the clock pain in 4-6 hours increments? Said no reason but ins. or PA obstacles, Said he will consider for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44195	7/21/2014	Reviewed OxyContin formulary grids, every 12hours along with Butrans for those patients requiring around the clock analgesia, Said she has had extensive experience with both products, but key prescribers at CCF have not. Will continue to inquire for appropriate patients.
PPLPMDL0020000001	cleveland	OH	44135	7/21/2014	Left managed care grids and reviewed scheduling
PPLPMDL0020000001	Lakewood	OH	44107	7/21/2014	Saw dr from window. Dr said Butrans right. I said are you telling me you wrote it. Dr said not yet. I said well just find some to start....weekly dosing and excellent managed care.
PPLPMDL0020000001	Stow	OH	44224	7/21/2014	Short discussion over lunch about Butrans. Discussed dosing, titration, patient type selection, schedule 3, 7 day patch. I asked her how its been since she started seeing patients and what opportunities has she had for Butrans? Sabrina said that she has a couple of patients on it and are doing well. Sabrina said that she had a couple of patients on Norco that she discussed Butrans with and they accepted. Sabrina said both patients started on 10mcg and may need to titrate to 15mcg. I told her I'm glad she has started and they are doing well. Nothing else learned.
PPLPMDL0020000001	Akron	OH	44195	7/21/2014	Visited Pain and Neuro depts (Ng,Leizman,Long,Raymond,Minzter,Mays,Dombrowski) OxyContin/Butrans formulary grids, Initiation/Titration along with appt requests
PPLPMDL0020000001	Cleveland	OH	44333	7/21/2014	Good discussion surrounding OxyContin and Butrans. Led off talking about the oxycodone insight and she told me that she tries to get patients converted as soon as possible and it makes it easy because if patients give her a hard time she falls back on the office policy of 3-4 prn medicines than to an ER opioid like OxyContin or Butrans. Elise said that she has been having good luck with OxyContin recently and patients like the switch from 3-4 times a day. To 2 times a day. Discussion key attributes if OxyContin and discussed titration. I asked her if she has ever titrated down on OxyContin or Butrans? She said she has not and may never have the need. Nothing
PPLPMDL0020000001	Cleveland	OH	44125	7/21/2014	Window call. Reviewed OxyContin every 12hours, 7 tablet strengths along with Butrans 7day transdermal, Initiation/Titration, Said Ok will consider for appropriate patients, Nothing new learned
PPLPMDL0020000001	Stow	OH	44224	7/21/2014	Good discussion over a stand up lunch appointment about Butrans attributes dosing, schedule 3, 7 day patch. New indication, titration and use of supplemental analgesia. I told Sandra that I'm sure she has many patients whom would be ideal candidates for Butrans. I asked her how titrating her patients down off higher doses of IR opioids is going? Sandra said there are good and bad days but its going slowly because patients refuse to either titrate down or move to an ER opioid. I discussed how she needs to set the expectation for pain management and stick to it and provide the patient with ER options like Butrans. I discussed how Butrans allows patients to use opioid and non opioid analgesics for breakthrough pain. Sandra said that's what she is trying to do to get patients slowly transition into products like Butrans. Reviewed BUP 3015 and told her to focus on patients with private insurance, Medicare, Caresource and BWC.
PPLPMDL0020000001	Rocky River	OH	44116	7/21/2014	Spoke to dr about primary care insight. Dr said he writes OxyContin and mentioned dosing it a variety of ways. I pointed out the indication and the every 12 hour dosing schedule. Reviewed the ten mg strength as an opioid naive dose...and reminded on managed care. Highlighted Butrans and the dosing and the Pam patient profile.
PPLPMDL0020000001	Cleveland	OH	44195	7/21/2014	Reviewed OxyContin every 12hours, Said she will no longer be practicing at the Cleveland Clinic, is leaving the area

PPLPMDL0020000001	Valley View westlake	OH	44125	7/21/2014	Discussed w/Aaron OxyContin/Butrans formulary concerns along with upcoming display opportunity at facility
		OH	44011	7/21/2014	Discussed OxyContin dosing. Dr said he was familiar with the reformulation. His biggest concern is writing extended release products with the abuse potential. I said so does that mean you write immediate release products several times a day instead of going to a OxyContin or Butrans? He said yes. I ask so you have concerns of writing OxyContin, I asked if he has concerns writing so much immediate release. He said he is concerned doing that too. Dr said he was familiar with the reformulation and we did cover both Butrans and OxyContin have abuse potential. Reviewed Butrans and asked if he ever uses Butrans after Tramadol if they needed a change in therapy. He said no. I asked why not. Dr said he does write atc medication. But he feels the patients won't actually take it that often (Dr said 4x a day). I said I was confused. Dr said patients aren't compliant. I asked how he felt about patients wearing Butrans and being dosed weekly. Dr said patches have problems of falling off , not lasting..... I said patches or Butrans. He said both. I said both pills form and patches may have adverse reactions using them. Dr said true. Dr came back and told me he just write a Butrans Smcg script.
PPLPMDL0020000001	Westlake	OH	44145	7/21/2014	Reviewed OxyContin dosing and the ten mg dose. Dr told me he doesn't think a lot of OxyContin because he prefers to dose with immediate release or Butrans. I asked if he was familiar with the reformulation and he said yes. Dr said he had a patient he was thinking of writing Butrans for though. He said a oxycodone patient taking 4 doses a day for several months. I said why isn't OxyContin a consideration. Dr said he is concerned because of the stigma and the area that the patient lives for giving extended release. I said is this a patient you trust to have confirmed pathology to support his pain. He said yes. Talked about dosing atc with immediate release when there is a twice a day dosed every 12 hours. He didn't have an answer. I asked him what he thought if the ten mg. Dr said most of his patients need the 40mg. I said but are you aware that the ten mg was not statistically significant separation. Compared to the 20 and 30mg. Referred to fpi section 12.2 the doctor said really. I said so does it make sense now why it's an opioid naive dose. He said maybe so. Reviewed Butrans dosing. And asked him if he ever thought if Butrans after Tramadol if they were in need of a dose or product change to an atc product. Dr said he thinks of Butrans after hydrocodone. Reviewed initiation guide. Asked dr to think about it as there first atc are failing on Norco(considers failures when they are taking every 6hrs)
PPLPMDL0020000001	Cleveland	OH	44113	7/22/2014	Discussed Butrans for those Norco failures, requiring around the clock analgesia, Formulary coverage along with OxyContin every 12hours/abuse deterrent characteristics, Said Ok will continue to find appropriate patients that are failing on Norco(considers failures when they are taking every 6hrs)
PPLPMDL0020000001	Norton	OH	44203	7/22/2014	Talked about the ten mg of OxyContin and the 7 strengths. Dr said there was no evidence that he knows of that would prove dosing with extended release or immediate release products are any better. I said so why dose someone in those 4 to 6 hour increments when there is OxyContin dosed every 12 or Butrans dosed weekly. He said he doesn't do that but he didn't have e answer. Review of caresource and coverage with Butrans. Asked the doctor to only write for appropriate patients that we discussed that are needing a change.<font color=blue><b>CHUDAKOB's query on 07/30/2014</b></font>-Lisa, it sound like the physician was thinking that you were suggesting that doing a product q12h is a "better" option than q4-6 hour dosing? Am I reading this right?<font color=green><b>BARTOLI's response on 07/31/2014</b></font>-Dr seems to buy into the atc message with extended release products and he also feels the oxycontin updated label information is a reason to choose one extended release over another. Dr has been having success with butrans for his caresource and buckeye patients and he feels the dosing is an advantage for his patients.<font color=blue><b>CHUDAKOB added notes on 08/05/2014</b></font>-Ok. Thanks for clarifying.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/22/2014	I reviewed key selling attributes with Jake and reviewed the new indication and use of multiple patches. I asked Jake where he has seen success with it recently? Jake said for some reason he's been off of it recently and he does know why. Make said he may need to review the patients appropriate for it. I reviewed Bup 3015 inclusion and exclusion criteria, conversion guid and discussion of the new MVA about patients appropriate. Jake said ok and told me he's just had some recent set backs with coverage. Jake said its just become so difficult and time consuming. I reviewed plans and told him I will speak with Glenn about where the problems may be. Told Jake to please continue to use the BEP kits and he said he minks he's used 2 of them and they are great for the patient. Discussed OxyContin key selling attributes, doing and patient types appropriate like those already on the oxycodone molecule.
PPLPMDL0020000001	Cleveland	OH	44127	7/22/2014	Reviewed OxyContin abuse deterrent characteristics, every 12hours along with Butrans for those patient requiring around the clock analgesia, formulary coverage , said ok will consider for appropriate patients, deferred to Geneva for PA assistance.
PPLPMDL0020000001	Cleveland	OH	44113	7/22/2014	Discussed OxyContin abuse deterrent characteristics, every 12hours along with Butrans for those Norco failures, Reviewed dosing, Formulary grids, Said he will continue to prescribe to appropriate patients
PPLPMDL0020000001	Cleveland Akron	OH OH	44305	7/22/2014	Dr and mrs Wiora spoke with me about a new patient whom dr attempted to prescribe Butrans to. Dr said the patient had a history if failing Percocet. Dr said that the patient has buckeye insurance and Butrans was denied. I spoke with dr about buckeye and PA criteria with Butrans. I asked dr if he would appeal the PA and he said it won't make a difference because they will not approve it. I asked how he knows and he said he's done it on multiple patients including Butrans patients and they will not approve. I asked dr if he has Caresource patients? Dr said he has more of that than buckeye. I told dr to focus on that plan along with Medicare and private insurance. I discussed the plans and specifics. I discussed how he needs to continue thinking of the appropriate patient and to not allow then to continue on the IR opioids wile tramadol for 3+ months. Dr said ok. Reminded him to use OxyContin for those who's Percocet is inadequate and reviewed dosing and conversions. I asked if that's an issue for him? Dr said its not. Nothing. Else learned.
PPLPMDL0020000001	Akron	OH	44310	7/22/2014	I asked dr about his use of Butrans and told him about the hydrocodone insight. I told him that he needs to focus on the indication for Butrans and use ER opioids for patients on hydrocodone who, are using it around the clock. Dr said that he has not issues in using Butrans and thinks about using it all the time but said sometimes insurance won't pay for it. I asked about plans and he said its hit and miss with both private and Medicare insurance. I told him that nothing is 100% and he can still concentrate on those patient type along with Caresource with the Pa and BWC. Told him to please continue to refill his existing OxyContin patients and try to find new ones from patients inadequately controlled on Percocet.
PPLPMDL0020000001	Cleveland	OH	44195	7/22/2014	Quick Review of OxyContin 7 tablet strengths and formulary coverage, said Ok, is in transition to the Neurological institute, no further info learned.
PPLPMDL0020000001	Barberton	OH	44203	7/22/2014	Reviewed managed care with oxycontin d Butrans. Talked about the ten mg strength of the opioid naive dose and asked if he usually starts his elderly patients at the lowest opioid dose? Dr said sometimes. Showed the 7 strengths using the visual aid and mentioned that the ten did not significantly separate from placebo.
PPLPMDL0020000001	Lyndhurst	OH	44124	7/22/2014	Lunch. Asked Dr about his pain treatment ladder. What does he use first, after aspirin non steroidal? Dr Kim responded Lyrica, neurontin, tramadol. Then what next? He kept repeating, it depends on the individual; all patients are different, have different needs. After about 4 IR opioids is when he thinks about an ER opioid. Asked for him to consider OxyContin sooner and let delivery system do the work. When OxyContin not appropriate, Butrans is another option. Discussed keeping Butrans in mind for BWC patients. Dr Kim stated he's had previous issues with prior authorizations & difficulty getting Butrans through. We responded that it might be due to different carve out employer plans.
PPLPMDL0020000001	Barberton	OH	44203	7/22/2014	Dr said she was aware of the OxyContin dosing. If someone needs a change of medication and they are appropriate for an atc product. OxyContin and Butrans are options.
PPLPMDL0020000001	Mayfield Heights	OH	44124	7/22/2014	Met with Denise while waiting for Dr. Laham. Left packet of info for Josephine including updated OxyContin reformulation folder, oxycontin conversion guide, butrans initiation guide. (left same for Dr. Dews, Frank Sajen PA-C and Gina Fagitlel) NEXT WEEK: check savings cards needs.
PPLPMDL0020000001	Mayfield Hts	OH	44124	7/22/2014	Discussed prescribing opioids in general and Dr says he feels scrutiny from legal organizations and is trying to treat his patients, while also protecting his license. He agrees that the OxyContin stigma is reduced and says more patients ask for Percocet. Dr Laham says he "reserves" Butrans for specific patients with nerve damage, fibromyalgia, osteoarthritis or nerve pain. He stated that overall 30-40% of his patients don't need opioids, so we discussed the 60-70% remaining patient base that DO need opioids.
PPLPMDL0020000001	Mayfield Heights	OH	44124	7/22/2014	Hallway. Reminded dr that last visit, she stated "ATC" pain means when patients keep calling and complaining they need more of ir opioid or refill. I proposed to her to change delivery system earlier, same molecule, dosed every 12 hours. Asked if patients ever give her pushback when she attempts to write OxyContin, sometimes patients get "scared" of ER opioid, and refuse ER opioid. So that's why some patients stay on ir opioid. She did agree that it's reasonable to ask her to consider OxyContin sooner in therapy. Dr states she always starts with ir opioid, adds ER opioid, and provides a few ir opioids for any breakthrough pain. Discussed ability to titrate OxyContin in 1-2 days, based on steady state of 24-36 hours, to next strength of 15 mg, if needed. When OxyContin not appropriate, she has option of Butrans, 1x week buprenorphine patch. Asked for business this week for both
PPLPMDL0020000001	Cleveland	OH	44113	7/22/2014	Reviewed OxyContin/Butrans Initiation/Titration, Said they cover Fairview,Lakewood and SouthPointe (Mike Schumate)
PPLPMDL0020000001	Lyndhurst	OH	44124	7/22/2014	Lunch. Found out from both Dr and Diane med asst that patients do not listen to anything they tell them. Asked them for examples? Diane responded: if they suggest a certain pharmacy, any type of change, they simply don't listen. Asked how they do with handing out savings cards? Both Diane and Dr. Isakov confirmed that while they do hand them out, they get over 15 calls daily re: savings cards not working or discount/savings being inaccurate, product more expensive than they were told, then patients get upset with HCPs and staff. 30% pain reduction insight. Discussed BUP 3024, inclusion criteria, set up study. Discussed efficacy/tolerability for Butrans in naive, and ability to be titrated if needed, up to max dose of 20 mcg hr. Dr was impressed with 4.6 pain reduction for opioid naive. when Butrans not appropriate low dose OxyContin an option. Proven efficacy since 1996, dosed every 12 hours, similar AE's for young and old subjects in clinical trials. We asked Dr and Dr Isakov what they do when patient has issue? They switch to another medication that's more affordable. Let them know majority of pharmacies have point of sale trial/savings for Butrans and OxyContin.
PPLPMDL0020000001	Cuyahoga falls	OH	44223	7/22/2014	Quick call with Kim in hallway of hospital. I reviewed the OxyContin indication,dosing and titration and use in specific populations like those patients already on the molecule. Kim said ok and clinically is works quite well. Told Kim about the Butrans indication,use of multiple patches, and patient specific identification. Kim said she will continue to use both and asked to keep them stocked with patient copy cards.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/22/2014	Spoke with bobby the pharmacist about OxyContin indication, patient type selection, doses,titrations and the pharmacies use of it. Bobby said they do fill it and most are refills which is good that patient stay on it as long as they need it. Bobby said he sees some titration of it and said that they continue to have insurance issues with it. I discussed Butrans indication,key attributes, titration and use of multiple patches. Bobby asked to explain the multiple patches and I used the MVA to illustrate it which bobby said ok.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/22/2014	Dr asked me what's new. I told him the indication of Butrans is new. Told him the indication and asked him what he thinks. Dr said it wounds good and said he hopes his use of Butrans reflects how well it works clinically. I asked him for continued use and to focus on patients treated with IR opioids around the clock. Dr said he is doing he best to convert patients the minute they meet the indication. I told him to please also use OxyContin for those already on the molecule but in an IR delivery system. Told dr its a 1:1 conversions ratio and reviewed dosing and titration.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/22/2014	Lunch appointment with western reserve pain management. Discussed Butrans key attributes, dosing, indication, titration,new indication,multiple patches and patient type selection. Discussed OxyContin dosing, titration, indication, all key attributes and patient type selection. Reviewed all managed care with Glenn, Rick and all physicians in attendance.
PPLPMDL0020000001	Mayfield Heights	OH	44124	7/22/2014	Hallway. Found out that while Dr writes Tramadol primarily for pain, she also favors hydrocodone/hydrocodone combos. Discussed what "triggers" her to write an ER opioid? When patients are on 3-4 IR opioids daily, and have ATC pain, that is when she will go to OxyContin. Asked her to continue with this therapy ladder, yet, consider writing OxyContin, at lowest effective dose, even earlier in therapy. When OxyContin not appropriate, Butrans also an ER option for atc pain. Reminded her to make sure labs does urine screen for buprenorphine. Asked for business and discussed improved Medicare D access.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	7/22/2014	While speaking with Darlene dr Hegde walked up. I told her that she needs to know about the new indications for Butrans and OxyContin. I told her the indications and asked her if she would start some new patients on Butrans? Dr said she is continuing to feel better about Butrans and said that she will continue to look for good patients for it. I told her to look for those patients on tramadol or Norco who are not getting either the efficacy they need or tolerability. Dr said ok. Reminded her to use OxyContin for those patients already on oxycodone.
PPLPMDL0020000001	Barberton	OH	44203	7/22/2014	I asked the doctor to think about is med d patients. Gave him the review of managed care. Reviewed the Smcg of Butrans and the dosing. Reminded of the OxyContin dosing every 12 hours.
PPLPMDL0020000001	Cleveland	OH	44114	7/23/2014	Reviewed OxyContin every 12hours, abuse deterrent characteristics, along with Butrans for those patients requiring around the clock analgesia, Said he continues to find appropriate patients, John said he will continue to
PPLPMDL0020000001	Cleveland	OH	44113	7/23/2014	Reviewed OxyContin every 12hours,formulary grid along with Butrans for those patients requiring around the clock analgesia who are failing on present therapy, said ok will continue to prescribe for appropriate patients, no further info learned.Asked when and where to have more time to discuss, said lunch apt are the best
PPLPMDL0020000001	Munroe Falls	OH	44262	7/23/2014	Told dr that she needs to know the indications for OxyContin and Butrans. I told her the OxyContin indication and asked her her thoughts. She said it makes sense because if someone is in around e clock pain they shouldn't be taking a short acting opioid. I told her that's exactly right and asked her to write more OxyContin and Butrans for those patients who are Inadequately being treated with IR opioids or can't tolerate them. Dr said she will
PPLPMDL0020000001	Barberton	OH	44203	7/23/2014	Reviewed managed care coverage and dosing for OxyContin and Butrans.

	Uniontown	OH	44685	7/23/2014	Dr said he only had a minute over lunch because of a back log of charts to complete. Quickly reviewed OxyContin patient selection, conversions from Percocet and new indication. I asked him for more business. Dr said as a practice they are trying to write fewer opioids and are referring out. Reviewed Butrans new indication,schedule 3,7 day patch,patient type section, conversions, multiple patches and insurance. Dr said he likes Butrans and will continue to try.
PPLPMDL0020000001	Barberton	OH	44203	7/23/2014	Spoke to the nurses and the office manager today about dosing and managed care if both products. Office manager said she will pass the information over to the dr.
PPLPMDL0020000001	Akron	OH	44333	7/23/2014	Dr told me that their patient referrals in the last month with AGMC have increased 300%. I told dr there should be plenty more opportunities to find places for Butrans and OxyContin. Dr said there will be and said that he recently treated the AGMC CEO's wife for back pain and out her on Butrans and she said she loves it. Dr said he started on 10mcg and it seems like the dose she will remain on. Dr said he uses even more OxyContin because its an easy conversion and is tolerated very well. I asked for continued use of each and to continue following the practice protocol for Butrans.
PPLPMDL0020000001	Akron	OH	44313	7/23/2014	Quick hello at window and I showed him the OxyContin 10mg page again and told him he needs to begin converting more patients to OxyContin from Percocet when he's ready to titrate it and they meet the new indication. Dr said ok. Asked him if he would gain more clinical experience with Butrans in those CareSource and Medicare patients and reviewed those pains. Nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44113	7/23/2014	Reviewed OxyContin abuse deterrent characteristics, every 12hours, 7 tablet strengths along with Butrans for those patient requiring around the clock analgesia, Initiation/Titration, Addressed formulary coverage, Reviewed/identified Med D Caremark SilverScripts patients, Said he has a patient in mind, Said I will follow up
	Uniontown	OH	44685	7/23/2014	Led off with oxycodone insight and told him that I'm hoping he makes the decision to use OxyContin when the patient is requiring it daily and around the clock? Dr said he does have history with OxyContin but said the practice is trying to reduce treating chronic pain and is referring out more and more. I told dr I understand and asked him if he believes that there are patients that need a product like OxyContin for their specific pain? Dr said he agrees that there is and has seen it be very effective. Discussed dosing, conversions,titration and patient identification. Dr said he really likes Butrans but said recently he has had more need for prior authorizations and denials than ever. I asked him which plans and he told me he just remembers the need to fail at least 2 other opioids and tight one was OxyContin? I told dr that doesn't seem right and it may have been a buckeye patient. Dr said I might be right. I reviewed insurance plans, Medicare and CareSource PA criteria. Reviewed dosing, titration, new indication,use of multiple patches.
PPLPMDL0020000001	akron	OH	44685	7/23/2014	Started off conversation discussing hydrocodone and oxycodone insights. Dr said that he's primarily in sports medicine but sees many patients for acute or prn pain and not much for around the clock pain. I discussed the need for conversion to ER opioids like Butrans or OxyContin. Dr said he won't use oxycotin because of the street value. I asked him how he knows that? Dr said its just so widely abused? I asked how he knows? Dr said he has just heard all the stories..I asked him when the last time a patient asked him for it specifically? Dr said he hasn't heard it. Dr asked if something changed with it recently? I asked him if he knows it was reformulated? Dr said no. Discussed it from the main visaid. Discussed dosing, titration and patient selection. Discussed Butrans dosing, conversions, titration, oqlient types, multiple patches and indication. Dr said he likes the schedule 3 because he can call it in. Dr asked about insurance coverage and I told him about all plans.
PPLPMDL0020000001	Cleveland	OH	44195	7/23/2014	Reviewed OxyContin every 12hours, 7 tablet strengths, along with Butrans 7 day transdermal, for those patients failing on present therapy requiring around the clock analgesia, Said ok, has some experience with past practice, Said to book appt to further discuss
PPLPMDL0020000001	Cleveland	OH	44113	7/23/2014	Intro. Discussed with Cecelia Rph-Mgr. OxyContin every 12hours, along with Butrans patient info booklets. Will be located on the 1stfloor in Oct.
PPLPMDL0020000001	Barberton	OH	44203	7/23/2014	Reviewed OxyContin FDA insight. Highlighted the oxycodone molecule with the dosing every 12 hours. Talked about the elderly profile. Also talked the elderly profile of Butrans. Reviewed patch placement and dosing.
PPLPMDL0020000001	Barberton	OH	44203	7/23/2014	Reviewed med d. Coverage. I asked him what he thought about converting patients to Butrans in this population if theyre current medication is not working and appropriate for atc treatment. Dr said yes. Reviewed dosing, no first pass and explain how the product is excreted thru the bowels not the urine. Mentioned OxyContin as the other option dosed every 12 hours.
	Uniontown	OH	44685	7/23/2014	Met joe the pharmacist from Orville location who is filling in chile Kim is on vacation. I asked him how go familiar he is with OxyContin and Butrans. Joe said he of course knows about OxyContin and doesn't know much about Butrans. I reviewed from the main visaid the use of OxyContin and patient type section and key selling attributes along with indication. Explained the Butrans schedule 3,7 day transdermal patch, conversions, patient type section,indication, patch application sites and rotation, use of multiple patches. Joe said it wounds like it should be used for anyone taking tramadol or vicoden for a long period of time. I told him those are good candidates.
PPLPMDL0020000001	Uniontown	OH	44685	7/23/2014	Heather told me that she does not and will not write narcotics for any patient. Heather said that her experience with dr Petrus ruined her for pain management. I asked her if she believes that there are patients out the with certain conditions or pathologies that may require ER or even IR opioids?m heather said there are for sure but she will not be writing them. I continued to review both OxyContin and Butrans. Discussed key attributes for each. Heather said she write Butrans about 3 years ago under Petrus so she knows about it but will not use either of my products. Nothing else learned.
PPLPMDL0020000001	Barberton	OH	44203	7/23/2014	Saw dr said I wanted to get take on two things. First...his thoughts on the 10mg of the OxyContin. For his patients. Dr said its an option. I said true but do you write that dose. He said not usually. Dr said he writes more 40's. I went over the elderly profile, the opioid naive dose of the 10mg and highlighted the Percocet comparison page of the visual aid. Focused on why move from hydrocodone combo. To oxycodone combo for an atc pain patient. He said he would think about OxyContin. My second thing was: Asked the doctor what was his two chronic conditions he treats often. Dr answered but I only knew the spinal stenosis. I asked him of those when was the last time you treated them with 4 doses in a month. He said never. I said would you like to know an option? Dr said Butrans. I said yes. We discussed the atc patient needing long term opioid treatment. Dr said it was hard to convince patients to take a patch. I made the recommendation. They Initiation Butrans as their first atc pain medication instead if dosing in 4 to 6 hour increments with immediate release product for months. Dr said maybe. I said don't the patients you trust to take opioids chronically want pain relief? He said yes. I said why would they fight you when you are offering them an option that can be taken weekly. He made a come t about the pain patients and not TrueType knowing which are telling him the truth or which are seeking drugs. Dr said he does using and pill counts and has contracts.
PPLPMDL0020000001	Rocky River	OH	44116	7/24/2014	Spoke to rose the ma and introduced her to Butrans and OxyContin. Discussed scheduling and dosing and gave managed care grids. Left leave behinds for the dr to review.
PPLPMDL0020000001	Westlake	OH	44145	7/24/2014	I just wanted to highlight the appropvate patient type for OxyContin and Butrans. First if the patient is unsatisfied with their current treatment plan and they are in need of daily atc long term therapy....then OxyContin can be dosed every 12 hours with and Butrans can started at either 5mcg or 10mcg. Dosed every 7 days. He said. And walked from the window.
PPLPMDL0020000001	Westlake	OH	44145	7/24/2014	Reviewed managed care coverage for both product ts and dosing for both OxyCotin and Butrans. She was working by herself today so she was busy.
PPLPMDL0020000001	Cleveland	OH	44103	7/24/2014	Reviewed w/Saj RPh-floater, OxyContin abuse deterrent characteristics, every 12hours, along with Butrans for those patients requiring around the clock analgesia, that are failing on present therapy, Said Ok, dosent see many RX for ER narcotics but will remind for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44103	7/24/2014	Reviewed OxyContin 7tablet, abuse deterrent characteristics, Along with Butrans 7 day transdermal for those patients requiring around the clock analgesia, Said Ok,will continue to prescribe OxyContin for appropriate patients, appts scheduled thru main office
PPLPMDL0020000001	Cleveland	OH	44115	7/24/2014	Quick window review of Butrans for those patients requiring around the clock analgesia that are failing present therapy, Said ok will consider for appropriate patients
PPLPMDL0020000001	Stow	OH	44224	7/24/2014	Short discussion with dr and led off with the oxycodone plain insight and asked him if he has patients currently continuing on Percocet? Dr said not many. I reviewed the OxyContin indication and asked him if they are meeting it to convert them. Dr said ok and will try and asked about cost. I showed dr him the formulary grid and asked him to focus on private insurance. Showed dr the Butrans conversions and showed him how to convert from tramadol and Norco. I asked what might be preventing him from using it? Dr said he thinks its a good novel medicine and likes the patch but its just too expensive. I asked how he knows if he hasn't used it? Dr said its branded so it must be expensive. I told him his perception of coverage is wrong. Showed him the plan coverage from all aspects and copy cards. Dr said ok and will keep it in mind.
PPLPMDL0020000001	Westlake	OH	44145	7/24/2014	Office closed but Laura the office manager was there. Gave her the managed care grids and highlighted the major plans that they see. Explained the scheduling of each product and reviewed dosing. Left materials for the dr.
PPLPMDL0020000001	Euclid	OH	44117	7/24/2014	Dr DeMiccio won't be in until 1:30 today. Discussed with manager/director Paul non branded items & Purdue resources that can help their practice,, such as protect your practice brochure, OARRS reporting, Med 80 State Guidelines. Paul asked for more green protect your meds at home brochures. Discussed OxyContin & Butrans as indicated in FPI.
PPLPMDL0020000001	Stow	OH	44224	7/24/2014	Led off conversation by telling drs out the oxycodone plain insight and told her I'm telling her this for two reasons. First, because she uses opioids and second because of the revised indications for OxyContin and Butrans. I explained the new indication for OxyContin and then showed her the conversions from oxycodone and Percocet. I asked her if she will take patients on IR opioids meeting the OxyContin indication and convert them? Dr said it makes sense and will. Reviewed Butrans key attributes,indication, dosing and patient types and asked for her business.
PPLPMDL0020000001	Berea	OH	44017	7/24/2014	Told him about the managed care med d plans and cResource for Butrans and highlighted OxyContin. I asked when was the last time he treated someone in chronic atc pain with 4 doses a month? He said not often. I said its an interesting option for Butrans huh. He said yes. I said remember that this week if you have someone unsatisfied with their current atc therapy. He said ok.
PPLPMDL0020000001	Westlake	OH	44145	7/24/2014	Spoke to Pam and Virginia the heads nurses. Highlighted managed care for each products, went over the Butrans tear sheets as a tool to save the doctor time when explaining Butrans to patients that are appropriate for the product.
PPLPMDL0020000001	Berea	OH	44017	7/24/2014	Spoke to the nurse she said no lunches but I could leave literature. I showed her the products and explained dosing and scheduling. She said she did t have anything to do with the product selects. I asked if she handles prior auths and she said not she said he checks patients into the room and pulls charts but doesn't have patient contract expect thru window of walking in the room.
PPLPMDL0020000001	Stow	OH	44224	7/24/2014	Spoke with Holly the pharmacist about OxyContin and Butrans key selling attributes. Holly said that she is not dispensing any Butrans and the boxes are about to expire. I discussed the new indications for OxyContin and Butrans and use of multiple patches for Butrans. Discussed OxyContin conversions and use of OxyContin for patients already on Percocet.
PPLPMDL0020000001	Mogadore	OH	44260	7/24/2014	Dr said she only had a few minutes due to her schedule starting at noon. Told her about the OxyContin and Butrans indications. I told her about the oxycodone insight and told her I wanted her to take a closer look at her patients currently taking Percocet to see if they meet the indication for OxyContin and convert them. I reviewed dosing,titration, 7 doses,single entity q12 oxycodone. Reviewed Butrans key selling attributes and asked her to write a prescription for this patients needing a dose adjustment on tramadol and meet the indication.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/24/2014	Quick message in hallway and told him about the OxyContin indication. I told him that he needs to identify patients currently on IR oxycodone who are meeting The oxycodone indication and convert them. Dr said ok. I showed him the Butrans initiation and titration guide and asked him to try it clinically for those on tramadol who are still in pain and taking it around the clock. Nothing lose learned.
PPLPMDL0020000001	Cleveland	OH	44103	7/24/2014	Quick review of OxyContin abuse deterrent characteristics, every 12hours, along with Butrans for those patients requiring around the clock analgesia, Said Ok, sending patients to Pain mgmnt, scheduling appt thru main office
PPLPMDL0020000001	Mogadore	OH	44260	7/24/2014	Led off discussion with the tramadol insight and told dr that I want him to focus on patients like that who he continues to refill who are meeting the indication for Butrans. Discussed the indication and dr said that the problem is that he has too many patients on Medicare and cash only who can't afford or will not use branded medicines for pain management. I told dr that I know that doe not encompass all his patients. Dr said he does have good patients that have legitimate pain like spinal stenosis and most are of Medicare age. I asked him if he also has patients under 65 that have legitimate pain where Butrans would be appropriate? Dr said yes. I told dr then to focus on those two subsets of his patients for Butrans. Dr said ok. I explained managed care coverage, copy cards, and new BEP kits. Dr said he doesn't really have time for that but will take them. Discussed the need for his patients being refilled on Percocet to be converted to OxyContin as long as they meet the indication. Dr said ok.
PPLPMDL0020000001	Westlake	OH	44145	7/24/2014	I said think about this today...if someone has pain atc and in need of a change....OxyContin dosed every 12 hours and Butrans dosed weekly. I asked if he thought these options might go over well with his patients ready to try something new for their chronic pain.
PPLPMDL0020000001	Westlake	OH	44145	7/24/2014	Saw dr from window. Dr said he hasn't write. Butrans yet but will. I said than you and remember if the patient is unsatisfied with their pain controll and are atc...OxyContin dosed twice a day, every 12 hours. And Butrans can be started at either 5mcg or 10mcg and dosed weekly. HE said he remembered. I wished him luck this week.



PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/24/2014	I asked dr what he is saying to a patient about Butrans for the first time? Dr said its simple. He said he just tells them he wants them to use a weekly patch for pain because the current treatment isn't working. I told dr that's great. I asked him if he gives them the patient information guide and he said when he has them. I left him more. I showed him the Medicare coverage grid and told him I know in the last he told me that he doesn't want to mess with Medicare because if all the trouble with coverage he doesn't have time for. I discussed the new plan coverages and asked him if he's willing to try it with a patient whom qualifies for Medicare on one of the plans I outlined. Dr said he not sure but may try with silverscript because he has a few that need to change medicines for pain. I asked him to focus with those patients whom are on tramadol or Norco.
PPLPMDL0020000001	Westlake	OH	44145	7/24/2014	I said take managed care out of the equation for a minute. What prompts you to write Butrans? Dr said for patients that want weekly dosing. I asked if he gives the. A choice between Butrans or say, OxyContin? Dr said no, he usually just tells them. I said for a person who talks so highly of this product how come it's not your first at choice? Dr said managed care is his hold up. Reviewed the major plans. I spoke w Julie the office manager and Jeanette they couldn't recall any problem plans. Dr did say he would keep Butrans in mind this week.
PPLPMDL0020000001	Westlake	OH	44145	7/24/2014	Small talked with the nurses about their busy day. Asked them if they see a lot if chronic pain patients and they said some. I asked how often they come back...monthly or other. They said it all depends. I asked if anyone does education like Butrans patch placement or information on taking OxyContin every 12 hours not bid. They said the doctors do all that. I passed so e tear off sheets for the doctor and leave behinds
PPLPMDL0020000001	Cleveland	OH	44113	7/24/2014	Reviewed Butrans for those patients requiring around the clock analgesia that are failing present therapy that he sending to Pain mgmnt, Said Ok, will consider, Reviewed OxyContin abuse deterrent characteristics, Will be moving to 2nd floor of Grace Hospital
PPLPMDL0020000001	Akron	OH	44312	7/25/2014	Quick hallway call. Told him again about the oxycodone insight and that he needs to take a closer look at patients already on the oxycodone molecule but taking it in a 4-6 hour delivery system and converting them to the q12 delivery system of oxycodone , OxyContin. Dr said ok and that he's trying but said if difficult to get patients to take a product with the name OxyContin. I asked him if he's educated his patients on the reality of oxycodone and OxyContin. Dr said he has and some patients just don't want it. I told him I understand and he must have patients that are motivated to change. Dr agreed. Reviewed Butrans key selling attributes and to just continue identifying appropriate patients whom are on tramadol or Norco and is proving inadequate.
PPLPMDL0020000001	Akron	OH	44312	7/25/2014	Saw dr through window and dr said hello. I asked dr if he's continuing to find candidates for Butrans where the tramadol or Norco is inadequate? Dr said he's working on it and said all his patients are doing well on it. I asked him if he had Medicare patients in around the clock pain? Dr said sure. I told him about aarp, silverscript and ESI coverage and asked him to use Butrans for those patients meeting the indication. Dr said thanks for the
PPLPMDL0020000001	Westlake	OH	44145	7/25/2014	Something to think about next week. When you see someone unsatisfied with their current pain medication and their current pain medication and there taking more than 2 doses a day...they could be a candidate for a control release product like OxyContin or Butrans dosed weekly. I asked her if it made sense to make that change next week. She told me that she has no problem. Writing OxyContin for the right patients and she is starting to use Butrans more. I reminded her of managed care with Butrans and said I would return another time to go over specific patient types and dosing options.
PPLPMDL0020000001	Akron	OH	44312	7/25/2014	Dr said he's only in until 10am so said he didn't have much time. I told him to please keep the OxyContin and Butrans indications in mind when he sees a patients taking a IR opioid for a condition that generates pain around the clock and on a daily basis. Dr said he's working on it. I reminded him about OxyContin conversions and that OxyContin is a single entity oxycodone product.
PPLPMDL0020000001	Akron	OH	44319	7/25/2014	Dr came to window and told me he didn't need any OxyContin or Butrans. I told him he knows there are no samples right? I told dr I'm glad he knows my products and to just use them instead of generic pills when those patients meet the indications because I bet some of them meet the indication of an ER opioid. Dr said ok. Nothing else learned.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/25/2014	Spoke with dr about his use of Butrans said the patients he is placing on it. Dr said he has two concerns with Butrans. Dr preface he will continue using it going forward. Dr said the first is that he wants doses over the current max of 20 mcg patch. m dr said his patients have built up tolerance with the 20mcg patch and need more to take what 20mcg can offer. I asked dr if he has placed anyone on something for supplemental analgesia? Dr said he tries not to do that. Dr also said that is continues to be difficult to be difficult to approve. I spoke with dr about the plans in question and where we sit with the center for pain management director. Dr said he hopes is can be improved otherwise he may need to reduce his prescribing. I told him that's not an option and we will work hard to streamline the approval process. Mark the RN had to discontinue his use of Butrans due to constant dashing and itching. Discussed OxyContin use in patients already on oxycodone plain and Percocet. Dr did not wish to engage in discussion further.
PPLPMDL0020000001	Westlake	OH	44145	7/25/2014	Gave the experienced kit to the dr per our discussion last visit. Gave to Christy cause dr was busy.
PPLPMDL0020000001	Olmsted Falls	OH	44138	7/28/2014	Spoke to dr about Butrans managed care a follow up from last time. Highlighted the appropriate patient type, initiation dose, and patch rotation. Another option is OxyContin dosed every 12 hours. Dr said he doesn't write as many schedule 2 products and that he prefers schedule 3. Dr said that's what interests him about Butrans. Left naive study and told him I would review the pain results next time.
PPLPMDL0020000001	Rocky River	OH	44116	7/28/2014	Dr came out to waiting room while I was waiting for Dr Hohn. Dr introduced himself to me and I did the same. I told him I was here to provide another option for his chronic pain patients...instead of adding another then another immediate release opioid to a patients pain program...if they are no longer acute there's two options to keep in mind. OxyContin dosed twice a day, every 12 hours. And Butrans. A pain patch. Dosed weekly started at 5 or 10 mcg depending. I asked when was the last time they treated someone chronically with 4 doses a month. He said he hardly every. Reviewed managed care and defined who might be a candidate for Butrans and OxyContin.
PPLPMDL0020000001	Westlake	OH	44145	7/28/2014	Reviewed scheduling.-font color=blue>b>CHUDAKOB added notes on 08/08/2014</b>-font>Lisa, you may want to think about changing your verbiage from chronic to around-the-clock as that is now what is in the FPI. Spoke to nurse about seeing dr. On'y dr the as does lunches and that dr is a target. Left my card and request for lunch or short meeting.gave nurse (who's name I forgot) a review of Butrans and OxyContin.-font color=blue>b>CHUDAKOB's query on 08/08/2014</b>-font>Lisa, what does this mean "On'y dr the as does lunches and that dr is a target." In addition, if you review OxyContin and Butrans, please put in your call notes what was discussed. A review is very broad and when you go to look next time, it will be very difficult to know what was discussed. Thanks Lisa!-font color=green>b>BARTOLI's response on 08/12/2014</b>-font>Seeing doctor. The only doctor that does lunches is not a target. I reviewed Butrans and OxyContin- dosing and scheduling and reviewed appropriate patients. Asked for an appointment to see the doctor, the nurse said I would call me if the doctor said it would be ok. By the way, The nurse called me the next day on behalf of the doctor and did request an appointment. I left the success story on voicemail.-font color=blue>b>CHUDAKOB added notes on 08/14/2014</b>-font>Thank you for the clarification.
PPLPMDL0020000001	Berea	OH	44017	7/28/2014	Reviewed managed care and his top plans. Dr agreed that these are big plans. Reviewed coverage with OxyContin and Butrans and savings cards. Dr said even five more dollars is too much for patients to lay sometimes.I said maybe so. We talked about his triggers for changing someone from immediate release opioid to extended release. Dr said if he has to get to an extended release he will refer out cause its too complicated to treat pain. We talked about the small percent that he may decide to treat in house. Dr said the osteoarthritis or certain lower back pain patients. Dr said he will try and educate a patient to move to extended release because of the half life of the I. Educate release products. I asked if those patients take the medication you recommend or do they tell u they request specific medications. Dr said sometimes both. Dr said he likes that OxyContin has be en re formulated he said patients don't want to be associated with it. I said it is that that your view or is that what they tell you when you go to write it. He said both. Dr asked why pain management wasn't writing this all the times and if it was a good pain option more ppl would write it. Talked about the appropriate patient using the Initiation guide. Dr agreed that a product like Butrans or OxyContin has a fit for patients needing atc ling term chronic pain treatment. Dr said he usually at that point refers out but if he didn't he would write Butrans after Tramadol or oxycodone after norco.
PPLPMDL0020000001	Akron	OH	44319	7/28/2014	Discussed oxycodone plain and oxycodone/APAP insights and continued to discussed use of OxyContin for his patients already on the oxycodone molecule. Dr said he has been trying Butrans for those patients on Percocet and asked me if that's wrong? I told him its not and asked him why he wouldn't keep patients on the same molecule oxycodone as long as they are tolerating it and convert them to OxyContin? Dr said he doesn't know and that's a good suggestion and will do that. Continued to talk about appropriate patient types for Butrans, key selling attributes,titration, and clinical study review. Dr said he's been having issues with coverage on UHC community plan and buckeye. I reviewed insurance and plans with Medicare.
PPLPMDL0020000001	Akron	OH	44310	7/28/2014	Quick hello and asked her to convert to OxyContin when her patients have either an efficacy or tolerability issue with oxycodone. Dr said ok. I told her that with a patient savings card, OxyContin can be very affordable for most patients and gave her the formulary grid. Left her the Butrans conversion guide.
PPLPMDL0020000001	Westlake	OH	44145	7/28/2014	Kim said the doctor is I. Religious holiday. We talked about managed care with Butrans and OxyContin.
PPLPMDL0020000001	fairview park	OH	44111	7/28/2014	Reviewed dosing of OxyContin and FDA insight. Talked about Butrans dosing ,scheduling and patch placement.
PPLPMDL0020000001	Westlake	OH	44145	7/28/2014	Spoke to lisa the nurse about how to see the dr about our products. She basically said she would ask the dr and get back to me. I gave her over view of Butrans and OxyContin.
PPLPMDL0020000001	Akron	OH	44304	7/28/2014	Quick message at front counter and told him to convert patients to OxyContin who are on Percocet who are meeting the indication for OxyContin. I told dr to focus on oqtients who have daily, around the clock pain and convert them to OxyContin. I told dr to use Butrans for those needing a dose adjustment on tramadol. Dr said ok. Nothing else learned.
PPLPMDL0020000001	Fairview Park	OH	44126	7/28/2014	Saw Erica the head nurse in the hall carrying a chair. I asked what she was doing and she explained he weather is so bad they are claiming the office this week. I asked if he dr was going to the hospital and maybe I could catch him there at some point. She said she didn't know that this was rather sudden and they are all heading home right now. They were there canceling patients for the week. Left product literature and materials for the doctor.-font color=blue>b>CHUDAKOB's query on 08/08/2014</b>-font>Where did you discuss Butrans? I don't see that in the note?<font color=green>b>BARTOLI's response on 08/12/2014</b>-font>When leaving the literature behind for the doctor( naive reprint for Butrans and conversion for OxyContin). I highlighted the materials being left behind. It was not an indebtb conversation because they were rushing me out of the office.-font color=blue>b>CHUDAKOB added notes on 08/14/2014</b>-font>Ok. Please make sure there is some specific product discussion. Just leaving literature is not a product discussion. Thanks Lisa!
PPLPMDL0020000001	Berea	OH	44017	7/28/2014	Dr said she will not write any schedule two products. We talked about the patient not acute that is taking immediate release opioids several times a day. She said she has these patients that she prefers to get the, n a control release if they are chronic. Dr said 3 or 4 doses regularly long term would be her trigger signal that the patient may be a candidate for Butrans. I highlighted oxycodone molecule and reviewed attributes from 12.3. Dr said she was aware. Talked about the ten mg dose and showed a visual of all the doses. Dr kept wanting to talk about Butrans. Highlighted the starting dose. Dr said she usually writes the 5mcg. Talked about no first pass, titration and using break thru medication. Reviewed dosing and patch rotation.
PPLPMDL0020000001	Fairlawn	OH	44333	7/28/2014	Spoke with Gilbert who has been away for a while. Brought him up to speed OxyContin indication,titration and abuse deterrent properties. Gilbert said they are continuing to dispense it,and said the abuse deterrent properties are more important than ever especially in Ohio with the opioid task force set up by kasich. Discussed Butrans indication, multiple patch use, and new Medicare coverage. Gilbert said he is still seeing patients possibly not being started on the correct dose. I asked Gilbert to council his patients about the product and ask them to speak with their doctors and their dose. Gilbert said he does it very day.
PPLPMDL0020000001	Westlake	OH	44145	7/28/2014	Thru window. Wanted to give you so something to think about for your pain patients who are uncontrolled. If they are someone who is not acute taking more than 2 doses a day, I'd like to throw out another option or two. The ten mg of OxyContin is our lowest of 7 doses. And instead of dosing it In 4 to 6 hour increments like immediate release products you can dose it twice a day, every 12 hours. I asked if there would be any hesitation for choice oxycontin or Butrans? She said cost. She also said I need to leave her information on Butrans. I told her next time I would talk to her about how the weekly pain patch showed pain reduction it it in the studies. She said Dr made a comment of why I was here so early. Got into a conversation about trying to educate more doctors about our products. I asked the doctor why he values OxyContin for his pain patients. Dr said it has a history and the reformulation is important. I asked him to think about those words this week. Highlighted tha chronic pain patient he is going to make a change to their pain program...why not OxyContin? He said managed care would be the only road block. I asked him whattheaverage chronic pain patient looked like. He said 60's. I said if you have ever had concerns about treating Butrans or OxyContin in the elderly population here's some pearls. Butrans. Doesn't go thru first pass, it's single entity and there is no dose adjustment. Therefore you can start someone on 5mcg. I said OxyContin has many studies involving the elderly population. And except for the debilitated elderly...no dose adjustment and this opioid is also single entity. So options are good...you can dose in 12 hour increments with OxyContin or Butrans weekly. I asked the doctor if this was something he was comfortable with...he said yes. Reviewed managed care with staff and the nurse Shirley..
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/28/2014	I asked dr and Liz if they are getting new patient referrals? Dr said they continue to get new patients and is getting them from dr goswami and Bonyo. I asked what most if the patients are on when they come to him? Dr and Liz both said oxycodone. I told dr that the problem is that patients are not initiated on ER opioids soon enough. Dr said he agreed and said most don't know how to write for ER opioids so he has to do it but by the time he gets the patients they don't want to change or reduce their pill count. Dr said it's a tough battle. I asked dr what percentage of those oxycodone referral patients are converted to q12 OxyContin? Dr said about 50%. I asked why only 50% and he said the others either refuse or its a cost thing. I asked him to keep patients on the oxycodone molecule but just carnage the delivery system. Left dr with a conversion guide for Butrans.
PPLPMDL0020000001					

PPLPMDL0020000001	Akron	OH	44310	7/28/2014	Gave dr the oxycodone plain insight and asked him why he thinks its ok to continue refilling oxycodone but hard for him to convert to the q12 oxycodone? Dr said its a combination of what the patients is willing to take, cost, and he comfortableness with the product. I asked dr if there something with OxyContin that makes him uncomfortable? Dr said not really but cost and patient preference are important. I told dr to find patients with private insurance who are motivated for change and convert them to a 12 hour delivery of oxycodone. Dr said ok. Reminded him to use Butrans for those who are not getting adequate analgesia with tramadol or Norco.
	Westlake	OH	44145	7/28/2014	Saw Laura the. Ruse and office manager. I asked her if she knew the products I promoted. She said pain meds. I told her OxyContin and Butrans.mi asked if she knew the difference between OxyContin and an oxycodone product. She did. I asked her for the non acute patients, those who may not be able to take NSAIDs...why would someone be dosed in 4 to 6 her increments when there is dosing every 12 hours so twice a day? She said cost. We reviewed the commercial plans. Also highlighted Butrans dosing.
PPLPMDL0020000001	Akron	OH	44333	7/28/2014	Dr came up to the window and asked me what's new. I told him to focus on the verbiage of the OxyContin indication especially patients who are being treated on a daily around the clock basis. I told dr that those patients should be converted to a ER opioid like q12 OxyContin. Dr said ok. I asked him if he would reevaluate patients currently on IR opioids for that purpose? Dr said ok. Handed dr the Butrans conversion guide and Medicare formulary guide and told him to convert his tramadol patients.
PPLPMDL0020000001	Cleveland	OH	44106	7/29/2014	Reviewed OxyContin 7 tablet strenghts, every 12hours, Formulary grids along with Butrans for those patients requiring around the clock analgesia, Med D formulary opportunity, Initiation/Titration said he will consider for appropriate patients, Asked if he had a patient in mind on today's schedule, will definitely consider
PPLPMDL0020000001	Cleveland	OH	44112	7/29/2014	Reviewed OxyContin 7 tablet strengths every 12hours, abuse deterrent characteristics along with Butrans for those patients requiring around the clock analgesia, Said Ok will consider for appropriate patients, No new info
PPLPMDL0020000001	Cleveland Hts	OH	44118	7/29/2014	Reviewed Butrans for those Med D CareMark Silverscript patients requiring around the clock analgesia that are failing on present therapy, along with OxyContin every 12hours with abuse deterrent characteristics,Said Ok will consider for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44106	7/29/2014	Reviewed OxyContin every 12hours, abuse deterrent characterstics along with Butrans Med D formulary coverage, Savings cards, Said Ok will consider for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44118	7/29/2014	Reviewed OxyContin abuse deterrent characteristics every 12hours for those patients that she is treating around the clock, along with Butrans, 7 day transdermal and favorable Med D coverage, Said ok will consider for appropriate patients and will help remind Dr.
PPLPMDL0020000001	Cleveland Heights	OH	44118	7/29/2014	OxyContin/Butrans review with Opey RPH-mgr, Savings cards Said Ok, no new info obtained
PPLPMDL0020000001	Unlontown	OH	44685	7/29/2014	Quick hello and discussed OxyContin key selling attributes, dosing, titration,q12 h administration, start principles. Dr said ok, and that she's trying not to use any opioids because it causing too many problems. Asked her if Butrans would be an option and that's its a 7 day,schedule 3 patch? Dr said she's on the fence. Nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44106	7/29/2014	Visited Pain/Ortho/Seidman(Hayek,Sahgal,Alin) OxyContin/Butrans Initiation/Titration guides
PPLPMDL0020000001	Cleveland	OH	44102	7/30/2014	Reviewed with tech Audrey (OxyContin/Butrans formulary grids and Butrans patient info guides, Said ok will relay info to Rph
PPLPMDL0020000001	Norton	OH	44203	7/30/2014	Reviewed the fda insight. dr said he would choose medications that had this technology over products that did not. Reviewed dosing every 12 hours. Dr knew almost every dose of oxycotin. I asked if he converts patients from hydrocodone to oxycotin or what product the patient typically gets converted from. Dr said hydrococone. we talked about the elderly patients over 65 years of age and pain medications for their chronic pain. I highlighted areas from oxycotin and areas from butrans. reviewed the experience kits and dosing for Butrans. dr said he just wrote oxycotin 15mct and it was approved on buckeye. Dr grabbed his chart and confirmed it. Dr said he liels butrans dosing. reviewed managed care.
PPLPMDL0020000001	Cleveland	OH	44113	7/30/2014	Reviewed Butrans for those patients failing on present therapy requiring around the clock analgesia,Med D coverage, Initiation/Titration along with OxyContin abuse deterrent characteristics, Said Ok will consider for appropriate patients, Asked if she had a Caremark patient in mind this afternoon, said she will consider
PPLPMDL0020000001	Cleveland	OH	44104	7/30/2014	Window call reviewed OxyContin every 12hours, abuse deterrent characteristics along with Butrans for those patients requiring around the clock analgesia, Initiation/Titration, Said ok will continue to prescribe for appropriate patients, nothing new learned
PPLPMDL0020000001	Barberton	OH	44203	7/30/2014	dr waved and said he got my information from last time. I said on oxycotin dosing or butrans weekly dosing or was it the study I left showing the butrans pain scores? he said...yes. I said just shoot for find one appropriate patient for butrans this week. one that you already treat for pain, that the patient is coming to you for a treatment change and if they are appropriate for an atc proedct try wither the 5 or thye 10mcg. gave him guide to review. he said ok
PPLPMDL0020000001	Akron	OH	44333	7/30/2014	Elise along wd ir Vucetic told me she is having some issues with approvals on OxyContin and Butrans. Elise said that for OxyContin its usually a cost issue with patients recently in the doughnut hole having to pay mega bucks for even the lower doses. I asked her if she is having trouble with any specific plans and she said she can't remember but does have them for Butrans. Elise said that she attempted to write Butrans for a UHC Community plan patient and they sent a PA form requiring all three failures first of ER Morohine, methadone and fentanyl. Elise said its ridiculous because she will not write any of those rotor to a product like Butrans. I agreed it doesn't make clinical sense and to please have either Brittany or Sherika get me denials letters or PA forms and I will try and help. I asked her for continued business and to identify appropriate patients already on the oxycodone molecule for OxyContin.
PPLPMDL0020000001	Cleveland	OH	44113	7/30/2014	Reviewed OxyContin abuse deterrent characteristics, 7 tablet strengths every 12hours along with Butrans for those patients who are failing on present therapy and require around the clock analgesia. Said Ok will continue to prescribe for appropriate patients, Said he spending most time on Ortho floors
PPLPMDL0020000001	Cleveland	OH	44104	7/30/2014	Quick review of OxyContin abuse deterrent characteristics every 12hours along with Butrans for your patients that are failing on present therapy, Said Ok will consider for appropriate patients
PPLPMDL0020000001	Norton	OH	44203	7/30/2014	spoke to christy the office manager. Gave her some literature to pass the the doctors. Asked her if there was any value I could share with the nurses regarding opioids like oxycotin or butrans. She said she didn't think it was necessary. she said the doctors pull their own couons and do their own education for the patients. highlighted the mananaged care of both products
PPLPMDL0020000001	Akron	OH	44333	7/30/2014	Dr told me that he's been having issues getting OxyContin approved. I asked him to give me more information and he said he had a patient that had anthem 8c/bs and said that asked him to use MS Contin or fentanyl prior to OxyContin. Dr said he did an appeal. Dr also said he and Elise Leone have been having pa issues with Butrans. Dr said he had a patient with anthem Medicare and they asked him to trial methadone and fentanyl prior to approving Butrans. Dr said he sent an appeal late last week. I spoke wi him about the current coverage and about employer group carve outs as well as Medicare and Medicare typical pa approvals. Dr said they will get them completed and will try to use some of the verbiage in the indications which may help in the PA.
PPLPMDL0020000001	Unlontown	OH	44685	7/30/2014	Saw dr at front desk and she said hello to me and if I had anything to leave her? I told her that is and asked her for a minute. Dr said she can't but will hear what I have to say for a second. I told her the indication of OxyContin and asked her to focus on who she is seeing who may be treated with IR opioids like Percocet who are taking it daily and around the clock. Dr Wynne said ok she will. I told her to also continue to reassess her patients on tramadol or Norco for potential Butrans candidates.
PPLPMDL0020000001	Akron	OH	44313	7/30/2014	Quick call at window and told him I have one question and one comment. I asked him if it is possible for him to identify one more patient a week already on oxycodone but taking it 4-6 times a day to convert them to OxyContin? Dr said ok. I told him that he has a total of 7 doses to individually dose his patients and titrate though and that its a single entity oxycodone delivered every 12 hours. Handed dr and Tina the Butrans conversions slide guide and the Scott profile and asked for him to sue it in patients like him.
PPLPMDL0020000001	Cleveland	OH	44113	7/30/2014	Visited Ortho/Pain Dept (Shen,Daoud,Novak,Bilfield,Stearns,Joy) OxyContin/Butrans Initiation/Titration, Formulary grids along with appt requests
PPLPMDL0020000001	Barberton	OH	44203	7/30/2014	Dr told me he quite the pain center today. Dr said he would still see patients in his office every day, just no longer at the painfor center. I asked if he would continue to intiation therapy for chronic medications and pain he said yes. Reviewed Butrand elderly over 65 patients and special considerations for treating them with opioids long term. Dr said it can vary. I said lets talk about the butrans and oxycotin profile for these patients types. highlighted the number of over 65 years of age patients and those over 75 years of age from our studies (shown on the adverse reactions visual aid of core visual aid). Discussed what not going thru the first pass process could mean to an older patient. Reviewed no dose adjustment for the elderly, renal or mild/moderate hepatic patients. Talked about treating a chronic pain condition with weekly dosing and a patch that is visable on their body. I asked why he wouldn't give bugtrans for every appropriate over 65 age person like we were discussing. Dr said it is a good option and couldn't think of too many reasons. We talked about abuse potential, multi patch dosing and managed care plans. specific to aarp and silver scripts. Reviewed the ten mg of oxycotin. Talked about the no dose adjustment-except debilitated elderly and when they could titrate doses every 1 to 2 days. Talked about the updated label change for oxycotin and highlighted certain sections of the fda core visual aid pages. dr said he would continue to write.
PPLPMDL0020000001	Akron	OH	44320	7/30/2014	Told dr the oxycodone plain insight and asked her if she has any of those patients who may be treated with it around the clock? Dr said probably some. I asked her why she wouldn't consider converting them to q12 oxycodone? Dr said its usually cost or a pain in the behind to approve. I asked her to please continue trying and to focus on orivate insured patients. I asked dr for the next month until she leaves to focus on her patients in around the clock pain on tramadol and Norco. Dr said she will do her best. Nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44113	7/30/2014	Reviewed OxyContin abuse deterrent characteristics every 12hours along with Butrans for those patients requiring around the clock analgesia that they are sending to pain mgmnt. Said Ok, referred to MaryRN
PPLPMDL0020000001	Barberton	OH	44203	7/30/2014	reviewed oxycotin dosing everyb 12 hours and butrans weekly dosing. Talked about the 10mg of oxycotin and savings cards. Focused on managed care with butrans and patch placement.
PPLPMDL0020000001	Barberton	OH	44203	7/30/2014	Asked the doctor if it was important to him that his patients who need a chronic mediation have medications that have the abuse deterrant properties? Dr said it is nice if they do, but so many don't that he doesn't think about it. Dr said scheduling 3 or 2 makes no difference to him. We talked about Oxycontin 7 doses and I asked him if he every uses the lower doses like the 10mg or the 15mg? he said sometimes. We talked about the elderly patients and I asked if he usually starts them at the lowest opioid dose of what ever drug he selects or if he does conversions. Dr said he tends to go slow for the elderly and then titrat. dr said he prefers not to dose more than twice a day if he can help it. I said so you must use oxycotin quite often? He said he does use it but will a variety of opioids. We talked about every b12 hour dosing. We talked about why any prescriber wouldwant to have a patient dose themselves several times a day in 4 to 6 hours increments when there are other choices like oxycotin or butrans dosed weekly. Dr said primary care doctors don't want to write long acting because they feel they are more dangerous. I said but if they don't ever write them and continue to write hydrocodone several times a day for years...is that not dangerous? Dr said no it is dangerous but he said doctors feel its safer to dose the other way. Talked butrans dosing, managed care. The nurses michelle and kim told the Dr they should write more burans.
PPLPMDL0020000001	Cleveland	OH	44120	7/31/2014	Reviewed with Ebony Rph OxyContin/Butrans patient profiles, Savings cards, said Ok no new info learned
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/31/2014	Spoke to Beth the pharmacist intern. I asked her how familiar she is with OxyContin and Butrans? Beth said she knows about OxyContin but doesn't know much about Butrans. I reviewed OxyContin MVA explaining the key selling attributes, dosing, conversions,abuse deterrent characteristics: tiers 1 and 3. Explained appropriate patient selection. Reviewed Butrans key selling attributes, patient type selection, conversions and copy cards and trial offer. Beth said she learned a lot and thanked me for coming in.
PPLPMDL0020000001	Cleveland	OH	44120	7/31/2014	Reviewed OxyContin abuse deterrent characteristics every 12hours along with Butrans for those patients failing on present therapy requiring around the clock analgesia, Said ok will consider for appropriate patients, sends most chronic pain to Pain mgmnt, Asked why not send/start on Butrans while transitioning, said she ok
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	7/31/2014	I told dr that I wanted her to focus on a patient type for Butrans. I asked dr if she has patients currently being treated with tramadol for pain? Dr Azem said she has some yes. I showed her the Scott profile and reviewed he details of the profile. I asked her if it makes sense to write Butrans in that situation and if she will do it in her practice? Dr said she has in the past and will continue. I asked her if she also has patients on oxycodone? Dr said only a few because she doesn't like it. I told her when she does have those patients taking it daily and around the clock to use OxyContin. Dr said ok.
PPLPMDL0020000001	Akron	OH	44312	7/31/2014	I asked dr what tends to trigger him to use Butrans or any ER options for that matter? Dr said when he knows a patients pain is most likely not going to go away like spinal stenosis or arthritis. I told dr thanks for the info and told him the Butrans indication. I asked dr to focus on patients that have daily around the clock pain like Scott and quickly reviewed the profile. Dr said he's not sure he's started Butrans for a tramadol patient but will consider it. I told him to also consider OxyContin for those patients already on the molecule like Percocet and showed him the conversions. Dr said thanks for the information.
PPLPMDL0020000001					

	Parma	OH	44129	7/31/2014	Introduced myself to pharmacist. She was happy to hear about what we r reviewing with physicians regarding around the clock pain and who the right OxyContin and butrans patients might be...she agreed. She sometimes encourages her patients to talk to their Doctor about alternate therapy when their pain becomes around the clock and they are experiencing break through on their current medication. We were unable to provide savings cards, but directed her online for the coupons.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/31/2014	Spoke with dr Ali about his patients on OxyContin and Butrans. Dr told me that he is continuing to have issues with OxyContin and Butrans insurance approvals. I told him I'm currently working with Glenn and Rick on it. Asked for continued business.
	Cuyahoga Falls	OH	44223	7/31/2014	I held up the OxyContin conversion and titration guide as well as the Butrans on e and told him OxyContin is a single entity 12 hour delivery of oxycodone for his patients already taking the oxycodone molecule and still in pain. I told him Butrans is a schedule 3, 7 day transdermal patch for patients in pain on tramadol or Norco and are taking them around the clock. I asked him if he is ok using them? Dr said he might use Butrans but said he's not sure. I asked him what he's not sure about and he said he doesn't like treating pain and is trying to just not see those types of patients. Dr then walked away. Nothing else learned.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/31/2014	Caught dr in hallway of hospital and he told me he's been having issues getting OxyContin and Butrans covered by insurance. I asked dr for examples and said he's not positive but the last one rejected for Butrans was for the UHC community plan. I told him that I'm working with Glenn and Rick to help streamline Butrans approvals and gain more clarity on coverage. Dr said his issues with OxyContin mostly come from Medicare and private insurance. Dr said most companies want MS Contin first. I asked him how many patients remain on MS Contin? Dr said the problem is that he has to jump through hoops to get what he wants the patient to have. I told him I understand and will be in touch.
PPLPMDL0020000001	Parma	OH	44129	7/31/2014	Met Myra for the first time, said she really appreciates savings cards and patient information brochures. Myra Gold and Karen both shared a patients report when initiating Butrans. She experienced blurred vision, dizziness and shortness of breath. Patient removed patch, side effects disappeared. She said that she has noticed that coverage has improved with Butrans. We informed her of Med D United/silverscript formulary changes. Myra mentioned that "Unum" is giving her difficulty in the nursing homes. Talked briefly about Tramadol patient appropriate for Butrans, she felt that they come to her beyond that from other physicians.
PPLPMDL0020000001	Cleveland	OH	44113	7/31/2014	Quick window OxyContin review every 12hours, abuse deterrent characteristics along with Butrans for those patients requiring around the clock analgesia, Said Ok, he knows, will consider, will be taking over Med Dir role at Ridge facility
PPLPMDL0020000001	Brooklyn	OH	44144	7/31/2014	Reviewed OxyContin abuse deterrent characteristics every 12hours along with Butrans for those patients failing on present therapy requiring around the clock analgesia, Said Ok will consider, no new info learned
PPLPMDL0020000001	Cleveland	OH	44144	7/31/2014	Window call, Reviewed OxyContin abuse deterrent characteristics every 12hours along with Butrans for those patients failing on present therapy requiring around the clock analgesia, Said Ok will keep it in mind, said to book appt to further discuss
PPLPMDL0020000001	Tallmadge	OH	44278	7/31/2014	I asked dr what the downside is to wiring a q12 oxycodone instead if refilling an IR oxycodone for a patient who is still in pain? Dr said there isn't a downside to the product clinically but said that cost and the name OxyContin makes it more difficult. I told dr I understand and asked him to focus on orivate or ftrication patients. Dr said ok. I asked him if he thinks Butrans is an opportunity for patients who are in pain on tramadol or Norco and are on them around the clock. Dr said he thinks its a viable option he just needs to find patients. I told him to focus on patients like Scott and reviewed the profile.
PPLPMDL0020000001	Parma	OH	44129	7/31/2014	Talked with Melody the MA because the Doctor was not in. She said that the DEA was in recently and the Doctor will no longer prescribe scheduled medicines. I shared with her Butrans might be a product he would be interested in knowing about. It is a schedule III opioid, can call in refills etc. she thought he might be interested and will give him the medication guide. She gave me a lot of time.
PPLPMDL0020000001	Westlake	OH	44145	8/1/2014	Talked about the 10mg dose option- reviewed fpi section 12.3. highlighted managed care and med plans. Asked the doctor if he every starts the elderly on a lower or the lowest dose of an opioid? Dr said yes. I said do you do this for all elderly or just the one's you already know to be debilitated? Dr said all elderly because they have a higher risk of respiratory depression. Reviewed the warning section of both products. Reviewed no dose adjustment, and highlighted the dose reduction with oxycotin for the debilitated. Reviewed the dosing for butrans and also highlighted managed care coverage.
PPLPMDL0020000001	Cleveland	OH	44127	8/1/2014	Reviewed OxyContin abuse deterrent characteristics every 12hours along with Butrans for those patients failing on present therapy requiring around the clock analgesia, Said Ok, will continue to look for appropriate patients
PPLPMDL0020000001	Garfield Hts	OH	44125	8/1/2014	Quick OxyContin review abuse deterrent characteristics every 12hours along with Butrans for those patients requiring around the clock analgesia that he is sending to Pain mgmnt, Said Ok will consider for appropriate patients, still no change in appt requests
PPLPMDL0020000001	Uniontown	OH	44685	8/1/2014	I asked dr to please continue identifying patients as he has said before who are coming to him on oxycodone and not controlled. Dr said he is doing his best. I told him great and to look at his existing patients on oxycodone maybe first prescribed for acute pain and now have around the clock pain. Dr said ok. I reminded him to use Butrans as well as that schedule 3, 7 day transdermal patch for patients with daily around the clock pain.
PPLPMDL0020000001	Mayfield Heights	OH	44124	8/1/2014	Gina not in today, Discussed product info updates with Gina. Also showed Gina updates to Butrans patient guides and the importance of handing out to each new Butrans patient. Discussed Medicare D status, both products. Left Scott profile, new patient tear sheet, OxyContin conversion guide for all Hcp's in practice.
PPLPMDL0020000001	South Euclid	OH	44121	8/1/2014	Spoke to his med asst Jen. Today not good. Dr has no breaks this am, then will be leaving for the day for appt at 1-1:30 pm & not returning to office. Stop back next week, call first, she will try to get me in front of him. Told her I'm just asking for 30-60 seconds. Updated on Medicare D status, both products.
PPLPMDL0020000001	Westlake	OH	44145	8/1/2014	Reviewed the 10mg dosage and asked why he wouldn't try it after someone has been on hydrocodone several times a day for long term? Invited to Butrans program, tried to lock down date for residents. need to follow up.
PPLPMDL0020000001	Westlake	OH	44145	8/1/2014	Dr came to window. Something to think about doctor when you see your over 65 aged patients needing chrnk pain treatments that butrans not only doesn't go thru first pass and is mostly excreted thru the feces...which might be important to your renal impaired patients. But when it comes to coverage- explained the aarp and silver scripts. And coupons for those insured.
PPLPMDL0020000001	Westlake	OH	44145	8/1/2014	asked danielie if there was patient information i could provide to them for oxycotin and butrans. She said it was up to the doctor but thought they didn't need anything. left a butrans studyfor the doctor to review. Briefly highlighted the dosing with daniel of butrans.
PPLPMDL0020000001	Uniontown	OH	44685	8/1/2014	I asked dr if he would tell me who is and who is not a good candidate for OxyContin? Dr said that's easy because anyone on IR oxycodone he considers as a possible candidate and those who don't have chronic pain shouldn't be on it. I told him thanks and to focus on the indication which states patients with daily, around the clock pain. Dr said ok. I told him I'm hoping he's also focusing on Butrans as the option for patients with the same indication who are still in pain or tramadol or Norco. Dr said ok and that he's being asked of akron general to refer to pain management and is having a hard time with it. Dr said after 3 months of pain treatment he's
PPLPMDL0020000001	Mayfield Heights	OH	44124	8/1/2014	Quick window. Presented Josie w Scott profile, b4 you refill your next Tramadol, consider Butrans. and another option for long term pain: OxyContin. Left Scott profile, new patient guide, and OxyContin conversion guide for Josie and all HCP's in office.
PPLPMDL0020000001	Beachwood	OH	44122	8/1/2014	Talked to MA since NP and Doctor were on vacation. She said that the dr keeps asking for OxyContin savings cards. Told her that I will be back as soon as I can with some. She said patients seem to like fentanyl 3 day patch but think that 7 day butrans is too long.
PPLPMDL0020000001	Cleveland	OH	44104	8/1/2014	Reviewed Butrans for those patients requiring around the clock analgesia,Initiation/Titration, along with OxyContin abuse deterrent characteristics every 12hours, Said Ok will keep it in mind,
PPLPMDL0020000001	Green	OH	44232	8/1/2014	Spoke with Jenna about who is prescribing OxyContin in the area. Jenna told me that comprehensive pain management drs are using it and she has seen some from dr Petrus. I thanked Jenna for the information and reviewed the dosing and patient types appropriate who. Meet the indication. Reviewed Butrans schedule 3,7 day transdermal patch, titration, and patient types whom meet the indication.
PPLPMDL0020000001	Akron	OH	44305	8/1/2014	I told dr that I'm pretty sure that he gets new patient referrals that come in on products like Percocet, Norco and Tramadol who are taking them on a daily around the clock basis. Dr said yes all three but most on Norco or Percocet. I told dr how important it is to him to have patients like that on an ER form of an opioid? Dr said he tries his best and finds that with OxyContin and even generic analgesics they all require some type of prior authorization. I told dr I understand that may be true and asked him if its 100% of the time with OxyContin? Dr said its pretty close. I asked him if it gets approved when the pa form is completed? Dr said almost always approved. I asked him if he will continue to come the that process with OxyContin? Dr said he will. Showed him the MVA 10mg page, dosing and titration. I asked dr to please convert more oxycodone patients to OxyContin when the meet the indication for it. Dr said ok. Showed dr the Butrans MVA and reviewed patients types appropriate for it. I asked dr if he has any experience with it yet? Dr said no. I asked why and he said he has no reason. I reviewed key selling attributes, conversions and titration and asked him to just try it and allow for it to prove itself clinically in the right patient type. Dr said ok.
PPLPMDL0020000001	Uniontown	OH	44685	8/1/2014	I told dr that I wanted to help him identify patients for Butrans and wanted to take a minute to review Butrans 3015. Dr said he is way behind and doesn't have time. I told him I understand and to please identify patients already on an IR opioid or opioid naive with daily, around the clock pain. Told him I'm leaving him the trial and the conversion and titration guide for OxyContin.
PPLPMDL0020000001	Cleveland	OH	44113	8/1/2014	Reviewed OxyContin every 12hours, abuse deterrent characteristics, along with Butrans for those patients requiring around the clock analgesia who he send to Pain mgmnt. Said Ok, will consider.
PPLPMDL0020000001	Cleveland	OH	44124	8/1/2014	Met w medical asst at front desk. Dr C not in today. Discussed both ER single entity products I have for patients with daily, etc, long term pain.(verbatim indication) Left Scott profile, Butrans patient tear sheet, OxyContin savings sell sheet and 9/10 Speaker invite.
PPLPMDL0020000001	Woodmere	OH	44122	8/1/2014	Cheryl is a traveling pharmacist who talked for about 30 seconds because they were short staffed and three very long lines. She has had a few scrips for 30mg OxyContin which she has had to order. I explained I was a new rep and that this territory has been vacant for a while. She asked about savings cards which I don't have any of yet. I will take it to her as soon as I get them. Next time she said she would like to hear about what we are saying to the physicians.
PPLPMDL0020000001	Akron	OH	44319	8/1/2014	Follow up with dr from lunch on Monday. I asked him if he feels more comfortable after our conversation about using OxyContin for patients already on oxycodone and how OxyContin is a single entity q12 dupry system of oxycodone. Dr said he does and feels good about using OxyContin withy hesitation. I asked him if he will also look into using Butrans for his Medicare patients specifically those with AARP or Silverscript plans. Dr said he will keep his eyes prn.
PPLPMDL0020000001	Garfield Heights	OH	44125	8/1/2014	Reviewed with Tech OxyContin every 12hours along with Butrans for those patients requiring around the clock analgesia, Said Ok, not filling many narcotics.
PPLPMDL0020000001	Cleveland	OH	44113	8/1/2014	Quick Review of OxyContin abuse deterrent characteristics every 12hours along with Butrans for those patients failing on present therapy, Said ok will consider, no new info learned
PPLPMDL0020000001	Garfield Hts	OH	44125	8/4/2014	Reviewed OxyContin every 12hours, abuse deterrent characteristics, 7 tablet strengths along with Butrans Initiation/Titration, 7 day transdermal, Med D formulary opportunity, Said Ok will look for appropriate patients to
PPLPMDL0020000001	Mayfield Heights	OH	44124	8/4/2014	Hallway. Primary care insight, why I'm sharing insight. Dr surprised at data. Discussed Butrans as ER, single entity opioid, no first pass liver metabolism, 4 strengths, 1x week patch. Dr says recent male patient he placed on Butrans very happy. Reinforced Medicare D Silverscripts & UHC AARP preferred status. Another single entity option, is OxyContin. Discussed 10 mg for opioid naive, can titrate in 1-2 days, simillar AEs in young & old subjects. Dr Vilinsky asked if I heard about recent death of infant on OxyContin? The baby's great grandmother is " our" patient stated Dr Vilinsky. I replied no, what happened? His med asst Keanna printed out aonline article & I then confirmed with office staff that Dr Vilinsky patient, Ida Howard, age 74, had the infant at her home when police were called (911 call). I asked Dr Vilinsky are you sure it was OxyContin? Could it have been oxycodone? Keanna brought article over which we all looked at; it states oxycodone, (which is same molecule in OxyContin, I told dr & Keanna) yet in IR delivery form. I let them know I promote OxyContin, dosed every 12 hours, for (verbatim indication) Additionally, I stated I must track this event back to corporate, & their office may be contacted by Purdue. * see adverse event reported below - I discussed low dose OxyContin, in appropriate patients for legitimate pain. Closed call with formulary status.
PPLPMDL0020000001	akron	OH	44333	8/4/2014	Dr back from vacation and only has a second. Dr said he will have more time next week and I told him until then to focus on the indication for Butrans and identify patients who are in daily around the clock pain who are currently taking an IR opioid. Dr said he's trying. I told him to also look for those same patients but taking Percocet and converting them to OxyContin. Dr said ok.
PPLPMDL0020000001	Berea	OH	44017	8/4/2014	Spoke to jasmín about dosing and reformulation with OxyContin. Gave her Initiation guide for Butrans. Highlighted the patch placement.
PPLPMDL0020000001	Akron	OH	44333	8/4/2014	Elise asked me to explain how the copy cards work in general for OxyContin and Butrans? I explained how they work and who is eligible. Elise said she just gives them to everyone. I told her any federally funded programs like Medicare and Medicaid do Not qualify. Elise said ok and then I asked her to simply identify patients already on oxycodone and convert them to OxyContin and Butrans patients from tramadol and Norco.
PPLPMDL0020000001	Garfield Hts	OH	44125	8/4/2014	Visited Pharmacy, (Rebecca Taylor - Rph mgr.) Left OxyContin/Butrans info.

PPLPMDL0020000001	Fairlawn	OH	44333	8/4/2014	I asked Sue and Jessica about unison managed Medicaid plan. Jessica said she has not seen any for OxyContin. But said they have seen them in the past. Sue said she thinks that UHC community plan is under Unison. I looked it up and she is correct that Unison runs UHC community. Discussed key attributes for oxycodone and Butrans
PPLPMDL0020000001	Akron	OH	44333	8/4/2014	Spoke with dr through window and told him I need a few minutes to sit down with him to discuss important information about OxyContin and Butrans. Dr said Wednesday afternoon he will have time. I told hi. Great and until then to please focus identifying patients currently taking IR oxycodone who are in daily around the clock pain and convert them to OxyContin and patients in pain on tramadol or Norco to write Butrans. Dr said he will see me Wednesday. I left him the Butrans Medicare D grid with Marsha.
PPLPMDL0020000001	Mayfield Heights	OH	44124	8/4/2014	Quick hallway, as endocrinology colleagues all exit thru Vilinsky/ Stancescu hallway. Dr Villabona asked where have I been? I responded not calling on endocrinology specialty any longer. I promote two single entity, ER opioid products now: OxyContin & Butrans. Oh, ok, she responded. & continued to walk out of building.
PPLPMDL0020000001	Lakewood	OH	44107	8/4/2014	Trying to confirm which address she is at. Had to make a call to make the no call file change status.
PPLPMDL0020000001	Garfield Hts	OH	44125	8/4/2014	Reviewed OxyContin abuse deterrent characteristics, every 12hours, 7 tablet strengths along with Butrans initiation/Titration, 7 day transdermal for those patients requiring around the clock analgesia, Med D formulary opportunity. Said Ok will consider, typically never prescribes more than 2-3 tablets a day for his pain patients, Reiterated OxyContin every 12hours
PPLPMDL0020000001	Garfield Hts	OH	44125	8/4/2014	Visited Pain/IM depths (Topalsky,Arrabi,Kohler,Samuel,Singh,Sadowski) OxyContin/Butrans initiation/titration, formulary grids
PPLPMDL0020000001	C. Falls	OH	44223	8/4/2014	Spoke with Cindy the pharmacist and asked her what they are seeing in terms of plans or pa's for OxyContin or Butrans. Cindy said that they have been seeing more TID dosing for OxyContin coming through and the insurance companies will not approve it. I reviewed the appropriate dosing of OxyContin as q12 and 8a and 8p. Cindy said they are in limbo and I asked her why these drs are not titrating the dose? She said they are saying its not lasting the full 12 hours. I asked her if some of that may be from the dosing schedule? Cindy said it probably is. I discussed the dosing and titration at 1-2 days and a single entity oxycodone. Discuss Butrans key attributes and discussed Medicare D plans grid. Cindy said their biggest payor for Medicare is SummaCare D because of where they are located. She said they usually don't give much problem and said that aarp and silverscript are still Quick hallway. Primary care insight. Dr surprised at data! Shared why I'm telling him this. Discussed low dose OxyContin & opioid naive strength of 10 mg, every 12 hours, one tablet at 8 am and 1 tablet at 8 pm. Product attributes including ability to titrate every 1-2 days. I am just asking for one patient today, this week, who meets the indication. He will think about it. Another ER option is also single entity, Butrans. Discussed BUP 3024, studied in 1024 naive patients, tolerated, efficacious & patients able to be titrated to max dose of 20 mcg hr within a few weekly Dr asked in opioid naive? Yes I responded. Since CIII, can be called/ faxed & patient can be called for titration instructions. Showed & left Butrans patient guide. Asked for just 1 or 2 patients this afternoon, remainder of week who meet indication. Dr says " sounds good!"
PPLPMDL0020000001	Richmond Hts	OH	44143	8/4/2014	Spoke with Cindy the pharmacist in the hospital. Discussed OxyContin dosing and titration and her seeing TID dosing due to providers saying patients say it doesn't last the full 12 hours. Discussed proper dosing regimen. Discussed Butrans dosing and titration, key attributes and Medicare D plans. Cindy said they see most SummaCare then the other plans.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/4/2014	Reviewed Butrans for those patients requiring around the clock analgesia failing on present therapy, Said ok, leaves pain meds to dr but will keep it in mind. Likes the once weekly matrix delivery system, reiterated Butrans has the same abuse potential as other CIII opioids.
PPLPMDL0020000001	Garfield Hts	OH	44125	8/4/2014	Quick review of OxyContin every 12hours, abuse deterrent characteristics along with Butrans for those patients requiring around the clock analgesia, said Ok, hasn't prescribed lately but will keep it in mind, no CCF policy
PPLPMDL0020000001	Garfield Hts	OH	44125	8/4/2014	Gave FDA insight. Talked about dosing of every 12 hours with OxyContin and 7 doses. Highlighted Butrans dosing and patch placement and how to discard. Also talked about the coupons for the patients.
PPLPMDL0020000001	North Olmsted	OH	44070	8/4/2014	Spoke with dr and Gail one of the RN's about OxyContin and Butrans patient types and insurance coverage. I asked dr how his patients are handling the conversion from IR oxycodone to OxyContin? Dr said most accept the switch and said its important to let them know its the same product but dosed different. I told dr that's good to know and asked for continued business. Discussed Butrans key selling attributes and told dr and Gail to focus on Medicare wins and reviewed them. Discussed pre certifications and pa denials for Butrans in the office. Gail said that she usually doesn't have any issues with Butrans coverage. I asked her which plans and she said Caresource is the easiest then UHC community plan which there aren't many patients anyway then buckeye. Gail said she had a denial just last week with buckeye. I asked about Medicare D and she said they don't have many in Ravenna and most are probably in Cuyahoga Falls. Gail said she uses cover my meds for some pa's but the Medicaid she uses that plans PA form which she said works better.
PPLPMDL0020000001	Garfield Hts	OH	44125	8/4/2014	Reviewed OxyContin every 12hours, abuse deterrent characteristics along with Butrans for those patients failing on present therapy requiring around the clock analgesia, Formulary grids. Said Ok will continue to prescribe for appropriate patients.
PPLPMDL0020000001	Garfield Hts.	OH	44125	8/4/2014	Reviewed OxyContin abuse deterrent characteristics every 12hours, 7 tablet strengths along with Butrans for those patients requiring around the clock analgesia failing on present therapy, Said ok, leaves pain meds to dr but will keep it in mind. Likes the once weekly matrix delivery system, reiterated Butrans has the same abuse potential as other CIII opioids
PPLPMDL0020000001	Independence	OH	44131	8/5/2014	Super fast. He tries not to write for OxyContin and doesn't really have experience with butrans. He will be more than happy to talk with me over lunch.
PPLPMDL0020000001	Barberton	OH	44203	8/5/2014	Talked about the med d and caresource coverage in Butrans and OxyContin. I asked the dr if he takes a single entity product into consideration for his elderly patients or not? He said he uses norco cause less Tylenol. I said Butrans and OxyContin done have any Tylenol. I explained the dosing and asked if his patients would like the dosing option and if he will write it for appropriate patients this week. He said "sure sure".
PPLPMDL0020000001	Cleveland	OH	44113	8/5/2014	Quick review of Butrans formulary (Med D UHC/AARP/Caremark Silverscripts, Said Ok, will continue to prescribe to appropriate patients, Reminded of Butrans patients booklets
PPLPMDL0020000001	Cleveland	OH	44113	8/5/2014	Reviewed OxyContin 7 tablet strengths every 12hours along with Butrans for those patients requiring around the clock analgesia, Med D (UHC/AARP, Silverscripts) Said ok continues to find appropriate patients and will look to expand use
PPLPMDL0020000001	Barberton	OH	44203	8/5/2014	Extended release insight. Reviewed the patient that may be appropriate for chronic atc pain treatment. Dr said that typically he wouldn't write OxyContin after 2 doses of a hydrocodone or oxycodone. I said why. He said he reserves OxyContin for more serious pain patients. We discussed attributes like the 10mg and opioid naive dose. The variety of 7 doses. Dr said he hasn't seen a patient yet that meets the criteria. Reviewed appropriate patient type. Dr said his hesitation is in the patch technology of other pain patches he has tried in the past. Dr said in the past patches don't work as good. We talked about the naive study and the pain results, the percentage of adverse reactions from the study. Reviewed supplemental and titration. At the end I asked what he would tell his patient as he initiated therapy of Butrans for the first time. Dr said what's the dose again. So reviewed the Initiation guide where he said most of his patients would be started at 5mcg. He remembered it was 7 day dosing. I said is this patient on an opioid? Dr said yes...I said then you'll want to remember to give them something until steady state is reached by day 3. Dr asked about patch placement, showed visual aid and reviewed managed care. Dr said he will try it in appropriate patient.
PPLPMDL0020000001	Cleveland	OH	44113	8/5/2014	Reviewed OxyContin abuse deterrent characteristics, 7 tablet strengths along with Butrans for those patients requiring around the clock analgesia that are failing on present therapy, Said he continues to prescribe Butrans for appropriate patients, likes it for the elderly and reiterated no change on CII policy
PPLPMDL0020000001	Norton	OH	44203	8/5/2014	Dr said she doesn't initiate schedule 2 products. Talked about the extended release insight. Dr said she will write three doses in a day before she would even consider changing from that medication to another one. Talked about the ten mg of OxyContin, reviewed the opioid naive dose via the fpi. Reviewed the elderly profile and the 7 doses. Nap said she hasn't tried Butrans because it's too new for her. She said she isn't comfortable and doesn't have her arms warped around it yet. Reviewed Initiation guide, dosing and patch placement. Managed care covered last. <font color=blue><b>CHUDAKOB's query on 08/15/2014</b></font>What exactly is she uncomfortable with?<font color=green><b>BARTOLI's response on 08/18/2014</b></font>Using extended release opioids.<font color=blue><b>CHUDAKOB added notes on 08/18/2014</b></font>I know, but why? There has to be a reason why? Once you get to that reason, you can begin to build from there.
PPLPMDL0020000001	Maple Heights	OH	44137	8/5/2014	Quick introduction. Would like to have savings cards. Thinks butrans is a great product but doesn't see too much coming through. Sees a lot of Percocet, not too much OxyContin lately.
PPLPMDL0020000001	Norton	OH	44203	8/5/2014	Asked Christy the office manager if I could bring the m coffee and get a word in with the new doctor. She said maybe next week but they were in a meeting and today was not good. Highlighted the products and managed
PPLPMDL0020000001	Akron	OH	44305	8/5/2014	I asked dr if he can recall any of his Medicare D patients are on IR IR ER opioids for around the clock pain? Dr said he's sure there are some. I asked him to please put some focus on that patient population along with his private insured as candidates for Butrans. Dr said he will keep it in mind. I asked dr to please also look into his patient population that is on Percocet who may have already been taking it for 3+ months because they may be meeting the indication for OxyContin. Nothing else learned.
PPLPMDL0020000001	Norton	OH	44203	8/5/2014	Something to think about this week- talked about med d plans d highlighted the elderly profile for both products. Dr said ok thanks.
PPLPMDL0020000001	Akron	OH	44310	8/5/2014	Caught dr going into a room and told him to please focus on patients for Butrans that suffer from daily around the clock pain and are taking an IR opioid like tramadol. I told him to also focus on th Sam criteria for OxyContin except for patients currently taking Percocet. Dr said ok and things have been going well. Spoke with Shar about copy cards, managed care plans with Medicare D and indications for Butrans and OxyContin. Shar said she can't remember the last pa or denial she's had go Butrans. I asked her out of 10 prescriptions written that have required a PA how many get approved? Shar said about 5. I asked her if she's happy with that and she said yes because the criteria is so wrong and inappropriate. I told her I agree and which plans give the most difficulty? She said Medicaid and Medicare. She also said employer BWC plans are tough as well. I reviewed care Caresource PA, Medicare and private insurance coverage. Shar said she typically calls the plans directly for coverage and sometimes she gets things approved on the phone or they will fax the necessary forms to complete.
PPLPMDL0020000001	Norton	OH	44203	8/5/2014	Review dosing of both products. Reviewed patch placement and titration. Talked about the FDA draft guidance for OxyContin.
PPLPMDL0020000001	Cleveland	OH	44113	8/5/2014	Brief Intro to Butrans 7day transdermal, CIII, Initiation/Titration along with OxyContin abuse deterrent characteristics, every 12hours, Said Ok will set up inservice with Med Dr.Ty Dahodwala
PPLPMDL0020000001	Independence	OH	44131	8/5/2014	Quick call, introduction. He said that the state of Ohio is making it more difficult to write OxyContin. I asked if he feels that some patients really benefit from OxyContin? He agreed but said that some patients like it too much. We discussed the abuse deterrent properties of OxyContin which he agrees are important. He has a little bit of butrans experience with good results but doesn't usually think of it. Next time he'd like to hear more.
PPLPMDL0020000001	Barberton	OH	44203	8/5/2014	Dr did not come back to lunch but sarah the nurse made him a plate. Spoke to nurse and office manager sarah for a while regarding the products. She asked about reformulation, which I explained and used core visual. Asked about dosing every 12 hours as an option instead of dosing someone every 4 to 6 hours with an immediate release product. Talked about the oxycodone comparison to OxyContin I the 12.3 section of the fpi. Talked about Butrans dosing. Reviewed 4 patches a month, weekly dosing. Reviewed patch location and managed care. She said they have a lot of buckeye, not caresource. She also said they have a lot I'd medical mural. We talked coupons. She said she will pass the information over to the dr.
PPLPMDL0020000001	Independence	OH	44131	8/5/2014	Introduction, Doctor was working with a med student and proceeded to tell him about my products. He said he has no problem eventually prescribing OxyContin but is in no hurry. He has some experience with butrans and told the student it is a seven day patch. After he finished instructing the student I reviewed the abuse deterrent characteristics of OxyContin, doses available, q12 dosing and what the appropriate Percocet patient might be.
PPLPMDL0020000001	Cleveland	OH	44113	8/5/2014	Reviewed quickly butrans doses and application sites and pulled thru med d formulary win. Doctor will try to think of butrans more often.
PPLPMDL0020000001	Cleveland	OH	44113	8/5/2014	Quick Review of OxyContin abuse deterrent characteristics every 12hours along with Butrans for those patients requiring around the clock analgesia that are failing on present therapy, Said ok, will relay info to clinicians, asked to continue to request appt with Dr Gillespie
PPLPMDL0020000001	Lakewood	OH	44107	8/6/2014	Discussed Butrans/OxyContin with Barb-RN-Mgr. 7 day transdermal. Med D coverage along with OxyContin every 12hours with abuse deterrent characteristics. Said Ok will relay info, Something to keep in mind: appropriate patients with chronic pain need a change of dose or medication why dose in 4 to 6 hour increments atc when you have oxycodone dosed every 12 hour as an option or butrans weekly dosing. Spoke to ma regardig managed care.
PPLPMDL0020000001	Lakewood	OH	44107	8/6/2014	opened with the fda insight- talked about the updated lable information showed visual aid. Reviewed dosing and asked why dose in 4 to 6 hour increments when there is another option to dose every 12 hours with oxycodone or weekly with Butrans. Dr said price usually. Highlighted a few managed care plans. And asked dr to think about oxycodone for an uncontrolled appropriate pain patient requesting a change in there therapy. Dr said ok. Spoke to jamie the nurse about managed care.

		Akron	OH	44313	8/6/2014	Spoke with Tom Lamb the lead pharmacist about OxyContin and Butrans and discussed with him the OxyContin indication. Tom asked if I think it will change prescribing habits? I asked him if many drs write based on indications? Tom said no. I told him I agree but hope that I can get my customers who are writing IR opioids and keeping them on them who have daily around the clock pain to convert them to an ER opioid like OxyContin or Butrans because of what type of patient an ER opioid is written for. Tom agreed and said that makes sense. I discussed OxyContin patient types and key selling attributes. I also discussed an appropriate patient for Butrans with Scott profile. Tom said they have been seeing more dispensing of Butrans recently and haven't seen many insurance issues with it.
PPPLPMDL00200000001		Akron	OH	44320	8/6/2014	I asked dr how he decides to treat around the clock pain? Dr said a lot of his patients don't have a lot of money so he needs to do what's going to be affordable. I told him that OxyContin is not only a single entity opioid but can be very affordable. Dr said ok and that he thinks Butrans is a better choice for his patients. I told dr I understand and that is a good option for patients in around the clock pain who have the will to try a week long patch.
PPPLPMDL00200000001						Dr said ok and he will keep looking for patients. I reminded him about Caresource Pa, BWC and Medicare coverage.
PPPLPMDL00200000001		Valley View	OH	44125	8/6/2014	Discussed with Aaron RPH mgr, Butrans PA issues along with OxyContin RX's, and trends, invited to upcoming program
PPPLPMDL00200000001		Stow	OH	44224	8/6/2014	Dr saw me up front and came out and told me he's out of oxycontin copy cards and only one Butrans left. I told dr I will take care of it and I'm looking forward to getting some more time with him to update him on what's new with OxyContin and Butrans. Dr said ok and said he's continuing to have good success with OxyContin. Told dr that's great and asked for continued use.
PPPLPMDL00200000001		Lakewood	OH	44107	8/6/2014	Was at the window talking to the nurses about the dosing and managed care of butrans. I was highlighting the multiple patch information when the dr came to the window and asked if that was new. I confirmed that it was new, showed him and told him the information, highlighted caresource and commercial plans.
PPPLPMDL00200000001		Fairlawn	OH	44333	8/6/2014	Waved to dr as he was discharging a patient. Dr came to counter and asked me what's new. I told him about the OxyContin and Butrans indications. I asked him to focus on patients currently on Percocet who have daily around the clock pain and to convert them to OxyContin. Dr said ok and that makes sense. I told him that Butrans is also a possible solution for those patients on tramadol or Norco daily and around the clock pain. I asked dr his thoughts. Dr said he's being punched like all other family physicians to only treat with opioids for 90 days then must refer to pain management. I told him I understand but asked him why that would prevent him from writing OxyContin or Butrans within that time period? Dr said it's a tough call but thinks Butrans is a product he can find a place for. Nothing else learned.
PPPLPMDL00200000001		Lakewood	OH	44107	8/6/2014	Only got a wave and mentioned oxycotin and butrans dosing options today.
PPPLPMDL00200000001		Cleveland	OH	44115	8/6/2014	Talked with George Rph, Inquired about Butrans and OxyContin scripts, had 1 Butrans ordered but returned for no show. Takes 1 day to stock
PPPLPMDL00200000001		Lakewood	OH	44107	8/6/2014	Gave the extended release insight thru the window. dr said he was unsure if my percentage was accurate. I asked what andbe a more realistic percentage to him. he was uncertain. I told him the point was that primary care doctors are recognizing that extended release products have a place in their practice and early on as their first atc option. I want to know if he follows suit with that same belief. Dr said no. Dr said he feels he will try a few short acting products and extended release products last. I said fair enough. I asked him to think about the patient with atc chronic pain- that has already been on generic opioids and is asking for a new course of medication or adjustment. Reviewed oxycotin dosing and butrans dosing.
PPPLPMDL00200000001		Twinsburg	OH	44087	8/6/2014	Introduction. Talked about abuse deterrent properties, q12h dosing of OxyContin, she thought that is good relevant information. Reviewed butrans titration option with two patches. She appreciated information and requested savings cards.
PPPLPMDL00200000001		Cleveland	OH	44115	8/6/2014	Reviewed OxyContin abuse deterrent characteristics every 12hours along with Butrans for those patients requiring around the clock analgesia that are failing on present therapy, Initiation/Titration, Formulary status, Said ok will consider, keep reminding him and Martha
PPPLPMDL00200000001		Akron	OH	44308	8/6/2014	Spoke with the nurse manager Krisadié and told her I was following up on our last conversation about having an OxyContin inservice with the follows and refinements. I told her there is new information about abuse deterrent characteristics and indication that the staff needs to know. Krisadié said she will do her best to make it happen but she needs to see about the interest level first. I told her they may just hear the name OxyContin and think they know everything about it. I told her the reality is that a lot of the information is very new and it would be of interest to them. She said she will look further into it and get back to me. I told her I would like to follow up in a few weeks.
PPPLPMDL00200000001		Akron	OH	44313	8/6/2014	I told dr I have something important to tell him and he came over to the window. I told him about the OxyContin indication and told him I'd like him to focus on patients that have daily, around the clock pain and are currently on some type of IR opioid like Norco. Dr said ok. I had given Tina the Butrans formulary grid and dr saw it on the counter and said he can't get it covered. I asked where he's having trouble and Tina said with buckeye. I told him that is going to be difficult and asked him if he also has Caresource patients? Dr said he has just as many as buckeye. I told him the Caresource PA and asked him if he would focus there as well as Medicare and private insurance? Dr said ok. Nothing else learned.
PPPLPMDL00200000001		Westlake	OH	44145	8/6/2014	was at window leaving product information- dr came up to me and started small chatting and then asked me how pain doctors were using butrans. I invited him to a program and said come find out. I asked what was his reason for asking. Dr was wondering if the patch had problems like patients having rash. I have him the percentage of adverse reactions for our studies. Dr said he didn't have any patients complain but it's a concern. I said is this a concern with all patch technology and he said yes. We talked about the risk benefit of picking any product, including opioids. Dr said he likes butrans and uses it as his only extended release product of choice. I said why? He said he likes the dosage and he likes it's for 7 days. I covered managed care- told him to review some of the pain studies like the opioid naivs one. Dr said he would not read it. I told him I would come tell him about it next time. Dr said he is more interested in simple reminders like dosing or fda approvals. I said ok. Briefly talked about oxycotin dosing during the conversation.
PPPLPMDL00200000001		Cleveland	OH	44115	8/6/2014	Reviewed OxyContin abuse deterrent characteristics every 12hours along with Butrans for those patients requiring around the clock analgesia, Said Ok
PPPLPMDL00200000001		Munroe Falls	OH	44262	8/6/2014	I asked dr what's limiting her ability to convert more patients from Percocet to OxyContin? Dr said that she talks about it with a lot of her patients and said that some patients say its just too expensive and other just don't want to take OxyContin. I told her I understand and asked her if she will keep trying for patients with private insurance? Dr said she will. Reviewed Butrans key selling attributes, and Scott profile. I asked for more business.
PPPLPMDL00200000001		Cleveland	OH	44115	8/6/2014	Reviewed OxyContin every 12hours abuse deterrent characteristics along with Butrans for those patients requiring around the clock analgesia that are failing on present therapy
PPPLPMDL00200000001		Cleveland	OH	44195	8/7/2014	Quick review of OxyContin 7 tablet strengths, formulary coverage along with Butrans for those patients requiring around the clock analgesia, Said Ok will continue to prescribe for appropriate patients
PPPLPMDL00200000001		Cleveland	OH	44195	8/7/2014	Reviewed OxyContin 7 tablet strengths, formulary status, along with Butrans Initiation/Titration and formulary grids, Said she will continue to prescribe for appropriate patients
PPPLPMDL00200000001		Fairlawn	OH	44333	8/7/2014	Good discussion with dr and other physicians in attendance about OxyContin and Butrans. Led off conversation with oxycodone insight and then discussed OxyContin key selling attributes, dosing, Titration, q12 hour dosing, abuse deterrent characteristics tiers 1 and 3, single entity oxycodone delivery. I asked dr about his experience and he told me that he refers now more than ever. I asked him when he refers and he didn't give me a direct answer. I explained the appropriate patient type for OxyContin already taking oxycodone plain or Percocet and converting them to OxyContin. Same molecule 1:1 conversion. Dr said it makes sense and will consider writing and converting more. Full Butrans discussion for first time. Key attributes schedule 3,7 day transdermal patch, dosing, conversions, single entity opioid. Showed placebo patch and explained make up of patch. Discussed appropriate patient type Scott and gave hydrocodone insight. Dr asked about AE's. Discussed them from MVA Bup 3015 trial. Dr said he likes the low incidence of constipation. I asked dr if Butrans is a product he has a place for? Dr said he thinks he does and will try to use. Dr asked about insurance. Office does not take managed Medicaid but does take BWC and many private plans as well as Medicare. Discussed copay cards.
PPPLPMDL00200000001		akron	OH	44333	8/7/2014	Met dr for first time and had a great discussion about OxyContin and Butrans. Dr said she has no knowledge of Butrans and is very interested. Led off with oxycodone insight and gave key selling attributes for OxyContin. Schedule 2, q12 delivery of oxycodone HCL. 7 dosing strengths, start principles, conversions and abuse deterrent characteristics. I asked wher about her experience with it and she said she doesn't have much but isn't afraid to use it in the right patient. I discussed the appropriate patient for OxyContin and showed conversions from Percocet 1:1 conversion. I asked her if it makes sense to treat daily around the clock pain with 4-6 hour product? Dr said it does not. I asked for prescribing where appropriate. Butrans introduction with key selling attributes, schedule 3,7 day transdermal patch. Application sites and disposal. Discussed appropriate patient types, conversions, AE's, contraindications, managed care and copay cards. Dr said she thinks its a great product and will for sure find a place for it.
PPPLPMDL00200000001		Cleveland	OH	44130	8/7/2014	He had a former employee doing illegal activity with OxyContin so he refers out and tries to avoid writing it. If he has an elderly patient in pain he still may use it but tries not to. I agreed that oxyContin isn't for everyone but there are appropriate patients in his practice that could benefit from q12 dosing and ER delivery system. He is aware of the reformulation. Butrans he agrees is a good option for the Tramadol patient who is now in around the clock pain.
PPPLPMDL00200000001		Cleveland	OH	44103	8/7/2014	Reviewed OxyContin abuse deterrent characteristics, 7 tablet strengths along with Butrans for those patients failing on present therapy requiring around the clock analgesia, Said Ok, will continue to prescribe for appropriate patients, but no time for Butrans at this point



PPLPMDL0020000001	Mayfield Hts	OH	44124	8/7/2014	Dr Laham changed schedule (Beachwood CC pain clinic closed now) only day off is Thursday. Met with prior auth coordinator, Denise, I asked to see another HCP. Denise says only Dr. Dews & Leizman in, they won't see reps. Left OxyContin reformulation brochure, Butrans titration guides for all 6 hcp's in office. Updated Denise on improved Med D status. Asked if I could present info to HCP's at staff meeting, do they have one? She says 1x a month, but its for ancillary staff, like OM, med assts, secretaries and HCPs don't attend at this point.
PPLPMDL0020000001	Mayfield Village	OH	44143	8/7/2014	Spoke w Dr Azar as he was sitting down in his office. Asked for business outside of nursing home. He stated he uses Roxynol (ir morphine) in hospice/nursing home, as OxyContin & Butrans not covered. He also perceives them to be expensive. Discussed improved formulary/Med D status for both products. Told Dr I'd stop in next week to discuss further as chaotic day.
	Cuyahoga Falls	OH	44221	8/7/2014	Met dr in office as she was coming in and she told me she has been having lots of difficulty in getting Butrans approved. I asked her to give me one example. Dr told me about a patient of hers who has JRA which is juvenile Rheumatoid Arthritis. Dr said the patient has been on and failed two NSAIDs, at least one opioid and can't tolerate any of them and is in severe pain and she can't get Butrans approved and has been denied twice. Dr said the insurance company wanted fentanyl. Dr said who write fentanyl and the patient trailed it for 2 months and was still denied and was told to write methadone which she said she will never write. I told dr it sounds like a buckeye patient and told her it must be one of he only plan she gets denials from. Dr told me to speak with Darlene to get specifics. I told her to not get discouraged and to please continue writing and to please also remember OxyContin is also an option for those patients. Dr said she knows but she also dormant like writing schedule 2 medicines if she doesn't have to. I told dr that sometimes she has to and it is available. Darlene gave me the necessary pa and denial forms and said dr even did a peer to peer and it was still denied. I told Darlene to please call me when situations like this arise. Will forward information to Kendra.
PPLPMDL0020000001	Cleveland	OH	44103	8/7/2014	Reviewed OxyContin abuse deterrent characteristics along with Butrans for those patients requiring around the clock analgesia that she is sending to Pain mgmnt, Said ok, asked to schedule appt with main office,, nothing new learned,
PPLPMDL0020000001	Cleveland	OH	44195	8/7/2014	Reviewed OxyContin every 12hours, 7 tablet strengths along with Butrans for those patients requiring around the clock analgesia, Said she will continue to prescribe for appropriate patients
PPLPMDL0020000001	Mayfield Heights	OH	44124	8/7/2014	Quick hallway. Dr Anna stated she placed patient on OxyContin, yet nursing home made her change to morphine sulfate. Discussed that if morphine works, great, but if it fails for patient, document failure and try to get OxyContin approved. Discussed considering low dose OxyContin after NSAIDs, prior to going to Percocet. Dr says she will keep in mind. Discussed broad formulary coverage for OxyContin, yet there will be instances like this. More often, OxyContin access should not be a problem. Dr agreed, and stated only recently, has she had trouble with access.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	8/7/2014	Short discussion with dr after speaking with dr Azem. I told her to please continue identifying patients appropriate for Butrans like those being treated with IR opioids who have daily around the clock pain. Dr said she has written one or two recently and everything is good. Discussed OxyContin as another option for her patients in daily around the clock pain and to convert those Percocet patients. Nothing else learned.
PPLPMDL0020000001	Barberton	OH	44203	8/7/2014	the doctor came back to grab a cup of coffee. I asked her if she was willing to hear about oxycontin or butrans and how these dosing options every 12 hours or weekly may or may not fit into her style of treating pain medications. She said she didn't have time to get into a discussion and was heading to the hospital.
PPLPMDL0020000001	Akron	OH	44333	8/7/2014	Dr came to lunch in the middle of lunch. I discussed with him the key attributes with OxyContin, conversions,q12 single entity opioid, and appropriate candidates. Discussed Butrans key selling attributes, conversions, dosing, Scott profile. Dr said Butrans sounds like a great product and will look for opportunities.
	Highland Heights	OH	44143	8/7/2014	Lunch. Dr Salama asked about incidence of urinary issues with Butrans, as he had male patient recently on Butrans, who could not urinate. Butrans was discontinued & patient was placed back on Vicodin. Reported as AE. Looked up incidence in Butrans FPI (6.1 clinical studies) and discussed with medical ast who will discuss w dr Salama further. Total office call, met with newest med ast Carrie. Asked her what type of pain complaints she sees that are common: she replied, back, neck, feet, etc. she also stated most of their patients on Percocet, & many complain it doesn't work. I responded OxyContin would be appropriate as it's same molecule, yet different delivery: every 12hour release & indicated for long term pain. Discussed importance of handing out Butrans patient guides.
PPLPMDL0020000001	Cleveland	OH	44130	8/7/2014	Talked to Beth and pharmacist. They are a small pharmacy and don't stock Butrans because no one is really prescribing it. They can get it in one day so that usually isn't a problem. Most of the OxyContin seems to come from The pain clinic across the street. Reviewed the indication of both products and discussed appropriate dosing. She would like savings cards.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/7/2014	Look to speak with Glenn about Butrans insurance issues in which was told he didn't have time. I spoke with dr Narouze about OxyContin and asked him if he is getting patients referred to him on Percocet? Dr said he is. I asked him how he feels about converting those patients who are in daily around the clock pain to OxyContin? Dr said the first thing he does is to assess if they need the short acting or a surgical candidate. Dr said if they are not a surgical candidate then he would look more towards a long acting opioid. I told dr I'm hoping that's either OxyContin or Butrans. Dr said he uses both. Nothing else learned.
PPLPMDL0020000001	Westlake	OH	44145	8/8/2014	Discussed the appropriate patient type- focused on the patient taking 2 or more doses a day and are currently not satisfied with their current treatment. Reviewed indication and the options of either OxyContin or Butrans. Reviewed a few attributes of each product. focused on the 10mg of OxyContin for the opioid naive patient or for a patient you want the lowest opioid dose for. highlighted butrans dosing and the no first pass and no dose adjustment for the elderly or renal patients. covered a few managed care plans big to the office, mentioned med d.
PPLPMDL0020000001	Westlake	OH	44145	8/8/2014	Gave dr butrans invite and talked about the attributes of both oxycontin, talked about the patient taking more than 2 doses and the ATC profile of a pateint with pain. discussed managed care.
PPLPMDL0020000001	Stow	OH	44224	8/8/2014	Quick hello at window and told him to focus on the wording of the Butrans indication to help him select appropriate patients in daily around the clock pain. Dr said ok. Gave him the Scott profile. Reminded him OxyContin is also a solution for an ER opioid in those already on IR oxycodone who need a dose adjustment.
PPLPMDL0020000001	Cleveland	OH	44113	8/8/2014	Reviewed Butrans patient info booklets,per request, Asked for that 1 appropriate patient this afternoon, said she will consider,
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	8/8/2014	Spoke with Melissa about OxyContin key selling attributes, conversions and appropriate patient types. Discussed Butrans key selling attributes, conversions, dosing, and titration. Melissa said they have a few patients on it and said the indication makes sense to her and likes the way it's worded.
PPLPMDL0020000001	Akron	OH	44333	8/8/2014	Discussed OxyContin indication,dosing, conversions, titration up and down,start principles and appropriate patients. Becky said that she thinks its a great product and is going to try and convert a few of her patients from Percocet. Discussed Butrans indication, schedule3,7 day transdermal patch, conversions, and Scott profile.
PPLPMDL0020000001	Westlake	OH	44145	8/8/2014	Spoke to Laura the nurse about the dosing and scheduling of our products. highlighted Butrans and invited the doctor to the program. laura said the doctor is best on tuesday for programs. We discussed a few attributes of the product including med d coverage for the older patients needing pain therapy.
PPLPMDL0020000001	Rocky River	OH	44116	8/8/2014	re introduced myself to the nurse who seemed to be in a big hurry to shut down for lunch. I got my products and dosing out, handed a program invite to her to pass to the doctor she said he won't go.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/8/2014	Discussed OxyContin and Butrans with him during breakfast and told him about specific patient type selection. Reviewed OxyContin conversions and looking for patients not to their analgesic goal on Percocet. Dr said he probably won't write OxyContin and will leave that up to the specialists. Discussed Butrans key attributes, dosing, conversions and the criteria he needs to look for especially from the indication and to focus on the words in the indication to steer him towards the right patient.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	8/8/2014	Dr said she didn't have much time because she's behind. I told her I want her to focus on the OxyContin and Butrans indications to identify patients who are in pain on a daily around the clock basis. Dr said the indication sounds good. I asked what may be the reason why she would maintain a patient on a IR opioid when they have pain around the clock? Dr said she tries not to but patients either can't afford anything else or don't want them. I told her to focus on tramadol or Norco for Butrans and OxyContin for her Percocet patients.
PPLPMDL0020000001	Westlake	OH	44145	8/8/2014	Spoke to the office manager and she said it was a bad time, I highlighted the products and dosing, gave the butrans invite to the doctor.
PPLPMDL0020000001	Westlake	OH	44145	8/8/2014	invited to the butrans dinner program. asked the doctor how many residents rotate thru his office a year, and was asking the type of information he proficed to them regarding butrans and oxycontin. Asked the doctor if he considers butrans to be appropriate as somones first atc medication choice like after ultram. Dr said yes. I asked if he does this...he said sometimes and mentioned managed care. I highlighted caresource and med plans to his office. I asked when was the last time a butrans didn't get thru on caresource? He couldn't remember. Asked him if he does on testing it out....asked him to find a patient who needs a change in thereapy and if you notice they are on caresource and appropriat for butrans to try it again and see what happens. he said ok
PPLPMDL0020000001	Westlake	OH	44145	8/8/2014	Spoke to pam about butrans and program coming up in september. highlighted butrns dosing and scheduling. also talked managed care. reviewed oxycontin profile with elderly per the fpi
PPLPMDL0020000001	Westlake	OH	44145	8/8/2014	Doctor was not available to see me, spoke to the nurse about the butrans program and about dosing wth each product. She said she would pass the information over to the doctor.
PPLPMDL0020000001	Westlake	OH	44145	8/8/2014	Dr came to window and told me a joke. I handed him my card, and a butrans invite. We talked about the upcoming dinner program while I highlighted attributes of butrans. Also reminded him of the elderly profile for oxycontin. Asked him to think about oxycontin for the next appropriate patiet that may require a change of therapy to a single entity.
PPLPMDL0020000001	Fairlawn	OH	44333	8/8/2014	Dr told me that she has had some issues getting OxyContin approved recently. Dr said that she had to have a pa filled out for an OxyContin 15mg which was approved. Dr said she needed to titrate down to 10mg and required another pa for the titration down! Dr said it was approved but couldn't understand why she had to do a pa for a titration? I told her I don't know and asked about the plan which she didn't know of course. I explained if the pa is being approved its a good things. Dr said if she needs to continue with pa's she will just take the patient back to Percocet. I asked dr if she completes the pa? Dr said no buts its just a pain and takes time. I asked her to please continue finding patients appropriate who need a dose adjustment on their IR oxycodone. Butrans key selling attributes, schedule 3,7 day patch. Reviewed dr patients types. I asked dr if she has used it yet and she said no. I told her she must trial it clinically in the right patient. Reviewed Scott profile and managed care plans for paths of least resistance.
PPLPMDL0020000001	Cleveland	OH	44113	8/8/2014	Visited Ortho/Pain depts,(Shen,Novak,Bhimani,Bohl,Berkowitz, Bilfield) OxyContin/Butrans Initiation/Titration guides, program invites along with formulary grids
PPLPMDL0020000001	Tallmadge	OH	44278	8/8/2014	Short call in hallway. Told dr that OxyContin is a single entity oxycodone at a 12 hour delivery system. I told him that he needs to continue to look for candidates that are taking IR oxycodone daily and around the clock. Dr said ok. Reminded him to trial Butrans clinically in a patient who is taking tramadol around the clock.
PPLPMDL0020000001	Cleveland	OH	44113	8/8/2014	Quick review of OxyContin abuse deterrent characteristics every 12hours along with Butrans for those patients failing on present therapy requiring around the clock analgesia! said OK will consider, sends most chronic patients to pain Mgmnt but will keep it in mind, discuss more during lunch appt
PPLPMDL0020000001	Cleveland	OH	44113	8/8/2014	Quick review of OxyContin abuse deterrent characteristics every 12hours along with Butrans for those patients requiring around the clock,Said Ok Essa will help reminding Dr.
PPLPMDL0020000001	North Olmsted	OH	44070	8/8/2014	pharmacist said they were busy- i said understood, pointed out the dosing and fda updated label information of oxycontin, and highlighted the mcg of butrans and patch location of Butrans.
PPLPMDL0020000001	Berea	OH	44017	8/8/2014	Talked about a few major plans including the med d plans they have at the office and we are covered on. I asked if he has special considerations for older who need chronic pain medications, I asked hi. To consider the single entity of OxyContin and Butrans and the dosing every 12 hours or weekly with Butrans. He said ok thank u.
PPLPMDL0020000001	Cleveland	OH	44113	8/8/2014	Reviewed OxyContin 7 tablet strengths, abuse deterrent characteristics along with Butrans for those patients requiring around the clock analgesia, Said Ok, invited to upcoming program
PPLPMDL0020000001	Fairlawn	OH	44333	8/8/2014	Discussed insight with oxycodone and showed him the OxyContin 10mg page in the MVA. Discussed OxyContin attributes and asked him how he is feeling about identifying patients on Percocet 20mg and converting them to OxyContin 10mg q12h? Dr said he has no issues with it and writes plenty of 10mg. Reviewed the start principles, abuse deterrent characteristics and asked for more business. Discussed Butrans indication, Scott profile and managed care. I asked dr if he has had any recent starts with Butrans? Dr said he has had a couple recently. I asked him what these patients had been on prior to Butrans? Dr did not answer me and said he likes to use it when patients need more than tramadol or Norco. I reviewed the Scott profile gain and told him I would like to get specific information next time about his success with Butrans.
PPLPMDL0020000001	Cleveland	OH	44113	8/8/2014	Reviewed Butrans for those patients failing on present therapy and requiring around the clock analgesia along with OxyContin abuse deterrent characteristics, said Ok will continue to prescribe for appropriate patients.
PPLPMDL0020000001	East Cleveland	OH	44112	8/8/2014	Reviewed with Latoya Rph OxyContin abuse deterrent characteristics along with Butrans for those patients failing on present therapy, that require around the clock analgesia, Said OK, not alot of narcotics dispensed but will help when applicable

PPLPMDL0020000001	Brooklyn	OH	44144	8/11/2014	Window call, Reviewed OxyContin every 12hours,abuse deterrent characteristics along with Butrans for those patients requiring around the clock analgesia, Said Ok will continue to prescribe for appropriate patients and schedule appt with Audrey. Nothing new learned
	Parma	OH	44129	8/11/2014	Doctor says that she avoids OxyContin but will prescribe it when she sees the appropriate patient. She could think of two patients that are on it right now. She would not feel comfortable starting OxyContin, but it comfortable starting with Percocet. She thinks that an appropriate time to consider OxyContin is when a patient is taking 4 Percocet a day.....she may consider that person appropriate for q12h OxyContin. Anyone she suspects may be an abuser she refers to pain management. She has no experience with butrans but was interested in hearing about it because she doesn't know who that patient might be. I described a Tramadol patient and utilized "Pam", and reviewed indication, and pulled thru med d formulary. Doctor said that between now and next time I see her she will try to find one butrans appropriate patient.
PPLPMDL0020000001	Cleveland	OH	44102	8/11/2014	Reviewed with Ryan OxyContin abuse deterrent characteristics every 12 hours along with Butrans 7 day transdermal for those patients failing on present therapy, Said Ok, 90% RX filled our Medicaid,
PPLPMDL0020000001	Parma	OH	44129	8/11/2014	Talked with office and MA since Doctor was on vacation. They try not to write any narcotics (their words) in the office. The doctors might want to hear about butrans, but typically refer to pain management. They have patients that would benefit from a different dosing schedule and believe the patients might be taking more medicine than they need when not on ER medicine for around the clock pain.
PPLPMDL0020000001	Cleveland	OH	44195	8/11/2014	Reviewed OxyContin abuse deterrent characteristics every 12hours along with Butrans for those patients failing on present therapy requiring around the clock analgesia, Said Ok, Book appt at Office location
PPLPMDL0020000001	Brooklyn	OH	44144	8/11/2014	Reviewed with Rhonda Tech OxyContin 7 tablet strengths every 12hours along with Butrans for those patients requiring around the clock analgesia, Said ok has 1 patient on Butrans,
PPLPMDL0020000001	Parma	OH	44129	8/11/2014	Doctor said that he prescribed more OxyContin when working with long term care. He will prescribe for appropriate patient and appreciates the abuse deterrent properties with the reformulation. He is aware of butrans but doesn't know much about it. He was in a hurry, waiting room full, I quickly reviewed dosing, indication and patch locations, Med D formulary changes, left titration guide and told him I would come back soon once he has reviewed it, he may have questions/ thoughts to share with me. He said ok.
	Parma	OH	44129	8/11/2014	Talking to MA and Debbie thru the window about Butrans and OxyContin. She says that they don't write narcotics, they refer to pain management. She is not sure if they want to schedule a lunch with me because the previous rep "worked very hard to get him to write it and he never really did." She said the doctor felt bad about it too. I shared with her that we are not interested in converting the whole practice to opioids, but want to help him find those few appropriate patients that could really benefit from the extended release delivery system. Shared with her the improved formulary status for both medications and there is probably new information I could share with them that could benefit a few patients. She told me that she will talk to the doctor and next time I go by there to stop in and see if I can schedule an in service.
PPLPMDL0020000001	Cleveland	OH	44102	8/11/2014	Reviewed OxyContin abuse deterrent characteristics every 12hours along with Butrans for those patients failing on present therapy, Said he knows will consider for appropriate patients, Book lunch thru Bonnie
PPLPMDL0020000001	Cleveland	OH	44144	8/11/2014	Reviewed OxyContin abuse deterrent characteristics every 12hours, along with Butrans for those patients requiring around the clock analgesia that are failing on present therapy, Med D formulary opportunities, Said Ok will consider for appropriate patients, Seeing more Pain patients since (Dr. Hilton's retirement) Asked for 1 appropriate patient this afternoon, Said she will try
	akron	OH	44333	8/11/2014	I told dr that in the past he had some success with Butrans but he hasn't written any in the last few months. I asked dr if anything has changed? Dr said he has told me in a few occasions that he really isn't treating ongoing pain and is really doing acute pain. I asked him what he's doing for patients that see him on 3 or 4 tramadol or Norco a day? Dr said he's trying to refer to pain management more but he understands that there are patients he treats for ongoing pain and that his 70-80 yr olds. Dr said anyone younger than that he tries not to continue to refill or write products for pain. Discussed when to use a product like Butrans for patients before they even get to Norco. Dr agreed and said he will try to find a place. Discussed OxyContin as an option as well for patients when they are already on oxycodone IR.
PPLPMDL0020000001				8/11/2014	Quick introduction. He will talk to me at lunch because patients are waiting for him. He hasn't seen a rep in a while and would like to hear more About butrans. There are patients that are in around the clock pain that can benefit from OxyContin but he doesn't write it too often.
PPLPMDL0020000001	Parma	OH	44129	8/11/2014	Quick intro as new rep in territory after vacant for close to a year. They don't really see butrans being written, but they do keep OxyContin stocked. Didn't have time for anything else.
PPLPMDL0020000001	Parma	OH	44134	8/11/2014	Spoke with Jamie the pharmacist about her patients she is seeing for Butrans an OxyContin. Jamie said she is seeing most 15 and 20mcg doses. She attempted to see specifically who is writing and the system wasn't loading.
PPLPMDL0020000001	Stow	OH	44224	8/11/2014	I discussed the revised indications for the products and multiple patch use for Butrans. Reviewed the Butrans Scott profile and discussed initiation and titration. Discussed OxyContin use and conversions from Percocet.
PPLPMDL0020000001	Cleveland	OH	44195	8/11/2014	Reviewed OxyContin and Butrans initiation/Titration guides, P's, Patti said due to patient volume she cant schedule in-service appt. Will contact me if further info needed.
PPLPMDL0020000001	Akron	OH	44333	8/11/2014	Told dr to think about what it means for patients to be in daily, around the clock pain and to use Butrans or OxyContin for them. Discussed the increased number of patient referrals he is getting and to use Butrans for those patients taking tramadol or Norco around the clock and OxyContin for those patients already on the oxycodone molecule. Dr said he will keep looking for patients and said he will continue to initiate with 10mcg and titrate accordingly. Reminded him of BWC, Caresource and Medicare D plans.
PPLPMDL0020000001	Stow	OH	44224	8/11/2014	Spoke with Corey the pharmacist and a new pharmacist Lori. Discussed OxyContin indication and dosing along with conversions. Asked Lori if she's familiar with Butrans. Discussed key selling attributes,dosing, conversions and appropriate print types. The technician said they see both OxyContin and Butrans and fill Butrans more regularly now than ever before and have all doses in stock. Discussed copy card and trial offer with Corey.
	Akron	OH	44333	8/11/2014	I told Elise to think of OxyContin as that single entity oxycodone delivered over 12 hours. I showed her the conversions and asked dr if she will continue to take patients on IR oxycodone and convert them? Elise said she will. Elise said she continues to have some issues getting it approved. I asked where and she said she couldn't remember but most do go through. I told her that's good to know and keep writing. I told her to also identify candidates for Butrans that meet the 3-4 prn medicines a day and are still in pain. Elise said she will.
PPLPMDL0020000001	Stow	OH	44224	8/11/2014	Short conversation about Butrans indication and treating patients in daily around the clock pain in 4-6 hour increments. Sandra said that she thinks e indication is good and she tries to continue to convert patients but cost is important. I told her to focus on patients that have commercial insurance as well as Caresource and Medicare D.
PPLPMDL0020000001	Stow	OH	44224	8/11/2014	Discussed Butrans indication and told him to focus on patients who have pain severe enough to require daily around the clock opioid analgesic. I told dr that he is missing opportunities for Butrans in those patients who are taking 3 or more IR opioids and are in pain around the clock. Dr said he will write ER Morphine second line after IR opioid failure because of cost and its cheaper. I asked him if all his patients have a cost issue? Dr said not all. I told him to focus on patients where cost is not an issue lie,those with commercial, Caresource or Medicare D insurance. Dr said ok. I discussed using Butrans after failure of an IR opioid like tramadol or Norco. Asked dr about using OxyContin for patients failing on Percocet or oxycodone plain. Dr said he thinks its a great product and knows it works but the office policy is to not use it due to past history. Discussed abuse deterrent characteristics and tiers 1 and 3 for the product. Dr leaving for comprehensive pain management in September.
PPLPMDL0020000001	Parma	OH	44134	8/12/2014	Doctor said that he likes butrans for many patient types including opioid naive patients, ones taking too many pills where he wants to change the delivery system. He has many patients that feel so much better because of butrans. He did tell me that he does it beyond our recommendations with good success but gets push back from pharmacies. I clarified with him our maximum dosing recommendations but he respectfully pointed out that he is comfortable with butrans and how patients tolerate the medicine. He is pleased with the side effect profile and prefers to start patients on butrans even for what may be considered OxyContin appropriate patients. He feels that OxyContin in much more difficult to prescribe because of all of the generics. Pulled thru formulary for both products, including med d for butrans. He is in need of savings cards.
PPLPMDL0020000001	Tallmadge	OH	44278	8/12/2014	Spoke with Dennis the pharmacy technician about Butrans and OxyContin. Reviewed Butrans schedule 3,7 day transdermal system. Reviewed indication,conversions and titration. Discussed appropriate patient types and initiation for tramadol and hydrocodone. Discussed OxyContin conversions, q12 oxycodone and schedule 2.
PPLPMDL0020000001	University Hts	OH	44118	8/12/2014	Reviewed OxyContin every 12hours abuse deterrent characatrstics along with Butrans for those patients requiring around the clock analgesia failing on present therapy, Said Ok will consider for appropriate patients, Formulary grids
PPLPMDL0020000001	Akron	OH	44307	8/12/2014	Spoke with Jeff the pharmacist and asked him if his prescriptions are mostly from employees? Jeff said ER are but also fill them from Petrus patients, wound care and some other areas. I asked if he is filling OxyContin? Jeff said he does for sure and sees mostly 20 and 40mg doses. I told him about the OxyContin indication and asked him if he also has dispensed Butrans? Jeff said he has and has about 3 patients on it. Nothing else learned.
PPLPMDL0020000001	South Euclid	OH	44121	8/12/2014	Dr has recently joined practice. (formerly in Kentucky) Met with med asst at front window. Introduced myself/Purdue/my ER opioid products, verbatim indications. Left packet of information for Dr. Bak including OxyContin reformulation guide, conversion guide; Butrans initiation guide, patient guide. Protect your practice brochure.
PPLPMDL0020000001	Cleveland	OH	44105	8/12/2014	Reviewed w/Hakim OxyContin and Butrans, seeing some RX's Nickels/Torres, Next day stocking if product is ordered
PPLPMDL0020000001	South Euclid	OH	44121	8/12/2014	Met with med asst at front window. Discussed both my products, verbatim Discussed scheduling, doses, and information I'm leaving Dr. DeJoseph including OxyContin conversion guide, savings sell sheet, Butrans initiation guide, patient guide.
PPLPMDL0020000001	Mayfield Heights	OH	44124	8/12/2014	Quick hallway. Left Pam profile. Both my ER products have opioid naive dose for patient like Pam. Asked for a patient like Pam this week, covered on Med D. Delivered med d pull through. Let Gina know all other Med D plans will need a prior auth. Left Butrans initiation guide, patient tear sheet/fpi, OxyContin savings sell sheet, conversion guide.
PPLPMDL0020000001	South Euclid	OH	44121	8/12/2014	Dr Lantz-DeGeorge was previously at UH/Case downtown. She practices here full time, a few days off in summer, and back to 5 days staring 8/25. Met with med asst at front window. Introduced myself, my ER products, verbatim indication, scheduling. Left for Dr. Lantz-DeGeorge, OxyContin reformulation folder, conversion guide/fpi. Left Butrans fpi, initiation guide, patient guide, fpi. Left OARRS flashcard, Med 80 guidelines. note: specialty, Internal Medicine.
PPLPMDL0020000001	South Euclid	OH	44121	8/12/2014	Left packet of info on Suite 160 floor, with another med asst, as Dr. Reznick Med Asst hasn't been assigned yet. (maybe Jeannette who joined organization and left Azar/Park) Dr Reznick will start practicing SEPT 1 FULL TIME.
PPLPMDL0020000001	Shaker Heights	OH	44122	8/12/2014	Left OxyContin reformulation folder, conversion guide, Butrans initiation guide, patient guide, fpi, OARRS flashcard, med 80 guidelines, protect your practice.
				8/12/2014	Talked with Emily the pharmacist. They stock all doses of OxyContin, only the 20 of butrans for one patient. They do not use the electronic 222 forms but hope to by the end of the year. They still do it by hand. When they see that a patient is taking more and more of the IR, they call the doctors office advising use of ER, just as we do, but that doesn't seem to matter to the physicians. Pain management seems to handle that much better than primary care according to Emily.
PPLPMDL0020000001	Cleveland Hts	OH	44118	8/12/2014	Inquired to Opey Rph mgr on OxyContin and Butrans, not seeing RX's, said typically can get next day if ordered, No new info learned
PPLPMDL0020000001	Cleveland	OH	44121	8/12/2014	Met w Daria med asst at front window( she left Azar/Park) practice & is w Dr Wolovitz full time now. She is aware of my products, and I discussed items I'm leaving for Dr Wolovitz. First time call to his new location.
PPLPMDL0020000001	Akron	OH	44310	8/12/2014	Ld off discussion with baby boomer insight and asked him if his practice is going in that direction? Dr said he has the proportion of patients that are there and are getting there. I told hi. The reason I'm telling him that is because of the excellent Medicare D coverage Butrans has and then reviewed the plans. I asked him to use Butrans for that patient population. I also told him to focus on those Norco patients who have daily around the clock pain and convert them appropriately. I asked if he's initiating mostly on the 5 or 10mg patch and he said 10mg patch because most patients come in on 40mg morphine equivalent. I asked him to titrate as necessary and use Butrans more frequently due to 62% of patients in Bup 3015 were on hydrocodone prior to entering the trial. I asked hi if he still has patients on OxyContin? Dr said he has his patients that he refills for patients and has had a patient from summit pain who was on it and he continued.
PPLPMDL0020000001	Mayfield Heights	OH	44124	8/12/2014	Discussed with Adrienne, her ability to order new products Does corporate allow? They leave up to her she says, & she will commit to pre order if she feels patients will benefit. Let her know I will have further details in the coming months & further info on any new product(s) after I'm trained. I also let her know target date is October for launch of 7.5 new strength Butrans. Will keep her informed. Discussed OxyContin, lowest effective dose conversations I have w my customers. Left OxyContin savings sell sheet, \$30 out if pocket for any of our 7 strengths. Discussed Butrans patient guide & updates on titration& maintenance page 7, figure B, Butrans max dose of 20 mcg hr discussed. Discussed possible increase in QTc interval: when two 20 patches totaling 40 mcg/hr studied. Avoid Butrans in patients with history of long QT syndrome or immediate family history. (Section 5.7 FPI) left FPIs both products, protect your pharmacy brochure.
PPLPMDL0020000001					

	South Euclid	OH	44121	8/12/2014	Quick hallway. Used Pam profile: Dr Flagg, I want you to consider either of my ER products, OxyContin or Butrans, for an opioid naive patient like Pam. Pam is covered on Medicare D. Both of my products have improved Medicare D access, which means the best available co pay for your patients. Sound good? Yes, replied Dr. Flagg. Met with his med asst Jen at nurses station. Discussed patient profile, produ& walked back to patient room. Met with med asst Jen. We discussed product attributes for both products, and specifically, no first pass metabolism with Butrans and benefit of 1x week patch. For OxyContin, 7 strengths, can titrate in 1-2 days, steady state. Lowest effective dose, both products discussed. Medicare D pull through. Left Dr. Flagg OxyContin savings sell sheet, conversion guide, Pam profile, Butrans initiation guide, patient tear sheet. Asked her if Dr Flagg has referred to any other pain specialists other than Dr. Macintyre. She says no, they refer to him exclusively. Let Jen know I cannot follow up with Dr. Macintyre as he's not in my territory.
PPLPMDL0020000001	Lyndhurst	OH	44124	8/12/2014	Focused on Pam profile, elderly population, lowest effective dose, Butrans product attributes including no dose adjustment for renal, mild, moderate hepatic impaired. No first pass metabolism. Med D pull through. OxyContin, another ER option, CII, 10 mg is opioid naive dose. Can titrate in 1-2 days, steady state 24-36 hrs. Asked for just 1 patient this week for a trial. Ok replied Dr Isakov.
PPLPMDL0020000001	Mayfield Hts	OH	44124	8/12/2014	Lunch. Dr Laham stated that Purdue contacted him via email regarding training for new product. I replied I'm not sure what product that is, I know we have a few in pipeline, I haven't been trained on anything yet. I will keep him informed if/when I'm trained. Summarized our last conversation where he states he "reserves" Butrans for specific patients. I asked him not to "reserve" Butrans for just certain patients, and to broaden that scope to all patients who meet indication, need an ER opioid. I then focused on Pam profile, patients 65+ covered on Med D. Med D pull through discussed. What about Anthem Senior Advantage, asked Dr Laham? You will need to complete a prior auth for that plan. Discussed OxyContin as a CII, oral option, similar AE profile for young (18+) and older patients in clinical trials. Can titrate in 1-2 days. Left Butrans initiation guide, OxyContin conversion guide. Asked if Frank Sajen is today. Dr says he's off as he's getting married this week/weekend.
PPLPMDL0020000001	Cleveland	OH	44109	8/12/2014	Visited Ortho,Onc.,IM, FPJ OxyContin/Butrans Initiation/Titration guides, Appt requests
PPLPMDL0020000001	Mayfield Heights	OH	44124	8/12/2014	Left at front window, with med asst, information on my 2 ER opioid products for long term pain, not indicated for acute pain. Left for Josie, OxyContin conversion guide, savings sell sheet. Left Butrans patient guide, titration
PPLPMDL0020000001	Akron	OH	44305	8/12/2014	Spoke with Matt the pharmacist and discussed Butrans indication, conversions, use of multiple patches and my discussions with doctors treating daily around the clock pain in 4-6 hour increments. Matt agreed its wrong and sees it all the time. Matt said sometimes he will call the offices to confirm the prescription. Discussed managed care and then OxyContin conversions and dosing.
PPLPMDL0020000001	Cleveland Hts	OH	44118	8/12/2014	Quick Butrans review for those patients requiring around the clock analgesia that are failing on present therapy, Said Ok, asked for those patients she is sending to Pain mgmnt, Said she will consider
PPLPMDL0020000001	Maple Heights	OH	44137	8/12/2014	Briefly talked with Kim the pharmacist. They only stock OxyContin 10, they do not use the electronic222 system as a company, all scripts for CII's are hand written. She believes that patients who are starting to take too much of IR meds, should be switched to ER but doctors are probably not doing that because of the cost. They try to mention savings options to patients when filling a script. They rarely get a request for butrans but can get it in a couple of days.
PPLPMDL0020000001	Cleveland Hts	OH	44118	8/12/2014	Reviewed OxyContin abuse deterrent characteristics every 12hours along with Butrans for those patients failing on present therapy that are requiring around the clock analgesia, Said Ok, Med D coverage reviewed
PPLPMDL0020000001	Lyndhurst	OH	44124	8/12/2014	Hallway. Pam profile: asked Dr Kim to focus on 65+ patient/covered on Med D - like Pam this week, lowest effective dose OxyContin. 10mg is opioid naive dose. Another option for patients like Pam is Butrans. Based on safety, efficacy we've discussed previously, for both products, and access for elderly (Med D pull through) I'm asking for 1 or 2 patients this week. Quick BWC reminder Butrans. Ok, very good, replied Dr. Kim.
PPLPMDL0020000001	Akron	OH	44307	8/12/2014	I asked dr if he has patients that are in pain around the clock? Dr said yes some of them. I showed him the OxyContin conversion guide and told him to convert patients to q12 OxyContin when they need a dose adjustment or complain of being in pain every day. Dr said that's good to see and tries to do it but said he would be doing it more. I told him to ensure to write OxyContin as q12 and instruct the patients to take it at 8am and 8 pm. Dr said that's a great idea and will.
PPLPMDL0020000001	Cleveland	OH	44109	8/12/2014	Quick review of OxyContin abuse deterrent characteristics every 12 hours along with. Butrans 7 day transdermal for those patients requiring around the clock analgesia, Said Ok, Email appt request,
PPLPMDL0020000001	Lyndhurst	OH	44124	8/12/2014	Met with med asst Amy first. She really appreciated laminated pain scales, asked me to leave some @ urgent care as well. Discussed with Amy, my goals for their practice. For Dr Prada to be open minded, to ER opioids, for 1 or 2 trusted patients, that's all I'm asking for. Left Pam profile, fpi, Oxycontin savings sell sheet, conversion guide, Butrans initiation guide, protect your practice & a few protect your meds at home brochures. I then asked Dr. Prada, to be open minded to ER opioids for trusted patients who meet the indication. Asked her to review materials I'm leaving her and to keep an open mind. Ok Dr Prada replied.
PPLPMDL0020000001	Akron	OH	44305	8/12/2014	I told dr that I have been speaking with him about Butrans and how a patient on tramadol who needs dose adjustment is appropriate for Butrans. I asked him if he is sold on that concept? Dr said he is and knows that alternatives are good. I asked him if he has had success with it clinically? Dr said yes. I showed him the Scott profile and told him that when a patient on tramadol continues to be in pain to use Butrans as that ER opioid option. I asked dr what other limitation would limit his ability to us Butrans? Dr said nothing other than cost. I showed dr the commercial and Medicare D formulary grids and reviewed the plans she has. I closed him by saying that Caresource, commercial and Medicare there should be no issues with coverage and no reason for him to write. Dr said ok.
PPLPMDL0020000001	Mayfield Heights	OH	44124	8/12/2014	Met with tech & float pharmacist. Discussed OxyContin patient access, savings for Cash/Commercial pay patients-\$30 out of pocket monthly. Left OxyContin savings sell sheet. Discussed Butrans, CII, 1x week patch. Discussed/ left 1 patient guide. Tech says no pain specialty customers. She assumes that they all use Hillcrest hospital pharmacy. In addition, still no Butrans dispensed or on shelf. Left protect your pharmacy brochure. She will give all info left to pharmacy mgr.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/12/2014	Spoke to dr about using OxyContin for his patients and he asked about copy cards. Dr asked if cash patients can use them and I told him they can and they could save up to \$70 a month. Dr said he may have to think about that for a few patients. I asked dr what percentage of his practice is Medicare? Dr said about 80%. I told dr that sounds high. Spoke with Liz and she said it is not even close to 80% and is less than 50%. Nothing else
PPLPMDL0020000001	Lakewood	OH	44107	8/13/2014	Saw dr. invited to the Butrans program but he said no. We talked about the naive study and pain results and dosing. Dr said managed care has gotten better but he just doesn't like writing new products. I reminded him that the product has been out 4 years. And recapped a few of the major plans covered. Asked if it was a reasonable request...after someone has already tried a generic option to then try a branded option like Butrans or OxyContin. Dr said maybe.
PPLPMDL0020000001	Lakewood	OH	44107	8/13/2014	Talked about the scheduling of Butrans. Invited to program, talked about caresource managed care and the dosing of Butrans. Asked him to think about the uncontrolled hydrocodone patient needing a change to think Butrans where appropriate. Dr said ok. I asked if there was a hesitation that I was missing? He said no, just finding the right patient type. I asked if the patient described made sense and if that was so ethng he would feel comfortable switching to Butrans or is there another patient he was thinking of? Dr said no.
PPLPMDL0020000001	Westlake	OH	44145	8/13/2014	Highlighted managed care, gave invite to Christy for the dr to attend the Butrans program.
PPLPMDL0020000001	Lakewood	OH	44107	8/13/2014	Discussed the ten mg and dosing for the patient that becomes a chronic atc pain patient. Talked about workers comp coverage. Also talked Butrans caresource and 4 patches. Dr asked how quickly they build tolerance to Butrans. I told him it was subjective and I couldn't answer that. Instead, I talked about titration and the doses available with Butrans and their coverage. Also talked about what they could use per the naive study if the patient had break thru. Dr said he won't be going to dinner program for Butrans.
PPLPMDL0020000001	Cleveland	OH	44125	8/13/2014	Reviewed OxyContin with Sarah RPhabuse deterrent characteristics every 12hours along with Butrans 7 day transdermal, Med D formulary opportunities, Butrans patient info booklets, Said ok sees Butrans from
PPLPMDL0020000001	Cleveland	OH	44125	8/13/2014	Moufawad,Sadowski, Nickels3500 RX's week
PPLPMDL0020000001	Cleveland	OH	44125	8/13/2014	Reviewed with Emily Rph OxyContin every 12hours along with Butrans Med D formulary opportunities.Said Ok has 1patient on Butrans
PPLPMDL0020000001	Parma	OH	44129	8/13/2014	He has many patients on OxyContin, butrans he never thinks of. He appreciates abuse deterrent properties of OxyContin and dose options. We discussed communication with pain patients and how they need to be assessed frequently to ensure they are getting the optimal dose. We discussed ER dosing as preferable once a patient is taking more than 4 combination opioid pills per day. We discussed the tramadol patient who now has around the clock pain as appropriate for butrans. He could identify some appropriate candidates. We reviewed butrans dosing and titration. He hung the conversion guide of butrans on his bulletins board for reference. He will promised to start trying butrans for a few appropriate patients. Started to talk about the opioid naive patient and he said we can talk about that next time. He joked that he would like me to stop in 2 times per week.
PPLPMDL0020000001	Cleveland	OH	44113	8/13/2014	Discussed OxyContin abuse deterrent characteristics every 12hours along with Butrans 7 day transdermal for those patients requiring around the clock analgesia, Said Ok, refers to pain mgmnt for chronic pain, IR products post op 4-6weeks, but will consider for appropriate patients
PPLPMDL0020000001	North Royalton	OH	44133	8/13/2014	Talked with Lauren who is a new pharmacist. She said that they place their orders before 10 am and typically get everything next business day. They do not use electronic 222, everything hand written. She asked if you can break up a pack of butrans and I told her they are present in packs of 4 and can not be opened and separated. Told her what we are trying to tell the doctors in the area about the long term use of IR opioids when and ER opioid is more appropriate. She agreed.<font color=blue><b>CHUDAKOB added notes on 08/24/2014</b></font>Kathy, as an FYI, Butrans can be broken for the purpose of dispensing. This is totally up to the discretion of the pharmacy. Purdue has not restrictions on doing this.
PPLPMDL0020000001	Lakewood	OH	44107	8/13/2014	Spoke to chuck the pharmacist about FDA insight. Talked about OxyContin dosing and doses. Highlighted Butrans, scheduling, patch placement and the use of break thru pain medications as noted in The visual aid.
PPLPMDL0020000001	Westlake	OH	44145	8/13/2014	OxyContin dosing and doses. FDA insight. Butrans patch location how to discard after use and doses.
PPLPMDL0020000001	Cleveland	OH	44130	8/13/2014	Introduced myself to pharmacist. They don't use electronic 222, they order as they need with a couple day turn around time. She had to go.
PPLPMDL0020000001	Westlake	OH	44145	8/13/2014	Wave, invite to Butrans reminder and caresource and med d coverage for propaype pTient.
PPLPMDL0020000001	Lakewood	OH	44107	8/13/2014	Saw dr. Asked if he has ever considered the ten mg of OxyContin for a person that is new to opioid therapy and appropriate for chronic opioid treatment. Dr said sometimes. Reminded of 7 doses and managed care. Handed Butrans invite to him,nhe aid he can't go.
PPLPMDL0020000001	Cleveland	OH	44113	8/13/2014	Visited Ortho/Spine depts OxyContin/Butrans Initiation/Titration, Formulary grids
PPLPMDL0020000001	Lakewood	OH	44107	8/13/2014	Opened with extended release insight. Asked the doctor to think about this patient type today. Uncontrolled and needing a medication. Change from hydrocodone. Reviewed the 10mg of OxyContin and the option to titrate every 1 to 2 days to the other 6 doses if the 10 isn't the right dose. Reviewed caresource coverage and talked about Butrans and schedule 3. Invited to program. He will ck date.
PPLPMDL0020000001	Parma	OH	44129	8/13/2014	Doctor said that he does not write OxyContin, abuse deterrence is nice but thinks patients take too much. He gets patients from other doctors that are taking too much and require more because of tolerance. I agreed with his thinking, and said that's why extended release is a good option for SOME of those patients...the 12 hour dosing schedule with a single entity opioid is an option for some patients in around the clock pain, not all. He said he is really trying to avoid writing it. Asked him to consider OxyContin instead of titrating the Percocet patients. He agreed to think about it. He tries to wean people off too many pills and uses butrans for those patients who. Prefers spinal cord stimulation and methods like that to pharmacological. He writes butrans for patients already on an opioid, not naive patients. Started to review opioid naive study, but he wasn't interested. Pulled the butrans med d formulary win. Gave him the butrans titration guide. Left the opioid naive study in case he wanted to review it. He said he May glance at it but probably won't change his mind.
PPLPMDL0020000001	Cleveland	OH	44109	8/13/2014	Reviewed OxyContin/Butrans Initiation/Titration guides along with PI, said she will be retiring and referred appt requests to K.Austin (P.Campbell Admin)
PPLPMDL0020000001	Westlake	OH	44145	8/13/2014	Focused in the 10 mg every 12 hour dosing option, 7 dosing options. Invited to Butrans s program.
PPLPMDL0020000001	Garfield Hts	OH	44125	8/13/2014	Quick OxyContin review, Abuse deterrent characteristics every 12hours, Formulary grids, Said Ok will consider for appropriate patients
PPLPMDL0020000001	Parma	OH	44129	8/13/2014	Met two pharmacists, Mary Jo and Keith. They stock only 10 and 20 OxyContin and no butrans. They order in the morning, so depending when the script comes in determines if it is a 1 or 2 day wait if they are out of stock on something. They will direct them to a different pharmacy if they can't wait to fill the prescription. There has been talk of switching to electronic 222, but they haven't heard anything lately. They were very busy and had to
PPLPMDL0020000001	Garfield Hts	OH	44125	8/13/2014	Reviewed with Dr. referred to Colleen OxyContin abuse deterrent characteristics every 12hours along with Butrans 7 day transdermal for those patients failing on present therapy requiring around the clock analgesia, Said She will relay info and keep reminding , no further info learned
PPLPMDL0020000001	Cleveland	OH	44113	8/13/2014	Discussed OxyContin every 12hours, abuse deterrent characteristics along with Butrans for those patients requiring around the clock analgesia, Said Ok, refers to pain mgmnt for chronic pain, IR products post surgery for 4-
PPLPMDL0020000001	Brooklyn	OH	44144	8/14/2014	Reviewed OxyContin and Butrans Initiation/Titration guides, along with Treating pain in 4-6 hr increments, Said Ok will consider for appropriate patients

PPLPMDL0020000001	Brooklyn	OH	44144	8/14/2014	Discussed treating pain in 4-6hr increments, reviewed OxyContin every 12hours along with Butrans for those patients requiring around the clock analgesia, Said for the most part patients are adequately controlled, is using OxyContin but will consider for appropriate patients, Book lunch appt to further discuss
PPLPMDL0020000001	Cleveland	OH	44113	8/14/2014	Reviewed OxyContin every 12hours along with Butrans for those Norco failures said ok will continue to RX for appropriate patients
PPLPMDL0020000001	Brooklyn	OH	44144	8/14/2014	Discussed treating pain around the clock pain in 4-6hr increments, Reviewed OxyContin every 12hours along with Butrans for those patients requiring around the clock analgesia that are failin on present therapy, said Ok will consider for appropriate patients, refers most to pain mgmnt for chronic ER products
PPLPMDL0020000001	Parma Heights	OH	44129	8/14/2014	Talked with tech because pharmacist was on the phone, several people waiting. Introduction, told him that we are talking to doctors about appropriate time for ER opioid. pulled through managed care updates for both
PPLPMDL0020000001	Valley View	OH	44125	8/14/2014	Reviewed OxyContin/Butrans-PA went thru, Invited to upcoming program and will be scheduling Rph staff inservice
PPLPMDL0020000001	Lyndhurst	OH	44124	8/14/2014	Left with med asst, at front window, for Dr Reed: OxyContin fpi, conversion guide, Butrans initiation guide, fpi. Reinforced Medicare D preference, both products. Left 6 laminated pain scales.
PPLPMDL0020000001	Cleveland	OH	44115	8/14/2014	Reviewed OxyContin/Butrans with George Rph, typically 2 days for CII's, fax forms, typically needs RX before ordering
PPLPMDL0020000001	Cleveland	OH	44144	8/14/2014	Reviewed OxyContin abuse deterrent characteristics every 12hours, 7 tablet strengths along with Butrans 7day transdermal, Initiation/Titration, for those patients requiring around the clock analgesia, Med D formulary. Said ok will be graduating in Dec.
PPLPMDL0020000001	Parma	OH	44129	8/14/2014	She informed me that they do not write OxyContin in that office. She said that unfortunately there are patients in the practice taking more IR than they should and sees a benefit for ER in some patients. The office policy probably will not change however. She wanted to be clear on the recommendations for titrating butrans. I showed her the titration guide and pointed out that if the patients are on the higher doses of meds, they need to be tapered down while initiating/taking butrans. They can take supplemental meds for breakthrough pain, as they titrate to optimal dose (as early as every 3 days). Described the two patch titration option. She likes the option of butrans and is thinking of it for more patients than she had in the past.
PPLPMDL0020000001	Beachwood	OH	44122	8/14/2014	Doctor was in surgery and NP Roberta was on vacation. Talked to the MA about dosing options with OxyContin, patch dosing and titration options for butrans along with med d formulary update.
PPLPMDL0020000001	Mayfield Heights	OH	44124	8/14/2014	Left packet of info for Dr Corn at front desk with med asst. She stated Dr Corn NOT BACK UNTIL MONDAY. Discussed my two, single entity, ER opioids for patients with long term pain (verbatim indication) OxyContin tablet every 12 hours. Butrans 1x week patch. (WHILE THERE LEFT BUTRANS SAVINGS CARDS/PATIENT GUIDES FOR DR MOUFAWAD - left Kathy Laraway know)
PPLPMDL0020000001	Brooklyn	OH	44144	8/14/2014	Discussed Treating pain in 4-6hr increments, reviewed OxyContin every 12hours with abuse deterrent characteristics along with Butrans for those patients requiring around the clock analgesia, said ok, feels most patients are adequately controlled but will consider
PPLPMDL0020000001	Parma	OH	44129	8/14/2014	Myra says that patients seem to take more pills/IR than she would like. That is one of the reasons she like Butrans. Patients respond well to it and she has had a lot of success with it. Formulary coverage and cost is a limiting factor for some patients. She described some of the patients that do well on it and described some patients that she wants to try it on. She tries to wean them off of the pills, but many are a bit resistant. We talked about the opioid naive patient being a great candidate because they have not developed some of the same "habits". I tried to get to know her this visit. They do not write any CII's in the practice. We discussed the patients from earlier in the conversation that might benefit from ER, she agreed, but it is an office policy that will not change soon.
PPLPMDL0020000001	Strongsville	OH	44136	8/14/2014	Was barely even able to talk to the tech let alone the pharmacist because they were short staffed and busy. Quick intro of self, products, formulary coverage.
PPLPMDL0020000001	Independence	OH	44131	8/15/2014	Talked to Denise the floating pharmacist, the regular man was on vacation. She said that each store orders differently, some do order electronically, this one does not. Electronic orders typically take one day, handwritten may take two. She generally only sees drug reps if there is something new. She had to excuse herself for a phone call.
PPLPMDL0020000001	Cleveland	OH	44114	8/15/2014	Reviewed Butrans for those patients requiring around the clock analgesia, Said he continues to prescribe for appropriate patients, Reminded of Med D opportunities.
PPLPMDL0020000001	Akron	OH	44319	8/15/2014	Spike with pharmacy technician Robert about OxyContin key attributes, dosing and appropriate patients with conversions from Percocet. Robert said he sees a fair amount of it and the dosing dispenses vary from day to day. Discussed opportunities for conversions to q12h OxyContin. Introduced Butrans because he didn't know much about it. Discussed Kay selling attributes, how to initiate dosing, titration, and patient types. Reviewed MVA on conversions and patient types from that conversion table.
PPLPMDL0020000001	Cleveland	OH	44195	8/15/2014	Reviewed OxyContin every 12hours along with Butrans for those patients requiring around the clock analgesia, Initiation/Titration, Invited to program, Said ok will continue to RX for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44103	8/15/2014	Reviewed w/Hakim/Butrans savings cards along with CII order protocols
PPLPMDL0020000001	Mayfield Heights	OH	44143	8/15/2014	Left information at front window with med asst. Discussed my products as being ER opioids indicated for (verbatim indication) Left Butrans initiation guide, OxyContin conversion guide for Dr. Moyal.
PPLPMDL0020000001	Mayfield Village	OH	44143	8/15/2014	Baby boomer insight presented to Dr Park. The reason I'm sharing this data is that many of your patients are over age 65, and may need access to an ER opioid such as OxyContin or Butrans. Plans preferred/no prior auth necessary: cigna, UHC aarp, and Silverscripts Med D. I will be sure to continue to update Irina and med assts with formulary status of both Oxycontin and Butrans. Sound good? yes replied dr. Park. Left OxyContin conversion guide/Butrans initiation guide.
PPLPMDL0020000001	Akron	OH	44312	8/15/2014	Quick call as dr was coming in for the day. I asked him if he's ok converting a patient on Percocet to OxyContin when they need more and have daily around the clock pain? Dr said he is and said he likes to be very selective. I told her he should be and to use OxyContin there. Reviewed the Scott profile and asked him to focus on those continuing on tramadol as candidates for Butrans. CHUDAKOB added notes on 08/25/2014</b></font>A question you might consider is why he is not that selective when he prescribes Percocet, but he is when he prescribes low dose OxyContin. Just a thought.
PPLPMDL0020000001	Mayfield Village	OH	44143	8/15/2014	Met w medical assistant front window. Shared information on improved Medicare D access, no prior auth, Cigna, Silverscripts, UHC AARP. Left packet for Dr Ashraf including OxyContin conversion guide, Butrans titration guide. (left same for Dr Krishnan and CNP's Penny and Kristy)
PPLPMDL0020000001	Parma	OH	44134	8/15/2014	Talked with Nate the pharmacist who say that only he does the ordering. They do not use electronic 222, they typically have one day turn around if there is a stock issue. He stocks all strengths of everything. He thinks that patients taking around the clock IR meds should be on ER like OxyContin. Reviewed titration option for butrans.
PPLPMDL0020000001	Akron	OH	44312	8/15/2014	Hello at window and said he had a minute to listen. I told dr that he should be looking at opportunities for patients who have daily around the clock pain to out them on OxyContin. I showed him the conversion and titration guide and asked him to keep it available to reference when. A patients needs a dose adjustment on Percocet. Dr said ok. I asked him if he has any reservations in converting to OxyContin? Dr said no. Reviewed Butrans dosing, schedule 3,7 day transdermal patch and tramadol patients needing an adjustment to write Butrans.
PPLPMDL0020000001	Cleveland	OH	44109	8/15/2014	Visited Ctr. Discussed with Katie (admin Coordinator Dr. Campbell - Ctr Dir.) Butrans Initiation/Titration along with Formulary grid, Will try and coordinate opportunity to present Butrans at next mtg.
PPLPMDL0020000001	Richmond Heights	OH	44143	8/15/2014	Lunch. Primary care ER opioid insight. Dr says even based on data presented, he would NOT be comfortable starting an opioid naive patient on OxyContin or Butrans. Using Pam profile, after presenting profile details, covered medicare D - asked for patient like Pam who's failed on ir therapy and meets indication for ER opioid long term. Dr asked where is it covered? Went through formulary status, Medicare D pullthrough. (verbatim indication both products, next) first OxyContin: product attributes, single entity, proven efficacy since 1996, steady state and ability to titrate in 1-2 days. Lowest effective dose of 10, 15, 20 & 30 mg doses focal point. Butran, no drug interaction warnings with butrans and hypertensive/cholesterol meds; no dose adjustment needed for renal/mild/moderate hepatic impaired. Worn 1 x week/7 days. Dr kept getting confused with Fentanyl patch (worn 3 days) which he does write. Asked dr for one or two trusted patients today and into next week when they meet indication. Is that fair? Yes replied Dr.
PPLPMDL0020000001	Garfield Hts	OH	44125	8/15/2014	Reviewed OxyContin every 12hours, 7tablet strengths along with Butrans for those patients requiring around the clock analgesia, Said he has put a few new patients, so far so good, Will follow for feedback, reminded of Titration doses
PPLPMDL0020000001	Parma	OH	44129	8/15/2014	Introduction and Talking to MA and several office staff at once. Doctor was in a procedure. Reviewed abuse deterrent properties of OxyContin with staff along with fair balance that it can still be abused. Reviewed titration options with butrans and med d formulary. They have seen many patients who get the pain relief they need from butrans and they really like that option.
PPLPMDL0020000001	Mayfield Village	OH	44143	8/15/2014	Quick hallway. Discussed the goal of my call is to get him comfortable using ER opioids outside of nursing home/hospital setting. Delivered primary care insight, the reason I'm sharing data (ie Youre not alone should you decide to write an ER opioid such as OxyContin, dosed every 12 hours OR Butrans patch worn every 7 days. Please keep an open mind next week when your next patient presents with long term pain ok? Ok, replied Dr Azar. Left specifically for Irina: protect your practice brochure, OxyContin conversion guide/Butrans initiation guide.
PPLPMDL0020000001	Richmond Heights	OH	44143	8/15/2014	Lunch. Total office call. After speaking with med assts, left packet of info for Dr. Balaji including OARRS flashcard, Butrans initiation guide, patient guides (3) and fpi's both products. Left OxyContin conversion guide.
PPLPMDL0020000001	Cleveland	OH	44104	8/15/2014	Reviewed OxyContin abuse deterrent characteristics every 12hours along with Butrans for those patients requiring around the clock analgesia, Said Ok will consider, nothing new learned
PPLPMDL0020000001	Akron	OH	44312	8/15/2014	Dr came up to window to speak with the receptionist and asked if I needed a signature. I told him no and that I would like to discuss with him about his pain patients. DR said he didn't really have time and asked me which products I have. I told him OxyContin and Butrans. Dr said he has my information and will call if he has questions.
PPLPMDL0020000001	Akron	OH	44319	8/15/2014	Quick hello at window and told him to please focus on patients who are already on the oxycodone molecule and complain of being in pain or need a dose adjustment and convert them to q23 OxyContin. Dr said he knows he needs to look into that more and said he will. I told him to also gain more experience with Butrans for those who needs an adjustment on tramadol or Norco. CHUDAKOB's query on 08/25/2014</b></font>Cliff, I didn't know that OxyContin was dosed q23 hours?<font color=green><b>REICHEL's response on 09/03/2014</b></font>Me neither. Q12<font color=blue><b>CHUDAKOB added notes on 09/16/2014</b></font>Ok. thanks for the correction.
PPLPMDL0020000001	Akron	OH	44312	8/15/2014	I asked dr if he thinks its more difficult to write OxyContin for a patient on Percocet who needs a dose adjustment than giving more? Dr said its not that's its more difficult but said he doesn't want to give certain patients OxyContin. I asked him if all his patients on oxycodone are suspect? Dr said no and that he does have patients that really need it for pain. I told hi. To please focus on those patients that he knows and trusts and consider OxyContin when appropriate and they meet the indication. I also told hi. The same goes with those on tramadol who need more. I asked him to use Butrans for those when they have daily around the clock pain.
PPLPMDL0020000001	Cleveland	OH	44104	8/15/2014	Reviewed OxyContin abuse deterrent characteristics every 12hours, Along with Butrans for those patients requiring around the clock analgesia, asked why treat around the clock pain in 4-6 hr increments said he will consider
PPLPMDL0020000001	Mayfield Village	OH	44143	8/15/2014	Quick front window. Dr Petroff, I am your OxyContin Butrans rep from Purdue. I want to let you know we have improved Medicare D access for your patients who meet indication. Left with Adriana, med asst, Butrans initiation guide, OxyContin conversion guide. Protect your practice brochure. (left same for Dr. Papirova)
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/15/2014	Dr spoke about how well most patients are doing on Butrans and discussed how he just took a patient in pain on Percocet and started Butrans. The dr said that the patient was in pain on Percocet and had trouble tolerating it. The staff said the patient has UHC community plan so is hopeful it will be approved. I discussed candidates for Butrans and candidates for OxyContin. I asked him if the patient didn't have tolerability issues with oxycodone would he have started q12 OxyContin? Dr said it depends but said he really doesn't like to write for long term opioid therapy and that Butrans is the exception. I asked why and he said because of Butrans dosing is low and its a patch. Dr also asked about exposure to the sun. I asked why and he said he has a patient that had the patch of her left upper arm while driving and was having issues with overexposure he suspects. Dr said patient got dizzy and euphoric. Dr said the patient felt better after out of the sun. I read from the MVA about exposure to external heat sources. Dr said he understands and wants information on how much buprenorphine is left in a patch after 7 days. Submitted an inquiry.
PPLPMDL0020000001	Cleveland	OH	44104	8/15/2014	Revised with Hakeem Oxycontin abuse deterrent characteristics along with Butrans for those patients failing on present therapy who need around the clock analgesia. Said he has 1 Butrans patient and few OxyContin RX's.
PPLPMDL0020000001	Cleveland	OH	44102	8/18/2014	Reviewed OxyContin/Butrans appropriate Patients, with Tech and Mike Rph, Savings cards, Formulary grids



PPLPMDL0020000001	Parma	OH	44129	8/18/2014	Doctor Ortega was happy to see a rep because he hasn't seen a rep in a while. He first started talking about OxyContin and who that patient might be. He sees patients taking around 6 or more Percocet a day. I reviewed our indication and pointed out that patient would be appropriate for ER OxyContin. He has recently inherited several patients that are on higher doses of OxyContin than he prefers so he wanted to know how best to titrate up or down. I reviewed that it can be titrated every 1-2 days. Discussed the reformulation and abuse deterrent properties, but that it can still be abused. He has seen good results with butrans. He asked who this appropriate patient might be, I told him the patient who might be taking Tramadol more often and is probably now in around the clock pain and could benefit for an extended release opioid. Reviewed Pam as a possible patient also. Discussed titrating Butrans as early as 3 days if adequate analgesia isn't attained. Reviewed the 2 patch titration option as well. Doctor saw a patient and came back and said that the patient likes Percocet but not OxyContin. I reviewed that it is the same molecule, just different delivery system. He thought it was strange that the patient said that. He thought maybe the patient should be on butrans then....he appreciates the education portion of the discussion.<font color=blue><b>CHUDAKOB's query on 08/29/2014</b></font>Looks like a very good call Kathy. When he said the patient does not like OxyContin, this may have been a time to delve deeper to determine if there was an AE. Was the patient on OxyContin? Was he removed? Why? If so, this is considered an AE and should be reported. I understand this is a learning experience for you, but want to get you thinking about digging a little deeper.<font color=green><b>LARAWKA's response on 09/03/2014</b></font>I got the impression that it was just patient preference, next time I will ask the right questions to make sure it wasn't an AE.<font color=blue><b>CHUDAKOB added notes on 09/16/2014</b></font>The patient has a preference for a reason. That reason is almost always based on an AE such as, didn't work as well. That is why digging deeper helps clarify
	Akron	OH	44313	8/18/2014	I told dr that he's told me previously that he writes IR opioids and they are not always for acute pain. Dr said yes. I asked him why to ok to write and refill IR opioids like Percocet and its not ok to write an ER opioid like OxyContin. Dr said that he's told me before that there is a lot of heat out on drs for writing opioids and he can't justify writing more of a product with the name OxyContin. I told him then its an issue with the name not the molecule? Dr said its difficult to explain and that he des have patients on OxyContin. I asked him if he doesn't feel the same pressure to write IR opioids like Percocet. I told him IR and ER are BOTH opioids. Dr said he knows and may try to convert few patients. I asked him to do so as long as its a patients appropriate for it. I reviewed Butrans dosing and asked him to convert tramadol patients in daily around the clock pain.
PPLPMDL0020000001	Cleveland Akron	OH	44113	8/18/2014	Reviewed Butrans for those patients failing on Tramadol that is requiring around the clock analgesia that he is sending to Pain Mgmt (Nickels) said ok, will consider.
		OH	44312	8/18/2014	Discussed his opportunity with OxyContin and Butrans in patients who have daily around the clock pain. Discussed OxyContin appropriate patients and conversions from Percocet. I asked dr if there is a reason he's not writing more OxyContin for patients on Percocet who have daily around the clock pain? Dr said its complicated and many patients don't want it who he has offered to. Dr also said he tries but either its too expensive or hard to get approved. I discussed with dr to focus on commercial patients and those on Medicare plans. Dr said ok and will try. Told him that he needs to be writing Butrans and is missing opportunities who have been on tramadol for an extended period of time.
PPLPMDL0020000001	Akron	OH	44333	8/18/2014	Spoke with dr about identifying appropriate patients and used Bup 3015. Discussed inclusion and exclusion criteria. Dr said that he attempts Butrans multiple times a week and some patients are able to get it and come aren't. Dr said that he is finding the 10 and 20 mcg doses are best in his practice and so times titrates down after a spinal cord stimulator placement. Dr said some patients do well and some do not and needs to maintain the dose. Discussed forced titration with Bup 3015. Asked dr to please continue finding patients who appropriate to convert from Percocet to OxyContin.
PPLPMDL0020000001	Brooklyn	OH	44144	8/18/2014	Discussed treating pain in 4-6hr increments with IR products, feels patients are adequately controlled on present therapy, reviewed OxyContin every 12hours said his experience is that they will need IR products also, Reviewed Butrans for those patients requiring around the clock analgesia that are failing on present therapy. Overall will consider for appropriate patients but is seeing less patients on a daily basis
PPLPMDL0020000001	Parma	OH	44134	8/18/2014	Talked with Mariana? The pharmacist. She said they stock all but the 80 of OxyContin and no butrans. Butrans takes about one day to order. They do written ordering with no plans to go electronic anytime soon. Reviewed the message we are giving doctors about patients with around the clock pain who should be on ER med not IR. She said there is only one patient on butrans, so she didn't really want to hear more about that at this time.
PPLPMDL0020000001	Uniontown	OH	44685	8/18/2014	Spoke with Kim the pharmacist about the revised OxyContin and Butrans indications and asked her if she has seen an increase of any specific opioid or product recently? Kim said not really but said they fill a large amount each week and her location has the highest amount of opioid dispensing. I asked why and she said because of the large amount of pain specialists and orthopedic surgeons in the area. Discussed OxyContin placement for patients in daily around the clock pain and Butrans for the same but told her I'm focusing on patients currently on tramadol who may need a dose adjustment or in daily around the clock pain.
PPLPMDL0020000001	Akron	OH	44333	8/18/2014	I asked Elise what dose of OxyContin she is writing most? Elise said just about everyone she starts on 10mg q12. I asked if she ever sees patients in the 30-40mg of IR oxycodone and what she does? Elise said she still starts at 10mg and writes the IR as breakthrough up to 4x a day. I asked her why she wouldn't just write the appropriate converted dose of OxyContin and reduce IR? Elise said she would rather have a lower dose of ER because its so hard to get them off of it. I asked her then if she feels its easier to get a patient off of IR opioids? Elise said that's what she's seen clinically.
PPLPMDL0020000001	Cleveland	OH	44125	8/18/2014	Spoke with Linda Tech (Reviewed OxyContin/Butrans Initiation/Titration) Savings Cards. CII protocol
PPLPMDL0020000001	Cleveland	OH	44125	8/18/2014	Intro to Butrans, 7 day Transdermal, Initiation/Titration, Med D coverage along with OxyContin abuse deterrent characteristics every 12hours, 7 tablet strengths. Said Ok will consider for appropriate patients, referred to Monica, will set up apt to further discuss
PPLPMDL0020000001	Akron	OH	44320	8/18/2014	Dr Adams said that her last day at Bonyo's office is Friday, September 12th. I told her to please try in her time left to focus on patients who are in daily around the clock pain who are on an IR opioid. I told her to convert patients on Percocet with albums the clock pain to OxyContin and those on tramadol or vicoden to Butrans. I told her she's missing opportunities for OxyContin and Butrans because she has patients with her right prescription plans, and both have proven efficacy and safety results. Dr said ok she will try.
PPLPMDL0020000001	Brooklyn	OH	44144	8/18/2014	Discussed treating around the clock pain in 4-6hr increments. Reviewed OxyContin every 12hours, 7 tablet strengths along with Butrans for those Tramadol failures requiring around the clock analgesia, Said Ok will keep it mind now that Med D coverage is better. Reiterated his support of OxyContin as an effective analgesic
PPLPMDL0020000001	Akron	OH	44320	8/18/2014	Quick hello in hallway and asked her if she's able to find more patients who might be appropriate for Butrans and who she thinks is a good candidate? Dr said no one will want to pay for it. I asked her her no one is? Dr said patients. I told her I find that hard to believe because she has Caresource and commercial insurance right? Dr said she does but its the ones who can't get it that need it the most. I told her I understand her frustration but told her she needs to focus on patients with plans I mentioned who have daily around the clock pain. Dr said ok. Told her to also focus on OxyContin as well and she needs to identify the right patient.
PPLPMDL0020000001	Garfield Hts.	OH	44125	8/18/2014	Reviewed Butrans for those patients failing on present therapy requiring around the clock analgesia along with OxyContin every 12hours, 7 tablet strengths, Said ok will help in remindind docs, Invited to upcoming program.
PPLPMDL0020000001	Fairlawn	OH	44333	8/18/2014	No new info on policy
PPLPMDL0020000001	Cleveland	OH	44333	8/18/2014	Spoke to Sue and asked her about the number of Medicaid patients filling prescriptions and if she has seen an increase recently? Sue said they have patients with Buckeye and its difficult like many of the other Medicaid plans to get branded medicines covered. I asked if she is seeing more Buckeye and she said Buckeye seems to be a plan more people are enrolling in. Discussed OxyContin coverage and dosing and well as key selling attributes.
PPLPMDL0020000001		OH	44102	8/18/2014	Discussed Butrans dispensing and which dose is most common and Sue said they seem to be dispensing out more 10mcg.
PPLPMDL0020000001	Cleveland	OH	44102	8/18/2014	Window call, Reviewed Butrans for those Tramadol failures requiring around the clock analgesia along with OxyContin abuse deterrent characteristics every 12hours, Said Ok referred to Med Dir. Dr. Kauffmann, refers to Lutheran Pain Mgmt.
PPLPMDL0020000001	Cleveland	OH	44195	8/19/2014	Reviewed w/Tech Maya, OxyContin and Butrans Initiation/Titration, Savings cards along with Formulary status, Said Ok, no new info learned
PPLPMDL0020000001	Cleveland	OH	44195	8/19/2014	Discussed OxyContin 7tablet strengths every 12hours, efficacy along with intro to Butrans 7 day transdermal, Initiation/Titration for those patients requiring around the clock analgesia, Formulary coverage , saving cards, Said he will continue to prescribe OxyContin for appropriate patients and will consider Butrans,
PPLPMDL0020000001	Cleveland	OH	44104	8/19/2014	Discussed Treating pain around the clock pain in 4-6hr increments, Reviewed OxyContin abuse deterrent characteristics every 12hours along with Butrans for those patients requiring around the analgesia failin on present therapy, Med D coverage and formulary grids, said Ok, will consider for appropriate patients, Invited to upcoming program
PPLPMDL0020000001	Lakewood	OH	44107	8/19/2014	Invited to program, he told me to sign him up and remind him of the Butrans program when it gets closer. I talked about how many times I've been in his office this year and I said he should have a very clear understanding of who the right patient is and how to dose Butrans by now. The. I said do you agree? He said not really, he tried to tell me the mcg doses but could only remember the 10 and 20. We talked about how he wrote it a few time. He said he doesn't have a very good idea who the right patient is and his biggest concern is cost to patient and writing the product and then the patient complaining its too expensive. We reviewed the patient that is already seeking a change to therapy and is atc. Covered dosing. Steady state. The. Focused on caresource coverage. I asked what if every caresource atc appropriate pain patient were to get Butrans. Dr asked if it needs to be primary authorization. I reviewed and then had Angie who does the pr auths tell her experience the last two Butrans caresource times she did it. Angie the ma said it was fast. I said if cost is an issue why wouldn't every appropriate caresource patient get Butrans. Dr said that was a good point. Talked coupons and commercial insured. Covered lowest doses of Butrans and OxyContin. Covered reformulation of OxyContin and dosing.
PPLPMDL0020000001	Cleveland	OH	44104	8/19/2014	Quick OxyContin review, every 12hours, 7 tablet strengths along with Butrans for those patients requiring around the clock analgesia that are failing on Tramadol, Formulary Med D opportunities, Said He will continue to RX for appropriate patients
PPLPMDL0020000001	Berea Akron	OH	44017	8/19/2014	Talked about chronic pain patients requesting a change to there therapy- options of OxyContin. And Butrans and the lowest doses available. Dr said she would not attend the Butrans program.
PPLPMDL0020000001		OH	44310	8/19/2014	Dr said that as I was talking to him he was writing a prescription for Butrans. Asked dr if its a new start and he said it is. Dr said that the patient was taking 20mg of Norco and needed a long acting medicine due to the spinal stenosis. Dr said he is starting on Butrans 10ug and has good insurance. I told dr that's great news and to replicate that for other patients who are on an IR opioid and have pain around the clock. Asked dr to please continue to identify others existing patients who continue to Percocet for oxycontin. Dr said he only has a handful of patients on Percocet and will review their records.
PPLPMDL0020000001	Lakewood	OH	44107	8/19/2014	Highlighted reformulation and doses and dosing. Covered Butrans patch locations and dosing and how long the patch is worn.
PPLPMDL0020000001	Lakewood	OH	44107	8/19/2014	Talked to Michelle the pharmacist and the tech student. FDA insight and the reformulation of OxyContin. Talked about the coupons. Talked about Butrans patch location and coupons and using break thru pain medication with Butrans.
PPLPMDL0020000001	Lakewood	OH	44107	8/19/2014	Spoke to make nurse about products and trying to get apt. He took my card and said he would tell the dr.
PPLPMDL0020000001	Euclid	OH	44119	8/19/2014	Hallway. Asked for nurse mgr Carla Van Pelt, was told she stepped down as nurse mgr, yet still on pain floor. Yvonne is new nurse mgr. Asked for Dr Nageeb, he is on vacation. Asked for Paul Gawry, he was seeing patients stated Vince, new asst nurse mgr. Met with Vince. He stated they recently got denial for OxyContin, and more for Butrans. Asked specifically which plans? He mentioned Medicare D plans including Humana and Aetna Med D. Let him know I would drop off new formulary grids to he and Yvonne when I get new ones. Left business card w Vince & Yvonne & suggested they call me if I can be of help. Vince states he's on w prior auths over 45 mts each time & sometimes has to hang up because he has so many other duties. He did say they will not give up on trying to get OxyContin & Butrans through. Left savings cards, OxyContin conversion guides, Butrans initiation guides & 5 Butrans patient guides. Discussed broad formulary coverage, Medicare D pull through.
PPLPMDL0020000001	Olmsted Falls	OH	44138	8/19/2014	Invite to Butrans program. Dosing of Butrans and managed care. Highlighted OxyContin 10mg and dosing.
PPLPMDL0020000001	Euclid	OH	44119	8/19/2014	Met w medical asst Lynn - findings: Dr Chagnick does NOT accept promo items from reps. 2. Most of their pain patients referred to Dr Sami Moufawad. HCPs in practice don't write ER opioids, and they write very few IR opioids as well. Left packet of info for Dr Katz ( Dr Eckstein)
PPLPMDL0020000001	Berea	OH	44017	8/19/2014	Talked about the older chronic pain patients requesting a change In Therapy....options OxyContin 10mg and dosed and Butrans lowest dose mentioned and how long worn. Dr said he will not go to the program.
PPLPMDL0020000001	Lakewood	OH	44107	8/19/2014	Left invites and highlighted managed care
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/19/2014	Spoke with Rick the director of The Center for Pain Management and asked him how things are and he said everyone is going well. Quick hello with Glenn the pharmacist and gathered no information with Butrans or
PPLPMDL0020000001	Akron	OH	44305	8/19/2014	I asked dr if our discussion last week about Butrans made sense to him about identifying patients on tramadol around the clock? Dr said it did and said he knows he needs to do a better job of finding the right patients. I told dr if he thinks tramadol is a reasonable place to start? Dr said it is and will try. I asked him if its also reasonable to use OxyContin for those already on the molecule but in short acting form. Dr said it makes sense. Nothing
PPLPMDL0020000001	Lakewood	OH	44107	8/19/2014	Spoke to ma elain at the ccf location. They share coupons and they took my literature but they didn't let me see the dr. I highlighted the dosing and scheduling of both products.



PPLPMDL0020000001	Cleveland	OH	44195	8/19/2014	Visited Correctal Surgery dept (Church, Remzi, Hull, Kalady, Dietz ) Initiation/Titration guides for OxyContin and Butrans, Savings cards
PPLPMDL0020000001	Cleveland	OH	44120	8/19/2014	Reviewed OxyContin/Butrans Initiation/Titration, Cindy, Ebony was busy, Stop back later in the week to discuss CII protocol ordering, no new info learned
PPLPMDL0020000001	Cleveland	OH	44112	8/19/2014	Reviewed OxyContin abuse deterrent characteristics every 12hours, 7 tablet strengths along with Butrans for those Med D patients (Silverscripts/UHC AARP Tramadol failures requiring around the clock analgesia, Said ok will consider, nothing new learned
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/19/2014	Spoke with Amanda and discussed OxyContin and Butrans key selling attributes. Amanda said she didn't know about discussing 8am and 8pm dosing for Butrans to help ensure q12 dosing. Told her that's good she learned something and if she had questions? She asked me about the copy cards which I discussed on both products. I asked her about Butrans dispensing and she said they have lots of patients on it and all doses in stock.
PPLPMDL0020000001	Lakewood	OH	44107	8/19/2014	Saw dr in hallway. I asked him what he thought of the 10mg strength dosed every 12 hours for OxyContin. He said its good. I said do you use OxyContin's lowest dose for patients that are older? He said sometimes. I said think about this the next time your older patient needs a medication change...appropriate. OxyContin is single entity and the 10mg is the lowest dose, told him the data for. The fpi of the 12.2 section. And highlighted no dose reduction for normal elderly. I said but if they can't take pills...another option is Butrans lowest dose is 5mgc single entity and worn a week at a time.
PPLPMDL0020000001	Berea	OH	44017	8/19/2014	Dr was walking out to a meeting. He asked if anything was new. I said I wanted him to keep in mind the variety of OxyContin doses cause what works for one person may not another. Talked about the 10mg and dosed every 12 hours. He said ok and walked away.
PPLPMDL0020000001	Cleveland	OH	44104	8/19/2014	Quick OxyContin review every 12hours, 7 tablet strengths, along with Butrans for those patients requiring around the clock analgesia, Said Ok will keep it in mind
PPLPMDL0020000001	Euclid	OH	44132	8/19/2014	Met with Rachel at front, left business card for Rob Shullman (former customer of Barry) findings: Rob Schulman is contact for presenting product information - Rob back at 2 pm, has meeting, if meeting not too lengthy, Rachel will welcome us back upon Rob approval to see us today. PIC is Simon Wong.
PPLPMDL0020000001	Euclid	OH	44119	8/19/2014	Met w pharm mgr Dave. Discussed proper dosing for OxyContin q12h. Dave mentioned a few pain drs writing OxyContin q8, more frequently in high doses. And that he has the option of not filling those, based on OxyContin FPI. left FPI. Discussed Butrans, Dave sees greater utilization recently- it's catching on he says. Left 2 Butrans patient guides, FPI. Butrans product attributes: no dose adjustment for renal, mild/moderate hepatic impaired. Left RX patrol sticker, protect your pharmacy brochure. Note: using McKesson as primary distributor. (Rite Aid no longer gas their own distribution center)
PPLPMDL0020000001	Westlake	OH	44145	8/20/2014	Spoke to Paula the nurse about OxyContin savings cards talked about Butrans and the dinner program but she said the dr wouldn't go.m
PPLPMDL0020000001	Cleveland	OH	44109	8/20/2014	Reviewed with Rabani RPh OxyContin abuse deterrent characteristics every 12hours along with Butrans for those patients requiring around the clock analgesia, that are failing on present therapy. Obtained CII order protocol
PPLPMDL0020000001	Westlake	OH	44145	8/20/2014	Spoke to he nurse (Laura the ma was out today) and the dr thru the window. I asked what new things did he know about OxyContin? The said she was familiar with the reformulation of OxyContin. We talked about a few points from the core visual aid and talked about the dosing and ten mg. she said the dr can't do wed program for Butrans and that tues and Thursdays were better days for him to do that. I highlighted the dosing and the appropriate patient type. Dr said said he was familiar with the name but didn't know specifics. Reviewed scheduling, patch location and highlighted a few areas for. I asked why would there be hesitations when it's a schedule 3 option for chronic patients who are looking. For a change to there therapy. Dr said its new. I said there's new products that come out all the time...but a 4 year old product isn't new. He said new to him. I said this week, maybe next...if someone wants a change and appropriate try Butrans . He said maybe.
PPLPMDL0020000001	Akron	OH	44305	8/20/2014	Spoke with Matt the pharmacist about OxyContin key selling attributes, conversions, dosing, and appropriate patients. Scott said they fill a fair amount of oxycodone but most is the short acting oxycodone. I told him about the oxycodone insight. Matt said he agrees there is a problem. Discussed Butrans attributes, dosing, conversions, titration and Scott profile.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/20/2014	Dr came into discussion about selecting appropriate patients for Butrans and reviewing Scott profile and conversion guide. Dr said he would use it for his cancer patients. I told dr he needs to use Butrans after tramadol or Norco and reviewed Bug 3015 information. Dr asked about a patient on 30mg a day of Percocet where he should start. I showed him the conversions and told him he would start on the 10mcg patch and to titrate or use supplemental analgesia if necessary. Discussed steady state, titration/conversions, schedule 3 and copy cards. Dr said he will use it and asked about insurance coverage. Dr discussed how all the have is Buckeye and the contract they have with him. I discussed Medicare D and commercial coverage. Dr wanted to make sure SummaCare is paying for it.
PPLPMDL0020000001	Cleveland	OH	44102	8/20/2014	Reviewed OxyContin abuse deterrent characteristics every 12hours along with Intro to Butrans (7 day transdermal, Initiation/Titration, for those patients failing on present therapy, Said Ok will consider for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44106	8/20/2014	Reviewed OxyContin 7 tablet strengths along with Butrans for those patients failing on Tramadol that are requiring around the clock analgesia, Said ok will continue to find appropriate patients
PPLPMDL0020000001	Uniontown	OH	44685	8/20/2014	Discussed Butrans with Abby in Fairlawn office and asked her to please continue looking at patients as candidates who are being treated for pain around the clock On IR opioids like Norco. Abby said she finds it to be a good option for many. Reviewed OxyContin patients types already on the oxycodone molecule who have daily around the clock pain.
PPLPMDL0020000001	Highland Heights	OH	44143	8/20/2014	Met w pharmacy tech Brooke, pharmacist on phone. Discussed OxyContin schedule CII, indication, dosing, left FPI. Discussed Butrans increased utilization @ this store. Discussed Butrans CII scheduling, dosing strengths, left FPI. Discussed, left 1 Butrans patient guide with tech. Asked her to place on shelf w Butrans. Left protect your pharmacy brochure.
PPLPMDL0020000001	Westlake	OH	44145	8/20/2014	Spoke to ma Joyce. She said the doctor wasn't back from lunch yet. Gave her managed care review and Butrans invite. She said she would tell the dr
PPLPMDL0020000001	Westlake	OH	44145	8/20/2014	Talked about the FDA insight and reformulation, dosing and doses of OxyContin. Talked about Butrans doses, they don't stock the 15 but said he can get it. Talked about where to place the patch and how to discard. Also talked about supplemental for break thru with both Butrans and OxyContin.
PPLPMDL0020000001	Westlake	OH	44145	8/20/2014	Spoke to dr about the Butrans dosing and managed care. Also talked about what the hospital said about getting Butrans on formulary. Highlights OxyContin reformulation and dosing.
PPLPMDL0020000001	Munroe Falls	OH	44262	8/20/2014	Reviewed the OxyContin start principles with dr and asked her what she thinks? Dr said that it makes sense and she tries to do that. I discussed how she needs to identifying patients already on the oxycodone molecule. Told her to focus on patients on tramadol and Norco who take them around the clock.
PPLPMDL0020000001	Mayfield Village	OH	44143	8/20/2014	Lunch. Discussed OxyContin, Butrans as ER options for patients with ATC, long term pain. Dr Mukunda's comfort level with managing pain patients. Dr Mukunda states he has no interest & no time. He refers all pain patients to Dr Dewes and now Dr Yap new Beachwood practice.
PPLPMDL0020000001	Mayfield Village	OH	44143	8/20/2014	Lunch. Primary care insight. Kristy communicated that she writes under Dr Mukunda, works closely w Dr Mukunda. She stated that she is not comfortable writing opioids. She's not even comfortable refilling opioids. Discussed that they refer all their pain patients to Dr Dewes, and now Dr Yap new practice in Beachwood. Med D pull through & patient access for both OxyContin & Butrans.
PPLPMDL0020000001	Westlake	OH	44145	8/20/2014	Spoke to Laura about the 10 mg of OxyContin, the naive dose and the other doses available. Highlighted the elderly profile via the fpi. Talked about Butrans savings cards and patch locations. Gave literature and asked her to pass the information and to let him know I was here again. She said she would do it.
PPLPMDL0020000001	Westlake	OH	44145	8/20/2014	Spoke to the pharmacist about getting Butrans on formulary. I left a message for Michael carlin the director and racha a Patel the clinical manager. No response back. Discussed Butrans, scheduling and where the patch is worn. Gave the opioid naive study to review and to pass to the two ppl in charge of formulary decisions.
PPLPMDL0020000001	Westlake	OH	44145	8/20/2014	Who is a potential Patient appropriate discussion for both products. Highlighted the elderly profile of both products. Focused on the lowest dose of both and managed care. She has to ck her schedule about the butran program it depends if she has her kids that night. Shirk a the ma said she would call me when she checks her schedule
PPLPMDL0020000001	Cleveland	OH	44106	8/20/2014	Visited Pain mgmnt dept. OxyContin/Butrans Sahgal, Requested dept apt
PPLPMDL0020000001	Westlake	OH	44145	8/20/2014	Talked to the nurse about dosing of OxyContin and coupons. Dr said she can't attend the Butrans s program. I highlighted a fee managed care plans gave her the naive study and pointed out the pain results and gave the 30 percent pain insight.
PPLPMDL0020000001	Akron	OH	44313	8/20/2014	Quick hello with dr though window and asked him if he has had good clinical success with OxyContin? Dr said sure. I asked him to take a closer look at those s iting patients on IR oxycodone and evaluate them for a change in delivery to q12 with OxyContin. Dr said ok and said that some patients can't even pay for Oxycontin and he has to give them the short acting oxycodone. Told him I understand and to focus on patients that can get it without much headache from insurance. Told him to also use more Butrans in those who are being continued on IR opioids like Norco.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/20/2014	Good discussion with dr about his clinical experience. Dr said that he's finding good success with Butrans for those failing tramadol. Dr said he doesn't even ant to write hydrocodone anymore and said if the patient needs that more than a couple of weeks they should be on a ER opioid anyway. I told dr I'm glad he feels that way. Dr said that his patients on It find good efficacy and its very tolerable. Dr said the incidence of constipation is low which he likes and its a week long. I reminded dr of using it for his Medicare population. Dr was helping dr McLaughlin understand where and why he uses it and helped to discuss cost and copy cards.
PPLPMDL0020000001	Mayfield Village	OH	44143	8/20/2014	Lunch. Presented Primary Care insight. Dr Krishnan says the number of ER opioids written monthly by primary care seems. The reason I'm sharing this insight is if you do decide to write an ER opioid for your patients with ATC pain, you are not alone. Discussed OxyContin 10 mg opioid naive dose, steady state, ability to titrate in 1-2 days. Discussed OxyContin half life 4.5 hours, oxycodone half life 3.2 hours. Asked if he had opioid naive patient, would he ever write a 10 mg OxyContin? Dr says I have no issue with that. Butrans, discussed 1x week, patch, matrix technology , not a reservoir. No dose adjustment needed for renal, mild/moderate hepatic impaired. No first pass metabolism. Asked for use of either product today, this week, when patients meet indication for ER opioid.
PPLPMDL0020000001	Cleveland	OH	44102	8/20/2014	Reviewed w/Mary Pharm D, treating around the clock pain in 4-6 hr increments clinically is in effective, Reviewed OxyContin abuse deterrent characteristics every 12hours, 7 tablet strengths along with Butrans 7 day transdermal, Initiation/titration, Patient info booklets. Said she will assist along with Donna in discussing with Clinicians.
PPLPMDL0020000001	Mayfield Village	OH	44143	8/20/2014	Lunch. Primary Care insight. Dr agrees that's a high number. Discussed 2 options for his patient's with ATC pain. Asked for him to consider an ER opioid for a few trusted patients. OxyContin after Percocet or oxycodone; product attributes including ability to titrate in 1-2 days, dosing flexibility. Butrans after Tramadol, product attributes including flexible dosing, no first pass metabolism. No dose adjustment needed for renal, mild/moderate hepatic impaired. Med D pull through.
PPLPMDL0020000001	Brooklyn	OH	44144	8/20/2014	Spoke with Donna Nurse reviewed OxyContin and Butrans Initiation/Titration, formulary grid/Med D opportunities said Ok, Dr. is seeing patients at the Middleburg Hts location 7800 Pearl Rd 44130
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/20/2014	Dr came into discussion with other hcp's about identifying the right patient or patients for Butrans. Discussed Scott and Pam profiles and dr said he is finding good success when patients are taking more than 4-5 tramadol a day. Dr said he is finding that he needs to always remember not to discontinue the tramadol until Butrans reaches steady state at 3 days. I asked dr to also try and reevaluate his existing patient ps on tramadol or Norco and to not titrate those until they get to escalating doses. I asked dr at the first sign of the patient being in pain around the clock to write Butrans. Discussed managed care and copy cards.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/20/2014	Started off discussion with dr Sassano on the tramadol insight and revised Butrans indication. I asked dr if he currently has patients who are being treated for daily around the clock pain in 4-6 hour increments? Dr said he's sure he does and asked about Butrans abuseability. I told dr that Butrans is a schedule 3,7 day transdermal opioid and any opioid can be misused or abused. I asked dr if he has a concern? Dr said no but would like a product he can use which may suit certain patients in his practice better. I reminded dr that Butrans is a transdermal patch and the buorenorphine is mixed in with the adhesive. Dr said he may try more Butrans in his patients who he just can't get control with oral agents. I told dr a different administration may be suitable for patients who can't wither tolerate or gain efficacy from oral agents. Discussed Butrans patient type selection, managed care, conversions and titration plus talk of steady state and use of breakthrough pain medicines.
PPLPMDL0020000001	Cleveland	OH	44102	8/20/2014	Quick review of OxyContin abuse deterrent characteristics every 12hours along with Butrans for those patients requiring around the clock analgesia, Said Ok no time to talk/Mtg referred to Donna P. Consults on Hospice/Palliative med
PPLPMDL0020000001	Akron	OH	44303	8/20/2014	Spoke with Rod about revised indications for OxyContin and Butrans. Discussed how patients in around the clock pain continue to be kept on IR opioids . Rod said he sees it all the time and knows that the DEA and FDA are scaring PCPs, and interests into writing anything other than IR opioids and to even reduce their opioid prescribing. Rod spoke about how even one of his wholesalers of suboxone told him they wouldn't supply him anymore because he ordered too much. Discussed use of OxyContin for patients being kept on Percocet and Butrans for those in around the clock pain on tramadol and Scott profile.

PPLPMDL0020000001	Fairlawn	OH	44333	8/20/2014	Speaking with the office manager Linda in Fairlawn and dr Jones came up. I quickly told him to continue to focus on oariwnts who are currently being treated with Percocet but are takin it for around the clock pain and to convert them to OxyContin. Dr said he's doing his best. I told him Butrans is also a solution for those patients on tramadol or Norco around the clock. Nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44113	8/20/2014	Reviewed OxyContin abuse deterrent characteristics every 12hours along with Butrans for those patients requiring around the clock analgesia, Agreed treating pain in 4-6 hr increments is not clinically sound, Reviewed Formulary coverage, said she will consider, referred to Donna/Dan
PPLPMDL0020000001	Cleveland	OH	44109	8/20/2014	Spoke with Tania, Malak was unavailable, Reviewed Med D formulary grid opportunities, Reviewed Butrans for those patients requiring around the clock analgesia along with OxyContin every 12hours
PPLPMDL0020000001	Westlake	OH	44145	8/20/2014	Dr asked me to register him but remind him about the Butrans program next week. Talked about caesource coverage, I asked him why after someone needs a change after been on hydrocodone why don't you write Butrans exclusively on caesource. We talked about the prior auth needed and the approval process in general. The dr said that there is no reason he can think of that it would be a good choice. I asked if a patient has chronic pain...why wouldn't you give them a prduct that is schedule three and dosed weekly. He said cost. I said by time they get to Butrans haven't they been on a generic product or even two generic products. He said usually ultram or norco. I said so by the third choice isn't a branded product an option if they can get it at a reasonable price point. He said yes. We talked managed care, coupons. Talked about where to place the patch and what doses to start a patient. Highlighted OxyContin. I said what new things do you know about OxyContin? He mentioned a few of the doses and reformulation. I asked what the reformulation means to him. He said less chance to abuse it. I highlighted sections from the detail aid but also gave fair balance on abuse potential. I asked if he would consider moving from hydrocodone to OxyContin if the patient was appropriate. He said yes. I said do you do this? He said sometimes. He mentioned insurance companies wanting him to use methadone first. I said that's not every plan, that's just a few. Highlighted the savings cards.
PPLPMDL0020000001	Lakewood	OH	44107	8/21/2014	I wanted him to think about the elderly patient with med d coverage and not satisfied with their current chronic pain medication. Talked OxyContin and the 10 mg every 12 hour dosing, Invite for Butrans, dr said he wouldn't attend.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/21/2014	Spoke with Jake and Dr Sable in Hospital. I asked Jake to please continue to find candidates for Butrans like those needing more tramadol or Norco and taking them on a daily around the clock basis. I told him that the last time we spoke he said he hadn't had many parings for Butrans recently. I asked him to make that change and use Butrans as his go to ER opioid. Dr said ok. I also told him that OxyContin is also a good option for those needing a q12 ER opioid. Jake said he will work on it.
PPLPMDL0020000001	Stow	OH	44224	8/21/2014	Discussed OxyContin and Butrans with Holly the pharmacist. Holly said that she is seeing OxyContin a little more than normal recently. I asked where the increase is coming from pain management physicians like a Comprehensive Pain Management. I asked which doses and she said they dispense just about all of them. Reviewed dosing and titration and discussed appropriate patient types for Butrans and key selling attributes.
PPLPMDL0020000001	Cleveland	OH	44115	8/21/2014	Reviewed OxyContin 7 tablet strengths every 12hours along with Butrans for those patients requiring around the clock analgesia,Said Ok will continue to find appropriate patients, Remind Martha
PPLPMDL0020000001	Cleveland	OH	44195	8/21/2014	Reviewed OxyContin 7 tablet strengths, formulary coverage along with Butrans for those patients requiring around the clock analgesia that are failing on present therapy, Said she will continue RX for appropriate patients, nothing new learned
PPLPMDL0020000001	Lakewood	OH	44107	8/21/2014	Spoke to dr about OxyContin comfort these days. Dr said he still writes it for appropriate patients. Discussed the 7 doses and the 10 mg dosed every 12 hours. Asked him his concerns for trying Butrans. Dr said he doesn't like pain patches. He had to leave I said we will continue the conversation. Next time.<font color=blue><b>CHUDAKOB's query on 08/27/2014</b></font>-Lisa, what does your next call objective mean?<font color=green><b>BARTOLI's response on 08/28/2014</b></font>-Next visit ask to see the nurse first, find out thru her if she knows the doctors potential hesitations for not writing Butrans or if she can provide any historical reasons for why he chooses immediate release products for chronic pain patients w atc pain.<font color=blue><b>CHUDAKOB closed the query on 08/29/2014</b></font>
PPLPMDL0020000001	Westlake	OH	44145	8/21/2014	Spoke to dr about the 10mg of OxyContin and dosing. Also highlights the Butrans dosing, initiation guide. Invited to program, he may attend. So I said I would follow up next week.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	8/21/2014	Caught dr on the way in to the office and told her I reviewed the information about her most recent Butrans denial. I told her it was a patient who had Medicaid and specifically buckeye. I told dr that she must NOT write Butrans for the buckeye patient. I told dr if she is going to write it for Medicaid to focus on patients with Caresource. I told her about the Caresource PA. Dr said she just figured she couldn't write it for Medicaid as a whole and said she is excited to hear about it. I told her I have told her and Darlene about it multiple times. Reminded her that oxycontin is also a possible solution for those already on the oxycodone molecule but are taking it around the clock. Dr said ok.
PPLPMDL0020000001	Cleveland	OH	44115	8/21/2014	Reviewed with Dave Butrans and OxyContin, said he dispenses very few narcotics, Once weekly if any, no new info learned
PPLPMDL0020000001	Brecksville	OH	44141	8/21/2014	Talked with Terese the tech, and two pharmacists, Angie and Joe. They typically order in the evening. When they don't have the med, it typicLy takes 1-2 d days to order or they send to another pharmacy that stocks it. They stock OxyContin, but no requests for butrans. I told her a bit about it And let her know That I was a new rep in the area. She did request coupons so I gave her oxycontin.
PPLPMDL0020000001	Westlake	OH	44145	8/21/2014	Talked about the FDA insight and the dosing of OxyContin, Butrans dosing and managed care.
PPLPMDL0020000001	Westlake	OH	44145	8/21/2014	She asked if I needed a signature, I said I wanted her to keep something in mind for her older patients with chronic pain. If they need a change of medication. OxyContin. Is single entity with a lowest dose of ten mg strength.
PPLPMDL0020000001	Stow	OH	44224	8/21/2014	Asked her if she wanted to come to the Butrans program to learn more. She said no.
PPLPMDL0020000001	Lakewood	OH	44107	8/21/2014	Dr told me she needed the 30 second version. I told her I'm guessing she has patients she is currently treating with OxyContin who are employed and have prescription insurance through their employer. Dr said a few yes. I showed her the OxyContin copay card and asked if they are using it? Dr said she doesn't know. I told her to ask because they can save up to \$70. I asked her if she has patients on tramadol on a daily around the clock basis? Dr said she probably does. I told her that those patients are meeting the indication for Butrans and she should write Butrans for those patients as long as they meet the indication. Dr said ok that she will try it.
PPLPMDL0020000001	Lakewood	OH	44107	8/21/2014	Dr asked me if OxyContin was generic. I said no why would you think at? He said he heard something. I said I had no formation to share in that. I did tell him that about the commercial coverage and coupons. And the doses. I asked if he was attending the Butrans program he said no.
PPLPMDL0020000001	Tallmadge	OH	44278	8/21/2014	Told dr at front counter that he needs to take a closer look at patients who may need more than what hydrocodone can offer. I told him he has two viable options. OxyContin before moving a patient from hydrocodone to oxycodone and Butrans before hydrocodone from tramadol. Dr said he sees where they should be used and said cost is all he hears about. I told him its all I hear about as well and said he just needs to decide who can afford as little as \$15-20 a month! Dr said ok.
PPLPMDL0020000001	Cleveland	OH	44103	8/21/2014	Reviewed with Amy Rph OxyContin/Butrans Messages,obtained CII protocol,
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/21/2014	Spoke with Jake Sisko and dr sable in hospital about OxyContin and Butrans and specific patient type election.
PPLPMDL0020000001	Stow	OH	44224	8/21/2014	Spoke with dr through the window and told him I needed him to look over the Scott profile because I'm sure he had patients continuing on tramadol who are meeting the Butrans indication. Dr looked at the profile and asked me what dose of Butrans would he start on for a patient over 300mg/day? I reviewed the conversions guide and told him the patient would initiate on the 10mcg dose and told him to ensure he titrates or uses products for breakthrough pain if the patient says its not working well enough. Dr said he thoughts I so because he may have a patient for it. I told him to also please continue looking for candidates for OxyContin. Dr said he refers problem Percocet patients to pain management.
PPLPMDL0020000001	Tallmadge	OH	44278	8/21/2014	I asked dr if he has patients currently on IR opioids like Norco or Percocet? Dr said not many because he doesn't like treating pain. I asked him if any of those patients take it on a daily basis? Dr said maybe two or three. I told hi. When his patients are taking IR opioids daily and around the clock they are meeting an ER opioid indication like OxyContin or Butrans. I explained where to use OxyContin and its selling attributes. I did the same for Butrans and asked him if it makes sense to move to an ER opioid once a patient use using an IR opioid around he clock?
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	8/21/2014	Discussed OxyContin and Butrans with Andy the pharmacist. I reviewed the revised indications and Andy asked me how he can find out if a patient is going to pain management? I asked why he needs to know and Andy said that he has a patient takin OxyContin 80mg q12 and a 40mg q12 every day and just thinks the patient should have a specialist. I asked who the pcpi is and didn't know who it is. I told Andy to just ask the patient. Discussed OxyContin conversions and dosing. Discussed Butrans Scott profile and additional patient types.
PPLPMDL0020000001	Westlake	OH	44145	8/21/2014	Something to think about: that chronic pain patient needing a change...OxyContin dosed every 12 hours and Butrans weekly. I invited to the Butrans program and he said maybe.
PPLPMDL0020000001	Westlake	OH	44145	8/21/2014	Pharmacist told me that hydrocodone combo products are going schedule too in a few months. I asked why. She didn't know. We talked about the reformulation of OxyContin and dosing. We also talked about Butrans scheduling and patch dosing and placement.<font color=blue><b>CHUDAKOB's query on 08/27/2014</b></font>-Lisa, what did you discuss in relation to the reformulation of OxyContin?<font color=green><b>BARTOLI's response on 08/28/2014</b></font>-Highlighted sections from The core visual aid pages 14 and 15. Talked about FDA draft guidance, that oxycontin was still abusable...yet reviewed tier 1 and 3 of OxyContin visual aid.<font color=blue><b>CHUDAKOB added notes on 08/29/2014</b></font>-Thank you for the clarification.
PPLPMDL0020000001	Cleveland	OH	44103	8/21/2014	Reviewed OxyContin 7 tablet strengths every 12hours along with Butrans for those patients requiring around the clock analgesia, Said Ok No new info learned
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/21/2014	Saw dr in hospital with Jake Sisko. I told dr sable to keep things moving with Butrans and to continue to expand his use in the Medicare population. Dr said he already write it for his little old ladies and it works great. I told him that's good to hear and reminded him of the Medicare D coverage. Asked dr to please also use OxyContin as that q12 ER option.
PPLPMDL0020000001	Cleveland	OH	44195	8/21/2014	Quick review of OxyContin every 12hours, 7 tablet strengths along with Butrans for those patients requiring around the clock analgesia, Said he will consider, Talk with Dalbir PA, asked Denise for assistance in reminding and Book appt
PPLPMDL0020000001	Cleveland	OH	44113	8/22/2014	Quick review with Cecelia Rph mgr, OxyContin Q12h abuse deterrent characteristics along with Butrans for those patients requiring around the clock analgesia, Said Ok inquired about formulary, talk with Mike Hoying
PPLPMDL0020000001	Cleveland	OH	44113	8/22/2014	Reviewed OxyContin every 12hours, 7 tablet strengths along with Butrans and Med D formulary opportunities for those patients requiring around the clock analgesia, Said Ok will continue to prescribe for appropriate patients, Nothing new learned
PPLPMDL0020000001	Cleveland	OH	44113	8/22/2014	Reviewed Butrans for those patients failing on Norco, that are requiring around the clock analgesia, OTC sample Said she will continue prescribe for appropriate patients
PPLPMDL0020000001	Westlake	OH	44145	8/22/2014	Talked about the FDA insight and reformulation of OxyContin, mreviewed dosing and strengths. Highlighted scheduling of Butrans, patch placement and breakthrough medications.
PPLPMDL0020000001	Uniontown	OH	44685	8/22/2014	Spoke with Danielle the pharmacist. Discussed with her the insight about oxycodone and Danielle started to laugh. I asked her what's so funny and she said that opioids are way over prescribed. I told her that may be true but asked her if she agrees that many patients on opioids wither short term or long term don't take accountability for their pain and do what's necessary beyond pharmaceuticals Danielle agreed and said the indication will continue to make physicians over prescribe. Discussed Butrans schedule 3,7 day controlled release patch, multiple patches and patient types.
PPLPMDL0020000001	Stow	OH	44224	8/22/2014	Reviewed the Butrans Scott profile and asked him how his experience have been with Butrans since I saw him last? Dr said he continues to try and find places for it and just hasn't seen many outiwns recently with pain. I told dr to review his existing patients with pain on products like tramadol. Dr said ok. Reviewed Medicare coverage. Discussed OxyContin attributes and patient types.
PPLPMDL0020000001	akron	OH	44333	8/22/2014	Dr spoke with me about a patient he recently switched from oxycodone plain to OxyContin. Dr said that the patient is suffering from chronic low back pain and hip dislasia and has been taking oxycodone for man yep years and up to 6-7 pills a day. Dr said he had no choice to make sure he was taking it twice a day. Dr said insurance was not an issue. Discussed OxyContin opportunities he will have in his practice, dr said he is very choosy as to who he puts on narcotics. I told dr I would expect nothing less and he should choose his patients very selectively. Reviewed Butrans initiation and titration guide.
PPLPMDL0020000001	Cleveland	OH	44113	8/22/2014	Visited Ortho/Pain dept (Shen,Novak,Daoud,Bohl,Bilfield,Nouradini) OxyContin/Butrans Initiation/Titration
PPLPMDL0020000001	Akron	OH	44310	8/22/2014	Spoke with Steve the pharmacist and reviewed key selling attributes for OxyContin and Butrans. Steve said he didn't have time to talk so I left him with OxyContin conversion and titration guide and Butrans Scott profile.

	Parma	OH	44129	8/22/2014	Doctor just came back from vacation, didn't have time today. Quick intro about new position. He said good luck with that. Left the dosing and titration guides and told him we can discuss his patients in around the clock pain and why butrans or OxyContin might be appropriate for many of them. He agreed that there is a place for OxyContin.<font color=blue><b>CHUDAKOB's query on 08/29/2014</b></font>Kathy, looking at your next call objective, you used the word optimal. While it is a next call objective, be careful of this word. It is a comparative word that suggests ER dosing may be better than IR. There is not data to support this. Do you see how this could be misinterpreted?<font color=green><b>LARAWKA's response on 09/03/2014</b></font>Then I should have said why ER might be an appropriate option.<font color=blue><b>CHUDAKOB added notes on 09/16/2014</b></font>Or just an option. They are all appropriate options.
PPLPMDL0020000001	Parma	OH	44129	8/22/2014	Doctor says she tries to Avoid treating pain. Sometime she has no choice. She has put a few patients on OxyContin but has not initiated Butrans. she has inherited a couple of Butrans patients. She'll always start with Percocet or Vicodin and then eventually maybe to OxyContin. I asked the doctor to think about a couple of patients in her practice that have around-the-clock pain. When thinking about initiating therapy could she think about OxyContin 10 twice a day as appropriate for those patients rather than treating in 4 to 6 hour increments? She agreed that it seems reasonable and will think about it. And then discussed the appropriate Butrans patient as being a patient who is starting to take more tramadol, or An opioid n/rve patient. I reviewed titration options, dosing and that Butrans is appropriate for patients with mild renal or hepatic impairment. She asked where fentanyl fits in and I explained that patient is beyond the Butrans patient. Left the butrans titration guide to discuss further next time.<font color=blue><b>CHUDAKOB's query on 08/29/2014</b></font>Kathy, Butrans is appropriate for any renal impairment, not just mild renal impairment.<font color=green><b>LARAWKA's response on 09/03/2014</b></font>Yes. Thanks.<font color=blue><b>CHUDAKOB closed the query on
PPLPMDL0020000001	Cleveland	OH	44115	8/22/2014	Visited Pain Dept (Nickels) Butrans/OxyContin Initiation/Titration along with Pharmacy call(Dave Bradupest) Pharm Dir
PPLPMDL0020000001	Cleveland	OH	44115	8/22/2014	Visited Pharm. Dept. Requested appt with Jodi Clinical Rph, OxyContin/Butrans Initiation/Titration guides
	Hudson	OH	44236	8/22/2014	Spoke with dr through window and told him that OxyContin can be the solution his patients are looking for when they are already on the molecule but taking 4-6 times a day. Dr said he knows but Percocet is so much cheaper. I asked him how he knows? Dr said his patients tell him all the time and he has to believe them. I told him he doesn't have to and to just offer a different delivery system. Reminded him to please try Butrans and reviewed initiation and titration guide.
PPLPMDL0020000001	Akron	OH	44319	8/22/2014	Dr said he hasn't seen a Purdue rep in many years and forgot OxyContin is a Purdue product. I reviewed OxyContin dosing and discussed flexibility of dosing, q12 hour dosing and discussed oxycodone insight. I asked dr if he has any patients that are taking an IR opioid daily and around the clock and still have pain? Dr said yes. I asked him if it would make sense to convert those patients to OxyContin q12 the single entity ER oxycodone? Dr said yes. Discussed the abuse deterrent characteristics for OxyContin and if he knew if was reformulated in 2010? Dr said yes. Introduced Butrans for the first time discussed all key selling attributes, dosing, conversions and patient types with Scott. I asked him if he would see Butrans as a viable option for him when a patient on tramadol wants more and is already taking 3+ pills a day? Dr said it would be like a good product. Told dr I will follow
PPLPMDL0020000001	Akron	OH	44310	8/22/2014	Told dr about the oxycodone insight and ask him if he has patients already continuing on Percocet who may be appropriate for q12 oxycodone? Dr said he wants to do everything he can to reduce the amount of opioids he prescribes. Dr said he can't remember the last time he had a new patient on an opioid. I told him I think he's used Butrans? Dr said he has done that. I asked him why Butrans? Dr said he likes the idea of a week long patch and the dosing is low. I told him I'm glad he feels that way and asked him to use more when his patients on tramadol or Norco are taking them on a daily around the clock basis. Dr said he will.
PPLPMDL0020000001	Westlake	OH	44145	8/22/2014	Talked about OxyContin scheduling and FDA insight and reformulation and dosing. Talked about the Butrans program, he will like to attend but works late.talked about dosing and dosages of Butrans, talked managed care and refills. Talked about why dose in 4 to 6 hour increments when there are chronic opioid option like oxycotin and Butrans.
PPLPMDL0020000001	North Olmstead	OH	44070	8/22/2014	Talked about opioids being doses in 4 to 6 hour increments when there are options for control release like OxyContin or Butrans for chronic pain patients. Reviewed FDA insight and talked about reformulation. And the ten mg dose of OxyContin. Dr asked about Butrans dosing and managed care. Dr asked me to sign him up for the Butrans program. Dr works with then residents.
PPLPMDL0020000001	Akron	OH	44319	8/22/2014	I asked dr if there is a way that the staff can flag charts someone for patients either already on oxycodone but taking it q4, q6 or even those that are currently taking multiple pills per day for 3+ months? Dr said maybe and he will take to th office manager when he has time. I told him that's great to hear because it may bring to light patients who may be appropriate for OxyContin or Butrans.
PPLPMDL0020000001	Cleveland	OH	44113	8/22/2014	Reviewed OxyContin abuse deterrent characteristics every 12hours, 7tablet strengths along with Butrans for those Med D patients requiring around the clock analgesia, 7day transdermal, Said Ok will consider for appropriate patients,
PPLPMDL0020000001	Cleveland	OH	44113	8/22/2014	Reviewed OxyContin abuse deterrent characteristics every 12hours, 7tablet strengths, along with Butrans for those patients requiring around the clock analgesia that are failing on present therapy. Said He will continue reminding Dr.Shen/Daoud when applicable
PPLPMDL0020000001	Uniontown	OH	44685	8/22/2014	Quick hello at counter while speaking with the office manager Judy. I asked dr Wynne to please focus on patients for OxyContin who are taking Norco or Percocet daily and around the clock for 3+ months or more. Told her Butrans continues to be an option for her patients needing more tramadol. Nothing else learned. Office not scheduling any time to meet with all physicians until the end of September.
PPLPMDL0020000001	Akron	OH	44304	8/25/2014	Told dr the insight about oxycodone and ask him if he has any patients like that? Dr said probably. I asked him if he would reevaluate his patients already on the oxycodone molecule and convert them to the q13 OxyContin. Dr said ok. Reviewed the Butrans initiation and titration guide.
PPLPMDL0020000001	Cleveland	OH	44109	8/25/2014	Reviewed with Mana OxyContin abuse deterrent characteristics along with Butrans Initiation/Titration, Still seeing majority from Nickels,Tryon,Torres. CII protocol info
PPLPMDL0020000001	Field Hts	OH	44125	8/25/2014	Reviewed OxyContin 7tablet strengths, along with Butrans for those patients requiring around the clock analgesia, Savings cards and Med Formulary grid, Said ok will continue to look for appropriate patients
PPLPMDL0020000001	Fairlawn	OH	44333	8/25/2014	Spoke with Gilbert about OxyContin prescribers in the territory. Gilbert said that he is seeing more from comprehensive pain management recently specifically dr Wynne. I asked him if she is titrating or refilling? Gilbert said some of each. I discussed commercial coverage and asked him to continue handing out the copay cards. Gilbert said he's been doing it. Reviewed Butrans appropriate patient types and indications.
PPLPMDL0020000001	Uniontown	OH	44685	8/25/2014	Dr asked me how OxyContin should be dosed? I told dr q12h and asked why? Dr said he got a new patient recently who was taking it q8. I asked if it was prescribed by a pain specialist and he said no. I asked him if he was going to leave the patient on OxyContin and just change the dosing frequency? Dr said he's not sure yet. I told him he can titrate every 1-2 days and supplement with IR opioids as necessary. Told dr to please continue identifying appropriate patients for Butrans and to look over his existing patients on tramadol around the clock. Dr said ok.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	8/25/2014	Dr told me that he is splitting off from his practice and joining the Spine and Pain Institute with drs Mehta, Vucetic and Goldner. Dr said he will be starting sometime in early September. Led off with the oxycodone insight and then the hydrococone one. I reviewed the OxyContin conversion and titration guide, appropriate patients and start principle. Dr said that he understands that patients should be on some type of ER opioid if they need something for pain every day. Reviewed the Butrans initiation and titration guide and Scott profile.
PPLPMDL0020000001	Cleveland	OH	44113	8/25/2014	Reviewed Butrans for those Med D patients that are requiring around the clock analgesia along with OxyContin abuse deterrent characteristics every 12hours, Said Ok will continue to prescribe for appropriate patients
PPLPMDL0020000001	Akron	OH	44313	8/25/2014	Spoke with josh pharmacist about OxyContin attributes and conversions. Discussed with him proper dosing and titration. Josh told me that they have been seeing more q8 dosing recently. I asked him what the protocol is when they see anything. Other than q12? Josh said that he calls the office to understand why it's been dosed a certain way. Josh said he usually fills it. I asked if they are pain drs and he said most are but some are not.
PPLPMDL0020000001	Akron	OH	44312	8/25/2014	Reviewed copy cards for both products and new indications for each along with Butrans attributes and multiple patches.
PPLPMDL0020000001	Akron	OH	44312	8/25/2014	Spoke with Adam the technician. Discussed OxyContin dosing flexibility and q12. Reviewed indication and conversions from Percocet. Discussed Butrans indication,schedule 3,7 day transdermal system, multiple patch use and conversions. Adam said she will pass along the conversion and titration guides to the pharmacist.
PPLPMDL0020000001	Parma	OH	44129	8/25/2014	Briefly talked with Danielle the pharmacist about her thoughts about what she is hearing from her pain patients and wondering about the patients that are taking more and more IR, and when they really should be on an extended release opioids. She feels that many want to refill their prescriptions early and take the doses more frequently than recommended by their physicians. She does contact physicians when she feels they are starting to take too much. She doesn't see much butrans but is comfortable with dosing/placement/titration.
PPLPMDL0020000001	Mogadore	OH	44260	8/25/2014	I asked Cassandra up front to see dr and she said he's too busy on a Monday morning then he walked up to the front desk. I told dr to focus on patients who need more tramadol and are in pain around the clock and to forus on commercial insurance. Dr said that's about all his can write it for because branded medicines for Medicare and Medicaid are so difficult. I asked him to find more opportunities and to please remember OxyContin of those who he is considering putting on Percocet from Norco. Dr said ok. Nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44103	8/25/2014	Reviewed with Eboney Rptech OxyContin abuse deterrent characteristics along with Butrans for those patients requiring around the clock analgesia. Said she will relay the info. Pharm Mgr Dave order CII's
PPLPMDL0020000001	Cleveland	OH	44113	8/25/2014	Reviewed OxyContin abuse deterrent characteristics every 12hours along with Butrans for those patients failing on present therapy requiring around the clock analgesia, Said Ok will consider,Nothing new learned
PPLPMDL0020000001	Cleveland	OH	44195	8/25/2014	Reviewed OxyContin 7tablet strengths every 12hours along with Butrans for those patients requiring around the clock analgesia, Said Ok, refers out to pain mgmnt,no further info learnedPatty Paczos-PA
PPLPMDL0020000001	Cleveland	OH	44113	8/25/2014	Reviewed OxyContin abuse deterrent characteristics, 7 tablet strengths along with Butrans for those patients requiring around the clock analgesia, Said she will keep it mind, Wants to set up appt with program dir. Will be in contact
PPLPMDL0020000001	Parma	OH	44129	8/26/2014	Reviewed patient profile Scott, Doctor Chagin said he sees patients like that but would refer to pain management if they need more than 4 pills per day. He avoids extended release opioids because of too much scrutiny. He said he is more comfortable with extend release for older patients. Admitted that there might be a few patients in his practice he can imagine prescribing butrans. He promises to get experience with it. Briefly mentioned the Norco patient that needs titrating, rather than going to Percocet, consider q12 OxyContin.
PPLPMDL0020000001	Cleveland	OH	44130	8/26/2014	Discussed butrans 7 day dosing and titration options. Pulled thru med d formulary and left oxycontin abuse deterrent study.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	8/26/2014	Discussed OxyContin and Butrans with the pharmacist Matt. Reviewed OxyContin abuse deterrent characteristics, attributes, conversions and appropriate patient types. Reviewed Butrans initiation and titration guide.
PPLPMDL0020000001	Parma	OH	44134	8/26/2014	Dropped off the savings cards the doctor has been waiting for. He reiterated how much his patients benefit from butrans. He wanted to know if managed care will approve 2x20 mcg. Told him they will not because the maximum dose recommended for any patient is 20 mcg. Said he still is not prescribing much oxycontin, we reminded him to choose oxycontin for appropriate patients instead of increasing dose of 4-6 hour IR opioids.
PPLPMDL0020000001	Cleveland	OH	44113	8/26/2014	Quick review of Butrans for those patients requiring around the clock analgesia, Initiation/Titration along with OxyContin every 12hours, abuse deterrent characteristics, Said Ok will continue to prescribe for appropriate
PPLPMDL0020000001	E Cleveland	OH	44112	8/26/2014	Reviewed OxyContin abuse deterrent characteristics every 12hours along with Butrans for those patients requiring around the clock analgesia that are failing on present therapy, Initiation/Titration, Said Ok will consider for appropriate patients. Deferred to Marcy for appt. Booked
PPLPMDL0020000001	Cleveland	OH	44113	8/26/2014	Quick Butrans review for those patients failing on Norco that are requiring around the clock analgesia, Dr. Nickels said they continue to find appropriate patients for Butrans. Intro to new NP Dawn<font color=blue><b>CHUDAKOB's query on 09/03/2014</b></font>Mark, I am confused on this call. It is to Linda I presume, but the call note says Dr. Nickels will continue to find appropriate patients. What am I missing?<font color=green><b>GUTKOMA's response on 09/06/2014</b></font>He was standing there with Linda and Dawn and he said collectively they will continue to prescribe for appropriate patients.<font color=blue><b>CHUDAKOB added notes on 09/16/2014</b></font>I see. I would include this in his call, and not in theirs. I am guessing you entered a call on him as well?
PPLPMDL0020000001	Cleveland	OH	44113	8/26/2014	Reviewed OxyContin CII, abuse deterrent characteristics every 12hours along with Butrans for those Norco failures requiring around the clock analgesia, Med D coverage, Said he will continue to RX for appropriate patients
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/26/2014	Dr told me that Liz is doing a prior authorization for OxyContin for a patient who has workmans compensation. I asked if its a new patient and he said he recently got a patient that came in on Opana ER and h will not refill it. I askd why and he said he won't write it. I told dr that's good news and asked which dose of OxyContin he said 40mg. I asked Liz to keep me updated on the prior authorization. Reminded dr to use Butrans for those on Norco around the clock.
PPLPMDL0020000001	Parma	OH	44129	8/26/2014	She believes in OxyContin and Oxycodone and keeping pain management simple. She doesn't feel that her patients benefit from combo products with an NSAID. She feels that her patients pain is beyond what, butrans can
PPLPMDL0020000001	Cleveland	OH	44113	8/26/2014	Intro. Butrans CII,7 day transdermal, Initiation/Titration, Savings cards, Patient info booklets,Med D coverage for those patients requiring around the clock analgesia, Reviewed OxyContin abuse deterrent characteristics every 12hours, Said Ok will consider Butrans when she begins seeing patients solely in 2 weeks,

PPLPMDL0020000001	Cleveland	OH	44113	8/26/2014	Left OxyContin/Butrans Initiation/Titration guides, No new info learned
PPLPMDL0020000001	East Cleveland	OH	44112	8/26/2014	Reviewed with Latoya Rph OxyContin/Butrans Initiation/Titration Med D coverage, CII protocol. Nothing new learned
	Euclid	OH	44117	8/26/2014	Met with OM, discussed PAP pieces available including PAP 9/14 brochures and protect your meds @ home brochure. Discussed options for pain: OxyContin, CII, dosed q12 h, and Butrans, CIII, 1x week patch: both indicated for long term pain (verbatim indication)
PPLPMDL0020000001					
PPLPMDL0020000001	Cleveland	OH	44113	8/26/2014	Reviewed Butrans for those Tramadol failures requiring around the clock analgesia, Med D coverage, Said Ok, but sends to pain mgmnt after Tramadol, Nothing new learned
PPLPMDL0020000001	Middleburg Hts	OH	44130	8/26/2014	Tying to get into to see Doctor and nurse practitioner so left savings cards for both products, left abuse deterrent study information.
PPLPMDL0020000001	Garfield Heights	OH	44125	8/27/2014	Reviewed OxyContin every 12hours along with Butrans for those Tramadol failures requiring around the clock analgesia, Said Ok, Not seeing any Butrans, some OxyContin,
PPLPMDL0020000001	Cleveland	OH	44195	8/27/2014	Reviewed OxyContin abuse deterrent characteristics every 12hours along with Butrans, 7 day transdermal, Initiation/Titration,PI, Said Ok will consider for appropriate patients, PA- prescribes.
PPLPMDL0020000001	Cleveland	OH	44195	8/27/2014	Reviewed OxyContin every 12hours, 7 tablet strengths along with Butrans for those patients requiring around the clock analgesia, Said Ok will continue to prescribe for appropriate patients, Will be attending program
PPLPMDL0020000001	Westlake	OH	44145	8/27/2014	Talked to vicki about oxycontin and if she was going to be initiating it with out dr approval this year? She was uncertain but thought not, she said she usually just does the refills. Talked about the dosing and reviewed the managed care. Talked about butrans dosing and patch location. Talked about appropriate patient types and coverage on med d plans and caresource to name a few.
PPLPMDL0020000001	Westlake	OH	44145	8/27/2014	highlighted the dosing and the patch location. reviewed being able to use break thru medications and med d coverage. Touched on attributes of butrans: no dose adju for elderly,doesn't go thru first pass to name a few. And then invited to the program, which he said no cause of time. Highlighted I had oxycontin, dr said he won't write it that he tends to stay away from most chronic pain medications but likes butrans because no one knows the name and its dosed weekly.
PPLPMDL0020000001	Westlake	OH	44145	8/27/2014	Talked about Butrans- my visit talking with the hospital director about getting butrans on formulary. Rrahana patel told me to have the dr call her directly to set up a meeting to discuss getting it on formulary. Talked about the residents coming to the butrans program and asked if he could come. he said maybe. I asked him what information do you teach them about butrans? Dr highlighted a few attributrs. I said you sound pretty passionate about butrans are you like that with all the opioids you talk about or is butrans special? Dr said he thinks butrans ia a great product. I said where do you place it. Dr said after hydrocodone. I said thats great. what about after tramadol? he said maybe but usually he will turn to norco first I asked why and he said he just does. I said ok...thinkk about this tomorrow. before you add the 3rd or 4th dose to their opioid schedule ask your self are dosing them atc. if the answer is yes...then why not give them an option like butrans that can be dosed less frequently. weekly. Dr started to talk cost and managed care and i stoppep him and said do you have caresource. he said yes. I said-then you give all these types of patientsw to butrans that have caresource...and explained the pa and coverage. dr said he will think about it. highlighted oxycontin reformulation and dosing.<font color=
PPLPMDL0020000001	Munroe Falls	OH	44262	8/27/2014	blue><b>CHUDAKOB's query on 09/03/2014</b></font>Lisa, this looks likes some good constructive tension occurred. Nice job. Be careful about statements like "If the answer is yes...then why not give them an option like butrans that can be dosed less frequently. weekly." This implies a comparison of dosing frequency between Butrans and hydrocodone. The word less is a comparative word. Be sure you are just stating facts. Does this make sense?<font color=green><b>BARTOLI's response on 09/08/2014</b></font>Good point. Yes. I will be more careful in the future.<font color=blue><b>CHUDAKOB added notes on 09/16/2014</b></font>Thank you!
PPLPMDL0020000001					I asked dr how she decides to use which narcotics? I asked dr for what conditions would she use dialuadiol or methadone? Dr said she would use dialuadiol for a type of internal pain and OxyContin for bone pain like osteoporosis. I asked dr how long she's been practicing and she said 27 years. I told her about the Medicare i insight and asked her if these patients are just used to taking products as well like vicoden or Percocet. Dr said it for sure is a psychological issue for many outwits and she needs to do a better job identifying patients for OxyContin and Butrans. I reviewed patient types for each and told her to expand her use of OxyContin also for patients who can't tolerate IR opioids.
PPLPMDL0020000001	North Olmstead	OH	44070	8/27/2014	Talked to this dr along with the residents today. talked oxycontin dosing and when dosed. reviewed indication of both oxycontin and butrans. reviewed the date of the Butrans program. And highlighted some points from the naive study. pain results and types of patients involved in the study. Reviewed dosing. Dr said it was interesting and he would like to attend the program for butrans
PPLPMDL0020000001	Bedford	OH	44146	8/27/2014	Quick introductory meeting. He wanted to make sure he had savings coupons for both products at all of his locations. He told me that I know he likes my products, has been getting more pushback lately though. He couldn't give me specifics right now because he was in a hurry but I scheduled a lunch with him for more time. I did pull though the med d formulary win for butrans and UHC prior auth for OxyContin which I also discussed with
PPLPMDL0020000001	westlake	OH	44145	8/27/2014	Talked about oxycontin and butrans scheduling. dr said he doesn't have much experience with opioids other than a rotation recently. He knew of oxycontin, I asked how many doses it had and if he knew when its dosed? Dr said he had no idea about the dosages but every 8 or 12 hours. I said actually its just every 12 hours, its control released. We talked about supplemental use and titration. We talked about the butrans program and the scheduling and patch locations and how to start a patient. he might attend the butrans program to follow up on that.
PPLPMDL0020000001	westlake	OH	44145	8/27/2014	Talked about scheduling of oxycontin and butrans. highlighted the fda insight and the reformulation using the core visual aid as reference. Talked about abuse potential and limitations of use. Reviewed dosing. Asked why drs would choose to dose in 4 to 6 hour increments for a chronic pain disorder when they could choose a control rlease option every 12 hrs lurs like oxycontin or weekly like butrans. he said habit or cost. I asked at what point is it worth it to break a habit? Dr didn't answer just smiled. Reviewed the 10mg of oxycontin and the study section of the oxycontin fpi. Dr was not aware of the doses available for oxycontin. reviewed titration and half life vs. oxycodone as referenced in 12.3 of fpi. Talked about options. Reviewed butrans. dosing and who might want an option like this? Dr said maybe those who don't want to swallow pills. Talked about where to apply the patch and how to start butrans, including steady state and covering supplement use. invited to program which he is trying to attend.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/27/2014	I told dr about the baby boomers insight and oxycodone insights. Dr asked me if I am the rep who has OxyContin and Butrans? I told him I am. Dr said he wanted to speak with me in his office. Dr said that he needs a refresher on OxyContin doses and when he can titrate. Dr said he also wants a refresher on Butrans because he wanted to talk to a patient about it the other day and couldn't remember much about it. I reviewed the OxyContin Dosing, conversion from Percocet and titration. I asked dr if he would use it after Norco? Dr said sometimes but he might want to use Butrans. Dr asked about when to use it, conversions and steady state. I gave dr the initiation and titration guide and asked him to use it as reference then reviewed the Scott profile. Dr said his parts keep wanting more by vicoden or Percocet and Butrans would be good because its a schedule 3 and lasts for 7 days. I told dr to reserve OxyContin for his patients already on the molecule. Dr said he agrees. Dr asked if I could go to speak to some of his nursing staff and educate them on pain management and my products.
PPLPMDL0020000001	Stow	OH	44224	8/27/2014	Caught dr in hallway of stow office. Dr asked what's new. I told him about the oxycodone insight and asked him if he's got patients in a similar situation? Dr said he probably does. I asked him to pleas reevaluate them as possible candidates for a delivery system change to q12 with oxycodone. Dr said ok. I told him to please continue identifying patients for Butrans and reviewed initiation and titration guide.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	8/27/2014	Spoke with dale the pharmacist. Discussed Butrans Scott profile and the need for an ER opioid when the patient is needing something for pain daily and around the clock. Dale agreed and said he sees way too many short acting being refilled often. I asked if he has ever asked a patient to speak with their dr about a long acting option? Dale said he has but they usually don't end up getting it. Reviewed OxyContin dosing, conversions and copy
PPLPMDL0020000001	Akron	OH	44313	8/27/2014	Told dr about the IR oxycodone insight and asked him if he has any patients that may meet that similar profile? Dr said ok. I asked him if he has patients that continue to be refilled on with their oxycodone? Dr said yes and said but those patients have trouble with cost and must be on a generic medicine. I asked him if he has patients with private insurance that are working? Dr said some. I told dr to focus on those for OxyContin. Dr said ok. I told him to please continue looking for patients for Butrans and to focus on Caresource, private and Medicare insurance.
PPLPMDL0020000001	Cleveland	OH	44113	8/27/2014	Quick Review of OxyContin every 12hours, 7 tablet strengths along with Butrans for those patients requiring around the clock analgesia, Said Ok will consider but is sending patients to pain mgmnt
PPLPMDL0020000001	Copley	OH	44321	8/27/2014	Discussed key selling attributes for OxyContin and Butrans with the technician Steve. Steve said that he has seen a couple of Butrans prescriptions and does dispense OxyContin. Discussed copay cards and insurance coverage for both products.
PPLPMDL0020000001	Mayfield Heights	OH	44124	8/27/2014	Met newest pharmacist, Natalia (there almost 6ms) Discussed OxyContin scheduling, strengths, dosing every 12 hours, 8 am, 8 pm. Natalia sees scripts coming from Hillcrest Pain Specialty, Laham group. She could not think of anyone else "off top of her head." Discussed Butrans, which Natalia confirms, they dispense. Discussed scheduling, dosing, 1x week patch. Left 1 Butrans patient guide, went through each page, asked her to place on shelf with product which she agreed. Asked if she had any questions/comments for me? Anything I can do for her? Not at this time she replied. Told her about 9/14 PAP month, left 1 brochure. Left 1 RX Patrol flashcard.
PPLPMDL0020000001	Mayfield Heights	OH	44124	8/27/2014	Dr Leizman's regular med asst took me back to Gina's private office. Met briefly with Gina. She states she feels guilty when I have asked to see her or PA-C Frank in the past, and they just don't have even a few mts to stop and talk. She said a 1x month or 2x month visit at best is ok with them; she says 1x week is too much! Discussed Butrans as single entity, 1x week matrix technology patch (not a reservoir), dosing flexibility. Gina says now that Vicodin is schedule II, that I should expect her and Frank and practice overall, to write much more Butrans, because it can be called/faxed in. Because they are so busy, having a product they can call in is very convenient for them she says. When Butrans not appropriate; you have OxyContin as an option as well. Med D pull through. Let Gina know I left 5 more Butrans patient guides up front with Denise.
PPLPMDL0020000001	Cleveland	OH	44195	8/27/2014	Reviewed OxyContin every 12hours, 7 tablet strengths along with Butrans for those patients requiring around the clock analgesia, Said Ok will keep in mind as he transitions to new role, nothing new learned
PPLPMDL0020000001	Lyndhurst	OH	44124	8/27/2014	Met w dr Goldner med asst Amy at front window. Dr Goldner had meeting. left at 1 pm. She says best days are Mon and Tues at this location (clinicals) Wed = procedures all day/super busy. Note: Every other FRI at this location as well.(2x month) Discussed OxyContin, Butrans and both single entity, ER opioids for patients that need indication. Asked her to check savings card supply, both products, she came out into patient area, and stated they have good supply right now. Left PAP 9/14 brochures, told Amy I'd like to get Dr. Goldner permission to place at patient check out.
PPLPMDL0020000001	Westlake	OH	44145	8/27/2014	I asked him if he ever thinks about the 10mgs of oxycontin for patients? He said sometimes. I pointed out opioid naive and dosing schedule of oxycontin. we talked about the upcoming butrans program. dr said he is working so late. I informed him that he might get dinner if he shows up late. Dr said he wanted to go if the residents were going.<font color=blue><b>CHUDAKOB added notes on 09/03/2014</b></font>Lisa, I believe we discussed this, but physicians that show up more than about 10 minutes late will not be admitted to the program.
PPLPMDL0020000001	Mayfield Hts	OH	44124	8/27/2014	Total office call. OM let me place PAP 2014 brchures on table w HCP bios at check in. Left Butrans patient guides w Denise @ patient check out. Left patient guides @ check out as well. Because Vicodin is CII, states Dr. Laham, he will be using Butrans more, because of the convenience of being able to call in - especially if they're busy in the OR, at hospital, etc. when Butrans not appropriate, Dr Laham, yet patient still needs ER opioid, please write OxyContin before Percocet. Ok, I must get back to patients in OR. (note; when they say "OR" it does not mean hospital, it means in their office OR, doing procedures.)
PPLPMDL0020000001	Garfield Hts	OH	44125	8/27/2014	Reviewed with Rebecca OxyContin abuse deterrent characteristics, Butrans 7 day transdermal for those patients requiring around the clock analgesia, Said Ok
PPLPMDL0020000001	Cleveland	OH	44125	8/27/2014	Reviewed OxyContin abuse deterrent characteristics every 12 hours along with. Butrans for those Tramadol failures requiring around the clock analgesia, said he will consider, follow up on Friday , Savings Cards
	Fairlawn	OH	44333	8/27/2014	I told dr about the IR oxycodone insight and then asked him how long he believes a patient should be on a IR opioid for pain? Dr laughed and said he knows they are kept on them too long and said he's guilty of it as well. I told him I understand and that he can change that by being writing an ER opioid like OxyContin or Butrans at the first sign of a patient being in around the clock pain. Dr said he knows and is now pretty much required to refer to pain management. I asked him at what time is that in the treatment plan? Dr said it depends on the patient but tries to do it earlier and earlier. I asked him to refer a patient to pain specialty on an ER vs an IR opioid and please the specialist! Dr said he will try.
PPLPMDL0020000001	Lyndhurst	OH	44124	8/27/2014	Dr Reed running behind. Met with med asst @ front window. Let her know my goal is to get Dr. Reed to consider an ER opioid when patient meets indication and fails on migraine med/botoz treatment. Two options: OxyContin, CII, oral tablets dosed every 12 hours, 8 am and 8 pm. Butrans, 1x week, patch, CIII, can be called/faxed in. Left PAP 9/14 brochures, I would like to get Dr. Reed permission to place brochures @ patient check out. Med D pull through.
PPLPMDL0020000001	Mayfield Heights	OH	44124	8/27/2014	Left info for Frank with Gina. She will discuss with Frank. Discussed page 7, Figure B, Butrans patient guide. Med D pull through, BWC, Medicaid with prior auth. Gina states they are so busy, it's best to stop in just 1x month or 2x month at best. They feel guilty when I ask to speak w them, and they cannot take a few seconds to see me. told her my visits are also concentrated on Total Office Call: meeting with OM, prior auth coordinator, leaving patient education etc.
PPLPMDL0020000001					



PPMPMDL0020000001	Akron	OH	44333	8/27/2014	Dr just moved into new office yesterday. Dr said he has procedures scheduled tomorrow and is very busy getting the office ready. I told him to please think about using OxyContin instead of refilling IR oxycodone multiple times. Dr said ok. I told him to please think about how Butrans can be a viable option for those patients who are still in pain taking a product like tramadol or Norco around the clock. I told him that BWC is still paying for Butrans. Marsha said that she has told him that 100 times and he continues to forget and writes short acting because they will pay for it.
PPMPMDL0020000001	Cleveland	OH	44130	8/27/2014	Quick call to say hi again, and find out what she believes is the best time to start a patient on ER OxyContin. She says there is a stigma, but from her perspective, patients that are in chronic pain and need it should be on it without worrying about the stigma. She does see a place for it after IR like Norco instead of Percocet....but that's not what people are doing....She feels that butrans is ideal for older patients, but doesn't see much use of it right now<font color=blue><b>CHUDAKOB added notes on 09/03/2014</b></font>-Kathy, you really have to stop entering calls at 1 in the morning. Much better to do after the call both for recall of what happened and for Quick front window. Able to secure lunches with OM. Note: school in session/lunches Mon or Wed NOW. Caught Karen in front area, Karen, for patients who have failed on migraine meds or botox therapy, please consider Butrans OR OxyContin. Left information with OM, including PAP 9/14 brochures.
PPMPMDL0020000001	Lyndhurst	OH	44124	8/27/2014	Quick review of OxyContin every 12hours, 7tablet strengths along with Butrans 7 day transdermal for those patients requiring around the clock analgesia, Said ok nothing new learned
PPMPMDL0020000001	Cleveland	OH	44113	8/27/2014	Reviewed with Floater RPH OxyContin abuse deterrent characteristics every 12hours along with Butrans for those patients requiring around the clock analgesia, Med D formulary
PPMPMDL0020000001	Cleveland Hts	OH	44118	8/28/2014	Just had enough time for an introduction and mention of ER OxyContin and butrans. Have some great information to share with you about finding the right patient who is presently managing their around the clock pain in 4-6 hour increments where it may be worth considering an ER formulation instead. Scheduled a lunch.
PPMPMDL0020000001	Westlake	OH	44145	8/28/2014	Spoke to doctor about Oxycontin scheduling and butrans. Talked about how he treats the patient who has chronic not acute pain with opioids? Dr said he tried not to write any opioid but he said he will write norco three times a day. He said rarely he uses Extended release products. We talked about the appropriate patient and if butran if patient were appropriate would he consider it. Dr said he would, dr said he has written it a few times and has had good luck. I asked what about it did you like. he said the dosing and that it was weekly.
PPMPMDL0020000001	Westlake	OH	44145	8/28/2014	Confirmed her registration for the dinner program for Butrans. She told me that she usually has the doctor write the opioids these days but she makes the recommendations. She said the hospital made the changes to how she can write opioids. I asked what experience does she have with schedule 2 products and she said none really just schedule 3 products. We talked about butrans and patch placement. Along with appropriate patient type. Gave her the opioid experience study and mentioned a few areas of the study. Talked about the oxycontin lowest dose for opioid naive and when its dosed.
PPMPMDL0020000001	Cleveland	OH	44106	8/28/2014	Quick OxyContin 7tablet strengths,Savings Cards along with Butrans for those patients requiring around the clock analgesia, Said Ok will continue to prescribe for appropriate patients
PPMPMDL0020000001	Cuyahoga Falls	OH	44223	8/28/2014	Spoke with Linda Armstrong since she just am back to the pain practice. Discussed OxyContin patient types along with Butrans ones and appropriate patient types.
PPMPMDL0020000001	Cuyahoga Falls	OH	44223	8/28/2014	Linda back into The Center for Pain Management in Cuyahoga falls after leaving for CCF last year. Linda said she will be at the pain conference next week and start seeing patients on 9/8. I discussed OxyContin use in the practice and her role. Discussed OxyContin and Butrans key selling attributes, titration, appropriate patient types and copay cards.
PPMPMDL0020000001	Broadview Hts	OH	44147	8/28/2014	Introduced myself quickly through the window with new position. Told her that I am now speaking the benefits of butrans 7 day transdermal patch and OxyContin. She has virtually no experience with it but doesn't have time right now. Left titration guide and told her an appropriate patient might be the patient needing Tramadol around the clock and rather than increasing pills, a once weekly patch and supplemental analgesia might be appropriate for some of those patients.
PPMPMDL0020000001	Broadview Hts	OH	44147	8/28/2014	Introduced myself quickly through the window with new position. Told her that I am now speaking the benefits of butrans 7 day transdermal patch and OxyContin. She has virtually no experience with it but doesn't have time right now. Left titration guide and told her an appropriate patient might be the patient needing Tramadol around the clock and rather than increasing pills, a once weekly patch and supplemental analgesia might be appropriate for some of those patients.
PPMPMDL0020000001	Parma	OH	44134	8/28/2014	Doctor said he tried butrans once for an older lady and it didn't work. Asked him if he remembers why he chose butrans for that patient? He said because he wanted to cut back on pills the patient was taking. This got us into a discussion about who an appropriate patient might be, by using Scott, and how to make sure patient got to the effective dose. Reviewed indication, strengths, initiation/titration guide, patch placement. He said he could think of a few patients in his practice he might be willing to try butrans. Reviewed oxycontin doses and reviewed reformulated OxyContin quickly, while letting him know that it can still be abused. Pointed out the indications and mentioned the Norco patient that he is considering Percocet, q12 OxyContin May be appropriate.
PPMPMDL0020000001	Cleveland	OH	44112	8/28/2014	Discussed treating around the clock pain in 4-6hr increments, reviewed OxyContin abuse deterrent characteristics every 12hours along with Butrans for those patients requiring around the clock pain.Med D formulary opportunities,asked for those SilverScripts patients Said she will consider for appropriate patients
PPMPMDL0020000001	Cleveland Hts	OH	44118	8/28/2014	Reviewed OxyContin abuse deterrent characteristics every 12hours along with Butrans and Med D formulary opportunities. Said Ok will consider for appropriate patients, Said to book lunch appt with Chi
PPMPMDL0020000001	Cleveland	OH	44106	8/28/2014	Reviewed OxyContin every 12hours, 7tablet strengths along with Butrans Cll for those patients requiring around the clock analgesia, Said Ok continue to consider for appropriate patients, Asked to schedule lunch appt. with
PPMPMDL0020000001	Westlake	OH	44145	8/28/2014	Talked about the Dosing of oxycontin and the lowest dose of 10mg for the product, highlighted a few areas of the fpl like 12.3 where it compares the oxycodone to oxycontin mgs. Invited to Butrans programs and he can't go he will be on vacation. Talked about how his patient is doing he started on butrans and he said he was fine but couldn't remember the details with out checking the file.
PPMPMDL0020000001	Cuyahoga Falls	OH	44221	8/28/2014	Reiterated to dr and Darlene that when she writes Butrans for a Medicaid patient, Caresource is the plan that will be the path of least resistance and explained the prior authorization again. I asked dr if she will just ask the patient which Medicaid plan they have then make the decision for Butrans or not. Dr said ok and said that's for helping her out. I told her to please also think OxyContin for those already on the molecule and want more IR.
PPMPMDL0020000001	Cleveland	OH	44106	8/28/2014	Reviewed with Margie Rph-mgr OxyContin Savings cards along with Butrans Med D formulary opportunities, program invite. Said Ok , Cll protocol
PPMPMDL0020000001	Stow	OH	44224	8/28/2014	Spoke with Carla and Zoe the pharmacists present today. Hosted lunch with the pharmacy and spoke with pharmacists and Andy the student pharmacist about OxyContin and Butrans key attributes, conversions, dosing and appropriate patient types. Zoe said she appreciates the information I provide and they do dispense a lot of Butrans and OxyContin. She told me that they are starting to tell their patients that continue to have the IR opioids refilled to discuss ER options with their physicians.
PPMPMDL0020000001	Westlake	OH	44145	8/28/2014	Talked about dosing with opioids for chronic pain patients with a control release delivery system. Talked about oxycontin and butrans...dosing and touched on med d coverage. Dr said he would attend the program.
PPMPMDL0020000001	BEACHWOOD	OH	44122	8/28/2014	Stock almost everything, usually need one day to order anything not in stock. I asked what she thought might resonate with physicians when talking to them about why they choose an IR for around the clock pain. She feels that physicians write too much IR. Maybe ask the physicians what they think when a pharmacist calls them....she had to leave.
PPMPMDL0020000001	Westlake	OH	44145	8/28/2014	Reminded nurses about scheduling of the products and what it means in terms of refills. Also talked about the butrans upcoming diner program. Daniel the rn said she would pass the information to the doctor
PPMPMDL0020000001	Cuyahoga Falls	OH	44223	8/28/2014	Dr saw me at window and told me he currently has a patient that he's putting. Butrans and needs a copay card. I gave him the copy cards and asked him why he thought of Butrans? Dr said when we spoke last week he agreed to use it more and this patient wanted more vicoden and has good insurance so he wants to give Butrans. Dr said he started on the 5mcg patch for 15mg of vicoden. I told him that's his decision on the 5 or 10mcg. Nothing else learned.
PPMPMDL0020000001	Westlake	OH	44145	8/28/2014	Spoke to Michale and Rhanana the pharmacy director about scheduling of butrans and oxycontin and talked about dosing. We talked about getting butrans on formulary.Rhahana said they do need dr. kabarra to call themand to tell them why they want Butrans on formulary. Discussed attributes of butrans and dosing and elderly profile. invited to dinner program for butrans.
PPMPMDL0020000001	Cuyahoga Falls	OH	44223	8/28/2014	While speaking with Linda Armstrong in the hospital as Ali walked up. I discussed with him patients appropriate for q12 oxycodone outside of the hospital and in his practice. Dr said he knows and likes OxyContin because it works and doesn't think treating chronic pain with Percocet. I asked dr to please continue finding a place for butrans which can be done in the space of tramadol or Norco refills.
PPMPMDL0020000001	Akron	OH	44333	8/28/2014	Elise told me she just saw a patient who she is moving to OxyContin from Percocet. Elise said the patient wanted more and it just made sense to make it q12. I told her I agree and to please continue as I reviewed appropriate oatwints and conversions. Elise said she will be needing to use Percocet for breakthrough. Brittany who does pa's said that she has a prior auth for Butrans for Karen for a patient who has UHC community plan. The patient had failed Norco and Percocet plus NSAIDs. UHC wants patient to use oxymorphone ER, fentanyl and ER morphine. I discussed Butrans with Elise and Caresource pa. I asked her to please continue using and identifying patients on 3-4 prns to trial Butrans.
PPMPMDL0020000001	Akron	OH	44310	8/28/2014	I asked dr if she thinks treating around the clock pain on a daily basis with IR opioids is he most effective way to treat? Dr said sometimes yes but said its really not. I told her the IR oxycodone insight and asked her if she would identify patients appropriate for ER oxycodone? Dr said ok. Gave her the Butrans initiation and titration guide and asked her to ease give it a try after told her about the attributes.
PPMPMDL0020000001	Cuyahoga Falls	OH	44223	8/28/2014	Quick message in hallway and told him I am still Hopi he will see how OxyContin can play a role in his office. I gave him the conversion and titration guide and to please review it. Handed him the Butrans initiation and titration guide and asked for him to just try it clinically.
PPMPMDL0020000001	Independence	OH	44131	8/28/2014	He was in a hurry....as usual....asked dr, when he sees patients with around the clock pain, does he feel those patients should be treated with IR medication or ER? He asked what I promote, told him, it's a tricky subject, he likes them but there is not time to get into it right now. I quickly said that when he has time I would like to talk about a few patient types that might benefit from ER formulations like OxyContin or butrans. Left titration Visited Pain mgmt/Onc. depts OxyContin/Butrans Initiation/Titration along with formulary grids
PPMPMDL0020000001	Cleveland	OH	44106	8/28/2014	Spoke to pharmacist about scheduling of my products. Talked about dosing of oxycontin every 12 hours. Highlighted butrans dosing and where to put the patch and how to discard the patch.
PPMPMDL0020000001	Westlake	OH	44145	8/28/2014	Talked to Alicia who is filling in for the regular pharmacists, Lily and Justin. Their butrans patients know to call them a couple days ahead of time for their prescription. They stock all but 80 of OxyContin. She feels that physicians need to go back to continuing education for pain management because she feels there is a wide misunderstanding of opiates. They write IR when shouldn't and ER when shouldn't.
PPMPMDL0020000001	Parma	OH	44134	8/28/2014	Talked to the dr about upcmoing Butrans program which he said he can't attend he was too busy with the kids sports. We talked about dosing and studies that butrans had that could be reviewed next time in more detail. highlighted the oxycontin 10mg dose- the section 12.2 where it recaps a study involving the 10mg. We talked about managed care and getting butrans on formulary at the hospital. I provided the doctor and the np the name and what information the clinical director at the hospital told me for him to review with them.
PPMPMDL0020000001	C. Falls	OH	44223	8/28/2014	Discussed OxyContin and Butrans to Cindy and the technician about OxyContin indication, dosing, conversions and oxycodone insight. Cindy said most of the time when they see Percocet or Norco the script says take one before of after physician therapy and she's ok with that. Cindy said when patients take it every day multiple times, she tries to encourage them to speak with their dr about talking an ER opioid like OxyContin or Butrans.
PPMPMDL0020000001	Cuyahoga Falls	OH	44223	8/28/2014	Reviewed Butrans indication, conversions and she said they needed more copay cards. Liz told me that dr wanted to ask me about OxyContin. Dr asked about a patient he has on fentanyl and wants to convert him to OxyContin and wanted to know the conversions. I showed him him the MVA that the conversion is 10mg q12 OxyContin for every 25mcg of fentanyl. Dr said he will convert accordingly. Asked him to continue using OxyContin for more patients and to please consider Butrans for those on Norco.
PPMPMDL0020000001	Westlake	OH	44145	8/28/2014	Gave him a reminder of the burans program- highlighted who is an appropriate patient type and why butrans might be an option for a chronic atc pain patient. Reminded him that oxycontin was also an option dosed every 12 hours.
PPMPMDL0020000001	Cleveland Heights	OH	44118	8/28/2014	Quick window call reviewed OxyContin every 12hours, 7 tablet strengths along with Butrans for those patients that are requiring around the clock analgesia that she is sending to pain mgnt. Said Ok, nothing new learned
PPMPMDL0020000001	Berea	OH	44017	8/29/2014	Talked about dosing and a d appropriate patient type. Talked about Butrans and the pain results from the naive study. I asked the doctor if that was enough to write a scripts for an appropriate patient, he said sure.
PPMPMDL0020000001	Olmsted Falls	OH	44138	8/29/2014	Talked to Tracey the office manager about the Butrans scheduling and OxyContin page 15 reformulation.
PPMPMDL0020000001	Rocky River	OH	44116	8/29/2014	Wave thru window. I asked if I could ask her. Something past her about her u satisfied pain patients. She asked what I had.i said a every 12 hour opioid OxyContin and a weekly pain patch Butrans. She said she didn't write much opioids for chronic pain. And that was about it.



PPLPMDL0020000001	Akron	OH	44312	8/29/2014	Short discussion along with dr Wells about OxyContin and how he can find appropriate patients whom are working with private insurance who may be appropriate for a conversion from IR oxycodone to ER Oxycodone. Dr said that may be true and he just needs to weed through all the bad ones which there are a lot of. I told him I understand and asked him to try and to just find one. Reviewed Scott profile for Butrans.
	Uniontown	OH	44685	8/29/2014	Spoke with Todd the pharmacist and reviewed the indications for Butrans and OxyContin. Discussed attributes for each and reviewed dosing, conversions and appropriate patient types. Todd said he dispenses some OxyContin and has not done a Butrans in a while. I asked him if he dispenses Percocet and vicoden? Todd said yes and way too much. I told him about the hydrocodone insight and Todd said its sad that patients are given something meant for acute pain for too long.
	Garfield Hts	OH	44125	8/29/2014	Discussed treating pain in 4-6hr increments, reviewed OxyContin every 12hours, 7 tablet strengths along with Butrans for those patients failing on present therapy requiring around the clock analgesia. Reviewed Savings cards, Med D and Initiation/Titration with him/Deena. Said Ok will keep on trying to find appropriate patients,
	Cleveland	OH	44127	8/29/2014	Reviewed OxyContin abuse deterrent characteristics, 7 tablet strengths along with Butrans for those patients requiring around the clock analgesia, Said Ok will continue to look for appropriate patients, Requested Geneva for assistance
	Cleveland	OH	44124	8/29/2014	Met with med asst Bridget. Left Dr C 9/14 PAP brochures/protect your practice brochure. Dr. gone until next Tues. Checked with his nurse, he did not need any OxyContin savings cards. Office staff communicated even more of a holistic approach for Dr. C, which was confirmed by a flyer where due to morphine equivalency guidelines, he suggested several natural tablets for pain, anxiety, etc.
	Lakewood	OH	44107	8/29/2014	Talked about dosing with OxyContin. And managed care coverage. Covered Butrans dosing and caresource coverage w Beth and the dr
	Brooklyn	OH	44144	8/29/2014	Reviewed OxyContin 7 tablet strengths along with Butrans for those Med D patients requiring around the clock analgesia, Said Ok will keep it mind, invited to upcoming program ,no new info learned
	Westlake	OH	44145	8/29/2014	Waved thru windo to grab attention. Np sme up said he was running behind and trying to leave early. I highlighted the dosing reminder for OxyContin. And Butrans dosing and med d coverage.
	Cuyahoga Falls	OH	44221	8/29/2014	I asked dr as he came out of an exam room if I can get a quick second to discuss some things. Dr asked high products I has and I told him. Dr said to schedule a lunch to discuss and said he writes some OxyContin and doesn't know about Butrans. I told him to use OxyContin for patients in daily around the clock pain who should be using an ER opioid. Dr said ok.
	Brooklyn	OH	44144	8/29/2014	Reviewed OxyContin/Butrans Savings cards, no new prescribers, nothing new learned
	Westlake	OH	44145	8/29/2014	Talked to Christ and the ma about OxyContin savings cards and managed care, did the same w butran.
	Akron	OH	44312	8/29/2014	I discussed OxyContin with dr wells and Montieth and discussed the IR oxycodone insight and asked them what is so difficult to treat patients with a q12h form of oxycodone? Dr Wells said he doesn't want to write any of them because its just causes too much headache he doesn't have time for. I told dr I understand but he's still writing or refilling IR opioids. Dr said its a tough call and that he is trying to reduce even the amount he is refilling.
					I asked for him to at least consider more of th Schudle 3,7 day patch in Butrans for patients like Scott and then reviewed the profile.
	Mayfield Heights	OH	44124	8/29/2014	Dr Vilinsky left early. Back next week. Met with med asst. Reminded her of my 2 products: OxyContin CII, oral tablets, dosed every 12 hours. Butrans, CIII, 1x week transdermal patch. both single entity opioids.
	Akron	OH	44319	8/29/2014	Spoke with Danielle the pharmacist and updated her on the OxyContin and Butrans indication, key selling attributes, dosing, titration and conversions for each product. Danielle said they have only filled 2 Butrans in the last 6 months and dispense OxyContin but for only 20 and 40 mg mostly. Discussed. Okay cards for each product.
	Cleveland	OH	44114	8/29/2014	Discussed treating around the clock pain in 4-6hr increments, reviewed Butrans Initiation/Titration, Formulary coverage along with OxyContin abuse deterrent characteristics every 12hours, Said ok will continue to prescribe for appropriate patients.
	Mayfield Heights	OH	44124	8/29/2014	Hallway. Repeat of primary care insight. I'm just asking for 1 or 2 patients in your practice, who might benefit from an ER opioid like OxyContin or Butran. OxyContin CII, single entity, dosed every 12 hours, steady state 24-36 hrs, can titrate 1-2 days. Butrans, CIII, single entity, 1x week patch, buprenorphine, Med D pull through, both products.
	Mayfield Heights	OH	44124	8/29/2014	Hallway. Summarized last call. Let Dr Roxana know it's my hope that she will be comfortable, for just a few trusted patients, in managing their long term pain, in the office. (outside of hospital, nursing home) with an ER opioid such as low dose OxyContin, dosed every 12 hours, single entity, proven efficacy since 1996, steady state 24-36 hours/can titrate in 1-2 days. Lowest effective dose discussed. The other option I have for you is: Butrans, buprenorphine 1x week pain patch. She asked, is Butrans like Fentanyl? I responded: no head to head data, however, I can tell you Butrans is worn 7 days, Fentanyl is worn for 3 days. Discussed product attributes for Butrans: single entity, partial agonist, steady state 72 hours, 4 strengths. What schedule asked Dr. Roxana? Schedule III, it can be called/faxed in with refills. Showed Butrans initiation guide, Dr. Replied that will be helpful with morphine equivalency. Left Med 80 Guidelines.
	Cleveland	OH	44127	8/29/2014	Discussed treating around the clock pain in 4-6hr increments, reviewed OxyContin abuse deterrent characteristics every 12hours along with Butrans for those patients failing on present therapy requiring around the clock analgesia. Said Ok, feels patients are adequately controlled on present therapy but will consider
	Olmsted Township	OH	44138	8/29/2014	Reviewed the FDA insight and talked about OxyContin and Butrans scheduling. Reviewed Butrans patch placement and supplemental use with Butrans for break thru pain meds. Reviewed steady state.
	Cleveland	OH	44125	8/29/2014	Quick review with Sarah on OxyContin abuse deterrent characteristics along with Butrans Med D coverage, Said Ok, nothing new learned
	Olmsted Falls	OH	44138	8/29/2014	Review FDA insight and dosing options of OxyContin and Butrans. Review of Butrans patch placement and reviewed how to discard patch and limitations.
	Akron	OH	44312	8/29/2014	Spoke with Carla and dr around the subject of the tramadol insight. Dr said that he dos have a good number of those types of patients and said he just needs to determine who is right for Butrans because many of them are being treated for acute pains. I told hi, if they have been treated for 90+ days they are not acute anymore! Dr agreed and said he's guilty of refilling them. I asked him to write Butrans for patients like Scott and review did the profile. Told him to also think of OxyContin as an option for this continuing on Percocet.
	Akron	OH	44312	8/29/2014	Discussed he IR oxycodone insight with dr and asked him if he has some Opportunities for conversions? Dr said that he might but it has been very difficult for internists and family practice to write narcotics in general. Dr talked about hydrocodone going to a schedule 2 in October and how expensive a UDS is on patients and he wants to wash his hands of pain management because its become to difficult. I asked why he can't just convert patients already on oxycodone to OxyContin q12? Dr said it may not even be approved. Dr spoke about how everything he goes to write either gets denied or needs a prior auth for any disease state. I showed him he Butrans Scott profile and reviewed.
	Akron	OH	44319	8/29/2014	I asked dr where he is finding OxyContin to be best utilized? Dr said he didn't know what I mean. I told dr I'm guessing he's writing it or has parts on it. Dr said a couple of patients maybe but isn't writing anything new.
	Garfield Heights	OH	44125	9/2/2014	Asked him to take those patients he continuing on Percocet and consider them for a q12 oxycodone. Dr said alright. I asked whim why he's not found a place for Butrans and he said its too expensive. I told him again he can't know that because he hasn't written it. Dr said its branded and that means expensive. I told dr he's wrong about that and to gain clinical experience.
					Reviewed OxyContin every 12hours, 7 tablet strengths along with Butrans for those patients failing on present therapy requiring around the clock analgesia, Said ok will consider for appropriate patients, will further discuss later in the week
	Cleveland	OH	44114	9/2/2014	Reviewed with Horace Rph OxyContin abuse deterrent characteristics, along with Butrans for those patients requiring around the clock analgesia, Said ok not seeing many narcotics at this location
	Brooklyn	OH	44144	9/2/2014	Window call, Quick review of OxyContin 7 tablet strengths, along with Butrans for those patients requiring around the clock analgesia, Med D formulary opportunity, Said Ok will consider for appropriate patients, Asked Audery to help reminding
	Cleveland	OH	44104	9/2/2014	Quick Review of Butrans for those patients requiring around the clock analgesia, Initiation/Titration, Med D formulary opportunities, Said Ok will consider for appropriate patients
	Akron	OH	44311	9/2/2014	Spoke with Matt the pharmacist about OxyContin and Butrans indications, key selling attributes, dosing and appropriate patient types for each product. Matt asked about Butrans conversions from vicoden. Reviewed initiation and titration guide. Discussed conversions from it oxycodone to OxyContin.
	Fairlawn	OH	44333	9/2/2014	Led with IR oxycodone and oxycodone plain insights. I asked dr what her thoughts are on those? Dr said she agrees there at too many patients being continued on it opioids and that there are many moving parts as to why and said she didn't want to get into a long discussion about it. I reviewed the OxyContin indication, dosing, conversions, start principles and appropriate patients. I asked dr if she currently has patients she believes would be appropriate? Dr said she thinks so and will look into it and she's glad its a good option. Discussed abuse deterrent characteristics from MVA. Introduced Butrans for thirst time. Discussed dosing, conversions, Scott profile, key attributes and patch description. I asked dr if she thinks Butrans is an option she will take advantage of? Dr said sure. Non committal.
	Akron	OH	44333	9/2/2014	Led with IR oxycodone insight and asked dr what her beliefs are in treating daily around the clock pain in 4-6 hour increments? Dr said she thinks its a touchy subject because of the issues the patients have in taking opioids for an extended period of time. I told her about the OxyContin indication and told her that patients continuing on products like Percocet for 3+ months may be meeting the indication of OxyContin and not Percocet. Dr said she agrees and its good to know about the option of q12 OxyContin. I told her about OxyContin attributes, dosing, conversions and appropriate patients. Discussed abuse deterrent properties from MVA. Discussed Butrans key selling attributes, dosing, conversions, Scott profile, patch application uses and disposal and copy cards. I asked dr if she believes Butrans will be used in her office for patients like Scott? Dr said its good to know she has another ER option. Nothing else learned.
	Cleveland	OH	44103	9/2/2014	Reviewed OxyContin Tablet strengths every 12hours along with Butrans for those patients requiring around the clock analgesia that are failing on present therapy, Said Ok will consider for appropriate patients.
	Cuyahoga Falls	OH	44223	9/2/2014	Short conversation with bobby the pharmacist and told him about the OxyContin patient types who, are appropriate and asked him how often he sees patients moving through multiple IR opioids? Bobby said there are way too many patients who should be on ER opioids or have surgery because patients take IR opioids all day long for years and bobby said its just wrong. I agreed with him and asked him if he would tell his patients about OxyContin and Butrans. Bobby said they already do but patients claim they are too expensive. Explained Butrans dosing and conversions and Scott profile. They are good on copy cards and do hand them out.
	Norton	OH	44203	9/2/2014	Talked about dosing with OxyContin and Butrans. Reviewed abuse potential and scheduling of both products.
	Cleveland	OH	44103	9/2/2014	Reviewed OxyContin every 12hours along with Butrans for those patients requiring around the clock analgesia Said Ok, nothing new learned
	Akron	OH	44310	9/2/2014	Dr and Shar told me they read that hydrocodone will be a schedule 2 in October. I asked dr if that will change things for him? Dr said it will not because he always wrote out the prescriptions for hydrocodone and never added refills so he said it will not impact them at all. Shar said that she sees pharmacists being hit the most because of possibly robberies. I told her I hope that doesn't happen but I can understand it. I asked dr if he would continue to identify patients in daily around the clock pain for Butrans and those on oxycodone to OxyContin.
	Cleveland	OH	44109	9/2/2014	Reviewed with tech, Butrans 7 day transdermal for those patients failing on present therapy requiring around the clock analgesia, OxyContin every 12hours, Said she seems some OxyContin, very little Butrans Nickels, Tryon
	Barberton	OH	44203	9/2/2014	Dr waved and said he hasn't tried it yet. I said tried what? He said Butrans. I said but u would if the right patient presented itself right. HE said sure. I said focus on the options of OxyContin or Butrans for today. Why dose in 4 to 6 hour increments several times a day when you can dose OxyContin every 12 hours or Butrans weekly. I asked him to think about this next time someone is ready for a change to their current therapy.
	Norton	OH	44203	9/2/2014	Talked about OxyContin doses and how dosed every 12 hours. Reviewed pages 15 from core visual aid and gave fair balance on abuse potential. Talked about why doctors would offer a pain medication for chronic care and give them an option in 4 to 6 hour increments several items a day when they have extended release options like OxyContin. Or Butrans? Dr said price. I said well since u are aware of coverage with caresource and commercial patient can use the coupons. are u comfortable selected these products for your patients, he said yes. Talked with staff about caresource managed care and our coupons.
	Westlake	OH	44145	9/3/2014	Reviewed OxyContin and Butrans dosing, encouraged these options opposed to dosing in short increments several times a day for chronic pain patients. Dr said ok. Thru window. Talked with office manager about scheduling a breakfast to review more information.

	Westlake	OH	44145	9/3/2014	Talked to like carol the ma about Butrans and OxyContin dosing and scheduling status. She got me back to see the doctor. I spoke to him and a resident about OxyContin FDA insight and reformulation as shown on oage 16 of core visual aid. Covered abuse potential. Dr told me about hydrocodone being moved to schedule two like OxyContin. I said how does that effect the way you treat chronic pain? Dr said he prefers to use schedule three product because it gives patients more refills and it is also viewed less abusable. aide sure to cover abuse potential with oxycontin an d Butrans. But did confirm Butrans was schedule three and we talked about the number of potential refills and that currently it could be faxed or carried to the pharmacy. Dr said he can see himself using more Butrans. Dr said he likes Butrans weekly dosing. We covered titration, patch placement and using break thru medications if needed. Covered managed care. Dr will be on vacation for Butrans program, therefore he can't go.
PPLPMDL0020000001	Akron	OH	44320	9/3/2014	Quick message about Butrans and told her that her opportunity for Butrans lies in tramadol and Norco for outiwnits that have Caresource, Medicare and and private insurance. I showed her the Scott profile and reviewed it. Left her with the OxyContin conversion and titration guide.
PPLPMDL0020000001	Cleveland	OH	44114	9/3/2014	Reviewed Butrans Med D coverage, Initiation/Titration, along with OxyContin every 12hours, abuse deterrent characteristics, Said Ok, continues to find appropriate patients, Asked John for help in reminding Dr
PPLPMDL0020000001	Cleveland	OH	44195	9/3/2014	Discussed treating pain in 4-6hr increments, Reviewed Butrans, 7 day transdermal, Initiation/Titration, Application, Butrans patient info booklets, Company resources, Partners against pain, Said ok will consider for appropriate patients, reiterated Butrans has the same misuse/abuse potential as any other opioid.
PPLPMDL0020000001	Cleveland	OH	44113	9/3/2014	Discussed treating around the clock pain in 4-6hr increments, reviewed OxyContin every 12hours, 7 tablet strengths along with Butrans for those patients requiring around the clock pain, Med D coverage review with Esa, Said he will consider for appropriate patients, struggles with any PA's or ins. obstacles, but will keep in mind,
PPLPMDL0020000001	Cleveland	OH	44195	9/3/2014	Quick review of Butrans for those patients requiring around the clock analgesia that are failing on present therapy, 7 day transdermal, along with OxyContin every 12 hours, 7 tablet strengths, Said Ok, will consider for appropriate patients
PPLPMDL0020000001	Westlake	OH	44145	9/3/2014	Review scheduling of both products and dosing. alked about FDA insight.
PPLPMDL0020000001	Akron	OH	44320	9/3/2014	I told dr about the oxycodone plain insight and asked him if he has patients that fit a similar description? Dr never really answered me and said that he will use Butrans. I told him that he has many opportunities for it and then reviewed the Scott profile. Discussed copy cards for each product and asked him to use it more frequently.
PPLPMDL0020000001	CLEVELAND	OH	44195	9/3/2014	Reviewed with Troy, OxyContin/Butrans savings cards and formulary opportunities, Said ok, nothing new learned
PPLPMDL0020000001	Cleveland	OH	44113	9/3/2014	Dropped off Butrans patient info booklets, reviewed with Tech will follow thru with Rph. OxyContin savings cards
PPLPMDL0020000001	westlake	OH	44145	9/3/2014	Talked about FDA insight. Talked about OxyContin label update. Reviewed the chronic atc pain patient currently appropriate and requesting a change to their medication...as an option to think about oxycontin d Butrans, covered dosing for both OxyContin and Butrans. Reviewed pai. Results of naive study and covered coupons. Dr said he would pass I formation. To dr gotis<font color=blue>-<b>CHUDAKOB's query on 09/19/2014</b>-<font>Lisa, what is pai? "Reviewed pai"<font color=green>-<b>BARTOLI's response on 09/24/2014</b>-<font>Opioid naive pain results of the Butrans study.<font color=blue>-<b>CHUDAKOB added notes on 09/28/2014</b>-<font>OK. I am assuming this was a typo. Please re-read your notes before submitting them.
PPLPMDL0020000001	Westlake	OH	44145	9/3/2014	Reviewed OxyContin dosing and coupons for both OxyContin and Butrans.<font color=blue>-<b>CHUDAKOB's query on 09/19/2014</b>-<font>Who did you review this with?<font color=green>-<b>BARTOLI's response on 09/24/2014</b>-<font>Christy the office manager at the Westlake location.<font color=blue>-<b>CHUDAKOB added notes on 09/28/2014</b>-<font>OK. Please put the name and position of the person you spoke with on all non-NCP calls. Thanks Lisa!
PPLPMDL0020000001	akron	OH	44333	9/3/2014	Short call due to dr being an hour behind. I asked him to please try and identify a patient who is motivated to get their pain under control and are currently treating around the clock pain in 4-6 hr increments. Reviewed Scott. Reviewed OxyContin conversions and titration guide.<font color=blue>-<b>CHUDAKOB's query on 09/19/2014</b>-<font>Cliff, here is an instance where a word such as motivated can be misinterpreted. My guess is that many patients are motivated to get their pain under control, even when they are taking opioids in 4-6 hour increments, wouldn't you agree?<font color=green>-<b>REICHCL's response on 09/24/2014</b>-<font>Sure<font color=blue>-<b>CHUDAKOB added notes on 09/28/2014</b>-<font>OK. If you do not see my point, let me know!
PPLPMDL0020000001	Olmsted Falls	OH	44138	9/3/2014	Reviewed scheduling of both products. talked about FDA insight and page 16 of core aid. Talked about titration of both OxyContin and Butrans. m
PPLPMDL0020000001	Akron	OH	44333	9/3/2014	Dr told me that he has had a problem getting Butrans approved for a 90 yr old patient who has UHC community plan. Dr said that Optum Rx wanted him to start the patient on fentanyl, then methadone then Butrans. Dr said yes furious and write a letter to the plan and is waiting for the result. I told him that plan and buckeye are the most difficult. I asked for his continued identification for Butrans patients and those post op who need something around the clock for pain. Discussed identification of OxyContin patients and titration and initiation. Dr said he really only uses the 20 and 50 mg because the offer the best efficacy and lowest dose.<font color=blue>-<b>CHUDAKOB's query on 09/19/2014</b>-<font>Cliff, please read this sentence. "I asked for his continued identification for Butrans patients and those post op who need something around the clock for pain." I am wondering what you were referring to here?<font color=green>-<b>REICHCL's response on 09/24/2014</b>-<font>Dr has said, in your presence, that he does have patients following intervention that need an opioid for around the clock pain. This is what is was referring to. I will clarify more specifically next time<font color=blue>-<b>CHUDAKOB added notes on 09/28/2014</b>-<font>OK. I do not believe that is considered post-op. That is considered post-intervention or post procedure. They are different. I agree that more clarity is needed. Thanks!
PPLPMDL0020000001	Akron	OH	44320	9/3/2014	Told dr about her opportunity for identifying patients for OxyContin and Butrans. Told dr to focus on hose that are on Percocet for 3+ months and have around the clock pain to convert them to q12 OxyContin. Told her to write Butrans for her Norco patients who also have around the clock pain and are motivated to reduce their pain. Discussed conversions and insurance options.<font color=blue>-<b>CHUDAKOB's query on 09/19/2014</b>-<font>Cliff, please read the sentence you wrote. What is the inference here?"Told her to write Butrans for her Norco patients who also have around the clock pain and are motivated to reduce their pain."<font color=green>-<b>REICHCL's response on 09/24/2014</b>-<font>I get it Barry. I wasn't inferring anything. Its how I wrote it which confused you. I simply asked her to identify patients who are in around the clock pain on Norco who are motivated to control their pain. Butrans is simply a possible solution.<font color=blue>-<b>CHUDAKOB added notes on 09/28/2014</b>-<font>OK. Thanks Cliff. Just making sure.
PPLPMDL0020000001	Akron	OH	44313	9/3/2014	I told dr that I'm guessing he has patients who are currently taking Percocet or even Norco and have been on it for 3+ months. Dr said he does. I asked him why he's treating around the clock pain in 4-6 hour increments with Norco or Percocet? Dr said cost is the reason. I asked him if it is for ALL those patients? Dr said not all but most. I told him to please identify the ones where cost is not a factor and convert them to a long acting opioid like OxyContin or Butrans for those refilling Norco month after month. Dr asked me where Butrans is covered. I told him that Tina has all the managed care grids and reminded him that Caresource will be the best plan for Butrans and Medicaid. Reminded him of Medicare and commercial plans.
PPLPMDL0020000001	westlake	OH	44145	9/3/2014	Talk to dr about the FDA insight and talked about what he knew about the reformulation if OxyContin. Dr said he knew. Wry little. Shared with him the pages of core visa, aid pages 15 and 16. T, asked about abuse potential and reviewed why a patient would need a control release option for chronic pain. Reviewed OxyContin and Butrans options. Talked dosing, focused in lowest doses of each product. Covered scheduling and coupons.
PPLPMDL0020000001	Akron	OH	44304	9/3/2014	I asked Lisa if she would be willing to discuss the q12 oxycodone option with patients who continue to refill their IR oxycodone? Lisa said that they try to leave that up to the physician. I told her I understand and told her I'm asking her to ask the physician about it. Lisa said they can do that. Reviewed dosing and conversions and key selling attributes. Discussed Butrans attributes, conversions and Scott profile.
PPLPMDL0020000001	Cleveland	OH	44195	9/3/2014	Quick OxyContin review every 12hours, 7 tablet strengths, along with Butrans 7 day transdermal for those patients requiring around the clock analgesia, Said Ok , transitioning into new role, no new info learned
PPLPMDL0020000001	Westlake	OH	44145	9/3/2014	Discussed the dinner program and his interactions with residents in the upcoming weeks. DR said he doesn't have residents planned this month. I asked them what he tells them about Butrans. Dr told me he tells them it's a good product for chronic Pain if the patient can get it thru managed care. I asked if u tell them its hard to get? He said no. I asked when was the next resident visit and maybe I could stop by and we could review the pain study or nthe elderly profile of Butrans. Dr said maybe and to check with Julie the office manager. I told him about the patch dosing and reviewed Initiation doses. Covered med d plans and caresource. Tlked about OxyContin reformulation as page 16 of core visual aid covers and talked about abuse potential for all opioids including Butrans and OxyContin. Reviewed scheduling of the two products and what that means in terms of refills. Dr said he can't attend the. turns program. Asked him if he followed up with hospital pharma it and he said no. Due to lack, of time but said he would.<font color=blue>-<b>CHUDAKOB's query on 09/19/2014</b>-<font>Lisa, you might consider asking him what amount of formulary coverage (percent) he would have to see before he is comfortable prescribing a product and knowing it is covered. he brings this smokescreen up every time, doesn't he?<font color=green>-<b>BARTOLI's response on 09/24/2014</b>-<font>I'll try that. Yes. Dr does bring up managed care on almost every call. I've tried many approaches to overcome this perception.<font color=blue>-<b>CHUDAKOB added notes on 09/28/2014</b>-<font>OK. Good luck!
PPLPMDL0020000001	Akron	OH	44333	9/3/2014	I asked Elise if she's having luck getting patients converted to OxyContin? Elise said she is but its hard to get approved on plans. I ended up speaking with Brittany about pending OxyContin or Butrans scripts and she said she currently has none. I told Elise to continue using each product and discussed patient type selection. Discussed inclusion and exclusion criteria for Butrans.
PPLPMDL0020000001	Akron	OH	44307	9/3/2014	I told dr that the last time we spoke he told me that he has patients currently on Percocet for pain and I asked him if any of them have daily around the clock pain and you said some. Dr said some. I asked him if he has spoken with those patients about converting them to q12 OxyContin? Dr said not yet and said he will talk with some of them about the option. I reviewed the conversions again and asked him for more business and to please think of Butrans as that viable option for his tramadol and Norco patients who take them around the clock.
PPLPMDL0020000001	Fairlawn	OH	44333	9/3/2014	Sue told me she needed to speak with me and couldn't find my phone number. Sue said a patient was in to get an OxyContin prescription and didn't not have prescription coverage. Sue said she couldn't find the OxyContin savings cards to help her with the cost. Sue said the patient has been diagnosed with cancer but couldn't afford OxyContin. I asked Sue if she would call the patient and help her with \$70 off? Sue said she will call the patient today. I asked about Butrans and if she has heard anything from patients good or bad? Sue said they continue to dispense it and have not had any negative news from patients and have all doses in stock.
PPLPMDL0020000001	Akron	OH	44309	9/3/2014	1. Determine next steps for FACETS program w/ Case Managers 2. Meet Allyn Purdum to discuss AG statement.
PPLPMDL0020000001	Garfield Hts	OH	44125	9/4/2014	Visited Pain mgmnt Dept (Dalbir PA, Samuel) discussed OxyContin every 12hours, abuse deterrent characteristics along with Med D Butrans coverage and appropriate patients, Initiation/Titration
PPLPMDL0020000001	Stow	OH	44224	9/4/2014	Quick discussion with Corey the pharmacist about Butrans and OxyContin indication, conversions and appropriate patients. I asked Corey if he is having patients using the Butrans copy cards. Corey said some of them and said many outiwns have Medicare or Medicaid so they can't use them. I told him how cash paying patients can use the copy cards but not the trial offer.
PPLPMDL0020000001	Cleveland	OH	44113	9/4/2014	Discussed treating pain in 4-6hr increments, Reviewed OxyContin abuse deterrent characteristics every 12hours, 7 tablet strengths along with Butrans for those Med D patients requiring around the clock analgesia, Said Ok will continue to support for appropriate patients
PPLPMDL0020000001	Fairview Park	OH	44126	9/4/2014	We talked about the Butrans dosing. dosages. I asked what the last patient was on before switching to Butrans. Dr said it was a med d patient on norco. I said why Butrans? Dr said he feels that it works very well for most chronic pain patients. Dr said he has experience in almost every dosage. Dr said he feels that his only problem would be if the patient is in the donut of their med d coverage. I highlighted the aarp and silver scripts... dr said it was hard to know what the patient in the age group can afford and usually find out after the script isn't filled that it was too expensive. I refocused him back to the big picture of he selects the product cause he feels it's the right choice for appropriate patients. Highlighted commercial and supported the med d coverage we have. Invited to Butrans dinner program and he said maybe. Dr said looks like Butrans will be used more this year with all other hydrocodone being teir 2. I said maybe. I reminded him how long the product has been out. The pain results of naive study and dosages and covered the attributes like schedule 3. No first pass. And his thoughts on Butrans for the elderly. Dr said he feels Butrans if patients can afford it is a good option. I asked him how he feels about OxyContin's reformulation. Dr said it can't hurt to have it. Talked about abuse potential. Talked about dosing and the ten mg dose for the elderly along with coupons for commercial insured. Dr said he was very comfortable using OxyContin.
PPLPMDL0020000001	Cleveland	OH	44125	9/4/2014	Discussed with Linda Tech. OxyContin/Butrans savings cards along with Med D coverage, Said ok will relay info to Rph. nothing new learned
PPLPMDL0020000001	Euclid	OH	44123	9/4/2014	Spoke briefly w pharm mgr Mike Bish. Quick mention OxyContin, Butrans, Mike says no time to talk, really behind, but he will look at my info later. Left RX Patrol flashcard, OxyContin & Butrans FPIs , 1 Butrans patient guide. Mike doesn't recall ever dispensing Butrans. Nothing else learned.

	Euclid	OH	44117	9/4/2014	Quick OxyContin, Butrans mention for BWC patients. And when you go over to Painesville office, keep in mind broad commercial coverage, trial/savings for Butrans; OxyContin \$30 per month co pay for any of our 7 strengths. Med D pull through.
PPLPMDL0020000001	Euclid	OH	44119	9/4/2014	Dr Eckstein came into Dr. Winer office while I had lunch. Quick OxyContin, Butrans mention for patients who meet ER opioid indication.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	9/4/2014	Quick hello in hallway going into his office and told him to please expand his Butrans writing for his Medicare patients. Dr said he's going to take my advice and hope they don't have to pay out of the nose. I told him I can't guarantee cost but preferred means preferred and told him average costs for aarp and silverscript.
PPLPMDL0020000001	Euclid	OH	44119	9/4/2014	While doing lunch in service for Dr. Winer, Dr. Katz came in to consult w Dr. Winer. Quick OxyContin, Butrans mention for Dr. Katz, for patients who meet ER opioid indication.
PPLPMDL0020000001	Beachwood	OH	44122	9/4/2014	Talked to two pharmacists quickly (Rena and Deanna). They stock a few of the lower doses of OxyContin but definitely see more IR than ER. Explained what I am telling physicians in the area about where ER is appropriate for patients in around the clock pain. They agreed. Only could think of one patient they are stocking butrans for. They had to rush off.
PPLPMDL0020000001	Stow	OH	44224	9/4/2014	Told Sandra that I'm hoping she finds more opportunity for Butrans because I'm sure she had patients on tramadol or Norco for 90 days or longer then gave her the tramadol insight. Sandra said she does and said not everyone is going to be a candidate for Butrans. I told her I agree and said she needs to decide who is motivated for controlling their pain, meets the indication for daily around the clock pain, and those who are working with insurance, Medicare or Caresource. Sandra said ok. Told her that OxyContin is that q13 option for patients already on the molecule and need a dose adjustment.
PPLPMDL0020000001	Westlake	OH	44145	9/4/2014	Pointed out managed care med d with products. Highlighted dosing options like OxyContin. And Butrans for chronic pain patients. Talked with nurses about managed care.m
PPLPMDL0020000001	Cleveland	OH	44127	9/4/2014	Discussed treating around the clock pain in 4-6hr increments, Reviewed Butrans for those patients requiring around the clock analgesia, Initiation/Titration along with OxyContin abuse deterrent characteristics every 12hours, Said Ok, will consider some of those percocet patients.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	9/4/2014	Discussed treating pain in 4-6hr increments, Said he feels patients are adequately controlled on present therapy but will consider OxyContin every 12hours. Reviewed formulary coverage and dosing. Butrans Initiation/Titration Led off discussion about IR oxycodone insight and then explained the indication for OxyContin. Discussed OxyContin dosing, titration, conversions and abuse deterrent studies. I asked dr what his experience has been and how he feels now going forward. Dr said ok and did not comment further. Discussed Butrans indication, dosing, conversions and Scott profile along with key selling attributes. Dr offered no comment or insight.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	9/4/2014	Led off discussion with dr on the IR oxycodone insight and asked him his thoughts? Dr said he believes it to be true. Discussed OxyContin indication, dosing, conversions, titrations and key selling attributes. I asked dr if he believes OxyContin can play more of a role in his office? Dr said he has to be very careful when prescribing opioids. I told him I agree and asked if he's hesitant tin prescribing it? Dr said not really but said he may have a couple of patients he can convert. Discussed tramadol insight and Scott profile. Discussed dosing, conversions, titrations and key attributes. I asked if he thinks it has a place in his practice? Dr said maybe and again said he has to be careful in prescribing.
PPLPMDL0020000001	Cleveland	OH	44115	9/4/2014	Visited Pain Mgmt Dept (Nickels) Reviewed Butrans/OxyContin Savings cards and Initiation/Titration guides
PPLPMDL0020000001	Beachwood	OH	44122	9/4/2014	Doctor just opened a private pain management practice. For years he was with the Cleveland clinic. He has 3 kids, 11, 8, 1 and likes to play squash. He just wrote OxyContin for a patient yesterday. This person was on Percocet 60 or so, and he decided to write oxycodone 20 every 8 hours. I told him we recommend q 12 dosing for patients in around the clock pain. It can be titrated every 1-2 days to attain optimal dosing. He said most of the time he would try to stick with the q12 dosing. He has some experience with butrans. Primarily the patient who wants to take fewer pills. I reviewed dosing and titration. He said he would keep an eye out for that Tramadol patient. He asked about coverage, I reviewed formulary and med d win.
PPLPMDL0020000001	Westlake	OH	44145	9/4/2014	Spoke to dr about OxyContin FDA and talked about abuse potential. Talked about lowest dose of OxyContin and Butrans. Talked scheduling and invited to dinner program for Butrans.
PPLPMDL0020000001	Westlake	OH	44145	9/4/2014	Reviewed FDA insight about OxyContin and talked about what he used for. Heroic pain patients who are 1 or 65 yrs of age. Dr said he has no idea. Talked lowest dose of both OxyCotin. ALS reviewed Butrans dosing and no first pass and managed care. Dr said he is too busy today to review and left.
PPLPMDL0020000001	Cleveland	OH	44115	9/4/2014	Quick Review of OxyContin abuse deterrent characteristics every 12hours, 7 tablet strengths along with Butrans for those Med D patients requiring around the clock analgesia, Said Ok will consider, nothing new learned
PPLPMDL0020000001	Cleveland	OH	44195	9/4/2014	Discussed treating pain in 4-6hr increments, Reviewed OxyContin abuse deterrent characteristics every 12hours, 7 tablet strengths along with Butrans for those Med D patients requiring around the clock analgesia, Said Ok will consider, has a few patients in mind.
PPLPMDL0020000001	Akron	OH	44310	9/4/2014	Told dr about the IR oxycodone insight and asked him if he currently has patients that meet that type of statistic? Dr said he probably does. I told him that if he is refilling Percocet more than three times and the patient is taking it daily and around the clock they are a candidate for the q12 oxycodone. Dr said ok. I showed him he conversions and asked him if he will take a closer look at those patients and convert them when they meet the indication. Dr said ok. I told him to also consider Butrans as that schedule 3, 7 day transdermal patch for those wanting more tramadol. Dr said alright. Nothing Else learned.
PPLPMDL0020000001	Garfield Heights	OH	44125	9/4/2014	Discussed treating pain in 4-6hr increments, Reviewed OxyContin abuse deterrent characteristics every 12hours, 7 tablet strengths along with Butrans for those Med D patients requiring around the clock analgesia, Said Ok will consider, will help Dr.'s remember
PPLPMDL0020000001	Cleveland	OH	44115	9/4/2014	Discussed w/George Rph OxyContin every 12hours along with Butrans for those patients requiring around the clock analgesia, Said he still hasn't seen anything from Nickels, but will help/recommend when appropriate
PPLPMDL0020000001	Euclid	OH	44119	9/4/2014	Lunch. Discussed product attributes for OxyContin. Asked Dr. Winer to use an ER opioid earlier in therapy, when patient (s) meets ER indication, consider OxyContin, q 12 h. Dr had a lot of questions re: drug to drug interactions for OxyContin. Addressed those in FPI, and Dr. was satisfied with response. Discussed lowest effective dose, and plasma concentration differences in females, elderly. Dose 1/2 to 1/3 starting dose elderly, debilitated and hepatic impaired. Focused on single entity opioid, dosing flexibility, OxyContin Essentials kit. Discussed Butrans as single entity opioid, 1x week or 7 days release buprenorphine. No dose adjustment needed: renal, mild/moderate hepatic impaired. Dosing flexibility. Asked for business today, and next week.
PPLPMDL0020000001	Beachwood	OH	44122	9/4/2014	Talked to nurse and receptionist at the window trying to see the practitioners who were too busy. Talked about ER option as appropriate for patients in around the clock pain. They have been asking for more savings cards so I left them.
PPLPMDL0020000001	Berea	OH	44017	9/5/2014	Talked about FDA insight and reviews the highlights from the OxyContin core visuals aid. Talked fair balance in abuse potential for all opioids including the ones I was promoting. Talked about act pain and OxyContin and Butrans as options instead of immediate release. Dr said he think OxyContin is a good choice for patient who are chronic and been on opioids a while. Talked Butrans approx patient type. I highlighted after tramadol failure or perhaps after norco... for appropriate patients. Talked about dosing and managed care.
PPLPMDL0020000001	Cleveland	OH	44195	9/5/2014	Reviewed OxyContin 7 Tablet strengths and Savings cards along with Butrans for those patients requiring around the clock analgesia, 7 day transdermal. Said Ok will continue to prescribe for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44113	9/5/2014	Reviewed OxyContin 7 tablet strengths, formulary grids along with Butrans for those patients requiring around the clock analgesia. Said Ok, will continue to prescribe for appropriate patients
PPLPMDL0020000001	Westlake	OH	44145	9/5/2014	Pharmacist was aware if all the changes happening to schedule two products ts. Talked about OxyContin FDA insight and reformulation and OxyContin dosing for the appropriate patient per the fpi. Also talked about scheduling for Butrans and dosing.
PPLPMDL0020000001	Westlake	OH	44145	9/5/2014	Talked about doing chronic act pain patients with control release products instead of immediate release opioids several times a days dr said price is the factor for him. We talked about the couONS AND. He said he has never used Butrans and rarely OxyCotin. I asked which population he treats the most with pain medications he would like to focus on for today. Dr said med d patients. I took out fpi... And talked about OxyContin lowest strengths, how it did in clinical studies as noted in section12.2 and reviewed the elderly patient lack of dose adjustment for normal elderly functioning. I asked how often he takes the stretch into consideration for the elderly and he said every time. I also talked Butrans elderly profile. No first pass, med d coverage and dosing. Dr said he would try it again if he saw an appropriate patient.
PPLPMDL0020000001	Berea	OH	44017	9/5/2014	Dr said looks like Butrans will start to be written more. I said aren't saying you started to write the product. He said no, just that with the scheduling changes it leaves Butrans in schedule 3. I said both OxyContin and Butrans are still options for appropriate patient a with chronic act pain. I said why write I. Short increments several to s a day when the patient has an optic. Of a 7 day patch or every 12 hour dosing. Dr said the refills and not having to see a patient every month is a feature for Butrans than the Immediate release opioids. I told the doctor...if a doctor wants to treat atc chronic pain with an opioid only from a schedule 3, the Butrans may be an appropriate choice for the right patient. Dr said what about cost of Butrans. I said with insurance...if they use a coupon it could be a significant savings for a branded product, touched in med d coverage. Reviewed reformulation of OxyContin. Per the core aid.
PPLPMDL0020000001	Cleveland	OH	44103	9/5/2014	Reviewed OxyContin/Butrans Savings cards with Hakim RPh, No new info learned
PPLPMDL0020000001	Cleveland	OH	44105	9/5/2014	Reviewed OxyContin/Butrans savings cards, no new info learned
PPLPMDL0020000001	Cleveland	OH	44128	9/5/2014	Quick meeting because of a line up of patients. They stock the lower doses of OxyContin and no butrans. They can typically get it in a day. She said to come back again a different day.
PPLPMDL0020000001	Westlake	OH	44145	9/5/2014	Review OxyContin dosing and Butrans dosing. Showed patch demo of Butrans and reviewed patch lace end and scheduling of both products
PPLPMDL0020000001	Uniontown	OH	44685	9/5/2014	I asked sherry up front to see the doctors today and she sent me back. Spoke with dr Everly about opportunities for OxyContin and Butrans. Discussed when he should be thinking of OxyContin and discussed patients already in IR oxycodone. Discussed patients who are taking tramadol or Norco daily and around the clock to convert them to Butrans. I asked him if he has reservations in using OxyContin? Dr said no but said that AGMC is pushing them to refer to pain management after 90 days of treatment. I told him I understand and asked him if he would have patients he knows need an ER opioid before 90 days and initiate? Dr said its rare but will try.
PPLPMDL0020000001	Akron	OH	44319	9/5/2014	Told dr at window that OxyContin needs to be his go to ER opioid when he has a patient already on oxycodone but taking it around the clock and to convert them. Dr said he knows and is trying to do it sooner. I told him great and to also use Butrans for those needing a dose adjustment on tramadol or Norco and meet the Butrans indication. Dr said ok and asked me about Medicare coverage. I gave him the Medicare grid and explained the plan coverage and average cost.
PPLPMDL0020000001	Uniontown	OH	44685	9/5/2014	Sat with dr Orgel and Everly while discussing opportunities for OxyContin and Butrans. Discussed patient types, attributes, conversions and using these products when he knows the patient has the first signs of taking an IR opioid daily and around the clock.
PPLPMDL0020000001	Beachwood	OH	44122	9/5/2014	Kathy said that they are a closed door pharmacy. Sells meds to group homes, nursing facilities, foster care etc. The president and pharmacist is Thomas Albert (talbert@parkwaypharmacy.net) who can be seen by appointment only. Karen Winograd (kwinograd@parkwaypharmacy.net) is the other pharmacist.
PPLPMDL0020000001	Westlake	OH	44145	9/5/2014	Np on medical leave but came in w the baby today. We talked about OxyContin dosing and Butrans dosing and scheduling. I told her that I was hoping she would have tried Butrans by now in an appropruTe chronic pain patient and reminded her it was schedule 3. She didn't remember any if the dosing nor the indication. Reviewed the information with her.
PPLPMDL0020000001	Tallmadge	OH	44278	9/5/2014	I told dr its time for him to identify patients who are appropriate for OxyContin and Butrans. I told him to focus on one patient type for each product. OxyContin use in patients who are already on the molecule but in the short acting form like Percocet. Told him to focus on Butrans for patients who are taking tramadol around the clock and on a daily basis.
PPLPMDL0020000001	Uniontown	OH	44685	9/5/2014	Spoke with Kim and asked her if she is seeing more OxyContin than a month ago? Kim said its been pretty steady and she is still seeing too many refills of Percocet. I told her that's unfortunate but a reality. Reviewed OxyContin and Butrans indication, dosing and conversions. Kim said they have about 5 or 6 patients on Butrans and they seem to like it.
PPLPMDL0020000001	Westlake	OH	44145	9/5/2014	Talked about atc dosing for the chronic pain patient that's medication isn't controlling their pain. I asked how many doses in a day equates to atc. Dr said anything over 2 doses in a day. I said so let's concentrate on that. I said let's talk about a patient on two doses a day and not controlled [with their opioid. I said if they are on Tramadol...would you be comfortable writing Butrans. Dr said he isn't comfortable with the product yet. We talked about OxyContin and Butrans dosing. Dr said he feels OxyCotin. Should be saved for the pain. Docs. I said why? He said because patients don't want to be on OxyContin. After review of Butrans dr said he was comfortable starting Butrans. Dr said he is still not going to write OxyContin. Dr said he likes that Butrans is schedule three. Review managed care.
PPLPMDL0020000001	Cleveland	OH	44195	9/5/2014	Visited dept. OxyContin/Butrans Initiation/Titration, formulary grids

PPLPMDL0020000001	Cleveland	OH	44113	9/5/2014	Visited Pain(Shen, Novak, Daoud) OxyContin/Butrans initiation/Titration guides along with Scott profile
PPLPMDL0020000001	Akron	OH	44305	9/5/2014	I asked dr other than cost,what limitations are there in you writing OxyContin more frequently? Dr said there are none with him its just that some patients just don't want it. I told dr I understand and asked hi. If he would mind reviewing his patients charts for possible candidates if patients who are taking Percocet or Norco around the clock.? Dr said ok. Reviewed Butrans dosing, conversions,titration, and Scott profile.
PPLPMDL0020000001	Cleveland	OH	44195	9/5/2014	Reviewed OxyContin every 12hours, 7 tablet strengths along with Butrans. Initiation/Titration along with Med D coverage. Said OK, will continue to prescribe for appropriate patients, Confirmed attendance to program
PPLPMDL0020000001	Akron	OH	44319	9/5/2014	Spoke with Steve the technician about OxyContin and Butrans. I told him about OxyContin and Butrans attributes, conversions,titration and dosing. I asked Steve if he is seeing many patients refilling IR opioids after multiple months? He said he is seeing a lot of it and can't understand it and said he figures it based on economics. I told him that is part of it and possibly they are afraid of writing ER opioids. Steve agreed.
PPLPMDL0020000001	Westlake	OH	44145	9/5/2014	Talked about scheduling of OxyCotin and Butrans. Talked about atc and chronic pain patients and choices they have with the products I promoted per our indication. Talked about dosing and strengths of OxyContin , dr said he was very familiar w OxyContin I asked when was the last time he wrote for it. Dr couldn't remember. We talked about the elderly patients and what he uses for their chronic pain meds. Dr said usually norco but he wasn't sure now with the schedule changes. I asked why they'd make a fp difference. Dr said a usability with schedule 2. We talked about abuse potential for both the products. Dr said turning to an extended release makes sense if their current product isn't working. We talked med d coverage. Dr said he might attend Butrans program
PPLPMDL0020000001	Cleveland	OH	44195	9/5/2014	Reviewed OxyContin every 12hours, 7tablet strengths along with Butrans for those patients requiring around the clock analgesia. Said Ok, will be on maternity leave for the next 8 weeks.
PPLPMDL0020000001	Berea	OH	44017	9/5/2014	Talked about scheduling of both product and discussed reformulation per the OxyContin rce visual aid page 16. Gave fair balance. The dr said with hydrocodone going schedule 2 she can see herself rioting more Butrans because she doesn't write much schedule 2 products. Reviewed the indication and listed a few of the limitations of Butrans. Talked about the option for patients to dosed in weekly or every 12 hour increments....instead of 4 to 6 hour increments several times a day for the right patient. Reviewed managed care and she said price was the deciding factor for her choice.
PPLPMDL0020000001	Cleveland	OH	44113	9/5/2014	Quick review of Butrans for those patients requiring around the clock analgesia, Med D formulary along with OxyContin abuse deterrent characteristics every 12hours, Said Ok, will conslder, nothing new learned
PPLPMDL0020000001	Cleveland	OH	44113	9/5/2014	Reviewed Butrans for those patients failing on Norco requiring around the clock analgesia, Said ok will continue to find/prescribe for appropriate patients
PPLPMDL0020000001	Independence	OH	44131	9/8/2014	They were leaving the office when I got there, just did a quick introduction. Met his nurse who said he writes a little oxycontin, not any butrans, he sometimes talks to reps and that I should email him for an appointment because they schedule their own appointments.
PPLPMDL0020000001	Cleveland	OH	44195	9/8/2014	Reviewed OxyContin every 12hours, 7 tablet strengths, Savings cards along with Butrans for those patients requiring around the clock analgesia, CIII, said ok will consider for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44118	9/8/2014	Reviewed OxyContin every 12hours, abuse deterrent characteristics along with Butrans for those patients requiring around the clock analgesia, Said Ok will consider for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44195	9/8/2014	Reviewed with Tech OxyContin/Butrans, said they see once in a while Butrans. but will relay info to Rph,
PPLPMDL0020000001	Westlake	OH	44145	9/8/2014	Reviewed OxyContin dosing and lowest dose, Vicki said she wasn't sure how much the hospital will allow her to start a patient on a schedule 2. We talked about lowest dose and comparative 12.3 section of the molecule vs. OxyCotin. Vickyrut her back so she canceled going to the meeting for Butrans, she said she can't sit still ling and will have to take a few days off from work. Highlighted Butrans dosing, patch placement and rotation.
PPLPMDL0020000001	Westlake	OH	44145	9/8/2014	While I was asking w the nurses about confirmation of Butrans nr dinner program dr came up. There wasn't much time. I got out dosing options for both OxyCotin and Butrans for the chronic atc pain patient. But got cut off by a nurse. I will return tomorrow to check on programs attendance
PPLPMDL0020000001	Fairlawn	OH	44333	9/8/2014	I told dr over the front counter that OxyContin is the single entity opioid he can use for his hydrocodone patients who's pain is uncontrolled and asked him if he uses it there? Dr said he does but mostly for his patients converting from Percocet. I told him if he knows the patient has around the clock pain he can go straight to OxyContin from Norco. Dr said ok but that would be for his insured patients. I told him that's ok. Reminded dr to use Butrans for his patients on tramadol needing more of it.
PPLPMDL0020000001	Westlake	OH	44145	9/8/2014	Spoke to Vicki and dr today about med d coverage specific to silver script and aarp. I asked him at what oil t is he turning to Butrans and OxyContin for their atc chronic pain patients. Dr said after oxycodone or a hydrocodone. I asked why not after Tramadol or Butrans or after norco for OxyContin. Dr said sometimes. DR said he could go to Butrans program. Reminded on the reformulation of OxyContin and dosing.
PPLPMDL0020000001	Westlake	OH	44145	9/8/2014	Talked about the scheduling to lisa the nurse and a few other nurses sitting at the desk area. We talked about schedule 3 opioids such as Butrans and the number if refills and how the scripts can get to the pharmacy. Talked about a few managed care plans.
PPLPMDL0020000001	Twinsburg	OH	44087	9/8/2014	Quick meeting with the doctor who was sitting at the front window chatting with 3 people. Had time to introduce myself and products I promote. He said he doesn't use much. I told him that I scheduled a lunch where we can talk about a few of his patients who are in around the clock pain and might benefit from ER therapy. He is looking forward to it.
PPLPMDL0020000001	Fairlawn	OH	44333	9/8/2014	Spoke with Sue and checked in with her about the patient who didn't get the OxyContin copay card. Sue said she called the patient and left her a message and has not heard back yet.I asked Sue to keep trying and she said she will hand out cards whenever the opportunity comes up. Discussed OxyContin dosing and asked her who orders scheduled medicines. She said she can order it but usually its Gilbert or Jessica. Discussed Butrans dosing and patient type selection.
PPLPMDL0020000001	Highland Heights	OH	44143	9/8/2014	Yell across front window, consider OxyCotin or Butrans today, this week for your patients who meet ER opioid indication. Ok? Ok, dr should head yes. met w med asst at front window. discussed PAP 9/14 brochures, and that we want pain mgt to be recognized at health care priority. I'd like to have dr place these at patient check out or maybe a few in each patient room. Mary will discuss w him.
PPLPMDL0020000001	Akron	OH	44313	9/8/2014	I told dr that when he refills or writes a new prescription for any IR opioid and they are on it for 30 days or longer he may be committing them to long term opioid therapy. I told him that he needs to determine what the pathology of pain is and if it is a condition like spinal stenosis, low back pain, or osteoporosis he should be strongly considering an ER opioid. Dr said he understands and agrees but doesn't want to write them. I told him Then he needs to refer those patients before they get into escalating doses of IR opioids. Dr said ok. I told him to write OxyContin or Butrans as his go to ER opioids. Left him conversion a and titration guide for OxyContin and
PPLPMDL0020000001	University Hts	OH	44118	9/8/2014	Reviewed OxyContin every 12hours, 7 tablet strengths along with Butrans for those Med D patients requiring around the clock analgesia, Said Ok will consider, Asked for Maria help in reminding Dr. Said she will
PPLPMDL0020000001	Richmond Heights	OH	44143	9/8/2014	Lunch. Primary care insight. Then used Pam profile, as being a patient that would be appropriate for either start dose (10 mg) OxyContin OR start dose of Butrans (5 mcg hr) . OxyContin product attributes presented including efficacy since 1996, half life, steady state, 7 strengths, then formulary status. Whom can I provide formulary updates to in future? Dr replied Laura. Is she the main prior auth coordinator? Yes, dr replied. Then Butrans BUP 3024, discussed tolerability, ability to titrate, efficacy in opioid naive. Discussed A.E.s and application site pruritis. Formulary update, Butrans trial, savings. Asked if he sees patients like Pam today, this week, and they meet ER opioid indication, My hope is that he will keep both Oxy Contin& Butrans top of mind. What about the scrutiny from the state, what should I do about that asked Dr Balaji. I discussed Ohio Med 80 guidelines with him,what's expected of state board such as regular documentation,Using OARRS, etc. that is dr main concern with writing ER opioids. Responded that it's been my goal to make him more comfortable with my ER opioid products for trusted patients. Left 9/14 PAP brochures, Dr placed one in his jacket.<font color=blue><b>CHUDAKOB's query on 09/18/2014</b></font>Jenny, half-life is not something we should be discussing as a stand alone. We cannot say that OxyContin has a 4.5 hour half life without explaining that it reaches steady-state in 24-26 hours and can be titrated ever 1-2 days. We should probably remove discussion of half-life. This is one of the reasons for not just rattling off product attributes without providing reasons.<font color=green><b>BALLIE's response on 09/24/2014</b></font>Again - my short hand above. When I present half- life; I do explain WHY I'm sharing that data - and that is followed by steady state/ ability to titrate if needed in 1-2 days. As I try to shorten length of call call notes; I leave certain things out which I touch on in every call. The purpose of call notes is to move the call forward & remember key talking points - since these call notes are for me to look at the next time I do pre call planning - I didn't feel need to write every single word<font color=blue><b>CHUDAKOB added notes on 09/28/2014</b></font>You are correct. You don't have to write every word. Just the important ones. When we discuss a key product attribute, we must put it in context for what you are saying, ie. provide the reasons.
PPLPMDL0020000001	akron	OH	44333	9/8/2014	Told dr to please use Butrans for a patient who he is ready to move a patient from tramadol to hydrocodone. I showed him the Scott profile and asked him if its reasonable to do so? Dr said it is very possible and knows he needs to do it and just needs to be choosy. I told him he does have to be very selective that's why I told him specifically where and when to use it.. Dr said ok. I told him OxyContin is no different and to be selective on when to use it. Gave him the conversion and titration guide.
PPLPMDL0020000001	Waterford	OH	45786	9/8/2014	I-Butrans dosing and titration. OxyContin dosing and titration.W-said that she wrote two scripts of Butrans today
PPLPMDL0020000001	Cleveland Heights	OH	44118	9/8/2014	Reviewed with Opey Rph OxyContin/Butrans Savings cards and Initiation/Titration guides, Said Ok, no new info
PPLPMDL0020000001	Akron	OH	44313	9/8/2014	Spoke with Sam a technician at the pharmacy. I spoke with him about Butrans and OxyCotin attributes, dosing and conversions. I asked him if he could check on copay cards and doses in stock of each product. Sam said they don't need any copay cards and have all doses of OxyContin and the 5mcg of Butrans. I asked why they don't want cards and he said space is too limited.
PPLPMDL0020000001	Mayfield Village	OH	44143	9/8/2014	Findings: Dr. Azar off every MON. Dr Park off every THUR. Discussed both of my ER opioid options for their trusted patients who meet ER opioid indication. Left Pam profile, oxycontin butrans fpi's, OxyContin conversion guide, 9/14 PAP brochures for waiting room.
PPLPMDL0020000001	Cleveland	OH	44113	9/8/2014	Quick OxyContin review of abuse deterrent characteristics every 12hours along with Butrans for those patients requiring around the clock analgesia, said Ok, nothing new learned.
PPLPMDL0020000001	Westlake	OH	44145	9/8/2014	While waiting for dr Seikel, I saw his partner. Dr asked if she could sign something. I explain that I didn't have samples of OxyContin, she said she doesn't use those medications. I said I'm sure you don't. Explained that both OxyContin and Butrans were single entity products doses either every 12 hours for OxyContin or every 7 days for Butrans. She smiled and walked away.
PPLPMDL0020000001	Richmond Heights	OH	44143	9/8/2014	Met. w new pharmacy mgr Kristi. She could not tell me who her regional pharmacy mgr is; yet she did provide district mgr name for their District, which is District 1: Ante Brkic; ante.brkic@cvscaremark.com. Left OxyContin reformulation folder, discussed appropriate q12h dosing as in FPI. they dispense on regular basis. Kristi has not dispensed Butrans since she started at this location. Discussed benefits of Butrans including dosing flexibility. Every 7 days, 1x week buprenorphine release, no dose adjust needed renal, mild/moderate hepatic impaired. No drug interaction warnings w hypertension, cholesterol meds. Left RX patrol flashcard, discussed non branded Purdue resources such as RX patrol. Left Butrans FPI, 1 copy 9/14 PAP brochure, sept national pain awareness pull through.
PPLPMDL0020000001	Lyndhurst	OH	44121	9/8/2014	Met w tech. Pharmacist on phone. Left green RX Patrol flashcard, 1 copy 9/14 PAP brochure. Discussed w tech, RX patrol resources. Then, discussed both of my ER opioid products, OxyContin: CII, dosed q12 h and Butrans: CIII, 1x week or every 7 days buprenorphine release. Nothing new learned. Left 1 Butrans patient guide.
PPLPMDL0020000001	Cleveland Hts	OH	44118	9/8/2014	Reviewed OxyContin every 12hours, 7 tablet strengths along with Butrans for those Med D patients failing on present therapy requiring around the clock analgesia, Said Ok will keep it in mind, Said to book appt with Chi to further discuss
PPLPMDL0020000001	Fairlawn	OH	44333	9/8/2014	Speaking with Amanda who manages savings cards and dr came up to speak with her. I told dr that he needs to be using the OxyContin savings cards and reviewed them for OxyContin and Butrans. Asked dr if he currently has patients who are working and have insurance through their work and are taking an IR opioid for pain? Dr said he has some. I asked if he would consider them for he q12 for, of oxycodone? Dr said ok. I asked him to use Butrans for his Patients on tramadol who need a dose adjustment
PPLPMDL0020000001	Mayfield Village	OH	44143	9/8/2014	Met w OIM Irina. DR Park on vacation, OFF TODAY AND TUES. BACK WED 9/10. Discussed options for patients who meet indication for ER opioid. (verbatim indication) OxyContin, and Butrans. Left 9/14 PAP brochures in waiting room.<font color=blue><b>CHUDAKOB's query on 09/18/2014</b></font>What are 9/14 PAP brochures?<font color=green><b>BALLIE's response on 09/24/2014</b></font>The purple Pain Awareness brochures we get every September (ie 9/14 – September 2014)<font color=blue><b>CHUDAKOB added notes on 09/28/2014</b></font>I see. You mean the "Pain Awareness Month Brochures" Thanks for the clarification.
PPLPMDL0020000001	Westlake	OH	44145	9/8/2014	Dr said its my lucky day with hydrocodone going schedule 2. I said I hope Butrans being schedule three will be a good option for your patients. And talked about OxyContin. Dosed every 12 hours and reformulation briefly. Dr said he wrote Butrans. And walked away!



	Tallmadge	OH	44278	9/9/2014	Met dr for first time and asked about her experience with family practice. Dr said she is just starting so it remains to be seen but has been in the practice for a week. I led off with the tramadol insight for Butrans and discussed the product in depth discussing all key selling attributes, Scott profile, Bup 3015, conversions. I led her that the problem arises when providers treat daily, around the clock pain in 4-6 hour increments. Dr said she agrees and likes the sound of Butrans. Explained the placebo patch and application sites and rotation. I asked her to try it clinically in a motivated patient to gain control of their pain and have it daily and around her clock. Explained OxyContin attributes, appropriate patients, conversions, and start principles. Explained both product insurance plans and copy cards.
PPLPMDL0020000001					
PPLPMDL0020000001	Hudson	OH	44236	9/9/2014	Spoke with Bob the pharmacy manager about OxyContin and Butrans. Discussed attributes, conversions and appropriate patients. Talked to him about their district manager for district #2 and acquired contact information.
PPLPMDL0020000001	Cleveland	OH	44113	9/9/2014	Reviewed Butrans Med D coverage and Savings cards, Said Ok will continue to prescribe for appropriate patients.
	Tallmadge	OH	44278	9/9/2014	Led with IR oxycodone insight and discussed patients he currently has on the product. Dr said he likes OxyContin but has even become cost prohibitive because no insurance wants to pay for it anymore and he finds himself writing MS CONTIN or ER Morphine so he doesn't have to spend all day getting OxyContin approved. I told him I understand and discussed appropriate patients and insurance plans with best access. Discussed Butrans and told him he's missing the boat by not writing it. Told him about attributes, placebo patch, schedule 3, 7 day patch, conversions and Scott profile. Dr said its intriguing and asked about efficacy and safety. Reviewed Bup 3015 and asked him if he'd be happy with a 30% reduction in pain score? Dr said of course. Discussed copy cards and insurance.
PPLPMDL0020000001					
PPLPMDL0020000001	Cleveland	OH	44113	9/9/2014	Reviewed OxyContin every 12hours, 7 tablet strengths along with Butrans for those patients failing on present therapy requiring around the clock analgesia, Said Ok will continue to prescribe for appropriate patients, Asked for Aurora help in reminding Dr.
PPLPMDL0020000001	Tallmadge	OH	44278	9/9/2014	Led with IR oxycodone insight and discussed appropriate patients for OxyContin, attributes, conversions and start principles. Dr said he's more interested in Butrans. Discussed need for OxyContin in patients already on IR oxycodone who have daily around the clock pain. Butrans key selling attributes, conversions, Scott profile and insurance. Reviewed Bup 3015 upon request and discussed cost. Dr said Butrans is cost prohibitive. I asked him how he knows if he hasn't prescribed it yet? Dr laughed and said I had a point but said its branded and assumes its expensive. I asked him what's expensive to him? Dr said more than generics. I told him there is no generic form of Butrans and he can't compare an IR to an ER opioid. Dr said ok. Reviewed insurance plans and paths of least resistance. I told dr he's missing the boat by not prescribing it and needs to use it in the right patient so it proves itself clinically. Dr said ok.
PPLPMDL0020000001					
PPLPMDL0020000001	Westlake	OH	44145	9/9/2014	Reviewed scheduling of OxyContin and Butrans and refills with scheduled opioids. Invited to Butrans program but he is going out of town till next week.
PPLPMDL0020000001	Strongsville	OH	44136	9/9/2014	Julie was very helpful in providing the district managers name, who covers 19 stores in the Cleveland area. (Kelly Cordiak, 330.205.1337). Cvs corporate does the ordering and what they don't get from the cvs warehouse they order from cardinal. They don't stock butrans because they don't see much of it but they do stock some of the lower oxycotin. She wasn't interested in savings cards,
PPLPMDL0020000001	Berea	OH	44017	9/9/2014	Spoke to nada about reformulation and dosing regarding OxyCotin. Using core visual aid as reference, talked Butrans and OxyCotin scheduling
PPLPMDL0020000001	Westlake	OH	44145	9/9/2014	Spoke to Amin the manager pharma it. He wouldn't give me phone number to regional rod manager and he old me to go thru their head quarters. Talked about scheduling,, dosing.
PPLPMDL0020000001	Akron	OH	44305	9/9/2014	Spoke with Matt the pharmacist about OxyContin and Butrans attributes and appropriate candidates. Spoke with him about his district manager and contact information. Albert Downing runs all stores to stow North and all stores in between to canton.
PPLPMDL0020000001	Westlake	OH	44145	9/9/2014	Spoke to Lori a while, she was out of surgery. Talked about refills of scheduling and whew Butrans and OxyContin were. Talked dosing for atc chronic pain patients.
PPLPMDL0020000001	Lyndhurst	OH	44124	9/9/2014	Lunch. Primary care insight. Then Pam profile. Butrans product attributes discussed including no dose adjustment renal, mild & moderate hepatic impaired. For patients like Pam, (went through patient profile) keep Butrans in mind. For your patients taking percocet or oxycodone, why not low dose OxyContin instead? Offer same molecule, I am just asking you to offer controlled release delivery system, indicated for daily, atc, long term pain. Today, this week, when your next patient asks for opioid refill: please pause, re assess and write Butrans or OxyContin! sound good? Yes, replied Dr. Isakov. Discussed 9/14 PAP brochures, he liked resource. Met w his med asst Helen as well, discussed all the above.
PPLPMDL0020000001					
PPLPMDL0020000001	Cleveland	OH	44107	9/9/2014	Spoke to nurse- Found out the doctor got married and I updated her name into the computer and confirmed her location at the hospital in family medicine. Left materials of both products at desk.
PPLPMDL0020000001	Strongsville	OH	44136	9/9/2014	They stock the lower doses of oxycotin. They don't stock butrans because they don't really have anyone on it. They see many patients on Tramadol who should probably be on an ER med. Reviewed messaging we are telling Doctors.
PPLPMDL0020000001	Lyndhurst	OH	44124	9/9/2014	Met w med asst at front window. Left packet of info for Dr. Roda including Branded Butrans FPI, butrans patient tear sheet; OxyContin fpi, 1 copy 9/14 PAP brochures. Discussed formulary status, Med D pull through and let her know updated formulary grids will be delivered in a few weeks. Med D pull through.
PPLPMDL0020000001	Westlake	OH	44145	9/9/2014	Spoke to nurse about both products scheduling and Indication. Left Butrans invites
PPLPMDL0020000001	Westlake	OH	44145	9/9/2014	Talked to nurse about dosing and scheduling of both products
PPLPMDL0020000001	Tallmadge	OH	44278	9/9/2014	Spoke with dr at counter and showed him the Butrans placebo patch. I showed him the initiation and titration guide and told him he's missing opportunities to get patients in pain on IR opioids month after month a viable option. Dr said he forgot about it and will consider it. Nothing else learned.
PPLPMDL0020000001	Lyndhurst	OH	44124	9/9/2014	Lunch. Met w Sarah and student Vince. Primary care insight. Pam profile discussed, why not Butrans first? Or if not comfortable with that, why not Butrans when patient's pain still not controlled on 3-4 Tramadol daily. Sarah says, you know cost is always my objection. Med D pull through. (she doesn't have BWC patients) Also for patient like Pam, you could start on 10 OxyContin q 12 h. both products dosing flexibility, conversion, titration guides to assist you during initiation, titration and maintenance. Discussed, left 1 9/14 PAP brochures and our goal as company to place pain mgt as a Health Care Priority. Sarah, today, this week, if you have patient asking for IR opioid refill, I ask you consider writing Butrans or OxyContin - ok? Yes, I will keep in mind replied Sarah.
PPLPMDL0020000001	Lyndhurst	OH	44124	9/9/2014	Lunch. Primary care insight. For patients who meet ER indication, I have 2 great options for your patients. OxyContin, CII tablets, dosed q 12 h. proven efficacy since 1996, discussed half like and steady state -ability to titrate in 1-2 days if needed. 7 doses, dosing flexibility. Butrans, CII, every 7 days buprenorphine release in matrix delivery/transdermal patch, 4 strengths, dosing flexibility. Scott profile, when you see a patient like Scott keep Butrans top of mind OR low dose OxyContin. BWC reminder, Med D pull through.
PPLPMDL0020000001	Lyndhurst	OH	44124	9/9/2014	Lunch. Primary care insight. Dr surprised at data. My goal is to increase your comfort level, for just 1 or 2 trusted patients, to write an ER opioid such as OxyContin when patient meets ER indication. Low dose OxyContin discussed, steady state, half life and ability to titrate in 1-2 days, CII tablet dosed q 12 h. . Butrans, CIII, 1x week or every 7 day release of buprenorphine in transdermal patch. 4 strengths, no dose adjustment for renal, mild, moderate hepatic impaired. Using Pam profile, today, this week, when you see patient like Pam who needs daily, atc, opioid, please keep low dose OxyContin and Butrans in mind. Sound reasonable? yes replied dr Prada. Also met w her med asst Amy.
PPLPMDL0020000001					
PPLPMDL0020000001	Cleveland	OH	44102	9/9/2014	Discussed with Ed Rph mgr OxyContin every 12hours, along with Butrans Med D oppportunity, CIII, along with Initiaton/Titration, said he will discuss with clinicians.
PPLPMDL0020000001	Cleveland	OH	44113	9/9/2014	Window call, Reviewed OxyContin abuse deterrent characteristics every 12hours along with Butrans, 7 day transdermal, CIII, Initiation/Titration guides, said Ok, and walked away.
PPLPMDL0020000001	Lyndhurst	OH	44124	9/9/2014	Met w OM Julie @ front desk, asked to see Dr. He has 3 in room, 1 patient just walked back. Not a good time. Julie says since he has no partners or other HCP's in office, he just keeps moving. Asked if I could get Drs. permission to place 9/14 PAP at check out. She says they will get knocked over, just leave in waiting room. Left for Dr. 1 Butrans branded fpi, patient tear sheet; OxyContin fpi. Let Julie know I will have updated formulary grids in a few weeks. Med D pull through.
PPLPMDL0020000001	Cleveland	OH	44127	9/9/2014	Discussed treating around the clock pain in 4-6hrincrements, Reviewed OxyContin every 12hours, abuse deterrent characteristics along with Butrans for those patients requiring around the clock analgesia. Said Ok will keep it in mind. Reminded of Med D opportunities
PPLPMDL0020000001	Cleveland	OH	44113	9/9/2014	Reviewed OxyContin abuse deterrent characteristics every 12hours, along with Butrans for those Tramadol failures she is sending to Pain mgmt, Said Ok will consider
PPLPMDL0020000001	Lyndhurst	OH	44124	9/9/2014	Quick mention OxyContin, Butrans when patients meet ER opioid indication and after migraine meds, botox therapy has failed. Left packet of info for Dr. Reed, including 9/14 PAP brochures, and asked OM to get Dr. Reed permission to place at check out. 5 patients in wait room, several back. Unable to speak directly with other HCP. (left packet of info for CNP's Karen and Particia)
PPLPMDL0020000001	Cleveland	OH	44109	9/9/2014	Discussed with Mana,OxyContin every 12hours/abuse deterrent characteristics along with Butrans patient info booklets, Said Ok
PPLPMDL0020000001	Strongsville	OH	44136	9/9/2014	Accidental fast meeting. He doesn't really see reps. While I was talking to Debbie, he came to the front, heard what we were talking about and said he doesn't write narcotics. I said that I understand that he doesn't want to but there are some patients that are treating their around the clock pain in 4-6 hour increments, for those patients an ER opioid might be appropriate. He stopped for a second but didn't respond. He had to leave, but I continued to review Butrans with Debbie and she thought that he might be very interested in hearing more because she said that hydrocodone is going CII.
PPLPMDL0020000001	Tallmadge	OH	44278	9/9/2014	Told dr that both OxyContin and Butrans are viable option for his patients who are being inadequately controlled on IR opioids like tramadol, Norco or Percocet. I told him to focus on patients who are in pain on Norco or Percocet for q12 dingle entity OxyContin and those in pain on tramadol before he goes to Norco to use the schedule 3, 7 day Butrans. Dr said ok and thinks Butrans is a good product. Dr said the Unity policy is to refer out after 90 days of treatment. I told him I understand and asked him why he waits 90 days to use an ER opioid? Dr said that's a good point and will consider it.
PPLPMDL0020000001	Westlake	OH	44145	9/9/2014	Reviewed OxyContin and Butrans schedule status. Reviewed the reformulation using taking points from the core visual aids pages 15. Dr h8d a good amount of med d coverage, silver scripts was her number one plan and she had more med d an commercial. I asked her if the nuke of her chronic pain patients were over 65. She said yes. I asked if that's where she uses OxyContin or if it was someplace else? She said he tends to use OxyContin in frequently but likes OxyContin for certain chronic pain patients. We talked about the special considerations when selecting opioids. Dosing was her biggest concern. I covered the elderly products, single entity and dosing. Dr said she doesn't know anything about Butrans. We reviewed pain scores from naive study, dosing, supplement and patch placement. I focused Butrans after the chronic atc pain patient on Tramadol fails. Dr said she has a few patients that Butrans might work for that are commercial insured. Discussed managed care and coupons. She can't go to the program be cause its her bday Wednesday.
PPLPMDL0020000001	Westlake	OH	44145	9/9/2014	Spike to the dr regarding how she treats chronic pain and she said she rarely uses opioids. Dr said she may refer out and the. Continue he refills but doesn't like to initiate opioids. I if she knew about OxyContin reformulation, she said yes. I asked what about it do you remember and the dr couldn't say. I reviewed limitations and opioid abuse potential and highlighted oage 16 of the core visual aid. Talked about dosing every 12 hours and the single entity. Talked about scheduling and Butrans and OxyContin and what that meant I. Terms of Refills. Dr said she thinks a patch is a great idea. I said if you don't like opioids why would you write Butrans? Dr said she likes the weekly dosing. Reviewed initiation guide and dosing. Dr said she would attend Butrans program.
PPLPMDL0020000001	Cleveland	OH	44113	9/9/2014	Quick OxyContin reminder, abuse deterrent characteristics every 12hours along with Butrans for those patients requiring around the clock analgesia, Said Ok, nothing new learned,
PPLPMDL0020000001	Westlake	OH	44145	9/10/2014	Reviewed OxyContin and the atc chronic pain patient. I asked the doctor who he felt would be the type of appropriate patient he would start OxyContin on. Dr said he didn't have one type of patient. I reviewed the dosing options and highlighted more specifically the lowest dose, the 10mg. Dr said atc would be either three or four doses of any opioid a day chronically, I asked him what would stop him from selecting a control release product like OxyContin or Butrans for the right patient. Dr said managed care, or if the patient won't change their medication because they think the immediate release is working just fine. I said can you see any rationalization for me suggesting the option of moving to OxyContin or Butrans for these atc pain patient instead of dosing in 4 to 6 hour increments they have the option of every 12 hr dosing for OxyContin or weekly dosing with Butrans. Dr said he links those are good options. We review Butrans dosing and appropriate patient types. Reviewed opioid naive study, the pain insight was used. Dr asked about managed care, couONS and conversion information.
PPLPMDL0020000001	Westlake	OH	44145	9/10/2014	Highlighted OxyContin Lowest dose 10 mg and dosing and Butrans 5mgc for patients with atc chronic pain followed by the aarp med d coverage. She can't attend the Butrans program. Dr didn't hve much time to engage so it was pretty much one sided conversation today. Talked the the nurses about managed care coverage and coupons.
PPLPMDL0020000001	Westlake	OH	44145	9/10/2014	Talked about atc dosing with pain patients with chronic long term pain. Discussed why dose in 4 to 6 hr increments vs weekly dosing with Butrans s and every 12 he dosing with OxyContin.
PPLPMDL0020000001	Valley View	OH	44125	9/10/2014	Reviewed OxyContin/Butrans for those appropriate patients, Initiation/Titration,



	Cleveland	OH	44130	9/10/2014	Doctor said she doesn't like to write narcotics. She can not see herself choosing OxyContin for any patient. We reviewed the abuse deterrent characteristics, but that it can still be abused. She wasn't interested in hearing more. She won't consider that right now but is willing to hear more about Butrans. She told me that hydrocodone is going schedule 2 and people are trying to figure out what they will do. She is inclined to send pain patients elsewhere. We discussed that there might be some patients that stay with her and we should talk about who the appropriate patient might be for Butrans. Used insight #12. She said that is a good point and will think about trying butrans for a few patients. We reviewed dosing and titration and she will think about it
PPLPMDL0020000001					
PPLPMDL0020000001	Cleveland	OH	44114	9/10/2014	Reviewed OxyContin abuse deterrent characteristics every 12 hours along with Butrans for those patients requiring the clock analgesia, said ok, will continue to prescribe for appropriate patients, hopes to attend program
PPLPMDL0020000001	Cleveland	OH	44195	9/10/2014	Reviewed OxyContin every 12hours along with Butrans 7 day transdermal, CII, for those patients requiring the clock analgesia. Said Ok, will consider for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44195	9/10/2014	Reviewed OxyContin every 12hrs along with Butrans 7 day transdermal, CII said ok will consider for appropriate patients. Still waiting for Med Svc contact
	Cuyahoga Falls	OH	44223	9/10/2014	Followed up with dr and Liz about the prior authorization for a patient going from Opana ER to OxyContin. Dr said the patient has workers compensation state plan and it was approved for OxyContin through 2015. I told dr and Liz that's great news. Dr said he won't write Opana ER because its not abuse deterrent. Dr said OxyContin works great and his patients have access to it. I told dr to continue converting appropriate patients and to identify IR oxycodone patients who have pain around the clock.
PPLPMDL0020000001					
PPLPMDL0020000001	Cleveland	OH	44114	9/10/2014	Reviewed OxyContin abuse deterrent characteristics every 12 hours, Savings cards along with Butrans for those patients failing on present therapy requiring around the clock analgesia. Said He will continue to help with reminding prescribers about appropriate patients. Confirmed attendance
PPLPMDL0020000001	North Olmsted	OH	44070	9/10/2014	Spoke to Allen about the OxyCotin. Dosing and FDA Insight. Highlighted then Butrans dosing and patch placement. Gathered district manager information and gave it to Barry.
PPLPMDL0020000001	Westlake	OH	44145	9/10/2014	Talked about atc chronic pain and reviewed OxyCotin and butNs. Reminded about his. I formation at the Butrans program tonight.
PPLPMDL0020000001	Westlake	OH	44145	9/10/2014	Talked about atc dosing for patients w Chronic pain- reviewed dosing options with Butrans and OxyContin
PPLPMDL0020000001	Lakewood	OH	44107	9/10/2014	Trying to change to no call file status was told if I made a call it would change it
PPLPMDL0020000001	Westlake	OH	44145	9/10/2014	Talked about OxyContin. Dosing and Butrans s dinner program reminder. Dr said he can't go cause he would be late.
	Westlake	OH	44145	9/10/2014	Talked about Butrans dinner program but the dr said he can't go tonight. I asked what he was curious about and I'll listen for the information being said about it and will let me know. He said not really. Reminded him about managed care
PPLPMDL0020000001	Munroe Falls	OH	44262	9/10/2014	I told dr that I would like her to identify just one patient in the next week who is continuing on an IR opioid and assess them. I asked her to find out if the patient has pain daily and around the clock. If the answer is yes, write the appropriate opioid either OxyContin or Butrans. Dr said that sounds like something she can do. Nothing else learned.
PPLPMDL0020000001	Akron	OH	44305	9/10/2014	Told dr I really want him focusing on existing tramadol patients he's refilling each month as potential Butrans candidates. Reviewed the Scott profile and insurance coverage. Dr said ok he will try. I told him it just takes an extra minute to assess if the patient is in pain around the clock. If they are, write Butrans! Reviewed oh it in indication and patient types.
PPLPMDL0020000001	Westlake	OH	44145	9/10/2014	Discussed. Bynronic pain and medicatio options like OxyContin and Butrans. Follow up with Butrans dinner program, dr said he has plans with his kids and can't attend.
PPLPMDL0020000001	Mayfield Village	OH	44143	9/10/2014	Met w med asst at front window. Left OxyContin fpi, Butrans branded fpi, Scott profile, 1 Butrans medication guide. Discussed scheduling, dosing and titration, both products. Med D pull through. Left 1 9/14 PAP brochure. (left same for Dr. Krishnan)
PPLPMDL0020000001	Cleveland	OH	44109	9/10/2014	Reviewed Butrans/OxyContin initiation titration. Scott profile, said she will relay to Malak Rph mgr
	Mayfield Village	OH	44143	9/10/2014	Primary care insight. Then Pam profile, went through profile and then stated this patient would be appropriate for either 10 mg OxyContin, which you can titrate in 1-2 days if necessary. Proven efficacy since 1996, and similar AE's in young (18+) and elderly patients. Showing flexibility w 7 strengths. A patient like Pam also appropriate for 5 mcg hr start of Butrans 1x week patch. No dose adjustment needed for patients with renal impairment and mild/moderate hepatic impairment. Showed how to write and left 1 Butrans patient guide. Went through patient guide. Left both with Dr. Park. Left OxyContin reformulation folder too. today, this week, when a trusted patient comes in, they are uncontrolled on 2-4 IR opioids daily, I propose you write low dose OxyContin or Butrans. Sound reasonable? Yes, replied Dr. Park.
PPLPMDL0020000001	Uniontown	OH	44685	9/10/2014	lled with the tramadol insight and told him I'm sure he has patients who he is continuing on tramadol and probably even hydrocodone. Dr said he does. Dr said that he has many taking tramadol but not taking more than 4 times a day. I asked dr if he believes that would classify a patient for being in pain around the clock? Dr said probably so. Outlined the Scott profile. Dr asked about conversions from tramadol and titration. Reviewed it from the profile. I asked dr if he would identify a few patients continuing on tramadol who may be appropriate for Butrans? Dr said he will. Asked him to also use OxyContin for those continuing on IR oxycodone and need a dose I asked dr how familiar he is w the OxyContin abuse deterrent characteristics he is? Dr said he knows its abuse deterrent. I showed him from the MVA the 4 tiers of the abuse deterrent properties and reviewed me with him. I told him I would like him to read over the studies on it and left it with him. I asked him to please continue using OxyContin as his go to ER opioid and to just convert one patient a week from IR oxycodone to ER oxycodone. Dr said ok and wanted to know insurance coverage. I handed him the commercial and Medicare grids and told him to focus on commercial insurance which I know he has many of. Dr said yes but the ones who need it have Medicaid or Medicare plans. I told him I understand and to review the grids and I hope he will complete a PA when its necessary. Dr said ok. Left him th Butrans slide guide conversion.
PPLPMDL0020000001	Mayfield Village	OH	44143	9/10/2014	Met w med asst Jess and OM Irina. Left Dr Azar Pam profile, OxyContin conversion guide, Butrans patient guide. Discussed importance of handing out patient education and activating savings cards, trial cards Before patient visits pharmacy. I didn't see OxyContin savings cards (I left Mon 9/8/14) in regular locked cabinet, Irina says dont' worry - they're here - I put in different cabinet.
PPLPMDL0020000001	Akron	OH	44320	9/10/2014	I was able to get the drs attention for a few moments and told him he's missing opportunities to place patients who are in around the clock pain but taking a 4-6 hour medicine like Norco on ER opioids like OxyContin and Butrans. Dr said he's knows but its tough because his patients have little money and the branded products can be expensive. I told him I understand and told him to focus on commercial patients for OxyContin and Caresource and Medicare d as well as commercial for Butrans.
PPLPMDL0020000001	Cleveland	OH	44113	9/10/2014	Reviewed OxyContin every 12hours along with Butrans for those patients requiring around the clock analgesia, Said Ok, confirmed program attendance
PPLPMDL0020000001	Akron	OH	44304	9/10/2014	Quick message at counter. Told him that he can use OxyContin as his go to ER opioid when a patient has daily, around the clock pain and may already be taking the oxycodone molecule but just in 4-6 hour increments. Showed him the indication for Butrans and asked for him to convert that tramadol patient who asks for more and is in around the clock pain.
PPLPMDL0020000001	Akron	OH	44307	9/10/2014	Good discussion with Kyle the pharmacist. Discussed new Butrans and OxyContin indications, Butrans multiple patches and what I'm speaking to physicians about. Kyle told me that opioids are a strange topic right now because of the changes in scheduling of drugs, and physicians continuing to refill IR opioids for long periods of time. I told Kyle he's right and that's right and I'm talking to physicians about that to. Explained OxyContin dosing and conversions and converting patients from IR oxycodone to q12 oxycodone. Kyle told me that the typical quantity of Percocet is 120 and its not as cheap as it was before April this year. Kyle said the 5mg is still around \$30-40 but the 7.5 and 10mg have gone up over \$100 for that quantity.
PPLPMDL0020000001	Olmsted Falls	OH	44138	9/11/2014	Talked about the butrans program. Reviewe appropriate patient type for butrand and OxyContin, reviewed dosing
PPLPMDL0020000001	Westlake	OH	44145	9/11/2014	Dr came back quickly to say hello. Reviewed atc chronic pain patient and discussed dosing options of OxyContin. And Butrans. Dr said what's Butrans. Talked about dosing. Of the patch and initiation guide. Highlighted managed care.
PPLPMDL0020000001	Rocky River	OH	44116	9/11/2014	Dr was not familiar with the reformulation of the OxyContin, reviewed pages 16 of core visual aids talked about the dosing of OxyContin and pointed out the range of dose options. Reviewed the indication and bridged to Butrans. Dr never heard of Butrans. Dr said he does write Tramadol and norco for chronic pain patients. We talked about the molecule and dosing. Reviewed what is atc to him. Dr said if someone has pain several times a day and if two pills a day won't cover the patients pain. We talked about those patients who are appropriate and giving them option of Butrans. Explained dosing, abuse potential and schedule three. Talked about refills with schedule three. Talked about adverse reactions and used the Butrans core aid to show the profile. I asked him if he had patients that would like the dosing option? He said yes. Talked about med d coverage Nd the elderly profile of both products. Reviewed dose adjustment information about Butrans and OxyContin. Highlighted no first pass process with butrans. I asked the doctor how the information sounded to him so far and he said good. I asked if he could it this afternoon if he saw a patient like we discussed he said maybe. After he left, I spoke to the nurses about managed care and coupons. The nurses said they never go into the sample closet or pull Discussed treating around the clock pain in 4-6hr increments, Reviewed Butrans Initiation/Titration, Along with OxyContin every 12hours, 7 tablet strengths. Said He will continue to prescribe for appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44115	9/11/2014	I asked dr how he feels about patients being treated in 4-6 hour increments who have pain on a daily, around the clock basis? Dr said he doesn't even want to treat pain. I told him I'd bet he still prescribes analgesics for pain though. Dr said he does. I told him he's got two possible solutions for patients in daily around the clock pain in OxyContin and Butrans. Told dr about appropriate patient goes for each. Dr said he's thought about Butrans few times. I asked him what kept him from using it? Dr said he actually wasn't sure how to use it. I told dr I appreciate his truthfulness and reviewed the initiation and titration guide along with the Scott profile. I asked dr if she will just try it in his next tramadol or Norco patient meeting the indication? Dr said ok.
PPLPMDL0020000001	Cleveland	OH	44195	9/11/2014	Reviewed OxyContin every 12hours, Savings cards along with Butrans, Initiation/Titration and Savings cards, Said ok, will continue to prescribe for appropriate patients
PPLPMDL0020000001	CLEVELAND	OH	44195	9/11/2014	Discussed OxyContin/Butrans Savings cards with Troy Rph, said most patients are covered and team follow thru with savings. Said also since Dr. Goforth has moved to Neuro dept. hasn't seen as much Butrans
PPLPMDL0020000001	Olmsted Falls	OH	44138	9/11/2014	Discussed dosing and the scheduling of each product. Taked patch placement with Butrans and reviewed side affect profile of Butrans via core visual aid.
PPLPMDL0020000001	Westlake	OH	44145	9/11/2014	Reviewed dosing and scheduling of each product. Reviewed FDA insight and showed oxycotin visual aid pages 16. Reviewed where to place the Butrans patch.
	Stow	OH	44224	9/11/2014	I asked dr if she will commit to reviewing her patients continuing on IR opioids who have been on them for 3 months or longer as candidates for OxyContin or Butrans? Dr said she doesn't have too many continuing on them but can do that. I told her that's great and her patients may like to have the option. Dr agreed. Nothing. Else learned.
PPLPMDL0020000001	Beachwood	OH	44122	9/11/2014	Quick meeting/introduction with the doctor, staff out of the office. She would love to schedule meeting with me, but please call the office tomorrow. Told her what. Promote and that I would like to talk about her patients in around the clock pain and when an ER medication is appropriate from her perspective. She said ok.
PPLPMDL0020000001	Solon	OH	44139	9/11/2014	Quick hi! He appreciated the resources but doesn't have time to talk. He said that butrans is working well and that he can always use more of the patient resources. Pulled thru med d win and that I hope to talk more when I see him in Beachwood next week and that I was hoping to hear who/ when a patient is appropriate for ER meds.
PPLPMDL0020000001	Tallmadge	OH	44278	9/11/2014	Led with the hydrocodone insight and then took him to the Bus 3015 trial in the MVA. Discussed the study objective, inclusion and exclusion criteria and results. I asked dr if he'd be happy with at least a 30% reduction in pain score? Dr said of course. I asked him if he sees pain conditions outlined in the inclusion criteria? Dr said he sees them all and he is treating pain more than he'd even like. I told him if that's true he may be looking for options or solutions. I read him the indication and asked him to identify existing patients who are currently on IR opioids and have daily, around the clock pain. Dr said alright. Reminded him that a second solution could be OxyContin for those on IR oxycodone and in pain around the clock.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	9/11/2014	Met with Glenn in the hospital about Jake Sisko requiring additional information on the warnings with Butrans and seizures. Discussed the need for additional information which I have already sent to Purdue. I asked Glenn how things are going with Butrans and he said better but is doing PAs for every product including even a pain compounding cream. Discussed the rescheduling of hydrocodone to a CII and Glenn said it should mean much more business for the schedule 3 Butrans.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	9/11/2014	Spoke with Donna who is a floater pharmacist for the day. Introduced Butrans and attributes, conversions and patient types. Showed her the placebo patch and then discussed OxyContin as a q12 solution of oxycodone. Showed her to conversions and titration.
PPLPMDL0020000001	Cleveland	OH	44113	9/11/2014	Reviewed Butrans for those patients requiring around the clock analgesia, Initiation/Titration along with OxyContin abuse deterrent characteristics every 12hours, Said Ok was running behind will discuss at Grace Hospital next
PPLPMDL0020000001	Cleveland	OH	44195	9/11/2014	Visited Dept (Falman,Dobbie,Lagman,Davis, Etc) OxyContin/Butrans initiation/Titration, Savings card



PPLPMDL0020000001	Akron	OH	44333	9/12/2014	Discussed over lunch his ability to consider Butrans more frequently but continuing to follow the protocol he set for for the practice of 3-4 pm medicines then trailing Butrans. Dr said with his limited office time he does pretty well. I told him I agree but there is always the ability to continuing to reassess his existing patients on IR opioids. Dr said he will. Discussed pain awareness month and left patient information. Discussed Butrans inclusion and exclusion criteria and Patch rotation and not going back to the original site for 21 days. Dr said he forgot about that. Discussed OxyContin dosing and when he's using it. Dr said he's actually been using it more frequently because most of the referrals they are getting are on oxycodone and its making sense if he can justify opioid treatment to convert them to oxycodone. I asked for continued conversions.
PPLPMDL0020000001	Westlake	OH	44145	9/15/2014	Dr said he never writes OxyContin. Nor will he ever. I asked if it was the molecule or the dosing every 12 hours that makes you hesitant. The dr said it was the name. I said so if the name was Butrans you would write it for appropriate patients? Dr said what is Butrans. Reviewed basics. Dr said it seemed like a interesting option. I asked if he saw someone ext hour if he felt comfortable enough to start a patient. Dr said no. Dr said he needs to read more about it. I gave him an Initiation guided a Butrans study to review.
PPLPMDL0020000001	Fairlawn	OH	44333	9/15/2014	Led off with tramadol insight and then discussed Butrans attributes, conversions, schedule 3,7 day transdermal system. Scott profile and then dr asked about how it works. Reviewed mechanism of action from MVA and asked him if he will try it in a patient who has daily, around the clock pain? Dr said ok and he will consider it.
PPLPMDL0020000001	Parma	OH	44134	9/15/2014	Talked with John the pharmacist. Told him about the messages we are giving doctors for patients in around the clock pain, and where ER opioid might be appropriate. He thought that sounds good. Doctor. Hernandez seems to write the most in the area so he thought I should see him too.
PPLPMDL0020000001	Parma	OH	44134	9/15/2014	Got to know doctor more personally today. He has 4 kids, he is Mexican, wife Chinese, he speaks all three languages and he is originally from Minnesota. He thinks Butrans works very well for his patients in chronic pain and feels that the maximum dose should be higher than 20 mcg. He tells all of his patients to go off of ibuprofen because he feels that it is very bad drug, told me to google it. He has no problem with the "good old standby" OxyContin, but for his patient population, butrans is what he prefers for patients in around the clock pain. He thinks doctors over use the Vicodin and Percocet's, but does think that OxyContin is appropriate for some
PPLPMDL0020000001	Fairlawn	OH	44333	9/15/2014	Quick discussion with Sarah the pharmacist about Butrans and OxyContin. She said she is familiar with OxyContin and has all doses in stock and knows a little about Butrans. Sarah said she thinks they have one patient on it. Discussed attributes, schedule 3,7 day transdermal patch. Dosing, conversions and appropriate patient types.
PPLPMDL0020000001	Parma	OH	44129	9/15/2014	Doctor said that the DEAs all over them and doesn't want them writing opioids. He said that he will not write narcotics. We discussed the abuse deterrent properties of OxyContin, but he said he will not write it. Sounds like he was not aware of the requirements of pain management and is under scrutiny. We talked that maybe schedule 3 butrans might be an option for some of his patients who are in around the clock pain. Reviewed the dosing and titration, who an appropriate patient might be and that it is an option for him. He wouldn't commit to trying it because he just seemed really frustrated by the limitations he feels are out on physicians.
PPLPMDL0020000001	Cleveland	OH	44195	9/15/2014	Discussed treating around the clock pain in 4-6hr increments, Reviewed OxyContin 7 tablet strengths every 12hours along with Butrans for those patients requiring around the clock analgesia, Said he will discuss with attendings, will consider for appropriate patients
PPLPMDL0020000001	Westlake	OH	44145	9/15/2014	Discussed atc dosing and the options like OxyContin and Butrans. Follow up win the Butrans dinner program, am. Dr said he enjoyed the speaker and he found it helpful. I asked him if it made sense to switch to a control release product for the appropriate patient type after Tramadol to Butrans. Dr said it depends but maybe. Highlighted a few commercial plans Nd reminded of the coupons for oxycotinand butrans.
PPLPMDL0020000001	Garfield Hts	OH	44125	9/15/2014	Reviewed OxyContin abuse deterrent characteristics every 12hours, along with Butrans for those Tramadol failures requiring around the clock analgesia, Said Ok will consider for appropriate patients
PPLPMDL0020000001	Akron	OH	44333	9/15/2014	Speaking with office manager Linda and dr walked up to say hello. Dr asked me what's new and I told him about the OxyContin and Butrans indication. I told him I'm hoping he is converting patients to OxyContin or Butrans in appropriate patients who have daily, around the clock pain. Dr said he likes the way the indication is worded and asked me about Medicaid coverage. I asked why he's interested to know? Dr said that they are going to possibly trial having one day a week in each office as their Medicaid patient day. Dr said it may not work but they are hoping to keep their heads on just Medicaid patients in one day which may make it easier. I told him that's not a bad idea and reviewed coverage. Nothing else learned.
PPLPMDL0020000001	Garfield Hts	OH	44125	9/15/2014	Reviewed OxyContin every 12hours, Formulary grids along with Butrans for those patients requiring around the clock analgesia, Said He will consider for appropriate patients, Nothing new learned
PPLPMDL0020000001	Westlake	OH	44145	9/15/2014	Talked about giving patients who have atc chronic pain an option like OxyContin and Butrans, highlighted the lowest of each dose and dosing. Reminded of scheduling and what that means in terms of refills and faxing.
PPLPMDL0020000001	Westlake	OH	44145	9/15/2014	Reviewed dosing and scheduling of each product. Talked Butrans patch placement
PPLPMDL0020000001	Mayfield Village	OH	44143	9/15/2014	Met w med asst at front desk. Confirmed WED lunch. Left OxyContin FPI, Butrans FPI, and protect your meds at home brochure. Med D pull through. Left same packet of info for (Dr. Krishnan)
PPLPMDL0020000001	Mayfield Village	OH	44040	9/15/2014	Findings: new pharm mgr/narcotics buyer is Kelly Rhodes. Met w staff pharmacist Kathy. Discussed HCP messaging regarding responsible prescribing of my ER opioid products. Left OxyContin reformulation folder, Butrans fpi. Discussed OxyContin scheduling, dosing schedule and 7 strengths. Discussed Butrans scheduling, strengths, start dose of 5 mcg/hr, max dose of 20 mcg hr. Discussed, left 2 Butrans patient guides. Left protect your pharmacy brochure/RX patrol sticker/discussed and left 2 9/14 PAP pain awareness brochures. Kelly asked if Butrans can still be called/faxed in? Yes, I replied.
PPLPMDL0020000001	Westlake	OH	44145	9/15/2014	Talked about managed. Care, refills with their appropriate scheduling status and dosing.
PPLPMDL0020000001	Westlake	OH	44145	9/15/2014	Coffee with drs today. Discussed atc dosing for chronic pain patient and what was the downside to offering a patient a control release OxyContin or Butrans option if they were appropriate. Dr said cost. Dr said he has been trying to think of OxyContin earlier before his patients get to 4 or more doses of OxyCodone. Reviewed Extended release insight and also reviewed Butrans dosing and pal. Results of opioid naieve study.
PPLPMDL0020000001	Lyndhurst	OH	44124	9/15/2014	Met w med assts at front desk. DR just walked into room - running behind. Discussed Butrans patient guides, then left 3. Left laminated pain scales and OxyContin fpi. Discussed BWC/Medicare D pull through, for both
PPLPMDL0020000001	Westlake	OH	44145	9/15/2014	Dr stopped in on his way to nursing home. Highlighted products, dosing, indication and managed care of both products. I tried to schedule another visit with the dr cause our time was short today. It they said I could get other lunch and hope for better luck next time.
PPLPMDL0020000001	Westlake	OH	44145	9/15/2014	Saw dr thru window, reviewed managed care for both products.
PPLPMDL0020000001	Mayfield Heights	OH	44143	9/15/2014	Met w med asst at front window. Left packet of info for Dr. Papirova. Discussed both products as ER opioids, for their patients with daily, atc, long term pain. Left OxyContin fpi, one laminated pain scale, 1 9/14 Pain awareness brochure, 1 Butrans initiation guide and 1 patient guide (left same for Drs. Papirova/Petroff)
PPLPMDL0020000001	Mayfield Village	OH	44143	9/15/2014	Hallway. Primary care insight. Pam profile presented, OxyContin geriatric trial data, using FPI. Today, when you see patient like Pam, who needs an ER opioid, Please keep low dose OxyContin in mind (start 10 mg) OR Butrans (starting dose) Ok replied Dr. Park.
PPLPMDL0020000001	Westlake	OH	44145	9/15/2014	Spoke to the nurses about the Butrans program. highlighted scheduling and managed care with them on both products.
PPLPMDL0020000001	Richmond Hts	OH	44143	9/15/2014	Hallway. Findings: DR VILINSKY ON VACATION/2 WKS/BACK SEPT 29. Dr Stancus,said I don't have time to listen. Can I sign? No, I responded: the next time you go to refill an ir opioid, I propose you re assess that rx; and consider an ER opioid like OxyContin or Butrans; when patients need daily, atc, opioid for long term. Left OxyContin fpi. Left BUP 3024 study, asked him to read. Left Butrans iniation guide, 1 patient guide. Left pack of protect your meds at home for all HCP's.
PPLPMDL0020000001	Lyndhurst	OH	44124	9/15/2014	Lunch. Tramadol insight. Then discussed Butrans matrix technology and used CNP page in core vis aid. Other Butrans prodct attributes discussed include: no first pass metabolism, no dose adjustment needed for renal, mild/moderate hepatic impaired. Asked Karen today, this week, when she goes to refill an ir OPIOID, consider if patient might need rather, an ER opioid like Butrans or OxyContin if pain is daily, atc, long term. Medicare D pull through.
PPLPMDL0020000001	Westlake	OH	44145	9/15/2014	Discussed his role working with the residents. We reviewed what he thought they knew about OxyContin. And Butrans. The dr said...what is Butrans. I said point in case. Reviewed the chronic pain patient who needs atc therapy. Gave the extended release insight, dr said he doesn't treat many chronic pain patients. We talked about the hypothetical patient he may see next. Focused on after Tramadol for Butrans and after norco for OxyCotin.
PPLPMDL0020000001	Mayfield Heights	OH	44124	9/15/2014	Reviewed scheduling in terms of refills for each products. Reviewed dosing and Initiation guide for Butrans.
PPLPMDL0020000001	westlake	OH	44011	9/15/2014	Met w DR V med asst Abbie, Let her know what I'm leaving for dr vilinsky. Two options for your patients who meet ER opioid indication: OxyContin, Cii, and Butrans, Ciii, 1x week or every 7 day/transdermal patch. Left packet of info for Dr including Butrans and OxyContin fpi, 1 Butrans patient guide, protect your practice green brochures. (left same packet for Dr. Roxana.) Dr out 2 weeks, back after MON SEPT 29.
PPLPMDL0020000001	Stow	OH	44224	9/15/2014	Reviewed OxyContin and Butrans dosing. Dr said he liked and was well familiar with both products. Dr said he has had great luck with Butrans....I asked him why he likes it. Dr said its easy. We got into a discussion on why he thinks Butrans s is an easy product for patients. Dr said dosing and refills. We talked about OxyContin dosing...and managed care
PPLPMDL0020000001	Westlake	OH	44145	9/15/2014	Told dr that he can be using Butrans for his patients before he goes to a generic ER morphine and it will be cost effective for commercial patients, Medicare and caresource with a PA. Dr said he knows but has to do what works for his patients. I told him I understand and asked him to just try it in the right patient and allow it to prove itself. Dr said ok. Left him copy cards and asked him to use his BEP kits. I asked him when his last day is and he said October 3.
PPLPMDL0020000001	Westlake	OH	44145	9/15/2014	Reviewed the atc patient type that may be appropriate for chronic pain medication. Dr said she sees spinal stenosis and osteoarthritis the most. I asked how comfortable was she treating chronic pain such as the patients she described for me. Dr said is he will usually try two pain medications but if they need further adjustments she will refer the. To pain management. Reviewed the norco patient to OxyContin and positioned a failed Tramadol patient to Butrans. Dr was unfamiliar with the details of Butrans so we reviewed Initiation, patch placement and use of break thru medications. Dr said she will think about Butrans
PPLPMDL0020000001	Parma	OH	44129	9/15/2014	Doctor said he is happy to see me but is hoping I come back soon next week because he is behind. I asked him if he has started anyone on butrans or OxyContin lately? He said he has started a few patients. He wanted to know how often he can titrate with OxyContin. I told him he can titrate with every 1-2 days. Asked him when he typically follows up with his patients and he said usually one month unless they call him. He asked if I could stop in again next week.
PPLPMDL0020000001	Cleveland	OH	44125	9/15/2014	Reviewed with Tech, OxyContin/Butrans Initiation/Titration guides
PPLPMDL0020000001	Parma	OH	44129	9/15/2014	Pharmacist was busy, said they really don't do a lot of narcotics. She liked that I was talking to physicans about where ER opioids might be appropriate for some patients in around the clock pain. She feels comfortable with butrans dosing, told her it can be titrated at 3 days. She did not need savings cards right now.
PPLPMDL0020000001	Garfield Heights	OH	44125	9/15/2014	Reviewed OxyContin/Butrans with Tech Barb, Initiation/Titration, Savings cards, no new info learned
PPLPMDL0020000001	Lyndhurst	OH	44124	9/15/2014	Lunch. Discussed product attributes for OxyContin including single entity opioid, indicated for patients with daily, atc, long term pain. Dr. Reed says OxyContin is so difficult to titrate and to get covered. About 5 yrs ago, she stated she had no issues. Over past few years and especially over past few months, very difficult. For which plans I asked: for all, commercial, medicaid, medicare - it's creeping into commercial patients most recently. All the step edits make it difficult to sue your products. She states its much easier to get Nucynta and Opana ER. She states: ideally she would like to write q8: 1 tablet in am and 2 tablets in pm. She stated a "titration pack" is needed - she states they do that with anti-seizure & other branded meds. She says its inconvenient and costly for her to write OxyContin, because patient has more office visits, more co pays and has to depend on someone driving them to their appts; since you are not supposed to drive when starting an ER opioid until you know how it effects you. For Butrans, she states she recently had great success with female patient who found she had allerby/intolerance to Tylenol. Patient says it's working great. She also thinks a 14-day starter pack/would be great for OxyContin. She feels plans making it difficult for patients with legitimate pain to get relief/prooper pain control. Let Dr. Reed know about 14-day savings card opportunity with OxyContin with 14-day rx for OxyContin. She replied, that's a start.
PPLPMDL0020000001	Lyndhurst	OH	44124	9/15/2014	Lunch. Focused on product attributes and verbatim indication (s). For patients who've followed your therapy ladder, pain still not controlled on non opioid or ir opioid - consider OxyContin or Butrans to match patients pain schedule. OxyContin: steady state 24-36 hrs, so ability to titrate to another strength in just 1-2 days, single entity, similar AE's in clinical studies in young/old subjects. Dosing flexibility/7 strengths. Proven efficacy since 1996, FDA approved tiered labeling. Butrans: single entity opioid, no first pass metabolism, dosing flexibility, matrix technology/not reservoir, can be called/faxed in. reminder \$30 savings OxyContin; trial/savings Butrans. Medicare D pull through.

PPLPMDL0020000001	Akron	OH	44333	9/15/2014	Quick hello at counter as she brought a patient up for checkout. Told Stephanie about the new indications for Butrans and OxyContin and told her to identify patients who have daily, around the clock pain. She said ok and is still really only seeing more acute pain. I told her sometimes acute pain manifests into around the clock pain and there would be the opportunity. Stephanie said that makes sense and she does see that. She asked for the Butrans conversions. Gave her a initiation and titration guide.
PPLPMDL0020000001	akron	OH	44333	9/15/2014	Caught dr in hallway and told him he should be writing Butrans this week. I told him to identify motivated patients who are continuing on tramadol and he is either considering refilling it or moving to Norco. I told him if the patient is in pain on a daily around the clock basis that is his Butrans patient. Showed him the conversions and asked for him to write this week again. Dr said alright and he has been looking. Showed him the OxyContin conversions from the MVA and told him to also identify patients who are already on oxycodone and are in pain to write oxycodone q12.
PPLPMDL0020000001	Mayfield Village	OH	44143	9/15/2014	Met w pharmacy mgr David Braginsky. Discussed, left non branded Purdue resources such as 9/14 PAP pain awareness brochure and protect your pharmacy brochure. Left OxyContin reformulation folder, Butrans fpi and 1 Butrans patient guide. Communication gap; difficult to engage. Discussed Oxycontin as a CII, single entity, ER opioid for daily, atc, long term pain. Discussed Butrans as CIII, 1x week patch (every 7 days reinforced). Asked him to call me if he has any questions.
PPLPMDL0020000001	Fairlawn	OH	44333	9/15/2014	Asked Dee up front to speak with dr Dy to follow up from lunch appointment. Ended up speaking with dr and told her again about the IR oxycodone insight and told her its important so it bears repeating. I asked her if see currently has patients continuing on IR oxycodone. Dr said not many but yes. I showed her the conversions and asked for her its a 1:1 conversion and to just change the delivery to q12 when the patient has pain on a daily, around the clock basis. Dr said ok. Dr asked me about Butrans and to review the conversions. Reviewed them from the MVA and asked her to use it when a patient on tramadol needs a dose adjustment and also has pain around the clock. Dr said great. I asked if she will use it and she said when she finds the right one.
PPLPMDL0020000001	Akron	OH	44333	9/15/2014	Recapped our last discussion and started off with tramadol insight. Dr told me that she doesn't want to treat pain at all and especially ER opioids. I asked dr if she refills or writes IR opioids? Dr said she doesn't want to but does. I told her I get she has refilled them at least three times...dr agreed. I told her that she is already treating pain around the clock which is for ER opioids but she is doing it in 4-6 hour increments. Dr said I'm right and doesn't know what to do and said she ok with referring. I told her that's ok to refer but told her there are patients who are motivated to get their pain under control. I reviewed Scott profile, attributes, placebo patch, application sites and conversions. She said she will write. Reviewed copy cards. Discussed OxyContin dosing, conversions and start principles.
PPLPMDL0020000001	Cleveland	OH	44195	9/15/2014	Reviewed OxyContin every 12hours, 7 tablet strengths along with Butrans for those patients requiring around the clock analgesia, Said Ok, will help in discussing with Fellows
PPLPMDL0020000001	Cleveland	OH	44195	9/15/2014	Quick review of OxyContin every 12hours, 7tablet strengths along with Butrans for those patients requiring around the clock pain, Said Ok will keep it in mind
PPLPMDL0020000001	Fairlawn	OH	44333	9/15/2014	Discussed the IR oxycodone insight and discussed using OxyContin for his patients already on IR oxycodone. Discussed start principles, attributes, q12 dosing, and patient type selection. Reviewed Butrans dosing, indication, conversions, mechanism of action, partial mu agonist, and Scott profile. Discussed treating daily, around the clock pain in 4-6 hour increments. Dr talked about using in Hospice and they would not approve it. Talked about the insurances he uses the most and where Butrans and OxyContin are covered.
PPLPMDL0020000001	Fairlawn	OH	44333	9/15/2014	Recapped our last discussion about Butrans discussing attributes, Scott profile, dosing, conversions, and identifying appropriate candidates. Told dr that he cannot continue to treat daily, around the clock pain in 4-6 hour increments. Discussed indication and referring he might be doing for pain patients. I told him there may be come patients he continues to refill IR opioids for who may be candidates for Butrans.
PPLPMDL0020000001	Mayfield Heights	OH	44124	9/15/2014	Met w tech Tay. Also quick hello to pharmacist Mala. Left Tay with OxyContin reformulation folder, Butrans FPI & 2 Butrans patient guides. Left 2 9/14 PAP pain awareness brochures. Since it's Monday, Tay doesn't have time to check stocking for my products. Left business card, asked Tay/Mala to call w any questions. Confirmed Steven Liko remains as pharm mgr/ narcotics buyer.
PPLPMDL0020000001	Fairlawn	OH	44333	9/15/2014	Talked to sue about the OxyContin savings cards and that she needs to discuss with the patient she had in last time with no insurance and couldn't afford it. I told Sue to speak with the patient about the ability of the card being used twice in the month every 14 days. Sue said she didn't know that and that the patient is due in later this week and will discuss it with her. I asked when they order and receive their scheduled medicines? Sue said they get shipments every day of the week and Gilbert and Jessica order the scheduled medicines. She said they just order them when they need them and do it through their on line ordering system.
PPLPMDL0020000001	Garfield Heights	OH	44125	9/16/2014	Discussed with Floater Anne Rph, reviewed OxyContin/Butrans Savings cards, Butrans patient info booklets, said ok will consider for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44106	9/16/2014	Reviewed OxyContin every 12hours, 7 tablet strengths along with Butrans Med D opportunity, for those patients requiring around the clock analgesia. Said Ok will continue to prescribe for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44106	9/16/2014	Reviewed OxyContin every 12hours, 7 tablet strengths along with Butrans Initiation/Titration, Med D formulary opportunities along with Savings Cards. Said Ok will continue to prescribe for appropriate patients. Confirmed lunch appt for next month.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	9/16/2014	Spoke with Amy the pharmacist and discussed the OxyContin indication and solution that OxyContin brings to patients who have pain on a daily, around the clock basis. Amy said she agrees and that they dispense a lot of short acting opioids every day. I told her that's a serious issue because these drs are treating around the clock pain in 4-6 hour increments. Reviewed dosing, conversions and appropriate patient types for both OxyContin and Butrans. Amy said that she thinks they have a handful of patients on it. Discussed copy cards and patient resources with Partners Against Pain.
PPLPMDL0020000001	Cleveland	OH	44106	9/16/2014	Reviewed with Marge Rph OxyContin and Butrans patient info booklets, Med D opportunities, Said Ok will continue to advise when appropriate
PPLPMDL0020000001	Tallmadge	OH	44278	9/16/2014	Spoke with Ken the pharmacist and discussed Butrans indication, dosing, schedule 3, 7 day transdermal patch, conversions and application sites. Ken said he has dispensed it a couple of times and said Butrans might be utilized more when hydrocodone goes to a schedule 2 in October. I told him I hope he's right. Discussed OxyContin attributes, conversions and 1:1 ratio with Percocet.
PPLPMDL0020000001	Cleveland	OH	44106	9/16/2014	Quick review of OxyContin Savings cards along with Butrans 7 Day transdermal for those patients requiring around the clock analgesia, Said Ok, nothing new learned
PPLPMDL0020000001	Solon	OH	44139	9/16/2014	I was handing information to the receptionist when the doctor came up. Told her that this is information for her review, that may benefit her patients in around the clock pain. Told her I promote OxyContin and butrans.
PPLPMDL0020000001	Twinsburg	OH	44087	9/16/2014	Does she consider ER opioids for her patients in around the clock pain? She said yes she writes a small amount of OxyContin, but doesn't start with that. She hasn't really used butrans. Reviewed that is is 7 day schedule 3 transdermal pain patch. She took the titration guide and had to leave.
PPLPMDL0020000001	Cleveland	OH	44106	9/16/2014	Quick introduction. They don't see to many scripts for ER opioids, but think that the doctors write too many IR. She had called doctors about their prescribing but they are never to receptive. Reviewed abuse deterrent properties which she is impressed with, but says it's probably not enough. Reviewed butrans dosing and titration.
PPLPMDL0020000001	Cleveland	OH	44278	9/16/2014	Visited Pain/Onc dept. OxyContin / Butrans Initiation/Titration guides along with Savings cards
PPLPMDL0020000001	Tallmadge	OH	44278	9/16/2014	Spoke with dr through the window and told him the indication for OxyContin and then told him the indication for OxyContin. I told him I'm hoping he can identify patients already on IR oxycodone who are now meeting the indication for q12 oxycodone. Dr said it makes sense and asked for a dosing guide. Gave him a conversion and titration guide and reminded him its. 1:1 conversion with Percocet and OxyContin is a single entity opioid. Dr said ok and he will try and look. I told him to also take a look at the dosing and patient types appropriate for Butrans. Dr said ok. Nothing else learned.
PPLPMDL0020000001	Mayfield Village	OH	44143	9/16/2014	Met w Dr. Azar in his personal office. Dr says OxyContin is hard to get covered recently and they don't allow use of OxyContin in Hospice Centers any longer. He perceives product to be expensive. Discussed formulary updates/commercial/cash \$30 monthly cop pay for any strength. For patients taking LESS than 80 mg morphine equivalent, Butrans would be appropriate. Since Butrans is CIII, it can be called /faxed in w refills. Discussed BUP 3024/3015. Opioid naive/experienced dosing/using Butrans initiation guide. Dr. Azar, says, I probably should use Butrans more. I told him I will be back next week to remind him!
PPLPMDL0020000001	Cleveland	OH	44104	9/16/2014	Quick Butrans reminder for those Med D patients requiring around the clock analgesia along with OxyContin every 12hours Said ok, nothing new learned
PPLPMDL0020000001	Cleveland	OH	44112	9/16/2014	Reviewed OxyContin abuse deterrent characteristics every 12hours, Along with Butrans for those patients requiring around the clock analgesia, Said Ok, nothing new learned
PPLPMDL0020000001	Akron	OH	44310	9/16/2014	Good discussion over lunch and spoke with dr about Butrans Bup 3015 and hydrocodone insight. Dr said that he agrees with the data and he finds that hydrocodone going schedule 2 might make it easier to trial Butrans. I told him I hop that holds true. Reviewed conversions and where he's using it most? Dr said that most of his referrals are on either moderate doses of hydrocodone or Percocet so he's trying Butrans as soon as he can. Dr told me that the Kent office now with Unity along with Rigby, wells, Shanafelt, Uhall have all given him patients and he's almost over busy. Dr said he may be adding a NP. Discussed ixchintin strep bytes, doses and conversions. Copy cards and partners against pain resources.
PPLPMDL0020000001	Twinsburg	OH	44087	9/16/2014	font color=blue><b>CHUDAKOB's query on 09/29/2014</b></font>Is this a new product I am not aware of? "Discussed ixchintin strep bytes, doses and conversions.<font color=green><b>REICHCL's response on 10/14/2014</b></font>Got it. OxyContin. Great to know you are ready so closely.<font color=blue><b>CHUDAKOB closed the query on 10/16/2014</b></font>When pain patients come in they usually have the information they need from their doctors. They want to understand how many pills they can take and when. She thinks they might take more than they need because they are " afraid " of the pain. I asked what she thought of ER instead of IR for that patient if they are in around the clock pain? She said there is an absolute benefit to ER for patients in chronic pain because their pain is managed and they don't have to be worrying about their pills as much.
PPLPMDL0020000001	Valley View	OH	44125	9/16/2014	Presented to RPH staff and Discussed treating around the clock pain in 4-6hr increments, Presented OxyContin abuse deterrent characteristics every 12hour, along with Butrans for those patients requiring around the clock analgesia, Med D update along with Savings cards,
PPLPMDL0020000001	Mayfield Village	OH	44143	9/16/2014	Quick hallway. Left Dr Park OxyContin conversion guide/fpi, Butrans fpi and initiation guide. Also left "protect your meds at home" brochures for both HCPs. Asked Dr park, to consider OxyContin for trusted patients who need daily, atc, opioid long term. For patients requiring less than 80 mg morphine equivalent, Butrans 1x week transdermal patch would be appropriate. Asked Dr Park to review both guides and will follow up next week.
PPLPMDL0020000001	Akron	OH	44305	9/16/2014	I showed dr from the MVA the indication for Butrans and reviewed it with him. I told him that this week I want him to identify existing patients who are on some type of short acting product and have daily, around the clock pain. I asked dr if he would do that this week and when he's ready to refill the short acting products to ask himself if the patients condition presents them with daily, around the clock pain? Dr said he knows he needs to do that. I asked him if he would also identify just one patient on Percocet who also has pain around the clock and convert them to q12 oxycodone? Dr said alright. Reviewed insurance coverages.
PPLPMDL0020000001	Cleveland	OH	44130	9/17/2014	Doctor doesn't really write ER except OxyContin because most of his patients come to him already on IR Percocet or Vicodin. Patients think that IR works better because that is what they are used to. When he tries other ER he just gets call backs from patients. He suggests the ER for appropriate patients, if they don't want it they can go somewhere else. He thinks oxycotin works well, he starts low and titrates up as needed. When reviewing butrans, he said that patients reject it whether it is working or not. He admitted he doesn't have much experience with it and thought it was cost prohibitive because of insurance. We spent time discussing who the appropriate patient might be. Reviewed, Pam as a possible patient he might see, opioid naive, or Tramadol patient that he doesn't want to titrate. We reviewed dosing and titration, managed care. He said he will prescribe it if he comes across the right patient type we discussed.
PPLPMDL0020000001	Westlake	OH	44145	9/17/2014	quick wave and mentioned dosing options for oxycotin and when dosed. thats it. Spoke to the nurse kim and office manager lori for a while. They were able to get me a lunch on friday to talk with brian dyko and the doctor more
PPLPMDL0020000001	Berea	OH	44017	9/17/2014	Talked about the dosing and managed care for oxycotin and butrans. That's all.
PPLPMDL0020000001	Akron	OH	44313	9/17/2014	I asked josh who he is seeing prescribing OxyContin most often? Josh said he sees it from Petrus, Jones and some from various other physicians. I asked him if he's noticing any switches from IR oxycodone to ER OxyContin? Josh said he's really not but said maybe other pharmacist at his location might be. Reviewed dosing and conversions and then discussed conversions for Butrans along with dosing and appropriate patient types like Scott.
PPLPMDL0020000001	Cleveland	OH	44113	9/17/2014	Quick review of OxyContin every 12hours along with Butrans Med D opportunity, said ok will continue to prescribe for appropriate patients, asked Aurora for help reminding Dr
PPLPMDL0020000001	Cleveland	OH	44113	9/17/2014	Reviewed OxyContin every 12hours, 7 tablet strengths, Formulary along with Butrans CII, for those patients requiring around the clock analgesia, Said Ok, will consider for appropriate patients,
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	9/17/2014	Dr asked me how he should be dosing OxyContin? I asked him how he has been doing it? Dr asked me if its dosed every 12 hours and I told him yes. Dr said he's writing it bid and knew that wasn't right. I discussed the difference with him. Discussed when and where to use OxyContin and conversions. Reviewed Butrans dosing and appropriate patient types.



	Akron	OH	44313	9/17/2014	Able to get a minute with dr at window and showed him the OxyContin copy card and asked him if he has patients with private insurance who are on OxyContin? Dr said he has them. I reviewed the copayment card and use once in 14 days. Dr said he wasn't aware if it and told Tina his ma to locate those on OxyContin and discuss the card with them. I asked dr to please convert patients who have around the clock pain from Percocet to OxyContin. I also asked dr to please continue to find candidates for Butrans and also those that have Caresource,private insurance or select Medicare plans.
PPLPMDL0020000001	Mayfield Village	OH	44143	9/17/2014	LUNCH. total office call. While waiting for all hcp's to come back to lunch; met with med assts to discuss both OxyContin and Butrans as single entity, ER opioids, for patients that (verbatim indication) Dr Ashraf: summarized last discussion from previous lunch. Medicare D pull through. Asked Dr today, this week, when he sees his next patient that is suffering from daily, atc, long term pain - I propose he write OxyContin and Butrans. Sound reasonable? Yes replied dr ashraf.
PPLPMDL0020000001	Berea	OH	44017	9/17/2014	Returned- gave the pharmacist sme information on schedule 3 butrans and dosing. Talked about how to place the patch and discard the patch per the slim jim visual aid which I left behind for the pharmacist.
PPLPMDL0020000001	Olmsted Falls	OH	44138	9/17/2014	Reviewed dosing and scheduling of both products. reviewed the patch placement and how to discard.
PPLPMDL0020000001	Akron	OH	44303	9/17/2014	Discussed OxyContin attributes with Rod and conversions. I asked him if he is seeing any new prescriptions and Rod said he sees it pretty frequently but almost all of them are refills. Rod said that he isn't seeing any patients being converted from Percocet to OxyContin. I reviewed the copy cards for OxyContin and one use in 14 days. Reviewed Butrans Scott profile and conversions.
PPLPMDL0020000001	Westlake	OH	44145	9/17/2014	in an effort to increase my frequency I stopped in to see the office, asked if I could do anything for them and if they needed coffee or if the doctor wanted a snack. But they said yes they can't do anything like that causey of new hospital rules. They appreciated the offer they said. I left literature of both products and highlighted a few managed care plans.
PPLPMDL0020000001	Mayfield Village	OH	44143	9/17/2014	CHANGED REPS HOURS ALLOWED: only Wed am now, 10-11:30. Met w med asst asst at front. Left packet of info for Dr. Solomon including: OxyContin reformulation guide, conversion guide, Butrans fpi, Pam profile, initiation guide. (left same for Drs. Sahlani & Kendis)
PPLPMDL0020000001	Akron	OH	44333	9/17/2014	Short conversation with Elise about the types of patients she is starting on OxyContin. Elise said it works most of the time taking a referred patient on Percocet and switch them to OxyContin. Elise said that the problem is getting it approved because lots of them have Medicaid or Medicare and they are tough to get approved. Spoke with Brittany who does the PA's and she said she gets at least one a week and the approvals are about 70% denied because they want methadone or some other ER opioid before OxyContin. Elise said she usually has to write a letter to get OxyContin approved because she thinks the plan doesn't even really look at the previous failures. Elise said that usually gets the approval. Discussed Butrans with approvals as well and she said its easier to get approved and finds that Caresource is the easiest for Medicaid. Asked Elise for continued business.
PPLPMDL0020000001	Olmsted Falls	OH	44138	9/17/2014	talked about butrans and oxycontin scheduling and dosing. reviewed the lowest dose of each product and titration. highlighted a few major insurance plans and covered coupons.
PPLPMDL0020000001	Mayfield Village	OH	44143	9/17/2014	Lunch. Summarized last discussion/last lunch. Focused on OxyContin product attributes including proven efficacy since 1996, similar AE's in young and elderly, steady state 24-36 hrs,ability to titrate if needed in 1-2 days. Opioid naive doses: 10 mg, every 12 hr release of oxycodone; FDA draft guidance. Butrans, matrix technology, 7-day transdermal patch; steady state 72 hrs; tolerable in opioid naive/tolerant, dosing flexibility, no first pass metabolism. Asked for business today, remainder of week; when you have a patient that is suffering from pain daily, atc, long term: keep OxyContin and Butrans "top of mind." Sound reasonable? Yes, replied Dr.Med D pull lunch. Product attributes for OxyContin including: proven efficacy since 1996, single entity opioid, steady state 24-36 hrs/can titrate in 1-2 days, 7 strengths. Product attributes for Butrans discussed including: no first pass metabolism, no dose adjustment for renal, mild/moderate impairment; steady state 72 hours; dosing flexibility. Med D pull through. Discussed & let, 9/14 PAP pain awareness brochure, protect your meds at home brochure. Window call reviewed OxyContin abuse deterrent characteristics every 12hours, along with Butrans for those patients requiring around the clock analgesia, Said Ok, referring patients out to pain mgmnt but will consider
PPLPMDL0020000001	Cleveland	OH	44113	9/17/2014	Reviewed OxyContin 7 tablet strengths along with Butrans for those patients failing on present therapy requiring around the clock analgesia, Said Ok
PPLPMDL0020000001	Cleveland	OH	44113	9/17/2014	Reviewed OxyContin 7 tablet strengths along with Butrans for those patients failing on present therapy requiring around the clock analgesia, Said Ok
PPLPMDL0020000001	Stow	OH	44224	9/17/2014	Met new stow office manager Anna and was discussing products with her in hallway in back of office and dr Fouad came up and I asked him if he's continuing to prescribe OxyContin for his patients needing a q12 opioid? Dr said he is and said its his go to ER opioid. I told him that's great and then reviewed e copaycard to dr and Anna. I asked dr if he will continue to prescribe Butrans for those failing tramadol or Norco? Dr said he uses it but OxyContin is his go to. Nothing else learned.
PPLPMDL0020000001	Munroe Falls	OH	44262	9/17/2014	Short discussion about OxyContin and Butrans and told her to focus on patients who come back for follow up appointments and taking IR opioids around the clock for pain. Dr said she is already starting to pay closer attention. I told her to let me know when she has questions. I told her to continue using Butrans because she has not only had good clinical success but there is opportunity amongst her existing patients.
PPLPMDL0020000001	Akron	OH	44307	9/17/2014	I asked dr how often he is telling his patients continuing on IR oxycodone the option of the q12 oxycodone? Dr said not enough. Dr said he really doesn't have many patients on Percocet more than twice a day but said he has so e that take them 3-5 times a day. I told dr those are the ones that may be appropriate for OxyContin. Dr agreed. I reviewed the Butrans patch attributes with him and told him I want him to try it and he said ok.
PPLPMDL0020000001	Cleveland	OH	44114	9/17/2014	Reviewed OxyContin every 12hours,abuse deterrent characteristics, along with Butrans Med D formulary opportunities, Said Ok will continue to consider for appropriate patients, Asked John for help reminding Dr.
PPLPMDL0020000001	Cleveland	OH	44109	9/17/2014	Intro. Reviewed OxyContin/Butrans with Tech Trish, will relay info - left card and Initiation/Titration guides for Rob Rph
PPLPMDL0020000001	Mayfield Village	OH	44124	9/17/2014	Lunch. Penny has limited office hours, as she's responsible for the practice's hospital visits. What opioids she can select for in patients at hospital, depends on what opioids are available per hospital pharmacy. Asked her to consider both of my products for patients she sees during office hours. Primary care insight, then product attributes for both products. Focused on low dose OxyContin, 10 mg opioid naive dose, gender differences in oxycodone clearance; differences in dosing for elderly/elderly, debilitated. Dose 1/2 to 1/3 patients taking CNS depressants. (all from fpi) FDA guidance, abuse Every 12 hour release of oxycodone, patients directed to take 1 tablet 8 am, 1 tablet 8 pm. Left conversion guide/showed START principles. Butrans: using slider doser; discussed opioid naive start dose & opioid experienced start dose. Butrans (using NP/PAP page in Butrans core vis aid), matrix technology, 1 x/week transdermal patch, tolerated in opioid naive (BUP 3014) and experienced. Can be called/faxed in. Formulary, Medicaid, Med D pull through.
PPLPMDL0020000001	Cleveland	OH	44113	9/17/2014	Quick review of OxyContin every 12hours, 7 tablet strengths along with Butrans for those patients requiring around the clock analgesia, Said Ok, referred to David PA
PPLPMDL0020000001	Mayfield Village	OH	44143	9/17/2014	Lunch. The next time you see a patient with daily, atc, long term pain; I'd like you to consider an ER opioid like OxyContin or Butrans. Delivered primary care insight. You have 2 good options: OxyContin, CII, controlled release tablet, offering release of oxycodone every 12 hrs. Butrans, CIII, transdermal patch, matrix technology, 7 days of buprenorphine release. Patients receive 4 patches per month. Butrans can be called/faxed in. Med D pull through. Showed, left 1 Butrans patient guide.
PPLPMDL0020000001	Akron	OH	44333	9/17/2014	Spoke with dr and Brittany about a patient that dr had who he prescribed OxyContin for the first time and the PA was denied because ER morphine is the product of choice first before UHC Community Plan would pay for it. I asked Brittany to make me copy of the PA and the denial. While reviewing the previous medicines the patient had tried and failed I noticed that Brittany wrote morphine 15mg once a bedtime. I asked dr Vucetic if the patient had been on Morohine IR or ER? Dr looked up the information and it showed that the patient did try and fail MS Contin. Brittany said she write it wright on the PA and will call UHC today to get corrected so they can approve OxyContin. Reviewed OxyContin copy card and Butrans patient types who have has 3-4 prns and need an ER option.
PPLPMDL0020000001	Westlake	OH	44145	9/18/2014	spoke to dr about oxycontin dosing and the fda insight and pages 15 of the core visual aid. dr mentioned the move hydrocodone products are making to schedule 2 and I asked her if butrans being just about the only opioid left in that category will be used more for appropriate patients now. She thought it would. I reminded her if she happens to see a patient that needs an atc pain medication that butrans and oxycontin were covered on many plans- I named a few. And asked her if she would write if she saw someone appropriate. Dr said yes.<font color=blue><b>CHUDAKOB's query on 09/29/2014</b></font>-Lisa, this is somewhat of a slippery slope. By saying that Butrans is about the only product left in the category AFTER she is telling you about hydrocodone going to CII, could have implications. Why would that matter to her? Does she believe CIIIs are less abuseable. Is the implication there? I hope you see where I am going. Perhaps another approach might be to just ask her how this will affect what she does in her practice? We will discuss this more at our district meeting.<font color=green><b>BARTOLI's response on 10/01/2014</b></font>-Agree. It was not my intention to imply anything, rather to offer options if she is looking for a c3 product for appropriate patients.<font color=blue><b>CHUDAKOB added notes on 10/07/2014</b></font>I know it wasn't your intention. We just have to be cognizant of this during a conversation.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	9/18/2014	Discussion with Jake Sisko in the hospital about the emfir he requested. Jake said that he did the information via email the same day and is happy with the results and will help him with his patient who has a history of seizures. I reminded him to continue identifying patients who have pain around the clock and need conversion from IR opioids like tramadol. I asked Jake if he would continue to also find and candidates referred to him on Percocet and convert them to OxyContin? Jake said he continue to try.
PPLPMDL0020000001	Garfield Hts	OH	44125	9/18/2014	Reviewed OxyContin every 12hours along with Butrans Med D opportunity for those patients requiring around the clock analgesia, Said Ok will consider for appropriate patients
PPLPMDL0020000001	Garfield Heights	OH	44125	9/18/2014	Discussed treating around the clock pain in 4-6hr increments, Reviewed OxyContin every 12hours, 7 tablet strengths along with Butrans for those patients requiring around the clock pain, Said ok will consider for appropriate patients
PPLPMDL0020000001	Cleveland Hts	OH	44118	9/18/2014	Reviewed OxyContin/Butrans with Tech, Savings cards, Said Ok will relay info, nothing new learned
PPLPMDL0020000001	Stow	OH	44224	9/18/2014	Spoke with Christine the other pharmacist at this location. She asked me if I was aware of the scheduling change to come for hydrocodone ? I told her I do. I asked her if currently they are getting refills on the prescriptions for hydrocodone. Christine looked through the ones they currently have to fill and none of them have refills on them. She told me that as long as comprehensive pain management isn't showing refills they are good. I asked her why that is and she said that many of the prescriptions for pain come from that office. Discussed Butrans and OxyContin dosing and conversions.
PPLPMDL0020000001	Westlake	OH	44145	9/18/2014	Reviewed dosing of both product and scheduling.<font color=blue><b>CHUDAKOB added notes on 09/29/2014</b></font>-This sure is a tough note to know what happened on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	9/18/2014	I asked dr if he's been having some issues with Butrans either not being approved or patients not wanting it? Dr said not really and asked why. I told him I just want to make sure he still feels confident with Butrans. Dr said he is and his use just ebs and flows based on the patients he's seeing. I told him ok and to please continue looking for candidates who have pain around the clock. Dr said alright.
PPLPMDL0020000001	Lakewood	OH	44107	9/18/2014	spoke to the nurse about butrans and oxycontin coupons. discussed managed care with the products and dosing.
PPLPMDL0020000001	Lakewood	OH	44107	9/18/2014	discussed oxycontin pages 15 of the core visual aid and dosing and scheduling. highlighted butrans dosing and scheduling with karen. doctor was not in the office today
PPLPMDL0020000001	Lakewood	OH	44107	9/18/2014	offered to bring in lunch but they said they were too far behind to have lunch. Dr was appreciative for the offer. I asked the doctor if he thought butrans would be written more being that it was just about the only schedule 3 opioid left these days. Dr said what's the dosing again. I said dr if your tramadol patient or norco patient is in need of a change ofmedication for an atc treatment for their cronic pain then burrans dosed weekly started at 5 or 10 mcg might be appropriate. Dr said whats the cost. I said with insuranc eand a coupon...discussed. highlighed workers comp and caresource coverage.
PPLPMDL0020000001	Fairview Park	OH	44126	9/18/2014	the nurse said the butrans rep is here to talk to you- i said hello- said I was just curious with tramadol being scheduled and butrans being one of only refillable opioid schedule three...is it possible that if you have an appropriate patient atc cronic pain on tramadol that the next choice might be butrans? he said butrans can be refilled right. I said correct. reminded him of schedule three refills and being able to fax the script over vs. oxycontin which is a hand delivered script. he said maybe.
PPLPMDL0020000001	Cleveland	OH	44111	9/18/2014	metro- only let me leave literature. I got some information from the nurse. I think she was a nurse or a nurse coordinator regarding some new targets qualifying them. highlighted the products promoted in dosing and
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	9/18/2014	Discussion with Jake Sisko in the hospital about the emfir he requested. Jake said that he did the information via email the same day and is happy with the results and will help him with his patient who has a history of seizures. I reminded him to continue identifying patients who have pain around the clock and need conversion from IR opioids like tramadol. I asked Jake if he would continue to also find and candidates referred to him on Percocet and convert them to OxyContin? Jake said he continue to try.
PPLPMDL0020000001	Lakewood	OH	44107	9/18/2014	CCF- no see. but I left literature and spoke to the person in charge about my products- what they were and dosing.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	9/18/2014	I told dr I suppose he finds himself needing to titrate OxyContin to find the optimal dose? Dr said of course he does. I asked him when he decides to titrate and what triggers him? Dr said it depends on the patient but usually its due to pain level and functionality. Dr said if the patient is more functional based on a titrated dose then he and the patient are happy. I told dr I understand and reviewed doses and ability to titrate every 1-2 days. Reviewed Butrans doses and told dr to please continue finding patients who may be appropriate for a 7 day patch. Dr said he's had good success recently and really likes it because it works and its safe.
PPLPMDL0020000001					



PPLPMDL0020000001	Akron	OH	44310	9/18/2014	Shown dr the OxyContin conversion and titration guide and told her I'm hoping that she converts patients who have pain around the clock and on Percocet to OxyContin. Dr said ok. I told her Butrans should be used as the schedule 3,7 days transdermal patch.
PPLPMDL0020000001	Cleveland	OH	44130	9/18/2014	Quick intro, told her messages we are telling about patients in around the clock pain. Why treat those patients in 4-6 hour increments? She said that makes sense, and that is the patient that should be on ER medicine. She is comfortable with butrans initiation and titration.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	9/18/2014	Started off with dr discussing the tramadol then hydrocodone insights. I reviewed the Butrans indication and told dr to focus on patients who have daily, around the clock pain. Reviewed starting doses, titration, and conversions. Use of Butrans along with products for breakthrough pain. Dr said that what she doesn't want is to start Butrans and then find herself in a position where the patient is on Butrans and then too much IR opioid. I told her to reduce the dose of the IR opioid after 3 days. I asked her if she has a threshold of IR opioid before she writes ER opioids or refers to pain management? Dr said she will go to 6 pills a day. I told her she is waiting too long for someone who is suffering in pain every day. Reviewed Scott profile and told her to focus on patients taking 3 or more pills a day and still in pain or wanting more pills. Dr said she agrees she needs to think of Butrans much earlier and not wait until the patient gets to 4 pills a day. Reviewed conversions and then discussed OxyContin doses and delivery.
PPLPMDL0020000001	Garfield Hts	OH	44125	9/18/2014	Visited Pharm. Left Rebecca OxyContin/Butrans Initiation/Titration guides, along with Contact
PPLPMDL0020000001	Highland Heights	OH	44143	9/18/2014	Lunch. Total office call. Delivered product attributes for Butrans and OxyContin to med assts. Also discussed, shared Butrans BPE kits and how they are different from regular savings cards only. (staff at first look - stated: we have those; because savings card holder/cards same color etc.) Dr Salama came in and reported AE with Butrans. (see details below, female, mid 30's - extreme red rash/discomfort, so bad he discontinued Butrans) Dr states despite that, he will continue to write Butrans. Dr asked how long does it take, after removal of Butrans for product to exit patients system? Replied from FPI, Section 12.3 Pharmacokinetics, 3rd column, above drug interactions: mean concentrations decrease approx 50% within 10-24 hrs., followed by decline with an apparent terminal half-life of approx 26 hrs. We also discussed steady state of 72 hrs or 3 days. Dr did NOT remember this point. Make sure to remind him again. Low dose OxyContin discussed, for patients who need more than 80 mg morphine equivalent; steady state 24-36 hrs, can titrate if needed, in 1-2 days. Today, tomorrow - when you have patient who suffering from daily, atc, long term pain, I propose you write either Butrans or OxyContin. Sound good? Yes, sounds good.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	9/18/2014	Reviewed Butrans indication and told dr to focus on patients with pain severe enough to justify a daily around the clock long term opioid. Dr said she's doing that now. I asked her if she currently has patients taking more than three pills a day and she has refilled it for 3+ months? Dr said she does. I asked her why she's waiting to convert them to Butrans? Dr said she doesn't know but she should be evaluating them better. Dr asked about multiple patches. Discussed that with MVA and asked her for more business. Told dr to keep her focus on CareSource for Medicaid and not Buckeye. Dr said she sent a buckeye patient to pain management and they wrote a prescription for Butrans as she got the note. Dr said she doesn't know if the patient actually got it and they paid for it. Told dr that OxyContin can be another good ER opioid for those requiring a q12 dose of oxycodone.
PPLPMDL0020000001	Cleveland	OH	44113	9/18/2014	Quick review of OxyContin every 12hours along with Butrans for those patients that he sending to Pain mgmt, Said Ok, nothing new learned
PPLPMDL0020000001	Lakewood	OH	44107	9/18/2014	We discussed what it meant that oxycotin has abuse deterrent properties. used core oxycotin visual aid pages 14-15 to help. Talked dosing every 12 hours and the lowest dose of 10mg every 12 hour. bridged to their lowed dose of butrans 5mcg. reviewed initiation guide. Talked about hypothetical patients that he may potentially see that was being treated acutely but has turned into a chronic pain patient and is appropriate for a different delivery system. Dr said he doesn't see many patients like that but a few. covered caresource and refills with butrans.
PPLPMDL0020000001	Mayfield Village	OH	44040	9/18/2014	Met w tech & float pharmacist. Pharm Mgr Kelly Rhodes out sick. Left & Discussed Pharmacy Times article which includes OxyContin tier 183 FDA approved labeling, abuse deterrent characteristics. Also discussed Butrans, CII, 1x week/every 7 days pain patch. Left (1) Butrans patient guide. Tech will leave info on kelly's desk.
PPLPMDL0020000001	Westlake	OH	44145	9/18/2014	Reviewed dosing and scheduling of each product. covered pages 15 of the core oxycotin visua aid of abuse deterrent properties. Reviewed dosages and the opioid naive dose. talked butrand dosing and patch placement and talked about how to discard the patch when finished. Gave fair balance of keeping the opioid away from children abuse potential.
PPLPMDL0020000001	Garfield Hts	OH	44125	9/18/2014	Saw Dr. in hallway. Reviewed OxyContin abuse deterrent characteristics every 12hours, along with Butrans for those patients requiring around the clock analgesia. Said Ok, nothing new learned
PPLPMDL0020000001	Lakewood	OH	44107	9/18/2014	Dr was far away--I only got out butrans covered on caresource its still schedule 3 with refills. He said ok...and waved.
PPLPMDL0020000001	Cleveland	OH	44195	9/18/2014	Reviewed OxyContin every 12 hours, Tablet strengths along with butrans for those Med D patients requiring around the clock analgesia, Said Ok will keep it mind
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	9/18/2014	Dr asked me what's new and I told him the use of Butrans for his Medicare patients who are having their IR opioids like Norco refilled month after month. Dr said yea I have some of those. I asked him if he feels treating around the clock pain in 4-6 hours is the most appropriate thing to do? Dr said its not but many of those patients are on a fixed income and typically can't afford branded medicines. I showed him the formulary grid and told him average costs associated with aarp and silverscript. Dr said that's pretty good. I told him about the conversions and asked him to write. Dr said he'll look into it.
PPLPMDL0020000001	Beachwood	OH	44122	9/19/2014	While I was talking with his nurse practitioner Eileen, he came in during our discussion, quick intro, listened for a few minutes, but didn't really participate. As she and I discussed butrans appropriate patients, steady state and titration he nodded his head in agreement. We reviewed formulary coverage and the success she has seen with OxyContin patients. He was called out of the room.
PPLPMDL0020000001	Olmsted Falls	OH	44138	9/19/2014	spoke to tracey the office manager. gave her the information about butrans scheduling and dosing and highlighted oxycotin schedule and dosing.
PPLPMDL0020000001	BEACHWOOD	OH	44122	9/19/2014	Talked with Allison the pharmacist. Asked what happens if someone comes in with a script of butrans. She said they do keep a bit in stock, but if they don't have it they can order it and get it within a day or two. I told her there was word on the street that the script is "blocked". She said she filled one not too long ago. She told me that Butrans is considered a specialty drug, the script is filled at the store but the BILLING goes through a different internal route. She wasn't aware of any attempt to block the script. Left her my card and asked her to call me if she hears anything different. She did say she stock lower does of OxyContin.
PPLPMDL0020000001	Akron	OH	44312	9/19/2014	Quick hello with dr in hallway by sample closet and reviewed the Butrans conversion guide and asked him to focus on the Scott patient who is in pain on tramadol 200mg/day. Dr said he needs me reminding him because he tends to forget. I told him that's why I'm there and to also keep an eye on patients who are on Percocet and would be appropriate for a q12 OxyContin.
PPLPMDL0020000001	Cleveland	OH	44113	9/19/2014	Reviewed Butrans Savings Cards and Med D formulary opportunities along with OxyContin abuse deterrent characteristics every 12hours. Said Ok, Will consider for appropriate patients
PPLPMDL0020000001	Beachwood	OH	44122	9/19/2014	Talked to her about the success she has with OxyContin for her patients with around the clock pain and she is so happy that I was here today because she really wanted savings cards and information. She saw the butrans brochure and wanted to find out more about that. We reviewed appropriate patient types (opioid naive and Tramadol patient) dosing, titration, coverage. She reported that most of her patients seem to develop a rash/itching and want to discontinue. She wanted some help with how to handle that.
PPLPMDL0020000001	Cleveland	OH	44130	9/19/2014	Started with insight #8. He said that he will prescribe no more than 50 pills for month. If his patients come to him requesting more he will refer them to pain management. If his patients become chronic, he refers them. He used to write a great deal of Butrans, he was part of that study. He believes that the appropriate patient for it are older patients, but that insurance never covered it in the past. We discussed the elderly patients as appropriate but also the Tramadol patient who needs something different or titration. I pulled through our managed care coverage. He agreed to give butrans another try since I tell him that the coverage is better.
PPLPMDL0020000001	Chagrin Falls	OH	44022	9/19/2014	Regarding OxyContin, he avoids c2 products with his patients although he knows there are appropriate patients for that medicine. Let pain management decide.
PPLPMDL0020000001	Cleveland	OH	44127	9/19/2014	Talked to doctors MA Shelly who said that doctor writes for oxycotin and really needs savings cards. Talked about butrans, appropriate patient type, improved coverage, c2, initiation and titration. Would love to share this and other information with the doctor. She said she would pass the info to the doctor.
PPLPMDL0020000001	Cleveland	OH	44127	9/19/2014	Discussed treating around the clock pain in 4-6hr increments. Reviewed OxyContin abuse deterrent characteristics every 12hours along with Butrans for those patients requiring around the clock pain, Said Ok will consider for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44127	9/19/2014	Discussed treating around the clock pain in 4-6hr increments. Reviewed OxyContin abuse deterrent characteristics every 12hours along with Butrans for those patients requiring around the clock pain, Said Ok has a few appropriate patients in mind.
PPLPMDL0020000001	Cleveland	OH	44113	9/19/2014	Reviewed OxyContin Tablet strengths every 12hours along with Butrans for those patients requiring around the clock analgesia, Said Ok will consider for appropriate patients,
PPLPMDL0020000001	Cleveland	OH	44113	9/19/2014	Reviewed OxyContin every 12hours, 7 tablet strengths, Savings cards along with Butrans for those patients requiring around the clock analgesia. Said he will continue to prescribe for appropriate patients
PPLPMDL0020000001	Uniontown	OH	44685	9/19/2014	Quick hello at window and told dr that I'm hoping he continues to identify patients who have daily around the clock pain and prescribe OxyContin or Butrans. Dr said he's trying and just finds that referring to pain management which they have contracted to do through AGMC. I told him I understand and asked him to refer to pain management on an ER opioid instead of an IR opioid.
PPLPMDL0020000001	Olmsted Falls	OH	44138	9/19/2014	talked about scheduling of each product. talked about dosing forbutrans and managed care.review of coupons for commercial patients.
PPLPMDL0020000001	Berea	OH	44017	9/19/2014	talked about aarp and silverscript coverage for our products and dosing and highlighted scheduling via refills with butrans today.
PPLPMDL0020000001	Akron	OH	44319	9/19/2014	I told dr about the IR oxycodone insight and asked him to please identify just one patient a week who meets the indication and has daily around the clock pain. Dr said he's is thinking about it more. Reviewed the Butrans Scott profile and asked him to also identify a patient ready for a dose adjustment on tramadol.
PPLPMDL0020000001	Westlake	OH	44145	9/19/2014	spoke to ann the nurse about oxycotin dosing and butrans scheduling and dosing. left iniation guides for the doctors
PPLPMDL0020000001	Berea	OH	44017	9/19/2014	nurses didn't have time for much today, as I left my iniatin guide I explained what butrans was and the scheduling. also highlighted oxycotin and dosing.
PPLPMDL0020000001	Westlake	OH	44145	9/19/2014	Spoke to the nurses about butrans and oxycotin what it is, dosing and scheduling.
PPLPMDL0020000001	Cleveland	OH	44113	9/19/2014	Reviewed with Cecelia OxyContin/Butrans Initiation/Titration along with Savings cards. Said Ok
PPLPMDL0020000001	Cleveland	OH	44113	9/19/2014	Visited Rheu/IM/ and pain depts, OxyContin/Butrans Initiation/Titration guides
PPLPMDL0020000001	Westlake	OH	44145	9/19/2014	Talked about oxycotin and its schedule. I asked if he was more incline to write oxycotin for patients with atc pain? Dr said he likes to write methadone cause its cheap and he feels its covered easily. Talked about oxycotin dosing options and the every 12 hour dosed. np said he likes to write norco for elderly cause it has little apap. I said why not give them a single entity like butrans or oxycotin if you are concerned with the apap or tylenol. Dr said he could it was an option. We taked dosing of butrans and no first pass. Dr said he was aware it doesn't go thru first pass. I said don't you have certain patietns that may have renal clearance issues ? he said yes. I reviewed the no dose adjustment for those patients...and pointed it out that a atc chronic pain patient can be dosed 4 x a month with butrans. We talked about titration and refills, per his questions. dr sees patietns back in 2 weeks to a month. Reviewed managed care and coupons the experience program with butrans.
PPLPMDL0020000001	Cleveland	OH	44195	9/19/2014	Quick review of OxyContin every 12hours along with Butrans 7day transdermal CII, Initiation/Titration. Said Ok refers patients to pain mgnt
PPLPMDL0020000001	Akron	OH	44312	9/19/2014	Dr told me that he rounded the hospital this morning and is fed up with patients always wanting their hydrocodone and oxycodone refilled and even titrated. Dr said he doesn't have time for it. I told him its a perfect opportunity to identify me as possible candidates for OxyContin or Butrans. Dr said possibly but said the couple of times he's written Butrans he gets burned by insurance and it becomes more difficult. I told him where and when to use OxyContin and used MVA to discuss conversions and start principles. Reviewed Scott profile and discussed insurance coverages. Dr said he will consider it. I told him to look for patients who have daily, around
PPLPMDL0020000001	Westlake	OH	44145	9/19/2014	Talked about the fda insight and the reformulation, gave fair balance on abuse potential. Talked dosing, and scheduling. asked the doctor if oxycotin will be thought of more now that more options in schedule 2 and knowing oxycotin and the abuse properties in the labeling. Dr said...it was something to think about. We talked about the scheduling in terms of hand delivered scripts and monthly vs refills for schedule 3 products. Talked about giving butrans more opportunity after tramadol patients fail and request an atc medication for their chronic pain. Dr said maybe more butrans will be written because there aren't many choices. Discussed dosing but also the no first pass and what that really means for his patients. reviewed no dose adjustment for renal impaired...I asked if this is ever a concern when selecting opioids and he said sometimes. I reminded of no dose adjustment for elderly or renal impaired patients. we talkeda bout the refills of schedule 3 for butrans. dr said he likes butrans and will write it because it works and its covered by most insurances.

	Green	OH	44232	9/19/2014	Spoke with Jenna the pharmacist about Butrans attributes, conversions and Scott profile. Jenna said they have all doses in stock and have about 10 patients on it. Reviewed OxyContin dosing, and conversions and asked her if they have copy cards for each. Jenna said she's not sure she has ever seen a OxyContin copy card. Reviewed the cards for private insurance and cash patients. Jenna said that she knows a couple of patients that pay cash and would like to take advantage of up to \$70 off in a 14 day period.
PPLPMDL0020000001	Cleveland	OH	44125	9/19/2014	Reviewed with Emily Rph OxyContin abuse deterrent characteristics along with Butrans savings cards. said ok
PPLPMDL0020000001	NORTHFIELD	OH	44067	9/22/2014	Natalia said that they stock oxycontin, and see a fair amount of it through their pharmacy, but she has never dispensed butrans. She would never call a doctor and suggest he choose something else if they came in with a script for butrans. She would order it and it would come in a day or two later. She is not aware of any blocked products.
PPLPMDL0020000001	Fairlawn	OH	44333	9/22/2014	Discussed Butrans and OxyContin copy cards and checked stock. Told Gilbert about Butrans Scott profile and conversions along with which doses he's seeing most. Gilbert said he is seeing more 10mcg than 5mcg now and said he should be seeing more because pain specialists are having it filled most often. Reviewed OxyContin dosing and conversions along with appropriate patient types.
PPLPMDL0020000001	Cleveland	OH	44195	9/22/2014	Revised OxyContin Formulary grids along with Butrans indication, 7 day transdermal, CII, for those patient failing on present therapy requiring around the clock analgesia, said she will consider for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44195	9/22/2014	Reviewed OxyContin every 12hours along with Butrans for those patients failing on present therapy requiring around the clock analgesia, said Ok, will consider for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44109	9/22/2014	Reviewed with Tech, OxyContin/Butrans savings cards along with Butrans patients info booklets, will relay to Rabanj RPH
PPLPMDL0020000001	Stow	OH	44224	9/22/2014	Quick discussion about when he might be able to use Butrans clinically. Dr said he's still not seeing points for office visits so he said he doesn't have an opportunity. I asked him if he prescribes analgesics for patients after an intervention? Dr said he dos at times but his short acting and writes as few as possible. Mentioned OxyContin as a historical product with summit pain and why they can't use it going forward since Percocet is used so frequently in their office? Dr said we can discuss that when he has more time.
PPLPMDL0020000001	Fairlawn	OH	44333	9/22/2014	Quick discussion in hallway and showed him the conversion guides for OxyContin and Butrans. I asked him if he's comfortable prescribing OxyContin for those patients who are in pain around the clock on Percocet? Dr said he is but isn't writing it much. I asked why and he said he's not sure and probably should take a look at his current patients. Asked him to keep Butrans on his radar for patients in pain around the clock on tramadol. Dr said ok. Nothing else learned.
PPLPMDL0020000001	Fairlawn	OH	44333	9/22/2014	Spoke with the tech Sam about Butrans and OxyContin dosing, attributes and conversions. Sam asked about the patch and what it looks like. I showed him the placebo patch and explained its make up. I asked if they have filled any and he said one in the last 6 months. Discussed OxyContin outwint types and how to convert from IR oxycodone.
PPLPMDL0020000001	Brooklyn	OH	44144	9/22/2014	Reviewed Savings cards with Bev. Tech, No new info on OxyContin/Butrans. Will help when possible
PPLPMDL0020000001	Stow	OH	44224	9/22/2014	Started with the hydrocodone insight and then went into a quick review of Bup 3015. I asked Sandra what IR opioid her patients are on most frequently when she first sees them? Sandra said either Norco or Percocet. Sandra said she has to choose her patients wisely for Butrans because cost is an issue and its tough to get the patient off the short acting. I asked if she's currently attempting to reduce the total opioid daily dose and Sandra said yes and when that's been accomplished she looks at ER opioids like Butrans. I asked her when the last time she offered it to a patient and Sandra said she can't remember. I asked her to at least offer it to patients who have daily, around the clock pain.
PPLPMDL0020000001	Stow	OH	44224	9/22/2014	Led off with hydrocodone insight and then asked her if she sees that in the practice? Sabrina said that most of the patients she sees come in on Percocet and have been on it for a long time. I asked her how long and she said some have been on Percocet for years and want nothing other than that because it works. I asked if those same patients come in wanting more because they are in pain? Sabrina said some do yes and said that she offers Butrans to almost everyone but said its really difficult to get them to understand what Butrans offers. I asked her to keep trying and reviewed the Bup 3015 trial. I asked her if a 30% reduction in pain score is what she and her patient would like and if the safety profile is acceptable? She said she is on board with Butrans and just needs to work on explaining it to her patients. I told her to review the initiation and titration guide and maybe she will find some wording that may be more impactful.
PPLPMDL0020000001	akron	OH	44333	9/22/2014	I gave dr the slide guide initiation and titration piece and told him I want him to keep it on his desk or in his labcoat. I told dr I want to see it with him when I come in next. Reviewed the conversions guide and told him he needs to stop titrating and moving to other IR opioids when the patient has a condition that creates pain on a daily around the clock basis. Dr said ok and he will find a few patients. Told him to keep OxyContin on his radar when patients come in on Percocet and need a dose adjustment.
PPLPMDL0020000001	Cleveland	OH	44195	9/22/2014	Visited Pain mgmnt (Minzter) Reviewed OxyContin/Butrans INitiation.Titration, Savings cards
PPLPMDL0020000001	Stow	OH	44224	9/22/2014	First time meeting Leanne and only had a couple of minutes to discuss Butrans. Reviewed dosing, conversions, titration, Scott profile and inclusion and exclusion criteria in Bup 3015. Leanne said she knows about Butrans and used it recently. She said we can talk later about her patients on it. Nothing Else learned.
PPLPMDL0020000001	Brooklyn	OH	44144	9/22/2014	Quick review of OxyContin every 12hours, formulary grids along with Butrans for those patients requiring around the clock analgesia, said Ok, will consider,
PPLPMDL0020000001	Brooklyn	OH	44144	9/22/2014	Reviewed OxyContin every 12hours, Formulary coverage along with Butrans for those patients failing on present therapy requiring around the clock analgesia. said Ok will consider
PPLPMDL0020000001	Twinsburg	OH	44087	9/22/2014	Lou says he sees a lot of OxyContin but it has been a really long time since he has dispensed butrans. Giant eagle policy is to suggest authorized generic first, a specialty drug like butrans doesn't have one. He suspects that you have to jump thru a few hoops but that he would order it and wouldn't get any push back. He is not aware of any block.
PPLPMDL0020000001	Cleveland	OH	44120	9/22/2014	Quick Butrans review, 7 day transdermal, CII, for those patients requiring around the clock analgesia, along with OxyContin abuse deterrent characteristics every 12hours said Ok, will consider
PPLPMDL0020000001	Stow	OH	44224	9/22/2014	Short conversation about choosing the right patient for Butrans and used the hydrocodone insight. Dr said he has found that when Butrans is offered to the patient they at first don't want it but dr said as he continues to discuss it with them as a good option they buy into a patch. Discussed Bup 3015 efficacy and safety and asked for continued prescribing.
PPLPMDL0020000001	Barberton	OH	44203	9/23/2014	Talked about the dosing options for the at. Chronic patient and scheduling review in terms of refills and faxing.<font color=blue><b>CHUDAKOB's query on 10/07/2014</b></font>Did you lead with an insight? Did you have a conversation or did you do most of the talking? For a next call objective, what action do you want the HCP to take?<font color=green><b>BARTOLI's response on 10/07/2014</b></font>No. I did most of the talking because I read her body language and glare of the eye and I made a judgment call to make a point and then leave this visit.<font color=blue><b>CHUDAKOB closed the query on 10/08/2014</b></font>
PPLPMDL0020000001	Cleveland	OH	44113	9/23/2014	Reviewed OxyContin abuse deterrent characteristics every 12hours along with Butrans for those patients requiring around the clock analgesia that are failing on Norco Med D formulary opportunity, Initiation/Titration and Butrans patient experience program. said she will consider for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44113	9/23/2014	Reviewed OxyContin abuse deterrent characteristics every 12hours along with Butrans for those patients requiring around the clock analgesia that are failing on present therapy. Med D formulary opportunity, Initiation/Titration and Butrans patient experience program. said He will continue to find appropriate patients and will help in reminding Clinicians.
PPLPMDL0020000001	Cleveland	OH	44113	9/23/2014	Reviewed OxyContin abuse deterrent characteristics every 12hours along with Butrans for those patients requiring around the clock analgesia that are failing on present therapy. Med D formulary opportunity, Initiation/Titration and Butrans patient experience program. said she will continue to find appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44113	9/23/2014	Reviewed Butrans for those patients requiring around the clock analgesia that are failing on present therapy. Med D formulary opportunity, Initiation/Titration and Butrans patient experience program. said she will continue to find appropriate patients and help reminding colleagues.
PPLPMDL0020000001	Cleveland	OH	44195	9/23/2014	Reviewed OxyContin/Butrans PI's, no further info requested.
PPLPMDL0020000001	Akron	OH	44310	9/23/2014	Dr said that he was going to call me today because they had three new Butrans starts today. Dr said two of them were on workmans compensation and has plateaued on their IR opioids and thinks they were all on Norco. Dr said he didn't want them to be taking pills anymore especially when they wanted more. I told dr I needed to lean on him to help me with my FP's and internists and to help them understand when to initiate a ER opioid. Dr said it takes time and the ability to run the appropriate tests and most of those types of drs don't have those resources or knowledge to do them. Talked to dr about how often per month he is offering the Butrans option? Dr said three to four times a month. Dr said he finds that it can take up to 5 months until the decision is made to start a ER opioid. I asked for continued business and to replicate days like today more often!
PPLPMDL0020000001	Barberton	OH	44203	9/23/2014	Talked about scheduling and dosing of our products. Reviewed patch placement of Butrans.
PPLPMDL0020000001	Barberton	OH	44313	9/23/2014	Dr told me he didn't have time to talk and that he knows I'm here to talk about Butrans and I told him I'm here to talk about OxyContin and Butrans and when he should be writing ER opioids. Dr talked about how difficult it is being to use ER opioids and the pressure the state is putting on doctors like him who prescribe narcotics. Talked with him about identifying patients who are most appropriate for Butrans or OxyContin. Dr said he is referring all his chronic pain patients to specialists. I told him that's ok and to maybe write Butrans or OxyContin upon the referral.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	9/23/2014	Discussed drs prescribing frequencies with OxyContin. Dr spoke about his use of OxyContin and how he converts patients coming from Opana because he will not refill it for a patient coming to him on it. Discussed copy cards and use of conversion table.
PPLPMDL0020000001	Akron	OH	44312	9/23/2014	Discussed Butrans and OxyContin patient types and conversions and discussed Butrans patch and conversions along with patient type Scott. Dr talked about how he just needs to remember the product and wanted me to leave him a reminder piece. Spoke with Theresa about leaving him a conversion guide at the nurses station.
PPLPMDL0020000001	Barberton	OH	44203	9/23/2014	Reviewed scheduling and dosing of products.<font color=blue><b>CHUDAKOB's query on 10/07/2014</b></font>Who did you review the scheduling and dosing of products with and what was discussed?<font color=green><b>BARTOLI's response on 10/07/2014</b></font>The nurse and at this minute I can't think of her name.<font color=blue><b>CHUDAKOB added notes on 10/08/2014</b></font>OK. Reviewed scheduling and dosing of products is a very vague call note. Please include a little more specifics in your notes.
PPLPMDL0020000001	Garfield Hts	OH	44125	9/23/2014	Visited Pain Mgmt Dept (Dalbir, Samuel,Abraham) OxyContin/Butrans Initiation/Titration
PPLPMDL0020000001	Cleveland	OH	44105	9/23/2014	Reviewed OxyContin/Butrans Initiation/Titration guides with Hakim, No new info learned
PPLPMDL0020000001	Cleveland	OH	44113	9/23/2014	Left OxyContin/Butrans Initiation/Titration guides for Mike RPH,
PPLPMDL0020000001	Cleveland	OH	44195	9/23/2014	Reviewed OxyContin/Butrans PI's along with Initiation/Titration guides, said he feels patients are adequately controlled on present medications, no further info needed at this time.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	9/23/2014	Spoke with Jim the pharmacist about Butrans and OxyContin. Discussed the reviewed indication for Butrans, dosing, and stocking. Jim said that he stocks the 5 and 10mcg and if he needs the 15 or 20mcg he will ord'r it and have it by noon the next day. Discussed OxyContin dosing and IR and ER oxycodone. I told Jim about how I'm talking to physicians about IR and ER oxycodone. Discussed hydrocodone rescheduling to a schedule 2 and Jim said it may increase the risk of robberies. Talked to Jim about the likelihood of increased Butrans prescriptions based on rescheduling of tramadol and hydrocodone. Jim said it makes sense.
PPLPMDL0020000001	Barberton	OH	44203	9/23/2014	First talked with Michelle about Butrans and OxyContin dosing and scheduling. Asked the doctor what he thought about single entity products like Butrans or OxyContin for the elderly? Dr said its a good fit. Highlighted elderly and med d coverage today. I said for the atc chronic patient currently requesting a change in the therapy, highlighted dosing and coverage. Told him I would return at lunch to go over pain score with Butrans. Dr did ask some caesoreuse questions regarding coverage which I addressed.<font color=blue><b>CHUDAKOB added notes on 10/07/2014</b></font>This is a much better call note!
PPLPMDL0020000001	Akron	OH	44305	9/23/2014	Spoke with dr about identifying the patient early on like tramadol and reviewed the Scott profile. I asked if there is anything that prevents him from using Butrans? Dr said not really and thinks about ER opioids when patients reach 3 to 4 pills a day. I told him we have discussed many times about Butrans efficacy and safety and that he needs to focus on the right patient at the right time and one who have pain on a daily, around the clock basis. Reviewed the efficacy and safety in Bup 3015 and asked him if he would be happy with at least a 30% reduction in pain score? Dr said yes. I asked him to use Butrans more frequently and told him not to forget OxyContin as the other option of an ER opioid dosed q12.
PPLPMDL0020000001	Westlake	OH	44145	9/24/2014	Spoke to candy the rn about the refills with Butrans and dosing. Reminded about the couONS and a few commercial all plans covered. Thru the window discussion.
PPLPMDL0020000001	Westlake	OH	44145	9/24/2014	Passed to the nurses the managed care grids or prouducts, while highlighted a few covered plans for each product. Asked if I could do a coffee run for them, they said no.

PPLPMDL0020000001	Westlake	OH	44145	9/24/2014	Dr waved said hello to me by name and said she needs to write Butrans. I said ok if they are atc chronic pain patients. Is said what about OxyContin with a smile. But that's all I got out today. Spoke to the nurses about managed care.
PPLPMDL0020000001	Westlake	OH	44145	9/24/2014	Spoke to Allen the rn. Reviewed Butrans and OxyContin and highlighted dosing and appropriate patient type. Allen told me that the dr might see me about Butrans. He told me that he has many chronic pain patients. Reviewed single entity And no first pass for Butrans. Highlighted the no dose adjustment for elderly for both products.
PPLPMDL0020000001	Cleveland	OH	44106	9/24/2014	Reviewed OxyContin Savings cards along with Butrans for those patients requiring around the clock analgesia, Said Ok will continue to prescribe for appropriate patients
PPLPMDL0020000001	Akron	OH	44313	9/24/2014	Spoke about Butrans and OxyContin indications, attributes, conversions and appropriate patients. Discussed Butrans and OxyContin copay cards and stocking of the doses.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	9/24/2014	Met with nursing staff this morning and discussed Butrans and OxyContin indications, attributes, and identifying appropriate patient types.
PPLPMDL0020000001	Uniontown	OH	44685	9/24/2014	Discussed Butrans and OxyContin attributes, conversions and appropriate patient types. Reviewed Scott profile and left the OxyContin conversion and titration guide.
PPLPMDL0020000001	Akron	OH	44307	9/24/2014	Met with Jeff the pharmacist and asked him for specifics on the prescriptions they have seen with Butrans and OxyContin. Jeff said he has filled 2 Butrans and the last few months and both have been from a dr in the family practice at the hospital. I asked the prescribers name and he couldn't find it. Jeff said that OxyContin is filled more frequently and that he gets them from Petrus and some of the oncologists at the hospital. Reviewed attributes for both products.
PPLPMDL0020000001	Westlake	OH	44145	9/24/2014	Spoke to Linda and Sue the ma's about the scheduling and refills and faxing of Butrans and status of OxyContin. Dr said hello thru the window. I asked him if he had a chance to try Butrans or OxyContin like we talked about last. Is it and he said no. Review of dosing and lowest dose of both products.
PPLPMDL0020000001	Cleveland	OH	44104	9/24/2014	Quick Review of OxyContin formulary grids and savings cards along with Butrans Med D formulary opportunity, Said ok, nothing new learned
PPLPMDL0020000001	Westlake	OH	44145	9/24/2014	Talked about attributes of OxyContin and Butrans being single entity and dosing. Asked about how they could help someone explain how to wear the Butrans patch and the pharmacist could t exp'ain. Reviewed that and how to discard using core visual aid.
PPLPMDL0020000001	Westlake	OH	44145	9/24/2014	Reviewed dosing and scheduling of products. Talked about coupons work and the pharma it said they accept it and sometimes they will even go online and search for patients if there is time.
PPLPMDL0020000001	Akron	OH	44320	9/24/2014	I told dr that she needs to be offering Butrans and OxyContin to her patients more frequently when they meet the indications. I told her to identify patients who have pain around the clock.
PPLPMDL0020000001	Berea	OH	44017	9/24/2014	Talked about the norco patient needing atc dosing for their chronic pain. Talked about two options of OxyContin and Butrans, reviewed dosing. Asked the dr how receptive his patient have been to be dosed weekly instead of what they have been before for their atc chronic pain. Dr saints good. Reviewed experience kits and dosing for Butrans.
PPLPMDL0020000001	Akron	OH	44333	9/24/2014	I asked dr how often he is offering a ER option like OxyContin or Butrans to patients who have daily around the clock pain on IR opioids? Dr said he uses both Butrans and OxyContin. I asked him out of 100 patients who are in pain is he offering ER opioids like OxyContin? Dr said maybe half and that not all are needing it. I told him I agree and it will not be appropriate for all and to just offer it who meet the indication.
PPLPMDL0020000001	Cleveland	OH	44104	9/24/2014	Reviewed OxyContin/Butrans with Abdul, Savings Cards and Formulary grids, Said Ok, nothing new learned
PPLPMDL0020000001	Akron	OH	44333	9/24/2014	Reviewed Butrans attributes, patient types and discussed Bup 3015. Spoke about his use of Butrans after 3-4 pm IR opioids. Dr said he's finding patients for it each day but is having difficulty getting it covered on Medicaid. Dr said he doesn't have to take buckeye anymore because they don't cover UDS and he won't use them. Discussed OxyContin use for his patients coming off of Percocet.
PPLPMDL0020000001	Akron	OH	44313	9/24/2014	I asked dr to please keep OxyContin and Butrans open as the products that patients can use who meet the indication and have daily around the clock pain. Left him conversion and titration guides.
PPLPMDL0020000001	Cleveland	OH	44105	9/24/2014	Reviewed with Kim-Rph OxyContin abuse deterrent characteristics every 12hours along with Butrans 7day transdermal, CIII Initiation/Titration, Said Ok, Will keep an eye out
PPLPMDL0020000001	Cleveland	OH	44109	9/24/2014	Visited IM/PMR depts OxyContin/Butrans Initiation/Titration guides along with Formulary grids.
PPLPMDL0020000001	Cleveland	OH	44113	9/24/2014	Reviewed Butrans for those patients falling on Tramadol he is sending to Pain mgmnt. Initiation/titration. Said Ok will keep it mind
PPLPMDL0020000001	Cleveland	OH	44112	9/24/2014	Discussed treating around the clock pain in 4-6hr increments, Said she continues to struggle with prescribing any pain meds, Reviewed OxyContin abuse deterrent characteristics every 12hours along with Butrans 7 day transdermal for patients requiring around the clock analgesia
PPLPMDL0020000001	Westlake	OH	44145	9/24/2014	Spoke to Kelly the office manager, Jeanette for a while talking about Butrans managed care. Kelly said that ine patient this week said Butrans was too expensive and wanted Cheaper medication so the dr wrote something else. I asked if they had a couoi. And she did t know for certain. We talked about caresource, med d and managed care plans that can use couPns, reviewed Butrans can be faxed and refills. Kelly said that Vickie n p wrote OxyContin recently. Dr came to window...I told him why old a patient want to tke opioids several times a day for chronic pain. Dr said they like their pills and shrugged his shoulders. I reminded him that Butrans dosed weekly, which is 4 doses for the month and it's covered on plans like caresource and aarp for med d patients over 65 to name a few. Dr said Butrans is a great choice. Reminded him I had OxyContin and dosed every 12 hours...but didn't have time to get into deeper conversation.
PPLPMDL0020000001	Garfield Hts	OH	44125	9/24/2014	Window call, Reviewed OxyContin every 12hours, Butrans 7 day transdermal, CIII, for those patients requiring around the clock analgesia, Said Ok, referred to nurses
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	9/25/2014	Dr said that she write a Butrans prescription on Monday and that the patient took the prescription and the copay card with her. I told her that's great to hear and told her that's good the patient has commercial insurance. Dr said she can't remember the plan and Lori said the patient has medical mutual. I asked dr to please continue identifying patients who have daily, around the clock pain.
PPLPMDL0020000001	Barberton	OH	44203	9/25/2014	Spoke to Jen the ma upfront about scheduling of my products and managed care.
PPLPMDL0020000001	Cleveland	OH	44103	9/25/2014	Reviewed with tech OxyContin abuse deterrent characteristics along with Butrans 7 day transdermal, CIII for those patients requiring around the clock analgesia, Said Ok will relay info
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	9/25/2014	Spoke with The pharmacist Derek about OxyContin and Butrans attributes, conversions and appropriate patients. Discussed the patch application sites and OxyContin doses and titration.
PPLPMDL0020000001	Garfield Hts	OH	44125	9/25/2014	Discussed treating around the clock pain in 4-6hr increments Quick review of OxyContin every 12hours, along with Butrans for those patients requiring around the clock analgesia, Said Ok, will consider for appropriate patients and no change in policy
PPLPMDL0020000001	Cleveland	OH	44103	9/25/2014	Reviewed OxyContin abuse deterrent characteristics every 12hours along with Butrans for those patients he is sending to pain mgmnt, Said Ok, Will consider for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44195	9/25/2014	Quick OxyContin review 7tablet,Savings Cards along with Butrans for those patients requiring around the clock analgesia, Said Ok, Will continue to prescribe
PPLPMDL0020000001	Cleveland	OH	44124	9/25/2014	Met w med asst at front check in desk. Left for Dr. Casselberry: OxyContin fpi, Scott profile and Butrans initiation guide. Formulary/Med D pull through.
PPLPMDL0020000001	Independence	OH	44131	9/25/2014	Regina, says that OxyContin should be considered when patient is taking more than 3 IR opioid per day. Also she said now with the schedule change of hydrocodone, that may make a difference in Doctors minds about butrans as well. If she starts to see doctors in the area write it, she will begin to stock it.
PPLPMDL0020000001	Mayfield Heights	OH	44124	9/25/2014	Met. w float Kelly - she is strictly a float pharmacist for CVS. She works in this general area & also in Twinsburg. Discussed non. Branded Purdue Resources including RX Patrol, left green brochure. Discussed both of my products as single entity ER opioids for patients with daily, ATC, long term pain. Discussed OxyContin savings. Kelly was unaware that Self Pay patients can redeem OxyContin card. Discussed Butrans trial, savings & discussed & went through each page of Butrans patient guide. Asked her to place on shelf with Butrans. She has yet to dispense Butrans at any locations she visits. Left OxyContin FPI, Butrans FPI, RX patrol flashcard & PHARMACY TIMES piece for Pharm Mgr Adrian.
PPLPMDL0020000001	Mayfield Heights	OH	44124	9/25/2014	Met w tech Patty & pharmacist Giovanni. Discussed non branded Purdue resources including RX Patrol & left green brochure. Left for pharm mgr Natalia, Pharmacy Times article. Discussed patient access/ savings for both OxyContin, Butrans. Discussed, left (1) Butrans patient guide.
PPLPMDL0020000001	Barberton	OH	44203	9/25/2014	Talked about how they redeem coupons and refills w coupons. Talked about scheduling of my products and dosing.
PPLPMDL0020000001	Mayfield Heights	OH	44124	9/25/2014	Quick front window. First time meeting Dr Dews in person. Quick introduction as her Purdue rep, promoting two single entity, ER opioids: OxyContin and Butrans. She then had to leave and get into a procedure. Met with med asst at front window. Discussed dosing for both of my products. Findings: Dr. Laham is off EVERY THURSDAY.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	9/25/2014	Spoke with Barry the pharmacy owner about stocking of Butrans and OxyContin. Barry said they have all doses of each product and have seen an uptick of Butrans dispensing. Discussed Scott profile and conversions.
PPLPMDL0020000001	Mayfield Village	OH	44143	9/25/2014	Discussed OxyContin conversions and copay cards for both products.
PPLPMDL0020000001	Barberton	OH	44203	9/25/2014	Met w med asst at front window. Left for Dr. Ashraf, Butrans BUP 3015, fpi and OxyContin fpi. Left (1) Butrans guide. (left same for Dr. Krishnan)
PPLPMDL0020000001	Lyndhurst	OH	44124	9/25/2014	Discussed how he treats patient dr with opioids in the pain click vs, the office. Dr said he likes Butrans. I asked if he stared more patients on the lowest dose 5 mcg or 10mcgmre often. Dr said 10mcg. I reminded him of the Initiation guide information and of using break they medication. Talked about dosing and managed care of OxyContin and Butrans
PPLPMDL0020000001	Mayfield Heights	OH	44124	9/25/2014	Met w med asst at front desk. Left Butrans dosing slider and Bup 3015 for Dr. Reed. Left OxyContin fpi. Med D/formulary status pull through.
PPLPMDL0020000001	Cleveland	OH	44102	9/25/2014	Met w med asst at front window. Discussed both of my product dosing, scheduling, formulary status/Med D pull through. Left for Frank: OxyContin & Butrans fpi's.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	9/25/2014	Reviewed OxyContin/Butrans Formulary grids, still researching in-service with Nurses
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	9/25/2014	Discussed drs use of OxyContin and Butrans and dr said that his patients do very well on both and have had no issues with either product recently. Dr said he had a patient he started on OxyContin recently from Percocet and started on the 20mg dose. Dr said the patient was so happy to only be taking it twice a day. Discussed Butrans attributes, Bup 3015, conversions and titration.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	9/25/2014	Discussed OxyContin doses and titration along with abuse deterrent properties. Dr said he uses OxyContin a lot in the hospital and is basically converting patients from Percocet. Dr spoke about using IV buprenorphine in the hospital after surgery and then upon release he transitions them to Butrans. Dr said patients do great on IV buprenorphine and with little to no side effects. Dr said its a very smooth transition to Butrans. Reviewed OxyContin and Butrans managed care coverage and copay cards.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	9/25/2014	Spoke with Linda about her visit to the Purdue booth at the national pain conference and Linda said she really liked it and learned a lot not only about Butrans and OxyContin but other products as well. Discussed Butrans attributes, conversions, Scott profile, Bup 3015, OxyContin dosing and titration along with conversions. Linda said she has already prescribed Butrans twice and the patients are doing well.
PPLPMDL0020000001	Mayfield Village	OH	44143	9/25/2014	Hallway. Told Dr Azar my goal is for him to become comfortable writing ER opioids for trusted patients. I have 2 great options for him. OxyContin, single entity, every 12 hr. release of oxycodone, ability to titrate in 1-2 days. Dr. says a male patient who has spinal stenosis/he wants to place on OxyContin but he wasn't sure if his patient could get at his pharmacy (Willoughby Hills Cleveland Clinic Satellite) I replied. I visit that pharmacy monthly and they carry OxyContin savings cards. Discussed commercial/see pay statistics. I look forward to following up with you next week on that patient. Another option, is Butrans. 1x week or every 7 days buprenorphine release; no first pass metabolism. Butrans can be called/faxed with refills. This helps your patients avoid another office visit and co pay. Asked for 1 or 2 patients today or tomorrow, that meet indication for ER opioid - Please write for OxyContin and Butrans.
PPLPMDL0020000001	Cleveland	OH	44195	9/25/2014	Visited Dept. OxyContin/Butrans Initiation/Titration guides along with Formulary grids.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	9/25/2014	Discussed Bup 3015 with dr and topic of titration. Reviewed forced titration with Butrans through the trial and asked him about titrating past 10mcg. Dr said he understands the clinical trial and said his patients do well on the 10mcg dose. I asked if all his patients are getting the efficacy they need on 10mcg? Dr said not all and he has moved past the 10mcg in some patients. Discussed OxyContin dosing and titration along with start principles.
PPLPMDL0020000001	Tallmadge	OH	44278	9/25/2014	Quick call at counter and told him I want him to identify just one patient for OxyContin and one for Butrans and asked him if that is acceptable to ask? Dr said he can only try. Left him conversions and titration guides for each. Nothing else learned.
PPLPMDL0020000001					

	Independence	OH	44131	9/25/2014	Had lunch with the doctor and call was not saved. Asked Doctor to think about his patients in around the clock pain and how he approaches their treatment. He said that IR is the recommendation. We discussed butrans as being appropriate for opiod naive and for the Tramadol patient. He doesn't have experience with it but thinks it might be a good option for some of his patients. Reviewed initiation, titration, and formulary, left titration guide also. I found out that he thinks that OxyContin is a great molecule but he and everyone really don't want to write it. He says he will refer to pain management. I asked him to think of the patients that won't go to other physician. Reviewed abuse deterrent characteristics.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	9/25/2014	Quick hello at counter and told him to please review his charts of his existing patients currently being refilled on Percocet and determine if the q12 delivery system may be more appropriate. I also told him to not forget about the schedule 3, 7 day patch Butrans and left the conversion and titration guide.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	9/25/2014	Luncheon meeting with center for pain management with all providers. Discussed OxyContin and Butrans attributes, conversions, patient types, titration and insurance.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	9/25/2014	Quick message through window and reminded her to use Butrans for her Caresource patients who meet the indication. Dr said ok and she will remember that and said no to Buckeye right? I told her its going to be very difficult to get Butrans approved unless there have been multiple ER failures. Dr said ok.
PPLPMDL0020000001	Cleveland	OH	44103	9/25/2014	Quick review of OxyContin abuse deterrent characteristics along with Butrans for those patients she is sending to pain mgmt. Said Ok, not prescribing, sending to pain mgmt
PPLPMDL0020000001	Barberton	OH	44203	9/25/2014	Insight 18 opened. Talked about OxyContin scheduling and. Turbans. Dr said she was aware and doesn't do many refill type products. We talked about the Tramadol patient who has been on it chronically and requests a change cause they still have u resolved pain. I asked if she was more likely to think about Butrans that its schedule three. or Butrans cause they are atc chronic medicatios dosed either every 12 hours for oxycontin in or Butrans weekly. She said she wasn't sure but it was an option. We talked about why she writes OxyCotin and the dr said it has been studied a ling time, she said it can be used in the elderly and she even said she had to be careful in the elderly. We talked about what she meant by be careful. The dr said she has many patients who have renal issues or she worts about gastric bleeding. I asked if a single entity is a big factor for those patient, she said definitely. I mentioned about Butrans s the no dose adjustment for elderly or renal l pared patients. We talked about attributes such as no first pass and how the product is excreted theu the Bowles mostly. Dr asked if there was more constipation, I told her I had no head to head study. Showed her the ore visual aid AE profile and she looked at it and said ok. Dr said she never realized Butrans was covered in med d plans.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	9/25/2014	Jakes last day at the practice today and is going to neuroscience at akron children's hospital. Jake spoke about getting information from Purdue about Butrans and patients who have a history of seizures. Jake said the information sent was very thorough and found that after reviewing the material emailed to him he decided to start Butrans and the patient is doing great. Jake said that he started the patient on 5mcg dose. Reviewed OxyContin dosing, attributes, conversions and abuse deterrent properties.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	9/25/2014	Dr asking for higher doses of Butrans because some of his patients have built up tolerance to the 20mcg. Dr said he wants a 30mcg dose. Told dr he will be the first to know if it comes and when however don't know anything about a 30mcg dose at this point. Discussed Butrans patient types, and dr said that its just really hard to get approved and its expensive for his Medicare patients. Reviewed Medicare plans and focused dr on ESI, aarp, and silverscript. Discussed his use of OxyContin and dosing he is finding appropriate. Dr said he doesn't write new doses because he uses Butrans instead. Nothing else learned.
PPLPMDL0020000001	Westlake	OH	44145	9/26/2014	Dr didn't have time today but waved. Highlighted my products dosing and scheduling w ma Lori.
PPLPMDL0020000001	Cleveland	OH	44113	9/26/2014	Discussed treating around the clock pain in 4-6hr increments. Reviewed OxyContin abuse deterrent characteristics every 12hours, along with Butrans 7 day transdermal, CIII, Med D Silverscripts, initiation/Titration, Said Ok, will consider for appropriate patients. Asked Judy Rn for assistance in help reminding Dr.
PPLPMDL0020000001	Parma	OH	44129	9/26/2014	Doctor said he will refer patients to pain management rather than provide oxycontin. He will not give oxycontin to younger patients, maybe only older patients. Tried to find out at what point he thinks his patients are in around the clock pain and he said when they are taking 3 or 4 Vicodin per day. He did just write butrans for an older patient with arthritis and will look for other appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44109	9/26/2014	Reviewed OxyContin/Butrans savings card, no new info learned
PPLPMDL0020000001	Akron	OH	44312	9/26/2014	I told Donna that I needed to see the doctors because of new information. Spoke with dr and reviewed revised Butrans and OxyContin indications. I told dr one way for him to get back to using Butrans is to review the charts of his existing patients who continue to be refilled on their IR opioids like tramadol or considering moving from tramadol to the soon to be schedule 2 hydrocodone. Dr said he can do that. Nothing Else learned
PPLPMDL0020000001	Westlake	OH	44145	9/26/2014	Talked about OxyContin and Butrans scheduling with ma
PPLPMDL0020000001	Cleveland	OH	44113	9/26/2014	Reviewed OxyContin and Butrans Savings cards and formulary opportunities, Said ok will relay info to clinicians.
PPLPMDL0020000001	Westlake	OH	44145	9/26/2014	Didn't get to see dr. Talked about scheduling of my products and managed care w nurses.
PPLPMDL0020000001	Cleveland	OH	44109	9/26/2014	Spoke with Mana Rph reviewed OxyContin/Butrans. Said ok. No new info learned
PPLPMDL0020000001	Westlake	OH	44145	9/26/2014	Pharmacist had little time. Introduced myself to the floating pharmacist and explained the products pr its. Highlighted dosing and scheduling of both. Reviewed patch rotation and how to discard the patch
PPLPMDL0020000001	Parma	OH	44129	9/26/2014	Shay is new to that target, said they don't stock any OxyContin or butrans because they don't have any patients on either. Butrans would just take a day to get in, OxyContin may take two.
PPLPMDL0020000001	Akron	OH	44333	9/26/2014	I asked dr why he isn't writing Butrans as frequently? Dr said he is and I asked if they are new prescriptions or refills? Dr said most are refills. Dr said he will pick up the use and said its tough to get it approved. I asked where and he said he had many Caresource patients recently. I told him Butrans is covered with a pa on Caresource and explained it and dr said he had forgotten. I told him to use it for those patients. Dr said he write 5 OxyContin scripts last week. Dr said he will continue to use OxyContin because it works very well.
PPLPMDL0020000001	Westlake	OH	44145	9/26/2014	Small talk w office manager. Managed care highlights for our products
PPLPMDL0020000001	Westlake	OH	44145	9/26/2014	Dr called, so I made a trip to the office for a follow up. Dr wanted easy patient information on Butrans. I gave him the tear off and patient leave behinds. He thought the tear off pads were better. Dr said he likes Butrans and has been writing it for his atc oa chronic pain patient s and it's been working. Reviewed rotation of patch and dosing. Initiation guide. Reminded him of OxyCotin dosed every 12 hours.
PPLPMDL0020000001	Akron	OH	44319	9/26/2014	Presented dr with the OxyContin MVA conversions from Percocet and asked him if he currently would have a few patients on Percocet who have pain around the clock? Dr said yes. I asked him to change the delivery system and make it q12. Dr said ok. I showed dr the placebo Butrans patch and the titration and conversion guide and told him I wanted him to try it on a patient on tramadol who meets the indication. Reminded him its a schedule 3, 7 day transdermal patch. Reviewed conversions and titrations. Dr said ok.
PPLPMDL0020000001	Cleveland	OH	44113	9/26/2014	Visited Pain mgmt dept (Shen.Daoud,Dale) OxyCotin/Butrans Initiation/Titration, Savings Cards
PPLPMDL0020000001	Akron	OH	44319	9/26/2014	Spoke with Daniel the pharmacist about Butrans dosing, titration and patient types. Daniel said he has about 3-5 patients on it and just had a patient titrate to Butrans 20mcg dose. Daniel its a patient of dr SouzdaInitski and she was maxed out on Percocet 7.5 mg before going to Butrans. Discussed OxyContin dosing, titration and Daniel asked if there is an indication other than q12? I told Daniel no and asked why. Daniel said a couple of weeks ago he got a prescription for OxyContin dosed q6. Daniel said h did not fill it and can't remembers the prescriber but it wasn't pain management. Reviewed dosing Q12 8a and 8p.
PPLPMDL0020000001	Akron	OH	44319	9/26/2014	Window call and showed dr the OxyContin conversion page from MVA. I asked him to please start by taking patients on the OxyContin 10mg and asked him if he has some people who would start there? Dr said he does he just forgets. I told him to not forget anymore and help his patients by providing the q12 oxycodone option. Reminded him to gain more clinical experience with Butrans and left him the conversion and titration guide.
PPLPMDL0020000001	Cleveland	OH	44113	9/26/2014	Quick review of OxyContin every 12hours, abuse deterrent characteristics along with Butrans for those patients requiring around the clock analgesia, Said Ok, referred to Dr. Shen.
PPLPMDL0020000001	Akron	OH	44312	9/26/2014	I told dr about the reviewed indications of ER opioids and told him about the OxyContin and Butrans ones. I asked dr if its possible that he takes a closer look at his existing patients on Percocet who may still be in pain and he's considering a dose adjustment. Told dr to simply convert them in a 1:1 conversion to q12 OxyContin. Dr said alright and will look into it. Reminded him that Butrans is that schedule 3,7 day transdermal patch for those in pain on tramadol.<font color=blue><b>CHUDAKOB added notes on 10/07/2014</b></font>I like your verbiage of asking the doctor to take another look at his existing patients. Good thinking Cliff.
PPLPMDL0020000001	Fairwan	OH	44333	9/26/2014	Gave quick message about the IR oxycodone insight and asked him how frequently is he converting Percocet patients to OxyContin? Dr said as often as he can. Dr said he really doesn't want the short acting products to be taken for longer than 45-60 days. I told dr that's good to hear and to please continue using OxyContin and told him that I think he has more opportunity for Butrans when a patient even on tramadol is in pain around the clock and is still in pain. I told dr Butrans might be a more appropriate option than going to another IR opioid. Dr said he agrees. Nothing else learned.<font color=blue><b>CHUDAKOB's query on 10/07/2014</b></font>What did you talk to the MA about?<font color=green><b>LARAWKA's response on 10/14/2014</b></font>Nothing too interesting. Discussed coverage for OxyContin and butrans, offered savings cards and a bit of non product discussion. I left samples and had to log a call.<font color=blue><b>CHUDAKOB added notes on 10/16/2014</b></font>What you wrote me provided a lot more information than"talked to MA". Thank you!
PPLPMDL0020000001	Cleveland	OH	44144	9/26/2014	Quick review of OxyContin every 12hours along with Butrans for those Med D patients requiring around the clock analgesia, Said Ok, will keep it in mind
PPLPMDL0020000001	Parma	OH	44129	9/26/2014	Briefly talked about patients in around the clock pain and when ER might be appropriate option. He asked if I could leave savings cards.<font color=blue><b>CHUDAKOB's query on 10/07/2014</b></font>Who did you speak with?<font color=green><b>LARAWKA's response on 10/14/2014</b></font>Talked with Steve and Doctor's husband Paul.<font color=blue><b>CHUDAKOB added notes on 10/16/2014</b></font>When you speak with a nurse, MA, or office manager (these are the only three staff members that meet the criteria for a non-office call), please write the name and title of who who spoke with, for example, "spoke with Steve, the office manager."
PPLPMDL0020000001	Parma	OH	44129	9/29/2014	Thanks Kathy.
PPLPMDL0020000001	Independence	OH	44131	9/29/2014	Doctor said that he prefers to not write more than 10 mg of oxycontin, but does have a few patients on more than that. He inherited some patients taking it every 8 hours and has made sure they are taking it q12 now. He believes the molecule works very well. He has started a few patients on butrans who responded very well to it. He will continue to find appropriate around the clock pain patients that might respond to butrans.
PPLPMDL0020000001	University Hts	OH	44118	9/29/2014	Talked to Doug who says that he sees a lot of patients on morphine, cancer patients on OxyContin, not too many long-term IR meds. Reviewed appropriate patient for OxyContin. He has never dispensed butrans at the pharmacy, but has at other locations. Reviewed appropriate patient type for butrans.
PPLPMDL0020000001	Cleveland Hts	OH	44118	9/29/2014	Quick window call reviewed OxyContin every 12hours, Managed Care opportunities along with Butrans for those patients failing on present therapy requiring around the clock analgesia, Said Ok, will consider for appropriate patients, Asked Maria for help in reminding Dr.
PPLPMDL0020000001	Fairlawn	OH	44333	9/29/2014	Reviewed And discussed treating around the clock pain in 4-6hr increments. Reviewed OxyContin abuse deterrent characteristics every 12hours, Savngs cards, Med D coverage along with Butrans for those patients requiring around the clock analgesia. Said Ok will continue prescribe for appropriate patients
PPLPMDL0020000001	akron	OH	44333	9/29/2014	Caught dr in hallway by sample collect and told him I want to make sure he's converting appropriate patients in pain on Percocet to q12 OxyContin and to also ensure that he sees how well Butrans is coverages. Showed him both the Medicare D and commercial formulary grids. Dr said alright he will give it a shot again. Checked copy cards. Nothing else learned.
PPLPMDL0020000001	Garfield Hts	OH	44125	9/29/2014	Told dr again about the tramadol insight and told him I know he currently has patients in his practice who continue to be refilled on tramadol and probably meet the Butrans indication? I asked dr if I am right? Dr said he does have some patients he should be starting on Butrans. I asked him if he will at least offer it and explain it to his patients? Dr said he will. I reviewed OxyContin attributes, indication and doses.
PPLPMDL0020000001	Westlake	OH	44145	9/29/2014	Visited Pain mgmt (Dalbir, Samuel, Abraham) OxyContin/Butrans Formulary grids, Patient info booklets
					WEaved to the doctor. taked to laura the office manager about dosing and scheduling of butrans and oxycontin.



	Twinsburg	OH	44087	9/29/2014	Shared hydrocodone insight #9 with doctor. He said the statistic wasn't logical for all patients on hydrocodone. he feels that their diagnosis is more relevant than length of therapy. He used to prescribe oxycontin more freely in the past, but is much more selective in who gets the ER meds. He does think that it is worth reminding him about butrans because he sees that it is a good option for some patients. Reviewed scott as a patient type he can keep an eye out for and consider butrans.
PPLPMDL0020000001	Lyndhurst	OH	44124	9/29/2014	Caught Dr. Reed up front at check out. Quick mention of: to avoid step edits we discussed at lunch, you can use either of my products for your commercially covered patients, their should NOT be any step any; and patients can use savings cards and will get best available co pay for both OxyContin and Butrans. Ok she replied, walked back into hallway/rooms.
PPLPMDL0020000001	Fairlawn	OH	44333	9/29/2014	Discussed Butrans and OxyContin attributes, reviewed indications again and checked stocking of Butrans and OxyContin. Currently they have all doses of Butrans except 15mcg. Was told they just don't see enough to stock it. I asked for stocking of all doses of OxyContin which they have and multiple ones. Sue said that they have plenty of copay cards. Reviewed the Butrans trial offer.
PPLPMDL0020000001	Cleveland Hts	OH	44118	9/29/2014	Reviewed with OpeI (OxyContin)/Butrans for those patients requiring around the clock analgesia, Said Ok, no new info learned
PPLPMDL0020000001	Mayfield Heights	OH	44124	9/29/2014	Met w med assts Abby, Anisha & Keanna. Keanna made a spot for my OxyContin savings cards outside sample closet in clear holder. She says drs will NOT look in sample closet for savings cards; they will look at wall. The smaller closets are for OTC products only. Dr Roxana will be back in tomorrow. She & Dr Gabriel leaving for vacation Wed Oct 1& returning Mon 10/13. Med D pull through, Butrans trial, savings discussed.
PPLPMDL0020000001	Independence	OH	44131	9/29/2014	Tried to meet the doctor or set an appointment or lunch appointment. They said they would talk to him and get back to me. Talked to the nurse about patients in around the clock pain and where oxycontin and butrans might be appropriate.
PPLPMDL0020000001	Fairlawn	OH	44333	9/29/2014	Quick hello while speaking with Linda about Butrans and OxyContin copay cards. I asked dr if he's finding the clinical success with OxyContin he is hoping for? Dr said for the most part yes and said that there are those patients for some reason that don't take it and say that Percocet works better. Dr said those are the tough patients because it takes a lot of convincing that they need a long acting product. I told dr I agree and told him I'm glad he feels so strongly about using a Q12 oxycodone. Reminded dr to use Butrans for those patients who may need a titration on tramadol or vicoden and the schedule 3, 7 day patch may be appropriate. Gave Linda the MediCare formulary grid and discussed the Caresource Pa.
PPLPMDL0020000001	Akron	OH	44320	9/29/2014	Spoke to a pharmacist intern about Butrans and OxyContin attributes, conversions, titration and patient type selection. He told me that he has seen some Butrans come through and said he sees OxyContin pretty often. Left conversion and titration guides.
PPLPMDL0020000001	Mayfield Heights	OH	44124	9/29/2014	Note: Drs Stanescu leaving for vacation THIS WED, AND RETURNING MON OCT 13. Met with Med Asst Keanna, and she made place outside sample closet for OxyContin savings cards. The small cabinets (locked) are only for OTC products. It's best to keep savings cards in clear holders OUTSIDE sample closet. Discussed both of my products, verbatim indication, for trusted patients. With Dr Stanescu: primary care insight. If you decide to treat a trusted patient with daily, atc, long term pain, I have two good options for you. You can start w low dose OxyContin, single entity, dosed q 12 h. Controlled release oxycodone. Another option is Butrans, 1x week buprenorphine transdermal. I'd like you to look over the Butrans initiation and titration guide & follow up next visit. Sound good? yes, he replied.
PPLPMDL0020000001	Independence	OH	44131	9/29/2014	Discussed patient who might benefit from q12 dosing of OxyContin. He said he does write it but not a lot of it. Presented Scott patient profile, he said he has patients like that in his practice, has tried butrans in the past but that butrans is very expensive. I explained that coverage has gotten much better, presented formulary grids and reviewed dosing and titration.
PPLPMDL0020000001	Akron	OH	44319	9/29/2014	I asked to speak with Dawn the nurse and dr came up to window and asked me if I needed a signature? I told her I didn't and asked her for a minute. Dr said she will take my information for review and I told her that OxyContin and Butrans are ER opioid options for patients who have pain around the clock. Dr said ok and she will look over the info. Nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44118	9/29/2014	Quick Butrans call in hallway, reviewed 7 day transdermal CII for those patients requiring around the clock analgesia, along with OxyContin abuse deterrent characteristics every 12hours, Said Ok will keep it in mind, nothing new learned
PPLPMDL0020000001	Cleveland Hts	OH	44118	9/29/2014	Reviewed with Tech OxyContin abuse deterrent characteristics every 12hours along with Butrans 7 day transdermal every 12hours. Said Ok will relay to Rph
PPLPMDL0020000001	Euclid	OH	44117	9/29/2014	Note: can see Dr D starting at 9AM NOW ON MONDAYS. Impromptu breakfast. Summarized last call. why not low dose OxyContin before Vicodin/Norco? Dr says he will keep in mind. He has tried to get several patients to try Butrans, but they refuse and want "pills." He's had to discharge many patients from practice & send over to pain specialty, because they are testing positive for other illicit narcotics during urine screens. Discussed Butrans, as option for those that are willing to try transdermal, before Tramadol or hydrocodone combos. Lori checked savings cards; they have ample supply. Med D, BWC, formulary pull through. Asked for business today, remainder of
PPLPMDL0020000001	Lyndhurst	OH	44124	9/29/2014	Met w OM Julie and med asst front window. Dr. in w new patient/consult, not available. Left & discussed Butrans BPE kits. When Julie saw box, she stated: we already have those. I replied, are you sure? Showed her all that's in kit, explained how designed to work. She went in sample room/confirmed they only had regular savings cards, and did take some. If patient needs 80- mg or more morphine equivalent, another option is OxyContin, CII, single entity, dosed every 12 hours. Savings also available for OxyContin.
PPLPMDL0020000001	Akron	OH	44333	9/29/2014	I told dr that he needs to ensure whoever is asking for more Percocet and complains of being in pain he needs to consider the q12 oxycodone. Dr said ok. I also told him that he has told me on more than one occasion that he forgets about Butrans and the Caresource PA. I reviewed it with him and left him formulary grids.
PPLPMDL0020000001	Mayfield Heights	OH	44124	9/29/2014	Met first w dr Vilinsky med asst Anisha. Discussed my products scheduling, verbatim indication, strengths. Left Butrans, OxyContin fpi's and (1) Butrans patient guide for Anisha. Let her know savings cards for both products outside sample closet. Asked her to call me with any issues regarding access for their patients to my products. Med D pull through, both products. Dr Vilinsky, for patients that meet ER opioid indication; I'd like to reinforce Butrans as an option - 1x week patch, 4 strengths, 8 possible application sites, can be called/faxed in with refills. Med D pull through. Dr says patients currently on Butrans, so far, so good. Asked him to consider today, remainder of week; Butrans and OxyContin if patient needs 80 mg or more of morphine equivalent daily, atc, long term. Ok he replied.
PPLPMDL0020000001	Cleveland	OH	44118	9/29/2014	Reviewed And discussed treating around the clock pain in 4-6hr increments, Reviewed OxyContin abuse deterrent characteristics every 12hours, Savings cards, Med D coverage along with Butrans for those patients requiring around the clock analgesia. Said Ok will help with helping reminding Dr.
PPLPMDL0020000001	Cleveland	OH	44115	10/1/2014	Reviewed OxyContin/Butrans and OTC profile with George, Said Ok will consider for appropriate patients
PPLPMDL0020000001	Parma	OH	44129	10/1/2014	We discussed appropriate patient for butrans being a patient needing more Tramadol. Rather than titrating their Tramadol, consider butrans. He said he will try to find appropriate patient in his practice. He will refer to pain management rather than initiate OxyContin.
PPLPMDL0020000001	Akron	OH	44333	10/1/2014	Elise told me that a patient who was on Butrans 20mcg for more than a year within the last two weeks started a new Butrans 20mcg prescription. Elise said that once he applied Butrans like he always had the patient experienced severe blistering and skin irritation. Elise said the patient needed to go to the ER. Elise said that the patient called Purdue to report the incident. Spoke with Elise about her using Butrans for her Caresource patients and then explained the pa criteria. Elise said she is getting more and more new patient referrals and a lot are Caresource. Elise told me that they are no longer accepting buckeye because they won't pay for UDS screenings. I told her that's a good thing because its tough to get Butrans approved. Elise told me that she is continuing to write and when patients ask for more Norco or tramadol she moves them to Butrans. Discussed OxyContin attributes, dosing, conversions, titration and appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44115	10/1/2014	Visited pain Mgmtn/IM depts Reviewed OxyContin/Butrans for appropriate patients, Initiation/Titration guides
PPLPMDL0020000001	Cleveland	OH	44115	10/1/2014	Reviewed with Jodie (Clinical Pharm D dir.) OxyContin and Butrans Initiation/Titration, Formulary Cov./ Said she will recommend for appropriate patients and diag.
PPLPMDL0020000001	Garfield Hts	OH	44125	10/1/2014	Quick review of OxyContin every 12hours, 7 tablet strengths, Why treat around the clock pain in 4-6hr increments, along with Butrans for those patients requiring around the clock analgesia, Said Ok , has appropriate patient to consider,
PPLPMDL0020000001	Cleveland	OH	44115	10/1/2014	Discussed treating pain in 4-6hr increments, Reviewed OxyContin every 12hours, abuse deterrent characteristics, formulary coverage along with Butrans for those patients requiring around the clock analgesia, Said he will continue to prescribe for appropriate patients, and has a patient in mind
PPLPMDL0020000001	Akron	OH	44333	10/1/2014	Spoke with Jim the pharmacy manager and said he only had a few seconds. I told him that Butrans is a schedule 3,7 day transdermal patch and reviewed indication. Described dosing and other attributes. OxyContin indication, dosing and conversions.
PPLPMDL0020000001	Barberton	OH	44203	10/1/2014	Quick wave hello. Talked about hydrocodone insight he said he was aware. Told him next time we were going to talking reassessing patients if they may be appropriate for a product like OxyContin or Butrans
PPLPMDL0020000001	Norton	OH	44203	10/1/2014	Spoke to Tracey the office managed about hydrocodone insight. Reviewed scheduling of my products
PPLPMDL0020000001	Stow	OH	44224	10/1/2014	Quick hello in stow office and asked her when she is primarily using OxyContin and in what type of patient? Dr said she is using it and is mostly refilling it but had started it plenty of times in patients who ask for more Norco or Percocet. Dr said she is finding that she can't continue to refill the short acting narcotics because its doing no good. Dr said at least OxyContin gives her patient a longer delivery of oxycodone. I told her that's great to hear and to continue identifying more patients. I asked to please keep Butrans on her radar as well for patients maybe on tramadol and ask for more. Dr said ok. Nothing else learned.
PPLPMDL0020000001	Akron	OH	44333	10/1/2014	I told dr that I wanted him to focus on initiating patients with Caresource on Butrans who meet the indication. Reviewed the pa criteria. I reminded him about Medicare D plans and commercial coverage and asked him to prescribe it more frequently and to not continue patients on IR opioids who have daily, around the clock pain. I discussed OxyContin use in patients whom are already on the molecule and reviewed dosing and titration.
PPLPMDL0020000001	Akron	OH	44313	10/1/2014	I led with the hydrocodone insight and asked dr what he typically does when a patient fails tramadol then fails hydrocodone due to efficacy or tolerability? Dr said he would probably go to Percocet. I asked dr why he move from one IR opioid to another three times when the patient seems to have daily, around the clock pain at that point? Dr said he doesn't really know. I told him I want to discuss why OxyContin is a possible solution for those patients. Dr said ok. Next time. I reminded him about Butrans Scott profile and asked for more clinical experience..
PPLPMDL0020000001	Parma	OH	44129	10/1/2014	He thinks that OxyContin is appropriate for his patients in around the clock pain. He likes the q12 dosing rather than 4-6 hr increments.
PPLPMDL0020000001	Akron	OH	44307	10/1/2014	Quick hallway call and I asked him if he happens to have do e patients who may be on tramadol around the clock and still complaining about pain? Dr said he knows of a few. I reviewed the Scott profile and asked for business in those types of patients. Reminded him. To continue of thinking about q12 oxycodone when oriens on oxycodone but in 4-6 hr increments are in pain..
PPLPMDL0020000001	Bedford	OH	44146	10/1/2014	Got to know him a little better today, 3 daughters, 6th, sophomore and senior ( wants her to stay close to home). He stopped writing oxycontin until they came out with abuse deterrent formulation. Now he believes it should be written when patients start taking their IR 3-4 times per day. He thinks butrans is a great option for many patient types. Elderly, multiple pain states, and for those drug seekers who want a pill, he won't give them what they request. If they don't want the patch, they can go somewhere else.
PPLPMDL0020000001	Cleveland	OH	44115	10/1/2014	Discussed treating around the clock pain in 4-6hr increments, Reviewed OxyContin every 12hr, abuse deterrent characteristics along with Butrans for those patients requiring around the clock analgesia. Said Ok will help in reminding Dr. R
PPLPMDL0020000001	Cleveland	OH	44115	10/1/2014	Window call. Quick Butrans intro, 7 day transdermal CII, Tramadol failures along with OxyContin every 12h, Said Ok, no further info learned
PPLPMDL0020000001	Cleveland	OH	44115	10/1/2014	Window call. Reviewed OxyContin every 12hours, 7 tablets along with Butrans for those patients requiring around the clock analgesia, Said Ok, no further info learned, Admin Said she will relay info
PPLPMDL0020000001	Norton	OH	44203	10/1/2014	Discussed hydrocodone insight. Dr said he was aware and thought it will be interesting to see how many patients complain about the change. We talked about OxyCotin he told me about managed care not covering it. Sarah the priar auth ma did some investigation and found it to be a patient w a high deductible plan w commercial insurance. We talked about Butrans and the dosing and caresource.
PPLPMDL0020000001	Mayfield Heights	OH	44124	10/2/2014	Met with med asst. Dr Irina only had 1 patient; already left. Discussed with med asst my 2 ER options for patients meeting indication (verbatim indication) OxyContin can be titrated in 1-2 days based on steady state of 24-36 hrs. Left (3) OxyContin slim Jim's for all HCPs. Reminder OxyCotin. savings cards, Caresource & Med D pull through. Discussed Butrans as CII 1x week, or every 7 day patch. Steady state 72 hrs, and then Butrans can be titrated. Butrans studied in back pain, osteoarthritis. Left (4) Butrans patient guides for HCPs. Her mom, age 62, who lives in New York State has bad back pain/ spinal stenosis. Has been on Tramadol but it bothers her stomach. She states she doesn't do well on many pills. Let her know starting dose of Butrans for opioid naive is 5 mcg hr. Left her Butrans FPI, Pam profile. Left a few green protect your meds brochures.
PPLPMDL0020000001					



PPLPMDL0020000001	Westlake	OH	44145	10/2/2014	Quick wave to the doctor and he thanked me for brining patient materilas for butrans. Spoke to carol and linda a while about hydrocodone insight. Reviewed the patient leave behinds (tear off sheets)and made sure they were set on coupons. Reviewed who can use the coupons and who can't. Talked about scheduling of butrans and refills.
PPLPMDL0020000001	Cleveland	OH	44130	10/2/2014	Told him up from that I want to point out two patient types to keep an eye out for and then I can be out of his way. Discussed patient in around the clock pain that should have an ER OxyContin. Reviewed Pam as possible patient type for butrans. He agreed that it is an option worth considering especially now since schedule change.
PPLPMDL0020000001	Cleveland	OH	44113	10/2/2014	Discussed treating around the clock pain in 4-6hr increments. Reviewed OxyContin abuse deterrent characteristics every 12hours along with Butrans CII for those patients failing on present therapy that require around the clock analgesia. Med D coverage, Said Ok, Asked for a patient this afternoon, Said he will consider for appropriate patient
PPLPMDL0020000001	Stow	OH	44224	10/2/2014	Spoke with the technician Amy about Butrans and OxyContin and reviewed attributes for each. Discussed copy cards for Butrans and OxyContin and asked about stocking.m Amy said they have the 5 and 10mcg of Butrans and all the OxyContin doses.
PPLPMDL0020000001	Westlake	OH	44145	10/2/2014	Spoke to Candy the office manager about hydrocodone insight- reviewed what it means to be a schedule product in terms of refills. Scheduled lunch with the doctor. Highlighted the scheduling of my products
PPLPMDL0020000001	Westlake	OH	44145	10/2/2014	Spoke Jeanette the ma about hydrocodone insight. She said she wasn't looking forward to the calls next week but she was aware about it. We talked about what it means in terms of refills and how patients get their scripts for schedule 2 and 3 products. Reminded her which schedule oxycontin adn butrans fell in. Tried to see the doctor but not today...I told her I was going to try again next week.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	10/2/2014	Followed up on recent lunch appointment and asked dr once he has a patient on OxyContin how he got about titrating and if his first dose is accurate to the analgesia necessary? Dr said he's had enough experience with OxyContin that he doses it pretty accurately and will titrate anytime he feels the patients functionality and movability increases or at least gets the pain under control. I reviewed the dosing and titration information and then asked him to continue prescribing Butrans for patients on tramadol or hydrocodone.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	10/2/2014	Spoke to Linda about the tramadol insight and then reviewed th Scott profile. I told Linda how important this time is for her taking the spot of basically three PA's and to ensure Butrans and OxyContin prescriptions maintain and grow. Linda told me to not worry because she just titrated a patient to 15mcg of Butrans and has many others to maintain and start. Discussed OxyContin attributes, dosing and conversions.
PPLPMDL0020000001	Cleveland	OH	44113	10/2/2014	Visited Ortho/Rheum depts, OxyContin/Butrans Initiation/Titration guides along with Formulary grids
PPLPMDL0020000001	Waterford	OH	45786	10/2/2014	I-Butrans dosing and titration. OxyContin dosing.W-is having success with Butrans
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	10/2/2014	Hallway call. Told dr that it he needed to prescribe OxyContin at the first thought that the patient is in pain around the clock. I told her that Butrans is also a product that she would be writing for her patients who are in pain on tramadol and she is considering titrating the dose.
PPLPMDL0020000001	Cleveland	OH	44130	10/2/2014	Reviewed Pam as a possible butrans patient and discussed Tramadol patient. He said he has been very disappointed in effectiveness of Tramadol, so he does believe that he may have a few patients he can get some experience with butrans based on the patient profile. Reviewed dosing, titration and formulary coverage also. He is still going to avoid oxycontin.
PPLPMDL0020000001	Waterford	OH	45786	10/2/2014	I-Butrans dosing and titration. OxyContin managed-care.W-will look over the information. No experience with Butrans.
PPLPMDL0020000001	Cleveland	OH	44129	10/2/2014	Discussed treating around the clock pain in 4-6hr increments. Reviewed OxyContin and Butrans for those patients requiring around the clock analgesia, Said Ok, will consider CII Butrans. Will be retiring by years end
PPLPMDL0020000001	Cleveland	OH	44127	10/2/2014	Discussed treating around the clock pain in 4-6hr increments. Reviewed OxyContin and Butrans for those patients requiring around the clock analgesia, Said Ok, will consider CII Butrans. Will be along with wife retiring by
PPLPMDL0020000001	Mayfield Village	OH	44143	10/2/2014	Delivered hydrocodone insight. Dr had emergency earlier with male patient being transported by ambulance. Not completely engaged. His main concern was cost for Butrans for Medicare Med d pull through. Let him know next visit I want to discuss Helen patient profile.
PPLPMDL0020000001	Cleveland	OH	44113	10/2/2014	Reviewed with Cecelia, OxyContin abuse deterrent characteristics along with Butrans new dosing strength and patient info booklets, said ok will keep an eye out for new prescribers
PPLPMDL0020000001	Westlake	OH	44145	10/2/2014	Pharmacist didn't have time to talk much today. I asked if they needed any patient information pieces on butrans? they said no. I talked about schedule 3 of butrans and 2 of oxycontin. Talked about dosed every 7 days with butrans and every 12 hours for oxycontin.
PPLPMDL0020000001	Strongsville	OH	44136	10/2/2014	Gary said that they don't stock butrans but do have a bit of OxyContin. He agrees that patients in around the clock pain should be on ER release meds, but that everyone is afraid to prescribe those. He does think that may help butrans in the future. If he starts to get requests, he will stock it.
PPLPMDL0020000001	Cleveland	OH	44127	10/2/2014	Saw Dr. at hospital. Reviewed OxyContin every 12hour, 7 tablet strengths along with Butrans CII for those patients requiring around the clock analgesia, Said Ok, Will stop by office next week
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	10/2/2014	Dr told me that she wrote a prescription for Butrans recently and said there is a pa for it. Dr said the patient has Molina asked me if I knew what the criteria is? I asked dr if she had the pa and she said its buried in her desk. I told her I will look into it. Asked her to prescribe more Butrans for those failing IR opioids like Butrans. Reminded her that OxyContin is another ER solution that is dosed q12 and is a single entity oxycodone.
PPLPMDL0020000001	Mayfield Heights	OH	44124	10/2/2014	Met. with pharmacy owner (RETAIL INDEPENDENT) Warren. Discussed utilization of OxyContin; he dispenses on regular basis. He has yet to dispense Butrans. He does fill scripts for Hillcrest Pain Mgt, but NOT Butrans. Other findings: surgery centers in habit of writing Norco or hydrocodone products. Regarding hydrocodone. Schedule change to CII MON 10/6; he WILL honor all refills through April 2015. Left Butrans 7.5 NDC retail independent brochure. Discussed Butrans product attributes including no first pass metabolism, Med D pull through.
PPLPMDL0020000001	Westlake	OH	44145	10/2/2014	Spoke to sylvia the ma for a while about the hydrocodone insight and what it means to be schedule 2 and three in terms of refills and how they get their scripts. Reviewed butrans, appropriate pateitns, how dosed, managed care. Saw the doctor and reviewed what butrans is, its scheduling and no first pass or dose adjustment for renal, hepatic mild to moderate/or elderly patients. DR asked how it compared to fentanyl. I explained no head to head studies. Also reviewed 7 day transdermal patch system and the initiation guide of how to start a patient. Reminded on oxycontin, another single entity control release product for atc chronic pain patients dosed every 12
PPLPMDL0020000001	Strongsville	OH	44136	10/2/2014	Quick intro through the window. Told her that I was hoping to talk with her about a few of her patients in around the clock Pain who may be appropriate for ER meds instead of treating their pain in 4-6 hour increments. Then I told her what I promote. She said that she doesn't write narcotics really, but will talk with me about that another time.
PPLPMDL0020000001	Cleveland	OH	44113	10/2/2014	Reviewed OxyContin every 12hrs, 7 tablet strengths along with Butrans for those patients requiring around the clock analgesia, Savings cards, Said he is sending patients post follow up to pain mgmnt, but will keep in mind
PPLPMDL0020000001	CLEVELAND	OH	44109	10/2/2014	Reviewed OxyContin with Tam TCh, Every 12hours, abuse deterrent characteristics along with Butrans CII, 7 day transdermal said Ok will relay info to RPH
PPLPMDL0020000001	Strongsville	OH	44136	10/2/2014	She was too busy to talk, said that stock some OxyContin but don't see much butrans. She thinks that the hydrocodone scheduling is going to spark the doctors to reevaluate their prescribing for pain patients.
PPLPMDL0020000001	Parma	OH	44129	10/3/2014	He said he only chooses oxycontin for a very few patients and really tries not to write it. He likes butrans for the younger patients that he doesn't want to get pills. I pointed out the appropriate Tramadol patient before Norco as appropriate patient for butrans. Reviewed formulary coverage with him and staff and they said that usually they don't have difficulty getting prescription through..
PPLPMDL0020000001	Cleveland	OH	44125	10/3/2014	Reviewed with Emily OxyContin /Butrans 7.5mcg/hr said Ok will order when new RX is prescribed,
PPLPMDL0020000001	Akron	OH	44310	10/3/2014	Reviewed Butrans attributes, conversions, appropriate patient types with Scott and Helen. I asked dr if he would consider offering Butrans to patients on Norco who are in oain around the clock? Dr said he doesn't want to write hydrocodone and has issues with cost for Butrans. I asked cost for which plans or patients? Dr said he couldn't remember but vicoden is cheap. I told him it may not be as cheap as he thinks. Dr said it depends on the way of pills. Reviewed OxyContin conversions and appropriate patient types.
PPLPMDL0020000001	Akron	OH	44312	10/3/2014	Discussed hydrocodone insight and asked him how his business might change with hydrocodone moving to a schedule 2? Dr said he knows he needs to make come changes because he doesn't have time for the visits and monthly prescriptions. I told him his option to explore more frequently is Butrans. Reviewed schedule 3,7 day transdermal system, attributes, conversions and Helen profile. Dr said he thinks Butrans prescriptions will increase.m I told him I hope they come from him as well and reviewed the indication again. Dr said his changes may very well include more Butrans. Reviewed OxyContin appropriate patients, conversions and dosing.
PPLPMDL0020000001	Akron	OH	44312	10/3/2014	Started off with tramadol insight, discussed Butrans and OxyContin attributes, conversions, titration and appropriate patients for each. Dr didn't say much during presentation. Continued to gain commitment for Butrans and he would not provide it. Discussed Butrans Helen and Scott profile along with copy card information. Reviewed appropriate patient identification for OxyContin along with conversions and titration.
PPLPMDL0020000001	Akron	OH	44312	10/3/2014	Started off by discussing tramadol and hydrocodone insight. Dr said he's concerned about hydrocodone becoming a schedule 2 medicine because they will be upset they can't have it called in and refilled. I discussed appropriate solution with Butrans for patients in pain around the clock on hydrocodone, Helen and Scott profiles, Bup 3015 review and identifying appropriate candidates. Reviewed application sites, conversions and titration. Dr said he wants to write it more and just needs to convince his patients. I told him I believe he can do that especially if the IR isn't working. Discussed OxyContin appropriate patient types, conversions and start principles.
PPLPMDL0020000001	Cleveland	OH	44113	10/3/2014	Window call Reviewed Butrans for those patients requiring around the clock analgesia, along with OxyContin every 12hours, Said Ok, will continue to prescribe for appropriate patients, Doing all surgeries over at St. V's
PPLPMDL0020000001	Parma	OH	44129	10/3/2014	Quick chat because it was a horrible day for them because of new EMR system. Talked to Lynne the MA for a while about butrans. Doctor came up for a few moments and said that I should stop back in three weeks or so. He thinks butrans is a great option for his patients. He has noticed that coverage is better. I told him that often patients are in around the clock pain and are being treated in 4-6 hour increments and it's my job to help dr find appropriate patients for ER meds. He said that he doesn't want any OxyContin savings cards since he has barely written it.
PPLPMDL0020000001	Cleveland	OH	44113	10/3/2014	Reviewed Butrans for those patients requiring around the clock analgesia, along with OxyContin abuse deterrent characteristics every 12hours, Said Ok, will continue to prescribe for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44125	10/3/2014	Reviewed OxyContin/Butrans 7.5mcg/hr with Josh. Said Ok will order when RX, Will keep aware of utilization.
PPLPMDL0020000001	Akron	OH	44312	10/3/2014	Discussed Butrans and OxyContin attributes, dosing and conversions with Steve. Reviewed the Helen profile with Steve and discussed hydrocodone moving to a schedule 2. Steve said they have some patients on Butrans and of course some on OxyContin. I daid used copy cards for both products and asked about stocking of products.
PPLPMDL0020000001	Akron	OH	44319	10/3/2014	I told dr that he had two excellent solutions for patients who have daily around the clock pain and are currently on IR opioids. I showed him the OxyContin conversion guide and then the Butrans Helen profile. Dr said thanks for the reminder. I asked him if he would identify a patient on tramadol who is in pain around the clock.
PPLPMDL0020000001	Berea	OH	44017	10/3/2014	Talked about the hydrocodone insight. Dr said he doesn't write for more than a month at a time anyway so he doesn't feel it will impact his practice. Talked about reassessing those monthly patients...and if there was someone with atc chronic pain would you increase there immediate release or would you consider Oxycontin? Dr said he will use what ever is cheaper first. Highlighted a few commercial plans with coupons.
PPLPMDL0020000001	Akron	OH	44312	10/3/2014	Discussed the IR oxycodone insight and asked him to please reassess his patients on Percocet who have pain around the clock. Discussed hydrocodone moving to schedule 2 and dr said in the Pioneer physician meeting recently they discussed it and spoke about how they are inadequately treating their patients pain. Dr said he knows he's not doing a good enough job and said that he will try and or write more schedule 3 Butrans. Reviewed Helen and Scott profiles and reviewed proper initiation and patient identification.
PPLPMDL0020000001	Lakewood	OH	44107	10/3/2014	Spoke to Karen about Scheduling and what that meant in terms of refills for butrans and oxycontin
PPLPMDL0020000001	Fairview Park	OH	44126	10/3/2014	Spoke to ma about butrans and oxycontin scheduling and what they means in terms of refills and how patients have to get the scripts.
PPLPMDL0020000001	Akron	OH	44312	10/3/2014	Short call and asked dr to reassess his patients on 40mg of hydrocodone and Percocet as potential candidates for OxyContin. Reminded him of dosing and conversions. Reviewed copy cards. Told him to please gain more experience with Butrans a a couple of patients doesn't make up a clinical trial.
PPLPMDL0020000001	Olmsted Falls	OH	44138	10/3/2014	Spoke to ma and talked about refills with Butrans and about Oxycontin with how patients need to come get their script with no refills.
PPLPMDL0020000001	Garfield Hts	OH	44125	10/3/2014	Reviewed with Maria, OxyContin every 12hours, abuse deterrent characteristics along with Butrans 7 day transdermal, CII along with Savings cards, Said ok will relay info to Dr.
PPLPMDL0020000001	Garfield Hts	OH	44125	10/3/2014	Visited Pain mgmnt/IM depts. Butrans/OxyContin Initiation/titration guides, Scott profile

	Akron	OH	44312	10/3/2014	Started off with tramadol insight and also spoke about the hydrocodone insight. Dr said they are not looking forward to Oct 6th when hydrocodone becomes a schedule 2 medicine. I asked dr how that is going to impact his business? Dr said patients are going to be upset and its going to take a lot more time and effort on the entire staff. I told him that he has two excellent options for patients on IR opioids when have pain around the clock and discussed indications for Butrans and OxyContin. Dr said he is going to have to start changing the way he prescribes for pain and said that Butrans seems like a great option. Discussed Butrans attributes, conversions, titration, initiation, and the Helen and Scott profiles. Dr said he wants to make sure his patients can get it. I asked him what concerns him and he said Medicare and Medicaid. I discussed Medicare D plans and Caresource PA. Reviewed copy cards for both products and asked him to use OxyContin for patients in pain on Percocet.
PLPMDL0020000001	Cleveland	OH	44111	10/3/2014	Discussed atc chronic pain patients and asked why prescribers wait to turn to a control release if they were appropriate for one? Pharmacist said they didn't know. Reviewed dosing and scheduling of both products. I asked what questions butrans patients ask them? He said they don't. Highlighted patch rotation and how to discard the patch or unused oxycontin.
PLPMDL0020000001	Garfield Hts	OH	44125	10/3/2014	Reviewed Butrans CII, Med D coverage for those patients requiring around the clock analgesia along with OxyContin every 12hours, 7 tablet strengths, Said Ok, nothing new learned
PLPMDL0020000001	Cleveland	OH	44113	10/3/2014	Discussed treating around the clock pain in 4-6hr increments, Reviewed OxyContin every 12hours with abuse deterrent characteristics, along with Butrans for those Tramadol failures requiring around the clock pain. Said Ok, will continue to consider
PLPMDL0020000001	Cleveland	OH	44113	10/3/2014	Reviewed Butrans CII for those patients failing on Tramadol who require around the clock analgesia. Said Ok, leaves treating chronic pain to Nickels but will keep in mind
PLPMDL0020000001	Parma	OH	44129	10/3/2014	He does prescribe a bit of a bit of OxyContin for the appropriate older patient because he believes ER is the right choice for people in around the clock pain. He will give butrans a try. Reviewed Pam quickly and he said that he thinks there is a place for it in his practice and I should keep reminding him.
PLPMDL0020000001	Westlake	OH	44145	10/6/2014	No new information learned on this call.
PLPMDL0020000001	Westlake	OH	44145	10/6/2014	No new information learned on this call.
PLPMDL0020000001	Garfield Hts	OH	44125	10/6/2014	Discussed treating around the clock pain in 4-6hr increments, Reviewed Butrans for those patients failing on present therapy requiring around the clock analgesia, along with OxyContin abuse deterrent characteristics every 12hours. Med D coverage Said Ok, will consider for appropriate patients
PLPMDL0020000001	Fairlawn	OH	44333	10/6/2014	Spoke with Janine a floater pharmacist and discussed Butrans attributes, schedule 3,7 day transdermal patch, conversions and Butrans 7.5mcg dose. Janine said that both their own warehouse and wholesaler are both McKesson. She looked at stocking and said it looks like its there but they have not entered it in the system for ordering yet. She said they she figures a day or two and it will be available. Discussed OxyContin attributes, conversions and appropriate patient toys. Discussed q12, single entity oxycodone.
PLPMDL0020000001	Cleveland	OH	44195	10/6/2014	No new information learned on this call.
PLPMDL0020000001	Westlake	OH	44145	10/6/2014	No new information learned on this call.
PLPMDL0020000001	Stow	OH	44224	10/6/2014	Spoke with Jamie the pharmacist about Butrans 7.5mcg and asked about stocking. Jamie said that they use cardinal and the system said they had an issue with their system but to showing its repaired and Butrans 7.5mcg is available but didn't show quantity. Jamie said when its available who will order a couple of boxes of it. Discussed OxyContin attributes, conversions and hydrocodone letters cvs is sending to all patients. Jamie said that their computer system deny and refills from today on. Jamie said she thinks it will increase Butrans prescribing.
PLPMDL0020000001	Euclid	OH	44117	10/6/2014	Left OxyContin sell sheet, Helen profile, Butrans initiation guide for Dr. DeMicco with med asst at front desk.
PLPMDL0020000001	Hudson	OH	44236	10/6/2014	Spoke with Beth the pharmacist about Butrans and asked her if her wholesaler cardinal has Butrans 7.5 mcg in stock. Beth looked it up and said they do have it in stock. Discussed Butrans attributes and conversions.
PLPMDL0020000001	Westlake	OH	44145	10/6/2014	Reviewed the OxyContin doses and conversions.
PLPMDL0020000001	Westlake	OH	44145	10/6/2014	Spoke to the new pharmacist katelynn benninghoff about OxyCotin being schedule two and dosing. She told me they are honoring refills of hydrocodone. We reviewed Butrans multiple patch usage showing core visual aid. We reviewed how to discard the medication. We talked about ordering the 7.5. She said she would order it tomorrow and it would be here in a day. She told me that when scripts come in n Friday....they don't get it till Monday.
PLPMDL0020000001	Cleveland	OH	44195	10/6/2014	No new information learned on this call.
PLPMDL0020000001	Westlake	OH	44145	10/6/2014	No new information learned on this call.
PLPMDL0020000001	Westlake	OH	44145	10/6/2014	No new information learned on this call.
PLPMDL0020000001	Cleveland	OH	44195	10/6/2014	No new information learned on this call.
PLPMDL0020000001	Akron	OH	44312	10/6/2014	Followed up with dr from lunch last week about Butrans patient assistance program. Dr told me that he prescribed Butrans and patient said she couldn't afford it. Dr said the PAP will help. I reviewed Helen profile and asked for continued patient identification. Told him he has another ER option with q13 OxyContin and reviewed doses and conversions.
PLPMDL0020000001	Garfield Hts	OH	44125	10/6/2014	No new information learned on this call.
PLPMDL0020000001	Euclid	OH	44119	10/6/2014	Left OxyContin savings sell sheet, conversion guide, Helen profile, for Dr. Saeed. Monday not a good day to stop.
PLPMDL0020000001	Uniontown	OH	44685	10/6/2014	Dr said that he write two Butrans recently. One for a patient on Norco and said the patient is doing well and like Butrans. Dr said but the second one was taking Percocet 5/325 every eight hours so he started on 5mcg and asked if that was the right starting dose and I told him it was accurate based solely on the approximate conversion. Dr said the patient wasn't getting enough relief and then he titrated to 10mcg. Dr said the patient after a week or so said it was working but not as good as Percocet and he placed the patient back on Percocet. I told dr he still had two doses to titrate to and next time to continue titrating until adequate analgesia is attained. Told dr to continue prescribing and to not forget OxyContin as a q12 oxycodone option.
PLPMDL0020000001	Akron	OH	44333	10/6/2014	Handed dr the OxyContin conversion and titration guide and reminded him its a q12 single entity opioid and to use it for his patients already on the molecule but taking it 4-6 hours at a time and are still in pain. Told him about the Butrans 7.5 mcg dose and how he now has 5 doses so he can individualize the dose. Told him to focus on patients who are suffering from pain on tramadol or Norco and ask for more. Reviewed the indication and Dana said that she is going to be leaving the practice at the end of the month. She said she is going to IMS at Akron City Hospital and it is their hospitalist program. She said she is going to be running a unit associated with the ER. Dana said that she has a couple of more patients on Butrans and has titrated a few recently. I told her about the Butrans 7.5 mcg dose and asked for continued business until she leaves. Reminded her that OxyContin is available for those in pain on IR opioids who meet the indication.
PLPMDL0020000001	Cleveland	OH	44125	10/6/2014	Reviewed OxyContin every 12hours, abuse deterrent characteristics along with Butrans Intro 7 day transdermal, CII for those patients requiring around the clock analgesia, Said Ok, will keep it mind, will not be practicing much longer.
PLPMDL0020000001	Cleveland	OH	44125	10/6/2014	Reviewed with Tech Butrans 7.5mcg/hr intro. Reviewed Butrans for those patients requiring around the clock analgesia along with OxyContin every 12hours, Said she will relay info, stop back later in week, speak with Sarah
PLPMDL0020000001	Cuyahoga Falls	OH	44223	10/6/2014	Discussed OxyContin as his go to ER opioid and dr spoke about patients he's continuing to get from dr Bressi's practice who are on all sorts of opioid mixes and Opana ER. Dr said he can't believe why anyone would write Opana ER over Oxycontin. I told him that's good to hear. I asked dr for continued support and to convert more patients from Percocet who meet the indication. Discussed how Butrans is an option for his patients get to
PLPMDL0020000001	Garfield Hts	OH	44125	10/6/2014	Quick OxyContin review of abuse deterrent characteristics every 12hours, along with Butrans for those Med D patients requiring around the clock analgesia, Said Ok will keep it mind.
PLPMDL0020000001	Hudson	OH	44236	10/6/2014	Dr told me that he is continuing to look for patients for Butrans and told me he will start writing it because he is convinced it works and its a schedule 3. Dr said he doesn't want to even refill hydrocodone now that its a schedule 2. Discussed Helen patient types, and conversions along with 7.5 mcg dose. Discussed OxyContin as his go to schedule 2 opioid for those needing a Q12 ER dingle entity oxycodone.
PLPMDL0020000001	Mayfield Village	OH	44143	10/7/2014	Left w med asst at front window, OxyContin slim jim, Butrans Scott profile. (left same for all hcp's in practice.)
PLPMDL0020000001	Cleveland	OH	44114	10/7/2014	Reviewed with Horace RPH- OxyContin along with Butrans 7.5mcg/hr will order when RX is presented,
PLPMDL0020000001	Westlake	OH	44145	10/7/2014	Talked about hydrocodone insight. Reviewed reassessment for atc chronic pain patients per indication appropriate. Dr said he might see a few more patients then he thinks he will but doesn't know if they will be appropriate.
PLPMDL0020000001	Tallmadge	OH	44278	10/7/2014	Talked when he converts to extended release dr said t depends but couldn't specify. Talked about moving from hydrocodone to OxyContin or Butrans or Tramadol to Butrans per the indication. Covered managed care and Told dr I would like him to tell me who he would write OxyContin for? Dr said he doesn't really want to write any pain medicines. I told him I'm guessing he dos though? Dr said he does. I told him to use OxyContin for patients in pain on it opioids like Percocet who have daily, around the clock pain. Dr said alright. I showed him the Helen profile and to just try it in a patient similar to her.
PLPMDL0020000001	Cuyahoga Falls	OH	44223	10/7/2014	Discussed with dr the IR oxycodone insight and inquired about his use of OxyContin and where and when he uses it. Dr spoke about using it primarily when patients are already on oxycodone and where Butrans may not provide enough relief. Discussed OxyContin attributes and patient types. Reviewed Butrans 7.5 mcg and discussed about how he now has another dose to titrate to and not having to double on the 5mcg dose. Dr said he's happy about that and will be using it because he usually starts on 5mcg and wants another titratable dose. Reviewed the Helen profile and dr said he really likes the safety of Butrans and is a big reason why he uses it. Both Gail and Teri are leaving the practice at the end of October.
PLPMDL0020000001	Cleveland	OH	44106	10/7/2014	Discussed Insight 18 along with treating patients in around the clock pain in 4-6hr increments, Reviewed OxyContin abuse deterrent characteristics every 12hours 7tablet strengths along with Butrans for those patients requiring around the clock analgesia, Initiation/Titration, 7.5mcg/hr Said he will continue to consider for appropriate patients, Will also keep Butrans in mind for appropriate patients. Asked if he had someone this afternoon?
PLPMDL0020000001	Cleveland	OH	44106	10/7/2014	Discussed treating around the clock pain in 4-6hr increments, Reviewed OxyContin every 12hours, abuse deterrent characteristics along with Intro to Butrans 7 day transdermal, CII for those patients requiring around the clock analgesia, Med D coverage, Savings Cards, Said he will consider for appropriate patients if opportunity presents
PLPMDL0020000001	Cleveland	OH	44106	10/7/2014	Discussed treating around the clock pain in 4-6hr increments, Reviewed OxyContin every 12hours, abuse deterrent characteristics along with Butrans Intro. 7 day transdermal, CII for those patients requiring around the clock analgesia, Med D coverage, Savings Cards, Said he will consider for appropriate patients, Attendings RX most opioids
PLPMDL0020000001	Cleveland	OH	44106	10/7/2014	Discussed Insight 18 along with treating patients in around the clock pain in 4-6hr increments, Reviewed OxyContin abuse deterrent characteristics every 12hours along with Butrans for those patients requiring around the clock analgesia, Said he will consider for appropriate patients, not much will change with Hydro products as he and dept have treated like CII's in the past. Will try Butrans consider and try Butrans again for appropriate
PLPMDL0020000001	Lyndhurst	OH	44124	10/7/2014	Hallway. After presenting Hydrocodone insight & introducing Helen profile. Told dr Kim, I have quiz for you: can you call or fax Butrans in with refills? Med asst leaned over and said No you can't! I stated, yes you can - Butrans remains a CII ER opioid, that CAN be faxed, called in with up to 5 refills. Diane says, we would never provide 5 refills. I replied I'm not suggesting you do- I'm just presenting the data on a CII opioid & how pharmacy will handle. When Patient who has daily, ATC, long term pain, and needs 80 mg or more of morphine equivalent, OxyContin available, providing every 12 hours of oxycodone release for a patient. Today, this week, write Butrans or OxyContin for appropriate patients discussed.
PLPMDL0020000001	Cleveland	OH	44106	10/7/2014	Discussed treating around the clock pain in 4-6hr increments, Reviewed OxyContin every 12hours, abuse deterrent characteristics along with Butrans CII for those patients requiring around the clock analgesia, Med D coverage, Savings Cards, Said he will consider for appropriate patients but most of his focus is on procedures, Will be transitioning to Cardio-Thoracic Anesthesia
PLPMDL0020000001	Cleveland	OH	44106	10/7/2014	Discussed treating around the clock pain in 4-6hr increments, Reviewed OxyContin every 12hours, abuse deterrent characteristics along with Butrans CII for those patients requiring around the clock analgesia, Med D coverage, Savings Cards, Said she will consider for appropriate patients but most of her focus is on procedures,
PLPMDL0020000001	Mayfield Heights	OH	44124	10/7/2014	No new information learned on this call.
PLPMDL0020000001	Tallmadge	OH	44278	10/7/2014	No new information learned on this call.
PLPMDL0020000001	Cleveland	OH	44106	10/7/2014	Reviewed OxyCotin along with Butrans 7.5mcg/hr with Marge, Checked Amerisource and is not in stock, will order when presented with RX, next day

PPLPMDL0020000001	Akron	OH	44310	10/7/2014	Dr said he's already working on Butrans this week and has prescribed two of them. I asked for what types of patients and what they were on? Dr said he doesn't have time but said he got a mailer from Purdue last week about the 7.5 mcg dose and said it's a great idea. Left him the piece on dosing. Nothing else learned.
PPLPMDL0020000001	Mayfield Heights	OH	44124	10/7/2014	Met with tech Traci, pharmacist Giovanni giving vaccine. Pharm Mgr Natalia not in. Had Traci go into computer & check Cardinal wholesaler for Butrans 7.5 mcg/hr stocking. Cardinal reported that it showed Butrans 5,10,15&20 strengths in - but not 7.5. Showed " Not stocked" - asked if it provides an ETA at warehouse, she replied no. Discussed & left Butrans patient guide. Left Butrans NDC code piece.
PPLPMDL0020000001	Woodmere	OH	44122	10/7/2014	Talked with Jennifer, the pharmacy was the busiest I have ever seen. They do stock a bit of butrans but will not order the 7.5 until they get requests. Once that happens they will keep in stock.
PPLPMDL0020000001	North Olmsted	OH	44070	10/7/2014	Hydrocodone insight. Reviewed OxyContin dosing and scheduling and Butrans new dosage.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	10/7/2014	Discussed Butrans 7.5 mcg dose and its attributes. Matt said that he says his wholesaler says its in and will order it when he sees a prescription. I asked him how much he dispenses and he said no enough to justify ordering a new dose. Reviewed OxyContin attributes, dosing and conversions.
PPLPMDL0020000001	Mayfield Heights	OH	44124	10/7/2014	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	10/7/2014	No new information learned on this call.
PPLPMDL0020000001	Lyndhurst	OH	44124	10/7/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	10/7/2014	No new information learned on this call.
PPLPMDL0020000001	Tallmadge	OH	44278	10/7/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	10/7/2014	Dr moved w westshore primary in rocky river. Dr was at westlake location today at meeting and joined for lunch. Hydrocodone insight, dr said she doesn't like that product. Talked about atc chronic patient and indication.
PPLPMDL0020000001	Akron	OH	44308	10/7/2014	Talked about the potential to see more hydrocodone this week and if appropriate per indication try Butrans or OxyContin as options if appropriate. Reviewed dosing. Gave primary care insight.
PPLPMDL0020000001	Olmsted Falls	OH	44138	10/7/2014	MSL emailed FACETS handouts per customer request. MSL to follow up on future FACETS presentation. MSL sent Science and Nature of Pain, Communications to Enhance Collaboration, and Documentation.
PPLPMDL0020000001	Mayfield Heights	OH	44124	10/7/2014	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	10/7/2014	Hallway. Hydrocodone insight. When patients come in every 30 days to pick up their Vicodin or Percocet, I propose you re assess those patients, and if they need a change in therapy or dose, consider OxyContin. OxyContin provides Delivery of oxycodone every 12 hours, ability to titrate in 1-2 days. For patients with daily, ATC, long term pain - this is good option. If OxyContin not appropriate, Butrans is option. Showed Helen profile as naive patient covered on Medicare d. She was confused and thought Butrans was rescheduled along with hydrocodone. My response: Butrans remains a CII, once a week transdermal (worn every 7 days) & can be called/ faxed in with up to 5 refills. Med assts say rescheduling doesn't have huge impact on them, because HCPs have patients come in every 30 days anyway. Asked for business, both products. Savings card for self pay, commercial patients Spoke to Joan the pharmacy technician and asked to discuss Butrans and OxyContin and to inquire about stocking of new Butrans 7.5 mcg . Joan said they are too busy today to look for stocking and to come back later in the week. Left Butrans doing information and OxyContin conversion and titration guide.
PPLPMDL0020000001	Mayfield Heights	OH	44124	10/7/2014	Hallway. Delivered Hydrocodone insight. Proposed that when Vicodin or Percocet patients come in every 30 days for refill - that she re assess and if patient meets ER opioid indication, consider OxyContin, which provides every 12 hrs release of oxycodone (1 tablet 8a, 1 tablet 8p) and ability to titrate in 1-2 days. If patient says strength not working, consider it might be dose failure & not product failure. Dr has female patient, very large woman (age 52/56) on 60 mg OxyContin q12 h. Patient also on Valium. She has arthritic pain in knees, trouble walking. She tried to offer Butrans, patient unwilling. Dr is upset & states she goes to bed worrying at night, about this patient & doesn't like her on dose that high. She states pain mgt should be managing her patients pain meds. (since she is not pain specialty) but they don't want to, & send patients right back to her. If OxyContin not appropriate - Butrans (showed Butrans dosing chart in core vis aid) 1x week transdermal, for patients taking 30-80 mg morphine equivalent. An option to start opioid naive patient like Helen (profile) on start dose of 5 mcg/hr. We discussed OARS med 80 guidelines & she's doing everything that's required of her.
PPLPMDL0020000001	Mayfield Hts	OH	44124	10/7/2014	Lunch. Dr Laham wanted to know when we will have him speak again. I confirmed our speaker bureau funds have all been utilized for this calendar year, and speaker programs will start up again Jan 2015. Discussed hydrocodone insight. When meeting with patients every 30 days, and if they need change in therapy or dose adjustment, I propose he consider Butrans based on clinics Data we've discussed & tolerability in naive & tolerant patients. Discussed Helen profile. Dr Laham agreed a patient like Helen would be appropriate for opioid naive start on Butrans 5 mcg strength. If patient needs 80 mg or above morphine equivalent, I propose you let OxyContin delivery system help patients with daily, ATC, long term pain. 1 tablet 8 am, 1 tablet 8 pm and ability to titrate in 1-2 days. Asked for business.
PPLPMDL0020000001	Cleveland	OH	44106	10/7/2014	Visited Pain mgmt/Onc depts, OxyContin/Butrans Initiation/Titration guides
PPLPMDL0020000001	Westlake	OH	44145	10/7/2014	In office with dr gotis. Hydrocodone insight. Indication and limitations of use. Review atc chronic pan opioid and scheduled 2 OxyContin and 3 Butrans. Reviewed dosing
PPLPMDL0020000001	Lyndhurst	OH	44124	10/7/2014	Hallway Delivered Hydrocodone insight to Dr Isakov. Then presented Helen profile. Would he agree for an opioid naive patient like Helen, that Butrans starting dose would be appropriate? Yes he stated. If patient needs 80 mg or more of morphine equivalent, OxyContin, a CII, dosed q 12 h is an option. Dr says has coverage improved for Butrans? I replied with Med D pull through. How is commercial coverage? Commercial coverage is great! I should have updated formulary grids in a few weeks. As I was packing up to leave , dr Isakov waived the profile at their PA-C student & stated to Laura: we need to discuss this product. I replied, I hope you have patient in mind right now for Butrans!
PPLPMDL0020000001	North Olmstead	OH	44070	10/7/2014	Hydrocodone insight. Talked about scheduling and what that means n terms of faxing and refills for OxyContin and Butrans. Talked about atc chronic pain patients which the dr said he had very few. Talked about limitations of use for OxyContin and Butrans and reviewed the patients that meet the criteria and were over 40mg hydrocodone. Dr said he doesn't have any. Focused on Butrans. Dosing, steady state. Reviewed Helen profile. And closed.m
PPLPMDL0020000001	Westlake	OH	44145	10/7/2014	Talked about hydrocodone insight, dr said he treats a lot of pain and said sometimes he treats chronic pain. Talked about OxyContin scheduling and dosing. Dr said he doesn't write it. We talked about Butrans. We talked about attributes such as no dose adjustment for mild to moderate renal imarments or for the elderly. We talked about no first ass. Reviewed patch position. Rotation and managed care. Reviewed Helen. Dr said the information was helpful and he would think about using it.<font color=blue><b>CHUDAKOB's query on 12/08/2014</b></font>Lisa, there is a real need to please re-read all your call notes before submitting them. This call notes has two questionable comments.1) You wrote "no dose adjustment for mild to moderate renal imarments" What are imarments?. What does the Butrans FPI say regarding renal impairment??2) This statement which you wrote: "We talked about no first ass." As you can see not re-reading call notes can lead to sometime inappropriate comments in call notes.Please respond with what you meant?<font color=green><b>BARTOLI's response on 12/17/2014</b></font>1. Per the FPI 12.3 no studies with renal impairments have been performed w Butrans. No notable relationship was observed between creatinine clearance rates and steady state buprenorphine concentrations among patients with Butrans therapy. 2. I was talking about a Butrans attribute, no first pass.<font color=blue><b>CHUDAKOB added notes on 12/20/2014</b></font>Lisa, section 12.3 discusses the Renal Impairment. It should also be noted in the same section it discusses 70% of buprenorphine following IM administration was eliminated in the feces. Regarding question 2, please re-read your call notes before submitting them to prevent this type of error.
PPLPMDL0020000001	Lyndhurst	OH	44124	10/7/2014	Hallway. Met with med asst Amy first. Amy says you might be able to win Dr Prada over if your products have good Medicare D coverage. She also shared that she was shocked to learn Dr Prada wrote a Vicodin script recently for a patient. Hydrocodone insight to Dr Prada. Then Helen profile. Dr Prada was impressed with number of patients studied overall for Butrans & data on geriatric subjects studied. If patient has daily, ATC pain, long term; they meet indication for Butrans. Butrans remains a CII once a week Transdermal product, that can be called/ faxed in with refills. If patient needs 80 mg or more morphine equivalent or greater, low dose OxyContin is an option. Asked for just 1 or 2 trusted patients whom she can help in her practice. Ok I will think about Dr Prada replied. Left Butrans FPI, sliding doser.
PPLPMDL0020000001	Westlake	OH	44145	10/7/2014	In w dr gotis. Reviewed indications and limitations of use. Reviewed scheduling and dosing. Opened w hydrocodone insight.
PPLPMDL0020000001	Beachwood	OH	44122	10/7/2014	Talked with nurse Debbie?kathy? About patients in around the clock pain who need around the clock pain relief. Now with the schedule change of hydrocodone, might be time to reassess pain patients and if any are appropriate for q12 dosing with OxyContin. If scheduling matters to them, butrans is an option since it is C3 , reviewed Pam and she said she would mention it to the doctor.
PPLPMDL0020000001	Sagamore Hills	OH	44067	10/8/2014	Doctor said that he has a few patients on OxyContin, once they are decided to be in around the clock pain he feels they should be on ER med. He doesn't think patients should be taken many pills. He is not happy about the rescheduling of hydrocodone, he doesn't feel that it is as addictive as Oxycodone. He was interested in hearing more about butrans but he has written it in the past and it was too expensive. We reviewed appropriate opioid naive and Tramadol patients as appropriate for butrans. He like the idea of trying butrans earlier instead of getting them started on pills. Reviewed initiation and titration guide, formulary coverage. He took patient information tear off sheet and said he will look for appropriate patient to try butrans again.
PPLPMDL0020000001	Cleveland	OH	44106	10/8/2014	Reviewed OxyContin/Butrans for those patients requiring around the clock analgesia, 7.5mcg/hr said she will relay info to RPH
PPLPMDL0020000001	Akron	OH	44320	10/8/2014	quick hallway call and told her to identify just one patient who has pain around the clock and is still in pain who might be appropriate for Butrans. dr said ok and asked about conversions. reviewed conversions and titration and asked for business.
PPLPMDL0020000001	Cleveland	OH	44106	10/8/2014	Reviewed OxyContin abuse deterrent characteristics every 12hours, 7 tablet strengths along with Butrans Intro, 7 day transdermal, for those patients requiring around the clock analgesia, Said ok, will continue to prescribe for appropriate patients and will consider Butrans.
PPLPMDL0020000001	Cleveland	OH	44106	10/8/2014	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44320	10/8/2014	told dr about the start principles about oxycontin. Dr told me he is going to start another patient on Butrans. I asked him why he thought about butrans and he said that the patient wants more short acting narcotic. I showed dr the conversions and starting doses along with 7.5 mcg dose. reminded about oxycontin doses and attributes.
PPLPMDL0020000001	Cleveland	OH	44195	10/8/2014	No new information learned on this call.
PPLPMDL0020000001	BEACHWOOD	OH	44122	10/8/2014	Allison said that they will not stock any branded products until someone comes in with a prescription. They do stock both products and get product in one day when needed.
PPLPMDL0020000001	Cleveland	OH	44113	10/8/2014	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44303	10/8/2014	Spoke with Rod and told him about Butrans 7.5 mcg. Discussed stocking and fill rates with other doses. Reviewed attributes for Butrans and OxyContin and discussed the indications for each. Rod spoke about hydrocodone moving to a schedule 2 and said most prescriptions for it didn't have refills anyway.
PPLPMDL0020000001	Northfield	OH	44067	10/8/2014	Doctor tries not to talk to reps, ran into her as she came into the office for the afternoon and I was leaving, handed her oxycontin leave behind open to conversion from IR, and Helen patient profile. Asked her to consider ER medications when they are taking IR around the clock and to keep an eye out for patients like Helen who might be appropriate for c3 butrans. She said thank you.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	10/8/2014	No new information learned on this call.
PPLPMDL0020000001	Barberton	OH	44203	10/8/2014	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44313	10/8/2014	Spoke with Jason the pharmacist about Butrans 7.5mcg and explained dosing and conversions and asked him to check on his wholesaler Amerisource for stocking. Jason said the have it and won't order until he sees a prescription. Jason said most prescriptions he fills are for the 5mcg dose. Discussed OxyContin attributes and conversions.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	10/8/2014	Led off with tramadol insight and dr began talking about the rescheduling of it and hydrocodone. I asked dr how its impacting his business and he said not much because he hasn't ever written much and may be writing it for 90 days. I told dr to consider initiating Butrans for patients before they even get to hydrococone as long as they meet the Butrans indication. I reviewed both Scott and Helen and asked him where he's used it before? Dr said when he knows the patient is in chronic pain. I reviewed the indication and asked for continued business.
PPLPMDL0020000001					

PLPMDL0020000001	Barberton	OH	44203	10/8/2014	Discussed hydrocodone insight, dr said it won't effect him because he sees them monthly anyway. Talked about what he said last time and clarified. Dr sid he has about 70 percent of his patients who are hydrocodone that are under 40mg total daily dose. Talked about potential reassessment patients and who is appropriate for Butrans and how to initiate. Reviewed Helen.dr said he might not always convert Someone like Helen . He said he might try alternative approaches and perhaps later to an extended release product. Dr felt extended release products are valuable u. The right patients that are appropriTe. Talked about managed care, cousins.
PLPMDL0020000001	Beachwood	OH	44122	10/8/2014	Nicki discussed the additional requirements on their staff with hydrocodone schedule change, how they don't have enough time to see all the patients monthly. I reviewed that when patients come in, is the perfect time to reassess their pain and see if they are appropriate for ER opioids. She agreed. Discussed schedule 3 butrans as appropriate for some patients in around the clock Pain, and now with additional dose of 7.5. She said she would let Roberta and Doctor know.
PLPMDL0020000001	Cleveland	OH	44106	10/8/2014	Reviewed OxyContin abuse deterrent characteristics, 7 tablet strengths along with Butrans Intro 7 day transdermal, for those patients requiring around the clock analgesia. Said Ok, would like to further discuss at appt.
PLPMDL0020000001	Cuyahoga Falls	OH	44223	10/8/2014	Discussed the Butrans attributes, conversions, titration and Scott and Helen profiles. Dr did not offer any information to the conversation at lunch with other prescribers. Discussed copy cards, 7.5 mcg dose.
PLPMDL0020000001	Cuyahoga Falls	OH	44223	10/8/2014	Led with tramadol insight discussed new 7.5mcg dose, stocking, titration and Butrans attributes and copy cards. Discussed his use of Butrans and in patients like Helen and Scott. Focused on Helen and reviewed it in detail. Dr said he offers it to most patients and some ant it and come don't. I asked him to offer it to his medicare patients and those with private insurance.
PLPMDL0020000001	Akron	OH	44320	10/8/2014	quick discussion about butrans attributes, conversion, titration and patient types. Told her about insurance information and asked her to gain some experience
PLPMDL0020000001	Independence	OH	44131	10/8/2014	Used insight 18, he said with the additional scrutiny he is trying not to write opioids, he will be referring to pain management. Mentioned c3 butrans as a possible alternTive for those patients that want to remain in his practice. Reviewed initiation and titration quickly. He said he will consider that option.
PLPMDL0020000001	Cleveland	OH	44106	10/8/2014	Visited Onc/Hem dept OxyContin /Butrans Initiation/Titration guides, Savings cards
PLPMDL0020000001	Akron	OH	44333	10/8/2014	Quick discussion about Butrans 7.5mcg and how he can use it as a titratable dose. Dr said he's not getting much efficacy out of the 5mcg and figures he can get it from the 7.5mcg. I told him its still a titratable dose and he can better individualize the dose. Dr said he is liking the Caresource pa criteria and is pretty easy. Discussed OxyContin dosing, conversions and to prescribe more frequently for those in pain on IR oxycodone and meet the OxyContin indication.
PLPMDL0020000001	Sagamore Hills	OH	44067	10/8/2014	She said she doesn't treat pain patients. She blames oxycontin for the heroin problem. Abuse deterrent characteristics didn't matter much to her. She listened to conversation about butrans that I had with other doctor in practice and she quietly left lunch
PLPMDL0020000001	Shaker Heights	OH	44122	10/8/2014	Danielle moved from ridge road location, and is now pharmacy manger here. This is her first day on the job. Has not heard or noticed anything different since schedule change of hydrocodone. Wil only stock butrans 7.5 if patient is on it or if Doctor calls and asks them to have it on hand.
PLPMDL0020000001	Independence	OH	44131	10/8/2014	Used insight 18, he said that he is avoiding writing opioids, at the very least cutting back. I mentioned that he has to assess his pain patients monthly, and if he finds there are some in around the clock pain, that he consider treating them with ER opiod like OxyContin q12 instead of treating that pain in 4-6 hour increments. There is also a c3 butrans transdermal pain patch that might be appropriate for some patients. He just looked, didn't respond and went into room.
PLPMDL0020000001	Cleveland	OH	44113	10/8/2014	Discussed Insight 18, reviewed Butrans for those Norco patients requiring around the clock analgesia, Asked for a patient this afternoon, said she would, also reviewed OxyContin abuse deterrent characteristics every 12hours. 7 tablet strengths.
PLPMDL0020000001	Mayfield Village	OH	44143	10/9/2014	Met w med asst at front check in. Left Helen profile, OxyContin slim jim, Butrans dosing slider. Provided Med D pull through.
PLPMDL0020000001	Cleveland	OH	44143	10/9/2014	Hallway, Hydrocodone insight. As your re assessing your hydrocodone patients every 30 days, I'd like you to consider OxyContin, also a CII, dosed every 12 hours, and ability to titrate in 1-2 days. No additional AE's for elderly compared to young (18+) subject in clinical trials. Another option is Butrans, which remains a CIII. Butrans is worn every 7 days, and is indicated for (verbatim indication). A good place for opiod naive patient like Helen OR after 3-4 ir Tramadol daily, and pain still not controlled. Left OxyContin slim jim, Helen profile, sliding doser. Asked him to review info I left. (non tier/spoke w because Dr Solomon day off) Med D pull through.
PLPMDL0020000001	Norton	OH	44203	10/9/2014	Hydrocodone insight. Dr doesn't have many atc chronic pain patients. We talked about when OxyContin is used? Dr said hardly needs it. I asked why. He said its too expensive compared to generic so he would prefer to cheaper product. Dr said he isn't concerned about patients coming to the office mostly he said he won't see them anyway and that he will have the script waiting for them. I asked dr how he felt about Butrans after presentation and he said maybe one patient and only because they were only and may like a weekly patch. I asked why not a different person that also meets critia. Dr said he thinks his patients like pills. Talked about how does he know if he doesn't offer the option to an appropriate patient, discussed aarp, dosing and patch rotation .
PLPMDL0020000001	Norton	OH	44203	10/9/2014	No new information learned on this call.
PLPMDL0020000001	Cuyahoga Falls	OH	44223	10/9/2014	Updated Linda on Butrans 7.5 mcg dose and to first identify patients who have daily, around the clock pain and then individualize the dose. Linda said ok and thinks its a good move to add a dose between the 5 and 10mcg.
PLPMDL0020000001	Akron	OH	44305	10/9/2014	Noting else learned.
PLPMDL0020000001	Akron	OH	44305	10/9/2014	Told dr about the Helen profile and the addition of the 7.5 mcg dose. I asked dr to continue identifying patients who have daily, around the clock pain. Dr said he thinks the 7.5mcg is a good addition and will use it. Reviewed OxyContin dosing, conversions and use in patients who meet the indication and are already on IR oxycodone.
PLPMDL0020000001	Cleveland	OH	44102	10/9/2014	Reviewed with Tan RPH mgr. OxyContin abuse deterrent characteristics every 12hours, along with Butrans for those patients requiring around the clock analgesia, Said Ok, will order 7.5mcg/hr when presented with RX
PLPMDL0020000001	Cleveland	OH	44114	10/9/2014	Discussed treating around the clock pain in 4-6hr increments, Reviewed OxyContin abuse deterrent characteristics every 12hours, 7tablet strengths along with Butrans, for those patients reuqiring around the clock analgesia, Initiation/Titration, Said Ok, will consider for appropriate patients,
PLPMDL0020000001	Cleveland	OH	44195	10/9/2014	Discussed treating around the clock pain in 4-6hr increments, Reviewed OxyContin abuse deterrent characteristics every 12hours along with Butrans, for those patients reuqiring around the clock analgesia, Initiation/Titration, Said Ok, will consider for appropriate patients,
PLPMDL0020000001	Mayfield Village	OH	44143	10/9/2014	Hallway. Delivered hydrocodone insight. Asked Dr. as he's re assessing his hydrocodone patients every 30 days, if their pain is daily, etc, long term; I propose you consider OxyContin, also a CII, which offers every 12 hour release of oxycodone for your patients. Can titrate in 1-2 days, dosing flexibility. Dr says, you guys still make that? Yes, I replied. For patients who need under 80 mg morphine equivalent, Butrans is an option. Butrans is a CIII, 1 x week patch. How many days worn, asked dr. Sahiani? Every 7 days, I replied. Used Helen profile and dosing slider to show appropriate patient and dosing for naive/experienced. Showed how to write. Med D pull through.
PLPMDL0020000001	Akron	OH	44312	10/9/2014	Asked Dr to review info I left. He stated he would. Showed him where savings cards, for both products, are located in sample closet.
PLPMDL0020000001	Akron	OH	44312	10/9/2014	Discussed Butrans and OxyContin attributes, conversions, titrations, new 7.5mcg dose and appropriate patients with Helen and Scott. Janet agreed she needs to be thinking more ER opioids instead of IR continuation.
PLPMDL0020000001	Cuyahoga Falls	OH	44223	10/9/2014	Discussed OxyContin dosing, conversions, attributes, and abuse deterrent discussion from MVA.
PLPMDL0020000001	Cuyahoga Falls	OH	44223	10/9/2014	Updated Linda on Butrans 7.5 mcg dose and to first identify patients who have daily, around the clock pain and then individualize the dose. Linda said ok and thinks its a good move to add a dose between the 5 and 10mcg.
PLPMDL0020000001	Cuyahoga Falls	OH	44221	10/9/2014	Noting else learned.
PLPMDL0020000001	Uniontown	OH	44685	10/9/2014	No new information learned on this call.
PLPMDL0020000001	Akron	OH	44312	10/9/2014	Abby called today and asked me about Butrans insurance coverage. Discussed private insurance, BWC, Caresource, and Medicare D. Abby asked for the formulary grids in Green tomorrow.
PLPMDL0020000001	Highland Heights	OH	44143	10/9/2014	No new information learned on this call.
PLPMDL0020000001	Highland Heights	OH	44143	10/9/2014	Spoke with. tech Raquel & male pharmacist. Discussed OxyContin scheduling, dosing, verbatim indication. Then - access for their customers- for self pay, discussed reimbursement, for commercially covered, discussed monthly co-pay, savings. For Butrans, discussed scheduling, dosing & left NDC code brochure, introduced 7.5 Butrans. Currently, they have only 1 customer on Butrans. Medicare D pull through for Butrans. She says if Butrans not filled. The reason is always, prior auth didn't go through/ plan denied Butrans without step edit. Findings: they don't order narcotics electronically yet. Currently they use & FAX 222 form to Cardinal. They then submit copy of form to Cardinal DRIVER as well. They don't order narcotics on any set day; they order AS NEEDED. If patient doesn't pick up narcotic after 7 days, they place on "hold" status. Narcotics are treated like all other product categories/ schedules in this area.
PLPMDL0020000001	Cleveland	OH	44102	10/9/2014	No new information learned on this call.
PLPMDL0020000001	Norton	OH	44203	10/9/2014	No new information learned on this call.
PLPMDL0020000001	Barberton	OH	44203	10/9/2014	No new information learned on this call.
PLPMDL0020000001	Norton	OH	44203	10/9/2014	No new information learned on this call.
PLPMDL0020000001	Cuyahoga Falls	OH	44223	10/9/2014	Met Lauren a new pharmacist and discussed Butrans attributes, conversions and dosing. Discussed the 7.5 mcg dose and their wholesaler has it in stock. I asked her if they will order it based on the volume they do on dispensing and she said they will order it when they see a script. Lauren said that they see a lot of OxyContin as well and reviewed dosing and conversions with patient types.
PLPMDL0020000001	C. Falls	OH	44223	10/9/2014	Discussed the Butrans 7.5 mcg dose and asked them which Butrans dose they dispense most? Julie said they typically see most 5 and 10mcg doses. I told them they will most likely see the 7.5mcg as well. Asked about stocking and they said there is a delay with Cardinal but should be available tomorrow. Discussed OxyContin doses and copy cards. Told they need more cards.
PLPMDL0020000001	Highland Heights	OH	44143	10/9/2014	Lunch, total office call. Dr has all patients come back every 30 days to pick up opioid rx. Hydrocodone rescheduling does not effect him as a result. Dr asks: So what's new? every time I see him. I have new data for you. Percocet insight: dr says patient may need to be on ir opiod due to cost; or medicare d patients, who cannot afford \$20-40 monthly for branded script. Discussed Helen profile. As I was reading through profile, Dr stopped me, said I don't have time to listen to all that. Finished with Med D pull through. Reinforced self pay and commercially covered patients pay \$30 out of pocket for OxyContin. Commercial Butrans patients get trial, then pay approx \$15 dollars monthly. Dr asked if boxes of Butrans can be opened at pharmacy or if patient has to pay for whole month/all 4 patches. I replied, typically, pharmacies do NOT break open Butrans and are NOT instructed to do so.
PLPMDL0020000001	Norton	OH	44203	10/9/2014	Reviewed scheduling of Butrans and OxyContin. Went over indication and Helen profile. No said she prefers patches for most chronic things so she would read up on turbans, I gave her naive study to review on Butrans. The ng is a floater between offices prn.
PLPMDL0020000001	Cuyahoga Falls	OH	44223	10/9/2014	Spoke with Julie the pharmacist and discussed Butrans and OxyContin. Butrans 7.5mcg dose and stocking information. Reviewed attributes for each product and OxyContin dosing and conversions.
PLPMDL0020000001	Akron	OH	44304	10/9/2014	Caught dr Souzdalnitski at akron city hospital and discussed Butrans success and dr said that his patients love it and told me again he needs higher doses. I told him about the 7.5 mcg dose and reviewed 5 doses. OxyContin conversions and use in patients meeting indication already on oxycodone.
PLPMDL0020000001	Cuyahoga Falls	OH	44223	10/9/2014	Caught dr Souzdalnitski at akron city hospital and discussed Butrans success and dr said that his patients love it and told me again he needs higher doses. I told him about the 7.5 mcg dose and reviewed 5 doses. OxyContin conversions and use in patients meeting indication already on oxycodone.
PLPMDL0020000001	Cleveland	OH	44195	10/9/2014	Visited Pain mgmnt dept (Minster, Constand) Discussed OxyContin abuse deterrent characteristics every 12hours, reviewed Butrans, 7 day transdermal, Initiation/Titration, Savings cards and Formulary opportunities
PLPMDL0020000001	Cleveland	OH	44195	10/9/2014	Discussed treating around the clock pain in 4-6hr increments, Reviewed OxyContin abuse deterrent characteristics every 12hours along with Butrans 7 day transdermal for those patients reuqiring around the clock analgesia, Initiation/Titration, Said Ok, will consider, looking to start patients, does alot of in-hospital pain consults, Will discuss w colleagues.
PLPMDL0020000001	Cleveland	OH	44114	10/9/2014	Discussed treating around the clock pain in 4-6hr increments, Reviewed OxyContin abuse deterrent characteristics every 12hours along with Butrans, for those patients reuqiring around the clock analgesia, Initiation/Titration, Said ok, not treating many patients with opioids anymore, referring to pain mgmnt, but will consider, asked John for help in reminding.

	Mayfield Village	OH	44143	10/9/2014	Dr Azar office. Started to deliver hydrocodone insight, and Dr. interrupted and said; I have to ask you something. I have patient in room 2 who has cancer. Can I put him on OxyContin. He's on oxycodone 40 mg day. Asked for details of patient. He wanted me to go in room and talk to patient. I replied, I'm not permitted to do that; so I asked med asst to go in and speak with patient. Findings: patient is 54 yrs old, cancer pain, currently on oxycodone, on Caresource. Currently pays nothing for his oxycodone. I left Dr. Azar and med asst. know that Caresource requires a prior auth for OxyContin. When approved should be a few dollars a month, since it's a branded, ER medication, depending on patient's situation. Discussed average dose of OxyContin for cancer pain per fpi. Dr says he may offer patient at next appt. His concerns are: 1. prior auth 2. patient may NOT get for free
PPLPMDL0020000001	Cleveland	OH	44195	10/9/2014	Reviewed with Helene RPH mgr-who is leaving next week, OxyContin every 12hours, abuse deterrent characteristics along with Butrans for those patients requiring around the clock analgesia, Has not seen any but will relay info to new Pharm Mgr Steve M.
PPLPMDL0020000001	Akron	OH	44312	10/9/2014	Overview of Butrans after giving the tramadol insight. Dr said he agrees that too many patients are being kept on their IR opioids and not being converted. Reviewed Butrans attributes, Bup 3015, 7.5 mcg dose, copy cards and insurance. Dr said he's having good success with it and just refilled a Butrans 10mcg for a patient who says its the best thing ever. Reviewed OxyContin dosing, conversions, abuse set errant characteristics from MVA and copy cards and insurance. Discussed the BEP kits with dr and asked him to give them out to new patients.
PPLPMDL0020000001	Westlake	OH	44145	10/10/2014	Open. Hydrocodone insight. Dr said he doesn't treat much with that product and it's mostly acute anyway so he didn't think it would affect his practice. Talked about reassessing the pain patients on Tramadol and when he will turn to Butrans if appropriate. Reviewed Helen profile. Dr agreed Butrans was a good choice for the appropriate patients in his group. Dr asked about coverage. Covered aarp, which the dr said will no longer be covered for his patients. And covered the large commercial plans like medical mutual and anthem, reviewed the Butrans coupons. Highlighted the over 40mg/hydrocodone atc chronic pain patient for OxyCotin at 10mg q12. The dr said he will continue to write Butrans as ling as the coverage continues. Reviewed limitations of use and abuse potential with both products.
PPLPMDL0020000001	Rocky River	OH	44116	10/10/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	10/10/2014	No new information learned on this call.
PPLPMDL0020000001	North Royalton	OH	44133	10/10/2014	Stephanie the pharmacist said they carry almost all strengths of OxyContin. She feels that the hydrocodone change might get doctors to reevaluation patients when they come in and find appropriate patients for ER medications. She does not stock butrans at the moment, but will if their are requests. She was able to check that McKesson does have all 5 strengths of Butrans in stock
PPLPMDL0020000001	Cleveland	OH	44113	10/10/2014	Discussed treating around the clock pain in 4-6hr increments, Reviewed OxyContin every 12hours, 7tablet strengths, along with Butrans for those patients requiring around the clock analgesia. Said Ok will continue to prescribe for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44113	10/10/2014	Reviewed Butrans for those Norco patients failing on present therapy or being reevaluated, Along with OxyContin abuse deterrent characteristics every 12hours, Said he will consider to prescribe for appropriate patients, Talked to Carrie the pharmacist. She said they stock all strengths of OxyContin but not butrans. Their pharmacy will not honor the refills for any variation hydrocodone, it has already been challenging for them and their patients. I discussed messaging the physicians about treating around the clock pain with ER med instead of in 4-6 hour increments and she agreed. She didn't know too much about butrans. Reviewed indication, appropriate patient type, doses available. She thinks that is a great option. She requested savings cards for both.
PPLPMDL0020000001	Cleveland	OH	44130	10/10/2014	No new information learned on this call.
PPLPMDL0020000001	Uniontown	OH	44685	10/10/2014	Reviewed Butrans 7.5 mcg dose and flexibility that 5 doses brings. Reviewed insurance plans for private, Medicare and Medicaid plans. Abby said she is glad she has the new information and didn't realize it was covered so well. Reviewed attributes and asked for continued prescribing.
PPLPMDL0020000001	Cleveland	OH	44113	10/10/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	10/10/2014	No new information learned on this call.
PPLPMDL0020000001	Mogadore	OH	44260	10/10/2014	No new information learned on this call.
PPLPMDL0020000001	North Royalton	OH	44133	10/10/2014	Talked to Jim very briefly. He stocks all oxycontin and two strengths of butrans. He will not stock 7.5 until it is requested. Their supplier is Cardinal and it shows that "there are 12 in stock, but that there is a shipping delay from manufacturer", so he assumes they are in stock but wasn't sure. He had to run
PPLPMDL0020000001	Westlake	OH	44145	10/10/2014	Reviewed 7.5 do send how to order it. Talked about Butrans initiation guide and patch placement, highlighted OxyContin dosing.
PPLPMDL0020000001	Akron	OH	44319	10/10/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	10/10/2014	No new information learned on this call.
PPLPMDL0020000001	Brooklyn	OH	44144	10/10/2014	Reviewed OxyContin/Butrans along with 7.5mcg/hr presentation, Said they will order when RX is presented
PPLPMDL0020000001	Uniontown	OH	44685	10/10/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44144	10/10/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	10/10/2014	No new information learned on this call.
PPLPMDL0020000001	Fairlawn	OH	44333	10/10/2014	Met Felicia a new pharmacist and discussed Butrans attributes, dosing, conversions and new 7.5 mcg dose. I asked if they would order the new 7.5 mcg dose and Sue ordered a box of it. Reviewed OxyContin copy cards
PPLPMDL0020000001	Uniontown	OH	44685	10/10/2014	which Sue said she gave out two of them today. Spoke with Kim the pharmacist about Butrans attributes, dosing and new 7.5 mcg dose. Kim told me they dispense Butrans and do most 5 and 10mcg dose. I asked her if she will order the 7.5 mcg and she said no. She will order it when they see a prescription. Discussed OxyContin dosing and conversions as well as copy card review.
PPLPMDL0020000001	Westlake	OH	44145	10/10/2014	No new information learned on this call.
PPLPMDL0020000001	Tallmadge	OH	44278	10/10/2014	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	10/10/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	10/10/2014	Visited IM/Ortho Depts OxyContin/Butrans Initiation/Titration guides
PPLPMDL0020000001	Westlake	OH	44145	10/10/2014	Spoke to Amin the pharma it about stocking the 7.5 which he said he would do. Talked about Butrans starting doses and the use of the titration dose. Covered fair balance of respiratory depression and limitations of Butrans not for acute use. Spoke about OxyCotin dosing.
PPLPMDL0020000001	North Royalton	OH	44133	10/10/2014	Talked with Laura the pharmacist. They have all strengths of OxyContin but not butrans. She thought butrans was schedule 2, reviewed butrans dosing and titration and scheduling. she thinks there might be possible uptake in prescribing of this product. They will not stock it until they gets prescriptions from patients
PPLPMDL0020000001	N Royalton	OH	44133	10/10/2014	Quick meeting introducing myself. He said he tries very hard not to write oxycontin so he doesn't see a need to talk, I told him that I understand his feelings but there are probably a few patients in his practice who are in pain around the clock that may benefit from ER release medications. OxyContin's q12 dosing might be appropriate for a few patients, or schedule 3 butrans transdermal patch may be appropriate for some patients. Handed him the titration guide for butrans, began reviewing it. He said I can schedule a lunch to discuss this further.
PPLPMDL0020000001	akron	OH	44333	10/10/2014	Dr said he put a patient on Butrans the other day who was in pain on Norco. Dr asked if Butrans will remain a schedule 3 and I told him as far as I know yes. Dr said that's big for him because he doesn't want to write hydrocodone anyway. I asked for continued business and discussed the 7.5 mcg dose and how he can also go to OxyContin as a q12 oxycodone. Checked copy cards for both products and told him to use them for private
PPLPMDL0020000001	Westlake	OH	44145	10/10/2014	Hydrocodone insight. Dr did not think it would affect his practice. We talked about treating atc chronic pain patients after Tramadol. Dr agreed that if he patient was dosed more than 2 times a day, and refills longer than 3 months they might be appropriate for an extended release option like Butrans. Dr said his patients are older and in the med d coverage. We reviewed the dosing, no first pass, no dose adjustment for elderly. Talked about the lowest starting dose and reviewed imitation guide. Dr studied it. Talked about steady state, abuse potential of Butrans and OxyCotin and we covered aarp coverage for his med d patients.
PPLPMDL0020000001	Westlake	OH	44145	10/10/2014	Hydrocodone insight. I asked how this is going to change initiating new Hydrocodone patients? Dr said he will write less he thinks. I said is this because you have to see them in a monthly basis or because you don't want to write norco? Dr said he writes it because its cheap and he wonders if managed care will cover it now. I said that's a good question. I asked if it makes sense to convert someone who is not controlled on norco 40mg.... And is the atc not acute patient type if he will write OxyContin 10mg dosed every 12 hours for them? He said price is the problem usually. I asked him what is the price that is reasonable for your patients?? He said under 20 bucks and less if they are older. I said then you have to hand out the coupons which he said he does. And you need to know we are covered unrestricted on your biggest med d plans like aarp and silvers scripts. I reminded him about under 40mg of Hydrocodone and Butrans option for an uncontrolled norco patient. Talked to the staff about the experience kit and the value it brings to the patient s and e information it offers to the doctors.
PPLPMDL0020000001	N Royalton	OH	44133	10/10/2014	Quick intro as new rep wanting to discuss his patients in around the clock pain that might be treating that pain in 4-6 hour increments. Q12 OxyContin or c3 butrans might be an appropriate option for some of those patients. He agreed and can discuss at lunch.
PPLPMDL0020000001	Middleburg Hts	OH	44130	10/10/2014	Talked to Maria the MA about the patients in around the clock pain that would benefit fromER opioids such as OxyContin with q12 dosing. Shared butrans information now with 5 dosing options available. Asked her to share with Doctor Ryan so he is aware of that option for his patients, she said she would.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	10/10/2014	Discussed Butrans attributes, 7.5mcg dose, Helen profile and AE profile. Dr discussed cost with Butrans and was concerned with cash price of Butrans 5mcg dose and said that his patients are asked to pay upwards of \$3-400. Dr said his cash patients make up maybe 5% of his business. Dr said he wants me to check cash prices and I told him its just going to be too expensive for the vast majority. Discussed OxyContin use and dr said he would rather use Butrans because he knows it works and likes the safety profile. Reviewed copy cards for each product and BEP kits.
PPLPMDL0020000001	Euclid	OH	44119	10/13/2014	Quick hallway. Finishing up for day. Hydrocodone insight. Paul says its difficult to get OxyContin and Butrans covered for Medicare patients. Medicare D pull through. Left Butrans 7.5 brochure, OxyContin slim jim.
PPLPMDL0020000001	Mayfield Village	OH	44143	10/13/2014	Asked for OM Peggy, she's on vacation, will be back this FRI. Asked med asst Adriana if she feels they will have lunches in 2105; she states no, Drs just too busy. Caught Dr. Petroff at front, quick OxyContin, Butrans mention for patients with daily, atc, pain. Left Dr. Petroff Butrans 7.5 brochure/OxyContin slim jim. (left same for Drs. Moyal, Papirova)
PPLPMDL0020000001	Parma	OH	44134	10/13/2014	Informed doctor about new strength of butrans. He was happy to hear about another option. He is in agreement that OxyContin is an appropriate choice for patients in around the clock pain. He is still curious if the company is looking into changing the adhesive of butrans due to some patients reactions, submitted an emirf.
PPLPMDL0020000001	Valley View	OH	44125	10/13/2014	Reviewed with Aaron OxyContin/Butrans. 7.5mcg/hr. Said ok will continue to recommend to appropriate patients
PPLPMDL0020000001	Akron	OH	44319	10/13/2014	Spoke with the pharmacy technician Bob about Butrans and OxyContin attributes, conversions and appropriate patients. I asked about stocking of each product. Bob said they don't gve I'll many Butrans and have the 5 mcg in stock. Discussed the 7.5 mcg and stocking of more doses. Discussed copy cards.
PPLPMDL0020000001	Cleveland Hts	OH	44118	10/13/2014	Discussed reaccessing patients, along with treating patients in 4-6hr increments, Reviewed OxyContin every 12hours, along with Butrans for those patients requiring around the clock analgesia, Med D opportunities. Said ok will consider for appropriate patients
PPLPMDL0020000001	Akron	OH	44333	10/13/2014	Short conversation with Jim and discussed hydrocodone schedule 2 and Butrans 7.5 mcg dose. Jim said they don't fill very often for Butrans and will order he 7.5mcg when they see a script. Discussed OxyContin dosing and conversions and asked about fill rates. Him said the fill pretty often and mostly the 10,20, and 40mg doses.
PPLPMDL0020000001	CLEVELAND	OH	44195	10/13/2014	Reviewed with Troy- Rph mgr. OxyContin/Butrans, stocking and utilization review



PPLPMDL0020000001	Parma	OH	44129	10/13/2014	Caught doctor at the window, but he didn't want to get caught. Introduced my self and products and said that I was hoping for a minute of his time to discuss his patients in around the clock pain and why ER meds might be appropriate for some of them. He said he writes a tiny bit of OxyContin but he doesn't have time right now and he walked away. I continued to talk to his nurse Sue about some patient types that might be appropriate using Helen. She does think that butrans may be worth considering. She asked for information and savings cards, but then had to leave.
PPLPMDL0020000001	Richmond Heights	OH	44143	10/13/2014	Met with tech Dee first, then pharmacy manager Kristi Lucas. Hydrocodone insight. Has the rescheduling changed the volume of hydrocodone you are dispensing, not really, Kristi replied. A few months back, she noticed an overall increase in IR Tramadol being written, and that has continued. Discussed Butrans as another option for patients with daily, ATC pain. Showed/left. Butrans 7.5 brochure- asked Kristi to check availability of Butrans 7.5. Findings on Cardinal Health site: 7.5 in YELLOW, states N/A and "Manufacturer experiencing delay in Shipping." Left Butrans pharmacist guide, OxyContin reformulation folder.
PPLPMDL0020000001	Mayfield Village	OH	44040	10/13/2014	Met. With pharmacist Kelly Rhodes. Had her check availability of Butrans 7.5 on Cardinal Health site. It states 7.5 is in "yellow" status, which means, lower quantity, with 12 cartons available. The 5, 10, 15 and 20 strengths are in green, which means good supply, guaranteed when ordering. Yellow status means you can order, but shipment not guaranteed due to low quantity. Left NDC code brochure, discussed, left Butrans pharmacist guide. OxyContin discussed after hydrocodone insight. Since 10/6 rescheduling of hydrocodone combos, Butrans, OxyContin are options for patients with daily, ATC, long term pain.
PPLPMDL0020000001	Akron	OH	44333	10/13/2014	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	10/13/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	10/13/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	10/13/2014	Jeanette was able to pull the dr from the hallway and bring him to the window to see me today. Jeanette the ma and pra ur auth coordinator. I explained to the dr the hydrocodone insight and asked him how he was planning on seeing the number of increased patients. Dr said he already sees them every month. I said every patient every month? I said how do you have time for new patients? Dr said it takes a few weeks to get in but his existing patients take priority said. I reminded him that Butrans was schedule 3 and asked him if he was aware that he would fax in scripts or do refills. Dr said yes. I asked the dr if he was a norco patient uncontrolled and a candidate for Butrans would he convert the. To a weekly patch? Dr said it depends on their insurance. I said ok...what if it was a caresource or aarp med d patient for example. He said sure. He said he likes Butrans. I. Asked him to write if he found someone needing to be moved to an atc chronic pain option like Butrans and who are under 40mcg total dose of norco. Dr said as long as coverage is there for his patients.
PPLPMDL0020000001	Westlake	OH	44145	10/13/2014	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	10/13/2014	Spoke to Angie the ma about hydrocodone insight, she said just a few patients have called so far. Dr came to window. I pointed point that they may be seeing a few norco patients that normal the next few months. I asked him to keep in mind is Butrans for that atc chronic pain patient. And highlighted aarp and caresource coverage.
PPLPMDL0020000001	Fairlawn	OH	44333	10/13/2014	No new information learned on this call.
PPLPMDL0020000001	Euclid	OH	44119	10/13/2014	Met with pharm mgr Dave Baker. Asked him to check McKesson for Butrans 7.5. Yes, green light, available to order. Another patient called him for 7.5 today, thinking he was a CVS. Left Butrans pharmacist guide, BUTRANS 7.5 NDC brochure. Left Pharmacy Times article. OxyContin FDA draft guidance discussed.
PPLPMDL0020000001	Fairlawn	OH	44333	10/13/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44111	10/13/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	10/13/2014	No new information learned on this call.
PPLPMDL0020000001	Euclid	OH	44119	10/13/2014	Dr Winer preparing to leave for day. Will be in Mentor WED. Met with OM Kymberly; scheduled lunches for all of 2015. Formulary, med d pull through OxyContin, Butrans. Left OxyContin grid.
PPLPMDL0020000001	Lakewood	OH	44107	10/13/2014	Spoke to egor the pharmacist and opened w insight 18 and asked how they felt their business would change. He said they are stocking limited amounts. We talked about Butrans new dosing 7.5 and he verified it was available to order. He said he would not order it with out a prescription. He did confirm there were patients on Butrans at their store but still wouldn't order even a case. Talked about starting doses of 5 or 10mcg. Pointed out the 7.5 dose was a titration dose. Covered 7 day patch, patch rotation and how to discard. Gave abuse potential statement and reviewed Indication. Highlighted dosing of Butrans s and OxyCotin.
PPLPMDL0020000001	Akron	OH	44319	10/13/2014	Started off with insight 18 and discussed his thoughts. Dr said it won't do much to his business because he has never written refills for narcotics anyway and hasn't heard much from his patients on hydrococone about the situation. I discussed reassessing his existing IR opioid patients and what that looks like and if he has a process in place for it? Dr said that he dos and reassess all the time and runs into patients either resistant to change or like the euphoric feeling that IR opioids can bring. Reviewed how OxyContin and Butrans can be possible solution for those patients. Discussed attributes for both products, dosing and titration of OxyContin and using more 10mg dose and using flexibility of doses. Helen profile for Butrans and new 7.5mcg dose. Dr spoke about how he doesn't accept Caresource and that most of his chronic pain patients have other Medicaid plans and they want him to write higher doses of other ER opioids before Butrans which he said he won't do. Told him to focus on Medicare patients like Helen and private insurance. Reviewed copy card in info and dr said he needed Lunch. Follow up on Med 80 guidelines. Reminded him those need updated, as Tramadol moved to CIV and Hydrocodone moved to CII since that was printed. Hydrocodone insight delivered. Dr wanted to know if any other primary care office s are using pain contracts and what I think of them. I told him yes, many are, I think they're great idea. He wanted to know if 30 day follow up is mandated by any organization? I replied no, but if you're writing any CII's for pain, patient will need to come back anyway every 30 days to pick up script. This is where Butrans may fit it. Butrans remains CIII, 1x week patch, can be called/faxed in with refills. Discussed, showed Butrans patient guide. Asked when he sees his patients each month, consider an ER opioid like OxyContin or butrans, if he determines patient has daily, atc, pain - an ER opioid is designed to treat those types of patients.
PPLPMDL0020000001	Westlake	OH	44145	10/13/2014	Spoke to Kathy upfront and new nurses regarding hydrocodone insight and the affect they feel it will have on their job. Nurses said they thought there would be many unhappy patients. Dr came to window and the nurses asked the dr if he would be seeing all their norco patients monthly now? Dr said he didn't have a choice that if they want their pills they will have to come in. I asked him to think about that visit and what if they were uncontrolled on their norco, perhaps Butrans 5mcg or 10mcg would be an option for them if they had atc chronic pain. Dr said he should write more Butrans. I said why do you think that? Dr said he needs to try new ways to treat chronic pain. Reviewed the refills with Butrans and the experience kit for his patients. Highlighted OxyCotin dosed every 12 hours. I did highlight abuse potential w both products and covered the indication.
PPLPMDL0020000001	Westlake	OH	44145	10/13/2014	Spoke to dr highlighted the reassessment time frame of his no co patients that may be appropriate for OxyContin dosed every 12 hours or Butrans if they are under 40mg norco total daily dose. I asked the dr if he had concerns starting a patient from norco onto OxyContin? Dr said no, as long as they are appropriate. Talked about indication and abuse potential for both products. Asked him to think what atc means, he said they need to be taking pain meds more than twice a day every day. Dr said he would try Butrans. And I reminded him of initiation guide and coupons.
PPLPMDL0020000001	Cleveland	OH	44113	10/13/2014	Discussed treating around the clock pain in 4-6hr increments, said patients prefer but will consider OxyContin every 12hours, abuse deterrent characteristics along with Butrans For those patients requiring around the clock analgesia,Said Ok
PPLPMDL0020000001	Cleveland	OH	44113	10/13/2014	Discussed treating around the clock pain in 4-6hr increments, Reviewed OxyContin every 12hours along with Butrans for those patients requiring around the clock analgesia, Said ok, working with Dr. Daoud more on the outpatient side, will help in reminding clinicians
PPLPMDL0020000001	Parma	OH	44129	10/13/2014	Started with insight 18, doctor wasn't aware of schedule change or repercussions, reviewed what the changes mean to his practice. He sees patients monthly anyway but thinks that he should do more research on what is expected of him as a practitioner. Started discussing patients that are in around the clock pain. Talked about a few patient types that are candidates for butrans, he is have good success with the patients that are on butrans right now and thinks it is a good option for many patient types. He has a couple patients on q12 OxyContin and Percocet, he asked my opinion on how they should be dosed. I told him that he best knows how to manage pain but that once pain is around the clock, the patient wants around the clock pain relief. How is it appropriate to do that? Q 12 dosing with OxyContin aat the right dose is appropriate, providing supplemental for breakthrough is appropriate, only he can decide what is appropriate for his patients.
PPLPMDL0020000001	Akron	OH	44319	10/13/2014	Short discussion with this cnp about Butrans and OxyContin. Brittany said that she primarily deals with the diabetic patients and children. Brittany said that she does not treat pain other than acute pain with IR opioids for about 1-2 weeks. Nothing else learned.
PPLPMDL0020000001	Westlake	OH	44145	10/13/2014	Dr a in her new location in rocky river. Iliada the ma and val the ma are there, spoke about the hydrocodone insight and they thought the next few months will be challenging. Not only because of the norco being moved to schedule 2, but the dr is transitioning to paperless and is learning the computer system. Saw dr, she said he has been working many hours getting settled into her new place. We talked about hydrocodone insight. Dr said she hates writing norco and will write Butrans if appropriate. Asked her to think about the norco patient uncontrolled and requesting a change...reviewed atc chronic pain patient. Highlighted over 40mg total daily dose of norco, to start 10mg every 12 hours on OxyCotin and under 40mg total daily dose either 5 or 10mcg weekly patch. Dr asked about it being schedule 3. I did confirm via faxing and refills, yet stated the abuse potential of Butrans and Hydrocodone insight. I asked during the extra visits and reassessment if a few of them were taking more than 2 doses of norco every month? Dr said some. I position his caresource and aarp patients for Butrans. Talked about dosing and reviewed initiation guide. I reminded him that he doesn't not have to hand out a coupon and the coverage on these plans. I asked him if he would have trouble offering a 7 day patch to an appropriate patient? I asked if this could be an option in his practice and he said as long as his patients can afford it.
PPLPMDL0020000001	Cleveland	OH	44105	10/14/2014	Reviewed OxyContin/Butrans, Intro 7.5mcg/hr.
PPLPMDL0020000001	Cleveland	OH	44109	10/14/2014	Reviewed with Jag Rph OxyContin/Butrans, Intro to 7.5mcg/hr, Discussed Hydrocodone Scheduling change, Said ok, will order when RX is presented
PPLPMDL0020000001	Parma	OH	44129	10/14/2014	Asked doctor to think about his patients in around the clock pain. Once that is determined, does he think those patients should be treated in 4-6 hour increments, or is it time to consider ER meds? He stared at me then he went to his computer and searched how many of his patients are documented as having chronic pain. He found 50 but said there are probably more. I asked him to tell me what some of them were taking. It was a mixture of Tramadol, Percocet and Vicodin roughly 4 per day. I asked him what he thought about some of those patients taking 2 pills per day at the right dose to manage their pain? He said it makes sense to do it that way to potentially avoid the ups and downs of their pain. I then asked about the patient he started on butrans last time I was in there. He said he hasn't heard. I then said that she must be doing well if he hasn't heard anything. He thinks butrans makes sense, I reviewed Helen to give him one specific patient to look for before I stop in next time, reviewed dosing and he said he will write more butrans.
PPLPMDL0020000001	Cleveland	OH	44113	10/14/2014	Reviewed Butrans for those patients requiring around the clock analgesia, Med D coverage, Butrans experience kits, Said Ok, will continue to look for appropriate patients, Said she finds herself prescribing for new patients, Talked with Ben, the floating pharmacist. Asked about stocking of hydrocodone, he said they have plenty in stock and it was still old labeling. Asked what he thinks about the scheduling change and he feels that it should have always been that way. He agrees that some patients take more of those that should be on ER. Informed him of new butrans dose. He got called to the phone.
PPLPMDL0020000001	Stow	OH	44224	10/14/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	10/14/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	10/14/2014	No new information learned on this call.
PPLPMDL0020000001	Norton	OH	44203	10/14/2014	Hydrocodone insight with sarah the priur auth office manager and the dr. The dr said he would write more Butrans for his controlled atc chronic pain patients that he doesn't have time to see every month. The dr asked about managed care. I covered aarp and caresource w Butrans and reminded him of the experience kits to hand out for those new patients, sarah asked me if she could enroll the patients before they left the office, I told her I didn't know the answer d told her how the program works. Reminded on OxyCotin coverage for med d and dosing.
PPLPMDL0020000001	Cleveland	OH	44109	10/14/2014	Visited PMR/IM and FP depts. Left OxyContin/Butrans Initiation/Titration, Obtained contact within PMR dept
PPLPMDL0020000001	Independence	OH	44131	10/14/2014	Regina didn't have time to talk because she was there alone and way behind. She told me to come back after flu season. They have had no stocking issues with hydrocodone. She never tells anyone on the phone that they stock any opioids because you are asking for trouble...Quickly told her about new dose of butrans that is available.

PPLPMDL0020000001	Parma	OH	44129	10/14/2014	Myra said that she loves how butrans works for many of her patients. She thinks it is a great option but is limited by formulary and the itching and rash side effects. I submitted an emirf regarding the itching and rash. I reviewed improved formulary coverage and reinforced the patients that don't see those side effects. Used insight 18, although initially they were bombarded with hydrocodone patient problems, they seemed to have worked through those. Even though schedule 2 products have been avoided in this practice, the decision has been made to continue to prescribe that despite the new scheduling. Myra doesn't think this will change anything in regards to OxyContin. The patients requiring ER OxyContin will be referred elsewhere.
	Parma	OH	44129	10/14/2014	Laura says that Butrans is appropriate for a few patients but that in general patches aren't for everyone. If they are laborers, use hot tub etc, patches just aren't an option. Used Helen patient profile to get her thinking about one patient type to keep an eye out for. She finds that once they come to them they are so used to taking pills that converting to a patch is very difficult. She does see the need for OxyContin for patient in around the clock pain. In her previous job she did have patients on that q12. This practice does not choose to prescribe OxyContin and those patients are referred elsewhere.
PPLPMDL0020000001	Parma	OH	44129	10/14/2014	Had a chance to quickly meet Doctor, she said that she has tried to write butrans in the past, seemed to work for a while then some patients developed rash and unpleasant side effects. I told her that some people do respond with those side effects but not everyone. I asked her if the patients in around the clock pain could use the once daily patch without side effects, does she believe it is worth trying. She said yes. Thinking again of patients in around the clock pain, I asked her to consider oxycontin for some of her patients that are asking for more IR. She said she does write oxycontin when necessary but prefers not to.
PPLPMDL0020000001	Lyndhurst	OH	44124	10/15/2014	Window. Julie went to see if Dr. Goldner could come up front to see me; he replied no; as he was on conference call. Showed, left medical assistant: Butrans initiation/titration guide and all 5 strengths. Reminder: can be called/faxed in with refills. Showed, left OxyContin slim jim.
PPLPMDL0020000001	Akron	OH	44333	10/15/2014	Discussed Butrans Helen profile, 7.5 mcg dose and dosing flexibility it brings. Dr said he thinks it will be a good dose for him because he likes Butrans in his older population who he needs to titrate slowly with. Reviewed OxyContin conversions and appropriate patient types and insurance coverage for each product.
PPLPMDL0020000001	Hudson	OH	44236	10/15/2014	Led off with insight 18 and followed up with appropriate leading questions. Discussed the options of Butrans and OxyContin as the go to ER opioids for appropriate patients. Reviewed Helen profile, dosing and insurance.
PPLPMDL0020000001	Cleveland	OH	44102	10/15/2014	Reviewed OxyContin conversions and dosing. Dr said she thinks she has a patient that would be appropriate for Butrans on hydrocodone and wants more.
PPLPMDL0020000001	Hudson	OH	44236	10/15/2014	Discussed treating around the clock pain in 4-6 hr increments. Reviewed OxyContin abuse deterrent characteristics every 12hours. Along with Butrans intro . 7 day transdermal, CIII for those patients failing on present therapy requiring around the clock analgesia. Said ok, will consider for appropriate patients, will be practicing only here for 3 months. Returning to Africa Sir Leon
PPLPMDL0020000001					Led off with insight 18 and followed up with appropriate leading questions. Dr said that it is a total pain to see the hydrocodone patients and said he's trying to change how things are done and said that Unity is meeting next week and the Hydrocodone dilemma is on the agenda. Dr said he lives Butrans and has had good success. Reviewed Helen profile and new 7.5 mcg dosing. Reviewed OxyContin dosing flexibility, conversions and appropriate patient type selection.
PPLPMDL0020000001	Akron	OH	44313	10/15/2014	Reviewed pages 9 and 11 of OxyContin MVA and Butrans doses and patient selection with Helen profile. Reminded about Caresource pa and Medicare coverage.
PPLPMDL0020000001	Mayfield Village	OH	44143	10/15/2014	Lunch. Asked Dr Ashraf, since they took over Suite 108 as well, more rooms and 3 separate check in windows- why a 3 hr wait to see him (12 n-3:15 pm)?? He replied all patient rooms are not completed yet, so they are sharing 4 patient rooms and they get "bottlenecked"- they may finish with patient in 15 mts, but then something else comes up - they need blood work, vaccine etc. He says once patient rooms are completed; the office will run more efficiently as they do have patients in 15 mt time slots. Delivered hydrocodone insight. Asked dr as he's following up with patients every 30 days; he consider the benefits of ER delivery system; for OxyContin, then Butrans. Single entity, dosing flexibility discussed, both products. Butrans newest strength is 7.5; product can be called/faxed in with refills when he's out of office. Saves patients (especially over 65) an extra office visit/possible co pay. Dr says all good points. Showed him where OxyContin Butrans savings cards are in new sample closet. Formulary, Med D pull through.-<font color=blue><b>CHUDAKOB's query on 10/27/2014</b></font>-Jenny, this is a lot to write "Lunch. Asked Dr Ashraf, since they took over Suite 108 as well, more rooms and 3 separate check in windows- why a 3 hr wait to see him (12 n-3:15 pm)??... I could even fit it all in this query. Was is all pertinent to the sales call? If not, it probably should not be included in the note. Would have saved you some time.<font color=green><b>BALLIE's response on 10/28/2014</b></font>-It was to help me remember, what the new layout of office is, after recent renovations.<font color=blue><b>CHUDAKOB added notes on 11/03/2014</b></font>>I know, but how does that help with the sales call itself? That is what the call note is for. You would remember that the next time you went in the office.
PPLPMDL0020000001					No new information learned on this call.
PPLPMDL0020000001	University Hts	OH	44118	10/15/2014	Discussed Butrans dosing and new 7.5 mcg dose which the wholesaler has in stock to order. Reviewed conversions and OxyContin dosing, conversions and copay cards. Pharmacy dispenses Butrans to 4 patients each month.
PPLPMDL0020000001	Hudson	OH	44236	10/15/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland Hts	OH	44118	10/15/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44102	10/15/2014	No new information learned on this call.
PPLPMDL0020000001	Waterford	OH	45786	10/15/2014	I-Butrans clinical trials and dosing. OxyContin start principlesW-is having success of patients on Butrans
PPLPMDL0020000001	Cleveland	OH	44195	10/15/2014	No new information learned on this call.
PPLPMDL0020000001	Lyndhurst	OH	44121	10/15/2014	Met with tech. Discussed, left Butrans 7.5 NDC code piece. Discussed, left OxyContin pharmacist's guide. Left green RX Patrol sheet. Discussed, left (1) Butrans patient guide.
PPLPMDL0020000001	Fairlawn	OH	44333	10/15/2014	Discussed Butrans and OxyContin attributes, conversions, Butrans 7.5 mcg and stocking.
PPLPMDL0020000001	Berea	OH	44017	10/15/2014	Opened w hydrocodone insight and asked the doctor how he felt about the length of time? He said it seemed normal. I said is it possible that if someone uncontrolled on norco 40mg might be a candidate for Butrans? Dr said he doesn't write that much usually. I asked what he wrote and he said no more than two maybe three doses a day. I asked him if he considered that third dose to be someone with pain several times during the day...he said yes. I asked if that was what atc means to him? He said yes. I said so you could have offered Butrans to them if they were atc and chronic. Dro said yes. I said if you see someone this week like that will you write Butrans instead of adding to their norco. Dr said he will think about it.
PPLPMDL0020000001					No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44307	10/15/2014	Quick review of Butrans attributes, dosing and conversions. Showed he Helen profile again and asked if she will prescribe? Monique said she will keep her eyes open for the right patient. Reviewed OxyContin conversions and dosing flexibility.
PPLPMDL0020000001	Akron	OH	44320	10/15/2014	Spoke to laura the ma and office manager about oxycontin and butrans. Reviewed scheduling and dosing of Butrans and Oxycontin.
PPLPMDL0020000001	Westlake	OH	44145	10/15/2014	Front window. Hydrocodone insight. For patients who meet ER indication, consider OxyContin or Butrans. Butrans newest strength, 7.5; can call/fax in with refills. Ok, great replied Karen. Findings from office: Yes lunches on MON & WED in 2015; but no 2015 book yet; check back in a few weeks.<font color=blue><b>CHUDAKOB's query on 10/27/2014</b></font>-Jenny, I can see this was a quick call and you presented some pertinent information. How do you feel this call went considering the amount of time you were give?<font color=green><b>BALLIE's response on 10/28/2014</b></font>-Not a 2-way conversation, but my goal was to at the very least, get both product names out -<font color=blue><b>CHUDAKOB added notes on 10/31/2014</b></font>-Yes you were. Think about how you might ask her to do something, such as review a patient profile or look over how Butrans might be an option for her hydrocodone patients. This way when you see her, you can follow up on what you asked her to do.
PPLPMDL0020000001					Reminded christy the office manager of the caresource coverage for butrans and the scheduling of butrans.
PPLPMDL0020000001	Westlake	OH	44145	10/15/2014	Lunch. First HCP to come back. Presented hydrocodone insight. The scheduling does not impact him as he doesn't write a lot of Vicodin he states. What I'm suggesting, when you see your patients every 30 days & they present with pain, and meet ER opioid indication: I propose you consider Butrans. Remains a CIII, appropriate for patient like Helen (profile) single entity opioid, patient wears 1patch per week, gets 4 patches each month. Reviewed dosing slider. Dr liked the fact that Butrans can be called, faxed in with refills. I asked him to consider in 1 or 2 trusted patients. If patients need more than 80 mg morphine equivalent daily, OxyContin, a single entity CII controlled release tablet is also option. Discussed patient access, savings, titration & strengths.
PPLPMDL0020000001	Akron	OH	44320	10/15/2014	I asked dr if the patient he said he was staring on Butrans this week came in to get the prescription? Dr said the patient was a no show. I asked dr what the current dose of oxycodone is? Dr said he thinks 20mg/day. I reviewed initial dosing and conversions along with titration. Told dr to continue looking and reminded him Butrans is a schedule 3.
PPLPMDL0020000001	westlake	OH	44145	10/15/2014	Head resident at WSPriamry. Tried to speak with Dr. Gotts (target) he was unavailable, but spoke to Dr. instead. Insight 18- dr thought it would make patients having to come into the office to get their script. We talked about abuse potential for all opioids including Butrans and Oxycontin. We talked about the chronic pain patient that returns every month and why give them the option to prn in 4 to 6 hour increments when they have the option of Butrans with is dosed weekly and Oxycontin dosed every 12 hours. Dr said it was a good point. We talked about the chronic pain patient. I asked how many have other conditions and need to take other meds besides pain medications. He said almost all of them. I highlighted a few attributes of Butrans like no first pass and no dose adjustments for the elderly or moderate renal impaired patients. Also covered it was single entity. We talked about the potential for rash, and I showed him the A/e from the core visual chart. We reviewed dosing and titration. highlighted managed care and coupons. Gave him the Helen Profile to review and a nice butrans study. Told him that I would like to sponsor a journal club where we can review this FDA approved study for Butrans. Dr said he would coordinate something. He also said he will be working full time in north ridgeville come february with uh. I congratulated him, he is taking his boards soon and staying inthe area.
PPLPMDL0020000001	Cleveland	OH	44102	10/15/2014	Discussed treating around the clock pain in 4-6increments. Reviewed OxyContin abuse deterrent characteristics every 12hours, 7 tablet strengths along with Butrans for those patients requiring around the clock analgesia, 7 day transdermal, CIII, Initiation/Titration, Said Ok has a patient in mind
PPLPMDL0020000001	Akron	OH	44333	10/15/2014	Elise asked where the Butrans 7.5 mcg dose is in stock because she prescribed it right before I came in. I told her the rite a lid in Fairlawn should have it on the shelf. Elise said she titrated from the 5mcg and is happy the lower titratable dose is available. Elise said initially the patient was on hydrocodone and it wasn't working. I asked for continued prescribing. Reviewed OxyContin dosing and conversions and asked for her continue
PPLPMDL0020000001	Akron	OH	44308	10/15/2014	Spoke with Mary one of the staff nurses. Told her how I have been trying to get some time with the residents to discuss updates and facts around proper prescribing for OxyContin. Mary said they used to do them much more frequently and that they did make a difference but for some reason don't do them much anymore. Mary said she would speak with the nurse manager and try to get it scheduled.
PPLPMDL0020000001	Westlake	OH	44145	10/15/2014	Invited Candy RN and Dr Gerace to Butrand program next week but they said they were way to busy to attend. Reminded of butrans dosing and scheduling today.
PPLPMDL0020000001	Westlake	OH	44145	10/15/2014	hydrocodone insight. Asked if it was in stock and they told me limited amounts. I talked about butrans and oxycontin indication and abuse potential. reviewed dosing and scheduling. Also covered new butrans dose. They said they would not stock until a script arrived. I asked what if a doctor in the area requests it be ordered? He said no.
PPLPMDL0020000001	Mayfield Village	OH	44143	10/15/2014	Lunch. Waited from 12 n-3:15. Dr not engaged, hectic/busy. Presented hydrocodone insight; asked that when he sees patients back every 30 days, who meet indication for ER opioid - he consider Butrans 1x week patch, which can be called/faxed in with refills; or controlled release OxyContin; dosed every 12 hrs.<font color=blue><b>CHUDAKOB's query on 10/24/2014</b></font>-You really waited 3 hours for this Dr??? You might have left and made arrangements to come back later in the day to see him since you brought lunch<font color=green><b>BALLIE's response on 10/26/2014</b></font>-If you think about it - there were 4 HCPs in this office - if I saw them at separate offices and waited an hour to see each of the 4 at separate locations - I would have waited 4 hours to see 4 different HCPs- in addition, once you leave a lunch there - you are not permitted to return and ask to see an HCP.<font color=blue><b>CHUDAKOB added notes on 10/27/2014</b></font>-Point taken. You made it seem in your call notes like you waited to see one HCP and he was not engaged.
PPLPMDL0020000001					1. Determine if they're interested in OADP presentation for their customers
PPLPMDL0020000001	Cleveland	OH	44145	10/15/2014	Lunch. Waited until 3:10 for Kristy to come back. Discussed Helen profile, Dristy agreed patient like Helen appropriate for Butrans start (opioid naive, start 5 mcg hr) NP page from Butrans core vis aid discussed. Reviewed dosing slider, newest strength of 7.5. Ability to call/fax in with refills. If patient needs more than 80 mg morphine equivalent, controlled release OxyContin is option, CII, patients must pick up rx every 30 days. Discussed 14-day possibility of redeeming savings cards by self pay/commercially covered patients with 14-day rx. Showed where savings cards are in new sample closet. She mirrors what Dr Mukunda does/as she works with him. They send patients who need ER opioid to pain specialty.
PPLPMDL0020000001	Mayfield Village	OH	44143	10/15/2014	

	Westlake	OH	44145	10/15/2014	Hyrddodone insight too virginia the ma and office coordinator. We talked about the volumn increase in patients that she thought they would have and she wasn't too concerned because the doctor sees them every month usually anyway. I said always? She said usually. The doctor came to the window and I said it is true doctor that you typically see your pain patients every month? He said yes. I said even if they are controlled chronic pain patient? He said he will write out scripts for those patients but they can't fill them. I said did you release that Butrans is a sheudle 3 which means refills and faxing scripts to the pharmacy? He said yes. I said during your month assessments it is possible to identify one patyient that isn't controlled taking 2 or more doses in a day? He said maybe. I said because if they have atc pain and have pain that keeps them coming back every month they might like the option of Butrans weekly dosing schedule or the free month for commercial insured patients. Dr said free? I said if you hand out these coupons. I asked another area is your managed mediaid like caresource...we talked about those plans. I said you have many patients on those plans right? He said too many. I said why not Butrans if it meets the indication? Dr said he will try it. I start either start 5mcg or 10mcg of Led off with insight 18 and followed up with appropriate leading questions. I asked dr if he thinks OxyContin is an appropriate piton for some of his patients who hydrocodone isn't providing the efficacy desired or can't tolerate it? Dr said it is but would rather write Butrans. I asked why and he said he would feel more comfortable and that unity is discouraging writing opioids anyway. Reviewed OxyContin attributes and dosing. Discussed Butrans Helen profile and asked him if he has written Butrans yet? Dr said not yet but likes that its a schedule 3, 7 day patch and agrees that Helen is a good patient type. Reviewed copay cards and insurance coverage. Discussed treating around the clock pain in 4-6hr increments. Reviewed OxyContin abuse deterrent characteristics every 12hours, along with Butrans 7 day transdermal, CIII, for those patients requiring around the clock analgesia. Said Ok will consider, sends most to Pain mgmnt but will keep in mind,
PPLPMDL0020000001	Hudson	OH	44236	10/15/2014	
PPLPMDL0020000001	Cleveland	OH	44102	10/15/2014	
PPLPMDL0020000001	Cleveland	OH	44130	10/16/2014	Introduction, then told him that I wanted to discuss his patients that are in around the clock pain. He said that he believes those patients need to be on an ER medication as soon as it has been determined that it is around the clock. He thinks oxycontin works well for his patients and he likes the q12 dosing. He tries not to write more than 2 hydrocodone, switches to ER if they are still on pain. He doesn't know much about butrans, but wanted to know how it binds to the receptors. I showed him pg 25 in detail aid to discuss how it is partial agonist/antagonist. I wanted to review studies to ensure that he was comfortable with efficacy. He said that wasn't necessary. Reviewed appropriate patient like Helen, initiation and titration. He was thinking of his patients and informed me that he identified a few that might be appropriate for butrans. He asked for savings cards. Spoke to Dr and Dr T and highlighted the butrans dinner program next week. Asked if he had any residents that would like to attend. I asked about doing a journal club, we are working on dates w dr. T. Covered the hydrocodone insight. I asked if it was possible that he might see an appropriate pateint for Butrans or oxycontin and he said yes. Opened the Butrans iniation guide and reviewed dosing under 40mg of norco and over 40 suggested Oxycontin 10mg dosed every 12 hours. I said when it comes to treating chronic pain...would patients appreciate these options? He said maybe so. Highlighted the savings program.<font color=blue>-cb>CHUDAKOB's query on 10/27/2014</b></font>Good questions on the next call objective Lisa! Which one are you thinking of for your next call?<font color=green>-cb>BARTOLI's response on 10/28/2014</b></font>I'll start w the first one and move down the list. I believe the dr likes the concept of Butrans. I also believe that he is choosing Butrans after they have been on several immediate release products. My goal is to get him to admit it can be an option in the appropriate patient as their first atc per (indication) option instead of a last resort. Extended release insight would be good here.<font color=blue>-cb>CHUDAKOB added Hydrocodone insight and talked about the number of patients over 65 that this will affect in his practice. I asked how the patients felt about coming into the office to pick up their scripts and asked if they have to do an evaluation every month? Dr said no. That most will have scripts at the window with out a visit. I asked if some of those patietns might be a candidate for an atc non acute product like Butrans? He said maybe. We talked about a few attributes like no first pass, no dose adjustment for elderly or mild/moderate renal impaired patients and also talked about the 7 day dose. Gave fair balance, talked about percentage of rash according to the core visual aid. Talked about abuse potential for both Butrans and OxyContin. Dr was headed to the hospital- I asked the doctor if he could try one patient this week who may present to be a candidate like discussed per the indication. He said maybe.<font color=blue>-cb>CHUDAKOB's query on 10/27/2014</b></font>Lisa, when you get asked about a side effect, the best way to handle it is to hand the HCP the visual and let him/her look at all the adverse events. This way you are not "cherry picking" just one. I know it may be the one he asked about, but it is best to show them all. Make sense?<font color=green>-cb>BARTOLI's response on 10/28/2014</b></font>Yes makes sense. I will do that.<font color=blue>-cb>CHUDAKOB added notes on 11/03/2014</b></font>Thank you.
PPLPMDL0020000001	Tallmadge	OH	44278	10/16/2014	Discussed insight 18 and follow up questions by Purdue. Dr said that the rescheduling won't make much of a difference in his practice but said he does see maybe more opportunity for OxyContin and the schedule 3 Butrans. Discussed OxyContin MVA pages 9-14 and then Butrans attributes and asked him if he's used? Dr said he did prescribe it to a patient on hydrocodone who was kicked out of the pain management office. Patient said they wanted wicoden and dr said the only thing he will prescribe is Butrans. I told dr that's good to hear and discussed the Helen profile. Dr agreed that it makes sense to use Butrans for a tramadol patient still in pain. Discussed OxyContin MVA conversions page and appropriate patient page. I asked dr if he thinks it would fit more often in his treatment protocol? Dr said not really because he won't write scheduled medicines. I asked him if he has patients on Percocet or tramadol? Dr said tramadol and then discussed Butrans attributes, conversions and Helen profile. Dr said its a viable option because its a schedule 3. Showed him application sites, conversions and asked for clinical experience. Dr said ok.
PPLPMDL0020000001	Tallmadge	OH	44278	10/16/2014	Dr and I talked about the hydrocodone insight. I asked him what did the residents know about scheduled opioids. Dr T said they had a rotation with pain most did, but it was elective. I explained what schedule Butrans was and What was OxyContin. We reviewed the indication and pointed out it was the same. I told him it was important to know who is the appropriate patient for each and how to dose them. Dr agreed. Dr asked me to support a medical convention in January. I declined because its our national meeting. I did tell him about wanting to support a journal club at either the hosital or one of the medical locations. Dr said they usually do it at a restaurant. I said we couldn't do that and that it had to be done in office. Reviewed initiation guide for Butrans. Gave butrans invite for program next week
PPLPMDL0020000001	Westlake	OH	44145	10/16/2014	Asked doctor how his pain patients are feeling now that the appropriate ones are taking OxyContin and butrans? He said some are on OxyContin but none are on butrans yet. He asked what was new and I told him about the now 5 dose choices for butrans. He asked why? I told him that as soon as he gets experience with it he will see why there are now five doses. Reviewed appropriate patient, dosing and titration. He had information on his desk from last time, he said he will look for appropriate patient for butrans and OxyContin.
PPLPMDL0020000001	Cleveland	OH	44114	10/16/2014	Discussed treating around the clock pain in 4-6hr increments. Reviewed Butrans for those patients requiring around the clock analgesia, 7.5mcg/hr, Initiation/Titration, Along with OxyContin every 12hours, 7 tablet strengths, Said Ok will continue to prescribe for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44130	10/16/2014	Tried insight 18, he said there had been no impact on his practice really. He wasn't really mentally engaged though because I caught him while he was dictating. I told him that this might be a good time to reassess his patients to determine if ER meds are appropriate for some of those patients. He nodded. Knew I was about out of 1 time so I Let him know that as soon as he chooses schedule 3 butrans for some appropriate patients he now had 5 doses to choose from. He smiled.
PPLPMDL0020000001	Cleveland	OH	44104	10/16/2014	Discussed treating around the clock pain in 4-6hr increments. Reviewed OxyContin abuse deterrent characteristics every 12hours along with Butrans for those patients requiring around the clock analgesia, Said Ok will continue to consider for appropriate patients
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	10/16/2014	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	10/16/2014	Quick call but dr said that she prescribed Butrans for a Caresource patient and it went through and thanked me for reminding her. I told her that's great news and to continue thinking of Butrans and OxyContin as viable options for patients in daily around the clock pain.
PPLPMDL0020000001	Cleveland	OH	44104	10/16/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44130	10/16/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44103	10/16/2014	No new information learned on this call.
PPLPMDL0020000001	Garfield Hts	OH	44125	10/16/2014	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	10/16/2014	Discussed Butrans 7.5 mcg, Butrans and OxyContin attributes, conversions and Helen profile for Butrans. Pharmacy has Butrans 7.5 mcg in stock.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	10/16/2014	No new information learned on this call.
PPLPMDL0020000001	Stow	OH	44224	10/16/2014	Spoke with Holly and discussed OxyContin prescriptions and if there are any new? Holly said its been the same patients refilling. Holly said they dispense almost all the doses. Reviewed Butrans 7.5 mcg dose and holly said they has to send all the other doses back due to expiration. Discussed hydrocodone and holly said they are able to use what they have left even after rescheduling.
PPLPMDL0020000001	Westlake	OH	44145	10/16/2014	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	10/16/2014	No new information learned on this call.
PPLPMDL0020000001	Stow	OH	44224	10/16/2014	Discussed insight 18 with dr and followed line of questioning as outlined in insight 18. Dr said that she doesn't write many hydrocodone anyway and has rarely ever called them in and written refills. I asked her if there might be a patient or two that either isn't tolerating hydrocodone or isn't getting the desired analgesia? Dr said possibly. I asked her to consider using OxyContin or Butrans for those patients as potential candidates. Dr said ok. Left dosing and conversions guides.
PPLPMDL0020000001	Cleveland	OH	44130	10/16/2014	Talked to Vicki who said they stock butrans and OxyContin, they will order new dose of butrans once they get requests. They have not had any issues stocking hydrocodone. She just started a couple weeks ago so she is just getting used to everything there.
PPLPMDL0020000001	Westlake	OH	44145	10/16/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	10/16/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44103	10/16/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	10/16/2014	No new information learned on this call.
PPLPMDL0020000001	Garfield Heights	OH	44125	10/16/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44125	10/16/2014	Discussed with Sam Rph stocking 7.5mcg/hr, Butrans for those patients requiring around the clock analgesia, Initiation/Titration along with OxyContin and its abuse deterrent characteristics, Said she will relay info when Short discussion about Butrans Helen profile, Butrans attributes, conversions and titration along with 7.5 mcg dose. Reviewed Butrans BUP 3015. Discussed OxyContin attributes, pages from MVA 14-16 and conversions. Dr said she will try to find a patient for Butrans but is still not seeing many pain patients.
PPLPMDL0020000001	Tallmadge	OH	44278	10/16/2014	I asked dr to provide me with some informations on out his use if OxyContin and the type of patient he is finding success in? Dr said he's just using it in his chronic pain patients. I asked him at what point in therapy is he using it? Dr said it's very difficult to convert patients from IR to OxyContin especially Percocet because the patient doesn't feel the same way on OxyContin vs Percocet. I asked him if he's had success though converting those patients and dr said yes. Dr said when he's converting from 20mg of Percocet and they ask for more he starts on the OxyContin 15mg q13 instead of 10mg because he finds it to be more effective that way. Discussed MVA pages 9-13 and Butrans attributes, conversions and Helen profile. Dr said he used it and patient is doing well. I asked him to duplicate the patient type.<font color=blue>-cb>CHUDAKOB's query on 10/27/2014</b></font><font color=green>-cb>REICHEL's response on 11/11/2014</b></font>Q12 8am and 8pm per the MVA for OxyContin.<font color=blue>-cb>CHUDAKOB added notes on 10/27/2014</b></font>
PPLPMDL0020000001	Cleveland	OH	44125	10/16/2014	Discussed with Joshua Rph mgr, OxyContin abuse deterrent characteristics along with butrans for those patients requiring around the clock analgesia, Said he agrees and will keep recommending when appropriate
PPLPMDL0020000001	Westlake	OH	44145	10/16/2014	Reviewed hydrocodone with pharmacist said its been a bit of a problem with supply. I asked her if the 7.5 mcg of Butrans was in her system and gave her the core aid and ordering sheet to take a look. she came back and said the 5mcg was OUT. She said there inventory said that they had everything but the 5mcg. I thought that was interesting. We reviewed the starting doses of Butrans and she said so the 7.5 isn't a starting dose. I said no, it wasn't studied therefore we can't make the recommendation. She said we will need to get the 5mcg back, I said we sure do. We talked about abuse potential and the other doses available. She said she wouldn't order the 7.5 until someone has a script and told me it would take a day to get it and didn't feel the need to order until then.
PPLPMDL0020000001					

	Westlake	OH	44145	10/16/2014	Talked about the hydrocodone and asked him how he felt this would impact primary care and how he in general felt about the changes. Dr said he didn't think it would that big of a deal. I asked if he was taking new patients and if he thought he would be getting more now? He said he is taking new patients but there is a wait. We talked about the atc chronic painetion on norco and i asked him if he was opposed to starting someone who is under 40mg total daily dose of Norco onto Butrans if they were appropriate. He said no. I informed him of the commercial savings program experience kit. I told him that of the two he gave away...both patient completed the surveys and received a visa gift card. I asked if he was aware of this. He said no. I showed him what one looked like...and encouraged him to use it for the next appropriate butrans patient. He said ok. I invited to butrans program he said no. I told him next time it remind him about Oxycontin and the elderly profile in more detail. He said fine.<font color=blue><b>CHUDAKOB added notes on 10/27/2014</b></font>Nice work on presenting the experience kit. this time you told him what is in it for the patient. Next time you might tell him what is in it for him. Keep changing it up.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	10/16/2014	Spoke with dr and his lgn Brad in drs office. Discussed use of Butrans in his cash paying patients and that that patient type isn't the best one to prescribe Butrans for based on it being too expensive. Discuss how low the cash paying patient base is in his practice and that the majority is commercial, Medicare and medicaid. Dr said he understands but said he thought it was much cheaper. I told him to ask new choice pharmacy for prices. Asked for continued prescribing.
	Cleveland	OH	44125	10/17/2014	No new information learned on this call.<font color=blue><b>CHUDAKOB's query on 10/24/2014</b></font>Mark, I can understand not getting new information on some physician calls, but a pharmacy call is generally a call when a decent conversation can ensue. What happened here?<font color=green><b>GUTKOMA's response on 10/24/2014</b></font>No new prescribers, No New Butrans RX's thus no new info learned. In addition Emily Rph was called away for a phone call<font color=blue><b>CHUDAKOB added notes on 10/26/2014</b></font>Mark, perhaps a different approach might be to not ask about prescriptions written, but have discussions regarding their thoughts on opioids and where and how they see the positioning of our products in the pain management realm.
PPLPMDL0020000001	Akron	OH	44312	10/17/2014	Told dr I wanted him to focus on the indications for the ER opioids like OxyContin and Butrans. I reviewed the indication and told him to identify patients who have daily, around the clock pain. Dr said he might consider Butrans but doesn't rally want to mess with opioids. I told him if he must refer then to refer but told him I'm guessing he will find a patient or two. Dr agreed.
	Cleveland	OH	44115	10/17/2014	Discussed treating around the clock pain in 4-6hr increments, Reviewed OxyContin every 12hours, abuse deterrent characteristics, Intro Butrans, 7 day transdermal, CIII, for those patients requiring around the clock analgesia, Said ok will consider, refers to pain mgmt
	Stow	OH	44224	10/17/2014	Discussed insight 18 and followed line of questioning from the insight. Dr said he feels good about Butrans and has had some discussions with the pain specialists about it and has heard nothing but great things. Discussed indications for Butrans and OxyContin and then attributes for each. Reminded dr that Butrans remains a schedule 3, 7 day transdermal patch. Dr said he's choosy with the product but has patients appropriate for it. Discussed Helen profile and dr said he agrees that its an appropriate patient.
PPLPMDL0020000001	Stow	OH	44224	10/17/2014	Discussed MVA pages 5-6 and 7-9 for OxyContin and reviewed the indication and asked her if she will prescribe? Dr said she wants out of treating chronic pain and won't even write any IR opioids. Dr said she refers to pain management. I asked her if she would feel comfortable in he right patient writing and ER opioid? Dr said she might but wants to refer because its just so much hassle. Discussed Butrans attributes and reminded its a schedule
PPLPMDL0020000001	Cleveland	OH	44112	10/17/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44124	10/17/2014	Left with med asst at front check in: OxyContin savings sell sheet; Butrans 7.5 brochure.
PPLPMDL0020000001	Cleveland	OH	44113	10/17/2014	No new information learned on this call.<font color=blue><b>CHUDAKOB's query on 10/24/2014</b></font>Same question as other pharmacy call<font color=green><b>GUTKOMA's response on 10/24/2014</b></font><b>Cecelia was in a hurry, reiterated (CCF-Pain Mgmt) Dr. Shen's conservative approach to prescribing Opioids, resulting in no new info learned</b><font color=blue><b>CHUDAKOB closed the query on 10/24/2014</b></font>
PPLPMDL0020000001	Cleveland	OH	44113	10/17/2014	No new information learned on this call.
PPLPMDL0020000001	Stow	OH	44224	10/17/2014	Spoke with Kelsey and Carla about Butrans 7.5 pm cg because Karen Hodakievic said she wanted to know where they have it in stock. Kelsey said she will order two boxes of it and it will be in on Monday. Kelsey said their narcotics come in on Tuesdays. Reviewed OxyContin attributes and she said that they use the 222 forms for the schedule 2 medicines.
PPLPMDL0020000001	Cleveland	OH	44113	10/17/2014	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44313	10/17/2014	No new information learned on this call.
PPLPMDL0020000001	Garfield Hts	OH	44125	10/17/2014	No new information learned on this call.
	Beachwood	OH	44122	10/17/2014	Talked about patients that are in her practiceand have around the clock pain that might benefit from ER meds. She does write for OxyContin but hasn't done anything with butrans. This hydrocodone change has been challenging for her patients to adjust/accept. She has always seen them every three months, now they are complaining that they have to come in every month. We discussed that now might be the time to reassess their pain and meds prescribed. She had to run but looks forwrd to taking at the lunch.
PPLPMDL0020000001	Mayfield Hts	OH	44124	10/17/2014	No new information learned on this call.
PPLPMDL0020000001	Stow	OH	44224	10/17/2014	No new information learned on this call.
PPLPMDL0020000001	Beachwood	OH	44122	10/17/2014	No new information learned on this call.
PPLPMDL0020000001	Stow	OH	44224	10/17/2014	Talked with all drs at lunch about hydrocodone insight and followed line of questioning outlined for the insight. Dr said that he feels much more comfortable referring all pain patients that need something around the clock. I told dr that's fine. Dr asked about titrating OxyContin and Butrans. Discussed dosing, conversions and titration with steady state information on both products. Dr said he will still refer to pain management.
PPLPMDL0020000001	Stow	OH	44224	10/17/2014	Quick hello in stow office and asked him to continue converting his Percocet patients who are in pain around the clock to q12 oxycodone. Dr said he's trying but insurance coverage is not good. I asked him to keep trying.
PPLPMDL0020000001	South Euclid	OH	44121	10/20/2014	Reviewed new Butrans 7.5 mcg dose and Helen profile and asked for more prescribing. Spoke with Anna the center manager and updated her on new Butrans dosing and copay cards.
PPLPMDL0020000001	Bedford	OH	44146	10/20/2014	Window. After stating verbatim indication to med asst, left for Dr. Deloseph, OxyContin slim jim, Butrans dosing slider. Informed med asst of Butrans 7.5 dose. Doctor writes a bit of OxyContin for older patients and is very familiar with molecule. Hydrocodone change isn't going to impact his practice. Discussed assessing his patients pain levels at office visits to see if ER meds are appropriate. Doctor is familiar with buprenorphine for patient withdrawal only. Explained indication of butrans appropriate patient types, including Scott patient profiles. Reviewed formulary, dosing and titration. Doctor said he thinks it might be appropriate option for some of his patients.
PPLPMDL0020000001	Westlake	OH	44145	10/20/2014	No new information learned on this call.
PPLPMDL0020000001	Fairlawn	OH	44333	10/20/2014	Quick discussion at front counter and told dr insight 18. I told him he has two viable options for ER opioids with OxyContin and Butrans. Showed him the OxyContin conversion and titration guide and then the Butrans dosing piece with 7.5 mcg dose. Dr said he will look over the information. Nothing else learned.
PPLPMDL0020000001	Lakewood	OH	44107	10/20/2014	Hydrocodone insight. Question- how will his be affecting the. Umber of pain patients you see in a month? Dr said he will leave scripts at desk for the patients he feels is controlled and he might be refering go out. I said why would you refer out? Dr said if he becomes to busy. I asked him to think about the appropriatenpatientintype Butrans...and if they are appropriate if he will try Butrans 5mcg or 10mcg before referring them out. He said maybe. Reviewed schedule of Butrans. GAVe abuse potential fair balance.
PPLPMDL0020000001	Beachwood	OH	44122	10/20/2014	Talked with Alisa who handles all of the prescription refills for the patients. They are requiring patients to come in every month to pick up their new prescriptions for all IR meds. She has been very busy since the hydrocodone schedule change. She said that they can't fax in prescriptions for Tramadol either. Donnie or Jennifer handle all of their prior authorizations and they are the PA's.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	10/20/2014	Spoke its the technician Steve and gave him information on Butrans 7.5mcg, all dosing, conversions and copay cards. Discussed OxyContin dosing, appropriate patient types, conversions and copay cards.
PPLPMDL0020000001	Twinsburg	OH	44087	10/20/2014	Doctor didn't want to discuss OxyContin, he knows who and when to choose it. He does like the option of butrans because it's not pill. He has tried it with success on an arthritis patient already. He will continue to look for appropriate patients.
PPLPMDL0020000001	akron	OH	44333	10/20/2014	Discussed insight 18 and followed line of questions per the insight. Dr said its a pain for him to deal with it although most of his patients who are in chronic pain on hydrocodone are in the nursing homes. Dr said Butrans is a good option for those patients first and then for his patients in his office. Dr said he started a patient on Butrans recently who was in a car accident and has severe pain in his leg. Dr said he referred the patient to dr shah for a nerve block or something because the patient is still in pain. Dr said that dr shah is not writing many opioids anymore and is sending his patients back to the pcg for those. I told dr that doesn't make sense and that's his job. Reviewed OxyContin dosing, conversions and appropriate patient types.
PPLPMDL0020000001	South Euclid	OH	44121	10/20/2014	Met with pharmacists. Discussed, left OxyContin pharmacists guide. Left NDC Code/7/5 brochure. Findings: Dr Isakov male patient, age 86, Med D, PBM was Prescription Solutions, was prescribed Butrans 10 mcg hr this am. (patient was on a few percocet daily/not controlling pain); pharmacist confirmed it IS costing patient \$45 every month. They also stated Dr. Laham has already written a Butrans 7.5.
PPLPMDL0020000001	Garfield Hts	OH	44125	10/20/2014	No new information learned on this call.
PPLPMDL0020000001	Fairlawn	OH	44333	10/20/2014	No new information learned on this call.
PPLPMDL0020000001	cleveland	OH	44135	10/20/2014	No new information learned on this call.
PPLPMDL0020000001	akron	OH	44333	10/20/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44124	10/20/2014	Met with med asst at front desk. Left, discussed OxyContin savings sell sheet, slim jim. Left Butrans 7.5 brochure, sliding doser.
PPLPMDL0020000001	Garfield Hts	OH	44125	10/20/2014	No new information learned on this call.
PPLPMDL0020000001	South Euclid	OH	44121	10/20/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44125	10/20/2014	No new information learned on this call.
PPLPMDL0020000001	Bedford	OH	44146	10/20/2014	No new information learned on this call.
PPLPMDL0020000001	Garfield Hts	OH	44125	10/20/2014	No new information learned on this call.
PPLPMDL0020000001	Garfield Hts	OH	44125	10/20/2014	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44312	10/20/2014	Hallway call. Told dr I really want him to continue focusing on what it means to him for a patient to be in daily, around the clock pain. I gave him the OxyContin conversion guide and then asked him to gain more experience with Butrans and his patients on tramadol who are in pain and might need a dose adjustment.
PPLPMDL0020000001	Westlake	OH	44145	10/20/2014	No new information learned on this call.
PPLPMDL0020000001	Fairlawn	OH	44333	10/20/2014	Spoke with Gilbert about dispensing Butrans 7.5 recently. Gilbert said that he did fill one for Elise Leone last week and Jessica ordered two more boxes as well. Reviewed all doses and Helen profile. Gilbert said that he just filled out a 222 form this morning for 30mg and 60mg of OxyContin. He said its slow with the form but must is two days if given to the driver at 10am.
PPLPMDL0020000001	Westlake	OH	44145	10/20/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44102	10/20/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	10/20/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44111	10/20/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	10/20/2014	Reviewed Butrans Initiaton/Titration, Med D Coverage along with OxyContin every 12hours and abuse deterrent characteristics, Said Ok, Hasnt heard back from patients but will follow up and gather feedback.

PPLPMDL0020000001	Bedford	OH	44146	10/20/2014	Using the hydrocodone insight and Doctor said that what matters to his practice is his ability to write opioids. Discussed when he reassess his patients and determines if patient is appropriate for ER meds. Reviewed initiation and titration and savings cards for his patients.
PPLPMDL0020000001	Lyndhurst	OH	44124	10/20/2014	Lunch. Met with med asst Helen first. Discussed Butrans newest strength, 7.5, 1x week, 4 patches per month, can call/fax in with refills. If patient needs 80 mg or more morphine equivalent, OxyContin, CII, controlled release, dosed every 12 hrs. more appropriate. Dr Isakov states he placed patient, about 86 yrs old on Butrans. Patient was on a few percocet daily/not controlling pain. Patient is Medicare D and is paying \$45 each month. I asked Dr. Isakov if patient can afford the \$45 per month; he replied yes. (follow up on next visit) Discussed newest strength of 7.5 which is titration dose. If a trusted patient needs more than 80 mg morphine equivalent, OxyContin is
PPLPMDL0020000001	Lyndhurst	OH	44124	10/20/2014	Lunch. Met with his med assts first. Discussed Helen profile, Butrans as option for patients like Helen. They were concerned with coverage; delivered formulary status, Med D pull through. They then asked about application sites; showed them application sites and left Helen profile and Butrans dosing slider. Dr Kim: delivered hydrocodone insight. I propose to Dr Kim, for patient needing change in therapy or dose, he consider Butrans, especially for his BWC patients. Discussed efficacy, tolerability, and ability to titrate in 72 hours. Newest strength of 7.5 dose mentioned. If patient needs 80 mg or more of morphine equivalency, OxyContin an option. CII, controlled release tablet, dosed every 12 hrs and first ER opioid (FDA draft guidance) with abuse deterrent properties. Ask for business today/this week.
PPLPMDL0020000001	Lyndhurst	OH	44124	10/20/2014	Lunch. Met w med asst Amy first. Hydrocodone insight. For patients that need change in therapy, have pain daily, atc, long term: Butrans an option. Newest strength 7.5 dose. If patient needs 80 mg or more, morphine equivalent, controlled release CII OxyContin is option. Dr. Prada: hydrocodone insight. If you have 1 or 2 patients this week that need a change in therapy, and have daily,atc, pain, long term, Butrans CIII 1x week patch is option. Newest strength 7.5 mcg hr every 7 days. Can titrate in 72 hrs. Can call/fax in with refills. If you have trusted patient that needs more than 80 mg morphine equivalent, controlled release OxyContin is option.
PPLPMDL0020000001	Westlake	OH	44145	10/20/2014	In speaking w the nurse about the hydrocodone insight, she said that they have gotten many phone calls. I was telling her about Butrans, it's scheduling, dosing and asked to review some new things w dr and she went to ask. Dr came to window, addressed that I had new information to give to hero her Butrans patients. Dr said she has been using it w good luck. I gave her I formation on new dosage 7.5 and handed one of the 5 experience kits and opened it with explanation. We talked about the norco patient coming in for reassessments and that one patient that may present with an opportunity for an atc chronic pain option like Butrans. Reviewed the kits with her and her nurse. We talked about Initiation of Butrans and referred to the guide in the core vis aid? I asked her when she will see her Butrans patients back, she said a month. We reviewed the titration options and use of break thru medications. Also patch rotation. Hilighted OxyCotin and Butrans abuse potential and review of scheduling for both products.
PPLPMDL0020000001	Cleveland	OH	44114	10/20/2014	Discussed treating around the clock pain in 4-6hr increments, Reviewed OxyContin every 12hours, abuse deterrent characteristics along with Butrans for those patients requiring around the clock analgesia, Said Ok, will continue to look for appropriate patients,
PPLPMDL0020000001	Westlake	OH	44145	10/20/2014	Hydrocodone insight. I asked Lori the office manager and the dr the affect it has caused in the number of patients calling or seeing. Lori said it has been a nightmare. Dr shook his head. I asked what exactly. She said they did not expect the volum of calls or complaints and she said she was supposed to stay till 4 but had to stay late twice last week because of the number of calls in the office. I said so I guess you are seeing more patient, dr said yes. I said during your visits with these norco patients, find out how satisfied they are with their current treatment plan. If they need a change perhaps they maybe be eligible for Butrans. Dr said maybe. I gave hi. A few attributes of Butrans, like dosing, experience program and c3 w refills. And did cover the potential for abuse. We covered the indication...I asked him what is the downside for selecting Butrans if the patient is appropriate that concerns you. Dr said he wasn't hesitant for writing Butrans. I spoke to Lori about the experience kind we reviewed managed care. Brian said he doesn't pay attention to managed care, but he does hand out e coupons. I reminded Lori the experience details and why if they are commercial patients why they need to leave with a kit in hand. Lori said she will try to remind Brian.
PPLPMDL0020000001	Westlake	OH	44145	10/20/2014	Pharmacist Seneck and Butrans 5mcg was still not available. Gave he the pharmacy reprint.talked about Butrans dosages and reviewed rotation of patch and where to place patch. Gave fair balance of abuse potential of both OxyContin and Butrans. Talked about Butrans and oxycontin scheduling.m
PPLPMDL0020000001	Lyndhurst	OH	44124	10/20/2014	Sara didn't come down to lunch by 1:30 so went up to office/hallway detail. Hydrocodone insight delivered. Asked for a patient this week, who needs change in therapy, asked her to consider Butrans as option. 1x week, 4 patches per month, no dose adjust needed renal, mild/moderate hepatic impaired. Avoid first pass metabolism. Now 5 strengths/dosing flexibility. If a trusted patient needs 80 mg or more morphine equivalency, OxyContin, controlled release tablet is option. Opioid naive/start dose is 10 mg dosed every 12 hrs. Left Butrans dose slider.
PPLPMDL0020000001	Akron	OH	44312	10/20/2014	Told dr that I really need him to identify patients who have daily around the clock pain who are currently in pain on IR opioids like oxycodone and use q12 single entity OxyContin. Dr said he's really against writing opioids at this time because it's too much hassle and is referring. I told dr that's fine. Reminded of Butrans and asked him if he's inclined to using a schedule 3,7 day patch? Dr said not really. Nothing else learned.
PPLPMDL0020000001	Akron	OH	44333	10/20/2014	Dr called and told me that he has a 91 yr old patient on two 10mcg Butrans patches and said that the patient was experiencing hallucinations and went to the ER. Dr asked about half life and was told approximately 26 hours. Dr said the patient removed the patches on Saturday and said the patient was on no other medicines.
PPLPMDL0020000001	Mayfield Heights	OH	44124	10/21/2014	Left for Dr. Dewes @ front window, OxyContin slim jim, Butrans dosing slider.
PPLPMDL0020000001	Cleveland	OH	44127	10/21/2014	Discussed treating around the clock pain in 4-6hr increments, Reviewed OxyContin abuse deterrent charactrcists every 12hours along with Butrans for those patients requiring around the clock analgesia. Said Ok will consider for appropriate patients, Recent changes has them sending patients to Pain mgmnt. Confirmed with Jackie
PPLPMDL0020000001	Stow	OH	44224	10/21/2014	Confirmed with Jamie that the two boxes of Butrans 7.5 were indeed order and was confirmed that they did order the pm and are on the shelf. Discussed OxyContin stocking and copy cards.
PPLPMDL0020000001	Akron	OH	44312	10/21/2014	Quick hallway call and asked him if he feels comfortable writing a schedule 3,7 day transdermal patch Butrans? Dr said he's trying. I told him to try for his patients on Tramadol who tell him they are still in pain. Reminded him that OxyContin is also a product he can write for patients in pain on Percocet and already taking it around the clock.
PPLPMDL0020000001	Cleveland	OH	44103	10/21/2014	Reviewed OxyContin abuse deterrent characteristics every 12hours along with Butrans 7.5mcg/hr introduction, Patient info booklets, Abuddullah said ok
PPLPMDL0020000001	Cleveland	OH	44106	10/21/2014	Reviewed OxyContin every 12hours, 7 tablets strengths along with Butrans for those patients requiring around the clock analgesia, said ok,no time to talk but will continue to prescribe for appropriate patients, Requested Patient info and savings cards
PPLPMDL0020000001	Beachwood	OH	44122	10/21/2014	Doctor said that he believes a patient is in around the clock pain somewhere between 3-4 pills of IR. He believes in Oxycodone molecule. Somewhere between 3-4 IR pills, he will assess and see if patient is appropriate for ER . He has had some butrans experience in the past with mixed results. Clarified that there were some that benefitted from butrans, he agreed. Reviewed formulary, titration, initiation and Helen profile for appropriate patient type for butrans. He said he will try it.
PPLPMDL0020000001	Cleveland	OH	44195	10/21/2014	Reviewed OxyContin every 12hours, 7 tablet strengths,formulary coverage, Savings Cards along with Butrans for those patients requiring around the clock analgesia, Said Ok will continue to prescribe for appropriate patients, asked to book aptt to further discuss
PPLPMDL0020000001	Cleveland	OH	44106	10/21/2014	Reviewed OxyContin every 12hours, 7 tablets strengths along with Butrans for those patients requiring around the clock analgesia that are failing on present therapy. Said he will consider for appropriate patients.
PPLPMDL0020000001	Mayfield Village	OH	44143	10/21/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44106	10/21/2014	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	10/21/2014	Spoke with the pharmacist and asked her if she would order the new 7.5 mcg Butrans. She said that she will once she sees a prescription. I asked her how much she dispenses a week? The pharmacist said maybe one or two a week and she can't justify pre ordering a new dose when she's not sure it will move. I told her I understand and showed her the rebate information. She said she will consider it. OxyContin dosing and asked which doses mostly commonly get dispensed? She said 10, 20, and 40mg.
PPLPMDL0020000001	Olmsted Falls	OH	44138	10/21/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44106	10/21/2014	No new information learned on this call.
PPLPMDL0020000001	Mayfield Hts	OH	44124	10/21/2014	No new information learned on this call.
PPLPMDL0020000001	Mayfield Village	OH	44143	10/21/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44106	10/21/2014	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	10/21/2014	Heath said that they don't dispense much oxycontin. He could think of a few cancer patients, and elderly patients. He was able to think of one or 2 patients on butrans. Can get stock of new butrans within a day or 2 from McKesson. He thinks there has been a drop in hydrocodone since the schedule change and an uptake of Tramadol and Tylenol w codeine.
PPLPMDL0020000001	Akron	OH	44310	10/21/2014	Dr told me that he had two patients in today who both reported feeling dizzy on Butrans 5mcg. Dr did not specify patients situations however said each patient was not on other products that could have produced dizziness. I told dr Butrans is not 100% effective for all patients and dr said it happens and won't deter him from future prescribing. Let dr and Shar know which pharmacies that have Butrans 7.5 mcg on the shelf. Handed dr the OxyContin conversion and titration guide and asked for appropriate starts.
PPLPMDL0020000001	Parma	OH	44129	10/21/2014	Doctor G said that he believes in OxyContin and understands how and who to prescribe it for. He keeps thinking about butrans but hasn't written it yet.
PPLPMDL0020000001	Parma	OH	44129	10/21/2014	Doctor believes in the Oxycodone molecule and likes to keep patients on a single opioid molecule. She goes to immediate release for 24 hours and if needed, will use ER and supplement with IR to manage their pain. Always write for Senekot's simultaneously.
PPLPMDL0020000001	Cleveland	OH	44127	10/21/2014	Discussed treating around the clock pain in 4-6hr increments, Reviewed Butrans CIII, 7 day transdermal for those patients requiring around the clock analgesia, along with OxyContin abuse deterrent characteristics, Said Ok, will consider, Asked for Renee's assistance in help with reminding Dr.
PPLPMDL0020000001	Mayfield Village	OH	44143	10/21/2014	MET with med asst at front window. OM too busy to talk. Left for Dr. Petroff: OxyContin formulary grid/savings self sheet/Butrans patient profile.<font color=blue><b><CHUDAKOB's query on 11/03/2014/</b></font>Did you have a product discussion with the MA or just leave info?<font color=green><b><BALLUE's response on 11/03/2014/</b></font>Had discussion with med asst on what information, and for what products I was leaving literature on for the HCPS.<font color=blue><b><CHUDAKOB added notes on 11/06/2014/</b></font>if you had a discussion, then that should be included in the call notes. Too general call notes are left open to interpretation. Thanks
PPLPMDL0020000001	Westlake	OH	44145	10/22/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	10/22/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	10/22/2014	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	10/22/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	10/22/2014	Discussed treating around the clock pain in 4-6hr increments. Reviewed OxyContin every 12 hours, abuse deterrent characteristics, Along with Butrans , 7 day transdermal, cIII, for those patients requiring around the clock analgesia. Said ok will consider for appropriate patients
PPLPMDL0020000001	Westlake	OH	44145	10/22/2014	Spoke to Christy the office manager in westlake. We talked about the hydrocodone insight and she said it hasn't been that bad. Dr came out if the room and around the corner and waved to me. I called out will I see you at 630 tomorrow for dinner? He came close and said what? I said aren't you coming to the Butrans at chez dinner tomorrow. He said no he could t cause he had something else going on. I asked him his thought on the primary care using more Butrans being schedule 3 w refills for appropriate patients. Dr said maybe, he said or tramdol used more. I said the primary care docs often ask me if the pain docs are using Butrans. Is the type of pain patient you start Butrans on different en what the primary care would do? Dr said probably not. I left him to Helen profile w brief description and said we can talk about this next time. Asked him to keep an eye open for appropriate Butrans patients this week falling norco.
PPLPMDL0020000001	Cleveland	OH	44195	10/22/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	10/22/2014	No new information learned on this call.



PPLPMDL0020000001	Cleveland	OH	44195	10/22/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	10/22/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44109	10/22/2014	No new information learned on this call.
PPLPMDL0020000001	Copley	OH	44321	10/22/2014	Pharmacist told me that they will not order the Butrans 7.5 mcg until they see a prescription after I introduced it up to him. He said they don't dispense enough to ore order it. Reviewed the dosing flexibility and starting doses. Reviewed OxyContin dosing and conversions and asked about stocking. Was told that they have all the OxyContin doses.
PPLPMDL0020000001	Westlake	OH	44145	10/22/2014	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44320	10/22/2014	Showed dr new piece for Butrans discussing how Butrans is the only schedule 3 ER opioid available. Dr said she didn't know that. I told her that she needs to start identifying patients who are in daily around the clock pain and to consider Butrans for those patients as a viable option. Dr asked what dose is starting for opioid naive patients? Explained the 5 mcg dose for those patients and asked her if she has them? Dr said a few and asked me to leave the piece for her to review. Dr asked about Medicaid coverage and I reviewed it with her along with Medicare and commercial insurance.
PPLPMDL0020000001	Uniontown	OH	44685	10/22/2014	Led with insight 18 and asked what is in place if anything to handle patients coming back into the office for their hydrocodone refills? Dr asked how I can help him get Butrans covered better. I asked him why and to be more specific. Dr said that one case of an older patient has been on everything for pain he can think of and her Medicare plan which is SummaCare is denying Butrans. Spoke with Samantha the patient coordinator to discuss the plan and she said the patient has been on Butrans a year ago and discontinued it. Samantha said she will do the pa and let me know. Discussed OxyContin with dr and how he can properly identify patients and reviewed indication. check on Butrans patient with SummaCare and follow up with dr.
PPLPMDL0020000001	Westlake	OH	44145	10/22/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	10/22/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	10/22/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	10/22/2014	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	10/22/2014	Used insight 18. Hydrocodone schedule change doesn't affect his practice. He doesn't really have experience with butrans because he doesn't see a need. Asked if he has patients on Tramadol. He said yes but doesn't have time right now. Told him that appropriate butrans patient might be the Tramadol patient who needs more pain relief. Asked him to consider butrans before Percocet or Vicodin. He said he doesn't write oxycontin.
PPLPMDL0020000001	Akron	OH	44333	10/22/2014	Short call as she was going out of town for a conference. Discussed reassessing patients for Butrans and OxyContin and how she can utilize Butrans for those patients complaining of pain on an IR opioid or asking for more. Elise said she does it all the time and loves Butrans and wants insurance companies to approve it easier. Reviewed insurance and copy cards.
PPLPMDL0020000001	Westlake	OH	44145	10/22/2014	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44320	10/22/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	10/22/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	10/22/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	10/22/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44129	10/22/2014	She thinks that doctors are writing a bit less of hydrocodone and more Tylenol w codeine. She thinks this will change over time.
PPLPMDL0020000001	Akron	OH	44320	10/22/2014	Pharmacist directed me to a pharmacy student to discuss products. Reviewed Butrans dosing including the 7.5 mcg dose and starting doses with conversions. Discussed Butrans attributes and then reviewed OxyContin dosing and how to convert. Reviewed indications for each product.
PPLPMDL0020000001	Cleveland	OH	44195	10/22/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	10/22/2014	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	10/22/2014	Discussed Butrans dosing flexibility and told him to reassess his patients on hydrocodone as potential candidates for Butrans or OxyContin as long as they meet the indication. Dr said he continues to do that and have seen a large surge of patient referrals this week so may have some new patients.
PPLPMDL0020000001	Mayfield Heights	OH	44124	10/22/2014	Breakfast. Hydrocodone insight delivered. Presented Oxycontin as option for patients who need a change in therapy and meet ER opioid indication. Can titrate in 1-2 days, single entity, dosing flexibility discussed. Another option, for patients like Helen (profile) is Butrans, the only CII ER opioid on the market and now with 5 strengths. 7.5 strength mentioned. Can call/fax script with rells. Med D pull through, Caresource prior auth and OxyContin formulary grid discussed.
PPLPMDL0020000001	Mayfield Heights	OH	44124	10/22/2014	Breakfast. Hydrocodone insight delivered. Asked when patients need change in therapy or ask for titration, she keep controlled release OxyContin in mind. Dr E stated she recently added OxyContin on for elderly female patient who was on 1-2 Percocet prn. With the addition of OxyContin, the patient is doing really well so far. She also tried to get OxyContin Butrans covered in nursing home/but they want patients to typically try "short acting" opioid first. Butrans discussed as only ER CII opioid currently on market, with newest strength of 7.5 (titration dose) - more choices when titrating patients. Discussed, left OxyContin formulary grid and savings sell sheet. Met with med asst and updated as well. med d pull through.
PPLPMDL0020000001	Parma	OH	44129	10/22/2014	Started with Tramadol insight #12. Doctor said he has Tramadol in his practice but he thinks he assesses earlier than that. Asked where he goes if Tramadol isn't enough. he said IR combo. I asked him to consider butrans before going to the combination. He said he uses butrans primarily for patients that he is weaning off of Percocet or Vicodin. So, he sees butrans adjacent to Percocet and Vicodin as he weans, how about considering it before he titrates to that? He said that it makes sense. Pulled through new dose of butrans as additional option and improved formulary coverage. He said he does not write oxycontin.
PPLPMDL0020000001	Mayfield Hts	OH	44124	10/22/2014	Coffee appt. Hydrocodone insight. Butrans for patients who need change in therapy discussed. Only ER opioid that's CII on market with 5 strengths now, offering dosing flexibility. Dr states Butrans is more difficult to get covered. He's writing more OxyContin, as easier to get covered, not complicated titration.
PPLPMDL0020000001	Cleveland	OH	44195	10/22/2014	Discussed treating around the clock pain in 4-6 hr increments, Reviewed OxyContin abuse deterrent characteristics every 12hours, 7 tablet strengths along with Butrans CII, 7 day transdermal, Initiation/titration, PI review, Said she has a few patients in mind.
PPLPMDL0020000001	Uniontown	OH	44685	10/22/2014	Led with insight 18 and asked what is in place if anything to handle patients coming back into the office for their hydrocodone refills? dr said he doesn't have anything in place and is going to take it one patient at a time. Dr said he doesn't even want to write opioids for long term use but patients are being fired from pain management for the smallest things and then they come back to see him to manage their pain. Discussed the opportunity he has to reassess his hydrocodone patients when they come back for their refills and explained the OxyContin and Butrans options. Reviewed OxyContin dosing and conversions along with start principles and titration.
PPLPMDL0020000001	akron	OH	44685	10/22/2014	Discussed Butrans dosing flexibility, conversions,only schedule 3 ER opioid available. Helen profile discussion and copy cards and insurance.
PPLPMDL0020000001	westlake	OH	44011	10/22/2014	Led with insight 18 and asked what is in place if anything to handle patients coming back into the office for their hydrocodone refills? Dr told me that he is going to moving to 100% sports medicine soon and will not have the need for any ER opioids. Dr said he still needs to know all about them though. Reviewed Butrans attributes, doses, conversions and Helen profile. Reviewed OxyContin dosing, conversions, titration and indication. Hydrocodone insight. Talked about the. Umber of patients that he may see extra in a month, dr agreed. If someone on norco isn't controlled and they are appropriate for an atc chronic oai. Medication , what reasons do you have not not choosing Butrans as an option. Dr said he likes Butrans and it could be an option. Reviewed the Initiation guide and schedule three attributes and dosing. I asked hi. WHAT was his biggest concern with dosing someone with Butrans 4 times a month that you dint have with other options? Dr said rash and coverage. Showed him the Adverse reaction of the core visual aid and reminded him about the patch rotation. Med d, caresource or commercial insured outpatients. I asked which are you more interested in knowing about? Dr said med d. So I reviewed two plans aarp and silvers script coverage and have him a broad overview. I invited to dinner program for Butrans. I asked for a commitment from him to write Butrans for appropriate norco patients this week.
PPLPMDL0020000001	Beachwood	OH	44122	10/23/2014	Quickly told her about the new available dose with Butrans when she asked if anything is new....and then she kept going....
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	10/23/2014	Discussed Butrans and OxyContin attributes, conversions, appropriate patients and copy cards. Discussed the need to get Butrans on hospital formulary.
PPLPMDL0020000001	Beachwood	OH	44122	10/23/2014	Quickly talked with Nikki about hydrocodone scheduling and additional workload for the office. Discussed butrans appropriate patient after Tramadol and new available dose and formulRy for both products.
PPLPMDL0020000001	Cleveland Hts	OH	44118	10/23/2014	Discussed treating around the clock pain in 4-6hr increments, Reviewed OxyContin every 12hours, 7 tablet strengths along with Butrans for those patients requiring around the clock analgesia. Said Ok he will continue to prescribe for appropriate patients.<font color=blue><b>CHUDAKOB's query on 11/03/2014</b></font>Mark, read your first sentence. This is really open to interpretation on exactly what you meant. What did you discuss about treating pain in 4-6 hour increments?<font color=green><b>GUTKOMA's response on 11/03/2014</b></font>Discussed insight#18 along with the opportunity to reassess some of these patients that are on these IR products every 4-6hrs and the therapy is ineffective or not tolerated, Followed up by a review of our Extended release opioids (Butrans/OxyContin)<font color=blue><b>CHUDAKOB added notes on 11/04/2014</b></font>That is a much better call note. Thanks for the clarification.
PPLPMDL0020000001	Cleveland	OH	44113	10/23/2014	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44305	10/23/2014	Spoke with Nikki the pharmacist about Butrans and OxyContin attributes, conversions and copy cards. Explained the new Butrans piece as the only schedule 3 ER opioid and if she would order the. 7.5 mcg? Nikki said they don't dispense enough of it to order before they see a script.
PPLPMDL0020000001	Cleveland	OH	44195	10/23/2014	No new information learned on this call.<font color=blue><b>CHUDAKOB's query on 11/03/2014</b></font>How did you end up calling on an OBG?<font color=green><b>GUTKOMA's response on 11/03/2014</b></font>Wrong Specialty designated in Phoenix. She is part of the Palliative Med team at CCF-Taussig.<font color=blue><b>CHUDAKOB added notes on 11/06/2014</b></font>OK. Thanks for the clarification
PPLPMDL0020000001	Cleveland Solon	OH	44139	10/23/2014	Quick OxyContin reminder, 7 tablet strengths, Savings cards along with Butrans for those patients requiring around the clock analgesia. Said he refers to Pal Med team Quick meeting and quick introduction. He would like to talk to me about butrans, but not today and his job is to get patients off off OxyContin. I also met with his wife the office manager for a longer period of time to tour the practice.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	10/23/2014	Inpatient pharmacy lunch. Discussed oxycontin and Butrans FPI, dosing and conversions.
PPLPMDL0020000001	Cleveland	OH	44103	10/23/2014	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	10/23/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland Hts	OH	44118	10/23/2014	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	10/23/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44115	10/23/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44115	10/23/2014	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44305	10/23/2014	Told dr I had only one point to make about Butrans and used the new piece and told him that Butrans is the only available schedule 3 ER opioid. Dr said he didn't know that. I asked him if that means anything to him and dr said it dos because its the only one he can call in and refill. I told dr that's correct and to use it for his tramadol patients who meet the indication and are in around the clock pain.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	10/23/2014	Quick call with dr in his office. Discussed Butrans dosing flexibility, 7.5 mcg, titration and use in patients like Helen. Dr said he likes Butrans and asked if Linda is up to speed on everything. I told him she is and that I want him to push the dose when medically necessary. Dr said he may go to a 15mcg but that's it. Left him the OxyContin dosing guide.

PPLPMDL0020000001	Cuyahoga Falls	OH	44223	10/23/2014	Spoke with Chad the pharmacist about Butrans and OxyContin. I asked him about Butrans and OxyContin dosing and titration. I asked him if he would check if they have the Butrans 7.5 mcg on the shelf and he said they do have 1 box. Discussed rebates available and copy cards.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	10/23/2014	Reviewed insight 18 and followed up with questions from the insight. Dr said that he uses OxyContin and will usually start on 10 or 20mg because he has lots of room to titrate. Discussed the opportunity for both OxyContin and Butrans for those patients he needs to reassess on hydrocodone. Dr said he will see a big bump in Butrans and said that Caresource has been a blessing for him and his patients because it's a very easy process. Reviewed both OxyContin and Butrans attributes, conversions and dosing flexibility with the 7.5 mg.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	10/23/2014	Met with the Center for Pain Management and the Summa Western Reserve Hospital inpatient pharmacy. Discussed OxyContin and Butrans attributes, clinical trials, titration, OxyContin abuse deterrent information in visad and dosing and insurance. Was told that the physicians are using injectable buprenorphine in the hospital and then wanting to convert them to Butrans upon discharge. Since Butrans isn't on the hospital pharmacy they have the patients get it from New Choice pharmacy in the hospital.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	10/23/2014	Reviewed insight 18 and followed up with questions from the insight. Dr said he can understand how it's opened the door for Butrans but not sure about OxyContin even though dr said he uses it a lot. Discussed using OxyContin for his patients outside of the hospital and Butrans for his patients going to outpatient pharmacies. Dr said he loves each product and will continue to use. Reviewed OxyContin and Butrans copy cards and
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	10/23/2014	Reviewed insight 18 and followed up with questions from the insight. Linda said she knows that Jake used a lot of Butrans and is quickly finding out how truly great the product is. Linda said that her patients love it and is trying to use it as often as she can. Reviewed Butrans dosing flexibility, attributes, only schedule 3 ER opioid and conversions. Linda said she will keep using and likes that Caresource is picking it up with a pa. Reviewed OxyContin dosing, attributes, conversions and when to use.
PPLPMDL0020000001	Euclid	OH	44132	10/24/2014	Met with med asst at front window. Dr Brobbey is on vacation/not back in office until MON NOV 3. Left for Dr. Brobbey, OxyContin slim jim, Butrans "only CIII ER opioid" piece. Left same for NP Cara and PA-C Liz who are covering for him while he's on vacation. Updated staff on Butrans 7.5 strength.
PPLPMDL0020000001	Cleveland	OH	44107	10/24/2014	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	10/24/2014	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	10/24/2014	No new information learned on this call.
PPLPMDL0020000001	Warrensville	OH	44122	10/24/2014	Quick intro, bringing info about products for his patients in around the clock pain. Q12 OxyContin and C3 butrans. Scheduled appointment for end of November
PPLPMDL0020000001	Cleveland	OH	44144	10/24/2014	Discussed Reassessing your patients, why treat around the clock pain in 4-6hr increments, Reviewed OxyContin every 12hours and Butrans for those patients requiring around the clock analgesia, Said she will consider for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44113	10/24/2014	Discussed treating around the clock pain in 4-6hr increments, reviewed Butrans CIII for those patients requiring around the clock pain along w/OxyContin every 12hours, 7 tablet strengths abuse deterrent characteristics. said ok will continue to consider for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44113	10/24/2014	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	10/24/2014	No new information learned on this call.
PPLPMDL0020000001	Brooklyn	OH	44144	10/24/2014	No new information learned on this call.
PPLPMDL0020000001	Brooklyn	OH	44144	10/24/2014	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	10/24/2014	No new information learned on this call.
PPLPMDL0020000001	Valley View	OH	44125	10/24/2014	No new information learned on this call.
PPLPMDL0020000001	Olmsted Falls	OH	44138	10/24/2014	No new information learned on this call.
PPLPMDL0020000001	Berea	OH	44017	10/24/2014	No new information learned on this call.
PPLPMDL0020000001	Garfield Heights	OH	44125	10/24/2014	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	10/24/2014	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	10/24/2014	No new information learned on this call.
PPLPMDL0020000001	Olmsted Falls	OH	44138	10/24/2014	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	10/24/2014	Reviewed extended release insight and asked dr when she knows someone is ready for a product like OxyContin?dr said she tends to feel comfortable wiring oxycotin for her older patient with ling term pain. I asked what is long term? She said the kind that doesn't get better with time. Showed core visual aid of huge different types of pain OxyCotin can be used for and reviewed indication. I asked the dr if she every thinks of OxyCotin when someone is atc pain taking 2 or more doses chronicle? She said sometimes but usually not. Talked about the doses and titration of OxyCotin. Talked about patients under 40mg total dose of norco and appropriate for Butrans. Dr said she has used Butrans. We discussed the patient type and reviewed Helen profile. Reviewed abuse potential and managed care. Talked steady state and doses.
PPLPMDL0020000001	Macedonia	OH	44056	10/24/2014	Anna was very busy. We talked briefly about message I am saying to physicians about when it is determined that patient is in around the clock Pain, we are asking them to consider ER meds like OxyContin and butrans. She didn't know what butrans was. I reviewed indication, initiation, titration, scheduling and the opioid naive or Tramadol patient as appropriate for butrans. She liked the option and hasn't seen a change in prescribing since hydrocodone schedule change.
PPLPMDL0020000001	Beachwood	OH	44122	10/24/2014	Hydrocodone insight 18. Doctor said it's been very challenging and a lot of extra work. I asked him to visualize some of those patients coming in to see him. Can he think of some of those that are in around the clock pain and taking something every 4 hours or so. He said, unfortunately many of them. He then said that the goal is to get them off of pills if possible. I told him those patients may be appropriate for ER medication to treat that around the clock pain...like butrans. Used Helen to discuss Tramadol patient. Asked him to consider a patient like her before starting them on a different IR for pain that had been determined to be around the clock. Reviewed, scheduling, initiation and titration of butrans. He on his own said it makes sense to go from c4 Tramadol, to C3 butrans before going to C2 IR combo. I told him that the butrans patient can take those for breakthrough...he likes the option of butrans and has thought of a couple patients as we stood there talking. I told him that he mentioned earlier that taking fewer pills is the goal. I asked him if he can think of any of his patients are taking an IR combination meds, and might be appropriate for q12 dosing, single molecule. He said yes. Quickly reviewed abuse deterrence, (let him know it can still be abused) OxyContin dosing. He appreciated the information and asked me to follow up to help him remember.<font color=blue>b<b>CHUDAKOB added notes on 11/10/2014/</font>WOW! Your persistence paid off and it looks like you made the most of the opportunity with an
PPLPMDL0020000001	Garfield Hts	OH	44125	10/24/2014	Discussed treating around the clock pain in 4-6hr increments, Reviewed OxyContin 7 tablet strengths every 12hours, along with Butrans for those patients requiring around the clock analgesia, Said Ok will consider, started a patient on OxyContin and is doing well
PPLPMDL0020000001	Lakewood	OH	44107	10/24/2014	Opened w hydrocodone insight. Dr said he is seeing far more then he anticipated and he told me he added more patients recently. We talked about the atc chronic pain patient he might be seeing this month on norco. I asked him when does Butrans fit into your selection process. Dr said he doesn't write much because he likes to write generic products first. I asked if the two products for pain before Butrans are generic products. He said usually. I said well then looms like Butrans isn't first anyway. Went thru the Helen case. Dr agreed that the might be a patient or two appropriate for Butrans. Talked about the over 40mg total daily dose norco patient and OxyContin. We reviewed dosing of OxyCotin. Lastly...tied in the over 65 med d coverage. Highlighted aarp and silverscripts. Closed forest weeks norco failures and appropriate Butrans potential starts.
PPLPMDL0020000001	Mayfield Heights	OH	44124	10/27/2014	Dr Roxana not in today. Discussed with med asst and left for Dr Roxana, OxyContin slim jim and Butrans 7.5 brochure. Left green protect your meds @ home brochures.(next visit leave OxyContin formulary grid)
PPLPMDL0020000001	Mayfield Village	OH	44143	10/27/2014	Met with med asst at front window.Left Butrans 7.5 brochure, reinforced Butrans now has 5 strengths, CIII. Left Oxycontin slim jim, reinforced CII, controlled release, q12 h dosing.
PPLPMDL0020000001	Mayfield Heights	OH	44124	10/27/2014	Hallway. For patients that have daily, atc, long term pain; i have 2 good options for you: Butrans, single entity, 1x week, CIII transdermal. Dr states Butrans is expensive, he recently wrote a Butrans for a patient and it was reported back to him, that cost was around \$300. I replied that must be a self-pay patient, and if paying cash, yes - that would be correct price. Let's focus on your commercial or Medicare D patients. There's a savings for commercially covered. He states most of his patients over age 65. Replied with Medicre D pull through and average monthly cost of \$17-45 monthly. OxyContin is also available with savings for self pay and commercially covered patients - if cost is an issue. He was not reassured and says, that's not what i'm hearing. Asked him to read literature i'm leaving. He then walked into patient room.(OxyContin slim jim, Butrans 7.5 brochure)
PPLPMDL0020000001	Cleveland	OH	44113	10/27/2014	Discussed treating around the clock pain in 4-6hr increments, Reviewed OxyContin abuse deterrent characteristics every 12hours, 7 tablets along with Butrans CIII, 7 day transdermal, for the patients requiring around the clock analgesia, Said He basically prescribes short term post op and then sends back to Pain mgmtm or PC but will consider for appropriate patients
PPLPMDL0020000001	Fairlawn	OH	44333	10/27/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	10/27/2014	Discussed treating around the clock pain in 4-6hr increments,reviewed OxyContin abuse deterrent characteristics every 12hours, 7 tablet strengths, formulary coverage Savings cards, Reviewed Butrans for those patients requiring around the clock analgesia, Initiation/Titration, Med D coverage, CIII, Said Ok will continue to prescribe for appropriate patients on discharge, Will help reminding Dr. Daoud and SHen
PPLPMDL0020000001	Cleveland	OH	44113	10/27/2014	Discussed treating around the clock pain in 4-6hr increments, Reviewed Butrans for those patients requiring around the clock analgesia, Initiation/Titration, Med D coverage, CIII, also reviewed OxyContin abuse deterrent characteristics every 12hours, 7 tablet strengths, Said Ok will continue to prescribe for appropriate patients, asked for 1 patient this afternoon said she try.
PPLPMDL0020000001	Cleveland	OH	44195	10/27/2014	No new information learned on this call.
PPLPMDL0020000001	CLEVELAND	OH	44195	10/27/2014	Reviewed OxyContin and Butrans with Troy, utilization along with protocol with Pal Med team, no new changes
PPLPMDL0020000001	Cleveland	OH	44113	10/27/2014	No new information learned on this call.
PPLPMDL0020000001	Lyndhurst	OH	44124	10/27/2014	No new information learned on this call.
PPLPMDL0020000001	Norton	OH	44203	10/27/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	10/27/2014	No new information learned on this call.
PPLPMDL0020000001	Mayfield Village	OH	44143	10/27/2014	No new information learned on this call.
PPLPMDL0020000001	Fairlawn	OH	44333	10/27/2014	Jessica and Sue told me that the two Butrans 7.5 mcg that they ordered have already been moved off their shelf and that Elise Leone write both of them. Reviewed new Butrans once about it bing the only schedule 3 ER opioid. Discussed copy cards and OxyContin dosing and copy cards. They have all OxyContin doses on the shelf.
PPLPMDL0020000001	Akron	OH	44333	10/27/2014	Showed dr the OxyContin pages 8&9 and asked him to start at the 10mg dose and to reassess patients on hydrocodone as some of them may be candidates for OxyContin or Butrans. Nothing else learned.
PPLPMDL0020000001	Mayfield Heights	OH	44124	10/27/2014	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	10/27/2014	No new information learned on this call.
PPLPMDL0020000001	Norton	OH	44203	10/27/2014	No new information learned on this call.
PPLPMDL0020000001	Lyndhurst	OH	44124	10/27/2014	Lunch. Hydrocodone insight delivered. How does this effect your treatment goals for patients? Karen replied, it doesn't as she's trying to avoid writing ER opioids whenever possible. With all the requirements, step edita, it has become hassle and she's using other therapies for migraine pain. She states a new formulation of imitrex is rumored to come out soon. If she has a patient who needs change in therapy, for trusted patients, OxyContin, single entity, dosing flexibility, can titrate 1-2 days, savings can be redeemed by self pay and commercially covered. Butrans, CIII< single entity, now 5 strengths, no first pass metabolism, no dosing adjust needed renal, mild/moderate hepatic impaired, trial savings for commercially covered, Med D pull through. Asked her to keep in mind this week for patients needing change in therapy. Ok, she state she will keep in mind.

	Fairlawn	OH	44333	10/27/2014	Short call at front counter as dr came up as I asked to speak with her. Dr Almendras and dr Meli came to the front desk. I showed them both the OxyContin conversion guid from the MVA and reminded them its a schedule 2 single entity oxycodone dosed q12. I showed dr the new Butrans piece and reviewed how its the only schedule 3 ER opioid available and if she has had any more experience? Dr said maybe once she spoke last. I asked for continued prescribing.
PPLPMDL0020000001	Cleveland	OH	44195	10/27/2014	Reviewed with Roxan, OxyContin abuse deterrent charactrctics every 12hours along with Butrans 7 day transdermal CIII, said no new info. Fills mostly acute care RX's
PPLPMDL0020000001	Akron	OH	44333	10/27/2014	Quick call at counter in Fairlawn and showed him page 10 of MVA and asked him how often he's reassessing his patients who may have around the clock pain and on Percocet? Dr said failed often. I told him the opportunity as a q12 oxycodone may be appropriate for some of those patients. Dr said ok. Reviewed Butrans 7.5 mcg piece and told him its the only schedule 3 ER opioid available. Dr said he really likes it and will continue to use.
PPLPMDL0020000001	Lyndhurst	OH	44124	10/27/2014	Lunch. Hydrocodone insight delivered. How has that effected your practice? Not at all. What's effecting practice lately is all the reports from patients on butrans of adhesion rashes. Let her know we track these, and I will submit her comments. She states butrans, compared to any other patches on market including Fentanyl/Duragesic, Flector Patch, Lidoderm) Butrans has most complaints from patients. I empathized with her and asked her not to give up on Butrans completely. As for OxyContin, she states shes very angry at OxyContin write now as it's not covered. Problems recently with male patient in his /40s, was on OxyContin 20 mg, doing well, changed insurance, now on Caresource, and plan is requiring he fail on morphine sulfate for 30 days, then Kadian for 30 days, then can get OxyContin 20 mg, q12 h. She's very frustrated as what she wants patient to take, and what was working for patient, plans won't allow. As a result, to avoid the hassle, she's not writing much Oxycontin moving forward, unless coverage improves. She also mentions disappointment in Butrans coverage as well. Followed up with commercial trial, savings, Caresource prior auth details and Med D pull through.
PPLPMDL0020000001	Lyndhurst	OH	44124	10/27/2014	Lunch. Hydrocodone insight delivered. When patients come in every 30 days, need a change in therapy, you have options: OxyContin, a CII, single entity ER opioid, dosed every 12 hours. If OxyContin is not appropriate, Butrans, is another transdermal option: it's a CIII, 1x week transdermal, now with 5 strengths. Lets focus on patient like Helen, and here's Med D preferred status. Dr Roda states she will keep both products in mind, as long as they're covered and cost effective for patients.
PPLPMDL0020000001	Cleveland	OH	44113	10/28/2014	Discussed treating around the clock pain in 4-6hr increments, Reviewed Butrans Initiation/Titration, Med D coverage along with OxyContin abuse deterrent characteristics every 12hours, Said she will continue to prescribe for appropriate patients, Asked for 1-2 patients this afternoon, said she will consider<font color=blue><b>CHUDAKOB's query on 11/10/2014</b></font>-Mark, I see where you reviewed the abuse-deterrent characteristics of OxyContin, but do not see the fair balance in the call note. What, if at all, did you discuss in this regard? Please record this discussion in your call notes.<font color=green><b>GUTKOMA's response on 11/10/2014</b></font>-Also Reiterated with Deb that both OxyContin and Butrans exposes patients and other users to the risks of opioid abuse, misuse and addiction.<font color=blue><b>CHUDAKOB added notes on 11/12/2014</b></font>-Thank you! Please be sure to include this in your call notes so we can see the fair balance you provided.
PPLPMDL0020000001	Barberton	OH	44203	10/28/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	10/28/2014	Reviewed Butrans Initiation/Titration, Med D coverage, along with OxyContin every 12hours, abuse deterrent characteristics, Said she will continue to find appropriate patients for Butrans.<font color=blue><b>CHUDAKOB's query on 11/10/2014</b></font>-Please record the adverse event in your call notes as well. I cannot see the AE section when reviewing call notes and it should be in the topic section as well. What was the AE?<font color=green><b>GUTKOMA's response on 11/10/2014</b></font>-Patient expressed a heat sensation on application site (Butrans 10mcg/hr)<font color=blue><b>CHUDAKOB added notes on 11/12/2014</b></font>-When you hear an adverse event, try to gain as much info as possible. HIPAA does not apply to the reporting of adverse events. Thanks Mark!
PPLPMDL0020000001	Cleveland	OH	44113	10/28/2014	Discussed treating around the clock pain in 4-6hr increments, Reviewed OxyContin abuse deterrent characteristics every 12hours, 7 tablet strengths along with Butrans for those patients requiring around the clock analgesia, Said she will continue to consider for appropriate patients, asked for 1-2 patients this afternoon, said she will
PPLPMDL0020000001	Garfield Heights	OH	44125	10/28/2014	Quick review of OxyContin every 12hours, along with Butrans CIII, 7 day transdermal for those patients failing on present therapy requiring around the clock analgesia.Said Ok will consider for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44102	10/28/2014	Reviewed with Ed, OxyContin every 12hours along with Butrans 7 day transdermal, CIII, said he will continue to remind prescribers for appropriate patients
PPLPMDL0020000001	Stow	OH	44224	10/28/2014	Spoke with Corey the pharmacist and reviewed Butrans dosing flexibility and new 7.5mcg dose. Corey said he read up on it. I talked about how much they dispense and if they would preorder the new dose so when a patient coms in for it he can dispense the same day? Corey said they will wait for the script first. Discussed OxyContin dosing and conversions and copy cards for each. Corey said he had two Butrans copy cards and a few for
PPLPMDL0020000001	Barberton	OH	44203	10/28/2014	No new information learned on this call.
PPLPMDL0020000001	Stow	OH	44224	10/28/2014	No new information learned on this call.
PPLPMDL0020000001	Barberton	OH	44203	10/28/2014	No new information learned on this call.
PPLPMDL0020000001	Warrensville Heights	OH	44122	10/28/2014	Quick introduction. He tries not to write too many opioids, he will refer patients out. Told him next time I would like to discuss a few of his patient that might be appropriate for ER meds like OxyContin or butrans.
PPLPMDL0020000001	Barberton	OH	44203	10/28/2014	No new information learned on this call.
PPLPMDL0020000001	Barberton	OH	44203	10/28/2014	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	10/28/2014	Told dr I want him to reassess his patients on IR opioids like hydrocodone and oxycodone who are in pain around the clock. I reviewed OxyContin dosing and conversions as well as managed care with dr and Liz. Asked him to consider using Butrans with increased dosing flexibility.
PPLPMDL0020000001	Barberton	OH	44203	10/28/2014	No new information learned on this call.
PPLPMDL0020000001	Stow	OH	44224	10/28/2014	Spoke with the pharmacist amber about Butrans and OxyContin attributes, dosing and conversions. I reviewed the 7.5 mcg dose with her and asked her how frequently they are dispensing Butrans? She said they have maybe 4 patients on it. I asked if they would order a box of 7.5 mcg? She said they will wait until the see a script. Left her with copy card information.
PPLPMDL0020000001	Stow	OH	44224	10/28/2014	Hello to Sabrina while speaking with Rick up front. Discussed the dosing flexibility if Butrans and new 7.5 mcg dose. I told her I hope it will lend itself to appropriate titration of the product. Sabrina said she has been having good success with it. Nothing else learned.
PPLPMDL0020000001	Chagrin Falls	OH	44022	10/28/2014	Talked with Laurie who said the patients are very frustrated with the hydrocodone schedule change. She is seeing more Tylenol w codeine. Discussed around the clock pain and ER meds and she is hoping the docs will choose more ER than IR. She just orders butrans as she gets scripts, has no patients on it right now. Reviewed dosing, titration, scheduling. She thinks it's a good option.
PPLPMDL0020000001	Cleveland	OH	44105	10/28/2014	Reviewed Butrans for those patients requiring around the clock analgesia, CIII, along with OxyContin every 12hours, Said no new info learned, said if appropriate he will recommend
PPLPMDL0020000001	Chagrin Falls	OH	44023	10/28/2014	Jeff the pahrmacist was too busy but stopped long enough for an introduction. He stocks oxycontin, but no butrans, thinks it's a great product that hopefully docs will write more off
PPLPMDL0020000001	Stow	OH	44224	10/28/2014	Spoke to at front while speaking with the director Rick. Told Sandra about the Butrans dosing flexibility and new 7.5 mcg dose. I asked her to please continue identifying patients who have daily, around the clock pain. Sandra said ok and took the new piece.
PPLPMDL0020000001	Barberton	OH	44203	10/28/2014	Can I ask you a question? What's your thoughts on the new patients you get in norco and them being dosed more than 4 doses a day for months? Dr said it doesn't bother him. I asked if he wished they turned to an extended release sooner like OxyContin or Butrans. Dr said he will usually change their medication if the patient isn't being controlled. how you write Butrans different from when primary care writes Butrans?? Dr said its about the same. I thank him for the time. Wrapped up with if you see one more uncontrolled norco patient uncontrolled...OxyContin every 12 hours might be an option for appro patient. He said ok.
PPLPMDL0020000001	Cleveland	OH	44113	10/28/2014	Discussed treating around the clock pain in 4-6hr increments, Reviewed OxyContin abuse deterrent characteristics every 12hours, 7 tablet strengths along with Butrans CIII, 7 day transdermal, for those patients requiring around the clock analgesia, Said she will continue to remind Dr.
PPLPMDL0020000001	Euclid	OH	44119	10/29/2014	Met with RN Carla Van Pelt. She allowed me back to talk with Dr Saeed (procedures today) and Paul. Discussed OxyContin slim jim, START principles available to hcps. Discussed Butrans 7.5 strength, for total of 5 strengths now. Discussed, left "how to protect your meds at home" green brochures. (left literature for Drs. Saeed, Nageeb and PA-C Paul Gawry)
PPLPMDL0020000001	Westlake	OH	44145	10/29/2014	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	10/29/2014	He has some of his older patients on OxyContin. Told me I have to keep reminding him of butrans. Reviewed that he now has 5 doses to choose from and that if patient is in around the clock pain, they may be appropriate for an ER opioid. Mentioned the patient that might need more Tramadol as possible butrans patient. He took a patient back so didn't have much time.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	10/29/2014	Dr said she loves Butrans but is just concerned with lack of insurance coverage and if it was better she would be using it more often. I asked dr where she's having issues And she said mostly with Medicaid and Medicare. I reviewed the Caresource pa and told her its her best option for medicaid. Reviewed other plans and told her to stay away from buckeye due to pa criteria. I told dr not to lump all Medicaid plans together and if one plan doesn't cover it that doesn't mean that they all don't. I told her to lean on Darlene for insurance coverages as she goes to prescribe because she has all the formulary grids and will contact me with further questions.
PPLPMDL0020000001	Fairview Park	OH	44126	10/29/2014	Reviewed dosing flexibility, titration and dose failure vs product failure and the need to titrate. Discussed efficacy and safety and then OxyContin as the option for patients needing a q12 oxycodone. Hydrocodone insight. Asked the doctor and Erica the ma how's has affected his office? Erica said she gets a few phone calls a week, I asked how soon she gets them into the office for an evaluation and new script. She said usually with in the week. I asked the doctor if that was soon enough? Dr said it is what it is. I said understood. I said let's imagine seeing one norco patient, the one that has been refilling for months and is clearly not an acute patient. What if the bid style of taking norco was not controlling their pain. Explain your next step. Dr said he would either increase the dose or change meds. I said ok...why wouldn't a patch like Butrans then be appropriate, dr said it could be and it depends on the dose of norco they were on. I said if they pain several times a day...how does increasing the strength help this patient? Dr said it depends on the patient and what their pain is dr from. I said here's something to think about...I reviewed who we talked about and Butrans dosing, tied it in with the over 65 aarp and Silverscript coverage. I asked if this sounded reasonable and he said ok.
PPLPMDL0020000001	Parma	OH	44129	10/29/2014	Linda said that she would like to see Butrans being used more often with opioid naive patients. Right now she uses it mostly as an add on to Percocet or Vicodin as she is trying to get them to take fewer pills. Reviewed Helen profile as appropriate patient after Tramadol. She agreed. Told her I am hoping she sees a few of those patients this afternoon! She is surprised Doctor nickels hasn't reevaluated the use of,hydrocodone in his practice with the schedule change but he hasn't. Still doesn't want them writing oxycontin.
PPLPMDL0020000001	Cleveland	OH	44195	10/29/2014	Quick review of OxyContin savings cards/Formulary grids along with Butrans Initiation/Titration, Said she will continue to prescribe for appropriate patients and will consider Butrans
PPLPMDL0020000001	Stow	OH	44224	10/29/2014	Dr said he wanted to know more about Butrans because he's seeing a lot of the patients her refers to pain management back in his office with Butrans on. Reviewed attributes, dosing, titration, steady state, initiation, application sites and appropriate patients. Dr said he still won't write it much because Unity doesn't write narcotics for around the clock pain. I told dr I understand and to just continue referring appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44195	10/29/2014	Reviewed OxyContin/Butrans savings cards, Formulary grids and Initiation/Titration slider. Said she will continue to prescribe for appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44195	10/29/2014	Reviewed OxyContin Savings Cards, Formulary grids along with Butrans Med D coverage, Initiation/Titration, Said she will continue to prescribe for appropriate patients. Will discuss utilization with Team
PPLPMDL0020000001	Garfield Hts	OH	44125	10/29/2014	Quick Intro. Butrans 7 day transdermal CIII, OxyContin every 12hrs, 7 tablet strength, Said Ok, will continue to prescribe for appropriate patients, apgt request
PPLPMDL0020000001	Cleveland	OH	44111	10/29/2014	Reviewed dosing flexibility, titration and dose failure vs product failure and the need to titrate. Discussed efficacy and safety and then OxyContin as the option for patients needing a q12 oxycodone. Quick review of OxyContin savings cards,abuse deterrent characteristics along with Butrans 7 day transdermal, CIII, Said ok, will consider for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44135	10/29/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	10/29/2014	No new information learned on this call.
PPLPMDL0020000001	North Olmsted	OH	44070	10/29/2014	No new information learned on this call.
PPLPMDL0020000001	Stow	OH	44224	10/29/2014	Checked back with Jamie about stocking of the 7.5mcg Butrans. Jamie said 2 boxes were ordered and are now on the shelf. Discussed dosing flexibility and patient types appropriate. Reviewed OxyContin dosing and flexibility and conversions from IR oxycodone. Jamie said they dispense a lot of OxyContin and all the doses of Butrans.

PPLPMDL0020000001	Euclid	OH	44123	10/29/2014	Met briefly with pharm mgr Mike Bish. Left OxyContin pharmacists guide, asked Mike to review. Reinforced Butrans 5 strengths, with 7.5 most recent. Left BUTRANS NDC code brochure. Left Pharmacy Times Article.
PPLPMDL0020000001	Independence	OH	44131	10/29/2014	He thought that schedule change would increase use of OxyContin and possibly butrans but he hasn't seen that so far. Told him about new butrans dose and what I am talking to Doctors about regarding ER meds when pain is around the clock and he totally agrees.
PPLPMDL0020000001	Westlake	OH	44145	10/29/2014	No new information learned on this call.
PPLPMDL0020000001	Euclid	OH	44119	10/29/2014	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44303	10/29/2014	Reviewed the Butrans and OxyContin dosing flexibility and asked him if he will stock the 7.5 mcg? Rod said he will consider it because he has been dispensing more recently. Told him about the Helen profile and the start principles for OxyContin.
PPLPMDL0020000001	Fairlawn	OH	44333	10/29/2014	No new information learned on this call.
PPLPMDL0020000001	Berea	OH	44017	10/29/2014	No new information learned on this call.
PPLPMDL0020000001	Garfield Hts	OH	44125	10/29/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	10/29/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	10/29/2014	No new information learned on this call.
PPLPMDL0020000001	Independence	OH	44131	10/29/2014	No new information learned on this call.
PPLPMDL0020000001	Euclid	OH	44119	10/29/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	10/29/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	10/29/2014	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	10/29/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	10/29/2014	No new information learned on this call.
PPLPMDL0020000001	Garfield Hts	OH	44125	10/29/2014	Visited Pain mgmt dept (Samuel, Dalbir, Abraham) PC(Kohler, Topalsky) OxyContin and Butrans Initiation/Titration along with CIII piece
PPLPMDL0020000001	CLEVELAND	OH	44195	10/29/2014	Follow up with Troy per Dr. Peralta request, OxyContin savings cards along with Butrans Initiation/Titration, Said ok
PPLPMDL0020000001	Cuyahoga Falls	OH	44195	10/29/2014	Reviewed with tech, New Pharm mgr Steve was unavailable, Butrans/OxyContin Initiation/Titration, Butrans CIII, 7 day transdermal, Said she will relay info
					Discussed insight 18 and line of questioning from the insight. Dr said she doesn't write many IR opioids but said it does make things more difficult. I asked her to reassess her patients on hydrocodone and that some may be appropriate for the schedule 3 Butrans. Discussed dosing flexibility, need for titration and proper identification if patients in pain around the clock. Dr said she will continue to use and has had good success with it so far.
PPLPMDL0020000001					Reviewed OxyContin dosing, titration and q12 dosing of oxycodone.
PPLPMDL0020000001	Waterford	OH	45786	10/29/2014	I-Butrans clinical trials, dosing, titration, adverse events and boxed warning. OxyContin start principlesW-interested in writing Butrans but forgets about it
PPLPMDL0020000001	Waterford	OH	45786	10/29/2014	I-Butrans clinical trial, dosing, titration and boxed warning. OxyContin adverse events, boxed warning, dosing and titration.W-interested in writing Butrans but had not known much about it
	Akron	OH	44320	10/29/2014	I reviewed the indication for Butrans and told her she needs to first identify who is appropriate for the schedule 3, 7 day transdermal system. I asked her to keep an eye on who is in pain around the clock and ask for an increased dose of an IR opioid and are in pain. She said that's makes sense. Reviewed Helen profile and conversions. I asked her if that makes sense Monique said that it does and likes that its a week long patch and schedule 3. Reviewed copy cards and insurance.
PPLPMDL0020000001	Waterford	OH	45786	10/29/2014	I-Butrans clinical trials, dosing, titration, administration and managed-care. OxyContin managed-care and dosing.W-said he's interested in using Butrans
PPLPMDL0020000001	Akron	OH	44313	10/29/2014	Masked him how the hydrocodone scheduling change affect his office? Dr said they started requiring patients to come in to pick up their scrips since March. I told him that's great and asked him about refills. Dr said he was writing some refills but now everyone comes back. I asked him if he would reassess those patients and how some of them might be appropriate for q12 OxyContin? Dr said he knows but said he hasn't been writing many new ones and is starting to refer. Dr said he had to go and I told him Butrans remains a schedule 3 and if he would call in any ER opioid its the only one.
PPLPMDL0020000001	Akron	OH	44320	10/29/2014	Quick discussion about who is appropriate for Butrans and discussed the Helen profile. Dr said he did write one the other day for a Medicaid patients and it was covered. I told him that's great and reminded him about the Caresource PA and Medicare coverage. Asked him to keep OxyContin in his option list for those needing q12 oxycodone.
PPLPMDL0020000001	Euclid	OH	44117	10/29/2014	Lunch. Top office call. Repeat of hydrocodone insight. Oxycontin as option. Dr states he will write OxyContin, but step edits usually for morphine sulfate first. And prior auth for BWC. They are trying to get away from Medicaid patients, as they feel they are the "seekers" for illicit uses of opioids. They will continue commercial, workers comp, Medicare. Butrans discussion for BWC and easy Caresource Prior Auth. 5 strengths reinforced with 7.5 most recent. Asked for business today, this week. Dr reminds me that since he's not pain specialty, he tries to minimize the ER opioids he writes each week/month.
PPLPMDL0020000001	Cleveland	OH	44111	10/30/2014	No new information learned on this call.
PPLPMDL0020000001	Beachwood	OH	44122	10/30/2014	Talking to MA, Julie and receptionist about hydrocodone change and we were talking about how irritated the patients are and how inconvenient for them in the office. The doctor walked up as I was telling them about reassessing their patients in around the clock pain to see if current meds are adequate and some might be appropriate for ER meds like OxyContin or butrans. He said that he does not like transdermals and walked off. The girls told me that he doesn't see reps, that what just happened doesn't happen much. I left dosing and titration guides for both products. They did not want savings cards.
PPLPMDL0020000001	Tallmadge	OH	44278	10/30/2014	After discussing OxyContin dosing and appropriate patients I asked him if he's likely to use it and dr said very unlikely because he said that's for the specialists. I asked if the schedule 3 Butrans would be more likely and he said yes especially since hydrocodone is now a schedule 2. Reviewed dosing and how to identify appropriate patients like Helen.
PPLPMDL0020000001	Cleveland	OH	44113	10/30/2014	Reviewed Butrans Med D coverage, OxyContin savings cards, Said she will continue to prescribe for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44115	10/30/2014	Quick review of OxyContin every 12hours along with Butrans CIII, 7 day transdermal, Said Ok will continue to consider for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44195	10/30/2014	Quick review of OxyContin every 12hours, 7 tablet strengths, Along with Butrans for those patients requiring around the clock analgesia, Said he will continue to prescribe for appropriate patients said to schedule appt with Tomra-Admin to further discuss
PPLPMDL0020000001	Mogadore	OH	44260	10/30/2014	Discussed hydrocodone insight 18 and how it will impact his prescribing. Joe said its not easy but he has been referring more frequently. Discussed how he can identify appropriate patients for Butrans and used the Helen profile. Discussed how he can use the tramadol patient who is in pain around the clock and is asking for more or can't tolerate it. Joe agreed the tramadol patient is a good patient for it and said he just forgets about it.
PPLPMDL0020000001	Beachwood	OH	44122	10/30/2014	Reviewed dosing and attributes for Butrans. Dr said that since the schedule change, they have discussed trying to limit the IR meds to no more than 4 pills per day. If the patient needs more, that is when they will convert to ER meds if appropriate. He said that when he is trying to taper patient down from opioid, that is when he thinks of Butrans. We discussed butrans after Tramadol and he said that by the time they come to him they are usually already on multiple meds. He does think that he can find a place for butrans in his practice. He thinks that he is probably writing less oxycotin for insurance reasons. There are so many restrictions. He does believe that treating around the clock pain with an IR is often not ideal and patients get used to taking pills throughout the day. That is why for those reasons he prefers ER meds like oxycotin for appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44124	10/30/2014	Left with staff at front desk, for Dr. Casselberry: OxyContin conversion guide, Butrans initiation guide.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	10/30/2014	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	10/30/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	10/30/2014	No new information learned on this call.
PPLPMDL0020000001	Highland Heights	OH	44143	10/30/2014	No new information learned on this call.
PPLPMDL0020000001	Tallmadge	OH	44278	10/30/2014	Discussed with dr how to identify an appropriate candidate for Butrans. Reviewed indication and asked him to look for patients on tramadol who have pain around he clock or who can't tolerate tramadol. Reviewed dosing flexibility, how to convert and Helen profile. I asked if dr had Butrans in the E clinical works and he said he had all doses except the 7.5 mcg. I asked dr if he will reassess his tramadol and hydrocodone patients and use Butrans where appropriate? Dr said he will.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	10/30/2014	Spoke with Cindy at new choice pharmacy about stocking of Butrans 7.5 mcg and she has one box on the shelf. Cindy is filling out rebate form.
PPLPMDL0020000001	Euclid	OH	44119	10/30/2014	No new information learned on this call.
PPLPMDL0020000001	Beachwood	OH	44122	10/30/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	10/30/2014	Reviewed OxyContin/Butrans Initiation/Titration, PI's said he will consider, asked to book appt to further discuss.
PPLPMDL0020000001	Cleveland	OH	44115	10/30/2014	Reviewed w/Jodi OxyContin/Butrans Initiation/Titration, Said Ok
PPLPMDL0020000001	Cleveland	OH	44195	10/30/2014	Reviewed OxyContin/Butrans Initiation/Titration, PI's said he doesn't use opioids for treatment but will consider if appropriate
	Mogadore	OH	44260	10/30/2014	Opened with insight 18 and dr said that's is a serious pain to deal with those patients every month. I told him that I'm guessing that some of those hydrocodone patients might be appropriate for Butrans. Dr agreed. I told him that he's not using Butrans like he has in the past and he said he's referring more to pain management now. I told him the majority of patients referred to pain management are on higher doses of hydrocodone and Percocet. I reviewed the Helen profile and asked him to use for his tramadol patients in pain around the clock. Dr said that actually a pretty good idea and he's up for using Butrans there. Reviewed doses and 7.5mcg and dr said that he thinks that's a good addition so he can keep the dose low and the side effects low as well. Discussed copy cards.
PPLPMDL0020000001	Cleveland	OH	44115	10/30/2014	Reviewed with Dave RPH OxyContin abuse deterrent characteristics, 7 tablet strengths, Along with Butrans CIII, 7 day transdermal, said ok, but dispenses virtually no narcotics at this location
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	10/30/2014	Led with insight 18 and asked dr how he's dealing with seeing his hydrocodone patients each month? Dr said he takes it one patient at a time and write the 90 pills and then they come back for the next prescription. I asked him for those he reassesses who are either not tolerating hydrocodone or isn't efficacious to consider Butrans as a option for some of those patients. Dr asked about insurance coverage and I asked which plans are important? Dr said medical mutual and UHC. I told him about insurance and asked him when he evaluates his hydrocodone patients to ask himself if they have daily around the clock pain? Dr said ok.
PPLPMDL0020000001	Maple Heights	OH	44137	10/30/2014	Kim was very busy since she was the only one there, so it was just a quick into. They stock oxycotin but no butrans. Told her about messages we are talking to physicians about when pain is around the clock, some might be appropriate for ER meds. She agreed. Told her about butrans and introduced new dose. She thinks that is a great option
PPLPMDL0020000001	Akron	OH	44305	10/30/2014	Told dr that we have discussed the management of around the clock pain and the option of Butrans for some of those patients a lot over he last year. I told him that he has agreed that Butrans is a good option and he has found clinical success with it. Dr said that he had a patient in the hospital the other day with one on and tried to order it and its not on the hospital pharmacy. Dr said he just write a prescription for it. I asked dr what is preventing him from using Butrans as his go to ER opioid when his patients are failing tramadol? Dr said probably cost. Told him that he knows its covered really well and to continue using Butrans more frequently for his

	Beachwood	OH	44122	10/30/2014	Roberta said that since the schedule change, they have discussed trying to limit the IR meds to no more than 4 pills per day. If the patient needs more, that is when they will convert to ER meds if appropriate. She said that when she is trying to taper patient down from opiod, that is when she thinks of Butrans. I told her that is certainly an option, but how about before she switches them to an IR combo? Reviewed Helen as a possible patient type. She said that it makes sense. We spent time talking about patients and how they feel about around the clock pain and treating in 4-6 hour increments. We reviewed the START principles and q-2 dosing of oxycotin. She thinks that it might be appropriate for several patients IR meds.<font color=blue><b>CHUDAKOB's query on 11/12/2014</b></font>Kathy, looks like you had a good discussion. One thing I would like to point out is your use of the word "switch". While this is not compliance wrong by any means, you might gain more traction by discussing "when a patient needs a dose adjustment or a change in their medication." This is more in line with the way HCPs think. They usually don't "switch" to another med, but they do make dose adjustments or medication changes. Does this make sense?<font color=green><b>LARAWKA's response on 11/14/2014</b></font>Yes. Good point.<font color=blue><b>CHUDAKOB added notes on 11/16/2014</b></font>OK. Thanks!
PPLPMDL0020000001	Akron	OH	44333	10/31/2014	Reviewed OxyContin and Butrans attributes, dosing, titration and appropriate patient type selection. Loren said she does not want to get involved in pain management because she wants to focus on other medical issues. Loren said she will all the doctors to write opioids. I told her I understand however she will be confronted with it wether she wants to or not with someone who has legitimate,radiographic evidenced around the clock pain that requires her treatment. Loren said she understands and will deal with it then.
PPLPMDL0020000001	Lakewood	OH	44107	10/31/2014	No new information learned on this call.
PPLPMDL0020000001	Fairlawn	OH	44333	10/31/2014	Started off with insight 18 and asked him how its impacting his business? Dr said its been very hard on him and his staff because of the time and resources it takes to see them every month. I asked him if he sees them every month or they just come in to fill their scripts? Dr said he has to see them. I told him I'm hoping he determines if the patient is in around the clock pain and if the patient is complaining of tolerance or efficacy issues that he will consider using OxyContin or Butrans? Dr said he must make a change and that Butrans might be his solution because he can call it in and refill it which will save him a lot of time. I told him that's great to hear and dr said he wanted Butrans information to help him when he begins to switch. Discussed he Helen profile and told him not to wait until the patient goes on hydrocodone to make the switch to an ER opiod when they meet the indication for Butrans. Reviewed insurance plans, Caresource PA and BWC.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	10/31/2014	Spoke with Meghan a pharmacy tech and updates on dosing of Butrans along with 7.5 mcg dose. Meghan said they continue to only have about 5 patients in it and will stock once they see a script. I gave her the copy card information and how I'm telling my customers to identify appropriate patients.
PPLPMDL0020000001	University Hts	OH	44118	10/31/2014	No new information learned on this call.
PPLPMDL0020000001	Beachwood	OH	44122	10/31/2014	No new information learned on this call.
PPLPMDL0020000001	Berea	OH	44017	10/31/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44130	10/31/2014	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44304	10/31/2014	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	10/31/2014	Reviewed dosing flexibility for Butrans and OxyContin and spoke about new 7.5 mcg Butrans dose. Was told that they don't have it in stock but have been seeing more of it. I asked if they would stock and was told once they see a script.
PPLPMDL0020000001	Cleveland	OH	44125	10/31/2014	Reviewed with Emily OxyContin/Butrans, said she thinks Butrans is great option, but patient acceptance is a challenge. Will discuss when applicable
PPLPMDL0020000001	Parma	OH	44134	10/31/2014	Almee was happy to hear there is rep in the area. She told me that the doctors writing hasn't changed if anything, they are writing larger quantities at one time which is not what was supposed to happen according to her. She thinks the ER message makes sense. She wants savings cards for both products. Told her about appropriate butrans patient ( after tramadol) she agreed And hopes docs start writing it more often
PPLPMDL0020000001	Cleveland	OH	44111	10/31/2014	No new information learned on this call.
PPLPMDL0020000001	Berea	OH	44017	10/31/2014	Insight 18. Talked about the complications, if any, this has caused to his office. We talked about his feelings about writing scheduled 3 and 2 opioids for treating chronic pain. Dr stated that he will still treat those appropriate regardless of the scheduling. Reviewed the Norco patient appropriate for OxyContin. Reviewed the indication and the over 40mg Norco patient uncontrolled. Dr said he hasn't seen any uncontrolled recently. I asked if it was reasonable for patient to be given OxyContin if they were and met our indication. Dr said sure. I said just curious...what is the trigger signal that suggests a patient may be appropriate for an extended release product? Dr said it depends. Dr said he will wait till a patient is taking more than 3 doses a day chronicle before moving to a product like OxyContin. I said why wait so long. Dr said habit. Reviewed the dosing of OxyContin and highlighted managed care. Talked about under 40mg Norco for Butrans patients, per our indication, highlighted scheduling, refills, and coupons.
PPLPMDL0020000001	Cleveland	OH	44114	10/31/2014	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	10/31/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	10/31/2014	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	10/31/2014	No new information learned on this call.
PPLPMDL0020000001	Fairlawn	OH	44333	10/31/2014	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	10/31/2014	Dr in new office in Cuyahoga falls and saw him as he was ready to leave for the day. Told him about hydrocodone being rescheduled and that he has some decisions to make ant those patients and if they have daily, around the clock pain he has OxyContin and the schedule 3 Butrans as variable options. Dr said alright. Nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44130	10/31/2014	No new information learned on this call.
PPLPMDL0020000001	Berea	OH	44017	10/31/2014	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44310	10/31/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44130	10/31/2014	Renee doesn't see oxycotin but sees butrans periodically. Told her message about ER meds we are talking about. She thinks that some doctors are writing more quantity of ER meds now that scheduling of hydrocodone has changed. She thinks we are giving great information and hopefully the doctors listen.
PPLPMDL0020000001	Fairlawn	OH	44333	10/31/2014	Started off with insight 18 and asked dr how the rescheduling of hydrocodone is changing her practice? Dr said its making it more difficult and she doesn't want to write anything for pain anymore even though she knows its not possible. Dr said the option of Butrans is very appealing and want to use it as an option. I reviewed the conversions, titration, and Helen profile. I told her that she needs to also consider OxyContin as a good option for patients with daily, around the clock pain. Discussed all attributes and conversions from IR oxycodone.
PPLPMDL0020000001	Garfield Hts	OH	44125	10/31/2014	Discussed treating around the clock pain in 4-6hr increments, Reviewed OxyContin abuse deterrent characteristics every 12hours, 7 tablet strengths along with Butrans 7 day transdermal, CII, Initiation/Titration for those patients requiring around the clock analgesia, Said Ok will consider for appropriate patients, Asked for 1 patients this afternoon, said he will try
PPLPMDL0020000001	Cleveland	OH	44113	10/31/2014	Quick review of Butrans Initiation/Titration along with OxyContin every 12hours, said ok will be out of town the next few weeks
PPLPMDL0020000001	Cleveland	OH	44125	10/31/2014	Reviewed with Sarah, OxyContin/Butrans Initiation/Titration, said ok will continue discuss if appropriate
PPLPMDL0020000001	Garfield Hts	OH	44125	10/31/2014	Discussed treating around the clock pain in 4-6hr increments, Reviewed OxyContin abuse deterrent characteristics every 12hours, 7 tablet strengths said he is very comfortable prescribing along with Butrans 7 day transdermal, CII, Initiation/Titration for those patients requiring around the clock analgesia, Med D coverage Said Ok will consider for appropriate patients, Asked for 1-2 patients, said he will consider
PPLPMDL0020000001	Berea	OH	44017	10/31/2014	Hydrocodone insight. Dr said he treats so few it wouldn't matter or him to see a few extrapatie ts a. I to. Dr said price is the biggest reason for picking opioids for his patients with pain and especially chronic pain. We talked about how many generics do they have to fail before a product like OxyCotin or Butrans come his mind, dr said rarely.<font color=blue><b>CHUDAKOB's query on 11/13/2014</b></font>Lisa, can you please explain what this call note says?<font color=green><b>BARTOLI's response on 11/17/2014</b></font>Dr said he treats very few pain patients so the schedule change won't affect him or his office.<font color=blue><b>CHUDAKOB added notes on 11/19/2014</b></font>OK. Thanks for the clarification.
PPLPMDL0020000001	Broadview Heights	OH	44147	11/3/2014	Brief discussion. Doctor will only be practicing at this location from now on. Reviewed butrans dosing, titration, new dose and quick look at Scott profile. Asked him to look for a patient like this for Butrans. As he left I mentioned that oxycotin is still a schedule 2 q12 ER medication, and might be appropriate for some of his patients.
PPLPMDL0020000001	Broadview Heights	OH	44147	11/3/2014	Brief discussion. Doctor will only be practicing at this location from now on. Reviewed butrans dosing, titration, new dose and quick look at Scott profile. Asked him to look for a patient like this for Butrans. As he left I mentioned that oxycotin is still a schedule 2 q12 ER medication, and might be appropriate for some of his patients.
PPLPMDL0020000001	Cleveland	OH	44125	11/3/2014	Saw Dr. in hallway, Quick review of OxyContin every 12hour, abuse deterrent characteristics along with Butrans CII, 7 day transdermal, said he is referring mostly to pain mgmnt, but will keep in mind,nor further info learned.
PPLPMDL0020000001	Strongsville	OH	44136	11/3/2014	She likes oxycotin and thinks it works very well. She likes the q12 dosing for her patients in around the clock pain. She typically chooses it for older patients. We reviewed the fda guidance and abuse deterrent characteristics which she was impressed with. Regarding butrans, she is not a fan of patches. She asked about the patients who swim for therapy and how it would stay on them. I told her it is different for everyone but that prolonged periods in the water have the potential to affect adhesion but that they could use medical tape around the edges to help. He viewed PAm as an appropriate butrans patient. Mmshe said she may keep it in mind.<font color=blue><b>CHUDAKOB's query on 11/14/2014</b></font>Kathy, Where is the fair balance in this call call note regarding abuse-deterrent technology?<font color=green><b>LARAWKA's response on 11/14/2014</b></font>Sorry. It seems redundant to put it in notes when I always say it, assume that it is understood but I now know from other call note queries that I still have to type it out. Hope that I have now fixed this omission for any other call notes. Please do know that I always do provide the fair balance when discussing the abuse deterrent properties.<font color=blue><b>CHUDAKOB added notes on 11/16/2014</b></font>I believe this, but others who read the notes may not. Each call is an individual call and therefore it needs to be included in every call note. Thanks!
PPLPMDL0020000001	Cleveland	OH	44125	11/3/2014	Talked with Josh, RPH, Reviewed OxyContin/Butrans CII, 7 day transdermal, Said no changes seen, but will consider on recommending to appropriate patients
PPLPMDL0020000001	Cleveland	OH	44114	11/3/2014	Reviewed OxyContin abuse deterrent characteristics every 12hours along with Butrans CII, 7 day transdermal, Said ok will continue to prescribe for appropriate patients, Asked John for assistance in reminding Dr.
PPLPMDL0020000001	Cleveland	OH	44130	11/3/2014	Stopped in as a joke to ask him how often I have to come in to remind him to think of butrans for appropriate patients (since I was just in end of last week). He smiled and said this is too often. He said he promises to think of butrans. I reminded him while not forgetting about oxycotin....he got a kick out of it.
PPLPMDL0020000001	Rocky river	OH	44116	11/3/2014	Opened w hydrocodone insight. Dr said new wsp policy they can't be called in anymore and all hand picked up but can have refills. She said he has lost some patients that don't want to drive far for monthly visits. We talked about an opportunity to evaluate patients and how well their medication is doing for them. Talked about the uncontrolled pain patient per our indication. Dr agreed that extended release options should be thought about earlier then what they are she said. Asked what was her trigger signal for when they are ready for an atc choice. Dr said at least three doses a day chronically and if they need more medication after three she will turn to a extended release product. We talked about what was the up side to dosing in 4 to 6 increments every month. Dr said only if cost was an issue. I said what...how much is the breaking decision on what is too much? She said Nader ten for med d and Nader 20 for commercial patients. Talked about abuse potential for both products reviewed managed care, dr said she didn't realize we had Medicare part d or caresource coverage like we did. Talked about Butrans no first pass and no dose adjustment for elderly. Talked about what the downsides are using a week patch threat Chronic pain. Dr said cost and possible rash. Showed the side effect profile of core aid and highlighted where patch goes and rotation of patch not going back to same sight for 21 days. Dr Agreed to find one Norco appropriate patient for Butrans this wk.
PPLPMDL0020000001	Cleveland	OH	44125	11/3/2014	No new information learned on this call.
PPLPMDL0020000001	Rocky River	OH	44116	11/3/2014	No new information learned on this call.



PPLPMDL0020000001	Cleveland	OH	44125	11/3/2014	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	11/3/2014	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	11/3/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	11/3/2014	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	11/3/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	11/3/2014	Hydrocodone insight. Dr said she really uses opioids as an allergist. I said when would she for chronic pain and the dr explained. Reviewed indication of oxycontin and dosing. Reviewed Butrans and dosing. Gave fair balance because of the potential for respiratory depression and those with severe pulmonary disease.
PPLPMDL0020000001	Cleveland	OH	44130	11/3/2014	Asked doctor if he has found a butrans patient yet? He said not yet. Reviewed Helen as a possible patient type he should be looking for. He is not happy with tramadol and mentioned a patient who just this morning wanted more tramadol and is already taking 4 per day. I told him that patient might be appropriate. He sat and looked at the chart and said that he may. He was concerned about coverage. Reviewed formulary and dosing options and titration. Mentioned that oxycontin is still q12, CII ER option for a few patients.
PPLPMDL0020000001	Strongsville	OH	44136	11/3/2014	Talked to Samantha about messages we are talking to physicians about when ER meds might be appropriate. She agreed. She stocks both products. Reviewed butrans dosing and titration and new dose.
PPLPMDL0020000001	Cleveland	OH	44103	11/3/2014	Reviewed with Amy, OxyContin/Butrans Initiation/Titration, CIII- 7 day transdermal, Said ok will be aware of opportunities to recommend
PPLPMDL0020000001	Lakewood	OH	44107	11/3/2014	Spoke to Zack the pharmacist, we talked about the hydrocodone insight and he said it hasn't been a problem that they are stocking it. Reviewed dosing, nasked him how are most scripts written for pain? He said 1 pill every 4 to 6 hours as needed. He said it can't have an or as needed cause that would be a separate order. Zack said he would call the dr back if he saw it written that way. We talked about dosing OxyCotin and review Butrans dosing and strengths. He said he won't be ordering Butrans because there is just one patient using it currently. Review abuse potential of opioids and warned about respiratory depression.
PPLPMDL0020000001	Westlake	OH	44145	11/3/2014	Hydrocodone insight. Dr said he is right out of residency so he has no experience w chronic pain or treating w opioids yet. Reviewed indication of OxyContin and asked hi. What he felt atc was in terms of treating pain. Dr said several times a day...even 6 doses a day. Dr said he would start with one dose every 4 to 6 hours. I asked if they are instructed to set an alarm for the early hours. Dr said no. I said how can they follow those orders then? Dr said well if they are asleep they aren't in pain. I said so they don't wake up on their own from pain? He said maybe. Dr said if it was a problem wouldn't the patients ask for something else. I said maybe they do or maybe they don't know what other options are there for them. Talked about indications. Patient over 40mg total norco...chronically for OxyCotin and under 40mg total for Butrans. Reviewed Butrans dosing. Steady state and reviewed abuse potential and potential for respiratory depression. Showed the side effect profile using core aid. Dr said he did a rotation w dr, kabbarra.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	11/4/2014	Told dr that I wanted her to focus on her hydrocodone patients coming back in for refills and to ask herself if they are tolerating it or are asking for more and have pain around the clock. Dr said that makes sense and will try. Nothing else learned
PPLPMDL0020000001	Cleveland	OH	44113	11/4/2014	Discussed Butrans, 7 Day transdermal, CIII, Initiation/Titration, along with OxyContin every 12hours, Said she will consider for appropriate patients,
PPLPMDL0020000001	Cleveland	OH	44102	11/4/2014	Reviewed OxyContin every 12hours along with Butrans, 7 day transdermal, CIII, Initiation/Titration, Formulary. Said he will consider for appropriate patients.
PPLPMDL0020000001	Mayfield Village	OH	44143	11/4/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44106	11/4/2014	No new information learned on this call.
PPLPMDL0020000001	Mayfield Heights	OH	44124	11/4/2014	Quick call with pharmacist Giovanni. Discussed, left updated Butrans (2) patient guides; Butrans pharmacist s' guide. Left OxyContin savings card sell sheet.
PPLPMDL0020000001	Mayfield Heights	OH	44124	11/4/2014	Met with med asst, front window. Left OxyContin savings sell sheet, slim limb. Left Butrans 7.5 brochure and reinforced 5 strengths. Discussed, left about (7) Butrans patient guides.
PPLPMDL0020000001	Cleveland	OH	44109	11/4/2014	No new information learned on this call.
PPLPMDL0020000001	Mayfield Village	OH	44143	11/4/2014	Met with med asst at front window. Dr Petroff off today, but back in tomorrow WED 11/5. Discussed OxyContin, Butrans as ER opioid options for patients.
PPLPMDL0020000001	Highland Heights	OH	44143	11/4/2014	No new information learned on this call.
PPLPMDL0020000001	East Cleveland	OH	44112	11/4/2014	Reviewed with Latoya RPH, OxyContin/Butrans, new prescribers in bldg, Said she will recommend if/when appropriate
PPLPMDL0020000001	Hudson	OH	44236	11/4/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44106	11/4/2014	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44310	11/4/2014	Dr said he had a patient yesterday that he wanted to switch to Butrans and express scripts was fighting him on approving it. Shar also said that she discussed the patients recent failures which have been tramadol, hydrocodone and fentanyl. Shar said the patient was approved. Dr said that he wishes it wasn't so difficult. I told him its not Butrans but insurance companies mostly want to make it difficult to approve ANY branded medicines. I asked for continued business and to remember the 7 flexible doses of OxyContin and titration every 1-2 days.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	11/4/2014	Spoke with Kyle and discussed the dosing flexibility with Butrans and discussed he new 7.5 mcg dose and asked him if he would stock it? Kyle said that he doesn't fill enough to justify ordering it. Kyle said he gets scripts but has patients that complain of a \$20 copay so it doesn't get filled. I told him I understand and reviewed patient types and insurance coverage. Reviewed OxyContin dosing and titration along with abuse deterrent characteristics from pgs 14-15 in the MVA.
PPLPMDL0020000001	Hudson	OH	44236	11/4/2014	Spoke with Beth the pharmacist and reviewed dosing and titration for Butrans and OxyContin. I asked her about how much dispensing of Butrans she is dispensing and she said very little. Discussed 7.5 mcg and OxyContin OxyContin 7 doses.
PPLPMDL0020000001	Hudson	OH	44236	11/4/2014	Showed dr the Helen profile and told him to reassess his patients on it that either can't tolerate it or in pain around the clock and he's thinking of titrating or moving to another IR opioid. Dr said he sure likes that's its still a schedule 3 and he can call it in and refill. Told dr to also keep OxyContin in mind for those patients in pain around the clock on Percocet.
PPLPMDL0020000001	Cleveland	OH	44103	11/4/2014	Reviewed with Brandon RPH OxyContin every 12hours, along with Butrans 7 day transdermal, Reaccessing patients and CIII. Said Ok will relay info to staff
PPLPMDL0020000001	Cleveland	OH	44106	11/4/2014	Reviewed OxyContin every 12hours, Tablet strengths along with Butrans 7 day transdermal, for those patients requiring around the clock analgesia, Formulary grids, savings cards. Will continue to prescribe OxyContin and has a few patients in mind for Butrans. Will follow.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	11/4/2014	Dr and Liz said they are having issues with buckeye not paying for OxyContin. Liz said that she is having a peer to peer set up because of previous failures. Discussed covered patients for OxyContin and Butrans and asked him to so try it in his hydrocodone patients he's considering moving to Percocet.
PPLPMDL0020000001	Cleveland	OH	44106	11/5/2014	No new information learned on this call.
PPLPMDL0020000001	Bedford	OH	44146	11/5/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	11/5/2014	Reviewed Butrans Initiation. Titration, along with OxyContin abuse deterrent characteristics, said ok will consider for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44115	11/5/2014	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44319	11/5/2014	No new information learned on this call.
PPLPMDL0020000001	Garfield Hts	OH	44125	11/5/2014	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44320	11/5/2014	I asked dr Bonyo how the rescheduling of hydrocodone is affecting his business? Dr said its making it harder and that he doesn't have time to see all them. I asked him how his most recent patient on Butrans is doing?. Dr said that they are doing well and like it. I told him that I want him to reassess his hydrocodone patients and if its intolerable for them or complain of being in Pain around the clock to use Butrans for those patients. Dr said he's glad I reminded him of that and will write more Butrans. Told him again about the Caresource PA.
PPLPMDL0020000001	Cleveland	OH	44195	11/5/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	11/5/2014	No new information learned on this call.
PPLPMDL0020000001	Euclid	OH	44117	11/5/2014	Met with med asst Lori. Checked in to see if they need patient education, savings cards. Discussed Oxycontin, Butrans as options for patients that meet ER opioid indication. Lori states no matter what the schedule of drug is, they have patients come in every 30 days to pick up in person. Discussed, left (3) Butrans patient guides. Reinforced 5 strengths, dosing flexibility.
PPLPMDL0020000001	Westlake	OH	44145	11/5/2014	Hydrocodone insight. Discussed the two patients dr had on Butrans and he said they were over 65 and previously dosed 4 or 5 times a day from norco. We talked about the Initiation guide for Butrans. Asked him his hesitation for Butrans in patients under 65 years of age and the dr said patients like taking their pills. We reviewed indication. Also covered oxycontin dosing.
PPLPMDL0020000001	Valley View	OH	44125	11/5/2014	Reviewed with Aaron OxyContin/Butrans, said he will continue to relay info to colleagues
PPLPMDL0020000001	Cleveland	OH	44195	11/5/2014	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	11/5/2014	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44312	11/5/2014	No new information learned on this call.
PPLPMDL0020000001	Bedford	OH	44146	11/5/2014	Quick call, he was in a rush. As he sees his patients in around the clock pain and assesses their pain control, to keep in mind that ER meds are appropriate for many of them. Quickly mentioned reminder about new dose of butrans and formulary sheet.
PPLPMDL0020000001	Akron	OH	44320	11/5/2014	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44312	11/5/2014	Short call and asked him if he would consider OxyContin for those he would treat who are in pain around the clock on Percocet? Dr said he would rather refer out than write OxyContin. Told him to at least write Butrans for those patients in pain around the clock and showed him the new dosing card.
PPLPMDL0020000001	Akron	OH	44333	11/5/2014	Dr told me that he received information from Purdue about an adverse report he had from Butrans and hallucinations, dr said he's going to fill out information and send it back. Dr said it took the patient almost 15days for buprenorphine to clear her system. Dr asked about another patient he has on fentanyl and wants to put him on Butrans but the patient is low in one and asked me about the patient assistance program. I gave dr the information from the Purdue website and he gave to the patient to see if he qualifies. Asked dr to continue OxyContin where appropriate.
PPLPMDL0020000001	Bedford	OH	44146	11/5/2014	Nancy was surprised that butrans didn't take off when it launched. She thinks it is a great option for patients in around the clock pain as an alternative to taking many pills. She thinks that doctors should be using ER for patients in around the clock pain. She got a phone call, then lined formed so she had to cut out conversation short.
PPLPMDL0020000001	Akron	OH	44312	11/5/2014	Told dr about insight 18 and then asked him what he's doing to manage those patients each month? Dr said he's taking it one at a time. I asked him if any of those patients might meet the indication for Butrans and have pain around the clock? Dr said maybe but he really wants to try and not write any more narcotics. I told him if he's refilling he's writing them! Nothing else learned.
PPLPMDL0020000001	Independence	OH	44131	11/5/2014	Started with hydrocodone insight 18. He said a lot is chNging because the government, FDA, DEA, no one want the doctors writing opioids, particularly CII narcotics because of the abuse potential, addiction and heroin problem. He is limiting his use and trying to find other alternative, but there isn't much to choose from. He thinks with continued reminders butrans is a very logical choice because of scheduling and the fact that it is not a pill. I reminded him that it can still be abused, reviewed dosing, titration, possible patient types like scott and that patients can supplement with opiod or non opiod meds. He thinks he will begin to write it. He is however staying away from oxycontin even though he believes it is appropriate for many patients in around the clock pain.
PPLPMDL0020000001					

PPLPMDL0020000001	Independence	OH	44131	11/5/2014	Said he doesn't talk to reps anymore but came in to get his food while I talked to Doctor Jack. He heard us talking about how they are trying to stay away from CII's like oxycontin and IR meds but believes that an ER med like butrans is an appropriate c3 option for patients in around the clock pain. He did take a titration guide.
PPLPMDL0020000001	Cleveland	OH	44195	11/5/2014	Quick review of Butrans 7 day transdermal, CII along with OxyContin abuse deterrent characteristics every 12hours, Said Ok will consider, email appt request.
PPLPMDL0020000001	Parma	OH	44129	11/6/2014	Quick window. Told him I am leaving him information about schedule 3 butrans. An appropriate option for his patient in around the clock pain. He may want to consider this after tramadol and before schedule 2 Vicodin or Percocet. He just said ok. Oxycontin is certainly an option for some also....
PPLPMDL0020000001	Barberton	OH	44203	11/6/2014	No new information learned on this call.
PPLPMDL0020000001	Tallmadge	OH	44278	11/6/2014	Started off with insight 18 and asked him what he has in place to deal with it? Dr said he's tried to write OxyContin a number of times because he likes that its abuse deterrent and it works but said that insurance doesn't want to pay for it because they want ER Morohine or MS Contin. I told him I understand and that if there is failure on any of those it would then be an opportunity for OxyContin. Dr agreed. Discussed Butrans attributes, dosing, indication, initiation, conversions and Helen profile. Dr said he will try it.
PPLPMDL0020000001	Stow	OH	44224	11/6/2014	Spike with Holly and discussed appropriate patients for OxyContin and Butrans. Holly said she understands and that a vast majority of patients getting hydrocodone and oxycodone are taking them around the clock and should be on an ER opioid. I asked if she would at least tell the paints to ask their doctors a Butrans or OxyContin? She said its tricky but she'll try.
PPLPMDL0020000001	Tallmadge	OH	44278	11/6/2014	Led with insight 18 and asked her her thoughts on using opioids for patients in daily, around the clock pain. Dr said honestly she doesn't feel comfortable prescribing anything for pain because it just causes so many problems. Discussed the Helen profile for Butrans and asked her if it would be like a patient she might have? Dr said maybe but said most are not motivated to get their pain under control and aren't working. Most have Medicaid and just what pills. Dr said she likes to refer but sees where Butrans would fit and likes that its a schedule 3. Reviewed OxyContin doses and appropriate patient selection.
PPLPMDL0020000001	Cleveland	OH	44106	11/6/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44112	11/6/2014	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	11/6/2014	He said he found a butrans patient, insurance paid for it and so far so good. He does need reminders because butrans isn't the first thing he thinks of. He is staying away from oxycontin.
PPLPMDL0020000001	Barberton	OH	44203	11/6/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland Hts	OH	44118	11/6/2014	No new information learned on this call.
PPLPMDL0020000001	Stow	OH	44224	11/6/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland Hts	OH	44118	11/6/2014	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	11/6/2014	My lunch cancelled, was hoping Dr Kushnar was available. She wasn't and said that she has really been trying to refer out pain patients. I told her that some might not want to leave her practice but still have around the clock pain and a few might be appropriate for ER meds like oxycontin or Butrans. She said that she will keep them in mind.
PPLPMDL0020000001	Barberton	OH	44203	11/6/2014	No new information learned on this call.
PPLPMDL0020000001	C. Falls	OH	44223	11/6/2014	Spoke with Cindy about their dispensing of Butrans and who is writing. Cindy said they still aren't seeing much but have all doses in stock and ordered the 7.5 mcg. Cindy said they sometimes see them from Ali and sable along with a few from Higley. Discussed OxyContin dosing and copy cards.
PPLPMDL0020000001	Barberton	OH	44203	11/6/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44103	11/6/2014	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	11/6/2014	Doctor said that he is starting to think about ER meds a bit more for his pain patients Doctor said he has tried butrans with success and it was covered by the insurance company. He said I just have to keep reminding him.
PPLPMDL0020000001	Cleveland Heights	OH	44118	11/6/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44106	11/6/2014	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	11/6/2014	Spoke with pharmacist Kyle about Butrans and OxyContin dosing and titration. Discussed starting doses of Butrans and titration with 7.5 mcg. Kyle said they have all doses except the 7.5 and 15mcg. I asked if he would order the 7.5 and gave him rebate info. He said they have to keep inventory tight so no.
PPLPMDL0020000001	Cleveland Hts	OH	44118	11/6/2014	Reviewed OxyContin/Butrans with Dave RPH mgr, abuse deterrent characteristics every 12hours along with Butrans CII, 7 day transdermal, Said Ok will recommend if appropriate.
PPLPMDL0020000001	Tallmadge	OH	44278	11/6/2014	Led with insight 18 and asked what he's doing to manage the possible influx of patients coming in to get their hydrocodone prescriptions and you having to see them? Dr said he don't like it and will try to wither refer more or write products like Butrans. Dr said that the Butrans that he refilled for a pain dr and patient came back and he refilled it again and the patient said she loves it. Reviewed conversions and Morohine equivalents, dosing and initiation. Discussed Helen profile and studies. Reviewed OxyContin dosing, abuse deterrent properties, who is appropriate for it through MVA page 5.
PPLPMDL0020000001	Cleveland Hts	OH	44118	11/6/2014	Reviewed with Opey-OxyContin abuse deterrent characteristics every 12hours along with Butrans for those patients requiring around the clock analgesia, CII, 7 day transdermal. Said she will recommend if appropriate
PPLPMDL0020000001	Westlake	OH	44145	11/7/2014	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	11/7/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	11/7/2014	No new information learned on this call.
PPLPMDL0020000001	Beachwood	OH	44122	11/7/2014	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44307	11/7/2014	Spoke with pharmacist Jeff about OxyContin and Butrans dosing, attributes, conversions and appropriate patients. Jeff said that he has dispensed a couple of Butrans recently from in house physicians and didn't remember their names.
PPLPMDL0020000001	Cleveland	OH	44113	11/7/2014	Reviewed Butrans Initiation/Titration, along with OxyContin abuse deterrent characteristics, said she will continue prescribe Butrans for appropriate patients, no change to OxyContin per practice protocol-font color=blue><b>CHUDAKOB's query on 11/14/2014</b></font>Mark, where is the fair balance when discussing the abuse deterrent characteristics?<font color=green><b>GUTKOMA's response on 11/14/2014</b></font>Reiterated with Deb that both OxyContin and Butrans exposes patients and other users to the same risks of opioid abuse, misuse and addiction<font color=blue><b>CHUDAKOB added notes on 11/16/2014</b></font>OK. This has to be included in all call notes. Thanks!
PPLPMDL0020000001	Cleveland	OH	44113	11/7/2014	Reviewed Butrans Initiation/Titration, dosing along with OxyContin abuse deterrent characteristics, Said she will continue to prescribe for appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44113	11/7/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	11/7/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44124	11/7/2014	Met with med asst at front desk. Reinforced OxyContin, then Butrans, as single entity, ER opioids for patients with daily, atc, long term pain - reinforced Butrans 5 strengths. Left literature for Dr. Casselberry.
PPLPMDL0020000001	Cleveland	OH	44113	11/7/2014	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	11/7/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44105	11/7/2014	No new information learned on this call.
PPLPMDL0020000001	South Euclid	OH	44121	11/7/2014	Met with med asst at front desk. Introduced OxyContin, then Butrans as single entity, ER opioids, indicated for (verbatim indication). Left literature for both products for Dr. Flagg.
PPLPMDL0020000001	Stow	OH	44224	11/7/2014	Spoke to technician Mary about Butrans attributes, dosing and conversions. Mary said she doesn't know about it and didn't think they have filled it. Reviewed Helen profile and then OxyContin dosing and conversions.
PPLPMDL0020000001	Westlake	OH	44145	11/7/2014	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44319	11/7/2014	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44305	11/7/2014	Spoke with dr about where and when he is prescribing OxyContin and what other products he finds effective for cancer pain? Dr said he really likes OxyContin and will usually go to that first after hydrocodone or OxyContin. Spoke with him about patients over 40mg of hydrocodone may be appropriate and patients on Percocet. Reviewed conversions and dosing. Reviewed Butrans again and asked him to try it clinically for his hydrocodone patients under 40mg a day.
PPLPMDL0020000001	Westlake	OH	44145	11/7/2014	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	11/7/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	11/7/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	11/7/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	11/7/2014	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	11/7/2014	Dr spoke about writing three Butrans prescriptions is morning and all of them had commercial insurance so he have them copy cards. I told dr that's great to hear and dr said all of them wanted more hydrocodone and that he won't give them more so he switches to Butrans. Reviewed conversions and dosing. Discussed OxyContin as an option as well for patients over 40mg/day.
PPLPMDL0020000001	Akron	OH	44319	11/7/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44109	11/7/2014	Reviewed with Jag Butrans/OxyContin Initiation/titration, 7.5mcg/hr. Said ok will relay info
PPLPMDL0020000001	Beachwood	OH	44122	11/7/2014	Insight 18. She said it's been a bit of extra work but they are ok now. We discussed reassessing patients. She Said the hydrocodone schedule change has helped them to rethink some of their prescribing. Patients should be on ER meds for around the clock pain ideally. She said it doesn't always work that way though. Reiterated the dose options for oxycontin and informed her of new dose of butrans. She likes the results she sees from oxycontin and butrans and wants savings cards for both.
PPLPMDL0020000001	South Euclid	OH	44121	11/7/2014	Met with tech. Left OxyContin savings sell sheet. Butrans pharmacists' guide. Quick call, very busy, no new findings since last visit.
PPLPMDL0020000001	Akron	OH	44313	11/10/2014	I told dr that when he told me last time that he doesn't want to write narcotics how things are going with his patients on hydrocodone seeing them every month? Dr said I have a good point because its frustrating. I told dr I'm guessing that he has some that may be appropriate for either OxyContin if they are over 40mg a day or the schedule 3 Butrans under 50mg a day. Dr said he may consider converting so e to Butrans. Nothing else learned.
PPLPMDL0020000001	akron	OH	44333	11/10/2014	Dr told me that he started a patient on Butrans this morning who was taking 10mg of hydrocodone q6. Dr said that the patient is coming from Cleveland and he is just bridging the gap between the patient going to see Lababidi. I told dr that's great and at least he made the decision to initiate the ER opioid. Reminded dr of conversions and he said he started on the 10mg Butrans and knows that the patient may need titration.
PPLPMDL0020000001	Cleveland	OH	44195	11/10/2014	Reviewed OxyContin every 12hours, 7tablet strengths, abuse deterrent characteristics along with Butrans 7 day transdermal, CII, Initiation/Titration, Said he will consider for appropriate patients,
PPLPMDL0020000001	Mayfield Village	OH	44143	11/10/2014	Quick window. Left literature for Dr. Krishnan. Medicare D pull through, OxyContin and Butrans. Reinforced ability to call/fax in Butrans with refills.
PPLPMDL0020000001	Cleveland	OH	44113	11/10/2014	Quick review of Butrans/OxyContin with Tech. Said she will relay info, They will be moving dnstairs to perm. location by the end of the month
PPLPMDL0020000001	Cleveland	OH	44195	11/10/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	11/10/2014	No new information learned on this call.
PPLPMDL0020000001	Lyndhurst	OH	44124	11/10/2014	Front window, left literature for Dr. Goldner. Med D pull through, butrans, then OxyContin.

	Lyndhurst	OH	44124	11/10/2014	Dr Isakov complained of a few patients quoted over \$300 monthly for Butrans. Otherwise, all the other patients on Butrans therapy are doing well. Quick Oxycontin mention when Butrans not appropriate and patient meets ER opioid indication.
PPLPMDL0020000001					
PPLPMDL0020000001	Lyndhurst	OH	44124	11/10/2014	No new information learned on this call.
PPLPMDL0020000001	Lyndhurst	OH	44124	11/10/2014	Quick hallway. BWC, Med D mention after discussing Helen as appropriate for Butrans 5 mcg hr start. OR, Helen also appropriate for Oxycontin 10 mg start. Continued conversation of hydrocodone combo patients, who are coming in every 30 days now, and if they need change in therapy; consider Butrans OR Oxycontin. Dr states he will.
PPLPMDL0020000001					
PPLPMDL0020000001	Cleveland	OH	44113	11/10/2014	No new information learned on this call.
PPLPMDL0020000001	Lyndhurst	OH	44124	11/10/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	11/10/2014	No new information learned on this call.
PPLPMDL0020000001	Lyndhurst	OH	44124	11/10/2014	Front window. Left literature for Dr. Reed. Med D pull through and reminder, 5 strengths for Butrans. Can call/fax in with refills.
PPLPMDL0020000001	Cleveland	OH	44102	11/10/2014	Reviewed with Tan OxyContin/Butrans said ok no new info learned
PPLPMDL0020000001	Akron	OH	44333	11/10/2014	Short discussion with dr and Wendy up front. I told dr about insight 18 and then asked him if its impacting his business. Dr said he's just taking it one patient at a time and then Wendy said its certainly impacting them up front because they are trying to schedule them in which is tough. I asked dr to just consider The schedule 3 Butrans or OxyContin for those patients who meet the indication and read him the OxyContin indication. Dr said ok. Wendy and Marsha both said they will ensure to remind him about Butrans being a schedule 3 that he can call in and refill.
PPLPMDL0020000001					
PPLPMDL0020000001	Richmond Hts	OH	44143	11/10/2014	No new information learned on this call.
PPLPMDL0020000001	Mayfield Heights	OH	44124	11/10/2014	Dr Roxana not in office today. Met with med assts to discuss options for patients coming in each month to pick up rx, especially those on hydrocodone combos: 2 options; OxyContin or Butrans. Med D pull through.
PPLPMDL0020000001	Parma	OH	44134	11/10/2014	Quick Intro. Dr Mandat has cut back his hours in the office but work with nursing homes and hospice. He likes butrans and oxycontin for many of his patients. Pulled through formulary coverage and new dose available for butrans along with titration options. M He requested coupons but had to keep moving.
PPLPMDL0020000001	Cleveland	OH	44113	11/10/2014	Intro, Reviewed OxyContin every 12hours, 7 tablet strengths along with Butrans 7 day transdermal, CIII for those patients requiring around the clock analgesia, Initiation/Titration, Said she will consider for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44113	11/10/2014	Discussed treating around the clock pain in 4-6hr increments, Dr. agreed that the appropriate patients should consider ERO, patients are resistant but will consider. Reviewed OxyContin every 12hours, 7 tablet strengths along with Butrans for those patients requiring around the clock analgesia, said Ok. Has 1 patient on Butrans and is doing good so far.
PPLPMDL0020000001					
PPLPMDL0020000001	Fairlawn	OH	44333	11/10/2014	Saw dr Jones and Lababidi at the same time. Told both of them about the reviewed indication for OxyContin and Butrans and asked both of them to focus on patients who have pain around the clock. Dr said h tris to convert to ER opioids as soon as he can he just wishes he could get it covered better. I told dr it is covered well its just that at times the patient needs to show failure on MS Contin or another ER opioid first. Dr said that's what he's
PPLPMDL0020000001	Akron	OH	44333	11/10/2014	Saw dr Jones and Lababidi at the same time. Told both of them about the reviewed indication for OxyContin and Butrans and asked both of them to focus on patients who have pain around the clock. Dr said ok and likes OxyContin. I reminded him to prescribe it q12 and to convert those Percocet patients in pain around the clock. Nothing else learned.
PPLPMDL0020000001	Mayfield Heights	OH	44124	11/10/2014	Hallway. Dr Vilinsky brought up same objection as last call: price, regarding Butrans. Says a few patients were quoted over \$300 monthly for butrans. I stated, those must be self pay patients then; Dr replied - no, they were Medicare D. I told him perhaps they were plans where Butrans does not have preferred status. Made sure to meet with medical assistants and let them know preferred Med D status. They will make sure to remind Dr. vilinsky of plans where butrans is preferred. Another option for patients who meet ER opioid indication is OxyContin, controlled release tablet, dosed every 12 hrs.
PPLPMDL0020000001					
PPLPMDL0020000001	Cleveland	OH	44103	11/11/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44127	11/11/2014	No new information learned on this call.
PPLPMDL0020000001	Barberton	OH	44203	11/11/2014	No new information learned on this call.
PPLPMDL0020000001	Garfield Hts	OH	44125	11/11/2014	Reiewed OxyContin every 12hour, Conversion, Formulary coverage along with Butrans CIII, for those patients requiring around the clock analgesia, Said ok will continue to prescribe for appropriate patients, Said he has a patient in mind.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	11/11/2014	Told Linda that we have spoken about the rescheduling of hydrocodone and how there is opportunity for some of those patients to be appropriate for Butrans. I told her I simply want to make sure she has Butrans on her radar. Linda said she definitely does and is seeing a lot of it. Linda said she uses copay cards. Reviewed the BEP kits which she did not know about.
PPLPMDL0020000001	Cleveland	OH	44106	11/11/2014	No new information learned on this call.
PPLPMDL0020000001	Garfield Hts	OH	44125	11/11/2014	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44310	11/11/2014	I asked dr how he decides who he is maintaining on IR opioids like hydrocodone and oxycodone and who he is moving to an ER opioid? Dr said when patients are taking too many short acting opioids and have chronic pain. Discussed patients for Butrans and then for OxyContin. I asked him if he would convert patients on Percocet around the clock to oxycontin? Dr said no because its too difficult to later them off of it. Dr said he will try other ER opioids like oxymorhane. Discussed Butrans patient types like Helen and dosing.
PPLPMDL0020000001					
PPLPMDL0020000001	Parma	OH	44129	11/11/2014	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	11/11/2014	Discussed Butrans and OxyContin with the pharmacist. She said they they have a couple of patients on Butrans and dispense OxyContin but not a lot. Reviewed Butrans and OxyContin attributes, dosing and conversions. Pharmacist said that they have been seeing a large influx of hydrocodone even those the scheduling has changed to schedule 2.
PPLPMDL0020000001					
PPLPMDL0020000001	Cleveland	OH	44106	11/11/2014	No new information learned on this call.
PPLPMDL0020000001	Norton	OH	44203	11/11/2014	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	11/11/2014	Spoke with Lauren the pharmacist about Butrans and OxyContin. Discussed hydrocodone rescheduling and asked if its impacted their business? She said that they are actually seeing it less and that they are not honoring any refills prior to Oct 6. Barry asked if they are seen more Tylenol with codine and she said no. Reviewed Butrans as the only schedule 3 ER opioid available to be called in and refilled. Lauren said to run with that because it makes sense. Lauren said they have not dispensed any Butrans 7.5 mcg but are dispensing all the others. Reviewed copay cards.
PPLPMDL0020000001					
PPLPMDL0020000001	Garfield Hts	OH	44125	11/11/2014	No new information learned on this call.
PPLPMDL0020000001	Barberton	OH	44203	11/11/2014	No new information learned on this call.
PPLPMDL0020000001	Fairlawn	OH	44333	11/11/2014	Led with a recap of last visit and discussing hydrocodone rescheduling and how it may open the door for Butrans and OxyContin. Reviewed indications, dosing flexibility and criteria to look for when considering an ER opioid. Reviewed Helen profile, conversions, and managed are coverage for each product. Dr said that he agrees with me about what around the clock pain means in many circles which is typically 90 pills a month or more. Asked dr to gain more experience with Butrans and OxyContin.
PPLPMDL0020000001					
PPLPMDL0020000001	Barberton	OH	44203	11/11/2014	No new information learned on this call.
PPLPMDL0020000001	Norton	OH	44203	11/11/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44106	11/11/2014	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	11/11/2014	Quick meeting. He is new to the practice because he has been working as a hospitalist at Parma Hosp for the last few years. Told Him what I promote. Products for those few patients that are in around the clock pain, he said it is more than a few. He would like to talk to me but today isn't the best day. He asked if I can come back soon.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	11/11/2014	Spoke with Linda Armstrong in hospital about Butrans and hydrocodone rescheduling. Discussed copay cards and BEP kits.
PPLPMDL0020000001	Barberton	OH	44203	11/11/2014	No new information learned on this call.
PPLPMDL0020000001	Norton	OH	44203	11/11/2014	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	11/11/2014	Brief meeting with Alan the pharmacist. He said that he hasn't noticed much change yet since the hydrocodone schedule so hangs other than physicians seem to be writing smaller quantities. He thinks they are reassessing the management of their pain. He does think that ER opioids are appropriate for patient in around the clock pain instead of IR meds. They do stock both products but see many cash paying patients who would not be able to use the meds I promote. Pulled though butrans initiation, titration and new dosing option.
PPLPMDL0020000001	Akron	OH	44333	11/11/2014	Discussed Butrans and OxyContin indications, changing of hydrocodone insight and how her role may be increasing because of all of that. Becky said she is busier and is trying to do the right things and to start Drug drug screens. Reviewed Helen profile, conversions, initiation and titration. OxyContin dosing and titration and when to initiate over 40mg of hydrocodone.
PPLPMDL0020000001	Barberton	OH	44203	11/11/2014	Asked the doctor why he hasn't tried a schedule three pain patch for his atc pain patients. Dr said he didn't know much about the product. Reviewed initiation if the norco pain patient and reviewed indication, caresource and med of coverage specifically aarp and silver scripts. Dr said he was concern w price so he wires generic. We talked about caresource coverage and we reviewed at what point he is willing to try a non generic product for someone uncontrolled and has been on opioids already for several months. Dr said he wouldn't.dr said he would think about the caresource patient for Butrans.mdr said he doesn't write OxyContin because he feels there are cheaper choices available for patients.
PPLPMDL0020000001					
PPLPMDL0020000001	Westlake	OH	44145	11/12/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	11/12/2014	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	11/12/2014	Elise said that she has been having some success with both Butrans and OxyContin recently because there have not been any insurance issues. Elise said that she write a Butrans on Monday for a patient wanting more hydrocodone and she started him on Butrans 10mcg. Elise said that she also started two patients on OxyContin who were also wanting more Percocet. I reviewed the Helen profile and OxyContin dosing and titration every 1-
PPLPMDL0020000001	Cleveland	OH	44115	11/12/2014	Discussed treating around the clock pain in 4-6hr increments, Reviewed OxyContin abuse deterrent characteristics every 12hours, 7 tablet strengths along with Butrans Initiation/Titration for those patients requiring around the clock analgesia. Also reiterated that both products as the same abuse potential as other opioids, Said ok will consider for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44115	11/12/2014	Reviewed OxyContin/Butrans with GeorgeRPH, stocking concerns along with appropriate patients referrals. Said Ok .
PPLPMDL0020000001	Cleveland	OH	44113	11/12/2014	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44313	11/12/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44130	11/12/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	11/12/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44115	11/12/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44115	11/12/2014	No new information learned on this call.
PPLPMDL0020000001	Stow	OH	44224	11/12/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44130	11/12/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	11/12/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	11/12/2014	No new information learned on this call.

PPLPMDL0020000001	Olmsted Falls	OH	44138	11/12/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	11/12/2014	No new information learned on this call.
	Munroe Falls	OH	44262	11/12/2014	Gave dr insight 18 and asked her how hydrocodone moving scheduling is affecting her office? Dr said its becoming tough because patients are upset they have to come in to get it refilled. I showed her the OxyContin dosing guide and told her she has an opportunity when she's reassessing those patients who are over 40mg of hydrocodone a day that OxyContin may be appropriate. Dr said she agrees. I showed her the new dosing guide with the 7.5 mg dose and told her its the only schedule 3 ER opioid available. Dr said that's pretty convincing and she forgot about it. I asked her for business for some of those hydrocodone patients for either OxyContin or Butrans.
PPLPMDL0020000001					
PPLPMDL0020000001	Westlake	OH	44145	11/12/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44115	11/12/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44115	11/12/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	11/12/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	11/12/2014	No new information learned on this call.
PPLPMDL0020000001	Middleburg Heights	OH	44130	11/12/2014	Talked to Wendy briefly try to discuss ER options for their patients. Pulled through excellent formulary coverage and doses of oxycontin and new butrans info. She will leave it for him but asked for savings cards too.
PPLPMDL0020000001	Akron	OH	44333	11/12/2014	Short discussion with Jim and reviewed the new dosing card for Butrans and reviewing conversions and titration. Him said they only have 2 or 3 patients on it. Reviewed copy cards and them OxyContin dosing and titration.
	Cleveland	OH	44130	11/12/2014	Colleen the pharmacist said that she doesn't see much change since the rescheduling of hydrocodone. She thinks doctors are still writing a lot of IR meds. Shared what I am saying to the physicians about patients in around the clock pain. Reviewed dosing, titration a dn managed care for both products. Reviewed new dose of butrans. She does like to have savings cards on hand.
PPLPMDL0020000001	Akron	OH	44333	11/12/2014	Dr said that he write a Butrans the other day for a patient who was taking 20mg a day of Norco. Dr said he write the 10mcg and the patient has Caresource. Spoke with Brittany and she said she just sent over the PA. I asked Brittany what the patients recent failures are and she said tramadol. I told her approval is most likely. Reminded dr to continue converting patients asked ing for more tramadol and have pain around the clock. Discussed OxyContin dosing, conversions and using OxyContin schedule 2 ER opioid.
PPLPMDL0020000001	Cleveland	OH	44109	11/13/2014	Reviewed with Mary Tech OxyContin/Butrans Initiation/Titration, Butrans for those patients requiring around the clock analgesia that are failing on present therapy. Said Ok will relay to RPH
PPLPMDL0020000001	Cleveland	OH	44195	11/13/2014	Reviewed OxyContin Savings cards, formulary grid along with Butrans Initiation/Titration, Savings cards, formulary grids, Said he will continue to prescribe for appropriate patients.
PPLPMDL0020000001	Tallmadge	OH	44278	11/13/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44103	11/13/2014	No new information learned on this call.
PPLPMDL0020000001	CLEVELAND	OH	44195	11/13/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	11/13/2014	Met with Dr. Davis, discussed OxyContin/Butrans , formulary opportunities
PPLPMDL0020000001	Parma	OH	44134	11/13/2014	Nate hasn't noticed a change is physician prescribing since hydrocodone schedule change, he wishes doctors would use ER meds once pain is around the clock. Discussed butrans, new dose and managed care coverage.
	Akron	OH	44305	11/13/2014	Spoke with Matt and reviewed Butrans and OxyContin dosing, conversions and Helen profile for Butrans. Matt said that they have had a couple of new patients recently on Butrans and at ok all doses except 7.5 mcg. Discussed copy cards and checked stock.
PPLPMDL0020000001	Cleveland	OH	44113	11/13/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	11/13/2014	No new information learned on this call.
	Parma	OH	44129	11/13/2014	Reviewed start principles quickly to get him thinking about reassessing patients. He said he avoids oxycontin. Showed Scott as possible patient type for him to look for for butrans. Before they get to Percocet or Norco. He said he will keep that in mind but was in a hurry.
PPLPMDL0020000001	Akron	OH	44312	11/13/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	11/13/2014	No new information learned on this call.
PPLPMDL0020000001	Tallmadge	OH	44278	11/13/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44103	11/13/2014	No new information learned on this call.
	Parma	OH	44129	11/13/2014	He will not write oxycontin. He said that he has an 80+ patient that he might try butrans because she is on a lot of pain. I reviewed dosing titration and how to write it. Reviewed med d formulary since that is what patient has. He said that he thinks he might give it a try.
PPLPMDL0020000001	Parma	OH	44129	11/13/2014	Brief meeting where she told me she is the director of hospice and uses oxycontin with those patients. Asked her to think of ER meds when it has been determined that patient is in around the clock pain. Two reasonable choices are q12 oxycontin and schedule3 butrans. Left her information to review next time I stop in.
PPLPMDL0020000001	Uniontown	OH	44685	11/13/2014	Abby told me that she forced a patient to start Butrans this morning. She said e patient called in and said he can't get it because its not approved. Abby said she called the pharmacy and they said it requires a PA. Abby said the patient can't take oral medicine and he has UHC community plan and she's trying to get it covered. Told her to ensure she does a complete look back on failures and to note everything.
PPLPMDL0020000001	Uniontown	OH	44685	11/13/2014	Short discussion w/ pharmacy tech as they were very busy. Discussed OxyContin and Butrans dosing and conversions as well as copy cards. Tech said she would give pharmacist Butrans dosing card and OxyContin conversion guide.
PPLPMDL0020000001	Parma	OH	44129	11/13/2014	Dr said that he thinks oxycontin q12 is appropriate solution for some patients in around the clock pain. He has not had experience with butrans in a while but seemed very interested when I reviewed the scott profile and discussed its use after tramadol. He had a med student in with him when I reviewed reformulated oxycontin and butrans n detail with her.
	Parma	OH	44129	11/13/2014	Myra said that there are patients that need ER. Some could benefit from q12 dosing of oxycontin but At their practice they do not write for more than the 80mg morphine equivalent and they don't choose Oxcodone, if they need more or something different they can find someone else to manage their pain. She has had success with butrans but sometimes even with the coupon is cost prohibitive. She thinks butrans is a great option and believes if they find the right dose shouldn't need to supplement with anything even though she knows you can.
PPLPMDL0020000001	Westlake	OH	44145	11/13/2014	Reviewed hydrocodone insight and pa said she doesn't start patients on schedule 2 products usually the dr will and she will do the refills. I asked her when was the last time she wrote oxycontin. She said never. I said there must be some hesitation for not writing it and asked her what they were. She said because it was schedule 2. I said will you reconsider writing OxyCotin if I make a good case for you today and she said may be. I asked her what she felt the big difference was between treating someone for atc pain w an extended release product than immediate release. Pa said ex are more dangerous. I asked how so. She said stronger. Gave fair balance for abuse potential and also highlighted that OxyCotin half life and delivery system. Focused on dosing someone every 12 hours w OxyCotin vs every 4 to 6 hours w immediate release options. Showed her fpi 12.3 and the comparison of oxycodone to OxyContin, her reply was ummm. Talked about converting from norco since she said she write little Percocet because of its scheduling. Pa said she knew about Butrans and she gave me information on Butrans. I asked her to tell me at what pint treating w norco or Tramadol would she convert to Butrans and the pa hesitated. Reviewed Initiation. Guide. She asked about rashes..") gave her the core visual aid
PPLPMDL0020000001	Akron	OH	44312	11/13/2014	Quick hello at window after asking to speak with him. I told him I'm guessing he's continuing to see an influx of patients on hydrocodone each month for their refills as he stated last time we spoke? Dr said they are coming in and its making things more hectic. I told him he has an opportunity during the reassessment to look at Butrans and OxyContin as viable options. I explained the place for each and reminded him that Butrans is the only schedule 3 ER opioid on the market and he can call the. In and refill them. Dr said that's impactful and is trying to find opportunities.
PPLPMDL0020000001	Parma	OH	44129	11/13/2014	Laura said that she is happy that their practice limits the amount of meds they can prescribe. If patients are wanting more than they give they can go somewhere else. Although they see a benefit to oxycontin and ER meds for many patients, the patients they see are more appropriate for butrans. They will not write for more the the 80 mg morphine equivalent.
PPLPMDL0020000001	Akron	OH	44305	11/13/2014	Told dr that I'm guessing he's continuing to see hydrocodone patients for refills? Dr said some yes. I told him he has an opportunity during the reassessment to determine if a patient is asking for more and is in pain around the clock and under 40 mg to use Butrans and over 40mg for OxyContin. I showed him the new piece for Butrans dosing and asked if he would do that? Dr said he's comfortable with Butrans and OxyContin efficacy and safety but its cost for Butrans. Dr said if its covered at a cost the patient is willing to pay is the issue. I told dr that what's expensive for one patient may be cheap for another and he just needs to tell them thats the only option he giving them! Dr said he needs to do a better job at that.
PPLPMDL0020000001	Westlake	OH	44145	11/13/2014	Talked about hydrocodone insight. Dr said it won't effect him but has been busier then ever. Dr told me his umber of patients yesterday in westlake was the highest it's been in a long time. We discussed the under 40mg norco patient and if they we're controlled taking 2 or more doses a day if Butrans is a consideration. Dr said yes. Asked why he doesn't write more Butrans if this is the case? Dr said he just had a patient on burans but she felt itchy after two doses (I wrote an AE report). The dr was not sure if it was Butrans or side effect of the previous or current opioid. I gave hi. The adverse reaction grid of the core visual aid. The dr said rash and itching was low. I asked him if he ever stops a medication on other drugs because of a side effect. He said all the time. We talked about starting a patient from norco onto Butrans, nursing Initiation grids. I asked the dr for two additional Butrans patient s and what would hold him backed the indication was met. Dr said nothing. I said you mean price, insurance plays no part in ur decisions? Dr said it did. Reviewed caresource. Dr said he was not aware of its coverage for Butrans. We talked about OxyContin, abuse potential for both products. We talked about the Percocet patient and I asked at what point would he convert a Percocet et patient to OxyCotin if met indication. Dr said it all depends. I asked about the uncontrolled atc Percocet et pain patient...dr didn't provide answer and switched subject.
PPLPMDL0020000001	Rocky River	OH	44116	11/14/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	11/14/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44109	11/14/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	11/14/2014	No new information learned on this call.
	Stow	OH	44224	11/14/2014	Spoke with Gary and discussed Butrans dosing and new 7.5 mcg dose. He said that he has all doses in stock. Except the 7.5 mcg dose because they haven't seen a script yet. I discussed copy cards and asked him if they are seeing less or more hydrocodone refills? Gary said its been more and patients are not happy. Reviewed OxyContin dosing and conversions and appropriate patients for hydrocodone failures.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	11/14/2014	Discussed insight 18 with dr and reviewed time it takes for conversion of those patients. I asked him how the rescheduling of hydrocodone has impacted his business? Dr said he doesn't write much but has had an increase of patients coming in for refills. Discussed opportunity for OxyContin over 40mg a day of hydro one and Butrans for under 40mg. Dr said it makes sense. Discussed appropriate patients from MVA for OxyContin and discussed schedule 3.7 day Butrans. Dr said that's a pretty big deal. I asked for customers clinical experience and reviewed Helen profile.
PPLPMDL0020000001	Uniontown	OH	44685	11/14/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	11/14/2014	No new information learned on this call.
	Mogadore	OH	44260	11/14/2014	Dr said it her first week back from her botched surgery. I told her that she has two viable options available to her when she is in the exam room with a hydrocodone patient who is in pain around the clock. Dr said ok. Reviewed OxyContin dosing and told EHR when to use it and told her Butrans remains a schedule 3 ER opioid and the only one available.
PPLPMDL0020000001	Cleveland	OH	44124	11/14/2014	No new information learned on this call.
PPLPMDL0020000001	Brooklyn	OH	44144	11/14/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	11/14/2014	No new information learned on this call.

PPLPMDL0020000001	Lyndhurst	OH	44124	11/14/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	11/14/2014	No new information learned on this call.
PPLPMDL0020000001	Berea	OH	44017	11/14/2014	No new information learned on this call.
PPLPMDL0020000001	Lyndhurst	OH	44124	11/14/2014	Lunch. Summarized last call. Hydrocodone insight. AS more patients come in every 30 days, re assess and if meet ER opioid indication; consider initiation or conversion to Butrans. If Butrans not appropriate, consider OxyContin. Asked for business remainder of today and next week. he will keep both in mind/makes sense he replied.
PPLPMDL0020000001	Mayfield Hts	OH	44124	11/14/2014	Impromptu coffee/snack. DR Laham shared with me he just wrote 2 Butrans 5 mcg/hr for 2 different opioid naive patients!! Discussed Oxycontin as option when Butrans not appropriate. Med D pull through.
PPLPMDL0020000001	Akron	OH	44312	11/14/2014	No new information learned on this call.
PPLPMDL0020000001	Brooklyn	OH	44144	11/14/2014	No new information learned on this call.
PPLPMDL0020000001	Brooklyn	OH	44144	11/14/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	11/14/2014	No new information learned on this call.
PPLPMDL0020000001	Stow	OH	44224	11/14/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	11/14/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	11/14/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	11/14/2014	No new information learned on this call.
PPLPMDL0020000001	westlake	OH	44011	11/14/2014	No new information learned on this call.
PPLPMDL0020000001	Lyndhurst	OH	44124	11/14/2014	Lunch. Summarized last call. Elderly patient doing well so far/no call back. Reinforced Butrans product attributes including no first pass metabolism/no dose adjust. for renal/mild/moderate hepatic impaired. Med D pull through. If he's getting quoted "over \$300 per month for Butrans" from patients; that's cash price or plan may not have Butrans at preferred status. Discussion of Oxycontin if Butrans not appropriate. FDA guidance, tiered labeling, abuse deterrent properties for OxyContin.
PPLPMDL0020000001	Parma	OH	44134	11/14/2014	Talked with Mar who said that she hasn't noticed any changes since the hydrocodone schedule change. Reviewed quickly the message I am telling docs about around the clock pain and when ER meds might be appropriate.
PPLPMDL0020000001	Lyndhurst	OH	44124	11/14/2014	She believes that product like butrans should be considered before starting patient on Vicodin and Percocet. Reviewed dosing, titration and new butrans dose.
PPLPMDL0020000001	Parma	OH	44129	11/14/2014	Lunch. Continued call with trying to find 1 or 2 trusted patients, with legitimate pain to either start Butrans 5 for naive patient (like Helen)or conversion, starting at 10 butrans. Reinforced can call/fax in with refills. If Butrans not appropriate, low dose OxyContin 10 mg also appropriate for naive patient. You can titrate in 1-2 days to next dose of 15 mg. Reinforced FDA/tiered labeling, abuse deterrent properties. DR Prada says she will consider to think about.
PPLPMDL0020000001	Cleveland	OH	44144	11/14/2014	Quick meeting with new MA, Andrew. He said doc really tries to stay away from ER oxycontin. Sometimes that is wht the patient needs. He nodded, they will get it if they really need it. Pulled through the patient in around the clock pain where patient is asking for something when their current tramadol isn't alleviating the pain. That is the person to try with Butrans. Quickly reviewed dosing, titration and new dose.
PPLPMDL0020000001	Westlake	OH	44145	11/17/2014	Quick call, reviewed butrans for those patients failing on present therapy requiring around the clock analgesia along with OxyContin every 12 hrs, formulary coverage. Said Ok, will consider, feels most patients are doing ok, Asked for 1 patients, said she will keep it in mind
PPLPMDL0020000001	Westlake	OH	44145	11/17/2014	Quick. Talked about the u controlled hydrocodone patient that needs an atc opioid therapy, appropriate for Butrans. Reviewed Initiation. Dr said he could find an appropriate patient. Reviewed OxyContin and the conversation from OxyCodone.
PPLPMDL0020000001	Westlake	OH	44145	11/17/2014	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44134	11/17/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	11/17/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44104	11/17/2014	Reviewed with Hakeem, Butrans/OxyContin Initiation/Titration, Said ok no new info learned
PPLPMDL0020000001	Akron	OH	44304	11/17/2014	Spoke with Jim the pharmacist and reviewed OxyContin and Butrans dosing, conversions and appropriate patients. Jim said that he is filling some OxyContin but only has 2-3 patients on Butrans. Jim said he has them from dr Fouad and dr Souzdanlinski.
PPLPMDL0020000001	Cleveland	OH	44104	11/17/2014	Reviewed OxyContin every 12hours, 7 tablet strengths, Formulary grid along with Butrans 7 day transdermal, CIII for those patients with pain severe enough to require around the clock analgesia. Said Ok will consider, seeing some of Dr. Bennett patients since she left and might convert some appropriate patients
PPLPMDL0020000001	Cleveland	OH	44120	11/17/2014	Reviewed with Ebony Pharm Mgr. OxyContin every 12hours along with Butrans CII, 7 day transdermal, Said she has 2 patients, will recommend for appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44104	11/17/2014	Reviewed OxyContin every 12hours, 7 tablet strengths, Formulary grid along with Butrans 7 day transdermal, CIII for those patients with pain severe enough to require around the clock analgesia and alternative options are inadequate.Said Ok will consider for appropriate patients,
PPLPMDL0020000001	akron	OH	44333	11/17/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	11/17/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	11/17/2014	No new information learned on this call.
PPLPMDL0020000001	Lyndhurst	OH	44124	11/17/2014	Met with med asst at front window/new contact. She normally works in Kent office on Thursdays. Discussed OxyContin (CII) and Butrans (CIII) as ER options for their patients with daily, atc, long term pain. Dr Goldner unable to come up front today. Let her know I'd try back WED.
PPLPMDL0020000001	Cleveland	OH	44195	11/17/2014	Reviewed OxyContin/Butrans PI's, no longer seeing/treating pain patients, Remove from PHoenix
PPLPMDL0020000001	Westlake	OH	44145	11/17/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44120	11/17/2014	No new information learned on this call.
PPLPMDL0020000001	Fairlawn	OH	44333	11/17/2014	Quick hallway call after Brittany let me back to see him antis work station. Mentioned insight 18 and told hi. That OxyContin and Butrans are viable options for those hydrocodone patients wanting more or not taking their medicine The way he intended. Dr said it makes sense and forgot about Butrans bing a schedule 3. Dr said that may be a good option for those patients. I told him under 40 mg is a viable candidate and over 40 mg is more for OxyContin. Dr said makes sense and thanked me for the info.
PPLPMDL0020000001	Cleveland	OH	44109	11/17/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	11/17/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	11/17/2014	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44134	11/17/2014	John hasn't seen a big change in prescribing since the hydrocodone schedule change. He thinks mybe they are writing a little less of all opioids. It thinks that it can't last because patients will be suffering.
PPLPMDL0020000001	Fairlawn	OH	44333	11/17/2014	Followed up with Gilbert about Elise Leones patient looking for OxyContin 30mg. I asked Gilbert if the patient came in to get it yet and the patient had not. Gilbert thanked me for checking stocking with him and said he always has all doses of both OxyContin and Butrans.
PPLPMDL0020000001	Westlake	OH	44145	11/17/2014	No new information learned on this call.
PPLPMDL0020000001	Uniontown	OH	44685	11/17/2014	No new information learned on this call.
PPLPMDL0020000001	Lyndhurst	OH	44124	11/17/2014	Lunch. Discussed benefit of ER opioid delivery system. First OxyContin, q 12h, 1 tablet 8 am, 1 tablet 8 pm. Butrans, dosed 1x per week, patients only have to worry about changing system every 7 days. Is it reasonable an ER schedule would benefit patients with daily, atc, long term pain; and for whom you've exhausted other options including migraine meds/botox therapy? Yes, however, says Karen, some patients do fine on prn, especially for headaches/migraines. Asked for business today, remainder of week, for patients who meet ER opioid indication.
PPLPMDL0020000001	Fairlawn	OH	44333	11/17/2014	Showed dr the OxyContin conversion and titration guide at front desk and told her OxyContin and Butrans should be viable options for her to go to when her hydrocodone patients come back for refill and reassessment. Told her to think OxyContin is for patients over 40mg of hydrocodone and Butrans under 40 mg. Told her if the hydrocodone patients ask for more or are in pain around the clock, OxyContin or Butrans my be solutions. Dr said
PPLPMDL0020000001	Lyndhurst	OH	44124	11/17/2014	Lunch. Discussed benefits of set schedule with ER delivery system. First OxyContin, dosed q 12 h, 1 tablet at 8 am, 1 tablet at 8 pm. Ability to titrate in 1-2 days. Butrans, 1x week dosing. Patients have to worry about changing system only 1x per week!! Lowest effective dose, both products discussed. Asked for business today, this week, after migraine meds/botox therapy has failed.
PPLPMDL0020000001	Cleveland	OH	44106	11/17/2014	Quick review of OxyContin every 12hours along with Butrans for those patients requiring around the clock analgesia. Said ok not seeing or treating many patients for pain since the move to UHHS, but will consider
PPLPMDL0020000001	Euclid	OH	44117	11/17/2014	Impromptu coffee appt. total office call. Discussed with med assts benefits of ER opioids and delivery system. Controlled release OxyContin dosed q 12 h. And 1x week delivery of buprenorphine/Butrans patch. Discussed also with Dr DeMicco, benefit of ER opioid and set schedule of q12 h, every 12 hrs release oxycodone. Parents have firm instructions to take 1 tablet 8 am and 1 tablet 8 pm; and stick to that schedule. The same for Butrans, patients only have to worry about applying 1x per week. Dr. D says he started a patient on Butrans 10 last week, AFTER Tramadol failure. He will let me know how patient is doing on next follow up.
PPLPMDL0020000001	Akron	OH	44333	11/17/2014	Elise asked me she was going to prescribe OxyContin 20mg TID and if the patients insurance would cover it? I asked Elise why she was prescribing OxyContin that way? Elise said she wants to prescribe 30mg q12 but the patient can't find it in any pharmacy. I called Rite Aid in Fairlawn and Elise spoke with Gilbert to verify their stock of 30mg. Gilbert told Elise they had 197 on the shelf. Elise wrote 30mg q12 OxyContin and patient was going to pick it up today. I reviewed the dosing of OxyContin and when Butrans would be appropriate from MVA.
PPLPMDL0020000001	Cleveland	OH	44104	11/17/2014	Reviewed OxyContin every 12hours, 7 tablet strengths, Formulary grid along with Butrans 7 day transdermal, CIII for those patients with pain severe enough to require around the clock analgesia. Said Ok will consider for appropriate patients
PPLPMDL0020000001	Lyndhurst	OH	44124	11/17/2014	Lunch. Dr Reed states she has been writing more Butrans, over OxyContin, because OxyContin has become very expensive. Discussed availability of savings card for cash/commercial patients. It's the Medicare D patients she'd like to get access for OxyContin. Recently, she initiated Butrans 10 for female patient who has anxiety about taking oral pills. She will let me know how this patient does on therapy. Discussed benefits of ER delivery system and dosing schedule of q12 h for OxyContin and 1x week therapy with Butrans. She will write if affordable for the patient.
PPLPMDL0020000001	Akron	OH	44333	11/17/2014	Discussed insight 18 and how patients on hydrocodone are handled in his office. I discussed Butrans and OxyContin options for patients and Butrans a viable option for some of his patients taking under 40mg a day. Discussed OxyContin option for patients taking more than 40mg of hydrocodone. I asked him his thoughts and said that he agrees with that philosophy and that if he has a patient taking 10mg of hydrocodone three times a day he would go to Butrans for sure. Dr said he's also going to fill out the AE information Purdue sent him on his AE with his patient on Butrans who experienced hallucinations. I asked for continued support.
PPLPMDL0020000001	Barberton	OH	44203	11/18/2014	No new information learned on this call.



	Twinsburg	OH	44087	11/18/2014	Doctor wrote oxycontin for a patient who had difficulty getting the butrans patch to stick to her skin. He would prefer not to write pills for patients in pain so he is looking for other options and will keep trying butrans for appropriate patients. Showed Scott as patient to keep an eye out for. He said he seems to see more female pain patients. We discussed how he follows up with patients during office visits....asked him if he gives them a range of when they can take medicine....he said they always take on a regular interval and not PRN. That really frustrates him so he works to lesson the number of pills depending on the reports of their pain levels. If he takes them down on their dosing schedule many leave his practice to so somewhere else.
PPLPMDL0020000001	Beachwood	OH	44122	11/18/2014	Doctor had a few patients waiting so didn't have too much time to talk. He has started several patients on oxycontin with success but is still trying to find appropriate patient for butrans.
PPLPMDL0020000001	Cleveland	OH	44113	11/18/2014	Reviewed Butrans for those patients that are failing on Norco along with OxyContin every 12hours, 7 tablet strengths, said he will continue to consider for appropriate patients
PPLPMDL0020000001	Akron	OH	44310	11/18/2014	Started off with hydrocodone insight and then follow it up with 242 days until patients are converted to ER opioids. Dr said there is some debate about keeping patients on IR opioids or converting to ER opioids and if he has patient who says they are going to have surgery in 6 months he may not be willing to start an ER opioid. I told dr that there is no doubt that if the patient is taking at least 90 pills a month, he should strongly consider converting to an ER opioid. Discussed daily, around the clock pain and doing and attributes for Butrans. Discussed EHR AND EMR and if they have 7.5mcg dose in their system. Dr said it is not and that Shar can add it which she is going to do. Dr said he has used it and just writes to the prescription. Discussed appropriate patients for OxyContin and doing as well as conversions for patients over 40mg of hydrocodone. Dr agreed to continue to write Butrans.<font color=blue>b>CHUDAKOB's query on 12/05/2014</b></font>Cliff, if the patient is taking 90 pills a month, why should he consider an ER opioid?<font color=green>b>REICHL's response on 12/08/2014</b></font>It's failing and meets the indication for ER opioid.<font color=blue>b>CHUDAKOB added notes on 12/10/2014</b></font>Got it. Thanks for the clarification.
PPLPMDL0020000001	Twinsburg	OH	44087	11/18/2014	Sarah said that the doctors seem to be writing more tramadol since the hydrocodone schedule change. Told her the messaging about ER I am giving to doctors and she thinks it would be great if they stopped writing the IR for patients in around the clock pain because many of them take it every 3 hours. Reviewed all 5 dosing options for butrans and appropriate patient for butrans.<font color=blue>b>CHUDAKOB's query on 12/05/2014</b></font>Kathy, you stated you presented OxyContin first and then Butrans, but I do not see an OxyContin presentation? Was there one? What was discussed?<font color=green>b>LARAWKA's response on 12/07/2014</b></font>as I discuss what I message to the doctors I mention that q12 oxycontin is an appropriate choice for the patients in around the clock pain and that there are 7 strengths to choose from. Then I mention butrans information referenced above.<font color=blue>b>CHUDAKOB added notes on 12/08/2014</b></font>OK. Please make sure when a discussion occurs on both products to make sure you record what was discussed on both products.
PPLPMDL0020000001	Cleveland	OH	44113	11/18/2014	No new information learned on this call.
PPLPMDL0020000001	Euclid	OH	44132	11/18/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44105	11/18/2014	No new information learned on this call.
PPLPMDL0020000001	Barberton	OH	44203	11/18/2014	No new information learned on this call.
PPLPMDL0020000001	Norton	OH	44203	11/18/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44106	11/18/2014	No new information learned on this call.
PPLPMDL0020000001	Barberton	OH	44203	11/18/2014	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	11/18/2014	No new information learned on this call.
PPLPMDL0020000001	Barberton	OH	44203	11/18/2014	No new information learned on this call.
PPLPMDL0020000001	Beachwood	OH	44122	11/18/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44103	11/18/2014	No new information learned on this call.
PPLPMDL0020000001	Norton	OH	44203	11/18/2014	No new information learned on this call.
PPLPMDL0020000001	Highland Heights	OH	44143	11/18/2014	No new information learned on this call.
PPLPMDL0020000001	Barberton	OH	44203	11/18/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	11/18/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	11/18/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44106	11/18/2014	No new information learned on this call.
PPLPMDL0020000001	Beachwood	OH	44122	11/18/2014	Talked briefly to Donnie who said the doctor is booked solid and can't talk with me today, made sure he had materials for butrans and oxycontin and to let the doctor know I stopped in to reinforce the information he and I discussed when we met last time regarding his patients in around the clock pain.
PPLPMDL0020000001	Euclid	OH	44117	11/18/2014	Lunch. Total office call. Asked if when writing an opioid, like hydrocodone q 8h prn - for example, if Dr. DeMicco feels the patient will take every 8 hrs or 3x day or as instructed? Dr DeMicco response was - maybe, probably? Not sure? that's what I'd like you to think about then when I propose rather, a controlled release product like Oxycontin, Discussed benefits of ER or controlled release delivery system, and product attributes, set schedule of every 12 hrs with instructions to take one tablet 8 am one tablet 8 pm; ability to titrate in 1-2 days, single entity. Butrans - patients or their caregiver, have to apply just 1x week or every 7 days. Single entity, can titrate in 72 hrs, 8 possible application sites. Dr says he's had success with both products, but again, has to be careful of how many ER opioids he writes, and they've been referring patients to Dr. Ko for Painseville location; for Euclid location, they refer patients to Dr. Sami Moufawad.
PPLPMDL0020000001	Norton	OH	44203	11/18/2014	If norco was failing a patient would Butrans or OxyContin be your first choice for atc chronic pain per indication. How often do you move from Tramadol to norco? Or from norco to what? Why. Dr said he will write OxyCotin if their managed care will cover it and he said he doesn't like patients to be on more than 3 or 4 doses of any immediate release product a day for ling times. Talked about indication and dosing of both products. Asked dr to think of OxyCotin for patients over 4 pills a day chronically and especially if they are on the same molecule as OxyCotin, oxycodeone. He said sure.
PPLPMDL0020000001	Cleveland	OH	44113	11/19/2014	No new information learned on this call.
PPLPMDL0020000001	University Hts	OH	44118	11/19/2014	Reviewed OxyContin every 12hours, 7 tablet strengths, Formulary coverage along with Butrans for those patients pain that is severe enough requiring around the clock analgesia. Said ok will consider for appropriate patients.
PPLPMDL0020000001	Mayfield Heights	OH	44124	11/19/2014	Will discuss further during lunch appt
PPLPMDL0020000001	Mayfield Village	OH	44143	11/19/2014	No new information learned on this call.
PPLPMDL0020000001	Mayfield Village	OH	44143	11/19/2014	Dr Azar continues to complain that at hospital, at nursing homes, Butrans and OxyContin not on formulary. One female patient recently had hallucinations on Fentanyl, Dr. Azar wanted to switch to Butrans; but nursing home would not allow; even though family also wanted patient to try Butrans. Empathized with him, and asked him to consider for patients in his practice. Focused on delivery system: controlled release for OxyContin and ER for
PPLPMDL0020000001	Cleveland	OH	44114	11/19/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	11/19/2014	No new information learned on this call.
PPLPMDL0020000001	Mayfield Heights	OH	44124	11/19/2014	Impromptu coffee/snack. Continued discussion for patients like Helen, there are options like OxyContin or Butrans. Focused on controlled release delivery system for Oxycontin, savings cards, Caresource prior auth discussion. Focused on ER delivery system for Butrans. she recently started elderly female patient on OxyContin; who was on ir Tramadol, Percocet. she also started elderly patient on Butrans - need to follow up on that patients' therapy. Caresource discussion also with med asst Tina. Tina says they have large majority of Caresource/low income patients. They also have a group that have Medicare/Medicaid (dual eligible) Discussed ease of Caresource prior auth for Butrans.
PPLPMDL0020000001	Cleveland Hts	OH	44118	11/19/2014	No new information learned on this call.
PPLPMDL0020000001	Mayfield Village	OH	44040	11/19/2014	Met with pharmacist Tom. He states Dr Price is writing OxyContin again? Found out that he's practicing a few days a week with Dr Chaitoff. No longer with University Hospitals. Discussed how rescheduling of Hydrocodone has effected what he's dispensing. Tom says HCPS want to be able to provide refills; so they are writing Tylenol 3 and have been running out of Tylenol 3. Discussed OxyContin controlled release delivery system. Then discussed Butrans as option which HCP's can offer with refills. It can be called/ faxed in. Reinforced 5 BUTRANS strengths.
PPLPMDL0020000001	North Royalton	OH	44133	11/19/2014	Regina said that they stock oxycontin but not butrans at the moment. She said that the hydrocodone schedule change hasn't seemed to change the way doctors treat their pain patients.
PPLPMDL0020000001	Cleveland	OH	44102	11/19/2014	No new information learned on this call.
PPLPMDL0020000001	Mayfield Heights	OH	44124	11/19/2014	No new information learned on this call.
PPLPMDL0020000001	Valley View	OH	44125	11/19/2014	No new information learned on this call.
PPLPMDL0020000001	North Royalton	OH	44133	11/19/2014	Marcus said that they stock oxycontin and there are two patients on butrans. He hasn't noticed that prescribers are writing opioids differently sine the hydrocodone schedule change which he is a bit surprised about. Quickly reviewed ER opioid strategy and pulled through new dose of butrans.
PPLPMDL0020000001	Munroe Falls	OH	44262	11/19/2014	Spoke with dr about the last call and knowing when to differentiate between a hydrocodone patient that may be appropriate for OxyContin and Butrans. Recapped that discussion talking about 40mg hydrocodone cut off and then dr said she remembered what I said a converted 2 hydrocodone patients this week to OxyContin. I asked her with ultram what her typical ceiling dose is? Dr said 6 pills a day at 300mg. I asked her to think about taking a patient at half of that dose who says they are still in pain and convert them to Butrans. Dr said it makes sense and she can do that. Reminded her of the Helen profile and copy cards.
PPLPMDL0020000001	Mayfield Village	OH	44143	11/19/2014	Lunch. Discussion on re assessment of patients on hydrocodone combos continued. If he's referring to pain specialty, and patients are having to wait for 8-10 weeks or more to get into pain specialty; why not initiate low dose Butrans or OxyContin and help patients while they're waiting to get in for pain specialty referral? Does this make sense? Is this something you are willing to do? Dr Krishnan says this does make sense. Followed up on Helen profile, OxyContin another controlled release oral option.
PPLPMDL0020000001	Mayfield Village	OH	44143	11/19/2014	Lunch. Discussion on possibility of writing ER opioid PRIOR to referring patients to pain specialty. Continues referring to Dr. Yap in Beachwood, and Hillcrest Pain Mgt (Dr. Dews). Still has no interest in managing any ER opioids at all.
PPLPMDL0020000001	Mayfield Village	OH	44143	11/19/2014	No new information learned on this call.
PPLPMDL0020000001	Mayfield Village	OH	44143	11/19/2014	Kristy was there during lunch, (with Atrium Medical Group) but did not stop to talk. Followed up with med assistants on OxyContin, Butrans patient access and Medicare D status.
PPLPMDL0020000001	Tallmadge	OH	44278	11/19/2014	Short discussion about where and when OxyContin and Butrans are appropriate. Reviewed patients from MVA who may be appropriate for OxyContin and then gave quick review of Butrans attributes. Dr said he didn't know Butrans is a schedule 3. I asked if that would change his outlook on prescribing? Dr said possibly. Nothing else learned.
PPLPMDL0020000001	Westlake	OH	44145	11/19/2014	No new information learned on this call.
PPLPMDL0020000001	Independence	OH	44131	11/19/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	11/19/2014	Reviewed OxyContin and Butrans P's, Initiation/Titration, no further info requested at this time. Refers to Pain mgmt.

	Akron	OH	44333	11/19/2014	Discussed Butrans patient types, initiating in patients on tramadol and have pain around the clock. Discussed her patients that are being referred to her who are up 400% and what those patients are on when they come to see her? Elise said that they are typically on more than one analgesic and too high of doses from wither their primary dr or even a Orthopedic surgeon. Elise said that that she tries to get her patients on ER opioids as soon as she can and that she finds success with Butrans. Discussed dosing and 7.5 mcg dose and flexibility it brings. Reviewed OxyContin and if she feels comfortable writing and titrating up and down. Elise said she has no issues with it but its not easy.
PPLPMDL0020000001	Akron	OH	44313	11/19/2014	I showed dr the OxyContin conversion guide from the MVA and asked if I could speak with him for a second? Dr asked me where it's covered? I asked him which plans he's not able to get OxyContin for? Dr didn't give me a specific plan and I told him I have left multiple copies of the formulary grids and he has them. I asked dr if he would consider when reassessing hydrocodone an oxycodone patients to cindpsider taking a patient in pain around the clock on 20mg of IR oxycodone to 10mg OxyContin q12? Dr looked at the conversions and pointed to the 30mg of oxycodone. I pointed out OxyContin conversion is half the dose of IR oxycodone and its single entity ER oxycodone. Dr said ok. Reminded dr to use the copy cards.
PPLPMDL0020000001	Mayfield Village	OH	44143	11/19/2014	Lunch. Continued with re assessment discussion, hydrocodone rescheduling. Dr Ashraf says he does notice an increase in patients coming in for refills. Suggested that's a good opportunity to convert patients to ER or controlled release delivery system. Asked Dr. to consider patients not controlled on percocet, vicodin, consider controlled release OxyContin. OR opioid naive on lowest effective dose, starting with 10 mg every 12 hrs. Butrans is another option which could be solution for refills and minimizing patients having to come in every 30 days for rx. Reinforced can be called/faxed in with refills.
PPLPMDL0020000001	Stow	OH	44224	11/19/2014	Spoke with Jamie the pharmacist about Butrans and OxyContin prescribing and what they are dispensing. Jamie said they have been dispensing the 7.5 mcg and continue to dispense the OxyContin doses. Jamie talked about residents not knowing how to correctly write or dose OxyContin. Jamie said she corrects them all the time and thanked me for making sure providers write OxyContin q12.
PPLPMDL0020000001	Westlake	OH	44145	11/19/2014	Reviewed impact of hydrocodone to the office, Lori the office manager said she has been very busy w scheduin patients. I asked the dr if just ine of those were appropriate for atc chronic medication Butrans was schedule three w refills. Dr said he would keep that in mind....
PPLPMDL0020000001	Bedford	OH	44146	11/19/2014	Doctor believes in the use of OxyContin for his patients in around the clock pain. Once they are taking 4 pills of Percocet or Vicodin he thinks the patient should be on a medicine like ER oxycontin. He thinks Butrzn is a great option and he is finding that many more plans than in the past are covering butrans.
PPLPMDL0020000001	Fairlawn	OH	44333	11/19/2014	Spoke to Jessica and Sue about Elise Leones patient looking for OxyContin 30mg. Jessica said she still had a few days left of the other dose than will fill it. Reviewed Helen profile and OxyContin doses and asked her to council patients when necessary about speaking with their dr about other ER options.
PPLPMDL0020000001	Akron	OH	44333	11/19/2014	Dr Vucetic said that he has a patient that came to him from dr Sable that reported to dr sable that the Butrans 5mcg itched her arms so badly that she wanted to take a knife and cut them off. Dr said that he took her off of opioids completely and just treating depression. Discussed Butrans and dr said that he really likes it because its low dose, transdermal delivery system and easy to discuss with patients who are in pain on IR opioids. Dr said that he really likes it on his older patients because he does not like to treat younger patients on chronic opioid therapy. Discussed OxyContin use in his patients already on IR oxycodone and to keep the molecule the same.
PPLPMDL0020000001	Independence	OH	44131	11/20/2014	Doctor said he believes in treating around the clock pain with ER but patients are very often resistant to that dosing. He believes oxycontin works well for patients but the stigma may prevent him from writing it for certain patient types. Aske him how he reassesses if they takes meds the way they are prescribed. He does regular urine screens to detect and would know if they aren't following his instructions and run out early. He said he won't write IR for more than 90 pills. Showed him Helen to discusses a particular patient type for butrans. Reviewed dosing, titration and managed care. He said he will keep an eye out for patient like Helen for Butrans.
PPLPMDL0020000001	Westlake	OH	44145	11/20/2014	Reviewed the over 65 patient with med f coverage. Aarp for Butrans after Norco. Talked about the starting doses and the 7.5 mcg dose as a titration dose. Reviewed coupons for commercial insured.
PPLPMDL0020000001	University Hts	OH	44118	11/20/2014	Reviewed OxyContin and Butrans Formulary grids along with Savings cards. Said Ok will continue to find appropriate patients. Asked for 2 patients this afternoon. Said ok
PPLPMDL0020000001	Hudson	OH	44236	11/20/2014	Discussed appropriate patients for OxyContin and why he needs to use it for patients over 40mg of hydrocodone. Discussed from ground 0 with Butrans and discussed appropriate patients. Dr said he just write Butrans who was a referral from pain management who was coming off suboxone and the patients discussed wanting Butrans based on discussions from pain doctor. Discussed him evaluating his existing patients and asked him when he wrote a new IR opioid? Dr said its been a long time. Told dr that's why I need him to reassess those ultram and hydrocodone patients. Reviewed conversions and copy cards. Told dr to gain clinical experience with Butrans and he won't know how it works unless he tries it.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	11/20/2014	Reviewed OxyContin with Liz and dr and asked about OxyContin copy cards and using them every 14 days if necessary. Discussed managed care and prior authorizations for OxyContin. Liz said she never has any issues getting it approved and when it is a PA she gets it approved with much trouble. Discussed appropriate patients and titrating. Nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44111	11/20/2014	Introduction call. Reviewed hydrocodone insight, and what they means to patients who can't get out in the cold to pick up their scripts. Dr said it will cause a problem this winter. Talked about OxyContin...reviewed indication and dosing. Dr was familiar with OxyCotin. Talked about couONS and who is the appropriate patient. Focused on hydrocodone patient uncontrolled and asked him any reason if they were over 40mg of norco and atc per our indication, what would be a hesitation to move to OxyCotin. Dr said none. I asked him if he usually goes from norco to OxyCotin or if he goes for Percocet to OxyContin. Dr said usually from Percocet. I highlighted the molecule and delivery system of OxyCotin. I asked him if Percocet is them their first pain opioid they use or were they on something else before. Dr said they usually have tried so ethng else. I asked why he is waiting so long. Dr said he was in the habit of doing it. I asked w hydrocodone and oerocet Nd OxyCotin being a schedule 2 if it was a reasonable to move for norco OxyCotin if the patient was appropriTe. He said yes we talked Butrans. Drs questions were side effects and I showed him the core aid to review. Dr asked about when steady state hits, which we reviewed. And talked about the Helen profile. Dr asked about managed care. Closed, dr said he would find someone
PPLPMDL0020000001	Hudson	OH	44236	11/20/2014	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	11/20/2014	Quick hello at window with dr and asked her to continue prescribing Butrans. Discussed managed care opportunities and growth With Darlene and how when dr puts one to later that 80% of the time Butrans is covered without restrictions. Darlene said that effective December 29th they are moving their practice to the AGMC physicians office in stow 2nd floor.
PPLPMDL0020000001	CLEVELAND	OH	44195	11/20/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	11/20/2014	Reviewed OxyContin/Butrans with Roxane RPH mgr. No changes, continues to see IR products being utilized on the outpatient surgery side at CCF
PPLPMDL0020000001	Lakewood	OH	44107	11/20/2014	No new information learned on this call.
PPLPMDL0020000001	fairview park	OH	44111	11/20/2014	No new information learned on this call.
PPLPMDL0020000001	Parma Heights	OH	44129	11/20/2014	Larissa likes to hear new information from reps and what we are talking to physicians about. She hasn't seen a big change in prescribing since hydrocodone change except for maybe a little more Tylenol with codeine. Pulled through new butrans dosing and the messages we are saying to physicians about around the clock pain and when ER med might be appropriate.
PPLPMDL0020000001	Parma	OH	44129	11/20/2014	Myra said she loves butrans for her patients. She thinks that if she can get them to the right dose, that it works very well for her patients. Sometimes it is cost prohibitive. When pulling through managed care, she said that even \$20 is too much for some patients.
PPLPMDL0020000001	Berea	OH	44017	11/20/2014	Asked the dr what hesitations he has starting someone on Butrans? Dr said none. I asked the dr if he sees one patient appropriate for Butrans will he write it this week and he said yes.
PPLPMDL0020000001	Lakewood	OH	44107	11/20/2014	No new information learned on this call.
PPLPMDL0020000001	Waterford	OH	45786	11/20/2014	I-Butrans dosing and managed-care. OxyContin managed-care.W-will look over the information.
PPLPMDL0020000001	Cleveland	OH	44114	11/20/2014	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	11/20/2014	No new information learned on this call.
PPLPMDL0020000001	C. Falls	OH	44223	11/20/2014	Spoke with Catherine and a tech about Butrans and OxyContin. Reviewed dosing and how often they are dispensing. Reviewed copy cards for Butrans and OxyContin and talked about the trial card for Butrans along with copy card.
PPLPMDL0020000001	Cleveland	OH	44195	11/20/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	11/20/2014	No new information learned on this call.
PPLPMDL0020000001	Euclid	OH	44119	11/20/2014	Discussed with pharm mgr Dave, hydrocodone rescheduling. Dave says there's been MORE hydrocodone written; especially by pain management. All is well with access for OxyContin, Butrans. He has 3 strengths of Butrans in currently. Left (1) Butrans patient guide, Butrans & OxyContin pharmacist guides. Asked him to recommend OxyContin, Butrans to HCPs when patient needs change in therapy & meets ER opioid indication.
PPLPMDL0020000001	Lakewood	OH	44107	11/20/2014	No new information learned on this call.
PPLPMDL0020000001	Garfield Heights	OH	44125	11/20/2014	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	11/20/2014	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	11/20/2014	Spoke with Catherine the pharmacist at new choice about OxyContin and Butrans and he impact the rescheduling hydrocodone may have had on the pharmacy. Catherine said that they haven't seen much because of the amount of hospital prescriptions they see. Went to the center for pain management and looked for Glenn which was not available.
PPLPMDL0020000001	Garfield Hts	OH	44125	11/20/2014	No new information learned on this call.
PPLPMDL0020000001	Waterford	OH	45786	11/20/2014	I-Butrans dosing and managed care.W-said he would look over the information.
PPLPMDL0020000001	Hudson	OH	44236	11/20/2014	Dr told me that his patients are doing well on Butrans and OxyContin and he doesn't remember a recent start. Dr talked about patients with spinal stenosis patients who he knows will have pain for an extended period of time. I told dr he's correct and that those patients along with chronic low back pain and OA were some of the patients in the clinical trials with Butrans. I asked dr where he has been initiating Butrans for his patients and dr said when they want more Norco. I asked him if he's ever used Butrans for patients wanting more ultraam? Dr said maybe once. I discussed use of Butrans in that patient and talked about Helen profile. Dr agreed it would make sense. I asked him when reassessing those patients to consider Butrans or even OxyContin if the patients are over 40mg of hydrocodone a day.
PPLPMDL0020000001	Waterford	OH	45786	11/20/2014	I-Butrans dosing, titration and managed-care. OxyContin managed-care.W-having success with Butrans
PPLPMDL0020000001	Cleveland	OH	44195	11/20/2014	Reviewed OxyContin every 12hours, Savings Cards, Said Ok will continue to prescribe, Reviewed Butrans Initiation/Titration
PPLPMDL0020000001	Westlake	OH	44145	11/20/2014	Reviewed hydrocodone, insight and impact it's having on office. Office manager Laura said they have been affected. Reviewed the over 40mg of norco patient meeting indication for OxyCotin. Reviewed dosing options and titration ever 1 to 2 days. Asked how his patient on Butrans was doing. It was a med d patient and they are supposed to come in office after in the week for a reassessment. We talked about the dosing and when to titrate, reviewed that it was ok to use break thru medications per our fpl. Gave fairbalance to abuse potential. Closed for another norco med d patient who meets criteria. Dr said maybe.
PPLPMDL0020000001	Cleveland	OH	44111	11/20/2014	Introduction. Reviewed OxyCotin and how he used it in his practice. Dr said he uses it; but not often. I asked Why? Dr said he doesn't write that much extended release product. We talked about the atc chronic pain patient. I asked him when they are in 90 pills a month, so 3 a day...and they aren't controlled. How do you know they tok the medication as prescribed? Dr shook his head. I asked if he started to doubt things during the reassessment. The doctor shook his head with a big yes. I said this is your Butrans patient. Reviewed indication and dosing. I asked him how would he feel managing atc chronic pain with 4 patches a month. Dr shrugged his shoulders. I said whe you write prn or as needed...don't you give a lot of narcotic control to the patient? He said yes. I said Butrans might be an option for you. Dr said maybe so. I closed him in trying Butrans, after a norco failure in a caresupport patient. Dr said his big plans are caresupport, med d plans. So that is where I forced mostly. Got a follow up visit in February approved.
PPLPMDL0020000001	Cleveland	OH	44111	11/20/2014	Met the pa. Hydrocodone insight. Although they said it wasn't affecting them....we talked about the. Umber of patient sbeing seen in a month on a hydrocodone product. We discussed what protocols are I. Place to accurately understand how much and when they took their atc pain meds. They said nothing. We talked about dosing of OxyCotin and Butrans. Reviewed the over 40mg of norco for OxyCotin, per our indication. And under for Butrans. She didn't know anything about Butrans. We reviewed. I asked her it sounded and she said she can think of a few patient it MIT be a good choice for, reviewed managed care. Also gave fair balance...abuse potential.
PPLPMDL0020000001					

PPLPMDL0020000001	Lakewood	OH	44107	11/20/2014	Talked about the uncontrolled norco patient, appropriate for Butrans that he would prefer a schedule 3 w refills. Dr asked managed care questions s, which I addressed. Nothing new learned on OxyContin.
PPLPMDL0020000001	Highland Heights	OH	44143	11/20/2014	Quick hallway. Asked Dr for BWC patients. He stated many BWC are younger patients; they are on high doses, and feel OxyContin is more appropriate. Thats a huge part of your business. Is it fair to ask for Butrans for BWC?
PPLPMDL0020000001	Parma	OH	44129	11/20/2014	Yes, in some patients.
PPLPMDL0020000001	Stow	OH	44224	11/20/2014	Started discussion with Kathy patient profile. Dr said that an ER med was appropriate med for the patient. He said oxycontin might be an option but maybe best to try Butrans first. Discussed Q12 option of OxyContin and reviewed 5 doses of butrans. He thinks that Butrans is a reasonable option that he will consider.
PPLPMDL0020000001	Akron	OH	44305	11/20/2014	Short discussion about Butrans and OxyContin and told dr that he has found a place for Butrans on a few occasions even though he doesn't like prescribing opioids. Dr agreed and said that the patients he had on each product are doing well and that he will never be a large prescriber for me. I told him to only prescribe where he truly believes is appropriate. Nothing else learned.
PPLPMDL0020000001	Euclid	OH	44119	11/20/2014	I recapped the last discussion with dr about what is holding him up from making butrans his go to ER opioid. Discussed how he's seen good efficacy and safety with Butrans and that if Butrans was free he would write it all day long. I told dr that I want to help him streamline his ability to reduce the amount of prior authorizations and step edits to enable him to have success with Butrans. Dr agreed and I told him his wife and office staff to know this as well.
PPLPMDL0020000001	Cleveland	OH	44113	11/21/2014	Lunch. Hydrocodone insight delivered. Dr says the rescheduling has been a hassle. Overall, ER opioids prior authorizations are a hassle. Asked dr who performs his prior auths? He does. Discussed conditions causing pain he treats with opioids such as neuropathic pain. Dr supports ER opioids. He says he had to complete prior auth recently for Butrans. We empathized but asked, in your specialty (neurology) don't you have to complete prior auth s for other branded meds? He also asked what to do if Butrans loosens or falls off? Replied with first aid tape, if still issue, Tegeder or Bioclusive. He says he trusts 90% of his patients, and so they don't have to come in every month, he MAITS them 3 scripts to get them by for 90 days. He replied yes. Focused on ability to fax/ call in Butrans with refills as benefit to patients unable to visit every 30 days, such as elderly population.
PPLPMDL0020000001	Westlake	OH	44145	11/21/2014	Reminded of Butrans Med D coverage along with OxyContin coverage and Savings Cards. said ok will continue to find appropriate patients
PPLPMDL0020000001	Cleveland	OH	44106	11/21/2014	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	11/21/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	11/21/2014	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	11/21/2014	Spoke with the tech Mary about the new Butrans 7.5mcg for and dosing flexibility as well as conversions. Discussed the patch design and copay cards. Reviewed oxycontin dosing, conversions and asked if hydrocodone rescheduling is affecting them. Mary said it really hasn't and that she continues to see he same patients getting hydrocodone every month.
PPLPMDL0020000001	Uniontown	OH	44685	11/21/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	11/21/2014	Talked about the reassessment visit for the norco patients. Identified then under 40mgof norco and appropriate conversion to Butrans. Dr said most of his patients are older and already on opioids, so I reminded him to think about the uncontrolled pain patient appropriate. Reviewed indication, dosing and managed care. Dr said he will write if he has the chance.
PPLPMDL0020000001	Uniontown	OH	44685	11/21/2014	Saw Dr at window while taking to Dr Origel. Dr said that the patient he discussed with me over lunch last time who couldn't get her oxycontin ended up getting it approved. I told r I met with the pa coordinator and we discussed it. Dr said thanks and I told him to continue finding patients who ask for more IR opioids like tramadol.
PPLPMDL0020000001	Westlake	OH	44145	11/21/2014	No new information learned on this call.
PPLPMDL0020000001	Olmsted Falls	OH	44138	11/21/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	11/21/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	11/21/2014	No new information learned on this call.
PPLPMDL0020000001	Berea	OH	44017	11/21/2014	No new information learned on this call.
PPLPMDL0020000001	Berea	OH	44017	11/21/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	11/21/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	11/21/2014	Reviewed Formulary grids for both OxyContin/Butrans along with Savings cards, said Ok will relay info to Dr. Daoud/Shen
PPLPMDL0020000001	Berea	OH	44017	11/21/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	11/21/2014	Review all products. Intro w hydrocodone insight. Dr has no experience w treating w opioids and had no experience w control release products. Gave fair balance. Reviewed dosing and Helen Butrans profile.
PPLPMDL0020000001	Tallmadge	OH	44278	11/21/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	11/21/2014	After review of hydrocodone insight we talked about the number of patient she may be seeing extra this month, we talked about the un controlled norco patients requesting a change i theraoy. Reviewed indication. Dr said she had small amount like that, we both agreed that it might be one or two a month. Reviewed dosing of both OxyContin and Butrans and delivery system. Talked managed care. Drs said the information was helpful and she would use it if she found an app patient.
PPLPMDL0020000001	Westlake	OH	44145	11/21/2014	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	11/21/2014	No new information learned on this call.
PPLPMDL0020000001	East Cleveland	OH	44112	11/21/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	11/21/2014	Hydrocodone insight. Talked about when the patients come back for a reassessment and they are uncontrolled when's a controlled release product ought about. Dr said he writes very little extended release. I said is there a hesitation if the patient was appropriate? He said maybe but he doesn't have much experience w chronic pain patients, so he uses more short a ting products. We reviewed how to start a patient onto burans and or OxyContin, dosing, indication and managed care. Dr said he could see it in a few patient. Closed.
PPLPMDL0020000001	Olmsted Falls	OH	44138	11/21/2014	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	11/21/2014	No new information learned on this call.
PPLPMDL0020000001	Uniontown	OH	44685	11/21/2014	Caught dr at window and told him that I would like him to use oxycontin for those patients who are back in to have their hydrococone refilled and ask for that next dose. I told him that also those oatwntns over 40 mg of Hydrocodone may be appropriate as long as they meet the indication. Reminded him that butrans should be reserved for those patients coming in for refills of their IR opioid is and are taking 90 pills or more a day. Dr said that ounds fine and that he may be using more due to the headache the rescheduling of hydrocodone has caused.
PPLPMDL0020000001	Cleveland	OH	44130	11/21/2014	Doctor said that she doesn't have any patients in around the clock pain, they are all acute. Showed her Kathy profile and asked her if this sounds like it could be one of her patients, she admitted that it is. When discussing appropriate therapy options like butrans or oxycontin, she says that she finally sees why ButrNs might be appropriate for a patient like Kathy or someone else before they start on Norco. Pointed out that after Tramadol is a good place to consider butrans as well. Reviewed dosing, titration formulary and doctor promised she will think of butrans.
PPLPMDL0020000001	Cleveland	OH	44113	11/21/2014	Reviewed OxyContin every 12hours, formulary grid along with Butrans for those patients requiring around the clock analgesia, CIII. Said Ok will consider
PPLPMDL0020000001	Cleveland	OH	44113	11/24/2014	Reviewed Butrans Med D coverage, Patient info books and Experience kits, Said ok will continue to prescribe for appropriate patients
PPLPMDL0020000001	Cleveland Hts	OH	44118	11/24/2014	Reviewed OxyContin every 12hours, Formulary coverage along with Butrans, CIII, 7 day transdermal, Initiation/Titration, Said Ok will consider for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44127	11/24/2014	Quick review of OxyContin every 12hours, formulary coverage along with Butrans CIII, 7 day transdermal for those patients failing on present therapy and require around the clock analgesia, Said ok, will consider for appropriate patients
PPLPMDL0020000001	akron	OH	44333	11/24/2014	Discussed the hydrocodone insight with dr and then asked him if he would reassess his patients and look to initiate with Butrans or oxycontin and then reviewed where each is placed. Dr said he is doing it in the nursing homes and its hit or miss based on coverage. Discussed CareSource and Medicare D. I reviewed the Helen profile and asked him to start it on appropriate Ultram patients who meet the indication. Reviewed oxycontin MVA pages 5 and 9 and asked for business.
PPLPMDL0020000001	Akron	OH	44320	11/24/2014	Disussed hydrocodone insight with dr and asked him if it's an issue for him? Dr said not really but has had some upset patients. Continued to discuss the process of those patients in reassessing snd he options with Butrans and Oxycontin. Dr agreed that he likes that Butrans is a schedule 3 and it can help his patient get off taking pills. I discussed the dosing, application sites, conversions and attributes. I discussed the Helen profile and asked for more business. Discussed OxyContin and conversions as well as attributes and when he should be using it.
PPLPMDL0020000001	Cleveland	OH	44130	11/24/2014	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44320	11/24/2014	Discussed insight 18 and then follow up with the time it takes to have patients converted to an ER opioid. Dr said the rescheduling of hydrocodone has not really affected her and her patients. Dr said that its a really hard sell to get patients to switch to an ER opioid like Butrans or oxycontin. Dr said that using ER opioids can be really bad. I asked if patients taking Multiple pills a day is any better? Dr said no but her patients are mostly medicaid and its hard to get them approved anyway. Discussed caresource, medicare and commercial coverage. Discussed attributes, conversions and Helen profile and told her she's missing to if she's not discussing with at least 2 patients a day that meet the indication. Dr said she will try harder. Reviewed when patients are appropriate for Oxycontin and discussed attributes with conversions.
PPLPMDL0020000001	Valley View	OH	44125	11/24/2014	Reviewed OxyContin and Butrans utilization with Aaron, no new info learned
PPLPMDL0020000001	Akron	OH	44333	11/24/2014	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44320	11/24/2014	Reviewed OxyContin and Butrans attributes, discussed insight 18 and where each product fits. Monique said that she's just getting her feet wet with prescribing opids and thanked me for the information. Discussed copay cards, managed care and then asked her for business and she agreed to keep them in mind.
PPLPMDL0020000001	Parma	OH	44129	11/24/2014	No new information learned on this call.
PPLPMDL0020000001	Fairlawn	OH	44333	11/24/2014	Jessica the pharmacist said that she just filled a new oxycontin for dr Petrus today. She said it was A 30my dose for a patient she thinks has been diagnosed with cancer. Reviewed oxycontin dosing and MVA pages 8-9.
PPLPMDL0020000001	Cleveland	OH	44130	11/24/2014	Reviewed Butrans managed care and patient type selection.
PPLPMDL0020000001	Cleveland	OH	44130	11/24/2014	Asked him to think of a few of his patients like Kathy. He was, so then I asked him what he would do next with a patient like this. He said that people stay away from oxycontin, but ideally ER med. I asked him why oxycontin q12 would not be appropriate for this patient in around the clock pain. He didn't have an answer. Reviewed doses, reformulated, but still abusable oxycontin. He does choose it for his elderly patients and will keep this information in mind. I asked him to imagine Kathy profile but Tramadol instead of hydrocodone. Where would he go with that patient? Reviewed Butrans, initiation, titration, approved application site, managed care. He said that he can think of a few patients that would be perfect for this product.
PPLPMDL0020000001	Cleveland	OH	44102	11/24/2014	Reviewed OxyContin/Butrans Initiation/Titration along with Utilization
PPLPMDL0020000001	Akron	OH	44333	11/24/2014	Dr told me that he started a patient on oxycontin this morning who came in on 40mg of Norco and said the patent was not a candidate for intervention at this point. Dr said he started on 30mg q12 of oxycontin. Reviewed dosing and steady state with titration up or down. Discussed Butrans and when he should be initiating based on daily dose of ultram or hydrocodone.

PPLPMDL0020000001	Akron	OH	44303	11/24/2014	Discussed Butrans and oxycontin with Rod and Rod said that he hasn't seen any new prescriptions recently but they ones he has continue to come in for refills. Checked copy card stock and reviewed them. Rod said that he will continue to ask patients to speak with their doctor about other options when he sees multiple refills of IR opioids.
	Middleburg Heights	OH	44130	11/24/2014	He was heading to the hospital and just stopped to talk for a bit. He says that he tries not to write for oxycontin. Quickly reviewed reformulated product, also saying that it can still be abused. Asked him to think about his patients that are in around the clock pain and his treatment approach. He said there isn't time to discuss that. I said that ER meds like butrans and oxycontin are meant for patients in around the clock pain. I asked him for two patient types. The Norco patient needing more than 4 pills per day for oxycontin and the tramadol patient who needs more pain relief, try butrans before going to Norco. He said that it makes sense.
PPLPMDL0020000001	Cleveland	OH	44113	11/24/2014	Reviewed OxyContin every 12hours, 7 tablet strengths, Formulary along with Butrans CIII, 7 day transdermal, Said ok will keep it in mind, Asked for 1 patient today
PPLPMDL0020000001	Mayfield Heights	OH	44124	11/25/2014	Met with medical assistant at front window. Presented Oxycontin, Butrans as ER opioids for patients with daily, atc, long term pain. Discussed, left Butrans decision tree piece & OxyContin slim jim for Dr. Dews.
PPLPMDL0020000001	Westlake	OH	44145	11/25/2014	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	11/25/2014	Spoke with Sam the tech about oxycontin and Butrans dosing, attributes, conversions and appropriate patients. Sam said that they see a fair amount of Butrans prescriptions from the pain group in the hospital and oxycontin from the same patients every month. Reviewed copy cards for each product.
PPLPMDL0020000001	Brooklyn	OH	44144	11/25/2014	Reviewed OxyContin every 12hours, Med D coverage along with Butrans CIII, 7 day transdermal, Said ok will continue to prescribe for appropriate patients,
PPLPMDL0020000001	Cleveland	OH	44106	11/25/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	11/25/2014	No new information learned on this call.
PPLPMDL0020000001	Brooklyn	OH	44144	11/25/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	11/25/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	11/25/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	11/25/2014	No new information learned on this call.
PPLPMDL0020000001	Berea	OH	44017	11/25/2014	No new information learned on this call.
PPLPMDL0020000001	Mayfield Hts	OH	44124	11/25/2014	No new information learned on this call.
PPLPMDL0020000001	Berea	OH	44017	11/25/2014	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	11/25/2014	No new information learned on this call.
PPLPMDL0020000001	Tallmadge	OH	44278	11/25/2014	I asked dr what dose of tramadol he typically takes his patients to until he changes therapy? Dr said it depends on the patient and said sometimes it's 200mg and sometimes it's more. I asked what would make him change therapy and he said the diagnosis will dictate that.m I reviewed the Helen profile and then asked him to use it more frequently. Discussed oxycontin dosing and conversion.
PPLPMDL0020000001	Westlake	OH	44145	11/25/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44106	11/25/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44106	11/25/2014	Quick OxyContin reminder, Formulary coverage, Savings cards along with Butrans, CIII, Initiation/Titration And Med D opportunity, said ok, schedule with Terrah lunch for Jan.
	Akron	OH	44312	11/25/2014	Dr told me that he had a patient come in yesterday for a follow up appointment who was on Butrans. Dr said that the patient couldn't be more happy with Butrans and is doing very well. I asked dr what the patient was taking prior to Butrans and he said hydrocodone and was not controlled. Dr said the patient was titrated to 10mcg and is doing great. I asked dr to look for candidates who are in pain around the clock on tramadol and left him the Helen profile.
PPLPMDL0020000001	Westlake	OH	44145	11/25/2014	After the insight 18 we talked about trigger signals to identify atc chronic Pain? Dr said its usually a length of time, dr said he also will try a few immediate release product. I asked why would he waste the time moving from one short to another short acting time if it was act? Dr said placebo is a big factor sometimes. Were talked about the pan patient appropriate for oxycont after norco and the Butrans patient after norco. We reviewed dosing and abuse potential. Went over a few managed care plans.
PPLPMDL0020000001	Uniontown	OH	44685	11/25/2014	Reviewed the Helen profile with Kim the pharmacist and asked her if she has patients who are maxed out on it and then moved to hydrocodone? Kim said it happens all the time. I asked Kim if she would tell the patients in this situation to speak with their dr about the ER options available? Kim said she has and will continue to make recommendations for patients to speak with their doctors. Reviewed OxyContin opportunities for hydrocodone doses over 40mg a day.
PPLPMDL0020000001	South Euclid	OH	44121	12/1/2014	Met with medical asst Kaitlyn. Presented my products for patients with daily, atc, long term pain. Left Helen patient profile and OxyContin slim jim.
PPLPMDL0020000001	Westlake	OH	44145	12/1/2014	Talked about the hydrocodone being rescheduled and options during the patients reassessment visits. Dr said he tends not to write schedule two products because it's too much hassle. We talked about the appropriate patient for Butrans and the dr agreed he had a few patients that might be a candidate for it. Talked about the abuse potential for OxyContin and Butrans.
PPLPMDL0020000001	Westlake	OH	44145	12/1/2014	Hydrocodone insight. She told me how she has worked so many Hours. She and the dr told me they see hundreds of hydrocodone a month now. Dr said he has a pain contract and will write out three months. I asked if they loose it and he said no because he will not give a new one. No said she follows dr Wolff and she will not write schedule two products cause he said no. Reviewed Butrans, dosing, patch location managed care and reviewed
PPLPMDL0020000001	Parma	OH	44134	12/1/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	12/1/2014	After hydrocodone insight, I asked him if he saw an increase of patients per month? Dr said not as much as other ppl in the practice but yes. Dr said they are trying to refer out as many pain patients as possible because they can't handle the work flow. Dr said he doesn't write many extended release products because most are acute. He did acknowledge there might be a few appropriate patients that meet indication for Butrans and or OxyContin.
PPLPMDL0020000001	Cleveland	OH	44195	12/1/2014	Reviewed dosing and Initiation guide.
PPLPMDL0020000001	Cleveland	OH	44195	12/1/2014	Quick OxyContin reminder, Savings cards along with Butrans 7 day transdermal, Savings Cards, Said ok will consider for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44195	12/1/2014	Quick Review Of OxyContin every 12hours, Formulary/savings cards review, along with Butrans for those patients requiring around the clock analgesia. Said he will continue to prescribe for appropriate patients, Asked to book
PPLPMDL0020000001	Cleveland	OH	44114	12/1/2014	Reviewed OxyContin every 12hours, 7tablet strengths along with Butrans for those patients requiring around the clock analgesia, Initiation/Titration, Said ok will continue to prescribe for appropriate patients.
PPLPMDL0020000001	Akron	OH	44333	12/1/2014	Discussed attributes, conversions, appropriate patients, dosing and titration for both Oxycontin and Butrans. Reviewed Helen profile in depth for Butrans and asked for her to go to the doctors when She knows a patient is in pain around the clock so the ER opioids Oxycontin or Butrans are options.
PPLPMDL0020000001	Garfield Hts	OH	44125	12/1/2014	Reviewed OxyContin every 12hours, Savings cards along with Butrans CIII, 7 day transdermal. Said Ok will consider for appropriate patients
PPLPMDL0020000001	Parma	OH	44129	12/1/2014	Doctor has been finding appropriate patients for both oxycontin and butrans. He is having some difficulty getting them approved on workers comp. we discussed the requirements which he believes shouldn't be required.
PPLPMDL0020000001	Akron	OH	44313	12/1/2014	He is frustrated. He councls the patients, had their new med picked out and then quickly get rejected. Reviewed formulary grids and asked him to keep trying.
					Spoke with Tom about oxycontin and Butrans appropriate patients and asked him if he sees the same customers maintaining IR opioids for an extended period of time? Tom said all the time and that some don't even need it but they are in th habit of taking the pills. Spoke about Butrans once a week patch and OxyContin single entity q12 dosing.
PPLPMDL0020000001	Fairlawn	OH	44333	12/1/2014	No new information learned on this call.
PPLPMDL0020000001	Garfield Hts	OH	44125	12/1/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44103	12/1/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	12/1/2014	No new information learned on this call
PPLPMDL0020000001	Westlake	OH	44145	12/1/2014	No new information learned on this call.
PPLPMDL0020000001	South Euclid	OH	44121	12/1/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44125	12/1/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	12/1/2014	Introduction. Hydrocodone insight dr said it is making everyone busier, dr informed me that he does not treat chronic pain. Reviewed indication and highlighted products and Butrans dosing.
PPLPMDL0020000001	Westlake	OH	44145	12/1/2014	Opened w hydrocodone insight and talked about how he treats atc pain...dr said he writes opioids and a few patients might be appropriate for a different delivery system.
PPLPMDL0020000001	Westlake	OH	44145	12/1/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44130	12/1/2014	Short interaction. He has several patients in around the clock pain that are appropriate for oxycontin and doing well. He has not found any patients for butrans yet. Reviewed Helen as appropriate butrans patient. Meh said he will keep that on his mind.
PPLPMDL0020000001	Westlake	OH	44145	12/1/2014	No new information learned on this call.
PPLPMDL0020000001	Fairlawn	OH	44333	12/1/2014	Good conversation about Oxycontin and Butrans. Recapped last call and discussed the opportunities that exist in his office when it comes to patients on hydrocodone. Told dr that Oxycontin is a viable option for some patients who are taking over 40mg of hydrocodone a day or on percocet and are still in pain around the clock. I showed dr the 10mg page from the oxycontin MVA and asked him to use it at the first sign of percocet not meeting expectations. Dr said that's a good point and said that he will try to do that and said it may be easier for the patient to consider another option the earlier he tries. I told dr that's a great approach. I asked dr on average what dose of ultram does he take his patients to before deciding on another option? Dr said usually 200mg a day. Reviewed the Helen profile and asked for him to use Butrans in that exact location before he moves to another IR opioid. Dr said he agrees and will continue to look. Discussed managed care and copy cards.
PPLPMDL0020000001	Fairlawn	OH	44333	12/1/2014	Quick hello at front counter and told him to please review the oxycontin and Butrans options available to him and when to use them. Dr said ok and said he knows he should be using each instead of always referring. I told dr that's good to hear. Nothing else learned.
PPLPMDL0020000001	Lyndhurst	OH	44124	12/1/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	12/1/2014	No new information learned on this call.
PPLPMDL0020000001	Independence	OH	44131	12/1/2014	No new information learned on this call.
PPLPMDL0020000001	Highland Heights	OH	44143	12/1/2014	Met with med asst at front window. Left Helen profile and Oxycontin conversion guide for Dr. Salama. Medicare D pull through and BWC reminder for med assts.
PPLPMDL0020000001	Fairlawn	OH	44333	12/1/2014	I asked dr if he has patients currently that come to see him on IR opioids? Dr said he does. I asked if he ever converts them to an ER opioid? Dr said no because it's not his job. I asked what he does en and he said he allows the pain dr to handle that. Left information on oxycontin and Butrans.
PPLPMDL0020000001	Lyndhurst	OH	44124	12/1/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	12/1/2014	Hydrocodone insight. Dr said it won't affect him because he gives no more than three pills of any pain killer. Drs aid he never heard about Butrans before and said he had no interest In hearing about OxyContin. We talked about Butrans. Reviewed indication and dosing. Dr said he would never write any extended release product.

	Lyndhurst	OH	44124	12/1/2014	Lunch. Presented Helen profile after hydrocodone insight. Dr has no issue with Butrans. Discussed proven efficacy, safety, clinical trials; studied in osteoarthritis and chronic low back pain. If butrans not appropriate, Oxycontin an option, dosed every 12 hrs. Dr. replied, you know I don't use Oxycontin, there's a problem with all the combinations area hcps are writing - they are writing too many long actings, combined with short actings - example: patient recently referred to him was on OxyContin and Percocet, Adderall, etc. He felt, this female patient, around age 50, on too many products that can cause respiratory depression. Empathized with is view; reinforced that patients with legitimate, daily, etc, long term pain, trusted by you, should be treated with something and if he's only comfortable with Butrans, then continue with Butrans.
PPLPMDL0020000001	Lyndhurst	OH	44124	12/1/2014	Lunch. Continuation of last call. For trusted patients, who have failed on 3-4 Tramadol daily, or opioid naive like Helen, Butrans 1x week is option. Proven efficacy, safety in clinical trials and studied in chronic back pain and osteoarthritis, this week, consider for these patient types. If not appropriate, OxyContin, dosed every 12 hrs, also proven efficacy, safety in clinical trials for patients who have daily, etc, long term pain and used as prescribed.
PPLPMDL0020000001	Lyndhurst	OH	44124	12/1/2014	Lunch. Continued with hydorodone insight, and more patients coming in every 30 days, and his opportunity to to re assess and if patient meets ER opioid indication. If they do, consider Butrans as option. Here's why: showed patient profile Helen. this week, I'd like you to think about patient like Helen for Butrans. Either opioid naive, or after patient has failed on 3-4 Tramadol daily. butrans showed proven efficacy, safety in clinical trials, was studied in chronic low back and osteoarthritis. When not appropriate, controlled release OxyContin, dosed every 12 hours, is another option.
PPLPMDL0020000001	Akron	OH	44333	12/1/2014	Quick hello at counter in Fairlawn and handed him the titration and conversion guide for oxycontin and asked him if he's having clinical success and if so where? Dr said he's too busy to talk and said he knows I'm coming in for lunch soon and will discuss then. I told him that sounds good and hope he continues to prescribe.
PPLPMDL0020000001	Cleveland Westlake	OH	44125	12/1/2014	Reviewed OxyContin every 12hours, savings cards along with Butrans CIII, 7 day transdermal. Said ok, she sends to pain mgmnt ,
PPLPMDL0020000001	Cleveland Westlake	OH	44145	12/1/2014	Hydrocodone insight. Talked about patient volumm that has increased and how they had to work longer hours. The lead doctor Wolff has instructed them not to write schedule two products and inky refills not initiation if opioids of any kind. We talked about schedule two OxyCotin and schedule three Butrans. Highlighted refills w Butrans and covered abuse potential. Reviewed indication and asked if some of their assesment patient might be appropriate for Butrans if they need a change.
PPLPMDL0020000001	Akron	OH	44313	12/1/2014	I told dr that he has two viable options for his patients that have around the clock pain,maybe are not surgical candidates, and are motivated to get their pain under control and current therapy is inadequate. Told dr oxycontin can be used for those taking over 40mg of hydrocodone and Butrans under 40mg. Dr said he's trying to not write anything. I asked if he going to refer all those patients then? He said possibly because he doesn't want to deal with pain management.
PPLPMDL0020000001	Fairlawn	OH	44333	12/1/2014	I asked dr if he's going to come back to lunch to hear new information about oxycontin and Butrans? Dr said he won't make it and asked for one point on each. I told him that when he has patients over 40mg of hydrococone or on percocet and are uncontrolled and have pain around the clock, oxycontin may be appropriate. Dr said he agrees with that. I told him to use all 7 doses. Told him Butrans is an option that he shouldn't be missing out on because it's a schedule 3, 7 day patch for those failing ultram and are in pain around the clock. Gave him the Helen profile. Dr said he will review.
PPLPMDL0020000001	Fairlawn	OH	44333	12/1/2014	Spoke with Gilbert and discussed his dispensing of the Butrans and OxyContin. Gilbert said they continue to fill oxycontin and have been giving out copy cards that patients seem to forget. He said that Butrans for some reason patients tend to remember their cards and really like the trial card. Reviewed dosing for each product and checked stocking.
PPLPMDL0020000001	Mayfield Heights	OH	44124	12/1/2014	Quick Butrans, OxyContin mention to Dr. Vilinsky for trusted patients with daily, etc, long term pain. met with both med assts Keanna and Tanisia. Discussed patient proper application, 8 application sites, rotate between sites every 21 days, and other information in patient guide including diary. Left Helen profile. Discussed skin irritation data, from fpi/clinical studies for elderly. For patients under age 65, discussed trial, savings card details.
PPLPMDL0020000001	westlake	OH	44011	12/1/2014	Hydrocodone insight. Dr and the np said they have been over whelmed by the number of hydrocodone patients wanted scripts and the dr said he has decided not to write schedule two products. We talked about hat small amount he might treat and he said it will be very small and most will be refers to a specialist. Dr said he doesn't want to write opioids that need daily use. We reviewed the indication and dosing. Dr said Butrans will be the product he selects when the indication was met. We talked about limitations of use per the fpi and gave fair balance on abuse potential. Dr agreed to see me once a month with out an opt. Dr said he will not accept food or beverage any more per their office of uh. Closed for the appropriate business after norco and when a patient is requiring a change of therapy.
PPLPMDL0020000001	Cleveland	OH	44107	12/2/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	12/2/2014	Hydrocodone insight. Reviewed the over 40mg of oxycodone patient she has and she said none. We talked about how she treats chronic osteoarthritis. Dr does use pain opioids and dr said she would be interested in trying Butrans. We reviewed dosing, a abuse potential and managed care.
PPLPMDL0020000001	Cleveland	OH	44113	12/2/2014	Reviewed Butrans Initiation/Titration, Savings Cards, Med D coverage along with OxyContin every 12hours, 7 tablet strengths, Savings cards, Said Ok will continue to prescribe for appropriate patients
PPLPMDL0020000001	Westlake	OH	44145	12/2/2014	Hydrocodone insight. Dr said they have been referring chronic pain patients out. We talked about the under 40mg Chronic pain patients. She said it wasn't too many. Reviewed Butrans and dosing. Gave fair balance of abuse potential.
PPLPMDL0020000001	Garfield Hts	OH	44125	12/2/2014	Reviewed OxyContin every 12hours, Savings cards along with Butrans for those patients requiring around the clock analgesia that are failing on present therapy, said ok, prescribing less but will consider for appropriate
PPLPMDL0020000001	Westlake	OH	44145	12/2/2014	Reviewed hydrocodone insight. Asked if she has every written 90 to 120 pills per month for chronic pain patients. She said yes. I asked how she feels whe. The patients on those atc doses aren't controlled and are asking for a change. The dr gave me several concerns. I asked if the Butrans dosing might be an option for some of these patie ts and she said yes. Dr asked several questions which were addressed via the core visual aid. We reviewed abuse potential. Dr stated that she was happy to know there was a schedule three option that was not a patch and the dr stated she would talk to a few other doctors that didn't come back to lunch today. We did discuss OxyCotin, but her interest was with learning about Butrans because she knew nothing of it.
PPLPMDL0020000001	Cleveland	OH	44195	12/2/2014	Reviewed OxyCotin 7 tablet strengths, savings cards along with Butrans for those patients requiring around the clock analgesia, Said Ok will continue to prescribe for appropriate patients
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	12/2/2014	Discussed use of oxycontin in appropriate patients and asked him to covert more patients on percocet who meet the indication for oxycontin. Reviewed dosing and conversions along with the opportunity to use Butrans for patients taking under 40mg of hydrocodone who are in pain around the clock.
PPLPMDL0020000001	Akron	OH	44312	12/2/2014	Spoke with Danielle the pharmacist about Butrans and OxyContin. Danielle said they have about 5 patients on Butrans and many on OxyContin. I reviewed attributes, conversions and titration for each product and appropriate patients. Danielle said she didn't know about the Butrans 7.5 mcg and that it is a schedule 3. Discussed copy cards for each product and asked for her to stock all doses.
PPLPMDL0020000001	Cleveland	OH	44113	12/2/2014	Reviewed Butrans Med D coverage, formulary grid along with OxyContin every 12hours, said ok will continue to prescribe for appropriate patients
PPLPMDL0020000001	cleveland	OH	44135	12/2/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	12/2/2014	No new information learned on this call.
PPLPMDL0020000001	CLEVELAND	OH	44195	12/2/2014	Reviewed OxyContin/Butrans utilization along with savings cards, Said Ok
PPLPMDL0020000001	Cleveland	OH	44195	12/2/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	12/2/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	12/2/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	12/2/2014	No new information learned on this call.
PPLPMDL0020000001	Valley View	OH	44125	12/2/2014	Discussed OxyContin/Butrans formulary coverage along with Savings cards,
PPLPMDL0020000001	Westlake	OH	44145	12/2/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	12/2/2014	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44312	12/2/2014	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44312	12/2/2014	No new information learned on this call.
PPLPMDL0020000001	Lyndhurst	OH	44124	12/2/2014	Breakfast appt. Addressed Dr. Reed's previous objection of cost regarding OxyContin, specifically with Medicare D patient base. Reinforced that OxyContin has 66% preferred coverage on area Medicare plans. Asked her to focus on UHC AARP and Silverscripts. She states that AARP/Secure Horizons dropped all of her patients. She's extremely upset she says. The group only works with 1-2 neurologists in Cuyahoga County. Discussed Caresource Prior Auth for Butrans: Dr. Reed says this is a group she will focus on Butrans.
PPLPMDL0020000001	Westlake	OH	44145	12/2/2014	No new information learned on this call.
PPLPMDL0020000001	Lyndhurst	OH	44124	12/2/2014	Breakfast appt. Medicare D pull through and Caresource prior auth discussed.
PPLPMDL0020000001	Westlake	OH	44145	12/2/2014	Asked about current patients on Butrans. Dr said they were doing fine. Talked about dosing and managed care.
PPLPMDL0020000001	Stow	OH	44224	12/2/2014	No new information learned on this call.
PPLPMDL0020000001	Rocky river	OH	44116	12/2/2014	No new information learned on this call.
PPLPMDL0020000001	Lyndhurst	OH	44124	12/2/2014	Breakfast Appt. Discussed Medicare D status for area plans: OxyContin has preferred status on 66% of their Medicare D plans. Discussed details, ease of Caresource Prior Auth for Butrans. Research UHC AARP and Secure Horizons for their practice, as they state the plan has dropped plan from practice. The plan caters to only a few Cuyahoga Cty neurologists.
PPLPMDL0020000001	Akron	OH	44310	12/2/2014	Dr started off by telling me he had a new patient yesterday that was taking 20mg of Oxycontin q12 and he refilled it because the patient was mobile and controlled on OxyContin. I told dr that's great to hear and that if he didn't thanked it worked or the AE's outweighed everything else he wouldn't have refilled it. Dr agreed and said not to expect it all the time. Reviewed doing and conversions and then 10mg page in the MVA. Discussed insight 18 and discussed initiating Butrans for his tramadol patients who meet the indication instead of moving to hydrococone. Dr said he already does that as much as he can. Reviewed both Helen and Kathy profiles and asked dr what type of condition he treats most often? Dr said chronic low back pain must be the most. Discussed inclusion and exclusion criteria from bup 3015.
PPLPMDL0020000001	Akron	OH	44305	12/2/2014	Spoke with Matt the pharmacist about Butrans and OxyContin. Discussed what he's seeing in the way of hydrocodone recently and Matt said he's not seeing much change but patients are still upset about having to pick it up each month. Reviewed dosing, conversions and the Helen profile as a good candidate. Matt said he's still seeing thusual suspects for oxycontin and filled a few for Petrus recently and a couple from Matthew Jones.
PPLPMDL0020000001	Lyndhurst	OH	44124	12/2/2014	Met with med assts and Kris (front desk) and asked to see Dr. Goldner. She states he's too busy, not good day. Discussed Butrans (CIII 1x week pain patch), discussed and left (4) Butrans patient guides. Quick OxyContin Introduction to myself. Opened w hydrocodone insight. No a said he doesn't handle treating pain. I asked why not? She told me per the office policy. I asked if she filled refills? She said w dr approval first. Highlighted the appropriate person per our indication for oxycton and Butrans, listed abuse potential and the scheduling of both products. Highlighted the over 40mg of norco patient meeting indication- OxyContin and the under 40mg total dose per indication for Butrans.
PPLPMDL0020000001	Cleveland	OH	44195	12/2/2014	Reviewed OxyContin every 12hours, Savings cards along with Butrans formulary coverage, said ok will continue to prescribe, asked to schedule appt in Jan
PPLPMDL0020000001	Akron	OH	44333	12/3/2014	Dr spoke with me about OxyContin and how he's getting referrals from dr Steurer who are just taking too high of doses of oxycodone and multiple other analgesics. Dr sad he likes Oxycontin for patients who need it and not intervention candidates. I told him that's still good to hear and asked if he's taking those patients? Dr said he is not because he doesn't want to clean up his mess. I reviewed OxyContin dosing flexibility and the the ability to titrate up or down. Discussed Butrans need for his patients and him identifying appropriate patients under 65yrs old. Discussed inclusion and exclusion criteria.
PPLPMDL0020000001	Bedford	OH	44146	12/3/2014	Doctor is very happy about the choices he has for extended release medication. He thinks that patients should be taking fewer pills. Appreciated the butrans coupons.



PPLPMDL0020000001	Cuyahoga Falls	OH	44223	12/3/2014	Spoke with the tech jim and discussed Butrans and OxyContin attributes, conversions and appropriate patients. Jim said he didn't know Butrans was a schedule 3 and it should make a difference for patients who have been on a schedule 2 medication. Reviewed copy cards for both products.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	12/3/2014	Meeting in pain management office with dr all and dr Narouze along with nursing staff. Discussed Butrans and OxyContin appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44102	12/3/2014	Reviewed OxyContin every 12hours, 7 tablet strengths,along with Butrans CIII. 7 day transdermal, Initiation/Titration, Patient info booklets, Said ok, will consider for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44102	12/3/2014	Reviewed OxyContin every 12hours, 7 tablet strengths,along with Butrans CIII. 7 day transdermal, Initiation/Titration, Patient info booklets, Said ok, she will consider for appropriate patients
PPLPMDL0020000001	Beachwood	OH	44122	12/3/2014	Doctor has chosen oxycotin for a few appropriate patients. He appreciates fewer pills for his patients in around the clock pain and abuse deterrent characteristics. He still needs to be reminded of butrans as an option. Reviewed Kathy as an appropriate patient type. He will think of it for someone because he believes it is a good option<font color=blue>-b>CHUDAKOB's query on 12/12/2014</font>Kathy, how did that conversation go to where he got to "he appreciates fewer pills"<font color=green>-b>LARAWKA's response on 12/14/2014</font>He told me that he doesn't like his chronic pain patients to be taking pills every few hours with IR, he likes the q12 dosing of oxycotin.<font color=blue>-b>CHUDAKOB added notes on 12/15/2014</font>-b>-<font>OK. Thanks for the clarification.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	12/3/2014	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44313	12/3/2014	No new information learned on this call.
PPLPMDL0020000001	Bedford	OH	44146	12/3/2014	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	12/3/2014	Spoke with a technician about Butrans and OxyContin. Reviewed both product attributes and conversions. Discussed copy cards.
PPLPMDL0020000001	Solon	OH	44139	12/3/2014	No new information learned on this call.
PPLPMDL0020000001	Bedford	OH	44146	12/3/2014	.He is trying to prescribe fewer opioids and refer to pain management. He thinks that ER meds are appropriate if patients need more than 4 IR. Butrans might be an option for some patients but he usually doesn't think of it.
PPLPMDL0020000001	Cleveland	OH	44109	12/3/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44144	12/3/2014	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44307	12/3/2014	Short discussion with dr Leone about identifying patients who meet the indication for Butrans. Dr said he won't have too many of them but does see when it's necessary and said that the patient must have ongoing pain. I told dr th indication and asked him to also consider patients who are failing hydrocodone and meet the Butrans indicatin. Reviewed OxyContin conversions and titratin and identifying patients who also meet the indication.
PPLPMDL0020000001	Cleveland	OH	44102	12/3/2014	Reviewed with Ryan RPH OxyContin/Butrans Initiation/Titration, said ok, reiterated. Medicaid population
PPLPMDL0020000001	Cleveland	OH	44102	12/3/2014	Reviewed OxyContin every 12hours, 7 tablet strengths,along with Butrans CIII. 7 day transdermal, Initiation/Titration, Patient info booklets, Said ok, will look to start patient this afternoon.
PPLPMDL0020000001	Akron	OH	44307	12/3/2014	Short discussion with dr Leone about identifying patients who meet the indication for Butrans. Dr said he won't have too many of them but does see when it's necessary and said that the patient must have ongoing pain. I told dr th indication and asked him to also consider patients who are failing hydrocodone and meet the Butrans indicatin. Reviewed OxyContin conversions and titratin and identifying patients who also meet the indication.
PPLPMDL0020000001	Cleveland	OH	44102	12/3/2014	Reviewed OxyContin every 12hours, 7 tablet strengths,along with Butrans CIII. 7 day transdermal, Initiation/Titration, Patient info booklets, Said ok, has a patient in mind that is coming in next week
PPLPMDL0020000001	Cleveland	OH	44195	12/3/2014	Reviewed OxyContin every 12hours, 7 tablet strengths,along with Butrans CIII. 7 day transdermal, Initiation/Titration, Patient info booklets, Said ok will continue to look for appropriate patients,
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	12/3/2014	Led wi insight 18 and then expanded it on the original hydrocodone insight. I told dr she has some reassessment to do for those patients and if they are taking 90 pills or more a month of hydrocodone, Butrans may be appropriate. I told dr to use Butrans for patients like Kathy and then Helen. Told her to use Butrans when appropriate for ultram patients before she would move from ultram to hydrocodone. Dr agreed and asked if she can still call in and refill Butrans? I told her she can and she said that is a big advantage for Butrans. I told dr I'm glad she sees it that way. Asked for comminuted use in patients like Helen and Kathy and then to not forget words from patients that may be an opportunity for Butrans. Told dr if she is considering increasing the dose or moving from one IR opioid to another to consider if the patient is in around the clock pain and may be for an extended period of time. Reviewed no Kathy and Helen profiles. Dr agreed and said she really likes Butrans and said she will focus on that. Reminded her that oxycotin is also appropriate for hose percocet patients needing
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	12/3/2014	Reviewed OxyContin Savings Cards/formulary grids along with Butrans Initiation/Titration, said ok will continue to prescribe for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44115	12/4/2014	Reviewed Butrans formulary grid/Initiation/Titration,along with OxyContin savings cards every 12hours said she will continue to prescribe for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44113	12/4/2014	Reviewed OxyContin every 12hours, Savings cards along with Butrans Initiation/Titration, application, Formulary status along with savings cards, Said ok will continue to look for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44114	12/4/2014	Reviewed OxyContin every 12hours, Savings cards, formulary coverage along with Butrans for those patients requiring around the clock analgesia, said ok will continue to prescribe for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44114	12/4/2014	Reviewed OxyContin every 12hours, 7 tablet strengths along with Butrans for those patients failing on present therapy requiring around the clock analgesia, said Ok will continue to look for appropriate patients
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	12/4/2014	Good discussion with dr about his use of OxyContin. Dr said that he just prescribed it to a new patient this morning. Dr said that the patient was taking way too many IR opioids in losing norco and percocet. Dr said he started on OxyContin 30mg. I told dr that's great to hear and to also use Butrans for those under 40mg of hydrocodone. Dr said he loves Butrans and really likes the coverage with pa for Caresource. I reminded him to also use it for patients with medicare D and discussed coverage.
PPLPMDL0020000001	Mayfield Village	OH	44143	12/4/2014	Hallway. Reminded Dr. of our last conversation; consider butrans in the office setting, as I realize the coverage at nursing homes may not be to his satisfaction. He says I really like and would prefer a 1x week medication for my patients; there's just not enough coverage on Medicare D. Med D pull through. Quick Oxycontin mention, start 10 mg, use lowest effective dose.
PPLPMDL0020000001	Stow	OH	44224	12/4/2014	Led with insight 18 and then discussed length of therapy on average for hydrocodone combo products. I told dr that the total daily dose will dictate when there a patient is appropriate for OxyContin or Butrans. Discussed OxyContin dosing and conversions from oxycodone and asked if he has existing patients that may meet this criteria? Dr said a small handful. I told him to evaluate those patients for either Oxycotin or Butrans. Dr asked ab average cost for Butrans? I told hit depends on the plan and tier status. Dr asked about commercial. Told him about average Croats for tier 2 with copy card and trial offer. Dr said ok and he might try it because he likes that he can call in Butrans and refill it.
PPLPMDL0020000001	Richmond Heights	OH	44143	12/4/2014	No new information learned on this call.
PPLPMDL0020000001	Mayfield Village	OH	44040	12/4/2014	Met with tech. Pharmacist not available; nothing new learned from last visit.LeftOxyContin savings sell sheet, Butrans (1) patient guide, RX Patrol flashcard.
PPLPMDL0020000001	Cleveland	OH	44130	12/4/2014	He said the primary reason he hasn't been choosing butrans for his patients is cost. He is short staffed and just writes what is going to work for his patients and cost them the least. They do not have time for prior authorization. Reviewed formulary grid and his # 1 commercial plan of med mutual and preferred status of butrans, with the coupon how little they would play for an extended release medication for their around the clock pain, asked him to think about how many of his patients might be like Scott patient profile and taking IR meds around the clock. He said that is a good point to think about.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	12/4/2014	Told dr that I want him to focus on existing patients he has on hydrocodone and are coming in each month for their refill. I told him that if they need that next dose or can't tolerate it, Oxycotin or Butrans may be appropriate. To,d him to focus on patients 40mg a day of hydrocodone or more would be appropriate for oxycotin and under 40mg would be Butrans. Dr said it makes sense and will try.
PPLPMDL0020000001	Stow	OH	44224	12/4/2014	Spoke with holly and reviewed all attributes for both products. Holly said they are still not disowning any Butrans and some oxycotin but said there haven't been any new starts.
PPLPMDL0020000001	Stow	OH	44224	12/4/2014	No new information learned on this call.
PPLPMDL0020000001	Stow	OH	44224	12/4/2014	Led off with insight 18 and then discussed length of therapy on hydrocodone and time to conversion to an ER opioid. I asked dr if she is having issues with existing hydrocodone patients with it now being a schedule 2? Dr said a little yes. I showed her the dosing for OxyContin and Butrans and explained when each product is appropriate based on daily dose of hydrocodone. Dr said it makes sense. I asked her to reassess patients on hydrocodone or oxycodone to see if they would be appropriate for OxyContin.
PPLPMDL0020000001	Norton	OH	44203	12/4/2014	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	12/4/2014	Spoke with Matt about OxyContin and Butrans. Reviewed the dosing for each and asked him if he's stocking all Butrans doses? Matt said they do have them all and are dispensing it fairly regularly. I asked him to please continue to hand out the copy cards for each product.
PPLPMDL0020000001	Mayfield Heights	OH	44143	12/4/2014	MEt with med assts at front window. Left & discussed literature w med assts including patient journal, a few green protect your meds at home brochures and Butrans "only CII on market" brochure and OxyContin conversion guide for Dr. Moyal. (left same for Drs. Petroff and Papirova) NOTE: Dr. Moyal only HCP in today.
PPLPMDL0020000001	Cleveland	OH	44115	12/4/2014	No new information learned on this call.
PPLPMDL0020000001	Middleburg Hts	OH	44130	12/4/2014	Talked to his assistant Maria about setting up some time to meet with Dr. Ryan next year for new product. She said she would talk to him and get back with me. Pulled through excellent formulary coverage for my two products, left patient resources for butrans.
PPLPMDL0020000001	Highland Heights	OH	44143	12/4/2014	Lunch. Followed up on OxyContin dosing schedule for patients with daily, atc, long term pain with Dr. Salamaa; also enforced Butrans ease of access for his BWC patients; Caresource Prior Auth reminder. Presented to Dr. and medical assistants PAP pain journals. Asked them to let me know if they are helpful and if they'd like more during my next visit.
PPLPMDL0020000001	Cleveland	OH	44115	12/4/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44115	12/4/2014	Reviewed OxyContin/Butrans utilization formulary opportunity, said to follow up with Jodi and George in outpatient
PPLPMDL0020000001	Cleveland	OH	44115	12/4/2014	Talked about why he would pick a patch for atc dosing chronic pain? Dr said he liked Butrans was schedule three. Dr asked about OxyCotin managed care, we reviewed. I also talked w sarah about managed care.
PPLPMDL0020000001	Norton	OH	44203	12/4/2014	Reviewed OxyContin/Butrans Initiation/Titration along with Savings cards said ok
PPLPMDL0020000001	Cleveland	OH	44115	12/4/2014	I discussed insight 18 and asked him if he has had any opportunity starting Butrans when those patients are reassessed and are in pain around the clock? Dr said he offers it all the time but said about 50-60% of the time it's either too expensive or the oaters say it doesn't work. Dr said he knows it's not for everyone but the ones who use it really like it. Reviewed Helen and asked him to also use Butrans for his patients on ultram before they get to hydrocodone and meet the Butrans indication. Dr said that's a good idea and has done it with success.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	12/4/2014	He didn't want to be talking. Asked him to think about a few of his patients in around the clock pain taking IR meds in 4-6 hour increments. Now think of that patient like Scott, getting oxycotin q12'or 7 day butrans pain patch for their around the clock pain.
PPLPMDL0020000001	Middleburg Heights	OH	44130	12/4/2014	Reviewed OxyContin every 12hours, savings cards along with Butrans for those patients that are failing on present therapy. 7 day transdermal, said ok but is sending all patients to pain mgmnt. but will consider for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44113	12/5/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	12/5/2014	Quick review of OxyContin savings cards along with Butrans for those patients that are failing on present therapy, said ok will consider,
PPLPMDL0020000001	Cleveland	OH	44113	12/5/2014	Quick OxyContin/Butrans reminder, Initiation/Titration along with Med D coverage. Said ok will consider for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44113	12/5/2014	Led off with insight 18 and time it takes on average to get a patient on an ER opioid. I asked dr where and when he's using oxycotin and Butrans? Dr said the rescheduling of hydrocodone has not affected them because they never called it in anyway. Dr said he really likes both products and is using OxyContin mostly when he must go to an ER from percocet or fentanyl. Dr said he likes all the doses and has no issues with titrating. Reviewed attributes, when are where to use and asked for him to initiate as soon as he knows the patient has around the clock pain. Discussed Butrans attributes, conversions, titration, appropriate patient types with Helen and Kathy. Dr said that he has been using it mostly for the patients he doesn't trust with oral medicines and told me he hadn't thought about using Butrans after ultram. I asked dr why he would go from ultram to hydrocodone, one IR to another IR opioid if he already knows the patient has around the clock pain. Dr said that's good information and will try it. Discussed copy cards and insurance coverages.
PPLPMDL0020000001	Uniontown	OH	44685	12/5/2014	

PPLPMDL0020000001	Cleveland	OH	44113	12/5/2014	Reviewed oxycontin every 12hours, Formulary coverage along with Butrans Initiation/Titration, formulary grid, said he will continue to prescribe for appropriate patients,
PPLPMDL0020000001	Cleveland	OH	44124	12/5/2014	Met with nurse Gail. Dr. C was in earlier but no longer in office. Quick mention of Oxycontin and Butrans with Gail. Left OxyContin conversion guide, Butrans "only CIII ER opioid" brochure. Can call/fax in with refills discussion w Gail. Left (1) PAP Journal for Dr. C's review.
PPLPMDL0020000001	Cleveland	OH	44113	12/5/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	12/5/2014	No new information learned on this call.
PPLPMDL0020000001	Mayfield Heights	OH	44124	12/5/2014	No new information learned on this call.
PPLPMDL0020000001	Mayfield Heights	OH	44124	12/5/2014	Front window. Left Butrans Kathy profile, OxyContin conversion guide. Left (2) Butrans patient guides. Reinforced ability to call/fax Butrans in with refills.
PPLPMDL0020000001	Westlake	OH	44145	12/5/2014	No new information learned on this call.
PPLPMDL0020000001	Beachwood	OH	44122	12/5/2014	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44305	12/5/2014	Discussed hydrocodone insight and talked about where oxycontin comes in. Reviewed MVA pages 8-14 and dr said that he knows all about it. Discussed him starting it sooner for those over 40mg of hydrocodone and how Butrans may play a role for some of his patients. Reviewed attributes for both products along with conversions and initiation doses.
PPLPMDL0020000001	Uniontown	OH	44685	12/5/2014	Spoke with Barb a pharmacist about OxyContin and Butrans attributes, conversions and patient profiles for Butrans. Barb said they aren't dispensing much Butrans but see their fair share of OxyContin. Discussed copy cards and insurance coverages.
PPLPMDL0020000001	Cleveland	OH	44113	12/5/2014	No new information learned on this call.
PPLPMDL0020000001	Uniontown	OH	44685	12/5/2014	Quick hello at counter and asked him if the rescheduling of hydrocodone Has affected him? Dr said a little because he has to see them each month. I told him Butrans is a schedule 3 which he can call in and refill for those who are in pain around the clock and meet the indication. Dr said that's huge. Gave him the new dosing piece and to use it more frequently while he's reassessing his hydrocodone patients. Reminded him that oxycontin is also an option and discussed dosing.
PPLPMDL0020000001	Akron	OH	44312	12/5/2014	No new information learned on this call.
PPLPMDL0020000001	Beachwood	OH	44122	12/5/2014	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44319	12/5/2014	No new information learned on this call.
PPLPMDL0020000001	Beachwood	OH	44122	12/5/2014	No new information learned on this call.
PPLPMDL0020000001	Uniontown	OH	44685	12/5/2014	Abby told me that she recently had a product she started on Butrans who was coming off hydrocodone. Abby said the patient didn't want to take it but she forced him to because the Norco wasn't working and he has chronic low back pain. I asked her if she has ever started a patient who was failing ultram? Abby said she hasn't and usually tries it after Norco. I asked why and she said she didn't know she could. Reviewed Helen profile and reviewed conversions from ultram. Abby said she will usually go up to 300mg a day then Norco. I told her they may be appropriate much sooner when on tramadol as long as they meet the indication. Abby said that's a good thought. Discussed OxyContin use, dosing, conversions and titration. Abby said she sometimes uses it after hydrocodone but not usually told they reach 40mg. I asked for earlier use when percocet patients have pain around
PPLPMDL0020000001	Cleveland	OH	44105	12/5/2014	Reviewed w/Hakim OxyContin/Butrans initiation/Titration, said ok, no new info
PPLPMDL0020000001	Akron	OH	44333	12/5/2014	Led with insight 18 and where and when to us Butrans. Discussed Helen and Nancy profiles and reviewed what it means for a patient to have pain around the clock. Discussed conversions, titration and conversions along with new 7.5 mg dose. Discussed that not all pharmacist will have all doses on the shelf and to set the expectations with the patients about sometimes waiting one day before they can get it from the wholesaler. Reviewed OxyContin use and MVA pages 6-14.
PPLPMDL0020000001	Beachwood	OH	44122	12/5/2014	Dr Tabaa is out sick so she is too busy today. Oxycontin q12 dosing works well for many of her patients. Still hasn't heard back regarding emirf so We submitted another for her. She wants to know how to advise patients when they want to discontinue butrans because of itching and rash. She is fine with savings cards and resources.
PPLPMDL0020000001	Cleveland	OH	44103	12/8/2014	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44134	12/8/2014	No new information learned on this call.
PPLPMDL0020000001	Munroe Falls	OH	44262	12/8/2014	Short discussion about how she can better identify an appropriate oatient for oxycontin and Butrans. Showed her the 10mg page in the MVA for oxycontin and Helen and Kathy for butrans. Dr said she's starting to feel more comfortable with Butrans and said she knows she needs to try and start more people on oxycontin.
PPLPMDL0020000001	Sagamore Hills	OH	44067	12/8/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	12/8/2014	Talked about hydrocodone insight and we talked about his thought on the impact it will have in his office. Dr said he doesn't wrte many extended release products. I asked why and he said he was more careful with writing controlled substances for chronic pain. We reviewed indication and talked about Butrans. Talked about the Tramadol patient who is not controlled on their pain medications and appropriTe for Butrans. Dr said he has had luck w Butrans and told me he liked the dosing. I asked him him what suggestions he could give me for talking to other specialists like himself. Dr said it was the dosing and schedule three that got his attention. We talked about the abuse potential and covered managed care.
PPLPMDL0020000001	Cleveland	OH	44114	12/8/2014	Reviewed OxyContin every 12hours, Savings cards along with Butrans for those patients failing on present therapy requiring around the clock analgesia, Said Ok will continue to prescribe for appropriate patients
PPLPMDL0020000001	Rocky River	OH	44116	12/8/2014	Hydrocodone insight. Dr shared w me that he will write for two months and see patient back for follow up. Dr said he doesn't have time to see them every month and said he is not accepting new pain patients. Dr told me he tried to give Butrans a few times but the patient secured to take he scrip. I asked him to recall how many doses they were on of the hydrocodone Nd for how long. His nurse helped him w the answers. The patient was over 120mg a month, 4x a day every 6 hours. I asked if the patient was controlled on the current medication and he said yes. We talked about the conversion guide and indicTion. We talked about the uncontrolled patient requesting a change if that would have been a different response by the patient. Dr said maybe so. We talked about patch location, abuse potential and managed care. Dr said he hasn't been writing OxyCotin except in his older patients. I asked why? Dr started to tell me it was more controlled and then he said I guess so is everything now a days. I asked him what he thought about the oxycodone molecule for treating pain, he said he uses oxycodone. I said if they are needing atc therapy and uncontrolled why not change to OxyContin dosed every 12 hours. He said he could. We talked about the coupons and a few plans big to the office. I closed I'm to convert from oxycodone to OxyContin per the appropriate patient currently uncontrolled. And closed for hydrocodone uncontrolled atc per indication patients. Dr said he would give it a try.
PPLPMDL0020000001	Cleveland	OH	44195	12/8/2014	Reviewed OxyContin every 12hours, Savings cards along with Butrans for those patients requiring around the clock analgesia that are failing on present therapy, Said Ok, will continue to prescribe for appropriate patients,
PPLPMDL0020000001	Garfield Hts	OH	44125	12/8/2014	Quick review of OxyContin every 12hours, Savings cards along with Butrans CIII, 7 day transdermal, said Ok will continue prescribe for appropriate patients
PPLPMDL0020000001	Garfield Hts	OH	44125	12/8/2014	Quick review of OxyContin every 12hours, savings cards along with Butrans Med D coverage said Ok will consider for appropriate patients , Also will be moving in Spring to a new location
PPLPMDL0020000001	Garfield Hts	OH	44125	12/8/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	12/8/2014	No new information learned on this call.
PPLPMDL0020000001	Northfield Center	OH	44067	12/8/2014	Talked with Kate the pahrmacist who told me they stock both oxycontin and butrans. She said they dispense a good amount of oxycontin. She said that the nordonia hills practice could you some education about ER meds. She didn't have time because they were short staffed. I quickly reviewed new dose of butrans available. Left coupons.
PPLPMDL0020000001	Tallmadge	OH	44278	12/8/2014	spoke with Ray about oxycontin and Butrans. reviewed dosing, conversions and asked him if he has had a any new patient starts? Ray said he only has a handful of patients on Butrans and no new ones on oxycontin. reviewed coverage and copy cards.
PPLPMDL0020000001	Akron	OH	44333	12/8/2014	No new information learned on this call.
PPLPMDL0020000001	Fairlawn	OH	44333	12/8/2014	No new information learned on this call.
PPLPMDL0020000001	Fairlawn	OH	44333	12/8/2014	No new information learned on this call.
PPLPMDL0020000001	Northfield	OH	44067	12/8/2014	Greg the pharmacist was alone and didn't have time to talk. He said they do have oxycontin but he has only dispensed one butrans. He did want savings cards for oxycontin. Quickly reviewed the formulary status and new dose of butrans.
PPLPMDL0020000001	Garfield Hts	OH	44125	12/8/2014	No new information learned on this call.
PPLPMDL0020000001	Fairlawn	OH	44333	12/8/2014	spoke with jessica and discussed who she is seeing oxycontin prescriptions from. jessica said that she usually sees the same people prescribing to the same patients. reviewed the dosing and coverage with copy cards.
PPLPMDL0020000001	Akron	OH	44333	12/8/2014	talked about butrans helen and kathy profiles and reminded her about coverage with commercial and medicare D.
PPLPMDL0020000001	Rocky river	OH	44116	12/8/2014	spoke with dr at window about when and why hes using oxycontin and Butrans. I told dr about the hydrocodone insight and the 40mg cut off for both products. told dr he needs to get back to initiating ER opioids when around the clock pain is present.
PPLPMDL0020000001	Rocky river	OH	44116	12/8/2014	Saw dr thru window. We talked about the patient over 40mg of hydrocodone appropriate for OxyCotin and those under 40mg hydrocodone appropriate for Butrans. Reminded about a few managed care plans. Dr said she might have someone this week to try on burans.
PPLPMDL0020000001	Cleveland	OH	44195	12/8/2014	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	12/8/2014	Talked about the hydrocodone insight and how it's affecting their ohararmacy. And they said it wasn't too bad. We talked about OxyContin dosing also talked about Butrans dosing. Hilighted patch placement and abuse
PPLPMDL0020000001	Westlake	OH	44145	12/8/2014	Talked about hydrocodone insight and covered Butrans and OxyCotin dosing and abuse potential.
PPLPMDL0020000001	Westlake	OH	44145	12/8/2014	Saw doctor. Had a long conversation regarding hydrocodone insight. Dr said he has been writing them out and it hasn't been an issue, we alked about who he considered to be a Butrans patient. Dr focused on the hydrocodone patient, we reviewed indication and i asked at what dose of a failed hydrocodone would he think Butrans. Dr said it varies and he said he usually starts patients on the 10mg of Butrans. Covered managed care. Talked about getting i to see him about the new product in february and he gave me the ok to out it on the books w his secretary.
PPLPMDL0020000001	Sagamore Hills	OH	44067	12/8/2014	Quick Intro. Told him when he sees a couple of his patients who are in the around the clock pain, does he think of ER medicines? He said truthfully probably not. When I have more time I told him I would like to discuss a few patient types that might be appropriate for q12 oxycontin or c3 butrans. Left him information and formulary for both.
PPLPMDL0020000001	Cleveland	OH	44195	12/8/2014	Reviewed OxyContin every 12hours, Savings cards, Formulary coverage along with Butrans failing on present therapy requiring around the clock analgesia, Said she will look to expand utilization of Butrans within the clinic,
PPLPMDL0020000001	Rocky River	OH	44116	12/8/2014	Hydrocodone insight. Dr said she doesn't treat chronic pain. We talked about indication and abuse potential for Butrans and OxyCotin. Dr said she uses norco seldomly. I said what happens when the norco patient who has been refilling every month for the last several months becomes uncontrolled? Dr said sometimes she will send them out and sometimes she will treat. Using the conversion guide of t Butrans core aid we talked about who is appropriate per indication to start Butrans and the over 40mg of hydrocodone patient might go w OxyCotin as potential option. Dr said she doesn't have anyone over 40mg of hydrocodone or oxycodone. Dr said she will keep Butrans in mind. Covered coupons.
PPLPMDL0020000001	Parma	OH	44129	12/9/2014	He won't write for oxycontin, but quickly showed him scott profile as an appropriate candidate for c3 butrans. He doesn't have to refer them all to pain management. There are options.

PPLPMDL0020000001	Westlake	OH	44145	12/9/2014	Saw dr and talked about Butrans being schedule three option for norco patients needing a change to there therapy for atc per indication. Dr said he has bee seeing too many pain patients and he isn't going to write more. I reminded him That butran is dosed every 7 days, which is 4 doses a month for the chronic pain person. I asked if that was too much? He said no. I said if they are appropriate and requesting a change, what's the problem? Dr said he doesn't I know. I reminded him of our lunch on Thursday to review more. He ok.
	Lakewood	OH	44107	12/9/2014	Hydrocodone insight. Dr and nurses said they have been so busy and trying to refer out patients. I talked about the reassessment visits and the potential appropriate transition to Butrans per our indication. Dr said he heard that the pharmacist won't allow any opioid to be refilled. I corrected him and showed him the visual aid where it states its a schedule three and the amount of potential refills. We talked about how to initiate from norco to butrans. Also reminded him of OxyCotin schedule two and dosing but the dr wanted to stay focused in the schedule three option. We talked about caresource coverage. Dr said he would keep it in mind. Working w staff to get up in February to talk about new product.<font color=blue><b>CHUDAKOB added notes on 12/19/2014</b></font>Lisa, it looks like you are using insights much more to open your calls, and based on the call notes, the conversations look more robust. Nice work!
PPLPMDL0020000001	Cleveland	OH	44106	12/9/2014	Reviewed OxyContin Savings cards along with Butrans savings cards and Patient info booklets, said ok, will consider for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44113	12/9/2014	Reviewed Butrans Med D coverage, patient info booklets, said ok will continue to prescribe for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44106	12/9/2014	Reviewed OxyContin every 12hours,Savings cards along with Butrans Initiation/Titration, CII, Formulary grids, Said Ok will continue to prescribe for appropriate patients
PPLPMDL0020000001	Parma	OH	44129	12/9/2014	Doctor said he doesn't really write oxycotin. He might consider for older patient or cancer patient. Asked him if he has a system in place to see if his patients are taking the IR meds as he prescribed. He said not specifically, but if they are taking too many they would run out of meds before the end of the month. Asked him if there is a number of daily pills a patients takes where he would consider ER meds like oxycotin. He said maybe 5. I told him that I understand that oxycotin isn't for everyone, but q 12 dosing with oxycotin is appropriate for patients in around the clock pain, rather than dosing in 4-6 hour increments. He agreed. He said he has friend butrans with great results so far. One female patient has tried many meds including morphine and now butrans is finally working to improve her pain, and it was covered by her insurance. He said these positive experiences will help him remember to choose butrans for appropriate patients in around the clock pain.
PPLPMDL0020000001	Cleveland	OH	44106	12/9/2014	Reviewed with Marge OxyContin savings cards/formulary coverage along with Butrans CII, Med D coverage.Said will continue to recommend when appropriate
PPLPMDL0020000001	Parma	OH	44129	12/9/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44106	12/9/2014	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	12/9/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44109	12/9/2014	Reviewed OxyContin/Butrans, Formulary coverage, Butrans patient info booklets, said ok will recommend if appropriate.
PPLPMDL0020000001	Lakewood	OH	44107	12/9/2014	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	12/9/2014	Shay said that she has seen some oxycotin scrips come through. She hasn't noticed much difference in doctors prescribing since the schedule change. She thinks they write more IR meds than they need. She was by herself today and didn't really have time to talk. Left butrans information along with new dose information.
PPLPMDL0020000001	Lakewood	OH	44107	12/9/2014	Hydrocodone insight. Dr said he has seen many patients w chronic pain and he explain they are patients he doesn't want to see monthly. Dr explained that patients refuse to take Butrans. I asked why he thought that is, he explained they like their pills. I asked if that was a good or bad thing. Dr said he switch a patient from Butrans recently cause they wanted a pill. We talked about discontinuation rate insight and if he felt he gave Butrans enough of a titration try before giving up on it. Dr said probably not. We spend time talking about initiation guide and using the two patches using the core visual aid as a reference. Dr asked why they had to be side by side,ni explained that's the way it was studied. Dr was unaware that he could use break thru medications with Butrans. We covered managed care. Dr said he liked it was schedule three and that the dosing was weekly. Spend the w Beth going over managed care and schedule three.
PPLPMDL0020000001	Cleveland	OH	44106	12/9/2014	Quick OxyContin review(Savings cards, Formulary coverage) along with Butrans 7 day transdermal, CII, Initiation/Titration, Said ok will review
PPLPMDL0020000001	Lakewood	OH	44107	12/9/2014	Spoke w ma about hydrocodone insight and she said it has been very busy. I reminded her that Butrans was schedule three, refills and gave fair balance on abuse potential for both products. Dr came to window and said he wrote a Butrans...I asked if it was the 5 or 10dose. Dr said 5. We talked about titration to 7.5 or 10 if the patient still doesn't feel controlled.covered caresource coverage. We talked about the discontinuation rate insights dr said patients never forget to take their pills. I said how exactly do you know that for certain? Dr said cause they refill every Month. Wanted to talk about reassessment but we didn't have time and he went into a room.<font color=blue><b>CHUDAKOB's query on 12/19/2014</b></font>Lisa, you have to be more more specific about fair balance. Just saying you gave fair balance doesn't really address what you said in relation to the conversation. This is very important and should be more specific on what you said and the context you said it in.<font color=green><b>BARTOLI's response on 12/19/2014</b></font>Understood,thank you for the reminder.. Fairbalance was that all opioids including Butrans have the risk for abuse potential.<font color=blue><b>CHUDAKOB closed the query on 12/20/2014</b></font>
PPLPMDL0020000001	Cleveland	OH	44106	12/9/2014	Visited Pain mg/Seidman OxyContin/Butrans Initiation Titration
PPLPMDL0020000001	Lakewood	OH	44107	12/9/2014	Gave discontinuation. Night,masked him how his patient are doing on Butrans so dr said appears to be fine.mreview of study state and 5 doses to select from to tailoring to the patients pain levels. Talked about it covered in caresource and schedule three w refills. Dr said that was a big one for him. Talked dosing and identifying the patient under 90mg or 3 pills a day every month who are chronic. Left oxycotn coupons.m<font color=blue><b>CHUDAKOB's query on 12/19/2014</b></font>Lisa, where did you get the figure 90mg? Also, what are you saying at the beginning of the note?<font color=green><b>BARTOLI's response on 12/19/2014</b></font>Under 80 mg morphine equivalent to initiate Butrans is what I meant to say. Or patients dosed more than 3 doses a day uncontrolled might be appropriate.<font color=blue><b>CHUDAKOB closed the query on 12/20/2014</b></font>
PPLPMDL0020000001	Cleveland	OH	44113	12/9/2014	Reviewed Butrans for those patients failing on Tramadol he is sending to Pain mgmnt, said ok will keep it in mind.
PPLPMDL0020000001	Lakewood	OH	44107	12/9/2014	We talked about the work load increase afterthenhydrocododo schedule change. She said it has been busy. I asked how they are handling schedule three products? She said no change. We talked about oxycotn and butrNs dosing and scheduling. We talked about appropriate person for Butrans I focused the id succinct on norco conversion to Butrans per our indication and guide.<font color=blue><b>CHUDAKOB's query on 12/19/2014</b></font>Lisa, look at your spelling in the call notes. What are you saying at the end of your note before the word Norco?<font color=green><b>BARTOLI's response on 12/19/2014</b></font>We talked about OxyContin and Butrans dosng and scheduling. We talked about appropriate person for Butrans. I focused on identifying the uncontrolled norco patient and reviewed the Initiation guide.<font color=blue><b>CHUDAKOB added notes on 12/20/2014</b></font>OK. Thank you for the clarification. Please be more cognizant of your spelling in the call notes.
PPLPMDL0020000001	Westlake	OH	44145	12/10/2014	We talked about treating options for patients w atc chronic pain, I asked what his impression of treating pain is now since the schedule change of hydrocodone. The dr said it has been an eye opener for most doctors he said. Dr said he doesn't treat as many pain patients as others but he will write Butrans if he sees the appropriate patient. I asked if he could identify an appropriate patient to start on the 5mg dose. Dr said he thought so. We talked about the indiction and reviewed quickly the Initiation guide. Gave a quick review of OxyContin and dosing. Dr asked about managed care, which was addressed.
PPLPMDL0020000001	Westlake	OH	44145	12/10/2014	Dr said he is writing virtually no opioids at all any more. I asked if this was a new change and why? Dr said the pain patients are too complicated and are better served by a pain guy. I asked where he refered and he said a few names and he also said he didn't care how long it akes to get in but he doesn't want to treat them. We talked about Butrans being a patch, schedule three and his perception of that fitting with in his parameters. Dr said He writes little Butrans but likes it cause its a patch and given weekly. I highlighted the Tramadol failure patient and what to do when they're pain isn't controlled. Dr said he would be open in the appropriate patient to writing Butrans in those patients but overall he said he was not writing much scheduled products.
PPLPMDL0020000001	Cleveland	OH	44113	12/10/2014	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	12/10/2014	Spoke with dr dimitri in hospital and discussed Butrans and OxyContin appropriate patients.
PPLPMDL0020000001	Parma	OH	44129	12/10/2014	Dr says he needs to be reminded of butrans. He tried one patient on butrans, never heard back from her so assumes she is doing well. Tried to get back to basics and discusses patient in around the clock pain and how best to treat their pain. He agreed that 4-6 hour increments isn't ideal for those patients. He does refer his pain patients out to pain management but some prefer to stay with him, he is ok choosing oxycotin for older patients but really just stays away from it. Butrans is a great option for patients like SCott. Reviewed dosing, initiation and titration along with managed care. He will do a better job keeping it in the front of his brain as he sees the appropriate patient type.
PPLPMDL0020000001	Cleveland	OH	44130	12/10/2014	Dr said that he believes patients need to be on ER meds once they are taking 3 IR meds a day. He refers most of them out (especially the ones who need oxycotin) but does see a place for butrans. Reviewed scott and PAM as appropriate patients, reviewed initiation, titration, and managed care. He promises to find at least one appropriate patient within the next week.
PPLPMDL0020000001	Parma	OH	44129	12/10/2014	He is very comfortable prescribing oxycotin for appropriate patients and doesn't have trouble with insurance. He has no concerns about how my products work, but insurance and his patients push back on price of butrans. Assured him that coverage has never been better, reviewed formulary grids.
PPLPMDL0020000001	Akron	OH	44313	12/10/2014	Told dr at window that I would like him to reassess his patients on Norco who may be over 40mg a day and are still in pain around the clock to see if they might be appropriate for OxyContin. Told dr that Butrans also might be appropriate for those under 40mg a day and showed him the approximate conversions. Dr said alright and asked about insurance information. Gave dr the grids.
PPLPMDL0020000001	Mayfield Village	OH	44143	12/10/2014	Left literature at front desk with med asst. Reinforced OxyContin access/savings with med asst, left Oxycontin sell sheet. Reinforced trial/savings for Butrans; and fact that Butrans can be called/faxed in with refills.
PPLPMDL0020000001	Westlake	OH	44145	12/10/2014	Hydrocodone insight. Asked her how script writing rules have changed for her. Vicki said she still doesn't initiate with out approval from the lead doctor on call or dr kabbarra. We talked about her views on OxyContin now that it is in the same schedule as many other opioids. Vicki said she doesn't have much experience w extended release products. I asked if she saw chronic pain patients in the office for follow up and she said not as much as she used to that she is. Only at the hospital doing follow up post surgeries. We talked about Butrans, it's scheduling and dosing.
PPLPMDL0020000001	Akron	OH	44313	12/10/2014	No new information learned on this call.
PPLPMDL0020000001	Euclid	OH	44119	12/10/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44109	12/10/2014	No new information learned on this call.
PPLPMDL0020000001	Mayfield Village	OH	44143	12/10/2014	Left literature at front desk with med assts. Same information as last call - reinforced OxyContin access, savings for patients; Butrans trial/savings and ability to call/fax in with refills.
PPLPMDL0020000001	Tallmadge	OH	44278	12/10/2014	No new information learned on this call.
PPLPMDL0020000001	Euclid	OH	44119	12/10/2014	No new information learned on this call.
PPLPMDL0020000001	Euclid	OH	44119	12/10/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	12/10/2014	Spoke to the pharma it on duty. Tried to see the clinical director ms Patel. Today we talked about Butrans s and it's dosing. We talked about getting it on formulary at the hospital and we reviewed attributes per the core visual aid. I left her the pharmacy v leave behind. Gave her my card to pass to ms Patel, who I actually came to visit today.
PPLPMDL0020000001	Parma	OH	44129	12/10/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	12/10/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	12/10/2014	Reviewed with tech OxyContin/Butrans Initiation/Titration, will relay info to Steve New Rph mgr
PPLPMDL0020000001	Cleveland	OH	44130	12/10/2014	Quick call. Caught him in the hallway. Just reminded him of our last conversation. Asked him if he is keeping an eye out for patients in around the clock pain that might benefit from ER meds like oxycotin or butrans. He said not oxycotin but he does have to think about butrans. Handed formulary sheets and titration guide slim for both products.

PPLPMDL0020000001	Cleveland	OH	44102	12/10/2014	Reviewed OxyContin every 12hours, Savings cards along with Butrans CII, 7 day transdermal, Initiation/Titration, said ok will consider
PPLPMDL0020000001	Cleveland	OH	44195	12/10/2014	Quick review of OxyContin every 12hours, Savings cards along with Butrans 7 day transdermal, CII, Initiation/Titration, Said ok will consider for appropriate patients, Will discuss when Dr. gets back from Conf.
	Akron	OH	44333	12/10/2014	God discussion about a patient she started on Butrans the other day. Elise said that the patient was a referred patient who came in on Tramadol and Norco. She said that she was first thinking oxycontin but then realized that maybe butrans would be a better solution because of it being a patch and wanted the patient off pills. She said she initiated on 10mcg and figures she will need to titrate. Brittany said that she got a couple of Butrans PA's through and approved. I told Elise to maybe use a 40mg of hydrocodone a day as being the cut off for Butrans and oxycontin. Elise said she tries to make that decision sooner.
PPLPMDL0020000001	Cleveland	OH	44114	12/10/2014	Quick review of OxyContin/Butrans Initiation/Titration, Said Ok, will be closing location and seeing patients at the Broadway office
PPLPMDL0020000001	Cleveland	OH	44102	12/10/2014	Reviewed OxyContin/Butrans Initiation/Titration, Said ok will recommend if appropriate
	Stow	OH	44224	12/10/2014	Spoke to Jamie the Pharmacist and asked her if she has had prescriptions for multiple patches? She said she has not. I asked her if she has seen any new prescribers and she said not really but is seeing a lot of it including the 7.5 mcg dose. Discussed Oxycontin dosing and conversions and reminded her of q12 dosing as the single entity oxycodone.
PPLPMDL0020000001	Westlake	OH	44145	12/10/2014	Talked about the opportunity to convert uncontrolled patients that are already on the same molecule of oxycodone over to every 12 hour dosing if appropriate, to OxyContin. We talked about those patients who may be appropriate for atc dosing and needing a change of therapy the option to try a pain patch instead of a pill for their atc chronic pain treatment. Dr said his patients like pills. We talked about abuse potential for any opioid including oxyctn. And Butrans.
PPLPMDL0020000001	Westlake	OH	44145	12/10/2014	Spoke w Kelly e office manager and the doctor today about why he wants Butrans on formulary at the hospital. Dr explained he likes Butrans and that he likes the dosing of every week. Dr explained to me the importance of a 7 day dose optio. For patients in the hospital and give Butrans and then the time frame he sees them back for follow up they either have the original patch on or on the second patch. The doctor said that patients after surgery don't always make it to get their pain pills on time and can be left in pain. We reviewed the indication of Butrans, and the dr told me he was going to call the clinical manager of the hospital to see if he can get it on formulary. Dr said he is going on vacation next week and that he has been so busy seeing patient. I asked if he had seen any appropriate for Butrans s this month. Dr said yes some. I asked why wouldn't every uncontrolled atc oer indication be giving Butrans? I asked what hold him back. Dr said coverage usually. We taled some managed care, dryad concerned with patients donut hole and deducts for med d patients. I was able to schedule an apt day one of new product. Dr said he wanted to be the first to know about it.
PPLPMDL0020000001	Cleveland	OH	44195	12/10/2014	Reviewed OxyContin every 12hours, Butans patient info booklets, Said Ok will consider for appropriate patients
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	12/10/2014	Saw dr in hospital in order to get his email for speaker bureau. I told dr to please continue identifying patients appropriate for Butrans. Dr said he continues to have great success with it but just wishes it was covered better. I told him medicaid and Medicare are going to be more difficult to get approved compared to commercial insurance and then discussed CareSource and Medicare coverage. Told him to please use oxycontin when his patients may already be on Oxycodone and have pain around the clock.
PPLPMDL0020000001	Cleveland	OH	44103	12/11/2014	Reviewed OxyContin every 12hours, Butrans for those patients failing on present therapy requiring around the clock analgesia, Said ok will continue to prescribe for appropriate patients.
	Westlake	OH	44145	12/11/2014	Reviewed Hydrocodone insight and asked if he was open to treating a few of those that might be appropriate with Butrans (tried a dose firsts use he was heading to hospital). Dr asked about managed care. I gave him a summary, but ask him if there was a specific plan he wanted to focus o. Or was this a generic question. Dr said he was curious. Talked about the Hydrocodone patient appropriate for Butrans using the intation guide and we reviewed indication. I asked how does he know when to move a patient from an immediate release to extended release product. The dr said it depends. Highlighted a few Helen Items and asked if she was someone he would think of or not. Dr said maybe.
PPLPMDL0020000001	Westlake	OH	44145	12/11/2014	Talked about the Hydrocodone insight. Covered the scheduling of OxyCotin and Butrans. I asked the dr when he decided to move to an extended release product. Dr said he didn't know. DR said he will write generics first. We talked about dosng. scheduling and burans initiation guide. Dr asked about anaged plan plans. I focused on med d.
PPLPMDL0020000001	Broadview Heights	OH	44147	12/11/2014	No new information learned on this call.
PPLPMDL0020000001	Broadview Heights	OH	44147	12/11/2014	No new information learned on this call.
PPLPMDL0020000001	Berea	OH	44017	12/11/2014	Reviewed hydrocodone insight, talked about reassess g uncontrolled hydrocodone patients and the opportunity to choose butrans or OxyCotin if appropriate. Dr talked about how busy he has been and the staff commented on the long hours lately. We alked about how Butrans dosed weekly and being schedule 3 might fit a need for the right patient that meets the indication. Dr said he will keep it n mind. Covered managed care w staff and reminded dr about the experience kit and coupons.
PPLPMDL0020000001	Cleveland	OH	44106	12/11/2014	Reviewed OxyContin/Butrans, utilization, Butrans patient info booklets, said she hasnt seen any Butrans, will recommend for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44113	12/11/2014	Reviewed Butrans Initiation/Titration, Patient info booklets, Savings cards along with OxyContin every 12hours, 7 tablet strengths, Said she will continue to prescribe for appropriate patients,
PPLPMDL0020000001	Cleveland	OH	44112	12/11/2014	Reviewed OxyContin every 12hours along with Butrans CII, 7day transdermal, Initiation/Titration, said she will consider for appropriate patients, since she is not having much success sending patients to pain mgmnt , Doctor said that they are supposed to refer all of their pain patients under age 65 to pain management. He will write OxyContin for nursing homes patients, but no real need for it at his practice. Asked if anything has Hanged in his thinking since the hydrocodone schedule change. He said just that they aren't supposed to prescribe pills. He wanted to hear a bit about butrans. Used scott as an appropriate patient type for butrans.
PPLPMDL0020000001	N Royalton	OH	44133	12/11/2014	Discussed the indication and who might be appropriate. Reviewed dosing, titration Nd managed care. He said he will keep it in mind but doesn't see a big need for it.
PPLPMDL0020000001	East Cleveland	OH	44112	12/11/2014	Reviewed with Latoya OxyContin/Butrans, Initiation/Titration, said ok will recommend for appropriate patients.no new info learned
PPLPMDL0020000001	North Royalton	OH	44133	12/11/2014	Jennifer is new to the practice, formulary a NICU nurse. She said that she doesn't really see the pain patients. She will not prescribe oxycontin. Told her about Butrans appropriate patient, initiation, scheduling, titration and formulary. She said that the information may be useful if the right patient presents himself.
PPLPMDL0020000001	Cleveland	OH	44115	12/11/2014	Quick review of OxyContin every 12hours along with Butrans CII, 7 day transdermal, Initiation/Titration, said ok will consider for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44113	12/11/2014	Reviewed OxyContin every 12hours, Savings cards along with Butrans for those Tramadol patients failing on present therapy. Said he will continue to prescribe for appropriate patients. Patient info booklets
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	12/11/2014	No new information learned on this call.
PPLPMDL0020000001	Tallmadge	OH	44278	12/11/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	12/11/2014	Visited dept, savings cards and formulary grids
PPLPMDL0020000001	Akron	OH	44305	12/11/2014	Spoke with Matt and reviewed how important the right patient type is. Reviewed Helen and Kathy for Butrans and over 40mg a day of hydrocodone or oxycodone patients whom are in pain around the clock and meet the indications.
PPLPMDL0020000001	Cleveland	OH	44111	12/11/2014	While talking w pa, dr there was listening. We covered hydrocodone insight and how to dose Butrans. Dr thanked me for the information.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	12/11/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44111	12/11/2014	Review of our last conversation. Highlighted scheduling and dosng of Butrans and OxyCotin. Covered managed care. Talked about getting back in February to cover new product with the ccf pain group. They said yes.
PPLPMDL0020000001	akron	OH	44685	12/11/2014	Reviewed oxycontin and Butrans attributes, patient types for OxyContin and reviewed pages 8-10 in MVA. Discussed Butrans Helen profile and asked him what he typically moves to after tramadol? Dr said he guessed he never thought of using Butrans after tramadol and said it makes sense because he usually doesn't go beyond tramadol and refers out. Dr said he's going to give it a shot.
PPLPMDL0020000001	Broadview Heights	OH	44147	12/11/2014	Saw him quickly at the window and gave him the Scott profile. Told him to keep an eye out for a patient in around the clock pain like him for butrans. He doesn't really see patients in around the clock pain. He has to try to remember butrans. Told him it is now available in 5 doses with very favorable formulary coverage.
PPLPMDL0020000001	Broadview Heights	OH	44147	12/11/2014	Saw him quickly at the window and gave him the Scott profile. Told him to keep an eye out for a patient in around the clock pain like him for butrans. He doesn't really see patients in around the clock pain. He has to try to remember butrans. Told him it is now available in 5 doses with very favorable formulary coverage.
PPLPMDL0020000001	Westlake	OH	44145	12/11/2014	No new information learned on this call
PPLPMDL0020000001	Akron	OH	44305	12/11/2014	Showed dr the Helen profile and to,d him he needs to continue to identify patients like her that are in pain around the clock. Told him that I'm going to be providing him with unrestricted coverages for Butrans on all aspects of his practice. Showed him the medicare D grid and discussed AARP and Caremark silverscript. I told him for the next week to think of those plans wipch are his two largest for medicare.
PPLPMDL0020000001	Broadview Heights	OH	44147	12/11/2014	Quickly told me that she doesn't see pain patients, refers them out when I told her what I promote. I told her that understand but this information might be helpful if she does run across someone in around the clock pain and she needs to be aware of some options. Quickly reviewed what it was and scheduling. Handed her butrans information and formulary grid. told her I would check in again in the new year.
PPLPMDL0020000001	Broadview Heights	OH	44147	12/11/2014	Quickly told me that she doesn't see pain patients, refers them out when I told her what I promote. I told her that understand but this information might be helpful if she does run across someone in around the clock pain and she needs to be aware of some options. Quickly reviewed what it was and scheduling. Handed her butrans information and formulary grid. told her I would check in again in the new year.
PPLPMDL0020000001	Westlake	OH	44145	12/11/2014	Spoke to dr about how she is treating atc pain patients now that Hydrocodone has moved to schedule two. Dr said she doesn't want to treat chronic pain but she does occasionally. Dr said she doesn't write much OxyCotin. I asked if she writes any expended release product she said very little. We talked about Butrans dosing and scheduling.
PPLPMDL0020000001	Uniontown	OH	44685	12/11/2014	Met dr for first time and provided detailed overview of oxycontin and Butrans. Discussed attributes for both products, patient profiles, conversions, titration and clinical studies for Butrans. I asked dr what her philosophy is in treating pain? Dr said she doesn't like using opioids because what it brings to her and the practice but can see where for the right patient at the right time where Butrans might be a good option. Discussed using Butrans for a patient like Helen and dr said it makes sense because she usually maxes out to 300mg a day. Reviewed application sites, proper skin preparation and insurance for Bo products. Dr said she is more likely to use Butrans and asked for information on initiation and titration.
PPLPMDL0020000001	N Royalton	OH	44133	12/11/2014	She is probably got going to prescribe oxycontin, they are encouraged to send to pain management. Quickly reviewed the reformulation information around oxycontin. She was very interested in hearing more about butrans because of the hydrocodone schedule change. Reviewed appropriate opiod naive and tramadol patient types using Scott, initiation, titration and formulary. She doesn't think she would write much of this but thinks there might be one or two people she could think of that might be appropriate and that it is good information to know.
PPLPMDL0020000001	Cleveland	OH	44103	12/11/2014	Reviewed Butrans for those patients that are failing on present therapy, along with OxyContin every 12hours,
PPLPMDL0020000001	Green	OH	44232	12/11/2014	Spoke with a pharmacy technician about oxycontin and Butrans attributes, conversions and what they are seeing and dispensing in the pharmacy. The tech didn't have much idea because he was new and said the pharmacist was just too busy. Nothing else learned.
PPLPMDL0020000001	Uniontown	OH	44685	12/11/2014	Good discussion about the impact of hydrocodone rescheduling, where oxycontin and Butrans fit in his practice, and patient specific identification for OxyContin and Butrans. Dr said hydrocodone is affecting their office and said yes sees a place for both products however he's trying to refer out because of the pressure to treat chronic pain. Dr could not specifically where the pressure is coming from and admitted he'd just rather refer. Dr said he uses oxycontin for patients who he feels he can treat needing more than oxycodone and Butrans for hydrocodone. Discussed importance of determining at what point a patient is in pain around the clock and could use a therapy change. Discussed Helen and Kathy and dr said he just forgets about Butrans and agreed he should be using it for a patient who he typically would take a patient to 300mg a day of tramadol. Dr said he will try to use it before he would max the dose and knows they will need continual therapy. Discussed insurance coverage and copay cards.
PPLPMDL0020000001					

	Independence	OH	44131	12/11/2014	He thinks patients are in around the clock pain when they are taking 3-4 pills. The problem is that they don't want to give up their pills. Asked him what he thought about extended release meds earlier in regiment once they realize the pain in around the clock. Two options: q12 low dose oxycotin, or once weekly butrans after tramadol or before tramadol? What do you think? If only it were that easy! They are both good options but he never thinks of butrans. He had to go. Reviewed improved formulary coverage which is very important to him.
PPLPMDL0020000001	Parma	OH	44129	12/12/2014	Quickly handed him the Maria profile as an appropriate butrans patient to keep an eye out for. Inside was latest formulary grid. He said he is using butrans.
PPLPMDL0020000001	Westlake	OH	44011	12/12/2014	Talked about the appropriate patient type and the scheduling, recapped last times conversation- and tried to move it forward. We talked about the appropriate patient requiring atc therapy and that butrans was schedule three and what that meant in terms of refills and visits to the office. Also talked about dosing and titration and use of supplemental medications for breakthrough. Dr said although he doesn't want to treat patients monthly he may consider butrans for those appropriate. We talked about caressource coverage and with coupons.
PPLPMDL0020000001	Parma	OH	44129	12/12/2014	Summary: Writes plenty of oxycotin for Hospice.( he is hospice director) and thinks butrans is a great option rather then pills. Patients put it on and can forget about their pain unless they have breakthrough. He asked about generic ER Oxycodone vs oxycotin. Which should he write. Told him that there isn't a generic available generally for oxycotin. Sometimes they appear on the market for a short time at some pharmacies. We don't know how much they are or where and when. Let him know that whatever the patient gets will be the reformulated version only. We discussed patients in around the clock pain and how he won't write for more than 4 IR per day. He doesn't believe they should be dosing themselves throughout the day. He appreciated patient information for butrans and has had multiple success stories with patient on butrans. So it will be uppermost on his mind for appropriate patients.
PPLPMDL0020000001	Stow	OH	44224	12/12/2014	Quick discussion with Corey the pharmacist about oxycotin and Butrans. Reviewed oxycotin doses and conversions along with patients who, might be appropriate who are taking 40Mg of hydrocodone or more and are complaining of pain or can't tolerate it. Reviewed Butrans Helen profile and ensured they had copy cards.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	12/12/2014	Discussed with dr patients whom are appropriate for OxyContin and Butrans. Told him to please help an eye on those who are over 40mg of hydrocodone a day as they might be appropriate for OxyContin and those under 40mg a day could be candidates for Butrans as long as they meet the indications. Dr said he was looking for Butrans copy cards the other day and said he doesn't think they have any. Restocked.
PPLPMDL0020000001	Akron	OH	44319	12/12/2014	Quick hello at front counter. I asked dr if he has any reservations with writing new oxycotin prescriptions when patients on IR oxycodone whom have pain around the clock and meet the indication? Dr said no. I asked him to please reassess not only his oxycodone patients but his hydrocodone ones as well who are over 40mg of hydrocodone and meet the oxycotin indication. Reviewed Butrans dosing, conversions and use for Ultram patients who meet the indication for Butrans.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	12/12/2014	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44319	12/12/2014	Told dr at window that I want him to us he lower doses of oxycotin for those he's reassessing already on IR oxycodone and showed him page 8 in the MVA. Told him Butrans may also be a solution for those under 40mg of hydrocodone who meet the Butrans indication.
PPLPMDL0020000001	Akron	OH	44312	12/12/2014	Good discussion around who is an is not a potential candidate for OxyContin and Butrans. Reviewed patient scenarios for each through MVA and patient profiles. Dr said he really was to purge all his patients needing chronic pain management. Discussed who may be appropriate in his practice based on re-evaluating his existing patients on IR opioids. Told dr that he must take a very close look at the patients he is refilling on IR opioids each month to decide what percentage of them he is ok treating with an ER opioid like oxycotin or Butrans.
PPLPMDL0020000001	Twinsburg	OH	44087	12/12/2014	He has a few of his patients on oxycotin, writes it for the patients that require more than 4 pills of IR. Good product, hates to write it. Reviewed that it's just the few of his patients in around the clock pain that I want him to think about how might be appropriate way to manage their pain. Had scott profile on table so we could discuss specific patients he has to keep an eye out for butrans. Reviewed doses and inclusion criteria in studies. He just has to remind himself about it. He promises to remember butrans.
PPLPMDL0020000001	Akron	OH	44312	12/12/2014	Good discussion around who is an is not a potential candidate for OxyContin and Butrans. Reviewed patient scenarios for each through MVA and patient profiles. Dr said he really was to purge all his patients needing chronic pain management. Discussed who may be appropriate in his practice based on re-evaluating his existing patients on IR opioids.
PPLPMDL0020000001	Hudson	OH	44236	12/12/2014	Short discussion about how he's deciding to treat patients in pain around the clock. To d dr to reassess those patients over 40mg of hydrocodone a day and consider oxycotin if the patient meets the indication and Butrans for those meeting the indication under 40mg a day. Told him about the Helen profile as well and asked for inspiration to write more Butrans after his first patient who he says loves it.
PPLPMDL0020000001	Akron	OH	44319	12/12/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	12/12/2014	trying to schedule and apt with the dr for new product will have to return on another day because omanger has to check with him first. Reviewed managed care today and using coupons for both products.
PPLPMDL0020000001	Westlake	OH	44145	12/12/2014	hydrocodone insight. review abuse potential for both my products and how each product is dosed. Talked about Butrans and they said they didn't have the 15 or 7.5 in stock but could get it in stock. We talked about the dosages of Butrans.
PPLPMDL0020000001	Rocky River	OH	44116	12/15/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	12/15/2014	Nothing learned
PPLPMDL0020000001	Westlake	OH	44145	12/15/2014	Hello thru the window. Asked him when he decided to use Butrans if he knew what the experience kits area Nd what they do for the patients as I pointed to them on the counter by the check out. He said no. I highlighted the program and a few managed care plans.
PPLPMDL0020000001	Middleburg Hts.	OH	44130	12/15/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	12/15/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	12/15/2014	Hydrocodone insight. Asked what are his thoughts. Pharmacist had a little to share. We talked about OxyContin dosing and the appropriate patient. Per indication. Highlighted Butrans patch placement and dosing.
PPLPMDL0020000001	Cleveland	OH	44114	12/15/2014	Discussed reaccessing patients, along with treating patients in 4-6hr increments, Reviewed OxyContin every 12hours, 7 tablet strengths along with Butrans for those patients requiring around the clock analgesia, Med D opportunities. Said ok will consider for appropriate patients
PPLPMDL0020000001	University Hts	OH	44118	12/15/2014	Reviewed OxyContin every 12hours, Formulary grids along with Savings cards, along with Butrans for those patients failing on present therapy that are requiring around the clock analgesia, said ok will consider for appropriate patients
PPLPMDL0020000001	Cleveland Hts	OH	44118	12/15/2014	Discussed reaccessing patients, along with treating patients in 4-6hr increments, Reviewed OxyContin every 12hours, along with Butrans for those patients requiring around the clock analgesia, Med D opportunities. Said ok will consider for appropriate patients
PPLPMDL0020000001	akron	OH	44333	12/15/2014	Showed dr the Helen profile and told him I would like him to use Butrans for those patients on ultram who are in pain around the clock and ask for the next dose. I reviewed the hell profile and asked him if he usually moves to Norco after tramadol? Dr said usually yes. I asked why Butrans for a patient meeting the indication wouldn't be an option? Dr said it is but he said he has a lot of medicaid and Medicaid. I told him I know and told him he also knows where it's covered and reviewed medicaid grid. Reminded him about oxycotin use in patients over 40mg of hydrocodone a day and meet the indication. <font color=blue><b>CHUDAKOB's query on 12/28/2014</b></font>-Cliff, you wrote the following "I reviewed the hell profile" Can you please clarify?<font color=green><b>REICHCL's response on 01/02/2015</b></font>-Helen<font color=blue><b>CHUDAKOB added notes on 01/03/2015</b></font>-Thank you. Be careful what you type.
PPLPMDL0020000001	Olmsted Falls	OH	44138	12/15/2014	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44313	12/15/2014	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44134	12/15/2014	Quickly handed him Kathy patient profile through the window along with formulary grid and oxycotin dosing card and managed care grid while reminding him that they are appropriate for patients in around the clock pain.
PPLPMDL0020000001	Akron	OH	44333	12/15/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	12/15/2014	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	12/15/2014	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	12/15/2014	Hello at front counter and showed him the oxycotin titration and conversion guide. I told him to please use OxyContin for those over 40mg of hydrocodone who meet the indication and Butrans under 40mg of hydrocodone as they meet the indication for daily, around the clock pain. Dr said ok and said he liked the initiation and titration guide for Butrans I gave him.
PPLPMDL0020000001	Cleveland Hts	OH	44118	12/15/2014	Reviewed with Opey, OxyContin/Butrans Initiation/Titration, no new RX's, said she will recommend if appropriate
PPLPMDL0020000001	Cleveland Hts	OH	44118	12/15/2014	Reviewed OxyContin/Butrans with Dave RPH mgr, abuse deterrent characteristics every 12 hours along with Butrans CIII, 7 day transdermal Said he will recommend if appropriate.
PPLPMDL0020000001	Akron	OH	44319	12/15/2014	Spoke with Gilbert and discussed OxyContin dispensing and who's writing. Gilbert said it been the usual suspects but has been filling a lot more 40mg recently. Spoke about 10mg dose and q12. Reviewed Helen profile for Butrans and discussed multiple patch use.<font color=blue><b>CHUDAKOB's query on 12/28/2014</b></font>-Cliff, I know the movie reference, but what speaking with HCPs writing opioids, this can be misinterpreted. "Gilbert said it been the usual suspects but has been filling a lot more 40mg recently"<font color=green><b>REICHCL's response on 01/02/2015</b></font>-We need "canned responses" to choose from in drop down boxes so these type of real world discussions don't get misinterpreted....<font color=blue><b>CHUDAKOB closed the query on 01/03/2015</b></font>
PPLPMDL0020000001	Parma	OH	44129	12/15/2014	Mixed mention of 7 doses available for q12 oxycotin, appropriate for patients in around the clock pain. Quick call with Helen profile. Letting him know this is another patient type that might be appropriate for ER, c3
PPLPMDL0020000001	Westlake	OH	44145	12/15/2014	Asked the dr how the recent scheduling changes w hydrocodone has changed the way she writes opioids for long term treatment of pain. Dr said she doesn't treat much pain and she would prefer not to. Highlighted the Initiation guide of Butrans and touched on the dosing of OxyContin and Butrans. Staff asked managed care questions which I covered. Left behind the Helen profile.
PPLPMDL0020000001	Norton	OH	44203	12/16/2014	Talked about how he felt OxyContin worked for the pain and the dr said good. I asked what his hesitations were for selecting OxyContin. Dr said in the right patient he was comfortable writing it. We talked about the dosing and managed care. We talked about the abuse potential for any opioid including Butrans and or OxyContin.
PPLPMDL0020000001	Cleveland	OH	44113	12/16/2014	Reviewed OxyContin 7 tablet strengths along with Butrans Med D coverage, said he will continue to prescribe for appropriate patients, Asked John to help reminding clinicians
PPLPMDL0020000001	Garfield Hts	OH	44125	12/16/2014	Dr told me he started a 70 yr old female on Butrans today. Dr said that the patient had been on vicoden for a long time and was complaining of her pain and asked for more. Dr said he started her on the 10mcg patch. I reminded dr to please titrate if necessary. I asked hi. To reassess his ultram patients as candidates as long as they meet the indication. Told him to also please keep oxycotin on his radar for appropriate patients.
PPLPMDL0020000001	Akron	OH	44310	12/16/2014	Discussed treating around the clock pain in 4-6hr increments, Reviewed OxyContin every 12hours, 7 tablet strengths along with Butrans for those patients requiring around the clock pain, Said ok will consider for appropriate patients
PPLPMDL0020000001	Garfield Heights	OH	44125	12/16/2014	Discussed treating around the clock pain in 4-6hr increments, Reviewed OxyContin every 12hours, 7 tablet strengths along with Butrans for those patients requiring around the clock pain, Said ok will consider for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44113	12/16/2014	Reviewed Butrans for those patients failing on Norco that are requiring around the clock analgesia, Asked about reaccessing those patients, said she will continue to prescribe for appropriate patients,
PPLPMDL0020000001	Garfield Hts	OH	44125	12/16/2014	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44304	12/16/2014	No new information learned on this call.
PPLPMDL0020000001	Valley View	OH	44125	12/16/2014	Reviewed OxyContin/Butrans utilization with Aaron
PPLPMDL0020000001	Garfield Heights	OH	44125	12/16/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	12/16/2014	No new information learned on this call.
PPLPMDL0020000001	Stow	OH	44224	12/16/2014	No new information learned on this call.



	Highland Heights	OH	44143	12/16/2014	Spoke with Marianne from Dr Salama office over phone. She inquired about 40 yr old female patient who had a few different AE s with Butrans 20 dose. The first day, she had headache & felt nauseous/upset stomach. When patient went to take a shower there was a "bubble " in patch & patient afraid not all medication in system. She called Butrans 800 line & received so help regarding her questions/ concerns. She then called Dr Salama - he instructed her to remove old patch and apply a NEW 20 mcg patch. I let Marianne know I will stop in THURS to follow up and have dr sign medical information form to answer the question: if Butrans has air bubble, does any medication "leak out"? This patient was converted from Percocet to Butrans. She remains on Xenadrine muscle relaxant. Marianne is UNSURE if patient on any non opioid or opioid rescue medication.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	12/16/2014	Dr and Liz said that they have had two prior authorizations for oxycotin this week. Liz said that ones of them was for medicaid and she got it through. She and dr said the other was for a patient on percocet that he write oxycotin for who has UHC Medicare. Liz said the insurance is asking for ER morphine and then Opana ER then they will approve oxycotin. Liz said the patient is on ER morphine now and will write Opana next week. Dr said the patient will most likely fail. Discussed conversions from percocet and insurance discussion.
PPLPMDL0020000001	Garfield Hts	OH	44125	12/16/2014	Reviewed OxyContin every 12hours, 7 tablets strengths along with Butrans for those patients that failing on present therapy requiring around the clock analgesia. said ok will consider
PPLPMDL0020000001	Cleveland	OH	44127	12/17/2014	Discussed treating around the clock pain in 4-6hr increments, Reviewed OxyContin every 12hours along with Butrans for those patients requiring around the clock analgesia. Said Ok will consider for appropriate patients, Recent changes has them sending patients to Pain mgmnt. Confirmed with Jackie
PPLPMDL0020000001	Akron	OH	44333	12/17/2014	Elis told me that she write an oxycotin prescription about a week ago and the patient called and said its the best he's felt in years. Elise said she's trying to convert as much as possible because many of the referred patients are on multiple narcotics and high doses of each. Reviewed appropriate patients from MVA and also for Butrans. Elise said most patients really love it.
PPLPMDL0020000001	Berea	OH	44017	12/17/2014	Talked about the dr going n vacation which he said he would not be going in vacation. We talked about what if they were gone and they needed their monthly refill. Dr said it would be more complicated and the dr explained and their process. We talked about what if that appropriate person were on a schedule three Butrans. Dr shook his head. I asked him to think about a un controlled Tramadol patient that meets the criteria, review of
PPLPMDL0020000001	CLEVELAND	OH	44109	12/17/2014	Spoke with Tech. Reviewed OxyContin/Butrans Initiation/Titration along with Med D coverage, Sees RX's from Nickels/Torres,
PPLPMDL0020000001	Cleveland	OH	44113	12/17/2014	Reviewed OxyContin savings cards, Formulary grid along with Butrans for those patients requiring around the clock analgesia, Said Ok will continue to consider for appropriate patients.
PPLPMDL0020000001	Westlake	OH	44145	12/17/2014	All the regular nursing staff was off today and their was a floater nurse helping out. After talking about what Butrans is, dosing and some managed care coverage. The dr came to window. We talked about his holiday schedule. I asked hi. How he is handling patients' prescriptions like schedule two or three opioids while he was on vacation. Dr said there will be someone to cover while he is gone. We talked about schedule three products and the appropriate patient for OxyContin and Butrans. Dr said schedule 3 products have a place and he will try and remember burans and burans more often for those that are open to change.
PPLPMDL0020000001	Cleveland	OH	44113	12/17/2014	Reviewed Formulary grids for both OxyContin/Butrans along with Savings cards, said Ok will continue to prescribe/consider for appropriate patients
PPLPMDL0020000001	Parma	OH	44129	12/17/2014	He said he is thinking of butrans more than he has. Showed him Kathy profile. He said that there are multiple directions he could go with that patient. He will continue to consider butrans for appropriate patients.
PPLPMDL0020000001	Akron	OH	44320	12/17/2014	Short discussion in hallway and showed her the Kathy profile and gave review. I asked her if it makes sense and if she would reevaluate those type of patients as potential candidates? Dr said she will do her best and is still concerned with coverage. Discussed OxyContin appropriate patient types and dosing with conversions.
PPLPMDL0020000001	Lyndhurst	OH	44124	12/17/2014	Hallway, Sara reported AE of nausea for female patient: dose was 5 mcg/hr Butrans. Sara was hoping that the lowest dose of Butrans would not cause any Adverse Events as patient is sensitive to many medications overall. Sara did state the patients she & Dr Isakov have placed on Butrans previously are doing very well. Discussed scheduling , both products. OxyContin as controlled release tablet, dosed every 12 hrs for appropriate patients (verbatim indication)
PPLPMDL0020000001	Cleveland	OH	44113	12/17/2014	Reviewed OxyContin Patient Experience Savings kits along with Butrans for those patients failing on present therapy that require around the clock analgesia, Said Ok will continue to consider for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44113	12/17/2014	Reviewed Butrans Savings Cards and Med D formulary opportunities along with OxyContin abuse deterrent characteristics every 12hours. Said Ok, Will consider for appropriate patients
PPLPMDL0020000001	Akron	OH	44333	12/17/2014	Dr spoke about he's patients on Butrans and that he's primarily using the 10 and the 20 mcg doses and told me he needs higher doses because it would open up his business. I spoke with dr about the efficacy with the 20mcg through the clinical studies and how to continue to look at patients under 65 yrs old. Asked f dr to continue to identify appropriate patients for OxyContin.
PPLPMDL0020000001	Cleveland	OH	44113	12/17/2014	No new information learned on this call.
PPLPMDL0020000001	Olmsted Falls	OH	44138	12/17/2014	No new information learned on this call.
PPLPMDL0020000001	Lyndhurst	OH	44124	12/17/2014	No new information learned on this call.
PPLPMDL0020000001	Lyndhurst	OH	44124	12/17/2014	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44307	12/17/2014	No new information learned on this call.
PPLPMDL0020000001	Berea	OH	44017	12/17/2014	Hallway. Dr wanted to small talk more than talk product. However I reeled him back to give him e think if this patient profile...which was the uncontrolled Tramadol who requests a change and they are chronic needing the atc medication. Highlighted Butrans schedule three w refills.
PPLPMDL0020000001	Bedford	OH	44146	12/17/2014	Quickly reviewed oxycotin and butrans formulary coverage. Doctor said that he has been using more Butrans and needs savings cards. We had to schedule appointment to review slide deck. That took the rest of the short time he had to talk.
PPLPMDL0020000001	Cleveland	OH	44113	12/17/2014	Reviewed Formulary grids for both OxyContin/Butrans along with Savings cards, said Ok will relay info along with help reminding Dr.Shen
PPLPMDL0020000001	Lyndhurst	OH	44124	12/17/2014	Dr Prada leaves at 12n on Wed; met with Med Asst Amy. Amy very frustrated with new EMR system: EPIC. She reports that since Dr Prada spends a lot of time with each patient; she's "down to scheduling one patient per hour." I empathized with her and stated most offices feel the same way I the first 30 days. Discussed Butrans scheduling, 1x week transdermal, strengths and Caresource Prior Auth, BWC, and overall formulary status.
PPLPMDL0020000001	Independence	OH	44131	12/17/2014	No new information learned on this call.
PPLPMDL0020000001	Uniontown	OH	44685	12/17/2014	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	12/17/2014	Dr told me that he doesn't want to have lunches in 2015 because he had a patient complain about doing lunches w the reps and it bother him. Dr said he values the information reps provide. We talked about his views in where opioids fit for the type of patients with chronic pain. The dr said he treats a lot of fiber myalgia and osteoarthritis. Dr said he does not like to use opioids but when all else fails he said it works. We talked about the abuse potential that all opioid have, including our promoted products. We reviewed the conversion from tramadol to Butrans s using the Initiation guide. Dr said he will keep things in mind.
PPLPMDL0020000001	Westlake	OH	44145	12/17/2014	Dr talked about being in vacation next week. Dr said he was busy filling scripts an dose scripts not filled Vicki the np will cover for him. We talked about Butrans dose 7.5 and if he said himself using that dose? Dr said he was excited to see more dosages. I said I'm happy to hear it and we talked about the uncontrolled patient not in the right dose, not being titrated fast enough. I reviewed the discontinuation rate insight. Dr said he agreed these attributes w Butrans and its good for his patients. I said the dr if I could see him when he returns because I wanted to cover the uncontrolled Tramadol patient for Butrans meeting our indication. Dr said I could come back after his vacation.n
PPLPMDL0020000001	Cleveland	OH	44113	12/17/2014	Visited Pharm. left card and OxyContin/Butrans Initiation/Titration guides.
PPLPMDL0020000001	Akron	OH	44307	12/17/2014	Spoke with pharmacist Larry and reviewed both products attributes, dosing and conversions. Explained the Helen profile for Butrans and reviewed abuse deterrent characteristics for OxyContin.
PPLPMDL0020000001	Berea	OH	44017	12/17/2014	Talked about hydrocodone insight. Pharmacist said they are not stocking less or more of the hydrocodone. I asked if they thought a patient were asking too many pills a day would he call the dr and suggest a change and he said no. We talked about the Initiation guide for Butrans and talked about dosing, patch rotation and where to place the patch. I asked his thoughts on treating chronic pain w a weekly option. No real answer was given. We talked about the potential for abuse w Butrans and OxyCotin.
PPLPMDL0020000001	Akron	OH	44320	12/17/2014	Few seconds at counter and showed her pages 8-9 for OxyContin in the MVA and asked her if she believes she has some candidates that meet the indication? Monique said she probably does but her head is spinning with her workload. I asked her to just remember conversions and who are appropriate candidates. I asked her to do the same with Butrans and reviewed the copy card with trial offer.
PPLPMDL0020000001	Brooklyn	OH	44144	12/18/2014	Quick window call, Reviewed OxyContin every 12hours along with Butrans for those patients failing on present therapy, Said Ok will consider for appropriate patients
PPLPMDL0020000001	Brooklyn	OH	44144	12/18/2014	Reviewed OxyContin every 12hours along with Butrans for those patients that are requiring around the clock analgesia failing on present therapy. Said Ok will continue to prescribe for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44144	12/18/2014	Quick review of OxyContin Savings cards along with Butrans for those patients failing on present therapy requiring around the clock analgesia, Said Ok, will consider for appropriate patients
PPLPMDL0020000001	Mayfield Village	OH	44143	12/18/2014	No new information learned on this call.
PPLPMDL0020000001	Stow	OH	44224	12/18/2014	No new information learned on this call.
PPLPMDL0020000001	Richmond Heights	OH	44143	12/18/2014	Left literature at front window for Dr. Balaji. Discussed with medical assistant: both products (OxyContin, Butrans) for patients who meet ER indication; reminder Butrans can be called/faxed in with refills.
PPLPMDL0020000001	Mayfield Heights	OH	44124	12/18/2014	Left for pharmacy mgr Adrienne (not in currently) OxyContin & Butrans pharmacy guides, Pharmacy Times article. Discussed, left (2) BUTRANS patient guides with male pharmacist (Dave?)
PPLPMDL0020000001	Cleveland	OH	44125	12/18/2014	Reviewed with Sarah OxyContin/Butrans utilization along with Patient info booklets, said she will recommend if appropriate
PPLPMDL0020000001	Valley View	OH	44125	12/18/2014	Reviewed OxyContin/Butrans utilization with Aaron along with Display opportunity
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	12/18/2014	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44130	12/18/2014	Wished doc a happy holiday season quickly and left him Kathy profile for a patient he should look out for that may be appropriate for ER med like butrans or oxycotin.
PPLPMDL0020000001	Parma	OH	44129	12/18/2014	Wished doc a happy holiday season quickly and left him Helen profile for a patient he should look out for that may be appropriate for ER med like butrans or oxycotin.
PPLPMDL0020000001	Garfield Hts	OH	44125	12/18/2014	Saw Dr in hall, Reminded of Butrans CIII 7 day transdermal, said he is sending alot of those patients to Pain mgmnt now that they are with CCF. No change in office policy
PPLPMDL0020000001	Mayfield Village	OH	44143	12/18/2014	Left literature for Dr. Petroff. Discussed with med asst at front window, my products available for patients who meet ER opioid indication: OxyContin, Butrans.
PPLPMDL0020000001	Lyndhurst	OH	44124	12/18/2014	No new information learned on this call.
PPLPMDL0020000001	Tallmadge	OH	44278	12/18/2014	Spoke with Ray about Butrans Helen profile and asked hi. If he's seeing any prescriptions. Ray said not many. Discussed indication, dosing and conversions. Reviewed Oxycontin option for patients over 40mg of hydrocodone of hydrocodone a day.
PPLPMDL0020000001	Independence	OH	44131	12/18/2014	Wished doc a happy holiday season quickly and left him Pam profile for a patient he should look out for the next few weeks that may be appropriate for ER med like butrans or oxycotin.
PPLPMDL0020000001	Independence	OH	44131	12/18/2014	Wished doc a happy holiday season quickly and left him Kathy profile for a patient he should look out for that may be appropriate for ER med like butrans or oxycotin.
PPLPMDL0020000001	Mayfield Village	OH	44143	12/18/2014	No new information learned on this call.
PPLPMDL0020000001	Highland Heights	OH	44143	12/18/2014	Quick OxyContin and Butrans mention to Dr. Salama. Reminder of patient access with savings cards. Met with med asst Marianne, discussed proper application for Butrans, using Butrans patient guide=
PPLPMDL0020000001	Mayfield Village	OH	44143	12/18/2014	Met with medical assistant. Left literature for Dr. Solomon. Communicated my request for LUNCH with practice in FEB, for new product, which only Dr. Solomon can approve. Reminder of savings available for both OxyContin, Butrans.
PPLPMDL0020000001	Beachwood	OH	44122	12/18/2014	Wished doc a happy holiday season quickly and left him product info including Kathy profile for a patient he should look out for that may be appropriate for ER med like butrans or oxycotin.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	12/18/2014	Told dr to keep oxycotin and butrans as variable options for the hydrocodone patients who have pain around the clock. Explained 40mg a day cutoff. Over that as an option for OxyContin and under for potential Butrans as long as the patient meets the indication. Dr asked me for info on Butrans and I gave him a initiation and titration guide.

PLPMDL0020000001	Cuyahoga Falls	OH	44223	12/18/2014	I told dr that I would like him to prescribe oxycontin for those in pain around the clock on percocet. I showed him the conversions and titration guide and asked if it makes sense when they meet the indication? Dr said he'll think about it. Nothing else learned.
PLPMDL0020000001	Akron	OH	44305	12/18/2014	Dr told me that he had a patient come in the other day on percocet who he switched to oxycontin. Dr said that he started the patient on 20mg q12. I reminded dr about titration and maintaining the q12 dosing. Told dr to focus on two plans for Butrans for medicare. Discussed Caremark SILVERSCRIPT and AARP coverage as preferred plans. Dr said that's great news and said he'd remember.
PLPMDL0020000001	Parma	OH	44129	12/19/2014	No new information learned on this call.
PLPMDL0020000001	Fairview Park	OH	44126	12/19/2014	No new information learned on this call.
PLPMDL0020000001	Uniontown	OH	44312	12/19/2014	Saw dr in new office with Dr Lonsdorf. Spoke about him continuing in his new practice of identifying appropriate patients for both oxycontin and Butrans. Reviewed dosing and conversions for oxycontin and left him with the Helen profile. Dr said he's still getting his feet wet but is busy seeing new patients.
PLPMDL0020000001	Cleveland	OH	44124	12/19/2014	Met with med asst at front desk. Left literature for Dr. Casellberry. Discussed savings card specifics for OxyContin and quick Butrans mention.
PLPMDL0020000001	Stow	OH	44224	12/19/2014	No new information learned on this call.
PLPMDL0020000001	Cleveland	OH	44130	12/19/2014	Stopped in for holiday wishes. He told me the main thing prohibiting him from prescribing butrans is insurance and prior authorizations. Pulled through formulary and med d. He said he can't promise me, but he will try to find patient with insurance that it may work for. Discussed tramadol patient as appropriate. He talked to his assistant about a patient he thought might be appropriate. He has a couple patients on oxycontin but is not something he wants to hear about.
PLPMDL0020000001	Stow	OH	44224	12/19/2014	No new information learned on this call.
PLPMDL0020000001	Munroe Falls	OH	44262	12/19/2014	Told dr I would like her to keep oxycontin reserved for patients already on the molecule who have pain around the clock and may be needing that next dose. I reviewed the indication and then asked her to keep Butrans on her radar for patients like Helen. Dr agreed and said she thinks she may have a patient this afternoon who may be appropriate for Butrans. Dr said the patient is taking 300mg of ultram and thinks Butrans might work.
PLPMDL0020000001	Mayfield Village	OH	44143	12/19/2014	Left literature at front window for Dr. Krishnan with med asst. Discussed savings card details for OxyContin and Butrans.
PLPMDL0020000001	Akron	OH	44312	12/19/2014	No new information learned on this call.
PLPMDL0020000001	Cleveland	OH	44111	12/19/2014	No new information learned on this call.
PLPMDL0020000001	Stow	OH	44224	12/19/2014	No new information learned on this call.
PLPMDL0020000001	Parma	OH	44129	12/19/2014	No new information learned on this call.
PLPMDL0020000001	Olmsted Falls	OH	44138	12/19/2014	No new information learned on this call.
PLPMDL0020000001	westlake	OH	44011	12/19/2014	Quick wave and reminder of scheduling for Butrans
PLPMDL0020000001	Cleveland	OH	44130	12/19/2014	Wishing doctor happy holiday and she told me she tried butrans for a female patient with back pain, she will keep me posted. Pulled through formulary for both products.
PLPMDL0020000001	Chagrin Falls	OH	44023	12/19/2014	Anita was exceptionally busy this morning but said that the doctors seem to be writing less of the ER meds and still prefer IR meds for some reason. Many of those patients would be appropriate for ER.
PLPMDL0020000001	Olmsted Falls	OH	44138	12/19/2014	Talked about how patients that are used to coming in every few months feel about coming in monthly now during the winter months?? Dr said he will write out scripts for his older pain patients. I said if they are recurrent pain refills, do you consider them chronic. He said some yes. I asked if I could give an option. He said sure. I highlighted the uncontrolled patient that he fills might be a candidate for a weekly patch option like Butrans. Dr said he has not problem but managed care has got to cover it for the patients. We talked about the bigger plans and coverAge. Reviewed Butrans scheduling and we asked about the abuse potential that all opioids have which includes Butrans and OxyContin.
PLPMDL0020000001	Rocky River	OH	44116	12/22/2014	No new information learned on this call.
PLPMDL0020000001	Fairview Park	OH	44126	12/22/2014	No new information learned on this call.
PLPMDL0020000001	akron	OH	44333	12/22/2014	No new information learned on this call.
PLPMDL0020000001	Akron	OH	44333	12/22/2014	No new information learned on this call.
PLPMDL0020000001	Parma	OH	44134	12/22/2014	He is very satisfied with The results he sees with butrans. He couldn't narrow down patient he usually thinks of it for because they are very diverse along with the doses he chooses for them. Butrans is the med he would prefer to write over oxycontin.
PLPMDL0020000001	Akron	OH	44303	12/22/2014	Checked stocking with Rod for OxyContin and Butrans. Rod said he has the 5 and 10mch dose for Butrans and thinks he had all 7 for OxyContin. Discussed copy cards and Caresource PA for Butrans.
PLPMDL0020000001	Parma	OH	44129	12/22/2014	No new information learned on this call.
PLPMDL0020000001	Fairlawn	OH	44333	12/22/2014	No new information learned on this call.
PLPMDL0020000001	Westlake	OH	44145	12/22/2014	No new information learned on this call.
PLPMDL0020000001	Parma	OH	44129	12/22/2014	Doctor told stories about some of the patients he has inherited on high doses of oxycontin and he is weaning them to lower doses with great success. He confirmed with me the dosing schedule because he was inheriting patients from other doctors with q8 dosing. I let him know that oxycontin is intended to be dosed q12, reviewed steady state info and we discussed dose adjustments up and down. He has stated a few patients on 5mcg butrans. He said one patient just called today and was not getting pain relief on the 5 mcg. Doctor told him that he can use two patches. I reviewed with him the recommended titration of butrans and how to best use two patches. The doctor is pleased with results he is getting w butrans.<font color=blue><b>CHUDAKOB's query on 01/04/2015</b></font>Kathy, what did you discuss relating to the downward dose adjustment relating to Oxycontin?<font color=green><b>LARAWKA's response on 01/06/2015</b></font>Told him that product reaches steady state by 1 day so that dosage adjustments can be made every 1-2 days.<font color=blue><b>CHUDAKOB's query on 01/07/2015</b></font>Steady state is 24-36 hours. If you said "by day one" this implies before 24 hours. Please make sure you are telling your HCPs what is in the FPI. The dosage adjustments refer to upward titration. We have no information or data to suggest how to downward titrate OxyContin, so we cannot make recommendations. Does this make sense?<font color=green><b>LARAWKA's response on 01/07/2015</b></font>Yes it makes sense.<font color=blue><b>CHUDAKOB closed the query on 01/12/2015</b></font>
PLPMDL0020000001	Akron	OH	44313	12/22/2014	I told dr that I want him to think of just one patient that he believes is a candidate for OxyContin that is in pain around the clock on q5 or q6 percocet. I asked dr if that's appropriate? Dr said maybe because he doesn't want to write for pain. I told dr I know he refills the IR opioids though so he's doing it already. Dr said IR and ER opioids are very different. I told him I understand and that maybe a schedule 3 Butrans patch may also be appropriate. Dr said maybe. Nothing else learned.
PLPMDL0020000001	Beachwood	OH	44122	12/23/2014	Quick call to wish happy holiday, reinforce appropriate Patient using Kathy for ER meds like oxycontin or butrans. He said his practice is growing and he will keep both in mind. His approach is more alternative, but still a place for meds.
PLPMDL0020000001	Mayfield Heights	OH	44124	12/23/2014	Met with med asst Beth at front window. Left literature for Dr. Dews. Provided OxyContin, Butrans as options for their patients who meet ER opioid indication. Left OxyContin savings sell sheet, left Kathy profile. (left same for Dr. Leizman)
PLPMDL0020000001	C. Falls	OH	44223	12/23/2014	Discussed OxyContin and Butrans attributes and spoke about th Helen profile for Butrans. Checked copy cards and stocking. They are good on all.
PLPMDL0020000001	Mayfield Heights	OH	44124	12/23/2014	Pharmacy mgr on vacation until after 1/2/15- left literature. Met with pharmacist Rod. Rod states mgr is only person permitted to order narcotics. Presented OxyContin, then Butrans, to Rod as ER options for customers who meet ER opioid indication. Discussed, left (1) Butrans patient guide; asked Rod to place on shelf with product. Left Pharmacy times article.
PLPMDL0020000001	Beachwood	OH	44122	12/23/2014	No new information learned on this call.
PLPMDL0020000001	Mayfield Hts	OH	44124	12/23/2014	Quick hallway. Reinforced options of OxyContin and Butrans for patients who meet ER indication and who can benefit from every 12 hour dosing and 1x week dosing. Formulary status update. Left literature for all hcps in office and (5) Butrans patient guides.
PLPMDL0020000001	Hudson	OH	44236	12/24/2014	Spoke with Beth about OxyContin and Butrans doses and conversions. Reminded her about Butrans being the only schedule 3 ER opioid available. Beth said they haven't seen one in a long while. Discussed OxyContin appropriate patients already on IR oxycodone.
PLPMDL0020000001	Hudson	OH	44236	12/24/2014	Quick discussion with lead tech Steve about oxycontin and Butrans attributes. Reminded him that Butrans is the only schedule 3 ER opioid available. He said he forgot it was a schedule 3. Reviewed dosing and conversions.
PLPMDL0020000001	Cleveland	OH	44113	1/2/2015	Reviewed OxyContin every 12hours, 7 tablet strengths, Formulary along with Butrans CII, 7 day transdermal, Said ok will keep it in mind for appropriate patients, sends most to Pain mgmt
PLPMDL0020000001	Cleveland	OH	44130	1/2/2015	Doctor is aware of oxycontin and its reformulation. He is not pain management but says that when he rarely needs to go to ER he is comfortable with side effect profile and efficacy of oxycontin. Reviewed formulary and doses available. He didn't know what butrans was. Reviewed indication, appropriate patient types, used scott also. Reviewed dosing, application sites, matrix system tech, formulary. He said he is not comfortable with fentanyl and he thought they were similar. I let him the that pTient is beyond butrans. Clarified appropriate patient as one that is on tramadol and needs more pain relief. Doc has decision to make, more tramadol, another molecule? That would be a good place to try butrans. That clarified it for him. He appreciated the information and will keep that option in mind.
PLPMDL0020000001	Cleveland	OH	44113	1/2/2015	Reviewed OxyContin Savings cards/formulary status along with Butrans for those patients failing on present therapy that are requiring around the clock analgesia, said he will continue to consider for appropriate patients.
PLPMDL0020000001	Garfield Hts	OH	44125	1/2/2015	Reviewed OxyContin savings cards/formulary grid along with Butrans for those patients failing on present therapy requiring around the clock analgesia, said he will continue to consider for appropriate patients
PLPMDL0020000001	Cuyahoga Falls	OH	44223	1/2/2015	No new information learned on this call.
PLPMDL0020000001	Cleveland	OH	44113	1/2/2015	No new information learned on this call.
PLPMDL0020000001	Cleveland	OH	44125	1/2/2015	Reviewed with Linda OxyContin Savings cards along with Butrans formulary/Savings cards
PLPMDL0020000001	Berea	OH	44017	1/2/2015	Talked about how the holidays were with refills compared to other days of the year and they said it wasn't too bad. We talked about the schedule of Butrans and OxyContin and how each product is dosed.
PLPMDL0020000001	Cleveland	OH	44125	1/2/2015	Reviewed OxyContin/Butrans savings cards and formulary status
PLPMDL0020000001	Cuyahoga Falls	OH	44223	1/2/2015	Quick hello and told him to continue thinking about using Butrans for his medicare population. Explained the inclusion criteria for Butrans in the clinical trials and average age of patients in the trials. Dr said ok and he needs more copy cards.
PLPMDL0020000001	Berea	OH	44017	1/2/2015	Reviewed schedule three with Butrans and dosing along side the starting dose for the 10mcg from a Hydrocodone patient who maybe appropriate. Dr didn't engage much he was working on computer while talking to me.
PLPMDL0020000001	Cuyahoga Falls	OH	44223	1/2/2015	No new information learned on this call.
PLPMDL0020000001	C. Falls	OH	44223	1/2/2015	Spoke with new technician about oxycontin and Butrans attributes, dosing and conversions. I asked if they are seeing more or less IR opioids and the response was they are seeing about the same as always. Checked copy
PLPMDL0020000001	Cleveland	OH	44130	1/2/2015	No new information learned on this call.
PLPMDL0020000001	Cleveland	OH	44113	1/2/2015	No new information learned on this call.
PLPMDL0020000001	Stow	OH	44224	1/2/2015	Spoke with Chuck and spoke about attributes for each product and stocking. Chuck said that they stock all doses of Butrans except for 15mcg. Discussed 7.5mcg dosing and oxycontin tier structure for abuse deterrence.
PLPMDL0020000001	Cleveland	OH	44113	1/2/2015	Quick review of OxyContin every 12hours, formulary update along with Butrans for those patients requiring around the clock analgesia that are failing on present therapy, said ok, book lunch with Judy
PLPMDL0020000001	Cleveland	OH	44113	1/2/2015	Reviewed OxyContin every 12hours, 7 tablet strengths, Formulary along with Butrans CII, 7 day transdermal, Said ok will keep it in mind, Asked for 1 patient today, said Ok

	Westlake	OH	44145	1/5/2015	Talked about the New Years and the hydrocodone insight.talked about my products and their scheduling. Asked what hesitation he had converting from hydrocodone to Butrans? Dr didn't answer the question but replied with its schedule three right. We talked about the patient taking more than two doses of a pain opioid and I asked if he felt that would be appropriate for a different delivery system at that point and he said maybe. So I went into starting doses of 5 or 10mcg of Butrans and covered managed care- caressure. Dr said he would try and remember. I told him about our upcoming lunch and the discussion of a new product. Dr said he would be all ears.
PPLPMDL0020000001	Cleveland	OH	44112	1/5/2015	Quick reminder of OxyContin every 12hours, along with Butrans CII, 7 day transdermal, said ok will consider,
PPLPMDL0020000001	Westlake	OH	44145	1/5/2015	Dr said he was unfamiliar with Butrans. Dr said he has an older patient population and cost is a concern. I asked if he has one patient that ma be appropriuaten(we discussed) that he feels he can try to get experience with. Dr wouldn't say yes or no. We reviewed the starting dose from hydrocodone. Covered med d plans.
PPLPMDL0020000001	Lakewood	OH	44107	1/5/2015	Talked about the appropriate patient for Butrans and the dosing. Dr asked about managed care, which I addressed. Talked to Beth the office manager about managed care.
PPLPMDL0020000001	Parma	OH	44129	1/5/2015	Really fast call. Doctor is not writing opioids anymore. She said she is aware of butrans and may consider for some patients. I left her Helen profile as a possible appropriate patient type for butrans.
PPLPMDL0020000001	Garfield Hts	OH	44125	1/5/2015	Reviewed Butrans Savings cards/Formulary status, along with OxyContin every 12hours, said he will continue to consider for appropriate patients, Said to schedule appt with Kelly
PPLPMDL0020000001	Akron	OH	44333	1/5/2015	Short discussion with the pharmacy tech and reviewed Butrans attributes and dosing along with conversions from IR opioids. Reviewed pharmacy guide for OxyContin.
	akron	OH	44333	1/5/2015	I told dr that he needs to start looking more at his Tramadol patients who meet the criteria and j diction for Butrans and convert them. I reviewed the Helen profile and told him I know he's been having recent success. Dr said he has been using it more with the intent on referring patients to pain management after prescribing Butrans. I told him it sounds like a good plan and the possibility of even keeping those patients is there. Discussed opportunity for oxycontin and the conversions from percocet.
PPLPMDL0020000001	Lakewood	OH	44107	1/5/2015	No new information learned on this call.
PPLPMDL0020000001	Garfield Hts	OH	44125	1/5/2015	Quick review of OxyContin savings cards/formulary status along with Butrans patient info booklets and Med D coverage, said he will consider, no change in access CCF policy.
PPLPMDL0020000001	Fairlawn	OH	44333	1/5/2015	No new information learned on this call.
	Fairlawn	OH	44333	1/5/2015	Spoke with Jessica about Butrans and oxycontin fill rates and asked if they have had anyone new on either product? Jessica said not that she knows but they dispense a lot of each product. Reviewed Helen profile and copyay cards for oxycontin and Butrans.
PPLPMDL0020000001	Parma	OH	44129	1/5/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	1/5/2015	No new information learned on this call.
PPLPMDL0020000001	Garfield Heights	OH	44125	1/5/2015	No new information learned on this call.
	Westlake	OH	44145	1/5/2015	We discussed OxyContin and Butrans. Invited her to my jan 29 meeting w dr kabbarra to review new product, she may attend as dr kabbarra wants to talk to her about getting Butrans on formulary. Her question was w managed care.
PPLPMDL0020000001	Akron	OH	44333	1/5/2015	No new information learned on this call.
PPLPMDL0020000001	Garfield Hts	OH	44125	1/5/2015	Visited Pain mgmnt/IM depts, left OxyContin/Butrans Initiaiton/Titration guides along with appt requests
PPLPMDL0020000001	Garfield Hts	OH	44125	1/5/2015	Left OxyContin/Butrans Initiation/Titration guides,
PPLPMDL0020000001	Cleveland	OH	44103	1/5/2015	Reviewed with Tech OxyContin/Butrans initiation/Titration, said she would relay to RPH,
	Parma	OH	44134	1/5/2015	Doctor has been having good success with butrans. He believes that it should become the number one pain medication. He writes the higher doses and often for patients that he is trying to get off of too many pills. He doesn't write much oxycontin, he will only write it for short periods of time. He thinks primary care physicians write far too many of the IR meds.
PPLPMDL0020000001	Westlake	OH	44145	1/6/2015	Dr said he uses tramadol and after tramadol he would consider Butrans for an appropriate patient. We talked about attributes of Butrans like the scheduling, dosing and managed care. Dr said his hesitation is cost for the patient. We reviewed coverage. We talked about where to select Butrans and the dr said he would prefer to use an extended release opioid for chronic than immediate release products.
PPLPMDL0020000001	Bedford	OH	44146	1/6/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	1/6/2015	Lunch appointment with center for pain management. Discussed Oxycontin and Butrans attributes, clinical trials, conversions, appropriate patients and dosing.
	Cuyahoga Falls	OH	44223	1/6/2015	Discussed both Butrans and oxycontin in depth. Reviewed appropriate patients for each product, appropriate patients for each using the MVA, conversions, clinical trials Bup 3024 and 3015 and focused on results and patients enrolled in study along with AE's associated. Discussed OxyContin abuse deterrence studies through MVA. Dr said that he continues to really like the results Butrans are giving him and his patients and find his efficacy through the 10mcg. Dr said he will stick to that dose and continues to not find additional efficacy clinically with doses higher thatch 10mcg.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	1/6/2015	Discussed both Butrans and oxycontin in depth. Reviewed appropriate patients for each product, appropriate patients for each using the MVA, conversions, clinical trials Bup 3024 and 3015 and focused on results and patients enrolled in study along with AE's associated. Discussed OxyContin abuse deterrence studies through MVA. Dr said that he continues to hope for higher Butrans doses over 20mcg and is continuing to have good success with it. Dr said that he had a patient yesterday that he started on Butrans 10mcg who had been on Norco 40mg a day and said he will be titrating very soon. I asked dr to continue to reevaluate hydrocodone patients for Butrans options or oxycontin. Dr said he does it every day and would like to give Butrans to everyone.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	1/6/2015	Discussed both Butrans and oxycontin in depth. Reviewed appropriate patients for each product, appropriate patients for each using the MVA, conversions, clinical trials Bup 3024 and 3015 and focused on results and patients enrolled in study along with AE's associated. Discussed OxyContin abuse deterrence studies through MVA. Dr discussed his prescribing of oxycontin in the hospital and how easy it is to convert patients on IR Oxycodone and how he's able to discuss with patients why it's more appropriate for them. Dr said that his only issue with it in the office is insurance coverage. Dr said almost all patients need to fail MS Contin first then oxycontin. Dr said he deals with it. Dr said that Butrans is proving to be more of his go to for his medical patients with Caresource because many of those patients have been on an IR opioid for a long time and finds almost
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	1/6/2015	Discussed both Butrans and oxycontin in depth. Reviewed appropriate patients for each product, appropriate patients for each using the MVA, conversions, clinical trials Bup 3024 and 3015 and focused on results and patients enrolled in study along with AE's associated. Discussed OxyContin abuse deterrence studies through MVA. Linda said that she is using Butrans a lot recently and said has gone through a lot of copay cards recently. Linda said she is starting them on Butrans from tramadol. I told her that's great to hear and reviewed Helen. Linda said she has also been using a lot of oxycontin and has been using 40mg of hydrocodone and more as her marker. I told Linda she is spot on.
PPLPMDL0020000001	Cleveland	OH	44113	1/6/2015	Reviewed OxyContin every 12hours, along with Butrans for those patients failing on present therapy that are requiring around the clock analgesia, Said she will continue to prescribe for appropriate patients,
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	1/6/2015	Discussed both Butrans and oxycontin in depth. Reviewed appropriate patients for each product, appropriate patients for each using the MVA, conversions, clinical trials Bup 3024 and 3015 and focused on results and patients enrolled in study along with AE's associated. Discussed OxyContin abuse deterrence studies through MVA. Started from ground zero with Butrans and oxycontin due to him saying that he never used much of either product in his previous position because the doctors never used many opioids. Greg asked about steady state, use of supplemental analgesia, AE's, and it's action at the receptor site. Used the MVA to field questions and Greg said he wanted copies of clinical trials for Butrans. Greg said he's impressed with Butrans and figures he will be writing it.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	1/6/2015	Discussed both Butrans and oxycontin in depth. Reviewed appropriate patients for each product, appropriate patients for each using the MVA, conversions, clinical trials Bup 3024 and 3015 and focused on results and patients enrolled in study along with AE's associated. Discussed OxyContin abuse deterrence studies through MVA. Stared from the beginning with each product. Denise said today is her second day and is an ATC by trade and has no experience with pain management. Reviewed all attributes for Butrans and OxyContin as well as her perception of each. Denise said she's intrigued by each and knows she has a lot to learn. She said she is dr Dmitris new PA.<font color=blue><b>CHUDAKOB's query on 01/16/2015</b></font>Just curious. What is an ATC?<font color=green><b>REICHCL's response on 01/16/2015</b></font>You don't know?<font color=blue><b>CHUDAKOB's query on 01/18/2015</b></font>If I knew I would ask? "is an ATC by trade"<font color=green><b>REICHCL's response on 01/20/2015</b></font>Certified athletic trainer<font color=blue><b>CHUDAKOB added notes on 01/22/2015</b></font>Thank you!
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	1/6/2015	Discussed both Butrans and oxycontin in depth. Reviewed appropriate patients for each product, appropriate patients for each using the MVA, conversions, clinical trials Bup 3024 and 3015 and focused on results and patients enrolled in study along with AE's associated. Discussed OxyContin abuse deterrence studies through MVA. I asked dr prior to Hydrocodone moving to a schedule 2 if he called it in? Dr said he did and he is seeing more patients in for refills and follow ups. Dr said its good business still and is managing them. I asked dr when he sees those patients in and to reevaluate them as potential candidates for either Butrans or oxycontin. Dr said about 90% of those patients are medicaid and would like to keep them on the IR hydrocodone but said he understand s that some of them may be appropriate.
PPLPMDL0020000001	Cleveland	OH	44113	1/6/2015	Reviewed Butrans formulary status, patient info booklets, reassessing patients that are failing on present therapy that are requiring around the clock analgesia. Along with OxyContin every 12hours, ERO's, Said she will continue to prescribe for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44113	1/6/2015	Reviewed Butrans patient info booklets, Med D coverage, reassessing patients that are failing on present therapy that are requiring around the clock analgesia. Along with OxyContin every 12hours, Said she will continue to prescribe for appropriate patients
PPLPMDL0020000001	Westlake	OH	44145	1/6/2015	Talked about hydrocodone insight and the appropriTe Butrans patient. Mentioned a few attributes like scheduling, managed care and dosing. Dr seems on board and when I asked if he had any hesitation for converting from hydrocodone to Butrans he said no.
PPLPMDL0020000001	Cleveland	OH	44102	1/6/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	1/6/2015	Talked about Butrans dosages and scheduling. Highlighted attributes and discussed setting up dinner program to discuss new product.
PPLPMDL0020000001	C. Falls	OH	44223	1/6/2015	Spoke with Catherine the pharmacist about oxycontin and Butrans stocking, dosing and conversions for each. Catherine asked me about conversions of Butrans and hydrocodone. Reviewed the Kathy profile.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	1/6/2015	Discussed OxyContin patient types and the copay cards. Dr said that he is continuing to use it and continued to say that it's just not covered well and patients need MS Contin first. Discussed formulary grid and asked for continued support and conversions form IR oxycodone and to use it for breakthrough if necessary.
PPLPMDL0020000001	Westlake	OH	44145	1/6/2015	No new information learned on this call.
PPLPMDL0020000001	Stow	OH	44224	1/6/2015	No new information learned on this call.
PPLPMDL0020000001	westlake	OH	44145	1/6/2015	Talked about the appropriTe patient for Butrans. Talked about the hydrocodone insight and the patient uncontrolled and might be appropriate for Butrans, highlighted managed care and dosing.
PPLPMDL0020000001	Beachwood	OH	44122	1/6/2015	No new information learned on this call.
PPLPMDL0020000001	Uniontown	OH	44685	1/6/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44109	1/6/2015	Visited IM, PMR and FP. Left OxyContin/Butrans Initiation/Titration guides.
PPLPMDL0020000001	Cleveland	OH	44109	1/6/2015	Pharmacy is under construction, left OxyContin/Butrans Initiation/Titration guides for Rph
PPLPMDL0020000001	Westlake	OH	44145	1/6/2015	Dr said he was not familiar w Butrans. Focused on scheduling, attributes if dosing and the patient on Tramadol that meets our indication. Dr said he won't write OxyCotin but couldn't give me concrete reasons as to why, dr said he writes Percocet and does have a few chronic pan patients. We reviewed Initiation guide and starting doses of Butrans. Also gave fair balance of abuse potential.

	Cuyahoga Falls	OH	44223	1/6/2015	Spoke with Lauren the pharmacist and discussed Oxycontin and Butrans attributes and dosing. Lauren said they are seeing the generic oxycontin. I asked if she's seeing prescriptions for he generic? Lauren said that that they are authorized to substitute for the generic since it's AB generic. Lauren said they have been doing most dispensing of the 40 and 80 mg doses and have all in stock. Discussed Butrans dosing and asked her if they have the 7.5 and 15mcg dose? Lauren said they have all doses in stock.
PLPMDL0020000001					
PLPMDL0020000001	Cleveland	OH	44109	1/6/2015	Quick review Of Butrans CIII, 7 day transdermal, along with OxyContin every 12hours, said ok, email appt request,
PLPMDL0020000001	Cleveland	OH	44113	1/6/2015	Quick reminder of Butrans for those patients failing on Tramadol and he is sending to pain mgmnt, said he will consider
PLPMDL0020000001	CLEVELAND	OH	44109	1/6/2015	Reviewed with Lauren OxyContin every 12hours along with Butrans CIII, 7 day transdermal, said she some from Nickels/Grace hospital, will recommend if appropriate,
	Westlake	OH	44145	1/6/2015	Talked about hydrocodone insight. Talked about changes in scheduling and the dr said he doesn't write much pain medications. Talked about Butrans abuse potential . Talked about attributes. Talked about Initiation guide managed care.
PLPMDL0020000001					
PLPMDL0020000001	Cleveland	OH	44104	1/7/2015	Reviewed OxyContin every 12hours,formulary position along with Butrans for those patients failing on present therapy that are requiring around the clock analgesia. Initiation/Titration, Savings cards, formulary, said she will consider for appropriate patients.
PLPMDL0020000001	Cleveland	OH	44104	1/7/2015	Reviewed OxyContin every 12hours, Formulary status along with Butrans CIII, 7 day transdermal, Med D coverage, said ok will continue to consider for appropriate patients, also Has had some coverage concerns for OxyContin but has sorted out.
PLPMDL0020000001					
PLPMDL0020000001	Munroe Falls	OH	44262	1/7/2015	Short discussion with dr about keeping oxycontin and Butrans more front of mind for 2015. Discussed appropriate patients for each and reminded of copy cards.
	Akron	OH	44333	1/7/2015	Short conversation about her identifying appropriate patients for Butrans and OxyContin. Elise said she is continuing to use each and hasn't been having any insurance issues which she is happy about . Reviewed Helen profile and asked for continued support.
PLPMDL0020000001	Akron	OH	44333	1/7/2015	Discussed Butrans Helen profile and choosing appropayet patients that he's getting in referrals. Dr said he did 25 blocks on Monday and is seeing patients that can benefit from Butrans. Dr said he will look closer. Discussed OxyContin doses, conversions and appropriate patient types.
PLPMDL0020000001	Cleveland	OH	44104	1/7/2015	Reviewed OxyContin every 12hours,formulary position along with Butrans for those patients failing on present therapy that are requiring around the clock analgesia. Initiation/Titration, Savings cards, formulary, said she will consider for appropriate patients, sending most chronic pain patients to Pain mgmnt but will consider.
PLPMDL0020000001	Cleveland	OH	44120	1/7/2015	Quick review of Butrans CIII, 7 day transdermal for those patients failing on present therapy, that are requiring around the clock analgesia, Along with OxyContin Formulary grid, said ok will consider for appropriate patients, sending most to pain mgmnt
PLPMDL0020000001	Fairlawn	OH	44333	1/7/2015	Reviewed MVA pages 8-10 for oxycontin and discussed conversions from IR oxycodone. Dr said that she doesn't use it much but has nothing against it and knows it works. Reviewed Helen profile for Butrans and discussed all attributes, conversions and asked dr what's holding her back? D said nothing other than insurance coverage. I asked her when she's writing it last? Dr said she hasn't so I told her she doesn't really know and to write it.
PLPMDL0020000001	Independence	OH	44131	1/7/2015	No new information learned on this call.
PLPMDL0020000001	Akron	OH	44303	1/7/2015	No new information learned on this call.
PLPMDL0020000001	Fairlawn	OH	44333	1/7/2015	Discussed OxyContin with dr and reviewed pages 8-10 on MVA and asked him about his experience with the product. Dr said he has a lot of patients on it and said it works and very tolerable. Dr said he also likes that it was reformulated. However, dr said that he hangs written a new prescription in a while. I discussed potential candidates and reviewed indication. Dr said ok. Discussed Butrans attributes, conversions and Helen profile and reminded dr it's a schedule 3, 7 day patch. I asked if he will write it and he said he will keep it in mind.
PLPMDL0020000001	Cleveland	OH	44120	1/7/2015	No new information learned on this call.
PLPMDL0020000001	Norton	OH	44203	1/7/2015	Spoke to David and the intern about both products. We talked about scheduling of the products and about Butrans dosing. David the pharmacist told me what he stocks, who wrote the latest script and where he works and the low volume that a ritzman pharmacies carries of all opioids including Butrans.
PLPMDL0020000001	Independence	OH	44131	1/7/2015	Asked if he has found a patient yet for Butrans. He said he doesn't think so. I gave him 3 patient profiles and asked him to take a look at what 3 butrans patients might look like. He smiled.
PLPMDL0020000001	Cleveland	OH	44104	1/7/2015	Reviewed with Hakim, OxyContin/Butrans Med D coverage, formulary opportunities, said he will help with reminding Pandit office,
PLPMDL0020000001	Independence	OH	44131	1/7/2015	No new information learned on this call.
PLPMDL0020000001	Norton	OH	44203	1/7/2015	Dr said he will convert to OxyContin right when patients need the continuous extended release option. Dr said he will write OxyContin after Percocet but will do it after norco. Covered managed care and coupons. Dr said he doesn't think of Butrans after Tramadol. But the dr felt it was an option if they were uncontrolled and appropriate for the Butrans. We reviewed dosing and dosages. Covered managed care.
PLPMDL0020000001	Stow	OH	44224	1/7/2015	Jamie the pharmacist said that two cvs pharmacies in the area have been robbed for oxycontin at gun point. The two pharmacies are on Graham Rd and State Rd in Cuyahoga Falls. Discussed OxyContin and Jamie said she continues to see it and hasn't seen any generic's go out from their location. Reviewed dosing and conversions and discussed Butrans Helen profile and asked for continued stocking of all doses.
PLPMDL0020000001	Cleveland	OH	44130	1/7/2015	Staff didn't really want me to talk to him, he said he did write a couple of butrans and patient seemed to respond to it. He told me to check back in a couple weeks. When I asked what type of patient he thought of it for, he said an older lady with general pain. Asked if he had any questions, he just wanted me to review where patient can place the patch. Reviewed appropriate patch placement. He could not remember if he gave patient the
PLPMDL0020000001	Fairlawn	OH	44333	1/7/2015	Discussed OxyContin and Butrans attributes, oxycontin MVA pages 8-10 and discussed him continuing to reevaluate patients on hydrocodone 40 mg and higher as well as oxycontin conversions. Dr said that he has many patients on oxycontin and said he can't remember when he wrote a new one. I told him to just reevaluate the patients we spoke about and remember the key words in the indication to help guide you. Reviewed Butrans dosing, conversion and Helen profile. I told dr to just write it.
PLPMDL0020000001	Cleveland	OH	44104	1/7/2015	Quick review of OxyContin every 12hours, 7 tablet strengths along with Butrans 7 day transdermal, CIII, said ok but as a Interventional Cardiologist she treats mainly Acutely, said she will consider if appropriate
PLPMDL0020000001	Westlake	OH	44145	1/8/2015	No new information learned on this call.
PLPMDL0020000001	Cleveland	OH	44113	1/8/2015	Reviewed Butrans for those patients failing on present therapy requiring around the clock analgesia, along with OxyContin 7 tablet strengths, formulary coverage, Said ok he will consider for appropriate patients that have
PLPMDL0020000001	Lakewood	OH	44107	1/8/2015	No new information learned on this call.
PLPMDL0020000001	Cleveland	OH	44109	1/8/2015	Reviewed OxyCotin/Butrans, discussed stocking with Rabj. Will order as we get closer to launch
PLPMDL0020000001	Cleveland	OH	44102	1/8/2015	Reviewed with Ryan OxyContin/Butrans and Stocking Hysingla, will order when RX is presented, Entire Medicaid population
PLPMDL0020000001	Euclid	OH	44117	1/8/2015	Quick hallway w DR. DeMico. Reinforced OxyContin and Butrans for patients meeting ER indication. Butrans access with BWC reinforced. Met new Med Asst HOLLY WHO WILL BE HANDLING all savings cards/samples, etc and working closely w Dr. D on that.
PLPMDL0020000001	Lakewood	OH	44107	1/8/2015	No new information learned on this call.
PLPMDL0020000001	Lakewood	OH	44107	1/8/2015	What are your thoughts in trying Butrans after tramadol? Dr said he would do it if appropriate. I asked if he would do that...and highlighted scheduling and his caresource business and coverage w Butrans. Spoke to the ma about managed care and our product.<font color=blue><b>CHUDAKOB's query on 01/16/2015</b></font>This was a good example a follow up question based on listening. Dr, said he would if appropriate. What is the next question?<font color=green><b>BARTOLI's response on 01/19/2015</b></font>Yes. Understanding what is appropriate in order for him to write Butrans after Tramadol would be valuable. Unfortunately, I didn't have much time on this call. But I will try and capture it on my next call.<font color=blue><b>CHUDAKOB closed the query on 01/22/2015</b></font>
PLPMDL0020000001	Cleveland	OH	44115	1/8/2015	No new information learned on this call.
PLPMDL0020000001	Cleveland	OH	44103	1/8/2015	Quick review of Butrans/OxyContin with Amy RPH, discussed Stocking, said ok, 99% Medicaid at this location
PLPMDL0020000001	Cleveland	OH	44115	1/8/2015	Vssited Pain mgmnt and IM depts. OxyContin/Butrans Initiation/Titration
PLPMDL0020000001	Cleveland	OH	44113	1/8/2015	Quick review of OxyContin every 12hours, 7 tablet strengths along with Butrans CIII 7 day transdermal for those patients requiring around the clock analgesia, said he is sending patients to pain mgmnt
PLPMDL0020000001	Cleveland	OH	44103	1/8/2015	Quick review of OxyContin abuse deterrent characteristics along with Butrans for those patients requiring around the clock analgesia that are failing on present therapy. Said ok but referring patients out to pain mgmnt
PLPMDL0020000001	Westlake	OH	44145	1/8/2015	They said they would stock a few doses of hysingla. We dis used dosing and abuse potential for our products as well as other opioids.
PLPMDL0020000001	Westlake	OH	44145	1/8/2015	Talked about his experience using Butrans after Tramadol. Dr didn't directly address it but talked about his experience with Butrans. Dr said managed care was important. We talked about how long or how many pills does it take before you convert to OxyCotin. Dr didn't answer, just that he has written OxyCotin more. Talked about scheduling and abuse potential for all opioids including Butrans and OxyCotin
PLPMDL0020000001	Cleveland	OH	44113	1/8/2015	Reviewed Butrans for those Tramadol failures requiring around the clock analgesia, along with OxyContin every 12hrs, Said he will continue to prescribe for appropriate patients when applicable
PLPMDL0020000001	Cleveland	OH	44103	1/8/2015	Quick review of OxyContin 7 tablet strengths along with Butrans for those patients failing on present therapy that are requiring around the clock analgesia, Said Ok no new info learned
PLPMDL0020000001	Cleveland	OH	44109	1/9/2015	No new information learned on this call.<font color=blue><b>CHUDAKOB's query on 01/16/2015</b></font>I'm confused. Didn't you discuss stocking with Hysingla ER? If so, why wasn't that info. in the call notes?<font color=green><b>GUTKOMA's response on 01/16/2015</b></font>No discussion of Hysingla ER, Pharmacist was on the phone with ins., asked to stop back at later time. Left Butrans/OxyContin info<font color=blue><b>CHUDAKOB closed the query on 01/18/2015</b></font>
PLPMDL0020000001	Westlake	OH	44145	1/9/2015	No new information learned on this call.
PLPMDL0020000001	Uniontown	OH	44312	1/9/2015	Good discussion with dr about his new practice and the types of patients he's seeing compared to his old practice? Dr said that he's seeing about twice the many of patients a day with Lonsdorf mostly because they are not on EHR. Dr said taking the 15% hit because of it doesn't impact them because they make it up in volume. Dr said they don't see BWC patients and not many medicad. Dr said his practice is made up of about 25-30% of patients complaining of some type of pain. Dr said he's still writing Butrans and just write oxycontin yesterday. Dr said he converted a patient from percocet and patient is happy. Reviewed Helen profile and asked for his continued support.
PLPMDL0020000001	Westlake	OH	44145	1/9/2015	No new information learned on this call.
PLPMDL0020000001	Beachwood	OH	44122	1/9/2015	No new information learned on this call.
PLPMDL0020000001	Cleveland	OH	44109	1/9/2015	No new information learned on this call.
PLPMDL0020000001	Cleveland	OH	44195	1/9/2015	Reviewed Butrans Initiation/Titration along with OxyContin every 12hours, said ok will consider for appropriate patients
PLPMDL0020000001	Brooklyn	OH	44144	1/9/2015	Quick review of Butrans for those patients that are requiring around the clock analgesia that are failing on present therapy,along with OxyContin formulary grid, said ok will continue to consider for appropriate patients
PLPMDL0020000001	Akron	OH	44319	1/9/2015	Discussed pharmacy sell sheet with Mike the pharmacy. Reviewed dosing, and rebates. I asked him if he would stock a few doses? Mike said the acme policy is to order it when they see it script because it's expensive and they don't know if they will move it.
PLPMDL0020000001	Beachwood	OH	44122	1/9/2015	No new information learned on this call.
PLPMDL0020000001	Berea	OH	44017	1/9/2015	The person to make the decision to order c2 was not I today. We discussed the hysingla and the other product as far as dosing and scheduling goes.
PLPMDL0020000001	Brooklyn	OH	44144	1/9/2015	No new information learned on this call.

PPLPMDL0020000001	Hudson	OH	44236	1/9/2015	Reviewed hysingla pharmacy sell sheet. Galina said she will stock it once she sees a script. I told her we will talk again ab stocking to help her agree to stock just one dose. Discussed both Butrans and OxyContin as well reviewing attributes and dosing.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	1/9/2015	Spoke with Andy about hysingla. Discussed dosing, rebates, bottles of 60. Andy was they order through computer now so he gets products in The day if he doesn't have it on the shelf. Andy asked if Im hitting the pain management offices in the area and I told him him that's my first order of business once it's launched.
PPLPMDL0020000001	BEACHWOOD	OH	44122	1/9/2015	Allison says they will not stock a new branded product until she starts to see prescriptions because they are too expensive to just sit on the shelves. She understands that it is hydrocodone and it will probably move, she will wait and see.
PPLPMDL0020000001	Berea	OH	44017	1/9/2015	We talked about the Tramadol patient who is taking enough doses to be atc and if Butrans comes to mind or what does. Dr said he would think of Butrans after Tramadol if appropriate. I asked what comes to mind for OxyCotin...? Dr said it depends how long they have been treated for pain and with what. Dr didn't have time to explain because he had to see a patient.
PPLPMDL0020000001	Akron	OH	44319	1/9/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44312	1/9/2015	No new information learned on this call.
PPLPMDL0020000001	Brooklyn	OH	44144	1/9/2015	No new information learned on this call.
PPLPMDL0020000001	Garfield Heights	OH	44125	1/9/2015	No new information learned on this call. Reviewed OxyContin Butrans utilization<font color=blue><b>CHUDAKOB's query on 01/16/2015</b></font>Stocking of Hysingla ER?<font color=green><b>GUTKOMA's response on 01/16/2015</b></font>No stocking until RX is presented, per Floater/Tech<font color=blue><b>CHUDAKOB added notes on 01/18/2015</b></font>That is fine, but it should be in your call note so we know you discussed it.
PPLPMDL0020000001	Akron	OH	44305	1/9/2015	No new information learned on this call.
PPLPMDL0020000001	Beachwood	OH	44122	1/9/2015	Deanna said they try to keep a low inventory of scheduled meds and will not order Hysingla until the scripts are presented. They will stock once the requests come in However.
PPLPMDL0020000001	Akron	OH	44312	1/9/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44319	1/9/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	1/9/2015	Discussed Butrans for those patients failing on present therapy that require around the clock analgesia, Initiation/Titration, CCF formulary along with OxyContin formulary coverage, Said she will discuss with Dept.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	1/9/2015	Spoke with Neda the Pharmacist about hysingla dosing, NDC, rebates available and asked her if she will stock it? Neda said once they see a prescription she will order it. She said that they fill for Butrans and OxyContin and told me that they were recently robbed for OxyContin. I told him I'm aware of it and that there is a possibility of reimbursement for stolen product. Neda said they have not heard from Purdue yet. Discussed Butrans dosing and Helen profile.
PPLPMDL0020000001	Independence	OH	44131	1/9/2015	Talked to both Shelly and Regina. When they get scripts they will stock but not until then. They wanted me to tell them more about the tablet and abuse deterrent characteristics but I told them I will be back once I have been fully trained. They appreciated info.
PPLPMDL0020000001	Woodmere	OH	44122	1/9/2015	Jennifer appreciated the info,mess too busy to talk. Mmshe won't stock hysingle until prescriptions start coming in. Once that happens, she commits to stocking it.
PPLPMDL0020000001	Independence	OH	44131	1/9/2015	Doug thinks that he just recently received a call from headquarters about Hysingla telling him not to order Hysingla until they get consistent orders. They said that it was too expensive. I told him that I am not sure of pricing but will come back with more information soon. He thinks it's good that they are re formulating meds with the abuse deterrent characteristics.
PPLPMDL0020000001	Independence	OH	44131	1/9/2015	Doctor said that he has tried to write butrans a couple of times since my last visit and insurance didn't approve it. He is waiting to hear back about a prior authorization from Caresource. Pulled through managed care for butrans. Informed doc that a patient had to be on a less expensive medicine like tramadol for 30 days and fail, then they should approve Butrans On Caresource.. He said he will let me know how it turns out. When he writes for oxycontin he writes Oxycodone ER and hopes he is getting oxycontin. Assured him that patients would get the reformulated oxycontin.
PPLPMDL0020000001	Westlake	OH	44145	1/12/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	1/12/2015	Discussed the Tramadol patient requiring a change in therapy to an atc dosage.. I asked him if he would be open to an extended release product like butrAnd for that patient. Dr asked about stre ths and asked about managed care. I addressed. I asked for ine oatient this week appropriate like discussed. Dr didn't say yes.
PPLPMDL0020000001	Hudson	OH	44236	1/12/2015	Discussed Butrans and OxyContin attributes, dosing snd appropriate patient types. I reviewed the Helen and Kathy profiles for Butrans and asked him when it comes to IR opioids if he has a threshold to dictate when an ER opioid is prescribed? Dr said not really but usually 3-4 day for 3-4 months is chronic and that's when he typically refers to pain management. I asked dr why he wouldn't consider a schedule 3,7 day transdermal system? Dr said he feels that's for the specialists to decide. I asked him to refer a patient on Butrans then instead of the IR opioids. Dr said he would consider that. Dr asked about incidence of constipation and reviewed the AE's from Bup 3015. Dr said he didn't know it was that low and said he will consider it for patients having too many side effects from constipation.
PPLPMDL0020000001	Westlake	OH	44145	1/12/2015	No new information learned on this call. Talked to nurses about managed care. Saw dr across windows and I gave a...for those patient in need of a change- Butrans is doses weekly and is schedule three. For appropriate
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	1/12/2015	Spoke with Pharmacists Mary and Jim about all products. Introduced the pharmacy guide for hysingla reviewing dosing, stocking and rebates. Mary said they don't need another hydrocodone. I told her physicians need more ER opioids because of improper prescribing of IR hydrocodone for patients that have daily, around the clock pain. Mary said hysingla is too expensive and that IR hydrocodone 5/325 is \$23 for 30 pills. Discussed OxyContin appropriate patients and Butrans. Mary said she has been seeing more Butrans mostly the 5 and 7.5mcg doses and said she thinks it's a great product. I asked her to stock hysingla and she said she must wait until scripts
PPLPMDL0020000001	Cleveland	OH	44113	1/12/2015	Reviewed OxyContin/Butrans savings cards, formulary grids, Said ok will continue to prescribe/recommend for appropriate patients.
PPLPMDL0020000001	Hudson	OH	44236	1/12/2015	Discussed Butrans and oxycontin attributes, dosing, appropriate patients types and Bup 3015 review for Butrans. I asked dr to please reassess his patients in pain on tramadol or Norco as potential candidates for Butrans.
PPLPMDL0020000001					Reviewed AE's for Butrans and asked him if there is a reason why he wouldn't use more? Dr said no and he will try. Dr talked about a couple of his recent successes with Butrans and said he patients love it. Dr said one patient he started was a tramadol patient.
PPLPMDL0020000001	Cleveland	OH	44113	1/12/2015	Reviewed Butrans utilization said ok will continue to prescribe for appropriate patients
PPLPMDL0020000001	Hudson	OH	44236	1/12/2015	Short conversation about Butrans patient types and inclusion/exclusion criteria in BUP 3015. I asked dr to just gain one patient who is similar to Helen or Kathy. Dr said alright. Reviewed oxycontin attributes and appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44114	1/12/2015	Discussed Butrans Initiation/Titration, Formulary coverage along with OxyContin every 12hours formulary coverage, Said ok will continue to prescribe for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44113	1/12/2015	Reviewed utlilation of Butrans, Initiation/Titration along with OxyContin every 12hours, said ok will continue to prescribe for appropriate patients
PPLPMDL0020000001	Parma	OH	44129	1/12/2015	No new information learned on this call.
PPLPMDL0020000001	Hudson	OH	44236	1/12/2015	Short call and told her I want her to write Butrans the next time she had a follow up appointment with a patient who is in pain around the clock on tramadol or hydrocodone. Reviewed the indication and the Kathy and Helen profiles.
PPLPMDL0020000001	Cleveland	OH	44113	1/12/2015	Reviewed Hysingla/Butrans/OxyContin with Cecelia RPh, Will stock product when RX is presented along with Shen,Daoud and Dale utilization
PPLPMDL0020000001	Cleveland	OH	44113	1/12/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	1/12/2015	No new information learned on this call.
PPLPMDL0020000001	Uniontown	OH	44685	1/12/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	1/12/2015	He says that it is getting too difficult to write opioids and may have to stop writing them. He thinks oxycontin works and has not had experience with butrans. He thinks it is a good option for some patients but they seem to prefer a pill.
PPLPMDL0020000001	Parma	OH	44129	1/12/2015	Handed him the scott profile through the window and said this is one of the many patient types that may be appropriate for ER meds like butrans or oxycontin, does he have a few seconds to hear why.....he said he will review the information.
PPLPMDL0020000001	Parma	OH	44129	1/12/2015	Allen said they don't move a lot of narcotics out of Marc's but promises he will if it takes off.
PPLPMDL0020000001	C. Falls	OH	44223	1/12/2015	Spoke with Cindy and Catherine about hysingla pharmacy piece discussing dosing, stocking, and rebates available. Cindy asked if I'm going to introduce hysingla to Falls Family practice? I told her I will when I am able and she said they write a lot of Norco and percoct. Cindy said that they would be a good office to start with and doesn't see how they don't write oxycontin because they write a lot of percoct. Cindy said they will look to stock one dose and wonders why they are in bottles of 60.
PPLPMDL0020000001	Fairlawn	OH	44333	1/12/2015	Spoke with pharmacist Gilbert and introduced hysingla pharmacy guide. Reviewed dosing, rebates and asked him to stock. Gilbert checked McKesson stocking from the distribution center and volumes were very low and Gilbert said if we expect to move the product the volume must go way up. Gilbert printed out stocking and sent to manager. Gilbert said he would stock 2 or three doses and will complete it this week. 20,30 and 40mg
PPLPMDL0020000001	Cleveland	OH	44109	1/12/2015	Reviewed Hysingla/Butrans/OxyContin with Rph, Will stock product when RX is presented
PPLPMDL0020000001	Westlake	OH	44145	1/12/2015	Discussed dosing and hydrocodone insight. Asked if he saw less dispensing from this pharmacy since the change and he said no. We talked about hysingla stocking but they said it needs to have a script first. We talked about OxyCotin and Butrans dosing and scheduling.
PPLPMDL0020000001	Cleveland	OH	44113	1/12/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	1/12/2015	Shay said that Target has a strict policy about not ordering until there is consistent requests for a product. New products take a while to uptake, they don't want the inventory.
PPLPMDL0020000001	Parma	OH	44129	1/12/2015	Heath said they are not in a hurry to schedule C2's. He will wait to see if it takes off and then decide.
PPLPMDL0020000001	Parma	OH	44129	1/12/2015	Doctor is new to the practice as rheumatology and IM. She doesn't want to be known as pain management but for some patients will choose an opioid. Asked her to think about ER meds for those patients in around the clock pain who are taking 90-120 pills per month and pain isn't controlled. That might be appropriate oxycontin patient. She agreed. Reviewed dosing and titration. She was not aware of butrans and thought that might be an appropriate topin for some patients. Reviewed Helen profile, initiation, titration. She appreciates the information but hopes to not write too much in the area of pain.
PPLPMDL0020000001	Stow	OH	44224	1/12/2015	Reviewed both Butrans and OxyContin attributes, dosing and patient profiles for Butrans. I asked dr if he will continue to identify the right patients and if it makes sense to take a closer look at tramadol patients taking it and the clock and still complaining of pain or asking for a refill or titration? Dr said it does and he will take more of a closer eye on those types of patients.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	1/12/2015	Spoke with Amy gives the pharmacist about hysingla pharmacy piece raiding dosing, NDC numbers and rebates available. I asked Amy if she will stock and she said she can't order until she sees a prescription. I told her that I will try again to get her to out just one dose on the shelf. I inquired about the pharmacy being robbed for OxyContin many said the same man robbed the state road store and the man asked for oxycodone so she gave him the IR oxycodone not oxycontin.
PPLPMDL0020000001	Parma	OH	44129	1/12/2015	Talked to Dave or Doug, he was very busy and short staffed. Briefly reviewed Hysingla and he said he commits to stock it once there are requests.
PPLPMDL0020000001	Westlake	OH	44145	1/12/2015	Dr said he doesn't think of Butrans because he doesn't like patches and that he is concerned that it might not work a full 7 days and then he fears he won't have pain coverage for the patient. Dr said he doesn't want to write an extended release with immediate release. I said how do you know how it's going to work if you don't find out for yourself in appropruTe patients. We talked about the uncontrolled Tramadol patient meeting the Butran indication. Dr said he doesn't write much opioids and those he does have on OxyCotin are very old. Dr he won't change his mind about a patch for his patient. We talked about managed care coverage. Dr said his older patients on chronic pain meds are on a fixed income and he won't write branded for them.
PPLPMDL0020000001					



PPLPMDL0020000001	Lakewood	OH	44107	1/13/2015	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	1/13/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	1/13/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland Hts	OH	44118	1/13/2015	Reviewed Hysingla with Ope RPH, along with Butrans CIII, 7 day transdermal with follow up on utilization and stocking
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	1/13/2015	Spoke with Shelby the pharmacist about hysingla ER and discussed dosing and rebates available. Shelby said she's intrigued with it and said she noticed it doesn't include APAP. Shelby said she will consider pre-ordering. Discussed Butrans dosing, and appropriate patients and titration.
PPLPMDL0020000001	Cleveland	OH	44106	1/13/2015	Intro to Hysingla ER, Stocking along with Butrans and OxyContin key prescribers, Marge RPH mgr. said she will bring on the 3 strengths.
PPLPMDL0020000001	Cleveland	OH	44124	1/13/2015	Left literature for Hysingla ER for Dr. C and his RN. Reinforced current ER opioids for their patients with daily, around the clock, long term pain. Left OxyContin savings sell sheet.
PPLPMDL0020000001	Rocky River	OH	44116	1/13/2015	The pharmacist said they could not order until a script comes in.
PPLPMDL0020000001	Mayfield Heights	OH	44124	1/13/2015	Met w pharmacy mgr Adrienne - introduced Hysingla ER as addition to Purdue ER opioid portfolio along with OxyContin, Butrans. Discussed, left Hysingla ER NDC code brochure & Hysingla ER pharmacists guide. Adrienne committed to ordering 1 bottle 20 mg. discussed, left (1) BUTRANS patient guide.
PPLPMDL0020000001	Berea	OH	44017	1/13/2015	Floated at the location. I reviewed hysingla with him. We talked about Butrans and OxyCotin.
PPLPMDL0020000001	Richmond Heights	OH	44143	1/13/2015	Met with pharm mgr Marlene briefly. Introduced Hysingla ER; left NDC code/pharmacists' guide. She doesn't have time to talk, Asked her to look over literature I left; and will follow up. Left (1) Butrans patient guide.
PPLPMDL0020000001	Highland Heights	OH	44143	1/13/2015	Met w float pharmacist Audrey Stein - Pharm Mgr DEBBIE Fredericks not in. Discussed, left Hysingla ER Stocking piece & pharmacists' guide. Audrey says she will look over my literature & then leave on Debbie's desk. Quick mention, OxyContin & Butrans as current ER opioids in our portfolio.
PPLPMDL0020000001	South Euclid	OH	44121	1/13/2015	Dr Flagg not available. Left literature on OxyContin, Butrans and Hysingla ER. Dr. Flagg med asst will let me know if he approves of manually adding to system. Reinforced current ER options of Oxycontin, Butrans. Left OxyContin savings sell sheet.
PPLPMDL0020000001	Lyndhurst	OH	44124	1/13/2015	Met with med assts while waiting for Dr. Goldner. Impromptu coffee/snack appt. Quick mention of Butrans, OxyContin for his patients who meet ER opioid indication. Reinforce Butrans can be called/faxed in with refills. Got Dr. Goldner permission to have Vanessa add Hysingla ER to their EHR system.
PPLPMDL0020000001	Cleveland Hts	OH	44118	1/13/2015	No new information learned on this call.
PPLPMDL0020000001	Lyndhurst	OH	44124	1/13/2015	Lunch. Sarah did NOT come down to lunch. Went up for quick hallway detail. Reinforced options for her patients with daily, around the clock, long term pain. Reminder, easy prior auth for Butrans with Caresource.
PPLPMDL0020000001	Lakewood	OH	44107	1/13/2015	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	1/13/2015	Asked the dr if he could change how he treats pain patients what would he do different knowing what he knows now? Dr couldn't answe specially but did say he would be smarter. We talked about if it made sense to transition from Tramadol to burans I a patient as their first atc extended release choice. Dr said maybe. I asked him to ponder that till next time.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	1/13/2015	No new information learned on this call.
PPLPMDL0020000001	Lyndhurst	OH	44124	1/13/2015	No new information learned on this call.
PPLPMDL0020000001	Lyndhurst	OH	44124	1/13/2015	No new information learned on this call.
PPLPMDL0020000001	Highland Heights	OH	44143	1/13/2015	Hallway. Quick product mention to Dr Salama: Butrans, then OxyContin. Met with OM - introduced Hysingla ER and left EHR form To ADD new product. She says she will fax form to their Help Desk but they need NDC codes, all strengths, how taken/how to write/how often?
PPLPMDL0020000001	Hudson	OH	44236	1/13/2015	Quick hello at front counter and told him that patient specific use for Butrans and OxyContin are extremely important. Showed him the Helen profile and asked for him to reassess those types of patients for Butrans and those wanting their refill on percocet to reassess those patients as well for ER oxycodone. Dr said alright and took he information.
PPLPMDL0020000001	Lyndhurst	OH	44124	1/13/2015	No new information learned on this call.
PPLPMDL0020000001	East Cleveland	OH	44112	1/13/2015	Intro. to Hysingla ER with LaTosha RPH mgr. Pharmacy stocking sell sheet, Reviewed Butrans/OxyContin. Will stock when RX are presented.
PPLPMDL0020000001	Cleveland	OH	44106	1/13/2015	No new information learned on this call.
PPLPMDL0020000001	Mayfield Heights	OH	44124	1/13/2015	Met with new tech first (male - Makeem?) then pharmacy mgr Saresha. Introduced Hysingla ER as addition to existing Purdue portfolio of OxyContin, and Butrans. Discussed, left Hysingla ER NDC brochure & pharmacists' guide. Discussed, left (1) Butrans patient guide. Asked Saresha to pre stock & she states it's their store policy to only order AFTER RX has been written. reminded her she is across from Hillcrest Pain doctors. She then had to
PPLPMDL0020000001	Cleveland	OH	44112	1/13/2015	Reviewed OxyContin Savings cards, every 12hours along with Butrans CIII for those patients requiring around the clock analgesia failing on present therapy, Said Ok will consider for appropriate patients,
PPLPMDL0020000001	Akron	OH	44310	1/13/2015	Discussed the pain conference he went to in Savanna GA last week. Dr said they were talking about limiting opioids and if they are justified to use ER opioids once it is determined the patient is in pain around the clock. Dr said though that it wasn't very positive for opioid use.m I asked him if it will change his prescribing and how he treats patients?m dr said no it will not. I asked for continued use of Butrans and reviewed the Kathy profile I
PPLPMDL0020000001	Stow	OH	44224	1/13/2015	asked dr to please use oxycontin where appropriate and to utilize the low dose and convert from percocet where appropriate.
PPLPMDL0020000001	Westlake	OH	44145	1/13/2015	Introduced hysingla to carla the pharmacist. Carla said that I need to be speaking with Jamie because she will probably do the ordering. I asked Carla if she is able to order and she said yes but with new products it's usually
PPLPMDL0020000001	Berea	OH	44017	1/13/2015	Floatar at the location today and asked me to return to speak to the manager. Reviewed dosing of all three products, and abuse potential ofmy products and opioids in general. Talked about patch placement and scheduling w Butrans and all 3 products.
PPLPMDL0020000001	Lyndhurst	OH	44124	1/13/2015	I asked the dr if he feels hydrocodone has slowed down since it was rescheduled. And the dr said surprising no. Dr told me about a recent survey he took and Butrans wasn't an option. So the dr put it down In the other category. After discussing options, he came to the conclusion it was a schedule two question. We talked about Tramadol and if it made sense to move from that to Butrans given they met the criteria. Dr said sure. I said what is your criteria for making that move? Dr said it depends. I asked for a general example of how far he will dose Tramadol before moving to another product if the patient isn't controlled. We reviewed the Butrans inaction guide and dosing. Talked about abuse potential with all I opioids including Butrans and OxyCotin. I asked withthenschedukingn indication how do you know when to move to Butrans or OxyCotin? Dr said they go in Butrans if they are younger because he likes the dosing weekly.
PPLPMDL0020000001	Fairview Park	OH	44126	1/14/2015	Lunch. Discussed Butrans access for his BWC patients; then easy Caresource prior auth. Also; ability to call/fax in Butrans with refills. OxyContin is another option for patients with daily, around the clock, long term pain. Asked his permission to speak with OM regarding addition of Hysingla ER to their EHR system/favorites tab - he says fine. Ellen is on vacation, but back this FRID Jan. 16.
PPLPMDL0020000001	Westlake	OH	44145	1/14/2015	No new information learned on this call. Dr was not in office, working trying to schedule apt to talk about new product. Talked manged care w nurses.
PPLPMDL0020000001	Cleveland	OH	44195	1/14/2015	Talked about the Butrans experience kit. Asked the dr what extended release opiod he would use for the elderly if managed care were off the table. Dr said it depends but he said OxyContin. We talked about a few attributes like single entity and dosing. I asked if he would ever consider Butrans after a non opioid failed and the patient met the criteria for Butrans. Dr said no. I said interesting answer. Then I asked if he would use any opioid he said yesut not atc. Which got us I to a conversation of the indication of our products. The dr positions Butrans after norco and maybe after Tramadol currently.
PPLPMDL0020000001	Cleveland	OH	44113	1/14/2015	Quick review of OxyContin Savings cards along with Butrans 7 day transdermal, Said she will continue to prescribe for appropriate patients.
PPLPMDL0020000001	Fairlawn	OH	44333	1/14/2015	Quick review of Butrans patient info booklets and savings cards, said thank you will continue to prescribe for appropriate patients
PPLPMDL0020000001	Garfield Hts	OH	44125	1/14/2015	Reviewed both products attributes, conversions, titration and appropriate patient types with profiles. I asked dr to get the feel for Butrans by using it clinically and asked if he has any reservations? Dr said not really other than not wanting to be writing ER opioids. I told him he kind of already is if he's refilling IR opioids for patients that take them 3 or more times a day. Dr said I have a good point and will try.
PPLPMDL0020000001	Cleveland	OH	44195	1/14/2015	Quick review of Butrans CIII, 7 day transdermal for those patients failing on present therapy requiring around the clock analgesia, OxyContin savings cards, said ok will consider for appropriate patients
PPLPMDL0020000001	Akron	OH	44307	1/14/2015	No new information learned on this call.
PPLPMDL0020000001	CLEVELAND	OH	44195	1/14/2015	Spoke with Jeff the pharmacist about hysingla ER outlining the dosing, and rebates available. Jeff said he can see how it will be necessary for some patients that have been on products like Norco for a long time. Jeff said he has been also filling some oxycontin recently for patients coming from Percocet.
PPLPMDL0020000001	Cleveland	OH	44103	1/14/2015	Discussed Hysingla with Kim tech, Troy was out, will relay info and stocking initiative to him.
PPLPMDL0020000001	Solon	OH	44139	1/14/2015	Reviewed with Abdul all three products will stock when RX are presented but will discuss with staff
PPLPMDL0020000001	North Olmsted	OH	44070	1/14/2015	Kara said that's she is not a regular at the pharmacy, she could not commit to ordering. She will pass the information on. She thinks that the product will do well but her experience is that products don't usually get stocked when they are brand new. M
PPLPMDL0020000001	Stow	OH	44224	1/14/2015	Spoke to nada and she told me she was about to be promoted to manager shortly. We talked about ordering hysingla. And she was uncertain. She said she will talk w her supervisor and. Said I would follow up
PPLPMDL0020000001	Bedford	OH	44146	1/14/2015	Spoke with pharmacy manager Jamie about hysingla and reviewed the pharmacy guide. I asked her if she would order the 20,30 and 40 mg and she said she committed to doing that. Reviewed rebates available.
PPLPMDL0020000001	Cleveland	OH	44125	1/14/2015	Ed said that they don't stock until they see prescriptions. Told me to check in with him once I have more information
PPLPMDL0020000001	Euclid	OH	44119	1/14/2015	Reviewed with Sarah all three products, will relay info to staff and will follow up on next visit
PPLPMDL0020000001	Cleveland	OH	44195	1/14/2015	Met with tech Paula; float pharmacist in today, left Hysingla ER stocking brochure & pharmacist a guide for Kevin. He will look over my literature, then place on pharm mgr Kevin's desk. Paula says stop back Monday - Jan 19- BOTH Kevin & Laurel will be here! Left OxyContin savings sell sheet, (1) Butrans patient guide.
PPLPMDL0020000001	Solon	OH	44139	1/14/2015	No new information learned on this call.
PPLPMDL0020000001	Euclid	OH	44119	1/14/2015	No new information learned on this call.
PPLPMDL0020000001	BEDFORD	OH	44146	1/14/2015	Paul on vacation/ left literature, Butrans patient guides/savings cards with med asst or Paul. Introduced Hysingla ER as new product which I request the practice add to their computer sytem/favorites. RN Carla also on vacation. Left Hysingla ER info for nurse mgr Yvonne.
PPLPMDL0020000001	Solon	OH	44139	1/14/2015	Mika said that they typically don't stock new products proactively. He asked me to keep in touch once I start talking to physicians about he product because he thinks this product may do well earlier than many do.
PPLPMDL0020000001	Cleveland	OH	44125	1/14/2015	Kevin said that they don't see too many opiods go through that pharmacy. He said that he will not consider stocking until they get some prescriptions for the med
PPLPMDL0020000001	Fairlawn	OH	44333	1/14/2015	Discussed all three products with Yana RPH-float, said ok will relay stocking initiative with staff.
PPLPMDL0020000001	Cleveland	OH	44111	1/14/2015	Spoke with Gary bat hysingla and reviewed the formation on the pharmacy sell sheet. I asked Gary if he would be ok with ordering one bottle of 20mg? Gary said possibly but thinks giant eagle makes them wait until they see a prescription especially since it's a narcotic. I asked him to check and then discussed attributes for Butrans and OxyContin.
PPLPMDL0020000001	Fairlawn	OH	44333	1/14/2015	Working on coordinating a return visit to talk about new product. Highlighted Butrans dosing. asked if he knew where to write it? Dr said yes. Reminded of Initiation guide.
PPLPMDL0020000001	Stow	OH	44224	1/14/2015	Short conversation about Butrans and OxyContin. Reviewed attributes, dosing, conversion and Helen and Kathy profiles for Butrans. I asked dr Hester to just try Butrans for a patient who has similar characteristics as Helen or Kathy and asked her if she can do that? She said she will try but doesn't really want to prescribe ER opioids. Reviewed oxycontin MVA pages 7-10.
PPLPMDL0020000001	Stow	OH	44224	1/14/2015	No new information learned on this call.

PLPMDL0020000001	Munroe Falls	OH	44262	1/14/2015	No new information learned on this call.
PLPMDL0020000001	Fairlawn	OH	44333	1/14/2015	Discussed inclusion and exclusion criteria for Butrans and asked him if he currently has existing patients on tramadol or Norco who take it multiple times a day? Dr said he does. I asked if any of them have daily, around the clock pain? Dr said he's sure most do. Reviewed attributes, dosing, conversions and patient types for both Butrans and OxyContin. Dr said he figures he should be using Butrans and will try.
PLPMDL0020000001	Euclid	OH	44119	1/14/2015	Met with pharmacy mgr Dave Baker. Introduced Hysingla ER as addition to Purdue ERO portfolio, of OxyContin & Butrans. Discussed, left Stacking brochure & pharmacists guide. Dave agreed to pre order 1 bottle of 20 and 1 bottle of 40 mg Hysingla ER.
PLPMDL0020000001	Cleveland	OH	44106	1/14/2015	Discussed with Tech all 3 products, said she would relay info to mgr.
PLPMDL0020000001	Shaker Heights	OH	44122	1/14/2015	Danielle said that she will consider stocking it once it is launched and I have some insight into what the doctors are thinking. It takes only one day to get it from the supplier so she doesn't see a need to rush things. She will stock it once the scripts start coming.
PLPMDL0020000001	Westlake	OH	44145	1/14/2015	Highlighted upcoming meeting to talk about new product, mgr said she would be there. I asked about how her patients are doing on Butrans. She said good. I covered patch placement and mentioned the appropriate tramdol patient for Butrans per our indication.
PLPMDL0020000001	Euclid	OH	44119	1/14/2015	Met with OM Kim. This is Dr. Winer's "On Call" week she says/he's at hospital. He will be back tomorrow 9-12n. Left Hysingla ER EHR sheet and asked her to manually add Hysingla ER to their computer system/add to favorites. She will discuss with Dr. Winer. Reminded her that currently, I have OxyContin and Butrans for their patients with daily, around the clock, long term pain.
PLPMDL0020000001	Westlake	OH	44145	1/14/2015	No new information learned on this call.
PLPMDL0020000001	Akron	OH	44313	1/14/2015	Told dr that I would like him to identify a few of his existing patients on percocet 20-30mg a day who have pain around the clock and he's considering titrating their percocet and convert the, to q12 oxycontin. Dr said ok and he'll try. I also told him to keep Butrans available for those NSAID and tramadol patients who also have pain around the clock and then showed him the conversions guide.
PLPMDL0020000001	Cleveland	OH	44195	1/14/2015	Reviewed OxyContin Initiation/Titration, savings cards
PLPMDL0020000001	Akron	OH	44307	1/14/2015	Dr showed me the Butrans mailer he got which outlines the Kathy profile. Dr said its good I come visit as well because he said he thinks he has a candidate for Butrans with pain just about every day. I reviewed the dosing, how to initiate and convert as long as steady state and titration. Dr said he's going to give it a shot again. Discussed OxyContin for patients who are on percocet. Dr said he converted a patient recently and the patient said the percocet wired better. I explained IR and ER oxycodone and asked dr to be persistent with the patient and make sure to titrate if adequate analgesia isn't reached.
PLPMDL0020000001	Euclid	OH	44117	1/14/2015	Lunch. Dr DeMicco says he's has trouble with a few plans getting OxyContin covered; even after patient has completed the required 30 days of morphine sulfate. Asked how those patients have done while on morphine/ Dr. replied: morphine does not work for them. Recently, for a patient at Painesville office: Dr. D stated he just wrote Butrans 10 mg for male patient; so far so good; no call back to office. total office call on Hysingla ER and addition to our portfolio; gave EHR sell sheet/let Dr. D know I will be certified soon on product; and have info for him after 1/29/15. Dr. says he'd write a 1x day hydrocodone, but will BWC pay for it? told him we are working on that and I can follow up when I know more.
PLPMDL0020000001	Cleveland	OH	44127	1/14/2015	Reviewed Butrans for these patients failing on present therapy that are requiring around the clock analgesia along with OxyContin every 12hours, said ok will consider, but sending most patients to pain mgmt
PLPMDL0020000001	Akron	OH	44303	1/14/2015	Spoke with Rod about Hysingla ER outlining the pharmacy piece. Rod asked which doses I think will move most and I told him I'm not sure but I would suspect 20-40mg. Rod said he is willing to order one bottle of the 20mg and should have it in by the end of the week. Rod said that he fills a lot of oxycontin and ordered one bottle of generic 80mg and was surprised that its \$8 more than the original. Rod said the generic and branded look exactly the same with the same markings.
PLPMDL0020000001	Bedford	OH	44146	1/14/2015	Dr is starting to think of it for more patient types than in the past. Butrans is working well for many of his patients. He believes the trend is going more toward ER med story patients in around the clock pain.
PLPMDL0020000001	Euclid	OH	44119	1/14/2015	No new information learned on this call. QUICK HALLWAY. Mention Oxycontin Essentials kits, Butrans trial/savings. RN Carla on vacation/Paul Gawry PA-C on vacation. Nurse Mgr RN Yvonne busy because 2 out on vacation; stop back next week. Left her information regarding Hysingla ER - left EHR guide/add new product/add to favorites/hcp's need to manually enter (explained all to med asst and she will communicate to Yvonne)
PLPMDL0020000001	Parma Heights	OH	44130	1/15/2015	Larissa the pharmacist was very busy. She said that an ER hydrocodone seems like a bad idea. She is worried about that much medicine in one pill. She understands that hydrocodone is regulated more closely now, but still isn't sure. Told her that I will be back another time after training and when she isn't as busy to discuss it.
PLPMDL0020000001	Cuyahoga Falls	OH	44223	1/15/2015	Per Barry Chudaskoff I confirmed with dr Ali that he will be attending the new product training on Jan 18-19. Asked him to continue identifying appropriate patients for Butrans and OxyContin.
PLPMDL0020000001	Cleveland	OH	44195	1/15/2015	Reviewed OxyContin Savings cards along with Butrans for those patients requiring around the clock analgesia, Said Ok will consider for appropriate patients
PLPMDL0020000001	Cleveland	OH	44195	1/15/2015	Quick Butrans review Savings cards along with OxyContin savings cards, said ok will continue to prescribe for appropriate patients
PLPMDL0020000001	Cleveland	OH	44195	1/15/2015	Reviewed Butrans Initiation/Titration, along with OxyContin Savings cards , said ok will continue to recommend and prescribe for appropriate patients
PLPMDL0020000001	Cleveland	OH	44115	1/15/2015	Reviewed Butrans for those Tramadol failures that are requiring around the clock analgesia, said ok will continue to prescribe for appropriate patients
PLPMDL0020000001	Stow	OH	44224	1/15/2015	Discussed hysingla pharmacy sell sheet to the pharmacy tech. Asked him to inquire about stocking at least one dose.
PLPMDL0020000001	Stow	OH	44224	1/15/2015	No new information learned on this call.
PLPMDL0020000001	Stow	OH	44224	1/15/2015	Showed dr the Kathy profile for Butrans and told him I want him to remember two things for this patient type. Reviewed the profile and told him for patients coming in for a follow up and are on hydrocodone to ask himself if the patient is in daily, around the clock pain to use Butrans where appropriate. Told him for patients over 40mg a day of hydrocodone to consider oxycontin as long as they meet the indication. Dr asked about insurance with Butrans and reviewed private , medicare and Caresource coverages and PAs.
PLPMDL0020000001	CLEVELAND	OH	44195	1/15/2015	Reviewed with Troy Hysingla/OxyContin and Butrans, said ok
PLPMDL0020000001	Cleveland	OH	44195	1/15/2015	Reviewed with Tech Butrans/Hysingla will relay info and stocking initiative with Steve Rph mgr
PLPMDL0020000001	Cleveland	OH	44195	1/15/2015	Reviewed with Rph Hysingla/Butrans/OxyContin. will stock Hysingla ER when RX is presented
PLPMDL0020000001	Cleveland	OH	44195	1/15/2015	Reviewed with Roxan Hysingla/Butrans/OxyContin. will stock Hysingla ER when RX is presented
PLPMDL0020000001	Cleveland	OH	44103	1/15/2015	Reviewed with Rph Hysingla/Butrans/OxyContin. will stock Hysingla ER when RX is presented
PLPMDL0020000001	Lakewood	OH	44107	1/15/2015	Would not stock
PLPMDL0020000001	Akron	OH	44305	1/15/2015	Spoke with Todd the pharmacist floater due to Matt being off. Reviewed hysingla and asked if he would stock? He said he has to wait until Matt gets back.
PLPMDL0020000001	Stow	OH	44224	1/15/2015	Holly told me that she just sent back the Butrans she never moved. I introduced hysingla to holly and she said they are using electronic ordering and get it in next day so she will wait until she sees a prescription.
PLPMDL0020000001	Cleveland	OH	44105	1/15/2015	Reviewed with Kim Rph Hysingla/Butrans/OxyContin. will stock Hysingla ER when RX is presented
PLPMDL0020000001	Lakewood	OH	44107	1/15/2015	Working on coordinating a return visit to talk about hysingla to appropriate c2 ordering person. The pharmacist didn't have time to review in detail the information.
PLPMDL0020000001	Lakewood	OH	44107	1/15/2015	Spoke to the haram it and she said maybe on ordering hysingla but she had to ask her manager that was not in. I will follow up on Friday.
PLPMDL0020000001	Olmsted Falls	OH	44138	1/15/2015	Mark the pharmacist would not order the new product until someone gets a script he said no exception.
PLPMDL0020000001	Tallmadge	OH	44278	1/15/2015	Spoke with Adam the pharmacist about hysingla reviewing the pharmacy sell sheet. He asked if its like Zohydro because he wouldn't stock it. I asked him to read through the FPI and it will answer his question. Adam looked it over and said he will order it when he sees a prescription. I asked if he could preorder just the 20 mg and he said he will look it over and consider it. I told hi, I will follow up next week.
PLPMDL0020000001	LAKEWOOD	OH	44107	1/15/2015	Spoke to the pharmacist about hysingla and he told me to contact mark on Friday because he is the manager that orders. They told me they wouldn't order unless a script comes in but he said he would pass information over to the manager and I said I would contact him.
PLPMDL0020000001	Parma	OH	44134	1/15/2015	Connie has heard about Hysingla, thinks it is a great option and will be well received from the physicians. She will wait until there are scripts before she stocks it because it is a C2.
PLPMDL0020000001	Parma	OH	44129	1/15/2015	Keith the pharmacist didn't really have much time to talk. He said that he appreciates the information, but will not stock Hysingla until he starts to see some prescriptions.
PLPMDL0020000001	Parma	OH	44129	1/15/2015	Myra is a big advocate for butrans, wish the patients wouldn't push back on it, other than cost, it makes sense for many patients. She had to rush, but told me that she is rushing to doctors appointment because she is getting her right knee replaced in a few weeks. She said two patient this morning got the benefit of butrans. Reminded her that low dose oxycontin might be an option for some patients in around the clock pain.
PLPMDL0020000001	Stow	OH	44224	1/15/2015	Quick discussion about patient types for Butrans and OxyContin when it comes to hydrocodone. Reviewed Kathy and then received Maggie for oxycontin. I asked dr to just try Butrans clinically and to think more about oxycontin for patients taking over 40mg of hydrocodone a day and are still in pain.
PLPMDL0020000001	Mayfield Village	OH	44143	1/15/2015	Lunch. Discussed with Dr. Krishnan Butrans as option for his patients with daily, around the clock, long term pain. Asked if he's initiated lately? He replied no. He states he just hasn't seen the right patient type. I told him, look at those patients taking 3-4 Tramadol daily, and pain not controlled - those are patients I want you to keep top of mind for Butrans. Can be called/faxed in with refills. No dose adjust renal impaired and mild/moderate renal impaired. Oxycontin, CII, also available if Butrans not appropriate, controlled release, dose every 21 hrs.
PLPMDL0020000001	Parma	OH	44134	1/15/2015	No new information learned on this call.
PLPMDL0020000001	Parma	OH	44134	1/15/2015	Igor said that he will not proactively stock a C2, until there is some interest. Once he sees scripts he will stock it, but not until then. If there is significant doctor interest in the area, let him know and in the meantime, let's wait and see.
PLPMDL0020000001	Cleveland	OH	44195	1/15/2015	No new information learned on this call.
PLPMDL0020000001	Mayfield Village	OH	44143	1/15/2015	Lunch with practice. Quick mention of products: Butrans and OxyContin to Kristy.
PLPMDL0020000001	Tallmadge	OH	44278	1/15/2015	No new information learned on this call.
PLPMDL0020000001	Tallmadge	OH	44278	1/15/2015	Reviewed pharmacy sell sheet with Seth the pharmacist. I asked him if he would stock a dose or two and he said for a narcotic they have to wait until they see a prescription.
PLPMDL0020000001	Lakewood	OH	44107	1/15/2015	Pharmacist told me they fill a lot of hydrocodone daily and that he could see hysingla being written but wouldn't order product until they get a script.
PLPMDL0020000001	Uniontown	OH	44685	1/15/2015	Discussed hysingla ER with Dennis the pharmacist. Reviewed dosing, name, rebates available and asked him if he would stock some? Dennis said he is intrigued with it and will consider it but wants to read over the FPI. I told him I will follow up next week.
PLPMDL0020000001	Tallmadge	OH	44278	1/15/2015	Quick call with asking dr to work at identifying a patient for Butrans like Helen and Kathy. Left him the profiles. Asked him to also use oxycontin for patients over 40mg a day who are in pain around the clock.
PLPMDL0020000001	Parma	OH	44129	1/15/2015	Laura has been trying Butrans a little bit more and is seeing success with it for many patients. Patients are resistant to it and prefer pills. For that reason also, she like to choose butrans for some patients. Reviewed low dose oxycontin option for some patients where twice daily dosing might be appropriate.
PLPMDL0020000001	Akron	OH	44305	1/15/2015	No new information learned on this call.
PLPMDL0020000001	Cleveland	OH	44130	1/15/2015	Talked with Lorrie the tech and Renee the pharmacist. They were interested to hear about Hysingla. They think it will be a good product. When products are first launched they are usually too expensive. They will not stock it until they get prescriptions for it. Keep them updated with information
PLPMDL0020000001	Akron	OH	44312	1/15/2015	No new information learned on this call.

	Mayfield Village	OH	44143	1/15/2015	Lunch with practice. Reinforced current products available for Dr Mukunda's patients with daily, around the clock, long term pain. OxyContin controlled release tablets, CII, for osteoarthritis pain. Discussed conversion from Percocet or oxycodone. Butrans, studied in chronic back pain, for patients currently taking 3-4 Tramadol daily. Met with med asst Heather - she will get Hysingla ER information to their IT department to ADD product into their system.
PPLPMDL0020000001	Cleveland	OH	44195	1/15/2015	Visited Pain mgmnt dept along with Neuro , OxyContin, Butrans Initiation/Titration
PPLPMDL0020000001	Mayfield Village	OH	44143	1/15/2015	Lunch. REnforced patient types discussed previously and product attributes for OxyContin including every 12 hr dosing. Butrans, CIII, 1x week transdermal, can be called/faxed in with refills, no dose adjust. required renal, mild/moderate hepatic impaired. Reinforced easy prior auth with Caresource. Dr says he prefers to provide a long acting opioid for patients.
PPLPMDL0020000001	Mayfield Village	OH	44040	1/15/2015	Met w pharmacy mgr Kelly Rhodes. Introduced Hysingla ER to Kelly. Discussed, left Hysingla ER pharmacists' guide/stocking piece. Kelly wanted to know if Cardinal Health has product in warehouse. I replied yes/ready to order. Kelly committed to pre order 1 bottle of 20 mg Hysingla ER. Reinforced current products available for customers with daily, around the clock, long term Pain: OxyContin, CII controlled release tablets/dosed every 12 hrs; and CIII Butrans, 1x week pain patch; can be called/faxed in with refills.
PPLPMDL0020000001	Parma	OH	44134	1/15/2015	John liked what he has heard about Hysingla so far, believes the patients will be in looking for it so he agreed to stock the lower doses of Hysingla. He asked that I tell the physicians in the area that he will have it.
PPLPMDL0020000001	Parma	OH	44129	1/15/2015	Told him that when I come in I want him to think of his favorite patients....the ones in around the clock pain. I have some appropriate solutions. Oxycontin with q12 dosing and once weekly butrans. He told me I have to keep reminding him of butrans
PPLPMDL0020000001	Brooklyn	OH	44130	1/15/2015	Thach Huynh is the pharmacist and she had read something about Hysingla. She is excited to hear more about it, including formulary coverage....that is usually the limiting factor. She said that she believes the product will do well. She checked to see if it was in their system, it was. She said she will order some because they like to be the first to have meds.
PPLPMDL0020000001	Cleveland	OH	44114	1/16/2015	Reviewed Butrans for those patients requiring around the clock analgesia, said ok will continue to prescribe for appropriate patients
PPLPMDL0020000001	University Hts	OH	44118	1/16/2015	Reviewed OxyContin every 12hours along with Butrans 7 day transdermal for those patients failing on present therapy requiring around the clock analgesia, said ok, will continue to consider for appropriate patients
PPLPMDL0020000001	Garfield Hts	OH	44125	1/16/2015	Quick review Butrans for those patients requiring around the clock analgesia failing on present therapy along with OxyCnatin every 12 hours, said ok will continue to prescribe for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44114	1/16/2015	Reviewed Hysingla ER with Horace along with Butrans and OxyContin. Said since Metro has moved out of plaza RX's have decreased. But will watch for utilization and order accordingly.
PPLPMDL0020000001	Uniontown	OH	44685	1/16/2015	Quick hello at the front desk. Abby said that she is happy with Butrans and OxyContin and just had a patient converted to oxycontin the other day. I asked dr which dose and she said she thinks 20mg and that the patient is happy. Nothing else learned.
PPLPMDL0020000001	Mogadore	OH	44260	1/16/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44105	1/16/2015	Reviewed Hysingla ER with Hakim along with Butrans and OxyContin. Said he will watch for utilization and order accordingly. Will relay info and request with Abdul
PPLPMDL0020000001	Cleveland	OH	44125	1/16/2015	Reviewed Hysingla ER with Joshua along with Butrans and OxyContin. Said he will watch for utilization and order accordingly
PPLPMDL0020000001	Cleveland	OH	44109	1/16/2015	Reviewed Hysingla ER with Ray along with Butrans and OxyContin. Said he will watch for utilization and order accordingly. Orders every 2 weeks
PPLPMDL0020000001	Cleveland	OH	44109	1/16/2015	Reviewed Hysingla ER with Nick along with Butrans and OxyContin. Said he will watch for utilization and order accordingly. Alena Rph mgr does Narcotic ordering
PPLPMDL0020000001	Cleveland	OH	44130	1/16/2015	Edwin thinks that there will be a demand for the product, but he is going to wait to stock it until he sees some prescriptions.
PPLPMDL0020000001	Akron	OH	44312	1/16/2015	I asked pharmacist if he would stock hysingla after reviewing the pharmacy sell sheet? He said that he will order it when he sees a prescription. Discussed the rebates available now and he said he has to wait.
PPLPMDL0020000001	Cleveland	OH	44109	1/16/2015	Reviewed Hysingla ER with Nate along with Butrans and OxyContin. Said he will watch for utilization and order accordingly
PPLPMDL0020000001	Copley	OH	44321	1/16/2015	Discussed hysingla pharmacy sell sheet to the pharmacist and asked for stocking. was told that they will order when they see a script.
PPLPMDL0020000001	Akron	OH	44313	1/16/2015	Discussed Hysingla ER and reviewed sell sheet. I asked if they would stock just one dose and pharmacy tech said he will discuss with pharmacist.
PPLPMDL0020000001	Cleveland	OH	44130	1/16/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	1/16/2015	No new information learned on this call.
PPLPMDL0020000001	Valley View	OH	44125	1/16/2015	Reviewed Hysingla ER with Aaron along with Butrans and OxyContin. Said he will order accordingly
PPLPMDL0020000001	Cleveland	OH	44130	1/16/2015	No new information learned on this call.
PPLPMDL0020000001	South Euclid	OH	44121	1/16/2015	Quick product mention to Dr. Flagg. Met with med asst at front window. Left Hysingla ER EHR system flashcard - asked her to manually enter new product; hcps' can start writing after 1/29/15, when new website up/trial/savings will be available to patients.
PPLPMDL0020000001	Cleveland	OH	44130	1/16/2015	Colleen said that she would be happy to stock Hysingla once the doctors are writing it. Mit doesn't make sense to stock it until they do.
PPLPMDL0020000001	Mayfield Heights	OH	44124	1/16/2015	Met with float tech and float female pharmacists who will only be at this location for 2 more weeks. Pharmacy mgr Jaskaran is back in sat and MON. Introduced Hysingla ER and left pharmacists' guide/stocking brochure.
PPLPMDL0020000001	Middleburg Heights	OH	44130	1/16/2015	Asked float pharmacist to look over before placing on Jaaskran's desk. Reinforced Oxycontin, Butrans as other ERO options currently.
PPLPMDL0020000001	Cleveland	OH	44130	1/16/2015	Dan was alone, so didn't have much time. He appreciated the information but will not stock Hysingla until he sees prescriptions.
PPLPMDL0020000001	Cleveland	OH	44109	1/16/2015	Victoria appreciates the information, but doesn't feel that there will be a big demand for that too quickly so she will wait to stock Hysingla.
PPLPMDL0020000001	Cleveland	OH	44109	1/16/2015	Reviewed Hysingla ER with tech along with Butrans and OxyContin. Malak wasn't available but will relay info.
PPLPMDL0020000001	Akron	OH	44312	1/16/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44312	1/16/2015	Showed dr Bup 3015 and reviewed inclusion and exclusion criteria and told dr I want him to identify patients on hydrocodone and tramadol and 62% of patients in trial were on hydrocodone medications. I also asked him to identify patients that are not tolerating IR medications
PPLPMDL0020000001	Cleveland	OH	44113	1/16/2015	No new information learned on this call.
PPLPMDL0020000001	Middleburg Heights	OH	44130	1/16/2015	Talked with Michael the pharmacist. They see sick patients that are generally on IV's and vents! But some do need pills. He doesn't anticipate much use for Hysingla, but he said that you never know. It is also a very small pharmacy that he operates.
PPLPMDL0020000001	Cleveland	OH	44102	1/16/2015	Reviewed Hysingla ER with Tan along with Butrans and OxyContin. Said he will watch for utilization and order accordingly
PPLPMDL0020000001	Akron	OH	44319	1/16/2015	Discussed Hysingla to pharmacist and discussed stocking request, dosing, and rebates. She said that she's not sure yet but said she thinks she will have to wait until she sees a script.
PPLPMDL0020000001	Cleveland	OH	44109	1/16/2015	Reviewed Hysingla ER with Raj along with Butrans and OxyContin. Said he will watch for utilization and order accordingly. Asked to order in from key prescribers
PPLPMDL0020000001	Mayfield Heights	OH	44124	1/16/2015	Met with Frank @ front window. Reinforced current products available for this patients with daily, around the clock, long term pain. Reinforced and left pack of Oxycontin savings cards. Reinforced Butrans is CIII/can be called/faxed in with refills.
PPLPMDL0020000001	Cleveland	OH	44130	1/16/2015	Natalie said that she wouldn't stock it until she understands the formulary situation at MedImpact and until the pain dos in the area start writing it.<font color=blue><b>CHUDAKOB's query on 01/25/2015</b></font>-We now know that MedImpact will have good formulary coverage. Print out a formulary grid for her so she can see it once we return.<font color=green><b>LARA WKA's response on 01/27/2015</b></font>-Ok, good thought!<font color=blue><b>CHUDAKOB closed the query on 01/30/2015</b></font>
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	1/16/2015	Good discussion with dr about Butrans and he wanted to make sure he got more than one pack of copay cards. Dr said that he really loves the delivery system and the buprenorphine molecule and said he just feels really comfortable prescribing. Dr said that he wrote it recently for a patient who was not tolerating her IR opioid and is doing much better. I asked for continued prescribing.
PPLPMDL0020000001	Akron	OH	44312	1/16/2015	Showed dr Bup 3015 and reviewed inclusion and exclusion criteria and told dr I want him to identify patients on hydrocodone and tramadol and 62% of patients in trial were on hydrocodone medications. I also asked him to identify patients that are not tolerating IR medications
PPLPMDL0020000001	Akron	OH	44312	1/16/2015	Reviewed Butrans Bup 3015 trial and asked him to use it for his tramadol and hydrocodone patients who are in pain around he clock and meet the indication. Asked him to also use Butrans foe those who can't tolerate their IR medications.
PPLPMDL0020000001	Akron	OH	44319	1/16/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	1/16/2015	ick review of OxyContin every 12hours along with Butrans 7 day transdermal for those patients failing on present therapy requiring around the clock analgesia, said ok, only at Hospital 1/2 days doing surgeries at St. V's
PPLPMDL0020000001	South Euclid	OH	44121	1/16/2015	Met with pharmacy mgr Jill. Introduced Hysingla ER as addition to Purdue's current portfolio of OxyContin and Butrans. Jill asked how is this product different from Zohydro and how do you know it will be written? She stated further: I've never dispensed Zohydro. I replied: this is different product, different company. No acetaminophen, 1x day or every 24 hr dosing; abuse deterrent properties. Asked her to read literature and follow up next time in area. Discussed, left OxyContin pharmacists guide; left Butrans patient guide. asked her to consider a pre order of 20 mg, which may be most common strength. She gave me a "maybe."
PPLPMDL0020000001	South Euclid	OH	44121	1/16/2015	Spoke with pharmacist Bonnie. Introduced Hysingla ER as addition to Purdue's current ERO portfolio of Oxycontin, first ER opioid with Tier 1/3 abuse deterrent labeling/FDA, CIII, tablet, dosed every 12 hrs; and CIII, Butranx 1x week patch. Discussed, left Hysingla ER pharmacists' guide and stocking brochure. Bonnie says product sounds promising/will review info and place on Lynne's desk. She and Lynne will work together on Mon.
PPLPMDL0020000001	Mayfield Heights	OH	44124	1/16/2015	Met with tech Janice. Owner/Pharmacy Mgr Warren was on conf call/couldn't come up front. Discussed, Left Hysingla ER pharmacists' guide/stocking brochure. Let Janice know I will follow up next time in Hillcrest and to have Warren call if he has questions.
PPLPMDL0020000001	Mayfield Hts	OH	44124	1/16/2015	Lunch. Discussed future speaker program: he says he'd like to speak in Toledo/Columbus/further south and out of state. Does not want to speak within 2-3 hour proximity of his office. Dr. also asked about Hysingla ER - when can he start writing and are savings cards available for his patients? I responded I believe savings cards will be available after 1/29/15 and I will let him know when Hysingla ER official web page is up and when patients can print out savings. Quick mention of Butrans and OxyContin currently available for his patients with daily, around the clock, long term pain.
PPLPMDL0020000001	Akron	OH	44312	1/16/2015	Got back to see dr and told him to remember two points for Butrans. Reviewed the inclusion criteria dr exclusion criteria and then told him about 62% of patients in Bup 3015 on hydrocodone medications. Reviewed AE profile and told him to use Butrans for those not tolerating their IR medications as long as they meet the indication. Left him with the Maggie Oxycontin profile.
PPLPMDL0020000001	Garfield Hts	OH	44125	1/16/2015	Saw Dr in hallway, quick review of OxyContin every 12hours along with Butrans 7 day transdermal for those patients failing on present therapy requiring around the clock analgesia, said ok, no change to the CCF policy
PPLPMDL0020000001	Cleveland	OH	44130	1/16/2015	Doctor is starting think of pain patients a little differently than in the past. I have convinced her to consider ER options for pains in around the clock pain. She has actually written reluctantly for oxycontin said that she is thinking of butrans as she promised. She said that butrans wasn't approved on Caresource. I told her that they have to fail on lower cost product like tramadol for 30 days w prior auth it will go through then.<font color=blue><b>CHUDAKOB added notes on 01/25/2015</b></font>-Kathy, Nice job with Dr. Popa. You obviously said something to get her thinking differently! If you know what that was, keep it in the forefront when you visit her. Nice work!
PPLPMDL0020000001	Lakewood	OH	44107	1/19/2015	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	1/19/2015	Out side of managed care....what would stop you from writing Butrans after Tramadol? Dr said that was ok. I clarified...are you saying you would do it. He said sure. Dr said he is trying to write less opioids. I said. I can see why. I said Butrans treats at pain weekly, 4 patches a month. Does this meet your objective. He asked managed care. I highlighted caresource.
PPLPMDL0020000001	Cleveland	OH	44114	1/19/2015	Reviewed OxyContin every 12hours along with Butrans for those patients failing on present therapy requiring around the clock analgesia, said Ok will continue to prescribe for appropriate patients

PPLPMDL0020000001	Brooklyn	OH	44144	1/19/2015	Quick review of OxyContin every 12hours,Savings cards along with Butrans for those patients failing on present therapy requiring around the clock analgesia, Said ok will consider for appropriate patients
PPLPMDL0020000001	Garfield Hts	OH	44125	1/19/2015	Quick Butrans reminder for those patients requiring around the clock analgesia that are failing on present therapy, Said ok will consider for appropriate patients.
PPLPMDL0020000001	Parma	OH	44129	1/19/2015	No new information learned on this call.
PPLPMDL0020000001	Bedford	OH	44146	1/19/2015	Barbara said that the hospital dictates what they stock based on doctor demand. She can not stock it until they need it. She appreciates the information
PPLPMDL0020000001	Garfield Hts	OH	44125	1/19/2015	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	1/19/2015	For uncontrolled atc Tramadol patients if they need a change I asked him to remember Butrans 5mg. Dr asked about managed care- I addressed a few plans. Talked to Beth about managed care after spoke w dr. Asked Beth what pharmacist they use a lot. Ddm, giant eagle and walmart was mentioned
PPLPMDL0020000001	Lakewood	OH	44107	1/19/2015	No new information learned on this call.
PPLPMDL0020000001	Rocky River	OH	44116	1/19/2015	Would not stock under any reason unless a script shows up.
PPLPMDL0020000001	Stow	OH	44224	1/19/2015	No new information learned on this call.
PPLPMDL0020000001	North Royalton	OH	44133	1/19/2015	Regina didn't have time to talk but appreciated the informTion and can not stock the product until they get prescriptions.
PPLPMDL0020000001	Brooklyn	OH	44144	1/19/2015	Reviewed with Tech. Hysingla ER, Butrans and OxyContin, said she will relay info to RPH. , sees some Butrans from Nickels office
PPLPMDL0020000001	Akron	OH	44333	1/19/2015	Quick call with dr and spoke with linda about their EHR system which she said is ECW and hysingla is not in it. I asked if it can be manually answered and she said no. Linda said she's not sure how often it's updated but said she will contact the home office and ask. Left the EHR flashcard with her.
PPLPMDL0020000001	Parma	OH	44129	1/19/2015	Doctor writes for oxycontin for hospice, not so much in his practice. He thinks that butrans has filled a good niche. He thinks of it more often for many patient types including opioid naive and patients who can't tolerate pills. He thinks butrans is a great option for his older patients as well. He seems to get it approved and has had no managed care issues. He understands need for oarrs report, thinks it offers many challenges though.
PPLPMDL0020000001	LAKEWOOD	OH	44107	1/19/2015	Would not stock, pharmAcist wants to see how manr request they get first.
PPLPMDL0020000001	North Royalton	OH	44133	1/19/2015	Laura the pharmacist said that giNt eagle is really coming down on them for excess inventory and stocking items that aren't moving. For that reason she will not stock Hysingla until there are patients requesting it. Once that happens, she commits to stocking it.
PPLPMDL0020000001	Rocky River	OH	44116	1/19/2015	The right person. Was not available today. Come back.
PPLPMDL0020000001	Cleveland	OH	44125	1/19/2015	Reviewed Hysingla ER with Emily along with Butrans and OxyContin. Said she will watch for utilization and order accordingly.
PPLPMDL0020000001	Fairlawn	OH	44333	1/19/2015	Quick discussion with Gary and asked him again for a commitment to order hysingla. Gary said he will not until he sees a script.
PPLPMDL0020000001	Parma	OH	44134	1/19/2015	No new information learned on this call.
PPLPMDL0020000001	Garfield Hts	OH	44125	1/19/2015	No new information learned on this call.
PPLPMDL0020000001	Garfield Heights	OH	44125	1/19/2015	Reviewed Hysingla ER with tech along with Butrans and OxyContin. Said she will relay info to RPH mgr.
PPLPMDL0020000001	Garfield Hts	OH	44125	1/19/2015	Left Hysingla ER with tech along with Butrans and OxyContin. Said she will relay info to Rebecca RPH.
PPLPMDL0020000001	Bedford	OH	44146	1/19/2015	Victor the pharmacy manager said that he will stock what the doctors are needing. They supply hospitals and hospice in the area, so their may be a need but wait and see. He appreciates the information.
PPLPMDL0020000001	Lakewood	OH	44107	1/19/2015	No new information learned on this call.
PPLPMDL0020000001	Fairlawn	OH	44333	1/19/2015	Short discussion with dr and asked him to use more of the low dose oxycontin and Butrans for those tramadol patients who ask for more and meet the indication. Spoke with Amanda and asked her about the office EHR system. Amanda dais they don't have one yet! She said they will probably going with Epic since AGMC and CCF have it. Left her with the hysingla EHR piece.
PPLPMDL0020000001	North Royalton	OH	44133	1/19/2015	Chuck was short staffed today, but said he appreciates the information, as soon as there is demand for the product he will stock it, but not until then. He thinks it should move off the shelves, but will wait and see about demand and formulary
PPLPMDL0020000001	Fairlawn	OH	44333	1/19/2015	Spoke with Jessica this morning and discussed pharmacy sell sheet and then reviewed the trial offer and copy cards. I asked Jessica if she is aware of Gilbert ordering last week? She said she did not see it on their order last week but make the narcotic ordering once a week. Jessica said Gilbert has it on his work station and said she will remind him to order it this week.
PPLPMDL0020000001	Parma	OH	44129	1/19/2015	Quick because he was running to hospital. Discussed his patients in around the clock pain. He told me that he is just starting up his practice and doesn't see that much. Reviewed Both products indication and when ER meds might be appropriate using HElen profile. He said he will keep in mind but probably not a big need right now.
PPLPMDL0020000001	Bedford	OH	44146	1/19/2015	Quick window call. Asked him if he has considered either ER oxycontin or butrans for his patients in around the clock pain instead of IR meds? He said that he does think that butrans might make sense but he doesn't like oxycontin. He just never thinks of butrans. It comes down to cost for most of his patients....walked away
PPLPMDL0020000001	Uniontown	OH	44685	1/19/2015	No new information learned on this call.
PPLPMDL0020000001	Brooklyn	OH	44144	1/19/2015	Reviewed Hysingla ER with Julie RPH, discussed stocking along with OxyContin/Butrans Initiation/Titration will relay info to Brittany who does all the CII ordering
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	1/19/2015	Discussed OxyContin and Butrans in depth. Reviewed indications and pathologies typically associated with each product from their mva's. Dr said he continues to use oxycontin and has patients he knows he should be converting from IR oxycodeone. Reviewed initiation and titration and dosing flexibility. Discussed insurance coverage with new specific formulary grids. Discussed Helen profile for Butrans and asked for him to just identify one patient who meets the indication like Helen. Dr said he should be using it and will try. Discussed the office EHR with Janet the office manager. Janet said they currently don't have an EHR system but will be some time this year. Left her with the EHR hysingla piece.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	1/19/2015	Spoke with Jeff that pharmacist about hysingla and reviewed the selling materials. Jeff said he wouldn't stock Zohydro because it isn't abuse deterrent. I asked Jeff if he would commit to stocking at least one dose? Jeff said he does see patients from he pain practices but is going to wait until he sees a script. I told Jeff if a patient comes to get it filled and he doesn't have it on the shelf the patient is going to go somewhere else. Jeff said he understands that and will tell the patient he'll get in next day. I asked him what if the patient comes in on a Friday? Jeff said he'll take the chance.
PPLPMDL0020000001	akron	OH	44333	1/19/2015	Discussed the doctors need to prescribe ER opioids for his patients that meet the indications for Butrans and OxyContin. Reviewed the Helen profile and Maggie. Discussed EHR situation for hysingla with Sheri the office manager. Sheri said they use Medent and said it is in their system with all doses. Sheri said doctor is having a problem with about 90% of his patients continuing on Norco and said this product looks like it's perfect for him.
PPLPMDL0020000001	Brooklyn	OH	44144	1/19/2015	Reviewed OxyContin every 12hours,savings cards and formulary along with Butrans for those patients failing on present therapy requiring around the clock analgesia, said ok, will continue to consider and book lunch with Audrey so we can further discuss
PPLPMDL0020000001	Lakewood	OH	44107	1/19/2015	Spoke to Michelle about stocking. She was hesitant stocking any schedule 2 products, She said they don't stock any hydrocodone extended release. I said you stock OxyCotin right, she said yes. I said what ex are you talking about and she said zohydro. We talked about Purdue, the current branded products and our abuse det. Properties. Gave abuse potential for any opioid including ours. We talked about her thoughts on a nice a day. She said its a great idea but doubts it will take off. I said why. She said ppl want pills and they won't believe its working unless they are taking pills. I said what if more time was spent w the patient educating theme she said they would help but she didn't see the doctors doing it. I said do you think doctors like prescribing several pills daily for chronic pain? She said no. I said so maybe theirs hope for change in one or two patients a month. She said yes. I told her hysingla was supplied in a 60 day supply, 2 patients. I asked her to order the 20,30,40 a total of aprox 6 patients. I asked if that was reasonable for her store. She said they have already met the hydrocodone order limit for the month. I asked if she will order next month and she said maybe.
PPLPMDL0020000001	Lakewood	OH	44107	1/19/2015	Dr informed me that he is now doing more urine screens and checking Ors which is making him more comfortable writing opioids and scheduled 2 products specifically. Dr shared w me he write for Butrans in a med d patient and that patient is doing fine. Dr said his concern is usually managed care but so far he said he hasn't had a problem so he will continue to write. We talked about his thoughts about writing Butrans after NSAIIDs or Tramadol. Dr said he is more inclined to write Butrans now that tramdol is c4 and he can go to Butrans c3 next if the patient needed it. We talked about Initiation guide and patch rotation, dr said he knew all this information. We talked about abuse potential for any opioid including the products I was presenting, we talked about start principal of tailor and reassessing, gave in discontinuation insight and the dr agreed that finding the right dose is important. Reviewed managed care. Highlighted return visit to talk about new product and offered to attend dinner program . Appears that dr thinks very highly of our speaker dr. Latham and he told me to gather all the dates he is speaking and that he will try and attend a program this quarter.<font color=blue>-b>CHUDAKOB added notes on 02/02/2015</font>-Lisa, looks like you had a good conversation Nice work.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	1/19/2015	Met a new pharmacist Jeremy and discussed hysingla ER pharmacy sell sheets. I asked if he would stock at least one bottle and he asked Bobby and he said it was too expensive. I told him he will move it and Bobby still said he will wait until he sees a script. I told him patients will go somewhere else and that I will speak to Barry about stocking.
PPLPMDL0020000001	Lakewood	OH	44107	1/19/2015	I opened w our previous conversation. Last time you said you would write burans after Tramadol if they were appropriate for it. So what's makes someone appropriate for Butrans??? Dr said if they need atc pain medication. I thanked him and said so you would go from tramdol atc to an immediate release opioid...are you saying if they needed atc you would go to Butrans? Dr said well not always. I said let's talked more next week dr about why choosing Butrans might be an option for some of your uncontrolled Tramadol patients. He said k. Talked to nurses about managed care, no problems .
PPLPMDL0020000001	Parma	OH	44129	1/19/2015	Doctor wanted clarification on PA for Caresource. Told him that patient needs to fail on less expensive medicine like tramadol for 30 days and then butrans will go through. Pulled through formulary grids for both products and patient in around the clock pain that would be appropriate for ER meds. He agrees and doesn't want them taking more than 90 pills a month of IR?
PPLPMDL0020000001	Lakewood	OH	44107	1/19/2015	Gave the oxycodeone insight- and I asked her what her trigger was for when a patient is ready to be moved from immediate release to extended released her answer , they are all different and she couldn't say. We talked about the Percocet patient and converting them to oxyctin if they met the indication. I asked if it was typical to stay on the same molecule or if she prefers a different approach. Dr. Said she didn't know. Reviewed OxyContin dosing. She said she was aware. Talked about Butrans and the naive study,highlighted the pain results. I asked if weekly dosing was something she liked or how she feels about treating pain with patches. Dr said it all depends. I covered initiation guide and reminded about scheduling and abuse potential with all opioids including Butrans and OxyCotin. Asked for a short meeting to review new product when I get back and she said only at Asked her if she would every write Butrans after Tramadol failure? She said yes. Dr said she is watching how many opioids she writes per month. Cost was a question for her, we covered managed care. Talked about the patient already on Percocet failing....does she change the delivery system, or what does she do with them. She said if they fail Percocet she may refer them out. I talked about OxyContin in the event they are appropriTe and she doesn't wnt to send out.
PPLPMDL0020000001	Rocky river	OH	44116	1/19/2015	
PPLPMDL0020000001	Cleveland Hts	OH	44118	1/20/2015	Reviewed with Dave RPH Hysingla ER and Butrans, said ok will order when RX are presented
PPLPMDL0020000001	Parma	OH	44129	1/20/2015	I entered a note on the actual day, but just noticed that it isn't listed. Myra let us know how much she likes the option of butrans for her patients and how many of them do very well. She does write what she feels is best for her patients and they do what they can to get meds approved by insurance.
PPLPMDL0020000001	Twinsburg	OH	44087	1/20/2015	Bill is a floating pharmacist who appreciated the Hysingla information and hopes the doctors find appropriate patients for it. He is not in the positioN to order but will pass along the information
PPLPMDL0020000001	CLEVELAND	OH	44195	1/20/2015	Quick review of OxyContin Savings cards along with Butrans formulary and savings cards as well. Said ok will continue to prescribe OxyContin for appropriate patients,
PPLPMDL0020000001	Cleveland	OH	44112	1/20/2015	Reviewed Butrans for those patients failing on present therapy requiring around the clock analgesia along with OxyContin every 12hours, Formulary coverage and Savings cards, Said Ok, will consider for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44106	1/20/2015	Quick review of OxyContin every 12hours, Savings cards along with Butrans for those patients failing on present therapy and requiring around the clock analgesia, Said he will continue to prescribe for appropriate patients
PPLPMDL0020000001	E Cleveland	OH	44112	1/20/2015	Quick review of Butrans CII, 7 day transdermal for those patients failing on present therapy said ok will consider for appropriate patients

PPLPMDL0020000001	Cleveland	OH	44106	1/20/2015	Discussed Hysingla ER stocking with Tech, Marge was in meeting, will remind her for ordering
PPLPMDL0020000001	Cleveland	OH	44103	1/20/2015	Followed up on Hysingla ER stocking, still waiting for Abdul to Ok, will discuss this week
	Akron	OH	44310	1/20/2015	Short message with dr about Butrans and provided him a formulary announcement for Medco and medical mutual. Dr said that's great but a large amount of his prescriptions come from medicaid and BWC. I told him I understand but he needs to know all plans in he event he needs to prescribe for a private patient. Discussed the hysingla EHR system with Shar and she said they have ECW- E Clinical works and all she needs to do is send an email to the IT people and they add it. Shar said she will do it this week and still needs to add the 7.5 mcg Butrans.
PPLPMDL0020000001	Twinsburg	OH	44087	1/20/2015	Heather said that she appreciates the information and would stock it if the doctors start writing it.
PPLPMDL0020000001	Green	OH	44232	1/20/2015	Introduced Hysingla to Jenna the pharmacist. Jenna asked if she has to go through the same process to get hysingla approved and cleared as she did with Zohydro? I told her I'm not sure what process she had to go through but to not confuse the two and there should not be anything different to fill hysingla as any other product like Butrans IR oxycontin. I asked her if she would stock it and she said she might because it might clear some space in the drug closet suck as Norco. Jenna asked me to follow up with her next week.
PPLPMDL0020000001	Akron	OH	44304	1/20/2015	Spoke with pharmacist about hysingla and reviewed pharmacy guide. Pharmacist asked if it's covered in medicaid or medicare? I told him I'm not sure as to the access specifics yet. He said that about 70-75% of his patients that get narcotics have one of those plans or BWC. I told him I would update him as I know.
PPLPMDL0020000001	Westlake	OH	44145	1/20/2015	No new information learned on this call.
PPLPMDL0020000001	Valley View	OH	44125	1/20/2015	Discussed Hysingla ER, OxyContin and Butrans with Aaron, Said Ok will be bringing Hysingla ER in the next few days
PPLPMDL0020000001	Twinsburg	OH	44087	1/20/2015	Michelle said that she will not stock Hysingla until she gets some prescriptions.
PPLPMDL0020000001	Akron	OH	44310	1/20/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44106	1/20/2015	No new information learned on this call.
PPLPMDL0020000001	Solon	OH	44139	1/20/2015	Darshawn sp? Was alone so he didn't have much time. He appreciated the information but will not stock Hysingla until he sees prescriptions.
PPLPMDL0020000001	Parma	OH	44134	1/20/2015	Tan was the fill in pharmacist. He checked to see if John had ordered the Hysingla he committed to ordering. At this time they didn't have any.
PPLPMDL0020000001	Akron	OH	44310	1/20/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland Hts	OH	44118	1/20/2015	Quick review with Opi of Hysingla/Butrans and OxyContin, said ok will recommend if appropriate, not many RX's prescribed from this location
PPLPMDL0020000001	Cleveland	OH	44106	1/20/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44305	1/20/2015	Spoke with Sarah about hysingla and Butrans. Sarah said that they don't fill a lot of Butrans. I reviewed the initiation and titration guide. Reviewed hysingla pharmacy sell sheet and asked her to order a dose or two. Sarah asked if her wholesaler has it in stock and I told her yes but she should check. Sarah said she will look into it but isn't going to do it now.
PPLPMDL0020000001	Cleveland Hts	OH	44118	1/20/2015	Reviewed OxyContin every 12hours along with Butrans for those Tramadol failures requiring around the clock analgesia, said Ok will continue to prescribe for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44130	1/21/2015	Doctor does think it is a good option and is trying to think of it more often. He has written it for an older patient who doesn't like pills. Discussed med d formulary and that appropriate patient type and Reviewed maria profile as possible patient type. He will continue to think of it.
PPLPMDL0020000001	Westlake	OH	44145	1/21/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	1/21/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	1/21/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	1/21/2015	Handed him oxycontin info and maria profile and asked him to review this for appropriate patient type for butrans and we can discuss next time.
PPLPMDL0020000001	Cleveland	OH	44120	1/21/2015	Reviewed Butrans for those patients failing on present therapy requiring around the clock analgesia, along with OxyContin every 12hours said Ok will continue to prescribe for appropriate patients, refers to pain mgmt
PPLPMDL0020000001	Cleveland	OH	44113	1/21/2015	Reviewed Butrans for those patients failing on present therapy requiring around the clock analgesia along with OxyContin every 12hours said Ok will continue to prescribe for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44104	1/21/2015	Reviewed Butrans for those patients failing on present therapy requiring around the clock analgesia, along with OxyContin every 12hours said Ok will continue to prescribe for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44113	1/21/2015	Reviewed Butrans for those patients failing on present therapy requiring around the clock analgesia, said Ok will continue to prescribe for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44113	1/21/2015	Reviewed Butrans for those patients failing on present therapy requiring around the clock analgesia, said Ok will continue to prescribe for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44195	1/21/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44313	1/21/2015	No new information learned on this call.
PPLPMDL0020000001	North Olmsted	OH	44070	1/21/2015	Spoke to Rita the pharma it and she would not commit to stocking
PPLPMDL0020000001	Strongsville	OH	44136	1/21/2015	Julie will not stock Hysingla until they get some scripts.
PPLPMDL0020000001	Cleveland	OH	44114	1/21/2015	Reviewed with tech OxyContin/Butrans and Stocking Hysingla, will relay info to pharma mgr.when RX is presented,
PPLPMDL0020000001	Cleveland	OH	44125	1/21/2015	Discussed with Evan Hysingla ER along with Butrans and OxyContin, Said he will order accordingly by next week,
PPLPMDL0020000001	Akron	OH	44313	1/21/2015	Spoke with pharmacist Matt about hysingla ER outlining the pharmacy guide. Reviewed the trial offer and copay card. I asked Matt to stock the 20-40mg doses and he agreed that he can see how e product will have a niche. Matt said he will wait until he sees a script.
PPLPMDL0020000001	Cleveland	OH	44102	1/21/2015	Reviewed with Ryan OxyContin/Butrans and Stocking Hysingla, will order when RX is presented, Most RX's are from Neighborhood family clinic
PPLPMDL0020000001	Strongsville	OH	44136	1/21/2015	Marty said that he will not stock Hysingla until he sees some scripts.
PPLPMDL0020000001	Parma	OH	44129	1/21/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44303	1/21/2015	Confirmed the Rod the pharmacist ordered and received hysingla 20mg. He said he sent in the rebate form for it and is confident it will move. Sent picture to Barry Chudakoff.
PPLPMDL0020000001	Westlake	OH	44145	1/21/2015	No new information learned on this call.
PPLPMDL0020000001	Strongsville	OH	44136	1/21/2015	Handed her kathy profile through the window as patient type she should look for and consider ER med like oxycontin or butrans instead of IR.
PPLPMDL0020000001	Strongsville	OH	44136	1/21/2015	Doug said that he will agree to stock Hysingla 20 based on our discussion.
PPLPMDL0020000001	Cleveland	OH	44120	1/21/2015	Discussed with Ebony OxyContin/Butrans and Stocking Hysingla, will order when RX is presented, Entire Medicaid population
PPLPMDL0020000001	Strongsville	OH	44136	1/21/2015	Kathleen will not stock Hysingla until she gets prescriptions.
PPLPMDL0020000001	Fairlawn	OH	44333	1/21/2015	Confirmed with Jessica the pharmacist that they will order 20, 30, and 40mg hysingla this week and will arrive Friday. Reviewed the trial offer and copay card.
PPLPMDL0020000001	Westlake	OH	44145	1/21/2015	Discussed attributes of new product and reviewed scheduling. Pharmacist did not want to order product until script. I asked if exceptions can be made, he said usually not.
PPLPMDL0020000001	Westlake	OH	44145	1/21/2015	Talked to Jackie. She said hydrocodone has not slowed up since it was moved in scheduling. She said their store hasn't been able to get norco 10 in stock. We talked about hysingla, attributes and dosing. Gave fair balance for my products and all opioids that carry the warning. She would not stock till she gets approval from Lisa her manager. To return to see lisa the manager.
PPLPMDL0020000001	Akron	OH	44313	1/21/2015	Spoke with Jason the pharmacist about hysingla reviewing the pharmacy guide as well as trial offer and copay cards. Jason asked which doses I think will move most and I told him probably 20-40mg. Jason said he agreed and I asked him to stock those three doses. Jason said he's not willing to commit yet but thinks he'll probably order one bottle at some point.
PPLPMDL0020000001	Westlake	OH	44145	1/21/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44104	1/21/2015	Reviewed with Habib OxyContin/Butrans and Stocking Hysingla, will order when RX is presented, Mostly Medicaid population
PPLPMDL0020000001	Strongsville	OH	44136	1/21/2015	Jamie appreciated the Hysingla information but she will not stock it until she sees scripts.
PPLPMDL0020000001	Euclid	OH	44117	1/21/2015	Met w medical assistants - gave them Hysingla ER EHR sheet and communicated official website, trial savings cards to go live Mon Jan. 26. Lori was concerned about the many patients that do NOT have computer to print out savings. Let them know im back from being certified Jan 29 & 30 and will bring them in. Also discussed writing for BWC even though msy not go through to show BWC hcp's want covered. She will discuss w Dr. Demico. Let them know Tier 2 TriCare.
PPLPMDL0020000001	Akron	OH	44333	1/21/2015	Elise showed me a PA she has for a patient who she wrote a refill for Butrans 10mcg who has been on it since 9/2013. Brittany made me a copy of it which I will fax to Kendra. Patient has Humana Medicare. I explained to Elise that Humana is a tough plan but they should be denying it with previous use and patient has previously failed fentanyl and Norco. I told Elise I would look into it and Elise said she's still going to write a letter to the plan. I reviewed oxycontin with her and she as well as Vucetic said many patients now are requiring MS Contin or Opana ER prior to oxycontin approval.
PPLPMDL0020000001	Akron	OH	44320	1/21/2015	Ohara, first said she was too busy and handed me over to a pharmacy student. Reviewed hysingla ER and will return for follow up with pharmacist for stocking and product review.
PPLPMDL0020000001	Akron	OH	44333	1/21/2015	I asked dr who I speak to to get a new product in his EHR and what the EHR is? Dr said he knows about the new product and said he's going to use it. Dr said that they use NexGen and I need to speak to Vanessa to add it to their system. Dr told me about patients who have continued on oxycontin are now being asked by their insurance to try and fail MS Contin Opana ER or fentanyl or more than one before oxycontin is approved. I told dr that these types of things happen in a new year and the hope is that they will work out in the next 3 months or so after he is able to provide insurance with the patients efficacy and safety with oxycontin.
PPLPMDL0020000001	Fairview Park	OH	44126	1/22/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44115	1/22/2015	Reviewed Butrans for those patients failing on present therapy that are requiring around the clock analgesia, said Ok will continue to prescribe for appropriate patients.
PPLPMDL0020000001	Beachwood	OH	44122	1/22/2015	Doctor said that she hasn't discussed these products with anyone in a long time. She does have patients taking oxycontin who are in chronic pain and she gets good results. Confirmed that she was aware of all 7 doses, reviewed abuse deterrent characteristics and formulary coverage. Butrans was what she wanted to hear about. Used insight 18, she said it has been challenging, and she has cost down on c2 writing a bit because of the additional workload. Using the HElen profile, we discussed appropriate patient type for butrans as tramadol patient or opioid naive patient. Asked her to think of it before Norco. She and her MA discussed a few patients that they thought might be appropriate for butrans.
PPLPMDL0020000001	Cleveland	OH	44115	1/22/2015	Reviewed OxyContin every 12hours, formulary coverage along with Butrans for those patients failing on present therapy that are requiring around the clock analgesia, said Ok will consider for appropriate patients
PPLPMDL0020000001	Garfield Hts	OH	44125	1/22/2015	Reviewed OxyContin every 12hours along with Butrans for those patients requiring around the clock analgesia failing on present therapy, said ok will continue to prescribe for appropriate patients that have coverage
PPLPMDL0020000001	Garfield Heights	OH	44125	1/22/2015	Quick Review of OxyContin every 12hours, formulary coverage along with Butrans for those patients failing on present therapy that are requiring around the clock analgesia, said Ok will consider for appropriate patients and relay to Drs
PPLPMDL0020000001	Cleveland	OH	44125	1/22/2015	Discussed Hysingla ER, OxyContin and Butrans with Angie, will follow utilization and order accordingly
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	1/22/2015	Followed up with Nicole the pharmacy tech attempting to confirm if Jamie ordered hysingla. Nicole said she doesn't see any notes or any confirmation if she ordered it. Was told to call back tomorrow night to inquire.
PPLPMDL0020000001	Cleveland	OH	44105	1/22/2015	Discussed with Sanda RPh mgr Hysingla ER, Butrans and OxyContin, Said ok will look out for utilization and coverage to follow



	Akron	OH	44313	1/22/2015	Spoke to Sarah the pharmacist about a discussion with dr Vora for a patient attempting to fill Butrans 10mcg. Sara called the office to get the patient name and told me that the patient has a high deductible to meet first.
PLPMDL0020000001					Provided Sarah with the trial card and copy card if patient wishes to fill. Discussed hysingla and asked for stocking. Sarah said she will wait for a prescription.
PLPMDL0020000001	Cleveland	OH	44105	1/22/2015	Discussed Hysingla ER, OxyContin and Butrans with John, due to 100% managed medicalaid will stock accordingly and appropriately to coverage,
PLPMDL0020000001	Lakewood	OH	44107	1/22/2015	No commitment to stock
PLPMDL0020000001	BEACHWOOD	OH	44122	1/22/2015	Talked to Nate about Hysingla. He said that he will not stock at this time. They are about to do inventory and he is trying to keep inventory low. He was tempted to order the 20 and was very happy to hear about the
	Cuyahoga Falls	OH	44221	1/22/2015	Spoke with Mike the pharmacist about hysingla ER reviewing doses and stocking. I asked mike if he would stock just one bottle and he said he usually waits until they see a script. I told him I have some physicians that will be writing it and want to provide them with pharmacists that are stocking it. Reviewed rebate form and asked for one bottle of the 20mcg. Mike said ok he will do it for me and order.
PLPMDL0020000001					
PLPMDL0020000001	Akron	OH	44312	1/22/2015	No new information learned on this call.
PLPMDL0020000001	North Olmsted	OH	44070	1/22/2015	Julie the pharmacist said it's store policy they can't order unless a script comes n for scheduled products.
PLPMDL0020000001	Beachwood	OH	44122	1/22/2015	Tracy E. will review the information and wait to see before ordering anything.
PLPMDL0020000001	Cleveland	OH	44195	1/22/2015	No new information learned on this call.
PLPMDL0020000001	Lakewood	OH	44107	1/22/2015	No new information learned on this call.
PLPMDL0020000001	Cleveland	OH	44105	1/22/2015	Discussed Hysingla ER, OxyContin and Butrans with floater Leslie, will relay info to Allen Rph mgr
PLPMDL0020000001	Cleveland	OH	44195	1/22/2015	No new information learned on this call.
PLPMDL0020000001	Cleveland	OH	44102	1/22/2015	Discussed w/ED Hysingla ER, OxyContin, and Butrans said ok will follow utilization and stock accordingly
PLPMDL0020000001	Akron	OH	44305	1/22/2015	Mrs Vora ain't with the receptionist said that dr agora wrote Butrans 10mcg for a patient on Tuesday who has Medical Mutual prescription insurance and was told at the cvs on portage trail that is would be \$300. Confirmed with them and dr Vora about the coverage for medical mutual. Mrs Vora asked that I visit the pharmacy to work it out. I asked dr Vora if he has a EHR system and he said that he doesn't.
PLPMDL0020000001	Stow	OH	44224	1/22/2015	Spoke with Amber the Pharmacist about hysingla. I asked her if she would stock it and she said she will wait to see a script to help keep her narcotic inventory low.
PLPMDL0020000001	Stow	OH	44224	1/22/2015	No new information learned on this call.
PLPMDL0020000001	Beachwood	OH	44122	1/22/2015	Handed her information through the window including the kathy profile and asked her to consider a patient like that for butrans.
PLPMDL0020000001	Beachwood	OH	44122	1/22/2015	No new information learned on this call.
PLPMDL0020000001	Cuyahoga Falls	OH	44223	1/22/2015	Spoke with Kyle the pharmacist about hysingla and reviewed the pharmacy piece. Kyle asked if its abuse deterrent and I told him it is and he said he noticed it doesn't have APAP. I told him to look over the FPI and asked him if he would stock it? He said he will discuss with the other pharmacists to determine that.
PLPMDL0020000001	fairview park	OH	44111	1/22/2015	Spoke to Rita, who I've seen before at other cvs. She formed me that Nadia just took over as manager and that she can order c2. Reviewed attributes and dosing and asked her to pass the word to other pharmacists she may know, also talked about abuse potential w all opioids including the promoted products.
PLPMDL0020000001	Cleveland	OH	44111	1/22/2015	The pharmacist was busy and asked me to come back but she said someone called this morning to see if we stocked it. We talked about indication and use, she said her patients would never use it. I said why, the tech said she they are old. I tried to go into more detail, but was cut off cause she had to take a call.
PLPMDL0020000001	C. Falls	OH	44223	1/22/2015	Spoke with Cindy about hysingla ER and reviewed what we discussed on the last call about ordering. Cindy asked which doses she believes will move the fastest and I told her 20-40mg. I asked Cindy if she would order and she said she will order all three. Cindy said she is seeing Butrans now and just had a rx from the pain office in the hospital for 7.5 mcg. Discussed copy cards and she said she wants them.
PLPMDL0020000001	Beachwood	OH	44122	1/22/2015	Doctor was alone and had two patients in the waiting room so didn't have time. He said that he has all the butrans information in iphis head and has not had an appropriate butrans patient yet. He does have a few patients doing well with oxycontin. M
PLPMDL0020000001	Westlake	OH	44145	1/23/2015	No new information learned on this call.
PLPMDL0020000001	Westlake	OH	44145	1/23/2015	No new information learned on this call.
PLPMDL0020000001	CLEVELAND	OH	44195	1/23/2015	Discussed Hysingla ER with Troy, committed to ordering Hysingla ER
PLPMDL0020000001	Cuyahoga Falls	OH	44221	1/23/2015	Follow up with amy about hysingla and asked her if she would order one bottle of hysingla 20mg and reviewed rebates. Amy said she is still going to wait on a prescription. I asked her if she would get it next day and she said most likely but can't guarantee it based on time of day and Friday would be Monday delivery.
PLPMDL0020000001	Mogadore	OH	44260	1/23/2015	Spoke with Steve a pharmacist and reviewed hysingla ER. Steve said it sounds promising as long as the doctors are able to get their patients who have been taking IR Hydrocodone to take it. I agreed that is going to be an obstacle with some physicians. Steve said he's going to wait to order until he sees a prescription. .
PLPMDL0020000001	Stow	OH	44224	1/23/2015	Spoke with Jamie about the ordering of hysingla ER. Jamie said she only worked three days this week and didn't have time however she will be ordering it next week.
PLPMDL0020000001	Northfield Center	OH	44067	1/23/2015	Chris said that he will review to information a and wait to see if he sees any prescriptions come. He thinks it will be a good product for many patients.
PLPMDL0020000001	Akron	OH	44305	1/23/2015	Called and spoke to pharmacist and asked if they have made a decision on putting hysingla on the shelf? Pharmacist said they agreed to wait until they see a script.
PLPMDL0020000001	North Olmsted	OH	44070	1/23/2015	Presented products. No commitment, have to see manager to ask. Return visit.
PLPMDL0020000001	Westlake	OH	44145	1/23/2015	Agreed to order and stock the 40 next week to order.
PLPMDL0020000001	Uniontown	OH	44685	1/23/2015	Reviewed Hysingla with pharmacy tech and asked to please provide to pharmacist.
PLPMDL0020000001	Uniontown	OH	44685	1/23/2015	No new information learned on this call.
PLPMDL0020000001	Twinsburg	OH	44087	1/23/2015	Quick call because he was walking into a room. Handed him Maria profile and asked him to keep an eye out for a patient like her who might be appropriate for butrans. Reminded him of 7 strengths of oxycontin.
PLPMDL0020000001	North Olmsted	OH	44070	1/23/2015	Did not want to order until a script comes first.
PLPMDL0020000001	Fairlawn	OH	44333	1/23/2015	Jessica said they just received hysingla ER today the 20 and 40mg bottles. Took picture and forwarded it to DM.
PLPMDL0020000001	Uniontown	OH	44685	1/23/2015	Spoke with Dennis again about hysingla again and trying to reach Kim to discuss it with her. I asked Dennis if he will put it on the shelf and he said its up to Kim. The pharmacy tech said that she had a patient come in the other day asking about it because her dr is going to switch her over. She could not remember the physicians name.
PLPMDL0020000001	Stow	OH	44224	1/23/2015	Short discussion about Helen and Butrans. I asked him to continue to consider Butrans for his NSAID and tramadol patients that are in pain and taking them around the clock. Dr said alright and does like the product.
PLPMDL0020000001	Hudson	OH	44236	1/23/2015	No new information learned on this call.
PLPMDL0020000001	Northfield	OH	44067	1/23/2015	Steve was the floater rep covering for Diane Turp the full time pharmacist. He will forward the information, but in general, they will order for prescriptions but not proactively
PLPMDL0020000001	Akron	OH	44319	1/23/2015	Spoke with office manager and dr about their EHR and they don't have one. Told dr to please continue using Butrans for those patients with private insurance who are in pain around the clock on their IR opioids like tramadol. Dr said its still too expensive and I told him expensive is an ambiguous term. Nothing else learned.
PLPMDL0020000001	Hudson	OH	44236	1/23/2015	Quick hello in his office and asked him how his butrans outient is doing and if he has had the need to titrate? Dr said he did move the patient from 5 to 10mcg and is doing well. I asked dr if he could identify just one patient a week and if that's reasonable? Dr said he can only try and I asked him to use it for those in pain on Tramadol around the clock. Spoke with the office manager as well about their EHR system and they have E-Clinical Works and she can manually add it and said she thinks the doctors will like it because they have lots of patients currently on IR Hydrocodone.
PLPMDL0020000001					
PLPMDL0020000001	Westlake	OH	44145	1/23/2015	Return to speak to a different pharm d about stocking
PLPMDL0020000001	NORTHFIELD	OH	44067	1/23/2015	Natalia was too busy to talk long, appreciated the information but will wait to see if they get prescriptions.
PLPMDL0020000001	Westlake	OH	44145	1/23/2015	Return to speak w pharmacist manager
PLPMDL0020000001	Westlake	OH	44145	1/23/2015	Garbed her attention about getting an apt to review a new product. She told me her concern w treating chronic pain. She said she does treat it but very seldom. I will call office and see if she has time and I asked her if morning or 2 was better for her and she wasn't sure. Highlighted Butrans scheduling.
PLPMDL0020000001	Cleveland	OH	44113	1/29/2015	Intro to Hysingla ER, Once Daily, contains no acetaminophen, 7 tablet strengths, abuse deterrent properties that has the similar risk of abuse and misuse of other CII products. Reviewed Butrans for those tramadol failures.
PLPMDL0020000001	Cleveland	OH	44113	1/29/2015	said ok will review and consider for appropriate patient when she is back in town seeing patients
PLPMDL0020000001	Cleveland	OH	44112	1/29/2015	Intro to Hysingla ER, Once Daily, contains no acetaminophen, 7 tablet strengths, abuse deterrent properties that has the similar risk of abuse and misuse of other CII products. Reviewed Butrans for those tramadol failure along with OxyContin every 12hours said ok will review and consider for appropriate patients
PLPMDL0020000001	Cleveland	OH	44130	1/29/2015	Quick Intro to Hysingla ER, Once Daily, contains no acetaminophen, 7 tablet strengths, abuse deterrent properties that has the similar risk of abuse and misuse of other CII products. Reviewed Butrans for those patients failing on present therapy requiring around the clock analgesia. said ok will review and consider for appropriate patients
PLPMDL0020000001	Cleveland	OH	44113	1/29/2015	He was interested in the option of ER Hydrocodone because there is nothing like that. He has seen many cases of toxicity with APAP and patients self medicating. He believes that he will try a lower dose of Hysingla. He has difficulty changing from patients from IR to ER because they feel like the IR is working and do not feel that way with ER. There are patients he insists use ER. Quickly reviewed appropriate patients for oxycontin and butrans using purdue branded portfolio piece.
PLPMDL0020000001	Cleveland	OH	44113	1/29/2015	Intro to Hysingla ER, Once Daily, contains no acetaminophen, 7 tablet strengths, abuse deterrent properties that has the similar risk of abuse and misuse of other CII products. Reviewed Butrans for those tramadol failures.
PLPMDL0020000001	Beachwood	OH	44122	1/29/2015	said ok will review and consider for appropriate patients
PLPMDL0020000001					Doctor said that Hysingla is a great option for many patients since there is nothing like it. He said that patients taking more than 4 pills per day and still needing more may be appropriate for Hysingla. He is concerned about APAP toxicity and the self medicating they do on top of their ER meds. He said that he has seen patients take the majority of their IR meds in the first few weeks, self medicate the final week on high doses of Tylenol. He thinks a tablet like this would prevent some of that and some of the excessive use of IR. He thinks he will prescribe primarily 40 and 60 initially. Also reviewed portfolio and appropriate patient types quickly for butrans and
PLPMDL0020000001	Cuyahoga Falls	OH	44223	1/29/2015	No new information learned on this call.
PLPMDL0020000001	Woodmere	OH	44122	1/29/2015	Dana said that she will strongly consider stocking but would prefer to wait until she receives the first script. I showed her Doctor yokiel stocking request and she said that she may stock the 40
PLPMDL0020000001	C. Falls	OH	44223	1/29/2015	Confirmed Hysingla 20-40mg doses on the shelf and reviewed trial offer and copy card. She said she's glad she got them because she's filling a rx from dr Ali today for a commercially insured patient.
PLPMDL0020000001	Cuyahoga Falls	OH	44223	1/29/2015	Discussed oxycontin prescribing for his IR Oxycodone patients. Reviewed hysingla ER attributes, q24 and no APAP. Asked dr for just one patient on IR hydrocodone who meets the hysingla indication. Dr said he didn't have any IR hydrocodone patients that would fit for hysingla. Spoke with Liz and she said that she would find a patient.
PLPMDL0020000001	Cleveland	OH	44103	1/29/2015	Reviewed with Sanji Hysingla ER along with Butrans, said ok will stock when presented with RX, 99% medicalaid,
PLPMDL0020000001	Beachwood	OH	44122	1/29/2015	Deanna will not stock c2's until she gets the prescription. She thinks they should be able to wait one day. Once she sees the prescription she will keep it in stock.

	Parma	OH	44129	1/29/2015	He wanted to know what difference was between this and zohydro. He said he still had to absorb the new information about Hysingla because he thinks it will cost too much and patients will resist.. Pulled through formulary. He said just as with oxycotin there is place for ER meds, he will find similar IR hydrocodone patient s for Hysingla, he just might not be too fast. but he is thinking of butrans and has had a couple of patients do very once after initiating with butrans.
PPLPMDL0020000001					
PPLPMDL0020000001	Middleburg Hts	OH	44130	1/29/2015	Talked with multiple staff members reviewing Hysingla. They will make sure Doctor Ryan gets the information.
PPLPMDL0020000001	Cleveland	OH	44115	1/29/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44115	1/29/2015	Reviewed with George Hysingla ER along with Butrans said he will order in next week discussed common strengths conversions from prescribers.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	1/29/2015	Center for pain management discussions with Drs Ali, Sable and Greg Carpenter about hysingla ER and Butrans.
PPLPMDL0020000001	Uniontown	OH	44685	1/29/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	1/29/2015	Discussed Hysingla ER with dr reviewing q24,abuse deterrent properties, no APAP and discussed the peak plasma level graph in FPI. Dr said he's prescribed it three times now one from percocet and the other two from hydrocodone. Dr said they were all commercial plans and asked about BWC. I told him to try it and worse case scenario it gets rejected then he's still showing them demand for the product. Dr agreed and will try. Discussed program schedule and slide deck training. Reviewed trial card and copy card and insurance grid. Told him about pharmacy stocking request form which dr said he's happy about it.
PPLPMDL0020000001	Euclid	OH	44117	1/29/2015	Met with head med asst Lori. Forgot to record pack of trial, savings cards I left for the practice. Discussed & Hysingla ER titration guide. Left FPI for Dr DeMiccos review. Discussed core messaging including Tier abuse deterrent labeling, no acetaminophen, q24 h dosing, conversion ratio of 1:1 from IR hydrocodone. Discussed current patient access, state MEDICAID copy of \$3 per month, tier 2 preferred access for TriCare. Discussed details of trial, savings card. Left Cover my Meds flashcard for OM Norma.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	1/29/2015	Quick hello in WRH and told him I would like him to continue to write Butrans for those Tramadol patients who meet the Butrans indication and gave quick overview of hysingla. Dr said he will look at the initiation and titration guide.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	1/29/2015	Short conversation in hospital about hysingla ER. Provided him the invitation and titration guide and asked him for his IR hydrocodone business. Dr said he will review it.
PPLPMDL0020000001	Highland Heights	OH	44143	1/29/2015	Met with Head Med Asst Marianne. Presented Hysingla ER as addition to current portfolio of Butrans & OxyContin. Discussed, left Hysingla ER FPI and titration guide. Marianne was concerned with coverage, reviewed details & communicated 6ms time frame - she should see improvement on various plans. Asked her to focus on commercially covered patients and offer trial, savings cards. Asked Marianne if she uses Cover my Meds? She replied sometimes. Left Cover my Meds sheet and communicated prior auth help for my products w commercial plans. Quick portfolio mention to Dr Salama. He needs to read literature before he will commit to thinking about
PPLPMDL0020000001	Stow	OH	44224	1/29/2015	Called to speak with Jamie about stocking hysingla. Carla another pharmacist said she's not sure if she completed it but did see it sitting on her workstation. Carla said to check back tomorrow when Jamie is working.
PPLPMDL0020000001	Cleveland	OH	44130	1/29/2015	He said most of his patients are not at a total daily dose of 20 or greater, so he doesn't see a big need for this in his practice. I told him that I am sure that he has one or two patients that are in pain all day and night that might be appropriate for ER meds. He smiled and agreed. Cost is prohibitive for butrans and this new branded product, he does not believe that he will get his patients to pay the 25\$
PPLPMDL0020000001	Westlake	OH	44145	1/29/2015	I coordinated a meeting w the pharmacy director to meet w me and dr. Reviewed Butrans, attributes. Dosing. She agreed to stock Butrans 1. Limited quantities 5 and 10 on formulary at the hospital. Restrictions to pain management. AND They decided to take nuxenta off since that product was not moving. I introduced hysingla. Attributes. Cost was a concern as they are cutting down the amount if opioids being used. However. She said she the p and t committee is meeting in February NANO they would review the product. They inquired on upcoming programs. Worked w sue the nurse and we signed up for cover my meds.
PPLPMDL0020000001	Cleveland	OH	44103	1/29/2015	Quick review of OxyContin every 12hours along with intro to Hysingla ER, said ok appt request thru main office. No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	1/29/2015	Spoke to rahanah Patel. Pharm director. She agreed to place formulary Butrans in limited doses for use of the pain doctors. She will discuss how much is ordered w Michael Corbin Another director. Reviewed hysingla. She didn't think they would use it cause they prefer to use cheaper methods in the hospital like Tylenol lv. They are having p and t. Eating. Ext month. Dr kabbarra on that committee.
PPLPMDL0020000001	Rocky river	OH	44116	1/29/2015	Spoke to dr about three options for patients in continuous atc pain. OxyCotin for your uncontrolled Percocet patients dosed every 12 hours. Hysingla. Dosed daily. Highlighted attributes. Dr asked about managed care. I gave her grid and said co. recital insured patients get e coupons. I didn't have time to review anything further but she agreed to schedule me another apt to learn more in march.
PPLPMDL0020000001	Akron	OH	44333	1/29/2015	Reviewed hysingla ER and discussed Butrans as well. Discussed hysingla attributes discussed q24,abuse deterrent and no APAP. Reviewed peak plasma graph to prove q24 dosing. Dr said he's concerned about this product because he is using Butrans for his hydrocodone failures. Discussed how not all his patients on hydrocodone are appropriate for Butrans which dr agreed. Dr said he wants higher doses of Butrans but said for now he's going to switch his Zohydro business to hysingla ER which is three patients. Discussed pharmacy stocking and copy cards.
PPLPMDL0020000001	Beachwood	OH	44122	1/29/2015	She feels this will play an important role in their practice because some patients are needing too many immediate release but do well in hydrocodone. She wonders if this may help a bit with diversion because they will have so few pills and she appreciated the abuse deterrent characteristics, understanding full well they can still abuse. He thinks Norco does well but could think of a few patients that she would prefer be on Hysingla.
PPLPMDL0020000001	Norton	OH	44203	1/29/2015	Talked about giving patients options who are in chronic pain. Talked about the Percocet patient uncontrolled to OxyCotin, if appropriate. And talked about hysingla as an option for his hydrocodone patients. Reviewed attributes and conversion. Asked if he could see himself using it. Dr said yes. Gave fairbalance of abuse potential of all opioids including our products being promoted. Asked the doctor for 5 patients in the next week to get clinical experience with...he said yes.ninvited to Wooster dinner program. He said maybe. Reviewed managed care w everyone...sarah particularly. They do have cover my meds and use it all the time. Gave her managed care grids custom to their office. Will return Tuesday morning for follow up.
PPLPMDL0020000001	Westlake	OH	44145	1/30/2015	Covered the appropriate patient w Vicki the np for both products and reviewed managed care. Vicky doesn't do any of the pa anymore, that's all sue the rn.
PPLPMDL0020000001	Westlake	OH	44145	1/30/2015	Got a wave. An OxyContin mention and I got something n ew hysingla can't wait to tell you about, it's a once a day abuse det proper single entity hydrocodne. And he said oh ok. And went away.
PPLPMDL0020000001	Lakewood	OH	44107	1/30/2015	Three products abuse deterrent options for your patients w continual atc pain. Butrans for the uncontrolled Tramadol patient on caresource. OxyCotin. For your current Percocet patients and now hysingla for your current hydrocodone atc patients ready for a change. I told about attributes and covered commercial insurance. Told he we would talk about where to use in detail next visit.<font color=blue><b>CHUDAKOB's query on 02/09/2015</b></font>Lisa, this looks like you promoted Butrans as having abuse-deterrent properties, as your first sentence starts off "Three products abuse deterrent options". Can you please clarify this call for me. Thanks!<font color=green><b>BARTOL's response on 02/11/2015</b></font>Butrans does not have abuse deter properties in their labeling, just hysingla and OxyContin. It should have stated two products.<font color=blue><b>CHUDAKOB added notes on 02/18/2015</b></font>Thanks for the clarification.
PPLPMDL0020000001	Lakewood	OH	44107	1/30/2015	Now three opts to offer your patients w continual atc pain. Reviewed by name and dosing. Pointed out abuse deterrent properties but gave balance of abuse potential as w all opioids. Highlighted hysingla
PPLPMDL0020000001	Westlake	OH	44145	1/30/2015	Review of hysingla appropriate patient and asked if he was open to writing it for patients today if the opportunity came up. He said maybe. Dr talked about managed care...specifically med d and caresource. I reminded him Butrans coverage and asked if he was using it in these patients who are not doing well on trMadol. Dr said he uses Butrans in opioid experienced. I said that's great but what do you use after Tramadol for patients if they need a continuous atc opioid? Dr said its all different. I tried to clarify...and say would you say one patient might be appropriate for an atc opioid after Tramadol? He said maybe. I reminded him of caresource and med d coverage. Talked hysingla for uncontrolled hydrocodone patients. Talked to sue about cover my meds. She said her charts blank out patient information like so ill security numbers and the online needs all information filled out before it will send. She said she was frustrated.i asked if u could come back next time one of our products needs a pa and we can figure it out. As long as it meets hipaa guidelines and I don't see patient information. She said sure...I told her to expect my call Tuesday. She said Tuesday is a horrible day but I can try. Tuesday the dr does procedures.
PPLPMDL0020000001	Cleveland	OH	44113	1/30/2015	Reviewed Hysingla ER Initiation/Titration, savings cards/trial offer, formulary access along with Butrans for those patients failing on present on therapy. Said Ok will consider for appropriate patients when seeing patients
PPLPMDL0020000001	Cleveland	OH	44113	1/30/2015	Reviewed Hysingla ER Initiation/Titration, savings cards/trial offer, formulary access along with Butrans for those patients failing on present on therapy. Said Ok will continue to prescribe Butrans for appropriate patients along with Hysingla ER
PPLPMDL0020000001	Garfield Hts	OH	44125	1/30/2015	Intro to Hysingla ER Initiation/Titration, savings cards/trial offer, formulary access along with Butrans for those patients failing on present on therapy. Said Ok will continue to consider Butrans for appropriate patients along with Hysingla ER
PPLPMDL0020000001	Cleveland	OH	44113	1/30/2015	Intro to Hysingla ER Initiation/Titration, savings cards/trial offer, formulary access along with Butrans for those patients failing on present on therapy. Said Ok will continue to prescribe Butrans for appropriate patients along with Hysingla ER.
PPLPMDL0020000001	Hudson	OH	44236	1/30/2015	Reviewed Butrans Helen profile and asked him to please continue to seek appropriate patients not controlled on cox 2 inhibitors or tramadol. Introduced hysingla with indication, attributes, conversions, cost, and copy cards. Dr said he really likes the q24 and abuse deterrent. Dr said he's not sure about side effects so I reviewed them from MVA. Dr said they are no different than IR hydrocodone and may be less. I told dr I don't know the AE profile for Norco so I can't compare. I asked dr if he would find a candidate and he said he will try.
PPLPMDL0020000001	Cleveland	OH	44113	1/30/2015	No new information learned on this call.
PPLPMDL0020000001	Garfield Hts	OH	44125	1/30/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44103	1/30/2015	Reviewed Hysingla ER and stocking initiative, said he will order ,
PPLPMDL0020000001	Cleveland	OH	44105	1/30/2015	Reviewed Hysingla ER and stocking, said he will order next week
PPLPMDL0020000001	Stow	OH	44224	1/30/2015	I watched as Jamie the pharmacist ordered hysingla 20 and 30mg and said she will have it by Tuesday next week. Reviewed dosing and NDC numbers
PPLPMDL0020000001	Green	OH	44232	1/30/2015	Introduced hysingla ER to Jenna the pharmacist. Reviewed attributes, doses and cost with rebates available. I asked her if she would prefer order and she asked which doses. I told her I would like her to order at least one bottle of 20mg. Discussed the physician stocking request and she said that will really help. Jenna said that cvs does not have electronic ordering and said it would be two days for delivery. I told her I will have physicians fax
PPLPMDL0020000001	Akron	OH	44312	1/30/2015	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	1/30/2015	Three products for your patients needing contual atc pain help. Went thru the name and the scheduling. Highlighted hysingla, but he didn't have time to review.
PPLPMDL0020000001	Uniontown	OH	44685	1/30/2015	Introduced hysingla to Kim the pharmacist and reviewed attributes, dosing, and asked her to stock at least once dose. I explained the pharmacy stocking request and Kim said that would really help her order so it doesn't sit on the shelf. Kim said they are on relay health and is happy to know that the copy cards are automatically added.m reviewed the trial card and copy card. Kim said they send over the electronic narcotic ordering and they can get it next day.
PPLPMDL0020000001	Westlake	OH	44145	1/30/2015	Confirmed lunch for next week and the dr said he had no interest in another Hydrocodone opioid product.
PPLPMDL0020000001	Stow	OH	44224	1/30/2015	Very quick review of Helen profile for Butrans and gave over view of hysingla ER. Reviewed indication, attributes, dosing and conversions. Dr said I can stop in next week for a better discussion because he's intrigued by q24 and no APAP.
PPLPMDL0020000001	Lyndhurst	OH	44124	1/30/2015	Met with med asst Kristine. Dr Goldner already gone for day. Discussed, left Hysingla ER fpi and titration guide. Also left trial, savings cards. Left Cover my Meds sheet. Let Kristine know I'd be back next week to follow up and asked her to call me with any questions before then.
PPLPMDL0020000001	University Hts	OH	44118	1/30/2015	Quick intro to Hysingla ER Initiation/Titration, savings cards/trial offer, formulary access along with OxyContin every 12hours, said ok will consider, and discuss further at lunch appt

PPLPMDL0020000001	Mogadore	OH	44260	1/30/2015	Discussed the Helen profile for Butrans with dr and asked him to maintain focus on patients in for follow up on cox 2 inhibitors and tramadol. Dr said he started. Patient recently and didn't figure the patient would stay on it but to his surprise the patient really likes it and is getting great analgesia. I told dr to maintain prescriptions. Introduced Hysingla ER reviewing attributes, dosing, q24 plasma level from MVA, trial and copy cards and insurance coverage. I asked dr to identify just one patient with commercial insurance that comes in for follow up on Norco. Dr asked about conversions and reviewed them from the invitation and titration guide. Dr said he thinks he will have a place for it and will use it. Dr wanted to keep the product information to help remind him.
PPLPMDL0020000001	Uniontown	OH	44312	1/30/2015	Short discussion about the Butrans Helen profile and asked for his commitment for his cox 2 and Tramadol patients. Introduced Hysingla ER, attributes, dosing and initiation and titration guide with explanation of trial and copy cards. Left him with an FPI as well. spoke with Carla about the copy cards and product information.
PPLPMDL0020000001	Mayfield Heights	OH	44124	1/30/2015	Met with med asst at front window. Introduced Hysingla ER as addition to Purdue's current ER opioid pain portfolio. Left Gina Hysingla ER fpi, titration guide. Left for OM - Cover my Meds sheet and Purdue trifold portfolio brochure.
PPLPMDL0020000001	Mayfield Hts	OH	44124	1/30/2015	Hallway. Asked Dr. Laham to sign pharmacy stocking sheet/though he says it probably won't help much because pharmacists always say they must see script first prior to ordering. Left Hysingla ER titration guide, fpi and set breakfast for Tues Feb. 3 at 8 am. Dr says he has printed out Hysingla ER savings for other patients and has not had any issues. Left titration guide/fpi for ALL hcps in practice.
PPLPMDL0020000001	Cleveland	OH	44113	1/30/2015	Discussed with Melissa Hysingla ER Initiation/Titration, savings cards/trial offer, formulary access along with Butrans for those patients failing on present on therapy. Said Ok will relay info to Dr.
PPLPMDL0020000001	Lyndhurst	OH	44124	1/30/2015	Met with med assts at front window. Introduced Hysingla ER as addition to Purdue's current portfolio of Oxycotin, Butrans. Left for all 3 hcps in office including Dr. Reed: Hysingla ER titration guide/fpi. also left Cover my Meds sheet. Let med assts know I'd be in next week to follow up.
PPLPMDL0020000001	Mogadore	OH	44260	1/30/2015	Introduced Hysingla ER with attributes, indication, initiation and conversion, mean steady state plasma levels, efficacy, cost and copy cards. I reviewed the patient profiles and asked her if she thought she had one patient who would be a good candidate? Dr said she's not sure. I told her Hysingla is another option for patients in pain around the clock on IR hydrocodone. Dr said that makes sense and will think about it. Reviewed oxycotin profile and asked for continued business from IR oxycodone or percocet.
PPLPMDL0020000001	Mogadore	OH	44260	1/30/2015	Opened with Hysingla ER introduction discussing attributes, indication, patient types, conversions, peak plasma levels with q24 dosing, abuse deterrent properties. Joe said that it's intriguing but said he doesn't want to treat pain. I asked him if he does though and he said he does. I told him he must treat some who are on an IR hydrocodone around the clock? Joe said he does and will give it a shot. Discussed Helen profile for Butrans and discussed tramadol candidates who may need that next dose. Discussed trial cards and copy cards with insurance grid.
PPLPMDL0020000001	Westlake	OH	44145	1/30/2015	Spoke to the dr regarding abuse Detr properties and what he knew and thought of these in opioids he prescribes. Dr said very important. Reviewed Butrans and Hysingla. Positioned specifically Butrans after Tramadol and confirmed w dr our managed care status. Talked about Hysingla. Attributes and finding a few patients to try it on. Dr said he was pretty excited about a once a day. Dr said he doesn't write much more than 3x a day for any hydrocodone product. I said let's use that as a reference and identify those patients on 3 or more uncontrolled and then try Hysingla if they Re commercial. I will return in Wednesday to work with the nurses about patient a coming in for An adjustment. If any are appropriate for Hysingla dr will fill out formuIR request which they will fax over and I will try and get the local pharmacy to stock. We talked about coups and copays. Dr said he will find me a few to get clinical experience. Dr also said he was interested in attending a program w his ma.
PPLPMDL0020000001	Ashland	OH	44126	1/30/2015	Discussed w Angie Hysingla. Talked about the request for via dr. Karett. Discussed a patient needing it on Tuesday and how long to get in stock. They said a few days. She had trouble locating Ndc and we had to go thru several layers to find it. They agreed to order two of the doses.
PPLPMDL0020000001	Independence	OH	44131	2/2/2015	Doctor was too behind to talk today, asked me to come back Friday. Briefly mentioned new Hysingla who is different patient type than the butrans patient we have talked about in the past. Left him materials to read so we can discuss on Friday.
PPLPMDL0020000001	Parma	OH	44129	2/2/2015	He said that once in a while he will choose oxycotin for patients in chronic pain, he prefers to refer patients out but that doesn't always work. Typically they use IR meds for a few days after a procedure. Every patient is different and they like hearing about the options. S he said he needs time to register Hysingla information, initially he thinks that butrans might be a better option for some of his patients. He said he will keep the initiation and titration guide for a reminder and he will give it a try.
PPLPMDL0020000001	Lyndhurst	OH	44124	2/2/2015	Lunch with practice. Introduced Hysingla ER as addition to Purdue current portfolio of Butrans, Oxycotin. Discussed appropriate patients for both Butrans and Oxycotin. For patients on ir hydrocodone and who need around the clock control, long term, Hysingla ER. Discussed verbatim indication, strengths, dosing q 24 h at same time every day, no acetaminophen, straightforward conversion using titration guide. Showed pivotal trial data, AE's, boxed warning, CII scheduling. Asked for just 1 or 2 patients this week. Dr Kim says he will use Hysingla ER - it does have a place in his practice, and he will find appropriate patients per my request. Left formulary grids, trial/savings cards; showed how to write. Left fpi, titration guide.
PPLPMDL0020000001	Garfield Hts	OH	44125	2/2/2015	Reviewed Butrans for those patients failing on present therapy that are requiring around the clock analgesia, Intro to Hysingla ER along with Oxycotin every 12hours, said ok will consider for appropriate patients, Likes the Once daily dosing, no change in CCF appt policy
PPLPMDL0020000001	Cleveland	OH	44113	2/2/2015	Quick review of Hysingla ER, along with Oxycotin every 12hours, said ok will consider for appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44113	2/2/2015	Reviewed Hysingla ER dosing strengths and obtained signed stocking request form. Along with Butrans for those Tramadol failures requiring around the clock analgesia, said ok will continue to prescribe for appropriate
PPLPMDL0020000001	Cleveland	OH	44113	2/2/2015	Intro to Hysingla ER dosing strengths, managed care Along with Butrans for those Tramadol failures requiring around the clock analgesia, said ok will continue to prescribe for appropriate patients.
PPLPMDL0020000001	Mayfield Village	OH	44143	2/2/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	2/2/2015	Visited Pain mgmt, IM depts. requested appts
PPLPMDL0020000001	Cleveland	OH	44105	2/2/2015	Followed up with Abdul on stocking of Hysingla ER will bring in 20mg,40mg,60mg
PPLPMDL0020000001	Cleveland	OH	44134	2/2/2015	Margarite said that she will not proactively schedule any c2 until there is a prescription. She inks it will be a good product that will do well.
PPLPMDL0020000001	South Euclid	OH	44121	2/2/2015	Met with pharmacist Melinda, mgr Jill is not in today. Introduced Hysingla ER as addition to current Purdue portfolio. Melinda hadn't seen a script yet for Hysingla ER. DETAILED product, discussed & left Hysingla ER FPI & pharmacists guide. Left (1) Butrans patient guide. Asked Melinda if she can name any pain specialty HCPS whose patients are customers? She couldn't recall any names, but said patients come from "all over" and from multiple pain practices.
PPLPMDL0020000001	Cleveland	OH	44113	2/2/2015	No new information learned on this call.
PPLPMDL0020000001	South Euclid	OH	44121	2/2/2015	No new information learned on this call.
PPLPMDL0020000001	South Euclid	OH	44121	2/2/2015	Met with tech. Pharmacy mgr Mitchell not in. Float pharmacist in today. Mitchell back in Tues FEB. 3. Left Hysingla ER FPI, stocking brochure & pharmacist guide.
PPLPMDL0020000001	Parma	OH	44129	2/2/2015	Reviewed Hysingla again told him that I am now actively promoting hoping to tell physicians who is stocking it. Me said he would love to help but he has to wait to order c2 until he starts seeing scripts. At the time he will stock, but not until.
PPLPMDL0020000001	Cleveland	OH	44109	2/2/2015	Reviewed Hysingla ER with Marsala RPh, presented stocking request form from D. Torres,said she will remind Raj to order,
PPLPMDL0020000001	Garfield Heights	OH	44125	2/2/2015	No new information learned on this call.
PPLPMDL0020000001	Independence	OH	44131	2/2/2015	No new information learned on this call.
PPLPMDL0020000001	Ashland	OH	44126	2/2/2015	60mg to arrive this Wednesday oer the request form via dr karett in medina ohio for his patient.
PPLPMDL0020000001	Cleveland	OH	44124	2/2/2015	Met with med asst at front desk. Introduced Hysingla ER as addition to Purdue's current portfolio of ER opioids. Delivered verbatim indication: Left for Dr. Casselberry and his RN Gail: Hysingla ER FPI, titration guide, trial/savings. Stop back Fri Feb 6 for follow up.
PPLPMDL0020000001	Lyndhurst	OH	44124	2/2/2015	Lunch. First, doctor says Butrans works wonderfully, yet recently, he had 3 elderly patients discontinue Butrans due to hallucinations on product. Let him know I track AE's and he may be contacted for further patient specifics. Let him know for those patients, especially if on Percocet or oxycodone, Oxycotin, dosed q12 h is an option. Introduced Hysingla ER. Went through core vis aid, titration guide. Since it's CII, Dr. says he's not likely to write. Left Hysingla ER fpi, titration guide, asked him to give product a chance in just 1 patient.
PPLPMDL0020000001	Lyndhurst	OH	44124	2/2/2015	Lunch with practice. Due to snow storm, Sarah couldn't make it in today. Met with OM Ellen and medical assistants to introduce Hysingla ER as addition to Purdue portfolio of Butrans, Oxycotin. Stated I don't want Hysingla ER written at expense of Oxycotin, Butrans. Discussed patient type for each product. Left Sarah, Hysingla ER fpi, titration guide, savings cards for practice.
PPLPMDL0020000001	Mayfield Village	OH	44143	2/2/2015	Met with Dr. Krishnan med asst at front window. Introduced Hysingla ER as new product, verbatim indication, q24 h dosing, 7 strengths. Left fpi and titration guide for Dr Krishnan. Communicated importance of trial, savings for commercially insured patients. Butrans, for opioid naive and patients taking 3-4 Tramadol daily, not controlled, need opioid around the clock.
PPLPMDL0020000001	Lyndhurst	OH	44124	2/2/2015	Lunch w practice. Introduced Hysingla ER as new addition to Purdue's existing portfolio of Oxycotin, Butrans. used core vis aid and titration guide to discuss ir hydrocodone patients and conversion to Hysingla ER dosed q24h. Discussed verbatim indication, FDA abuse deterrent tier labeling, 7 strengths, no acetaminophen. Left Hysingla ER fpi and titration guide. Dr. Prada is not keen on any CII products, and rarely writes CII's either.
PPLPMDL0020000001	Mayfield Heights	OH	44124	2/2/2015	Follow up. Reminded Adrienne she committed to order at least 1 bottle of Hysingla ER 20 mg. She forgot, but she did open safe and check. I used Dr. Laham (signed pharmacy stocking sheet) and stated that she's already writing, specifically the 20, 30 and 40 mg will need to be ordered; so his patients don't have to wait. Reminded her of rebate, which she also forgot about. She re - committed to pre order Hysingla ER - must check back soon.
PPLPMDL0020000001	Middleburg Heights	OH	44130	2/2/2015	Doctor really believes in the efficacy of Oxycodone molecule. He discussed that different procedures warrant different type of pain relief. After some procedures you want pTient to feel the pain so they don't overdo it. Other times the procedure is so painful, you don't want the patient to feel it for a few days, he believes that a low dose ER oxycotin is appropriate for some patients to have long term hour pain relief and supplement if needed. He thought Hysingla was a great option. He really liked the once daily dosing. He thinks that many patients like patch technology and feels that there might be a place in his practice for butrans also.<font color=blue>-<b>CHUDAKOB's query on 02/13/2015</b></font>I know we spoke about it, but it is important to make sure they are prescribing within our indication and not for post-op pain as we do not have that indication. This information has to be told to them on every call. Make sense?<font color=green>-<b>ARAWKA's response on 02/16/2015</b></font>Yes! I actually read him the indication verbatim so that he was aware of that being the indication for all three products.<font color=blue>-<b>CHUDAKOB added notes on 02/18/2015</b></font>Great. Thank you!
PPLPMDL0020000001	Barberton	OH	44203	2/3/2015	Reviewed purdues products w abuse det properties. Introduces Hysingla. Reviewed attributes. Checked in w dr several times to get his thoughts. Dr seemed very interested and asked several questions, which were addressed. Managed care. Conversion. And reviewed several times the appropriate patient type. Dr agreed to sign the request form. He also agreed for me to work w his nurse on patients upcoming on hydrocodone appropriate for Hysingla. I secured repeat visits during the next few months , dr agreed and he told me who to work with the get access when I come. I spend much time coordinating potential targets with this nurse. Follow up next week on the 11th when the next patient is coming.
PPLPMDL0020000001	Parma	OH	44129	2/3/2015	Reviewed purdues commitment to ER in meds no 3 individual patient types for the meds. He agreed that it's impressive. He said that Hysingla is actually a product that makes sense because it is once a day and doesn't have Tylenol in it. He will have to think about it for a while before deciding what he will do about it.
PPLPMDL0020000001	Mayfield Hts	OH	44124	2/3/2015	Coffee appt. Discussed Purdue portfolio, first BUTRANS. Opioid naive, patients on 3-4 Tramadol daily not controlled. Dr likes Butrans as option vs oral tablets. Dr Laham states he does prefer ER opioids, yet coverage is sometimes an issue. Hysingla ER: reinforced straightforward conversion from IR hydrocodone - he states he's written 2-3 Hysingla ER, no call backs; and is willing to print out savings cards for patients as it's an easy process. Oxycotin - he states he's been using more -yet sometimes pushback from plans not wanting to cover first line. Asked him to continue looking for appropriate patients this week.

PPLPMDL0020000001	Beachwood	OH	44122	2/3/2015	Introduced doctor to Hysingla. Reviewed purdue's product portfolio and appropriate patient types. He said that he thinks a once daily ER pill for pain is a good idea and that more and more patients are coming to him on hydrocodone. Hewill keep it in mind for patients appropriate for ER meds. He typically starts patients on the Oxycodone molecule however.
PPLPMDL0020000001	Parma	OH	44129	2/3/2015	She wasn't interested in talking so I quickly introduced her to Hysingla and appropriate patient type. Also reminded her quickly about purdue's portfolio for managing around the clock pain. Left her titration guides for all three products.
PPLPMDL0020000001	Barberton	OH	44203	2/3/2015	Introduced hysingla, reviewed attributes and who the appropriate patient is. Talked fair balance of abuse potential with all opioids including purdues products. Talked about managed care, how to convert from hydrocodone.
PPLPMDL0020000001	Barberton	OH	44203	2/3/2015	Dr asked about it lasting and I showed him plasma concentrations over the 3 days. Dr said he would try it. Also highlighted Butrans managed care, scheduling.
PPLPMDL0020000001	Barberton	OH	44203	2/3/2015	No new information. Said hello to dr, he didn't have time to talk because he was running late. But I mentioned hysingla and what it was. Left information for him to review
PPLPMDL0020000001	BEACHWOOD	OH	44122	2/3/2015	Dr pluskota has a patient coming in on march 6th that will be switched to hysingla 20. Pharmacist wouldn't it stock, they said it was company policy. Melina did not want to talk further regarding products. Left literature
PPLPMDL0020000001	Twinsburg	OH	44087	2/3/2015	Showed him Doctors request for stocking and he said he promises he will keep it stocked if anyone come in with a prescription.
PPLPMDL0020000001	Euclid	OH	44119	2/3/2015	No new information learned on this call.
PPLPMDL0020000001				2/3/2015	Checked to see if Hysingla ER came in with pharmacy mgr Dave. They use McKesson New Castle, PA distribution center & Dave says when he went to order, McKesson showed zero stock. He says he's in again this Fri Feb 6-I can check back with them then. Note: Dave says most of his IR Hydrocodone comes from ER physician scripts.
PPLPMDL0020000001	Shaker Heights	OH	44122	2/3/2015	Danielle said that she PROMISES to stock once she sees a script. She doesn't have enough room in her C2 cabinet to stock proactively. Reviewed Hysingla coverage with her.
PPLPMDL0020000001	Akron	OH	44333	2/3/2015	Quick hello and told him a needed a couple of minutes to discuss a new product. Dr said he didn't have time today but will tomorrow at 11:30 for 5 minutes. Told dr to please continue writing Butrans for his cox 2 and tramadol patients that meet the indication.
PPLPMDL0020000001	Beachwood	OH	44122	2/3/2015	He said he couldn't see me today. I asked him if I could leave him materials to review about a new ER once daily hydrocodone (no Tylenol) with ADP that is brand new to the market. He stopped to think about what I said.
PPLPMDL0020000001	Beachwood	OH	44122	2/3/2015	He said he would and was hoping I could come back on Friday and he might have more time. also reminded him of possible butrans patient with maria profile.
PPLPMDL0020000001	Mayfield Heights	OH	44124	2/3/2015	No new information learned on this call.
PPLPMDL0020000001				2/3/2015	Breakfast appt. Dr Chteingardt doesn't like name: Hysingla ER difficult to pronounce & remember. Replied I will continue to remind her of new product. Detailed from core vis aid; all core messaging, dosing, 7 strengths, showed how to write. AE's and pivotal trial data. & discussed IR hydrocodone patients, dosed q4/6/8 who need pain control around the clock. Using titration guide, showed conversion details, how to write. She was concerned about breakthrough medication& is that allowed with Hysingla ER. Yes, I replied. Asked for a few patients today, this week to convert to Hysingla ER. Reinforced Oxycotin available for IR Oxycodone/ Percocet patients; q12 h dosing. Left savings cards; formulary guide; EHR sheet for med asst Candy. Dr Irina mentioned she has had problems getting Butrans covered on MEDICAID- replied with Caresource PA details.
PPLPMDL0020000001	Euclid	OH	44119	2/3/2015	Met with nursing mgr RN Carla Vanpelt. New dept director leaving; new policy allows lunches. Mon will be Dr Nageb/Paul and WED Dr Saeed & Paul- those are best days for lunches states Carla. Able to schedule first lunch WED FEB 18. Introduced Paul to Hysingla ER. Provided indication, dosing, and core messaging. Asked him to review FPI and titration guide I left for him. Left EHR sheet, formulary grid, FPI for nurse supervisor Yvonne. Left (1) pack Hysingla ER trial, savings. Communicated current formulary status. Paul feels about 10% or less of patient base is commercially covered - the majority are MEDICAID - which was confirmed by Carla. Note: RN Vince left I-Butrans dosing and managed-care. Oxycotin start principles. Hysingla dosing, indication, managed-care, boxed warning and adverse events.W-has patients that they believe are appropriate for Hysingla
PPLPMDL0020000001	Waterford	OH	45786	2/3/2015	Breakfast appt. Introduced Hysingla ER to Dr. Anna. She said she just saw product info on Medscape online. She says she has female patient on IR hydrocodone taking 3-4 x a day, not controlled. This same patient could not tolerate Oxycotin/ oxycodone: she reports patient "didn't feel well." On Oxycotin. Dr Anna says she is happy there's now an ER version of hydrocodone. Showed initiation guide & how to write. Reminded her that both Oxycotin & Hysingla ER have abuse deterrent properties. Left EHR sheet and formulary grid for Hysingla ER.
PPLPMDL0020000001	Mayfield Heights	OH	44124	2/3/2015	She said that she thinks butrans is such a great option for her patients and she sees a lot of success with it. She wishes so many people wouldn't have the rash and that purdue would fix that already. Introduced her to Hysingla. She thinks a once daily hydrocodone is a great option for many patients, especially the ones taking more than 4-5 pills per day. Although, many of their patients are on 50 mg of hydrocodone and there isn't a 50 Hysingla. She hates the way they medicate themselves throughout the day. She thinks it would be ideal if they could take a pill that lasts and just need to supplement periodically. She has to review with doctor nickels to see what his thoughts are on this new product before she starts to prescribe it.
PPLPMDL0020000001	Waterford	OH	45786	2/3/2015	I-Butrans dosing and managed-care. Oxycotin start principles. Hysingla dosing, indication, managed-care, boxed warning and adverse events.W-has patients that they believe are appropriate for Hysingla
PPLPMDL0020000001	Waterford	OH	45786	2/3/2015	I-Butrans dosing and managed-care. Oxycotin start principles. Hysingla dosing, indication, managed-care, boxed warning and adverse events.W-has patients that they believe are appropriate for Hysingla
PPLPMDL0020000001	Waterford	OH	45786	2/3/2015	I-Butrans dosing and managed-care. Oxycotin start principles. Hysingla dosing, indication, managed-care, boxed warning and adverse events.W-has patients that they believe are appropriate for Hysingla
PPLPMDL0020000001	Garfield Hts	OH	44125	2/4/2015	Quick Oxycotin reminder along with Hysingla ER intro, said he will consider for appropriate patients,
PPLPMDL0020000001	Richmond Heights	OH	44143	2/4/2015	Resident at Dr Norton Winer lunch. Presented Hysingla ER as addition to Purdue existing ER opioid portfolio. Delivered core messaging, scheduling, strengths, pivotal trial data. Left FPI and titration guide. Discussed appropriate patients for Hysingla ER, Oxycotin & Butrans. Verbatim indication for Oxycotin & Butrans.
PPLPMDL0020000001	Cleveland	OH	44195	2/4/2015	Reviewed Oxycotin every 12hours, Savings cards, Intro to Hysingla ER, along with Butrans for those patients requiring around the clock analgesia, said ok will consider for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44114	2/4/2015	Reviewed Oxycotin every 12hours, Intro Hysingla ER along with Butrans for those patients requiring around the clock analgesia, said ok will continue to prescribe for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44113	2/4/2015	Reviewed Oxycotin every 12 hours, savings cards, along with Hysingla ER, savings cards. Said Ok will consider for appropriate patients, Reminded of Butrans for those patients requiring around the clock analgesia
PPLPMDL0020000001	CLEVELAND	OH	44195	2/4/2015	Quick call on Oxycotin along with Hysingla ER, Asked to follow up on stocking and utilization
PPLPMDL0020000001	Cleveland	OH	44195	2/4/2015	No new information learned on this call.
PPLPMDL0020000001	Stow	OH	44224	2/4/2015	Confirmed with Jamie the pharmacist that they have hysingla 20 and 30mg in stock. 2 bottles of each dose. Discussed the copy card and trial offer. Jamie said she's eager to get the Rx's.
PPLPMDL0020000001	Westlake	OH	44145	2/4/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44125	2/4/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	2/4/2015	Reviewed patient types for Butrans and oxycotin and asked for continued business. I reviewed hysingla outlining dosing, conversions, dosing and patient types along with copy cards. I asked elise if she thinks she could find a place for hysingla and she said she has two this afternoon that would good for it. Reviewed insurance coverage and pharmacy stocking. I asked Elise if the patient we discussed last week got her Butrans that had insurance issues and she said she did once it was straightened out.
PPLPMDL0020000001	Cleveland	OH	44113	2/4/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	2/4/2015	Saw dr about starting a hydrocodone patient meeting the criteria to hysingla. Dr had me check w Tera his nurse about the patients coming in. The first patient is on the 11 th of February. We reviewed dosing and she asked me to return this day. Tea said she has several Tramadol caresource patients coming in....reviewed Butrans coverage and dosing for those patients.
PPLPMDL0020000001	Westlake	OH	44145	2/4/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	2/4/2015	Discussed all three products outlining patient types for Butrans, oxycotin and hysingla. I asked for continued business for Butrans and oxycotin. Outlined hysingla attributes, dosing and conversions along asked him for his Zohydro patients. Dr agreed to prescribe the product and wanted to know where it's being stocked. Provided signatures for faxing of pharmacies in Ravenna, akron, kent and Fairlawn.
PPLPMDL0020000001	Westlake	OH	44145	2/4/2015	Spoke to Christy. Introduced hysingla and gave her attributes and managed care pull through w Butrans and Oxycotin information.n
PPLPMDL0020000001	Akron	OH	44333	2/4/2015	Introduced hysingla ER to dr outlining attributes, q24, no APAP, conversions, titration, insurance, copy cards. I asked dr if the q24 and no APAP meant a lot to him and if he sees the need for an ER hydrocodone with abuse deterrent properties? Dr said he likes the sound of once a day and no APAP. I asked him if his goal is to get patients who are in pain around the clock on an ER opioid if they meet the indication? Dr said he tris every day and knows he has a long way to go. I told dr now he has an ER option for his noco patients who meet the indication. Dr said to give him an update on pharmacies stocking it. Left copy cards.
PPLPMDL0020000001	Euclid	OH	44119	2/4/2015	Lunch. total office call. Delivered acetaminophen insight. Dr. says he agrees with that, and he does have concern, especially with elderly patients, regarding them taking too much acetaminophen on their own. Introduced Hysingla ER - using core vis aid: discussed verbatim indication, no acetaminophen, 7 strengths, ability to titrate in 3-5 days, used steady state data, provided pivotal trial data/pain scores; AE's and box warning. Dr asked how MUCH and what is cost comparison to ir hydrocodone. I replied, a branded med will always be more than generic. Dr. says he does like that Hysingla ER does NOT contain acetaminophen. I asked if Hysingla ER DOES have a place in his practice? He replied yes. Discussed formulary status, Medicaid status and trial, savings cards. Discussed same with med asst Stacey. Asked for at least 1 patient this week for conversion from ir hydrocodone to Hysingla ER and let him know I will follow up soon. Asked him to keep in mind Oxycotin for ir oxycodone patients not controlled; and opioid naive/patients on 3-4 Tramadol daily and pain not controlled is Butrans patient
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/4/2015	Discussed How dr put a patient on Butrans yesterday that asked for percocet and dr felt the patient was better suited for Butrans and initiated on 5mcg. Reviewed hysingla ER slide deck in preparation for his speaking engagements.-font color=blue>-cb>CHUDAKOB added notes on 02/13/2015</font>-Cliff, this is just to clarify that you attended my review of the slide deck with Dr. Ali and didn't actually review it with him yourself.
PPLPMDL0020000001	Westlake	OH	44145	2/4/2015	Introduced Hysingla. Opened w insight 18. Asked the dr if he has made any changes to writing opioids. Brian said no. Talked about abuse det properties of the purdueproductsnthathave it in the labeling and stressed the first and only for hysinglas labelling. Covered attributes and what it would mean for his patients. Brian said he was t sure but would review w dr b. confirmed follow up to this discussion at next apt.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	2/4/2015	Spoke to Mary the pharmacist about Mike committing to order the 20mg hysingla. Mary checked the safe and said it was not orders after also checking the system. I reviewed thorough with Mary again and asked her to stock based on HCP recommendations. Mary said she will speak with Mike about it and to click in next week.
PPLPMDL0020000001	Bedford	OH	44146	2/4/2015	Reminded doctor that he promised to write 100 butrans, and wondered what his number was for Hysingla. He said 100. He said that he will start prescribing it soon because he wants to get experience with it because that will help him during his speaker programs. Pulled through formulary, he wasn't happy about Medicaid, but will do his best to try to write and see what happens. He will keep me posted.
PPLPMDL0020000001	Westlake	OH	44145	2/4/2015	Review abuse de properties of oxycotin and hysingla. Gave fair balance about abuse potential w my products like all opioids have this warning. We talked about dosing and attributes w Hysingla.nthe dr wanted to know information I did not have in the fpi. Outside of addressing half life and steady state. The dr wanted to know exactly when the product would be working. I couldn't answer the question. I showed the plasma levels but he didn't want this information as he wanted to see plasma levels day one. As i offered to get hi. The information via the company the dr refused. The dr said he prefers to use short action because he feels he has more control over how much is going in the body. Dr said he doesn't like patches because he feels they are con in e t but too hard to deal w.
PPLPMDL0020000001	Parma	OH	44129	2/5/2015	Reviewed quickly purdues pain portfolio and an appropriate patient type for each product. he expressed how well butrans is working for some of his patients. Introduced Hysingla and he has seen Tylenol toxicity and likes the fact that Hysingla doesn't contain Tylenol. He thinks it is a great option and assuming coverage is ok he can think of patients that would be appropriate for Hysingla. All scripts is their EHR system. I reviewed commercial coverage and asked him to try it with one of them and savings card. He agreed
PPLPMDL0020000001	Lakewood	OH	44107	2/5/2015	Quick introduction of hysingla- review attributes of dosing and abuse det properties...gave him the appropriate patient to loom for and asked if he will do this today? Highlighted schedule three w Butran and caresource
PPLPMDL0020000001	Cuyahoga Falls	OH	44224	2/5/2015	Quick hello in office while talking with Darlene about cover my meds. Told dr I hoe she's continuing to identify patients for Butrans and provided her the hysingla ER initiation and titration guide. Dr said she doesn't have time for a discussion and will see me at lunch in a week.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/5/2015	Discussed appropriate patients for all three products with profiles. Reviewed hysingla FPI and attributes. Had dr sign stocking form.
PPLPMDL0020000001	University Hts	OH	44118	2/5/2015	Reviewed Oxycotin Savings cards, formulary along with Hysingla ER for those patients requiring around the clock analgesia. Said Ok will continue to prescribe for appropriate patients.

	Lakewood	OH	44107	2/5/2015	Discussed the appropriate patient and dosing. Dr was mostly covered managed care coverage, which was highlighted and reviewed in more detail with Beth the office manger. Talked about managed care with Butrans and OxyContin....which turned into an appropriate patient discussion.
PPLPMDL0020000001					
PPLPMDL0020000001	Cleveland	OH	44195	2/5/2015	Quick review of OxyContin , savings cards along with Hysingla ER intro, invited to upcoming program, Said Ok will continue to prescribe for appropriate patients
PPLPMDL0020000001	Lakewood	OH	44107	2/5/2015	Discussed new product. Focused on appropriate patient and dosing. Reviewed conversion. Quick mention of Butrans and OxyCotin.
	Cuyahoga Falls	OH	44223	2/5/2015	Reviewed Butrans and Oxycontin patient type profiles and asked for him to continue pushing for appropriate patients to all and sable. I reviewed hysingla ER attributes, dosing, conversions, titrations, insurance and copay cards with discussion about mean hydrocodone plasma concentrations from MVA. Greg said its sounds good but is still waiting on her rx privileges so he can write it but said he send a patient he felt was appropriate for it to All today and dr Al write for it.
PPLPMDL0020000001	Parma	OH	44129	2/5/2015	Reviewed purdues pain portfolio and appropriate patient type for each. Clarified scheduling of opiod molecules because he wasn't clear about hydrocodone schedule change. Introduced Hysingla and who appropriate patient might be. Got in detailed discussion about pain management and when pain is determined to be around the clock is when an ER med might be appropriate.
PPLPMDL0020000001	Cleveland Hts	OH	44118	2/5/2015	Quick review of OxyContin savings cards along with Hysingla ER for those patients requiring around the clock analgesia that are failing on present therapy. said ok will consider for appropriate patients
PPLPMDL0020000001	Rocky River	OH	44195	2/5/2015	Quick review of OxyContin every 12hours, savings cards along with Hysingla ER intro for those patients failing on present therapy requiring around the clock analgesia. Said ok will continue to prescribe for appropriate
PPLPMDL0020000001					Introduced hysingla and she said she doesn't treat chronic pain patient, but thought the abuse Detr properties was important. Covered attributes and tried to over the appropriate pAtient and the dosage. Highlighted Butrans. Attributes and dosing
	Cuyahoga Falls	OH	44223	2/5/2015	Discussed appropriate patient types for Butrans with Helen, Maggie for oxycontin and introduced hysingla. Discussed attributes, q24, no APAP and abuse deterrent properties. Reviewed patient types on hydrocodone IR combinations and asked dr to write foe owe meeting the indication and Butrans or Oxyctotin may not be appropriate. Dr said ok but he's still looking for Butrans as his go to ER opioid.
PPLPMDL0020000001	Parma	OH	44129	2/5/2015	No new information learned on this call.
PPLPMDL0020000001	Stow	OH	44224	2/5/2015	No information learned.
PPLPMDL0020000001	Cleveland	OH	44195	2/5/2015	Visited CCF main, Dobbie, Parala, Faiman, Lagman, OxyContin savings cards along with formulary opportunity
PPLPMDL0020000001	Shaker Hts	OH	44118	2/5/2015	Reviewed all three products with Sarah, will recommend ERO products when appropriate,
PPLPMDL0020000001	Cleveland Hts	OH	44118	2/5/2015	Reviewed all three products with Subramham RPH, said he will order when rx is presented.
PPLPMDL0020000001	Independence	OH	44131	2/5/2015	Doug still hasn't seen a script of Hysingla so he won't be stocking it until that happens. Quickly reviewed commercial coverage based on the fact that last time he said that it would be too expensive. Meh will stock it once the prescriptions come in.
PPLPMDL0020000001	Tallmadge	OH	44278	2/5/2015	Spoke with pharmacist about hysingla ER outlining the product and discussed physician requests for stocking. He said that he is not allowed to order with Giant Eagle and they have a policy about only ordering new expensive products until they see an Rx. I told him that others have done it and he said its been his directive.
PPLPMDL0020000001	Parma	OH	44129	2/5/2015	Doctor hasn't written for Hysingla yet. He has the information that he needs and thinks it's a reasonable option that he will keep in mind. He knows that he doesn't think of butrans either. He does have patients in oxycontin though.
PPLPMDL0020000001					
PPLPMDL0020000001	Stow	OH	44224	2/5/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	2/5/2015	No new information learned on this call.
	Cleveland	OH	44130	2/5/2015	Quick call. She is liking butrans as an option for her patients and requested more savings cards. I'm introduced Hysingla and she said that when she writes Norco it is just for a few pills for a short period of time so Hysingla wouldn't be upmost on her mind right now.
PPLPMDL0020000001	Tallmadge	OH	44278	2/5/2015	Spoke with Seth the pharmacist about hysingla and he said they got their first script for it the end of January. Seth said its a commercial patient but it did require a PA. Seth said he's still waiting on it and it cam from Kim Kanic. I told Seth that Kim is no longer at the center for pain in the Falls. Called Glenn at the hospital and told him about it and he wanted me to tell the pharmacist to call him.
PPLPMDL0020000001	Parma	OH	44134	2/5/2015	Marco the pharmacy manager committed to stocking the 20,30,40 mg of Hysingla after I told him which physicians in the area I would tell they are stocking.
	Cuyahoga Falls	OH	44223	2/5/2015	Discussed patient types appropriate for Butrans with Helen and oxycontin with Maggie. Dr said that he is continuing to have great success with Butrans and is steady with oxycontin. Dr said he knows where he needs to position each product. Introduced hysingla ER outlining indication, dosing, q24, no APAP, and conversions. Read over a few parts of the fpi. Dr said he has been actually waiting for a single entity product and will write. Had dr sign stocking form.
PPLPMDL0020000001					
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/5/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	2/5/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44305	2/5/2015	No new information learned on this call.
	Stow	OH	44224	2/5/2015	Followed up with Amber about stocking of hysingla. I showed her a couple of physician stocking requests and asked her to stock at least one dose. Amber said she wanted the request forms and made copies for her pharmacy manager. I thanked her for her commitment and told her I will follow up in a week or two.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/5/2015	Reviewed Butrans Helen profile and asked linda to continue prescribing. Linda said she is really liking Butrans and is using the copay cards like crazy. Linda said she is using it for tramadol but also hydrocodone and oxycodone. Reviewed hysingla attributes, indication, q24, no APAP, conversions, titration, patient types and insurance and copay cards. Linda said she's excited about it and loves that is has abuse deterrent properties and is only once a day. I asked Linda to find a few patients and she agreed.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/5/2015	Reviewed hysingla ER attributes, dosing, conversions, titration, discontinuation, insurance and copay cards.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/5/2015	Spoke to Kylie about hysingla again and asked for him to stock it based on physician requests. Kylie said he will talk with the pharmacy manager and attempt to get it done. Kyle said it makes sense to have his product especially since it abuse deterrent.
PPLPMDL0020000001	Rocky River	OH	44116	2/5/2015	Insight 18. Dr said he feels abuse det properties are important but patients like their pills. We talked about his experience w Butrans and he said he started them on 10mcg from codeine and the patient is coming back in a month and is doing great so far. I asked if the pTient had any concerns w a patch and he said no and in fact she was happy about it being a 7 day patch. We reviewed the ultram Nd non opioid patient and attributes. Dr said he would write more based on his first experience. We reviewed hysingla and OxyCotin abuse det properties. Gave fair balance on abuse potential for all opioids even with this technology. Identified who the right patient is for hysingla. Dr agreed to try it, I got him to allow me to work with sarah and Katie about his patients coming in on hydrocodone and flagging their charts. Dr said that would be great because he doesn't have time to do that as he said he has no idea Whois coming into the office. We talked about him being out of town on Tuesday and I asked for him to try it before he leaves and confirmed I would be back to do follow up. He said that would be
PPLPMDL0020000001	Westlake	OH	44145	2/6/2015	Reviewed of appropriate patients for Butrans and commercial patients and reviewed Hysingla. Dr said I could work with dr Raslan to identify appropriate patients for his Hysingla patients. The computers were down, so I need to return to do this.
PPLPMDL0020000001	Westlake	OH	44145	2/6/2015	Talked about insight 18, dr said he writes more Butrans because of this change. We talked about the appropriate patient and why he likes the product. Dr said he likes weekly dosing because it's easier for the patient. We talked about hysingla. Dr was happy to hear it has abuse der properties in labeling. We reviewed the tiers and also fair balance that it does not mean it can't be abused, dr agreed. We covered attributes. Brian thought this would be a god patient for some of his Percocet patients. I asked why he doesn't think of OxyCotin and the dr said the name. We talked about OxyCotin, dosing and conversion. Dr still said he will write it. We talked about
PPLPMDL0020000001	Parma	OH	44129	2/6/2015	They are short staffed and have difficulty getting all the pa's done. Suggested cover my meds as a resource that may help streamline the pa process. Not a good time to talk. quickly reviewed Hysingla and said we would talk more about it next time. In the meantime, I asked him to keep an eye out for commercial patients who are in around the clock pain and taking 3-4 Norco per day and still in pain. reminded him of 5 doses of butrans.
PPLPMDL0020000001	Beachwood	OH	44122	2/6/2015	Gave him scott profile as a patient he should keep an eye out for butrans. Quickly introduced Hysingla but he said we can talk next week during the appointment.
PPLPMDL0020000001	Beachwood	OH	44122	2/6/2015	She is too busy today but I left her Hysingla titration guide and told her that oxycontin isn't the only ER single entity opiod with abuse deterrent characteristics. We have appointment next week to discuss the details.
	Berea	OH	44017	2/6/2015	Insight 18. Talked about the Hysingla and attributes reviewed appropriate patient asked if the product made sense and if he would commit to trying it today. Dr said yes. Dr asked about managed care which I addressed. Spoke to nurses about products and savings cards. Talked about Butrans and asked what he thought about it being schedule three. Dr said he forgot it was scheduledl three. We reviewed refills and asked him to write it for appropriate Tramadol patients needing a change in Therapy , dr said ok
PPLPMDL0020000001	Beachwood	OH	44122	2/6/2015	Doctor has an easier time talking at strongsville location, very busy today. Quickly reviewed Hysingla, described appropriate patient. He thinks it a good idea and will try to remember to read the information. Left Sonia and titration guide. Reminded him of 7 strengths of oxycontin and 4 strengths of butrans.
PPLPMDL0020000001	Westlake	OH	44145	2/6/2015	Introduction to hysingla. Review appropriate patients for each product. Gave fair balance of abuse potential for all opioids including my products being promoted. Talked about Percocet to OxyCotin but the dr wanted to write hysingla here for appropriate patient. I went back to the molecule, but the dr said it was the once a day dosing and the new name he is liking for his patient. Reviewed Butrans attributes and closed on patients, dr said he would try it.
PPLPMDL0020000001	Cleveland	OH	44195	2/6/2015	Reviewed OxyContin savings cards, Intro to Hysingla ER along with Butrans for those patients failing on present therapy requiring around the clock analgesia, invited to program, Said ok will consider for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44195	2/6/2015	Reviewed OxyContin savings cards, Intro to Hysingla ER along with Butrans for those patients failing on present therapy requiring around the clock analgesia, invited to program, Said ok will consider for appropriate patients and will attend program
PPLPMDL0020000001	Cleveland	OH	44195	2/6/2015	Reviewed OxyContin savings cards, Quick Review of Hysingla ER along with Butrans for those patients failing on present therapy requiring around the clock analgesia, invited to program, Said ok will consider for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44113	2/6/2015	No new information learned on this call.
PPLPMDL0020000001	CLEVELAND	OH	44195	2/6/2015	Reviewed w/Troy OxyContin along with Butrans and stocking of Hysingla ER, said ok will stock and recommend.
PPLPMDL0020000001	Cleveland	OH	44195	2/6/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	2/6/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44134	2/6/2015	Reviewed Hysingla. They will not stock until docs are writing it. They don't move a lot of c2's out of there
PPLPMDL0020000001	Cleveland	OH	44195	2/6/2015	Quick OxyContin reminder along with Hysingla ER, invited to upcoming program, said he review and let me know if he can attend.
PPLPMDL0020000001	Cleveland	OH	44195	2/6/2015	No new information learned on this call.
	Euclid	OH	44119	2/6/2015	Spoke with Dave - pharmacy mgr - he says 1 bottle of Hysingla ER 20 mg & 1 bottle Hysingla ER 40 mg came in. The 30 mg shows in McKesson: 30 mg temporarily out of stock - please re order. Dave says this means that they want him to keep re ordering, no estimated date for availability was given.
PPLPMDL0020000001	Westlake	OH	44145	2/6/2015	No new information learned on this call.
PPLPMDL0020000001	Independence	OH	44131	2/6/2015	No new information learned on this call.



PPLPMDL0020000001	Cleveland	OH	44113	2/6/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	2/6/2015	Shay has not seen any scripts for Hysingla. Ms he gave me some names of physicians in the area who seem to write a few c2's. Reviewed formulary coverage.
	Cleveland	OH	44195	2/6/2015	Reviewed with Keith OxyContin savings cards, Intro to Hysingla ER along with Butrans for those patients failing on present therapy requiring around the clock analgesia, Said ok will relay info, will be getting a new RPH mgr by the end of the month.
PPLPMDL0020000001	Cleveland	OH	44103	2/6/2015	Reviewed with Abdul OxyContin along with Hysingla ER and Butrans for those patients failing on present therapy requiring around the clock analgesia, Discussed stocking Hysingla ER per Debbie. said he will order next week
PPLPMDL0020000001	Independence	OH	44131	2/6/2015	Gave him 3 more profiles and told him he has seen many patients just like these I suspect, did any of them get butrans. He smiled. Quickly introduced him to Hysingla, he took initiation guide and thought it was a good idea for a med. He promised to read up on what I left him and we can talk next time.
PPLPMDL0020000001	Euclid	OH	44119	2/8/2015	Spoke with pharmacy mgr Kevin - discussed Hysingla ER core messaging and pre order of Hysingla ER - one bottle each of 20,30,40 mg - let him know I met with Euclid Hospital pain specialists including Paul Gawry PA-C, and they are on board with product.
PPLPMDL0020000001	Westlake	OH	44145	2/9/2015	Talked about hysingla attributes- covered appropriate patient type. Dr asked managed care...which was addressed. Dr said he would think about writing but no commitment today.
PPLPMDL0020000001	Lakewood	OH	44107	2/9/2015	Highlighted new product attributes and who appropriate patient is...
PPLPMDL0020000001	Lakewood	OH	44107	2/9/2015	No new information learned on this call.
	Akron	OH	44320	2/9/2015	Short discussion in hallway and reviewed the appropriate patients for each product with Helen and Maggie. Told dr i'm bringing coffee on Friday to discuss Hysingla ER in depth. Dr said he received a mailer from Purdue and said he might use it and asked if Medicaid is covering it? I told dr we are still waiting to know for sure but told him the product attributes and dosing. Told dr to focus on commercial insurance.
PPLPMDL0020000001	Cleveland	OH	44114	2/9/2015	Reviewed OxyContin every 12hours, Butrans 7 day transdermal along with Intro to Hysingla ER for those patients requiring around the clock analgesia failing on present therapy. Said Ok will continue to consider/prescribe for appropriate patients.
PPLPMDL0020000001	Garfield Hts	OH	44125	2/9/2015	Reviewed OxyContin every 12hours, Hysingla ER along with Butrans for those patients failing on present therapy requiring around the clock analgesia, Said ok will continue to consider ERO for those appropriate patients
PPLPMDL0020000001	Cleveland	OH	44112	2/9/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/9/2015	No new information learned on this call.
PPLPMDL0020000001	Garfield Hts	OH	44125	2/9/2015	No new information learned on this call.
PPLPMDL0020000001	Rocky River	OH	44116	2/9/2015	No new information learned on this call.
PPLPMDL0020000001	North Olmsted	OH	44070	2/9/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44114	2/9/2015	Intro to Hysingla ER, reviewed OxyContin and Butrans with Marc, Discussed utilization, formulary coverage and savings cards, Said ok will recommend to appropriate patients
PPLPMDL0020000001	Lakewood	OH	44107	2/9/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44125	2/9/2015	Reviewed with Tech, Hysingla ER and Butrans , no new RX's will note of utilization,
PPLPMDL0020000001	Parma	OH	44134	2/9/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44303	2/9/2015	Confirmed that rod still has hysingla on the shelf and reviewed copy cards. Reviewed Helen and Maggie for Butrans and oxycontin.
PPLPMDL0020000001	Westlake	OH	44145	2/9/2015	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	2/9/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44312	2/9/2015	No new information learned on this call.
	Akron	OH	44313	2/9/2015	Spoke with Tom the pharmacy manager about hysingla. Tom said Jason already showed him what I left on the product. Reviewed the attributes, copy cards and showed him some of the pharmacy stocking requests. Tom said he will order a few doses.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/9/2015	Spoke with Linda Armstrong and Greg carpenter while providing copy cards. Discussed each products attributes and to prescribe hysingla.
	Akron	OH	44312	2/9/2015	Discussed with Drs manning and McRoberts products at front counter. Showed dr the Helen profile for Butrans and asked him if it makes sense for Butrans to be used there? Dr said it makes sense and has done it before. I asked dr if he write note and has any patients on it daily and around the clock? Dr said he does. I told him I may have a solution for some of those patients and introduced hysingla. Discussed attributes, dosing and conversions and then discussed copy cards with him and the office manager. Dr said its interesting and likes that there is no APAP. I asked for him to write it for commercial insurance and reviewed plans. Provided dr with the oxycontin conversion and titration guide.
PPLPMDL0020000001	Lakewood	OH	44107	2/9/2015	Spent time w Beth the office manager about new prod it and covering managed care about Hysingla and other Purdue products. Spoke to the dr about his needs using extended release products. Dr writes most scripts in hospital, like OxyContin. Dr asked if we could get the new product on formulary. We talked about writing a script...dr said he doesn't use his script pad in hospital just in the office. Dr said he thought Hysingla was a great option for patients not having to take their medication so many times a day. We covered attributes of hysingla and managed care, gave fair balance on abuse potential for all opioids including the products I was promoting. We talked about Butrans and OxyContin. Dr said he likes Butrans becuise it's dosed weekly and he doesn't like OxyContin because of the name.
PPLPMDL0020000001	Uniontown	OH	44685	2/9/2015	Told dr about the new product hysingla and gave quick review of some attributes including q24, no APAP, ER hydrocodone with abuse deterrent properties. Dr said it sounds like a good option and will look to write it. Gave dr and the office manager linda the copy cards and trial offer and explained them. Asked dr to continue using oxycontin and Butrans which should be for his patients on daily, around the clock tramadol.
PPLPMDL0020000001	Westlake	OH	44145	2/9/2015	Introduction of hysingla. Only got dosing and abuse deter out if the attributes.
PPLPMDL0020000001	Cleveland	OH	44195	2/9/2015	Quick review of OxyContin every 12hours along with Hysingla ER, for those patients requiring around the clock analgesia that are failing on present therapy, said ok will be attending upcoming program
PPLPMDL0020000001	Cleveland	OH	44195	2/9/2015	Quick reminder of OxyContin every 12hours along with Hysingla ER intro along with program invite, said ok will consider.
PPLPMDL0020000001	Rocky river	OH	44116	2/9/2015	No new information learned on this call. Invited to a hysingla program and covered a few attributes Talked about abuse d properties w hysingla and OxyContin.
	Akron	OH	44310	2/10/2015	Dr spoke about his recent success with Butrans and said that he has had patients who have just raved about it and how it's made them pain free. Dr said that he is still using it mostly for his patients presenting on hydrocodone or oxycodone. I discussed how he should consider Butrans for his cox2 and Tramadol patients as well. Dr agreed but doesn't have very many on those products. Asked dr to also please use oxycontin for those patients already on IR Oxycodone or percocet. Introduced hysingla discussing all attributes, q24 dosing, no APAP, conversions and copy cards. I reminded him that he has told me in the past that Butrans works and is appropriate for about 50-60% of his patients. Dr agreed. I told him when it's not appropriate for those already on hydrocodone or can't tolerate Butrans, that's where he should be using hysingla. Dr agreed and it sounds like a good place for it. Dr said he knows of patients he can out on it. Told dr I will follow up and will continue to remind him of where and when to use.
PPLPMDL0020000001	Beachwood	OH	44122	2/10/2015	Doctor appreciated reminder of ER meds for her patients in around the clock pain. Discussed appropriate oxycontin patient and introduced her to Hysingla. She thinks that Hysingla is a better option for her because she has more patients on Norco. She can think of a few patients for Hysingla because they are taking 6 Norco a day and she is not happy with that dosing regimen. She thinks it is a great option also because she tends to gravitate more towards hydrocodone than Oxycodone.
PPLPMDL0020000001	Bedford	OH	44146	2/10/2015	Quickly reviewed pain portfolio I am responsible for promoting, meh asked if I could come back next week because this isn't a good week for him.
PPLPMDL0020000001	Cleveland	OH	44106	2/10/2015	Reviewed OxyContin every 12hours, along with Hysingla ER intro along with Butrans for those patients failing on present therapy requiring around the clock analgesia, said ok will consider for appropriate patients
	Cleveland	OH	44106	2/10/2015	Reviewed OxyContin every 12hours along with Hysingla ER and Butrans for those patients requiring around the clock analgesia that are failing on present therapy. Savings cards , formulary and stocking .Said ok will continue to consider for appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44113	2/10/2015	Reviewed Hysingla ER along with Butrans for those patients failing on present therapy that are requiring around the clock analgesia,Savings cards, formulary Said ok will continue to prescribe for appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44106	2/10/2015	Reviewed OxyContin every 12hours, along with Hysingla ER intro along with Butrans for those patients failing on present therapy requiring around the clock analgesia, said ok will consider for appropriate patients
	Akron	OH	44305	2/10/2015	Discussed the Helen profile for Butrans and asked dr to prescribe it for his patients on cox2 inhibitors and Tramadol who meet the indication for Butrans. I asked him if he has oatiens also on products like Norco or lortab every 4 or 6 hrs where maybe Butrans was not appropriate? Dr said he does. I introduced hysingla ER discussing all attributes, dosing, conversions, appropriate patient types, insurance and copy cards. I asked him if he thinks he can find a place for it and dr said for sure and thinks it's a great addition of his available choices. Told dr I will follow up in a week to further identify a patient.
PPLPMDL0020000001	Stow	OH	44224	2/10/2015	Spoke with Corey the Pharmacist about Hysingla ER again reviewing the attributes, dosing and co versions. I asked him if he will stock and he said they really only see prescriptions for pain from summit pain and will wait until they see a script. I told him I hope they take too it based on the Hydrocodone prescribed from that practice. Reviewed copy cards and trial offer. Discussed Butrans patient types and if they are dispensing? Corey said they do a few a month from summit pain.
PPLPMDL0020000001	Cleveland	OH	44106	2/10/2015	Reviewed product portfolio, confirmed Hysingla ER stocking
PPLPMDL0020000001	Euclid	OH	44132	2/10/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44105	2/10/2015	Quick Hysingla ER reminder and stocking inquiry.
PPLPMDL0020000001	BEDFORD	OH	44146	2/10/2015	Presented physicians stocking request. He said that as soon as he sees the first prescription he will stock Hysingla
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/10/2015	No new information learned on this call.
PPLPMDL0020000001	Beachwood	OH	44122	2/10/2015	Showed Dee stocking requests from physicians to encourage her stocking and she said that she is still waiting to see the first prescription.
PPLPMDL0020000001	Cleveland	OH	44113	2/10/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44106	2/10/2015	Visited pain mgmnt dept, Hayek,Sahgal,Lawrence, Fellows Reviewed OxyContin, Hysingla and Butrans, Program invite and lunch appt confirmation
PPLPMDL0020000001	Stow	OH	44224	2/10/2015	No new information learned on this call.
PPLPMDL0020000001	Beachwood	OH	44122	2/10/2015	No new information learned on this call.
	Euclid	OH	44117	2/10/2015	Lunch. Discussed patient types for OxyContin, q 12 h dosing, schedule, can titrate in 1-2 days, Tier 1, 3 abuse deterrent labeling: single entity. Delivered insight #19, acetaminophen, Lead to another single entity opioid, for a different type of patient: your patient on immediate release hydrocodone, not controlled and needs opioid daily, around the clock, long term. using core vis aid, went through each page, present core messaging, pivotal trial data, AE's, box warning, straightforward dosing. Using titration guide to show 1/1 ration conversion from ir hydrocodone to Hysingla Er. Asked if Hysingla ER fits into their practice. Yes, replied dr. demico, but what is cost and where covered? Dr says they have many Caresource patients at Painesville location where he can use. He can't use in Euclid yet, because Hysingla ER not covered on BWC OH. I responded I would research specifics on Caresource with him - is their prior auth/ and what is monthly cost? Reviewed trial, savings card for commercially insured patients.Akse him to write Hysingla ER and find patkents on ir hydrocodone that need a change or who are not controlled; and can benefit from product dosed q24h/no acetaminophen/7 strengths.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/10/2015	Called to confirm with Mike had ordered hysingla but he was not working today. Follow up on next visit.
PPLPMDL0020000001	Cleveland	OH	44106	2/10/2015	Reviewed OxyContin every 12hours, Hysingla ER and Butrans for those patients failing on present therapy requiring around the clock analgesia, Said Ok will consider, Invited to program

PPLPMDL0020000001	Cleveland	OH	44102	2/10/2015	Discussed Hysingla ER, Savings cards, formulary along with OxyContin every 12hours and Butrans for those patients requiring around the clock analgesia, said ok will recommend if appropriate.NP Kathy Myer and Tiffany
	Beachwood	OH	44122	2/10/2015	Doctor likes the option of Hysingla because it is a single entity. He has typically gravitated towards Oxycodone molecule primarily because it came in single entity formulations. He believes that when a patient is in pain around the clock extended release meds are the ideal way to manage their pain. He understand the patient types for each of our products in our portfolio. He still,hasn't found butrans patient.<font color=blue><b>CHUDAKOB added notes on 02/20/2015</b></font>What is he missing when it comes to Butrans. Discover this and you will sell him.
PPLPMDL0020000001					
PPLPMDL0020000001	Westlake	OH	44145	2/11/2015	No new information learned on this call.
	Westlake	OH	44145	2/11/2015	Short reminder about the patients coming in on Tramadol or hydrocodone appropriate for Butrans or hysingla. Dr told me to work with the nurses. Virginia told me to return on the 19th were we will sit down after dinner and work to find appropriTe patients coming up. I informed her that we will follow hippa and that I will not look at charts or anything like that, she understood. Teara was not in today and she is newer and Virginia said she will talk to the doctor about helping her understand what we are doing for the doctor.
PPLPMDL0020000001					
PPLPMDL0020000001	Parma	OH	44129	2/11/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	2/11/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	2/11/2015	Torres said she prescribes a lot of Butrans and has a lot of experience with her pts; she said she likes the convenience of the 7 days and prescribes it for opioid naive pts for low back pain with good results
	Westlake	OH	44145	2/11/2015	Dr said hysingla was a product he can use more than Butrans. I asked why and he said because its a pill. We talked about the appropriate patient type of using Butrans after Tramadol or NSAID and hysingla after hydrocodone and the dr said it made sense. We reviewed indication. Also covered managed care. Dr said the patient will bark about price cause hydrocodone is so cheap. Covered coupons. Of used on that one patient that is currently taking so many pills a day and what it will be like for that patient to take a medication on e a day. Dr agreed he saw value in the product but was concern on price. I reminded him we are talked about those patients employed with insurance right now. And if they are asking for you to do something more for them, why not try it. Dr agreed. I gave him a few invites to dinner programs and he said he will think about attending. Carol the. Rise does the pa and she said they take so long and I mentioned covered my meds and gave her a flyer but she was not willing to try it.
PPLPMDL0020000001					
	Munroe Falls	OH	44262	2/11/2015	Reviewed the Maggie profile for oxycontin and asked her if that makes enough sense to look more closely at reevaluating patients for OxyContin? Dr said it does and tries to failed often but admitted its hard to get people to change. Introduced hysingla discussing attributes, q24 dosing, dosing, conversions, steady state and appropriate patient types. I asked if she thinks she can find a patient to two who would be appropriate for it and if she feels comfortable enough with the concept of a once a day hydrocodone without APAP? Dr said she does and will give it a shot.
PPLPMDL0020000001					
PPLPMDL0020000001	Cleveland	OH	44195	2/11/2015	Reviewed OxyContin every 12hours, Hysingla ER along with Butrans for those patients requiring around the clock analgesia, said ok will continue to consider for appropriate patients,
	Cleveland	OH	44130	2/11/2015	Spent some time discussing pain portfolio and appropriate patient type for ER meds. Knowing that these aren't the majority of patient he sees, I asked him to keep in mind 1-2 of his patients that are in pain around the clock. He likes that butrans is c2 and so does keep forgetting about it, he appreciated the reminder. He believes that he needs to be more proactive in switching some of his IR med patients to ER meds sooner. He believes there is a place for Hysingla in his practice, so as long as insurance doesn't give them a hard time, like requiring nycinta, he will find a couple of patient appropriate for Hysingla.
PPLPMDL0020000001					
	Cleveland	OH	44195	2/11/2015	Reviewed OxyContin every 12hours,Savings cards along with Hysingla ER and Butrans for those patients failing on present therapy requiring around the clock analgesia, said she is and will continue to find appropriate patients along with discussing with staff and fellows.
PPLPMDL0020000001					
	Akron	OH	44333	2/11/2015	Dr and elise leone started off explaining to me that no one wants to pay for oxycontin and they are being asked by the patients insurance to go with ER Morohine, methadone or fentanyl. Dr said even when patients have been on oxycontin for long periods of time they can't get it in 2015 without step edits and PAS. I told dr that in the new year that just happens and not only to oxycontin but most medicines in the new year. Dr agreed. Discussed appropriate patients for Butrans and told him to find those meeting the indication on cox2 inhibitors and tramadol. Told him to convert IR oxycodone and percocet to q12 oxycontin when they meet the indication. Dr said he's been having good success with Butrans. Discussed hysingla and explained appropriate patients on hydrocodone combinations and reviewed dosing along with plasma hydrocodone concentrations. Dr said he really wants to use it but just hasn't found the right patient yet.
PPLPMDL0020000001					
	Cleveland	OH	44130	2/11/2015	Doctor appreciates the ADT in the meds that purdue is coming to market with. She was interested to hear who the appropriate patient is for each med. She liked hearing that butrans is a c3 med, that is preferred to a c2 if possible. She was able to think of a Hysingla patient as we spoke. She will try writing it for her and see what happens. She said she really doesn't see many pain patients but will keep this information in mind.
PPLPMDL0020000001					
PPLPMDL0020000001	Cleveland	OH	44195	2/11/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	2/11/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44105	2/11/2015	Reviewed Hysingla ER, stocking request, said ok, high volume of managed medicad
PPLPMDL0020000001	Cleveland	OH	44130	2/11/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	2/11/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	2/11/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	2/11/2015	No new information learned on this call.
PPLPMDL0020000001	Fairlwan	OH	44333	2/11/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	2/11/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	2/11/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	2/11/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	2/11/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44109	2/11/2015	Reviewed Hysingla ER stocking request, will discuss with mgr. to stock
PPLPMDL0020000001	Westlake	OH	44145	2/11/2015	No new information learned on this call.
PPLPMDL0020000001	Fairview Park	OH	44126	2/11/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	2/11/2015	Quick call introducing Hysingla and making sure they were all set with butrans resources. She thinks that it is a great option for some of the patients requiring multiple meds and frequent dosing.
PPLPMDL0020000001	Westlake	OH	44145	2/11/2015	No new information learned on this call.
	Cleveland	OH	44113	2/11/2015	Dr Nickels said he prescribes Butrans for his LT back pain pts when he gets uncomfortable with increasing amount of IR opioids-still uses IR opioids for breakthrough pain; he said his pts like the convenience of the 7 day dosing schedule and are getting good efficacy; discussed tramadol threshold pts and he said he is prescribing Butrans there as well; OxyContin-doctor said he has never been a fan of the oxycodones and it has nothing to do with OxyContin
PPLPMDL0020000001					
	Cuyahoga Falls	OH	44223	2/11/2015	Met with Barry Klein about hysingla. Introduced him to the product discussing attributes, q24, no APAP, conversions, titration and managed care coverage. Discussed copay cards and commercial coverage. Barry talked about BWC p&T committee meeting in April and said he might have a sub committee meeting in March. Discussed abuse deterrent properties and FDA tiers. Barry said based on dr Ali and Sable at the pain center he will stock the 20,30 and 40 mg and said that the price or Norco continues to go up. I asked Barry if he would meet with a Kendra the RAE and he said he would like to and is available nxt week.
PPLPMDL0020000001					
	Akron	OH	44313	2/11/2015	Introduced hysingla to mark the pharmacist discussing attributes, conversions, copay and trial card and invited to program on 2/25. Mark said he's glad it's abuse deterrent and will consider stocking. Provided him with the pharmacy rebate sheet and reviewed dosing.
PPLPMDL0020000001					
	Parma	OH	44129	2/11/2015	Doctor is having good success with butrans and thinks it is a good option for many of his patients. He will reluctantly choose oxycontin for his patients. Quickly reviewed portfolio and purdue s leadership with ADT meds.
PPLPMDL0020000001					
	Akron	OH	44333	2/11/2015	Then introduced Hysingla. He believes there is a place for it and thinks it's a good idea. He will review the information and we can talk about it next time when he is less busy. He is just coming back from a little time off. Elise along with dr Vucetic discussed how she can't get patients approved for their refill on oxycontin since the new year and that she's being asked for write MS Contin and fentanyl first. Discussed how she will be able to get oxycontin approved once the patient trials one of those products. Discussed Butrans patient types and efficacy and safety. Peonies said she really likes Butrans and is having luck recently in those people who are older and don't like pills. Reviewed hysingla patient types and asked her when she has a Norco patient in for a follow up to see if they are in pain on a daily and around the clock basis. Elise said she thinks she will write it.
PPLPMDL0020000001					
	Cleveland	OH	44113	2/11/2015	Quick review of Hysingla ER along with Butrans for those patients failing on present therapy that are requiring around the clock analgesia, said ok will keep it mind.
PPLPMDL0020000001	Tallmadge	OH	44278	2/12/2015	Introduced her to all products hysingla, Butrans and Oxycontin. Discussed all product attributes, dosing, delivery, conversions and appropriate patient types. Mackenzi said that she doesn't have her license to prescribe yet but thinks I have good products. Discussed abuse deterrent properties for oxycontin and cost with copay cards.
PPLPMDL0020000001					
	Tallmadge	OH	44278	2/12/2015	Discussed all three products outlining appropriate patients for each. Reviewed hysingla attributes, dosing, q24 and no APAP. Got buy in from him that he currently has patients taking Norco around the clock that me be appropriate. Discussed Butrans Helen profile and discussed specific patient type identification. Reviewed oxycontin patients and his positive experiences with the product. Copay cards and insurance for all products.
PPLPMDL0020000001					
	Tallmadge	OH	44278	2/12/2015	Discussed all three products appropriate patient identification and reviewed all profiles with dosing of hysingla, dosing, conversions, and copay cards. Dr said that she doesn't like to treat pain but knows it's going to happen. Dr said it woulds like each product has a distinct place and feels comfortable with each. I asked if she could find a Norco patient who meets the hysingla indication and she said she'll try.
PPLPMDL0020000001					
	Parma	OH	44129	2/12/2015	Reviewed purdue pain portfolio and discussed appropriate ER patients. She tried butrans when it first came out with not the best results. Patients said it didn't work and they didn't like it. We talked about getting to the right dose and appropriate patient type. Reviewed formulary coverage and scheduling. She said it makes sense for that patient and maybe she will give it another try. She can think of a few patients that would be appropriate for Hysingla. She is interested to see if patients are receptive to it. We discussed her role in presenting it to the patients.
PPLPMDL0020000001					
	Tallmadge	OH	44278	2/12/2015	Discussed all three products from oxycontin, hysingla and Butrans outlining appropriate patients for each. I asked dr if he is continuing to find patients who are appropriate for oxycontin and are they typically coming from IR oxycodone? Dr said primarily yes and really likes it because it works and is covered for the most part. Introduced hysingla attributes, q24, no APAP and discussed abuse deterrent tiers. Discussed conversions and gained commitment that he has plenty of Norco or lortab patients who may be appropriate. Reviewed insurance and copay cards. Discussed Helen profile for Butrans and asked for him to just use it.
PPLPMDL0020000001					
	Garfield Hts	OH	44125	2/12/2015	Discussed OxyContin coverage along with Hysingla ER and Butrans for those patients failing on present therapy that require around the clock analgesia, Trial cards, formulary coverage said ok will consider for appropriate patients that have coverage.
PPLPMDL0020000001					
	Cuyahoga Falls	OH	44223	2/12/2015	Called and asked if they have decided to stock hysingla. Matt said they haven't decided and to check back next week.
PPLPMDL0020000001	Richmond Heights	OH	44143	2/12/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44125	2/12/2015	Reviewed Hysingla ER,OxyContin and Butrans, no new info learned.
PPLPMDL0020000001	Independence	OH	44131	2/12/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44130	2/12/2015	Told doctor that I know he said most of his patients are only taking 2-3 hydrocodone per day. Asked him to consider Hysingla for a couple of his patients that are taking 4 or more. He said he will see if he has any patients like
PPLPMDL0020000001	Cleveland	OH	44130	2/12/2015	No new information learned on this call.
PPLPMDL0020000001	Twinsburg	OH	44087	2/12/2015	No new information learned on this call.
PPLPMDL0020000001	Richmond Heights	OH	44143	2/12/2015	Met with med asst at front window. Discussed, left Purdue portfolio trifold, discussed products and patient types. Left for Dr. Natesan: Purdue portfolio trifold, Hysingla ER fpi, Cover my Meds brochure.

PPLPMDL0020000001	Tallmadge	OH	44278	2/12/2015	Spoke with Seth again to get follow up on dr Al's hysingla patient who has a PA for ESI. Seth said it still isn't going through and hasn't even heard from the patient. Seth said he is going to call the patient to check in.
PPLPMDL0020000001	Parma	OH	44129	2/12/2015	No new information learned on this call.
	Highland Heights	OH	44143	2/12/2015	Quick product portfolio mention to Dr. at front window; I'm leaving formulary grids so you can see which plans DO NOT need a prior auth. Met with Meghan, at front window (she's temporary/until they find permanent employee). Left OM Cindy Cover my Meds brochure. Left for Dr. Salama, Purdue portfolio trifold.
PPLPMDL0020000001					No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44130	2/12/2015	Visited pain dept, Reviewed Hysingla ER and Butrans,
PPLPMDL0020000001	Cleveland	OH	44115	2/12/2015	Reviewed with George, Hysingla ER, OxyContin and Butrans, said he will order Hysingla 60mg
PPLPMDL0020000001	Cleveland	OH	44115	2/12/2015	Spoke with Denise Roadman about Butrans and hysingla and distributed invites for upcoming hysingla program.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/12/2015	No new information learned on this call.
PPLPMDL0020000001	Garfield Hts	OH	44125	2/12/2015	Spoke with Andrea and attempted to get them to stock hysingla. Was told that corporate told them they need to wait until they see a prescription. Showed the stocking reports again and she said it's not her call.
PPLPMDL0020000001	Stow	OH	44224	2/12/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/12/2015	Dr said she was looking for Butrans copy cards this morning and couldn't find them. I told her that maybe when they moved recently they weren't brought over and left some. Dr said that she started a patient who was on Norco and she said she didn't want to refill it. I told her that's good news and told her quickly about the option of hysingla for that patient type as well. Dr said it makes sense and took the initiation and titration guide.
PPLPMDL0020000001	Cuyahoga Falls	OH	44224	2/12/2015	Nothing else learned.
	Cuyahoga Falls	OH	44223	2/12/2015	Introduced hysingla ER with dr in the hallway of his office with the other physicians. I asked dr if he can think of just one patient who is currently on a product like Norco who is in pain on a daily, around the clock basis? Dr said he can asked me to tell him more. Discussed attributes, q24, no APAP and abuse deterrent properties. Reviewed initiation and titration guide with conversions and then discussed insurance and copy cards. Left dr with a program invite and asked him if he would use hysingla? Dr said it sounds like a good product especially since it's abuse deterrent. Reminded him to please continue looking for Butrans candidates who are on cox2 inhibitors or tramadol and meet the Butrans indication.
PPLPMDL0020000001	Tallmadge	OH	44278	2/12/2015	Discussed over lunch all products attributes and patient type identification. Led off with hysingla ER introduction with attributes, q24, no APAP, and abuse deterrent properties. Reviewed dosing, conversions and titration. I asked dr if he currently has existing patients on products like Norco or lortab and are taking it on a daily, around the clock basis? Dr said he has too many. I told him he now has an ER option of hydrocodone that needs to be doses on a q24 basis with no APAP. Dr said one binges are big for him and said he's intrigued. I discussed copy cards for all products and then reviewed parint types for Butrans and oxycontin. I told him each product had a place in his practice and it's going to be up to him to appropriately identify patients for each.
PPLPMDL0020000001	Garfield Hts	OH	44125	2/12/2015	Quick window call, Reviewed OxyContin every 12hours, Hysingla ER/Butrans for those patients requiring around the clock analgesia that are failing on present therapy. Said ok will consider, invited to program
PPLPMDL0020000001	Cleveland	OH	44115	2/12/2015	Reviewed Hysingla ER/Butrans for those patients requiring around the clock analgesia, that are failing on present therapy. Said she will continue to prescribe for patients that are appropriate and can have access to products. Doctor has 4 patients in mind that he hasn't yet seen this month that he thinks will be appropriate for Hysingla. So far he asked 2 patients who were not willing to switch to once daily dosing. He believes in the product and will soon h/ve some experience with it. He thinks both oxycontin and Hysingla have a place in his practice for patients that are in chronic pain. He prefers single entity products.
PPLPMDL0020000001	Cleveland	OH	44130	2/12/2015	Quick Intro. New to practice, Hysingla ER/Butrans for those patients failing on present therapy requiring around the clock analgesia, said ok, invited to upcoming program, will further discuss at lunch appt
PPLPMDL0020000001	Cleveland	OH	44125	2/12/2015	I asked dr if he has any patients on hydrocodone combos like Norco or lortab? Dr said too many yes. I told him about hysingla ER attributes, dosing, conversions, abuse deterrent properties, copy cards and invites to the program on 2/25. Dr asked if it's covered and I discussed commercial insurance coverage for now. Dr said that he thinks he can think of a few patients. I asked him when he has those Norco patients in for follow up appointments and have daily, around the clock pain to initiate hysingla. Dr said ok. Reminded dr to continue identifying Patients on cox 2 inhibitors or tramadol who are in pain around the clock as Butrans new starts.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/12/2015	Short hello in hallway of hospital. I asked her if she's had time to think about hysingla or Butrans and if she's seen cases like them in the practice? Denise said since she can't prescribe yet but sees Butrans patients all he time and said it seems like a great product. Denise said that hysingla seems pretty straight forward since its a once a day hydrocodone and likes that there is no APAP. I asked her if she is seeking patients and she said she is but only with the physicians at this point and should be credentialled soon.
PPLPMDL0020000001	Tallmadge	OH	44278	2/12/2015	Good discussion about identifying patient types for Butrans. Discussed Helen profile and asked him if he also has any patients on cox 2 inhibitors that may be on them around the clock and present in pain? Dr said he will keep an eye out for them. Introduced hysingla outlining attributes, q24 dosing, no APAP and abuse deterrent properties. Reviewed MVA pages discussing conversions and dosing. Dr asked about managed care and I discussed SummaCare, Medco and other commercial plans. I asked dr if he would be able to identify any patients currently on Norco or lortab who would meet the indication? Dr said he's not a pain management dr so he doesn't have to many but said he isn't against using hysingla.
PPLPMDL0020000001	Garfield Heights	OH	44125	2/12/2015	Quick reminder of OxyContin every 12hours, savings cards along with Hysingla ER and Butrans for those patients failing on present therapy requiring around the clock analgesia, said ok, invited to upcoming program
PPLPMDL0020000001	Westlake	OH	44145	2/13/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	2/13/2015	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	2/13/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	2/13/2015	No new information learned on this call.
PPLPMDL0020000001	Beachwood	OH	44122	2/13/2015	No new information learned on this call.
PPLPMDL0020000001	Beachwood	OH	44122	2/13/2015	Introduced Hysingla And doctor said that she has often thought that she wished there was a hydrocodone ER like the Oxycodone ER (oxycontin). She can think of several patients that she thinks are appropriate and she feels that the ABT is very important for pain patients in today's day and age. Reviewed pain portfolio and appropriate patient for each.
PPLPMDL0020000001	East Cleveland	OH	44112	2/13/2015	Reviewed Hysingla ER along with Butrans for those patients requiring around the clock analgesia, said no new RX's will recommend for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44113	2/13/2015	Reviewed OxyContin Formulary coverage along with Hysingla ER and Butrans for those patients failing on present therapy requiring around the clock analgesia. Said he will consider for appropriate patients that have ins.
PPLPMDL0020000001	Twinsburg	OH	44087	2/13/2015	Discussed ER pain portfolio and appropriate patient types. He said that he believes patients are appropriate for ER meds once they are taking 30 mg of IR. He went to a pain presentation and heard that it is a good idea to alternate meds every few months since they work on different receptors so he is trying that on a few patients right now. He is just alternating hydrocodone and Oxycodone molecules since that is what he is most familiar with. He likes the idea of a single entity hydrocodone without the Tylenol. He doesn't think of butrans often enough, but will keep an eye out for on opiod naive or tramadol patient.
PPLPMDL0020000001	Cleveland	OH	44113	2/13/2015	Reviewed OxyContin formulary along with Hysingla ER and Butrans for those patients requiring around the clock analgesia failing on present therapy. Said Ok will consider for appropriate patients that have coverage.
PPLPMDL0020000001	Cleveland	OH	44113	2/13/2015	Reviewed OxyContin, Hysingla ER and Butrans for those patients requiring around the clock analgesia, failing on present therapy. Hysingla ER formulary and Trial cards, said ok will continue to find appropriate patients that have formulary coverage.
PPLPMDL0020000001	Cleveland	OH	44113	2/13/2015	Reviewed Hysingla ER/Butrans and OxyContin, no new info learned. Will stock when RX's presented
PPLPMDL0020000001	Cleveland	OH	44113	2/13/2015	No new information learned on this call.
PPLPMDL0020000001	Beachwood	OH	44122	2/13/2015	Introduction to practice-quick reminders on Both products-OxyContin as first ER opioid after IR opioids;Butrans-after tramadol and opioid naive pts
PPLPMDL0020000001	Twinsburg	OH	44087	2/13/2015	No new information learned on this call.
PPLPMDL0020000001	Northfield Center	OH	44067	2/13/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	2/13/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44312	2/13/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44312	2/13/2015	Quick conversation about hysingla and discussed attributes, conversions , dosing and where to initiate. Dr said we can talk more next week for breakfast. Reminded him to use Butrans for those on cox2 inhibitors or tramadol and meet the indication.
PPLPMDL0020000001	Akron	OH	44320	2/13/2015	Good discussion about all products and the patient types appropriate for each with Helen, Maggie and new ones for hysingla. I asked her if she's had any experience with Butrans and she said no. Discussed more about how to identify appropriate candidates for the product. Monique said it makes sense. Reviewed hysingla attributes, dosing, conversions and where it's to be used as a viable option for patients on IR hydrocodone on a daily, around the clock basis.
PPLPMDL0020000001	Mayfield Heights	OH	44124	2/13/2015	This Pharmacy WAS not in my Phoenix system- added Friday FEB 13, after Dr Dean Pahr RN Jnet called about a United Health Care patient being denied after Dr Pahr wrote 20 mg Hysingla ER. Pharmacy suggested a prior auth. I communicated that Hysingla ER IS NOT COVERED ON UHC. Spoke with text Tayla, then pharmacist Mala; providing core messaging & details of how trial, savings worked. Let Mala know I'm in MIDDLEFIELD today & will get them literature by Tues Feb 17. Asked them to pre order bottle of 20 mg at least, as Dr Pahr committed to write & to be ready for next patient who is covered.
PPLPMDL0020000001	Uniontown	OH	44685	2/13/2015	Spoke with Kim and inquired about hysingla stocking. Kim said she's been out most of last week and has not ordered it yet but has a note to get it done. She said she going to order the 20-40mg doses. She said to check in next week.
PPLPMDL0020000001	Parma	OH	44129	2/13/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	2/13/2015	No new information learned on this call.
PPLPMDL0020000001	Rocky river	OH	44116	2/13/2015	No new information learned on this call.
PPLPMDL0020000001	Beachwood	OH	44122	2/13/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44319	2/13/2015	No new information learned on this call.
PPLPMDL0020000001	Beachwood	OH	44122	2/13/2015	No new information learned on this call.
PPLPMDL0020000001	Bedford	OH	44146	2/13/2015	Introduction to dr and Tiffany-dr said he is looking for more ATC pts for both OxyContin and Butrans; dr said he's excited about Hysingla and looking for pts; asked for low back pain pts with inadequate pain relief on IR opioids with OxyContin and opioid naive pts for Butrans
PPLPMDL0020000001	Parma	OH	44129	2/13/2015	Introduction to office-Quick product mentions-low back pain-left Maria and Cathy to discuss next visit
PPLPMDL0020000001	Akron	OH	44320	2/13/2015	Good discussion over breakfast about all products and where and when they should be used. Reviewed Butrans Helen profile, Maggie for oxycontin and told him that foe the patients he feels treating for pain they are viable ER options when the IR medicine becomes daily and around the clock. Dr agreed. Introduced hysingla ER discussing attributes, conversions, doses, q24, no APAP and abuse deterrence properties. Dr said he may try it out and make sure it's in their EHR system. Spoke to Barb to get it added.
PPLPMDL0020000001	Cleveland	OH	44113	2/13/2015	Reviewed Hysingla ER and Butrans for those patients requiring around the clock analgesia, that are failing on present therapy. Formulary coverage and Trial offer cards, said ok
PPLPMDL0020000001	Cleveland	OH	44195	2/13/2015	Quick review of OxyContin every 12hours along with Hysingla ER for those patients failing on present therapy who are requiring around the clock analgesia. said ok, mainly seeing patients at Avon CCF location

PLPMDL0020000001	Akron	OH	44320	2/13/2015	Positioned all three products with patient profiles and asked dr to use the, accordingly because when she has a patient who wants their IR opioid refilled and they are taking it on a daily around the clock basis, she needs to initiate he ER opioid like Butrans, oxycotin or hysingla ER. Introduced hysingla attributes, q24, no APAP, abuse deterrence properties. Reviewed patient profiles for hysingla and asked her if she would use it? Dr asked about medicaid and Medicare coverage and I told her we don't know because it's too early and then reviewed commercial insurance.
PLPMDL0020000001	Cuyahoga Falls	OH	44223	2/13/2015	Met with Barry Klein to review with Kendra Kormos the FDA draft guidance, abuse deterrence studies for oxycotin and hysingla and positioning for Butrans. Kendra spoke with Barry about hysingla ER and BWC and when it will go for review.
PLPMDL0020000001	Sagamore Hills	OH	44067	2/13/2015	Quickly handed him information through the window and the options he has for abuse deterrent meds for his patients in around the clock pain. When he has a moment please read the information for Hysingla, once daily hydrocodone with ADT.
PLPMDL0020000001	Cleveland	OH	44130	2/17/2015	Reviewed pain portfolio and appropriate patient types using PHIL. He thinks the abuse deterrent properties are fascinating. He has experience with oxycotin and believes it works well. He sees those patients every month, they are doing well and don't ask for more. Reviewed that it is q12 dosing, he has written it q8. He likes the option of Hysingla but doesn't see writing it soon. He was interested in hearing more about butrans and mechanism of action. Reviewed the agonist/anatomist page in detail aid. He likes the c3 scheduling and thinks that he might have appropriate patients for it.
PLPMDL0020000001	Parma	OH	44134	2/17/2015	Reviewed pain portfolio quickly. Concentrated on butrans and Hysingla appropriate patient types. He likes the option of Hysingla since there is nothing like that on the market, he likes once daily dosing and thinks that abuse deterrent medications are important especially for pain meds.
PLPMDL0020000001	Parma	OH	44129	2/17/2015	No new information learned on this call.
PLPMDL0020000001	Bedford	OH	44146	2/17/2015	No new information learned on this call.
PLPMDL0020000001	Brooklyn	OH	44144	2/17/2015	Reviewed OxyContin formulary coverage along with Hysingla ER and Butrans for those patients failing on present therapy requiring around the clock analgesia, said ok will continue to consider for appropriate patients, invited to upcoming program
PLPMDL0020000001	Brooklyn	OH	44144	2/17/2015	Quick review of OxyContin every 12hours along with Hysingla ER and Butrans for those patients requiring around the clock analgesia, said ok, will consider for appropriate patients, invited to upcoming program.
PLPMDL0020000001	Akron	OH	44312	2/17/2015	Led off with the introduction to hysingla discussing q24, no APAP, abuse deterrent hydrocodone. Reviewed dosing, conversions and appropriate patient profiles. I asked dr if he thinks that he has a patient or two currently on Norco or lortab that might be appropriate for hysingla? Dr said he thinks it's going to do well and can already think of a patient or two. Reviewed insurance and copay cards. Discussed Butrans Helen profile and made a case for his cox 2 inhibitor patients he said he has some of. Discussed oxycotin placement for our currently on IR oxycodone or percocet who meet the indication with daily, around the clock pain.
PLPMDL0020000001	Cleveland	OH	44195	2/17/2015	Reviewed OxyContin every 12hours, formulary along with Butrans and Hysingla ER for those patients failing on present therapy requiring around the clock analgesia. said ok, will continue to prescribe for appropriate patients. will be attending program
PLPMDL0020000001	Akron	OH	44312	2/17/2015	Led off conversation discussing appropriate patients for appropriate products. Reviewed the Helen profile for Butrans and discussed how patients that are on cox 2 inhibitors around the clock and in pain who meet the indication may also be appropriate for Butrans. Introduced hysingla reviewing the attributes, q24, no APAP, conversions and patient profiles. Dr said he will give it a shot and knows the risks associated with APAP. Reviewed carol profile quickly and told dr to just find one patient per product. Reviewed insurance coverage for commercial insurance and discussed patient savings cards. Dr Taylor said that he will also see if he thinks a patient may also be appropriate for the Norco pills that he might write it for those patients as well. I told dr that hysingla is abuse deterrent, not abuse proof. Dr said he understands and will give it a shot.
PLPMDL0020000001	Akron	OH	44312	2/17/2015	Led off conversation discussing appropriate patients for appropriate products. Reviewed the Helen profile for Butrans and discussed how patients that are on cox 2 inhibitors around the clock and in pain who meet the indication may also be appropriate for Butrans. Introduced hysingla reviewing the attributes, q24, no APAP, conversions and patient profiles. Dr said he will give it a shot and knows the risks associated with APAP. Reviewed carol profile quickly and told dr to just find one patient per product. Reviewed insurance coverage for commercial insurance and discussed patient savings cards.
PLPMDL0020000001	Berea	OH	44017	2/17/2015	No new information learned on this call.
PLPMDL0020000001	Cleveland	OH	44102	2/17/2015	Reviewed Hysingla ER along with OxyContin and Butrans, said ok, 99% Medicaid
PLPMDL0020000001	Brooklyn	OH	44144	2/17/2015	No new information learned on this call.
PLPMDL0020000001	Mayfield Heights	OH	44124	2/17/2015	No new information learned on this call.
PLPMDL0020000001	North Olmsted	OH	44070	2/17/2015	No new information learned on this call.
PLPMDL0020000001	Cleveland	OH	44130	2/17/2015	He thinks that there was one prescription that was filled for Hysingla... Or turned down he couldn't remember. Short staffed at the moment and unable to check on it. She thinks it is too early to stock until business's picks up
PLPMDL0020000001	Parma	OH	44129	2/17/2015	He has been out of town so Hysingla hasn't been uppermost on his mind. He is however thinking of oxycotin, still no one for butrans.
PLPMDL0020000001	Lyndhurst	OH	44124	2/17/2015	No new information learned on this call. (left Purdue portfolio brochure)
PLPMDL0020000001	Berea	OH	44017	2/17/2015	No new information learned on this call.
PLPMDL0020000001	Mayfield Hts	OH	44124	2/17/2015	No new information learned on this call.
PLPMDL0020000001	Brooklyn	OH	44144	2/17/2015	Reviewed product portfolio No new information learned on this call.
PLPMDL0020000001	Cleveland	OH	44195	2/17/2015	Reviewed OxyContin formulary along with Hysingla ER and Butrans for those patients requiring around the clock analgesia, said ok will be attending program to further discuss
PLPMDL0020000001	Lyndhurst	OH	44124	2/17/2015	No new information learned on this call.
PLPMDL0020000001	Maple Heights	OH	44137	2/17/2015	Introduced Hysingla. Meh said he won't stock it until he sees prescriptions, their patients probably can't afford the branded drugs for a while.
PLPMDL0020000001	Highland Heights	OH	44143	2/17/2015	No new information learned on this call.
PLPMDL0020000001	Parma Heights	OH	44130	2/17/2015	Larissa was very busy but said that she did see a script for Hysingla, but she didn't think it went through. She couldn't remember and didn't have time to look it up. She still won't stock it until this is figured out.
PLPMDL0020000001	Cleveland	OH	44102	2/17/2015	Quick review of OxyContin every 12hours along with Hysingla ER/Butrans for those patients failing on present therapy requiring around the clock analgesia, said OK, invited to upcoming program, Reviewed with Donna RN, said she will help reminding staff.
PLPMDL0020000001	Glendale	OH	45246	2/17/2015	Spoke with John. Discussed Hysingla pharmacy guide. He is concerned with cost. Discussed formulary and Copay program. He said most of their patients have med d. Butrans and OxyContin patient selection. He said he doesn't see Butrans scripts and they do fill some OxyContin.
PLPMDL0020000001	Cleveland	OH	44195	2/17/2015	Reviewed OxyContin formulary status along with Hysingla ER and Butrans for those patients failing on present therapy requiring around the clock analgesia. Said ok will be attending program
PLPMDL0020000001	Barberton	OH	44203	2/18/2015	Introduced hysingla. Dr said he heard of it but hasn't tried it yet. Reviewed attributes and asked the doctor how he felt so far by checking in. Dr said he could see himself using it. We talked about how he would address the patient hesitant to take it that was taking several immediate release product to a once a day. Dr said his goal is to convert to extended release sooner. When asked when that was he said 3 or 4 times a day. Dr. Said if patient is tolerate to the molecule he will try hysingla per our indication. Highlighted Butrans during conversation and OxyCotin
PLPMDL0020000001	Beachwood	OH	44122	2/18/2015	She said they are still thinking about who the right patients are for Hysingla. She said it should be soon that they get used to having this option. Reminded her that butrans has 5 strengths.
PLPMDL0020000001	Cleveland	OH	44195	2/18/2015	Reviewed Butrans Med D coverage along with Hysingla ER Formulary coverage, said ok will consider for appropriate patients
PLPMDL0020000001	Barberton	OH	44203	2/18/2015	Spoke to Michele he nurse about finding patient s appropriae for hysingla. Reviewed attributes and how to convert. Covered managed care. Spoke about appropriate patient for hysingla and Butrans. Reviewed few attributes and covered managed care. Dr said he will write the product.
PLPMDL0020000001	Fairlawn	OH	44333	2/18/2015	Spoke with Rachel the pharmacist about hysingla Discussing attributes and physicians asking to have targets stocked. I showed her the pharmacy piece and asked her to stock and if individual target stores have the ability to order and she said they do. Rachel said to follow up in a week or two and she will consider ordering. Discussed Butrans attributes and oxycotin dosing with appropriate patients.
PLPMDL0020000001	University Hts	OH	44118	2/18/2015	Reviewed Butrans Med D Coverage along with OxyContin every 12hours along with Hysingla ER for those patients failing on present therapy requiring around the clock analgesia. said ok Will continue to consider for appropriate patients
PLPMDL0020000001	Solon	OH	44139	2/18/2015	He has written two prescriptions for Hysingla. One went through, the other went to a Walgreens where they told him that it would be a week long wait. I told him that right now Walgreens is the best bet and last week they were still getting their stock in. The patient is on something else and will go back there they think tomorrow to get their Hysingla. He would like to know where else is stocking so he can direct patients there. He believes that initially he will be writing mostly the 40-60. Quick reminder to still keep an eye out for oxycotin and butrans appropriate patients as he gets used to having Hysingla in his arsenal.<font color=blue><b>CHUDAKOB's query on 02/28/2015</b></font>-Kathy, you can show him the stores that stock Hysingla around him by using the iPad. A memo came out on this. Do you recall? This may help.<font color=green><b>LARAWKA's response on 03/01/2015</b></font>-Yes<font color=blue><b>CHUDAKOB closed the query on 03/03/2015</b></font>
PLPMDL0020000001	Beachwood	OH	44122	2/18/2015	He still doesn't have Hysingla uppermost on his mind but he believes he will find appropriate patient. It is a good option for his patients but almost wishes that it was q12 dosing because patients are really used to dosing pain differently. He likes the idea, but is still figuring out its place in his practice. Reminded him that, butrans has place in his practice before or after tramadol.
PLPMDL0020000001	Akron	OH	44313	2/18/2015	No new information learned on this call.
PLPMDL0020000001	Stow	OH	44224	2/18/2015	No new information learned on this call.
PLPMDL0020000001	Cleveland	OH	44195	2/18/2015	No new information learned on this call.
PLPMDL0020000001	Cleveland	OH	44195	2/18/2015	Confirmed attendance for upcoming program, No new information learned on this call.
PLPMDL0020000001	Solon	OH	44139	2/18/2015	She is happy to hear that Doctor M will be writing Hysingla and as soon as she sees a prescription she will stock it.
PLPMDL0020000001	Cleveland	OH	44128	2/18/2015	Paul said that he can't proactively stock c2's because then he can't return it if it doesn't move. It takes one day to get in and he will stock the ordered strength.
PLPMDL0020000001	Euclid	OH	44123	2/18/2015	Met with pharmacy mgr Mike. Using Purdue portfolio trifold, introduced Hysingla ER as newest addition to Purdue's Extended Release products. Discussed, left Hysingla ER pharmacists guide & stocking brochure/NDC guide. Showed pharmacy request stocking forms from Euclid Pain Mgt & Dr DeMico Euclid practice. Asked him to. Preorder 1 bottle of 20mg, and 1 bottle 40 mg. He replied with a "maybe." He wants to read over literature more.
PLPMDL0020000001	Solon	OH	44139	2/18/2015	Kevin said that he is glad to hear the Doctor. M will be writing Hysingla, as soon as he sees prescriptions he will consider stocking it. Opioids aren't what they see as often as other meds. M
PLPMDL0020000001	Cleveland	OH	44127	2/18/2015	Reviewed Butrans and Hysingla ER, said ok, sends to pain mgmt.
PLPMDL0020000001	Northfield	OH	44067	2/18/2015	No new information learned on this call.
PLPMDL0020000001	Akron	OH	44333	2/18/2015	No new information learned on this call.
PLPMDL0020000001	Euclid	OH	44123	2/18/2015	Met with pharmacist Jeff Kline. Introduced Hysingla ER as addition to Purdue's extended release portfolio. Discussed, left Hysingla ER pharmacists guide & NDC brochure/FPI. Asked Jeff to preorder Hysingla ER after showing signed pharmacy stocking requests from pain specialists in area. He says he & Mary (pharmacy mgr) will NOT pre order. They must have script first.
PLPMDL0020000001	Cleveland	OH	44103	2/18/2015	No new information learned on this call.
PLPMDL0020000001	Fairlawn	OH	44333	2/18/2015	Checked with Jessica to see if she has dispensed any hysingla or have any patients pending with insurance? Jessica said she hasn't had any and asked about insurance coverage? Discussed commercial coverage and the situation with BWC and Caresource.

PPLPMDL0020000001	Uniontown	OH	44685	2/18/2015	Called to confirm stocking of hysingla and Kim the pharmacist told me that she ordered the 20-40mg and has them on the shelf.
PPLPMDL0020000001	Cleveland	OH	44103	2/18/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	2/18/2015	Submitted medical services yellow card request based on drs question about how alcohol might affect the 24 hour efficacy of hysingla. Reviewed patient profiles for Butrans, oxycontin and Butrans and dr wanted all of them for review. Dr said he has a patient who he might try on hysingla later today.
PPLPMDL0020000001	Warrensville Heights	OH	44122	2/18/2015	No new information learned on this call.
PPLPMDL0020000001	Bedford	OH	44146	2/18/2015	OxyContin-dr said he goes to after pt has been on Percocet 80mg/day and increasing pain/dose-sees a lot of musculoskeletal pain-went over low back pain Maggie-dr said great pt and prescribes OxyContin there, dr said he likes the abuse deterrent characteristics for his pts-reminded abuse can still happen; Butrans-dr said he sees a great need for it especially with his elderly pts-agreed and went over no dosage adjustment for elderly and renal-fair balanced with respiratory depression concerns and monitor the pt; Dr wanted to talk about Hysingla and I told him Cathy will be in soon to discuss it
PPLPMDL0020000001	Euclid	OH	44119	2/18/2015	Lunch with entire pain floor: nurses, nursing supervisor, Office mgr. Introduced Hysingla ER as addition to Purdue's extended release opioid portfolio. Discussion included single entity opioids, first - OxyContin. Reinforced patients on immediate release oxycodone, pain not controlled, tier 1, 3 abuse deterrent labeling, q 12h dosing schedule. Next, Hysingla ER. Using core vis aid, hit a few key points on each page. Presented pivotal trial data, adverse events, how to titrate, how to write. Discussed current formulary status, trial, savings. Paul says he will work on finding commercially covered patients to convert to Hysingla ER. He likes the q24 h dosing and the straightforward 1:1 conversion from immediate release hydrocodone products. Reinforced Butrans for opioid naivpatients or patients taking 3-4 Tramadol daily, pain not controlled. Paul asked about rescue medication - "in the beginning" so patients don't freak out about 1 tablet daily; discussed use of immediate release oxycodone as rescue medication in Hysingla ER pivotal trial details. Paul signed a pharmacy stocking request form. Paul says he will look for patients on commercial insurance, or medicaid with prior auth (possible denial discussed)
PPLPMDL0020000001	Euclid	OH	44132	2/18/2015	Liz not in until after 1 pm today. met with medical assistant Karen. Discussed Purdue's portfolio of Extended Release opioids, and recent addition of Hysingla ER. Left literature for Liz including Hysingla ER fpi, titration guide, Purdue tri-fold portfolio.
PPLPMDL0020000001	Euclid	OH	44119	2/18/2015	Lunch with pain management floor: nursing supervisor, nurses, Office Mgr. Introduced Hysingla ER as addition to Purdue's Extended Release products. Discussion including tier 1, 3, abuse deterrent labeling for both OxyContin and Hysingla ER. Summarized Butrans scheduling, dosing and patient types. Left Cover my Meds flashcard. The nurses were excited about this resource. Dr. Saeed: Butrans patient types addressed first and product: single entity, CII, 1 x week. Dr. asked how many refills permitted? I responded, up to 5 refills, can be called/faxed in. Reminder of access for BWC patients and excellent formulary status. Discussed Hysingla ER pivotal trial, adverse events, fair balance. how to titrate, how to write. trial, savings and why they should focus on commercially covered patient for Hysingla ER. Commendate Medicaid will need prior authorization and may get denied. OxyContin, for patients uncontrolled on immediate release oxycodone. Asked dr if he can find patients on immediate release hydrocodone, not controlled, who can benefit from q 24h dosing schedule? he said he will look for patients.
PPLPMDL0020000001	Solon	OH	44139	2/18/2015	Had him sign pharmacy stocking request sheet. Doctor said that he has been getting more experience with butrans. He typically uses it after tramadol. He would not use it for opioid naive patient. If patient needs more than 40 mg per day of IR he typically refers to pain management. He prefers hydrocodone to Oxycodone so there is a chance he could find the right patient for Hysingla but probably not oxycontin. He was interested to hear more about the abuse deterrent properties. He understands abuse is still possible, but for the right patient ER does make sense.
PPLPMDL0020000001	Barberton	OH	44203	2/18/2015	Pharmacist said if she gets a request for a patient coming in on a specific day w a specific dose she may consider stocking with out a script. Reviewed dosing and attributes. Reviewed abuse potential of all opioids including my products. She gave the recommendation of having the doctors write out every 24 hours and not q24.
PPLPMDL0020000001	Cleveland	OH	44102	2/18/2015	Reviewed Butrans Med D Coverage along with OxyContin every 12hours along with Hysingla ER for those patients failing on present therapy requiring around the clock analgesia. said ok, Donna said she will help remind Dr.
PPLPMDL0020000001	Cleveland	OH	44195	2/18/2015	Reviewed Butrans Med D Coverage along with OxyContin every 12hours along with Hysingla ER for those patients failing on present therapy requiring around the clock analgesia. said ok Will be attending program
PPLPMDL0020000001	Munroe Falls	OH	44262	2/18/2015	Introduction to office-went over quick Butrans in tramadol pts when meeting threshold-dr agreed good choice and will look for those pts; OxyContin-keep it simple when using IR oxycodone and reaching ATC dosing-transition to Q12 hr OxyContin and supplement IR oxycodone for breakthrough-dr said it makes sense
PPLPMDL0020000001	Barberton	OH	44203	2/18/2015	Worked w deana the. Ruse in IDE tidying hysingla patients. The two patients didn't show up for their appts. Reviewed attributes and managed care.
PPLPMDL0020000001	Solon	OH	44139	2/18/2015	Doctor initially felt that ER medications should not be on the market. He feels that is too much medicine in one tablet. After long discussion about people that abuse he was able to see why for the right patient type, ER meds like oxycontin and Hysingla might be appropriate, although still abusable. He is more likely to try butrans for his patients in around the clock pain. M
PPLPMDL0020000001	Lakewood	OH	44107	2/19/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/19/2015	Short discussion about how he should be choosing candidates for Butrans and hysingla. Dr admitted that not everyone is a candidate for Butrans who's on hydrocodone and that's where he sees hysingla being useful. I agreed that he's looking at it the right way and to look as far as Butrans to also look at patients on cox 2 inhibitors and tramadol.
PPLPMDL0020000001	Cleveland	OH	44195	2/19/2015	Reviewed Product portfolio, formulary and savings cards, said ok will consider for appropriate patients<font color=blue><b>CHUDAKOB added notes on 03/01/2015</b></font>Mark, a review of the product portfolio doe snot give any specifics about the products you discussed. Please make sure your notes are a little more specific about the discussions you had.
PPLPMDL0020000001	Cleveland	OH	44113	2/19/2015	Reviewed Hysingla ER and Butrans for those appropriate patients, said Ok will continue to prescribe for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44195	2/19/2015	Reviewed product portfolio, savings cards, formulary, said he will consider for appropriate patients
PPLPMDL0020000001	Stow	OH	44224	2/19/2015	Reviewed attributes, dosing and conversions for all products. Led with Butrans attributes, dosing and conversions and reviewed Helen profile. I asked dr to continue to please lee ok for tramadol or even cox2 inhibitor patients as candidates who meet the indication. Introduced hysingla ER discussing attributes, dosing, q24, no APAP and abuse deterrent properties. Reviewed appropriate patients through profiles and asked if she would write? Dr said it sounds like a really great product and likes the once a day with no APAP. Dr said she will look for patients on Norco who have pain around the clock. Discussed who is appropriate for Oxycontin and she said she has a couple of patients on percocet who she knows she needs to convert to oxycontin and said she will do it when they come in next.
PPLPMDL0020000001	Cuyahoga Falls	OH	44224	2/19/2015	Discussed all products being specific with appropriate patient types for each product. Discussed in detail Butrans attributes, dosing and specific patient type candidates with Helen. Introduced hysingla ER reviewing indication, q24, abuse deterrent and no APAP. Reviewed 24 hour peak plasma levels from MVA, AE's from MVA and patient profiles. Dr said that she is going to refer out almost all of her her oain patients to pain management because of all the restrictions like having to do ORRs reports every 3 months and having patients come in every month for their prescription. I told dr I'll take whatever % of her patients she doesn't send to pain management that I'll gladly take for business for one of my products. Dr agreed that's fair. I asked dr if she would write hysingla for a Norco or lortab oqtlent who is appropriate and she said she would.
PPLPMDL0020000001	Cleveland	OH	44113	2/19/2015	Reviewed OxyContin formulary coverage along with Hysingla ER and Butrans for those patients requiring around the clock analgesia that are failing on present therapy. Said Ok will continue to consider and encourage colleagues to prescribe for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44144	2/19/2015	Reviewed OxyContin every 12hours,formulary coverage along with Hysingla ER/Butrans for those patients requiring around the clock analgesia that are failing on present therapy. Savings cards, Formulary coverage. Said ok will consider for appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44195	2/19/2015	No new information learned on this call.
PPLPMDL0020000001	Tallmadge	OH	44278	2/19/2015	No new information learned on this call.
PPLPMDL0020000001	CLEVELAND	OH	44195	2/19/2015	Reviewed w/Troy/Vicki OxyContin/Hysingla ER and Butrans Savings cards
PPLPMDL0020000001	Cleveland	OH	44195	2/19/2015	Visited Onc. Dept. OxyContin/Hysingla ER and Butrans info
PPLPMDL0020000001	Lakewood	OH	44107	2/19/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44103	2/19/2015	Reviewed Hysingla ER/OxyContin, No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44305	2/19/2015	Spoke to pharmacist about hysingla ER and asked her if she would stock 20-40mg? She said that she doesn't order scheduled medicines and that the pharmacy manager Jeff does and he in all day tomorrow.
PPLPMDL0020000001	Lakewood	OH	44107	2/19/2015	Talked about hysingla program.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	2/19/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	2/19/2015	Discussed manged care. Reviewed hysingla and appropr patient type. Dr said he will write And allowed me to work w virginia next week.
PPLPMDL0020000001	Akron	OH	44305	2/19/2015	Discussed Helen profile again and asked him to just choose those who he knows have pain on a daily, around the clock basis on tramadol or cox 2 inhibitors. I asked dr if he has any of those and she said he does and will continue to look. Discussed dr and his wife the office manager to the hysingla event on 2/25. Dr said he had an event that night but will consider it because dr Ali is speaking. I told dr to please identify just one patient on Norco or lortab who are in pain on a daily, around the clock basis and write hysingla ER. Dr said ok. Left him the initiation and titration guide.
PPLPMDL0020000001	Cleveland	OH	44115	2/19/2015	Quick review of Butrans Med D coverage along with Hysingla ER for those patients failing on present therapy requiring around the clock analgesia. said Ok, Book lunch w/Martha to further discuss<font color=blue><b>CHUDAKOB's query on 03/01/2015</b></font>Where is the OxyContin discussion? You put it down as a secondary presentation.<font color=green><b>GUTKOMA's response on 03/02/2015</b></font>Ok, forgot to add. Discussed OxyContin formulary coverage. while discussing Butrans Med D<font color=blue><b>CHUDAKOB added notes on 03/03/2015</b></font>Ok. Thanks,
PPLPMDL0020000001	Independence	OH	44131	2/20/2015	Doctor said that a product like Hysingla should have been developed years ago. People developed the bad habits on treating around the clock pain. We reviewed appropriate patient type for Hysingla using Phil. Reviewed appropriate patient types or butrans using PAm. He said that he needs to think of butrans, and despite my reminders hasn't done it yet. He does see a place in his practice for butrans and Hysingla. Oxycontin is a great product that works well, however he probably will not write for that.
PPLPMDL0020000001	Lakewood	OH	44107	2/20/2015	No new information learned on this call.
PPLPMDL0020000001	Stow	OH	44224	2/20/2015	Introduced hysingla discussing attributes and patient profiles withy conversions. Dr Geiger said he thinks it's a great product and sees it being used in conjunction with a PRN IR hydrocodone. I told dr that if patients need IR hydrocodone for breakthrough pain they can use it with hysingla. I discussed with dr patients appropriate though who are taking Norco who have had it written prn but end up taking it 3-6 times a day and still in pain. Those are appropriate patients. Dr said they don't have many of them. I told dr that they might have more than they know and dr said maybe I'm right. Dr said it's going to take time to get coverage on medicaid and BWC. Discussed copy cards and trial offer.
PPLPMDL0020000001	Cleveland	OH	44113	2/20/2015	Reviewed Hysingla ER/Butrans for those patients requiring around the clock analgesia that are failing on present therapy, OxyContin savings cards, said ok will consider for appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44114	2/20/2015	Reviewed Hysinglar ER/Butrans for those patients requiring around the clock analgesia that are failing on present therapy, OxyContin savings cards, said ok will consider for appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44113	2/20/2015	Reviewed OxyContin formulary coverage along with Hysingla ER and Butrans for those patients requiring around the clock analgesia that are failing on present therapy. Said ok will continue to consider for appropriate
PPLPMDL0020000001	Cleveland	OH	44113	2/20/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44111	2/20/2015	No new information learned on this call.
PPLPMDL0020000001	Stow	OH	44224	2/20/2015	Spoke with Corey again about stocking hysingla stocking and he said he hasn't done it yet. He said he probably will not until he sees a prescription. Explained the dosing and that it's being prescribed in the area and he should stock. Corey said he must wait due to acme policies w/ new products.
PPLPMDL0020000001	Cleveland	OH	44113	2/20/2015	No new information learned on this call.



PPLPMDL0020000001	Lakewood	OH	44107	2/20/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44135	2/20/2015	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	2/20/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44114	2/20/2015	No new information learned on this call.
PPLPMDL0020000001	Green	OH	44232	2/20/2015	Confirmed with Jenna the pharmacist that hysingla 20-40mg has been ordered and they have it on the shelf. Jenna said she got a couple of different stocking requests from physicians and that's what gave her the green light to stock.
PPLPMDL0020000001	LAKEWOOD	OH	44107	2/20/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland Hts	OH	44118	2/20/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44312	2/20/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	2/20/2015	Butrans-discussed when get to 3 tablets of tramadol and isn't adequate for pain relief-dr said he will consider it; OxyContin-3 tabs of oxycodone and transition-will consider it earlier
PPLPMDL0020000001	Cleveland	OH	44113	2/20/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	2/20/2015	No new information learned on this call.
PPLPMDL0020000001	Independence	OH	44131	2/20/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44102	2/20/2015	No new information learned on this call.
PPLPMDL0020000001	Rocky river	OH	44116	2/20/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44111	2/20/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	2/20/2015	Quick reminders since saw her recently-she said she is rxing Butrans more and getting good results; OxyContin-look for pts already established on oxycodone to transition to OxyContin
PPLPMDL0020000001	Stow	OH	44224	2/20/2015	No new information learned on this call.
PPLPMDL0020000001	Stow	OH	44224	2/20/2015	Discussed Butrans Helen profile, dosing and titration and asked her to also consider cox 2 inhibitors.sabrina said she really likes Butrans but it's just tough based on their patients and their insurance. She said that they have a lot of UHC and medicaid. Discussed CareSource PA criteria, BWC and commercial insurance like medical mutual. Introduced hysingla attributes, patient profiles, q24, no APAP, conversions and dosing. Sabrina said it sounds like a products that is needed and asked about insurance. Discussed commercial insurance plans and copy cards and asked her if she will write it? Sabrina said she will try.
PPLPMDL0020000001	Cleveland	OH	44113	2/20/2015	Reviewed OxyContin formulary status along with Hysingla ER and Butrans for those patient that are requiring around the clock analgesia, that are failing on present therapy, said ok will consider
PPLPMDL0020000001	Cleveland	OH	44113	2/20/2015	Introduction to dr and office-OxyContin-went over lbp pt who is on 3 tabs of Percocet and not getting adequate pain relief-dr said he is rxing it there and doesn't like going to higher doses-LA opioids scare him-went over abuse deterrent properties and dr agreed a good thing Purdue did-asked dr for pts in practice who are approaching 3 tabs of Percocet and transitioning to OxyContin; Butrans-dr said he is nervous giving his pts a LA opioid pain product such as Butrans-went over elderly renal pts with ATC pain-dr said he would consider-font color=blue<=font>CHUDAKOB's query on 02/26/2015<=font>Scott. expect for some very common abbreviations like Dr. please spell out all words so there is no confusion on what was meant. For example I had never seen the abbreviation lfont.<=font>color=green<=font>MEREDSC's response on 02/26/2015<=font>No problem<=font>color=blue<=font>CHUDAKOB added notes on 03/03/2015<=font>b<=font>Thank you!
PPLPMDL0020000001	Uniontown	OH	44312	2/20/2015	Good discussion in his office about how he's going to identify patients for Butrans and the new hysingla. Discussed Helen profile for Butrans and also looking for patients on cox 2 inhibitors who also have daily, around the clock pain. Dr agreed and said he will continue to write. Introduced hysingla attributes, q24,no APAP, abuse deterrent, and conversions along with insurance coverage and copy cards. Dr said he thinks it will be a useful product and plans to look at writing. I asked dr to attend the program next week but already has committed to another.
PPLPMDL0020000001	Stow	OH	44224	2/20/2015	Jon is a new NP in the office. Discussed Butrans attributes, conversions, patient types like Helen. Jon said he has written it a few times and really like the schedule 3,7 day transdermal patch. He wanted to know about insurance coverage and discussed all coverage. Jon said he didn't know about caresource PA and will continue to use. Discussed hysingla attributes, q24, no APAP and abuse deterrent properties. Discussed patient profiles, and asked him if he can find a place? Jon said that he will do his best and will have to hunt for the right commercially insured patient
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/20/2015	Discussed the oriens dr is placing on Butrans and how there might be a space for hysingla. Dr said he will not be writing hysingla and that it's doing more harm than good. I asked dr how it's doing more harm than good for a patient taking 30-40mg of Norco a day on a q4 or q6 dosing regimen and is still in pain and converting them to a q24 ER hydrocodone? Dr said his product for those patients is Butrans and said the outcome data for ER hydrocodone shows a higher mortality rate. Told dr I don't know anything about that and asked him to focus on Butrans or oxycontin then. Dr said ok and said he will not make it to the program next week.
PPLPMDL0020000001	Akron	OH	44333	2/23/2015	Elise told me that she wrote a Butrans prescription today. I asked her what the patient was taking prior and she said Norco and she started him on 10mcg. Elise said that patient has commercial UHC and figures he can get it. I asked if she gave a copy card and she said she did. I told her that could have also been an appropriate patient for hysingla and reviewed the doses and conversions. Elise told me that she forgot about it but still wants him to be on Butrans because he doesn't like taking pills. Discussed appropriate patients for oxycontin as well and conversions from IR Oxycodone or percocet to oxycontin q12.
PPLPMDL0020000001	Parma	OH	44129	2/23/2015	Review portfolio of products as Intro to Hysingla. Reviewed Hysingla and appropriate patient type. He said that he has to think about this a bit. Meh does believe in ER for patients in around the clock pain. He has convinced a few of his patients to switch to ER but it isn't always easy. He wondered about switching from Oxycodone. Reviewed conversion chart.
PPLPMDL0020000001	Cleveland	OH	44195	2/23/2015	Quick review of Butrans and Hysingla ER, will consider for appropriate patients,
PPLPMDL0020000001	Cleveland	OH	44113	2/23/2015	Reviewed Product portfolio, formulary grids and savings cards, said ok will continue to recommend and assist when applicable for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44195	2/23/2015	Reviewed OxyContin formulary status along with Hysingla ER and Butrans for those patients requiring around the clock analgesia that are failing on present therapy. Reviewed Initiation/Titration, savings cards. Said ok will consider for appropriate patients,
PPLPMDL0020000001	Cleveland	OH	44113	2/23/2015	Reviewed Hysingla ER for those patients requiring around the clock analgesia that are failing on present therapy, Formulary grids, Initiation/Titration, Along with Butrans Med D coverage, Said ok will consider for appropriate patients,
PPLPMDL0020000001	akron	OH	44333	2/23/2015	Dr told me that he wrote a prescription for Hysingla for a patient taking 10mg of norco q6. Dr said that the patient has medicare and Bc/BS secondary and it cost the patient approximately \$300. I discussed the commercial insurance coverage and asked him to stick to that. Dr said he will continue to try to use it. Reminded dr about appropriate patient types of hysingla and Butrans for his cox 2 and Tramadol patients.
PPLPMDL0020000001	Cleveland	OH	44195	2/23/2015	Quick review of Hysingla ER and Butrans for those patients failing on present therapy requiring around the clock analgesia, OxyContin reminder, said ok will consider for appropriate patients
PPLPMDL0020000001	Akron	OH	44319	2/23/2015	Discussed attributes for Hysingla, Butrans and oxycontin. Introduced hysingla discussing q24, no APAP and abuse deterrent properties. Discussed appropriate patients already on Norco or lortab and are in pain on a daily, around the clock basis. Discussed owing and conversions. Dr said he thinks this product is needed and said he really likes the q24. Dr said he will look for appropriate patients. Managed care and copy cards. Discussed Butrans schedule 3,7 day transdermal patch and Helen profile review. Dr said he forgot he can call in schedule 3 products and likes that. Reviewed oxycontin appropriate patients and dosing with conversions from IR
PPLPMDL0020000001	Parma	OH	44129	2/23/2015	Asked him to think about a couple of patients he has that are taking 4-5 pills of IR meds during the day. Does he think that any of them would be appropriate for ER meds? Using portfolio piece discussed appropriate patient type for both oxycontin and Hysingla, single entity ER meds with abuse deterrent characteristics. He agreed to keep his eye out for a couple of patients for ER meds.
PPLPMDL0020000001	Cleveland	OH	44195	2/23/2015	Quick review of Product portfolio, Left info with tech. Will review with Angela (New Rph mgr)
PPLPMDL0020000001	Cleveland	OH	44113	2/23/2015	Reviewed with Cecilia, Hysingla ER and stocking request will order when RX is successfully received,
PPLPMDL0020000001	Cleveland	OH	44195	2/23/2015	No new information learned on this call.
PPLPMDL0020000001	Euclid	OH	44117	2/23/2015	Met with med asst at front desk. Left literature for Dr. DeMicco. Reinforced Purdue product portfolio for 3 different types of patients, and 3 different, single entity, extended release opioid options. Reminder to concentrate on commercial/private insurance for Hysingla ER.
PPLPMDL0020000001	Cleveland	OH	44113	2/23/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	2/23/2015	No new information learned on this call.
PPLPMDL0020000001	Berea	OH	44017	2/23/2015	Introduction to office-quick product mentions to dr at window-setup lunch for more discussion on both products
PPLPMDL0020000001	Fairlawn	OH	44333	2/23/2015	Followed up with invite to the program this week for Gilbert. Was told by Jessica she gave it to him and didn't know if he was able to go. Jessica said she has not dispensed any hysingla yet but continues to dispense oxycontin and Butrans.
PPLPMDL0020000001	Akron	OH	44313	2/23/2015	Spike with Jason and told him I had a conversation on my last visit with Tom about hysingla and he was interested into stocking it. I asked Jason if it was ordered IR not and he said he hasn't seen it. Jason said he would discuss it with Tom and decide but usually they wait until they see a prescription.
PPLPMDL0020000001	Akron	OH	44333	2/23/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44319	2/23/2015	Quick introduction to hysingla ER outlining attributes, dosing, conversions, and insurance with copy cards. Dr did not comment on information.
PPLPMDL0020000001	Barberton	OH	44203	2/23/2015	Introduction to office-walked in with dr-OxyContin-discussed when get to 3 IR oxycodone(Percocet) for low back pain pts where go to-dr said he would go to 4-asked him to transition to OxyContin for those pts-dr said it makes sense and will look for more pts; Butrans-discussed when pt on tramadol and getting inadequate pain relief-transition to Butrans-showed transition page in cva-agreed good choice before hydrocodone-dr said 7 day dosing good for pts-asked for pts today coming in with ATC low back pain and/or pts already in practice
PPLPMDL0020000001	Highland Heights	OH	44143	2/23/2015	Spoke with pharmacist PJ - let him know I'm at the Vine St Eastlake location, & Audrey says they got Hysingla ER in @ Highland Hts location. PJ confirmed this; patient was new to them and had to return after 1. They brought in their primary insurance card & after they 2. Activated their Hysingla ER trial & savings card. PJ does not remember which HCP wrote the RX. Detailed him on core messaging, tied 1&3 abuse deterrent labeling, similar to OxyContin; and made sure he saw the Hysingla ER pharmacist guide & NDC brochure/ FPI, which he confirmed he did read through.
PPLPMDL0020000001	Cleveland	OH	44113	2/24/2015	Reviewed Hysingla ER and Butrans for those patients failing on present therapy requiring around the clock analgesia, Initiation,Titration, Formulary opportunity and Savings cards, Said Ok will consider if applicable for appropriate patients that have coverage
PPLPMDL0020000001	Uniontown	OH	44685	2/24/2015	Discussed oxycontin and his thoughts on converting people from IR oxycodone or percocet who have daily, around the clock pain. Dr said he doesn't know what it is but said that he can't seem to get past the bad reputation oxycontin has had in the past. I asked him why that is and discussed the reformation in 2010. Dr said he knows he shouldn't because he knows it works. Discussed dosing and conversions and appropriate patients. Dr said he will continue to feel better about using it. Reviewed hysingla and dr said he's read over the information I've left. Reviewed attributes, dosing, conversions and cost with insurance and copy cards. Reviewed appropriate patient types with all products and discussed Helen profile for Butrans and asked him to also write it for his patients on products like Celebrex around the clock.
PPLPMDL0020000001	Parma	OH	44129	2/24/2015	Reviewed portfolio piece and asked him if he has thought of Hysingla since we last talked. He said that he has thought of it but hasn't written. Asked when he thought of it, he said when Norco patient came in. Reviewed formulary situation and appropriate patient type using Sonia. He still has been having good success with butrans.
PPLPMDL0020000001	Parma	OH	44129	2/24/2015	Used portfolio piece to quickly review portfolio and appropriate patients and commercial formulary where Hysingla is easiest to get.

PPLPMDL0020000001	Parma	OH	44129	2/24/2015	Quickly reviewed pain portfolio piece and appropriate patient type for each, reviewed butrans and appropriate patient type thinking that it is more likely the patient he sees right now. He is aware of oxycontin, thinks it works but doesn't write it. He has not really written for ER meds so it will take some getting used to.
PPLPMDL0020000001	Cleveland	OH	44106	2/24/2015	Had lunch with Pain mgmt dept..discussed product portfolio and positioned products for utilization, Agreed to continue to consider for appropriate patients No new information learned on this call.
	Uniontown	OH	44685	2/24/2015	Abby said that she was going to call me today because she wrote a patient for Butrans and didn't know what dose to start them on. She said that the patient was taking about 70mg morphine equivalent and she started on 10mcg. I showed her the conversation scale and told her she's correct and that at that dose or morphine equivalent she will most likely need to titrate to 15mcg pretty soon. Abby said she agreed. Discussed appropriate patients and asked for continued business. Abby said she can now write her own prescriptions and don't need the dr. Discussed hysingla ER attributes, dosing, conversions,q24, abuse deterrent properties. Reviewing appropriate patient types and those taking Norco or lortab around the clock. Discussed oxycontin doses and conversions as well as those to be dosed q12. Abby said she likes it and it works well.
PPLPMDL0020000001	Cleveland	OH	44106	2/24/2015	Reviewed Hysingla ER and Butrans for those patients failing on present therapy requiring around the clock analgesia, Initiation,Titration, Formulary opportunity and Savings cards, Said Ok will consider for appropriate patients that have formulary coverage
PPLPMDL0020000001	Cleveland	OH	44106	2/24/2015	Reviewed OxyContin every 12hours along with Hysingla ER and Butrans for those patients failing on present therapy requiring around the clock analgesia, Initiation,Titration, Formulary opportunity and Savings cards, Said Ok will consider for appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44106	2/24/2015	Reviewed OxyContin every 12hours along with Hysingla ER and Butrans for those patients failing on present therapy requiring around the clock analgesia, Initiation,Titration, Formulary opportunity and Savings cards, Said Ok will consider if applicable for appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44106	2/24/2015	Reviewed OxyContin every 12hours along with Hysingla ER and Butrans for those patients failing on present therapy requiring around the clock analgesia, Initiation,Titration, Formulary opportunity and Savings cards, Said Ok will consider if applicable for appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44106	2/24/2015	Reviewed OxyContin every 12hours along with Hysingla ER and Butrans for those patients failing on present therapy requiring around the clock analgesia, Initiation,Titration, Formulary opportunity and Savings cards, Said Ok will consider if applicable for appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44113	2/24/2015	Reviewed Hysingla ER and Butrans for those patients failing on present therapy requiring around the clock analgesia, Initiation,Titration, Formulary opportunity and Savings cards, Said Ok will consider if applicable for appropriate patients that are covered.
PPLPMDL0020000001	Akron	OH	44310	2/24/2015	Dr said that he wrote two hysingla ER prescriptions and said he knows that he wrote one for a medicare patient and found out it was too expensive for him. Dr said the other was commercial and taking Norco around the clock and knew it was appropriate. Discussed insurance,copy cards, and appropriate patients with q24. Reminded dr that the q13 dosing may be appropriate for come patients on IR oxycodone around the clock. Dr said he tries not to write oxycontin but may see those patients better suited for hysingla. Reminded dr to continue Butrans for those tramadol and cox 2 inhibitor patients. <font color=blue><b>CHUDAKOB's query on 03/06/2015</b></font>-Cliff, what do we have that is dosed q13h?<font color=green><b>REICHCL's response on 03/09/2015</b></font>-Q12<font color=blue><b>CHUDAKOB added notes on 03/09/2015</b></font>-Thanks
PPLPMDL0020000001	Parma	OH	44134	2/24/2015	Reviewed Hysingla and appropriate patient type. He said that he thinks he would only write the 20's, 30's, maybe a little 40. Let him know that rite aid up the street has it in stock. Also reviewed the commercial plans where coverage is the best. Discussed cover my meds with Val.
PPLPMDL0020000001	Uniontown	OH	44685	2/24/2015	Spoke with dr about him attending the hysingla ER program with dr Moufawad at Lisa's program. Dr said he really likes hysingla and thinks it's going to be a great product but it's only for commercial patients for now. Discussed hysingla ER attributes, doses, conversions and appropriate patients. Dr said that he knows that it is NOT the same as Zohydro and likes that's it's abuse deterrent. Discussed Butrans and oxycontin patient types with Helen for Butrans and Carole for oxycontin. I asked dr to please use the products for the appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44106	2/24/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44106	2/24/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44103	2/24/2015	Reviewed product portfolio with Brandon, said he will relay info to staff, will be leaving for new store in Tiffin.
PPLPMDL0020000001	Parma	OH	44129	2/24/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	2/24/2015	Spike with pharmacist Melissa about hysingla ER and told her that I've spoken with Mary and Mike about stocking. Melissa dais they filled their first one this morning and it was for dr Cremer for hysingla 40mg. She said that she will order in the 40mg for refills in the future.
PPLPMDL0020000001	Lyndhurst	OH	44124	2/24/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44310	2/24/2015	Introduction to office-quick reminders on OxyContin and Butrans-said next time can get more time
PPLPMDL0020000001	Barberton	OH	44203	2/24/2015	Discussed patients on pain medications. Dr said he is trying to write less pain medications and he isn't taking caresource anymore per summa hospital. We talked about Butrans and a few attributes and mNaged care. Dis used hysingla, appropriTe patients and covered managed care.
PPLPMDL0020000001	Lyndhurst	OH	44124	2/24/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44134	2/24/2015	Marco said that he has Hysingla 30 only at this time because 20 and 40 weren't available at McKesson. Told him that a few weeks ago there were stocking issues that are taken care of now. He said that he will order them tomorrow .
PPLPMDL0020000001	Barberton	OH	44203	2/24/2015	Reviewed hysingla and Lisa said she would order but to review w manager on Thursday.
PPLPMDL0020000001	Lyndhurst	OH	44124	2/24/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	2/24/2015	Showed him product portfolio piece and which one he has found patient for recently. He hasn't thought of Hysingla since last time I was in. Asked him if he has seen any patients in the last few days that are taking 4 or more Norco? He said maybe. Asked him to think of that patient and if that patient might be appropriate for q24 hydrocodone without Tylenol? He just looked at me. Said that he was glad I stopped in because it reminded him that he has a patient in the hospital that he should give butrans.
PPLPMDL0020000001	Mayfield Heights	OH	44124	2/24/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	2/24/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44305	2/24/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	2/24/2015	No new information learned on this call.
PPLPMDL0020000001	Mayfield Village	OH	44143	2/24/2015	Dr Krishnan already gone for the day. Met with med asst at front window. Reinforced 3 options (purdue portfolio) for patients that need daily opioid, around the clock long term. Hysingla ER being the newest of my products. Left Hysingla ER fpi, titration guide, and Purdue trifold for Dr. Krishnan.
PPLPMDL0020000001	Akron	OH	44333	2/24/2015	Lunch and introduction to office-went to Laham speaker program-spoke about appropriate pts-oxycodone pt not being controlled for pain at 3-4 tabs-transition to OxyContin q12hr-dr agreed good place to switch; Butrans-transition from NSAIDs and tramadol 200-300mg-dr agreed good choice before IR oxycodone/hydrocodones
PPLPMDL0020000001	Independence	OH	44131	2/25/2015	Quickly talked to Mary and doctor who were too busy. Handed over portfolio piece and initiation guide and quickly introduced Hysingla. Told them I would be back next week to discuss it further.
PPLPMDL0020000001	Fairlawn	OH	44333	2/25/2015	Discussed all product attributes, dosing and conversions. Discussed appropriate patient types for oxycontin and asked dr if it makes sense to convert a patient who is in pain, around the clock on IR oxycodone or percocet? Dr said it makes sense and that he will continue to write. Reviewed hysingla ER attributes, dosing, q24, conversions and reviewed all patient profiles. Discussed Butrans Helen profile. Dr didn't have much to say.
PPLPMDL0020000001	Cleveland	OH	44114	2/25/2015	Reviewed Butrans/Hysingla for those patients failing on present therapy requiring around the clock analgesia, formulary opportunities along with OxyContin every 12hours, said ok will continue to prescribe for appropriate patients that have coverage.
PPLPMDL0020000001	Westlake	OH	44145	2/25/2015	Discussed hysingla. Doctors concerns were if once a day worked, managed care coverage and his patients acceptance of once a day dosing. We talked about appropriate patient and trying the product to get clinical experience. Reviewed attributes of Hysingla and OxyContin with abuse deter properties. Gave fair balance for possible abuse potential with the products being promoted and all opioids. Reviewed Butrans and when he might use it. Dr positioned Butrans as a more powerful opioid for severe patients, reviewed the cox 2, and Tramadol patients and possibility of abusing Butrans after these products if met the indication, indication was read. Dr was
PPLPMDL0020000001	Cleveland	OH	44114	2/25/2015	Reviewed Butrans/Hysingla for those patients failing on present therapy requiring around the clock analgesia, formulary opportunities along with OxyContin every 12hours, said ok will continue to prescribe for appropriate patients that have coverage.
PPLPMDL0020000001	Cleveland	OH	44195	2/25/2015	Reviewed Butrans/Hysingla for those patients failing on present therapy requiring around the clock analgesia, formulary opportunities, savings cards along with OxyContin every 12hours, said ok will continue to prescribe for appropriate patients that have coverage.
PPLPMDL0020000001	Cleveland	OH	44195	2/25/2015	Reviewed Butrans/Hysingla formulary opportunities along with OxyContin every 12hours, savings cards said ok will continue to prescribe for appropriate patients that have coverage.
PPLPMDL0020000001	Fairlawn	OH	44333	2/25/2015	Provided all attributes for hysingla, oxycontin and Butrans. spoke to her about how she can identify patients for each product. Discussed cost, managed care and copy cards for each product.
PPLPMDL0020000001	Akron	OH	44313	2/25/2015	Introduction to office and dr-reminders for OxyContin when getting to 3 tabs of oxycodone and looking to transition, and Butrans when reaching 3tabs of tramadol and looking for LA opioid
PPLPMDL0020000001	Cleveland	OH	44195	2/25/2015	Reviewed product portfolio, sees mostly acute rx's but will inform staff.No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44105	2/25/2015	Reviewed product portfolio, No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	2/25/2015	No new information learned on this call.
PPLPMDL0020000001	Stow	OH	44224	2/25/2015	Spoke with Jamie about hysingla dispensing and she told me that dr Ali had a patient there to pick up a 20mg prescription. Jamie said the patient had a copy card and it was not expensive. Discussed commercial insurance coverage and Discussed dispensing of Butrans and OxyContin.
PPLPMDL0020000001	North Royalton	OH	44133	2/25/2015	No new information learned on this call.
PPLPMDL0020000001	Bedford	OH	44146	2/25/2015	No new information learned on this call.
PPLPMDL0020000001	Mayfield Heights	OH	44124	2/25/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	2/25/2015	No new information learned on this call.
PPLPMDL0020000001	Solon	OH	44139	2/25/2015	Quick reminder on commercial patient to look for Hysingla and med d patient for butrans.
PPLPMDL0020000001	Strongsville	OH	44136	2/25/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44303	2/25/2015	Checked in with Rod about stocking and dispensing of hysingla. Rod said he has not dispensed any yet and did get his rebate back. Rod said he's still dispensing oxycontin and some patients for Butrans as refills. Discussed copy cards and dosing for butrans and oxycontin.
PPLPMDL0020000001	Cleveland	OH	44130	2/25/2015	He has not found a patient for Hysingla, however the information is still on his desk and he is keeping it in mind as his pain patients come in. He has seen Oxycodone patients, but not the right hydrocodone patients.

PPLPMDL0020000001	Cleveland	OH	44195	2/25/2015	No new information learned on this call.
PPLPMDL0020000001	Lyndhurst	OH	44124	2/25/2015	No new information learned on this call.
PPLPMDL0020000001	Munroe Falls	OH	44262	2/25/2015	No new information learned on this call.
PPLPMDL0020000001	Mayfield Hts	OH	44124	2/25/2015	Breakfast appt. Discussed entire profile of products and patient types for each. Discussed Hysingla ER current formulary status. Also spoke with prior auth coordinator Denise Guinto & she says next time I'm in, bring a formulary grid for her.
PPLPMDL0020000001	Cleveland	OH	44195	2/25/2015	No new information learned on this call.
PPLPMDL0020000001	Bedford	OH	44146	2/25/2015	No new information learned on this call.
PPLPMDL0020000001	Fairlawn	OH	44333	2/25/2015	Spoke with Jessica and Sue about copy cards for all products. Discussed Hysingla copy cards and trial offer. Jessica said they have not dispensed any at his point. Reviewed hysingla commercial plan coverage.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/25/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44312	2/25/2015	No new information learned on this call.
PPLPMDL0020000001	South Euclid	OH	44121	2/25/2015	Met with both nurses at front window. Discussed Purdue's current extended release portfolio. Left Hysingla ER literature for Dr. Tomm, including Purdue portfolio tri fold.. Left Cover my Meds flashcard for nurses; they stated they are already using cover my meds. Left formulary grids/all 3 products.
PPLPMDL0020000001	Akron	OH	44333	2/25/2015	Dr said that he wrote a Butrans script and converted a Zohydro patient to hysingla. Dr said that his Butrans patient was taking low dose Norco and the patient didn't want a patch. Dr said he started on 10mcg. Dr said his converted patient was started on hysingla 40mg and he Ritzmans in Uniontown had it on the shelf. Reviewed again the appropriate patents for each product and discussed managed care and copy cards.
PPLPMDL0020000001	Strongsville	OH	44136	2/25/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44312	2/25/2015	Introduction to office and dr-coffees-OxyContin-concerned in rxing-went over appropriate pts already in practice on norco/Percoct and need LA AtTC control-low back pain pts-dr agreed better choice and will look for in practice; Butrans-dr said he likes the concept of a patch and has tried but little luck-redirected again those pts in practice already who are on 200-300 mg tramadol and not getting adequate relief or can't tolerate Cox 2 or not getting relief-dr said great pts to concentrate on and will continue rxing
PPLPMDL0020000001	Lyndhurst	OH	44124	2/25/2015	Hallway. Discussed patient types for Butrans, OxyContin; then used sonia profile for Hysingla ER. Discussed patients under 65 who are on private/commercial insurance plans. using titration guide, showed conversion from immediate release hydrocodone; which dr says is good/straightforward; then showed conversion from other opioids such as Tramadol. Dr liked and asked if he could keep; I replied yes; he placed in his coat pocket.
PPLPMDL0020000001	South Euclid	OH	44121	2/25/2015	Quick call/no new info learned. left Dr. Loke Purdue portfolio trifold/Hysingla ER titration guide/fpi. Left all 3 product formulary grids.
PPLPMDL0020000001	Akron	OH	44333	2/25/2015	Outlined all attributes for Butrans, hysingla and oxycontin. Discussed patient types and how to initiate dosing for all products, titrate and convert. Reviewed new hysingla q24, no APAP and patient profiles.
PPLPMDL0020000001	South Euclid	OH	44121	2/25/2015	Front window w med asst. Discussed abuse deterrent properties for both OxyContin, Hysingla ER, CII, dosing schedules. For Butrans, CII, 1x week buprenorphine.
PPLPMDL0020000001	Lyndhurst	OH	44124	2/25/2015	Hallway. Discussed Butrans patient type; opioid naive or patient on 3-4 Tramadol daily, pain not controlled; Hysingla ER for patients on immediate release hydrocodone and not controlled; discussed Tier 1, 3 abuse deterrent labeling; conversion; Sarah says the Hysingla ER titration guide very helpful and helpful overall with conversion from other immediate release opioids. Discussed OxyContin Tier 1.3 abuse deterrent properties/dosing.
PPLPMDL0020000001	Fairlawn	OH	44333	2/25/2015	Discussed oxycontin patient types and identified patients he feels should be converted from IR oxycodone. Reviewed all attributes for hysingla, dosing and conversions along with patient type identification. Dr said he's maybe concerned about the abuse potential. I asked him why and he told me that he was concerned about it when oxycontin was first out. I told him it wasn't abuse deterrent until 2010 and hysingla is right now. Discussed Butrans dosing, conversions and patient types.
PPLPMDL0020000001	Westlake	OH	44145	2/25/2015	Spoke to dr regarding appropriate patients he has for our products. Talked about abuse deterrent properties and gave fair balance on abuse potential for all opioids including the products being promoted. Invited to hysingla program and the dr. Agreed to attend a program in future but he couldn't attend the dates currently available. Talked about his thoughts on extended release products/opioids and the dr said he rotates opioids at least once a year he will rotate. Dr said he will include Butrans and hysingla into the rotation. Dr agreed to help me remind him and work with his staff on reminding the doctor.
PPLPMDL0020000001	Westlake	OH	44145	2/25/2015	Reviewed hysingla and attributes. Dr addressed limited amount of patients that might be a candidate. Her concern was managed care, which was addresses. Discussed Butrans, how used and doses.
PPLPMDL0020000001	Parma	OH	44129	2/25/2015	Laura thinks that Hysingla will be a good medication that was a needed option. They don't like to give more than 5 pills per day, but in the past multiple pills were the only option. She likes butrans for opiod naive and tramadol patient, although many people don't like the patch. She sees Hysingla for the chronic patients but ideally before they get in the habit of treating their long term pain with IR meds. She has to talk to Doctor nickels about a specific patient that she would like to try it on. More viewed formulary coverage.
PPLPMDL0020000001	Norton	OH	44203	2/26/2015	Dr wanted to know how it compared to zohydro. I addressed we had head to head. Talked about attributes and managed care. Dr said he would try it and he would attend a program next week. We talked about Butrans patients for Butrans, and appropriate patient for OxyContin. Went thru the hysingla profile. Dr said he had plenty of patients that met the criteria.
PPLPMDL0020000001	Beachwood	OH	44122	2/26/2015	Quickly reminded her about formulary coverage for Hysingla and where she should try and write it for most seamless approval. Reminded her of seven strengths for this and oxycontin.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/26/2015	Follow up from the program last night and dr said that he thought it was great. Dr said that he still will go to Butrans first because of the schedule 3 and its a patch although he said that he will certainly use Hysingla and already has written it once. I asked about the patient and he said he was on Norco and started 20mg q24. Dr said it was a commercial patient and hoes it's covered. I reminded dr about plans that fit his practice and he said it's covered well.
PPLPMDL0020000001	Cleveland	OH	44115	2/26/2015	Reviewed Butrans and Hysingla ER for those patients requiring around the clock analgesia, Formulary opportunity. said ok will continue to prescribe for appropriate patients
PPLPMDL0020000001	Beachwood	OH	44122	2/26/2015	Doctor helps out Doctor Yokiel at this office a few times per month. He stopped back at lunch for a few minutes while we were discussing Hysingla. Reviewed appropriate patient, dosing and formulary coverage. He said that he thinks it's a good drug and he has tried to write it a few times. He wasn't sure if the script went through. He finds an occasional patient for butrans but it isn't his first choice.
PPLPMDL0020000001	Hudson	OH	44236	2/26/2015	Discussed how she can identify patients for Butrans by looking for hose whom are already on cox 2 inhibitors or tramadol. Reviewed dosing and titration with initiation of 5 or 10mcg. Introduced hysingla and discussed primary attributes. Discussed conversions and how to identify appropriate patients.
PPLPMDL0020000001	Stow	OH	44224	2/26/2015	Short discussion about how to identify appropriate patients for Butrans and reviewed Helen profile. Dr said he feels comfortable with Butrans and will continue to use. Reviewed initiation and titration conversions from guide. Introduced hysingla ER attributes, q24, no APAP, abuse deterrent characteristics and discussed appropriate patients through the one to one conversion from Norco or lortab products. Dr said he really likes the idea and it's been missing. dr asked about cost and then reviewed commercially insured based on his patient population.
PPLPMDL0020000001	Stow	OH	44224	2/26/2015	Reviewed all product attributes starting with Butrans. Reviewed starting doses and titration with appropriate patient type selection of those on cox 2 inhibitors or tramadol on a daily, around the clock basis. Reviewed oxycontin appropriate patient types and dosing at q12. Introduced hysingla ER reviewing q24, no APAP and abuse deterrent properties. Reviewed plasma concentrations from MVA, AEs from MVA and conversions and dosing from invitation and titration guide. Dr asked about cost and reviewed commercial insurance. Dr said it sounds like a great product and really likes the once a day dosing. Dr said he's now a medical director for a hospice facility and said having a product that can be only dosed once a day is big on time for the nurses who have to dose the patients and said nursing homes will become big as well. Dr said he is seeing lots of patients on multiple products and being doses which are way too much for the patient. Dr said he will look to use and wants to know once it's on medicare.
PPLPMDL0020000001	Stow	OH	44224	2/26/2015	Good discussion surrounding all three products. Led off with oxycontin patients who may be good candidates for the q12 oxycodone. Discussed Maggie and dr agreed it's the best option for those types of patients. Discussed hysingla ER attributes, q24 dosing, doses and conversions. Explained appropriate patients and dr said hysingla is something she's been waiting for and wants to use it. Dr said since it's new she's concerned about coverage for patients she already has on IR Hydrocodone which is her little old ladies or men taking Norco or lortab 3-4 times a day every day. I discussed how for now to focus on commercial coverage and outlined the plans from the grids. Dr said ok but told me to update her once it's covered on medicare and Medicaid.
PPLPMDL0020000001	Cleveland	OH	44195	2/26/2015	Reviewed OxyContin every 12hours along with Hysingla ER/Butrans for those patients requiring around the clock analgesia, said Ok will continue to prescribe for appropriate patients,
PPLPMDL0020000001	Cleveland	OH	44115	2/26/2015	Quick review of OxyContin every 12hours along with Butrans for those patients failing on present therapy requiring around the clock analgesia. said ok will consider for appropriate patients that are covered on ins., discuss next lunch appt-<font color=blue>cb>CHUDAKOB added notes on 03/06/2015</b></font>-Mark, this was a Butrans/Hysingla presentation based on the PDE, yet you went with OxyContin/Butrans. The more you can present within these PDEs, the better opportunity you have to meet the goals.
PPLPMDL0020000001	Hudson	OH	44236	2/26/2015	Good conversation about how he can continue to identify patients that fit for the schedule 3, 7 day patch. Reviewed Helen profile and asked for his patients also on cox 2 inhibitors around the clock. Discussed hysingla ER attributes, q24, no APAP, conversions,dosing, appropriate patients. Discussed the mean steady state hydrocodone plasma concentrations from MVA. Discussed AE's from MVA. Reviewed cost and commercial patient identification on Norco around the clock. Dr said it sounds like a product he will want to use and it's a matter of convincing a patient to take the same molecule once daily.
PPLPMDL0020000001	Beachwood	OH	44122	2/26/2015	She can think of many patients who are taking more Norco than she would ideally like to manage around the clock pain with ER meds. She thinks that Hysingla will do well once they get in the habit of writing it and convince the patients who are used to IR to switch. As long as Doctor. Yokiel supports it, she will look for appropriate patients. Reminded her of appropriate Butrans patient type and 5 patches to choose from.
PPLPMDL0020000001	Stow	OH	44224	2/26/2015	No new information learned on this call.
PPLPMDL0020000001	Stow	OH	44224	2/26/2015	No new information learned on this call.
PPLPMDL0020000001	Woodmere	OH	44122	2/26/2015	No new information learned on this call.
PPLPMDL0020000001	Chagrin Falls	OH	44023	2/26/2015	Jeff said that he saw a script yesterday which needed a prior authorization. He couldn't remember the plan or the doctor who wrote it and sorry but didn't have time to check on it right then.
PPLPMDL0020000001	Chagrin Falls	OH	44023	2/26/2015	Introduced Hysingla to Diana who said that she will talk to Anita the head pharmacist about stocking it.
PPLPMDL0020000001	Stow	OH	44224	2/26/2015	Spoke with pharmacist Holly about hysingla ER reviewing dosing, conversions and patient types. I asked holly if she will stock and she told me they have a meeting next week and will discuss it. Explained copy cards and commercial coverage.
PPLPMDL0020000001	Chagrin Falls	OH	44022	2/26/2015	No new information learned on this call.
PPLPMDL0020000001	Barberton	OH	44203	2/26/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland Hts	OH	44118	2/26/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44224	2/26/2015	No new information learned on this call.
PPLPMDL0020000001	Barberton	OH	44203	2/26/2015	No new information learned on this call.
PPLPMDL0020000001	Barberton	OH	44203	2/26/2015	Agreed to stock 20,30,40 of hysingla
PPLPMDL0020000001	Chagrin Falls	OH	44022	2/26/2015	No new information learned on this call.
PPLPMDL0020000001	Highland Heights	OH	44143	2/26/2015	Met with med asst Mary. NOTE: Cindy Pavli is now Office Mgr. Dr Salama is out of town - may be back next Monday - call first.Left formulary grids and note for OM Cindy to see if I can get access to lunch soon. Mary confirms Dr. Salama still not completing any prior authorizations.
PPLPMDL0020000001	Cleveland Hts	OH	44118	2/26/2015	Reviewed product portfolio, will stock accordingly

PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/26/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44115	2/26/2015	Visited pain mgmnt dept along with IM, Reviewed portfolio and Hysingla formulary opportunity
PPLPMDL0020000001	Cleveland	OH	44115	2/26/2015	Reviewed Product portfolio along with stocking of Hysingla ER. said Ok will follow utilization and order accordingly
PPLPMDL0020000001	Beachwood	OH	44122	2/26/2015	Doc has no good reason to not write Hysingla. He promises that he will get some experience with it, he can think of many patients that would be appropriate. Pulled through commercial coverage and where he will have best change of getting the med.
PPLPMDL0020000001	Stow	OH	44224	2/26/2015	Setup lunch on 3/19-reminders on Butrans and OxyContin in low back pain pts not being adequately controlled with pain on NSAIDs/tramadol and IR oxycodone respectively; dr said looking forward to talking to me at lunch
PPLPMDL0020000001	Hudson	OH	44236	2/26/2015	Introduction to dr-Butrans-discussed when pt has ATC low back pain taking 3 tabs of tramadol or on cox 2 and not adequately controlling pain-asked dr to position Butrans there-dr agreed great place and likes it there instead of pt on large dose opioids-will continue to rx and look for pts to transition over; OxyContin-again went over when has pt with low back pain on 3 tabs oxycodone and inadequate pain relief instead of going to higher tablet counts transition to OxyContin-asked him to look in practice for both products with pts can trust-dr agreed to prescribe there
PPLPMDL0020000001	Tallmadge	OH	44278	2/26/2015	Introduction to dr-went over Butrans and transition from tramadol and NSAIDs for pts with inadequate pain relief-dr agreed good choice and will look for pts already in practice; OxyContin-asked dr to keep it simple-oxycodone pts with low back pain not controlled on 3 tabs-transition to same molecule and keep IR for breakthrough-said will look for 1 pt
PPLPMDL0020000001	Euclid	OH	44119	2/26/2015	Met with OM Kim. Dr Winer's early lunch rep came in; he had meeting during regular lunch. Kim stated we are welcome to return this afternoon. Reinforced Hysingla ER indication, patient access with Kim (ie. focus on private/commercially insured). Left Hysingla ER titration guide, fpi for Dr. Winder. Kim states they are using Cover My Meds.
PPLPMDL0020000001	Tallmadge	OH	44278	2/26/2015	Followed up with Seth concerning the patient who was waiting for the PA to go through for hysingla. Seth said they got it approved and got hysingla 20mg last week IR so. Reviewed commercial plan coverage, dosing and conversions.
PPLPMDL0020000001	Cleveland	OH	44115	2/26/2015	Quick review of OxyContin every 12hours along with Hysingla ER/Butrans for those patients requiring around the clock analgesia, said ok will consider
PPLPMDL0020000001	Westlake	OH	44145	2/27/2015	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	2/27/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	2/27/2015	Reviewed Product portfolio along with Formulary opportunities, said ok will continue to prescribe for appropriate patients that have coverage.
PPLPMDL0020000001	Cleveland	OH	44112	2/27/2015	Reviewed Product portfolio along with Formulary opportunities, said ok will continue to consider for appropriate patients that have coverage.
PPLPMDL0020000001	Cleveland	OH	44113	2/27/2015	Reviewed Product portfolio along with Formulary opportunities, said ok will continue to consider for appropriate patients that have coverage. Dr. Orr is sending most patients to Pain mgmnt
PPLPMDL0020000001	Garfield Hts	OH	44125	2/27/2015	Reviewed Product portfolio along with Formulary opportunities, said ok will continue to prescribe for appropriate patients that have coverage.
PPLPMDL0020000001	Cleveland	OH	44113	2/27/2015	Quick Review of Product portfolio along with Formulary grids, said ok will continue to prescribe for appropriate patients that have coverage.
PPLPMDL0020000001	Akron	OH	44113	2/27/2015	Reviewed Product portfolio along with Formulary opportunities, said ok will continue to prescribe for appropriate patients that have coverage.
PPLPMDL0020000001	Cleveland	OH	44333	2/27/2015	Dr said that he had a new start today for Butrans and started on the 5mg. Dr said that the patient was on about 30mg of Morphine equivalent in the past but at the time of visit was basically opioid naive. Dr said that he continues to see patients for oxycotin and is still having some insurance issues and high cost of the product. I discussed converting the rest of his Zohydro patients to hysingla and dr said he thinks he only has one or two more at the most. Reviewed appropriate patients and commercial insurance coverage
PPLPMDL0020000001	Mogadore	OH	44260	2/27/2015	No new information learned on this call.
PPLPMDL0020000001	Twinsburg	OH	44087	2/27/2015	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	2/27/2015	No new information learned on this call.
PPLPMDL0020000001	Twinsburg	OH	44087	2/27/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44125	2/27/2015	Reviewed Product portfolio along with Formulary opportunities with Evan said ok will order when RX is presented new information learned on this call.
PPLPMDL0020000001	Green	OH	44232	2/27/2015	Thanked Jenna the pharmacist for stocking hysingla 20-40mg and told her about copay cards. She said she hasn't seen any but said she's sure she will. Reviewed commercial insurance coverage.
PPLPMDL0020000001	Uniontown	OH	44312	2/27/2015	Introduction to office-setup lunch 9/4-saw dr in hallway along with Lonsdorf-OxyContin-when approaching 3 oxycodone per day and treating ATC pain inadequately transition to same molecule; Butrans-tramadol pt on 3 tabs/day with inadequate relief-transition to Butrans-dr said makes sense to rx both products there
PPLPMDL0020000001	Valley View	OH	44125	2/27/2015	Reviewed Product portfolio along with Aaron,said ok will monitor utilization
PPLPMDL0020000001	LAKEWOOD	OH	44107	2/27/2015	No new information learned on this call.
PPLPMDL0020000001	Twinsburg	OH	44087	2/27/2015	No new information learned on this call.
PPLPMDL0020000001	Stow	OH	44224	2/27/2015	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	2/27/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44312	2/27/2015	Introduction to office-Leslie-needed Butrans savings cards-went over trial program and savings programs and pointed out expiration dates; OxyContin-reminder when getting to 3 oxycodone tabs/day and inadequate pain relief-transition to same molecule
PPLPMDL0020000001	Cleveland	OH	44109	2/27/2015	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	2/27/2015	No new information learned on this call.
PPLPMDL0020000001	Fairlawn	OH	44333	2/27/2015	Introduction to office-Jasmine-reminder of OxyContin when going beyond 3 tabs and pain is ATC go to same molecule; Butrans-when reach tramadol threshold/3tabs and inadequate pain relief-Maggie/Maria profiles
PPLPMDL0020000001	Uniontown	OH	44685	2/27/2015	Spike with Kim about EHR dispensing of hysingla ER 40mg last week for a patient who was on Zohydro. Discussed the copay cards and provided me to her and discussed on line copay cards at hysingler.com.
PPLPMDL0020000001	Uniontown	OH	44685	2/27/2015	No new information learned on this call.
PPLPMDL0020000001	Uniontown	OH	44685	2/27/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/27/2015	Quick hello and inquired again about her thoughts on the hysingla program and product in general. Denise said the program was great and dr Ali did a wonderful job. Denise said that she is eagerly waiting for her prescribing privileges to go through and thinks hysingla will be a great product because she said she knows it's needed. Provided her with a initiation and titration guide.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/27/2015	Followed up from program on Wednesday and dr asked how he did. Dr said he wanted to make sure he was 100% compliant and I to,d him he was. Dr said he's continuing to write Butrans for his Tramadol patients and some of those hydrocodone who would rather have a ER patch. Dr said he wrote 2 Rx's for hysingla this morning and said because many need PAs that he's also giving them a limited supply of their IR product until the PA gets completed. I told dr that's a great idea.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/27/2015	Followed up with Greg from the program on Wednesday. Greg said he thought it was great and believes in hysingla. Greg said he is also felling much more comfortable with Butrans and has given the patients to Ali that he believes should be converted to Butrans. I reminded him the schedule 3, 7 day patch and reviewed conversions and patient types.
PPLPMDL0020000001	Beachwood	OH	44122	2/27/2015	Quickly said hi, and that she will try Hysingla for a few patients soon. Reiterated which commercial patients will likely go the smoothest. Reminded her using Phil that oxycotin is still appropriate choice for patient on IR Oxycodone.
PPLPMDL0020000001	akron	OH	44685	2/27/2015	Quick review of hysingla at window. Provided attributes, q2q,no APAP and abuse deterrent properties. Reviewed conversions and dosing.
PPLPMDL0020000001	Parma	OH	44129	3/2/2015	Discussed with him the importance of checking with oars, discussed difference between IR and ER Oxycodone/hydrocodone. Went back to basics on appropriate patient types for IR and when it may be appropriate for ER. He believes that patient in around the clock pain should be on ER meds.
PPLPMDL0020000001	Parma	OH	44129	3/2/2015	Quick chat through the window. Trying to get doctor to attend a Dinner program,. He took an invitation but isn't sure that he can make it. He hasn't thought too much about Hysingla, but appreciated the reminder.
PPLPMDL0020000001	Westlake	OH	44145	3/2/2015	Reminded him. That butrans is the only schedule 3 opioid.
PPLPMDL0020000001	Lakewood	OH	44107	3/2/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	3/2/2015	Quickly through the window, handed him and invitation to a dinner program and quick Intro to Hysingla being a once daily hydrocodone without Tylenol and abuse deterrent characteristics. He said he will take a look,at it but doesn't have time to talk right now.
PPLPMDL0020000001	Bedford	OH	44146	3/2/2015	Reviewed where he will have best success when choosing Hysingla for appropriate patients using managed care grid. He is finding patients that are appropriate.
PPLPMDL0020000001	akron	OH	44333	3/2/2015	Discussed with dr appropriate patients for hysingla, Butrans and oxycotin. Reviewed the managed care p, and specific to his office and how he can choose hysingla for specific commercial plans like medical mutual and SummaCare. Dr agreed and said he has his patients into different categories based on wether he's going to treat them for pain IR not. Dr said he problem for hysingla is that most of his patients in pain around he clock are of medicare age. Continued to support when and why he needs to make the decision to initiate a ER opioid like hysingla, oxycotin or Butrans. Dr said he should be writing oxycotin and wonders why he's not. Spoke about appropriate patient types for oxycotin and dr asked about generic oxycotin which we discussed.
PPLPMDL0020000001	Garfield Hts	OH	44125	3/2/2015	Reviewed OxyContin/Butrans formulary coverage along with Hysingla ER for those patients failing on present therapy requiring around the clock analgesia. Said Ok will continue to consider for appropriate patients. Invited to upcoming program
PPLPMDL0020000001	Garfield Heights	OH	44125	3/2/2015	Reviewed OxyContin/Butrans formulary coverage along with Hysingla ER for those patients failing on present therapy requiring around the clock analgesia. Said Ok will continue to consider for appropriate patients. Invited to upcoming program. Will discuss with Dr.'s. Denise RN said she will help reminding staff
PPLPMDL0020000001	Fairlawn	OH	44333	3/2/2015	Discussed with jerry the pharmacy manager about speaking with the other pharmacist Rachel last week about hysingla and asking her to stock the 20-40mg doses. Jerry said she talked with him about it and he's up for putting in the order for it. Reviewed attributes, dosing, conversions and appropriate patients. Barry asked how much Norco they dispense and he said tons and knows that many of them should be on an ER product like hysingla.
PPLPMDL0020000001	Mayfield Village	OH	44143	3/2/2015	No new information learned on this call.
PPLPMDL0020000001	Garfield Hts	OH	44125	3/2/2015	Visited pain mgmnt dept. invited to upcoming program. No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44125	3/2/2015	Reviewed Hysingla ER, Butrans and OxyContin with Linda, no new info learned
PPLPMDL0020000001	Parma	OH	44129	3/2/2015	No new information learned on this call.
PPLPMDL0020000001	Rocky River	OH	44116	3/2/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44125	3/2/2015	Reviewed Hysingla ER with Sarah, said she will relay info to Evan, no new info learned
PPLPMDL0020000001	Euclid	OH	44117	3/2/2015	No new information learned on this call.
PPLPMDL0020000001	Olmsted Falls	OH	44138	3/2/2015	No new information learned on this call.

PPLPMDL0020000001	LAKEWOOD	OH	44107	3/2/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44125	3/2/2015	Reviewed with Christine and tech Hysingla ER along with Butrans for those patients requiring around the clock analgesia, said Ok hasnt seen, but will recommend if applicable
PPLPMDL0020000001	Lyndhurst	OH	44124	3/2/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44310	3/2/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	3/2/2015	Spoke with elise about all three products and identifying specific patient types for each. Elise talked about how hard it is to get oxycontin approved and it makes it tough and also had one for Butrans that got denied. Spoke about the Norco patient in pain around the clock for hysingla and reviewed dosing. Discussed cox 2 inhibitors and tramadol for Butrans and showed the conversions. Discussed the path of least resistance for oxycontin is it Oxycodone or percocet. told elise that hysingla may be appropriate for those who can't tolerate Butrans. Asked for continued support.
PPLPMDL0020000001	Parma	OH	44129	3/2/2015	No new information learned on this call.
PPLPMDL0020000001	Garfield Hts	OH	44125	3/2/2015	No new information learned on this call.
PPLPMDL0020000001	Mayfield Village	OH	44143	3/2/2015	No new information learned on this call.
PPLPMDL0020000001	Mayfield Village	OH	44143	3/2/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	3/2/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	3/2/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	3/2/2015	Quick Hysingla ER intro and OxyContin Savings cards review, said ok, No new information learned.
PPLPMDL0020000001	Rocky river	OH	44116	3/2/2015	No new information learned on this call.
PPLPMDL0020000001	Garfield Hts	OH	44125	3/2/2015	No new information learned on this call.
PPLPMDL0020000001	Bedford	OH	44146	3/2/2015	No new information learned on this call.
PPLPMDL0020000001	Mayfield Heights	OH	44124	3/2/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	3/2/2015	Inquired with dr about receiving the information he signed for from medical service about how alcohol impacts the 24 hour efficacy of hysingla. Dr said he did get a lot of information but doesn't remember getting anything that answered his question. I asked him to review the information again to verify. Discussed patient types for Butrans and oxycontin and showed him the profiles for each product.
PPLPMDL0020000001	Bedford	OH	44146	3/2/2015	No new information learned on this call.
PPLPMDL0020000001	Waterford	OH	45786	3/2/2015	1-Butrans dosing, titration and managed-care. OxyContin start principles and managed-care. Hysingla dosing, titration, managed care, ADP properties,co-pay cards, adverse events and boxed warning.W-has had several success stories with hysingla
PPLPMDL0020000001	Waterford	OH	45786	3/2/2015	1-Butrans dosing, titration and managed-care. OxyContin start principles and managed-care. Hysingla dosing, titration, managed care, ADP properties,co-pay cards, adverse events and boxed warning.W-concerned about cost coverage with butrans
PPLPMDL0020000001	Waterford	OH	45786	3/2/2015	1-Butrans dosing, titration and managed-care. OxyContin start principles and managed-care. Hysingla dosing, titration, managed care, ADP properties,co-pay cards, adverse events and boxed warning.W-concerned about cost coverage with butrans
PPLPMDL0020000001	Mayfield Heights	OH	44143	3/2/2015	Quick call with med asst at front desk. Left Hysingla ER titration guide, fpi, Purdue portfolio tri fold (left same for Dr. Papirova) as well. Discussed Purdue's extended release opioid portfolio for patients with daily, around the clock, long term pain.
PPLPMDL0020000001	Richmond Hts	OH	44143	3/2/2015	Hallway. Used Purdue trifold to discuss 3 types of patients, and 3 extended release opioids to treat those patients. Dr Stanesco says a starting dose for Hysingla ER of 20 mg daily/is a very high dose. he says he typically writes hydrocodone 5 mg up to 2x daily, for total of 10 mg. I stated: remember - this is 20 mg over a 24 hr period - 1 tablet, dosed q 24 h. he then walked into a room. Left Hysingla ER titration guide/ Purdue portfolio tri fold.
PPLPMDL0020000001	Waterford	OH	45786	3/2/2015	1-Butrans dosing, titration and managed-care. OxyContin start principles and managed-care. Hysingla dosing, titration, managed care, ADP properties,co-pay cards, adverse events and boxed warning.W-concerned about
PPLPMDL0020000001	Lakewood	OH	44107	3/2/2015	Reviewed Sonya profile. Dr said his patients want the several dosages not once a day. I asked if he could say that about everyone before even offering it? Dr asked about managed care. I covered the top 4 plans and when he told me he was heavily caresource...I switched subject to Butrans. I asked what is the real concern for converting to an extended release opioid. Dr couldn't say. Talked about OxyContin dosing after Percocet.
PPLPMDL0020000001	Lyndhurst	OH	44124	3/2/2015	Lunch total office call. Sold entire portfolio. Dr Reed says she WILL use Hysingla ER, and she hopes it wont be a hassle to get covered; as when Butrans first came out, it was very difficult to get covered, but over past few years, has been much easier. Discussed commercial patients/updated on formulary status, all products.
PPLPMDL0020000001	Lyndhurst	OH	44124	3/2/2015	Lunch. totaloffice call. Sold entire portfolio. Dr. Roda may need a little more convincing on Hysingla ER as she prefers the oxycodone molecule, she says. Discussed updated formulary status all 3 products.
PPLPMDL0020000001	Lyndhurst	OH	44124	3/2/2015	Lunch. .total office call. Sold entire portfolio. Karen says she tries to avoid opioids whenever possible. Updated her on formulary status, all 3 products.
PPLPMDL0020000001	Independence	OH	44131	3/3/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	3/3/2015	Quick review of OxyContin formulary opportunities for appropriate patients along with Hysingla ER Once daily for those patients failing on present therapy requiring around the clock analgesia. Said OK
PPLPMDL0020000001	Brooklyn	OH	44144	3/3/2015	Reviewed OxyContin formulary status along with Hysingla ER and Butrans for those patients failing on present therapy requiring around the clock analgesia. Invited to upcoming program with Dr. Moufawad, said ok will continue to consider for appropriate patients.
PPLPMDL0020000001	Brooklyn	OH	44144	3/3/2015	Reviewed OxyContin formulary status along with Hysingla ER and Butrans for those patients failing on present therapy requiring around the clock analgesia. Invited to upcoming program with Dr. Moufawad, said ok will continue to consider for appropriate patients that have formulary coverage.
PPLPMDL0020000001	Garfield Hts	OH	44125	3/3/2015	Reviewed Hysingla ER/Butrans for those patients failing on present therapy requiring around the clock analgesia along with OxyContin formulary opportunities, cover my meds along with Program invite. Said Ok will continue to consider for appropriate patients
PPLPMDL0020000001	Garfield Hts	OH	44125	3/3/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	3/3/2015	Reviewed OxyContin/Hysingla ER and Butrans with Angela Rph mgr. Formulary coverage and Savings Cards, Said ok will stock appropriately. Commented on Stocking preference CCF formulary coverage. Majority of RX's at this location are from CCF employees
PPLPMDL0020000001	Cleveland	OH	44195	3/3/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44310	3/3/2015	Short discussion about his patients he's putting on Butrans and OxyContin snd where he can find a spot for hysingla. Dr said he is waiting to hear back from the patient last week about finding hysingla. Dr said no one has it in stock. I told him I spoke with Shar about it and gave her two pharmacies the patient can get it at. Dr said he didn't think they had it. I gave dr a pharmacy stocking request form and told Shar to fax it over to the pharmacy with the drs signature and dose being requested and they will get it in. Dr said that's a good idea and Shar said she will do it today.
PPLPMDL0020000001	North Olmsted	OH	44070	3/3/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44305	3/3/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44130	3/3/2015	No new information learned on this call.
PPLPMDL0020000001	Independence	OH	44131	3/3/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44127	3/3/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	3/3/2015	No new information learned on this call.
PPLPMDL0020000001	Brooklyn	OH	44144	3/3/2015	Reviewed Hysingla ER,Butrans and OxyCöntin,No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44130	3/3/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	3/3/2015	Had enough time to hand him invitation to program and he reminded himself about ER choices of oxycontin and Hysingla
PPLPMDL0020000001	Cleveland	OH	44130	3/3/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44130	3/3/2015	Handed him invitation to speaker program, quickly introduced Hysingla. Handed him initiation/titration guides for Hysingla and butrans and said we can talk about it in greater detail next time.
PPLPMDL0020000001	Cleveland	OH	44130	3/3/2015	Caught him walking the halls no handed him an invitation to Hysingla speaker program. He said he would think about it. Asked if he has given butrans a try since we last talked he smiled.
PPLPMDL0020000001	Akron	OH	44305	3/3/2015	Discussed all three products and attributes. Discussed Helen for Butrans, Rick for hysingla and Maggie for oxycontin. I reviewed all doses and conversions for each and asked if he has patients that fit each one? Dr said he does and asked if patients can take IR opioids as breakthrough pain. Told him patients can as well as non opioid analgesics with hysingla ER. Dr asked about conversions for Butrans and reviewed it from the MVA. Dr discussed how important abuse deterrent properties are to a product that he writes and likes that hysingla is q24. Reviewed insurance for all plans and copay cards.
PPLPMDL0020000001	Akron	OH	44312	3/4/2015	Discussed all facets of each product oxycontin and hysingla. Reviewed oxycontin and hysingla doses, conversions, appropriate patient candidates. Discussed Maggie profile for oxycontin and dr agreed she's a good candidate. Dr said he likes the idea of hysingla and understands that Norco patients around the clock should be appropriate. Reviewed Butrans Helen profile and asked dr to just write it.
PPLPMDL0020000001	Independence	OH	44131	3/4/2015	No new information learned on this call.
PPLPMDL0020000001	Norton	OH	44203	3/4/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44312	3/4/2015	Good discussion over lunch about patients types for all products. I told him about how he needs to be very specific about the types of candidates for Butrans and how he needs to initiate, convert and titrate Butrans. Reviewed Helen profile. Dr said that he's also very excited about hysingla and that he had a perfect candidate for it who came to him and had a diagnosis of spinal stenosis and herniated discs and was working with medical mutual. Dr said the patient was previously on tramadol, Norco, MS Contin and had been on dilaudid at one time and failed them all. Dr said the patient had voluntarily stopped all medications but his pain has returned. Dr wrote for hysingla ER and the patient called back next day to say no one had it in stock. I told dr that at most the patient would wait would be 2 days for the medicine and to set the expectation for his patients. I also reviewed the pharmacy stocking request and asked him to use it. Discussed oxycontin patient types and copay cards.
PPLPMDL0020000001	Barberton	OH	44203	3/4/2015	No new information learned on this call. Spoke to d and dr out hysingla odd managed care. Dr said he is looking for patients but managed care is the problem. Covered conversion.
PPLPMDL0020000001	Cleveland	OH	44195	3/4/2015	Reviewed OxyContin savings cards along with Hysingla ER. Formulary opportunity, said ok will continue to consider for appropriate patients
PPLPMDL0020000001	Akron	OH	44307	3/4/2015	Quick discussion on the identification of Butrans and OxyContin patients and when he's converting patients. Dr said that he tries to do it as much as he can and knows that it's better suited for patients in pain for long periods of time. Reviewed dosing and appropriate patients for Butrans and OxyContin and then introduced hysingla. Discussed attributes and dosing.
PPLPMDL0020000001	Akron	OH	44313	3/4/2015	Discussed he initiation and titration guide for hysingla with Matt. Reviewed attributes, dosing, conversions and appropriate patients. Matt said he hasn't seen any but hopes to and says that the q24 and abuse deterrent properties are huge. I asked Matt if he would stock and he said he has to still wait until he sees a Rx.
PPLPMDL0020000001	Cleveland	OH	44113	3/4/2015	Reviewed Butrans and Hysingla ER for those patients failing on present therapy requiring around the clock analgesia. Updated formulary status said ok will consider for appropriate patients
PPLPMDL0020000001	Akron	OH	44313	3/4/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44320	3/4/2015	No new information learned on this call.



PPLPMDL0020000001	CLEVELAND	OH	44195	3/4/2015	Reviewed OxyContin, Hysingla ER and Butrans formulary info with Troy.No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	3/4/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44105	3/4/2015	Reviewed Hysingla ER,Butrans and OxyContin formulary info.with Abdul.No new information learned on this call.
PPLPMDL0020000001	Norton	OH	44203	3/4/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	3/4/2015	No new information learned on this call.
PPLPMDL0020000001	Northfield	OH	44067	3/4/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	3/4/2015	Elise said she wrote a Butrans 10mcg rx for a patient that was taking up to 8 50mg tramadol a day. Elise said the patient has anthem commercial and is hoping it won't be too expensive. I asked her if she gave a copy card and she said she did. I asked for continued prescribing for similar patients. Discussed how she can use hysingla for her patients on Norco around the clock and reviewed dosing and conversions.
PPLPMDL0020000001	westlake	OH	44145	3/4/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	3/4/2015	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	3/4/2015	No new information learned on this call.
PPLPMDL0020000001	Twinsburg	OH	44087	3/4/2015	Doctor said that he thinks he. An make it to the Hysingla program next Tuesday but hasn't found a patient for it yet. He will though.
PPLPMDL0020000001	Barberton	OH	44203	3/4/2015	Worked with Michelle the nurse to identify the patients coming into the office in the plans hysingla is covered on. None on the docket had our insurance. Spoke about Butrans and attributes. Talked about the ultram patient and how to move them from that to Butrans. Talked about steady state and break thru medications. Dr said he will prescribe anything from NSAIDs to immediate release opioids for break thru. Talked about hysingla, I will register him for the upcoming Wooster dinner program. We talked about conversion and attributes. Dr said his biggest hesitation is managed care.
PPLPMDL0020000001	Sagamore Hills	OH	44067	3/4/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	3/4/2015	No new information learned on this call.
PPLPMDL0020000001	Beachwood	OH	44122	3/4/2015	Only discussed invitation to Hysingla program and he has to double check, but he thinks he can make it<font color=blue><b>CHUDAKOB's query on 03/14/2015</b></font>You wrote you only discussed Hysingla ER program yet put Butrans as a second product presentation? Did you present Butrans and if so, what was discussed?<font color=green><b>LARAWKA's response on 03/15/2015</b></font>I made a quick comment that I also need to find a butrans program for him since he has admitted he doesn't really think of it often as he could.<font color=blue><b>CHUDAKOB added notes on 03/16/2015</b></font>OK. Make sure you don't mark it as a presentation if there was no product discussion at all.
PPLPMDL0020000001	Cleveland	OH	44102	3/4/2015	Reviewed Hysingla ER,Butrans and OxyContin , Initiation/Titration, said ok, no new info learned
PPLPMDL0020000001	Cleveland	OH	44102	3/4/2015	Quick review of Butrans Initiation/Titration along with OxyContin and Hysingla ER for those patients failing on present therapy that is failing on present therapy that is requiring around the clock analgesia. Said Ok
PPLPMDL0020000001	Cleveland	OH	44102	3/4/2015	Reviewed OxyContin every 12hours along with Butrans/Hysingla for those patients failing on present therapy requiring around the clock analgesia, Reviewed Formulary coverage for Hysingla and Butrans, said ok
PPLPMDL0020000001	Barberton	OH	44203	3/4/2015	Talked about the Percocet patient and if he converts to an extended release is it OxyContin or another molecule or method. Dr talked about injections and OxyContin. I asked the doctors thoughts on how he handles break thru medications for patients on an extended release product for chronic pain. Dr said that was a good question and he is not sure how it fits. I asked if he writes opioids along side an opioid extended release? He said he has but is not sure how effective that is. Dr said placebo is high in pain patients. We talked about options for break thru such as Tylenol or cox 2 products. Dr said he hasn't written Hysingla yet. I asked what was his concern. He said he just hasn't done it yet. I covered the plans we have coverage. Dr said that's the problem w a new product. I told him he has got to see the value I. The product for the patient and then just go for it. I gave him an updated managed care grid, reviewed the coupons (dr put in his office). I invited him to a program he couldn't attend. I asked if he wanted to go to any program he said yes if one was in the area near stow. I told him I would get back to him to see what was available. Reviewed Butrans scheduling and managed care.
PPLPMDL0020000001	Parma	OH	44129	3/5/2015	No new information learned on this call.
PPLPMDL0020000001	N. Royalton	OH	44133	3/5/2015	Quickly handed him invitation to new product dinner program for Hysingla, initiation guide for Hysingla and butrans. He said he can discuss at a different time
PPLPMDL0020000001	Norton	OH	44203	3/5/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/5/2015	Discussed all products with dr and reviewed attributes for Butrans, hysingla and oxycontin. Reviewed Maggie for oxycontin, Helen for Butrans and hysingla profiles. Discussed managed care, copy cards and where the practice is using my medicines. Linda said that she likes oxycontin because of the dosing frequency of q12 and that she finds most patients take to it very well. Linda said she thinks hysingla is going to be a great product.
PPLPMDL0020000001	Cleveland	OH	44130	3/5/2015	He was alone and with patients, just updated him quickly on formulary situation for Hysingla. Reminded him not to forget about his Oxycodone patients that might be appropriate for oxycontin when it's decided they are in around the clock pain.
PPLPMDL0020000001	Cleveland	OH	44195	3/5/2015	Quick review of OxyContin/Hysingla ER savings cards and formulary coverage, said ok, will consider for appropriate patients
PPLPMDL0020000001	University Hts	OH	44118	3/5/2015	Quick Review OxyContin every 12hours along with Hysingla ER for those patients failing on present therapy requiring around the clock analgesia, Initiation/Titration, Formulary coverage along with program invite. Said ok will consider for appropriate patients
PPLPMDL0020000001	Cleveland Hts	OH	44118	3/5/2015	Reviewed OxyContin every 12hours along with Butrans/Hysingla ER for those patients failing on present therapy requiring around the clock analgesia, Initiation/Titration, Savings cards and Formulary coverage along with program invite. Said ok he will continue to consider for appropriate patients
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/5/2015	Short discussion about Butrans and OxyContin. Dr spoke about how he recently had a patient that said they are experiencing a lack of analgesia prior to day 7. I told dr that we have discussed that before and I did report the issue. I told dr and was confirmed with dr Sable to titrate the dose of Butrans. Dr discussed how their patients do experience a wide variety of rashes with Butrans and I have reported those issues in the last as well. Dr said he will continue to write and would like higher doses. Discussed cost and how he can find patients for oxycontin as well. Dr was not directly involved in discussion about hysingla ER I had with other physicians but listened about appropriate patients and dosing with conversions.
PPLPMDL0020000001	Cleveland	OH	44118	3/5/2015	Reviewed OxyContin every 12hours along with Butrans/Hysingla ER for those patients failing on present therapy requiring around the clock analgesia, Initiation/Titration, Formulary coverage along with program invite. Said ok will consider for appropriate patients
PPLPMDL0020000001	Strongsville	OH	44136	3/5/2015	Reviewed portfolio piece and product positioning. Discussed appropriate oxycontin patient, abuse deterrent characteristics for both Hysingla and oxycontin. Doc liked the option of extended release hydrocodone as an option since OxyContin has been only molecule available. She could think of one patient right off the top of her head that would be ideal candidate to try Hysingla, but insurance will probably limit her prescribing. Quickly reviewed butrans as only c3 ER opioid and appropriate patient type.
PPLPMDL0020000001	Cleveland	OH	44118	3/5/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/5/2015	Discussed all products with dr and reviewed attributes for Butrans, hysingla and oxycontin. Reviewed Maggie for oxycontin, Helen for Butrans and hysingla profiles. Discussed managed care, copy cards and where the practice is using my medicines.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	3/5/2015	Spoke to Dee the pharmacist and introduced hysingla ER and discussed all attributes, dosing and no APAP. I asked see what the cvs protocol is when they get a denial or PA for a product. Dee said that the pharmacist calls the office and has a protocol to call three times in a week after receiving the Rx. She said if they can't reach the prescriber after that times they call the patient to let them know. She said they do not ask patients generally why a particular medicine has been prescribed.
PPLPMDL0020000001	N Royalton	OH	44133	3/5/2015	No new information learned on this call.
PPLPMDL0020000001	Berea	OH	44017	3/5/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland Hts	OH	44118	3/5/2015	Reviewed portfolio of products,No new information learned on this call.
PPLPMDL0020000001	Berea	OH	44017	3/5/2015	No new information learned on this call.
PPLPMDL0020000001	North Royalton	OH	44133	3/5/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44224	3/5/2015	No new information learned on this call.
PPLPMDL0020000001	Berea	OH	44017	3/5/2015	No new information learned on this call.
PPLPMDL0020000001	Barberton	OH	44203	3/5/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/5/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44130	3/5/2015	No new information learned on this call.
PPLPMDL0020000001	Strongsville	OH	44136	3/5/2015	No new information learned on this call.
PPLPMDL0020000001	North Royalton	OH	44133	3/5/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/5/2015	Discussed all products with dr and reviewed attributes for Butrans, hysingla and oxycontin. Reviewed Maggie for oxycontin, Helen for Butrans and hysingla profiles. Discussed managed care, copy cards and where the practice is using my medicines.
PPLPMDL0020000001	Cleveland	OH	44103	3/5/2015	No new information learned on this call.
PPLPMDL0020000001	Highland Heights	OH	44143	3/5/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland Hts	OH	44118	3/5/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/5/2015	Discussed all products with dr and reviewed attributes for Butrans, hysingla and oxycontin. Reviewed Maggie for oxycontin, Helen for Butrans and hysingla profiles. Discussed managed care, copy cards and where the practice is using my medicines. Dr talked about how he has only about 20% of his practice who requires ER opioids and that those who have incidental pain he uses IR opioids for. Dr said that the practice classifies their patients into high abuse potential patients, moderate risk and low risk. Dr said that for their high risk patients they use Butrans and maybe Exalgo and then for the other patients they can get oxycontin or hysingla. Discussed abuse deterrent properties and asked dr to continue prescribing. Spoke about titrating the dose of Butrans if a patient loses analgesia prior to day 7.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/5/2015	Discussed all products with dr and reviewed attributes for Butrans, hysingla and oxycontin. Reviewed Maggie for oxycontin, Helen for Butrans and hysingla profiles. Discussed managed care, copy cards and where the practice is using my medicines. Dr said that he likes to do opioid rotation and likes to use Butrans for his high risk abuse patients and really likes hysingla for his patients on chronic hydrocodone patients that meet the indication. Dr said he uses a lot of oxycontin for inpatient care in the hospitals and it works great because it's dosed only twice a day and patients love it. Reviewed managed care and where he can see hysingla taking off for his Norco patients whom meet the indication and using me as a resource to help patients get the medicine by calling on local pharmacies.
PPLPMDL0020000001	Beachwood	OH	44122	3/6/2015	Reviewed portfolio piece and appropriate patients for each Product very quickly. Asked her if she remembers information presented about Hysingla. She asked me to refresh her memory. Started to re-introduce Hysingla and then she remembered. She wished she would, have thought of it earlier today because she did see a patient appropriate for Hysingla. Discussed formulary and where she has best chance of getting insurance to approve it. She asked me to follow up again next week. She can't make it to the dinner program unfortunately.
PPLPMDL0020000001					

	Parma	OH	44129	3/6/2015	Doctor is not available in Tuesday's for a dinner program, only Monday night. I asked how am I supposed to get him to think about Hysingla without attending an educational program. He said I need to come in to keep educating. As long as he continues to think of oxycontin and butrans, eventually he can start to think of Hysingla
PPLPMDL0020000001					
PPLPMDL0020000001	Parma	OH	44129	3/6/2015	No new information learned on this call.
PPLPMDL0020000001	Beachwood	OH	44122	3/6/2015	No new information learned on this call.
	Solon	OH	44139	3/6/2015	Doctor does think that Hysingla is a good option for patients. He tried to write it for a patient but it was rejected because she had COPD. His MA asked if the co-pay cards can be used for cash paying patients, I told her it can't. Reviewed which commercial plans they will have the easiest time getting Hysingla approved and for the least amount of time on their side, and least amount of money for the patients.
PPLPMDL0020000001	Cleveland	OH	44113	3/6/2015	Reviewed OxyContin,Hysingla ER and Butrans for those patients failing on present therapy that require around the clock analgesia,formulary opportunity, savings cards said ok will continue to consider for appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44113	3/6/2015	Reviewed Hysingla ER and Butrans for those patients failing on present therapy that require around the clock analgesia,formulary opportunity, savings cards said ok will continue to consider for appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44112	3/6/2015	Reviewed OxyContin ,Hysingla ER and Butrans for those patients failing on present therapy that require around the clock analgesia,formulary opportunity, savings cards said ok will continue to consider for appropriate patients.
	Akron	OH	44305	3/6/2015	Good discussion around ER opioids oxycontin and Hysingla ER. Reviewed patient types appropriate for the q12 oxycontin and asked dr if his patients get acceptable analgesia with it and if it's tolerable. Dr said it works great and uses it often. Introduced Hysingla discussing all attributes, q24 dosing, no APAP and abuse deterrent properties. Discussed conversions and appropriate patient types. I asked dr if he had any questions about the product? Dr said that he thinks it's a good idea to have this product because he has many patients already on Norco. I asked dr if he will use Hysingla and dr agreed to write. Discussed commercial insurance coverage and copay cards.
PPLPMDL0020000001					
PPLPMDL0020000001	Cleveland	OH	44113	3/6/2015	Reviewed Hysingla ER and Butrans for those patients failing on present therapy that require around the clock analgesia,formulary opportunity, savings cards said ok will continue to consider for appropriate patients.
	Parma	OH	44129	3/6/2015	Quick conversation regarding Hysingla and doctor trying to get Hysingla approved on workers comp. he wrote a letter because he has two patients that he thinks are appropriate for Hysingla and he needed my help if sign the information they require.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/6/2015	Spoke with the pharmacy manager Bridget and asked her what protocol or procedure they use when they have a medicine that requires recertification or PA? Bridget said they use cover my meds and begin the process for the patient and then fax he information over to the prescribing physician Or office. Quick review of Hysingla ER attributes.
PPLPMDL0020000001	Cleveland	OH	44113	3/6/2015	Reviewed portfolio with Cecilia, no new scripts , will order and stock when presented.
PPLPMDL0020000001	Lakewood	OH	44107	3/6/2015	No new information learned on this call.
PPLPMDL0020000001	Beachwood	OH	44122	3/6/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	3/6/2015	Talked the Nedra the pharmacist about what happens if a product needs a pa. Pharmacist said that the office will get notified but wouldn't go into detail. I gave her product keAve behinds and highlighted a few attributes.
PPLPMDL0020000001	Lakewood	OH	44107	3/6/2015	No new information learned on this call.
PPLPMDL0020000001	Parma Heights	OH	44129	3/6/2015	No new information learned on this call.
PPLPMDL0020000001	Valley View	OH	44125	3/6/2015	Reviewed portfolio.No new information learned on this call.
PPLPMDL0020000001	BEACHWOOD	OH	44122	3/6/2015	No new information learned on this call.
PPLPMDL0020000001	Berea	OH	44017	3/6/2015	Confirmed lunch for Monday-reminders of OxyContin in oxycodone pts and Butrans for tramadol pts
PPLPMDL0020000001	Lakewood	OH	44107	3/6/2015	Introduced Hysingla. Dr said it was a molecule he was familiar with. I asked if any of the attributes meant anything different to him and he said once a day was interesting. We talked about where he might use it and he said he wasn't sure. We talked about managed care...I suggests in trying it in someone that has exhausted many options previously for pain. Dr agreed that could be a spot for it. Dr said he wasn't writing much opioids any more...I asked if he was referring out and he said some but he just isn't writing opioids as much. He said not even Tramadol. We talked about Butrans and how it can be a fit after Tramadol. Covered managed care. Dr said he has written it more. Dr agreed to attend a program, Wednesdays are his bett days for programs.
PPLPMDL0020000001					
PPLPMDL0020000001	Cleveland	OH	44113	3/6/2015	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	3/6/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	3/6/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	3/6/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44310	3/6/2015	No new information learned on this call.
PPLPMDL0020000001	Hudson	OH	44236	3/6/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44102	3/6/2015	No new information learned on this call.
PPLPMDL0020000001	Beachwood	OH	44122	3/6/2015	No new information learned on this call.
PPLPMDL0020000001	westlake	OH	44145	3/6/2015	No new information learned on this call.
PPLPMDL0020000001	Beachwood	OH	44122	3/6/2015	Lunch-reintroduction to dr: OxyContin-dr said he likes OxyContin a lot because it works and it controls the pts pain. Dr said he likes the flexibility of 7 doses to titrate up and down and it has good managed healthcare coverage. Dr said he will convert his patients from Percocet and Norco when reach 3-4 tablets. I thanked him for his support and informed him both Kathy and I will be here for him! Butrans-dr said he has a few pts on it. He said the problem is when he gets pts referred they're already on higher amounts of IR opioids and his patients haven't done well. I redirected and asked him about the elderly, renal patient with osteoarthritis or low back pain already in practice that he trusts and not getting adequate relief with a Cox 2 NSAID or tramadol, would he consider xing it there? Dr said that would be a great place to use and I asked for pts coming in today or next week and he said he would look for those specific pts. Dr asked about Hysingla and I told him Kathy will be in soon to discuss it with him
PPLPMDL0020000001					
PPLPMDL0020000001	Cleveland	OH	44113	3/6/2015	Visited pain mgmnt dept, OxyContin,Hysingla ER and Butrans initiation/Titration
PPLPMDL0020000001	Hudson	OH	44236	3/6/2015	Reviewed the Hysingla initiation and titration guide with Giliana the pharmacist discussing q24, no APAP and abuse deterrent properties. Reviewed conversions from hydrocodone and other opioids. Giliana said that she thinks it's a great medicine and that she does so a lot or Norco but a good amount of them are using it for acute or PRN pain. Reviewed Butrans dosing and titration.
PPLPMDL0020000001	Hudson	OH	44236	3/6/2015	Quick discussion about how he can identify patients for both Butrans and Hysingla. Told him to look for patients on tramadol in a daily basis And in pain every day. Reviewed Hysingla initiation and titration guide and asked him to use it clinically.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	3/6/2015	Reviewed Hysingla ER attributes, dosing and conversions with Andy the pharmacist. I asked him what discount drug marts policy or procedure is when a patients prescription needs prior authorized? Andy said that they use cover my meds and he knows that they initiate the process and the cover my meds data base for the physician will tell them where and how to provide them with the necessary patient information to get it completed. Andy said that the information in the cover my meds system he believes is tied to the prescribers NPI number and if the prescribers information isn't in the system then they call the office to inform them of the situation.
PPLPMDL0020000001	Lakewood	OH	44107	3/6/2015	Reviewed attributes of the products. Talked about Hydrocodone insight. Dr said drs are less willing to prescribe opioids with all the changes to Tramadol and hydrocodone. We talked about treating exiting pain patients and when they can turn touor products per the indication. Gave fair balance on abuse det properties. And abuse potential among all opiods.
PPLPMDL0020000001	East Cleveland	OH	44112	3/6/2015	Reviewed Hysingla ER,OxyContin and Butrans for those patients failing on present therapy that require around the clock analgesia, savings card, Said she will keep a look for new scripts,not alot of narcotics are dispensed at this CCF location
PPLPMDL0020000001	Westlake	OH	44145	3/9/2015	Reviewed hydrocodone insight. Dr said he had limited experience w chronic pain, he used to be an er doctor. WE talked about Butrans and Hysingla indication and used the patient profile jane to helped tidy appropriate patient type. Talked fair balance on abuse potential of opioids including he products I was promoting. Dr said he would write Butrans and he would be interested in attending a program on Hysingla.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/9/2015	Dr said that my program for May 5 came though and he's going to send in his confirmation today. I asked him how Hysingla has been going recently and if patients are getting it through their insurance? Dr said its hit or miss but they all have needed a PA. I told him I realize that is an issue and it's just going to take time and to keep writing. Dr said he has had some very positive clinical results already with good pain relief. I asked him to continue writing and to also keep up with Butrans for those tramadol patients or anyone you feel is appropriate.
PPLPMDL0020000001					
PPLPMDL0020000001	Westlake	OH	44145	3/9/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	3/9/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44134	3/9/2015	Gave him portfolio piece with an invitation to Hysingla program, told him it would be an opportunity to hear more about the hydrocodone ER and how it would fit into his practice But not affecting the butrans patients.
PPLPMDL0020000001	Westlake	OH	44145	3/9/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	3/9/2015	He is submitting paperwork to BWC to add Hysingla to their formulary. They requested documentation to support his decision and why it should be added to their formulary. We discussed Hysingla, studies and abuse deterrent characteristics so that he could submit the information confidently. Reminded him that this patient is different than the butrans patient he is keeping an eye out for.
PPLPMDL0020000001	Berea	OH	44017	3/9/2015	Review managed care for Hysingla and appropriate patient, Butrans schedule three discussed. Dr said he may attend a program.
PPLPMDL0020000001	Cleveland	OH	44114	3/9/2015	Reviewed OxyContin every 12hours, along with Hysingla ER/Butrans for those patients requiring around the clock analgesia that are failing on present therapy. Initiation/Titration, formulary opportunities and savings cards. Said ok will continue to consider and prescribe for appropriate patients, John said he will help reminding Dr.
PPLPMDL0020000001	Cleveland	OH	44104	3/9/2015	Reviewed OxyContin every 12hours, along with Hysingla ER/Butrans for those patients requiring around the clock analgesia that are failing on present therapy. Initiation/Titration, formulary opportunities and savings cards. Said ok continue to consider and prescribe for appropriate patients,
PPLPMDL0020000001	Cleveland	OH	44104	3/9/2015	Reviewed OxyContin every 12hours, along with Hysingla ER/Butrans for those patients requiring around the clock analgesia that are failing on present therapy. Initiation/Titration, formulary opportunities and savings cards. Said ok continue to consider and prescribe for appropriate patients, treats pain mainly in patient at various clinical settings.
PPLPMDL0020000001	Cleveland	OH	44113	3/9/2015	Reviewed Butrans/Hysingla ER for those patients requiring around the clock analgesia that are failing on present therapy. Initiation/Titration, formulary opportunities and savings cards. Said ok will continue to consider and prescribe for appropriate patients.
PPLPMDL0020000001	Westlake	OH	44145	3/9/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44103	3/9/2015	No new information learned on this call. Will stock when RX's are presented
PPLPMDL0020000001	Euclid	OH	44117	3/9/2015	Met with med asst at front desk. Reinforced my 3 product portfolio. Reminded her: access to Hysingla ER is for private/commercially insured patients only at this time.
PPLPMDL0020000001	Westlake	OH	44145	3/9/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	3/9/2015	Talked about the patient t profiles and tailored them to Hysingla and Butrans using the same indication different patient types...Phil and Jane
PPLPMDL0020000001	Akron	OH	44333	3/9/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44120	3/9/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	3/9/2015	Introduction to office-spoke with Linda and saw dr at window-reminders of OxyContin in oxycodone pts-same molecule and Butrans for tramadol threshold pts
PPLPMDL0020000001	Cleveland	OH	44120	3/9/2015	No new information learned on this call. Will stock when RX's are presented

PPLPMDL0020000001	Cleveland	OH	44113	3/9/2015	No new information learned on this call.
PPLPMDL0020000001	Fairlawn	OH	44333	3/9/2015	No new information learned on this call.
PPLPMDL0020000001	Twinsburg	OH	44087	3/9/2015	Gave him portfolio piece with an invitation to Hysingla program, told him it would be an opportunity to hear more about the hydrocodone ER and how it would fit into his practice
PPLPMDL0020000001	Westlake	OH	44145	3/9/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	3/9/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	3/9/2015	No new information learned on this call.
PPLPMDL0020000001	Independence	OH	44131	3/9/2015	Gave him portfolio piece with an invitation to Hysingla program, told him it would be an opportunity to hear more about the hydrocodone ER and how it would fit into his practice.
PPLPMDL0020000001	Akron	OH	44333	3/9/2015	Introduction to office-met dr at window-Reminders of OxyContin when switching from Percocet/Norco and Butrans when reaching tramadol threshold and transitioning to LA opioid
PPLPMDL0020000001	Akron	OH	44333	3/9/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	3/9/2015	Introduced Hysingla. Talked about attributes,scheduling of my products. Used core visual aid and patient profiles today. Talked managed care. Dr said she has been writing Butrans and has had luck with the weekly dosing.
PPLPMDL0020000001	Cleveland	OH	44104	3/9/2015	No new information learned on this call. 99% Medicaid
PPLPMDL0020000001	Fairlawn	OH	44333	3/9/2015	Spoke with Tery the pharmacist and asked him if he's aware that Jerry ordered hysingla ER? Tery looked and said he doesn't see it but just got a shipment in and hasn't gone through it. He said to stop back in later in the week or call. Reviewed the product information and attributes.
PPLPMDL0020000001	Parma	OH	44129	3/9/2015	No new information learned on this call.
PPLPMDL0020000001	Berea	OH	44017	3/9/2015	Introduction to dr and staff-lunch-OxyContin-I asked dr when does he transition his pts on Percocet/Norco over to LA opioid-dr said it depends on pts pain level and situation-showed him the conversion page in CVA and he agreed at 4 tabs he does transition pts over to OxyContin-dr said he has prescribed it 3 times in past week in pts with cervical disk problems waiting on surgery who were on Percocet-I thanked him for those appropriate pts and if will continue to look for pts in his practice he can convert over at 3-4 tabs of oxycodone and he agreed; Butrans-discussed the pts on NSAIDs and tramadol with inadequate relief or can't tolerate and dr said he does have OA and low back pts in his practice he will consider switching to Butrans-dr said he was thinking of higher pain pts and was confused where to use it-asked for pts with OA flare ups on NSAIDs and low back pain pts on tramadol-went over conversion table and dr said it was very helpful to recognize Butrans pts
PPLPMDL0020000001	Parma	OH	44129	3/9/2015	Introduction to office-dr said he prescribes Butrans in OA pts after NSAIDs and after low dose Percocet-he said his elderly pts like the 7 day efficacy-also reminded him about tramadol pts and went over titration scale-dr agreed good place to rx and will look for pts in practice to transition; OxyContin-dr admitted he doesn't rx as much as he should-went over the 4 tab conversion page and he will rx more in his Percocet pts when their pain isn't being controlled
PPLPMDL0020000001	Uniontown	OH	44685	3/9/2015	I told dr that I wanted to provide him with an initiation and titration guide for oxycontin since he requested it on my last visit. I reminded him about hysingla and asked him to identify just one patient already on hydrocodone who meets the indication.
PPLPMDL0020000001	Fairlawn	OH	44333	3/9/2015	Spoke with Gilbert about hysingla ER and discussed the product in depth. I asked him what the average pharmacist would do when a patient comes in with a prescription for a new branded scheduled medicine with hysingla? Gilbert said that a test claim would be run to see what the patients insurance would cover and what the copay would be. If there is a prior authorization, the pa should be started and the office should be called. I told Gilbert I wished that would happen ALL the time but it doesn't. I told him about a couple of situations when patients are turned away and don't start anything for the patient. Gilbert said I need to be selling hysingla to pharmacist and techs to make them feel more comfortable with it.
PPLPMDL0020000001	Westlake	OH	44145	3/9/2015	After review of the patient in her practice, she felt that Butrans and hysingla have the best fits. We talked about abuse potential for all opioids including my products. Reviewed attributes and managed care. Dr uses NSAIDs and Tramadol for pain control currently and she agreed to use Butrans if she saw an opportunity for the right atc pain patient.
PPLPMDL0020000001	Bedford	OH	44146	3/10/2015	Quickly handed information on Hysingla across counter asked doctor if he would like to attend a speaker program tonight to learn more about the exciting new product Hysingla. Quickly described what it was and appropriate patient type using portfolio piece mentioning oxycontin patient as well. He said he will review it but is sorry that he can't attend
PPLPMDL0020000001	Barberton	OH	44203	3/10/2015	Discussed managed care for hysingla and talked with deana about new patients coming in. She said no scripts had been written yet. Dr said he didn't switch them that they were doing fine on their current meds. We talked dosing and attributes of products.
PPLPMDL0020000001	Parma	OH	44129	3/10/2015	Doctor attended a speaker presentation for Hysingla. After the dinner we continued to discuss ER opioids and when appropriate to prescribe.
PPLPMDL0020000001	Bedford	OH	44146	3/10/2015	Doctor presented at Hysingla program and we spent time before presentation discussing oxycontin and reminding him that all ER oxycontin has the abuse deterrent characteristics similar to Hysingla's. He believes that all pain medication prescribed ideally should have these characteristics. He has written Hysingla several times but insurance is the hurdle. Reminded him the patients to look for until the managed care situation improves.
PPLPMDL0020000001	Twinsburg	OH	44087	3/10/2015	Doctor attended a speaker presentation for Hysingla. After the dinner we continued to discuss ER opioids and when appropriate to prescribe.
PPLPMDL0020000001	Mayfield Hts	OH	44124	3/10/2015	Met with prior auth coordinator, who asked for assistance with access to Hysingla ER. Dr Laham wrote 4 scripts last Friday, and none of the 4 went through. One patient was covered on Medicare, one patient covered on Medical Mutual which required a prior auth; and they didn't have time to look the others up. In addition it was communicated that a male patient, prescribed Hysingla ER, states he went to 8-9 pharmacies and not one of them would order Hysingla ER. The male patient was upset as he was leaving on vacation soon; and Dr Laham switched him to another opioid. I communicated to Dr. Laham that he should only prescribe Hysingla ER for private/commercially covered patients - No Medicare, as we don't have preferred status yet. Despite recent coverage difficulties, Dr. Laham will still attempt to write Hysingla ER for patients we discussed. Butrans and Oxycontin also discussed and appropriate patients for each product.
PPLPMDL0020000001	Garfield Heights	OH	44125	3/10/2015	Reviewed OxyContin,Hysingla ER and Butrans for those appropriate patients. No new information learned on this call.
PPLPMDL0020000001	Garfield Hts	OH	44125	3/10/2015	Reviewed OxyContin every 12 hours.Along with Hysingla ER and Butrans for those patients failing on present therapy requiring around the clock analgesia. Initiation Titration, savings cards. formulary opportunities, said ok will consider for appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44106	3/10/2015	Reviewed OxyContin every 12 hours.Along with Hysingla ER and Butrans for those patients failing on present therapy requiring around the clock analgesia. Initiation Titration, savings cards. formulary opportunities, said ok will consider for appropriate patients that have formulary coverage
PPLPMDL0020000001	Cleveland	OH	44125	3/10/2015	Reviewed OxyContin every 12 hours.Along with Hysingla ER and Butrans for those patients failing on present therapy requiring around the clock analgesia. Initiation Titration, savings cards. formulary opportunities, said ok will consider for appropriate patients.
PPLPMDL0020000001	Garfield Hts	OH	44125	3/10/2015	Reviewed OxyContin every 12 hours.Along with Hysingla ER and Butrans for those patients failing on present therapy requiring around the clock analgesia. Initiation Titration, savings cards. formulary opportunities, said ok will consider for appropriate patients that have formulary coverage
PPLPMDL0020000001	Barberton	OH	44203	3/10/2015	No new information learned on this call.
PPLPMDL0020000001	Bedford	OH	44146	3/10/2015	No new information learned on this call.
PPLPMDL0020000001	Lyndhurst	OH	44124	3/10/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	3/10/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	3/10/2015	No new information learned on this call.
PPLPMDL0020000001	Barberton	OH	44203	3/10/2015	No new information learned on this call.
PPLPMDL0020000001	Garfield Hts	OH	44125	3/10/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44312	3/10/2015	No new information learned on this call.
PPLPMDL0020000001	Garfield Hts	OH	44125	3/10/2015	No new information learned on this call.
PPLPMDL0020000001	Barberton	OH	44203	3/10/2015	Thanked dr for coming to the program last week. Highlighted the dosing and how to convert from norco to hysingla. Reviewed Butrans attributes.
PPLPMDL0020000001	Barberton	OH	44203	3/10/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/10/2015	No new information learned on this call.
PPLPMDL0020000001	Lyndhurst	OH	44124	3/10/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44134	3/10/2015	They have three strengths of Hysingla stocked. Marco is leaving and moving to Texas. Mtalked today the floater pharmacist who has already heard all about Hysingla
PPLPMDL0020000001	Barberton	OH	44203	3/10/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44109	3/10/2015	No new information learned on this call.
PPLPMDL0020000001	Beachwood	OH	44122	3/10/2015	No new information learned on this call.
PPLPMDL0020000001	Garfield Hts	OH	44125	3/10/2015	No new information learned on this call.
PPLPMDL0020000001	Garfield Hts.	OH	44125	3/10/2015	No new information learned on this call.
PPLPMDL0020000001	Bedford	OH	44146	3/10/2015	No new information learned on this call.
PPLPMDL0020000001	Mayfield Heights	OH	44124	3/10/2015	No new information learned on this call.
PPLPMDL0020000001	Norton	OH	44203	3/10/2015	Talked about why prn dosing atc is. Ore acceptable than using an extended release opioids for the same type of patient. Dr said he tried not to give immediate release for chronic patients. We talked about his decision process of changing the molecule or keeping them on the same molecule. Dr said he will usually stick with the same molecule. Which led us to talk about the oxycodone patient for OxyCotin, the norco patient for hysingla. Reviewed managed care and dr. Agreed that he would write our products given the right patient per the indication.
PPLPMDL0020000001	Cleveland Hts	OH	44118	3/10/2015	Lunch-introduction to dr and Cheniese(NP)-OxyContin-dr immediately said "big guns"-I asked him what he meant by that-dr said its his last resort after pts on Percocet and Vicodin-I asked dr why he is waiting so long to leave OxyContin at the end and not after Percocet-dr said OxyContin has a bad rap for being strong-I asked dr if he was concerned about it being abused and redirected him to pts in his practice already on Percocet that is not controlling their pain-asked dr how many tabs are pts on before he considers LA opioid-he said 4-5- I showed him the chart in the CVA on transitioning from Percocet and asked him if he would start pts on OxyContin there because if he likes and trusts the molecule-which the dr said he did-then doesn't it make sense to keep them on it only going to a q12hr dosing and keeping the Percocet for breakthrough pain-dr agreed it makes more sense and will look in his practice for pts to transition over to; discussed abuse deterrent properties and went over study-dr liked it and said its good that Purdue is doing this-he was unaware of the re formulation; Butrans-asked specifically for his cox 2 pts with OA or low back pain not controlled and being his next step-dr agreed its better than going to Tylenol with codeine then up the ladder before reserving it for last resort-also discussed tramadol pts with inadequate pain relief and asked for those pts as well-dr agreed good place to start looking for pts-font color=blue>cb>CHUDAKOB added notes on 03/29/2015</b></font>Nice job of pressing forward. We call that constructive tension. Good work Scott!
PPLPMDL0020000001					

PPLPMDL0020000001	Lyndhurst	OH	44124	3/10/2015	Lunch. Discussed patients appropriate for Butrans initiation or conversion. Reinforced that Butrans is CIII, can be called/faxed in with refills. BWC Ohio reminder. Discussed patients on short acting oxycodone plain for conversion to Oxycotin, with q12 h dosing schedule. Reinforced Hysingla ER core messaging, and formulary status. Asked Dr. Kim to keep these types of patients in mind today and later this week. He agreed that he would.
PPLPMDL0020000001	Beachwood	OH	44122	3/10/2015	Reminded doctor that it is appropriate to initiate ER meds like oxycotin and Hysingla in patients that are taking 3-4 IR meds, they are in a round the clock pain and you feel that dosing q12 or q24 is a good option.
PPLPMDL0020000001	Barberton	OH	44203	3/10/2015	Discussed the indication and dosing attributes of hysingla. Dr said she doesn't treat chronic pain anymore. Reviewed managed care. And reminded of OxyCotin, it's molecule and attributes like several dosing and abuse det properties.
PPLPMDL0020000001	Lakewood	OH	44107	3/10/2015	Introduction to office-met dr at window-extremely busy but gave reminders of OxyContin and Butrans
PPLPMDL0020000001	Parma	OH	44129	3/10/2015	Doctor attended a speaker presentation for Hysingla. After the dinner we continUed to discuss ER opioids and when appropriate to prescribe.
PPLPMDL0020000001	Barberton	OH	44203	3/10/2015	Worked w Michelle and we reviewed the upcoming patients and their insurance plans, following hippa. Reviewed dosing and conversion for hysingla. <font color=blue><b>CHUDAKOB's query on 03/22/2015</b></font>This looks like a non-HCP call. Did you speak with the doctor?<font color=green><b>BARTOLI's response on 03/23/2015</b></font>I reviewed dosing w the dr. Around hysingla and made a point to tell him h/w helpful the staff has been.<font color=blue><b>CHUDAKOB added notes on 03/23/2015</b></font>I didn't see that in the call notes. Thanks
PPLPMDL0020000001					
PPLPMDL0020000001	Independence	OH	44131	3/11/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	3/11/2015	No new information learned on this call.
PPLPMDL0020000001	Independence	OH	44131	3/11/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	3/11/2015	Reviewed Butrans/OxyContin and Hysingla ER, formulary opportunities along with savings cards, said ok will continue to consider for appropriate patients that have coverage
PPLPMDL0020000001	Cleveland	OH	44113	3/11/2015	Quick review of Hysingla ER and Butrans for those patients failing on present therapy requiring around the clock analgesia,said ok will consider for appropriate patients that have coverage
PPLPMDL0020000001	Westlake	OH	44145	3/11/2015	Used ohine and jane profiles to explain indication and appropriate patient tules for our products. Talked about abuse de properties for oxycotin and hysingla. Reviewed attributes. Invited to a program.
PPLPMDL0020000001	Cleveland	OH	44113	3/11/2015	Reviewed OxyContin every 12hours,formulary review along with Hysingla ER for those patients failing on present therapy requiring around the clock analgesia. said ok will consider for appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44113	3/11/2015	Quick review of OxyContin every 12hours along with Hysingla ER for those patients failing on present therapy requiring around the clock analgesia, said ok refers most patient out but will consider for appropriate patients
PPLPMDL0020000001	Rocky river	OH	44116	3/11/2015	Reviewed the Sonja profile today, reviewed indication of hysingla and all my extended release products.nwe talked about the rescheduling of hydrocodone, used the insight to deliver the message. Dr said the group has changed their policy so that they have to check ores and they don't write 1 to 2 pills...that they stick to one...and they don't write for more than a 90 day supply. Yet the dr said she does have a few patients l20 day supply of opioids. We talked about how she instructs patients to write opioids. And she said she doesn't state the time, just every 6 hours as needed for pain. We talked about the options my products might offer to the appropriate patient I. Need of therapy change. Dr thought that the abuse det properties was the best attribute because she said there hasn't been a hydrocodone with it before. We alke about attributes of the products and managed care. The biggest a commercial koans we don't have coverage with...I have her a managed care grid for the plans we have that don't require a propr authorization. She said she would try it. Dr talked about Butrans and coverage Nd we talked abutncaresource patients. She had forgotten we had coverage with silvers scripts and caresource. Dr said most if her Tramadol patients are acute. But she will think about who might be a candidate for Butrans,mr said she likes it is a patch and schedule three.
PPLPMDL0020000001	Euclid	OH	44119	3/11/2015	Lunch. Dr Winer has yet to convert any immediate release hydrocodone patients to Hysingla ER. Delivered immediate release hydrocodone insight. Dr says - what if a patient is on ir hydrocodone product and is doing fine at day 28? I replied, that's fine, that 's not the patient I'm requesting you convert. It's the patient who keeps asking for refills or a higher dose, month after month, needs further analgesia and could benefit from a 24 h dosing. Ok, I get that. I again asked Dr. winner for 1 or 2 patients today, this week - who meet Hysingla ER indication. We then discussed appropriate patients for OxyContin and Butrans. Dr. says some patients complain Butrans doesn't stay on for all 7 days - we discussed first aid tape around the edges OR Tegaderm/Bloclosure over the patch. He says he will try that.
PPLPMDL0020000001	Cleveland	OH	44113	3/11/2015	Lunch-Elaïne said she likes Butrans in pts after they've had opioids because she doesn't know how an opioid naive patient will react to the effects of opioids-usually after a short course of Vicodin or Percocet and then transitions over to Butrans-went over conversion slide and she really liked it and put it in her coat pocket-she said its an excellent tool to look for patients to transition over; OxyContin-Nickels will not let group prescribe right
PPLPMDL0020000001	Cleveland	OH	44113	3/11/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44320	3/11/2015	Short discussion on Butrans, oxycotin and hysingla. Told dr that he now has three viable options to treat his patients in daily around the clock pain. Discussed Helen for Butrans with conversions, oxycotin with Maggie and dosing flexibility and hysingla with Jane. Dr said he needs to get back to using Butrans and said he wants me to come in each week and tell him where and when to use it.
PPLPMDL0020000001	Rocky River	OH	44116	3/11/2015	No new information learned on this call.
PPLPMDL0020000001	Chagrin Falls	OH	44022	3/11/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44125	3/11/2015	Spoke with Evan, RPH mgr.Presented portfolio,No new information learned on this call.
PPLPMDL0020000001	Berea	OH	44017	3/11/2015	No new information learned on this call.
PPLPMDL0020000001	Fairlawn	OH	44333	3/11/2015	I discussed hysingla and Butrans with the pharmacist Gary. He said he hasn't seen an Rx yet and will order when he does. Reviewing dosing and conversions. Discussed Butrans dosing, schedule 3, 7 day transdermal patch.
PPLPMDL0020000001	Cleveland	OH	44130	3/11/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44130	3/11/2015	Quick call updating on formulary situation for Hysingla, reminding him he won't have the same challenges with oxycotin and butrans.
PPLPMDL0020000001	Cleveland	OH	44130	3/11/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	3/11/2015	Visited Pharm. Left card and product portfolio for Mike and Jeff
PPLPMDL0020000001	Cleveland	OH	44113	3/11/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	3/11/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44102	3/11/2015	Reviewed portfolio.No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	3/11/2015	Introduction to office-saw dr at window-Butrans-Erin said needed savings cards because rxing more with schedule changes of opioids-reminded about in tramadol pts reaching threshold; OxyContin-dr doesn't rx for some reason-ask Kathy if she knows why
PPLPMDL0020000001	Cleveland	OH	44113	3/11/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	3/11/2015	Lunch-really likes Butrans in pts who are opioid naive and after tramadol-went over conversion slide brochure and she took it for reference; OxyContin-Nickels will not allow it to be rxd at this time
PPLPMDL0020000001	Akron	OH	44333	3/11/2015	Dr told me that last week he had two(2) patients come in for follow up appointments and have been on Butrans either 10or 20mcg for 8+ months and had recently received a refill prior to the follow up appointment. Dr said that both patients has severe rashes from Butrans at the application site with blistering. Dr said he discontinued the product and thinks it could possibly be the LOT# and will try writing it again in a few months. I told dr I will to report it. Dr said he did write a Hysingla yesterday for a patient on Zohydro and write the 20mg tablet. Dr said the patient did pick it up at a Walgreens in Ravenna. I reminded dr about dosing and conversions along with appropriate candidates. Told dr to also continue converting patients to oxycotin as they are appropriate.
PPLPMDL0020000001	Westlake	OH	44145	3/11/2015	Dr is not a target, but was in the lunch room during my presentation with my t-2 primary care doctor.
PPLPMDL0020000001	Akron	OH	44313	3/11/2015	Quick message about using oxycotin 10mg q12 for his IR oxycodone 20mg a day. I asked him if he has patients who fit this profile? Dr said yes. Told dr to use hysingla for his patients already on Norco and are in daily, around the clock pain. Showed him the dosing with conversions. Dr asked about insurance coverage. Told him to currently use it for his commercial patients.
PPLPMDL0020000001	Rocky River	OH	44116	3/11/2015	Talked about the options for hydrocodone patients who are not satisfied with thei pain control the possible options of hysingla. Reviewe conversion and attributes. Covered managed care...highlighted Butrans schedule three and dosing. Touched on abuse det properties for oxycotin and hysingla
PPLPMDL0020000001	Cleveland	OH	44113	3/11/2015	At Nickels lunch-should be moved up to at least a tier 4 because she is rxing it in appropriate pts-tramadol failures and opioid naive-also likes it after IR hydrocodones short course
PPLPMDL0020000001	Stow	OH	44224	3/11/2015	Spoke with Jamie concerning the cvs on Water Street in Kent turning away customers and most recently with a hysingla customer. Jamie told me to call the cvs area manager AI to let him know. I called AI and left him a
PPLPMDL0020000001	Berea	OH	44017	3/11/2015	Discussed abuse det properties of hysingla and OxyContin. Reviewed dosing and managed care,Md. said he would consider hysingla.
PPLPMDL0020000001	Akron	OH	44333	3/11/2015	Elise said she also had two patients have adverse reactions from the Butrans patch the same week as Dr Vucetic. Elise said each patient had previously been on it for 8+ months and cam in for follow up appointments with severe rash with blistering at he application site. Elise said she discontinued the product. I told elise I would report the adverse event information. I told her to keep the q12 OxyCotin in mind for those already on oxycodone and have pain around the clock. I asked her if she thinks she sees the need to write hysingla? Elise said that she does have a patient who is taking 10mg or Norco 4 times a day and will consider it for that patient. Reviewed dosing and conversions.
PPLPMDL0020000001	Cleveland	OH	44114	3/11/2015	Introduction to office-Butrans-dr said he likes it in opioid naive pts and tramadol failure pts-I agreed with dr that these are excellent patients-dr told me that the 7.5mcg patch for some reason isn't getting covered by workers comp-all the others are-I told him I will look into the issue; OxyContin-discussed in oxycodone pts and keeping the same molecule to transition to-dr agreed that's where he tries to rx it
PPLPMDL0020000001	Bedford	OH	44146	3/11/2015	Dr said the speaker program went well last night and he will continue to look for more pts for OxyContin and Butrans
PPLPMDL0020000001	Akron	OH	44320	3/11/2015	Showed Monique the dosing and conversion information for Butrans and Hysingla. Explained where each product should be used and asked her if she has patients on either tramadol or Norco around the clock? Monique said she had many of them and asked about managed medicaid coverage and medicare coverage. I asked her if she believes in the product clinical information first? She said she did. I have her the insurance information and asked her to write.
PPLPMDL0020000001	Westlake	OH	44145	3/11/2015	Reviewed hysingla, attributes and conversion. Dr asked about managed care,which I addressed. Spoke about trying hysingla for A patient that has tried and failed many opioids and is ready for a new option, per our indication.
PPLPMDL0020000001	Tallmadge	OH	44278	3/12/2015	Dr agreed. Dr said his biggest hesitation is managed care. Gave him the rGrid and reviewed coupon. Talked about Butrans and caresource coverage and med. and touched on OxyCotin during the presentation.
PPLPMDL0020000001	Westlake	OH	44145	3/12/2015	Spoke with dr as I was talking to dr Cremer. I reviewed the indication for ER opioids and attributes of Butrans and hysingla ER. Dr said the hysingla sounds like it would have a distinct place and can see how Norco patients might really like it. I asked dr if he might have a patient that is taking Norco on a daily, around the clock basis? Dr said probably not because that's pain managements type of patient.
PPLPMDL0020000001	Fairview Park	OH	44126	3/12/2015	Reviewed hysingla and dosing. A few attributes. Dr said he was interested about managed care. Spoke the plans and then turned it to Butrans s and Oxycontin for coverage
PPLPMDL0020000001	Cleveland	OH	44195	3/12/2015	Reviewed hysingla with Erica the office manager and nurse. Scheduled a breakfast to review product w dr in a few weeks. Gave invite to march program. Erica's aid she would pass the message verbally to the dr.
PPLPMDL0020000001	N Royalton	OH	44133	3/12/2015	Reviewed OxyContin Savings cards,Formulary along with Butrans/Hysingla ER for those patients requiring around the clock analgesia, Said Ok will continue to consider for appropriate patients. Program invite
PPLPMDL0020000001					Handed him portfolio piece through the window and asked if he has thought of butrans for any patients since our last talk. He told him to remind him. I quickly reviewed butrans and appropriate patient type, and started to introduce Hysingla but we were interrupted. Told him I'd leave new product information and we can discuss next time or he can call me.
PPLPMDL0020000001	Cleveland	OH	44195	3/12/2015	Quick Review of OxyContin Savings cards,Formulary along with Butrans/Hysingla ER for those patients requiring around the clock analgesia, Said Ok will continue to consider for appropriate patients. Program invite
PPLPMDL0020000001	Cleveland	OH	44115	3/12/2015	Reviewed Butrans Savings cards,Formulary along with Hysingla ER for those patients requiring around the clock analgesia, Said Ok will continue to consider for appropriate patients. Program invite
PPLPMDL0020000001	Cleveland	OH	44130	3/12/2015	Began with insight 9. Got the docs attention and re introduced Hysingla and appropriate patient. Gave him titration guide and formulary grid. Told him he may see a patient today who is taking 4 or more Norco and is around the clock pain where Hysingla may be appropriate choice. Reminded him that butrans is now up to 5 doses, which will he start with?

PPLPMDL0020000001	Richmond Heights	OH	44143	3/12/2015	Met with pharmacy Kristi. Using Purdue portfolio tri fold, discussed our profile. Discussed scheduling, dosing and appropriate patients. Kristi asked if Hysingla ER is anything like Zohydro. I replied, different company, different product altogether. Discussed abuse deterrent properties/Tier 1, 3 FDA labeling for both OxyContin and Hysingla ER. Kristi says she cannot pre order, but will be happy to order should a script come in.
PPLPMDL0020000001	Cleveland	OH	44195	3/12/2015	No new information learned on this call.
PPLPMDL0020000001	Tallmadge	OH	44278	3/12/2015	No new information learned on this call.
PPLPMDL0020000001	Richmond Heights	OH	44143	3/12/2015	No new information learned on this call.
PPLPMDL0020000001	CLEVELAND	OH	44195	3/12/2015	Reviewed Portfolio with Troy, Will recommend when appropriate, No new information learned on this call. Program initie
PPLPMDL0020000001	Cleveland	OH	44195	3/12/2015	Quick intro and review of Hysingla ER/OxyContin (Jay Rph mgr.) no new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	3/12/2015	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	3/12/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44134	3/12/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44109	3/12/2015	Reviewed portfolio, No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	3/12/2015	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	3/12/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	3/12/2015	They agreed to stock. Spoke to Scott the oharmany at about mail orders and he told me it varies in terms of refills for opioids. We talked about coupons and p auth process. Reviewed attributes of products
PPLPMDL0020000001	Cleveland	OH	44195	3/12/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44134	3/12/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/12/2015	Told dr that I met with the office manager last week and Hysingla ER has been added with all doses in their EHR system. Dr said that's great news and is trying to find the right patient. I asked him who that is and he said anyone with commercial insurance on chronic Norco. I showed dr the conversions and dosing and told him if they are taking it on a daily, around the clock basis and in pain they could be appropriate. Left Butrans conversions guide and the Helen profile.
PPLPMDL0020000001	Lakewood	OH	44107	3/12/2015	No new information learned on this call.
PPLPMDL0020000001	Mayfield Village	OH	44143	3/12/2015	Met with medical assistant at front desk. Using Purdue tri fold portfolio, discussed 3 different patient types who meet indication for Hysingla ER, Butrans and OxyContin.
PPLPMDL0020000001	Cleveland	OH	44111	3/12/2015	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	3/12/2015	No new information learned on this call.
PPLPMDL0020000001	Lyndhurst	OH	44124	3/12/2015	Met with med asst at front desk. Discussed Purdue product portfolio. Discussed product core messaging including schedule, dosing and patients who meet Extended Release opioid indication and whom have pain daily, around the clock, long term and for whom other treatment options have been inadequate.
PPLPMDL0020000001	Tallmadge	OH	44278	3/12/2015	Quick hello while talking to dr Cremer and discussed Butrans and hysingla ER attributes and where and why to use. Dr said he can possibly see Butrans but doesn't want to manage chronic pain.
PPLPMDL0020000001	Euclid	OH	44119	3/12/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	3/12/2015	No new information learned on this call.
PPLPMDL0020000001	Highland Heights	OH	44143	3/12/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/12/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	3/12/2015	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	3/12/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44111	3/12/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	3/12/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	3/12/2015	No new information learned on this call.
PPLPMDL0020000001	Waterford	OH	45786	3/12/2015	I-Butrans managed-care and dosing. OxyContin managed-care and start principles. Hysingla dosing, titration, boxed warning, managed-care, ADP properties and co-pay cards. W-had questions about cost, coverage for Butrans
PPLPMDL0020000001	Waterford	OH	45786	3/12/2015	I-Butrans managed-care and dosing. OxyContin managed-care and start principles. Hysingla dosing, titration, boxed warning, managed-care, ADP properties and co-pay cards. W-had questions about cost, coverage for Hysingla
PPLPMDL0020000001	Stow	OH	44224	3/12/2015	Saw dr at window and told her to focus on cox 2 inhibitor and tramadol patients that are in daily around the clock pain. I asked her if she believes she can find a Norco patient that may be appropriate for hysingla? Dr said she thinks it's going to be a good medicine but is worried it's going to be too expensive. I told dr to focus on commercially insured patients and that there may be prior authorizations. Dr said she understands.
PPLPMDL0020000001	Euclid	OH	44119	3/12/2015	Lunch. Total office call. met with nurse mgr Vonne and floor nurse Carla. Summarized last call with Paul. He admitted to being unsure exactly whom to use Hysingla ER for. Reviewed Sonia patient profile and he has better understanding of patient type; and patient that is covered on commercial insurance. Discussed patient type for OxyContin and Butrans as well. Asked Paul to consider my product portfolio for patients who need a change (Hysingla ER =opioid rotation); opioid naive or not controlled on Tramadol (Butrans) and for patients on oxycodone plain, OxyContin q 12 h dosing schedule. Asked Paul to keep my products in mind today, tomorrow and early next week. He will use all moving forward.
PPLPMDL0020000001	Parma	OH	44129	3/13/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44109	3/13/2015	Reviewed portfolio. No new information learned on this call.
PPLPMDL0020000001	Brooklyn	OH	44144	3/13/2015	Reviewed OxyContin, Butrans/Hysingla ER for those patients failing on present therapy requiring around the clock analgesia, Savings cards, formulary opportunities, Program invite Said Ok will consider for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44113	3/13/2015	Reviewed Butrans/Hysingla ER/OxyContin for those patients failing on present therapy requiring around the clock analgesia, Savings cards, formulary opportunities, Said Ok will continue to try and get patients covered on Hysingla ER along with the appropriate Patients for Butrans and OxyContin
PPLPMDL0020000001	Independence	OH	44131	3/13/2015	Used portfolio piece to discuss ER pain options. Reviewed appropriate patient for familar products and discussed specifics of Hysingla and oxycontin regarding abuse deterrent characteristics. Reviewed they can still be abused. he thinks it is important to have these ER options. Discussed formulary and FDA draft guidance.
PPLPMDL0020000001	Cleveland	OH	44113	3/13/2015	No new information learned on this call.
PPLPMDL0020000001	Mogadore	OH	44260	3/13/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44124	3/13/2015	Met with medical assistant at front desk. Discussed Purdue 's tri-fold portfolio; and 3 single entity, extended release opioids for Dr. C patients with daily, around the clock, long term pain, who might benefit from extended release delivery system. Left literature for Dr. C's review.
PPLPMDL0020000001	CLEVELAND	OH	44195	3/13/2015	Reviewed branded OxyContin along with Hysingla ER, Said ok
PPLPMDL0020000001	Cleveland	OH	44113	3/13/2015	No new information learned on this call.
PPLPMDL0020000001	Stow	OH	44224	3/13/2015	Short conversation with Holly about hysingla and discussed attributes and her stocking one bottle. Holly said she doesn't see the volume of narcotics at her location to justify the expense. I told her I understand and hopefully things will change.
PPLPMDL0020000001	Maple Heights	OH	44137	3/13/2015	No new information learned on this call.
PPLPMDL0020000001	Mayfield Hts	OH	44124	3/13/2015	Coffee appointment. Using Purdue portfolio tri-fold, discussed patient types for Butrans, reinforced BWC and Medicare access for Butrans; discussed conversion from same molecule, Jto different/extended release delivery system for both Hysingla ER and OxyContin. Asked for patients for all 3 portfolio products on his schedule today, early next week. Reinforced, best access for patients for Hysingla ER (commercial/private insurance.)
PPLPMDL0020000001	Brooklyn	OH	44144	3/13/2015	Presented portfolio, discussed utilization and stocking. No new information learned on this call.
PPLPMDL0020000001	Mayfield Heights	OH	44124	3/13/2015	Met with med asst at front window. Discussed Purdue portfolio, patient types, scheduling and formulary status. Left literature for Josie's review.
PPLPMDL0020000001	Maple Heights	OH	44137	3/13/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	3/13/2015	Reviewed Butrans/Hysingla ER for those patients failing on present therapy requiring around the clock analgesia, Savings cards, formulary opportunities, OxyContin every 12hours, Said Ok will continue to try and get patients covered on Hysingla ER
PPLPMDL0020000001	Euclid	OH	44119	3/13/2015	RN Carla Van Pelt called me- Paul Gawry just wrote his first Hysingla ER script for a female patient who is covered on both Medicare, Medicaid. She's on 5 mg Norco q4= 20 mg. Paul wrote a 20 mg Hysingla ER for this patient (she's on disability) Carla wants to know if Hysingla ER will need a prior Auth in this situation. I responded - most likely - and it may not get approved, as we don't have preferred formulary status with either of those plans yet. I let Carla know I'd follow up early next week to determine if prior auth went through. Since its Friday - almost 3 pm - the prior auth will not get approved until Mon- Wed of next week. Let Carla know to call me any time if I can be of further assistance & that I will call- stop by mid next week.
PPLPMDL0020000001	Parma	OH	44129	3/13/2015	Quickly handed her portfolio piece and initiation guide for Hysingla through the window. Let her know ther is an ER hydrocodone available with abuse deterrent characteristics. She said she typically writes for Oxycodone, but this is good to know.
PPLPMDL0020000001	Uniontown	OH	44685	3/13/2015	Told dr that I would like him to continue to identify appropriate candidates for Oxycontin and reviewed q12, abuse deterrent properties. I asked him if he's seen the Hysingla information I've left and dr said he read up on it already and said he might use it. I asked what reservations he has and he said cost because it's a new medicine that's a narcotic. I told him we will discuss that at lunch next week and the coverage is actually ok.
PPLPMDL0020000001	Cleveland	OH	44104	3/13/2015	Reviewed OxyContin, Butrans/Hysingla ER for those patients failing on present therapy requiring around the clock analgesia, Savings cards, formulary opportunities, Said Ok but sends most patients to Pain mgmnt
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/13/2015	Streetsboro office- dr busy but said will see me next time and to setup a lunch to discuss Butrans and OxyContin
PPLPMDL0020000001	Cleveland	OH	44113	3/13/2015	Reviewed Butrans/Hysingla ER for those patients failing on present therapy requiring around the clock analgesia, Savings cards, formulary opportunities, Said Ok will continue to try and get patients covered on Hysingla ER
PPLPMDL0020000001	Stow	OH	44224	3/13/2015	Saw dr Wynne at check out and asked her if she feels comfortable identifying patients for oxycontin who are already taking the oxycodone molecule but in IR form? Dr said that is the easiest way to start a patient if they are already taking ixcodone. I asked her if she also might have a patient or two who is on Norco on a daily, around the clock basis? She said she does. I asked her if a q24, ER hydrocodone that is abuse deterrent and no APAP might be something she's interested in? She said she has read over the materials I've left and thinks she mite have use for it. Nothing else learned.
PPLPMDL0020000001	Cleveland	OH	44130	3/16/2015	Doc said that they are getting away from prescribing pain meds in their practice. They feel the state of Ohio discourages their prescribing of that class of meds. We discussed how backed up the pain docs are and their patients can't get in fast enough to treat their pain. He was very interested to hear about C3 butrans as an option. Reviewed appropriate patient type, dosing, initiation, formulary coverage. He thinks that he will start many pain patients on butrans and then refer them to pain management. Reviewed portfolio piece and reviewed appropriate patient type for Hysingla and oxycontin for his background information although he wasn't as interested
PPLPMDL0020000001	Cleveland	OH	44130	3/16/2015	Using portfolio piece, discussed the positioning and appropriate patient type for each product. He believes the ER meds work and prefers ER dosing to IR frequency and there is a patient now and then that he will prescribe them for. Reviewed butrans initiation and titration, application sites and doses.



PPLPMDL0020000001	Cleveland	OH	44130	3/16/2015	Doctor said that writing opioids is something that he doesn't want to do because it puts his license at risk. He has been researching this and is very troubled by what he is hearing about doctors getting in trouble when they prescribe opioids. We discussed responsibly selecting appropriate patients and proper documentation.
PPLPMDL0020000001	Westlake	OH	44145	3/16/2015	Hydrocodone insight. Discussed main attributes of hysingla- dr said there are so many new pain meds on the market. We talked about how tricky it can be treating chronic pain and the need for various options. Highlighted the uncontrolled hydrocodone patient to hysingla.
PPLPMDL0020000001	Parma	OH	44134	3/16/2015	No new information learned on this call.
PPLPMDL0020000001	Middleburg Heights	OH	44130	3/16/2015	Doctor was resistant to opioid discussion. She believes that doctors are writing too many opioids and perpetuating the Drug problem.
PPLPMDL0020000001	Westlake	OH	44145	3/16/2015	Discussed hydrocodone insight. No and dr said they don't write much hydrocodone e and haven't in years. Talked about the phile profile...asked if this represented one of his pain patients. He said yes. He asked about converting Percocet to hysingla. I addressed but asked for that patient on the oxycodone molecule, why wouldn't you change to OxyContin at that point. Dr said he usually does. We talked about the OxyContin and Butrans managed care coverage. Np said he likes Butrans but doesn't have many pain patients. I asked how many does he change to Butrans a month if he had to guess. He said one or two. We talked about having the discussions to keep the information fresh because he doesn't write it very often and knowing when to write it and for the right patient was important to me. He said he could see that. We talked about the dosing of Butrans Brian said many of his patient were starting at 5. I asked how he handles break thru with his patients on Butrans. Dr said Tylenol or NSAID. Dr said he won't write two scripts for two different opioids. I asked how he felt about the dosing of the patch Butrans and the hysingla daily dosing. He said it was fine. We covered scheduling and why his patients might like an option like this. Dr said they will want their pills. I said why? Dr couldn't explain. Reviewed fair balance of abuse potential as with all opioids including mine.
PPLPMDL0020000001	Cleveland	OH	44109	3/16/2015	Reviewed Hysingla ER/OxyContin and Butrans for those requiring around the clock analgesia, formulary coverage, Savings cards. Said ok, refers patients out to pain mgmnt for chronic pain but will consider for appropriate
PPLPMDL0020000001	Cleveland	OH	44130	3/16/2015	Used portfolio piece to discuss appropriate patient types O, H, B. Doctor believes patients should be on ER meds once they are taking more than 3 or more pills per day. He has made up his mind to limit his prescribing of Tylenol combination products. He believes that it is too hard on the liver and not required for most of the patients in long term pain. For that reason also, He is a believer in Hysingla but has not yet prescribed it for any of
PPLPMDL0020000001	Garfield Hts	OH	44125	3/16/2015	Reviewed OxyContin,Hysingla ER/Butrans for those patients failing on present therapy requiring around the clock analgesia, Formulary opportunities,Cover my Meds and Savings cards. Said Ok will continue to consider for appropriate patients.
PPLPMDL0020000001	Westlake	OH	44145	3/16/2015	Talked about the NSAID patient and Howe treats pain after this point. Dr said saves opioids for last resort and tends to write very little pain medications. We reviewed opioid naive pain results and talked about dosing and Butrans attributes. Talked about hysingla and attributes.
PPLPMDL0020000001	Stow	OH	44224	3/16/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	3/16/2015	Talked about what hysingla is and manged care plans they typcall see. Asked about how ling does it take to get into the office, they said up to 4 weeks usually. They explained what their roles were and that they do little pa anymore, that's its mostly sue who does that. We talked about setting about request to see the dr and they said he isn't taking appts any longer.
PPLPMDL0020000001	Cleveland	OH	44109	3/16/2015	Reviewed portfolio with Ray. No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44109	3/16/2015	Reviewed portfolio with Tech. Will relay info to Alena-No new information learned on this call.99% Medicaid
PPLPMDL0020000001	Cleveland	OH	44130	3/16/2015	No new information learned on this call.
PPLPMDL0020000001	Euclid	OH	44117	3/16/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44125	3/16/2015	Reviewed portfolio. No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	3/16/2015	Talked about what hysingla is and manged care plans they typcall see. Asked about how ling does it take to get into the office, they said up to 4 weeks usually. They explained what their roles were and that they do little pa anymore, that's its mostly sue who does that. We talked about setting about request to see the dr and they said he isn't taking appts any longer.
PPLPMDL0020000001	Akron	OH	44312	3/16/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44109	3/16/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	3/16/2015	Daniele the nurse said the dr does not go to St. John westshore to see patients.
PPLPMDL0020000001	Westlake	OH	44145	3/16/2015	Identifying who is appropriate for Butrans and hysingla. Talked w staff on managed care.
PPLPMDL0020000001	Parma	OH	44129	3/16/2015	No new information learned on this call.
PPLPMDL0020000001	Fairlawn	OH	44333	3/16/2015	Spoke with Jessica about hysingla ER and discussed the attributes, dosing and conversions. Jessica said she thinks it a good product and is eager to move it. I told her about CommercialInsurance coverage and what we hope mid year with BWC and medicaid.
PPLPMDL0020000001	Akron	OH	44333	3/16/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44130	3/16/2015	No new information learned on this call.
PPLPMDL0020000001	Garfield Hts	OH	44125	3/16/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44109	3/16/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	3/16/2015	Confirmed the event I will be sponsoring on Wednesday this week. Dr said that he's prepared and thanked me for the sponsorship. I asked dr if he will continue finding appropriate candidates for Butrans and OxyContin and pointed out sections in FPI on hysingla treatment in the elderly and absorption and elimination. Dr said that's good information and will keep it in mind as he prescribes.
PPLPMDL0020000001	Akron	OH	44312	3/16/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/16/2015	Quick call with Lauren about hysingla ER. Reviewed the attributes, dosing and conversions. Karen said she's not sure if they have dispensed any but said she didn't have time to check. Oft her with the initiation and titration
PPLPMDL0020000001	Stow	OH	44224	3/16/2015	I told Sandra I missed her at lunch last time and wanted to know if she knows about hysingla ER? She said she wasn't sure so I provided her with an FPI and an initiation and titration guide. Reviewed attributes, dosing and conversions. She said it sounds like a product they would use in the office. I told her to identify just one patient in daily, around the clock pain on Norco. Reminded her to continue working on Butrans patient identification.
PPLPMDL0020000001	North Olmsted	OH	44070	3/16/2015	Gave indication and reviewed the conversion for Hysingla and a few attributes. Talked about hydrocodone insight and pharmacist thought the number was not shocking. Talked about oxycotn and hysingla and having abuse potential properties, gave her the pharmacist leave behind material.
PPLPMDL0020000001	Westlake	OH	44145	3/16/2015	Reviewed hysingla attributes and conversion, talked about abuse det properties of hysingla and OxyContin. Gave fair balance of abuse potentials even though the technology is present. Talked about dosing for Butrans and scheduling.
PPLPMDL0020000001	Olmsted Falls	OH	44138	3/16/2015	Talked about attributes of hysingla and OxyCotin. Asked him how he has seen mail away work for opioids. Pharmacist said it all depends. Talked about fair balance of abuse potential for our products and all opioids.
PPLPMDL0020000001	Cleveland	OH	44109	3/16/2015	Reviewed OxyContin Hysingla ER/Butrans for those patients failing on present therapy requiring around the clock analgesia, Formulary opportunities,Cover my Meds and Savings cards, Malak-said he will recommend when appropriate.
PPLPMDL0020000001	Garfield Hts	OH	44125	3/16/2015	Reviewed Hysingla ER/Butrans for those patients failing on present therapy requiring around the clock analgesia, Formulary opportunities,Cover my Meds and Savings cards
PPLPMDL0020000001	Akron	OH	44310	3/17/2015	Dr told me I came in as he was discussing the option of hysingla with a patient. Dr said that he patient lives in Florida but is a snow bird and will be back in a few months. Dr said the patient comes up from Florida to see him and the patient is currently on hydrocodone 30mg a day. Dr said he will most likely start the patient the next time he sees him but still has commercial insurance. Discussed identifying Butrans and OxyContin patients as well as those for hysingla. Shar said they are out of the copay cards for hysingla and need more.
PPLPMDL0020000001	Barberton	OH	44203	3/17/2015	Reviewed managed care grid and talked about any problems writing our products. We talked about attributes of hysingla like dosing and of Butrans. She said she would pass the message to the doctor.
PPLPMDL0020000001	Cleveland	OH	44106	3/17/2015	Quick OxyContin review along with Hysingla ER for those patients requiring around the clock analgesia, formulary opportunities, savings cards said ok will continue to consider for appropriate patients. invited to program, requested appt
PPLPMDL0020000001	Uniontown	OH	44685	3/17/2015	Short discussion with Kim about hysingla appropriate patients and conversions. Discussed insurance coverage and reminded about copay cards. I asked about prior authorizations and their protocol and she said that they use cover my meds which triggers a prior authorization form that is sent to the physician. She said the tough part is the time it may take for the doctors office to approve and add their notes to the form.
PPLPMDL0020000001	Cleveland	OH	44106	3/17/2015	Reviewed OxyContin every 12hours along with Butrans/Hysingla ER for those patients requiring around the clock analgesia, formulary opportunities, savings cards said ok will continue to consider for appropriate patients. Invited to
PPLPMDL0020000001	Cleveland	OH	44106	3/17/2015	Reviewed OxyContin every 12hours along with Butrans/Hysingla ER for those patients requiring around the clock analgesia, formulary opportunities, savings cards said ok will continue to consider for appropriate patients. Invited to program
PPLPMDL0020000001	Cleveland	OH	44195	3/17/2015	Reviewed Butrans/Hysingla ER for those patients requiring around the clock analgesia that are failing on present therapy,formulary opportunities, savings cards said ok will continue to consider for appropriate patients that she can gain acceptance.
PPLPMDL0020000001	Cleveland	OH	44106	3/17/2015	Reviewed OxyContin every 12hours along with Butrans/Hysingla ER for those patients requiring around the clock analgesia, formulary opportunities, savings cards said ok will continue to consider for appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44106	3/17/2015	Reviewed portfolio with Marge, Has Hysingla ER in stock and will support with stocking as utilization is presented
PPLPMDL0020000001	Cleveland	OH	44112	3/17/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	3/17/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44103	3/17/2015	Reviewed portfolio with Tech. had floater today, will be getting a new Rph. next month.
PPLPMDL0020000001	Cleveland	OH	44106	3/17/2015	No new information learned on this call.
PPLPMDL0020000001	Uniontown	OH	44312	3/17/2015	No new information learned on this call.
PPLPMDL0020000001	Uniontown	OH	44685	3/17/2015	Discussed hysingla and Butrans attributes, dosing, conversions, patient type identification, insurance and copay cards. Dr said that I know she doesn't like to write for chronic pain but said she has a lot of patients on Norco and she can think of one who might be good for hysingla. Reviewed Jane profile and dr said she'd look into writing.
PPLPMDL0020000001	Tallmadge	OH	44278	3/17/2015	Reviewed hysingla ER to the pharmacy tech Jared. Discussed attributes, dosing and conversions. Jared said he can see how it would be a good product for those on chronic Norco therapy and said he knows they can't order until they see a Rx.
PPLPMDL0020000001	Cleveland	OH	44103	3/17/2015	Reviewed portfolio with floater,majority medicaid, No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	3/17/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	3/17/2015	No new information learned on this call.
PPLPMDL0020000001	East Cleveland	OH	44112	3/17/2015	Reviewed portfolio with Latoya.No new information learned on this call.
PPLPMDL0020000001	Barberton	OH	44203	3/17/2015	Talked with nurses about managed care for hysingla and tried to see the dr to get his approval to but coupons but didn't get the opportunity for the discussion. Highlighted Afew Butrans attributes.
PPLPMDL0020000001	Cleveland	OH	44106	3/17/2015	isted Pain mgmnt dept. along with Seidman,Presented portfolio of products to dept.

PPLPMDL0020000001	Akron	OH	44305	3/17/2015	I showed dr the patient profiles for Butrans with Helen and hysingla with Jane. I told him I want to ensure hysingla stays on his radar and to identify Norco patients who meet the indication. I showed him the Butrans dosing and conversions and dr said that he just wrote 2 already his week for patients on tramadol. I told dr that's great and he said they were both covered in insurance. I asked for continued prescribing.
	Uniontown	OH	44685	3/17/2015	Able to discuss over lunch a full discussion on oxycontin, hysingla and Butrans. Discussed with dr his beliefs on using oxycontin clinically and if he still believes there is a place for it? Dr said he does have a pa,de for it because he knows it works but it's safe, tolerable and potent. Reviewed Maggie profile and dosing with titration and abuse deterrent FDA tier discussion. Discussed hysingla ER attributes, dosing, conversions, plasma hydrocodone concentrations from the MVA, how to write it, insurance and copay cards. I asked dr what his thoughts are on hysingla and if he thinks he can find a place for it in his practice? Dr said he thinks it has a lot of great qualities but is concerned finding a place because a vast majority of patients in chronic pain are on mediad or medicare IR both. I told him to be very specific with his patient type identification and am sure he has some commercial patients that meet the indication.
PPLPMDL0020000001	Barberton	OH	44203	3/17/2015	Highlighted OxyCotin and hysingla and their abuse deter property attributes. Asked if she was comfortable with this language, she said sort of. I gave her the pharmacy leave behind materials. Reviewed the OxyContin tir status of core visual aid. Talked about Purdue Nd the current three branded products asked how she felt about treating chronic continuous pain with extended release release options.she said good. I asked if she calls drs and gives recommendations about changing meds and she said never. She said only if the dr asks about alternative options. She refused to stock hysingla until an established patient
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/17/2015	Spoke with Patrick about hysingla for the first time. He showed me the 20-40mg doses they have in stock. Reviewed attributes, dosing and conversions. Discussed half life and steady state. I reviewed insurance and copay cards and asked him what he does with patients that need a PA. He said they use cover my meds and a form is triggered to notify the prescriber usually via electronic notification. He said sometimes he will call the dr if the patient needs it right away to expedite the approval. Patrick said that they get done pretty quickly band cause the system works so well.
PPLPMDL0020000001	akron	OH	44685	3/17/2015	Reviewed hysingla in depth discussing attributes, dosing, conversions, plasma hydrocodone concentration graph from MVA, AEs and insurance and copay cards. Dr said that he can see how it's a good option and will look to use it. Reviewed Butrans and OxyContin dosing and conversions with patient type identification.
PPLPMDL0020000001	Mayfield Village	OH	44143	3/18/2015	Met with med asst at front desk. Discussed all 3 portfolio products; schedule, dosing and appropriate patients. Reinforced only write Hysingla ER for commercial/private insured. Left for Dr. Ashraf, Hysingla ER fpi, titration guide and Oxycontin slim jim.
PPLPMDL0020000001	Akron	OH	44333	3/18/2015	Spoke with dr at AGMC pain management symposium. Discussed with dr the product information I was offering at my booth. Discussed Butrans, oxycontin and hysingla dosing and attributes.
PPLPMDL0020000001	Akron	OH	44320	3/18/2015	Reminded dr that he said he wants to see me each week to keep him updated on Butrans. I showed him the initiation and titration guide and told him I know he has many patients on tramadol, Norco, and percocet that are in daily, around the clock pain. I told him where each product can be used and how to initiate and titrate. Dr asked about coverage with Butrans b cause he sees that being used mist because it's a patch. Provided CareSource pa information, medicare D coverage and commercial. Dr said ok and that he's going to use more Butrans. I told him I will work with Val to ensure coverage is there. Eco,ained copay cards for all products.
PPLPMDL0020000001	Northfield	OH	44067	3/18/2015	Didn't have much time. Qucly discussed ER options now available for the patients who are now in around the clock pain where IR is not the preferred dosing schedule. The Oxycodone patients have oxycontin with ADT and 7 doses and introduced Hysingla for the hydrocodone patient with ADT and once daily dosing. She believes it is a much needed option.
PPLPMDL0020000001	Westlake	OH	44145	3/18/2015	Brought more coupons and asked the dr to out in the patient rooms. The. Ruses told me they flagged a potential patient w the insurance coverage we have, awaiting the dr to see the patient later in the day. Discussed managed care for Butrans and discussed the appropriate patient
PPLPMDL0020000001	Cleveland	OH	44115	3/18/2015	Reviewed OxyContin, Butrans formulary opportunities, savings cards along with Hysingla ER for those patients failing on present therapy requiring around the clock analgesia, Said he will continue to consider and prescribe for appropriate patients, has a new start for Butrans in mind.
PPLPMDL0020000001	Cleveland	OH	44113	3/18/2015	Reviewed Hysingla/Butrans for those patients failing on the clock analgesia, said ok will continue to consider for appropriate patients.No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	3/18/2015	Reviewed Butrans formulary opportunities, savings cards along with Hysingla ER for those patients failing on present therapy requiring around the clock analgesia, Said she will continue to consider and prescribe for appropriate patients that have formulary coverage
PPLPMDL0020000001	Akron	OH	44307	3/18/2015	Spoke with Jeff and introduced him to hysingla. Discussed attributes, dosing and conversions and asked him if he fills a lot of Norco. Jeff said too much. I asked if he can see where hysingla fits and he said for sure but cost will be the biggest inhibitor for now. Reviewed formulary grid and other plans will come in due time.
PPLPMDL0020000001	Mayfield Village	OH	44143	3/18/2015	No new information learned on this call.
PPLPMDL0020000001	cleveland	OH	44135	3/18/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	3/18/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44105	3/18/2015	Reviewed portfolio,Hakim said due 99% medicalaid, RX coverage is essential.No new information learned on this call.
PPLPMDL0020000001	Brecksville	OH	44141	3/18/2015	No new information learned on this call.
PPLPMDL0020000001	Stow	OH	44224	3/18/2015	No new information learned on this call.
PPLPMDL0020000001	Mayfield Heights	OH	44124	3/18/2015	Discussed Purdue portfolio products with med asst at front window. Left literature for Dr. Dews. Discussed formulary status, each product. Left Hysingla ER fpi, OxyContin conversion guide for Dr. Dews.
PPLPMDL0020000001	Westlake	OH	44145	3/18/2015	No new information learned on this call.
PPLPMDL0020000001	NORTHFIELD	OH	44067	3/18/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44320	3/18/2015	No new information learned on this call.
PPLPMDL0020000001	Fairlawn	OH	44333	3/18/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44109	3/18/2015	Reviewed portfolio No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	3/18/2015	Highlighted the hydrocodne patient uncontrolled and appropriate for hysingla. Talked about a few attributes.
PPLPMDL0020000001	Cleveland	OH	44115	3/18/2015	Visited IM/FP clinicians, reviewed Portfolio.No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44115	3/18/2015	REviewed portfolio with George.No new information learned on this call.
PPLPMDL0020000001	Northfield	OH	44067	3/18/2015	No new information learned on this call.
PPLPMDL0020000001	Macedonia	OH	44056	3/18/2015	No new information learned on this call.
PPLPMDL0020000001	Strongsville	OH	44136	3/18/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	3/18/2015	Discussed w her and her nurses hysingla and covered abuse det properties of OxyCotin and hysingla. Gave fair balance of abuse potential for all opioids including the ones I promote. Dr said she isn't treating pain anymore, just acute. I asked how she treats osteoarthritis and she paused and said she might treat some pain. We talked about the dosing of hysingla and how to convert. Reviewed managed care for our products. I asked her if she was hesitant treating pain with an extended release product, she said no. I asked how could she address an on oa patient w atc pain w an opioid. Dr didn't want to explain but asked me about managed care again.
PPLPMDL0020000001	Sagamore Hills	OH	44067	3/18/2015	Doctor said that every once in while she will write a few IR meds, but will consult with the other docs in the practice if ER is more appropriate. She does not treat pain really. Discussed butrans as the only ER c3 opioid on the market and that might be a good option for her patients in around the clock pain after a few tramadol don't seem to be enough analgesia. Introduced Hysingla and discussed oxycontin and Hysingla's abuse deterrent properties. She believes that it makes sense to have those characteristics in pain meds and appreciated the information.
PPLPMDL0020000001	Cleveland	OH	44126	3/18/2015	Discussed his lthoughts on abuse deter properties. He said they are important and we talked about current immediate release options and how he feels about using them prn atc for chronic pain. We talked about appropriate patients for hysingla and oxycootr, read the indication. Gave fair balance of abuse potential of all opioids.
PPLPMDL0020000001	Westlake	OH	44145	3/18/2015	Spoke to nurses about hysingla and the upcoming dinner program. Invited the dr, he was not sure he could attend. Reviewed hysingla dr had a concern w managed care. Touched on in Butrans and highlighted attributes.
PPLPMDL0020000001	Bedford	OH	44146	3/18/2015	Doc believes in Hysingla and says that he has written it for 4 patients so far and he knows there will be more. Meh wishes the coverage was better because that is the limiting factor. I told him I need his support to help drive the insurance companies to approve it faster. He said that he will do his best. Reminded him that butrans has 5 doses and that the butrans patient is ideal before hydrocodone.
PPLPMDL0020000001	Cleveland	OH	44113	3/18/2015	Quick review of OxyContin every 12hours and Intro to Hysingla ER, Said ok new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44111	3/18/2015	Reviewed hysingla and attributes. Covered managed care. Covered fair balance of abuse potential for all opioids including my product promoted.
PPLPMDL0020000001	Westlake	OH	44145	3/18/2015	Discussed hysingla attributes and covered fair balance of abuse potential. Gave hydrocodone insight.
PPLPMDL0020000001	Solon	OH	44139	3/19/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	3/19/2015	He enjoyed the Hysingla program particularly the peer discussion after the slide presentation . He likes it when practitioners get together to discuss their practices. Quickly pulled through formulary and where best success will be when he writes Hysingla.
PPLPMDL0020000001	Cleveland	OH	44113	3/19/2015	Discussed Butrans and Hysingla ER for those patients requiring around the clock analgesia, that are failing on present therapy, Formulary opportunities, said ok will continue to consider for appropriate patients that have
PPLPMDL0020000001	Cleveland	OH	44120	3/19/2015	Quick review of OxyContin every 12hours along with Butrans and Hysingla ER for those patients requiring around the clock analgesia, Formulary opportunities, said ok will consider for appropriate patients,
PPLPMDL0020000001	Garfield Hts	OH	44125	3/19/2015	Quick review of OxyContin every 12hours along with Butrans and Hysingla ER for those patients requiring around the clock analgesia, Formulary opportunities, said ok will continue to consider for appropriate patients,
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/19/2015	Good conversation with dr about how he's deciding to write Butrans or hysingla for a hydrocodone patient taking it around the clock? Dr said honestly it's insurance coverage. Dr said that Butrans is just so much easier to get covered. He said he really likes hysingla but is finding great success with Butrans because patients love the patch and only have to put one on each week. I told dr that possibly if a patient can't tolerate Butrans then hysingla is an option? Dr said for sure and would do that. I told dr to continue to use the Butrans if it works and patients like it so much.
PPLPMDL0020000001	Richmond Heights	OH	44143	3/19/2015	Met with med asst at front desk. Discussed Purdue extended release single entity pain products. discussed patient access and savings for each product.
PPLPMDL0020000001	Stow	OH	44224	3/19/2015	Forgot to enter she said she likes Butrans for opioid naive and after tramadol or low dose opioids-she said she has had some denials on certain plans-I asked her if she can find out what plans they are and even a copy of the letters would be great-she said she would
PPLPMDL0020000001	University Hts	OH	44118	3/19/2015	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	3/19/2015	Reviewed managed care w Beth and the dr about hysingla and dosing.
PPLPMDL0020000001	Rocky River	OH	44116	3/19/2015	No new information learned on this call.
PPLPMDL0020000001	Valley View	OH	44125	3/19/2015	Reviewed portfolio with Aaron, invited to program will hope to attend.No new information learned on this call.
PPLPMDL0020000001	Stow	OH	44224	3/19/2015	No new information learned on this call.
PPLPMDL0020000001	C. Falls	OH	44223	3/19/2015	Spoke to Cindy the pharmacist about hysingla and she told me she has filled 6 prescriptions for hysingla ER. All 20mg and 5 came from Ali and the other was Sable. She told me that 2 were at \$0 copay, 2 were \$5 copay, one for \$25 and the other for \$70. She said the patients are very happy that the process is very easy and are pleased it was quick and inexpensive.
PPLPMDL0020000001	Cleveland	OH	44113	3/19/2015	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	3/19/2015	No new information learned on this call.

PPLPMDL0020000001	Barberton	OH	44203	3/19/2015	Saw dr sitting at front desk-dr said he is rxing a lot of Butrans for his pts-directed to tramadol pts as discussed before and he said he is rxing in those pts; OxyContin-reminded to keep it simple in pts already on Percocet and transition to same molecule
PPLPMDL0020000001	Stow	OH	44224	3/19/2015	Forgot to enter-new to Geigers office-new little opioid background but familiar with Butrans-asked about coverage and went over formulary grid and gave him a copy-mentioned to him about caresource and he said he will definitely look out for those pts to put on Butrans
PPLPMDL0020000001	Lyndhurst	OH	44124	3/19/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	3/19/2015	Spoke with Kimase about all products and introduced hysingla ER. Discussed patient types for Butrans, OxyContin and hysingla. Discussed hysingla attributes, dosing and conversions. She asked about conversions for Butrans and OxyContin which we discussed. I asked her if she gets a PA for any medicine what their protocol is? She said they use cover my meds and it will automatically contact the office via fax or email. Whatever is in the system.
PPLPMDL0020000001	Lyndhurst	OH	44124	3/19/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/19/2015	Short discussion about Butrans and hysingla patient types. Dr said he has written a Rx for hysingla and said that how he chooses patients for each one depends on how the patient reacts to the discussion about ER opioids. Dr said he still is a Butrans man but will continue to find those on Norco who may do better on hysingla. Discussed Conversions of each product and copy cards.
PPLPMDL0020000001	Highland Heights	OH	44143	3/19/2015	No new information learned on this call.
PPLPMDL0020000001	Tallmadge	OH	44278	3/19/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44104	3/19/2015	Reviewed portfolio with Abdul, No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44102	3/19/2015	Reviewed portfolio with Ed, invited to upcoming program, said he plans on attending and will register.No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44115	3/19/2015	Visited pain mgmt dept. Discussed Hysingla and Butrans with Dawn,
PPLPMDL0020000001	Lakewood	OH	44107	3/19/2015	Dr going on vacation for a week. Highlighted attributes and talked about abuse deter properties of hysingla and OxyContin. Asked to schedule a lunch, but office manager said to check back after his trip when I ts slow Down from him being done.
PPLPMDL0020000001	Akron	OH	44312	3/19/2015	Short discussion in his office about how he should be very specific with his selection of candidates for oxycontin and hysingla. Dr pulled out the hysingla initiation and titration guide and looked over the doses and conversions. Dr said he thinks he has a few patients for hysingla and asked about insurance. I told him he had SummaCare, cvs Caremark, medical mutual and other commercial plans that are paying for hysingla. Reviewed copy cards and average coats before the cards.
PPLPMDL0020000001	Rocky River	OH	44116	3/19/2015	Dr might attend the diner program on the 14th for hysingla. Reviewed conversion and abuse deter properties of OxyContin and hysingla. Fair balance of abuse potential for all opioids including ours.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/19/2015	Called and asked to speak to the pharmacist and was told that she was just too busy. I explained about how I had a new product called hysingla and if they were familiar? He said no so I discussed attributes and dosing. He asked me to stop in and I told him the pharmacist are always too busy to talk.
PPLPMDL0020000001	Highland Heights	OH	44143	3/19/2015	Met with tech Racquel & pharmacist PJ. He states that 1 patient, a female new to Dr Laham was placed on Hysingla ER. They still have yet to dispense Butrans. Discussed & left OxyContin Pharmacists guide, as he had questions on dosing. He states that one HCP has a patient on 80 mg OxyContin q 8 h. I asked if he called that physician & questioned them due to FPI stating that OxyContin is to be dosed q12 h. PJ stated he did, and the physician said I know that, but this is the dosing schedule that's working for the patient. I let PJ know if this happens in the future, he can decide whether he is comfortable filling or not. Also left him Pharmacy times article. He says literature I left today is helpful [PJ says it's been past 30 days & Laham patient hasn't com back in - perhaps she switched pharmacies?
PPLPMDL0020000001	Stow	OH	44224	3/19/2015	Lunch-Butrans-dr and NP/PAs have reed with some managed healthcare kickbacks-asked dr and staff that when that happens to get denial letter for me to look into and they agreed-discussed after tramadol and Cox 2 pts where pain control isn't adequate or not tolerated-dr said he likes the fact it is schedule 3 and easier for pts and staff for refills; Sandra-she said she likes it in small population in her practice with addiction pts coming off suboxone because of same molecule and they do very well-only about 5% of practice-she agreed tramadol pts are good choice; OxyContin-not allowed to rx in practice per dr
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/19/2015	Spoke with Bobby the pharmacist who floats amongst the giant Eagles. Reviewed the hysingla attributes, dosing and conversions. I asked him if he can ask the techs IR another pharmacist if they are familiar? He said they do know about it because he told them. I asked if he has seen any prescriptions and he said no and they will order once they see it. Discussed half life and steady state and he said that's good info to know.
PPLPMDL0020000001	Parma	OH	44129	3/19/2015	Two points for patients in around the clock pain. ER dosing like q12 oxycontin or q24 Hysingla is appropriate for that patient type instead of dosing IR in 3-4 hour increments. Thoughts?<font color=blue><b>CHUDAKOB's query on 07/18/2015</b></font>Kathy, this call note implies that q12n or q24 dosing may be more appropriate than dosing an IR in 3-4 hour increments? Is this what you meant in this note. Thank you!<font color=green><b>LARAWEKA's response on 07/19/2015</b></font>-I always say an appropriate option. I make sure never to imply that it is more appropriate, but for a patient in around the clock pain, that dosing might be appropriate for some patients.<font color=blue><b>CHUDAKOB's query on 07/20/2015</b></font>-By using the word "instead" you are implying a more appropriate use. You can say for patient taking hydrocodone 3-4 times/day, Hysingla ER offer another option for patients that meet our indication. When we say one instead of another, there is an implication of superiority. Does this make sense?<font color=green><b>LARAWEKA's response on 07/20/2015</b></font>-Yes<font color=blue><b>CHUDAKOB added notes on 07/21/2015</b></font>-Thank you.
PPLPMDL0020000001	Stow	OH	44224	3/19/2015	Forgot to enter call-she said she likes Butrans when she can get it covered-I asked for specific plans and she couldn't remember off the top of her head-I asked her to let me know when that happens and to call me and get me letters so we can look into denials-she said she would and appreciated our concern-otherwise she said her pts do well on it and discussed after tramadol and caresource-she said she does Rx it there and will look for caresource pts to put on
PPLPMDL0020000001	Rocky river	OH	44116	3/19/2015	Follow up on our last conversation around mail away plans. Highlighted OxyCotin and Butrans coverage and asked her for the patients that have failed everything a shot for Hysingla given our managed care status in her office.
PPLPMDL0020000001	Akron	OH	44312	3/19/2015	Invited her to program next week, she can't go. Dr said that he has a patient in the waiting room as we were talking that he recently started on hysingla 30mg and got it from the pharmacy. Dr said he gave him a copy card and is waiting to see him. I asked what the patient was on and he said Norco 5/325 q4 and it was an essay sell to the patient because he wanted fewer pills. I told dr that's great news and to continue looking for additional patients. Reminded dr to continue using Butrans for one on tramadol around the clock.
PPLPMDL0020000001	South Euclid	OH	44121	3/20/2015	Met with med asst at front desk. Discussed Purdue tri-fold portfolio of products and left for Dr. DeJoseph's review. Discussed Hysingla ER core messaging, patient access, and left titration guide, fpi for Dr. DeJoseph. Left Oxycontin slim jim as well.
PPLPMDL0020000001	Beachwood	OH	44122	3/20/2015	She is crazy busy today but said she needs more reminders about Hysingla. She has to talk to docs about it. Reviewed formulary situation for Hysingla quickly but let her know that coverage is excellent for oxycontin appropriate patients.
PPLPMDL0020000001	Munroe Falls	OH	44262	3/20/2015	Told dr that I would like her to think of oxycontin and hysingla as the ER options when she sees patients that are in daily, around the clock pain. I explained the appropriate patients for oxycontin and reviewed dosing and the same attributes and dosing with conversions for Hysingla. I asked her if she has patients on Norco around the clock? Dr said she does and thinks it's a great option.
PPLPMDL0020000001	Tallmadge	OH	44278	3/20/2015	Introduced hysingla ER and discussed attributes, dosing, conversions and appropriate patient types. I discussed insurance and copy cards. Erin said that at this point she isn't comfortable enough to be treating that type of pain and would refer. I told her I understand and just wanted to make her aware that she has options. I asked if it makes sense to convert when a patient meets the indication and she said for sure. Discussed the option of oxycontin and reviewed the attributes and conversions and why a q12 oxycodone is appropriate for the right patient.
PPLPMDL0020000001	Cleveland	OH	44124	3/20/2015	met with med asst Summer. Discussed Purdue portfolio tri-fold and 3 options for DR C patients with daily, around the clock, long term pain. discussed current formulary status, patient access.
PPLPMDL0020000001	Akron	OH	44312	3/20/2015	No new information learned on this call.
PPLPMDL0020000001	South Euclid	OH	44121	3/20/2015	No new information learned on this call.
PPLPMDL0020000001	Stow	OH	44224	3/20/2015	Dr and Anna-asked about Butrans pt with Medicare part d and AARP what copy would be-looked on formulary grid and said S27-40 but could be different if possible loophole in plan-thanked me for stopping by and will rx for pt<font color=blue><b>CHUDAKOB added notes on 03/29/2015</b></font>-Scott, The proper terminology is "carve-out" within a plan rather than "loophole".
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/20/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	3/20/2015	Left invite, he said he couldn't attend. Talked to the nurses more about cover my meds. Sue said she hasn't really used it.
PPLPMDL0020000001	Akron	OH	44312	3/20/2015	Quick call about hysingla and Butrans and told him I want him to keep each product on his radar each for different reasons. I told him that hysingla is an option for those on Norco around the clock and are still in pain who have commercial insurance and Butrans for those on tramadol around the clock. Showed him the dosing and conversions for each. Dr said he will keep it in mind.
PPLPMDL0020000001	Hudson	OH	44236	3/20/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44319	3/20/2015	No new information learned on this call.
PPLPMDL0020000001	Tallmadge	OH	44278	3/20/2015	Dr told me that he has a patient on Butrans 5mcg and told him that she feels like the medication wears off around day 5 or 6. Dr asked me what to do and I told him to titrate as long as the patient isn't having any adverse reaction. Dr said he was going to titrate anyway. I gave the dr a FPI and asked him to review but titration is probably the best action. Reviewed hysingla ER dosing and attributes and asked him if he can think of a current Norco patient that is taking it on a daily, around the clock basis and still in pain? Dr said he might have a few.
PPLPMDL0020000001	Westlake	OH	44145	3/20/2015	He was much too far away to get into a deep discussion, but he told me he couldn't attend the dinner program next week. He also said he will try hysingla. Left grids on Butrans and hysingla. Alked to the staff on cover my
PPLPMDL0020000001	North Olmsted	OH	44070	3/20/2015	Highlighted attributes of hysingla and reviewed indication. Asked if she was familiar with current laws about writing pain medications. She paused. We talked about abuse deter properties on hysingla and OxyCotin. She would not stock out scripts but she felt managed care needs to be better.gave fair balance on abuse potential for all opioids including my products.
PPLPMDL0020000001	Tallmadge	OH	44278	3/20/2015	Met Erin new NP-saw dr in hallway and discussed Butrans in tramadol pts-both agreed that's a great place since not on Percocet or Vicodin yet-will look for pts in practice not being controlled on tramadol; OxyContin-keep it simple message-when approaching 3-4 tabs Switch to same molecule with q12hr dosing-both agreed good place to switch
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/20/2015	Introduction to dr-Butrans-dr said he loves Butrans because it works well for his pts-asked if there are any plans in works for higher patch doses-told him I would check into it for him; OxyContin-dr said as a group they don't rx it for most part-find out next time why/ask Cliff reason
PPLPMDL0020000001	Westlake	OH	44145	3/23/2015	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	3/23/2015	Hydrocodone patients uncontrolled met the indication,hysingla. I asked the dr they have pain continuously atc why would they not want a once a day options? Talked about managed care. Covered conversion. Highlighted Butrans and the failed Tramadol, more indication. Talked a outnabuse potential for all opioids including mine. They talked about referring out pain patients. I talked about the few he feels comfortable treating w an atc opioid.
PPLPMDL0020000001	Parma	OH	44129	3/23/2015	Doctor thinks that government and insurance companies don't want you writing ER pain meds. He writes very little oxycontin and reserves it for older patients, really sick patients like cancer patients. Reviewed portfolio and appropriate patient type for ER meds. Introduced Hysingla. He didn't see much of a need for it much like oxycontin. Too hard to write, too big of a dose. Reviewed importance of abuse deterrent formulations, but letting him know of abuse potential. He will keep it i mind but doesn't write much for pain. He tried butrans in a patient, she said it didn't work. Reviewed where to try it and to make sure to give it 3 days and to get to the right dose. He was interrupted and our time cut short.
PPLPMDL0020000001	Akron	OH	44313	3/23/2015	OxyContin-transition from oxycodone at 4tabs-said makes sense; Butrans-went over conversion slim Jim and focused on tramadol pts
PPLPMDL0020000001	Westlake	OH	44145	3/23/2015	No new information learned on this call.

PPLPMDL0020000001	Parma	OH	44129	3/23/2015	No new information learned on this call.
PPLPMDL0020000001	Lyndhurst	OH	44124	3/23/2015	Dr Goldner on vacation for 10 days- back WED APRIL 1. Met with med assts at front desk. Discussed Purdue's 3-product portfolio. Discussed patients appropriate for each product; not for acute pain; for patients that experience pain daily, around the clock, and has persisted for several months. Left literature for all 3 products for Dr. Goldner.
PPLPMDL0020000001	Parma	OH	44134	3/23/2015	Quick call. Still having mostly good results with butrans. He asked where he should write Hysingla because two patients have come back saying it was too expensive. Reviewed coverage where no prior autos but let him know that people are getting it approved with other pa plans. Talked to Regina to ensure that she understands the coverage situation.
PPLPMDL0020000001	Westlake	OH	44145	3/23/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	3/23/2015	Saw window with Linda-oxycotin-asked about new savings cards-said would drop them off. ASAP ; Butrans-went over slide conversion slim Jim to identify tramadol pts-liked and said easier to switch to appropriate dose-gave 4 more back posters
PPLPMDL0020000001	Lakewood	OH	44107	3/23/2015	Tramadol patients on caresource....Butrans,mandnwhatndomythinkmofmthis options after Tramadol.
PPLPMDL0020000001	Parma	OH	44129	3/23/2015	Quick call following up on his feedback from the Hysingla program. He said he got a lot out of it and was glad that he went. Reminded him to keep an eye out for the appropriate butrans patient since we know that not all of his patients are appropriate for Hysingla or oxycotin. He smiled and agreed but had two patients waiting.
PPLPMDL0020000001	Lyndhurst	OH	44124	3/23/2015	No new information learned on this call.
PPLPMDL0020000001	Lyndhurst	OH	44124	3/23/2015	No new information learned on this call.
PPLPMDL0020000001	Brooklyn	OH	44130	3/23/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	3/23/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44102	3/23/2015	Discussed Hysingla ER formulary coverage and program attendance with Ed No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44115	3/23/2015	Discussed Hysingla ER formulary coverage with George No new information learned on this call.
PPLPMDL0020000001	Lyndhurst	OH	44124	3/23/2015	Karen out on vacation all week. Met with med asst at front window. Discussed patient access for all 3 products; current formulary status. Left literature for Karen upon her return.
PPLPMDL0020000001	Parma	OH	44129	3/23/2015	No new information learned on this call.
PPLPMDL0020000001	Berea	OH	44017	3/23/2015	Reviewed the hydrocodone patient existing in his office being treated for pain and returning every month. An option if they were uncontrolled and to be switch...introduced hysingla. Used Phil to show a picture of a person. Touched on a few sections...dr said he has some like that.mi asked what would be the downside to treating pain once a day? Dr said his patients don't want to take a once a day. I talked about what clinically. He said nothing ...he talked about wondering if it worked and lasted to give pain control.mi said do you feel it is working out letting patients prn their own pain? He said no. Then I said you should try it forte right patient. I repeated the uncontrolled pain patient on a hydrocodone product and went over attributes and dosing. We talked about the patient...and I asked if his goals were the same as the patients for getting the opioid? I asked if having a patient take their pain medication once a day making it too hard for the patient. He said no. I asked what's the problem then. Dr said placebo and cost. We addressed managed care...for Butrans and OxyCotin too. I asked if a patient we switched to hysingla or Butrans...how many times could you increase the dose before referring out. Dr said once maybe twice. I asked if you feel the same about titrating immediate release. Dr said not really. But couldn't say why. Managed care was highlighted.
PPLPMDL0020000001	Berea	OH	44017	3/23/2015	Reviewed the indication and asked questions like what do you think of extended release opioids to treat this indication. And asked what she though chronic to be. Answers were vague. But she thought extended release should be used by specialists. We talked about conversion from hydrocodone to hysingla and Tramadol to Butrans. Talked about cover my meds and relay health a little. Will not stock hysingla.
PPLPMDL0020000001	Berea	OH	44017	3/23/2015	Highlighted the portfolio using the trifold piece. Highlighted the indication and asked what they he thought about using extended release opioids to treat this type of pain. The pharmacist said it should be used to treat chronic pain.mimaskedmiif he sees a lot of my products at his store and he said not much. I asked about immediate release opioids and it was the opposite answer. I asked if he thought those were all acute patients. He said probably not. I asked what is the hesitation and he said insurance. We talked about managed care. Talked about dosing and highlighted Butrans and hysingla. Gave fair balance of abuse potential as with all opioids.
PPLPMDL0020000001	Barberton	OH	44203	3/24/2015	Dr did not write hysingla yet. I asked how many patients did he get rejections on...he said a few but couldn't state which plans. Worked with dea a, she said it was medical mutual and she only though he tried it once not twice.
PPLPMDL0020000001	Cleveland	OH	44113	3/24/2015	Reviewed Butrans formulary coverage, savings cards along with Hysingla ER for those patients failing on present therapy requiring around the clock analgesia. OTC product samples. Said ok will continue to find appropriate patients that have coverage
PPLPMDL0020000001	Cleveland Hts	OH	44118	3/24/2015	Reviewed Butrans/OxyContin formulary coverage, savings cards along with Hysingla ER for those patients failing on present therapy requiring around the clock analgesia. Said ok will continue to find appropriate patients that have coverage
PPLPMDL0020000001	Garfield Hts	OH	44125	3/24/2015	Reviewed Butrans/Hysingla/OxyContin for those appropriate patients failing on present therapy requiring around the clock analgesia. Formulary/Savings cards,Said Ok will continue to consider for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44113	3/24/2015	Reviewed Butrans formulary coverage, savings cards along with Hysingla ER for those patients failing on present therapy requiring around the clock analgesia. Said ok will continue to find appropriate patients that have
PPLPMDL0020000001	Parma	OH	44129	3/24/2015	Quickly reminded him of formulary coverage and invited him to dinner program
PPLPMDL0020000001	Parma	OH	44129	3/24/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland Hts	OH	44118	3/24/2015	Reviewed all three products with Subramham RPH, said he will order when rx is presented.
PPLPMDL0020000001	Akron	OH	44310	3/24/2015	Spoke with Jim the Pharmacist and discussed hysingla ER attributes, dosing and conversions. Jim said he hasn't seen it yet and asked about medicad and medicare coverage? I told jim for now it's commercial coverage only. Jim said that's why he hasn't seen it because he only has one type of patient and commercially insured isn't one of them. Reviewed Butrans schedule 3, 7 day transdermal patch, dosing and conversions.
PPLPMDL0020000001	Cleveland	OH	44130	3/24/2015	No new information learned on this call.
PPLPMDL0020000001	Valley View	OH	44125	3/24/2015	Reviewed portfolio of products and Confirmed attendance to upcoming program
PPLPMDL0020000001	Cleveland	OH	44130	3/24/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	3/24/2015	Used Phil profile. He said he would choose Hysingla (After checking the previous brochure I left him on his desk) for that patient of course! I asked why not butrans Or oxycotin? He didn't want to talk about the profile
PPLPMDL0020000001	Cleveland	OH	44130	3/24/2015	New pharmacist Michelle was there. Introduced her to Hysingla. She hasn't seen scripts for it. Reviewed process of how a non advantaged product that they don't stock is filled. She said they work with office to get it filled and will order the product and not try to switch.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/24/2015	No new information learned on this call.
PPLPMDL0020000001	Mayfield Heights	OH	44124	3/24/2015	No new information learned on this call.
PPLPMDL0020000001	Barberton	OH	44203	3/24/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44319	3/24/2015	Called and spoke with Steve the pharmacist and discussed hysingla ER and asked if he was familiar? Steve said he has received information in the mail about it. Discussed attributes and dosing and asked him if he would stock? He said he will once he gets a Rx.
PPLPMDL0020000001	Fairlawn	OH	44333	3/24/2015	Spoke with Gilbert and Sue about hysingla and Butrans. Gilbert said he has 20-40mg but hasn't seen it yet. Gilbert said the product will take off once it gets approved on medicad and medicare D. I told him I agree and have already seen a couple of handfuls of prescriptions.reminded him of copy cards. Reviewed dosing and conversions. Discussed Butrans attributes and patit types.
PPLPMDL0020000001	Cleveland	OH	44103	3/24/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44310	3/24/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland Hts	OH	44118	3/24/2015	Reviewed portfolio of products with Opie, no new information obtained
PPLPMDL0020000001	Parma	OH	44129	3/24/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	3/24/2015	Good discussion about all products with discussing the treatment of patients in daily, around the clock pain and the indication for ER opioids. Discussed the option of Butrans as the schedule 3,7 day transdermal patch. Reviewed attributes, dosing, conversions, titration and patient types. Discussed the Helen profile. Asked for business when a patient on tramadol asks for more or another IR opioid and is still in pain. Introduced hysingla ER attributes, dosing, conversions, titration, Jane patient type. Reviewed the peak steady state plasma hydrocodone concentrations profile. Asked for business for patients on Norco daily and around the clock still in pain. Reviewed oxycotin abuse deterrence studies from MVA,dosing and conversions. Discussed hysingla ER and oxycotin FDA tiers for abuse deterrence. Discussed insurance coverage and copy cards for all products. Dr said she started a patient on Butrans who had been on Norco and the patient was on Norco and started on 10mcg. Dr said patient is doing well.
PPLPMDL0020000001	Fairlawn	OH	44333	3/24/2015	Good discussion about all products with discussing the treatment of patients in daily, around the clock pain and the indication for ER opioids. Discussed the option of Butrans as the schedule 3,7 day transdermal patch. Reviewed attributes, dosing, conversions, titration and patient types. Discussed the Helen profile. Asked for business when a patient on tramadol asks for more or another IR opioid and is still in pain. Introduced hysingla ER attributes, dosing, conversions, titration, Jane patient type. Reviewed the peak steady state plasma hydrocodone concentrations profile. Asked for business for patients on Norco daily and around the clock still in pain. Reviewed oxycotin abuse deterrence studies from MVA,dosing and conversions. Discussed hysingla ER and oxycotin FDA tiers for abuse deterrence. Discussed insurance coverage and copy cards for all products. Dr said that he has been doing a lot of referring to pain management recently. Dr said that when he has to treat a patient longer than 4-6 weeks he finds that it gets too much for him and usually the patient is chronic at that point anyway. I told dr that Butrans may be better suited for him because it a patient needs more than tramadol he can move to the schedule 3 Butrans at that point. Dr said that makes sense and likes the lower dosing and that its a patch. Discussed insurance coverage and copy cards.
PPLPMDL0020000001	Akron	OH	44333	3/24/2015	Good discussion about all products with discussing the treatment of patients in daily, around the clock pain and the indication for ER opioids. Discussed the option of Butrans as the schedule 3,7 day transdermal patch. Reviewed attributes, dosing, conversions, titration and patient types. Discussed the Helen profile. Asked for business when a patient on tramadol asks for more or another IR opioid and is still in pain. Introduced hysingla ER attributes, dosing, conversions, titration, Jane patient type. Reviewed the peak steady state plasma hydrocodone concentrations profile. Asked for business for patients on Norco daily and around the clock still in pain. Reviewed oxycotin abuse deterrence studies from MVA,dosing and conversions. Discussed hysingla ER and oxycotin FDA tiers for abuse deterrence. Discussed insurance coverage and copy cards for all products. Dr said that he has a hard time treating pain because hey always want more. I discussed with him when an ER opioid may be necessary.
PPLPMDL0020000001	Fairlawn	OH	44333	3/24/2015	Good discussion about all products with discussing the treatment of patients in daily, around the clock pain and the indication for ER opioids. Discussed the option of Butrans as the schedule 3,7 day transdermal patch. Reviewed attributes, dosing, conversions, titration and patient types. Discussed the Helen profile. Asked for business when a patient on tramadol asks for more or another IR opioid and is still in pain. Introduced hysingla ER attributes, dosing, conversions, titration, Jane patient type. Reviewed the peak steady state plasma hydrocodone concentrations profile. Asked for business for patients on Norco daily and around the clock still in pain. Reviewed oxycotin abuse deterrence studies from MVA,dosing and conversions. Discussed hysingla ER and oxycotin FDA tiers for abuse deterrence. Discussed insurance coverage and copy cards for all products. Dr said that he thinks for ER opioids make much more sense for around the clock pain and would like to use more ER opioids and said my products are good choices.
PPLPMDL0020000001	Mayfield Heights	OH	44124	3/24/2015	Met w pharmacist Giovanni. Using tri-fold portfolio, discussed scheduling, dosing for all 3 products. Discussed FDA Tier 1,3 labeling for both Hysingla & OxyContin & our abuse deterrent properties (RESISTEC) technology. Discussed lower dose (20,30,40) as most common for Hysingla. Let him know he may get some patients from Hillcrest Pain mgt and they should be ready. He says Natalia is the only person authorized to order Narcotics. He will discuss with Natalia. Left APRIL 9 speaker invite for Natalia.
PPLPMDL0020000001					

	Cleveland	OH	44130	3/24/2015	Using portfolio piece...Doctor isn't going to write oxycontin really, bad experience, name recognition. Appreciates the abuse deterrent properties but might consider Hysingla for the patients wanting IR. It will be Hysingla or go find a different doctor. He likes that Hysingla doesn't have Tylenol and the ADT. Reviewed initiation and formulary coverage. Showed scott as possible butrans patient, only ER C3 med available. He doesn't necessarily like patches but will keep it in mind. He really doesn't like pain patients because he really wonders why they need these meds.<font color=blue><b>CHUDAKOB's query on 04/02/2015</b></font>Kathy, I assume ADT means abuse-deterrent technology. Please only use approved verbiage which are abuse-deterrent properties (ADP) or abuse-deterrent characteristics.<font color=green><b>LARAWKA's response on 04/03/2015</b></font>Okfont color=blue><b>CHUDAKOB added notes on 04/06/2015</b></font>Thank you!
PPLPMDL0020000001	Mayfield Heights	OH	44124	3/24/2015	Met with pharmacy mgr Warren. He says he uses Cardinal Health & had no problem getting Hysingla in. All Dr Laham patients so far - for Hysingla. Also, while I was there - a patient who had a gap in insurance (severe back injury) - on OxyContin from pain mgt, heard me talking with Warren & asked if I had an OxyContin savings card as the dose he's on was going to cost him \$1800 this month. I left a savings card for him with Warren. Left Warren Hysingla NDC brochure, pharmacists s guide. Warren has Relay Health & says the Hysingla trial, savings cards are going through automatically. Left 4/9 Moufawad speaker invite.
PPLPMDL0020000001	Mayfield Hts	OH	44124	3/24/2015	Quick call with Dr. Laham. Then Met with Denise (prior auths) and she says she forgot to write down pharmacies not willing to order Hysingla er moving forward. She repeated "It's hard to get area pharmacies to order." she did speak with Warren at pharmacy inside Hillcrest hospital. ) communicated I was on my way over to see Warren next call. and I'll make sure to bring up Hysingla ER and see what he is planning on ordering. Dr. Laham says he'll probably write majority of scripts for 30 mg strength. Trying to coordinate a coffee or lunch week of April 6 with Dr. Laham. Dropped off invites for all hcp's in office for 4/9 Moufawad speaker program.
PPLPMDL0020000001	Highland Heights	OH	44143	3/24/2015	Quick call with Dr. Salama. Dropped off April 9 speaker invite.
PPLPMDL0020000001	Norton	OH	44203	3/24/2015	Talked about patients that could be a candidate for hysingla that he can think of and who comes to mind. Dr said if they are on too many immediate release...I said how many is too many. Is said more than 4 a day, I asked if he had patients like is cause last we spoke he told me he doesn't like to keep patients on too many I'm edite release opioids for chronic pain. Dr said he has a few. Lynn the office manager has been doing the pa and using cover my meds. She said she hasn't had too many problems. I asked if she used it for one of my products yet and she said no. We talked about ysingla coverAge and how their office doesn't collect Pbm cards so how are they to know if they have these insurance plans. Dr said he had a few rejections on Butrans recently but couldn't remember which plan. I reminded him that sarah said it was united health care Nd this sue we don't have coverage on that plan. We talked about caresouce patients.
PPLPMDL0020000001	Westlake	OH	44145	3/25/2015	Introdu te hysingla and attributes. Dr felt he would. It use it cause its schedule two and he doesn't write hydrocodone for chronic. Tlked Butrans, dosing and managed care. Dr said he liked Butrans. I asked if he is comfortable w managed care. he said yes.
PPLPMDL0020000001	Cleveland	OH	44195	3/25/2015	Reviewed product portfolio, Butrans patient experience kits along with Hysingla Formulary opportunities, Said ok will consider for appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44195	3/25/2015	Reviewed Hysingla ER Once Daily, dosing along with Butrans and OxyContin for those patients requiring around the clock analgesia, Said ok will consider for appropriate patients.
PPLPMDL0020000001	Bedford	OH	44146	3/25/2015	Reviewed butrans preferred formulary status, c3 scheduling and appropriate patient type. He said he is thinking about his patients one at a time and has many options. He said he has 6 patients on Hysingla. He has not encountered difficulty since the first script ( according to what he says). Data only shows he has written one. I asked him for his support of Hysingla for appropriate Norco patients. He said he is working in it.
PPLPMDL0020000001	Stow	OH	44224	3/25/2015	Spoke with Corey about Butrans abs hysingla ER. I reviewed Butrans attributes and when and where it should be used. Corey said they see a few scripts a month. Discussed hysingla ER attributes, dosing and conversions. I asked Corey to stock hysingla and he said he will not until he sees a Rx
PPLPMDL0020000001	Akron	OH	44313	3/25/2015	No new information learned on this call.
PPLPMDL0020000001	Stow	OH	44224	3/25/2015	No new information learned on this call.
PPLPMDL0020000001	Stow	OH	44224	3/25/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44320	3/25/2015	Dr told me that his patients pain and complaints about pain are becoming difficult for him to manage and wants me to use Butrans as the opioid he wants to use for patients wanting more IR pills. I reviewed dosing, conversions and Helen and Kathy profiles. Dr said if it's covered for him he wants to use a lot of it. I told him I want to specialize a insurance grid for his office and want him to place them in all his exam rooms. Dr said that would be great and to work with the staff to get it done. Reviewed CareSource PA, medicare D coverage and commercial insurance with copy cards.
PPLPMDL0020000001	CLEVELAND	OH	44195	3/25/2015	Reviewed product portfolio with Troy, key prescribers, along with Savings cards and formulary opportunities.
PPLPMDL0020000001	Cleveland	OH	44195	3/25/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	3/25/2015	Visited dept. Uncovered key prescribers
PPLPMDL0020000001	Cleveland	OH	44195	3/25/2015	Visited pain mgmnt dept. discussed product portfolio
PPLPMDL0020000001	Akron	OH	44305	3/25/2015	Introduced hysingla ER discussing attributes, dosing, conversions and copy cards.
PPLPMDL0020000001	Woodmere	OH	44122	3/25/2015	No new information learned on this call.
PPLPMDL0020000001	Bedford	OH	44146	3/25/2015	No new information learned on this call.
PPLPMDL0020000001	Valley View	OH	44125	3/25/2015	Confirmed Friday lunch appt with Staff No new information learned on this call.
PPLPMDL0020000001	BEDFORD	OH	44146	3/25/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44224	3/25/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	3/25/2015	No new information learned on this call.
PPLPMDL0020000001	Bedford	OH	44146	3/25/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44320	3/25/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	3/25/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	3/25/2015	No new information learned on this call.
PPLPMDL0020000001	Shaker Heights	OH	44122	3/25/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/25/2015	No new information learned on this call.
PPLPMDL0020000001	Fairlawn	OH	44333	3/25/2015	Checked it target ordered hysingla and they did order 20-40mg and have it in stock. Reminded of all doses and conversions with commercial insurance.
PPLPMDL0020000001	Beachwood	OH	44122	3/25/2015	No new information learned on this call.
PPLPMDL0020000001	Beachwood	OH	44122	3/25/2015	No new information learned on this call.
PPLPMDL0020000001	Beachwood	OH	44122	3/25/2015	Had enough time to tell him about upcoming Hysingla programs and ask if there is anything keeping him from choosing Hysingla for a few patients. He said no, he just needs to change his mindset. He said he still probably doesn't think of butrans when he should let alone Hysingla.
PPLPMDL0020000001	Stow	OH	44224	3/25/2015	Introduction to dr-followed up on Butrans pt on AARP-dr said copy of \$20ish was too high-redirected to Purdue patient assistance program in hopes to get patient on Butrans because dr said its the only choice for the pt with OA-thanked him for thinking of Butrans and agreed with him great choice for pt-also reminded for tramadol pt meeting threshold-dr said that's a great choice as well and rxs it there; OxyContin-dr said he likes it to keep number of Percocet reduced when transitions to OxyContin
PPLPMDL0020000001	Independence	OH	44131	3/25/2015	Gave him maria profule and reminded him that butrans is the only schedule 3 ER opioid on the market...its a once weekly patch. If he doesn't want to write c2 pills, this is an appropriate option for patients in around the clock pain. He said he just has to start thinking of it.<font color=blue><b>CHUDAKOB's query on 07/18/2015</b></font>Kathy, in reading this call note you wrote, "If he doesn't want to write c2 pills, this is an appropriate option for patients in around the clock pain." What is the implication here? What could it be read as? Can you please clarify what you meant? Thank you!<font color=green><b>LARAWKA's response on 07/19/2015</b></font>He has told me in the past and on this call that he is not really writing for medication that is C2. Simply pointing out that butrans is a c3 ER opioid that might be appropriate for some of his patients in. around the clock pain.<font color=blue><b>CHUDAKOB's query on 07/20/2015</b></font>Thank you Kathy. There is nothing in the note that says this is what he said. Similar to the other call note, the is an "instead of" case without using those words. You do not want to imply that if he doesn't want to write a CII, he may write a CIII? Why would he do that if the potential for abuse and misuse is the same? I hope you can see the implication here. Does this make sense?<font color=green><b>LARAWKA's response on 07/20/2015</b></font>Yes-<font color=blue><b>CHUDAKOB added notes on 07/21/2015</b></font>Thank you
PPLPMDL0020000001	Akron	OH	44333	3/25/2015	Dr told me that he has to discontinue Butrans on a male patient who had been on Butrans for the last 6-8 months. Dr said that the patient had red blistered marks on every application site he had placed Butrans on. Discussed the incidence through MVA about AEs with Butrans and dr said the incidence is much higher for rash than the MVA states. Discussed that he has other options if patients can't tolerate Butrans and that hysingla may be an option or even oxycontin. Discussed Jane profile and then reviewed oxycontin patient types.
PPLPMDL0020000001	Westlake	OH	44145	3/26/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44114	3/26/2015	Reviewed portfolio with John, Hysingla/Butrans Formulary coverage. along with program invite, said ok will continue to consider and remind DR.for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44114	3/26/2015	Reviewed portfolio with John, Hysingla/Butrans Formulary coverage. along with program invite, said ok will continue to consider and remind DR.for appropriate patients
PPLPMDL0020000001	Brooklyn	OH	44144	3/26/2015	Reviewed OxyContin every 12hours along with Butrans/Hysingla ER for those patients failing on present therapy requiring around the clock analgesia, Initiation/Titration, formulary opportunities, Said ok will consider for appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44109	3/26/2015	Reviewed portfolio, Discussed utilization and formulary coverage, Said ok will watch out for RX's and order accordingly
PPLPMDL0020000001	Brooklyn	OH	44144	3/26/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44130	3/26/2015	No new information learned on this call.
PPLPMDL0020000001	Valley View	OH	44125	3/26/2015	Reviewed portfolio with Aaron, No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	3/26/2015	Highlighted hysingla with indicatin and attributes. Dr said osteogenesis patients are on a fixed Income. Reminded OxyCotin and Butrans.m
PPLPMDL0020000001	Westlake	OH	44145	3/26/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/26/2015	No new information learned on this call.
PPLPMDL0020000001	Fairlwan	OH	44333	3/26/2015	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	3/26/2015	Saw briefly at window-reminders for both products in Percocet pts and tramadol pts
PPLPMDL0020000001	Cleveland	OH	44144	3/26/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	3/26/2015	Dr was comfortable with Butrans dosing. We talked about the caresource patient. We talked abtihnshingla, working withnthenstaff to highlight appropriate candidates, focuses on the fee commercial plans we have best coverage and dosing.mdr might attend dinner program to follow up.



	Westlake	OH	44145	3/26/2015	Introduction to dr at lunch-Butrans-dr said he rxs it after a pt goes beyond 2 tabs of Norco because he doesn't want the pt on high amounts of opioids-discussed tramadol pts reaching 300mg and still not getting adequate pain relief-dr said he has rxd there and pts do very well-went over Caresource PA and he said he will rx it more since he knows it's an easier PA; OxyContin-doesn't like ER opioids but still reminded him if pts on Percocet not getting adequate pain relief to switch at 3-4 tabs-said he will consider
PPLPMDL0020000001	Cleveland	OH	44102	3/26/2015	Discussed product portfolio with Ed, Frank, and Rebecca along with Formulary coverage and savings cards. said ok will recommend when appropriate
PPLPMDL0020000001	Norton	OH	44203	3/26/2015	Highlighted Hysingla dinner program, he can't attend. Review of managed care for all products and dosing.
PPLPMDL0020000001	Solon	OH	44139	3/27/2015	No new information learned on this call.
	Beachwood	OH	44122	3/27/2015	Quickly handed him portfolio piece with Hysingla and butrans formulary coverage. Asked him to consider one of these ER opioids when his patients are in around the clock pain and need more than 3 pills of IR per day. He thanked me.
PPLPMDL0020000001	Cleveland	OH	44195	3/27/2015	Quick review of product portfolio, formulary opportunities, savings cards, said ok will continue to consider for appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44195	3/27/2015	Reviewed Hysingla ER/Butrans initiation/Titration, formulary opportunities along with savings cards. Said ok will consider for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44113	3/27/2015	Reviewed product portfolio, initiation/Titration, specific patient types that are failing on present therapy that are requiring around the clock analgesia, Said ok will continue to consider for appropriate patients that have formulary coverage
PPLPMDL0020000001	Cleveland	OH	44113	3/27/2015	Reviewed Hysingla ER/Butrans for those patients failing on present therapy requiring around the clock analgesia, said ok will continue to consider for appropriate patients that have coverage.
PPLPMDL0020000001	Uniontown	OH	44685	3/27/2015	Spoke with the pharmacist Jenna and discussed Butrans attributes, dosing and conversions. Jenna said she thinks they have dispensed it a couple of times in the last month or two. Introduced hysingla ER and Jenna said she's read up on it from the information acme sending the pharmacies. Discussed the attributes,dosing and conversions. Spoke about insurance with commercial and copy cards.
PPLPMDL0020000001	Cleveland	OH	44113	3/27/2015	Reviewed portfolio with tech, formulary and savings cards,Will relay info to Cecelia,
PPLPMDL0020000001	Cleveland	OH	44113	3/27/2015	No new information learned on this call.
PPLPMDL0020000001	Beachwood	OH	44122	3/27/2015	Eileen is in communication with the doctors in her group who don't see reps at this time, but are deciding which meds they will prescribe. I told her that I am available anytime to discuss Hysingla and our product portfolio to the physicians so they have the information they need to make this decision. She will see what she can do about getting me in to talk to them.
PPLPMDL0020000001	Beachwood	OH	44122	3/27/2015	No new information learned on this call.
PPLPMDL0020000001	Solon	OH	44139	3/27/2015	No new information learned on this call.
PPLPMDL0020000001	Green	OH	44232	3/27/2015	Called and spoke with Jenna about hysingla and asked her if she's seen any prescriptions? Jenna said she has not but has dispensed some Butrans recently. Jenna said they came from pain management. Reminded her about copy cards for each product.
PPLPMDL0020000001	Uniontown	OH	44312	3/27/2015	No new information learned on this call.
PPLPMDL0020000001	Uniontown	OH	44312	3/27/2015	No new information learned on this call.
PPLPMDL0020000001	Valley View	OH	44125	3/27/2015	Reviewed Portfolio of products to staff, No new information learned on this call.
PPLPMDL0020000001	Solon	OH	44139	3/27/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44312	3/27/2015	No new information learned on this call.
PPLPMDL0020000001	Beachwood	OH	44122	3/27/2015	She is writing less pain meds. She said there is so much to keep track of and rules to follow with that patient. She typically writes more IR because of cost. Once the patient needs more, she will try for ER med.
PPLPMDL0020000001	Akron	OH	44312	3/27/2015	No new information learned on this call.
PPLPMDL0020000001	Solon	OH	44139	3/27/2015	No new information learned on this call.
PPLPMDL0020000001	Garfield Heights	OH	44125	3/27/2015	Reviewed portfolio of products, Hysingla Coverage along with savings cards. Said they will watch for new RX's and order accordingly
PPLPMDL0020000001	Akron	OH	44312	3/27/2015	Told dr about hysingla ER attributes again and asked him if he thinks he product can be useful for patients he currently has on Norco around the clock? Dr said he can but said that Norco isn't only cheaper but easier to get through insurance. I told dr that right now for commercially insured patients it can only be \$25 a month. Dr said he knows but most of his patients in chronic pain are on medicaid or medicare. I told him I understand but told him for now to just identify one commercial patient that fits the patient identification. Dr said ok. Reminded about Butrans patent types and conversions.
PPLPMDL0020000001	Uniontown	OH	44685	3/27/2015	No new information learned on this call.
PPLPMDL0020000001	Twinsburg	OH	44087	3/27/2015	Discussed formulary coverage for meds he prescribes. He said he writes what he thinks the patients should have and tries to get it completed that way to the best of his ability. He does not like to treat his pain patients but he does. Oxycontin works well, butrans he hasn't had as much luck with. Reviewed where he should use it (patient and insurance). He had good feedback regarding thr dinner program for hysingla, he will eventually write it but he is more an Oxycodeone writer.
PPLPMDL0020000001	Tallmadge	OH	44278	3/27/2015	Spoke with dr at front counter and asked him if he thinks it would be suitable to think of an ER hydrococone like hysingla as an option for a patient on Norco around the clock and in pain? Dr said he's not sure because he can't remember hysingla. Discussed it's attributes and dr said he now remembers and will try and remember it. Reminded him when and where to use oxycontin.
PPLPMDL0020000001	Cleveland	OH	44109	3/27/2015	Reviewed portfolio of products, formulary coverage and savings cards,No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	3/27/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/27/2015	Quick reminders about Butrans and OxyContin-dr late from Hudson office-dr said he would talk to me next time and appreciated me dropping off savings cards
PPLPMDL0020000001	Beachwood	OH	44122	3/27/2015	No new information learned on this call.
PPLPMDL0020000001	Beachwood	OH	44122	3/27/2015	Dr and staff appreciated new savings cards-said some pts get nervous with expiring date-reminded about Butrans in tramadol pts and Caresource pts
PPLPMDL0020000001	Uniontown	OH	44685	3/27/2015	Spoke with Kim the pharmacist and reviewed hysingla attributes and mean steady state hydrocodone levels from MVA. She said that's what she would expect to see. I told her that's good. Reviewed copy cards and she said she has two of them. Left her with initiation and titration guide.
PPLPMDL0020000001	Stow	OH	44224	3/27/2015	Dr said that he wanted to use Butrans for a patient but shortly realized that it wouldn't have worked because dr said the patient was extremely hairy and would need to remove the hair from the application sites weekly. Dr said he has a few more he is going to try Butrans on. Reminded him of the tramadol patient and asked for continued prescribing. Discussed hysingla ER as a possible solution for the hairy patient where the Butrans patch might not have been appropriate. Dr agreed and I told him to use it for those Norco patients who are taking it around the clock and still in pain. Reviewed dosing, conversions and exp,ained abuse deterrent tiers from FDA.
PPLPMDL0020000001	Parma	OH	44129	3/30/2015	Using portfolio piece reminded her of products appropriate for patients in around the clock pain. Butrans has very good managed care coverage and is still the only C3 ER opioid on the market. Asked her if she has identified appropriate patient for Hysingla. She asked to me remind her about Hysingla. I did and she said that she will keep in mind. this is a very busy Monday morning for her today and she had to run.
PPLPMDL0020000001	Cleveland	OH	44130	3/30/2015	Quick call asking if he will attend Hysingla program. He said he has to check with the "boss" to see if that date works. Reminded him that it will be a good opportunity to discuss patients in around the clock pain and one of the new options With abuse deterrent characteristics that he has for that patient. Reviewed Hysingla quickly and handed him initiation guide for butrans but we were interrupted, and he had to leave.
PPLPMDL0020000001	Cleveland	OH	44130	3/30/2015	He was behind today and looking up information so didn't have time to talk. He will be out of town beginning April 12 through the end of the month so he can't attend the Hysingla program. He thinks he knows enough about it from me. Quickly reviewed portfolio piece and appropriate patient type for ER meds like oxycontin and Hysingla.
PPLPMDL0020000001	Cleveland	OH	44109	3/30/2015	Visited dept, Met with Dr.Fox- reviewed portfolio of products for appropriate patients, said Ok will continue to consider Butrans for those appropriate patients that have ins. coverage.
PPLPMDL0020000001	Cleveland	OH	44109	3/30/2015	Reviewed Butrans Initiation/Titration, formulary, patient info booklets and savings cards, Intro to Hysingla ER along with OxyContin for those patients requiring around the clock analgesia that are failing on present therapy. Said Ok will continue to consider for appropriate patients, struggles with PA,(presently doing all PA's himself, reviewed cover my meds.com
PPLPMDL0020000001	Cleveland	OH	44114	3/30/2015	Quick review of Butrans/Hysingla ER for those patients failing on present therapy requiring around the clock analgesia, along with OxyContin every 12hours,said OK will continue to consider for appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44195	3/30/2015	Quick review of OxyContin every 12hours along with Hysingla ER for those patients failing on present therapy requiring around the clock analgesia, said OK will continue to consider for appropriate patients.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/30/2015	No new information learned on this call.
PPLPMDL0020000001	akron	OH	44333	3/30/2015	Told dr that I want him to keep hysingla ER on his radar for those that are currently on Norco around the clock and still in pain. Told him about the commercial coverage for hysingla and Sheri said that they are Anthem BC/bs, Aetna and medical mutual and are seeing many more dual eligibles and those patients all have Caresource now who also have Medicare. Told dr to keep Butrans reserved for patients who are currently on tramadol around the clock and discussed Caresource and Medicare coverage.
PPLPMDL0020000001	Cleveland	OH	44114	3/30/2015	Reviewed portfolio with Marc RPH,No new information learned on this call.
PPLPMDL0020000001	Euclid	OH	44117	3/30/2015	No new information learned on this call.
PPLPMDL0020000001	Parma Heights	OH	44130	3/30/2015	No new information learned on this call.
PPLPMDL0020000001	Highland Heights	OH	44143	3/30/2015	No new information learned on this call.
PPLPMDL0020000001	Lyndhurst	OH	44124	3/30/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44134	3/30/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44303	3/30/2015	Short discussion with Rod about new copy cards about all products and discussed the changes. Reviewed hysingla attributes and when and where it should be used. Rod said he doesn't have too many patients that use copy cards but thanked me for the updated information.
PPLPMDL0020000001	Cleveland	OH	44195	3/30/2015	No new information learned on this call.
PPLPMDL0020000001	Mayfield Village	OH	44143	3/30/2015	Met with med asst at front window. Dr. Krishnan off all week, back sometime after April 5. Left invite for 4/9 Hysingla program, fpi and quickly discussed Purdue 3-product portfolio for patients with daily, around the clock long term pain, who meet ER opioid indication.
PPLPMDL0020000001	Brooklyn	OH	44144	3/30/2015	Reviewed portfolio. No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44109	3/30/2015	Reviewed Portfolio, left Butrans patient info booklets
PPLPMDL0020000001	Cleveland	OH	44195	3/30/2015	Reviewed portfolio along with reminder of Hysingla ER training. Said ok will respond by tomorrow.
PPLPMDL0020000001	Cleveland	OH	44130	3/30/2015	Quick window call. Reminded Doc that he was interested in last Hysingla program but couldn't make it. Asked him if he can attend the April 15 Hysingla program. He was getting ready to leave the office but will Check his schedule. He acknowledged that he did want to go. Asked if he needed any resources or information about butrans. Handed him formulary grids reassuring him of good formulary coverage.
PPLPMDL0020000001	Fairlawn	OH	44333	3/30/2015	No new information learned on this call.
PPLPMDL0020000001	Lyndhurst	OH	44124	3/30/2015	No new information learned on this call.
PPLPMDL0020000001	Fairlawn	OH	44333	3/30/2015	Spoke with sue about the coming of new product copy cards and explained each. Sue said that they use them a lot and will get them out. Reviewed Butrans and hysingla ER dosing and conversions.

PPLPMDL0020000001	Akron	OH	44313	3/30/2015	Quick reminders about hysingla ER attributes, dosing, conversions and where and when to use.
PPLPMDL0020000001	Akron	OH	44333	3/30/2015	No new information learned on this call.
	Cuyahoga Falls	OH	44223	3/30/2015	I told dr I'm glad he has continued to find great patient success with Butrans. I asked if he has used Butrans for patients on Norco? Dr said he has many. I asked him if there might be a way to use hysingla for those patients that may not tolerate Butrans because of the number of patients he has told me about in the past about patients experiment rash or blistering? Dr said no because the clinical evidence doesn't show positive results for long term use of hydrocodone. Dr said the buorenorphine doesn't show that. Dr said he might use it in a certain circumstance when a patient needs more than 20mcg of Butrans.
PPLPMDL0020000001	Mayfield Village	OH	44143	3/30/2015	Met with med asst at front window. Left 4/9 speaker invite for Dr. Ashraf as well as NP's Kristy Perusko and Penny O'Brien Black. Also left Hysingla ER fpi. titration guide. Quickly discussed Purdue 3 product portfolio for patients who meet Extended Release opioid indication.
PPLPMDL0020000001	Akron	OH	44333	3/30/2015	Met Michelle for the first time and told her about all three products and explained hysingla ER attributes, dosing and conversions as well as when and where to use. Told her about Butrans and OxyContin and provided her with initiation and titration guides. She said she will look over the information. Marsha Fox said that she is not credentialed to prescribe yet and she's currently working on the E-prescribing for her.
	Cuyahoga Falls	OH	44223	3/30/2015	Discussion with dr about writing products for his patients and when he writes which product. Dr said that it's very difficult to get hysingla approved right now and that Butrans is a very effective and tolerable product that gets approved easily. Dr said he's continuing to write oxycontin in the hospital and in his practice for those already on IR oxycodone or percocet. I told dr to please write what he believes is the most appropriate product based on each individual patient. Dr agreed and said he will find continued use for each.
PPLPMDL0020000001	Euclid	OH	44132	3/31/2015	Left at front window with med asst. Hysingla ER titration guide, fpi and 4/9 invitation. Left OxyContin slim jim. Discussed with medical assistant at front window, Purdue 3-product portfolio of single entity, extended release opioids for patients with daily, around the clock, long term pain. (left same for CNP Cara McHugh)
PPLPMDL0020000001	Westlake	OH	44145	3/31/2015	Reviewed indication, opened with insight hydrocodone. Dr said she doesn't write much opioids. Reviewed indication and she did agree that she has a few patient profiles like Jane. Working with just one patient and a small patient population that may be appropriate. We discussed giving patients options that meet our indications. Dr agreed that the dosing frequency of Butrans and hysingla is something of interest to her. Talked about all three products and specifying who might be an appropriate patient for our products using the Jane profile a few different ways. Dr said abuse deter properties is of interest to her. Gave fair balance of abuse potential for all opioids including the ones being promoted. Reviewed managed care. Dr said hysingla was of interest to her and she could see herself using it. She said he only hesitation would be managed care. Gave her grids and did. Y best to encourage the trial of the product for appropriate patient.
PPLPMDL0020000001	Independence	OH	44131	3/31/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44134	3/31/2015	Asked him if he has found appropriate patient for Hysingla. He said that he has not. Asked me to remind him about the product. Reviewed product and formulary coverage. Reminded him that butrans is the only ER c3 opioid and is appropriate for opioid naive patients before starting IR meds if patient is in around the clock pain. He said he likes butrans.
PPLPMDL0020000001	Garfield Hts	OH	44125	3/31/2015	Reviewed Butrans/Hysingla ER for those patients requiring around the clock analgesia that are failing on present IR therapy. Said Ok will continue to consider for appropriate patients that have formulary coverage.
PPLPMDL0020000001	Rocky River	OH	44116	3/31/2015	Dr said he write Butrans for a lady and had no problems getting it and she has refilled a few times already. Dr was not accurate on the dosing of Butrans so I did review the dosing per the indication. Talked about OxyCotin, dr said he is comfortable writing that product and he felt it works well. Dr agreed to attend the hysingla dinner program. Reviewed indication and the appropriate patient.
PPLPMDL0020000001	Cleveland	OH	44113	3/31/2015	Reviewed Butrans/Hysingla ER for those patients requiring around the clock analgesia that are failing on present IR therapy. Said Ok will continue to consider for appropriate patients that have formulary coverage.
PPLPMDL0020000001	Garfield Hts	OH	44125	3/31/2015	Reviewed Butrans/Hysingla ER for those patients requiring around the clock analgesia that are failing on present IR therapy. Said Ok will continue to consider for appropriate patients that have formulary coverage.
PPLPMDL0020000001	Cleveland	OH	44113	3/31/2015	Reviewed Butrans/Hysingla ER for those patients requiring around the clock analgesia that are failing on present IR therapy. Said Ok will continue to consider for appropriate patients that have formulary coverage.
PPLPMDL0020000001	Cleveland	OH	44113	3/31/2015	Reviewed Butrans/Hysingla ER for those patients requiring around the clock analgesia that are failing on present IR therapy. Said Ok will continue to consider for appropriate patients that have formulary coverage.
PPLPMDL0020000001	Euclid	OH	44132	3/31/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	3/31/2015	Follow up on some of the managed care plans for Hysingla.mI asked if he is willing to write hysingla with its current managed care. Dr said he would prefer to wait till it got more coverage. Lori the office manager and I align with nthenrd told him that they have the patients insurance plans that are covered on our products for the most part, nothing is 100 percent, Lori the office manager helped trying to talk the dr into trying it. The manager said she would identify a few patients if the dr said ok. Dr was not sure he wanted her to do that. We talked about the coverage in med d for Butrans as a back up if hysingla didn't go thru. He apparently thought that was funny. Reviewed starting dose of Butrans.
PPLPMDL0020000001	Cleveland	OH	44125	3/31/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44310	3/31/2015	Dr told me about his most recent patients he put on hysingla. Dr said that two of them couldn't get it because it was too expensive and another got it for a month and then blame too expensive. Dr said that that patient really liked hysingla after the first month as well and then couldn't afford it. I asked Shar about those patients plans and found out they were all Medicare D except for one which was a medical mutual self pay plan and was just too expensive. Discussed commercial insurance as the plans to stick with for now to make it affordable and for patient access. Left him with the Sonia profile and Butrans Helen profile and asked for continued business.
PPLPMDL0020000001	Independence	OH	44131	3/31/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	3/31/2015	Review indication and attributes of our product ts, asked about how they handle pa. Pharmacist was not detailed in answer.
PPLPMDL0020000001	Uniontown	OH	44312	3/31/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44134	3/31/2015	No new information learned on this call.
PPLPMDL0020000001	Uniontown	OH	44685	3/31/2015	No new information learned on this call.
PPLPMDL0020000001	Mayfield Heights	OH	44124	3/31/2015	Confirmed with owner- pharmacist Warren that he ordered a bottle of Hysingla 40 mg for Dr Laham patient; which will arrive WED APRIL 1, for patient pick up.
PPLPMDL0020000001	Parma	OH	44134	3/31/2015	No new information learned on this call.
PPLPMDL0020000001	Garfield Hts	OH	44125	3/31/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	3/31/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/31/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44106	3/31/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	3/31/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	3/31/2015	No new information learned on this call.
PPLPMDL0020000001	Highland Heights	OH	44143	3/31/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	3/31/2015	No new information learned on this call.
PPLPMDL0020000001	Rocky river	OH	44116	3/31/2015	Talked about anaged care and our products, talked dosing and a few attributes invited to program and she said mabe she is leaving for vacation this week and she isn't certain she can attend.
PPLPMDL0020000001	Independence	OH	44131	3/31/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44312	3/31/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	3/31/2015	Reviewed hysingla and attributes and asked about stocking but said no. Reviewed abuse Deter properties in labeling and gave fair balance of abuse potential for all opioids including ours.
PPLPMDL0020000001	Mayfield Heights	OH	44124	3/31/2015	Met with pharmacy mgr Natalia. Discussed Purdue single entity, extended release portfolio. Discussed extended release opioids in general and if Natalia is open to dispensing - whether it be CII like Butrans or CII like OxyContin and Hysingla ER. Reinforced abuse deterrent properties for both Hysingla and OxyContin. Natalia says she has no issues dispensing any of my products. Left 4/9 speaker invite. Natalia says no scripts yet for Hysingla. Met with pharmacist Mel who was no familiar with Hysingla ER. Left Hysingla ER pharmacists guide, FPI, and invite to 4/9 speaker program. Mel asked what type of pain? I told him product is NOT for acute pain; discussed indication. He asked what pain level ie on scale from 1-10? Replied we don't have any data defining that - and repeated indication. Discussed, left OxyContin & BUTRANS pharmacist guides as well.
PPLPMDL0020000001	Westlake	OH	44145	3/31/2015	Discussed indication and attributes of Butrans and hysingla.dr agreed to attend dinner program for hysingla. Gave fair balance of abuse potential of all opioids and reviewed abuse deter properties and read indication. Dr said he hasn't tried either of my products but the meeting ight be helpful because he wasn't comfortable writing them.
PPLPMDL0020000001	Westlake	OH	44145	3/31/2015	Reviewed hydrocodone insight and then we talked about what singer comfort level prescribing opioids for month after month pain patients. Dr said she doesn't have many pain patients and she prefers to send them out when she does. Reviewed the indication and went over abuse deter properties too. Reviewed the cox 2 patient in pain and uncontrolled and the tramadol patient for butrans. Dr identifies with these types of patients. So we reviewed Butrans.mshe has not written it. We talked about the scheduling and managed care. Talked about Hysingla and reviewed attributes. Dr asked about steady state of Butrans and hysingla. I addressed her questions. She didn't think she would need use for an extended release product. Dr felt she only sees acute pain patients. But found he information helpful she said.
PPLPMDL0020000001	Mayfield Hts	OH	44124	3/31/2015	Morning snack appointment and selling PUrdue 3-product portfolio; Dr Laham expressed his concern with formulary coverage. I told him not to worry as i will continue to update his medical staff/prior auth coordinator on formulary wins. Left green Protect your meds at home brochures. Dr states he cannot make my April 9 program, but he's encouraged his RN and Nurse Practitioners to attend. Next: met with Denise Guinto, updated with new savings cards (expire 3/31/16) and Denise states Dr. Laham just wrote Hysingla ER 40 mg for a female patient who lives in Hudson. I had her look up patient. Checked iPad and NO pharmacists in area have Hysingla ER 40 mg in stock. We decided to call Hillcrest Atrium pharmacy to order 40 mg. I told her patient should have in 24 hrs if Warren orders this am.
PPLPMDL0020000001	Bedford	OH	44146	3/31/2015	Told him that he has options for his patients that are treating their around the clock pain in 4 or so hour increments. Oxycontin for Oxycodone IR patients and new Hysingla for IR Hydrocodone patients. And what makes that option more interesting are the ADP. Made sure to give fair balance after explaining a use deterrence. He appreciated the information.
PPLPMDL0020000001	Richmond Heights	OH	44143	3/31/2015	Dr Natesan was not in office yet. Discussed with medical assistant at front window , Purdue 3-product portfolio- scheduling/indications; and 4/9 speaker invitation on our most recent product, Hysingla ER. (left invite for Dr H Balaji as well)
PPLPMDL0020000001	Westlake	OH	44145	3/31/2015	He came back to know about Butrans and Hysingla. Reviewed attributes and indication. Dr asked managed care and that was addressed. I asked hhw he treats pain patients that refill every month. Dr said he doesn't have many and the. Explained he had been using Hydrocodone but it is harder for his mail away patients now. I brought up Butrans as a possible solution. Reviewed the scheduling and the refill status. Did give fair balance on abuse potential for all opoids including my products. Dr said he didn't realize that Butrans was schedule three and refills still exist w extended release opioids. Reviewed initiation guide.
PPLPMDL0020000001	Westlake	OH	44145	3/31/2015	Asked about cover my meds.reviewed products and attributes.ngave fair balance on abuse potential for all opioids including mine.
PPLPMDL0020000001	Uniontown	OH	44685	3/31/2015	Lunch-introduction to dr-Oxycontin-dr said likes to keep oxycontin tablet count down as low as possible-usually 3-4-when converting to oxycontin-only concern is some Medicaid programs are tough PA-redirected to Caresource and dr said she tries to get pts to subscribe to Caresource if they have a choice; Butrans-dr said she likes it when it's covered-usually switches to it when pts have been on low dose Vicodin or Percocet-discussed Tramadol pt reaching 200-300 mg-dr said she is concerned about seizures with high doses of tramadol and agreed its a great pt for Butrans; gave new savings cards for both products
PPLPMDL0020000001	Akron	OH	44312	4/1/2015	I discussed the option of hysingla for those patients already on hydrocodone and reviewed doses, conversions 1:1 with hydrocodone and appropriate patients types. Dr said he's forgotten about it. Dr said that he recently started a couple of patients on Butrans where one of them actually asked for an ER option while on 200mg of tramadol. Dr said was taking Norco a couple of times a day and started on a 5 mcg patch. I told dr that hysingla would also be a good option for that patient. Dr agreed and asked about coverage which we then discussed.
PPLPMDL0020000001					

PPLPMDL0020000001	Barberton	OH	44203	4/1/2015	Deanna the nurse said the dr didn't switch the patients because they were fine on their norco. I reviewed the conversion and asked that she forward that I was here today with the dr and to give him the information.
PPLPMDL0020000001	Parma	OH	44129	4/1/2015	No new information learned on this call.
	Munroe Falls	OH	44262	4/1/2015	Short discussion with dr about discussing the option of q12 oxycontin for her patients on IR Oxycodone or percocet around the clock. Dr said she agrees she needs to do that more. I told her about hysingla as yet another option for this taking Hydrocodone around the clock. Reminded her she has said she has quite a few patients already on hydrocodone. Reviewed attributes, dosing and conversions.
PPLPMDL0020000001	Beachwood	OH	44122	4/1/2015	Reviewed with her our portfolio piece and appropriate patient type for each med. Spent more time introducing Hysingla, detailed patient type and formulary information. She feels that oxycontin should be reserved for patients who really need it. She didn't know anything about butrans. Reviewed appropriate patient type, dosing and administration and formulary coverage, highlighting the med d patient
PPLPMDL0020000001	Barberton	OH	44203	4/1/2015	Specific message today with the appropriate patient and conversion, touched in managed care. Closes with if he had any hesitations for not writing hysingla. He said no. I encourage trial in a few patients w Medco or summa as insurance plans as an example and encourage coupons to be used. I asked if there was anything he needed to know from me today. He said no and I thanked him for his time. Hallway call.
PPLPMDL0020000001	Norton	OH	44203	4/1/2015	Highlighted the appropriate patient for oxycontin and hysingla today. Reviewed dosing and conversion. Dr said he will write it. Discussed managed care and coupons
PPLPMDL0020000001	Cleveland	OH	44113	4/1/2015	Reviewed Butrans/Hysingla ER for those patients failing on present therapy requiring around the clock analgesia, also reminded of OxyContin every 12hours, said ok will continue to consider for appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44112	4/1/2015	Reviewed Butrans/Hysingla ER for those patients failing on present therapy requiring around the clock analgesia, said ok will continue to consider for appropriate patients that have coverage
PPLPMDL0020000001	Cleveland	OH	44113	4/1/2015	Quick review of OxyContin every 12hours along with Hysingla ER for those patients requiring around the clock analgesia, Said ok will keep it in mind for appropriate patients.
PPLPMDL0020000001	Mayfield Heights	OH	44124	4/1/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44320	4/1/2015	No new information learned on this call.
	Mogadore	OH	44260	4/1/2015	Dinner-Oxycontin-dr teased about new pain laws having to see patients every month-asked if that falls in line with what he does and he said he does-likes oxycontin in oxycodone pts getting up to 6 tabs and then will switch- showed CVA page on conversion and asked if switching at 4 makes sense and he said yes and will look for pts in practice; Butrans-dr said he likes it before pts take too many Percocet and Vicodin-went over slim Jim conversion slide and pointed out tramadol pts reaching 200-300mg-dr agreed better choice to start before Vicodin and Percocet and will look for pts in practice to switch over
PPLPMDL0020000001	Garfield Hts	OH	44125	4/1/2015	Visited pain mgmnt dept, left info and program invites
PPLPMDL0020000001	Cleveland	OH	44125	4/1/2015	Reviewed portfolio. No new information learned on this call.
	Mayfield Heights	OH	44124	4/1/2015	Impromptu breakfast. Note: Dr Chteingardt on vacation. Discussed extended release profile overall. Dr says she was able to reduce dose for OxyContin patient recently to 10 mg & patient doing great. She also states she has Hysingla conversion in mind for 62-yr old patient. Reinforced current formulary status & best access with commercial plans. Reinforced Caresource Prior Auth for Butrans.
PPLPMDL0020000001	BEACHWOOD	OH	44122	4/1/2015	No new information learned on this call.
PPLPMDL0020000001	Barberton	OH	44203	4/1/2015	Reviewed hysingla and OxyCotin attributes and read indication. No scripts have been processed at this store.
PPLPMDL0020000001	Cleveland	OH	44125	4/1/2015	Reviewed portfolio, said she hasn't seen any RX's will order accordingly, new information learned on this call.
PPLPMDL0020000001	Mayfield Heights	OH	44124	4/1/2015	Met with pharmacy mgr owner Warren. He confirmed the past few scripts for Hysingla went through on Medco. The script for 40 mg will be filled later today, as product hasn't come in yet. He is happy to keep in stock.
	Akron	OH	44333	4/1/2015	Short discussion With elise about placing each product for her patient population. Discussed patient profiles and elise said that she hasn't used hysingla yet but knows she has some patients at are appropriate for it.
PPLPMDL0020000001					Reviewed attributes for all products including Butrans and oxycontin. Discussed new copy cards and average cost for commercial plans for hysingla.
PPLPMDL0020000001	Bedford	OH	44146	4/1/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44320	4/1/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	4/1/2015	No new information learned on this call.
PPLPMDL0020000001	Barberton	OH	44203	4/1/2015	Highlighted the jane profile as a commercial patient, talked about attributes and conversion of hysingla. Highlighted Butrans as an option for med patients with dosing every 7 days.
PPLPMDL0020000001	Cleveland	OH	44129	4/1/2015	No new information learned on this call.
	Barberton	OH	44203	4/1/2015	Discussed attributes of the product hysingla and OxyCotin. No scripts have shown up. They don't use cover my meds but they have it on their computer but aren't familiar with it. They have a prepopulated fax that goes to the offices if a pa is needed.
PPLPMDL0020000001	Akron	OH	44313	4/1/2015	Called to check if they had any prescriptions of hysingla and if they have stocked the 20mg dose. Matt told me that they have not and will wait to see a prescription.
PPLPMDL0020000001	Parma	OH	44129	4/1/2015	Reviewed that ER meds like oxycontin and Hysingla are probably appropriate for a couple of his patients who are in pain 24 hours per day. I know it's not a lot of your patients, but there are a few that are taking 4 or more IR? He agreed.
PPLPMDL0020000001	Mayfield Heights	OH	44124	4/1/2015	Met with exec director Erica Sheldon. Dr Shall will be doing surgery only. He will NOT be managing meds. This is an ambulatory center & preps patients for surgery only.
PPLPMDL0020000001	East Cleveland	OH	44112	4/1/2015	Reviewed portfolio with Latoya. No new information learned on this call.
	Akron	OH	44333	4/1/2015	Good discussion about when he's using my products. Dr said that he will use Butrans as his first line ER opioid especially for a patient on tramadol or low dose vicodin. Dr said that because it's been so hard to get oxycontin approved, he would most likely move to hysingla next and his patients on it really like it and are getting good relief. Dr said if he has a percocet patient that needs an ER opioid he may go to hysingla as well. Dr said he looking forward to using it for his medicare patients and the patients who can't tolerate Butrans due to rash. Discussed new copy cards and left them.
PPLPMDL0020000001	Parma	OH	44129	4/1/2015	No new information learned on this call.
	Beachwood	OH	44122	4/1/2015	Doctor said that he as written for Hysingla about two times so far. He admitted that he still thinks of zohydro first. I asked him about his preferences. He said he would prefer Hysingla because of dosing and ADP. He tried it in patients who were taking 5 or so Norco and needed more medication. He was unaware of it not going through so as far as he knows insurance covered it. I reviewed formully coverage for Hysingla. He likes the portfolio of ER products we have and thinks that they are good options for some of his chronic patients.
PPLPMDL0020000001	Mogadore	OH	44260	4/1/2015	Dinner-introduction to dr-she said she is very conservative and careful in prescribing opioids for her practice-dr asked about abuse potential with Butrans versus tramadol and I said there are no head to head studies and both can be abused-redirected to osteoarthritis pts not being controlled on cox 2s and tramadol-she said she would go to low dose Percocet-asked her to prescribe Butrans instead before going to Percocet-dr agreed that would be a better choice for NSAIDs and tramadol and will look in her practice-went over Caresource PA and she said she will definitely look for those pts; oxycontin-dr said she was concerned about abuse-went over abuse deterrent study and reasons Purdue took high road to do study and re formulate it-dr agreed that was great thing Purdue did and hopes all opioid companies will do the same-asked her for her Percocet pts reaching 3-4 tabs to convert-she agreed to look for pts in her practice
PPLPMDL0020000001	akron	OH	44333	4/1/2015	Dr told me that he started a patient on Butrans in November of 2014 on the 10mcg dose. Dr said in Decemeber of the same year he titrated her dose to 15mcg. Dr stated that she had a follow up the beginning of March and presented with blistering and severe rushing at all application sites. Dr said he discontinued the product at that point. I told dr that I will report the AE. Dr said its the first time he's had a patient had an experience like that and is is confused as to how after a patient had been on Butrans for 3 months that it didn't happen until then. Reviewed copy cards,dosing and when and where to use. Discussed hysingla ER attributes, dosing and conversions and asked him to gain some clinical experience with commercial patients. Discussed his commercial plans and where the oath of least resistance is from a payor perspective.
PPLPMDL0020000001	Mayfield Village	OH	44143	4/1/2015	No new information learned on this call. Left 4/09 Speaker invite.
	Mayfield Heights	OH	44124	4/1/2015	Met with executive director, she states Dr C and Dr Shall will not be involved in any way with managing meds, as this is ambulatory center & prepping patients for surgery. Note: before end of April need to fill out form to have Dr. C removed from database.
	Mayfield Village	OH	44040	4/1/2015	Met with pharmacist Steve. He says Dr Park has been writing extended release opioids. Also that I should speak with Dr Shall at The Laser Spine Institute. He has been getting customers from that group recently. He says once daily hydrocodone and q12 h OxyContin makes sense for patients who meet ER opioid indication. Reinforced Butrans, CII, 1 x week patch for opioid naive or patients taking 3-4 Tramadol daily, who need more analgesia.
PPLPMDL0020000001	Barberton	OH	44203	4/1/2015	Highlighted hysingla attributes and indication. Talked about a use deter properties of OxyContin and hysingla. Gave fair balance of abuse potential for all opioids.
PPLPMDL0020000001	Akron	OH	44333	4/1/2015	Saw briefly at window-followed up with lunch in Streetsboro-needed new savings cards for both products
PPLPMDL0020000001	Cleveland	OH	44113	4/1/2015	Quick review of OxyContin every 12hours along with Hysingla ER for those patients failing on present therapy requiring around the clock analgesia, Said ok, refers to pain mgmnt or David PA
	Mayfield Village	OH	44143	4/1/2015	Asked dr park what does he use for a patient who has already tried non opioids and is in pain. Which specific product or molecule does he like. He responded oxycodone, Hydrocodone and Tramadol. Discussed conversion from IR opioids and change of delivery system, keep on same molecule, since he knows they already tolerate.(Oxycodone to OxyContin q12h and hydrocodone products to Hysingla. For Tramadol patient, Butrans is an option, I can discuss with you next visit. Dr says he stays away from opioids in over 65 population due to concern with respiratory depression if patient taking benzodiazepines and other products concomitantly.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/1/2015	Dr said too busy to talk-call before I come in next visit and he will talk to me-quick product mentions
	Beachwood	OH	44122	4/1/2015	She said that she has a patient in mind for Hysingla and has discussed it with the doc. She didn't know what his insurance is. I reviewed formulary situation with her. She has some patients on more IR than she wants so and has been researching ADP and feels that for the patients taking more than 4 pills per day, they shouldn't have all that IR and believes they should be converted it ER. Reviewed appropriate butrans patient type for who to keep an eye out for, for ex med d patient. She did mention that she would ideally try Hysingla before oxycontin, it's unfortunate that insurance plans have different ideas than she does,
PPLPMDL0020000001	Westlake	OH	44145	4/2/2015	No new information learned on this call.
	Lakewood	OH	44107	4/2/2015	Discussed Butrans and the schedule three status and the mail away patients. Reviewed attributes and fairbalance on abuse potential of all opioids. Dr asked about coverage for hysingla, I reviewed the specifi few plans. Dr said he would not write it until it had med d coverage. Worked with the office manager on cover my meds.nshe said she would not ever use it.
PPLPMDL0020000001	Westlake	OH	44145	4/2/2015	Review of insight hydrocodone and talked about patient under 80mg morphing equivalent he trusts to treat with an opioid, schedule here with opioids and highlighted the schedule 3 status
	Cuyahoga Falls	OH	44223	4/2/2015	Told dr I want him to keep Butrans and hysingla on his radar and discussed appropriate patients for each product. I asked if he could use Butrans for his NSAID and tramadol patients and Norco around the clock patients for the q24, ER hydrocodone without APAP. Dr said he's got some patients in mind and asked about insurance coverage. I discussed which plans he sees and the status of the coverage and told him to stick with commercial insurance for now.
PPLPMDL0020000001	Westlake	OH	44145	4/2/2015	Reminder on hysingla and Butrans. Talked about the hysingla patient and attributes, if patient is rejected and switch is still needed I suggested Butrans s for that appropriate patient. I reminded that the script could be faxed over and did not have to be hand delivered.
PPLPMDL0020000001	Tallmadge	OH	44278	4/2/2015	Spoke with Seth and discussed hysingla ER attributes and when and where to use it and most appropriate patient types. Seth said that he hasn't dispensed any more recently and is filling Butrans though and just filled one from Karen Hodakievic
PPLPMDL0020000001	Cleveland	OH	44114	4/2/2015	Reviewed Butrans/Hysingla For those patients failing on present therapy requiring around the clock analgesia, OxyContin every 12hours, abuse deterrent characteristics said ok will consider for appropriate patients that have coverage,
PPLPMDL0020000001	University Hts	OH	44118	4/2/2015	Quick review of OxyContin every 12hours along with Hysingla ER for those patients failing on present therapy requiring around the clock analgesia, said ok will continue to consider for appropriate patients that have coverage
PPLPMDL0020000001	Cleveland	OH	44114	4/2/2015	Reviewed Butrans/Hysingla For those patients failing on present therapy requiring around the clock analgesia, said ok will consider for appropriate patients that have coverage,

PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/2/2015	Discussed Butrans and hysingla and where he's using both. Dr said he continuing to have great success clinically with Butrans and isn't having any issues with getting it covered. Dr said that his patients that are getting hysingla really like it and aren't having any issues. I reminded dr to use it if and when he has patients that can't tolerate Butrans or other products. Reminded him of the copy cards and trial offers.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/2/2015	No new information learned on this call.
PPLPMDL0020000001	Stow	OH	44224	4/2/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland Hts	OH	44118	4/2/2015	Reviewed portfolio, no new RX's will order accordingly.
PPLPMDL0020000001	Cleveland	OH	44105	4/2/2015	Reviewed portfolio with Kim, will order accordingly as ins. coverage comes on line.
PPLPMDL0020000001	Cleveland	OH	44111	4/2/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/2/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44111	4/2/2015	No new information learned on this call.
PPLPMDL0020000001	Barberton	OH	44203	4/2/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44104	4/2/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44307	4/2/2015	Introduced hysingla and its attributes dosing, conversions and insurance. The tech told me that if its not on medicaid or medicare they won't see any of it because a majority of their patients have those plans. I told them to be patient because it will come. Discussed copy card and trial offer.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/2/2015	No new information learned on this call.
PPLPMDL0020000001	Garfield Heights	OH	44125	4/2/2015	No new information learned on this call.
PPLPMDL0020000001	Stow	OH	44224	4/2/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44115	4/2/2015	Visited lh-house pharm. left product portfolio for Jodi Clineal Pharm.No new information learned on this call.
PPLPMDL0020000001	Tallmadge	OH	44278	4/2/2015	Butrans-discussed elderly OA pt on Celebrex with inadequate pain control coming in complaining of weather changes in joint pain-asked if this is a Butrans pt-dr said it is and will look in practice for pts already on NSAIDs- admitted he was looking for new starts; OxyContin-discussed low back pain pt not controlled on 3 Percocet-instead of going to 4th would dr go to OxyContin-he said he will again look within practice for pts
PPLPMDL0020000001	Akron	OH	44312	4/2/2015	Spoke with Patricia(Pat) and introduced hysingla. P&T said she has had information mailed to the pharmacy about it. Reviewed attributes, dosing, conversions. Pat said the area they are in is synonymous with drug abuse and is glad to know hysingla is abuse deterrent. Discussed insurance coverage and copy cards.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/2/2015	Talked with dr about how his patients are doing on Butrans and asked him for some recent clinical findings. Dr said most patients do very well with Butrans and having good pain relief with little side effects except for some who get rash. Dr said the main problem is that it needs better insurance coverage. I told him he's going to see more issues because of his volume of prescribing. Dr agreed and said it still needs to be better. I told him that I am working with the administration to streamline the prior authorization process.
PPLPMDL0020000001	Akron	OH	44305	4/2/2015	Discussed hysingla ER attributes again and asked him if he feels the product has a place in his practice? Dr said based on the amount of patients on a Norco yes and asked if they can get it. I told him he needs to focus on his commercial patients for now. Dr said that's going to be a problem because most of his patients on pain meds are medicaid, BWC or medicare. I told him I understand but they don't make up 100% of his pain patients and asked for just one who's appropriate. Discussed the option of Butrans for patients on NSAIDs or tramadol and on them around the clock.
PPLPMDL0020000001	Akron	OH	44320	4/3/2015	Presented dr with formulary grids as requested for commercial, Medicare and medicaid for him to place in his exam rooms. Reviewed the coverage status and asked him if he can make it work based on his patient population? Dr said it looks pretty good and asked about CareSource. Reviewed PA criteria for CareSource. Dr said he will have Jenna hang them up in his exam rooms and wanted the conversion guides to go with them. Reviewed appropriate patient types and conversions.
PPLPMDL0020000001	Akron	OH	44320	4/3/2015	Reviewed with dr what Bonyo requested for Butrans. Dr said she thinks it's a good idea because they have way too many patients continuing on IR opioids like Norco and Percocet. Discussed the conversions and appropriate patient types. Dr said she wanted a conversion guide and put it in her lab coat.
PPLPMDL0020000001	Cleveland	OH	44113	4/3/2015	Reviewed portfolio, said ok will consider for appropriate patients.No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	4/3/2015	Reviewed OxyContin every 12hours along with Butrans/Hysingla ER for those patients failing on present therapy that require around the clock analgesia, Formulary opportunities, savings cards. Said ok will continue to consider for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44113	4/3/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44103	4/3/2015	Reviewed portfolio, formulary opportunities, will order accordingly. No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44105	4/3/2015	Reviewed portfolio with Abdul,No new information learned on this call.
PPLPMDL0020000001	Strongsville	OH	44136	4/3/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44304	4/3/2015	Discussed Butrans and hysingla attributes, dosing and conversions. Reviewed which patients tend to be most appropriate for each product.
PPLPMDL0020000001	Valley View	OH	44125	4/3/2015	Reviewed portfolio, Hysingla ER stocking formulary coverage and program invite, Said ok will order accordingly
PPLPMDL0020000001	Garfield Hts	OH	44125	4/3/2015	No new information learned on this call.
PPLPMDL0020000001	Strongsville	OH	44136	4/3/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	4/3/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44320	4/3/2015	No new information learned on this call.
PPLPMDL0020000001	Uniontown	OH	44685	4/3/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44130	4/3/2015	She couldn't talk long. Told her I have two quick points. First, butrans is appropriate for opioid naive patients....5 mcg patch. Mentioned Hysingla is an appropriate option for any of her patients taking 3 or more Norco a day.
PPLPMDL0020000001	Cleveland	OH	44113	4/3/2015	No new information learned on this call.
PPLPMDL0020000001	Strongsville	OH	44136	4/3/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	4/3/2015	No new information learned on this call.
PPLPMDL0020000001	Hudson	OH	44236	4/3/2015	I asked the dr if he would continue to find candidates for Butrans especially those he already has who are taking tramadol on a daily around the clock basis? Dr said he's already got a couple under his belt and will try to find more. Reviewed hysingla ER attributes, dosing and conversions. I asked if it makes sense for him to use in his practice? Dr said he'd write Butrans first and may use it if he knows the patient must be on hydrocodone for a Elaine wrote 2 Butrans rx's while there! Wanted her own savings cards to put in her office-she said she likes Butrans because of the 7 day convenience and the schedule 3 ease of refilling rx's; OxyContin-reminder in oxycodone pts requiring ATC opioid therapy and keeping the same molecule
PPLPMDL0020000001	Cleveland	OH	44113	4/3/2015	No new information learned on this call.
PPLPMDL0020000001	Beachwood	OH	44122	4/3/2015	Quick reminder of OxyContin every 12hours along with Hysingla for those patients failing on present therapy requiring around the clock analgesia said ok, asked to talk with Mary RN
PPLPMDL0020000001	Cleveland	OH	44113	4/3/2015	Reviewed hysingla attributes, dosing, and conversions. Explained abuse deterrent properties and copy cards. Tech Angela said that she had not heard of it yet and will provide the information I left for the pharmacist Lori.
PPLPMDL0020000001	Akron	OH	44312	4/3/2015	Quick point as I was handing her portfolio piece. Reminded her to keep an eye out for patient taking 3 or more IR and consider ER oxycotin or Hysingla with abuse deterrent properties when it is determined that they are in Around the clock pain.
PPLPMDL0020000001	Middleburg Hts.	OH	44130	4/3/2015	Discussed his use of oxycotin and what he's using. Dr said he had a patient last week that had been on oxycotin for many years and had been getting the authorized generic and the pharmacist told the patient they were out of that dose and couldn't order any more. I explained that it may have been true based on their ability to order limited doses at limited quantities. I told dr that maybe the patient could just go to another pharmacy.
PPLPMDL0020000001	Akron	OH	44305	4/3/2015	Reviewed hysingla ER attributes again along with the doses and conversions. I asked dr if he believes he has some currently IR Norco patients that may be appropriate? I told dr that last time he told me he has lots of Norco patients. Dr said he thinks he can find a few. Discussed commercial insurance and the reality behind it with possible prior authorizations based on specific employer groups.
PPLPMDL0020000001	Lakewood	OH	44107	4/3/2015	OxyContin-discussed when reach 3-4 tabs of Percocet instead of going higher switch to same molecule-asked dr does this makes sense and will you look for pts in practice to switch today-dr said it does make sense and asked for new savings cards; Butrans-asked dr when get to 2-300 mg of tramadol and pt still having inadequate pain relief will he prescribe Butrans for those pts instead of going to Percocet and Vicodin-dr said that is where he looks for pts-went over CareSource since it's his largest plan-dr agreed to rx it more in those pts; gave new savings cards for both products
PPLPMDL0020000001	Cleveland	OH	44102	4/6/2015	Reviewed Portfolio with ED, discussed formulary opportunities for Hysingla ER/Butrans, said ok will discuss with clinicians for appropriate patients .
PPLPMDL0020000001	Cleveland	OH	44113	4/6/2015	Quick review of OxyContin every 12hours discussed formulary opportunities for Hysingla ER/Butrans, said ok will discuss with continue to consider for appropriate patients. Program invite
PPLPMDL0020000001	Garfield Hts	OH	44125	4/6/2015	Reviewed OxyContin abuse deterrent, discussed formulary opportunities for Hysingla ER/Butrans, said ok will continue to consider for appropriate patients. Will be moving into new office by end of summer
PPLPMDL0020000001	Akron	OH	44313	4/6/2015	OxyContin-reminder when reaching 4 tabs of Percocet to transition to oxycotin-agreed great place and tries to in pts-wanted new savings cards and gave him a pack; Butrans in tramadol pts
PPLPMDL0020000001	Garfield Hts	OH	44125	4/6/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	4/6/2015	No new information learned on this call.
PPLPMDL0020000001	Fairlawn	OH	44333	4/6/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44105	4/6/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44102	4/6/2015	Reviewed Portfolio discussed formulary opportunities for Hysingla ER/Butrans, said ok will discuss recommend if appropriate, Majority is caresource
PPLPMDL0020000001	Akron	OH	44333	4/6/2015	OxyContin-discussed when get to 4 tabs of Percocet instead of going to 5-6 transition to oxycotin-said makes sense and rx's there-Wendy has daughter on it and it works well; Butrans-went over transition from tramadol before Vicodin-said it does make sense to go to Butrans first then go to Vicodin and Percocet, gave new savings cards for both products
PPLPMDL0020000001	Munroe Falls	OH	44262	4/6/2015	Butrans-discussed Elderly OA and low back pts who have been on Celebrex and tramadol and what about Butrans next-dr said that makes sense before going to Vicodin or Percocet especially elderly taking a lot of tablets and a 7 day patch would be more convenient will look for pts in practice to transition to Butrans; oxycotin-asked at what point does she consider moving a pt from Percocet to something else-dr said once gets to 4-5 looks to switch normally to oxycotin for ATC pain relief and said it makes sense to keep on the same molecule
PPLPMDL0020000001	Barberton	OH	44203	4/7/2015	Spoke to deans, she said the dr has not written any scripts. She discussed the product with dr. Jennifer and that dr said she won't write it cause of managed care and it was just hydrocodone and if it's not broke don't fix it. I suggested that the system is broke. That misuse and abuse are reality and something to be warned about for all opioids. I asked is price really the most important attribute to treating pain? Deana said it shouldn't be but it is. I reminded her of her valuable service by identifying patients with the commercial plans on hysingla that don't require a pa to try and minimize call backs. We talked about butrans- managed Medicaid that they aren't taking any more and med d plans like aarp and silver scripts that don't require a pa. She told me she would communicate my message to the dr, she is off on Thursday, which means if I didn't go today it was my best shot at seeing
PPLPMDL0020000001					

PPLPMDL0020000001	Cleveland	OH	44109	4/7/2015	Quick follow up on product portfolio, Formulary opportunities, savings cards along with a Butrans Initiation/Titration guide, said he will continue to consider for appropriate patients that have formulary coverage
PPLPMDL0020000001	Cleveland	OH	44113	4/7/2015	Reviewed Hysingla ER/Butrans for those patients failing on present therapy requiring around the clock analgesia, formulary opportunities, Initiation/Titration, said Ok will continue to consider for appropriate patients that have ins. coverage Invited to program
PPLPMDL0020000001	Cleveland	OH	44113	4/7/2015	Reviewed Hysingla ER/Butrans for those patients failing on present therapy requiring around the clock analgesia, formulary opportunities, Initiation/Titration, said she will continue to prescribe for appropriate patients that have access to the products. Invited to program
PPLPMDL0020000001	Garfield Hts	OH	44125	4/7/2015	Quick review of OxyContin abuse deterrent characteristics every 12 hours along with Hysingla ER Butrans for those patients requiring around the clock analgesia said ok will consider for appropriate patients
PPLPMDL0020000001	Norton	OH	44203	4/7/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44109	4/7/2015	Reviewed portfolio with floater, will relay info , no new info learned
PPLPMDL0020000001	Uniontown	OH	44312	4/7/2015	Saw briefly at window-dr apologized for not being able to see me today but will next visit
PPLPMDL0020000001	Waterford	OH	45786	4/7/2015	I-Butrans clinical trials, dosing and managed-care. OxyContin dosing and managed care. Hysingla dosing, managed-care, co-pay cards, adverse events, boxed warning and ADP properties.W-has patients in mind for Butrans
PPLPMDL0020000001	Waterford	OH	45786	4/7/2015	I-Butrans clinical trials, dosing and managed-care. OxyContin dosing and managed care. Hysingla dosing, managed-care, co-pay cards, adverse events, boxed warning and ADP properties.W-has patients in mind for Butrans and Hysingla
PPLPMDL0020000001	Cleveland	OH	44109	4/7/2015	Reviewed portfolio with Mana, Ins. update,No new information learned on this call.
PPLPMDL0020000001	Barberton	OH	44203	4/7/2015	Highlighted Hysingla. Pharmacists asked about managed care coverage. I asked about coupons and how they get rendered. He said lunches in like coupon. Highlighted schedule three Butrans and two for Hysingla and OxyContin<font color=blue><b>CHUDAKOB's query on 04/17/2015</b></font>Lisa, What does this mean? "He said lunches in like coupon."<font color=green><b>BARTOLI's response on 04/21/2015</b></font>He said he "punches" it in like all coupons. Spell check changed it.<font color=blue><b>CHUDAKOB added notes on 04/23/2015</b></font>-Ok. Please re-read before submitting. Thanks
PPLPMDL0020000001	Cleveland	OH	44103	4/7/2015	No new information learned on this call.
PPLPMDL0020000001	Highland Heights	OH	44143	4/7/2015	Spoke with med asst Cindy. Dr Salama on vacation ALL THIS WEEK. WILL RETURN Mon April 13. She will ask Marianne to throw out expired cards for OxyContin and Butrans and I let Cindy know i will be by Mon 4/3 and get them new cards for all products. Reminder BWC and can call/fax in refills for Butrans.
PPLPMDL0020000001	Akron	OH	44312	4/7/2015	No new information learned on this call.
PPLPMDL0020000001	Norton	OH	44203	4/7/2015	Highlighted the Percocet patient uncontrolled and appropriate for a change to OxyCotin instead of atc dosing w immediate release Percocet. Dr changes subject to hysingla. He said he will try it had to go and took a patient
PPLPMDL0020000001	Waterford	OH	45786	4/7/2015	I-Butrans dosing and titration. OxyContin start principles. Hysingla dosing, adverse events, managed-care and boxed warningW-had to take two patients off Hysingla see adverse event below
PPLPMDL0020000001	Euclid	OH	44117	4/7/2015	Met with med asst at nurses station. Discussed access, savings, Medicaid status for all 3 products. Reinforced Workers Comp patient access for Butrans. Reminder invite for Thurs 4/9 speaker program.
PPLPMDL0020000001	Cleveland	OH	44125	4/7/2015	Reviewed portfolio, abuse deterrent characteristics of Hysingla ER and OxyContin,No new information learned on this call.
PPLPMDL0020000001	Barberton	OH	44203	4/7/2015	Reviewed attributes of hysingla. Talked about abuse deter properties of OxyContin and hysingla but did give fair balance on abuse potential. Asked the pharmacist her thoughts on why outside of cost would driving norco to be written for atc continual pain instead of extended release options. I asked if norco was out of stock would they make the hysingla recommendation given the appropriate patient? She asked cost. I asked about relay health and talked about the top plans we had coverage. Her answer was probably not. I asked do you recommend generic? I asked her to review the information.
PPLPMDL0020000001	Lyndhurst	OH	44124	4/8/2015	Lunch. Reviewed Cover my Meds - she stated to give flashcard to Diana; which I did and presented after lunch. With Dr. Roda, reinforced appropriate patients for OxyContin; reviewed dosing, strengths, and abuse deterrent properties. Discussed appropriate patients for Hysingla. Dr Roda admitted since product is so new, she forgot how to dose. Went over q 24 h dosing, titration and conversion. Focus: commercial patients for now (trial, savings) Reinforced butrans access and coverage with commercial, Medicare D, and prior auth for Medicaid. She gave me a "maybe" for Thurs 4/9 speaker program. Asked her to consider Hysingla ER today, this week for patients we discussed.
PPLPMDL0020000001	Brooklyn	OH	44144	4/8/2015	Quick review of OxyContin formulary opportunities along with Butrans/Hysingla ER for those patients failing on present therapy requiring around the clock analgesia. Savings cards, Said ok will consider for appropriate patients that have formulary coverage.
PPLPMDL0020000001	Brooklyn	OH	44144	4/8/2015	Reviewed OxyContin formulary opportunities along with Butrans/Hysingla ER for those patients failing on present therapy requiring around the clock analgesia. Savings cards, Said ok will consider for appropriate patients that have formulary coverage.
PPLPMDL0020000001	Cleveland	OH	44127	4/8/2015	Quick review of Butrans/Hysingla ER for those patients failing on present therapy requiring around the clock analgesia. Savings cards, Said ok will consider for appropriate patients but is sending most to pain mgmt
PPLPMDL0020000001	Berea	OH	44017	4/8/2015	Discussed uncontrolled pain patient and the potential a appropriate patient type for our for extended release opioids. Review the indication and covered managed care. Dr was very interested in workers comp coverage. We talked about Butrans and that he has yet to try Butrans s for workers comp or after Tramadol. Dr agreed it would be a place for him to try, asked for one patient to try. Mentioned managed care high deductible plans and mentioned he had trouble getting OxyCotin on some plans this year. Reviewed, dr couldn't remember which plan. Highlighted hysingla and the attributes. Focused on the two if plans of hysingla and use of coupons. Dr repeated asking about copay costs. Which was discussed. We covered OxyContin thru the presentation.
PPLPMDL0020000001	Cleveland	OH	44144	4/8/2015	Reviewed OxyContin formulary opportunities along with Butrans/Hysingla ER for those patients failing on present therapy requiring around the clock analgesia. Savings cards, Said ok will consider for appropriate patients that have formulary coverage.Program invite
PPLPMDL0020000001	Stow	OH	44224	4/8/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44102	4/8/2015	Reviewed portfolio.No new information learned on this call.
PPLPMDL0020000001	Mayfield Heights	OH	44124	4/8/2015	Discussed a Dr. Laham patient (male, on United Health Care commercial, pharmacy is CVS Mayfield Rd; was on extended release hydromorphone). Patient went to pharmacy and stated Hysingla ER is too expensive, even with the savings card. Let Gina know she will need to fill out a prior authorization as Hysingla ER is NOT covered on UHC commercial/PBM is OptumRx. Also, she didn't see my invite for 4/9 program until today; someone put hers and Josie's invite in Frank Sajen mail and Frank has been out of office for almost 2 weeks. Reinforced Butrans access, favorable Medicare D coverage. Reinforced OxyContin favorable Medicare D/commercial coverage.
PPLPMDL0020000001	Lyndhurst	OH	44124	4/8/2015	No new information learned on this call.
PPLPMDL0020000001	Lyndhurst	OH	44124	4/8/2015	No new information learned on this call.
PPLPMDL0020000001	Lyndhurst	OH	44124	4/8/2015	No new information learned on this call.
PPLPMDL0020000001	Stow	OH	44224	4/8/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	4/8/2015	Dr wasn't available but spoke to Bridgette about the dinner program and we talked more on the subject of our programs and attributes.
PPLPMDL0020000001	Lyndhurst	OH	44124	4/8/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	4/8/2015	No new information learned on this call.
PPLPMDL0020000001	Brooklyn	OH	44144	4/8/2015	Reviewed portfolio, Savings cards and formulary opportunities,No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44109	4/8/2015	Left portfolio of products info, No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44109	4/8/2015	No new information learned on this call. Left program invite with Tan- RPH mgr
PPLPMDL0020000001	Westlake	OH	44145	4/8/2015	Spoke to dr about hysingla dinner program. Dr didn't hVe time to review more information due to going into a new patient room. Talked to terra about commercial insured hydrocodone patients who are a who are uncontrolled I. Hydrocodone that meet the indication. Reviewed attributes of hysingla and Butrans with terra the ma.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/8/2015	Quick reminder about oxycotin in Percocet pts when approaching 3-4 tabs; Butrans-thanked me for savings cards
PPLPMDL0020000001	Tallmadge	OH	44278	4/8/2015	No new information learned on this call.
PPLPMDL0020000001	Lyndhurst	OH	44124	4/8/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	4/8/2015	Butrans-likes but finds it hard to get pts to like the patch plus pts are on tramadol with Norco as a breakthrough med-she said that's not her choice as she inherited a big norco practice when she joined-asked about opioid naive pts and she agreed that would be a great choice but doesn't see a lot but if she does she will put them on Butrans-also asked for pts on tramadol exceeding 300mg threshold and she said she would-also went over Caresource pts for meds and she said that would be a great choice! OxyContin-still not allowed to use in practice
PPLPMDL0020000001	Westlake	OH	44145	4/8/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	4/8/2015	Reviewed attributes of products and covered managed care. Nurse said that the dr is t writing much chronic opioids any more, we talked about the lyrica cox 2 and the Tramadol patient uncontrolled for Butrans. Talked about hysingla offered tovar the dr call me if she would like to review the product.
PPLPMDL0020000001	Mayfield Heights	OH	44124	4/8/2015	Met with pharmacy manager Adrienne. Discussed, left: Hysingla ER titration guide & pharmacists guide. Left 4/9 speaker invite - she asked if program offered Continuing Education ( CE) credits & I replied no. She also asked if a technician could attend, I replied no, it must be a registered pharmacist. Left new green "Corresponding Responsibility - A Shared Obligation" green A8990 item.
PPLPMDL0020000001	Lyndhurst	OH	44121	4/8/2015	Met w float pharmacist Paul. Pharmacy mgr Hilary not in ; but staff pharmacist Holly is. Discussed and left Hysingla ER NDC code brochure, FPI, titration guide. Left 4/9 Speaker invite. Discussed abuse deterrent properties for both OxyContin, Hysingla. Discussed schedule, indication for Butrans.
PPLPMDL0020000001	Bedford	OH	44146	4/8/2015	Lunch-Butrans-reminded about tramadol pt exceeding 300mg and dr said he likes it there-also discussed for opioid naive pt on cox 2 not controlling the pain-agreed to rx more; oxycotin-asked if it has same drug deterrent polymer as Hysingla then why is oxycotin q12hrs and Hysingla QD? Told dr I would get back to him on that one
PPLPMDL0020000001	Cleveland	OH	44114	4/9/2015	Reviewed Hysingla/Butrans for those patients that are failing on present therapy requiring around the clock analgesia, also OxyContin every 12hours, formulary opportunities, Said ok, will continue to prescribe and consider for appropriate patients that have coverage
PPLPMDL0020000001	Cleveland	OH	44114	4/9/2015	Reviewed Hysingla/Butrans for those patients that are failing on present therapy requiring around the clock analgesia, also OxyContin every 12hours, formulary opportunities, Said ok, continues to prescribe and consider for appropriate patients that have coverage. Will be attending program
PPLPMDL0020000001	Cleveland	OH	44114	4/9/2015	Reviewed Hysingla/Butrans for those patients that are failing on present therapy requiring around the clock analgesia, also OxyContin every 12hours, formulary opportunities, Said ok, prescribing less but will consider for appropriate patients.
PPLPMDL0020000001	CLEVELAND	OH	44195	4/9/2015	Reviewed portfolio with techs.No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	4/9/2015	Reviewed portfolio with tech, left info for Angela, Will stock when product is presented on regular basis
PPLPMDL0020000001	Cleveland	OH	44195	4/9/2015	Reviewed portfolio with tech, left Hysingla ER info No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	4/9/2015	Reviewed portfolio with tech, acute setting, not many ERO dispensed. Savings cards
PPLPMDL0020000001	Cleveland	OH	44195	4/9/2015	Visited dept. Appt confirmation with Dr. Lagman, Left portfolio of products info



PPLPMDL0020000001	Cleveland	OH	44195	4/9/2015	Quick OxyContin/Hysingla review, invited to upcoming program, No new information learned on this call.
PPLPMDL0020000001	Mayfield Heights	OH	44124	4/9/2015	Gina Reported the prior authorization she submitted for Laham patient covered on United Health Care commercial plan with Optum Rx PBM (pharmacy benefit manager) was DENIED for Hysingla ER. I suggested OxyContin as an option, earn though a different molecule. (Patient previously on extended release hydromorphone)
PPLPMDL0020000001	Cleveland	OH	44195	4/9/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	4/10/2015	Highlighted OxyContin dosing and hysingla. Reviewed dosing and attributes
PPLPMDL0020000001	Cleveland Hts	OH	44118	4/10/2015	Quick review of OxyContin every 12hours, abuse deterrent characteristics along with Hysingla ER for those patients failing on present therapy requiring around the clock analgesia, said ok will continue to consider for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44113	4/10/2015	Reviewed Hysingla ER for those patients failing on present therapy requiring around the clock analgesia, Formulary opportunities, OxyContin every 12hours, said ok will consider for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44113	4/10/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	4/10/2015	Butrans-Dawn said she really likes it and rxed it twice this morning-usually after Tramadol or low dose norco-she said pts really like it because of the 7 day convenience-reminded about Caresource drug coverage and she agreed that's a great pt to rx it for-told her about old savings cards still good and new ones out soon; oxycontin-doesn't rx
PPLPMDL0020000001	Cleveland	OH	44113	4/10/2015	Reviewed portfolio with Cececcilia, no new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44103	4/10/2015	Reviewed portfolio with tech, said they will order accordingly based on utilization, No new information learned on this call.
PPLPMDL0020000001	North Olmsted	OH	44070	4/10/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	4/10/2015	Highlighted attributes of products.
PPLPMDL0020000001	Westlake	OH	44145	4/10/2015	Reviewed attributes of products.
PPLPMDL0020000001	Westlake	OH	44145	4/10/2015	He might attend the hysingla program, but will need to be reminded as he works till 530 on Tuesday. Reviewed managed care.
PPLPMDL0020000001	Westlake	OH	44145	4/10/2015	Discussed dinner program, she is a maybe. Highlighted attributes of hysingla and Butrans.
PPLPMDL0020000001	Westlake	OH	44145	4/10/2015	Discussed extended release opioids and when they turn to a different delivery system. Many of the residents said they had very little opioid experience and are unsure when to keep a patient on convert. Reviewed the jane profile and reviewed hysingla and Butrans mostly. Reviewed attributes.
PPLPMDL0020000001	Westlake	OH	44145	4/10/2015	No new information learned on this call.
PPLPMDL0020000001	Garfield Heights	OH	44125	4/10/2015	Reviewed portfolio with tech, floater in, will relay info to mgr. No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	4/10/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	4/10/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	4/10/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/10/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	4/10/2015	Quick reminder about old savings cards being accepted and told her new ones will be out soon-thanked me for the information; oxycontin-n/a
PPLPMDL0020000001	Westlake	OH	44145	4/10/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	4/10/2015	Discussed oa pain patients and when it is no longer controlled by non opioid therapy. Dr said he will write opioids. to. Highlighted Butrans and hysingla attributes and scheduling.
PPLPMDL0020000001	Westlake	OH	44145	4/10/2015	Dr/Jon mentioned again about 7.5mcg Butrans not paid by workers compensation-told them I would talk to Barry and get answer asap-also had pt on Caresource that had carve out like pt at dr kareti that was required to be on various opioids 180 days prior to coming to see them-told them I would look into that also; Oxycontin-dr has concerns about it since he works a lot at Elyria hospital ER and has pts seeking it still-went over abuse deterrent properties and redirected to the pts he has in his practice he trusts-dr agreed to look in his practice for pts to convert from Percocet
PPLPMDL0020000001	Cleveland	OH	44114	4/10/2015	Reviewed Hysingla ER/Butrans for those patients failing on present therapy requiring around the clock analgesia, Formulary opportunities, OxyContin every 12hours, said ok will continue to consider and recommend to staff for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44195	4/10/2015	Reviewed Hysingla ER for those patients failing on present therapy requiring around the clock analgesia, Formulary opportunities, OxyContin every 12hours, said ok will continue to consider and prescribe for appropriate patients that have formulary coverage
PPLPMDL0020000001	Garfield Hts	OH	44125	4/10/2015	Reviewed Butrans for those patients failing on present therapy requiring around the clock analgesia, Formulary opportunities, OxyContin every 12hours, said ok will continue to consider and for appropriate patients
PPLPMDL0020000001	Parma	OH	44129	4/13/2015	Quick call inviting him to Hysingla program and "pop quiz"...how many strengths of butrans are there? He answered correctly and then we discussed appropriate patient types. Spent most of the time discussing with his MA.
PPLPMDL0020000001	Cleveland	OH	44195	4/13/2015	Reviewed Hysingla ER/Butrans for those patient failing on present therapy requiring around the clock analgesia, OxyContin every 12hours, Formulary opportunities, Said Ok will continue to consider for appropriate patients that have coverage,
PPLPMDL0020000001	Cleveland	OH	44195	4/13/2015	Quick Review of Hysingla ER/Butrans for those patient failing on present therapy requiring around the clock analgesia, OxyContin every 12hours, Formulary opportunities, Savings cards, Said Ok will consider for appropriate patients that have formulary coverage,
PPLPMDL0020000001	Cleveland	OH	44195	4/13/2015	Quick Review of Hysingla ER/Butrans for those patient failing on present therapy requiring around the clock analgesia, OxyContin every 12hours, Formulary opportunities, Savings Cards Said Ok will continue to consider for appropriate patients that have coverage.
PPLPMDL0020000001	Akron	OH	44333	4/13/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44112	4/13/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	4/13/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44124	4/13/2015	Met with medical assistant at front desk. Communicated that OxyContin savings card s expired 3/31/15, Dr should discard old, and start using new. Discussed Purdue 3-product portfolio for patients suffering from daily, around the clock, long term pain.
PPLPMDL0020000001	Parma	OH	44129	4/13/2015	Handed him portfolio piece and said there are three distinct patient types that are appropriate for these ER meds when the patient is in around the clock pain and wants their meds dosed for around the clock pain and not treated in 4 hour increments. invited him to Hysingla dinner program.
PPLPMDL0020000001	Stow	OH	44224	4/13/2015	Discussed all products with Jamie and Kelsey. Told both of the, about oxycontin copay cards and new differences. Jamie said they fill it but mostly refills and then asked about the generic and said she is not being prompted to substitute for the generic. Discussed the doses and patient types. Reviewed Butrans copay cards and Helen profile. Jamie said she has filled hysingla twice for Dr Ali and has not had any insurance issues. Discussed hysingla attributes and doses.
PPLPMDL0020000001	Valley View	OH	44125	4/13/2015	Reviewed portfolio with Aaron, No new information learned on this call.
PPLPMDL0020000001	South Euclid	OH	44121	4/13/2015	No new information learned on this call.
PPLPMDL0020000001	Broadview Heights	OH	44147	4/13/2015	No new information learned on this call.
PPLPMDL0020000001	Broadview Heights	OH	44147	4/13/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	4/13/2015	No new information learned on this call.
PPLPMDL0020000001	Mayfield Hts	OH	44124	4/13/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	4/13/2015	No new information learned on this call.
PPLPMDL0020000001	South Euclid	OH	44121	4/13/2015	Met with both RN's at front desk. Discussed all 3 single entity, extended release opioids for their patients who experience pain daily, around the clock, long term. Scheduled lunch in May to present Hysingla ER to both Doctors in practice. Communicated they discard expired OxyContin savings cards.
PPLPMDL0020000001	Parma	OH	44129	4/13/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	4/13/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44106	4/13/2015	Reviewed portfolio. formulary coverage of the products, No new information learned on this call.
PPLPMDL0020000001	Fairlawn	OH	44333	4/13/2015	Discussed all three products with the pharmacist Jessica reviewing attributes and copay card changes.
PPLPMDL0020000001	Mayfield Heights	OH	44124	4/13/2015	Discussed with nurse, Purdue's 3 extended release, single entity opioid products, for their patients who experience pain daily, around the clock, long term; and for which other treatment options have been inadequate. Left literature for Frank.
PPLPMDL0020000001	Highland Heights	OH	44143	4/13/2015	Met with med asst at front desk. Reinforced Purdue extended release, opioid options, for patients experiencing daily, around the clock, long term pain. Reminder BWC - good access for Butrans, and Medicare D. Commercial plans for OxyContin and Hysingla that don't need prior auth.
PPLPMDL0020000001	Broadview Heights	OH	44147	4/13/2015	Reviewed ER portfolio piece as courtesy for his information. He said he doesn't write pain meds, refers them to pain mange, net or someone else. He does appreciate the new information. Reviewed the opioid naive patient in the studies as appropriate butrans patient and asked if he would consider that med before tramadol, Norco and Percocet. He said he would think about it as an option before he refers to pain management,
PPLPMDL0020000001	Broadview Heights	OH	44147	4/13/2015	Reviewed ER portfolio piece as courtesy for his information. He said he doesn't write pain meds, refers them to pain mange, net or someone else. He does appreciate the new information. Reviewed the opioid naive patient in the studies as appropriate butrans patient and asked if he would consider that med before tramadol, Norco and Percocet. He said he would think about it as an option before he refers to pain management,
PPLPMDL0020000001	East Cleveland	OH	44112	4/13/2015	Reviewed portfolio. No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	4/13/2015	Dr said he continues to have a hard time getting oxycontin covered by insurance but still gets one or two new starts a week. Dr said that is having success converting patients from IR oxycodone or percocet and the patients like only having to take it twice a day. Discussed patients for Butrans and hysingla. Dr said he will continue to write Butrans first even if a patient is on Norco. Dr said that if they are taking under 40mg of Norco he will go Butrans and anything over will probably convert to hysingla. Dr said he will no longer use Zohydro because he thinks hysingla is a better product. Reviewed copay cards and cost.
PPLPMDL0020000001	Akron	OH	44333	4/13/2015	Quick hello in Fairlawn and told her that I would like her to continue using oxycontin especially using it to convert patients already taking oxycodone around the clock and still in pain. I told her we haven't really discussed the option of hysingla ER for those already on Norco who have pain around the clock. Dr said she's seen the information I've left previously and said it sounds like a good product even though she's not used it because it's not covered well. I told her for now to focus on commercial insurance.
PPLPMDL0020000001	Norton	OH	44203	4/13/2015	Focused on Jane profile and reviewed commercial insured for hysingla and caresource for Butrans.
PPLPMDL0020000001	akron	OH	44333	4/13/2015	Gave dr the Helen profile for Butrans and the Jane profile for hysingla. I told him that each of these patients are ideal candidates for each of the products. I told him not to allow patients on tramadol around the clock and in pain to move to Norco. I told him that they may be suited for Butrans. Reviewed Jane profile and asked for prescriptions from him for patients like her.

PPLPMDL0020000001	Broadview Heights	OH	44147	4/13/2015	Doctor isn't afraid of treating pain, but is more likely to prescribe our portfolio it's the patients in the hospital. Reviewed portfolio and positioning. Described abuse deterrent characteristics of Hysingla and oxycontin, with fair balance. Described butrans appropriate for patients first opiod or tramadol failure. Asked him how he typically incorporates new medicine in his practice. He said he likes to spend time reading and researching med before jumping into prescribing it.
PPLPMDL0020000001	Broadview Heights	OH	44147	4/13/2015	Doctor isn't afraid of treating pain, but is more likely to prescribe our portfolio it's the patients in the hospital. Reviewed portfolio and positioning. Described abuse deterrent characteristics of Hysingla and oxycontin, with fair balance. Described butrans appropriate for patients first opiod or tramadol failure. Asked him how he typically incorporates new medicine in his practice. He said he likes to spend time reading and researching med before jumping into prescribing it.
PPLPMDL0020000001	Broadview Heights	OH	44147	4/13/2015	Using portfolio piece first reviewed patient types for each product. Asked him if he would like a bit more information about any of the products. He chose Hysingla. Spent time introducing it and showing pill page and describing that Norco patient. He said that the problem with pain medicine I that ideally by the time you commit to putting a patient on an opiod , it is for a while. Ideally that persons job may be impacted and he isn't sure they should be driving cars either. It is a dilemma. He takes the progression with pain meds very slowly but tried to avoid it altogether. He will consider starting patient on butrans as first opiod and referring to pain management on that medicine.
PPLPMDL0020000001	Broadview Heights	OH	44147	4/13/2015	Using portfolio piece first reviewed patient types for each product. Asked him if he would like a bit more information about any of the products. He chose Hysingla. Spent time introducing it and showing pill page and describing that Norco patient. He said that the problem with pain medicine I that ideally by the time you commit to putting a patient on an opiod , it is for a while. Ideally that persons job may be impacted and he isn't sure they should be driving cars either. It is a dilemma. He takes the progression with pain meds very slowly but tried to avoid it altogether. He will consider starting patient on butrans as first opiod and referring to pain management on that medicine.
PPLPMDL0020000001	Parma	OH	44129	4/13/2015	She said they really haven't reviewed Hysingla with doctors. Ickes because things have been changing around there. She still believes it is a great option for those patients taking more than a few Norco. She had been thinking of butrans more often and seeing overall good results.
PPLPMDL0020000001	Westlake	OH	44145	4/14/2015	Highlighted the 20mg of hysingla and attributes. Dr said he doesn't write much opiods. Talked Butrans who the appropriate patient was like Jane and covered managed care.
PPLPMDL0020000001	Cleveland	OH	44130	4/14/2015	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	4/14/2015	Talked abtinthefew uncontrolled patient on Tramadol appropruTe the for butran under 80mg morephine equivalent. Dr talked about writing less opiods.mi mentioned attributes of hysingla. Dr asked managed care and would not comit to writing the product yet.
PPLPMDL0020000001	Independence	OH	44131	4/14/2015	Asked him how many more patient profiles he wants to see from me before he find an appropriate patient. He said that one of these days all of his patients I pain with get a script. He said he will not write ER hydro one right now, but he will consider butrans.
PPLPMDL0020000001	Garfield Hts	OH	44125	4/14/2015	Reviewed portfolio of products, Cover my meds along with formulary opportunities, Said ok will continue to consider for appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44113	4/14/2015	Discussed Butrans/Hysingla ER for those appropriate patients that are failing on present therapy that require around the clock analgesia. OxyContin abuse deterrent characteristics,Savings cards, formulary opportunities, Said ok will continue to prescribe/consider for appropriate patients that have coverage.
PPLPMDL0020000001	Akron	OH	44310	4/14/2015	Started off with the hydrocodone insight and discussed how hysingla is an excellent option for those who are currently on Norco around the clock and in pain. Discussed attributes, dosing and conversions, FDA tiers for abuse deterrence and trial and copy cards. Dr said that he has an AARP patient he wrote for hysingla and did it because of the patients risk of liver toxicity based on the high dose of Norco. Dr said they are currently doing an appeal and said he feels confident it will go through due to health risks. Reviewed when and where to use hysingla and Butrans and told him that hysingla is a good option for those who can't tolerate even Butrans due to an AE. I told dr to also use Butrans for those tramadol patients around the clock. Discussed oxycontin dosing and appropriate patients and new copy cards.
PPLPMDL0020000001	Cleveland	OH	44106	4/14/2015	Quick review of OxyContin/Hysingla ER for those appropriate patients that are failing on present therapy that require around the clock analgesia. Savings cards, formulary opportunities, Said ok will continue to prescribe/consider for appropriate patients that have coverage.
PPLPMDL0020000001	Cleveland	OH	44113	4/14/2015	Discussed Butrans/Hysingla ER for those appropriate patients that are failing on present therapy that require around the clock analgesia. Savings cards, formulary opportunities, Said ok will continue to prescribe/consider for appropriate patients that have coverage.
PPLPMDL0020000001	Cleveland	OH	44106	4/14/2015	Reviewed portfolio of products with Marge, No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44125	4/14/2015	Reviewed portfolio with Linda Tech, Savings cards, will relay info to Rph
PPLPMDL0020000001	Akron	OH	44305	4/14/2015	Spoke with Sarah about hysingla ER reviewing the attributes, dosing and conversions. Discussed the trial offer and copy card. Sarah said she hasn't seen any yet but thinks it a good product.
PPLPMDL0020000001	Cleveland	OH	44130	4/14/2015	Reviewed coverage and scheduling of butrans and asked what would prevent him from giving it a chance for a few of his patients in around the clock pain. He smiled and said that Hydrocodone is less expensive for his patients. I told him that may be so, but that therapy might not be appropriate for some. Using portfolio piece, describing appropriate patient for butrans and what Hysingla patient might look like. He said that is definitely too expensive for his patients.
PPLPMDL0020000001	Highland Heights	OH	44143	4/14/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	4/14/2015	Spoke with Janet about hysingla ER and she said she had not heard much about it or seen it in the pharmacy. I reviewed the attributes, dosing and conversions and discussed copy cards.
PPLPMDL0020000001	Cleveland	OH	44106	4/14/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44130	4/14/2015	Quickly saw doctor through the window. Handed him butrans patient tear off sheets and asked him if he he has given butrans a try for patients as he refers them to pain management as we discussed at our lunch. He said that he has and it is too soon to tell how it is goign. Told me to check back. Pulled through tear off sheets, gave him my card to call if there is anything I can do. Handed him invite to Hysingla program
PPLPMDL0020000001	Lakewood	OH	44107	4/14/2015	Leveraged the follow up on the hysingla program but he said he could not attend. Focused on trying just one patient who has commercial insurance, reviewed attributes.mdr said he will try and remember and I reminded him that's what I was here to help do. I asked if he has tried Butrans in caresource patients yet? He said he didn't know. Highlighted dosing and formulary. All thru window today.
PPLPMDL0020000001	Mayfield Village	OH	44143	4/14/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/14/2015	Discussed how hysingla can fit in his practice those even the few Norco patients who are in Pain around the clock and also possibly those who are on IR oxycodone with the same issues or can't tolerate it. Dr said he might try it and said that it won't be covered. I explained how it's for now commercially insured and the coverage is based on employer criteria. Reviewed attributes and dosing with conversions. Discussed new oxycontin copy cards and asked him to continue writing.
PPLPMDL0020000001	Cleveland	OH	44130	4/14/2015	Reviewed Hysingla in detail and doctor said that she has patients on no more than 20 Norco for a short period of time. She won't write for oxycontin and she won't write for Hysingla. She is having success with butrans other than some stress with PA's. She thinks that it is a good option rather than pills.
PPLPMDL0020000001	Westlake	OH	44145	4/14/2015	Taled about hysingla program today. Highlighted managed care w cover my meds. Talked about dosing and attributes of Butrans and hysingla.
PPLPMDL0020000001	Parma	OH	44129	4/14/2015	Handing doctor portfolio piece, asked him which of these he would consider prescribing for a patient taking 3-4 Norco per day, who is in chronic pain, and still not satisfied with their pain relief. He smiled and said that is a conversation for next time, but he likes my thinking.....he said he is. Thinking of butrans, so he does listen.
PPLPMDL0020000001	Highland Heights	OH	44143	4/14/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44106	4/14/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44305	4/14/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44130	4/14/2015	No new information learned on this call.
PPLPMDL0020000001	Rocky River	OH	44116	4/14/2015	Highlighted managed care and cover my meds. Highlighted one patient to try with Butrans that is med d or caresource and appropriate using the Helen profile. I asked questions like- what does it mean for the patient to wear a patch that they have to change every 7 days to them? If you offered hysingla to the right commercial all insured patient him would your patients react to a once a day medication to try and control their pain. Today was about the patient and coming up with questions that did not imply but to make him think. Dr only talked about price being a stumbling block. When I reverted to Butrans and our coverage the. He told me he was a man of habit. He is coming to hysingla dinner,
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/14/2015	Reviewed hysingla ER attributes, dosing and Conversions. Discussed how the product is abuse deterrent and where and when to use the product.
PPLPMDL0020000001	Akron	OH	44312	4/15/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44109	4/15/2015	Reviewed portfolio, stocking and formulary status No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	4/15/2015	Reviewed Hysingla/Butrans formulary grids, savings cards and initiation/titration guides, said ok will continue to prescribe and consider for appropriate patients that have formulary coverage.
PPLPMDL0020000001	Cleveland	OH	44195	4/15/2015	Reviewed OxyContin every 12hours along with Hysingla/Butrans formulary grids, savings cards and initiation/titration guides, said ok will continue to prescribe and consider for appropriate patients that have formulary
PPLPMDL0020000001	Cleveland	OH	44113	4/15/2015	Reviewed Hysingla/Butrans formulary grids, savings cards and initiation/titration guides, said ok will continue to prescribe and consider for appropriate patients that have formulary coverage.
PPLPMDL0020000001	Cleveland	OH	44113	4/15/2015	Reviewed Hysingla/Butrans formulary grids, savings cards and initiation/titration guides, said ok will continue to prescribe and consider for appropriate patients that have formulary coverage. Also discussed OxyContin every 12hours.
PPLPMDL0020000001	Parma	OH	44129	4/15/2015	Doctor attended Hysingla program. Heard about oxycontin abuse deterrent information also. Doctor and I discussed appropriate patient types and formulary coverage.
PPLPMDL0020000001	Akron	OH	44320	4/15/2015	No new information learned on this call.
PPLPMDL0020000001	Beachwood	OH	44122	4/15/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44128	4/15/2015	No new information learned on this call.
PPLPMDL0020000001	Independence	OH	44131	4/15/2015	No new information learned on this call.
PPLPMDL0020000001	BEDFORD	OH	44146	4/15/2015	No new information learned on this call.
PPLPMDL0020000001	Maple Heights	OH	44137	4/15/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	4/15/2015	Reviewed portfolio of products with Mike, discussed formulary status and dose forms, Said ok, will keep tuned into utilization and application within hospital setting.
PPLPMDL0020000001	Akron	OH	44303	4/15/2015	Spoke with Rod about hysingla attributes, dosing and conversions and asked if he's seen it yet? Rod said he hasn't but is sure he will once it's picked up on Medicaid and medicare.
PPLPMDL0020000001	Akron	OH	44333	4/15/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	4/15/2015	Quick discussion about hysingla and Butrans copy cards and asked if she would have some patients already on Norco who would fit the indication of hysingla? Elise said she probably has a few. I asked her why she's waiting? Elise said she needs to remember it and knows I'm in every week so she will do her best.
PPLPMDL0020000001	Bedford	OH	44146	4/15/2015	Doctor said that a few patients are saying that hysingl costs close to \$200 at the pharmacy and refuse to pay that. He said that the direction is to write fewer pills and Adp are the future and he will continue to prescribe it for his patients. He still likes butrans as an option instead of pills.

PPLPMDL0020000001	Bedford	OH	44146	4/15/2015	Reminders for both products and look for pts within practice
PPLPMDL0020000001	Akron	OH	44320	4/15/2015	Quick messages for Butrans and hysingla and told her to use Butrans for those patients uncontrolled on tramadol or Norco and reviewed conversions and discussed attributes. Discussed the option of hysingla reviewing its attributes and Jane profile. Explained private insurance coverage and using it if a patient in Norco might be a way to do a 1:1 conversion. Dr said ok and she will try to keep it in mind.
PPLPMDL0020000001	Barberton	OH	44203	4/15/2015	Butrans review doses and managed care
PPLPMDL0020000001	Cleveland	OH	44113	4/15/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44105	4/15/2015	Reviewed portfolio with tech, will relay info to staff RPh, mostly medicaid at this location,
PPLPMDL0020000001	Barberton	OH	44203	4/15/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44313	4/15/2015	Spike with Tom and Jason about hysingla and told them I want to keep it on their radar. Discussed the attributes, dosing and conversions and discussed commercial coverage. I asked Tom who he sees prescriptions from and he said Western Reserve Pain, Dr Shah. And some from Vucetic. I asked about commercial plans they see? Tom said they have a lot of private insurance because of the area they are in.
PPLPMDL0020000001	Akron	OH	44333	4/15/2015	Gave dr more hysingla savings cards and reminded him and elise about the trial card as well and how they work. I asked dr for more hysingla business especially for those he might currently have on Norco around the clock. Dr said he may have a few. I asked if they would fit the indication and he said yes.
PPLPMDL0020000001	Beachwood	OH	44122	4/15/2015	What information does he still need from me in order to find appropriate Hysingla patient? He has the appropriate patient, he has written a few.
PPLPMDL0020000001	Norton	OH	44203	4/15/2015	Discussed managed care and dosing and focused on appropriate patient type.
PPLPMDL0020000001	Akron	OH	44313	4/15/2015	I told dr that he now has three ER opioid options for his patients in daily, around the clock pain. Told him oxycontin is suited well for one already on oxycodone and told him to use the 10mg dose I told him Butrans is ideal for his patients on tramadol who have medicaid, Medicare and commercial plans. Showed him the hysingla initiation and titration guide and asked him if it would make sense to use in his practice for those on Norco? Dr said if it's covered. I told him for now it's commercial covered and he has patients with plans who can get it. Dr said ok.
PPLPMDL0020000001	Akron	OH	44333	4/15/2015	Quick hysingla discussion with Steve discussing attributes, dosing, conversions, steady state and use of breakthrough pain medicines(IR) if necessary. Steve said he's been mailed information and thinks it's a good product.
PPLPMDL0020000001	Barberton	OH	44203	4/15/2015	Reviewed portfolio and gave fair balance on abuse potential of all opioids including Purdue products.
PPLPMDL0020000001	Independence	OH	44131	4/15/2015	He likes the idea of once daily Hysingla with adp and no Tylenol for his patients. He writes oxycontin but would prefer once daily dosing. He finds that he has to write oxycontin q8 and if Hysingla is once per day he would prefer that. I clarified the recommended q 12 dosing of oxycontin which He is aware of recommendations. He is working with me to schedule time with Drs Keppler and Stickney to update them on Hysingla. He has chosen oxycontin in the oac because of delivery system and no Tylenol. He tried butrans in the past, but found that the patients he wrote it for didn't like the patch because it didn't work with their lifestyle, they lived in Florida or Arizona and the patch didn't stick and here we too many uncontrollable.
PPLPMDL0020000001	Sagamore Hills	OH	44067	4/15/2015	Using portfolio piece asked him to remember these meds when he sees a patient in around the clock pain. Specifically pointed to Hysingla asking if he had 30 seconds to hear a bit about it mentioning the common factor w oxycontin and hysingla is abuse deterrent characteristics and ER delivery system.
PPLPMDL0020000001	Akron	OH	44312	4/15/2015	Quick discussion in hallway and told him I'd like him to discuss the q12 oxycodone option for those on IR oxycodone or percoet. Dr said that's a really tough sell because of the oxycontin name. I asked dr if patients have told him that IR is that his stigma? Dr said a little of both. I asked what his Hangul is and he said we can discuss next time. I reminded him about the hysingla option and told him where and when to use.
PPLPMDL0020000001	Euclid	OH	44119	4/15/2015	Quick call with Dr. Wiener, as he was leaving early for an appointment. Met with Kim (OM) and med asst Stacy. Reinforced Purdue portfolio of products available for patients with daily, around the clock, long term pain. Discussed with Stacy, that until I get them new, hard copy Butrans trial/savings cards- she can go to Butrans.com website and print out. She should instruct patient to call toll free number on front of card to activate, PRIOR, to them going to the pharmacy. That will make things run much smoother for all.
PPLPMDL0020000001	Fairview Park	OH	44126	4/16/2015	Discussed the indication of our products and talked about appropriate use. DR said he really like Butrans, we talked about his managed care And trying to use Butrans in areas he hasn't tried like with caresource and med d patients. Dr agreed. Talked about hysingla,he asked if dr Kabarra was writing it and talked about referring to him. Dr did agree that he has a few patients that might be appropriate and then asked cost. We asked commercial patients and the coupons. Reviewed attributes of our products. Dr said he prefers not to write OxyCotin because of the name. We talked an outnabuse potential for all opioids including my product and covered abuse deter properties of OxyCotin and hysingla.
PPLPMDL0020000001	Parma	OH	44134	4/16/2015	Quickly reviewed opioid naive patient type in our studies as an appropriate patient type for butrans....to think of it as first opioid after cox2 or NSAIDs. Using sonia, tried to discuss Hysingla patient type but we were interrupted and he had to leave.
PPLPMDL0020000001	Cleveland	OH	44195	4/16/2015	Reviewed OxyContin every 12hours,along with Hysingla/Butrans formulary grid review, Initiation/Titration and savings cards. Said ok will continue to prescribe for appropriate patients that have coverage.
PPLPMDL0020000001	Parma	OH	44129	4/16/2015	Reviewed portfolio he now has in arsenal for his patient in pain, 2 with abuse deterrent characteristics. (Although still a useable) he is finally getting in the habit of check oars. Reviewed opioid naive patient type from the studies as appropriate patient for butrans. He likes the idea of Hysingla and is keeping it in mind, reviewed formulary coverage for both.
PPLPMDL0020000001	Cleveland	OH	44113	4/16/2015	Quick review of OxyContin every 12hours along with Hysingla ER for those patients failing on present therapy that require around the clock analgesia, Said ok will consider for appropriate patients that have appropriate
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/16/2015	Linda told me that she recently started a patient on hysingla who had been taking about 4 Norco a day. Linda said she hasn't seen the patient back yet but hasn't heard anything so she assumes all is good. I reviewed the dosing and conversions and asked for continued prescribing. Reviewed Butrans dosing and conversions and asked for new starts from tramadol.
PPLPMDL0020000001	Stow	OH	44224	4/16/2015	No new information learned on this call.
PPLPMDL0020000001	Stow	OH	44224	4/16/2015	Discussed the opportunities at hand for her and the rest of the providers in he office for each product. Made apparent the vast opportunities for hysingla based on the volume of Norco patients she has and how many are most likely taking it daily and around the clock. Spoke with sabrina about the payers who are covering hysingla and when to use it. Discussed Butrans opportunities for BWC patients and found out that they are no longer taking caresource. I asked sabrina if she will write and she said she tries but prior authorizations make it hard because all branded products need it. I told her that it won't be an issue for BWC.
PPLPMDL0020000001	University Hts	OH	44118	4/16/2015	No new information learned on this call.
PPLPMDL0020000001	CLEVELAND	OH	44195	4/16/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	4/16/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44134	4/16/2015	No new information learned on this call.
PPLPMDL0020000001	fairview park	OH	44111	4/16/2015	Talked about hysingla and attributes. Asked about stocking. Reviewed Butrans and OxyCotin attributes. Asked about cover my meds.
PPLPMDL0020000001	North Royalton	OH	44133	4/16/2015	No new information learned on this call.
PPLPMDL0020000001	Stow	OH	44224	4/16/2015	Discussed the opportunities at hand for her and the rest of the providers in he office for each product. Made apparent the vast opportunities for hysingla based on the volume of Norco patients she has and how many are most likely taking it daily and around the clock. I asked dr geiger if it makes sense to write ER opioids for patients taking IR opioids around the clock and have pathologies that precipitate chronic pain? Dr said he agrees but said its not that simple because insurance companies who regulate what is written dictate what prescribers write. I told dr if he has sound clinical evidence as to why the current medicine isn't working and why another may be more appropriate then wouldn't he do what's necessary to get it pushed through? Dr said sometimes if it's a battle worth fighting.
PPLPMDL0020000001	Cuyahoga Falls	OH	44224	4/16/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	4/16/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	4/16/2015	No new information learned on this call.
PPLPMDL0020000001	Maple Heights	OH	44137	4/16/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	4/16/2015	Talked about stocking and reviewed attributes of our products. Pharmacist said she does not use cover my meds.
PPLPMDL0020000001	Cleveland	OH	44103	4/16/2015	No new information learned on this call.
PPLPMDL0020000001	Stow	OH	44224	4/16/2015	Discussed the opportunities at hand for her and the rest of the providers in he office for each product. Made apparent the vast opportunities for hysingla based on the volume of Norco patients she has and how many are most likely taking it daily and around the clock. Sandra said she agrees but there is a lot of resistance from the patient having to pay more and getting them through insurance. Discussed hysingla for commercial patients for now outlining dosing, indication, conversions. Told Sandra to use Butrans for her BWC patients and it's the path of least resistance.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/16/2015	Told dr that I know hysingla is right up his alley because it's a once a day hydrocodone with no APAP and he can use it for those already on Norco but in oain and taking it around the clock. Dr asked if it's truly a once a day. I showed him the section from the MVA and discussed it. Dr said ok. Told him to just try it on an appropriate private insurance patient. Reminded him to also use Butrans when patients are on tramadol around the clock.
PPLPMDL0020000001	Cleveland	OH	44195	4/16/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	4/16/2015	No new information learned on this call.
PPLPMDL0020000001	Tallmadge	OH	44278	4/16/2015	B-asked when pt on ir opioid like norco and needs re opioid at what point do you switch-dr said 3-4 tabs normally-I asked for one pt in the next few days to put on Butrans and he agreed; OxyContin-not a big river but reminded him of when reaching that same 3-4 tabs of Percocet instead to Rex oxycontin and he said that makes sense
PPLPMDL0020000001	Cleveland	OH	44102	4/16/2015	No new information learned on this call.
PPLPMDL0020000001	Middleburg Heights	OH	44130	4/16/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	4/16/2015	Reviewed scheduling and dosing highlighted hysingla attributes.
PPLPMDL0020000001	Westlake	OH	44145	4/16/2015	Discussed hysingla attributes and managed care. Talked about the op patient and Butrans dosing and manged care.
PPLPMDL0020000001	Parma	OH	44129	4/16/2015	Asked dr about going from ir opioid to er opioid and dr said he hasn't red OxyContin in awhile-asked about coverage and told him it has really good coverage in the area-however he said he's not afraid to prescribe it in the elderly with severe OA and has nursing home pts as well; Butrans-dr said he really likes it and told him it has really good coverage in the area-dr said that's good
PPLPMDL0020000001	Stow	OH	44224	4/16/2015	Asked Holly the pharmacist what types of insurance plans they see the most of? Holly said that they have a pretty even split between private insurance, medicare and Medicaid. Holly said that all Discount drug Marts have dropped UHC community plan. She said that they have one patient on Butrans from a dr in Twinsburg and have just titrated to 10mcg. Discussed hysingla ER attributes, dosing and conversions.
PPLPMDL0020000001	Stow	OH	44224	4/16/2015	Discussed new hysingla product reviewing attributes, dosing and conversions. I asked if he dispenses Norco and he said yes. I told him its a once a day hydrocodone without APAP and abuse deterrence and if he would stock it. The answer was not until ey see a prescription. Reviewed Butrans attributes and asked him if he has any patients on it? He said he has a couple and has the 5 mcg on the shelf.
PPLPMDL0020000001	Westlake	OH	44145	4/16/2015	Talked about hysingla and Butrans attributes and finding the right patient to try it on. Discussed managed care and talked fair balance about abuse potential for all opioids.
PPLPMDL0020000001	Stow	OH	44224	4/16/2015	Opened discussion with dr by talking about oxycodone and hydrocodon insights. I told her I know who has patients already taking IR opioids around the clock and she has three great ER options. Discussed oxycontin dosing and q12 dosing and then asked her to get some clinical experience with hysingla and discussed attributes, dosing and conversions. Dr asked about insurance and said she would like to use it for medicare. I discussed commercial insurance options and that maybe Butrans would also be a good option for her medicare patients. Reviewed dosing and conversions from Norco. Dr said that sounds like a good option.
PPLPMDL0020000001	Warrensville Heights	OH	44122	4/16/2015	Using portfolio piece through the window, quickly reviewed products meant for patients on around the clock pain. Highlighted the abp but that they can still be abused.

	Stow	OH	44224	4/16/2015	Discussed Butrans and asked him based on his prescribing of it where and when he's been initiating it in his treatment plan? Jon said that he has been using it either after tramadol or Norco and said he knows it's not best useful for those failing multiple and to treat his train wrecks. Discussed Helen profile and then told him about BWC for Butrans and the opportunities that are there for that. Reviewing hysingla again discussing the multiple commercial insurance plans available and to focus on patients on Norco on a daily basis who are in pain. Jon asked about 24 hour use and reviewed MVA plasma hydrocodone section. Asked him to write more.
PPLPMDL0020000001	Westlake	OH	44145	4/16/2015	Dis used hysingla and Butrans attributes. Talked about fair balance of abuse potential for all opioids
PPLPMDL0020000001	Parma	OH	44129	4/17/2015	Asked her if she would consider butrans as a patients first opioid? She she that she typically doesn't think of it. Told her that for patients on cox2 or NSAIDs who are in around the clock pain and still in pain, try butrans with that patient. She had to go, but quickly reminded her of new once daily hysingla option for patients needing more IR than she would like .....
PPLPMDL0020000001	Garfield Hts	OH	44125	4/17/2015	Reviewed OxyContin every 12 hours along with Butrans/Hysingla ER for those patients requiring around the clock analgesia,Initiation/Titration, Formulary opportunities, Savings card, said ok will continue to consider for appropriate patients,
PPLPMDL0020000001	Garfield Hts	OH	44125	4/17/2015	Reviewed OxyContin every 12 hours along with Butrans/Hysingla ER for those patients requiring around the clock analgesia,Initiation/Titration, Formulary opportunities, Savings card, said ok will continue to consider for appropriate patients that have coverage
PPLPMDL0020000001	Cleveland	OH	44125	4/17/2015	Reviewed OxyContin every 12 hours along with Butrans/Hysingla ER for those patients requiring around the clock analgesia,Initiation/Titration, Formulary opportunities, Savings card, said ok will continue to consider for appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44113	4/17/2015	Quick review of OxyContin every 12hours along with Butrans/Hysingla Er for those patients requiring around the clock analgesia, Formulary opportunities, said ok will continue to consider for appropriate patients,
PPLPMDL0020000001	Garfield Hts	OH	44125	4/17/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44125	4/17/2015	Reviewed portfolio with Sarah, formulary updates, said ok will stock accordingly,No new information learned on this call.
PPLPMDL0020000001	Green	OH	44232	4/17/2015	Spoke with the pharmacist Matt outlining hysingla attributes, dosing and conversions. Explained the trial card and copy card. Told Matt about the new trial card to be printed on line by patients and the expiration date of 3/31/15 is still valid on cards presented to them.
PPLPMDL0020000001	Parma Heights	OH	44129	4/17/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	4/17/2015	No new information learned on this call.
PPLPMDL0020000001	Middleburg Heights	OH	44130	4/17/2015	No new information learned on this call.
PPLPMDL0020000001	Middleburg Heights	OH	44130	4/17/2015	Reviewed portfolio piece. She said she has about 5 patients on IR and will generally refer to pain management. We discussed that this information is good to discuss just in case she sees that one patient who might be appropriate. She was mildly interested in butrans. Reviewed it's as first opioid Nd appropriate before tramadol. She agreed that it made sense in that patient type. She will keep in mind but can't make any promises.
PPLPMDL0020000001	Cleveland	OH	44120	4/17/2015	Reviewed portfolio, formulary status, said ok will stock accordingly
PPLPMDL0020000001	Uniontown	OH	44685	4/17/2015	No new information learned on this call.
PPLPMDL0020000001	Independence	OH	44131	4/17/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44134	4/17/2015	No new information learned on this call.
PPLPMDL0020000001	Uniontown	OH	44685	4/17/2015	Short discussion with Kim about hysingla ER and the opportunities I see with my customers and asked her if she thinks it makes sense to convert around the clock Norco patients to hysingla? Kim said for sure and said she knows how important insurance is for those prescriptions. I told her in time it will be picked up on the other segments of patient populations.
PPLPMDL0020000001	Garfield Hts.	OH	44125	4/17/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44104	4/17/2015	Reviewed portfolio, formulary opportunities, said ok, majority is caresource No new information learned on this call.
PPLPMDL0020000001	Beachwood	OH	44122	4/17/2015	No new information learned on this call.
PPLPMDL0020000001	Garfield Hts	OH	44125	4/17/2015	No new information learned on this call.
PPLPMDL0020000001	Beachwood	OH	44122	4/17/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44130	4/17/2015	Reviewed portfolio piece and each products positioning. He was most interested in butrans. Reviewed it in detail including initiation, titration, placement of patch, formulary etc. He was concerned with drug interactions and contraindications, we reviewed it in the FPI. I think he was considering butrans for his wife and her back pain. He wanted savings cards and is going to give it a try. Discussed abuse deterrent properties and fair balance as I introduced Hysingla and talked about oxycotin.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	4/17/2015	Spoke with pharmacist Mike about hysingla ER attributes, dosing and conversions along with trial and copy cards. I asked Mike if he's dispensed it and he said he has three times for dr Cremer. Mike said he thinks all three were the same patient where the patient started on 40mg and then titrated to 60mg then 80mg. I asked Mike if he has the 20 or 40 and he said he will wait until he sees prescriptions and they get it in nxt day.
PPLPMDL0020000001	Akron	OH	44319	4/17/2015	Told dr at front counter and asked him if he could identify just one patient a week who's already on oxycodone IR and is in pain around the clock? Dr said he'll try but he doesn't have too many short acting oxycodone patients. I told him I'm just asking for one. Reviewed hysingla opportunities in his office for those around the clock Norco patients and gave him the initiation and titration guide.
PPLPMDL0020000001	Copley	OH	44321	4/17/2015	Spoke with kristen the pharmacist about hysingla ER discussing attributes, dosing and versions as well as abuse deterrence properties and copy cards. Kristen asked about what happens when a patient attempts to crush it? I told her that the name is resistex and the product will turn into a gelatinous substance and becomes much more difficult to pull through a needle or snort. I reminded her that the product not unlike oxycotin in that it is abuse deterrent, not abuse proof. Kristen said she's seen some information in the mail on it and thanked for for telling her more. Reminded her about Butrans and discussed attributes.
PPLPMDL0020000001	Rocky River	OH	44116	4/20/2015	Talked about cover my meds. Possible Inservice w the staff another visit. Highlighted Butrans and hysingla dosing and attributes.
PPLPMDL0020000001	Rocky river	OH	44116	4/20/2015	Discussed dosing of hysingla and appropriate patient type.
PPLPMDL0020000001	Cleveland	OH	44114	4/20/2015	Reviewed product portfolio, Initiation/Titration, Formulary opportunities, Savings Cards and Upcoming symposium, Said ok will continue to prescribe for appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44195	4/20/2015	Reviewed product portfolio, Initiation/Titration, Formulary opportunities, Savings Cards and Upcoming symposium, Said ok will continue to prescribe for appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44195	4/20/2015	Reviewed product portfolio, Initiation/Titration, Formulary opportunities, Savings Cards and Upcoming symposium, Said ok will continue to prescribe for appropriate patients. no new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	4/20/2015	Reviewed product portfolio, Initiation/Titration, Formulary opportunities, Savings Cards and Upcoming symposium, Said ok will continue to prescribe for appropriate patients.
PPLPMDL0020000001	Rocky River	OH	44116	4/20/2015	Reviewed appropriate patient types. Dr said he just writes the products and hopes they get approved. Talked about dosing abuse potential for all opioids including Purdue products.
PPLPMDL0020000001	Cleveland	OH	44195	4/20/2015	No new information learned on this call.
PPLPMDL0020000001	CLEVELAND	OH	44195	4/20/2015	Reviewed product portfolio, will continue to dispense and recommend accordingly
PPLPMDL0020000001	Cleveland	OH	44195	4/20/2015	Presented portfolio to tech,No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	4/20/2015	Visited Pal-Med Dept, Discussed portfolio, Obtained symposium info
PPLPMDL0020000001	Cleveland	OH	44103	4/20/2015	Reviewed portfolio with Hakim, formulary status No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44313	4/20/2015	Spoke with Matt the pharmacist and he told me that he had his first hysingla preacriton recently and ordered it in next day which the patient was happy with. I asked Matt who write it and he told me Dr Ali. Discuss hysingla attributes and his process when the product requires a pa. Matt said he thinks the patient had a Mediciare plan after I discussed the copy cards.
PPLPMDL0020000001	Rocky River	OH	44116	4/20/2015	Discussed dosing and attributes of products.
PPLPMDL0020000001	Parma	OH	44134	4/20/2015	He is still pleased with the results he sees with butrans. Doctor isn't remembering Hysingla. He likes the idea of a once per day at low doses rather than dosing multiple times during the day. He saw 2 patients earlier today that would be appropriate for Hysingla. He said he will contact them and get them to try Hysingla instead of the Norco he prescribed
PPLPMDL0020000001	Berea	OH	44017	4/20/2015	Followed up per our last conversation. Talked about Butrans and managed care. Reviewed hysingla attributes.
PPLPMDL0020000001	Parma	OH	44129	4/20/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	4/20/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	4/20/2015	Doc found out that his receptionist has been up to something. He was very distracted by that. He did say that the patient he tried Hysingla for was probably not an appropriate patient for it, since the patient is only on 3 low dose Norco per day right now. He is seeing fewer patients now, but is aware of my product portfolio and has patients taking oxycotin.
PPLPMDL0020000001	Fairlawn	OH	44333	4/20/2015	Quick hello at front counter and told him to write oxycotin more frequently the moment a patient is taking IR oxycodone around the clock and in pain and to remember the option of hysingla for those patients who have commercial insurance and on Norco around the clock. Dr said ok. Nothing else learned.
PPLPMDL0020000001	Fairlawn	OH	44333	4/20/2015	Spoke with Gilbert about hysingla, Butrans and oxycotin. Gilbert and Sue told us about a patient of dr Vucetics had a very difficult time finding hysingla and Gilbert started the pa the vucetics office completed it and the patient got hysingla and had cvs Caremark insurance and paid nothing for the first month. Gilbert talked about going the extra mile for the patient so they get what they came in for. Discussed sometimes the difficulty in getting new meds covered and how he's in touch with the office to get it done. Reviewed Butrans copy cards and getting the trial offer on line. Reviewed oxycotin as part of he pain portfolio.
PPLPMDL0020000001	Parma	OH	44129	4/20/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	4/20/2015	Told dr that I spoke with Gilbert at rite aid in Fairlawn and he said a patient of his came to his pharmacy to fill hysingla. Dr said he started her from Norco and said that he's still trying to figure out when he's writing Butrans and hysingla. Dr said he's thinking that 4-5 pills a day will be Butrans and over that will be hysingla. Discussed patient types and when to write.
PPLPMDL0020000001	Akron	OH	44333	4/20/2015	I told dr that he has had some really good success with Butrans in the past but I have the feeling things have changed recently and asked hi if anything has changed? Dr said that he has had some patients who have built up tolerance with the product and have told him it's either not working anymore or not working for the full 7 days so he's gotten away from it. I told dr that all opioids have the potential for tolerance build up and my hopes would be that he would titrate the dose or use a IR opioid or non opioid analgesic for breakthrough. I told dr that he has the ideal patient types for Butrans in that for BWC and told him they are paying 100%. Reviewed the conversions rom tramadol and hydrocodone. I asked dr for those patients and he said ok. Discussed hysingla attributes, dosing and 1:1 conversion from Norco. Dr asked about patient access at the pharmacy and I told him I would provide the pharmacies that are currently stocking to Marsha and she can put together a list.
PPLPMDL0020000001	Akron	OH	44320	4/20/2015	I told dr that the last time I was in I gave her a Butrans initiation and titration slide guide and she put it in her lab coat. I reminded her about Butrans as the option for patients whom are on IR opioids around the clock and reviewed its attributes, dosing and conversions. Dr said she will remember as long as it's covered. I told her to use it for commercial insurance, Caresource with pa criteria and medicare D.
PPLPMDL0020000001	akron	OH	44333	4/20/2015	I asked dr out of his patient populations commercial, Medicaid and medicare, which population does he find most difficult to treat? Dr said medicaid for sure then medicare then commercial. Dr said that the medicaid patients are the most demanding and therefor most difficult to treat. Dr said the medicare at least will listen to you and are open for discussion. I told dr that for his medicaid population Butrans is ideally suited for the Caresource patients and reviewed prior authorization criteria. Dr said that he write a Butrans recently for a medicare patient whom had been on many other opioids including dilaudid and started her on 10mcg and is doing very well. Discussed hysingla patient types and to write it for his commercially insured patients and if he had perocet patients that they are suited for oxycotin q12 if they are in pain around the clock.
PPLPMDL0020000001	Rocky River	OH	44116	4/20/2015	Discussed dosing and attributes of hysingla. Reviewed abuse potential for all opioids including Purdue products.

PPLPMDL0020000001	North Olmsted	OH	44070	4/20/2015	Reviewed hysingla and scheduking, talked about abyss det properties and other attributes. Gave fair balance on abuse potential.
PPLPMDL0020000001	Cleveland	OH	44130	4/20/2015	Quickly using portfolio piece discussed importance of therapy matching the pain. Intermittent pain, IR and around the clock pain, ER meds. Quickly reviewed the butrans and the portfolio positioning and abuse deterrent characteristics.
PPLPMDL0020000001	Akron	OH	44320	4/20/2015	I told Monique that dr Bonyo said he needs a ER opioid that can help him and his practice with the problems he's been having with the volume of patients wanting IR opioids and thinks Butrans can be that product as long as it's covered. I reviewed with Monique the Butrans attributes, dosing and conversions and told her to focus on patients who are on tramadol on Norco around the clock and wanting refills or escalated doses. Monique said she has a patient who has Buckeye who has been on multiple opioids in the past and can't even get lidoderm patches approved. I told her that based on the patients history, she should write Butrans and it will be a pa and to make sure Val completes it. Monique write the Rx in front of Barry and I told her I will follow up.
PPLPMDL0020000001	Parma	OH	44129	4/21/2015	She said she is still choosing butrans for appropriate patients with good success. She wants to hear more about Hysingla. Reviewed information and appropriate patient type and she said she still needs to review it with Doctor. nickels.
PPLPMDL0020000001	Brooklyn	OH	44144	4/21/2015	Quick review of OxyContin every 12hours along with Hysingla ER/Butrans for those patients failing on present therapy requiring around the clock analgesia, Said ok will continue to prescribe for appropriate patients that have ins. coverage. Booked lunch
PPLPMDL0020000001	Cleveland	OH	44113	4/21/2015	Reviewed Butrans/Hysingla ER for those patients failing on present therapy requiring around the clock analgesia, said ok will continue to recommend for appropriate patients that have coverage.
PPLPMDL0020000001	Cleveland	OH	44144	4/21/2015	Quick review of OxyContin every 12hours along with Hysingla ER/Butrans for those patients failing on present therapy requiring around the clock analgesia, Said ok will continue to prescribe for appropriate patients that have ins. coverage.
PPLPMDL0020000001	Euclid	OH	44132	4/21/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44109	4/21/2015	Reviewed portfolio, savings cards and formulary status, said ok will stock and recommend accordingly new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44109	4/21/2015	Reviewed portfolio, savings cards and formulary status with Nate, said ok will stock and recommend accordingly
PPLPMDL0020000001	Brooklyn	OH	44144	4/21/2015	No new information learned on this call.
PPLPMDL0020000001	Euclid	OH	44117	4/21/2015	No new information learned on this call.
PPLPMDL0020000001	Mayfield Heights	OH	44124	4/21/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	4/21/2015	Handed him patient tear off sheets for butrans through the window, reminded of 5 available strengths and told him I'd be back next week to follow up on any Hysingla patients he has found.
PPLPMDL0020000001	Parma	OH	44129	4/21/2015	No new information learned on this call.
PPLPMDL0020000001	Mayfield Hts	OH	44124	4/21/2015	Met with Denise Guinto first. She states Dr. Laham is trying to write Hysingla more but it's not covered on many plans, and even with savings card; it's still \$100/150 per month and their patients cannot afford that. One example was female patient, born 1961, covered on Med Mutual with PBM of Medco. Denise did not realize patients on Med Mutual need a PRIOR AUTH for Hysingla and have to go through a lot of steps first. Also - the pharmacist at patient's CVS faxed script back to Denise/Dr. Laham stating: even with savings card, Hysingla will cost \$150 per month for the patient. I reviewed the best plans with both Denise & Dr Laham for Hysingla access. Butrans formulary status. Oxycontin formulary status focus. Despite continued access/formulary issues with Hysingla, Dr. Laham says it's a good product, and will continue to write.
PPLPMDL0020000001	Bedford	OH	44146	4/21/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44115	4/21/2015	1. Get Med Mutual business update 2. Present OADP resource 3. HYS overview 4. Market Opportunity 5. Purdue resources
PPLPMDL0020000001	Cleveland	OH	44115	4/21/2015	Met with Jerrod Downing to introduce Hysingla ER, FDA final guidance on ADP, their current PA criteria for Hysingla ER.
PPLPMDL0020000001	Cleveland	OH	44109	4/21/2015	Reviewed portfolio, savings cards and formulary status with tech, said ok will relay to mgr and will stock and recommend accordingly
PPLPMDL0020000001	Cleveland	OH	44109	4/21/2015	No new information learned on this call.
PPLPMDL0020000001	C. Falls	OH	44223	4/21/2015	Call with Barry Chudakoff and discussed Butrans copay cards and attributes as well as hyaingla with the pharmacist Catherine. Discussed both product attributes dosing and conversions and stocking of each. Catherine said they have dispensed a handful of hysingla and patient copays have been surprisingly low. Discussed commercial insurance as the path of least resistance.
PPLPMDL0020000001	Garfield Hts.	OH	44125	4/21/2015	No new information learned on this call.
PPLPMDL0020000001	Lyndhurst	OH	44124	4/21/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	4/21/2015	Discussed with doc how therapy should match the patients pain. He agreed. He reserves oxycontin for his really sick patients. He doesn't think he feels the same way about Hysingla. I asked him if he would consider Hysingla for any of his patients taking 4 or more Norco as they are coming in for their follow up visits. He said yes. Reviewed dosing, formulary coverage.
PPLPMDL0020000001	Highland Heights	OH	44143	4/21/2015	Quick call with Dr. Salama. (left literature as well) Spoke with Marianne about Hysingla Er, and asked that they dont' give up on Hysingla just because it's a "newer" product. I communicated that most commercial plans will NOT require a prior auth; and a few plans will require step edit. Further, I showed how the trial, savings cards are designed to work.
PPLPMDL0020000001	Hudson	OH	44236	4/21/2015	No new information learned on this call.
PPLPMDL0020000001	Garfield Heights	OH	44125	4/21/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	4/21/2015	No new information learned on this call.
PPLPMDL0020000001	Mayfield Heights	OH	44124	4/21/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	4/21/2015	No new information learned on this call.
PPLPMDL0020000001	Stow	OH	44224	4/21/2015	Lunch-OxyContin-went over coverage since dr said a reason she isn't prescribing as much as before-was impressed with formulary grid and will start back up with prescribing-dr said its her favorite go to ER opioid and agreed it makes sense to transition from Percocet to OxyContin-dr said earlier is better when transitioning-usually at 3 tabs; Butrans-dr said she has prescribed Butrans since last lunch in tramadol pt and pt was satisfied with pain relief- thanked her and asked her to look for pts in her practice like the last one and she agreed she will
PPLPMDL0020000001	Euclid	OH	44132	4/21/2015	Met tech Yelena for the first time, owner Tim says Yelena joined his business prior to Anna. Met also with tech Anna and Tim. Presented Hysingla ER as most recent addition to Purdue pain product portfolio. Discussed Hysingla ER and OxyContin abuse deterrent properties. Discussed all 3,products as single entity, extended release, no acetaminophen, dosing flexibility. Left Tim updated pharmacists guides, Hysingla FPI, Titration guide. He asked, what if an hcp wants to dose Hysingla outside of the Q24 h dosing schedule,? I let him know to communicate the indication & dosing instructions per the Hysingla FPI.
PPLPMDL0020000001	Chagrin Falls	OH	44022	4/21/2015	Quickly handed her portfolio piece through the window, showing her the options for patients in around the clock pain, two with abuse deterrent properties.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/21/2015	Gretta who is sables nurse was telling me about a recent success with Butrans. Dr said that he has had this patient for a while and had been on high doses of everything and most recently taking percocet every two hours. Dr said he tapered down on all his opioids and started with a 10mcg Butrans. Dr said that the patient loves it and it's changed his life. I told dr that's a great success and I'm glad it works so well in his patients. Reminded him of hysingla patient types and doses with 1:1 ratio.
PPLPMDL0020000001	Parma	OH	44129	4/21/2015	Quickly handed her portfolio piece through the window reminding her of her options for patients in around the clock pain, two with abuse deterrent characteristics and 7 doses. Scheduled appointment with her in a couple
PPLPMDL0020000001	Akron	OH	44333	4/21/2015	Lunch-Butrans-dr said he finds himself going to it more lately because it's a great choice after a low dose opioid-usually norco-went over the pt in his practice already who is approaching 300mg-dr said doesn't like to go that high and agreed Butrans would be a great choice before reaching 300mg-discussed coverage and especially care source and dr said he will definitely prescribe it for those pts; OxyContin-dr said its his favorite ER opioid usually after Percocet 5mg-will switch once pt gets to 4 tabs-agreed great choice to keep the same molecule-went over coverage and dr said he was impressed and will continue to prescribe it-dr said he really likes the abuse deterrent properties
PPLPMDL0020000001	Cleveland	OH	44195	4/22/2015	Quick review of OxyContin/Hysingla ER for those patients requiring around the clock analgesia, said ok will continue to consider and prescribe for appropriate patients. Palliative Med symposium
PPLPMDL0020000001	Cleveland	OH	44113	4/22/2015	Quick review of the Hysingla ER/Butrans formulary grids, said ok will continue to prescribe and consider for those appropriate patients that have coverage.
PPLPMDL0020000001	Cleveland Hts	OH	44118	4/22/2015	Discussed OxyContin every 12hours, abuse deterrent characteristics along with Hysingla/Butrans for those patients failing on present therapy requesting around the clock analgesia that are failing on present therapy.
PPLPMDL0020000001	Cleveland	OH	44113	4/22/2015	Initiation/Titration, Formulary opportunities and savings cards. said ok will continue to consider and prescribe for appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44113	4/22/2015	Quick review of OxyContin every 12hours, abuse deterrent characteristics along with Hysingla/Butrans for those patients failing on present therapy requesting around the clock analgesia that are failing on present therapy. said ok will continue to consider,prescribe and recommend for appropriate patients.
PPLPMDL0020000001	Akron	OH	44307	4/22/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	4/22/2015	No new information learned on this call.
PPLPMDL0020000001	University Hts	OH	44118	4/22/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	4/22/2015	Visited pain mgmnt dept, No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	4/22/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44305	4/22/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland Hts	OH	44118	4/22/2015	Reviewed portfolio, formulary opportunities, No new information learned on this call.
PPLPMDL0020000001	Bedford	OH	44146	4/22/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	4/22/2015	No new information learned on this call.
PPLPMDL0020000001	BEFORD	OH	44146	4/22/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44303	4/22/2015	Called Rod about stocking and dispensing of hysingla . Rod said he still the bottle of 20mg and figures once insurance picks up he will move it. Rod said Butrans is going well and fills it maybe 5 or 6 times a month and has the 5,10, and 20mcg in stock.
PPLPMDL0020000001	Westlake	OH	44145	4/22/2015	No new information learned on this call.
PPLPMDL0020000001	Munroe Falls	OH	44262	4/22/2015	Provided dr with the new product portfolio piece and discussed the candidates appropriate for each product. Oxycontin for those on percocet around the clock, hysingla for those on Norco around the clock and Butrans for those on tramadol around the clock. Reviewed hysingla attributes, dosing and conversions.
PPLPMDL0020000001	Akron	OH	44333	4/22/2015	Elise told me that she attempted to write hysingla for a patient who has a rash with Butrans. Elise said UHC commercial would not approve hysingla and said its not covered. Elise told me today that she has a patient who came in for a Follow up appointment on Butrans and presented with a rash at each application site. Elise said she discontinued Butrans. I told her that unfortunately that's was the situation but she had the right idea to try hysingla. I reviewed plans with EHR and product attributes and told her to continue prescribing.
PPLPMDL0020000001	Cleveland	OH	44114	4/22/2015	Lunch-Jon the "PA" is retiring this Friday and dr Marshall is probably just going to be in Elyria at the hospital



PPLPMDL0020000001	Bedford	OH	44146	4/22/2015	Quick minute with dr-OxyContin-remember the same molecule with Percocet pts and went over coverage; Butrans-asked for tramadol care source pts reaching 300mg threshold-dr said he is rxing both and wanted savings cards for other 2 locations
PPLPMDL0020000001	Westlake	OH	44145	4/22/2015	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	4/22/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44102	4/22/2015	Reviewed portfolio, formulary opportunities, No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44320	4/22/2015	Provided education to the pharmacists and students about hysingla and Butrans. Discussed attributes, dosing and conversions and copay cards.
PPLPMDL0020000001	Cleveland Hts	OH	44118	4/22/2015	Reviewed portfolio, formulary opportunities, No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44312	4/22/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	4/22/2015	Butrans-said everything is good-reminded her of care source pts after tramadol
PPLPMDL0020000001	Cleveland	OH	44113	4/22/2015	No new information learned on this call.
PPLPMDL0020000001	Bedford	OH	44146	4/22/2015	No new information learned on this call.
PPLPMDL0020000001	Beachwood	OH	44122	4/22/2015	Vicki said that he has written for Hysingla but she didn't have time to check if it went through. She is. Omitted to helping to make sure the prior auth's are compelling.
PPLPMDL0020000001	Westlake	OH	44145	4/22/2015	No new information learned on this call.
PPLPMDL0020000001	Independence	OH	44131	4/22/2015	Finally got to the office manager Jenny and scheduled time with Drs Stickney and Keppler. Left formulary information and new product titration. Guides.
PPLPMDL0020000001	North Olmsted	OH	44070	4/22/2015	Discussed dosing and attributes of products. Reviewed abuse potential of all opioids including Purdue products.
PPLPMDL0020000001	Bedford	OH	44146	4/22/2015	Doctor said the direction for opioids is not to write for more than 3-4 IR meds. Any appropriate new starts can start on ER like Hysingla and oxycontin. It is challenging to switch patients from therapy that is working for them to an ER option. He does see himself writing more and more Hysingla in the future because of the single dose, single entity. Truly insurance is what is limiting when patients come back saying they don't want to pay \$150 out of pocket even with the savings card. Butrans is something he needs to think of for patients more often and early.
PPLPMDL0020000001	Parma	OH	44129	4/22/2015	Quickly through the window handed over the pain portfolio piece showing him the options he has for ER meds 2 with abuse deterrent properties, 7 doses and no Tylenol and butrans which he is familiar with.
PPLPMDL0020000001	Beachwood	OH	44122	4/22/2015	Quick call. She has her eye out for appropriate Hysingla patients because she thinks that abuse deterrent properties are a very important feature in the pain market. She would prefer to write abuse deterrent meds rather than larger quantities of IR meds. Reminded her about butrans for patients before c2 opioid pills...
PPLPMDL0020000001	Northfield	OH	44067	4/23/2015	No new information learned on this call.
PPLPMDL0020000001	Valley View	OH	44125	4/23/2015	Reviewed portfolio, formulary opportunities and savings cards.No new information learned on this call.
PPLPMDL0020000001	Barberton	OH	44203	4/23/2015	Managed rce and dosing reminder for appropriate Hysingla patient, then window.
PPLPMDL0020000001	Cleveland	OH	44115	4/23/2015	Reviewed portfolio, formulary opportunities and savings cards.No new information learned on this call. Said ok will continue to consider for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44104	4/23/2015	Reviewed portfolio, formulary opportunities and savings cards.No new information learned on this call. Said ok will continue to consider for appropriate patients
PPLPMDL0020000001	Warrensville Heights	OH	44122	4/23/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	4/23/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/23/2015	Discussed the new Butrans copay cards with the dr and his Nurse. Asked dr for continued prescribing and to continue identifying new patients. Discussed commercial coverage with dr and the Envision Rx plan and to possibly try hysingla on a Caresource patient with a medical exception. Dr said he's having frat success with both products and is trying to write more hysingla but it's tough due to insurance issues.
PPLPMDL0020000001	Tallmadge	OH	44278	4/23/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44115	4/23/2015	Reviewed portfolio, formulary opportunities and savings cards.No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44105	4/23/2015	No new information learned on this call.
PPLPMDL0020000001	Northfield Center	OH	44067	4/23/2015	No new information learned on this call.
PPLPMDL0020000001	Uniontown	OH	44312	4/23/2015	Discussed all three products with new product portfolio piece reviewing all attributes, dosing, conversions and patient types with use of patient type profiles Helen with Butrans, Jane with hysingla sn Maggie for oxycontin. Dr said that hysingla will be used by him because he has plenty of patients taking Norco around the clock and the only stopper is access. I explained the commercial coverage and told him I'm sure he has some working patients that fit the indication. Dr said he prone ably does. Reviewed copay cards and asked for just one patient for each product. Invited to hysingla program on May 19th.
PPLPMDL0020000001	Valley View	OH	44125	4/23/2015	Reviewed portfolio, formulary opportunities and savings cards.No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44125	4/23/2015	Reviewed portfolio, formulary opportunities and savings cards.No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44125	4/23/2015	Reviewed portfolio, formulary opportunities and savings cards.No new information learned on this call.
PPLPMDL0020000001	NORTHFIELD	OH	44067	4/23/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44125	4/23/2015	Reviewed portfolio, formulary opportunities and savings cards.No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	4/23/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/23/2015	Spoke with Lauren about new Butrans copay cards, and its attributes and dosing. She said the fill it regularly. Discussed hysingla attributes and asked if they have dispensed it and she said she thinks they sent it back. Lauren said Bobby sent it back last week. I confirmed shipping back hysingla with Barry Klein and he confirmed they have not seen any prescriptions and he must send any medicine back with in three months in order to get a full refund from McKesson. Barry said after 3 months he only gets about 70% back. Barry said the BWC P&T committee meets next week and hysingla is on the agenda.
PPLPMDL0020000001	Cleveland	OH	44125	4/23/2015	Reviewed portfolio, formulary opportunities and savings cards.No new information learned on this call.
PPLPMDL0020000001	Garfield Hts	OH	44125	4/23/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	4/23/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	4/23/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44125	4/23/2015	Reviewed portfolio, formulary opportunities and savings cards.No new information learned on this call.
PPLPMDL0020000001	Northfield	OH	44067	4/23/2015	No new information learned on this call.
PPLPMDL0020000001	Macedonia	OH	44056	4/23/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44125	4/23/2015	Reviewed portfolio, formulary opportunities and savings cards.No new information learned on this call.
PPLPMDL0020000001	Norton	OH	44203	4/23/2015	Highlighted hysingla dosing but that's all I had time for. Spoke to Lynn she was going to find out the insurance the patient had that the dr sortie it for but didn't have time today.
PPLPMDL0020000001	Akron	OH	44312	4/23/2015	Discussed all three products using new product portfolio piece. Discussed Butrans ideal patient candidate with tramadol around the clock. Reviewed dosing, titration, conversions and copay cards. Discussed the option of hysingla with attributes like no APAP, QD dosing and abuse deterrent properties. Reviewed FDA tiers for abuse deterrent labeling and then discussed commercial insurance coverage. Discussed oxycontin having very similar attributes in single entity opioid, abuse deterrent labeling, and 7 dosage strengths for flexibility in titration. Dr said that hysingla sounds like a great product and he has a few on Zohydro that are happy with it but said the QD dosing and abuse deterrent properties may make him switch them. I asked for just one patient and will follow up.
PPLPMDL0020000001	Akron	OH	44312	4/23/2015	Discussed all three products using new product portfolio piece. Discussed Butrans ideal patient candidate with tramadol around the clock. Reviewed dosing, titration, conversions and copay cards. Discussed the option of hysingla with attributes like no APAP, QD dosing and abuse deterrent properties. Reviewed FDA tiers for abuse deterrent labeling and then discussed commercial insurance coverage. Discussed oxycontin having very similar attributes in single entity opioid, abuse deterrent labeling, and 7 dosage strengths for flexibility in titration. Janet didn't say much but needs to get back to her patients. Nothing else learned.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/23/2015	Short discussion about identifying new patients for Butrans and to look for those taking tramadol around the clock and still in pain. Reviewed new copay card situation and deal with trial offer. Dr said he can work with that and really likes Butrans with good results. Discussed hysingla as the other option for those on noco around the clock and in pain.
PPLPMDL0020000001	Parma	OH	44129	4/23/2015	Doctor doesn't believe in high doses of pain meds. He tries very hard to get to the root of the pain and manage it on the lowest possible doses of meds. He has good success with butrans and finds that coverage is much better than it used to be. He seems to be inheriting many of other docs patients who are on Caresource and high doses of hydrocodone IR? He would be more comfortable prescribing Hysingla then keeping them in current therapy. He said he will try it.
PPLPMDL0020000001	Twinsburg	OH	44087	4/23/2015	Reviewed portfolio piece and his ER opens for patients in around the clock pain. Two have abuse deterrent properties and 7 doses to choose from. Doc spent a few minutes discussing what he sees with that patient type, likes these options but had to get back to his patients.
PPLPMDL0020000001	Tallmadge	OH	44278	4/23/2015	Spoke with Seth the pharmacist and discussed new Butrans copay cards and getting the trial offer at Butrans.com. Seth said they have many patients on it and he's glad to know about the change in cards. Seth said they have a couple of patients in hysingla now and the second one they filled went through without much trouble.
PPLPMDL0020000001	Stow	OH	44224	4/23/2015	Discussed hysingla and Butrans with Andrea and asked her if she's seek lots of tramadol and Norco? Andrea said she fills it all day long. I explained where each of the products can be used by reviewing Butrans and hysingla attributes dosing and conversions. I asked her if she will stock hysingla and she said she will once she sees a prescription.
PPLPMDL0020000001	Cleveland	OH	44195	4/24/2015	Quick Review OxyContin formulary coverage along with Hysingla/Butrans for those patients failing on present therapy requiring around the clock analgesia. Said ok will continue to consider for appropriate patients.
PPLPMDL0020000001	Garfield Hts	OH	44125	4/24/2015	Quick Review of OxyContin formulary coverage along with Hysingla/Butrans for those patients failing on present therapy requiring around the clock analgesia. Said ok will continue to consider for appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44195	4/24/2015	Reviewed OxyContin formulary coverage along with Hysingla/Butrans for those patients failing on present therapy requiring around the clock analgesia. Said ok will continue to consider for appropriate patients.
PPLPMDL0020000001	Mogadore	OH	44260	4/24/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	4/24/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44125	4/24/2015	Reviewed portfolio, formulary opportunities, no new info learned
PPLPMDL0020000001	Chagrin Falls	OH	44023	4/24/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	4/24/2015	No new information learned on this call.
PPLPMDL0020000001	Uniontown	OH	44685	4/24/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	4/24/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	4/24/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44125	4/24/2015	Reviewed portfolio, formulary opportunities, no new info learned

PPLPMDL0020000001	Berea	OH	44017	4/24/2015	Talked about the appropriate uncontrolled dtramadol patient needing a change to their medications....highlighted dosing and managed care. Reviewed a few attributews of oxyconton.
PPLPMDL0020000001	Munroe Falls	OH	44262	4/24/2015	Reminded dr of cliffs messages of tramadol pts reaching threshold and pts reaching 3-4 tabs of Percocet to transition to OxyContin-dr thanked me for the reminders
PPLPMDL0020000001	Garfield Heights	OH	44125	4/24/2015	Reviewed portfolio, formulary opportunities, no new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	4/24/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/24/2015	No new information learned on this call.
PPLPMDL0020000001	Uniontown	OH	44685	4/24/2015	Kim the pharmacist said she has two patients on hysingla and they love it. I told her about the new Butrans copy card and getting the trial card on line. Kim said she has no issues printing it off and does it a lot now anyway.
PPLPMDL0020000001	Cleveland	OH	44115	4/24/2015	visited pain dept, no new information learned on this call.
PPLPMDL0020000001	Akron	OH	44312	4/24/2015	Discussed with the technician the request to Purdue about receiving information about hysingla ER. Tech said the pharmacist wasn't available but will provide info left.
PPLPMDL0020000001	Beachwood	OH	44122	4/24/2015	Quickly mentioned that if he sees any patients who take 3 or so Norco and still need more pain relief he may want to consider ER med like the new Hysingla. He said he would like to hear more but not today. Handed him portfolio piece.
PPLPMDL0020000001					
PPLPMDL0020000001	Westlake	OH	44145	4/24/2015	presented attributes of hysingla and butrans. focused on the lower does and managed care. Dr said she won't write for hysingla if its too complicated to get thru managed care.
PPLPMDL0020000001	Akron	OH	44312	4/24/2015	Told Donna I need to speak with drs manning and McRoberts about hysingla. Both drs came to window and I reviewed all hysingla ER attributes, dosing, conversions and patient savings. Exp,ained abuse deterrent properties and no APAP. Dr said it wounds like a good product. I left him with the initiation and titration guide and the Butrans conversions guide.
PPLPMDL0020000001	Uniontown	OH	44685	4/24/2015	Quick hello in Green and told him we ned to discuss hysingla. Dr said he has the information I've left and will let me know if he has questions. I told him it's necessary I educate him on the product. Dr said he will contact me if necessary.
PPLPMDL0020000001	Uniontown	OH	44685	4/24/2015	Led off discussion with drs by using he product portfolio piece discussing the similarities between oxycontin and hysingla. Both have 7 doses, abuse deterrent properties, single entity opioids and same indication. I reviewed patient types candidates for all products and reviewed profiles for each after reviewing dosing and conversions. I told he doctors that with the three ER opioid options they have, they should fit almost all the patient types they have in their office. I asked the dr if she can think of just a patient or two for each product? Dr said she can and just hope that they get covered. I told her to identify thrifft patients first then we can discuss coverage.
PPLPMDL0020000001	Westlake	OH	44145	4/24/2015	while speaking to the ma's about hysingla and Oxycontin and its abuse deter properties, doctor came to window. I asked his opinion of what was more of interest to him copay cost or abuse deter properies. The dr said both...I suggested for the uncontrolled tramadol patient then he consider butrans as an option if appropriate. Highlighted managed care.
PPLPMDL0020000001	Akron	OH	44312	4/24/2015	Told Donna I need to speak with drs manning and McRoberts about hysingla. Both drs came to window and I reviewed all hysingla ER attributes, dosing, conversions and patient savings. Exp,ained abuse deterrent properties and no APAP. Dr manning said that it sounds like a great product and really likes the QD dosing. Dr asked about insurance and I explained commercial coverage. I asked dr to try it clinically in a working patient on Norco
PPLPMDL0020000001	Uniontown	OH	44685	4/24/2015	Led off discussion with drs by using he product portfolio piece discussing the similarities between oxycontin and hysingla. Both have 7 doses, abuse deterrent properties, single entity opioids and same indication. I reviewed patient types candidates for all products and reviewed profiles for each after reviewing dosing and conversions. I told he doctors that with the three ER opioid options they have, they should fit almost all the patient types they have in their office. I asked dr Orgel if he can refute that statement and prove me wrong in any way? Dr Orgel said he agrees completely and thanks that's a great way to look at my products. Dr said he likes them all and will try to get hysingla going.
PPLPMDL0020000001	Westlake	OH	44145	4/24/2015	We talked about what fears does he have for starting a new product like hysingla that isholding him back from trying it. Dr said he thinks it will work, but he forgets to write it and he is concerned his patients won't want to take a once a day product. I asked why they would want to take anything several times a day/atcd? Dr didn't say much. Left reading materials.
PPLPMDL0020000001	Westlake	OH	44145	4/27/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44320	4/27/2015	Short discussion about hysingla and discussed with dr that Jenna placed the Butrans formulary grid specialized for his practice and a Butrans conversion guide in each exam room. Dr thanked me for doing that and I told him it's now time for him to start prescribing. Reviewed the conversion guide and discussed appropriate patients.
PPLPMDL0020000001	Berea	OH	44017	4/27/2015	Discussed attributes of hysingla and Butrans. Talked about dosing and appropriate patient types.
PPLPMDL0020000001	Cleveland	OH	44113	4/27/2015	Quick review of OxyContin formulary coverage along with Butrans/Hysingla ER for those patients failing on present therapy requiring around the clock analgesia, formulary opportunities, said ok will continue to prescribe for appropriate patients.
PPLPMDL0020000001	Middleburg Heights	OH	44130	4/27/2015	Reviewed entire portfolio and appropriate patient type for each product. Asked how ER meds fit into his practice. He thought of it in terms of shoulder, knee or hip....he may consider ER for hip and shoulder since recovery time is typically longer. He likes the fact that oxycontin and Hysingla have abuse deterrent properties an FDA draft guidance. He put Hysingla information in his pocket and will find a patient to try for Hysingla.
PPLPMDL0020000001	Garfield Hts	OH	44125	4/27/2015	Quick review of OxyContin abuse deterrent characteristics along with Hysingla ER/Butrans for those patients failing on present therapy requiring around the clock analgesia, formulary grids, savings cards said ok will continue to consider for appropriate patients
PPLPMDL0020000001	Garfield Hts	OH	44125	4/27/2015	Quick review of OxyContin formulary coverage along with Butrans/Hysingla ER for those patients failing on present therapy requiring around the clock analgesia, formulary opportunities, said ok will continue to prescribe for appropriate patients that have coverage.
PPLPMDL0020000001	Middleburg Heights	OH	44130	4/27/2015	He is dr. Wolanin's PA. Introduced Hysingla simultaneously with oxycontin and appropriate patient types. Discussed abuse deterrent properties and FdA draft guidance for both products including fair balance.
PPLPMDL0020000001	Akron	OH	44313	4/27/2015	No new information learned on this call.
PPLPMDL0020000001	Mayfield Village	OH	44143	4/27/2015	No new information learned on this call. (left Maggie profile, Butrans and Hysingla literature)
PPLPMDL0020000001	akron	OH	44333	4/27/2015	Short call and asked dr to identify just one patient who fits the profile we have discussed many times before for hysingla. discussed patients on Norco around the clock and in pain is an appropriate option. Reminded about QD dosing, and no APAP with 1:1 ratio with IR hydrocodone. Left him invite to May 19 hysingla program.
PPLPMDL0020000001	Cleveland	OH	44113	4/27/2015	Quick review of portfolio of products, formulary opportunities, said ok will consider but is referring most patients to butran mgnmt. and is doing most surgery at St. V's
PPLPMDL0020000001	Garfield Hts	OH	44125	4/27/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	4/27/2015	Reviewed portfolio, formulary opportunities.No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44125	4/27/2015	Reviewed portfolio, formulary opportunities.No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44134	4/27/2015	No new information learned on this call.
PPLPMDL0020000001	Mayfield Village	OH	44040	4/27/2015	No new information learned on this call.
PPLPMDL0020000001	Euclid	OH	44117	4/27/2015	Met with med asst Laurie. Dr. DeMicco took day off, back at this location thursday. (another doc filling in for him) Laurie brought me into Dr. DeMicco personal office, where they keep savings cars; and we went through to make sure all were updated/not expired. Let her know Butrans new cards soon. Discussed Hysingla should only be offered to patients covered on commercial insurance. Butrans BWC access reminder.
PPLPMDL0020000001	Olmsted Falls	OH	44138	4/27/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	4/27/2015	No new information learned on this call.
PPLPMDL0020000001	Stow	OH	44224	4/27/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44134	4/27/2015	No new information learned on this call.
PPLPMDL0020000001	Lyndhurst	OH	44124	4/27/2015	No new information learned on this call.
PPLPMDL0020000001	Fairlawn	OH	44333	4/27/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	4/27/2015	Gained an apt w him to review hysingla, which was my goal today. Dr came to window and didn't have time to talk so I got him to approve me an apt.
PPLPMDL0020000001	Mayfield Village	OH	44143	4/27/2015	Met with med asst - Dr left early. Discussed 3-product single entity, extended release opioid profile for patients who meet extended release opioid indication. Left Maggie profile, literature for Hysingla and Butrans.
PPLPMDL0020000001	Akron	OH	44333	4/27/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44320	4/27/2015	I asked if the prior authorization has been processed for the patient she started on Butrans who had Buckeye? Monique said that she has not heard anything yet and she sees that as a good sign at this point. I reminded her where and when to use and then reviewed hysingla attributes.
PPLPMDL0020000001	Parma	OH	44129	4/27/2015	Discussed patient he chose Hysingla for and discussed what options might have been appropriate for a patient only taking Norco 1-2 times per day but wanting something different. Gave him patients to think about for our product portfolio to help him differentiate them in his mind. Reviewed Senekot s as appropriate for patients with an opioid because of constipation associated w opiate use that he wasn't aware of. He has written two letters to workers comp encouraging approval of Hysingla.
PPLPMDL0020000001	Fairlawn	OH	44333	4/27/2015	Confirmed lunch for next Monday and reminders for OxyContin when approaching 3 tabs of Percocet to transition and caresource for Butrans
PPLPMDL0020000001	Westlake	OH	44145	4/27/2015	Quick hello and asked about trying Butrans for caresource appropriate patients after Tramadol. Talked to staff about mange care and whabisinthe best way to have the dr remember the new product. They said just be here to remind him. I will bring breakfast Wednesday for more time and try n increase frequency.
PPLPMDL0020000001	Fairlawn	OH	44333	4/27/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44109	4/27/2015	Reviewed portfolio, formulary opportunities.No new information learned on this call.
PPLPMDL0020000001	Brooklyn	OH	44130	4/27/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	4/27/2015	Discussed personalized for ultra grids for all products with dr and Brittany who completes the insurance prior authorizations. Asked dr and Brittany to put them up in each exam room to help streamline the insurance prices with the products. Discussed the pain portfolio with dr and asked him if We have most of his patients covered? Dr said that I do have most covered and will continue to write.
PPLPMDL0020000001	Akron	OH	44312	4/27/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/27/2015	Dr told me that he has a patient on Butrans 10mcg after being titrated to it from 5mcg. Dr said the patient told him that the most recent prescription he got didn't provide the same amount of analgesia and also said "it looked different". Dr said the patient went to the pharmacy and they were no help. Dr asked for my expertise with the situation and I told him it could be an issue with that specific lot number or possibly the patient has built up a tolerance to the 10mcg and titration might be necessary. I explained to dr the design of the patch and how the buprenorphine is mixed in with the adhesive which the dr said he did not know. I mentioned that hysingla might also be an option and reviewed its attributes.
PPLPMDL0020000001	Middleburg Hts.	OH	44130	4/27/2015	Doctor will not write for oxycontin. He sometimes wonders if opioids help with pain or just give patients euphoria. Reviewed Hysingla appropriate patient, dosing and titration. He said he is more likely to find a Hysingla patient than oxycontin because he prefers the hydrocodone molecule. Quickly reviewed butrans patient and c3 scheduling.
PPLPMDL0020000001	Berea	OH	44017	4/27/2015	Highlighted attributes and appropriates patients for our products. Gave fair balance of abuse potential for all opioids.
PPLPMDL0020000001	Fairlawn	OH	44333	4/27/2015	Spoke with Steve the pharmacist and outlined the attributes for Butrans and hysingla. Steve said they have some patients on Butrans but have not dispensed hysingla. I asked if he believes there is a demand for it and Steve said he can't think of why a once a day hydrocodone wouldn't be used.

PPLPMDL0020000001	Cuyahoga Falls	OH	44224	4/27/2015	Dr doesn't like to go beyond 5-6 tabs of any opioid-if pt still needs higher dose will transfer to pain management-asked about tramadol pt approaching 200mg or norco pt approaching 3-4 tabs will she consider transitioning to Butrans-dr said she would-also went over caresource which dr agreed she has and what the pt has to fail to get the Rx filled-agreed great pt and will look within her practice-gave Butrans formulary grid
	Parma	OH	44134	4/27/2015	Reviewed formulary situation with Hysingla. He has a hand full of patients in mind for Hysingla and has to wait for them to show up for their monthly visit. He reinforced his belief in buprenorphine molecule and feels that it is not as addictive as Hydrocodone and Oxycodone. We told him it is an opioid and therefor does have the potential for abuse and addiction. He is seeing less workers comp and is concentration on the addiction and pain management part of his practice.
PPLPMDL0020000001	Berea	OH	44017	4/27/2015	Talked about abuse deter properties of OxyCotin and hysingla. Discussed the appropriate Percocet patient and OxyCotin, tied in managed care. Dr dint say much but sounds good.
PPLPMDL0020000001	Akron	OH	44333	4/27/2015	OxyContin-reminder when get to 3-4 tabs of Percocet to transition to OxyContin-dr said that's where he typically Rx's it-dr asked for abuse pamphlets for his pts-gave him some geared for pts and also for him; Butrans-went over when approaching 200mg tramadol and need to go to ER opioid plus caresource coverage-dr agreed to try it on one pt
PPLPMDL0020000001	Lyndhurst	OH	44124	4/27/2015	Quick call with Karen. Note: Dr. Reed left early; Dr. Roda is off/sick. Met with med asst Diana, she asked about my "new product" and then went to look for literature left from someone. She asked: Is your product Zohydro? I replied, no. My new product is Hysingla ER, a once daily hydrocodone with abuse deterrent properties, no acetaminophen. We also discussed Butrans savings card exp date of 3/31/15; and printing out of Butrans cards, until I get them hard copies. Left my business card for calls on lunch cancellations: NOTE: lunches only on Mon and Wed.
PPLPMDL0020000001	Akron	OH	44310	4/28/2015	Told dr I had one point for each product starting with Butrans. I told dr that he should be using Butrans for any and all patients on tramadol around the clock and in pain. Mentioned that Norco patients are also good candidates however those patients can also be appropriate for hysingla. Discussed Butrans new savings cards and reminded him of hysingla dosing and conversions from a norco. Asked dr to use oxycontin as he sees fit and a percocet patient in pain around the clock is an excellent candidate but also may be appropriate for hysingla.
PPLPMDL0020000001	Barberton	OH	44203	4/28/2015	No new information learned on this call.
PPLPMDL0020000001	Brooklyn	OH	44144	4/28/2015	Quick review of OxyCotin formulary opportunities along with Hysingla ER/Butrans for those patients failing on present therapy requiring around the clock analgesia, said ok will continue to consider for appropriate patients.
PPLPMDL0020000001	Brooklyn	OH	44144	4/28/2015	Reviewed OxyCotin formulary opportunities along with Hysingla ER/Butrans for those patients failing on present therapy requiring around the clock analgesia, said ok will continue to consider/prescribe for appropriate patients that have coverage
PPLPMDL0020000001	Cleveland	OH	44113	4/28/2015	Reviewed Hysingla ER/Butrans for those patients failing on present therapy requiring around the clock analgesia, Identified patients with access CareMark,Express Scripts Medco along with OxyContin abuse deterrent characteristics said ok will continue to consider/recommend for appropriate patients that have access to products.
PPLPMDL0020000001	Cleveland	OH	44113	4/28/2015	Reviewed Hysingla ER/Butrans for those patients failing on present therapy requiring around the clock analgesia, Identified patients CareMark,Express Scripts Medco said ok will continue to consider for appropriate patients that have coverage.
PPLPMDL0020000001	Cleveland	OH	44113	4/28/2015	Reviewed Hysingla ER/Butrans for those patients failing on present therapy requiring around the clock analgesia, Identified patients CareMark,Express Scripts Medco said ok will continue to consider for appropriate patients that she have access to products.
PPLPMDL0020000001	Cleveland	OH	44113	4/28/2015	Reminder with caresource ultram pts nearing 200mg with uncontrolled pain-Dawn said she likes it there and is looking for pts to put on it; OxyContin-n/a
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/28/2015	No new information learned on this call.
PPLPMDL0020000001	Lyndhurst	OH	44124	4/28/2015	No new information learned on this call.
PPLPMDL0020000001	Barberton	OH	44203	4/28/2015	No new information learned on this call.
PPLPMDL0020000001	South Euclid	OH	44121	4/28/2015	Left literature with medical assistant at front window. Discussed Purdue single entity, extended release opioid portfolio, for patients who meet extended release indication.
PPLPMDL0020000001	Parma	OH	44129	4/28/2015	She is still seeing success with butrans including her son who is on it and has done better on butrans than anything he has tried before. Reviewed Hysingla again and tried to narrow down the patient type she is looking for as patient in 3 IR meds needing more pain relief. Reviewed formulary and savings program also. She thinks there is a need for Hysingla in their practice and has to make a call to Doctor nickels to see if they are able prescribe this product.
PPLPMDL0020000001	Cleveland	OH	44113	4/28/2015	Reviewed portfolio with Mike.No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/28/2015	No new information learned on this call.
PPLPMDL0020000001	Lyndhurst	OH	44124	4/28/2015	No new information learned on this call.
PPLPMDL0020000001	Lyndhurst	OH	44124	4/28/2015	No new information learned on this call.
PPLPMDL0020000001	Barberton	OH	44203	4/28/2015	No new information learned on this call.
PPLPMDL0020000001	Lyndhurst	OH	44124	4/28/2015	No new information learned on this call.
PPLPMDL0020000001	Brooklyn	OH	44144	4/28/2015	No new information learned on this call.
PPLPMDL0020000001	Brooklyn	OH	44144	4/28/2015	Reviewed portfolio, formulary opportunities, No new information learned on this call.
PPLPMDL0020000001	Barberton	OH	44203	4/28/2015	Dr was at the window. I asked if I could introduce her to something new,msh said what is it. I highlighted hysinglas attributes. Dr asked about coverage in med d. I told her she would have more luck right now writing OxyCotin and Butrans for those patients.
PPLPMDL0020000001	Richmond Heights	OH	44143	4/28/2015	Left literature for Dr Natesan with medical assistant at front desk. Discussed portfolio of products, and that these single entity, extended release products are for patients who are experiencing pain daily, around the clock, long term.
PPLPMDL0020000001	Lyndhurst	OH	44124	4/28/2015	No new information learned on this call.
PPLPMDL0020000001	Independence	OH	44131	4/28/2015	Last time doctor said that he will be writing butrans since it is the only C3 opiod in the market, asked him if he has followed up on that. He said he tried to write it a couple times but needs to be reminded
PPLPMDL0020000001	Mayfield Heights	OH	44124	4/28/2015	Left literature for Frank with medical assistant. Discussed 3 different products for 3 different patients. Ability to convert patients to a single entity, extended release product for patients on 3-4 Tramadol daily (Butrans; 3-4 oxycodone daily (OxyContin)and patients taking 2-3 or 4 hydrocodone a day; who could benefit from the once daily delivery system Hysingla ER can offer.
PPLPMDL0020000001	Highland Heights	OH	44143	4/28/2015	No new information learned on this call.
PPLPMDL0020000001	Barberton	OH	44203	4/28/2015	Dr tod me about his move this June and said his patients would be refered to the local pain doctors and that the office was to close. We talked about the dosing and managed care of products. I asked what has held him back from writing hysingla the most? Dr said remembering and cost.
PPLPMDL0020000001	Akron	OH	44312	4/28/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	4/28/2015	Reminder about caresource pts with butrans and she said she prescribes it for those pts whenever possible; OxyContin-n/a
PPLPMDL0020000001	Cleveland	OH	44113	4/28/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44312	4/28/2015	Showed dr the new portfolio piece with our products. Butrans, hysingla and oxycontin. I won't lined it for him and explained where and when patients are candidates for each. Dr said we do kind of have the market when it comes to pain. I told him to please write Butrans for those on tramadol around the clock and hysingla for those on Norco around the clock. Dr agreed and said he just needs to get hysingla paid for. I agreed and told him I will make a formulary grid specifically for his practice. Dr said that will help.
PPLPMDL0020000001	Beachwood	OH	44122	4/28/2015	Doctor said that 80 percent of his practice is acupuncture, but he still requires Pharmacologic approaches. Used maria profile to discuss specific patient for butrans and the option of butrans as patients first opioid and it c3 classification. He has more comfort with Oxycodone molecule than hydrocodone.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/28/2015	Discussed specialized formulary grids for products with Kare and dr and discussed each grid and where each product can be placed in the practice. Told dr and Kare that the grids need to be placed in each exam room for ALL the providers to help streamline where the products are covered and where they are not. Provided Butrans copy cards, hysingla initiation and titration guide and oxycontin titration guide.
PPLPMDL0020000001	Brooklyn	OH	44144	4/28/2015	Reviewed Hysingla ER,Butrans, Initiation/Titration, formulary status , said ok will relay info and order accordingly
PPLPMDL0020000001	Mayfield Hts	OH	44124	4/28/2015	Lunch. Discussed/showed speaker booklet/slide deck manual. (I received UPS) Dr Lahama stated he already recieved in mail. We discussed coverage and patient access for Butrans and he says he's been writing more Butrans and that Butrans has the best coverage of all 3 products. I told him to remember OxyContin has been out for years and also has favorable commercial, Med D and Medicaid coverage, for the majority of patients. He also states he hopes coverage for Hysingla will improve soon. I asked him how is the safety and efficacy for patients currently on Hysingla? He says patients are doing great, no reports of side effects, and no need to titrate dose (s) yet. I asked where exactly he is getting hysingla covered? He says he can't recall, but will do some research and then call me. NOTE: he is leaving for vacation, will NOT be back until May 11 or 12.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/28/2015	OxyCotin-asked dr at what point does he go from a short acting opioid to an long acting opioid-dr said it's very dependent on the patients past medicine history and very individualized-dr said he really likes Purdues products and prescribes them whenever possible; butrans-dr said he is writing more because it's easy to prescribe for patients taking short acting opioids and also opioid naive patients
PPLPMDL0020000001	Warrensville Heights	OH	44122	4/28/2015	Reviewed product portfolio and appropriate patient types for each product. He was most interested in Hysingla and butrans. Reviewed dosing and initiation and abuse deterrent properties. Doc believes he will find a place for Hysingla and butrans in his practice. He writes oxycontin in nursing homes and for cancer patients.
PPLPMDL0020000001	Cleveland	OH	44113	4/29/2015	Reviewed OxyCotin every 12hours along with Hysingla ER/Butrans for those patients failing on present therapy requiring around the clock analgesia, formulary grids, savings cards said ok will continue to consider for appropriate patients
PPLPMDL0020000001	Westlake	OH	44145	4/29/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	4/29/2015	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	4/29/2015	Highlighted the under 80 mg appropriate Butrans patients, went over dosing and conversion. Dr said he was not writing as much OxyCotin and explained he needs to refer out more then he does.
PPLPMDL0020000001	Cleveland	OH	44195	4/29/2015	Quick Review OxyCotin every 12 hours, abuse deterrent characteristics along with Hysingla ER/Butrans for those patients failing on present therapy requiring around the clock analgesia, Savings cards, said ok will continue to consider for appropriate patients.No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	4/29/2015	Reviewed OxyCotin every 12 hours, abuse deterrent characteristics along with Hysingla ER/Butrans for those patients failing on present therapy requiring around the clock analgesia, Savings cards, said ok will continue to consider for appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44113	4/29/2015	Quick review of OxyCotin every 12hours along with Hysingla ER for those patients requiring around the clock analgesia. Said ok refers to David PA) or pain mgmnt dept for ERO but will consider for appropriate patients.
PPLPMDL0020000001	Euclid	OH	44132	4/29/2015	Neither Dr Brobbyer or Liz newsome in today. met with medical asstants at front window. Introduced COver my Meds. Discussed patient access for all 3 products. Left literature for (Dr Brobbyer, Liz Newsome and Cara McHugh
PPLPMDL0020000001	Cleveland	OH	44195	4/29/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44114	4/29/2015	Reviewed portfolio, formulary opportunities, No new information learned on this call.
PPLPMDL0020000001	Twinsburg	OH	44087	4/29/2015	No new information learned on this call.
PPLPMDL0020000001	Chagrin Falls	OH	44023	4/29/2015	No new information learned on this call.

PPLPMDL0020000001	Westlake	OH	44145	4/29/2015	No new information learned on this call.
PPLPMDL0020000001	Twinsburg	OH	44087	4/29/2015	No new information learned on this call.
PPLPMDL0020000001	Bedford	OH	44146	4/29/2015	Doctor says he is averaging several scripts of Hysingla per week. One patient last week on medical mutual got the med and paid the \$100 to get it. Reviewed which plans he will have the most success. Asked him if he has written for all 5 strengths of butrans or where he typically starts? He was called away
PPLPMDL0020000001	Lakewood	OH	44107	4/29/2015	Highlighted managed care with attributes of hysingla and Butrans thru window.
PPLPMDL0020000001	Westlake	OH	44145	4/29/2015	Talked about trying hysingla and his experience. Dr recited the patient profile back and said most of his patients for reassessment a have been caresource or older. We talked about Butrans for potential patients and dr said he has been writing a lot of Butrans and terra said she hasn't needed any prior authorizations. Talked about setting them up to cover my meds for next time
PPLPMDL0020000001	Maple Heights	OH	44137	4/29/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44103	4/29/2015	Reviewed portfolio, formulary opportunities, 99% medicaid at this location, No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	4/29/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	4/29/2015	No new information learned on this call.
PPLPMDL0020000001	East Cleveland	OH	44112	4/29/2015	Reviewed portfolio, formulary opportunities no new info learned
PPLPMDL0020000001	Beachwood	OH	44122	4/29/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	4/29/2015	Talked about....
PPLPMDL0020000001	Westlake	OH	44145	4/29/2015	Highlighted conversion and dosing of our products. I asked the dr how concerned is she with the amount of Tylenol her patient a get on a daily basis. Provided the insight. Dr said she is more aware of it in the elderly patients. Dr said she hasn't written hysingla yet. She asked about managed care. I covered this, also pointed out ,managed care with Butrans and OxyContin.
PPLPMDL0020000001	Westlake	OH	44145	4/29/2015	They were familiar with hysingla but said they haven't seen a script for it yet. We talked about attributes of the product and gave fair balance about abuse potential for all opioids including Purdue products.
PPLPMDL0020000001	Cleveland	OH	44195	4/29/2015	Reviewed Hysingla/Butrans for those patients failing on present therapy requiring around the clock analgesia, said ok will continue to consider and prescribe for appropriate patients
PPLPMDL0020000001	Fairview Park	OH	44126	4/30/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	4/30/2015	He likes the options of oxycontin and Hysingla but has trouble with how much it costs his patients. IR Oxycodeone and Hydrocodeone can be inexpensive . He knows that IR probably isn't ideal dosing for a patient in around the clock pain but his patients can't afford other things and insurance doesn't cover it.
PPLPMDL0020000001	Cleveland	OH	44114	4/30/2015	Reviewed OxyContin every 12 hours, abuse deterrent characteristics, Formulary grid along with Hysingla ER/ Butrans for those patients failing on present therapy requiring around the clock analgesia. Formulary opportunities, Savings cards. Said ok , will continue to prescribe for those appropriate patients that have coverage
PPLPMDL0020000001	Cleveland	OH	44113	4/30/2015	Reviewed Hysingla/Butrans for those patients failing present therapy requiring around the clock analgesia, said ok will continue to prescribe for appropriate patients
PPLPMDL0020000001	Lakewood	OH	44107	4/30/2015	No new information learned on this call.
PPLPMDL0020000001	Rocky River	OH	44116	4/30/2015	Reviewed dosing and managed care
PPLPMDL0020000001	Cleveland	OH	44130	4/30/2015	Showed him coverage for med mutual and Aetna and asked him to choose oxycontin or butrans for appropriate patients in around the clock pain for those plans. He said that is difficult to keep track of.
PPLPMDL0020000001	Akron	OH	44333	4/30/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	4/30/2015	He likes the option of butrans for his patients instead f pills. He typically uses it in his older patients. Hysingla he hasn't found right patient for. He is referring out but when they go to Doctor k, they need more than just a few Tramadol and that is what he gives them so he is finding he had to treat for pain patients. He has decided that he will write for no more, than 3 pills of IR? If they need more from that point is when he will initiate ER like Hysingla or oxycontin. Reviewed formulary and doses.
PPLPMDL0020000001	Cleveland	OH	44130	4/30/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44111	4/30/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44111	4/30/2015	Window discussion , highlighted hysingla dosing and attributes.
PPLPMDL0020000001	Cleveland	OH	44111	4/30/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44114	4/30/2015	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	4/30/2015	Talked about caresource w Butrans and starting doses. And talked about dosing of hysingla thru window.
PPLPMDL0020000001	Cleveland	OH	44130	4/30/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44115	4/30/2015	Reviewed portfolio, formulary opportunities, No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	4/30/2015	Doctor joked and asked if I was here because I want him to prescribe zohydro. I told him I am here because I want him to find the right HYSINGLA patient. Reviewed coverage and dosing options quickly For Hysingla and
PPLPMDL0020000001	Garfield Hts	OH	44125	4/30/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44115	4/30/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44115	4/30/2015	Reviewed portfolio, No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44115	4/30/2015	Reviewed portfolio, No new information learned on this call.
PPLPMDL0020000001	Rocky river	OH	44116	4/30/2015	Highlighted dosing, attributes and managed care for hysingla and Butrans.
PPLPMDL0020000001	Parma	OH	44129	4/30/2015	Wondered if they have talked to Doctor nickels yet on use of Hysingla. She said they need to and will let me know. She does think it is a product worth incorporating into their practice
PPLPMDL0020000001	CLEVELAND	OH	44109	4/30/2015	Reviewed portfolio, formulary status, savings cards, No new information learned on this call.
PPLPMDL0020000001	Beachwood	OH	44122	4/30/2015	Met at lunch-went over full Butrans and she said she has prescribed it in past with good results but had some issues with coverage-went over top plans in practice especially care source and she agreed to prescribe Butrans again since she said she really likes it for her elderly pts-informed her of no dosage adjustments and also with renal impaired pts-she said to make sure we keep her stocked with savings cards; OxyContin-follows Yokiell so is very comfortable in prescribing it
PPLPMDL0020000001	Cleveland Hts	OH	44118	4/30/2015	OxyContin- reminder when reaching 3 Percocet to transition to OxyContin q12 hours-dr said he would; Butrans-went over care source pts and dr said he will look for some pts
PPLPMDL0020000001	Cleveland	OH	44130	4/30/2015	Using portfolio piece quickly updated him on his ER options with 7 doses and adp. He is clear on where appropriate to use them cost is the only problem,
PPLPMDL0020000001	Cleveland	OH	44130	4/30/2015	Doctor said that he needs us to pay for him to go to Las Vegas for a pain conference and was hoping we could pay for it. If he is going to treat for pain he needs to learn more. I told him that I could help . He said he appreciates the information from me but should still get more. Told him that we can't pay for his Vegas trip but I can bring him lunch and we can talk in detail. Reviewed portfolio and ER options for his patients. Two with abuse deterrent properties and 7 doses and the other appropriate as patients first opioid.
PPLPMDL0020000001	Beachwood	OH	44122	4/30/2015	Lunch-OxyContin- dr said he likes going to OxyContin especially when pts are referred to him on other opioids-dr said he likes getting them on a 12 hour dosing schedule to control their opioid load; Butrans- Drs nurse and nurse practitioner asked for me to get dr onto prescribing more Butrans because they both like it-dr said most of his pts are on higher doses of opioids and that makes it difficult to prescribe-went over elderly pts not tolerating NSAIDs and ultram pts approaching 200mg-dr agreed great pts for a 7 day patch-also went over care source pts since one of his top plans and dr agreed to prescribe it there-left both savings cards
PPLPMDL0020000001	Parma	OH	44129	5/1/2015	I was at the window reviewing butrans savings card changes and Hysingla appropriate patient types, dosing options, ADP and which plans it is covered on since I know they won't do prior authorizations at the moment. Call was fairly quick
PPLPMDL0020000001	Westlake	OH	44145	5/1/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	5/1/2015	Jackie the nurse had a question regarding dosing and pharmacy stocking for hysingla, which was addressed. I spoke to the dr regarding upcoming patient s coming in on uncontrolled pain medial dr didn't really know dates, but Jackie the nurse pointed out a few that come every month. Dosing of hysingla and Butrans discussed. Asked for just one appropriate patient given the opportunity next week
PPLPMDL0020000001	Westlake	OH	44145	5/1/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	5/1/2015	Butrans managed care reviewed and hysingla I worked with nurses on who the right patient is for Hysingla to help identify it for the doctor.
PPLPMDL0020000001	Westlake	OH	44145	5/1/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	5/1/2015	No new information learned on this call.
PPLPMDL0020000001	akron	OH	44333	5/4/2015	Brought in 2 patient profiles for dr Bashor today. Told dr I have 2 viable ER opioid options for him for those patients on Tramadol or Norco. I told dr that the next time he has a patient like Helen on tramadol and its being taken on a daily, around the clock basis to convert to Butrans and reminded starting doses and coverage. I told dr that for hysingla, to focus on 2 mc plans which should be Aetna and Caremark. I told him for now it is a product for the working class and discussed e Jane profile. I told him to just use it clinically to allow the product to prove itself. Dr said he will use and it has already but chose a medicare patient and it was too expensive. I asked him to keep looking for the right patient.
PPLPMDL0020000001	Parma	OH	44129	5/4/2015	Reviewed quickly information in common with oxycontin and Hysingla and appropriate patient type. She said she tries not to treat her patients in pain but does write a little Hydrocodone. She is aware of Hysingla and will keep it in mind for the patient already taking 3 pills per day and needs more relief.
PPLPMDL0020000001	Akron	OH	44333	5/4/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44313	5/4/2015	No new information learned on this call.
PPLPMDL0020000001	Tallmadge	OH	44278	5/4/2015	Discussed all products with drs Bachtel and Reed about all products using the portfolio piece explaining oxycontin, hysingla and Butrans attributes, dosing, conversions and patient profiles Helen, Jen and Maggie. I asked dr to poke holes in any of the products and why he would NOT use them? Dr said he can't really do that clinically but it comes down to cost and figures hysingla is expensive. I told him it's not for the right patients. Discussed cost for all products and mc coverage. I told dr he will never know unless he writes it for the right patients. Dr agreed and said he will try.
PPLPMDL0020000001	Uniontown	OH	44685	5/4/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44134	5/4/2015	No new information learned on this call.
PPLPMDL0020000001	Lyndhurst	OH	44124	5/4/2015	Quick window call with staff. Nothing new learned.
PPLPMDL0020000001	Parma	OH	44129	5/4/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	5/4/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	5/4/2015	Reviewed appropriate patient types for butrans oxycontin and Hysingla. Discussed with doctor the guidelines for opioid prescribing And making sure that he is registered with oarrs etc. he was unaware of recent requirements, he will be moving in June and will be there thursdays. Mentioned to him to keep requesting Hysingla with workers comp if he finds appropriate patients for it.

PPLPMDL0020000001	Lyndhurst	OH	44124	5/4/2015	Quick front window call with staff. Nothing new learned.
PPLPMDL0020000001	Parma	OH	44134	5/4/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	5/4/2015	No new information learned on this call.
PPLPMDL0020000001	Fairlawn	OH	44333	5/4/2015	Spoke with Jessica and pointed out attributes to both Hysingla and Butrans. I asked if they have dispensed hysingla yet and she said no but did 2 Butrans today. Jessica said one was from a Vucetic and the other was Fouad.
PPLPMDL0020000001	Akron	OH	44333	5/4/2015	Dr appreciated brochures I left last visit and will keep me up to date if needs more; OxyContin-asked for Percocet pt approaching 3 tabs to transition to OxyContin-dr said he likes it there and will; butrans-reminder about care source pt with u controlled pain on tramadol
PPLPMDL0020000001	Tallmadge	OH	44278	5/4/2015	Short discussion with dr about the ER options available for those who have daily around the clock pain. Used the portfolio piece to review all product attributes, dosing, conversions and appropriate time and patient type to use. I asked her to just think of he products as options available when a patient on an IR opioid is in pain and wants more IR opioid and to use them then. Dr said she is coming around to my products are really likes Butrans and has some patients she will try it on.
PPLPMDL0020000001	Norton	OH	44203	5/4/2015	Talked about the uncontrolled patient that would be appropriate for OxyCotin and hysingla. Dr stated he couldn't remember what plan the patient had he gave hysingla but he did say that he wrote one and it was commercial insurance. I asked or another patient to get experience writing it. Scheduled a lunch for a deeper conversation.
PPLPMDL0020000001	Tallmadge	OH	44278	5/4/2015	I asked what types of pain does she see in the practice everyday or the medicines she sees most? Mackenzi said that the most common type of chronic pain is low back pain and she sees a lot of Norco and percocet. I asked her if she has prescribing privileges yet and she said not yet. Discussed e new portfolio piece to explain all three products. Led with Butrans reviewing attributes, dosing and conversions and when and where to use. Hysingla attributes, dosing and conversions, plasma concentrations from MVA and when and where to use. Oxycontin attributes, dosing and conversions. Discussed cost and copy cards for each product.
PPLPMDL0020000001	Fairlawn	OH	44333	5/4/2015	Lunch-Dr said he likes to prescribe it after 3 tabs of Percocet-doesn't feel comfortable going beyond 3 tabs-went over abuse deterrent study and dr said he feels comfortable prescribing OxyContin and likes abuse deterrent properties; Butrans-discussed elderly pt on tramadol/cox 2 not getting pain relief and/or not tolerating-asked dr does he feel confident prescribing it there and he said yes-went over coverage especially care source and dr agreed to prescribe it for one pt-had pt this afternoon coming in on almost everything and not being controlled on lidocaine patch-lower back pain and OA-said perfect pt and will follow up this week with pt
PPLPMDL0020000001	Tallmadge	OH	44278	5/4/2015	Discussed all products with drs Bachtel and Reed about all products using the portfolio piece explaining oxycontin, hysingla and Butrans attributes, dosing, conversions and patient profiles Helen, Jen and Maggie. Dr said that he would like to write Butrans but forgets about it and even that it's a Purdue Product. I told him we have discussed it over a dozen times and that he needs to keep the initiation and titration guide wither on his workstation on in his labcoat to help keep it on his radar. I asked him if he believes hysingla is a product he will write and why he hasn't already? Dr said it just takes him time and he believes it's a good product. I asked him to just gain some clinical experience with it in the right patient and allow it to prove itself. Dr said ok.
PPLPMDL0020000001	Tallmadge	OH	44278	5/4/2015	Few short words with Seth as he was very busy. Reminded about hysingla 7 doses, q24 and no APAP. Seth said he's filled 2 prescriptions. Reviewed copy card and trial offer
PPLPMDL0020000001	Barberton	OH	44203	5/4/2015	Highlighted the hysingla prod it w attributes and reviewed abuse deter properties of OxyCotin and hysingla.
PPLPMDL0020000001	Parma	OH	44129	5/4/2015	Asked for his support with ER meds when he finds a patient taking 3 or so IR meds, needs more relief. At that time instate ding of another IR med, consider q12 oxycontin or q24 Hysingla with ADP and 7 doses to choose from. He said he will try
PPLPMDL0020000001	Parma	OH	44129	5/4/2015	Quickly handed info thru the window while telling her that oxycontin and Hysingla are both single entity meds without tylenol for patient in around the clock pain with abuse deterrent properties and 7 doses to choose from. Does she have patients taking 3-4 IR per day needing more relief. She said maybe a few. I asked her since they are already on one of these molecules, would she recommend q12 oxycontin or q24 Hysingla one of these for those patients instead of IR? She said that she will
PPLPMDL0020000001	Barberton	OH	44203	5/5/2015	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	5/5/2015	Reviewed objective for today w the dr was to identify appropriate patient for hysingla and Butrans. And to uncover why he would be hesitant to writing these products given the opportunity w someone appropriate and uncontrolled. Reviewed Jane. Draid right away he could not relate to the profile. I asked him what pain patients does he relate to for these products. Dr said those willing to take weekly or daily medications who are on caressource or who can afford it. Dr did agree he has so e patients that may be appropriate for the products but he thought it was very few. I asked for one patient to start.
PPLPMDL0020000001	Akron	OH	44310	5/5/2015	Quick hello at window and gave dr a invite to the hysingla program. Dr said he will consider it and things are good with hysingla. I asked him to continue identifying patients and to keep Butrans on his radar.
PPLPMDL0020000001	Highland Heights	OH	44143	5/5/2015	No new information learned on this call.
PPLPMDL0020000001	Norton	OH	44203	5/5/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44312	5/5/2015	No new information learned on this call.
PPLPMDL0020000001	Bedford	OH	44146	5/5/2015	No new information learned on this call.
PPLPMDL0020000001	C. Falls	OH	44223	5/5/2015	Spoke with Cindy and the other staff about hysingla dispensing and copy cards. Cure one the tech said she needed them as she only has one left. Reviewed hysingla ER attributes, and copy card description. Asked if they are aware of the new Butrans copy cards and the need for patients to get the trial offer from www.Butrans.com. She said they have the, and will print them for the patients.
PPLPMDL0020000001	Highland Heights	OH	44143	5/5/2015	No new information learned on this call.
PPLPMDL0020000001	Barberton	OH	44203	5/5/2015	Quick managed care and dosing review for hysingla.
PPLPMDL0020000001	Waterford	OH	45786	5/5/2015	I-OxyContin start principles and managed care. Butrans clinical trials and dosing. Titration, dosing, A.D. properties, managed care, co-pay cards and boxed warning for Hysingla. W-ha a patient in mind for Butrans
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/5/2015	Discussed oxycontin dosing and his need to titrate through the 7 doses. I made the comparison between oxycontin and hysingla with 7 doses, abuse deterrent and both single entity. Dr said he doesn't have the norco patients for it. I told him if he has some that don't respond to oxycontin? Dr said not really. I told him that would be an opportunity for hysingla ER.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/5/2015	Discussed upcoming hysingla program and provided him invites to hand out at his discretion. Dr said he will give one to all providers and their nurses if they feel it's necessary for them to attend. Dr said hysingla is working very well in his patients and is pleased with the results but said he just needs improved coverage. Quickly told him to keep his eye on he Butrans ball and keep that product moving. Dr said it's a lot easier to get approved especially for CareSource and BWC.
PPLPMDL0020000001	Barberton	OH	44203	5/5/2015	We talked about the abuse det properties of hysingla and OxyCotin. And talked about the conversion from hydrocodone to hysingla, also talked about Butrans and oxycoctn dosing
PPLPMDL0020000001	Akron	OH	44304	5/5/2015	Short discussion about hysingla and Butrans with Sam the pharmacy tech. Reviewed all attributes for both products and asked if I could speak to the pharmacist and he said they are swamped and it's really not a good time.
PPLPMDL0020000001	Waterford	OH	45786	5/5/2015	I- Butrans clinical trials and managed care. OxyContin start principles. Hysingla dosing and managed care. W- having trouble getting Hysingla through managed care
PPLPMDL0020000001	Uniontown	OH	44312	5/5/2015	Dr said he was about to call me because he needs more hysingla copy cards. I asked him why and he said he's written about 10 prescriptions so far but only has gotten one through. Dr said say that some of the patients had medicare and it was just too expensive and others needed pa's of multiple IR and ER opioids prior to getting hysingla. Discussed plans with dr and asked him to write for specific plans and to keep using. Dr said he's using mostly for Norco patients and even those on very low dose as well. Dr said Akron General has instituted a new Opioid contract where all patients sign a contract and he must due an opioid risk assessment which he's in favor of. Dr said he's putting all patients on IR opioids on ER opioids as long as they are taking them around the clock. Reminded of Butrans patients types and doses and then invited to the program on 5/19.
PPLPMDL0020000001	Barberton	OH	44203	5/5/2015	Talked about the patient dr 2 had coming into fill a script of hysingla and asked that she stock the 30mg today. She said no. Reviewed attributes of prodIS, gave limitation of use like not in acute patients. Reviewed indication and dosing for all products.
PPLPMDL0020000001	Waterford	OH	45786	5/5/2015	I- Butrans clinical trials and managed care. OxyContin start principles. Hysingla dosing and managed care W- is having consistent problems with managed care
PPLPMDL0020000001	Norton	OH	44203	5/5/2015	Talked w all the office staff regarding cover my med. they use it and like the system. We talked talked about the commercial patients for hysingla and reviewed caressource regarding Butrans. Reviewed the patient he choose for hysingla. It was a male who had failed several pain medications in the past they could not remember the plan he had. Dr signed up for hysingla.com so he can get coupons incase they are not available. We reviewed attributes of our products. used the patient profile to help identify patients he has in the office. Dr said caressource is growing in his office and many are on pain meds. Reviewed indication, abuse deter properties and gave fair balance of abuse potential for all opioids. I asked the dr to try 5 patients this week for hysingla. Dr said maybe one. He will be gone for a week next week on vacation.
PPLPMDL0020000001	Westlake	OH	44145	5/6/2015	No new information learned on this call. Schedule a lunch for later in the month. Tried to see the dr but the dr was still on first patient and they were way behind. I left approved materials.
PPLPMDL0020000001	Westlake	OH	44145	5/6/2015	No new information learned on this call. Talked about managed care regarding hysingla.
PPLPMDL0020000001	Akron	OH	44320	5/6/2015	Told dr that I'm continuing to wait for him to begin writing Butrans and asked him if he has been writing? Dr said not yet but said he will. I told him about the appropriate patients taking tramadol or Norco around the clock and I will follow up next week and I will be interested in hearing about his new starts.
PPLPMDL0020000001	Stow	OH	44224	5/6/2015	I showed Joe the portfolio piece and told him about each product discussing attributes, dosing and conversions. I asked him why he would go outside any of our ER opioid products for a patient that needed to be placed on an IR opioid? Joe talked about how difficult it's becoming for physicians to write opioids and the AGMC Protocol. I told Joe now that he's in a specially market he can justify the use of opioids for appropriate patients and then discussed who's appropriate when they are in daily, around the clock pain. Joe agreed so I told him to write oxycontin, Butrans and hysingla.
PPLPMDL0020000001	Cleveland	OH	44195	5/6/2015	Quick Review Formulary grids for Butrans/Hysingla ER, opportunities for appropriate patients, Savings cards. Said ok will continue to prescribe/Consider for appropriate patients that she can get covered.
PPLPMDL0020000001	Parma	OH	44129	5/6/2015	Laura said that she hasn't talked with Doctor nickels yet and neither has Laura. Incorporating new products in their practice takes time. She does think they have appropriate patients for Hysingla.
PPLPMDL0020000001	Cleveland	OH	44113	5/6/2015	Reviewed Butrans/Hysingla ER Formulary grids along with savings cards, said ok will continue to prescribe for appropriate patients that have access to the products.
PPLPMDL0020000001	Cleveland	OH	44113	5/6/2015	Reviewed Formulary grids for Butrans/Hysingla ER, opportunities for appropriate patients, Savings cards. Said ok will continue to prescribe/Consider for appropriate patients that she get covered.
PPLPMDL0020000001	Cleveland	OH	44113	5/6/2015	Reviewed OxyContin every 12hours, Formulary grids for Butrans/Hysingla ER, opportunities for appropriate patients, Savings cards. Said ok will continue to prescribe/Consider for appropriate patients that he can get covered.
PPLPMDL0020000001	Stow	OH	44224	5/6/2015	No new information learned on this call.
PPLPMDL0020000001	Rocky River	OH	44116	5/6/2015	Lakota the nurse said she has tried cover my meds and it's just ok. She told me that the dr tried to write hysingla but it was not covered by insurance so he changed the medication. She couldn't remember any details further. She did also tell me that the dr was writing Butrans and that needed a pa and it got approved and she said she used cover my meds and the pharmacist filled out most of the pa for her.
PPLPMDL0020000001	Cleveland	OH	44113	5/6/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	5/6/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44105	5/6/2015	Reviewed portfolio no new information learned on this call.
PPLPMDL0020000001	Rocky River	OH	44116	5/6/2015	This cvs does not use relay health or cover my meds. I provided attributes of products.
PPLPMDL0020000001	Akron	OH	44320	5/6/2015	Showed dr the Helen profile and the conversion chart for Butrans and asked her to write one today for a patient like Helen who is in pain around the clock and taking an IR opioid like tramadol or Norco. I told dr I'm coming in next Wednesday and I'm going to ask her about her new Butrans start. Dr asked about coverage with medicare and Medicaid which I reviewed as well as commercial insurance.
PPLPMDL0020000001	Strongsville	OH	44136	5/6/2015	No new information learned on this call.



	Cuyahoga Falls	OH	44224	5/6/2015	Reviewed now portfolio piece with dr and explained her options when it comes to treating with opioids. I'm told her that Butrans, hysingla and oxycontin are viable options that will cover almost all the IR opioids when they are being taken around the clock. Dr agreed and said she would like to use hysingla but doesn't know where. Reviewed Jane profile, attributes, dosing and conversions and asked her to chose Norco patients who have commercial insurance and taking Norco around the clock. Reviewed Butrans attributes as well and asked for more business instead of continuing to refill the IR opioids for an extended period of time.
PPLPMDL0020000001					
PPLPMDL0020000001	Akron	OH	44303	5/6/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	5/6/2015	No new information learned on this call.
	Akron	OH	44333	5/6/2015	Elise said that she has got one patient through on hysingla and can't remember the plan. Elise said that she has two others pending for approval and to ask Brittany for the status. Office manager Shelly told me that Caci will be doing PAs and precertification. I asked elise for more prescribing for her around the clock Norco patients and Butrans as well for patients she feels would do well on a schedule 3,7 day patch.
PPLPMDL0020000001					
PPLPMDL0020000001	Akron	OH	44312	5/6/2015	No new information learned on this call.
PPLPMDL0020000001	Bedford	OH	44146	5/6/2015	No new information learned on this call.
	Westlake	OH	44145	5/6/2015	Daniele the nurse said the dr was in vacation a few weeks ago,which explains the drop in scripts. I highlighted the Butrans which she stated the dr uses and then she said dr doesn't use hysingla. I pointed out what it was and its new-er to the market. She stated the dr won't write new products. I asked if she would still giver the information so she could read about it.
PPLPMDL0020000001					
	Westlake	OH	44145	5/6/2015	Discussed reviewing cover my meds w staff and coordinated date. Reviewed w nurse a question they had regarding a rejection on Butrans w a med d patient. After reviewing it turned out to be a plan we did not have coverage on. Reviewed w dr the appropriate hydrocodone patient whom is uncontrolled and potential for hysingla. Dr asked me to work w nurses to identify the right patient. Dr said he up was having success w Butrans and he felt it was working and will continue to use it. I highlighted the uncontrolled Tramadol patient and caresource. Dr agreed to write more product given the right insurance.n
PPLPMDL0020000001					
PPLPMDL0020000001	Cleveland	OH	44102	5/6/2015	Reviewed portfolio, No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	5/6/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	5/6/2015	No new information learned on this call.
PPLPMDL0020000001					
PPLPMDL0020000001	Cleveland	OH	44102	5/6/2015	Reviewed portfolio with ED, Discussed formulary opportunities, No new information learned on this call.
	Akron	OH	44333	5/6/2015	I asked dr what he would do for a patient that presents on 30mg a day of hydrocodone? Dr said he would go to Butrans. I asked him why not hysingla and he said he feels more comfortable giving patients a patch rather than a pill. Dr said that the psychological component of a pill vs a patch is very distinct and the patch doesn't have much of that psychological component. Dr said he will use hysingla when the patient doesn't want a patch or feels the patient might do better with a pill. Dr said he has had no issues getting hysingla approved. I asked dr to keep writing all products.
PPLPMDL0020000001					
	Strongsville	OH	44136	5/6/2015	Quickly handed over formulary grid saying that if he chooses to prescribe hysingla for a patient who is taking 3-4 Norco and looking for a change. Also gave h formulary information for butrans.. Commercial patients will get first month free . Doc said he needs to hear about it but not today
PPLPMDL0020000001					
PPLPMDL0020000001	Westlake	OH	44145	5/6/2015	No new information learned on this call.
	Akron	OH	44320	5/6/2015	I asked Monique and Val again about the patient she placed on Butrans and if there was a pa necessary. Val said she hasn't seen anything for that patient and dr said she needs to follow up with the patient to ensure she's received it. I told her that's a good idea and to let me know. I told her she has a lot of opportunity for Butrans based on her level of patients on IR opioids around the clock and asked her if I'm correct in saying that? Monique said that I am right and she does need to take advantage of it. I told her there is a formulary grid and conversion guide in each exam room and to use them. Monique said ok and she will look into it more. Left her the hysingla initiation and titration guide and to use it.
PPLPMDL0020000001					
	Stow	OH	44224	5/6/2015	Dr told me that she has written 2 prescriptions for hysingla recently. One for a patient taking Norco around the clock and has medicare and Medicaid with buckeye and wanted to know if it will be approved. I asked dr and her nurse Ney what prior medicines the patient has been on. The patient has failed NSAIDS, tramadol, Norco and has been on oxycontin. I told Ney to Process the PA. The other patient was on MMO. I explained the criteria and told dr to consider oxycontin or Butrans and discussed conversions from Norco. Dr said she's had a great success with Butrans on a 38 yr old man with district fibrosis and in severe pain and had not been on any medicines. Dr said she started with tramadol with little pain relief. Dr said that she realized he was in severe pain around the clock and started Butrans 10mcg with 1-2 Norco a day for breakthrough and doesn't need to use his Cain to walk anymore and has very little pain and dr said it changed his life. I asked dr for continued prescribing.
PPLPMDL0020000001					
	Tallmadge	OH	44278	5/6/2015	Dr called me and said he has a patient who took an oxycontin copy card to the pharmacy and the card was denied because it was expired. Dr said he wants me to get him new cards. I arrived to office and told dr that the cards with 3-31-15 expiration date should still be valid and the pharmacy should have ran it. I explained the new cards and told him to give that patient a new one just to be safe. I also told him about the new Butrans copy cards and to write it.
PPLPMDL0020000001					
PPLPMDL0020000001	Stow	OH	44224	5/6/2015	Spoke with the tech today as carla said she was just too busy. Reviewed all product attributes and dosing with conversions.
	Akron	OH	44312	5/6/2015	Coffees-butrans-dr teased me about ' riding the butrans train' and I asked him if he is all aboard?! Dr said yes and I reminded him of smooth trip from tramadol pts not getting adequate pain relief to butrans focusing on the conversion side rule-dr said he likes butrans because he really doesn't like prescribing opioids in high amounts; OxyContin-reminded dr of good coverage and reducing opioid load in Percocet pts from 3-4 tabs to q12hr dosing and dr said he really likes OxyContin because of that plus he likes the molecule
PPLPMDL0020000001					
	Akron	OH	44312	5/6/2015	Coffees-OxyContin-went over conversion page in cva and asked him does this make sense to him? Dr said yes and likes the fact he can cut down the total opioid load for his pts as he gets nervous with higher amounts of Percocet-asked him for his continued support in transition to OxyContin and he said yes; butrans-dr said cliff in recently to help get pt on butrans with coverage problems-kuddos cliff!
PPLPMDL0020000001					
	Stow	OH	44224	5/7/2015	Showed dr the portfolio piece and told him for most of the IR opioid patients who are on them on a daily,around the clock basis oxycontin,hysingla and Butrans can fit the ER choices. I told him that SummaCare and Carmark are plans that he can write hysingla for when the Norco is being taken around the clock. Explained Butrans and oxycontin dosing with appropriate patient selection and asked him to just TRY Butrans so it can prove itself to him. Dr said ok.
PPLPMDL0020000001					
PPLPMDL0020000001	Cleveland	OH	44144	5/7/2015	Reviewed portfolio for those patients that are failing on present therapy requiring around the clock analgesia, Initiation/Titration, Med DFormulary grids, said ok will continue to consider for appropriate patients that have
PPLPMDL0020000001	Brooklyn	OH	44144	5/7/2015	Reviewed OxyContin formulary grid, Hysingla ER/Butrans for those patients failing on present therapy requiring around the clock analgesia, Said Ok will continue to consider/prescribe for appropriate patients.
	Stow	OH	44224	5/7/2015	I showed dr the portfolio piece and told her she has three distinct ER options for almost all the IR opioids she sees. Explained the patient types for each product and told her that Oxycontin is a 1:1 conversion from IR oxycodone or percocet and to convert appropriate patients. I told her with hysingla, she should focus on two SummaCare and Carmark which are covered private plans. Dr said that's good to know. I reminded her that Butrans is ideally suited for her Caresource and Medicare patients who are on tramadol and Norco. Dr said thanks.
PPLPMDL0020000001					
	Cuyahoga Falls	OH	44223	5/7/2015	Caught dr in hallway of hospital and asked him if he's continuing to have success with Butrans and oxycontin. Dr said his patients are doing fine and likes both products. I asked him if he's looked over the literature on Hysingla I've left him? Dr said he has but has not used it yet. I asked if he's ok using and he said yes.
PPLPMDL0020000001					
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/7/2015	No new information learned on this call.
PPLPMDL0020000001	Mayfield Village	OH	44143	5/7/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44103	5/7/2015	Reviewed portfolio, formulary opportunities, No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	5/7/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	5/7/2015	Spoke with amy about hysingla and reviewed attributes,doing and conversions. I asked her if she's seen any yet and she said no. I reminded her of the copy card and trial offer.
PPLPMDL0020000001	Cleveland	OH	44109	5/7/2015	Reviewed portfolio, formulary opportunities, No new information learned on this call.
PPLPMDL0020000001	Mayfield Village	OH	44040	5/7/2015	No new information learned on this call.
PPLPMDL0020000001	Woodmere	OH	44122	5/7/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44102	5/7/2015	Reviewed portfolio, formulary opportunities, No new information learned on this call.
PPLPMDL0020000001	Brooklyn	OH	44144	5/7/2015	No new information learned on this call.
	Stow	OH	44224	5/7/2015	Spoke with holly and reviewed the hysingla and Butrans dosing and conversions. I told her hysingla business is picking up and she met want to stock just one dose. Holly said they never have seen much Butrans business so she's going to wait until she see a Rx.
PPLPMDL0020000001					
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	5/7/2015	Discussed hysingla and its attributes as well as dosing. Reviewed Butrans otivnet type Helen and copy cards and trial offers for both.
PPLPMDL0020000001	Lakewood	OH	44107	5/7/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44130	5/7/2015	No new information learned on this call.
	Mayfield Village	OH	44143	5/7/2015	Dr krishnan already left for day. Met with med asst briefly at front window. Discussed Hysingla ER for Norco patients/commercial insurance; Butrans for Medicare D patients; Oxycontin for oxycodone plain patients who need change in therapy.
PPLPMDL0020000001					
	Parma	OH	44129	5/7/2015	She prefers the Oxycodone/oxycontin molecule but every once in a while a patient responds to Hydrocodone, reviewed Hysingla and similarities between the two meds regarding doses, adp, single entity.....Mmshe thinks it is good to know her options but doesn't anticipate a huge uptake. Asked her if she can think of one patient that would be appropriate for Hysingla. She said she can think of one or two off the top of her head.
PPLPMDL0020000001					
PPLPMDL0020000001	Cleveland	OH	44195	5/7/2015	Quick Review of Hysingla ER/Butrans, Confirmed for the 27th.No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44130	5/7/2015	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	5/7/2015	Dr said he prescribed 2 butrans Rxs in past 2 days for caresource tramadol pts not controlled for pain!!!
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	5/7/2015	No new information learned on this call.
PPLPMDL0020000001	Shaker Heights	OH	44122	5/7/2015	No new information learned on this call.
PPLPMDL0020000001	Beachwood	OH	44122	5/7/2015	No new information learned on this call.
PPLPMDL0020000001	Highland Heights	OH	44143	5/7/2015	Met with med asst at front window. Reviewed access where no prior authorization is needed for each product.
	Mayfield Village	OH	44143	5/7/2015	Asked for just one Norco patient who he's thinking about titrating; and asked him to pause and consider conversion to Hysingla ER. Went over dosing and titration again. Asked him to consider Oxycontin, then Butrans, outside of nursing home setting for patients who meet extended release indication.
PPLPMDL0020000001					
	Cuyahoga Falls	OH	44223	5/7/2015	Dr cam up as I was talking to Tera on the procedure side about managed care coverage and our products. Dr Dmitri said that he is really loving Butrans especially in the hospital and LTC because he takes them off of IV Buorenorohine and moves them to Butrans and its a great way to convert them. Dr said he's titrating all the time and wants higher doses. Dr also said that he's having some issues getting pharmacies to stock Butrans. I asked him where and he said one in Kent and Streetsboro. I discussed the kent CVS situation with that pharmacist and told him not to send patients there for any narcotics. Asked dr for continued business. Dr said he will not write hysingla but will for Butrans and Oxycontin.
PPLPMDL0020000001					
PPLPMDL0020000001	Cleveland	OH	44195	5/7/2015	Quick intro, review of OxyContin every 12hours along with Hysingla ER/Butrans for those patients failing on present therapy requiring around the clock analgesia, Said ok will consider

PPLPMDL0020000001	Glendale	OH	45246	5/7/2015	Discussed all products and patient selection. Med d formulary for OxyContin and Butrans. John said he received call from Purdue regarding Hysingla and dosing yesterday. He is concerned with cost since most of his patients are part d.
PPLPMDL0020000001	Beachwood	OH	44122	5/7/2015	Quickly reviewed formulary coverage and appropriate patient type for Hysingla and asked for one patient this week with commercial coverage? He smiled and said he might find two. I told him three would be even better...while not forgetting about butrans....
PPLPMDL0020000001	Akron	OH	44312	5/8/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44312	5/8/2015	Followed up with dr about the patient who said she can't afford to pay for Butrans anymore. I told dr that most likely the patient has coinsurance for her insurance thugh Caremark and contributed to the high cost of Butrans. Dr said its actually a patient of Monteiths and he was covering for him. Dr said thanks for the information and he will pass it along. I reminded him of hysingla attributes and to write it for those private pay patients on Norco around the clock.
PPLPMDL0020000001	Westlake	OH	44145	5/8/2015	Talked about nursing homes and she said she has not done them but is working more in the hospital. I acknowledge she started a few more patients on Butrans and asked how it was going. She said her concern is always price and potential rash. Inasked what she liked about Butrans and she said its easy for them to remember. Highlighted managed care caresource and mm plans.
PPLPMDL0020000001	Cleveland	OH	44113	5/8/2015	Quick review of OxyContin formulary grid along with Hysingla Er/Butrans for those patients requiring around the clock analgesia said ok will consider for appropriate patients, discuss further next appt
PPLPMDL0020000001	Cleveland	OH	44113	5/8/2015	Quick review of OxyContin formulary grid along with Hysingla Er/Butrans for those patients requiring around the clock analgesia said ok will consider for appropriate patients, Formulary opportunities, and will discuss with
PPLPMDL0020000001	Garfield Hts	OH	44125	5/8/2015	Quick review of Hysingla Er/Butrans for those patients requiring around the clock analgesia said ok will consider for appropriate patients that have coverage,
PPLPMDL0020000001	Cleveland	OH	44113	5/8/2015	Reviewed OxyContin every 12hours, formulary opportunities along with Hysingla ER /Butrans for those patients failing on present therapy requiring around the clock analgesia, said ok will consider for appropriate patients
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/8/2015	Discussed hysingla and Butrans dosing with the ER indication and discussed the otwint types appropriate for each.
PPLPMDL0020000001	Cleveland	OH	44124	5/8/2015	Quick call with med asst at front desk. Left literature for Dr C who was NOT there at this time. Discussed portfolio for patients who meet extended release opioid indication.
PPLPMDL0020000001	Garfield Hts	OH	44125	5/8/2015	Visited pain management dept, portfolio info
PPLPMDL0020000001	Beachwood	OH	44122	5/8/2015	Discussed similarities of Hysingla and OxyContin being single entty opiod with Adp and 7 doses. Does she see patient on 3-4 Norco that are still needing relief? She said yes she has some and she is talking with Doctor. TABaa about Hysingla. Reviewed formulary. She is out of town for the next month. I should call mid June and we will set in an in service for the pain group
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/8/2015	No new information learned on this call.
PPLPMDL0020000001	N Royalton	OH	44133	5/8/2015	No new information learned on this call.
PPLPMDL0020000001	Mayfield Heights	OH	44124	5/8/2015	Quick call at window with prior auth coordinator. Discussed portfolio, for their patients who need change in therapy. communicated that patients new to Butrans need to visit Butrans.com to access trial offer.
PPLPMDL0020000001	Valley View	OH	44125	5/8/2015	Reviewed portfolio with Aaron, utilization No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	5/8/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44125	5/8/2015	Reviewed portfolio along with Formulary opportunities for Hysingla No new information learned on this call.
PPLPMDL0020000001	Lyndhurst	OH	44124	5/8/2015	No new information learned on this call.
PPLPMDL0020000001	Lyndhurst	OH	44124	5/8/2015	No new information learned on this call.
PPLPMDL0020000001	Lyndhurst	OH	44124	5/8/2015	No new information learned on this call.
PPLPMDL0020000001	Berea	OH	44017	5/8/2015	Talked about percocet patient and Oxycontin- highlighted workers comp insurance. I asked if he saw himself offering hysingla to uncontrolled hydrocodone patients. He said he did. I asked for one patient this week to try and get experience.
PPLPMDL0020000001	Lyndhurst	OH	44124	5/8/2015	No new information learned on this call.
PPLPMDL0020000001	Garfield Heights	OH	44125	5/8/2015	Reviewed portfolio along with Formulary opportunities for Hysingla No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	5/8/2015	Lunch-Butrans-went over nursing home pts and tramadol pts on caresource-dr agreed good place to prescribe it and need to talk with Ed Carter at St Augustine's; OxyContin-likes to prescribe when Percocet pts get to 4 tabs-went over coverage
PPLPMDL0020000001	Westlake	OH	44145	5/8/2015	Highlighted patients appropriate for Butrans and hysingla. Worked w nurse to sign her i ok. Cover my meds. Reviewed the pa for caresource for Butrans and we identified one potential hysingla patient coming in on Monday w summa care.b
PPLPMDL0020000001	Lyndhurst	OH	44124	5/8/2015	No new information learned on this call.
PPLPMDL0020000001	Lyndhurst	OH	44124	5/8/2015	No new information learned on this call.
PPLPMDL0020000001	Independence	OH	44131	5/8/2015	Asked doc what I am here to remind him of? He thought for a second and said butrans. I said he could prescribe butrans and then refer to pain management.
PPLPMDL0020000001	Sagamore Hills	OH	44067	5/8/2015	No new information learned on this call.
PPLPMDL0020000001	Lyndhurst	OH	44124	5/8/2015	Met with med asst at front window. Discussed product portfolio: conversion from short acting opioids when patients need a change in therapy. communicated patients new to Butrans must go to Butrans.com website to access free trial offer.
PPLPMDL0020000001	Cleveland	OH	44113	5/8/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	5/8/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	5/8/2015	Dawn said she is prescribing more butrans in caresource pts-busy but thanked her for great pts to put on butrans
PPLPMDL0020000001	Parma	OH	44129	5/8/2015	Quick check in to make sure he doesn't need my help or have questions about hysingla Las time he discussed converting some of the patients he is getting on high doses of Norco. He said he is still thinking about it. he is actively prescribing butrans though.
PPLPMDL0020000001	Berea	OH	44017	5/8/2015	Reviewed attributes of product. I asked what their thoughts were on hysingla. They didn't have much to say but asked about cost. Reviewed the coupons. Also talked about abuse deter properties of hysingla and OxyCotin.
PPLPMDL0020000001	Cleveland	OH	44113	5/8/2015	Gave fair balance of abuse potential for all opioids including purdues.
PPLPMDL0020000001	Cleveland	OH	44114	5/11/2015	Debbie said very busy but still likes butrans and is getting great results
PPLPMDL0020000001	Cleveland	OH	44114	5/11/2015	Reviewed portfolio, formulary oportunities, Said 95% is medicaid
PPLPMDL0020000001	Lakewood	OH	44107	5/11/2015	Reviewed portfolio.No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	5/11/2015	Started with a recap of previous discussion regarding OxyCotin and the 12 hour delivery system and dosing. Highlighted a Hysingla attributes that he told me he liked about OxyContin last time, like no Tylenol and twice a day.
PPLPMDL0020000001	Lakewood	OH	44107	5/11/2015	Talked about hysingla dosing and asked if he felt he would offer this to his uncontrolled norco patients. He didn't say yes, he asked about managed care...med d. I told him where we had coverAge. I asked if he had one patient commercially insured to try it on. He said maybe and directed me to Beth the head office manager that knows the patients.
PPLPMDL0020000001	Lakewood	OH	44107	5/11/2015	As a follow up from our previous discussion, I asked him his thoughts on using Butrans after a Tramadol failure. Dr said he is trying to write less of those kinds of medications. I asked at what pt do u refer out? Dr didn't have an answer. I told him we could discuss next visit dosing
PPLPMDL0020000001	Westlake	OH	44145	5/11/2015	Talked about his thoughts on offering hysingla to a appropriate patient. Dr said he sees very little pain patients but he would try it. Reviewed attributes of products.
PPLPMDL0020000001	Lakewood	OH	44107	5/11/2015	Thru the window we talked about his new hour and the new office. I reminded him of the previous conversation which he told me he was having success w Butrans getting it thru managed care. I asked about his noco trolled Tramadol pattients. Dr said he has to remind to thNk about Butrans. I said what tends to come to mind over Butrans. He listed a few generics. I highlighted schedule three attribute and dosing and asked him to try it again in the appropriate patients this week.
PPLPMDL0020000001	Cleveland	OH	44114	5/11/2015	Reviewed portfolio, Initiation/Titration, formulary opportunities, said ok will continue to consider for appropriate patients that have formulary coverage.
PPLPMDL0020000001	Cleveland	OH	44113	5/11/2015	Reviewed portfolio of products, for those patients failing on present therapy requiring around the clock analgesia, formulary opportunities, savings cards. Said ok will continue to consider for appropriate patients that have coverage. Is referring out when applicable has alot of Worker Comp.
PPLPMDL0020000001	Cleveland	OH	44113	5/11/2015	Quick review of Hysingla ER/Butrans for those patients failing on present therapy that require around the clock analgesia, Formulary grid,OxyContin every 12hours, abuse deterrent characteristics, Said ok will continue to consider for appropriate patients, book appt with Essa.
PPLPMDL0020000001	Akron	OH	44333	5/11/2015	No new information learned on this call.
PPLPMDL0020000001	akron	OH	44333	5/11/2015	Good discussion with dr over much about the ER opioid options he has available to him when he has a patient who is taking IR opioids around the clock and is in pain. Discussed where and when to use each products and reviewed appropriate profiles. I asked dr to use hysingla again in his private insured patients such as Caremark, express scripts and Aetna. Presented program invite and dr said he wanted to attend.
PPLPMDL0020000001	Rocky River	OH	44116	5/11/2015	Continued conversation from last visit which was his commitment to write hysingla and the dr said he tried but it didn't go thru. I asked if he was willing to try it again. He said maybe" and I highlighted attributes and managed care. Dr said he wrote Butrans.
PPLPMDL0020000001	Cleveland	OH	44113	5/11/2015	Reviewed portfolio ,No new information learned on this call.
PPLPMDL0020000001	Fairlawn	OH	44333	5/11/2015	No new information learned on this call.
PPLPMDL0020000001	Fairlawn	OH	44333	5/11/2015	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	5/11/2015	Follow up from last visit regarding Butrans and caresource patients. Dr said he wrote and I confirmed the one so far went thru w the staff. The other one is awaiting pa approval. I explained to the prior auth person how caresource works and the process.
PPLPMDL0020000001	Fairlawn	OH	44333	5/11/2015	I showed Dr the Butrans Helen profile and I asked him if he would identify just one patient with a similar profile and write Butrans? Dr said ok. I asked if he has any reservations in using it clinically? Dr said no. I invited him to the hysingla program on 5-19.
PPLPMDL0020000001	Fairlawn	OH	44333	5/11/2015	Spoke with Jessica and Sue about hysingla and Butrans attributes and managed care coverage. Jessica said they had a script recently for hysingla from Elise Leone. The patient needed 30mg and needed to order it but got it in the next day. Invited Jessica and Gilbert to the program on May 19
PPLPMDL0020000001	Cleveland	OH	44113	5/11/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	5/11/2015	Spoke with pharmacist Brian about hysingla. Brian said he has seen mailers on it. I reviewed all attributes, dosing and conversions. Discussed private insured patients and copay cards with trial offer. I asked Brian if he had questions and he didn't with no comment.

	Stow	OH	44224	5/11/2015	Followed up with dr and her nurse Nay about the 2 patients she started on hysingla. Got PA forms that have already been filled out for ESI and for a dual eligible UHC community plan and medicare patient. Dr said she just signed the PA forms today and will be sent tomorrow and asked me the patients chances. I told dr that I'm not sure but feel good about the ESI patients and the prior meds that have failed. I asked for continued identification for hysingla patients with private insurance.
PPLPMDL0020000001	Lakewood	OH	44107	5/11/2015	Talked about how often they fill hydrocodone to be taken atc. She said a lot. I focused on what hysingla is and the indication. Talked about fair balance of not for use in acute patients. Discussed abuse potential for all
PPLPMDL0020000001	Olmsted Falls	OH	44138	5/11/2015	Asked the pharmacist what his thoughts regarding abuse deter properties and once a day dosing w hysingla. Discussed fair balance of abuse potential for all opioids including our Purdue products. Talked about dosing and if patients complain about taking extended release opioids, he said no usually it's the price they complain about. I asked if they tell the patient the after you ran insurance thru to tell them the price or do you list the cash price. Answer was it depends. Reviewed attributes of our products and highlighted the coupons for hysingla.
PPLPMDL0020000001	Berea	OH	44017	5/11/2015	Talked about what options norco patients have when they need an atc opioid. Pharmacist listed out a few products, even OxyCotin. I reviewed indication and talked hysingla. Covered attributes and gave fair balance of abuse potential for all opioids.
PPLPMDL0020000001	Cleveland	OH	44113	5/11/2015	Quick review of Hysingla ER and oxyContin for those patients failing on present therapy requiring around the clock analgesia, said ok will consider if appropriate but is sending most patients to pain mgmt.
PPLPMDL0020000001	Cleveland	OH	44195	5/12/2015	Reviewed portfolio, formulary opportunities, savings cards, said ok will continue to prescribe/consider for appropriate patients that have coverage.
PPLPMDL0020000001	Mayfield Heights	OH	44124	5/12/2015	Left, discussed PURDUE TRIFOLD brochure of products and requested Warren recommend to hcp's for appropriate patients. Left green dual responsibility brochure for prescribers of opioids and pharmacies when dispensing
PPLPMDL0020000001	Garfield Hts	OH	44125	5/12/2015	Discussed Portfolio of products, Initiation/Titration, formulary coverage and savings cards, said ok will look to prescribe for appropriate patients that have coverage.
PPLPMDL0020000001	Cleveland	OH	44113	5/12/2015	Reviewed Hysingla ER/Butrans for those patients failing on present therapy requiring around the clock analgesia, formulary opportunities, savings cards. Said ok will continue to look for appropriate patients that she can switch to ERO.
PPLPMDL0020000001	Cleveland	OH	44113	5/12/2015	Reviewed Hysingla ER/Butrans for those patients failing on present therapy requiring around the clock analgesia, formulary opportunities, said he is on board and will recommend to clinicians for appropriate patients that they can get covered.
PPLPMDL0020000001	Parma	OH	44134	5/12/2015	Handed portfolio piece through the window, reviewed ER med options and asked if he has found patient for Hysingla. He asked me to review it again. I started to discuss appropriate patient type, he was called away. I handed him initiation guide and formulary sheet. Told him to find a Patient taking 3 or more Norco who still needs analgesia, they could take one Hysingla. Commercial patient is best possibility for coverage.
PPLPMDL0020000001	Parma	OH	44129	5/12/2015	Doctor was sitting at her desk didn't want to be interrupted. I told her I was leaving information on our portfolio of products for patients in around the clock pain. Hysingla is the new one daily Hydrocodone with ADP.....left initiation guide.....
PPLPMDL0020000001	Parma	OH	44129	5/12/2015	Using portfolio piece reintroduced myself to Linda since she has been out of town. Reviewed product positioning for each product and then asked her if she has heard of Hysingla. She said that she knew it was on its way. I reviewed complete details of product and let her know that Doctor nickels supports its use. She inquired into coverage So I showed her formulary grid and asked her to concentrate on commercial plans. Asked if she has patients that might be appropriate for Hysingla and she said absolutely!
PPLPMDL0020000001	Cleveland	OH	44195	5/12/2015	No new information learned on this call.
PPLPMDL0020000001	Mayfield Heights	OH	44124	5/12/2015	Impromptu breakfast. Discussed conversion to Hysingla ER, for patient who's on any hydrocodone combo, 2-3-4 x a day; once daily dosing. Reinforced commercially covered only right now. Reinforced Butrans for opioid naive or after 3-4 Tramadol daily; focus on elderly, good Medicare D coverage. OxyContin after oxycodone, good coverage/access. Dr Chteingardt will try to remember Hysingla moving forward.
PPLPMDL0020000001	Cleveland	OH	44125	5/12/2015	Reviewed portfolio, formulary opportunities, No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	5/12/2015	No new information learned on this call.
PPLPMDL0020000001	Mayfield Heights	OH	44124	5/12/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	5/12/2015	No new information learned on this call.
PPLPMDL0020000001	North Royalton	OH	44133	5/12/2015	No new information learned on this call.
PPLPMDL0020000001	Norton	OH	44203	5/12/2015	No information
PPLPMDL0020000001	Barberton	OH	44203	5/12/2015	Talked about the atc uncontrolled tramadol patient moving to a schedule re Butrans weekly patch and asked if he would offer this to his pTients
PPLPMDL0020000001	Garfield Hts	OH	44125	5/12/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	5/12/2015	Quick window...handed him portfolio piece and said that He has good options for his patients in around the clock pain. Butrans is the only c3 ER opioid on the market pulled thru med d formulary. Reminded him that there is now an ER Hydrocodone, Hysingla, once daily....he thanked me
PPLPMDL0020000001	Barberton	OH	44203	5/12/2015	Dr came to window. I asked him what has been holding him back from writing hysingla? Dr said he needs reminding, and I reminded him of my weekly visits and asked if he gets his literature. Dr said he does t read much of the materials left by reps. Highlighted the working adult uncontrolled on norco and offering to the patients. Dr agreed to find someone to write hysingla.
PPLPMDL0020000001	Mayfield Heights	OH	44124	5/12/2015	Quick window call. Left literature for Josie. Discussed my 3 single entity, extended release opioids for patients who meet ER opioid indication.
PPLPMDL0020000001	Tallmadge	OH	44278	5/12/2015	No new information learned on this call.
PPLPMDL0020000001	Strongsville	OH	44136	5/12/2015	No new information learned on this call.
PPLPMDL0020000001	North Royalton	OH	44133	5/12/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44319	5/12/2015	No new information learned on this call.
PPLPMDL0020000001	Stow	OH	44224	5/12/2015	No new information learned on this call.
PPLPMDL0020000001	CLEVELAND	OH	44109	5/12/2015	Reviewed portfolio, formulary opportunities, No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44310	5/12/2015	Discussed with dr the importance of proper selection of patients for hysingla and Butrans. Reviewed Norco around the clock and in pain for hysingla and low dose Norco and tramadol for Butrans. Dr said his hysingla patients are doing really well and he's always looking. Dr said he just titrated a Butrans patient to 15mcg because the patient said it is working but has needed to take more breakthrough Norco. I told dr it sounds like he did he right thing. I asked for continued prescribing and then invited him to the dinner program which he said he might attend.
PPLPMDL0020000001	Mayfield Village	OH	44040	5/12/2015	While waiting for Pharmacist Victoria, there was a patient wanting to refill an OxyContin rx. The patient wanted the script filled today. Victoria stated to patient that she DID NOT have OxyContin in stock of that dose. She did NOT tell the patient she could order that strength. I asked Victoria about OxyContin and I said CAN you WILL you order OxyContin? She said yes, the patient in front of me wanted the OxyContin TODAY and she told the patient she will have to check elsewhere. She wouldn't provide any further information. (It may have been an OARRS?? Issue; not sure) discussed/left 3 product trifold & Hysingla ER initiation & titration guide for Victoria.
PPLPMDL0020000001	Mayfield Heights	OH	44124	5/12/2015	Impromptu breakfast. Dr E states she just placed a patient on Hysingla ER, she hopes it's covered/patient can afford. Reminded her to offer to only those patients on commercial insurance for now/I will continue to communicate formulary wins in future. She continues to have good success with OxyContin. Butrans she says she is "afraid to use." She's unfamiliar with buprenorphine molecule, not sure where/when to use Butrans. I replied: Butrans, a CIII, 1x week patch; is suitable for opioid naive or AFTER patient has been on 3-4 Tramadol daily; and they need additional pain relief. Left Butrans titration guide. Dr Anna says she will continue to manage opioids for EXISTING PATIENTS ONLY - any new patients asking for pain meds will be referred to pain specialty moving forward.
PPLPMDL0020000001	Akron	OH	44305	5/12/2015	Invited dr to the program on 5/19 and dr said he would like to come with his wife the office manager and will check his schedule. I asked dr if he's tried hysingla clinically and he said not yet but did just titrate a patient from 10mcg Butrans to 15mcg and the patient is doing well. I asked for continued prescriptions and reminded dr where and when for him to write hysingla.
PPLPMDL0020000001	Mayfield Hts	OH	44124	5/12/2015	Lunch. Dr Laham says he tried to write Hysingla yesterday for Anthem patient. I reminded him that Anthem requires step edit for Hysingla ER/reviewed details of step edit. He said that instead, he placed patient on OxyContin. He continues to have good success in terms of efficacy with all 3 products. Coverage/access is only limiting factor.
PPLPMDL0020000001	Cleveland	OH	44113	5/12/2015	Reviewed Hysingla ER/Butrans for those patients failing on present therapy requiring around the clock analgesia, formulary opportunities, Savings cards, said ok will continue to consider/prescribe for patients that have
PPLPMDL0020000001	Westlake	OH	44145	5/13/2015	Door was open and dr was at the desk. He said what was new. I said I was here for your uncontrolled norco patients who are appropriate for the nice a day hysingla option. He didn't remember a thing about it. Reviewed a few attributes like managed care and dosing and asked if he would offer it to a patient this week w commercial insurance. Dr would not say yes just smiled. I said its just a matter of time before some norco patient is appropriate for a longer deliver system and get familiar w hysingla so you will be comfortable writing it. I scheduled a lunch...dr has been hard to see lately.
PPLPMDL0020000001	Bedford	OH	44146	5/13/2015	He said that he thinks he is beginning to prescribe more Hysingla. He said that he has 10-12 patients on Hysingla. So far, they are all doing well. He said he knows that I want him to prescribe more and he is but it takes a while to convince patients to switch and learn to deal with the managed care issues. I thanked him for his support and told him and Marian that I am here to help them in any way. I'm can follow up with pharmacies or whatever they need....
PPLPMDL0020000001	Westlake	OH	44145	5/13/2015	Opened with points from previous conversation-. Clarified that last time he said he was using atc opioids in his older patients and he said he was going to try hysingla which he has not done. I started off with his over /Med d silvers scripts patients for Butrans. Reviewed dosing and asked if he could focus in trying ine appropriate patient on either med d or caresource this week given they are appropriate and in need of a change to their current meds. Dr said yes. The question with the unresolved norco patient if he would be willing to give it to the patient. Dr said he needed time to remember dosing. Reviewed attributes. Dr said he has a small patient population appropriate for extended release products. I said understood and we agreed that he would try one to gain experience.
PPLPMDL0020000001	Cleveland	OH	44130	5/13/2015	He has been traveling quite a bit and he feels like his patients are all old and dying and maybe he should retire. He sees patients in pain and thinks there is a place for Hysingla in his practice if insurance will cover it. He finds that insurance companies dictate what he should write. We discussed PA's where he can state his case for why he chooses the medicine he prescribed and find that often it is approved. He thinks that he will have an equal.
PPLPMDL0020000001	Cleveland	OH	44106	5/13/2015	Umbor of appropriate patients for Hysingla as oxycontin but most patients prefer the IR. Reviewed similarities of oxycontin and Hysingla and used PHII to discuss appropriate patient. Meh said he will write for a couple of
PPLPMDL0020000001	Cleveland	OH	44106	5/13/2015	Quick review of portfolio. Discussed formulary opportunities along with trial and savings cards, said ok will consider for appropriate patients, book lunch appt to further discuss
PPLPMDL0020000001	Cleveland	OH	44106	5/13/2015	Quick review of portfolio but for those patients failing on present therapy requiring around the clock analgesia, Initiation/Titration said ok will continue to consider for appropriate patients that has coverage, Will be only at main campus on Thursdays.
PPLPMDL0020000001	Cleveland	OH	44106	5/13/2015	Reviewed OxyContin every 12hours, abuse deterrent characteristics along with Hysingla ER/Butrans for those patients failing on present therapy requiring around the clock analgesia, Initiation/Titration, formulary opportunities and Savings Cards. Said ok will continue to prescribe and consider for appropriate patients that have coverage
PPLPMDL0020000001	Westlake	OH	44145	5/13/2015	I was speaking to Laura the office manager about the drs usage of Butrans or hysingla. Laura stated she didn't ink he write any. I attempted to ask about cover my meds, but the dr walked into the office. I said hello and told him I was to see if Butrans had a fit with his appropriate pain patients this week. Dr said he doesn't use "the stuff". Left information.
PPLPMDL0020000001	Akron	OH	44313	5/13/2015	No new information learned on this call.
PPLPMDL0020000001	Mayfield Village	OH	44143	5/13/2015	No new information learned on this call.
PPLPMDL0020000001	Stow	OH	44224	5/13/2015	Lunch-Butrans-dr said getting great results in severe arthritis pts not being controlled for pain on ultram-dr said she doesn't like going beyond 3 tabs of any IR opioid and butrans is a great transition pain medicine-went over
PPLPMDL0020000001					caresource pts and she said that's where she's targeting it for her pts; OxyContin-dr said she will go to it if needed but for most part keeps to tramadol and butrans

PLPMDL0020000001	Cleveland	OH	44106	5/13/2015	Reviewed portfolio, formulary opportunities and trial and savings cards. No new information learned on this call.
	Akron	OH	44320	5/13/2015	Showed dr the Helen profile for Butrans and told him about using Butrans for a patient with a similar profile and where to start as far as dosing based on the total daily dose of tramadol or Hydrocodone. I told dr that he wants me in every week and I will continue until he figures out where and when to use it regularly. Dr asked me about insurance coverage and I told him that Jenna has put the formulary grids specific to his business in each exam room along with a conversions scale.
PLPMDL0020000001	CLEVELAND	OH	44195	5/13/2015	Reviewed portfolio, formulary opportunities and trial and savings cards. No new information learned on this call.
PLPMDL0020000001	North Royalton	OH	44133	5/13/2015	No new information learned on this call.
PLPMDL0020000001	Westlake	OH	44145	5/13/2015	Reviewed if any Hysingla scripts came thru the pharmacy and he couldn't remember.
PLPMDL0020000001	Westlake	OH	44145	5/13/2015	No new information learned on this call.
PLPMDL0020000001	Stow	OH	44224	5/13/2015	No new information learned on this call.
PLPMDL0020000001	Lyndhurst	OH	44124	5/13/2015	No new information learned on this call.
PLPMDL0020000001	Cleveland Hts	OH	44118	5/13/2015	No new information learned on this call.
PLPMDL0020000001	Akron	OH	44303	5/13/2015	No new information learned on this call.
PLPMDL0020000001	Bedford	OH	44146	5/13/2015	OxyContin-reminder when reach 3-4 tabs to transition; butrans- tramadol pts reaching 200mg and on caresource transition
	Akron	OH	44320	5/13/2015	Monique told me that Val who does the prior auths got the Butrans Rx approved from Buckeye and was very happy about it. I discussed finding similar patients on Caresource and reviewed the pa criteria. I reviewed all Butrans attributes and asked for more prescriptions. Reviewed hysingla attributes, dosing and conversions.
PLPMDL0020000001	Mayfield Village	OH	44124	5/13/2015	No new information learned on this call.
PLPMDL0020000001	Lyndhurst	OH	44124	5/13/2015	No new information learned on this call.
PLPMDL0020000001	Cleveland	OH	44106	5/13/2015	Reviewed portfolio, formulary opportunities and trial and savings card , said ok will relay info to pharmacy mgr.No new information learned on this call.
PLPMDL0020000001	Cleveland	OH	44103	5/13/2015	No new information learned on this call.
PLPMDL0020000001	Lyndhurst	OH	44124	5/13/2015	No new information learned on this call.
PLPMDL0020000001	Akron	OH	44313	5/13/2015	Provided hysingla attributes and reviewed the Jane profile with a few points from the MVA about special populations use.
PLPMDL0020000001	Cleveland	OH	44130	5/13/2015	No new information learned on this call.
PLPMDL0020000001	Richmond Hts	OH	44143	5/13/2015	Quick hallway. Presented all 3 products, indications, dosing. Dr Stanescu says he doesn't want to use OxyContin or Hysingla ER = yet he's willing to consider Butrans because it's a CIII and he can call/fax in with refills. Left literature for all 3 products.
PLPMDL0020000001	Mayfield Heights	OH	44124	5/13/2015	No new information learned on this call.
PLPMDL0020000001	Beachwood	OH	44122	5/13/2015	No new information learned on this call.
PLPMDL0020000001	Cleveland	OH	44106	5/13/2015	No new information learned on this call.
	Akron	OH	44333	5/13/2015	Discussed all products over lunch. Led off with profolio piece and outlined all products. Dr said that he will always start with Butrans unless a patient is over 40mg a day or Norco then he will go to hysingla. Dr said he tried to write hysingla for a Medicare patient the other day and it was over \$100 for the patient. I told dr to stick to the private insurance plans and Tricare. Dr said he has a lot of Caremark and ESI and he will continue to try.
PLPMDL0020000001	Strongsville	OH	44136	5/13/2015	Discussed oxycontin opportunities and to just write it where appropriate.
PLPMDL0020000001	Strongsville	OH	44136	5/13/2015	No new information learned on this call.
PLPMDL0020000001	Cleveland	OH	44106	5/13/2015	No new information learned on this call.
	Beachwood	OH	44122	5/13/2015	Quick call. She has mentioned the use of Hysingla to the doc for several patients, so far, she submitted two that were rejected. I'm let her know to call me next time and I can follow up, with the pharmacy. Discussed the importance of explaining in a PA the reason Hysingla was chosen. Discussed this with Vicki too. Let her know about the excellent coverage for butrans , including med d....
PLPMDL0020000001	Beachwood	OH	44122	5/13/2015	Quick reminders for OxyContin in early conversion from Percocet and butrans-reminded dr that he asked me to remind him about butrans and asked for one pt this week-caresource pt not controlled on tramadol
PLPMDL0020000001	Westlake	OH	44145	5/13/2015	No new information learned on this call. Didn't get to see the dr today so I left literature in our products w my card.
PLPMDL0020000001	Westlake	OH	44145	5/13/2015	No new information learned on this call.
PLPMDL0020000001	Cuyahoga Falls	OH	44224	5/13/2015	Lunch-dr said she likes butrans when a cox 2 doesn't control OA pain and needs opioid ATC relief-went over caresource coverage and dr said she likes to prescribe it there since PAs are going through easier; OxyContin-dr doesn't like to go to ER opioids beyond butrans but will prescribe it if needed
PLPMDL0020000001	Westlake	OH	44145	5/13/2015	Discussed if they will stock hysingla. And they said no. I asked about their policy on new patients trying to get hysingla and what do they do? They said it can be ordered. We talked about attributes and abuse potential for all opioids. Reviewed managed care.
	Akron	OH	44333	5/13/2015	Elise told me that she is having a Very difficult time getting hysingla approved. I told her I hope she's keeping it for her private insured patients for the product and she said she is. Discussed the plans important hi to her business and she said UHC and Medical mutual. I told her they are both tough plans to get hysingla peopled for unless the patient has multiple IR and ER opioid failures. I told elise to look at the Rx insurance and she said she doesn't and won't do that because she only sees the medical that's posted and it's too difficult to get that done. I told her then to focus on Tricare,ESI, and Caremark. She said that's good and thinks she has a Tricare patient for it now. Discussed her success with Butrans and how she should continue to identify the right candidates. Oxycontin for those already on the IR molecule.
PLPMDL0020000001	Beachwood	OH	44122	5/13/2015	He wrote another Hysingla this morning. Vicki is working on the PA right now. We discussed strategies to write the Pa so that it gets approved. He likes the option of Hysingla but several have been rejected and he will be much happier when it is covered on more plans. I thanked him for his support. Asked that he not forget about appropriate oxycontin patient while he gets clinical experience with Hysingla.
PLPMDL0020000001	Cuyahoga Falls	OH	44223	5/14/2015	Discussed the program next week at Twisted Olive. Dr said his mid levels need to register and are coming. Dr said he's also brining a colleague from CCF. I told dr to please continue prescribing hysingla and Butrans for appropriate patients and discussed private insurance opportunities with Caremark and ESI for hysingla.
PLPMDL0020000001	Cuyahoga Falls	OH	44223	5/14/2015	Introduced hysingla to Heather the pharmacist reviewing the attributes, dosing and conversions as well as appropriate patient types. Reviewed trial offer and copy card. Heather said she doesn't recall filling any yet.
PLPMDL0020000001	Cuyahoga Falls	OH	44221	5/14/2015	Reviewed Butrans indication, dosing and conversions from appropriate patient types.
PLPMDL0020000001	Cuyahoga Falls	OH	44221	5/14/2015	Discussed Butrans and hysingla with Dee the pharmacist. Reviewed attributes and appropriate patient type selection. Reviewed copy cards and trial offers and left cards as appropriate.
	Cleveland	OH	44114	5/14/2015	Quick review of portfolio of products, appropriate patients that are failing on present therapy requiring around the clock analgesia, formulary opportunities, savings cards, said ok will continue to consider/prescribe for appropriate patients
PLPMDL0020000001	Garfield Hts	OH	44125	5/14/2015	Discussed portfolio of products, appropriate patients that are failing on present therapy requiring around the clock analgesia, formulary opportunities, savings cards. said ok will continue to prescribe/consider for appropriate patients
PLPMDL0020000001	Garfield Hts.	OH	44125	5/14/2015	Discussed portfolio of products, appropriate patients that are failing on present therapy requiring around the clock analgesia, formulary opportunities, savings cards. said ok will continue to discuss with clinicians so that they consider for appropriate patients
PLPMDL0020000001	Garfield Heights	OH	44125	5/14/2015	Discussed/Reviewed portfolio of products, appropriate patients that are failing on present therapy requiring around the clock analgesia, formulary opportunities, savings cards. said ok will continue to remind clinicians(Samuel/Abraham) about the ERO options
PLPMDL0020000001	Lakewood	OH	44107	5/14/2015	Tried to see the dr today but it didn't work out. I highlighted to the office manager hysingla and asked for an apt. She told me to call next week and she would find an apt for me.
	Rocky River	OH	44116	5/14/2015	Saw dr thru the window. Highlighted his familiarity of the molecule oxycodone and the dr agreed he uses OxyCotin for his older patients. Covered coverage for med d coverage and asked how oferts le is he with Hydrocodone? Dr said about the same. I mentioned our previous conversation about him trying to write Hysingla but it was rejected. I asked him to try again and offer hysingla to those uncontrolled commercial Norco patients. He said ok, I said I would follow up next week to see how it's going and he said that was fine. He did me think. Trying to write Butrans more often.
PLPMDL0020000001	Cuyahoga Falls	OH	44223	5/14/2015	Confirmed attendance to Ali program next week for hysingla. Greg said he thinks the product will be really taking off once it gets covered on medicaid and Medicare. I told him I understand however there are working patients that have around the clock pain and currently taking Norco. Greg said he agrees but they are just harder to find. Greg said that Butrans is doing very well and patients love it.
PLPMDL0020000001	Brecksville	OH	44141	5/14/2015	No new information learned on this call.
PLPMDL0020000001	Cleveland	OH	44114	5/14/2015	Reviewed portfolio,formulary opportunities and area prescribers,No new information learned on this call.
PLPMDL0020000001	Euclid	OH	44123	5/14/2015	No new information learned on this call.
PLPMDL0020000001	Cleveland	OH	44125	5/14/2015	Reviewed portfolio, formulary opportunities.No new information learned on this call.
PLPMDL0020000001	Euclid	OH	44117	5/14/2015	No new information learned on this call.
PLPMDL0020000001	Independence	OH	44131	5/14/2015	No new information learned on this call.
PLPMDL0020000001	Cleveland	OH	44107	5/14/2015	No new information learned on this call.
PLPMDL0020000001	Akron	OH	44333	5/14/2015	No new information learned on this call.
PLPMDL0020000001	Westlake	OH	44145	5/14/2015	No new information learned on this call.
PLPMDL0020000001	Mayfield Heights	OH	44124	5/14/2015	No new information learned on this call.
PLPMDL0020000001	Akron	OH	44333	5/14/2015	No new information learned on this call.
PLPMDL0020000001	Westlake	OH	44145	5/14/2015	No new information learned on this call. Tried to see the dr but they said no. I tried to get a nurse out to talk with but they said no for that too.
PLPMDL0020000001	Lakewood	OH	44107	5/14/2015	No new information learned on this call. Went to his new office. As now he is in the same building as dr orra three days a week. Unfortunate dr was not available to discuss product. But I made sure to discuss the attributes of hysingla and Butrans with the only person and nurse he long in the office.
PLPMDL0020000001	Cuyahoga Falls	OH	44223	5/14/2015	No new information learned on this call.
PLPMDL0020000001	Cleveland	OH	44125	5/14/2015	No new information learned on this call.
PLPMDL0020000001	Lakewood	OH	44107	5/14/2015	Came into to talk about his caresource patient s for Butrans and he told me that he wrote more Butrans. He nurses up front told me he got two. Ore scripts thru this week on caresource. I asked kow the process went for her w the priur authorization and she said it was easy. I told her I would be back next week to follow up.

PPLPMDL0020000001	Independence	OH	44131	5/14/2015	Quick call reminding him that butrans in the only c3 ER opioid on the market with 5 doses to choose from and gave him Helen profile as a patient to look for
PPLPMDL0020000001	Cleveland	OH	44130	5/14/2015	No new information learned on this call.
PPLPMDL0020000001	Tallmadge	OH	44278	5/14/2015	No new information learned on this call.
PPLPMDL0020000001	Euclid	OH	44119	5/14/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/14/2015	No new information learned on this call.
PPLPMDL0020000001	Highland Heights	OH	44143	5/14/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	5/14/2015	No new information learned on this call.
PPLPMDL0020000001	Independence	OH	44131	5/14/2015	Reviewed portfolio piece and product positioning. She doesn't write for many ER opioids but likes to stay current on the information.
PPLPMDL0020000001	Cleveland	OH	44115	5/14/2015	Visited pain mgmt dept, IM, No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44115	5/14/2015	Reviewed portfolio, Hysingla ER utilization, No new information learned on this call.
PPLPMDL0020000001	Euclid	OH	44119	5/14/2015	No new information learned on this call.
PPLPMDL0020000001	Independence	OH	44131	5/14/2015	Reviewed pain portfolio and he wanted to hear more about butrans. Introduced scheduling, appropriate patient type, initiation and titration, formulary and med d coverage. Reviewed the opioid naive study inclusion because he feels those are the patient he would prescribe butrans for. Meh said he will give it a try. Spent a short period of time reviewing Hysingla and OxyContin and their similarities but he probably won't have patient for those at this time.
PPLPMDL0020000001	Euclid	OH	44119	5/14/2015	Lunch. Asked Paul for patients on hydrocodone combos, for whom he's thinking about titrating, to consider, for those covered on commercial insurance, conversion to Hysingla ER. Discussed OxyContin after oxycodone, or opioid naive start dose 10 mg dosed q12 h. Discussed Butrans for opioid naive or after Tramadol. Asked Paul to keep in mind today, tomorrow. He will BE OUT Of office next Mon, Tues. Back in office Wed.
PPLPMDL0020000001	Lakewood	OH	44107	5/14/2015	Talked about how they handle new patients needing hysingla and it not being in the shelf. There was a hesitation but they said it depends on the Ors report.mi asked how often they check it and they said for new patients usually every time. We talked about indication and I asked if this describes some of the immediate release opioid patients currently that fill every month. They said yes, I highlighted the lower doses and asked the. To stock them but he said no. Highlighted attributes of the other products and gave fair balance of abuse potential for all opioids including Purdue products.
PPLPMDL0020000001	Lakewood	OH	44107	5/14/2015	Talked about attributes of the product ts, take about the tramdol insight and asked if they thought those numbers lined up to what they see. They said no, I asked what was off. They said most tramdol are acute in their pharmacy. I talked about Butrans and dosing.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/14/2015	Spoke with pharmacist Shelby about all products. Introduced her to hysingla and reviewed all attributes, dosing and conversions. Shelby said she just filled a Zohydro this morning for a doctor in Cleveland. I reviewed the patient type appropriate for hysingla and reviewed trial offer with copay card. Shelby said she likes the q24. Reviewed Butrans copay cards and attributes for Butrans and oxycotin and abuse deterrence for oxycotin.
PPLPMDL0020000001	Independence	OH	44131	5/14/2015	Roman is very excited about Hysingla because of once daily dosing (and reaching peak at around 16 hours) and abuse deterrent properties. He thinks it is a great option for many of their patients and using tylenol for breakthrough. He doesn't believe that oxycotin is a true q12, some patients need it q8. The patients he would write butrans for are older and spend half of their time in Florida and has concerns with patch in warmer climates. He prefers pills and fewer of them to treat pain. He wants me to call on the nursing home he goes to because he wants to get clinical experience with hysingla there.
PPLPMDL0020000001	Independence	OH	44131	5/14/2015	Using portfolio piece, reviewed portfolio and product positioning. Doctor said he likes to give patients the least amount of medication to treat their pain and thinks that's ideally IR meds are not the way to treat pain. He likes oxycotin q12 dosing but thinks that q24 is even better. He thinks that abuse deterrence is important and was happy to hear that oxycotin and Hysingla have those properties. Pulled through the formulary and which patients are best to try Hysingla. He said he will try it. There are too many variables to consider with butrans, he doesn't think that orthopedics is the best place for butrans.
PPLPMDL0020000001	Euclid	OH	44117	5/14/2015	Dr Nageeb said "I tried to write your long acting vicodin a few times, but it was NOT covered." I replied, it's Hysingla ER, once daily hydrocodone with no acetaminophen, abuse deterrent properties. I communicated he should only offer Hysingla ER at this time to patients covered on commercial insurance. Assured him I would communicate future formulary wins for Hysingla ER to his nursing staff. Discussed patient type and how to access OxyContin; discussed patient type and good coverage for Butrans on commercial/Medicare D and Workers Comp plans. He asked that I leave some Hysingla cards at Willoughby location. He didn't realize Hysingla had a trial offer/then future savings. He was pleased with the trial offer.
PPLPMDL0020000001	Westlake	OH	44145	5/14/2015	Lunch-Butrans-dr said he is concentrating on prescribing it in caresource pts falling tramadol-agreed excellent pts since its his number one coverage plan; OxyContin-dr prescribes it mostly in cancer pain pts-redIRECTED to pts on Percocet approaching 4 tabs and looking for ER opioid with same molecule-dr agreed better choice and has always looked at it as a last resource type pain med-dr said will look for Percocet pts to transition over to
PPLPMDL0020000001	Rocky river	OH	44116	5/14/2015	Worked the introduction from the previous discussion. Talked about how familiar she was with OxyCotin and it's managed care, she agreed. I encouraged a trial of hysingla in the commercial insured for those patients she wants to keep in the Hydrocodone e molecules, she told me that the insurance will be the problem. She said she likes to write products she knows has coverage to avoid hassles but she still said she would try to write a few and see how it goes. I suggested if appropriate she could always go OxyCotin or Butrans if Hysingla does go thru and appropriate.
PPLPMDL0020000001	Cleveland	OH	44113	5/15/2015	Quick review of Hysingla ER/Butrans formulary opportunities, savings cards said ok will continue to consider/prescribe for appropriate patients.
PPLPMDL0020000001	Mogadore	OH	44260	5/15/2015	Good discussion about Butrans and hysingla as well as oxycotin. Reviewed profile piece and outlined each products with where and when to use. Dr said he's been having more success recently getting Butrans approved and is happy with that. I asked him if he's using after tramadol and he said he's used it for Norco and percocet patients as well. Reviewed hysingla attributes, dosing and conversions. I asked dr if he would write it and he said he's not good with the lack of coverage. Reviewed his plans and he said 75% of his business is medicare and Medicaid. I told him I'll take the 25% commercial then for hysingla. Dr said alright he will try it.
PPLPMDL0020000001	Parma	OH	44129	5/15/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44109	5/15/2015	Reviewed portfolio, formulary status and savings cards, said ok will give info to Tyrab, No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44312	5/15/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44312	5/15/2015	Quick discussion with dr about hysingla and Butrans and asked dr if he recalls the attributes of hysingla? Dr said he did and took the initiation and titration guide. I told him he can learn more about the product by coming to the hysingla program on Tuesday next week. Dr said he likes dr Ali but isn't sure he can make it. I asked dr if he would use Butrans for those on tramadol around the clock? Dr said he has a few patients on it NDC will keep
PPLPMDL0020000001	Cleveland	OH	44113	5/15/2015	Reviewed Hysingla ER/Butrans formulary opportunities along with savings cards. Said ok will continue to consider/prescribe for appropriate patients that she can get covered.
PPLPMDL0020000001	Cleveland	OH	44113	5/15/2015	Reviewed portfolio of products, formulary opportunities, initiation/titration and program date. Said ok will consider for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44113	5/15/2015	Reviewed portfolio of products, formulary opportunities, initiation/titration and program date. Said ok will consider for appropriate patients that have formulary coverage
PPLPMDL0020000001	Cleveland	OH	44113	5/15/2015	Lunch-Butrans-Dawn likes butrans in caresource pts and elderly pts with severe arthritis-finds the elderly like the patches than taking more tablets-will switch them over from norco at 3 tabs; OxyContin-n/a
PPLPMDL0020000001	Westlake	OH	44145	5/15/2015	Opened the call w the objective of visit is to identify those uncontrolled norco patients that maybe appropriate for hysingla and those uncontrolled lyrica patients for Butrans. Reviewed Phil profile. I opened it as this patient profile was created by a group of drs and I asked for his feed back if he found it to be helpful. After review I asked his thoughts in the material and he said it was helpful and well organized, I asked if he could relate to these patients. Dr said yes. Dr said he doesn't like Tramadol and gave me several reasons why, I asked what cox 2 does he like for pain control and he said lyrica or even Celebrex best. Dr said he likes Butrans and it has taken him a while to remember it but now he feels comfortable writing it. We talked about caresource coverage and med d coverage. Dr was not aware. After review of hysingla dr said he could see himself using it. He thought the free month offer for the next 3 months was a great idea and Carmen was thrilled when I told her the update too. Carmen just started using cover my meds and she thinks its super easy. I asked the dr to find one commercial patient to try next week. I told him I would come back to help him remember. He told me he would read up.
PPLPMDL0020000001	Mogadore	OH	44260	5/15/2015	Led with Norco insight and why hysingla is an excellent option for those patients on Norco around the clock and in pain. Dr said she agrees but hates writing pain medicine. I asked she writes much ER opioids and she said mostly IR. I told her it might be that she's writing IR opioids for patients that meet the ER opioid indication. Dr said I'm probably right. Discussed where and when to use hysingla and oxycotin. Invited to hysingla program and she said she will not attend.
PPLPMDL0020000001	fairview park	OH	44111	5/15/2015	Reviewed attributes of hysingla. Asked if they tried to get it thru managed care yet, they said no. Talked about theatrical card and savings program. She didn't have much to say about it. Gave leave behinds on products.
PPLPMDL0020000001	Brooklyn	OH	44144	5/15/2015	No new information learned on this call.
PPLPMDL0020000001	Parma Heights	OH	44129	5/15/2015	No new information learned on this call.
PPLPMDL0020000001	Brooklyn	OH	44144	5/15/2015	Reviewed portfolio, formulary status and savings cards, no new information learned on this call.
PPLPMDL0020000001	Uniontown	OH	44685	5/15/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44111	5/15/2015	Talked to the dr about potential dinner program or Inservice. He said yes pending the date And I'm will coordinate date w Marylyn them office manager. Asked what molecule were the patient changed from before going to butrans. They said norco and Tramadol. I asked about their experience. So far being positive and to continue to write it and I was here to identify a few areas you might have not thought of. Tied in managed care to caresource and the tramadol patient. Reviewed dosing and covered attributes. With the future uncontrolled norco patients you know have a once a day, reviewed attributes option called hysingla. Talked about their new month and savings program. Reviewed conversion and asked if he would be willing to offer it to his patients. I asked what his hesitations would be to write today. He said he needs to remember its an option. I told him when I come back what would remind him? He wasn't sure.
PPLPMDL0020000001	Akron	OH	44312	5/15/2015	No new information learned on this call.
PPLPMDL0020000001	Stow	OH	44224	5/15/2015	No new information learned on this call.
PPLPMDL0020000001	Berea	OH	44017	5/15/2015	No new information learned on this call.
PPLPMDL0020000001	Beachwood	OH	44122	5/15/2015	She said today wasn't a great day, but what is new. I had enough time to tell her that my purpose is to discuss ER meds for pain and when they are an appropriate choice for her patients in around the clock pain. She was interested. Asked her to think of a hydrocodone patient taking 3 or more Norco. She was able to think of some. When that patient comes in looking for more pain relief, would she consider ER med like Hysingla for that patient? She said yes, but could I come back next week and discuss it further.....
PPLPMDL0020000001	Brooklyn	OH	44144	5/15/2015	Reviewed portfolio, formulary status and savings cards, said ok will relay info to Rph, No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44109	5/15/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44312	5/15/2015	Discussed Jane profile for hysingla and converting from patients on Norco around the clock and either ask for the next dose or have had it refilled for many months. Discussed conversions and dosing flexibility. Dr said he'll give it a shot and it makes sense. Dr said he's got a few patient on Butrans and is finally having some clinical and insurance success. I asked for continued business for Butrans and asked him to identify Tramadol patients who might ask for Norco.
PPLPMDL0020000001	Cleveland	OH	44129	5/15/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44109	5/15/2015	Reviewed portfolio with Raj said ok, No new information learned on this call.



	Parma	OH	44129	5/15/2015	Asked doctor if he has found that Hysingla patient yet? The patient that might be taking 3 Norco a day and need another.....He may think that patient would be appropriate for a once daily Hysingla, no tylenol....he was signing prescriptions as I talked to him and all were on 3 Norco or 3 Percocet a day. He said not today, but he will keep looking. Reviewed one to one conversion of he finds the right patient and the new savings program. I was excited to present it to him, which made him smile and agree it seemed like a good program for patients. Reminded him that there are 5 strengths of butrans, in case it slips his mind while he searches for Hysingla
PPLPMDL0020000001					
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/15/2015	No new information learned on this call.
PPLPMDL0020000001	Middleburg Heights	OH	44130	5/15/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	5/15/2015	No new information learned on this call.
	Akron	OH	44312	5/15/2015	Reviewed portfolio piece discussing oxycontin, hysingla and Butrans attributes and where and when to use each product. Dr said that he gets all the products and just had a patient come to him on Butrans from Dr Dmitri. Dr said the patient is doing very well on it and just has a hard time getting patients approved. Discussed where and when again to use all products coupled with insurance options for the patch of least resistance. Dr said he'll try hysingla but he's tired of prior authorizations.
PPLPMDL0020000001					
PPLPMDL0020000001	Cleveland	OH	44113	5/15/2015	No new information learned on this call.
	Cleveland	OH	44113	5/15/2015	Lunch-Elaine thinks butrans works best in opioid naive pts and pts new to pain management overall, plus the elderly who like the patch concept better than taking more tablets-she said caresource pts are working out well especially when they are under 3 tabs per day-working on pt now that served in armed forces and has severe herniated discs and is going to put on butrans plus norco for breakthrough pain-said will keep me posted on
PPLPMDL0020000001					
PPLPMDL0020000001	Akron	OH	44319	5/15/2015	No new information learned on this call.
	Westlake	OH	44145	5/15/2015	Talked about what we talked about last time was his uncontrolled pain patients on lyrica or tramadol and going to Butrans. I asked if he had any recent hesitations about butrans. Dr said no. I highlighted a few areas he could utilize for Butrans. Caresource and med d plans. Dr seemed interested in hysingla and asked me how it differs from Butrans. I talked about being able to continent patient on the same hydrocodone molecule if he wanted to. Dr liked the attributes and said he really likes the once a day option. I asked if he though he would offer that to patients and he said yes and he needs to read up. I played up the free month for commercial patients and that sounded good.mdr said it wasn't a big deal it was just commercial. I said really. He said I have plenty of commercial patients too. I said exactly. Reviewed a few times how to convert. I asked what kind of dose are your patients on that you are think ing of he said 15 to 20mg total dose. I told him 20mg was the lowest dose we had, dr liked the single entity.
PPLPMDL0020000001					
PPLPMDL0020000001	Parma	OH	44129	5/15/2015	Quick call introducing the savings card program to him and his staff. They were very busy and he has not started anyone in it yet.
PPLPMDL0020000001	Berea	OH	44017	5/15/2015	Asked if he had offered hysingla to patients. He said no. I asked what was holding him back exactly. He said he just forgets its available. I reviewed the commercial and free month trial. Also talked attributes.
	Cleveland	OH	44111	5/15/2015	Talked about the molecule that the patients failed when she offered Butrans. She said Norco. I asked what made her choose Butrans over OxyContin? She said the dosing and she was trying to gain experience w Butrans. I told her what a great thing she is doing by offering it and thrilled she was having good luck. I brought up hysingla as a possible solution to the future uncontrolled norco patient. Reviewed attributes and she said she was interested. I asked what concerns she had and she stated insurance mainly. I told her about the free month and the time her staff had to work on any pa. She said she would try it. I talked about coming back next week to see
PPLPMDL0020000001					
	Parma	OH	44129	5/15/2015	Had time to discuss portfolio of products and discuss Hysingla at length. Doctor likes the idea of Hysingla, dosing, abuse deterrent properties. His limiting factor is managed care. He does not have the time or enough staff to chase the prescriptions down. He will write what is the easiest and lowest cost to the patient. Pulled through best chance for coverage and new savings card information. Math at seemed to please him. He said he will try to find one patient and see how it goes. He has some patients that are on butrans for a while now. He likes that med. Talked to Marianne and staff about savings card. They will do a prior auth sometMes if patient is in med and doing well and the insurance company requests it. She said doc hates it when they are in front of computer or in the phone and not w patients. Talked about cover my meds again and she said she may try it because she knows they already have an account.
PPLPMDL0020000001					
	Westlake	OH	44145	5/15/2015	Apt today. Address my objective today was to talk about her uncontrolled cox 2 or Tramadol patients to see if they bare an appropriate for Butrans c3. Also told her I wanted to introduce hysingla the once a day hydrocodone for her uncontrolled norco patients. Started w hysingla. Reviewed the basic attributes of the first page of the visual aid. I asked what she thought. She said so far good. I asked what was her experience w the hydrocodone molecule. She said she was very familiar with it. Addressed the patient appropriate for by reference the jane profile. I asked if she can relate toothed profile,e for hysingla or was something missing. She said she tends to write extended release for her older patients. I asked over 18 adults have chronic pain that she treats. She said some, but more older. I asked what she uses for those few. She said norco. We talked about maybe have a few options for hysingla in her practice. I asked how she felt about the 30 a month for hysingla. She said for her its great but her patients not so much. I said isn't the point to treating atc pain....to treat the pain, I said why is an extended release option raises so much concern where treating w immediate opioid doesn't. She said people in pain take their meds. I asked how do you really know. She said they don't complain. I reminded her abut then uncontrolled pain patient who are complaining and wanting help. Covered managed care. Also highlighted abuse potential for all opioids.
PPLPMDL0020000001					
PPLPMDL0020000001	Cleveland	OH	44118	5/18/2015	Reviewed OxyContin every 12hours along with Hysingla ER/Butrans for those patients failing on present therapy requiring around the clock analgesia, formulary opportunities, Savings cards, said ok will continue to consider for appropriate patients that have formulary coverage.
PPLPMDL0020000001					
PPLPMDL0020000001	Berea	OH	44017	5/18/2015	Review of Doctors Managed Care with Hysingla and asked what was holding him back from trying it for his commercial insurance. I asked the doctor for one appropriate patient to try Hysingla. He said sure. Touched on conversation. Dr. asked about Butrans dosing. I addressed and pointed out under Tramadol If he felt butrans was a good choice? Dr said yes.
PPLPMDL0020000001					
PPLPMDL0020000001	Parma	OH	44129	5/18/2015	Wasn't a good day for doctor today. He is still sorting through disorganized paperwork from Cindy leaving. He does still think of Hysingla but is seeing fewer patients during this transitional time between offices. Reviewed appropriate patient types for Hysingla and butrans and pulled through formulary situation for Hysingla and new savings card plan.
PPLPMDL0020000001					
PPLPMDL0020000001	Parma	OH	44129	5/18/2015	Laid portfolio piece down, Doc said they wrote Hysingla and the pharmacy told the patient that it isn't available yet. I told her that is untrue and there are many different reasons why that would have happened. I asked her and Steve to call me if anything like that happens again. Let them know where Hysingla was stocked, pulled through new Hysingla savings card information. She has more patients in mind for Hysingla, she will try it again, and call me next time. She does keep butrans in mind for some patients but hasn't tried anyone lately. Reviewed appropriate patient to look for and formulary information as well.
PPLPMDL0020000001					
PPLPMDL0020000001	Cleveland	OH	44114	5/18/2015	Reviewed formulary opportunities, Savings cards and Initiation/Titration of products. Said he will continue to consider/prescribe for appropriate patients that have coverage.
PPLPMDL0020000001	Akron	OH	44313	5/18/2015	W-OxyContin-when approaching 3-4 tabs of Percocet will you transition to OxyContin for ER pain control-dr said ok; butrans-reminder to dr and staff they have a great opportunity for their caresource pts after tramadol for ER opioid coverage-they said they would look for pts
PPLPMDL0020000001					
PPLPMDL0020000001	University Hts	OH	44118	5/18/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44112	5/18/2015	Quick review of Product portfolio, Formulary opportunities, said ok will consider, said to book lunch appt with Michelle to further discuss
PPLPMDL0020000001	Cleveland	OH	44103	5/18/2015	Reviewed portfolio, went over Hysingla ER savings card trial offer, said ok will initiate PA if applicable.No new information learned on this call.
PPLPMDL0020000001	Cleveland Hts	OH	44118	5/18/2015	Reviewed portfolio, went over Hysingla ER savings card trial offer, said ok will relay info to RPH mgr. No new information learned on this call.
PPLPMDL0020000001	Highland Heights	OH	44143	5/18/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	5/18/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44134	5/18/2015	Asked doctor for one Hysingla patient. He said yes. Pulled through new information on savings card.
PPLPMDL0020000001	Westlake	OH	44145	5/18/2015	No new information learned on this call. Attempted to see the doctor, left various approved items.
PPLPMDL0020000001	Lakewood	OH	44107	5/18/2015	Talked about Drs trip to Spain and about how his practice at the other location is going and what I can bring him there...savings cards and so forth. Dr said coupons or wall posters would be nice. I told him that i have some great spine posters that he could use also the savings cards for hysingla are for a free month. So if there area any pa needed, your staff would have plenty of time to get it done and the patient can go home with their
PPLPMDL0020000001					
PPLPMDL0020000001	Akron	OH	44333	5/18/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	5/18/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44111	5/18/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44312	5/18/2015	No new information learned on this call.
PPLPMDL0020000001	Euclid	OH	44117	5/18/2015	Met with med asst at front desk. Specifically discussed trial card for Hysingla ER. Reinforced Purdue product portfolio of single entity, extended release opioids for patients who experience pain: daily, around the clock, long
PPLPMDL0020000001	Lakewood	OH	44107	5/18/2015	Didn't see the doctor today, but took requests for wednesdays follow up visit for more caresouce Butrans pa's. Talked about the trial card for commercial patietns on hysingla.
PPLPMDL0020000001	Lyndhurst	OH	44124	5/18/2015	No new information learned on this call.
PPLPMDL0020000001	Highland Heights	OH	44143	5/18/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland Hts	OH	44118	5/18/2015	Reviewed portfolio, went over Hysingla ER savings card trial offer, said ok will initiate PA if applicable.No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	5/18/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	5/18/2015	Laura said that Doctor. Nickels is on vacation. Let her know he is in full support of Hysingla. Mmshe said she needs to confirm it before she writes. found out from Karen the office manager that Z rep gave her information about where to send scripts and they have express scripts doing the PA's for the offices.
PPLPMDL0020000001	Parma	OH	44129	5/18/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	5/18/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44312	5/18/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	5/18/2015	No new information learned on this call. Tried to get an apt to see the doctor and the new doctor. Highlighted the conversion from norco to hysingla and the jane profile which i shortened because it was a window call and the audience was a nurse. But I focused on commercial insurance, age and failed norco...and the nurses seemed to think they have alot of those patients. Talked about the trial card for hysingla
PPLPMDL0020000001	LAKEWOOD	OH	44107	5/18/2015	Tried to get hysingla stocked today. Talked about the indication and the portfolio of products to select for the right appropriate patient. Reviewed hysingla the longest. I asked about what they knew on abuse deter properties and I have them the Oxycontin leave behind for reading. We talked about it being possible and that all opioids have risks of abuse potential. Covered the trial card...i asked if they have ever seen this before, they said yes. I asked process was involved on their end and if they run a pa and send it to the office right away or do they wait their second time they fill the script. They said it depends on how busy they are and they don't have a protocol involved. Reviewed dosing and conversion of hysingla. Covered butrans and oxycontin attributes such as dosing.
PPLPMDL0020000001	Rocky river	OH	44116	5/18/2015	Talked about abuse potential for all opioids with the nurses and reviewed abuse deter properties of both hysingla and oxycontin.
PPLPMDL0020000001	University Hts	OH	44118	5/19/2015	Discussed portfolio of products, identified appropriate patients that are failing on present therapy requiring around the clock analgesia, Savings cards, formulary opportunities. Said he will continue to consider/prescribe appropriate patients that he can get coverage.
PPLPMDL0020000001					
PPLPMDL0020000001	Cleveland Hts	OH	44118	5/19/2015	Discussed portfolio of products, identified appropriate patients that are failing on present therapy requiring around the clock analgesia, Savings cards, formulary opportunities. Said he will continue to consider/prescribe appropriate patients that he can get covered.

	Beachwood	OH	44122	5/19/2015	Doctor is completely on board with Hysingla. He has many appropriate patients. It is difficult for him to continue writing because he is so short on time, and writes what he wants and then has to change it when insurance doesn't cover it. He says it makes him shy away from writing it. We discussed where he can write it and what I can do to ensure the scripts make it through the pharmacy. Pulled through the savings program and the many plans with open access. He knows in about 6 months, the insurance landscape will be different. He will write it on the plans I noted were covered. He knows that butrans has good coverage now and didn't in the past.
PLPMDL0020000001					
PLPMDL0020000001	Parma	OH	44129	5/19/2015	No new information learned on this call.
PLPMDL0020000001	Cuyahoga Falls	OH	44223	5/19/2015	No new information learned on this call.
PLPMDL0020000001	Euclid	OH	44132	5/19/2015	No new information learned on this call.
PLPMDL0020000001	Shaker Hts	OH	44118	5/19/2015	Reviewed portfolio, Hysingla Savings cards, Initial offer and Initiating primary PA Claim, said ok will respond accordingly.
PLPMDL0020000001	Cleveland Hts	OH	44118	5/19/2015	Reviewed portfolio of products, Hysingla Savings cards, Initial offer and Initiating primary PA Claim, said ok will respond accordingly.No new information learned on this call.
PLPMDL0020000001	Akron	OH	44305	5/19/2015	Introduced hysingla yo he pharmacist and tech. Explained he new trial offer for \$0 copay. Pharmacist said it makes good sense to so it that way and they are NOT using cover my meds but initiate the PA process and will do it that way for hysingla.
PLPMDL0020000001					
PLPMDL0020000001	Euclid	OH	44117	5/19/2015	Lunch. Dr Hysnays often times, he will get OxyContin or Butrans approved for the first 30 days for workers comp and then for the next refill, the product won't be covered and will require a trial of ER morphine before they can go back on branded product. Discussed commercially covered patients, on immediate release hydrocodone to Hysingla ER and details of how trial card should work.
PLPMDL0020000001					
PLPMDL0020000001	Euclid	OH	44119	5/19/2015	No new information learned on this call.
PLPMDL0020000001	Akron	OH	44333	5/19/2015	OxyContin-dr said working very well in his pts and has great coverage-asked when he converts over from Percocet and he said 4 tabs and I said perfect!; butrans-dr said it's becoming his favorite opioid to switch from low doses of opioids including tramadol-reminded about caresource and dr said he's looking for those pts
PLPMDL0020000001	BEDFORD	OH	44146	5/19/2015	No new information learned on this call.
PLPMDL0020000001	BEACHWOOD	OH	44122	5/19/2015	No new information learned on this call.
PLPMDL0020000001	Parma	OH	44129	5/19/2015	Reviewed Hysingla initiation and conversion with Myra. She thinks Doctor. Nickels should have let them know by now,that he supports the use of Hysingla in their practice, he is in vacation now. She asked about cost for patient compared to comparable Norco. We discussed a few scenarios. She said they write prescriptions for two weeks at a time, how would that affect the free month? She likes Hysingla for similar reason as butrans...to convince patients in chronic pain that ER meds should be considered
PLPMDL0020000001					
PLPMDL0020000001	Parma	OH	44129	5/19/2015	Myra happy I'm on Barry's team now-said she really likes butrans for her pts on low dose norco and nursing home pts-reminded her about caresource and she likes the coverage there-only working Tuesday's in Parma and still do nursing homes
PLPMDL0020000001					
PLPMDL0020000001	Independence	OH	44131	5/19/2015	No new information learned on this call.
PLPMDL0020000001	Akron	OH	44312	5/19/2015	Reminded dr of the hysingla program for tonight and dr said he can't make it and Every can't as well. I asked dr if he would be willing to do an in office presentation and he said that would be fine. Reminded dr of a Norco patients in pain around the clock as good candidates as long as they have private insurance.
PLPMDL0020000001					
PLPMDL0020000001	Bedford	OH	44146	5/19/2015	Doctor said that he will write Hysingla once it is covered on workers comp. until that happens he does write oxycontin and butrans.
PLPMDL0020000001	C. Falls	OH	44223	5/19/2015	Spoke with Cindy and Amanda the tech about the new Hysingla trial offer. Cindy said they have a patient of dr Ali's and tried the trial offer and it said NC card. Found out that the patient has Optum Rx with UHC and Hysingla is NOT covered. Amanda said she will let Glenn know.
PLPMDL0020000001					
PLPMDL0020000001	Euclid	OH	44132	5/19/2015	No new information learned on this call.
PLPMDL0020000001	Cleveland	OH	44104	5/19/2015	No new information learned on this call.
PLPMDL0020000001	Cuyahoga Falls	OH	44223	5/19/2015	No new information learned on this call.
PLPMDL0020000001	Parma	OH	44129	5/19/2015	No new information learned on this call.
PLPMDL0020000001	Cuyahoga Falls	OH	44223	5/19/2015	Lunch-Butrans-dr said its his go to pain medicine as he likes the patch concept with the elderly-is getting good coverage and good results; OxyContin-dr said he will use when switching from Percocet at low doses-usually 3 tabs-agreed great place and asked for continued prescriptions this week-dr said yes
PLPMDL0020000001					
PLPMDL0020000001	Cleveland	OH	44104	5/19/2015	Reviewed portfolio, Hysingla Savings cards, Initial offer and Initiating primary PA Claim, said ok will respond accordingly.No new information learned on this call.
PLPMDL0020000001	Akron	OH	44305	5/19/2015	Reminded dr of hysingla program this evening. Dr said he's not sure he is going to make it but will wait to see if he's running late in the afternoon. Told him to continue identifying Butrans candidates in pain around the clock on tramadol.
PLPMDL0020000001					
PLPMDL0020000001	Akron	OH	44333	5/19/2015	Butrans-saw with dr Drummond and she is getting most of the caresource pts with comprehensive pain management group-need to change to tier 4 as she is actively looking for pts
PLPMDL0020000001	Akron	OH	44310	5/19/2015	Good talk over lunch with dr and Shar. Discussed butrans opportunities and continuing to titrate patients to reach adequate analgesia. Discussed the Helen profile and asked him to back up Butrans for those in pain around the clock on Tramadol and move to Butrans before he would otherwise move to Norco. Discussed hysingla managed care opportunities with are Aetna, SummaCare, and Caremark. Dr said he's discussed with criteria from Anthem, MMO, and UHC. I told him to please focus on those plans as the path of least resistance and to also look at his few Tricare patients and identify them as candidates as long as they meet the indication.
PLPMDL0020000001					
PLPMDL0020000001	Barberton	OH	44203	5/19/2015	Not much time she had for me today. I asked her how processing trial cards, not vouchers work at the store. She didn't want to speak to me, I asked to then speak to the tech and she said I would have to come back when they weren't so busy. yet there was only one person in the waiting area.
PLPMDL0020000001	Beachwood	OH	44122	5/19/2015	She has a patient she is trying to get Hysingla covered....medical mutual. Reviewed formulary and appropriate patient type. She and doc are supporters of Hysingla but they see too many patients to have to deal with insurance rejections. They will continue with oxycontin since coverage for that is good now.
PLPMDL0020000001					
PLPMDL0020000001	Warrensville Heights	OH	44122	5/19/2015	Asked for one specific Hysingla patient using Phil and one specific butrans patient using Maria. He understood who the patient it, but his staff I too small to deal with prior authorizations.
PLPMDL0020000001	Barberton	OH	44203	5/19/2015	Dr said she doesn't like to deal with pa/s and she felt for her med d plans that she has more than she likes. I asked when was the last time she wrote oxycontin that required one. she only mentioned the one patient that is allergic to hydrocodone and needs oxycontin that she gets thru. I said is the pa hard to do or is just a pain? She said it takes time and she doesn't want to deal with it. I got her to admit that with the amount of ATC extended release opioids she writes, it must be a small percentage compared to other products. she did agree. Talked about what she likes about oxycontin and who does she write it for if anyone specific. She said she treats her chronic older over 65 pateitns with oxycontin and she won't write more than acute hydrocodone for the younger patients. I said how long is acute to you. She said under 6 months usually. I gave her the oxycodone insight and she wasn't surprised. I told her there would most likely this year be an opportunity to adjust a patietns medications to an extented release product, right. She said yes. I talked the entire time about one patient to offer it to...whether it be for butrans or hysingla. The doctor said schedule three for butrans doesn't mean much because she doesn't give out more than a month supply at once. I talked about med d coverage with butrans and oxycontin. The doctor was convinced that pa's exist more often then not. I highlighted silver schripts. Dr agreed that my products were an appropriate choice.
PLPMDL0020000001					
PLPMDL0020000001	Barberton	OH	44203	5/19/2015	Talked to the doctors nurse today. she said at my next lunch we would try to identify more candidates for hysingla. We talked about how busy the doctor is and how hard it is to remember a new product. I reminder her that the doctor gave me the ok to see him from time to time to remind him because of exactly that. highlighted the savings program and the trial of hysingla. I asked her to point out to the doctor the conversion and the 20 and 30mg hysingla lowest two doses.
PLPMDL0020000001	Barberton	OH	44203	5/19/2015	Talked about the family practice office closing down the street. We talked about who else do they not fill scripts for in the area. Dr Kim and Dr. Zewall was mentioned. We talked about abuse det properties and that it didn't mean it was impossible to abuse. Talked about all opioids have abuse poential including purdue products. reviewed dosing and a few attributes of each product. I asked why don't they give recommendations more often, she didn't really have an answer. Talked about the trial for hysingla. The tech seemed to know a bit more about coupons. I highlighted it needed to go thru insurance and it was not a free voucher.
PLPMDL0020000001					
PLPMDL0020000001	Cleveland	OH	44103	5/19/2015	Quick OxyContin/BUtrans reminder for those patients failing on present therapy requiring around the clock analgesia, Said ok, no new info learned
PLPMDL0020000001	Cuyahoga Falls	OH	44223	5/19/2015	Lunch-OxyContin-went over abuse deterrent study with dr and he said he feels comfortable prescribing if needs to switch from Percocet; butrans-dr said he finds it works best in elderly, pts with renal conditions, and pts with stomach disorders where swallowing is very difficult-dr said this past week he has put 6 pts on it!!
PLPMDL0020000001					
PLPMDL0020000001	Cleveland	OH	44118	5/19/2015	Quick review of OxyContin every 12hours along with Butrans for those patients failing on present therapy requiring around the clock analgesia, Said ok. referred to Dr. Harris.
PLPMDL0020000001	Westlake	OH	44145	5/20/2015	Talked about hysingla attributes. Asked if he had any approp norco patients he could offer this to. Dr would say much but smiled.
PLPMDL0020000001	Bedford	OH	44146	5/20/2015	Quick call letting him know about new savings card information. Pulled through butrans formulary sheet to reinforce the excellent coverage
PLPMDL0020000001	Fairview Park	OH	44126	5/20/2015	No new information learned on this call. Spoke to the staff about the trial of hysingla. Asked if he tried to write it yet but she didn't think he had.
PLPMDL0020000001	Cleveland	OH	44113	5/20/2015	Reviewed portfolio of products, appropriate patients, initiation/titration and formulary coverage/Savings/trial cards. Said ok will continue to prescribe and consider for appropriate patients that she can get covered.
PLPMDL0020000001	Cleveland	OH	44113	5/20/2015	Discussed portfolio of products, appropriate patients, initiation/titration and formulary coverage/Savings/trial cards. Said ok will continue to prescribe and consider for appropriate patients that she can get covered.
PLPMDL0020000001	Cleveland	OH	44113	5/20/2015	Discussed portfolio of products, appropriate patients, initiation/titration and formulary coverage/Savings/trial cards. Said ok will continue to prescribe and consider for appropriate patients that she can get covered on ins.
PLPMDL0020000001	Akron	OH	44333	5/20/2015	No new information learned on this call.
PLPMDL0020000001	Akron	OH	44313	5/20/2015	No new information learned on this call.
PLPMDL0020000001	akron	OH	44333	5/20/2015	Follow up with dr about his identification of patients for er opioids like oxycontin, Butrans and hysingla. Dr said he just has to be real specific as to when and why he's prescribing opioids because he doesn't want to be knows as providing all his pain patients with narcotics. Discussed partners against pain website and the resources he can use where appropriate.
PLPMDL0020000001	Akron	OH	44320	5/20/2015	No new information learned on this call.
PLPMDL0020000001	Cleveland	OH	44103	5/20/2015	No new information learned on this call.
PLPMDL0020000001	Cleveland	OH	44105	5/20/2015	Reviewed Hysingla free trial program with Abudul, No new information learned on this call.
PLPMDL0020000001	Cleveland	OH	44195	5/20/2015	No new information learned on this call.
PLPMDL0020000001	Lyndhurst	OH	44124	5/20/2015	No new information learned on this call.
PLPMDL0020000001	Stow	OH	44224	5/20/2015	Spoke to a fill in pharmacist as Jamie is on vacation. Introduced hysingla discussing attributes, dosing and conversions. Reviewed the new trial offer and how to run it. She said she will tell technicians and said Jamie will be back on Monday.
PLPMDL0020000001					
PLPMDL0020000001	Parma	OH	44134	5/20/2015	No new information learned on this call.
PLPMDL0020000001	Parma Heights	OH	44130	5/20/2015	No new information learned on this call.
PLPMDL0020000001	Westlake	OH	44145	5/20/2015	No new information learned on this call.
PLPMDL0020000001	South Euclid	OH	44121	5/20/2015	Window - quick call with med asst. Was able to secure, from a lunch cancel, a LUNCH tomorrow 5/21 Thurs in Concord. Discussed and left literature on all 3 single entity, extended release opioids, no acetaminophen and for patients with pain daily, around the clock, long term.
PLPMDL0020000001					

PPLPMDL0020000001	Lyndhurst	OH	44124	5/20/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	5/20/2015	No new information learned on this call. Dr was at the window and I didn't get a lot of time, I raised by hysingla material and I asked if I could give him new information. He said not today. Left materials w the staff and talked to them about the trial card.
PPLPMDL0020000001	Berea	OH	44017	5/20/2015	No new information learned on this call.
PPLPMDL0020000001	Lyndhurst	OH	44124	5/20/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	5/20/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	5/20/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	5/20/2015	Reviewed portfolio, confirmed appt for next Wed.
PPLPMDL0020000001	Bedford	OH	44146	5/20/2015	OxyContin-dr said coverage is great and so is product with his pts-reminded him when reaching 3 tabs to switch-dr said he's trying to switch earlier to control the amount of opioids the pts are taking; butrans-dr said he loves butrans and after reminding about huge caresource pt population dr said he will continue to look for pts not getting adequate pain relief from tramadol
PPLPMDL0020000001	Cleveland	OH	44195	5/20/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	5/20/2015	Worked with the staff today regarding identifying managed care coverage and hydrocodone patients coming intonthenoffice next week. Dr was not in today, the dr went in vacation till the first of June.
PPLPMDL0020000001	Cleveland	OH	44195	5/20/2015	No new information learned on this call.
PPLPMDL0020000001	Fairlawn	OH	44333	5/20/2015	Spike with Jessica and Sue about the new trial offer for hysingla. Jessica said she understands it how it will work and thinks it a great way for patients to get their medicine. Discussed hysingla copay card as well and managed care oaths of least resistance and told Jessica I will return on Friday if possible to discuss with Gilbert.
PPLPMDL0020000001	Cleveland	OH	44109	5/20/2015	Discussed portfolio along with Hysingla ER free trial program with RPH, no new information learned on this call.
PPLPMDL0020000001	Hudson	OH	44236	5/20/2015	No new information learned on this call.
PPLPMDL0020000001	Tallmadge	OH	44278	5/20/2015	No new information learned on this call.
PPLPMDL0020000001	Fairlawn	OH	44333	5/20/2015	Spoke with Jerry about hysingla and he said he sent his three strengths back because he had not dispensed it. I explained the new trial offer with hysingla and he said that's they it should be for all products and thinks it's and awesome idea and knows it will work. Jerry said he will explain it to the other pharmacist and the technician.
PPLPMDL0020000001	Cleveland	OH	44130	5/20/2015	No new information learned on this call.
PPLPMDL0020000001	Beachwood	OH	44122	5/20/2015	Quickly provided formulary grid through the window since she wasn't at lunch yesterday and updated her on savings program.
PPLPMDL0020000001	Beachwood	OH	44122	5/20/2015	Quick stop in to follow up on a couple of insurance issues they inquired about. Doctor said he found a patient this morning that he wanted to try Hysingla for but they were med mutual so he wasn't going to. I inquired into current/tried therapy. He wasn't positive. Let him know situation with med mutual but that other offices are getting scripts through on that plan.
PPLPMDL0020000001	Westlake	OH	44145	5/20/2015	No new information learned on this call.
PPLPMDL0020000001	South Euclid	OH	44121	5/20/2015	Lunch. Insight #19 delivered. Dr. Locke felt that number of 4g or more acetaminophen daily was high.. Led to my single entity, extended release products that contain NO acetaminophen! Dr Locke says he can think of a few hydrocodone patients that would be appropriate for conversion to Hysingla if pain persists. He also says he has male patient in mind, with chronic low back pain who is not doing well on low dose hydrocodone. OxyContin he's had success with in past. He agrees all 3 products have a place in his practice.
PPLPMDL0020000001	Parma	OH	44129	5/20/2015	Doctor Said he has given Hysingla some thought and he believes it is appropriate for some of his patients. Reviewed initiation and titration again along with managed care information and savings program. Doctor sai he will find a couple patients for Hysingla. He likes Butrans for a variety of patients. Oxycontin he would prefer not to prescribe, but insurance requires it more often than he would like.
PPLPMDL0020000001	South Euclid	OH	44121	5/20/2015	Lunch. Delivered insight #19. Dr. tomm thought the 4g or more daily of acetaminophen was high. Led to my single entity, extended release products with NO acetaminophen. He says he's had success recently with elderly/Butrans. He did NOT remember Butrans was CII and liked fact it could be called or faxed in with refills. He says he's had success with OxyContin in past. He was impressed with abuse deterrent properties for both Hysingla and OxyContin. He also stated he could think of a few patients on vicodin who if pain persists and BEFORE he titrates, he will consider Hysingla ER conversion.
PPLPMDL0020000001	Lakewood	OH	44107	5/21/2015	Continued the conversation from last visit. Dr shared the patients who he writes OxyContin for are typically those older who are not candidates for surgery but live in chronic pain. I asked what product does he usually use and he said OxyContin. I said are they typically being converted from Percocet. He said sometimes but not always. As we talked about hysingla, as an option for patients already on the hydrocodone molecule they had the option for hysingla if appropriate. Dr though this sounded like a great option. E office manager mentioned two patients w commercial insurance that the dr could try it on. Dr agreed. I spend some time reviewing the trial card with Beth and she said she would try it. I asked when those patient were coming in but she didn't know. I told her I would follow up next week.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/21/2015	Discussed all products reviewing oxycontin, hysingla and Butrans attributes, dosage and titration review, appropriate patients and copay cards with trial offers. Discussed the new trial offer with hysingla and ensured all physicians and their support staff was aware of the short term trial offer. Discussed Butrans copay cards and ability to get trial card from www.butrans.com. Continued to discuss where and when to use oxycontin and used Maggie profile. Followed up from program on Tuesday and Linda said that she is continuing to find lots of places for Butrans and is getting much more comfortable with hysingla.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/21/2015	Discussed all products reviewing oxycontin, hysingla and Butrans attributes, dosage and titration review, appropriate patients and copay cards with trial offers. Discussed the new trial offer with hysingla and ensured all physicians and their support staff was aware of the short term trial offer. Discussed Butrans copay cards and ability to get trial card from www.butrans.com. Continued to discuss where and when to use oxycontin and used Maggie profile. Dr did not offer any information on his thoughts of hysingla.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/21/2015	Discussed all products reviewing oxycontin, hysingla and Butrans attributes, dosage and titration review, appropriate patients and copay cards with trial offers. Discussed the new trial offer with hysingla and ensured all physicians and their support staff was aware of the short term trial offer. Discussed Butrans copay cards and ability to get trial card from www.butrans.com. Continued to discuss where and when to use oxycontin and used Maggie profile. Dr said he started a new patient on hysingla this week who had private insurance and really likes the q24 and continued to speak highly of Butrans especially in his patients with previous issues with oral
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/21/2015	Discussed all products reviewing oxycontin, hysingla and Butrans attributes, dosage and titration review, appropriate patients and copay cards with trial offers. Discussed the new trial offer with hysingla and ensured all physicians and their support staff was aware of the short term trial offer. Discussed Butrans copay cards and ability to get trial card from www.butrans.com. Continued to discuss where and when to use oxycontin and used Maggie profile. Dr said he is continuing to have success with Butrans and asked for higher doses as he has many who are maxed at 20mcg.
PPLPMDL0020000001	Garfield Hts	OH	44125	5/21/2015	Reviewed OxyContin every 12hours along with Hysingla for those patients failing on present therapy requiring around the clock analgesia, said ok will continue to consider for appropriate patients No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44125	5/21/2015	Reviewed OxyContin every 12hours along with Hysingla for those patients failing on present therapy requiring around the clock analgesia, said ok will continue to consider for appropriate patients No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44125	5/21/2015	Reviewed OxyContin every 12hours along with Hysingla for those patients failing on present therapy requiring around the clock analgesia, said ok will continue to consider for appropriate patients.
PPLPMDL0020000001	Tallmadge	OH	44278	5/21/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/21/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44109	5/21/2015	Reviewed portfolio, savings cards No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44109	5/21/2015	Reviewed portfolio along with savings cards
PPLPMDL0020000001	Akron	OH	44313	5/21/2015	Discussed hysingla with Matt he pharmacist and discussed he trial offer and how it works. Matt said its a great idea and will let his staff know. Discussed Butrans trail offer and the ability to get it off the website and Matt was glad I told him that.
PPLPMDL0020000001	Cleveland	OH	44130	5/21/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	5/21/2015	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	5/21/2015	Dr said , your back again. I said I was here to put hysingla on your radar for your jack trolled. Or of patients dr. He said leave me the information. Which I did.
PPLPMDL0020000001	Cleveland	OH	44111	5/21/2015	Grabbed her attention tegu the window and she came up. Highlighted hysingla and the meeting they promised me a while back. She directed me to office manager to schedule. We talked about how her current patients are doing on Butrans and if she remembered what molecule they were changed from. She couldn't remember. I highlighted a few areas like Tramadol, caresource.
PPLPMDL0020000001	Cleveland	OH	44130	5/21/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44111	5/21/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44109	5/21/2015	No new information learned on this call.
PPLPMDL0020000001	C. Falls	OH	44223	5/21/2015	Amanda told me that a patient cam in the other day with a script for Butrans and didn't have a copay card. She said she pulled a copay card they had ran the copay card and it came back NC. She said she called McKesson and they gave her a different group and ID number and the trial offer worked and was able to dispense 1 carton. She said she doesn't know wheny it was denied but will make a note that a different group number needs to be sum bitter in order for the patient to get 30days for free after the patient activates the card. I told her I will tell my manager about it and make him aware. Provided hysingla information again about the trial offer.
PPLPMDL0020000001	Cleveland	OH	44130	5/21/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44115	5/21/2015	No new information learned on this call.
PPLPMDL0020000001	Independence	OH	44131	5/21/2015	Using maira, asked him if there is any reason he would not choose butrans for an appropriate patient like maria in around the clock pain? He said the only reason would be if the patient didn't want a patch. He told me he likes that it is c3 and that he should write it....hr said he is staying away from c2 meds, referring to pain management so wouldn't be interested in hysings
PPLPMDL0020000001	Cleveland	OH	44115	5/21/2015	Reviewed portfolio and savings cards, No new information learned on this call.
PPLPMDL0020000001	Rocky river	OH	44116	5/21/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	5/21/2015	Quick chat where she promised she would talk to doctor nickels when he returns from vacation to get his thoughts on Hysingla. She has several people in mind for it. She does find herself choosing butrans for some patients because it's not a oil....
PPLPMDL0020000001	Middleburg Heights	OH	44130	5/21/2015	Trying to meet Julie, they asked for samples and information instead. This day, was the first time I was asked to wait and they were trying to get me a second to talk with doc and or Julie
PPLPMDL0020000001	Akron	OH	44333	5/21/2015	Quick discussion with dr about the new hysingla trial offer. I won't lined all the program specifics and asked him what he thought? Dr said he can tell I'm excited and said it sounds like a great way for patients to get the medicine at the time they bring the script to the pharmacy.
PPLPMDL0020000001	Lakewood	OH	44107	5/21/2015	Had an apt with the dr today. Discussed how hard or easy he felt it was to offer Butrans to those few caresource patients. The dr said it was easy and they had no trouble filling it. I said that is great news and asked for his commitment to write more Butrans for caresource patients who are appropriate. Spent time w the staff reviewing the oa process. A few new ppl in the office. Talked about hysingla attributes.
PPLPMDL0020000001	Middleburg Hts	OH	44130	5/21/2015	Talked with office manager who was trying to let me meet doc for a brief time after I reviewed my products with her but then they got very busy. She did want the sample.....

PPLPMDL0020000001	Cleveland	OH	44113	5/22/2015	Quick portfolio review, No new information learned on this call.
PPLPMDL0020000001	Garfield Hts	OH	44125	5/22/2015	Quick review of OxyContin formulary status along with Hysingla ER for those patients failing on present therapy requiring around the clock analgesia. Formulary opportunities. Said ok will continue to consider for appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44113	5/22/2015	No new information learned on this call.
PPLPMDL0020000001	Garfield Hts	OH	44125	5/22/2015	No new information learned on this call.
PPLPMDL0020000001	Copley	OH	44321	5/22/2015	No new information learned on this call.
PPLPMDL0020000001	Uniontown	OH	44312	5/22/2015	No new information learned on this call.
PPLPMDL0020000001	Tallmadge	OH	44278	5/22/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44125	5/22/2015	Reviewed portfolio, savings cards and formulary opportunities, No new information learned on this call.
PPLPMDL0020000001	Garfield Heights	OH	44125	5/22/2015	Reviewed portfolio, savings cards, No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44103	5/22/2015	Reviewed portfolio, savings cards, said she will relay info to Rph mgr. No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44125	5/22/2015	Reviewed portfolio, formulary opportunities, no new information learned on this call.
PPLPMDL0020000001	Hudson	OH	44236	5/22/2015	No new information learned on this call.
PPLPMDL0020000001	Stow	OH	44224	5/22/2015	Explained the new hysingla trial offer with Andrea and discussed how she would process it as a score claim. Andrea said she hasn't filled any yet but said that it's a great benefit to the patient and has never seen it from any other product.
PPLPMDL0020000001	Stow	OH	44224	5/22/2015	Short discussion at the window about Butrans and hysingla attributes and how he can use both products for different segments of his patient population. Reviewed Helen for Butrans and then discussed how hysingla is ideally suited for those on Norco around the clock and ask for the next dose. Dr said it makes sense but knows it's going to be tough to get covered. I told dr to just write it for commercial insurance and to let me know if you ever have questions about coverage.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/26/2015	Lunch appointment with all prescribers and detailed hysingla ER attributes, dosing and conversions. Detailed the mean hydrocodone concentration graph from MVA. Discussed managed care opportunities with cvs Caremark SummaCare and ESI. Reviewed trial offer specifics and how it would give them extended time to process a OA if their is one while he patient already has a 30 day supply. Discussed Butrans attributes, conversions and use in patients who are in pain around the clock on tramadol. Dr said that he thinks hysingla is a good idea and it makes sense and will try to find a few parents.
PPLPMDL0020000001	University Hts	OH	44118	5/26/2015	Quick review of Hysingla ER formulary opportunities and savings cards. said ok will continue to keep in mind for appropriate patients.
PPLPMDL0020000001	Mayfield Heights	OH	44124	5/26/2015	Hallway call. Asked Dr Anna about female patient she placed on Hysingla ER 20 mg. She says patient has not called back and that she sees her monthly. Dr. Anna assumes all is well with Hysingla ER as she has not received call back from patient.
PPLPMDL0020000001	Cleveland	OH	44125	5/26/2015	Reviewed Hysingla ER trial cards w/ Joshua no new info learned
PPLPMDL0020000001	Akron	OH	44310	5/26/2015	Followed up with dr and Shar about hysingla trial offer and the details surrounding it. Dr said he understands it and wanted to make sure if explaining it to all the pharmacies. I told dr that I am explaining it to as many as possible. Dr said it will make a big difference. Told dr to please continue identifying Butrans patients.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/26/2015	Discussed the new hysingla trial offer with the technician Tonya. Reviewed all the parts of the process and she said she has not seen it. Reviewed the attributes, dosing and conversions. I asked Tonya if she would disseminate the information to her pharmacists? Tonya said she will and thinks it's a great idea.
PPLPMDL0020000001	Cleveland Hts	OH	44118	5/26/2015	Reviewed Hysingla ER trial card program with tech, will relay info to RPH
PPLPMDL0020000001	Cleveland	OH	44125	5/26/2015	Reviewed Hysingla ER trial card w/tech, Will relay info to RPH
PPLPMDL0020000001	Mayfield Heights	OH	44124	5/26/2015	Met with pharmacist Kelly. She hasn't dispensed any Hysingla ER yet. She did get script recently for Zohydro (next visit ask which hcp (s) wrote Zohydro. Discussed updates to free 30-day trial for Hysingla and how card should work/what patients need to do as well, to ensure trial offer works.
PPLPMDL0020000001	Westlake	OH	44145	5/26/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	5/26/2015	Spoke with the pharmacist Mary who said the day after a holiday is not a good time to call on a pharmacy. I told her the information is extremely important and then proceeded to explain the trial card offer. Mary said with all the PAs they have to do this is great news because the patient can get their medicine out of the gate and admitted that it was good that I showed up today. Mary said she will explain the process with the other
PPLPMDL0020000001	Lyndhurst	OH	44124	5/26/2015	Window Call. Dr Goldner not in. Discussed with prior auth coordinator, details of the Hysingla ER free trial offer.
PPLPMDL0020000001	Mayfield Heights	OH	44124	5/26/2015	Met with owner/pharmacy mgr Warren. Let him know what we need him to do and steps he needs to take to ensure new free trial offer works properly for patients; especially Dr. Laham patients. Warren says he's been getting a few Hysingla scripts each week from Dr. Laham. Further, Warren says automatic point of sale savings has been working great. Discussed Dr Laham female patient on 30 mg Hysingla. Warren confirmed that patient has very high deductible and that's why, even after applying Hysingla ER savings card; patient will still pay \$191 per month for Hysingla.
PPLPMDL0020000001	Westlake	OH	44145	5/26/2015	New approach. Spent time asking about how they feel about me coming so much. I explained how important the office is to me and trying to create a nice balance. The office manager and nurse seems receptive to my conversation.
PPLPMDL0020000001	Berea	OH	44017	5/26/2015	Talked about his experience w hysingla at this point. Which was nothing. Then I asked what one thing is holding him back. He said patient. I said I would focus on norco to hysingla w commercial patients. Is that a helpful reminders I that he remembers who is appropriate and he said yes.
PPLPMDL0020000001	Mayfield Hts	OH	44124	5/26/2015	Dr. Laham states a female patient, whom he wrote Hysingla ER 30 mg for, has a high deductible, and even WITH Hysingla ER savings card, the patient must pay \$191 monthly. Dr. Laham says she's going to "bite the bullet" and pay the \$191. Discussed that that patient is not the norm, and typically after using Hysingla savings, patients won't pay that much out of pocket. Reinforced free trial offer for hysingla. Met with prior auth coordinator Denise Guinto to discuss new free trial offer for Hysingla. Promised Denise we would meet with pharmacist Warren Friedman and present same free trial specifics.
PPLPMDL0020000001	Mayfield Heights	OH	44124	5/26/2015	Pharmacy Mgr, Diana Buch, moved to this store recently from Rite Aid Chardon. She states that this Mar's location does not dispense many extended release opioids. She has zero inventory of my products. Left Hysingla ER literature. Discussed new free trial offer for Hysingla ER with Diana.
PPLPMDL0020000001	Lyndhurst	OH	44124	5/26/2015	Impromptu lunch. Met new prior auth coordinator/LPN Diana - she will complete most prior auth's. Shannon will now complete all prior auth's for Botox. Informed Dr. Reed of new free trial offer for Hysingla. Reviewed dosing and conversion. She feels new trial offer will be helpful.
PPLPMDL0020000001	Lyndhurst	OH	44124	5/26/2015	Impromptu lunch. Dr. Roda states that she has never been a fan of extended release opioids. She will write Percocet or short acting, but that's where she stops. Patients who need extended release opioids will typically be referred to Dr. Reed. Found out that Shannon (med asst) is doing all prior auth's for botox procedures. Met new LPN, prior auth coordinator: Diana Collins.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/26/2015	Lunch appointment with all prescribers and detailed hysingla ER attributes, dosing and conversions. Detailed the mean hydrocodone concentration graph from MVA. Discussed managed care opportunities with cvs Caremark SummaCare and ESI. Reviewed trial offer specifics and how it would give them extended time to process a PA if their is one while he patient already has a 30 day supply. Discussed Butrans attributes, conversions and use in patients who are in pain around the clock on tramadol. Dr said he will write it and said he has plenty of patients on Norco who he could convert and likes the 1:1 conversion and q24.
PPLPMDL0020000001	Garfield Heights	OH	44125	5/26/2015	No new information learned on this call.
PPLPMDL0020000001	Lyndhurst	OH	44124	5/26/2015	Impromptu lunch. Karen says she rarely refills extended release opioids; nor can she initiate any CII narcotics, as she must write under Dr. Reed. When a patient needs a schedule II or above narcotic, Karen will refer patient to Dr. Reed. I asked Karen if she can initiate a CII or CIII such as Butrans and she says yes. I asked her to keep Butrans in mind after Tramadol, since she can call/fax in Butrans with refills.
PPLPMDL0020000001	Akron	OH	44305	5/26/2015	Quick explanation of hysingla ER trial offer to dr and Tina his office manager. I told dr he just needs to identify working patients who have SummaCare, Caremark and ESI. Dr said it's a good idea. Told him to continue identifying Butrans patients who are in pain around the clock on tramadol.
PPLPMDL0020000001	Westlake	OH	44145	5/26/2015	OxyContin-dr is trying to switch at 4 tabs as much as possible and sometimes difficult when coming in on 6-8 Percocets from referrals-reminded of 7 strengths to make it switch from any dose; butrans-dr said he finds he and his partners are prescribing more because it's a nice transition from tramadol-agreed and went over coverage
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/26/2015	Lunch appointment with all prescribers and detailed hysingla ER attributes, dosing and conversions. Detailed the mean hydrocodone concentration graph from MVA. Discussed managed care opportunities with cvs Caremark SummaCare and ESI. Reviewed trial offer specifics and how it would give them extended time to process a OA if their is one while he patient already has a 30 day supply. Discussed Butrans attributes, conversions and use in patients who are in pain around the clock on tramadol. Dr said that he minks hysingla is a great idea and a lot will depend on cost and the time it takes to process the PAs.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/26/2015	Lunch appointment with all prescribers and detailed hysingla ER attributes, dosing and conversions. Detailed the mean hydrocodone concentration graph from MVA. Discussed managed care opportunities with cvs Caremark SummaCare and ESI. Reviewed trial offer specifics and how it would give them extended time to process a OA if their is one while he patient already has a 30 day supply. Discussed Butrans attributes, conversions and use in patients who are in pain around the clock on tramadol. Dr said he's just really concerned about the cost of new products and how difficult they are to get covered. I told dr to stick to cvs Caremark and ESI along with Kim said she couldn't believe I came to see her today based on how busy they are whoever said she will listen as she works. I reviewed the hysingla ER trial offer and told her its for a limited time. Kim said then it's a TRUE trial offer and I told her yes and she said that's a good move for the company and knows to run a secondary claim.
PPLPMDL0020000001	Uniontown	OH	44685	5/26/2015	Quick review of Hysingla ER for those patients failing on present therapy requiring around the clock analgesia, formulary opportunities, OxyContin every 12 hours, said ok.
PPLPMDL0020000001	Cleveland	OH	44103	5/26/2015	Saw np in hallway of hospital. We talked about Butrans and hysingla. Np said she wrote some, ml asked if she choose it or if dr. Kabbara recommended it. She said she recommended it but did have the conversation before they switched the medication. We talked about rotation of patch for Butrans and coverage managed care. Talked about hysingla managed care and conversion.
PPLPMDL0020000001	Westlake	OH	44145	5/27/2015	Discussed conversion of hysingla and the uncontrolled norco patients insured. I didn't have a lot of time as I was standing at counter and dr was grabbing a chart and walking to a room to see a patient.
PPLPMDL0020000001	Beachwood	OH	44122	5/27/2015	Quickly reviewed new savings card information. He believes that this should make the process go more smoothly. He can try patients on the med for free without delay. Reviewed with his nurse Vicki too.
PPLPMDL0020000001	Westlake	OH	44145	5/27/2015	Dr on vacation. Spoke w terra about appropriate patients for Butrans and hysingla.
PPLPMDL0020000001	Cleveland	OH	44195	5/27/2015	Reviewed portfolio of products for those patients that are failing on present therapy requiring around the clock analgesia, savings cards, formulary opportunities, said ok will consider for appropriate patients
PPLPMDL0020000001	Akron	OH	44320	5/27/2015	Monique said sh write another Butrans for a patient with Anthem and there is a PA and wanted to know why. I asked about prior failures and sh said the patient has intolerance to almost all oral opioids and even NSAIDs. I told her she needs to work with Val to make sure the PA form for anthem is filled out correctly. Monique said that makes sense and will put everything on it.m reminded her about the Helen profile and to continue identifying appropriate patients. Reminded of hysingla attributes and dosing with conversions.
PPLPMDL0020000001	Cleveland	OH	44195	5/27/2015	Reviewed portfolio of products for those patients that are failing on present therapy requiring around the clock analgesia, savings cards, formulary opportunities, said ok will continue to consider and prescribe for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44113	5/27/2015	Reviewed Hysingla ER/Butrans for those patients that are failing on present therapy requiring around the clock analgesia, savings cards, formulary opportunities, said ok will continue to consider for appropriate patients that she can get covered on ins.

PPLPMDL0020000001	Cleveland	OH	44113	5/27/2015	Reviewed Hysingla ER/Butrans for those patients that are failing on present therapy requiring around the clock analgesia, savings cards, formulary opportunities, said ok will continue to consider for appropriate patients that she can get covered on ins.
PPLPMDL0020000001	Beachwood	OH	44122	5/27/2015	Quickly reviewed new saving program with Roberta and staff. Roberta is trying to find appropriate patients for Hysingla because she believes it is a good med.
PPLPMDL0020000001	Akron	OH	44313	5/27/2015	OxyContin-went over formulary grid and agreed good coverage; butrans-went over again care source tramadol patients and soft prior authorization-dr agreed to prescribe for one patient
PPLPMDL0020000001	CLEVELAND	OH	44195	5/27/2015	Reviewed Hysingla ER trial card with tech, No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	5/27/2015	Left info for Palliative Med team members, No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	5/27/2015	Visited pain mgmnt dept, IM, portfolio info delivered, No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	5/27/2015	Visited Pain mgmnt dept, info and presentations, No new information learned on this call.
PPLPMDL0020000001	Woodmere	OH	44122	5/27/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	5/27/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44320	5/27/2015	No new information learned on this call.
PPLPMDL0020000001	Stow	OH	44224	5/27/2015	No new information learned on this call.
PPLPMDL0020000001	Solon	OH	44139	5/27/2015	Quick call. Reviewed butrans savings program and free month. He said they have a few patients on butrans with good success. He has tried to write Hysingla two times but it wasn't approved. I asked to call me next time.
PPLPMDL0020000001					Reviewed commercial coverage and new savings program.
PPLPMDL0020000001	Westlake	OH	44145	5/27/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	5/27/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	5/27/2015	Explained the hysingla trial offer to elise and told her after our last conversation about the issues she's having with the time it's taking for prior authorizations this new program will help her. Told her it only goes through mid August so use it and stick to the plans we've discussed. Elise said she's happy to hear that and will continue to try and get it approved. I told her I will talk with Caci and abrittany about this trial offer and how it works.
PPLPMDL0020000001	Akron	OH	44307	5/27/2015	No new information learned on this call.
PPLPMDL0020000001	Bedford	OH	44146	5/27/2015	Reviewed savings program with doctor and Marian. They think it should make it a tad bit better than how it was.
PPLPMDL0020000001	Cleveland	OH	44195	5/27/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	5/27/2015	Dr talked about trying to refer patients out but patients don't like being treated by the pain doctors. Dr talked about uh and their policy for checking Ors and so forth. Dr talked about acute and chronic pain patients in her practice. She said she tried to refer out before they need chronic atc care but it doesn't always happen. Dr hasn't offered Butrans or hysingla. I asked what was holding her back? She said she. Hoses generic first. I talked abtunthential w Hysigla. And Butrans savings program. She was surprised the coverage for butrans. I asked the dr to offer Butrans or hysingla if appropriate to gain experience. She agreed.
PPLPMDL0020000001	Cleveland	OH	44109	5/27/2015	Reviewed Hysingla ER trial card and PA with tech, No new information learned on this call.
PPLPMDL0020000001	Beachwood	OH	44122	5/27/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44320	5/27/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/27/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	5/27/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44312	5/27/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	5/27/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44312	5/27/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	5/27/2015	Reviewed managed care and trial card w dr. Yonan. Tied in caresource w Butrans.
PPLPMDL0020000001	Stow	OH	44224	5/27/2015	Spoke with Jamie the pharmacist and explained the new trial offer with hysingla. Jamie said that's a smart idea and currently has 3 patients on it and they are all on the 20mg. Reviewed the new copay card for Butrans and the trial cards from Butrans.com. Jamie said she likes both hysingla and Butrans because she perceives them as low for abuse and misuse. I told her that's good to hear but ALL opioids can be misused or abused.
PPLPMDL0020000001	fairview park	OH	44111	5/27/2015	Tried to gather information on how they redeem coupons and trail cards. They said it was a separate form on the computer. Talked about dosing and conversion of hysingla from norco. Also talked about abuse deter properties. And gave fair balance on abuse potential for all opioids.
PPLPMDL0020000001	Westlake	OH	44145	5/27/2015	Used our previous conversation as part of the opening discussion. Talked about his familiarity w OxyCotin. Dr was very comfortable w the molecule and dosing. Dr also uses OxyCotin for his older older patients. I asked about his non Medicare part d patients w atc pain. Dr said he had some. I asked if he had objections to offering to his patients. He said no but they don't like once a day. We talked about doing what he felt was right and that worked with in his style. Dr agreed to offer it to his patients but he will not push it if they refuse. Reviewed trial card. Discussed Butrans too. Dr told me he got rid of 20 patients on oxycotin and other medications that were chronic. Dr said he has too many pain patients. We talked about treating patients he trusts w Purdue products and who are appropriate.
PPLPMDL0020000001	Westlake	OH	44145	5/27/2015	Talked about savings cards and tried to figure out the process they had for taking our trial cards. Unfortunately they were so busy they asked me to come back. I highlighted the products, gave my card.
PPLPMDL0020000001	Bedford	OH	44146	5/27/2015	Lunch-OxyContin- dr said he transitions from Percocet now at 1-2 tabs because once his patients go to higher dose counts he can't get them down-if they request more he will tell them no and go somewhere else-went over great coverage with him and dr said he's had no problems; butrans-again will switch from tramadol or low dose Percocet/Norco and even if patients are on 4-6 Norco and can't get Hysingla approved will switch to butrans
PPLPMDL0020000001	Norton	OH	44203	5/28/2015	no information learned
PPLPMDL0020000001	Cleveland	OH	44113	5/28/2015	Reviewed w/Melissa Hysingla ER Formulary grids and strategy on identifying appropriate patients that have ins. coverage. Said ok will implement
PPLPMDL0020000001	Cleveland	OH	44114	5/28/2015	Reviewed Hysingla ER formulary opportunities, also discussed portfolio of products that are appropriate for those patients that are failing on present therapy requiring around the clock analgesia. Said Ok will continue to consider and prescribe for appropriate patients that he can get covered under ins. plans.
PPLPMDL0020000001	Cleveland	OH	44113	5/28/2015	Discussed Hysingla ER and identifying appropriate patients that have coverage. Trial card offer and opportunities with ins. coverage. Reiewed Butrans for those patients requiring around the clock analgesia that are failing on present therapy. Said ok will continue to consider/prescribe for appropriate patients that she can get covered.
PPLPMDL0020000001	Cleveland	OH	44114	5/28/2015	Reviewed Hysingla ER formulary opportunities, also discussed portfolio of products that are appropriate for those patients that are failing on present therapy requiring around the clock analgesia. Said Ok will continue to consider for appropriate patients.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/28/2015	No new information learned on this call.
PPLPMDL0020000001	Tallmadge	OH	44278	5/28/2015	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	5/28/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	5/28/2015	No new information learned on this call.
PPLPMDL0020000001	Green	OH	44232	5/28/2015	Spoke with Jenna and explained the new trial card offer for hysingla and Jenna said they haven't seen any prescriptions yet but thinks it's a great idea.
PPLPMDL0020000001	Lakewood	OH	44107	5/28/2015	No new information learned on this call.
PPLPMDL0020000001	Valley View	OH	44125	5/28/2015	No new information learned on this call.
PPLPMDL0020000001	Stow	OH	44224	5/28/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	5/28/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44134	5/28/2015	No new information learned on this call.
PPLPMDL0020000001	Broadview Heights	OH	44147	5/28/2015	No new information learned on this call.
PPLPMDL0020000001	Broadview Heights	OH	44147	5/28/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	5/28/2015	No new information learned on this call.
PPLPMDL0020000001	Independence	OH	44131	5/28/2015	No new information learned on this call.
PPLPMDL0020000001	Barberton	OH	44203	5/28/2015	Highlighted putting hysingla on her radar for the appropatre norco patient that needs an extended release opiod. I didn't get more in cause she was at the window today and then grabbed a chart and walked away.
PPLPMDL0020000001	Tallmadge	OH	44278	5/28/2015	No new information learned on this call.
PPLPMDL0020000001	Tallmadge	OH	44278	5/28/2015	Spoke with Ray the pharmacist and explained the new trial card process. Ray said that once the primary claim is declined that the script stops cold there and they need to call a tech support number to open up a secondary claim in order to run the trial offer and dispense the 30 days. Ray said it may take an extra 10 minutes. I told him that I was not aware of that situation and have not been told by other rite aid pharmacists. I asked Ray if he would invest the time to so that and he said yes.
PPLPMDL0020000001	Independence	OH	44131	5/28/2015	Doctor said he likes tablets better than patches. He likes butrans because of the scheduling and that it is something different, he likes Hysingla because of the once daily dosing. He has two patients he wants to try for Hysingla. I reviewed formulary And savings program. He wished that Hydrocodone is still a c3. Butrans he will keep in mind especially for patients he is referring to pain management, he likes the idea of referring them to pain management on butrans.
PPLPMDL0020000001	Independence	OH	44131	5/28/2015	Quickly reviewed portfolio piece and new Hysingla information and savings program. He was upset with a patient and He didn't want to be engaged. He gave no commitment, but thanked me for the information
PPLPMDL0020000001	Cleveland	OH	44115	5/28/2015	Reviewed w/George Hysingla ER Trial card program along with Butrans formulary opportunities. Said ok will order accordingly
PPLPMDL0020000001	Parma	OH	44129	5/28/2015	Laura got confirmation email from Doctor nickels last night that it is ok to prescribe Hysingla. She has a few patients in mind already and is excited to try it. Reviewed initiation, titration, formulary and new savings program.
PPLPMDL0020000001	Stow	OH	44224	5/28/2015	Reviewed information with Zani and Karen also. Butrans she will use for patients before Norco ideally. Hysingla she thinks she will use if they are needing more than 30-40 Norco per day.
PPLPMDL0020000001	Barberton	OH	44203	5/28/2015	Told dr that I wanted to follow up on the 2 hysingla scripts she write that required PAs. Told her that there is a new trial offer available and dr said I should speak to Nay and that's she's way behind. Nay said to come back tomorrow and she will have a few minutes.
PPLPMDL0020000001	Independence	OH	44131	5/28/2015	Reviewed Hysingla. Dr said the reason he hasn't written it is because it doesn't come to mind. Reviewed attributes and I paused and checked in to see if he had questions or concerns at this point. He said no. Went into conversion- he thought that was easy to understand. I asked if instead of adding another short acting hydrocodone, if appropriate he could offer Hysingla instead. Dr said maybe. Covered insurance and trial card. Also talked about oxycotin and butrans...but hysingla was the man discussion today.
PPLPMDL0020000001	Independence	OH	44131	5/28/2015	Quickly reviewed new saving card process. He shared with me that they have written it for Medicare patients and it was denied. Reviewed commercial patient and specific plan to target for initial success. He will stick with those, but it limits where he want to use it. He appreciated the updated information.



PPLPMDL0020000001	Lakewood	OH	44107	5/28/2015	U -dr said he's reducing the amount of Percocet for breakthrough pain when switching to OxyContin-dr said he usually tries the switch at 3 tabs because he doesn't want to prescribe high amounts to patients-agreed good place to switch; butrans-dr said he now has 4-5 patients on it and all are caresource coverage-dr said he's had no problems with the prior authorization and I asked him to continue to look for patients on tramadol to switch-dr
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/28/2015	Told dr I wanted him to convert more IR oxycodone or percocet patients to q12 oxycotin. I asked him to please consider hysingla as yet another option to convert his IR opioid patients who are in pain around the clock to.
	Barberton	OH	44203	5/28/2015	Talked about his commitment to try hysingla and reviewed what happen that no one got their script filled. Turns out the doctor didn't offer it. He gave several reasons why....remembering, concern of cost, worry that the patient won't be happy with a once a day product. All in all, the dr agreed that it was himself holding himself back from offering to a patient. We reviewed indication and the changes to treating pain patietns and he kept coming back to writing butrans and oxycotin. I aske dhow different is it really than oxycotin? After he thought about it he stated it wasn't. I saidhow did you convince the several patietns tomove from tramadol to butrans? He said it wasn't so hard. I said so why do you think they will put up a bigger fight for hysingla? We reviewed several attributes and trial and savings cards. Dr agreed that for the right patient he will try again to find someone
PPLPMDL0020000001	Highland Heights	OH	44143	5/28/2015	Lunch. Provided updated 30 day free trial information to staff and specifically, Marianne, prior authorization coordinator. communicated to Marianne the commercial plans that do NOT require a prior auth for Hysingla ER: TriCare, Cigna Commercial, Medco, Express Scripts and CVS Caremark. She agreed to make sure to tell patients to activate their cards PRIOR to going to the pharmacy. She also agreed it's a good idea for Dr. Salama to write for a few extra days of current therapy, to hold patient over until their strength of Hysingla ER arrives at pharmacy. Dr Salama agreed to all, said he would start writing Hysingla ER for commercial plans we discussed. Reviewed dosing (Q24 h), abuse deterrent properties, no acetaminophen, strengths, focusing on 20, 30 and 40 mg. I let he and Marianne know I would follow up next week on this commitment. Provided Marianne additional green/Protect your Meads at Home brochures; she places them in each patient room. She stated they are of value to the office/continue to bring more copies.
PPLPMDL0020000001					No new information learned on this call.
PPLPMDL0020000001	Fairview Park	OH	44126	5/29/2015	Reviewed Hysingla/Butrans formulary status and identifying appropriate patients. Said ok will continue to consider/prescribe for appropriate patients that she can get covered
PPLPMDL0020000001	Cleveland	OH	44113	5/29/2015	Reviewed OxyContin/Hysingla ER for those patients requiring around the clock analgesia, Said ok will continue to consider and prescribe for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44195	5/29/2015	Reviewed Hysingla/Butrans formulary status and identifying appropriate patients. Said ok will continue to consider/prescribe for appropriate patients that she can get covered.
PPLPMDL0020000001	Cleveland	OH	44113	5/29/2015	Reviewed Hysingla/Butrans formulary status and identifying appropriate patients. Said ok will continue to consider/prescribe for appropriate patients that she can get covered.
PPLPMDL0020000001	Cleveland	OH	44113	5/29/2015	Reviewed Hysingla/Butrans formulary status and identifying appropriate patients. Said ok will continue to consider/prescribe for appropriate patients that she can get covered.
PPLPMDL0020000001	Westlake	OH	44145	5/29/2015	followed up from previous discussion regarding their commitment to try hysingla which they didn't yet. When asked what was the problem or hesitation....the doctor told me it doesn't come to mind. I said not even with my materials I leave? He said no. Highlighted the appropriate patient and checked in with him to see his thoughts. Dr talked and said he can't think of manypatient she has but the one patient on caresource that might be appropriate. After the review, the doctor actually found Butrans to be a better fit for that caresource patient. I asked what about it he likes and doesn't like? Managed care came up and once a day came up. Highlighted coverage, reviewed the trial card. Asked him to offer it to one patient. Dr agreed to try one patient. I hande dhim a conversion card with my business card. As a reminder I asked him to set it on his desk. The doctor started to hand it back to me and say he will remember and I handed it only to him and said you just told me you keep forgetting. I asked him to use it for one patient and tell me know it goes in the next few weeks. he said ok.
PPLPMDL0020000001	westlake	OH	44145	5/29/2015	Discussed her experine with pain patients so far. She said she only has a few pain patients and she explained their disease state. I asked what she would potentially do if they said they were not controlled with their current dosing. she said she would run an ores. I said don't you already run an ores- she said no but she is supposed to check after 7 days accorid to uh. And then she said if they appear to be ok via ores she will give them something. I said what would you give them? she really didn't know she said as a resident they aren't trained on treating pain. I went back to the indication and a few limiations of use like not for acute pain. Also reviewed the primary care insight. After review the doctor was open to butrans or hysingla givin they were appropriate and not acute for it.
PPLPMDL0020000001	CLEVELAND	OH	44195	5/29/2015	Reviewed trial offer along with stocking of Hysingla ER. OxyContin utilization and savings cards. Said ok will order accordingly
PPLPMDL0020000001	Cleveland	OH	44195	5/29/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	5/29/2015	Reviewed butrans managed care via medical mutal and caresource coverage. I asked her what she needed to know from me regarding butrans. Rotation of the patch location was mentioned. I highlighted this informaiton and used the visual aid as reference. I asked her if she felt hesitant for any reason offering butrans and she said no. I said how about offering hysingla. She had nothing to say. She couldn't remember what hysingla is and how its dosed so I reviewed those attributes and reviewed the trial card.
PPLPMDL0020000001	Hudson	OH	44236	5/29/2015	Spoke with the pharmacist Galiana about hysingla attributes and conversions. Discussed the new trial offer. She said that her system may not allow her to run the trial as a secondary claim but should b able to run as primary. She said she will try it and let me know. Galiana said that it makes sense and thinks it's a great offer.
PPLPMDL0020000001	Cleveland	OH	44107	5/29/2015	Tried to learn about their process for implementing trial cards. They said they do it all the time. I gave them the hysingla conversation and highlighted a few attributes. I asked them to stock but they said no. They didn't see any scripts come thru his week for hysingla.
PPLPMDL0020000001	Stow	OH	44224	5/29/2015	Quick introduction of hysingla and discussed attributes, dosing and conversions. Dr said it wouldns like a great medicine but said he probably won't use it because Unity wants them to refer pain patients after 90 days. I told him I understand and asked if Butrans is more of a viable option for him and reminded him it's a schedule 3? Dr said it would be for sure.
PPLPMDL0020000001	Cleveland	OH	44111	5/29/2015	Reviewed hysingla and attributes. I asked what his thoughts were regarding the once a day and they said it was good. I asked if he thought doctors would write it and he said it depends on managed care. I reviewed the trial card. I asked how it works with their store pricessing the cards since it was a trial and not a voucher. he said they do it all the time.
PPLPMDL0020000001	Maple Heights	OH	44137	5/29/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44111	5/29/2015	Quick introduction to dr and staff-dr apologized for not having time to talk and said to try to catch him next time around-I said I understand and want to talk to him next time about switching earlier from Percocet to OxyContin and dr said ok
PPLPMDL0020000001	Cleveland Hts	OH	44118	5/29/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44106	5/29/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	5/29/2015	No new information learned on this call.
PPLPMDL0020000001	Warrensville Heights	OH	44122	5/29/2015	Quickly reviewed what Hysingla and oxycotin have in common....number of doses, ADP, patients in around the clock pain....Used portfolio piece. He has more options now for patients in around the clock pain. He said he uses oxycotin and there may be a place for Hysingla too. Reviewed formulary and new savings program to him and staff.
PPLPMDL0020000001	Akron	OH	44312	5/29/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44312	5/29/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44312	5/29/2015	Quick message in hallway about hysingla trial offer and discussed Noco around the clock. Dr said it sounds like a great idea and will try to find a few patients. Told dr to keep Butrans on his radar for his tramadol patients.
PPLPMDL0020000001	Cleveland	OH	44130	5/29/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	5/29/2015	No new information learned on this call.
PPLPMDL0020000001	Fairlawn	OH	44333	5/29/2015	Confirmed with Sue and Jessica the process they need to take in order for a patients to get 30 days with the new trial offer. Jessica said that it's rare that she would have to call tech support in order to run e card as a doc day claim.
PPLPMDL0020000001	Parma	OH	44129	5/29/2015	Using Phil, asked doctor if he has patient like this and would he consider Hysingla for one patient similar to him? He said he will find ONE.
PPLPMDL0020000001	Parma	OH	44129	5/29/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44313	5/29/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44115	5/29/2015	Visited pain mgmnt/Ortho dept. (Nickels/Ravakah Keppler )Hysingla/OxyContin and Butrans info.
PPLPMDL0020000001	Cleveland	OH	44115	5/29/2015	Reviewed Hysingla ER Trial card offer with George. Said ok will fill and order accordingly
PPLPMDL0020000001	Parma	OH	44129	5/29/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	5/29/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	5/29/2015	Dr said that he write 2 Hysingla scripts his week and each of them went through. Dr said both were on Norco and he thought one was Asetna and the other was SummaCare and had to do a peer to peer to get one approved. I told dr I am so glad he has clinical confidence in my products. Dr said he will continue to write and Butrans and really likes the option of a week long patch. Dr said that they will be opening an office in green soon and dr David McIntyre from UH who he trained under is coming to the practice. Dr said he told him which products he uses and why. I asked dr for continued prescribing.
PPLPMDL0020000001	Parma	OH	44129	5/29/2015	No new information learned on this call.
PPLPMDL0020000001	westlake	OH	44145	5/29/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	5/29/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	5/29/2015	discussed butrans, which she said she was familiar with. I asked about her nursing home experine with butrans. She said she hasn't used it there yet. I asked if there was any specific reason. she said no. we overed the elderly profile of butrans and a few attributes of the product like no dose adjustment for renal or elderly. she asked about steady state, which I addressed. We covered the conversion from tramadol to butrans and managed care. Highlighted Hysingla. Dosing and attrubies. She said it seems easy. Talked trial card and managed care.
PPLPMDL0020000001	Cleveland	OH	44113	5/29/2015	Dawn teased me about not having to come in as everything with butrans is going well-told her I needed to be there to answer any questions about butrans and/or its coverage-she said caresource patients are going through smooth
PPLPMDL0020000001	Westlake	OH	44145	5/29/2015	Reviewed abuse detr properties of hysingla and oxycotin. Gave fair balance of abuse potential of all opioids. Talked about who might be a potential candidate for an extended release product/opioid. the residents mentioned a few different options. Most of them talked about when they need an extended release. I asked when is this? They didn't know. I said when is it not acute in your opinion. I got several different answers. I highlighted the limitation of use for acute pain patients- gave them a fpi and read the indication. Reviewed tramadol insight....I asked what they thought about this time length. They said seemed normal. I asked if this is something he thought he would do? They were unsure. covered attributies of hysingla and butrans and oxycotin. Reviewed conversion guide and trial offer of hysingla.
PPLPMDL0020000001	Westlake	OH	44145	5/29/2015	Spoke about what was going on at his office and that it was getting harder to see him. Dr shared with me how far behind he is with getting precerts approved for his federal insured patietns per the may 1st change. He said he is down from 24 a day to 8 a day injections and that is how he is paid. Which is why he hasn't written hysingla. The doctor said he just can't afford to put the office this far behind by choosing new products that will have pa's and get him even further behind. I asked how this affected his commercial [atietns and he said right now it didn't. I covered the trial of hysingla and getting experices with the product for just one patient to start with commercial insurance. Dr said he does like Butrans. He said he wrote 3 scripts today in the hospital. I reviewed caresource with him and the pa involved. Dr said he liked burans and it seems to be getting thru for patients so he will continue to write it with no hesitations. by close of our discussion the doctor told me he is so frustrated in general with the wait to get things approved that he is hesitent to write a new product but he will try and Elaine apologized but too busy to talk however Butrans still her number one pain med! I thanked her and asked for her continued support.
PPLPMDL0020000001	Cleveland	OH	44113	5/29/2015	Reviewed Hysingla ER formulary grid, Trial card offer, Initiation/Titration guide, Discussed appropriate patients for OxyContin and Butrans said ok will continue to prescribe and recommend for appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44113	6/1/2015	Reviewed Hysingla ER formulary grid, Trial card offer, Initiation/Titration guide, Discussed appropriate patients for OxyContin and Butrans said ok will continue to prescribe and recommend for appropriate patients.
PPLPMDL0020000001	Akron	OH	44333	6/1/2015	No new information learned on this call.
PPLPMDL0020000001	Stow	OH	44224	6/1/2015	W-Butrans-went over formulary grid and asked if she had prescribed for caresource patients-dr said she needs reminded-I told her that's what I was there for and asked for just one patient-dr said she would; OxyContin-n/a

PPLPMDL0020000001	akron	OH	44333	6/1/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	6/1/2015	Reviewed Trial card with Cecelia and staff, said ok will order accordingly.No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	6/1/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44114	6/1/2015	Reviewed with Hysingla ER trial program with tech, said ok will pass on info. Follow up later in the week
PPLPMDL0020000001	Mayfield Heights	OH	44124	6/1/2015	Met with pharmacist kelly. Dropped Webinar invite for Hysingla for pharmacists. Discussed, left Hysingla savings card printouts, explained & showed steps for pharmacy.
PPLPMDL0020000001	Mayfield Heights	OH	44124	6/1/2015	No new information learned on this call.
PPLPMDL0020000001	Stow	OH	44224	6/1/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	6/1/2015	quick hello and gave him conversion and coupons for hysingla. Taked for a trial of his commercial patietns for the free trial while it's offered.
PPLPMDL0020000001	Cleveland	OH	44113	6/1/2015	No new information learned on this call.
PPLPMDL0020000001	Valley View	OH	44125	6/1/2015	Reviewed Hysingla ER trial card and formulary opportunities within the area, said ok will order accordingly
PPLPMDL0020000001	Parma	OH	44129	6/1/2015	He agrees that Hysingla mKses sense for some Norco patients. Reviewed where he should consider writing it. When reviewing the plans, he said that he doesn't really have those plans. We discussed the savings programs and targeted anthem and Caremark as the plans to look for right patient. He wished that coverage would be better and wonders when medical mutual will see that ADP make sense for many patients and insurance shouldn't block it. I agreed and told him that we could use his support and find one patient in order to get experience with Hysingla. He needed savings cards for butrans, reviewed that he can still get free month for patients on line
PPLPMDL0020000001	Parma	OH	44134	6/1/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	6/1/2015	He was in a bad mood. He said that reps should be careful before coming to his office during the next year, because we and so many other people are parasites and wouldn't be anywhere without what he does. I told him I am here for a job and provide important information about new medicines that could help his patients, which is the goal for both of us, he agreed, said he hasn't written for the new med yet. Reviewed new savings program and which plans he should try to find patients in.
PPLPMDL0020000001	Parma	OH	44134	6/1/2015	Doc said he wrote one script of Hysingla last week. Reviewed formulary situation and savings information to set him up for success as he gets experience with Hysingla. He likes it as an option for some of his patients but still sees a lot of success with butrans and likes that it is a patch. Reviewed that the free month is still available, but online instead of with card.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/1/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44130	6/1/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	6/1/2015	No new information learned on this call.
PPLPMDL0020000001	Mayfield Hts	OH	44124	6/1/2015	Met with med asst Jessica, discussed/left Hysingla savings print out for updated trial offer. She will discuss with nurse Tammy, who is filling in for Denise Guinto today; Denise not in. Discussed same with Dr. Laham.
PPLPMDL0020000001	Parma	OH	44129	6/1/2015	Reinforced OxyContin for oxycodone patients and Butrans after Tramadol.
PPLPMDL0020000001	Cleveland	OH	44113	6/1/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44134	6/1/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	6/1/2015	Doctor agreed to find one patient for Hysingla on anthem or Caremark. Reviewed doses and conversion. He would probably start with 20. Reviewed savings program. He said he is finally on board with butrans and now I want him to write for Hysingla. Using the portfolio piece, pointed out that we are talking about completely different patient types. Reviewed butrans patient and asked him to continue thinking of butrans for patients before
PPLPMDL0020000001	Cleveland	OH	44130	6/1/2015	No new information learned on this call.
PPLPMDL0020000001	Mayfield Heights	OH	44124	6/1/2015	Met with pharmacy manager. Left Hysingla ER webinar invite for pharmacists. Discussed/left Hysingla print out to fold over existing savings/trial card. Explained & showed process.
PPLPMDL0020000001	Akron	OH	44333	6/1/2015	No new information learned on this call.
PPLPMDL0020000001	Waterford	OH	45786	6/1/2015	I-Butrans dosing, titration and managed-care. OxyContin dosing and managed care. Dosing, titration, boxed warning. AD properties, co-pay cards and managed-care.W-has not initiated any new patients on Hysingla well but has several patients in mind
PPLPMDL0020000001	Waterford	OH	45786	6/1/2015	I-Butrans dosing, titration and managed-care. OxyContin dosing and managed care. Dosing, titration, boxed warning. AD properties, co-pay cards and managed-care.W-has interest in Butrans
PPLPMDL0020000001	Waterford	OH	45786	6/1/2015	I-Butrans dosing, titration and managed-care. OxyContin dosing and managed care. Dosing, titration, boxed warning. AD properties, co-pay cards and managed-care.W-will look over the information
PPLPMDL0020000001	Cleveland	OH	44113	6/1/2015	Discussed Hysingla ER and the key features, Initiation/Titration guide, formulary grid along with Trial card offer, said ok doesnt like to prescribe any oral opioids and PA's but will keep in mind. Said she continues to find new patients for Butrans. Reviewed Med D coverage along with formulary opportunities
PPLPMDL0020000001	Waterford	OH	45786	6/1/2015	I-Butrans dosing, titration and managed-care. OxyContin dosing and managed care. Dosing, titration, boxed warning. AD properties, co-pay cards and managed-care.W-had an adverse event with OxyContin see below
PPLPMDL0020000001	Akron	OH	44333	6/1/2015	Short introduction to hysingla. Gave dr the attributes, dosing and conversions. Dr said he is dealing mostly with the medicare and medicad population. I told him hysingla is currently covered for private insured patients. Discussed his plans and told him about the trial offer. Dr looked over the initiation and titration guide and he likes it. I asked if he'll write and said he's going to look over everything first. I told him I'm going to follow up soon. I told him if he sees lots of CareSource patients and he said a lot along with Buckeye. I told him he needs to write Butrans for his Caresource patients who meet the indication and have pain around the clock.
PPLPMDL0020000001	Olmsted Falls	OH	44138	6/1/2015	Reviewed Hysingla trial card and provided grid approved materials. Talked about the trial and asked questions on there operating systems. They said they wouldn't have any problems running it thru. I asked if they had any patients currently and they said no. reviewed attributes and conversion of hysingla and during the conversation touched on abuse deter properties of oxycontin too. Touched on schedule three for butrans and aske dhow they addressed mail away for schedule three opioids. They said not too many do mail aways. I asked if they still could, they were uncertain.
PPLPMDL0020000001	Stow	OH	44224	6/1/2015	Lunch-introduction to new dr from Michigan-went over patients on tramadol/low dose opioids when not being controlled with pain-asked him at that point would he consider prescribing butrans here-dr said it does make sense since he doesn't like to go over 1-2 tabs of immediate release opioids-went over coverage and dr said he has no problem in prescribing butrans-asked for just I patient-dr said ok; OxyContin-doesn't prescribe spoke to Sue and Kelly (office manager) and talked about cover my meds, which I previously set them up on. sue said she doesn't like to use it and finds it confusing. I offered to set up an inservie but she said no. We talked about my conversation with dr. kabarra and how far behind they are on procedure precerts. They both talked a while on their struggles to get approvals. I asked about if they have any issues with butrans or oxyconton approvals and talked about caresource and the pa needed for this plan. She didn't seem to remember the dr writing butrans for caresource. I talked about doing an inservice on hysingla witha trained speaker at the hospital at the conference room- asked to speak to the dr about coordinating a date that he would already be at the hospital as I suggested wednesdays or fridays at 4pm, which seems to be the time he heads over to the hospital. she said she was uncertain, but didn't let me talk to the doctor directly. I will see if maybe Barry will have some influence to draw interest with the doctor and or staff.
PPLPMDL0020000001	Mayfield Heights	OH	44124	6/1/2015	Left information on all 3 products for Dr. Kirsch. @ front desk with medical assistant. Discussed Purdue's portfolio of single entity extended release opioids. Discussed OxyContin and Hysingla ER abuse deterrent labeling.
PPLPMDL0020000001	Independence	OH	44131	6/2/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44310	6/2/2015	I asked dr how he is deciding between hysingla ER and Butrans. Dr said we've had that conversation and most of his Butrans patients are BWC. Dr said his hysingla patients relight now have to be commercial insurance. I asked him if he's got a cutoff for Norco for those products? Dr said he will ask the patient if they would rather have a patch or a pill. Dr said both could be good options. Reviewed the hysingla trial offer.
PPLPMDL0020000001	Independence	OH	44131	6/2/2015	Doctor said he wrote butrans, but was not approved at pharmacy. He thought maybe patient was VA? I reviewed coverage and appropriate patient. He said he will try again. At this time he is referring more severe pain to someone else so appreciates Hysingla information, but will probably. Not write that anytime soon.
PPLPMDL0020000001	Barberton	OH	44203	6/2/2015	Deana (the main nurse for dr) and I were TALKING ABOUT THE trial offer for hysingla. She thought it sounded like a great idea as she and a few others do the pa's. Reviewed the appropriat patients for Hysingla and tried to capture how to go about getting the coupons and conversion guide set aside for when the patietns come for their apt. Deana said I would have to set up a time to come back and review this information as she didn't have time today. Dr walked thru the lunch room where we were at and we discussed identifying patients for Hysingla. Dr said that would be helpful. I recaped our plan to set aside conversion and trial cards and reviewed again the appropriate patient and the conversion. Dr said he would try. I reminded him that with out him offering it, nothing happens. I asked him if he was sure he was comfortable with Hysingla to offer it. Dr said yes and that he just needs to be reminded and this extra help will help. I told him that I would come back and check his progress and encourage him to keep trying.
PPLPMDL0020000001	Cleveland	OH	44113	6/2/2015	Discussed Hysingla ER and appropriate patients, steady state plasma levels, formulary opportunities and Trial cards. Reminded of Butrans for those patients requiring around the clock analgesia. Said Ok will continue to consider And prescribe Hysingla ER for appropriate patients that she can get covered.
PPLPMDL0020000001	Cleveland	OH	44113	6/2/2015	Discussed Hysingla ER, steady state plasma levels, formulary opportunities, trial card offer. Said he along with his mid-levels are 100% committed and will prescribe for appropriate patients that are commercially insured. Reminded of Butrans for those appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44125	6/2/2015	Discussed Hysingla ER and appropriate patients, reviewed steady plasma conc. Formulary opportunities and Trial Card offer, Reviewed OxyContin/Butrans for those patients failing on present therapy requiring around the clock analgesia, Said ok will continue to consider for appropriate patients that he can get covered.
PPLPMDL0020000001	Cleveland	OH	44113	6/2/2015	Discussed Hysingla ER and appropriate patients, steady state plasma levels, formulary opportunities and Trial cards. Reminded of Butrans for those patients requiring around the clock analgesia. Said Ok will continue to consider And prescribe Hysingla ER for appropriate patients that she can get covered.
PPLPMDL0020000001	Cleveland	OH	44195	6/2/2015	Quick review of Hysingla ER formulary opportunities along with Butrans patient info booklets.No new information learned on this call.
PPLPMDL0020000001	Beachwood	OH	44122	6/2/2015	Caught her at the window and asked her to think about patients that she has that are in pain morning, noon and night. She said she has those. Now I asked her to think of one of those patients taking 3 or more Norco a day. Are some of them still needing more pain relief? That would be an appropriate Hysingla patient.she said that she will find one patient like that and give Hysingla a try. Positioned the butrans patient and oxycontin patient using the portfolio piece. Quickly reviewed formulary and savings information for Hysingla but I could tell she was preoccupied and should be back a different day. She didn't want to schedule a lunch at this time.
PPLPMDL0020000001	Parma	OH	44134	6/2/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44125	6/2/2015	Reviewed portfolio, Discussed Hysingla ER trial program, said ok will pass info along to Evan when he returns No new information learned on this call.
PPLPMDL0020000001	Barberton	OH	44203	6/2/2015	Reiuewed the trial card for hysingla and gave her the grid that was approved for leave behinds. The pharmacist didn't have much time to talk, so I handed her the conversion guide and mentioned a few attributes of hysingla before she walked away.
PPLPMDL0020000001	Akron	OH	44333	6/2/2015	No new information learned on this call.
PPLPMDL0020000001	BEACHWOOD	OH	44122	6/2/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	6/2/2015	Spoke with Mike the pharmacist about hysingla ER trial offer. Discussed how it needs to be processed and Mike said they typically call the office if there is a pa because the cover my meds system seems to be overcrowded and said he doesn't know how long it really takes because it's supposed to be 3 days and knows it's longer. Mike said that if they call it seems to be processed sooner and said that this trial offer might be a thing of the future by patients getting their medicines despite a PA or ST.
PPLPMDL0020000001	Parma	OH	44129	6/2/2015	No new information learned on this call.

PPLPMDL0020000001	Garfield Hts	OH	44125	6/2/2015	No new information learned on this call.
PPLPMDL0020000001	Garfield Hts	OH	44125	6/2/2015	Reviewed portfolio. Discussed Hysingla ER trial program, said ok will order accordingly.No new information learned on this call.
	Barberton	OH	44203	6/2/2015	Opened with something new to highlight for your patients that need atc pain treatment that Hysingla is a once a day option for your appropriate patietns and its a one to one conversion. I wanted to talk more about trial card but that's all i was able to get out but i did highlight the coupons with her nurse for a brief time before she had to walk away to help a patient.
PPLPMDL0020000001	Shaker Heights	OH	44122	6/2/2015	No new information learned on this call.
PPLPMDL0020000001	Garfield Hts	OH	44125	6/2/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	6/2/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	6/2/2015	No new information learned on this call.
	Akron	OH	44305	6/2/2015	Spoke with dr and Mrs Vora about hysingla. I reviewed the hysingla attributes, dosing and conversions and told him to be specific with Norco patients taking it around the clock and have pain who also have CVS Caremark and FEP BC/b's plans. I discussed the trial offer with hysingla and asked him if that helps? Dr said anything that makes it easier for him and his staff is good. I asked him to use it clinically and let me know.
PPLPMDL0020000001	CLEVELAND	OH	44109	6/2/2015	Reviewed portfolio w/Lauren RPH Discussed Hysingla ER trial program, said ok will order accordingly.90% medicaid at this location
PPLPMDL0020000001	Independence	OH	44131	6/2/2015	Roman said that he knew Hysingla was too good to be true. He and Doctor Keppeler have found at least 8 patients they have written it for just for the patient to call them with headaches. As of now he is still willing to try but doesn't have the time to find out what insurance every patient has because some days they see 60-70 patients. Let him know again that at this time med d is not covering it, which is the patient he thinks most needs it. I asked him to make sure they know that. Reminded him that for now there are a few specific commercial plans to choose i for, talked with his ma to get her support and for her to call me with any problems or successes. He will write oxycontin in stead for these patient. Told him butrans is appropriate for the med d patient for which he said they are in warm climates and thinks the patch isn't ideal for their lifestyle.
	Parma	OH	44129	6/2/2015	Butrans- dr said just put patient on who has severe osteoarthritis right after Celebrex-agreed great place and asked for another patient like that and he said he will; OxyContin-dr said he is prescribing it after 3-4 Percocet tabs-likes keeping it with the same molecule
	Parma	OH	44129	6/2/2015	Myra said she really likes butrans in severe OA patients before going to Norco-she said her son is on it for multiple pain situations-thanked her for thinking of butrans for him and she said it was a joint decision; OxyContin-null point
	Cuyahoga Falls	OH	44223	6/2/2015	Short discussion about continuing his oxycontin writing. Handed him the hysingla initiation and titration guide and asked him to find one patient for the q24 hydrocodone? Dr claimed he has written it and I told him he must be thinking of The other ER Hydrocodone.
	Independence	OH	44131	6/2/2015	Didn't have too much time with him, but enough to introduce him to Hysingla, initiation, titration, formulary, savings card. He doesn't write much for ER but is good to know options and hear about ADP. he was more interested in the option of a patch and the fact that it is schedule 3. He wanted to review the PI's and will call me or have his MA Howard call me with questions.
PPLPMDL0020000001	Akron	OH	44305	6/2/2015	Reviewed hysingla ER trial offer to Sara the pharmacist. Explained how she would process the trial card to dispense 30 pills. Sara had no questions.
PPLPMDL0020000001	Barberton	OH	44203	6/2/2015	Talked about trial card of hysingla mostly. gave rid and asked her what complications if any does she foresee with her or the techs running this trial card their system. she said that most of the techs do the trial cards and there have been a few companies offering this type of savings but it shouldn't be a problem. Highlighted the dosing and a few attributes. I aske dthe pharmacist what her thoughts were on hysingla. she said managed care was always a concern for patietns and the savings program should help.
	Beachwood	OH	44122	6/2/2015	Asked him to think about a patient he has on 3 or more Norco per day. He did. Would any of those patient be appropriate for a once daily, abuse deterrent medication like Hysingla (Hydrocodone without the tylenol). Left him savings card and reviewed saving plan. He had to go
	Northfield	OH	44067	6/3/2015	No new information learned on this call.
	Akron	OH	44312	6/3/2015	No new information learned on this call.
	Beachwood	OH	44122	6/3/2015	Quick call with doc and Patty. Reviewed Hysingla savings program and appropriate patient type. They are glad for a Hydrocodone product like this. Discusses formulary and made sure they had my card so I can help follow up with pharmacies to ensure the patients are getting the medicine he prescribes. Reminded him that Oxycontin is Another ER option w ADP and reviewed its formulary coverage.
PPLPMDL0020000001	Cleveland	OH	44113	6/3/2015	Discussed and Reviewed Portfolio of ERO products, formulary opportunities. Reviewed Hysingla ER plasma conc. levels, said ok will continue to consider and prescribe for appropriate patients that she can get covered.
PPLPMDL0020000001	Brooklyn	OH	44144	6/3/2015	Quick review of Hysingla ER/OxyContin for those patients failing on present therapy requiring around the clock analgesia. Said ok will continue to consider/prescribe for appropriate patients that have coverage.No new information learned on this call.
	Cleveland	OH	44113	6/3/2015	Discussed and Reviewed Portfolio of ERO products, formulary opportunities. Reviewed Hysingla ER plasma conc. levels, said ok will continue to recommend and encourage staff to prescribe for appropriate patients that have coverage.
PPLPMDL0020000001	Cleveland	OH	44113	6/3/2015	Discussed and Reviewed Portfolio of ERO products, formulary opportunities. Reviewed Hysingla ER plasma conc. levels, said ok will continue to consider and prescribe for appropriate patients that have coverage.
PPLPMDL0020000001	Cleveland	OH	44113	6/3/2015	Discussed and Reviewed Portfolio of ERO products, formulary opportunities. Reviewed Hysingla ER plasma conc. levels, said ok will continue to consider and prescribe for appropriate patients that she can get covered. Started a new patient this morning.
PPLPMDL0020000001	Akron	OH	44313	6/3/2015	Told dr through window that I want him to continue using oxycontin when he has a patient present in pain around the clock on percocet or IR oxycodone. Dr said he's still using it. I showed him the Butrans slide guide conversion chart,handed it to him and asked him to use it for patients in pain on Tramadol or Norco around the clock and are BWC or CareSource patients. Explained the CareSource PA and dr asked Tina to put it on a sticky note on the conversion scale so he would remember it.
PPLPMDL0020000001	Akron	OH	44320	6/3/2015	Quick reminder with dr in hallway about Butrans patient types and that he needs to be writing it by now. Dr said he knows but has been about of the office a lot recently. Told dr I will follow up next week
PPLPMDL0020000001	Cleveland	OH	44113	6/3/2015	Moving in next couple weeks-thanked her for great butrans support and asked for continued focus on patients on low dose Norco and tramadol-she said she would
PPLPMDL0020000001	Cleveland	OH	44105	6/3/2015	Reviewed trial card and formulary opportunities. No new information learned on this call.
	Lakewood	OH	44107	6/3/2015	Gave the trial grid and print out information to the pharmacist. tried to discuss the details but she was not prepared to talk today with all the patients waiting. So i highlighted some attributes as i gave back the materials and stated i would come back.
PPLPMDL0020000001	Cleveland	OH	44109	6/3/2015	Reviewed Hysingla ER trial card with Staff and Jason RPH. said ok .Will order accordingly
PPLPMDL0020000001	Akron	OH	44303	6/3/2015	Reviewed the hysingla trial offer and Rod said it wounds like a great idea and will help him out tremendously when he sees a script. I told him he will in due time and reviewed the attributes along with dosing.
PPLPMDL0020000001	Westlake	OH	44145	6/3/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44307	6/3/2015	No new information learned on this call.
PPLPMDL0020000001	Brooklyn	OH	44144	6/3/2015	Reviewed trial card and formulary opportunities.No new information learned on this call.
PPLPMDL0020000001	Bedford	OH	44146	6/3/2015	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	6/3/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	6/3/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44144	6/3/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	6/3/2015	Dr was at the surgery center today and i reminded him of butrans with caresource and we talked about today being the day he will try hysingla. commercial and once a day the doctor recited back to me...i reminded him of the conversion.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/3/2015	Followup of lunch-OxyContin-went over formulary coverage and dr said pleased overall with coverage; butrans-dr said still loves it and reminded about caresource patients
PPLPMDL0020000001	Akron	OH	44313	6/3/2015	Reviewed the hysingla trial offer with Tom and discussed hysingla attributes, Dosing and conversions. Tom said it wounds like a great idea and will wait for a script.
PPLPMDL0020000001	Rocky river	OH	44116	6/3/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44312	6/3/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	6/3/2015	Debbie said butrans still working great in patients switched from low dose Norco and tramadol-reminded about caresource and she said she is focusing on them
PPLPMDL0020000001	Cleveland	OH	44113	6/3/2015	Elaine teased I don't have to come in as much because butrans is doing great-patients like it and coverage is very good-reminded about caresource patients and she said she is prescribing it there
PPLPMDL0020000001	Westlake	OH	44145	6/3/2015	Confirmed lunch for next week with all three doctors and dr. yonan. left literature and the trial card offer.
	Lakewood	OH	44107	6/3/2015	discussed the trial of Hysingla over lunch. Dr saidhe was not writing as much opioids any more. And I talked about what we discussed at our last vist which was that the dr is trying to stay under 80mg morephine equivalent and that he has a lot of caresource patients. I addressed hysingla with commercial insured and the dr had an interest in the 20 and I spoke with Jamie about the trial card for hysingla and the pa process for caresource w/ butrans. I asked the doctor to leave the hysingla coupons on his desk andhe said yes and actually had me place it there for him to review the conversion guide. I talked about the opportunity to attend a dinner program or a lunch and learn. Dr said maybe, if he has time.
PPLPMDL0020000001	LAKEWOOD	OH	44107	6/3/2015	spoke to the pharmacist about how they run trial cards and if they have seen anything like the hysingla trial offer. He couldn't remember any like it but seemed to think it would not be a problem. I gave him the grid and the trial information. Highlighted dosing and conversion, other attributes of the product. My goal today was trial offer and to make sure they know how to process it.
PPLPMDL0020000001	Munroe Falls	OH	44262	6/3/2015	i asked dr if she currently has patients taking Norco who are taking it around the clock? Dr said she has some. I asked her if a q24 hydrocodone with no Tylenol and abuse deterrence would be a product she would prescribe for a patient like that who is still in pain on Norco? Dr said she would. Discussed the trial offer and asked her if she could identify just one patient? Dr said she'll look and it wounds like a good product.
PPLPMDL0020000001	Cleveland	OH	44111	6/3/2015	Discussed hysingla and his experience writing it if any. i asked him if he changes medications solo or if being a ng he needs dr. Tabbaa to approve or suggest it? He said if the patient isn't controlled he will consult with the dr first before changing medications. I asked if that was the same for a scheuldle three like butrans? He said yes. Reviewed conversion and dosages mostly of hysingla. I asked if it made sense, he said yes. reviewed the trial offer and gave him the information with the grid.Talked about butrans and asked him if he typically treats patients under 80mg's morephine equivalent daily? and he said yes. I reviewed butrans intation guide and also coverage like caresource and med d plans. I asked if he found butrans to be easy or hard? He thought pretty easy. I reminded him of a few attributes like schedule three and managed care coverage. I asked him if i could host a speaker program during a specific time for his group to understand hysingla a little more on a deeper level- he said he was unsure and would need to ask dr tabbaa and the others. I gave him my card and marketing materials.
PPLPMDL0020000001	Cleveland	OH	44114	6/3/2015	Butrans-dr said even though Jon is gone he still likes butrans and will continue to prescribe it; OxyContin-reminded dr about looking for patients in his practice not in the ER-dr said he does feel better about prescribing it since we went over abuse deterrent properties i did remind him that abuse can happen it's the re formulation that makes it more difficult to chew or crush
PPLPMDL0020000001	Cleveland Hts	OH	44118	6/4/2015	Reviewed Hysingla ER Trial card offer, formulary opportunities along with OxyContin every 12 hours, said ok will continue to consider and prescribe for appropriate patients that he can get covered.
PPLPMDL0020000001	Stow	OH	44224	6/4/2015	Followed up on a call regarding hysingla prescriptions and verifying coverage. A medical Mutual patient dr write hysingla for was approved! Dr said she is very thankful that I worked it out with her nurse Nay. Explained the new trial offer for this patient who has yet to fill hysingla and future patients. Dr said it will help the patient for sure.

PPLPMDL0020000001	Cleveland	OH	44112	6/4/2015	Reviewed portfolio, formulary opportunities, said ok will consider for appropriate patients, asked to start those patients on ERO that she is sending to pain mgmnt No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44114	6/4/2015	Reviewed Hysingla ER Trial card offer, identified patients with formulary opportunities along with OxyContin every 12 hours, and Butrans .said ok will continue to consider and prescribe for appropriate patients that he can get covered.
PPLPMDL0020000001	Cleveland	OH	44195	6/4/2015	Reviewed Hysingla ER Trial card offer, formulary opportunities along with OxyContin every 12 hours, and Butrans for those patients failing on present therapy requiring around the clock analgesia.said ok will continue to consider and prescribe for appropriate patients that she can get covered.
PPLPMDL0020000001	Cleveland	OH	44118	6/4/2015	Reviewed Hysingla ER trial card offer, formulary opportunities along with OxyContin every 12 hours, said ok will continue to consider and prescribe for appropriate patients that she can get covered.
PPLPMDL0020000001	Stow	OH	44224	6/4/2015	No new information learned on this call.
PPLPMDL0020000001	Tallmadge	OH	44278	6/4/2015	Told dr in hallway I would like him to try hysingla for those patients he can find who have commercial insurance and are on Norco around the clock. Dr said sounds good. I asked him if he got the oxycontin copy cards I left him and dr said he has already given out a couple of them.
PPLPMDL0020000001	Cleveland	OH	44195	6/4/2015	Visited pain mgmnt dept. Hysingla info and trial card offer
PPLPMDL0020000001	Cleveland Hts	OH	44118	6/4/2015	Reviewed portfolio of products. Hysingla Trial card offer said ok.No new information learned on this call.
PPLPMDL0020000001	Stow	OH	44224	6/4/2015	Provided pharmacy lunch. Holly the pharmacist said they had a patient come in as a patient of a dr in Ricky River who prescribed 40mg hysingla for. Patient on Medicaid. Holly said she was going to send it back and I asked her why? Holly said she didn't think they would see anymore. I asked her if she would this one would come in and she said no. I convinced her to keep the 40mg on the shelf and order a 20mg. Holly agreed and she has a year to snd it back for a full refund.
PPLPMDL0020000001	Lyndhurst	OH	44124	6/4/2015	Dr Goldner took day off. Discussed/left PBM Know your Tiers piece with med asst. Discussed, left updated printout for Hysingla ER cards. Discussed/left commercial formulary grid for Hysingla ER plans that do NOT require prior auth. Sense of urgency delivered with offer expiring Aug. 15.
PPLPMDL0020000001	Stow	OH	44224	6/4/2015	No new information learned on this call.
PPLPMDL0020000001	Lyndhurst	OH	44124	6/4/2015	Quick call with Dr. Reed. Nothing new learned. Met with LPN Diana/prior auth coordinator, discussed/left PBM Know your Tiers brochure. Discussed/left Hysingla ER commercial formulary grid for plans that do NOT require prior auth. Discussed also with Diana, updated free trial for Hysingla, left print out s and let her know patients must activate card first, bring new offer info in with hard copy of card.
PPLPMDL0020000001	Cleveland	OH	44103	6/4/2015	No new information learned on this call.
PPLPMDL0020000001	Highland Heights	OH	44143	6/4/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/4/2015	No new information learned on this call.
PPLPMDL0020000001	Tallmadge	OH	44278	6/4/2015	I told r that I'm guessing he has some patients on Norco that are not taking it for acute or PRN pain? Dr said yes he figures that If they are taking it four times a day then it's around the clock. Discussed how he has hysingla as an option for those patients still in pain on Norco. Reviewed the attributes, dosing and conversions. Finished with the trial offer explanation and asked dr if he could identify just one patient like we discussed that also has private insurance? Dr said he will try and had kind of forgotten about it. Reviewed Butrans and asked for tramadol patients that meet he Butrans indication.
PPLPMDL0020000001	Cleveland Hts	OH	44118	6/4/2015	Reviewed portfolio of products. Hysingla Trial card offer said ok.No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/4/2015	Caught at WRH in hallway and told him we are working diligently on making sure the insurance coverage for Butrans continues to get better. I told him that PAs happen with ALL medicines now and told hi, to him to focus on MMO, Caremark, and ESI as well as AARP for Medicare. Dr said thanks for updating him and he continues to prescribe because the patch is very effective.
PPLPMDL0020000001	Lyndhurst	OH	44124	6/4/2015	No new information learned on this call.
PPLPMDL0020000001	Stow	OH	44224	6/4/2015	I showed dr the Butrans conversion guide with the Helen profile. Dr said that he wrote a prescription recently. I asked dr to tell me about it and he said the patient was on Ultram and needing more so he started on Butrans 5mcg. Dr said the patient got the medicine but has not seen the patient for a follow up. I thanked dr and reviewed dosing and titration and the ability to use IR as breakthrough if necessary. Reviewed hysingla attributes, dosing and conversions and asked him to identify just one patient on Norco with commercial insurance. Reviewed trial offer.
PPLPMDL0020000001	Mayfield Village	OH	44143	6/4/2015	Left literature for Dr. Krishnan. Discussed with medical assistant updated free 30 day trial for Hysingla ER. Left formulary grid and PBM KNow your Tiers brochure. Left Hysingla titration guide for Dr. Krishnan.
PPLPMDL0020000001	Cleveland	OH	44130	6/5/2015	Introduction to dr and staff-OxyContin-dr said he doesn't like to go beyond 4 tabs of Percocet before switching to OxyContin-likes to keep it with same molecule-confirmed with dr about good coverage with top plans around the area-dr agreed to continue prescribing; butrans-dr said he's not thinking of it as much as he should-told him that's my job-told him to keep it simple-when his tramadol patients are approaching 200mg and wants to switch to ER opioid-think butrans especially with his caresource patients-dr said will
PPLPMDL0020000001	Westlake	OH	44145	6/5/2015	Review of the trial card with brian and the office manager. Highlighted the dosing and commercial insurance coverage
PPLPMDL0020000001	Akron	OH	44319	6/5/2015	Short discussion in office hallway and told him about hysingla ER reviewing attributes and if he thinks he would have a patient that is on Norco around the clock and in pain? Dr said he knows he has some and will try. I told him to review the initiation and titration guide and told him about the trial card and copy card.
PPLPMDL0020000001	Cleveland	OH	44113	6/5/2015	Reviewed Hysingla ER Trial card and formulary opportunities for both Butrans and Hysingla ER. Said ok will continue to recommend to staff and appropriate patients
PPLPMDL0020000001	Cleveland	OH	44109	6/5/2015	Reviewed portfolio of products, discussed appropriate patients, Initiation/Titration, formulary opportunities, Said ok will continue to consider and prescribe for appropriate patients that she can get covered on these options.
PPLPMDL0020000001	Cleveland	OH	44114	6/5/2015	Reviewed portfolio of products, discussed appropriate patients, Initiation/Titration, formulary opportunities, Said ok will continue to consider and prescribe for appropriate patients that he can get covered on these options.
PPLPMDL0020000001	Cleveland	OH	44113	6/5/2015	Said he will focus on getting some new patients on Hysingla ER today
PPLPMDL0020000001	Cleveland	OH	44113	6/5/2015	QUICK review of Hysingla and OxyContin for those appropriate patients that are failing on present therapy requiring around the clock analgesia, Said ok no new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	6/5/2015	No new information learned on this call.
PPLPMDL0020000001	University Hts	OH	44118	6/5/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44114	6/5/2015	Reviewed portfolio along with Hysingla ER trial card offer with Marc RPH mgr.said ok will order accordingly.No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44312	6/5/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/5/2015	Spoke with Stewart the pharmacist. He said that they have had about 3 hysingla scripts come in recently and knows that two of them have been 20 and 40mg. Discussed the new trial offer and the printed piece for processing it as a secondary claim. Stewart said that's a cool way to do it and it makes sense and said he would let the other pharmacists know.
PPLPMDL0020000001	Cleveland	OH	44195	6/5/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44109	6/5/2015	Met with DR. Gandhi, reviewed portfolio No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44312	6/5/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44305	6/5/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44109	6/5/2015	Reviewed portfolio along with Hysingla ER trial card, said ok.No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44103	6/5/2015	No new information learned on this call.
PPLPMDL0020000001	Hudson	OH	44236	6/5/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/5/2015	Quick window-dr said all us good for butrans and OxyContin and said he would see me next time
PPLPMDL0020000001	Cleveland	OH	44115	6/5/2015	Met with Dr. Nickles- Pain mgmnt reviewed portfolio,No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44115	6/5/2015	Left info and card for George Rph mgr.no new information learned on this call.
PPLPMDL0020000001	Beachwood	OH	44122	6/5/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44312	6/5/2015	Short discussion in hallway and asked for continued search for Norco patients in pain around the clock for hysingla ER and then Butrans patients on tramadol in pain around the clock. Dr said thanks for the updates and is always looking for the right patient.
PPLPMDL0020000001	Beachwood	OH	44122	6/5/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44312	6/5/2015	Dr told me a story about. Patient of his who he wants to prescribe Butrans for. Dr said the patient has a long history of opioid use and abuse and has been in and out of pain management. Dr said he wants to write Butrans because he thinks a week long patch would be a good fit after he tapers the patient down of his current opioids for his chronic thoracic pain from an auto accident. Dr asked me what starting dose he should start with and I told him 10mcg seems like a good place to start and then he can titrate from there every 3 days if necessary. Dr said he patient has UHC Community plan and dr told patient to ask his insurance. I told dr there will be a PA and it might go through based on his opioid history. Reviewed hysingla ER attributes, dosing, conversions and then discussed the trial offer. Dr said it sounds like a good deal and will look for some patients.
PPLPMDL0020000001	Mogadore	OH	44260	6/5/2015	Quick second with dr at front counter and his MA Molly. Reviewed hysingla ER attributes and then explained the trial offer. I asked him if it will help him out? Dr said it only delays the PA and wishes he didn't have to process so many. I told him that the patient at least gets the medicine right away and it could potentially not have to write 2-3 weeks of an IR opioid until the PA gets processed. Dr said the urgency is gone but the PA still needs to be done. I told dr it depends on the plan and if he believes he has use for it in his practice. Dr said he'll start looking.
PPLPMDL0020000001	Westlake	OH	44145	6/5/2015	Review trial card- they were too busy to get into a big discussion. I covered the basics and highlighted the attributes.
PPLPMDL0020000001	Berea	OH	44017	6/5/2015	highlighted the trial offer for hysingla, tried to apply sense of urgency with the deadline. Highlighted conversion and commercial patients- gave grid. Will return next week
PPLPMDL0020000001	Cleveland	OH	44113	6/5/2015	Lunch-introduction to dr and staff-dr said OxyContin is his go to ER opioid when patients are approaching 3-4 tabs of Percocet-agreed perfect choice-dr said he does like the fact that OxyContin has abuse deterring properties-I let him know patients can still abuse it but it is more difficult to chew and crush-went over coverage and dr agreed very solid coverage; butrans-dr said doesn't think of it as much-went over 5 strengths and conversion slide guide focusing on tramadol patients approaching 200mg and needing to switch to ER opioid-dr asked about coverage and I gave him formulary grid-told him to focus on caresource which is a huge plan around Cleveland-asked for 1 patient and dr said he would prescribe it
PPLPMDL0020000001	Mayfield Heights	OH	44124	6/5/2015	Met with prior auth coordinator and nurse Mary regarding Hysingla ER free 30 day trial offer - has it been helpful. they both stated Dr Laham, who utilizes product, has been "in and OUT" and they don't recall any cards coming through recently. Also, this is Denise's first day back in office after being out. Reviewed Hysingla ER updated formulary grids with Denise to show which plans do NOT require a prior auth or step edit. Reviewed free trial offer again; asked Denise to call me should any issues arise. Left physician webinar invite for all hcp's in office including Josie. Left/discussed PBM, know your Tiers brochure with prior auth coordinator Denise. Asked to see Josie or PA Frank - Denise went back to ask them- they both were too busy to talk w Barry and I.
PPLPMDL0020000001	Akron	OH	44319	6/5/2015	Spoke to both pharmacy techs Megan and Rickey. Discussed hysingla and introduced it to them for the first time. Reviewed hysingla attributes, dosing and conversions and then the trial offer review. Both techs said that it sounds like a great product, especially the abuse deterrent traits. Megan said she will relay the information to Sara.
PPLPMDL0020000001	Cleveland	OH	44125	6/8/2015	Reviewed portfolio of products for those appropriate patients that require around the clock analgesia, Hysingla ER trial card offer, said ok will continue to consider and prescribe for appropriate patients.

	Twinsburg	OH	44087	6/8/2015	Doctor said that Hysingla does makes sense for some of his patients he has tried writing it twice without luck. Asked him to keep me informed in the future. We reviewed appropriate patient and formulary coverage. Reviewed savings plan information. He said that the flow chart makes him want to refer all patients to pain management. We spent time discussing it and simplifying it in his mind, he will give it another try but he thinks it shouldn't be this difficult. Reminded him that he does have choices for patients in around the clock pain using portfolio piece, reviewed appropriate butrans and oxycontin patient
PPLPMDL0020000001	Cleveland	OH	44195	6/8/2015	Quick review of Portfolio, Hysingla ER limited time trial offer, formulary opportunities, said ok will consider for appropriate patients that she can get covered
PPLPMDL0020000001	Cleveland	OH	44195	6/8/2015	Discussed portfolio with Roxanne RPH mgr. formulary opportunities, said ok but mostly acute setting but will keep in mind and will order accordingly
PPLPMDL0020000001	Cleveland	OH	44195	6/8/2015	Visited dept. booked appt
PPLPMDL0020000001	Twinsburg	OH	44087	6/8/2015	No new information learned on this call.
	Euclid	OH	44117	6/8/2015	Met briefly with Dr. Demico. Nothing new learned. REMinded him of lunch in Euclid on Wed 6/10. Met with OM Norma and prior auth coordinator Lori on new Hysingla ER 30 days free offer. Explained role for Lori, Dr. Demico (the patient in activating the card BEFORE picking up rx at pharmacy), the pharmacist, and explained IF the patients plan needs a prior auth or step edit, that she will receive fax back to start working on prior auth or step edit and this will give her up to 30 days to complete, so she will not be rushed. Patient has 30 days to see results of product, at no cost, so it's a win win for everyone. Left Lori PBM know your tiers brochure.
PPLPMDL0020000001	Cleveland	OH	44195	6/8/2015	Reviewed Hysingla ER/OxyContin, formulary opportunities, Hysingla Trial card offer., said ok will continue to consider when prescribing.
PPLPMDL0020000001	Twinsburg	OH	44087	6/8/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	6/8/2015	No new information learned on this call.
PPLPMDL0020000001	Solon	OH	44139	6/8/2015	Quick call with several office and quick w doc. Had enough time to share portfolio piece, product positioning and quick Hysingla Intro, dosing, ADP. Started to review savings, but they had to go. Left savings cards and flow chart info.
PPLPMDL0020000001	Cleveland	OH	44102	6/8/2015	Quick review of Hysingla ER/Butrans, formulary opportunities and trial card offer, said ok asked to book appt to further discuss.
PPLPMDL0020000001	Bedford	OH	44146	6/8/2015	Quick call. He is writing Hysingla and process seems to be going better for Hysingla. I was hoping he and Marian could share some of their experience with me as patient are coming in for refills. He asked if I could be back a different day because they are behind.
PPLPMDL0020000001	Fairlawn	OH	44333	6/8/2015	Spike with Amanda and Dr Oyakawa about hysingla. Discussed hysingla attributes, dosing and conversions. I asked dr to simply identify a patient on Norco who has pain around the clock and convert them to hysingla. Explained the hysingla trial offer and showed him a copy card. Dr said it sounds like a good program. I told dr that I will create a formulary grid so he has a few plans that cover hysingla at the path of least resistance. Discussed the product and trial card with Amanda and asked her if she would help dr identify the right patients? She said she would do her best and said it sounds like a good program.
PPLPMDL0020000001	Chagrin Falls	OH	44022	6/8/2015	No new information learned on this call.
PPLPMDL0020000001	Beachwood	OH	44122	6/8/2015	No new information learned on this call.
PPLPMDL0020000001	CLEVELAND	OH	44195	6/8/2015	Reviewed portfolio, Limited time trial card offer for Hysingla, Said ok will relay info.
PPLPMDL0020000001	Cleveland	OH	44195	6/8/2015	Reviewed portfolio, Limited time trial card offer for Hysingla, Said ok will relay info. o new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	6/8/2015	Quick review of portfolio, Hysingla ER limited time trial offer, formulary opportunities, said ok will continue to discuss, recommend and consider for appropriate patients that she can get covered. A
PPLPMDL0020000001	Akron	OH	44310	6/9/2015	No new information learned on this call.
PPLPMDL0020000001	Garfield Hts	OH	44125	6/9/2015	No new information learned on this call.
PPLPMDL0020000001	Independence	OH	44131	6/9/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44134	6/9/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44109	6/9/2015	Reviewed portfolio, Hysingla ER trial card offer. No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44102	6/9/2015	Reviewed Portfolio, formulary status, and Hysingla ER trail card offer, Said Ok will pass info along to staff, Managed medicaid only.
PPLPMDL0020000001	Brooklyn	OH	44144	6/9/2015	No new information learned on this call.
PPLPMDL0020000001	Fairlawn	OH	44333	6/9/2015	Discussed Hysingla attributes, dosing and trial offer wi state the pharmacy tech. He told me the product sounds great and asked me about insurance coverage. I told him for now it's commercially covered however the trial offer will allow him to dispense 30 days anyway. He said he would discuss info with the pharmacists.
PPLPMDL0020000001	Norton	OH	44203	6/9/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44127	6/9/2015	Reviewed portfolio, Hysingla ER Trial card offer, said ok but not prescribing any ERO's
PPLPMDL0020000001	Independence	OH	44131	6/9/2015	Romans called asking for more savings cards. I went in immediately and reviewed the 4 plans where they will have most success when finding appropriate Hysingla patient. Reviewed savings program and to please keep calling me if patient is getting pushback from pharmacy. He has united healthcare patient in mind for this afternoon. I told him that isn't one of the plans with best success rate. He will keep trying.
PPLPMDL0020000001	Independence	OH	44131	6/9/2015	Quickly reviewed where to write for Hysingla, which plans, and reviewed savings programs again. He is committed to trying and appreciates my help
PPLPMDL0020000001	Bedford	OH	44146	6/9/2015	Let doc know that although Hysingla isn't yet covered on workers comp, oxycontin and butrans are approved. Used portfolio piece to point out three distinct patients for our product portfolio. Asked him to consider oxycontin or butrans for patients in around the clock pain.
PPLPMDL0020000001	C. Falls	OH	44223	6/9/2015	Quick follow up with pharmacy about hysingla trial offer and inquired about any issues or successes. Th tech told me that all has been good and they have continued to see it come through and can't remember if patients have used the 30 day trial card. I reviewed the program again and asked for feedback when they have it.
PPLPMDL0020000001	Garfield Hts.	OH	44125	6/9/2015	No new information learned on this call.
PPLPMDL0020000001	Barberton	OH	44203	6/9/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	6/9/2015	Reminded him that last time I was in, he said he missed hearing about butrans. He smiled. Asked for him to continue to consider it as patients first opioid. He thought that made sense. Told him that I will ask for the Hysingla patient again on my next visit,
PPLPMDL0020000001	Parma	OH	44129	6/9/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44305	6/9/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/9/2015	Good talk in WRH about hysingla and Butrans. Reviewed the hysingla trial offer and told him it will work for commercially insured patients except UHC commercial. Told dr to please ramp up his prescribing as he needs to focus on Caremark, Medco, ESI, Cigna and SummaCare. Dr said that will help him in choosing the right patient. Dr said he's really loving Butrans as he just titrated a patient today from 5 to 10mcg and had a new start from Morphine and Norco. Dr said he's starting on 10mcg then slowly taper of the other medicines.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/9/2015	First time in office for lunch. Appointment with all three HCPs and discussed all product Butrans, hysingla and oxycontin indication, dosing, conversions and attributes for each. Reviewed Butrans dosing, conversions, profiles, application sites, and discussed using for around the clock pain. Discussed hysingla in depth and discussed using for indication as well. Discussed up trial card and copy card process for all products. Reviewed oxycontin attributes and when and where to use and reviewed reformulation in 2010 and abuse deterrent properties from MVA. Dr said he believes in Butrans and has had some good success and will look to find patients that fit hysingla because he believes it's a great product.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/9/2015	First time in office for lunch. Appointment with all three HCPs and discussed all product Butrans, hysingla and oxycontin indication, dosing, conversions and attributes for each. Reviewed Butrans dosing, conversions, profiles, application sites, and discussed using for around the clock pain. Discussed hysingla in depth and discussed using for indication as well. Discussed up trial card and copy card process for all products. Reviewed oxycontin attributes and when and where to use and reviewed reformulation in 2010 and abuse deterrent properties from MVA. Dr asked me about seeing Butrans on a UDS. I told dr that doing for Butrans is low and that the values for detecting Butrans need to be lowered. I asked him to inquire with his lab service as to what that needs to be. Dr said he has tried to weed out many of his chronic pain patients however does have many where he sees Butrans working for. He inquired about cost so we discussed medicare and commercial insurance as he does not accept medicaid or BWC.
PPLPMDL0020000001	Cleveland	OH	44113	6/9/2015	Reinforced Hysingla ER limited time trial card offer for those commercially insured patients, along with Butrans for those patients requiring around the clock analgesia said ok he will continue prescribe and recommend clinicians initiate PA's
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/9/2015	Discussed hysingla with dr Sable and reviewed the hysingla patient type to look for as well as the dosing and conversions. Reviewed the new trial offer which dr said was amazing and cool. I asked him to convert hose appropriate Norco patients. Dr said he loves Butrans and just wrote a couple today from Tramadol and Morphine. Told dr to continue with his believe in the products.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/9/2015	First time in office for lunch. Appointment with all three HCPs and discussed all product Butrans, hysingla and oxycontin indication, dosing, conversions and attributes for each. Reviewed Butrans dosing, conversions, profiles, application sites, and discussed using for around the clock pain. Discussed hysingla in depth and discussed using for indication as well. Discussed up trial card and copy card process for all products. Reviewed oxycontin attributes and when and where to use and reviewed reformulation in 2010 and abuse deterrent properties from MVA. Tammy said that she has also weeded out many of her pain patients and has been referring to pain management but said many of the patients are just out on too many opioids. Tammy said she likes the idea of both Butrans and hysingla based on the frequency and dosing structure. She said she can think of a couple of patients that may work for both products.
PPLPMDL0020000001	Cleveland	OH	44113	6/9/2015	Reinforced Hysingla ER limited time trial card offer for those commercially insured patients, along with Butrans for those patients requiring around the clock analgesia said ok will continue prescribe and initiate PA's
PPLPMDL0020000001	Cleveland	OH	44113	6/9/2015	Reinforced Hysingla ER limited time trial card offer for those commercially insured patients, along with Butrans for those patients requiring around the clock analgesia said ok will continue prescribe and initiate PA's
PPLPMDL0020000001	Cleveland	OH	44130	6/10/2015	No new information learned on this call.
PPLPMDL0020000001	Euclid	OH	44119	6/10/2015	Quick call with Paul, nothing new learned. Met with RN Carla Van Pelt. Discussed updated 30 day free offer for Hysingla ER, expiring Aug. 15. Discussed how trial should work, that they need to get savings card in hand of patient and it's critical for patient to activate card PRIOR to picking up rx at pharmacy. Left formulary grids, explaining that the plans on grid do NOT require a step edit or prior auth for Hysingla ER.
PPLPMDL0020000001	Westlake	OH	44145	6/10/2015	While I was talking with the nurse practitioner Aubrey about butrans- Dr came up to say hello and i invited him to the hysingla webx at our next lunch and asked what he thought. Dr said that would be ok. I handed him some of the company approved materials, which the nurse pract found more exciting than the doctor. I highlighted my visit today was to find an appropriate patient for hysingla. norco patient- commercially insured. I asked him to offer hysingla instead of adding another norco to their atc schedule. Dr said ok. I highlighted the trial offer with the doctor and the np. Getting the np out today was a great way to see the doctor.
PPLPMDL0020000001					



	Westlake	OH	44145	6/10/2015	spent some time going over abuse det properties of the Purdue line. I asked the NP if she has appropriate patient to please consider Hysingla and Oxycontin instead of adding another short acting/immediate release opioid to their atc schedule. if they are appropriate. I asked who they felt was a typical appropriate patient. she said anyone treated for more than 3 months with long term pain. I highlighted atc to make sure she knew this information. I used the Jane profile and the core visual aid to help reinforce some points. Like for Hysingla the commercially insured patient- spend time with the trial offer. And for Butrans the current tramadol patient who is not being treated successfully and is left in pain needing you to treat them differently. She said she likes Butrans cause its schedule three. We talked about the vast managed care coverage and we talked about pa's. She said sometimes she does the pa's but most of the time it's the nurses. I asked how often do they get rejections on Butrans, or Oxycontin and she said non that she can recall. I asked does she write it...she said not really but sometimes. I asked her about her pain patients and what kinds of medications do you treat them with. She talked about not opioid therapy and use of tramadol or 20mg of Norco total daily dose. I geared my presentation to this audience. she said she would try and remember our products and allowed me to set the coupons on her desk for the next few months.
PPLPMDL0020000001	Westlake	OH	44145	6/10/2015	Talked about Hysingla with the attributes. I asked for her to consider offering this to an appropriate patient instead of adding another immediate release to their atc schedule and I asked if this is reasonable and she said yes. I talked about the trial offer, I asked if this makes sense or needs to be covered again. She said no. I played it up a bit more with the deadline trying to create urgency. I asked the last person she treated for pain, can she remember? She said yes. I asked about this person and she said it was tramadol and she stated the condition. I said it's scheduled, she said yes. I said do you check orders. she said yes. I asked what if this patient was uncontrolled what would you do next? she said consult with Dr. Wolff and then move forward. I said what would you recommend based on your patient. she said low doses of Norco, I said why? She said it's cheap. I talked about the appropriate patient and conversion to Butrans. I said why would this be a bad option for the patient. She said managed care. I said what about managed care? She said price. I said- do you usually hand out coupons. she said yes if they are close by. I showed her the area where the coupons are...and reviewed the trial offer of Hysingla and went over Butrans. She seemed to like Butrans that it was schedule three and was unsure how to convert the Norco patient. I reviewed. At the end I recapped and closed.
PPLPMDL0020000001	Cleveland	OH	44113	6/10/2015	Discussed portfolio of products, Reviewed appropriate patients, plasma concentration levels, Limited time trial offer, formulary opportunities, said ok will prescribe for appropriate patients that he can get covered.
PPLPMDL0020000001	Akron	OH	44313	6/10/2015	No new information learned on this call.
PPLPMDL0020000001	Stow	OH	44224	6/10/2015	No new information learned on this call.
PPLPMDL0020000001	Mogadore	OH	44260	6/10/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	6/10/2015	Reviewed portfolio, along with Hysingla ER trial card offer and DR. Elbadawy interest in prescribing, said ok will order accordingly, No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	6/10/2015	Visited pain mgmt Shen/Novak along with IM Elbadawy, Hysingla ER Trial card offer and formulary opportunities
PPLPMDL0020000001	Cleveland	OH	44103	6/10/2015	Reviewed portfolio along with trial card offer, sees mostly Medicaid, No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	6/10/2015	Spoke with Amy and explained the Hysingla ER trial offer. Amy said that it sounds like a great way to get the medicine in her patients hands however she hasn't seen any and asked if it's being prescribed. I told Dr it is primarily from pain management practices in the area. Amy said she will keep the information handy when she sees a prescription. Amy said she is seeing a decent amount of Butrans prescriptions and she is stocking all doses. Told her about the trial offer from Butrans .com
PPLPMDL0020000001	Stow	OH	44224	6/10/2015	Spoke with Carla the pharmacist about Hysingla trial card program and she said that Jamie has discussed it with everyone. I reviewed the flow chart for processing it as a secondary claim and made sure they were with the copy cards for her. She said they are on top of it even though they've only seen a couple of scripts. Carla did say they are seeing a good amount of Butrans and have all doses in stock along with copy cards.
PPLPMDL0020000001	Akron	OH	44304	6/10/2015	Reviewed Hysingla attributes, dosing, and conversions. Reviewed the trial offer and discussed the parameters with the pharmacist.
PPLPMDL0020000001	Euclid	OH	44117	6/10/2015	Lunch. Discussed updated 30 day free trial for Hysingla ER, role of office/patient and Dr. DeMico needing to get savings card in hand of patients. Also let him know I should have further information soon, regarding Hysingla ER status on Ohio Bureau Worker's Comp. OxyContin after oxycodone and Butrans for opioid naive/after Tramadol discussed. Reinforced Butrans can be faxed/called in with refills. He did n't realize he could write more than 1 refill for Butrans. Also BWC Ohio access good for Butrans.
PPLPMDL0020000001	Parma Heights	OH	44129	6/10/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44320	6/10/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	6/10/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44130	6/10/2015	Asked doctor if he can find one patient for Hysingla. He said he is seeing fewer patient and they like the IR. He has found a couple patients he mentioned it to who are resist net to try ER. He will find someone. Reviewed savings program and formulary information. He said he does write oxycontin. I told him that's great but some patients may prefer the Hydrocodone molecule and Hysingla would make sense. He agreed. It's. Ice to have
PPLPMDL0020000001	Munroe Falls	OH	44262	6/10/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44130	6/10/2015	Quick call w portfolio piece. Told doc he has shared with me in the past that he prefers the Hydrocodone molecule. Does he have any patients who are taking 3 Norco, who are asking for more and he doesn't want to give them another pill per day? He said he can think of a couple patients like that. Would he consider Hysingla for that patient? Reviewed Hysingla, he asked about coverage. Reviewed formulary grid and savings program. He said he would try to remember it talked about Butrans as an option for patients first opioid. He said that might be a good patient for Butrans if he can convince them about a patch....he had to leave
PPLPMDL0020000001	Parma	OH	44129	6/10/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44320	6/10/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	6/10/2015	Reviewed portfolio of products, Hysingla ER trial cards, said ok will continue to recommend/remind to clinicians.
PPLPMDL0020000001	North Olmsted	OH	44070	6/10/2015	Discussed the trial for Hysingla. didn't get into too much attributes of Hysingla because of the patients waiting.
PPLPMDL0020000001	Cleveland	OH	44129	6/10/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44319	6/10/2015	Reviewed Hysingla attributes, dosing and conversions with the pharmacist. Introduced the new trial offer and how the claim should be processed with the flow chart.
PPLPMDL0020000001	Euclid	OH	44119	6/10/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44106	6/10/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	6/10/2015	Quickly reviewed 4 plans they should look for when deciding on appropriate patient for Hysingla to ensure success when he writes Hysingla. Reviewed savings program with staff. They were swamped
PPLPMDL0020000001	Cleveland	OH	44113	6/10/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	6/10/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44106	6/10/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	6/10/2015	Dr Vucetic said that he had two patients last week that he had to discontinue Butrans for. Dr said he's seeing a pattern of patients who have been on Butrans for a number of months who all of a sudden develop a rash at the application site. Dr said that it must be a production issue. I told Dr to bring it up to our management and he may have an opportunity next week. Discussed his continued success with Butrans efficacy he's seeing clinically. Reviewed Hysingla trial offer and asked for his continued and expanded business for patients on Norco who have pain around the clock and have commercial insurance. Reviewed plans that provide the least resistance.
PPLPMDL0020000001	Euclid	OH	44119	6/10/2015	Met with tech & float pharmacist Jim K. Discussed, left Hysingla ER titration guide, print out for instructions on how to run 30 days free offer as secondary insurance. Sense of urgency with offer expiring 8/15/15. Patients must activate card prior to picking up Rx.
PPLPMDL0020000001	North Olmsted	OH	44070	6/10/2015	Discussed trial offer for Hysingla and reviewed attributes for not just Hysingla but portfolio of our products. I asked questions about pricing and asked about relay health and stocking. I didn't learn too many new things but the pharmacist did tell me this information.
PPLPMDL0020000001	Cleveland	OH	44106	6/10/2015	Reviewed portfolio, along with Hysingla ER limited time trial offer, formulary opportunities, said ok sees a lot of BWC and Medicaid but will consider.
PPLPMDL0020000001	Akron	OH	44333	6/10/2015	Elise told me that she had an elderly man that had been on Butrans and liked it very much because it provided him so much pain relief however after 6 months or so of being on it began getting a rash at all application sites. Elise said she had to discontinue Butrans and place patient on Fentanyl which doesn't work as well. I told her I will report this issue as I know she and Dr Vucetic have had multiple patient over the last year that have had this issue. I focused her back to the success she is having with efficacy and how many patients do tolerate it well. Reminded her of insurance coverage and then transitioned to Hysingla discussing which insurance plans provide the least resistance. I reviewed the trial offer again and told her to write. Elise said it will help because she wants to write it more but has been having a hard time getting it approved. Spoke to Caci and told her about insurance coverage and the trial offer.
PPLPMDL0020000001	Euclid	OH	44119	6/10/2015	Met with newest staff pharmacist Ashley. Discussed Hysingla ER as single entity, extended release Hydrocodone, no acetaminophen, abuse deterrent properties similar to OxyContin. Discussed/ left print out that shows how to successfully run Hysingla ER free trial offer as secondary insurance. Let her know I've communicated to my providers that patients should call & activate savings PRIOR to picking up their Rx.
PPLPMDL0020000001	Tallmadge	OH	44278	6/10/2015	Butrans-went over Scott profile and asked Dr if he has a patient like this on tramadol he can switch-Dr smiled and said yes-I told him I would followup in two weeks to discuss patient and he said ok; OxyContin-Dr said is getting back to prescribing it since more comfortable with abuse deterrent properties-I let Dr know patients can still abuse it its just tougher to crush and chew
PPLPMDL0020000001	Garfield Heights	OH	44125	6/10/2015	Quick review of portfolio of products, Reviewed Hysingla ER plasma concentration and limited time trial card offer for those commercially insured patients, said ok will remind clinicians and himself. No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	6/10/2015	Laura has not written Hysingla yet. She said she hasn't found the right patient yet. I'm asked her what the patient type is that she is looking for? She said that the person is a Norco patient who isn't used to taking more than 3 pills per day. Once they are used to 4-5 pills she doesn't think they would agree to one pill per day. There are some patients on 5 Norco And tramadol which doesn't make sense to her. She might consider one of those patients and just offer 1-2 for breakthrough pain. She said that the plans that Hysingla is covered in, at this time, are not their most common plans. She is keeping Hysingla in mind and believes she will fish the right patient soon. She just found the "perfect" butrans patient, who is pleased with it when little else worked for her and came with side effects. She is having better results with butrans now than she has in the past.
PPLPMDL0020000001	westlake	OH	44145	6/10/2015	discussed where we left off last time. Dr did not offer Hysingla. Dr said he forgot. I asked the doctor to place the coupons and the trial offer on his desk for the next few months thru the offer and try to remember to offer this to appropriate patients and he agreed. We talked about attributes and conversion. I asked Dr what are the signs that someone is ready for a different delivery system, the Dr had much to say. The Dr said he was unclear after all these years of treating pain when that is. I couldn't not give him direction but I did offer the limitations of use which is not acute and not pm. I asked when is it not acute. Dr said he doesn't know for pain...he said a few weeks or is it sever months. I let him ready the indication. I highlighted the butrans naive trial and that it looked at patients who were 3 months established in pain. The doctor said he might have a few patients that meet this criteria. I said im here asking that those uncontrolled pain patients have the option of Hysingla instead of adding another immediate release product to their schedule. Dr said that makes sense. I pushed the trial and the date ending the trial for urgency. The NP seemed to agree more than the doctor and the NP Sherry asked a lot of questions. We reviewed Butrans- The doctor said he likes it because its schedule three and he can do refills. I talked about the mail about patients and would that be an option for them? He said definitely yes. Dr agreed to write for appropriate p
PPLPMDL0020000001	Cleveland Hts	OH	44118	6/11/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44125	6/11/2015	Reviewed portfolio, Hysingla ER trial card offer along with formulary opportunities, said ok will continue to prescribe and present for appropriate patients.
PPLPMDL0020000001	Westlake	OH	44145	6/11/2015	Talked to Carol about the trial offer, she thought that was great and shared her feelings on pa in general. Talked about Butrans and the vast coverage.
PPLPMDL0020000001	Cleveland	OH	44125	6/11/2015	Reviewed portfolio with Linda, will pass on info to staff RPH No new information learned on this call.

PPLPMDL0020000001	Berea	OH	44017	6/11/2015	Reviewed Hysingla trial card in detail and talked about attributes.
PPLPMDL0020000001	Olmsted Falls	OH	44138	6/11/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	6/11/2015	No new information learned on this call.
PPLPMDL0020000001	Berea	OH	44017	6/11/2015	Review hysingla trial program and reviewed hysingla attributes.
PPLPMDL0020000001	Parma	OH	44129	6/11/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	6/11/2015	No new information learned on this call.
PPLPMDL0020000001	Berea	OH	44017	6/11/2015	First thing the dr told me about two patients that he wrote Butrans for and the pa not covering the one. He said he was getting used to writing Butrans. I covered the managed care plans. Highlighted hysingla. He agreed to set the couONS in the patient rooms to help him remember, which I did. Covered the dosing and attributes and dr agreed to offer it.
PPLPMDL0020000001	Independence	OH	44131	6/11/2015	Dropped off saving card information again to make sure they had extra copies. Followed up with rite aid pharmacy call based in conversation with Alyssa on the phone in the morning. Let them know if insurance says Hysingla is NDC blocked, patient will. It be able to get free month. they have gotten Hysingla covered in med d with prior authorization.
PPLPMDL0020000001	Lakewood	OH	44107	6/11/2015	Talked about coverage w Butrans on caresource. Went thru the process for the pa and starting dosages. Dr said his patients were doing well. I spoke to the pa coordinators about hysingla trial. They shared their experiences.
PPLPMDL0020000001	Parma	OH	44129	6/11/2015	Doctor is making some career changes. It is best to catch him at Northfield location on Tuesday. He is in the process of seeing fewer patients at this location. Discussed importance of OARRS and when appropriate to write for ER meds. reviewed positioning for all three products using portfolio piece.
PPLPMDL0020000001	Cleveland	OH	44115	6/11/2015	No new information learned on this call.
PPLPMDL0020000001	Highland Heights	OH	44143	6/11/2015	Lunch. Sat down with prior auth coordinator Marianne. Tried to save a Hysingla 14-day script Dr. Salama wrote, while Marianne on vacation, for Medical Mutual - communicated step edit information, and Dr. and Marianne agreed to stay away from Medical mutual. Dr. Salama also stated, he does not feel comfortable writing 30 days for Hysingla ER, in case it doesn't work for patient (s) and patient will have surplus of medication. I communicated, for future prescriptions, he CAN write 14 days and patients can still get the 14 days free. Presented Marianne with 2 pages of formulary plans that do NOT require prior auth or step edit for Hysingla ER. Dr. Salama says he would like to write for Ohio Worker's Comp; or Med D or Medicaid; but product not covered. I asked he not give up on Hysingla and I'm confident he will have better luck with plans other than Medical Mutual. Reinforced Butrans for BWC and OxyContin after oxycodone. I contacted Walmart, Medina, OH where patient initially went to get script (without savings card) spoke with pharmacist Rich and communicated our Cleveland West rep would stop in within next few days to go over steps for Hysingla ER 30 days free offer.
PPLPMDL0020000001	Sagamore Hills	OH	44067	6/11/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44115	6/11/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	6/11/2015	Reviewed Hysingla ER trial card utilization along with Butrans for those patients requiring around the clock analgesia. No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44118	6/11/2015	Reviewed portfolio, reviewed Hysingla Trial card offer and formulary opportunities said ok. No new information learned on this call.
PPLPMDL0020000001	Beachwood	OH	44122	6/11/2015	They have had success writing for Hysingla. He is trying to stick to the plans it's covered to minimize the extra work. He is writing it for patients who are in 4 Norco per day and looking for more med. He will write Hysingla and a couple IR for breakthrough. He is finding an occasional butrans patient, but typically by the time he sees them they are on more meds than butrans. We discussed a few different patient types for butrans that he
PPLPMDL0020000001	Berea	OH	44017	6/11/2015	Dr said busy-I said understand. Remember when approaching 3 tabs of Percocet that's the time to switch to OxyContin and I will discuss it more next visit
PPLPMDL0020000001	Cleveland	OH	44113	6/11/2015	Reviewed Hysingla ER limited time trial card offer, asked for some new starts since he will begin seeing patients again. Butrans reminder, said ok will continue to find new patients that he can get approved
PPLPMDL0020000001	Cleveland	OH	44125	6/12/2015	Reviewed portfolio, Hysingla ER Trial card offer, said ok will consider for appropriate patients
PPLPMDL0020000001	Westlake	OH	44145	6/12/2015	Talked to the office manager a while, dr buchez is in the hospital. Talked about getting them information via purdue on protecting their medications. I did check and it was an orderable item. I went thru the one I had in my bag today. And with Brian came we discussed did he want to put these with the Butrans or hysingla coupons and he thought that was a great idea. We talked about abuse deter properties of Purdue products. I asked him no matter if he treats one appropriate patient or 100- please consider Hysingla for those appropriate patients instead of adding another immediate release to their atc schedule. Brian agreed. and I asked him to keep it top of mind for the next few months while the trial was going on. I said is that reasonable and he said yes.
PPLPMDL0020000001	Cleveland	OH	44119	6/12/2015	Left literature for Dr. Mehta With med asst. focused on update to Hysingla ER 30 day free offer. Presented entire Purdue Portfolio of single entity, extended release opioids.
PPLPMDL0020000001	Cleveland	OH	44112	6/12/2015	No new information learned on this call.
PPLPMDL0020000001	Beachwood	OH	44122	6/12/2015	No new information learned on this call.
PPLPMDL0020000001	Green	OH	44232	6/12/2015	Spoke with Matt the pharmacist and discussed the new trial offer for hysingla. I showed Matt the flow chart and discussed how to process the trial offer in the event of a PA. Matt said thanks and that he will make sure to let the staff know and said that the other pharmacist has left to go to the Brittan Rd store.
PPLPMDL0020000001	Brooklyn	OH	44144	6/12/2015	Reviewed portfolio new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	6/12/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	6/12/2015	Talked about workers comp and med d coverage for Butrans. I asked him if he was going to offer hysingla and he said maybe.
PPLPMDL0020000001	Cleveland	OH	44113	6/12/2015	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	6/12/2015	No new information learned on this call.
PPLPMDL0020000001	Uniontown	OH	44312	6/12/2015	No new information learned on this call.
PPLPMDL0020000001	Valley View	OH	44125	6/12/2015	No new information learned on this call.
PPLPMDL0020000001	Strongsville	OH	44136	6/12/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44125	6/12/2015	Reviewed portfolio No new information learned on this call.
PPLPMDL0020000001	Uniontown	OH	44685	6/12/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44312	6/12/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	6/12/2015	No new information learned on this call.
PPLPMDL0020000001	Richmond Heights	OH	44143	6/12/2015	Met with prior auth coordinator Marianne and med asst Tiffany. Updated all 3 product savings cards. Dr Moufawad asked me to place in gray file drawers in his office. Left business card with both Tiffany & Marianne. Left Marianne PBM Know your Tiers piece and Hysingla ER formulary grids. Discussed updated Hysingla ER 30 days free. Quick call with Dr Moufawad. Presented entire portfolio, yet focus on 30 days free offer for Hysingla ER.
PPLPMDL0020000001	Cleveland	OH	44113	6/12/2015	No new information learned on this call.
PPLPMDL0020000001	Uniontown	OH	44685	6/12/2015	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	6/12/2015	OxyContin-dr said he continues to try to switch at earlier tablet count; butrans-dr said patients he has put on are doing great-showed Scott profile and asked him to look for someone like Scott-dr said he would
PPLPMDL0020000001	Cleveland	OH	44130	6/12/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	6/12/2015	Talked about putting hysingla coupons in each room with managed care grid. Reviewed trial offer with ma's. Dr agreed to write hysingla. We talked butrans and highlighted caresource and workers comp.
PPLPMDL0020000001	Strongsville	OH	44136	6/12/2015	No new information learned on this call.
PPLPMDL0020000001	Independence	OH	44131	6/12/2015	Asked him which he will write for in the next week...butrans or Hysingla. He said butrans. I told him med d butrans. He said ok
PPLPMDL0020000001	Parma	OH	44129	6/12/2015	Had enough time to hand savings card information and updated formulary information for this location as a follow up to Jenny's call. He said he understands to be selective in plan he chooses to write Hysingla. He knows that butrans has much better coverage now.
PPLPMDL0020000001	Westlake	OH	44145	6/12/2015	Waved and asked if I could explain a new trial offer ending in august. I highlighted the trial of hysingla and reminded him of attributes. I asked how he felt about this offer for his patients. Dr said he thought it sounded ok and he would think about it
PPLPMDL0020000001	Beachwood	OH	44122	6/12/2015	No new information learned on this call.
PPLPMDL0020000001	Beachwood	OH	44122	6/12/2015	No new information learned on this call.
PPLPMDL0020000001	Strongsville	OH	44136	6/12/2015	No new information learned on this call.
PPLPMDL0020000001	Stow	OH	44224	6/12/2015	Spoke with pharmacist Kevin about hysingla. Kevin said he knows about it but has not seen any prescriptions. I discussed hysingla attributes, dosing and conversions and the trial offer. Kevin said it sounds like a great idea and will keep the flow chart we reviewed.
PPLPMDL0020000001	Akron	OH	44319	6/12/2015	Quick hello at window and reviewed the hysingla initiation and titration guide with dosing and conversions. I asked dr if he would look at his current Norco patients as candidates as long as they are in daily around the clock pain? Dr asked about coverage. I asked him if he was sold on the efficacy and safety first and dr said yes. Reviewed the trial program and then asked him for new Butrans starts.
PPLPMDL0020000001	Independence	OH	44131	6/12/2015	Doctor showed me time magazine article. He believes there is a place for ER meds but that too many patients are used to IR managing their pain. He will keep Hysingla in mind for patients but doesn't anticipate writing for much of it primarily because of the insurance coverage. He has a few patients on oxycontin, but because of the extra scrutiny is trying to find alternative treatments. We revisited butrans again where I discussed butrans as patients first opioid. He thought it is a perfect option for that patient but said coverage is bad. I'm let him know that coverage for butrans has significantly improved, showed him formulary grid and discussed the med d patient. He will try it more often. He was happy to see this information.
PPLPMDL0020000001	Rocky river	OH	44116	6/12/2015	Talked about abuse deter properties of oxycontin and hysingla. I asked that instead of adding norco to a patients atc schedule that they instead write hysingla once a day with these attributes. I talked about trial offer and tried to create a sense of urgency with the end date. She said would try it eventually.
PPLPMDL0020000001	Beachwood	OH	44122	6/12/2015	OxyContin-dr said getting good results and no problems with coverage; butrans-went over Scott profile along with caresource coverage and dr said he will look for a patient
PPLPMDL0020000001	Cleveland	OH	44114	6/15/2015	Discussed portfolio, identified appropriate patients, Reviewed Hysingla ER plasma conc. levels, Initiation/Titration, Formulary opportunities and Limited time trial card offer, Said ok will continue to consider/prescribe for appropriate patients that have coverage.
PPLPMDL0020000001	Cleveland	OH	44130	6/15/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	6/15/2015	Reviewed portfolio of products, discussed appropriate patients, dosing strengths, trial card offer, plasma conc. level said ok will consider, said she has a patient in mind.
PPLPMDL0020000001	Cleveland	OH	44195	6/15/2015	Reviewed Hysingla ER plasma conc. levels, dosing, limited trial card offer along with OxyContin/Butrans for those patients that require around clock analgesia, Said Ok will continue to recommend and consider for those appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44195	6/15/2015	No new information learned on this call.
PPLPMDL0020000001	akron	OH	44333	6/15/2015	No new information learned on this call.

PPLPMDL0020000001	Cleveland	OH	44107	6/15/2015	No new information learned on this call.
PPLPMDL0020000001	Rocky River	OH	44116	6/15/2015	Talkied about Butrans starting doses and caresource. Talked about hysingla starting doses with commerial patients not med d that he wrote a script and it was rejected cause it was not covered. Gave managed care grid and trial offer leave behinds.
PPLPMDL0020000001	University Hts	OH	44118	6/15/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44112	6/15/2015	No new information learned on this call.
PPLPMDL0020000001	CLEVELAND	OH	44195	6/15/2015	Reviewed Portfolio of products along with Hysingla ER trial card, Troy said ok will continue to recommend and order accordingly.
PPLPMDL0020000001	Cleveland	OH	44195	6/15/2015	Visited dept. Reviewed portfolio
PPLPMDL0020000001	Cleveland	OH	44195	6/15/2015	Reviewed portfolio, No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44114	6/15/2015	Reviewed portfolio along with Trial card offer said ok will order accordingly No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44305	6/15/2015	Asked for Jenna the pharmacist who just moved to this pharmacy and she isn't working today. Discussed hysingla with tech staff reviewing attributes, dosing and conversions. Introduced trial offer.
PPLPMDL0020000001	Cleveland	OH	44195	6/15/2015	No new information learned on this call.
PPLPMDL0020000001	Euclid	OH	44117	6/15/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44320	6/15/2015	No new information learned on this call.
PPLPMDL0020000001	Stow	OH	44224	6/15/2015	Told dr about hysingla and Butrans patient types, and reviewed the hysingla attributes. Joe said that he has yet to write hysingla but thinks it's going to be a great product. Joe said that he's written Butrans a week or so ago and hasn't heard back from the patient and then told me that he's leaving Azem/Hegde and is going to be starting a practice with one dr and another NP in Azems old office and should be up and running in September.
PPLPMDL0020000001	Rocky River	OH	44116	6/15/2015	Discussed hysingla trial offer and reviewed attributes.
PPLPMDL0020000001	Parma	OH	44129	6/15/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland Hts	OH	44118	6/15/2015	OxyContin-asked dr if switching at 3-4 tabs of Percocet to OxyContin is possible in his practice-dr said yes and tries to switch over as low as possible-agreed great place to switch and asked for continued prescriptions; butrans-dr said he needs reminded-told him to make it simple-when tramadol patient approaches 200mg that's butrans time-dr said ok
PPLPMDL0020000001	Parma	OH	44134	6/15/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44130	6/15/2015	Doc wanted to schedule an appointment with me to discuss treating pain patients in his practice. That is scheduled Friday.
PPLPMDL0020000001	Fairlawn	OH	44333	6/15/2015	No new information learned on this call.
PPLPMDL0020000001	Fairlawn	OH	44333	6/15/2015	Spoke with sue briefly about the Butrans trial offer and then the hysingla flow chart. Discussed them having to call their tech support but she said most of the time they don't need to do it.
PPLPMDL0020000001	Independence	OH	44131	6/15/2015	No new information learned on this call.
PPLPMDL0020000001	Garfield Hts	OH	44125	6/15/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	6/15/2015	No new information learned on this call.
PPLPMDL0020000001	Rocky river	OH	44116	6/15/2015	I didn't get to see the doctor today, but i did talk to the nurses about the trail offer, gave them coupons and managed care grids
PPLPMDL0020000001	Middleburg Heights	OH	44130	6/15/2015	They will be calling me to schedule time. I think my persistence is almost paying off. They appreciate savings cards and information
PPLPMDL0020000001	Parma	OH	44129	6/15/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	6/15/2015	Doctor said that although she doesn't want to treat pain patients, there really isn't anyone to refer to and sometimes they have to treat them. she appreciates the ER options. Reviewed pain portfolio piece and positioning for each. She has patients taking Norco that would be appropriate for Hysingla. She will try to find one patient. Reviewed savings card and formulary coverage. She said she would still choose oxycontin if patient was on Percocet. Positioned butrans as patients first opiod and she thought that made sense.
PPLPMDL0020000001	Westlake	OH	44145	6/15/2015	We talked about his recent butrans script for a patient. He explained the patient type and that the patient was doing alright. I highlighted managed care plans and the dosing/initiation.
PPLPMDL0020000001	Parma	OH	44129	6/15/2015	She feels there is a need for Hysingla and is interested in trying to prescribe it again. Reviewed formulary and savings card information and she committed to finding patient with one of those commercial insurance plans.
PPLPMDL0020000001	Middleburg Hts.	OH	44130	6/15/2015	Reviewed butrans as patients first opiod. She thinks that's a good place for it. Reviewed cover my meds with Steve because he was complaining about PA's.
PPLPMDL0020000001	Akron	OH	44333	6/15/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44109	6/15/2015	Reviewed portfolio along with Limited trial card card offer. Said ok, No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44130	6/15/2015	Reviewed formulary coverage for butrans and why he should consider it as patients first opiod instead of Percocet, Norco or even tramadol. Let him know that coverage is no longer the issue with butrans because Hysingla is our new med that has limited coverage. He smiled. So as much as I want him to get experience with Hysingla, he is going to push back in coverage...but to let me know when he finds a pa tient that is appropriate for once daily Hydrocodone with ADP? He smiled again
PPLPMDL0020000001	Westlake	OH	44145	6/15/2015	Talked the ma about hysingla and the trial offer. they were to busy to get into the fine details. I asked to see Dr. Duncan but everyone was in a room.
PPLPMDL0020000001	Lakewood	OH	44107	6/15/2015	Reviewed previous conversation and brought it into todays discussion. Dr said he still is referring patients out that he doesn't want to treat on pain medications and yet is still treating atc pain. Dr agreed that caresource is a big plan for his office so we talked about Butrans coverage in this area. dr said he has not written for this insurance group but by the end of the conversation i was asking him to offer appropriate tramadol patients the atc butrans option. We talked about schedule 3 but he still will see them back monthly. We talked about dosing and conversion from tramadol to Butrans. We talked about abuse deter properties of Oxycontin which lead me to hysingla. After revieing attributes the doctor said is sounded great. I said does it sound like you would offer this to a patinet. he said yes. I asked who was coming in this week he could try it on? And the dr. started to stumple. We reviewed what dosages were avaiable and he was most interested in the under 80 mg equivalent dosages. I touched on steady state and every 24 hour dosing. I asked about when his patients come back what do they typically say when you give them a dose increase or change of meds. The doctor talked a while about this topic and those that he doesn't treat and won't continue their opiods. I asked if he asks them if they wished it lasted longer? He said no its not usually what he says. We talked about what a great sawgway to hysingla or tramadol to Butrans if they were appropriate.
PPLPMDL0020000001	Akron	OH	44320	6/15/2015	I told Monique that she needs to be looking for those tramadol and Norco patients who are in pain around the clock and use Butrans for those patients. Monique said she hates writing IR opiods and it's becoming a problem. I told her the possible solution is Butrans. I reminded her again the Caresource criteria. Monique said she forgot about that and has tons of them wanting more pills. Monique told her MA Kathy to remember Butrans for CareSource and she's going to write more of it. I told her about the trial offer and copy card for commercial patients and told her I would follow up in the next few days.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/15/2015	Spoke with dr about taking a few minutes to speak with a home office marketing director for Butrans. I told dr that he has an opportunity to make any suggestions about product improvement and clinical experience. Dr said that he is just too busy on Tuesday to take the time and told me to speak with him for me? I told dr he's missing an opportunity and to reconsider. Dr said he might be able to do it before lunch tomorrow.
PPLPMDL0020000001	Cleveland Hts	OH	44118	6/16/2015	Reviewed portfolio, identified appropriate patients that are requiring around the clock analgesia, asked for those patients that have comm. coverage, trial card offer, said ok will continue to identify the patients that are appropriate for ERO
PPLPMDL0020000001	Akron	OH	44312	6/16/2015	Discussed Butrans and hysingla with dr and dr said that he write a Butrans for a patient recently but the patient had a high coinsurance amount and couldn't keep taking it. I told dr to continue looking for the right patient and dr said he goes to Heather Knoll and its on formulary there so will continue to look. dr said he's he newly appointed medical director there. Discussed hysingla attributes, appropriate patient types and the trial offer. Dr said it sounds like a great way to get the ball rolling and would make it easier for him and his staff.
PPLPMDL0020000001	Cleveland	OH	44106	6/16/2015	Reviewed portfolio, Hysingla ER plasma conc. levels, formulary opportunities, trial card offer. said ok will consider for appropriate patients that she can get covered on.
PPLPMDL0020000001	Cleveland	OH	44106	6/16/2015	Discussed portfolio, identified appropriate patients, plasma conc. levels, formulary opportunities, and trial card offer. Said ok will continue to consider and consult for ERO with appropriate patients. Reiterated limited population due to Medicaid and MEd D
PPLPMDL0020000001	Cleveland	OH	44118	6/16/2015	Reviewed portfolio, discussed/identified appropriate patients, formulary opportunities, Limited time trial card offer, said ok will discuss and consider for those patients requiring around the clock analgesia
PPLPMDL0020000001	Cleveland	OH	44109	6/16/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/16/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	6/16/2015	Quick hallway call where I asked her if she ever had patients tell her they wished their Hydrocodone lasted longer? She said sure. I quickly reviewed the option of Hysingla and how similar to oxycontin. She asked that I leave her information
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/16/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44313	6/16/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44106	6/16/2015	Discussed portfolio, reviewed Hysingla Er Trial card offer, No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44112	6/16/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44310	6/16/2015	Lunch appointment with dr and staff and discussed Butrans and hysingla attributes, dosing, conversions, managed care, patient types. I asked dr for his continued support of Butrans for those on tramdol around the clock and hysingla for those on Norco in pain around the clock. Discussed trial offer for both products. Dr said he wrote oxycontin recently for a patient on percocet around the clock however was too expensive for the patient. I asked for continued support of all products.
PPLPMDL0020000001	Cleveland	OH	44130	6/16/2015	No new information learned on this call.
PPLPMDL0020000001	Parma Heights	OH	44130	6/16/2015	No new information learned on this call.
PPLPMDL0020000001	Highland Heights	OH	44143	6/16/2015	No new information learned on this call.
PPLPMDL0020000001	Brooklyn	OH	44144	6/16/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	6/16/2015	Quick call. Reminding him that butrans is appropriate as patients first opiod. Coverage has never been better. He mentioned that he checked my formulary sheet for a patient, but it wasn't on it so he didn't write Hysingla. I reviewed savings program and that it has gone through on med d.
PPLPMDL0020000001	Berea	OH	44017	6/16/2015	Discussed follow up from last week and talked about hysingla trial offers in the patietn rooms. Reviewed dosing and managed care a bit. Dr said he would try it.
PPLPMDL0020000001	Akron	OH	44333	6/16/2015	Quick message about hysingla patient types and trial offer. Explained again how it works to hopefully take some pressure of her and the staff to complete a PA when necessary for the product. Elise said she is going to keep trying. Reviewed her insurance plans covering the product again.
PPLPMDL0020000001	Akron	OH	44312	6/16/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44109	6/16/2015	No new information learned on this call.

PPLPMDL0020000001	Cleveland	OH	44130	6/16/2015	No new information learned on this call.
PPLPMDL0020000001	C. Falls	OH	44223	6/16/2015	No new information learned on this call.
PPLPMDL0020000001	Lyndhurst	OH	44124	6/16/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44106	6/16/2015	No new information learned on this call.
PPLPMDL0020000001	Lyndhurst	OH	44124	6/16/2015	No new information learned on this call.
PPLPMDL0020000001	Highland Heights	OH	44143	6/16/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	6/16/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	6/16/2015	Quick reminders on Butrans prescribing and when along with hysingla trial offer. Dr said he just write another hysingla and really likes it. Dr said he will continue to prescribe all products.
PPLPMDL0020000001	Akron	OH	44312	6/16/2015	No new information learned on this call.
PPLPMDL0020000001	Stow	OH	44224	6/16/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/16/2015	Quick hello in hospital and reminded dr again of the hysingla ER trial offer and coverage for BWC. Explained that it may be 3-6 months before it hits . Reviewed insurance coverage for hysingla path of least resistance.
PPLPMDL0020000001	Akron	OH	44312	6/16/2015	Reviewed Butrans patient types and his ability to titrate every 3 days if necessary. Dr spoke about a male patient in his 30s who he is looking to place on Butrans. Dr said he's a patient that has been on a lot of meds in the past and wants him to be on a patch vs pills. I reviewed initiation dosing and titration and he said he's going to start on 10mcg and titrate. Discussed insurance coverage and went into hysingla use for his Norco patients in oain around the clock. Dr said he still has the copy card and trial offer on his desk.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	6/16/2015	Reviewed the trial offer again and asked for business.
PPLPMDL0020000001	Parma	OH	44129	6/16/2015	Quick discussion with Mike about the hysingla trial offer pharmacy flow sheet and the most frequently asked questions sheet.
PPLPMDL0020000001	Berea	OH	44017	6/16/2015	Myra likes the idea of Hysingla and discussed it with a patient earlier today. What is limiting her use right now is the cost and limited coverage. Spent time reviewing the savings program and formulary. She promised to find one patient.
PPLPMDL0020000001	Cleveland	OH	44130	6/16/2015	introduced hysingla and the attributes. Dr wasn't sure he would use a product because its hasn't been out long enough. Highlighted attributes and covered abuse deter properties. Dr asked me if it lasts a full 24hours and i stated that the hydrocododone was delivered over the 24hours and showed plasma level visual aids. But i told him i didn't know more than this...i asked if he would try it and see what his patient think. He said he was going to wait to hear more reviews of the product.
PPLPMDL0020000001	Stow	OH	44224	6/16/2015	Doc said there is much confusion about opioids right now. They don't want them writing, there are limited pain management docs. I reviewed the patient type appropriate for ER opioids using portfolio piece and initiation guides. Reviewed newest option of Hysingla and who that patient might be. He thinks it's a good option but he proly doesn't have too many patients that would be appropriate. He looked into butrans after my last visit and he heard that a pain management doctor told him about QTC prolongation....we reviewed that was seen with higher doses of butrans, thus the max dose of 20mcg. reviewed butrans as patients first opioid.
PPLPMDL0020000001	Cleveland	OH	44109	6/17/2015	OxyContin-dr said getting patients switched sooner is key to getting them off Percocet-agreed and asked where is optimal switch time-dr said 3 and I said perfect! Asked for her continued prescribing of patients already in her practice; butrans-dr said she's looking for caresource patients and coverage is going through smooth
PPLPMDL0020000001	Cleveland	OH	44130	6/17/2015	Reviewed Hysingla ER trial card offer said she will relay info.No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44109	6/17/2015	he said she needs reminders. she is trying not to write c2 products anymore, probably wont write hysingla. didn't have the best luck with some patiens on butrans, but she thinks that referring them to pain management on butrans is a good idea. she will write it again because it is c3 and not a pill.
PPLPMDL0020000001	Cleveland	OH	44109	6/17/2015	Discussed portfolio of products, appropriate patients along with formulary opportunities and savings cards/ limited time trial card offer for Hysingla ER, Said ok will consider, majority of patients are medicaid/Med D
PPLPMDL0020000001	Cleveland	OH	44109	6/17/2015	Discussed portfolio of products, abuse deterrent characteristics, reiterated that all opioids can be equally abused. Discussed appropriate patients along with formulary opportunities and savings cards/ limited time trial card offer for Hysingla ER, Said ok will continue to prescribe and consider for appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44109	6/17/2015	Discussed portfolio of products, appropriate patients along with formulary opportunities and savings cards/ limited time trial card offer for Hysingla ER, plasma conc. levels,Said ok will consider, majority of patients are medicaid/Med D
PPLPMDL0020000001	Akron	OH	44313	6/17/2015	Message at window and reminded him that BWC is paying for Butrans and explained the Caresource PA. Dr said he forgot about caresource and will try it for them. I asked him to look for patients on Tramadol around the clock and in pain as candidates and those on Norco around the clock for hysingla and explained trial offer.
PPLPMDL0020000001	akron	OH	44333	6/17/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44109	6/17/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44109	6/17/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44305	6/17/2015	Spoke with Jenna the pharmacist and discussed again the hysingla trial offer and glow chart. She said I have discussed that with her in her other store and is all good. Asked about the doses of Butrans they stock and she said they have the 5 and 10mcg but not sure after a week or two who's writing.
PPLPMDL0020000001	Mayfield Heights	OH	44124	6/17/2015	No new information learned on this call.
PPLPMDL0020000001	BEDFORD	OH	44146	6/17/2015	No new information learned on this call.
PPLPMDL0020000001	Lyndhurst	OH	44124	6/17/2015	No new information learned on this call.
PPLPMDL0020000001	Mayfield Hts	OH	44124	6/17/2015	Lunch. Discussed patient access for Hysingla ER, Butrans and OxyContin. Reviewed updated formulary grids for all - focusing on three pages of plans (30 plans) that do NOT require a step edit or prior auth for Hysingla ER.
PPLPMDL0020000001	Cleveland	OH	44109	6/17/2015	Reviewed 30 days free - and asked Dr. when he or Denise hand out savings cards to communicate to patient that its critical to call toll free phone # and activate 30 days free; additional savings each month will also be activated. Dr Laham appreciated the updated formulary info and says very helpful.
PPLPMDL0020000001	Bedford	OH	44146	6/17/2015	Visited PMR dept.
PPLPMDL0020000001	Akron	OH	44320	6/17/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	6/17/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	6/17/2015	Butrans-dr said since Dawn left he is picking up his medical practice and seeing more pain patients-dr said he really likes butrans for his elderly patients and those who like convenience of a 7 day patch-emphasized caresource patients and dr said he knows; OxyContin-dr still not using in practice
PPLPMDL0020000001	Cleveland	OH	44109	6/17/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44109	6/17/2015	Reviewed Hysingla ER trial card offer, Butrans utilization, said ok will continue to look for and order accordingly
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/17/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44102	6/17/2015	Left portfolio of info for Ed. will relay appt request
PPLPMDL0020000001	Beachwood	OH	44122	6/17/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	6/17/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	6/17/2015	Butrans-Elaine said patients like it for pain relief and 7 day dosing convenience-switching from tramadol and low dose Norco most of the time-looks for opioid naive patients but said few and far between-went over Scott profile and she said that is her favorite type of patient
PPLPMDL0020000001	Bedford	OH	44146	6/17/2015	No new information learned on this call.
PPLPMDL0020000001	Beachwood	OH	44122	6/17/2015	No new information learned on this call.
PPLPMDL0020000001	Fairlawn	OH	44333	6/17/2015	Introduced hysingla to Gary the pharmacist. Discussed attributes, dosing and conversions. Gary asked if its abuse deterrent and I told him it has abuse deterrent properties. Reviewed the trial offer and the flow chart.
PPLPMDL0020000001	Fairlawn	OH	44333	6/17/2015	Introduced hysingla to the pharmacist. Reviewed attributes, dosing and conversions. She said she's read about it from the pharmacy but asked about the abuse deterrence. Explained it from the MVA and reviewed the FDA tiers. Reviewed the trial offer and the pharmacy flow chart.
PPLPMDL0020000001	Cleveland	OH	44195	6/17/2015	Reviewed OxyContin savings cards and formulary opportunities, along with Hysingla ER, plasma conc. levels, formulary opportunities and limited time trial card offer, said ok will continue to prescribe and will follow up at next months Pal-Med Mtg
PPLPMDL0020000001	Cleveland	OH	44114	6/17/2015	Butrans-dr and staff confirmed he is still prescribing it for his patients and still having problems with workers comp approving the 7.5 mcg patch but said local pharmacist is pushing it through; OxyContin-dr said uses it more
PPLPMDL0020000001	Cleveland	OH	44115	6/17/2015	1. Discuss ESI update for Hysingla ER 2. Determine when it could be reviewed again
PPLPMDL0020000001	Bedford	OH	44146	6/17/2015	he was very busy, short call asking how his experience is so far with hysingla. he said he likes what he is seeing so far but hasn't gotten as many approved as he would like. reviewed saving program with him briefly and then Marian who does the prior authorizations.
PPLPMDL0020000001	Akron	OH	44307	6/17/2015	Introduced hysingla to Kyle the pharmacist. Discussed attributes, conversions and dosing. Reviewed trial offer and did tell him I know he sees very little commercial insurance however told him about the approval from the P&T committee for BWC. Kyle said that's big and then discussed the abuse deterrent properties and FDA tiers. Reviewed Butrans and oxycontin attributes as well and Kyle said he continues to fill oxycontin but fills a lot of percocet and IR oxycodone. I asked him if he ever recommends that the patient talks to their dr about an ER Oxycodone option? Jekly said he has a few times.
PPLPMDL0020000001	Beachwood	OH	44122	6/17/2015	quickly reviewed limited time savings program for patients to encourage prescribers to get experience with hysingla and allow staff time in case a PA is required. As she knows, this is not the case anymore for once weekly butrans...totally appropriate as patients first opioid.
PPLPMDL0020000001	Northfield	OH	44067	6/18/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	6/18/2015	Discussed formulary coverage, trial card offer along with Butrans Med D coverage, Said ok will continue to prescribe for appropriate patients
PPLPMDL0020000001	University Hts	OH	44118	6/18/2015	Reviewed portfolio, Discussed and identified appropriate patients, Reviewed plasma conc. levels,Hysingla ER trial card offer along with formulary opportunities. Said ok will continue to discuss with patients that have coverage, sees alot of acute pain patients.
PPLPMDL0020000001	Cleveland	OH	44115	6/18/2015	Reviewed Portfolio, reminded of Hysingla ER limited time trial card offer, plasma conc. levels, formulary concerns, said ok will continue to recommend and prescribe for appropriate patients that have coverage.
PPLPMDL0020000001	Cleveland	OH	44113	6/18/2015	Reviewed Portfolio, reminded of Hysingla ER limited time trial card offer, plasma conc. levels, formulary concerns, said ok will continue to recommend and prescribe for appropriate patients that have coverage.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/18/2015	Quick hello to dr as I was talking to Glenn. Reminded him about the Plans he should be writing hysingla for and BWC reminder.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/18/2015	Quick messages to linda as I was placing trial card info product for hysingla and Butrans. I told her to please continue to search for Norco candidates in pain around this clock and Butrans patients coming off of tramdol around the clock. I told her that hysingla was approved on BWC and will let her know when that goes into effect. Linda said she is glad I updated her.

PPLPMDL0020000001	Cleveland Hts	OH	44118	6/18/2015	Reviewed trial card offer, No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44130	6/18/2015	Let him know that Caresource has been approving Hysingla with a prior authorization for that patient who tells you they want their hydrocodone to last longer. That made him think for a minute. He said he might have that patient, but his staff doesn't have time for the prior authorization and left.
PPLPMDL0020000001	Westlake	OH	44145	6/18/2015	Discussed hysingla attributes and trial offer. Dr asked about managed care and I showed him the grid. Dr said he has mostly med d patients on chronic pain patients. I asked if he would keep the option open for appropriate commercial patients given the opportunity for this product. He said maybe.
PPLPMDL0020000001	Parma	OH	44129	6/18/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44111	6/18/2015	Spoke to office manager about hysingla and about a date to come in and see the prescribers. Left a variety of resources for the drs to review.
PPLPMDL0020000001	Akron	OH	44333	6/18/2015	Dr told me that he started a new patient on Butrans this week. Dr said the patient was coming off of tramadol and started on the 10mcg patch. I asked dr why Butrans and he told me that Vucetic told him to. Discussed hysingla attributes and dosing along with trial card information.
PPLPMDL0020000001	Stow	OH	44224	6/18/2015	Reviewed the hysingla attributes and dosing along with conversions and then discussed the trial offer with her. Dr said she's impressed Purdue is going to cover 100% of the copay for the first month. I asked dr if she could find just one patient on Norco around the clock and have commercial insurance? Dr said she'll try.
PPLPMDL0020000001	Westlake	OH	44145	6/18/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44130	6/18/2015	He said he is starting to think about hysingla, but hasn't written it yet. Patients like their IR? He will have to try it with someone who hasn't been on IR very long or on fewer IR pills.
PPLPMDL0020000001	Middleburg Heights	OH	44130	6/18/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44114	6/18/2015	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	6/18/2015	Reviewed trial offer and managed care for hysingla.
PPLPMDL0020000001	Lakewood	OH	44107	6/18/2015	Tied in caresource w Butrans. And talked about hysingla for the uncontrolled atc scheduled norco patients
PPLPMDL0020000001	Parma	OH	44129	6/18/2015	Doc said his practice is transitioning. He will be seeing more pain patients and wanted a refresher on positioning and when to use purdues ER meds. Discussed around the clock pain, 3-4 pills per day as time to consider Er meds like oxycotin and Hysingla. Butrans is appropriate oar for patients first opioid or after Tramadol. He will keep keeping this in mind as his practice evolves.
PPLPMDL0020000001	Westlake	OH	44145	6/18/2015	Dr asked if any scripts went thru for hysingla. I said no. I reviewed w him managed care grid and trial offer. Dr said this will help the patients. Covered a few attributes and talked Butrans. Dr agreed to put hysingla savings cards in each room
PPLPMDL0020000001	Tallmadge	OH	44278	6/18/2015	Spoke with the pharmacy tech Natalie about Butrans trial offer and provided her with the printed out trial offer. I asked her to place them on the shelf with the product. She said the have a few doses in stock and will do it.
PPLPMDL0020000001	Chagrin Falls	OH	44022	6/18/2015	Reminded him that butrans is appropriate as patients first opioid, only c3 ER med. And asked him to consider patient who wishes their Hydrocodone lasted longer for Hysingla. Left him insurance information for best first experience. reviewed savings program with staff.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/18/2015	No new information learned on this call.
PPLPMDL0020000001	Highland Heights	OH	44143	6/18/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/18/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland Hts	OH	44118	6/18/2015	Reviewed trial card offer, will remind RPH, no new info learned
PPLPMDL0020000001	Lakewood	OH	44107	6/18/2015	Highlighted hysingla attributes and trial offer. Asked how often he has used norco w atc dosing? He said on occasion. I asked if this was an option for patients he said maybe so.
PPLPMDL0020000001	Akron	OH	44333	6/18/2015	Dr and elise both told me about their displeasure with the number of patients that have had rashes with Butrans and have had to DC Butrans for those patients. I will be sending an email explaining these multiple issues. I told dr that I will provide him with contact information for medical services so he can discuss the situation with another medical professional. Dr did say he still really likes Butrans and the efficacy it brings and that he write a new prescription for it today and one for hysingla as well. Dr said he used the trial offer. Reviewed managed care plans to write it for and asked for continued business.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/18/2015	Quick message about oxycotin patients and titrating them when necessary every 1-2 days. I asked him to write hysingla for the first time and reviewed attributes.
PPLPMDL0020000001	Fairview park	OH	44111	6/18/2015	Talked abtuntrential offer and attributes. Pharmacist said it made sense and the tech asked questions about processing. I used the flow chart to help explain. Highlighted abuse deter properties of OxyCotin and hysingla. Gave fair balance of abuse potential for all opioids including ourdue products.
PPLPMDL0020000001	Lakewood	OH	44107	6/18/2015	Talked mostly about trial offer and limitations of use w hysingla. Tech seemed comfortable with the process of the trial offer and the tech asked about if it had abuse deter properties. I covered these topics.
PPLPMDL0020000001	Westlake	OH	44145	6/18/2015	Reviewed hysingla trial offer and dosing. Covered OxyCotin and abuse deter properties of hysingla and OxyCotin.
PPLPMDL0020000001	Akron	OH	44333	6/18/2015	Short discussion over lunch due to a provider meeting. Discussed hysingla new starts and how she can identify patients on Norco around the clock. Elise said she likes the product and thanked me for helping her streamline managed care. Elise and dr Vucetic spoke to me about the high number of patients they have had to DC Butrans on due to itching and rash. I will be sending an email explaining the multiple adverse events. I asked multiple questions to ensure specific information is obtained. Elsie said that she will continue to write.
PPLPMDL0020000001	C. Falls	OH	44223	6/18/2015	Reviewed the hysingla trial offer again and asked if they have had any issues? Cindy said that they have processed one or two without a problem. Discussed Butrans trial offer and gave them printed trial cards.
PPLPMDL0020000001	Fairlawn	OH	44333	6/18/2015	Spoke with Gilbert and a student of his. Reviewed hysingla trial offer and the trial offer for Butrans. Gilbert said that he is impressed with the hysingla trial offer and believes it's really going to ramp up sales.
PPLPMDL0020000001	Fairview Park	OH	44126	6/19/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44114	6/19/2015	Reviewed portfolio, identified appropriate patients, Reviewed trial card offer with him and Lauren, said ok will continue to prescribe and consider for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44195	6/19/2015	Discussed portfolio of products, appropriate patients, Formulary opportunities, Intro to Schirron who will be taking her place. Said ok will recommend products in the transition,
PPLPMDL0020000001	Beachwood	OH	44122	6/19/2015	Reviewing savings card information and formulary with Vicky and Doctor y said hi and I told him I was just telling her that he should ink of Hysingla for appropriate patients with caremark tricar, and express scripts insurance for the best success. He said ok
PPLPMDL0020000001	Cleveland	OH	44195	6/19/2015	Intro to portfolio of products, discussed appropriate patients, Initiation/Titration, said ok will consider as he gets orientated,
PPLPMDL0020000001	Cleveland	OH	44115	6/19/2015	Reviewed portfolio, discussed appropriate patients, formulary opportunities, limited time trial card offer. Identified a patient for this afternoon, agreed he would start patient, reviewed w/Martha, said ok
PPLPMDL0020000001	Cleveland	OH	44103	6/19/2015	Reviewed portfolio, Trial card offer, 99% medicaid will fill and order accordingly
PPLPMDL0020000001	Beachwood	OH	44122	6/19/2015	Quick call because she was swamped since she just came back from vacation. She said they have started to write hysingla but they are getting lots of rejections. Told her to call me and I can follow up with pharmacy. Provided list of commercial plans with best coverage. She said they will try to stick to those but it's not always easy to track. Reviewed savings card info. She asked for butrans and oxycotin savings cards and had to run
PPLPMDL0020000001	Solon	OH	44139	6/19/2015	No new information learned on this call.
PPLPMDL0020000001	Chagrin Falls	OH	44023	6/19/2015	No new information learned on this call.
PPLPMDL0020000001	Chagrin Falls	OH	44023	6/19/2015	No new information learned on this call.
PPLPMDL0020000001	Chagrin Falls	OH	44022	6/19/2015	No new information learned on this call.
PPLPMDL0020000001	Solon	OH	44139	6/19/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44111	6/19/2015	Talked about his familiarity with OxyContin and he said very. Talked about Hysingla attributes and dosing. Covered trial offer. Covered Butrans w caresource
PPLPMDL0020000001	Cleveland	OH	44195	6/19/2015	Quick review of portfolio, formulary opportunities along with trial card offer for commercially insured. said ok will review and contact if info needed
PPLPMDL0020000001	Akron	OH	44310	6/19/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44319	6/19/2015	Quick message about hysingla patients and how to identify them. I told him to look for commercial patients on already on hydrocodone products like Norco who are taking it woudn the clock and still in pain. Showed him the conversion guide and asked him to write just one. Dr said ok because he has a few that might be good for it.
PPLPMDL0020000001	Cleveland	OH	44195	6/19/2015	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	6/19/2015	No new information learned on this call.
PPLPMDL0020000001	Fairlawn	OH	44333	6/19/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	6/19/2015	Came to made sure trial cards weren't patiOnt rooms.balked dosing and asked dr to find someone next week,mdr aid he would. Covered Butrans w caresource
PPLPMDL0020000001	Tallmadge	OH	44278	6/19/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	6/19/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	6/19/2015	Went over Scott profile and asked for one patient like Scott for butrans-dr smiled and said ok
PPLPMDL0020000001	Cleveland	OH	44104	6/19/2015	Reviewed portfolio, trial card offer, doesnt see much commercial, No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44115	6/19/2015	No new information learned on this call.
PPLPMDL0020000001	Tallmadge	OH	44278	6/19/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44312	6/19/2015	Spoke with the pharmacist Pat. Reviewed the hysingla attributes, dosing and conversions. I reviewed the hysingla trial offer and the flow chart. Pat said they have way too many patients on Narcotics and doesn't want to necessarily see another. I explained the abuse deterrent properties to her and the FDA tiers.
PPLPMDL0020000001	Hudson	OH	44236	6/22/2015	Breakfast appointment and led off discussion with doctors with the portfolio piece discussing hysingla, Butrans and Oxycontin. Product attributes, dosing, conversions and trial offer for hysingla ER and Butrans. Discussed appropriate patient types for all products. Dr said she just doesn't fell comfortable yet in writing for chronic pain but can see the value in ER opioids especially Butrans. Dr said she sent a patient to pain management and came back to her on Butrans and loves it and is working really well. I told her she could have prescribed Butrans herself and reminded her it's a schedule 3 so she can call or fax the Rx in. Dr said that big and she forgot it.
PPLPMDL0020000001	Stow	OH	44224	6/22/2015	Discussed Butrans appropriate patient types and asked for her to write it when a patient is taking an IR opioid around the clock and still in pain.
PPLPMDL0020000001	Hudson	OH	44236	6/22/2015	Breakfast appointment and led off discussion with doctors with the portfolio piece discussing hysingla, Butrans and Oxycontin. Product attributes, dosing, conversions and trial offer for hysingla ER and Butrans. Discussed appropriate patient types for all products. Dr Russ said that he really likes the trial offer for hysingla and will make his job much easier. Dr said he has a couple of patients he's considering it for. Discussed commercial coverage plans and dr said he can work with that. I asked him to start just one patient on hysingla and to also continue with Butransns oxycotin.
PPLPMDL0020000001	Garfield Hts	OH	44125	6/22/2015	Breakfast appointment and led off discussion with doctors with the portfolio piece discussing hysingla, Butrans and Oxycontin. Product attributes, dosing, conversions and trial offer for hysingla ER and Butrans. Discussed appropriate patient types for all products. Dr said he was already being with patients since dr Tosino is out on vacation this week. He said that he likes the trial offer for hysingla and will try to find a patient.
PPLPMDL0020000001					Reviewed portfolio of products, discussed appropriate patients for each product, formulary opportunities and limited time offer of Hysingla ER trial card. Discussed Plasma Conc. levels, Initiation/Titration said ok will continue to consider for appropriate patients that have access to products. Will be moving practice to Independence in July/Aug



PPLPMDL0020000001	Garfield Hts	OH	44125	6/22/2015	Reviewed portfolio of products, discussed appropriate patients for each product, formulary opportunities and limited time offer of Hysingla ER trial card . Plasma Conc. levels, Initiation/Titration said ok will continue to consider and prescribe for appropriate patients that have access to products.Will be moving practice to Independence in July/Aug
PPLPMDL0020000001	Cleveland	OH	44125	6/22/2015	Reviewed portfolio of products, discussed appropriate patients for each product, formulary opportunities and limited time offer of Hysingla ER trial card . Plasma Conc. levels, Initiation/Titration said ok has a few appropriate patients in mind. Gave 2 Hysingla ER Trial cards to for his lab coat.Will be moving practice to Independence in July/Aug
PPLPMDL0020000001	Garfield Hts.	OH	44125	6/22/2015	Reviewed portfolio of products, discussed appropriate patients for each product, formulary opportunities and limited time offer of Hysingla ER trial card . Plasma Conc. levels, Initiation/Titration said ok will consider, has a few of her Med D patients that she thinks Butrans would be a good option. Will be moving practice to Independence in July/Aug
PPLPMDL0020000001	Cleveland	OH	44125	6/22/2015	Reviewed portfolio of products, discussed appropriate patients for each product. Reviewed formulary opportunities and limited time offer of Hysingla ER trial card . Plasma Conc. levels, Initiation/Titration said ok will continue to consider and prescribe for appropriate patients that have access to products.Will be moving practice to Independence in July/Aug
PPLPMDL0020000001	Brooklyn Akron	OH	44144	6/22/2015	Reviewed portfolio, formulary coverage, discussed trial card limited time opportunity said ok will continue to consider for appropriate patients that have access to the products.
PPLPMDL0020000001	Fairlawn	OH	44333	6/22/2015	Short discussion with Becky over lunch. Discussed hysingla, Butrans and OxyContin attributes, dosing, conversions and appropriate patient types. Reviewed hysingla and Butrans trial offers. Becky said Hydrocodone is nothing new but likes that it's once a day and has abuse deterrent properties. She said she will continue to push Oxyakawa to write it.
PPLPMDL0020000001					Good discussion about hysingla and Butrans. Reviewed all product attributes, dosing, conversions, and insurance coverage. I asked her how she feels now in writing ER opioids? Dr said she has legitimate patients who require them but still would rather refer. I reviewed the patient profiles for both products and then discussed the hysingla trial offer. Dr said she has lots of myCare Ohio patients and I told her some of them have been going through for the product. Discussed other insurance plans for hysingla. Dr said she's going to try it and loves the trial offer.
PPLPMDL0020000001	Akron	OH	44333	6/22/2015	No new information learned on this call.
PPLPMDL0020000001	Garfield Hts	OH	44125	6/22/2015	Visited PC offices along with Pain mgmnt office.No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44125	6/22/2015	Reviewed Hysingla ER trial card offer, process and utilization. Said ok has not seen any RX's but will process accordingly
PPLPMDL0020000001	Cleveland	OH	44125	6/22/2015	Reviewed portfolio, Hysingla ER trial card offer, said ok hasnt seen any RX's
PPLPMDL0020000001	Fairlawn	OH	44333	6/22/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44134	6/22/2015	Quick call. He said he is keeping Hysingla in mind. Has tried it without luck. Asked him to call me and keep me updated and I can help.
PPLPMDL0020000001	Lakewood	OH	44107	6/22/2015	No new information learned on this call.
PPLPMDL0020000001	Garfield Hts	OH	44125	6/22/2015	Reviewed portfolio, Hysingla ER trial card, said ok will process accordingly.No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	6/22/2015	Discussed hysingla and the uncontrolled norco patients. Reviewed conversion. Reviewed trial offer with office manager.
PPLPMDL0020000001	Lakewood	OH	44107	6/22/2015	Linked Butran to Caresource- and talked about starting dosages. I left him information on hysingla. Dr said what about caresource and I told him the managed care status for the commercial patients with hysingla. Went back to butrans and made sure he remembered the coverage and worked with the staff to thank them for their hard work getting the pa's approved and I told him I would be back later in the week to see another butrans script get written for a uncontrolled tramadol or caresource patient. he said ok.
PPLPMDL0020000001	Akron	OH	44320	6/22/2015	Spoke with Kyle the pharmacist who is also at the Cedar Locust who I have already discussed the trial offer for hysingla with. Provided cards and he told me that he dispensed hysingla 30mg to a patient of dr Ali's last week.
PPLPMDL0020000001	Lakewood	OH	44107	6/22/2015	Spoke to the pharmacist and the tech about the hysingla trial offer today. REviewed the last few sections of the flow chart and they said they understood what need to be done. I asked if they have don'e one yet and they said no. We talked about attributes of hysingla. Also touched on oxycotin and butrans dosing and gave fair balance of potential abuse with all opioids include purdue products.
PPLPMDL0020000001	Lakewood	OH	44107	6/22/2015	Dr said he has not found someone yet, I tried to encourage him. Highlighted the norco patient uncontrolled and talked about instead of adding another immediate release to their atc schedule to instead offer hysingla once a day. I reminded him of the dosing, last few times he kept forgetting what the doses are so I used that to help us this visit. I did highlight butrans schedule three and caresource today.
PPLPMDL0020000001	LAKEWOOD	OH	44107	6/22/2015	Trial offer review and asked if they saw one go thru yet and they said no. He didn't want the flow chart on the shelf with the product but he said he would leave it for the techs tomorrow to review. We talk attributes and dosing. Also covered butrans and the coverage with caresouce and workers comp. Highlighted a few limitations of use like not prn and they seemed to understand this and gave fair balance of abuse potential for all opioids including purdue products.
PPLPMDL0020000001	Lakewood	OH	44107	6/22/2015	Got to speak to Dr for a good amount of time today as he was between patients. Talked about hysingla and the basic attributes...dr asked what are the doses, which I reviewed. I asked what is a typical atc daily dose of norco does he write. Dr said he usually writes 5 or 10mg and he said the daily dose ranged from 15 to 30. I pointed out the lowest three doses of hysingla and reviewed twice the conversion. I asked if this seemed complicated and he said no. I asked if he was interested in offering for patients. He said maybe. I said understood. I told him how dr. elgar is putting them in patient rooms. I gave him my card and a coupon and I encouraged the saME AND highlighted the trial dead line. Dr said so its free for the first month. We talked about the trail and how it works and I checked in a few times and said how does this sound? He said good. I left him a few marketing materials and encouraged him to offer it if it makes sense and a good choice. Also worked in oxycotina nd butrans. Butrans was more about schedule three and caresource patients. And oxycotin was to get a sense how he saw this product working for his patietns that are on percocet.
PPLPMDL0020000001	Fairlawn	OH	44333	6/22/2015	Started off discussion with dr about his thoughts on hysingla ER and gave quick overview of its attributes and doses. Dr said that he thinks it's a good product because it's once and day and abuse deterrent. I asked dr if he would write it for a patient with commercial insurance and is on a product like Norco around the clock and in pain? Dr said he would if it's covered. I reviewed the trial off in depth and if it helps? Dr said that will help and will try to find a patient. Reviewed Butrans and oxycotin attributes, dosing and patient types with conversions. Dr said he likes all my products and I asked him to put a hysingla trial card in his lab coat.
PPLPMDL0020000001	Cleveland	OH	44102	6/23/2015	Reviewed portfolio, Hysingla ER trial card, formulary opportunities, alot meicaid will stock and order accordingly
PPLPMDL0020000001	Cleveland	OH	44114	6/23/2015	Reviewed portfolio, identified patients, Formulary opportunities and Hysingla ER trial card offer.said ok will consider for appropriate patients that have ins. coverage.
PPLPMDL0020000001	Rocky River	OH	44116	6/23/2015	Dr told me he offered the product several times and the pharmacy tried to push the generics. The doctor told me one of the patients was on medical mutal and required a pa and explained it was confusing to him and the staff. Dr told me Hysingla was not covered and its a hassle to write. I tried to be understanding, thanked him for offering to his patients. I handed him the managed care grid, which he said has on his wall already. I pointed out that medical mutual and med d plans are not on this list. Dr said he has mostly these patients. We talked about the commercial insured patient and he mentioned a few of the plans he reconized. I told him these are the plans that for the most part don't require a pa that i'm aware of...i went into the trial offer. I talked about butrans, dr said he likes butrans. I talked about it being schedule three with refills and a faxable option. Which means if by accident you wrote hysingla for a plan that is not covered perhaps a butrans script if appropriate could be faxed over to the patient. Dr said the pharmacists want to push generic. I said what if you tell the patient you are going to try and see if it goes thru because its new and if not you have a back up plan for them. He said that was lot to think about. We talked about the pharmacist has a back up plan to every patient that doesn't have the coverage we talked about generics. Dr said he might try it again but he's not sure if he has the patients that will be a fit.
PPLPMDL0020000001	Cleveland	OH	44113	6/23/2015	Reviewed portfolio, discussed formulary opportunities, Med Mut., Trial card offer, said ok will consider but has 1-2 patients w/Commercial. Likes Once daily dosing but only sees Med D and WOrkers CoMP.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/23/2015	Quick hysingla discussion with pharmacist Tom who is a float. Reviewed product attributes and Tom said he dispensed it two days ago for Dr Ali. I reviewed the trial card offer and asked him if the patient he dissed it to got the trial offer? Tom said the patient did and is impressed with the program. Provided him with a couple of copy cards and flow charts. Tom said he will relay the trial offer to the other pharmacists at that location.
PPLPMDL0020000001	Cleveland	OH	44113	6/23/2015	No new information learned on this call.
PPLPMDL0020000001	Chagrin Falls	OH	44022	6/23/2015	No new information learned on this call.
PPLPMDL0020000001	Lyndhurst	OH	44124	6/23/2015	No new information learned on this call.
PPLPMDL0020000001	Mayfield Village	OH	44143	6/23/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44134	6/23/2015	Reviewed appropriate patient for Hysingla, he thinks it makes sense for some of his patient. Reviewed savings program and to ensure his patients get benefit of the free month. He commits to one patient. Meh just wrote butrans this morning
PPLPMDL0020000001	Lakewood	OH	44107	6/23/2015	Highlighted the hysingla trial offer today.
PPLPMDL0020000001	Lakewood	OH	44107	6/23/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/23/2015	I asked for to convert more patients from IR opioids to either oxycotin IR Hysingla ER. Dr said he knows he's written one and I told him he must be confused because I would know if he has a patient on it. I told dr it must be Zohydro. Dr said it may be.
PPLPMDL0020000001	Highland Heights	OH	44143	6/23/2015	No new information learned on this call.
PPLPMDL0020000001	Rocky River	OH	44116	6/23/2015	The doctor came in while dr. blitz and i were talking about hysingla. I asked dr. s what her confort level was with Oxycontin. she said she will write it but she doesn't have many chronic pain patients. I asked when she writes it what the patients are usually being switched from? She mentioned percocet. We got to talking about the molecule of oxycodone and the transition to a longer deliver system like Oxycontin. I jumped into hysingla and the similarities in this regard...from the hydrocodone patient to hysingla yet once a day and reviewed the attributes. Dr said it made sense if you can get ppl to take a once a day pain medication. I asked if there should be extended release opioids in general or should they all be immediate release? she said no that extended release has a role with pain. I said then why so hesitant to turn to an extended release product if you see the value in it for the right patient. She said habit. she asked managed care. I covered the trial offer. Also talked about butrans and the s cheduling and attributes. highlighted caresource and med for butrans alot
PPLPMDL0020000001	Sagamore Hills	OH	44067	6/23/2015	No new information learned on this call.
PPLPMDL0020000001	Stow	OH	44224	6/23/2015	No new information learned on this call.
PPLPMDL0020000001	Rocky river	OH	44116	6/23/2015	Spoke to thenurses about the new doctor that has come into the group and scheduled a lunch. Also highlighted a few attributes of hysingla and butrans.
PPLPMDL0020000001	East Cleveland	OH	44112	6/23/2015	Reviewed portfolio, Hysingla ER trial card, said ok, mostly meicaid
PPLPMDL0020000001	Akron	OH	44305	6/23/2015	I told dr that we discussed last time that he currently has patients that are taking Norco around the clock and are still in pain? Dr said he does. I told dr that I expect some of those also have private insurance and dr said he does have some and wants to try to convert his patients to ER opioids. I reviewed the product attributes and discussed conversions. I reviewed the trial offer and asked him to use it. Dr said he will try it because the patient has nothing to lose because they can get 30 days for free. Dr said he will write. reminded him where and when to use Butrans.
PPLPMDL0020000001	Cleveland	OH	44125	6/23/2015	Reviewed portfolio, formulary opportunities, Limited trial offer, said ok will consider Hysingla ER but had a Butrans patient in the office today. Gave patient info booklet.
PPLPMDL0020000001	Mayfield Village	OH	44143	6/23/2015	Met with med asst at front window. Discussed 30 days free trial for Hysingla ER; left Hysingla titration guide for Dr. Ashraf. Left for med asst: PBM, Know your Tiers brochure. Reinforced Purdue extended release, single entity, opioid product profile.
PPLPMDL0020000001	Cleveland	OH	44112	6/23/2015	Reviewed portfolio, Plasma conc. levels of Hysingla ER, Formulary opportunities, Trial card offer. Said ok, Identified a patient, gave 1 Trial card and Patient info booklet said she will start new patient.
PPLPMDL0020000001	rocky river	OH	44116	6/23/2015	NEW DOCTOR FROM STRONSVILLE. Introduced self and hysingla to the dr with the attributes. Gave fair balance of abuse potential for all opioids including purdue products. highlighted butrans- asked if she would be open to offering this to appropriate patietns and she said yes. She did state she did not treat much chronic pain patients.
PPLPMDL0020000001	Rocky River	OH	44116	6/23/2015	Reviewed trial offer and attributes of trial for hysingla. talked about abuse potential for all opioids include purdue products

PLPMDL0020000001	Parma	OH	44129	6/23/2015	She knows she seems the right patient type for Hysingla, she is still trying to determine how best to prescribe Hysingla for patients on multiple meds. She admitted she usually isn't fast to adopt new products. She understands savings card opportunity and will find one patient for Barry. Butrans is still her favorite med.
PLPMDL0020000001	Westlake	OH	44145	6/24/2015	No new information learned on this call.
PLPMDL0020000001	Cleveland	OH	44130	6/24/2015	Super fast....Told her if patient needs more pain relief than their NSAID or cox 2, before going to Norco or Percocet, consider butrans for that patient. It is the only c3 ER opioid on the market. She can even refer them to pAin management on butrans. She said thank you.
PLPMDL0020000001	akron	OH	44333	6/24/2015	Lunch appointment. Dr said he just wrote Butrans for a patient of his in the nursing home but there is a PA for it. Dr said the patient has a newer Anthem BC/BS medicare plan and the patient is naive to opioids but has some serious spinal issues. I looked up the plan and told him the patient won't be covered especially being opioid naive. Reviewed hysingla ER attributes, patient types and asked him to find that one private insured patient already on hydrocodone and in pain and to give them the trial offer and explained. Dr said he also has a 84 yr old patient on hydrocodone and thinks oxycontin would be the best option for an ER product. Discussed conversions and appropriate starting dose as a q12 option.
PLPMDL0020000001	CLEVELAND	OH	44195	6/24/2015	Reviewed Hysingla trial card along with OxyContin said ok will continue to support and recommend for appropriate patients that have coverage
PLPMDL0020000001	Westlake	OH	44145	6/24/2015	reminded about the trial offer program with hysingla and the appropriate patient for this product today.
PLPMDL0020000001	Cleveland	OH	44106	6/24/2015	Reviewed portfolio, patient info booklets, trial card offer and formulary opportunities, said ok will continue to consider for appropriate patients that have coverage.
PLPMDL0020000001	Cleveland	OH	44195	6/24/2015	Reviewed portfolio, discussed utilization along with thoughts of ERO, formulary grids, patient info booklets. said ok will consider for appropriate patients.
PLPMDL0020000001	Cleveland	OH	44113	6/24/2015	Reviewed portfolio, patient info booklets, trial card offer and formulary opportunities, said ok, will continue to prescribe/recommend for appropriate patients that have coverage.
PLPMDL0020000001	Cleveland	OH	44113	6/24/2015	Quick review of portfolio, formulary opportunities, patient info booklets and savings card trial offer. Said ok will continue to recommend and prescribe for appropriate patients.
PLPMDL0020000001	Cleveland	OH	44113	6/24/2015	Reviewed portfolio, patient info booklets, trial card offer and formulary opportunities, said ok will continue to prescribe for appropriate patients that have coverage.
PLPMDL0020000001	Cleveland	OH	44113	6/24/2015	Reviewed portfolio, patient info booklets, trial card offer and formulary opportunities, said ok will continue to prescribe for appropriate patients that have coverage.
PLPMDL0020000001	Stow	OH	44224	6/24/2015	No new information learned on this call.
PLPMDL0020000001	Cleveland	OH	44106	6/24/2015	No new information learned on this call.
PLPMDL0020000001	Mogadore	OH	44260	6/24/2015	W-butrans-dr said has two patients on and doing well; OxyContin-dr said Cain prescribes more than she does-told her I'd like to discuss that next time
PLPMDL0020000001	Strongsville	OH	44136	6/24/2015	No new information learned on this call.
PLPMDL0020000001	Westlake	OH	44145	6/24/2015	reviewed our upcoming lunch to talk about hysingla and gave attributes of hysingla today
PLPMDL0020000001	Cuyahoga Falls	OH	44224	6/24/2015	No new information learned on this call.
PLPMDL0020000001	Akron	OH	44333	6/24/2015	No new information learned on this call.
PLPMDL0020000001	Bedford	OH	44146	6/24/2015	No new information learned on this call.
PLPMDL0020000001	Westlake	OH	44145	6/24/2015	Talked about hysingla and the trial offer today. Today i suggested not just to identify hydrocodone immediate release but also oxycodone and reviewed the conversion just to give him more options to try hysingla. Dr doesn't write much oxycontin so i thought this might be another option for the doctor. Gave several coupons and managed card grids.
PLPMDL0020000001	Cleveland	OH	44106	6/24/2015	No new information learned on this call.
PLPMDL0020000001	Akron	OH	44333	6/24/2015	I showed dr the hysingla trial offer and copy cards and reminded him about how the trial offer works. I asked dr if he could identify just one patient already on hydrocodone but taking it around the clock and in pain? Dr said ok and to give the cards to Marsha. Discussed the program with Marsha.
PLPMDL0020000001	Strongsville	OH	44136	6/24/2015	No new information learned on this call.
PLPMDL0020000001	Parma	OH	44129	6/24/2015	No new information learned on this call.
PLPMDL0020000001	Parma	OH	44129	6/24/2015	No new information learned on this call.
PLPMDL0020000001	Akron	OH	44333	6/24/2015	Followed up with dr about contacting medical services about their Butrans patients with rash and itching. Dr said he hasn't called yet and I told him to please do it. I told dr that I provided information to the company about it. Dr told me he's still gonna write Butrans despite their recent issues. Dr told me he wrote another hysingla this week and said the trial card is working great. I reminded him that the offer ends August 15th and the time to write is now. I also told dr to continue using Butrans in appropriate Caresource and BWC patients.
PLPMDL0020000001	Westlake	OH	44145	6/24/2015	While i was reviewing the trial offer of hysingla with the ma/front office person today i saw dr. yonan at the chair...i asked if i could tell him about the trial. Review of the trial, gave card asked for them to immediate call me if there is a complication with getting commercial patients their hysingla.d Gave managed care grid, the plans that didn't have pa's according to finger tip. highlighted butrans with caresource coverage.
PLPMDL0020000001	Strongsville	OH	44136	6/24/2015	Had a lot of time to discuss treatment of pain in his practice. He finds that he doesn't want to give a patient more than 3 pills of whatever med they are on, he will titrate dose, but leave at 3 times per day and sometimes they are in multiple meds. Reviewed portfolio piece and discussed specific patient type for each med. He thinks that based on our discussion he will write for ER meds instead of titrating dose or adding another med on board. He felt he had patients that he could think of off the top of his head whose treatment regimen he will reconsider to one ER med like Hysingla and if that isn't covered he will try oxycontin for some and only one or two breakthrough meds. He liked this way of treating the pain that is long term and around the clock. He likes the idea of butrans as patients first opioid and especially likes that it is schedule 3. He put two savings cards for Hysingla in his lab coat and will find appropriate patients.
PLPMDL0020000001	Westlake	OH	44145	6/24/2015	Thanked him for his offer of hysingla. Dr knodded his head. I have him my card and a trial offer and asked him to call me given any problems for the next patient he offers hysingla to this week. Mentioned about the trial deadfending and some of the details of the program. Talked with Jeanette a while...gave her a muffin and thanked her for all her help. I asked how her job has changed, she said the office isn't as busy, i asked why she said they can't get insurance to pay for procedures any more. I asked what is the worst plan giving her problems and she said caresource. She said almost every patient has caresource and they can't schedule procedures until over 30 days because that's how long its taking to get things approved.
PLPMDL0020000001	Parma	OH	44129	6/24/2015	They were very busy. Happened to see him through window and gave him updated Hysingla formulary sheets and additional savings flyers so he knows where to choose Hysingla with best outcome. He appreciated
PLPMDL0020000001	Parma	OH	44129	6/24/2015	Lunch-OxyContin-dr said it has its place in practice-asked where and dr said transitioning from Percocet usually at 4 tabs-still concerned about street image-went over abuse deterrent study and properties and dr said that's great he said it's not his go to for new patients-redirected to patients in his practice he trusts-let dr know patients can still abuse it but by including abuse deterrent properties it's more difficult to crush and chew-dr agreed to focus on Percocet patients in his practice and challenged him to transition earlier at 3 tabs-dr agreed to; butrans-dr said it is his go to medicine for patients in mild to moderate pain usually after lose dose Norco-discussed Scott profile and talked about his ultra patients nearing maximum dosing-dr agreed great place to transition-went over caresource coverage with dr and Marianne who does PAs-will look for patients failing tramadol
PLPMDL0020000001	Cleveland	OH	44111	6/25/2015	Talked about hysingla and the attributes. Gave fair balance of abuse potential for all opioids including purdue products. Highlighted managed care and trial offer. I asked the dr what are his thoughts on the coverage we have, as i handed him the grid. I asked if it was something he can work with w/ his current atc pain patients? Dr said he had a few of the plans. We talked about butrans and signing up so the office could print off the trial offer for their patients. he told me to talk to marlyn about it. I asked who was he thinking about when butrans comes to mind. What are they coming from? Dr said norco. I supported him, but asked what does he do when tramadol fails? Dr said noco. I asked if he would be open to offering butrna safer tramadol for the appropriate patient and he said yes.
PLPMDL0020000001	Cuyahoga Falls	OH	44223	6/25/2015	Discussed Hysingla trial offer with Kyle the pharmacist and reviewed it with him. Kyle said it sounds like a great program and will place it on the shelf where they would put the product.
PLPMDL0020000001	Cleveland	OH	44130	6/25/2015	Asked him about the Norco patient that wishes his med would last longer....he said he hears it all the time. Asked if next time he hears it he thinks of Hysingla and they have Caremark or express scripts who do not have PA! That he writes it, gets patient a free month and gets experience with an ER med which is appropriate for patient the around the clock pain.? He said it is a good try but he knows what a hassle new products are to write. Reminded him that it is no longer the case with butrans....and reviewed formulary for butrans....
PLPMDL0020000001	Euclid	OH	44119	6/25/2015	No new information learned on this call.
PLPMDL0020000001	Westlake	OH	44145	6/25/2015	Talked about converting someone from hydrocodone to hysingla today and using savings cards. The dr said most of his patients on atc opioids is on med d-i told him to save those patients for Butrans or Oxycontin for now if they need a longer acting deliver system. For now i showed him the managed care grid and said if its not on the list for now not to write for the plan not on this list. Dr said he would offer it if the managed care was not so hard. Talked about Butrans dr said that some of his med d patients said it was too expensive. We talked about the deductible patients have to meet and i asked if it was in the beginning of the year and he said it was. We talked about the over 65 patients and how many medications they usually have to pay for in a month. I highlighted the hysingla trial offer until august 15th and also talked about caresource for butrans. I ended by asking him to offer it to one of his appropriate patients like we just discussed with these plans. He allowed me to put the grid and the savings cards on his desk.
PLPMDL0020000001	Westlake	OH	44145	6/25/2015	highlighted trial offer and conversion from norco.
PLPMDL0020000001	Independence	OH	44131	6/25/2015	No new information learned on this call.
PLPMDL0020000001	Cuyahoga Falls	OH	44223	6/25/2015	No new information learned on this call.
PLPMDL0020000001	Cleveland	OH	44130	6/25/2015	No new information learned on this call.
PLPMDL0020000001	Cuyahoga Falls	OH	44223	6/25/2015	Spoke with Patrick in order to work out an order for hysingla 60 mg for a patient of Elise Leones. Patrick ordered the 60mg dose to arrive tomorrow morning. Patient came to present Rx and has Medco Rx insurance and had a PA when tried to run the trial card. Figured out that Purdue signed the patient up with the wrong program. Once that was figured out after i recommended them to call McKesson and they corrected the situation and the patient got the trial offer.
PLPMDL0020000001	Akron	OH	44333	6/25/2015	Elise told me that she has a patient that she wants to start on hysingla 60mg and wants to know where the patient can get it. After some calling to pharmacies, Klein's can have it in tomorrow morning. Elise said she's sending the patient now to the pharmacy. Elise said its a Medco patient with good insurance and will use the trial card.
PLPMDL0020000001	Euclid	OH	44117	6/25/2015	Lunch. Was able to identify several plans where Dr. Nageeb can write Hysingla ER without a step edit or prior auth, and those include: Medco, Express Scripts, TriCare and CVS caremark. Discussed/left formulary grid, which he says is helpful. Reinforced trial, savings for all 3 products. Discussed OxyContin after oxycodone. Dr. Nageeb says he likes efficacy and good coverage for OxyContin. Reinforced Butrans after Tramadol.
PLPMDL0020000001	Cuyahoga Falls	OH	44223	6/25/2015	Quick hello in office while placing copy cards and asked him if he's had the opportunity to use hysingla? Dr said he wrote it a couple of times and it was too expensive for the patients. I told dr for now to stick with private insurance plans like Caremark, Medco, and Cigna. Dr said ok.
PLPMDL0020000001	Lakewood	OH	44107	6/25/2015	No new information learned on this call.
PLPMDL0020000001	C. Falls	OH	44223	6/25/2015	Reviewed hysingla and Butrans trial offers with Katherine,Cindy and staff. They said there have been no issues with running the trial offers and provided them the cards.
PLPMDL0020000001	Parma	OH	44129	6/25/2015	Reviewed quickly product positioning for portfolio to refresh his memory. Discussed appropriate use of ER meds like Hysingla and oxycontin for the treatment of pain that is around the clock. Discussed butrans as patients first opioid. Reviewed savings card promotion with Hysingla. He is moving now and didn't want savings cards so i left him know that they are available online.
PLPMDL0020000001	Euclid	OH	44119	6/25/2015	No new information learned on this call.
PLPMDL0020000001	Cuyahoga Falls	OH	44223	6/25/2015	No new information learned on this call.

PPLPMDL0020000001	Parma	OH	44129	6/25/2015	After reviewing product portfolio piece and product positioning for each along with ADP asked doctor to commit to finding at least one appropriate patient With caremRk or express scripts insurance for Hysingla since he has shared with me in the past of his belief in hydrocodone molecule. He asked when I will follow up and I told him next week. He agreed.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/25/2015	No new information learned on this call.
PPLPMDL0020000001	Highland Heights	OH	44143	6/25/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	6/25/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/25/2015	Dr said he needed more Butrans copy cards and the trial offers included. Dr said he wants to make sure all the new patients get the first month free and he doesn't want his patients to have to print the trial offer. I told him I'm leaving them for him today the trial offer is inside each copy card kit. I asked dr for continued Prescribing.
PPLPMDL0020000001	Euclid	OH	44119	6/25/2015	Lunch. Looked in Paul's formulary data for ER opioids; he does not have ANY commercial plans that do NOT require a prior authorization or step edit for Hysingla ER. I communicated we will eventually be on Worker's Comp formulary and since he has a large amount of Worker's comp patients - I will update him as soon as that occurs. Discussed OxyContin after oxycodone and Butrans after Tramadol. Reinforced trial, savings for all 3 products. Left formulary grid Hysingla ER, titration guide. State of Ohio with prior auth may be an option for Hysingla.
PPLPMDL0020000001	Stow	OH	44224	6/25/2015	Told dr I need to speak with her about the hysingla trial offer and if I could get a minute? Dr said she's doesn't now but to schedule a time with Lori. I told her I will and dr said she did have a patient that got hysingla and is happy. I told her I'm aware after speaking with Nay and how glad I am as well. Reminded dr to continue using Butrans where appropriate as the schedule 3,7 day patch.
PPLPMDL0020000001	Bedford	OH	44146	6/25/2015	Doctor said that Hysingla patients will be starting to increase. People don't just jump out of the gate and start writing new product. Managed care is limiting. The patients he has tried for Hysingla are doing well and they are refilling their prescriptions. He is clinically pleased with the results he is seeing with his patients. He feels that butrans is cyclical. He seems to go in waves with that product but knows there is a place for it in his practice.
PPLPMDL0020000001	Parma	OH	44129	6/25/2015	Asked Laura if she knew what I stopped in to ask her....she knew exactly!!!! She said that she has not written for Hysingla yet. It takes a while to talk to patients. She is looking for the patient who isn't already taking 4,5,6 Norco plus other molecule per day. Those are the patient who don't want to change their meds. She is looking for a newer patient to try Hysingla for. Discussed a possible patient as one taking 4,5,6 or more and starting with a low dose of Hysingla with one or two pills for breakthrough. She said that is a possibility. I asked if I could check in with her next week and she believes that she would have one patient by then. She asked for two weeks....she has a couple patients on butrans that are unique and perfect for the med. It is on her radar more than it used to be but many patient aren't right for it
PPLPMDL0020000001	Lakewood	OH	44107	6/26/2015	OxyContin-dr said doesn't prescribe many ER opioids-mentioned when get to 3-4 low dose opioids will he consider OxyContin dr said yes; Butrans- care source patients on ultram approaching 200mg-dr said will consider
PPLPMDL0020000001	Lakewood	OH	44107	6/26/2015	Discussed the appropriate patient type for hysingla that is uncontrolled and is need of atc therapy per our indication and jane profile. Reviewed the once a day dosing and straight forward conversion from norco to hysingla. Dr asked about managed care and I highlighted the trial offer with the dr and with both the office manager and pa person. Reminded that Butrans is being covered by caresource and many med d plans. I asked the dr to offer it and he said he would
PPLPMDL0020000001	Westlake	OH	44145	6/26/2015	Talked about dosing hysingla and conversing from norco for the appropriate patient. Reviewed managed care grid and asked if anything stood out. dr said he has no idea what his patients have. I told him that if they have commercial insurance they should get a savings card and that is a first step- next I gave him a managed care grid and said these plans esi, caremark and summa care do not have pa at this time and would be a good option for your appropriate patients.
PPLPMDL0020000001	Akron	OH	44320	6/26/2015	Quick Butrans message as his first day back from Kenya. I told him that now is the time to pull the trigger with Butrans and use it in place of refilling Tramadol and Norco for patients in pain and taking it around the clock.
PPLPMDL0020000001	University Hts	OH	44118	6/26/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44112	6/26/2015	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	6/26/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	6/26/2015	Came back and we talked about the conversion from hydrocodone or oxycodone to hysingla and the dosing. Asked him to offer it with a coupon and talked about the trial offer- asked him if he would do this.
PPLPMDL0020000001	Uniontown	OH	44312	6/26/2015	I asked dr how the formulary grid and trial cards for Hysingla are working? Dr said he's still getting denials. I asked him if he's sticking to the plans I gave him and using the free trial offer he shouldn't have any issues. Dr said he has written it for some medicaid and Medicare patients. I told him that's where his denials must have come from. I told dr to please focus on private insurance plans I gave him. Dr said ok and I told him. Those medicare and Medicaid plans can be covered on Butrans or oxycontin.
PPLPMDL0020000001	Uniontown	OH	44685	6/26/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44111	6/26/2015	I told him I forgot to tell him the most important thing...he said what. I said how to dose hysingla. Dr said I did tell him. Dr told him a few of the attributes. I highlighted the trial and asked for his commitment to offer to one patient this week who is appropriate. He said he would try.
PPLPMDL0020000001	Cleveland	OH	44111	6/26/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland Hts	OH	44118	6/26/2015	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	6/26/2015	Asked if he offered hysingla to anyone yet? He said no and that he really doesn't have a lot of chronic pain patients any more. We talked about what he can keep his eye out for regarding appropriate patients increase someone comes in this afternoon that might be appropriate. Dr asked about managed care- which was covered. I showed him the grid and asked what he thought about the coverage. Dr said it was ok.
PPLPMDL0020000001	Akron	OH	44319	6/26/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44119	6/26/2015	Lunch. Discussed with Dr. Mehta and med assts, Hysingla ER product attributes, and went through Sonia profile with Dr. Mehta. Dr. Mehta says he will rarely use an extended release product. If patient has long term pain, he refers to pain management. He is willing to use in nursing home. Discussed commercial coverage and plans where he will have the most success with access and coverage for Hysingla ER. Reinforced OxyContin after oxycodone and Butrans after Tramadol. Reviewed how OxyContin and Butrans savings cards.
PPLPMDL0020000001	Uniontown	OH	44685	6/26/2015	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	6/26/2015	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	6/26/2015	Spoke to the pa coordinator and she said he has not written any more butrans yet. When I saw the doctor, I highlighted that caresource patient appropriate for a longer deliver system like butrans. Also highlighted Hysingla for his commercial patients on esi.
PPLPMDL0020000001	Fairlawn	OH	44333	6/26/2015	I asked dr if he had the opportunity to start a patient in hysingla his week like he said he would. Dr said he had a patient that would be good for it but had was a medicare patient and knew they would either not be able to get it or be too expensive. I told him I understand and to please continue to focus on private insurance patients.
PPLPMDL0020000001	Westlake	OH	44145	6/26/2015	I asked how the week went and if he had a chance to offer hysingla and he said he did not. We talked about his office and the managed care status. The dr did mentioned he has appropriate patients that he hasn't found yet. I hit on the main attributes and the trial offer.
PPLPMDL0020000001	Uniontown	OH	44685	6/26/2015	Spoke with pharmacist Dennis and reviewed hysingla attributes, dosing and conversions. Discussed the trial offer and flow chart. Dennis said it sounds like a great plan and will continue to look for Rx's.
PPLPMDL0020000001	Stow	OH	44224	6/26/2015	Good discussion with dr about hysingla and Butrans attributes. Dosing and conversions and then discussed who is most appropriate for hysingla. Discussed the patient on Norco around the clock and is wanting a refill. I asked dr if it makes sense for a private insured patient in that scenario to be on hysingla? Dr said it does make sense and likes that it's q24 and reviewed conversions again and said that he can also see a percpet patient to be on it. I agreed and then reviewed the trial offer. Dr said that is a great idea and likes that he has up to 30 days to process a PA. Dr said he will also continue Butrans and said that almost everyone he has put on it absolutely loves it.
PPLPMDL0020000001	Cleveland	OH	44111	6/26/2015	No new information learned on this call.
PPLPMDL0020000001	Euclid	OH	44119	6/26/2015	Spoke with OM Kim H. Dr. winner at hospital. Discussed with Kim, Hysingla ER 30 days free offer, and patient guide/patient education. Left/discussed Hysingla ER formulary grid. the only commercial plan that Dr. Winer accepts where he will NOT have to complete a prior auth/step edit is CVS Caremark. this is the plan I want them to focus on, and patient on Norco/Vicodin, that need a change in therapy and meet extended release indication.
PPLPMDL0020000001	Akron	OH	44319	6/26/2015	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	6/26/2015	Discussed hysingla trial card. pharmacist asked about managed care plans that require a pa and I shared a few that I knew off hand and handed him a managed care grid. I asked if this was something they would run thru for the patient and he said yes. I did review the flow chart with him. Also touched on the attributes of the product as well as butrans and oxycontin. Gave fair balance of abuse potential for all opioids including purdue products.
PPLPMDL0020000001	Lakewood	OH	44107	6/26/2015	Discussed trial offer and abuse det properties of hysingla and oxycontin. Gave fair balance of abuse potential for all opioids including purdue products. He asked about med d coverage and I explained. I also gave him a grid that I printed out for hysingla.
PPLPMDL0020000001	akron	OH	44333	6/29/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	6/29/2015	Talked about the Hysingla and who is the appropriate patient based on the uncontrolled atc patient. reviewed dosing and covered trial offer. I asked him how his patients like Butrans? I also asked how was it transitioning from immediate release to Butrans. Dr said some like it, some like their pills and he said he didn't have any complaints. I tied in managed care wins.
PPLPMDL0020000001	Westlake	OH	44145	6/29/2015	Lunch. Discussed hysingla- dosing, trial and managed care review. Dr explained that he used to work in the emergency room and treating chronic pain isn't what he is used to. I explained the indication and we reviewed a few limitations of use. I asked when was the last time he wrote an extended release opioid and he said he wrote butrans a few months ago. Using the core visual aid we talked about the initiation for butrand with patients currently treated with tramadol but are not controlled and need further assistance to help with their appropriate pain. Dr asked about titration and we covered steady state and the use of break thru medications if it appropriate to do so. Hysingla- I asked if he had patients currently on hydrocodone immediate release, he said very limited amount. We talked about their options when the patient is appropriate for a longer delivery system. Reviewed dosing and managed care. I asked if he was comfortable thus far with the product and if he felt comfortable prescribing it if he saw an appropriate patient today and he said he thoughts so. I gave him my card and a slim job along with savings card and managed care grid.
PPLPMDL0020000001	Akron	OH	44313	6/29/2015	No new information learned on this call.
PPLPMDL0020000001	Uniontown	OH	44685	6/29/2015	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	6/29/2015	discussed the uncontrolled pain patient appropriate for hysingla that is on commercial ESI plan. He told me to ask Beth. Beth found a few patients that might be appropriate and I told her about the trial offer.
PPLPMDL0020000001	Akron	OH	44313	6/29/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	6/29/2015	Here to put Hysingla on your radar today. Gave the doctor a few attributes and conversion and handed him a managed care grid with coupon and asked him to try it today. Dr said maybe.
PPLPMDL0020000001	Lyndhurst	OH	44124	6/29/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/29/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	6/29/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	6/29/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	6/29/2015	First time I met this doctor, he told me he is leaving uh and will be at akron general next month. Gave him hysingla brochure and savings card...asked him if he's had an opportunity to prescribe this yet. he said no and that he will look it over.
PPLPMDL0020000001	Akron	OH	44312	6/29/2015	No new information learned on this call.

PPLPMDL0020000001	Lakewood	OH	44107	6/29/2015	highlighted hysingla trail offer and dosing today.
PPLPMDL0020000001	Lakewood	OH	44107	6/29/2015	tied in manage care for caresource with butrand. And ESI for Hysingla patients from norco.
PPLPMDL0020000001	Lyndhurst	OH	44124	6/29/2015	No new information learned on this call.
PPLPMDL0020000001	Fairlawn	OH	44333	6/29/2015	Conformed with Sue the time to get a schedule 2 opioid vs a schedule 3 like Butrans. Sue said the Rx usually has to be in by 11am to get the schedule 2 like hysingla in 2 days. Sue said a paper trail has to accompany the Rx. Sue said Butrans a schedule 3 does not and will be next day even after 5 pm.
PPLPMDL0020000001	Lyndhurst	OH	44124	6/29/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44313	6/29/2015	Talked with Jason about the hysingla trial offer and reviewed flow chart. Jason said they haven't seen a Rx yet but thinks the trial offer should help speed things up. I agreed and told him to please discuss it with patients if they inquire about it.
PPLPMDL0020000001	Akron	OH	44333	6/29/2015	OxyContin-dr said transitioning at 3-4 tabs whenever possible and coverage has been solid; Butrans-dr said put an opioid naive patient not being controlled on NSAIDs on it and so far so good! Thanked him and asked for one
PPLPMDL0020000001	Akron	OH	44312	6/29/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	6/29/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	6/29/2015	We were discussing the patient pieces to be handed out with the savings cards. I asked him if he had tried hysingla yet for his uncontrolled norco or percocet patients. He said no, and asked me how to dose it again. I reviewed and also showed him how the managed care grids are with each coupon to help him remember the right commercial plan so that he has as little headache as possible. I asked him if hysingla sounded like something he could offer to patients and he said yes he would give it a try.
PPLPMDL0020000001	Fairlawn	OH	44333	6/29/2015	Quick hysingla message at front counter and reviewed the trial offer. Dr said he knows about the product to but didn't know about the trial offer. I asked him to write it and handed him the initiation and titration guide.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/29/2015	Dr talked about how difficult it's been getting hysingla approved on insurance and said he knows of some patients not even getting the trial offer and dr said to talk with Tera. I asked about Butrans success getting covered and he said not too much problem and when he sees a BWC patient he automatically thinks of Butrans. I told dr I will talk to Tera and look at some of the denials.
PPLPMDL0020000001	Westlake	OH	44145	6/29/2015	discussed trial offer with hysingla and discussed some of the managed care plans that don't have pa's. They told dosing me about their processing savings cards and seemed to understand how to do this offer. We talked about attributes of our products and they asked about dosing. Gave fair balance of abuse potential for all opioids include purdue products
PPLPMDL0020000001	Westlake	OH	44145	6/29/2015	Discussed how they process the trial offer for hysingla and reminded of the aug 15th deadline. Gave fair balance of abuse potential for all opioids including purdue products. highlighted attributes of portfolio products.
PPLPMDL0020000001	Westlake	OH	44310	6/29/2015	Introduction to dr-OxyContin-dr said he doesn't prescribe it much because of its reputation-asked him when was the last time someone asked for it and he said not recently and then I asked him what are your patients asking for and he said Percocet-I went over abuse deterrent properties and dr said that's good but still is weary-I asked him for Percocet patients in his practice that he trusts that are approaching 3-4 tabs to transition to OxyContin and he said ok-I did remind him that OxyContin can still be abused but it's much more difficult to chew and crush
PPLPMDL0020000001	Westlake	OH	44145	6/29/2015	Discussed how her patients on butrans are doing and she said good. I asked if she had any trouble convincing them to switch from an immediate release pill to a patch? she said no. I highlighted patch rotation and how to discard Butrans. I asked what is her biggest hurdle writing Butrans compared to another opioid. she said managed care. I highlighted managed care for butrans and it lead into a discussion for hysingla with the trial offer and a review of the managed care grid. I asked if these plans seemed to be a good start? she said yes...she asked about medical mutal and I explained the pa process. Talked about conversion from norco to hysingla. Dr said she didn't have any questions. I asked if this was something she would write or wait to write? She said she liked it had the abuse deter properties and she liked the once a day dosing feature. she asked about her nursing home patients...I highlighted managed care and tried to push Butrans in that area and highlighted the managed medical like carewouce coverage and med coverage like with aarp and carecourse.
PPLPMDL0020000001	Westlake	OH	44145	6/29/2015	Discussed appropriate patient for hysingla and dosing. Gave fair balance of abuse potential for all opioids and she shared with me her feelings regarding treating chronic pain. She said she has many chronic pain patients but is trying to treat pain without opioids. she told me that the pain doctors tell her they don't write opioids. We talked about how the dosing scheduled of butrans and hysingla sound to her and she said good but she won't write
PPLPMDL0020000001	Cleveland Hts	OH	44118	6/30/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44125	6/30/2015	Reviewed portfolio of products, formulary opportunities and appropriate patients. said ok will continue to consider for appropriate patients had a Butrans patient today.
PPLPMDL0020000001	Independence	OH	44131	6/30/2015	Doctor likes the idea of ER Hydrocodone and wishes it would have been on the market years ago. Discussed with him appropriate patient type and he took one savings card put it in his pocket and commits to find one patient on Caremark or express scripts. He likes that butrans is c3 but can't think of too many patient that would want the patch.
PPLPMDL0020000001	Cleveland	OH	44113	6/30/2015	Reviewed Hysingla ER coverage opportunities along with Butrans for those appropriate patients that require around the clock analgesia. Said she and practice are 100% committed to Hysingla ER/Butrans
PPLPMDL0020000001	Cleveland	OH	44113	6/30/2015	Reviewed Hysingla ER coverage opportunities along with Butrans for those appropriate patients that require around the clock analgesia. Said she and practice are 100% committed to Hysingla ER/Butrans, WILL continue to initiate PA's
PPLPMDL0020000001	Akron	OH	44310	6/30/2015	Reminded dr about the trial offer for hysingla and told him that now is the time to identify appropriate patients in pain on Norco around the clock since August 15 is the cut off date. Dr said that's good to know. I asked him if he's titrated any patients recently or seen any back? Dr said not yet and will continue to search for patients. I reminded dr that he can continue to write Butrans for Caresource and BWC patients.
PPLPMDL0020000001	Cleveland	OH	44118	6/30/2015	Reviewed portfolio, appropriate patients, Hysingla ER plasma conc. levels, said ok will continue to consider/prescribe for appropriate patients, will also discuss and remind Dr. Harris.
PPLPMDL0020000001	Cleveland	OH	44113	6/30/2015	No new information learned on this call.
PPLPMDL0020000001	Garfield Hts	OH	44125	6/30/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44125	6/30/2015	Reviewed portfolio, Hysingla ER Trial card, Butrans savings and trial card offer, said ok, no new info learned
PPLPMDL0020000001	Parma	OH	44134	6/30/2015	No new information learned on this call.
PPLPMDL0020000001	Independence	OH	44131	6/30/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	6/30/2015	No new information learned on this call.
PPLPMDL0020000001	Mayfield Heights	OH	44124	6/30/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	6/30/2015	caresource coverage for butrans and hysingla esi coverage once a day dosing and a few attribuh highlighted
PPLPMDL0020000001	Berea	OH	44017	6/30/2015	Talked about the trial offer again. Highlighted some information off the hysingla patient brochure. covered a few attributes like dosing. They all seemed comfortable with how to redeem the coupon.
PPLPMDL0020000001	Parma	OH	44129	6/30/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	6/30/2015	No new information learned on this call.
PPLPMDL0020000001	Independence	OH	44131	6/30/2015	Asked Roman to only choose Hysingla for express scripts and Caremark. All others choose oxycontin. He said it is impossible for them to know which plans all the patients are on as quickly as they are seeing them and they are just wanting to write for them what they choose. Meh is very frustrated. Reinforced the bright spots and that the near future managed care will be better.
PPLPMDL0020000001	Akron	OH	44333	6/30/2015	No new information learned on this call.
PPLPMDL0020000001	Mayfield Hts	OH	44124	6/30/2015	No new information learned on this call.
PPLPMDL0020000001	Bedford	OH	44146	6/30/2015	No new information learned on this call.
PPLPMDL0020000001	Barberton	OH	44203	6/30/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44109	6/30/2015	Reviewed portfolio, trial card offer, No new information learned on this call.
PPLPMDL0020000001	Highland Heights	OH	44143	6/30/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44130	6/30/2015	Doctor has a few patients on oxycontin, believes in ER meds for pain, likes the idea of Hysingla but was wondering what would happen if patient took more than one. Let him know that one is to be taken at a time, Unless doctor feels patient needs to be titrated. Patient can take two pills one after the other but one at a time if advised by doctor. but IR breakthrough can also be prescribed. Therefore, if he writes a 20mg and patient takes 2 tablets, it would be 40mg daily dose.
PPLPMDL0020000001	Barberton	OH	44203	6/30/2015	caresource with butrans and initiation dosing. hysingla with ESI and dosing. Limited time and his accent was pretty hard to understand him so I kept it simple today.
PPLPMDL0020000001	Stow	OH	44224	6/30/2015	Lunch-OxyContin-dr said all is good-said she prescribes a lot for Medicaid patients-asked if coverage is going through smoothly and she said besides the obvious hoops and hurdles she's had good luck-went over coverage and gave her formulary grid-dr said it looks strong and will focus on commercial/part d patients; Butrans-dr said she likes it for patients after tramadol and low dose norco-I agreed great place and went over trial program-I asked her if she has taken advantage of the program since the majority of her commercial patients will get it for a very low copay-she asked for me to make copies for her and I told her I would do that
PPLPMDL0020000001	Akron	OH	44333	6/30/2015	Lunch-Butrans-went over Butrans trial program with dr and asked if a patient has already failed an nsaid and then tramadol wouldn't it make sense to prescribe a 7-day patch that for that same commercial patient that would have a low copayment? Dr said yes and I left him some with instructions; OxyContin-dr said he is down to 2-3 Percocet when switching to OxyContin-he said it's too tough to bring patients off higher counts of Percocet and if patient wants more he says no and still prescribes OxyContin! I focused him on patients in his practice already that he trusts that need that transition and he agreed great place
PPLPMDL0020000001	Parma	OH	44129	7/1/2015	Handed updated formulary grid for Hysingla through the window reviewing express scripts change. Told him to simplify Hysingla for the moment..... Will he find appropriate patient for Hysingla who has express scripts insurance. If he considered Hysingla for a patient, express scripts is the plan. He said yes. They were ok with butrans material and know he can write butrans for other plans besides express scripts...of course!
PPLPMDL0020000001	Parma	OH	44129	7/1/2015	Quick call through the window reminding her that butrans can be appropriate as patients first opioid with excellent managed care coverage. And then announced big managed care win for Hysingla on express scripts. She will keep an eye out for appropriate patient for Hysingla on express scripts
PPLPMDL0020000001	Akron	OH	44313	7/1/2015	Spoke with dr and Tina about using oxycontin lower doses like 10mg and conversions. Dr said he agrees to use more low doses. I asked him why with the excellent coverage as Butrans has why he's not using it? Dr said its either been too expensive or has side effects. I told him to use Butrans for his CareSource patients, medicare patients and his Medical Mutual patients as a average of a \$25 copay. Reviewed the doses and patients types with conversions. Dr said ok and to leave the information.
PPLPMDL0020000001	Lakewood	OH	44107	7/1/2015	Asked if I could help to identify who might be an appropriate hysingla patient to gain experience and he said to work with beth and she thought maybe one patient. His managed care was managed medical, so that won't work. I left the grid for her review and toldher to keep ESI top of mind for all our products that they don't require pa process.
PPLPMDL0020000001	fairview park	OH	44111	7/1/2015	Talked about the trial offer mostly. They seemed ok with the offer although when I spent time with the tech she seemed a little confused. I gave her a copy of the trial and the flow chart. We talked about the attributes of hysingla and the pharmacist asked if it was a schedule 2. I confirmed this information. Gave them one patient brochure incase someone comes and she wants to hand it out. She told me they print out something for the patients usually. I asked what they knew about butrans. She new very little-I covered attributes of this product asked when the last time they filled a script and she said it was a while.
PPLPMDL0020000001	Woodmere	OH	44122	7/1/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44320	7/1/2015	No new information learned on this call.
PPLPMDL0020000001	Stow	OH	44224	7/1/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44303	7/1/2015	Reminded Rod about the Butrans and hysingla trial offers and how each works. Provided him the Butrans printed trial card and provided a couple to him.

PPLPMDL0020000001	Cleveland	OH	44130	7/1/2015	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	7/1/2015	highlighted manage care with hysingla and the trial offer. Talked butans dosing and managed care.
	Munroe Falls	OH	44262	7/1/2015	Gave dr quick recap of oxycontin and hysingla attributes and then discussed two mc plans for each product. Reminded her for now to focus on oxycontin and Butrans for the most part due to her patients managed care plans which are medical mutual and Aetna.
PPLPMDL0020000001					
PPLPMDL0020000001	Cleveland	OH	44111	7/1/2015	No new information learned on this call.
PPLPMDL0020000001	Bedford	OH	44146	7/1/2015	No new information learned on this call.
PPLPMDL0020000001	Bedford	OH	44146	7/1/2015	OxyContin-dr said still transitioning at no more than 3 tabs of Percocet-I agreed good place; Butrans-went over trial program and gave 10 cards
PPLPMDL0020000001	Akron	OH	44320	7/1/2015	No new information learned on this call.
	Lakewood	OH	44107	7/1/2015	Talked about butrans with caresource and initiation doses. Also encourage ESI patients who are appraiprte for hysingla. Gave him a coupon, my card and asked him to try one patient today and to gain clinical experine with the product. he said ok
PPLPMDL0020000001	Tallmadge	OH	44278	7/1/2015	Led off lunch appointment with the slim jim portfolio piece and discussed attributes for oxycontin, Butrans and hysingla as well as the dosing, and conversions. Reviewed patient profiles for each product and focused on 2 mc plans for each product. I discussed his patients on Norco or percocet multiple times a day for many months or years and in pain around the clock and how hysingla and oxycontin and excellent options. Dr said he uses oxycontin for the medicare or Medicaid patient on Buckeye that has lumbar or cervical degeneration, overweight, no ambition and just want the quick fix. Dr said oxycontin is perfect but buckeye won't pay for anything so it difficult. Discussed commercial a other plans covering it other than buckeye. I asked him to write more and to try hysingla.
PPLPMDL0020000001					
PPLPMDL0020000001	Tallmadge	OH	44278	7/1/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	7/1/2015	pharmacist didn't have much time- but they took the trial offer and i highlighted the offer with attributes of hysingla. Gave my card and left fpi for review.
PPLPMDL0020000001	Beachwood	OH	44122	7/1/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/1/2015	OxyContin-dr said patients are doing well and he really likes product; Butrans-gave trial cards and discussed commercial patients in practice
PPLPMDL0020000001	Fairview Park	OH	44126	7/1/2015	Discussed butrand coverage with caresource and talked about dosing hysingla w esi managed care coverage.
PPLPMDL0020000001	Beachwood	OH	44122	7/1/2015	No new information learned on this call.
	Akron	OH	44312	7/1/2015	Quick messages about Butrans and hysingla. Discussed where and when to use each product and then about the trial offer for each. Dr said Purdue should have done the trial offer from the get go. I agreed and told him now is the time to get the medicine in his patients hands free for one month. Dr said he will start looking.
PPLPMDL0020000001	Beachwood	OH	44122	7/1/2015	Informed Roberta about the express scripts formulary change with Hysingla and asked they she keep an eye out for appropriate Hysingla patient for express scripts. If she writes it for only express scripts for now, that would be ok. She said she will keep that in mind. Reminded her that butrans is appropriate as patients first opioid and is only c3 ER opioid.
PPLPMDL0020000001	Beachwood	OH	44122	7/1/2015	No new information learned on this call.
PPLPMDL0020000001	Beachwood	OH	44122	7/1/2015	Had enough time to mention express scripts formulary change through the window. He said it is good that there are starting to be changes. Handed him formulary sheet and butrans tear off sheets. Asked for his commitment. He agreed.
PPLPMDL0020000001	Beachwood	OH	44122	7/1/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	7/1/2015	Talked about the ESI coverage for Hysingla and the free month with the trial offer. Dr talked about his caresource patients, which he has been doing the last visits. I focused his attention to Butrand for these patients who may be appropriate. I asked if he ever gets a phone call stating a product opioid isn't approved, he said yes. I said if you need medication that you can fax a prescription over and granted the patient was appropriate butrand is schedule three. I gave him my card, a butrans and hysingla coupon and asked him to offer it day for the right patients that may need it. The entire discussion lasted a few minutes.
PPLPMDL0020000001	Westlake	OH	44145	7/1/2015	The nurse practic with dr. wolf shared with me their extended release experience. It is limited but they were familiar with butrans. Reviewed the abuse deter properties of our products, gave fair blance of opioid pote ntial abuse for all opioids including purdue products. Talked about when they "think" they would convert someone from immediate release to a longer deliver system and thats when they stumbled. I reviewed the indication, and asked them if the indication was what they thought it would be for an extended release opioid and they said yes. We talked about the patient on nsaid or cox 2 or tramadol and they become uncontrolled and appropriate for a longer delivery system...we talked butrans and how to start it. Questions of managed care came up and they were surprised of the vast coverage on med d and caresource. The two plans i talked about today were caresource for butransd. And ESI for all our products. I talked about dosing of hysingla.
PPLPMDL0020000001	Tallmadge	OH	44278	7/1/2015	Led off lunch appointment with the slim jim portfolio piece and discussed attributes for oxycontin, Butrans and hysingla as well as the dosing, and conversions. Reviewed patient profiles for each product and focused on 2 mc plans for each product. I told dr that he is missing he boat by not using Butrans and told him I honestly can't understand why he's not using it? Dr said cost. I told him if it was covered 100% if he would seriously use it?
PPLPMDL0020000001	Tallmadge	OH	44278	7/1/2015	Explained the product in depth with efficacy, safety and cost. Dr said he will try to use it and remember and that the schedule 3 makes a big difference for him.
PPLPMDL0020000001	Tallmadge	OH	44278	7/1/2015	Led off lunch appointment with the slim jim portfolio piece and discussed attributes for oxycontin, Butrans and hysingla as well as the dosing, and conversions. Reviewed patient profiles for each product and focused on 2 mc plans for each product. She told me that she just got her DEA license a week and a half ago so for now is just seeing follow up patients. I explained to her about treating daily around the clock pain and to initiate ER opioids when the pathology shows something that will yield daily around the clock pain.
PPLPMDL0020000001	Cleveland	OH	44107	7/1/2015	Discussed the trial offer offer for hysingla. I asked what happens if a patient doesn't have the card will they look it up? She said usually no. I asked about the process with our trial if it was something they would do and they reviewed the flow chart a few times and the answer was I think so. No scripts have come thru yet. I highlighted butrans and the dosing and scheduling. We talked about abuse deter properties,yet also gave fair balance that abuse potential is possible with all opioids include purdue products.
PPLPMDL0020000001	Westlake	OH	44145	7/1/2015	Talked about abuse deter properties and still gave fair blance of abuse potential for all opioids include purdue products. tAlked about the existing patinet currently being treated for pain in the office. And what happens if they are uncontrolled will you treat them? They talked about butrans- she said its a schedule three and she liked that vs. a schedule 2. She also said she likes the dosing schedule of weekly patch. She was surprised to hear it was covered on some managed medicaid plans like caresource and workers comp. I asked if she ever offered it and she said no. I said have you moved from atc dosing with tramadol to hydrocodone? She said a few times. We backed up...and talked about Butrans in this patient type. if they were atc and not acute...what was the hesitation for a longer deliver system ? she said unfamiliarity of the product. Reviewed iniation process. Also talked about the opioid naive study the end point of the study and the criteria involved. Asked if she is more comfortable now or if soemthing more is needed to offer a patient butrans today? She thought she was set. Talked hysingla and she said she would leave schedule two products to dr. wolf. I asked if she makes recommendations, she said yes. We covered conversion and who is appropriate for the product and why.
PPLPMDL0020000001	Akron	OH	44312	7/1/2015	Focused dr in on hysingla er attributes and being able to identify a Norco patient who is in around the clock pain as an ideal candidate. Reviewed doses and conversions from Norco. Told dr to start more patients on Butrans as he can call it in and refill it as a schedule 3.
PPLPMDL0020000001	Westlake	OH	44145	7/1/2015	Dr asked how he was doing and asked if the scripts went thru for the patients. I told him i was seeing the butrans scripts and how wonderful it was that his caresource patients are getting it. I told him how his nurse was so helpful and we talked about how many upcoming caresource patients are on the books. I reminded of dosing. As for Hysingla. I told him to keep an eye out for those medco/pbms prescriptions coverage and highlighted a few things about trial offer and teir status for furture copays. terra is helping me to identify patients. The problem has been the lack of patients on the books w/ patients on the right insurance plans. We only looked at this week...but she said there are always those that drop in too. The sabings cards and the managed care grids are in each room.
PPLPMDL0020000001	westlake	OH	44145	7/1/2015	Dr said he hasn't written an extended release opioid in a while. I asked if he hasn't seen a patient or what does he do with the atc pain patient? Dr said he has been referring out and most patients are not appropriate because they are acute. we talked about our indication...and talked about treating patients that might be appropriate with under 80mg equivalent (as that is what he said is important to him last time). We talked about how he doses and he said he has many patients taking medications 4 or more times a day that meet the indication. The dr said these patients are usually on tramadol. I asked him to turn to Butrans as someones first ATC appropriate extended release opioid instead of adding another immediate release pain medication to their atc schedule- i asked if a longer delivery system might be a help to one patient of his currently. Dr said yes. I asked how he keeps track of managed care and dosing. Dr said he refers to approcrites if he is uncertain. I said that is perfect. I also reminded him and showed him that i stuck a slim jim conversion guide by the savings cards for reference incase he forgets. I asked him to put a few in each room along with managed care grid and he was uncertain he would comit to that because he doesn't want to clutter up the room and he doesn't see as many pain patients like he used to when he worked inElyria. Dr said many patients from elyria didn't transfer and stayed there. Dr was most interested in managed care. covered.
PPLPMDL0020000001	Cleveland	OH	44114	7/2/2015	Reviewed portfolio, discussed Hysingla ER formulary challenges, MEDCo/ESI opportunity, Identified appropriate Butrans/OxyContin patients that have coverage, committed to prescribing.
PPLPMDL0020000001	Cleveland	OH	44114	7/2/2015	Reviewed portfolio, discussed formulary challenges, MEDCo/ESI opportunity, said ok will continue to consider for appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44113	7/2/2015	Reviewed portfolio, discussed formulary challenges, MEDCo/ESI opportunity, Initiation/Titration said ok will continue to support utilization for appropriate patients that she can get covered.
PPLPMDL0020000001	Parma	OH	44129	7/2/2015	No new information learned on this call.
PPLPMDL0020000001	Stow	OH	44224	7/2/2015	No new information learned on this call.
	Stow	OH	44224	7/2/2015	Brief conversation with dr about the hyaingla and Butrans trial offers. Dr said she wasn't aware of the hysingla offer and it sounds great because she has many patients that need the medication. I told her she has until August 15th so now is the time. Dr asked if I have told Nay and I told her I have discussed it with her on a couple of occasions. Dr said she just wrote Butrans the other day and is having no issues with patients getting it.
PPLPMDL0020000001	Mogadore	OH	44260	7/2/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44109	7/2/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44114	7/2/2015	Reviewed portfolio, committed to stocking Hysingla ER.
PPLPMDL0020000001	Westlake	OH	44145	7/2/2015	The pharmacist was swamped, the grocery store was packed and the line was long. I gave a few attributes and highlighted the trial of the hysingla program/savings.
PPLPMDL0020000001	Akron	OH	44333	7/2/2015	Quick message to dr Goldner over coffee this morning about Butrans. I reviewed the attributes and asked him to please use it when his patients are on IR opioids like tramadol around the clock and in pain to use Butrans. Explained the conversions and where to start. Dr said he likes the product and will look to use it more frequently.
PPLPMDL0020000001	Cuyahoga Falls	OH	44224	7/2/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	7/2/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	7/2/2015	Elise told me she was seeing a patient of Dr Vucetics who called her last night at midnight saying that he can't continue taking his Butrans 20mcg due to rash. Elsie provided me with his empty box which I sent over to Barry Chudakoff who sent it to medical services. I told elise I will take care of it and send to medical services and to please continue trying with new patients. Discussed her use of oxycontin and hysingla. Elise said that her patient last week who I found 60mg for came back in and said she wants her Norco back. Elise said she gave the patient percocet and will be reducing her dose quickly and will try hysingla again.
PPLPMDL0020000001					
PPLPMDL0020000001	Cleveland	OH	44111	7/2/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/2/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44115	7/2/2015	Reviewed portfolio, discussed formulary challenges, MEDCo/ESI opportunity, said ok will continue to support utilization



PPLPMDL0020000001	Cleveland	OH	44113	7/2/2015	No new information learned on this call.
	Lakewood	OH	44107	7/2/2015	Talked to the staff about how many pa's they do in a day and they said it was not too bad. I spent some time thanking her for working on those pa's. she told me she would tell the dr about caresource. Dr thru window said hello. I told him that butrans was an option for those caresource patients appropriate and that he could initiation it on either 5 or 20mcg depending on their current dosage of what they are on- refer to the conversion guide. I told the dr I would check back early next week to see if he found someone on ESI for hysingla. Dr said ok
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/2/2015	No new information learned on this call.
	Westlake	OH	44145	7/2/2015	Highlighted a few attributes of hysingla. Dr said he wasn't sure about a once a day pain medication and asked about coverage. Discussed ESI mostly and the trial offer. Dr said he most likely won't because he writes generics or oxycontin for his older patients. I wanted to get into more detail but he walked away.
PPLPMDL0020000001	Cleveland	OH	44113	7/2/2015	No new information learned on this call.
	Cuyahoga Falls	OH	44223	7/2/2015	No new information learned on this call.
	Cleveland	OH	44115	7/2/2015	Reviewed portfolio with pain dept
	Cleveland	OH	44115	7/2/2015	Reviewed portfolio with staff, no new info learned
	Parma	OH	44129	7/2/2015	Laura said she continues to prescribe Butrans whenever she can-if patients are on high count of norco she finds it difficult to switch-discussed 5 strengths and slide ruler for making it easy to transition-went over trial program and she thanked me for printing off copies for her practice; OxyContin-n/a
PPLPMDL0020000001	Cleveland	OH	44113	7/2/2015	Reviewed portfolio, discussed formulary challenges, MEDCo/ESI opportunity, said ok will continue to support utilization
	Akron	OH	44333	7/2/2015	Dr was telling me again of the issues he's having with rash and itching with Butrans and having to discontinue the product. I have reported all these issues in the past. Dr said that Butrans is his go to ER opioid before any other and it is making him wary of using it going forward. Dr said he called medical services and was put on hold for 10minutes and didn't have time. I told him I will make sure they know about it. I told dr to please continue with oxycontin and told him he's doing great with hysingla and asked him to write it at least once a week. Dr said his patients love it and will continue to write.
PPLPMDL0020000001	Stow	OH	44224	7/2/2015	Spoke with tech staff members about hysingla attributes and dosing along with conversions. Discussed the hysingla and trial offers.
	Akron	OH	44312	7/2/2015	No new information learned on this call.
	Cuyahoga Falls	OH	44223	7/2/2015	Dr came up while I was speaking with Tera and told me that she has gotten multiple patients approved for hysingla and Butrans. Most recently patients approved on Butrans with proper charting on his part. I asked him for continued business on all fronts.
PPLPMDL0020000001	Westlake	OH	44145	7/2/2015	Discussed attributes and trial offer of hysingla. Talked about butrans being schedule three and I asked him questions like how does mail away work for schedule three. He said he hasn't seen muh mail away with opioids anymore. Covered ESI hysingla.
	Akron	OH	44312	7/2/2015	Snack-Butrans-dr said he's getting good results-initially had problems with coverage but not lately-went over formulary grid to confirm good coverage in his area and he agreed! Went over trial cards and dr agreed to try them on opioid naive patients with severe OA; OxyContin-dr said initially was concerned in prescribing it but after showing him abuse deterrent study he said he'd much more confident in prescribing it-I let him know abuse can still occur but it's much harder to crush or chew
PPLPMDL0020000001	Hudson	OH	44236	7/2/2015	Breakfast-Butrans-dr said he likes it for patients are opioid naive or on very low dose norco-dr finds higher doses of norco/Percoet are almost impossible to transition over-showed him the conversion slide ruler to let him know an easy way to transition patients to Butrans-dr liked slide and took it with him-went over trial program and asked for a patient who would qualify for it and he said he would, OxyContin-dr thinks it's a great drug-still has stigma in back of his mind about image-went over abuse deterrent study and dr liked it-I did let him know OxyContin can still be abused but it's more difficult to break or chew
PPLPMDL0020000001	Akron	OH	44312	7/2/2015	Snack-Butrans-dr said likes it when insurance pays for it and patients like it-asked about both and dr said has had some problems getting coverage-I went over coverage for his area and he agreed it's really good-plus I went over trial cards and dr agreed to look for commercial patients to take advantage of program; OxyContin-dr said he's concerned about image-went over abuse deterrent study and dr was impressed with what Purdue did and will prescribe for patients in his practice that he trusts
PPLPMDL0020000001	Cleveland	OH	44109	7/6/2015	Reviewed portfolio, formulary opportunities and patient info booklets. said ok will consider for appropriate patients that have coverage.
	Cleveland	OH	44101	7/6/2015	Quick intro and review of portfolio, 95% of Collinwood health center is managed medicalaid, will review and consider for appropriate patients.
	Cleveland	OH	44109	7/6/2015	Intro to Hysingla ER, discussed appropriate patients, initiation/titration, along with ins. coverage said ok will discuss with attendings.
	Cleveland	OH	44109	7/6/2015	Reviewed OxyContin and the abuse deterrent characteristics, Intro to Hysingla ER, initiation/titration, formulary opportunities, identified a patient, said ok will continue to consider for appropriate patients that have access to Medication.
PPLPMDL0020000001	Cleveland	OH	44109	7/6/2015	Intro to Hysingla ER, discussed appropriate patients, initiation/titration, along with ins. coverage said ok will discuss with attendings.
	Cuyahoga Falls	OH	44221	7/6/2015	Lunch appointment with dr and his staff. Led off with review of all products using the profilio slim jim. Discussed oxycontin attributes,so use deterrent properties, dosing, conversions and challenged him to use more oxycontin for his patients in pain on percoet or IR oxycodone. Reviewed hysingla attributes, dosing,conversions and appropriate patients already on Hydrocodone but in the short acting form. Discussed purpose of ER opioids in general and why IR opioids may not be most appropriate for daily, around the clock pain. Explained the hysingla trial offer and copy card. Reviewed Butrans attributes and Helen profile and asked for him to identify just one patient. Discussed managed care access for each product and to couple patient identification with the right mc access for best success. Dr said he really likes the trial offer for hysingla and has a few patients in mind.
PPLPMDL0020000001	North Olmsted	OH	44070	7/6/2015	Spoke with the staff to contact me with questions.
	Westlake	OH	44145	7/6/2015	talked about trial offer and attributes of hysingla and butrans.
	Westlake	OH	44145	7/6/2015	No new information learned on this call.
	Westlake	OH	44145	7/6/2015	No new information learned on this call.
	Cleveland	OH	44130	7/6/2015	No new information learned on this call.
	Parma	OH	44134	7/6/2015	Doctor has a patient population that does well with butrans. He is comfortable prescribing it and just needs savings cards. He has tried to write Hysingla but it was workers comp and it was rejected. He wants me to let him know when it will be covered in workers comp. I told him I will provide any formulary changes as they happen. Gave current formulary grid and ESI change and asked him to just write it for Caremark or express scrips/Medco for now. He agreed but said those aren't the common plans in his practice.
PPLPMDL0020000001	Fairlawn	OH	44333	7/6/2015	Quick hit on hysingla ER and told him when he sees his next Norco patient who is in pain around the clock to write hysingla ER and gave him the product attributes.
	Parma	OH	44129	7/6/2015	No new information learned on this call.
	Independence	OH	44131	7/6/2015	No new information learned on this call.
	Cleveland	OH	44195	7/6/2015	Reminded of OxyContin/ Reviewed Hysingla ER formulary opportunities, said ok will continue to prescribe and consider.
	Parma	OH	44129	7/6/2015	No new information learned on this call.
	Cleveland	OH	44109	7/6/2015	visited PMR clinic.No new information learned on this call.
	Cleveland	OH	44109	7/6/2015	No new information learned on this call.
	Cleveland	OH	44106	7/6/2015	No new information learned on this call.
	Cleveland	OH	44103	7/6/2015	No new information learned on this call.
	Fairlawn	OH	44333	7/6/2015	Quick check with Jessica and Sue about fills for my products. Sue said she hasn't seen any new scripts in the last week and there are no PAs pending. I discussed the ESI win for hysingla. Sue said that's good news because they are not seeing scripts. Reviewed the trial offer for hysingla and Butrans.
PPLPMDL0020000001	Cleveland	OH	44103	7/6/2015	No new information learned on this call.
	Brooklyn	OH	44130	7/6/2015	No new information learned on this call.
	Akron	OH	44313	7/6/2015	Spoke with Tom and Jason about trial offer information for hysingla and Butrans. Tom said he's glad Purdue made the right decision to make a true free trial and hopes it generates business.
	Akron	OH	44333	7/6/2015	No new information learned on this call.
	Parma	OH	44129	7/6/2015	Quick call through the window. Handing her portfolio piece, asked her to think of any patients who are taking a total daily dose of IR Percocet or Norco great that 20 mg. if one of,those patients com in needing more analgesia, they might be appropriate for ER meds like oxycontin or Hysingla. Ms he said she is keeping ER meds in mind because of ADP?
PPLPMDL0020000001	Cleveland	OH	44109	7/6/2015	Reviewed portfolio, No new information learned on this call.
	Akron	OH	44333	7/6/2015	Quick message at counter about identifying a Norco patient taking it around the clock and still in pain who tolerates the molecule and how hysingla can be a viable option. Discussed attributes and she said it sounds like a great product. I asked her to try it with the trial offer in one commercial patient.
PPLPMDL0020000001	Akron	OH	44333	7/6/2015	No new information learned on this call.
	Cuyahoga Falls	OH	44221	7/6/2015	Discussed hysingla with amy the pharmacist. Reviewed attributes, dosing and conversions. Discussed trial offer for hysingla and Butrans. Amy said she knows about it from the pharmacist journals and is glad to know it has abuse deterrent properties.
PPLPMDL0020000001	Parma	OH	44129	7/6/2015	Quick call. Doc said that butrans seems like a better option for his patient population because of formulary coverage. Hysingla is limiting because it is not covered on the more common insurance plans in his practice
	Westlake	OH	44145	7/6/2015	Left trial information along with the hysingla managed care grid. Didn't get to talk witht he dr tried to see Sue the pa coordinator but they said she wasn't available. Talked with the staff about their weekend.
	Westlake	OH	44145	7/6/2015	Head nurse on vacation. The person filling in didn't know much about hysing, and wanted me to come back later in the week when she comes back. I gave her the information attributes and trial information. When I spoke to the doctor he said he was busy today coming off the holiday and told me about all the hours he worked today as he started in the surgery center. I told him how I was going to come back and help him identify appropriate patients for hysingla and butrand.
PPLPMDL0020000001	Cleveland	OH	44113	7/7/2015	No new information learned on this call.
	Brooklyn	OH	44144	7/7/2015	Discussed portfolio, identified appropriate patients that have coverage, trial/savings card, said ok will continue to consider for patients that have access and are uncontrolled on present therapy.
	Cleveland	OH	44113	7/7/2015	Discussed Hysingla ER ESI/MedCO opportunity along with Butrans for those patients that she is identifying for ERO, working with Melissa/Kristin staff on gaining approval for Hysingla ER said ok will continue to prescribe for appropriate patients that she can covered and will present Butrans for those same patients
PPLPMDL0020000001	Cleveland	OH	44113	7/7/2015	Discussed Hysingla ER ESI/MedCO opportunity along with Butrans for those patients that she is identifying for ERO, working with Melissa/Kristin staff on gaining approval for Hysingla ER said ok will continue to prescribe for appropriate patients that she is prescribing an ERO.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/7/2015	No new information learned on this call.

PPLPMDL0020000001	Cleveland	OH	44113	7/7/2015	Visited IM dept, reviewed portfolio, formulary opportunities,
PPLPMDL0020000001	Cleveland	OH	44105	7/7/2015	No new information learned on this call.
	Barberton	OH	44203	7/7/2015	Discussed hysingla- attributes with trial offer. The doctor told me that he doesn't come back to many lunches any more. I asked if it was lack of value the reps are bringing these days or if it was something else? the dr said he doesn't have the time to sit down anymore. I asked how i can bring value to him with products he has little experience with? Dr said leave behinds. I asked if there was anyway that my next apt he would make expectation so that he can get up to speed with products like hysingla and butrans more. Dr said it depends on the day's schedule and maybe. I asked how receptive he is to writing products that are extended release opioids. Dr said he tried not to write but will very seldom. i asked how he treats atc pain that isn't acute. Dr. said he will refer out.
PPLPMDL0020000001					
PPLPMDL0020000001	Westlake	OH	44145	7/7/2015	Talked about hysingla- conversion and dosing. Tried about the trial offer.
	Akron	OH	44310	7/7/2015	Told dr about the ESI win for hysingla and asked him to get back to writing it. Dr and Shar both said they have a good number of patients with ESI and should be pretty easy to find them. I reminded dr of attributes and dosing and then asked him some of those patients might be appropriate for Butrans and asked for continued new business.
PPLPMDL0020000001	Parma	OH	44129	7/7/2015	Myra said that she found two patients today that she considered Hysingla for. One was medical mutual, the other was Medicare patient. I reviewed the formulary grid with her and said for now, she should stick with ESI and Caremark. I told her with a pa, some offices have gotten Caresource to go through and med-d. But asked her to stick with ESI and care mark. She said ok, it's just a matter of time
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/7/2015	No new information learned on this call.
PPLPMDL0020000001	Waterford	OH	45786	7/7/2015	I-Butrans clinical trial and co-pay cards. OxyContin start principles. Dosing, managed-care and co-pay cards for Hysingla. W-will look over the information
PPLPMDL0020000001	Barberton	OH	44203	7/7/2015	Talked about dosing with butrans and caresource and highlighted hysingla with ESI/MEDCO
	Cleveland	OH	44130	7/7/2015	Doctor isn't normally in on Tuesday but stopped in for a short day and was in a hurry, handed him portfolio piece and told him of option he has for patient in around the clock pain. Butrans is appropriate as patient first opioid and Hysingla is appropriate for any patient taking 20mg or more total daily dose of Norco. Reminded him it is once daily with ADP. He had to go.
PPLPMDL0020000001	westlake	OH	44145	7/7/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44130	7/7/2015	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	7/7/2015	Discussed a web x program and he was uncertain he would participate but said maybe. Highlighted the hysingla product with attributes and managed care/trial offer. I asked if this was something he could see himself offering an uncontrolled norco patient and he said maybe. I encouraged a trial of hysingla today while the information was fresh in his mind.
PPLPMDL0020000001	Lakewood	OH	44107	7/7/2015	Tied in a caresource coverage with butrans- left materials for review and thanked the nurses up front for all their work getting the caresource butrans thru for the patients.
PPLPMDL0020000001	Cleveland	OH	44144	7/7/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/7/2015	No new information learned on this call.
PPLPMDL0020000001	Highland Heights	OH	44143	7/7/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44130	7/7/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44305	7/7/2015	No new information learned on this call.
PPLPMDL0020000001	Middleburg Heights	OH	44130	7/7/2015	No new information learned on this call.
	Cuyahoga Falls	OH	44223	7/7/2015	Dr told me that he has written three Butrans prescriptions this week. I asked him to tell me a little about the, and he said all three wanted him to refill their short acting but each has chronic pain and two of them have osteoarthritis. Dr wanted to know more about titration and his ability to use IR opioids if necessary with Butrans. Discussed issues from MVA and reviewed AEs. I asked for continued prescribing. And told him I will follow up in a few weeks.
PPLPMDL0020000001	Cleveland	OH	44113	7/7/2015	Quick review of Portfolio of products, intro to Hysingla ER, Initiation/Titration, ESI opportunity, said ok will keep it mind when discussing options with patients, said to book appt with Judy.
PPLPMDL0020000001	Waterford	OH	45786	7/7/2015	I-Butrans clinical trial and co-pay cards. OxyContin start principles. Dosing, managed-care and co-pay cards for Hysingla. W-will look over the information but is concerned about lack of coverage
	Lakewood	OH	44107	7/7/2015	Talked about the trial offer and discussed what code they have to enter for our trial cards. They said will have to know about the trial card and it would be helpful if the patients brought the trial flow chart with them- i gave them one to review. We talked about the process of the PA of the trial. Also talked about attributes of the products and the conversion. Talked abuse deter properties of oxycotin and hysingla
PPLPMDL0020000001	Westlake	OH	44145	7/7/2015	Discussed trial card with Chris and the tech. Also talked about if they are stocking any hysingla for patients yet, they said no but could get it in and i asked how long and they said 48 hours. Gave attributes and fair balance of abuse potential for all opioids including purdue products.
	Lakewood	OH	44107	7/7/2015	IUNCH. DISCUSSED HYSINGLA AND ATTRIBUTES AND ESI/TRIAL OFFER WAS THE MAIN GOAL. I MADE SURE THAT THE DR UNDERSTOOD HOW TO CONVERT AND UNDERSTOOD WHO THE SAVINGS CARDS ARE FOR AND WHO THEY ARE NOT FOR. DR ASKED QUESTIONS AND I ANSWERED THEM. DR AGREED TO SET COUPONS IN HIS OFFICE, HE IS ALLOWING ME TO COME BACK AND SEE IF HE WROTE SCRIPT TO CHECK ON PATIENT AND I ASKED HIM TO CALL ME IF HE HAS THE SLIGHTEST CONCERN. TALKED WITH THE STAFF ABOUT HYSINGLA BUT IT WAS FAST, WILL RETURN TO TALK TO THE STAFF MORE. Also talked full portfolio but focus was hysingla and butrans. Got a follow up apt for next time and the dr put the trial card in his pocket.
PPLPMDL0020000001	Westlake	OH	44145	7/7/2015	Today i worked with Bridget the head RN and the doctor about a patient he just wrote hysingla for. I was in a few days ago and told the nurses to call me with any issues or concerns and i would help them anyway i could. And today they called me to come into the office and do just that. The patient had failed several products and dr is trying 20mg of hysingla. The dr would not tell me what this patient was on before..so i wasn't able to confirm the conversion. the patient has supermed insurance which i could not find, so i called kendra and she informed me it was a version of medical mutual and the pa process will be complicated. Then i contacted a few Discount drug marts to see when they could get the 20mg into the store. I personally went to the drug store and informed the tech and the pharmacist about the trial offer and upcoming patient. I worked with tracey at her ddm in lorain incase the patient goes there (i did call the pharmacist and talked with him too). Tomorrow, i will go back to drs office and confirm all my detail findings with them. if they don't get approved i will ask for them to reprocess the pa. i will also offer to assist with the pa process using cover my meds which i set them up.
PPLPMDL0020000001	Cleveland	OH	44130	7/7/2015	Quick. Handed him portfolio piece. He said that he doesn't really write opioids. I asked if he writes Norco in amounts greater than 20 mg per day. He said maybe a few patients. Told him that would be appropriate patient for Hysingla but once daily dose and ADP. Or for Percocet patients, there is oxycotin q12. Where does he think ER meds might make sense. My old me he'd think about it but had to go.
PPLPMDL0020000001	Parma	OH	44134	7/7/2015	He was swamped. Had enough time to pull through express scripts formulary coverage. Gave quick Hysingla selling message and asked for patient taking 20 mg or greater of Norco to consider once daily Hysingla. .... But remembering butrans as patients first opioid, he agreed
PPLPMDL0020000001	Barberton	OH	44203	7/7/2015	Talked about ESI/Medco and Hysingla for those patients appropriate. she said that most of her patients on extended release products are older and on med d plans. We discussed that hysingla might be used limitedly in her office but it was good to keep the information fresh for when the time comes.
	Barberton	OH	44203	7/7/2015	spent time with staff making them feel special and learning about their jobs and thanking them for all the hard work that they do. Main focus is deana and anne at this office, who grant me access. Today, i brought breakfast and the dr and i discussed hysingla. dr said that he hasn't seen the right patient yet with the right insurance. I encouraged and asked if he was sure he was willing to offer this to a patient still and the dr ensured me that he will use the product given the right patient. so we focused on managed care and the trial offer- along with attributes of conversion and dosing. I asked him to set a few savings cards in each room. I spend time asking him what will help him find just one patient that we aren't already doing? Dr didn't know. I asked him what value do you see hysingla compared to other options? Dr talked about what he liked about hysingla. I asked what is the one thing you wish could change about itDr said managed care. So i recapped the managed care...had him focus on the ESI/Medco grid i gave him and the one plan. I encouraged him to ask his patient when he sees the norco or percocet patient appropriate what their prescription coverage is...dr said he would have trouble remembering to do this. I asked permission to continue to gaining extra access until we get him a few considation patients on hysingla and he said that was fine and as long as his nurses have time.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/7/2015	Lunch-Butrans-dr said he loves Butrans and its his go-to pain med-he especially likes it in the nursing home going from IV to the patch-dr asked me about Medicare coverage because he wasn't sure if it was being covered-I went over formulary grid and he said he felt better with the coverage and took the grid-I also told him that his reimbursement specialist Tera knows the ins and outs of PAs and denials and can help him out a lot-I also volunteered my service if he gets in a bind; OxyContin-dr said he switches at 4 Percocet tablets and will not go beyond 4-dr said he's had no issues with coverage and also likes the abuse deterrent properties-I did let him know that it can still be abused
PPLPMDL0020000001	Waterford	OH	45786	7/7/2015	I-Butrans clinical trial and co-pay cards. OxyContin start principles. Dosing, managed-care and co-pay cards for Hysingla. W-will look over the information but is concerned about lack of coverage
PPLPMDL0020000001	Westlake	OH	44145	7/8/2015	Worked with Tracy to verify that the patient was able to fill the hysingla with their insurance and also collected how much their future copay will be via the pharmacist information. I was able to get back and talk with Bridget (who also attended a program, she is a head RN) and we talked about this patient. The doctor was thrilled and he told me how much they like the patient and hope it works for them. I reminded them of steady state- i also reminded them they if the patient needs break thru it was approved to use immediate release opioids or nsalds or non opioid pain relievers with hysingla. We talked about tiration. the doctor said this patient has been on many products before...i reviewed the conversion and reminded them if the dose isn't right after steady state is reached he could increase to the 30 if need be. I also gave the doctor the stocking sheet and asked him to sign it so we could potentially stock future hysingla for patients. The nurses thought it was a great idea. We talked about the trial offer. and having the 30 days was something they thought was amazing for the pa's. I stressed ESI/Medco for coverage. I reminded them about caresource coverage with butrans as a possible back up for an appropriate patient until hysingla gets coverage in this area. Dr was thankful to me and i was happy to help. I told him i look forward to tomorrows prescripion and the results from the patients sucess.
PPLPMDL0020000001	Akron	OH	44313	7/8/2015	No new information learned on this call.
PPLPMDL0020000001	CLEVELAND	OH	44195	7/8/2015	Discussed portfolio along with opportunities within the Taussig Center.
PPLPMDL0020000001	Cleveland	OH	44195	7/8/2015	Discussed portfolio with Angela RPH mgr. along with opportunities within the A bldg. most RX's for opioids are for acute patients, will contact for opportunities.
PPLPMDL0020000001	Cleveland	OH	44195	7/8/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	7/8/2015	Reviewed portfolio with dept./pharmacy.
PPLPMDL0020000001	Cleveland	OH	44195	7/8/2015	Visited IM,Rheum, Ortho depts. left portfolio info
PPLPMDL0020000001	Stow	OH	44224	7/8/2015	Discussed the hysingla ESI win with Jamie the pharmacist and discussed the opportunity it presents. Jamie said that's very big and then hopefully getting BWC by years end which should make the product explode.
PPLPMDL0020000001	Akron	OH	44305	7/8/2015	Spoke with Joey about hysingla ER reviewing product attributes, dosing and conversions. Discussed the trial offer and how it works. Joey said its a great offer and hopes to see some scripts.
PPLPMDL0020000001	Cleveland	OH	44195	7/8/2015	Discussed portfolio and how each product is utilized within the palliative medicine team. Reviewed formulary opportunities along with trial card/savings cards
PPLPMDL0020000001	Westlake	OH	44145	7/8/2015	Reminded the doctor how to dose and ESI/medco.
	Westlake	OH	44145	7/8/2015	Talked about what is the doctors confort level with oxycotin and dosing. Talked about hysingla with the hydronone moulle and stressed if the patient is not controlled, ask to ask if the patient wishes the medication lasts longer. If you are going to make a change to their medication. I asked that instead of adding more immediate release to their atc scheudle to try hysingla. Highlighted ESI- gave grid. Showed my card and savings card. Asked for one appropriate patient today. Also talked butrans- med d patients and dosing.
PPLPMDL0020000001					
PPLPMDL0020000001	Cleveland	OH	44195	7/8/2015	Quick review of portfolio, formulary opportunities, said ok book appt for further discussion.

PPLPMDL0020000001	Bedford	OH	44146	7/8/2015	No new information learned on this call.
PPLPMDL0020000001	Stow	OH	44224	7/8/2015	No new information learned on this call.
PPLPMDL0020000001	Munroe Falls	OH	44262	7/8/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	7/8/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	7/8/2015	Quick message about ESI hysingla win and asked her for continued use. Told else that we will be calling Purdue next week to discuss Butrans AEs with a PharmD.
PPLPMDL0020000001	Cleveland	OH	44195	7/8/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	7/8/2015	No new information learned on this call.
PPLPMDL0020000001	Fairlawn	OH	44333	7/8/2015	No new information learned on this call.
PPLPMDL0020000001	Twinsburg	OH	44087	7/8/2015	He said that coverage is the biggest roadblock to his gaining experience with Hysingla. Asked him to find patient with express scripts, Caremark or Cigna insurance when thinking of prescribing Hysingla.
PPLPMDL0020000001	Lyndhurst	OH	44124	7/8/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	7/8/2015	No new information learned on this call.
PPLPMDL0020000001	Lyndhurst	OH	44124	7/8/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	7/8/2015	Talked about dosing and ESI with oxycontin9n and hysingla-
PPLPMDL0020000001	Cleveland	OH	44113	7/8/2015	Reviewed Hysingla formulary opportunity along with Butrans reminder. Confirmed Hysingla RX with Melissa
PPLPMDL0020000001	Cleveland	OH	44113	7/8/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	7/8/2015	New office manager in westlake Jess. My goal was to make her my friend and find out about her. I brought in snacks- we talked about her husband and about her new role. I said congrats on your promotion when I came in and she was all happy. Dr talked to me about hysingla said he has been writing. I encouraged and highlighted a few attributes and ESI coverage. Dr asked about caresource...I told him you should remember butrans for your caresource patients. Dr asked if it was covered on that plan and I explained. I reviewed the trial with jess and sam. They said the dr does hand out scripts at this office and they do handle the pa's. I told them how I could be a resource to them...cover my meds, stocking sheets and so forth. In encouraged them to call me the next time a script is written.
PPLPMDL0020000001	Westlake	OH	44145	7/8/2015	Today it was about the refill patient for hysingla. talked about steady state, use of break thru medications and the trial offer. For butrans it was about rotation of the patch per the fpi, schedule three...and caresource. I asked if she has had any problems in the last 6 months or so that she can remember and she said no.
PPLPMDL0020000001	Westlake	OH	44145	7/8/2015	Talked about hysingla attributes and ESI. Dr was interested in the once a day option, although he said he writes very little norco which prompted him to talk about butrans. Talked about the broad coverage for butrans. talked about dosing.Dr said he likes butrans but won't write much chronic pain medications. I said understood. Just try one appropriate patient when you get the chance to do so and he said he would try it. I offered a web ex...flat no. I tried to work on a return visit. dr went on about how busy the staff and he is and he barely had time to talk today. I thanked him for the time and told him I would find a way to let him know i'm here and remind him of these products.
PPLPMDL0020000001	Bedford	OH	44146	7/8/2015	Reviewed the improved formulary coverage again. Gave updated formulary grid. They let me know that a patient called saying that she couldn't find Hysingla stocked anywhere. After finding out where she lived, I called some nearby pharmacies and told them where she should go for her Hysingla.
PPLPMDL0020000001	Westlake	OH	44145	7/8/2015	Talked about how many patients she has in pain that she already has on extended release products. she said very few. I asked if she treats atc patietns who are not acute with immediate release atc as an option. She said maybe a few. I focused in on the low percentage of patients that may be appropriate but understanding this hysingla product so if the time comes she is comfortable writing it for her approparte pateitns. We talked attributes we also talked about abuse potential for all opioids including our products and I asked that if they are approparte to offer hysingla instead of adding another atc immediate release. focused on esi and the plans that we have coverage and highlighted the trial offer.
PPLPMDL0020000001	Cleveland	OH	44113	7/8/2015	Butrans-said was busy and said I understand-I want to let you know the trial program has been continued and I have some sheets for your patients so you don't have to print them yourself-she thanked me; OxyContin-n/a
PPLPMDL0020000001	Akron	OH	44333	7/8/2015	Told dr about the ESI win for hysingla and dr said that's amazing news and it will help because he's been writing a lot. I asked for continued use and dr said he wrote one today for a patient taking 10mg TID of Norco and he started the patient on a 40mg hysingla. Dr said the patient was very happy for the QD dosing. Set up appointment with dr and else for lunch next week in an effort to call the PharmD about Butrans.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/9/2015	No new information learned on this call.
PPLPMDL0020000001	Uniontown	OH	44685	7/9/2015	Quick message for Butrans over lunch. Reviewed Butrans attributes, conversions and appropriate candidates. Heather said its the only product she would consider writing due to it being a schedule 3 patch. Discussed trial
PPLPMDL0020000001	Tallmadge	OH	44278	7/9/2015	Discussed opportunities for Butrans and hyaingla and how to identify patients for each. Dr said he's thought about hysingla a couple of times but didn't write it because the patients vicoden wasn't working. I told him those are the ideal candidates! Reviewed the conversions and told him that the patients on vicoden may need that next dose and if he won't go over 20mg of IR like he says then he can decide which hysingla dose to start on. Dr said that makes sense now and will try. Dr looked up hysingla in his E clinical works EHR and it was not populated. I spoke with Angelique and gave her the information to add it manually.
PPLPMDL0020000001	Uniontown	OH	44685	7/9/2015	Discussed all product attributes, conversions and dosing along with appropriate patients for each. Dr said that 90% of his patients in chronic pain have either medicaid or medicare and that my products aren't covered. I told dr he is wrong because they are. Discussed medicaid and Medicare coverage for Butrans and oxycontin. I asked dr to write Butrans and oxycontin for these patients and where and when for each. Dr said he can see how he should be using more Butrans for Caresource and BWC and will do better.
PPLPMDL0020000001	Cleveland	OH	44115	7/9/2015	Reviewed portfolio, identified appropriate patients, said ok will continue to consider/prescribe for appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44113	7/9/2015	Identified appropriate patients for both Hysingla ER/ Butrans said she will continue to prescribe for those appropriate patients that has coverage
PPLPMDL0020000001	Cleveland Hts	OH	44118	7/9/2015	Discussed portfolio and ESI/MedCo opportunity, identified appropriate patients, Initiation/Titration, said ok will continue to consider for those appropriate patients.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/9/2015	No new information learned on this call.
PPLPMDL0020000001	University Hts	OH	44118	7/9/2015	No new information learned on this call.
PPLPMDL0020000001	Euclid	OH	44132	7/9/2015	No new information learned on this call.
PPLPMDL0020000001	Garfield Hts	OH	44125	7/9/2015	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	7/9/2015	Beth said the doctor will write hysingla but he needs to find the right patient. We talked about attributes and the trial offer. The doctor told me to have beth frind him a patient to try it on. Beth only had time to look a few days out. I'll go back next week and see if kwe can find more.
PPLPMDL0020000001	Berea	OH	44017	7/9/2015	Reviewed trial offer of hysingla. then reviewed dosing of both hysingla and butrans.
PPLPMDL0020000001	Cleveland Hts	OH	44118	7/9/2015	Reviewed portfolio,No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	7/9/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	7/9/2015	No new information learned on this call.
PPLPMDL0020000001	Uniontown	OH	44685	7/9/2015	No new information learned on this call.
PPLPMDL0020000001	Solon	OH	44139	7/9/2015	Doc left a message so I stopped in. Asked if he can cut the butrans patch for a patient that it works well for but has to pay hundreds of dollars. I told him he isn't supposed to cut the patch but he should call medical services for specific information on the subject. He said he will. Also reviewed Hysingla quickly and I proved formulary coverage.
PPLPMDL0020000001	Euclid	OH	44119	7/9/2015	No new information learned on this call.
PPLPMDL0020000001	BEACHWOOD	OH	44122	7/9/2015	No new information learned on this call.
PPLPMDL0020000001	LAKEWOOD	OH	44107	7/9/2015	Talked about the trial offer with hysingla. and reviewed dosing of hysingla and butrans.
PPLPMDL0020000001	Westlake	OH	44145	7/9/2015	No new information learned on this call.
PPLPMDL0020000001	Berea	OH	44017	7/9/2015	Talked about butrans and ESI and caresource. Dr said he hasn't tried hysingla yet and we talked about the coupons on each of the rooms and encouraged him to continue to look for the right patient.
PPLPMDL0020000001	Euclid	OH	44117	7/9/2015	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	7/9/2015	Discussed ESI coverage for hysingla and attributes with nurses. The doctor asked what was new and I talked about attributes with hysingla. Dr couldn't remember much about hysingla from our previous discussion.
PPLPMDL0020000001	Lakewood	OH	44107	7/9/2015	didn't get to see the doctor today. Highlighted managed care and dosing with hysingla and tied in butrans with caresource.
PPLPMDL0020000001	Westlake	OH	44145	7/9/2015	No new information learned on this call.
PPLPMDL0020000001	Euclid	OH	44119	7/9/2015	No new information learned on this call.
PPLPMDL0020000001	Uniontown	OH	44685	7/9/2015	Reviewed hysingla with Kim and reviewed the trial offer. Kim said she thinks they have two patients on hysingla and only a few on Butrans and have the appropriate trial cards.
PPLPMDL0020000001	Cleveland	OH	44195	7/9/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland Hts	OH	44118	7/9/2015	Reviewed portfolio,No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44118	7/9/2015	No new information learned on this call.
PPLPMDL0020000001	Beachwood	OH	44122	7/9/2015	Quick update on Hysingla formulary coverage and savings card information. She said that she is keeping Hysingla in mind but has had one rejected already. Asked her to keep it simple and just consider appropriate express scripts patients. She said ok. Let her know that butrans is appropriate as patients first opioid.
PPLPMDL0020000001	Beachwood	OH	44122	7/9/2015	No new information learned on this call.
PPLPMDL0020000001	Beachwood	OH	44122	7/9/2015	OxyContin-she said some coverage problems in past-went over formulary grid and showed good coverage-she agreed and will continue prescribing-she did comment that sometimes metros pharmacy has right to switch? I asked her to let me know when that happens so I can help her; Butrans-went over trial program and coverage-she agreed great program to cut costs for patients and will use-went over care source since number one plan and she agreed soft PA and will prescribe for those patients
PPLPMDL0020000001	Beachwood	OH	44122	7/9/2015	Using Phil through the window quickly discussed patient taking total daily dose of 20 mg of IR Norco or Percocet. Asked her if some of them would be appropriate for once daily dosing Hysingla or twice daily with oxycontin. She said she is giving thought to Hysingla but coverage isn't too good. Reviewed formulary improvements including express scripts and savings program. She said she will find someone.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/9/2015	Quick hello and told him again about the hysingla trial offer and asked for continued prescribing. Dr said he continues to have success with Butrans although some patients have too high of a cost however said he understands that's going to happen. I reminded him about Caresource and BWC and then explained the hysingla trial card and then the ESI coverage. Dr said that's a good thing and will look for more Norco patients.
PPLPMDL0020000001	Beachwood	OH	44122	7/9/2015	Doctor said that he sees a place for ER meds in his practice, nice to have option of oxycontin and Hysingla. He told me he finally wrote for wrote Hysingla for a patient whose lifestyle was more conducive to once daily dosing
PPLPMDL0020000001	Akron	OH	44312	7/10/2015	And is on the 80mg. He said the patient is doing well so far. Reviewed the savings program and updated him on the formulary updates for Hysingla and oxycontin.
PPLPMDL0020000001	Akron	OH	44312	7/10/2015	No new information learned on this call.

PPLPMDL0020000001	Garfield Hts	OH	44125	7/10/2015	Visited pain mgmnt dept. Reviewed portfolio with Dalbir, Discussed Hysingla ER appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44195	7/10/2015	Reviewed portfolio, Hysingla ER formulary opportunity ESI/MedCo, trial/savings card said ok will consider for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44195	7/10/2015	Reviewed portfolio, discussed appropriate patients for Hysingla, formulary opportunities ESI/MedCo, said ok will keep it mind when discussing with NP's
PPLPMDL0020000001	Mogadore	OH	44260	7/10/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44103	7/10/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44125	7/10/2015	Spoke with Sarah RPH, No new information learned on this call.
PPLPMDL0020000001	Olmsted Falls	OH	44138	7/10/2015	No new information learned on this call.
PPLPMDL0020000001	Independence	OH	44131	7/10/2015	No new information learned on this call.
PPLPMDL0020000001	Berea	OH	44017	7/10/2015	Talked about Esi with Hysingla. Dr said he would try to remember and he told me he was going to write a script and then told me about the butrans script. I thanked himfor offering it to his patients.
PPLPMDL0020000001	Cleveland	OH	44195	7/10/2015	No new information learned on this call.
PPLPMDL0020000001	Garfield Hts	OH	44125	7/10/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	7/10/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44319	7/10/2015	No new information learned on this call.
PPLPMDL0020000001	Berea	OH	44017	7/10/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	7/10/2015	No new information learned on this call.
PPLPMDL0020000001	Shaker Heights	OH	44122	7/10/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	7/10/2015	Doctor said he is thinking about writing Hysingla but needs to be reminded which plans cover it. Gave him another formulary grid and ask that if he remember nothing else, remember express scripts. Oxycontin is still appropriate ER option for Percocet patients and Hysingla is appropriate for patient on total daily dose of 20mg or greater of Norco.
PPLPMDL0020000001	Parma	OH	44129	7/10/2015	No new information learned on this call.
PPLPMDL0020000001	Beachwood	OH	44122	7/10/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	7/10/2015	No new information learned on this call.
PPLPMDL0020000001	Garfield Heights	OH	44125	7/10/2015	Discussed portfolio, reviewed Hysingla ER, initiation/Titration, Formulary opportunities- ESI/MedCo opportunity, Trial/Savings Card, said ok will continue to review/discuss with Abraham/Samuel. Will be on vacation for the next 2 weeks but will remind when he returns
PPLPMDL0020000001	Beachwood	OH	44122	7/10/2015	Quickly reviewed that there are now two ER options for patients in around the clock pain using portfolio piece. She said she wants to set up a meeting with the group to review Hysingla. She said she will be in touch and arrange that. Let her know i could do a webinar, webcast options also. Reviewed already improved formulary for Hysingla and savings card info.
PPLPMDL0020000001	Parma	OH	44129	7/10/2015	Doc is frustrated with the expense of meds, he believes something like Hysingla should have been around a long time ago. Let him know about free trial and shared formulary coverage with him. He said he will eventually find a patient for it.
PPLPMDL0020000001	Cleveland	OH	44114	7/13/2015	Discussed portfolio, followed up on formulary opportunities/Reviewed ESI/MedCo Tier 2 Status, identified appropriate patients, Said ok will continue to prescribe and consider for appropriate patients.
PPLPMDL0020000001	Mayfield Village	OH	44143	7/13/2015	Lunch w practice. Dr. Ashraf on vacation, might be back this FRI 7/17 – if not back on Monday. Met with med assistant; discussed Purdue product portfolio of single entity, extended release opioids. Discussed appropriate patients for each product, scheduling, dosing, reinforced Hysingla ER up to 30 days free offer. Left literature for Dr. Ashraf.
PPLPMDL0020000001	Cleveland	OH	44113	7/13/2015	Reviewed portfolio, discussed appropriate patients, discussed formulary opportunities, trial/savings card. Said ok has started 2 patients on Hysingla ER, no feedback yet.
PPLPMDL0020000001	Cleveland	OH	44113	7/13/2015	Discussed portfolio, formulary opportunity, his role in working Ortho floor along with Dr. Daoud. Said ok will continue to prescribe for appropriate patients. Discussed opportunity with Dr. Daoud
PPLPMDL0020000001	Cleveland	OH	44115	7/13/2015	Quick review of portfolio, identified appropriate patients. said ok will continue to prescribe for those patients that she can covered.
PPLPMDL0020000001	Mayfield Village	OH	44143	7/13/2015	Lunch. Discussed appropriate patient (s) for Butrans: after NSAIDs/acetaminophen or after 3-4 Tramadol daily, OxyContin after oxycodone; abuse deterrent properties, dosing one tablet 8 am and 1 tablet 8 pm. Discussed patients on immediate release hydrocodone who are not controlled: Hysingla ER offers once daily hydrocodone delivery; up to 30 tablets free/savings; then formulary updates for Hysingla ER: tier 2 preferred ESI/Medco and Tier 3 United Health Care commercial.
PPLPMDL0020000001	Cleveland	OH	44113	7/13/2015	Visited pain dept and Ortho floor, Reviewed portfolio
PPLPMDL0020000001	Westlake	OH	44145	7/13/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	7/13/2015	Talked about hysingla attributtes and the ESI/Medco coverage. Talked butrans with med d patietnts. asked him to try it if he saw someone appropraite today.
PPLPMDL0020000001	Parma	OH	44134	7/13/2015	No new information learned on this call.
PPLPMDL0020000001	Lyndhurst	OH	44124	7/13/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	7/13/2015	Reviewed Hysingla ER along with formulary opportunities with Mike, No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44134	7/13/2015	No new information learned on this call.
PPLPMDL0020000001	Fairlawn	OH	44333	7/13/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	7/13/2015	No new information learned on this call.
PPLPMDL0020000001	Independence	OH	44131	7/13/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	7/13/2015	No new information learned on this call.
PPLPMDL0020000001	Fairlawn	OH	44333	7/13/2015	No new information learned on this call.
PPLPMDL0020000001	Lyndhurst	OH	44124	7/13/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44134	7/13/2015	No new information learned on this call.
PPLPMDL0020000001	Fairlawn	OH	44333	7/13/2015	Spoke with Jessica about hysingla ER and ESI win. Discussed the impact of ESI in akron and reviewed attributes of the product.
PPLPMDL0020000001	Lyndhurst	OH	44124	7/13/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	7/13/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	7/13/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	7/13/2015	Quickly reviewed patient for Hysingla and she said she understands who it is and has wanted to write for a few patients but they had the wrong insurance coverage. Reviewed formulary updates and left her new formulary grid. Reminded her that butrans is appropriate as patients first opioid.
PPLPMDL0020000001	Westlake	OH	44145	7/13/2015	Discussed the dinner program for hysingla and a few attributes and the trial offer. Dr was in between procedures therefore conversation was shortened this day.
PPLPMDL0020000001	Cleveland	OH	44130	7/13/2015	Using Phil, quickly showed appropriate patient for Hysingla. Reminded of dosing and pulling through express scripts. Left managed care grid and asked him to consider abuse deterrent medication for his patients at the lowest copy on d a few plans. Asked him to review butrans material also.
PPLPMDL0020000001	Uniontown	OH	44685	7/13/2015	Quick hello with d at counter. Showed him the oxycontin doses from the MVA and asked him to please continue to prescribe it for those already on the oxycodone molecule but in a q4-q6 dosing frequency. I gave him the hysingla initiation and conversion guide along with a ESI announcement card and asked him to try it with the trial offer. Dr said he will review the information.
PPLPMDL0020000001	Westlake	OH	44145	7/13/2015	the Pa does make suggestions on what to initiation a schedule 2 product however the doctors write the first script and after they are established then she is allowed to do the refills. she is allowed to write schedule three products. I asked her experience with butrans and she said she has some but i got the impression it was limited. I asked what was her direction on converting from immediate release to extended release and she said it all depends. She talked about having patients on 8 pills a day of tramadol and she thought that was fine. Talked about the apprairate butrans patient...and attributes of the product. Covered managed care. Tried to establish excitement around a dinner program in september. she said it depends on sports with her kids. next time figure out more about her kids and get to know her interests to build relationship.
PPLPMDL0020000001	Mayfield Village	OH	44143	7/13/2015	Lunch. Discussed Hysingla ER product attributes including single entity, extended release, once daily hydrocodone with abuse deterrent properties. Discussed Norco patients not controlled; consider just changing the delivery system to once daily hydrocodone. Using initiation guide, showed how to dose, strengths; and discussed up to 30 days free trial. Dr. Krishnan says he will keep in mind the formulary updates; tier 2 preferred on ESI/Medco and tier 3 on United Health Care commercial.
PPLPMDL0020000001	Westlake	OH	44145	7/13/2015	Dr. Shared that he was in Westlake on Tuesdays and we talked about his experience with Hysingla and butrans. By the end of the lunch and before left, i was able to secure a hysingla dinner program for their entire group of doctors, pa's and key office personnel. We talked about steady state, adding break thru medication and managed care. Dr shared his idea on when someone is ready to transition from immedaate to extended release- which is to rotate the patient in most cases to a different molecule. Dr said he will write Butrans after tramadol and also stated his comfort with writing lower doses of opioids in general. We talked about the trial offer and this information was shared with the nurses who handle the offer. Work with tally the office manager for the upcoming program for hysingla.
PPLPMDL0020000001	Mayfield Village	OH	44143	7/13/2015	Lunch. Discussed purdue 3 product, single entity, extended release opioid portfolio. Discussed scheduling, delivery system/dosing, scheduling and abuse deterrent properties for Hysingla ER and OxyContin. REinforced Hysingla ER up to 30 tablets free; and additional savings after. Presented formulary update on now preferred Tier 2 ESI/Medco and now Tier 3 United Health Care commercial.
PPLPMDL0020000001	westlake	OH	44011	7/13/2015	Discussed experience with hysingla which has been limited. Reviewed trial offer of hysingla and tried to stress the benefits for the patient that the trial brings with no copay and other. I'm not sure he seems as interested in this as the nurses found this to be. We worked out the details for a September program- i tried to stress the importance of the office. Today i worked to create a return visit by establishing a hysingla dinner program for the office and working on a relationship with tally and jess the people in charge.
PPLPMDL0020000001	Independence	OH	44131	7/14/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	7/14/2015	No new information learned on this call.
PPLPMDL0020000001	Barberton	OH	44203	7/14/2015	The majority of the conversation with with Anne and Deana about hysingla and the ESI managed care win. Talking about conversion. The doctor came by and said he would write but he hasn't seen anyone uncontrolled yet and he wasn't going to change their medication just because. I totally supported his decision and told him so. Identifying the right patient and then knowing what dose to turn to was my focus.
PPLPMDL0020000001	Garfield Hts.	OH	44125	7/14/2015	Quick intro to Hysingla ER, Initiation/Titration along with OxyContin every 12hours, said ok will consider for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44113	7/14/2015	Discussed portfolio with Dr. Marcu/Essi staff identified appropriate patients, formulary opportunities, Initiation/Titration of Hysingla ER, patient info booklets, said ok will help in remnding Dr. reviewed Trial/Savings card along with ESI opportunity
PPLPMDL0020000001	Cleveland	OH	44125	7/14/2015	Reviewed portfolio, identified appropriate patients, Initiation/Titration, formulary opportunities. said ok will consider for appropriate patients.

PPLPMDL0020000001	Cleveland	OH	44113	7/14/2015	Discussed portfolio, identified appropriate patients, formulary opportunities, Initiation/Titration of Hysingla ER, patient info booklets, said she has a few new patients that she will start on Hysingla, reviewed Trial/Savings card along with ESI opportunity
PPLPMDL0020000001	Garfield Hts	OH	44125	7/14/2015	Reviewed Hysingla/Butrans, identified patients, said she will consider Butrans for her Med D patients, will be in new location next week.
PPLPMDL0020000001	Garfield Hts	OH	44125	7/14/2015	Visited ortho and PC office, product info
PPLPMDL0020000001	Cleveland	OH	44113	7/14/2015	Visited pain mgmt, and ortho dept, pharmacy
PPLPMDL0020000001	Akron	OH	44310	7/14/2015	No new information learned on this call.
PPLPMDL0020000001	Barberton	OH	44203	7/14/2015	Reviewed the trial offer for hysingla. They didn't not have time to review in as detail as i wanted to so i left behind the grids and information on the product. The pharmacist only asked me if it was schedule 2 which i
PPLPMDL0020000001	Cleveland	OH	44113	7/14/2015	No new information learned on this call.
PPLPMDL0020000001	Independence	OH	44131	7/14/2015	No new information learned on this call.
PPLPMDL0020000001	Lyndhurst	OH	44124	7/14/2015	No new information learned on this call.
PPLPMDL0020000001	Barberton	OH	44203	7/14/2015	Dr said he wasn't accepting caresource...i asked if he was keeping his existing patients who have it and he said some. We talked about Butrans how to dose and convert from tramadol. I highlighted ESI for butrans and hysingla today. Talked about hysingla once a day dosing...the doctor did not have time to go into more because his wife/office manager pulled me out of the discussion room.
PPLPMDL0020000001	Lyndhurst	OH	44124	7/14/2015	No new information learned on this call.
PPLPMDL0020000001	Garfield Hts	OH	44125	7/14/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	7/14/2015	Asked him to consider Hysingla for Norco patient taking total daily dose of 20mg or greater. It's once daily with ADP. Asked him to find an express scripts patient. Told him some patients might be appropriate for butrans as their first opioid before Tramadol...
PPLPMDL0020000001	Parma	OH	44129	7/14/2015	Asked him why i was was in. He said he knows about Hysingla. I told him that is one of the reasons, the other is that butrans is appropriate as patients first opioid before Norco. He said that he is glad i am reminding him of butrans.
PPLPMDL0020000001	Independence	OH	44131	7/14/2015	Asked for Norco patient taking tott daily, dose of 20 mg or greater for Hysingla.....and patient should have express scripts insurance. handed him announcement pdf and butrans formulary grid
PPLPMDL0020000001	Highland Heights	OH	44143	7/14/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44305	7/14/2015	I asked dr if he happens to have some patients either in his practice or in the nursing homes that are currently on tramadol around the clock and would be appropriate to use Butrans? Dr said he's always asking about Butrans and trying it out. I told dr about hysingla ER patient types on Norco around the clock and to just try the product for a commercial patient and give them the trial offer. Dr said its a good option and will look.
PPLPMDL0020000001	Mayfield Heights	OH	44124	7/14/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	7/14/2015	Discussed utilization and Dr. Bohi 2 new RX's, Amerisource account, Reviewed limited time trial card offer, savings cards and ESI/MedCo opportunity.
PPLPMDL0020000001	Parma	OH	44129	7/14/2015	Handed portfolio piece through the window and told him he has two ER choices for patients taking a total daily dose of IR Norco or Percocet of 20mg or more. oxycontin is q12 and Hysingla q24.
PPLPMDL0020000001	Garfield Hts	OH	44125	7/14/2015	Reviewed limited time trial card offer, ESI/MedCo opportunity No new information learned on this call.
PPLPMDL0020000001	Barberton	OH	44203	7/14/2015	LONGEST non lunch stand up ive ever had with the doctor. We talked about hysingla and she was pretty certain that she wouldn't be writing it as she treated most of her over 65 age/med d patients with extended release products and Oxycontin being her most trusted she said. Covered ESI and her experience with oxycodone IR and Oxycontin. Talked about Butrans coverage with Med D and the option of a patch with is a different delivery system than an oral for those older patients who don't like swallowing pills. Talked about rotation of the patch and a few attributes. The doctor said she has not tried Butrans yet...but it would be an option for her because she doesn't write over 80mg morphine equivalent as she reviewed our conversion chart she liked the mcg doses and the it was a molecule not of hydrocodone or oxycodone she said. The doctor talked to me about her patient population and how she hardly has any younger patients that they are all over 50. she said she has taken on new patients lately with the recent norton offices that have closed and she said most of them are on opioids which she does not want to treat so she sends them to greene to be treated by comprehensive pain group.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/14/2015	I asked dr to please continue converting any patients on Percocet Round the clock to the q12 Oxycodone and told him about hysingla again and reviewed attributes and trial offer. Dr said he believes he has written it and I told him he has not and he's thinking of the other ER hydrocodone. Dr said he has and i asked him which dose and he didn't know. Left him the initiation and conversions guide.
PPLPMDL0020000001	Parma	OH	44129	7/14/2015	Asked him to consider ER meds like Hysingla for oxycontin for patient taking a total daily dose of 20mg or greater of IR Norco or Percocet. They are q12 and q24 and might be appropriate for some of those patients. Left
PPLPMDL0020000001	Cleveland	OH	44109	7/15/2015	Left info for RPM mgr. No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44112	7/15/2015	Quick review of portfolio, identified appropriate patient that is requiring around the clock analgesia, said ok will continue to consider for appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44102	7/15/2015	Quick Butrans reminder, formulary status along with Hysingla ER initiation/titration, said ok will continue to consider and prescribe for appropriate patients that are requiring around the clock analgesia, follow up at lunch
PPLPMDL0020000001	Cleveland	OH	44102	7/15/2015	Quick review of Butrans/Hysingla, formulary opportunities, initiation/titration, said ok will continue to prescribe/consider for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44106	7/15/2015	Reviewed OxyContin/Butrans, formulary opportunities, Initiation/Titration, said ok will continue to prescribe for appropriate patients that have coverage.
PPLPMDL0020000001	Akron	OH	44313	7/15/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44313	7/15/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	7/15/2015	Butrans-went over trial program and gave her 10 cards-Dawn said everything is good; OxyContin-she said she's now considering prescribing it for her patients since she can!
PPLPMDL0020000001	Euclid	OH	44132	7/15/2015	Dr Brobbey at hospital on rounds. Met with med asst at front window. Discussed 3 product portfolio. Left Dr. Brobbey formulary grids for Hysingla ER. Reinforced up to 30 days free for Hysingla ER.
PPLPMDL0020000001	Lakewood	OH	44107	7/15/2015	Dr was not in today, but Beth the office manager was...spent a little while talking about finding a patient for the dr to try hysingla. the two patients that she had originally thought they decided not to give them hysingla and she didn't remember what they changed the medication to or the patiens stayed on current therapy without change.
PPLPMDL0020000001	Copley	OH	44321	7/15/2015	No new information learned on this call.
PPLPMDL0020000001	Euclid	OH	44117	7/15/2015	Lunch. Dr DeMicco will utilize Hysingla ER when it's on Ohio Worker's Comp. Worker's Comp pays the practice out more than any other fomrulary plan, so they want to see as many BWC patients as possible. He has to go with the product that's most cost effective for his patient. Reinforced dosing flexibility, savings for OxyContin and Butrans.
PPLPMDL0020000001	Westlake	OH	44145	7/15/2015	Quick reminder about hysingla- dosing and dosages avaialbe with managed care.
PPLPMDL0020000001	Rocky River	OH	44116	7/15/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44310	7/15/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44109	7/15/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44109	7/15/2015	No new information learned on this call.
PPLPMDL0020000001	Mayfield Hts	OH	44124	7/15/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44109	7/15/2015	Visited PMR/IM depts. Portfolio info, obtained NP info for IM
PPLPMDL0020000001	Cleveland	OH	44109	7/15/2015	Reviewed portfolio.No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44312	7/15/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	7/15/2015	Hysingla ER ESI/MedCO opportunity.No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	7/15/2015	highlighted butrans with caresource and if they are coming from tramadol- showed the 5mcg initiation via the visual aid. I asked if he could do this today, he said he will try to find someone. Todl him i d come back to talk about the once a day hysingla for his commercial patients.
PPLPMDL0020000001	Westlake	OH	44145	7/15/2015	No new information learned on this call.
PPLPMDL0020000001	Tallmadge	OH	44278	7/15/2015	Butrans-asked if found a "Scott" patient for Butrans like he said he would-dr admitted he hasn't but since reminded him will look-I asked him for only one and gave him a trial card to find one; OxyContin-dr said will go up to 3 tabs of immediate release opioid and if patient needs more will send them to pain management
PPLPMDL0020000001	Akron	OH	44333	7/15/2015	No new information learned on this call.
PPLPMDL0020000001	Rocky river	OH	44116	7/15/2015	talked to the nurses about trial offer and talking to the dt but they wouldn't even check today if the dr was free. I left several items for the dr to review on our products.
PPLPMDL0020000001	East Cleveland	OH	44112	7/15/2015	Reviewed portfolio, confirmed separate amerisource acct.No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	7/15/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	7/15/2015	Coffee break today- We talked about blocking him time out for the upcoming dinner program in september that i'm working on for his group. also made sure they were aware i needed access again to follow up. We talked about ESI today and the trial offer. Butrans was basically a caresource reminder.
PPLPMDL0020000001	Cuyahoga Falls	OH	44224	7/15/2015	Lunch-Butrans-dr said she finds herself prescribing it more because her osteoarthritis and ankylosing spondylitis need pain relief beyond anti inflammatory drugs and she doesn't want to go beyond 3 tablets a day of norco-went over trial program and dr thanked me for explaining it-dr said she will use it for her tramadol failures with commercial insurance; OxyContin-dr said she will use it when patients need extended release opioid therapy
PPLPMDL0020000001	Akron	OH	44320	7/15/2015	Quick messages at counter and told her to continue finding patients on tramadol or Norco who are on it around the clock. Discussed conversions and starting doses and titration. Reviewed Caresource PA and asked her to write more Butrans. Monique said she will keep an eye out.
PPLPMDL0020000001	Akron	OH	44320	7/15/2015	I showed dr the Butrans slide guide dosing and titration and told him he needs to be writing Butrans for patients on tramadol or Norco around the clock. I asked dr what he's waiting for? Dr then asked me where it's covered. I told him to write it for his Caresource patients, medicare and commercial patients and reviewed plans. Dr said ok and he knows he should be doing it. Told dr i would follow up next week on his Butrans new starts. Spoke with Val and discussed the Caresource PA with her.
PPLPMDL0020000001	Akron	OH	44333	7/15/2015	Reviewed hysingla and Butrans attributes, dosing and titration along with trial offers for both. Elise said except for the rash issue with Butrans things are all good. I told her that now is the time to use hysingla while the trial offer lasts.
PPLPMDL0020000001	Akron	OH	44333	7/15/2015	Discussed the phone call dr had with medical services, specifically the PharmD about his frequent issues with patients developing rash with Butrans. Dr said that it was a waste of his time because she offered him nothing and was being patronizing. I told him that we will monitor his issues going forward and take appropriate action. Dr said these issues still will not deter him from using the product and because of this he has been using more hysingla. Reviewed the attributes, trial offers titration. Asked for continued business.
PPLPMDL0020000001	Stow	OH	44224	7/15/2015	Lunch-Butrans-dr said she likes Butrans after NSAIDs, tramadol, and low doses of norco-dr said patients like the convenience of a 7 day patch-went over trial program and dr said she will definitely utilize them in her commercial patients; OxyContin-dr said not afraid to prescribe it for patients needing long term therapy



PPLPMDL0020000001	Lakewood	OH	44107	7/15/2015	Reviewed the trial offer and talked about abuse deter properties of opioids- asked what they knew about it. The pharmacist actually knew alot. I gave fair balance of abuse potential for all opioids including our products. I gave approved marking materials and we talked about dosing for hysingla and conversion. Touched on steady state and the use of medications for break thru pain.
	Westlake	OH	44145	7/15/2015	Talked about the appropriate patient for butrans and hysingla and covered dosing. She toldme about he hessiations to write any opioids but her limited experience with scheduled opioids. I asked what she felt is the time to write an extended release product in her opinion. She said when they are chronic and most likely will never get off the pain medications. I said what disease state is this you speak of? She listed a few cancer type pain and a few others. With this said...I highlighted butrans naive study- inclusion criteria and conversion and dosing. I asked if it surprised her this information? she talked about the dosing of butrans which she said she liked. I asked what patients come to mind that could use a patch technology? She listed a few, like the older patients. I asked her to start there then. I covered the med d coverage...highlighted a few attributes like no dose adjustment for elderly or renal impaired. We talked about steady state. The steady state transpired into a hysingla conversation of a 3 day steady state and dosing. spent a shorter time talking about managed care but covered trial offer.
PPLPMDL0020000001	Westlake	OH	44145	7/15/2015	dr was not in this morning like he usually is. He has odd hours the rest of the week. thursday and after 3pm on friday at his office. I will return both days to try and catch him about hysingla trying it and caresource with butrans. Spoke to the nurses today
PPLPMDL0020000001	Lakewood	OH	44107	7/15/2015	Talked about trial offer and hysingla along with attributes of products. Highlighted abuse deter properties and gave fair balance of potential abuse with all opioids include purdue products. Talked about the use of break thru medications and steady state.
PPLPMDL0020000001	Akron	OH	44312	7/15/2015	Short message about oxycotin and hysingla. Asked dr to look for patients already on oxycodone and place them on the q12 oxycotin and yo keep hysingla on his radar for those already on hydrocodone but in the form of Norco around the clock.
	westlake	OH	44145	7/15/2015	Dr does not want to write for long term pain any more he said. he said most of his oxycotin patients from elyria he did not retain when he moved to westlake and those patients are being treated by the doctors w/ dr. gigris now the ccf in elyria. I asked about his experience with oxycotin and he confirmed he was very familiar with the product. Per the last time the doctor stays with the same molecule usually when they are being converted from ir to extended release so I asked him if Hysingla made sense and he said yes but again stressed his hesitation for writing any. I gave fair balance of abuse potential for all opioids include purdue products. We talked a bit on abuse detr properties how do products with these characteristics are preciveced. Dr knew little about this area. Talked about the uncontrolled patient that is appropriate and he is willing to treat. Reviewed dosing. We also talked butrans and caresource.
PPLPMDL0020000001	Lakewood	OH	44107	7/16/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	7/16/2015	Reinforced Hysingla ER, identified new starts for both Butrans and Hysingla, said he will continue to prescribe/recommend for appropriate patients
PPLPMDL0020000001	Akron	OH	44319	7/16/2015	Lunch appointment. Discussed all products using the portfolio piece reviewing all product attributes, dosing, conversions and appropriate patient types. Reviewed oxycotin use in appropriate patients and hysingla 24 hour peak plasma concentrations. I asked dr for his business in al products for a right patient and the right plan. Reviewed trial offers for hysingla and Butrans and oxycotin copay card.
PPLPMDL0020000001	Beachwood	OH	44122	7/16/2015	He has seen good results with Hysingla and is still trying to find appropriate patients for it despite how difficult it is to get covered. Reviewed the improved managed care landscape including express scripts. He is glad there are options for ER meds with Hysingla and oxycotin.
PPLPMDL0020000001	Mayfield Heights	OH	44124	7/16/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/16/2015	Quick message about hysingla and the ESI win. Asked dr for continued prescribing in plans and patients we've discussed. Dr said things are getting better for hysingla but is really liking Butrans right now.
PPLPMDL0020000001	Cleveland	OH	44113	7/16/2015	Visited ortho dept. (Stearns, Long) Hysingla ER info
PPLPMDL0020000001	Lakewood	OH	44107	7/16/2015	No new information learned on this call.
PPLPMDL0020000001	Mayfield Heights	OH	44124	7/16/2015	No new information learned on this call.
PPLPMDL0020000001	Mayfield Heights	OH	44124	7/16/2015	No new information learned on this call.
PPLPMDL0020000001	Highland Heights	OH	44143	7/16/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	7/16/2015	quick hello and managed care pull thru with hysingla
PPLPMDL0020000001	Mayfield Heights	OH	44124	7/16/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	7/16/2015	managed care pull thru with hysingla today
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/16/2015	No new information learned on this call.
PPLPMDL0020000001	Beachwood	OH	44122	7/16/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	7/16/2015	No new information learned on this call.
PPLPMDL0020000001	Brooklyn	OH	44144	7/16/2015	No new information learned on this call.
PPLPMDL0020000001	Bedford	OH	44146	7/16/2015	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	7/16/2015	No new information learned on this call.
	C. Falls	OH	44223	7/16/2015	Spoke with tech Corice about hysingla ESI win and what it might mean for those patients to now have access for about \$20-40 a month. Corice said they definitely have a lot of those patients and it will be nice that they can get it. She said the pharmacy will be changing to Amerisource in the fall because of some issues with Cardinal. She said that they will then be able to link up the generic Oxycotin so they can then substitute because they can't with Cardinal. Discussed Butrans copay cards and trial offer.
PPLPMDL0020000001	Cleveland	OH	44109	7/16/2015	Reviewed Hysingla ER trial card offer, utilization, Nickels office commitment to prescribe
PPLPMDL0020000001	Cleveland	OH	44103	7/16/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/16/2015	Reminded dr about the Butrans trial cards I printed for him and the continued use of the product. Told him about the hysingla ER ESI win and asked for more business from Norco when patients may be beyond Butrans.
	Highland Heights	OH	44143	7/16/2015	Lunch. Met with Cindy OM and Marianne (medications/savings cards) Discussed Aetna updates for Butrans and OxyContin. Left Hysingla ESI/Medco formulary flashcard; asked Marianne if we can identify today/tomorrow - patients on ESI/Medco for Hysingla ER. Asked her to discuss/remind Dr. Salama of this plan that does NOT require a prior auth or step edit. With Dr. Salama: same updates for OxyContin and Butrans (Aetna preferred coverage) and asked him to start with ESI/Medco for Hysingla ER. He agreed he would try and identify vicodin or norco patients who need change in therapy. REMinded he and staff of free tria up to 30 days of Hysingla ER. (as he stated he likes to write for 14 days first; and then follow up with patient)
PPLPMDL0020000001	Fairview Park	OH	44126	7/16/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	7/16/2015	No new information learned on this call.
	Beachwood	OH	44122	7/16/2015	She has been mentioning Hysingla to some of her patients and wants to get their support in ER meds rather than their Norco, she thinks she will have some people to convert soon but not yet. She is happy to hear that coverage is getting better and will continue to look for appropriate patients. She has some confusion about managed care plans. For example her husband has Medicare but prescription benefit from Cleveland clinic. I told her that my understanding is that the pharmacy benefits are dictated by the pharmacy benefit not the insurance because that is dictated by the employer. Reminded her that butrans is appropriate before Tramadol or before Doc was happy to report that he is finding butrans patients. He is trying to cut back on pills a bit and that makes butrans a great option. He wants to write Hysingla but insurance doesn't make it easy. He seems to want to prescribe it for Medicare patients. He asked for a dosing reminde. Gave him a slim Jim with dosing. Reviewed managed care information. He said they have a lot of express scripts patient. I'm asked that he write for Hysingla with express scripts patients and he agreed.
PPLPMDL0020000001	Beachwood	OH	44122	7/16/2015	W-OxyContin-3-4 tabs of Percocet when transitioning to OxyContin-dr agreed and tries to do; butrans-said started patient on recently-care source patient after ultram with low back pain-dr said will let me know how patient Quick message for Butrans to continue using for those patients asking for refills or titration of tramadol. Discussed the patch rotation and titration to 20mcg. To.d her about the ESI win for hysingla.
PPLPMDL0020000001	Lakewood	OH	44107	7/16/2015	Told Dr Azem about the Butrans trial offer and to take advantage of it for those patients in pain on tramadol around the clock or ask for a titration. Dr said that is where she she uses it and it's going well. I told her about the ESI win for hysingla and asked for continued prescriptions from patients taking Norco around the clock.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/16/2015	Reviewed Hysingla ER, initiation/Titration, formulary opportunities, said ok will relay info to staff, Butrans reminder,
PPLPMDL0020000001	Garfield Hts.	OH	44125	7/16/2015	Handling him portfolio piece and formulary grids letting him know he has ER choices for his Norco and Percocet patients needing more analgesia. For patients taking total daily dose of 20 mg or more of IR, they may be appropriate for q12 oxycotin or q2 Hysingla. Left him slim Jim's and formulary grids.
PPLPMDL0020000001	Warrensville Heights	OH	44122	7/16/2015	Review trial offer for hysingla and dosing along with attributes. Reviewed abuse deter properties and gave fair balance of abuse potential.
PPLPMDL0020000001	North Olmsted	OH	44070	7/16/2015	quick hello and hysingla reminder with managed care. Worked with Terra today and reviewed who could potentially be the right patient for hysingla. She is going to review who is coming in on Friday and I will return to work more with the doctor.
PPLPMDL0020000001	Westlake	OH	44145	7/16/2015	Review trial offer with hysingla. Talked about dosing and attributes of hysingla and butrans. Gave fair balance of abuse potential for all opioids incluc purdue products.
PPLPMDL0020000001	Westlake	OH	44145	7/16/2015	Quick review of Hysingla/OxyContin, formulary opportunity and ESI/MedCo status along with limited time trial offer, said ok will consider, referred to Alexandra PA)
PPLPMDL0020000001	Cleveland	OH	44113	7/17/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44319	7/17/2015	Quick messages over lunch about Butrans and hysingla attributes, appropriate patient types and dosing with conversions. Explained the insurance options she has for writing the products. She said she will use more Butrans because she has to get her chronic pain patients off short acting.
PPLPMDL0020000001	Akron	OH	44320	7/17/2015	Reviewed portfolio, identified appropriate patients, formulary opportunities, said ok will consider, but seeing less new patients and is feels most patients are controlled but will keep it in mind, going to wellness center over at Landerbrook 1 day a week
PPLPMDL0020000001	Cleveland	OH	44113	7/17/2015	Reviewed Hysingla/Butrans initiation/Titration, Trial card offer, said ok will continue to prescribe for appropriate patients that he can get covered
PPLPMDL0020000001	Cleveland	OH	44195	7/17/2015	Discussed Trial/Savings cards, initiation/Titration,said ok will continue to prescribe for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44114	7/17/2015	Discussed portfolio of products, identified and agreed upon appropriate patients, initiation/Titration, trial/savings cards, formulary opportunities, said Ok will continue to present/prescribe, Seeing alot of patients in Elyria
PPLPMDL0020000001	Cleveland	OH	44113	7/17/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	7/17/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44112	7/17/2015	OxyContin-brief message when reach 3-4 tabs of Percocet keep the same molecule-dr said ok; butrans-trial program-dr said will look for a commercial patient to prescribe
PPLPMDL0020000001	CLEVELAND	OH	44195	7/17/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	7/17/2015	No new information learned on this call.
PPLPMDL0020000001	Beachwood	OH	44122	7/17/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44114	7/17/2015	No new information learned on this call.

PPLPMDL0020000001	Cleveland	OH	44195	7/17/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	7/17/2015	Reviewed hysingla and asked if he had a chance to review any of the information and he said he was interested in the dosing of the product. We talked about the 20mg strength being the lowest and also talked about a few other attributes. Talked ESI/medco and he had no idea about managed care.
PPLPMDL0020000001	Cleveland Hts	OH	44118	7/17/2015	No new information learned on this call.
PPLPMDL0020000001	Berea	OH	44017	7/17/2015	Talked about Butrand and the dosing- highlighted the trial offer with hysingla and he said he hasn't tried yet but would.
PPLPMDL0020000001	Akron	OH	44312	7/17/2015	Message at window for hysingla and told him to please try and identify just one patient with private insurance who is currently taking Norco around the clock and can tolerate it. Reviewed dosing and conversions.
PPLPMDL0020000001	Cleveland	OH	44195	7/17/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	7/17/2015	No new information learned on this call.
PPLPMDL0020000001	Twinsburg	OH	44087	7/17/2015	Quick call using Phil to discuss specific patient for Hysingla and pulled through formulary for express scripts. Asked him to find one patient with express scripts.
PPLPMDL0020000001	Westlake	OH	44145	7/17/2015	Talked about starting an appropriate patient that needs a longer delivery system to try for hysingla. Talked about the dosages and the trial offer, which terra said she liked. She says she doesn't do many pa's and most of the products are generic that the doctor writes. I acknowledged this. Dr said he would write and he was crying and asked if I saw the buttrans scripts he wrote. I said yes...thanked him for the support and talked about
PPLPMDL0020000001	Cleveland	OH	44113	7/17/2015	Butrans-gave trial program cards-Debbie thanked me and she will definitely use them; OxyContin-if get referral on Percocet will she switch to OxyContin-said she would but rare
PPLPMDL0020000001	Cleveland	OH	44113	7/17/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44319	7/17/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44320	7/17/2015	Lunch appointment. Reviewed the Butrans attributes, dosing, conversions and told him he should be using this product every week for patients taking tramadol or Norco around the clock and he's refilling or titrating every day. I told him that has to stop and he needs to be writing the schedule 3 Butrans. I told him his patch of least resistance is commercial insurance and Caresource. Reviewed the PA and asked him if he will write Butrans?dr said he will try to write at least one a week.
PPLPMDL0020000001	Akron	OH	44312	7/17/2015	Quick messages in hallway and told dr to please continue using Butrans for those patients on tramadol around the clock. I asked dr why he would move a patient from tramadol to Norco? Dr said he doesn't want to but usually branded can be cost prohibitive. I told him about commercially insured patients and medicare D plans at are preferred. Reviewed hysingla as the option available when his Norco patients want a refill or titration and are taking around the clock.
PPLPMDL0020000001	Rocky River	OH	44116	7/17/2015	Window- Commercial Esi reminder with the 20mg being the lowest dose and the one to one conversion for hysingla for the patients failing their immediate release norco. Dr said he would try again but he was frustrated by the rejections so far.
PPLPMDL0020000001	Bedford	OH	44146	7/17/2015	Quickly handed him information through the window about Hysingla and reviewed how formulary coverage has improved nice launch. If he has patients on total daily dose of IR med at dose of 20mg or greater, they might be appropriate for ER med like Hysingla or oxycontin tin
PPLPMDL0020000001	Cleveland	OH	44102	7/20/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44125	7/20/2015	Reviewed Butrans/Hysingla ER. Identified appropriate patients said ok will continue to prescribe and consider for patients that are inadequately controlled that have coverage.
PPLPMDL0020000001	Cleveland	OH	44144	7/20/2015	Discussed portfolio, identified appropriate patients, formulary opportunities, initiation/titration, trial and savings cards, said ok will consider, feels majority of patients are adequately controlled but will consider.
PPLPMDL0020000001	Brooklyn	OH	44144	7/20/2015	Reviewed portfolio, identified appropriate patients, formulary opportunities, Limited time trial card offer for Hysingla ER, said ok will continue to consider/prescribe.
PPLPMDL0020000001	Rocky River	OH	44116	7/20/2015	I thanked the doctor for his attempts to write hysingla and asked if he was willing to try it again for the medco patients. the doctor said the managed care was too complicated and maybe he will try again when it gets better. I talked ESI and other commercial plans but the doctor said he doesn't have time to look up or ask what their pbms are.
PPLPMDL0020000001	Lakewood	OH	44107	7/20/2015	Remind him of hysingla and attributes with medco managed care pull thru. Talked about butrans being schedule three and caresource coverage
PPLPMDL0020000001	Akron	OH	44313	7/20/2015	Spoke with Matt and reviewed the hysingla ER attributes, dosing and conversions. He said they have filled two scripts he thinks and both got the trial offer and he dispensed 30 pills for each so he has the 20 and 30 mg in
PPLPMDL0020000001	Brooklyn	OH	44144	7/20/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	7/20/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44111	7/20/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44303	7/20/2015	No new information learned on this call.
PPLPMDL0020000001	Fairlwan	OH	44333	7/20/2015	No new information learned on this call.
PPLPMDL0020000001	Berea	OH	44017	7/20/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	7/20/2015	Quick hello and dr asked what's new and I told him hysingla for his Norco patients on it around the clock. Dr said he knows about it and said he will write it. I told him to write its ESI,Caremark and Cigna and to use the trial cards we've discussed. Left him Butrans conversions guide and asked for continued business.
PPLPMDL0020000001	Akron	OH	44333	7/20/2015	Good discussion in hallway about hysingla and ESI. Explained that not all plans that have ESI as their PBM will cover hysingla and it he just depends on the employer. Elise said they have a lot of ESI and will try. I reminded her about cvs Caremark, Cigna and Tricare.
PPLPMDL0020000001	Garfield Heights	OH	44125	7/20/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44109	7/20/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	7/20/2015	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	7/20/2015	highlighted ESI/Medco coverage for hysingla and caresource with butrans. Asked if he had someone in mind that might be coming in today or tomorrow. He was uncertain so I tried to encourage him and told him that I would follow up with him.
PPLPMDL0020000001	Westlake	OH	44145	7/20/2015	Focused on offering hysingla for the right patient per our fpi and covered managed care with the staff. as for Butrans talked about caresource and schedule three.
PPLPMDL0020000001	Akron	OH	44333	7/20/2015	Good discussion about Butrans and I told him he's missing many opportunities if he's not using Butrans especially for his overwhelming amount of BWC patients. Dr discussed with me how difficult it is to convert patients to ER opioids like Butrans when they come to him after being on IR opioids for 6 months or more and the psychological component of taking that IR opioids vs ER opioids. Dr discussed how opioids are overused from PCPs and interests and it makes it too hard for him to convert and to keep them on an ER opioid. Dr said if he becomes to strict and keeping them on the ER opioid the patient leaves the practice. I asked him even with all that to write more Butrans and give it another shot.
PPLPMDL0020000001	Fairview Park	OH	44126	7/20/2015	No new information learned on this call.
PPLPMDL0020000001	Hudson	OH	44236	7/20/2015	Told dr that I would like him to find one patient a week that is currently taking tramadol around the clock for at least three months and offer Butrans to that patient. Dr said he's trying but said its hard when patients simply refuse to change from their IR opioids. Told dr to just set the expectation for the patient from the get go about their care and how you are going to prescribe. Dr said he will try. Reviewed hysingla dosing and conversions and asked him to just try it.
PPLPMDL0020000001	Akron	OH	44333	7/20/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44312	7/20/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	7/20/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	7/20/2015	Quick review of Hysingla ER/Butrans, initiation/titration, said ok will relay info , due to schedule constraints no time to talk. drop info and savings cards
PPLPMDL0020000001	Akron	OH	44312	7/20/2015	Dr said he started a patient recently on Butrans 15mcg and it needed a PA and then recently titrated to 20mcg. Dr said it was the patient we discussed a month or two ago and he's now doing great on Butrans. Dr said he's slowly titrating down on all other analgesics and the patient is adapting well. I reminded dr to continue to focus on those patients taking tramadol around the clock. Discussed the option of hysingla for those taking Norco around the clock.
PPLPMDL0020000001	Cleveland	OH	44195	7/20/2015	Reviewed portfolio, formulary opportunities along with Dinner presentation. said ok will continue to recommend and will confirm speaking engagement.
PPLPMDL0020000001	Akron	OH	44312	7/20/2015	Dr said that he started a new patient on Butrans last week who was intolerant to tramadol. Dr said it surprised him that the patient asked for Butrans! Dr said he thinks the patients friend is taking Butrans and is doing really well. I told dr that's a great story and the tramadol patient is a perfect candidate and to keep writing. Discussed the option of hysingla and the attributes and conversions.
PPLPMDL0020000001	Cleveland	OH	44130	7/21/2015	No new information learned on this call.
PPLPMDL0020000001	Sagamore Hills	OH	44067	7/21/2015	She said that she really prefers not to treat pain but unfortunately she has to treat her patients. Using portfolio piece, discussed positioning of each and got into a discussion about ADP and why that might be an important point to consider when prescribing pain meds. Made sure to include fair balance about abuse potential. She likes the idea of butrans for her patients.
PPLPMDL0020000001	Cleveland	OH	44113	7/21/2015	Reviewed Hysingla/Butrans, discussed appropriate patients, initiation/titration, formulary ESI/MedCo opportunity with a close with Trial offer/Savings card. Said he along with staff are continuing to identify appropriate patients that they can get covered on Hysingla/Butrans
PPLPMDL0020000001	Cleveland	OH	44113	7/21/2015	Reviewed Hysingla/Butrans, discussed appropriate patients, initiation/titration, formulary ESI/MedCo opportunity with a close with Trial offer/Savings card. Said she along with staff are continuing to identify appropriate patients that they can get covered on Hysingla/Butrans
PPLPMDL0020000001	Cleveland	OH	44115	7/21/2015	Reviewed Hysingla/Butrans, discussed appropriate patients, initiation/titration, formulary ESI/MedCo opportunity with a close with Trial offer/Savings card. Said she along with entire support staff are continuing to identify appropriate patients that they can get covered on Hysingla/Butrans
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/21/2015	Webcast for hysingla at office over lunch today. Discussed the abuse deterrence information received for hysingla and oxycontin. Reviewed Butrans attributes, dosing, conversions and appropriate patients and stressed importance of using the trial offer. Reviewed with dr the importance of him and his staff ensuring the appropriate coding and patient history is in place when they write a prescription. Tera provided information to drs and staff about coding and making sure the patients complete history is in the chart.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/21/2015	Webcast for hysingla at office over lunch today. Discussed the abuse deterrence information received for hysingla and oxycontin. Reviewed Butrans attributes, dosing, conversions and appropriate patients and stressed importance of using the trial offer. Reviewed with dr the importance of him and his staff ensuring the appropriate coding and patient history is in place when they write a prescription. Tera provided information to drs and staff about coding and making sure the patients complete history is in the chart.
PPLPMDL0020000001	Lakewood	OH	44107	7/21/2015	discussed ESI/coverage for hysingla and talked about dosing and appropriate patient selection for the product. Highlighted butrans w/caresource coverage. Dr asked me a few questions about conversion regarding hysingla- which i addressed.
PPLPMDL0020000001	Northfield	OH	44067	7/21/2015	She didn't have much time. Using portfolio piece, discussed appropriate patient for each. She likes the option of ER hydrocodone and believes she can find patients for it but was concerned about coverage. Shared formulary grid. Pulled through formulary including med d for butrans and where it would be best incorporated into her practice....as patients first opioid either before tramadol or before norco. She said she will thimaboti that

PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/21/2015	Webcast for hysingla at office over lunch today. Discussed the abuse deterrence information received for hysingla and oxycontin. Reviewed Butrans attributes, dosing, conversions and appropriate patients and stressed importance of using the trial offer. Reviewed with dr the importance of him and his staff ensuring the appropriate coding and patient history is in place when they write a prescription. Tera provided information to drs and staff about coding and making sure the patients complete history is in the chart. Dr said he's not worried much about the abuse deterrence with opioids because their is way to much addiction and that's the real problem and even ADP opioids can be addictive. I told him I agree however there is a place for ER opioids in patients that have real, legitimate around the clock pain.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/21/2015	Webcast for hysingla at office over lunch today. Discussed the abuse deterrence information received for hysingla and oxycontin. Reviewed Butrans attributes, dosing, conversions and appropriate patients and stressed importance of using the trial offer. Reviewed with dr the importance of him and his staff ensuring the appropriate coding and patient history is in place when they write a prescription. Tera provided information to drs and staff about coding and making sure the patients complete history is in the chart. Denise said that she will get her prescribing license in September and will wait to see the clinical results of hysingla before she can pass judgement on it however said she agrees its a viable option.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/21/2015	Webcast for hysingla at office over lunch today. Discussed the abuse deterrence information received for hysingla and oxycontin. Reviewed Butrans attributes, dosing, conversions and appropriate patients and stressed importance of using the trial offer. Reviewed with dr the importance of him and his staff ensuring the appropriate coding and patient history is in place when they write a prescription. Tera provided information to drs and staff about coding and making sure the patients complete history is in the chart. Denise said that she will get her prescribing license in September and will wait to see the clinical results of hysingla before she can pass judgement on it however said she agrees its a viable option.
PPLPMDL0020000001	Sagamore Hills	OH	44067	7/21/2015	Using portfolio piece discussed positioning for all three products. Discussed if patient is taking total day dose of 20mg or more of norco, they may be appropriate for ER meds like OxyContin and hysingla. He said he hasn't thought of using it yet. He does believe he might have some patients taking that amount but was unclear on conversion. Reviewed conversion, formulary and ADP. He will keep it in mind and try to find a couple of appropriate patients. Discussed butrans as patients first opioid. He said he had written in the past with push back from insurance. Reviewed formulary coverage and how that is not the case anymore.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/21/2015	Webcast for hysingla at office over lunch today. Discussed the abuse deterrence information received for hysingla and oxycontin. Reviewed Butrans attributes, dosing, conversions and appropriate patients and stressed importance of using the trial offer. Reviewed with dr the importance of him and his staff ensuring the appropriate coding and patient history is in place when they write a prescription. Tera provided information to drs and staff about coding and making sure the patients complete history is in the chart.
PPLPMDL0020000001	Cleveland	OH	44195	7/21/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	7/21/2015	Visited dept. portfolio info, No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44103	7/21/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44105	7/21/2015	No new information learned on this call.
PPLPMDL0020000001	Northfield Center	OH	44067	7/21/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	7/21/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	7/21/2015	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	7/21/2015	reviewed dosing with hysingla and managed care ESI. Gave him the manged care grid and a few coupons.
PPLPMDL0020000001	Westlake	OH	44145	7/21/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44109	7/21/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	7/21/2015	No new information learned on this call.
PPLPMDL0020000001	Berea	OH	44017	7/21/2015	Dr shared with me another butrans he wrote but it needed a p/a which they did and it got approved. we talked about c-3 and dosing and intation guide. Dr has not tried hysingla yet. referred to the ESI managed care win and asked if he was familiar with this plan...he said yes, but i clarified medco/esi.
PPLPMDL0020000001	Cleveland	OH	44195	7/21/2015	Reviewed OxyContin/Hysingla ER formulary opportunities, savings/trial cards, Upcoming Palliative MED conf. Said ok will continue to prescribe
PPLPMDL0020000001	Bedford	OH	44146	7/21/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	7/21/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44109	7/21/2015	Visited IM, FP and PMR depts, portfolio info
PPLPMDL0020000001	Lakewood	OH	44107	7/21/2015	Apt today- discussed dosing and a few attributes of the product. Dr hasn't offered the product and couldn't remember much about it. Review managed care, he told me to work with pat the ma about managed care and that he doesn't keep track of what his patients have typically. Unfortunately they don't take the pbm cards and the ma/pat told me it would be hard to figure out who might be a candidate. I left the grid for hysingla. Also covered a few attributes of butrans.
PPLPMDL0020000001	Lakewood	OH	44107	7/21/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	7/21/2015	No new information learned on this call.
PPLPMDL0020000001	Euclid	OH	44119	7/21/2015	Met with pharmacy manager Dave. He stated Dr Frederick Harris recently wrote a 30 mg Hysingla ER (Mark Gutkowski territory). Left, discussed 1 Hysingla ER patient education guide. Discussed updates for Aetna plan for Butrans and OxyContin and ESI Medco Express Scripts Tier 2 preferred for Hysingla ER.
PPLPMDL0020000001	Cleveland	OH	44109	7/21/2015	No new information learned on this call.
PPLPMDL0020000001	Beachwood	OH	44122	7/21/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	7/21/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44310	7/21/2015	Good discussion about his Butrans patients and how he's been titrating them through the doses. I reminded him about steady state and how he needs to continue looking for new patients that are on tramadol or even Norco around the clock. Discussed hysingla ESI win and how he also needs to be looking for appropriate candidates.
PPLPMDL0020000001	Westlake	OH	44145	7/21/2015	Reviewed trial card offer for hysingla. Answered questions from the pharmacist such as conversion and use of break thru medications. I addressed per the fpi. Gave fair balance on abuse potential for all opioids including purdue products.
PPLPMDL0020000001	Lakewood	OH	44107	7/21/2015	OxyContin-discussed coverage because dr said last visit concerned-dr agreed looked good and will look for Percocet patients approaching 3-4 tabs; Butrans-went over trial program and dr said he needs reminded and I told him that's my job
PPLPMDL0020000001	Euclid	OH	44119	7/21/2015	Lunch. Paul says he's had to kick out several patients lately (majority asking for Percocet) who are non compliant with office policies/or those failing urine screens. Reviewed broad formulary coverage for OxyContin and Butrans. Reinforced Butrans as CII transdermal option, with ability to call/fax in with refills. Overall, Paul says he is hesitant to even refill extended release opioids. Updated on Aetna formulary wins for OxyContin, Butrans; and ESI/Medco Express Scripts, Tier 2 co pay for Hysingla ER.
PPLPMDL0020000001	Mayfield Hts	OH	44124	7/21/2015	Met with prior auth coordinator Denise Guinto first. Updated and left formulary grids for Aetna (oxyContin and Butrans) and ESI/Medco Express Scripts now Tier 2 preferred for Hysingla ER. Met with Dr Laham in hallway. He was frustrated as he communicated " I just wrote Hysingla a few hours ago" and it was a hassle - I asked him if it went through - he replied - not sure - waiting to find out. Directed him to Express Scripts. He says coverage continues to remain good for both OxyContin and Butrans. NEW POLICY for this office. NO REP VISITS ALLOWED. NO SAMPLES/FOOD/ SAVINGS CARDS ALLOWED. Reps must be fully credentialed on Vendormate and NOW go across the street to Hillcrest Hospital to leave literature for prescribers.
PPLPMDL0020000001	Euclid	OH	44119	7/21/2015	Lunch. Reviewed Hysingla ER pivotal trial clinical data, conversion, dosing, abuse detetter FDA labeling with Dr. showed how to write. Let him know to write for just commercially covered patients right now, with focus on ESI/Medco Express Scripts. Updated on Aetna coverage for OxyContin, Butrans. When Hysingla ER is officially on Worker's Comp - be sure to let him, Carla Van Pelt and nurse manager Yvonne know. Hysingla ER 30 days free, subsequent savings discussed. Dr says his main concern is cost, as most patients Medicare D, over age 65 and have cost restraints.
PPLPMDL0020000001	Euclid	OH	44119	7/21/2015	Asked Dr Winer, what type of patient would he write an extended release opioid for? He replied for patients with chronic issues, spine issues, "failed back" pain and diabetic neuropathy and multiple sclerosis. Would the extended release be an "add on" ? Yes replied Dr. Presented Hysingla ER for hydrocodone patients who are taking 4-6 pills daily, and pain still not controlled. He know they tolerate hydrocodone - the delivery system would be changed to 1 tablet daily. Reinforced ESI/Express Scripts Tier 2 preferred for Hysingla ER. Focused on ALL of my products being single entity - acetaminophen insight - Dr. Winer agrees he does worry about too much acetaminophen. Asked Dr. how important to him, is an extended release product that has abuse deterrent labeling. He says in the future, he believes that will be more important, but for now, he has to go with what's most
PPLPMDL0020000001	Middleburg Heights	OH	44130	7/22/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44109	7/22/2015	Discussed portfolio with Amy-Tech, formulary opportunities, will relay info to John interim Rph mgr.
PPLPMDL0020000001	Parma	OH	44129	7/22/2015	Followed up on Jenny's last call and remindd doctor that there is no PA or step edit required for express scripts/medco and has he found 1-2 patients with that plan who would be appropriate for once daily hydrocodone? He said he is trying to keep it in mind. Told him I m leaving him the most up to date formulary information for butrans also.
PPLPMDL0020000001	Cleveland	OH	44102	7/22/2015	Reviewed portfolio, identified patients, initiation/titration, formulary opportunities and limited time offer of trial/savings card, said ok will continue to prescribe for appropriate patients, will moving over to heading up a Palliative Med team for UHHS. info to folow.
PPLPMDL0020000001	Cleveland	OH	44102	7/22/2015	Reviewed portfolio, identified patients, initiation/titration, formulary opportunities and limited time offer of trial/savings card, said ok will continue to recommend/prescribe for appropriate patients. Majority managed
PPLPMDL0020000001	Cleveland	OH	44109	7/22/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44310	7/22/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44109	7/22/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44109	7/22/2015	Visited PMR dept.
PPLPMDL0020000001	Independence	OH	44131	7/22/2015	Quick call updating doc on coverage for ER opioids. Gave him portfolio piece and said they are eAch for specific patient. OxyContin and hysingla are appropriate for any patient taking total daily dose of IR 20mg or more and butrans is appropriate as patients first opioid.
PPLPMDL0020000001	Cleveland	OH	44130	7/22/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44102	7/22/2015	Reviewed portfolio with Dennis, Discussed Hysingla ER, initiation/Titration, trial card, Formulary, said ok will look for Medicaid coverage
PPLPMDL0020000001	Cleveland	OH	44102	7/22/2015	Reviewed portfolio, identified patients, initiation/titration, formulary opportunities and limited time offer of trial/savings card, said ok will continue to consider/prescribe for apporprate patients that she can get covered and get patients to continue on ERO.
PPLPMDL0020000001	Cleveland	OH	44102	7/22/2015	Reviewed portfolio, identified patients, initiation/titration, formulary opportunities and limited time offer of trial/savings card, said ok will continue to consider/prescribe for those patients that are appropriate, and have
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/23/2015	Dr said he's not going to see reps in Streetsboro anymore just in Cuyahoga Falls-thanked me for stopping by
PPLPMDL0020000001	Parma	OH	44129	7/23/2015	Handed her grids through the window and asked for her to get hysingla experience with patients who have express scripts insurance. Reminded her that butrans is appropriate as patients first opioid.
PPLPMDL0020000001	Cleveland	OH	44195	7/23/2015	Discussed and identified Hysingla ER/Butrans patients, initiation/titration, trial card offer, said ok will continue to prescribe and discuss with appropriate patients. Patient info booklets

PPLPMDL0020000001	Cleveland	OH	44195	7/23/2015	Discussed OxyContin and identified Hysingla ER/Butrans patients, initiation/titration, trial card offer, said ok will continue to prescribe and discuss with appropriate patients. Patient info booklets
PPLPMDL0020000001	Cleveland	OH	44113	7/23/2015	Discussed OxyContin and identified Hysingla ER/Butrans patients, initiation/titration, trial card offer, said ok will continue to prescribe/recommend to appropriate patients. Patient info booklets
PPLPMDL0020000001	Cleveland	OH	44115	7/23/2015	Discussed and identified Hysingla ER/Butrans patients, initiation/titration, trial card offer, said ok will continue to prescribe and discuss with appropriate patients. Patient info booklets
PPLPMDL0020000001	Cleveland	OH	44130	7/23/2015	Doc believes in oxycodone molecule and Has several patients on OxyContin. He has a few on norco and might find appropriate patients for hysingla as well. Discussed savings plan, formulary. Discussed butrans as patients first opioid.
PPLPMDL0020000001	Cleveland	OH	44195	7/23/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44106	7/23/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	7/23/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44130	7/23/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44130	7/23/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	7/23/2015	No new information learned on this call.
PPLPMDL0020000001	Middleburg Heights	OH	44130	7/23/2015	No new information learned on this call.
PPLPMDL0020000001	Strongsville	OH	44136	7/23/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44115	7/23/2015	No new information learned on this call.
PPLPMDL0020000001	Independence	OH	44131	7/23/2015	No new information learned on this call.
PPLPMDL0020000001	Highland Heights	OH	44143	7/23/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44115	7/23/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44115	7/23/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	7/23/2015	Quickly handed her formulary grids for OxyContin and hysingla telling her that two of her choices for ER meds for patients might be appropriate for some patients in around the clock pain taking 20 or more mg of Ir meds. Asked her to get experience with hysingla with patients who have express scripts insurance
PPLPMDL0020000001	Akron	OH	44333	7/23/2015	Butrans-went over trial program and dr said good thing we kept program-dr said he will definitely use them and will look for patients today in Wadsworth! OxyContin-dr said going strong and has had no problems with
PPLPMDL0020000001	Beachwood	OH	44122	7/24/2015	Quickly asked doc to think hysingla for appropriate patients with express scripts because it is unrestricted and the lowest branded copy. Even if he only writes it for express scripts and No other plan. He said ok
PPLPMDL0020000001	Mayfield Village	OH	44143	7/24/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44112	7/24/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44124	7/24/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	7/24/2015	Followed up on utilization, no new info obtained
PPLPMDL0020000001	Beachwood	OH	44122	7/24/2015	No new information learned on this call.
PPLPMDL0020000001	Richmond Heights	OH	44143	7/24/2015	No new information learned on this call.
PPLPMDL0020000001	Chagrin Falls	OH	44022	7/24/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland Hts	OH	44118	7/24/2015	No new information learned on this call.
PPLPMDL0020000001	Richmond Heights	OH	44143	7/24/2015	No new information learned on this call.
PPLPMDL0020000001	Richmond Heights	OH	44143	7/24/2015	No new information learned on this call.
PPLPMDL0020000001	Lyndhurst	OH	44124	7/24/2015	No new information learned on this call.
PPLPMDL0020000001	Lyndhurst	OH	44124	7/24/2015	No new information learned on this call.
PPLPMDL0020000001	Beachwood	OH	44122	7/24/2015	No new information learned on this call.
PPLPMDL0020000001	Beachwood	OH	44122	7/24/2015	No new information learned on this call.
PPLPMDL0020000001	Beachwood	OH	44122	7/24/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	7/24/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	7/24/2015	Reviewed portfolio, Initiation/Titration formulary opportunities, trial/savings card. Said ok will continue to prescribe
PPLPMDL0020000001	Cleveland	OH	44114	7/24/2015	Butrans-dr said is still prescribing it-usually Celebrex and tramadol failures-said perfect and went over Scott profile-dr said he will look for 'me'; OxyContin-feels more comfortable prescribing it in ER-went over patient on 3-4 percents not getting enough relief-dr agreed good place to prescribe and will consider it
PPLPMDL0020000001	Beachwood	OH	44122	7/24/2015	OxyContin-dr said everything good-went over UHC commercial change with he and Vicki who does a lot of PAs-asked if this was a big plan in practice-knowing that it's only about 1% with our data-and they said no-asked for his continued support with OxyContin and dr said he loves the drug-asked if any reason not prescribing more-dr said seeing a lot more Medicare patients who have to usually fail on oral morphine-dr said once on morphine, patients like it and it's dirt cheap and difficult to get them off-went over formulary grid and confirmed OxyContin does gave good coverage with part D and he said that's good; Butrans-starting to prescribe more and so far so
PPLPMDL0020000001	Cleveland	OH	44114	7/27/2015	Reviewed portfolio, identified appropriate patients that he can successfully get covered. Butrans/OxyContin Initiation/Titration, formulary opportunities, said ok will continue to recommend and prescribe for appropriate
PPLPMDL0020000001	Independence	OH	44131	7/27/2015	She leaves the opioid prescribing to docs if she can help it. She said she likes to learn about them and appreciates information. Using portfolio piece discussed these are options for patient in around the clock pain. Butrans is the only ER C3 opioid on the market. Discussed that butrans is appropriate as patients first opioid before or after tramadol, initiation, doses, titration, she said that she will review information and consider it. Reviewed managed care. Touched on patient who is taking a total daily dose of IR or 20mg or more as possibly appropriate for ER because of low doses available. Reviewed conversion and ADP with fair balance. She is glad to hear the
PPLPMDL0020000001	Cleveland	OH	44113	7/27/2015	Reviewed portfolio, identified appropriate patients, said he put a few new patients on Hysingla ER, Reviewed Tria/Savings card, said ok will continue to prescribe for appropriate patients, and will expand utilization once BWC has officially" added Hysingla ER.
PPLPMDL0020000001	Independence	OH	44131	7/27/2015	Had portfolio piece on table and she said she doesn't like to treat for much chronic pain. She likes to know about them but wanted to hear about butrans. Discussed butrans as patients first opioid before or after tramadol, reviewed formulary coverage, dosing, initiation and titration. Reviewed application location of patch. She said she will try it. Discussed patient taking IR of 20 mg or more of IR as possible appropriate patient for Er meds like OxyContin or hysingla. He likes the idea of once daily dosing and ADP! So he will keep that in mind. Reviewed formulary and savings program.
PPLPMDL0020000001	Cleveland Hts	OH	44118	7/27/2015	Reviewed portfolio, identified appropriate patients, Limited time trial offer, savings card, said ok will continue to recommend and prescribe for appropriate patients.
PPLPMDL0020000001	Independence	OH	44131	7/27/2015	Using portfolio piece discussed they are appropriate for patient in around the clock pain. He said he has experience with OxyContin. He typically uses it for patients who are on multiple meds and he is trying to simplify their dosing regiment and would prefer they not be taking too much Tylenol. He likes the idea of once daily dosing of hysingla. He had many questions about conversion and morphine equivalence which we discussed. Reviewed a patient taking a total daily dose of 20 mg or more of Norco as a possible appropriate patient. He was aware of ADP and think it's a good idea for opioids. Discussed butrans as patients first opioid before or after tramadol. Reviewed formulary for all three products.
PPLPMDL0020000001	Garfield Hts	OH	44125	7/27/2015	Product portfolio info, pain, and IM depts
PPLPMDL0020000001	Cleveland	OH	44113	7/27/2015	No new information learned on this call.
PPLPMDL0020000001	Independence	OH	44131	7/27/2015	No new information learned on this call.
PPLPMDL0020000001	Euclid	OH	44117	7/27/2015	Met medical assistant Chelsea for the first time. She is taking over Lori's previous position. Discussed, left Purdue tri fold portfolio of products. Left Aetna formulary grid flashcards for OxyContin, Butrans. Left ESI/Medco formulary grid flashcard for Express Scripts/Medco. Quick call with Dr. DeMicco. He needs products that have good coverage on Worker's comp since that's the largest plan at this location.
PPLPMDL0020000001	Parma	OH	44134	7/27/2015	No new information learned on this call.
PPLPMDL0020000001	Garfield Hts	OH	44125	7/27/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	7/27/2015	Left Hysingla ER info for Mike and Jeff
PPLPMDL0020000001	Fairlawn	OH	44333	7/27/2015	No new information learned on this call.
PPLPMDL0020000001	Tallmadge	OH	44278	7/27/2015	Spoke with Seth about Butrans and oxycontin coverage for Aetna and hysingla win on ESI. Seth said ESI is huge and hopes it helps. Seth said that they still only have one patient on hysingla however the patient is doing very
PPLPMDL0020000001	Fairlawn	OH	44333	7/27/2015	Told Gilbert about the Aetna coverage for Butrans and discussed what he's seeing in the pharmacy as well as the ESI flashcard for Hysingla and the importance of coverage with a newer product. Gilbert said that coupled with the trial offer for hysingla should make a big difference. Gilbert said he's continuing to dispense butrans with most 10mcg.
PPLPMDL0020000001	Cleveland Hts	OH	44118	7/27/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44118	7/27/2015	No new information learned on this call.
PPLPMDL0020000001	Stow	OH	44224	7/27/2015	Dr told me that she has written hysingla two more times since she saw me last and both required prior auths. I told dr I'm glad she is confident in the product and to keep writing as I will speak with her nurse Nay about the insurance issues. Dr said both patients were taking Norco all the time and thought it would be a great alternative. I spoke with Nay and she said that one patient they just sent an appeal to the PA and will take a couple of weeks. Nay said the patient was a UHC community plan patient. I told her I will follow back up and she asked me for patient brochures for hysingla and Butrans.
PPLPMDL0020000001	Tallmadge	OH	44278	7/27/2015	Discussed with all HCPs the product portfolio of oxycontin, butrans and hysingla. Explained each product attributes, doing, conversions, patient profiles and insurance coverage with copy and trial offers. Reviewed the product piece on abuse deterrence studies. Dr said he agrees that an abuse deterrent product makes a difference to him and is glad to know Purdue is up on the technology. Dr said he will begin to think more about Hysingla and Butrans and will try them.
PPLPMDL0020000001	Tallmadge	OH	44278	7/27/2015	Discussed with all HCPs the product portfolio of oxycontin, butrans and hysingla. Explained each product attributes, doing, conversions, patient profiles and insurance coverage with copy and trial offers. Reviewed the product piece on abuse deterrence studies. Mackenzi didn't respond much to the conversation whoever did say she's learning a lot about opioid prescribing.
PPLPMDL0020000001	Tallmadge	OH	44278	7/27/2015	Discussed with all HCPs the product portfolio of oxycontin, butrans and hysingla. Explained each product attributes, doing, conversions, patient profiles and insurance coverage with copy and trial offers. Reviewed the product piece on abuse deterrence studies. Dr said since he's been out for a number of months and just came back next week, he's still getting used to things again and learning the new EHR Epic. Dr said that it was a good refresher for him and he knows he needs to look more at his patients taking narcotics and make decisions on who he whole move to an ER opioid.
PPLPMDL0020000001	Akron	OH	44333	7/27/2015	Quick hello at counter and showed him the oxycontin dosing and told him to please evaluate those patients already on the molecule who are appropriate for q12 oxycontin and convert them. I handed him the hysingla initiation and conversion guide and told him, to use this option for his daily, around the clock Norco patients.
PPLPMDL0020000001					

	Tallmadge	OH	44278	7/27/2015	Discussed with all HCPs the product portfolio of oxycontin, Butrans and hysingla. Explained each product attributes, doing, conversions, patient profiles and insurance coverage with copay and trial offers. Reviewed the product piece on abuse deterrence studies. Dr said that he will be trying Butrans soon because he has a few patients taking too much Tramadol and they are in pain around the clock. I told dr that's great to hear and to make sure he gives the patients the trial card and copay card.
PPLPMDL0020000001	Independence	OH	44131	7/27/2015	Handed him portfolio piece through the window. Told him that Butrans has much improved formulary coverage Than years past. Also, wanted to introduce him to once daily hydrocodone option with ADP and not Tylenol....it's called hysingla. He said he'd take the information and maybe we can talk next time or he will call me for More information.
PPLPMDL0020000001	Cleveland	OH	44113	7/28/2015	Reviewed portfolio and reinforced appropriate patients, formulary coverage, said ok she continues to identify/recommend and ultimately prescribe for appropriate patients.
PPLPMDL0020000001	Parma	OH	44129	7/28/2015	Myra said that she wants to write for hysingla but insurance is the limiting factor. We discussed who appropriate patient is in her mind? She said it is a patient taking multiple meds, multiple pills and would want to "simplify" their dosing regimen. They inherit many patients from other practices with very complicated pain management solutions that she is working to improve. Pulled through express scripts and Caremark as the pbm's to target. She said she will find hysingla patients this afternoon. She continues to have good success with butrans.
PPLPMDL0020000001	Akron	OH	44313	7/28/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	7/28/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44112	7/28/2015	No new information learned on this call.
PPLPMDL0020000001	Mayfield Heights	OH	44124	7/28/2015	Left literature for Dr. Dewis including Aetna formulary flashcard for Butrans and Oxycontin, and ESI/medco for Hysingla ER. REinforced all 3 single entity, extended release, opioids in Purdue portfolio with medical assistant.
PPLPMDL0020000001	Akron	OH	44333	7/28/2015	No new information learned on this call.
PPLPMDL0020000001	Chagrin Falls	OH	44022	7/28/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	7/28/2015	Reminded doc that he has options for patients in around the clock pain that might be appropriate for Er meds. In the past he had OxyContin, now he has hysingla, and ER hydrocodione also. Asked him to find one express scripts patient and left him a savings card and formulary grid so his first experience is successful with certain commercial patients. Quickly reviewed savings program.
PPLPMDL0020000001	Akron	OH	44312	7/28/2015	No new information learned on this call.
PPLPMDL0020000001	Lyndhurst	OH	44124	7/28/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44103	7/28/2015	Reviewed portfolio, Hysingla ER trial card offer, said ok will but fills 99% Medicaid
PPLPMDL0020000001	Mayfield Heights	OH	44124	7/28/2015	No new information learned on this call.
PPLPMDL0020000001	Highland Heights	OH	44143	7/28/2015	No new information learned on this call.
PPLPMDL0020000001	East Cleveland	OH	44112	7/28/2015	Reviewed portfolio, clinicians in bidg refer to pain mgmnt for Chronic ERO. Said she will recommend if appropriate
PPLPMDL0020000001	Middleburg Heights	OH	44130	7/28/2015	No new information learned on this call
PPLPMDL0020000001	Parma	OH	44129	7/28/2015	No new information learned on this call.
PPLPMDL0020000001	Beachwood	OH	44122	7/28/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44118	7/28/2015	Reviewed portfolio, Hysingla ER trial card offer with Vanita, said ok
PPLPMDL0020000001	Cleveland	OH	44103	7/28/2015	Quick review of portfolio, Hysingla ER, Initiation/Titration, formulary opportunities, said ok
PPLPMDL0020000001	Uniontown	OH	44312	7/28/2015	God discussion with dr about hysingla snd Butrans and dr said he's been writing a lot of hysingla recently and most have been going through. I asked him where he's been using it and he said mostly in his patients on Norco and some on percocet. Discussed the ESI coverage on hysingla and Aetna for Butrans. Reminded dr about titration for each product and asked him to please continue writing. Dr said he's trying to follow the insurance grid and said 8/10 patients he sees he has their prescription insurance information. I told him that's great and keep writing.
PPLPMDL0020000001	Cleveland	OH	44130	7/28/2015	Asked doctor when he feels that ER meds are appropriate while showing him portfolio piece. He said that for sick patients like cancer patients who are on high doses of IR meds or multiple meds. He used to write more ER meds but he writes IR in such low quantities, no more than 3 pills per day and morphine equivalent of 20-40 per day. Tried to get him to think of their total daily dose of IR and if it is 20 mg or more of norco, would he consider once daily hysingla with ADP for a few patients in around the clock pain? He said he will periodically write ER! He just recently wrote for embedda. He pushed back on butrans and formulary coverage again and I gave him butrans formulary grid showing the broad coverage. Gave him hysingla savings card and asked him to find one patient. He smiled.
PPLPMDL0020000001	Cleveland Hts	OH	44118	7/28/2015	FOLLOWED up with Vanita on Hysingla ER on Pharmacy stocking concern, Formulary opportunities and Trial card offer, also reviewed entire portfolio formulary status, said ok will continue to assist patients with obtaining
PPLPMDL0020000001	Parma	OH	44129	7/28/2015	Reminded doctor that he said he has plenty of patients taking norco total daily dose of 20mg or more that would be appropriate for hysingl? He said he still isn't thinking of it and where is it covered? Told him with both hysingla and butrans, there is opportunity for commercial patients to get one months mess for free for both hysingla and butrans. With hysingla he can gain clinical experience with no cost to patient for a limited time. Asked him to consider express scripts or Caremark for hysingla, he wrote it down and said ok.
PPLPMDL0020000001	Beachwood	OH	44122	7/28/2015	Lunch-introduction to office-OxyContin-dr said he typically doesn't prescribe ER opioids but since seeing abuse deterrent piece plus formulary grid he said he has been prescribing it-dr said usually switched from Percocet at 4-5-asked him if 3-4 would be better-dr agreed and said he probably should since sometimes he gets too high a count-I did let him know that abuse is still possible but with the re formulation it is much more difficult to chew or crush; butrans-dr wanted to know more about it since he's been prescribing it-went over strengths, slide conversion ruler, and placement after NSAIDs, tramadol, also went over formulary coverage and dr thanked me for such an in depth presentation-dr said he will prescribe more now that he knows more about it!
PPLPMDL0020000001	Akron	OH	44312	7/29/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44125	7/29/2015	Reviewed portfolio, identified appropriate patients, formulary opportunities, said ok, sends most chronic pain patients to pain mgmnt, asked for those that she doesn't. said she will consider.
PPLPMDL0020000001	Cleveland	OH	44113	7/29/2015	Discussed portfolio with Kate, reviewed Hysingla ER trial card offer, savings cards, said ok has seen some RX's from Dr. Bohl will recommend for appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44195	7/29/2015	Reviewed portfolio and identified appropriate patients. Formulary opportunities and Trial and savings cards
PPLPMDL0020000001	Cleveland	OH	44113	7/29/2015	Reviewed portfolio, identified appropriate patients, said ok will continue to prescribe and recommend for those appropriate patients
PPLPMDL0020000001	Bedford	OH	44146	7/29/2015	Doctor fully supports ER meds for around the clock pain. He is a big advocate for ADP and one of the main reasons he chooses OxyContin and hysingla. He also likes the option of butrans. His biggest problem is the fact that he chooses the meds for his patients and insurance dictates what is right for his patients. He cannot keep track of what is preferred at which plan for what price! He writes hysingla for appropriate patients but gets a lot of push back from insurance. Progressed to discuss his insurance philosophies for quite some time.
PPLPMDL0020000001	Cleveland	OH	44113	7/29/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44320	7/29/2015	Showed dr the Butrans 5mg placebo patch and told him he needs to start writing it. Discussed the patch makeup and how it's suited for his tramadol and Norco patients that he knows need an opioid for daily, around the clock pain. I told him to use it for his commercial, medicare D and Caresource patients. I explained the caresource criteria and dr said he knows he needs to use it. I have him the trial card and to have it on his workstation this week to remind him.
PPLPMDL0020000001	Uniontown	OH	44685	7/29/2015	Good conversation About Butrans and hysingla. Dawn said she has had a lot of experience with it when she was with Dr Nichols. Dawn said that she really likes the schedule 3, 7 day part of the patch and it makes it easier for her. She said that she uses it for tramadol all the way through percocet and likes to use it on her older patients. Reviewed its attributes, dosing and conversions as well as the trial offer. Dawn said that Mark discussed Hysingla with her and she's on board and it's just a matter of trying it. I reviewed attributes, conversions and trial offer. She said the trial offer is awesome and will give it a shot.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/29/2015	No new information learned on this call.
PPLPMDL0020000001	Stow	OH	44224	7/29/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	7/29/2015	No new information learned on this call.
PPLPMDL0020000001	Fairlawn	OH	44333	7/29/2015	Spoke with Laura the pharmacy tech about hysingla attributes, dosing, conversions and the trial offer. Laura said she didn't know about the product and said she hopes to see some because it just makes sense because they fill A lot of Norco.
PPLPMDL0020000001	Lyndhurst	OH	44124	7/29/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	7/29/2015	Quick intro to portfolio, Trial/savings cards, said ok will continue to prescribe OxyContin and will consider Hysingla,
PPLPMDL0020000001	Akron	OH	44312	7/29/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	7/29/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44320	7/29/2015	Showed Monique the Butrans placebo patch and asked her if she's ever seen one? She said she has not and we discussed the patch make up and rotation sites. She said she forgot about the application sites. Told her to prescribe and she said she will start seeing more commercial patients which will help. I reviewed the plans coverage and asked for the business.
PPLPMDL0020000001	Cleveland	OH	44113	7/29/2015	Reviewed OxyContin/Hysingla ER, identified appropriate patients, formulary opportunities and Trial card offer, said ok
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	7/29/2015	W-OxyContin-gave formulary grid to confirm coverage; butrans-gave trial cards
PPLPMDL0020000001	Akron	OH	44312	7/29/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	7/29/2015	Dr said that despite the issues he's been having with Butrans he write three prescriptions for it today. I told him that's great to hear and that I'm glad his confidence in the product is still there. Discussed his use of oxycontin no hysingla. Dr said that he has been asked quite a bit recently at pain seminars about his use of hysingla and he tells everyone he loves it and it works great. Reminded him about the trial offer and ESI coverage.
PPLPMDL0020000001	Waterford	OH	45786	7/29/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44312	7/29/2015	No new information learned on this call.
PPLPMDL0020000001	Stow	OH	44224	7/29/2015	No new information learned on this call.
PPLPMDL0020000001	Waterford	OH	45786	7/29/2015	I- Butrans clinical trials. Oxycontin start principles. Hysingla dosing, titration, ad properties, boxed warning,co pay cards and managed care W- has patient in mind for Butrans and hysingla
PPLPMDL0020000001	Cleveland	OH	44195	7/29/2015	Reviewed portfolio, discussed Hysingla ER, Initiation/Titration, Formulary opportunities, Limited time trial card offer, savings cards, said ok has a few patients in mind, will also discuss/recommend with Kim NP)
PPLPMDL0020000001	Akron	OH	44310	7/29/2015	OxyContin-dr said slowly getting back to prescribing-thanked him and let him know insurance coverage is good also; butrans-went over trial cards and asked for one tramadol failure with commercial insurance to try it on-dr
PPLPMDL0020000001	Fairlawn	OH	44333	7/29/2015	While speaking with Dawn Boyle, dr Jones entered into to the conversation about Butrans and hysingla. Discussed the need for Butrans in the Tramadol or even Norco patient taking it around the clock and still in pain.
PPLPMDL0020000001	Akron	OH	44333	7/29/2015	Reviewed attributes and conversions as well as application sites. Discussed hysingla attributes, dosing, conversions, and trial offer. Dr jones said that is a great deal and will look to use it.
PPLPMDL0020000001	Akron	OH	44333	7/29/2015	Discussed Her use of oxycontin, Butrans and hysingla with Elise. She said that she really likes oxycontin and continues to use it for those on percocet around the clock. Elise said that she will continue to write Butrans despite their recent problems. We discussed where and when to use Butrans and hysingla and told her about the ESI win again and asked for more prescribing.



PPLPMDL0020000001	Akron	OH	44333	7/29/2015	W-OxyContin-gave formulary grid to confirm good coverage since a concern in past-dr thanked me for it; butrans-let know that trial cards are great way to get tramadol failure with commercial insurance patients started for a low cost-dr said will use
PPLPMDL0020000001	Barberton	OH	44203	7/30/2015	Talked to Ann about esi and medco patients and also talked about seeing the doctor about hysingla but they said no. I left literature
PPLPMDL0020000001	University Hts	OH	44118	7/30/2015	Reviewed portfolio, identified Hysingla ER patient, discussed presentation to patients. said ok has a few patients in mind.
PPLPMDL0020000001	CLEVELAND	OH	44195	7/30/2015	Reviewed portfolio, and CCF info
PPLPMDL0020000001	Cleveland	OH	44195	7/30/2015	Visited dept. Beth/Kim program invite, Hysingla ER trial card offer,
PPLPMDL0020000001	Westlake	OH	44145	7/30/2015	discussed trial offer and managed care coverage today. reviewed attributes of hysingla and butrans
PPLPMDL0020000001	Cleveland Hts	OH	44118	7/30/2015	Reviewed portfolio, Hysingla ER pharmacy stocking request, said ok but will not request stocking
PPLPMDL0020000001	Cleveland	OH	44106	7/30/2015	Discussed portfolio, identified patients, said ok but is prescribing less ERO/IRO
PPLPMDL0020000001	Cleveland	OH	44106	7/30/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44111	7/30/2015	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	7/30/2015	tried to tie caressource with butrans and dosing how to initiation on 5 or 10mcg.
PPLPMDL0020000001	Westlake	OH	44145	7/30/2015	Talked about any commercial patients with esi/medco coverage. asked terra if she was willing to ask them what their insurance/pbm is at check in. she was unsure and asked i have to ask the doctor. To do next time cause i didn't get that in this visit.
PPLPMDL0020000001	Parma	OH	44129	7/30/2015	Laura said that she wrote a script and they found out that that it went through at the pharmacy level. She wants to see how that patient does before she writes too many others. Reminded her about butrans coverage is much difference than hysingla
PPLPMDL0020000001	Cleveland	OH	44111	7/30/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	7/30/2015	Hysingla ER/Butrans reminder, Butrans patient info tear sheets
PPLPMDL0020000001	Cleveland	OH	44106	7/30/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44118	7/30/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	7/31/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	7/31/2015	Reviewed and identified appropriate patients for Butrans/Hysingla ER, patient info booklets, said he and staff will continue to find/prescribe appropriate patients for both products.
PPLPMDL0020000001	Cleveland	OH	44114	7/31/2015	Reviewed portfolio, identified appropriate patients, initiation/titration, said ok will continue to recommend and prescribe for appropriate patients that have coverage
PPLPMDL0020000001	Westlake	OH	44145	7/31/2015	discussed the trial offer with hysingla and appropriate patient type with the nurses and the dr. The dr asked dosing questions, which was addressed.
PPLPMDL0020000001	westlake	OH	44145	7/31/2015	Invited the np and doctor to the program for hysingla. Dr said he might be interested- i will follow up next week. The doctor said he hasn't tried hysingla because he doesn't think of it. I really encouraged him to do put the coupons where he can see them or if he could leave a brochure in the patient room to help remind him. I asked him why would he write hysingla in the first place...i told him im trying to find out if you see value in a once a day product with these attributes. Dr said he was a creature of habit. We talked about change and how it always happens and if he would make an effort to find the appropriate patient given the opportunity and he said yes. So we covered dosing and managed care again focusing in on medco because he doesn't know esi. When speaking to the np i asked them to contract me when a script is written and i will make sure i can do whatever it takes to get it thru for the patient on my end.
PPLPMDL0020000001	Cleveland	OH	44106	7/31/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	7/31/2015	Reviewed portfolio, identified appropriated patients, said he has put a few more patients on Hysingla ER,
PPLPMDL0020000001	Cleveland	OH	44124	7/31/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	7/31/2015	went over the patient brochures and what would be most important to the patient first going on hysingla. Talked dosing and a few of the attributes like steady state. Highlighted the conversion and also spent time on the trial offer. Bridgette the RN who helped me soo the doctor and np today and she also worked with me to coordinate the dinner program on the 26th of august. She is working with me to gain attendance and their commitment to go to the program.
PPLPMDL0020000001	Mayfield Heights	OH	44124	7/31/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44102	7/31/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44109	7/31/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	7/31/2015	as a follow up from last visit dr. lets talk about who you have thought about for hysingla er. The dr said he hasn't used it yet. I asked if he converted anyone on norco over the last few months and he said a few. we talked about that patient type and then making sure he was comfortable with hysingla. talked about the trial offer nad discussed butrand conversion and dosing
PPLPMDL0020000001	Lyndhurst	OH	44124	7/31/2015	No new information learned on this call.
PPLPMDL0020000001	Lyndhurst	OH	44124	7/31/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44130	7/31/2015	Doc was leaving office. Quickly mentioned once daily hysingla for his patients that might be appropriate for ER hydrocodone with Adp. Handed him formulary and said i will stop in next week to share exciting formulary
PPLPMDL0020000001	Lyndhurst	OH	44124	7/31/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	7/31/2015	talked with nurses about trial offer and about managed care w/hysingla
PPLPMDL0020000001	Lyndhurst	OH	44124	7/31/2015	No new information learned on this call.
PPLPMDL0020000001	Beachwood	OH	44122	7/31/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	7/31/2015	Reviewed trial card offer, Initiation/Titration, said ok will follow up with feedback
PPLPMDL0020000001	Lyndhurst	OH	44124	7/31/2015	Lunch. Discussed product attributes for OxyContin including q12h dosing, extended release, single entity, and fda abuse deterrent labeling. For Hysingla ER, Dr. Reed stated that she placed a female patient, under age 65, previously on vicodin and patient had allergy to acetaminophen. She then changed patient to hydrocodone/ibuprofen combo. The patient had an allergy to ibuprofen. Dr. Reed initiated Hysingla ER 20 mg at first, since she knew patient could tolerate hydrocodone and could NOT tolerate acetaminophen or ibuprofen. Most recently, she titrated patient up to 60 mg once daily. REinforced Hysingla is preferred Tier 2 for ESI Medco - Dr. Reed replied that she doesn't pay attention to formulary plans as they are confusing, change all the time. She writes what she wants patient to have and hopes it goes through.
PPLPMDL0020000001	Westlake	OH	44145	7/31/2015	Discussed dosing and attributes of hysingla. Incuded fair balance of abuse potential for all opioids and talked about trial offer
PPLPMDL0020000001	Westlake	OH	44145	7/31/2015	i talked with the nurses for a while. Bridgette got me back and then later saw the doctor. We talked about steady state and dosing...covered managed care and then we talked about the patients currently on hysingla. So far success stories. i talked about the limited trial offer and made sure they call me when they write the next script so that i can get a request form to get the product stocked incase it's not already there to save the patient time. We talked about the program on the 26th and they are interested in attending. They have some coordinating to do but will follow up next week with them. I made sure to thank the dr for his offering this product t and also highlighted that both patients didn't need a pa and both got it free and both approx co pay cost for future scripts. Dr said he was surprised. I asked if he is willing to try again and he said yes. I told him i would like to continue to get feed back so i could report back to my manager and the company. he said that would be fine. I will use this as leverage for next visit as the patient is supposed to return to the office next weel
PPLPMDL0020000001	Beachwood	OH	44122	7/31/2015	Reminded doctor of er options using portfolio piece. Discussed hysingla option for patients in around the clock pain taking 20 mg or more of norco per day who might be appropriate for ER once daily hydrocodone, without Tylenol and with abuse deterrent properties. Asked him to find one patient with express scripts insurance to try for hysingla.
PPLPMDL0020000001	Beachwood	OH	44122	7/31/2015	Doctor is choosing hysingla for a few patients because of once daily dosing and abuse deterrent properties. Reviews abuse studies for both OxyContin and hysingla
PPLPMDL0020000001	Beachwood	OH	44122	7/31/2015	Asked doctor if i could bring a speaker in to discuss hysingla with him, Roberta and Jennifer? Mentioned doctor Latham. He said that he doesn't have time to sit down for long enough to warrant bringing someone in to speak with him. Quickly reviewed formulary for hysingla and butrans
PPLPMDL0020000001	Cleveland	OH	44113	8/3/2015	Reviewed portfolio, identified appropriate patients, initiation/titration, formulary opportunities, trial/savings cards. said ok had a patient in mind this afternoon, will consider for appropriate patients
PPLPMDL0020000001	Independence	OH	44131	8/3/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	8/3/2015	Reviewed portfolio, formulary opportunities, said ok will continue to prescribe for appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44130	8/3/2015	She said that i have to remind her of butrans because she doesn't usually think of it. Reviewed appropriate patient, insurance and scheduling. She is not writing nor of and Percocet.
PPLPMDL0020000001	Akron	OH	44333	8/3/2015	Told dr that i would like him to use more oxycontin when he sees a patient on an IR Oxycodone product and is taking it around the clock. Dr said he is using it as much as he can when cost isn't an issue. Reviewed the Butrans appropriate patient types and asked him to please convert those patients on tramadol or Norco around the clock and gave him the Aetna flashcard for both products.
PPLPMDL0020000001	Garfield Heights	OH	44125	8/3/2015	Reviewed portfolio with Dalbir, Identified appropriate patients, Initiation/Titration, formulary opportunities, Trial/Savings Cards said ok will discuss with Dr. Abraham, said most patients dont exceed TID dosing of an IR opioid.
PPLPMDL0020000001	Garfield Hts	OH	44125	8/3/2015	Invited to upcoming program
PPLPMDL0020000001	Cleveland	OH	44113	8/3/2015	Visited pain mgmnt dept,
PPLPMDL0020000001	Lakewood	OH	44107	8/3/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44125	8/3/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	8/3/2015	trial offer with hysingla and covered attributes of product.
PPLPMDL0020000001	Westlake	OH	44145	8/3/2015	window: invite to hysingla program and asked how comfortable was he offering it to his patients appropriate? Dr couldn't remember how to dose it or covert. I recapped the information, scheduled a lunch and tried to pump up the program at the end of the month.
PPLPMDL0020000001	Westlake	OH	44145	8/3/2015	have you thought more about hysingla for your uncontrolled appropriate atc patients on norco? Dr said he hasn't used it yet...i reminded him that he was excited to try it last time we spoke and was surprised. But thanked him for trying to find someone and reminded him of the attributes.
PPLPMDL0020000001	Lakewood	OH	44107	8/3/2015	Talked to the nurses about dosing and trial offer for hysingla. Tried to get a lunch today but they didn't have much open but one for tomorrow. so i took it. Saw the dr for quick second and i highlighted tomorrows lunchw ith the hysingla discussion for atc pain. He was literally walking down the hall when i got something out, so it was a long shot but i got something out at lease so he knew why i was here. I left several items for his reading
PPLPMDL0020000001	Cleveland	OH	44113	8/3/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	8/3/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44134	8/3/2015	No new information learned on this call.

PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/3/2015	No new information learned on this call.
PPLPMDL0020000001	Fairlawn	OH	44333	8/3/2015	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	8/3/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	8/3/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	8/3/2015	No new information learned on this call. invited to program
PPLPMDL0020000001	Akron	OH	44312	8/3/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44305	8/3/2015	Discussed his use of oxycotin and dr told me that he continues to have some issues getting it covered and can't remember which plans but said in general it's becoming more difficult. I told dr I understand and to please just continue focusing on new starts. Discussed hysingla he Butrans as additional options he can go to for patients that continue to stay on an IR opioid for around the clock pain. Aetna coverage and ESI coverage for hysingla and Butrans trial cards.
PPLPMDL0020000001	Lakewood	OH	44107	8/3/2015	Wave thru window and message about caresource coverage with butrans. Talked with rn up front and she said no more caresource butrans have come thru in a few weeks. I talked about the trial with hysingla a bit.
PPLPMDL0020000001	Westlake	OH	44145	8/3/2015	worked with Terra today about his schedule and putting the savings cards in each of the rooms. She informed me that the doctor is taking another 2 week vacation the week of the 17th. He is also working alot at the va hospital. He will be at the surgery center on thursday so I booked a dinner.
PPLPMDL0020000001	Fairlawn	OH	44333	8/3/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	8/3/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	8/3/2015	No new information learned on this call.
PPLPMDL0020000001	Rocky river	OH	44116	8/3/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	8/3/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	8/3/2015	Told Stephanie about the Oxycotin and Butrans coverage with Aetna. I asked her to continue to covert her IR oxycodone patients to oxycotin and tramadol for Butrans. I asked her if she has any reservations with any of that and she said no but it's the patients she needs to convince. I told her I'm sure she can be pretty convincing.
PPLPMDL0020000001	akron	OH	44333	8/3/2015	Dr told me that he has a patient on Butrans who he titrated to 15mcg from 10mcg in July who complained after about two weeks of just "feeling funny" and stopped taking it on her own. Dr said he has a follow up appointment with the patient soon and will get additional information. Dr told me that this patient is also taking a low dose oxycodone. I told dr if he doesn't want to restart the Butrans he can always go to oxycotin. Dr said that's a great idea and will recommend that. Discussed hysingla opportunities, attributes, conversions, ESI coverage and Aetna for Butrans and oxycotin. I reviewed the hysingla trial offer and told him to just try it on a commercial patient and allow them to get the first 30 days free even if there is a PA. Dr said that's a great deal and will do it.
PPLPMDL0020000001	Garfield Heights	OH	44125	8/3/2015	Reviewed portfolio, identified patients, initiation/titration, formulary opportunities, trial/savings cards, said ok will discuss with Dr. Samuel Abraham, majority of patients do not exceed TID dosing of an IR opioid.
PPLPMDL0020000001	Rocky River	OH	44116	8/3/2015	Talked about the hysingla and the es/medco patient...commercial patients appropriate. Dr still said he was uncertain about trying it again. I left him managed care grid and trial offer information. There was much more I wanted to say but I was limited due to he was coming to the window to talk to a patient and I had to move out of the way so he could do his thing with the patient.
PPLPMDL0020000001	Independence	OH	44131	8/3/2015	Reviewed with roman latest on insurance for hysingla since he completely believes in the medicine. Discussed with him getting patients pharmacy benefit card in the exam room and only writing it for the few plans on the formulary grid. He agreed. Reviewed that coverage for Oxycotin is more available.
PPLPMDL0020000001	Independence	OH	44131	8/3/2015	Doctor thinks hysingla makes sense for patients because it is once daily and wanted clarification on what ADP mean. Reviewed abuse studies for hysingla. He thinks that is a reason to choose it. He wasn't aware that Oxycotin was for muted the same way.
PPLPMDL0020000001	Lakewood	OH	44107	8/3/2015	Patty wasn't there today so I didn't get much time with the doctor, but I filled in the nurse (who had broken english, I can't remember her name) about hysingla she was very interested and asked lots of questions mostly attributes which I addressed. The nurse said she would pass the information over and also said she could think of many patients that he could put this product on. I will come back tuesday and try and get an apt to review the product again in person. I was only able to give a quick overview of the product to the dr while he placed something on the desk for a patient and said hello to me thru the window. I will see what I can do more tomorrow w
PPLPMDL0020000001	Parma	OH	44129	8/3/2015	Doc said she wrote hysingla and it was rejected at the pharmacy for Cigna she believes. I told her that I may be able to help change that outcome if I know about it. Please call me in the future. She said she needed up switching it to Oxycotin.
PPLPMDL0020000001	Lakewood	OH	44107	8/4/2015	Reviewed hysingla and the doctor said he didn't know what commercial insured patients were and had no idea what Medco. I asked the doctor if he knows what any of his patients have when he gives a script...caresource, med d. And he said sometimes. I tried to explain that those patients can't use a coupon therefore commercial patients where those that would use a coupon and so forth. Reviewed the conversion. He seemed confused on how to convert. Reviewed it several times. I also just talked about the lower doses the 20 and the 30mg. And the trial offer for the patients. Dr said he would most likely write butrans before hysingla. I asked if he has gotten experience with butrans and he said no, yet he said he has several tramadol pain patients oncaresource. I talked caresource and the initiation dose for butrans. Dr agreed to write but i/m not certain he knows how to write it or
PPLPMDL0020000001	Parma	OH	44129	8/4/2015	Ask doctor to consider hysingla ER for patient taking total dose of norco of 20 mg or more who is looking for more analgesia. Handed him formulary for butrans and hysingla.
PPLPMDL0020000001	Parma	OH	44129	8/4/2015	He said he doesn't prescribe opioids, he sends them to dr Gallagher. He understands positioning of portfolio and will consider butrans as patients first opioid. He doesn't anticipate prescribing ER meds at this time.
PPLPMDL0020000001	Cleveland	OH	44195	8/4/2015	Reviewed portfolio, formulary challenges, trial/savings cards, said ok will continue consider when prescribing for appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44125	8/4/2015	Reviewed portfolio, identified appropriate patients, addressed approval challenges for Hysingla, said ok will continue to work thru challenges to prescribing has a patient coming in on Thurs.
PPLPMDL0020000001	Parma	OH	44129	8/4/2015	Thanks Myra for finding appropriate patients for hysingla last week. After discussing with her staff and the troubles they had last week she is going to try to stick with express scripts, Medco, Caremark for now.
PPLPMDL0020000001	Cleveland	OH	44111	8/4/2015	Discussed hysingla. appropriate patient type and attributes w fair balance. asked if he treats atc pain with any hydrocodone currently and he said a few. he talked about his limited hours and his dissatisfaction with the pain doctors in the area. He told me he tried to refer out. I asked those that he keeps how does he handle their atc pain currently. Dr didn't know how to answer this. I asked if any of his patients would be open to a once a day option? He said maybe a few. I asked if he could talk about those patients and he really didn't know them off the top of his head. I worked on ESI/medco managed care pull thru along with the trial offer and conversion dosing. Also talked about butrans with caresource managed care. And dosing.
PPLPMDL0020000001	Stow	OH	44224	8/4/2015	Dr told me she wrote hysingla for a patient with UHC commercial and medicare secondary but it's A & B. Dr said that it required a PA and was sent and was still denied and wanted to know why? I told her that UHC is not covering hysingla at all and it's just not the right product for UHC commercial and she should try either Butrans or oxycotin.
PPLPMDL0020000001	Cleveland	OH	44195	8/4/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	8/4/2015	Visited pain mgmt dept, Requested in-service with Fellows
PPLPMDL0020000001	Parma	OH	44129	8/4/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44125	8/4/2015	Reviewed portfolio with Evan, discussed challenges of opioids. said will order accordingly
PPLPMDL0020000001	Akron	OH	44333	8/4/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	8/4/2015	Doctor wanted to know when to choose hysingla and when to choose butrans. He is comfortable with butrans and likes it for his aptient population. Using the portfolio page from detail aid described three specific patient types. Butrans is appropriate as patients first opioid or before or after tramadol but before norco. Hysingla is for, recited indication, and if they are 20 mg or more total daily dose of norco and asking for more analgesia. He is clear in patient type and said he now has to remember it. Left him formulary and dosing book which he is keeping in his desk. He will find an e press scripts patient that is appropriate for hysingla.
PPLPMDL0020000001	Westlake	OH	44145	8/4/2015	No new information learned on this call.
PPLPMDL0020000001	Munroe Falls	OH	44262	8/4/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	8/4/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	8/4/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44312	8/4/2015	Spoke with Karla about setting up dr Ali to discuss Hysingla over lunch on Sept 3. Karla took me to the dr in his office and dr Lonsdorf said he would very much welcome Dr Ali into his office to discuss Hysingla because he thinks it's an intriguing product. I told dr I'm glad he feels that way and asked him to gain some clinical experience.
PPLPMDL0020000001	Parma	OH	44134	8/4/2015	Using patient profile for hysingla asked him to consider hysingla for a patient taking total daily dose of 20 mg or more of norco per day who is looking for more analgesia, and consider ER hysingla. Reviewed formulary and savings card information. Reminded him that butrans is appropriate as patients first opioid.
PPLPMDL0020000001	Cleveland	OH	44195	8/4/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	8/4/2015	Reviewed portfolio, identified patients, addressed approval challenges for Hysingla, patient info booklets and program invite, said ok will continue to work thru challenges to prescribing.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/4/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	8/4/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	8/4/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	8/4/2015	Reviewed portfolio, identified patients, addressed approval challenges for Hysingla, patient info booklets and program invite, said ok will continue to work thru challenges to prescribing.
PPLPMDL0020000001	Akron	OH	44312	8/4/2015	Told dr that I would figure that he has enough patients taking IR opioids around the clock who have commercial insurance and would also be appropriate for wither Butrans or hysingla. Dr said that I'm probably right. I told dr that he needs to gain some more clinical experience with these products
PPLPMDL0020000001	Uniontown	OH	44685	8/4/2015	No new information learned on this call.
PPLPMDL0020000001	Stow	OH	44224	8/4/2015	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	8/4/2015	Talked about the hydrocodone attributes Dr asked questions regarding dosing and managed care. which I addressed. the doctor said he doesn't pay attention to managed care, I asked if he wants to know the coverage or how he feels about writing a branded product. Dr said he usually writes generics but will write branded given the appropriate of the need. Covered fair balance for abuse potential or all opioids include purdue products
PPLPMDL0020000001	Akron	OH	44333	8/4/2015	Butrans-went over trial program with her commercial patients and she agreed it's a great way to start an opioid naive patient with a low cost and also commercial patients failing tramadol; Oxycotin-encouraged earlier switch from Percocet and Stephanie said she tries-sometimes referrals come in too high of counts-went over 7 strengths and ease of transitioning to Oxycotin-she agreed and will prescribe different strengths
PPLPMDL0020000001	Akron	OH	44320	8/5/2015	I told dr that I am patients waiting for him to start using Butrans. Dr said he knows and can't give me a good reason as to why he hasn't yet. Dr told me he remembers that he can write it for Caresource patients. I told him he's right and then explained the PA again and told him about the AARP and SILVERSCRIPT plans as well and told him to get started finding patients.
PPLPMDL0020000001	Cleveland	OH	44195	8/5/2015	Reviewed portfolio, trial/savings card, said ok will continue to prescribe for appropriate patients. Refers to Pal/Med team
PPLPMDL0020000001	Cleveland	OH	44113	8/5/2015	Reviewed portfolio, identified appropriate patients, initiation/titration, addressed formulary challenges, Trial/Savings Cards, said she will consider for appropriate patients has a patient in mind for Hysingla ER
PPLPMDL0020000001	Cleveland	OH	44113	8/5/2015	Reviewed portfolio, identified appropriate patients, initiation/titration, addressed formulary challenges, Trial/Savings Cards, said she will consider but rarely prescribe CII's or ERO.

PPLPMDL0020000001	Cleveland	OH	44113	8/5/2015	Reviewed portfolio, identified appropriate patients, Initiation/Titration, addressed formulary challenges, Trial/Savings Cards, said he will continue to prescribe for appropriate patients that he can get covered. Will be on vacation for the next 2 weeks.
PPLPMDL0020000001	Cleveland	OH	44113	8/5/2015	Reviewed portfolio, identified appropriate patients, Initiation/Titration, addressed formulary challenges, Trial/Savings Cards, said he will continue to prescribe for appropriate patients that he can get covered.
PPLPMDL0020000001	Cleveland	OH	44106	8/5/2015	Reviewed portfolio, identified appropriate patients, Initiation/Titration, addressed formulary challenges, Trial/Savings Cards, said he will continue to prescribe for appropriate patients that he can get covered.
	Bedford	OH	44146	8/5/2015	If he has patients in around the clock pain and they are taking a tott. daily dose of 20mg or more of norco, then he might have appropriate patient for hysingla. Reviewed hysingla initiation. He was interested in hearing about it but for their practice coverage is a limiting factor. Reviewed formulary and patient type again and he said he will keep it mind. Reminded that OxyContin is q12 and coverage is more available at this time.
PPLPMDL0020000001	Stow	OH	44224	8/5/2015	W-dr said has used the butrans trial card-thanked her and asked for one more; OxyContin-reminded her it's there if she needs it if patient comes in on high amount of Percocet and want to switch-dr said she knows
PPLPMDL0020000001	Cleveland	OH	44113	8/5/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	8/5/2015	Reviewed portfolio with Uma(RPH mgr) confirmed 2 Hysingla ER RX's dispensed, 1 rejected. Trial card, said she will recommend if appropriate
PPLPMDL0020000001	Cleveland	OH	44113	8/5/2015	Visited IM dept, pain mgmnt
PPLPMDL0020000001	Akron	OH	44310	8/5/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44313	8/5/2015	Spoke with Lindsay a fill in pharmacist about hysingla and Butrans attributes, conversions and trial cards. Lindsay said she had not known about hysingla and so it was a good introduction.
PPLPMDL0020000001	Stow	OH	44224	8/5/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44303	8/5/2015	Spoke with Sue a tech with Rod. Reviewed both Butrans and Hysingla attributes, dosing and conversions. Discussed how the copy cards and trial offers work. Sue said they have a handful of patients on Butrans and didn't think they have any on Hysingla. Explained insurance options.
PPLPMDL0020000001	Westlake	OH	44145	8/5/2015	Got back to talk to rn Bridget, leveraged aug dinner program. She said dr is uncertain he wants to attend. I offered a program for their office later in the year. She thought that would work great. I informed about Doug coming on Tuesday and asked for time. Tuesday is procedure day so best chance would be after 2. I told her to inform the dr. I saw dr briefly. A wave, he said "your back again" I said I'm here every week doc that's how important you are and I said I was finding out about your hysingla patients. He said thank you.
PPLPMDL0020000001	Uniontown	OH	44685	8/5/2015	Dr said that he's still finding a place for oxycontin because it's a good product when patients come in on percocet and taking too much. I told dr about the 1:1 conversion and the copy card for his commercial patients. Dr said he trying to find a place for Butrans but based on being in the wound care center a transdermal patch doesn't make too much sense. I told dr I agreed and to write oxycontin.
PPLPMDL0020000001	Westlake	OH	44145	8/5/2015	No new information learned on this call.
PPLPMDL0020000001	Bedford	OH	44146	8/5/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44320	8/5/2015	I told dr that since she told me last week that she's seeing more commercial patients that it really opens the door to use Butrans and then reviewed the formulary grid. I reviewed the trial and copy cards and asked her to just write the product. Monique said she will and knows it's going to be a great option.
PPLPMDL0020000001	Cleveland	OH	44195	8/5/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	8/5/2015	Laura is being very selective in who she chooses for hysingla. She doesn't want the hassle of call backs and frustration for the patient. She wrote one for med-d with express scripts patient who was approved to get hysingla but it was \$140 and the patient couldn't afford that. She will keep trying to get experience for right patient with the right plan.
PPLPMDL0020000001	Akron	OH	44312	8/5/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	8/5/2015	No new information learned on this call.
PPLPMDL0020000001	Beachwood	OH	44122	8/5/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44313	8/5/2015	Dr told me that he is continuing to use oxycontin and admitted that most are refills. I asked why not many new starts and he said it's too expensive. Discussed what is too expensive for one may not be for another. Dr did tell me he's been writing more Butrans recently. I asked where and why he's been using it more? Dr said he uses Butrans now on patients he doesn't want to give an oral opioid to. I told him that's fine but it's still abusable like any other opioid. Dr said he knows but feels a patch can make a difference. I told him about the Caresource PA and medicare D coverage on AARP and silverscript.
PPLPMDL0020000001	Bedford	OH	44146	8/5/2015	OxyContin is q12 w ADP and widely available on formulary and now there are ER options. For hydrocodone patient with once daily hysingla, and abuse deterrent properties. If he has patient on total daily dose of norco 20mg or more, that patient might be in around the clock pain and appropriate for hysingla. He asked me to leave the information.
PPLPMDL0020000001	Bedford	OH	44146	8/5/2015	OxyContin-dr said its still his number one ER opioid and the one he reaches for when patients are referred to him on too high a count of Percocet-dr said coverage in the past was a problem but not now; butrans-trial cards-reminded him of program and he said he does use when has commercial patient
PPLPMDL0020000001	westlake	OH	44145	8/5/2015	Discussed hysingla dr said he forgets. I focused on the potential patient and insurance. Coverage. The np and pa were very interested in the dosing and Butrans. The drs said he liked Butrans. I asked why and he said it was easy to dose. I asked why didn't he like hysingla. Dr said he can't remember it. I tried a variety of suggestions to fix that problem.
PPLPMDL0020000001	Solon	OH	44139	8/6/2015	Doctor said care source is giving him a harder time approving prescriptions for butrans. Discussed patient he is choosing and what he is saying on the prior authorization. Discussed hysingla for patient taking 20 mg or more total daily dose of norco and in around the clock pain, and a possible appropriate patient type. He said that makes sense. Reviewed better formulary coverage then the last time he tried to prescribe it. He said he will keep it in mind when he finds the right patient.
PPLPMDL0020000001	Independence	OH	44131	8/6/2015	He called to check on Cigna patient who works at JP Farley. He wanted to make sure he would get the free month and that this would be appropriate patient. I checked Cigna coverage, employer wasn't listed and told him that it looks as if the script should go through, told him to be sure to give saving card information and that patient activates it ahead of time.
PPLPMDL0020000001	Cleveland	OH	44115	8/6/2015	Reviewed and identified Hysingla/Butrans patients, formulary opportunities along with trial/savings card, said ok will continue to prescribe for appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44115	8/6/2015	Reviewed and identified appropriate patients for Hysingla ER/Butrans, Initiation/Titration, formulary opportunities, trial/savings cards. Said ok had a patient in mind this afternoon.
PPLPMDL0020000001	Cleveland	OH	44115	8/6/2015	Reviewed portfolio and identified appropriate patients, initiation/titration, said ok will continue to prescribe for appropriate patients.
PPLPMDL0020000001	Stow	OH	44224	8/6/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	8/6/2015	Reviewed portfolio, said ok on outside rotation, will schedule appt for Sept
PPLPMDL0020000001	Mogadore	OH	44260	8/6/2015	No new information learned on this call.
PPLPMDL0020000001	Northfield Center	OH	44067	8/6/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	8/6/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	8/6/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44109	8/6/2015	Quick review of portfolio, formulary opportunities, said ok.
PPLPMDL0020000001	Cleveland	OH	44109	8/6/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44312	8/6/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	8/6/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	8/6/2015	He said he will incorporate hysingla into his treatment for the right patient. I asked him if he has any patients taking a total daily dose of 20 mg or more of norco per day. He said unfortunately, yes. I told him that might be appropriate hysingla patient. Once daily dosing, with ADP! What is holding him back? He said he will, he does think butrans is a great option for his patient.
PPLPMDL0020000001	Northfield	OH	44067	8/6/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44312	8/6/2015	Told dr quickly at window that I wanted him to look more closely at the patients he's refilling every month on tramadol or Norco. I showed him the initiation and conversions guides for Butrans and hysingla and told him they are viable option for patients with around the clock pain. Dr agreed and said he will review the information.
PPLPMDL0020000001	Cleveland	OH	44109	8/6/2015	Visited IM, PMR and Cancer care center. Product portfolio info
PPLPMDL0020000001	Cleveland	OH	44109	8/6/2015	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	8/6/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	8/6/2015	Reviewed managed care, who is appropriate for hysingla asked if he was still on board to try it and he said he will try 5 to 10 patients.
PPLPMDL0020000001	Westlake	OH	44145	8/6/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/6/2015	Denise told me that she just sent a patient to New Choice to get Butrans filled. I asked what the patient was on prior and she said NSAIDS and tramadol. I told her that's perfect and to continue finding patients. I reminded her about hysingla and where and when to use.
PPLPMDL0020000001	Independence	OH	44131	8/6/2015	Doc has been talking to other hCps in the area who have told him that they prefer ER meds like hysingla for patients taking total daily dose of 20 mg or more. If he has to treat pain chronically he said he will not prescribe IR meds. He will keep butrans in mind but can't really imagine writing for a patch at this time.
PPLPMDL0020000001	Independence	OH	44131	8/6/2015	No new information learned on this call.
PPLPMDL0020000001	Stow	OH	44224	8/6/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44115	8/6/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44115	8/6/2015	Discussed Hysingla stocking/utilization
PPLPMDL0020000001	Northfield	OH	44067	8/6/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44109	8/6/2015	No new information learned on this call.
PPLPMDL0020000001	Macedonia	OH	44056	8/6/2015	No new information learned on this call.
PPLPMDL0020000001	Mogadore	OH	44260	8/6/2015	Tod dr at counter I would like him to please continue identifying patients on tramadol or even Norco that are taking it around the clock and choose one of the products as a viable option. Dr said he likes Butrans and just continues to struggle with coverage. I told him we will discuss next week a lunch and asked him to gain some clinical experience with hysingla and gave him the invitation and titration guide.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/6/2015	Told Linda that I just came from New Choice and that they have a patient of hers that she wrote Butrans from on 7/29 and is waiting for the prescription because there is a PA. Linda said to speak with Tera about it because it was a Humana Med D patient and it's not covered. I told her I will and asked if she's tried hysingla recently? Linda said she didn't think so but likes Butrans because it's a patch and a schedule 3. I told her that's true however for those Norco patients who may be higher up in the dose, hysingla may be a very good option. Linda said I'm right and will try it.
PPLPMDL0020000001	Cleveland	OH	44130	8/6/2015	Second week in a row, this time caught him by his car as he was leaving. Told him that as he knows, OxyContin's formulary coverage is available. Now using hysingla's is starting to be as well. For his patient in around the clock pain, needing 20 mg or more of norco, will he consider once daily hysingla with ADP?

	C. Falls	OH	44223	8/6/2015	Katherine told me that Butrans has been going through without much problem recently however does have one from Linda Armstrong that was a PA and it's still pending. Katherine said that the patient had Humana Med D.
PPLPMDL0020000001					Spoke with Tera and she has had to send over a appeal to get it covered. Discussed hysingla attributes and conversions with trial offer.
PPLPMDL0020000001	Cleveland	OH	44113	8/7/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44319	8/7/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44115	8/7/2015	Reviewed and identified appropriate patients, CareSource opportunity, invited to program. said ok
PPLPMDL0020000001	Cleveland	OH	44113	8/7/2015	Reviewed portfolio, identified appropriate patients that have coverage. said ok has a few patients in mind will present to appropriate patients
PPLPMDL0020000001	Cleveland	OH	44114	8/7/2015	Reviewed portfolio, identified appropriate patients that meet indication, CareSource opportunity, said ok will prescribe for appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44113	8/7/2015	Identified appropriate patients that have coverage for Hysingla/Butrans, Reviewed caresource opportunity, invited to program, said ok will continue to prescribe and recommend for appropriate patients that she can get
PPLPMDL0020000001	Akron	OH	44303	8/7/2015	30 second introduction to hysingla i between her patients. Discussed dosing, doses and conversions. Reviewed appropriate patient type for hysingla and asked dr if she thinks it can fit in her practice. Dr said she's not keen on writing opioids but does have some Norco patients she might consider using it on.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/7/2015	Discussed hysingla and potential coverage on Caresource and he called Jessica at Rite Aid in Fairlawn. Jessica said the patient was a dual eligible patient however there was a PA but was not given the criteria when she spoke to Caresource. Dr Ali said that he will continue to write for Hysingla for his Caresource patients and just trial and error the situation and said he will keep me updated on his success. I asked for continued prescribing and to please keep Butrans and oxycontin on his radar. Dr said he writes a lot of Oxycontin in the hospital.
PPLPMDL0020000001	University Hts	OH	44118	8/7/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/7/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44125	8/7/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland Hts	OH	44118	8/7/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44319	8/7/2015	Told dr at window about oxycontin coverage with Aetna and hysingla for ESI. Told dr to just identify the right patient on the right plan and those plans are part of a patch of least resistance.
PPLPMDL0020000001	Fairlawn	OH	44333	8/7/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	8/7/2015	Elsie told me that She had a patient the other day that she wrote Butrans for who had UHC Community Plan. Elsie said that UHC told her that they required that the patient had a 40 day trial of Opana 80mg, Fentanyl 100mg, and MS Contin. She said she was amazed with this a write a very strong appeal letter to them and is waiting to hear back. Discussed her continued use and where and told her to update me on what happens with that patient. Discussed a possible opportunity to write Hysingla for Caresource patients. I asked for continued business.
PPLPMDL0020000001	Fairlawn	OH	44333	8/7/2015	Spoke with Jessica concerning hysingla and Caresource coverage. Jessica said she doesn't feel comfortable running a script under someone else's Caresource. Jessica said if I can get a dr to call in a patient information
PPLPMDL0020000001	Cleveland	OH	44114	8/10/2015	information under Caresource to verify coverage that would be best.
PPLPMDL0020000001	Cleveland	OH	44115	8/10/2015	Reviewed portfolio, formulary updates, identified patients, Trial/Savings card offer, invited to program, said ok will continue to prescribe for appropriate patients that he can get covered. Will be attending program
PPLPMDL0020000001	Cleveland	OH	44113	8/10/2015	Quick review of portfolio, Butrans patient info booklets, Hysingla ER Caresource update along with program invite. said ok will continue to identify and prescribe for appropriate patients that she can get covered.
PPLPMDL0020000001	Cleveland	OH	44113	8/10/2015	Reviewed Hysingla ER formulary status, stocking info along with trial and savings card. said ok will continue to prescribe for appropriate patients
PPLPMDL0020000001	Cleveland	OH	44113	8/10/2015	Reviewed with Kristin, Melissa and Riannon Caresource update info, Butrans patient info booklets. said ok will remind clinicians for appropriate patients
PPLPMDL0020000001	Rocky river	OH	44116	8/10/2015	Reviewed appropriate patients type and asked if she could offer this today to an appropriate patients. She said she would use it if she a patient appropriate. Reviewed dosing and conversalkn. Covered managed care.
PPLPMDL0020000001	Parma	OH	44129	8/10/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44130	8/10/2015	Butrans-went over trial cards and dr agreed good way to start patients with commercial insurance at low cost-said will definitely use; OxyContin-reminder to switch early-dr said he tries at 4 tabs-agreed good way to switch early and will continue to look for patients
PPLPMDL0020000001	Uniontown	OH	44685	8/10/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	8/10/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	8/10/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland Hts	OH	44118	8/10/2015	Reviewed with Vanita, trial/savings cards along with CareSource information. said ok will remind DR.
PPLPMDL0020000001	Westlake	OH	44145	8/10/2015	Talked to dr about caresource coverage- he was interested as he said this was a large portion of his patients. I talked about the pa process and asked him to try it in a few patients and see the results. Reviewed attributes of products. Bridget the rn i worked w regarding more detail of pa process and trial offer including Butrans.
PPLPMDL0020000001	Berea	OH	44017	8/10/2015	No new information learned on this call.
PPLPMDL0020000001	Uniontown	OH	44685	8/10/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	8/10/2015	No new information learned on this call.
PPLPMDL0020000001	Highland Heights	OH	44143	8/10/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	8/10/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	8/10/2015	Butrans-Laura said trying in more elderly patients like we discussed and they are doing well-encouraged her to keep looking for caresource patients; OxyContin-n/a
PPLPMDL0020000001	Parma	OH	44129	8/10/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	8/10/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44118	8/10/2015	Quick review of Hysingla ER/Butrans, formulary update, trial/savings cards along with program invite. said ok will consider.
PPLPMDL0020000001	Akron	OH	44333	8/10/2015	Quick message at front counter about hysingla and reviewed the attributes, dosing and trial offer. Dr said he really likes the idea and I told him about coverage with ESI, and to try it for his Caresource patients. Dr said ok.
PPLPMDL0020000001					Asked him where he's using Butrans and he told me where it's covered and that's it's difficult. I told him it's better covered than he may think and told him Caresource and Med D coverage and criteria. I asked him to just TRY it. Dr said alright.
PPLPMDL0020000001	Waterford	OH	45786	8/10/2015	I-Butrans clinical trials and dosing. OxyContin start principles. Dosing, titration and managed care for HysinglaW-will look over the information
PPLPMDL0020000001	Waterford	OH	45786	8/10/2015	I-Butrans clinical trials and dosing. OxyContin start principles. Dosing, titration and managed care for HysinglaW-will look over the information
PPLPMDL0020000001	akron	OH	44333	8/10/2015	Told dr about hysingla and Caresource. I asked dr if he would identify just one patient that meets his requirements for an ER opioid and has failed Norco or a like product for hysingla. Dr said that's good news and he will try.
PPLPMDL0020000001	Fairlawn	OH	44333	8/10/2015	Told Gilbert about the possible coverage with Caresource and hysingla. Gilbert ran a dummy Rx and said that it shows there is a PA but it didn't give criteria. Gilbert said it should be covered and to run with it. He said it's probably a failure of Norco. Gilbert said they have 20-40mg in stock.
PPLPMDL0020000001	Akron	OH	44333	8/10/2015	Told dr about the opportunity to try hysingla for his Caresource patients and that while I'm not positive on criteria, it's getting approved with a PA. Dr said he will try it but said he's trying to not write as many narcotics because it's causing more problems in the future. I told dr that's why he must be very selective on choosing the right patient. Dr said it doesn't matter however he will try it when he finds a good candidate.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/11/2015	Lunch appointment. Discussed all products and outlined Butrans, hysingla and oxycontin attributes. Dosing. Conversions and where and when to use for each product along with patient profiles. Discussed savings and trial cards for all products.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/11/2015	Lunch appointment. Discussed all products and outlined Butrans, hysingla and oxycontin attributes. Dosing. Conversions and where and when to use for each product along with patient profiles. Discussed savings and trial cards for all products.
PPLPMDL0020000001	Cleveland	OH	44106	8/11/2015	Quick review of portfolio, formulary opportunities, said ok will consider for appropriate patients.
PPLPMDL0020000001	Cleveland	OH	44106	8/11/2015	Intro and Discussed portfolio of products, identified appropriate patients, initiation/Titration, Trial/savings cards, said ok will discuss with attendings/colleagues.
PPLPMDL0020000001	Cleveland	OH	44106	8/11/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44112	8/11/2015	Quick review with Michelle of Hysingla ER formulary coverage, Book lunch appt
PPLPMDL0020000001	Lakewood	OH	44107	8/11/2015	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	8/11/2015	No new information learned on this call.
PPLPMDL0020000001	Valley View	OH	44125	8/11/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	8/11/2015	Mike told me that he thinks they have 4-5 patients on Hysingla and the most recent new starts have been out on 30mg dose. Mike said that they have 20-60mg in stock and knows that because they do inventory every onto and they just did one. I reviewed the trial offer and asked if they are getting it and he said he thinks they are.
PPLPMDL0020000001	Cleveland	OH	44109	8/11/2015	No new information learned on this call.
PPLPMDL0020000001	Lakewood	OH	44107	8/11/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/11/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44106	8/11/2015	Discussed portfolio, reviewed formulary opportunities for all products, patient info booklets. Said ok will continue to prescribe for appropriate patients that he can both convince and have covered.
PPLPMDL0020000001	Cleveland	OH	44106	8/11/2015	Visited pain dept. Discussed pain portfolio with Saghal Lawrence and fellows
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/11/2015	Dr talked about his recent Butrans starts and told me all of them were on IR opioids tramadol and hydrocodone. Dr said he started both on 5 mcg and already titrated to 10mcg. I asked for continued use of Butrans for the tramadol patient on it around the clock. Reviewed the use of hysingla attributes, dosing, conversions and trial offer. Discussed oxycontin use for patients already on oxycodone and tolerating it.
PPLPMDL0020000001	Akron	OH	44310	8/11/2015	Dr told me that he's got many patients back on Butrans and working very well. Dr said he's writing it for his older patients taking chronic IR opioids and is finding when they are higher up on IR opioids that he needs to titrate Butrans quickly to get an appropriate dose. I asked him for continued prescribing and discussed coverage. I discussed the possibility of getting hysingla covered on Caresource and Shar said that they just see MyCare Ohio patients. I told dr to give it a shot but i can't guarantee coverage.
PPLPMDL0020000001	Waterford	OH	45786	8/11/2015	I- Butrans clinical trials. Oxycontin start principles. Dosing, titration and managed-care for Hysingla W-will look over the information
PPLPMDL0020000001	Akron	OH	44320	8/12/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	8/12/2015	Discussed managed care tie in with the attributes of hysingla and butrans.

	Parma	OH	44129	8/12/2015	He absolutely has appropriate patients for hysingla. He needs it to be covered in caresource and workers comp, reviewed the formulary situation and asked for his commitment to find patient with express scripts. He said that he can not write for 90 days. I told him that express scripts does. It require 90 day mail away scripts, they can get 30 days filled at the pharmacy. He said he will try to remember to write for express scripts. He knows that butrans is appropriate as patients first opioid although that's not what he usually does and he said he should think of it earlier in the treatment process.
PPLPMDL0020000001	Cleveland	OH	44115	8/12/2015	Reviewed portfolio, identified appropriate patients, initiation/titration, formulary opportunities, said ok will continue to prescribe/recommend for appropriate patients that he can get covered. Reviewed with Martha.
PPLPMDL0020000001	Westlake	OH	44145	8/12/2015	participated on the hysingla web x and found it helpful and agreed to write it for his appropriate patients. his questions were answered on the web x. We were also able to talk about butrans and he is just getting started using this product. So far he found it working for his patients. Caresource coverage was important to them all.
PPLPMDL0020000001	Cleveland	OH	44113	8/12/2015	No new information learned on this call.
PPLPMDL0020000001	Stow	OH	44224	8/12/2015	Lunch appointment. Discussed both Butrans and hysingla and dr said Butrans for the most part is going through insurance but hysingla isn't. I told her I know that the most recent one was UHC commercial and she said she had another patient this morning with the same plan on Norco she wants to switch. I told her that UHC commercial has hysingla on a NOF status and is most likely won't get covered but did tell her to try it for MyCare Ohio patients as well as ESI, Caremark, and Cigna. Dr told me to talk to Nay about those plans.
PPLPMDL0020000001					No new information learned on this call.
PPLPMDL0020000001	Uniontown	OH	44685	8/12/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	8/12/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	8/12/2015	np said she will continue to write butrans. we talked about appropriate patinet and talked about the tramadol patient. np said she usually writes butrans after norco. I asked why was she apposed to write after tramadoland she said that is not the way dr. kabara wants to do it and she follows his lead.
PPLPMDL0020000001					No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	8/12/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	8/12/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	8/12/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/12/2015	No new information learned on this call.
PPLPMDL0020000001	Westlake	OH	44145	8/12/2015	dr agreed to try hysingla in a caresource appropriate pateint. I worked with the staff on what the pa would be like and offered to assist with the cover my meds process when it arrives back from the pahrmacy. Dr said he will continue to write because it has been a good experience so far.
PPLPMDL0020000001	Parma	OH	44129	8/12/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	8/12/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44114	8/12/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44312	8/12/2015	Quick messages in hysingla and Butrans. Told dr that he needs to use hysingla as the ER option when his patients are taking Norco round the clock and reminded him it's a single entity hydrocodone. Told dr to please continue using butrans for his tramadol patients around the clock.
PPLPMDL0020000001					No new information learned on this call.
PPLPMDL0020000001	Bedford	OH	44146	8/12/2015	Reviewed portfolio and formulary opportunities, said ok Melisa got a MedCo thru today
PPLPMDL0020000001	Cleveland	OH	44113	8/12/2015	Butrans-dr said Debbie, Elaine are the ones to talk to dr said he will prescribe it for patients on low dose norco-reminded him of caresource coverage; OxyContin-n/a
PPLPMDL0020000001	Cleveland	OH	44113	8/12/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44195	8/12/2015	Reviewed portfolio, Hysingla Formulary opportunities, Trial/Savings cards, said ok
PPLPMDL0020000001	Cleveland	OH	44103	8/12/2015	Quick review of porfolio, just returned from a long vacation, no time to talk, said ok ,No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/12/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44115	8/12/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	8/12/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	8/12/2015	Dr told me that he write a hysingla this week for a patient taking vicoden and wanted more. Kor said he started on the 30mg and the patient is eager to try. I reminded dr that the trial cards have been extended to October and he needs to keep writing. Reviewed Butrans and dr said he's continuing to write it despite the recent issues but they have had no more.
PPLPMDL0020000001	Cleveland	OH	44115	8/12/2015	Quick review of portfolio, formulary opportunities, Trial/savings cards said ok will consider. Reviewed with Rob-Ma
PPLPMDL0020000001	Strongsville	OH	44136	8/12/2015	Asked doc to consider hysingla for patient taking total daily dose of 20 mg or more of norco and who is in around the clock pain. He said hysingla makes sense and he has thought of it since I was Last in. Quickly reviewed express scripts for formulary coverage. Reminded him butrans is available in 5 doses and is appropriate as patients first opioid.
PPLPMDL0020000001	Beachwood	OH	44122	8/12/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	8/12/2015	Asked if hysingla makes sense for patient taking total daily dose of 20 mg or more of norco and is in around the clock pain. He said he has no problem with ER meds, but he doesn't have the choice , insurance companies do. Asked him for one patient with express scripts. He said he will try. Reminded shim that butrans has excellent coverage and is appropriate as patients safest opioid.
PPLPMDL0020000001	Akron	OH	44320	8/12/2015	Told Monique that now is the time to start writing more Butrans and to get that important clinical experience with it. I told her the product speaks for itself and she needs to just trust it. She told me she just write it for a staff members dad and he likes it. Discussed insurance coverage and trial offer.
PPLPMDL0020000001	Rocky river	OH	44116	8/12/2015	Webx conducted. Drs found it very helpful and found their questions answered. dr said she would write hysingla and liked the managed care updates.
PPLPMDL0020000001	Barberton	OH	44203	8/13/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44115	8/13/2015	Reviewed formulary opportunities, Hysingla trial card offer and identified Butrans patients. Patient info booklets, and program invite. said ok will continue to prescribe for appropriate patients that he can get covered.
PPLPMDL0020000001	Middleburg Heights	OH	44130	8/13/2015	Reviewed portfolio and product positioning. Thorough review of hysingla and appropriate product positioning for all three products. Julie sees a place in their practice for ER meds and also plans to try hysingla. Reviewed formulary coverage, ESI, savings program. Discussed butrans as patients first opioid and pulled through coverage and appropriate patient type.
PPLPMDL0020000001	Cleveland	OH	44113	8/13/2015	Reviewed portfolio, Discussed and Identified appropriate patients, Initiation/Titration, formulary opportunities along with Trial and savings cards. Said ok is begin to send majority of patients to Pain mgmnt. but will prescribe for patients that have coverage.
PPLPMDL0020000001	Cleveland	OH	44113	8/13/2015	Reviewed portfolio, Discussed and Identified appropriate patients, Initiation/Titration, formulary opportunities along with Trial and savings cards. Said ok and Dr E is beginning to send majority of patients to Pain mgmnt. but will recommend/prescribe for patients that have coverage.
PPLPMDL0020000001	Cleveland	OH	44195	8/13/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44115	8/13/2015	Reviewed CareSource opportunity, Butrans patient info booklets.No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44130	8/13/2015	Doc said he found a patient for hysingla, he couldn't remember who. I asked him if I should leave another savings card so he can find another patient with express scripts insurance who is appropriate for hysingla. He smiled and said ok. Is it pushing it if I ask for butrans patient too. He said I will have better luck with hysingla.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/13/2015	No new information learned on this call.
PPLPMDL0020000001	Berea	OH	44017	8/13/2015	No new information learned on this call.
PPLPMDL0020000001	Independence	OH	44131	8/13/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44113	8/13/2015	Reviewed portfolio along with Savings/Trial card, said ok started a new patient on Butrans this morning
PPLPMDL0020000001	Parma	OH	44129	8/13/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44104	8/13/2015	No new information learned on this call.
PPLPMDL0020000001	Hudson	OH	44236	8/13/2015	Breakfast. I asked dr if he has any patient on Norco around the clock and dr said plenty. I told him he needs to write hysingla for those that are taking it around the clock and then reviewed dosing, attributes, and conversions. Told him to continue writing Butrans and reviewed Helen profile.
PPLPMDL0020000001	Fairview Park	OH	44126	8/13/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/13/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44115	8/13/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	8/13/2015	She is being methodical in her choosing of hysingla aptient. She mentions it and is getting the patients commitment before switching up meds. A few have agreed, but then there is formulary issue. Moshe is going to stick with ESI patient for hysingla. Butrans is still a decent option, but not her first choice.
PPLPMDL0020000001	Hudson	OH	44236	8/13/2015	Breakfast appointment. Reviewed Butrans and hysingla discussion with attributes, dosing, and conversions. Dr asked about insurance coverage for hysingla and discussed where he should be writing it along with patient types. I asked dr for just one patient on each product to get the ball rolling.
PPLPMDL0020000001	Cleveland	OH	44101	8/13/2015	No new information learned on this call.
PPLPMDL0020000001	Middleburg Hts.	OH	44130	8/13/2015	Using portfolio piece reviewed all three products. He said he concentrates on the spine and doesn't do much with narcotics. Those patients typically see Julie such or dr Ryan. Reviewed ADP and when ER meds are appropriate. He was interested in butrans as patients first opioid and the fact that it was c3 and a patch. Reviewed formulary for butrans and hysingla.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/13/2015	Quick discussion while in hospital and Denise said all is going well with Butrans and is seeing great results. She said that most orients do just fine on 10mcg however there are those who must titrate to the higher doses. I asked for continued business and support and asked her if she's seen good results from Hysingla and she said she has but it's a difficult product to get covered.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/13/2015	Dr said he had a patient in yesterday that he had titrated from Butrans 15mcg to 20mcg and the patient had serious burns from the 20mcg on three different application sites. Dr said he was titrating back down to 15mcg to see if that solves the problem. I told dr I have heard of those cases before and dr said that's concerning and I need to report it. I asked for continued prescribing and to keep hysingla in mind for his Norco patients.
PPLPMDL0020000001	Parma	OH	44129	8/13/2015	Quickly mentioned norco patient taking total daily dose of norco 20 mg or more as possibly appropriate patient for hysingla ER. He said that he should be able to find that. In that case, he can keep an eye out for oxycodone patient in around the clock pain that might be appropriate for Q12 OxyContin.
PPLPMDL0020000001	Stow	OH	44224	8/13/2015	Reviewed Butrans and hysingla attributes, dosing and conversions and dr said he wrote a Butrans the other day for a patient asking for more tramadol. I told him that's an ideal patient and dr said the patient had good insurance. I asked him to identify just one patient for hysingla and reviewed what that patient looked like.



	Middleburg Hts	OH	44130	8/13/2015	Thorough review of portfolio and product positioning. He believes that ER meds make sense for patients who need more than 4 tablets per day. We discussed patient taking total daily dose of norco 20 mg or more as possibly appropriate for ER meds like hysingla and OxyContin, reviewed ADP. He needed clarification of butrans because there was confusion about suboxone and buprenorphine. Clarified that and explained positioning of butrans and where appropriate. He was curious about interactions with SSRI's. Reviewed formulary and where to write hysingla and butrans.
PPLPMDL0020000001					
PPLPMDL0020000001	Akron	OH	44313	8/14/2015	No new information learned on this call.
PPLPMDL0020000001	Mogadore	OH	44260	8/14/2015	No new information learned on this call.
PPLPMDL0020000001	Fairlawn	OH	44333	8/14/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/14/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44312	8/14/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44310	8/14/2015	OxyContin-dr said he red it recently for a patient getting to 5-6 Percocet-agreed great patient and challenged to switch at 3-4 percocet-agreed probably better and will try; butrans-dr said he has a few patients on it with good results-asked for a caresource patient failing tramadol-dr said ok
PPLPMDL0020000001					
PPLPMDL0020000001	Munroe Falls	OH	44262	8/17/2015	Got out quick messages and dr said she can't talk because she was behind a dot come back on Wednesday.
PPLPMDL0020000001	Parma	OH	44129	8/17/2015	Using portfolio piece reviewed product line. She said her practice is closed to new chronic pain patients. Discussed appropriate patient type for each med. she is clear on where to use them and which plans. She will try to find an appropriate patient for hysingla on express scripts.
PPLPMDL0020000001	Parma	OH	44129	8/17/2015	Doctor knows she will find patients appropriate for hysingla. She wants to try it. Reviewed appropriate patient as person taking total daily dose of 20 mg or more of norco and in around the clock pain. She calculated some combinations in her head and how many patients are in that dose that hysingla makes sense for. Butrans is something she has tried in the past, but patients didn't want to continue it. She may give it a try for a Med d patient. She knows OxyContin patient and excellent formulary coverage.
PPLPMDL0020000001					
PPLPMDL0020000001	Stow	OH	44224	8/17/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	8/17/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	8/17/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44224	8/17/2015	Gave dr the butrans patient information guides she requested and told her to please continue identifying patients she knows are in pain around the clock and require an ER opioid. Reminded her of the copy card and trial offer and told her hysingla has a trial offer as well and explained the terms.
PPLPMDL0020000001	Parma	OH	44134	8/17/2015	Doc says butrans is one of top choices for pain management and he will not be changing that. He sees the results he is expecting with his butrans patients. He thinks he would choose once daily hysingla before twice daily OxyContin because of the dosing. The in, y thing stopping him is formulary. Reviewed managed care.
PPLPMDL0020000001	Fairlawn	OH	44333	8/17/2015	Told dr that he has three variable options for his ER opioid patients and then reviewed the portfolio piece. Dr said he had used them all except for hysingla and I asked him why? Dr said he just forgot. Reviewed its attributes, dosing, conversions and then trial offer. Dr said it makes sense. Nothing else learned.
PPLPMDL0020000001	Parma	OH	44129	8/17/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	8/17/2015	No new information learned on this call.
PPLPMDL0020000001	Uniontown	OH	44685	8/17/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	8/17/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44310	8/18/2015	Short discussion with dr and shar about butrans and Hysingla patient types and asked dr if he has any reservations about using it? Dr said he does not but its just getting it approved. Reviewed insurance plan coverage.
PPLPMDL0020000001	Stow	OH	44224	8/18/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44305	8/18/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	8/18/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	8/18/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44305	8/18/2015	Showed dr the Helen profile for butrans and read through it. I told him the next time he has a patient on tramadol in his exam room and is taking it around the clock to convert to Butrans. Dr said he agrees he needs to try it more often. I asked if it's realistic to find one candidate a week and. Write Butrans? Dr said he can do that.
PPLPMDL0020000001	Uniontown	OH	44685	8/18/2015	No new information learned on this call.
PPLPMDL0020000001	Waterford	OH	45786	8/18/2015	I-Butrans clinical trials and dosing. OxyContin start principles and managed-care. Dosing, titration, A.D. properties, and managed care for hysingla W-concerned about managed-care
PPLPMDL0020000001	Akron	OH	44333	8/18/2015	Butrans-Stephanie said she has been concentrating on caresource patients failing tramadol and having great results-also reminded her of AARP preferred status-she said great to know and will look for those patients as well; OxyContin-she said she likes switching at 3 tabs now and getting great results-agreed and asked for continued support
PPLPMDL0020000001	Akron	OH	44333	8/18/2015	Butrans-dr said its his go to drug for patients failing tramadol-getting great results-asked for caresource patients; OxyContin-reminded about switching at 3-4 tabs of Percocet-dr said is doing that
PPLPMDL0020000001	Akron	OH	44333	8/19/2015	Short discussion about Butrans and OxyContin and asked for continued support in the appropriate patients. Reviewed dosing and titration. Told Elise to please not forget about hysingla and reminded about trial offer being extended and Eli advantage.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/19/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44313	8/19/2015	Dr asked me if he can write OxyContin for his Medicaid patients. I told him that it's very well covered and he should never hesitate to write the product. I reviewed the copy card with him for commercial patients. Gave him hysingla initiation guide and dr said he continues to find a place for Butrans. I asked where and Tina told me for care source and Medicare D.
PPLPMDL0020000001	Stow	OH	44224	8/19/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44320	8/19/2015	Lunch appointment. Discussed all product attributes, dosing and conversions as well as patient profiles. Office is instituting a opioid policy and will have pain contracts, UDS and other ways to regulate what they are providing patients in pain.
PPLPMDL0020000001	Cleveland	OH	44113	8/19/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44304	8/19/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44320	8/19/2015	Lunch appointment. Discussed all product attributes, dosing and conversions as well as patient profiles. Office is instituting a opioid policy and will have pain contracts, UDS and other ways to regulate what they are providing patients in pain.
PPLPMDL0020000001	Akron	OH	44333	8/19/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44130	8/19/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	8/19/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44320	8/19/2015	Lunch appointment. Discussed all product attributes, dosing and conversions as well as patient profiles. Office is instituting a opioid policy and will have pain contracts, UDS and other ways to regulate what they are providing patients in pain.
PPLPMDL0020000001	Cleveland	OH	44130	8/19/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	8/19/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44130	8/19/2015	She finds butrans patients and likes it as an option for patients in pain. When I asked her if she has patients taking total daily dose of 20 mg of norco. She said she will write for 20 days of norco and tell them to find someone else to treat their pain. Discussed hysingla patient and she said she won't write it,
PPLPMDL0020000001	Cleveland	OH	44195	8/19/2015	Response to IIR RFP
PPLPMDL0020000001	Independence	OH	44131	8/19/2015	Doctor said that if I keep leaving him a savings card, then one day he will remember to give it to a patient. I told him I will give him one and leave one in the sample closet. Told him that he has to find pAtient in around the clock pain, currently taking total daily dose of 20 mg or more of norco, needing more analgesia. If they are. It on norco but need pain relief, why not try butrans. He said it seems like he should find the patient
PPLPMDL0020000001	Parma	OH	44129	8/19/2015	Quickly told him that a patient taking total daily dose of norco of 20 mg or more might be hysingla patient. Patient will get one month free, will he find one patient on express scripts to gain some clinical experience? He said yes. And butrans is appropriate as patients first opioid before going to norco.
PPLPMDL0020000001	Independence	OH	44131	8/19/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	8/19/2015	No new information learned on this call.
PPLPMDL0020000001	Bedford	OH	44146	8/19/2015	OxyContin-dr said all is well-still switching at 3 tabs and coverage good; butrans-dr said is a no-brainer-no problems
PPLPMDL0020000001	Stow	OH	44224	8/20/2015	I asked dr to tell me about the patients he's placed on Butrans recently? Dr said that he thinks he has three or four now and all are doing very well. He said some have had issues with insurance but they got worked out. Reviewed Helen profile and asked for more business. Discussed hysingla attributes and appropriate patients. Reviewed copy cards and trial offers.
PPLPMDL0020000001	Stow	OH	44224	8/20/2015	Spike with pharmacist holly and reviewed product attributes, dosing and appropriate patients. I asked her if she has had a hysingla script yet and she said no however she did get a Butrans recently from Dr Ali as a new patient. Holly said that she still has 20 and 40mg hysingla on the shelf and is expecting to see it soon.
PPLPMDL0020000001	Beachwood	OH	44122	8/20/2015	Discussed patient taking total daily dose of 20 mg or more of Norco as appropriate patient for hysingla. Doctor said the only thing holding him back from writing is the coverage. He will make an effort to find appropriate express scripts patients so he can gain more clinical experience with hysingla. He likes butrans as an add on to some patients rather than more pills.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/20/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/20/2015	Dr asked me to show him in the FPI where it states that he can use it opioids with Butrans. I asked him why and he said that he was having a discussion with another physician and the other physician said it opioids cannot be used with Butrans. I read him section 2.2 in the FPI and then told him to refer to BUP 3015 that he already has. I showed him from the MVA about how Butrans is a partial Mu agonist. Dr said its what he thought and was glad I knew my stuff!
PPLPMDL0020000001	Akron	OH	44333	8/20/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/20/2015	Spoke with Shelby the pharmacist about Butrans and hysingla. Reviewed attributes, dosing and conversions for each and then discussed copy cards. Shelby said she doesn't think she has seen hysingla but does fill a good amount of Butrans.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/20/2015	No new information learned on this call.

PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/20/2015	Lunch appointment. Discussed all product attributes, dosing and conversions as well as patient profiles. Office is instituting a opioid policy and will have pain contracts, UDS and other ways to regulate what they are providing patients in pain. Dr said he wanted more copy cards and continues to ask patients about the Butrans option. Reviewed hysingla attributes and to just give it a shot to learn how it works clinically.
PPLPMDL0020000001	Stow	OH	44224	8/20/2015	I asked dr how she knows when a patient is in pain around the clock? Dr said it's based on a lot of factors but typically it's how often they take pain medicine and usually more than three a day. I told her when patients reach that level and they either want more, a refill or both to use ER opioids like OxyContin. Butrans or hysingla then discussed each.
PPLPMDL0020000001	Beachwood	OH	44122	8/20/2015	Quick call where I tried to discuss patient taking total daily dose of 20 mg or more of IR. some of those patients are in around the clock pain and may be appropriate for ER med like hysingla or OxyContin. She did stop to think for a second. But asked that I come back a different day to discuss.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/20/2015	Spoke with Rafferty and Higley at the same time about Butrans and hysingla. Discussed how to identify a patient as a candidate for an ER opioid and asked them both to use my products as viable options when they know a patient is on an opioid around the clock. Reviewed the product attributes, dosing, and conversions. Dr said that he rarely writes ER opioids because usually when he tells a patient he won't give anymore opioids he doesn't see them again. I told dr if he offers an ER opioid it may be more appropriate and he may be able to keep a patient. Dr asked about the copy card and trial offer which we discussed. Left him with hysingla slim Jim and
PPLPMDL0020000001	Chagrin Falls	OH	44022	8/20/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	8/20/2015	No new information learned on this call.
PPLPMDL0020000001	Tallmadge	OH	44278	8/20/2015	No new information learned on this call.
PPLPMDL0020000001	Stow	OH	44224	8/20/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	8/20/2015	No new information learned on this call.
PPLPMDL0020000001	Beachwood	OH	44122	8/20/2015	Doc said that he is gaining experience with hysingla and is seeing good results. Discussed that it is nice to have ER choices like OxyContin and hysingla. Reviewed the savings program, free month and monthly savings for patients. He did say he forgot to give it the last time. Reviewed formulary coverage and which patient types would be appropriate. Reminded him that butrans is appropriate as patients first opioid and is c3 and a once weekly
PPLPMDL0020000001	Beachwood	OH	44122	8/20/2015	He said a patient asked him is their is a longer lasting Vicodin. He was more than happy to prescribe hysingla. Asked if he hears that often? He said yes. We discussed how a norco patient taking 20 mg or more total daily dose might be appropriate for hysingla if they are in around the clock pain and he said he believes in long acting meds like hysingla and OxyContin for pain. Starting to talk about where he uses butrans but was called away.
PPLPMDL0020000001	Beachwood	OH	44122	8/20/2015	Roberta discussed a patient she has taking 6x10 mg norco patient. She is thinking of hysingla for this patient but the patient likes to be in control of their pain. Moshe wonders what dose I recommended. Reviewed conversion and discussed different dosing scenarios that would make sense. She said that patients didn't believe the relief lasted 24 hours. Reviewed pk chart and asked if she would share this with her patients to show plasma levels. Dr walked in and said patients should be told what to do. Mir they think this is appropriate the patient has no choice but to cooperate. She also likes butrans before or after tramadol, older patients. Moshe
PPLPMDL0020000001	Stow	OH	44224	8/21/2015	Lunch appointment. Discussed all product attributes, dosing and conversions with the portfolio piece. Discussed product profiles and discussed appropriate patient candidates and asked for the business. Dr Russ said he refilled a Butrans yesterday for a patient who has been on it for about 6 months now and is doing very well. I asked dr to please identify new patients especially those on tramadol around the clock.
PPLPMDL0020000001	Woodmere	OH	44122	8/21/2015	No new information learned on this call.
PPLPMDL0020000001	Green	OH	44232	8/21/2015	Spoke with Matt the pharmacist about Butrans and hysingla. Discussed attributes, dosing and conversions. Matt said they dispense 1-2 Butrans a week and have doses in stock. Discussed hysingla and Matt said that he hasn't filled it yet but has three doses in stock.
PPLPMDL0020000001	Uniontown	OH	44312	8/21/2015	No new information learned on this call.
PPLPMDL0020000001	Uniontown	OH	44685	8/21/2015	No new information learned on this call.
PPLPMDL0020000001	Independence	OH	44131	8/21/2015	Using portfolio piece reviewed options for patients in around the clock pain. Discussed butrans as patients first opioid. He likes that there are options. Gave him one savings card for hysingla tome for an express scripts
PPLPMDL0020000001	Uniontown	OH	44685	8/21/2015	Discussed all products to Dennis the pharmacist along with their attributes and copy cards. Dennis said he dispensed a new Butrans this morning and knows that Kim has done a hysingla recently and could not remember who wrote them. I explained the trial offers for both products.
PPLPMDL0020000001	Hudson	OH	44236	8/21/2015	Lunch appointment. Discussed all product attributes, dosing and the product portfolio piece and explained appropriate candidates. I asked dr Seiple when the last time he wrote Butrans or hysingla and he said he said he wrote it last week for a patient asking for more nor I dr said he out the patient on a 5mg patch and the patient is doing well after calling in. I asked him to consider hysingla for that patient on Norco around the clock and dr said he would rather write the schedule 3 product. I asked for him to know when to identify a patient as a candidate for one of my ER opioids.
PPLPMDL0020000001	Beachwood	OH	44122	8/21/2015	Doc has tried to write hysingla and patients say it is too expensive. He does have patients taking total daily dose of norco greater than 20 mg that are appropriate for hysingla. Reviewed formulary quickly. Discussed butrans as patients first opioid.
PPLPMDL0020000001	Hudson	OH	44236	8/21/2015	Lunch appointment. Discussed all product attributes, dosing and the product portfolio piece and explained appropriate candidates for each. Dr Tosino said that he has a few patients on Butrans who really like it and will try to remember using it for the tramadol around the clock patients. Dr said he won't use OxyContin and probably won't use hysingla but said that he will look for those around the clock norco patients.
PPLPMDL0020000001	Beachwood	OH	44122	8/21/2015	No new information learned on this call.
PPLPMDL0020000001	Bedford	OH	44146	8/21/2015	Quickly reviewed two ER choices for patients in around the clock pain. Hysingla and OxyContin with ADP, once daily hysingla and q12 OxyContin, both without Tylenol may be appropriate for some of those patients.
PPLPMDL0020000001	Akron	OH	44313	8/24/2015	No new information learned on this call.
PPLPMDL0020000001	akron	OH	44333	8/24/2015	Discussed hysingla patient type on Norco around the clock. I showed him the conversions and told him to gain some c,initial experience. Discussed his plans for writing as express scripts and cvs Caremark. Discussed Butrans for the tramadol patient and reminded about attributes and managed care. Dr told me about Rhonda Holb as his Nurse at Manor Care and he's been talking to her about Butrans.
PPLPMDL0020000001	Akron	OH	44310	8/24/2015	OxyContin-dr said he continues to prescribe it slowly-I thanked him for giving it another chance; butrans-tramadol caresource patient reminder
PPLPMDL0020000001	Akron	OH	44303	8/24/2015	Spoke to Rod about Butrans patient types and reviewed trial offer. I asked rod about his Butrans patients and he said he has a few but one person had an issue with their insurance and hasn't seen the others for refills.
PPLPMDL0020000001	Akron	OH	44333	8/24/2015	Reviewed the hysingla trial card and where to use win 1:1 Norco conversion. Rod said it sounds good and still has the 20mg on the shelf.
PPLPMDL0020000001	Akron	OH	44333	8/24/2015	No new information learned on this call.
PPLPMDL0020000001	Uniontown	OH	44685	8/24/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	8/24/2015	Good discussion with Elise about her continued use of Butrans and told her I noticed she hasn't been using hysingla. Elise said that she hasn't because she would rather go to Butrans. Elise said that she feels that if a patient is taking 4-10mg Norco a day that she would rather just go to oxycodone if they need more. I asked why that is and she said if they are doing well on hydrocodone she would just keep them on the if opioid. Elise said it's too hard a sell to go to a QD opioid. I told her we will discuss later in the week.
PPLPMDL0020000001	Fairlawn	OH	44333	8/24/2015	Talked with Sue about Hysingla trial offer being extended and she said that they filled 2 last week. Both prescribers were not in my territory. One in Kathys.
PPLPMDL0020000001	Akron	OH	44333	8/24/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44312	8/24/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44312	8/24/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	8/24/2015	Discussed his use for Butrans and dr said he continues to write it because it's too important part of his therapy to not write it. Dr said that he will continue to find patients for it and then discussed the trial cards. Discussed hysingla and asked him to continue writing and asked him if he has had any issues from a managed care or trial offer dispensing? Dr said not one problem and will continue to write.
PPLPMDL0020000001	Northfield	OH	44067	8/25/2015	Using portfolio piece discussed specific patient type for each and why ER with ADP are more important now more than ever in her practice. Discussed the role of insurance and responsible prescribing. She finds patients for OxyContin, but will find appropriate patient for hysingla also. It will be easier once formulary coverage is better.
PPLPMDL0020000001	Sagamore Hills	OH	44067	8/25/2015	He is very frustrated with insurance companies dictating what doctors can prescribe. He has to get pa's for meds patient has been on for years. He knows it isn't exclusive to my meds. He tried to write hysingla but he thinks it was probably medical mutual. He has patients appropriate for it. Reviewed formualry and savings plan. He will try Again. He knows that OxyContin coverage is better but likes the idea of once daily dosing so will keep an eye out for appropriate patient with express scripts coverage.
PPLPMDL0020000001	Parma	OH	44129	8/25/2015	No new information learned on this call.
PPLPMDL0020000001	Cleveland	OH	44130	8/25/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44312	8/25/2015	Quick discussion with lead teach Cindy about all products reviewing attributes, dosing, conversions. She said she would relay to pharmacist
PPLPMDL0020000001	Uniontown	OH	44312	8/25/2015	No new information learned on this call.
PPLPMDL0020000001	Sagamore Hills	OH	44067	8/25/2015	Doctor doesn't really treat pain, however she did prescribe for OxyContin for a patient recently. Reviewed patient types appropriate for ER meds and why in today's climate, ER meds with AdP might be appropriate for many patients in around the clock pain taking total daily dose of 20 mg or more. She agreed.
PPLPMDL0020000001	Parma	OH	44129	8/25/2015	Used Pdm piece to show her importance and role of pharmacy insurance with her patients. Moshe is trying to remember to ask. This piece helped her understand more. She said that she really wishes hysingla coverage would be better, it hasn't been easy to prescribe this medicine for her patients. I thanked her for continuing to try. Reviewed formulary again. She still thinks butrans is a good option, maybe even for some patients along
PPLPMDL0020000001	Parma	OH	44129	8/25/2015	Butrans-Myra said Kathy just in so I told her I'd give her a break; OxyContin-n/a
PPLPMDL0020000001	Bedford	OH	44146	8/25/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44312	8/25/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	8/25/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44319	8/25/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	8/25/2015	He said that he wrote a hysingla and it was rejected at the pharmacy. He thinks it was medical mutual, we reviewed the list and I showed him where in his office the formulary grid is posted for easy reference. He said he will write for express scripts next time. Asked if he is thinking of butrans as patients first opioid? He said, not rally, and had to leave
PPLPMDL0020000001	Highland Heights	OH	44143	8/25/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	8/25/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44312	8/25/2015	Used e portfolio piece to explain where and when he can use OxyContin, hysingla be Butrans. Dr said that he now has three patient on Butrans and it seems to be working very well and the patients like it. I asked him based on that success would he continue to identify additional patients appropriate for Butrans? Dr said he will do his best and to remind him of it when I see him.
PPLPMDL0020000001	Parma	OH	44129	8/25/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44312	8/25/2015	Discussed the criteria he needs use for when he would prescribe an ER opioid. I asked dr to focus on the patient like Helen on tramadol around the clock as is asking for more or a refill. Discussed trial offer and copy card along with insurance. Told him to keep hysingla on his radar when he has a Norco patient around the clock. Reviewed trial offer and insurance.
PPLPMDL0020000001	Waterford	OH	45786	8/25/2015	I-dosing and titration for Butrans. Managed-care for OxyContin. Dosing, titration and managed care for Hysingla W-concerned about managed-care

PLPMDL0020000001	Waterford	OH	45786	8/25/2015	I-dosing and titration for Butrans. Managed-care for OxyContin. Dosing, titration and managed care for Hysingla W-will look over the information
PLPMDL0020000001	Waterford	OH	45786	8/25/2015	I-dosing and titration for Butrans. Managed-care for OxyContin. Dosing, titration and managed care for Hysingla W-will look over the information
PLPMDL0020000001	Independence	OH	44131	8/26/2015	No new information learned on this call.
PLPMDL0020000001	Parma	OH	44129	8/26/2015	Using portfolio. He will continue to prescribe butrans but hasn't had luck with hysingla. Reviewed patient type quickly and savings card and formulary information. He will try to find express scripts patients for hysingla
PLPMDL0020000001	Parma	OH	44129	8/26/2015	Linda said doc is in full support of hysingla for appropriate patients. They somfar have more success with newer patients. Patients who are doing well with current regimen are not who they are looking to switch to hysingla. Butrans is a good option that they seem to be able to get insurance to cover. Reviewed formulary and prior Authorizations .
PLPMDL0020000001	Parma	OH	44129	8/26/2015	She said that she has been waiting for a product like hysingla, it makes sense for patients in around the clock pain. She has mentioned it to many patients, a few are willing but insurance is prohibiting them for getting it. We discussed appropriate patient type for hysingla and butrans. She has identified patients in her practice but thinks that more will come from new patients to their practice who can take it or leave it. She still thinks patients don't like patches, but has found patients that it works very well for.
PLPMDL0020000001	Parma	OH	44129	8/26/2015	No new information learned on this call.
PLPMDL0020000001	Akron	OH	44320	8/26/2015	I told dr that he needs to start writing Butrans and asked him what he's waiting for? Dr said he will write it. I showed him the Helen profile and showed him the conversions from tramadol and Norco. I told him I know he has the patients for it and to just start writing it. I told him to start with his care source and Medicare patients and reviewed the caresource criteria.
PLPMDL0020000001	Akron	OH	44333	8/26/2015	Told Dail that she can continue to use Butrans and to think about it for her BWC and Caresource patients and reviewed the coverages. She said that's a great reminder and she likes the product. Reviewed hysingla and explained attributes, dosing, and conversions.
PLPMDL0020000001	Akron	OH	44310	8/26/2015	No new information learned on this call.
PLPMDL0020000001	Akron	OH	44320	8/26/2015	No new information learned on this call.
PLPMDL0020000001	Stow	OH	44224	8/26/2015	No new information learned on this call.
PLPMDL0020000001	Parma	OH	44129	8/26/2015	He said it is too expensive and he can't remember where to write hysingla. I took a magnet and put a formulary grid on his file cabinet. He said he can see it there but not sure that it will stay there. I'm asked for one patient that would be appropriate for ER hydrocodone without Tylenol and ADP. He has choices...OxyContin and hysingla.
PLPMDL0020000001	Cuyahoga Falls	OH	44223	8/26/2015	No new information learned on this call.
PLPMDL0020000001	Akron	OH	44320	8/26/2015	No new information learned on this call.
PLPMDL0020000001	Cleveland	OH	44130	8/26/2015	No new information learned on this call.
PLPMDL0020000001	Bedford	OH	44146	8/26/2015	No new information learned on this call.
PLPMDL0020000001	Akron	OH	44320	8/26/2015	Spoke wot Helen the pharmacist and reviewed Butrans and hysingla attributes, dosing, conversions and copy cards. I asked her when she has dispensed either product last? She said she has the 5 and 10mcg on the shelf which she ordered on 8/20. She has dispensed it just within the last week. Helen said she also filled a hysingla however the patient never refilled because she was kicked out of the practice.
PLPMDL0020000001	Cuyahoga Falls	OH	44223	8/26/2015	No new information learned on this call.
PLPMDL0020000001	Stow	OH	44224	8/26/2015	No new information learned on this call.
PLPMDL0020000001	Fairlwan	OH	44333	8/26/2015	I told dr that Butrans is a product that he can use for patients on it opioids like tramadol and Norco around the clock who have BWC or caresource. Showed him the conversion guide and reviewed the caresource criteria. Told him to gain some clinical experience with hysingla and reviewed the initiation and titration guide as well as the copy cards.
PLPMDL0020000001	Munroe Falls	OH	44262	8/26/2015	Told dr two reasons to write OxyContin are that she can use a q12 oxycodone that is single entity when a patient is taking more than 3 oxycodone it a day and that its a abuse deterrent. Told her that she needs to write hysingla because it's also a single entity opioid with abuse deterrent. Dr said she is very glad to hear the reminders about why she needs to write.
PLPMDL0020000001	Strongsville	OH	44136	8/27/2015	No new information learned on this call.
PLPMDL0020000001	Stow	OH	44224	8/27/2015	Spoke with Jamie and a new tech about Butrans and hysingla. Jamie said she filled a 30mg last week for Dr Ali as a new patient who also got the first month free. I reviewed the product information with the new tech and explained the copy and trial card information. Jamie said she continues to fill Butrans and most are from pain management and has all 5 doses in stock along with copy cards.
PLPMDL0020000001	Cleveland	OH	44130	8/27/2015	As of now he is not pursuing pain management, but he knows he sees a place for ER meds in his practice. He is keeping hysingla in mind because of the dosing and ADP and he does have a few patients in hysingla.
PLPMDL0020000001	Cuyahoga Falls	OH	44223	8/27/2015	Spoke with Bob a new pharmacist about all products. Reviewed attributes,dosing and conversions. Explained the hysingla trial offer and bob said he's been a couple of programs for hysingla in Cleveland so he's happy to know about the programs.
PLPMDL0020000001	Bedford	OH	44146	8/27/2015	No new information learned on this call.
PLPMDL0020000001	Cleveland	OH	44130	8/27/2015	No new information learned on this call.
PLPMDL0020000001	Cleveland	OH	44130	8/27/2015	Let him know butrans is appropriate as patients first opioid, before a norco or Percocet using Helen profile. He can treat for pain with butrans and then refer to pain management. Reviewed formulary and if patients prefer pills, they can supplement. Using portfolio piece quickly reviewed options for patients on a round the clock pain.
PLPMDL0020000001	Cuyahoga Falls	OH	44223	8/27/2015	No new information learned on this call.
PLPMDL0020000001	Tallmadge	OH	44278	8/27/2015	No new information learned on this call.
PLPMDL0020000001	Cleveland	OH	44130	8/27/2015	No new information learned on this call.
PLPMDL0020000001	Beachwood	OH	44122	8/27/2015	No new information learned on this call.
PLPMDL0020000001	Beachwood	OH	44122	8/27/2015	No new information learned on this call.
PLPMDL0020000001	Akron	OH	44333	8/27/2015	Quick hello at counter and she said she's seen the hysingla information I've left her. I told her that's great and then gave her a few attributes and recieved dosing and conversions. I asked her if she thinks there's a place for it? She said there is but its more of a matter of convincing patients to only take it once a day and they don't want that. I told her it's going to take some education for sure and I know she can do it. I asked her how her Butrans patients are doing and she said very well and hasn't had any issues with coverage.
PLPMDL0020000001	Beachwood	OH	44122	8/27/2015	No new information learned on this call.
PLPMDL0020000001	Akron	OH	44333	8/27/2015	No new information learned on this call.
PLPMDL0020000001	Beachwood	OH	44122	8/27/2015	No new information learned on this call.
PLPMDL0020000001	Tallmadge	OH	44278	8/27/2015	Told dr that instead of refilling or titrating Norco for a patient taking it around the clock to use hysingla which has abuse deterrent properties and is single entity and q24. Dr said he agrees it's a good option but is concerned about insurance. I told him to focus on commercial coverage like ESI and Caremark. Left him with Butrans information.
PLPMDL0020000001	Tallmadge	OH	44278	8/27/2015	Have dr the initiation and titration guides for Butrans and hysingla and told him they are two different products for two different patients. Explained Butrans for his patients on tramadol around the clock and hysingla for his Norco patients around the clock. Discussed insurance options for each and trial cards. I told dr to get back into prescribing ER opioids instead of refilling it opioids.
PLPMDL0020000001	Cleveland	OH	44130	8/27/2015	Doc knows patient to look for hysingla. He is thinking that many of them might be appropriate for hysingla. He is waiting for coverage to become less of a concern. Reviewed formulary and savings program. He said most patients aren't that interested in a patch but he is well aware of butrans.
PLPMDL0020000001	Independence	OH	44131	8/27/2015	He believes in ER dosing and ADP meds like OxyContin and hysingls. He has written for hysingla with too much trouble from patients. It is impossible for him to find only express scripts patients. Reviewed formulary and asked him to call me and I could look up coverage.
PLPMDL0020000001	Independence	OH	44131	8/27/2015	Doc said he was planning to write hysingla because it is once per day and likes that dosing for his patients in pain, the formulary coverage makes it difficult for him and the patients. He knows that I have told him which plans to choose, but he has too much to remember and where to write hysingla doesn't stick in his head. I asked him if there is somewhere in his office he could out the formulary grid? OxyContin is q12 with the ADP?...
PLPMDL0020000001	Cuyahoga Falls	OH	44223	8/27/2015	Quick hello and told her to please continue writing Butrans and if there is anything I can help with? Denise said the copy cards have been stocked and thanked me for addressing managed care issues with Tera. Asked for her to please keep hysingla in mind and she said she should be getting her da soon and will use it.
PLPMDL0020000001	Hudson	OH	44236	8/28/2015	No new information learned on this call.
PLPMDL0020000001	Beachwood	OH	44122	8/28/2015	No new information learned on this call.
PLPMDL0020000001	Akron	OH	44319	8/28/2015	No new information learned on this call.
PLPMDL0020000001	Twinsburg	OH	44087	8/28/2015	Using portfolio piece reviewed products and specific patient types. Doc said he wrote 2 scripts of hysingla that were rejected at the pharmacy. I asked him to call me if that happens again. Reviewed where he should write for the. He said it is too difficult to know their pharmacy benefits so he just writes what he wants them to have. He committed to trying again. That's the reason he stopped writing for butrans...because of insurance push back.
PLPMDL0020000001	Akron	OH	44319	8/28/2015	Reviewed coverage for all products and savings card info, m
PLPMDL0020000001	Beachwood	OH	44122	8/28/2015	No new information learned on this call.
PLPMDL0020000001	Akron	OH	44319	8/28/2015	Handed the new Hysingla slim Jim to dr through the window and told him that Hysingla is the option he has when he sees a patient on Norco around the clock and an opioid for an extended period.
PLPMDL0020000001	Beachwood	OH	44122	8/28/2015	Reviewed patient type using portfolio. She asked why hysingla instead of zohydro. I'm gave her reasons to choose hysingla, reviewed savings plan, formerly, ADP etc. she thinks hysingla could be huge if everyone understood it. She told me to call Doris and set up a meeting at w150th on a Thursday to discuss with group. She thinks there would be benefit for them to hear about all three in a group setting. She thinks at this point that I should conduct meeting rather than outside speaker.
PLPMDL0020000001	Akron	OH	44313	8/28/2015	Conversation about dr Bashor telling Rhonda that I'm selling Butrans and Hysingla in the territory. Rhonda said that she is using Butrans and Wants to know more about Hysingla. Rhonda asked me to visit on a Wednesday for more time.
PLPMDL0020000001	Akron	OH	44333	8/28/2015	I asked dr what his IR thresholds are for prescribing Butrans and hysingla? Dr said his typical limit for Butrans is around 30mg and on occasion he has gone to 40mg of hydrocodone. Dr said that hysingla typically is 40mg and over along with the possibility of OxyContin. I asked him for continued support of Hysingla and asked for expanded use of Butrans.
PLPMDL0020000001	akron	OH	44333	8/31/2015	Told dr that I saw Rhonda Holb and that I'm going to see her this week to further discuss Butrans and introduce hysingla. Told dr that in the mealtime he can gain some clinical experience with hysingla and discussed the appropriate patients and reviewed the trial card information.
PLPMDL0020000001	Parma	OH	44134	8/31/2015	Doctor is looking for patient for hysingla taking a total daily dose of 20 or more and wants to change their dosing schedule. He has found some workers comp patients appropriate for hysingla but they were not approved.
PLPMDL0020000001	Uniontown	OH	44685	8/31/2015	Discussed patient type and formulary. He continues to find appropriate patients for butrans and has success with the patch.
PLPMDL0020000001					No new information learned on this call.

PPLPMDL0020000001	Cleveland	OH	44130	8/31/2015	No new information learned on this call.
PPLPMDL0020000001	Fairlawn	OH	44333	8/31/2015	No new information learned on this call.
PPLPMDL0020000001	Middleburg Heights	OH	44130	8/31/2015	No new information learned on this call.
PPLPMDL0020000001	Fairlawn	OH	44333	8/31/2015	Quick hello at counter and asked him he thinks refilling an it opioid multiple times is different to him and his patient compared to writing an ER opioid? Dr said there are any differences and said he understands he is keeping some patients on it opioids due to cost and who have tried ER opioids and wouldn't take them. I told him he needs to set the expectations for the patients therapy early and stick to it. Reviewed OxyContin and hysingla attributes with copy cards. Asked him to write hysingla for that Norco patient around the clock.
PPLPMDL0020000001	Parma	OH	44134	8/31/2015	No new information learned on this call.
PPLPMDL0020000001	Fairlawn	OH	44333	8/31/2015	Sue told me that they filled a Hysingla last week for Dr Ali. She said it was a 30mg dose and it was a Cigna patient. Reminded about the trial offer and Sue said the patient got first month at \$0
PPLPMDL0020000001	Middleburg Hts	OH	44130	8/31/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44313	8/31/2015	Reviewed both Butrans and Hysingla attributes and dosing along with the trial and copy offers for each.
PPLPMDL0020000001	Akron	OH	44333	8/31/2015	No new information learned on this call.
PPLPMDL0020000001	Middleburg Heights	OH	44130	8/31/2015	No new information learned on this call.
PPLPMDL0020000001	Middleburg Hts.	OH	44130	8/31/2015	No new information learned on this call.
PPLPMDL0020000001	Middleburg Heights	OH	44130	8/31/2015	Quick call asking doc if he has patient in around the clock pain, taking a total daily dose of 20 mg or more of norco who might be appropriate for once daily hysingla ER. He asked if that was the starting dose. I said yes and had enough time to tell him where to write it. Told him that OxyContin is q12 and and another rER option for his patients which both include Adp....
PPLPMDL0020000001	Middleburg Heights	OH	44130	8/31/2015	Asked when he believe it is appropriate to choose ER meds like OxyContin and hysingla. He said ER meds are reserved for chronic patient, older patient, cancer patients to name a few. Using portfolio piece quickly review positioning and formulary. Had to leave him the rest of the information.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	9/1/2015	Spoke to pharmacist Michele about Butrans hysingla ER attributes, dosing and conversions. Michele said she doesn't know about hysingla. Reviewed the product and appropriate patients and trial offer with copy card.
PPLPMDL0020000001	Akron	OH	44310	9/1/2015	No new information learned on this call.
PPLPMDL0020000001	Bedford	OH	44146	9/1/2015	asked for patient in around the clock pain who is taking 20 mg or more of norco per day as a possible patient for hysingla. Discussed formulary opportunity with hysingla and caresource. Asked what luck he has had with OxyContin.....
PPLPMDL0020000001	Parma	OH	44134	9/1/2015	Using portfolio piece discussed pain patients and product positioning. He typically uses ER meds in the nursing home and will prescribe hysingla Because he likes that he has more ER options. He typically writes butrans for med d patient
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	9/1/2015	Good conversation w/ dr and Krista the office manager about OxyContin dosing, conversions and abuse deterrent technology. Discussed with Krista the prior authorizations for OxyContin and she said she just did one yesterday for a patient with caresource and it was approved. Discussed insurance coverage for both products and copy cards.
PPLPMDL0020000001	Akron	OH	44320	9/2/2015	Told dr that he needs to start writing Butrans for those patients on IR opioids around the clock. Discussed appropriate patients and how to initiate and titrate along with proper rotation of the product.
PPLPMDL0020000001	Akron	OH	44320	9/2/2015	No new information learned on this call.
PPLPMDL0020000001	Chagrin Falls	OH	44022	9/2/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44320	9/2/2015	No new information learned on this call.
PPLPMDL0020000001	Uniontown	OH	44685	9/2/2015	No new information learned on this call.
PPLPMDL0020000001	Solon	OH	44139	9/2/2015	No new information learned on this call.
PPLPMDL0020000001	Bedford	OH	44146	9/2/2015	Discussed strategies to get branded ER meds approved. Talked with doc and Marian on what they do to get meds approved in this landscape.
PPLPMDL0020000001	Beachwood	OH	44122	9/2/2015	No new information learned on this call.
PPLPMDL0020000001	Independence	OH	44131	9/2/2015	Gave him one saving ps card and asked for one patient who would be appropriate for hysingla with commercial insurance. Gave formulary grid. Asked if he would rather have butrans coupon and discussed coverage for butrans. He said hysingla.
PPLPMDL0020000001	Independence	OH	44131	9/2/2015	Using portfolio piece discussed product positioning for patients in around the clock pain. Asked him to find a patient taking total daily dose of 20mg or more of IR hydrocodone or oxycodone and consider once daily meds ER meds like hysingla. Reviewed dosing and formulary. Butrans is only c3 opioid on the market And is appropriate as patients first opioid.
PPLPMDL0020000001	Beachwood	OH	44122	9/2/2015	Quick call with update in formulary coverage for hysingla with caresource. Reminded her to concierge butrans after a cox 2
PPLPMDL0020000001	Beachwood	OH	44122	9/2/2015	Quick call with update on formulary coverage with caresource.
PPLPMDL0020000001	Fairlawn	OH	44333	9/2/2015	Spoke with Gary about Hysingla and Butrans. Discussed the attributes, dosing and titration and asked him if he's dispensed wither recently? Gary said he thinks they have a few patients on Butrans and has not dispensed hysingla. Told him about copy and trial offers.
PPLPMDL0020000001	Akron	OH	44312	9/2/2015	Told dr that he needs to identify new patients for Butrans and discussed the Helen profile. Discussed Butrans and hysingla attributes, doing and titration.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	9/3/2015	Conducted in office program for hysingla.
PPLPMDL0020000001	Stow	OH	44224	9/3/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44224	9/3/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	9/3/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	9/3/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	9/3/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	9/3/2015	No new information learned on this call.
PPLPMDL0020000001	Stow	OH	44224	9/3/2015	Spoke with the tech this morning about Butrans and hysingla. Discussed attributes, dosing and titrations along with appropriate candidates. She said that she didn't know about Hysingla and it makes sense. Reviewed the trial card and copy card.
PPLPMDL0020000001	Uniontown	OH	44312	9/3/2015	In office speaker program for Hysingla with Dr Syed Ali.
PPLPMDL0020000001	Parma	OH	44129	9/3/2015	Quickly handed her hysingla information and said that if she has patients taking a total daily dose of norco of 20mg or more and are in around the clock pain, they might be appropriate for hysingla ER, once daily with abuse deterrent properties similar to OxyContin when it was reformulated a few years ago, she said she would review the information
PPLPMDL0020000001	Akron	OH	44312	9/3/2015	In office speaker program for Hysingla with Dr Syed Ali.
PPLPMDL0020000001	Akron	OH	44312	9/3/2015	In office speaker program for Hysingla with Dr Syed Ali.
PPLPMDL0020000001	Parma	OH	44129	9/4/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	9/4/2015	Talked to him quickly about hysingla patient and left him one savings card to find an appropriate commercial patient preferably with express scripts. OxyContin is q12 and hysingla q24 w ADP. Will follow up next Friday to follow up on hysingla patient. He is liking the option of butrans for his older patients.
PPLPMDL0020000001	Parma	OH	44129	9/4/2015	Talked to him quickly about hysingla patient and left him one savings card to find an appropriate commercial patient preferably with express scripts. OxyContin is q12 and hysingla q24 w ADP. Will follow up next Friday to follow up on hysingla patient.
PPLPMDL0020000001	Green	OH	44232	9/4/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	9/4/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44312	9/4/2015	Told dr that in order to continue using Butrans he needs to focus on the things that have made previous patients candidates and simulate those criteria. Reviewed Helen profile and then told him about hysingla attributes and 7 doses. Dr said he will keep all that in mind.
PPLPMDL0020000001	Uniontown	OH	44685	9/4/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44312	9/4/2015	I expressed to dr how hysingla is a viable option for his patients currently on Norco and tolerating it but are in pain around the clock. Reviewed the trial cards and insurance plans covering it. Dr said he hasn't used but it makes sense. Dr did say he's recently started a couple of new patients in Butrans from tramadol. Dr said the patients are doing great on it. I asked for continued success with Butrans.
PPLPMDL0020000001	Akron	OH	44305	9/4/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	9/4/2015	Updated doc on latest formulary information for Hysingla. Asked him to provide savings cards to his patients for butrans as well as hysingla. Asked for one hysingla patient
PPLPMDL0020000001	Uniontown	OH	44685	9/4/2015	Spoke with Heather about Butrans and hysingla attributes, dosing and titration. She said she knows both and only has a few patients on Butrans and none on hysingla. Reviewed trial offers and copy cards for both products.
PPLPMDL0020000001	Akron	OH	44312	9/4/2015	I asked for more prescribing of the products where appropriate and discussed who is appropriate for OxyContin, hysingla be Butrans. I told dr that the best way to know about a product is to use it and he's used Butrans. I asked dr to use the success he's had recently with Butrans as incentive to use it more. Dr agreed that he has had good experience and will try. I asked for that first experience with hysingla and discussed attributes and
PPLPMDL0020000001	Parma	OH	44129	9/4/2015	Talked to him quickly about hysingla patient and left him one savings card to find an appropriate commercial patient preferably with express scripts. OxyContin is q12 and hysingla q24 w ADP. Will follow up next Friday to follow up on hysingla patient.
PPLPMDL0020000001	Cleveland	OH	44130	9/4/2015	Talked to him quickly about hysingla patient and left him one savings card to find an appropriate commercial patient preferably with express scripts. OxyContin is q12 and hysingla q24 w ADP. Will follow up next Friday to follow up on hysingla patient.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	9/8/2015	Spoke with Kyle about Butrans and hysingla. Kyle said he has filled one Rx for hysingla 20mg and they got the first month free. Kyle said the patient was Dr Ali's. Reviewed product attributes, dosing and conversions.
PPLPMDL0020000001	Parma	OH	44129	9/8/2015	No new information learned on this call.
PPLPMDL0020000001	N Royalton	OH	44133	9/8/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	9/8/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	9/8/2015	No new information learned on this call.
PPLPMDL0020000001	Stow	OH	44224	9/8/2015	No new information learned on this call.
PPLPMDL0020000001	Middleburg Heights	OH	44130	9/8/2015	No new information learned on this call.

PPLPMDL0020000001	Parma	OH	44129	9/8/2015	Doc said that when she has found the right patient the coverage wasn't where I told her to write it. Reviewed all the plans where it is successful being covered again so that she can have some confidence when writing hysingla. Asked for one med-d patient for butrans.
	Akron	OH	44310	9/8/2015	Lunch appointment. Dr said he placed a patient on OxyContin last week for a patient taking to much Percocet and wanted more. Dr said he put him on 30mg OxyContin and followed up and the patient said he is extremely happy. Discussed Butrans and hysingla for his Norco patients and dr said that 30mg and under he typically goes to Butrans and over 30mg for hysingla. I told him that seems like a reasonable threshold to have. Discussed titration of all products and use of it opioids for breakthrough and dr said a little more than 50% of his patients are on something for breakthrough.
PPLPMDL0020000001	Akron	OH	44305	9/8/2015	I told dr that I know he currently has patients on Norco that are taking it around the clock. I asked dr if he would identify just one patient who he has refilled Norco for at least three times and tolerates hydrocodone are prescribe hysingla for them while I showed him the initiation and titration guide? Dr looked at it and said he will. I told him it must be someone with commercial insurance and then reviewed the plans. I then askd hi to keep his Butrans numbers coming and to look for patients on tramadol around the clock.
PPLPMDL0020000001	Parma	OH	44129	9/8/2015	Was following up on a patient situation she called about. She is finding lots of patients for hysingla but running into trouble with callbacks. Discovered in this case that the patient didn't use his insurance card at the pharmacy. She said she doesn't have this difficulty writing butrans.
PPLPMDL0020000001	Akron	OH	44320	9/9/2015	No new information learned on this call.
PPLPMDL0020000001	Bedford	OH	44146	9/9/2015	Using Scott profile, Discussed the patient type for butrans and when he uses it. He said he is putting more and more patients on hysingla. Coverage is better than it was, they are getting more approved. He is not giving patients a choice. He is telling them how he is changing them.
PPLPMDL0020000001	Shaker Heights	OH	44122	9/9/2015	No new information learned on this call.
PPLPMDL0020000001	Independence	OH	44131	9/9/2015	Handed him savings card again for for hysingla. He said he has thought about it. Asked if I need to remind him of buTrans or will he find appropriate hysingla patient....
PPLPMDL0020000001	Akron	OH	44333	9/9/2015	Told dr that he needs to get back into writing Butrans and to remember BWC and Caresource as opportunities for Butrans. Explained the caresource pa and the opportunities for identifying patient types. Dr said he will start to look again and said he forgot about BWC. I told dr I've told him multiple times about BWC and Caresource and for Marsha to make something to out in the exam rooms to remind him. Left him with the hysingla initiation
PPLPMDL0020000001	Independence	OH	44131	9/9/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	9/9/2015	No new information learned on this call.
PPLPMDL0020000001	Beachwood	OH	44122	9/9/2015	Used portfolio piece. Discussed oxycotin patient type and hysingla patient type. He likes the options he has for ER meds and patients in around the clock pain. He has written a few hysingla and he likes what he sees so far
PPLPMDL0020000001	Beachwood	OH	44122	9/9/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44333	9/9/2015	Brittany and Elise said that there was a patient on Friday last week that she wrote Hysingla for that had Aetna and denied her current medicine Zohydro. Elise said that she didn't give the patient the trial card and then signed up for one and called the pharmacy. She said the pharmacist at Giant eagle in Wadsworth said she couldn't process the trial card and that the patient paid \$25 for the first month. I told her I would call the pharmacy and work it out. I asked for continued business and to not forget the trial card for Butrans.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	9/10/2015	No new information learned on this call.
PPLPMDL0020000001	Independence	OH	44131	9/10/2015	Thanked him for continuing to write hysingla. He said he believes in it and has been writing more of it again. Reviewed oxycotin, q12 dosing and abuse deterrent properties as well. He thinks that is important but likes hysingla for that reason and that it is once a day. He doesn't like the idea of his patients taking pills all day. One at the right dose is what makes the most sense to him.
PPLPMDL0020000001	Tallmadge	OH	44278	9/10/2015	Lunch appointment with office. Discussed with all physicians the opportunities they have with my ER products. Discussed attributes for Butrans,hysingla and OxyContin and appropriate patient type profiles for each. Told each dr the specifics of missed opportunities with Butrans. Discussed when and where to use, application sites and insurance opportunities.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	9/10/2015	Quick call with dr at window and showed him the Helen profile and asked him too continue identifying appropriate patients like those on ANY IR opioids around the clock. Dr said he's trying and really likes it.
PPLPMDL0020000001	Tallmadge	OH	44278	9/10/2015	Lunch appointment with office. Discussed with all physicians the opportunities they have with my ER products. Discussed attributes for Butrans,hysingla and OxyContin and appropriate patient type profiles for each. Told each dr the specifics of missed opportunities with Butrans. Discussed when and where to use, application sites and insurance opportunities.
PPLPMDL0020000001	Tallmadge	OH	44278	9/10/2015	Lunch appointment with office. Discussed with all physicians the opportunities they have with my ER products. Discussed attributes for Butrans,hysingla and OxyContin and appropriate patient type profiles for each. Told each dr the specifics of missed opportunities with Butrans. Discussed when and where to use, application sites and insurance opportunities.
PPLPMDL0020000001	Warrensville Heights	OH	44122	9/10/2015	Quick using portfolio piece. Discussed patient in around the clock pain, a patient taking total daily dose of IR of 20 mg or more. Some of those patients it be appropriate for oxycotin or hysingla. Discussed dosing, formulary and med d for butrans.
PPLPMDL0020000001	Parma	OH	44134	9/10/2015	No new information learned on this call.
PPLPMDL0020000001	Solon	OH	44139	9/10/2015	No new information learned on this call.
PPLPMDL0020000001	Tallmadge	OH	44278	9/10/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	9/10/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	9/10/2015	Spoke with dr while meeting with Tera and he said he's been having really good success with Butrans from an insurance standpoint and patient feedback is great. Dr said he's still trying to write Hysingla but it's not getting covered and to talk with Tera about the plans.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	9/10/2015	No new information learned on this call.
PPLPMDL0020000001	Independence	OH	44131	9/10/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	9/10/2015	No new information learned on this call.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	9/10/2015	Follow up from lunch program with Lonsdorf and Everly. Dr said he really lied them and it's good they already have found a place for the product. I reminded dr about where and when to use and insurance opportunities. Dr said ICD 10 is out which has changed all the coding. For pain management and it's taking a lot of time woo ever Tera is doing a great job getting the products covered. Reminded about using Butrans and to titrate before he would increase prn meds.
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	9/10/2015	Saw Linda in the hospital while placing copay cards. I asked her how her Butrans patients are doing and if she's finding the need to titrate often? Linda said most patients are on 10mcg but does have some patients in more pain that need a higher dose. Linda said she's been using a lot recently. I told her to keep it up.
PPLPMDL0020000001	Independence	OH	44131	9/10/2015	Doc leaves most of the choices on meds for chronic patients to Roman. He likes the idea of once daily dosing and abuse deterrent properties. For that reason he supports the use of oxycotin and hysingla. His mind is more on surgery. He may do 7 per day, spine, total....
PPLPMDL0020000001	Northfield	OH	44067	9/10/2015	Quick call, saying goodbye, using portfolio piece stressing the importance of ER meds with abuse deterrent properties for appropriate patients in around the clock pain. There are options! Used abuse folder to discuss that for a bit and she had to leave.
PPLPMDL0020000001	Independence	OH	44131	9/11/2015	No new information learned on this call.
PPLPMDL0020000001	Stow	OH	44224	9/11/2015	Short conversation with Dr and her nurse Nay. Dr said she is still writing Butrans and her patients are doing great on it and asked me to talk with Nay about Hysingla getting approved. I told her to please continue identifying patients who need an ER opioid.
PPLPMDL0020000001	Beachwood	OH	44122	9/11/2015	No new information learned on this call.
PPLPMDL0020000001	Independence	OH	44131	9/11/2015	No new information learned on this call.
PPLPMDL0020000001	Akron	OH	44312	9/11/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	9/11/2015	Used Sonia patient profile to discuss patients in his practice. He said he has few patients on too many med. meh likes to keep them with as few pills as possible and at the lowest doses. He is considering hysingla for a few of his patients but they are inherited care source patients. Meet him know the formulary situation with caresource. He said he may try it for a few. He is still seeing success with butrans and would prefer to prescribe that for his
PPLPMDL0020000001	Akron	OH	44319	9/11/2015	No new information learned on this call.
PPLPMDL0020000001	Parma	OH	44129	9/11/2015	No new information learned on this call.
PPLPMDL0020000001	Stow	OH	44224	9/11/2015	Short conversation about Butrans and Hysingla discussing the patient type identification looks like for each. Hit on managed care coverage and asked for more business
PPLPMDL0020000001	Parma	OH	44129	9/11/2015	No new information learned on this call.
PPLPMDL0020000001	Hudson	OH	44236	9/11/2015	No new information learned on this call.
PPLPMDL0020000001	Beachwood	OH	44122	9/11/2015	Handed doctor a savings card for hysingla, asked if it looked familiar? He said he had one in his pocket, still has to find a patient. Handed him Sonia patient profile. Patient like this would be appropriate. He said he would take a look. He had to go but reminded him that Butrans is only C3 ER opioid on the market. ER meds are appropriate for patients in around the clock pain. He agreed.
PPLPMDL0020000001	Independence	OH	44131	9/11/2015	Using Helen profile and portfolio piece discussed the changing climate and where butrans fits in his practice. He contemplated in his head. He said that is a product he means to think of but doesn't. I asked what information he needs from me? Reviewed coverage, dosing and titration. Oxycotin works, but uses only when necessary.
PPLPMDL0020000001	Stow	OH	44224	9/11/2015	Told Jon that he can use butrans even for his patients higher up on IR opioids to 40mg of hydrocodone or oxycodone. Showed him the conversion guide and told him that he would stillness to titrate up fairly quickly. Jon said he agrees and has done that and it's worked out ok. Reminded him about BWC and Caresource coverage.
PPLPMDL0020000001	Cuyahoga Falls	OH	44224	9/11/2015	Quick call in hallway as she was coming in for the day and dr said that she has not been writing as much ER opioid recently because she can't deal with all the emblems it causes. I told her if she's specific with her patient selection it shouldn't be bad. Dr said that too many of them just want more and more and I told her that may be for IR opioids because Butrans is a week long patch and hysingla is a once a day ER hydrocodone. Dr agreed and
PPLPMDL0020000001	Cleveland	OH	44111	9/14/2015	
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PPLPMDL0020000001	Cleveland	OH	44113	9/14/2015	
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PPLPMDL0020000001	Cleveland	OH	44113	9/14/2015	
PPLPMDL0020000001	Cleveland	OH	44113	9/14/2015	



Page 2673

CONFIDENTIAL

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PPLPMDL0020000001	Parma	OH	44129	9/29/2015

CONFIDENTIAL

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PPLPMDL0020000001	Cleveland	OH	44113	10/2/2015	
PPLPMDL0020000001	Cleveland	OH	44195	10/2/2015	Meeting scheduled by Mathew for Catherine London and I to better understand the opportunity to represent Purdue at the Cleveland Clinic Medical Innovations Summit 2015. Dr. Machado, the moderator, provided an outline of the panel session.
PPLPMDL0020000001	Akron	OH	44310	10/2/2015	
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CONFIDENTIAL

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PPLPMDL0020000001	Tallmadge	OH	44278	10/9/2015
PPLPMDL0020000001	Akron	OH	44312	10/9/2015
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PPLPMDL0020000001	Warrensville Heights	OH	44122	10/9/2015
PPLPMDL0020000001	Beachwood	OH	44122	10/9/2015

CONFIDENTIAL

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PPLPMDL0020000001	Shaker Heights	OH	44122	10/9/2015
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CONFIDENTIAL

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CONFIDENTIAL

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PPLPMDL0020000001	Parma	OH	44129	10/19/2015
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PPLPMDL0020000001	Hudson	OH	44236	10/19/2015
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CONFIDENTIAL

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PPLPMDL0020000001	Cleveland	OH	44106	10/22/2015
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CONFIDENTIAL

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Opportunity to participate in the Cleveland Clinic 2015 Medical Innovations SummitThis was a 40 min panel discussion on October 27th, 2015 with 4 other physicians (Neuro) from Cleveland Clinic.The panel discussion focused on &#8216;Unraveling the Complexities in the Management of Chronic Pain.&#8217; The discussion highlighted current chronic pain care involving images, surgery, and prescription drugs, and what changes are needed in the future to promote better outcomes while removing waste and risk. Rupa's role was to talk about prescription opioids, how are they currently used, discuss the abuse of opioids, and highlight current innovation and the possibilities for future innovation (OADP). The panel discussion was in front of ~100-200 people.

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CONFIDENTIAL

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CONFIDENTIAL

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<font color=blue><b>CHUDAKOB's query on 04/28/2016</b></font>Kathy, look at the notes under Hysingla ER. Was wondering how you answered this? Did you fill out an E-MERF? Also, please see the notes under OxyContin. Can you clarify based on your discussion, why they "often have to dose Q 8"?<font color=green><b>LARAWKA's response on 05/02/2016</b></font>Yes, I did fill out an e-Mirf. Regarding oxycontin. Depending on patient pain level they find sometimes they have to dose that way for low doses of oxycontin. I clarified that it is q12 med.<font color=blue><b>CHUDAKOB's query on 05/04/2016</b></font>You answered one part of this regarding the EMERF. Why does the HCP often have to prescribe q8 dosing?<font color=green><b>LARAWKA's response on 05/04/2016</b></font>I answered both parts. They said that depending on patients pain level, sometimes they find they have to dose q8 for low doses. I clarified with doc that it is a q12 med. do you not see that above? It seemed to not send correctly the other day and I wonder if you didn't get the complete message.<font color=blue><b>CHUDAKOB added notes on 05/05/2016</b></font>I do now. The learning here's that if they have to dose q8h because they did not receive relief at q12h then that needs to be reported as an AE. It is hard to tell from your explanation as to why they are doing q8h. Please keep this in mind. It is important. Thanks Kathy!

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PPLPMDL0020000001	Cleveland	OH	44109	11/11/2015
PPLPMDL0020000001	Westlake	OH	44145	11/11/2015
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CONFIDENTIAL

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CONFIDENTIAL

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PPLPMDL0020000001	Northfield	OH	44067	11/18/2015
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CONFIDENTIAL

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CONFIDENTIAL

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PPLPMDL0020000001	Akron	OH	44312	11/25/2015

CONFIDENTIAL

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PPLPMDL0020000001	Cleveland	OH	44113	12/1/2015
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CONFIDENTIAL

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PPLPMDL0020000001	N Royalton	OH	44133	12/1/2015
PPLPMDL0020000001	Parma	OH	44129	12/1/2015
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PPLPMDL0020000001	Bedford	OH	44146	12/1/2015
PPLPMDL0020000001	Mayfield Heights	OH	44124	12/1/2015
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PPLPMDL0020000001	Bedford	OH	44146	12/1/2015
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PPLPMDL0020000001	Euclid	OH	44132	12/3/2015
PPLPMDL0020000001	Mogadore	OH	44260	12/3/2015
PPLPMDL0020000001	Garfield Hts.	OH	44125	12/3/2015
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PPLPMDL0020000001	Independence	OH	44131	12/3/2015
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PPLPMDL0020000001	Bedford	OH	44146	12/3/2015

CONFIDENTIAL

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CONFIDENTIAL

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PPLPMDL0020000001	Lakewood	OH	44107	12/9/2015

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CONFIDENTIAL

PPLPMDL0020000001	Parma	OH	44129	12/9/2015
PPLPMDL0020000001	Cleveland	OH	44113	12/9/2015
PPLPMDL0020000001	Bedford	OH	44146	12/9/2015
PPLPMDL0020000001	Westlake	OH	44145	12/9/2015
PPLPMDL0020000001	Mogadore	OH	44260	12/9/2015

<font color=blue><b>CHUDAKOB's query on 03/07/2016</b></font>-Krista, please take a look at the notes you wrote for OxyContin. What do you see in what you wrote that could be cause for concern?<font color=green><b>YOUNGKR's response on 03/08/2016</b></font>-Would like to take less pills daily. That is not in our fpi so if dr says that I cannot agree with him or comment on it.<font color=blue><b>CHUDAKOB's query on 03/14/2016</b></font>-You are correct. We cannot make any reference to "less pills" of make any comparative statements regarding pills. The reason for this is that we have no data that compares pill counts. We discussed this on our work session as well. Please do not make any reference to numbers of pills and if the HCP makes that reference, you have an obligation to correct him/her. Does this make sense and do you understand the reason for not discussing number of pills?<font color=green><b>YOUNGKR's response on 03/15/2016</b></font>-Yes<font color=blue><b>CHUDAKOB added notes on 03/16/2016</b></font>-Thank you!

PPLPMDL0020000001	Uniontown	OH	44685	12/10/2015
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CONFIDENTIAL

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CONFIDENTIAL

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CONFIDENTIAL

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CONFIDENTIAL

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CONFIDENTIAL

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CONFIDENTIAL

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CONFIDENTIAL

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CONFIDENTIAL

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CONFIDENTIAL

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CONFIDENTIAL

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CONFIDENTIAL

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CONFIDENTIAL

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CONFIDENTIAL

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CONFIDENTIAL

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CONFIDENTIAL

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PPLPMDL0020000001	Beachwood	OH	44122	2/17/2016
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PPLPMDL0020000001	Mayfield Heights	OH	44124	2/17/2016
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PPLPMDL0020000001	Lakewood	OH	44107	2/18/2016
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CONFIDENTIAL

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CONFIDENTIAL

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CONFIDENTIAL

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CONFIDENTIAL

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CONFIDENTIAL

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PPLPMDL0020000001	NORTH OLMSTED	OH	44070	3/9/2016
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PPLPMDL0020000001	Fairlawn	OH	44333	3/9/2016
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PPLPMDL0020000001	North Royalton	OH	44133	3/9/2016

CONFIDENTIAL

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CONFIDENTIAL

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CONFIDENTIAL

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PPLPMDL0020000001	Parma	OH	44129	3/18/2016
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PPLPMDL0020000001	Akron	OH	44312	3/18/2016
PPLPMDL0020000001	Akron	OH	44310	3/18/2016
PPLPMDL0020000001	Cleveland	OH	44130	3/18/2016
PPLPMDL0020000001	Parma	OH	44129	3/18/2016
PPLPMDL0020000001	Parma	OH	44129	3/18/2016
PPLPMDL0020000001	Hudson	OH	44236	3/18/2016
PPLPMDL0020000001	Akron	OH	44312	3/18/2016
PPLPMDL0020000001	Solon	OH	44139	3/18/2016
PPLPMDL0020000001	Hudson	OH	44236	3/18/2016
PPLPMDL0020000001	Bedford	OH	44146	3/18/2016
PPLPMDL0020000001	Stow	OH	44224	3/18/2016
PPLPMDL0020000001	Beachwood	OH	44122	3/18/2016
PPLPMDL0020000001	Stow	OH	44224	3/21/2016
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/21/2016
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/21/2016
PPLPMDL0020000001	LAKEWOOD	OH	44107	3/21/2016
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/21/2016
PPLPMDL0020000001	Stow	OH	44224	3/21/2016
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PPLPMDL0020000001	Stow	OH	44224	3/21/2016
PPLPMDL0020000001	Parma	OH	44129	3/21/2016
PPLPMDL0020000001	Parma	OH	44129	3/21/2016

CONFIDENTIAL

PPLPMDL0020000001	Cleveland	OH	44109	3/21/2016
PPLPMDL0020000001	akron	OH	44333	3/21/2016
PPLPMDL0020000001	Garfield Hts.	OH	44125	3/21/2016
PPLPMDL0020000001	Cleveland	OH	44130	3/21/2016
PPLPMDL0020000001	Cleveland	OH	44109	3/21/2016
PPLPMDL0020000001	Cleveland	OH	44125	3/21/2016
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PPLPMDL0020000001	Cleveland	OH	44109	3/21/2016
PPLPMDL0020000001	Lakewood	OH	44107	3/21/2016
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PPLPMDL0020000001	Cleveland	OH	44111	3/21/2016
PPLPMDL0020000001	Garfield Hts.	OH	44125	3/21/2016
PPLPMDL0020000001	Garfield Hts.	OH	44125	3/21/2016
PPLPMDL0020000001	Beachwood	OH	44122	3/21/2016
PPLPMDL0020000001	Hudson	OH	44236	3/22/2016
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PPLPMDL0020000001	Hudson	OH	44236	3/22/2016
PPLPMDL0020000001	Barberton	OH	44203	3/22/2016
PPLPMDL0020000001	Akron	OH	44320	3/22/2016
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PPLPMDL0020000001	Barberton	OH	44203	3/22/2016
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PPLPMDL0020000001	Akron	OH	44302	3/22/2016
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PPLPMDL0020000001	Barberton	OH	44203	3/22/2016
PPLPMDL0020000001	Akron	OH	44305	3/22/2016
PPLPMDL0020000001	Brooklyn	OH	44144	3/22/2016
PPLPMDL0020000001	Cleveland	OH	44113	3/22/2016
PPLPMDL0020000001	Cleveland	OH	44113	3/22/2016
PPLPMDL0020000001	Chagrin Falls	OH	44022	3/22/2016
PPLPMDL0020000001	Mayfield Hts	OH	44124	3/22/2016
PPLPMDL0020000001	Independence	OH	44131	3/22/2016
PPLPMDL0020000001	Bedford	OH	44146	3/22/2016
PPLPMDL0020000001	Westlake	OH	44145	3/22/2016
PPLPMDL0020000001	Mayfield Hts	OH	44124	3/22/2016
PPLPMDL0020000001	Bedford	OH	44146	3/22/2016
PPLPMDL0020000001	Cleveland	OH	44144	3/22/2016
PPLPMDL0020000001	Westlake	OH	44145	3/22/2016
PPLPMDL0020000001	Cleveland	OH	44102	3/22/2016
PPLPMDL0020000001	Maple Heights	OH	44137	3/22/2016
PPLPMDL0020000001	Westlake	OH	44145	3/22/2016
PPLPMDL0020000001	Cleveland	OH	44113	3/22/2016
PPLPMDL0020000001	Cleveland	OH	44113	3/22/2016
PPLPMDL0020000001	Akron	OH	44305	3/22/2016
PPLPMDL0020000001	Cleveland	OH	44115	3/22/2016
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PPLPMDL0020000001	Fairlawn	OH	44333	3/23/2016
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PPLPMDL0020000001	Fairlawn	OH	44333	3/23/2016
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PPLPMDL0020000001	Lyndhurst	OH	44124	3/23/2016
PPLPMDL0020000001	akron	OH	44333	3/23/2016
PPLPMDL0020000001	Beachwood	OH	44122	3/23/2016
PPLPMDL0020000001	Parma	OH	44129	3/23/2016
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PPLPMDL0020000001	Parma Heights	OH	44129	3/23/2016
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/23/2016
PPLPMDL0020000001	Parma	OH	44129	3/23/2016
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PPLPMDL0020000001	Lyndhurst	OH	44121	3/23/2016
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PPLPMDL0020000001	Parma	OH	44129	3/23/2016
PPLPMDL0020000001	Cleveland	OH	44130	3/23/2016
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/23/2016
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/23/2016

Gather a Face to face meetingSee if they are reviewing the opioid class this year. When will they determine to do thisOffer Value Added services to get in the door



CONFIDENTIAL

PPLPMDL0020000001	Parma	OH	44129	3/23/2016
PPLPMDL0020000001	Akron	OH	44333	3/23/2016
PPLPMDL0020000001	Bedford	OH	44146	3/23/2016
PPLPMDL0020000001	C. Falls	OH	44223	3/23/2016
PPLPMDL0020000001	Fairlawn	OH	44333	3/23/2016
PPLPMDL0020000001	Lyndhurst	OH	44124	3/23/2016
PPLPMDL0020000001	Parma	OH	44129	3/23/2016
PPLPMDL0020000001	Middleburg Heights	OH	44130	3/23/2016
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PPLPMDL0020000001	Akron	OH	44310	3/24/2016
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PPLPMDL0020000001	Barberton	OH	44203	3/24/2016
PPLPMDL0020000001	Tallmadge	OH	44278	3/24/2016
PPLPMDL0020000001	Akron	OH	44310	3/24/2016
PPLPMDL0020000001	Tallmadge	OH	44278	3/24/2016
PPLPMDL0020000001	Euclid	OH	44119	3/24/2016
PPLPMDL0020000001	Euclid	OH	44119	3/24/2016
PPLPMDL0020000001	Euclid	OH	44119	3/24/2016
PPLPMDL0020000001	Stow	OH	44224	3/24/2016
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/24/2016
PPLPMDL0020000001	Stow	OH	44224	3/24/2016
PPLPMDL0020000001	Richmond Heights	OH	44143	3/24/2016
PPLPMDL0020000001	Euclid	OH	44132	3/24/2016
PPLPMDL0020000001	Euclid	OH	44132	3/24/2016
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/24/2016
PPLPMDL0020000001	Cleveland Hts.	OH	44118	3/24/2016
PPLPMDL0020000001	Euclid	OH	44119	3/24/2016
PPLPMDL0020000001	Euclid	OH	44119	3/24/2016
PPLPMDL0020000001	Richmond Heights	OH	44143	3/24/2016
PPLPMDL0020000001	Cleveland Hts.	OH	44118	3/24/2016
PPLPMDL0020000001	Stow	OH	44224	3/24/2016
PPLPMDL0020000001	Cleveland	OH	44144	3/24/2016
PPLPMDL0020000001	Euclid	OH	44132	3/24/2016
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PPLPMDL0020000001	Parma	OH	44129	3/24/2016
PPLPMDL0020000001	Fairview Park	OH	44126	3/24/2016
PPLPMDL0020000001	Fairview Park	OH	44126	3/24/2016
PPLPMDL0020000001	Highland Heights	OH	44143	3/24/2016

<font color=blue><b></font>CHUDAKOB's query on 07/05/2016</b></font>Terri, Please look at your call notes for OxyContin. According to the FPI, how is OxyContin dosed?<font color=green><b>CONWATE's response on 07/06/2016</b></font>Every 12 hours which would be twice a day.<font color=blue><b></font>CHUDAKOB's query on 07/11/2016</b></font>Terri, thank you for your response. Our FPI says every 12 hours. This is NOT the same as twice a day. Twice a day could mean at 7AM and 3 PM. Every 12 hours is 7 AM and 7PM as an example. Please make sure that you are conveying every 12 hours and not twice a day to your HCPs and capturing that accurate message in your call notes. Do these difference make sense?<font color=green><b>CONWATE's response on 07/12/2016</b></font>Ok<font color=blue><b></font>CHUDAKOB added notes on 07/13/2016</b></font>Thank you

PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/25/2016
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PPLPMDL0020000001	Uniontown	OH	44312	3/25/2016
PPLPMDL0020000001	Akron	OH	44310	3/25/2016
PPLPMDL0020000001	Akron	OH	44312	3/25/2016
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/25/2016
PPLPMDL0020000001	Stow	OH	44224	3/25/2016
PPLPMDL0020000001	Woodmere	OH	44122	3/25/2016
PPLPMDL0020000001	Stow	OH	44224	3/25/2016
PPLPMDL0020000001	Beachwood	OH	44122	3/25/2016
PPLPMDL0020000001	Stow	OH	44224	3/25/2016
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PPLPMDL0020000001	Akron	OH	44310	3/28/2016
PPLPMDL0020000001	Hudson	OH	44236	3/28/2016
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PPLPMDL0020000001	Stow	OH	44224	3/28/2016
PPLPMDL0020000001	Mayfield Hts	OH	44124	3/28/2016
PPLPMDL0020000001	Westlake	OH	44145	3/28/2016
PPLPMDL0020000001	Bedford	OH	44146	3/28/2016
PPLPMDL0020000001	Richmond Heights	OH	44143	3/28/2016
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PPLPMDL0020000001	Highland Heights	OH	44143	3/28/2016
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PPLPMDL0020000001	CLEVELAND	OH	44109	3/28/2016
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PPLPMDL0020000001	Northfield	OH	44067	3/29/2016
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PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/29/2016
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/29/2016

CONFIDENTIAL

PPLPMDL0020000001	Akron	OH	44312	3/29/2016
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PPLPMDL0020000001	Cleveland	OH	44111	3/29/2016
PPLPMDL0020000001	Cleveland	OH	44106	3/29/2016
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PPLPMDL0020000001	Mayfield Heights	OH	44124	3/29/2016
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PPLPMDL0020000001	Westlake	OH	44145	3/29/2016
PPLPMDL0020000001	Cleveland	OH	44109	3/29/2016
PPLPMDL0020000001	Chagrin Falls	OH	44023	3/29/2016
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PPLPMDL0020000001	Mayfield Hts	OH	44124	3/29/2016
PPLPMDL0020000001	Cleveland	OH	44144	3/29/2016
PPLPMDL0020000001	Parma	OH	44134	3/29/2016
PPLPMDL0020000001	Cleveland	OH	44102	3/29/2016
PPLPMDL0020000001	Stow	OH	44224	3/29/2016
PPLPMDL0020000001	Cleveland	OH	44135	3/30/2016
PPLPMDL0020000001	akron	OH	44333	3/30/2016
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PPLPMDL0020000001	Fairview Park	OH	44126	3/30/2016
PPLPMDL0020000001	Mayfield Heights	OH	44124	3/30/2016
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PPLPMDL0020000001	NORTH OLMSTED	OH	44070	3/30/2016
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/30/2016
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PPLPMDL0020000001	Mayfield Heights	OH	44124	3/30/2016
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PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/1/2016
PPLPMDL0020000001	Munroe Falls	OH	44262	4/1/2016
PPLPMDL0020000001	Munroe Falls	OH	44262	4/1/2016
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PPLPMDL0020000001	Lakewood	OH	44107	4/1/2016
PPLPMDL0020000001	Parma	OH	44129	4/1/2016
PPLPMDL0020000001	Stow	OH	44224	4/1/2016
PPLPMDL0020000001	Parma	OH	44129	4/1/2016
PPLPMDL0020000001	LAKEWOOD	OH	44107	4/1/2016
PPLPMDL0020000001	Cleveland	OH	44109	4/1/2016
PPLPMDL0020000001	Lakewood	OH	44107	4/1/2016
PPLPMDL0020000001	Parma	OH	44129	4/1/2016

CONFIDENTIAL

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PPLPMDL0020000001	Cleveland Hts	OH	44118	4/4/2016
PPLPMDL0020000001	Akron	OH	44333	4/4/2016
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PPLPMDL0020000001	Cleveland	OH	44195	4/4/2016
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PPLPMDL0020000001	Fairlawn	OH	44333	4/4/2016
PPLPMDL0020000001	Fairlawn	OH	44333	4/4/2016
PPLPMDL0020000001	Cleveland	OH	44106	4/4/2016
PPLPMDL0020000001	Cleveland	OH	44111	4/5/2016
PPLPMDL0020000001	Garfield Heights	OH	44125	4/5/2016
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PPLPMDL0020000001	Garfield Hts.	OH	44125	4/5/2016
PPLPMDL0020000001	Cleveland	OH	44113	4/5/2016
PPLPMDL0020000001	Mayfield Heights	OH	44124	4/5/2016
PPLPMDL0020000001	Garfield Hts	OH	44125	4/5/2016
PPLPMDL0020000001	Garfield Hts.	OH	44125	4/5/2016
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PPLPMDL0020000001	Euclid	OH	44117	4/6/2016
PPLPMDL0020000001	Lyndhurst	OH	44124	4/6/2016
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PPLPMDL0020000001	Bedford	OH	44146	4/6/2016
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PPLPMDL0020000001	Lakewood	OH	44107	4/7/2016
PPLPMDL0020000001	Parma	OH	44129	4/7/2016
PPLPMDL0020000001	Lakewood	OH	44107	4/7/2016
PPLPMDL0020000001	Cleveland	OH	44135	4/7/2016
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CONFIDENTIAL

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gather a appointment at AMCP

CONFIDENTIAL

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CONFIDENTIAL

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CONFIDENTIAL

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PPLPMDL0020000001	Westlake	OH	44145	4/25/2016
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PPLPMDL0020000001	Fairlawn	OH	44333	4/25/2016
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PPLPMDL0020000001	Cleveland	OH	44130	4/25/2016
PPLPMDL0020000001	Bedford	OH	44146	4/25/2016
PPLPMDL0020000001	Westlake	OH	44145	4/25/2016
PPLPMDL0020000001	Brook Park	OH	44142	4/25/2016
PPLPMDL0020000001	Brooklyn	OH	44144	4/25/2016
PPLPMDL0020000001	Cleveland	OH	44130	4/25/2016
PPLPMDL0020000001	Rocky River	OH	44116	4/25/2016
PPLPMDL0020000001	Cleveland	OH	44130	4/25/2016
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PPLPMDL0020000001	Cleveland	OH	44130	4/25/2016
PPLPMDL0020000001	Westlake	OH	44145	4/25/2016
PPLPMDL0020000001	Middleburg Hts.	OH	44130	4/25/2016
PPLPMDL0020000001	Bedford	OH	44146	4/25/2016
PPLPMDL0020000001	Tallmadge	OH	44278	4/26/2016
PPLPMDL0020000001	Copley	OH	44321	4/26/2016
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PPLPMDL0020000001	Tallmadge	OH	44278	4/26/2016
PPLPMDL0020000001	Copley	OH	44321	4/26/2016
PPLPMDL0020000001	Akron	OH	44333	4/26/2016
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PPLPMDL0020000001	Stow	OH	44224	4/26/2016
PPLPMDL0020000001	Stow	OH	44224	4/26/2016
PPLPMDL0020000001	Stow	OH	44224	4/26/2016

OADP presentationFind out status on Hysingla and if they are going to follow ESI status. Currently have a strict PA in place. Only 22 scripts have gone through Chris Jarman and I met with Marko Blagojevic, Manager of Clinical Pharmacy Programs, and Holly Miller, Clinical Pharmacist. Provided an overview of Hysingla ER and OADP.

CONFIDENTIAL

PPLPMDL0020000001	Stow	OH	44224	4/26/2016
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PPLPMDL0020000001	Mayfield Heights	OH	44124	4/26/2016
PPLPMDL0020000001	Mogadore	OH	44260	4/26/2016
PPLPMDL0020000001	Mogadore	OH	44260	4/26/2016
PPLPMDL0020000001	Mayfield Heights	OH	44124	4/26/2016
PPLPMDL0020000001	Cleveland	OH	44129	4/26/2016
PPLPMDL0020000001	Mogadore	OH	44260	4/26/2016
PPLPMDL0020000001	Parma	OH	44129	4/26/2016
PPLPMDL0020000001	Cleveland	OH	44109	4/26/2016
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PPLPMDL0020000001	Mogadore	OH	44260	4/26/2016
PPLPMDL0020000001	Parma	OH	44134	4/26/2016
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CONFIDENTIAL

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CONFIDENTIAL

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PPLPMDL0020000001	Beachwood	OH	44122	5/4/2016
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PPLPMDL0020000001	Twinsburg	OH	44087	5/4/2016
PPLPMDL0020000001	Maple Heights	OH	44137	5/4/2016
PPLPMDL0020000001	Parma Heights	OH	44130	5/4/2016
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PPLPMDL0020000001	Waterford	OH	45786	5/4/2016
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PPLPMDL0020000001	Lakewood	OH	44107	5/4/2016
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CONFIDENTIAL

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PPLPMDL0020000001	Westlake	OH	44145	5/9/2016
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CONFIDENTIAL

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CONFIDENTIAL

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CONFIDENTIAL

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PPLPMDL0020000001	Tallmadge	OH	44278	5/31/2016
PPLPMDL0020000001	Macedonia	OH	44056	5/31/2016
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PPLPMDL0020000001	Tallmadge	OH	44278	5/31/2016
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PPLPMDL0020000001	Twinsburg	OH	44087	5/31/2016
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PPLPMDL0020000001	Mayfield Hts.	OH	44124	5/31/2016
PPLPMDL0020000001	LAKEWOOD	OH	44107	5/31/2016
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PPLPMDL0020000001	Euclid	OH	44117	5/31/2016
PPLPMDL0020000001	Mayfield Heights	OH	44124	5/31/2016
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PPLPMDL0020000001	Fairlawn	OH	44333	6/1/2016
PPLPMDL0020000001	Stow	OH	44224	6/1/2016
PPLPMDL0020000001	Tallmadge	OH	44278	6/1/2016



CONFIDENTIAL

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PPLPMDL0020000001	Fairlawn	OH	44333	6/1/2016
PPLPMDL0020000001	Lyndhurst	OH	44124	6/1/2016
PPLPMDL0020000001	Berea	OH	44017	6/1/2016
PPLPMDL0020000001	Lakewood	OH	44107	6/1/2016
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PPLPMDL0020000001	NORTH OLMSTED	OH	44070	6/1/2016
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CONFIDENTIAL

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PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/7/2016
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CONFIDENTIAL

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CONFIDENTIAL

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CONFIDENTIAL

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CONFIDENTIAL

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ESI Contract

CONFIDENTIAL

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CONFIDENTIAL

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PPLPMDL0020000001	Mayfield Heights	OH	44124	7/8/2016
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CONFIDENTIAL

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CONFIDENTIAL

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CONFIDENTIAL

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CONFIDENTIAL

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CONFIDENTIAL

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CONFIDENTIAL

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CONFIDENTIAL

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CONFIDENTIAL

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CONFIDENTIAL

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CONFIDENTIAL

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CONFIDENTIAL

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CONFIDENTIAL

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PPLPMDL0020000001	South Euclid	OH	44121	9/6/2016
PPLPMDL0020000001	Mayfield Hts	OH	44124	9/6/2016
PPLPMDL0020000001	Munroe Falls	OH	44262	9/6/2016
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PPLPMDL0020000001	Mayfield Hts	OH	44124	9/6/2016
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PPLPMDL0020000001	Beachwood	OH	44122	9/6/2016
PPLPMDL0020000001	Beachwood	OH	44122	9/6/2016
PPLPMDL0020000001	Akron	OH	44320	9/7/2016
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PPLPMDL0020000001	Fairlawn	OH	44333	9/7/2016
PPLPMDL0020000001	Parma	OH	44129	9/7/2016
PPLPMDL0020000001	Bedford	OH	44146	9/7/2016
PPLPMDL0020000001	Cleveland	OH	44113	9/7/2016
PPLPMDL0020000001	Euclid	OH	44117	9/7/2016
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PPLPMDL0020000001	Cleveland	OH	44106	9/7/2016
PPLPMDL0020000001	Fairlawn	OH	44333	9/7/2016
PPLPMDL0020000001	Bedford	OH	44146	9/7/2016
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CONFIDENTIAL

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PPLPMDL0020000001	Highland Heights	OH	44143	9/7/2016
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PPLPMDL0020000001	Cleveland Hts.	OH	44118	9/8/2016
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PPLPMDL0020000001	Cuyahoga Falls	OH	44221	9/12/2016
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CONFIDENTIAL

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CONFIDENTIAL

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CONFIDENTIAL

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CONFIDENTIAL

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CONFIDENTIAL

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CONFIDENTIAL

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CONFIDENTIAL

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CONFIDENTIAL

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CONFIDENTIAL

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CONFIDENTIAL

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CONFIDENTIAL

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CONFIDENTIAL

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CONFIDENTIAL

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CONFIDENTIAL

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CONFIDENTIAL

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PPLPMDL0020000001	Cuyahoga Falls	OH	44223	11/30/2016
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CONFIDENTIAL

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PPLPMDL0020000001	Uniontown	OH	44685	11/30/2016
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CONFIDENTIAL

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CONFIDENTIAL

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CONFIDENTIAL

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PPLPMDL0020000001	Akron	OH	44333	12/19/2016
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PPLPMDL0020000001	Uniontown	OH	44685	12/19/2016
PPLPMDL0020000001	Euclid	OH	44119	12/19/2016
PPLPMDL0020000001	Beachwood	OH	44122	12/20/2016
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CONFIDENTIAL

PPLPMDL0020000001	Beachwood	OH	44122	12/20/2016
PPLPMDL0020000001	Lakewood	OH	44107	12/20/2016
PPLPMDL0020000001	Northfield	OH	44067	12/20/2016
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PPLPMDL0020000001	Garfield Hts.	OH	44125	12/20/2016
PPLPMDL0020000001	Mayfield Heights	OH	44124	12/20/2016
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PPLPMDL0020000001	Northfield	OH	44067	12/20/2016
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PPLPMDL0020000001	Lakewood	OH	44107	12/20/2016
PPLPMDL0020000001	Akron	OH	44333	12/20/2016
PPLPMDL0020000001	Garfield Hts.	OH	44125	12/20/2016
PPLPMDL0020000001	Akron	OH	44319	12/20/2016
PPLPMDL0020000001	Fairview Park	OH	44126	12/20/2016
PPLPMDL0020000001	Stow	OH	44224	12/20/2016
PPLPMDL0020000001	Mayfield Heights	OH	44124	12/20/2016
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	12/21/2016
PPLPMDL0020000001	Akron	OH	44320	12/21/2016
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PPLPMDL0020000001	Westlake	OH	44145	12/21/2016
PPLPMDL0020000001	Lakewood	OH	44107	12/21/2016
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PPLPMDL0020000001	Cleveland	OH	44130	12/21/2016
PPLPMDL0020000001	Akron	OH	44333	12/21/2016
PPLPMDL0020000001	Middleburg Hts.	OH	44130	12/21/2016
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PPLPMDL0020000001	Fairlawn	OH	44333	12/21/2016
PPLPMDL0020000001	Middleburg Hts.	OH	44130	12/21/2016
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PPLPMDL0020000001	westlake	OH	44145	12/21/2016
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CONFIDENTIAL

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PPLPMDL0020000001	Westlake	OH	44145	1/10/2017
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CONFIDENTIAL

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CONFIDENTIAL

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PPLPMDL0020000001	Akron	OH	44333	1/18/2017

CONFIDENTIAL

PPLPMDL0020000001	Westlake	OH	44145	1/18/2017
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PPLPMDL0020000001	Hudson	OH	44236	1/19/2017
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PPLPMDL0020000001	Highland Heights	OH	44143	1/20/2017
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PPLPMDL0020000001	Bay Village	OH	44140	1/24/2017



CONFIDENTIAL

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PPLPMDL0020000001	Richmond Heights	OH	44143	1/25/2017
PPLPMDL0020000001	Euclid	OH	44117	1/25/2017
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PPLPMDL0020000001	Cuyahoga Falls	OH	44223	1/25/2017
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PPLPMDL0020000001	C. Falls	OH	44223	1/26/2017
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PPLPMDL0020000001	Uniontown	OH	44685	1/26/2017
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PPLPMDL0020000001	akron	OH	44333	2/1/2017
PPLPMDL0020000001	Akron	OH	44303	2/1/2017

CONFIDENTIAL

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PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/1/2017
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PPLPMDL0020000001	Uniontown	OH	44685	2/1/2017
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PPLPMDL0020000001	Akron	OH	44310	2/6/2017

CONFIDENTIAL

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PPLPMDL0020000001	Stow	OH	44224	2/9/2017	
PPLPMDL0020000001	Stow	OH	44224	2/9/2017	
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	2/9/2017	
PPLPMDL0020000001	Stow	OH	44224	2/9/2017	
PPLPMDL0020000001	North Olmsted	OH	44070	2/9/2017	
PPLPMDL0020000001	Westlake	OH	44145	2/9/2017	
PPLPMDL0020000001	Highland Heights	OH	44143	2/9/2017	
PPLPMDL0020000001	Euclid	OH	44132	2/9/2017	
PPLPMDL0020000001	Euclid	OH	44132	2/9/2017	

CONFIDENTIAL

PPLPMDL0020000001	Euclid	OH	44132	2/9/2017
PPLPMDL0020000001	Rocky River	OH	44116	2/9/2017
PPLPMDL0020000001	Rocky River	OH	44116	2/9/2017
PPLPMDL0020000001	Akron	OH	44301	2/9/2017
PPLPMDL0020000001	Fairlawn	OH	44333	2/9/2017
PPLPMDL0020000001	Middleburg Hts.	OH	44130	2/9/2017
PPLPMDL0020000001	Highland Heights	OH	44143	2/9/2017
PPLPMDL0020000001	Middleburg Hts.	OH	44130	2/9/2017
PPLPMDL0020000001	Middleburg Hts.	OH	44130	2/9/2017
PPLPMDL0020000001	Akron	OH	44333	2/10/2017
PPLPMDL0020000001	Akron	OH	44333	2/10/2017
PPLPMDL0020000001	Akron	OH	44333	2/10/2017
PPLPMDL0020000001	Independence	OH	44131	2/10/2017
PPLPMDL0020000001	Independence	OH	44131	2/10/2017
PPLPMDL0020000001	Independence	OH	44131	2/10/2017
PPLPMDL0020000001	Independence	OH	44131	2/10/2017
PPLPMDL0020000001	Independence	OH	44131	2/10/2017
PPLPMDL0020000001	North Olmsted	OH	44070	2/10/2017
PPLPMDL0020000001	Akron	OH	44312	2/10/2017
PPLPMDL0020000001	Akron	OH	44312	2/10/2017
PPLPMDL0020000001	Tallmadge	OH	44278	2/10/2017
PPLPMDL0020000001	Akron	OH	44312	2/10/2017
PPLPMDL0020000001	Cleveland	OH	44113	2/10/2017
PPLPMDL0020000001	Rocky River	OH	44116	2/10/2017
PPLPMDL0020000001	Rocky River	OH	44116	2/10/2017
PPLPMDL0020000001	Westlake	OH	44145	2/10/2017
PPLPMDL0020000001	Tallmadge	OH	44278	2/10/2017
PPLPMDL0020000001	Cleveland	OH	44113	2/10/2017
PPLPMDL0020000001	Hudson	OH	44236	2/10/2017
PPLPMDL0020000001	Tallmadge	OH	44278	2/10/2017
PPLPMDL0020000001	Hudson	OH	44236	2/10/2017
PPLPMDL0020000001	Hudson	OH	44236	2/10/2017
PPLPMDL0020000001	Hudson	OH	44236	2/10/2017
PPLPMDL0020000001	Hudson	OH	44236	2/10/2017
PPLPMDL0020000001	CLEVELAND	OH	44109	2/10/2017
PPLPMDL0020000001	Akron	OH	44312	2/10/2017
PPLPMDL0020000001	Akron	OH	44312	2/11/2017
PPLPMDL0020000001	Akron	OH	44312	2/11/2017
PPLPMDL0020000001	Westlake	OH	44145	2/13/2017
PPLPMDL0020000001	Lakewood	OH	44107	2/13/2017
PPLPMDL0020000001	Westlake	OH	44145	2/13/2017
PPLPMDL0020000001	Westlake	OH	44145	2/13/2017
PPLPMDL0020000001	Hudson	OH	44236	2/13/2017
PPLPMDL0020000001	Highland Heights	OH	44143	2/13/2017
PPLPMDL0020000001	Mayfield Heights	OH	44124	2/13/2017
PPLPMDL0020000001	Fairlawn	OH	44333	2/13/2017
PPLPMDL0020000001	akron	OH	44333	2/13/2017
PPLPMDL0020000001	Akron	OH	44320	2/13/2017
PPLPMDL0020000001	Akron	OH	44320	2/13/2017
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/13/2017
PPLPMDL0020000001	Fairlawn	OH	44333	2/13/2017
PPLPMDL0020000001	Uniontown	OH	44685	2/13/2017
PPLPMDL0020000001	Westlake	OH	44145	2/13/2017
PPLPMDL0020000001	Richmond Heights	OH	44143	2/13/2017
PPLPMDL0020000001	Stow	OH	44224	2/13/2017
PPLPMDL0020000001	Westlake	OH	44145	2/13/2017
PPLPMDL0020000001	Euclid	OH	44119	2/13/2017
PPLPMDL0020000001	Rocky River	OH	44116	2/13/2017
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/13/2017
PPLPMDL0020000001	Akron	OH	44320	2/13/2017
PPLPMDL0020000001	Westlake	OH	44145	2/13/2017
PPLPMDL0020000001	Lakewood	OH	44107	2/13/2017
PPLPMDL0020000001	Fairlawn	OH	44333	2/13/2017
PPLPMDL0020000001	Uniontown	OH	44685	2/13/2017
PPLPMDL0020000001	Westlake	OH	44145	2/13/2017
PPLPMDL0020000001	Euclid	OH	44119	2/13/2017
PPLPMDL0020000001	Mayfield Heights	OH	44124	2/13/2017
PPLPMDL0020000001	Fairlawn	OH	44333	2/13/2017
PPLPMDL0020000001	Lakewood	OH	44107	2/13/2017
PPLPMDL0020000001	Highland Heights	OH	44143	2/13/2017
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/13/2017
PPLPMDL0020000001	Uniontown	OH	44685	2/13/2017
PPLPMDL0020000001	Mayfield Heights	OH	44124	2/13/2017
PPLPMDL0020000001	Uniontown	OH	44685	2/14/2017
PPLPMDL0020000001	Uniontown	OH	44685	2/14/2017
PPLPMDL0020000001	Akron	OH	44305	2/14/2017
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	2/14/2017
PPLPMDL0020000001	Akron	OH	44312	2/14/2017
PPLPMDL0020000001	Cleveland	OH	44113	2/14/2017
PPLPMDL0020000001	Akron	OH	44312	2/14/2017
PPLPMDL0020000001	Cleveland	OH	44106	2/14/2017
PPLPMDL0020000001	Cleveland	OH	44134	2/14/2017
PPLPMDL0020000001	Cleveland	OH	44134	2/14/2017
PPLPMDL0020000001	Akron	OH	44302	2/14/2017
PPLPMDL0020000001	Akron	OH	44301	2/14/2017

CONFIDENTIAL

PPLPMDL0020000001	Cleveland	OH	44113	2/14/2017
PPLPMDL0020000001	Cleveland	OH	44106	2/14/2017
PPLPMDL0020000001	Akron	OH	44302	2/14/2017
PPLPMDL0020000001	Akron	OH	44312	2/14/2017
PPLPMDL0020000001	Cleveland	OH	44106	2/14/2017
PPLPMDL0020000001	Akron	OH	44313	2/15/2017
PPLPMDL0020000001	Fairlawn	OH	44333	2/15/2017
PPLPMDL0020000001	Fairlawn	OH	44333	2/15/2017
PPLPMDL0020000001	Fairlawn	OH	44333	2/15/2017
PPLPMDL0020000001	Munroe Falls	OH	44262	2/15/2017
PPLPMDL0020000001	NORTH OLMSTED	OH	44070	2/15/2017
PPLPMDL0020000001	Akron	OH	44313	2/15/2017
PPLPMDL0020000001	akron	OH	44333	2/15/2017
PPLPMDL0020000001	Cleveland	OH	44106	2/15/2017
PPLPMDL0020000001	Cleveland	OH	44113	2/15/2017
PPLPMDL0020000001	Cleveland	OH	44113	2/15/2017
PPLPMDL0020000001	Cleveland	OH	44195	2/15/2017
PPLPMDL0020000001	Akron	OH	44333	2/15/2017
PPLPMDL0020000001	Cleveland	OH	44130	2/15/2017
PPLPMDL0020000001	Fairlawn	OH	44333	2/15/2017
PPLPMDL0020000001	Akron	OH	44333	2/15/2017
PPLPMDL0020000001	Cleveland	OH	44113	2/15/2017
PPLPMDL0020000001	Akron	OH	44333	2/15/2017
PPLPMDL0020000001	Strongsville	OH	44136	2/15/2017
PPLPMDL0020000001	Euclid	OH	44119	2/15/2017
PPLPMDL0020000001	westlake	OH	44145	2/15/2017
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/16/2017
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/16/2017
PPLPMDL0020000001	Beachwood	OH	44122	2/16/2017
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/16/2017
PPLPMDL0020000001	Hudson	OH	44236	2/16/2017
PPLPMDL0020000001	Hudson	OH	44236	2/16/2017
PPLPMDL0020000001	Hudson	OH	44236	2/16/2017
PPLPMDL0020000001	Beachwood	OH	44122	2/16/2017
PPLPMDL0020000001	Parma	OH	44129	2/16/2017
PPLPMDL0020000001	Uniontown	OH	44685	2/16/2017
PPLPMDL0020000001	Copley	OH	44321	2/16/2017
PPLPMDL0020000001	Parma	OH	44129	2/16/2017
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/16/2017
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	2/16/2017
PPLPMDL0020000001	Uniontown	OH	44685	2/16/2017
PPLPMDL0020000001	Cleveland	OH	44113	2/16/2017
PPLPMDL0020000001	Lakewood	OH	44107	2/16/2017
PPLPMDL0020000001	Beachwood	OH	44122	2/16/2017
PPLPMDL0020000001	Cleveland	OH	44113	2/16/2017
PPLPMDL0020000001	Beachwood	OH	44122	2/16/2017
PPLPMDL0020000001	Beachwood	OH	44122	2/16/2017
PPLPMDL0020000001	Akron	OH	44312	2/17/2017
PPLPMDL0020000001	Akron	OH	44312	2/17/2017
PPLPMDL0020000001	Akron	OH	44312	2/17/2017
PPLPMDL0020000001	Akron	OH	44312	2/17/2017
PPLPMDL0020000001	Mayfield Hts	OH	44124	2/17/2017
PPLPMDL0020000001	Akron	OH	44333	2/17/2017
PPLPMDL0020000001	Akron	OH	44333	2/17/2017
PPLPMDL0020000001	Lakewood	OH	44107	2/17/2017
PPLPMDL0020000001	Akron	OH	44333	2/17/2017
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/17/2017
PPLPMDL0020000001	Cleveland	OH	44129	2/17/2017
PPLPMDL0020000001	Akron	OH	44320	2/17/2017
PPLPMDL0020000001	Akron	OH	44320	2/17/2017
PPLPMDL0020000001	Uniontown	OH	44685	2/17/2017
PPLPMDL0020000001	Cleveland	OH	44109	2/17/2017
PPLPMDL0020000001	Westlake	OH	44145	2/17/2017
PPLPMDL0020000001	Uniontown	OH	44685	2/17/2017
PPLPMDL0020000001	Cleveland	OH	44109	2/17/2017
PPLPMDL0020000001	Cleveland	OH	44111	2/17/2017
PPLPMDL0020000001	Akron	OH	44310	2/17/2017
PPLPMDL0020000001	Akron	OH	44310	2/17/2017
PPLPMDL0020000001	Akron	OH	44312	2/17/2017
PPLPMDL0020000001	Akron	OH	44320	2/17/2017
PPLPMDL0020000001	Tallmadge	OH	44278	2/17/2017
PPLPMDL0020000001	Akron	OH	44312	2/17/2017
PPLPMDL0020000001	Akron	OH	44310	2/17/2017
PPLPMDL0020000001	Tallmadge	OH	44278	2/17/2017
PPLPMDL0020000001	Uniontown	OH	44685	2/17/2017
PPLPMDL0020000001	Cleveland	OH	44129	2/17/2017
PPLPMDL0020000001	Tallmadge	OH	44278	2/17/2017
PPLPMDL0020000001	Akron	OH	44312	2/17/2017
PPLPMDL0020000001	Garfield Hts.	OH	44125	2/21/2017
PPLPMDL0020000001	Garfield Hts.	OH	44125	2/21/2017
PPLPMDL0020000001	Garfield Heights	OH	44125	2/21/2017
PPLPMDL0020000001	Garfield Hts.	OH	44125	2/21/2017
PPLPMDL0020000001	Northfield	OH	44067	2/21/2017
PPLPMDL0020000001	Northfield	OH	44067	2/21/2017
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/21/2017

Discussed new product launch procedures for Marc's.



CONFIDENTIAL

PPLPMDL0020000001	Mogadore	OH	44260	2/21/2017
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/21/2017
PPLPMDL0020000001	Westlake	OH	44145	2/21/2017
PPLPMDL0020000001	Stow	OH	44224	2/21/2017
PPLPMDL0020000001	Westlake	OH	44145	2/21/2017
PPLPMDL0020000001	Northfield	OH	44067	2/21/2017
PPLPMDL0020000001	Cleveland	OH	44106	2/21/2017
PPLPMDL0020000001	Independence	OH	44131	2/21/2017
PPLPMDL0020000001	Stow	OH	44224	2/21/2017
PPLPMDL0020000001	Stow	OH	44224	2/21/2017
PPLPMDL0020000001	Independence	OH	44131	2/21/2017
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/21/2017
PPLPMDL0020000001	Lakewood	OH	44107	2/21/2017
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/21/2017
PPLPMDL0020000001	Independence	OH	44131	2/21/2017
PPLPMDL0020000001	Stow	OH	44224	2/21/2017
PPLPMDL0020000001	Euclid	OH	44132	2/22/2017
PPLPMDL0020000001	Westlake	OH	44145	2/22/2017
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/22/2017
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/22/2017
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/22/2017
PPLPMDL0020000001	Hudson	OH	44236	2/22/2017
PPLPMDL0020000001	NORTH OLMSTED	OH	44070	2/22/2017
PPLPMDL0020000001	NORTH OLMSTED	OH	44070	2/22/2017
PPLPMDL0020000001	Beachwood	OH	44122	2/22/2017
PPLPMDL0020000001	Beachwood	OH	44122	2/22/2017
PPLPMDL0020000001	Stow	OH	44224	2/22/2017
PPLPMDL0020000001	Akron	OH	44312	2/22/2017
PPLPMDL0020000001	Akron	OH	44312	2/22/2017
PPLPMDL0020000001	Akron	OH	44333	2/22/2017
PPLPMDL0020000001	Hudson	OH	44236	2/22/2017
PPLPMDL0020000001	Hudson	OH	44236	2/22/2017
PPLPMDL0020000001	Akron	OH	44312	2/22/2017
PPLPMDL0020000001	Akron	OH	44333	2/22/2017
PPLPMDL0020000001	Hudson	OH	44236	2/22/2017
PPLPMDL0020000001	Hudson	OH	44236	2/22/2017
PPLPMDL0020000001	Akron	OH	44333	2/22/2017
PPLPMDL0020000001	Akron	OH	44312	2/22/2017
PPLPMDL0020000001	westlake	OH	44145	2/22/2017
PPLPMDL0020000001	Beachwood	OH	44122	2/22/2017
PPLPMDL0020000001	Hudson	OH	44236	2/23/2017
PPLPMDL0020000001	Uniontown	OH	44685	2/23/2017
PPLPMDL0020000001	Uniontown	OH	44685	2/23/2017
PPLPMDL0020000001	Uniontown	OH	44685	2/23/2017
PPLPMDL0020000001	Uniontown	OH	44685	2/23/2017
PPLPMDL0020000001	Hudson	OH	44236	2/23/2017
PPLPMDL0020000001	Hudson	OH	44236	2/23/2017
PPLPMDL0020000001	Hudson	OH	44236	2/23/2017
PPLPMDL0020000001	Hudson	OH	44236	2/23/2017
PPLPMDL0020000001	Hudson	OH	44236	2/23/2017
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/23/2017
PPLPMDL0020000001	Fairlawn	OH	44333	2/23/2017
PPLPMDL0020000001	Akron	OH	44312	2/23/2017
PPLPMDL0020000001	Stow	OH	44224	2/23/2017
PPLPMDL0020000001	Hudson	OH	44236	2/23/2017
PPLPMDL0020000001	Cleveland	OH	44113	2/23/2017
PPLPMDL0020000001	Cleveland	OH	44113	2/23/2017
PPLPMDL0020000001	Brook Park	OH	44142	2/23/2017
PPLPMDL0020000001	Parma	OH	44129	2/23/2017
PPLPMDL0020000001	Lakewood	OH	44107	2/23/2017
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/23/2017
PPLPMDL0020000001	Lakewood	OH	44107	2/23/2017
PPLPMDL0020000001	Cleveland	OH	44113	2/23/2017
PPLPMDL0020000001	Lakewood	OH	44107	2/23/2017
PPLPMDL0020000001	Rocky River	OH	44116	2/23/2017
PPLPMDL0020000001	Rocky River	OH	44116	2/23/2017
PPLPMDL0020000001	Parma	OH	44129	2/23/2017
PPLPMDL0020000001	Cleveland	OH	44130	2/23/2017
PPLPMDL0020000001	Cleveland	OH	44113	2/23/2017
PPLPMDL0020000001	Lakewood	OH	44107	2/23/2017
PPLPMDL0020000001	Lakewood	OH	44107	2/23/2017
PPLPMDL0020000001	Parma	OH	44129	2/23/2017
PPLPMDL0020000001	Fairlawn	OH	44333	2/23/2017
PPLPMDL0020000001	Twinsburg	OH	44087	2/23/2017
PPLPMDL0020000001				Addressed their concerns about Adding Hysingla ER would attract high cost patient with Adverse Selection slide deck. Wants to know if Purdue has data on pharmacy cost of OxyContin patient vs. non-OxyContin patient. I will check with internal group and get back to the customer.
PPLPMDL0020000001	Cleveland Hts	OH	44118	2/24/2017
PPLPMDL0020000001	Akron	OH	44312	2/24/2017
PPLPMDL0020000001	Fairlawn	OH	44333	2/24/2017
PPLPMDL0020000001	Akron	OH	44312	2/24/2017
PPLPMDL0020000001	Akron	OH	44312	2/24/2017
PPLPMDL0020000001	Fairlawn	OH	44333	2/24/2017
PPLPMDL0020000001	Stow	OH	44224	2/24/2017
PPLPMDL0020000001	Akron	OH	44320	2/24/2017
PPLPMDL0020000001	Akron	OH	44320	2/24/2017
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/24/2017

CONFIDENTIAL

PPLPMDL0020000001	Cleveland Hts.	OH	44118	2/24/2017
PPLPMDL0020000001	Cleveland	OH	44109	2/24/2017
PPLPMDL0020000001	Cleveland Hts.	OH	44118	2/24/2017
PPLPMDL0020000001	Cleveland	OH	44109	2/24/2017
PPLPMDL0020000001	Akron	OH	44320	2/24/2017
PPLPMDL0020000001	North Royalton	OH	44133	2/24/2017
PPLPMDL0020000001	Cleveland	OH	44109	2/24/2017
PPLPMDL0020000001	C. Falls	OH	44223	2/24/2017
PPLPMDL0020000001	Stow	OH	44224	2/24/2017
PPLPMDL0020000001	Akron	OH	44333	2/24/2017
PPLPMDL0020000001	Middleburg Hts.	OH	44130	2/24/2017
PPLPMDL0020000001	Akron	OH	44312	2/24/2017
PPLPMDL0020000001	Akron	OH	44312	2/24/2017
PPLPMDL0020000001	Middleburg Hts.	OH	44130	2/24/2017
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/24/2017
PPLPMDL0020000001	Akron	OH	44333	2/24/2017
PPLPMDL0020000001	Stow	OH	44224	2/24/2017
PPLPMDL0020000001	Uniontown	OH	44685	2/27/2017
PPLPMDL0020000001	Uniontown	OH	44685	2/27/2017
PPLPMDL0020000001	Uniontown	OH	44685	2/27/2017
PPLPMDL0020000001	Uniontown	OH	44685	2/27/2017
PPLPMDL0020000001	Uniontown	OH	44685	2/27/2017
PPLPMDL0020000001	Uniontown	OH	44685	2/27/2017
PPLPMDL0020000001	Uniontown	OH	44685	2/27/2017
PPLPMDL0020000001	Uniontown	OH	44685	2/27/2017
PPLPMDL0020000001	Akron	OH	44333	2/27/2017
PPLPMDL0020000001	akron	OH	44333	2/27/2017
PPLPMDL0020000001	Cleveland	OH	44113	2/27/2017
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/27/2017
PPLPMDL0020000001	Cleveland	OH	44113	2/27/2017
PPLPMDL0020000001	Cleveland	OH	44135	2/27/2017
PPLPMDL0020000001	Akron	OH	44310	2/27/2017
PPLPMDL0020000001	Akron	OH	44310	2/27/2017
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/27/2017
PPLPMDL0020000001	Cleveland	OH	44130	2/27/2017
PPLPMDL0020000001	Akron	OH	44310	2/27/2017
PPLPMDL0020000001	Akron	OH	44312	2/27/2017
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/27/2017
PPLPMDL0020000001	Cleveland	OH	44113	2/28/2017
PPLPMDL0020000001	Cleveland	OH	44113	2/28/2017
PPLPMDL0020000001	Cleveland	OH	44113	2/28/2017
PPLPMDL0020000001	Uniontown	OH	44685	2/28/2017
PPLPMDL0020000001	Uniontown	OH	44685	2/28/2017
PPLPMDL0020000001	Uniontown	OH	44685	2/28/2017
PPLPMDL0020000001	Uniontown	OH	44685	2/28/2017
PPLPMDL0020000001	Uniontown	OH	44685	2/28/2017
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	2/28/2017
PPLPMDL0020000001	Fairlawn	OH	44333	2/28/2017
PPLPMDL0020000001	Cleveland	OH	44113	2/28/2017
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/28/2017
PPLPMDL0020000001	Fairlawn	OH	44333	2/28/2017
PPLPMDL0020000001	Akron	OH	44312	2/28/2017
PPLPMDL0020000001	Fairlawn	OH	44333	2/28/2017
PPLPMDL0020000001	Bedford	OH	44146	2/28/2017
PPLPMDL0020000001	Westlake	OH	44145	2/28/2017
PPLPMDL0020000001	Akron	OH	44312	2/28/2017
PPLPMDL0020000001	Cleveland	OH	44113	2/28/2017
PPLPMDL0020000001	Bedford	OH	44146	2/28/2017
PPLPMDL0020000001	Parma	OH	44129	2/28/2017
PPLPMDL0020000001	Cleveland	OH	44113	2/28/2017
PPLPMDL0020000001	Akron	OH	44333	2/28/2017
PPLPMDL0020000001	Maple Heights	OH	44137	2/28/2017
PPLPMDL0020000001	Parma	OH	44129	2/28/2017
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/28/2017
PPLPMDL0020000001	Fairlawn	OH	44333	2/28/2017
PPLPMDL0020000001	Akron	OH	44333	2/28/2017
PPLPMDL0020000001	Fairlawn	OH	44333	2/28/2017
PPLPMDL0020000001	Fairlawn	OH	44333	3/1/2017
PPLPMDL0020000001	NORTH OLMSTED	OH	44070	3/1/2017
PPLPMDL0020000001	Stow	OH	44224	3/1/2017
PPLPMDL0020000001	akron	OH	44333	3/1/2017
PPLPMDL0020000001	Independence	OH	44131	3/1/2017
PPLPMDL0020000001	Cleveland	OH	44111	3/1/2017
PPLPMDL0020000001	Westlake	OH	44145	3/1/2017
PPLPMDL0020000001	Westlake	OH	44145	3/1/2017
PPLPMDL0020000001	Cleveland	OH	44113	3/1/2017
PPLPMDL0020000001	Independence	OH	44131	3/1/2017
PPLPMDL0020000001	Parma	OH	44134	3/1/2017
PPLPMDL0020000001	Stow	OH	44224	3/1/2017
PPLPMDL0020000001	Westlake	OH	44145	3/1/2017
PPLPMDL0020000001	Cleveland	OH	44135	3/1/2017
PPLPMDL0020000001	Cleveland	OH	44135	3/1/2017
PPLPMDL0020000001	Stow	OH	44224	3/1/2017
PPLPMDL0020000001	Lakewood	OH	44107	3/1/2017
PPLPMDL0020000001	Cleveland	OH	44113	3/1/2017

CONFIDENTIAL

PPLPMDL0020000001	Akron	OH	44333	3/1/2017
PPLPMDL0020000001	Lakewood	OH	44107	3/1/2017
PPLPMDL0020000001	Fairlawn	OH	44333	3/1/2017
PPLPMDL0020000001	Stow	OH	44224	3/1/2017
PPLPMDL0020000001	Westlake	OH	44145	3/1/2017
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PPLPMDL0020000001	westlake	OH	44145	3/1/2017
PPLPMDL0020000001	Fairlawn	OH	44333	3/1/2017
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PPLPMDL0020000001	Akron	OH	44312	3/2/2017
PPLPMDL0020000001	Westlake	OH	44145	3/2/2017
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	3/2/2017
PPLPMDL0020000001	Westlake	OH	44145	3/2/2017
PPLPMDL0020000001	Parma	OH	44130	3/2/2017
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PPLPMDL0020000001	Cleveland	OH	44134	3/2/2017
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PPLPMDL0020000001	Parma	OH	44130	3/2/2017
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PPLPMDL0020000001	Uniontown	OH	44685	3/3/2017
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/3/2017
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PPLPMDL0020000001	Mayfield Heights	OH	44124	3/3/2017
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PPLPMDL0020000001	Euclid	OH	44119	3/3/2017
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/3/2017
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PPLPMDL0020000001	Tallmadge	OH	44278	3/3/2017
PPLPMDL0020000001	Akron	OH	44319	3/3/2017
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PPLPMDL0020000001	Beachwood	OH	44122	3/6/2017
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PPLPMDL0020000001	Garfield Hts.	OH	44125	3/7/2017
PPLPMDL0020000001	Northfield	OH	44067	3/7/2017
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PPLPMDL0020000001	Westlake	OH	44145	3/7/2017
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PPLPMDL0020000001	Cleveland	OH	44130	3/7/2017
PPLPMDL0020000001	Westlake	OH	44145	3/7/2017

CONFIDENTIAL

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PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/10/2017
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PPLPMDL0020000001	Fairlawn	OH	44333	3/17/2017
PPLPMDL0020000001	Cleveland	OH	44104	3/17/2017
PPLPMDL0020000001	Euclid	OH	44119	3/17/2017

CONFIDENTIAL

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PPLPMDL0020000001	Westlake	OH	44145	3/20/2017
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PPLPMDL0020000001	Rocky River	OH	44116	3/20/2017
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PPLPMDL0020000001	Akron	OH	44305	3/21/2017
PPLPMDL0020000001	Euclid	OH	44119	3/21/2017
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CONFIDENTIAL

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PPLPMDL0020000001	Fairview Park	OH	44126	3/23/2017
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PPLPMDL0020000001	Cuyahoga Falls	OH	44223	3/23/2017
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PPLPMDL0020000001	Highland Heights	OH	44143	3/24/2017
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PPLPMDL0020000001	Westlake	OH	44145	3/29/2017
PPLPMDL0020000001	North Olmsted	OH	44070	3/29/2017
PPLPMDL0020000001	akron	OH	44333	3/29/2017

CONFIDENTIAL

PPLPMDL0020000001	Fairlawn	OH	44333	3/29/2017
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PPLPMDL0020000001	Mayfield Heights	OH	44124	3/29/2017
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PPLPMDL0020000001	Chagrin Falls	OH	44023	3/29/2017
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PPLPMDL0020000001	Lakewood	OH	44107	3/29/2017
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PPLPMDL0020000001	North Olmsted	OH	44070	3/31/2017
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PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/3/2017
PPLPMDL0020000001	Bedford	OH	44146	4/3/2017
PPLPMDL0020000001	Richmond Heights	OH	44143	4/3/2017
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PPLPMDL0020000001	Cuyahoga Falls	OH	44221	4/3/2017
PPLPMDL0020000001	Akron	OH	44310	4/3/2017
PPLPMDL0020000001	Bedford	OH	44146	4/3/2017
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CONFIDENTIAL

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PPLPMDL0020000001	Tallmadge	OH	44278	4/5/2017
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PPLPMDL0020000001	Westlake	OH	44145	4/5/2017
PPLPMDL0020000001	Strongsville	OH	44136	4/5/2017
PPLPMDL0020000001	Mayfield Heights	OH	44124	4/5/2017
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	4/5/2017

Sent email to Dr. Souzdalnitski to set up a meeting to discuss pain interests and OIC. He responded with the following: "I just realized that you are unlikely going to benefit from my expertise since I have no interest in clinical research of opioids, or medicines which alleviate their side effects. Most of our patients have chronic musculoskeletal pain or headaches. The best treatment for opioid-induced constipation in these patients is weaning from opioids. That is exactly what we are doing in our practice"

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CONFIDENTIAL

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CONFIDENTIAL

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-Dr. Minster stated the following regarding discussion of OIC (Discussion cut short):1)Very knowledgeable about OIC and constipation in general. However, when treating patients with opioids she only addresses OIC when patients indicate it is a problem. Doesn't treat prophylactically with any OTC products.2)Would like to hear more about Symproic once the product is de-scheduled. -Most of discussion focused on pain management and opioid use.3)Treats non-cancer patients4)Supports and appreciates what Purdue has done in trying to combat the abuse epidemic.5)Really gets the patient involved in their treatment of pain. 6)Discusses with patients the risks of opioid use. Leaves decision to the patient whether they want to be treated with opioids after learning about the risks. Does drug screenings on all of her patients treated with opioids. 7)Likes Butrans and tries to use it as often as she can.8)Was not aware that OxyContin had been reformulated with OADR. We discussed the reformulation.9)Would use Hysingla ER more if there was a 10 mg dose available. Feels that when transitioning someone from IR such as Percocet 20 mg/day that 20 mg of Hysingla ER is too high. 10)When prescribing opioids, products with ADP do not influence her decision. Feels that appropriate patient education and monitoring work. 11)Touched upon our educational resources, will discuss further in the future with her and her staff.

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CONFIDENTIAL

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CONFIDENTIAL

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CONFIDENTIAL

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PPLPMDL0020000001	Independence	OH	44131	5/11/2017
PPLPMDL0020000001	Independence	OH	44131	5/11/2017

<font color=blue><b>CHUDAKOB's query on 05/12/2017</b></font>Rod, while I understand how difficult this Dr. can be, how does your next call objective help you move the call forward?<font color=green><b>GRIFFRO's response on 05/12/2017</b></font>Until this group gets more experience with Hysingla ER, it reminds me to basically cover everything until I find what is most important to the clinicians. The doctor's main concern is the patients ability to access the product at the pharmacy. I gave him the pharmacy locator on a previous call and my plan is to follow up on that as well.<font color=blue><b>CHUDAKOB added notes on 05/17/2017</b></font>I would like to see much more specific, goal oriented next call objectives. I believe you understand how important this can be to furthering the sales call.

CONFIDENTIAL

PPLPMDL0020000001	Fairlawn	OH	44333	5/11/2017
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	5/11/2017
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PPLPMDL0020000001	Independence	OH	44131	5/11/2017
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PPLPMDL0020000001	Parma	OH	44129	5/11/2017
PPLPMDL0020000001	Akron	OH	44305	5/11/2017
PPLPMDL0020000001	Fairlawn	OH	44333	5/11/2017
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PPLPMDL0020000001	Twinsburg	OH	44087	5/12/2017
PPLPMDL0020000001	Westlake	OH	44145	5/12/2017
PPLPMDL0020000001	BEACHWOOD	OH	44122	5/12/2017
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PPLPMDL0020000001	Mayfield Hts	OH	44124	5/12/2017
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PPLPMDL0020000001	C. Falls	OH	44223	5/12/2017
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PPLPMDL0020000001	Cuyahoga Falls	OH	44223	5/15/2017
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CONFIDENTIAL

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CONFIDENTIAL

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PPLPMDL0020000001	Northfield	OH	44067	5/23/2017
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PPLPMDL0020000001	Akron	OH	44333	5/23/2017
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PPLPMDL0020000001	Northfield	OH	44067	5/23/2017
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CONFIDENTIAL

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PPLPMDL0020000001	Middleburg Hts.	OH	44130	6/1/2017
PPLPMDL0020000001	Tallmadge	OH	44278	6/1/2017

CONFIDENTIAL

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PPLPMDL0020000001				
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PPLPMDL0020000001	Bedford	OH	44146	6/7/2017
PPLPMDL0020000001	Euclid	OH	44132	6/7/2017

Dr. Nickels stated the following during our discussion of OIC:1) Very knowledgeable about OIC and treatments.2) Asks patients at every visit about side effects especially constipation. Patients are well educated on this and patients will ask him about treatment because of seeing ad on TV or Movantik poster that is in the waiting room.3) Begins patients with non-pharmacologic and OTCs (ie, Miralax, Senokot) treatments.4) When using Rx medication, likes Movantik and uses often.5) Explains to patients that medication is to be taken daily and is not a "prn" medication.6) Not aware of any Drug-Drug Interactions or side effects reported by patients.7) Interested in having a follow-up discussion once Symproic is de-scheduled.8) He does see utility in opioids with abuse deterrent properties and likes Hysingla ER.9) Conducts thorough assessments of patients before prescribing opioids (UDT and vitals every visit, PDMP review quarterly).10) Refers patients with addiction issues to rehab and works with them to ensure enrollment.11) Really appreciates the non-branded educational materials that Purdue offers and spoke highly of the RxReacts programs.12) Runs a Suboxone clinic once a week.

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PPLPMDL0020000001	Euclid	OH	44132	6/7/2017
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CONFIDENTIAL

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PPLPMDL0020000001	Cuyahoga Falls	OH	44223	6/15/2017

Participated in Symproic product presentation to Envision clinical team and trade relation department. Clinical pharmacist Leo inquired about de-scheduling timeline of Symproic. We discussed the class de-scheduled of other PAMORAs.

CONFIDENTIAL

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CONFIDENTIAL

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CONFIDENTIAL

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CONFIDENTIAL

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PPLPMDL0020000001	Westlake	OH	44145	7/24/2017
PPLPMDL0020000001	Fairlawn	OH	44333	7/24/2017
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PPLPMDL0020000001	Bay Village	OH	44140	7/24/2017
PPLPMDL0020000001	Mayfield Heights	OH	44124	7/25/2017
PPLPMDL0020000001	Euclid	OH	44119	7/25/2017
PPLPMDL0020000001	Fairlawn	OH	44333	7/25/2017
PPLPMDL0020000001	Uniontown	OH	44685	7/25/2017
PPLPMDL0020000001	Cleveland	OH	44109	7/25/2017
PPLPMDL0020000001	Cleveland	OH	44113	7/25/2017
PPLPMDL0020000001	Parma	OH	44129	7/25/2017
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PPLPMDL0020000001	Uniontown	OH	44685	7/25/2017
PPLPMDL0020000001	Uniontown	OH	44685	7/25/2017
PPLPMDL0020000001	Cleveland	OH	44130	7/25/2017
PPLPMDL0020000001	Mayfield Hts	OH	44124	7/25/2017

CONFIDENTIAL

PPLPMDL0020000001	Westlake	OH	44145	7/25/2017	
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PPLPMDL0020000001	Mayfield Hts	OH	44124	7/25/2017	
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PPLPMDL0020000001	Cleveland	OH	44134	7/25/2017	
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PPLPMDL0020000001	Cuyahoga Falls	OH	44221	7/26/2017	
PPLPMDL0020000001	Strongsville	OH	44136	7/26/2017	
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PPLPMDL0020000001	Berea	OH	44017	7/26/2017	
PPLPMDL0020000001	Cleveland	OH	44130	7/26/2017	
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PPLPMDL0020000001	Cleveland	OH	44195	7/28/2017	
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CONFIDENTIAL

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PPLPMDL0020000001	Cleveland	OH	44130	7/28/2017	
PPLPMDL0020000001	Tallmadge	OH	44278	7/28/2017	
PPLPMDL0020000001	Uniontown	OH	44685	7/28/2017	
PPLPMDL0020000001	Cleveland	OH	44113	7/28/2017	
PPLPMDL0020000001	Cleveland	OH	44113	7/31/2017	
PPLPMDL0020000001	North Olmsted	OH	44070	7/31/2017	
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PPLPMDL0020000001	Brooklyn	OH	44144	8/4/2017	
PPLPMDL0020000001	Uniontown	OH	44685	8/4/2017	
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CONFIDENTIAL

PPLPMDL0020000001	Uniontown	OH	44685	8/4/2017
PPLPMDL0020000001	Garfield Hts	OH	44125	8/4/2017
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PPLPMDL0020000001	Rocky River	OH	44116	8/4/2017
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PPLPMDL0020000001	North Olmsted	OH	44070	8/7/2017
PPLPMDL0020000001	Westlake	OH	44145	8/7/2017
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PPLPMDL0020000001	Stow	OH	44224	8/11/2017
PPLPMDL0020000001	Fairlawn	OH	44333	8/11/2017
PPLPMDL0020000001	Garfield Heights	OH	44125	8/11/2017

CONFIDENTIAL

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CONFIDENTIAL

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CONFIDENTIAL

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PPLPMDL0020000001	North Olmsted	OH	44070	8/23/2017	
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CONFIDENTIAL

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CONFIDENTIAL

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PPLPMDL0020000001	Barberton	OH	44203	9/7/2017	
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PPLPMDL0020000001	Akron	OH	44310	9/7/2017	
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PPLPMDL0020000001	Stow	OH	44224	9/8/2017	
PPLPMDL0020000001	Stow	OH	44224	9/8/2017	
PPLPMDL0020000001	Fairlawn	OH	44333	9/8/2017	

CONFIDENTIAL

PPLPMDL0020000001	Hudson	OH	44236	9/8/2017	
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CONFIDENTIAL

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PPLPMDL0020000001	Cuyahoga Falls	OH	44223	9/13/2017	
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PPLPMDL0020000001	North Olmsted	OH	44070	9/14/2017	
PPLPMDL0020000001	Tallmadge	OH	44278	9/14/2017	
PPLPMDL0020000001	Akron	OH	44313	9/14/2017	
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PPLPMDL0020000001	Akron	OH	44333	9/18/2017	
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CONFIDENTIAL

PPLPMDL0020000001	Fairlawn	OH	44333	9/18/2017	
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CONFIDENTIAL

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PPLPMDL0020000001	Independence	OH	44131	9/21/2017	
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	9/21/2017	
PPLPMDL0020000001	Berea	OH	44017	9/21/2017	
PPLPMDL0020000001	Cleveland	OH	44130	9/21/2017	
PPLPMDL0020000001	Beachwood	OH	44122	9/21/2017	
PPLPMDL0020000001	Middleburg Heights	OH	44130	9/21/2017	
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PPLPMDL0020000001	Westlake	OH	44145	9/25/2017	
PPLPMDL0020000001	Mayfield Heights	OH	44124	9/25/2017	
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PPLPMDL0020000001	Beachwood	OH	44122	9/25/2017	
PPLPMDL0020000001	Westlake	OH	44145	9/25/2017	
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PPLPMDL0020000001	Fairlawn	OH	44333	9/25/2017	
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PPLPMDL0020000001	Akron	OH	44305	9/26/2017	
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PPLPMDL0020000001	Cuyahoga Falls	OH	44223	9/26/2017	
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CONFIDENTIAL

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CONFIDENTIAL

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PPLPMDL0020000001	Cuyahoga Falls	OH	44221	10/2/2017
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CONFIDENTIAL

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CONFIDENTIAL

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PPLPMDL0020000001	Woodmere	OH	44122	10/16/2017	
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PPLPMDL0020000001	North Olmsted	OH	44070	10/18/2017	
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PPLPMDL0020000001	Uniontown	OH	44685	10/20/2017	
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CONFIDENTIAL

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PPLPMDL0020000001	Tallmadge	OH	44278	10/27/2017	

CONFIDENTIAL

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PPLPMDL0020000001	Fairlawn	OH	44333	10/27/2017
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CONFIDENTIAL

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PPLPMDL0020000001	Fairlawn	OH	44333	11/15/2017	
PPLPMDL0020000001	Middleburg Heights	OH	44130	11/15/2017	
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	11/15/2017	
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PPLPMDL0020000001	North Olmsted	OH	44070	11/15/2017	
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PPLPMDL0020000001	North Olmsted	OH	44070	11/15/2017	
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PPLPMDL0020000001	Cleveland	OH	44130	11/15/2017	
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PPLPMDL0020000001	Berea	OH	44017	11/16/2017	
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PPLPMDL0020000001	Stow	OH	44224	11/16/2017	
PPLPMDL0020000001	Lakewood	OH	44107	11/17/2017	
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	11/17/2017	
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PPLPMDL0020000001	Cleveland	OH	44113	11/17/2017	
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CONFIDENTIAL

PPLPMDL0020000001	Beachwood	OH	44122	11/17/2017	
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PPLPMDL0020000001	Lakewood	OH	44107	11/17/2017	
PPLPMDL0020000001	Highland Heights	OH	44143	11/17/2017	
PPLPMDL0020000001	Akron	OH	44320	11/17/2017	
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PPLPMDL0020000001	Independence	OH	44131	11/20/2017	
PPLPMDL0020000001	Westlake	OH	44145	11/20/2017	
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PPLPMDL0020000001	Middleburg Heights	OH	44130	11/20/2017	
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PPLPMDL0020000001	Mayfield Hts	OH	44124	11/27/2017	
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CONFIDENTIAL

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PPLPMDL0020000001	Barberton	OH	44203	12/1/2017
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CONFIDENTIAL

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CONFIDENTIAL

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PPLPMDL0020000001	Hudson	OH	44236	12/14/2017	
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PPLPMDL0020000001	Fairlawn	OH	44333	12/18/2017	
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	12/18/2017	
PPLPMDL0020000001	Brooklyn	OH	44144	12/18/2017	
PPLPMDL0020000001	Akron	OH	44313	12/18/2017	
PPLPMDL0020000001	Akron	OH	44319	12/18/2017	
PPLPMDL0020000001	Independence	OH	44131	12/18/2017	
PPLPMDL0020000001	Parma	OH	44129	12/18/2017	
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	12/18/2017	
PPLPMDL0020000001	Akron	OH	44310	12/18/2017	
PPLPMDL0020000001	Westlake	OH	44145	12/18/2017	
PPLPMDL0020000001	Westlake	OH	44145	12/18/2017	
PPLPMDL0020000001	Parma	OH	44129	12/18/2017	
PPLPMDL0020000001	Fairlawn	OH	44333	12/18/2017	
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	12/18/2017	
PPLPMDL0020000001	Fairlawn	OH	44333	12/18/2017	
PPLPMDL0020000001	Beachwood	OH	44122	12/19/2017	
PPLPMDL0020000001	Beachwood	OH	44122	12/19/2017	
PPLPMDL0020000001	Cleveland Heights	OH	44118	12/19/2017	
PPLPMDL0020000001	Waterford	OH	45786	12/19/2017	
PPLPMDL0020000001	Waterford	OH	45786	12/19/2017	
PPLPMDL0020000001	Beachwood	OH	44122	12/19/2017	
PPLPMDL0020000001	Beachwood	OH	44122	12/19/2017	
PPLPMDL0020000001	Cleveland Heights	OH	44118	12/19/2017	
PPLPMDL0020000001	Beachwood	OH	44122	12/19/2017	
PPLPMDL0020000001	Cleveland	OH	44134	12/19/2017	
PPLPMDL0020000001	Cleveland	OH	44134	12/19/2017	
PPLPMDL0020000001	Waterford	OH	45786	12/19/2017	
PPLPMDL0020000001	Northfield	OH	44067	12/19/2017	
PPLPMDL0020000001	Hudson	OH	44236	12/19/2017	
PPLPMDL0020000001	Stow	OH	44224	12/19/2017	
PPLPMDL0020000001	Akron	OH	44320	12/19/2017	
PPLPMDL0020000001	Northfield	OH	44067	12/19/2017	
PPLPMDL0020000001	Hudson	OH	44236	12/19/2017	
PPLPMDL0020000001	Hudson	OH	44236	12/19/2017	
PPLPMDL0020000001	Fairlawn	OH	44333	12/20/2017	
PPLPMDL0020000001	Akron	OH	44320	12/20/2017	
PPLPMDL0020000001	Akron	OH	44320	12/20/2017	
PPLPMDL0020000001	Mayfield Hts	OH	44124	12/20/2017	
PPLPMDL0020000001	Mayfield Hts	OH	44124	12/20/2017	
PPLPMDL0020000001	Akron	OH	44313	12/20/2017	
PPLPMDL0020000001	Cleveland	OH	44113	12/20/2017	
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	12/20/2017	
PPLPMDL0020000001	Fairlawn	OH	44333	12/20/2017	
PPLPMDL0020000001	Akron	OH	44313	12/20/2017	
PPLPMDL0020000001	Bedford	OH	44146	12/20/2017	



CONFIDENTIAL

PPLPMDL0020000001	Akron	OH	44313	12/20/2017	
PPLPMDL0020000001	Fairlawn	OH	44333	12/20/2017	
PPLPMDL0020000001	Cleveland	OH	44130	12/21/2017	
PPLPMDL0020000001	Cleveland	OH	44130	12/21/2017	
PPLPMDL0020000001	Akron	OH	44313	12/21/2017	
PPLPMDL0020000001	Westlake	OH	44145	12/21/2017	
PPLPMDL0020000001	Westlake	OH	44145	12/21/2017	
PPLPMDL0020000001	Akron	OH	44312	12/22/2017	
PPLPMDL0020000001	Akron	OH	44313	1/2/2018	
PPLPMDL0020000001	Beachwood	OH	44122	1/2/2018	
PPLPMDL0020000001	Highland Heights	OH	44143	1/2/2018	
PPLPMDL0020000001	Strongsville	OH	44136	1/2/2018	
PPLPMDL0020000001	Akron	OH	44320	1/2/2018	
PPLPMDL0020000001	Akron	OH	44320	1/2/2018	
PPLPMDL0020000001	Cleveland	OH	44105	1/2/2018	
PPLPMDL0020000001	Richmond Heights	OH	44143	1/2/2018	
PPLPMDL0020000001	Cleveland	OH	44122	1/2/2018	
PPLPMDL0020000001	Lakewood	OH	44107	1/2/2018	
PPLPMDL0020000001	Beachwood	OH	44122	1/2/2018	
PPLPMDL0020000001	Akron	OH	44320	1/2/2018	
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	1/2/2018	
PPLPMDL0020000001	Hudson	OH	44236	1/2/2018	
PPLPMDL0020000001	Bedford	OH	44146	1/3/2018	
PPLPMDL0020000001	Brooklyn	OH	44144	1/3/2018	
PPLPMDL0020000001	Brooklyn	OH	44144	1/3/2018	
PPLPMDL0020000001	Brooklyn	OH	44144	1/3/2018	
PPLPMDL0020000001	Cleveland Heights	OH	44118	1/3/2018	
PPLPMDL0020000001	Beachwood	OH	44122	1/3/2018	
PPLPMDL0020000001	Bedford	OH	44146	1/3/2018	
PPLPMDL0020000001	Mayfield Hts	OH	44124	1/3/2018	
PPLPMDL0020000001	Solon	OH	44139	1/3/2018	
PPLPMDL0020000001	Brooklyn	OH	44144	1/3/2018	
PPLPMDL0020000001	Bedford	OH	44146	1/3/2018	
PPLPMDL0020000001	Independence	OH	44131	1/3/2018	
PPLPMDL0020000001	Oakwood	OH	45873	1/4/2018	
PPLPMDL0020000001	Berea	OH	44017	1/4/2018	
PPLPMDL0020000001	Cleveland	OH	44130	1/4/2018	
PPLPMDL0020000001	Cleveland	OH	44130	1/4/2018	
PPLPMDL0020000001	Cleveland	OH	44130	1/4/2018	
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PPLPMDL0020000001	Westlake	OH	44145	1/5/2018	
PPLPMDL0020000001	Akron	OH	44320	1/5/2018	
PPLPMDL0020000001	Cleveland	OH	44124	1/5/2018	
PPLPMDL0020000001	Bedford	OH	44146	1/5/2018	
PPLPMDL0020000001	Lyndhurst	OH	44124	1/5/2018	
PPLPMDL0020000001	Euclid	OH	44119	1/5/2018	
PPLPMDL0020000001	Akron	OH	44312	1/5/2018	
PPLPMDL0020000001	Beachwood	OH	44122	1/5/2018	
PPLPMDL0020000001	Solon	OH	44139	1/5/2018	
PPLPMDL0020000001	Cleveland	OH	44113	1/5/2018	
PPLPMDL0020000001	Lyndhurst	OH	44124	1/5/2018	
PPLPMDL0020000001	Highland Heights	OH	44143	1/5/2018	
PPLPMDL0020000001	Stow	OH	44224	1/5/2018	
PPLPMDL0020000001	Akron	OH	44313	1/5/2018	
PPLPMDL0020000001	Westlake	OH	44145	1/5/2018	
PPLPMDL0020000001	Richmond Hts	OH	44143	1/5/2018	
PPLPMDL0020000001	Westlake	OH	44145	1/5/2018	
PPLPMDL0020000001	Fairlawn	OH	44333	1/8/2018	
PPLPMDL0020000001	Munroe Falls	OH	44262	1/8/2018	
PPLPMDL0020000001	Euclid	OH	44119	1/8/2018	
PPLPMDL0020000001	Cleveland	OH	44130	1/9/2018	Send RxReacts programs (week 3 April show) & ETMC PDFs. Also, Symproic Pharm Guide.
PPLPMDL0020000001	Brooklyn	OH	44144	1/10/2018	
PPLPMDL0020000001	Akron	OH	44313	1/10/2018	
PPLPMDL0020000001	Akron	OH	44313	1/10/2018	
PPLPMDL0020000001	Barberton	OH	44203	1/10/2018	
PPLPMDL0020000001	Bedford	OH	44146	1/10/2018	
PPLPMDL0020000001	Parma	OH	44129	1/10/2018	
PPLPMDL0020000001	Akron	OH	44312	1/10/2018	
PPLPMDL0020000001	Independence	OH	44131	1/10/2018	
PPLPMDL0020000001	Akron	OH	44312	1/10/2018	
PPLPMDL0020000001	Cleveland	OH	44130	1/10/2018	
PPLPMDL0020000001	Cleveland	OH	44195	1/10/2018	
PPLPMDL0020000001	Cleveland	OH	44118	1/10/2018	
PPLPMDL0020000001	Akron	OH	44312	1/10/2018	
PPLPMDL0020000001	Bedford	OH	44146	1/10/2018	
PPLPMDL0020000001	Akron	OH	44307	1/10/2018	
PPLPMDL0020000001	Parma	OH	44129	1/10/2018	
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	1/10/2018	
PPLPMDL0020000001	Stow	OH	44224	1/10/2018	
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	1/10/2018	
PPLPMDL0020000001	Fairlawn	OH	44333	1/10/2018	
PPLPMDL0020000001	Cleveland	OH	44129	1/10/2018	
PPLPMDL0020000001	Brooklyn	OH	44144	1/10/2018	
PPLPMDL0020000001	Cleveland	OH	44129	1/10/2018	
PPLPMDL0020000001	Bedford	OH	44146	1/10/2018	

CONFIDENTIAL

PPLPMDL0020000001	Akron	OH	44312	1/10/2018
PPLPMDL0020000001	Fairlawn	OH	44333	1/12/2018
PPLPMDL0020000001	Akron	OH	44313	1/12/2018
PPLPMDL0020000001	Berea	OH	44017	1/12/2018
PPLPMDL0020000001	Cleveland	OH	44130	1/12/2018
PPLPMDL0020000001	Lakewood	OH	44107	1/12/2018
PPLPMDL0020000001	Cleveland	OH	44102	1/12/2018
PPLPMDL0020000001	Lakewood	OH	44107	1/12/2018
PPLPMDL0020000001	Cleveland	OH	44115	1/12/2018
PPLPMDL0020000001	Westlake	OH	44145	1/12/2018
PPLPMDL0020000001	Lakewood	OH	44107	1/12/2018
PPLPMDL0020000001	Lakewood	OH	44107	1/12/2018
PPLPMDL0020000001	Westlake	OH	44145	1/12/2018
PPLPMDL0020000001	Cleveland	OH	44130	1/12/2018
PPLPMDL0020000001	Westlake	OH	44145	1/12/2018
PPLPMDL0020000001	Fairlawn	OH	44333	1/12/2018
PPLPMDL0020000001	Middleburg Heights	OH	44130	1/12/2018
PPLPMDL0020000001	Stow	OH	44224	1/12/2018
PPLPMDL0020000001	Independence	OH	44131	1/12/2018
PPLPMDL0020000001	Bay Village	OH	44140	1/12/2018
PPLPMDL0020000001	Cleveland	OH	44124	1/15/2018
PPLPMDL0020000001	Richmond Heights	OH	44143	1/15/2018
PPLPMDL0020000001	Woodmere	OH	44122	1/15/2018
PPLPMDL0020000001	Beachwood	OH	44122	1/15/2018
PPLPMDL0020000001	Cleveland Heights	OH	44118	1/15/2018
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PPLPMDL0020000001	Solon	OH	44139	1/15/2018
PPLPMDL0020000001	Lyndhurst	OH	44124	1/15/2018
PPLPMDL0020000001	Highland Heights	OH	44143	1/15/2018
PPLPMDL0020000001	Bedford	OH	44146	1/15/2018
PPLPMDL0020000001	University Hts	OH	44118	1/16/2018
PPLPMDL0020000001	Akron	OH	44320	1/16/2018
PPLPMDL0020000001	Mayfield Heights	OH	44124	1/16/2018
PPLPMDL0020000001	Beachwood	OH	44122	1/16/2018
PPLPMDL0020000001	Beachwood	OH	44122	1/16/2018
PPLPMDL0020000001	Uniontown	OH	44685	1/16/2018
PPLPMDL0020000001	Beachwood	OH	44122	1/16/2018
PPLPMDL0020000001	Beachwood	OH	44122	1/16/2018
PPLPMDL0020000001	Warrensville Heights	OH	44122	1/16/2018
PPLPMDL0020000001	Garfield Heights	OH	44125	1/17/2018
PPLPMDL0020000001	Fairlawn	OH	44333	1/17/2018
PPLPMDL0020000001	Cleveland	OH	44129	1/17/2018
PPLPMDL0020000001	Cleveland	OH	44109	1/17/2018
PPLPMDL0020000001	Cleveland	OH	44113	1/17/2018
PPLPMDL0020000001	Brooklyn	OH	44144	1/17/2018
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PPLPMDL0020000001	Barberton	OH	44203	1/17/2018
PPLPMDL0020000001	Independence	OH	44131	1/17/2018
PPLPMDL0020000001	Brooklyn	OH	44144	1/17/2018
PPLPMDL0020000001	Cleveland	OH	44130	1/17/2018
PPLPMDL0020000001	Cleveland	OH	44130	1/17/2018
PPLPMDL0020000001	Rocky River	OH	44116	1/17/2018
PPLPMDL0020000001	Cleveland	OH	44135	1/17/2018
PPLPMDL0020000001	Brooklyn	OH	44144	1/17/2018
PPLPMDL0020000001	Cleveland	OH	44129	1/17/2018
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PPLPMDL0020000001	Fairlawn	OH	44333	1/17/2018
PPLPMDL0020000001	Cleveland	OH	44130	1/17/2018
PPLPMDL0020000001	Brooklyn	OH	44144	1/17/2018
PPLPMDL0020000001	Cleveland Heights	OH	44118	1/18/2018
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PPLPMDL0020000001	Bedford	OH	44146	1/18/2018
PPLPMDL0020000001	Akron	OH	44313	1/18/2018
PPLPMDL0020000001	Akron	OH	44310	1/18/2018
PPLPMDL0020000001	Akron	OH	44313	1/18/2018
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PPLPMDL0020000001	Richmond Hts	OH	44143	1/18/2018
PPLPMDL0020000001	Akron	OH	44313	1/19/2018
PPLPMDL0020000001	Munroe Falls	OH	44262	1/19/2018
PPLPMDL0020000001	Akron	OH	44320	1/19/2018
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PPLPMDL0020000001	Fairlawn	OH	44333	1/19/2018
PPLPMDL0020000001	Hudson	OH	44236	1/19/2018
PPLPMDL0020000001	Hudson	OH	44236	1/19/2018
PPLPMDL0020000001	Cleveland	OH	44130	1/19/2018
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	1/19/2018
PPLPMDL0020000001	Hudson	OH	44236	1/19/2018
PPLPMDL0020000001	Lakewood	OH	44107	1/22/2018
PPLPMDL0020000001	Fairlawn	OH	44333	1/22/2018
PPLPMDL0020000001	Akron	OH	44302	1/22/2018
PPLPMDL0020000001	Munroe Falls	OH	44262	1/22/2018

CONFIDENTIAL

PPLPMDL0020000001	Akron	OH	44302	1/22/2018
PPLPMDL0020000001	Parma	OH	44129	1/22/2018
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PPLPMDL0020000001	Chagrin Falls	OH	44023	1/22/2018
PPLPMDL0020000001	Brooklyn	OH	44144	1/22/2018
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	1/22/2018
PPLPMDL0020000001	Independence	OH	44131	1/22/2018
PPLPMDL0020000001	Akron	OH	44320	1/22/2018
PPLPMDL0020000001	Lakewood	OH	44107	1/22/2018
PPLPMDL0020000001	Fairlawn	OH	44333	1/22/2018
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	1/22/2018
PPLPMDL0020000001	Akron	OH	44307	1/22/2018
PPLPMDL0020000001	Akron	OH	44320	1/22/2018
PPLPMDL0020000001	Akron	OH	44320	1/22/2018
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	1/22/2018
PPLPMDL0020000001	Akron	OH	44320	1/22/2018
PPLPMDL0020000001	Fairlawn	OH	44333	1/22/2018
PPLPMDL0020000001	Brooklyn	OH	44144	1/22/2018
PPLPMDL0020000001	Cleveland	OH	44129	1/22/2018
PPLPMDL0020000001	Garfield Heights	OH	44125	1/23/2018
PPLPMDL0020000001	North Olmsted	OH	44070	1/23/2018
PPLPMDL0020000001	Garfield Heights	OH	44125	1/23/2018
PPLPMDL0020000001	Westlake	OH	44145	1/23/2018
PPLPMDL0020000001	Lakewood	OH	44107	1/23/2018
PPLPMDL0020000001	Westlake	OH	44145	1/23/2018
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PPLPMDL0020000001	Middleburg Heights	OH	44130	1/23/2018
PPLPMDL0020000001	Bay Village	OH	44140	1/23/2018
PPLPMDL0020000001	Cleveland	OH	44129	1/24/2018
PPLPMDL0020000001	Westlake	OH	44145	1/24/2018
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PPLPMDL0020000001	Westlake	OH	44145	1/24/2018
PPLPMDL0020000001	Lakewood	OH	44107	1/24/2018
PPLPMDL0020000001	Brooklyn	OH	44144	1/24/2018
PPLPMDL0020000001	Akron	OH	44312	1/24/2018
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PPLPMDL0020000001	Parma	OH	44134	1/24/2018
PPLPMDL0020000001	Highland Heights	OH	44143	1/24/2018
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PPLPMDL0020000001	Brooklyn	OH	44144	1/24/2018
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PPLPMDL0020000001	Westlake	OH	44145	1/24/2018
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PPLPMDL0020000001	Westlake	OH	44145	1/24/2018
PPLPMDL0020000001	Cleveland	OH	44130	1/25/2018
PPLPMDL0020000001	Cleveland	OH	44109	1/25/2018
PPLPMDL0020000001	Cleveland	OH	44111	1/25/2018
PPLPMDL0020000001	Cleveland	OH	44106	1/25/2018
PPLPMDL0020000001	Cleveland	OH	44130	1/25/2018
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PPLPMDL0020000001	Middleburg Heights	OH	44130	1/25/2018
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PPLPMDL0020000001	Cleveland	OH	44115	1/25/2018
PPLPMDL0020000001	Berea	OH	44017	1/25/2018
PPLPMDL0020000001	Cleveland	OH	44130	1/25/2018
PPLPMDL0020000001	Cleveland	OH	44103	1/25/2018
PPLPMDL0020000001	Cleveland	OH	44113	1/25/2018
PPLPMDL0020000001	Hudson	OH	44236	1/26/2018
PPLPMDL0020000001	Stow	OH	44224	1/26/2018
PPLPMDL0020000001	Tallmadge	OH	44278	1/26/2018
PPLPMDL0020000001	Tallmadge	OH	44278	1/26/2018
PPLPMDL0020000001	Munroe Falls	OH	44262	1/26/2018
PPLPMDL0020000001	Akron	OH	44320	1/26/2018
PPLPMDL0020000001	Westlake	OH	44145	1/26/2018
PPLPMDL0020000001	Uniontown	OH	44685	1/26/2018
PPLPMDL0020000001	Independence	OH	44131	1/26/2018
PPLPMDL0020000001	Uniontown	OH	44685	1/26/2018
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PPLPMDL0020000001	Richmond Heights	OH	44143	1/26/2018
PPLPMDL0020000001	Cleveland	OH	44113	1/26/2018
PPLPMDL0020000001	Independence	OH	44131	1/26/2018
PPLPMDL0020000001	Cleveland	OH	44109	1/26/2018
PPLPMDL0020000001	Akron	OH	44312	1/26/2018
PPLPMDL0020000001	Euclid	OH	44132	1/26/2018
PPLPMDL0020000001	Lakewood	OH	44107	1/26/2018
PPLPMDL0020000001	Cleveland	OH	44102	1/26/2018
PPLPMDL0020000001	Akron	OH	44302	1/26/2018
PPLPMDL0020000001	Cleveland	OH	44103	1/26/2018
PPLPMDL0020000001	Parma	OH	44129	1/26/2018
PPLPMDL0020000001	Cleveland	OH	44109	1/26/2018

CONFIDENTIAL

PPLPMDL0020000001	Highland Heights	OH	44143	1/26/2018	
PPLPMDL0020000001	Akron	OH	44312	1/26/2018	
PPLPMDL0020000001	Uniontown	OH	44685	1/26/2018	
PPLPMDL0020000001	Hudson	OH	44236	1/26/2018	
PPLPMDL0020000001	Richmond Heights	OH	44143	1/26/2018	
PPLPMDL0020000001	Akron	OH	44312	1/26/2018	
PPLPMDL0020000001	Bedford	OH	44146	1/29/2018	
PPLPMDL0020000001	Cleveland	OH	44113	1/29/2018	
PPLPMDL0020000001	Solon	OH	44139	1/29/2018	
PPLPMDL0020000001	Cleveland	OH	44113	1/29/2018	
PPLPMDL0020000001	Fairlawn	OH	44333	1/29/2018	
PPLPMDL0020000001	Cleveland	OH	44113	1/29/2018	
PPLPMDL0020000001	Lyndhurst	OH	44124	1/29/2018	
PPLPMDL0020000001	Lyndhurst	OH	44124	1/29/2018	
PPLPMDL0020000001	Fairlawn	OH	44333	1/29/2018	
PPLPMDL0020000001	Bedford	OH	44146	1/29/2018	
PPLPMDL0020000001	Brooklyn	OH	44144	1/30/2018	
PPLPMDL0020000001	Waterford	OH	45786	1/30/2018	
PPLPMDL0020000001	Waterford	OH	45786	1/30/2018	
PPLPMDL0020000001	Northfield	OH	44067	1/30/2018	
PPLPMDL0020000001	Cleveland	OH	44113	1/30/2018	
PPLPMDL0020000001	Waterford	OH	45786	1/30/2018	
PPLPMDL0020000001	Fairlawn	OH	44333	1/31/2018	
PPLPMDL0020000001	Akron	OH	44320	1/31/2018	
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PPLPMDL0020000001	Cleveland	OH	44195	1/31/2018	
PPLPMDL0020000001	Cleveland	OH	44124	1/31/2018	
PPLPMDL0020000001	Beachwood	OH	44122	1/31/2018	
PPLPMDL0020000001	Cleveland Heights	OH	44118	1/31/2018	
PPLPMDL0020000001	Cleveland	OH	44122	1/31/2018	
PPLPMDL0020000001	Beachwood	OH	44122	1/31/2018	
PPLPMDL0020000001	Cleveland	OH	44135	1/31/2018	
PPLPMDL0020000001	Akron	OH	44307	1/31/2018	
PPLPMDL0020000001	Westlake	OH	44145	1/31/2018	
PPLPMDL0020000001	Fairlawn	OH	44333	1/31/2018	
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	1/31/2018	
PPLPMDL0020000001	Bedford	OH	44146	1/31/2018	
PPLPMDL0020000001	Richmond Hts	OH	44143	1/31/2018	
PPLPMDL0020000001	Warrensville Heights	OH	44122	2/1/2018	
PPLPMDL0020000001	Independence	OH	44131	2/1/2018	
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PPLPMDL0020000001	Parma	OH	44129	2/1/2018	
PPLPMDL0020000001	Cleveland	OH	44103	2/1/2018	
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PPLPMDL0020000001	Cleveland	OH	44129	2/2/2018	
PPLPMDL0020000001	Barberton	OH	44203	2/2/2018	
PPLPMDL0020000001	Brooklyn	OH	44144	2/2/2018	
PPLPMDL0020000001	Akron	OH	44313	2/5/2018	
PPLPMDL0020000001	Cleveland	OH	44109	2/5/2018	
PPLPMDL0020000001	Cleveland	OH	44114	2/5/2018	
PPLPMDL0020000001	Cleveland	OH	44114	2/5/2018	
PPLPMDL0020000001	Euclid	OH	44119	2/5/2018	
PPLPMDL0020000001	Cleveland	OH	44109	2/5/2018	
PPLPMDL0020000001	Cleveland	OH	44109	2/5/2018	
PPLPMDL0020000001	Cleveland	OH	44130	2/5/2018	
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PPLPMDL0020000001	Cleveland	OH	44195	2/5/2018	
PPLPMDL0020000001	Cleveland	OH	44135	2/5/2018	
PPLPMDL0020000001	Cleveland	OH	44115	2/5/2018	
PPLPMDL0020000001	Stow	OH	44224	2/5/2018	
PPLPMDL0020000001	Cuyahoga Falls	OH	44221	2/5/2018	
PPLPMDL0020000001	Akron	OH	44307	2/5/2018	
PPLPMDL0020000001	Parma	OH	44129	2/5/2018	
PPLPMDL0020000001	Cleveland	OH	44130	2/5/2018	
PPLPMDL0020000001	Parma	OH	44129	2/5/2018	
PPLPMDL0020000001	Middleburg Heights	OH	44130	2/5/2018	
PPLPMDL0020000001	Cuyahoga Falls	OH	44223	2/5/2018	
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PPLPMDL0020000001	Parma	OH	44129	2/6/2018	
PPLPMDL0020000001	Garfield Hts	OH	44125	2/6/2018	
PPLPMDL0020000001	Parma	OH	44134	2/6/2018	
PPLPMDL0020000001	Euclid	OH	44132	2/6/2018	
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PPLPMDL0020000001	Cleveland	OH	44134	2/6/2018	
PPLPMDL0020000001	Garfield Hts	OH	44125	2/6/2018	
PPLPMDL0020000001	Cleveland	OH	44130	2/6/2018	
PPLPMDL0020000001	Cleveland	OH	44130	2/6/2018	

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PPLPMDL0020000001	Cleveland	OH	44130	2/6/2018	
PPLPMDL0020000001	Brooklyn	OH	44144	2/6/2018	
PPLPMDL0020000001	Fairlawn	OH	44333	2/7/2018	
PPLPMDL0020000001	Tallmadge	OH	44278	2/7/2018	
PPLPMDL0020000001	Tallmadge	OH	44278	2/7/2018	
PPLPMDL0020000001	Parma	OH	44134	2/7/2018	
PPLPMDL0020000001	Garfield Hts	OH	44125	2/7/2018	
PPLPMDL0020000001	Cleveland	OH	44130	2/7/2018	
PPLPMDL0020000001	Lakewood	OH	44107	2/7/2018	
PPLPMDL0020000001	Lakewood	OH	44107	2/7/2018	
PPLPMDL0020000001	Fairview Park	OH	44126	2/7/2018	
PPLPMDL0020000001	Lakewood	OH	44107	2/7/2018	
PPLPMDL0020000001	Westlake	OH	44145	2/7/2018	
PPLPMDL0020000001	Cleveland	OH	44129	2/7/2018	
PPLPMDL0020000001	Akron	OH	44313	2/7/2018	
PPLPMDL0020000001	Cleveland	OH	44129	2/7/2018	
PPLPMDL0020000001	Westlake	OH	44145	2/7/2018	



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Report of Matthew Perri III in Case no. 17-OP-45004 (N.D. Ohio) and Case No. 18-OP-45090 (N.D. Ohio)

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#### Schedule 14: Manufacturing Defendants' Use of Advocacy

Jane Porter & Hershel Jick, Addiction Rare In Patients Treated With Narcotics, The New Eng. J. of Medicine at 123 (1980) ("Porter & Jick")	Document	Bates
2018	030114 20747-DDMAC R5363.pdf	TEVA_MDL_A_11121064
2018	030224 20747-DDMAC R5613.pdf	TEVA_MDL_A_11121188
2008	2008 Kadian Conversion Guide (KAD17D0179)	ACTAVIS0583049
2010	2010 Kadian Conversion Guide (KAD1006)	ACTAVIS0249135
2018	990528 20747-DDMAC 2253 R5676.pdf	TEVA_MDL_A_11106509
2006	AAD Slide Kit Module 2 D4A 3-30-06 (edited rr kr).ppt	TEVA_MDL_A_02493194
2013	Abuse liability measures for use in analgesic clinical trials in patients with pain: IMMPACT recommendations	Janssen
2015	ACCEPTED MANUSCRIPT	MNK-T1_0001335256
2007	Actiq - Module 2.pdf	TEVA_MDL_A_08637209
2009	Acute Pain Management Message Platform - final - May 2009.ppt	JAN-MS-00327227
2008	Advances in Pain Management Volume 2, Number 1 2008	TEVA_MDL_A_00829533
2000	Analgesic agents 2-00.ppt	JAN-MS-02728658
2000	Analgesic agents 8-00.ppt	JAN-MS-02728659
	Articles R/T Kadian	ALLERGAN_MDL_00814551
2002	Assessing Risk of Substance Abuse Presentation	Janssen
2012	Breakthrough Pain Article	INSYS-MDL-002242025
2012	Breakthrough Pain Email	INSYS-MDL-002242024
2012	Breakthrough Pain Email	INSYS-MDL-002242059
2003	Cephalon Sales Training	TEVA_MDL_A_02701793
2007	Challenges in the Development of Prescription Abuse-deterrent Formulations	INSYS-MDL-006841600
2007	Clinical Journal of Pain Article: Challenges in the Development of Prescription Opioid Abuse-deterrent Formulations	Janssen
2011	color shopping manuscript(09).doc	JAN-MS-01465794
2009	Continuous Low Back Pain JAN1038 254x180 Back Pain.pdf	JAN-MS-00879120
2006	Current thinking on misuse, abuse and diversion: a clinician's perspective on Risk Minimization. Cephalon Consultants Meeting	TEVA_MDL_A_00710698
2000	dur resist 1299.ppt	JAN-MS-02728682
1999	dur resist 899.ppt	JAN-MS-02728638
1999	dur resist 899.ppt	JAN-MS-02728686
2006	Duragesic Addiction Results.ppt	JAN-MS-00957869
2007	Effective Management of Persistent and Breakthrough Pain: A Case Based Dialogue for Nurses. CME Teleconference Series 2 of 2	TEVA_MDL_A_00841926
2006	EndoAdBdMCM2006.ppt	ENDO-OPIOID_MDL-02076786
2005	EPI OAD	ENDO-OPIOID_MDL-03389831
2009	exsummdrft.doc	JAN-MS-00386085
2013	FDA Impact of Approved Drug Labeling on Chronic Opioid Therapy Part 15 - Public Hearing February 8 2013	Janssen
2007	Ives, et. al. <u>Predictors of opioid misuse in patients with chronic pain: a prospective cohort study</u>	TEVA_MDL_A_00038464
2013	January 2013 Kadian Conversion Guide	ACTAVIS0656749
2015	John Coleman email. Insys Dion Reimer bcc'd.	INSYS-MDL-007684401
2012	Kadian Conversion Guide Reference #14	ACTAVIS0928815
2012	Kadian Conversion Guide Reference #15	ACTAVIS0928790
2012	Kadian Conversion Guide Reference #19	ACTAVIS0928379
2012	Kadian Conversion Guide Reference #7 - Baumann. Pain Management	ACTAVIS0998867
2012	Kolodny slides 09202012 (D0440306).pptx	END00321529
2013	Medical Education for Pain and Addiction (circulated by email)	INSYS-MDL-004471490
2005	Miller_PsychClin_2004.pdf	TEVA_MDL_A_11344729
2008	NPC & JCAHO 2001.pdf	JAN-MS-00326044
2002	opioid lecture - Jan '02 draft short rev.ppt	ENDO-OPIOID_MDL-02344125
2001	opioid lecture - Nov 27 draft.ppt	ENDO-OPIOID_MDL-02344133
2001	opioid lecture - Nov 30 draft rev - longer version.ppt	ENDO-OPIOID_MDL-02356577
2008	Opioid Substitution .pdf	ENDO-OPIOID_MDL-01764993

2013	Opioid Substitution to Improve the Effectiveness of Chronic Noncancer Pain Control: A Chart Review	MNK-T1_0002313478
	Opioid Substitution to Improve the Effectiveness of Chronic Noncancer Pain Control: A Chart Review	MNK-T1_0002313453
	Opioid Therapy in the Management of Chronic Pain.	TEVA_MDL_A_01166115
2001	Opioidphobia PPT	Janssen
2002	Optimizing Chronic Pain Management with Duragesic Presentation	JAN-MS-00310474
	Packet of information, Karen White's deposition again	PKY183359411
2009	pain 6.8.pdf	TEVA_MDL_A_07572634
	Pain Management Problems And Progress	TEVA_MDL_A_04559320
1999	pain management.ppt	JAN-MS-02728650
2000	Pain Needs Assessment - Cephalon.pdf	MNK-T1_0002413477
2010	Pain Needs Assessment - Cephalon.pdf	TEVA_MDL_A_07175879
	Partners Against Pain - Taking Control of Your Pain	PKY180135250
	Partners Against Pain - Taking Control of Your Pain	PKY180138527
	Partners Against Pain - Working Together to Effectively Relieve Your Pain	PKY180148771
	Passik SD 2005 - Tufts Presentation (pendulum).pdf	MNK-T1_0001291024
2013	Personalized medicine and opioid analgesic prescribing for chronic pain Opportunities and challenges	Janssen
2006	Practical Issues in Prescribing Opioids: Maximizing Pain Relief and Minimizing Risk	TEVA_MDL_A_00831206
2006	Practical Issues in Prescribing Opioids: Maximizing Pain Relief and Minimizing Risk	TEVA_MDL_A_00831206
	Presentation Notes	TEVA_MDL_A_02703318
2005	RE: EPI OAD	ENDO-OPIOID_MDL-02980566
2010	RE: request	TEVA_MDL_A_07031743
2010	RE: request	TEVA_MDL_A_07031760
2008	Risk Management Plan for Tapentadol IR July 11 2008	Janssen
2003	sales rep training opioids - VT 04-22-03.ppt	ENDO-OPIOID_MDL-02356776
2013	Schnoll et. al. Medical Education for Pain and Addiction	INSYS-MDL-004471481
2002	Study Summary Report	TEVA_MDL_A_05609331
2009	Tapentadol Unbranded Acute Pain Message Platform	
2008	Tapentadol Unbranded Acute Pain Message Platform 010509.ppt	JAN-MS-00339425
2017	The Joint Commissions's Pain Standards: Origins and Evolution	MNK-T1_0001141812
2007	Updated Conversion Guide - Two MLR Submissions (Medical, Legal Regulatory Approval Sign-Off)	ACTAVIS1150596
2003	UPDATED Opioids.ppt	ENDO-OPIOID_MDL-02356920
	Use of Opioids in Chronic Non-Cancer Pain.	PKY180138049
2002	VT additions opioid lecture - Jan '02 draft short rev.ppt	ENDO-OPIOID_MDL-02344200
	Presentation Notes	TEVA_MDL_A_02703319
	Cephalon Sales Training and development Journal Club	TEVA_MDL_A_05319058
Russell K. Portenoy & Kathleen M. Foley, Chronic Use Of Opioid Analgesics In Non-Malignant Pain: Report Of 38 Cases, Pain 25.2, 171-186 (1986)("Portenoy & Foley")		
	Column1	Column2
2013	188223_FACETS_Science and Nature of Pain_1-2013.pdf	PPLP003449971
2008	2008 Kadian Conversion Guide (KAD17D0179)	ACTAVIS0583049
2010	2010 Kadian Conversion Guide (KADI1006)	ACTAVIS0249135
2004	3a Website Content Actiq OAP 3B	TEVA_MDL_A_00718332
2002	Achieving Balance in Chronic Pain management, A National Pain Education Council Program	Janssen
2012	Actavis MoxDuo M2 Managing Acute Pain D4 4.20.12.docx	ALLERGAN_MDL_00546350
2012	Actavis MoxDuo M2 Managing Acute Pain D6 6 19 12.docx	ALLERGAN_MDL_00455441
2012	Actavis MoxDuo M2 Managing Acute Pain D8 7.25.12 Tracked Version.docx	ALLERGAN_MDL_00537139
2018	Actiq calls with notes prior to 2006.csv	TEVA_MDL_A_02416207
2013	Addressing the Barriers to Effective Pain Management and Issues of Opioid Misuse and Abuse	Janssen
Unk	Articles R/T Kadian	ALLERGAN_MDL_00814551
2002	Assessing Risk of Substance Abuse Presentation	Janssen
2009	B7012-RVA PMK Retained VA.pdf Partners Against Pain - Pain Management Kit	PPLP004119228

1999	Breakthrough pain: characteristics and impact in patients with cancer pain.	INSYS-MDL-006000414
1996	Brochures/Leaflets OxyContin Tablets NDA #20-553	PDD1501603708
2009	C6998 Providing Relief Preventing Abuse.doc	PPLP004122389
2016	CDC guideline talking points	PPLP003906734
2016	CDC guideline talking points	PPLP003906820
2016	CDC Guideline Talking points	PPLP003907286
2016	CDC guideline talking points	PPLP003907337
2016	CDC Guideline Talking Points - For Use by Medical Affairs: Version 2	PPLP003906427
2013	Chronic Pain Management Strategies and Lessons From the Military: A Narrative Review	Janssen
2010	Covidien Train-the-Trainer - EXALGO REMS & C.A.R.E.S. Alliance - BIBLIOGRAPHY	MNK-T1_0001125603
1995	Data Review for Formularies - Oxycontin	PDD1502305933
2002	DID0013256.pdf	PURCHI-000701440
2003	DID0015205.pdf	PURCHI-000719476
2001	Ethics, Law and Regulations.ppt	PPLPC022000008235
2010	EXALGO REMS & CARES Alliance - Train-the-Trainer - CARES Alliance Education Module - Steven Passik, PhD	MNK-T1_0001279950
2012	FOR REVIEW MOX-IR-003 MOXDUO Learning Module 2 - Managing Acute Pain D8 6 25 12.docx	ALLERGAN_MDL_00536782
2007	Foundations of Opioid Risk Management	MNK-T1_0001543091
2007	Foundations of Opioid Risk Management (Clin J Pain)	TEVA_MDL_A_02171795
2007	Kadian Binder 2-A, MSL Training Binders, Version 1 (Alpharma)	ALLERGAN_MDL_00813853
2007	Kadian Binder 2-B, MSL Training Binders, version 1 (Alpharma)	ALLERGAN_MDL_00813385
2003	Letter to FDA: Draft Promotional Materials for Review, NDA 20553	PDD8013022607
2004	Mercadante - Portenoy	TEVA_MDL_A_03915764
2016	MSL_MS_CDC FAQ 5.10.2016.update.Clean for Veeva Review.Proofread and MRL comments reconciled 5.20.16 redlineASR.docx	PPLP003906878
2016	MSL_MS_CDC FAQ 5.10.2016.update.Clean for Veeva Review.Proofread comments reconciled 5.19.16 redline.docx	PPLP003907218
2016	MSL_MS_CDC FAQ_FINAL- update 08 01 16 DRAFT v2.docx	PPLP003907380
2016	MSL_MS_CDC FAQ_v2 update 08 17 16 DRAFT v2.new content in highlight (3).docx	PPLP003907243
2008	NEO Pathways-promotional video	Janssen
2012	Obtaining References	INSYS-MDL-006838404
2011	Opioid Analgesics in Primary Care: Challenges and New Advances in the Management of Noncancer Pain	MNK-T1_0002675768
2001	Opioidphobia PPT	Janssen
1996-1997	OxyContin Formulary Kit	PDD1501602961
2001	OxyContin Formulary Kit	PDD1501609237
2000	Product Data Brochure	SHC-000026844
2012	Promotional Material (Subsys)	INSYS-MDL-000023160
2013	Promotional Presentation for Reps Updated 5-20-13	INSYS-MDL-000104275
2006	Providing Relief-Preventing Abuse.pdf	PPLP004120974
2004	Purdue Library and Information Services	PPLPC018000048086
2015	rec_87620.PDF.pdf	TEVA_MDL_A_06750767
2010	Sinatra 2006 (non).pdf	MNK-T1_0002676226
2016	Speaker Notes_Subsys Promotional PPT	INSYS-MDL-008336398
2009	Tapentadol Unbranded Acute Pain Message Platform	Janssen
2002	The Management of Persistent Pain in Older Persons Part 1	Janssen
2002	The Management of Persistent Pain in Older Persons Part 2	Janssen
1996	Transmittal of Advertisements and Promotional Labeling For Drugs for Human Use: Brochure/Leaflet OxyContin Tablets	PKY180111590
2007	Two MLR Submissions (Medical, Legal Regulatory Approval Sign-Off) (Updated Conversion Guide)	ACTAVIS1150596
2002	Update on Long-acting Opioids and Appropriate Use of Transdermal Fentanyl	Janssen

2000	DFT or Product Specialist Training Report	E17_00005557
	Sales Letter	PDD1501720206
1996	OxyContin Formulary Kit	PKY180112081
	Partners Against Pain Website Review	PPLP003518484
AAPM & APS, The Use of Opioids for the Treatment of Chronic Pain: A consensus statement from the American Academy of Pain Medicine and the American Pain Society, 6 J. of Pain 1, 77-79 (1997)("1997 APS/AAPM Consensus Statement")	Column2	Column3
	"OxyContin Tablets 1st Quarter 2000" PPT	PKY181135066
1999	Compilation of JCAHO and LTC materials	PKY181137693
2010	Management of Moderate to Severe Chronic Low Back Pain, (Speaker Bureau Slide Deck)	ENDO-OR-CID-01286320
2002	"The JCAHO Pain Standards - Materials to Help You Comply" -	PKY181261657
11/13/2003 0:00	"Best Practice in Pain Management:	TEVA_MD_L_A_04773295
11/13/2003 0:00	"Best Practice in Pain Management:	TEVA_MD_L_A_04774499
2004	"Pain Question & Answer with Dr. Fishman."	CHI_000191891
8/13/2017 0:00	001396.pdf	PPLP003863147
8/13/2017 0:00	001605.pdf	PPLP003863314
8/13/2017 0:00	001693.pdf	PPLP003863402
8/13/2017 0:00	001990.pdf	PPLP003862349
10/25/2016 0:00	002_PAP157_B7012-RVA.pdf	PPLP003326602
10/25/2016 0:00	003_PAP157_A7012-RVA.pdf	PPLP003326662
8/18/2017 0:00	025345.pdf	PPLP003889865
6/11/2012 0:00	127312_Is it Pain_BC BS LA.pdf	PPLP003444089
4/5/2013 0:00	188127_FACETS_Cognitive Impairment_2-2013 rev.pdf	PPLP003449987
2003	2000 October LITERATURE LIST	PKY183150801
2/24/2003 0:00	2003 February Literature List	PKY183150747
2003	2003 Version of Brochure, Knowledge Point Production - Pain Action Guide	KP360_OHIOMDL_000372837
2004	2004 January Pain Monitor Question & Answer by Scott M. Fishman MD	CHI_001104283_image
12/13/2009 0:00	2005 Actiq Brand Plan.pdf	TEVA_MD_L_A_00698220
4/8/2005 0:00	2005 Actiq FINAL marketing plan 1004.doc	TEVA_MD_L_A_01161245
10/25/2004 0:00	2005 FINAL marketing plan 1004.doc	TEVA_MD_L_A_01161653
1/14/2005 0:00	2005 Pain Franchise ACTIQ Marketing Plan Update	TEVA_CHI_00008718
10/25/2006 0:00	2006-11-02-Opioid Analgesics-Pearls & Pitfalls-FINAL.pdf	PPLPC018000110563
2006	2007 POPAN Leadership Manual	CHI_001368856
2008	2008.02.20 Draft Results KOL Roundtable Paid for by Endo	CHI_002217846
2008	2009.02.18 APF JnJ Let's Talk Pain Coalition Contact Information	CHI_001614462
2004	3a Website Content Actiq OAP 3B	TEVA_MD_L_A_00718332
2014	48184_mod3_inside_rev3_8.29.06.pdf	ENDO-CHI_LIT-00053816
3/12/2010 0:00	48419_The Total Cost of Pain 2009 (final approved for ML handouts).pdf	PPLP003330613
4/27/2011 0:00	57809_Total Cost of Pain (Handout Format - rev TN 4-19-11).pdf	PPLP003331002
9/3/2008 0:00	7376_8792_K2017_PAP126_Clinical Issues-Opioids_gottlieb_FDA.pdf	PPLP004086071
2002	91014 Coleman v4.ppt	JAN-MS-02339545
4/20/2009 0:00	A Purdue reference guide brochure: "Providing Relief Preventing Abuse" 28pp.	PPLP004085986
7/1/1905 0:00	AAPM APS 2009 Clinical Guidelines w SOAP Appendix	END00212135
2009	AAPM APS 2009 Clinical Guidelines w SOAP Appendix	END00212135
2002	AAPM Issues guidance on use of "Opioid Agreements," and "adopts" APS/AAPM 1997 Guidelines	ENDO-CHI_LIT-00084048 ENDO-CHI_LIT-00084057
2009	AAPM Pain Medicine Volume 10 Number S1 2009 "Pain Medicine Supplement on Oxycodone"	END00006991
2012	AAPM Safe Opioid Prescribing Reversing the Trend A National Health Priority Get the Answers from the Leading Experts in Pain Palm Springs California Feb 2012	CHI_000441993
2011	AAPM Satellite Symposium "An Interactive Exploration of Integrated Opioid Therapy in Chronic Pain CONSULTATION WITH THE EXPERTS"	MNK-T1_0000984477



1997	AAPM-APS (1997) Consensus Statement on The Use of Opioids for the Treatment of Chronic Pain	PKY181137481 PKY181199494 ABT-MDL-KY-0009437 ALLERGAN_MDL_02158487 ALLERGAN_MDL_02158482 PPLP003477086
2013	Abuse liability measures for use in analgesic clinical trials in patients with pain: IMMPACT recommendations	Janssen
	ACCEPTED MANUSCRIPT - Clairifying opioid misuse and abuse	MNK-T1_0001335256
2002	Achieving Balance in Chronic Pain management	Janssen
2009	ACPA Consumer Guide 2010 092609.doc	JAN-MS-00394233
6/18/2012 0:00	Actavis MoxDuo M1 D4 6 12 12_part1-2 ITS_20120617.doc	Acquired_Actavis_00448654
6/20/2012 0:00	Actavis MoxDuo M1 with Ivan's and Maged's comments 6-18-12+ITS-additional-comments-20120619.doc	Acquired_Actavis_00448823
2012	Actavis MoxDuo M2 Managing Acute Pain D4 4.20.12.docx	ALLERGAN_MDL_00092074
2012	Actavis MoxDuo M2 Managing Acute Pain D4 4.20.12_RTHv1.docx	ALLERGAN_MDL_00091151
6/21/2012 0:00	Actavis MoxDuo M3 CLEAN 6 20 12 gtm.JAB.docx	Acquired_Actavis_01867671
3/19/2012 0:00	Actavis MOXDuo M3 D2 3 14 12 (2)_LAMeditMar19.docx	Acquired_Actavis_02043281
5/22/2012 0:00	Actavis MoxDuo M3 D4 5.4.12-ARR-5-22-12.docx	Acquired_Actavis_01145826
4/20/2011 0:00	Actavis Riskmap 4-22-11 FINAL.doc	Acquired_Actavis_00188875
7/20/2018 0:00	Actiq calls with notes prior to 2006.csv	TEVA_MDL_A_02416207
2007	Actiq Managed Care Dossier, Module 2: Assessment and Management of Chronic Pain.	TEVA_CHI_00036931
2009	actkad11405 Kadian Speaker Training Materials_011810.ppt	ALLERGAN_MDL_01743051
2010	actkad11405 Kadian Speaker Training Materials_011810.ppt	ALLERGAN_MDL_01145475
	actkad11405 Kadian Speaker Training Materials_011810.ppt	ALLERGAN_MDL_01898508
2010	actkad11405 Kadian Speaker Training Materials_Annotated_011810.pptx	ALLERGAN_MDL_01145537
2013	Addressing the Barriers to Effective Pain Management and Issues of Opioid Misuse and Abuse	Janssen
2010	Advocacy, Policy, Quality Activities	Janssen
2007	American Pain Foundation - A Guide for people living with pain	ENO000018269_image
2011	ANDA 79-046 7.5 and 15 MG Oxymorphone Hydrochloride Extended-Release Tablets	ACTAVIS0981713
2011	ANDA 79-046 Oxymorphone Hydrochloride ER Tablets, Proposal for Risk Minimization Action Plan	ACTAVIS0828299
2007	APF "Pathways through Pain" unbranded campaign	JAN-MS-00506585
	APF "Treatment Options: A Guide for People Living with Pain"	SFC00012637
	APF Publishes "Reporters Guide"	PPLP004051273
	APF Tx Options Distributed to Vets	TEVA_MDL_A_01090493
2001	APS AAPM & ASAM "Definitions Related to the Use of Opioids for the Treatment of Pain" Consensus Statement	ALLERGAN_MDL_02158487 ALLERGAN_MDL_02158482
2001	APS AAPM & ASAM "Definitions Related to the Use of Opioids for the Treatment of Pain "Consensus Statement	END00211516 ENDO-OPIOID_MDL-02939611 END00212229 AB
2002	ASPMN Position Statement - Pain Management in Patients with Addictive Disease	MNK-T1_0001749629
5/29/2009 0:00	B7012-RVA PMK Retained VA.pdf Partners Against Pain - Pain Management Kit	PPLP004119228
2/6/2007 0:00	BOD-Slides-MichaelR-02-05-07.ppt	TEVA_MDL_A_02385655
	Brochure "Clinical Issues in Opioid Prescribing" (22pp). Considerations for the practitioner in the use of opioids in managing moderate to severe pain	PPLP003517021
2011	Burden of Pain: Challenges and Opportunities for Older Americans in Long Term Care	Janssen

2011	Burden of Pain: Challenges and Opportunities for Older Americans in Long Term Care (FINAL 8/8/2011)	Janssen
6/19/2009 0:00	C6998 Providing Relief Preventing Abuse.doc	PPLP004122389
2010	CARES Alliance - Opioid Clinical Management Education Module - June 2010	MNK-T1_0001492929
2005	CD&E RMP Initiatives for EN 3218	ENDO-OPIOID_MDL-03257880
8/22/2016 0:00	CDC Guideline Talking Points - For Use by Medical Affairs	PPLP003908406
8/15/2016 0:00	CDC Guideline Talking Points: For Use by MSL and Medical Services	PPLP003907584
5/23/2016 0:00	CDC Guidelines Talking Points	PPLP003907931
2002	CE presentation LAOs and TDF-final.ppt	JAN-MS-00313196
1/14/2010 0:00	CEP-TPP-DATA-0007.mdb	TEVA_MDL_A_05015635
9/3/2008 0:00	Clinical Issues in Opioid Prescribing.pdf	PPLP004085950
7/22/2009 0:00	Clinical Issues in Opioid Prescribing.pdf	PPLP004229758
7/22/2009 0:00	Clinical Issues in Opioid Prescribing.pdf	PPLPC012000232242
2/22/2010 0:00	Clinical Issues in Opioid Prescribing.pdf	PPLP004228889
	Combunox Professional Relations Plan	ALLERGAN_MDL_03491548
2017	Community Connect-The Advocate's Perspective	Janssen
2017	Community Connect-The Prescriber's Perspective	Janssen
2012	Conversion Guide Reference #3	ACTAVIS0680824
2013	Corporate Contributions - 2013 Nucynta Strategy	Janssen
2011	Corporate Vision - Speaker Training	Janssen
2013	Current publication plan for Insys.	INSYS-MDL-000389901
2003	Development and Application of Controlled Substance Patterns of Utilization Requiring Evaluation (CS-PURE)	PDD1507011724
11/5/2002 0:00	DID0013256.pdf	PURCHI-000701440
6/23/2003 0:00	DID0015205.pdf	PURCHI-000719476
5/3/2005 0:00	DID0016393.pdf	PURCHI-000723681
5/3/2005 0:00	DID0016394.pdf	PURCHI-000723731
10/1/2004 0:00	DID0020014.pdf TRANSMITTAL OF ADVERTISEMENTS AND PROMOTIONAL LABELING FOR DRUGS AND BIOLOGICS FOR HUMAN USE	PURCHI-000765326
8/4/2010 0:00	Disparities_in_Pain_Care_2010_update_(final_approved_for_eCampus).pdf	PPLP003577505
2011	Document re: Cares Alliance Pain Management Guide for Older Adults Outline	MNK-T1_0001492849
2011	Document re: Cares Alliance Pain Management Guide for Older Adults Outline	MNK-T1_0001492855
2005	Duragesic - Value from an Outcomes Research Perspective	Janssen
2/24/2003 0:00	Email from Natalie Principe to Paula Mollica re: price list of Senokot and other items and drugs.	PKY183145853
8/3/2007 0:00	Email RE: URGENT LOCAL EXHIBIT REQUEST: ASIPP - Nashville TN , Aug. 6th and 7th.	PPLP004256287
2/14/2003 0:00	Email: RE: ALERT! Promotional Materials Status Update - Wave 3	PPLPC009000083231
2010	EXALGO REMS & CARES Alliance - Train-the-Trainer - CARES Alliance Education Module - Steven Passik, PhD	MNK-T1_0001279950
2006	Expert Commentary in Pain Management: Part 1 of 4 Treating Patients with Chronic Pain: Addressing Clinical and Regulatory Challenges (May 2006)	TEVA_MDL_A_00832152
1/2/2007 0:00	FACETS 12-10-06.ppt	PPLP003564226
2/21/2003 0:00	February review list of Oxycontin and PAP materials.xls	PPLPC009000083516
3/10/2003 0:00	February review list of Oxycontin and PAP materials.xls	PPLPC009000084554
2012	FOR REFERENCE Prior PRC Reviewer Comments MOXDUO Module 2 Managing Acute Pain D8 6 25 12 Tracked Version.docx	ALLERGAN_MDL_00536723
2/21/2003 0:00	FW: ALERT! Promotional Materials Status Update - Wave 4	PKY183153940
2/22/2003 0:00	FW: ALERT! Promotional Materials Status Update - Wave 4	PPLPC009000083597
8/29/2005 0:00	FW: Policy documents	TEVA_MDL_A_10068999
8/2/2007 0:00	FW: URGENT LOCAL EXHIBIT REQUEST: ASIPP - Nashville TN , Aug. 6th and 7th.	PPLP004235381

2004	Identifying Controlled Substance Patterns of Utilization Requiring Evaluation Using Administrative Claims Data, The American Journal of Managed Care	ALLERGAN_MDL_01878052
2012	Imagine the Possibilities Pain Coalition February 2012 Meeting Summary	Janssen
2010	Industry Working Group (IWG) REMS and REMS Supporting Document.10.07.2010.pdf	JAN-MS-01154057
4/19/2011 0:00	Industry Working Group (IWG) REMS and REMS Supporting Document.10.07.2010.pdf	PPLPC001000084751
12/31/2001 0:00	Interim Report	E18_00009192
12/20/2001 0:00	Interim Report OxyContin C-II (Oxycodone HCl, Controlled Release) Tablets and The Public Health	E15_00038112
12/20/2001 0:00	Interim Report OxyContin C-II (Oxycodone HCl, Controlled Release) Tablets and The Public Health	E15_00038114
1/20/2016 0:00	Is it Pain? - An educational offering from Purdue Pharma Presentation	PPLP003572026
5/15/2015 0:00	J2017 Clinical Issues-Opioids.pdf	PPLP004085756
2004	JNJ Post PGSM Board Review	Janssen
2003	June 2003 Lit Code	PKY183149984
2007	Kadian Binder 2-A, MSL Training Binders, Version 1 (Alpharma)	ALLERGAN_MDL_00813853
2007	Kadian Binder 2-B, MSL Training Binders, version 1 (Alpharma)	ALLERGAN_MDL_00813385
2012	Kadian Detail Aid - New Strengths	ACTAVIS0002353
2012	Kadian Detail Aid Ref. #3 - Chou, Robert et. al. Opioid Treatment Guidelines: Clinical Guidelines for the Use of Chronic Opioid Therapy in Chronic Noncancer Pain, The Journal of Pain, Vol 10, No 2 (February), 2009: pp 113-130	ALLERGAN_MDL_00773907
2009	Kadian_Slides_for_Speaker_Training_with_MLRCmts_2_22.ppt	ALLERGAN_MDL_01741588
2010	Kadian_Slides_for_Speaker_Training_with_MLRCmts_2_22.ppt	ALLERGAN_MDL_01750153
2010	Kadian_Slides_for_Speaker_Training_with_MLRCmts_2_22.ppt	ALLERGAN_MDL_01890445
10/27/2009 0:00	Kadian_Slides_for_Speaker_Training_with_MLRCmts_2_22.ppt	Acquired_Actavis_00943445
7/28/2016 0:00	Living Our Vision-Purdue Sales Presentation	PPLP003996524
3/1/2007 0:00	Managed Care Slide Set - Final - 101405.ppt	TEVA_MDL_A_02030896
4/25/2005 0:00	Managed Care Slide Set rev041505.ppt	TEVA_MDL_A_04110715
2009	Managing Chronic Pain and the Importance of Customizing Opioid Treatment [Kadian_Slides_for_Speaker_Training_with_MLRCmts_2_22.ppt]	ALLERGAN_MDL_00449946
4/3/2009 0:00	Material Review Form	PPLP004231172
9/1/2016 0:00	Medical Affairs CDC Talking points article	PPLP003907770
3/1/2004 0:00	Mercadante - Portenoy	TEVA_MDL_A_03915764
5/13/2005 0:00	Microsoft PowerPoint - Hard Quest (1HR-HO avail-nonaccred)12-04 update.ppt	PKY183120066
4/27/2006 0:00	Microsoft Word - ACTIQ-Appeal-BTP-Non-malignant chronic pain Opioid-toler*	TEVA_MDL_A_05536450
4/27/2006 0:00	Microsoft Word - ACTIQ-Appeal-BTP-Non-malignant chronic pain Opioid-toler*	TEVA_MDL_A_05536455
3/1/2004 0:00	Module 2 : AAPM - Portenoy	TEVA_MDL_A_03915814
3/13/2007 0:00	Module 2 Final Feb2007.pdf	TEVA_CHI_00036931
2010	Module 6 - EXALGO Training 200	MNK-T1_0001296192
1/11/2016 0:00	MR-00458 FACETS - Is it Pain.pdf	PPLP003494961
7/15/2016 0:00	MR-01620 - NP Educational Workshop Content - Module 3.pdf	PPLP003499613
5/10/2016 0:00	MSL_MS_CDC FAQ 5.10.2016.update.Clean for Veeva Review.docx	PPLP003907906
5/20/2016 0:00	MSL_MS_CDC FAQ 5.10.2016.update.Clean for Veeva Review.Proofread and MRL comments reconciled 5.20.16 redline.docx	PPLP003907627
5/20/2016 0:00	MSL_MS_CDC FAQ 5.10.2016.update.Clean for Veeva Review.Proofread and MRL comments reconciled 5.20.16.docx	PPLP003907667

5/19/2016 0:00	MSL_MS_CDC FAQ 5.10.2016.update.Clean for Veeva Review.Proofread comments reconciled 5.19.16.docx	PPLP003907999
8/11/2016 0:00	MSL_MS_CDC FAQ_ FINAL- update 08 01 16 DRAFT v2 recon MK editslls (3).docx Presentation: Key Talking Pts. - CDC Guideline Talking Points - For use by MSL and Medical Services	PPLP003907692
2011	NAD HPAD PAIN Team Update June 29 2011	Janssen
2008	NIDA 2008 Review 010709A.ppt	JAN-MS-00943834
2009	NIDA 2008 Review 010709A.ppt	JAN-MS-00408537
2009	NIDA 2008 Review 010709A.pptx	JAN-MS-00409775
2009	NIDA 2008 Review 010709A.pptx209.pptx	JAN-MS-00409776
2009	NIDA 2008 Review 010709A.pptx21209.pptx	JAN-MS-00947551
2009	NIDADRAFT010609.ppt	JAN-MS-00408535
2006	Opana ER Product Monograph	ENDO-CHI_LIT-00539113
2014	OPANA ER RiskMap Education Update 3Q 2011.doc	ENDO-CHI_LIT-00242029
2009	Opana ER RiskMap Education Update Report ver 101309.doc	ENDO-CHI_LIT-00103330
2014	Opana ER RiskMap Education Update Report ver 101309.doc	ENDO-CHI_LIT-00193122
2010	OPANA ER RiskMap Q3 2010 Education Update 10:12:2010.doc	ENDO-CHI_LIT-00097638
2010	OPANA ER RiskMAP summary 7.28.10.docx	EPI000078324
2010	OPANA ER RiskMAP summary.docx	EPI000133769
2010	OPANA ER RiskMAP summary.docx	EPI000135460
2010	OPANA ER RiskMAP summary.docx	END00342552
2014	OPANA ER RiskMap Update Report (01Jan2011-31Mar2011)_Draft.doc	ENDO-CHI_LIT-00164758
8/18/2017 0:00	Opiod Analgesics Pearls & Pitfalls	PPLP003890021
8/15/2007 0:00	Opioid Analgesic Therapy: Clinical Considerations - David Haddox, MD.	PPLP003889451
2011	Opioid Clinical Summary document by Cephalon	INSYS-MDL-000360689
2011	Opioid Misuse and Abuse Deterrent Formulation_June_2010.pptx	JAN-MS-01499039
2008	Opioid Therapy in the 21st century	END00049272
2009	Opioid Treatment Guidelines: Clinical Guidelines in Chronic Noncancer Pain	Janssen
2010	Opioid TRreatment Landscape R6 7.15.10(KQ).doc	MNK-T1_0001490335
2010	Opioid TRreatment Landscape R6.doc	MNK-T1_0001490357
2010	Opioid_TRreatment_Landscape_MODULE_6 (Reardon7-12).doc	MNK-T1_0001490261
2001	Optimizing Chronic Pain Management with Duragesic	Janssen
2008	OptimizingChronicPainManagement_grantclarification.doc	JAN-MS-00408539
2011	Outline - Cares Alliance: How to Talk to Your Doctor Brochure	MNK-T1_0001492410
4/25/2000 0:00	OxyContin 160mg Tablet Workshop	E16_00004761
	OxyContin 160mg Tablet Workshop	E16_00010797
	OxyContin 160mg Tablet Workshop	E16_00010798
	OxyContin 160mg Tablet Workshop	E18_00006798
4/30/2000 0:00	OxyContin 160mg Tablet Workshop Manual	E15_00011664
	Oxycontin 160mg Workshop- Training Purposes Only	E450_00003285
2011	Oxymorphone Hydrochloride Extended-Release Tablets, 7.5 mg. and 15 mg CII: Proposal for Risk Minimization Action Plan	ACTAVIS0827900
5/5/2000 0:00	Package Insert Review	E15_00011417
	Package Insert Review	E15_00017133
2002	Pain and the Role of Opioids: A Reference Guide	PKY181656656
2007	Pain Management Essentials: Strategies for Implementing Optimal Pain Control in the PACU	Janssen
2003	Pain" Consensus Statement	ENDO-OPIOID_MDL-01571249
1999	Pain: The 5th Vital Sign 2/10/1999	PKY183036326
11/16/2008 0:00	Pam's Chapter Section_Law and Advocacy.doc	PPLP004067206
3/20/2009 0:00	PAP - olga stanley.pdf	PPLPC020000234596
8/10/2018 0:00	PAP - olga stanley.pdf	PPLPMDL0060000278
1/3/2012 0:00	PAP Jan3.pdf	PPLPC001000100359

10/13/2009 0:00	Partners Against Pain Publication: Clinical Issues in Opioid Prescribing - Considerations for the practitioner in the use of opioids in managing moderate to severe pain	PDD8901054663
2011	PhRMA Survey_Rx Drug Misuse_Abuse Survey DT Comments.docx	ENDO-OPIOID_MDL-01485888
2002	Power over Pain (POP) Start Up Guide	CHI_000432477
	Power over Pain Start Up Guide	CHI_000432477
2012	PR Meeting - Welcome Weber Shandwick	Janssen
2004	Presentation	ENDO-OPIOID_MDL-02255153
4/28/2000 0:00	Presentation: OxyContin 160 mg Tablet Workshop	E17_00010648
	Presentation: OxyContin 160 mg Tablet Workshop	E17_00011914
	Presentation: OxyContin 160 mg Tablet Workshop	E17_00011915
	Presentation: OxyContin 160 mg Tablet Workshop	E17_00014369
	Presentation: OxyContin 160 mg Tablet Workshop	E17_00014389
	Presentation: OxyContin 160 mg Tablet Workshop	E17_00014390
	Presentation: OxyContin 160 mg Tablet Workshop	E17_00015149
	Presentation: OxyContin 160 mg Tablet Workshop	E17_00015334
	Presentation: OxyContin 160 mg Tablet Workshop	E17_00015335
4/25/2000 0:00	Presentation: OxyContin 160mg Tablet Workshop	E17_00006915
4/25/2000 0:00	Presentation: OxyContin 160mg Tablet Workshop	E17_00006975
4/25/2000 0:00	Presentation: OxyContin 160mg Tablet Workshop	E17_00006976
4/25/2000 0:00	Presentation: OxyContin 160mg Tablet Workshop	E17_00007117
4/3/2006 0:00	Providing Relief-Preventing Abuse	PPLP004120833
4/3/2006 0:00	Providing Relief-Preventing Abuse	PPLP004121038
4/3/2006 0:00	Providing Relief-Preventing Abuse.pdf	PPLP004120261
4/3/2006 0:00	Providing Relief-Preventing Abuse.pdf	PPLP004120369
4/3/2006 0:00	Providing Relief-Preventing Abuse.pdf	PPLP004120974
	Providing Relief-Preventing Abuse.pdf	PPLP004120877
2/24/2003 0:00		PKY183145907
2/24/2003 0:00		PKY183150822
2/21/2003 0:00	RE: ALERT! Promotional Materials Status Update - Wave 4	PPLPC009000083508
2/24/2003 0:00	RE: ALERT! Promotional Materials Status Update - Wave 4	PKY183150865
2/21/2003 0:00	RE: ALERT! Promotional Materials Status Update - Wave 4 (Updated w/ML slide kits)	PPLPC009000083517
3/10/2003 0:00	RE: ALERT! Promotional Materials Status Update - Wave 5	PPLPC009000084547
8/4/2005 0:00	RE: BTP Guidelines	TEVA_MDL_A_06672467
8/28/2001 0:00	RE: Literature order for Abbott Labs - Robert Grimm	PKY183146186
2010	RE: LK Edits to OPANA ER RiskMAP summary.docx	ENDO-OPIOID_MDL-01602670
2010	RE: LK Edits to OPANA ER RiskMAP summary.docx	ENDO-OPIOID_MDL-01907912
2014	RE: Revised Manuscript	JAN-MS-02117460
2010	RE: Rough Draft of Questions from Friday's Meeting	ALLERGAN_MDL_01172354
12/7/2009 0:00	RE: Rough Draft of Questions from Friday's Meeting	Acquired_Actavis_00657132
2003	RE: Scientific Resource Center Materials	ENDO-OPIOID_MDL-06203798
9/5/2007 0:00	RE: Southern Pain Society Meeting	PPLP004256265
8/3/2012 0:00	RE: Touching base ...	PPLP004158478
8/2/2007 0:00	RE: URGENT LOCAL EXHIBIT REQUEST: ASIPP - Nashville TN , Aug. 6th and 7th.	PPLP004235396
8/2/2007 0:00	RE: URGENT LOCAL EXHIBIT REQUEST: ASIPP - Nashville TN , Aug. 6th and 7th.	PPLP004235398
8/2/2007 0:00	RE: URGENT LOCAL EXHIBIT REQUEST: ASIPP - Nashville TN , Aug. 6th and 7th.	PPLP004256289
4/7/2016 0:00	Reactive responses to CDC recommendations	PPLP003905698
4/7/2016 0:00	Reactive responses to CDC recommendations_MS and MSL use.3.29.16.v2.final.docx	PPLP003907428
3/29/2016 0:00	recommended Reactive responses to the 12 CDC recommendations re opioid dispensing_3.29.16 lls.v2comments addressed_redline.docx	PPLP003907443
2011	Responsible Opioid Prescribing Online CME AAPM/FSMB	ENDO-OPIOID_MDL-01607843
2004	Revised Slides for Numorphan Advisory Meeting	ENDO-OPIOID_MDL-02344299
2013	Risk Management [REMS] for Tapentadol ER	Janssen
2010	Risk Management in Chronic Pain Patients	Janssen
4/27/2011 0:00	risk-map final.pdf	Acquired_Actavis_00188804
2003	sales rep training opioids - VT 04-22-03.ppt	ENDO-OPIOID_MDL-02356776
10/20/2006 0:00	Scientific Communications Document Review # 996	PPLP003890179



9/15/2006 0:00	Scientific Communications Document Review #986	PPLP003889997
4/24/2015 0:00	Script Chronic Pain--Epidemiology and Current Treatment Guidelines_1.pdf	PPLP003307145
	Slide 1	TEVA_MDL_A_04811967
	Slide 1	TEVA_MDL_A_04867962
	Slide 1	TEVA_MDL_A_04869976
	Slide 1	TEVA_MDL_A_04870167
	Slide 1	TEVA_MDL_A_04872002
	Slide 1	TEVA_MDL_A_04873832
	Slide 1	TEVA_MDL_A_04873929
	Slide 1	TEVA_MDL_A_04875764
	Slide 1	TEVA_MDL_A_04877900
	Slide 1	TEVA_MDL_A_04879729
	Slide 1	TEVA_MDL_A_04881999
	Slide 1	TEVA_MDL_A_04884000
	Slide 1	TEVA_MDL_A_04893594
	Slide 1	TEVA_MDL_A_04914460
	Slide 1	TEVA_MDL_A_04949774
	Slide 1	TEVA_MDL_A_04951597
	Slide 1	TEVA_MDL_A_04953444
	Slide 1	TEVA_MDL_A_04953532
	Slide 1	TEVA_MDL_A_04955355
	Slide 1	TEVA_MDL_A_04957178
	Slide 1	TEVA_MDL_A_04959001
	Slide 1	TEVA_MDL_A_04959089
	Slide 1	TEVA_MDL_A_04960912
	Slide 1	TEVA_MDL_A_04963447
	Slide 1	TEVA_MDL_A_04984517
	Slide 1	TEVA_MDL_A_05043634
	Slide 1	TEVA_MDL_A_05043730
	Slide 1	TEVA_MDL_A_05114543
2010	Speaker Training Slides with covering email	ENDO-CHI_LIT-00325840
	SUBJECT	TEVA_MDL_A_04517661
	SUBJECT	TEVA_MDL_A_04517757
	Table of medications and marketing materials	E450_00005036
2006	Template Letter of Medical Necessity	TEVA_MDL_A_02529930
2008	Template of Letter of Medical Necessity for Chronic Low Back Pain	TEVA_CHI_00001967
4/21/2004 0:00	Teva-ORM_Book_Phys_V7.pdf	TEVA_MDL_A_03432638
2011	The American Pain Society 30th Annual Scientific Meeting - Advocacy - The Use of Opioids for the Treatment of Chronic Pain	MNK-T1_0001733508
1997	The Use of Opioids for the Treatment of Chronic Pain	MNK-T1_0001483649
2008	The Use of Opioids for the Treatment of Chronic Pain, APS & AAPM (1997)	ALLERGAN_MDL_01134127
6/24/2009 0:00	Tkg #8409_PAP126_L2017.pdf	PPLP004231266
6/24/2009 0:00	Tkg #8409_PAP126_L2017.pdf	PPLP004252945
6/29/2009 0:00	Tkg #8409_PAP126_L2017.pdf	PPLP004230727
6/29/2009 0:00	Tkg #8409_PAP126_L2017.pdf	PPLP004230816
6/29/2009 0:00	Tkg #8409_PAP126_L2017.pdf	PPLP004230905
6/29/2009 0:00	Tkg #8409_PAP126_L2017.pdf	PPLP004230994
7/13/2009 0:00	Tkg #8409_PAP126_L2017.pdf	PPLP004230466
7/14/2009 0:00	Tkg #8409_PAP126_L2017.pdf	PPLP004252643
11/28/2001 0:00	Transmittal of Advertisements and Promotional Labeling for Drugs and Biologics for Human Use (Oxycontin).	PURCHI-000683080
8/17/2000 0:00	Transmittal of Advertisements and Promotional Labelling for Drugs and Biologics for Human Use - 9/8/2000	PURCHI-000666401
2009	Understanding Risk While Maximizing Analgesia (Participant Guide)	CHI-000433679
2008	Unsigned ENDO Agreement with APF POPAN Third Annual Training Program	CHI_001561049
2002	Update on Long-acting Opioids and Appropriate Use of Transdermal Fentanyl	Janssen
2003	UPDATED Opioids.ppt	ENDO-OPIOID_MDL-02356920
2004	Updated PM&R/Rheum Agenda	ENDO-OPIOID_MDL-02254985
	Use of Opioids in Chronic Non-Cancer Pain.	PKY180138049

2/25/2003	Vol1and2of2.pdf	PURCHI-000694248
2007	Webs, A Guide for Practitioners Avoiding Opioid Abuse While Managing Pain	ENDO-CHI_LIT-00538705
2014		ENDO-CHI_LIT-00053284
2005	New Concepts and Critical Issues in Chronic Pain Evaluation and Management	ALLERGAN_MDL_02158487 ALLERGAN_MDL_02158482
	Kadian Powerpoint	ALLERGAN_MDL_02489078
	Combunox Learning System	ALLERGAN_MDL_03272884
2007	Drug Spreadsheet	PPLP004120741
	Patient Specific Selling: Low Back Pain	E18_00002086
6/18/1905	Objection Centered Clinical Review Form	E16_00007604
9/28/2000	Email Re: Preparation for 26 Week Quiz	E01_00016885
3/1/2001	Email Re: Walgreen Sales	E01_00015090
9/30/2001	Talking Points/Resources to Utilize When Contacting Medicaid Dur ot P&T Committee Members	E17_00006286
10/2/2001	Talking Points/Resources to Utilize When Contacting Medicaid Dur ot P&T Committee Members	E15_00039517
2/21/2003	Marketing/Sales Table	PKY183153946
7/1/2004	OxyContin Training Packet	E18_00000823
2008	Clinical Issues in Opioid Prescribing.pdf	PDD8013350385
	Providing Relief Preventing Abuse	PPLP003516951
	Providing Relief Preventing Abuse	PPLP003516966
	Providing Relief Preventing Abuse	PPLP003516982
	Providing Relief Preventing Abuse	PPLP003517005
	Material Review Form	PPLP003517098
	Providing Relief Preventing Abuse	PPLP003517114
	Providing Relief Preventing Abuse	PPLP003517132
	Material Review Form	PPLP003517147
	Providing Relief Preventing Abuse	PPLP003517168
	National Regional Meeting Pharmacy Selling Workshop	E15_00005877
	Product Specialist Training Report	E17_00005557
	Talking Points/Resources to Utilize When Contacting Medicaid Dur or P&T Committee Members	E17_00012097
	Talking Points/Resources to Utilize When Contacting Medicaid Dur or P&T Committee Members	E17_00012345
	Talking Points/Resources to Utilize When Contacting Medicaid Dur or P&T Committee Members	E18_00005946
	Talking Points/Resources to Utilize When Contacting Medicaid Dur or P&T Committee Members	E18_00006230
	Talking Points/Resources to Utilize When Contacting Medicaid Dur or P&T Committee Members	E15_00009691
	OxyContin 160mg Tablet Workshop	E15_00011663
	OxyContin 160mg Tablet Workshop	E15_00011984
2001	AdvanceUpdate 12/2001	E15_00014063
	OxyContin 160mg Tablet Workshop	E15_00014785
	OxyContin 160mg Tablet Workshop	E15_00015619
	OxyContin 160mg Tablet Workshop	E15_00015620
	Talking Points/Resources to Utilize When Contacting Medicaid Dur or P&T Committee Members	E15_00015741
	OxyContin 160mg Tablet Workshop	E15_00017127
	OxyContin 160mg Tablet Workshop	E15_00017132
	OxyContin 160mg Tablet Workshop	E15_00032460
	OxyContin 160mg Tablet Workshop	E17_00023720
	Purdue Frederick Co. Drug List	E450_00001355
	Pain Management with OxyContin	ABT-MDL-KY-0001597
	Providing Relief Preventing Abuse	ABT-MDL-KY-0026458
2003	What's New in PainCare?	ABT-MDL-KY-0031738
2003	The Versatile Pharmaceutical Coach	ABT-MDL-KY-0032899
	Pain Clinical Manual 2nd Edition	ABT-MDL-KY-0032989
2003	9/24/2003 POA Materials	ABT-MDL-KY-0035401
2003	Insight or Care of the Patient With Pain Leader's Guide	ABT-MDL-KY-0041176
2003	Insight or Care of the Patient With Pain Participant's Guide	ABT-MDL-KY-0041265
2003	9/24/2003 POA Materials	ABT-MDL-KY-0042811
2003	Providing Relief Preventing Abuse	ABT-MDL-KY-0047817
	Pain and the Role of Opioids	ABT-MDL-KY-0047835
2003	What's New in PainCare?	ABT-MDL-KY-0050440

2003	What's New in PainCare?	ABT-MDL-KY-0050495
2003	9/24/2003 POA Materials	ABT-MDL-KY-0050600
8/31/2001	RE: Literature order for Abbott Labs - Robert Grimm	ABT-MDL-KY-0053923
3/21/2009	Emerging Practices in Opioid Prescribing for Chronic Pain	TEVA_MDL_A_00822994
Jun-07	Opioid Therapy in Chronic Pain with Breakthrough Episodes	TEVA_MDL_A_00830312
Jul-07	Opioid Therapy in Chronic Pain with Breakthrough Episodes	TEVA_MDL_A_00830571
<u>Federation of Medical Boards of the United States, Inc., Model Guidelines for the Use of Controlled Substances for the Treatment of Pain (May 2, 1998) (hereinafter "FMB, Model Guidelines") (FSMB Model Guidelines-1998)</u>		
	Column2	Column3
11/30/2004 0:00	Identifying Controlled Substance Patterns of Utilization Requiring Evaluation Using Administrative Claims Data, The American Journal of Managed Care	ALLERGAN_MDL_01878052
7/27/2007 0:00	Kadian Binder 2-B, MSL Training Binders, version 1 (Alpharma)	ALLERGAN_MDL_00813385
7/27/2007 0:00	Kadian Binder 2-A, MSL Training Binders, Version 1 (Alpharma)	ALLERGAN_MDL_00813853
5/7/2009 0:00	Managing Chronic Pain and the Importance of Customizing Opioid Treatment [Kadian_Slides_for_Speaker_Training_with_MLRCmts_2_22.ppt]	ALLERGAN_MDL_00449946
5/8/2009 0:00	Kadian_Slides_for_Speaker_Training_with_MLRCmts_2_22.ppt	ALLERGAN_MDL_01750153
10/27/2009 0:00	Kadian_Slides_for_Speaker_Training_with_MLRCmts_2_22.ppt	ALLERGAN_MDL_01741588
12/7/2009 0:00	Savage.2003. Definitions related to the medical use of opioids--evolution....pdf	ALLERGAN_MDL_01161077
1/14/2010 0:00	Kadian_Slides_for_Speaker_Training_with_MLRCmts_2_22.ppt	ALLERGAN_MDL_01890445
1/28/2010 0:00	actkad11405 Kadian Speaker Training Materials_011810.ppt	ALLERGAN_MDL_01743051
2/1/2010 0:00	actkad11405 Kadian Speaker Training Materials_011810.ppt	ALLERGAN_MDL_01145475
2/1/2010 0:00	actkad11405 Kadian Speaker Training Materials_Annotated_011810.pptx	ALLERGAN_MDL_01145537
	actkad11405 Kadian Speaker Training Materials_011810.ppt	ALLERGAN_MDL_01898508
		ALLERGAN_MDL_02489078
		ALLERGAN_MDL_02513178
4/8/1999 0:00	CD&E YTD Accomplishments vs Objectives.doc	ENDO-OPIOID_MDL-06233889
4/22/2003 0:00	sales rep training opioids - VT 04-22-03.ppt	ENDO-OPIOID_MDL-02356776
9/24/2003 0:00	UPDATED Opioids.ppt	ENDO-OPIOID_MDL-02356920
2/5/2004 0:00	Updated PM&R/Rheum Agenda	ENDO-OPIOID_MDL-02254985
2/17/2004 0:00	Presentation	ENDO-OPIOID_MDL-02255153
2/23/2004 0:00	Revised Slides for Numorphan Advisory Meeting	ENDO-OPIOID_MDL-02344299
8/29/2006 0:00	P&T Digest - Pain Management.pdf	ENDO-OPIOID_MDL-04797507
1/2/2008 0:00	Case 5 slides 12-19-MM (KV Comments).ppt	EPI000296548
2008	OPANA Brand MVA	ENDO-CHI_LIT-00032928
2009	Online MedscapeWebMD Info Site, Managing the Complexities of Moderate to Severe Chronic Pain	ENDO-CHI_LIT-00537999
2011	Patient Profile: Frank	ENDO-CHI_LIT-00099937
2011	Patient Profile: Ray	ENDO-CHI_LIT-00120586
2011	Opioid Clinical Summary PowerPoint by Michael Toscani, Chris Neumann, PharmaD, September 1, 2011	INSYS-MDL-000370027
12/1/1998 0:00	AGS meeting 11/20 and today's statement	JAN-MS-00270846
2001	Opioidphobia PPT	Janssen
2001	Optimizing Chronic Pain Management with Duragesic (FSMB 1998)	Janssen
2002	Assessing Risk of Substance Abuse Presentation (FSMB 1998)	Janssen
2002	Chronic pain Management: Balancing Treatment and Abuse	Janssen
9/26/2002 0:00	91014 Coleman v4.ppt	JAN-MS-02339545

10/9/2002 0:00	91014 Coleman v7.ppt	JAN-MS-00655702
12/12/2002 0:00	ProgressNotesFolder v5.pdf	JAN-MS-00310558
2004	JNJ Post PGSM Board Review (FSMB 1998)	Janssen
3/24/2004 0:00	John Coleman slides.ppt	JAN-OH-00020672
5/12/2004 0:00	Revised Pain Management Guidelines.doc	JAN-MS-01035269
6/7/2004 0:00	Post PGSM Board Review 26May04 v13 Part 2 just BU.ppt	JAN-MS-00432790
12/6/2007 0:00	Opioid Therapy for Chronic Pain Wrap-up	JAN-MS-01246214
7/14/2008 0:00	NPC & JCAHO 2001.pdf	JAN-MS-00326044
7/14/2008 0:00	Federation of State Medical Boards 2004.pdf	JAN-MS-00326134
10/13/2010 0:00	Industry Working Group (IWG) REMS and REMS Supporting Document.10.07.2010.pdf	JAN-MS-01154057
6/16/2010 0:00	Presentation re: Clinical Management Education Module v1.3 (revised) slide notes	MNK-T1_0001785415
7/9/2010 0:00	Opioid Treatment Landscape R6.doc	MNK-T1_0001490357
7/13/2010 0:00	Opioid Treatment Landscape MODULE_6 (Reardon7-12).doc	MNK-T1_0001490261
7/15/2010 0:00	Opioid Treatment Landscape R6 7.15.10(KQ).doc	MNK-T1_0001490335
12/31/2001 0:00	Pain and the Role of Opioids - A Reference Guide	ABT-MDL-KY-0000185
		ABT-MDL-KY-0001597
5/10/2002 0:00		ABT-MDL-KY-0017219
		ABT-MDL-KY-0017759
		ABT-MDL-KY-0017873
4/22/2003 0:00		ABT-MDL-KY-0024637
		ABT-MDL-KY-0024710
		ABT-MDL-KY-0024870
		ABT-MDL-KY-0026458
1/17/2001 0:00	FW: Abuse / Diversion Workshop follow-up	ABT-MDL-KY-0030273
		ABT-MDL-KY-0030335
		ABT-MDL-KY-0030356
		ABT-MDL-KY-0030376
		ABT-MDL-KY-0032899
		ABT-MDL-KY-0032989
		ABT-MDL-KY-0043299
		ABT-MDL-KY-0046470
		ABT-MDL-KY-0047835
		ABT-MDL-KY-0050600
		ABT-MDL-KY-0053103
		ABT-MDL-KY-0060302
		ABT-MDL-WV-0000111
		ABT-MDL-WV-0000144
1998	Purdue Pharma, O.P. Proposal August 26, 1998	PKY183028056
1998	Fostering Change in the Pain Management Environment	PKY183033795
1999	Compilation of JCAHO and LTC materials	PKY181137693
2007		PPLP004120741
4/25/2000 0:00	OxyContin 160mg Tablet Workshop	E16_00004761
4/25/2000 0:00	Presentation: OxyContin 160mg Tablet Workshop	E17_00006915
4/25/2000 0:00	Presentation: OxyContin 160mg Tablet Workshop	E17_00006975
4/25/2000 0:00	Presentation: OxyContin 160mg Tablet Workshop	E17_00006976
4/25/2000 0:00	Presentation: OxyContin 160mg Tablet Workshop	E17_00007117
4/28/2000 0:00	Presentation: OxyContin 160 mg Tablet Workshop	E17_00010648
4/30/2000 0:00	OxyContin 160mg Tablet Workshop Manual	E15_00011664
5/5/2000 0:00	Package Insert Review	E15_00011417
2/11/2001 0:00		PKY181968412
9/30/2001 0:00		E17_00006286
10/2/2001 0:00		E15_00039517
12/20/2001 0:00	Interim Report: Oxycontin C_II (Oxycodone HCI, Controlled Release)Tablets and the Public health	E01-48_00000603
12/20/2001 0:00	Interim Report: Oxycontin C_II (Oxycodone HCI, Controlled Release)Tablets and the Public health	E01-48_00000607
12/20/2001 0:00	Interim Report: Oxycontin C_II (Oxycodone HCI, Controlled Release)Tablets and the Public health	E01-48_00000609
12/20/2001 0:00	Interim Report: Oxycontin C_II (Oxycodone HCI, Controlled Release)Tablets and the Public health	E01-48_00000611
12/20/2001 0:00	Interim Report OxyContin C-II (Oxycodone HCI, Controlled Release) Tablets and The Public Health	E15_00038112
12/20/2001 0:00	Interim Report OxyContin C-II (Oxycodone HCI, Controlled Release) Tablets and The Public Health	E15_00038114
12/31/2001 0:00	Interim Report	E18_00009192

1/28/2003 0:00	DID0004704.pdf	PURCHI-000620694
3/11/2003 0:00	Pain Control - Clinical Management Issues	PPLPC023000023880
3/18/2003 0:00	2003 Email allowing Purdue Sales Reps to attach cover letter to APS Book "Guideline for the Management of Pain in Osteoarthritis, Rheumatoid Arthritis, and Juvenile Chronic Arthritis (2d ed. 2002) and book	PPLP003281201
6/23/2003 0:00	DID0015205.pdf	PURCHI-000719476
3/17/2004 0:00	DID0018218.pdf	PURCHI-000747621
7/1/2004 0:00		E18_00000823
10/1/2004 0:00	DID0020014.pdf TRANSMITTAL OF ADVERTISEMENTS AND PROMOTIONAL LABELING FOR DRUGS AND BIOLOGICS FOR HUMAN USE	PURCHI-000765326
5/13/2005 0:00	Microsoft PowerPoint - Hard Quest (1HR-HO avail-nonaccred)12-04 update.ppt	PKY183120066
9/15/2006 0:00	Scientific Communications Document Review #986	PPLP003889997
10/20/2006 0:00	Scientific Communications Document Review # 996	PPLP003890179
10/25/2006 0:00	2006-11-02-Opioid Analgesics-Pearls & Pitfalls-FINAL.pdf	PPLPC018000110563
1/2/2007 0:00	FACETS 12-10-06.ppt	PPLP003564226
4/6/2007 0:00	Pain Summit Report.pdf	PPLPC020000123359
8/15/2007 0:00	Opioid Analgesic Therapy: Clinical Considerations - David Haddox, MD.	PPLP003889451
9/3/2008 0:00	Clinical Issues in Opioid Prescribing.pdf	PPLP004085950
9/3/2008 0:00		PDD8013350385
11/16/2008 0:00	Pam's Chapter Section_Law and Advocacy.doc	PPLP004067206
3/20/2009 0:00	PAP - olga stanley.pdf	PPLPC020000234596
4/3/2009 0:00	Material Review Form	PPLP004231172
5/29/2009 0:00	B7012-RVA PMK Retained VA.pdf Partners Against Pain - Pain Management Kit	PPLP004119228
6/24/2009 0:00	Tkg #8409_PAP126_L2017.pdf	PPLP004231266
6/24/2009 0:00	Tkg #8409_PAP126_L2017.pdf	PPLP004252945
6/29/2009 0:00	Tkg #8409_PAP126_L2017.pdf	PPLP004230727
6/29/2009 0:00	Tkg #8409_PAP126_L2017.pdf	PPLP004230816
6/29/2009 0:00	Tkg #8409_PAP126_L2017.pdf	PPLP004230905
6/29/2009 0:00	Tkg #8409_PAP126_L2017.pdf	PPLP004230994
7/13/2009 0:00	Tkg #8409_PAP126_L2017.pdf	PPLP004230466
7/14/2009 0:00	Tkg #8409_PAP126_L2017.pdf	PPLP004252643
7/22/2009 0:00	Clinical Issues in Opioid Prescribing.pdf	PPLP004229758
7/22/2009 0:00	Clinical Issues in Opioid Prescribing.pdf	PPLPC012000232242
10/13/2009 0:00	Partners Against Pain Publication: Clinical Issues in Opioid Prescribing - Considerations for the practitioner in the use of opioids in managing moderate to severe pain	PDD8901054663
2/22/2010 0:00	Clinical Issues in Opioid Prescribing.pdf	PPLP004228889
8/27/2010 0:00	6110_IASP - OXYCONTIN - SLIDE DECK - PRODUCT THEATER FINAL 8 27 2010 .pptx	PPLP003432200
4/19/2011 0:00	Industry Working Group (IWG) REMS and REMS Supporting Document.10.07.2010.pdf	PPLPC001000084751
1/3/2012 0:00	PAP Jan3.pdf	PPLPC001000100359
4/30/2012 0:00		PPLP004362100
4/24/2015 0:00	Script Chronic Pain--Epidemiology and Current Treatment Guidelines_1.pdf	PPLP003307145
5/15/2015 0:00	J2017 Clinical Issues-Opioids.pdf	PPLP004085756
7/28/2016 0:00	Living Our Vision-Purdue Sales Presentation	PPLP003996524
10/25/2016 0:00	002_PAP157_B7012-RVA.pdf	PPLP003326602
10/25/2016 0:00	003_PAP157_A7012-RVA.pdf	PPLP003326662
8/13/2017 0:00	001990.pdf	PPLP003862349
8/13/2017 0:00	001396.pdf	PPLP003863147
8/13/2017 0:00	001605.pdf	PPLP003863314
8/13/2017 0:00	001693.pdf	PPLP003863402
8/18/2017 0:00	025345.pdf	PPLP003889865
8/18/2017 0:00	Opioid Analgesics Pearls & Pitfalls	PPLP003890021
8/10/2018 0:00	PAP - olga stanley.pdf	PPLPMDL0060000278
	Brochure "Clinical Issues in Opioid Prescribing" (22pp). Considerations for the practitioner in the use of opioids in managing moderate to severe pain	PPLP003517021
		PPLP003517098
	Letter_069362_108654.doc	PPLPMDL0050004046



	OxyContin 160mg Tablet Workshop	E16_00010797
	OxyContin 160mg Tablet Workshop	E16_00010798
	Presentation: OxyContin 160 mg Tablet Workshop	E17_00011914
	Presentation: OxyContin 160 mg Tablet Workshop	E17_00011915
		E17_00012097
		E17_00012345
	Presentation: OxyContin 160 mg Tablet Workshop	E17_00014369
	Presentation: OxyContin 160 mg Tablet Workshop	E17_00014389
	Presentation: OxyContin 160 mg Tablet Workshop	E17_00014390
	Presentation: OxyContin 160 mg Tablet Workshop	E17_00015149
	Presentation: OxyContin 160 mg Tablet Workshop	E17_00015334
	Presentation: OxyContin 160 mg Tablet Workshop	E17_00015335
		E18_00005946
		E18_00006230
	OxyContin 160mg Tablet Workshop	E18_00006798
		E15_00009691
		E15_00011663
		E15_00011984
		E15_00015619
		E15_00015620
		E15_00015741
		E15_00017127
		E15_00017132
	Package Insert Review	E15_00017133
		E15_00032460
		E17_00023720
	Oxycontin 160mg Workshop- Training Purposes Only	E450_00003285
	Table of medications and marketing materials	E450_00005036
	"OxyContin Tablets 1st Quarter 2000" PPT	PKY181135066
	PPLP CPP Physician Intervention Effort	PKY181137481
3/1/2004 0:00	Mercadante - Portenoy	TEVA_MDL_A_03915764
3/24/2004 0:00	PADT_Cover.pdf	TEVA_MDL_A_02866689
2/8/2005 0:00	StateRegulations_with_2003_data_020805.ppt	TEVA_MDL_A_02870537
4/25/2005 0:00	Managed Care Slide Set rev041505.ppt	TEVA_MDL_A_04110715
8/4/2005 0:00	RE: BTP Guidelines	TEVA_MDL_A_06672467
10/14/2005 0:00	Cephalon home office.ppt	TEVA_MDL_A_02875175
1/6/2006 0:00	Cephalon NSM 2006.ppt	TEVA_MDL_A_00717862
4/27/2006 0:00	Microsoft Word - ACTIQ-Appeal-BTP-Non-malignant chronic pain Opioid-toler*	TEVA_MDL_A_05536450
4/27/2006 0:00	Microsoft Word - ACTIQ-Appeal-BTP-Non-malignant chronic pain Opioid-toler*	TEVA_MDL_A_05536455
3/1/2007 0:00	Managed Care Slide Set - Final - 101405.ppt	TEVA_MDL_A_02030896
3/13/2007 0:00	Module 2 Final Feb2007.pdf	TEVA_CHI_00036931
5/25/2007 0:00		TEVA_MDL_A_02038122
10/27/2009 0:00	Kadian_Slides_for_Speaker_Training_with_MLRCmts_2_22.ppt	Acquired_Actavis_00943445
1/14/2010 0:00	CEP-TPP-DATA-0007.mdb	TEVA_MDL_A_05015635
3/19/2012 0:00	Actavis MOXDUO M3 D2 3 14 12 (2)_LAMeditsMar19.docx	Acquired_Actavis_02043281
5/22/2012 0:00	Actavis MoxDuo M3 D4 5.4.12-ARR-5-22-12.docx	Acquired_Actavis_01145826
6/21/2012 0:00	Actavis MoxDuo M3 CLEAN 6 20 12 gtm.JAB.docx	Acquired_Actavis_01867671
7/20/2018 0:00	Actiq calls with notes prior to 2006.csv	TEVA_MDL_A_02416207
		TEVA_MDL_A_00503108
		TEVA_MDL_A_00822994
		TEVA_MDL_A_00851578
		TEVA_MDL_A_00853558
		TEVA_MDL_A_01168562
		TEVA_MDL_A_04517661
		TEVA_MDL_A_04517757
	Slide 1	TEVA_MDL_A_04811967
	Slide 1	TEVA_MDL_A_04867962
	Slide 1	TEVA_MDL_A_04869976
	Slide 1	TEVA_MDL_A_04870167
	Slide 1	TEVA_MDL_A_04872002
	Slide 1	TEVA_MDL_A_04873832
	Slide 1	TEVA_MDL_A_04873929
	Slide 1	TEVA_MDL_A_04875764
	Slide 1	TEVA_MDL_A_04877900

	Slide 1	TEVA_MDL_A_04879729
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	Slide 1	TEVA_MDL_A_04893594
	Slide 1	TEVA_MDL_A_04914460
	Slide 1	TEVA_MDL_A_04949774
	Slide 1	TEVA_MDL_A_04951597
	Slide 1	TEVA_MDL_A_04953444
	Slide 1	TEVA_MDL_A_04953532
	Slide 1	TEVA_MDL_A_04955355
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	Slide 1	TEVA_MDL_A_04959089
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	Slide 1	TEVA_MDL_A_04963447
	Slide 1	TEVA_MDL_A_04984517
	Slide 1	TEVA_MDL_A_05043634
	Slide 1	TEVA_MDL_A_05043730
	Slide 1	TEVA_MDL_A_05114543
Model Policy for the Use of Controlled Substances for the Treatment of Pain (2004) ("FSMB Model Policy- 2004")		
	Column2	Column3
2004	Model Policy for the Use of Controlled Substances for the Treatment of Pain, Federation of State Medical Boards of the US, Inc.	ALLERGAN_MDL_02159836
2008	Model Policy for the Use of Controlled Substances for the Treatment of Pain, Federation of State Medical Boards of the US, Inc.	ALLERGAN_MDL_01134122
2012	Kadian Detail Aid - New Strengths	ACTAVIS0002353
2012	Kadian Detail Aid <b>Ref. #3</b> - Chou, Robert et. al. Opioid Treatment Guidelines: Clinical Guidelines for the Use of Chronic Opioid Therapy in Chronic Noncancer Pain, The Journal of Pain, Vol 10, No 2 (February), 2009: pp 113-130	ALLERGAN_MDL_00773907
2012	FDA Submission of promotional materials, Nov 2012	ALLERGAN_MDL_00705936
5/27/2004 0:00	FSMB Model Policy May 2004.doc	ALLERGAN_MDL_01096579
11/30/2004 0:00	Identifying Controlled Substance Patterns of Utilization Requiring Evaluation Using Administrative Claims Data, The American Journal of Managed Care	ALLERGAN_MDL_01878052
12/21/2006 0:00	Genesis Healthcare Alpharma Risk Management Slide Deck	ALLERGAN_MDL_02158581
7/27/2007 0:00	Kadian Binder 2-B, MSL Training Binders, version 1 (Alpharma)	ALLERGAN_MDL_00813385
7/27/2007 0:00	Kadian Binder 2-A, MSL Training Binders, Version 1 (Alpharma)	ALLERGAN_MDL_00813853
1/21/2009 0:00	KAD010C - KADIAN Abuse and Dependence.doc	ALLERGAN_MDL_01806378
5/7/2009 0:00	Managing Chronic Pain and the Importance of Customizing Opioid Treatment [Kadian_Slides_for_Speaker_Training_with_MLRCmts_2_22.ppt]	ALLERGAN_MDL_00449946
5/8/2009 0:00	Kadian_Slides_for_Speaker_Training_with_MLRCmts_2_22.ppt	ALLERGAN_MDL_01750153
10/26/2009 0:00	KAD010C - KADIAN Abuse and Dependence.doc	ALLERGAN_MDL_01288051
10/27/2009 0:00	Kadian_Slides_for_Speaker_Training_with_MLRCmts_2_22.ppt	ALLERGAN_MDL_01741588
1/14/2010 0:00	Kadian_Slides_for_Speaker_Training_with_MLRCmts_2_22.ppt	ALLERGAN_MDL_01890445
1/28/2010 0:00	actkad11405 Kadian Speaker Training Materials_011810.ppt	ALLERGAN_MDL_01743051
2/1/2010 0:00	actkad11405 Kadian Speaker Training Materials_011810.ppt	ALLERGAN_MDL_01145475
2/1/2010 0:00	actkad11405 Kadian Speaker Training Materials_Annotated_011810.pptx	ALLERGAN_MDL_01145537
4/15/2010 0:00	Comm Plan Draft text 4.9.10 as revised from IWG Draft 2 REMS supporting doc 2Oct09.docx	ALLERGAN_MDL_01412050
5/10/2010 0:00	Communication Plan [Draft]	ALLERGAN_MDL_01242807
6/24/2010 0:00	Template Version 4.0 - 19 September 2008	ALLERGAN_MDL_01771927
5/31/2011 0:00	Template Version 4.0 - 19 September 2008	ALLERGAN_MDL_02071681

7/1/2011 0:00	IWG_Opioid_REMS_SD_01Jul11_Pfizer comments.docx	ALLERGAN_MDL_01292581
2/22/2012 0:00	Actavis MoxDuo IR M3 DP 2.22.12.doc	ALLERGAN_MDL_01780944
2/27/2012 0:00	Actavis MoxDuo IR M3 DP 2.22.12.doc	ALLERGAN_MDL_00979328
3/5/2012 0:00	Actavis MoxDuo IR M3 D1 3.8.12.doc	ALLERGAN_MDL_01980163
3/19/2012 0:00	Actavis MoxDuo M3 D2 3 14 12 SC comments.doc	ALLERGAN_MDL_00979143
3/30/2012 0:00	Module 1.docx	ALLERGAN_MDL_00548624
5/16/2012 0:00	Actavis MoxDuo M3 D4 5.4.12.docx	ALLERGAN_MDL_00092121
5/23/2012 0:00	Actavis MoxDuo M3 D4 5.4.12-ARR-5-22-12.docx	ALLERGAN_MDL_01208810
6/15/2012 0:00	Actavis MoxDuo M3 D6 6.8.12 CLEAN.docx	ALLERGAN_MDL_01209033
7/24/2012 0:00	FOR REVIEW MOXDuo Sales Learning Module 1_MOX-IR-002_D5 6 25 12_clean.doc	ALLERGAN_MDL_00759857
10/2/2012 0:00	#43487 v1 - KAD010A Kadian Abuse and Dependence.doc	ALLERGAN_MDL_01629858
	Actavis MoxDuo IR M3 DP 2.22.12.doc	ALLERGAN_MDL_01770280
		ALLERGAN_MDL_02155906
		ALLERGAN_MDL_02489078
		ALLERGAN_MDL_02513841
		ALLERGAN_MDL_02518511
8/29/2006 0:00	P&T Digest - Pain Management.pdf	ENDO-OPIOID_MDL-04797507
11/1/2007 0:00	Book Avoiding Opioid Abuse While Managing Pain by Lynn R. Webster and Beth Dove Foreword by Steven D. Passik	ENDO-CHI_LIT-00538705
2007	Webs, A Guide for Practitioners Avoiding Opioid Abuse While Managing Pain	ENDO-CHI_LIT-00538705
12/5/2007 0:00	FW: New FDA Ruling - Multiple Rx's for CII's	ENDO-OPIOID_MDL-02473700
12/20/2007 0:00	Case 5 slides 12-19.ppt	ENDO-OPIOID_MDL-01505105
12/20/2007 0:00	Case 4 slides 12-20.ppt	ENDO-OPIOID_MDL-03420132
12/20/2007 0:00	Case 3 slides 12-20.ppt	ENDO-OPIOID_MDL-03420133
1/2/2008 0:00	Case 3 slides 1227 (KV Comments 12-28).ppt	EPI000296546
1/2/2008 0:00	Case 4 slides 12-27 (KV Comments 12-28).ppt	EPI000296547
1/3/2008 0:00	Case 3 slides 1227 (KV Comments 12-28).ppt	ENDO-CHI_LIT-00027552
1/3/2008 0:00	Case 4 slides 12-27 (KV Comments 12-28).ppt	ENDO-CHI_LIT-00027553
1/29/2008 0:00	EN36 Case 2 slides 01-29FINAL.ppt	EPI000479821
1/30/2008 0:00	EN36 Case 2 slides 01-29FINAL.ppt	EPI000479828
2009	Understanding Risk While Maximizing Analgesia (Participant Guide)	CHI_000433679
2009	Managing Persistent Pain in the Older Patient	CHI_000433744
7/14/2009 0:00	PCF Message from June Dahl	ENDO-OPIOID_MDL-02213755
4/6/2010 0:00	Comm Plan Draft text 4.2.10 as revised from IWG Draft 2 REMS supporting doc 2Oct09.docx	END00069439
4/13/2010 0:00	Comm Plan Draft text 4.9.10 as revised from IWG Draft 2 REMS supporting doc 2Oct09.docx	EPI000069070
4/14/2010 0:00	Comm Plan Draft text 4.9.10 as revised from IWG Draft 2 REMS supporting doc 2Oct09.docx	EPI000068412
4/23/2010 0:00	Comm Plan Draft text 4.23.10 as revised from IWG Draft 2 REMS supporting doc 2Oct09.docx	EPI000131989
4/23/2010 0:00	Comm Plan Draft text 4.23.10 as revised from IWG Draft 2 REMS supporting doc 2Oct09.docx	EPI000132156
4/23/2010 0:00	Comm Plan Draft text 4.23.10 as revised from IWG Draft 2 REMS supporting doc 2Oct09.docx	END00143554
4/23/2010 0:00	Comm Plan Draft text 4.23.10 as revised from IWG Draft 2 REMS supporting doc 2Oct09.docx	END00143579
5/6/2010 0:00	Template Version 4.0 - 19 September 2008	EPI000069245
5/7/2010 0:00	Template Version 4.0 - 19 September 2008	EPI000069339
5/12/2010 0:00	Template Version 4.0 - 19 September 2008	EPI000069986
5/12/2010 0:00	Template Version 4.0 - 19 September 2008	EPI000070083
5/14/2010 0:00	Template Version 4.0 - 19 September 2008	EPI000070387
6/1/2010 0:00	RE: ROPU Deck	ENDO-OPIOID_MDL-02476290
6/1/2010 0:00	FW: ROPU Deck	ENDO-OPIOID_MDL-04265016
6/21/2010 0:00	ROPU_deck_short_lo#1002C2E9.pdf	ENDO-OPIOID_MDL-02476454
6/23/2010 0:00	OP-0453 with 062210 MARC edits.pdf	ENDO-OPIOID_MDL-01765978
6/24/2010 0:00	Template Version 4.0 - 19 September 2008	END00079002
6/24/2010 0:00	IWG Plan - Two Announcements from the Ops Subteam	END00079126
6/25/2010 0:00	ROPU_deck_short_final (2) 062510.pptx	EPI000323564
6/25/2010 0:00	ROPU_deck_short_final.pptx	EPI000578554
6/25/2010 0:00	ROPU_deck_short_final (2) 062510 (SBC).pptx	EPI000578557
6/30/2010 0:00	Template Version 4.0 - 19 September 2008	END00081975
7/1/2010 0:00	Template Version 4.0 - 19 September 2008	EPI000071602

7/1/2010 0:00	ROPU_deck_short_final (2) 062510 (SBC).pptx	ENDO-OPIOID_MDL-00371037
7/1/2010 0:00	ROPU_deck_short_final (3) 062510 (SBC).pptx	ENDO-OPIOID_MDL-00371142
7/8/2010 0:00	Template Version 4.0 - 19 September 2008	END00079970
8/4/2010 0:00	ROPU_deck_short_final (3) 062510 (SBC).pptx	ENDO-OPIOID_MDL-00540017
10/8/2010 0:00	ROPU_deck w-DACON all 100510 (SBC).pptx	EPI000323453
10/8/2010 0:00	ROPU_deck w-DACON all 100510 (SBC).pptx	ENDO-OPIOID_MDL-00370859
10/14/2010 0:00	ROPU_deck_short_final (3) 101310 w MARC changes (notespages).pdf	ENDO-OPIOID_MDL-00371176
10/14/2010 0:00	ROPU_deck_short_final (3) 101310 w MARC changes.pptx	ENDO-OPIOID_MDL-00371380
11/4/2010 0:00	ROPU_deck_short_final (3) 110410 w Final MARC changes.pptx	ENDO-OPIOID_MDL-00371418
11/8/2010 0:00	ROPU_deck_short_final (3) 110410 w Final MARC changes.pdf	EPI000323491
11/8/2010 0:00	ROPU_deck_short_final (3) 110410 w Final MARC changes.pptx	EPI000323527
11/8/2010 0:00	ROPU_deck_short_final (3) 110410 w Final MARC changes.pdf	ENDO-OPIOID_MDL-00370965
11/8/2010 0:00	ROPU_deck_short_final (3) 110410 w Final MARC changes.pptx	ENDO-OPIOID_MDL-00371001
11/10/2010 0:00	ROPU_deck_short_final (3) 110410 w Final MARC changes.pptx	EPI000281681
11/10/2010 0:00	ROPU - updated w- DACON all (OP00511) vFinal.pdf	EPI000323383
11/10/2010 0:00	ROPU_deck_short_final (3) 110410 w Final MARC changes v2.pptx	EPI000323490
11/10/2010 0:00	ROPU_deck_short_final (3) 110410 w Final MARC changes.pptx	END00246752
11/10/2010 0:00	ROPU - updated w- DACON all (OP00511) vFinal.pdf	ENDO-OPIOID_MDL-00370789
11/10/2010 0:00	ROPU_deck_short_final (3) 110410 w Final MARC changes v2.pdf	ENDO-OPIOID_MDL-00370893
11/10/2010 0:00	ROPU_deck_short_final (3) 110410 w Final MARC changes v2.pptx	ENDO-OPIOID_MDL-00370929
2011	Responsible Opioid Prescribing in the Era of REMS Presentation	CHI_001213633
2011	Safe and Effective Opioid Therapy Dinner Dialogue	CHI_000472157
1/19/2011 0:00	ROPU_deck_short_final (3) 110410 w Final MARC changes v2.pptx	END00169885
3/28/2011 0:00	ROPU_deck_short_final (3) 110410 w Final MARC changes v2.pptx	END00457201
4/4/2011 0:00	CapabilitiesGeisinger5Apr2011.pptx	END00695942
4/5/2011 0:00	CapabilitiesGeisinger5Apr2011 (MG) 1.pptx	END00696119
5/17/2011 0:00	Proposed Son of ROPU_ HeatherEdits_5.17.2011.pptx	END00594883
5/25/2011 0:00	FINAL SHOW SLIDES PDF Format.pdf	END00550315
6/29/2011 0:00	IWG Opioid REMS SD 28Jun11 bb tc.docx	EPI000078594
6/29/2011 0:00	IWG Opioid REMS SD 28Jun11 bb tc.docx	END00309497
6/30/2011 0:00	IWG Opioid REMS SD 28Jun11 bb tc mac.docx	EPI000078792
7/1/2011 0:00	IWG Opioid REMS SD 28Jun11 bb tc mac.docx	EPI000078886
7/1/2011 0:00	IWG Opioid REMS SD 1 July 2011 clean.docx	EPI000079057
7/6/2011 0:00	Dispenser ST Revisions IWG Opioid REMS SD 28Jun11.docx	END00309662
2012	Responsible Opioid Prescribing in the Era of REMS	ENDO-CHI_LIT-00209385
1/27/2012 0:00	Universal Precautions presentation 012712.pptx	EPI000206724
1/27/2012 0:00	Universal Precautions presentation 012712.pptx	END00594245
1/27/2012 0:00	Universal Precautions presentation 010612.pptx	END00594274
3/6/2012 0:00	11.04.2010 ROPU slide deck - MARC approved OP-00511.pptx	END00386397
1/28/2013 0:00	Maximizing Value in Utilizing Opioid Analgesics OP 02402 Dec 2012 MARC approved.pptx	ENDO-OPIOID_MDL-00371725
1/24/2014 0:00	Template Version 4.0 - 19 September 2008	ENDO-CHI_LIT-00004087
3/10/2014 0:00	Pain, 154 (2013) 2287-2296. doi:10.1016/j.pain.2013.05.053	ENDO-OPIOID_MDL-01243057
		ENDO-CHI_LIT-00540303
		END00014029
		END00016511
2016	Federation of State Medical Boards. Model Policy on the Use of Opioid Analgesics in the Treatment of Chronic Pain	INSYS-MDL-005596004
2013	Appeal - Prior-Authorization Request	INSYS-MDL-009104661

5/12/2004 0:00	Revised Pain Management Guidelines.doc	JAN-MS-01035269
12/6/2006 0:00	NM Outcomes Update December 2006.ppt	JAN-MS-00948603
3/1/2007 0:00	NM Outcomes Update December 20061.ppt	JAN-MS-00948605
3/26/2007 0:00	NM Educational Initiatives 2007rk.ppt	JAN-MS-00948601
3/26/2007 0:00	NM Outcomes presentation 2007rk.ppt	JAN-MS-00948602
12/6/2007 0:00	Opioid Therapy for Chronic Pain Wrap-up	JAN-MS-01246214
2007	Commercial Considerations for Opioids	Janssen
2008	Pain Policy Overview Presentation - 3/11/2008	Janssen
3/12/2008 0:00	Pain Policy Final.ppt	JAN-MS-00471978
4/7/2008 0:00	Overview of Xcenda Provider Education in Pain (4.7.08).ppt	JAN-MS-00814133
7/14/2008 0:00	RE: Tapentadol reference	JAN-MS-00326043
1/11/2010 0:00	PADT_Guide.pdf	JAN-MS-02493626
7/13/2010 0:00	2010-07-08-IWG-Long-Acting Opioid REMS Supporting Document-submitted.pdf	JAN-MS-00934477
10/13/2010 0:00	Industry Working Group (IWG) REMS and REMS Supporting Document.10.07.2010.pdf	JAN-MS-01154057
12/9/2010 0:00	PADT Guidebook 6-19-03.pdf	JAN-MS-00804406
2010	Risk Management in Chronic Pain Patients	Janssen
2011	Prescribe Responsibly	Janssen
8/8/2012 0:00	National_PainPolicy_vClient_8-8-12.pptx	JAN-MS-01050206
2012	Treating Pain: A National & State Policy Review	Janssen
2013	Addressing the Barriers to Effective Pain Management and Issues of Opioid Misuse and Abuse	Janssen
2013	Regulatory Environment: Federal, State, and Industry Efforts to Reduce Prescription Drug Diversion and Abuse	Janssen
3/21/2013 0:00	ProgressNotesFolder v13.pdf	JAN-MS-00993592
11/21/2013 0:00	02TLM11020.pdf	JAN-MS-00983939
12/10/2013 0:00	Smith et al, 2013.pdf	JAN-MS-02762889
2014	Competitive Intelligence Bi-Weekly Brief (Oct 24-Nov 6)	
6/7/2017 0:00	ProgressNotesFolder v8.pdf	JAN-MS-00598211
11/15/2018 0:00	COPY_02UNB12015_-_cg_comments.pdf	JAN-MS-03931910
11/15/2018 0:00	MS REVIEW ARCHIVE_02UNB12015_NationalPainPolicySlideDeck_vMSTAT.pdf	JAN-MS-03981823
11/15/2018 0:00	MS VERSIONS_02UNB12015.pdf	JAN-MS-03981901
8/22/2007 0:00	FSMB model policy controlled substances used for pain.doc	MCKMDL00574780
11/17/2009 0:00	MSL Training 5 Labeling and REMS.ppt	MNK-T1_0002989004
2010	References Cost.xlsx	MNK-T1_0001490557
5/10/2010 0:00	Comm Plan Draft text 4 9 10 as revised from IWG Draft 2 REMS supporting doc 20Oct09 CONSENSUS REVISION 05102010.docx	MNK-T1_0007876825
7/9/2010 0:00	Opioid Treatment Landscape R6.doc	MNK-T1_0001490357
7/13/2010 0:00	Opioid Treatment Landscape MODULE 6 (Reardon7-12).doc	MNK-T1_0001490261
7/15/2010 0:00	Opioid Treatment Landscape R6 7.15.10(KQ).doc	MNK-T1_0001490335
8/3/2010 0:00	Reference Tracking updated 2(3).xlsx	MNK-T1_0002336149
8/5/2010 0:00	References Cost.xlsx	MNK-T1_0001490557
4/12/2011 0:00	Opioid Analgesics in Primary Care: Challenges and New Advances in the Management of Noncancer Pain	MNK-T1_0002675768
5/13/2011 0:00	Presentation re: C.A.R.E.S. Alliance / Opioid Clinical education slide	MNK-T1_0001492937
5/13/2011 0:00	Presentation re: C.A.R.E.S. Alliance / Opioid Clinical education slide	MNK-T1_0001492938
5/27/2011 0:00	Document re: Methadone Reference Series	MNK-T1_0001280935
6/1/2011 0:00	Powerpoint: Opioid Clinical education slides_5.13_KS	MNK-T1_0001492939
6/15/2011 0:00	Opioid Clinical Management Guide - Use of opioid analgesics for chronic noncancer pain - Provided as an educational resource by CARES Alliance.	MNK-T1_0001492945
7/8/2011 0:00	Presentation re: Opioid Clinical Management Guide Slides	MNK-T1_0001492944
7/11/2011 0:00	CARES Alliance Opioid Clinical Management Guide education slides_k_7.8.ppt	MNK-T1_0001492943
7/12/2011 0:00	CARES Alliance Opioid Clinical Management Guide education slides_7.12.ppt	MNK-T1_0001492940



7/18/2011 0:00	Opioid Clinical education slides_7.12_ks.ppt	MNK-T1_0001492941
7/20/2011 0:00	Opioid Clinical education slides_7.20.ppt	MNK-T1_0001492942
7/21/2011 0:00	Opioid Clinical education slides_7.21_final.ppt	MNK-T1_0001492946
7/21/2011 0:00	Opioid Clinical education slides_final raw file.ppt	MNK-T1_0001492947
8/9/2011 0:00	Opioid Clinical education slides_7.12.ppt	MNK-T1_0006123051
12/1/2011 0:00	Document re: Module 4 - Pain Conditions	MNK-T1_0001286739
1/3/2012 0:00	Ascending Pathways Module 4 outline 1-3-11 das.docx	MNK-T1_0001286647
6/11/2012 0:00	PDF: Module 7 - Misuse, Abuse, Diversion, and Addiction Notes For Fact Check	MNK-T1_0001739434
6/18/2012 0:00	2012 Module 7 For Fact Check_skc_061112_JTedit Misuse, Abuse, Diversion, and Addiction	MNK-T1_0002042087
6/19/2012 0:00	2012 Module 7 DRAFT Outline_061912kq.docx Misuse, Abuse, Diversion, and Addiction Sales Training Module	MNK-T1_0001739270
6/20/2012 0:00	Module 7 Outline_062012kq.docx	MNK-T1_0001739321
6/21/2012 0:00	Module 7 Outline_062012kq_mm LR updated.docx	MNK-T1_0001739372
6/21/2012 0:00	Module 7 First Draft - 071912_error.docx	MNK-T1_0002887434
8/2/2012 0:00	AscendingPathwaysModule7_msDraft1_080212.docx	MNK-T1_0002887351
8/23/2012 0:00	AscendingPathwaysModule7_forMARC1_082312.docx	MNK-T1_0001736405
8/30/2012 0:00	Sychrony Module 7 Misuse, Abuse, Diversion and Addiction	MNK-T1_0001737041
8/31/2012 0:00	AscendingPathwaysModule7_forMARC2_083112.docx	MNK-T1_0001736595
9/5/2012 0:00	AscendingPathwaysModule7_forMARC2_090512_tpedits.doc x	MNK-T1_0001736194
9/5/2012 0:00	Ascending Pathways Module	MNK-T1_0001736504
9/5/2012 0:00	Ascending Pathways Module	MNK-T1_0001737268
9/10/2012 0:00	Document re: Misuse, Abuse, Diversion, and Addiction	MNK-T1_0001736305
9/11/2012 0:00	AscendingPathwaysModule7_forlayout_091112_skc.docx Misuse, Abuse, Diversion, and Addiction	MNK-T1_0006930062
9/17/2012 0:00	AscendingPathwaysModule7_workingcopyforDanielle091312. docx	MNK-T1_0001736946
9/27/2012 0:00	AscendingPathwaysModule7_forlayout_091212_skc.docx	MNK-T1_0001499145
2013	Model Policy for the Use of Opioid Analgesics in the Treatment of Chronic Pain	MNK-T1_0001193809
1/9/2013 0:00	Document re: Journal of Pain and Symptom Management Vol 44 No 6S	MNK-T1_0001465678
		ABT-MDL-KY-0017759
2003		ABT-MDL-KY-0024637
2004	OxyContin Tablets Advertising Report (Single Product)	PDD1501128775
10/1/2004 0:00	DID0020014.pdf TRANSMITTAL OF ADVERTISEMENTS AND PROMOTIONAL LABELING FOR DRUGS AND BIOLOGICS FOR HUMAN USE	PURCHI-000765326
3/21/2005 0:00	Microsoft PowerPoint - HCP LE-Persp Pain Mgt 1-21-05.ppt	PKY183120124
5/13/2005 0:00	Microsoft PowerPoint - Hard Quest (1HR-HO avail- nonaccred)12-04 update.ppt	PKY183120066
9/15/2006 0:00	Scientific Communications Document Review #986	PPLP003889997
10/17/2006 0:00	2006-10-28-SPS talk-v2.ppt	PPLPC019000108357
10/20/2006 0:00	Scientific Communications Document Review # 996	PPLP003890179
10/25/2006 0:00	2006-11-02-Opioid Analgesics-Pearls & Pitfalls-FINAL.pdf	PPLPC018000110563
1/2/2007 0:00	FACETS 12-10-06.ppt	PPLP003564226
8/15/2007 0:00	Opioid Analgesic Therapy: Clinical Considerations - David Haddox, MD.	PPLP003889451
11/6/2007 0:00	FACETS Volume 4 (OME284) (final approved - all modules without Comm Steps).pdf	PPLPC021000162863
9/3/2008 0:00	Clinical Issues in Opioid Prescribing.pdf	PPLP004085950
9/3/2008 0:00		PDD8013350385
11/16/2008 0:00	Pam's Chapter Section_Law and Advocacy.doc	PPLP004067206
4/2/2009 0:00	A7012-RDA Pain Kit Retained Vis Aid.pdf	PPLP004231808
4/3/2009 0:00	Material Review Form	PPLP004231172
4/6/2009 0:00	A7012-RDA Pain Kit Retained Vis Aid.pdf	PPLP004253501
5/29/2009 0:00	B7012-RVA PMK Retained VA.pdf Partners Against Pain - Pain Management Kit	PPLP004119228
6/19/2009 0:00	"Complexities in Caring for People in Pain" 6-17-09.ppt 40 pp. by Purdue A lecture guide with accompanying slides. 2009	PPLP004058742
6/24/2009 0:00	Tkg #8409_PAP126_L2017.pdf	PPLP004231266

6/24/2009 0:00	Tkg #8409_PAP126_L2017.pdf	PPLP004252945
6/29/2009 0:00	Tkg #8409_PAP126_L2017.pdf	PPLP004230727
6/29/2009 0:00	Tkg #8409_PAP126_L2017.pdf	PPLP004230816
6/29/2009 0:00	Tkg #8409_PAP126_L2017.pdf	PPLP004230905
6/29/2009 0:00	Tkg #8409_PAP126_L2017.pdf	PPLP004230994
7/13/2009 0:00	Tkg #8409_PAP126_L2017.pdf	PPLP004230466
7/14/2009 0:00	Tkg #8409_PAP126_L2017.pdf	PPLP004252643
7/22/2009 0:00	Clinical Issues in Opioid Prescribing.pdf	PPLP004229758
7/22/2009 0:00	Clinical Issues in Opioid Prescribing.pdf	PPLPC012000232242
10/13/2009 0:00	Partners Against Pain Publication: Clinical Issues in Opioid Prescribing - Considerations for the practitioner in the use of opioids in managing moderate to severe pain	PDD8901054663
2/22/2010 0:00	Clinical Issues in Opioid Prescribing.pdf	PPLP004228889
7/8/2010 0:00	Long-Acting Opioid REMS Supporting Document 7Jul10.pdf	PPLPC016000031377
4/19/2011 0:00	Industry Working Group (IWG) REMS and REMS Supporting Document.10.07.2010.pdf	PPLPC001000084751
7/1/2011 0:00	67903_PAP157_B7012-RVA_PMK Retained VA.pdf	PPLP003438424
4/30/2012 0:00	Thought you would want to know	PPLP004362100
6/3/2013 0:00	Course_34_Fishman_CD.pdf	PPLPC017000465525
2/3/2014 0:00	Definitions_ReviewArticle.pdf	PPLPC001000147641
3/12/2014 0:00	2014-03-05-FSMB Model Policy HP one-pager without logo.docx	PPLPC001000149932
3/12/2014 0:00	2014-03-05-FSMB Model Policy HP one-pager with logo.docx	PPLPC001000149933
3/12/2014 0:00	FSMB Model Pain Policy July 2013.pdf	PPLPC001000149934
3/13/2014 0:00	2014-03-05-IfsFSMB Model Policy HP one-pager without logo.docx	PPLPC001000150123
7/21/2014 0:00	2014-Mar FSMB Model Policy Brief.pdf	PPLPC002000187345
4/24/2015 0:00	Script Chronic Pain--Epidemiology and Current Treatment Guidelines_1.pdf	PPLP003307145
5/15/2015 0:00	J2017 Clinical Issues-Opioids.pdf	PPLP004085756
10/25/2016 0:00	002_PAP157_B7012-RVA.pdf	PPLP003326602
10/25/2016 0:00	003_PAP157_A7012-RVA.pdf	PPLP003326662
11/28/2016 0:00	PAP081_B7313.pdf	PPLP003341556
6/8/2017 0:00	139707.pdf	PPLP003465715
8/13/2017 0:00	001396.pdf	PPLP003863147
8/13/2017 0:00	001605.pdf	PPLP003863314
8/13/2017 0:00	001693.pdf	PPLP003863402
8/18/2017 0:00	025345.pdf	PPLP003889865
8/18/2017 0:00	Opioid Analgesics Pearls & Pitfalls	PPLP003890021
	Brochure "Clinical Issues in Opioid Prescribing" (22pp). Considerations for the practitioner in the use of opioids in managing moderate to severe pain	PPLP003517021
		PPLP003517098
		PPLP003518484
2004	<u>Model Policy for the Use of Controlled Substances for the Treatment of Pain by the Federation of State Medical Boards of the United States, Inc.</u>	TEVA_MDL_A_00852339
2004	3a Website Content Actiq OAP 3B	TEVA_MDL_A_00718332
3/1/2004 0:00	Mercadante - Portenoy	TEVA_MDL_A_03915764
2005	Booth Panels	TEVA_MDL_A_02870175
4/25/2005 0:00	Managed Care Slide Set rev041505.ppt	TEVA_MDL_A_04110715
8/4/2005 0:00	RE: BTP Guidelines	TEVA_MDL_A_06672467
2006	Template Letter of Medical Necessity	TEVA_MDL_A_02529930
2006	Educational Grant Draft Request	TEVA_MDL_A_01171946
2006	Publication: P&T Digest, A Peer - Reviewed Compendium of Formulary Considerations. Article of Interest: <u>Balancing Patient Needs and Provider Responsibilities in the Use of Opioids</u> by Dr. Bill McCarberg, MD (TEVA_MDL_A_01090688)	TEVA_MDL_A_01090655
4/11/2006 0:00	Rules of the Game.ppt	TEVA_MDL_A_02876808
4/27/2006 0:00	Microsoft Word - ACTIQ-Appeal-BTP-Non-malignant chronic pain Opioid-toler*	TEVA_MDL_A_05536450
4/27/2006 0:00	Microsoft Word - ACTIQ-Appeal-BTP-Non-malignant chronic pain Opioid-toler*	TEVA_MDL_A_05536455

2007	<u>A Supplement to: Resident &amp; Staff Physician Pain: Improving patient Outcomes and Optimizing Risk in Opioid Therapy of Chronic Pain.</u>	TEVA_MDL_A_00835446
2007	<u>Draft of Interpreting Changes in State Laws and Regulations Governing the Use of Controlled Substances to Treat Pain by Aaron M. Gilson</u>	TEVA_MDL_A_00829985
2007	Fentora sNDA RiskMap Tools Review Meeting Pain Care Franchise Marketing	TEVA_MDL_A_00376199
3/1/2007 0:00	Managed Care Slide Set - Final - 101405.ppt	TEVA_MDL_A_02030896
3/13/2007 0:00	Module 2 Final Feb2007.pdf	TEVA_CHI_00036931
5/25/2007 0:00	SECURE FOLDER	TEVA_MDL_A_02038122
7/30/2007 0:00	RE: FSMB Proposal	TEVA_MDL_A_02172236
7/31/2007 0:00	RE: FSMB Proposal	TEVA_MDL_A_06564329
8/1/2007 0:00	FW: FSMB Proposal	TEVA_MDL_A_02024662
10/11/2007 0:00	RiskMAP Folder Articles	TEVA_MDL_A_02890772
11/21/2007 0:00	Terifay_Risk MAP_v1_112007.ppt	TEVA_MDL_A_01497863
2008	Form FDA 2253 Transmittal of Advertisements and Promotional Labeling for Drugs and Biologics for Human Use (Fentora)	TEVA_MDL_A_00027290
2008	Pain Management: Understanding Opioids and and Managing Their Risks, Overview of Responsible Prescribing	TEVA_MDL_A_0218717
3/7/2008 0:00	[No Subject]	TEVA_MDL_A_07487727
3/26/2008 0:00	AAD Core FINAL2.ppt	TEVA_MDL_A_02488945
3/31/2008 0:00	AAD Core FINAL2 PDRC.ppt	TEVA_MDL_A_02489062
4/1/2008 0:00	AAD Clinical Practice FINAL PDRC pc.ppt	TEVA_MDL_A_02021358
4/1/2008 0:00	AAD Regulatory FINAL PDRC.ppt	TEVA_MDL_A_02026344
4/1/2008 0:00	AAD Core FINAL2 PDRC pc.ppt	TEVA_MDL_A_02488268
4/5/2008 0:00	Penny's Slides.ppt	TEVA_MDL_A_00680788
4/5/2008 0:00	Penny's Slides.ppt	TEVA_MDL_A_00681496
4/7/2008 0:00	AAD Regulatory FINAL.ppt	TEVA_MDL_A_02489550
4/7/2008 0:00	AAD Clinical Practice FINAL.ppt	TEVA_MDL_A_02489552
1/28/2009 0:00	jan09pslrmpslides.ppt	TEVA_MDL_A_01215588
10/26/2009 0:00	Penny's Slides.ppt	TEVA_MDL_A_00680804
10/27/2009 0:00	Kadian_Slides_for_Speaker_Training_with_MLRcmts_2_22.ppt	Acquired_Actavis_00943445
2010	Grant Request: Legal and Ethical Challenges in the Treatment of Chronic Pain	TEVA_MDL_A_01174695
2010	Approved under Grant 6234 - City of Hope. American Academy of Pain Management 21st Annual Clinical Meeting, Opioids 101:Using Current Therapies as Part of an Overall Pain Management Program.	TEVA_MDL_A_01177644
1/14/2010 0:00	CEP-TPP-DATA-0007.mdb	TEVA_MDL_A_05015635
10/4/2011 0:00	ACT013 - Potential for Misuse -fixed.doc	TEVA_MDL_A_00944107
10/4/2011 0:00	ACT013 - Potential for Misuse.doc	TEVA_MDL_A_00944522
10/4/2011 0:00	ACT013 - Potential for Misuse.doc	TEVA_MDL_A_00948426
3/19/2012 0:00	Actavis MOXDUE M3 D2 3 14 12 (2)_LAMeditsMar19.docx	Acquired_Actavis_02043281
5/22/2012 0:00	Actavis MoxDuo M3 D4 5.4.12-ARR-5-22-12.docx	Acquired_Actavis_00001699
5/22/2012 0:00	Actavis MoxDuo M3 D4 5.4.12-ARR-5-22-12.docx	Acquired_Actavis_01145826
6/21/2012 0:00	Actavis MoxDuo M3 CLEAN 6 20 12.gtm.docx	Acquired_Actavis_00446467
6/21/2012 0:00	Actavis MoxDuo M3 CLEAN 6 20 12.gtm.JAB.docx	Acquired_Actavis_01867671
7/20/2018 0:00	Actiq calls with notes prior to 2006.csv	TEVA_MDL_A_02416207
7/26/2018 0:00	ACT013 -Abuse Potential - Archived in Dec 2011.DOC	TEVA_MDL_A_01088901
		TEVA_MDL_A_00822994
		TEVA_MDL_A_00846047
		TEVA_MDL_A_00846146
		TEVA_MDL_A_00853558
	Emerging Solutions in Pain...Today's source for tomorrow's pain management.	TEVA_MDL_A_01165591
	SUBJECT	TEVA_MDL_A_04517661
	SUBJECT	TEVA_MDL_A_04517757
	Slide 1	TEVA_MDL_A_04811967
	Slide 1	TEVA_MDL_A_04867962
	Slide 1	TEVA_MDL_A_04869976
	Slide 1	TEVA_MDL_A_04870167
	Slide 1	TEVA_MDL_A_04872002
	Slide 1	TEVA_MDL_A_04873832

	Slide 1	TEVA_MDL_A_04873929
	Slide 1	TEVA_MDL_A_04875764
	Slide 1	TEVA_MDL_A_04877900
	Slide 1	TEVA_MDL_A_04879729
	Slide 1	TEVA_MDL_A_04881999
	Slide 1	TEVA_MDL_A_04884000
	Slide 1	TEVA_MDL_A_04893594
	Slide 1	TEVA_MDL_A_04914460
	Slide 1	TEVA_MDL_A_04949774
	Slide 1	TEVA_MDL_A_04951597
	Slide 1	TEVA_MDL_A_04953444
	Slide 1	TEVA_MDL_A_04953532
	Slide 1	TEVA_MDL_A_04955355
	Slide 1	TEVA_MDL_A_04957178
	Slide 1	TEVA_MDL_A_04959001
	Slide 1	TEVA_MDL_A_04959089
	Slide 1	TEVA_MDL_A_04960912
	Slide 1	TEVA_MDL_A_04963447
	Slide 1	TEVA_MDL_A_04984517
	Slide 1	TEVA_MDL_A_05043634
	Slide 1	TEVA_MDL_A_05043730
	Slide 1	TEVA_MDL_A_05114543
	Emerging Solutions in Pain...Today's source for tomorrow's pain management	TEVA_MDL_A_01165591
<b>Joint Commission on Accreditation of Healthcare Organizations, Pain Standards for 2001. ("JCAHO Standards")</b>		
	Column2	Column3
2005	JCAHO Standards	ALLERGAN_MDL_02158487 ALLERGAN_MDL_02158482
2003	Responsible Prescribing of Opioids for the Management of Chronic Pain, Therapy in Practice	ALLERGAN_MDL_02160013
5/27/2004 0:00	Article from APhA Special Report Pgs 8-13.pdf	ALLERGAN_MDL_01096584
4/6/2012 0:00	Reference #9 JCAHO.pdf	ALLERGAN_MDL_01769460
4/27/2012 0:00	Actavis MoxDuo M2 Managing Acute Pain D4 4.20.12.docx	ALLERGAN_MDL_00546350
5/16/2012 0:00	Actavis MoxDuo M2 Managing Acute Pain D4 4.20.12.docx	ALLERGAN_MDL_00092074
5/17/2012 0:00	Pain	ALLERGAN_MDL_00115244
5/22/2012 0:00	Actavis MoxDuo M2 Managing Acute Pain D4 4.20.12_RTHv1.docx	ALLERGAN_MDL_00091151
6/18/2012 0:00	module 1 with comments.pdf	ALLERGAN_MDL_01209160
6/20/2012 0:00	Actavis MoxDuo M2 Managing Acute Pain D6 6 19 12.docx	ALLERGAN_MDL_00455441
7/24/2012 0:00	FOR REVIEW MOXDuo Sales Learning Module 1_MOX-IR-002_D5 6 25 12_clean.doc	ALLERGAN_MDL_01437181
7/25/2012 0:00	Actavis MoxDuo M2 Managing Acute Pain D8 7.25.12 Tracked Version.docx	ALLERGAN_MDL_00537139
7/25/2012 0:00	Actavis MoxDuo M2 Managing Acute Pain D8 7.25.12 Tracked Version.docx	ALLERGAN_MDL_01231664
7/25/2012 0:00	Actavis MoxDuo M2 Managing Acute Pain D8 6.25.12 CLEAN.docx	ALLERGAN_MDL_00537079
7/26/2012 0:00	FOR REVIEW MOX-IR-003 MOXDuo Learning Module 2 - Managing Acute Pain D8 6 25 12.docx	ALLERGAN_MDL_00536782
7/26/2012 0:00	FOR REFERENCE Prior PRC Reviewer Comments MOXDuo Module 2 Managing Acute Pain D8 6 25 12 Tracked Version.docx	ALLERGAN_MDL_00536723
1/15/2013 0:00	LEARNING SYSTEM 07.01.2010.doc	ALLERGAN_MDL_01738190
		ALLERGAN_MDL_02487542
		ALLERGAN_MDL_03270846
		ALLERGAN_MDL_03271696
		ALLERGAN_MDL_03272779
		ALLERGAN_MDL_03272884
		ALLERGAN_MDL_03289325
		ALLERGAN_MDL_03487893
	Combunox Professional Relations Plan	ALLERGAN_MDL_03491548
2001	JCAHO Standards	ENDO-OPIOID_MDL-02356776 ENDO-OPIOID_MDL-03256633

2001	Endo Brochure "Understanding Your Pain" Receives JCAHO logo endorsement/broad distribution	ENDO-OPIOID_MDL-01606654
2001	Opana brand reference titled Pain - Current Understanding of Assessment Management & Treatments	ENDO-CHI_LIT-00541959
2001	NPC and JCAHO "Pain: Current Understanding of Assessment, Management, and Treatments" (National Pharmaceutical Council, Inc. and JCAHO Monograph).	ENDO-CHI_LIT-00541959
11/30/2001 0:00	opioid lecture - Nov 27 draft.ppt	ENDO-OPIOID_MDL-02344133
12/3/2001 0:00	Pain: Current Understanding of Assessment, Management and Treatments	ENDO-CHI_LIT-00541959
12/17/2001 0:00	opioid lecture - Nov 30 draft short rev.ppt	ENDO-OPIOID_MDL-01998274
12/19/2001 0:00	opioid lecture - Nov 30 draft rev - longer version.ppt	ENDO-OPIOID_MDL-02356577
12/19/2001 0:00	opioid lecture - Nov 30 draft short rev.ppt	ENDO-OPIOID_MDL-02356612
1/7/2002 0:00	opioid lecture - Jan '02 draft short rev.ppt	ENDO-OPIOID_MDL-02344125
1/7/2002 0:00	opioid lecture - Jan 7 draft short rev.ppt	ENDO-OPIOID_MDL-02344127
1/14/2002 0:00	VT additions opioid lecture - Jan '02 draft short rev.ppt	ENDO-OPIOID_MDL-02344200
4/22/2003 0:00	sales rep training opioids - VT 04-22-03.ppt	ENDO-OPIOID_MDL-02356776
2006	2007-2011 Business Plan Opana ER	ENDO-CHI_LIT00545916
8/29/2006 0:00	P&T Digest - Pain Management.pdf	ENDO-OPIOID_MDL-04797507
2007	Webs, A Guide for Practitioners Avoiding Opioid Abuse While Managing Pain	ENDO-CHI_LIT-00538705
11/22/2008 0:00	Opening and About Endo Update.ppt	ENDO-CHI_LIT-00024654
11/24/2008 0:00	Opening and About Endo Update-11-23-08.ppt	ENDO-CHI_LIT-00024652
11/25/2008 0:00	Opening and About Endo Update-11-25-08.ppt	ENDO-CHI_LIT-00024653
12/31/2008 0:00	OP-0369_Home Office Deck_FINAL PMRB.ppt	ENDO-CHI_LIT-00024650
2009	Opioid Analgesics for Pain Management (Endo-Sponsored CME)	CHI_001222272
1/12/2009 0:00	OP-0369_Home Office Deck_FINAL PMRB [010909].ppt	ENDO-CHI_LIT-00024649
1/25/2011 0:00	Cephalon_SymposiumEnduring.pdf	ENDO-CHI_LIT-00319221
4/29/2011 0:00	Rx Drug Abuse Misuse and Diversion.ppt	ENDO-OPIOID_MDL-00653071
11/1/2012 0:00	OP-01881_FINAL_Mod 1 Low Back Pain_120711.pdf	ENDO-CHI_LIT-00368441
2/20/2014 0:00	Opening and About Endo Update-11-25-08.ppt	ENDO-CHI_LIT-00033480
2/20/2014 0:00	OP-0369_Speaker Deck_FINAL PMRB.ppt	ENDO-CHI_LIT-00033482
2/20/2014 0:00	RP-00707e_FINAL_Module 4 Comp Supp-Transdermal_122810.doc	ENDO-CHI_LIT-00058954
2/20/2014 0:00	RP-00540_FINAL_Module 1-Low Back Pain_121610.doc	ENDO-CHI_LIT-00058996
2/20/2014 0:00	RP-00583_FINAL_Module 2-Management of Low Back Pain_121610.doc	ENDO-CHI_LIT-00059148
2/20/2014 0:00	1 OP-0369_Home Office Deck_FINAL PMRB 010909SL.ppt	ENDO-CHI_LIT-00188306
2/20/2014 0:00	1 OP-0369_Home Office Deck_FINAL PMRB 010909SL.ppt	ENDO-CHI_LIT-00188336
2013	Opioid Dependency: Prescription Pill Abuse and the Perfect Storm	INSYS-MDL-000402913
2014	JCAHO standards: Managing Disruptive Physician Behavior	INSYS-MDL-002293010
6/27/2014 0:00	New Nucynta ER ePromotion - Just In From The CDP Panel	INSYS-MDL-002802378
6/27/2014 0:00	New Nucynta ER ePromotion - Just In From The CDP Panel	INSYS-MDL-003277687
8/4/2014 0:00	New Nucynta ER ePromotion in the Pain Market From J&J	INSYS-MDL-003273558
2000	Email from Jeann Gillespie to various companies. Update on the JCAHO pain management project	Janssen
2000	Email from Bruce Moskovitz to Gary Vorsanger re JCAHO pain mangement project	Janssen
2000	JCAHO Pain Management Initiative Conference Call Minutes, Thursday October 19, 2000	Janssen
2000	1999-2000 JCAHO Comprehensive Accreditation Manual for Ambulatory Care - Patient Rights and Organization Ethics chapter - Patient Pain Rights	Janssen
2000	Article: Making Pain Assessment and Management a Healthcare System Priority Through the New JCAHO Pain Standards	Janssen
2000	Developing an educational monograph about pain management to support implementation and adoption of JCAHO's pain management standards	Janssen
7/2/2001 0:00	Content Draft 0701.ppt	JAN-MS-02324402



2001	Email from Gary Vorsanger to Jim Eckhardt re: Pain Mgmt. Monograph 4/4/2001	Janssen
2001	Email from Gary Vorsanger to Alan Basement, 4/4/2001	Janssen
2001	Email from Adrienne Minecci to Taryn Sichta 11/21/2001	Janssen
3/6/2002 0:00	Pain Monograph-newpdf.pdf	JAN-MS-00656452
12/9/2002 0:00	Optimizing Chronic Pain Management with Duragesic Presentation	JAN-MS-00310474
12/12/2002 0:00	ProgressNotesFolder v5.pdf	JAN-MS-00310558
12/18/2002 0:00	CE presentation LAOs and TDF-final.ppt	JAN-MS-00313196
3/6/2002 0:00	Pain Monograph-newpdf.pdf	JAN-MS-00656452
7/28/2002 0:00	RE: New Publication Available: Pain: Current Understanding of Assessment, Management, and Treatments	JAN-MS-00287264
2002	Achieving Balance in Chronic Pain management	Janssen
2002	Chronic pain Management: Balancing Treatment and Abuse	Janssen
2002	Update on Long-acting Opioids and Appropriate Use of Transdermal Fentanyl	Janssen
2003	Opioids in the News + Duragesic Product Positioning	Janssen
4/30/2004 0:00	Delivery Systems for Opioid Therapy: Critical Considerations	JAN-MS-00314926
2005	Duragesic - Value from an Outcomes Research Perspective	
10/4/2007 0:00	RE: References for tapentadol Q&A document	JAN-MS-00506207
2007	Pain Management Essentials: Strategies for Implementing Optimal Pain Control in the PACU	
8/16/2007 0:00	RE: References for Chronic Pain Story Key Messages, Item # 02U0216	JAN-MS-01237759
6/23/2008 0:00	Tapentadol_Unbranded_Course5_v3.0.doc	JAN-MS-00324756
6/20/2008 0:00	Tapentadol_Unbranded_Course5_v3.0.doc	JAN-MS-00324902
7/14/2008 0:00	NPC & JCAHO 2001.pdf	JAN-MS-00326044
8/20/2008 0:00	Tapentadol Product Training.	JAN-MS-00442774
10/13/2008 0:00	PharmBarriersT2.pdf	JAN-MS-00469544
10/13/2008 0:00	PharmPathwaysT3.pdf	JAN-MS-00469552
7/14/2008 0:00	RE: Tapentadol reference	JAN-MS-00326043
6/28/2008 0:00	OMJUSTDPDTPAP00050_SCRIPT.doc	JAN-MS-00097082
7/7/2008 0:00	Tapentadol_Unbranded_Course5_v4.0.doc	JAN-MS-00097402
10/13/2008 0:00	PharmBarriersT2.pdf	JAN-MS-00469544
10/13/2008 0:00	PharmPathwaysT3.pdf	JAN-MS-00469552
10/24/2008 0:00	Requested DocAlert: Pain Insights: Are Drug Side Effects Obstacles to Effective Pain Management?	JAN-MS-00476357
10/24/2008 0:00	Requested DocAlert: Why Pain Pathophysiology Supports a Multipathway Approach to Treatment	JAN-MS-00476361
2008	Pain: Current Understanding of Assessment, Management, and Treatments	
9/30/2009 0:00	Nucynta - Rep InService Slide Deck VClient Final (NXPowerLite).ppt	JAN-0018-0013988
10/12/2009 0:00	pptD0.tmp	JAN-0018-0014778
10/13/2009 0:00	Microsoft_Office_PowerPoint_97-2003_Presentation1.ppt	JAN-0018-0015976
10/13/2009 0:00	Microsoft_Office_PowerPoint_97-2003_Presentation1.ppt	JAN-0018-0016007
10/13/2009 0:00	Microsoft_Office_PowerPoint_97-2003_Presentation1.ppt	JAN-0018-0016110
10/13/2009 0:00	Microsoft_Office_PowerPoint_97-2003_Presentation1.ppt	JAN-0018-0016821
10/13/2009 0:00	Microsoft_Office_PowerPoint_97-2003_Presentation1.ppt	JAN-0018-0016852
10/6/2009 0:00	Nucynta - Rep InService Slide Deck VClient Final (NXPowerLite).ppt	JAN-0018-0007067
9/30/2009 0:00	Nucynta - Rep InService Slide Deck VClient Final (NXPowerLite).ppt	JAN-0018-0013988
10/12/2009 0:00	pptD0.tmp	JAN-0018-0014778
10/13/2009 0:00	Microsoft_Office_PowerPoint_97-2003_Presentation1.ppt	JAN-0018-0015976
10/13/2009 0:00	Microsoft_Office_PowerPoint_97-2003_Presentation1.ppt	JAN-0018-0016007

10/13/2009 0:00	Microsoft_Office_PowerPoint_97-2003_Presentation1.ppt	JAN-0018-0016110
10/13/2009 0:00	Microsoft_Office_PowerPoint_97-2003_Presentation1.ppt	JAN-0018-0016821
10/13/2009 0:00	Microsoft_Office_PowerPoint_97-2003_Presentation1.ppt	JAN-0018-0016852
2009	Pain Disease States	
2009	Tapentadol Unbranded Acute Pain Message Platform	
1/12/2010 0:00	02TL08106x NEO Pathways 11.19.08 - Slide Deck.ppt	JAN-MS-00327153
1/11/2010 0:00	PADT_Guide.pdf	JAN-MS-02493626
12/9/2010 0:00	PADT Guidebook 6-19-03.pdf	JAN-MS-00804406
1/12/2010 0:00	02TL08106x NEO Pathways 11.19.08 - Slide Deck.ppt	JAN-MS-00327153
1/19/2010 0:00	Nucynta%20Cycle%201%202010%20Visual%20Aid.pdf	JAN-0017-0008562
2010	Patients in Pain: How U.S. Drug Enforcement Administration Rules Harm Patients In Nursing Facilities	
8/12/2011 0:00	FW: Quick, easy review of 2 chronic pain disease awareness tweets	JAN-MS-02821046
8/10/2011 0:00	Quick, easy review of 2 chronic pain disease awareness tweets	JAN-MS-02821062
8/10/2011 0:00	RE: Quick, easy review of 2 chronic pain disease awareness tweets	JAN-MS-02822244
8/10/2011 0:00	RE: Quick, easy review of 2 chronic pain disease awareness tweets	JAN-MS-05400890
2011	Burden of Chronic Pain	
2011	Burden of Pain: Challenges and Opportunities for Older Americans in Long Term Care	Janssen
2011	CV Institutional January 2011	Janssen
2012	Cycle 1 Meeting (Nucynta and Nucynta ER)	Janssen
2013	Pain Mechanisms	Janssen
		JAN-0016-0000002
12/6/2013 0:00	OMJUSTDPDTTAP00050_SCRIPT.doc	JAN-MS-00097542
3/21/2013 0:00	ProgressNotesFolder v13.pdf	JAN-MS-00993592
6/7/2017 0:00	ProgressNotesFolder v8.pdf	JAN-MS-00598211
2002	ASPMN Position Statement - Pain Management in Patients with Addictive Disease	MNK-T1_0001749629
7/28/2010 0:00	Module 1-Overview of Pain 7[1].23.10 jtp edits	MNK-T1_0001053304
2/17/2012 0:00	Module 5 outline_02_16_12kq.doc	MNK-T1_0001738153
5/30/2012 0:00	Document: re: Module 5 Decision-Making Factors in Pain Management	MNK-T1_0001498780
5/30/2012 0:00	Document: re: Module 5 Decision Making Factors in Pain Management	MNK-T1_0001498862
2013	Optimizing the Treatment of Pain in Patients with Acute Presentations	MNK-T1_0000906588
9/25/2013 0:00	Document: The Current Opioid Landscape presentation	MNK-T1_0000100917
10/18/2013 0:00	Xartemis XR Ad Board Value Deck revised 10-16-13.pptx	MNK-T1_0000222112
10/23/2013 0:00	13_MAL_0191_Market_Readiness_Microsite_v8.pdf - DECK Presenation	MNK-T1_0000257323
10/28/2013 0:00	Document re: Awareness Website Phase 1	MNK-T1_0000528284
11/15/2013 0:00	Presentation re: Introduction to Acute Pain	MNK-T1_0000528954
	The Current Opioid Landscape	MNK-T1_0000219240
3/10/2014 0:00	Presentation re: Xartemis XR - A New Option for the Treatment of Acute Pain	MNK-T1_0000214872
3/18/2014 0:00	XARTEMIS XR Value Deck FINAL 031913.pptx	MNK-T1_0000102298
4/24/2014 0:00	Presentation re: Marketing for pain speaks louder than words XXR	MNK-T1_0000160785
4/25/2014 0:00	Spreadsheet re: Marketing for pain speaks louder than words XXR	MNK-T1_0000160901
4/29/2014 0:00	Presentation re: Pain speaks louder than words, opioids require frequent dosing	MNK-T1_0000161015
5/1/2014 0:00	PAIN SPEAKS LOUDER THAN WORDS	MNK-T1_0000161087
5/7/2014 0:00	PAIN SPEAKS LOUDER THAN WORDS	MNK-T1_0000161159
5/8/2014 0:00	Presentation: Pain Speaks Louder Than Words	MNK-T1_0000159714
5/9/2014 0:00	A New Alternative for Treating Acute Pain: XARTEMIS XR	MNK-T1_0000087891
5/19/2014 0:00	XARTEMIS XR Value Deck version 2 CK 51514_FINAL.pptx	MNK-T1_0000102383
6/17/2014 0:00	PAIN SPEAKS LOUDER THAN WORDS	MNK-T1_0000159738
6/17/2014 0:00	PAIN SPEAKS LOUDER THAN WORDS 4533_LiveSlides_061714db.pptx	MNK-T1_0000159391

6/18/2014 0:00	XXR Live Content Participant Guide FINAL 061814.pdf	MNK-T1_0000102881
6/18/2014 0:00	XXR Live Content Slide Kit FINAL 061814.pdf	MNK-T1_0000102948
6/18/2014 0:00	XXR Live Content Speaker Guide FINAL 061814.pdf	MNK-T1_0000102994
6/18/2014 0:00	PAIN SPEAKS LOUDER THAN WORDS 4533_LiveSlides_061814db.pdf	MNK-T1_0000159456
6/18/2014 0:00	PAIN SPEAKS LOUDER THAN WORDS 4533_LiveSlides_061814db.pptx	MNK-T1_0000159502
6/18/2014 0:00	PAIN SPEAKS LOUDER THAN WORDS	MNK-T1_0000159770
6/25/2014 0:00	PAIN SPEAKS LOUDER THAN WORDS 4533_LiveSlides_062514db.pdf	MNK-T1_0000159601
6/25/2014 0:00	PAIN SPEAKS LOUDER THAN WORDS 4533_LiveSlides_062514db.pptx	MNK-T1_0000159648
6/25/2014 0:00	PAIN SPEAKS LOUDER THAN WORDS	MNK-T1_0000159802
6/30/2014 0:00	Part Guide FINAL 070214.pdf	MNK-T1_0000103097
10/3/2014 0:00	A New Alternative for Treating Acute Pain: XARTEMIS XR	MNK-T1_0000087897
10/23/2014 0:00	Module 1 10-22-14.pdf	MNK-T1_0000619311
10/23/2014 0:00	Module 1 10-22-14.pdf	MNK-T1_0000634659
10/23/2014 0:00	Module 1 10-22-14.pdf	MNK-T1_0000619311
10/23/2014 0:00	Module 1 10-22-14.pdf	MNK-T1_0000634659
2/26/2015 0:00	Xartemis Pain Speaks Slide Kit FINAL 030415.pdf	MNK-T1_0000105456
3/11/2015 0:00	XXR Pain Speaks Speaker Guide FINAL 031315.pdf	MNK-T1_0000105594
1/20/2016 0:00	CMS Meeting Background Document_FINAL DRAFT 1.20.16.pdf	MNK-T1_0008426894
2017	The Joint Commissions's Pain Standards: Origins and Evolution	MNK-T1_0001141812
1996	Feb. 21, 1996 Volume 14 MS Contin Specialist Tip	PKY180242433
1998	JCAHO Standards	PKY181199494
	letter of agreement with hospital. Purdue lent support to the PR rollout of the JCAHO guidelines	PKY180466707 PDD1701819640
1999	JCAHO Standards changes	PKY181199494
		PKY181710167
1999	Preparing for JCAHO Implications for the Case Manager: Prepared for The Journal of Care Management, 9.5.1999	PDD8801316960
1999	8/11/99 email from Tim Richards re: NY Times article on powerful painkillers	PPLPC012000005648
2000	District Manager Action Sheet. JCAHO Strategy [Various Regions]	PKY181101825
2000	CME "JCAHO Guidelines"	PPLPC014000004245
1999	JCAHO Strategy	PKY181102404
2001	JCAHO Standards	Purdue see PKY181137481
2000	"OxyContin Tablets 1st Quarter 2000" PPT	PKY181135066
1999	Compilation of JCAHO and LTC materials	PKY181137693
	JCAHO "Purdue's 'Partner's Against Pain' Strategy"	PKY181199494
	"JCAHO & Pain Treatment - The New Standards"	PKY181202900
		PKY181246683
2001	JCAHO Standards	PKY181137481 PDD1502321166
2001	PPLP Action Plan 2nd Quarter 2001	PKY181254335
2002	"The JCAHO Pain Standards - Materials to Help You Comply" -	PKY181261657
2007		PKY183149984
2003	June 2003 Lit Code	PKY183149984
2003	2000 October LITERATURE LIST	PKY183150801
2000		PKY180128007
	JCAHO Standards for Pain Management in LTC	PKY181137481
6/23/2003 0:00	DID0015205.pdf	PURCHI-000719476
7/28/2016 0:00	Living Our Vision-Purdue Sales Presentation	PPLP003996524
6/19/2009 0:00	"Complexities in Caring for People in Pain" 6-17-09.ppt 40 pp. by Purdue A lecture guide with accompanying slides. 2009	PPLP004058742
2/24/2003 0:00	RE:	PKY183145799
2/24/2003 0:00	Email from Natalie Principe to Paula Mollica re: price list of Senokot and other items and drugs.	PKY183145853
2/24/2003 0:00	RE:	PKY183145907
2/24/2003 0:00	2003 February Literature List	PKY183150747

2/24/2003 0:00	RE:	PKY183150822
2/21/2003 0:00		PKY183153946
1/22/2006 0:00		PKY183243565
3/19/2009 0:00	ama_painmgmt_m2.pdf	PPLPC004000194810
		E513_00019679
2/14/2003 0:00	Email: RE: ALERT! Promotional Materials Status Update - Wave 3	PPLPC009000083231
2/21/2003 0:00	RE: ALERT! Promotional Materials Status Update - Wave 4	PPLPC009000083508
2/21/2003 0:00	February review list of Oxycontin and PAP materials.xls	PPLPC009000083516
2/21/2003 0:00	RE: ALERT! Promotional Materials Status Update - Wave 4 (Updated w/ML slide kits)	PPLPC009000083517
2/22/2003 0:00	FW: ALERT! Promotional Materials Status Update - Wave 4	PPLPC009000083597
3/10/2003 0:00	RE: ALERT! Promotional Materials Status Update - Wave 5	PPLPC009000084547
3/10/2003 0:00	February review list of Oxycontin and PAP materials.xls	PPLPC009000084554
5/23/2003 0:00	Pain Management Monographs Available	PPLPC009000089663
5/26/2003 0:00	FW: Pain Management Monographs Available	PPLPC009000089682
6/3/2003 0:00	RE: Pain Management Monographs Available	PPLPC009000090285
6/3/2003 0:00	FW: Pain Management Monographs Available	PPLPC009000090287
6/3/2003 0:00	RE: Pain Management Monographs Available	PPLPC009000090295
6/3/2003 0:00	RE: Pain Management Monographs Available	PPLPC009000090298
6/4/2003 0:00	RE: Pain Management Monographs Available	PPLPC009000090547
6/5/2003 0:00	RE: Pain Management Monographs Available	PPLPC009000090588
6/5/2003 0:00	RE: Pain Management Monographs Available	PPLPC009000090593
10/26/2010 0:00	Understanding low back pain.pdf	PPLPC010000045451
3/14/2016 0:00	American Society for Pain (Mgmt of acute pain and chronic noncancer pain).pdf	PPLPC011000085617
8/31/2010 0:00	Purdue Site Visit Questionnaire.doc	PPLPC019000418066
8/31/2010 0:00	Purdue Site Visit Questionnaire.doc	PPLPC019000418095
9/1/2010 0:00	Purdue Site Visit Questionnaire (2).doc	PPLPC019000418627
6/26/2012 0:00	Manufacturer Site Visit Questionnaire.doc	PPLPC019000689831
3/12/2010 0:00	48419_The Total Cost of Pain 2009 (final approved for ML handouts).pdf	PPLP003330613
4/27/2011 0:00	57809_Total Cost of Pain (Handout Format - rev TN 4-19-11).pdf	PPLP003331002
3/11/2013 0:00	Complexities of Caring for People in Pain_Handout_ 2-21-13 rev 3-11-13.pdf	PPLP003337113
8/15/2013 0:00	Complexities-People in Pain 3-11-13 (PPT as PDF).pdf	PPLP003338104
2/1/2012 0:00	104110_Care of the Person with Chronic Pain_Implication for Case Managers (fnl appr 4-8-11_rev 5-27-11_full eCampus disclaimer file).pdf	PPLP003442536
8/17/2000 0:00	Transmittal of Advertisements and Promotional Labelling for Drugs and Biologics for Human Use - 9/8/2000	PURCHI-000666401
2/9/2016 0:00	MR-00301 - Introduction to Pain Management Module-Storyboard.pdf 78pp	PPLP003493186
8/3/2012 0:00	RE: Touching base ...	PPLP004158478
2/24/2003 0:00	RE:	PKY183145799
2/24/2003 0:00	Email from Natalie Principe to Paula Mollica re: price list of Senokot and other items and drugs.	PKY183145853
2/24/2003 0:00	RE:	PKY183145907
8/28/2001 0:00	RE: Literature order for Abbott Labs - Robert Grimm	PKY183146186
2/21/2003 0:00	RE: ALERT! Promotional Materials Status Update - Wave 4	PKY183146264
2/24/2003 0:00	2003 February Literature List	PKY183150747
2/24/2003 0:00	RE:	PKY183150822
2/24/2003 0:00	RE: ALERT! Promotional Materials Status Update - Wave 4	PKY183150865
2/21/2003 0:00	FW: ALERT! Promotional Materials Status Update - Wave 4	PKY183153940
2/21/2003 0:00		PKY183153946
3/7/2001 0:00		PKY180140719
		PKY180145063
5/18/2001 0:00		PKY180412502
7/5/2001 0:00		PKY180413520
7/5/2001 0:00		PKY180413530

2/13/2001 0:00		PKY180462391
8/31/2000 0:00		PKY180462393
11/2/2000 0:00		PKY180462398
5/22/2001 0:00	Purdue Lecture Program Group	PKY180508683
4/20/2001 0:00	Purdue speaker document receipt	PKY180520605
3/28/2001 0:00		PKY180520610
5/25/1999 0:00		PKY180527265
	None	PKY181147253
	None	PKY181208292
	Pain Management for Post-Operative Pain	PKY181211296
12/31/2001 0:00	Pain Management in Special Populations: Disease Related	PKY181330519
9/22/2000 0:00		PKY181395184
2/11/2001 0:00		PKY181968412
2/11/2001 0:00	Your Story About Dr. Lilly's Illegal Activities	PKY181968432
	List of Mississippi based Speaker Bureau Events	PKY181775599
		PDD1502331824
		PDD8801100327
		PDD8801146906
		PDD8801147185
		PDD8801147227
		PDD8801147923
		PDD8801148175
2/12/2001 0:00	Email RE: your story about Dr. Lilly's illegal activities	PDD8801149747
	Table of medications and marketing materials	E450_00005036
		E513_00028120
2/14/2003 0:00	Email: RE: ALERT! Promotional Materials Status Update - Wave 3	PPLPC009000083231
2/21/2003 0:00	RE: ALERT! Promotional Materials Status Update - Wave 4	PPLPC009000083508
2/21/2003 0:00	February review list of Oxycontin and PAP materials.xls	PPLPC009000083516
2/21/2003 0:00	RE: ALERT! Promotional Materials Status Update - Wave 4 (Updated w/ML slide kits)	PPLPC009000083517
2/22/2003 0:00	FW: ALERT! Promotional Materials Status Update - Wave 4	PPLPC009000083597
3/10/2003 0:00	RE: ALERT! Promotional Materials Status Update - Wave 5	PPLPC009000084547
3/10/2003 0:00	February review list of Oxycontin and PAP materials.xls	PPLPC009000084554
11/1/2001 0:00	JCAHO Pain Standards	PPLPC014000021506
11/20/2009 0:00	The Total Cost of Pain 2009 10-13-09 post yellow LAL.ppt	PPLPC017000182713
3/14/2008 0:00	TotalCostofPain_2008 revision_3.08.ppt	PPLPC019000203276
9/5/2008 0:00	TotalCostofPain_2008 revision (final orange appr).pdf	PPLPC019000232397
7/5/2017 0:00	2001-Joint Commission Pain Standards-from-DW Baker JAMA 2017-03-21-Suppl Mat.pdf	PPLPC019001392359
4/9/2001 0:00	Ethics, Law and Regulations.ppt	PPLPC022000008235
8/28/2000 0:00	2000 Institutes summary.doc	PPLPC024000024422
7/15/2001 0:00	Finding the JCAHO standards.	PPLPC029000046903
2/11/2001 0:00	RE: your story about Dr. Lilly's illegal activities	PPLPC034000103156
6/11/2002 0:00	MES all programs 1-99 thru 6-10-02 with \$.xls	PPLPC036000011512
2/9/2005 0:00	PA Programs.2.9.05.xls	PPLPC036000046278
5/25/2012 0:00	OutReach 1997 - 2007.xlsx	PPLPC036000181507
2/11/2001 0:00	FW: your story about Dr. Lilly's illegal activities	PPLPC045000004086
10/15/2001 0:00		TEVA_MDL_A_04777619
7/8/2002 0:00		TEVA_MDL_A_02701199
8/23/2002 0:00		TEVA_MDL_A_02701198
9/12/2002 0:00		TEVA_MDL_A_02701195
9/12/2002 0:00		TEVA_MDL_A_02701196
11/26/2002 0:00		TEVA_MDL_A_04761636
12/19/2002 0:00		TEVA_MDL_A_04777383
2/13/2003 0:00		TEVA_MDL_A_02697801
10/8/2003 0:00		TEVA_MDL_A_04778649
10/9/2003 0:00		TEVA_MDL_A_02698200
10/9/2003 0:00		TEVA_MDL_A_02698287
10/9/2003 0:00		TEVA_MDL_A_02698950
10/10/2003 0:00		TEVA_MDL_A_02698340
10/31/2003 0:00		TEVA_MDL_A_02698473
11/4/2003 0:00		TEVA_MDL_A_02698238
11/4/2003 0:00		TEVA_MDL_A_02698493



11/4/2003 0:00	ACTIQ MOD 1 new	TEVA_MDL_A_04778738
2004	Chronic Pain Overcoming Treatment Barriers for Effective Outcomes (October 29, 2004)	TEVA_MDL_A_01167447
2004	Guidelines for the Assessment and Management of Chronic Pain Course ID: AB0305	TEVA_MDL_A_02685653
2004	Emerging Solutions in Pain (ESP) Initiative	TEVA_MDL_A_02686568
3/24/2004 0:00	PADT_Cover.pdf	TEVA_MDL_A_02866689
4/15/2004 0:00	ACTIQ Module 1 - Introduction to Pain	TEVA_MDL_A_04779176
4/21/2004 0:00	Teva-ORM_Book_Phys_V7.pdf	TEVA_MDL_A_03432638
2/6/2007 0:00	BOD-Slides-MichaelR-02-05-07.ppt	TEVA_MDL_A_02385655
2008	Pain Management: Understanding Opioids and Managing Their Risks, Overview of Responsible Prescribing	TEVA_MDL_A_0218717
2008	Form FDA 2253 Transmittal of Advertisements and Promotional Labeling for Drugs and Biologics for Human Use (Fentora)	TEVA_MDL_A_00027290
3/26/2008 0:00	AAD Core FINAL2.ppt	TEVA_MDL_A_02488945
3/31/2008 0:00	AAD Core FINAL2 PDRC.ppt	TEVA_MDL_A_02489062
4/1/2008 0:00	AAD Core FINAL2 PDRC pc.ppt	TEVA_MDL_A_02488268
7/7/2008 0:00	ACTIQ Mod 1 pdf.pdf	TEVA_MDL_A_00910441
8/17/2009 0:00	PAIN-2009P-ST-00833_PPLS_Mod1_Intro to Pain_AUG2009.pdf	TEVA_CHI_00007323
8/17/2009 0:00	FENTORA Mod1 Intro to Pain_v1.0.pdf	TEVA_CHI_00012666
8/20/2009 0:00	PAIN-2009P-ST-00867_PPLS_Mod2v2_Cancer Pain_AUG2009.pdf	TEVA_CHI_00014434
8/24/2009 0:00	PAIN-2009P-ST-00833_PPLS_Mod1_Intro to Pain_AUG2009.pdf	TEVA_MDL_A_00739055
11/24/2009 0:00	PAIN-2009P-ST-00833_PPLS_Mod1_IntrotoPain_11.03.09.pdf	TEVA_CHI_00010498
1/14/2010 0:00	CEP-TPP-DATA-0007.mdb	TEVA_MDL_A_05015635
8/24/2010 0:00	FENTORA - PPLS Module 1 Intro to Pain - FEN-2149_1.0.pdf	TEVA_MDL_A_00348445
10/14/2010 0:00	Sales Training and Development FENTORA - Pain Products Learning System Module 1 Intro to Pain	TEVA_MDL_A_00348577
10/14/2010 0:00	FENTORA Pain Products Learning System PPLS Module 1 Intro to Pain	TEVA_MDL_A_00350326
12/1/2011 0:00	FEN-2301_Pain Physiology Assessment Management Module_NOV 2011_FINAL.pdf	TEVA_MDL_A_01094966
2/15/2012 0:00	Actavis MoxDuo IR M1 DP 2.13.12.doc	Acquired_Actavis_01189169
2/20/2012 0:00	Actavis MoxDuo IR M1 DP 2.20.12.doc	Acquired_Actavis_02239393
2/21/2012 0:00	Actavis MoxDuo IR M1 DP 2 20 12.doc	Acquired_Actavis_02239408
5/17/2012 0:00		Acquired_Actavis_00443874
5/22/2012 0:00	Actavis MoxDuo M2 Managing Acute Pain D4 4.20.12_RTHv1.docx	Acquired_Actavis_00450018
6/18/2012 0:00	module 1 with comments.pdf	Acquired_Actavis_00001518
6/18/2012 0:00	module 1 with comments.pdf	Acquired_Actavis_01145732
6/18/2012 0:00	Actavis MoxDuo M1 D4 6 12 12_part1-2 ITS_20120617.JAB.doc	Acquired_Actavis_01145892
7/24/2012 0:00	FOR REVIEW MOXDuo Sales Learning Module 1_MOX-IR-002_D5 6 25 12_clean.doc	Acquired_Actavis_01501163
7/24/2012 0:00	Actavis MoxDuo M2 Managing Acute Pain D7 6.22.12 CLEAN.docx	Acquired_Actavis_02116973
8/27/2012 0:00	FEN-2301_PPLS Pain Physiology Assessment and Management Module_NOV 2011_FINAL.pdf	TEVA_MDL_A_01092418
12/12/2012 0:00	FEN-2511 Marketplace.pdf	TEVA_MDL_A_00756665
9/19/2017 0:00	6.0.pdf	TEVA_MDL_A_00545463
7/20/2018 0:00	Actiq calls with notes prior to 2006.csv	TEVA_MDL_A_02416207
	FENTORA - PPLS Module 1 Intro to Pain - FEN-2149_1.6.pdf	TEVA_MDL_A_00348511
		TEVA_MDL_A_00851578
		TEVA_MDL_A_02694858
		TEVA_MDL_A_02699423
		TEVA_MDL_A_02701162
		TEVA_MDL_A_02701171
		TEVA_MDL_A_02702367
		TEVA_MDL_A_02702683
		TEVA_MDL_A_02703207

		TEVA_MDL_A_02703208
	Module 2 Cancer Pain	TEVA_MDL_A_04558134
	Module 1 Introduction To Pain	TEVA_MDL_A_04558408
	Module 1 Introduction To Pain	TEVA_MDL_A_04558884
	ACTIQ (Oral Transmucosal Fentanyl Citrate) Breakthrough Cancer Pain Learning System; Module 1 Introduction In Pain	TEVA_MDL_A_04559736
	ACTIQ (Oral Transmucosal Fentanyl Citrate) Breakthrough Cancer Pain Learning System; Module 1 Introduction In Pain	TEVA_MDL_A_04559816
	ACTIQ (Oral Transmucosal Fentanyl Citrate) Breakthrough Cancer Pain Learning System; Module 1 Introduction In Pain	TEVA_MDL_A_04559898
	ACTIQ (Oral Transmucosal Fentanyl Citrate) Breakthrough Cancer Pain Learning System; Module 1 Introduction In Pain	TEVA_MDL_A_04559990
	ACTIQ Module 1 - Introduction to Pain	TEVA_MDL_A_04779255
		TEVA_MDL_A_05314196
		TEVA_MDL_A_05317004
		TEVA_MDL_A_05361114
		TEVA_MDL_A_05367766
		TEVA_MDL_A_05368488
		TEVA_MDL_A_05368651
		TEVA_MDL_A_05368923
		TEVA_MDL_A_05369349
		TEVA_MDL_A_05369763
		TEVA_MDL_A_05369841
		TEVA_MDL_A_05383171
		TEVA_MDL_A_05392996
		TEVA_MDL_A_05395228
		TEVA_MDL_A_05395308
		TEVA_MDL_A_05395534
		TEVA_MDL_A_05395614
		TEVA_MDL_A_05395694
		TEVA_MDL_A_05395774
		TEVA_MDL_A_05396357
		TEVA_MDL_A_05396765
		TEVA_MDL_A_05396805
		TEVA_MDL_A_05405186
		TEVA_MDL_A_05748349
		TEVA_MDL_A_05750814
		TEVA_MDL_A_05750916
		TEVA_MDL_A_05751060
		TEVA_MDL_A_05751660
		TEVA_MDL_A_05751738
		TEVA_MDL_A_05752387
		TEVA_MDL_A_05753592
		TEVA_MDL_A_05754689
		TEVA_MDL_A_05758465
		TEVA_MDL_A_05862996
		TEVA_MDL_A_05938527
		TEVA_MDL_A_05938607
		TEVA_MDL_A_05938837
		TEVA_MDL_A_05938917
		TEVA_MDL_A_05939923
		TEVA_MDL_A_05942876
		TEVA_MDL_A_06070873
Scott Fishman, Responsible Opioid Prescribing: A Clinician's Guide (2007)("Fishman/FSMB-Responsible Opioid Prescribing")		
	Risk Evaluation and Mitigation Strategies for Prescription Opioids: Essential Components of Responsible Prescribing	INSYS-MDL-000356207
2010	Larry Dillaha, Analgesic Solutions, email to Mike Babich, on 5/19/2010, regarding "REMS" - Risk Evaluation and Mitigation Strategy.	INSYS-MDL-000385380
2012	Journal of Opioid Management - Special Issue	INSYS-MDL-000423366

2012	Speaker training between Insys and Dr. Gudin, among others.	INSYS-MDL-000431146
	Subsys Core Slim Jim - Promotional Material	INSYS-MDL-000023160
2013	PowerPoint - Advancements in the Treatment of Breakthrough Pain in Cancer Patients	INSYS-MDL-000105773
2006	Challenges in Chronic Pain Management: An Update on Long-Acting Opioids	Janssen
2007	AAPM Day Three and Four Summary (Sept. 29-30)	Janssen
2013	Addressing the Barriers to Effective Pain Management and Issues of Opioid Misuse and Abuse	Janssen
2007	Responsible Opioid Prescribing - A Physician's Guide	MNK-T1_0001072077
2010	References Cost.xlsx	MNK-T1_0001490557
2010	CARES Alliance - Opioid Clinical Management Education Module - June 2010	MNK-T1_0001492929
2010	EXALGO REMS & CARES Alliance - Train-the-Trainer - CARES Alliance Education Module - Steven Passik, PhD	MNK-T1_0001279950
2010	Covidien Train-the-Trainer - EXALGO REMS & C.A.R.E.S. Alliance - BIBLIOGRAPHY	MNK-T1_0001125603
2010	Synchrony Medical - Module 6: Opioid Treatment Landscape	MNK-T1_0001347664
2010	C.A.R.E.S Alliance Overview	MNK-T1_0001490730
2011	Outline - Cares Alliance: How to Talk to Your Doctor Brochure	MNK-T1_0001492410
2012	FSMB initiatives to raise awareness about opioid prescribing	MNK-T1_0001141063
	EXALGO Training 172	MNK-T1_0001296179
	EXALGO - Medical Science Liaison Advanced Training Series - Module 6: Opioid Treatment Landscape	MNK-T1_0002034471
2007	FSMB Fishman sponsor Responsible Opioid Prescribing Grant Details	PPLP003477086
2008	OME307-A8052-TC MTM Tip Card (final).pdf	PPLP004059427
2009	monograph_dec_14_final_spreads.pdf	PPLP004112985
2016	MR-01570 NP Educational Workshop Module 1 Comprehensive Asse.pdf	PPLP003499450
2016	MR-01596 - NP Educational Workshop Content - Module 2.pdf	PPLP003499540
	Responsible Opioid Prescribing A Physician's Guide by Scott M. Fishman, M.D. and FSMB (Uncorrected Page Proofs)	TEVA_MDL_A_00826865
2007	Federation of State Medical Boards Research - Unrestricted Educational Grant Agreement	TEVA_MDL_A_01088845
2007	Fentora sNDA RiskMap Tools Review Meeting Pain Care Franchise Marketing.	TEVA_MDL_A_00376199
Managing Persistent Pain in Older Persons- American Geriatric Society ("AGS 1998")		
	Column2	Column3
5/7/2009 0:00	Managing Chronic Pain and the Importance of Customizing Opioid Treatment [Kadian_Slides_for_Speaker_Training_with_MLRcmts_2_22.ppt]	ALLERGAN_MDL_00449946
2/1/2010 0:00	actkad11405 Kadian Speaker Training Materials_011810.ppt	ALLERGAN_MDL_01145475
2/1/2010 0:00	actkad11405 Kadian Speaker Training Materials_Annotated_011810.pptx	ALLERGAN_MDL_01145537
10/27/2009 0:00	Kadian_Slides_for_Speaker_Training_with_MLRcmts_2_22.ppt	ALLERGAN_MDL_01741588
1/28/2010 0:00	actkad11405 Kadian Speaker Training Materials_011810.ppt	ALLERGAN_MDL_01743051
5/8/2009 0:00	Kadian_Slides_for_Speaker_Training_with_MLRcmts_2_22.ppt	ALLERGAN_MDL_01750153
1/14/2010 0:00	Kadian_Slides_for_Speaker_Training_with_MLRcmts_2_22.ppt	ALLERGAN_MDL_01890445
	actkad11405 Kadian Speaker Training Materials_011810.ppt	ALLERGAN_MDL_01898508
10/27/2009 0:00	Kadian_Slides_for_Speaker_Training_with_MLRcmts_2_22.ppt	Acquired_Actavis_00943445
4/29/2013 0:00	Enclosure Inventory_Cornerstone_20130429.doc	END00513431
4/16/2013 0:00	Enclosure Inventory AUG2012_ODT.doc	END00513442
8/1/2013 0:00	Enclosure Inventory(Streamline)_20130731.doc	END00513453

4/16/2013 0:00	Enclosure Inventory AUG2012.doc	END00547083
7/31/2013 0:00	Enclosure Inventory(Streamline) APR192013.doc	END00548532
8/29/2006 0:00	P&T Digest - Pain Management.pdf	ENDO-OPIOID_MDL-04797507
12/1/1998 0:00	AGS meeting 11/20 and today's statement	JAN-MS-00270846
3/27/2007 0:00	Chronic Pain Slides.ppt	JAN-MS-00302786
3/28/2002 0:00	potential for misuse.doc	JAN-MS-00307417
6/3/2002 0:00	Module 3. Therapeutic Modalities.ppt	JAN-MS-00312368
9/25/2002 0:00	Achieving Balance in Chronic Pain management	JAN-MS-00312783
8/29/2002 0:00	CACME_sh_8-28-02.ppt	JAN-MS-00312803
12/18/2002 0:00	CE presentation LAOs and TDF-final.ppt	JAN-MS-00313196
7/14/2008 0:00	NPC & JCAHO 2001.pdf	JAN-MS-00326044
6/14/2004 0:00	Pain in the Elderly: -http://www.painedu.org/populations-archive.asp?ArticleNumber=2&UserID=0	JAN-MS-00431492
3/2/2012 0:00	Moskovitz BL et al P3 Manuscript JOM Aug 2011.pdf	JAN-MS-00451307
2/9/2011 0:00	Document re: Cares Alliance Pain Management Guide for Older Adults Outline	MNK-T1_0001492855
3/6/2012 0:00	EXALGO A Logical Approach to Long-Acting Opioid Selection	MNK-T1_0002880991
6/11/2012 0:00	127312_Is it Pain_BC BS LA.pdf	PPLP003444089
4/5/2013 0:00	188127_FACETS_Cognitive Impairment_2-2013 rev.pdf	PPLP003449987
1/11/2016 0:00	MR-00458 FACETS - Is it Pain.pdf	PPLP003494961
1/20/2016 0:00	Is it Pain? - An educational offering from Purdue Pharma Presentation	PPLP003572026
8/4/2010 0:00	Disparities_in_Pain_Care_2010_update_(final_approved_for_eCampus).pdf	PPLP003577505
4/7/2016 0:00	Reactive responses to CDC recommendations	PPLP003905698
4/7/2016 0:00	Reactive responses to CDC recommendations_MS and MSL use.3.29.16.v2.final.docx	PPLP003907428
12/20/2001 0:00	Interim Report OxyContin C-II (Oxycodone HCl, Controlled Release) Tablets and The Public Health	E15_00038112
12/20/2001 0:00	Interim Report OxyContin C-II (Oxycodone HCl, Controlled Release) Tablets and The Public Health	E15_00038114
12/31/2001 0:00	Interim Report	E18_00009192
3/29/2016 0:00	recommended Reactive responses to the 12 CDC recommendations re opioid dispensing_3.29.16 lls.v2comments addressed_redline.docx	PPLP003907443
3/11/2003 0:00	Pain Control - Clinical Management Issues	PPLPC023000023880
		ABT-MDL-KY-0001597
3/12/2001 0:00		ABT-MDL-KY-0019811
		ABT-MDL-KY-0026458
		ABT-MDL-KY-0039666
		ABT-MDL-KY-0041176
		ABT-MDL-KY-0041265
		ABT-MDL-KY-0047835
3/29/2016 0:00	recommended Reactive responses to the 12 CDC recommendations re opioid dispensing_3.29.16 lls.v2comments addressed_redline.docx	PPLP003907443
3/11/2003 0:00	Pain Control - Clinical Management Issues	PPLPC023000023880
3/13/2007 0:00	Module 2 Final Feb2007.pdf	TEVA_CHI_00036931
	Slide 1	TEVA_MDL_A_04811967
	Slide 1	TEVA_MDL_A_04867962
	Slide 1	TEVA_MDL_A_04869976
	Slide 1	TEVA_MDL_A_04870167
	Slide 1	TEVA_MDL_A_04872002
	Slide 1	TEVA_MDL_A_04873832
	Slide 1	TEVA_MDL_A_04873929
	Slide 1	TEVA_MDL_A_04875764
	Slide 1	TEVA_MDL_A_04877900
	Slide 1	TEVA_MDL_A_04879729
	Slide 1	TEVA_MDL_A_04881999
	Slide 1	TEVA_MDL_A_04884000
	Slide 1	TEVA_MDL_A_04893594
	Slide 1	TEVA_MDL_A_04914460
	Slide 1	TEVA_MDL_A_04949774
	Slide 1	TEVA_MDL_A_04951597
	Slide 1	TEVA_MDL_A_04953444
	Slide 1	TEVA_MDL_A_04953532

	Slide 1	TEVA_MDL_A_04955355
	Slide 1	TEVA_MDL_A_04957178
	Slide 1	TEVA_MDL_A_04959001
	Slide 1	TEVA_MDL_A_04959089
	Slide 1	TEVA_MDL_A_04960912
	Slide 1	TEVA_MDL_A_04963447
	Slide 1	TEVA_MDL_A_04984517
	Slide 1	TEVA_MDL_A_05043634
	Slide 1	TEVA_MDL_A_05043730
	Slide 1	TEVA_MDL_A_05114543
		TEVA_MDL_A_05862996
		TEVA_MDL_A_05942876
10/27/2009 0:00	Kadian_Slides_for_Speaker_ Training_with_MLRCmts_2_22.ppt	Acquired_Actavis_00943445
<div> <div>Management of Persistent Pain in Older Persons- American Geriatric Society ("AGS 2002")</div> <div>Column2</div> <div>Column3</div> </div>		
5/7/2009 0:00	Managing Chronic Pain and the Importance of Customizing Opioid Treatment [Kadian_Slides_for_Speaker_ Training_with_MLRCmts_2_22.ppt]	ALLERGAN_MDL_00449946
4/30/2007 0:00	200 mg capsule pamphlet	ALLERGAN_MDL_00814539
7/31/2009 0:00	Opioid Metabolism	ALLERGAN_MDL_01125048
2/1/2010 0:00	actkad11405 Kadian Speaker Training Materials_011810.ppt	ALLERGAN_MDL_01145475
2/1/2010 0:00	actkad11405 Kadian Speaker Training Materials_Annotated_011810.pptx	ALLERGAN_MDL_01145537
10/27/2009 0:00	Kadian_Slides_for_Speaker_ Training_with_MLRCmts_2_22.ppt	ALLERGAN_MDL_01741588
1/28/2010 0:00	actkad11405 Kadian Speaker Training Materials_011810.ppt	ALLERGAN_MDL_01743051
5/8/2009 0:00	Kadian_Slides_for_Speaker_ Training_with_MLRCmts_2_22.ppt	ALLERGAN_MDL_01750153
1/14/2010 0:00	Kadian_Slides_for_Speaker_ Training_with_MLRCmts_2_22.ppt	ALLERGAN_MDL_01890445
	actkad11405 Kadian Speaker Training Materials_011810.ppt	ALLERGAN_MDL_01898508
	LD-00056 LIDODERM Case 1 0817-10.ppt	ENDO-CHI_LIT-00013258
2/20/2014 0:00	FINAL SLIDES Multicultural Advisory Board Meeting (4-10- 10).pptx	ENDO-CHI_LIT-00151506
2/28/2014 0:00	FINAL SLIDES Multicultural Advisory Board Meeting (4-10- 10).pptx	ENDO-CHI_LIT-00450040
1/16/2014 0:00	LD-00056 LIDODERM Case 1 0817-10.ppt	ENDO-CHI_LIT-00530636
11/9/2010 0:00	Podcast 2 - 67 YO-JD.ppt	ENDO-OPIOID_MDL-02042766
8/20/2010 0:00	LD-00056 LIDODERM Case 1 082010.ppt	ENDO-OPIOID_MDL-02272997
8/26/2010 0:00	LIDODERM Case 1 Slide Sorter.ppt	ENDO-OPIOID_MDL-02272998
8/26/2010 0:00	Lidoderm Case 3 Slide Sorter.ppt	ENDO-OPIOID_MDL-02272999
12/17/2015 0:00	More information on Dose and Duration	ENDO-OPIOID_MDL-02798957
12/17/2015 0:00	EXTERNAL: Proposed Edits to H.R. 2805, the "Heroin and Prescription Opioid Abuse Prevention, Education, and Enforcement Act of 2015"	ENDO-OPIOID_MDL-02798962
12/17/2015 0:00	Re: EXTERNAL: Proposed Edits to H.R. 2805, the "Heroin and Prescription Opioid Abuse Prevention, Education, and Enforcement Act of 2015"	ENDO-OPIOID_MDL-02798968
12/17/2015 0:00	Re: EXTERNAL: Proposed Edits to H.R. 2805, the "Heroin and Prescription Opioid Abuse Prevention, Education, and Enforcement Act of 2015"	ENDO-OPIOID_MDL-02798981
12/21/2015 0:00	FW: More information on Dose and Duration	ENDO-OPIOID_MDL-02798996
12/17/2015 0:00	Re: Response to Helen	ENDO-OPIOID_MDL-04059750
8/29/2006 0:00	P&T Digest - Pain Management.pdf	ENDO-OPIOID_MDL-04797507
		JAN00027264
1/16/2008 0:00	literature-references.pdf	JAN-MS-00230494
1/21/2008 0:00	summary-clin-efficacy-rel-of-mod-to-sev-acute-pain.pdf	JAN-MS-00230496
12/18/2002 0:00	CE presentation LAOs and TDF-final.ppt	JAN-MS-00313196
11/6/2006 0:00	Pain PCP newsletter To Grantor-MedReview 11-1-06.doc	JAN-MS-00411573
11/21/2013 0:00	02TLM11020.pdf	JAN-MS-00983939



1/11/2008 0:00	R331333 dp1855 Clinical Overview0b169642.pdf	JAN-MS-01018802
1/11/2008 0:00	R331333 dp1855 Clinical Overview0b169642.pdf	JAN-MS-01502866
3/22/2010 0:00	Form FDA 2253 - Exalgo	MNK-T1_0000243430
5/18/2011 0:00	Clinical Overview Version One	MNK-T1_0002066663
5/20/2011 0:00	Draft of Clinical Overview	MNK-T1_0002066949
5/18/2011 0:00	Clinical Overview Version One	MNK-T1_0002067100
12/15/2015 0:00	MR-00289 Pain PACT - Cognitive Impairment Strategies and To.pdf	PPLP003327529
12/15/2015 0:00	MR-00290 FACETS - Cognitive Impairment Strategies and Tools .pdf	PPLP003327548
12/16/2015 0:00	MR-00332 - PACT - Pain Assessment The Essentials.pdf	PPLP003327586
12/16/2015 0:00	MR-00351 Pain PACT - Pain in Long-Term Care A Team Approach .pdf	PPLP003327614
7/28/2011 0:00	71331_Pain PACT Instructors Guide (ML Handout_full file_appr 7-24-09).pdf	PPLP003331662
8/28/2012 0:00	145706_Science and Nature of Pain (re-rev 2012-08-28 for MCook 9-6-12).pdf	PPLP003335027
2/1/2013 0:00	175814_Team Approach NE revised 2-1-13.pdf	PPLP003336447
8/15/2013 0:00	Complexities-People in Pain 3-11-13 (PPT as PDF).pdf	PPLP003338104
2/1/2012 0:00	104110_Care of the Person with Chronic Pain_Implication for Case Managers (fnl appr 4-8-11_rev 5-27-11_full eCampus disclaimer file).pdf	PPLP003442536
6/11/2012 0:00	127312_Is it Pain_BC BS LA.pdf	PPLP003444089
3/26/2013 0:00	186805_FACETS_Cognitive Impairment_2-2013 rev (Disclaimer_Image).pdf	PPLP003449262
4/5/2013 0:00	188223_FACETS_Science and Nature of Pain_1-2013.pdf	PPLP003449971
4/5/2013 0:00	188127_FACETS_Cognitive Impairment_2-2013 rev.pdf	PPLP003449987
5/27/2014 0:00	FACETS_Science and Nature of Pain_1-2013	PPLP003454777
6/26/2014 0:00	PAINPact Cognitive Impairment: Strategies and Tools to Assess Pain - (Targeting Elderly Population)	PPLP003454901
5/29/2014 0:00	FACETS -Assessing Pain in Patients w/ Cognitive Impairment (elderly)	PPLP003455466
		PURCHI-003287388
1/11/2016 0:00	MR-00458 FACETS - Is it Pain.pdf	PPLP003494961
1/20/2016 0:00	Is it Pain? - An educational offering from Purdue Pharma Presentation	PPLP003572026
4/25/2012 0:00	Strategies and Tools to Assess Pain in Patients with Cognitive Impairment PowerPoint Presentation with Speaker Notes	PPLP003577449
6/19/2009 0:00	"Complexities in Caring for People in Pain" 6-17-09.ppt 40 pp. by Purdue A lecture guide with accompanying slides. 2009	PPLP004058742
7/28/2008 0:00	Cognitive Impairment -- 08 Update (orange approved 7-28-08).pdf	PPLP004059861
12/3/2012 0:00	PainPact Trifold Pain Care OverviewCROPS.pdf	PPLP004093443
11/26/2012 0:00	OME294-C8050SS-JS Pain PACT Pain Care Overview 8 5 x 11 (Appr 2013Feb).pdf	PPLP004093452
11/26/2012 0:00	OME294-C8050SS-JS Pain PACT Pain Care Overview 8 5 x 11 (Appr 2013Feb).pdf	PPLP004093456
11/26/2012 0:00	OME294-C8050SS-JS Pain PACT Pain Care Overview 8 5 x 11 (Appr 2013Feb).pdf	PPLP004093534
11/26/2012 0:00	OME294-C8050SS-JS Pain PACT Pain Care Overview 8 5 x 11 (Appr 2013Feb).pdf	PPLP004093826
2/25/2015 0:00	Purdue Guidelines: Pain Pact: Cognitive Impairment Strategies and Tools	PPLP004093854
11/26/2012 0:00	OME294-C8050SS-JS Pain PACT Pain Care Overview 8 5 x 11 (Appr 2013Feb).pdf	PPLP004093912
5/21/2012 0:00	Purdue: Pain Pact Partnership/Care - Cognitive Impairment Strategies and Tools	PPLP004093940
11/26/2012 0:00	OME294-C8050SS-JS Pain PACT Pain Care Overview 8 5 x 11 (Appr 2013Feb).pdf	PPLP004094305
5/6/2015 0:00	Pain in LTC-A Team Approach Annotated 3-2-15.ppt	PPLP004094484
11/26/2012 0:00	OME294-C8050SS-JS Pain PACT Pain Care Overview 8 5 x 11 (Appr 2013Feb).pdf	PPLP004094756
5/21/2012 0:00	Purdue: Pain Pact Partnership/Care - Cognitive Impairment Strategies and Tools	PPLP004094784
11/26/2013 0:00	Pain-Guide-for-PAs-and-Patients.pdf	PPLP004095172
		SFC00012637

10/19/2001 0:00	FW: Use of the AGS Clinical Practice Guidelines	PPLPC014000021244
		ABT-MDL-KY-0026458
40119	Module 2 Final 07-04.pdf	TEVA_CHI_00036730
40119	Module 2 FINAL 03-2005.pdf	TEVA_CHI_00036828
39154	Module 2 Final Feb2007.pdf	TEVA_CHI_00036931
		TEVA_MDL_A_00823452
		TEVA_MDL_A_00823808
		TEVA_MDL_A_00823944
		TEVA_MDL_A_00838223
		TEVA_MDL_A_00838384
	Slide 1	TEVA_MDL_A_04811967
	Slide 1	TEVA_MDL_A_04867962
	Slide 1	TEVA_MDL_A_04869976
	Slide 1	TEVA_MDL_A_04870167
	Slide 1	TEVA_MDL_A_04872002
	Slide 1	TEVA_MDL_A_04873832
	Slide 1	TEVA_MDL_A_04873929
	Slide 1	TEVA_MDL_A_04875764
	Slide 1	TEVA_MDL_A_04877900
	Slide 1	TEVA_MDL_A_04879729
	Slide 1	TEVA_MDL_A_04881999
	Slide 1	TEVA_MDL_A_04884000
	Slide 1	TEVA_MDL_A_04893594
	Slide 1	TEVA_MDL_A_04914460
	Slide 1	TEVA_MDL_A_04949774
	Slide 1	TEVA_MDL_A_04951597
	Slide 1	TEVA_MDL_A_04953444
	Slide 1	TEVA_MDL_A_04953532
	Slide 1	TEVA_MDL_A_04955355
	Slide 1	TEVA_MDL_A_04957178
	Slide 1	TEVA_MDL_A_04959001
	Slide 1	TEVA_MDL_A_04959089
	Slide 1	TEVA_MDL_A_04960912
	Slide 1	TEVA_MDL_A_04963447
	Slide 1	TEVA_MDL_A_04984517
	Slide 1	TEVA_MDL_A_05043634
	Slide 1	TEVA_MDL_A_05043730
	Slide 1	TEVA_MDL_A_05114543
40113	Kadian_Slides_for_Speaker_ Training_with_MLRcmts_2_22.ppt	Acquired_Actavis_00943445
The Pharmacological Management of Pain in Older Persons published by the American Geriatric Society ("AGS 2009")		
	Column2	Column3
6/27/2009 0:00	Brand IQ- CLBP and OA Opportunity 6-22.pptx	ENDO-CHI_LIT-00546655
2/20/2014 0:00	Brand IQ- CLBP and OA Opportunity 6-22.ppt	ENDO-CHI_LIT-00034105
2/20/2014 0:00	Brand IQ- CLBP and OA Opportunity 6-22.pptx	ENDO-CHI_LIT-00034803
2/20/2014 0:00	Brand IQ- CLBP and OA Opportunity 6-22.pptx	ENDO-CHI_LIT-00034831
2/20/2014 0:00	Brand IQ- CLBP and OA Opportunity 6-22.pptx	ENDO-CHI_LIT-00034857
2/20/2014 0:00	Brand IQ- CLBP and OA Opportunity 6-22.pptx	ENDO-CHI_LIT-00034891
2/20/2014 0:00	Brand IQ- CLBP and OA Opportunity 6-22.pptx	ENDO-CHI_LIT-00034921
2/20/2014 0:00	Brand IQ- CLBP and OA Opportunity 6-22.pptx	ENDO-CHI_LIT-00038446
1/10/2014 0:00	Brand IQ- CLBP and OA Opportunity 6-22.pptx	ENDO-CHI_LIT-00076810
2/20/2014 0:00	Brand IQ- CLBP and OA Opportunity 6-22.pptx	ENDO-CHI_LIT-00142530
2/21/2014 0:00	Brand IQ- CLBP and OA Opportunity 6-22.pptx	ENDO-CHI_LIT-00193370
2/24/2014 0:00	Brand IQ- CLBP and OA Opportunity 6-22.pptx	ENDO-CHI_LIT-00216688
6/26/2009 0:00	Brand IQ- CLBP and OA Opportunity 6-22.ppt	EPI000305065
12/16/2010 0:00	Revopan Annotated Slides 12-16-10.pptx	ENDO-OR-CID-00483354
5/25/2011 0:00	FINAL SHOW SLIDES PDF Format.pdf	END00550315
8/19/2010 0:00	LD-00056 LIDODERM Case 1 0817-10.ppt	ENDO-OPIOID_MDL-00529869
8/26/2009 0:00	Brand IQ- CLBP and OA Opportunity 6-22 (3).pptx	ENDO-OPIOID_MDL-00793605
11/3/2009 0:00	Brand IQ- CLBP and OA Opportunity 6-22.pptx	ENDO-OPIOID_MDL-00796040
4/11/2010 0:00	FINAL SLIDES Multicultural Advisory Board Meeting 4-10-10[1].pptx	ENDO-OPIOID_MDL-02346934
12/17/2015 0:00	More information on Dose and Duration	ENDO-OPIOID_MDL-02798957
12/17/2015 0:00	EXTERNAL: Proposed Edits to H.R. 2805, the "Heroin and Prescription Opioid Abuse Prevention, Education, and Enforcement Act of 2015"	ENDO-OPIOID_MDL-02798962

12/17/2015 0:00	Re: EXTERNAL: Proposed Edits to H.R. 2805, the "Heroin and Prescription Opioid Abuse Prevention, Education, and Enforcement Act of 2015"	ENDO-OPIOID_MDL-02798968
12/17/2015 0:00	Re: EXTERNAL: Proposed Edits to H.R. 2805, the "Heroin and Prescription Opioid Abuse Prevention, Education, and Enforcement Act of 2015"	ENDO-OPIOID_MDL-02798981
12/21/2015 0:00	FW: More information on Dose and Duration	ENDO-OPIOID_MDL-02798996
12/17/2015 0:00	Re: Response to Helen	ENDO-OPIOID_MDL-04059750
7/19/2011 0:00	02TLM11041 Mechanical Stat.pdf	JAN-MS-00364124
5/24/2011 0:00	NUcyntha MLR changes.pdf	JAN-MS-00364188
11/25/2009 0:00	JAGS Guidelines 2376.pdf	JAN-MS-00395552
11/30/2009 0:00	JAGS Guidelines 2376.pdf	JAN-MS-00395569
4/3/2012 0:00	GSA Whats Hot Pain NL final.pdf	JAN-MS-00405217
5/17/2011 0:00	02TLM11041.pdf	JAN-MS-00867523
4/21/2011 0:00	J&J Module 2.5 - Clinical Overview. Tapentadol compared to Oxycodone.	JAN-MS-01173772
4/21/2011 0:00	80000B35	JAN-MS-01182209
10/6/2009 0:00	Module 2.5- Clinical Overview Tapentadol IR in the Treatment of Moderate to Severe Acute Pain	JAN-MS-02210550
40092	Module 2.5- Clinical Overview Tapentadol IR in the Treatment of Moderate to Severe Acute Pain	JAN-MS-02210550
8/2/2012 0:00	Nucynta_ER_dossier_July_2012_update_V4C_clean_.doc	JAN-MS-02295418
10/9/2013 0:00	Global Medical Affairs Pain Management Nursing Roundtable Meeting Executive Summary	MNK-T1_0000204246
12/31/2009 0:00	Covidien Learning Systemt Module 2: Treatment Context Training Manual	MNK-T1_0001029785
7/23/2014 0:00	JC Sentinel Event Alert-Field Memo FINAL 072314.pdf	MNK-T1_0001146583
12/2/2014 0:00	QI - Risk Char Patients FINAL SUBMISSION.pdf	MNK-T1_0001148786
7/9/2010 0:00	Module 2 - Pharmacology	MNK-T1_0001277221
7/9/2010 0:00	Module 2 - Pharmacology r5_Reformatted	MNK-T1_0001277251
7/13/2010 0:00	Module 2 - Pharmacology of Chronic Pain	MNK-T1_0001277287
7/9/2010 0:00	Module 2 - Pharmacology	MNK-T1_0001277318
3/3/1933 0:00	Draft Sales Training Document; No Date	MNK-T1_0001277943
7/20/2010 0:00	2010 Draft Salesperson Education: Pharmacology of Chronic Pain Management	MNK-T1_0001278025
6/20/2015 0:00	2010 Draft: Salesperson Education: Pharmacology of Chronic Pain	MNK-T1_0001278051
2/6/2012 0:00	MODULE 5 - DECISION MAKING FACTORS IN PAIN MANAGEMENT	MNK-T1_0001286777
1/9/2013 0:00	Document re: Journal of Pain and Symptom Management Vol 44 No 6S	MNK-T1_0001465678
1/27/2011 0:00	Document re: Cares Alliance Pain Management Guide for Older Adults Outline	MNK-T1_0001492849
2/9/2011 0:00	Document re: Cares Alliance Pain Management Guide for Older Adults Outline	MNK-T1_0001492855
5/30/2012 0:00	Document: re: Module 5 Decision-Making Factors in Pain Management	MNK-T1_0001498780
5/30/2012 0:00	Document: re: Module 5 Decision Making Factors in Pain Management	MNK-T1_0001498862
2/17/2012 0:00	Module 5 outline_02_16_12kq.doc	MNK-T1_0001738153
11/4/2013 0:00	Pain Needs Assessment - Cephalon.pdf	MNK-T1_0002413477
5/18/2012 0:00	Mod 5_052312_MARC_comments.docx Synchrony Sales Training Modules - Decision-Making Factors in Pain Management	MNK-T1_0002883774
4/13/2012 0:00	Document re: Synchrony / Ascending Pathways Sales Training Modules - Module 5 Decision Making Factors in Pain Management	MNK-T1_0002883956
5/18/2012 0:00	Mod 5 draft1_051812_kq.docx Synchrony Sales Training Modules - Decision-Making Factors in Pain Management	MNK-T1_0002884044
5/18/2012 0:00	Mod 5 Decision-Making Factors in Pain Management	MNK-T1_0002884134
5/11/2012 0:00	Mod 5 draft1_tpedits_051012.docx Synchrony Sales Training Modules - Decision-Making Factors in Pain Management	MNK-T1_0002884225
2/17/2012 0:00	Module 5 Decision-Making Factors in Pain Management	MNK-T1_0002884475
4/3/2012 0:00	Document re: Synchrony / Ascending Pathways Sales Training Modules - Module 5 Draft Outline	MNK-T1_0002884566

5/18/2012 0:00	Document re: Synchrony / Ascending Pathways Sales Training Modules - Module 5 Decision Making Factors in Pain Management	MNK-T1_0002884820
3/15/2012 0:00	Request for Funding	MNK-T1_0007772313
7/30/2008 0:00	61213_C6998 Providing Relief Preventing Abuse - 0LE011-PPXX40.pdf	PPLP003331169
2/1/2013 0:00	175814_Team Approach NE revised 2-1-13.pdf	PPLP003336447
2/1/2012 0:00	104110_Care of the Person with Chronic Pain_Implication for Case Managers (fnl appr 4-8-11_rev 5-27-11_full eCampus disclaimer file).pdf	PPLP003442536
6/11/2012 0:00	127312_Is it Pain_BC BS LA.pdf	PPLP003444089
6/26/2014 0:00	PAINPact Cognitive Impairment: Strategies and Tools to Assess Pain - (Targeting Elderly Population)	PPLP003454901
6/26/2014 0:00	Pain PACT - Pain in LTC - A Team Approach to Quality Care	PPLP003454922
5/29/2014 0:00	FACETS -Assessing Pain in Patients w/ Cognitive Impairment (elderly)	PPLP003455466
		PURCHI-003287388
4/14/2016 0:00	NEDP104142_The American Geriatrics Society.pdf	PPLP003465109
1/11/2016 0:00	MR-00458 FACETS - Is it Pain.pdf	PPLP003494961
6/12/2015 0:00	Pain in LTC-A Team Approach.ppt	PPLP003569618
1/20/2016 0:00	Is it Pain? - An educational offering from Purdue Pharma Presentation	PPLP003572026
8/4/2010 0:00	Disparities_in_Pain_Care_2010_update_(final_approved_for_eCampus).pdf	PPLP003577505
4/7/2016 0:00	Reactive responses to CDC recommendations	PPLP003905698
4/7/2016 0:00	Reactive responses to CDC recommendations_MS and MSL use.3.29.16.v2.final.docx	PPLP003907428
3/29/2016 0:00	recommended Reactive responses to the 12 CDC recommendations re opioid dispensing_3.29.16 lls.v2comments addressed_redline.docx	PPLP003907443
12/3/2012 0:00	PainPact Trifold Pain Care OverviewCROPS.pdf	PPLP004093443
11/26/2012 0:00	OME294-C8050SS-JS Pain PACT Pain Care Overview 8 5 x 11 (Appr 2013Feb).pdf	PPLP004093452
11/26/2012 0:00	OME294-C8050SS-JS Pain PACT Pain Care Overview 8 5 x 11 (Appr 2013Feb).pdf	PPLP004093456
11/26/2012 0:00	OME294-C8050SS-JS Pain PACT Pain Care Overview 8 5 x 11 (Appr 2013Feb).pdf	PPLP004093534
5/29/2012 0:00	Pain in LTC-A Team Approach.ppt	PPLP004093539
5/29/2012 0:00	Pain in LTC-A Team Approach.ppt	PPLP004093782
6/12/2015 0:00	Pain in LTC-A Team Approach.ppt	PPLP004093797
5/6/2015 0:00	Pain in LTC-A Team Approach Annotated 3-2-15.ppt	PPLP004093811
11/26/2012 0:00	OME294-C8050SS-JS Pain PACT Pain Care Overview 8 5 x 11 (Appr 2013Feb).pdf	PPLP004093826
11/26/2012 0:00	OME294-C8050SS-JS Pain PACT Pain Care Overview 8 5 x 11 (Appr 2013Feb).pdf	PPLP004093912
11/26/2012 0:00	OME294-C8050SS-JS Pain PACT Pain Care Overview 8 5 x 11 (Appr 2013Feb).pdf	PPLP004094305
5/6/2015 0:00	Pain in LTC-A Team Approach Annotated 3-2-15.ppt	PPLP004094484
11/26/2012 0:00	OME294-C8050SS-JS Pain PACT Pain Care Overview 8 5 x 11 (Appr 2013Feb).pdf	PPLP004094756
11/26/2013 0:00	Pain-Guide-for-PAs-and-Patients.pdf	PPLP004095172
1/7/2016 0:00	FINAL - MR-00351 PACT Pain in LTC - 12.17.2015.ppt	PPLPC015000237992
12/18/2012 0:00	MDS 3.0 - Part 1 - slide presentation for Nurse Educators.pptx	PPLPC019000747201
12/18/2012 0:00	MDS 3.0 - Part 2 - slide presentation for Nurse Educators.pptx	PPLPC019000747202
6/12/2015 0:00	Pain in LTC-A Team Approach.ppt	PPLPC019001148699
		ABT-MDL-KY-0001597

CONFIDENTIAL

Report of Matthew Perri III in Case no. 17-OP-45004 (N.D. Ohio) and Case No. 18-OP-45090 (N.D. Ohio)

Confidential and Subject to Protective Order

#### Schedule 15: Evaluation of Marketing Impact



YEAR	ALLERGAN	BEG BATES NUMBER
2008	Kadian 2008 Brand Plan Part 1 - 108 redacted	ALLERGAN_MDL_01107617
2008	Adheris: Improving Kadian Adherence Through Direct-to-Patient Programs April 3, 2008	ALLERGAN_MDL_02970693
2008	Kadian Patient Persistence Card Program ROI Oct 2006 through Jan 2008 June 26, 2008	ALLERGAN_MDL_01203204
2008	Kadian Patient Persistence Card Program ROI Oct 2006 through Jan 2008 Oct. 31, 2008	ALLERGAN_MDL_00448145
2008	Kadian 2008 Brand Plan Part 1 - 108 redacted	ALLERGAN_MDL_01107617
4/3/2008	Adheris: Improving Kadian Adherence Through Direct-to-Patient Programs	ALLERGAN_MDL_02970693
6/26/2008	Kadian Patient Persistence Card Program ROI Oct 2006 through Jan 2008 June 26, 2008	ALLERGAN_MDL_01203204
10/31/2008	Kadian Patient Persistence Card Program ROI Oct 2006 through Jan 2008 Oct. 31, 2008	ALLERGAN_MDL_00448145
2009	Proposal to Provide a 2009 Adherence Program for Kadian April 2009	ALLERGAN_MDL_02092534
2009	Kadian Persistence and Case Study May 27, 2009	ALLERGAN_MDL_00450170
5/27/2009	Kadian Patient Persistency and In-Class Case Study May 27, 2009	ALLERGAN_MDL_00450170
4/00/2009	Proposal to Provide a 2009 Adherence Program for Kadian April 2009	ALLERGAN_MDL_02092534
4/20/2010	Kadian Adherence Program Results, April 20, 2010	ALLERGAN_MDL_00221533
2010	Kadian Adherence Program Results, April 20, 2010	ALLERGAN_MDL_00221533
2004	Watson Pharmaceuticals 2004/2005 Business Review Call Center Operations. P. 11: Customer satisfaction survey and ratings	ALLERGAN_MDL_03806394
2006	Call Center Operations Overview. P. 11: 2005 customer satisfaction survey results	Acquired_Actavis_01496818
2008	Kadian 2008 Brand Plan Part 1 - 108 redacted	ALLERGAN_MDL_01107617
2009	Strategic Review. P. 26: Customer Satisfaction Drivers	Acquired_Actavis_01922691
2007	Kadian SFE & Message Tracking W2 Study	ALLERGAN_MDL_00440836
2007	Kadian Sales Call Visual Aid Testing-Qualitative Research-Final Report	ALLERGAN_MDL_00440906
2008	The Branded Sales Team History	ALLERGAN_MDL_01731972
2009	Kadian Sales Team National Sales Meeting, Sept. 2-3, 2009	ACTAVIS0583151
2009	Kadian Sales Update. P. 6: Table shows positive growth in Kadian scripts post sales force deployment.	ACTAVIS0582687
2009	Kadian Sales Team National Sales Meeting, Sept. 2-3, 2009	ACTAVIS0583151
3/13/2009	Impact of Withdrawal of Field-Based Promotion for Kadian March 13, 2009	ALLERGAN_MDL_00448421
2010	Urgent - NSM Presentation Jan 2010	ALLERGAN_MDL_01692522
2010	Kadian National Sales Meeting Jan. 11-13, 2010	ALLERGAN_MDL_01692525
2010	Actavis Sales Meeting, Oct. 3-6, 2010	ALLERGAN_MDL_01211895

2010	Urgent - NSM Presentation Jan 2010	ALLERGAN_MDL_01692522
2010	Kadian National Sales Meeting Jan. 11-13, 2010	ALLERGAN_MDL_01692525
12/00/2010	Kadian Prescribing Process, 10-38 Topline Final Report Dec. 2010	ALLERGAN_MDL_01744602
2010 or after	Kadian LAO Decision-Making Process - Qualitative Research Interviews	ALLERGAN_MDL_01199084
2011	Actavis Proposed Marketing Strategy for Achimedes PecFent	ALLERGAN_MDL_01200047
2011	"Move the Needle" Actavis Sales Meeting January 11, 2011	ALLERGAN_MDL_01211908
2011	Draft Actavis Company Overview for QRx Meeting September 2011	ALLERGAN_MDL_01058610
2011	Taking Charge of Change: Marketing Overview National Sales Meeting, July 2011	ALLERGAN_MDL_01201771
2011	Taking Charge of Change: Kadian Regional Business Update National Sales Meeting, July 25, 2011	ALLERGAN_MDL_01753248
2011	Taking Charge of Change: Targeting and Planning Workshop National Sales Meeting, July 26 2011	ACTAVIS0358228
2011	Taking Charge of Change: TI 2011 Results, Terrence Fullem National Sales Meeting, July 2011	ACTAVIS0356896
2011	Taking Charge of Change: T2 and T3 2011 Goals and Priorities, Nathalie Leitch National Sales Meeting, July 2011	ACTAVIS0356872
2011	Putting It All Together - 2011 Kadian National Sales Meeting. P. 27: "Expanded sales force creates increased market presence."	ACTAVIS0578697
2011	Pipeline status. P. 44: "Reps may have more perceived value than actual influence. Most pharmacists cited the 'value' of sales reps." P. 45: "Sales representatives . . . a primary role in selling in new deals or off-contract deals." P. 51: How Products are Pulled Through . . . Sales reps may be a driving force."	ACTAVIS0578145
2011	Taking Charge of Change: TI 2011 Results, Terrence Fullem National Sales Meeting, July 2011	ACTAVIS0356896
2012	"Where are we going?" Mike Shepherd presentation National Sales Meeting Sept. 12, 2012	ALLERGAN_MDL_01128139
2012	Sales Performance Update National Sales Meeting, Sept. 13, 2012	ALLERGAN_MDL_01475142
2012	MoxDuo Business Intelligence. P. 16: "Highly skilled sales team and their ability to change physician prescribing behavior." P. 18: "A sales force dedicated to pain can lead to more effective sales effort."	ACTAVIS0716745
2005	Phase IX Abstracts Posters Manuscripts, Medical Affairs, Volume 1	ACTAVIS0007747
2005	Alpharma Kadian 2005 Publication Plan. P. 4: "Publication planning is a critical element of the marketing plan because it provides the proof that supports marketing campaigns and the credibility associated with advocates and . . . KOLs. . . The main objection of the plan is to ensure that the key messages . . . are organized, written, and submitted to target journals and congresses in order to influence prescribing and brand preferences for Kadian." - - - Note: Actavis acquired brand name drug Kadian from King Pharmaceuticals in 2008.	ACTAVIS0006930
2005	Phase IV Abstracts Posters Manuscripts, Medical Affairs, Volume 1	ACTAVIS0007747

2011	MoxDuo Project Max Management Update. P. 17: "Customer Targeting - KOL's." P. 19: "KOL Development - Creation of a Multidisciplinary Advisory Board/Steering Committee. National/Regional Advisory Board Meetings"	ACTAVIS0494576
2011	Mox Duo Actavis Commercial Plan and Proposed Deal Structure. P. 11: Pyramid diagram of launch market mix showing KOLs at top. P. 12: "Customer Targeting - KOLs." P. 33: "Build on Pre-Launch relationships with thought leaders and KOL's to drive education."	Acquired_Actavis_01935388
2011	Preparation of a Fixed-Dose-Combination Asset Indicated for Acute Pain Project Kickoff. P. 5: "Key Opinion Leader (KOL) Identification & Influence Mapping. Identify KOLs with the greatest levels of influence nationally and regionally." P. 32: "Identify Regional level KOLs to whom clinicians turn for advice"	ACTAVIS0804498
2011	Kadian Tactical Recommendations. P. 6: "Tactical Platform. . . KOL Advocacy. KOL advisory Board. Professional Organizations." P. 9: Q&A with a top-tier KOL"	ACTAVIS0520729
2011	Actavis Due Diligence Response Prepared for Qrx. P. 6: "Tactics. Launch. Product 'champion' secures a date for MoxDuo IR to be presented to target hospital P&T committees."	ACTAVIS0488181
2012	MoxDuo Review. 19: "Drive physician adoption . . . by gaining KOL support"	ACTAVIS1027605
2012	See above re advocacy: Actavis Commercialization Plan for MoxDuo. P. 8: "Speaker Bureau program launches in support of MoxDuo. 150 Speakers. . . 400 programs . . . Bureau to be made up of anesthesiologists/pain management, orthopedic surgeons"	ACTAVIS1027320
2012	PR Landscape Overview for MoxDuo. P. 3: "Advocacy in the Pain Space is not Cut and Dry. . . . When building alliances . . . the right partner(s) matters." (lists American Pain Society and 4 others)	ACTAVIS0472612
2012	See above re advocacy: 2012 Actavis MoxDuo Staffing Plan/SOW. P. 5: "KOL Development. Concept: Identify, secure and prepare KOLs to speak credibly about MoxDuo and help bring the brand essence to life for key audiences, including media; assumes 5 KOLs from varying specialties/practice areas to be engaged in 2012."	ACTAVIS0316639
4/25/2006	Advocacy Development, Brainstorming Meeting	ALLERGAN_MDL_02513100
1/13/2010	Kadian National Sales Meeting, January 11th - 13th, 2010	ALLERGAN_MDL_01692525
10/29/2010	(email from Michael Shepherd to Nathalie Leitch, Patrick McClanahan, Christopher Hepp and copied to Jennifer Altier, Terrence Fullem) Notes from today's KADIAN Team Meeting	ALLERGAN_MDL_01197701
9/13/2012	Kadian NSM Medical Affairs Clinical Presentation September 13, 2012	ALLERGAN_MDL_01009462
2007	Alpharma Chronic Qualitative Pain Report Dec. 4, 2007	ALLERGAN_MDL_00442308
2009	Impact of Withdrawal of Field-Based Promotion for Kadian March 13, 2009	ALLERGAN_MDL_00448421
2010	Kadian Prescribing Process, 10-38 Topline Final Report Dec. 2010	ALLERGAN_MDL_01744602
2011	Kadian LAO Decision-Making Process Qualitative Research Interviews	ALLERGAN_MDL_01199084
2011	US Oxymorphone Advertising recognized for outstanding readership response. See p. 4.	Acquired_Actavis_00620620

2011	Kadian LAO Decision-Making Process Qualitative Research Interviews	ALLERGAN_MDL_01199084
12/4/2007	Alpharma Chronic Qualitative Pain Report Dec. 4, 2007	ALLERGAN_MDL_00442308
3/13/2009	Impact of Withdrawal of Field-Based Promotion for Kadian March 13, 2009	ALLERGAN_MDL_00448421
12/00/2010	Kadian Prescribing Process, 10-38 Topline Final Report Dec. 2010	ALLERGAN_MDL_01744602
2005	Phase IV Abstracts Posters Manuscripts, Medical Affairs, Volume 1	ACTAVIS0007747
2012	Kadian NSM Medical Affairs Clinical Presentation September 13, 2012	ALLERGAN_MDL_01009462
2012	Kadian NSM Medical Affairs Training Workshop September 13, 2012	ALLERGAN_MDL_01009556
2012	Some Thoughts on Publications Planning in Support of MoxDuo	ACTAVIS0771302
2012	Actavis/QRx: Path Forward for Medical Affairs	Acquired_Actavis_00450500
2012	Actavis MoxDuo Recommended 2012 Media Program	ACTAVIS0440814
2006	Advocacy Development, Brainstorming Meeting	ALLERGAN_MDL_02513100
2007	Kadian's Precise Relief; Personalized pain relief. Learn more about customized pain control with KADIAN.	ALLERGAN_MDL_00814489
2010	Notes from today's KADIAN Team Meeting	ALLERGAN_MDL_01197701
2012	Kadian NSM Medical Affairs Clinical Presentation September 13, 2012	ALLERGAN_MDL_01009462
2012	Actavis Commercialization Plan for MoxDuo. P. 4: "Post Launch Activities . . . Medical Affairs. Roll-out of Pub plan & Advocacy." P. 9: "Advocacy Development. Outreach to key medical associations [and] Advisory boards."	ACTAVIS1027320
2012	2012 Actavis MoxDuo Staffing Plan/SOW. P. 5: "Advocacy Relations. Concept: Identify and establish relationships with key advocacy groups to build awareness and support for MoxDuo and Actavis' commitment to pain; assumes 5-7 targets engaged in 2012"	ACTAVIS0316639
2016	Election Summary - Election Recap and Preview of the 115th Congress; What happened in the elections, how it impacts leadership and what that means for policymaking November 9, 2016	ALLERGAN_MDL_02021592

YEAR	ENDO	BEG BATES NUMBER
8/15/2007	2008 - 2012 Opana Brand Tactical Plan	EPI000300652
2008	2009 Opana Brand Plan	EPI001514810
2012	Opana ER Savings Card Program Promo Response & ROI Analysis	END00563922
2012	Opana ER Key Business Question Opportunity Assessment & Insights	ENDO-CHI_LIT-00387331
2010	2010.01 Opana ER Customer Satisfaction, Sales Force Effectiveness, Awareness & Usage- Wave 2	ENDO-CHI_LIT-00012061
2006	JPMorgan -Results of Evaluation of Opana Survey	ENDO-CHI_LIT-00550852
2007	2008-2012 Opana Brand Tactical Plan	EPI000300652
2007	OER Successful Rep Study (final report)	ENDO-CHI_LIT-00173035
2007	Email & Attachment re Opana Fastape Study	ENDO-OPIOID_MDL-01723746
2008	2009 Opana Brand Plan	EPI001514810
2008	OPANA ER Concept Testing Research	ENDO-CHI_LIT-00025540
7/9/2008	Background; OPANA Franchise	ENDO-CHI_LIT-00017366
2010	2010 Oxymorphone Franchise Tactical Plan	ENDO-CHI_LIT-00023332
2010	2010.01 Opana ER Customer Satisfaction, Sales Force Effectiveness, Awareness & Usage- Wave 2	ENDO-CHI_LIT-00012061
2011	Opana ER Growth Trends Issue- Market Research Final Report	ENDO-CHI_LIT-00022103
2012	Email & Attachment Opana ER Pulse Research: Physicians Dashboard	ENDO-OPIOID_MDL-01006974
2012	Opana ER Pulse Research-Physicians Dashboard Wave 3	ENDO-CHI_LIT-00308899
2006	JPMorgan -Results of Evaluation of Opana Survey	ENDO-CHI_LIT-00550852
2007	Opana Brand Tactical Plan	EPI000300652
2007	Clinical Affairs Forced Ranking of Proposed Initiatives	ENDO-OPIOID_MDL-01928212
3/22/2007	2007 Opana Publication Plan-Gap Analysis & Strategic Recommendations	ENDO-CHI_LIT-00544148
2010	2010 Oxymorphone Franchise Tactical Plan	ENDO-CHI_LIT-00023332
2012	Opana ER Key Business Question Opportunity Assessment and Insights	ENDO-CHI_LIT-00387331
2012	2012 October Concept & Message Testing for Opana ER	ENDO-CHI_LIT-00011308
2013	2013.02.04 NP-PA Outreach Plan - Survey Results and Current Initiatives	ENDO-CHI_LIT-00122901
2006	JPMorgan -Results of Evaluation of Opana Survey	ENDO-CHI_LIT-00550852
2007	Opana & Opana ER Future Uptake-Physician survey results	ENDO-CHI_LIT-00550897
2007	Email & attachment re Opana ATU Wave # Final Report and Brand IQ Summary	ENDO-OPIOID_MDL-02086096



2007	Email & attachment re Wave II Opana Franchise Awareness Trial and Usage	ENDO-OPIOID_MDL-00681874
2007	Email & Attachment re LA Opioid Adopters Study Final Report	ENDO-OPIOID_MDL-01724603
2008	OPANA ER Concept Testing Research	ENDO-CHI_LIT-00025540
2008	Opana ATU W6 Final Report	ENDO-CHI_LIT-00547543
2009	Opana ER UHC Managed Care Pull-through Guide	ENDO-CHI_LIT-00046379
2010	2010.01 Opana ER Customer Satisfaction, Sales Force Effectiveness, Awareness & Usage- Wave 2	ENDO-CHI_LIT-00012061
2012	Opana ER Pulse Research-Physicians Dashboard Wave 3	ENDO-CHI_LIT-00308899
2012	Opana ER Crush-Resistant Formulation Research Wave 5	ENDO-CHI_LIT-00135664
2013	Opana with INTAC 2013 Research - Q2 Qualitative Research Report	END00591813
2006	2006 Primary Care Opana AdBoad ExecSummary	ENDO-OPIOID_MDL-00677466
2007	2007 Opana Publication Plan-Gap Analysis & Strategic Recommendations	ENDO-CHI_LIT-00544148
2005	Kudos to Marcia & CD&E	ENDO-OPIOID_MDL-04755180
2010	Issues Mgmt Third Party Groups List Rev 08.27.	ENDO-CHI_LIT-00012326
2011	2Q2011 - Spreadsheet on Advocacy Group incl Legend	ENDO-OPIOID_MDL-02838111
2011	3Q3011 Scientific Affairs PAIN Organizational Outreach - 3rd Quarter	ENDO-OPIOID_MDL-02354652
2012	4Q2012 Pain Advocacy Spreadsheet	ENDO-OPIOID_MDL-02978866

YEAR	INSYS	BEG BATES NUMBER
2012	FW: Jaimi Hooker	INSYS-MDL-010608168
2012	Marketing to high prescribers	INSYS-MDL-001434228
2012	Speaker ROI	INSYS-MDL-002943231
2013	Re: Insys Speaker Programs	INSYS-MDL-000164445
2013	Fwd: New Fax Message from (610) 841-5626	INSYS-MDL-002734612
2013	Re: Sales representatives who have earned the right to continue utilizing ISP's at Insys	INSYS-MDL-002723466
2013	FW: Lunch Money	INSYS-MDL-000207187
2013	Offsite Strategic Planning Session	INSYS-MDL-000103520
2013	Insys thought it owned high decile doctors.	INSYS-MDL-000113522
2013	High deciles weren't oncologist.	INSYS-MDL-000103520
2013	Proposed Marketing Budget.	INSYS-MDL-000262421
2014	Motivational... PLEASE READ	INSYS-MDL-002960596
2013	Fw: Please read	INSYS-MDL-000163352
2016	PAIN ADVISORY BOARD - CHICAGO - MARCH 2016.DOCX	INSYS-MDL-005385964
2017	Critically Important Business Week	INSYS-MDL-009424145
2017	Fwd: 8 Rx Yesterday, ~ 292 Rx for Week	INSYS-MDL-009227022
2013	From Dr. Von Hoff	INSYS-MDL-000396534
2013	DVH 9 4 13.PDF	INSYS-MDL-000396535
2013	RE: Slides - Vertical Health	INSYS-MDL-000407923
2013	506 Feature DDICA FUDIN.PDF	INSYS-MDL-000407926
2013	505 Feature Cancer RX Opioids Hoffberg (2).PDF	INSYS-MDL-000407941
2011	Subsys Launch Playbook_12-1-11	INSYS-MDL-000458120
2013	2013 Subsys Playbook Content 04162013.PDF	INSYS-MDL-000104276
2014	Fortner2002.PDF	INSYS-MDL-006841582
2013	Direct to Cancer Patient Marketing	INSYS-MDL-000196613
2014	RE: Advocacy Plans With and Without Budget	INSYS-MDL-001694215
2016	PAIN ADVISORY BOARD - CHICAGO - MARCH 2016.DOCX	INSYS-MDL-005385964

YEAR	JANSSEN	BEG BATES NUMBER
2001	Duragesic Coupon ROI Analysis	<u>JAN-MS-00315375</u>
2002	Duragesic Coupon ROI Analysis	<u>JAN-MS-00311391</u>
2002	Duragesic E-detailing Pilot Program-Preliminary Results	<u>JAN-MS-00306762</u>
2002	ROI Analysis by Territories Rep-Duragesic	<u>JAN-MS-00313615</u>
2003	Duragesic Key Tactics Review	<u>JAN-MS-00306778</u>
2003	Strike Force Sales Rep Alignment: Feasibility Analysis from ROI Perspective Duragesic	<u>JAN-MS-00309600</u>
2004	Duragesic: Grow and Defend to Build for the Future: 2005 Tactical Plan	<u>JAN-MS-00310213</u>
2005	Janssen Pharmaceutica 5 Year Marketing Contribution Analysis	<u>JAN-MS-00314171</u>
2010	Nucynta Savings Card ROI Evaluation	<u>JAN-MS-00259847</u>
2010	Nucynta Savings Card Program Impact Evaluation	<u>JAN-MS-00798634</u>
2012	Nucynta ER / Nucynta Update	<u>JAN-MS-02368515</u>
2012	2012 Business Plan Forecast: Nucynta & Nucynta ER	<u>JAN00012389</u>
2012	Nucynta / Nucynta ER 2012-2013 Budget Estimate	<u>JAN-MS-00664894</u>
2012	Nucynta ER / Nucynta 2013 Preliminary Business Plan	<u>JAN-MS-00768695</u>
2012	Nucynta ER / Nucynta 2013 Preliminary Business Plan, 2 <sup>nd</sup> Review	<u>JAN-MS-00774148</u>
2013	2012 Nucynta Brand Investment Summary	<u>JAN00119068</u>
2013	2013 Business Plan Brand Marketing Expense Template - Nucynta ER and Nucynta	<u>JAN00021218</u>
2013	Nucynta ER / Nucynta 2014 Business Plan, President Review #2	<u>JAN-MS-02386116</u>
2014	Nucynta / Nucynta ER 2014 Brand Tactics	<u>JAN00119271</u>
2002	Market Facts letter regarding Chronic Pain Treater Study	<u>JAN-MS-00305691</u>
2011	U.S. Promotional Platform	<u>JAN00119192</u>
2011	Nucynta PhysPulse Wave 1 Summary	<u>JAN00126528</u>
2011	Nucynta PhysPulse Wave 1 Findings	<u>JAN00126539</u>
2004	Duragesic Overall Effectiveness of the Sales Rep	<u>JAN-MS-00788350</u>
2008	Analysis of Tapentadol Selling Opportunity with KCS Sales Force	<u>JAN-MS-02565763</u>
2009	Nucynta NEO Effectiveness	<u>JAN-MS-01126863</u>
2009	Pain Franchise Update	<u>JAN00139400</u>
2011	Nucynta PhysPulse Wave 1 Summary	<u>JAN00126528</u>
2011	Nucynta PhysPulse Wave 1 Findings	<u>JAN00126539</u>
2011	Nucynta PhysPulse Wave 2 Findings	<u>JAN00126250</u>
2011	Double win at Eisenhower Medical Center: Xarelto and Nucynta	<u>JAN-0015-0027265</u>
2011	Brand Overview	<u>JAN-MS-01968621</u>
2012	Nucynta PhysPulse Wave 3 Findings	<u>JAN-MS-00866595</u>
2012	Nucynta PhysPulse Wave 4 Findings	<u>JAN00125893</u>
2012	Nucynta PhysPulse Wave 5 Findings	<u>JAN00126020</u>
2013	Nucynta PhysPulse W6 Key Findings	<u>JAN00126649</u>
2013	Nucynta PhysPulse Wave 6 Appendix	<u>JAN00126932</u>
2013	Nucynta PhysPulse Wave 6 Follow ups	<u>JAN00126454</u>

2014	Nucynta PhysPulse Wave 7 Key Insights Report	<u>JAN00125850</u>
2014	Nucynta PhysPulse Wave 7 Detailed Findings	<u>JAN00126691</u>
2014	Nucynta ER / Nucynta Pain Business Review	<u>JAN-MS-00771950</u>
Undated	Value Based Selling: The Consultative Approach	<u>JAN00024213</u>
	Optimizing Chronic Pain Management with Duragesic	<u>JAN-MS-02114226</u>
2002	Review of American Pain Surveys Designed to Gain Media Placement and/or Influence Consumer Attitudes	<u>JAN-MS-02325533</u>
2003	Duragesic iOptima Analysis	<u>JAN-MS-00307257</u>
2008	Tapentadol Phase 3 Journal Scenarios	<u>JAN-MS-01011585</u>
2009	Nucynta Launch	<u>JAN00138569</u>
2011	Nucynta Hospital Contracting Strategy Development-Market Research Findings	<u>JAN-MS-02564853</u>
2012	US/Canada Sharing of Current Plans and Insights	<u>JAN-MS-01053015</u>
2012	Nucynta & Nucynta ER 2012 Business Plan	<u>JAN-MS-00010801</u>
2012	2012 Business Plan Forecast: Nucynta & Nucynta ER	<u>JAN00012389</u>
2012	Nucynta ER / Nucynta 2013 Preliminary Business Plan	<u>JAN-MS-00768695</u>
2012	Nucynta ER / Nucynta 2013 Preliminary Business Plan, 2 <sup>nd</sup> Review	<u>JAN-MS-00774148</u>
2013	Nucynta/Nucynta ER 2013 Business Plan Review	<u>JAN-MS-00749778</u>
2013	Nucynta / Nucynta ER Situation Assessment	<u>JAN00025243</u>
2013	CNS Tactical Plan 2013, Medical Affairs, Pain	<u>JAN-MS-01511434</u>
2014	Nucynta ER / Nucynta National Managers Meeting	<u>JAN-MS-02527254</u>
2003	Duragesic Positioning/Message/Campaign Evolution Overview	<u>JAN-MS-00306327</u>
2003	Duragesic PhysPulse Brand Monitoring and Performance Enhancement Study-Summary of Wave 1 Results	<u>JAN-MS-00778987</u>
2004	Long Acting Opioid Market Overview	<u>JAN-MS-00779151</u>
2004	Duragesic Business Update	<u>JAN-MS-00479441</u>
2009	Nucynta NEO Effectiveness	<u>JAN-MS-01126863</u>
2009	Pain Franchise Update	<u>JAN00139400</u>
2010	Nucynta Savings Card Program Impact Evaluation	<u>JAN-MS-00798634</u>
2011	Nucynta PhysPulse Wave 1 Summary	<u>JAN00126528</u>
2011	Nucynta PhysPulse Wave 1 Findings	<u>JAN00126539</u>
2012	Nucynta ICRM Advanced Analytics	<u>JAN00119814</u>
2001	Duragesic Publications Planning Summary	<u>JAN-MS-00786447</u>
2004	Grunenthal Communication Strategy (Publication Strategy)	<u>JAN-MS-00460875</u>
2007	Tapentadol Publication Plan	<u>JAN-MS-00504344</u>
2009	TAP Partners Durable Deck Overall Review	<u>JAN-MS-00838435</u>
2011	Advocacy, Policy, Quality Activities	<u>JAN00038605</u>
2011	Pain Brief Advocacy & Policy Monthly	<u>JAN-MS-00403634</u>
2011	Advocacy Partners 2011	<u>JAN-MS-00403788</u>
2011	2012 Tactical Plan	<u>JAN00038742</u>
2012	Nucynta & Nucynta ER 2012 Business Plan	<u>JAN-MS-00010801</u>
2012	National Advocacy Partnerships/Sponsorships-2012	<u>JAN00038747</u>

2012	PR Meeting – Welcome Weber Shandwick.	<u>JAN-MS-00018068</u>
2012	Demonstrate Industry Leadership in Advocacy for HCPs & Patient Access, 2011-2012 Advocacy Launch Plan	<u>JAN-MS-00403463</u>
2012	2012 Business Plan Forecast: Nucynta & Nucynta ER	<u>JAN00012389</u>
2013	Update & 2013 National Advocacy Business Plan	<u>JAN-MS-00455043</u>
2013	2013 Nucynta ER & Nucynta Strategy	<u>JAN-MS-00456885</u>
2014	Pain Space START Overview	<u>JAN-MS-00418845</u>



YEAR	MALLINCKRODT	BEG BATES NUMBER
2012	Speaker Program Spend and ROI by Region 6-22-12.xlsx	MNK-T1_0001350338
2012	EXALGO Return on Investment - e-MD Alerts, Vouchers	MNK-T1_0000754771
2012	Liftoff - Melissa Falcone Exalgo deck	MNK-T1_0001193006
2012	EXALGO Update - Manager's Meeting	MNK-T1_0000762380
2012	Marketing Monthly Report	MNK-T1_0000746807
2013	EXALGO Marketing Programs ROI	MNK-T1_0000855021
2013	Exalgo Detail ROI Analysis	MNK-T1_0000947739
2013	Overview: X4771 - Exalgo up to \$60.00 Off	MNK-T1_0002674394
2013	EXALGO Business Review - CLT Presentation	MNK-T1_0000124210
2013	McKesson OneStop Retention Rebate Analysis - Hydro APAP	MNK-T1_0004799346
2014	ims health - Physicians Interactive Xartemis XR Physician Feedback Program Promotional Evaluation	MNK-T1_0000132034
2014	Pharmacentra Analysis - Teledetailing Service - SDP	MNK-T1_0000133095
2008	Pharmaceutical Integrated S&OP Meeting	MNK-T1_0007818843
2012	Improving Customer Connectivity -Optimizing Customer Satisfaction - Specialty Generics Initiative	MNK-T1_0005534287
2013	Omnibus Patient Survey Results	MNK-T1_0000738707
2010	EXALGO Sales Force Effectiveness and Message Recall Research - Wave 3-Post Launch	MNK-T1_0001048580
2010	EXALGO Sales Force Effectiveness and Message Recall Research - Wave 4-Post Launch	MNK-T1_0001048582
2010	EXALGO Sales Force Effectiveness and Message Recall Research - Wave 5-Post Launch	MNK-T1_0001190984
2011	NATIONAL REACH & FREQUENCY DECEMBER 2010	MNK-T1_0000923144
2012	Delivering on the Flagship Brand: Sprint to the Finish	MNK-T1_0002294608
2013	Call_report_FY13Q4(8SEP13).xlsb	MNK-T1_0000673890
2013	Pharma DOS Q4 FY13 Comp Calc LOB	MNK-T1_0002715284
2013	Specialty Pharmaceuticals Call Activity and TRx Analysis FY13 Q4 (QTD): July-August 2013	MNK-T1_0000673892
2013	EXALGO Situation Analysis	MNK-T1_0000541918
2014	NAM Quota File	MNK-T1_0002214720
2014	Clarion - Xartemis XR Performance Acceleration	MNK-T1_0001474379
2014	XXR Monthly Field Performance Review	MNK-T1_0000640098
2014	Pharmacy Stocking Report	MNK-T1_0000946339
2013	FW: Dr Mashali Impact on Worcester Territory	MNK-T1_0000218573/75
2013	RE: KOL/Advocacy efforts	MNK-T1_0002084660
2013	Q3 2013_QBR_GPA_Update.pptx	MNK-T1_0002181307
2014	Mallinckrodt Global Medical Affairs Category 4 Research Design Advisory Board Meeting Evaluation Summary	MNK-T1_0008440086
2012	EXALGO Message Recall Research	MNK-T1_0000751435
2012	Exalgo Post Webcast Impact Assessment Report	MNK-T1_0000817224

2012	EXALGO ATU and Message Recall Wave 2 (Post-Launch of 32 mg) - Quantitative Physician Screener and Questionnaire	MNK-T1_0000751341
2012	EXALGO ATU (Wave 3 Post-Launch) Research: Final Report	MNK-T1_0001473290
2013	Impact of EXALGO Non-Personal Media Plan	MNK-T1_0000182777
2013	Assessing the Potential of XARTEMIS XR Ad Concepts & Messages	MNK-T1_0000113702
2010	FW: Exalgo Media Monitoring Report - Week of 1/22	MNK-T1_0000949128
2012	Postgraduate Medicine - Peer-Review Evaluation Comments to the Author	MNK-T1_0001524367/68
2013	Prescription Opioid Stakeholder Mapping	MNK-T1_0000860429
2013	Quarterly Business Review - North America	MNK-T1_0000666227
2014	Jane Williams Presentation - Generics and Addiction Treatment	MNK-T1_0000610456

YEAR	PURDUE	BEG BATES NUMBER
2000	Train the Trainer Return on Investment	PKY181083625
2005	Medical Science and Research Strategy Committee: Proposal Template, March 2015	PPLPC001000212908
9/3/2008	2009 Marketing Plan OxyContin	PPLP003420006
2010	Marketing Update	PPLP003433809
2011	RM impact_Dec 20 2011 v2.2_Dec 27 2011.pptx	PPLP003410392
2012	Mid_year Sales and Marketing Updated June 18, 2012	PPLP003421337
2012	Butrans Patient Savings Card and eVoucher Program Analysis_20120604.pptx	PPLP003408129
2012	Butrans Patient Savings Card and eVoucher Program Analysis (File Name: Butrans Patient Savings Card and eVoucher Program Analysis_20121112.pptx)	PPLP003408203
2012	OxyContin MH program_Aug 7 2012.pptx	PPLP003409867
2012	OxyContin MMM_final_distribution.pptx	PPLP003409899
2012	FW: NEW PROGRAM! - OxyContin New-to-Therapy Patient Savings Program Redemptions Weekly Reports w/e 3-10-12 - FYI	PPLPC004000316506
2012	NEW PROGRAM! - OxyContin New-to-Therapy Patient Savings Program Redemptions Weekly Reports w/e 3-10-12 - FYI	PPLPC012000369075
20120000	2011-2012 Budget Overview	PPLPC012000349870
6/18/2012	Mid_year Sales and Marketing Updated June 18, 2012	PPLP003421337
2013	OxyContin Tablets Promotion Plan 2013 May District Meeting	PPLP003449398
2013	Butrans OxyContin Boston, Seattle, Washington RM analysis	PPLPC021000522968
2013	Butrans RM Presentation final.pptx	PPLPC021000522969
2013	OxyContin RM Presentation final.pptx	PPLPC021000522970
2013	OxyContin 2013 Projects.pptx	PPLPC021000539678
2013	RE: RM Boston, Seattle, Washington ROI	PPLPC022000609275
2013	RE: 2014 Board budget presentation_market overvier_v1.pptx	PPLPC023000622488
2013	ROI and TRx Lift for Board.pptx	PPLPC023000622489
2013	Document Re Marketing & Sales Department Key Initiatives (Butrans and OxyContin	PPLPC012000418325
2013	Butrans_experience_program_Nov12-Apr13_Cohort_final.pptx	PPLP003408377
2013	Butrans_marketing_mix_presentation_073113_Final.pptx	PPLP003408447
2013	OxyContin_marketing_mix_presentation_final_v2_eot.pptx	PPLP003409951
2013	OxyContin_PEK_equ_TRx_09172013.pptx	PPLP003409995
2013	OxyContin_PTN_equ_TRx_08122013_final.pptx	PPLP003410040
2013	OxyContin Tablets Promotion Plan 2013 May District Meeting	PPLP003449398
2014	Update on E2E - Evolve to Excellence Implementation	PPLP004001517
2014	FAMR - Butrans Patient Experience Program Impact - May13-Jan14 Cohort.pptx	PPLP003408346

2014	Butrans_RM analysis 20141207.pptx	PPLP003408531
2014	Oxycontin Logistic and Marketing Mix Modeling Report (File Name: OxyContin Final 112414.pptx)	PPLP003409826
2014	FAMR - OxyContin Patient Essentials Kit - Jan 2013 - Jan 2014 Cohorts PPTs	PPLP003410014
2014	OxyContin_RM analysis 20141207.pptx	PPLP003410062
2014	OxyContin_RM analysis 20141214 v1.pptx	PPLP003410121
2014	Rebates to Returns Team Lead-PMO 9.24.14.pptx	PPLP004126350
4/24/2014	Update on E2E - Evolve to Excellence Implementation	PPLP004001517
2016	Butrans_RM analysis 20161020 dd2.pptx	PPLP003408643
2016	OxyContin Mix Model 20161115.pptx	PPLP003409874
2016	OxyContin_RM analysis 20161005 dd.pptx	PPLP003410145
2016	Purdue OxyContin_Butrans_Hysingla ER_Measurement_Through Jun'16_v1 client meeting 9 23 2016 v4.pptx	PPLP003410278
	Analysis of Butrans Early Experience Program FINAL DRAFT revised dd - Copy.pptx	PPLP003407630
2001	Purdue IRD, Project Management Customer Satisfaction Survey	PKY180709101
2001	Customer Satisfaction Survey	PKY180767598
2001	Customer Satisfaction Survey	PKY180767598
4/00/2001	Purdue IRD, Project Management Customer Satisfaction Survey	PKY180709101
2012	2012 ML program Eval spreadsheet.xls	PPLPC023000709845
2012	Document	PPLPC023000709846
2012		PPLPC023000709848
2012	Document	PPLPC023000709849
2013	2013 ML program Eval spreadsheet 12 13 13.xls	PPLPC023000709829
2013	Notes on Presentation Topics.	PPLPC023000709830
2014	FW: Metrics of customer satisfaction	PPLPC021000678280
2014	Copy of 2013 ML program Eval spreadsheet 12 13 13 with RJM additions 08 18 14.xls; Contains Three Word Documents Embedded in Spreadsheet	PPLPC021000678281
2014	Document	PPLPC021000678282
2014	Document	PPLPC021000678287
2014	Document	PPLPC021000678290
2014	FW: Metrics of customer satisfaction	PPLPC023000709827
2014	Document	PPLPC023000709834
2014	Document	PPLPC023000709837
2000	Re: RE:MCPI Symposium Consumer evening August 1	PKY180797102

2001	JPMorgan Agenda - Sales Update, Pipeline Update, Financial Update, Q&A	PKY182024455
2001	Marketing and Sales Public Affairs	PKY180229581
2001	Divisional / Regional Bulletins 2001	PKY180137287
2001	JPMorgan Agenda - Sales Update, Pipeline Update, Financial Update, Q&A	PKY182024455
2002	Budget Presentation	PKY183284930
2002	Meeting Objectives, 2001 - 2002	PKY182838397
2003	Purdue Mundipharma Group: 2003 Worldwide Capabilities Presentation	E513_00140738
03/00/2003	March 2003 Sales report	PKY182773121
2008	Goldman Sachs Confidential Information Memo - Draft	PKY180003923
2009	Goldman Sachs Confidential Information Memo - Draft	PKY180003923
2009	2008-2009 budget Submission	PPLP004401579
2012	IMS OxyContin eVoucher Program Analysis Phase II 082212sent.pptx	PPLP003409457
2012	2011-2012 Budget Overview	PPLPC012000349870
2013	OxyContin Initiation, Conversion, and Titration Discussions with the Appropriate Selling Tools - draft	PPLP003450924
2013	IMS Updated Oxy Program ROI_FINAL.pptx	PPLP003409516
2013	Evolve 2 Excellence, Overview September 26, 2013	PPLP004001621
2013	20131007 OxyContin Workload Targeting ZS meeting_v2.0.pptx	PPLP004001768
2013	2012-2013 Budget Overview	PPLP004408478
2013	OxyContin Initiation, Conversion, and Titration Discussions with the Appropriate Selling Tools - draft	PPLP003450924
2013	Oxycontin 2014 ACAM	PPLP003420643
2014	Oxycontin 2014 ACAM	PPLP003420643
2014	Call Center Proposal	PPLPC001000148269
2014	Butrans DirectAdhere Results 08.2014_Final.ppt	PPLP003407959
2014	Call Center Proposal	PPLPC001000148269
1996	Purdue Research Center 1996	PKY180929297
1996	Purdue Research Center 1996	PKY180673220
1999	Oxycontin 1999 Media Plan	PDD1502308570
2000	Sales Bulletin - PAP Survey Public Relations Program	SHC-000007110
2000	Lecture Program Expense Analysis - April YTD 2000	PKY181096193
12/7/2000	Sales Bulletin	PDD1502325091
1/17/2001	Protecting Purdue, Providers, and Patients; 2001 Corporate Communications Plan	PPLPC018000012472
3/1/2001	Marketing Tips; Press Release coverage	PKY181960109
3/21/2001	Fw: Analysis of Zip Codes	SHC-000001976
2001	Fw: Analysis of Zip Codes	SHC-000001976



2001	Lecture Program Expense Analysis - Full Year 2001	PKY181855532
2002	Review of American Pain Surveys Designed to Gain Media Placement and/or Influence Consumer Attitudes	JAN-MS-02325533
8/16/2002	Giving Voice to a Society in Pain; 2003 Public Relations Recommendations to Support Partners Against Pain	PPLPC019000028283
2010	April 6 - 9, 2010 L150 SPEAKER EVALUATION - FINAL.docx	PPLPC012000268268
2011	Dec analysis_Mar 18 2011.pptx	PPLP003409243
2011	speaker program_April cohort_June_27_2011.pp	PPLP003410417
2011		PPLP003427247
2011	speaker program_Oct 11 2011.pptx	PPLP003427248
2011	Butrans_speaker_program_October_Update_Dec_15_2011_final.pptx	PPLPC012000356788
2012	Butrans_speaker_program_8282012_v1.pptx	PPLP003408699
8/30/2012	JCAHO Initiatives and Promo list as of 8.30.2012	PPLPC018000712431
		PPLP004096817
		PPLP004096840
	Butrans speaker program ROI analysis - meeting minutes and presentation	PPLPC012000356786
1994	Memo from Michael Friedman to the Sacklers	PDD1706039146
9/28/1994	Oxycontin Launch Plan	PKY180581359
1996	Executive Summary Boca Raton, FL	SHC-000004005
1996	Executive Summary Philadelphia, PA	SHC-000005054
1996	Executive Summary Philadelphia, PA	SHC-000005054
11/00/1996	Palshaw Study of an Oxycontin Visual Aid, Nov. 1996	PDD1502103326
1/21/1997	Studies re Effectiveness of Advertising / Communication Efforts	PKY180544129
1/21/1997	A Palshaw Tracking Study of the Effectiveness of Advertising / Communications Efforts for OxyContin	PKY181085037
2000	The Effect of the Performance Script Program on Physician Prescribing Behavior	PKY181094276
9/00/2002	Palshaw Visual Aid Study of Physician and Field Representative Attitudes Toward and Interest in a New Oxycontin Visual Aid	PKY181257182
10/13/2008	A Strategic Market Study to Aid in the Development of Compelling Messaging for Oxy Contin	PPLP003418363
2010	Slideshow - Purdue OxyContin Voucher Physician ROI Analysis v5.pptx	PPLPC022000360340
2010	Purdue OxyContin Physician ROI Analysis 20100825.xls	PPLPC022000360341
2010	OxyContin ROI Program Analysis	PPLPC029000366545
2010	Purdue OxyContin Co-Pay Card Impact Analysis v5.pptx	PPLPC029000366546
2012	2013 Sales and Marketing Budget Presentation	PPLP004148463
2012	2013 Sales and Marketing Budget Presentation	PPLP004148463

2016	OxyContin Experience Analysis_20161031- dd.pptx	PPLP003409772
2016	OxyContin Experience Analysis_20161129 final.pptx	PPLP003409800
2013	OxyContin_Vignette_final.pptx	PPLP003410175
	Butrans_Vignette_final.pptx	PPLP003408733
	Many Faces of Pain Plan to Sustain Value and Exec. Summary 4-	PPLPC009000087636
12/7/2000	Sales Bulletin - PAP Survey Public Relations Program	SHC-000007110
2001	Marketing and Sales Public Affairs	PDD9316728862
2002	Marketing and Sales Public Affairs	PDD9316729260
2006	Association Strategy Team 3/1/2006	PPLPC022000095131
2011	Combined Presentation Conference ROI Jan 24.pptx	PPLP003408756
2011	Combined Presentation Conference ROI Jan 25 Dual Control.pptx	PPLP003408872
2012	Forecasting, Analytics & Market Research (FAMR), Conference ROI (Return on Investment), AAPA (May) - Butrans, OxyContin, Intermezzo, Monthly TRx: Nov 2011 thru Aug 2012	PPLP003407507
2012	ACP Convention ROI.pptx	PPLP003407581
2012	Butrans Conference Profile2 Mar 22 2012.pptx	PPLP003407929
2012	OxyContin AAPM AAPF Conference Feb 6 2012.pptx	PPLP003409733
2012	Pri-Med Dual Control Oxy_Jan 17 2012.pptx	PPLP003410236
2013	Pain week_equ_TRx_08122013_final v3.pptx	PPLP003410190
undated	Partners Against Pain Media Campaign Update	PDD1502324678
	Combined Presentation Conference ROI Jan 25 Control Separated.pptx	PPLP003408797
	Pri-Med Dual Control Oxy.ppt	PPLP003410223
	Primedwest Convention ROI_v2.pptx	PPLP003410248

YEAR	TEVA	BEG BATES NUMBER
2003	2003 Pyfer Performance Summary	TEVA_MDL_A_13619691
2008	Executive Summary - ROI - Q4 07 Report.ppt	TEVA_MDL_A_01543547
2008	ROI Email between internal employees	TEVA_MDL_A_02936598
2008	Fentora 2008 Brand Plan	TEVA_MDL_A_08978097
2008	Board of Directors Meeting, 10-23-2008	TEVA_CAOC-00463853
2009	Fentora marketing briefing	TEV-FE00109189
2010	Fentora Promotional Response Marketing Mix Recommendation	TEV_FE00114124
2010	Fentora Promotional Response Impact	TEVA_MDL_A_00556014
2010	Fentora Promotional Response Study: Impact Assessment Discussion	TEV_FE00111970
2010	FENTORA MMix Recommendation 082010 v2.0.pptx	TEVA_MDL_A_02216958
2010	Fentora Promotional Response Marketing Mix Recommendation	TEV_FE00114124
2010	Fentora Promotional Response Study, Impact Assessment Discussion	TEVA_MDL_A_00556014
2010	FENTORA MMix Recommendation 082010 v2.0.pptx	TEVA_MDL_A_02216958
2010	Untitled [Fentora history and analysis]	TEV_FE00031248
2011	Fentora Marketing Mix Analysis Summary	TEVA_MDL_A_02473101
2012	FENTORA Historical Impact Review	TEVA_MDL_A_01205575
2012	11-5-2012 Fentora marketing mix analysis refresh: Impact assessment findings review	TEVA_MDL_A_00499028
2012	11-13-2012 Fentora marketing mix analysis refresh: Impact assessment findings review	TEVA_MDL_A_00498935
2012	06-28-12 FENTORA Marketing Mix Review v2.0 FINAL.pptx	TEVA_MDL_A_02349490
2014	2014 Teva Portfolio Mix Planning Preliminary Recommendations by ZS Associates (July 29, 2013)	TEVA_MDL_A_00886031
2014	NASM 2014 Marketing Mix Recommendation Summary v1 0 (2).pptx	TEVA_MDL_A_02553534
2006	2006 2Q Medical Information Survey Results	TEVA_MDL_A_02325010
2008	FAST Team Meeting Slides	TEVA_MDL_A_00368380
2009	Fentora 2009 brand plan	TEVA_CAOC-00471536
2011	ROO Competitive Intelligence and REMS Implementation Market Research	TEVA_MDL_A_02241478
2006	Email for Robert Roche to Jerri Ann Thatcher re effective marketing of Actiq due to refocusing of the marketing strategy	TEVA_MDL_A_02217508
2008	Fentora 2008 Strategic Meeting - Marketing Research Presentation	TEVA_MDL_A_00375035
2009	Fentora marketing briefing	TEV-FE00109189
2010	Untitled [Manager's Meeting, Chicago]	TEV-FE00112363
2010	Fentora Promotional Response Study: Impact Assessment Discussion	TEV_FE00111970
2011	FENTORA 2011 Promotion Response Summary.pptx	TEVA_MDL_A_02470115
2011	Fentora PCS managers meeting, sales performance evaluation	TEVA_MDL_A_00555228
2012	Fentora marketing and sales	TEVA_CAOC_00707632_Highly Confidential
ALL	ROI Powerpoints [see above]*	
2005	Fentanyl 2005-2006 marketing plan	TEVA_MDL_A_00363180
2010	Pain franchise quarterly staff meeting 9-15-01: External expert alliance update	TEVA_CAOC_00684247

2010	Fentora Promotional Response Study: Impact Assessment Discussion [PDF]	TEV_FE00111970
2010	Fentora Promotional Response Study: Impact Assessment Discussion (powerpoint)	TEVA_MDL_A_00554864
2011	Fentora Marketing Mix Analysis Summary	TEVA_MDL_A_02473101
2011	Cephalon Medical Education 2011 Planning - Pain, November 2010	TEVA_MDL_A_01397431_Highly Confidential
2016	Medical and Patient Education Platforms 2016.	TEVA_MDL_A_02483004
2017	Spreadsheet of payments to KOLs 2009-2016	TEVA_MDL_A_00553218
2004	12-16-2004 Board of Directors Meeting	TEVA_CAOC-00459460
2005	Fentanyl 2005-2006 marketing plan	TEVA_MDL_A_00363180
2006	BTP Awareness Trial and Usage (ATU) Slides	TEVA_MDL_A_00730456
2006	BTP Awareness Trial and Usage (ATU) Slides	TEVA_MDL_A_00730456
2009	Fentora 2009 brand plan	TEVA_CAOC-00471536
2010	1-5-2010 draft: Fentora 2011 brand plan	TEVA_MDL_A_00500834
2010	Fentora Promotional Response Study: Impact Assessment Discussion	TEV_FE00111970
2010	Fentora Promotional Response Study: Impact Assessment Discussion	TEV_FE00111970
2010	Fentora Promotional Response Marketing Mix Recommendation	TEV_FE00114124

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Report of Matthew Perri III in Case no. 17-OP-45004 (N.D. Ohio) and Case No. 18-OP-45090 (N.D. Ohio)

Confidential and Subject to Protective Order

#### Schedule 16: Co-Promotional Marketing with Distributor Defendants



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DocDate	DocTitle	Bates
5/8/2018	20170714_Depomed_ABC Order_SOW_ABSC.pdf	ABDCMDL00002126
5/8/2018	20170917_Purdue_ABC The Link Fully Executed_ABSC.pdf	ABDCMDL00002128
6/10/2016	Mallinckrodt Statement Of Work &8K with AB Signed 06.10.pdf	ABDCMDL00002141
2017	20170917_Purdue_ABC The Link Fully Executed_ABSC.pdf	ABDCMDL00002830
12/6/2013	HDMA 12.11.2013 Task Force Agenda.doc	ABDCMDL00002916
6/20/2012	Actavis Master Distribution Services Agreement 01.01.2012-12.31.2014 (see para. 13).PDF	ABDCMDL00043355
11/10/2017	Allergan Sales LLC Distribution Services Agreement 10.01.2005-09.30.2007 (auto renew) (see para.	ABDCMDL00043412
8/20/2007	Endo Pharmaceuticals Distribution Services Agreement 01.01.2007-12.31.2007 (see para. 12).PDF	ABDCMDL00043504
2012-2014	Purdue Pharma Authorized Distributor Agreement 10.01.2012-09.30.2014 (see para. 35).pdf	ABDCMDL00043639
11/10/2017	Purdue Pharma Distribution Performance Agreement 10.01.2012-09.30.2014 (see para. 17).pdf	ABDCMDL00043676
2006-2009	Purdue Pharma Distribution Service Agreement 04.01.2006-03.31.2009 (see para. 12.6).pdf	ABDCMDL00043699
11/10/2017	Purdue Pharma Logistics Services Agreement (NDC agreement) 11.05.2015-10.31.2016 (see para.	ABDCMDL00043723
11/10/2017	Teva Master Distribution Services Agreement 01.01.2012-12.31.2014 (see para. 13).pdf	ABDCMDL00043880
5/30/2018	FY11 ABDC Plan Presentation.pptx	ABDCMDL00169851
8/20/2013	RVP email 7 1 13.docx	ABDCMDL00288026
8/26/2013	Sales Talking Points 7 1 13.docx	ABDCMDL00309535
7/1/1905	"Stand Alone Offer"	Acquired_Actavis_00190414
2/8/2010	HD Smith and Actavis Fully Executed Agreement - Fentanyl Patch	Acquired_Actavis_00230411
7/1/1905	Letter Agreement re: Pricing	Acquired_Actavis_00230619
6/29/1905	Letter Agreement re: Pricing	Acquired_Actavis_00234108
6/29/1905	Letter Agreement re: Pricing	Acquired_Actavis_00234153
6/30/1905	Letter Agreement re: Pricing	Acquired_Actavis_00234215
7/1/1905	Letter Agreement re: Pricing	Acquired_Actavis_00234899
7/3/1905	Amendment to Distribution Agreement	Acquired_Actavis_00239873
7/1/1905	"Stand Alone Offer"	Acquired_Actavis_00391845
7/1/1905	"Stand Alone Offer"	Acquired_Actavis_00391915
2013	Actavis Watson Pharma Inc and Purdue Pharma Quality Agreement 24APR2014.doc	Acquired_Actavis_00406813
7/4/1905	Amendment to Distribution Agreement	Acquired_Actavis_00478686
7/4/1905	Amendment to Distribution Agreement	Acquired_Actavis_00479774
7/4/1905	Amendment to Distribution Agreement	Acquired_Actavis_00479798
7/3/1905	Amendment to Distribution Agreement	Acquired_Actavis_00479849
7/3/1905	Amendment to Distribution Agreement	Acquired_Actavis_00480475
7/3/1905	Amendment to Distribution Agreement	Acquired_Actavis_00480589
7/3/1905	Amendment to Distribution Agreement	Acquired_Actavis_00480596
7/4/1905	Generic Rx Pricing Agreement	Acquired_Actavis_00480736
7/4/1905	Amendment to the Purchasing Agreement	Acquired_Actavis_00481310
7/2/1905	Amendment to Pricing Agreement	Acquired_Actavis_00482380
7/3/1905	Generic Rx Pricing Agreement	Acquired_Actavis_00485386
8/27/2009	2008-10McK-OS_r29Fentanyl_m.pdf	Acquired_Actavis_00669723
7/1/1905	"Stand Alone Offer"	Acquired_Actavis_00673511
7/3/1905	Agreement	ACTAVIS0213242
7/4/1905	First Amendment to the Service Agreement	ACTAVIS0213253
7/4/1905	Amendment #2 to the Service Agreement	ACTAVIS0213255
10/22/2012	img238.pdf	ACTAVIS0220735
7/4/1905	Kadian RepOnCall Program Work Order No.2	ACTAVIS0247778
10/12/2011	RE: Cardinal Oxymo	ACTAVIS0342348
6/29/1905	Kadian Multi-use Co-Pay Reduction Program Customer Agreement	ACTAVIS0586195
7/3/1905	Letter Agreement for Growth Incentive (rebate) Program	ACTAVIS0595537
2/17/2011	Marketing Proposal prepared for Actavis by Kristine Fidler	ACTAVIS0600353
3/24/2009	Exhibit A Actavis Kadian LLC/ Cardinal Health 105, Inc. Specialty Pharmaceutical Services Operating	ACTAVIS0628811
7/1/1905	Amendment No.1 to Master Services Agreement	ACTAVIS0831154
7/1/1905	Master Agreement for Services	ACTAVIS0831158
7/4/1905	Kadian RepOnCall Program Work Order No.1	ACTAVIS1025532
7/1/1905	Third Amendment User-Customer Agreement For AMA Physician Professional Data	ACTAVIS1032430
10/18/2014	Marketing Agreement - Statement of Work	ALLERGAN_MDL_00016971
7/4/1905	Gemic Volume Incentive Rebate Agreement	ALLERGAN_MDL_00502271
7/4/1905	Amendment to NAVIPPRO Founder and Services Agreement	ALLERGAN_MDL_00637048
7/1/1905	Contract Sales Force Agreement	ALLERGAN_MDL_00988613
7/4/1905	First Amendment to the Distribution Services Agreement	ALLERGAN_MDL_01006488
7/1/1905	First Amendment to the Distribution Services Agreement	ALLERGAN_MDL_01006518
7/4/1905	Second Amendment to the Distribution Services Agreement	ALLERGAN_MDL_01006526
6/30/1905	Distribution Services Agreement	ALLERGAN_MDL_01006528
6/30/1905	Amendment #1 to the Wholesale Distribution Services Agreement	ALLERGAN_MDL_01006551
7/1/1905	Third Amendment to the Wholesale Distribution Services Agreement	ALLERGAN_MDL_01006559
6/30/1905	Wholesale Distribution Services Agreement	ALLERGAN_MDL_01006566
6/30/1905	Amendment #1 to the Wholesale Distribution Services Agreement	ALLERGAN_MDL_01006581
7/1/1905	Third Amendment to the Wholesale Distribution Services Agreement	ALLERGAN_MDL_01006585
6/29/1905	Wholesale Distribution Services Agreement	ALLERGAN_MDL_01006594
6/29/1905	Amendment #1 to the Wholesale Distribution Services Agreement	ALLERGAN_MDL_01006622
7/1/1905	Second Amendment to the Distribution Services Agreement	ALLERGAN_MDL_01006626
6/29/1905	Wholesale Distribution Services Agreement	ALLERGAN_MDL_01006634
6/29/1905	Amendment #1 to the Wholesale Distribution Services Agreement	ALLERGAN_MDL_01006649
6/30/1905	Amendment #2 to the Wholesale Distribution Services Agreement	ALLERGAN_MDL_01006653
7/1/1905	Third Amendment to the Wholesale Distribution Services Agreement	ALLERGAN_MDL_01006655
7/1/1905	Fourth Amendment to the Wholesale Distribution Services Agreement	ALLERGAN_MDL_01006662
6/29/1905	Wholesale Distribution Services Agreement	ALLERGAN_MDL_01006667
6/29/1905	Amendment #1 to the Wholesale Distribution Services Agreement	ALLERGAN_MDL_01006681
7/1/1905	Third Amendment to the Wholesale Distribution Services Agreement	ALLERGAN_MDL_01006689
6/29/1905	Wholesale Distribution Services Agreement	ALLERGAN_MDL_01006696
6/30/1905	Amendment #1 to the Wholesale Distribution Services Agreement	ALLERGAN_MDL_01006710
6/30/1905	Amendment #2 to the Wholesale Distribution Services Agreement	ALLERGAN_MDL_01006714
7/1/1905	Third Amendment to the Wholesale Distribution Services Agreement	ALLERGAN_MDL_01006717
6/29/1905	Wholesale Distribution Services Agreement	ALLERGAN_MDL_01006724
7/1/1905	Letter Agreement Assigning Wholesaler Distribution Services Agreement	ALLERGAN_MDL_01038422
7/2/1905	Distribution Services Agreement	ALLERGAN_MDL_01041190
6/29/1905	Distribution Services Agreement	ALLERGAN_MDL_01082315
7/1/1905	First Amendment to Distribution Services Agreement	ALLERGAN_MDL_01082342
7/1/1905	Kadian Co-Pay Assistance Program/Outreach Program	ALLERGAN_MDL_01100819

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7/1/1905	Medi-Cal Average Manufacturer Price Supplement Drug Rebate Agreement	ALLERGAN_MDL_01145005
7/2/1905	Amendment Number One Medi-Cal Drug Rebate Agreement	ALLERGAN_MDL_01145014
7/3/1905	Amendment to NAVIPPRO Founder and Services Agreement	ALLERGAN_MDL_01161756
7/1/1905	Commercial Rebate Agreement	ALLERGAN_MDL_01257021
7/1/1905	Commercial Rebate Agreement	ALLERGAN_MDL_01257071
7/1/1905	Commercial Rebate Agreement	ALLERGAN_MDL_01257094
7/1/1905	Pharmaceutical Product Rebate Agreement	ALLERGAN_MDL_01257706
7/1/1905	Letter to Cardinal Health regarding Distribution Services Agreement	ALLERGAN_MDL_01257806
7/1/1905	Distribution Services Agreement (Branded Rx Products)	ALLERGAN_MDL_01257902
7/7/1905	Branded Inventory Management Agreement	ALLERGAN_MDL_01387684
7/7/1905	Branded Inventory Management Agreement	ALLERGAN_MDL_01387717
7/7/1905	Branded Inventory Management Agreement	ALLERGAN_MDL_01387762
6/27/1905	Warehouse and Logistics Agreement	ALLERGAN_MDL_01415345
7/1/1905	Distribution Services Agreement	ALLERGAN_MDL_01415932
7/1/1905	Master Agreement for Services	ALLERGAN_MDL_01415978
7/3/1905	Master Services Agreement	ALLERGAN_MDL_01417477
7/2/1905	Amendment to NAVIPPRO Founder and Services Agreement	ALLERGAN_MDL_01435701
7/1/1905	Fourth Amendment to the Wholesale Distribution Services Agreement	ALLERGAN_MDL_01437843
7/1/1905	Fourth Amendment to the Wholesale Distribution Services Agreement	ALLERGAN_MDL_01437848
7/1/1905	Fourth Amendment to the Wholesale Distribution Services Agreement	ALLERGAN_MDL_01437853
7/4/1905	Master Services Agreement	ALLERGAN_MDL_01447720
6/29/1905	First Amendment to Service Agreement	ALLERGAN_MDL_01447758
7/1/1905	Second Amendment to Service Agreement	ALLERGAN_MDL_01447763
7/1/1905	Third Amendment to Service Agreement	ALLERGAN_MDL_01447774
7/1/1905	Fourth Amendment to Service Agreement	ALLERGAN_MDL_01447783
7/4/1905	Master Services Agreement	ALLERGAN_MDL_01447821
7/4/1905	Worder Order No. Acta-0001	ALLERGAN_MDL_01447837
6/23/1905	Rebate Agreement	ALLERGAN_MDL_01449773
6/30/1905	PBM Standard Terms & Conditions	ALLERGAN_MDL_01449823
	Acetasol Agreement Letter.pdf	ALLERGAN_MDL_01455902
	38562 Agreement 4-1-11.pdf	ALLERGAN_MDL_01455906
6/30/1905	Rebate Agreement Pharmacy Benefits Management Company	ALLERGAN_MDL_01458269
2004	Service Agreement	ALLERGAN_MDL_01469405
2009	Letter Agreement Assigning Core Distribution Agreement	ALLERGAN_MDL_01469742
2006	Core Distribution Agreement	ALLERGAN_MDL_01474219
2009	Assignment of Core Distribution Agreement	ALLERGAN_MDL_01474230
2008	Distribution Services Agreement	ALLERGAN_MDL_01474232
2009	Letter Agreement Assigning Distribution Services Agreement	ALLERGAN_MDL_01474251
2009	Exclusive Distribution Agreement, Exhibit A Operating Guidelines	ALLERGAN_MDL_01474455
2006	NAVIPPRO Founder and Services Agreement	ALLERGAN_MDL_01474561
2009	Sales Service Agreement	ALLERGAN_MDL_01481089
2010	First Amendment to Distribution Management Agreement	ALLERGAN_MDL_01484660
2010	Distribution Management Agreement	ALLERGAN_MDL_01484664
2010	Distribution Management Agreement	ALLERGAN_MDL_01484682
2013	Distribution Management Agreement	ALLERGAN_MDL_01484708
2011	Distribution Management Agreement	ALLERGAN_MDL_01484749
2010	First Amendment to the Brand Distribution Agreement	ALLERGAN_MDL_01608331
2009	Distribution and Supply Agreement	ALLERGAN_MDL_01638318
6/27/1905	Distribution Services Agreement	ALLERGAN_MDL_01678674
7/5/1905	Master Purchase Base Rebate and Annual Volume Purchase (GP) Rebate Agreement	ALLERGAN_MDL_01681861
7/1/1905	Amendment to NAVIPPRO Founder and Services Agreement	ALLERGAN_MDL_01774746
6/30/1905	Amendment to NAVIPPRO Founder and Services Agreement	ALLERGAN_MDL_01775055
6/29/1905	Amendment of Core Distribution Agreement	ALLERGAN_MDL_01797354
7/3/1905	Strategic Redistribution Center and Core Distribution Agreement	ALLERGAN_MDL_01860474
7/1/1905	Adjudicated Discount Coupon Program Agreement	ALLERGAN_MDL_01890372
7/1/1905	Services Agreement	ALLERGAN_MDL_01890807
7/1/1905	Distribution Services Agreement	ALLERGAN_MDL_01972055
7/4/1905	Amendment #2 to Master Agreement for Services	ALLERGAN_MDL_02182377
7/7/1905	Amendment to Distribution Services Agreement	ALLERGAN_MDL_02184119
7/7/1905	Amendment to Distribution Services Agreement	ALLERGAN_MDL_02184136
7/10/1905	Distribution Services Agreement	ALLERGAN_MDL_02184171
6/29/1905	Wholesale Distribution Services Agreement	ALLERGAN_MDL_02534282
6/29/1905	Amendment #1 to the Wholesale Distribution Services Agreement	ALLERGAN_MDL_02534394
6/29/1905	Amendment #1 to the Wholesale Distribution Services Agreement	ALLERGAN_MDL_02534490
6/30/1905	Medicare Part D Rebate Agreement	ALLERGAN_MDL_02535118
7/5/1905	Amendment to Brand Distribuiton Services Agreement	ALLERGAN_MDL_02568877
7/1/1905	First Amendment to Distribution Services Agreement	ALLERGAN_MDL_02581302
6/25/1905	Generic Wholesale Service Agreement	ALLERGAN_MDL_02581893
6/29/1905	Wholesale Distribution Services Agreement	ALLERGAN_MDL_02582243
7/1/1905	Commercial Rebate Agreement	ALLERGAN_MDL_02582519
6/28/1905	Master Service Agreement	ALLERGAN_MDL_02758696
7/2/1905	Amendment No. 7 to Master Services Agreement	ALLERGAN_MDL_02758704
7/3/1905	Amendment No. 9 to Master Services Agreement	ALLERGAN_MDL_02758706
7/4/1905	Amendment No. 10 to Master Services Agreement	ALLERGAN_MDL_02758708
6/29/1905	Amendment No. 2 to Master Services Agreement	ALLERGAN_MDL_02758712
6/30/1905	Amendment No. 3 to Master Services Agreement	ALLERGAN_MDL_02758713
7/1/1905	Amendment No. 5 to Master Services Agreement	ALLERGAN_MDL_02758714
2010	Amendment No. 6 to Master Services Agreement	ALLERGAN_MDL_02758738
2007	Amendment No. 1 to Warehouse Logistics Services Agreements	ALLERGAN_MDL_02758740
2008	Rebate Agreement	ALLERGAN_MDL_02759028
2006	Rebate Agreement	ALLERGAN_MDL_02759064
2005	Rebate Agreement	ALLERGAN_MDL_02759101
	Constantine Cannon Agreement Purdue 1Feb2012.pdf	ALLERGAN_MDL_02823110
2011	Amendment No. 8 to Master Services Agreement	ALLERGAN_MDL_02823631
2013	Third Amendment to the Brand Distribution Services Agreement	ALLERGAN_MDL_02963237
2007	Brand Distribution Services Agreement	ALLERGAN_MDL_02964512
2009	Rebate Agreement	ALLERGAN_MDL_03190126
2009	Commercial Rebate and Administrative Fee Agreement	ALLERGAN_MDL_03190248
5/9/2018	Allergan DSA glw redline MAM 050318 2.docx	ALLERGAN_MDL_03744222

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5/17/2016	160516 2205 Anda Overview for Teva (19May2016)_DRAFT.pptx	Anda_Opioids_MDL_0000003286
1/1/2015	Zohydro ER	CAH_MDL_PRIORPROD_AG_0009362
	Zubsolve advert	CAH_MDL_PRIORPROD_AG_0009363
	Zohydro ER advert	CAH_MDL_PRIORPROD_AG_0009364
10/1/2015	biodelivery Sciences advert to pharmacist	CAH_MDL_PRIORPROD_AG_0009365
1/1/2016	Prepare for the season with Hycofenix and Flowtuss	CAH_MDL_PRIORPROD_AG_0009366
	SUBSYS sublingual spray is available through your wholesaler	CAH_MDL_PRIORPROD_AG_0009368
1/1/2016	IONSYS Now Available for Order	CAH_MDL_PRIORPROD_AG_0009369
4/13/2006	Day Two Full.ppt	CAH_MDL_PRIORPROD_DEA07_00324320
4/12/2006	Apothecary Shoppe Proposal 4-06l.doc	CAH_MDL_PRIORPROD_DEA07_02637977
	55. Letter from Whalen to Farley (Jan. 6, 2011)	CAH_MDL_PRIORPROD_DEA12_00011853
5/1/2014	RE: Adjustments made can you take a quick look (slides to help CO's w/DEA cyclic visits)	CAH_MDL2804_00012953
5/9/2012	Re: Franck's EPS	CAH_MDL2804_00125545
5/12/2016	Sales Tracker FY16.xlsx	CAH_MDL2804_00131613
6/3/2016	FW: Cardinal/Unexecuted (2 SOWs)	CAH_MDL2804_00131617
10/21/2015	Teva_Cardinal Health Statement of Work_VantrelaER_Fully Executed_102115.pdf	CAH_MDL2804_00131620
2/1/2018	Month-End Reserves_BDG.xls	CAH_MDL2804_00131648
5/23/2018	Cardinal Health_Manufacturer Marketing Services_2017(DSA).pdf	CAH_MDL2804_00131705
1/19/2011	FW: Test Launch: Your ideas wanted - Essential Information for Cardinal Health independent	CAH_MDL2804_00133454
7/19/2012	Distribution Services Agreement Between Endo and Cardinal (20120719095237435.pdf)	CAH_MDL2804_00133712
9/24/2012	RE: Marketing Programs for New Product Launch	CAH_MDL2804_00134146
9/24/2012	KAD-088 Kadian Pharmacy Flyer 09-24-12.pdf	CAH_MDL2804_00134155
12/3/2009	RE: Service Flash- KADIAN	CAH_MDL2804_00134160
11/22/2010	FW: Additional Risk Information	CAH_MDL2804_00134169
6/11/2009	Flat Fee Billing - Actavis	CAH_MDL2804_00134247
2/17/2011	Actavis_Marketing Opportunities_2.11.pdf	CAH_MDL2804_00134271
2/17/2011	PHN DMA Overview Q1 2011.pdf	CAH_MDL2804_00134275
2/17/2011	PHN Planning Calendar 2011.pdf	CAH_MDL2804_00134278
2/17/2011	PHN_ROI.pdf	CAH_MDL2804_00134279
3/22/2017	RE: DSA Points	CAH_MDL2804_00135061
3/22/2017	Par_Marketing Agreement_eConnection and Order Express_Fully Executed_032217.pdf	CAH_MDL2804_00135065
10/6/2011	Ab9d368f6-166f-4dab-8b3a-5434759d28fe.TIF	CAH_MDL2804_00280795
11/14/2016	RE: Discussion w/ Bob at Purdue	CAH_MDL2804_00798124
10/22/2010	Email regarding CVS Talking Points	CAH_MDL2804_01103874
9/7/2017	RE: Pharma Analytics Council - FY18 Q1	CAH_MDL2804_01303315
		CAH_MDL2804_02100389
3/18/2014	PowerPoint: Branded Strategic Sourcing EDI 852/867 Requirements	CAH_MDL2804_02103500
3/11/2014	Metrics/Penalties	CAH_MDL2804_02103526
		CAH_MDL2804_02376356
		CAH_MDL2804_02890720
		CAH_MDL2804_02890722
		CAH_MDL2804_02890818
		CAH_MDL2804_02897931
		CAH_MDL2804_02897933
		CAH_MDL2804_02957702
		CAH_MDL2804_02957760
		CAH_MDL2804_02959011
		CAH_MDL2804_02959380
6/1/2017	Statement of Work	CAH_MDL2804_02959381
		CAH_MDL2804_02959389
		CAH_MDL2804_02959407
4/26/2017	Industry-Report-2017-CSI.pdf	DDM00195188
1/13/2014	Emailing: PIC%20White%20Paper	DDM00210989
1/20/2016	Cardinal Health Hospital Quality at Home - Mobile Display	DDM00417673
2/20/2014	RE: Cardinal Health Opana ER Generic Flyer	ENDO-CHI_LIT-00135229
2008	DSA Wholesaler Stocking Incentive Letter	ENDO-CHI_LIT-00164275
2008	Non-DSA Wholesaler Stocking Incentive	ENDO-CHI_LIT-00164276
2/20/2014	Opana ER / EN3288 Repackaging Opportunity 1 of 2	ENDO-CHI_LIT-00187878
2/20/2014	USPP Overview 2011 V1.pps	ENDO-CHI_LIT-00187879
2/28/2014	Cardinal Health_Manufacturer Marketing Services_2012a (DSA).pdf	ENDO-CHI_LIT-00470118
3/18/2013	McKesson Specialty Distributor Agreement - 8 1 11 - 7 31 12.pdf	ENDO-OPIOID_MDL-01056164
2017	EXTERNAL: RE: Purdue-Endo Data Sharing Agreement and Inflexion-Purdue Agreement	ENDO-OPIOID_MDL-01515993
2017	Purdue Endo Data Sharing agreement.pdf	ENDO-OPIOID_MDL-01515995
7/8/1905	8th Ammendment to Distribution Services Agreement between Endo and Amerisourcebergen and others	ENDO-OPIOID_MDL-02061319
2007	DSA between Endo and ABC	ENDO-OPIOID_MDL-02365734
2006	DIstribution Management Agreement between Endo and Kinray	ENDO-OPIOID_MDL-02365855
7/1/1905	DSA with McKesson	ENDO-OPIOID_MDL-02385688
2013	5th Amendment to DSA between Endo and ABC	ENDO-OPIOID_MDL-02400003
6/28/1905	Pharmaceutical Distribution Services Agreement between Endo and McKesson	ENDO-OPIOID_MDL-02400078
2007-2012	1st-5th Amendments to DSA between Endo and McKesson	ENDO-OPIOID_MDL-02404870
2014	Pharmaceutical Distribution Services Agreement between Endo and McKesson	ENDO-OPIOID_MDL-02411316
7/8/1905	2nd Amendment to Pharmaceutical Distribution Services Agreement between Endo and McKesson	ENDO-OPIOID_MDL-02422818
2007	Distribution Services Agreement between Endo & Cardinal Health	ENDO-OPIOID_MDL-02784844
2007	Distribution Management Agreement between Endo & H.D. Smith Wholesale Drug Co.	ENDO-OPIOID_MDL-02784886
2006	Distribution Services Agreement between Endo & McKesson	ENDO-OPIOID_MDL-02784907
4/15/2013	Cardinal_Endo SOW_Revised041513.doc	EPI000869246
10/18/2017	Abuse-Deterrent Formulation Now Available to Order	HBC_MDL00030631
3/7/2013	2013.03.02 All Inclusive Notes.ppt	HBC_MDL00068314
3/18/2014	ZohydroER (2).doc	HBC_MDL00136253



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3/18/2014	ZohydroER (2).doc	HBC_MDL00136254
3/27/2018	Pain relief in an abuse-deterrent formulation: Coverage update	HBC_MDL00142990
11/13/2017	Are You Shocked With This Newly Available Abuse-Deterrent Morphine Formulation?	HBC_MDL00163203
2/26/2010	Email chain between Crowley & Euson re: coordinating protocols	HDS_MDL_00091785
11/15/2010	Re: Customer visits Confirmed - Robert Jacobson, Southshore Pharmacy	HDS_MDL_00096002
7/4/1905	AmeriSource Bergen Distribution Services Ag_Insys_FE_01-01-2012.pdf	INSYS-MDL-000024172
2012	ICS-AmerisourceStorageContract.pdf	INSYS-MDL-000024219
2016	McKesson_First Amend_RDC And Core Distribution Agreement_FE_04 01 16.pdf	INSYS-MDL-000024281
7/4/1905	INSYS AKORN SIGNED AGREEMENT.PDF	INSYS-MDL-000153613
2013	INSYS THERAPEUTICS CPCS REBATE AGRMNT V1 012413.DOCX	INSYS-MDL-00023851
7/5/1905	INSYS THERAPEUTICS CPCS REBATE AGRMNT V1 012413.DOCX	INSYS-MDL-000238512
7/2/1905	DDN-INSYS SERVICE AGREEMENT V2.DOCX	INSYS-MDL-000250495
7/4/1905	NSYS - COMM REB AGRMT (2012)JP.DOC	INSYS-MDL-000262561
2012	NSYS - COMM REB AGRMT (2012)JP.DOC	INSYS-MDL-00026261
2012	Exclusive Distribution Contract between Cardinal Health 105 and Insys	INSYS-MDL-000262625
7/4/1905	2012 - APRIL 4 - DEPT HEALTH AND HUMAN SVCS PHARMA PRICING.PDF	INSYS-MDL-000262826
2012	Draft Service Agreement between Source Healthcare Analytics (Wolters Kluwer) and Insys	INSYS-MDL-000263023
2012	2012 - APRIL 4 - DEPT HEALTH AND HUMAN SVCS PHARMA PRICING.PDF	INSYS-MDL-000268
7/4/1905	GOVT PRICING SOP.PDF	INSYS-MDL-000426921
2012	GOVT PRICING SOP.PDF	INSYS-MDL-0004291
2011	DDN-INSYS THERAPEUTICS RFI.DOC	INSYS-MDL-00044304
7/3/1905	DDN-INSYS THERAPEUTICS RFI.DOC	INSYS-MDL-000443304
7/5/1905	INSYS ORX CM AMD 1 (HEALTHCARE EXCHANGE) TO CO 093013.DOCX	INSYS-MDL-001041081
2013	INSYS ORX CM AMD 1 (HEALTHCARE EXCHANGE) TO CO 093013.DOCX	INSYS-MDL-001041811
2012	SciMedica Consultant Agreement Template with Insys	INSYS-MDL-001729686
2012	Email regarding services from SciMedica	INSYS-MDL-001899057
2012	ICS Statement of Work	INSYS-MDL-003375598
2016	Authorized Retail Purchase Agreement between Insys and Linden Care	INSYS-MDL-006857115
2015	Authorized Retail Agreement between Insys and Avella	INSYS-MDL-006867199
5/2/2013	INSYS'S 2013 AGREEMENT-SIGNEDDSR.PDF	INSYS-MDL-006981639
12/8/2015	INSYS THERAPEUTICS ECONNECTION AGREEMENT 12082015.PDF	INSYS-MDL-007018994
10/19/2015	1SS14-26765 - HAMC - MARKETING COMMUNICATIONS OVERVIEW BROCHURE - FINAL WEB - 2015-04-21.PDF	INSYS-MDL-007103047
6/16/2015	INSYS THERAPEUTICS ECONNECTION SOW 5.14.15.PDF	INSYS-MDL-007689130
2012	RDC Authorized Distributor Agreement	INSYS-MDL-007738569
1/17/2014	INSYS 2014 AGREEMENT.PDF	INSYS-MDL-007795161
2012	Invoices	INSYS-MDL-008093658
2012	IMS	INSYS-MDL-008265005
7/4/1905	CHI-INSYS AMENDED QA DRAFT 03 14 16.DOC	INSYS-MDL-008618096
2012	CHI-INSYS AMENDED QA DRAFT 03 14 16.DOC	INSYS-MDL-00861866
	MMM BROCHURE_FIN1.PDF	INSYS-MDL-008625863
2012	HD Smith Authorized Distributor Agreement	INSYS-MDL-015027297
2012	Cardinal Health Developing Suppliers Program Distribution Services Agreement	INSYS-MDL-015027336
2012	ABC Distribution Services Agreement	INSYS-MDL-015027347
2012	Cardinal Health Amendment No. 1 to Developing Suppliers Program Distribution Services Agreement	INSYS-MDL-015027386
2012	HD Smith First Amendment to the Authorized Distributor Agreement	INSYS-MDL-015027431
2012	McKesson First Amendment to the Regional Distribution Center and Core Distribution Agreement	INSYS-MDL-015027437
2012	McKesson Corporation Regional Distribution Center and Core Distribution Agreement	INSYS-MDL-015027442
2012	McKesson Second Amendment to the Regional Distribution Center and Core Distribution Agreement	INSYS-MDL-015027455
2010	JCR-Ortho McNeil Janssen Contract	JAN00002627
2009	Statement of Work between Ortho-McNeil Janssen and Axiom Professional Health Learning	JAN00102489
2009	Statement of Work between Ortho-McNeil Janssen and Axiom Professional Health Learning	JAN00102895
2011	Statement of Work between Ortho-McNeil Janssen and Axiom Professional Health Learning	JAN00107101
2011	Statement of Work between Ortho-McNeil Janssen and Axiom Professional Health Learning	JAN00110032
1/15/2013	2012 Brand Investment Summary	JAN00119068
2007	American Pain Foundation letter to J&J appreciating the opportunity to contract to provide consultation	JAN-MS-00000200
2010	Ketchum Public Relations Contract for Let's Talk Pain PR activities	JAN-MS-00000252
7/3/1905	Consulting Agreement between the American Pain Foundation and Janssen	JAN-MS-00000255
2011	Amendment to Consulting Agreement between the American Pain Foundation and Janssen	JAN-MS-00000267
6/29/1905	Master Services Agreement for Public Relations and Communications Services between Ortho-McNeil and Ketchum, Inc.	JAN-MS-00000273
2008	Sponsorship Agreement between Conrad and Pricara	JAN-MS-00000373
12/19/2000	Ramiro's Memo.doc	JAN-MS-00237401
2003	Janssen Pharmaceutical Contracted Segment Reporting	JAN-MS-00247294
2009	Email about Omnicare and PharmERICA contract offers and Date Purchase agreement with PharmERICA	JAN-MS-00258904
2010	Marketing Sponsorship Agreement	JAN-MS-00264507
2011	Marketing Sponsorship Agreement	JAN-MS-00264557
1/21/2014	RE: Nucynta Strategy Meeting Notes	JAN-MS-00265887
2007	Email about Novation contract for Duragesic pricing	JAN-MS-00282058
2001	JOM Distribution Duragesic Contract Email	JAN-MS-00311161
2001	Agreement between McKesson and Janssen for Duragesic TrialScript Program	JAN-MS-00311286
2001	Pain Management Speakers Bureau Program Faculty Agreement	JAN-MS-00312432
11/11/2002	Molly budget Nov 8.xls	JAN-MS-00314091
2007	Quarterly Contract Expiration Report	JAN-MS-00316688
2008	Consulting Agreement with Heidi Jolson for Tapentadol IR DDMAC Mock Meeting	JAN-MS-00327168
2010	IMS-CRA Third Party Support User Agreement for the Use of AMA Physician Professional Data	JAN-MS-00332515
2010	Nucynta ER Speaker Direct Statement of Work NexGen	JAN-MS-00346719
7/2/1905	Nucynta ER NewsChannel Statement of Work NexGen	JAN-MS-00346721
7/2/1905	Nucynta Attendee NewsChannel Statement of Work NexGen	JAN-MS-00346722
7/14/2011	Nucynta Statement 07.14.11.xls	JAN-MS-00364569
2011	Marketing Sponsorship Agreement	JAN-MS-00398700
7/5/1905	Work Order for 2013 Nucynta ER Speakers Bureau	JAN-MS-00452454
2010	Services Agreement Proposal-ION and Centocor-OrthoBiotech (COBI)	JAN-MS-00453007
2011	Nucynta Institutional Contracting-GPO Contracting Update	JAN-MS-00464185
6/3/2011	NUCYNTA ER Wholesaler and Retail Pharmacy Programs June 2011.pptx	JAN-MS-00465772
2011	Institutional Group Purchasing Organization Contract Wins for Nucynta ER	JAN-MS-00466024
2009	Nucynta NewsChannel Statement of Work NexGen	JAN-MS-00472021

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2014	Work Order #6724 Pain Management Sales Team	JAN-MS-00576727
2016	Spreadsheet listing Rebate Contracts including rebates for Nucynta and Duragesic	JAN-MS-00586523
2010	Fentanyl Supply Agreement-Profit Sharing with Janssen-Sandoz spreadsheets	JAN-MS-00590979
2007	Institutional Business-Broadlane 2008 Bid	JAN-MS-00591708
2007	Institutional Business-Pact Contract Offer	JAN-MS-00591897
2014	Encompass Elements File Interface Agreement for JOM Pharmaceuticals	JAN-MS-00660491
2012	NA Pharma Contracts	JAN-MS-00664416
2015	Publication Agreement for Journal of Opioid Management	JAN-MS-00703260
2005	LTC Contracting Overview-Duragesic	JAN-MS-00777005
6/22/1905	Trial Script Program Agreement Between McKessonHBOC and Janssen	JAN-MS-00785302
1/5/2004	Duragesic 2003 Budget working doc.xls	JAN-MS-00788126
2003	Duragesic Sample Voucher Program-Addendum to the Master Agency Agreement between Janssen and McKesson	JAN-MS-00790229
10/13/2010	PRA Pharmacy Reimbursement 501264SMS.xls	JAN-MS-00811722
2008	Electronic Book Distribution Agreement	JAN-MS-00813961
		JAN-MS-00814133
2013	Proposed SOW for NexGen Rx Marketing for 2013 - Nucynta ER	JAN-MS-00827004
2012	Comprehensive Health (Wellcare) Nucynta ER MMA Offer	JAN-MS-00827021
2013	Proposed SOW for Decile Ten for 2013 - Nucynta	JAN-MS-00827159
2010	Nucynta PharmERICA Data Purchase Contracting & Pricing Application	JAN-MS-00863638
8/3/2010	RE: budget request: confirm assumptions	JAN-MS-00864381
8/3/2010	RE: Patient Assistance Programs	JAN-MS-00864385
2011	First Amendment to Schedule 4A TrialScript Program for Nucynta	JAN-MS-00864455
1/7/2011	McKESSON-2009_NucyntaLoyaltyScriptProgram(\$1.2M).pdf	JAN-MS-00865181
2010	Twelfth Amendment on LoyaltyScript Program Agreement-Nucynta	JAN-MS-00865205
2010	Thirteenth Amendment on LoyaltyScript Program Agreement-Nucynta	JAN-MS-00865207
2012	JPI FSS Contract Renewal	JAN-MS-00870821
2011	Prime Therapeutics Offer-Nucynta	JAN-MS-00871997
2013	Community Anti-Drug Coalitions of America Sponsorship Agreement	JAN-MS-00984287
2008	Project Order between Ortho-McNeil Pharmaceuticals and MedErgy Marketing	JAN-MS-01010465
2008	Project Order between Ortho-McNeil Pharmaceuticals and MedErgy Marketing	JAN-MS-01010485
7/5/1905	Work Order between Janssen and Decile Ten	JAN-MS-01051165
2012	Statement of Work Compas Janssen Nucynta ER Docalert Program and Formulary Flash Docalert Program	JAN-MS-01061062
2014	Nucynta and Nucynta ER Offers HCS Database	JAN-MS-01102477
2009	Booz and OMJPI Contract for FMV of Coupons and Vouchers	JAN-MS-01108099
9/28/2011	9 23 11 BUDGET SUMMARY.xls	JAN-MS-01114083
2008	NexGen Pain Management Speaker NewsChannel SOW	JAN-MS-01134659
2005	JOM Contract Expiration Report	JAN-MS-01137331
2009	JOM Data Integration Specifications	JAN-MS-01457353
2012	5 year agreement between Janssen and Inflexxion for the National Addictions Vigilance Intervention and Prevention Program (NAVIPPRO)	JAN-MS-01473353
2008	Outcomes Research Service Agreement	JAN-MS-01503575
2013	CVS Caremark Commercial Offer: Duragesic	JAN-MS-01976069
2004	Supply Agreement between Janssen and Sandoz	JAN-MS-01986350
2004	Contract Record of Sandoz and Janssen supply agreement for Duragesic	JAN-MS-01986363
2007	Novation-Acute Care Duragesic Offer	JAN-MS-02011377
2/6/2013	Imagine the Possibilities Pain Coalition: Meeting #2 (10.12.2011)	JAN-MS-02057431
2013	Work Order for Nucynta Resource Optimization 2013	JAN-MS-02352279
2010	Services Agreement between PriCara and National Association of School Nurses	JAN-MS-02406676
2010	Ketchum Public Relations Statement of Work for Pain Awareness Month-Nucynta videos	JAN-MS-02407791
2010	PharmERICA Data Purchase Agreement CPC slides	JAN-MS-02470897
2011	Work Order 4 Non-Enrollment LoyaltyScript Nucynta \$20 Coupon	JAN-MS-02474522
2011	Consulting agreement between OMJSA and David Brushwood for Consultant work on the Pain Coalition	JAN-MS-02669360
2006	Unexecuted Addendum to 2/2005 contract between J&J and Two Labs Marketing	JAN-MS-02757203
2003	Triple I Prescription Pad Agreement for Duragesic	JAN-MS-02758965
2002	Triple I Duragesic Integrated In-office Marketing Initiative	JAN-MS-02990122
2006	Long Term Care Pharmacy Agreement	JAN-MS-03028111
2018	IntegriChain Statement of Work Presented to Janssen Pharmaceuticals, Inc. for Controlled Substance Order Analytics	JAN-MS-03060712
6/29/1905	National Logistics Center Agreement between Cardinal and JOM	JAN-MS-05434691
8/1/2014	McKesson's Regulatory Program - East Team Meeting	MCKMDL00336347
10/2/2012	McKesson Manufacturer Marketing Product Promotional Agreement	MCKMDL00353261
10/5/2012	Exalgo RxBulletin Draft.docx	MCKMDL00353262
10/13/2016	McKesson Manufacturer Marketing Product Promotional Agreement	MCKMDL00353277
3/16/2011	McKesson Manufacturer Marketing Program Agreement	MCKMDL00353279
1/12/2011	Retail Weekly Wire Text_Jan 13 2011_RxFocus Butrans.doc	MCKMDL00353282
7/25/2010	McKesson Manufacturer Marketing Product Promotional Agreement	MCKMDL00353305
8/16/2010	OxyContin DirectRx Ad Screenshot 8-16-10.doc	MCKMDL00353308
8/20/2012	McKesson Manufacturer Marketing Prepared for: Purdue Pharma L.P. - RxPATROL	MCKMDL00353316
1/25/2012	McKesson Manufacturer Marketing Contract Product Promotional Agreement	MCKMDL00353368
1/24/2014	Wiley's Pharmacy Proposal Draft Update.pptx	MCKMDL00477110
8/28/2013	Marc's BR 14.pptx	MCKMDL00477748
1/18/2008	RE: PMIB 08-005 Purdue Frederick Company/OxyContin C/R Tablets 100's	MCKMDL00543462
8/29/2011	Archimedes SOW #2_signed 8-24-11.pdf	MCKMDL00648980
8/29/2011	NPO 370.pdf	MCKMDL00648982
10/25/2013	ECR Pharmaceuticals-Fax Blast Contract_signed 10.25.2013.pdf	MCKMDL00648983
11/11/2013	ECR Pharmaceuticals-Fax Blast Contract_signed 11.11.2013.pdf	MCKMDL00648984
11/26/2013	LORTAB Fax #2 McKesson final.pdf	MCKMDL00648985
1/3/2014	LORTAB-Fax3-McKesson_proof12-20.pdf	MCKMDL00648986
11/4/2013	LORTAB-Fax-McKesson_proof11-1.pdf	MCKMDL00648987
12/4/2013	NPO 2058.pdf	MCKMDL00648988
1/24/2014	NPO 2145.pdf	MCKMDL00648989
2/4/2013	ECR_TussiCaps_Fax Sheet_Mckesson_OUTPUT.pdf	MCKMDL00648990
1/28/2013	ECR-Tussicaps_Fax Blast Contract_signed 01 28 2013.pdf	MCKMDL00648991
1/31/2013	ECR-Tussicaps_Fax Blast Contract_signed 01 31 2013.pdf	MCKMDL00648992
3/12/2013	NPO 1502.pdf	MCKMDL00648993
9/19/2013	NPO 1890.pdf	MCKMDL00648994



7/11/2013	Orexo-Zubsolv_McKesson Marketing Programs Agreement_07 15 2013.docx	MCKMDL00648995
7/25/2013	Orexo-Zubsolv_McKesson Marketing Programs Agreement_signed 07 25 2013.pdf	MCKMDL00648996
8/27/2013	Zubsolv_DirectRx Ad.jpg	MCKMDL00648997
11/6/2013	Zubsolv_DirectRx Ad_Report_09.19.13.pdf	MCKMDL00648998
9/19/2013	Zubsolv_DirectRx Ad_Screenshot_09.19.13.pdf	MCKMDL00648999
9/3/2013	McKesson RxBulletin Zubsolv.htm	MCKMDL00649000
8/20/2013	Orexo logo.jpg	MCKMDL00649002
8/21/2013	orexo logo.png	MCKMDL00649003
9/3/2013	RxBulletin_Zubsolv_Text Only.pdf	MCKMDL00649004
8/8/2013	ZUBSOLV_McKesson RX Bulletin.pdf	MCKMDL00649007
10/4/2013	Zubsolv_RxBulletin_Report_09.17.13.pdf	MCKMDL00649008
8/7/2013	Decile Report - Orexo - Zubsolv - INTERNAL USE ONLY.xls	MCKMDL00649009
8/27/2013	Decile Report - Orexo - Zubsolv.xls	MCKMDL00649010
9/19/2013	NPO 1889.pdf	MCKMDL00649011
8/14/2013	Orexo_Zubsolv_RxFocus_Customer_List.xlsx	MCKMDL00649012
7/15/2013	Orexo-Zubsolv_RxFocus Agreement_07 15 2013.docx	MCKMDL00649013
7/25/2013	Orexo-Zubsolv_RxFocus Agreement_signed 07 25 2013.pdf	MCKMDL00649016
8/14/2013	Retail Weekly Wire Text_Aug 19 2013_RxFocus_Zubsolv.docx	MCKMDL00649019
8/7/2013	RxFoucs Autoship Decile Report - Orexo - Zubsolv.pdf	MCKMDL00649020
7/30/2012	Akrimax_Primlev Contract_Signed 07 30 2012.pdf	MCKMDL00649036
8/22/2012	NPO 1104.pdf	MCKMDL00649038
7/31/2012	Primlev Fax Blast.pdf	MCKMDL00649039
3/15/2011	Abstral REMS McK Connect Msg.docx	MCKMDL00649040
3/17/2011	Abstral REMS Msg screenshot 3-17-11.docx	MCKMDL00649041
6/23/2016	NPO 4090.pdf	MCKMDL00649042
5/26/2016	OADP_animated.gif	MCKMDL00649043
5/26/2016	OADP_animated_2.gif	MCKMDL00649045
11/3/2016	PO Document.pdf	MCKMDL00649047
6/17/2016	Purdue_OADP#1_DirectRx Ad_animatedfirstframe_06.17.16_.pdf	MCKMDL00649049
6/17/2016	Purdue_OADP#1_DirectRx Ad_animatedsecondframe_06.17.16_.pdf	MCKMDL00649050
6/3/2016	Purdue_OADP_DirectRx Ad_signed 06.03.2016.pdf	MCKMDL00649051
3/30/2011	Butrans_RxFocus Analysis_12142010(12162010Update)_Execute.xls	MCKMDL00649058
12/17/2010	cust numbers.xls	MCKMDL00649059
1/12/2011	fax # Butrans Launch.xls	MCKMDL00649060
12/8/2016	NPO 4452.pdf	MCKMDL00649061
3/16/2011	NPO 8600.MDI	MCKMDL00649062
1/12/2011	pb004 upload.xls	MCKMDL00649064
3/30/2011	return bulletin upload.xls	MCKMDL00649065
1/12/2011	RxFocus Launch Bulletin - Butrans.doc	MCKMDL00649066
3/30/2011	RxFocus Return Bulletin - Butrans.doc	MCKMDL00649067
3/30/2011	rxfocus return fax # butrans.xls	MCKMDL00649068
11/29/2012	RxPatrol_HM Online Ops Manual_Message_clcomments_LY Edits11.29.12.xlsx	MCKMDL00649069
	MCKMDL00695128.pdf	MCKMDL00695128
	Purdue-Miami Luken Distribution Performance Agreement (DPA) Amendment - 6-30-15.docx	ML00047473
	Purdue First Amendment to Distribution Performance Agreement.PDF	ML00047479
6/25/2013	Mallinckrodt Pharmaceuticals – Confidential – MNK-795 Global Partnering Opportunity – ENDO and Mallinckrodt	MNK-T1_0000227707
2012	ABC	MNK-T1_0000284133
3/15/2011	HDMA DMC Expo 2011 Conf Notes.doc	MNK-T1_0000291614
2006	Bid Renewal (5-31-2006)	MNK-T1_0000315997
2009	Cardinal	MNK-T1_0000318596
2006	Cedardale	MNK-T1_0000331072
2012	EXPRESS SCRIPTS, INC. AMENDMENT TO THE PHARMACEUTICAL REBATE AGREEMENT 2012/2013 Rebate Cycle	MNK-T1_0000333584
2007	Tiered Rebate Incentive	MNK-T1_0000336288
2010	MHA	MNK-T1_0000337457
2008	McKesson	MNK-T1_0000337943
2008	McKesson	MNK-T1_0000337947
2007	McKesson	MNK-T1_0000337966
2005	Premier	MNK-T1_0000341430
2008	Premier	MNK-T1_0000341778
2012	Premier	MNK-T1_0000342442
2011	Combined Signed Amendments	MNK-T1_0000365366
2008	Sunrise	MNK-T1_0000365849
2011	Tempest Med.	MNK-T1_0000366342
2007	New Revised Bid Proposal	MNK-T1_0000367093
2005	2005 Letter to Walgreens: Contract Modification: Price Changes and Rebates	MNK-T1_0000367190
10/18/2005	2005 Volume Incentive (signed).pdf	MNK-T1_0000367198
6/29/2006	Volume Rebate Opportunity for Walgreens Co. that supersedes previous offer of April.	MNK-T1_0000367254
6/29/2006	Volume Rebate Opportunity for Walgreens Co. that supersedes previous offer of April.	MNK-T1_0000367271
7/7/2006	Walgreens Invitation to bid on Generic Pharmaceuticals	MNK-T1_0000367313
9/7/2007	Revised Oxy ER Addition 9.7.07.pdf	MNK-T1_0000367389
5/16/2007	Walgreens New Store Subsidy 5.16.07.pdf	MNK-T1_0000367400
5/16/2007	Walgreens New Store Subsidy signed copy.pdf	MNK-T1_0000367402
1/17/2008	Add Compounding Powders 1-17-08..doc.pdf	MNK-T1_0000367439
9/10/2008	Add Oxy ER 9-5-08.pdf	MNK-T1_0000367445
3/10/2008	Letter from Vincent Kaiman re: Retention Rebate 2008 3-10-08.doc	MNK-T1_0000367461
1/23/2008	Signed Revised Adding Compounding Powders 1-23-08.pdf	MNK-T1_0000367477
3/3/2008	Signed VIP 3-3-08.pdf	MNK-T1_0000367481
7/14/2009	Add Oxy 5mg 7-9-09.doc.pdf	MNK-T1_0000367491
5/7/2009	Revised Volume Rebate Opportunity	MNK-T1_0000367499
2009	Walgreens Contract Final (Don's Comments)	MNK-T1_0000367516
1/14/2010	Volume Rebate Opportunity	MNK-T1_0000367534
12/3/2010	Signed Revised 2010 VIP 12 3 10.pdf	MNK-T1_0000367545
2010		MNK-T1_0000371210
2010		MNK-T1_0000391457
1/17/2007	McKesson RFP 2007 1.17.07.doc	MNK-T1_0000416319
11/3/2008	Fentanyl Lozenge OneStop Generics Marketing Contract	MNK-T1_0000416504
1/24/2009	Document re: Review 2 Oxy RiskMAP semi-annual report	MNK-T1_0000420928

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8/24/2010	FW: Word Document for VIP - Mallinckrodt/Covidient	MNK-T1_0000432467
2007	Carolina Allied	MNK-T1_0000482991
2011	PHARMACEUTICAL MANUFACTURER TERMS AND CONDITIONS	MNK-T1_0000483471
2008	Harvard	MNK-T1_0000497363
2007	Masters	MNK-T1_0000498226
2007	Masters	MNK-T1_0000498245
2008	Signed CII Vault Program	MNK-T1_0000498305
1/13/2009	2009 VIP Tiers 1-13-09.doc.pdf	MNK-T1_0000499078
7/14/2009	Letter re: Contract Modification to Walgreens	MNK-T1_0000499095
3/9/2009	Fw: Mallinckrodt Walgreens 2009 Rebate Agreement	MNK-T1_0000499458
2010	AMENDMENT TO PRxO GENERICS PROGRAM ADDENDUM TO DISTRIBUTION SERVICES AGREEMENT	MNK-T1_0000499870
2011	ABC	MNK-T1_0000510177
2014	ABC	MNK-T1_0000510271
2014	Cardinal	MNK-T1_0000510400
2013	Harvard	MNK-T1_0000510515
2008	KeySource Medical	MNK-T1_0000510593
2008	Volume Rebate Opportunity	MNK-T1_0000510601
2005	ANDA	MNK-T1_0000511209
2013		MNK-T1_0000516747
2013		MNK-T1_0000517516
2012		MNK-T1_0000519363
2012		MNK-T1_0000548533
2013		MNK-T1_0000617264
2014		MNK-T1_0000697094
2012		MNK-T1_0000726335
2012		MNK-T1_0000751640
2013		MNK-T1_0000860827
2012		MNK-T1_0000862289
2013		MNK-T1_0000863052
2015		MNK-T1_0000865583
2015		MNK-T1_0000867542
2010	Covidien PA Dashboard & Report Specifications - Phase 1(a) V1.0	MNK-T1_0000915653
2012		MNK-T1_0000921785
11/8/2012	Email re: Walgreens Intranet Communication to Pharmacists	MNK-T1_0001472151
2012		MNK-T1_0001963782
2013		MNK-T1_0002046109
2011	Mallinckrodt_Growth Agreement (signed)	MNK-T1_0002221235
6/5/2014	Re: Draft of the Walgreens Xartemis XR field communication	MNK-T1_0002805614
1/24/2012	Signed Revised Add Oxy APAP Caps 1.26.12.pdf	MNK-T1_0003066917
2011		MNK-T1_0004176395
2012	WalMart contract Modification	MNK-T1_0004264912
2007	KeySource Medical	MNK-T1_0004620210
2001	2001 Price Quotes	MNK-T1_0004709464
7/18/2011	FW: Walgreens A/P Review-DM #286094 for \$330,550.92	MNK-T1_0004878927
2007	Masters	MNK-T1_0004879700

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Report of Matthew Perri III in Case no. 17-OP-45004 (N.D. Ohio) and Case No. 18-OP-45090 (N.D. Ohio)

Confidential and Subject to Protective Order

Schedule 17: Amounts paid to Pain Advocacy Organizations & Professional Societies

Bates	Doc Date	Organization	Payment
INSYS-003350902	11/15/2011	AAPM, APS and ASPE	
JAN-MS-03089430		1997 - 2012	Summary of Payments
EPI000665107	Undated	AAHPM	5,000
INSYS-MDL-010473678	6/25/2014	AAPM	\$19,200.00
INSYS-MDL-010477470	11/20/2015	AAPM	\$7,000.00
INSYS-MDL-010477473	12/4/2015	AAPM	\$7,000.00
INSYS-MDL-005393278	1/14/2016	AAPM	\$6,506.71
INSYS-MDL-006047762	8/19/2015	AAPM	\$5,960.22
INSYS-MDL-010471732	8/29/2014	AAPM	\$711.80
INSYS-MDL-010477468	4/8/2016	AAPM	\$4,162.50
JAN-MS-00313716	1/1/2001	AAPM	5,000
JAN-MS-00314059	1/1/2002	AAPM	118,025
JAN-MS-00306263	1/1/2003	AAPM	7,446
JAN-MS-00315325	1/1/2004	AAPM	211,426
JAN-MS-00828205	1/1/2005	AAPM	25,000.00
JAN-MS-00408422	1/1/2007	AAPM	336,434
JAN-MS-00928065	1/1/2007	AAPM	187,685
JAN-MS-00928067	1/1/2007	AAPM	50,475
JAN-MS-00350962	1/1/2008	AAPM	459,984
JAN-MS-00393409	1/1/2008	AAPM	388,950
JAN-MS-00410890	1/1/2008	AAPM	625,000
JAN-MS-01239356	1/1/2008	AAPM	350,000
JAN-MS-00323434	1/1/2009	AAPM	190,655
JAN-MS-00323859	1/1/2009	AAPM	151,497
JAN-MS-00350802	1/1/2009	AAPM	50,000
JAN-MS-00325962	1/1/2010	AAPM	15,000
JAN-MS-00918396	1/1/2010	AAPM	215,800
JAN-MS-00949290	1/1/2010	AAPM	170,000
JAN-MS-01151875	1/1/2010	AAPM	161,050
JAN-MS-00019879	1/1/2012	AAPM	192,155
JAN-MS-00427861	1/1/2013	AAPM	35,000
JAN-MS-02659095	1/1/2015	AAPM	599,280
PPLP003464171	2016	AAPM	
JAN-MS-00928066	1/1/2007	AAPM	76,200
INSYS-MDL-004367530	3/27/2014	AAPM and APS	
INSYS-MDL-004371395	10/29/2013	AAPM and APS	
INSYS-MDL-002928167	11/26/2013	AAPM and APS	various
INSYS-MDL-002934728	4/25/2014	AAPM and APS	various
197:16 – 197:19	28-Nov-18	Academy of Integrative Pain Management	\$3,050
EPI000648854	Undated	Accel Healthcare Communications	\$65,130.00
EPI000665058	Undated	Accel Healthcare Communications	\$134,417.00
EPI000664147	11/7/2003	Accel Healthcare Communications	15,928.75
EPI000664146	Undated	Accel Healthcare Communications	25,020
EPI000665095	Undated	Accel Healthcare Communications	7,875
ENDO-OPIOID MDL-02255241	Undated	Accel Healthcare Communications	56,385.75
EPI000663953	Undated	Accel Healthcare Communications	45,250
EPI000665058	Undated	Accel Healthcare Communications	134,417
EPI000649555	Undated	Accel Healthcare Communications	13,500
ENDO-OPIOID MDL-01445133	Undated	Adis International Inc.	21,730
JAN-MS-00313716	1/1/2001	AGS	40,000
JAN-MS-00313716	1/1/2001	AGS	40,000
JAN-MS-00247231	1/1/2002	AGS	90,000
JAN-MS-00306263	1/1/2003	AGS	25,500
JAN-MS-00306275	1/1/2003	AGS	80,500
JAN-MS-00308836	1/1/2004	AGS	12,151
JAN-MS-00474421 JAN-MS-00474423	1/1/2008	AGS	390,000
JAN-MS-00395592 JAN-MS-00395594	1/1/2009	AGS	44,850
JAN-MS-00395596 JAN-MS-00395599	1/1/2009	AGS	58,080
JAN-MS-00264548	1/1/2010	AGS	10,000
JAN-MS-00395611 JAN-MS-00395613 JAN-MS-00395614	1/1/2010	AGS	133,363
JAN-MS-00262912	1/1/2010	AGS	133,363
JAN-MS-00395603	1/1/2010	AGS	133,363
JAN-MS-00395630	1/1/2010	AGS	20,328
JAN-MS-00264370	1/1/2010	AGS	
JAN-MS-00409782	1/1/2010	AGS	10,000
EPI000199808	9/5/2013	American Academy of Family Physicians	\$8,000.00

EPI000663671	2003	American Academy of Family Physicians	10,000
EPI00649755	Undated	American Academy of Family Physicians	25,000
EPI000663946	Undated	American Academy of Family Physicians	9,500
JAN-MS-00928090	Undated	American Academy of Family Physicians	n/a
PPLP003467980	9/17/2008	American Academy of Family Physicians	\$11,000.00
PPLP003468109	8/20/2008	American Academy of Family Physicians	\$200,000.00
PPLP003473927	06/00/2011	American Academy of Family Physicians	\$20,000.00
PPLP003474787	07/00/2012	American Academy of Family Physicians	\$40,000.00
PPLP003474610	03/00/2012	American Academy of Family Physicians	\$10,000.00
PPLP003473889	04/00/2011	American Academy of Family Physicians	\$10,000.00
PPLP003473913	03/00/2011	American Academy of Family Physicians	
PPLP003472803	04/00/2014	American Academy of Family Physicians	\$13,000.00
PPLP003473236	03/00/2010	American Academy of Family Physicians	\$40,000.00
PPLP003472797	04/00/2014	American Academy of Family Physicians	\$13,000.00
PPLP003471925	04/00/2013	American Academy of Family Physicians	\$125,000.00
PPLP003471936	04/00/2013	American Academy of Family Physicians	\$100,000.00
PPLP003471949	04/00/2013	American Academy of Family Physicians	\$25,000.00
PPLP003471368	05/00/2012	American Academy of Family Physicians	\$275,000.00
PPLP003471242	12/00/2012	American Academy of Family Physicians	\$13,000.00
PPLP003470034	03/00/2011	American Academy of Family Physicians	\$150,000.00
PPLP003468711	12/00/2009	American Academy of Family Physicians	\$5,000.00
PPLP003468163	05/00/2009	American Academy of Family Physicians	\$400,000.00
PPLP003475242	03/00/2014	American Academy of Family Physicians	\$10,000.00
PPLP003475903	07/00/2014	American Academy of Family Physicians	\$40,000.00
PPLP003475188	03/00/2013	American Academy of Family Physicians	\$40,000.00
PPLP003476535	12/00/2015	American Academy of Family Physicians	\$40,000.00
PPLP003476316	07/00/2015	American Academy of Family Physicians	\$40,000.00
PPLP003475814	04/00/2014	American Academy of Family Physicians	\$20,000.00
EPI00664698	Undated	American Academy of Neurology Foundation	7,500
PPLP003467377	3/2/2007	American Academy of Pain Management	\$10,000.00
CHI_000437950	06/00/2009	American Academy of Pain Management	\$27,825.00
PPLP003476524	n/a	American Academy of Pain Management	\$120,000.00
PPLP003469544	2010	American Academy of Pain Management	\$32,530.00
PPLP003476280	6/22/2015	American Academy of Pain Management	\$140,000.00
PPLP003476120	09/00/2014	American Academy of Pain Management	\$20,000.00
PPLP003476109	08/00/2014	American Academy of Pain Management	\$125,000.00
PPLP003476059	08/00/2014	American Academy of Pain Management	\$25,000.00
PPLP003475627	09/00/2013	American Academy of Pain Management	\$25,000.00
PPLP003475659	09/00/2013	American Academy of Pain Management	\$125,000.00
PPLP003474811	09/00/2012	American Academy of Pain Management	\$25,000.00
PPLP003474850	09/00/2012	American Academy of Pain Management	\$125,000.00
PPLP003474016	09/00/2011	American Academy of Pain Management	\$50,000.00
PPLP003473955	08/00/2011	American Academy of Pain Management	\$25,000.00
PPLP003473142	10/00/2009	American Academy of Pain Management	\$25,000.00
PPLP003473519	09/00/2010	American Academy of Pain Management	\$36,050.00
PPLP003473673	12/00/2010	American Academy of Pain Management	\$25,000.00
PPLP003472315	08/00/2013	American Academy of Pain Management	\$25,000.00
PPLP003473019	08/00/2008	American Academy of Pain Management	\$12,000.00
PPLP003472252	06/00/2013	American Academy of Pain Management	\$36,154.00
PPLP003471514	08/00/2012	American Academy of Pain Management	\$20,000.00
PPLP003472293	08/00/2013	American Academy of Pain Management	\$20,000.00
PPLP003469598	10/00/2011	American Academy of Pain Management	\$50,000.00
PPLP003469561	09/00/2010	American Academy of Pain Management	\$22,325.00
PPLP003467823	11/00/2007	American Academy of Pain Management	\$100,000.00
PPLP003468488	07/00/2009	American Academy of Pain Management	\$27,825.00
PPLP003466438	04/00/2006	American Academy of Pain Management	\$144,787.79
PPLP003469544	09/00/2010	American Academy of Pain Management	\$32,530.00
PPLP003467377	02/00/2007	American Academy of Pain Management	\$10,000.00
PPLP003467643	08/00/2007	American Academy of Pain Management	\$10,000.00
PPLP003464918	05/00/2014	American Academy of Pain Management	\$40,000.00
PPLP003464939	04/00/2015	American Academy of Pain Management	\$20,000.00
PPLP003464959	12/00/2015	American Academy of Pain Management	\$10,000.00
PPLP003464895	05/00/2014	American Academy of Pain Management	\$20,000.00
PPLP003464819	04/00/2012	American Academy of Pain Management	\$45,000.00
PPLP003464594	1/00/2014	American Academy of Pain Management	\$25,000.00
PPLP003464667	1/00/2014	American Academy of Pain Management	\$25,000.00
PPLP003464801	02/00/2011	American Academy of Pain Management	\$45,000.00
PPLP003464838	09/00/2012	American Academy of Pain Management	\$20,000.00
PPLP003464871	04/00/2013	American Academy of Pain Management	\$50,000.00
PPLP003464787	05/00/2010	American Academy of Pain Management	\$35,000.00
PPLP003464774	04/00/2009	American Academy of Pain Management	\$25,000.00
PPLP003464737	05/00/2014	American Academy of Pain Management	\$25,000.00



PPLP003464458	02/00/2013	American Academy of Pain Management	\$25,000.00
PPLP003464549	08/00/2013	American Academy of Pain Management	\$25,000.00
CHI_000441993	8/23/2013	American Academy of Pain Medicine	various
CHI_000441993	8/23/2013	American Academy of Pain Medicine	Various
CHI_00441993	8/23/2013	American Academy of Pain Medicine	Various
ENDO-OPIOID_MDL-01444991	2000	American Academy of Pain Medicine	\$15,000.00
ENDO-OPIOID_MDL-01444993	2000	American Academy of Pain Medicine	\$5,000.00
ENDO-OPIOID_MDL-04669404	1999	American Academy of Pain Medicine	\$10,000.00
ENDO-OPIOID_MDL-04669418	1999	American Academy of Pain Medicine	\$3,000.00
ENDO-OPIOID_MDL-04669526	1999	American Academy of Pain Medicine	\$10,000.00
ENDO-OPIOID_MDL-04669540	1999	American Academy of Pain Medicine	\$3,000.00
ENDO-OPIOID_MDL-04754767	2/14/2001	American Academy of Pain Medicine	\$12,500.00
EPI000649269	Undated	American Academy of Pain Medicine	16,000
ENDO-OPIOID_MDL-01445157	Undated	American Academy of Pain Medicine	15,000
EPI000664622	2003	American Academy of Pain Medicine	5,000
ENDO-OPIOID_MDL-01445159	Undated	American Academy of Pain Medicine	5,000
CHI_00441993	8/23/2013	American Academy of Pain Medicine	Various
CHI_000441993	8/23/2013	American Academy of Pain Medicine	various
CHI_00441993	8/23/2013	American Academy of Pain Medicine	Various
CHI_000441993	8/23/2013	American Academy of Pain Medicine	various
CHI_00441993	8/23/2013	American Academy of Pain Medicine	Various
PPLP003464264	01/00/2010	American Academy of Pain Medicine	\$25,000.00
PPLP003464396	2/14/2013	American Academy of Pain Medicine	\$25,000.00
PPLP003464281	1/19/2012	American Academy of Pain Medicine	\$100,000.00
PPLP003464342	11/29/2011	American Academy of Pain Medicine	\$25,000.00
PPLP003464241	11/18/2008	American Academy of Pain Medicine	\$10,000.00
CHI_000441993	8/23/2013	American Academy of Pain Medicine	various
CHI_00441993	8/23/2013	American Academy of Pain Medicine	Various
CHI_000441993	8/23/2013	American Academy of Pain Medicine	various
198:2 - 198:6	11/28/2018	American Academy of Pain Medicine	\$57,750
ENDO-OPIOID_MDL-01445090	Undated	American Academy of Pharmaceutical Physicians	5,000
ENDO-OPIOID_MDL_01445198	Undated	American Academy of Physicians Assistants	3,500
CHI_000443918	1/26/2001	American Chronic Pain Association	\$65,250.00
ENDO-OPIOID_MDL-04754787	2001	American Chronic Pain Association	\$5,000.00
ENDO-OPIOID_MDL-01445020	2000	American Geriatrics Society	\$6,500.00
PKY180606224	5/29/1998	American Geriatrics Society	
PPLP003464175	2016	American Geriatrics Society	various
ENDO-OPIOID_MDL-04669911	Undated	American Osteopathic Association	5,000
ENDO-OPIOID_MDL_04669531	Undated	American Osteopathic Association	4,000
PPLP003476500	12/2/2015	American Osteopathic Association	\$50,000.00
PPLP003476243	07/00/2015	American Osteopathic Association	\$50,000.00
PPLP003475873	06/00/2014	American Osteopathic Association	\$50,000.00
PPLP003475504	03/00/2014	American Osteopathic Association	\$40,000.00
PPLP003475159	10/00/2013	American Osteopathic Association	\$230,500.00
PPLP003475148	01/00/2013	American Osteopathic Association	\$230,500.00
PPLP003474764	08/00/2012	American Osteopathic Association	\$40,000.00
PPLP003474222	10/00/2011	American Osteopathic Association	\$178,250.00
PPLP003473720	03/00/2011	American Osteopathic Association	\$100,000.00
PPLP003473475	08/00/2010	American Osteopathic Association	\$225,000.00
PPLP003471455	06/00/2012	American Osteopathic Association	\$100,000.00
PPLP003467400	12/00/2006	American Osteopathic Association	\$227,000.00
JAN-MS-00787662	10/3/2002	American Pain Foundation	n/a
CHI_001978630	1997-2012	American Pain Foundation	Various
CHI_002008142	2002-2012	American Pain Foundation	Various
CHI_001193789	12/31/2011	American Pain Foundation	Various
CHI_001260895	7/9/2001	American Pain Foundation	n/a
CHI_001030690	1/26/2001	American Pain Foundation	25,000
CHI_000430355	7/19/2005	American Pain Foundation	\$10,000.00
CHI_000430434		American Pain Foundation	\$73,000.00
ENDO0735356		American Pain Foundation	
CHI_000430399	11/2/2007	American Pain Foundation	\$32,000.00
CHI_000430434	11/27/2007	American Pain Foundation	Various
CHI_000433583	12/8/2009	American Pain Foundation	Various
CHI_000434932	10/12/2006	American Pain Foundation	\$10,000.00
CHI_000436741	2009	American Pain Foundation	\$37,000.00
CHI_000436746	11/5/2009	American Pain Foundation	\$500,000.00
ENDO-OPIOID_MDL-01412623_image	1/7/2010	American Pain Foundation	
CHI_000437043	3/1/2012	American Pain Foundation	\$244,337.40
CHI_001026888	3/12/2007	American Pain Foundation	n/a
CHI_001030690	1/26/2001	American Pain Foundation	\$25,000.00
CHI_001156950	3/27/2009	American Pain Foundation	\$35,000.00

CHI_001173523	1/1/2010	American Pain Foundation	
CHI_001164782	1/20/2012	American Pain Foundation	\$649,779.00
CHI_001164916	3/1/2012	American Pain Foundation	\$46,057.00
CHI_001164930	1/15/2012	American Pain Foundation	\$25,000.00
CHI_001164934	3/1/2012	American Pain Foundation	\$244,337.40
CHI_001173523	2010	American Pain Foundation	n/a
CHI_001193789	12/31/2011	American Pain Foundation	Various
CHI_001208249	6/9/2010	American Pain Foundation	\$14,111.00
CHI_001208252	2/1/2010	American Pain Foundation	\$586,012.00
CHI_001212744	1/14/2011	American Pain Foundation	\$797,204.00
CHI_001213322	8/31/2011	American Pain Foundation	\$747,517.00
CHI_001213714	7/25/2011	American Pain Foundation	\$165,450.00
CHI_001214142	2/25/2011	American Pain Foundation	\$25,000.00
CHI_001216588	1/20/2012	American Pain Foundation	\$649,779.00
CHI_001260895	7/9/2001	American Pain Foundation	n/a
CHI_001978630	1997-2012	American Pain Foundation	Various
CHI_001978788	5/31/2011	American Pain Foundation	Various
CHI_002008142	2002-2012	American Pain Foundation	Various
CHI_002048802	12/31/2010	American Pain Foundation	Various
ENDO-OPIOID_MDL-01605959	2011	American Pain Foundation	\$165,450.00
ENDO-OPIOID_MDL-01607810	11/18/2010	American Pain Foundation	\$642,805.00
ENDO-OPIOID_MDL-02197835	2012	American Pain Foundation	\$31,762.00
ENDO-OPIOID_MDL-04754820	5/31/2002	American Pain Foundation	\$25,000.00
EPI000649100	2003	American Pain Foundation	\$135,000.00
EPI00664121	2003	American Pain Foundation	\$10,000.00
JAN-MS-00787662	10/3/2002	American Pain Foundation	n/a
MDL_KP360_000000002	2003-2012	American Pain Foundation	Various
END00450995	2011	American Pain Foundation	165,450
EPI000664122	Undated	American Pain Foundation	5,000
EPI000649190	Undated	American Pain Foundation	10,000
JAN-MS-00723779 JAN-MS-00788087 JAN-MS-00723779		American Pain Foundation	
JAN-MS-00723779	7/24/2003	American Pain Foundation	\$50,000
JAN-MS-00788087	2003	American Pain Foundation	n/a
PKY183121360	10/1/2000	American Pain Foundation	n/a
JAN-MS-00787658	11/1/2002	American Pain Foundation	n/a
JAN-MS-00787662	10/3/2002	American Pain Foundation	n/a
JAN-MS-00724227	9/29/2003	American Pain Foundation	n/a
JAN-MS-00275963	4/2/2008	American Pain Foundation	\$10,000
JAN-MS-00928094	Undated	American Pain Foundation	n/a
JAN-MS-00500135	3/15/2007	American Pain Foundation	n/a
JAN-MS-00506585	11/16/2007	American Pain Foundation	\$110,000
JAN-MS-00506584	11/20/2007	American Pain Foundation	\$110,000
JAN-MS-01246061	12/5/2007	American Pain Foundation	n/a
JAN-MS-00506767	12/6/2007	American Pain Foundation	\$55,000
JAN-MS-01239389	2/22/2008	American Pain Foundation	n/a
JAN-MS-00503729	2/27/2008	American Pain Foundation	\$33,000
JAN-MS-01245171	8/2/2007	American Pain Foundation	n/a
JAN-MS-00275828	9/27/2007	American Pain Foundation	n/a
JAN-MS-00275814	8/31/2007	American Pain Foundation	n/a
JAN-MS-00505423	11/6/2007	American Pain Foundation	n/a
JAN-MS-00505426	11/6/2007	American Pain Foundation	n/a
JAN-MS-00275703	4/21/2008	American Pain Foundation	n/a
JAN-MS-00506663	11/29/2007	American Pain Foundation	n/a
JAN-MS-00502556	5/12/2008	American Pain Foundation	n/a
CHI_001978630	1997-2012	American Pain Foundation	Various
CHI_002008142	2002-2012	American Pain Foundation	Various
CHI_001173523	2010	American Pain Foundation	Various
CHI_002048802	12/31/2010	American Pain Foundation	Various
CHI_001978788	5/31/2011	American Pain Foundation	Various
CHI_001193789	12/31/2011	American Pain Foundation	Various
CHI_001260895	7/9/2001	American Pain Foundation	n/a
CHI_002008142	1/1/2009	American Pain Foundation	&10,000
JAN-MS-00787662	10/3/2002	American Pain Foundation	n/a
CHI_001978630	1997-2012	American Pain Foundation	Various
CHI_002008142	2002-2012	American Pain Foundation	Various
PPLP003465134	2007	American Pain Foundation	\$190,000
PPLP003477009	2006	American Pain Foundation	\$65,000
SFC00005694	2009	American Pain Foundation	\$115,000
PPLP003465184	2009	American Pain Foundation	\$140,000

PPLP003465235 PPLP004114992	2010	American Pain Foundation	\$106,000
PPLP003465235	2010	American Pain Foundation	\$135,000
CHI_001173523	2010	American Pain Foundation	Various
CHI_002048802	12/31/2010	American Pain Foundation	Various
CHI_001978788	5/31/2011	American Pain Foundation	Various
CHI_001193789	12/31/2011	American Pain Foundation	Various
	9/14/2011	American Pain Foundation	
CHI_001260938	7/22/2002	American Pain Foundation	
CHI_001260895	7/9/2001	American Pain Foundation	n/a
PPLP003465436	08/00/2011	American Pain Foundation	\$50,000.00
PPLP004046945	3/8/2011	American Pain Foundation	
PPLP004045887	2/00/2009	American Pain Foundation	\$115,000.00
PPLP003465134	01/00/2008	American Pain Foundation	\$190,000.00
PPLP003465206	05/00/2009	American Pain Foundation	\$50,000.00
PPLP003465329	11/00/2010	American Pain Foundation	\$100,000.00
PPLP003465408	08/00/2011	American Pain Foundation	\$50,000.00
PPLP003465381	07/00/2011	American Pain Foundation	\$65,000.00
PPLP003465350	04/00/2011	American Pain Foundation	\$50,000.00
PPLP003465303	10/00/2010	American Pain Foundation	\$85,500.00
PPLP003465219	10/00/2009	American Pain Foundation	\$60,000.00
PPLP003465279	09/00/2010	American Pain Foundation	\$10,000.00
PPLP003465235	03/00/2010	American Pain Foundation	\$106,000.00
PPLP003464211	10/00/2008	American Pain Foundation	\$50,000.00
PPLP003465184	07/00/2009	American Pain Foundation	\$140,000.00
PPLP003465163	08/00/2008	American Pain Foundation	\$115,000.00
PPLP004048562	11/00/2011	American Pain Foundation	\$150,000.00
PPLP003477075	09/00/2007	American Pain Foundation	\$75,000.00
PPLP003477018	10/00/2006	American Pain Foundation	various
PPLP003477068	04/00/2007	American Pain Foundation	\$122,500.00
PPLP003477055	01/00/2007	American Pain Foundation	\$21,150.00
PPLP003477061	04/00/2007	American Pain Foundation	\$2,500.00
PPLP003477009	05/00/2006	American Pain Foundation	\$65,000.00
PPLP004043945 PPLP003465303		American Pain Foundation	\$85,000.00
JAN-MS-00787662	10/3/2002	American Pain Foundation	n/a
CHI_001978630	1997-2012	American Pain Foundation	Various
CHI_002008142	2002-2012	American Pain Foundation	Various
CHI_001173523	2010	American Pain Foundation	Various
CHI_002048802	12/31/2010	American Pain Foundation	Various
CHI_001978788	5/31/2011	American Pain Foundation	Various
CHI_001193789	12/31/2011	American Pain Foundation	Various
CHI_001260895	7/9/2001	American Pain Foundation	n/a
	12/19/2006	American Pain Foundation	\$75,000.00
	9/13/2006	American Pain Foundation	\$25,000.00
JAN-MS-01240530	2/1/2008	American Pain Foundation, American Academy of Pain Management, American Society for Pain Management Nursing	\$135,000.00
JAN-MS-00776219	3/3/2003	American Pain Foundation, American Chronic Pain Association, National Pain Foundation	n/a
JAN-MS-00928088	7/9/2007	American Pain Foundation, American Pain Society, American Academy of Family Physicians	n/a
JAN-MS-01235809	9/6/2007	American Pain Foundation, National Pain Foundation, American Pain Society, National Association of School Nurses	n/a
APS-MDL00000001	2012	American Pain Society	\$15,000
APS-MDL00000001		American Pain Society	various
PKY180960325	6/18/1998	American Pain Society	
ENDO-OPIOID_MDL-05578670_image ENDO-OPIOID_MDL-01605570 ENDO-OPIOID_MDL-01605648	5/6/2009	American Pain Society	\$400,000.00
APS-MDL00000001	2012	American Pain Society	Various
APS-MDL00000001		American Pain Society	Various
ENDO_OPIOID_MDL-04754790	2001	American Pain Society	\$15,000.00
ENDO-OPIOID_MDL-01445025	2000	American Pain Society	\$15,000.00
ENDO-OPIOID_MDL-01445025	2000	American Pain Society	\$15,000.00
ENDO-OPIOID_MDL-01445082	2000	American Pain Society	\$25,000.00
ENDO-OPIOID_MDL-01445092	2000	American Pain Society	\$2,500.00
ENDO-OPIOID_MDL-02285365	2009	American Pain Society	Various
ENDO-OPIOID_MDL-02343798	2001	American Pain Society	n/a

ENDO-OPIOID_MDL-04234767	1998	American Pain Society	\$10,000.00
ENDO-OPIOID_MDL-04669396	1999	American Pain Society	\$15,000.00
ENDO-OPIOID_MDL-04669417	1999	American Pain Society	\$3,500.00
ENDO-OPIOID_MDL-04669453	1999	American Pain Society	\$5,000.00
ENDO-OPIOID_MDL-04669539	1999	American Pain Society	\$3,500.00
ENDO-OPIOID_MDL-04669900	1999	American Pain Society	\$5,000.00
ENDO-OPIOID_MDL-04669971	1999	American Pain Society	\$25,000.00
ENDO-OPIOID_MDL-05578670	5/4/2010	American Pain Society	\$408,180.40
ENDO-OPIOID_MDL-05579494	2013	American Pain Society	\$25,000.00
ENDO-OPIOID_MDL-06234663	11/19/1998	American Pain Society	\$25,000.00
EPI000663749	Undated	American Pain Society	5,000
ENDO-OPIOID_MDL-04669900	Undated	American Pain Society	5,000
ENDO-OPIOID_MDL-01445025	Undated	American Pain Society	15,000
198:7 – 198:9	11/28/2018	American Pain Society	\$22,965
JAN-MS-00928097	Undated	American Pain Society	n/a
APS-MDL00000001	2012	American Pain Society	Various
APS-MDL00000001		American Pain Society	various
PKY180960325	6/18/1998	American Pain Society	
PKY181775488	6/18/1998	American Pain Society	\$150,000.00
APS-MDL00000001	2012	American Pain Society	Various
PPLP003476480	11/4/2015	American Pain Society	\$15,000.00
PPLP003476258	03/00/2015	American Pain Society	\$20,000.00
PPLP003476422	11/00/2015	American Pain Society	\$10,000.00
PPLP003475848	04/00/2014	American Pain Society	\$10,000.00
PPLP003475926	01/00/2014	American Pain Society	\$5,000.00
PPLP003475789	03/00/2014	American Pain Society	\$45,000.00
PPLP003475545	04/00/2013	American Pain Society	\$5,000.00
PPLP003475587	05/00/2013	American Pain Society	\$10,000.00
PPLP003475757	01/00/2014	American Pain Society	\$5,000.00
PPLP003475762	01/00/2014	American Pain Society	\$5,000.00
PPLP003475472	03/00/2013	American Pain Society	\$3,480.00
PPLP003475220	02/00/2013	American Pain Society	\$45,000.00
PPLP003474678	05/00/2012	American Pain Society	\$25,000.00
PPLP003474657	04/00/2012	American Pain Society	\$3,465.00
PPLP003474710	04/00/2012	American Pain Society	\$5,000.00
PPLP003473738	02/00/2011	American Pain Society	\$45,000.00
PPLP003473684	01/00/2011	American Pain Society	\$3,465.00
PPLP003473909	05/00/2011	American Pain Society	\$10,000.00
PPLP003474640	04/00/2012	American Pain Society	\$45,000.00
PPLP003473332	04/00/2010	American Pain Society	\$25,000.00
PPLP003473308	04/00/2010	American Pain Society	\$45,000.00
PPLP003473298	04/00/2010	American Pain Society	\$25,000.00
PPLP003473090	01/00/2009	American Pain Society	\$45,000.00
PPLP003473048	01/00/2009	American Pain Society	\$3,050.00
PPLP003472752	05/00/2014	American Pain Society	\$20,000.00
PPLP003473164	12/00/2009	American Pain Society	\$3,465.00
PPLP003472002	03/00/2013	American Pain Society	\$20,000.00
PPLP003471330	03/00/2012	American Pain Society	\$15,000.00
PPLP003470364	04/00/2011	American Pain Society	\$15,000.00
PPLP003470091	03/00/2011	American Pain Society	\$15,000.00
PPLP003468994	03/00/2010	American Pain Society	\$15,000.00
PPLP003466949	06/00/2007	American Pain Society	\$136,340.28
PPLP003466546	03/00/2006	American Pain Society	\$2,000.00
PPLP003467366	12/00/2006	American Pain Society	\$2,000.00
APS-MDL00000001		American Pain Society	various
PKY180958896	11/15/1996	American Pain Society	
PKY181775488	6/18/1998	American Pain Society	\$150,000.00
APS-MDL00000001	2012	American Pain Society	Various
APS-MDL00000001		American Pain Society	various
ENDO-OPIOID_MDL-01445092	Undated	American Pain Society	2,500
EPI000663719	Undated	American Pain Society. Check made to American Academy of Pain Medicine	5,000
ENDO-OPIOID_MDL-01444996	Undated	American Society of Addiction Medicine	5,000
ENDO-OPIOID_MDL-01444997	Undated	American Society of Addiction Medicine	3,500
ENDO-OPIOID_MDL-01445193	Undated	American Society of Health System Pharmacists	25,000
EPI000663660	2003	American Society of Pain Management Nurses	5,000
	9/13/2006	American Chronic Pain Association	\$33,000
CHI_001978630		APF	Various
CHI_001978630		APF	
JAN-MS-00350962	1/1/2008	APF	10,000
JAN-MS-01239356	1/1/2008	APF	350,000
JAN-MS-00350802	1/1/2009	APF	105,000

JAN-MS-00325962	1/1/2010	APF	70,000
JAN-MS-00949290	1/1/2010	APF	565,000
CHI_001978630		APF	
PPLP003464177	9/14/2011	APF	
INSYS-MDL-010479773	12/3/2015	APS	\$2,500.00
INSYS-MDL-005793431	5/14/2013	APS	
JAN-MS-00313716	1/1/2001	APS	63,500
JAN-MS-00306263	1/1/2003	APS	7,138
JAN-MS-00315325	1/1/2004	APS	157,081
JAN-MS-00828205	1/1/2005	APS	104,999.96
JAN-MS-00323252	1/1/2008	APS	225,895
JAN-MS-00323448	1/1/2008	APS	116,785
JAN-MS-00350962	1/1/2008	APS	327,673
JAN-MS-00393409	1/1/2008	APS	336,315
JAN-MS-00410890	1/1/2008	APS	300,000
JAN-MS-01239356	1/1/2008	APS	280,000
JAN-MS-00323859	1/1/2009	APS	120,858
JAN-MS-00325962	1/1/2010	APS	31,000
JAN-MS-00949290	1/1/2010	APS	62,000
JAN-MS-01151875	1/1/2010	APS	150,750
JAN-MS-00318611	1/1/2011	APS	
JAN-MS-00318611	1/1/2011	APS	
JAN00019879	1/1/2012	APS	157,905
EPI000649772	Undated	ASAM CT Chapter	375
EPI000649238	Undated	ASAM CT Chapter	375
EPI000665119	Undated	ASAM CT Chapter	375
EPI000664169	Undated	ASAM CT Chapter	375
ENDO-OPIOID_MDL-01445298	Undated	Associates in Medical Marketing	3,337.23
EPI000663945	Undated	Association of American Cancer Institutes	5,000
CPB0000703	6/8/2012	Center for Practical Bioethics	Various
CPB0000703	6/8/2012	Center for Practical Bioethics	\$7,550.00
EPI001245292	5/20/2013	Charlotte AHEC	\$3,500.00
ENDO-OPIOID_MDL-01445294	Undated	Clinical Meeting Management	26,000
EPI000664969	Undated	Clinical Regional Advisory Network	5,000
EPI000664020	Undated	Clinical Regional Advisory Network	5,000
EPI000663939	Undated	CMM Global	20,841.49
EPI000649655	Undated	CMM Global	17,971.70
EPI000664053	Undated	CMM Global	11,927.81
EPI000663669	Undated	CMM Global	28,754.68
200:16 – 200:22	11/28/2018	Conquer Cancer Foundation	\$28,000
ENDO-OPIOID_MDL-01445141	Undated	Delaware Cancer Pain Initiative	5,000
200:23 – 201:7	11/28/2018	Deponent testified that KL Gates, on behalf of Insys, has paid unspecified additional lobbying amounts to congressmen and senators from Arizona, Texas, Washington and California.	
ENDO-OPIOID_MDL-01445168	Undated	Dorland, Sweeney, Jones	6,500
ENDO-OPIOID_MDL-01445003	Undated	Dorland, Sweeney, Jones	3,333.33
EPI000664037	Undated	Eastern Pain Association	11,000
EPI000649329	Undated	Elder Care Ethics Association	5,000
ENDO-OPIOID_MDL-01445087	2000	Federation of State Medical Boards	\$4,025.00
ENDO-OPIOID_MDL-01607843	12/17/2010	Federation of State Medical Boards	\$125,000.00
ENDO-OPIOID_MDL-05967826	6/27/2007	Federation of State Medical Boards	n/a
ENDO-OPIOID_MDL-05967827	2007	Federation of State Medical Boards	n/a
MDL_FSMB_0000000050	6/8/2012	Federation of State Medical Boards	Various
MDL_FSMB_0000000050	6/8/2012	Federation of State Medical Boards	Various
MDL_FSMB_0000000050	6/8/2012	Federation of State Medical Boards	Various
PPLP003477086	9/4/2007	Federation of State Medical Boards Research and Education Foundation	\$100,000
TEVA_MDL_A_01088845	8/28/2007	Federation of State Medical Boards Research and Education Foundation	\$100,000
TEVA_MDL_A_01088810	5/31/2006	Federation of State Medical Boards Research and Education Foundation	\$10,000
EPI001245166	5/13/2013	Foundation for Mens Health	\$7,000.00
INSYS-MDL-005596004	9/8/2014	FSMB	
ENDO-OR-CID-00776481	11/8/2013	Georgia Academy of Family Physicians	\$2,000.00
EPI000664168	Undated	Geriatric Oncology Consortium	5,000
EPI000664029	Undated	Gerontologic NPs	Not stated
EPI002085189	7/17/2013	Hazelden Foundation	\$50,000.00
EPI000649239	Undated	Health Management Solutions	\$36,250.00
EPI000665100	2003	Health Management Solutions, Inc.	41,450
EPI000663702	Undated	Health Management Solutions, Inc.	6,032.50
EPI000664653	Undated	Health Management Solutions, Inc.	30,278



EPI000663825	Undated	Health Management Solutions, Inc.	30,278
EPI000663907	Undated	Health Management Solutions, Inc.	44,845
EPI000664856	Undated	Health Management Solutions, Inc.	44,845
EPI000664681	Undated	Health Management Solutions, Inc.	2,915
EPI000664093	Undated	Health Management Solutions, Inc.	81,799
EPI000664150	12/14/2003	Health Management Solutions, Inc.	41,450
EPI000665044	Undated	Health Management Solutions, Inc.	59,950
EPI000648901	Undated	Health Management Solutions, Inc.	16,238
EPI000648807	Undated	Health Management Solutions, Inc.	52,934
EPI000664776	Undated	Health Management Solutions, Inc.	52,934
EPI000664160	Undated	Health Management Solutions, Inc.	41,450
END00451194	2/6/2013	Huron Life Sciences	n/a
ENDO-OPIOID_MDL-01445091	Undated	I. Hoffman & Associates	7,565
ENDO-OPIOID_MDL-04234777	Undated	Imedex USA	\$10,000.00
ENDO-OPIOID_MDL-02254695	Undated	Imedex USA	31,962
ENDO-OPIOID_MDL-02254694	Undated	Imedex USA	50,000
ENDO-OPIOID_MDL_04669454	Undated	Imedex USA	2,058.03
ENDO-OPIOID_MDL-01445181	Undated	INC Research	155,000
EPI000649007	7/1/2003	Inflexxion	\$50,000.00
EPI000664770	Undated	Inflexxion	\$12,509.70
EPI000663938	Undated	Inflexxion	50,000
EPI000648882	Undated	Inflexxion	75,000
EPI000648889	Undated	Inflexxion	12,509.70
ENDO-OPIOID_MDL-04669497	Undated	Information Television Network	147,500
ENDO-OPIOID_MDL-04669937	Undated	Information Television Network	2,500
EPI000664040	Undated	Institute for Medical Education & Research	38,978
ENDO-OPIOID_MDL-02195352	3/19/2014	Integritas Communications	\$2,265.00
EPI000665113	Undated	International Association for the Study of Pain	6,000
EPI000649551	Undated	International Association for the Study of Pain	3,000
EPI000649647	Undated	International Association for the Study of Pain	10,000
EPI000663676	Undated	International Association for the Study of Pain	6,000
ENDO-OPIOID_MDL-01445126	Undated	International Cancer Alliance Symposium	500
JAN00019879	1/1/2012	JCAHO	\$212,550
PPLPC018000713450	9/6/2012	JCAHO	\$2,355,000.00
PPLPC019000709213		JCAHO	
EPI000665115		JK Associates, Inc.	50,000
ENDO-OPIOID_MDL-01445034	2000	Joint Commissions on Accreditation of Health Organizations	\$37,500.00
EPI000664764	Undated	Market Development Group	\$29,870.00
EPI000663814	Undated	Market Development Group	29,870
EPI000665047	Undated	Market Development Group	29,870
EPI000663878	Undated	McKesson Corporation	Not stated
EPI000648725	2003	Medical Economics	\$488,185.00
EPI000648770	2003	Medical Economics	\$196,710.00
EPI000648801	4/1/2003	Medical Economics	\$55,685.00
EPI000649012	7/1/2003	Medical Economics	\$409,572.00
EPI000663683	2/1/2003	Medical Economics	\$167,520.00
EPI000649010	2003	Medical Economics	526,408
EPI000664682	Undated	Medical Economics	55,685
EPI000663684	Undated	Medical Economics	172,600
EPI000663942	Undated	Medical Economics	17,750
EPI000664156	Undated	Medical Economics	167,825
EPI000663655	Undated	Medical Economics	361,480
EPI000664651	Undated	Medical Economics	196,710
EPI000664154	Undated	Medical Economics	86,500
ENDO-OPIOID_MDL-01445125	Undated	Medical InfoGraphics	3,950
ENDO-OPIOID_MDL-01445136	Undated	Medical InfoGraphics	12,482.72
ENDO-OPIOID_MDL-01445073	Undated	Medical InfoGraphics	14,587.25
EPI000664117	Undated	MediMedia Managed Care	71,576
EPI000664164	Undated	MediMedia Managed Care	71,576
EPI000664718	Undated	MediMedia Managed Care	53,310
ENDO-OPIOID_MDL-04234760	Undated	Memorial Sloan-Kettering Cancer Center	\$15,000.00
EPI002088273	10/24/2013	Midwest Pain Society	\$2,000.00
ENDO-OPIOID_MDL-04669423	Undated	Midwest Shared Newsletter Service, Inc.	3,600
ENDO-OPIOID_MDL-01883288	2012	Miller Medical Communications	\$137,500.00
END00692520	8/1/2013	n/a	n/a
END00735352	8/1/2013	n/a	n/a
ENDO-OPIOID_MDL-02196648	4/29/2014	n/a	n/a
ENDO-OPIOID_MDL-02284410	5/25/2007	n/a	n/a
ENDO-OPIOID_MDL-02954031	8/1/2010	n/a	n/a
ENDO-OPIOID_MDL-05968408	1/4/2013	n/a	n/a

CHI_00441993	8/23/2013	n/a	American Academy of Pain Medicine
APS-MDL00000001	2012	n/a	American Pain Society
MDL_FSMB_0000000050	6/8/2012	n/a	Federation of State Medical Boards
MNK-T1_0000661003	9/5/2014	n/a	Various
CPB0000710	2000-2016	n/a	Various
EPI000663662	Undated	National Center on Addiction & Substance Abuse	5,000
EPI000649624	Undated	National Chronic Pain Society	5,000
200:16 – 200:22	11/28/2018	National Comprehensive Cancer Center	\$318,500
NHPCO_00004	Various	National Hospice and Palliative Care	\$15,000.00
NHPCO_00004	Various	National Hospice and Palliative Care	Various
EPI000664967	Undated	National Pain Foundation	10,000
EPI000648884	Undated	National Pain Foundation	10,000
EPI000664734	Undated	National Primary Care Nurse Practitioner Symposium	5,000
EPI000665064	Undated	New England Pain Assoc.	Not stated
EPI000664988	Undated	Northeast Society of Teacher of Family Medicine	20,000
END00448694	Undated	Not stated	5,000
JAN-MS-00350962	1/1/2008	NPF	25,000
PKY180960325	8/11/1998	Partners Against Pain; APS, AAPM	
JAN-MS-01240520	2/1/2008	PathwaysThroughPain.org	n/a
249:8 – 250:3	8-Jan-19	Patient Services Inc.	\$400,000
291:11 – 292:2	8-Jan-19	Patient Services Inc.	\$250,000
252:24 – 253:19	8-Jan-19	Patient Services Inc.	\$3,547,381
END00444162	10/26/2009	Penn State College of Medicine	n/a
ENDO-OR-CID-00776481	11/8/2013	Pennsylvania Academy of Family Physicians Foundation	\$3,000.00
JAN-MS-00313716	1/1/2001	PPSG	\$75,000
ENDO-OPIOID_MDL-01445008	Undated	Southern Pain Society	7,500
EPI000199680	8/26/2013	Temple University	\$6,500.00
END00033280	3/3/2011	Texas Pain Society	\$8,250.00
EPI000664999	Undated	The Foundation for Better Health Care	5,000
EPI000663765	Undated	The GMR Group	17,700
EPI000648833	Undated	The GMR Group	67,900
ENDO-OPIOID_MDL-01445142	6/1/2003	The McGraw Hill Companies	\$140,250.00
ENDO-OPIOID_MDL-01445247	6/1/2003	The McGraw Hill Companies	\$23,419.50
EPI000648955	6/1/2003	The McGraw Hill Companies	\$18,500.00
EPI000648954	6/1/2003	The McGraw Hill Companies	\$43,875.00
EPI000664835	Undated	The McGraw Hill Companies	43,875
EPI000649489	Undated	The McGraw Hill Companies	18,500
ENDO-OPIOID_MDL-01445247	Undated	The McGraw Hill Companies	23,419.50
ENDO-OPIOID_MDL-01445142	Undated	The McGraw Hill Companies	140,250
198:10 – 198:12	11/28/2018	the National Pain Foundation	\$562,500
ENDO-OPIOID_MDL-01445192	Undated	The Neuropathy Association	5,000
ENDO-OPIOID_MDL-04754548	Undated	Thomas Healthcare, Inc.	41,000
ENDO-OPIOID_MDL-04754531	Undated	Thomson Healthcare	\$20,000.00
ENDO-OPIOID_MDL-04754548	Undated	Thomson Healthcare	\$41,000.00
324:21 – 326:24	8-Jan-19	U. S. Pain Foundation	\$500,000
198:13 – 198:15	11/28/2018	U.S. Pain Foundation	\$3,250,000
315:2 – 315:20	8-Jan-19	U.S. Pain Foundation	\$250,000
336:21 – 337:3	8-Jan-19	U.S. Pain Foundation	
ENDO-OPIOID_MDL-01445255	Undated	University Medical Services Associates	7,500
ENDO-OPIOID_MDL-01444981	5/23/2012	Unnamed	n/a
PPLP004085625	09/00/2011	UPF	\$15,000.00
INSYS-MDL-015022856	12/19/2016	USPF	
INSYS-MDL-015023247	1/9/2017	USPF	\$500,000.00
CPB0000710	2000-2016	Various	Various
END000000001	7/6/2012	Various	Various
END000000002	6/15/2012	Various	Various
END000000001	6/7/2012	Various	Various
END000000002	6/15/2012	Various	Various
END00041232	2010	Various	Various
END00153633	2011	Various	n/a
END00448666	2011	Various	Various
END00692521	2012	Various	Various
END00692522	2013	Various	Various
END00734730	3/31/2009	Various	n/a
END00735353	2004	Various	Various
END00735354	2005	Various	Various
END00735355	2006	Various	Various

END00735356	2007	Various	Various
END00735357	2008	Various	Various
END00735358	2009	Various	Various
END00735359	2010	Various	Various
END00735360	2011	Various	Various
END00735361	2012	Various	Various
ENDO-OPIOID_MDL-01600266	2014	Various	Various
ENDO-OPIOID_MDL-01622909	6/20/2011	Various	Various
ENDO-OPIOID_MDL-02196650	2014	Various	Various
ENDO-OPIOID_MDL-02954028	2010	Various	Various
ENDO-OPIOID_MDL-02954051	2008	Various	Various
ENDO-OPIOID_MDL-02954069	2008	Various	Various
ENDO-OPIOID_MDL-04857592	2/15/2011	Various	n/a
ENDO-OPIOID_MDL-06234588	5/12/2012	Various	Various
EPI002453701	2010	Various	Various
TJC_000000001	2012	Various	Various
CPB0000690	1996-present	Various	Various
CPB0000710	2000-2016	Various	Various
CPB0000688	1996-present	Various	Various
TJC_000000001	2012	Various	Various
JAN000000001	2012	Various	Various
JAN-MS-03089428	6/8/2012	various	various
CPB0000690	1996-present	Various	Various
CPB0000710	2000-2016	Various	Various
CPB0000688	1996-present	Various	Various
TJC_000000001	2012	Various	Various
SFC000000001	1997-2012	Various	Various
SFC000000002	6/8/2012	Various	Various
PKY180246201	1995	Various	n/a
PURCHI-000004624	2008 - 2017	various	various
PPLP003477188	2006 - 2007	various	various
PPLPC017000604922		various	various
SFC000000002		various	various
PPLP003364382		various	various
PPLPC032000236730		various	various
PPLPC030000711488		various	various
JAN-MS-03089428	6/8/2012	various	various
PKY180958798	12/6/1995	various	\$10,000.00
CPB0000690	1996-present	Various	Various
CPB0000710	2000-2016	Various	Various
CPB0000688	1996-present	Various	Various
EPI000664722	Undated	Virginia Society of Rheumatologists	3,000
ENDO-OPIOID_MDL-00996815	10/24/2008	Wisconsin.edu	n/a
ENDO-OPIOID_MDL-01445009	Undated	Worldwide Pain Conference	5,000
WIS_PPSG_000540	6/7/2012		
WIS_PPSG_000421	6/7/2012		
PKY180960325	6/18/1998		
CHI_000441993	8/23/2013		American Academy of Pain Medicine
MNK-T1_0008005740			
PPLP004085625	10/3/2011		
PPLP003465235	2/10/2010		various
PPLP003470606	7/11/2011		
PPLP003332474	9/30/2011		
PPLPC009000026013			

CONFIDENTIAL

Report of Matthew Perri III in Case no. 17-OP-45004 (N.D. Ohio) and Case No. 18-OP-45090 (N.D. Ohio)

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Schedule 18: Amounts paid to KOLs

Begin Bates Number or Source Description	KOL Name (Last Name, First Name)
ALLERGAN_MDL_03352425	Chester Choraży
ALLERGAN_MDL_03352878	David Soua
ALLERGAN_MDL_03352423	Neutel
ALLERGAN_MDL_03352880	Stewart Lewis
ENDO-OPIOID_MDL-00673564	various
ENDO-OPIOID_MDL-00673565	various
ENDO-OPIOID_MDL_04754727	Wallace, Mark MD
ENDO-OPIOID_MDL_04754730	Watson, Peter MD
ENDO-OPIOID_MDL_01445226	Weber, Catherine MD
CHI_002300587	Webster
Exhibit 2 to Insys' Interrogatory Responses	Akbik, Hammam
Exhibit 2 to Insys' Interrogatory Responses	Awerbuch, Gavin
Exhibit 2 to Insys' Interrogatory Responses	Bergese, Sergio
Exhibit 2 to Insys' Interrogatory Responses	Calvo, Alejandro
Exhibit 2 to Insys' Interrogatory Responses	Chen, Julie
Exhibit 2 to Insys' Interrogatory Responses	Chidiac, Tarek
Exhibit 2 to Insys' Interrogatory Responses	Danko, Michael
Exhibit 2 to Insys' Interrogatory Responses	Fermann, Gregory
Exhibit 2 to Insys' Interrogatory Responses	Ferraro, Connie
Exhibit 2 to Insys' Interrogatory Responses	Gerber, Gregory
Exhibit 2 to Insys' Interrogatory Responses	Glauser, Tracey
Exhibit 2 to Insys' Interrogatory Responses	Gupta, Suresh
Exhibit 2 to Insys' Interrogatory Responses	Henry, Jimmy
Exhibit 2 to Insys' Interrogatory Responses	Jobalia, Niles
Exhibit 2 to Insys' Interrogatory Responses	Laham, Riad
Exhibit 2 to Insys' Interrogatory Responses	Liebross, Robert
Exhibit 2 to Insys' Interrogatory Responses	McDowell, Gladstone
Exhibit 2 to Insys' Interrogatory Responses	Moghal, Nadeem
Exhibit 2 to Insys' Interrogatory Responses	Otting, James
Exhibit 2 to Insys' Interrogatory Responses	Pompy, Lesly
2018-02-05_RP_000221-000741	Portenoy, Russell
Exhibit 2 to Insys' Interrogatory Responses	Stoner, Fred
Exhibit 2 to Insys' Interrogatory Responses	Weiss, Michael Rivera
2018-02-05_RP_000221-000741	Portenoy, Russell
MNK-T1_0008005740	various
MNK-T1_0005823847	various
PKY180785676	Cole, Barry
PKY180507584	Cole, Barry
PKY180470186	Dahl, June
PKY180790274	Dahl, June
PKY180947135	Ferrell, Bruce
PPLP003478683	Fine, Perry G.
SFC00000001	Fine, Perry G.
MDL_FSMB_0000000050	Fishman, Scott
SFC00000001	Fishman, Scott



PKY181128168	Foley, Kathleen M.
PKY180784295	Foley, Kathleen M.
SFC00000001	Gallagher, Rollin
PKY180785481	Gloth, Michael F.
PKY180789974	Gloth, Michael F.
SFC00000001	Grabois, Martin
PKY180359545	Lipman, Arthur
PKY180622462	Lipman, Arthur
PKY180961480	McCaffery, Margo
SFC00000001	McCarberg, William
PKY180947825	Mitchell J.M. Cohen
PKY180784205	Narcessian, Elizabeth
PKY180572966	Paice, Judith
PKY180787071	Payne, Richard
2018-02-05_RP_000221-000741	Portenoy, Russell
PKY180958852	Portenoy, Russell
SFC00000001	Portenoy, Russell
PKY180955115	Portenoy, Russell
n/a	Portenoy, Russell
2018-02-05_RP_000001-000136	Portenoy, Russell
PKY180357239	Portenoy, Russell
PKY180357269	Portenoy, Russell
2018-02-05_RP_000221-000741	Portenoy, Russell
PPLPC023000036612	Portenoy, Russell
PPLP004019392	Russell Portenoy
PPLP004019382	Russell Portenoy
PKY180476707	Shaivova, Lauren
PKY180452310	Shaivova, Lauren
PKY180785211	Staats, Peter
PKY182116856	various
PPLP003478494	Webster, Lynn
PPLP003478501	Webster, Lynn
PPLP003479446	Webster, Lynn
PPLP003480046	Webster, Lynn
SFC00000001	Webster, Lynn
Deposition Kathleen Foley	Foley, Kathleen
Deposition Portenoy	Portenoy, Russell
Purdue Reponses to Interrogatories	
Allergan Responses to Interrogatories	
Endo Responses to Interrogatories	
Insys Reponses to Interrogatories	
Mallinkrodt Responses to Interrogatories	
Teva Responses to Interrogatories	

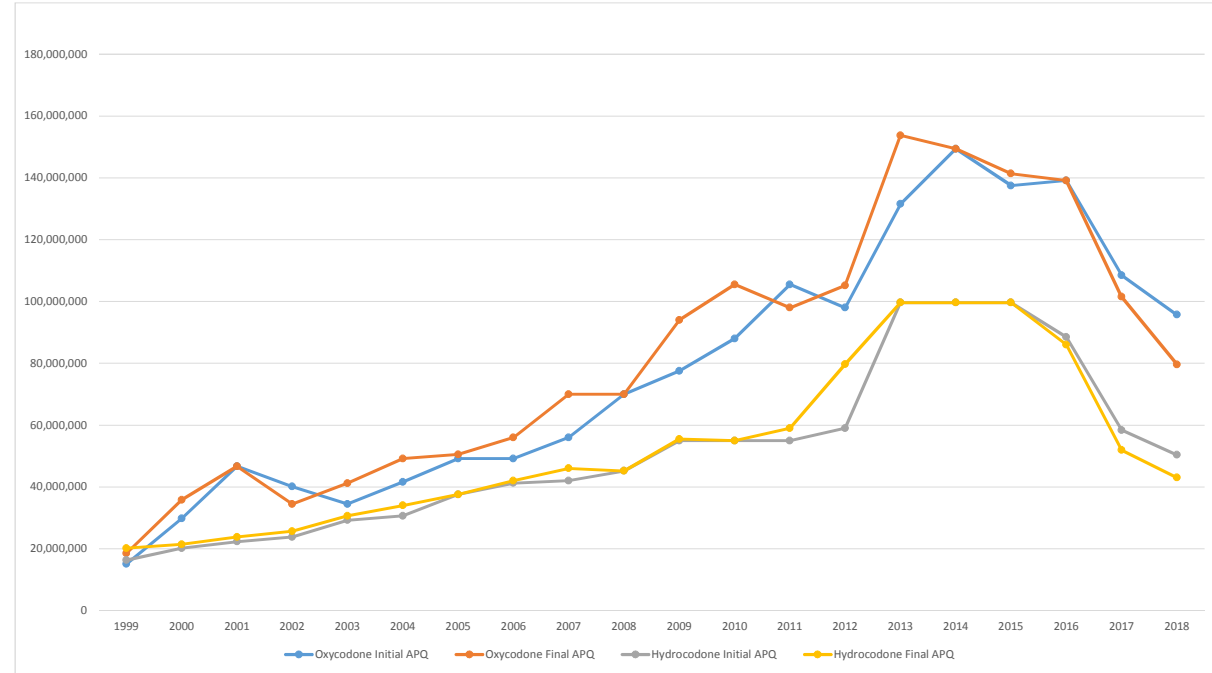
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Report of Matthew Perri III in Case no. 17-OP-45004 (N.D. Ohio) and Case No. 18-OP-45090 (N.D. Ohio)

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#### Schedule 19: DEA Aggregate Production Quotas and Requests

	Oxycodone Initial APQ	Oxycodone Final APQ	Hydrocodone Initial APQ	Hydrocodone Final APQ
1999	15,120,000	18,517,000	16,314,000	20,208,000
2000	29,826,000	35,850,000	20,208,000	21,417,000
2001	46,680,000	46,680,000	22,325,000	23,825,000
2002	40,109,000	34,482,000	23,825,000	25,702,000
2003	34,482,000	41,182,000	29,243,000	30,662,000
2004	41,606,000	49,200,000	30,662,000	34,000,000
2005	49,200,000	50,490,000	37,604,000	37,604,000
2006	49,200,000	56,000,000	41,252,000	42,000,000
2007	56,000,000	70,000,000	42,000,000	46,000,000
2008	70,000,000	70,000,000	45,200,000	45,200,000
2009	77,560,000	94,000,000	55,000,000	55,500,000
2010	88,000,000	105,500,000	55,000,000	55,000,000
2011	105,500,000	98,000,000	55,000,000	59,000,000
2012	98,000,000	105,200,000	59,000,000	79,700,000
2013	131,500,000	153,750,000	99,625,000	99,625,000
2014	149,375,000	149,375,000	99,625,000	99,625,000
2015	137,500,000	141,375,000	99,625,000	99,625,000
2016	139,150,000	139,150,000	88,500,000	86,000,000
2017	108,510,000	101,500,000	58,410,000	51,900,000
2018	95,692,000	79,596,606	50,348,280	43,027,640



BegControl	Producing Party	DocDate
ABDCMDL00048734	AmerisourceBergen	11/8/2017
ABDCMDL00048735	AmerisourceBergen	11/8/2017
ABDCMDL00138161	AmerisourceBergen	9/12/2017
ABDCMDL00138163	AmerisourceBergen	9/12/2017
ABDCMDL00157017	AmerisourceBergen	10/17/2017
ABDCMDL00264761	AmerisourceBergen	3/14/2011
ABDCMDL00264763	AmerisourceBergen	3/15/2011
ABDCMDL00273506	AmerisourceBergen	10/18/2017
ABDCMDL00273507	AmerisourceBergen	10/18/2017
Acquired_Actavis_00009329	TEVA - Allergan Joint Production	12/31/2007
Acquired_Actavis_00009330	TEVA - Allergan Joint Production	12/31/2007
Acquired_Actavis_00385525	TEVA - Allergan Joint Production	1/5/2009
Acquired_Actavis_00454649	TEVA - Allergan Joint Production	2/4/2009
Acquired_Actavis_00454651	TEVA - Allergan Joint Production	2/4/2009
Acquired_Actavis_00455085	TEVA - Allergan Joint Production	10/6/2011
Acquired_Actavis_00455086	TEVA - Allergan Joint Production	10/6/2011
Acquired_Actavis_00455087	TEVA - Allergan Joint Production	10/6/2011
Acquired_Actavis_00456122	TEVA - Allergan Joint Production	11/30/2009
Acquired_Actavis_00457783	TEVA - Allergan Joint Production	4/3/2009
Acquired_Actavis_00511562	TEVA - Allergan Joint Production	10/6/2011
Acquired_Actavis_00604437	TEVA - Allergan Joint Production	4/3/2009
Acquired_Actavis_00949626	TEVA - Allergan Joint Production	4/3/2009
Acquired_Actavis_00949628	TEVA - Allergan Joint Production	4/3/2009
Acquired_Actavis_00954046	TEVA - Allergan Joint Production	4/3/2009
Acquired_Actavis_00954048	TEVA - Allergan Joint Production	4/3/2009
Acquired_Actavis_01375267	TEVA - Allergan Joint Production	1/5/2009
Acquired_Actavis_01377853	TEVA - Allergan Joint Production	11/30/2015
Acquired_Actavis_01378199	TEVA - Allergan Joint Production	7/17/2009
Acquired_Actavis_01378391	TEVA - Allergan Joint Production	12/31/2009
Acquired_Actavis_01378392	TEVA - Allergan Joint Production	12/31/2009
Acquired_Actavis_01378394	TEVA - Allergan Joint Production	12/31/2009
Acquired_Actavis_01378395	TEVA - Allergan Joint Production	12/31/2009
Acquired_Actavis_01378396	TEVA - Allergan Joint Production	12/31/2009
Acquired_Actavis_01379758	TEVA - Allergan Joint Production	11/5/2014
Acquired_Actavis_01379801	TEVA - Allergan Joint Production	8/22/2014
Acquired_Actavis_01401518	TEVA - Allergan Joint Production	10/9/2011
Acquired_Actavis_01673070	TEVA - Allergan Joint Production	8/13/2009
Acquired_Actavis_01696232	TEVA - Allergan Joint Production	10/5/2011
Acquired_Actavis_01812705	TEVA - Allergan Joint Production	10/7/2011
Acquired_Actavis_01812727	TEVA - Allergan Joint Production	10/7/2011
Acquired_Actavis_01818931	TEVA - Allergan Joint Production	10/6/2011
Acquired_Actavis_01818933	TEVA - Allergan Joint Production	10/6/2011
Acquired_Actavis_01820302	TEVA - Allergan Joint Production	10/6/2011
Acquired_Actavis_01841602	TEVA - Allergan Joint Production	12/29/2008
Acquired_Actavis_01841603	TEVA - Allergan Joint Production	12/29/2008
Acquired_Actavis_01841606	TEVA - Allergan Joint Production	12/29/2008

Acquired_Actavis_01842626	TEVA - Allergan Joint Production	6/13/2016
Acquired_Actavis_01842627	TEVA - Allergan Joint Production	6/13/2016
Acquired_Actavis_01842692	TEVA - Allergan Joint Production	4/28/2016
Acquired_Actavis_01842693	TEVA - Allergan Joint Production	4/28/2016
Acquired_Actavis_01842907	TEVA - Allergan Joint Production	4/25/2016
Acquired_Actavis_01842908	TEVA - Allergan Joint Production	4/25/2016
Acquired_Actavis_01843140	TEVA - Allergan Joint Production	4/25/2016
Acquired_Actavis_01843141	TEVA - Allergan Joint Production	4/25/2016
Acquired_Actavis_01843161	TEVA - Allergan Joint Production	4/28/2016
Acquired_Actavis_01843162	TEVA - Allergan Joint Production	4/28/2016
Acquired_Actavis_01843239	TEVA - Allergan Joint Production	5/16/2016
Acquired_Actavis_01843240	TEVA - Allergan Joint Production	5/16/2016
Acquired_Actavis_01843283	TEVA - Allergan Joint Production	5/20/2016
Acquired_Actavis_01843285	TEVA - Allergan Joint Production	5/20/2016
Acquired_Actavis_01843476	TEVA - Allergan Joint Production	5/19/2016
Acquired_Actavis_01843477	TEVA - Allergan Joint Production	5/19/2016
Acquired_Actavis_01843752	TEVA - Allergan Joint Production	5/16/2016
Acquired_Actavis_01843755	TEVA - Allergan Joint Production	5/20/2016
ACTAVIS0229528	Actavis	9/20/2012
ACTAVIS0343060	Actavis	10/6/2011
ACTAVIS0343061	Actavis	10/5/2011
ACTAVIS0343949	Actavis	9/29/2011
ACTAVIS0343955	Actavis	9/29/2011
ACTAVIS0343958	Actavis	1/4/2011
ACTAVIS0368733	Actavis	4/25/2011
ACTAVIS0368741	Actavis	4/25/2011
ACTAVIS0368849	Actavis	4/25/2011
ACTAVIS0492026	Actavis	9/29/2011
ACTAVIS0492037	Actavis	9/29/2011
ACTAVIS0492043	Actavis	9/29/2011
ACTAVIS0492046	Actavis	1/4/2011
ACTAVIS0492075	Actavis	9/29/2011
ACTAVIS0519130	Actavis	4/25/2011
ACTAVIS0519154	Actavis	4/25/2011
ACTAVIS0622041	Actavis	9/29/2011
ACTAVIS0622044	Actavis	1/4/2011
ALLERGAN_MDL_00226789	Allergan	9/20/2012
ALLERGAN_MDL_00489898	Allergan	4/25/2011
ALLERGAN_MDL_00679178	Allergan	10/5/2011
ALLERGAN_MDL_00681039	Allergan	4/25/2011
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CAH_MDL2804_00125720	Cardinal Health	2/9/2012
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CAH_MDL2804_00129878	Cardinal Health	1/27/2012
CAH_MDL2804_00129880	Cardinal Health	1/30/2012
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